

1989 No. 454

HEALTH AND PERSONAL SOCIAL SERVICES**General Medical and Pharmaceutical Services
(Amendment No. 2) Regulations (Northern Ireland) 1989***Made 24th November 1989**Coming into operation in accordance with
regulation 1(2) for certain
purposes**15th December 1989**for certain other purposes**1st January 1990**for all remaining purposes**1st April 1990*

The Department of Health and Social Services in exercise of the powers conferred on it by Articles 56, 63, 106 and 107(6) of the Health and Personal Social Services (Northern Ireland) Order 1972(a) and Article 4 of the Health and Medicines (Northern Ireland) Order 1988(b) and of all other powers enabling it in that behalf and in conjunction with the Department of Finance and Personnel(c) and after consultation with such organisations as appeared to the Department to be representative of the Medical and Pharmaceutical professions as required by Articles 56(5) and 63(3) of the said 1972 Order, hereby makes the following regulations:

Citation, commencement and interpretation

1.—(1) These regulations may be cited as the General Medical and Pharmaceutical Services (Amendment No. 2) Regulations (Northern Ireland) 1989.

(2) These regulations shall come into operation:—

(a) for the purposes of regulations 1, 5(c), 6, 10, 11, 17 and 18(3), on 15th December 1989;

(b) for the purposes of regulations 3(b) (to the extent that it relates to paragraph 16A of Schedule 1, and to Schedule 1C, of the principal regulations), 4 (to the extent that it inserts regulations 3A(1) to (10) and (16) and 3B(1) to (10) and (16) into the principal regulations), 15 (to the extent that it relates to paragraph 11 of Schedule 1) and 16 (to the extent that it relates to Schedules 4, 5 and 8), on 1st January 1990;

(c) for all other purposes on 1st April 1990.

(a) S.I. 1972/1265 (N.I. 14). As amended by S.I. 1978/1907 (N.I. 26), S.I. 1981/432, S.I. 1986/2023 (N.I. 20), S.I. 1986/2229 (N.I. 24), S.R. 1987 No. 457 and S.I. 1988/2249 (N.I. 24)

(b) S.I. 1988/2249 (N.I. 24)

(c) Formerly Department of Finance; see S.I. 1982/338 (N.I. 6) Art. 3

(3) In these regulations “the principal regulations” means the Health and Personal Social Services (General Medical and Pharmaceutical Services) Regulations (Northern Ireland) 1973(a).

Amendment of regulation 2 of the principal regulations

2. In regulation 2(1) (interpretation) of the principal regulations—

(a) the following definitions shall be inserted at the appropriate points in the alphabetical order—

- “child” means a person who has not attained the age of 16 years;
- “child health surveillance list” means a list of doctors maintained by the Agency pursuant to regulation 3A(1);
- “child health surveillance services” means the personal medical services described in paragraph 4B of the terms of service and Schedule 1E;
- “domiciliary visit” means a visit to either the place where the patient resides or the place, other than the doctor’s practice premises, where the doctor is obliged, pursuant to paragraph 8A of the terms of service, to render personal medical services to the patient;
- “group practice” means an association of not less than two doctors both or all of whom—
- (a) have their names included in the medical list;
- (b) co-ordinate, in the course of regular contact between them, their respective obligations under the terms of service for doctors to provide personal medical services to their patients; and
- (c) conduct and manage their practices from at least one common set of practice premises;
- “Local Directory” means the Local Directory of Family Doctors maintained by a Board pursuant to regulation 4A;
- “medical records” means, in relation to any patient, the records maintained in respect of that patient pursuant to paragraph 12 of the terms of service;
- “minor surgery list” shall be construed in accordance with regulation 3B(1);
- “minor surgery services” means the personal medical services described in paragraph 4C of the terms of service and Schedule 1F;
- “parent” includes any adult person who, in the opinion of the doctor, is for the time being fulfilling the obligations normally attaching to a parent in respect of his child;
- “practice premises” means in relation to any doctor, the premises at which he is obliged under the terms of service to attend at specified times in order to be consulted by, or to provide treatment or services for, his patients;

(a) S.R. & O. (N.I.) 1973 No. 421. The relevant amending regulations are S.R. 1975 No. 180, S.R. 1983 No. 182, S.R. 1985 No. 69, S.R. 1985 No. 131, S.R. 1985 No. 318, S.R. 1986 No. 65, S.R. 1986 No. 170, S.R. 1986 No. 289, S.R. 1987 No. 1, S.R. 1987 No. 247, S.R. 1987 No. 323, S.R. 1988 No. 246 and S.R. 1989 No. 11

“restricted list principal” means a doctor who has undertaken to provide general medical services only to a restricted category of patients identified by reference to their connection with a particular establishment or organisation;

“restricted services principal” means a doctor who has undertaken to the Board to provide general medical services limited to—

- (a) child health surveillance services;
- (b) contraceptive services;
- (c) maternity medical services; or
- (d) minor surgery services;

“the Tribunal” means the Tribunal constituted under Article 46 of the Order,”

or to any combination of the above;”;

(b) in the definition of “treatment”—

- (i) for the words “contraceptive services or maternity medical services” there shall be substituted the words “child health surveillance services, contraceptive services, maternity medical services or minor surgery services”,
- (ii) for the word “woman” there shall be substituted the word “person”.

Amendment of regulation 3 of the principal regulations

3. In regulation 3 of the principal regulations (scope of services)—

(a) In paragraph (1) after sub-paragraph (b) there shall be inserted the following sub-paragraph:—

“(bb) the provision by doctors of child health surveillance services and minor surgery services;”

(b) in paragraph (2) at the end there shall be added the words “and Schedules 1G, 1H and 1I shall have effect for the purposes of paragraphs 11A, 16A and 20 respectively of the terms of service.”.

Insertion of new regulations 3A and 3B into the principal regulations

4. After regulation 3 of the principal regulations there shall be inserted the following regulations:—

“Child health surveillance list

3(A).—(1) The Agency shall, from information obtained from the Boards, on and after 1st April 1990, maintain a list (in these regulations referred to as “a child health surveillance list”) of the names of those doctors who have satisfied the Board or, on appeal, the Department, in accordance with the following provisions of this regulation, that they have such medical experience and training as are necessary to enable them properly to provide child health surveillance services.

(2) A doctor may apply, in accordance with paragraph (3), to a Board for the inclusion of his name in the child health surveillance list maintained by the Agency.

(3) An application for the purpose of paragraph (2) shall be made in writing and shall include the information specified in Schedule 1C.

(4) Unless the doctor otherwise agrees, the Board shall determine an application made in accordance with paragraph (3) within 2 months of receiving it.

(5) The Board may, if it thinks fit, hold an oral hearing of any application and shall not refuse an application without giving the doctor an opportunity of an oral hearing.

(6) When determining an application the Board shall have regard in particular to—

- (a) any training undertaken by the doctor; and
- (b) any medical experience gained by him,

during the period of five years immediately preceding the date of the application, which is relevant to the provision of child health surveillance services, and shall seek and take into account any medical advice it considers necessary to enable it to determine the application.

(7) The Board shall determine an application by either—

- (a) granting the application, or
- (b) refusing the application.

(8) The Board shall give notice in writing to the doctor of its determination and shall—

- (a) where it refuses the application, so inform him of the reasons for the determination and of his right of appeal under paragraph (9);
- (b) where it grants the application, include the doctor's name in the child health surveillance list.

(9) If an application is refused the doctor may appeal in writing to the Department within 90 days of receiving notice in writing of the Board's determination.

(10) On any appeal pursuant to paragraph (9), the Department—

- (a) may, if it thinks fit, hold an oral hearing of the appeal;
- (b) in determining the appeal, shall either confirm or reverse the determination of the Board;
- (c) where it reverses the determination of the Board, shall direct that the Board include the doctor's name in the child health surveillance list.

(11) Subject to paragraphs (12) to (16), a doctor's name may be removed by the Board from the child health surveillance list only if—

- (a) it has been removed from the medical list pursuant to regulation 4B or 4E;
- (b) the Board has determined that the doctor has not provided child health surveillance services at any time during the past 5 years;
- (c) the Board has determined that the doctor has, in relation to any patient in respect of whom he has undertaken to provide child health surveillance services, failed, in a material respect, to comply with any requirement of paragraph 4B of the terms of service or Schedule 1E;

- (d) the Board has determined that the doctor is no longer able to provide child health surveillance services.
- (12) Before making any determination under sub-paragraph (b), (c) or (d) of paragraph (11) the Board shall—
- (a) give the doctor 28 days written notice of its intention to do so, and
 - (b) afford the doctor an opportunity of making representations in writing or, if he so desires, orally to the Board.
- (13) Where the Board makes a determination under sub-paragraph (b), (c) or (d) of paragraph (11), it shall send to the doctor a notice which shall include a statement—
- (a) to the effect that, subject to any appeal under paragraph (14), the doctor's name will, after 28 days from the date of notice, be removed from the child health surveillance list maintained by the Agency;
 - (b) of the Board's reasons for its determination; and
 - (c) of the doctor's right of appeal under paragraph (14).
- (14) A doctor who has received a notice in accordance with paragraph (13) may, within 21 days of receiving it, appeal to the Department against the determination of the Board, and pending the determination of the appeal the Board shall not remove his name from the child health surveillance list.
- (15) An appeal to the Department shall be made in writing and shall include a statement of the facts and contentions on which the doctor intends to rely; and on any such appeal the Department shall, if it allows the appeal, direct that the Board shall not remove the doctor's name from the child health surveillance list.
- (16) The Board shall comply with any direction given to it under this regulation.

Minor surgery list

3(B).—(1) The Agency shall, from information obtained from the Boards, on and after 1st April 1990 maintain a list (in these regulations referred to as "the minor surgery list") of the names of those doctors who have satisfied the Board or, on appeal, the Department in accordance with the following provisions of this regulation that they have such medical experience, training and facilities as are necessary to enable them properly to provide minor surgery services.

(2) A doctor may apply, in accordance with paragraph (3), to a Board for the inclusion of his name in the minor surgery list maintained by the Agency.

(3) An application for the purpose of paragraph (2) shall be made in writing and shall include the information specified in Schedule 1D.

(4) Unless the doctor otherwise agrees the Board shall determine an application made in accordance with paragraph (3) within 2 months of receiving it.

(5) The Board may, if it thinks fit, hold an oral hearing of any application and shall not refuse an application without giving the doctor an opportunity of an oral hearing.

(6) When determining an application the Board shall have regard in particular—

(a) for the purpose of assessing the doctor's medical experience, to any—

(i) post-graduate qualification held by him;

(ii) training undertaken by him; and

(iii) medical experience gained by him,

during the period of five years immediately preceding the date of the application, which is relevant to the provision of minor surgery services;

(b) for the purpose of assessing the doctor's facilities, to the premises and the equipment to be used by the doctor in the provision of minor surgery services,

and shall seek and take into account any medical advice it considers necessary to enable it to determine the application.

(7) The Board shall determine an application by either—

(a) granting the application, or

(b) refusing the application.

(8) The Board shall inform the doctor in writing of its determination and shall—

(a) where it refuses the application, give notice in writing to him of the reasons for the determination and of his right of appeal under paragraph (9);

(b) where it grants the application, include the doctor's name in the minor surgery list.

(9) If an application is refused the doctor may appeal in writing to the Department within 90 days of receiving notice in writing of the Board's determination.

(10) On any appeal pursuant to paragraph (9), the Department—

(a) may, if it thinks fit, hold an oral hearing of the appeal;

(b) in determining the appeal, shall either confirm or reverse the determination of the Board;

(c) where it reverses the determination of the Board, shall direct that the Board include the doctor's name in the minor surgery list.

(11) Subject to paragraphs (12) to (16), a doctor's name may be removed from the minor surgery list only if—

(a) it has been removed from the medical list pursuant to regulation 4B or 4E;

(b) the Board has determined that the doctor has not provided minor surgery services at any time during the past 5 years;

(c) the Board has determined that the doctor has, in relation to any patient in respect of whom he has undertaken to provide minor

surgery services failed, in a material respect, to comply with any of the requirements of paragraph 4C of the terms of service or Schedule 1F;

(d) the Board has determined that the doctor is no longer able to provide minor surgery services.

(12) Before making any determination under sub-paragraph (b), (c) or (d) of paragraph (11) the Board shall—

- (a) give the doctor 28 days written notice of its intention to do so, and
- (b) afford the doctor an opportunity of making representations in writing or, if he so desires, orally to the Board.

(13) Where the Board makes a determination under sub-paragraph (b), (c) or (d) of paragraph (11), it shall send to the doctor a notice which shall include a statement—

- (a) to the effect that, subject to any appeal under paragraph (14), the doctor's name will, after 28 days from the date of the notice, be removed from the minor surgery list maintained by the Agency;
- (b) of the Board's reasons for its determination; and
- (c) of the doctor's right of appeal under paragraph (14).

(14) A doctor who has received a notice sent in accordance with paragraph (13) may, within 21 days of receiving it, appeal to the Department against the determination, and pending the determination of the appeal the Board shall not remove his name from the minor surgery list.

(15) An appeal to the Department shall be made in writing and shall include a statement of the facts and contentions on which the doctor intends to rely; and on any such appeal the Department shall, if it allows the appeal, direct that the Board shall not remove the doctor's name from the minor surgery list.

(16) The Board shall comply with any direction given to it under this regulation."

Amendment of regulation 4 of the principal regulations

5. In regulation 4 of the principal regulations (medical list)—

(a) after paragraph (3) there shall be inserted the following paragraphs—

"(3A) An application by a doctor for inclusion on the medical list, except in a case to which paragraph (3B) applies, shall be made by delivering or sending by post to the Board an application in writing which shall include the information and undertakings in Schedule 1A.

(3B) An application by a doctor to succeed to a practice declared vacant or where the Board has resolved that an additional doctor is required, otherwise than in succession to another doctor, shall be made in the manner in paragraph (3A) and shall include the information specified in Schedule 1B."

(b) in paragraph (5)—

- (i) after sub-paragraph (a) there shall be inserted the following sub-paragraphs:—

- “(aa) where he participates in a group practice the name of each doctor in that group practice;
- (ab) an indication whether the doctor is included in either or both of the child health surveillance list and the minor surgery list, and if he is a restricted list principal or a restricted services principal;”;
- (ii) after sub-paragraph (e) there shall be inserted the following sub-paragraph:—
- “(f) provided that the doctor consents to its inclusion, his date of birth, or, if he does not so consent, the date of his first full registration as a medical practitioner.”;
- (c) after paragraph (5) there shall be inserted the following paragraph:—
- “(6) Without prejudice to the provisions of sub-paragraph (7), a doctor whose name is included in the medical list—
- (a) who is requested in writing by the Board by no later than 1st January 1990 to supply information about any matter referred to in paragraph (5), shall supply that information to the Board by 1st February 1990;
- (b) who participates in a group practice, shall furnish the Board with the name of each other doctor in the group practice by 1st February 1990.”.
- (d) the existing sub-paragraphs (6), (7) and (8) shall be renumbered as sub-paragraphs (7), (8) and (9) respectively.

Insertion of regulations 4A, 4B, 4C, 4D and 4E into the principal regulations

6. After regulation 4 of the principal regulations there shall be inserted the following regulations—

“Local Directory of Family Doctors

4A.—(1) Subject to the requirements of this regulation and regulation 4D, the Board shall, by 1st April 1990 prepare, and thereafter maintain, in addition to the medical list, a list to be known as the Local Directory of Family Doctors (in these regulations called a “Local Directory”) comprising, in respect of each doctor whose name is included in the medical list, the following information—

- (a) all the information in respect of the doctor in the medical list, other than his date of birth, unless the doctor has agreed to its inclusion in the Local Directory;
- (b) where the doctor’s date of birth is included in the medical list but he has not agreed to its inclusion in the Local Directory, the date of his first full registration as a medical practitioner;
- (c) the sex of the doctor;
- (d) details of any registrable medical qualification held by the doctor, including the date on which the qualification was awarded;
- (e) the nature of any clinic provided by the doctor for his patients and the frequency with which it is held;
- (f) the numbers of assistant and trainee general practitioners employed by him;

(g) details of—

- (i) the number of other persons employed or available at his practice premises to assist him in the discharge of his obligations under the terms of service,
 - (ii) the nature of the services provided by each such person, and
 - (iii) the average number of hours normally worked by each such person during each week;
- (h) the terms of any consent granted to the doctor by the Board or, on appeal, by the Department pursuant to sub-paragraph 14(4) of the terms of service, concerning the use of a deputising service; and
- (i) where, and to the extent that, the doctor so requests—
- (i) details of any languages, other than English spoken by the doctor or by any person referred to in sub-paragraph (f) or (g),
 - (ii) details of any particular clinical interests of the doctor.

(2) Paragraph (1) shall apply in the case of a restricted list principal or a restricted services principal only to the extent that the Board sees fit.

(3) The Board may, to the extent that it sees fit, also include in the Local Directory other details or material relating to general medical services, general dental services, general ophthalmic services and pharmaceutical services in its area.

(4) A doctor shall, in respect of each Local Directory in which information about him is to be recorded, furnish the Board by 1st February 1990 with so much of the information specified in sub-paragraphs (b) to (h) of paragraph (1) as may be requested by the Board before 1st January 1990.

(5) The Local Directory shall include the name of each doctor in alphabetical order.

(6) Where a doctor practises in partnership or in a group practice with other doctors, the information regarding his practice which falls to be included in the Local Directory pursuant to paragraphs (1)(e), (f), (g) and (i)(i) may, provided each doctor in the partnership or, as the case may be, the group practice agrees, be included in the entry relating to only one of those doctors.

(7) Notwithstanding the provisions of regulation 42, the Board may compile extracts from the information in the Local Directory by reference to geographical areas of the Board's locality, and may make any such extract available to persons to whom, in the opinion of the Board, it is likely to be of interest.

Removal from medical list on grounds of age

4B.—(1) A Board shall, on 1st April 1991, remove from the medical list the name of any doctor who has, on or before that date, attained the age of 70 years.

(2) Where, on any day after 1st April 1991, a doctor whose name is included in the medical list attains the age of 70 years, the Board shall thereupon remove his name from the list.

(3) A Board shall give to any doctor whose name is to be removed from the medical list in accordance with paragraph (1) or (2)—

- (a) notice in writing to that effect not less than 12 months nor more than 13 months before the date on which his name is to be removed;
- (b) a further such notice not less than 3 months nor more than 4 months before that date,

but the failure to give notice to any doctor as required by sub-paragraph (a) or (b) shall not prevent the removal of that doctor's name from the medical list in accordance with paragraph (1) or (2).

(4) A doctor shall, for the purposes of this regulation, supply to the Board by 1st February 1990 such evidence of his date of birth as the Board may, by 1st January 1990, have in writing required from him.

Amendment or withdrawal from the medical list

4C.—(1) A doctor shall, unless it is impractical for him to do so, notify the Board within 14 days of any occurrence requiring a change in the information recorded about him in the medical list.

(2) A doctor shall, unless it is impractical for him to do so, notify the Board in writing at least 3 months in advance of any date on which he intends either—

- (a) to withdraw his name from any of the medical list, the child health surveillance list, the obstetric list or the minor surgery list; or
- (b) to cease to provide any of the following services, or to provide general medical services limited to any of the following services (or any combination of them), namely child health surveillance services, contraceptive services, maternity medical services or minor surgery services.

(2A) The Board shall—

- (a) on being notified by any doctor pursuant to paragraph (1), amend the medical list in relation to that doctor;
- (b) in the case of a notification pursuant to paragraph (2) so amend the medical list either—
 - (i) on the date which falls 3 months after the date of the notification; or
 - (ii) the date from which the Board has agreed that the withdrawal or cessation shall take effect,

whichever is the earlier.

Amendment of the Local Directory

4D.—(1) A doctor shall, unless it is impractical for him to do so, notify the Board within 28 days of any occurrence requiring a change in the information recorded about him in the Local Directory.

(2) The Board shall in the event of a notification pursuant to paragraph (1), make any necessary amendment to the Local Directory.

Removal from the medical list

4E.—(1) Where a Board has determined that a doctor whose name has been included on its medical list—

- (a) has died, or
- (b) has ceased from being a registered medical practitioner, or
- (c) is a doctor whose name is subject of a direction by the Professional Conduct Committee of the General Medical Council pursuant to the provisions of section 36 of the Medical Act 1983(a), or
- (d) is the subject of a direction by the Tribunal requiring the removal of his name from the medical list the Board shall with effect from the date of such determination or the date on which such direction takes effect, whichever is the later, remove the doctor's name from the medical list.

(2) Where a Board has determined in accordance with the succeeding provisions of this regulation that a doctor whose name has been included for the preceding six months on its list has not during that period provided general medical services, the Board shall remove the doctor's name from the medical list.

(3) Before making any determination under paragraph (2) the Board shall—

- (a) give the doctor 28 days notice of its intention to do so,
- (b) afford the doctor an opportunity of making representations to the Board in writing or, if he so desires, orally to a sub-committee appointed by the Board for the purpose, of which sub-committee at least a third of the members shall be doctors from a panel nominated by the Local Medical Committee, and
- (c) consult the Local Medical Committee.

(4) Nothing in this regulation shall affect a doctor who is performing a period of relevant service and no determination under this regulation shall be made in respect of any such doctor until 6 months after he has completed that service.

(5) A doctor on whom a notice has been served under paragraph (2) may, within 21 days of receipt of the notice, appeal to the Department against a decision of the Board to remove him from its medical list and pending the determination of the appeal the Board shall not remove the doctor from the medical list. The notice of appeal shall be in writing and shall set out the facts and contentions on which the doctor intends to rely; and on any such appeal the Department shall, if it allows the appeal, direct that the Board shall not remove the doctor from the medical list.”

Amendment of regulation 19 of the principal regulations

7. In regulation 19 (selection of doctor) after paragraph (3) there shall be added the following paragraphs—

“(4) A parent may, in relation to a child of his who is under the age of 5 years, apply to a doctor—

- (a) who is—
 - (i) the doctor on whose list the child is included (in this paragraph referred to as “the child’s doctor”),
 - (ii) a doctor with whom the child’s doctor is in partnership, or
 - (iii) a doctor with whom the child’s doctor is associated in a group practice; and
- (b) whose name is included in the medical list and child health surveillance list of the Board,

for the provision of child health surveillance services in respect of that child for a period ending on the date on which that child attains the age of 5 years.

(5) A person may apply to a doctor—

- (a) who is—
 - (i) the doctor on whose list he is included (in this paragraph referred to as “his own doctor”).
 - (ii) a doctor with whom his own doctor is in partnership, or
 - (iii) a doctor with whom his own doctor is associated in a group practice; and
 - (b) whose name is included in the medical list and the minor surgery list of the Board,
- for the provision of a procedure specified in Schedule 1F.”.

Amendment of regulation 20 of the principal regulations

8. In regulation 20 of the principal regulations (assignment of persons to a doctor) in paragraph (1) after head (i) of the proviso there shall be inserted the following head:—

- “(ia) a doctor shall not be required to provide either child health surveillance services or minor surgery services for a patient assigned to him under this paragraph unless, following an application pursuant to regulation 19(4) or (5) respectively, he has accepted that patient for the provision of such services;”.

Amendment of regulation 22 of the principal regulations

9. In regulation 22 of the principal regulations (limitation of number of persons on doctors’ lists)—

- (a) the words in paragraph (1) from “For the purposes” to the end of the paragraph shall be deleted;
- (b) after paragraph (1) there shall be inserted the following paragraph:—
 - “(1A) for the purpose of determining under paragraph (1) the number of persons a doctor may have on his list, a doctor who is in partnership shall be treated as an assistant, and not a partner, unless the Board or, on appeal, the Department is satisfied that he—
 - (a) discharges the duties and exercises the powers of a principal in connection with the practice of the partnership; and
 - (b) either—

- (i) in the case of a doctor whose approved hours are not less than 26 hours per week, he is entitled to a share of the profits which is not less than one third of the share of the partner with the greatest share, or
 - (ii) in the case of a doctor whose approved hours are less than 26 hours per week but not less than 19 hours per week he is entitled to a share of the profits which is not less than one quarter of the share of the partner with the greatest share; or
 - (iii) in the case of a doctor whose approved hours are less than 19 hours per week but not less than 13 hours per week he is entitled to a share of the profits which is not less than one fifth of the share of the partner with the greatest share.”;
- (c) after paragraph (6) there shall be added the following paragraph:—

“(7) In this regulation, “approved hours” means, in relation to any doctor, the period approved by the Board in his case, pursuant to paragraph 16A of the terms of service during which he is normally to be available to his patients.”.

Amendment of regulation 24 of the principal regulations

10. In regulation 24 of the principal regulations (change of doctor) for paragraph (1), there shall be substituted the following sub-paragraphs:—

- “(1) (a) Subject to the requirements of sub-paragraph (b), a person who is on a doctor’s list of patients may apply to any other doctor providing general medical services for acceptance on that other doctor’s list of patients.
- (b) An application pursuant to sub-paragraph (a) shall be made in accordance with regulation 19(1).
- (c) A person who has applied pursuant to sub-paragraph (a) to, and been refused acceptance by, any doctor may apply to the Agency for assignment to a doctor whose name is included in the medical list.”.

Amendment of regulation 30 of the principal regulations

11. In regulation 30 of the principal regulations (change of doctor) for paragraphs (2) and (3) substitute the following paragraphs—

“(2) A woman who has arranged with a doctor (in this regulation referred to as “the original doctor”) for the provision of maternity medical services may terminate the arrangement—

- (a) by so informing the Board in writing;
- (b) by so informing in writing the original doctor who shall within 7 days notify the Board in writing; or
- (c) by making a new arrangement with another doctor who shall within 7 days notify the Board in writing of the new arrangement.

(3) Where a Board receives notification in accordance with paragraph 2(a) or (c) it shall within 7 days notify the original doctor in writing that the woman’s arrangement with him has been terminated.”

Amendment of regulation 32 of the principal regulations

12. In regulation 32 of the principal regulations (remuneration of doctors)—

- (a) after “The” where it first occurs shall be inserted the words “Boards and the”;
- (b) for sub-paragraph (a) there shall be substituted the following sub-paragraph:—
 - “(a) basic practice allowance, and additional allowances for seniority and employment of assistants;”;
- (c) in sub-paragraph (b) the words “and supplementary” shall be deleted;
- (d) in sub-paragraph (f) the words “for post-graduate training,” shall be deleted;
- (e) sub-paragraph (h) shall be deleted and the existing sub-paragraphs (i) and (j) renumbered (h) and (i) respectively;
- (f) after sub-paragraph (i) the following sub-paragraphs shall be inserted:—
 - “(j) payments in relation to the making of arrangements for, and payments for, the temporary provisions of general medical services;
 - (k) capitation fees in respect of patients who participate in a consultation pursuant to paragraph 8B of the terms of service;
 - (l) capitation fees in respect of patients to whom child health surveillance services are provided;
 - (m) capitation fees in respect of patients living in deprived areas;
 - (n) fees for minor surgery sessions undertaken;
 - (o) fees in respect of the provision of health promotion clinics approved by the Board;
 - (p) target payments in respect of immunisations provided;
 - (q) target payments in respect of cervical cytology;
 - (r) allowances for employment of locums by doctors during confinement, sickness or study leave;
 - (s) allowances for undergoing approved post-graduate education;
 - (t) allowances for the employment of doctors by isolated single-handed doctors;
 - (u) allowances in respect of providing placements in the practice for under-graduate medical students;
 - (v) transitional payments in consequence of changes to doctor’s terms of service.”.

Insertion of new regulation 42A in the principal regulations

13. After regulation 42 of the principal regulations there shall be inserted the following new regulation:—

“42A.—(1) The Board shall make available for inspection at its offices copies of—

- (a) the Local Directory; and
- (b) a compendium of practice leaflets provided to it by doctors whose names are included in its medical list.

(2) The Board may make such documents available for inspection at such other places in its area as appear to it convenient for informing all persons interested or may publish at such places a notice of the places and times at which copies of such documents may be inspected.”.

Insertion of regulations 43A and 43B in the principal regulations

14. After regulation 43 of the principal regulations there shall be inserted the following new regulations:—

“Appointment of medical adviser

43A. The Board shall appoint a doctor to assist it in the exercise of its functions pursuant to paragraph 13A of the terms of service for doctors (inquiries about prescriptions and referrals).

Guidance to doctors

43B. A Board may issue guidance to doctors whose names are included in the medical list to assist them in assessing in accordance with paragraph 14A of the terms of service the qualifications, experience and competence of any employee, or prospective employee, provided that such guidance has regard as appropriate to standards adopted by any appropriate national regulatory body for a profession or occupation or similar body.”.

Amendment of Schedule 1 to the principal regulations

15. Schedule 1 (terms of service for doctors) of the principal regulations shall be amended in accordance with Schedule 1.

Insertion of new Schedules in the principal regulations

16. After Schedule 1 to the principal regulations there shall be inserted the new Schedules 1A, 1B, 1C, 1D, 1E, 1F, 1G, 1H, and 1I set out respectively in Schedules 2, 3, 4, 5, 6, 7, 8, 9 and 10.

Amendment of Schedule 3A to the principal regulations

17. In Schedule 3A to the principal regulations (drugs and other substances not to be prescribed for supply under pharmaceutical services)—

- (a) the following entry shall be omitted:

“Ener-G Gluten-free and Yeast-free Brown Rice Bread”;

- (b) the following entries shall be inserted at the appropriate point in the alphabetical order—

“Alexitol Sodium Tablets
Anadin Paracetamol Tablets
Aspirin Tablets, Effervescent Soluble
Aspro Clear Extra Tablets
Banimax Tablets
Calamage

Colgate Disclosing Tablets
 Cow and Gate Premium Baby Food
 Evident Disclosing Cream
 Ferrol
 Innoxa Finishing Touch Loose Powder
 Innoxa Moisturised Liquid Make-up
 Lucozade
 Milupa Aptamil Baby Milk
 Milupa Camomile Infant Drink
 Milupa Fennel Variety Infant Drink
 Milupa Modified Yoghurt
 Minoxidil Cream
 Minoxidil Ointment
 Minoxidil Solution (for external use)
 Oral B Plaque Check Disclosing Tablets
 Rabenhorst Tomato Juice
 Ribena
 RoC Eye Make-Up Remover Lotion
 Senlax Tablets
 Setlers Extra Strength Tablets.''.

Transitional provisions

18.—(1) Subject to paragraph (2), where, on or after the date on which regulation 12 comes into operation, there falls to be determined an application by a doctor for a payment arising pursuant to a provision of regulation 32 of the principal regulations which has been amended by that regulation 12, the application shall be determined as if that provision had not been so amended.

(2) Paragraph (1) shall not apply in relation to any application received by the Board after 31st March 1991.

(3) Until 1st April 1990 regulation 4(6) of the principal regulations shall have effect as if the reference in that paragraph to “any matter referred to in paragraph (5)” included a reference to a matter to be inserted in that paragraph (5) by virtue of regulation 5(b)(ii) of these regulations.

Sealed with the Official Seal of the Department of Health and Social Services on 24th November 1989.

(L.S.)

J. Scott

Assistant Secretary

Sealed with the Official Seal of the Department of Finance and Personnel on 24th November 1989.

(L.S.)

R. A. H. Miller

Assistant Secretary

**Amendments to Schedule 1 to the Principal Regulations
(Terms of Service for Doctors)**

1. After paragraph 1 (interpretation) there shall be added the following paragraph—

“1A. Where a decision whether any, and if so what, action is to be taken under these terms of service requires the exercise of professional judgment, a doctor shall not, in reaching that decision, be expected to exercise a higher degree of skill, knowledge and care than—

- (a) in the case of a doctor providing child health surveillance services under paragraph 4B or minor surgery services under paragraph 4C, that which any general practitioner included in the child health surveillance list or, as the case may be, the minor surgery list may reasonably be expected to exercise; and
- (b) in any other case, that which general practitioners as a class may reasonably be expected to exercise.”.

2. In paragraph 3 (persons for whose treatment a doctor is responsible) insert after sub-paragraph “(g)” the following sub-paragraph—

“(h) in respect of services under paragraphs 4A or B, persons to whom he has agreed to provide those services.”.

3. After paragraph 4 there shall be inserted the following paragraphs—

“Provision of child health surveillance services and minor surgery services

4A. A doctor whose name is included in the medical list may, in respect of any person on his list or on the list of a doctor with whom he is in partnership or with whom he is associated in a group practice, undertake to provide—

- (a) child health surveillance services, provided that—
 - (i) his name is also included in the child health surveillance list, and
 - (ii) the person in question is a child who is under the age of 5 years;
- (b) minor surgery services, provided that his name is included in the minor surgery list.

4B. A doctor who has undertaken, pursuant to paragraph 4A(a), to provide child health surveillance services to any child shall, in respect of that child—

- (a) provide all the services described in paragraph 1 of Schedule 1E, other than any examination so described which the parent refuses to allow the child to undergo, until the date upon which the child attains the age of 5 years;
- (b) maintain such records as are specified in paragraph 2 of that Schedule; and
- (c) furnish the Board with such information as is specified in paragraph 3 of that Schedule in accordance with the requirements of that paragraph.

4C.—(1) A doctor who has undertaken, pursuant to paragraph 4A(b), to provide minor surgery services in respect of any patient shall offer to provide any of the procedures described in Schedule 1F which it is, in his opinion, appropriate for him to provide in the case of that patient.

(2) Where a doctor provides minor surgery services in respect of a patient who is not included on his list, he shall inform in writing the doctor on whose list the patient is included of the outcome of the procedure.”.

4. After paragraph 5 there shall be inserted the following paragraph—

“Termination of responsibility for patients

5A.—(1) An undertaking referred to in paragraph 4A(a) shall cease forthwith to be effective if—

(a) either—

(i) the parent informs the doctor, or

(ii) the doctor informs the parent,

that he wishes the undertaking to have no further effect;

(b) the child has been removed from the doctor’s list, from that of his partner or from that of a doctor with whom he is associated in a group practice, as the case may be, and has not been transferred to any other of those lists;

(c) the parent—

(i) has been invited to arrange for the child to attend for an examination referred to in paragraph 1(b) of Schedule 1E, and

(ii) fails within 42 days to respond to that invitation; or

(d) any examination referred to in paragraph 1(b) of that Schedule is undertaken in respect of the child otherwise than by the doctor or a person acting on his behalf.

(2) Where, in accordance with sub-paragraph (1), an undertaking referred to in paragraph 4A(a) has ceased to be effective, the doctor shall forthwith—

(a) in a case to which any of heads (a), (c) or (d) of that sub-paragraph applies, so inform the Board in writing; and

(b) in a case to which head (c) or (d) of that sub-paragraph applies, also so inform the parent in writing.”

5. For paragraph 8 (services to patients) there shall be substituted the following paragraphs—

“Nature of service to patients

8.—(1) Subject to paragraphs 1A, 8A and 11(3)(a) a doctor shall render to his patients all necessary and appropriate personal medical services of the type usually provided by general medical practitioners.

(2) The services which a doctor is required by sub-paragraph (1) to render shall include the following—

(a) giving advice, where appropriate, to a patient in connection with the patient’s general health, and in particular about the significance of diet, exercise, the use of tobacco, the consumption of alcohol and the misuse of drugs and solvents;

(b) offering to patients consultations and, where appropriate, physical examinations for the purpose of identifying, or reducing the risk of, disease or injury;

(c) offering to patients, where appropriate, vaccination or immunisation against Measles, Mumps, Rubella, Pertussis, Poliomyelitis, Diphtheria and Tetanus;

(d) arranging for the referral of patients, as appropriate, for the provision of health services under the Order;

(e) giving advice, as appropriate, to enable patients to avail themselves of personal social services provided under the Order.

(3) A doctor is not required by sub-paragraph (1) or (2)—

- (a) to provide to any person contraceptive services, child health surveillance services, minor surgery services nor, except in an emergency, maternity medical services, unless he has previously undertaken to the Board to provide such services to that person; or
- (b) where he is a restricted services principal, to provide any category of general medical services which he has not undertaken to provide.

Provision of service to patients

8A.—(1) The services referred to in paragraph 8 shall be rendered by a doctor—

- (a) at his practice premises; or
- (b) if the condition of the patient so requires—
 - (i) at the place where the patient was residing when he was accepted by the doctor pursuant to paragraph 4 or, as the case may be, when he was assigned to the doctor pursuant to regulation 20 or, in the case of a patient who was previously on the list of a doctor in a practice declared vacant, when the doctor succeeded to the vacancy, or
 - (ii) at such other place as the doctor has informed the patient and the Board is the place where he has agreed to visit and treat the patient if the patient's condition so requires; or
 - (iii) in any other case, at some other place in the doctor's practice area.

(2) Without prejudice to the generality of sub-paragraph (1) a doctor shall in particular make himself available for consultations at such places and at such times as have been approved by the Board in his case, pursuant to paragraph 16.

Newly registered patients

8B.—(1) Subject to sub-paragraphs (4) to (9), where a patient has been accepted on a doctor's list under paragraph 4 or assigned to a doctor's list under regulation 20, the doctor shall, in addition to and without prejudice to his other obligations in respect of that patient under these terms of service, within 28 days of the date of such acceptance or assignment invite the patient to participate in a consultation either at his practice premises or, if the condition of the patient so warrants, at such other place as the doctor is obliged, under paragraph 8A(1)(b), to render personal medical services to that patient.

(2) Where a patient (or, in the case of a patient who is a child, his parent) agrees to participate in a consultation mentioned in sub-paragraph (1), the doctor shall, in the course of that consultation—

- (a) seek details from the patient as to his medical history and, so far as may be relevant to the patient's medical history, as to that of his consanguineous family, in respect of—
 - (i) illnesses, immunisations, allergies, heredity conditions, medication and tests carried out for breast or cervical cancer,
 - (ii) social factors (including employment, housing and family circumstances) which may affect his health,
 - (iii) factors of his lifestyle (including diet, exercise, use of tobacco, consumption of alcohol, and misuse of drugs or solvents) which may affect his health, and
 - (iv) the current state of his health;
- (b) offer to undertake a physical examination of the patient, comprising—
 - (i) the measurement of his height, weight and blood pressure, and

- (ii) the taking of a urine sample and its analysis to identify the presence of albumin and glucose;
 - (c) record, in the patient's medical records his findings arising out of the details supplied by, and any examination of, the patient under this sub-paragraph;
 - (d) assess whether and, if so, in what manner and to what extent he should render personal medical services to the patient;
 - (e) in so far as it would not, in the opinion of the doctor, be likely to cause serious damage to the physical or mental health of the patient to do so, offer to discuss with the patient (or, where the patient is a child, the parent) the conclusions the doctor has drawn as a result of the consultation as to the state of the patient's health.
- (3) On each occasion where a doctor invites a patient to participate in a consultation pursuant to sub-paragraph (1) he shall—
- (a) make the invitation in writing or, if the invitation is initially made orally, confirm it in writing, by a letter either handed to the patient or his representative or sent to the patient or parent at the address recorded in his medical records as being his last home address;
 - (b) record in the patient's medical records the date of each such invitation and whether or not it was accepted;
 - (c) where, as a result of making the invitation, the doctor becomes aware that the patient is no longer residing at the address shown in his medical records, advise the Agency accordingly.
- (4) A doctor shall not be obliged to offer a consultation pursuant to sub-paragraph (1)—
- (a) if he is a restricted services principal;
 - (b) in respect of a child under the age of 5 years; or
 - (c) to any patient who, immediately before joining the list of the doctor, was a patient of a partner of the doctor and who during the 12 months immediately preceding the date of his acceptance or assignment to the doctor's list, had participated in a consultation pursuant to sub-paragraph (1); or
 - (d) to the extent allowed by the Board, to any patient within a class of patients in respect of which the Board or, on appeal, the Department has, pursuant to sub-paragraphs (5) to (8), deferred the doctor's obligation under sub-paragraph (1).
- (5) Where a doctor assumes responsibility for a list of patients on his succession to a practice declared vacant or otherwise becomes responsible for a significant number of new patients within a short period, he may apply, in accordance with sub-paragraph (6), to the Board for the deferment of his obligation under sub-paragraph (1) for a period not exceeding 2 years from the date of the application.
- (6) An application pursuant to sub-paragraph (5) shall be made in writing and shall be accompanied by a statement of the doctor's proposals, by reference to particular classes of patient, with a view to securing that all eligible patients are invited to participate in a consultation pursuant to sub-paragraph (1) by the end of the period of the deferment.
- (7) Within 2 months of receiving an application the Board shall determine it—
- (a) by approving the application;
 - (b) by approving the application subject to conditions; or

(c) by refusing the application.

(8) A doctor may appeal in writing to the Department against any refusal of an application, or against any condition subject to which an application is approved by the Board pursuant to sub-paragraph (7)(b) and on determining such an appeal the Department shall either confirm the Board's determination or substitute its own determination for that of the Board.

(9) The Department shall notify the doctor in writing of its determination and shall include with the notice a statement of its reasons for the determination.

Patients not seen within 3 years

8C.—(1) Subject to sub-paragraph (2) a doctor shall, in addition to and without prejudice to any other obligation under these terms of service, invite each patient on his list who appears to him—

(a) to have attained the age of 16 years but who has not attained the age of 75 years; and

(b) to have neither—

(i) within the preceding 3 years attended either a consultation with, or a clinic provided by, any doctor, nor

(ii) within the preceding 12 months been offered a consultation pursuant to this sub-paragraph by any doctor,

to participate in a consultation at his practice premises for the purpose of assessing whether he needs to render personal medical services to that patient.

(2) Sub-paragraph (1) shall not apply in the case of a doctor who is a restricted services principal.

(3) In the case of any patient who is included on the doctor's list on 1st April 1990 the first invitation to participate in a consultation pursuant to sub-paragraph (1) shall be made by no later than 1st April 1991.

(4) When inviting a patient to participate in a consultation pursuant to sub-paragraph (1) a doctor shall comply with the requirements of paragraph 8B(3).

(5) Where a patient agrees to participate in a consultation mentioned in sub-paragraph (1), the doctor shall, in the course of that consultation—

(a) where appropriate, seek details from the patient as to his medical history and, so far as may be relevant to the patient's medical history, as to that of his consanguineous family, in respect of—

(i) illness, immunisations, allergies, hereditary diseases, medication and tests carried out for breast or cervical cancer,

(ii) social factors (including employment, housing and family circumstances) which may affect his health,

(iii) factors of his lifestyle (including diet, exercise, use of tobacco, consumption of alcohol and misuse of drugs or solvents) which may affect his health, and

(iv) the current state of his health;

(b) offer to undertake a physical examination of the patient, comprising—

(i) the measurement of his height, weight and blood pressure, and

(ii) the taking of a urine sample and its analysis to identify the presence of albumin and glucose;

(c) record, in the patient's medical records, his findings arising out of the details supplied by, and any examination of, the patient under this sub-paragraph;

- (d) assess whether and, if so, in what manner and to what extent he should render personal medical services to the patient; and
- (e) in so far as it would not, in the opinion of the doctor, be likely to cause serious damage to the physical or mental health of the patient to do so, offer to discuss with the patient the conclusions the doctor has drawn as a result of the consultation as to the state of the patient's health.

Patients aged 75 years and over

8D.—(1) Subject to sub-paragraph (2), a doctor shall, in addition to and without prejudice to any other obligations under these terms of service, in each period of 12 months beginning on 1st April in each year—

- (a) invite each patient on his list who has attained the age of 75 years to participate in a consultation; and
- (b) offer to make a domiciliary visit to each such patient;

for the purpose of assessing whether he needs to render personal medical services to that patient.

(2) Sub-paragraph (1) shall not apply in the case of any doctor who is a restricted services principal.

(3) Any consultation pursuant to sub-paragraph (1) may take place in the course of a domiciliary visit pursuant to that sub-paragraph.

(4) Any invitation and an offer pursuant to sub-paragraph (1) shall be made by a doctor—

- (a) in the case of a patient who is over the age of 75 years and is on the doctor's list on 31st March 1990, by no later than 1st April 1991;
- (b) in the case of a patient who attains the age of 75 years on or after 1st April 1990, within 12 months of his 75th birthday;
- (c) in the case of a patient who—
 - (i) is accepted by the doctor pursuant to paragraph 4, or assigned to him pursuant to regulation 20, after 1st April 1990, and
 - (ii) who has attained the age of 75 years when he is so accepted or assigned,

within 12 months of the date of his acceptance or assignment.

(5) A doctor shall, when making an assessment following a consultation under sub-paragraph (1), record in the patient's medical records the observations made of any matter which appears to him to be affecting the patient's general health, including where appropriate the patients—

- (a) sensory functions;
- (b) mobility;
- (c) mental condition;
- (d) physical condition including continence;
- (e) social environment;
- (f) use of medicines.

(6) A doctor shall keep with the patient's medical records a report of any observations made in the course of a domiciliary visit made pursuant to sub-paragraph (1) which are relevant to the patient's general health.

(7) When inviting a patient to participate in a consultation or offering him a domiciliary visit, pursuant to sub-paragraph (1), a doctor shall comply with the requirements of paragraph 8B(3) as if that sub-paragraph referred to an offer as well as an invitation.

(8) Where a patient has participated in a consultation pursuant to sub-paragraph (1), the doctor shall offer to discuss with him the conclusions he has drawn, as a result of the consultation, as to the state of the patient's health, unless to do so would, in the opinion of the doctor, be likely to cause serious harm to the physical or mental health of the patient."

6. After paragraph 11 there shall be inserted the following paragraph—

"Practice leaflet

11A.—(1) Subject to sub-paragraph (2), a doctor whose name is included in the medical list shall from 1st April 1990 compile in relation to his practice a document (in this paragraph called a "practice leaflet") which shall include the information specified in Schedule 1H.

(2) Sub-paragraph (1) shall, in relation to a doctor who is a restricted list principal or a restricted services principal, apply only to the extent that the Board see fit.

(3) A doctor shall review his practice leaflet at least once in every period of 12 months, and shall make any amendments necessary to maintain its accuracy.

(4) A doctor shall from 1st April 1990, or from such later date (being not later than 1st July 1990) as the Board may allow, make available a copy of the most recent edition of his practice leaflet to the Board, the Agency, to each patient on his list and to any other person who, in the doctor's opinion, reasonably requires one.

(5) A doctor who practises in partnership with other doctors whose names are included in the medical list shall satisfy the requirements of this paragraph if he makes available a practice leaflet, compiled and, where appropriate, revised in accordance with sub-paragraphs (1) and (3) which relates to the partnership as a whole, and in such a case a doctor may, if he so wishes, also produce a practice leaflet relating to his own activities."

7. After paragraph 13 there shall be inserted the following paragraph—

"Inquiries about prescriptions and referrals

13A.—(1) A doctor whose name is included in the medical list shall, subject to sub-paragraphs (2) and (3), sufficiently answer any inquiries, whether oral or in writing, from a Board concerning—

- (a) any prescription form issued by the doctor under these terms of service;
- (b) the considerations by reference to which the doctor issues such forms under these terms of service;
- (c) the referral by the doctor under these terms of service of any patient to any other services provided under the Order; and
- (d) the considerations by reference to which the doctor refers patients to any such services.

(2) An inquiry referred to in sub-paragraph (1) may be made only for the purpose either of obtaining information to assist the Board to discharge its functions or of assisting the doctor in the discharge of his obligations under these terms of service.

(3) A doctor shall not be obliged to answer any inquiry referred to in sub-paragraph (1) unless it is made by a doctor appointed under regulation 43A who produces on request written evidence that he is authorised by the Board to make such an inquiry on behalf of the Board."

8.—(1) For sub-paragraph 14(1) there shall be substituted the following sub-paragraphs—

“14.—(1) Subject to sub-paragraphs (1)(a), (2), (2A) and (2B) a doctor shall give treatment personally.

(1) (a) In the case of general medical services, other than child health surveillance services, minor surgery services, or maternity medical services, a doctor shall be under no obligation to give treatment personally to a patient if such reasonable steps as are appropriate are taken to ensure continuity of treatment may be given—

(a) by another doctor acting as deputy, whether or not he is a partner or assistant, or

(b) if it is treatment which is clinically reasonable in the circumstances to delegate, by a person whom the doctor has authorised and who is competent to carry out such treatment.”;

(2) After sub-paragraph (2) there shall be inserted the following sub-paragraphs—

“(2A) In the case of child surveillance services, a doctor who has, pursuant to paragraph 4A(a), undertaken to provide such services may employ for the purposes of providing such services a deputy or an assistant whose name is included in a child health surveillance list or, with the consent of the Board, some other deputy or assistant.

(2B) In the case of minor surgery services, a doctor who has, pursuant to paragraph 4A(b), undertaken to provide such services may employ a deputy or an assistant whose name is included in a minor surgery list to conduct a procedure described in Schedule 1F.”.

9. After paragraph 14 there shall be inserted the following paragraphs—

“Employees

14A.—(1) A doctor before employing any person to assist him in the provision of general medical services shall take reasonable care to satisfy himself that the person in question is both suitably qualified and competent to discharge the duties for which he is to be employed.

(2) When considering the competence and suitability of any person for the purpose of sub-paragraph (1), a doctor shall have regard, in particular to—

(a) that person’s academic and vocational qualifications;

(b) that person’s training and his experience in employment;

(c) any guidance issued by the Board pursuant to regulation 43B.

(3) A doctor shall afford to each employee reasonable opportunities to undertake appropriate training with a view to maintaining that employees’ competence.

Duration of doctor’s responsibility

14B. A doctor is responsible for ensuring the provision to his patients of the services referred to in paragraph 8 throughout each day during which his name is on the medical list.”.

10. In paragraph 16 sub-paragraph (c) shall be deleted.

11. After paragraph 16 (arrangements for practice) there shall be inserted the following paragraphs—

“Doctors’ availability to patients

16A.—(1) Any doctor whose name is included in the medical list shall, after 31st March 1990—

- (a) normally be available at such times and places as shall have been approved by the Board or, on appeal, by the Department in his case, in accordance with the requirements of the following provisions, following an application by the doctor; and
 - (b) inform his patients about his availability in such manner as the Board may require in accordance with sub-paragraph (14).
- (2) Subject to sub-paragraphs (3) and (4) a Board shall not approve any application submitted by a doctor in relation to the times at which he is to be available unless it is satisfied that the times proposed are such that—
- (a) the doctor will normally be available—
 - (i) in 42 weeks in any period of twelve months,
 - (ii) during not less than 26 hours in any such week, and
 - (iii) on 5 days in any such week, and
 - (b) the hours for which the doctor will normally be available in any week are to be allocated between the days on which he will normally be available in that week in such a manner as is likely to be convenient to his patients.
- (3) On any application made pursuant to sub-paragraph (1) by a doctor who is a restricted services principal or a restricted list principal—
- (a) sub-paragraph (2) shall not apply; and
 - (b) the Board shall approve the application provided that it is satisfied that the times at which the doctor proposes normally to be available are likely to be convenient to his patients.
- (4) The Board may, in relation to the application of any doctor—
- (a) who seeks normally to be available on only 4 days in any week referred to in sub-paragraph (2)(a), excuse the doctor from the requirement of head (a)(iii) of that sub-paragraph and approve the application to the extent allowed by paragraph 16B;
 - (b) who seeks normally to be available for either—
 - (i) less than 26 hours but not less than 19 hours, or
 - (ii) less than 19 hours but not less than 13 hours,in any week referred to in sub-paragraph (2)(a), excuse the doctor from the requirements of head (a)(ii) and (iii) of that sub-paragraph and approve the application to the extent allowed by paragraph 16B;
 - (c) to whom either paragraph 16D or 16E applies, excuse the doctor from the requirement of head (a)(ii) and (iii) of sub-paragraph (2) to the extent allowed by paragraph 16D or, as the case may be, paragraph 16E.
- (5) In this paragraph and in paragraphs 16B to 16E, “available” means, in relation to a doctor, available to provide general medical services to his patients, and for the purposes of calculating the times at which a doctor is to be regarded as available—
- (a) account may be taken of any period when the doctor is attending at his practice premises or at any clinic provided by him for his own patients, and of any time spent making a domiciliary visit; but
 - (b) no account shall be taken of time spent by the doctor holding himself in readiness to make a domiciliary visit if required by any patient;
- and “availability” shall be construed accordingly.
- (6) An application by a doctor in relation to any place at which he is to be available shall not be approved by the Board unless it is satisfied that the place at which the doctor proposes to be available is likely to be convenient to his patients.

(7) An application for approval pursuant to sub-paragraph (1) shall be made in writing to the Board and shall—

- (a) include the information specified in Part I of Schedule 1G; and
- (b) where appropriate, also include—
 - (i) in the case of a doctor to whom sub-paragraph (3) applies, the additional information specified in Part II of that Schedule;
 - (ii) in the case of a doctor to whom sub-paragraph (4)(a) applies, the additional information specified in Part III of that Schedule;
 - (iii) in the case of a doctor to whom sub-paragraph (4)(b) applies, the additional information specified in Part IV of that Schedule;
 - (iv) in the case of a doctor to whom paragraph 25D(1) applies, the additional information specified in Part V of that Schedule; and
 - (v) in the case of a doctor to whom paragraph 25E(1) applies, the additional information specified in Part VI of that Schedule;
- (c) be made—
 - (i) in the case of a doctor whose name is included in the medical list on 1st January 1990, by 1st February 1990,
 - (ii) in the case of a doctor who is notified after 1st January 1990 that his name is included in a medical list, within 28 days of his receiving such notification.

(8) The Board shall determine an application within 28 days of receiving it.

(9) In determining any application, the Board shall either—

- (a) grant approval;
- (b) grant approval subject to such conditions as the Board sees fit to impose for the purpose of securing that the doctor is available at such times and places as are convenient to his patients; or
- (c) refuse approval.

(10) The Board shall notify the doctor in writing of its determination, and, where it refuses an application or grants an application subject to conditions, it shall send the doctor a statement in writing of the reasons for its determination and of the doctor's right of appeal under sub-paragraph (11).

(11) A doctor may within 28 days of receiving a notification pursuant to sub-paragraph (10) appeal in writing to the Department against any refusal of approval or against any condition imposed pursuant to sub-paragraph (9).

(12) The Department may when determining an appeal either confirm the determination of the Board or substitute its own determination for that of the Board.

(13) The Department shall notify the doctor in writing of its determination and shall in every case include with the notification a written statement of the reasons for the determination.

(14) The Board may, as it considers appropriate, require a doctor to inform his patients, by displaying a notice at his practice premises or sending notices to them, about the times and places at which he is available.

Doctors available for only 4 days a week

16B.—(1) Subject to sub-paragraph (3), where the Board is satisfied that, by reason of a doctor's participation in health-related activities (other than the provision of general medical services to his patients) he would be likely to suffer an unreasonable degree of inconvenience if paragraph 16A(2)(a)(iii) applied in

his case, it may give its approval for the doctor normally to be available on only 4 days in any week referred to in sub-paragraph (2)(a) of that paragraph.

(2) For the purposes of sub-paragraph (1), "health-related activities" means activities connected with—

- (a) the organisation of the medical profession or the training of its members;
- (b) the provision of medical care or treatment;
- (c) the improvement of the quality of such care or treatment; or
- (d) the administration of arrangements pursuant to Article 56 of the Order for the provision of general medical services,

and in determining whether any activity is a health-related activity, the Board shall have regard to the illustrative list in Part VII of Schedule 1G.

(3) The Board shall not give its approval in accordance with sub-paragraph (1) if, in its opinion—

- (a) the effectiveness of the doctor's services to his patients is likely to be significantly reduced; or
- (b) his patients are likely to suffer significant inconvenience,

by reason of the doctor having been relieved from the requirements of paragraph 16A(2)(a)(iii).

Doctors available for less than 26 hours a week

16C.—(1) Subject to sub-paragraph (2), the Board may in the case of a doctor—

- (a) who practices in partnership with another doctor—
 - (i) whose name is included in the medical list, and
 - (ii) who is normally available for not less than 26 hours in each of the weeks referred to in paragraph 16A(2)(a); and
- (b) who seeks normally to be available for either—
 - (i) less than 26 hours but not less than 19 hours, or
 - (ii) less than 19 hours but not less than 13 hours,

determine the application as if for the reference to 26 hours in paragraph 16A(2)(a)(ii) there were substituted a reference to 19 hours or 13 hours, as the case may be.

(2) Any approval of an application which has been determined in accordance with sub-paragraph (1) shall be subject to the condition that the approval shall lapse after the expiry of a period of 6 months from the date on which the doctor ceases to satisfy head (a) of that sub-paragraph.

Doctors jointly available for 26 hours a week

16D.—(1) Subject to sub-paragraph (2), where a doctor applies for the approval of the Board pursuant to paragraph 16A(1) jointly with another doctor—

- (a) with whom he practises in partnership;
- (b) whose name is included in the medical list; and
- (c) with whom he proposes to operate an arrangement whereby:—
 - (i) each doctor will normally be available for less than 26 hours in any week referred to in paragraph 16A(2)(a), but
 - (ii) the hours for which both doctors will normally be available will in aggregate be not less than 26 hours in any such week,

the Board may approve the application, notwithstanding that neither doctor can himself satisfy the requirement specified in paragraph 16A(2)(a)(ii).

(2) Any approval of an application to which sub-paragraph (1) applies shall be subject to the condition that the approval shall lapse after the expiry of a period of 6 months from the date on which the arrangement referred to in head (c) of that sub-paragraph comes to an end.

Doctors previously available for less than 20 hours a week

16E.—(1) Subject to sub-paragraph (3), where a doctor—

- (a) does not practise in partnership with any other doctor;
- (b) has no more than 599 patients on his list on 31st January 1990; and
- (c) during the period of 12 months immediately preceding that date—
 - (i) was normally available for an average of less than 20 hours each week, and
 - (ii) in consequence, had his remuneration abated by the Board, in accordance with the Statement published pursuant to regulation 32;
- (d) seeks normally to be available, in each week referred to in regulation 16A(2)(a), for not less than the number of hours for which he had, on average, been available in each week during the period mentioned in head (c) above,

the Board may approve the application notwithstanding that the doctor will not normally be available in accordance with paragraph 16A(2)(a)(ii).

(2) When calculating the average hours for the purposes of sub-paragraph (1)(c)(i) account shall be taken of the aggregate number of hours for which the doctor was normally available to patients in the areas of all Boards on whose medical list his name was included.

(3) Any approval by the Board in relation to a doctor to whom sub-paragraph (1) applies shall be subject to the condition that it shall lapse on 1st April 1991.

Notification of change of place of residence

16F. Where a doctor whose name is included in the medical list changes his place of residence he shall notify the Board in writing of the change not later than 28 days after such change.”

12. In paragraph 17(1) (acceptance of fees) there shall be added at the end—

- “(o) where the person is not one to whom any of paragraphs (a), (b) or (c) of Article 62(1) of the Order applies (including by reason of regulations under Article 62(6)), for testing the sight of that person.”

13. After paragraph 19 there shall be inserted the following paragraph:—

“Annual Reports

20.—(1) A doctor whose name is included in the medical list shall provide annually to the Board a report in accordance with this paragraph, relating to the provision by him of personal medical services (in this paragraph called an “annual report”).

(2) An annual report shall contain the information specified in Schedule II.

(3) Each report shall be compiled in respect of the period of 12 months ending on 31st March of the year in which it is provided and shall be sent to the Board by 30th June of that year.

(4) The first annual report shall be sent to the Board by 30th June 1991 and shall be compiled in respect of the period of 12 months ending on 31st March 1991.

(5) In the case of a doctor who practises in partnership with other doctors whose names are included in the medical list, the information referred to in sub-paragraph (2) may alternatively be provided in the form of an annual report in respect of the partnership as a whole instead of by each doctor in the partnership individually and in such a case a doctor may, if he so wishes, also provide his own annual report.

(6) Where a Board requires that the information referred to in sub-paragraph (2) be provided on a form supplied by the Board, the doctor shall use that form.

(7) A Board shall not disclose any annual report to any person, unless otherwise lawfully empowered to do so.”

(NEW SCHEDULE 1A TO BE INSERTED IN THE PRINCIPAL REGULATIONS)

"SCHEDULE 1A

regulation 4(3A)

Information and undertakings to be included in an Application for inclusion in the Medical List

1. Full name
2. Sex
3. Date of birth
4. Private address
5. Medical qualifications and where obtained
6. Registration number in the Medical Register and date of first registration
7. Information about general medical services to be provided for persons in the Board's area, and in particular whether—
 - (a) including }
 excluding } maternity medical services
 limited to }
 - (b) including }
 excluding } contraceptive services
 limited to }
 - (i) excluding }
 including } fitting of intra uterine devices
 - (ii) restricted }
 not restricted } to patients to whom GP or partner provides
 other personal medical services
 - (c) including }
 excluding } child health surveillance services
 limited to }
 - (d) including }
 excluding } minor surgery services
 limited to }
8. Present or most recent appointment
9. (a) Name(s) and address(es) of intended partner(s) and whether or not they are on the Medical List.
 (b) Names and addresses of members of group (other than those already specified in (a) above) with whom doctor intends to practise.
10. Whether applied/intending to apply for inclusion on obstetric list/child health surveillance list/minor surgery list.
11. Notification of proposed practice area (including street map).

12. Notification of proposed practice premises.
13. Notification of proposed days and hours of attendance.
14. Proposed place of residence (including telephone number and distance from main surgery) and an undertaking to inform the Board whenever changing permanent residence.
15. Telephone number(s) at which prepared to receive messages.
16. Undertaking that if accepting as a patient a person who at the time of acceptance is residing at a place outside the practice area he will visit him at that address."

(NEW SCHEDULE 1B TO BE INSERTED IN THE PRINCIPAL REGULATIONS)

“SCHEDULE 1B regulation 4(3B)

Information and Undertakings to be included in an Application to fill a Vacancy

1. Full name.
2. Sex.
3. Private address.
4. Telephone number.
5. Declaration that he is a registered medical practitioner, included in medical register in that name.
6. Whether applying to succeed to a practice, or be appointed to a vacancy in practice.
7. Address of that practice, practice area, practice premises.
8. Intended days and hours of attendance.
9. Telephone number(s) at which prepared to receive messages.
10. Undertaking that if accepting as a patient a person who at the time of acceptance or succession is residing at a place outside the practice area he will visit him at that address.
11. Date of birth.
12. Date and place of medical registration.
13. Medical qualifications and where obtained.
14. Whether or not on the medical list.
15. If not on the list, present or most recent appointment, and if in general practice, whether as principal, assistant or locum.
16. Professional experience (including starting and finishing dates of each appointment) separated into:
 - (a) trainee or assistant experience in general practice;
 - (b) general practice experience;
 - (c) hospital appointments;
 - (d) other (including obstetric) experience;
 - (e) any additional supporting particulars.
17. The name and address of principal to whom trainee or assistant.

18. Particulars of covenants restricting medical practice by the applicant in the Board's area.

19. Name and address of intended partner(s) and whether or not they are included on the Medical List.

20. Names and addresses of 2 referees.

21. If applicant is not on the Medical List—

(1) if approved by obstetric committee or if intending to apply to that Committee for approval of obstetric experience;

(2) particulars of any outstanding application for inclusion on the medical list;

(3) information about general medical services to be provided and, in particular, whether—

(i) including }
 excluding } maternity medical services
 limited to }

(ii) including }
 excluding } contraceptive services
 limited to }

(i) excluding }
 including } fitting of intra uterine devices

(ii) restricted }
 not restricted } to patients to whom GP or partner provide other personal medical services

(iii) including }
 excluding } child health surveillance services
 limited to }

(iv) including }
 excluding } minor surgery services
 limited to }

(4) whether or not intending to apply for—

(i) inclusion in minor surgery list.

(ii) inclusion in child health surveillance list.

(5) undertaking to be bound by terms of service.”.

(NEW SCHEDULE 1C TO BE INSERTED IN THE PRINCIPAL REGULATIONS)

“SCHEDULE 1C

regulation 3(A)(3)

Information to be Supplied by Doctor applying for Inclusion in the Child Health Surveillance List

1. Name.
2. Address of practice premises.
3. Registration number in the Medical Register and date of first registration.
4. Details of relevant medical experience after date of first registration (and if appropriate before) during last 5 years, together with any references.
5. Title of postgraduate qualifications held and date awarded.”.

(NEW SCHEDULE 1D TO BE INSERTED IN THE PRINCIPAL REGULATIONS)

“SCHEDULE 1D

regulation 3(B)(3)

**Information to be Supplied by Doctor applying for Inclusion in Minor
Surgery List**

1. Name.
2. Address of practice premises.
3. Registration number in the Medical Register and date of first registration.
4. Details of relevant medical experience after date of first registration (and if appropriate before) during last 5 years, together with any references.
5. Details of premises and equipment to be used.
6. Title of postgraduate qualifications held and date awarded.”.

(NEW SCHEDULE 1E TO BE INSERTED IN THE PRINCIPAL REGULATIONS)

“SCHEDULE 1E

regulation 2(1)
Schedule 1,
paragraph 4B(a)**Child Health Surveillance Services**

1. The services referred to in paragraph 4B(a) of Schedule 1 shall comprise—
 - (a) the monitoring—
 - (i) by the consideration of information concerning the child received by or on behalf of the doctor, and
 - (ii) on any occasion when the child is examined or observed by or on behalf of the doctor (whether pursuant to sub-paragraph (b) or otherwise), of the health, well-being and physical, mental and social development (all of which characteristics are referred to in this Schedule as “development”) of the child while under the age of 5 years with a view to detecting any deviations from normal development;
 - (b) the examination of the child by or on behalf of the doctor on so many occasions and at such intervals as shall have been agreed by the Board in whose area the child resides for the purposes of the provision of child health surveillance services generally in that area.

2. The records mentioned in paragraph 4B(b) of Schedule 1 shall comprise an accurate record of—
 - (a) the development of the child while under the age of 5 years, compiled as soon as is reasonably practicable following the first examination mentioned in paragraph 1(a) and, where appropriate, amended following each subsequent examination mentioned in that sub-paragraph; and
 - (b) the responses (if any) to offers made to the child’s parent for the child to undergo any examination referred to in paragraph 1(b).

3. The information mentioned in paragraph 4B(c) of Schedule 1 shall comprise—
 - (a) a statement, to be prepared and dispatched to the relevant Board referred to in paragraph 1(b) as soon as is reasonably practicable following any examination referred to in paragraph 1(a), of the procedures undertaken in the course of that examination and of the doctor’s findings in relation to each procedure;
 - (b) such further information regarding the development of the child while under the age of 5 years as the Board may request.”.

(NEW SCHEDULE 1F TO BE INSERTED IN THE PRINCIPAL REGULATIONS)

"SCHEDULE 1F

règulation 2(1)
Schedule 1,
paragraph 4C(1)**Minor Surgery Procedures**

Injections:	intra articular peri articular varicose veins haemorrhoid
Aspirations:	joints cysts bursae hydrocele
Incisions:	abcesses cysts thrombosed piles
Excisions:	sebaceous cysts lipoma skin lesions for histology intradermal naevi, papilloma, dermatofibroma and similar conditions warts ganglions removal of toe nails (partial and complete)
Curette Cautery and cryrocautery:	warts and verrucae other skin lesions e.g. molluscum contagiosum
Other:	ligation of varicose veins removal of foreign bodies nasal cautery."

(NEW SCHEDULE 1G TO BE INSERTED INTO THE PRINCIPAL REGULATIONS)

“SCHEDULE 1G

Regulation 3(2)
Schedule 1,
paragraph 16A

PART I

**Information to be included with any application under paragraph 16A of
Schedule 1**

1. The address of the proposed practice premises.
2. The days in each week during which the doctor will normally be in attendance at the practice premises and available for consultation by his patients.
3. The hours of each such attendance by the doctor.
4. The hours of any attendance by the doctor on those occasions when he is not usually available to provide the full range of services specified in paragraph 8 of the terms of service (for example, for providing emergency treatment only).
5. The frequency, duration and purpose of any clinic provided by the doctor.
6. The estimated total time to be spent each week making any domiciliary visits.
7. The doctor's proposals for notifying patients of the times and places approved by the Board.
8. The terms of any condition imposed by the Board.
9. His proposals for discharging his continuous responsibility for his patients.

PART II

**Additional information to be included in any application by a doctor who
is a restricted services principal or a restricted list principal**

1. In the case of a restricted services principal—
 - (a) the proposed allocation of the total number of hours for which he is normally to be available in any week between each category of services provided; and
 - (b) where different services are to be provided at different places, the place at which each category of services is to be provided.
2. In the case of a restricted list principal, the name, address and nature of the establishment(s) or organisation(s) with which his patients are connected.

PART III

Additional information to be included in any application by a doctor who seeks normally to be available on only 4 days in each week

1. A brief description of each health-related activity with reference to which the application is made.
2. The days in each week during which the doctor will be undertaking that activity.
3. The number of hours in each week which are likely to be occupied in the course of such activity.

PART IV

Additional information to be included in any application by a doctor who seeks normally to be available for less than 26 hours in each week

1. The level of reduced availability sought: either—
 - not less than 19 hours; or
 - not less than 13 hours.
2. The proposed allocation of those hours between the days on which the doctor is normally to be available.
3. The name(s) of the doctor's partner(s).
4. Whether such reduced availability is sought permanently or for only a temporary period.

PART V

Additional information to be included in any application made jointly by doctors to whom paragraph 16D(1) of the terms of service applies

1. The name of the doctor's partner who is joined in the application.
2. The nature of the proposed arrangement, including—
 - (a) the hours for which each doctor will normally be available in each week; and
 - (b) the days on which each doctor will normally be available in each week.

PART VI

Additional information to be included in any application made by a doctor to whom paragraph 16E(1) of the terms of service applies

1. Details of the doctor's practice(s) in the area of any other Board in whose medical list his name is included.
2. The number of hours occupied in each week in the course of such practice(s).

PART VII

Illustrative list of health-related activities*Appointments concerning medical education or training*

Medical appointments within the health service other than in relation to the provision of general medical services.

Medical appointments under the Crown, with Government Departments or Agencies.

Appointments concerning the regulation of the medical profession or the Medical Committee."

(NEW SCHEDULE 1H TO BE INSERTED IN THE PRINCIPAL REGULATIONS)

“SCHEDULE 1H

regulation 3(b)
Schedule 1,
paragraph 11A

Information to be included in Practice Leaflets

Personal and professional details of the doctor

1. Full name.
2. Sex.
3. Medical qualifications registered by the General Medical Council.
4. Date and place of first registration as medical practitioner.

Practice Information

5. The times approved by the Board during which the doctor is personally available for consultation by his patients at his practice premises.

6. Whether an appointments system is operated by the doctor for consultations at his practice premises.

7. If there is an appointments system, the method of obtaining a non-urgent appointment and the method of obtaining an urgent appointment.

8. The method of obtaining a non-urgent domiciliary visit and the method of obtaining an urgent domiciliary visit.

9. The doctor's arrangements for providing personal medical services when he is not personally available.

10. The method by which patients are to obtain repeat prescriptions from the doctor.

11. If the doctor's practice is a dispensing practice, the arrangements for dispensing prescriptions.

12. If the doctor provides clinics for his patients, their frequency, duration and purpose.

13. The numbers of staff, other than doctors assisting the doctor in his practice and a description of their roles.

14. Whether the doctor provides (1) maternity medical services (2) contraceptive services (3) child health surveillance services (4) minor surgery services.

15. Whether the doctor is single handed, in partnership, working part-time or on a job share basis or working within a group practice.

16. The nature of any arrangements whereby the doctor or his staff receive patient's comments on his provision of general medical services.

17. The geographical boundary of his practice area by reference to a map of a scale approved by the Board.

18. Whether the doctor's practice premises have suitable access for all disabled patients and, if not, the reasons why they are unsuitable for particular types of disability.

19. If an assistant is employed, details for him as specified in paragraphs 1-4.

20. If the practice either is a general practitioner training practice for the purposes of the Medical Practitioners (Vocational Training) Regulations (N.I.) 1979(a) or undertakes the teaching of medical students, the nature of arrangements for drawing this to the attention of patients."

(a) S.R. 1979 No. 460 amended by S.R. 1986 No. 69 and S.R. 1986 No. 309

(NEW SCHEDULE 11 TO BE INSERTED IN THE PRINCIPAL REGULATIONS)

"SCHEDULE 11

regulation 3(2)

Information to be provided in Annual Reports

1. The number of staff, other than doctors, assisting the doctor in his practice by reference to—

- (i) the total number but not by reference to their names;
- (ii) the principal duties of each employee and the hours each week the employee assists the doctor;
- (iii) the qualifications of each employee;
- (iv) the relevant training undertaken by each employee during the preceding 5 years.

2. The following information as respects the practice premises:—

- (i) any variations in relation to floor space, design or quality since the last Annual Report;
- (ii) any such variations anticipated in the course of the forthcoming period of 12 months.

3. The following information as respects the referral of patients to other services under the Order during the period of the Report:—

(a) as respects those by the doctor to a specialist—

- (i) the total number of patients referred as in-patients;
- (ii) the total number of patients referred as out-patients;

by reference in each case to whichever of the following clinical specialities applies and specifying in each case the name of the hospital concerned:

- General Surgical
- General Medical
- Orthopaedic
- Rheumatology (Physical Medicine)
- Ear, Nose and Throat
- Gynaecology
- Obstetrics
- Paediatrics
- Ophthalmology
- Psychiatry
- Geriatrics
- Dermatology
- Neurology
- Genito-urinary
- X-ray
- Pathology
- Others (including plastic surgery, accident and emergency, endocrinology);

(b) the total number of cases of which the doctor is aware (by reference to the categories listed in sub-paragraph (a)) in which a patient referred himself to services under the Order.

4. The doctor's other commitments as a medical practitioner with reference to—
 - (i) a description of any posts held;
 - (ii) a description of all work undertaken, including, in each case, the annual hourly commitment.
5. The nature of any arrangements whereby the doctor or his staff receive patients' comments on his provision of general medical services.
6. The following information as respects orders for drugs and appliances:
 - (a) whether the doctor's practice has its own dispensary;
 - (b) whether the doctor uses a separate dispensary, and its location;
 - (c) the doctor's arrangements for the issue of repeat prescriptions to patients."

EXPLANATORY NOTE

(This note is not part of the Regulations.)

These regulations further amend the Health and Personal Social Services (General Medical and Pharmaceutical Services) Regulations (Northern Ireland) 1973 ("the principal regulations") which regulate the terms on which general medical and pharmaceutical services are provided under the Health and Personal Social Services (Northern Ireland) Order 1972 ("the 1972 Order").

Regulation 3 of the principal regulations is amended to include child health surveillance services (set out in a new Schedule 1E) and minor surgery services (set out in a new Schedule 1F) among the services provided by medical practitioners ("doctors") in pursuance of arrangements made by a Health and Social Services Board ("the Board") (regulation 3) and new regulations 3A and 3B are inserted to make provision for the Central Services Agency ("the Agency") from information obtained from Boards, to compile and maintain lists of the doctors providing child health surveillance services and minor surgery services (regulation 4). New Schedules 1C and 1D are inserted into the principal regulations to specify the information to be provided by a doctor applying for inclusion of his name in, respectively, the child health surveillance list or the minor surgery list.

Amendments are made to require the Agency to record additional information on the list ("the medical list") it maintains of doctors providing general medical services. A new regulation 4A is inserted in the principal regulations to require the Boards to compile and maintain a Local Directory of Family Doctors ("the Local Directory") in relation to those doctors whose names are included in the medical list, and to oblige doctors to supply certain information to the Board for the purpose of the Local Directory. A new regulation 4B is also inserted to make provision for the removal of a doctor's name from the medical list when he attains the age of 70 (regulation 6). Further amendments in connection with the medical list and the Local Directory are made, respectively, by the insertion in the principal regulations of new regulations 4C and 4D (regulation 6). New Schedules 1A and 1B are inserted into the principal regulations (Schedule 2 and Schedule 3 respectively) to specify lists of particulars to be included in an application by doctors when applying to have their names included in the medical list or to succeed to a practice declared vacant.

Regulation 7 makes provision for a patient's application to a doctor for the provision of child health surveillance services or minor surgery services and consequential amendments are made to govern the provision of such services, in circumstances where a patient is assigned by the Agency to a doctor's list (regulation 8). Regulations 10 and 11 simplify the procedure whereby a patient may change the doctor who is providing, respectively, any general medical services or only maternity medical services. Regulation 12 amends the provision for the remuneration of doctors providing general medical services, and amendments made by regulation 13 provide for the publication by the Boards of the Local Directory and of doctors' practice leaflets.

Transitional provision is made (in regulation 18) in respect of any doctor whose claim for fees and allowances earned before the date from which the amendments relating to doctors' remuneration come into operation is not determined until after that date.

Schedule 1 amends the "terms of service" under which doctors provide general medical services to their patients. A new paragraph 1A of those terms of service is inserted to make provision for the standard of skill, knowledge and care to be expected from doctors providing child health surveillance services and minor surgery services, and an amendment is made to the definition of a doctor's patients in paragraph 3 to include those persons to whom he provides such services. New paragraphs 4A, 4B, 4C and 5A of the terms of service and new Schedules 1E and 1F to the principal regulations are inserted to make detailed provision for the nature and application of child health surveillance services and minor surgery services, and new paragraphs 8 to 8D of the terms of service are inserted to provide, generally and in relation to particular classes of patient, for the nature of the services a doctor must provide. In particular, a doctor is, in addition to his general obligations, required to offer a consultation to newly registered patients (new paragraph 8B), to patients whom he has not seen within the preceding 3 years (new paragraph 8C) and to patients who have attained the age of 75 (new paragraph 8D).

An amendment is made to sub-paragraph 14(1) in connection with the employment of assistants and deputies by doctors when providing child health surveillance services or minor surgery services. A new paragraph 14A is inserted in the terms of service to require a doctor to satisfy himself as to the suitability and competence of prospective employees, having regard in particular to any guidance to doctors by the Board under the new regulation 43B in the principal regulations (inserted by regulation 14).

A new paragraph 16A is inserted in the terms of service to require a doctor to obtain the approval of the Board for the times and places at which he proposes to be available for consultation by his patients, and new paragraphs 16B, 16C, 16D and 16E are also inserted to make provision for the circumstances in which, and the extent to which, a Board may approve a proposal by a doctor to be available for fewer hours, or on fewer days, in each week than are specified in the new paragraph 16A. A new Schedule 1G is inserted in the principal regulations to specify the information to be included in applications by doctors for the purposes of paragraph 16A.

A new paragraph 16F is inserted in the terms of service requiring a doctor to notify the Board of any change in his place of residence. A new paragraph 11A is inserted to oblige a doctor to produce annually, and to make available to the Board, to his patients and to certain other persons, a practice leaflet which must include certain information (specified in a new Schedule 1H) about the personal medical services he provides. New paragraph 13A requires a doctor to answer enquiries made by a Board's medical adviser (appointed in accordance with new regulation 43A) in connection with his prescribing of drugs and appliances for his patients and his referral of them to other services provided under the 1972 Order. A new paragraph 20 also obliges a doctor to

provide annually to the Board a report which must include certain information (specified in a new Schedule 11) about his practice.

Regulation 17 removes one substance from, and includes other drugs and substances in, Schedule 3A to the principal regulations, which contains a list of drugs and other substances which may not be prescribed for supply, and which may not be dispensed, in the course of pharmaceutical services provided under the 1972 Order.

These regulations also effect consequential amendments in the principal regulations arising out of and in connection with the changes mentioned above.

1989 No. 455

This Order has been exempted from printing by the Statutory Rules (Northern Ireland) Order 1979. A summary is given in the List of Statutory Rules of a Local Character under the heading ROADS.