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STATUTORY RULES OF NORTHERN IRELAND

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**1998 No. 9**

**HEALTH AND PERSONAL SOCIAL SERVICES**

**General Medical Services (Amendment)  
Regulations (Northern Ireland) 1998**

*Made* - - - - *20th January 1998*

*Coming into operation* *30th January 1998*

The Department of Health and Social Services, in exercise of the powers conferred on it by Articles 56(1), (2), (3), (3A), (4), (4B), and (5), 95, 106(b), and 107(6) of, the Health and Personal Social Services (Northern Ireland) Order 1972(1) and of all other powers enabling it in that behalf, and in conjunction with the Department of Finance and Personnel and after consultation with such organisations as appear to the Department to be representative of the medical profession, as required by Article 56(5) of that Order, hereby makes the following Regulations:

**Citation, commencement and interpretation**

1.—(1) These Regulations may be cited as the General Medical Services (Amendment) Regulations (Northern Ireland) 1998 and shall come into operation on 30th January 1998.

(2) In these Regulations, the “principal Regulations” means the General Medical Services Regulations (Northern Ireland) 1997(2).

**Amendment of regulation 2 of the principal Regulations**

2. In regulation 2 of the principal Regulations (interpretation), omit the definition “trainee general practitioner” and insert the following definition in the appropriate alphabetical position—

““General Practice (GP) Registrar” means a doctor who is being trained in general practice by a doctor whose name is included in the medical list;”.

**Amendment of regulation 16 of the principal Regulations**

3. In regulation 16 of the principal Regulations (local directory of family doctors), in paragraph 1(f), for “trainee general practitioners” substitute “General Practice (GP) Registrars”.

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(1) S.I.1972/1265 (N.I. 14) as amended by S.I. 1978/1907 (N.I. 26), S.I. 1981/432, S.I. 1986/2229 (N.I. 24), S.I. 1988/2249 (N.I. 24), S.I. 1991/194 (N.I. 1) and 1995 c. 51  
(2) S.R. 1997 No. 380

#### **Amendment of regulation 37 of the principal Regulations**

4. In regulation 37 of the principal Regulations (payments to doctors), at the beginning of paragraph (1), insert “Subject to regulation 37A,”.

#### **Insertion of regulation 37A into the principal Regulations**

5. After regulation 37 insert—

##### **“GMS local development schemes**

**37A.**—(1) A Board may as respects any financial year establish one or more GMS local development schemes.

(2) Schedule 8A defines a GMS local development scheme, and makes further provision in connection with such schemes.

(3) The Board shall consult the Local Medical Committee—

- (a) before establishing a GMS local development scheme; and
- (b) before making any determination of remuneration for the purposes of a GMS local development scheme, and before amending or revoking any such determination.

(4) In respect of each financial year a Board shall make payments in accordance with the determination to those doctors whose names are included in the medical list who qualify by virtue of the determination for such payments.

(5) As soon as reasonably possible after the end of each financial year, a Board shall publish the following information about the GMS local development schemes established in its area as respects that financial year—

- (a) the aggregate amount of all the payments under paragraph (4) made or due to doctors in respect of that financial year for all the Board’s GMS local development schemes taken together;
- (b) the number of such doctors; and
- (c) a description of the aspects of general medical services which were the subject of the Board’s GMS local development schemes in that financial year.”.

#### **Amendment of regulation 39 of the principal Regulations**

6. In regulation 39 of the principal Regulations (claims and overpayments), in paragraph (1), at the end insert “or (as the case may be) within the terms of a GMS local development scheme”.

#### **Amendment of Schedule 2 to the principal Regulations**

7. In Schedule 2 to the principal Regulations (terms of service for doctors)—

- (a) in paragraph 1 (interpretation), in the definition of “assistant”, for “trainee general practitioner” substitute “General Practice (GP) Registrar”;
- (b) in paragraph 12 (which concerns the termination of an arrangement for maternity medical services), in sub-paragraphs (1) and (3), for “regulation 34(1)(a)” substitute “regulation 34(1)”;
- (c) in paragraph 26 (organisations providing deputy doctors), in sub-paragraph (7), for “in response to a request for evidence” substitute “as a result of evidence provided”; and
- (d) in paragraph 27 (which requires doctors who are engaged as deputies or employed as assistants to satisfy certain conditions), in sub-paragraph (c), for “trainee general practitioner” substitute “General Practice (GP) Registrar”.

**Amendment of Schedule 3 to the principal Regulations**

8. In Part IIB of Schedule 3 to the principal Regulations (additional information to be provided by a doctor in connection with an application to fill a vacancy), in each of paragraphs 2(a) and 3, for “trainee” substitute “General Practice (GP) Registrar”.

**Insertion of Schedule 8A into the principal Regulations**

9. After Schedule 8 to the principal Regulations, insert Schedule 8A as set out in the Schedule.

Sealed with the Official Seal of the Department of Health and Social Services on

L.S.

20th January 1998.

*P. Conliffe*  
Assistant Secretary

Sealed with the Official Seal of the Department of Finance and Personnel on

L.S.

20th January 1998.

*J. G. Sullivan*  
Assistant Secretary

*Status: This is the original version (as it was originally made). This item of legislation is currently only available in its original format.*

SCHEDULE

Regulation 9

**New Schedule 8A to be inserted in Principal Regulations**

“SCHEDULE 8A

Regulation 37A(2)

**GMS Local Development Schemes**

1.—(1) A GMS local development scheme is one whereby payments are made to doctors in respect of the provision by them of general medical services to standards or in ways specified in the scheme.

(2) A GMS local development scheme—

- (a) may not provide for payments in respect of any service which does not form part of general medical services; but
- (b) subject to paragraph 4, may include provision for the payments referred to in sub-paragraph (1) to take account of any additional need which the doctor may have for computers, premises and practice staff in consequence of his providing general medical services to the standards or in the ways specified in the scheme.

(3) A Board may have more than one GMS local development scheme, and may amend or revoke each of them.

(4) A GMS local development scheme may apply throughout a Board’s area, or may be limited in any way a Board thinks appropriate.

(5) A GMS local development scheme shall be published by a Board in a way which is suitable for bringing it to the attention of the doctors in its area whose names are included in the medical list.

2. A GMS local development scheme must specify what a doctor must do in order to become eligible for the payments in question.

3.—(1) Before establishing a GMS local development scheme (and after consulting the Local Medical Committee pursuant to regulation 37A(3)(a)), a Board must satisfy itself—

- (a) that the provision of general medical services in its area will not be in any way reduced in quality or availability as a result of the proposed GMS local development scheme; and
- (b) that the scheme would help to make improvements in the provision of general medical services in its area (or in the part of its area to which the scheme relates).

(2) Eligibility on the part of a doctor for payments under a GMS local development scheme may be subject to conditions, including conditions designed to secure as respects the doctor’s provision of general medical services that the standards referred to in sub-paragraph (1)(a) are maintained, and the improvements referred to in sub-paragraph (1)(b) are made.

4.—(1) Subject to sub-paragraph (2), a GMS local development scheme may not provide for payments in respect of anything for which specific payment is provided in the Statement referred to in regulation 37(1).

(2) In any case where—

- (a) the Statement provides for a payment to be determined by a Board, whether or not subject to a ceiling; and
- (b) but for that determination or, as the case may be, the ceiling, a higher payment could have been made under the Statement,

a GMS local development scheme may provide for additional payments in respect of the same thing.

(3) In sub-paragraphs (1) and (2), references to the Statement include references to any amending Statement.

(4) If, after a Board has established a GMS local development scheme, an amending Statement introduces specific payments which mean the GMS local development scheme then contravenes sub-paragraph (1), the GMS local development scheme shall (to that extent) come to an end on the date the amending Statement (or the relevant part of it) comes into effect.”

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## EXPLANATORY NOTE

*(This note is not part of the Regulations.)*

These Regulations amend the General Medical Services Regulations (Northern Ireland) 1997 (“the principal Regulations”).

Regulation 5 inserts a new regulation 37A into the principal Regulations. This regulation enables a Health and Social Services Board to establish one or more general medical services local development schemes (“LDSs”).

The new regulation 37A also requires a Board to consult its Local Medical Committee before establishing LDSs and before making any determination of remuneration for LDSs; to make payments in accordance with the determination for each financial year to doctors on the medical list who qualify; and to publish certain information about the LDSs established in its area.

Regulations 4 and 6 make consequential amendments to regulations 37 and 39 of the principal Regulations.

Regulation 9 and the Schedule insert a new Schedule 8A into the principal Regulations, which makes further provision about LDSs. In particular, Schedule 8A defines an LDS and provides that a Board must be satisfied of specified criteria before it can establish an LDS. It provides that LDSs cannot be used to duplicate any payment for which provision is made in the Statement referred to in regulation 37(1) of the principal Regulations, but may be used to make payments in addition to payments made under the Statement.

Regulations 2, 3, 7 and 8 amend the principal Regulations to substitute the term “General Practice (GP) Registrar” for “trainee general practitioner” with a small change in the definition, and also make other consequential and minor amendments.