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## EXPLANATORY NOTE

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

These regulations make amendments to The Health and Personal Social Services (General Medical Services Contracts) Regulations (Northern Ireland) 2004.

Regulation 2 updates the definition of “CCT”, and makes minor amendments to several of the definitions in Regulation 2 of the GMS Regulations;

Regulation 3 amends Regulation 4 (Conditions relating solely to medical practitioners) as a consequence of the General and Specialist Medical Practice (Education, Training and Qualifications) Order 2010 (S.I. 2010/234 and the Postgraduate Medical Education and Training Order of Council 2010 (S.I. 2010/473);

Regulations 4 and 9(15) update references to the provisions relating to removal of a person being concerned in the management or control of a charity or body as a consequence of the Charities and Trustee Investment (Scotland) Act 2005;

Regulation 6 inserts a new paragraph in regulation 18 that enables all contracts to specify an outer boundary area in addition to the practice area. Regulation 9(5) makes a consequential amendment to ensure that it is regarded as reasonable if a contractor refuses an application for inclusion in its list of patients where person lives in the outer boundary area. Regulation 9(13) and regulation 11 make amendments respectively to Schedule 5 and Schedule 8 in respect of information relating to the outer boundary area which is contained on the practice website and in the practice leaflet;

Regulation 7 amends regulation 21 (Certificates) of the regulations as a consequence of the introduction in the Social Security (Medical Evidence) and Statutory Sick Pay (Medical Evidence (Amendment) Regulations 2010 (S.R. 2010/55) of new rules relating to medical evidence;

Regulation 8 amends paragraphs 4 and 5 of Schedule 1 to the regulations to update references to the term “vaccine” and to update the cross-references to the GMS Statement of Financial Entitlement which sets out which vaccines and immunisations a contractor must offer;

Regulation 9(2) amends Schedule 5 by inserting new provisions in respect of the use of certain telephone numbers which charge patients more than the equivalent cost of calling a geographical number;

Regulation 9(3) amends Schedule 5 by updating the reference to requirements which a contractor must comply with in providing out of hours services;

Regulation 9(4) makes minor amendments to paragraph 11A in Schedule 5;

Regulation 9(5) makes minor amendments to paragraphs 17 in Schedule 5, as a consequence of the introduction of Regulation 6 (outer boundary area);

Regulation 9(6) makes a minor amendment to paragraph 20 in Schedule 5;

Regulation 9(7) inserts new paragraphs 29A to 29E into Schedule 5 of the regulations to provide for a new procedure relating to applications for the closure of a contractor’s list of patients. Regulations 6(3), 9(8), 9(9) and 9(13) make consequential provisions in respect of the new procedures;

Regulation 9(12) updates the reference in respect of electronic patient records;

Regulation 9(14) makes changes to the arrangements under which contractors must disclose information (with the consent of the patient) in connection with claims for benefits; and

Regulation 9(18) and 9(19) make amendments to the provisions relating to the contractor’s clinical governance system to provide that such systems must include standard operating procedures in

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

relation to the management and use of controlled drugs and also makes amendments which require contractors to co-operate in the discharge of any obligations of the Board or its accountable officer in relation to the management and use of controlled drugs.