

EXPLANATORY MEMORANDUM TO

The Health and Personal Social Services (General Medical Services Contracts) (Amendment) Regulations (Northern Ireland) 2022

SR 2022 No. 162

1. Introduction

- 1.1. This Explanatory Memorandum has been prepared by the Department of Health to accompany the Statutory Rule (details above) which is laid before the Northern Ireland Assembly.
- 1.2. The Statutory Rule is made under the Health and Personal Social Services (Northern Ireland) Order 1972 ("the 1972 Order") and is subject to the negative resolution procedure.

2. Purpose

- 2.1. These Regulations ("the 2022 Regulations") further amend The Health and Personal Social Services (General Medical Services Contracts) Regulations (Northern Ireland) 2004 ("the GMS Contracts Regulations"), which regulate the terms under which General Medical Services are provided under the 1972 Order.
- 2.2. The purpose of this SR is to make amendments to the GMS Contracts Regulations to broaden the list of healthcare professions permitted to prescribe in primary care as independent or supplementary prescribers.
- 2.3. The Regulations make provision to reflect changes to the arrangements for independent prescribing by adding new categories of prescribers – "a chiropodist or podiatrist independent prescriber", "an optometrist independent prescriber", "a paramedic independent prescriber", "a physiotherapist independent prescriber" and "a therapeutic radiographer independent prescriber".
- 2.4. The SR also defines "independent prescriber" and adds dietitians and paramedics in the definition of "supplementary prescriber".

3. Background

- 3.1. Over recent years there has been an ongoing programme to expand the number of non-medical healthcare professions who may prescribe drugs as independent or supplementary prescribers to support multi-disciplinary working and contribute to transforming how healthcare is delivered.
- 3.2. Independent prescribing is prescribing by an appropriate practitioner responsible and accountable for the assessment of patients with undiagnosed or diagnosed conditions and for decisions about the clinical management required, including prescribing medicines.
- 3.3. Supplementary prescribing is an arrangement whereby, after diagnosis by an independent prescriber, the supplementary prescriber can prescribe medicines as part of the patient's agreed clinical management plan.

- 3.4. The amendments reflect provisions in the UK-wide Human Medicines Regulations 2012 in relation to independent and supplementary prescribing and also bring the GMS Contracts Regulations into line with non-medical prescribing in GB and similar legislation there.
- 3.5. These new prescribers will have to undergo appropriate training. Increasing the range of prescribers makes it easier for patients to get the medicines they need, increases patient choice and makes better use of the skills of healthcare professionals.

4. Consultation

- 4.1. The proposed legislative amendments to the GMS Contracts Regulations are consequential to amendments to the Human Medicines Regulations 2012 which were subject to a UK wide consultation at the time. These amendments to the GMS Contracts Regulations enable the policy intention of the Human Medicines Regulations to be realised. Whilst there has been no public consultation in relation to this Statutory Rule, engagement has taken place with the Health and Social Care Board and GP representative bodies (the BMA's General Practitioners Committee (NI) and the Royal College of General Practitioners Northern Ireland) who are content with the legislative amendments.

5. Equality Impact

- 5.1. The Department of Health has conducted an Equality Impact Assessment screening exercise and has concluded that a full EQIA is not necessary.

6. Regulatory Impact

- 6.1. A Regulatory Impact Assessment is not considered necessary as there will be no adverse impact on business, charities, social enterprise or voluntary bodies.

7. Financial Implications

- 7.1. Total costs of circa £547K are anticipated for training and governance arrangements for the additional non-medical prescribers (NMP) specified at Para 2.3 above. This figure includes costs associated with The Pharmaceutical Services (Amendment) Regulations (Northern Ireland) 2022 which will add Therapeutic Radiographer Independent Prescriber, Paramedic Independent Prescriber and Dietitian Supplementary Prescriber to The Health and Personal Social Services Pharmaceutical Services Regulations (Northern Ireland) 1997.

8. Section 24 of the Northern Ireland Act 1998

- 8.1. The proposed legislation is considered compatible with section 24 of the Northern Ireland Act 1998.

9. EU Implications

- 9.1. Not applicable.

10. Parity or Replicatory Measure

- 10.1. The amendments regarding prescribing update the GMS Contracts Regulations to reflect changes already made under the UK wide Human

Medicines Regulations 2012 and bring the GMS Contracts Regulations into line with non-medical prescribing in GB and similar legislation there.

11. Additional Information

11.1. Not applicable.