
STATUTORY INSTRUMENTS

1997 No. 2468

**NATIONAL HEALTH SERVICE,
ENGLAND AND WALES**

**The National Health Service (General Medical
Services) Amendment (No. 3) Regulations 1997**

<i>Made</i>	- - - -	<i>15th October 1997</i>
<i>Laid before Parliament</i>		<i>15th October 1997</i>
<i>Coming into force</i>		
<i>The whole Regulations except regulation 3</i>		<i>5th November 1997</i>
<i>Regulation 3</i>		<i>1st January 1998</i>

The Secretary of State for Health, in exercise of powers conferred on him by sections 15(1), 29, 45(1) and 126(4) of the National Health Service Act 1977(1) and of all other powers enabling him in that behalf, hereby makes the following Regulations:—

Citation, commencement and interpretation

1.—(1) These Regulations may be cited as the National Health Service (General Medical Services) Amendment (No. 3) Regulations 1997.

(2) These Regulations shall come into force on 5th November 1997, except for regulation 3, which shall come into force on 1st January 1998.

(3) In these Regulations, “the 1992 Regulations” means the National Health Service (General Medical Services) Regulations 1992(2).

(1) 1977 c. 49; see section 128(1) as amended by the National Health Service and Community Care Act 1990 (c. 19) (“the 1990 Act”), section 26(2)(g) and (i), for the definitions of “prescribed” and “regulations”. Section 15(1) was amended by the Health and Social Security Act 1984 (c. 48) (“the 1984 Act”), section 5(2); by the 1990 Act, section 12(1); and by the Health Authorities Act 1995 (c. 17) (“the 1995 Act”), Schedule 1, paragraph 6. Section 29 was extended by the Health and Medicines Act 1988 (c. 49), section 17; and amended by the Health Services Act 1980 (c. 53), sections 1 and 7 and Schedule 1, paragraph 42(b); by the Health and Social Services and Social Security Adjudications Act 1983 (c. 41), Schedule 6, paragraph 2; by the Medical Act 1983 (c. 54), section 56(1) and Schedule 5, paragraph 16(a); by S.I. 1985/39, article 7(3); and by the 1995 Act, Schedule 1, paragraph 18. Section 45(1) was amended by the 1984 Act, Schedule 3, paragraph 7(a); and by the 1995 Act, Schedule 1, paragraph 33. Section 126(4) was amended by the 1990 Act, section 65(2).

(2) S.I. 1992/635; relevant amending instruments are S.I. 1993/540, 1994/3130, 1996/702 and 1997/730.

GMS local development schemes

2.—(1) In regulation 34 of the 1992 Regulations (payments to doctors), at the beginning of paragraph (1), insert “Subject to regulation 34B,”.

(2) After regulation 34A(3) insert—

“GMS local development schemes

34B.—(1) A Health Authority may as respects any financial year establish one or more GMS local development schemes if—

- (a) the Secretary of State has for the purposes of any such scheme as it may establish designated the Health Authority as the determining authority for the remuneration of doctors whose names are included in its medical list; and
- (b) such remuneration is of a description designated by the Secretary of State in relation to that financial year for the purposes of section 97(3A)(d) of the Act.

(2) Schedule 7A defines a GMS local development scheme, and makes further provision in connection with them.

(3) The Health Authority 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 the Health Authority shall make payments in accordance with the determination to those doctors whose names are included in its 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, the Health Authority 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 Health Authority’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 Health Authority’s GMS local development schemes in that financial year.”.

(3) In regulation 35 of the 1992 Regulations (claims and overpayments), in paragraph (1), at the end insert “or (as the case may be) with the terms of a GMS local development scheme”.

(4) After Schedule 7 to the 1992 Regulations, insert Schedule 7A as set out in the Schedule to these Regulations.

General Practice (GP) Registrars

3.—(1) The 1992 Regulations are amended as follows.

(2) In regulation 2(1) (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 a medical list;”.

(3) In regulation 8 (local directory of family doctors), in paragraph (1)(f), for “trainee general practitioners” substitute “General Practice (GP) Registrars”.

(4) In Schedule 2 (terms of service for doctors)—

(a) in paragraph 1 (interpretation), in the definition of “assistant”, for “trainee general practitioner” substitute “General Practice (GP) Registrar”; and

(b) in paragraph 22A(4) (which requires doctors who are engaged as deputies or employed as assistants to satisfy certain conditions), in paragraph (c), for “trainee general practitioner” substitute “General Practice (GP) Registrar”.

(5) In Part II of Schedule 3 (information and undertakings to be included in an application to fill a vacancy), in each of paragraphs 19(a) and 20, for “trainee” substitute “General Practice (GP) Registrar”.

15th October 1997

Frank Dobson
One of Her Majesty’s Principal Secretaries of
State, *Department of Health*

(4) Paragraph 22A was originally inserted by [S.I. 1994/3130](#), regulation 12(4), and substituted by [S.I. 1997/730](#), regulation 3(4).

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SCHEDULE

Regulation 2(4)

NEW SCHEDULE 7A TO BE INSERTED IN 1992 REGULATIONS

“SCHEDULE 7A

Regulation 34B(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 Health Authority 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 the Health Authority’s area, or may be limited in any way the Health Authority thinks appropriate.

(5) A GMS local development scheme shall be published by the Health Authority in a way which is suitable for bringing it to the attention of the doctors whose names are included in its 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 34B(3)(a)), the Health Authority 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 34(1).

(2) In any case where—

- (a) the Statement provides for a payment to be determined by the Health Authority, 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.

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

(4) If, after a Health Authority 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.”

EXPLANATORY NOTE

(This note is not part of the Regulations)

These Regulations further amend the National Health Service (General Medical Services) Regulations 1992 (“the 1992 Regulations”) which regulate the terms on which general medical services are provided under the National Health Service Act 1977 (“the Act”).

Regulation 2 inserts a new regulation 34B into the 1992 Regulations. This regulation enables a Health Authority to establish one or more general medical services local development schemes (“LDSs”), provided it has been designated as a determining authority by the Secretary of State and the remuneration is of a description designated by the Secretary of State for that purpose under section 97(3A)(d) of the Act.

The new Regulation 34B also requires a Health Authority 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 its medical list who qualify; and to publish certain information about the LDSs established in its area.

Regulation 2(3) makes a consequential amendment to regulation 35 of the 1992 Regulations.

Regulation 2(4) and the Schedule insert a new Schedule 7A to the 1992 Regulations, which makes further provision about LDSs. In particular, Schedule 7A defines an LDS and provides that the Health Authority 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 34(1) of the 1992 Regulations, but may be used to make payments in addition to payments made under the Statement.

Regulation 3 amends the 1992 Regulations to substitute the term “General Practice (GP) Registrar” for “trainee general practitioner” with a small change in the definition, and to make consequential amendments.