
EXPLANATORY NOTE

(This note is not part of the Order)

This Order sets out transitional arrangements to cover the replacement of arrangements for general medical services under section 29 of the National Health Service Act 1977 with general medical services contracts under section 28Q of that Act (as inserted by section 175(1) of the Health and Social Care (Community Health and Standards) Act 2003 (“the Act”).

Part 2 of the Order sets out the circumstances in which those currently providing general medical services will be entitled to enter into a general medical services contract and, if they are unable to enter into such a contract on or before 31st March 2004, a default contract under section 176(3) of the Act. It also sets out the arrangements for medical practitioners who are suspended, unable to provide services under a contract on grounds of physical or mental ill-health or performing relevant service. Articles 4, 10 and 12 provide a right of appeal to the Assembly where a Local Health Board refuses to enter into a general medical services or a default contract because it is not satisfied that the criteria relating to suspended or unfit medical practitioners are met or where the Local Health Board has failed to enter into a general medical services contract by the time a person’s entitlement to such a contract expires.

Part 3 provides for the continuation of arrangements by the Local Health Board to provide primary medical services to the patients of medical practitioners who are suspended or unable to perform services on the grounds of physical or mental ill-health.

Articles 15 to 22 specify the services which must be provided in default contracts and certain types of general medical services contracts. Articles 23 and 24 prescribe the premises which must be specified in default and general medical services contracts entered into on or before 31st March and the practice area which must be specified in default contracts. Articles 25 to 29 specify who must be included in the list of patients for default contracts and certain types of general medical services contracts and whether that list must be open or closed to applications from patients. Article 30 deals with the procedure for dispute resolution in default contracts.

Part 5 sets out the financial arrangements for default contracts.