## Circular 2/89

Title: Circular 2/89
Keywords: availability, doctor's residence, remuneration, prescribing and dispensing, practice support, rural practice allowance, patient choice

## Date: 27 February, 1989 <br> Document Type: Circular 2/89

Link: Circular 1/89

## From: Department of Health, Ireland

 To: Chief Executive Officer, Each Health Board
## Introduction

1. I am directed by the Minister for Health to refer to Circular $1 / 89$ and to advise you that, having regard to the proposals received from medical practitioners for the provision of services under Section 58 of the Health Act, 1970 in accordance with the terms appended to the aforesaid Circular 1/89, the Minister has determined that these terms shall constitute from 1st March, 1989 the conditions of agreements made under Section 26(1) of the Health Act, 1970 in accordance with Article 5 of the Health Services Regulations, 1972. Accordingly, I am to convey approval for the immediate acceptance of proposals received from medical practitioners for the provision of services in accordance with these conditions.
2. Where a Chief Executive Officer is not satisfied that the terms of the proposals received from a medical practitioner are in accordance with the conditions determined by the Minister, following agreement with the Irish Medical Organisation, he may accept the proposal subject to clarification of any matter which appears to the Chief Executive Officer not to be in conformity with the conditions specified by the Minister. Where the matter is not resolved to the satisfaction of the Chief Executive officer, the acceptance of the medical practitioner's proposal shall lapse. Where the matter is clarified by 16th March, the agreement shall be deemed to be effective from 1st March.

## Availability

3. In determining whether any proposal should be accepted subject to clarification of any matter, a Chief Executive Officer should have regard, inter alia, to the terms of paragraph 10 of the Schedule to the Agreement appended to Circular 1/89. This requires a medical practitioner to be available for consultation by eligible persons at his approved surgery or surgeries and for domiciliary visiting for a total of 40 hours each week, on five days or more in the week by agreement with the health board. The hours of availability are to have regard to patients' needs and may not be amended without the agreement of the health board. Particular account should be taken of the provision that full regard shall be had to existing satisfactory arrangements where such already exist. Accordingly, it is necessary for Chief Executive Officers to be satisfied that the proposals received from medical practitioners specify the hours of attendance for surgery consultations as part of the 40 hours availability for routine surgery and domiciliary visiting, that the hours so specified are in accordance with existing arrangements or, if they are not, that they are appropriate to patients' needs, in the locality. Where a proposal indicates that a doctor's availability will be in accordance with an appointments system, the acceptance should indicate that appointments systems must be so organised as to be compatible with the contractual obligations to be available for consultation, to provide all proper and necessary treatment, as the circumstances may require and to ensure that no discrimination or differentiation is exercised as between the treatment of eligible and private patients, whether as respects surgery arrangements, or otherwise.
4. In assessing the proposals received from medical practitioners regard should also be had to the terms of paragraph 15 of the Schedule which specifies that a centre of practice will not be changed without the agreement of the health board. Accordingly, the Chief Executive Officer should be satisfied that the centre(s) of practice specified in the proposal is/are in accordance with existing arrangements or, if not, that the change is acceptable.

## Doctor's Residence

5. In accordance with paragraph 11 of the Schedule, a medical practitioner is required to reside in his area of practice or within reasonable access to it. Accordingly, Chief Executive Officers will wish to be satisfied that proposals specify the doctor's residence.

## Remuneration

6. The General Medical Services (Payments) Board will issue forms on which medical practitioners shall claim payment of capitation fees and fees for night visits, payment for emergency services and temporary residents and for special items of service in accordance with paragraph 26 of the Schedule. A further circular will issue shortly conveying approval to the arrangements whereby claims may be made for payment of allowances towards the cost of employing locums during periods of annual, sick and study leave. It is the Minister's intention to sanction payments to be made to participating doctors in respect of the employment of secretaries and nurses. The terms on which such payments will be made are under discussion with the Irish Medical Organisation and a further circular will issue in due course.

## Prescribing and Dispensing

7. The duties of participating doctors with regard to prescribing and dispensing are specified in paragraphs 18 to 21 of the Schedule. The preparation of the National Drugs Formulary provided for in paragraph 18 is nearing completion and the Minister will shortly issue guidance on prescribing in agreement with the Irish Medical Organisation.

## Practice Support

8. Discussions are continuing on the preparation of terms and conditions for the appointment of practice support medical officers in accordance with paragraph 29 of the Schedule. Pending the appointment of such medical officers, the provisions of the final element of paragraph 29 shall apply. Accordingly, arrangements should be made to appoint a medical officer, normally the Director of Community Care and Medical Officer of Health, to exercise the functions of the practice support medical officer.

## Rural Practice Allowance

9. In accordance with paragraph (xiv) of Appendix A to the Schedule, arrangements are being made for the early submission to arbitration of the provisions for payment of the rural practice allowance. A further communication on this matter will issue shortly.

## Patient Choice

10. Article 5(2) of the Health Services Regulations, 1972 requires that, as far as is practicable, a person availing himself of the service shall have a choice of medical practitioner. The health board's responsibilities as respects the operation of this agreement are, in accordance with Article 5(3) of the Regulations, a function of the Chief Executive Officer of the Board. I am to ask that arrangements be operated so that, in accordance with paragraph 8 of the Schedule, eligible
patients have every reasonable facility to effect a change of medical practitioner. The Minister will shortly issue new instructions on future entry to the General Medical Services and it is his intention to specify that Chief Executive Officers shall advertise a vacancy whenever it is, in their view, desirable to so do in order to provide an effective choice for eligible patients.

## Transitional Arrangements

11. The Minister is currently giving consideration to the position of participating medical practitioners who have not returned proposals for the provision of services in accordance with these conditions, or whose proposals ultimately may not be accepted in accordance with paragraph 2 of this Circular. A further circular in this regard will be issued in due course. In the interim, the provisions of the Schedule to the Agreement appended to Circular 13/72 will continue to apply in respect of such doctors.

Yours sincerely
P W Flanagan

SECRETARY

27 February, 1989

