

**Medical Reports Policy**

1. **Introduction**

Herne Hill Group Practice has stopped producing non-mandatory medical reports for the patients since 01/10/2017. These services fall outside of the NHS GP Contract.

This is due to lack of available GPs who are willing to work outside of their contracted NHS hours in order to provide these reports. The demand of these services was disproportionally greater than we could supply. Patients can still request access to their medical records – please refer to our Access to Medical Records Policy.

Practice will continue to provide statutory medical reports when approached directly by:

* DWP
* Jobcentre Plus
* Police
* Army
* Adoption & Fostering Agencies
* Court
* Social Services for safeguarding reports
* Council
* University for Disabled Students Allowance only

The doctors are normally remunerated for these reports directly by the above agencies.

1. **In accordance with the BMA guidance the Practice provides and does not charge a fee for the following certificates:**

* Bankruptcy

Any individual who is able to give information about a bankrupt may be required to give evidence, for which no charge can be levied. The Court may also require such individuals to produce any documents in their possession or under their control relating to the bankrupt (S366, Insolvency Act, 1986).

* Debt and mental health form

Patients who have a mental health condition may ask you to complete a Debt and Mental Health Evidence Form (DMHEF), which will act as evidence and support them in seeking help with their repayment of finances.

* Coroners' post-mortem

Although rarely used, the coroner has power under section 19 of the Coroners Act, 1988 to direct that a post-mortem shall be conducted by the deceased's general practitioner.

* Council tax exemptions

To support a claim by or on behalf of a severely mentally impaired person for exemption from liability to pay the Council Tax or eligibility for a discount in respect of the amount of Council Tax payable.

* Death certificates

Including death within 28 days of birth: the registered medical practitioner in attendance during the deceased's last illness must by law provide a certificate of cause of death (S22, Births and Deaths Registration Act, 1953).

* Stillbirth certificates

At the request of the 'qualified informant', ie the next of kin, or the person eligible to report the stillbirth to the registrar, a registered medical practitioner present at the birth must give a certificate stating that the child was not born alive and giving, to the best of their knowledge and belief, the cause of death and estimated duration of pregnancy (S11, Births and Deaths Registration Act, 1953).

* Notification of infectious diseases

There is no fee for issuing certificates about infectious diseases.

* Paternity tests

Services which doctors are not obliged to provide, but when they do, the fee payable is governed by statute: for example, fees for taking samples of blood required in cases of disputed paternity under the Blood Tests (Evidence of Paternity) Regulations.

* Professional evidence in court

Under the Supreme Court Act 1981, any registered medical practitioner may be directed to give professional evidence.

* To establish unfitness for jury service

Juries Act 1974

* Statutory certificates for the Department of Work and Pensions

1. **Examples of Non-NHS work:**

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| **Examples of Non NHS work we can complete:** | |
| * [Benefits certification](https://www.bma.org.uk/advice/employment/fees/benefits-certification)  for DWP (not on patient’s request) | * Charged at the fees set by the requesting Agency |
| * [Benefits certification](https://www.bma.org.uk/advice/employment/fees/benefits-certification)  for Jobcentre Plus (not on patient’s request) | * Charged at the fees set by the requesting Agency |
| * [Cremation](https://www.bma.org.uk/advice/employment/fees/cremation) forms | * Charged at the fees set by the requesting Agency |
| * [Coroners](https://www.bma.org.uk/advice/employment/fees/coroners) forms | * Charged at the fees set by the requesting Agency |
| * [Firearms](https://www.bma.org.uk/advice/employment/ethics/ethics-a-to-z/firearms) forms | * Charged at the fees set by the requesting Agency |
| * Reports requested by the Army | * Charged at the fees set by the requesting Agency |
| * Reports requested by the Police | * Charged at the fees set by the requesting Agency |
| * Safeguarding reports for Social Services | * Charged at the fees set by the requesting Agency |
| * Reports requested directly by the Council i.e. by Housing Department | * Charged at the fees set by the requesting Agency |
| * Electronic insurance reports requested via iGPR | * Charged at the fees set by the requesting Agency |
| * Form DS 1500 | * Charged at the fees set by the requesting Agency |
| * Private sick note (incapacity certificate) required by patient for presentation to an employer except for those which the doctor is obliged to provide for statutory sick pay purposes | * £20 - £63 |
| * Electronically produced medical report via iGPPR software - extraction of the relevant medical records only and signed by a GP | * £40 |
| * Private referral letter and supporting information | * Free |

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| **Examples of Non NHS work we do not complete:** |
| * [Asbestos medical examinations](https://www.bma.org.uk/advice/employment/fees/asbestos) |
| * [Childminder health forms](https://www.bma.org.uk/advice/employment/fees/childminders) |
| * [Certificates medico-legal](https://www.bma.org.uk/advice/employment/fees/medico-legal-certificates) |
| * [Driver Licensing (DVLA / TfL )](https://www.bma.org.uk/advice/employment/fees/driver-licensing) assessments |
| * [Fitness certificates](https://www.bma.org.uk/advice/employment/fees/fitness-certificates) (fit to fly, Fit to attend) |
| * Holiday cancellation certificates (GPs may use own direction to complete if due to cancer / terminal illness related) |
| * Occupational Health Forms for an Employer / University etc. |
| * School fees and holiday insurance certificates |
| * Health club report to certify that a patient is fit for exercise |
| * Act as a referee for passport and citizenship applications |
| * Any pro-forma reports and questionnaires for private purposes |
| * Freedom from infection certificate eg. For school, travel or employment |

1. **Fees:**

Practice follows BMA charges guidelines as set out on their website:

<https://www.bma.org.uk/advice/employment/fees/fee-finder-what-to-charge-your-patients>

1. **Frequently Asked Questions:**

Please refer to BMA FAQ - follow the link: <https://www.bma.org.uk/advice/employment/fees/why-gps-charge-fees>

1. **Principles for obtaining medical information electronically from General Practitioners**

* All requests must be made in accordance with an individual’s rights under relevant legislation Electronic requests must be processed in accordance with the Access to Medical Reports Act 1988 or the Access to Personal Files and Medical Reports (Northern Ireland) Order 1991, with electronic requests allowing medical practitioners to adhere to the key principles of these pieces of legislation. The key aspects include: enabling the individual to see the report, request amendment or withholding of the report, prior to sending it to the insurer, if requested by the individual; retaining copies of reports provided to the insurers for at least 6 months; and, providing a copy of the report to the individual on request within 6 months.
* An electronic process must comply with relevant legislation and be reviewed upon fundamental changes to that legislation These principles should comply with relevant legislation, in particular the key requirements of the Access to Medical Reports Act 1988 - and an individual’s rights under that Act - and the Electronic Communications Act 2000. The Principles should be reviewed if there are ever notable problems with such systems and whenever relevant legislation, regulation or regulatory guidance is updated.
* An electronic process should provide the GP with the ability to redact, amend or add sensitive personal data to an electronic report Any electronic system should provide the GP with the ability to automatically and manually redact, amend or add sensitive personal data to an electronic medical report before it is sent to an insurer, to protect GPs’ and insurers’ responsibilities as Data Controllers under the Data Protection Act 1998. A Data Controller is any person (which can mean an individual or an organisation) which determines when and how personal data is processed, and their responsibilities include ensuring that the data is accurate and that it is adequate, relevant and not excessive.
* An electronic process should be clear about what the patient is being asked to provide to the insurer The process for requesting customer consent for obtaining medical information must make it clear to the individual exactly what consent they are being asked to provide, and do so in a clear, straightforward manner.
* An electronic process must be at least as secure as, or increase the security above, the current system for obtaining medical information The use of electronic software to obtain medical information should be at least as secure as the current system or should increase the security of obtaining medical information above that of the current system.
* An electronic process must provide an audit trail of the consent process and the data sent, making it available to all parties An electronic process should generate an audit trail that is readily available to both individual and GP. The audit trail should clearly show what consent was granted, by whom, when and why.
* An electronic process should conform to ISO/ BSI Standards or equivalent Insurers’ electronic processes for obtaining medical information should conform to the minimum ISO/BSI certification standard or demonstrate a similar level of data security in their internal processing.
* An electronic process should be compliant with ICO, GMC, and NHS Information Technology guidance and standards and all relevant data transmitted should be encrypted to NHS standards An electronic process will conform to relevant guidance provided by the Information Commissioner’s Office (ICO), General Medical Council (GMC) and will meet NHS Information Governance and Technology standards. All data transmitted through an electronic process should be encrypted to NHS standards and transported in a compliant manner.
* An electronic process should have undertaken a Privacy Impact Assessment or equivalent Any insurance company introducing an electronic process for obtaining medical information will undertake a Privacy Impact Assessment or equivalent. A completed assessment cannot be made public but an insurer should be able to confirm what impact assessment process was used.
* An electronic process must enable the Data Controller to provide information to a third party in accordance with Data Protection requirements and make clear the onward use of data The release of information must enable the Data Controller to provide information to a third party in accordance with DPA requirements and consent must be given by the patient to the onward use of data. The process should meet NHS Information Governance standards when producing the report and only permitted users should be able to generate and deliver a report.