

SHOTGUN & FIREARMS LICENSING
STANDARDISED MEDICAL INFORMATION PROFORMA

Any attempt at amending this form after the GP has completed it is a criminal offence under Section 28A(7) of the Firearms Act. If you knowingly or recklessly make a false statement for the purpose of procuring the grant or renewal of a certificate, the maximum penalty is six months imprisonment and/or a fine.

GRANT (First Application) <input type="checkbox"/>	RENEWAL (Subsequent Applications) <input type="checkbox"/>
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APPLICANT DETAILS

Title:		Full Name:	
Home Address:			
Date of Birth (dd/mm/yyyy):			

MEDICAL INFORMATION *(To be completed by GP)*

Please check the patient's medical record for any history **(whole record for a grant application, last 10 years only for a renewal)** of the following and tick those that apply. Where any apply, please add further brief details in the box below, limited to a statement of fact, **not an opinion**, regarding the onset, any treatment, referral and when the patient was last consulted regarding the condition in question.

Acute stress reaction as a result of trauma		Personality disorder	
Suicidal thoughts or self-harm		Any severe neurological impairment <i>(eg: MS, Parkinson's, Huntington's or epilepsy, or any condition which has required consultation by a neurologist)</i>	
Depression or anxiety		Alcohol or drug abuse	
Dementia		Any other mental or physical condition which may affect safe possession of a firearm or shotgun	
Mania, bipolar disorder or psychotic illness		Terminal illness within the last 2 years	

BRIEF DETAILS *(Use additional page if required)*

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DATE RECORDS BEGIN:

Name of GP: Signature of GP: Date:	Practice Stamp:
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FURTHER DETAILS *(Continued from previous page, if applicable)*

Name of GP:

Signature of GP:

Date:

Practice Stamp:

GUIDANCE NOTES:

This form has been designed and agreed jointly by the Firearms Licensing Dept of Thames Valley Police and the Local Medical Committees (LMCs) of Berkshire, Buckinghamshire & Oxfordshire. The applicant should fill in their personal details and then request their GP complete the rest of the form. **A fee may be charged by the GP prior to completion.** GPs should refer to the LMC guidance overleaf, and the guidance of the British Medical Association which can be found at: <https://www.bma.org.uk/advice/employment/ethics/ethics-a-to-z/firearms>

GPs are directed to the accompanying LMC guidance document and flowchart for further information on this medical process.

INTRODUCTION:

The LMC and Thames Valley Police have worked together to create this form and a medical process which meets the following criteria:

- Maximises public safety
- Minimises workload upon both the Firearms Licensing Department and GPs
- Provides clarity and consistency to applicants across Thames Valley

The applicant should ensure this form is completed prior to submitting an application and the completed form should be submitted with the rest of their application documents.

GENERAL GUIDANCE TO GENERAL PRACTITIONERS:

The British Medical Association (BMA) advice to GPs regarding shotgun and firearm licensing emphasises GPs must engage with the process of licensing. BMA guidance advises GPs to select one of five possible responses, which are:

1. Refusal due to conscientious objection
2. Refusal due to lack of expertise*
3. Completion of report for a fee
4. Completion of summary for a fee
5. Completion of report/summary for no fee

The purpose of this standardised form is for it to be used where the GP has opted for response 3, 4 or 5. As independent contractors, GPs remain free to select options 1 if they so wish, and remain free to use their own form/letter in place of this one for options 3,4 & 5 where they so wish.

**It should be noted that option 2 should not be used in Thames Valley, as this applies to police forces which request a GP opinion rather than a factual statement as is the case in Thames Valley.*

DATA PERIOD:

It has been agreed between the LMC and the Police that for new grant certificates, in the interest of public safety, records should be checked as far back as records in the possession of the GP go, with paper records checked where present. GPs should also specify the date of the first entry in the records in the box provided. The increased workload for grant applications attracts a consequent higher fee than for renewals (see below). For renewal applications, the LMC and Police have agreed records need only be checked as far back as 10 years before the date the form is signed. GPs are not responsible for any data which is not within their possession, and in such cases, it is up to the Police to decide whether to grant the application.

For renewals, the GP is only required to notify if the patient has been consulted for the condition in question within the 10 year period. The police will have already been made aware of previous diagnoses notified to them from previous applications for the applicant in question.

CONSENT:

As the form is filled in by the GP at the direct request of the patient, and handed to the patient on completion, no written consent is required.

FEES:

BMA guidance makes it clear that providing medical information for shotgun or firearm certificates is not NHS work and falls outside the contractual obligations of GPs. Thus, GPs are entitled to remuneration for this work and may withhold the work until payment is made. **Such a fee must be paid by the applicant.** The LMC cannot prescribe a set fee for legal reasons. However, we can advise practices on how to calculate their fee based on the guidance of the Professional Fees Committee (PFC) of the BMA. The BMA PFC is currently finalising definitive guidance on all fees including firearms, and these are due to be updated imminently. In the meantime, pending such guidance, we advise practices to set a fee considering the GP time required, administrative burden to the practice, overheads, indemnity and other such costs.

On average the amount of GP time taken for these reports should be approximately 30 mins for a renewal (subsequent application) and 1 hour for a grant (new application). Some cases may take more or less time than this and practices may adjust their fees accordingly.

The LMC reminds practices it is their responsibility to set their own fees and to make patients aware of these fees prior to the work being undertaken.

FURTHER REPORTS:

Occasionally, when required, following the receipt of this form the Police may need to contact other clinicians such as consultants for a specialist opinion. Such reports fall outside the scope of this form and are not the responsibility of the GP to source.

FLAGS:

BMA guidance is currently unclear regarding putting flags on the notes that the shooter holds a Firearm/Shotgun Certificate, but the BMA expresses concerns regarding the imprecise nature of flags, protocols regarding their removal and the ability to monitor diagnoses of concern. The LMC is concerned that placing flags on notes may equate to the GP accepting responsibility for active monitoring of the patient, which attracts medicolegal risk and excessive workload. Home Office Guidance to the Police (Firearms Licensing) asks GPs to place a firearm reminder code on the patient's record, however, this guidance has no statutory footing. Therefore, the LMC recommends that **GPs are neither requested nor required to place such a flag on the patient's record.**

RESPONSIBILITY:

It remains the ultimate responsibility of the Police to decide on the grant/refusal of any shotgun or firearm certificate. The role of the GP is information provision by way of statement of fact only.

AUDIT:

In the interests of public safety, the Police reserve the right to check the accuracy of forms from time to time with the GP who completed it.