

General Medical Council (GMC) response to Home Office consultation on statutory guidance for the police on firearms licensing

17 September 2019

The GMC's overarching statutory purpose is to protect patients and the public. This is underpinned by three further objectives, including the promotion and maintenance of professional standards and conduct for members of the profession. As part of our role, we publish guidance for doctors setting out the principles of good practice and the standards expected of them in the course of their work. The guidance provides doctors with a framework within which doctor's must exercise their own professional judgment. Doctors must be aware of and follow the guidance and should be prepared to justify their decisions and actions.

While the draft statutory guidance under consultation is for the police, it has implications from doctors who are asked to provide information about an applicant. We are therefore commenting on the following four questions re: medical arrangements.

Q6

To what extent do you agree that the new arrangement for medical checks will improve public safety?

- Strongly agree
- **Tend to agree**
- Neither agree nor disagree
- Tend to disagree
- Strongly disagree
- Don't know

Q7

To what extent do you agree that the police should not proceed to issue a firearm or shotgun certificate unless they have received the relevant information from the applicant's GP?

- Strongly agree
- **Tend to agree**
- Neither agree nor disagree
- Tend to disagree
- Strongly disagree
- Don't know

Q8

To what extent do you agree that the new arrangements for medical checks represent an effective and efficient approach to ensure the police have the medical information they need before making a decision on the application?

- Strongly agree
- [Tend to agree](#)
- Neither agree nor disagree
- Tend to disagree
- Strongly disagree
- Don't know

Q9

Comments on the medical arrangements

Consent/the public interest

In [paragraph 9](#) of our guidance for doctors on *Confidentiality*, we outline the legal bases on which doctors can disclose confidential information - this includes all personal information, including names and addresses. For the purposes of doctors' role in firearms licensing, the most relevant will be disclosures with the consent of the individual concerned, and in the public interest (so without the patient's consent and occasionally against their wishes).

Seeking consent should usually be the first option. In paragraphs [115-116 of Confidentiality](#), we advise doctors that they:

- should be satisfied that individuals have sufficient information about the scope, purpose and likely consequences of the disclosure
- should obtain or have seen written consent to the disclosure from the individual or someone authorised to act on their behalf
- may accept an assurance from an officer of a government department or agency that the individual has consented

Paragraph 2.25 of the draft statutory guidance says that 'the police may approach the applicant's GP to obtain medical information both during the application process and at any time during the period of validity of the certificate if there are concerns about the applicant's continued fitness to possess firearms.' Paragraph 2.26 (ii) indicates that the police will ask the individual's GP to add a firearms reminder code on the patient's record – so if the individual develops a relevant condition, the doctor will pick it up and notify the police.

This implies that the consent given by the individual is for disclosure throughout the life of the firearms certificate as well as during the application process. However, decisions and circumstances may change, an individual's consent to disclosure of their personal information can usually be withdrawn at any time, and doctors may be reluctant to rely on consent given several years ago. However, the doctor had reason to believe that the individual would no longer consent to disclosure of relevant conditions to the police, it would still be open to them to make such a disclosure if they felt it necessary in the public

interest, to protect the patient or others from risk of serious harm. Our advice on public interest disclosures is set out in [paragraphs 63 – 72](#) of the *Confidentiality* guidance

Conscientious objection

The purpose of the new medical arrangements is to improve public safety - to ensure that individuals who may present a threat to themselves or others are not licensed to possess a firearm. The GMC places a duty on doctors to protect and promote the health of patients and the public (see [Good medical practice, Duties of a doctor](#)). We also say that they must keep up to date with, and follow, the law and other regulations relevant to their work ([paragraph 12](#) of the same document). Although the statutory guidance under consultation is for the police, we would nevertheless regard it as good practice for doctors to co-operate with the new licensing process.

We recognise that some doctors do not agree with firearms possession at all and would not wish to be involved in facilitating firearms licensing. The suggested ways to manage the situation if a doctor has a conscientious objection to firearms ownership appear broadly consistent with our guidance (see [paragraphs 18-16 of Personal beliefs and medical practice](#)) and offers alternative routes for the applicant. We believe that the advice in these paragraphs strikes a reasonable balance between the rights of doctors to practice in accordance with their consciences, and patients' entitlement to access lawful services in a safe and timely manner.