As an LMC we are responding more frequently this year to requests from our NHS GP practices to talk through the options, opportunities, and barriers to providing private GP services.

In brief you cannot easily run a private GP practice from NHS premises due to strict 2019 regulations, which largely ban advertising or hosting paid-for private services if they overlap with core GMS services. The main aim of the regulations is to prevent NHS funds subsidising private care. Private GP services must be clearly separate, on different premises, and outside NHS hours to avoid contract breaches, with clear separation of funding, liability, and patients. The key is that if a service falls within NHS primary care scope, it must be NHS-funded on NHS premises.

# **Key Rules & Considerations:**

- No Overlap: Hosting private services (like cosmetic treatments, certain vaccinations, private consultations) in the same building during NHS hours is generally a breach of contract.
- **Clear Separation:** Private and NHS care must be kept distinct, with patients bearing full costs for private services, ensuring no NHS subsidy, as per BMA guidance.
- **Alternative Premises:** A GP can offer purely private services to non-registered patients in alternative, non-NHS funded premises and outside contracted NHS hours.
- **Prescribing:** GPs must be competent and have adequate knowledge for any prescribed medication, whether for NHS or private patients, <u>following GMC guidance</u>.
- **Lease vs. Ownership:** For leased premises, GPs pay rent, which might be reimbursed by the NHS (<u>notional rent</u> or cost rent), but private activity needs careful structuring to avoid reimbursement issues.

**In essence:** While you can provide private services, the physical NHS building and NHS time are largely ring-fenced for core NHS care, making integrated private practices very difficult under current rules. Always seek specific advice for your situation from the NHS commissioner (ICB). You may also approach the BMA or your LMC for more general advice.

That having been said NHS GP premises can be used for private practice, subject to strict regulations and conditions that ensure a clear separation between NHS and private services. You must discuss this with your NHS commissioning body and get clear written approval to use the premises for the stated services, times, etc.

#### **Key Restrictions and Conditions**

- No NHS Registered Patients (for the same service): A GP practice cannot charge a fee to a patient who is registered with that same practice for services that fall within the scope of primary medical services (the NHS commissioned services they provide).
- **Clear Separation:** Private and NHS care must be kept as separate as possible, in terms of funding, legal status, and accountability.
- NHS Resources and Time: Private services cannot be offered or advertised during NHS
  working hours or using NHS-funded property/equipment if those services are also part
  of the NHS contract. NHS staff cannot be used for private work without a formal
  agreement and payment from the private entity.
- **Premises Agreement:** The use of NHS premises for private work must be explicitly authorised in the practice's partnership or lease agreements, with the agreement of the relevant NHS body.
- **Transparency:** Patients must be fully informed that the service is private, understand the associated costs, and it must always be clear whether an individual procedure or treatment is NHS or privately funded.

• **No Conflict of Interest:** GPs must avoid any conflict of interest and must not use their position as an NHS GP to pressure patients into pursuing private care they offer.

### **Permitted Private Services**

GPs can charge for certain non-NHS services (e.g., specific travel vaccinations, some medical reports/certificates, cosmetic procedures). These services are outside the scope of the core NHS contract.

## **Practical Implications**

- **Separate Entity:** For private practice within the same building, GPs may need to set up a different legal entity (e.g., a separate company or partnership) from the one that holds the main NHS contract.
- **Referrals:** Private GPs can refer patients to the NHS (and vice-versa) based on clinical need; patients are entitled to the same NHS services as any other patient. However, a private GP cannot issue an NHS prescription.

GPs considering private practice should seek advice from their Local Medical Committee (for example the content of this briefing) or the BMA to ensure compliance with complex contractual regulation.

Cheshire LMC is currently looking to record a podcast in relation to this topic. Our current constitution is aligned solely to those GPs holding NHS contracts in Cheshire.

#### William

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