

**Extract from 'The New GMS Contract 2003 :
Investing in General Practice'**

4 Developing human resources and modernising infrastructure

Premises

Quality standards

4.52 The new contract introduces a new set of quality standards. [...] The (minimum) standards which should apply to both main and branch/split-site surgeries to include the following:

- (i) practices should take reasonable steps to comply with the Disability Discrimination Act 1995. This includes providing for all users of the building ease of access to premises and movement within them, adequate sound and visual systems for the hearing and visually impaired, and the removal of barriers to the employment of disabled people. Adequate facilities should also be provided for the elderly and young children, including nappy-changing and feeding facilities
- (ii) a properly equipped treatment room, where provided, and a properly equipped consulting room for use by the practitioners with adequate arrangements to ensure the privacy of consultations and the right of patients to personal privacy when dressing or undressing, either in a separate examination room or in a screened-off area around an examination couch within the treatment room or the consulting room. An additional treatment room may be required where enhanced minor injury services are provided
- (iii) practitioners, staff and patients having convenient access, including wheelchair access where reasonably possible, to adequate lavatory and hand washing facilities which meet current infection control standards. There should be washbasins connected to running hot and cold water in consulting rooms and treatment areas or, if this is not possible, then in an immediately adjacent room
- (iv) adequate internal waiting areas with enough seating to meet all normal requirements and provision, either in the reception area or elsewhere, for patients to communicate confidentially with reception staff including by telephone
- (v) the premises, fittings and furniture to be kept clean and in good repair, with adequate standards of lighting, heating and ventilation
- (vi) adequate arrangements for the storage and disposal of clinical waste
- (vii) adequate fire precautions, including provision for safe exit from the premises, designed in accordance with the Building Regulations agreed with the local fire authority

- (viii) adequate security for drugs, records, prescription pads and pads of doctors' statements
- (ix) where the premises are used for minor surgery or the treatment of minor injuries, a room suitably equipped for the procedures to be carried out.

Branch/split-site surgeries

4.54 For a branch surgery to qualify as a second main/split-site it should meet the following criteria:

- (i) be open for at least 20 hours a week for provision of medical services automatically entitling it to proper IT support
- (ii) meet the minimum standards set out in paragraph 4.52 above
- (iii) deliver essential and additional services.

4.56 A branch surgery can be closed subject to agreement between the PCO and providing practice. In the event that there is no agreement the practice can give notice that it wishes to close a branch surgery. There will be a given period in which the PCO can issue a counter-notice, to allow for any required consultation, requiring the surgery to remain open until the issue is resolved. Normal appeal procedures will apply. If the branch surgery is unable to close, because a counter-notice was successful, or where both the practice and the PCO agree that the surgery should remain open, then the PCO is required to continue supporting it with the necessary funding.

4.57 Branch surgery standards need not be fully met where a practice provides outlying consultation facilities using premises usually used for other purposes.

4.58 Following a visit, PCOs will determine whether premises accepted for the delivery of services are continuing to meet the relevant standards. If there are shortcomings:

- (i) the LMCs (or GP subcommittee of the Area Medical Committee) will be consulted
- (ii) where the shortcomings can be rectified, the practice will agree with the PCO within a month how the shortcomings can be rectified within a reasonable period of time, ensuring that patient safety is not at risk
- (iii) if the shortcomings have not been put right within six months (or such longer period as may be agreed between the practice and the PCO) premises payments will cease or be abated, until the shortcomings have been put right
- (iv) a practice may appeal against the PCO decisions in line with the arrangements described in chapter 7.