Top of Form

Last updated: 28 February 2019

**Firearms licensing process: GP support guide**

**Background**

From 1 April 2016 new information sharing processes between GPs and the police were introduced in an attempt to ensure those licensed to possess firearms and shotgun certificates are medically fit to carry arms.

We have significant concerns about these arrangements and we continue to raise them with the Home Office with the aim of agreeing a process that is fair to GPs in particular, and doctors in general, and safe for the wider public. Discussions are ongoing and any future improvements may necessitate the revision of this guidance.

The following advice on the current system takes into account our discussions with the Home Office, the police and the British Association for Shooting and Conservation (BASC), as well as external legal advice.

**Current system**

The current system requires local constabularies to assess applicants for firearms licenses. In all cases, they will ask the applicant’s GP to provide general medical information. This information consists of a factual report based on the applicant’s medical history, and may also include a generic question asking if the GP has “concerns” regarding the issuing of a firearms license.

In certain targeted situations the police may ask for a full formal report. There is agreement that police funding is required for this formal report. There is also agreement between the BMA and Home Office that the charging of a fee may be appropriate for the initial general report but no agreement has been reached regarding the funding of this.

This guidance is designed to advise doctors on how to respond to the initial general request from police firearms licensing officers.

**Responding to the police's initial letter and issues around remuneration**

The proper regulation of firearms is in the public interest and it is important that you respond to the initial police letter. You should not disregard the letter, nor delay in providing a reply (you should normally respond to the letter within 21 days). Failure to respond could put you at professional risk.

However, as you are not contracted to provide these services under the GMS contract, you are entitled to charge the applicant a fee, and may withhold the report until the fee has been paid. In these circumstances you must inform the police that the reason for the delay is that you are awaiting payment.

On receiving a letter from the police, depending on your professional and/or ethical position, you may decide to respond by stating one of the following:- (sample letters are offered):

* I refuse to provide a report because I have a conscientious objection to the holding of firearms. ([Sample Letter 1](https://www.bma.org.uk/-/media/files/word%20files/employment%20advice/ethics/firearms-sample-letter1.docx?la=en))
* I refuse to provide the requested report, because it seeks an opinion on matters falling outside my medical expertise, namely assessment of behavioural and personality disorders. ([Sample Letter 2](https://www.bma.org.uk/-/media/files/word%20files/employment%20advice/ethics/firearms-sample-letter2.docx?la=en))

(This is relevant to forms that ask for an opinion, including whether the GP has concerns, and not solely a factual report of relevant medical conditions).

* I am content to complete this report for which I shall charge a fee to the applicant. You will receive the report once I have received payment of this fee from the applicant. Until such time as you receive my report you should assume that the applicant has declined to provide this fee. ([Sample Letter 3](https://www.bma.org.uk/-/media/files/word%20files/employment%20advice/ethics/firearms-sample-letter3.docx?la=en))
* I am content to provide a summary limited to medical facts and compiled from the records for a fee which I shall charge to the applicant. You will receive the report upon my receipt of this fee from the applicant. Until such time as you receive my report you should assume that the applicant has declined to provide this fee. ([Sample Letter 4](https://www.bma.org.uk/-/media/files/word%20files/employment%20advice/ethics/firearms-sample-letter4.docx?la=en))
* I am content to fill out the requested report and will charge no fee. The report is enclosed / will follow at my earliest convenience. ([Sample Letter 5](https://www.bma.org.uk/-/media/files/word%20files/employment%20advice/ethics/firearms-sample-letter5.docx?la=en))

**Conscientious objection**

We have previously advised that it might be open to GPs to refuse to engage in the firearms certification process on grounds of conscientious objection on the basis of religious or ethical beliefs. We reiterate this advice.

Legal opinion is that a GP who refuses to engage on these grounds should have due regard to the [GMC guidance](http://www.gmc-uk.org/guidance/ethical_guidance/21177.asp%22%20%5Ct%20%22_blank), notwithstanding that this guidance is primarily written for the purposes of referral for procedures, treatments and interventions rather than the compilation of a medical report.

GMC guidance does require GPs to take reasonable steps to notify their patients of their conscientious objection in advance, and we would advise doctors who hold such beliefs to ensure a clear statement to this effect is placed on their website and on notices in public areas of the practice.

In our view conscientious objectors are not required to arrange for alternative provision of such a report. Where access to a firearm is a professional requirement – such as for gamekeepers and farmers – we would nonetheless encourage doctors to assist applicants in identifying a suitable colleague willing to engage in the firearms certification process.

[BMA's guidance on conscientious objection](https://www.bma.org.uk/advice/employment/ethics/expressions-of-doctors-beliefs)

**Other considerations**

Where there is a reasonable belief that an individual holding a firearms or shotgun license may represent a danger to themselves or others, we strongly advise doctors to encourage the applicant to surrender their license.

If the applicant refuses, a doctor should consider breaching normal confidentiality and informing the police firearms licensing department as a matter of urgency. If in any doubt the doctor should seek further ethical and legal advice from the BMA Ethics Department or their defence body.

Many letters from firearms licensing officers to GPs request the doctor to place a flag in the patient record to identify the subject as the holder of a firearms license.

While the BMA supports the principle of flagging in this way and reminds doctors of their duty of care to the public to raise concerns where they are apparent, we must also make doctors aware that due to the imprecise nature of flags, the lack of clear protocols for their appropriate removal and the absence of reliable software to facilitate the surveillance and cross-referencing of flags with diagnoses of concern, that we continue to have concerns about the flagging process and will continue to work with the Home Office to resolve this pressing question.

**Summary**

You should engage in the process of firearms licensing by responding to an initial police letter within 21 days.

Failure to do so could place you at professional risk.

The GMS contract entitles GPs to charge a reasonable fee for the services provided as part of this process. The demand for the fee should be addressed to the applicant as the initiator of the process. The failure or refusal of an applicant to pay a reasonable fee entitles you to refuse to engage further in the firearms certification process.

If you have a conscientious objection, you must inform the police and have due regard to GMC guidance.

Finally, if you consider that you lack the relevant competence to provide a report, you should decline to do so and promptly notify the licensing authority of your decision and the reason for it.

**Future developments**

We continue to engage with officials from the Home Office and senior police officers to improve the system for firearms licensing with the aim of improving safety for the public while recognising the professional and resource implications for doctors.

**Further information**

[Updated firearms guidance for GPs (blog)](https://www.bma.org.uk/connecting-doctors/the_practice/b/weblog/posts/towards-firearms-licensing-unity%22%20%5Ct%20%22_self)

[BMA continues to seek fair firearms licensing process (news)](https://www.bma.org.uk/news/2017/march/bma-continues-to-seek-fair-firearms-licensing-process)

General practitioner England Scotland Wales Ethics

Created: 15 May 2012

**Confidentiality and disclosure of information**

[Read the Code of Practice](http://webarchive.nationalarchives.gov.uk/20130107105354/http%3A//www.dh.gov.uk/prod_consum_dh/groups/dh_digitalassets/%40dh/%40en/documents/digitalasset/dh_4107304.pdf%22%20%5Co%20%22Confidentiality%20and%20Disclosure%20of%20Information%20%28PDF%2C%20opens%20in%20new%20window%29%22%20%5Ct%20%22_blank) for General Medical Services (GMS), Personal Medical Services (PMS) and Alternative Provider Medical Services (APMS)