

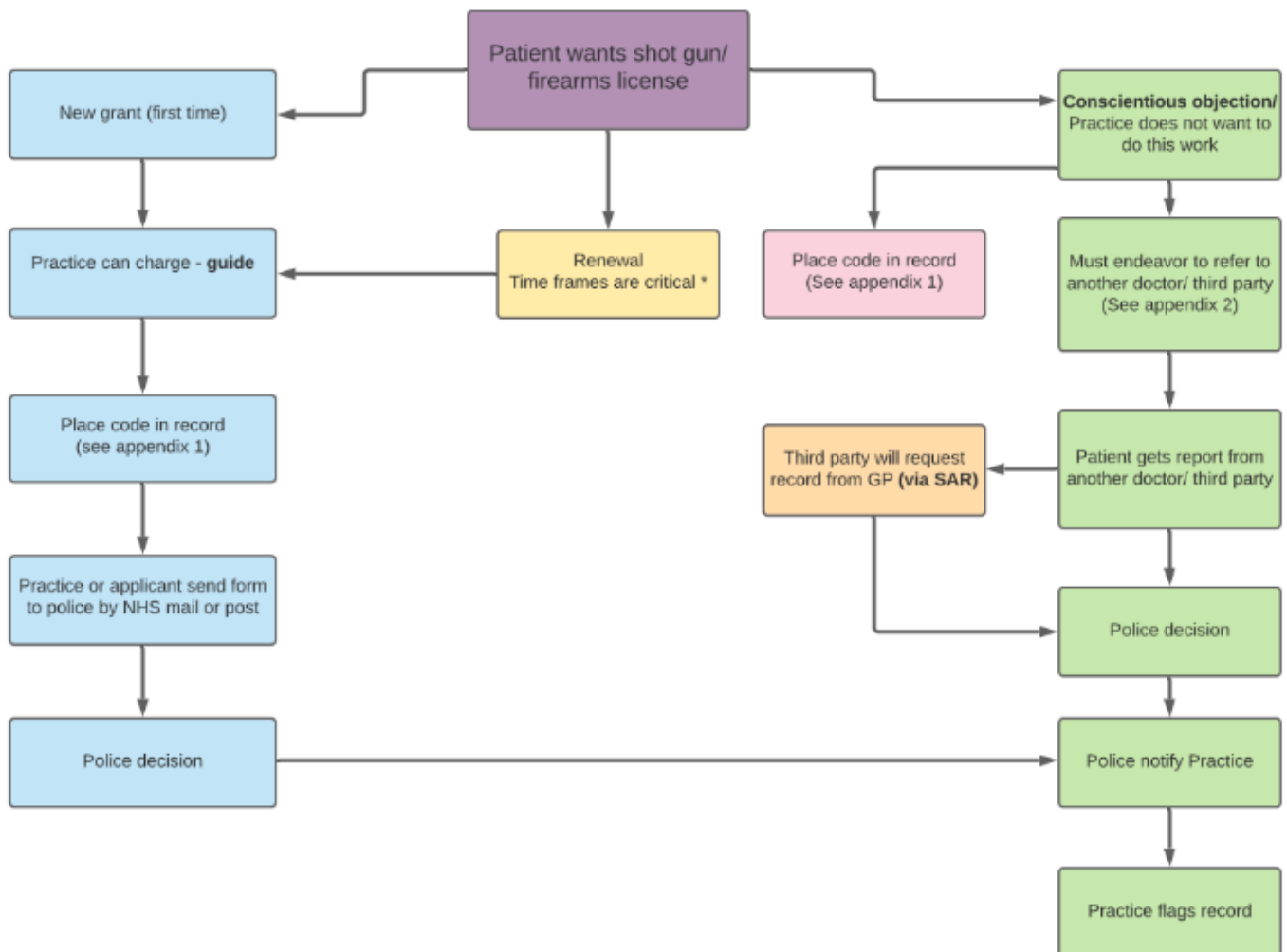
Firearms licensing – LMC guide to the new process

Guidance by Northumberland, Lancashire and Cumbria Local Medical Committees

A new process for firearms licensing was introduced 1 november 2021. The main difference is the an applicant **MUST** produce a medical report with the application rather than police writing to GPs after an application has been made.

Please note that the applicant does not have to approach the GP. If you are not happy to do the application then the applicant will have to obtain their full medical record most likely via a SAR for which you cannot charge.

Flowchart: Process for the firearms application



Links from flowchart:

- Patient wants shot gun/ firearms license – [application for the grant or renewal form.](#)
- [Practice can charge – guide](#) – Fees for non-NHS reports: guide for GPs - see appendix 3.
- [Conscientious objection/](#) practice does not want to do this work
- This party will request record from GP [\(via Sar\)](#)

Advice from the police

1. When an applicant is referred to or chooses to use a third party to complete their report, the third party will request the patient record from the GP. This must be sent from the GP to the third party. The third party cannot accept the patient record via the patient.
2. Once the patient report is completed, we can accept it:
 - a. direct from the GP (your flowchart covers this and states to send it to us via NHS mail or post),
 - b. from the applicant who may have held on to their application form with the intention of sending the application form and the GP report to us together/at the same time,
 - c. or from either the third party or the applicant in the instances where a third party has completed the report.

FIVE TOP TIPS

1. **It is an offence for an applicant not to disclose current and historic relevant medical condition(s) on their application form.**
 - Non-disclosure can result in an applicant being interviewed under caution for this offence, the outcome of which could be no further action (NFA), a caution or a summons to Court for a judge to determine the appropriate sanction. Non-disclosure will be considered when considering an applicant's suitability to possess firearms, i.e., have they purposely tried to conceal medical conditions from us and therefore are there integrity and dishonesty issues to consider.
2. **What medical conditions are relevant?**
 - The medical information is key to the police decision. The GP must list any of the conditions detailed on the form BUT the list is not exhaustive. For example, terminal diagnoses or anything else you consider may impact mental state. The license holder does have responsibility to inform the police, but it may be something you wish to consider.
3. **What should go in the additional information section.**
 - The answers to the questions on page two of the GP report will provide the Firearms Licensing Manager with invaluable information and build a picture of the applicant and their motivations. In particular the background or trigger factors in a mental health issue i.e., marital problems, domestic violence, financial worries, work stresses, bereavement etc. ***Quite often the explanation an applicant gives the police differs significantly from the notes a GP holds.
4. **Duration of treatment**
 - Particularly in mental health issues it is helpful to include non-drug support and treatment. Please consider including examples of consultant summaries etc.
5. **What level of detail is needed?**
 - This is a difficult one. Say a complex antidepressant regime, altered many times – include if you think relevant or indicate that more information available. The Firearms Licensing officer will approach you if more information is required. Consider commenting on patterns of illness and presentation.

*IF IN DOUBT THE FIREARMS LICENSING TEAM WILL BE HAPPY TO ADVISE

BMA guidance
[Firearms licensing process](#)

Appendix 1

SNOMED CODES: please note this is currently being updated to be more functional by the GPC

1366291000000101 | has applied for firearms certificate

Has shotgun certificate CTID: 81209100000 0109

812091000000109 | Has shotgun certificate (finding) |

1033741000000102 | No longer has shotgun certificate |

307907004 | Shotgun application certification status |

184757008 | Shotgun application certification - fee paid |

184756004 | Shotgun application certification - not paid |

812101000000101 | Has firearm certificate |

1033721000000109 | No longer has firearm certificate |

1361366291000000101 | Has applied for firearm certificate |

21366291000000101 | Has applied for firearm certificate |

1033721000000109 | No longer has firearm certificate | applied for firearm certificate
Has applied for firearm certificate

9101366301000000102 | Police notified of general practitioner concern regarding suitability to hold
firearm licence following system alert | 000000101 | Has applied for firearm certificate

Appendix 2

Third party providers:

<https://www.shootcert.co.uk/>

<https://www.firearmsmedicals.co.uk/apply/>

<https://firearmsmedicalreports.co.uk/apply/>

<https://www.shotgunmedicals.com/>

<https://www.medcert.co.uk/>

<https://basc.org.uk/>

Appendix 3

Step by step guide to non – NHS reports

Practice administrative staff must:

- check all relevant paperwork is provided
- if a fee hasn't already been set, now is the time to do it
- communicate in writing - formal notification of the doctors proposed fee and any further terms and conditions relating to the completion of the report should be communicated and agreed by both parties
- check that the patient has signed consent if appropriate
- log the arrival of the document in the practice system
- search patient notes and marry up with the information request
- allocate to the GP
- once the report has been completed ensure copies are made and kept within the practice record system
- make diary entry or bring forward date to post completed report
- complete payment claim form, log date of postage or report to relevant authority
- chase the payment if appropriate
- receive either payment schedule from requesting authority and reconcile with bank statement or receive payable order or cheque and arrange banking.

GPs must:

- assimilate contents of request, confirm patient consent has been granted to divulge if in order, and ascertain whether the Access to Medical Reports Act, Data Protection Act or Access to Health Records Act, applies
- read all GP notes, hospital letters and laboratory results contained within the patient record - this is to ensure, as far as possible, that the facts they certify in a report or certificate are correct
- produce an appropriate response, either in writing, typed directly onto electronic report template, or by dictation
- check and sign the final draft
- once signed, the report and any manual notes held should be returned to the administrator for copying and filing.