GPC GUIDANCE: USE OF 084 NUMBERS BY GP PRACTICES

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Introduction

A number of GP practices use telephone systems with non-geographical numbers, such as 084 numbers. The extra functionality that these systems provided has allowed practices to improve telephone access for patients.

In April 2010, changes to both the GMS and PMS regulations came into force which:

1. clarified that, from 1 April 2010, any practice entering into a new contract for telephone services must have ensured that calls to the practice would not cost patients more than calls to an equivalent geographical telephone number, and

2. outlined steps that practices with existing contracts should have taken before April 2011 to establish whether or not a person calling their practice pays more than the cost of a call to an equivalent geographical telephone number, and the steps that practices should have taken following that review.

The changes to the GMS and PMS regulations apply in England and Wales, but not in Northern Ireland or Scotland.

This guidance explains the implications of these regulatory changes for practices through the format of a number of questions and answers. It quotes extensively from the regulations, the full text of which can be found at Appendix 1.

What does this mean for practices negotiating a new telephone services contract?

The GMS and PMS regulations are very clear in saying that a practice "must not enter into, renew or extend a contract or other arrangement for telephone services unless it is satisfied that, having regard to the arrangement as a whole, persons will not pay more to make relevant calls to the practice than they would to make equivalent calls to a geographical number". This applies to any contract entered into on or after 1 April 2010.

It is the practice's responsibility to satisfy itself that the requirements of the regulations are met. One way for practices considering signing a new contract for telephone services to satisfy themselves of this is to ensure that, before agreeing to the contract, they obtain a statement from the telephone services provider to help them make a decision about compliance with the requirements of the GMS and PMS regulations, and that the cost of calls to the practice will be no more expensive than the cost of calls to an equivalent geographical number. The main telephone service providers are aware of the changes to the GMS and PMS regulations, and should be able to provide this statement on request.

Practices should note that the regulation requires the practice to satisfy itself as to the cost of calls, and makes no mention of a role for other organisations, such as primary care organisations (PCOs).

What does this mean for a practice that has an existing telephone services contract?

Since April 2010, all practices whose telephone number is not a geographical number (for example, an 0845 or 0844 number) have been required to review their current arrangements to "consider whether, having regard to the arrangement as a whole, persons pay more to make relevant calls than they would to make equivalent calls to a geographical number." Under the regulations, this review should have been completed before 1 April 2011.

It is the practice's responsibility to satisfy itself that the requirements of the regulations are met. One way for a practice to do this is to contact the company providing telephone services and ask them to demonstrate their efforts to support practices with compliance with the current GMS and PMS regulations. As noted above, the main telephone service providers are aware of the regulations, and should be able to provide a statement on request.

What should practices do after reviewing their existing telephone services contract?

If a practice's telephone services provider has confirmed in writing its efforts to support the practice with compliance, and that call costs are no higher than equivalent calls to a geographical number, then it is likely that the practice will not be required to take any further action until it is time to renew their telephony contract.

If the cost of calls to the practice is higher, however, then the practice is required to "take all reasonable steps… to ensure that, having regard to the arrangement as a whole, persons will not pay more to make relevant calls than they would to make equivalent calls to a geographical number." The regulations go on to say that practices should consider a number of options, including varying or renegotiating the terms of the current contract, or terminating it.

However, practices should note the careful wording of these regulations. If a practice has considered the options open to it and believes that no reasonable steps can be taken, it is not necessarily obliged to vary, renegotiate or terminate its current contract. This is important because many GP practices have signed multi-year contracts with telephone services providers which cannot be varied, renegotiated or terminated without substantial financial penalty.

In cases such as this, the GPC believes that practices would be able to argue that it would not be reasonable for them to take action until the end of their current contract, at which point they are required to negotiate a new contract which is in line with the requirements of the GMS and PMS regulations for new contracts.

Once it is apparent that there are no reasonable steps that a practice can take to ensure that call costs are equivalent to those to a geographical number, the practice is then required by the regulations to "consider introducing a system under which if a caller asks to be called back, the contractor will do so at the contractor's expense".

When undertaking this review process, it is vital that practices ensure they have documented the process fully, in case of any later dispute.

N.B. The above will only be relevant if the initial review of the existing contract took place prior to 1 April 2011, and if that contract is still valid at the present

time. Practices should be able to demonstrate compliance with regulations for any telephony services contracts signed after 1 April 2010.

What does "geographical number" mean?

The regulations define a geographical number as any telephone number that has a geographical area code as its prefix. This includes UK telephone numbers that begin 01 or 02.

What does "relevant calls" mean?

The regulations define relevant calls as calls which are:

(i) made by patients to the practice for any reason related to services provided under the contract; and,
(ii) made by persons, other than patients, to the practice in relation to services provided as part of the health service.

Do the same rules apply to other NHS bodies?

The *Directions to NHS Bodies concerning the cost of telephone calls in relation to health services 2009* specify that NHS Bodies including PCTs, Strategic Health Authorities, Special Health Authorities and many Hospital Trusts are subject to almost identical rules.

Why hasn't a blanket ban been issued on 084 numbers in the same way as with 087 numbers?

Banning 084 numbers outright would not have necessarily solved the issue that some patients are paying more than the cost of calling a normal geographical number to contact the NHS. The ban on 087 numbers demonstrated that banning a specific number range simply leads to the use of other number ranges, which generate similar problems and result in the presentation of the same issues yet again.

What does this mean for GPs tied into long-term contracts?

Unfortunately, the Government was unable to persuade telephone service providers to add clauses into existing contracts to allow GP practices an early release without penalty, but practices should ensure that any new contracts they enter into do include such a clause.

What if the phone company tries to get a practice to sign to a 5-year contract?

We would not recommend signing up to long-term contracts. The practice would also need to ensure that calls to its number do not cost more than calls to a geographical number. The practice should ask its supplier for written confirmation of support with compliance, and check that there are cancellation clauses in the new contract that are flexible and do not incur a penalty if the telephony provider cannot fulfil its obligations under the Regulations.

What will happen if costs are disputed?

Both parties in a dispute should be able to provide clear evidence that calls to the practice are either more or less expensive than an equivalent call to a normal geographical number.

Will practices that move away from 084 (and similar) numbers miss out on the added functionality that these numbers can provide?

No. Telecommunications solutions are available to rent or purchase which operate with 01, 02 or 03 telephone number schemes. These solutions can streamline calls, queue calls and provide automated appointment handling so that patients can call 24 hours a day to book, amend or cancel appointments.

Why can't practices just move to 03 numbers?

The DH originally stated that it does not wish to micro-manage the contracts that general practices hold with telephony providers, and has left it for GPs to decide which number is most suitable to use for callers to contact their practices, providing that calls to such numbers do not incur higher charges than geographical number calls.

Practices who are considering using 03 numbers should bear in mind that there may be additional associated costs for the practice to receiving calls that may make this option uneconomic in the long term.

GPC understands that some providers are offering practices the option of installing a local rate number to run concurrently with the 084 solution. Guidance published by the Department of Health indicates that the installation of a concurrent local rate line alongside an 084 line will ensure compliance and allow both patients and staff to continue to benefit from enhanced telephony. Providers who can offer this option are working with GPs who believe that this is an appropriate solution for their patients.

Updated guidance from the Department of Health can be found in full here: https://www.gov.uk/government/publications/the-use-of-084-numbers-in-the-nhs-further-guidance

What do the regulations say about calls from mobile phones?

The regulations do not include any specific requirement for practices to consider the cost of calls from mobile phones. In terms of call tariffs, the call rates which patients are charged depend on their mobile phone service provider. It is a matter for individual members of the public to ensure that they are happy with the terms and conditions of the mobile phone arrangements that they enter into with their mobile phone provider.

Do practices have to provide information about their telephone system and rates under the Freedom of Information Act (FoIA)?

Yes, practices are obliged to reply to such a FoIA request. It is likely that other practices will have received similar requests, and the Local Medical Committee can assist by co-ordinate replies so that all practices provide a consistent message. In the FoIA reply, it should be highlighted that when all costs are taken into account, the practice does not gain financially from 'revenue sharing', and that provision of an 084 telephone line service may even cost the practice more that that of a standard phone system. Practices can also ask their supplier to provide the information necessary to demonstrate that their call charges are in line with geographic call charges, as required by the legislation.

Appendix 1

Extract from the National Health Service (Primary Medical Services) (Miscellaneous Amendments) Regulations 2010[1]

Amendment of Schedule 6.—(1) Schedule 6 (other contractual terms) of the GMS Contracts Regulations is amended as follows.

(2) After paragraph 1A (telephone services), insert—"Cost of relevant calls1B.—

(1) The contractor must not enter into, renew or extend a contract or other arrangement for telephone services unless it is satisfied that, having regard to the arrangement as a whole, persons will not pay more to make relevant calls to the practice than they would to make equivalent calls to a geographical number.

(2) Where a contractor is party to an existing contract or other arrangement for telephone services under which persons making relevant calls to the practice call a number which is not a geographical number, the contractor must comply with sub-paragraph (3).

(3) The contractor must—

(a)before 1st April 2011, review the arrangement and consider whether, having regard to the arrangement as a whole, persons pay more to make relevant calls than they would to make equivalent calls to a geographical number; and

(b)if the contractor so considers, take all reasonable steps, including in particular considering the matters specified in sub-paragraph (4), to ensure that, having regard to the arrangement as a whole, persons will not pay more to make relevant calls than they would to make equivalent calls to a geographical number.

(4) The matters referred to in sub-paragraph (3)(b) are—

(a)varying the terms of the contract or arrangement;

(b)renegotiating the terms of the contract or arrangement; and

(c)terminating the contract or arrangement.

(5) If, despite taking all reasonable steps referred to in sub-paragraph (3)(b), it has not been possible to ensure that, having regard to the arrangement as a whole, persons will not pay more to make relevant calls to the practice than they would to make equivalent calls to a geographical number, the contractor must consider introducing a system under which if a caller asks to be called back, the contractor will do so at the contractor's expense.

(6) In this paragraph—

(a)"existing contract or other arrangement" means a contract or arrangement that was entered into prior to 1st April 2010 and which remains in force on 1st April 2010;

(b)"geographical number" means a number which has a geographical area code as its prefix; and

(c)"relevant calls" means calls—

(i)made by patients to the practice for any reason related to services provided under the contract, and

(ii)made by persons, other than patients, to the practice in relation to services provided as part of the health service.".

[1] This extract contains the wording relevant to GMS Practices in England. The same provisions also apply to PMS practices in England, and can be found by following the link to the original Regulations: http://www.legislation.gov.uk/uksi/2010/578/regulation/6/made