



GPs will not give up 0844 telephone numbers - they prefer NHS patients to pay their telephone bills for them

THE BACKGROUND

Last Sunday it was reported that “*Britain’s biggest provider of automated GP phone lines, Surgery Line, has allowed family doctors to amend their contracts, letting them switch to cheaper 03 numbers free of charge*”.¹

With a 0844 number, the GP imposes a “Service Charge” of around 7p per minute on every caller. This is used to subsidise the cost of their telephone system. With a “geographic rate” 01, 02 or 03 number, as used by the vast majority of NHS GPs, there is no such subsidy. The caller's telephone company may also add a sizeable “Access Charge” to their own benefit, whenever a Service Charge is imposed.²

When their NHS contracts were revised in 2010, GPs were given until 1 April 2011 to vary the terms of their arrangement to ensure that callers paid no more than the cost of an equivalent call to a geographical number.³ A switch to a geographic rate number was the obvious step to take, for those who were not already using them.

It had been claimed that “*many of the GPs involved will have to wait until long-term contracts with telecom firms end*”⁴ before they could change their number. The Surgery Line statement⁵ confirms that this is untrue. (The overwhelming majority of the 938 cases reported by the NHS⁶ are using Surgery Line. Other providers offer the same facility of switching.)

THE NEWS

I have now received a statement from the BMA, in reaction to this development:⁷

“Dr Laurence Buckman, Chair of the BMA’s GP committee said: ... in many cases GP practices may not be able to change their contract without incurring financial penalties that could impact on a practice’s budget and its ability to deliver services to patients.”

We have shown that these “financial penalties” are not for early contract termination or other charges imposed to the benefit of the system provider.

Dr Buckman is referring only to the loss of the subsidy being provided by patients.

EXPLANATION AND COMMENT

Clearly any practice that receives additional payments from patients has a healthier budget and is thereby better able to deliver services. GPs who choose to work within ‘our NHS’ must recognise that improper shortcuts such as this cannot be used. The generous public funding they receive has to be used in the most effective way possible to deliver the best possible care.

As GPs are now leading Clinical Commissioning Groups, spending the bulk of the NHS budget, they must be well aware of this principle. Do they deal with external providers thinking that those who do not extract additional payments from patients are thereby incurring a “financial penalty”?

Dr Buckman however refers only to “many cases”.

I wonder how many committed NHS GPs would join Dr Buckman in describing the loss of an improper subsidy, at the expense of patients, as a “financial penalty”.





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Notes and references

1. [Published by the Sunday Mirror](#) on confirmation of the Daisy statement ⁵.
2. [Ofcom proposes](#) that the "Service Charge" and "Access Charge" components of the cost of calling 084/087/09/118 numbers be "unbundled".
3. The terms remain in the current contract ([section 7.4](#)). This applied to England, and also Wales.
4. The BMA is quoted in this [Daily Mail article](#).
5. The statement from Daisy Group, owners of Surgery Line, is quoted in [this release](#).
6. See [this release](#) listing cases identified by the NHS with summary totals.
7. The extract given is from a "quote" provided to me by the BMA.
8. Specific views about the politics of the NHS cannot be ascribed to all supporters of the fair telecoms campaign - the comments may however be attributed to David Hickson of the fair telecoms campaign. I am happy to also be described as a "campaigner for the NHS".

Media Contacts

The information above, and in linked items is derived from approved statements issued by other bodies. The relevant sources, with contact details as provided, are as follows:

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