

April 1995

GPC

General Practitioners
Committee

Fundraising for practices

Guidance for GPs

BMA 

It is becoming increasingly common for individual patients and organisations to seek to support the work of GP practices through the purchase of equipment or fundraising activities. This guidance is intended to advise GPs of the steps that should be taken to ensure that such activities are not seen to benefit GPs individually, and that public accountability is maintained.

Patients must not be placed under any compulsion or obligation to make financial or other donations to benefit GP practices. Any such action by GPs could lead to criminal proceedings.

Even without compulsion being placed upon patients to contribute donations to practices, voluntary funds operated on behalf of practices could be construed as a charge upon patients for treatment and, therefore a breach of the terms of service. GPs are, of course, prevented from charging patients for treatment in all but the limited circumstances outlined in paragraph 38 of the terms of service.¹

What should GPs do if a situation arises where a group of patients approach a practice with an offer to raise funds or provide equipment?

The BMA has advised in “Medical ethics today: its practice and philosophy” that, as far as fundraising by patient participation groups is concerned:

“Fundraising, which appears to be the *raison d’être* of many patient participation groups can also raise ethical problems. Such projects should not impose any direct or indirect pressure on patients to contribute. The BMA has previously advised that collecting boxes in the waiting room are not acceptable, nor should patients be given the impression that essential equipment will only be provided by contribution. It is entirely unethical for charities or voluntary organisations to be encouraged to raise money for equipment which forms part of the indirect expenses element of GP remuneration. Many believe that accepting equipment from charitable or voluntary sources is a very questionable practice. Disputes have also arisen during the dissolution of a partnership, regarding the ownership of equipment provided by patients.”

If a practice wishes to become involved in fundraising, or to accept gifts from patients, a charitable trust should be established. The practice’s solicitor should be asked to draw up a trust deed and this should be acceptable to the charity commissioners. If the “owners” of the practice (ie the partners) and the trustees are the same, the commissioners are unlikely to approve the deed. Additionally, individual recipients of money and equipment from the charity should not be drawn solely from the practice.

As far as drawing attention to the existence of such charitable trusts is concerned, practices should go no further than putting up a notice in the surgery stating simply that a charitable trust exists. The GPs concerned, and their practice staff should, themselves, not participate in encouraging or organising fund raising activities for the practice. Individual donors or patients wishing to present gifts to the practice should be invited to donate these to the charitable trust.

¹ GPC guidance to GPs on charging NHS patients is available from BMA local offices

Further advice on charitable trusts and their establishment may be obtained from:

The Charity Commission
St Albans House
57-60 Haymarket
London SW1 4QX

Tel: 020 7210 3000

Note: BMA members seeking advice or guidance from the BMA should contact their local BMA office quoting their current membership number.

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