



Home Office

# Statutory guidance to police on firearms licensing

Response form

# Consultation

## Respondent information

### Q.1 Are you responding:

- As an individual? Please continue to **Q.2**
- On behalf of a business or other organisation? Please skip to **Q.4**

## Individual respondents

In this section, we ask individual respondents to describe the nature of their interest in firearms to assist in analysing the responses.

### Q.2 Are you primarily a resident of:

- England
- Wales
- Scotland
- Other (please specify)

### Q.3 What is the nature of your interest in firearms regulation?

I am a.. (please tick all that apply)

Firearm certificate holder	
Shotgun certificate holder	
Gamekeeper or pest controller	
Farmer, farm employee or land manager	
Veterinary surgeon/nurse or zookeeper	
Recreational shooter	
Gun control advocate	
Police or law enforcement officer	
GP or other health worker	
Prefer not to say	
Other (please specify below:)	

**Please go to question 6 (medical arrangements)**

## Business and other organisations

**Q.4 Where is the main location of your business or organisation?**

- England ✓
  - Wales
  - Scotland
  - Other (please specify)

**Q.5 What is the nature of your business or organisation?**

Firearms dealer	
Game keeping or pest control	
Farming or land management	
Veterinary practice or zookeeping	
Recreational shooting business	
Approved shooting club	
Museum	
Gun control advocacy	
Police or law enforcement	
GP surgery or other health body	
Prefer not to say	
Other (please specify below:)	✓
<b>Countryside Alliance – UK wide Campaigning Organisation</b>	

**Please go to question 6 (medical arrangements)**

## Medical Arrangements

### Q6

To what extent do you agree that the new arrangement for medical checks will improve public safety?

- **Strongly disagree**

### Q7

To what extent do you agree that the police should not proceed to issue a firearm or shotgun certificate unless they have received the relevant information from the applicant's GP?

- **Tend to disagree**

### Q8

To what extent do you agree that the new arrangements for medical checks represent an effective and efficient approach to ensure the police have the medical information they need before making a decision on the application?

- **Strongly disagree**

### Q9

Do you have any other comments on the new arrangements for medical checks? [max 150 words]:

- Medical checks will only increase public safety if GPs co-operate and are part of continuous assessment.
- There is no statutory obligation on GPs to cooperate or apply the 'firearms marker' to the medical record.
- Without the marker, the medical check simply provides a single snapshot of a person's health, which is of limited use.
- All three participants in the process – applicant, police and GP – must be working together for the proposals to be effective and efficient. The current guidance gives no assurance that this will be the case.
- It also seems that rather than being a one off event at grant or first renewal, or where a GP has raised a concern with the police, this process will be repeated at each grant or renewal. This should be unnecessary if the system of continuous assessment is working.
- The proposed system is fundamentally flawed.

## The draft guidance other than the new medical arrangements

### Q10

Considering the draft guidance other than the new medical arrangements, are there any additional checks or processes that should be included in the statutory guidance to improve public safety?

- **No**

If “yes”, please specify and give reasons [max 150 words]:

**Q11** Is there anything further that can be added to the guidance to achieve a more consistent approach between forces regarding their firearms licensing functions?

- **Yes**

If “yes”, please specify and give reasons [max 150 words]:

- The proposed system for medical checks will only deliver improved public safety if the Home Office and Department of Health ensure that GPs cooperate with the police in the discharge of their statutory duty under the 1968 Act and that the IT system for medical records can support the application of the firearms marker. This includes ensuring that there is a consistent fee structure.
  - While it is now for the police to request the initial report from the GP, which is welcome, a standard fee should be applied. Ideally this should be included within the licensing fee. This would avoid wide variation between force areas and GP practices. It would also streamline the process.
  - The enhanced medical checks and continuous monitoring were part of the promised move to ten year licences.

**Q12** To what extent do you agree that the draft guidance properly balances the interests of certificate holders and the need to preserve public safety?

- **Tend to disagree**

If you disagree, please specify and give reasons [max 150 words]:

- There is very little evidence that legal firearms owners are perpetrators of crime. On the contrary they are amongst the most law abiding members of society.
  - The proposals are unbalanced and overly burdensome on firearms users both in terms of cost and process, with limited, if any, substantial benefit in terms of public safety.
  - There is also no mechanism to challenge unreasonable GPs fees, either by the police or the applicant.

**Q13** Do you have any other comments on the draft guidance? [max 150 words]:

- We do not believe that this guidance or the accompanying Impact Assessment have a sound evidential basis, not least the apparent absence of hard data to support the claim that there are a significant number of ‘false declarations’, justifying much of this enhanced procedure.
- The new guidance seems to be disproportionately weighted against the granting of certificates, not least requiring standards of lifestyle from firearms owners that is not required of other citizens licensed to do a range of other activities capable of putting public safety at risk, such as driving.
- We are also concerned that the list of additional background checks is too widely drawn and leaves firearms owners open to false allegations, without any right to know what has been alleged, or a right to respond.
- We would also note that while the guidance being statutory has a little more force than the old non-statutory guidance, it is not binding and the application of the guidance could still vary significantly between force areas.

## Costs and benefits

**Q14** Are any costs likely to arise as a result of the new medical guidance that are not taken into account in the impact assessment?

- **Yes**

If “yes”, please specify and provide estimates where possible [max 150 words]:

- The fees charged by GPs for this service are not adequately addressed.
- Without a suggestion of reasonable charges, and a way to proceed in cases that GPs refuse to co-operate, we cannot know the projected increase in cost to the applicant.
- Additionally, the IA suggests a £48 million bill to cover these changes, yet there is limited evidence that this would have any beneficial results in terms of public safety.

**Q15** Are any benefits likely to arise as a result of the new medical guidance that are not taken into account in the impact assessment?

- **Yes**

If “yes”, please specify and provide estimates where possible [max 150 words]:

- The real benefit of the process proposed, and assuming the current deficiencies are addressed, would be to enable a move to 10 year certificates. This is not given consideration in the IA.

**THANK YOU FOR YOUR RESPONSE**