



National Health Service Reform (Scotland) Act 2004

2004 asp 7

PART 1

ORGANISATION AND OPERATION OF NATIONAL HEALTH SERVICE

Organisation

1 Dissolution of National Health Service trusts: modification of enactments

- (1) In the National Health Service (Scotland) Act 1978 (c. 29) (referred to in this Act as “the 1978 Act”), section 12A and Schedule 7A (establishment, functions, dissolution etc. of National Health Service trusts) are repealed.
- (2) In section 82 of the 1978 Act, after subsection (2A) insert—

“(2B) All endowments and property held in trust transferred to a Health Board by an order under paragraph 26 of Schedule 7A (whenever made) are held by the Health Board free of any trust existing immediately before the transfer (hereafter in this section referred to in relation to any such endowment or property as “the original trust”); but all such endowments and property shall be held by the Health Board on trust for such purposes relating to services provided under this Act, or to the functions of the Board with respect to research, as the Board may think fit.”
- (3) Until the coming into force of subsection (1) so far as repealing Schedule 7A to the 1978 Act, paragraph 26 of that Schedule has effect with the insertion after sub-paragraph (1) of the following sub-paragraph—

“(1A) For the avoidance of doubt, the reference to “property, rights and liabilities” in sub-paragraph (1) includes endowments and property held in trust.”

Commencement Information

II [S. 1\(1\)](#) in force for specified purposes at 1.9.2004 by [S.S.I. 2004/361](#), [art. 2\(a\)\(i\)](#)

Changes to legislation: There are currently no known outstanding effects for the National Health Service Reform (Scotland) Act 2004, Part I. (See end of Document for details)

I2 S. 1(2)(3) in force at 30.9.2004 by S.S.I. 2004/361, art. 2(b)(i)

F1 2 Community health partnerships

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Textual Amendments

F1 S. 2 repealed (1.4.2015) by Public Bodies (Joint Working) (Scotland) Act 2014 (asp 9), ss. 71(4), 72(2); S.S.I. 2014/231, art. 3

3 Duty in relation to governance of staff

After section 12H of the 1978 Act insert—

“12I Duty in relation to governance of staff

It shall be the duty of every Health Board and Special Health Board and of the Agency to put and keep in place arrangements for the purposes of—

- (a) improving the management of the officers employed by it;
- (b) monitoring such management; and
- (c) workforce planning.”

Commencement Information

I3 S. 3 in force at 30.9.2004 by S.S.I. 2004/361, art. 2(b)(i)

Equal opportunities

4 Equal opportunities

After section 2C of the 1978 Act insert—

“2D Equal opportunities

- (1) Health Boards, Special Health Boards and the Agency must discharge their functions in a manner that encourages equal opportunities and in particular the observance of the equal opportunity requirements.
- (2) In this section “equal opportunities” and “equal opportunity requirements” have the same meaning as in Section L2 (equal opportunities) of Part II of Schedule 5 to the Scotland Act 1998 (c. 46).”

Commencement Information

I4 S. 4 in force at 30.9.2004 by S.S.I. 2004/361, art. 2(b)(i)

Changes to legislation: There are currently no known outstanding effects for the National Health Service Reform (Scotland) Act 2004, Part 1. (See end of Document for details)

Co-operation

5 Health Boards: duty of co-operation

Before section 13 of the 1978 Act insert—

“12J Health Boards: co-operation with other Health Boards, Special Health Boards and the Agency

- (1) In exercising their functions in relation to the planning and provision of services which it is their function to provide, or secure the provision of, under or by virtue of this Act, Health Boards shall co-operate with one another, and with Special Health Boards and the Agency, with a view to securing and advancing the health of the people of Scotland.
- (2) In pursuance of subsection (1) a Health Board may—
 - (a) undertake to provide, or secure the provision of, services as respects the area of another Health Board, and the other Health Board may enter into arrangements with the first Health Board for that purpose,
 - (b) undertake with one or more other Health Boards to provide, or secure the provision of, services jointly as respects their areas.
- (3) A Health Board undertaking to provide, or secure the provision of, services under subsection (2) may—
 - (a) enter into arrangements with another Health Board, a Special Health Board or the Agency in relation to the provision of such services,
 - (b) do anything in relation to the provision of such services which they could do for the purpose of providing, or securing the provision of, such services as respects their area.
- (4) This section is without prejudice to any other power which a Health Board may have.”

Commencement Information

I5 [S. 5](#) in force at 30.9.2004 by [S.S.I. 2004/361](#), [art. 2\(b\)\(i\)](#)

Powers of intervention

6 Powers of intervention in case of service failure

After section 78 of the 1978 Act insert—

“78A Powers in case of service failure

- (1) This section applies where—
 - (a) it is a function of a body or person under or by virtue of this Act to provide, or secure the provision of, a service, and
 - (b) the Scottish Ministers consider that the body or person has failed, is failing or is likely to fail—
 - (i) to provide the service, or

Changes to legislation: There are currently no known outstanding effects for the National Health Service Reform (Scotland) Act 2004, Part 1. (See end of Document for details)

- (ii) to provide it to a standard which they regard as acceptable.
- (2) The Scottish Ministers may, where they consider it necessary for the purpose of ensuring the provision of the service in question to a standard which they regard as acceptable, direct that specified functions of the body or person under or by virtue of this Act be performed, for a specified period and to a specified extent, by—
 - (a) a body falling within subsection (4), or
 - (b) one or more persons falling within subsection (5).
- (3) In subsection (2), “specified” means specified in the direction.
- (4) A body falls within this subsection if it is—
 - (a) a Health Board,
 - (b) a Special Health Board, or
 - (c) the Agency.
- (5) A person falls within this subsection if the person is—
 - (a) an employee of a Health Board, a Special Health Board or the Agency,
 - (b) a member of the staff of the Scottish Administration, or
 - (c) an employee of a local authority.
- (6) A body or person appointed by a direction given under subsection (2) to perform functions of a body or person referred to in subsection (1) is referred to in this section as an “appointed person”.
- (7) An appointed person must comply with a direction given under subsection (2).
- (8) The remuneration and expenses of, and any other costs reasonably incurred by, an appointed person in performing the functions specified in the direction shall, unless otherwise specified in the direction, be paid by the body or person referred to in subsection (1).
- (9) Anything done or omitted by an appointed person in performing the functions specified in the direction is to be regarded as done or omitted by the body or person referred to in subsection (1).
- (10) A person dealing with an appointed person in good faith and for value is not concerned to inquire whether the appointed person is acting within the powers conferred by virtue of the direction.
- (11) The Scottish Ministers may vary or withdraw a direction given under subsection (2).

78B Relationship of sections 77, 78 and 78A

The powers conferred by each of sections 77, 78 and 78A are without prejudice to the powers conferred by the other two sections.”

Commencement Information

I6 [S. 6](#) in force at 30.9.2004 by [S.S.I. 2004/361](#), [art. 2\(b\)\(i\)](#)

Changes to legislation: There are currently no known outstanding effects for the National Health Service Reform (Scotland) Act 2004, Part 1. (See end of Document for details)

Public involvement

7 Public involvement

After section 2A of the 1978 Act (inserted by section 9(2)) insert—

“2B Duty to encourage public involvement

- (1) It is the duty of every body to which this section applies to take action with a view to securing, as respects health services for which it is responsible, that persons to whom those services are being or may be provided are involved in, and consulted on—
- (a) the planning and development, and
 - (b) decisions to be made by the body significantly affecting the operation, of those services.
- (2) This section applies to—
- (a) Health Boards,
 - (b) Special Health Boards, and
 - (c) the Agency.
- (3) For the purposes of subsection (1) a body is responsible for health services if they are health services—
- (a) which it is the function of the body to provide, or secure the provision of, and
 - (b) which are provided, or to be provided, to individuals by—
 - (i) the body, or
 - (ii) another person on the body's behalf, at the body's direction or in accordance with an agreement made by the body with that other person.”

Commencement Information

I7 [S. 7](#) in force at 30.9.2004 by [S.S.I. 2004/361](#), [art. 2\(b\)\(i\)](#)

8 Dissolution of local health councils

- (1) Local health councils established by virtue of section 7 of the 1978 Act are dissolved on such date as the Scottish Ministers may by order made by statutory instrument specify.
- (2) A statutory instrument containing an order under subsection (1) is subject to annulment in pursuance of a resolution of the Scottish Parliament.

Commencement Information

I8 [S. 8](#) in force at 1.2.2005 by [S.S.I. 2004/361](#), [art. 2\(d\)](#)

Changes to legislation:

There are currently no known outstanding effects for the National Health Service Reform (Scotland) Act 2004, Part 1.