

## SCHEDULE 6

### OTHER CONTRACTUAL TERMS

#### PART 1

#### PROVISION OF SERVICES

##### **Premises**

1. Subject to any plan which is included in the contract pursuant to regulation 21(3), the contractor must ensure that the premises used for the provision of services under the contract are—

- (a) suitable for the delivery of those services; and
- (b) sufficient to meet the reasonable needs of the contractor's patients.

##### **Telephone services**

2.—(1) The contractor must not be a party to any contract or other arrangement under which the number for telephone services to be used—

- (a) by patients to contact the practice for any purpose related to the contract; or
- (b) by any other person to contact the practice in relation to services provided as part of the health service,

starts with the digits 087, or 09 or consists of a personal number, unless the service is provided free to the caller.

(2) In this paragraph, “personal number” means a telephone number which starts with the number 070 followed by a further 8 digits.

##### **Attendance at practice premises**

3.—(1) The contractor must take steps to ensure that any patient who—

- (a) has not previously made an appointment; and
- (b) attends at the practice premises during the normal hours for essential services,

is provided with such services by an appropriate health care professional during that surgery period except in the circumstances specified in sub-paragraph (2).

(2) The circumstances referred to in sub-paragraph (1) are that—

- (a) it is more appropriate for the patient to be referred elsewhere for services under the Act; or
- (b) the patient is then offered an appointment to attend again within a time which is appropriate and reasonable having regard to all the circumstances and the patient's health would not thereby be jeopardised.

##### **Attendance outside practice premises**

4.—(1) In the case of a patient whose medical condition is such that in the reasonable opinion of the contractor—

- (a) attendance on the patient is required; and
- (b) it would be inappropriate for the patient to attend at the practice premises,

the contractor must provide services to that patient at whichever in its judgement is the most appropriate of the places set out in sub-paragraph (2).

- (2) The places referred to in sub-paragraph (1) are—
  - (a) the place recorded in the patient’s medical records as being the patient’s last home address;
  - (b) such other place as the contractor has informed the patient and the Health Board is the place where the contractor has agreed to visit and treat the patient; or
  - (c) some other place in the contractor’s practice area.
- (3) Nothing in this paragraph prevents the contractor from—
  - (a) arranging for the referral of a patient without first seeing the patient, in a case where the medical condition of that patient makes that course of action appropriate; or
  - (b) visiting the patient in circumstances where this paragraph does not place it under an obligation to do so.

### **Newly registered patients**

- 5.—(1) Where a patient has been—
  - (a) accepted on a contractor’s list of patients under paragraph 12; or
  - (b) assigned to that list by the Health Board,

the contractor must, in addition to and without prejudice to its other obligations in respect of that patient under the contract, invite the patient to participate in a consultation either at the contractor’s practice premises or, if the medical condition of the patient so warrants, at one of the places referred to in paragraph 4(2).

- (2) An invitation under sub-paragraph (1) must be issued within six months of the date of the acceptance of the patient on, or their assignment to, the contractor’s list and may offer the patient a consultation with—
  - (a) the contractor;
  - (b) a medical practitioner employed or engaged by the contractor; or
  - (c) a healthcare professional employed or engaged by the contractor.

(3) Where a patient (or, where appropriate, in the case of a patient who is a child, the child’s parent) agrees to participate in a consultation mentioned in sub-paragraph (1), with a person mentioned in sub-paragraph (2), that person must, in the course of that consultation make such inquiries and undertake such examinations as appear to him or her to be appropriate in all the circumstances.

### **Clinical reports**

6.—(1) Where the contractor provides any clinical services, other than under a private arrangement, to a patient who is not on the contractor’s list of patients, the contractor must, as soon as reasonably practicable, provide a clinical report relating to the consultation, and any treatment provided, to the Health Board.

- (2) The Health Board must send any report received under sub-paragraph (1)—
  - (a) to the person with whom the patient is registered for the provision of essential services or their equivalent; or
  - (b) if the person referred to in paragraph (a) is not known to it, to the Health Board in whose area the patient is resident.

## Storage of vaccines

7. The contractor must ensure that—
- (a) all vaccines are stored in a pharmaceutical refrigerator, designed for the purpose of storing vaccines or medicines, in accordance with the manufacturer's instructions;
  - (b) all refrigerators in which vaccines are stored have a calibrated maximum/minimum digital thermometer on which readings are taken on all working days to ensure the temperature remains within the specified range of +2°C to +8°C; and
  - (c) it has regard to [<sup>F1</sup>Public Health Scotland] guidance on Vaccine Storage and Handling(1).

**F1** Words in sch. 6 para. 7(c) substituted (1.4.2020) by [The Public Health Scotland Order 2019 \(S.S.I. 2019/336\)](#), art. 1(3)(b), [sch. 2 para. 14\(2\)](#) (with art. 4(4)(5))

## [<sup>F2</sup>Anaphylaxis training

7A. The contractor must ensure that all registered medical practitioners and registered nurses routinely employed or engaged by the contractor are trained in the recognition and initial treatment of anaphylaxis.]

**F2** [Sch. 6 para. 7A](#) inserted (18.10.2021) by [The National Health Service \(General Medical Services and Primary Medical Services Section 17C Agreements\) \(Scotland\) Amendment Regulations 2021 \(S.S.I. 2021/302\)](#), regs. 1, [9\(a\)](#)

## Infection control

8. The contractor must ensure that it has appropriate arrangements for infection control and decontamination.

## Duty of co-operation in relation to additional [<sup>F3</sup>, enhanced services and vaccination services]

9.—(1) A contractor which does not provide to its registered patients or to persons whom it has accepted as temporary residents—

- (a) a particular additional service; <sup>F4</sup>...
- (b) a particular enhanced service; [<sup>F5</sup>or
- (c) a particular vaccination service;]

must comply with the requirements specified in sub-paragraph (2).

- (2) The requirements referred to in sub-paragraph (1) are that the contractor must—
- (a) co-operate, insofar as it is reasonable, with any person responsible for the provision of that service or those services; and
  - (b) comply in core hours with any reasonable request for information from such a person or from the Health Board relating to the provision of that service or those services.

**F3** Words in [sch. 6 para. 9](#) heading substituted (18.10.2021) by [The National Health Service \(General Medical Services and Primary Medical Services Section 17C Agreements\) \(Scotland\) Amendment Regulations 2021 \(S.S.I. 2021/302\)](#), regs. 1, [9\(b\)\(i\)](#)

(1) The current version of the guidance is version 3.0, December 2017 and can be found at <http://www.hps.scot.nhs.uk/resourcedocument.aspx?id=6330>

**Changes to legislation:** There are currently no known outstanding effects for the The National Health Service (General Medical Services Contracts) (Scotland) Regulations 2018, PART 1. (See end of Document for details)

- F4** Word in sch. 6 para. 9(1) omitted (18.10.2021) by virtue of The National Health Service (General Medical Services and Primary Medical Services Section 17C Agreements) (Scotland) Amendment Regulations 2021 (S.S.I. 2021/302), regs. 1, **9(b)(ii)(aa)**
- F5** Sch. 6 para. 9(1)(c) and word inserted (18.10.2021) by The National Health Service (General Medical Services and Primary Medical Services Section 17C Agreements) (Scotland) Amendment Regulations 2021 (S.S.I. 2021/302), regs. 1, **9(b)(ii)(bb)**

**Duty of co-operation in relation to additional [<sup>F6</sup>, enhanced services and vaccination services]**

**10.** Where a contractor is to cease to be required to provide to its patients—

- (a) a particular additional service; <sup>F7</sup>...
- (b) a particular enhanced service, [<sup>F8</sup>or
- (c) a particular vaccination service;]

it must comply with any reasonable request for information relating to the provision of that service or those services made by the Health Board or by any person with whom the Board intends to enter into a contract for the provision of such services.

- F6** Words in sch. 6 para. 10 heading substituted (18.10.2021) by The National Health Service (General Medical Services and Primary Medical Services Section 17C Agreements) (Scotland) Amendment Regulations 2021 (S.S.I. 2021/302), regs. 1, **9(c)(i)**
- F7** Word in sch. 6 para. 10 omitted (18.10.2021) by virtue of The National Health Service (General Medical Services and Primary Medical Services Section 17C Agreements) (Scotland) Amendment Regulations 2021 (S.S.I. 2021/302), regs. 1, **9(c)(ii)**
- F8** Sch. 6 para. 10(c) and word inserted (18.10.2021) by The National Health Service (General Medical Services and Primary Medical Services Section 17C Agreements) (Scotland) Amendment Regulations 2021 (S.S.I. 2021/302), regs. 1, **9(c)(iii)**

**[<sup>F9</sup>Duty to co-operate with Health Board support for contractors**

**10A.** — Where a Health Board is providing support under regulation 18A (Health Board support for contractors), the contractor must—

- (a) co-operate with the Health Board to allow the Health Board to provide pharmacotherapy services and community treatment and care services,
- (b) comply in core hours with any reasonable request for information from the Health Board to the contractor in relation to such service provision,
- (c) provide to its patients any aspect of pharmacotherapy services and community treatment and care services which the Health Board is to provide under regulation 18A(2) if the patient requires the services immediately to prevent injury or worsening of their clinical condition and Health Board provision is not immediately available./

- F9** Sch. 6 para. 10A inserted (28.5.2022) by The National Health Service (General Medical Services Contracts and Primary Medical Services Section 17C Agreements) (Scotland) Amendment Regulations 2022 (S.S.I. 2022/130), regs. 1(2), **8**

**Changes to legislation:**

There are currently no known outstanding effects for the The National Health Service (General Medical Services Contracts) (Scotland) Regulations 2018, PART 1.