



Health and Social Care Act 2012

2012 CHAPTER 7

PART 11

MISCELLANEOUS

Information relating to births and deaths etc.

284 Special notices of births and deaths

- (1) Section 269 of the National Health Service Act 2006 (special notices of births and deaths) is amended as follows.
- (2) For subsection (2) substitute—
 - “(2) Each registrar of births and deaths must furnish to such relevant body or bodies as may be determined in accordance with regulations the particulars of such births or deaths entered in a register of births or deaths kept for the registrar’s sub-district as may be prescribed.”
- (3) In subsection (4) for “the Primary Care Trust for the area in which the birth takes place” substitute “such relevant body or bodies as may be determined in accordance with regulations”.
- (4) In subsection (6)—
 - (a) after “under subsection (4)” insert “to a relevant body”, and
 - (b) for “the Primary Care Trust” (in each place where it occurs) substitute “the body”.
- (5) In subsection (7)—
 - (a) for “A Primary Care Trust” substitute “A relevant body to whom notice is required to be given under subsection (4)”, and
 - (b) for “any medical practitioner or midwife residing or practising within its area” substitute “such descriptions of medical practitioners or midwives as may be prescribed”.

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Changes to legislation: Health and Social Care Act 2012, PART 11 is up to date with all changes known to be in force on or before 09 May 2024. There are changes that may be brought into force at a future date. Changes that have been made appear in the content and are referenced with annotations. (See end of Document for details)

- (6) In subsection (9) for “the Primary Care Trust concerned” substitute “the relevant body or bodies to whom the failure relates”.
- (7) In subsection (10), in paragraph (a) for “a Primary Care Trust” substitute “a relevant body”.
- (8) After subsection (10) insert—
- “(11) For the purposes of this section, the following are relevant bodies—
- (a) the National Health Service Commissioning Board,
- (b) clinical commissioning groups,
- (c) local authorities.
- (12) Information received by a local authority by virtue of this section may be used by it only for the purposes of functions exercisable by it in relation to the health service.
- (13) In this section, “local authority” has the same meaning as in section 2B.”
- (9) Until the commencement of section 34, section 269(11) of the National Health Service Act 2006 has effect as if Primary Care Trusts were included in the list of bodies that are relevant bodies for the purposes of that section.

Commencement Information

II S. 284 in force at 1.4.2013 by S.I. 2013/160, art. 2(2) (with arts. 7-9)

285 Provision of information by Registrar General

- (1) Section 270 of the National Health Service Act 2006 (provision of information by Registrar General) is amended as follows.
- (2) In subsection (1) —
- (a) for “the Secretary of State” substitute “any of the following persons”, and
- (b) at the end insert “—
- (a) the Secretary of State,
- (b) the Board,
- (c) a clinical commissioning group,
- (d) a local authority,
- (e) the National Institute for Health and Care Excellence,
- (f) the Health and Social Care Information Centre,
- (g) a Special Health Authority which has functions that are exercisable in relation to England,
- (h) the Care Quality Commission, and
- (i) such other persons as the Secretary of State may specify in a direction.”
- (3) In subsection (2) —
- (a) for “the Secretary of State” substitute “the person to whom the information is provided”, and
- (b) for “his functions” substitute “functions exercisable by the person”.

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(4) After subsection (4) insert—

“(5) In this section, “local authority” has the same meaning as in section 2B.”

Commencement Information

- I2** S. 285 partly in force; s. 285 in force for specified purposes at Royal Assent, see s. 306(1)(d)
I3 S. 285 in force at 1.4.2013 in so far as not already in force by S.I. 2013/160, art. 2(2) (with arts. 7-9)

286 Provision of information by Registrar General: Wales

(1) Section 201 of the National Health Service (Wales) Act 2006 (provision of information by Registrar General) is amended as follows.

(2) In subsection (1) —

- (a) for “the Welsh Ministers” substitute “any of the following persons”, and
(b) at the end insert “—
(a) the Welsh Ministers,
(b) a Special Health Authority which has functions that are exercisable in relation to Wales,
(c) a Local Health Board,
(d) an NHS trust established under section 18, and
(e) such other persons as the Welsh Ministers may specify in a direction.”

(3) In subsection (2) —

- (a) for “the Welsh Ministers” substitute “the person to whom the information is provided”, and
(b) for “their functions” substitute “functions exercisable by the person”.

Commencement Information

- I4** S. 286 partly in force; s. 286 in force for specified purposes at Royal Assent, see s. 306(1)(d)
I5 S. 286 in force at 1.4.2013 in so far as not already in force by S.I. 2013/160, art. 2(2) (with arts. 7-9)

287 Provision of statistical information by Statistics Board

(1) Section 42 of the Statistics and Registration Service Act 2007 (information relating to births and deaths etc) is amended as follows.

(2) For subsection (4) substitute—

“(4) The Board may disclose to a person mentioned in subsection (4A) any information referred to in subsection (2)(a) to (c) which is received by the Board under this section, or any information which is produced by the Board by analysing any such information, if—

- (a) the information consists of statistics and is disclosed for the purpose of assisting the person in the performance of functions exercisable by it in relation to the health service, or

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- (b) the information is disclosed for the purpose of assisting the person to produce or to analyse statistics for the purpose of assisting the person, or any other person mentioned in subsection (4A), in the performance of functions exercisable by it in relation to the health service.

(4A) Those persons are—

- (a) the Secretary of State,
- (b) the Welsh Ministers,
- (c) the National Health Service Commissioning Board,
- (d) a clinical commissioning group,
- (e) a local authority,
- (f) a Local Health Board,
- (g) an NHS trust established under section 18 of the National Health Service (Wales) Act 2006,
- (h) the National Institute for Health and Care Excellence,
- (i) the Health and Social Care Information Centre,
- (j) a Special Health Authority,
- (k) the Care Quality Commission, and
- (l) such other persons as the appropriate authority may specify in a direction given for the purposes of this section.

(4B) For the purposes of subsection (4A)(l), the appropriate authority is—

- (a) in relation to a direction to be given for purposes relating only to Wales, the Welsh Ministers, and
- (b) in any other case, the Secretary of State.”

(3) After subsection (5) insert—

“(5A) A direction under subsection (4A)(l) must be given by an instrument in writing.

(5B) Sections 272(7) and 273(1) of the National Health Service Act 2006 apply in relation to the power of the Secretary of State to give a direction under subsection (4A)(l) as they apply in relation to powers to give a direction under that Act.

(5C) Sections 203(9) and 204(1) of the National Health Service (Wales) Act 2006 apply in relation to the power of the Welsh Ministers to give a direction under subsection (4A)(l) as they apply in relation to powers to give a direction under that Act.”

(4) After subsection (6) insert—

“(7) In subsection (4A)—

“clinical commissioning group” and “Special Health Authority” have the same meaning as in the National Health Service Act 2006;

“local authority” has the same meaning as in section 2B of that Act of 2006.”

Commencement Information

16 S. 287 partly in force; s. 287 in force for specified purposes at Royal Assent, see s. 306(1)(d)

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17 S. 287 in force at 1.4.2013 in so far as not already in force by S.I. 2013/160, **art. 2(2)** (with arts. 7-9)

Duties to co-operate

288 Monitor: duty to co-operate with Care Quality Commission

(1) [^{F1}NHS England] must co-operate with the Care Quality Commission in the exercise of their respective functions.

(2) In particular [^{F2}NHS England] must—

(a) give the Commission any [^{F3}relevant] information [^{F2}NHS England] has about the provision of health care services which [^{F2}NHS England] or the Commission considers would assist the Commission in the exercise of its functions,

(b) make arrangements with the Commission to ensure that—

(i) a person applying both for a licence under Chapter 3 of Part 3 and to be registered under the Health and Social Care Act 2008 may do so by way of a single application form,

(ii) such a person is granted a licence under that Chapter and registration under that Act by way of a single document, and

(c) seek to secure that the conditions included in a licence under that Chapter in a case within paragraph (b) are consistent with any conditions on the person's registration under that Act.

[^{F4}(2A) In subsection (2)(a) “relevant information” means information held by NHS England in connection with—

(a) its regulatory functions, within the meaning given by section 13SB(2) of the National Health Service Act 2006, or

(b) its functions under section 27A of the National Health Service Act 2006 Act (NHS trusts: oversight and support).]

[^{F5}(3)]

(4) In subsection (2), references to registration under the Health and Social Care Act 2008 are references to registration under Chapter 2 of Part 1 of that Act.

Textual Amendments

F1 Words in s. 288(1) substituted (1.7.2022) by Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 5 para. 96(2)**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)

F2 Words in s. 288(2)(a) substituted (1.7.2022) by Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 5 para. 96(3)(a)**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)

F3 Word in s. 288(2)(a) inserted (1.7.2022) by Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 5 para. 96(3)(b)**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)

F4 S. 288(2A) inserted (1.7.2022) by Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 5 para. 96(4)**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)

F5 S. 288(3) omitted (1.7.2022) by virtue of Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 12 para. 6**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)

Commencement Information

18 S. 288(1)(2)(a) in force at 1.7.2012 by S.I. 2012/1319, **art. 2(3)**

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- I9** S. 288(2)(b)(3)(4) in force at 1.4.2013 by S.I. 2013/160, **art. 2(2)** (with arts. 7-9)
I10 S. 288(2)(c) in force at 1.4.2014 by S.I. 2014/39, **art. 2(3)**

289 Care Quality Commission: duty to co-operate with Monitor

(1) Section 70 of the Health and Social Care Act 2008 (co-operation between the Commission and the Independent Regulator of NHS foundation trusts) is amended as follows.

(2) For subsection (1) substitute—

“(1) The Commission must co-operate with Monitor in the exercise of their respective functions.”

(3) For subsection (2) substitute—

“(2) In particular the Commission must—

- (a) give Monitor any information the Commission has about the provision of health care which the Commission or Monitor considers would assist Monitor in the exercise of its functions,
- (b) make arrangements with Monitor to ensure that—
 - (i) a person applying to be both registered under Chapter 2 and for a licence under the Health and Social Care Act 2012 may do so by way of a single application form, and
 - (ii) such a person is granted a registration under Chapter 2 and a licence under that Act by way of a single document, and
- (c) seek to secure that the conditions on a registration under Chapter 2 in a case within paragraph (b) are consistent with the conditions included in the person's licence under that Act.”

(4) In subsection (3)—

- (a) for “Independent Regulator” substitute “Monitor”, and
- (b) for “an NHS foundation trust” substitute “a person who holds a licence under the Health and Social Care Act 2012”.

(5) After that subsection insert—

“(4) In this section, a reference to a licence under the Health and Social Care Act 2012 is a reference to a licence under Chapter 3 of Part 3 of that Act.”

(6) In the heading of that section, for “Independent Regulator of NHS Foundation Trusts” substitute “Monitor”.

Commencement Information

- I11** S. 289(1) in force at 1.7.2012 for specified purposes by S.I. 2012/1319, **art. 2(3)**
I12 S. 289(1) in force at 1.4.2013 for specified purposes by S.I. 2013/671, **art. 2(3)**
I13 S. 289 in force at 1.4.2014 in so far as not already in force by S.I. 2014/39, **art. 2(3)**
I14 S. 289(2) in force at 1.7.2012 by S.I. 2012/1319, **art. 2(3)**
I15 S. 289(3) in force at 1.7.2012 for specified purposes by S.I. 2012/1319, **art. 2(3)**
I16 S. 289(4)(a)(6) in force at 1.7.2012 by S.I. 2012/1319, **art. 2(3)**
I17 S. 289(4)(b)(5) in force at 1.4.2013 by S.I. 2013/671, **art. 2(3)**

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290 Other duties to co-operate

- ^{F6}(1)
- (2) The Care Quality Commission and each relevant body must co-operate with each other in the exercise of their respective functions [^{F7}(including any functions that consist of exercising the functions of other persons)].
- (3) The relevant bodies are—
- ^{F8}(a)
- (b) the National Institute for Health and Care Excellence,
- (c) the Health and Social Care Information Centre,
- [^{F9}(ca) Health Education England,] and
- (d) Special Health Authorities which have functions that are exercisable in relation to England.
- (4) The Secretary of State may by order amend subsection (3) so as to add to the list of relevant bodies a body that has functions relating to health.
- ^{F10}(5)
- ^{F11}(6)
- (7) For the purposes of this section and section 291, the functions of a Special Health Authority include such functions as it is directed to exercise under section 7 of the National Health Service Act 2006 (directions by Secretary of State).
- (8) References in this section and section 291 to functions are references to functions so far as exercisable in relation to England.

Textual Amendments

- F6** S. 290(1) omitted (1.7.2022) by virtue of [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), [Sch. 5 para. 97\(2\)](#); [S.I. 2022/734](#), reg. 2(a), [Sch.](#) (with regs. 13, 29, 30)
- F7** Words in s. 290(2) inserted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), [Sch. 9 para. 25](#); [S.I. 2022/734](#), reg. 2(a), [Sch.](#) (with regs. 13, 29, 30)
- F8** S. 290(3)(a) omitted (1.7.2022) by virtue of [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), [Sch. 5 para. 97\(3\)](#); [S.I. 2022/734](#), reg. 2(a), [Sch.](#) (with regs. 13, 29, 30)
- F9** S. 290(3)(ca) inserted (1.4.2015) by [Care Act 2014 \(c. 23\)](#), s. 127(1), [Sch. 5 para. 15\(3\)](#); [S.I. 2014/3186](#), art. 2(f)
- F10** S. 290(5) omitted (1.7.2022) by virtue of [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), [Sch. 5 para. 97\(4\)](#); [S.I. 2022/734](#), reg. 2(a), [Sch.](#) (with regs. 13, 29, 30)
- F11** S. 290(6) omitted (1.7.2022) by virtue of [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), [Sch. 5 para. 97\(4\)](#); [S.I. 2022/734](#), reg. 2(a), [Sch.](#) (with regs. 13, 29, 30)

Modifications etc. (not altering text)

- C1** S. 290 excluded (1.1.2015) by [Care Act 2014 \(c. 23\)](#), [ss. 111\(9\)](#), 127(1); [S.I. 2014/2473](#), art. 5(c)
- C2** S. 290(1)(2) modified by [2006 c. 41](#), [s. 13Z4\(3\)](#) (as inserted (27.3.2012 for specified purposes) by [Health and Social Care Act 2012 \(c. 7\)](#), [ss. 23\(1\)](#), 306(1)(d)(4))

Commencement Information

- I18** S. 290 partly in force; s. 290 in force for specified purposes at Royal Assent, see [s. 306\(1\)\(d\)](#)
- I19** S. 290(1)(2)(3)(a)(d)(4)-(8) in force at 1.10.2012 by [S.I. 2012/1831](#), [art. 2\(2\)](#)

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120 S. 290(3)(b)(c) in force at 1.4.2013 in so far as not already in force by [S.I. 2013/160, art. 2\(2\)](#) (with [arts. 7-9](#))

291 Breaches of duties to co-operate

- (1) If the Secretary of State is of the opinion that bodies subject to a relevant co-operation duty have breached or are breaching the duty, or are at significant risk of breaching the duty, the Secretary of State may give a written notice of the Secretary of State's opinion to each body.
- (2) The relevant co-operation duties are—
 - (a) the duty under section 288 (co-operation by [^{F12}NHS England] with the Care Quality Commission),
 - [^{F13}(b) the duty under section 290(2),]
 - (c) the duty under section 70 of the Health and Social Care Act 2008 (co-operation by the Care Quality Commission with [^{F14}NHS England]),
 - (d) any duties imposed by an enactment on relevant bodies to co-operate with each other in the exercise of their respective functions.
- (3) The Secretary of State must publish each notice given under subsection (1) in such form as the Secretary of State considers appropriate.
- (4) Subsection (5) applies if, having given a notice under subsection (1), the Secretary of State is satisfied that—
 - (a) the bodies concerned have breached or are continuing to breach the duty or, the risk of a breach having materialised, are breaching the duty, and
 - (b) the breach is having a detrimental effect on the performance of the health service (or, where the effect of the breach on the performance of the health service is both beneficial and detrimental, its overall effect is detrimental).
- (5) The Secretary of State may by order prohibit each body from exercising specified functions, or from exercising specified functions in a specified manner, unless the other body concerned agrees in writing that the body may do so.
- (6) The power to make an order under subsection (5)—
 - (a) may be exercised so as to specify different functions in relation to each body, but
 - (b) may not be exercised so as to prevent a body from complying with a requirement imposed by or under an enactment or by a court or tribunal.
- (7) In default of agreement as to the exercise of a function specified in an order under subsection (5), a body may exercise the function in accordance with provision determined by arbitration.
- (8) An order under subsection (5) must specify the period for which a prohibition imposed by it has effect; and the period specified for that purpose may not exceed one year beginning with the day on which the order comes into force.
- (9) But if the Secretary of State is satisfied that the breach is continuing to have a detrimental effect (or an effect that overall is detrimental) on the performance of the health service, the Secretary of State may by order extend by one year the period for which the prohibition for the time being has effect.

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(10) In this section, “the health service” means the comprehensive health service continued under section 1(1) of the National Health Service Act 2006.

Textual Amendments

- F12** Words in s. 291(2)(a) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\), s. 186\(6\), Sch. 5 para. 98\(a\)](#); S.I. 2022/734, [reg. 2\(a\), Sch. \(with regs. 13, 29, 30\)](#)
- F13** S. 291(2)(b) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\), s. 186\(6\), Sch. 5 para. 98\(b\)](#); S.I. 2022/734, [reg. 2\(a\), Sch. \(with regs. 13, 29, 30\)](#)
- F14** Words in s. 291(2)(c) substituted (1.7.2022) by virtue of [Health and Care Act 2022 \(c. 31\), s. 186\(6\), Sch. 5 para. 98\(c\)](#); S.I. 2022/734, [reg. 2\(a\), Sch. \(with regs. 13, 29, 30\)](#)

Modifications etc. (not altering text)

- C3** S. 291(2)(d) modified by 2006 c. 41, s. 14Z24(3) (as inserted (27.3.2012 for specified purposes, 1.4.2013 in so far as not already in force) by [Health and Social Care Act 2012 \(c. 7\), ss. 26, 306\(1\)\(d\)\(4\)](#); S.I. 2013/160, [art. 2\(2\) \(with arts. 7-9\)](#))
- C4** S. 291(2)(d) modified by 2006 c. 41, s. 13Z4(3) (as inserted (27.3.2012 for specified purposes, 1.4.2013 in so far as not already in force) by [Health and Social Care Act 2012 \(c. 7\), ss. 23\(1\), 306\(1\)\(d\)\(4\)](#); S.I. 2013/160, [art. 2\(2\) \(with arts. 7-9\)](#))

Commencement Information

- I21** S. 291 partly in force; s. 291 in force for specified purposes at Royal Assent, see s. 306(1)(d)
- I22** S. 291 in force at 1.10.2012 in so far as not already in force by S.I. 2012/1831, [art. 2\(2\)](#)

The Care Quality Commission

292 Requirement for Secretary of State to approve remuneration policy etc.

In paragraph 5 of Schedule 1 to the Health and Social Care Act 2008 (employees of the Care Quality Commission), at the end insert—

“(5) Before making a determination as to remuneration, pensions, allowances or gratuities for the purposes of sub-paragraph (3) or (4), the Commission must obtain the approval of the Secretary of State to its policy on that matter.”

Commencement Information

- I23** S. 292 in force at 1.4.2013 by S.I. 2013/160, [art. 2\(2\) \(with arts. 7-9\)](#)

293 Conduct of reviews etc.

- F15**(1)
- F16**(2)
- F17**(3)
- F18**(4)

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Textual Amendments

- F15** S. 293(1) omitted (1.10.2014) by virtue of Care Act 2014 (c. 23), ss. 91(9)(e), 127(1); S.I. 2014/1714, art. 4
- F16** S. 293(2) omitted (1.10.2014) by virtue of Care Act 2014 (c. 23), ss. 91(9)(e), 127(1); S.I. 2014/1714, art. 4
- F17** S. 293(3) omitted (1.10.2014) by virtue of Care Act 2014 (c. 23), ss. 90(10), 127(1); S.I. 2014/2473, art. 3(e)
- F18** S. 293(4) omitted (1.10.2014) by virtue of Care Act 2014 (c. 23), ss. 90(10), 127(1); S.I. 2014/2473, art. 3(e)

Commencement Information

- I24** S. 293 in force at 1.4.2013 by S.I. 2013/160, art. 2(2) (with arts. 7-9)

294 Failure to discharge functions

- (1) In section 82 of the Health and Social Care Act 2008 (failure by Commission to discharge functions), in subsection (1), at the end insert “,
- and that the failure is significant.”
- (2) After subsection (2) of that section insert—
- “(2A) But the Secretary of State may not give a direction under subsection (1) in relation to the performance of functions in a particular case.”
- (3) After subsection (3) of that section insert—
- “(4) Where the Secretary of State exercises a power under subsection (1) or (3), the Secretary of State must publish the reasons for doing so.
- (5) For the purposes of this section a failure to discharge a function properly includes a failure to discharge it consistently with what the Secretary of State considers to be the interests of the health service in England or (as the case may be) with what otherwise appears to the Secretary of State to be the purpose for which it is conferred; and “the health service” has the same meaning as in the National Health Service Act 2006.”
- (4) In section 161 of that Act (orders, regulations and directions: general provisions), in subsection (3), before “any power of the Secretary of State to give directions” insert “(subject to section 82(2A))”.
- (5) In section 165 of that Act (directions), at the beginning of subsection (2) insert “Subject to subsection (3),”.
- (6) After that subsection insert—
- “(3) A direction under section 82 must be given by regulations or by an instrument in writing.”

Commencement Information

- I25** S. 294 partly in force; s. 294 in force for specified purposes at Royal Assent, see s. 306(1)(d)
- I26** S. 294 in force at 1.10.2012 in so far as not already in force by S.I. 2012/1831, art. 2(2)

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Arrangements with devolved authorities etc.

295 Arrangements between [^{F19}NHS England] and Northern Ireland Ministers

- (1) [^{F19}NHS England] may make arrangements with a Northern Ireland Minister for [^{F19}NHS England] to commission services for the purposes of the Northern Ireland health service.
- (2) Arrangements under this section may be on such terms and conditions as may be agreed between the parties to the arrangements.
- (3) Those terms and conditions may include provision with respect to the making of payments to [^{F19}NHS England] in respect of the cost to it of giving effect to the arrangements.

- (4) In this section—

“commission” means arrange for the provision of,

“Northern Ireland health service” means any of the health services under any enactment which extends to Northern Ireland and which corresponds to section 1(1) of the National Health Service Act 2006 (and, for that purpose, “enactment” includes subordinate legislation within the meaning of the Interpretation Act 1978 and Northern Ireland legislation), and

“Northern Ireland Minister” includes the First Minister, the deputy First Minister and a Northern Ireland department.

Textual Amendments

F19 Words in s. 295 substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), Sch. 1 para. 1(1)(2); [S.I. 2022/734](#), reg. 2(a), Sch. (with regs. 13, 29, 30)

Commencement Information

I27 S. 295 in force at 1.10.2012 for specified purposes by [S.I. 2012/1831](#), art. 2(2)

I28 S. 295 in force at 1.4.2013 in so far as not already in force by [S.I. 2013/160](#), art. 2(2) (with arts. 7-9)

296 Arrangements between [^{F20}NHS England] and Scottish Ministers etc.

- (1) [^{F20}NHS England] may make arrangements with the Scottish Ministers or a Scottish health body for [^{F20}NHS England] to commission services for the purposes of the Scottish health service.
- (2) Arrangements under this section may be on such terms and conditions as may be agreed between the parties to the arrangements.
- (3) Those terms and conditions may include provision with respect to the making of payments to [^{F20}NHS England] in respect of the cost to it of giving effect to the arrangements.

- (4) In this section—

“commission” means arrange for the provision of, and

“Scottish health body” means—

- (a) a Health Board or Special Health Board constituted under section 2 of the National Health Service (Scotland) Act 1978, and

Status: Point in time view as at 01/07/2022.

Changes to legislation: Health and Social Care Act 2012, PART 11 is up to date with all changes known to be in force on or before 09 May 2024. There are changes that may be brought into force at a future date. Changes that have been made appear in the content and are referenced with annotations. (See end of Document for details)

- (b) the Common Services Agency for the Scottish Health Service constituted by section 10 of that Act.

Textual Amendments

F20 Words in s. 296 substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), Sch. 1 para. 1(1)(2); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)

Commencement Information

I29 S. 296 in force at 1.10.2012 for specified purposes by S.I. 2012/1831, art. 2(2)

I30 S. 296 in force at 1.4.2013 in so far as not already in force by S.I. 2013/160, art. 2(2) (with arts. 7-9)

297 Relationships between the health services

Schedule 21 (which amends enactments relating to the relationships between the health services in the United Kingdom) has effect.

Commencement Information

I31 S. 297 in force at 1.2.2013 for specified purposes by S.I. 2012/2657, art. 2(4)

I32 S. 297 in force at 1.4.2013 for specified purposes by S.I. 2013/160, art. 2(2) (with arts. 7-9)

298 Advice or assistance to public authorities in the Isle of Man or Channel Islands

- (1) [^{F21}NHS England] or [^{F22}an integrated care board] may provide advice or assistance to any public authority in the Isle of Man or Channel Islands.
- (2) Advice or assistance under subsection (1) may be provided on such terms, including terms as to payment, as [^{F21}NHS England] or (as the case may be) the [^{F23}integrated care board] considers appropriate.

Textual Amendments

F21 Words in s. 298 substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), Sch. 1 para. 1(1)(2); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)

F22 Words in s. 298(1) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), Sch. 4 para. 187(2); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)

F23 Words in s. 298(2) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), Sch. 4 para. 187(3); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)

Commencement Information

I33 S. 298 in force at 1.10.2012 by S.I. 2012/1831, art. 2(2)

Supervised community treatment under the Mental Health Act 1983

299 Certificate of consent of community patients to treatment

- (1) Part 4A of the Mental Health Act 1983 (treatment of community patients not recalled to hospital) is amended as follows.

Status: Point in time view as at 01/07/2022.

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- (2) In section 64C (treatment of adult community patients), after subsection (4) insert—
- “(4A) Where there is authority to give treatment by virtue of subsection (2)(a), the certificate requirement is also met in respect of the treatment if the approved clinician in charge of the treatment has certified in writing that the patient has capacity to consent to the treatment and has consented to it.
- (4B) But, if the patient has not attained the age of 18, subsection (4A) does not apply to section 58A type treatment.”
- (3) In section 64E (treatment of child community patients), in subsection (7)—
- (a) for “(3) to (9)” substitute “(3) to (4A) and (5) to (9)”, and
- (b) at the end insert “; and for the purpose of this subsection, subsection (4A) of section 64C above has effect as if—
- (a) the references to treatment were references only to section 58 type treatment,
- (b) the reference to subsection (2)(a) of section 64C were a reference to subsection (6)(a) of this section, and
- (c) the reference to capacity to consent were a reference to competence to consent.”
- (4) After section 64F insert—
- “64FA Withdrawal of consent**
- (1) Where the consent of a patient to any treatment has been given as mentioned in section 64C(2)(a) above for the purposes of section 64B or 64E above, the patient may at any time before the completion of the treatment withdraw his consent, and those sections shall then apply as if the remainder of the treatment were a separate form of treatment.
- (2) Subsection (3) below applies where—
- (a) the consent of a patient to any treatment has been given as mentioned in section 64C(2)(a) above for the purposes of section 64B or 64E above; but
- (b) before the completion of the treatment, the patient loses capacity or (as the case may be) competence to consent to the treatment.
- (3) The patient shall be treated as having withdrawn his consent and section 64B or (as the case may be) section 64E above shall then apply as if the remainder of the treatment were a separate form of treatment.
- (4) Without prejudice to the application of subsections (1) to (3) above to any treatment given under the plan of treatment to which a patient has consented, a patient who has consented to such a plan may at any time withdraw his consent to further treatment, or to further treatment of any description, under the plan.
- (5) This section shall not preclude the continuation of any treatment, or of treatment under any plan, pending compliance with section 58, 58A, 64B or 64E above if the approved clinician in charge of the treatment considers that the discontinuance of the treatment, or of treatment under the plan, would cause serious suffering to the patient.”
- (5) In section 64H (certificates: supplementary provision)—

Status: Point in time view as at 01/07/2022.

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- (a) in subsection (2), at the end insert “; and the regulations may make different provision for the different descriptions of Part 4A certificate”, and
 - (b) in subsections (3), (4) and (5), after “Part 4A certificate” insert “that falls within section 64C(4) above”.
- (6) In section 17B of the Mental Health Act 1983 (conditions of community treatment order), in subsection (3)(b), after “Part 4A of this Act” insert “that falls within section 64C(4) below”.
- (7) In section 61 of that Act (review of treatment), in subsection (1), after “that section)” insert “that falls within section 64C(4) below”.
- (8) In section 62A of that Act (treatment on recall of community patient or revocation of order), in subsection (5), after “applies” insert “and the Part 4A certificate falls within section 64C(4) below”.
- (9) In subsection (6) of that section, after “58 or 58A above” insert “or 64B or 64E below”.
- (10) After that subsection insert—
- “(6A) In a case where this section applies and the certificate requirement is no longer met for the purposes of section 64C(4A) below, the continuation of any treatment, or of treatment under any plan, pending compliance with section 58 or 58A above or 64B or 64E below shall not be precluded if the approved clinician in charge of the treatment considers that the discontinuance of the treatment, or of treatment under the plan, would cause serious suffering to the patient.”

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Commencement Information
I34 S. 299 in force at 1.6.2012 by S.I. 2012/1319, art. 2(2)

Transfer schemes

^{F24}**300** **Transfer schemes**

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Textual Amendments
F24 S. 300 omitted (1.7.2022) by virtue of Health and Care Act 2022 (c. 31), ss. 89(1)(a), 186(6); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)

^{F25}**301** **Transfer schemes: supplemental**

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Textual Amendments
F25 S. 301 omitted (1.7.2022) by virtue of Health and Care Act 2022 (c. 31), ss. 89(1)(a), 186(6); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)

Status: Point in time view as at 01/07/2022.

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[^{F26}302 Transfer schemes in respect of previously transferred property

- (1) This section applies in relation to any property, rights or liabilities transferred under a property transfer scheme made under section 300(1) (before its repeal) from a Primary Care Trust, a Strategic Health Authority or the Secretary of State to a Special Health Authority or a qualifying company.
- (2) The Secretary of State may make a scheme for the transfer of any such property, rights or liabilities from the Special Health Authority or qualifying company to any of the following—
 - (a) a Minister of the Crown;
 - (b) NHS England;
 - (c) an integrated care board;
 - (d) an NHS trust;
 - (e) an NHS foundation trust;
 - (f) a qualifying company.
- (3) The things that may be transferred under a scheme under this section include—
 - (a) property, rights and liabilities that could not otherwise be transferred;
 - (b) property acquired, and rights and liabilities arising, after the making of the scheme;
 - (c) criminal liabilities, except where transfer is to a Minister of the Crown.
- (4) A transfer scheme under this section may make supplementary, incidental, transitional and consequential provision and may in particular—
 - (a) create rights, or impose liabilities, in relation to property or rights transferred;
 - (b) make provision about the continuing effect of things done by the transferor in respect of anything transferred;
 - (c) make provision about the continuation of things (including legal proceedings) in the process of being done by, on behalf of or in relation to the transferor in respect of anything transferred;
 - (d) make provision for references to the transferor in an instrument or other document in respect of anything transferred to be treated as references to the transferee.
- (5) A transfer scheme under this section may make provision for the shared ownership or use of property.
- (6) A transfer scheme under this section may provide—
 - (a) for the scheme to be modified by agreement after it comes into effect, and
 - (b) for any such modifications to have effect from the date when the original scheme comes into effect.
- (7) In this section references to the transfer of property include references to the grant of a lease.
- (8) In this section “qualifying company” means—
 - (a) a company which is formed under section 223 of the National Health Service Act 2006 and wholly or partly owned by the Secretary of State or NHS England, or
 - (b) a subsidiary of a company which is formed under that section and wholly owned by the Secretary of State.]

Status: Point in time view as at 01/07/2022.

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Textual Amendments

F26 S. 302 substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), [ss. 89\(2\)](#), 186(6); [S.I. 2022/734](#), [reg. 2\(a\)](#), [Sch.](#) (with [regs. 13, 29, 30](#))

Commencement Information

I35 S. 302 in force at 1.7.2012 for specified purposes by [S.I. 2012/1319](#), [art. 2\(3\)](#)

I36 S. 302 in force at 1.10.2012 for specified purposes by [S.I. 2012/1831](#), [art. 2\(2\)](#)

I37 S. 302 in force at 1.4.2013 in so far as not already in force by [S.I. 2013/160](#), [art. 2\(2\)](#) (with [arts. 7-9](#))

Status:

Point in time view as at 01/07/2022.

Changes to legislation:

Health and Social Care Act 2012, PART 11 is up to date with all changes known to be in force on or before 09 May 2024. There are changes that may be brought into force at a future date. Changes that have been made appear in the content and are referenced with annotations.