



National Health Service Act 2006

2006 CHAPTER 41

PART 11

PROPERTY AND FINANCE

CHAPTER 6

FINANCE

[^{F1} [^{F2}NHS England]

Textual Amendments

- F1** Ss. 223B-223F and cross-heading inserted (27.3.2012 for specified purposes, 1.10.2012 for specified purposes, 1.4.2013 in so far as not already in force) by [Health and Social Care Act 2012 \(c. 7\)](#), ss. 24, 306(1)(d)(4); S.I. 2012/1831, art. 2(2); S.I. 2013/160, art. 2(2) (with arts. 7-9)
- F2** Words in Act 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)

223B Funding of [^{F2}NHS England]

- (1) The Secretary of State must pay to [^{F2}NHS England] in respect of each financial year sums not exceeding the amount allotted for that year by the Secretary of State towards meeting the expenditure of [^{F2}NHS England] which is attributable to the performance by it of its functions in that year.
- (2) An amount is allotted to [^{F2}NHS England] for a financial year under this section when [^{F2}NHS England] is notified in writing by the Secretary of State that the amount is allotted to it for that year.
- (3) The Secretary of State may make a new allotment under this section increasing or reducing the allotment previously so made only if—

Status: Point in time view as at 01/07/2022.

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- (a) [^{F2}NHS England] agrees to the change,
 - (b) a parliamentary general election takes place, or
 - (c) the Secretary of State considers that there are exceptional circumstances that make a new allotment necessary.
- (4) The Secretary of State may give directions to [^{F2}NHS England] with respect to the payment of sums by it to the Secretary of State in respect of charges or other sums referable to the valuation or disposal of assets.
- (5) Sums falling to be paid to [^{F2}NHS England] under this section are payable subject to such conditions as to records, certificates or otherwise as the Secretary of State may determine.
- [The Secretary of State may direct NHS England—
- ^{F3}[^{F4}(6) (a) that an amount of the sums paid to it under this section in respect of a financial year is to be used for purposes relating to service integration;
- (b) about the use by NHS England of that amount for those purposes.]
- (7) The amount referred to in [^{F5}subsection (6)(a)]—
- (a) is to be determined in such manner as the Secretary of State considers appropriate, and
 - (b) must be specified in the [^{F6}direction].
- [The power under subsection (6)(b) includes power to give NHS England directions
- ^{F7}(7A) about the exercise of any of its functions under or by virtue of section 223GA (including directions requiring consultation with the Secretary of State or other specified persons).
- (7B) The Secretary of State must publish any direction under subsection (6).]
- (8) The reference in subsection (6) to service integration is a reference to the integration of the provision of health services with the provision of health-related services or social care services, as referred to in sections 13N and [^{F8}14Z42].]

Textual Amendments

- F3** Ss. 223B(6)-(8) inserted (1.10.2014) by Care Act 2014 (c. 23), ss. **121(1)**, 127(1); S.I. 2014/2473, art. 6
- F4** S. 223B(6) substituted (1.7.2022) by Health and Care Act 2022 (c. 31), ss. **15(2)(a)**, 186(6); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F5** Words in s. 223B(7) substituted (1.7.2022) by Health and Care Act 2022 (c. 31), ss. **15(2)(b)(i)**, 186(6); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F6** Word in s. 223B(7)(b) substituted (1.7.2022) by Health and Care Act 2022 (c. 31), ss. **15(2)(b)(ii)**, 186(6); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F7** S. 223B(7A)(7B) inserted (1.7.2022) by Health and Care Act 2022 (c. 31), ss. **15(2)(c)**, 186(6); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F8** Word in s. 223B(8) substituted (1.7.2022) by Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 4 para. 116**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)

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[^{F9}223C. Financial duties of NHS England: expenditure

- (1) NHS England must exercise its functions with a view to ensuring that expenditure incurred by the following bodies in a financial year (taken together) does not exceed the aggregate of any sums received by them in the year—
 - (a) NHS England;
 - (b) integrated care boards.
- (2) The Secretary of State may by direction—
 - (a) specify descriptions of expenditure that are, or are not, to be treated for the purposes of this section as expenditure incurred by a body, or expenditure incurred by it in a particular financial year;
 - (b) specify descriptions of sums that are, or are not, to be treated for the purposes of this section as having been received by a body, or as having been received by it in a particular financial year;
 - (c) provide for sums received by NHS England under section 223B in a year but not spent to be treated for the purposes of this section as expenditure incurred by it in a particular financial year;
 - (d) provide for sums received by an integrated care board under section 223G in a year but not spent to be treated for the purposes of this section as expenditure incurred by it in a particular financial year.
- (3) For the purposes of this section any sum allotted to NHS England for a year under section 223B is to be treated as received by it in that year (subject to any direction under subsection (2)(b)).

Textual Amendments

F9 Ss. 223C-223E substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), [ss. 27](#), 186(6); S.I. 2022/734, [reg. 2\(a\)](#), [Sch.](#) (with [regs. 13](#), 29, 34)

223CA NHS England: banking facilities

The Secretary of State may by direction require NHS England to use banking facilities specified in the direction for any purposes so specified.]

Textual Amendments

F9 Ss. 223C-223E substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), [ss. 27](#), 186(6); S.I. 2022/734, [reg. 2\(a\)](#), [Sch.](#) (with [regs. 13](#), 29, 34)

[^{F9}223D. Financial duties of NHS England: controls on total resource use

- (1) NHS England must exercise its functions with a view to ensuring that, in respect of each financial year—
 - (a) total capital resource use does not exceed the limit specified in a direction by the Secretary of State;
 - (b) total revenue resource use does not exceed the limit specified in a direction by the Secretary of State.

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- (2) In subsection (1) “total capital resource use” and “total revenue resource use” means the use of capital resources or (as the case may be) revenue resources by relevant NHS bodies, other than use that consists of the transfer of resources between relevant NHS bodies.
- (3) In subsection (2) “relevant NHS bodies” means—
- (a) NHS England,
 - (b) integrated care boards,
 - (c) NHS trusts established under section 25, and
 - (d) NHS foundation trusts.
- (4) A direction under subsection (1)(a) or (b) specifying a limit in relation to a financial year may be varied by a subsequent direction only if—
- (a) NHS England agrees to the change,
 - (b) a parliamentary general election takes place, or
 - (c) the Secretary of State considers that there are exceptional circumstances which make the variation necessary.
- (5) The Secretary of State must publish and lay before Parliament any directions under this section.
- (6) Any reference in this Chapter to the use of capital resources or revenue resources is a reference to their expenditure, consumption or reduction in value.]

Textual Amendments

- F9** Ss. 223C-223E substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), **ss. 27**, 186(6); S.I. 2022/734, [reg. 2\(a\)](#), [Sch.](#) (with [regs. 13, 29, 34](#))

[^{F9}223E. Financial duties of NHS England: additional controls on resource use

- (1) The Secretary of State may direct NHS England to ensure—
- (a) that relevant capital resource in a financial year which is attributable to matters specified in the direction does not exceed an amount so specified;
 - (b) that relevant revenue resource use in a financial year which is attributable to matters specified in the direction does not exceed an amount so specified.
- (2) In subsection (1) “relevant capital resource use” and “relevant revenue resource use” means the use of capital resources or (as the case may be) revenue resources by NHS England and integrated care boards.
- (3) The Secretary of State may direct NHS England to ensure that NHS England’s use of revenue resources in a financial year which is attributable to such matters relating to administration as are specified in the direction does not exceed an amount so specified.]

Textual Amendments

- F9** Ss. 223C-223E substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), **ss. 27**, 186(6); S.I. 2022/734, [reg. 2\(a\)](#), [Sch.](#) (with [regs. 13, 29, 34](#))

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223F Power to establish contingency fund

- (1) [F²NHS England] may use a proportion of the sums paid to it under section 223B to establish a contingency fund.
- (2) [F²NHS England] may make a payment out of the fund where the payment is necessary in order to enable—
 - (a) [F²NHS England] to discharge any of its commissioning functions, or
 - (b) [F¹⁰an integrated care board] to discharge any of its functions.
- (3) [F²NHS England] must publish guidance as to how it proposes to exercise its powers to make payments out of the contingency fund.
- (4) In this section, “commissioning functions” means functions in arranging for the provision of services as part of the health service.]

Textual Amendments

F10 Words in s. 223F(2)(b) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\), s. 186\(6\), Sch. 4 para. 117](#); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)

[F¹¹[F¹²Integrated care boards]

Textual Amendments

F11 Ss. 223G-223K and cross-heading inserted (27.3.2012 for specified purposes, 1.10.2012 for specified purposes, 1.4.2013 in so far as not already in force) by [Health and Social Care Act 2012 \(c. 7\), ss. 27, 306\(1\)\(d\)\(4\)](#); S.I. 2012/1831, art. 2(2); S.I. 2013/160, art. 2(2) (with arts. 7-9)

F12 S. 223G cross-heading substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\), ss. 29\(2\), 186\(6\)](#); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 34)

223G Means of meeting expenditure of [F¹³integrated care boards] out of public funds

- (1) [F²NHS England] must pay in respect of each financial year to each [F¹⁴integrated care board] sums not exceeding the amount allotted for that year by [F²NHS England] to [F¹⁵the board] towards meeting the expenditure of [F¹⁵the board] which is attributable to the performance by it of its functions in that year.
- (2) In determining the amount to be allotted to [F¹⁶an integrated care board] for any year, [F²NHS England] may take into account—
 - (a) the expenditure of the [F¹⁷integrated care board] during any previous financial year, and
 - (b) the amount that it proposes to hold, during the year to which the allotment relates, in any contingency fund established under section 223F.
- (3) An amount is allotted to [F¹⁸an integrated care board] for a year under this section when [F¹⁹the board] is notified in writing by [F²NHS England] that the amount is allotted to it for that year.
- (4) [F²NHS England] may make a new allotment under this section increasing or reducing an allotment previously so made.

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- (5) Where [^{F2}NHS England] allots an amount to [^{F20}an integrated care board] or makes a new allotment under subsection (4), it must notify the Secretary of State.
- (6) [^{F2}NHS England] may give directions to [^{F21}an integrated care board] with respect to—
- (a) the application of sums paid to it by virtue of a new allotment increasing an allotment previously so made, and
 - (b) the payment of sums by it to [^{F2}NHS England] in respect of charges or other sums referable to the valuation or disposal of assets.
- (7) Sums falling to be paid to [^{F22}integrated care boards] under this section are payable subject to such conditions as to records, certificates or otherwise as [^{F2}NHS England] may determine.

^{F23}(8)

Textual Amendments

- F2** Words in Act 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)
- F13** Words in s. 223G heading substituted (1.7.2022) by Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 4 para. 118(2)**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F14** Words in s. 223G(1) substituted (1.7.2022) by Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 4 para. 118(3)(a)**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F15** Words in s. 223G(1) substituted (1.7.2022) by Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 4 para. 118(3)(b)**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F16** Words in s. 223G(2) substituted (1.7.2022) by Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 4 para. 118(4)(a)**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F17** Words in s. 223G(2)(a) substituted (1.7.2022) by Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 4 para. 118(4)(b)**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F18** Words in s. 223G(3) substituted (1.7.2022) by Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 4 para. 118(5)(a)**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F19** Words in s. 223G(3) substituted (1.7.2022) by Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 4 para. 118(5)(b)**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F20** Words in s. 223G(5) substituted (1.7.2022) by Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 4 para. 118(6)**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F21** Words in s. 223G(6) substituted (1.7.2022) by Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 4 para. 118(6)**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F22** Words in s. 223G(7) substituted (1.7.2022) by Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 4 para. 118(7)**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F23** S. 223G(8) omitted (1.7.2022) by virtue of Health and Care Act 2022 (c. 31), s. 186(6), **Sch. 4 para. 118(8)**; S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)

Modifications etc. (not altering text)

- C1** S. 223G modified (1.7.2022) by The Health and Care Act 2022 (Commencement No. 2 and Transitional and Saving Provision) Regulations 2022 (S.I. 2022/734), **reg. 25** (with regs. 13, 29, 30)

Expenditure on integration

- ^{F24}**223GA**
^{F25}(1) Where the Secretary of State has given NHS England a direction under section 223B(6)(a) about sums paid to it in respect of a financial year, NHS England may direct an integrated care board that an amount (a “designated amount”) of the

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sums paid to the board under section 223G in respect of that year is to be used for purposes relating to service integration.

- (2) The designated amount—
 - (a) is to be determined in such manner as NHS England considers appropriate, and
 - (b) must be specified in the direction under subsection (1).]
- (3) The conditions under section 223G(7) subject to which the payment of a designated amount is made must include a condition that [F²⁶the integrated care board] transfers the amount into one or more funds (“pooled funds”) established under arrangements under section 75(2)(a) (“pooling arrangements”).
- (4) The conditions may also include—
 - (a) conditions relating to the preparation and agreement by [F²⁷the integrated care board] and each local authority and other [F²⁸integrated care board] that is party to the pooling arrangements of a plan for how to use the designated amount (a “spending plan”);
 - (b) conditions relating to the approval of a spending plan by [F²NHS England];
 - (c) conditions relating to the inclusion of performance objectives in a spending plan;
 - (d) conditions relating to the meeting of any performance objectives included in a spending plan or specified by [F²NHS England].
- (5) Where a condition subject to which the payment of a designated amount is made is not met, [F²NHS England] may—
 - (a) withhold the payment (in so far as it has not been made);
 - (b) recover the payment (in so far as it has been made);
 - (c) direct the [F²⁹integrated care board] as to the use of the designated amount for purposes relating to service integration or for making payments under section 256.
- (6) Where [F²NHS England] withholds or recovers a payment under subsection (5)(a) or (b)—
 - (a) [F³⁰it may use the amount for any purposes relating to service integration,] and
 - (b) in so far as the exercise of the power under paragraph (a) involves making a payment to a different [F³¹integrated care board] or some other person, the making of the payment is subject to such conditions as [F²NHS England] may determine.

F³²(7)

- (8) The power under subsection (5)(b) to recover a payment may be exercised in a financial year after the one in respect of which the payment was made.
- (9) The payments that may be made out of a pooled fund into which a designated amount is transferred include payments to a local authority which is not party to the pooling arrangements in question in connection with the exercise of its functions under Part 1 of the Housing Grants, Construction and Regeneration Act 1996 (disabilities facilities grants).
- (10) In exercising a power under this section, [F²NHS England] must have regard to the extent to which there is a need for the provision of each of the following—
 - (a) health services (see subsection (12)),

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- (b) health-related services (within the meaning given in section [F3314Z42]), and
 - (c) social care services (within the meaning given in that section).
- (11) A reference in this section to service integration is a reference to the integration of the provision of health services with the provision of health-related services or social care services, as referred to in sections 13N and [F3414Z42].
- (12) “Health services” means services provided as part of the health service in England.]

Textual Amendments

- F2** Words in Act 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)
- F24** S. 223GA inserted (1.10.2014) by [Care Act 2014 \(c. 23\)](#), ss. 121(2), 127(1); S.I. 2014/2473, art. 6
- F25** S. 223GA(1)(2) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), ss. 15(3)(a), 186(6); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F26** Words in s. 223GA(3) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), Sch. 4 para. 119(2); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F27** Words in s. 223GA(4)(a) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), Sch. 4 para. 119(3)(a); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F28** Words in s. 223GA(4)(a) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), Sch. 4 para. 119(3)(b); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F29** Words in s. 223GA(5)(c) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), Sch. 4 para. 119(4); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F30** S. 223GA(6)(a) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), ss. 15(3)(b), 186(6); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F31** Words in s. 223GA(6)(b) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), Sch. 4 para. 119(4); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F32** S. 223GA(7) omitted (1.7.2022) by virtue of [Health and Care Act 2022 \(c. 31\)](#), ss. 15(3)(c), 186(6); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F33** Word in s. 223GA(10)(b) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), Sch. 4 para. 119(5); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)
- F34** Word in s. 223GA(11) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), Sch. 4 para. 119(5); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 30)

[F35] **223GB Power to impose financial requirements on integrated care boards**

- (1) NHS England may give integrated care boards directions about their management or use of financial or other resources.
- (2) The directions that may be given include a direction imposing limits on expenditure or resource use by integrated care boards.
- (3) NHS England must publish any directions under this section.

Textual Amendments

- F35** Ss. 223GB-223GD inserted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), ss. 29(3), 186(6); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 34)

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223GC Financial duties of integrated care boards: expenditure limits

- (1) An integrated care board must exercise its functions with a view to ensuring that expenditure incurred by the board in a financial year does not exceed the sums received by it in that year.
- (2) NHS England may by direction—
 - (a) specify descriptions of expenditure that are, or are not, to be treated for the purposes of this section as expenditure incurred by an integrated care board, or expenditure incurred by it in a particular financial year;
 - (b) specify descriptions of sums that are, or are not, to be treated for the purposes of this section as having been received by an integrated care board, or as having been received by it in a particular financial year;
 - (c) provide for sums received by an integrated care board under section 223G in a year but not spent to be treated for the purposes of this section as expenditure incurred by it in a particular financial year.
- (3) For the purposes of this section any sum allotted to an integrated care board for a year under section 223G is to be treated as received by it in that year (subject to any direction under subsection (2)(b)).

Textual Amendments

F35 Ss. 223GB-223GD inserted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), **ss. 29(3)**, 186(6); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 34)

223GD Integrated care boards: banking facilities

The Secretary of State may give integrated care boards directions requiring them to use specified banking facilities for any specified purposes.]

Textual Amendments

F35 Ss. 223GB-223GD inserted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), **ss. 29(3)**, 186(6); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 34)

^{F36}223H Financial duties of clinical commissioning groups: expenditure

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Textual Amendments

F36 Ss. 223H-223J omitted (1.7.2022) by virtue of [Health and Care Act 2022 \(c. 31\)](#), **ss. 29(4)**, 186(6); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 34)

^{F36}223I Financial duties of clinical commissioning groups: use of resources

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Textual Amendments

F36 Ss. 223H-223J omitted (1.7.2022) by virtue of Health and Care Act 2022 (c. 31), ss. 29(4), 186(6); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 34)

F36 223J Financial duties of clinical commissioning groups: additional controls on resource use

.....

Textual Amendments

F36 Ss. 223H-223J omitted (1.7.2022) by virtue of Health and Care Act 2022 (c. 31), ss. 29(4), 186(6); S.I. 2022/734, reg. 2(a), Sch. (with regs. 13, 29, 34)

223K Payments in respect of quality

- (1) [F2NHS England] may, after the end of a financial year, make a payment to [F37an integrated care board].
- (2) For the purpose of determining whether to make a payment under subsection (1) and (if so) the amount of the payment, [F2NHS England] must take into account at least one of the following factors—
 - (a) the quality of relevant services provided during the financial year;
 - (b) any improvement in the quality of relevant services provided during that year (in comparison to the quality of relevant services provided during previous financial years);
 - (c) the outcomes identified during the financial year as having been achieved from the provision at any time of relevant services;
 - (d) any improvement in the outcomes identified during that financial year as having been so achieved (in comparison to the outcomes identified during previous financial years as having been so achieved).
- (3) For that purpose, [F2NHS England] may also take into account either or both of the following factors—
 - (a) relevant inequalities identified during that year;
 - (b) any reduction in relevant inequalities identified during that year (in comparison to relevant inequalities identified during previous financial years).

F38(4)

F39(5)

- (6) Regulations may make provision as to how payments under subsection (1) may be spent F40
- (7) [F41An integrated care board] must publish an explanation of how [F42the board] has spent any payment made to it under subsection (1).
- (8) In this section—

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

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[^{F43c}“relevant services” means services provided in pursuance of arrangements made by the integrated care board in the exercise of its functions by virtue of this Act;]

“relevant inequalities” means inequalities between the persons for whose benefit relevant services are at any time provided with respect to—

- (a) their ability to access the services, or
- (b) the outcomes achieved for them by their provision.]

Textual Amendments

- F2** Words in Act 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](#))
- F37** Words in s. 223K(1) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), [Sch. 4 para. 120\(2\)](#); [S.I. 2022/734](#), [reg. 2\(a\)](#), [Sch.](#) (with [regs. 13, 29, 30](#))
- F38** S. 223K(4) omitted (1.7.2022) by virtue of [Health and Care Act 2022 \(c. 31\)](#), [ss. 16](#), 186(6); [S.I. 2022/734](#), [reg. 2\(a\)](#), [Sch.](#) (with [regs. 13, 29, 30](#))
- F39** S. 223K(5) omitted (1.7.2022) by virtue of [Health and Care Act 2022 \(c. 31\)](#), [ss. 16](#), 186(6); [S.I. 2022/734](#), [reg. 2\(a\)](#), [Sch.](#) (with [regs. 13, 29, 30](#))
- F40** Words in s. 223K(6) omitted (1.7.2022) by virtue of [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), [Sch. 4 para. 120\(3\)](#); [S.I. 2022/734](#), [reg. 2\(a\)](#), [Sch.](#) (with [regs. 13, 29, 30](#))
- F41** Words in s. 223K(7) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), [Sch. 4 para. 120\(4\)\(a\)](#); [S.I. 2022/734](#), [reg. 2\(a\)](#), [Sch.](#) (with [regs. 13, 29, 30](#))
- F42** Words in s. 223K(7) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), [Sch. 4 para. 120\(4\)\(b\)](#); [S.I. 2022/734](#), [reg. 2\(a\)](#), [Sch.](#) (with [regs. 13, 29, 30](#))
- F43** Words in s. 223K(8) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), [Sch. 9 para. 11](#); [S.I. 2022/734](#), [reg. 2\(a\)](#), [Sch.](#) (with [regs. 13, 29, 30](#))

[^{F44}Joint duties of an integrated care board and its partner NHS trusts and NHS foundation trusts

Textual Amendments

- F44** [Ss. 223L-223O](#) and cross-headings inserted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), [ss. 29\(5\)](#), 186(6); [S.I. 2022/734](#), [reg. 2\(a\)](#), [Sch.](#) (with [regs. 13, 29, 34](#))

223L Joint financial objectives for integrated care boards etc

- (1) NHS England may set joint financial objectives for integrated care boards and their partner NHS trusts and NHS foundation trusts.
- (2) An integrated care board and its partner NHS trusts and NHS foundation trusts must seek to achieve any financial objectives set under this section.
- (3) Financial objectives under this section may apply to—
 - (a) integrated care boards and their partner NHS trusts and NHS foundation trusts generally,
 - (b) a particular integrated care board and its partner NHS trusts and NHS foundation trusts, or
 - (c) an integrated care board of a particular description and its partner NHS trusts and NHS foundation trusts.

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

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223M Financial duties of integrated care boards etc: use of resources

- (1) Each integrated care board and its partner NHS trusts and NHS foundation trusts must exercise their functions with a view to ensuring that, in respect of each financial year—
 - (a) local capital resource use does not exceed the limit specified in a direction by NHS England;
 - (b) local revenue resource use does not exceed the limit specified in a direction by NHS England.
- (2) In this section “local capital resource use” and “local revenue resource use” means the use of capital resources or (as the case may be) revenue resources by the integrated care board and its partner NHS trusts and NHS foundation trusts, other than use that consists of the transfer of resources between those bodies.
- (3) Where an NHS trust or NHS foundation trust is the partner of more than one integrated care board, its use of capital resources or revenue resources is to be apportioned for the purposes of this section to one or more of the integrated care boards in such manner as may be provided for in a direction by NHS England.
- (4) NHS England may by direction make provision for determining to which integrated care board, NHS trust or NHS foundation trust a use of capital resources or revenue resources is to be attributed for the purposes of this section.

223N Financial duties of integrated care boards etc: additional controls on resource use

- (1) NHS England may direct an integrated care board and its partner NHS trusts and NHS foundation trusts to exercise their functions with a view to—
 - (a) ensuring that local capital resource use in a financial year which is attributable to matters specified in the direction does not exceed an amount so specified;
 - (b) ensuring that local revenue resource use in a financial year which is attributable to matters specified in the direction does not exceed an amount so specified.
- (2) A direction under subsection (1) may—
 - (a) specify descriptions of resources which must, or must not, be treated as local capital resources or local revenue resources for the purposes of the direction;
 - (b) specify uses of local capital resources or local revenue resources which must, or must not, be taken into account for the purposes of the direction.
- (3) Any directions given under section 223M(3) or (4) apply for the purposes of this section as they apply for the purposes of section 223M.
- (4) In this section “local capital resource use” and “local revenue resource use” have the meaning given by section 223M(2).

Directions about resources etc to be taken into account

223O Resources etc relevant to section 223D, 223E or 223M

The Secretary of State may give directions, in relation to a financial year—

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- (a) specifying descriptions of resources which must, or must not, be treated as capital resources or revenue resources for the purposes of section 223D, 223E or 223M;
- (b) specifying uses of capital resources or revenue resources which must, or must not, be taken into account for the purposes of section 223D, 223E or 223M.]

Strategic Health Authorities and Special Health Authorities

F45 224 Means of meeting expenditure of Strategic Health Authorities out of public funds

.....

Textual Amendments

F45 S. 224 omitted (1.4.2013) by virtue of Health and Social Care Act 2012 (c. 7), s. 306(4), Sch. 4 para. 118; S.I. 2013/160, art. 2(2) (with arts. 7-9)

225 Means of meeting expenditure of Special Health Authorities out of public funds

- (1) The Secretary of State must pay in respect of each financial year to each Special Health Authority sums not exceeding the amount allotted for that year by the Secretary of State to the Special Health Authority towards meeting the expenditure of the Special Health Authority which is attributable to the performance by it of its functions in that year.
- (2) An amount is allotted to a Special Health Authority for a year under this section when it is notified by the Secretary of State that the amount is allotted to it for that year.
- (3) The Secretary of State may make an allotment under this section increasing or reducing an allotment previously so made.
- (4) The Secretary of State may give directions to a Special Health Authority with respect to—
 - (a) the application of sums paid to it under this section, or
 - (b) the payment of sums by it to the Secretary of State in respect of charges or other sums referable to the valuation or disposal of assets.
- (5) Sums falling to be paid to Special Health Authorities under this section are payable subject to such conditions as to records, certificates or otherwise as the Secretary of State may determine.

226 Financial duties of ^{F46}... Special Health Authorities

^{F47}(1)

- (2) Each Special Health Authority must, in respect of each financial year, perform its functions so as to secure that its expenditure which is attributable to the performance by it of its functions in that year does not exceed the aggregate of—
 - (a) the amount allotted to it for that year under section 225(1),
 - (b) any sums received by it in that year under any provision of this Act (other than sums received by it under that subsection), and

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- (c) any sums received by it in that year otherwise than under this Act for the purpose of enabling it to defray any such expenditure.
- (3) The Secretary of State may give such directions to a ^{F48}... Special Health Authority as appear to be requisite to secure that the Authority complies with the duty under [^{F49}subsection (2)].
- (4) To the extent to which—
- (a) any expenditure is defrayed by a ^{F50}... Special Health Authority as trustee ^{F51}..., or
- (b) any sums are received by a ^{F50}... Special Health Authority as trustee or under section 222,
- that expenditure and, subject to subsection (6), those sums, must be disregarded for the purposes of this section.
- (5) For the purposes of this section sums which, in the hands of a ^{F52}... Special Health Authority, cease to be trust funds and become applicable by the Authority otherwise than as trustee must be treated, on their becoming so applicable, as having been received by the Authority otherwise than as trustee.
- (6) Of the sums received by a ^{F53}... Special Health Authority under section 222, so much only as accrues to the Authority after defraying any expenses incurred in obtaining them must be disregarded under subsection (4).
- (7) Subject to subsection (4), the Secretary of State may by directions determine—
- (a) whether specified sums must, or must not, be treated for the purposes of this section as received under this Act by a ^{F54}... specified Special Health Authority,
- (b) whether specified expenditure must, or must not, be treated for those purposes as—
- ^{F55}(i)
- (ii) expenditure within subsection (2) of a specified Special Health Authority, or
- (c) the extent to which, and the circumstances in which, sums received—
- ^{F56}(i)
- (ii) by a Special Health Authority under section 225,
- but not yet spent must be treated for the purposes of this section as part of the expenditure of the ^{F57}... Special Health Authority and to which financial year's expenditure they must be attributed.
- (8) “Specified” means of a description specified in the directions.

Textual Amendments

- F46** Words in s. 226 heading omitted (1.4.2013) by virtue of [Health and Social Care Act 2012 \(c. 7\)](#), s. 306(4), [Sch. 4 para. 119\(8\)](#); S.I. 2013/160, art. 2(2) (with arts. 7-9)
- F47** S. 226(1) omitted (1.4.2013) by virtue of [Health and Social Care Act 2012 \(c. 7\)](#), s. 306(4), [Sch. 4 para. 119\(2\)](#); S.I. 2013/160, art. 2(2) (with arts. 7-9)
- F48** Words in s. 226(3) omitted (1.4.2013) by virtue of [Health and Social Care Act 2012 \(c. 7\)](#), s. 306(4), [Sch. 4 para. 119\(3\)\(a\)](#); S.I. 2013/160, art. 2(2) (with arts. 7-9)
- F49** Words in s. 226(3) substituted (1.4.2013) by [Health and Social Care Act 2012 \(c. 7\)](#), s. 306(4), [Sch. 4 para. 119\(3\)\(b\)](#); S.I. 2013/160, art. 2(2) (with arts. 7-9)

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- F50** Words in s. 226(4) omitted (1.4.2013) by virtue of [Health and Social Care Act 2012 \(c. 7\), s. 306\(4\), Sch. 4 para. 119\(4\)](#); S.I. 2013/160, art. 2(2) (with arts. 7-9)
- F51** Words in s. 226(4)(a) omitted (17.6.2021) by virtue of [NHS \(Charitable Trusts Etc\) Act 2016 \(c. 10\), s. 5\(1\), Sch. 1 para. 8](#); S.I. 2021/712, reg. 3(c)
- F52** Words in s. 226(5) omitted (1.4.2013) by virtue of [Health and Social Care Act 2012 \(c. 7\), s. 306\(4\), Sch. 4 para. 119\(5\)](#); S.I. 2013/160, art. 2(2) (with arts. 7-9)
- F53** Words in s. 226(6) omitted (1.4.2013) by virtue of [Health and Social Care Act 2012 \(c. 7\), s. 306\(4\), Sch. 4 para. 119\(6\)](#); S.I. 2013/160, art. 2(2) (with arts. 7-9)
- F54** Words in s. 226(7)(a) omitted (1.4.2013) by virtue of [Health and Social Care Act 2012 \(c. 7\), s. 306\(4\), Sch. 4 para. 119\(7\)\(a\)](#); S.I. 2013/160, art. 2(2) (with arts. 7-9)
- F55** S. 226(7)(b)(i) omitted (1.4.2013) by virtue of [Health and Social Care Act 2012 \(c. 7\), s. 306\(4\), Sch. 4 para. 119\(7\)\(b\)](#); S.I. 2013/160, art. 2(2) (with arts. 7-9)
- F56** S. 226(7)(c)(i) omitted (1.4.2013) by virtue of [Health and Social Care Act 2012 \(c. 7\), s. 306\(4\), Sch. 4 para. 119\(7\)\(c\)](#); S.I. 2013/160, art. 2(2) (with arts. 7-9)
- F57** Words in s. 226(7) omitted (1.4.2013) by virtue of [Health and Social Care Act 2012 \(c. 7\), s. 306\(4\), Sch. 4 para. 119\(7\)\(d\)](#); S.I. 2013/160, art. 2(2) (with arts. 7-9)

227 Resource limits for ^{F58}... Special Health Authorities

- (1) Each ^{F59}... Special Health Authority must ensure that the use of its resources in a financial year does not exceed the amount specified for it in relation to that year by the Secretary of State.
- (2) For the purpose of subsection (1) the Secretary of State may give directions—
 - (a) specifying uses of resources which must, or must not, be taken into account,
 - (b) making provision for determining to which ^{F60}... Special Health Authority certain uses of resources must be attributed,
 - (c) specifying descriptions of resources which must, or must not, be taken into account.
- (3) The Secretary of State may give such directions to a ^{F61}... Special Health Authority as appear to be requisite to secure that the Authority complies with the duty under subsection (1).
- (4) Subsections (4) to (6) of section 226 apply in relation to the duty under subsection (1) of this section as they apply in relation to the duties under [^{F62}subsection (2)] of that section; and for that purpose references to the defraying of expenditure and the receipt of sums are references to the incurring of liabilities and the acquisition of assets.
- (5) Where the Secretary of State has specified an amount under this section in respect of a financial year, he may vary the amount by a later specification.
- (6) In this section a reference to the use of resources is a reference to their expenditure, consumption or reduction in value.

Textual Amendments

- F58** Words in s. 227 heading omitted (1.4.2013) by virtue of [Health and Social Care Act 2012 \(c. 7\), s. 306\(4\), Sch. 4 para. 120\(6\)](#); S.I. 2013/160, art. 2(2) (with arts. 7-9)
- F59** Words in s. 227(1) omitted (1.4.2013) by virtue of [Health and Social Care Act 2012 \(c. 7\), s. 306\(4\), Sch. 4 para. 120\(2\)](#); S.I. 2013/160, art. 2(2) (with arts. 7-9)
- F60** Words in s. 227(2)(b) omitted (1.4.2013) by virtue of [Health and Social Care Act 2012 \(c. 7\), s. 306\(4\), Sch. 4 para. 120\(3\)](#); S.I. 2013/160, art. 2(2) (with arts. 7-9)

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- F61** Words in s. 227(3) omitted (1.4.2013) by virtue of Health and Social Care Act 2012 (c. 7), s. 306(4), **Sch. 4 para. 120(4)**; S.I. 2013/160, art. 2(2) (with arts. 7-9)
- F62** Words in s. 227(4) substituted (1.4.2013) by Health and Social Care Act 2012 (c. 7), s. 306(4), **Sch. 4 para. 120(5)**; S.I. 2013/160, art. 2(2) (with arts. 7-9)

Primary Care Trusts

F63 228 Public funding of Primary Care Trusts

.....

Textual Amendments

- F63** Ss. 228-231 omitted (1.4.2013) by virtue of Health and Social Care Act 2012 (c. 7), s. 306(4), **Sch. 4 para. 121**; S.I. 2013/160, art. 2(2) (with arts. 7-9)

F63 229 Financial duties of Primary Care Trusts

.....

Textual Amendments

- F63** Ss. 228-231 omitted (1.4.2013) by virtue of Health and Social Care Act 2012 (c. 7), s. 306(4), **Sch. 4 para. 121**; S.I. 2013/160, art. 2(2) (with arts. 7-9)

F63 230 Resource limits for Primary Care Trusts

.....

Textual Amendments

- F63** Ss. 228-231 omitted (1.4.2013) by virtue of Health and Social Care Act 2012 (c. 7), s. 306(4), **Sch. 4 para. 121**; S.I. 2013/160, art. 2(2) (with arts. 7-9)

F63 231 Further provision about the expenditure of Primary Care Trusts

.....

Textual Amendments

- F63** Ss. 228-231 omitted (1.4.2013) by virtue of Health and Social Care Act 2012 (c. 7), s. 306(4), **Sch. 4 para. 121**; S.I. 2013/160, art. 2(2) (with arts. 7-9)

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F64 ...

Textual Amendments

F64 S. 232 and cross-heading omitted (1.7.2022) by virtue of [Health and Care Act 2022 \(c. 31\)](#), [ss. 87\(3\)\(b\)\(i\)](#), [186\(6\)](#); S.I. [2022/734](#), [reg. 2\(a\)](#), [Sch. \(with regs. 13, 29, 30\)](#)

F64 232 Accounts and audit

.....

Allowances and remuneration

233 Allowances for members of certain bodies

- (1) The Secretary of State may pay to members of any body specified by him in an order as a body formed for the purpose of performing a function connected with the provision of services under this Act, such travelling and other allowances, including compensation for loss of remunerative time, as he may determine.
- (2) Payments under this section are subject to such conditions as to records, certificates, or otherwise as the Secretary of State may determine.

234 Special arrangement as to payment of remuneration

- (1) Subsection (2) applies where the Secretary of State considers it appropriate for remuneration in respect of—
 - (a) primary medical services, primary dental services, primary ophthalmic services or pharmaceutical services, or
 - (b) services provided under a pilot scheme [^{F65}established under section 134(1) of this Act] or an LPS scheme,
to be paid by a particular body.
- (2) Where this subsection applies, and the functions of the body do not include the function of paying the remuneration, the Secretary of State may by order confer that function on that body.
- (3) Any sums required to enable a body to pay the remuneration must, if apart from this section there is no provision authorising the payment of the sums by the Secretary of State or out of money provided by Parliament, be paid by him.

^{F66}(4)

Textual Amendments

F65 Words in s. 234(1)(b) inserted (19.1.2010) by [Health Act 2009 \(c. 21\)](#), s. 40(1), [Sch. 1 para. 7\(d\)](#); S.I. [2010/30](#), [art. 2\(b\)](#)

F66 S. 234(4) omitted (1.4.2013) by virtue of [Health and Social Care Act 2012 \(c. 7\)](#), s. 306(4), [Sch. 4 para. 122](#); S.I. [2013/160](#), [art. 2\(2\)](#) (with arts. 7-9)

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

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235 Superannuation of officers of certain hospitals

- (1) The Secretary of State may enter into an agreement with the governing body of any hospital to which this section applies—
 - (a) for admitting officers of the hospital of such classes as may be provided in the agreement to participate, on such terms and conditions as may be so provided, in the superannuation benefits provided under regulations made under section 10 of the Superannuation Act 1972 (c. 11) in like manner as officers of NHS trusts, and
 - (b) those regulations apply accordingly in relation to the officers so admitted subject to such modifications as may be provided in the agreement.
- (2) The governing body of any hospital to which this section applies has such powers as may be necessary for the purpose of giving effect to any terms and conditions on which their officers are admitted to participate in those superannuation benefits.
- (3) This section applies to any hospital (not vested in the Secretary of State) which is used, in pursuance of arrangements made by the governing body of the hospital with the Secretary of State, for the provision of services under this Act or the National Health Service (Wales) Act 2006 (c. 42).
- (4) “Superannuation benefits” means annual superannuation allowances, gratuities and periodical payments payable on retirement, death or incapacity, and similar benefits.

236 Payments for certain medical examinations

- (1) Where a medical practitioner carries out a medical examination of any person with a view to an application for his admission to hospital for assessment or treatment being made under Part 2 of the Mental Health Act 1983 (c. 20) [^{F67}the prescribed [^{F68}integrated care board]] must pay to that medical practitioner—
 - (a) reasonable remuneration in respect of that examination and in respect of any recommendation or report made by him with regard to the person examined, and
 - (b) the amount of any expenses reasonably incurred by him in connection with the examination or the making of any such recommendation or report.
- (2) No payment may be made under this section to a medical practitioner—
 - (a) in respect of an examination carried out in the provision of primary medical services for that person, or
 - (b) in respect of an examination carried out or any recommendation or report made [^{F69}—
 - (i) as part of his duty as an officer of ^{F70}... [^{F71}an] NHS trust, Special Health Authority, NHS foundation trust or Local Health Board [^{F72}, or
 - (ii) pursuant to arrangements made by [^{F73}NHS England] or [^{F73}an integrated care board], or
 - (iii) pursuant to arrangements made in the exercise (by any person) of the public health functions of the Secretary of State or a local authority].
- (3) This section applies only in a case where it is intended, when the medical examination of the person in question is carried out, that if he is admitted to hospital in pursuance of an application mentioned in subsection (1), the whole cost of his maintenance and treatment will be defrayed out of moneys provided by Parliament.

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

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Textual Amendments

- F2** Words in Act 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](#))
- F67** Words in s. 236(1) substituted (27.3.2012 for specified purposes, 1.4.2013 in so far as not already in force) by [Health and Social Care Act 2012 \(c. 7\)](#), s. 306(1)(d)(4), [Sch. 4 para. 123\(2\)](#); [S.I. 2013/160](#), [art. 2\(2\)](#) (with [arts. 7-9](#))
- F68** Words in s. 236(1) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), [Sch. 4 para. 121\(2\)](#); [S.I. 2022/734](#), [reg. 2\(a\)](#), [Sch.](#) (with [regs. 13, 29, 30](#))
- F69** Word in s. 236(2)(b) 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 \(c. 7\)](#), s. 306(1)(d)(4), [Sch. 4 para. 123\(3\)\(a\)](#); [S.I. 2013/160](#), [art. 2\(2\)](#) (with [arts. 7-9](#))
- F70** Words in s. 236(2)(b) omitted (27.3.2012 for specified purposes, 1.4.2013 in so far as not already in force) by virtue of [Health and Social Care Act 2012 \(c. 7\)](#), s. 306(1)(d)(4), [Sch. 4 para. 123\(3\)\(b\)](#); [S.I. 2013/160](#), [art. 2\(2\)](#) (with [arts. 7-9](#))
- F71** Word in s. 236(2)(b) 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 \(c. 7\)](#), s. 306(1)(d)(4), [Sch. 4 para. 123\(3\)\(c\)](#); [S.I. 2013/160](#), [art. 2\(2\)](#) (with [arts. 7-9](#))
- F72** S. 236(2)(b)(ii)(iii) and word 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 \(c. 7\)](#), s. 306(1)(d)(4), [Sch. 4 para. 123\(3\)\(d\)](#); [S.I. 2013/160](#), [art. 2\(2\)](#) (with [arts. 7-9](#))
- F73** Words in s. 236(2)(b)(ii) substituted (1.7.2022) by [Health and Care Act 2022 \(c. 31\)](#), s. 186(6), [Sch. 4 para. 121\(3\)](#); [S.I. 2022/734](#), [reg. 2\(a\)](#), [Sch.](#) (with [regs. 13, 29, 30](#))

Status:

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

Changes to legislation:

National Health Service Act 2006, Chapter 6 is up to date with all changes known to be in force on or before 03 July 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.