

## SCHEDULE 1

### Regulation 16(b)

## PART II

### NEW PARTS TO BE INSERTED AFTER PART I OF SCHEDULE 1 TO THE PRINCIPAL REGULATIONS

#### “PART IA

#### CHILD HEALTH SURVEILLANCE SERVICES

1. The services referred to in paragraph 6C(a) of Part I of this Schedule shall comprise—
  - (a) the monitoring—
    - (i) by the consideration of information concerning the child received by or on behalf of the doctor, and
    - (ii) on any occasion when the child is examined or observed by or on behalf of the doctor (whether pursuant to sub-paragraph (b) or otherwise)  
of the health, well-being and physical, mental and social development (all of which characteristics for the purpose of child health surveillance shall be referred to as “development”) of the child while under the age of 5 years with a view to detecting any deviations from normal development;
  - (b) the examination of the child by or on behalf of the doctor on so many occasions and at such intervals as shall be determined by the Board in whose area the child resides for the purposes of the provision of child health surveillance services generally in that area.
2. The records mentioned in paragraph 6C(b) of Part I of this Schedule shall comprise an accurate record of—
  - (a) the development of the child while under the age of 5 years, compiled as soon as is reasonably practicable following the first examination mentioned in paragraph 1(a) of this Part and, where appropriate, amended following each subsequent examination mentioned in that sub-paragraph; and
  - (b) the responses if any to offers made to an appropriate person for the child to undergo any examination referred to in paragraph 1(b) of this Part.
3. The information mentioned in paragraph 6C(c) of Part I of this Schedule shall comprise—
  - (a) a statement, to be prepared and dispatched to the Board referred to in paragraph 1(b) of this Part as soon as is reasonably practicable following any examination referred to in paragraph 1(a) of this Part, of the procedures undertaken in the course of that examination and of the doctor’s findings in relation to each such procedure;
  - (b) such further information regarding the development of the child while under the age of 5 years as that Board may request.

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## PART IB

### MINOR SURGERY PROCEDURES

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Injections	intra articular
	peri articular
	varicose veins
	haemorrhoid
Aspirations	joints
	cysts
	bursae
	hydrocele
Incisions	abcesses
	cysts
	thrombosed piles
Excisions	sebaceous cysts
	lipoma
	skin lesions for histology
	intra dermal naevi, papilloma, dermatofibroma and similar
	conditions
	warts
	ganglions
	removal of toe nails (partial and complete)
Curette, Cautey and cryocautery	warts and verrucae
	other skin lesions (eg molluscum contagiosum)
Other	ligation of varicose veins removal of foreign bodies nasal cautery

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## PART IC

### INFORMATION TO BE INCLUDED IN PRACTICE LEAFLETS

#### **Personal and Professional Details of Doctor**

1. Full name.
2. Sex.
3. Medical qualifications registered by the General Medical Council.
4. Date and place of first registration as medical practitioner.

### **Practice Information**

5. The times approved by the Board during which the doctor is personally available for consultation by his patients at his practice premises.

6. Whether an appointments system is operated by the doctor for surgery consultations at his practice premises.

7. If there is an appointments system, the method of obtaining a non-urgent appointment and the method of obtaining an urgent appointment.

8. The method of obtaining a non-urgent domiciliary visit and the method of obtaining an urgent domiciliary visit.

9. The doctor's arrangements for providing personal medical services when he is not personally available.

10. The method by which patients may obtain repeat prescriptions from the doctor.

11. Whether the doctor's practice is a dispensing practice, and, if so, the arrangements for dispensing prescriptions.

12. Whether the doctor provides clinics for his patients, and if so, their frequency, duration and purpose.

13. The numbers of staff, other than doctors, assisting the doctor in his practice, and a description of their roles.

14. Whether the doctor provides (1) maternity medical services, (2) contraceptive services, (3) child health surveillance services, or (4) minor surgery services.

15. Whether the doctor works single-handed, in partnership, part-time or on a job share basis, or within a group practice.

16. Details of any arrangements whereby the doctor or his staff receive comments by patients on the provision by him of general medical services.

17. The geographical boundary of his practice area by reference to a map of an appropriate scale.

18. Whether the doctor's practice premises have suitable access for all disabled patients and, if not, the limitations on access for particular types of disability.

19. Personal and professional details as in paragraphs 1 to 4 in relation to any assistant or associate general practitioner who is employed.

20. If the practice either—

(a) is a general practitioner training practice for the purposes of the National Health Service (Vocational Training) (Scotland) Regulations 1980<sup>(1)</sup>, or

(b) undertakes the teaching of undergraduate medical students,

details of any arrangements for drawing this to the attention of patients.

## **PART ID**

1. Information to be included with any application under paragraph 13A of Part I

(1) The address of the proposed practice premises.

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(1) S.I. 1980/30, amended by S.I. 1986/1657

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(2) The days in each week during which the doctor will be in attendance normally at the practice premises and available for consultation by his patients.

(3) The hours of each such attendance by the doctor.

(4) The hours of any attendance by the doctor on those occasions when he is not usually available to provide the full range of services specified in paragraph 9 of the terms of service (for example, for providing emergency treatment only).

(5) The frequency, duration and purpose of any clinic provided by the doctor.

(6) The estimated total time to be spent each week making any domiciliary visits.

(7) The doctor's proposals for notifying patients of the times and places approved by the Board at which he will be available to patients for consultation.

(8) In the case of a doctor to whom paragraph 11(2) of the terms of service does not apply, his proposals for discharging his continuous responsibility for his patients.

**2.** Additional information to be included in any application by a doctor who is a restricted services principal or a restricted list principal

(1) In the case of a restricted services principal—

(a) the proposed allocation, between each category of services provided, of the total number of hours for which he is to be available normally in any week; and

(b) where different services are to be provided at different places, the place at which each category of services is to be provided.

(2) In the case of a restricted list principal, the name, address and nature of the establishment(s) or organisation(s) with which his patients are connected.

**3.** Additional information to be included in any application by a doctor who seeks to be available normally on only 4 days in each week

(1) A brief description of each health-related activity with reference to which the application is made.

(2) The days in each week during which the doctor will be undertaking that activity.

(3) The number of hours in each week which are likely to be occupied in the course of such activity.

**4.** Additional information to be included in any application by a doctor who seeks to be available normally for less than 26 hours in each week

(1) The level of reduced availability sought: either—

— not less than 19 hours; or

— not less than 13 hours.

(2) The proposed allocation of those hours among the days on which the doctor is to be available normally.

(3) The name(s) of the doctor's partner(s).

(4) Whether such reduced availability is sought permanently or for only a temporary period.

**5.** Additional information to be included in any application made jointly by doctors to whom paragraph 13D(1) of Part I applies

(1) The name of the doctor's partner with whom the joint application is made.

(2) The nature of the proposed arrangement, including—

(a) the hours for which each doctor will be available normally in each week; and

(b) the days on which each doctor will be available normally in each week.

6. Additional information to be included in any application made by a doctor to whom paragraph 13E(1) of Part I applies

(1) Details of the doctor's practice(s) in the area of any other Board(s) in whose medical list his name is included.

(2) The number of hours occupied in each week in the course of such practice(s).

7. Illustrative list of health-related activities

(1) Appointments concerning medical education or training.

(2) Medical appointments within the health service other than in relation to the provision of general medical services.

(3) Medical appointments under the Crown, with Government Departments or Agencies, or public or local authorities.

(4) Appointments concerning the regulation of the medical profession or the Medical Practices Committee.”.

## “PART 1E

### INFORMATION TO BE PROVIDED IN ANNUAL REPORTS

1. The number of staff, other than doctors, who assist the doctor in his practice giving details of—

(i) the total number of such staff (without specifying their names);

(ii) the principal duties of the members of staff and the hours each week during which each assists the doctor;

(iii) the qualifications of each member of staff;

(iv) in relation to such staff the training undertaken by each member, during the preceding 5 years, which is relevant to their role in the practice.

2. Information in relation to the practice premises, as follows:—

(i) any variations in the size of the floor space or, in general, in the design or quality of the premises since the last annual report;

(ii) any such variations anticipated in the course of the forthcoming period of 12 months.

3. The following information in relation to the referral of patients to other services under the National Health Service (Scotland) Act 1978 during the period of the Report:—

(a) referrals by the doctor to a specialist specifying—

(i) the total number of patients referred as in-patients;

(ii) the total number of patients referred as out-patients;

giving details, in each case, of the hospital to which each patient was referred and, in respect of which of the clinical specialities on the following list, each referral was made:—

— General Surgery

— General Medicine

— Orthopaedics

— Rheumatology (physical medicine)

— Ear, Nose and Throat

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- Gynaecology
  - Obstetrics
  - Paediatrics
  - Ophthalmology
  - Psychiatry
  - Geriatrics
  - Dermatology
  - Neurology
  - Genito-urinary
  - X-Ray
  - Pathology
  - Others (including plastic surgery, accident & emergency, endocrinology)
- (b) the total number of patients who, so far as the doctor is aware, referred themselves for services under that Act.
4. The doctor's other commitments as a medical practitioner with reference to—
- (i) a description of any posts held; and
  - (ii) a description of all work undertaken, including in each case the annual hourly commitment.
5. Details of any arrangements whereby the doctor or his staff receive comments by patients on the provision by him of general medical services.
6. Information in relation to orders for drugs and appliances as follows:—
- (a) whether the doctor's practice has its own dispensary;
  - (b) whether the doctor uses a separate dispensary, and, if so, its location; and
  - (c) the doctor's arrangements for the issue of repeat prescriptions to patients.”.