

Status: Point in time view as at 01/10/2022.

Changes to legislation: The National Health Service (General Medical Services Contracts) Regulations 2015, Paragraph 15 is up to date with all changes known to be in force on or before 12 September 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)

SCHEDULE 3

Other contractual terms

PART 1

Provision of services

Duty of co-operation

15.—(1) Where a contractor does not provide to its registered patients or to persons whom it has accepted as temporary residents—

[^{F1}(a) minor surgery;]

(b) a particular enhanced service^{F2}, except in relation to one provided under the Network Contract Directed Enhanced Service Scheme which is a scheme provided for by direction 5 of the Primary Medical Services (Directed Enhanced Services) Directions 2019; or

(c) out of hours services, either at all or in respect of some periods or some services,

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

(2) The requirements specified in this sub-paragraph are that the contractor must—

(a) co-operate, insofar as is reasonable, with any person responsible for the provision of that service or those services;

(b) comply in core hours with any reasonable request for information from such a person or from the Board relating to the provision of that service or those services; and

(c) in the case of out of hours services—

(i) take reasonable steps to ensure that any patient who contacts the contractor's practice ^{F3}... during the out of hours period is provided with information about how to obtain services during that period,

(ii) ensure that the clinical details of all out of hours consultations received from the out of hours provider are reviewed by a clinician within the contractor's practice on the same working day as those details are received by the practice or, exceptionally, on the next working day,

(iii) ensure that any information requests received from the out of hours provider in respect of any out of hours consultations are responded to by a clinician within the contractor's practice on the same day as those requests are received by the contractor's practice, or on the next working day,

(iv) take all reasonable steps to comply with any systems which the out of hours provider has in place to ensure the rapid, secure and effective transmission of patient data in respect of out of hours consultations, and

(v) agree with the out of hours provider a system for the rapid, secure and effective transmission of information about registered patients who, due to chronic disease or terminal illness, are predicted as more likely to present themselves for treatment during the out of hours period.

(3) Nothing in this paragraph requires a contractor whose contract does not include the provision of out of hours services to make itself available during the out of hours period.

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Textual Amendments

- F1** Sch. 3 para. 15(1)(a) substituted (1.10.2021) by The National Health Service (General Medical Services Contracts and Personal Medical Services Agreements) (Amendment) (No. 2) Regulations 2021 (S.I. 2021/995), reg. 1(2), **Sch. 1 para. 26(a)** (with reg. 3)
- F2** Words in Sch. 3 para. 15(1)(b) inserted (1.10.2019) by The National Health Service (General Medical Services Contracts and Personal Medical Services Agreements) (Amendment) Regulations 2019 (S.I. 2019/1137), regs. 1(2), **14**
- F3** Word in Sch. 3 para. 15(2)(c)(i) omitted (1.10.2022) by virtue of The National Health Service (General Medical Services Contracts and Personal Medical Services Agreements) (Amendment) (No. 3) Regulations 2022 (S.I. 2022/935), reg. 1(b), **Sch. 1 para. 7(5)**

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