

SCHEDULE 2

Regulation 17

Further details about specific Unified Services

Cervical screening

1.—(1) A contractor must—

- (a) provide all the services described in sub-paragraph (2), and
- (b) make the records specified in sub-paragraph (4) within the patient’s record kept in accordance with paragraph 78 of Schedule 3.

(2) The services referred to in sub-paragraph (1)(a) are—

- (a) the provision of any necessary information and advice to assist relevant patients in making an informed decision as to participation in the Cervical Screening Wales Programme undertaken by Public Health Wales NHS Trust (the “Programme”),
- (b) performing cervical screening tests on people who have agreed to participate in that Programme,
- (c) arranging for people to be informed of the results of their test, and
- (d) ensuring that test results are followed up as clinically appropriate.

(3) For the purposes of sub-paragraph 2(a) “relevant patients” means patients on the contractor’s patient list who have been identified by Public Health Wales NHS Trust as suitable candidates for a cervical screening test.

(4) The records referred to in paragraph (1)(b) are—

- (a) an accurate record of the cervical screening test undertaken, and
- (b) the result of any test undertaken, and
- (c) any clinical follow up requirements.

Commencement Information

II Sch. 2 para. 1 in force at 1.10.2023, see [reg. 1\(2\)](#)

Child health surveillance

2.—(1) A contractor must in respect of any child under the age of 5 for whom it has responsibility under the contract—

- (a) provide all the services described in sub-paragraph (2), other than any examination so described which a parent refuses to allow their child to undergo, until the date on which the child attains 5 years of age, and
- (b) maintain the records specified in sub-paragraph (3).

(2) The services referred to in sub-paragraph (1)(a) are—

- (a) the monitoring of the health, well-being and physical, mental and social development (which together are referred to in this paragraph as “development”) of a child under 5 years of age with a view to detecting any deviations from normal development—

Status: This version of this schedule contains provisions that are prospective.

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- (i) by the consideration of any information concerning the child received by or on behalf of the contractor, and
 - (ii) on any occasion when the child is examined or observed by or on behalf of the contractor (whether pursuant to paragraph (b) or otherwise);
 - (b) the examination of a child at a frequency that has been agreed with the Local Health Board in accordance with the nationally agreed evidence based programme set out in the latest clinical guidance in relation to the Newborn and Infant Physical Examination Cymru, and the Local Health Board or the contractor may seek the views of the relevant Local Medical Committee prior to reaching agreement on the appropriate frequency of such examinations.
- (3) The records specified for the purposes of sub-paragraph (1)(b) must be an accurate record of—
- (a) the development of the child while under 5 years of age, compiled as soon as is reasonably practicable following the first examination of that child and, where appropriate, amended following each subsequent examination, and
 - (b) the responses (if any) to offers made to the child’s parent for the child to undergo any examination referred to in sub-paragraph (2)(b).

Commencement Information

I2 Sch. 2 para. 2 in force at 1.10.2023, see [reg. 1\(2\)](#)

Childhood vaccinations and immunisations

- 3.—**(1) A contractor must comply with the requirements in sub-paragraphs (2) and (3).
- (2) The contractor must—
- (a) offer to provide to children all vaccinations and immunisations of a type and in the circumstances specified in the relevant Annex of the GMS Statement of Financial Entitlements;
 - (b) provide appropriate information and advice to patients and, where appropriate, their parents, about such vaccinations and immunisations;
 - (c) record in the patient’s record kept in accordance with paragraph 78 of Schedule 3 any refusal of the offer referred to in paragraph (a);
 - (d) where the offer is accepted, administer the vaccinations and immunisations and include in the patient’s record kept in accordance with paragraph 78 of Schedule 3—
 - (i) the name of the person who gave consent to the vaccination or immunisation and that person’s relationship to the patient,
 - (ii) the batch numbers, expiry date and title of the vaccine,
 - (iii) the date of administration,
 - (iv) in a case where two vaccines are administered in close succession, the route of administration and the injection site of each vaccine,
 - (v) any contra-indications to the vaccination or immunisation, and
 - (vi) any adverse reactions to the vaccination or immunisation.
- (3) The contractor must ensure that all staff involved in administering vaccines are trained and their knowledge kept up to date in the recognition and initial treatment of anaphylaxis.

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Commencement Information

I3 Sch. 2 para. 3 in force at 1.10.2023, see [reg. 1\(2\)](#)

Contraceptive services

4. A contractor must make available to all its patients who so request them, those services described in sub-paragraphs (a) to (g)—

- (a) the giving of advice about the full range of contraceptive methods,
- (b) where appropriate, the medical examination of patients seeking such advice,
- (c) the treatment of such patients for contraceptive purposes and the prescribing of contraceptive substances and appliances (excluding the fitting and implanting of intrauterine devices and implants),
- (d) the giving of advice about emergency contraception and where appropriate, the supplying or prescribing of emergency hormonal contraception or, where the contractor has a conscientious objection to emergency contraception, prompt referral to another provider of primary medical services who does not have such conscientious objections,
- (e) the provision of advice and referral in cases of unplanned or unwanted pregnancy, including advice about the availability of free pregnancy testing in the practice area and, where appropriate, where the contractor has a conscientious objection to the termination of pregnancy, prompt referral to another provider of primary medical services who does not have such conscientious objections,
- (f) the giving of initial advice about sexual health promotion and sexually transmitted infections, and
- (g) the referral as necessary for specialist sexual health services, including home testing or self-testing kits for sexually transmitted infections.

Commencement Information

I4 Sch. 2 para. 4 in force at 1.10.2023, see [reg. 1\(2\)](#)

Maternity medical services

5.—(1) A contractor must provide all the necessary maternity medical services to—

- (a) patients who have been diagnosed as pregnant throughout the antenatal period;
- (b) patients and their babies throughout the postnatal period, other than neonatal checks;
- (c) patients whose pregnancy has terminated as a result of miscarriage or abortion or, where the contractor has a conscientious objection to the termination of pregnancy, the contractor must promptly refer the patient to another provider of primary medical services who does not have such conscientious objections.

(2) In this paragraph—

“antenatal period” (“*cyfnod cynenedigol*”) means the period from the start of the pregnancy to the onset of labour;

“maternity medical services” (“*gwasanaethau meddygol mamolaeth*”) means—

- (a) in relation to patients (other than babies) all primary medical services relating to pregnancy, excluding intra partum care; and

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(b) in relation to babies, any primary medical services necessary to their first 14 days of life; “neonatal check” (“*gwiriad newydd-anedig*”) means the examination of the baby in the first month after birth;

“postnatal period” (“*cyfnod ôl-enedigol*”) means the period beginning with the conclusion of delivery of the baby or the patient’s discharge from secondary care services, whichever is the later, and ending with the 14th day after the birth.

Commencement Information

I5 Sch. 2 para. 5 in force at 1.10.2023, see [reg. 1\(2\)](#)

Minor surgery

6. A contractor must—

- (a) make available to patients, cryocautery, curettage and cautery of warts, verrucae and other skin lesions where clinically appropriate, and
- (b) ensure that its record of any treatment provided under this paragraph includes—
 - (i) details of the minor surgery provided to the patient, and
 - (ii) the consent of the patient to that treatment.

Commencement Information

I6 Sch. 2 para. 6 in force at 1.10.2023, see [reg. 1\(2\)](#)

Vaccinations and immunisations

7.—(1) A contractor must—

- (a) offer to administer or provide to patients all vaccinations and immunisations of a type and in the circumstances specified in the relevant Annex to the GMS Statement of Financial Entitlements and that are funded under the global sum;
- (b) provide appropriate information and advice to patients and, where appropriate, to the parents of patients, about such vaccines and immunisations;
- (c) in relation to patients other than children and taking into account the individual circumstances of the patient, consider whether—
 - (i) immunisation ought to be administered by the contractor or by a health care professional employed or engaged by the contractor, or
 - (ii) a prescription form ought to be provided for the purpose of self-administration by the patient of the immunisation;
- (d) record in the patient’s record any refusal of the offer mentioned in paragraph (a);
- (e) where—
 - (i) the offer mentioned in paragraph (a) is accepted, and
 - (ii) in case of a patient who is not a child, the immunisation is to be administered by the contractor or another health care professional,
 administer the immunisations and record the immunisation information in the patient’s record, using codes agreed by the Local Health Board for this purpose;

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- (f) where—
 - (i) the offer mentioned in paragraph (a) is accepted, and
 - (ii) in the case of a patient who is not a child, the immunisation is not to be administered by the contractor or another health care professional,
issue a prescription form for the purposes of self-administration by the patient.

(2) For the purposes of this paragraph—

“immunisation information” (“*gwybodaeth am yr imiwneiddiad*”) means—

- (a) either—
 - (i) the patient’s consent to immunisation, or
 - (ii) where another person consents to immunisation on behalf of the patient, the name of the person who gave that consent and their relationship to the patient;
- (b) the batch number, expiry date and title of the vaccine,
- (c) the date of administration of the vaccine,
- (d) where two vaccines are administered by injections, in close succession, the route of administration and the injection site of each vaccine,
- (e) any contraindications to the vaccine, and
- (f) any adverse reactions to the vaccine.

(3) The contractor must ensure that all staff involved in administering vaccines are trained and their knowledge kept up to date in the recognition and initial treatment of anaphylaxis.

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Commencement Information

I7 Sch. 2 para. 7 in force at 1.10.2023, see [reg. 1\(2\)](#)

8. For the purposes of paragraphs 1 to 7 “a patient’s record” means the record which is kept in relation to a patient in accordance with paragraph 78 of Schedule 3.

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Commencement Information

I8 Sch. 2 para. 8 in force at 1.10.2023, see [reg. 1\(2\)](#)

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Commencement Information

I7 Sch. 2 para. 7 in force at 1.10.2023, see [reg. 1\(2\)](#)

I8 Sch. 2 para. 8 in force at 1.10.2023, see [reg. 1\(2\)](#)

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Changes and effects yet to be applied to :

- Sch. 2 para. 1 coming into force by [S.I. 2023/953 reg. 1\(2\)](#)
- Sch. 2 para. 2 coming into force by [S.I. 2023/953 reg. 1\(2\)](#)
- Sch. 2 para. 3 coming into force by [S.I. 2023/953 reg. 1\(2\)](#)
- Sch. 2 para. 4 coming into force by [S.I. 2023/953 reg. 1\(2\)](#)
- Sch. 2 para. 5 coming into force by [S.I. 2023/953 reg. 1\(2\)](#)
- Sch. 2 para. 6 coming into force by [S.I. 2023/953 reg. 1\(2\)](#)
- Sch. 2 para. 7 coming into force by [S.I. 2023/953 reg. 1\(2\)](#)
- Sch. 2 para. 8 coming into force by [S.I. 2023/953 reg. 1\(2\)](#)
- Sch. 2 para. 1(1)(b) word substituted by [S.I. 2023/1421 reg. 17\(a\)](#)
- Sch. 2 para. 1(3) word substituted by [S.I. 2023/1421 reg. 17\(c\)](#)
- Sch. 2 para. 1(4) word substituted by [S.I. 2023/1421 reg. 17\(d\)](#)
- Sch. 2 para. 7(1)(b) word substituted by [S.I. 2023/1421 reg. 17\(f\)](#)
- Sch. 2 para. 7(2) word substituted by [S.I. 2023/1421 reg. 17\(g\)](#)
- Sch. 2 para. 3(2)(a) words inserted by [S.I. 2023/1421 reg. 17\(e\)](#)
- Sch. 2 para. 1(2)(a) words substituted by [S.I. 2023/1421 reg. 17\(b\)](#)
- Sch. 2 para. 1(3) words substituted by [S.I. 2023/1421 reg. 17\(b\)](#)

Changes and effects yet to be applied to the whole Instrument associated Parts and Chapters:

Whole provisions yet to be inserted into this Instrument (including any effects on those provisions):

- Sch. 3 para. 16(3) inserted by [S.I. 2023/1421 reg. 18\(b\)](#)
- Sch. 5 para. 2(2)(a)(iv)(aa) omitted by [S.I. 2023/1421 reg. 20\(d\)](#)
- Sch. 5 para. 2(2)(a)(i)(aa) word substituted by [S.I. 2023/1421 reg. 20\(c\)](#)