



**Isle of Man
Government**

Reiltys Ellan Vannin



DRAFT NATIONAL HEALTH AND CARE SERVICE BILL 2015 Public Consultation

Department of Health and Social Care
Slaynt as Kiarail y Theay

1. Foreword by the Minister for Health and Social Care



I am pleased to now invite comments on a proposed new National Health and Care Service Bill 2015.

This important piece of legislation seeks to ensure that the Department of Health and Social Care can continue to comply with its legal obligations in respect of the delivery of care, including those closely linked to regulatory regimes in the United Kingdom.

The Bill proposes to introduce a Charter for the National Health and Care Service and new provisions for the commissioning of services. It continues the requirement to maintain lists of qualified service providers.

The proposed legislation gives the Department flexibility to develop and strengthen services in a rapidly changing care environment by introducing Schemes for the provision of care instead of Regulations. All such Schemes will be subject to public consultation and Tynwald approval before they are published.

Much of this Bill re-states) existing provisions from the NHS Act 2001, for example in relation to committees and complaints.

One of the new provisions, however, proposes that the use of any of the Department's facilities by any individual constitutes a contract which would legally oblige them to leave the facility when they no longer needed to be there.

Thank you for taking the time to review this document and I look forward to receiving your comments.

A handwritten signature in black ink, which appears to read "Howard Quayle". The signature is written in a cursive style with a long horizontal line underneath.

Hon. Howard Quayle MHK

Minister for Health and Social Care

2. About the Consultation

The purpose of this consultation exercise is to invite comments on the proposed provisions of the draft National Health and Care Service Bill 2015 (attached to this document).

It is not a referendum but is an exercise for gathering information, views and evidence to allow the Department to take an informed decision on the final content of the proposed Bill. In any consultation exercise the responses received do not guarantee changes will be made to what has been proposed.

Comments should be submitted by Friday 23rd October 2015 in writing, by post to:

National Health and Care Service Bill 2015 Consultation
Department of Health and Social Care, Crookall House,
Demesne Road,
Douglas
IMI 3QA

or by email to: colin.brew@gov.im

Paper copies of this consultation document are available, if required, via the above contact methods, or by telephoning (01624) 642627, or at the Tynwald Library.

Electronic copies of this document are also available at:

<https://www.gov.im/consultations.gov?menuid=16916&type=current>

To ensure that the process is open and honest, responses can only be accepted if you provide your name with your response.

Unless specifically requested otherwise, any responses received may be published either in part or in their entirety. Please mark your response clearly if you wish your response and name to be kept confidential. Confidential responses will be included in any statistical summary of the comments received.

When submitting your views please indicate whether you are responding on behalf of an organisation.

Who is being consulted

A press release will be issued seeking the views of the general public, and letters or emails will be sent to selected stakeholders.

2. About the Consultation (Continued)

Comments or complaints

If you wish to comment on the conduct of this consultation or make a complaint about the way the consultation has been carried out please write to:

Chief Executive's Office
Department of Health and Social Care
Crookall House
Demesne Road
Douglas
IM1 3QA

3. Introduction

The purpose of the first National Health Service (“NHS”) Act in 1948 was ‘...to provide for the establishment of a comprehensive health service for the Isle of Man and for purposes connected therewith’.

This was subsequently achieved and the main aim of this Bill is to make sure that going forward our legislation is up to date, fit for purpose, and can be more easily managed to achieve the current and future provision and promotion of care services.

It is important to note that the Bill is intentionally drafted as a framework document under which there will be supporting schemes and procedures which will contain the detail about how the National Health and Care Service will actually operate. It should also be noted that these services in the Isle of Man are currently only provided either by Department employed staff or via direct arrangements between the Department and private service providers. Therefore, the layers of regulation and direction which exist between Westminster and service providers in the UK are not required here.

If you would like to discuss any element of the proposed Bill prior to submitting comments please phone 642627 or email colin.brew@gov.im.

Otherwise, it would be appreciated if comments could be submitted in writing to Colin Brew, Policy & Legislation Manager, Crookall House, Demesne Road, Douglas, IM1 3QA or via email to colin.brew@gov.im by 23rd October 2015.

Thank you for taking the time to read this document and we look forward to receiving your contributions.

4. Proposed Content of the Bill

Comments are welcomed on specific sections or more generally. A copy of the draft Bill is attached to this document.

PART 1 – INTRODUCTORY

1 Short title

The first clause simply confirms the title of the Act as the National Health and Care Service Act 2015.

2 Commencement

The second clause permits the Department to bring the rest of the Act into force as and when it is ready to do so, and to make transitional and saving provisions.

3 Interpretation

This clause lists some definitions relating to terms in the Act. On the basis that definitions are only considered legally necessary if they define a word that is given a meaning other than its dictionary meaning, or to shorten expressions to avoid long repetitions, the number of defined terms is kept to a minimum.

Therefore, apart from confirming that references to 'the Department' mean the Department of Health and Social Care and pointing the reader to section 6 in respect of defining 'Schemes', the only definitions included are the following:

"care" is defined to include both health care and other care services which the Department might be required to provide under other legislation. This is particularly useful as it prevents any potential issues in respect of integrated care provision, especially within the Department in respect of integrated health and social care;

"publish" is defined to make it clear that whenever the Department is required under the Act to publish information, it must do so in a manner that gives the public free and convenient access to that information.

PART 2 – SCHEMES

4 Department to provide care

This clause makes it clear that it continues to be the responsibility of the Department of Health and Social Care to provide care to individuals, and that this will be done via one or more Schemes.

4. Proposed Content of the Bill (Continued)

The clause goes on to say that the Act does not prevent the Department from providing care otherwise than under a Scheme. This allows the Department, for example, to provide private health care and to put in place temporary or short term measures.

5 The Isle of Man National Health and Care Service

This clause firstly confirms, for the avoidance of any doubt, that the care provided under the Schemes will be known as the Isle of Man National Health and Care Service. This is partly so that the term can be referenced by other Government legislation.

The clause also requires the Department to prepare and publish a National Health and Care Service Charter setting out its general commitments in respect of the Service, and requires the Department to have regard to the Charter when providing care.

6 Establishment of Schemes

This clause introduces the framework which will give the Department the flexibility it needs to manage rapidly changing care services in the future. The framework is established by firstly requiring the Department to establish one or more Schemes.

The first of these Schemes will be the current National Health Service model but alternative or additional Schemes may also be developed over time.

The Bill states that the Department must lay the Schemes, and any amendments to them, before Tynwald prior to publishing them. It is intended that there will be a comprehensive public consultation on the Schemes during their preparation so there should be no surprises for either Tynwald members or members of the public by the time they reach this stage.

7 Contents of a Scheme

The Bill contains very little detail about the Schemes other than to confirm that:

- a) it is for the Department to determine what care will be provided, how and under what terms and conditions;
- b) the Schemes must contain details of the facilities, equipment and other resources the Department will provide, and;
- c) the Schemes must contain details of how they are to be administered.

This clause, however, also includes a requirement for the Department to arrange for the Schemes to be independently monitored and reviewed. This reflects the Department's existing policy of seeking to have services externally reviewed.

4. Proposed Content of the Bill (Continued)

8 Charges under a Scheme

The Bill confirms that the Schemes must include provision for any charges for care and for how those charges are to be calculated. Current charges include prescription charges, dental charges and charges to overseas visitors.

The Bill also confirms that Schemes can include provision for individuals to be exempt from charges or liable only for reduced charges, as per the existing policy.

All of this means that the details of charges will no longer be contained in separate secondary legislation (regulations) and will, instead, be approved as part of the process of approving the Schemes.

This Clause also states that the Department, in setting a charge, must take into consideration the funds and other resources available to it.

9 Contributions under a Scheme

This clause continues the option for the Department to contribute towards costs incurred or to be incurred by individuals in respect of care services.

These costs currently include contributions towards prescription costs, dental and ophthalmic care, and travel and accommodation costs for patients requiring treatment in the UK.

Similar to the charges, it is proposed that the detail of these contributions will be set out in the Schemes rather than in regulations.

The same statement as for the charges is also included here with regard the requirement for the Department to take into consideration the funds and other resources available to it when establishing payments.

10 Care may be provided by others

This clause confirms that a Scheme may provide that care can be provided by people who are not employed directly by the Department, such as GPs, and introduces the concept of commissioning and contracts into this legislation. Similar legislation has been in place in the UK for many years.

As contracts are legal documents in themselves, and the contracts will be only be between the Department and the service provider, it is not anticipated that there will be any additional secondary legislation governing contracts in the Isle of Man (unlike the UK).

4. Proposed Content of the Bill (Continued)

As mentioned earlier the Department will continue to consult with all interested parties about the Schemes in general terms, but this will allow changes to specific contracts to be discussed, agreed and implemented between the parties without the need for a lengthy legislative process.

11 Department to maintain list of qualified care providers

This Clause continues, in line with the UK regulatory procedures, a requirement for the Department to maintain a list of individuals which it is satisfied are qualified to provide care services under this Act. These lists are mostly held in relation to GPs, dentists, opticians and pharmacists but may also include Department employed staff.

These lists allow these health care professionals to move between different jurisdictions, including between the Isle of Man and the UK, without having to go through the complex process of applying for permission to practice in each area every time they move.

These professionals do not necessarily have to be currently practicing or even currently resident in the Island (e.g. occasional locums) as long as they have been regularly checked and confirmed as suitable to go on the list.

Although it is not intended that the detailed regulations governing the equivalent lists in the UK will be reproduced on the Island, there is an acknowledged expectation that, in order to maintain professionals links with the UK, the Island will broadly follow the UK process for administering the lists.

It is accepted practice that these lists are published. This clause allows this to continue but also allows the Department to only publish the list to the extent it considers appropriate and to decide the form in which the list is to be kept.

The clause also requires the Department to publish details of the process for applying to be included on the list and the process for considering applications, and details of an appeal process.

12 Private facilities and care

This clause firstly confirms that the Department is not restricted to providing care under the Schemes and may make its facilities available for use other than under a Scheme. This allows, for example, facilities to be used for private care (at a cost to the service provider) in accordance with terms and conditions which the Department determines.. Currently, this option is only extended to hospital consultants.

4. Proposed Content of the Bill (Continued)

The clause also confirms that the Department cannot use this provision in respect of care for which there is a contrary provision in other legislation.

As the Department is determining the terms and conditions, it will be able to ensure that such private provision does not adversely impact on the Schemes, whilst at the same time optimising the use of facilities which might be lying empty at certain times.

13 Misuse of the Department's facilities

This clause establishes the concept that the use of any of the Department's facilities by any individual constitutes a contract between the Department and that individual.

The clause goes on to state that the terms of that contract will be that the individual will vacate the facility when the Department informs them that their care is completed or that they no longer need to use the facility.

The clause then states that if the contract is breached (for example by a patient refusing to vacate a hospital bed) the Department may seek compliance through the courts.

PART 3 – COMMITTEES

14 Establishment of committees

Ever since the NHS started in 1948, the NHS Acts have included a requirement for a committee to be established to provide an element of scrutiny of the Department's provision of services. The exact role of this committee (currently known as the Health Services Consultative Committee ("HSCC")) has changed somewhat over the years.

The main role of the HSCC is still to provide independent scrutiny and advice to the Department on the delivery of services provided under the Act, so this clause continues the requirement for such a committee to be established.

The Department has, over the years, also established numerous other committees to exercise its functions and/or to co-ordinate the provision and delivery of services. This clause also allows that to continue.

Examples of these committees include the various senior leadership teams, the Local Research Ethics Committee and the Clinical Recommendations Committee.

4. Proposed Content of the Bill (Continued)

15 Advice of committees

This clause states that the Department may seek advice from any of the committees mentioned above in relation to any action it has taken or intends to take in respect of care, and states that where advice is received, whether or not it was requested, the Department must take this into account, although it will not be bound by it.

PART 4 – COMPLAINTS UNDER A SCHEME

16 Application of Part

This clause makes it clear that complaints may be made about care provided either by the Department or by a contracted service provider, and confirms that complaints may be made in respect of:

- (a) a failure to provide care,
- (b) a delay in the provision of care,
- (c) the quality or efficacy of care provided, or
- (d) the manner in which care has been provided.

17 Procedure for making complaints

Under the NHS Act 2001 the complaints procedure is set down in the NHS (Complaints) Regulations 2004.

Going forward the complaints process, both in relation to the making and the consideration of a complaint, will be contained in a published procedure rather than regulations, and this Clause confirms this.

18 Independent review body for complaints

Under the NHS (Complaints) Regulations 2004 an Independent Review Body (“IRB”) was established to resolve any complaints which had not been satisfactorily resolved by other methods.

On the basis that there will be no complaints regulations in the future (see above) this clause includes provision for the establishment of the IRB and for complainants to refer complaints to it.

This Clause also confirms that the Department must publish the procedure which will be followed by the IRB.

4. Proposed Content of the Bill (Continued)

PART 5 – FINAL PROVISIONS

19 Regulations

This clause allows the Department to make any regulations necessary or convenient for the administration of the Act, and requires those regulations to be approved by Tynwald. Examples of existing Regulations which will be continued under this provision are the constitution regulations for the Health Services Consultative Committee and the Independent Review Body.

20 Saving

This clause continues in force various regulations made under the NHS Act 2001 until such time as new arrangements, whether or not via new regulations, are put in place. The regulations are:

- the NHS (Appointment of Consultants) Regulations 2003;
- the NHS (Ophthalmic Services) Regulations 2004;
- the NHS (Independent Review Body) Regulations 2004.
- the NHS (Pharmaceutical Services) Regulations 2005; and
- the NHS Consultative Committee Constitution Regulations 2012.

21 Transitional provision

This clause will keep in force any contractual arrangements made under the NHS Act 2001 as if they were made under the new Act.

22 Legislation amended

This clause states that the Schedule, which sets out the consequential amendments to be made to other Acts, has effect.

23 Repeal

This clause will repeal the National Health Service Act 2001.

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NATIONAL HEALTH AND CARE SERVICE BILL 2015

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NATIONAL HEALTH AND CARE SERVICE BILL 2015

A **BILL** to provide national health and care services

BE IT ENACTED by the Queen's Most Excellent Majesty, by and with the advice and consent of the Council and Keys in Tynwald assembled, and by the authority of the same, as follows:—

PART 1 – INTRODUCTORY

1 Short title

The short title of this Act is the National Health and Care Service Act 2015.

2 Commencement

- (1) This Act (apart from this section and section 1) comes into operation on such day or days as the Department may by order appoint and different days may be appointed for different purposes of this Act.
- (2) An order under subsection (1) may make such transitional and saving provisions as the Department considers necessary or expedient.

3 Interpretation

In this Act —

“**care**” means —

- (a) health care and services; and
- (b) care and services that the Department may or is required to provide under other legislation;

“**Department**” means the Department of Health and Social Care;

“**Scheme**” means a Scheme established under section 6;

“**publish**”, in respect of information required to be published under this Act, means publish in a manner that gives the public free and convenient access to a copy of the information.

PART 2 –SCHEMES

4 Department to provide care

- (1) The Department must ensure that care is provided to individuals to the extent and in the manner set out in one or more Schemes.
- (2) Nothing in this Act is to be taken as prohibiting the Department from providing care to individuals otherwise than under a Scheme.

5 The Isle of Man National Health and Care Service

- (1) A Scheme or Schemes established under this Act and the care provided to individuals under the Scheme or Schemes may collectively be referred to and cited as the Isle of Man National Health and Care Service.
- (2) The Department must prepare and publish a Charter called the Isle of Man National Health and Care Service Charter that sets out the Department's general commitments in respect of the Isle of Man National Health and Care Service.
- (3) The Department must have regard to the Charter in the provision of care.

6 Establishment of Schemes

- (1) The Department –
 - (a) must establish one or more Schemes and
 - (b) may amend a Scheme.
- (2) A Scheme or an amendment of a Scheme must be laid before Tynwald.
- (3) If Tynwald at the sitting at which the Scheme or amendment is laid or at the subsequent sitting resolves that it is to be annulled, it shall cease to have effect.
- (4) The Department must publish a Scheme or an amendment of a Scheme as soon as practical after it has been laid before Tynwald.

7 Contents of a Scheme

- (1) In general, when establishing a Scheme the Department must determine –
 - (a) the care that will be provided to individuals under the Scheme;
 - (b) the way in which that care will be provided;
 - (c) the terms and conditions on which that care will be provided to individuals;
 - (d) any facilities, equipment and other resources the Department will provide in respect of the Scheme; and
 - (e) the manner in which the Scheme is to be administered.

- (2) However, a Scheme must provide that the following provisions of a Scheme are regularly and independently monitored and reviewed –
 - (a) the care provided to individuals under the Scheme;
 - (b) the way in which that care is provided;
 - (c) any facilities, equipment and other resources made available in respect of the Scheme; and
 - (d) the way in which the Scheme is being administered.

8 Charges under a Scheme

- (1) The terms and conditions of a Scheme mentioned in section 7(1)(c) must provide for –
 - (a) the charges (if any) to be paid for the provision of care under the Scheme; and
 - (b) the manner in which those charges may be calculated.
- (2) Nothing in subsection (1) is to be taken as implying that a charge must be made for the provision of care under a Scheme.
- (3) In setting a charge (if any) for care under a Scheme, the Department must take into consideration the funds and other resources available to it.
- (4) A Scheme may provide that individuals specified in the Scheme are exempt from a charge for care provided under the Scheme or are only liable to a reduced charge.
- (5) Except as may otherwise be provided by a Scheme, a charge for care provided under the Scheme is a debt due to the Department or, if the care was provided by another person, that person.
- (6) The Department must pay any amount it receives for care it provides into the general revenues of the Island.

9 Contributions under a Scheme

- (1) The terms and conditions of a Scheme mentioned in section 7(1)(c) may provide for the Department to make payments to meet or to contribute towards specified care related costs incurred or to be incurred in respect of individuals who have received or who are to receive care under the Scheme.
- (2) In setting those payments, the Department must take into consideration the funds and other resources available to it.

10 Care may be provided by others

- (1) The obligation on the Department to prepare one or more Schemes is not to be taken as implying that the care to be provided under a Scheme must be provided by the Department.

- (2) Accordingly, a Scheme may provide that all or any part of the care to be provided under the Scheme may be provided by a person who —
 - (a) has been commissioned by, or on behalf of, the Department; or
 - (b) has entered into a contract with the Department,to provide the care or that part of it.

11 Department to maintain list of qualified care providers

- (1) The Department must maintain a list of the names of individuals that it is satisfied are qualified to provide care in accordance with section 10(2).
- (2) The list may include the name of an individual practicing on the Island who is providing care under a Scheme whether the care is provided by the Department or by the individual in accordance with section 10(2).
- (3) The Department may publish the list either in full or to such extent as the Department considers appropriate in any particular case.
- (4) The Department must publish details setting out —
 - (a) how an individual may apply to have his or her name included on the list;
 - (b) the procedure it will follow to determine an application by an individual to have his or her name included on the list; and
 - (c) the right of appeal an individual has if the Department determines that the name of an individual should not be included on the list or should be removed from it.
- (5) The Department may keep the list in any form it considers appropriate.

12 Private facilities and care

- (1) Nothing in this Part is to be taken as implying —
 - (a) that the Department may only provide care under a Scheme; or
 - (b) that the facilities available to the Department can only be used for the provision of care under a Scheme.
- (2) If the Department provides care otherwise than under a Scheme it may do so on terms and conditions it determines.
- (3) However, its ability to do so is subject to any contrary provision in any legislation under which the Department may provide that care.
- (4) If the Department makes its facilities available for the provision of care it may do so on terms and conditions it determines.

13 Misuse of the Department's facilities

- (1) The use by an individual of any of the Department's facilities for the reception of care, whether under a Scheme, by virtue of an arrangement

- under section 12(4) or otherwise, constitutes a contract between the Department and the individual.
- (2) The terms of the contract are that the individual, in consideration of the Department making the facility available to the individual for the provision of the care, will vacate the facility when informed by the Department that the provision of the care has been completed or that the provision of care to that individual no longer requires the use of the facility.
 - (3) If an individual breaches the contract by failing or refusing to vacate the facility when required to do so in accordance with the contract, the Department may seek to enforce compliance with the contract and to seek damages for the breach in any court of competent jurisdiction.
 - (4) A contract to which this section applies does not affect any other contract that may exist between the Department and the individual or between the Department and any other person.

PART 3 – COMMITTEES

14 Establishment of committees

- (1) The Department must establish a consultative committee to provide it with independent scrutiny and advice on its establishment and administration of Schemes.
- (2) The Department may establish other committees, in particular -
 - (a) committees to exercise on behalf of the Department and in its name any of its functions; and
 - (b) committees to co-ordinate the provision and delivery of care under Schemes.

15 Advice of committees

- (1) The Department may seek advice from a committee established under section 14 in respect of any action the Department has taken or intends to take in respect of care.
- (2) The Department must take account of any advice it receives from a committee, whether or not the advice is as a result of a referral under subsection (1), but is not bound to follow the advice.

PART 4 – COMPLAINTS UNDER A SCHEME

16 Application of Part

- (1) This Part applies to complaints made by individuals about care provided under a Scheme, whether by the Department or by a person acting in accordance with section 10(2).
- (2) A complaint under this Part may, in particular, be made in respect of —
 - (a) a failure to provide care;
 - (b) a delay in the provision of care;
 - (c) the quality or efficacy of care that was provided; or
 - (d) the manner in which care was provided.

17 Procedure for making complaints

- (1) The Department must publish details setting out —
 - (a) the procedure to be followed by an individual who wishes to make a complaint; and
 - (b) the procedure to be followed by those considering such a complaint.
- (2) The procedure to be followed in considering a complaint must ensure that the rules of natural justice are followed.

18 Independent review body for complaints

- (1) The Department must establish an independent review body to consider any complaints referred to it under this section.
- (2) If a complaint is not resolved in accordance with the procedure published in accordance with section 17(1)(b), either party to the complaint may refer the complaint to the body established under subsection (1) for resolution.
- (3) Sections 17(1)(b) and 17(2) apply to a review body established under subsection (1).

PART 5 – FINAL PROVISIONS

19 Regulations

- (1) The Department may make regulations necessary or convenient for its administration of this Act.
- (2) Regulations made under this Act have no effect unless approved by Tynwald.

20 Saving

Despite the repeal of the *National Health Service Act 2001* the following regulations made under that Act continue in force, with any necessary amendments, as if made under section 19(1) of this Act and approved by Tynwald —

- (a) the *National Health Services (Appointment of Consultants) Regulations 2003*;
- (b) the *National Health Service (Ophthalmic Services) Regulations 2004*;
- (c) the *National Health Service (Independent Review Body) Regulations 2004*;
- (d) the *National Health Service (Pharmaceutical Services) Regulations 2005*; and
- (e) the *National Health Service Consultative Committee Constitution Regulations 2012*.

21 Transitional provision

- (1) This section applies to a contract that —
 - (a) was entered into pursuant to the *National Health Service Act 2001* that provided for a person to provide services; and
 - (b) was in force immediately before section 23 was brought into force.
- (2) The contract continues in force, with the necessary amendments, as if it had been entered into in accordance with section 10(2) of this Act.

22 Legislation amended

The Schedule has effect.

23 Repeal

The *National Health Service Act 2001* is repealed.

SCHEDULE

LEGISLATION AMENDED

In a provision mentioned in column 1 of the following table, the expression in column 2 is omitted and if there is an expression in column 3 that expression is substituted.

Table

<i>Column 1</i>	<i>Column 2</i>	<i>Column 3</i>
Provision	Expression to be omitted	Expression to be substituted
Law Reform (Personal Injuries) Act 1949		
Section 2(4)	<i>Health Service Act 2001</i>	<i>National Health and Care Service Act 2015</i>
Children and Young Persons Act 1966		
Section 118(1) (definition of "hospital")	"hospital" has the same meaning as in the <i>National Health Service Act 2001</i> ;	
Dental Act 1985		
Section 3(2)(a)	(a) by an authority providing national health services, or	(a) by the Department of Health and Social Care in respect of the provision of care under the <i>National Health and Care Service Act 2015</i> , or
Section 11(2)	(2) References in this Act to national health services are references to — (a) hospital services and specialist services under Part 3 of the <i>National Health Service Act 2001</i> ; or (b) services at health centres under section 15 of that Act; or (c) school medical services under section 16 of that Act; or (d) services for mothers and young children under section 17 of that Act;	
Civil Service Act 1990		
Schedule 1, Part II, para 1(d)(iii)	Section 23 of the <i>National Health Service Act 2001</i> .	the <i>National Health and Care Service Act 2015</i> .
Design Right Act 1991		
Section 26(4)	for the purpose of	for the purpose of providing

	<p>providing –</p> <p>(a) general pharmaceutical services,</p> <p>(b) general medical services, or</p> <p>(c) general dental services, that is, services of those kinds under the <i>National Health Service Act 2001</i></p>	<p>care under the Isle of Man National Health and Care Service</p>
Sexual Offences Act 1992		
Section 6(2)(b)	<i>National Health Service Act 2001</i>	<i>National Health and Care Service Act 2015</i>
Access to Health Records and Reports Act 1993		
Section 1(2)(b)	<i>National Health Service Act 2001</i>	<i>National Health and Care Service Act 2015</i>
Section 10	<p>“general practitioner” means a medical practitioner who is providing general medical services in accordance with arrangements made under section 27 of the <i>National Health Service (Isle of Man) Act 1948</i>;</p>	<p>“general practitioner” means a person who is a registered medical practitioner, is registered on the register of general medical practitioners in accordance with the <i>Health Care Professionals Act 2014</i>, and is providing care in accordance with the <i>National Health and Care Service Act 2015</i>;</p>
Termination of Pregnancy(Medical Defences) Act 1995		
Section 6(1)(b)	the pregnancy is terminated in a national health hospital	the pregnancy is terminated under the Isle of Man National Health and Care Service in a national health service hospital
Section 6(2)(a)	is not employed on the staff of, or otherwise contracted to provide medical services in, a national health hospital in a post or office which is junior to the hospital surgeon who terminates the pregnancy; or	is not employed by the Department or otherwise contracted or commissioned by the Department to provide medical services in a post or office that is junior to the hospital surgeon who terminates the pregnancy; or
Section 6(5)(b)	<p>(b) if there is no live birth, the foetus shall be disposed of –</p> <p>(i) in accordance with the wishes of the pregnant woman; or</p> <p>(ii) in the absence of</p>	<p>(b) if there is no live birth, the foetus must be disposed of –</p> <p>(i) in accordance with the wishes of the mother; or</p> <p>(ii) in the absence of a direction by the mother, in accordance</p>

	any direction by the pregnant woman, in accordance with the normal practice of the hospital, but the foetus or any part of the foetus shall not be used or made available for any medical or other experiment or procedure or for any purpose whatsoever without the express written consent of the mother	with the normal practice of the Department, but the foetus or any part of it must not be used or made available for any medical or other experiment or procedure or for any purpose whatsoever without the express written consent of the mother
Section 8(1) (definition of "consultant")	at a hospital provided by the Department under section 28 of the <i>National Health Service Act 2001</i> ;	at a national health service hospital;
Section 8(1) (definition of "national health hospital")	"national health hospital" means a hospital vested in the Department for the purposes of the <i>National Health Service Act 2001</i> .	"national health service hospital" means a hospital provided by the Department for the purposes of the Isle of Man National Health and Care Service.
Video Recordings Act 1995		
Section 8(10)(b)	for the purpose of services provided in pursuance of the <i>Health Service Act 2001</i>	for the purpose of care provided in pursuance of the <i>National Health and Care Service Act 2015</i>
Mental Health Act 1998		
Section 12(3)	section 6 (accommodation for private patients) of the <i>National Health Service (Isle of Man) Act 1948</i>	section 12 of the <i>National Health and Care Service Act 2015</i>
Section 19(3)	in a hospital vested in the Department for the purposes of its functions under the NHS Act or any accommodation used under Part I of that Act by the managers of such a hospital,	in a hospital provided by the Department for the purposes of the Isle of Man National Health and Care Service or any other accommodation provided for that purpose and used by the managers of such a hospital,
Section 121(2)	For the purposes of the NHS Act the making of payments under this section to persons for whom hospital and specialist	The making of payments under this section to persons for whom care is provided under the Isle of Man National Health and Care Service is to

	services are provided under that Act shall be treated as included among those services.	be treated as included in that care.
Section 138(1) (definition of “the NHS Act”)	“the NHS Act” means the <i>Health Service Act 2001</i> ;	“the NHS Act” means the <i>National Health and Care Service Act 2015</i> ;
Children and Young Persons Act 2001		
Section 102(1) (definition of “health service hospital”)	“health service hospital” means a hospital provided by the Department under Part 3 of the <i>National Health Service Act 2001</i> ;	“health service hospital” means a hospital provided by the Department for the purposes of the Isle of Man National Health and Care Service;
Education Act 2001		
Section 41(6)	The Department shall make arrangements for encouraging and assisting pupils to take advantage of services provided by the Department of Health under section 16 of the <i>National Health Service Act 2001</i> .	The Department must make arrangements to encourage and assist pupils to take advantage of care provided for them under the Isle of Man National Health and Care Service.
Section 59(1) (definition of “school buildings”)	for affording facilities for enabling the Health Department to carry out its functions under section 16 of the <i>National Health Service Act 2001</i> ; or	for affording facilities to enable the Department of Health and Social Care to carry out any of its functions under the <i>National Health and Care Service Act 2015</i> ; or
Schedule 8, para 1(b)	a hospital trust within the meaning of Schedule 1 to the <i>National Health Service Act 2001</i>	a hospital trust, being a trust of property for purposes relating to hospital services
Medicines Act 2003		
Section 6(3)	and section 41 of the <i>National Health Service Act 2001</i> applies to consultations under paragraph (a) as it applies to consultations for the purposes of that Act	
Section 53(3)	For the purposes of this section the provision of services by or on behalf of the Department under the	For the purposes of this section the provision of care by or on behalf of the Department under the <i>National Health and</i>

	<i>National Health Service Act 2001</i> shall be treated as the carrying on of a business by that Department	<i>Care Service Act 2015</i> is to be treated as the carrying on of a business by that Department
Schedule 2 (definition of "health centre")	means a health centre maintained under section 15 of the <i>National Health Service Act 2001</i>	means premises provided, equipped and maintained by the Department of Health and Social Care for the provision of care under the Isle of Man National Health and Care Service
Employment Act 2006		
Section 58(1)(c)	works or worked as a person providing general medical services, general dental services, general ophthalmic services or pharmaceutical services in accordance with arrangements made by the Department of Health under section 3, 6, 8 or 10 of the <i>Health Service Act 2001</i> ,	works or worked as an individual providing care under section 10(2) of the <i>National Health and Care Service Act 2015</i> .
Public Sector Pensions Act 2011		
Section 3(3)(a)	any persons engaged in any of the services mentioned in section 15 of the <i>National Health Service Act 2001</i>	any person providing care under the Isle of Man National Health and Care Service
Social Services Act 2011		
Section 30(1) (definition of "hospital")	" hospital " has the same meaning as in section 43 of the <i>National Health Service Act 2001</i> ;	
Regulation of Care Act 2013		
26(2)(b)	<i>National Health Service Act 2001</i>	<i>National Health and Care Service Act 2015</i>
Schedule (definition of "hospital")	" hospital " see section 43 of the NHS Act.	
Schedule (definition of "NHS hospital")	" NHS hospital " means a hospital provided under Part 3 (hospital and specialist services) of the NHS Act.	" NHS hospital " means a hospital provide by the Department for the purposes of the Isle of Man National Health and Care Service.

The information in this booklet can be provided in large print or audio format upon request.

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