

Schedules

Schedule 1

Article 20

THE REGULATOR

Appointment of Registrar etc.

1. The Regulator, for the purposes of this Order—
 - (a) may make such appointments as it may determine, and
 - (b) without prejudice to the generality of [sub-paragraph \(a\)](#), must appoint—
 - (i) a Registrar, and
 - (ii) members of a Panel.

Delegation

- 2.—(1) Subject to paragraph 8 of Schedule 3 to the Health Act 1999⁽¹⁾, the Regulator may delegate functions under this Order to—
 - (a) a member of the Regulator;
 - (b) a Panel or the MPTS;
 - (c) any other person if—
 - (i) the Regulator considers that the delegation is likely to lead to an improvement in the exercise of its functions, and
 - (ii) the person has agreed to the terms of the delegation.
- (2) The functions that may be delegated under [sub-paragraph \(1\)](#) do not include any function of making rules under [Schedule 4](#).
- (3) The functions that may be delegated under [sub-paragraph \(1\)\(b\)](#) and [\(c\)](#) do not include the power conferred by that paragraph.
- (4) A function may be delegated under [sub-paragraph \(1\)](#)—
 - (a) wholly or partly;
 - (b) generally or only in specific circumstances;
 - (c) unconditionally or subject to specific conditions.
- (5) A delegation does not—
 - (a) prevent the Regulator from exercising the function or making other arrangements for its exercise;
 - (b) affect any liability or responsibility of the Regulator for the exercise of its functions.
- (6) The Regulator may discharge a function delegated to it by another person.

(1) 1999 c. 8.

Objective, matters to which the Regulator must have regard and co-operation

3.—(1) The Regulator, in addition to its objectives and duties set out in section 1(1A) and (1B) (a) of, and paragraph 9A(1)(b) of Schedule 1 to, the Medical Act 1983(2)—

- (a) has the objective of promoting and maintaining—
 - (i) public confidence in, and
 - (ii) proper professional standards and conduct for members of, the anaesthesia associate and physician associate professions,
- (b) must have regard, in exercising its functions under this Order, to—
 - (i) the interests of persons using or needing the services of associates in the United Kingdom,
 - (ii) any differing interests of different categories of anaesthesia associates and physician associates, and
 - (iii) the principle that regulatory activity should be targeted only at cases in which action is needed,
- (c) must discharge its functions under this Order in a way which is transparent, accountable, proportionate and consistent, and
- (d) must co-operate insofar as is appropriate and practicable, with persons concerned with the employment (whether or not under a contract of service), education or training of associates or the services they provide.

(2) In carrying out its duty to co-operate under [sub-paragraph \(1\)\(d\)](#), the Regulator must have regard to any differing considerations relating to practising as an associate which apply in England, Scotland, Wales or Northern Ireland.

Default powers of the Privy Council

4.—(1) If it appears to the Privy Council that the Regulator has failed to perform any functions under this Order which, in the opinion of the Privy Council, should have been performed, the Privy Council may notify the Regulator of its opinion and require the Regulator to make representations to it.

(2) The Privy Council may, having considered such representations, give such directions to the Regulator as the Privy Council considers appropriate.

(3) If the Regulator does not comply with a direction given under [sub-paragraph \(2\)](#), the Privy Council may give effect to the direction.

(4) Subject to [sub-paragraph \(5\)](#), for the purpose of [sub-paragraph \(3\)](#), the Privy Council may—

- (a) exercise any power of the Regulator or do any act authorised to be done by the Regulator, and
- (b) do, of its own motion, any act which it is otherwise authorised to do under this Order at the instigation of the Regulator.

(5) The Privy Council may not under [this paragraph](#) make, amend or remove an entry in the register in respect of an individual, nor refuse to do so.

(6) The powers under [sub-paragraphs \(1\)](#) and [\(2\)](#) may be exercised by a person authorised or designated by the Privy Council for that purpose.

(2) [1983 c. 54.](#)

Incidental powers

5.—(1) The Regulator may do anything which appears to it to be incidental or conducive to the purpose of, or in connection with, the performance of its functions other than its functions under the Medical Act 1983⁽³⁾ including—

- (a) paying members and staff of the Regulator and Panel members such remuneration, pensions, expenses, allowances or gratuities as it may determine,
- (b) paying a person to whom it has delegated a function in accordance with [paragraph 2](#) for the discharge of that function, and
- (c) borrowing.

(2) The Regulator must arrange for the provision of such advice, assistance, accommodation, services and other facilities for a Panel as the Regulator thinks necessary or expedient for the proper performance of the Panel's functions.

(3) Arrangements under [sub-paragraph \(2\)](#) may include arrangements with the MPTS.

Grant-making power

6.—(1) The Secretary of State, the Scottish Ministers, the Welsh Ministers and the Department of Health in Northern Ireland may make a grant to the Regulator for the purposes of its functions under this Order.

(2) A grant under [sub-paragraph \(1\)](#) may be made unconditionally or subject to condition.

⁽³⁾ See paragraph 9 of Schedule 1 to the Medical Act 1983.