Questions:

I would be grateful if you could identify and provide copies of any current regional policies, procedures, protocols, guidance documents, pathways or operational frameworks relating to:

1. Change of Consultant Psychiatrist requests;

2. Transfer between Community Mental Health Teams within a Trust;

3. Transfer of mental health care between Health and Social Care Trusts in Northern Ireland;

4. Transfer of mental health care following a permanent change of address into another Trust area;

5. Requests for transfer of mental health care to another Trust outside normal geographical arrangements.

Responses:

1. The Mental Health (NI) Order 1986 is the primary statutory mental health legislation for Northern Ireland, and its associated Code of Practice provides the regional framework and guidance for how that legislation should be applied in practice. The documents can be accessed at the following links The Mental Health (Northern Ireland) Order 1986 and Mental Health (Northern Ireland) Order 1986 – Code of Practice (2026 Revision) | Department of Health

   The Code of Practice provides overarching statutory and best-practice guidance for treatment, patient rights, and clinical decision-making, including patient involvement and consent. It emphasises person-centred care, participation, and communication, which underpin how consultant changes are considered. It is operational practice (not formalised regionally, but governed by patient rights principles).

   There is no single regional Northern Ireland policy for "change of consultant psychiatrist" requests. Instead, individual Health and Social Care Trusts operate local procedures via:

   - Complaints / Patient & Client Council / service user engagement processes
   - Clinical Director or Service Manager decision-making
   - Requests are not automatically granted
   - Decisions are based on clinical appropriateness, capacity, and continuity of care
   - May result in transfer to another CMHT if required.

   The GMC's Good Medical Practice (2024) Guidance Domain 2 - Patients, Partnership & Communication outlines that practitioners must recognise a patient's right to choose whether to accept advice, and respect the patient's right to seek a second opinion.

   The Patient Client council (PCC) can also play a significant role in supporting individuals who wish to request a change of psychiatrist. The PCC may:

   - Help patients understand their rights within the HSC system.
   - Support individuals to raise concerns with Trust services.
   - Provide advocacy and representation during discussions with services.

- Assist patients in navigating Trust complaints procedures.
- Support individuals in preparing correspondence or articulating concerns regarding their care.
- Escalate systemic issues identified across services where appropriate.

Where a patient feels unable to advocate for themselves, involvement of the PCC can often provide an independent and constructive mechanism to ensure their views are heard. The Patient Client Council may be contacted at 0800 917 0222 or by emailing info@pcc-ni.net

Should any complainant remain dissatisfied at the end of the Health and Social Care Trust's Complaints Process, they can then refer their complaint to the NI Public Services Ombudsman (NIPSO, the Ombudsman). The Ombudsman is completely independent of the Health and Social Care Trusts.

NICE Quality Standard QS14 (Service User Experience in Adult Mental Health Services), see appendix 1, is an overarching standard that can be relevant to a change of consultant however it does not create an automatic entitlement to choose or change consultant psychiatrists.

It is important to note that requests for a change would usually be considered under local Health and Social Care Trust policies/procedures, clinical governance arrangements, and patient choice provisions where applicable.

2. The Regional Mental Health Care Pathway is the regional framework for the delivery of mental health services in Northern Ireland. It outlines a stepped-care approach to assessment, treatment and support, ensuring that individuals receive care appropriate to their level of need while promoting recovery, personal wellbeing and equitable access to services across the region. It sets expectations for referral processes, prioritisation and continuity of care.

   The Regional Mental Health Pathway supports the aims of the Mental Health Strategy 2021–2031 and the Community Mental Health Team (CMHT) review work which aims for consistent CMHT models and standardised referral/discharge processes across individual Health and Social Care Trusts.

   CMHT allocation is typically geographically based and determined by clinical need and service configuration. Transfers within a Trust are usually:

   - managed through internal referral pathways;
   - approved by team managers / consultants;
   - triggered by: change in need; safeguarding or risk issues; or occasionally patient request.

3. I refer you to the Protocol for the Transfer of Adult Mental Health Patients Between Trusts (DoH / HSCNI), see appendix 2 and the CREST (Clinical Resource Efficiency Support Team) Protocol for the Inter Hospital Transfer of Patients and their Records, see appendix 3.

   The core principles of the protocol include:

   - Continuity of care is paramount;
   - The originating Trust retains responsibility until transfer completed;

- The transfer requires formal communication, risk management, and service-user involvement.

The protocol covers a range of different transfer arrangements and processes including:

- Permanent transfers
- Consultant only outpatient transfers
- Care managed/service user transfers
- Temporary moves
- Cross-boundary and
- Prison transitions

4. I refer you to the Protocol for the Transfer of Adult Mental Health Patients Between Trusts (DoH / HSCNI), see appendix 2 and the CREST (Clinical Resource Efficiency Support Team) Protocol for the Inter Hospital Transfer of Patients and their Records, see appendix 3.

   The Inter Trust Transfer Protocol explicitly addresses this scenario when a service user moves to another Health and Social Care (HSC) Trust area. The original HSC Trust remains responsible until the transfer is complete; the receiving Trust must accept the referral before handover. The Transfer must ensure continuity of treatment, risk management and Patient/carer involvement.

5. I refer you to the Protocol for the Transfer of Adult Mental Health Patients Between Trusts (DoH / HSCNI), see appendix 2 and the CREST (Clinical Resource Efficiency Support Team) Protocol for the Inter Hospital Transfer of Patients and their Records, see appendix 3.

   Within the Inter Trust Transfer Protocol, specific consideration is given to;

   - Transfers that fall outside standard catchment/geographical rules
   - Situations such as: specialist service need, risk management, lack of local provision, patient circumstances (e.g. safety, family support)

   The following principles are applied;

   - Transfer must be clinically justified and require agreement between both Trusts;
   - Must consider: Capacity and resources, continuity and safety risks. Transfer is not automatic and is subject to case-by-case decision making.

   The Regional Bed Management Protocol for Acute Psychiatric Beds (2022) provides a regional framework for the management and allocation of acute mental health inpatient beds across Northern Ireland, see appendix 4. The protocol highlights the risks associated with out-of-area placements, especially at point of discharge and also reinforces the need to avoid non-local placements where possible, due to safety concerns. This protocol is currently in the process of being updated.

   The DOH have policy responsibility for the transfer of detained patients between jurisdictions and further information can be found via the following link:

   - DoH Guidance on the Transfer of Patients Detained under Mental Health Legislation between Hospitals in Northern Ireland and Great Britain | Department of Health

Appendices may be requested from the Information Management Branch (IMB) if required at the following address:

- *FOI@health-ni.gov.uk*

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