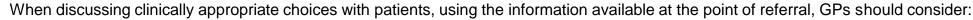
# Right to choose

It is for the GP to decide what is clinically appropriate when offering eligible patients their legal rights to choose. Note: the service provider must hold an NHS contract for the specific intervention(s) the patient is requesting access to.

Consideration needs to be given to clinical appropriateness where a patient has complex mental health needs and requires an integrated package of health and social care to avoid their care being fragmented.





## **Involving patients in decision making**

- •Discussing the patient's expectations of referral can signposting to self help tools support the patient as an alternative?
- •Discussing the patient's personal circumstances.
- Discussing the patient's continuity of care, for example any co-morbidities and existing care and treatment the patient is receiving or needs to receive.
- Discussing the patient's rights to choose the provider and team at the points at which the choice is meaningful.
- •Discussing whether the patient would benefit from accessing an advocacy service.
- Discussing whether the patient would benefit from receiving further information in a more accessible format.

### **Provider services and outcomes**

- •The provider must hold an NHS contract with an ICB and produce evidence of same to KMICB
- •The referral must be made in line with ICB policies and commissioned pathway; therefore, the provider must provide a service in line with what is commissioned locally
- •Whether the provider offers evidence-based and effective interventions for the patient's condition/presenting needs.
- •The quality and clinical outcome indicators for the providers' services.
- Patient and user feedback for the providers' services.

### **Clinical considerations**

- •Whether there is risk of fragmenting care through the choice that a patient wishes to make, for example where a patient requires a high level of integrated health and social care.
- •Any implications patient choice of provider has for the delivery of crisis care should it be required during their episode of care.
- •Whether the patient has been recently discharged and the potential clinical benefits of continuity of care.

#### **Practical implications**

- •Appropriate arrangements for continuing care should be agreed by the GP, the patient, the provider and the commissioner.
- •Discussing how the patient would be able to travel to and from the provider if the patient lives outside the area served by the provider.
- •Any local provision for patient transport to and from their chosen provider.
- •Ongoing provision of care (for example monitoring and medication (Shared Care))

Reference: NHS England: Choice in Mental Health Care: Publication Gateway Number 07661. April 2021.

Adapted for use in NHS Kent and Medway January 2024