 BAY OF PLENTY DISTRICT HEALTH BOARD HAUORA A TOI CLINICAL PRACTICE MANUAL	TRANSFERS OF RESPONSIBLE CLINICIAN (INTERNAL) FOR PATIENTS SUBJECT TO THE MENTAL HEALTH ACT	Protocol CPM.M5.35
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PURPOSE

It is a requirement under the Mental Health (Compulsory Assessment and Treatment) Act 1992 (MHA) that a patient subject to the Act has a Responsible Clinician (RC) appointed to them at all times. This person is the clinician in charge of the treatment of this patient.

The Act is silent about how this might be managed when the patient's Responsible Clinician is off duty or on leave. Processes can be put in place to transfer the care of patients to other Responsible Clinicians during periods of absence or short leave, however, the process are not without issues. A pragmatic approach is therefore needed such as Responsible Clinician's on short absences and when after-hours the on-call senior clinician accepts the role as the acting Responsible Clinician. In situations of absences longer than a month then a Transfer of Care (TOC) is advised.

There is agreement with the Ministry of Health (MoH) Director of Mental Health that there does need to be system that clearly demonstrates responsibility for clinical care and that this may be addressed by an internal District Health Broad protocol.

SCOPE

Patients subject to the Mental Health (Compulsory Assessment and Treatment) Act 1992.


STANDARDS TO BE MET

1. Patients subject to the MHA must have a designated RC.
2. If a RC is on leave and a patient of theirs is under the MHA and there are MHA requirements to be met, such as a court hearing, or a s76 review, then a formal TOC needs to occur between the usual RC and the proposed acting RC to take on those responsibilities.
3. A RC on leave for longer than a month does need to transfer the care of patient to an acting RC for the period of time they are away.
4. During regular service after-hours when a patient's RC is not available, the role of the on-call senior clinician becomes the acting RC.
5. During periods of an RC on leave for less than a month, the role of RC is shared by the RC's working within the same service team as the absent RC or the RC on call if one is appointed.
6. When this system cannot work e.g. RC's on unplanned leave, the DAMHS will appoint a RC to act on behalf of the designated RC.

REFERENCES

- Ngā paerewa Health & Disability Service Standards NZS 8134: 2021
- Mental Health (Compulsory Treatment and Assessment) Act 1992 and Amendments 1999
- [Competencies for the Role and Function of Responsible Clinicians under the Mental Health Act 1992-2001](#)
- [Guidelines to the Mental Health \(Compulsory Assessment and Treatment\) Act 1992. Wellington: Ministry of Health. September 2020.](#)

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Protocol Steward: DAMHS, Mental Health Services	Authorised by: Chief Medical Officer	

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ASSOCIATED DOCUMENTS

- [Bay of Plenty District Health Board policy 6.1.2 protocol 2 Medical Responsibility for Patient Care - Admission, Handover of Responsibility & Patient Care Management](#)
- [Bay of Plenty District Health Board policy 6.1.2 protocol 6 Mental Health & Addiction Services - Transfers Of Care To Other DHB or Other Service Providers](#)

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