

POLICY DOCUMENT

Transfer of Information Policy

Policy Review Schedule

Date first Approved by the QMG: February 2019

Last Approved by the QMG: January 2022

Date of Next Review: February 2027

Policy Owner: Senior Professional Support Manager

Amendment Overview

Version	Date	Pages	Comments	Actioned
1.1	June 2018	9	TOI process removed from PSU guidance as separate policy	G Dennison
1.2	August 2018	9	Revised following feedback from with TRG members	D Hughes
1.3	August 2018	9	Revised to include sharing of FtP concerns on completion of training	D Hughes
1.4	August 2018	11	Revision to reasons for transferring of information	D Hughes
1.5	April 2019	11	Amended to include review of DDRG trainee list	D Hughes
1.6	February 2020	12	Revised to include STEP process, removal of GP TAP section & information in regard to SharePoint	D Hughes
1.7	December 2021	11	Complete policy revision	G Dennison
1.8	February 2025		Complete policy revision to support the implementation of a live TOI system covering all NIMDTA trainees.	G Dennison

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Role of the Northern Ireland Medical and Dental Training Agency

The Northern Ireland Medical and Dental Training Agency (NIMDTA) is an Arm's Length Body sponsored by the Department of Health (DoH) to train postgraduate medical and dental professionals for Northern Ireland. NIMDTA also seeks to serve the government, public and patients of Northern Ireland by providing specialist advice, listening to local needs and having the agility to respond to regional and national requirements.

NIMDTA commissions, promotes and oversees postgraduate medical and dental education and training throughout Northern Ireland. NIMDTA endeavours to attract and appoint individuals of the highest calibre to recognised training posts and programmes. NIMDTA encourages doctors to train and remain in NI so that Health and Social Care (HSC) has a highly competent medical and dental workforce with the essential skills to meet the changing health needs of its population.

NIMDTA organises and delivers the recruitment, selection and allocation of doctors and dentists to foundation, core and specialty training programmes. NIMDTA supports trainees with the aim of maximising their potential to successfully progress, complete training and be appointed to permanent posts in NI. NIMDTA manages the quality of postgraduate medical and dental education in HSC Trusts and in general medical and dental practices through learning and development agreements, the receipt of reports, regular meetings, trainee surveys and inspection visits. It works in close partnership with local education providers to ensure that both the training and supervision of trainees support the delivery of high quality safe patient care. NIMDTA provides trainees with a wide range of opportunities to gain experience in leadership, quality improvement, research and teaching.

NIMDTA trains clinical and educational supervisors and recommends them to the General Medical Council (GMC) for recognition of their role. NIMDTA selects, appoints, trains and develops educational leaders for foundation, core and specialty medical and dental training programmes throughout NI.

NIMDTA is accountable to the GMC for ensuring that the standards set by the GMC for medical training, educational structures and processes are achieved. Revalidation is the process by which the GMC confirms that doctors are up to date and fit to practice. NIMDTA is the Designated Body for doctors in training and has a statutory role in making recommendations to the GMC to support the revalidation of trainees. NIMDTA is also responsible to the GDC for the Standards for Specialty Education.

NIMDTA enhances the standard and safety of patient care through the organisation and delivery of career development for general medical and dental practitioners and dental care professionals. It also supports the career development of general medical practitioners and the requirements for revalidation through the management and delivery of GP appraisal.

NIMDTA has been integrated as lead employer for Doctors and Dentists in training (DDiT) across the HSC. The aim of this service is to provide a high quality continuous employment experience for DDiT.

NIMDTA plays a key role in attracting DDiT to the HSC, and in creating an environment where they wish to continue to remain practising within the HSC.

NIMDTA carries out these roles on behalf of the DoH by focussing on the needs of people (population, trainees, trainers and NIMDTA staff), in partnership with key stakeholders and by upholding the HSC Values - openness and honesty, compassion, excellence and working together.

Policy Influences

This policy has been influenced by the following:

- Maintaining High Professional Standards (MHPS): A framework for the handling of concerns about doctors and dentists in the modern HPSS (DoH)
- A Reference Guide for Postgraduate Foundation and Specialty Training in the UK (*The Gold Guide 8th Edition 2020*)
- Supporting Trainees Entering Practice (STEP) (*UKFPO*)
- Promoting excellence: Standards for Medical Education and Training (*GMC*)
- UK Committee of Postgraduate Dental Deans and Directors (*COPDEND Dental Gold Guide*)
- Handling concerns about practitioners' health: A manager's guide (*PPA*)
- Revalidation Requirements for Doctors in Training (*GMC*)
- Integrated Guidance on Health Clearance of Healthcare Workers and the Management of Healthcare Workers Living with Bloodborne Viruses (Hepatitis B, Hepatitis C and HIV) (*UK Advisory Panel for Healthcare Workers Living with Bloodborne Viruses – UKAP*)
- Doctors in Training with Bloodborne Virus Infection (*4 Nations*)

Policy Impact

This policy may have an impact on the following:

- Professional Support Unit Policy
- Learning and Development Agreement
- Allocations of Placement Policy
- Special Circumstances Policy
- Revalidation Operational Policy
- Failure to Comply with the Requirements of the Training Programme Policy
- Fitness to Practise Policy

1.0 Definition

The Transfer of Information process is a means of supporting resident doctors and dentists and protecting patients as they move between Local Education Providers (LEPs). In particular, this process seeks to highlight residents who require additional support during their training programmes. The process is one of the mechanisms by which NIMDTA passes on information relating to doctors and dentists in order to safeguard patient safety.

2.0 General Principles

2.1 The purpose of transferring information is to ensure that the LEP is aware of any support and/or reasonable adjustments that the resident may require and whether they have been the subject of an investigation or restrictions to their practice. Information shared may be sensitive and therefore it must be treated as confidential. Only information that is relevant for the purpose of supporting resident doctors and safeguarding patient safety will be shared, and only with those who need it.

2.2 There are two processes for transferring information, as follows:

- Process 1: Foundation Supporting Trainees Entering Practice (STEP) process in relation to medical students progressing to Foundation training. See section 3.0 for further details.
- Process 2: NIMDTA Transfer of Information process for residents within Dental, Foundation, General Practice and Hospital Specialty Training programmes. See section 4.0 for further details.

3.0 Medical School Supporting Transition and Entering Practice (STEP) Process

3.1 This is a national process to transfer information from the medical school to the receiving Foundation school. This process is designed to support students in the transition from medical school to postgraduate training and employment.

3.2 UK Final Year medical students complete the STEP online form in March, which includes declarations in relation to health and welfare, educational progress and professional performance. A copy of the form is available at [Preparing for F1 - UK Foundation Programme](#)

3.3 Following submission of the form, the Medical School representative will review the details on the form and confirm if the details are correct. The Medical School will either “Approve” or “Reject” each student’s declarations. If the Medical School rejects and requests amendments, the form will be sent back to the student to amend.

- 3.4 Medical Students from outside the UK will complete the STEP form in paper format as they are unable to access the electronic version. The form is forwarded to NIMDTA by the university or student before the national deadline (usually May).
- 3.5 Details from all forms received (paper and electronic versions) will be collated in an excel spreadsheet by the Foundation Team. The information is reviewed by the Foundation School Director (or deputy) with consideration given to any adjustments or additional support that may be required. If the student has declared information in any of the three areas on the form, they will be asked to consent to the Foundation School Director contacting them to discuss the contents of their form. If consent has been provided, the Foundation School Director (or deputy) will meet with those who have highlighted significant issues to provide support. If consent is not provided the student will be directed to the relevant NIMDTA policy to establish what further action is required (if any).
- 3.6 The spreadsheet is shared with their Foundation Programme Director and Director of Medical Education, and others as deemed necessary by the Foundation School Director.
- 3.7 Information in relation to health and welfare will be shared with Occupational Health in the Local Education Provider (LEP) where the resident is due to commence placement. The student will have provided consent to do so on the STEP form. A summary of health and welfare declarations and educational progress declarations will be reviewed by the Trainee Review Group.
- 3.8 A summary of professional performance issues will be reviewed by the Doctors and Dentists Review Group (DDRG) to establish if the information provided on the form is likely to have an impact on the resident's Fitness to Practise or if further action is required.
- 3.9 Foundation residents who have been allocated to the Northern Ireland Foundation School through the pre-allocation process will be provided with information about the NIMDTA Special Circumstances Policy in case a further application is required in relation to their posting. If their Special Circumstances relate to significant health issues, Occupational Health will also be informed as indicated in 3.7.
- 3.10 When residents rotate to a different LEP site during the Foundation programme, it may be necessary for the current Foundation Programme Director to share information with the next Foundation Programme Director.
- 3.11 The Foundation School will transfer information regarding progress or concerns about Foundation year 1 doctors to the relevant medical school, as required.

4.0 Transfer of Information (TOI) Process

- 4.1 The NIMDTA TOI process will be facilitated by the use of a *Transfer of Information SharePoint* (see Appendix 1 for an illustration of the structure). This will be completed for all residents who require additional support for the following reasons:
- have been diagnosed with a health issue which requires workplace adjustments and/or has the potential to impact on their training
 - have been diagnosed with a disability which requires workplace adjustments and/or has the potential to impact on their training
 - are currently under investigation by the Police, GMC/GDC, local education provider or other regulatory body which has not reached a conclusion
 - are subject to GMC/GDC restrictions (conditions or undertakings)
 - have received a warning which is currently active or was active in the last 12 months
 - are or have been subject to any remediation process, involving NHS Resolution Practitioner Performance Advice (formerly NCAS), addressing deficits in clinical performance during the last 12 months
 - may require additional support or supervision for another reason
- 4.2 TOIs may also be required in the following circumstances :
- residents newly appointed to the Northern Ireland Deanery
 - residents taking up a post outside the Northern Ireland Deanery which will include OOP or Interdeanery Transfers
 - residents who are leaving training in Northern Ireland (see section 5).
- 4.3 TOI's in relation to fitness to practise issues will take place in advance of residents rotating to a new trust.
- 4.4 Information in relation to adjustments resulting from management referrals to occupational health will be added to the TOI SharePoint as reports become available. The TOI SharePoint will be the central portal to share health adjustments for all residents, therefore it will incorporate referrals by PSW, training teams, the employment team, lead educators or supervisors.
- 4.5 Information shared from occupational health reports will be limited to adjustments only, in line with the UK GDPR core principal of data minimisation, which is defined as '*adequate, relevant and limited to what is necessary in relation to the purposes for which they are processed*'. If LEP's feel that additional information or background is required, it is recommended that they request this information directly from the resident.
- 4.6 Information in relation to adjustments resulting from work health assessments will be transferred to medical HR in advance of February and August start dates via the Pre-employment Checks SharePoint. If ongoing adjustments are required, they will be transferred to the TOI system so that they can be shared with subsequent trusts.

4.7 TOI information will be uploaded onto the following sections as appropriate:

Section of TOI SharePoint	Access Granted to
Trusts	Trust Medical Director, Director of Medical Education, Medical HR and other appointed individual
Dental	Postgraduate Dental Dean & Dental Training Manager
Foundation	Foundation School Director, Foundation School Manager & Co-ordinator
General Practice	Director of General Practice, Associate Directors and GP Training Manager
Hospital	Director of Hospital Specialty Training, Hospital Training Manager
Foundation Programme Directors	Relevant Foundation Programmes Directors across all trusts
Hospital Specialties Lead Educators	Relevant Head of School, Deputy Head of School, Training Programme Director
Occupational Health	Nominated contacts within each Trust OH department

4.8 TOIs will be shared with the receiving Occupational Health department if ongoing review is required by the new team.

4.9 Information in regard to trainees with a blood borne virus will be transferred using the following process:

- The resident will declare their BBV on their work health assessment questionnaire which is confidential to the OHS.
- The accredited specialist / consultant in Occupational Medicine in the receiving Trust will communicate with the consultant in occupational medicine who is responsible for the occupational health management of the resident, in conjunction with their specialist.
- It is preferred that the same consultant in OM will continue to follow up that resident, arranging blood testing at the required intervals, and communicating with the treating specialist if required. This enables continuity of care and avoids anyone slipping through and being lost to follow up.
- The responsibility for a BBV infected Resident rests with their Consultant (accredited specialist) in occupational medicine. The accredited specialist, in conjunction with the Resident's specialist, will provide advice on fitness for exposure prone procedures.
- When the resident rotates to a different Trust, they will be included on the TOI SharePoint shared with the relevant DME, OH department and Foundation Programme Director/specialty school. The report will highlight that detailed information will be shared directly between OH departments.
- In advance of rotation, OH will transfer BBV information directly to the resident's new OH department (as detailed in Appendix 2 of Integrated Guidance on Health Clearance of Healthcare Workers and the Management of Healthcare Workers Living with Bloodborne Viruses (Hepatitis B, Hepatitis C and HIV). OH will also

provide the resident with copies of relevant documentation to share with their next trust.

5.0 Transfer of Information for Residents Leaving Programmes in Northern Ireland

- 5.1 It is possible that a resident may complete training or resign from the training programme with one or more of the following:
- undergoing an investigation (by the police, GMC/GDC, NHS Resolution, local education provider or other regulatory body) which has not reached a conclusion
 - subject to GMC/GDC restrictions (conditions or undertakings)
 - in receipt of a warning from a local education provider or regulator which was active in their last placement
 - subject to a remediation process, involving NHS Resolution, addressing deficits in clinical performance in their last placement
- 5.2 The Medical Director, as Responsible Officer will share the resident's last ARCP following receipt of a request from another Responsible Officer. There may also be occasions where the Medical Director or Postgraduate Dean will make contact with a new Responsible Officer to make them aware of concerns (see Appendix 2 for TOI Form). For Dental trainees information will be shared via the Postgraduate Dental Dean.
- 5.3 The resident will be advised that this information is being shared with their new Responsible Officer and they will be provided with a copy.

6.0 Roles and Responsibilities

- 6.1 All parties are responsible for sharing information to ensure that TOI's are up to date and all relevant information is shared with other teams. Information can be forwarded to psw.nimdt@hscni.net
- 6.2 DME – the DME (or equivalent) should ensure that the information is cascaded appropriately through educational routes within the Trust. They will liaise with Medical HR and relevant supervisors to ensure that required adjustments are considered and implemented if appropriate. The DME may feel that it would be beneficial to meet with the resident or to contact them for further information.
- 6.3 Medical HR - will liaise with the DME and SLE in regard to adjustments and will ensure that they are considered, and implemented within the trust if appropriate.
- 6.4 SLE – will liaise with medical HR (or equivalent) to agree implementation and financing of adjustments.

- 6.5 OH – the new OH team should arrange for the case to transfer to their trust and will arrange a review appointment as required. In cases involving a BBV, see section 4.8 for OH responsibilities.
- 6.6 Foundation Programme Directors/Hospital Specialty Lead Educators – may be required to make contact with the receiving department to ensure that all relevant information is transferred to the new Educational Supervisor.
- 6.5 General Practice – the GP Team will share information with the relevant Educational Supervisor, and where appropriate, the Clinical Supervisor of the GP placement. TOIs in relation to F2 doctors rotating to a General Practice will be shared with the Clinical Supervisor of the GP placement.
- 6.6 Dental – will share TOIs with the relevant Training Programme Director, Educational Supervisor and where appropriate, the Clinical Supervisor.

7 Contacts for Further Information

Contact Professional Support for further information via psw.nimmdta@hscni.net or 028 9536 0136.

Appendix 1 Sample Transfer of Information Report

SUMMARY	
TOI Status	Active
Active Case With	PSW
Surname	Case3
Forename	Test
Registration Number	1234569
TOI For	Action
Programme	General Surgery
Grade	ST5
Trust	BHSCT
Posted to Trust (From)	02/08/2023
Posted to Trust (To)	06/08/2024
Reason Information Transferred	Has been diagnosed with a health issue which requires workplace adjustments and/or has the potential to impact on their
Comments	OH review 01/07/2023, remains fit for general ward duties including on-call, but should avoid working overnights for a 12 month period.
Next OH Review	
OH Referral By	SLE

Appendix 2. Transfer of Information – Responsible Officer to Responsible Officer

Information will be transferred for a resident who has completed training or resign from the training programme with one or more of the following:

- undergoing an investigation (by the police, GMC/GDC, NHS Resolution, Local Education Provider or other regulatory body) which has not reached a conclusion
- subject to GMC/GDC restrictions (conditions or undertakings)
- in receipt of a warning from a local education provider or regulator which was active in their last placement
- subject to a remediation process, involving NHS Resolution, addressing deficits in clinical performance in their last placement
- may require additional support or supervision for another reason not included above

This form will be forwarded to the doctor's new Responsible Officer. The purpose of transferring information is to ensure that the new RO is aware of any issues or concerns and can ensure that support and/or reasonable adjustments that may be required can be accommodated for residents leaving programmes in Northern Ireland.

Information has transferred for the following reason(s).

Full Name			
GMC/GDC number:			
Grade/Specialty at time of TOI:			
ARCP Outcome			
Issue:	Health <input type="checkbox"/>	Performance <input type="checkbox"/>	Conduct <input type="checkbox"/> Other <input type="checkbox"/>
Comment			
For Information or For Action			
Occupational Health Review required			
Reasonable adjustments			
Additional Supervision			
Current LEP & unit (inc. dates)			
Current Educational Supervisor			
Future LEP & Unit (inc. dates)			
Contact for Further information:			
Signed:		Date:	
TOI copied to Resident: <input type="checkbox"/>	TOI copied to Head of School: <input type="checkbox"/>	Date:	