

Appointment as a Second Opinion Appointed Doctor

Application Guidance Notes

This guidance has been prepared to support medical practitioners in applying for status as a Second Opinion Appointed Doctor (SOAD).

It is your responsibility to clearly state, using the application enclosed, how you meet the criteria for appointment set out by RQIA.

The suitability of every applicant is considered individually by an Appointment Panel which will take account of the relevant experience, training and qualifications of the practitioner. Appointment to the List of Second Opinion Appointed Doctors is not automatic.

Should you have any further queries or require assistance with the application, please contact RQIA's Appointment Panel Administrator 028 95 361111 or Part11@rqia.org.uk

	Section of Application	Information Required
1.0	Name of the Medical Practitioner	Please state your full name as registered with the GMC
2.0	Name of Trust or Independent Healthcare Organisation and Professional Address	<p>Please state the name of HSC trust or independent healthcare organisation (IHO) in which you will be based</p> <p>For those no longer working in a Trust or an IHO please clearly state:</p> <ul style="list-style-type: none"> • Evidence that you are an engaged in an appraisal process and you are connected to a Responsible Officer for purposes of medical revalidation
3.0	Position within the Trust or independent healthcare organisation	<p>Please state your post within your organisation e.g. Consultant CAMHS Psychiatrist.</p> <p>For those no longer working in a Trust or an IHO please clearly state:</p> <ul style="list-style-type: none"> • Evidence that you are an engaged in an appraisal process and you are connected to a Responsible Officer for purposes of medical revalidation
4.0	GMC Reference Number	Please state your GMC Reference Number.
5.0	Duration of appointment	<p>Please indicate if the appointment is:</p> <p>If you are applying to become a SOAD prior to your next medical revalidation you will be appointed from the day of the Appointment Panel until the date of your next revalidation</p> <p>OR</p> <p>If you have applied to become a SOAD in line with your current revalidation cycle, you will be appointed for 5 years.</p>
5.1	Please confirm date(s) of last and next medical revalidation	Please insert the specific dates of your last and next medical revalidation.

<p>6.0</p>	<p>The medical practitioner has been a consultant psychiatrist for at least 5 years and completes applications for and/or renewal of detention of patients under Part II of the Mental Health (Northern Ireland) Order 1986; and/or</p> <p>The medical practitioner has been a consultant psychiatrist for at least 5 years and gives evidence to, or prepares reports/assessments for, the court under Part III of the Mental Health (Northern Ireland) Order 1986; and/or</p> <p>The medical practitioner has been appointed to the post of Sessional Professional Officer in RQIA.</p>	<p>Please indicate how you meet either one (or more) of these criteria, providing evidence where possible.</p>
<p>7.0</p>	<p>Is registered with the General Medical Council (GMC) and holds a current licence to practice.</p>	<p>Please confirm that you are registered with the GMC and have a licence to practice. Evidence of your GMC registration is required to be sent to RQIA to support your application.</p>
<p>8.0</p>	<p>Is on the Specialist Register of GMC.</p>	<p>Please confirm you are on the GMC's specialist register. Evidence you are on the specialist register is required to be sent to RQIA to support your application.</p>
<p>9.0</p>	<p>The medical practitioner is on the Specialist Register for one of these psychiatric specialisms:</p> <ul style="list-style-type: none"> 1) Adult Psychiatry 2) Intellectual Disability 3) Child and 	<p>Please confirm in which area of psychiatry you have specialist training.</p>

	<p>Adolescent Psychiatry</p> <p>4) Forensic Psychiatry</p> <p>5) Old Age Psychiatry</p> <p>6) Psychotherapy</p>	
10.0	<p>Can demonstrate completion of RQIA eLearning modules 1-4 on the Mental Health (Northern Ireland) Order 1986, within the last two years</p>	<p>Please note, these certificates must be completed within two years prior to your application for SOAD status. Evidence of completion of the eLearning modules is required to support your application.</p>
11.0	<p>Is adequately indemnified to undertake work in respect of the functions of the Mental Health (Northern Ireland) Order 1986.</p>	<p>Please provide a copy of your medical indemnity certificate</p>
12.0	<p>Has an AccessNI Enhanced Disclosure Certificate</p>	<p>RQIA requires an Access NI Enhanced Disclosure Certificate as part of your application. The application for this disclosure must be countersigned by RQIA.</p> <p>In order to make an online application, you should access the following web link https://www.nidirect.gov.uk/services/apply-online-enhanced-check-through-registered-body, and select the option for an enhanced disclosure check through a registered body.</p> <p>If you do not already have an account with AccessNI, you will need to create one. When you proceed through the web form, you will be prompted to provide a PIN number. Please enter the following number – 540330. You should follow the instructions on screen in order to complete your disclosure application. When you have completed and submitted your web form, please make a note of your case reference number.</p> <p>Please note; RQIA require Access NI on initial</p>

		application only. If you are applying for reappointment as a SOAD your Access NI certificate will still be valid and you will not be required to apply again.
13.0	Please add any other comments you consider to be relevant to the application	Please include any relevant information to support your application for SOAD status.
14.0	Signing the application	When signing this application, please print your name and date of completion – RQIA accept electronic signatures. RQIA will not accept an application with a typed signature.

Documentation required to be returned to RQIA with SOAD Application

It is your responsibility to submit the required documentation to allow RQIA to assess this application for SOAD appointment.

Please submit the following documentation:

- A completed application form, signed and dated;

And

- Confirmation that the medical practitioner has been appointed to the post of consultant psychiatrist and completes applications for and/or renewal of detention of patients, under Part II of the Mental Health (Northern Ireland) Order, 1986; and/or
- Confirmation that the medical practitioner has been appointed to the post of consultant psychiatrist and is gives evidence to, or prepares reports/assessments for, the court under Part III of the Mental Health (Northern Ireland) Order 1986; and/or
- Confirmation that the medical practitioner has been appointed to the post of Sessional Professional Officer for RQIA.

And

- Confirmation that the medical practitioner is registered with the General Medical Council (GMC) and holds a current licence to practise;
- Confirmation that the medical practitioner is on the Specialist Register of GMC;
- Confirmation that the medical practitioner is actively participating in activities relating to annual whole-practice appraisal and medical revalidation;

- A copy of the medical practitioner's RQIA e-Learning modules 1-4 on the Mental Health (Northern Ireland) Order 1986, within two years prior to application for SOAD status;
- A copy of the medical practitioner's Access NI Enhanced Disclosure Certificate (initial applications only) countersigned by RQIA;
- A Referee Form which should be completed by a Medical Director (or nominated senior medical leader);
- A copy of the medical practitioner's current insurance certificate of indemnity, providing adequate cover to undertake work in respect of the functions of the Mental Health (Northern Ireland) Order 1986.