



Department of Health & Social Care

Guidance

The NHS Choice Framework: what choices are available to me in the NHS?

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1. Your NHS care: what choices are available to you

The government is committed to giving patients greater choice and control over how they receive their healthcare, and to empowering patients to shape and manage their own health and care.

This framework sets out some of the choices available to you in the NHS.

It explains:

- when you have choices about your healthcare
- where to get more information to help you choose
- how to complain if you are not offered a choice

In some circumstances you have legal rights to choice and you must be given these choices by law. In other circumstances you do not have a legal right to choice but you should be offered choice about your care, depending on what is available locally. This is what the government has asked healthcare professionals to do.

The entitlements to choice set out in this guide reflect those in the [NHS Constitution](#). The constitution establishes the principles and values of the NHS in England. It sets out:

- rights that patients, public and staff are entitled to
- pledges that the NHS is committed to achieve
- responsibilities, which the public, patients and staff owe to one another to ensure that the NHS operates fairly and effectively

This guide applies to people of all ages in England.

2. Choosing your GP and GP practice

Your choices

You can:

- choose which GP practice you register with
- ask to see a particular doctor or nurse at the GP practice.

Your practice must make every effort to meet your preferences to see the doctor or nurse you have asked for, although there are some occasions when this might not be possible, as outlined below.

You may wish to register with a GP practice that is not close to home but is more convenient for you to access. However, you might not be able to access all out-of-hours services or be able to have a home visit if you live outside of the practice's boundaries. We recommend you discuss this with the GP practice before registering.

You may also wish to access primary care services digitally. Digital-first primary care is an exciting innovation in general practice delivery which will mean that all patients will have the right to web and video consultations by April 2021.

Are these legal rights?

Yes, but there are some circumstances in which you may not be able to choose, which are set out below.

When you may not have a choice

A GP practice must accept you onto its patient register and provide you with a choice of nurse or doctor unless it has the following reasonable grounds for not doing so:

- the practice might not be taking on new patients because it is at maximum capacity
- the practice might not be accepting patients who live outside its practice boundary
- because of your particular circumstance, due to an issue of safety, or clinical need, it might not be appropriate to register with a GP practice outside the area where you live
- a particular nurse or doctor may be on leave, or be at full capacity with no available appointments
- you may not be able to see your chosen doctor or nurse if you require an urgent appointment

If a GP practice is not able to accept you onto its patient register it must inform you of the reasons for this.

Information and support to help you choose

You can find information on GP practices by visiting the [NHS homepage](#) and using the 'NHS services' tool.

See also section 11 of this framework: [Getting more information to help you choose](#)

What you can do if you're not offered these choices

You should be given a reason if you are unable to register with the GP practice you have chosen, or if you are unable to see a particular GP or nurse at the practice.

If you are dissatisfied with the reason, or you are not given a reason, you should first raise this with the GP practice. They may be able to resolve the issue quickly and no further action will be required.

If you are then still dissatisfied with the outcome of this, you can complain directly to NHS England. See [how to contact NHS England in section 13](#) of this guide.

If NHS England is unable to resolve the complaint to your satisfaction, you have the right to take your complaint to the independent Parliamentary and Health Service Ombudsman. The ombudsman is the final stage of the complaints system. Find out [how to contact the ombudsman in section 13](#) of this guide.

Exercising these choices in practice

This example is fictional and is intended to demonstrate how choices may work in practice in the NHS. It does not refer to real people or situations.

Sarah has recently moved house and would like to register with a new GP practice. She goes on the NHS website to search for GP practices in her area. She sees that there is a practice a 20-minute walk away from her house that has good quality ratings. However, due to health complications Sarah has restricted mobility and finds it hard to walk long distances. She sees that there is another practice an hour's walk away from her house but that is situated directly on her bus route. Sarah speaks to a friend who she knows is registered with this particular practice and hears that the quality of service is very good and that it is also possible to book appointments online, rather than on the phone or in person. She decides that this would be more convenient and chooses to register with this practice, rather than the closest one to her home.

Sarah feels more comfortable when she is assessed by a female GP. She speaks to her friend who also uses the practice and who tells her that Dr Najim is very friendly and professional. When she books her first appointment, Sarah requests to be seen by Dr Najim. The practice makes every effort to meet this preference, offering her a number of available appointments with Dr Najim, as well as a number of available appointments with other GPs at the practice in case these times are more convenient for her. Sarah reviews the options and chooses to take an earlier appointment with another female GP at the practice, as it will be easier for her to make this time.

3. Choosing where to go for your first appointment as an outpatient

Your choices

You can:

- decide which NHS organisation you would like to receive care from as an outpatient
- choose the clinical team who will be in charge of your care within an organisation

These choices only apply at the point of referral.

Are these legal rights?

Yes, but there are circumstances in which you may not choose. These are set out below.

When you may not have a choice

You do not have legal rights to choose if you are:

- already receiving care and treatment for the condition for which you are being referred and this is an onward referral
- using emergency services
- in need of emergency or urgent treatment, such as cancer services where you must be seen in a maximum waiting time of 2 weeks
- a prisoner, on temporary release from prison, or detained in ‘other prescribed accommodation’ (such as a court, secure children’s home, secure training centre, an immigration removal centre or a young offender’s institution)
- someone who is held in a hospital setting under the Mental Health Act 1983
- a serving member of the armed forces
- using maternity services (see section 6: [‘Choosing maternity services’](#) for more detail)
- referred to services commissioned by local authorities, as your choice will depend on what has been put in place locally

Information and support to help you choose

You can talk to your GP, dentist or optometrist who is referring you for more information. You can also find out more information on the [NHS website](#) about the organisations you can choose from. This is a national website for patients.

You can search for services near you by using the ‘NHS services’ tool on the home page, or you can use the search function to find information on specific hospitals and clinics.

If you need help choosing where to go for your first appointment because you have a disability, a mental health condition, or any other impairment, talk to the healthcare professional that referred you. This will make sure that your additional needs are considered. See [section 12 for more information on requesting reasonable adjustments](#).

See also section 11 of this framework: [Getting more information to help you choose](#)

What you can do if you're not offered these choices

If you feel that you have not been offered these choices you should first speak to your GP, dentist or optometrist.

If you still feel that you have not been offered choice, you may wish to complain to your local Clinical Commissioning Group (CCG) as they must ensure that choice is offered to you.

CCGs are the organisations responsible for organising the delivery of the majority of NHS services in England. Each CCG is responsible for a specific geographical area.

[For details on how to contact your local CCG see section 13](#) of this guide.

If you feel you have been denied your legal entitlement to choose where to go for your first outpatient appointment, you may also wish to raise concerns with NHS Improvement. NHS Improvement can provide advice about choice issues and may be able to resolve individual issues. This could involve directing you to the appropriate place to make your concerns known or could involve NHS Improvement directly engaging with relevant parties. [For more information on raising concerns with NHS Improvement on issues relating to patient choice see section 13](#) of this guide.

You are also entitled to take your complaint to the independent Parliamentary and Health Service Ombudsman. The ombudsman is the final stage of the complaints system. [For details on how to contact the ombudsman see section 13](#) of this guide.

Exercising these choices in practice

These examples are fictional and intended to demonstrate how choices may work in practice in the NHS. They do not refer to real people or situations.

Choosing the organisation that provides your care:

Richard has been suffering from pain when he moves his knee. His GP decides he should be referred to a consultant for further investigation for a possible knee replacement. She makes sure that Richard is aware of his legal entitlement to choose to receive his treatment in any hospital appointed by the NHS to provide this service: including some private hospitals at no greater cost to the NHS.

She asks him what factors are important to him in choosing where to go for treatment and then uses the online NHS e-Referral Service to show him the choices available both in the surrounding area and in the city where his daughter lives, as Richard would like her to be able to visit him easily if he requires treatment and will spend recovery time in hospital. His GP talks through the information on each choice, including waiting times for first appointment and location of the hospital, and creates a shortlist of options for Richard to take home with him and make a decision.

She also tells him about the search tools on the NHS website that can be used to look up information on hospitals and their consultants. The GP Practice gives him log-in details to access the NHS e-Referral Service and book an appointment with his chosen hospital.

Richard uses the NHS website to look up the quality ratings of the hospitals on his shortlist and to see how their consultants perform for the procedure that the GP considers he might need. He also uses the NHS website to see how different hospitals compare, including how patients themselves view outcomes and details on consultants' experience. He takes the opportunity to talk to his daughter about choosing a hospital near where she lives. After considering the information available, Richard chooses an option that has both a hospital and a consultant that he likes. He uses his log in details to access the NHS e-Referral Service to select his hospital and book his first outpatient appointment.

Choosing the clinical team responsible for your care:

Fatima is suffering from a mental health condition and visits her GP to be referred for treatment. She would like to exercise her entitlement to choose a named healthcare professional, whose team will then be responsible for her care. She has heard of a particular consultant that she would like to go to for her treatment and discusses this with her GP.

Her GP uses the NHS e-Referral Service to search for this named consultant and show Fatima the list of organisations and locations where the consultant works. He creates a shortlist from these options and gives her log-in details for the NHS e-Referral service, so she can do some research at home before deciding which one she would like to choose for her first outpatient appointment.

Fatima uses the NHS website to research each organisation before choosing one that is close to where she lives and has a number of convenient available appointments. A close friend of hers has also received treatment at this organisation and tells her that the quality of care is good. Fatima logs into the NHS e-Referral Service, selects her chosen organisation and books an appointment. She will be treated by her chosen healthcare specialist or a member of their team.

4. Asking to change hospital if you have to wait longer than the maximum waiting times

Maximum waiting time is usually 18 weeks, or 2 weeks to see a specialist for cancer.

Your choices

You can ask to be referred to a different hospital if:

- you have to wait more than 18 weeks before starting treatment for a physical or mental health condition, if your treatment is not urgent
- you have to wait more than 2 weeks before seeing a specialist for suspected cancer

Waiting times can vary between hospitals and you have the right to be referred to another hospital that may be able to start your treatment sooner.

Waiting times start from the day the hospital receives the referral letter, or when you book your first appointment through the NHS e-Referral Service.

Are these legal rights?

Yes, but there are exceptions. These are set out below.

When may I not ask to be referred to a different hospital?

If you have to wait for more than 18 weeks for non-urgent treatment to start, you do not have a legal entitlement to ask to be referred to a different hospital if:

- the services you are using are not led by a medical consultant
- you choose to wait longer for your treatment to start
- delaying the start of your treatment is in your best interests. For example, if you need to lose weight or stop smoking or for other personal medical reasons before treatment can start
- you fail to attend appointments which you had chosen from a set of reasonable options
- you decide not to start, or you decline, treatment
- a doctor has decided that it is appropriate to monitor you for a time without treatment
- you cannot start treatment for reasons not related to the hospital, for example, you are a reservist posted abroad while waiting to start treatment
- your treatment is no longer necessary
- you are on the national transplant list
- you are using maternity services ([see: Choosing maternity services in section 6](#))

If you have to wait for more than 2 weeks for an appointment to a cancer specialist, you do not have a legal right to ask to be referred to a different hospital if:

- you did not go to an appointment that you agreed to go to
- you have declined treatment

Information and support to help you choose

If you want to change hospital, whether you are waiting for consultant-led treatment for a physical or mental health condition, you may contact the hospital providing your treatment or the CCG that is arranging your treatment.

CCGs must provide advice or assistance to patients who have waited or will wait longer than 18 weeks for consultant-led treatment. They must also provide advice or assistance to patients who have waited or will wait more than 2 weeks for their first appointment if your GP thinks it is possible you have cancer. [For details on how to contact your CCG see section 13](#) of this guide.

If you require additional assistance because of a disability, a mental health condition or any other impairment, talk to the organisation responsible for arranging your care and treatment to ensure that these additional needs are taken into account when you ask to change hospital. [See section 12 for more information on requesting reasonable adjustments.](#)

See also section 11 of this framework: [Getting more information to help you choose](#)

What you can do if you're not offered these choices

If you are unhappy with the handling of your case, it is often helpful to speak to the organisation responsible for arranging your care and treatment in the first instance.

If you feel that the organisation responsible for arranging your care and treatment has not taken all reasonable steps to ensure you are offered alternative provision, in most cases you should complain to your CCG as they must take all reasonable steps to ensure that an alternative provider is offered to you. For details on how to contact your CCG see [section 13](#) of this guide.

If you have been referred for a consultant-led specialist service, you should complain to NHS England as in this case they are responsible for taking all reasonable steps to ensure an alternative provider is offered to you. [For details on how to contact NHS England see section 13](#) of this guide.

If they are unable to resolve the complaint to your satisfaction, you are entitled to take your complaint to the independent Parliamentary and Health Service Ombudsman. The ombudsman is the final stage of the complaints system. [For details on how to contact the ombudsman see section 13](#) of this guide.

Exercising these choices in practice

This example is fictional and is intended to demonstrate how choices may work in practice in the NHS. It does not refer to real people or situations.

Emily has been referred by her GP for non-urgent treatment by a consultant in a hospital of her choice. The hospital has written to her with details of her appointment and has pointed out that she has a right to ask to change hospital if she has to wait longer than 18 weeks for treatment. Emily subsequently becomes concerned that she will not be seen by the consultant within 18 weeks of her initial referral. She contacts the hospital that will be providing her treatment to tell them that, if the hospital cannot treat her within the maximum waiting time expected, she would like to ask to change hospital and be seen sooner elsewhere.

The hospital provides Emily with information on other organisations that could treat her sooner than her original appointment. There are a number of suitable organisations for this, so she is offered a choice between these. She uses the NHS website for further information about each hospital to help her decide which one she would like to choose. Emily selects a suitable alternative hospital and her transfer is sent to them by the hospital that she had originally chosen. She does not need to go back to her GP for this transfer and the new organisation responsible for her care will make every reasonable effort to ensure that she is treated within 18 weeks of when her GP first referred her for treatment.

5. Choosing who carries out a specialist test

Your choices

If your healthcare professional decides you need a specialist test, you may choose to have this carried out by any organisation that provides NHS services.

Is this a legal right?

Yes, as long as the test has been requested by your healthcare professional and it will be your first appointment as an outpatient for the condition for which you are being referred.

If you have already had your first outpatient appointment, your doctor may decide you need a test. In this case, you may be offered a choice about who carries out that test. However, you do not have a legal entitlement to choose at this stage.

When you may not have a choice

You do not have the right to choose if you:

- are a prisoner, on temporary release from prison, or detained in ‘other prescribed accommodation’ (eg a court, a secure children’s home, a secure training centre, an immigration removal centre, and a young offender institution)
- are detained in a secure hospital setting
- are a serving member of the armed forces
- are detained under the Mental Health Act 1983
- are using maternity services ([see: Choosing maternity services in section 6](#))
- need a test urgently, or if you have been admitted to hospital.

In addition, you do not have the right to choose if you are referred to:

- services commissioned or provided by local authorities as your choice will depend on what has been put in place locally
- services for suspected cancer

Information and support to help you choose

You can get more information from your healthcare professional when you are being referred for the test.

You can find information about the hospitals and clinics you can choose from on [the NHS homepage](#). You can search for services near you by using the ‘NHS services’ tool on the home page, or you can use the search function to find information on specific hospitals and clinics.

If you require additional assistance because of a disability, a mental health condition or any other impairment, talk to your healthcare professional to ensure that these additional needs are taken into account when you are choosing who will carry out your test. [See section 12 for more information on requesting reasonable adjustments.](#)

See also section 11 of this framework: [Getting more information to help you choose](#)

What can I do if I am not offered this choice?

If you feel that you have not been offered this choice you may find it helpful to speak to the healthcare professional who has requested the test in the first instance.

If you still feel that you have not been offered choice, you may wish to complain to your local CCG. CCGs must publish their complaints procedure. [For details on how to contact your CCG see section 13](#) of this guide.

If you have been referred for a consultant-led specialist service, you should complain to NHS England as in this case they are responsible for taking all reasonable steps to ensure an alternative provider is offered to you.

[For details on how to contact NHS England see section 13](#) of this guide.

If your CCG is unable to resolve the complaint to your satisfaction, you have the right to take your complaint to the independent Parliamentary and Health Service Ombudsman. The ombudsman is the final stage of the complaints system. [For details on how to contact the ombudsman see section 13](#) of this guide.

Exercising this choice in practice

This example is fictional and is intended to demonstrate how choices may work in practice in the NHS. It does not refer to real people or situations.

Jakub's GP decides he needs to be referred for a specialist test. His GP asks him whether he would like to exercise his legal right and choose the organisation that carries out this test. He explains to Jakub that he can choose any organisation that has been appointed by the NHS to provide this service anywhere in England.

His GP explains that there are a number of clinically appropriate organisations that can carry out the test but that they are in different locations, can offer appointments with different waiting times and have varying quality ratings on the NHS website. The GP uses the NHS e-Referral Service to show Jakub the different options and asks what is most important to him about having the tests carried out.

Jakub decides that he is happy to go further away from home for his test, if it means he can have his tests sooner than he could if he were to choose a provider closer to where he lives. His GP gives him a list of options highlighting their waiting times and Jakub uses NHS website at home to research the quality ratings of each option. He chooses the organisation with the shortest waiting time, after being satisfied by its quality rating on the NHS website.

Jakub uses the log-in details for the NHS e-Referral Service that his GP gave him and books his appointment online. He subsequently receives his appointment letter to attend for the tests at his chosen organisation. He keeps the letter safe, makes a note in his diary and ensures that he keeps his appointment, to help ensure that he does not cause delay in receiving any subsequent treatment he might need and also avoid costing the NHS money when patients do not attend their appointments.

6. Choosing maternity services

Your choices

You can expect a range of choices in maternity services, informed by what is best for you and your baby.

When you find out that you are pregnant you should be able to choose which midwifery service you attend from a range of options. To access this service you can:

- go directly to your chosen midwifery service: you can use the NHS website to find out more about the different services that are available and then self-refer
- go to your GP and ask to be referred to your chosen midwifery service: your GP should provide you with information about the different services that are available

While you are pregnant you should be able to choose to receive antenatal care from:

- a midwife
- a team of maternity healthcare professionals, including midwives and obstetricians. This will be the safer option for some women and their babies

When you give birth you should be able to choose to do so:

- at home, with the support of a midwife
- in a midwife-led facility (for example, a local midwife-led unit in a hospital or birth centre), with the support of a midwife
- in hospital with the support of a maternity team. This type of care will be the safest option for some women and their babies

After going home you should be able to receive postnatal care:

- at home
- in a community setting, such as a Sure Start Children's Centre

Are these legal rights?

No. The choices you have will depend on what is put in place for you by your CCG. We recommend choice is provided where possible with such services, but this is not a legal right.

When you may not have a choice

Although these are the choices that you should be able to expect, they will depend on what your CCG can offer and what is clinically appropriate for you and your baby.

You may not choose these options if you need urgent or emergency care.

Information and support to help you choose

Your midwife will be able to give you information, advice and support to help you decide.

You can also access the [Start4Life Information Service for Parents](#). This is a digital service that enables parents-to-be and new parents to sign up to receive regular free emails and videos offering high quality NHS advice and information to both mothers and fathers based on the different pregnancy stages, birth and beyond.

The [NHS pregnancy and baby pages](#) will provide you with all the necessary information you require, particularly the options on where to give birth.

In addition, there are a number of charitable and voluntary organisations that can help you decide what to do. These include:

- [National Childcare Trust \(NCT\)](#) or call their Helpline: 0300 330 0700
- [Which? Birth Choice](#)
- [Association for Improvements in the Maternity Services \(AIMS\)](#) or email helpline@aims.org.uk or call the Helpline: 0300 365 0663 for advice from volunteers

If you require additional assistance because of a disability, a mental health condition or any other impairment, talk to your midwife or GP to ensure that these additional needs are taken into account when you are planning your maternity care. [See section 12 for more information on requesting reasonable adjustments.](#)

See also section 11 of this framework: [Getting more information to help you choose](#)

What you can do if you're not offered these choices

If you feel that you have not been offered these choices you should first speak to your GP, midwife or head of midwifery. They are responsible for telling you about the choices available to you.

If you still feel unsatisfied with the handling of your case, you may wish to contact your local CCG and discuss the choices available to you. If you are unhappy you are able to make a complaint to the CCG. [For details on how to contact your CCG see section 13](#) of this guide.

If your CCG is unable to resolve the complaint to your satisfaction, you have the right to take your complaint to the independent Parliamentary and Health Service Ombudsman. The ombudsman is the final stage of the complaints system. [For details on how to contact the ombudsman see section 13](#) of this guide.

Exercising these choices in practice

This example is fictional and is intended to demonstrate how choices may work in practice in the NHS. It does not refer to real people or situations.

Valentina finds out she is pregnant for the first time. She works full-time and decides it would be most convenient for her to receive her antenatal care in a midwife-led unit near her place of work, rather than at the hospital nearest to her home. Although away from where she lives, her place of work is still within the area for which her CCG is responsible. Valentina uses NHS website to research the locations, quality ratings, and other information about midwife-led units and self-refers to one near her place of work.

As her pregnancy progresses, she decides that she would like to give birth at home. She has discussed this with her midwife who has explained the options and risks involved. In her third trimester, Valentina finds out that her baby is in the breach position. She discusses this with her midwife and an obstetrician and together they review her personalised care plan. This includes a common procedure which involves turning the baby into the head first position. The pregnancy continues well and Valentina, her midwife and her doctor review her personalised care plan again. Valentina decides, with the support of her obstetrician and midwife, to give birth at a midwife-led unit near her home.

Before she gives birth, Valentina discusses her postnatal care with her midwife, who explains the different options put in place by her CCG. She could choose to have her postnatal care at home, or she could access care at a local Children's Centre. After speaking with her midwife and understanding the available options, Valentina chooses to receive her postnatal care at home. After the birth, she discusses with her midwife what happened during the pregnancy and birth, and confirms her decision to have her postnatal care at home.

7. Choosing services provided in the community

Your choices

You might be able to choose who you see for services provided in the community, such as:

- physical therapy, such as physiotherapy
- adult hearing services
- psychological therapies, such as counselling
- podiatry (foot) services

Different choices are available in different areas.

Is this a legal right?

No. The choices you have will depend on what is put in place for you by your CCG. We recommend choice is provided where possible with such services, but this is not a legal right.

When you may not have a choice

You are not generally able to choose from services outside of your CCG's area, although you may be able to where special arrangements are in place to support this. You can [find more information about your CCG and how to find out the area they cover in section 13](#) of this guide.

Information and support to help you choose

You can find out which services there are in your area by speaking to your GP or contacting your CCG.

You can also find information by visiting the [NHS homepage](#) and using the 'NHS services' tool on the home page.

If you require additional assistance because of a disability, a mental health condition or any other impairment, talk to your GP or healthcare professional to ensure that these additional needs are taken into account when you are choosing your community services. See [section 12](#) for additional information on requesting reasonable adjustments.

What can I do if I am not offered this choice?

If you are unhappy with the handling of your referral, you should speak to the GP or the healthcare professional who referred you in the first instance as they should offer you the choices available.

If they are unable to resolve the issue, you may wish to complain to your local CCG. CCGs must publish their complaints procedure. [For details on how to contact your CCG see section 13](#) of this guide.

If your CCG is unable to resolve the complaint to your satisfaction, you have the right to take your complaint to the independent Parliamentary and Health Service Ombudsman. The ombudsman is the final stage of the complaints system. [For details on how to contact the ombudsman see section 13](#) of this guide.

8. Choosing to take part in health research

Your choices

You can take part in approved health research, for example clinical trials of medicines relating to your circumstances or care.

You are free to choose whether you take part in any research. You do not have to take part if you do not want to.

Is this a legal right?

No.

When you may not have a choice

You cannot take part in research if:

- there is no research relating to your circumstances or care
- you do not meet the requirements for a particular study
- if a study is already at capacity

Information and support to help you choose

For information to help you decide whether or not to take part in research:

- the NHS homepage explains why the NHS carries out [research and the different types of research](#) there are
- [Healthtalkonline](#) explains what clinical trials are and why we need them

- National Institute for Health Research explains [how patients can help with research](#).

For information on what research is currently under way:

- Visit [Be Part of Research](#)

What can I do if I am not offered this choice?

The healthcare professional who is providing your care (for example, your hospital doctor, your GP or nurse) will be able to advise you if there is currently any appropriate research, so you should speak to them in the first instance. CCGs are also required to promote patients' recruitment to and participation in research. [For details on how to contact your CCG see section 13](#) of this guide.

If you're unhappy with the handling of your case (for example, if you feel like you are being prevented from taking part in health research without reasonable grounds for doing so) you may wish to complain to NHS England. [For details on how to contact NHS England see section 13](#) of this guide.

If NHS England is unable to resolve the complaint to your satisfaction, you have the right to take your complaint to the independent Parliamentary and Health Service Ombudsman. The ombudsman is the final stage of the complaints system. [For details on how to contact the ombudsman see section 13](#) of this guide.

9. Choosing to have a personal health budget

Your choices

You may be able to choose to have a personal health budget which you can use to access some NHS services. A personal health budget is an amount of money to support your health and care needs. They allow for greater flexibility in meeting these needs and are particularly useful for those who have the following care needs:

- adults who receive NHS Continuing Healthcare funding or continuing care in the case of children and young people
- care funded jointly by NHS and social care
- learning disability
- those with mental health needs
- end-of-life care services
- wheelchair services

There are plans to extend these rights further, so more people can benefit from the increased choice a personal health budget can provide.

At first, we will be extending these legal rights to those eligible for s.117 aftercare services, and those eligible for wheelchair services.

You will be given the choice about how you want the money to be managed. This could be directly managed by you, a third party, or the CCG.

Is this a legal right?

Yes, but only currently for adults eligible for NHS Continuing Healthcare and children who are eligible for continuing care (with some exceptions). We intend to expand this legal right shortly. More information about [NHS Continuing Healthcare and continuing care](#) is available on the NHS website.

CCGs can also offer personal health budgets on a voluntary basis to those that they consider may benefit, although this is not a legal right. All CCGs should have developed their local offer of who can request a personal health budget in their area (beyond those who have the right to have one, as discussed above).

To find out more about personal health budgets in your area please contact your CCG. [For details on how to contact your CCG, see section 13](#) of this guide.

When you may not have a choice

In some cases, people will not be able to directly manage a personal health budget (these are called direct payments). This may be if they lack mental capacity to do so, or have a court order against them. The decision will be made following a discussion with your healthcare professional.

Personal health budgets cannot be used on:

- urgent or emergency care
- GP appointments, medical tests, seeing a consultant or purchasing medication
- alcohol, tobacco, gambling, criminal activity or debt repayment

See the [full list of exclusions](#).

Information and support to help you choose

If you would like more information about personal health budgets in your area you should talk to your GP or healthcare professional, or contact your CCG. [For details on how to contact your CCG see section 13](#) of this guide.

You can also find out more about personal health budgets from:

- NHS England: [personal health budgets](#)
- [Think Local Act Personal](#), where you can also access case studies on how personal health budgets have been used by others

See also section 11 of this framework: [Getting more information to help you choose](#)

What can I do if I am not offered this choice?

Your CCG is responsible for ensuring that you are offered a personal health budget where appropriate. If you are eligible for a personal health budget or feel that you would benefit

from a personal health budget, contact your CCG in the first instance. [For details on how to contact your CCG see section 13](#) of this guide.

If you feel that your CCG has not offered you the choice of having a personal health budget, you should raise this with them in the first instance. This also includes if you feel you should have had more choice about how you access your personal health budget, for example you feel you should have a direct payment and have not been offered this.

If you are refused a request for a statutory personal health budget – you must be given a reason for that decision in writing. On receipt of this decision an eligible person or someone acting on their behalf may require the relevant body to undertake a review of the decision and can provide evidence or information for the relevant body as part of the review.

If your CCG is unable to resolve the complaint to your satisfaction, you have the right to take your complaint to the independent Parliamentary and Health Service Ombudsman. The ombudsman is the final stage of the complaints system. [For details on how to contact the ombudsman see section 13](#) of this guide.

Exercising this choice in practice

This example is fictional and is intended to demonstrate how choices may work in practice in the NHS. It does not refer to real people or situations.

Omar has had a stroke that has severely reduced his mobility, meaning that he must now use a wheelchair and requires full-time care to help him with personal hygiene, to get out of bed, to cook and to take his medication.

Omar is assessed and it is decided that he is eligible for NHS Continuing Healthcare and will have a package of NHS support provided to him outside of a hospital setting. The healthcare professional who is responsible for Omar's care talks to him about his legal right to have a personal health budget and whether or not he would like to have one. She makes it clear that Omar does not have to manage the budget himself if he does not want to and that he has the option of having a personal health budget by asking the NHS or a third-party organisation to manage his budget and arrange care on his behalf.

After discussing the different options with his healthcare professional, Omar decides he would like to have a personal health budget and manage his care in a more flexible and personalised way. He chooses to receive the money as a direct payment into a separate bank account and he will then take responsibility for organising the care that he has agreed in a plan with his healthcare professional.

Omar's healthcare professional explains how much money the NHS would be spending on his care and therefore how much money he has in his budget. Together they plan how that money will be used and agree that Omar will meet his health and wellbeing needs by employing a number of personal assistants to provide the care and support he needs to remain living in his own home, rather than moving into a residential setting.

Omar receives his personal health budget as a direct payment and uses this to employ 4 personal assistants, as set out in his care plan. This gives him continuity of care and control over who he employs and what they do. His personal assistants enable him to continue to be

involved in the board of a local charity and to play dominoes and cards at a local club, which helps to improve his mental health and wellbeing. He meets regularly with his healthcare professional to review his care plan and ensure that it continues to meet his health and wellbeing needs.

10. Choosing to access required treatment in another European Economic Area country

Your choices

The following is subject to change due to ongoing Brexit negotiations.

You have the right to choose, subject to certain conditions, to receive treatment which is normally available to you on the NHS in other countries within the European Economic Area (EEA) (the member states of the European Union, plus Iceland, Liechtenstein and Norway).

This is a legal entitlement set out in the NHS Constitution and in EU law.

Under the EU Directive on patients' rights in cross-border healthcare you are entitled to travel to an EEA country to purchase treatment. If the treatment is medically necessary and the same as or equivalent to a service that you would be eligible to receive under the NHS, you can apply for reimbursement, subject to certain limitations and conditions. If you choose to leave the NHS and access another country's healthcare system, you will be treated under the legislation and standards of that country.

In most cases you would have to pay upfront for healthcare under this route and subsequently may request reimbursement from NHS England for some or all of the costs of this treatment. There may be some cases where you can request that the NHS pays the foreign provider directly.

You are advised to discuss your plans with NHS England or your clinician in advance, to ensure that you will subsequently be able to claim reimbursements for some or all of the costs. Seeking prior authorisation will also ensure that you are aware of all the possible treatment options within the NHS, which might be more convenient for you than going abroad.

If you are unable to access treatment on the NHS without undue delay in your particular case, you must be granted authorisation. Undue delay means that the NHS cannot provide your treatment within the necessary time, based on an objective assessment of your condition by a healthcare professional. This is not linked to the maximum waiting times, covered in [section 4](#) of this guide.

Before going abroad for medical treatment, it is important to get enough information to enable you to make the right choices, including:

- whether you are likely to have any language difficulties
- how much you know about the medical practitioners and clinics you are using
- how your medical notes will be exchanged between medical teams in the UK and abroad

- how your aftercare will be coordinated when you return home
- how you would deal with any complaint or problem if something goes wrong following your treatment (the NHS is not liable for negligence or failure of treatment)

The directive covers treatment provided in state-run hospitals and services provided by private clinics and clinicians.

The directive covers UK patients choosing to be treated in another EEA country. This does not cover patients in England choosing to access treatment in Scotland, Wales or Northern Ireland,

When choice is not available

The directive does not cover:

- social care
- access to and allocation of organs (for transplantation)
- public vaccination programmes against infectious diseases

Information to support your choice

For further information you can visit [the NHS website](#).

For support in making a decision on accessing treatment in the EEA, contact your CCG or NHS England to discuss the choices available. [Find their contact details in section 13](#) of this framework.

See also section 11 of this framework: [Getting more information to help you choose](#)

What you can do if you're not offered this choice

If you wish to have your treatment in another EEA country, your GP, dentist or local commissioner will outline the choices that are available to you. If you do not feel you have been offered this choice you should speak to them in the first instance.

If you wish to complain about the handling of your case (for example, refusal of reimbursement for treatment in the EEA, incorrect calculations, or restrictive authorisation) you can complain to your CCG. [For details on how to contact your CCG see section 13](#) of this guide.

If your CCG is unable to resolve the complaint to your satisfaction, you have the right to take your complaint to the independent Parliamentary and Health Service Ombudsman. The ombudsman is the final stage of the complaints system. [For details on how to contact the ombudsman see page section 13](#) of this guide.

Exercising this choice in practice

This example is fictional and is intended to demonstrate how choices may work in practice in the NHS. It does not refer to real people or situations.

Daniel requires a surgical procedure on his hip. He decides he would like to explore the option of receiving this treatment abroad and claiming reimbursement from the NHS so that he can recover near his son who lives in France.

Daniel discusses this with his GP to find out more information. His GP explains the options available to him in the UK and the responsibilities he will have if he chooses to receive his treatment abroad, such as choosing a suitable provider, booking travel and accommodation and ensuring that he has adequate health and travel insurance in place.

They also discuss how Daniel will deal with potential language barriers, how his medical records will be transferred and how he can complain if something goes wrong. His GP explains that Daniel will have to pay for this treatment up front and claim reimbursement from the NHS. This reimbursement will be calculated on the basis of how much it would have cost Daniel's CCG to treat him for the same condition in England.

After considering all of these factors, Daniel decides that he would like to proceed with receiving his required treatment in France. Daniel is responsible for arranging this treatment himself but his GP remains available to provide advice and information to support him as he researches his options and makes his choice.

11. Getting more information to help you choose

There are lots of ways to get general information to help you make the right choice:

- visit the [NHS homepage](#): this website can help you when making important health decisions, including the ability to find local services. It provides tools and resources that help you look at your options and make informed choices
- The [NHS Constitution](#) tells you what you can and should expect when using the NHS. An easy read version of the NHS Constitution is also available. Audio and Braille versions are available on request
- The [Care Quality Commission](#) checks many care organisations in England to ensure they are meeting national standards and then shares its findings with the public so you can make informed choices. You can also call its National Customer Service Centre on 03000 616161 or contact them using their online form
- [Healthwatch](#) is an independent consumer champion for health and social care in England. It operates as Healthwatch England at national level and as local Healthwatch at local level. They can help you to make a complaint about NHS health and social care services and will be able to provide more information about local services

12. What should I do if I require a reasonable adjustment?

The NHS Constitution sets out the NHS commitment to benefiting the whole community, making sure that nobody is excluded, discriminated against or left behind. This means that the individual is at the heart of the NHS and services must be coordinated around and tailored to the needs and preferences of patients, their families and their carers. As a user of the NHS you have the right to receive care and treatment that is appropriate to you, meets your needs and reflects your preferences.

According to the Equality Act 2010 and the public sector equality duty, all public authorities are required to make reasonable adjustments for people with disabilities. If you require a reasonable adjustment or additional assistance because of a disability, a mental health condition or any other impairment, talk to your GP, or the healthcare professional who is responsible for arranging your care, as they must ensure that these additional needs are taken into account when you are making your choices. You should be provided with the information and support you need to choose to receive your care in a setting that is best for your individual health and wellbeing needs.

All organisations are required to meet the Accessible Information Standard to ensure that everybody has access to information and is able to communicate the things that are important to them. There is more information about the [Accessible Information Standard](#) and what it means for you on the NHS website, where guidance is published in standard and easy read format.

13. Contacting the organisations mentioned in this guide

If you do not feel that you have been offered the choices outlined in this guide, in most cases it might be helpful to speak to the healthcare professional responsible for your treatment in the first instance.

However, if you do not feel comfortable doing this or if you are unsatisfied with the outcome of this conversation, you may wish to complain to another organisation.

Each section of this guide tells you who you should speak to if you do not feel that you have been offered the choices outlined for that service. Details of how to contact these organisations are set out below.

Contacting your local clinical commissioning group:

CCGs are responsible for organising the delivery of the majority of NHS services in England. Each CCG is responsible for a specific geographical area. They must publish their complaints procedure. If they agree with your complaint, the CCG must make sure that you are offered a choice for that health service.

To contact your local CCG:

- enter your postcode into the [find clinical commissioning group services](#) tool
- ask your GP practice as they can tell you how to contact your local CCG
- visit [NHS website](#), and enter your postcode under 'Find other NHS services' on the homepage. You can search for your CCG by searching for a local services, such as a GP practice. At the bottom of the page for each service it will say which CCG supplied the information.
- They will usually have a phone number, website and email address.

Contacting NHS England:

It is the responsibility of NHS England to ensure CCGs are fulfilling their responsibilities.

To contact NHS England:

- visit the [NHS website](#)
- call the customer contact centre: 0300 311 22 33
- email on england.contactus@nhs.net

Contacting NHS Improvement

NHS Improvement's priority is to offer support to providers and local health systems to help them improve. For issues relating to choosing where you go for your first appointment as an outpatient, you may wish to complain to NHS Improvement.

For more information on making a complaint to NHS Improvement on issues relating to patient choice:

- visit the [NHS Improvement website](#)
- call the enquiries team on 0300 123 2257
- email nhsi.enquiries@nhs.net

Contacting the Parliamentary and Health Service Ombudsman:

If you are unhappy with the decision from the NHS service provider, the CCG or NHS England you have the right to complain to the independent Parliamentary and Health Service Ombudsman. The ombudsman is the final stage in the complaints system and you should use other complaints processes before using the ombudsman.

To contact the ombudsman:

- visit the [ombudsman website](#)
- call the helpline: 0345 015 4033
- use the textphone (Minicom): 0300 061 4298
- text 'call back' with your name and your mobile number to 07624 813 005. You will be called back within one working day during office hours (Monday to Friday, 08:30am to 5:30pm)

Contacting your local advocacy service:

In addition to the above, you can contact an NHS complaints advocacy service if you have concerns about your right to choose.

Contact your local [Healthwatch](#) to find out your local advocacy service.