

Private Consultants and Shared Care Prescribing

What happens when you see a Consultant privately?

We understand that some patients will opt to receive some or all of their treatment privately, and we support your right to do so.

However, to prevent any misunderstanding we would like to take this opportunity to explain how the NHS and General Practice work alongside private providers of care. This document describes what you can expect to happen if you see a doctor privately.

What do I need to do?

For patients making use of health insurance e.g. Bupa

Your GP will write an open referral letter if they feel this is appropriate. The letter will be available to collect from reception or can be emailed to you, if you prefer. This will include any relevant medical details about you and details of the reason for the referral. We would encourage you to wait until you have this letter before making an appointment with your chosen doctor, as the details within it will help the doctor you see.

Please note: if an insurance company requests that an additional form is completed, you may be charged a fee for this additional non-NHS work.

For patients who do not have a health insurance policy

If you do not have health insurance and wish to book directly with a private clinic, you do not require a letter and can arrange the appointment as you wish. You should contact the consultant's team or your private health care provider or insurer to organise an appointment. Should you have any questions regarding your appointment you should contact them directly.

Seeing the consultant

What happens if you need a test or procedure?

If the consultant thinks that you need any tests - including blood tests - or a surgical procedure, then the consultant is responsible for:

- Arranging the tests and any medications that might be needed prior to the test,
- Explaining how and when you will receive a date for the test, and what to do if the date is not suitable for you. **Please note:** you will be required to fund these tests yourself.
- Presenting your results to you and explaining what they mean. This may be via letter or a further face to face appointment.
 - Please do not contact the practice to discuss the results of tests organised by other doctors. It is the consultant's responsibility to discuss this with you. The practice may not have access to the results, or be in a position to interpret them.

What happens if I need new medication?

The consultant might suggest prescribing new medication for you, or might suggest changes to the medication that you are already taking.

- Your private consultant will be responsible for giving you the first prescription of any new medication that you need to start taking straight away.
 - They may need to continue prescribing until the condition is stabilised.
Please note - if you take a private prescription to an NHS pharmacy you will have to pay the actual cost of the medication rather than the current NHS standard prescription charge. The actual cost of the medication may be more or less than the NHS prescription charge dependent on the medication prescribed.
 - In some cases, your GP may be able to provide subsequent NHS prescriptions for these medications. **This will need to be considered by the practice and is at the discretion of the GPs.** You should NOT assume that we will prescribe these for you.

Prior to this, a full clinic letter from the consultant is required, which is signed by a GMC registered doctor. It must outline the reasons for treatment, explaining the precise details of the prescription; what it is being used to treat; how long the treatment is intended for; and what monitoring or follow up is required before the practice can decide whether we can continue to prescribe.

Please allow at least fourteen days for the letter from the consultant to arrive at the GP Surgery before contacting your GP.

- If a prescription is needed sooner than this you should contact the consultant's team (usually via the secretary) for them to prescribe.

Private consultants may suggest medications to patients which wouldn't normally be prescribed by NHS GPs. In this case, you will need to continue to receive your prescriptions from the consultant. Please contact them directly to organise this.

Prescribing Policy

GPs at Nettlebed Surgery believe that providing the best quality of care to our patients is our top priority. When a prescription is necessary, our main considerations are effectiveness and safety.

In order to prioritise patient safety and the best value to the NHS, we are bound to prescribe from an approved list of medications within the Buckinghamshire, Oxfordshire and Berkshire West (**BOB**), Integrated Care System formulary.

- This is a list of medicines, colour coded according to whether they can be safely prescribed and monitored by GPs (Green); have to be started and stabilised by a hospital doctor (Amber); only be prescribed by a specialist (Red); or, not recommended as safe or effective treatments (Black).

The practice may not be able to issue you with an NHS prescription following a private consultation for the following reasons:

- If the practice considers that there is not a clear clinical indication for the prescription, and that in the same circumstances an NHS patient would not be offered this treatment

- If the private doctor recommends a new or experimental treatment, or recommends prescribing a medication outside of its licensed indication or outside of our formulary recommendations
- If the medication is not generally provided within the NHS
- If the medication is of a very specialised nature requiring ongoing monitoring, which includes medication that we can prescribe on the NHS but requires what is known as a Shared Care Agreement, we may not be able to accept responsibility for prescribing.
- Without a Shared Care Agreement in place with an NHS provider of care we are unable to safely prescribe and monitor certain medication. This includes, but is not limited to what are known as Disease Modifying Drugs, IVF associated medications and those to treat ADHD.
 - We are no longer able to prescribe or monitor the medication used to treat ADHD in adults, as there is no comprehensive local NHS service with whom we can enter a Shared Care Agreement. This, regrettably, includes children who are discharged from CAMHS when they turn 18. This is a commissioning gap in the adult ADHD service, which we hope will be rectified in the future, supported by feedback from patients and GP practices. If you would like to complain to our commissioners to raise awareness and apply pressure on them to prioritise this matter, please direct your feedback to bobicb-ox.palscomplaints@nhs.net
- Please note as a practice we do not accept share care agreements with “GenderGP” as they are not GMC registered.

If we are unable to issue an NHS prescription you can still obtain the medication recommended via a private prescription from the consultant you have seen. We would recommend that you investigate the cost of this and associated monitoring before proceeding.

What happens if I need to transfer my care back to the NHS?

If after seeing the Consultant privately you want to be back under NHS care, and national regulations allow for you to transfer back:

- This transfer ideally needs to be done by the private Consultant who is overseeing your care but if this is not possible please request that your consultant writes directly to the practice to request this. Due to NHS waiting times, you may have to continue paying under the private care whilst waiting to be accepted under NHS care.