

# LONG FURLONG MEDICAL CENTRE

## PATIENT INFORMATION – PRIVATE REFERRALS

### Private Referral FAQs

#### **Why do GPs sometimes charge fees?**

The Government's contract with GPs covers costs for NHS work. However, more and more GPs are being asked to do additional non-NHS work. This could be life assurance or income protection reports, holiday insurance certificates, reports for health clubs certifying people are fit to exercise, private sick notes (issued within the first 7 days of illness) and many, many more. When a GP signs a certificate or completes a report, it is a professional duty that (s)he checks the accuracy of such information. Even the simplest of forms may require a doctor to check a patient's entire medical record.

#### **What happens when you see a consultant privately?**

We understand that some patients will choose to have some or all 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.

The information below explains what you can expect to happen if you see a consultant privately.

#### **What do I need to do?**

##### **Patients using health insurances e.g., Bupa**

Your GP will write a referral letter if they feel this is appropriate, and it will be available to collect from reception, or can be emailed to you (please ensure you confirm your email address with the practice if you wish to use this option). The referral letter will include any relevant medical details about you, and we would encourage you to wait until you have this letter before making an appointment, as the details within it will help the consultant you book to see.

**Please note** – if an insurance company requires a specific form to be completed you may be charged for this additional work.

##### **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 an appointment yourself. Should you have any questions regarding your appointment you should contact them directly.

## Seeing the consultant

### What happens if I need a test or procedure?

If the consultant thinks that you need any tests, including blood tests or a surgical procedure, they are responsible for:

- Arranging tests and any medications that might be needed prior to the test, as well as explaining how and when you will receive a date for the test and what to do if the date is unsuitable.
- Giving you your results and explaining what they mean. This may be via a letter or a further face to face appointment.

GP practices are being asked to do an increasing amount of blood monitoring and other procedures for private consultations and the GP is expected to take responsibility for the result. Due to increasing demands within primary care we are unable to do this unfunded work. In the future if we receive a request from a consultant asking for us to take on blood monitoring, we will write back to them (with a copy to the patient) asking them to make alternative arrangements for their patient.

Please do not contact the practice to discuss the results of the tests organised. It is the consultant's responsibility to discuss them with you and the practice will not have access to them.

### What happens if I need new medication?

The consultant may suggest prescribing new medication or make changes to the medication you are already taking. They will be responsible for giving you the first prescription of any new medication that you need to start taking.

**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, which will be dependent on the medication prescribed.

In some cases the practice may be able to continue to prescribe these medications on an NHS prescription. This will need to be considered by the practice and is at the discretion of the GP. Prior to this, a clinic letter from the private consultant is required, outlining the reasons for treatment, explaining the precise details of the prescription, what it is being used for, how long the treatment is intended for and what monitoring or follow up is required before the practice can decide whether to continue to prescribe.

**Please allow at least 7 working days for this letter to arrive before contacting your GP.**

If a prescription is required sooner, you should contact the Consultant for them to prescribe. Private consultants may suggest medications which wouldn't normally be prescribed by NHS GPs. If this is the case, you will need to continue to receive them from the consultant.

## Prescribing Policy

Long Furlong Medical Centre believe providing the best quality 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 prescribing from an approved list of medications known as the Oxfordshire Formulary. This is a list of medications colour coded according to whether they can be safely prescribed by GPs (Green); whether they must be started and monitored by a hospital doctor or recommended by a specialist to be initiated by a GP (Amber); should only be prescribed in secondary care by a specialist (Red); not recommended for use because of lack of evidence or clinical effectiveness, cost effectiveness or safety (Black).

Oxfordshire Formulary: <http://www.oxfordshireformulary.nhs.uk/>

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 consultant recommends a new or experimental treatment or recommends prescribing a medication outside of 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, we may be unable to accept responsibility for the prescription. This includes medication that we can prescribe on the NHS but requires what is known as a Shared Care Protocol.
- Without such a Shared Care Protocol in place with an NHS provider of care we are unable to safely prescribe and monitor certain medication. This would include but is not limited to, disease modifying drugs, IVF associated medications and those to treat ADHD. These Shared Care Protocols have been drawn up by the Buckinghamshire, Oxfordshire and Berkshire West (BOBICB), Oxford Health and OUH clinicians only, therefore private providers are not included. This means that if you would need those medications in the NHS, we would require you to ask your private specialist to refer you to the appropriate NHS specialist to be reassessed for NHS treatment within the same regime of priorities applicable to NHS patients.

Therefore, to maintain prescribing safety and quality we are unable to accept Shared Care Agreements with private clinics of any sort, nor provide drug monitoring (blood tests, blood pressures, ECG's etc.) for private providers. All such prescriptions will have to be provided and monitored by the private clinics themselves and we would expect any legitimate private provider whose service necessitates blood testing and physiological measurement to have their own access to these facilities.

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

GMC Safe Prescribing Guidance: [www.gmc-uk.org/prescribing-and-managing-medicines-and-devices](http://www.gmc-uk.org/prescribing-and-managing-medicines-and-devices)

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

If after seeing a private consultant you want to be back under NHS care, national regulations allow you to transfer back. This transfer ideally needs to be actioned by the private consultant who is overseeing your care, but if this is not possible your private consultant should write directly to the practice to request this.