**KINGSMILLS MEDICAL PRACTICE**

**PRIVATE REFERRALS – INFORMATION FOR PATIENTS**

**What happens when you are referred by your GP to see a Consultant privately?**

We understand that some patients will opt to have some or all of their treatment privately, and 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 leaflet describes what you can expect to happen if you see a doctor privately.

**What do I need to do?**

You will need to contact your Health Insurance Company and/or private provider of your choosing, to organise the appointment. You will need to let the GP know the name of the Consultant and the address of the hospital they are based at, so the GP can write a referral letter if required. Our team are unable to make specific recommendations and choosing who you will see is your decision.

It is usual for a referral letter to be requested from the GP, but not always required. Please note that if an insurance company wishes for a specific form to be completed you may be charged for this additional work. A referral letter will be available for you to collect from reception. This will include any relevant medical details about you. The Practice does not charge for providing referral letters.

We would encourage you to wait until you have this letter before making an appointment, as the details within it will help the doctor you see. Additionally, we cannot guarantee timescales within which the letter will be prepared and ready, and letters requested with short notice due to a very sudden appointment being booked may not be possible.

We would usually refer anyone wishing a private test or procedure to a consultant first. This is so that the most appropriate test can be arranged (often out with a GPs scope of decision) and so that responsibility for interpretation of the results lies with the consultant.

The Practice does not cover pre-operative tests or ECGs and neither do we cover post-operative care like suture/staple removal or change of dressings. This may mean you need to travel to where you saw your Consultant.

**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, then the Consultant is 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 not suitable for you;
* Giving you your results 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, and the practice may not have access to the results, or be in a position to interpret them.

GP practices cannot perform blood tests or other private investigations/procedures using NHS resources. Doing so would inappropriately use NHS resources to carry out private activity. If a Private Consultant informs you to arrange or to expect to hear from your NHS GP to arrange such tests, then this is incorrect. You should, at the time, remind the consultant that all tests need to be carried out privately. Avoiding inappropriate requests for your NHS GP to carry out tests will:

* Avoid delay in having your tests
* Ensure that the right person (your Consultant) gets the results directly

What happens if I need new medicines?

The Consultant might suggest prescribing new medicines for you or might want to make changes to the medicines that you are already taking. They will be responsible for giving you the first prescription of any new medicine that you need to start taking straight away. Please note if you take a private prescription to any NHS Pharmacy you will have to pay the actual cost of the medication, which may be more or less dependent on the medication prescribed.

In some cases, your GP 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 GPs. Prior to this, a full clinic letter from the consultant is required, outlining 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. Even with this information, we will not guarantee that we will offer a prescription in all cases. The GP may need to refer to an NHS consultant for their advice regarding the private consultant’s diagnosis/treatment recommendations, before being able to decide about prescribing.

Please allow at least seven days for any private consultant’s letter to arrive at the practice after you are seen before contacting us. If the letter has not arrived, we would ask that you contact the consultant’s secretary directly to chase this.

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. If this is the case, you will need to continue to receive them from the Consultant. Please contact them directly to organise this (see below).

**Kingsmills Medical Practice Prescribing Policy**

The GPs at Kingsmills Medical Practice believe that 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 protect the future of the NHS, experts in NHS Highland decide on a list of formulary medicines, which are preferred for prescribing, often because they are more effective, safer and better value for money.

If the recommended prescription is out with this formulary list, then we may not be able to prescribe it for you. If a consultant suggests a branded or non-formulary medicine, we may suggest a suitable alternative which is very similar/the same and on our formulary.

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 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 Agreement.
* Without such a Shared Care Agreement 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, what are known as Disease Modifying Drugs, IVF associated medications and those to treat ADHD.

If we are unable to issue a NHS prescription you can still obtain the medication recommended via a private prescription from the consultant you have seen but 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, 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. There is currently a policy in NHS highland that NHS referrals should be subject to the same waiting time as a referral without private involvement. E.g. those that have been seen by a surgeon privately and been told they will be listed for surgery, but are then transferred back to an NHS waiting list on the same day that an NHS referral is made to a surgeon for the same operation, will wait the same duration i.e. be scheduled for the operation on the same day, despite the NHS patient needing a clinic appointment with the surgeon first.

GMC Safe Prescribing Guidance

https://www.gmc-uk.org/ethical-guidance/ethical-guidance-for-doctors/good-practice-in-prescribing-and-managing-medicines-and-devices