

The Calverton Practice Policy on Private Referrals

As a Practice we are happy to refer patients for private care if they so wish. We would ask however, both our patients and the specialists whom they see, to consider the following points:

1. Once a referral is made then all care resulting from that referral is deemed to be 'private'. This includes any investigations, prescribed medication or follow up care required as a result of the referral. This is regardless of whether the items concerned are covered by a private insurance policy. This is in line with local PCT and NHS policy which states that:

'A private consultation is generally considered to be a separate package of care. As such, the patient will be expected to pay the full cost of any treatment they receive. Any drugs prescribed or treatment provided in the course of a private consultation will be at the patient's expense'

2. Once the episode of private care is completed then we are happy to continue to prescribe medication though we would adhere to what is deemed local NHS 'Good Practice'. This requires that any medication complies with the local prescribing 'traffic light system'. As such, some items are termed either 'Grey' or 'Red' and would not be deemed appropriate for GPs to prescribe as part of NHS Primary Care treatment:

'Where a patient continues to be under the care of a private consultant, they should obtain all prescribed medication on a private basis'

3. Following on from a period of private care we are happy to subsequently refer a Patient back into the NHS, either for the same problem or a new problem or if subsequent follow up is required. If a patient wishes to come back into the NHS for further treatment either for the same or a different condition, this would involve joining a normal NHS waiting list via routine referral pathways.

Again this is in line with local PCT and NHS policy which states:

'It is not normally appropriate for patients to move repeatedly between the NHS and private sector for clinical management of the same condition.'

If clarification on any of these points is required please feel free to discuss this with your doctor at the time of referral or subsequently with Mr Alan Selden our Practice Chief Executive or Mr Adrian Kennedy our Practice Pharmacist.

References:

1. Code of Conduct for Private Practice: Guidance for NHS Medical Staff. Dept of Health, April 2003
2. The British Medical Association: Interface between NHS and private treatment. Guidance from the Ethics Department. Feb 2004
3. Guidance for the Transfer from Private to NHS Prescription: NHS Nottinghamshire County, Medicines Management Committee, Nov 2007