



THE LONG HOUSE SURGERY

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From 5th September 2024 we will no longer be able to take on prescribing and monitoring of shared-care medications or specialist monitoring of certain medical conditions for **ANY** patients with a diagnosis made in the **private** sector. These shared-care medications and/or conditions require specialist monitoring and review, and many such medications are either only licensed for specialist prescribing or prescribed outside their licensed use. Medications prescribed for ADHD, dementia, Isotretinoin for severe acne, monitoring after private bariatric surgery are some examples.

This is a decision that has been agreed across GP practices in Lothian and supported by the Lothian Local Medical Committee due to capacity and workload issues, the longstanding underfunding in primary care, and the impact of long NHS waiting lists. We appreciate your understanding during these challenging times. We are more than happy to discuss onward NHS referrals in a routine appointment for a second opinion or transfer of care, but we cannot prescribe in the interim period.

Where a private specialist recommends the prescribing of a non-formulary or unlicensed medication we can only agree to ongoing prescribing if we have experience of the medication requested. If this is not the case, you will be directed back to the private provider for private provision or offered a suitable, formulary-based alternative that is within our remit as NHS GPs.

With regards to a private provider requesting investigation by the GP, the British Medical Association guidance clearly states that investigation should only be arranged through the GP-patient encounter and within the competencies of the GP. With regards to a private provider seeking a GP opinion for appropriateness of a privately provided treatment, again this is not within the NHS-funded duties of a GP. There are many other instances where the request from the private provider may not be accepted, and we will communicate this clearly to the best of our ability.