



Process for the safe prescribing of Shared Care Specialist Drugs

A Shared Care Agreement (SCA) is an agreement between a specialist, their patient and the patient's GP for the on-going prescription of an individual drug on the specialist drugs list that is suitable for shared care. To request a SCA template email APC office: crccg.cwapc@nhs.net

An SCA is not a group directive. Therefore a process needs to be followed before a GP, or GP practice, continues to prescribe the drug for an individual patient.

Once a specialist decides that a patient requires a shared care drug the following process is advised:

- 1. The specialist must initiate the drug and must write to the GP to ask whether they are willing to participate in shared care.** The letter needs to be dispatched promptly to the GP so that it can be dealt with in good time – email or post are suitable. For Coventry & Rugby and Warwickshire North CCGs, the preferred method of communication is DOCMAN.
[Please Note: A letter posted on CRRS is not suitable as there are no formal checking procedures in GP practice currently and as a result requests for shared care may remain unnoticed.]
- 2. It is advised that the specialist explains to the patient the shared care process and their responsibilities as outlined in the agreement**
- 3. The letter to the GP needs to include an invitation to share care, a reference to the shared care protocol and where it can be found** (alternatively a hard copy of the protocol to be included in the letter). If there are any deviations from the set protocol suggested by the specialist then these need to be included in the letter at the outset.
[Monitoring of the drug is a common factor with these drugs and it is generally the specialist who remains responsible for monitoring but this is an area where agreement may be reached and which may be different from the published shared care protocols – For Coventry & Rugby and Warwickshire North CCGs, monitoring will be done by primary care]
- 4. The GP in turn should read the letter and the shared care protocol, and is recommended to reply promptly to the request by emailing or writing back their reply to the consultant concerned.** (For Coventry & Rugby and Warwickshire North GPs, the preferred method of response is via ERS Advice & Guidance)
If the GP is not willing to participate in shared care then it is the GP's obligation to state reasons for refusal and communicate these to the specialist. *[Please Note: Drug cost cannot be used as reason for declining prescribing as the funding of specialists drugs has been agreed]*
- 5. It is anticipated that the process should be completed easily within four weeks and it is therefore expected the specialist prescribes a minimum of 28 days' treatment.** The responsibility for prescribing the drug will remain with the specialist until shared care is agreed and, in all circumstances, until the patient has been stabilised on therapy. It is therefore in the interest of all parties that the process runs smoothly and imperative that patients are not inconvenienced or unfairly treated in any way.

Shared Care Protocols are available on the [APC NetFormulary website](#)
it is advisable that they are read by both the specialist and the GP
to familiarise themselves with their contents
as there are differences between the protocols available for different drugs.