Therapeutics Advisory Group

Improving lives together
Norfolk and Waveney Integrated Care System

Prescribing Guidance Update
Patient Choice & Shared Care Prescribing
Sept 2025 v0.3

Right to Choose

If a General Practitioner (GP) needs to refer an NHS patient for a physical or mental health condition, in most cases patients have the legal right to choose the provider and team they would like to go to for elective care. The provider would need to hold a qualifying NHS Standard Contract with an ICB or NHS England for the services required, and the referral would need to be considered clinically appropriate by their referrer.

Further information regarding patient choice of provider and team is available at:

https://www.england.nhs.uk/long-read/patient-choice-guidance/

https://www.nhs.uk/using-the-nhs/about-the-nhs/your-choices-in-the-nhs/

Shared Care Prescribing

It is in the best interests of patients, whenever appropriate and possible, to receive care in an integrated and convenient manner. To support this Norfolk & Waveney ICB have locally agreed shared care agreements which allow prescribing of some medicines in general practice, which were traditionally only provided by specialist services. The decision to undertake shared care should be a mutually agreed decision between the patient, specialist and the GP.

Through the Shared Care Locally Commissioned Service (LCS) practices are renumerated for all the locally agreed shared care agreements, there is also additional baseline funding for ad hoc reasonable requests.

It is important to note that the Shared Care LCS covers shared care with NHS commissioned providers offering services under Right to Choose (RTC).

For a GP to accept shared care with an NHS RTC provider the medication would need to be in-line with local NHS provision, which includes the ICBs formulary and shared care agreements.

If the patient is being seen by a RTC provider on the ICB commissioned framework it will be part of their contractual requirements to adhere to the ICB formulary and shared care agreements. However, this does not preclude practices from agreeing to a shared care agreement with other RTC providers as long as a number of checks are in place.

- The provider should be CQC registered. This can be checked on their website.
- The request should come from a named professionally registered clinician.
- The medication should be available on the NHS (in the drug tariff), be clinically appropriate for the patient and condition, and be in line with what would be offered from core NHS services (in line with formulary).
- The specialist should initiate, titrate and stabilise the patient's medication before asking for a transfer of prescribing responsibility.
- They should provide a shared care agreement which is in line with the local one and have a division of responsibilities' which the practice is happy with.
- They should continue to have the patient under their care and provide ongoing reviews as necessary.

Assuming these conditions are in place then entering a shared care agreement with other RTC providers is fine.

Practices should encourage patients to review what their chosen RTC provider is able to offer before requesting the referral. Some RTC providers are assessment only services and will not initiate treatment or will not provide ongoing annual reviews. In these circumstances it is not possible for GP's to prescribe under a shared care agreement as there is no specialist to share the care with and patients would need to have their care transferred to another specialist service before prescribing can commence.

The legal responsibility for prescribing lies with the doctor or healthcare professional who signs the prescription, and it is the responsibility of the individual prescriber to prescribe within their own level of competence.

Good professional practice requires care for patients to be seamless; patients should never be placed in a position where they are unable to obtain the medicines they need, when they need them. Where a practice is unable to prescribe for a patient under a shared care agreement the prescribing responsibility remains with the specialist.

Please see Knowledge NoW for more information on our locally agreed shared care agreements.

Please see Netformulary for more information on the latest local formulary recommendations.

Please note:

Shared care with private providers is outside the scope of this guidance. General Practitioners can accept shared care with private providers at their own discretion and are responsibility for checking the terms of the shared care agreement proposal.

References

NHSE. Responsibility for prescribing between Primary & Secondary/Tertiary Care 2018. Available at responsibility-prescribing-between-primary-secondary-care-v2.pdf.[Accessed June 2025]

General Medical Council. Good practice in proposing, prescribing, providing and managing medicines and devices. Effective April 2021; updated December 2024. Available at prescribing-guidance-updated-english-20210405_pdf-85260533.pdf

Title	Prescribing Guidance – Patient Choice and Shared Care Prescribing
Description of policy	*To inform healthcare professionals*
Scope	*Norfolk and Waveney Integrated Care System*
Prepared by	Norfolk and Waveney ICB Medicines Optimisation Team
Impact Assessment (Equalities and Environmental)	*Please indicate impact assessment outcome:* *Positive impact* *Adverse impact - low - action plan completed as per guidance* *Adverse impact - medium - action plan completed as per guidance* *Adverse impact - high - action plan completed as per guidance* *No impact* ***No policy will be approved without a completed equality impact assessment***
Other relevant approved documents	
Evidence base / Legislation	Level of Evidence: *A. based on national research-based evidence and is considered best evidence* ***B. mix of national and local consensus*** *C. based on local good practice and consensus in the absence of national research based information.*
Dissemination	Is there any reason why any part of this document should not be available on the public web site? ☐ Yes / No ☒
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