

Guide to Managing Requests from non-PCN providers when there is a conflict between the status of a drug on the PAD and the formulary of the non-PCN provider

Note: Please read across from the non-PCN traffic status to the relevant PAD status		PAD Traffic Light Status					
		Not evaluated & not on workplan; OR under review	Black (link to decline letter template)	Red (link to decline letter template)	Amber (link to shared-care info request letter template)	Blue (link to decline to initiate letter template)	Green
Traffic Light Status in non-PCN NHS provider*	Not evaluated & not on workplan; OR under review	Request to prescribe should be declined	Request to prescribe should be declined	Request to prescribe should be declined	<ul style="list-style-type: none"> Request to prescribe should be declined. No formal governance arrangements in place. 	<ul style="list-style-type: none"> Request to prescribe should be declined. No formal governance arrangements in place. 	May be prescribed at discretion of primary care prescriber if patient meets local criteria
	Black	Request to prescribe should be declined	Request to prescribe should be declined	Request to prescribe should be declined	<ul style="list-style-type: none"> Request to prescribe should be declined. No formal governance arrangements in place. 	<ul style="list-style-type: none"> Request to prescribe should be declined. No formal governance arrangements in place. 	May be prescribed at discretion of primary care prescriber if patient meets local criteria
	Red	Hospital to retain prescribing	Hospital to retain prescribing	Hospital to retain prescribing	Hospital to retain prescribing	Hospital to retain prescribing	Hospital to retain prescribing
	Amber or equivalent i.e. requiring shared care agreement	May be prescribed at discretion of primary care prescriber if: <ul style="list-style-type: none"> i) patient meets agreed criteria in non-PCN provider pathway and all PCN agreed options have been exhausted; AND ii) Shared care agreement provided 	<ul style="list-style-type: none"> Consider prescribing only if clinical exceptionality can be demonstrated Request support from Medicines Management team. Attempts should be made to gain agreement for provider to prescribe 	<ul style="list-style-type: none"> Request support from Medicines Management team Attempts should be made to gain agreement for provider to prescribe Consider prescribing only if robust governance arrangements are in place that would make it safe to prescribe in primary care. 	Prescribe if shared care agreement provided.	<ul style="list-style-type: none"> Prescribe if in accordance with PCN recommendations Shared care optional) Clarify responsibilities regarding monitoring / follow-up 	<ul style="list-style-type: none"> Prescribe if patient meets local criteria. Clarify responsibilities regarding monitoring.
	Blue or equivalent i.e. no formal shared care but needs initiation / recommendation and / or stabilisation by specialist	May be prescribed at discretion of primary care prescriber if: <ul style="list-style-type: none"> i) patient meets agreed criteria in non-PCN provider pathway and all PCN agreed options have been exhausted; AND ii) patient stabilised in accordance with recommendations; AND iii) responsibilities regarding monitoring / follow-up are clear 	<ul style="list-style-type: none"> Consider prescribing only if clinical exceptionality can be demonstrated Request support from Medicines Management team. Attempts should be made to gain agreement for provider to prescribe 	<ul style="list-style-type: none"> Request support from Medicines Management team. Attempts should be made to gain agreement for provider to prescribe Consider prescribing only if robust governance arrangements are in place that would make it safe to prescribe in primary care. 	Consider prescribing if non-PCN provider is willing to accept local shared care agreement	<ul style="list-style-type: none"> Prescribe in accordance with PCN recommendations. Clarify responsibilities regarding monitoring / follow-up 	<ul style="list-style-type: none"> Prescribe if patient meets local criteria. Clarify responsibilities regarding monitoring / follow-up
	Green	May be prescribed at discretion of primary care prescriber if: <ul style="list-style-type: none"> i) patient meets agreed criteria in non-PCN provider pathway and all PCN agreed options have been exhausted; AND ii) success criteria are defined. 	<ul style="list-style-type: none"> Consider prescribing only if clinical exceptionality can be demonstrated Request support from Medicines Management team. Attempts should be made to gain agreement for provider to prescribe 	<ul style="list-style-type: none"> Request support from Medicines Management team. Attempts should be made to gain agreement for provider to prescribe Consider prescribing only if robust governance arrangements are in place that would make it safe to prescribe in primary care. 	<ul style="list-style-type: none"> Consider prescribing if non-PCN provider is willing to accept local shared care agreement 	<ul style="list-style-type: none"> Consider prescribing if non-PCN provider willing to accept PCN criteria and to retain prescribing until patient is stabilised Some discretion may be applied in the patient's best interest if lead commissioner for the provider has agreed green status 	Prescribe

* For private providers please refer to Medicines Management Guide to Prescribing (section 3.4)