**Private Blood Test Requests and any Private Diagnostic Test Requests Policy**

**Purpose:**
To establish a clear protocol for managing requests for private blood tests, ensuring that NHS resources are appropriately utilised and that patients receive the necessary guidance for their healthcare needs.

**Scope:**
This policy applies to all staff within the GP practice who may receive requests for private blood tests from patients or private healthcare providers.

**Policy Statement:**
Our practice is committed to providing high-quality care within the scope of NHS services. Requests for private blood tests will be managed in accordance with NHS guidelines and our contractual obligations.

Guidance on organising test requests by private providers can be found on the BMA website here: [General practice responsibility in responding to private healthcare](https://www.bma.org.uk/advice-and-support/gp-practices/managing-workload/general-practice-responsibility-in-responding-to-private-healthcare)

*‘If general practices receive requests from private providers to arrange tests or investigations, it is important to note that complying with such requests - regardless of the GP’s management and treatment of the patient - is outside the scope of NHS primary medical services.’*

**Protocol:**

1. **Initial Request Handling:**
	* No patient requesting a blood test or other diagnostic test, should be booked in without checking if there is a request on ICE or if the request has come from a clinician in the practice.
	* All requests for tests should be documented in the note and whether they are for monitoring, investigation or medication review purposes.
	* All patient requests for blood tests should be documented and can be reviewed by a GP or designated healthcare professional as to whether it can be conducted under the NHS.
2. **Assessment of Request:**
	* Evaluate if the requested blood test is for a condition that should be monitored under our NHS contract.
	* If the test is clinically indicated and falls within NHS services, advise the patient they would need to be referred back into the NHS for appropriate monitoring and testing.
3. **Response to Non-NHS Requests:**
	* If the blood test request is outside the scope of NHS services and not clinically indicated under our NHS contract, inform the patient or provider that we are unable to perform the test.
	* Patients requesting private blood tests, either for a private healthcare provider, or for monitoring purposes without a private consultant (e.g. post operative elective surgery abroad) should be informed we do not perform private blood tests.
	* Explain that complying with such requests is outside the scope of NHS primary medical services and that alternative arrangements should be made privately.
4. **Risk Consideration:**
	* Conducting a private blood test without a private consultant reviewing or monitoring the patient may pose a risk to the practice.
	* The practice may assume liability if results are not appropriately managed or acted upon, leading to potential patient harm.
	* It is crucial to ensure that any blood tests conducted have a clear follow-up plan with a responsible healthcare provider.
5. **Communication:**
	* Clearly communicate the decision to the patient or private provider, providing reasons for the refusal based on NHS guidelines and contractual obligations.
	* Offer guidance on how the patient can access private healthcare services if they wish to proceed with the test privately. (They can go online and search for Cornwall private blood tests, and this will bring up various private healthcare alternatives.)
6. **Documentation:**
	* Record all interactions and decisions regarding the request in the patient's medical record.
	* Ensure that any advice given is documented for future reference.

**Rationale:**

* NHS resources should not be used to subsidise private care.
* It is essential to maintain a clear separation between NHS and private services to ensure accountability and appropriate use of NHS resources.
* Patients should be informed of their options and guided appropriately to ensure they receive the necessary care within the NHS framework.
* Difficulty for practices to charge patients correctly for the work, due to the variety of blood tests and charges. Whilst test charges can be billed directly to the patient by the lab, there would still be the admin and HCA time that needs to be costed and charged by the practice separately. The system is open to error, due to the complexity of the requests on ICE and on the sample paperwork, and identifying patients within EMIS that require invoicing, which may leave the practice out of pocket.

**Review and Compliance:**

* This policy will be reviewed annually or as needed to ensure compliance with NHS guidelines and contractual obligations.
* Feedback from staff and patients will be considered in the review process.

**Responsibilities:**

* All staff are responsible for adhering to this policy.