**GLASGOW LOCAL MEDICAL COMMITTEE LIMITED**

**Template Letters for practice use**

The following template letters have been drawn up to help practices manage workload, and should be adapted for local use as appropriate. They have been adapted by Glasgow LMC from the BMA Letter templates-

<https://www.bma.org.uk/advice-and-support/gp-practices/managing-workload/pushing-back-on-inappropriate-workload>

Use the hyperlinks to quickly reach each appendix

[Appendix 1](#A1) – Template response to secondary care work transfer

[Appendix 2](#A2) – Template response to out-patient phlebotomy request

[Appendix 3](#A3) – Template response to inappropriate prescribing requests

[Appendix 4](#A4) – Template response to requests to follow up investigations performed in other settings

[Appendix 5](#A5) – Template response to requests for post-operative checks

[Appendix 6](#A6)– Letter to hospital provider regarding discharge of patients after missed appointment

Appendix 1

**Template response to secondary work transfer**

Patient details:

Dear X

I refer to your request for this practice to undertake …………. (insert work requested). I enclose a copy of your request (optional).

I fully understand that all parts of the health service are under pressure currently but I am sorry that we are unable undertake this work for the following reason(s):

(Use as appropriate)

– The task(s) is not an essential service as per our GMS/17c contract

– This work has not been commissioned by the Board to be carried out in general practice

– This work has not been funded as a national or local enhanced service

– This work is more appropriately provided by yourself as a specialist

You will be aware of the current pressures on general practice at this unprecedented time, and therefore we are unable to undertake unresourced or inappropriate work that is outside our contractual responsibility, and which will as a result jeopardise our core duty of care to patients.

We have informed the patient that this work is not the responsibility of the practice and would be grateful if you would contact them directly to provide the service.

Thank you for your understanding.

Appendix 2

**Template response to out-patient phlebotomy request**

Patient details:

Dear X

I refer to your request for this practice to undertake phlebotomy on behalf of the hospital out patient clinic. I enclose a copy of your request (optional).

The Health Board has put in arrangements for patients to give blood samples in the Acute Phlebotomy Hubs which are located in many acute sites in GG&C.

We have informed the patient that this work is not the responsibility of the practice and would be grateful if you would contact them directly to arrange an appropriate acute phlebotomy appointment.

Thank you for your understanding.

Appendix 3

**Template response to inappropriate prescribing requests**

Patient details:

Dear X

You recently wrote asking us to prescribe the following medication for the above patient. A copy of your request is attached.

We are sorry that in line with our GMC duty of care to patients, we are unable to prescribe this medication because:

(Use as appropriate)

– **This should be prescribed by a specialist who can take clinical responsibility for this prescription as we do not feel that we have the clinical competencies to do so.**

– The initiation of this drug should be done by a specialist, and the patient stabilised on the medication before being considered suitable for a GP to prescribe

– The request is for unlicenced use of this drug, and which should therefore be prescribed by a specialist able to take appropriate clinical responsibility

(For shared care requests)

– **We are unable to take on this request for shared care since we consider prescribing and monitoring of this specialist medication to be outwith our clinical competency.**

– We are unable to prescribe this medication under shared care arrangements, since the prescribing of this medication has not been agreed as a shared care service from this GP practice

**We would be grateful if you would arrange for the patient to receive this medication via the hospital pharmacy or ideally via a hospital prescription.** The patient could then use the latter to collect this medication from their local community pharmacy.

**The practice will be taking no further action with regard to this activity and the transfer of responsibility has not taken place.**

Additional comments:

Appendix 4

**Template response to requests to follow up investigations performed in other settings**

Patient details:

Dear X

We write in response to your letter regarding the above patient requesting that we chase up the ………………………………………….investigations undertaken by your department.

A copy of your request is enclosed.

The result of this investigation will automatically be sent to you or your department as the requesting clinician. Please note that as per GMC and BMA guidance, it is the responsibility of the doctor requesting a test to take clinical responsibility to follow up and take appropriate action on the result.

We would therefore respectfully request that you follow up the result and take any action accordingly. I understand the pressures on your service at the current time; general practice is under the same workload pressure as well. We would ask that you review your hospital policy on this issue, to avoid practices incurring inappropriate bureaucratic workload of chasing up results which are already in your possession, and which falls under your responsibility.

We will be proceeding on the assumption that you will be taking responsibility for reviewing and taking any action on the above investigation result(s)

Appendix 5

**Template response to for post-operative checks**

Patient details

Dear X

We write further to your letter of (insert date) requesting that we undertake a post-operative review on the above patient.

This work falls outside the remit of the General Practice contract and has not been commissioned from us as an enhanced service. The best person to undertake such a review is the surgeon who knows what procedure was performed, any difficulties or complications that occurred during surgery, and what post-operative complications would be expected,

if any. We therefore do not believe it is in the best interests of this patient for us to do this review and are unable to comply with your request.

The current pressures on general practice means that we cannot take on inappropriate or unresourced work outside our contract, since this would detract from our core duty of care to patients.

Appendix 6

**Template response to for hospital regarding discharge of patients after a missed appointment and re-referral**

Patient details

Dear X

Your department has discharged this patient from your service following missing an appointment.

You have requested that we make a new GP referral for the patient to be seen.

I understand the pressures on your service at the current time; general practice is under the same workload pressure as well. It is not appropriate for GPs and staff to incur the additional bureaucracy and workload to re-refer patients after a single missed appointment. Additionally many GP appointments are wasted due to patients seeing a GP for the sole administrative purpose of a re-referral, and which could instead have been offered to other patients.

We are asking you to review your policy to either routinely send patients a further appointment, or to allow patients to reinstate their missed appointment within a specified time directly with your appointment department, in order to not incur unnecessary additional bureaucracy on hard pressed GP surgeries.

We look forward to hearing from you