NHS Herts Valleys Clinical Commissioning Group

West Hertfordshire Hospitals NHS NHS Trust

Rheumatology Adult (over 16)
Shared Care Guidelines for Disease Modifying Drugs

Principles of Shared Care & Responsibilities of Speciality Team, GP, Pharmacist & Patient

1. Shared Care Principles

Disease modifying anti-rheumatic drugs (DMARDs) are used for the treatment of Rheumatoid Arthritis (RA) and other rheumatological conditions. This shared care agreement outlines individual responsibilities for managing the prescribing of DMARDs for Rheumatology patients and these are expected to be shared between the specialist and general practitioner (GP). GP participation in shared care (including full prescribing responsibility) will be assumed but if he or she is unable to undertake this role, then they are under no obligation to do so but should notify the specialist in writing within 14 days of receiving the request stating the clinical reasons for declining the request. The notification should be faxed to the relevant number below. In such an event, the total clinical responsibility for prescribing the medication and any monitoring required remains with the specialist. Please note that medication cost is not an acceptable reason for refusal to take on shared care.

The prescribing doctor legally assumes clinical responsibility for the drug and the consequences of its use**.** Please see drug specific shared care information for each of the following individual DMARDs and please consult manufacturer's literature for more detailed information regarding each drug if required:-

- Azathioprine
- D-penicillamine
- Methotrexate
- Ciclosporin
- Hydroxychloroquine
- Mycophenolate
- Dapsone
- Leflunomide
- Sulfasalazine

Sharing of care assumes communication between the specialist, GP and patient. It is important that patients are consulted about treatment and are in agreement with it. The intention to share care should be explained to the patient by the doctor initiating treatment.

2. Useful Contacts

Contact	Telephone number	Fax number
Consultant Rheumatologists		
Dr Sundeept Bhalara	01442 287049	01442287836
Dr Krishnan Baburaj	01923 217520	01923217137
Dr Leena Patel	01923 217520	01923217137
Rheumatology Clinical Nurse Specialists		
Sister Annie Seymour	01727 897912	01727897042
Sister Maria Cunningham	01923 217798	01923217137
Hospital Pharmacy		
Watford General	01923 217734	
St Albans	01727 897819	
Hemel Hempstead	01442 287661	
Medicines Information	01923 217853	

3. Responsibilities of Speciality Team, GP, Pharmacist and Patient in Shared Care Agreement

	Speciality Team Responsibility	GP Team Responsibility	Patient Responsibility	Pharmacist Responsibility
Assessment Appointment	▪ Provide information on disease and drug treatment options ▪ Conduct pre-treatment assessment		▪ Read information provided ▪ Give consent for treatment chosen ▪ Inform speciality team of any other medication being taken, including OTC products	
Prescription Appointment with Nurse	▪ Initiate treatment ▪ Issue prescription ***for 6 weeks*** ▪ Write to GP with baseline assessments and prescribed dose ▪ Issue patient held monitoring booklet (where applicable) ▪ Issue patient information leaflet	▪ GP to contact speciality team if any concerns	▪ Safe storage and handling of medication ▪ Safe keeping of patient held notes ▪ Ensure compliance with regular blood test monitoring as advised	▪ Ensure appropriate dose prescribed with clear instructions on use, NOT 'as directed' ▪ Provide advice of adverse effects ▪ Provide advice on drug interactions with prescription and OTC medication ▪ Issue patient information leaflets ▪ Monitor frequency of prescription requests and contact GP if quantities in excess *Where booklet applicable and when blood results are not accessible to either the GP or the specialist over ICE pathology system
1st Review Appointment with Nurse at 6 weeks	▪ Check initial monitoring results ▪ Update patient held monitoring booklet* ▪ Adjust drug dose according to response ▪ Issue prescription for a ***further 6 weeks*** ▪ Write to GP with any dose change ▪ Issue shared care information to GP ▪ Invite GP to enter shared care ***at week 12***	▪ Discuss any anomalous results or potential adverse effects with speciality team ▪ Notify specialist ASAP if unable to participate in shared care agreement	▪ Obtain prescription ***from hospital*** for first 3 months of treatment ▪ Report any adverse effects or problems ▪ Ensure patient held monitoring booklet is available for viewing and updating by either GP or specialist*	
Further 3/12 Specialist Review & Appointments thereafter	▪ Review progress in clinic ▪ Request GP to take over blood test monitoring and drug prescription ***(enter shared care)*** once patient is stabilised on drug (***usually after 3 months***) i.e. drug tolerated without side effects and blood monitoring parameters satisfactory ▪ **SHARED CARE WILL BE ASSUMED UNLESS GP WRITES TO INFORM SPECIALIST WITHIN 2 WEEKS -THAT IT CANNOT BE UNDERTAKEN** ▪ Issue prescription for 1 further month and provide 1 additional blood form to cover period of transfer of care to GP ▪ Respond to any GP requests for advice ▪ Update patient held monitoring booklet* ▪ Write to GP with any dose change ▪ Specialist will organise and check an additional blood test 2 weeks after any dosage change	▪ **SHARED CARE WILL BE ASSUMED UNLESS GP WRITES TO INFORM SPECIALIST WITHIN 2 WEEKS WITH THE CLINICAL RATIONALE FOR WHICH IT CANNOT BE UNDERTAKEN** ▪ Issue prescriptions once patient has been stabilised on medication (usually after 3 months) ▪ Review blood results against drug specific guidelines **BEFORE** issuing a repeat prescription ▪ Only prescribe enough drug supply until next blood test due ▪ **RESPONSIBILITY TO CHECK BLOOD RESULTS LIE WITH THE PRESCRIBER IRRESPECTIVE OF WHO GENERATED THE REQUEST** ▪ Carry out monitoring as per shared care guideline ▪ Update patient held monitoring booklet* ▪ Discuss any anomalous results or potential adverse effects with speciality team ▪ Ensure patient is aware of dose changes ▪ 6 monthly ESR and CRP is desirable (or as indicated) to aid disease assessment	▪ Ensure repeat prescription requested **either via GP or specialist** as agreed ▪ Report adverse effects ▪ Ensure GP is aware of any OTC medication they may be taking ▪ Ensure patient held monitoring booklet is available for viewing and updating by either GP or specialist* ▪ Ensure appropriate monitoring undertaken as directed e.g. blood tests, blood pressure monitoring or eye tests	