

## **PRESCRIBING COMMISSIONING POLICY: SELF-CARE**

**NHS West Cheshire CCG will not fund the prescribing of medicines and treatments for minor, short-term conditions where:**

- **self-care is the most appropriate route**
- **medicines and treatments are available to buy over the counter**

**NHS West Cheshire CCG will not fund the prescribing of medicines and treatments for ANY medical condition where:**

- **there is insufficient evidence of clinical benefit or cost-effectiveness**
- **the medical condition has no need of clinical treatment**

Note: Patients who are not eligible for treatment under this policy may be considered on an individual basis where their GP or consultant believes exceptional circumstances exist that warrant deviation from the rule of this policy.

Individual cases will be reviewed at the NHS West Cheshire Clinical Commissioning Group Individual Funding Request Panel upon receipt of a completed application form from the patient's GP, Consultant or Clinician.

Applications cannot be considered from patients personally.

Version	1.0
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Ratified By	NHS West Cheshire Clinical Commissioning Group Governing Body
Date Ratified	29 <sup>th</sup> September 2016
Author(s)	Diane Hornsby/Barbara Perry Prescribing Advisors Medicines Management Team, Midlands and Lancashire Commissioning Support Unit
Responsible Committee / Officers	NHS West Cheshire Clinical Commissioning Group Finance Performance and Commissioning Committee
Date Issue	30 <sup>th</sup> September 2016
Review date	September 2019
Intended Audience	All providers of services commissioned by NHS West Cheshire Clinical Commissioning Group, including GPs, Hospital Trusts, Community Providers. Stakeholders of NHS West Cheshire Clinical Commissioning Group, NHS West Cheshire Clinical Commissioning Group members, governing body and employees. For publication on our web site
Impact Assessed	

Further information about this document:

Document name	<b>Prescribing Commissioning Policy: Self-Care</b>
Category of Document in The Policy Schedule	<b>Commissioning</b>
Author(s) Contact(s) for further information about this document	<b>Contact for further information:</b> <a href="mailto:Enquiries.wcheshireccg@nhs.net">Enquiries.wcheshireccg@nhs.net</a> <b>Tel: 0800 132 996</b>  <b>Authors:</b> <b>Diane Hornsby</b> <b>Prescribing Advisor</b> <b>Medicines Management Team, Midlands and Lancashire Commissioning Support Unit</b> <b>Barbara Perry</b> <b>Senior Medicines Optimisation Lead</b> <b>Medicines Management Team, Midlands and Lancashire Commissioning Support Unit</b>
This document will be read in conjunction with	-

Published by	<b>NHS West Cheshire Clinical Commissioning Group</b> <b>1829 Building</b> <b>Countess of Chester Health Park, Liverpool Road</b> <b>Chester, CH2 1HJ</b>
Copies of this document are available from	<b>Website:</b> <a href="http://www.westcheshireccg.nhs.uk">www.westcheshireccg.nhs.uk</a>
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Version Control:

<b>Version History:</b>		
<b>Version Number</b>	<b>Reviewing Committee / Officer</b>	<b>Date</b>
0.1	NHS West Cheshire Clinical Commissioning Group Communications and Engagement Team and Governance lead. Midlands and Lancashire Commissioning Support Unit Medicines Management team.	20/9/2016
0.2	Formatted	21/9/2106
0.3	NHS West Cheshire Clinical Commissioning Group Finance Performance and Commissioning, and Area Prescribing Committees	22/9/2016

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**Arabic**

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**Punjabi**

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**Urdu**

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## 1. INTRODUCTION

- 1.1 Self-care is widely acknowledged as an important solution to managing demand and keeping the NHS sustainable. Supporting people to self-manage common conditions such as coughs and colds could help bring down the 57 million GP consultations each year for minor ailments, a situation which costs the NHS approximately £2 billion and takes up to an hour a day on average for every GP.
- 1.2 Promoting the concept of self-care and increasing the awareness that there are alternatives to making GP appointments, or attendance at OOHs or A&E departments with minor conditions, will encourage patients to explore self-care in the future, so changing the culture of dependency on the NHS.
- 1.3 NHS West Cheshire CCG spent approximately £758,000 in 2015/2016 on some of the medicines that are available to purchase over-the-counter. It is recognised that some of this cost is attributable to long-term or complex conditions. However, removing specific medications from routine prescription for minor, short-term conditions and for conditions, such as a common cold, sore throat or minor cough, which would naturally get better themselves in the majority of patients if untreated, would release money to treat more serious conditions such as heart disease and diabetes and would help maintain financial balance in the health economy.
- 1.4 Some products that are currently prescribed are clinically ineffective or are not cost effective. These treatments will not have undergone rigorous clinical trials to demonstrate that they work and it is inappropriate to spend the local NHS budget on products that do not have proven efficacy or safety in preference to medicines supported by robust clinical evidence.

## 2. SCOPE AND PURPOSE OF THE POLICY

- 2.1 The Self-Care Policy sets out the NHS West Cheshire Clinical Commissioning Group's approach to ensure that prescribing of certain products in the following circumstances is stopped and to support prescribers in implementing this decision:
  - a) Medicines and treatments that are available to purchase over-the-counter, used for the treatment of minor, short-term medical conditions.
  - b) Medicines and treatments where there is limited evidence of clinical benefit or cost-effectiveness.
  - c) Medicines and treatments that are prescribed to treat conditions where there is no clinical need for treatment.
- 2.2 This policy will ensure equity of service for all residents of West Cheshire and will allow the same expectation of what will be provided from the GP Practice or other services.
- 2.3 This policy applies to all services contracted by or delivered by the NHS across West Cheshire CCG including:
  - a) GP Practices – GPs and any other Prescribers
  - b) Out of hours and extended hours providers
  - c) Acute Hospitals

- d) Out-Patient Clinics
- e) NHS Community Providers
- f) Independent providers
- g) Community pharmacies

2.4 This policy applies to all people (adults and children) who are registered with a GP in West Cheshire (permanent or temporary resident) or who access a NHS service in West Cheshire.

### **3. MEDICINES AVAILABLE OVER-THE-COUNTER, USED FOR SHORT-TERM, MINOR MEDICAL CONDITIONS**

- 3.1 Most minor ailments are generally not serious and can often be managed by the individual. Products aimed at treating the symptoms of many of these ailments may not offer value for money and should not normally be prescribed at NHS expense.
- 3.2 Patients with short-term, minor ailments and common conditions will be referred to community pharmacies, or other outlets such as supermarkets and local shops, to purchase over-the-counter treatments.
- 3.3 Community pharmacists have a wealth of experience and training, and are well placed to contribute to the management of minor ailments and common conditions. No appointments are needed and the community pharmacy is often open longer hours than the GP Practice and is also open at weekends.
- 3.4 West Cheshire Clinical Commissioning group commissions a Community Pharmacy Minor Ailments Service (Pharmacy First). This service is being amended to reflect the content of this policy (see Appendix 4).
- 3.5 Secondary Care will support self-care interventions and refer patients to the community pharmacy if appropriate, particularly where patients have presented inappropriately to A&E, the urgent care centre or out of hours services.
- 3.6 People will be encouraged to be responsible for their own health and well-being, by all healthcare professionals.
- 3.7 Patient information leaflets are available for certain conditions, either via sources such as NHS Choices or via the GP Practice prescribing system (EMIS Web), to ensure that people are made aware of warning signs or symptoms that would require them to see their GP.

### **4. MEDICINES WHERE THERE IS LIMITED EVIDENCE OF CLINICAL BENEFIT OR COST-EFFECTIVENESS**

- 4.1 Some products that are currently prescribed in West Cheshire are possibly clinically ineffective or are not cost-effective. Many of the products in this category are not licensed drugs under the Medicines Act.
- 4.2 This means that they have not undergone the rigorous clinical trials as required by the regulatory authorities to confirm their safety, quality and efficacy.
- 4.3 There is no summary of product characteristics (SPC) for prescribers to consult and therefore risk to the prescriber when unlicensed products are prescribed.
- 4.4 Many of these products are classed as 'food substitutes' and are not covered by ACBS1 regulations (GMS contract) and/or do not appear in the current British National Formulary (BNF) or the Drug Tariff.
- 4.5 They may not be manufactured to the same high pharmaceutical standards used for licensed medicines; hence there is no guarantee of consistency in formulation and potency.
- 4.6 It is inappropriate to direct NHS resources towards products that do not have



proven efficacy or safety in preference to licensed medicines supported by robust clinical evidence.

- 4.7 Clinicians will be required to consider whether the benefit of prescribing a treatment for an individual justifies the expense to the NHS.
- 4.8 Such judgements should be based purely on clinical factors and should not be influenced by socio-economic aspects such as the patient's ability to purchase.
- 4.9 NHS West Cheshire Clinical Commissioning Group already has policies in place to prevent the prescribing of some of these products, (e.g. glucosamine supplements, vitamin products specifically for eye health and homeopathic remedies). Further specific policies will be developed as other products with limited evidence to support them are identified.

## **5. MEDICINES THAT ARE PRESCRIBED TO TREAT CONDITIONS WHERE THERE IS NO CLINICAL NEED FOR TREATMENT.**

- 5.1 Conditions such as a common cold, sore throat or minor cough are ones that would naturally get better themselves in the majority of patients if untreated.
- 5.2 Products to help soothe such conditions (e.g. cough mixtures, sore throat lozenges) will no longer be prescribed.
- 5.3 Clinicians will be required to consider whether the benefit of prescribing a treatment for an individual justifies the expense to the NHS.
- 5.4 Such judgements should be based purely on clinical factors and supporting evidence and should not be influenced by socio-economic aspects such as the patient's ability to purchase.

## **6. SELF-CARE PRESCRIBING REVIEWS**

- 6.1 NHS West Cheshire Clinical Commissioning Group has a duty to ensure that the local NHS budget is spent in an appropriate way.
- 6.2 The Governing Body is responsible for ensuring that all agreed actions are carried out by healthcare professionals according to this policy.
- 6.3 Implementation of the policy will be monitored via ePACT data and recorded within the CCG Financial Recovery Plan.

## Appendix 1. Examples of medicines that can be purchased over-the-counter for the treatment of minor, short-term conditions\*

\*Note: this list and examples given is not exhaustive.

Product category	Example products
Simple analgesics	Paracetamol tablets and capsules Paracetamol liquid Co-codamol 8/500 tablets and capsules
Topical pain relief	Ibuprofen gel/cream/spray Diclofenac gel/cream/spray
Oral antihistamines	Loratadine Cetirizine Chlorphenamine
Steroid nasal sprays	Beclometasone Fluticasone
Dental products	Mouthwashes Teething gel Toothpaste
Sore throat/mouth ulcer products	Sore throat lozenges Sore throat sprays Sore mouth gels
Decongestant nasal sprays and tablets	Pseudoephedrine tablets Sodium chloride nasal spray Xylometazoline/Oxymetazoline/Ephedrine nasal sprays
Sunscreens	High factor sunscreens, branded or own brand
Vaginal moisturisers	Lubricant gels/creams Feminine washes
Warts and verrucae	Salicylic acid and/or lactic acid ointment/solution/plasters/gels/paints
Topical circulatory products	Heparinoid gel/cream
Cosmetic moisturisers	Bio-Oil <sup>®</sup> , Lotil <sup>®</sup>
Antiperspirants	Aluminium chloride sprays/roll-ons/solutions
Ear wax removers	Olive oil Oil-based ear drops Hydrogen peroxide-based ear drops

**NOTE: Patients requiring high strength fluoride toothpastes that cannot be purchased over the counter should be referred to their dentist.**

## Appendix 2. Examples of products with little or no proven clinical or cost-effectiveness\*

\*Note: this list is not exhaustive.

<b>Product category</b>	<b>Example products</b>
Cough preparations	Simple linctus, pholcodine linctus, branded cough medicines
Eye care products	Eye washes, cosmetic eye drops
Rubifacients	Heat rubs, green lipped mussel gel
Herbal remedies	
Probiotics	
Vitamins, minerals and health supplements	Multivitamins, Co-enzyme Q10, vitamins and minerals for eye health including macular degeneration, glucosamine products (with or without chondroitin)
Homeopathic remedies	

### Appendix 3. Examples of products used for conditions where there may be no clinical need to treat\*

\*Note: this list is not exhaustive.

Product category	Example products
Mild acne	Abrasive agents, benzoyl peroxide and other topical treatments (including products that cannot be purchased over the counter)
Cradle cap	cradle cap shampoos
Dandruff	Tar shampoos, antifungal products

**Note –there is some overlap between Appendices 2 and 3**

#### **Appendix 4. Minor ailments covered by the Pharmacy First scheme.**

**This section will be updated once the future of the service has been agreed and the contract and service specification have been amended.**

## **Appendix 5. References/resources and associated documents**

[Patient letter](#) (to be issued by GP Practices to all registered patients affected by the decision)

Prescribing for clinical need and gluten-free foods policy. Heywood Middleton and Rochdale Clinical Commissioning Group.

Guidance on self-care prescribing, v1.0, January 2016. Warrington Clinical Commissioning Group.

Self care for minor ailments. T8 January 2015 V 2.0. PrescQIPP. Available at: <https://www.prescqipp.info/resources/send/141-self-care-webkit/1748-t8-self-care-for-minor-ailments>. Accessed 5<sup>th</sup> August 2016.

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### **Acknowledgements:**

Medicines Management Team, Midlands and Lancashire Commissioning Support Unit (Warrington)

Communications Team, Warrington Clinical Commissioning Group

Medicines Management Team, Heywood, Middleton and Rochdale Clinical Commissioning Group.