



Registered Charity No 292157

### Patient Participation Group feedback to the NHS England consultation on items which should not be routinely prescribed in primary care

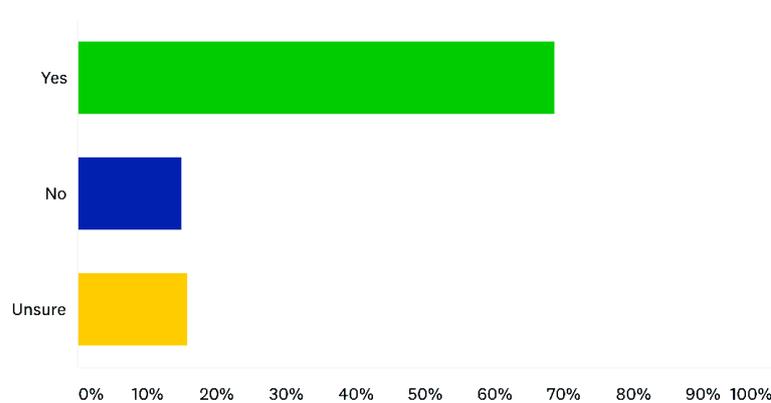
The National Association for Patient Participation, N.A.P.P. is very interested in the NHS England consultation on guidance for Clinical Commissioning Groups (CCGs) on items which should not be routinely prescribed in primary care.

N.A.P.P. is a national membership organisation for Patient Participation Groups (PPGs) and our membership is primarily PPGs based in local GP practices.

We have carried out a short survey of our members and offer the following feedback to the consultation. We have deliberately not directly replicated the detailed questions of the NHS England consultation itself (although we encouraged patients to complete the survey as individuals), but rather sought to ask PPGs to respond to higher-level questions.

A total of 464 PPGs responded to our survey.

*We asked Do you agree with the principle of CCGs not allowing the prescribing of medications of limited or low clinical effectiveness?*



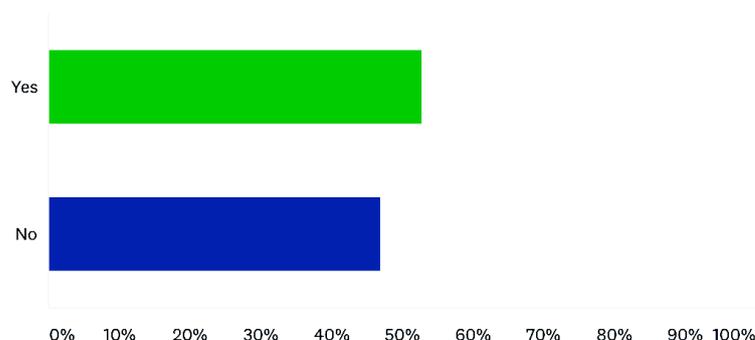
ANSWER CHOICES	RESPONSES	
Yes	68.90%	319
No	15.12%	70
Unsure	15.98%	74
<b>TOTAL</b>		<b>463</b>

Overall, 69% of respondents agreed with the principle of CCGs not allowing the prescribing of medication of low or limited clinical effectiveness, with the other 31% being split almost equally between disagreeing, or being unsure about this principle. Some felt such a move would help underscore the fact that the NHS does not have a “bottomless pit” of money to fund everything patients might want.

## NATIONAL ASSOCIATION FOR PATIENT PARTICIPATION

We then asked *Do you see any possible unintended consequences from CCGs not allowing the prescription of medications of limited or low clinical effectiveness?*

This generated the following response rates:



ANSWER CHOICES	RESPONSES	
▼ Yes	52.98%	240
▼ No	47.02%	213
<b>TOTAL</b>		<b>453</b>

Whilst a majority of our respondents support the *principle* of not allowing the prescribing of medication of low or limited clinical effectiveness, 53% of them felt there were possible unintended consequences that might follow from CCGs not allowing the prescription of medications of limited or low clinical effectiveness.

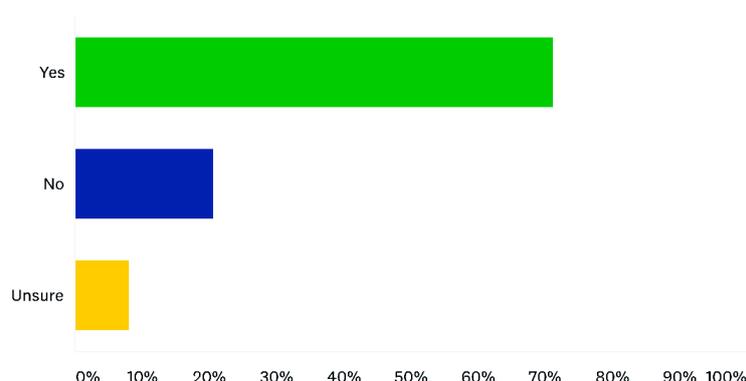
There were themes identified in the narrative responses which included the following:

- A concern that those on low income such as those on benefits or having to use food banks might have to “ration” their medications that have some clinical benefit
- For some conditions, a medication of limited clinical effectiveness may be more effective when used in combination with another medication than when used on its own; such an option should still be available to clinicians
- There should be a case by case review, as the impact on individual patients of withdrawing certain medications may be greater than for others, particularly for some vulnerable people, and for some, alternative medications may not always be appropriate or available
- There is a risk that people replace GP-monitored medication with self-medication, including sourcing replacement medication from less reliable sources, such as through the internet
- There may be a risk of patients replacing medications of limited effectiveness with products of even less effectiveness or clinical safety, if resorting to self-medication
- For some with, for example, intense pain, even limited or low clinical effectiveness can make a difference and help ease their situation
- If patients self-medicate, this may mean GPs are unaware of possible contra-indications of different medication
- The inherent risk in people contracting illness, such as through not taking travel vaccines, could have a greater impact and subsequent cost to the NHS than the prescription itself

## NATIONAL ASSOCIATION FOR PATIENT PARTICIPATION

We then asked *Do you agree with the principle of CCGs not allowing the prescribing of medications that are cheaply available over the counter?*

This generated the following response rates:



ANSWER CHOICES	RESPONSES	
▼ Yes	71.27%	325
▼ No	20.61%	94
▼ Unsure	8.11%	37
<b>TOTAL</b>		<b>456</b>

71% of our respondents agreed with the principle of not allowing the prescribing of medications that are cheaply available over the counter. Some felt this was an obvious way in which the NHS could – and should – save some money, though others questioned the scale of the budgetary savings.

However, 61% of respondents thought there were possible unintended consequences to this approach. The themes identified by respondents included:

- A concern that those on low income such as those on benefits or having to use food banks might have to “ration” their medications that have some clinical benefit, or indeed be discriminated against if they are from households that use certain medications frequently
- It cannot be assumed that patients taken off prescribed medicines will then actually buy them over the counter
- Concern that this approach is a “sledgehammer to crack a nut”
- Concern that those with chronic illness may not be able to afford over the counter medication in the quantities they need
- Concern that those requiring higher quantities of over the counter medications may be limited by the quantities that can be bought in one go (e.g. painkillers). This could be exacerbated for people in rural communities or with similar limited regular access to a pharmacy
- Concern that people might resort to bulk buying online medication from disreputable sources, which may be poorly regulated, may be inappropriate for the patient’s conditions, and for which the patient may not understand contra-indications, as well as the potential knock-on impacts of lack of information a GP may have about such self-medication if the patient doesn’t inform their GP

## NATIONAL ASSOCIATION FOR PATIENT PARTICIPATION

- Recognition that people with multiple long-term conditions may have a number of items that are available over the counter, and the cumulative cost of buying a number of “cheap” medications may prove prohibitive
- People may use out of date medication rather than replacing it with more effective up to date medication
- Risk of patients seeking prescribed stronger medications (e.g. painkillers) with greater side-effects, as these remain available on prescription without a charge, rather than buying less strong, over the counter medication
- The setting of the threshold for what is “cheap” needs considering, e.g. a specialist but over the counter cream may cost in excess of £5. It is not just about access to generic painkillers

We asked respondents to identify any patient groups they believed would be more greatly affected by these proposals. The following categories were identified:

- People with low income (86 respondents)
- Older people (75 respondents)
- People with multiple long term conditions (35 respondents)
- People on benefits (20 respondents)
- People with limited transport/ access to pharmacies (17 respondents)
- People with mental health issues (16 respondents)
- People with learning disabilities (11 respondents)
- People with physical disabilities (11 respondents)
- Children in low income families (less than ten respondents)
- People from ethnic minorities (less than ten respondents)
- Refugees and asylum seekers (less than ten respondents)
- People with coeliac disease (less than ten respondents)

**In order to minimise the impact of the proposed changes in prescribing practice, N.A.P.P. offers the following recommendations resulting from this survey:**

- **A medication of low clinical effectiveness may be valuable to some individuals with chronic or long-term conditions and GPs should retain prescribing options on them**
- **There needs to be comprehensive, patient-focused advertising to explain the changes to the public that give people the time to adapt to different arrangements. PPGs could play a role in this**
- **GPs know their patients and should retain the option of prescribing “cheap” medication if there is a high risk the patient will not be able to pay for over the counter alternatives**
- **Patients need to be supported to understand the potential impact of contra-indications of over the counter medications, and the importance of sharing information with their GP about any self-medication and it being noted on their records**
- **Online purchase of medicines, particularly in bulk, should be advised against**