

Conditions for which over the counter items should not routinely be prescribed in primary care:
Guidance for CCGs

SCOPE AND PURPOSE OF THE POLICY

The Self-Care Policy sets out the Clinical Commissioning Group's approach to ensure that:

- **Prescribing of medicines and treatments that are available to purchase over-the-counter is stopped if one of the following criteria is met:**
 - 1. The condition for which the medication or treatment is prescribed is considered to be self-limiting**
 - 2. The condition for which the medication or treatment is prescribed is considered suitable for self-care**
 - 3. The medication or treatment prescribed has insufficient evidence of benefit**
- **Prescribers are supported in implementing this decision**

This policy will ensure equity of service for all residents of Oldham and will allow the same expectation of what will be provided from the GP Practice or other services.

This policy applies to all services contracted by or delivered by the NHS across Oldham including:

- a) GP Practices – GPs and all other Prescribers
- b) Out of hours and extended hours primary care providers
- c) Acute Hospitals
- d) Out-Patient Clinics
- e) NHS Community Providers
- f) Independent providers
- g) Community pharmacies
- h) Opticians
- i) Dentists

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

Oldham CCG has a duty to ensure that the local NHS budget is spent in an appropriate way.

The Governing Bodies are responsible for ensuring that all agreed actions are carried out by healthcare professionals according to this policy.

Implementation of the policy will be monitored via ePACT2 and IMPACT data.

Equality Statement

Promoting equality and addressing health inequalities are at the heart of Oldham CCG's values. Throughout the development of the policies and processes cited in this document, we have:

- Given due regard to the need to eliminate discrimination, harassment and victimisation, to advance equality of opportunity, and to foster good relations between people who share a relevant protected characteristic (as cited under the Equality Act 2010) and those who do not share it; and
- Given regard to the need to reduce inequalities between patients in access to, and outcomes from healthcare services and to ensure services are provided in an integrated way where this might reduce health inequalities.

MEDICINES AVAILABLE OVER-THE-COUNTER, USED FOR SELF-LIMITING CONDITIONS OR CONDITIONS SUITABLE FOR SELF-CARE

Most minor ailments are either self-limiting or suitable for self-care. 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.

Patients with minor, self-limiting conditions and conditions suitable for self-care will be signposted to community pharmacies, or other outlets such as supermarkets and local shops, to purchase over-the-counter treatments.

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 community pharmacies are often open for longer hours than GP Practices and are also open at weekends.

Secondary Care and other providers will support self-care interventions and signpost patients to the community pharmacy if appropriate, particularly where patients have presented inappropriately to A&E, urgent care centres or out of hours services.

People will be encouraged to be responsible for their own health and well-being, by all healthcare professionals.

Patient information leaflets are available for specific conditions, either via sources such as NHS Choices or via the GP Practice prescribing system, to ensure that people are made aware of warning signs or symptoms that would require them to see their GP. Patient education during appointments may help to reduce repeat consultations for similar conditions whilst ensuring appropriate safety-netting is in place.

PRODUCTS WITH INSUFFICIENT EVIDENCE OF BENEFIT

Many of the products in this category are not licensed drugs under the Medicines Act. This means that they have not undergone the stringent testing laid down by the regulatory authorities to confirm their safety, quality and efficacy. There is no summary of product characteristics (SPC) for prescribers to consult and hence no indemnity for prescribers should the treatment cause harm.

Many of these products are classed as 'food substitutes' and do not appear in the current British National Formulary (BNF) or the Drug Tariff. They are often not manufactured to the same high pharmaceutical standards used for licensed medicines; hence there is no guarantee of consistency in formulation and potency. These treatments will not have undergone rigorous clinical trials to demonstrate that they are effective.

It is inappropriate to direct NHS resources towards products that do not have proven efficacy or safety in preference to licensed medicines.

General exceptions to the policy:

- Patients prescribed an OTC treatment for a long term condition (e.g. regular pain relief for chronic arthritis or treatments for inflammatory bowel disease).
- For the treatment of more complex forms of minor illnesses (e.g. severe migraines that are unresponsive to over the counter medicines).
- For those patients that have symptoms that suggest the condition is not minor (i.e. those with red flag symptoms for example indigestion with very bad pain.)
- Treatment for complex patients (e.g. immunosuppressed patients).
- Patients on prescription only treatments where OTC products would not be suitable.

- Patients prescribed OTC products to treat an adverse effect or symptom of a more complex illness and/or prescription only medications should continue to have these products prescribed on the NHS (e.g. Dry eyes due to Sjögren's syndrome).
- Circumstances where the product licence doesn't allow the product to be sold over the counter to certain groups of patients. This may vary by medicine, but could include babies, children and/or women who are pregnant or breast-feeding. Community Pharmacists will be aware of what these are and can advise accordingly.
- Patients with a minor condition suitable for self-care that has not responded sufficiently to treatment with OTC products.
- Patients where the clinician considers that the presenting symptom is due to a condition that would not be considered a minor condition.
- Individual patients where the clinician considers that their ability to self-manage is compromised as a consequence of medical, mental health or significant social vulnerability to the extent that their health and/or wellbeing could be adversely affected, if reliant on self-care.
- To note that being exempt from paying a prescription charge does not automatically warrant an exception to the guidance. Consideration should also be given to safeguarding issues.

The medicines referred to in this policy are all readily available from community pharmacies and in many cases from supermarkets and other outlets. The cost to the patient will vary depending on the condition being treated, treatment length and where the product is purchased. Paracetamol cost as little as 19p for 16 tablets whereas head lice treatments may cost around £5.00 for a single person treatment or as much as £12.00 for a family pack (although wet combing is inexpensive and is the preferred method of treatment).

Professional and contractual context for prescribers

During discussion with the patient, when considering what treatment and ongoing monitoring is required, prescribers are asked to be mindful of the following:

- That GPs have clinical freedom to act in an individual patient's best interest where exceptional clinical circumstances exist that warrant deviation from this policy. Any such decisions should be recorded clearly in the patient's clinical record.
- That within their Primary Medical Services contract with NHSE, GPs have a contractual obligation relating to patients to make available such treatment (including any prescription deemed to be appropriate after discussion with the patient) as is necessary and appropriate, and to provide advice in connection with the patient's health, including relevant health promotion advice.
- That reference to local prescribing guidelines is good professional practice.
- That consideration of GMC professional obligations to use NHS resources wisely is good professional practice.

References/resources and associated documents

- Selfcare 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>
- Putting the self into self-care. Annual review 2014. Proprietary Association of Great Britain. Available at: <http://www.pagb.co.uk/publications/pdfs/annualreview2014.pdf>
- The NHS Plan. A plan for investment. A plan for reform. July 2000. Department of Health. Available at: http://webarchive.nationalarchives.gov.uk/20130502102046/http://www.connectingforhealth.nhs.uk/resources/policyandguidance/nhs_plan.pdf
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