

St Helens CCG Self Care Policy

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REVISIONS

Date	Section	Reason for Change	Approved By
		Not Applicable	

PRESCRIBING POLICY: SELF CARE

NHS St Helens 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 St Helens 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 believes exceptional circumstances exist that warrant deviation from the rule of this policy.

Contents

1. Introduction
2. Scope and Purpose
3. Medicines and treatments available to buy over-the-counter, used for short-term, minor medical conditions.
4. Medicines and treatments where there is limited evidence of clinical benefit or cost-effectiveness.
5. Medicines and treatments that are prescribed to treat conditions where there is no clinical need for treatment.
6. Self-care prescribing reviews
7. Prescribing of medication available via the Care at the Chemist scheme

Appendix 1 – Examples of medicines for self-care (minor condition, short-term)

Appendix 2 – Examples of products with little or no proven clinical or cost-effectiveness

Appendix 3 – Examples of products for conditions where there is no need to treat

Appendix 4 – Care at the Chemist Minor Ailments Service

Appendix 5 - References/ resources and associated documents

Appendix 6 - Non-prescription (over the counter (OTC)) medications in nurseries and schools

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, 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 St Helens CCG spent approximately £1m 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 St Helens 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 St Helens 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 St Helens 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 St Helens (permanent or temporary resident) or who access a NHS service in St Helens.

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 St Helens Clinical Commissioning Group commissions a Community Pharmacy Minor Ailments Service (Care at the Chemist - see Appendix 4).
- 3.5 People will be encouraged to be responsible for their own health and well-being, by all healthcare professionals.
- 3.6 Patient information leaflets are available for certain conditions, either via sources such as NHS Choices or via the GP Practice prescribing system (e.g. 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 St Helens 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 St Helens Clinical Commissioning Group already has guidance in place to prevent the prescribing of some of these products, (e.g. glucosamine supplements, vitamin products specifically for eye health and homeopathic remedies) and can be accessed via the Pan Mersey Area Prescribing Committee Formulary

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 St Helens 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.

7. PRESCRIBING OF MEDICATION AVAILABLE VIA THE CARE THE CHEMIST SCHEME

- 7.1 On occasions when patients present at their surgery with a primary condition warranting a prescription (e.g. antibiotics), the associated prescribing of products for short term symptomatic relief (e.g. paracetamol) can be undertaken by the surgery. In this instance paracetamol is not being used to treat a minor ailment and should not be available via Care at the Chemist. Patients may however choose to buy these additional products instead of receiving them on prescription.

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 [®] , Lotil [®]
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.

Product category	Example products
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 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 Care at the Chemist scheme.

Indication	Treatment	Notes
Acute bacterial conjunctivitis	Chloramphenicol 0.5% eye drops (10ml)	For ages 2 years and over.
	Chloramphenicol 1% eye oint. (4g)	For ages 2 years and over.
Allergy	Loratadine 10mg tablets (7)	For ages 12 years and over.
	Sodium cromoglycate 2% eye drops (10ml)	For adults and children 2 years and over.
	Beclometasone 50mcg/metered dose nasal spray (100 dose)	For ages 18 years and over.
	Loratadine 5mg/5ml syrup (100ml)	For ages 2 years and over.
	Chlorphenamine tabs 4 mg (28)	For ages 12 years and over.
	Chlorphenamine syrup 2mg/5ml (150ml)	For ages 2 year and over.
	Hydrocortisone cream 1% (15g)	For ages 10 years and over.
		Season-long treatment of hay fever is not covered by the CATC scheme.
Athlete's foot	Terbinafine 1% cream (7.5ml)	For ages 16 years and over.
	Clotrimazole 1% cream (20g)	For ages 1 year and above
Chesty cough	Guaifenesin 100mg/5ml liquid (100ml)	For ages 12 years and over.
	Simple linctus paediatric sugar free (200ml)	For ages 1 to 12 years.
	Simple linctus (200ml)	For ages 12 years and over.
Cold sores	Aciclovir 5% cream (2g)	For ages 1 year and over. Should not be recommended if the blisters are already present.
Constipation	Ispaghula husk 3.5g sachets (10)	For ages 12 years and over.
	Lactulose liquid (500ml)	For ages 1 to 12 years
	Senna 7.5mg tablets (20)	For ages 12 years and over.
Contact Dermatitis	Hydrocortisone 1% cream (15g)	For ages 10 years and over.
Cystitis	Potassium Citrate mixture (200ml)	For females aged 16 -70 years.
Diarrhoea	Oral rehydration sachets (Dioralyte 6 sachets)	For ages 2 years and over.
	Dioralyte relief (6 sachets)	For ages 1 year and over

Indication	Treatment	Notes
	Loperamide 2mg caps (6)	For ages 12 years and over.
Dry cough	Simple linctus 200ml	For ages 12 years and over.
	Simple linctus paediatric sugar free 200ml	For ages 1-12 years.
	Pholcodine linctus 200ml	For ages 12 years and over.
Ear Wax	Olive Oil (10ml)	For ages 12 years and over
	Sodium Bicarbonate 5% ear Drops (10ml)	For ages 12 years and over
Haemorrhoids	Anusol oint (23g)	For ages 12 years and over.
	Anusol suppositories (12)	For ages 12 years and over.
Headache , pain and temperature	Paracetamol 500mg soluble tablets (24)	For ages 12 years and over.
	Paracetamol 500mg tablets (32)	For ages 12 years and over.
	Paracetamol 120mg/5ml susp. sugar free 100ml	For use in line with OTC product licence
	Paracetamol 250mg/5ml susp. sugar free 100ml	For use in line with OTC product licence
	Ibuprofen 200mg tablets (24)	For ages 12 years and over.
	Ibuprofen 100mg/5ml susp. sugar free 100ml	For use in line with OTC product licence
		Give special consideration to the signs and symptoms of meningitis.
Head lice	Malathion 0.5% aqueous liquid- Derbac M (2 x 50ml)	For ages 1 year and over.
	Dimeticone 4% lotion- Hedrin (2 x 50ml)	For ages 1 year and over.
		Choice of therapy should reflect that locally agreed under the 'mosaic' approach to reduce resistance. Supply two applications.
Indigestion and heartburn	Gaviscon advance (300ml)	For ages 12 years and over.
	Ranitidine 75mg (6)	For ages 16 years and over.
	Mucogel suspension (500ml)	For ages 12 years and over.

Indication	Treatment	Notes
Infant Colic	Simeticone 40mg/ml Oral Suspension SF (50ml)	For use from birth onwards The most useful intervention is advice and support for parents, and reassurance that infantile colic will resolve. Only consider trying medical treatment if parents feel unable to cope despite advice and reassurance.
	Chlorhexidine 0.2% w/v mouthwash (300ml)	For ages 12 years and over.
Mouth ulcers	Anbesol liquid (6.5ml)	For ages 1 year and over.
	Bonjela teething gel 15G	For ages 1 year and over.
		Give special consideration to the signs and symptoms of oral cancer.
Nappy Rash	Zinc and Castor Oil Ointment BP (100g)	Contains peanut oil For use from birth onwards
	Metanium Nappy Rash Ointment (30g)	For use from birth onwards
Nasal congestion	Menthol and eucalyptus inhalation BP (100ml)	For ages 6 years and over. Caution in children.
	Sodium chloride 0.9% nasal drops (10ml)	For ages 1 year and over.
	Xylometazoline 0.1% nasal drops or spray (10ml)	For ages 12 years and over.
	Pseudoephedrine 60mg tablets (12)	For ages 12 years and over.
	Pseudoephedrine 30mg/5ml elixir (100ml)	For ages 6 years to 12 years.
Oral thrush	Miconazole 20mg/g oral gel (15g)	For ages 1 year and over.
Sore throats	Paracetamol 500mg tablets (32)	For ages 12 years and over.
	Paracetamol 500mg soluble tablets (24)	For ages 12 years and over.
	Paracetamol 120mg/5ml susp sugar free 100ml	For ages 1 year to 6 years.
	Paracetamol 250mg/5ml susp sugar free 100ml	For ages 6 year to 12 years.
	Aspirin 300mg soluble tablets (32)	For ages 16 years and over.
	Ibuprofen 200mg tablets (24)	For ages 12 years and over.
	Ibuprofen 100mg/5ml susp. sugar free 100ml	For ages 1 year to 12 years.

Indication	Treatment	Notes
Teething	Dentinox Teething Gel (10g) Ingredients: Lidocaine Hydrochloride BP 0.33 %w/w Cetylpyridinium Chloride BP 0.10 %w/w	For use from birth onwards
	Bonjela Teething Gel (15g) Active ingredient: %w/w Specific'n Lidocaine 0.33 BP hydrochloride1 Cetalkonium chloride 0.01 HSE 1 - Equivalent to 0.27% w/w of Lidocaine base. Excipients: Also contains Ethanol (33.45%w/w)	For ages 2 months and over
Threadworm	Mebendazole 100mg chewable tablets (2)	For ages 2 years and over.
	Pripsen 4g sachets (2)	For ages 1 year and over.
Thrush -Genital	Canestan Combi (op)	For ages 16 year to 60 years.
	Clotrimazole 1% cream 20g	For ages 16 year to 60 years.
	Fluconazole 150mg capsule (1)	For ages 16 year to 60 years.
Warts and verrucas	Salactol wart paint 10ml	For ages 1 year and over.

Appendix 4 Patient letter

Dear Sir /Madam,

Treatments and medicines for short-term minor conditions/ ailments or where there is insufficient evidence of clinical benefit or cost effectiveness

NHS St Helens Clinical Commissioning Group recently undertook a formal public consultation regarding self-care prescribing in St Helens, proposing that patients buy medication for short-term minor conditions/ailments or where there is insufficient evidence of clinical benefit or cost effectiveness themselves, rather than being prescribed by their GP.

There was public support for this proposal from the consultation and therefore, the Clinical Commissioning Group has directed GPs to stop prescribing these treatments and medicines. Patients will be expected to buy the treatments and medicines themselves over-the-counter at a local pharmacy (or supermarket).

Your prescription for has been reviewed and your doctor now feels that it is appropriate to stop prescribing this (amend as appropriate)

..... is available to buy over-the-counter at your local pharmacy (or supermarket) (amend as appropriate).

If you would like to discuss this further or you have any concerns please contact the Clinical Commissioning Group's Patient Advice and Liaison Service (PALS) Tel: 0800 218 2333.

Appendix 5 References/resources and associated documents

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..>

Five Year Forward View. NHS England. October 2014. Available at: <https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf>.

Acknowledgements:

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

Communications Team, Warrington Clinical Commissioning Group

Medicines Management Team, West Cheshire Clinical Commissioning Group

Appendix 6 Non-prescription (over the counter (OTC)) medications in nurseries and schools

GPs in St Helens will no longer accept requests for prescriptions for non-prescription (over the counter (OTC)) medicines solely for the purposes of allowing administration within a nursery or school setting.

The MHRA licenses all medications and classifies them as over-the counter when it considers them safe and appropriate to be used without prescription.

Medicine purchased OTC to treat minor self-limiting conditions contain dosage instructions and patient information leaflets with information relating to the medicine.

It is therefore appropriate for OTC medicines to be given, or authorised, by parents when they consider it necessary. This may be in a home or nursery or school environment.

The relevant Department of Education guidelines supporting this are detailed below:

Nurseries

The Statutory Framework for the Early Years Foundation Stageⁱ governs the standards of institutions looking after and educating children from birth to 5 years

Section 3.45 and Section 3.46 relate to medications and state the following:

“3.45. Prescription medicines must not be administered unless they have been prescribed for a child by a doctor, dentist, nurse or pharmacist (medicines containing aspirin should only be given if prescribed by a doctor).”

“3.46. Medicine (both prescription and non-prescription) must only be administered to a child where written permission for that particular medicine has been obtained from the child’s parent and/or carer. Providers must keep a written record each time a medicine is administered to a child, and inform the child’s parents and/or carers on the same day, or as soon as reasonably practicable.”

There is a clear distinction made between prescription and non-prescription medications. Therefore a non-prescription (over the counter) medication can be administered by a member of staff in a nursery or school as long as written permission has been obtained from a child’s parent or carer and a written record of administration is kept.

A prescription is only necessary for administration of a prescription only medication.

Schools

Department of Education guidance for governing bodies of maintained schools & proprietors of academies in England “Supporting Pupils at School with Medical Conditions - December 2015”ⁱⁱ states

“Wherever possible, children should be allowed to carry their own medicines and relevant devices or should be able to access their medicines for self-medication quickly and easily. Children who can take their medicines themselves or manage procedures may require an appropriate level of supervision. If it is not appropriate for a child to self-manage, relevant staff should help to administer medicines and manage procedures for them.”

Children should therefore be allowed to self-medicate where appropriate

“No child under 16 should be given prescription or non-prescription medicines without their parent’s written consent – except in exceptional circumstances where the medicine has been prescribed to the child without the knowledge of the parents. In such cases, every effort should be made to encourage the child or young person to involve their parents while respecting their right to confidentiality. Schools should set out the circumstances in which non-prescription medicines may be administered”

“A child under 16 should never be given medicine containing aspirin unless prescribed by a doctor. Medication, e.g. for pain relief, should never be administered without first checking maximum dosages and when the previous dose was taken. Parents should be informed”

This makes clear that non-prescription medicines can be administered with written permission from the child’s parent. There is no requirement for a prescriber to provide consent for the administration of a non-prescription medication.

Schools should only accept prescribed medicines if these are in-date, labelled, provided in the original container as dispensed by a pharmacist and include instructions for administration, dosage and storage. The exception to this is insulin, which must still be in date, but will generally be available to schools inside an insulin pen or a pump, rather than in its original container

This makes clear that the requirements for labelling of medications with instructions for administration only applies to prescribed medications.

ⁱ Department for Education. Statutory framework for the early years foundation stage. Effective 3rd April 2017.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/596629/EYFS_STATUTORY_FRAMEWORK_2017.pdf

ⁱⁱ Department for Education Supporting pupils at school with medical conditions. December 2015.
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/638267/supporting-pupils-at-school-with-medical-conditions.pdf