

Mr Peter Howarth
Head of Medicines Management
Tameside & Glossop CCG

**Chair of the Integrated Care and Wellbeing
Scrutiny Panel**

Councillor Gillian Peet

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Ask for: Paul Radcliffe
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Dear Mr Howarth,

Consultation re Over the Counter Medicines

I write on behalf of Tameside Council's Integrated Care and Wellbeing Scrutiny Panel. Members would like to thank you for attending the meeting of 26 July 2018, at which you provided a detailed overview of the new NHS England guidance relating to over the counter medicines, prescribing practices within primary care and local engagement and consultation activity that is underway.

As discussed at the meeting on 26 July 2018, the Scrutiny Panel seeks to submit a formal response to the consultation, which closes on 14 September 2018. This letter therefore aims to provide a summary of collective discussion points and to express any issues and concerns raised at the meeting.

I would be extremely grateful if on receiving this letter you are able to take the appropriate action to ensure responses of panel members are submitted to the consultation and that dialogue on this matter between the Clinical Commissioning Group and Scrutiny Panel is suitably recorded.

In order to effectively promote self-care within Tameside communities and the responsibility of individuals in treating self-limiting conditions, members highlighted a number of points for consideration when supporting a future decision on how the new NHS England guidance is to be interpreted and adopted at a local level.

It is important that the guidance is considered alongside the broader aims to reduce demand across primary care and urgent care. Panel members also acknowledge the significant progress Tameside, as an area, is making to improve awareness of self-care and system navigation through the Care Together programme.

Concerns were expressed in relation to wider complexities of a primary care prescribing system that supports the most vulnerable, requires the individual discretion of GPs and one that is ineffective in parts.

I have listed some of the main discussion points below, which are to be viewed as individual responses from panel members, under the collective of a main panel.

- This is closely connected with the need to improve triage methods across the local healthcare system and also the behavioural change in the way residents will be able to seek advice and medication for certain conditions, without a need to book GP appointment.
- This is a positive opportunity to educate residents in making a decision to seek health advice or care. For example, alternatives to include local pharmacies.
- The new NHS England guidance is open to self-interpretation of local Clinical Commissioning, with a limited ability to influence GP prescribing.
- What, if any, are the barriers and challenges for GPs to change approach? There is a need to explore this further by practice and demographical insight.
- Wider impact of deprivation on health outcomes. Residents who currently qualify for free prescriptions may not be able to afford medication sold at a pharmacy. This could discourage GP attendance by deprived and vulnerable groups, therefore contributing to less informed health choices and worse outcomes.
- A need to further examine socio-economic factors for Tameside when determining how best to adopt guidance. What may work for other authorities not necessarily suitable for Tameside.
- Risks associated with the possibility of people with a minor condition not attending the GP, which could lead to a major health problem.
- When planning to support the most vulnerable residents – options to reduce or remove costs for over the counter medication?
- This has the ability to improve outcomes for residents who pay for prescriptions, where medication at a pharmacy may be cheaper than the prescription charge and faster to obtain.
- Positive comments that the wider engagement and consultation work undertaken will support informed local decisions and help raise general awareness.
- Concerns were raised about an individual's confidence to seek alternative approaches and to determine whether certain conditions are minor or self-limiting.
- A future decision will require comprehensive understanding and analysis of local social and financial vulnerabilities.
- General feeling that this may be easier for residents who already pay for their prescriptions and more difficult for residents in receipt of free prescriptions.

If any further clarity is needed around any of the above points, please do not hesitate to contact me.

Yours sincerely,

Councillor Gillian Peet

Chair - Integrated Care and Wellbeing Scrutiny Panel