

Cambridgeshire and Peterborough Clinical Commissioning Group

**Consultation on a future model for Pharmacy Services in Cambridgeshire &
Peterborough**

22 March 2016 – 24 May 2016

**This 9 week consultation is to gather feedback on Community Pharmacy Minor
Ailment Schemes, Prescribing of Gluten-free Foods, and Prescribing Baby Milk**

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This consultation is aimed at patients living in Cambridgeshire and Peterborough Clinical Commissioning Group's area.

This document is available in other languages and formats on request.

To request alternative formats, or if you require the services of an interpreter, please contact us on:

- 01223 725304 or • capccg.engagement@nhs.net

Pokud byste požadovali informace v jiném jazyce nebo formátu, kontaktujte nás

જો તમને માહિતી બીજી ભાષા અથવા રચનામાં જોઈતી હોય તો, કૃપા કરી અમને વિનંતી કરો.

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The consultation document and process

You can give your views in a number of ways:

- Fill in the questionnaire found online on the CCG's website www.cambridgeshireandpeterboroughccg.nhs.uk
- Fill in the paper copy of the questionnaire found on page XX of this consultation document and send it FREEPOST to Freepost Plus RSCR-GSGK-XSHK, Cambridgeshire and Peterborough CCG, Lockton House, Clarendon Road, Cambridge CB2 8FH. (You do not need a stamp).
- Phone the Engagement Team on 01223 725304.
- If you belong to a group or organisation, you can invite us along to one of your meetings by contacting our Engagement Team on 01223 725304 or by email to capccg.engagement@nhs.net, putting Pharmacy Consultation in the subject field.

Come along to one of the public meetings listed in Appendix 1.

Who we are and what we do

Cambridgeshire and Peterborough Clinical Commissioning Group (CCG) is the organisation responsible for planning, organising and buying-in NHS-funded healthcare for people living in the Cambridgeshire and Peterborough area. It replaced NHS Cambridgeshire and NHS Peterborough (the Primary Care Trusts, or 'PCTs') on 1 April 2013.

We are one of the largest CCGs in England, by patient population, with 105 GP practices as members. We are organised into eight local groups, known as Local Commissioning Groups or LCGs, covering all GP practices in Cambridgeshire and Peterborough, as well as three practices in North Hertfordshire (Royston) and two in Northamptonshire (Oundle and Wansford).

We have a patient population of approximately 913,000 which is diverse, ageing and has significant inequalities. We manage a budget of around £940 million to spend on healthcare for the whole population of this area, which is just under £1,000 per person.

(Always check highlighted details as these do change regularly.)

We are responsible for commissioning GP prescribing and have continued to fund community pharmacy minor ailments schemes started by the 2 Primary Care Trusts

Introduction

Cambridgeshire and Peterborough health economy has been identified as one of England's 11 most financially challenged health economies.

If we do not change our health system substantially, then we face a funding shortfall of at least £250 million by 2019.

This will make it harder to deliver good quality care for everyone who needs it

To ensure we are making best use of the money available we are looking at which medicines and services from pharmacies and via prescriptions, are considered essential to be paid for by the NHS. Also whether or not it is appropriate for medicines and treatments which patients can buy themselves for minor illnesses should be routinely provided on prescription

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What is the 'Community Pharmacy Minor Ailment Scheme'?

The CCG currently supports two minor ailment schemes

- , 'Pharmacy First for Children' in Peterborough
- Cambridgeshire 'Minor Ailment Scheme' in Cambridgeshire

The Pharmacy First for Children scheme in Peterborough provides free medicines for common childhood ailments without the need to see the GP. These can be infant paracetamol for colds, anti-histamines for mild hay fever etc. People currently need to be registered with the scheme and bring the child with them to the pharmacy in order to be given these medicines. If the pharmacist is in any doubt they will advise further medical help, this could be a visit to the GP.

The Minor Ailments scheme in Cambridgeshire is the same but for adults and children. Both of these schemes will only provide approved, best value for money medicines, not branded varieties. These are available widely over the counter in all pharmacies and often in supermarkets at very low cost.

What are the issues that need to be addressed?

The local NHS wants to help patients to look after themselves when they can, and only visit the GP when they need to. This gives people control of their own health that help prevent ill health in the long-term.

The range of medicines that the Minor Ailment Scheme currently provides is commonly found in home medicine cabinets (paracetamol, anti-histamines etc). or are easily available to buy at a low cost in pharmacies or where appropriate non-pharmacy outlets such as supermarkets.

The Minor Ailments Schemes can be accessed irrespective of financial circumstances. A GP can still prescribe these medicines to people who need them for specific long term and significant illnesses.

Why are we consulting with you now?

Currently the CCG spends £230,000 a year on the two Minor Ailment Schemes. . Due to the serious financial problems, the CCG wishes to use this money to support front line services such as A&E departments, ambulances and operations.

Your feedback will be used to inform the decisions and recommendations of the CCG's Governing Body

What needs to change?

Our proposal is to stop the Minor Aliments Scheme for Cambridgeshire and the Pharmacy First for Children scheme in Peterborough. Patients will no longer be able to access free medications through the minor ailment schemes but will be able to continue to use their local pharmacy for confidential, expert advice but will be asked to purchase treatments for a range of common illnesses and complaints.

Patients can also get advice on a selection of essential medicines to purchase to keep at home. This can result in swift relief of symptoms and can avoid unnecessary trips to see the GP or even visits to A&E.

Patients will be asked to buy these medicines themselves. They will still be able to visit their GP if the patient feels unable to manage the condition themselves and the GP may decide to prescribe or recommend self purchase of the medicines.

What we are asking you.

The proposal for consultation is to stop the supply of free medications for minor and self limiting illnesses through the minor ailment schemes.

Patients and carers will in future use their local pharmacy to purchase medications.

We are asking for your thoughts on whether you think this is the right choice. Your feedback will be used to inform the decisions of the CCG's Governing Body.

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What is 'prescribing Gluten-free food'?

Currently it is possible for a GP to prescribe **gluten-free food** products on a prescription to patients diagnosed with gluten sensitivity. Gluten is a mixture of proteins found in wheat and related grains, including barley and rye. Gluten gives elasticity to dough, helping it rise and to keep its shape and often gives the final product a chewy texture. If it is consumed by someone with Coeliac Disease, gluten can cause an adverse reaction in the gut such as diarrhoea, flatulence, bloating or abdominal pain.

The prescriptions are for products such as gluten-free staples e.g. bread, flour or bread mix. Although this has historically been prescribed, this is not a medicine and gluten free food can easily be purchased from many supermarkets.

What are the issues that need to be addressed?

Having to be gluten-free does not stop you being able to have a healthy, nutritious and balanced diet with all the necessary vitamins and minerals. You can still eat all naturally gluten-free foods such as meat, fish, fruit, vegetables, rice and potatoes.

Why are we consulting with you now?

Currently the CCG provides £370,000 worth of gluten free food prescriptions a year. It is felt that this disease can be managed directly by the patient through their food buying choices without the need for gluten-free substitute foods on prescriptions. The CCG wants to use this money to support front line services such as A&E departments, ambulances and operations.

What needs to change?

The proposal is to stop prescribing gluten-free food to patients. Patients will be asked not to request gluten-free substitute foods on prescriptions and GPs will be asked not to provide gluten-free foods on prescription.

Advice and support from healthcare professionals will be made available throughout the consultation period as well as during and after the implementation of this proposal.

What we are asking you.

This proposal is a change to what a specific group of patients have been able to access historically by recommending that gluten-free substitute foods are no longer prescribed by GPs and the CCG wants to hear your views on whether you think this is the right choice.

Your feedback will be used to inform the decisions and recommendations of the CCG's Governing Body.

What is 'Prescribed Baby Milks'?

Infant formulas, commonly called **Baby Milks**, are manufactured food designed and marketed for feeding to babies and infants usually less than 12 months of age, prepared for bottle-feeding or cup-feeding from powder or liquid.

Whilst it can legitimately be provided on prescription for particular medical conditions, (see list below) many formulas can actually be purchased without a prescription and most are available in supermarkets. For the treatment of chronic long term conditions such as renal or liver disease or receiving treatment for cancer, such supplements would be prescribed on the advice of a specialist clinician.

What are the issues that need to be addressed?

Historically, it was difficult for patient's parents to get hold of infant formula used for cow's milk protein allergy or lactose intolerance as there was a limited range available on the high street. Today, society and manufacturers are much more aware of cow's milk protein allergy and lactose intolerance in infants. So much so, every major supermarket has infant formulas on their shelves as standard, with even more options available on the internet. This means there is an ever growing, wide range of infant formulas available without the need of a prescription.

Additionally alternatives to cow's milk such as soya, almond and goat milks are widely available as society seeks alternatives to traditional dairy production as well as lactose-free cow's milk also being freely available; all without a prescription.

The CCG is proposing to stop prescribing thickening formula, soya and stay down milks as these are also widely available to buy.

Why are we consulting with you now?

The CCG spends £1million annually on prescribing baby milks. With the exception of specialised formula for particular medical conditions, it is felt that this should be managed directly by the patient's parents through their choices without the need for baby milks on prescriptions and that the CCG can use this saving to support front line services such as A&E departments, ambulances and operations.

What needs to change?.

This proposal is a change to what a specific group of patients have been able to access historically by recommending that infant formulas are no longer prescribed by GPs (unless it is a specialised formula for particular medical conditions unavailable on the high street.)

What we are asking you?

The CCG wants to hear your views on whether you think this is the right choice.

Your feedback will be used to inform the decisions and recommendations of the CCG's Governing Body.

Appendix 1 – Public Meetings

The number and location of public meetings will change for each consultation.

Huntingdon		
Peterborough		
Cambridge		
Isle of Ely		
Wisbech		
Whittlesey		
St Neots		
Royston		

We will also attend other meetings organised by groups who are interested in these proposed changes. If you would like us to attend your meeting please contact us on the number below.

Meetings may be subject to change, so please do check our website www.cambridgeshireandpeterboroughccg.nhs.uk or contact the Engagement Team:

- Phone: 01223 725304
- Email: capccg.engagement@nhs.net

Appendix 2 – Glossary of terms

Cambridgeshire and Peterborough Clinical Commissioning Group (CCG)

Cambridgeshire and Peterborough CCG is the organisation responsible for planning, organising and purchasing NHS-funded healthcare for residents. A CCG is clinically-led, meaning that decisions about local health services are made by local doctors and health professionals, alongside patients. Cambridgeshire and Peterborough CCG has a patient population of approximately 913,000. It is a diverse, ageing population with significant health inequalities. We manage a budget of around £940 million to spend on healthcare for the whole population of this area.

Commissioning

Identifying health needs of local people, planning and purchasing health services which respond to their needs. CCGs are responsible for deciding what services their local residents need from the NHS and buy these services with public money from the most appropriate providers.

Pharmacy – A shop or part of a shop in which medicines are prepared and sold

Minor Ailments Scheme - The Minor Ailment Service (MAS) allows eligible individuals to register with and use a community pharmacy as the first port of call for the treatment of common illnesses on the NHS

Coeliac Disease - A medical condition in which the intestine reacts badly to a type of protein contained in some grains.

Non-coeliac gluten sensitivity - a syndrome in which patients develop a variety of intestinal and/or extra-intestinal symptoms that improve when gluten is removed from the diet

Prescriptions - A piece of paper on which a doctor writes the details of the medicine or drugs that someone needs

Repeat prescriptions - a prescription for a medicine that is needed regularly that can be reissued without the patient having to see the doctor

Appendix 4 - Legal requirements

This consultation document has been drawn up in accordance with the following legal requirements and guidance:

Cabinet Office Consultation Principles July 2012

This guidance sets out the principles that Government departments and other public bodies should adopt for engaging stakeholders when developing policy and legislation. It replaces the Code of Practice on Consultation issued in July 2008. The governing principle is proportionality of the type and scale of consultation to the potential impacts of the proposal or decision being taken, and thought should be given to achieving real engagement rather than merely following bureaucratic process. Consultation forms part of wider engagement and decisions on whether and how to consult should in part depend on the wider scheme of engagement.

Policy makers should bear in mind the Civil Service Reform principles of open policy making throughout the process and not just at set points of consultation, and should use real discussion with affected parties and experts as well as the expertise of civil service learning to make well informed decisions. Modern communications technologies enable policy

makers to engage in such discussions more quickly and in a more targeted way than before, and mean that the traditional written consultation is not always the best way of getting those who know most and care most about a particular issue to engage in fruitful dialogue.

The full consultation principles document can be accessed via the Cabinet Office website at: <https://www.gov.uk/government/publications/consultation-principles-guidance>

Section 14Z2 Health and Social Care Act 2012

14Z2 Public involvement and consultation by clinical commissioning groups

(1) This section applies in relation to any health services which are, or are to be, provided pursuant to arrangements made by a clinical commissioning group in the exercise of its functions ("commissioning arrangements").

(2) The clinical commissioning group must make arrangements to secure that individuals to whom the services are being or may be provided are involved (whether by being consulted or provided with information or in other ways)—

(a) in the planning of the commissioning arrangements by the group,

(b) in the development and consideration of proposals by the group for changes in the commissioning arrangements where the implementation of the proposals would have an impact on the manner in which the services are delivered to the individuals or the range of health services available to them, and

(c) in decisions of the group affecting the operation of the commissioning arrangements where the implementation of the decisions would (if made) have such an impact.

(3) The clinical commissioning group must include in its constitution—

(a) a description of the arrangements made by it under subsection (2), and

(b) a statement of the principles which it will follow in implementing those arrangements.

(4) The Board may publish guidance for clinical commissioning groups on the discharge of their functions under this section.

(5) A clinical commissioning group must have regard to any guidance published by the Board under subsection (4).

(6) The reference in subsection (2) (b) to the delivery of services is a reference to their delivery at the point when they are received by users.

For more on the Section 14Z2 Health and Social Care Act 2012 see <http://www.legislation.gov.uk/ukpga/2012/7/section/26/enacted>

Lansley Criteria for Significant Service Change

In May 2010, the Secretary of State for Health, Andrew Lansley, set four new tests that must be met before there can be any major changes to NHS Services:

1. Support from GP commissioners
2. Strengthened public and patient engagement
3. Clarity on the clinical evidence base
4. Consistency with current and prospective patient choice

You can read more about the CCG's duties to engage and consult in section 5.2 of the CCG's Constitution

<http://www.cambridgeshireandpeterboroughccg.nhs.uk/downloads/CPCT/Corporate%20documents/CCG%20Constitution.pdf>

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The questionnaire (to be formatted properly once the document is finalised. Also to be made available as an online survey.)

1. Do you understand why the CCG needs to make changes to the Pharmacy service?
Yes ☐ No ☐ Not really ☐

Comment

2. Do you think the changes outlined in this document will save money for the CCG?
Yes ☐ No ☐ Not sure ☐

Comment

3. Do you agree with the proposal to stop the two minor ailments schemes?
Pharmacy First for children in Peterborough. Yes ☐ No ☐ Undecided ☐
Minor Ailments scheme in Cambridgeshire. Yes ☐ No ☐ Undecided ☐

Comment

4. Do you understand that gluten-free food is not a medication that keeps you well?
Yes ☐ No ☐ Not sure ☐

Comment

5. Do you agree with the proposal to stop prescribing gluten-free foods?
Yes ☐ No ☐ Not sure ☐

Comment

6. Do you agree with the proposal to no longer prescribe infant formula, or baby milks, unless it is for a particular medical condition?
Yes ☐ No ☐ Not sure ☐

Comment

Your feedback

You can send your feedback to us in many different ways:

- By filling in the online survey
<http://www.cambridgeshireandpeterboroughccg.nhs.uk/have-your-say/>

- By filling in the survey attached to this document and returning it to:
Freepost Plus RSCR-GSGK-XSHK
Engagement Team
Cambridgeshire and Peterborough Clinical Commissioning Group
Lockton House
Clarendon Road
Cambridge
CB2 8FH
- or email your completed survey to: capccg.engagement@nhs.net

You can also:

- write to us with your views (at the address above)
- phone us on 01223 725304
- email us your views to capccg.engagement@nhs.net
- attend one of the planned meetings to tell us what you think.

Through this public consultation your views will be fed into the development of the final proposal. All of the feedback received from all of the responses to this consultation will be collated into a report for the CCG's Governing Body to consider before it makes any decisions on the future of these services.

The closing date for receipt of responses to this consultation is 5pm on (insert date here)