

Home News

News for Care Homes from Walsall CCG Supplemental

Welcome to 'Home News' a news letter for Care Homes from Walsall CCG. This quarterly news letter provides information and advice for Care Homes on a variety of topics. If you have any information you wish to share let us know and we will include it in the next edition.

New NHS England Guidance On; Conditions for which over the counter items should not routinely be prescribed in primary care

You may be aware that between July and October 2017 NHS England consulted on items which should not be routinely prescribed in primary care.

In the year prior to June 2017, the NHS spent approximately £569 million on prescriptions for medicines which can be purchased over the counter from a pharmacy and other outlets such as supermarkets.

Following on from the consultation guidance was developed for clinical commissioning groups (CCGs) on a list of 35 conditions which would fall into one of the following categories:

- A condition that is self-limiting and does not require medical advice or treatment as it will clear up on its own; and/or
- A condition that is a minor illness and is suitable for self-care and treatment with items that can easily be purchased over the counter from a pharmacy.

And in the case of vitamins, minerals and probiotics, these were classified as:

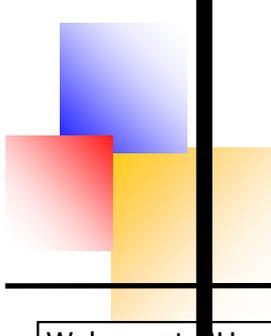
- Items of limited clinical effectiveness, where there is a lack of robust evidence for clinical effectiveness; however there may be certain indications where they may continue to be prescribed and these are outlined within the exceptions under the relevant item.

NHS England has advised CCG's that over the counter medications for these conditions should not routinely be prescribed and Walsall CCG has recommended that all prescribers adhere to these restrictions.

Below is a table of the conditions affected by the guidance,

It is important to remember that the guidance focuses on restricting prescribing for the minor, short-term conditions outlined, not on the restriction of prescribing for individual items or for long term conditions e.g.

- Anyone 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).



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Minor illnesses suitable for self-care

Mild Irritant Dermatitis	Infrequent Migraine	Insect bites and stings	Warts and Verrucae
Dandruff	Mild Dry Skin	Nappy Rash	Threadworms
Diarrhoea (Adults)	Mild Acne	Oral Thrush	Head lice
Dry Eyes/Sore (tired) Eyes	Indigestion and Heartburn	Prevention of dental caries	Ringworm/Athletes foot
Earwax	Sunburn	Mouth ulcers	Travel Sickness
Excessive sweating (Hyperhidrosis)	Sunburn Protection	Teething/Mild toothache	Minor burns and scalds
Infrequent constipation	Mild to Moderate Hay fever/Seasonal Rhinitis	Minor conditions associated with pain, discomfort and/fever. (<i>e.g. aches and sprains, headache, period pain, back pain</i>)	

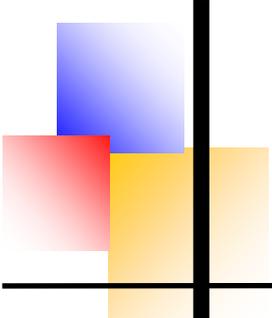
Self-limiting illnesses

Acute Sore Throat	Cradle Cap	Haemorrhoids	Conjunctivitis
Infrequent Cold Sores of the lip	Coughs, colds & nasal congestion	Infant Colic	Mild Cystitis

Items of limited clinical effectiveness

Probiotics

Vitamins and minerals.



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What does this mean for Care Homes?

The CQC states in their guidance that;

- People who receive social care should be supported to access OTC products to enable them to self – care, with the appropriate safeguards put in place.
- Access to OTC medicines to self–care is an issue of equality and providers should have policies in place to support people who wish to access OTC products in a timely manner.

This is different to the use of homely remedies.

A homely remedy is one which is used to treat a minor ailment without needing to ask the GP for a prescription. The home keeps a stock of items such as paracetamol for pain, a laxative, a cough syrup etc. and with the GPs agreement is able to administer them on a when required basis. Use of a homely remedy should not exceed two days without seeking medical advice. Administration of a homely remedy should always be recorded on the MAR chart. An example of a homely remedy policy is available from Wendy Bagnall (see below).

Self Care

A GP may recommend the person, relatives or care staff to purchase a specific product to treat a minor ailment for a particular person, such as olive oil for treatment of ear wax. Verbal or written instructions must be recorded in the individual care plan.

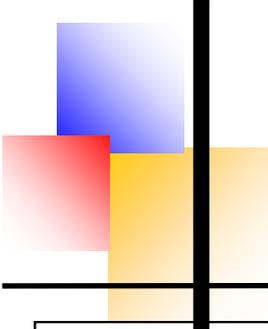
General information:

- All purchased medicines must be checked for potential interactions with prescribed medicines with an appropriate healthcare professional before use.
- People (or their relatives) may provide their own OTC products following consultation with the GP or Pharmacist. In a care home setting these are not for general use and must remain specific to that person. In all care settings receipt should be documented. If the care staff are responsible for administration, this should be recorded on a MAR chart and good practice should be followed.
- All OTC products purchased on behalf of the service user or brought into a care setting should be checked, to make sure they are suitable for use, in date and stored according to the manufacturer guidance

Providers will need to consider:

- Having a policy to support people who wish or need, to self–care.
- On admission to care home discussion of health needs and medicines with the person and their family to include OTC products.
- Clear care plan to ensure that medicines given are safe and still appropriate.

The full CQC guidance can be accessed [here](#)



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Exceptions

There are certain scenarios where people should continue to have their treatments prescribed and these are outlined below:

- 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.
- 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.
- Patients with a minor condition suitable for self-care that has not responded sufficiently to treatment with an OTC product.
- Patients where the clinician considers that the presenting symptom is due to a condition that would not be considered a minor condition.
- Circumstances where the prescriber believes that in their clinical judgement, exceptional circumstances exist that warrant deviation from the recommendation to self-care.
- 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.

For other scenarios homely remedies can be used to treat intermittent or occasional minor ailments.