# **DRAFT**

Guidance to reduce prescriptions for minor conditions, other conditions suitable for self-care, gluten free products and branded prescribing.

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#### 1 Introduction

The three Clinical Commissioning Groups (NHS Leeds North CCG,NHS Leeds West CCG and NHS Leeds South and East CCG) that cover the Leeds health economy are legally obliged to have in place and publish arrangements for making decisions and adopting guidance on whether particular health care interventions and treatments are made available. In making these arrangements the CCGs have had due regard to relevant law and guidance, including their duties under the National Health Service Act 2006, the Health and Social Care Act 2012, the National Health Service Commissioning board and Clinical Commissioning Groups (Responsibilities and Standing Rules) Regulation 2012, and relevant guidance issued by NHS England. Some medicines that are used to treat minor conditions do not require the patient to be seen by a GP. These medicines can be purchased from pharmacies and supermarkets. Pharmacy staff are experts on providing advice around minor conditions; they are also easy for a patient to access without an appointment. This will free up GP time to see patients with more complex conditions.

Within this guidance it documents eligibility criteria, a list of suitable minor conditions and medicines and prescribing principles are clearly outlined. This document is to act as guidance for patients, clinicians and other prescribers in primary and secondary care.

The success of this guidance will depend upon the commitment by GPs and other prescribers to implement the restrictions and through raised public awareness and adoption of self-care approaches for suitable minor conditions.

### 2 The Position Statement for the CCGs covering the Leeds health economy

The three Clinical Commissioning Groups (CCGs) within the Leeds health economy expect that patients with minor conditions suitable for self-care will buy over-the-counter medicines when it is appropriate to do so. All prescribers within the CCGs, including non-medical prescribers, GPs, out-of-hours and A&E departments, should not prescribe readily available over-the-counter medicines.

Clinicians should only prescribe medicines that are known to be clinically effective and provide a health benefit to the patient

### 3 Minor conditions and treatments available

The following principles have been used when compiling the list of minor conditions for which prescriptions will not generally be issued, and medicines that the CCGs expect patients to buy and self-treat their minor conditions:

- the conditions included can be diagnosed without medical intervention.
- the conditions can be treated with over-the-counter medicines or will get better without treatment
- all relevant contraindication and cautions will apply at the point of sale and pharmacists will direct patients to appropriate services if they need medical intervention.
- this guidance applies only to situations and minor conditions where <u>NHS Choices</u> recommends self-care.



The table within **Appendix A** of this guidance shows:

- conditions that are considered suitable for self-care meaning that the condition(s) are self-limiting, and generally do not prevent a person from carrying out their normal functions for more than a short period of time, such as coughs, colds, headaches and indigestion.
- medicines that are available to buy in the community to relieve the symptoms of and/or aid in the recovery from minor conditions.

# 4 Treatments where there is limited or no clinical evidence for their use or cost effectiveness

Many of the products listed in **Appendix B** 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 are not covered by the Advisory Committee on Borderline Substances (ACBS) regulations and/or do not appear in the current British National Formulary (BNF) or the Drug Tariff (DT). 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 and safe. It is inappropriate to direct NHS resources towards products that do not have proven efficacy or safety in preference to licensed medicines.

### 5 Preparations where there may not be a clinical need to treat

Within **Appendix C** there are treatments that are clinically and cost effective when used in some patients, but not when used more widely. Also, some categories will contain treatments that are clinically effective but are not considered to be a good use of NHS resources. For some conditions this will be related to the severity of the condition (e.g. mild acne is included but severe acne requires prescription medicines)

If prescribing is deemed to be clinically necessary, only those products listed in the agreed local formularies should be prescribed. Prescribers will be required to consider whether the benefits of prescribing a treatment for an individual patient justify the expense to the NHS. 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 the treatment should they wish to do so, if it is not prescribed.

# 6 Prescribing of Gluten Free Foods

The costs for these products are now considerably less than when the need for gluten free foods for patients with any diagnosed gluten sensitive enteropathy was identified. Gluten Free products can be very expensive when obtained via an NHS prescription and the products are often considerably more costly than the price of similar gluten free products purchased in the supermarket and other food outlets. There are a number of naturally gluten free foods available that are at the same cost to the whole population, such as potatoes, rice, all fruit and vegetables, meat, fish and poultry, which enable the population to have a healthy diet. In order to prioritise scarce resources and ensure equitable treatments are available to all, the CCGs in Leeds propose that the prescribing of gluten free (GF) foods is stopped.



## 7 Branded prescribing

Prescribers (people who prescribe medicines, such as GPs) are encouraged to prescribe medicines by their generic name. This is because generic medicines are usually as effective as the branded versions, but can cost up to 80% less.

This frees up NHS resources to pay for other treatments. It also gives the pharmacist the widest choice of products to dispense. This can be important, particularly if there is a shortage of a particular product.

There are some drugs where it is not safe to prescribe drugs by the generic name, due to different forms of the drug not being interchangeable, the drugs can be delivered by different devices causing confusion, or that there are a number of medicines that contain more than one drug at different strengths which could lead to confusion etc.

In order to priorities scarce resources and where it is safe to do so, prescribers within Leeds will be asked to prescribe the generic or specific branded generic version only of any medication, unless there is a clinical exception.

http://www.nhs.uk/Conditions/Medicinesinfo/Pages/Brandnamesandgenerics.aspx

### 8 Eligibility and exceptionality

This guidance applies to:

- all patients registered with or attending a healthcare appointment at a general practice within Leeds.
- all patients whether or not they pay for prescriptions.
- all prescribers in the CCGs within the Leeds health economy, including non-medical prescribers, GPs, out-of-hours and A&E departments.

One of the core values of the NHS is 'We have a responsibility to maximise the benefits we obtain from NHS resources, ensuring they are distributed fairly to those most in need. Nobody should be discriminated or disadvantaged, and everyone should be treated with equal respect and importance.'

Exceptionality should be based on clinical factors and not be influenced by socio-economic aspects such as the ability to purchase as this automatically introduces inequality, implying that some patients have a higher social worth than others with the same condition. Exceptionality is a question of fairness.

# 9 Evidence

Empowering people with the confidence and information to look after themselves - 'self-care' gives people greater control of their health and encourages behaviour that helps prevent ill health in the long-term. In many cases, people can take care of their minor conditions if they are provided with the right information, enabling health care professionals to focus on patients with more serious health concerns<sup>1</sup>.

The majority of people feel comfortable managing everyday minor conditions like coughs and colds themselves, particularly when they feel confident in recognising the symptoms and have successfully treated themselves with over-the-counter (OTC) medicine before.



Despite people's willingness to self-treat, there are still 57 million GP consultations nationally a year for minor conditions at a total cost to the NHS of £2 billion. These appointments take up an average of one hour a day for every GP.

Research shows that people often abandon self-care earlier than they need to, typically seeking the advice of a GP within four to seven days. The main reasons for this are:

- a lack of confidence in understanding the normal progress of symptoms (e.g. a cold can last up to 14 days)
- the perceived severity and duration of symptoms
- seeking reassurance that nothing more serious is wrong
- wanting a prescription for a medicine, even though the same medicine may be available to buy
- seeking treatment for a condition that will get better on its own.

Research suggests that health-seeking behaviour is repetitive with 62 per cent of patients choosing to visit a GP if a prescription was issued on the last occasion. Conversely, past experience with self-care builds confidence in patients with 84 per cent choosing to self-care for new episodes.

Providing an environment that supports self-care has been shown to:

- improve the health and wellbeing of local communities.
- raise awareness of and increase access to suitable providers of healthcare advice and support.
- reduce avoidable appointments in general practice, thus helping safeguard appointment time for patients with more serious health problems.
- reduce avoidable visits to the local emergency departments and appointments with out-of-hours GP services.
- reduce NHS expenditure on medicines that can be bought in the community without prescription, thus helping safeguard local NHS resources for medicines that are only available on prescription, as well as other services.
  - 1. Forum, S.C. (2016) What do we mean by self care and why is it good for people? Available at: http://www.selfcareforum.org/about-us/what-do-we-mean-by-self-care-and-why-is-good-for-people/ (Accessed: 28 October 2016).

#### 10 Expected benefits of implementing this guidance

It is estimated that by implementing this guidance:

- every GP within the Leeds health economy will have up to one hour a day freed up to see patients with more serious conditions
- potentially up to £5 million a year in local NHS expenditure on prescription costs can be saved.
- there will be a reduction in medicines waste and the associated costs.
- patients and carers will be better informed of how to manage minor conditions.



### 11 Approach to promoting self-care for minor conditions

The CCGs recommend that information and resources such as those provided by community pharmacies, <u>NHS Choices</u> and <u>NHS 111</u> are promoted to and used by local people and their carers to decide when minor conditions are suitable for self-care.

The CCGs will engage in a programme of communication and engagement, alongside key health and care partners, to encourage patients to manage these conditions without the need for a GP appointment, NHS prescription or visit to an emergency department. The CCGs will continue to support the delivery and promotion of existing local awareness campaigns linked to self-care and appropriate use of resources, such as Choose Well.

The CCGs also hold the responsibility to provide support to healthcare professionals in promoting self-care and raising awareness around important health matters. This document provides guidance to health professionals to support the CCGs approach to reducing consultations and prescriptions for minor conditions suitable for self-care.

#### 12 Guidance Review statement

The three CCGs within the Leeds health economy will continue to review the impact of the implementation of this guidance on patients and health professionals.

### 13 Glossary of Terms

**Community pharmacy:** Community pharmacies dispense and check prescriptions and provide advice on prescribed medicines, treatment of minor conditions and healthy living.

**Contraindication:** A contraindication is a condition that makes a person unsuitable to receive a particular medicine.

**Caution:** A caution is a condition that needs consideration before deciding whether a medicine is suitable for a person, sometimes a caution will mean that a person should have a lower or higher dose of a medicine than other people.

**General practice:** General practitioners (GPs) are doctors who deal with a whole range of health problems. They also provide health education, offer advice on smoking and diet, run clinics, give vaccinations and carry out simple surgical operations. GPs usually work in practices as part of a team, which includes nurses, healthcare assistants, practice managers, receptionists and other staff. Practices also work closely with other healthcare professionals, such as health visitors, midwives, mental health services, mindwell and social care services.

**General Sales List (GSL)** – a medicines on the General Sales List that is deemed suitable for purchase without any medical supervision.

NHS Choices: NHS Choices is the UK's biggest health website. See www.nhs.uk

**NHS 111**: NHS 111 is the NHS non-emergency number. Call 111 when you need medical help fast but it's not a 999 emergency.

**Non-medical prescribers**: A prescriber is a healthcare professional who can write a prescription. A non-medical prescriber is a healthcare professional who can prescribe, who is not a registered doctor or dentist. Only some healthcare professionals can become non-medical prescribers, and they usually have to undertake additional training to become a prescriber. The



following groups of healthcare professionals can become prescribers; nurses, pharmacists, optometrists, podiatrists, physiotherapists and diagnostic and therapeutic radiographers.

**NSAIDs:** non-steroidal anti-inflammatory drugs, an example is ibuprofen.

**Over-the-counter (OTC)**: Over-the-counter medicines, a general term encompassing both P and GSL medicines.

**Primary care**; primary care services are health services such as GPs, pharmacists and dentists that people can access directly without a referral from another doctor or service.

**P medicines:** Pharmacy only medicines that must be sold from registered pharmacy premises under the supervision of a qualified pharmacist.

Brand drug name: this is given to a medicine by the pharmaceutical company it is developed by

The scientific or generic drug name: named for the active ingredient of the medicine, which is decided by an expert committee.

**Branded generic drug name**: is a drug that is bioequivalent to the original product, but is now marketed under another company's brand name.



# 14 Appendices

**Appendix A:** Minor conditions and treatments available

**Appendix B:** Treatments where there is limited or no clinical evidence for their use or cost

effectiveness

**Appendix C:** Preparations where there may not be a clinical need to treat

Appendix D: Equality Impact Assessment for the Guidance

Appendix E: Guidance Consultation Process



# Appendix A: Minor ailments and treatments available

Minor ailment condition	Treatment	Other brands to be aware of (N.B. this is not an exhaustive list)	Exceptions
	Paracetamol 500mg tablets Paracetamol 500mg caplets Paracetamol 500mg capsules Paracetamol 500mg soluble tablets	Anadin Mandol Diprol Panadol Hedex Panadol Advance	
Acute pain, headache, temperature	Ibuprofen 200mg tablets Ibuprofen 200mg caplets Ibuprofen 200mg liquid capsules Ibuprofen 400mg tablets Ibuprofen 100mg/5ml Susp	Anadin Ibuprofen Mandafen Anadin Joint Pain Manorfen Anadin liquifast Nurofen Calprofen Orbifen Cuprofen Phor Pain Hedex	Long term conditions requiring regular pain relief.
	Co-codamol 8/500 mg tablets Co-codamol 8/500mg capsules Co-codamol 8/500mg dispersible tablets Co-codamol 8/500mg effervescent tablets	Migraleve Yellow tabs Paracodol caps Paracodol soluble tabs	
	Paracetamol 120mg/5ml oral susp (sugar free) Paracetamol 250mg/5ml oral susp (sugar free)	Calpol Six Plus susp 250mg/5ml Calpol Infant susp 120mg/5ml Mandanol Medinol Sootheze Six Plus	
	Miconazole cream 2%	Daktarin	
Athletes foot	Terbinafine 1% cream	Lamisil AT (cream, gel, spray), Lamisil Once Cutaneous Solution 1% Scholl advanced (cream, powder & spray)	-



Minor ailment condition	Treatment	Other brands to be aware of (N.B. this is not an exhaustive list)	Exceptions
	Hydrocortisone cream 1%	HC45 cream Lanacort cream	
Bites/stings	Chlorphenamine 4mg tabs	Allercalm Piriton tabs 4mg Hayleve Pollenase tabs Piriton Allergy tabs 4mg	
	Chlorphenamine oral solution 2mg/5ml(sugar free) Chlorphenamine solution 2mg/5ml	Allerief oral soln Piriton 2mg/5ml syrup	
	Loratidine 10mg tabs	Clarityn Allergy tabs Clarityn Rapide tabs	
Cold Sores	Aciclovir cream 2%	Cymex Ultra Virasorb Lypsyl Zovirax Vectavir	
Conjunctivitis (uncomplicated)	Chloramphenicol 0.5% eye drops Chloramphenicol 1% eye ointment	Brochlor Golden Eye Optrex Infected Eye Ointment Lumicare Eye Ointment Tubilux Eye Drops	
	Dioralyte sachets Electrolade sachets Oral Rehydration salts	Dioralyte Relief	
Diarrhoea	Lopermide caps 2mg	Imodium Diaquitte Norimode Diocalm Ultra Entrocalm	
Ear Wax	Wax softening drops e.g Olive oil	Almond Oil Ear Calm Otex Exterol Cerumol Waxsol Sodium Bicarbonate Molcer	



Minor ailment condition	Treatment	Other brands to be aware of (N.B. this is not an exhaustive list)	Exceptions
	Acrivastine 8mg caps	Benadryl Allergy Relief caps 8mg Benadryl Plus Caps	
	Beclomethasone nasal spray	Beconase hayfever spray Nasobec aqueous spray Pollenase nasal spray Vivabec Spray	
	Cetirizine 10mg tabs	Benadryl tabs Piriteze Histease Zirtek tabs Pollenshield Hayfever	
	Cetirizine1mg/ml oral solution	Benadryl Allergy Relief soln 1mg/1ml S/F Zirtek Allergy soln 1mg/ml	
Hay fever	Chlorphenamine 4mg tabs	Allercalm Piriton tabs 4mg Hayleve Pollenase tabs Piriton Allergy tabs 4mg	
	Chlorphenamine oral solution 2mg/5ml(sugar free) Chlorphenamine solution 2mg/5ml	Allerief Oral soln Piriton 2mg/5ml syrup	
	Loratadine 10mg tabs	Clarityn Rapide tabs Clarityn Allergy tabs	
	Loratadine 5mg/5ml syrup	Clarityn Allergy Syrup	
	Sodium Cromoglycate 2% Eye Drops	Allercrom Optrex Allergy Catacrom Allergy Relief Pollenase Cromolux Hayfever Opticrom Hayfever	
Head lice	Dimethicone Lotion 4%	Hedrin Linicin Lyclear Mousse and Repellant Nitrid Spray Nyda Spray	
Indigestion, heartburn, Upset Stomach	Gaviscon Advance tabs Gaviscon Advance liquid	Gaviscon 250 tabs Gaviscon Cool (tabs & liquid) Gaviscon Double Action (tabs & liquid)	



Minor ailment condition	Treatment	Other brands to be aware of (N.B. this is not an exhaustive list)	Exceptions
Infant colic	Infacol Suspension 40mg/ml S/F	Dentinox Infant colic drops	
Nappy rash	Metanium Sudocrem	Bepanthen Drapolene Morhulin Zinc and Castor Oil	
Nasal congestion	Sodium Chloride 0.9% Nasal Drops SodiumChloride 0.9% Nasal Spray	Snufflebabe nasal drops Calpol Soothe & Care (nasal drops & spray) Mandanol nasal drops	
	Permethrin 5% dermal cream Crotamiton 10% cream	Lyclear Lythrin Eurax	
Scabies	Chlorphenamine 4mg tabs Chlorphenamine oral solution 2mg/5ml(sugar free)	Allercalm Piriton tabs 4mg Hayleve Pollenase tabs Piriton Allergy tabs 4mg Allerief Oral soln	
Teething	Bonjela Teething Gel	Anbesol teething gel Calgel teething gel Dentinox (teething gel & toothpaste)	
J	Paracetamol 120mg/5ml oral susp(sugar free)	Calpol Infant susp 120mg/5ml Mandanol Infant Medinol	
Threadworms	Mebendazole chewable 100mg tabs Mebendazole liquid 100mg/5ml	Ovex	
Vaginal thrush	Clotrimazole cream 1% Clotrimazole pessary 500mg Fluconazole 150mg caps	Canestan  Canestan oral  Diflucan	
Warts &	Bazuka Extra Strength Gel Salactol Wart Paint	Veracur Verrugon	
Verrucae	Salacioi Wali Pallii	Cuplex Duofilm Occlusal Salatac	



Appendix B: Treatments where there is limited or no clinical evidence for their use or cost effectiveness

	Examples (N.B. this is not an exhaustive list, many of	
	these products are not recommended for prescribing	Exceptions
Category	within the Leeds Health Economy)   Veil Cover Crm	Onlywhon
	Dermacolor_Camouflage Creme	Only when considered in line
	Veil_Finishing Pdr	with the Leeds
	Dermacolor Fixing Pdr	CCGs "General
	Covermark Classic Foundation	Cosmetic
	Keromask_Masking Crm	Exceptions and
	Covermark_Finishing Pdr	Exclusions Policy
Camouflage	Keromask_Finishing Pdr	including Benign
products used for	Dermablend Ultra-Corrective Stick 15sand	Skin Lesions, Skin
cosmetic actions	Dermablend Cover Crm	Tags, Scars and
	Dermablend_Cover Crm B12 Medium Beige	Keloids" policy and
	Dermablend Foundation Coverstick 16	an individual
	Dermablend_Setting Pdr	funding request
	Dermablend Foundation Coverstick 11	has been agreed.
	Dermablend Foundation Coverstick 15	
	Dermablend Ultra-Corrective Stick 12opal	
	Dermablend Ultra-CorrectiveStick17coffee	
	Benylin cough products	
	Codeine linctus	
	Covonia cough products	
	Meltus	
	Pholcodine linctus	
	Simple Linctus	
Cough	Sudafed Cough products	
	Blephaclean Eye Lid Wipe	
	Lid-Care Eyelid Wipe	
	Optrex Supranettes	
	RefreshOphth Soln 0.4ml Ud	
Eye Care	Ster Eye Cleansing Wipes	
		Omega-3-Acid
	Drodusta containing alugacamina	Ethyl Esters
	Products containing glucosamine.	(Omacor®) for
	Products containing chondroitin.  Products containing fish oils.	hypertriglyceridaem
	Products containing fish oils.  Products containing co-enzyme Q10.	ia also, use as an
	Products containing Co-enzyme Q10.  Products containing Omega 7.	adjunct to
Health Supplements	Products containing Onlega 7.  Products containing Gamolenic Acid	antipsychotic
	Icaps, Ocuvite, PreserVision	therapy (only be
	Nature's own, Natures aid,	initiated by a
	Biobran (MGN-3),	Specialist form
	Dissidir (MOIV 0),	Leeds and York
		Partnership Trust)
	St John's Wort, Heathaid, Kalms, Nytol, Bach flower	
Herbal Remedies	remedies	
Homeopathic		
remedies	Weleda products, Nelson products	
	and the second s	ı



Category	Examples (N.B. this is not an exproducts are not recommended Leeds Health Economy)		Exceptions
	Menthol & Eucalyptus Inhalation		
Nasal Congestion	Otradrops Xylometazoline nasal (0.05% drops & 0.1%spray)		
	Otrivine (nasal drops & spray) Sudafed tabs & elixir Galpseud tabs & linctus		
Probiotics	VSL#3		Adults (pouchitis) and Paediatrics (Hirschsprungs disease or ulcerative colitis post ileal pouch anal anastomosis)
Rubifacients	Algesal Balmosa Deep Freeze Mentholatum Radian B		,
Skin products	Bio-Oil Skin Care Oil Coconut oil Products containing Dexpanthenol (Bepanthen baby protective oint, Nivea SOS products) E45 foot & heel cream, Glucosamine gel SensetSkin Cleansing Foam Skin Salvation oint Vitamin E cream		
Sore Throat	AAA Sore Throat Spray Difflam (Throat Spray & rinse) Covonia Throat Spray Dequadin Lozenges Ultra Chloraseptic Spray Dequaspray	Tyrozets Lozenges Merocaine Lozenges Strepsils Lozenges Merocet lozenges Bradasol Lozenges	

Grey shaded products are currently included in the Leeds Black light list.



Category	Examples (N.B. this is not an exhaustive list, many of these products are not recommended for prescribing within the Leeds Health Economy)	Exceptions
Vitamins, Multivitamin & all mineral preparations (including Cod liver oil, Vitamin B products, Vitamin E products, , Vitamin A& D products)	Pharmacy own brands of vitamins/multivitamins (i.e.Boots, Lloyds, Superdrug, Valupak) Haliborange, Santogen Fruitivits Sachets Spatone Seven Seas Lamb Vita E Osteocaps Vega Osteocare Premier Redoxon Centrum Eye-Q Natravits	*High dose vitamin D for proven Vitamin D deficiency still to be issued on prescription, maintenance dose to be supplied by Healthy Living Pharmacy Scheme if patient is eligible or bought OTC. *Vitamin B Co Strong is restricted for patients with refeeding and nutritional issues (to be initiated by Dietetics).



**Appendix C:** Preparations where there may not be a clinical need to treat

Category	Examples (N.B. this is not an exhaustive list)	Exceptions
Acne (mild)	All Benzoyl Peroxide products (including Brevoxyl, Quinoderm products and Acnecide products)	Moderate to severe cases where OTC products have failed (follow
	Nicotinamide 4% Gel (including Freederm gel, Nicam gel)	local guidelines).
	Alphosyl 2 in 1 shampoo Capasal shampoo Ceanel concentrate shampoo Psoriderm scalp lotion T\Gel shampoo	Unless recommended by specialist
Dandruff (including cradle cap)	Benzalkonium chloride 0.5% shampoo (including Dermax) E45 Dry Scalp shampoo Ketoconazole shampoo 2% (including dandrazol, ketopine, nizoral) Selsun shampoo	
	Dentinox Cradle Cap Treatment Shampoo	(Follow BNF advice: 'cradle cap in infants may be treated with coconut oil or olive oil applications followed by shampooing'.)
	Duraphat Fluoride Toothpaste (To be prescribed by Dentist)	
Dental & Sore mouth Products (If recommended by Dentist to be purchased or prescribed on dental prescription - both NHS & private)	Sodium fluoride mouthwash, oral drops, tablets & toothpaste (including the brands: Colgate, En-de- Kay, Fluor-a day, fluorigard)  Oraldene Mouthwash	
	Hydrogen Peroxide Mouthwash 6% Peroxyl Mouthwash 1.5%,	



Category	Examples (N.B. this is not an exhaustive list)	Exceptions
Dental & Sara mouth	Benzydamine Hydrochloride mouthwash & spray (including the brands: Difflam, Oroeze)	
Dental & Sore mouth Products (If recommended by Dentist to be purchased or prescribed on dental prescription - both NHS & private)	Chlorhexidine gluconate mouthwash, oral spray & dental gel (including the brand Corsodyl)	
	Anbesol gel & liquid Bonjela products Iglu gel Rinstead pastilles	
	Aveeno products, Dermacool products, Dermalo Bath Emollient, Dermamist Spray, Diprobath Emollient, Eucerin products, Neutrogena products	* Emollients only to be prescribed for patients with a confirmed diagnosis of significant skin disease (including eczema and psoriasis).
Emollients & bath/ shower products	Dawe of 200 Chauser Freelijant	*Patients discharged from a specialist centre on a particular product should be maintained on the same product if effective
& bath/ shower products	Dermol 200 Shower Emollient, Dermol Wash Doublebase products E45 products  Hydromol products Oilatum products Balneum Products	(Preferred choice of emollients and bath products: ZeroAQS, Zerocream, Zerobase, Zeroguent, Zerodouble Gel, Zeroderm, Zerolatum, Zeroneum, E45 lotion, Emulsifying Ointment and Liquid & White Soft Paraffin Ointment 50:50)
Sunscreens	Ambre Solaire products Anthelios products Delph products Riemann P20 products Sunsense products Uvistat products	Only to be prescribed within ACBS criteria: protection against ultraviolet radiation in abnormal cutaneous photosensitivity, resulting from genetic disorders or photodermatoses, including vitiligo and those resulting from radiotherapy; chronic or recurrent herpes simplex labialis.
		Formulary products: Sunsense Ultra 50+ Uvistat 50



# Appendix D: Equality Impact Assessment

# **Equality Impact Assessment**

Title of the guidance	Guidance to reduce minor conditions ar suitable for self-car	nd other conditions
Names and roles of people completing the assessment		
Date assessment started/completed		

1. Outline	
Give a brief summary of the guidance	
What outcomes do you want to achieve	

2. Evidence, data or research		
Give details of		
evidence, data or research used to inform the analysis of impact		

3. Consultation, engagement		
Give details of all		
consultation and		
engagement activities		
used to inform the		
analysis of impact		

4. Analysis	of impact		
This is the core of the assessment, using the information above detail the actual or likely			
impact on protected groups, with consideration of the general duty to;			
eliminate unlawful discrimination; advance equality of opportunity; foster good relations			
	Are there any likely	Are these	What action will be take
	impacts?	negative	to address any negativ

	Are there any likely impacts? Are any groups going to be affected differently? Please describe.	Are these negative or positive?	What action will be taken to address any negative impacts or enhance positive ones?
Age			
Carers			
Disability			
Sex			
Race			
Religion or			



belief					
Sexual					
orientation					
Gender					
reassignment					
Pregnancy and					
maternity					
Marriage and					
civil partnership					
Other relevant					
group					
If any negative/positive impacts were identified are they valid, legal and/or justifiable? Please detail.					
5. Monitoring	Poviou and D	ublication			
5. Monitoring, Review and Publication How will you review/monitor					
the impact and eff					
your actions	ective 11622 Of				
Lead Officer			Re	eview date:	

6.

Sign off

Lead Officer Director

Date approved:



# **Appendix E: Guidance Consultation Process**

Title of document	Guidance to reduce prescriptions for minor conditions and other conditions suitable for self-care.
Author	Heather Edmonds, Head of Medicines Optimisation Leah Sawicki, Medicines optimisation Pharmacy Technicians. NHS Leeds North Clinical Commissioning Group
New / Revised document	
Lists of persons involved in developing the guidance List of persons involved in the consultation process:	Sally Bower, Helen Liddell, Members of the Commissioning of Medicines group, Members of the medicines STP group