Leeds Local Medical Committee Limited

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Cllr Peter Gruen Chair of Scrutiny Board for Health Leeds City Council

By email only

Dear Councillor Gruen

Re: Proposed prescribing changes

I refer to recent correspondence with your office and as agreed I summarise below the views of Leeds LMC which were discussed at our recent meeting with regard to the prescribing changes currently proposed by the three Leeds CCGs.

Whilst the LMC is naturally generally supportive of the principle of saving NHS expenditure wherever appropriate, our committee members raised the following concerns:

- 1. NHS England has also announced a review of the prescribing of certain medications and products but their proposed list appears to be different to that of the CCGs. This highlights the potential problem of creating a postcode prescribing arrangement. We believe all patients should have equal access to NHS prescriptions no matter where they live. Leeds LMC believes therefore that any prescribing changes should be on a national basis.
- 2. We note that the Leeds CCGs are undertaking a public consultation regarding their proposals and this is to be welcomed. However should this plan be implemented, if a patient were to insist on having a prescription for certain recommended medications, GPs could find themselves in the difficult position of still having to provide such a prescription because of their contractual requirements. The LMC believes therefore that legislative changes will be necessary to support these prescribing proposals, if they are implemented.
- 3. Most importantly, the LMC committee members expressed concern about potential health inequality issues. Whilst it is no doubt true that many people would be able to purchase over-the-counter medicines for minor conditions, we also recognise the bizarre situation whereby the same product costs more for the NHS to prescribe than if it is bought over the counter. We are aware however that some of our patients really could not afford to routinely buy essential items e.g. gluten-free food. We believe therefore that some form of safety net such as a voucher scheme or an extension of the Pharmacy First should be explored for those patients currently eligible for free prescriptions.

4. Finally, the LMC noted that the current proposals do not address the issue of the prescribing of branded generic medication which the CCGs currently encourage purely as a cost saving exercise. This causes concern for many patients and is a problem for GPs who, whilst familiar with the generic names of drugs, may not be familiar with every brand name. We believe this poses a potential safety risk for patients and therefore unnecessary switches from generic to branded generic medication should be avoided.

I hope you will find the above feedback helpful in your discussions at the Scrutiny Board. Please do not hesitate to contact me, if you require any further information.

Kind regards

Yours sincerely

DR RICHARD VAUTREY
Assistant Medical Secretary