

6. What sex are you?

☐ Male ☐ Female ☐ Prefer not to say

7. Are you transgender?

Is your gender identity the same gender you were assigned at birth?

☐ Yes ☐ No

☐ Prefer not to say

8. Sexual orientation

Please select the option that best represents your sexual orientation

☐ Heterosexual/Straight

☐ Gay man

☐ Lesbian/gay woman

☐ Bisexual

☐ Prefer not to say

9. Pregnancy and Maternity

(The Equality Act 2010 protects women who are pregnant or have given birth within a 26 week period.)

Are you pregnant at this time?

☐ Yes ☐ No

☐ Prefer not to say

Have you recently given birth (within 26 week period)

☐ Yes ☐ No

☐ Prefer not to say

10. Are you a carer?

☐ Yes ☐ No

☐ Prefer not to say



You can return this form in the post, addressed:

**FREEPOST  
RTEG-JRZR-CLZG,  
NHS Leeds West CCG,  
Wira House,  
Wira Business Park,  
West Park Ring Road,  
Leeds,  
LS16 6EB**

(no stamp needed)

If you have any queries regarding this engagement please call:

Telephone: **0113 843 5475**

Or email: **adam.stewart1@nhs.net**

# Changing the way we prescribe in Leeds



The Clinical Commissioning Groups in Leeds working together

We want people in Leeds to have long, healthy lives; where they remain active and independent for as long as possible supported by high quality services.

A key part of this is ensuring that people feel actively involved and able to have their say in the decisions we make around health and care.

At the current time we want to know what you think about prescribing the following:



## Gluten free foods



## Branded medicines



## Over-the-counter medicines

(when you can buy a product and do not need a prescription)

# Introduction

## Who are we?

Clinical Commissioning Groups (CCGs) are responsible for planning and buying (commissioning) most of the healthcare for their populations. We look after the budget for Leeds.

Our organisations are composed of your local GPs and other health care professionals. We buy services such as: emergency care, hospital care, community, GP and mental health services.

## What is this document about?

The three Leeds CCGs together spend over £1 billion a year. This helps support the people of Leeds and district to stay healthy and access the right services. We have a duty to make sure we spend the money wisely and in the most cost effective way. Your thoughts on how we spend it are important.

If we review how we spend money we have the chance to look at how we can use it better, to pay for newer treatments and support other services.

As newer medicines to treat more complicated medical conditions come onto the market, the overall costs of medicines go up. The higher prices of newer medicines are to pay for years of research that have gone into developing those medicines. While this is happening, a lot of products that in previous years were only available on prescription are becoming much more widely available to buy in high street shops, online, and in supermarkets.

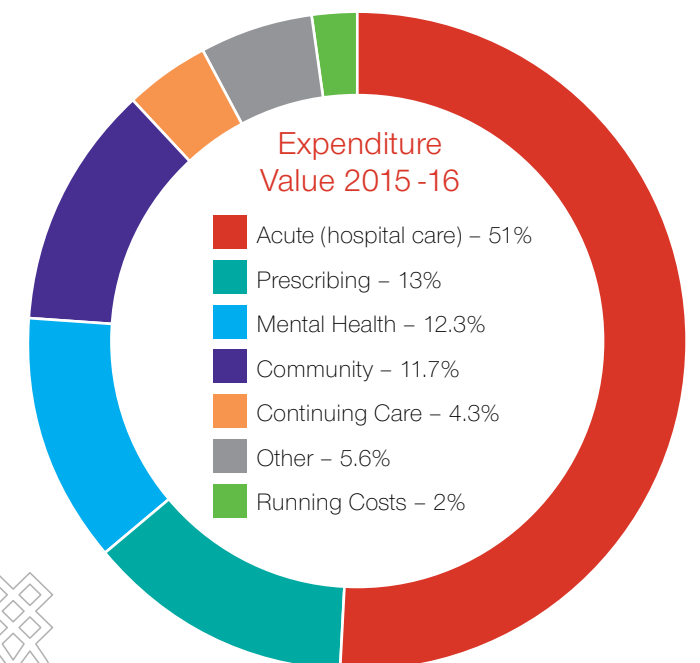
There are several areas of prescribing where products are now widely available and we would like to know what you think:

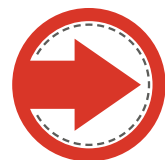
- **Gluten free products**
- **Multivitamins and vitamin D**
- **Emollients for minor dry skin conditions**
- **Cosmetic products**
- **Sunscreen products**
- **Branded medicines, where equivalent generic products are available.**

This document gives you:

- **Information**
- **What the proposed changes will be**
- **Why we are proposing the changes**
- **How you can have your say.**

## How the Leeds CCGs spend NHS money





## Why do things need to change?

Commissioning healthcare is challenging as we need to focus on ensuring value for money as well as quality.

The NHS only has a finite budget. However, there is increasing demand for services, e.g. people living longer with more long-term health conditions.

As a result we sometimes need to evaluate what we provide, a bit like families do when working within a budget.

This can be incredibly difficult. Sometimes decisions need to be made to make sure the finance is in place for services which face ever-increasing demand e.g. General Practice and A&E.

### What are we doing to make services more efficient and effective?

We continually look at the best ways to provide high quality services. By doing this communities in Leeds are benefiting from:

- **New models of care that support people to live independent lives, keeping them out of hospital unless medically necessary**
- **Improved access to primary care.**

We work with other commissioning groups to look at how services can be developed across the area, including;

- **Cancer services**
- **Paediatrics**
- **Stroke**
- **Urgent & emergency care.**


Over the last year we have also encouraged people to buy their own paracetamol for pain relief. The money saved has allowed us to invest in other services and newer drugs.

We are looking at new models to deliver effective and efficient care in GP practices, to take the pressure off A&E and provide walk in facilities.

### What are we proposing to change?

- **Gluten free foods**
- **Branded medicines**
- **Over-the-counter medicines**

We want an open and genuine conversation with people about the proposed changes to services set out in the coming pages. We want to listen to what you think about our plans. Please complete our questionnaires.



“We want to hear from anyone in Leeds who could be affected by the proposed changes, and listen to their views”



## Gluten free foods

### Background

For more than 30 years, the NHS has prescribed gluten free foods such as bread, flour, cereal and pasta to help people with coeliac disease follow a gluten free diet.

Many people who have been prescribed gluten free foods, because of gluten intolerance, are issued with a prescription which they take to their community pharmacy to get the foods.

When prescriptions were first used for this it was because it was very difficult to find gluten free foods. Now most supermarkets stock a wide range. Food labelling has also improved so people know what is in their food and can avoid gluten more easily.

We spend around £450,000 a year on prescription gluten free products in Leeds.

### What we are proposing

Our proposal is to not routinely fund gluten free foods on a prescription basis because:

- **It costs more for the NHS to supply gluten free products on prescription than for you to buy them from a supermarket. The issuing of a prescription includes your doctor's time, pharmacy staff resource and dispensing fees**
- **Other naturally gluten free foods are widely available e.g. potatoes, rice, corn**
- **Improved food labelling means people can see what to avoid in products.**

### Who might be affected by the proposals?

- **Everyone who currently receives gluten free foods on prescription (around 900 patients).**

### Who would not be affected by the proposals?

- **People who do not receive gluten free products on prescription.**

**Potential saving to NHS Leeds:**

**£450,000 a year**

GLUTEN-FREE FOODS SURVEY

Do you receive gluten free prescriptions? ☐ Yes ☐ No

Does someone you care for/look after receive a gluten free prescription? ☐ Yes ☐ No

How much do you agree or disagree with the plan to not routinely prescribe Gluten Free Products?

Strongly agree	Agree	Disagree	Strongly Disagree	Don't know

Please tell us more about your answer:



Branded medicines

Background

Most medicines available from the NHS are prescribed by their chemical name rather than their brand name. There may be times when some patients require a specific brand or version of the product e.g. because they have an allergy to colourants or other ingredients. Some patients request specific brands as a personal choice.

The names of medicines can often be confusing. The same medicine can sometimes be called different things. Many medicines have two names. Both do the same thing medically, but different manufacturers can give it a different name.

It is similar to buying branded goods or a supermarket's own label – both products do the same job, but the supermarket's own version is usually cheaper.

Branded medicines can cost the NHS up to 56 times more than the equivalent non-branded products.

It is estimated that we spend an additional £130,000 every year on prescribing branded medications instead of the equivalent non-branded products.

What we are proposing

We will routinely commission the prescribing of non-branded products unless there is a medical reason.

Who might be affected by the proposals?

People who request a branded medicine when there is no medical reason to do so.

Who would not be affected by the proposals?

People who have a medical need for a particular product for specific reasons, such as an allergy to colourants, binders etc.

To give you an idea of the different costs for branded and non-branded medicines we have listed some examples below:

Commonly prescribed for:	Branded item	Generic item
High cholesterol	Lipitor® £24.64	Atorvastatin tablets £1.09
Treating indigestion and ulcer problems	Losec® £13.92	Omeprazole 91p
Treating migraines	Imigran® £31.85	Sumatriptan £1.22
Preventing blood clots	Plavix® £35.31	Clopidogrel £1.54
Preventing recurrence of breast cancer	Arimidex® £68.56	Anastrozole £1.22
Glaucoma	Xalatan® eye drops £12.48	Latanoprost eye drops £1.54

Prices correct at October 2016

Potential saving to NHS Leeds:

£130,000 a year



BRANDED MEDICINES SURVEY

How much do you agree or disagree with the proposal to not routinely prescribe branded medicines when a non-branded equivalent is available?

Strongly agree	Agree	Disagree	Strongly Disagree	Don't know

Please tell us more about your answer:



Over-the-counter medicines

Background

Over-the-counter medicines are ones you can buy at a chemist or supermarket etc. You do not need a prescription.

What we are proposing

We are proposing that we will not routinely fund a range of products on prescription such as:

- sunscreens for skin protection from UV radiation
- camouflage creams and other products that have a predominantly cosmetic action
- multivitamins, where no specific deficiency has been identified, including vitamin D
- emollients (moisturisers), shampoos, bath and shower products and fungal nail treatments that are for cosmetic purposes or minor conditions that will get better on their own/have no long-term impact on a person's health.

Who might be affected by the proposals?

Who may be affected:

- those who receive products on prescription for largely cosmetic reasons e.g. to cover a scar or birthmark
- those with mild conditions which will get better on their own/have no long-term impact on a person's health e.g. dry skin, dandruff or fungal nail infections
- those prescribed ongoing vitamin supplements after a deficiency has been corrected or where it is taken to prevent deficiency on a long term basis
- those who receive vitamin supplements but who do not have an underlying health condition.

Who would not be affected by the proposals?

People who would continue to receive such medicines on prescription include:

- people receiving highly specialised products, e.g. protection from visible light.
- those who have been identified as having specific vitamin and mineral deficiencies and require medical intervention to treat the deficiency
- people with diagnosed eczema who are prescribed emollients to prevent the condition getting worse

Potential saving to NHS Leeds:

£1 million a year

OVER-THE-COUNTER MEDICINES SURVEY

How much do you agree or disagree with the proposal to not routinely prescribe certain products that can be bought over-the-counter at a chemist or supermarket?

Strongly agree	Agree	Disagree	Strongly Disagree	Don’t know

Please tell us more about your answer:

The following items can be bought in most supermarkets and/or pharmacies.

Do you think these items should be available on prescription?	Yes	No	Don’t know
Sunscreens for skin protection from UV radiation			
Multivitamins (including vitamin D) except where deficiency has been diagnosed			
Camouflage products e.g. for port wine stain birthmarks			
Moisturisers and bath remedies for mild dry skin			

Do you or someone you care for have any of these items prescribed?	Myself	Other
Sunscreens for skin protection from UV radiation		
Multivitamins (including vitamin D) except where deficiency has been diagnosed		
Camouflage products e.g. for port wine stain birthmarks		
Moisturisers and bath remedies for mild dry skin		

YOUR VIEWS

Before we make any decisions we want to know what you think about our proposals. We would welcome any thoughts or suggestions you have.

Which one of the following statements do you agree with most?

Please tick only one answer

	Please tick
The NHS should provide the most effective drugs and treatments only if they represent good value for money	
The NHS should provide only the most effective drugs and treatments, whatever they cost	
The NHS should provide all drugs and treatments no matter what they cost	
I don’t know	
Do you wish to make any other comments?	

Which statements apply to you? Please tick ANY answer

	Please tick
I do not receive any of these items but am an interested patient	
I am a healthcare professional responding in a professional capacity	
Other, please specify	
Do you wish to make any other comments?	

EQUALITY MONITORING (PART 1 OF 2)

In order to ensure that we provide the right services and to ensure that we avoid discriminating against any section of our community, it is important for us to gather the following information. The information you provide will be kept confidential. No personal information will be shared and your information will be protected and stored securely in line with strict data protection rules.

This section is optional. Please tick ‘Prefer not to say’ if there are any questions you do not wish to answer.

1. What is the first part of your postcode?

Example	LS1
Your postcode	

☐ Prefer not to say

2. How old are you?

Example	46
Your age	

☐ Prefer not to say

3. Are you disabled?

(The Equality Act 2010 defines disability as ‘a physical, sensory or mental impairment which has substantial and long term adverse effect on a person’s ability to carry out day to day activities’.)

☐ Yes ☐ No

☐ Prefer not to say

If yes what type of impairment. Tick all that apply.

☐ Physical impairment

☐ Learning disability

☐ Long-standing illness

☐ Mental health condition

☐ Visual impairment (such as blind or partially sighted)

☐ Hearing impairment (such as Deaf or hard of hearing)

☐ Prefer not to say

4. Ethnic background

- ☐ White English
- ☐ White Irish
- ☐ Gypsy or Irish Traveller
- ☐ Mixed White and Black Caribbean
- ☐ Mixed White and Black African
- ☐ Mixed White and Asian
- ☐ Asian/Asian British Indian
- ☐ Asian/Asian British Pakistani
- ☐ Asian/Asian British Bangladeshi
- ☐ Black/Black British Caribbean
- ☐ Black/Black British African
- ☐ Chinese
- ☐ Arab
- ☐ Any other ethnic group (please specify)

☐ Prefer not to say

5. Religion or belief

- ☐ Buddhist
- ☐ Hindu
- ☐ Muslim
- ☐ Christian
- ☐ Jewish
- ☐ Sikh
- ☐ No religion
- ☐ Other (Please specify in the box below)

☐ Prefer not to say