

**Health Scrutiny Committee  
12 March 2020**

**Over the Counter Medication Prescriptions**

**Report of the Head of Legal and Governance**

**1 Purpose**

- 1.1 To receive an update on the implications of restricting prescriptions for over the counter medicines.

**2 Action required**

- 2.1 To consider the update provided on the implications of restricting prescriptions for over the counter medicines, and decide whether any further scrutiny is required.

**3 Background information**

- 3.1 At the Health Scrutiny Committee on 18 October 2018, Beth Carney, Associate Chief Pharmacist in Medicines Management, Greater Nottingham Clinical Commissioning Partnership, presented proposals, consultation, and recommendations on prescribing over-the-counter medicines, in line with NHS England guidance.
- 3.2 It was noted that some clinical commissioning groups within the county had already implemented the restriction and it was intended that a standard approach was adopted throughout the Greater Nottingham area. It was proposed that, with the exception of vulnerable groups and those with long-term disabilities, medication was not prescribed for self-limiting conditions or minor illness, or where there was no clinical evidence of efficacy (such as vitamins, minerals or probiotics). However, ultimately the decision to prescribe remained with the GP. The following points were highlighted:
- (a) the CCG would work with GPs to try and ensure the new approach was implemented to the same level across the area, but where guidelines were not met, the CCG would discuss issues with GPs;
  - (b) patients' individual circumstances could be considered, but if it was found that there was a wider issue in that GPs were not comfortable following the guidelines, then further examination by the CCG would take place;
  - (c) self-care would be promoted and support put in place;

- (d) national guidance stated that there was evidence only in a limited number of situations that vitamins were of benefit, so these were included in the exceptions;
- (e) an advisory form/leaflet with tick boxes was available for GPs to use for non-prescription medication and the CCG was asking pharmacists to accept and support the recommendations of GPs;
- (f) the GP was expected to consider the vulnerability of the patient and their long-term conditions when deciding if medications which were available to buy should be prescribed. There was no limitation on treatment, however there were some medications which patients needed to buy themselves;
- (g) with regard to some medications it was cheaper to buy them over the counter than pay the prescription charge.

3.3 The Committee agreed that the CCG would provide an update on progress in implementing the guidance, and it is attached to this report.

3.4 Representatives from the CCG will be in attendance at the meeting to present the information and answer questions.

#### **4 List of attached information**

4.1 Report from the CCG.

#### **5 Background papers, other than published works or those disclosing exempt or confidential information**

5.1 None.

#### **6 Published documents referred to in compiling this report**

6.1 Health Scrutiny Committee report and minutes dated 18 October 2018.

#### **7 Wards affected**

7.1 All.

#### **8 Contact information**

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