National Voices
18-20 Bride Lane
London
EC4Y 8EE

Friday 21 July 2017

Position statement:
'Low-value' prescriptions

Over the counter treatments and ability to pay

The consultation includes an apparent intent to remove NHS funding for prescriptions of remedies that are otherwise available 'over the counter' such as those for acute pain, constipation, head lice and ring worm.

The consultation document does not make any plain English proposals here, and asks for general 'views'. We consider that this makes it very difficult for patients and patient organisations to understand the real agenda, and to make meaningful and constructive responses.

While it may seem like common sense that 'self care' remedies and treatments should not be prescribed, we are aware that there are many patients who:

a) suffer from the conditions listed in this part of the consultation;
b) would be unable to afford the remedies over the counter – for example, people who are exempt from prescription charges such as the under 16s, people living with cancer, pregnant women, and those on low incomes, and;
c) experience the listed conditions not as short episodes of minor illness, but as persistent secondary problems that may be caused by other chronic conditions.

Stopping such prescriptions would be tantamount to introducing 'ability to pay' as a barrier to accessing the treatments people need. This breaks with the principle of 'free at the point of use' guaranteed by the NHS Constitution. Any such restrictions should not be introduced through NHS England guidance to clinical commissioners, but after political debate by democratically elected authorities.

Registered charity number 1057711
Company limited by guarantee 3236543

020 3176 0738
info@nationalvoices.org.uk
www.nationalvoices.org.uk

> "Access to NHS services is based on clinical need, not an individual's ability to pay: NHS services are free of charge, except in limited circumstances sanctioned by Parliament."
>
> *NHS Constitution, updated October 2015*

Recommendations on the 18 specific treatments in the consultation

National Voices is in favour of stopping the NHS from continuing 'no value' or 'low value' treatments, so that resources can be better used on higher value treatments.

However, we are concerned that there has been no opportunity for relevant patient groups to shape the draft guidance and recommendations. Being 'consulted' after the fact is second best.

Clinical evidence, as referenced by the clinical working group that drafted the guidance, is only one form of evidence. Another comes from people's actual experience of using treatments, and how their effectiveness in individual circumstances compares to other options. There should have been an opportunity to gather that experiential evidence before drafting recommendations which, in many of the 18 examples, amount to a proposed ban on all use.

We are concerned that, as a result, people whose experience does not conform with the limited clinical trials on which treatment appraisals are based will be turned into 'exceptional' cases who have to plead for appropriate treatment and funding.

It would be greatly preferable if the guidance a) recognised where some of these categories of patients exist, and b) allowed for GPs and other prescribers to exercise their professional clinical judgement, and to share decision making with their patients, based on exploring all treatment options and their risks, as is their duty under professional codes and indeed the law.

National Voices anticipated some of these concerns and raised them with NHS England and NHS Clinical Commissioners in a letter on 6 April 2017.