

Item 12

Date	Tuesday, 14 November 2017
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Title of paper	Prescribing Wisely – Supplementary Equalities Impact Assessment
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Confidential	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Items are only confidential if it is in the public interest for them to be so

The Governing Body is asked to:
Note the supplementary equalities impact report and the assurances given to, and confirmed by, the Accountable Officer.

Summary of purpose and scope of report
<p>This paper provides the Governing Body with an update on the work undertaken on the equality impacts following the decisions made by the Governing Body at its meeting on 12 September 2017 to approve the Prescribing Wisely (previously Choosing Wisely) in relation to over the counter medicines/products and repeat prescribing.</p> <p>At that Governing Body, proposals relating to over the counter medicines/products and repeat prescribing were discussed and approved. However, whilst the Governing Body accepted the proposals set out in the papers based on the feedback from the public engagement and agreed that they should be implemented, approval was given on the basis that further work was undertaken on the equalities impact assessment as they did not consider the outcomes presented in the report from PHAST to be adequate. Consequently a period of five weeks was set aside to enable people to provide feedback and comment specifically on the equalities related elements of the proposals. The feedback received and the conclusions/recommendations made are set out in full in the attached paper.</p> <p>In summary a total of 481 comments were received from 88 people. This was a combination of those who attended a one off listening event in August and those who completed the feedback templates that were prepared and distributed to a wide group of people and organisations. The distribution of the feedback templates aimed to ensure that all protected characteristics were provided with the opportunity to contribute. A full summary of the feedback received from the feedback templates is provided at appendix E to the report. The</p>

appendix sets out, by protected characteristic area, the comments received in relation to the two proposals, whether mitigation had already been put in place based on feedback from the original engagement exercise and a suggestion of the mitigation required where this had not been actioned previously. The summary also provides details of those comments that it was felt did not directly relate to the specific proposals or were generic, in order that all comments were captured.

In relation to **over the counter medicines and products** the main feedback was that:

- A significant number of respondents raised concerns about the impact on peoples' financial position if they were to be asked to purchase the medicines and products on the list.
- Many respondents raised concerns about how GPs would be able to determine whether the patient responding "yes" would actually be in a position to afford to purchase one or more medicines or products on the list.
- Many respondents were concerned about whether patients who do not have English as a first language would understand that they were being asked to purchase an item from the list. Additionally, cultural norms in certain communities of not saying "no" to someone like a GP may leave some patients vulnerable if they are unable to afford a medicine or product on the list.
- Many respondents were concerned that vulnerable groups, such as people with a learning disability, the disabled, children, people with dementia or who are confused, the elderly, people with mental health problems and people in care homes would be asked to pay for products on the list which was thought to be unacceptable.
- Respondents felt that it was unacceptable to ask patients on often life long multiple medicines/products to consider paying for one or more of these.
- Respondents were concerned that the reliance on carers to make decisions on behalf of the patient would place an additional burden on them and was inappropriate
- Respondents highlighted concerns that domiciliary carers are not insured to administer medicines and products to people unless prescribed by a doctor.
- In relation to children a number of comments highlighted the potential safeguarding impacts on requiring medicines or products to be purchased as the decision on whether to purchase them may be a financial one for the parent or carer and could impact a child's health if the medicine or product was not purchased.
- Respondents felt that the approach added further to a sense of stigmatisation felt by groups such as those undergoing gender reassignment, people on low income, people with mental health problems

In respect of **requesting repeat prescriptions** the following concerns were highlighted:

- Vulnerable people are less likely to remember to order their repeat prescriptions and could therefore be left without medicines that they require
- Some groups of people are unable to use computers and smart phones and would

be disadvantaged by the proposed changes

- Inappropriate to assume that patients who cannot manage to request their own repeat prescription would always be happy disclose medical details to a carer or family member to manage on their behalf
- Increased time pressure on GPs in relation to those patients unable to access or use technology to re-order their prescriptions as they would have to revert to this being done directly at the GP practice
- Those patients who do not have English as a first language may not fully understand the changes and therefore may misunderstand the need for them to put in place alternative arrangements to those that they currently have
- For patients who would need to refer back to the practice to arrange their repeat prescribing some find it difficult to access their GP practice because of their personal circumstances or because surgeries are not open at times convenient to them and therefore would be disadvantaged as a result of having to revert to ordering their repeat medicines from the GP rather than this being managed by the community pharmacist

In the papers presented to the Governing Body, a number of mitigations were set out based on the feedback received from the original engagement exercise and original EQIA. The outcome of the additional equalities feedback has recommended

- A widening of the groups that would be exempt from being asked whether they would consider purchasing medicines/products on the CCG list over the counter
- Ensuring that communications were clear and unambiguous for patients that no one will be denied a prescription if the GP considers that a patient requires one or more of the medicines or products on the proposed list
- Communication to and with GPs needs to ensure that there is no suggestion of a blanket ban on products on the list of over the counter medicines and that if they are in any doubt about a person's ability to pay then they should prescribe in the usual way
- A strengthening of the communication to GPs, pharmacists and patients to make it clear and explicit that where a patient will not be able to put alternative arrangements in place that are safe and workable for the patient, their existing arrangements should be maintained

As the Governing Body had already approved the proposals and as the recommendations from the additional equalities work made no proposals to significantly alter the original proposals governance advice was that it was reasonable for the Accountable Officer to consider whether sufficient assurance could be assumed to have been given that the additional work required had been undertaken, that there were no material changes to the original decision required and that appropriate additional mitigations had been proposed.

On 20 October the Accountable Officer confirmed she was happy that the additional work on the equalities impact required by the Governing Body had been completed and that the

Item 12

additional mitigations proposed and put in place were appropriate. Consequently, the programme commenced implementation on 30 October 2017.

Quality & Safety/ Patient Engagement/ Impact on patient services:

The supplementary EQIA report has been prepared following receipt of feedback and comments on the EQIA aspects of the Prescribing Wisely proposals which took place over a five week period between 8 August and 18 September 2017.

Finance, resources and QIPP

There are no financial implications in the report.

Equality / Human Rights / Privacy impact analysis

The report provides direct feedback on equality related aspects of the Prescribing Wisely proposals

Risk	Mitigating actions
<p>Failure to undertake additional EQIA evaluation, to review feedback from and take appropriate mitigating actions in relation to the outcome of the additional evaluation will fail to meet Governing Body expectations</p> <p>What risks on the Board Assurance Framework or local CCG risk register does it impact upon or mitigate and how?</p>	<p>Five week public feedback and comment process undertaken and outcomes summarised in report for Accountable Officer</p> <p>This additional work can be linked to the delivery of BAF risk 6.6. The specific actions taken makes a positive impact on reducing risk in relation to this programme of work</p>

Supporting documents

Supplementary EQIA report and five appendices.

Governance and reporting		
(list committees, groups, other bodies in your CCG or other CCGs that have discussed the paper)		
Committee name	Date discussed	Outcome
Name	DD/MM/YYYY	



Item 12