

GOVERNING BODY


Date of meeting	20 September 2016	Agenda item number	13
Title of report	Gluten Free Products Prescribing Policy		
Paper Presented by:	Claire Lewis		
Paper prepared by:	Julie Lonsdale, Head of Medicines Optimisation		

CCG strategic objective supported by this paper: (please tick ✓)	Develop and maintain an effective organisation	<input type="checkbox"/>
	Commission high quality, safe and cost effective services which reduce health inequalities and improve access to healthcare	<input checked="" type="checkbox"/>
	Effectively engage patients and the public in decision making	<input checked="" type="checkbox"/>
	Develop excellent partnerships which lead to improved health outcomes	<input type="checkbox"/>
	Make the best use of resources	<input checked="" type="checkbox"/>

Purpose of report
The report outlines the reasons behind the Clinical Commissioning Committee's recommended commissioning statement not to prescribe Gluten Free (GF) food products. A public engagement process was undertaken via a survey and results of this are outlined. The CCG and Lancashire wide commissioning principles are applied when considering the commissioning statement (Policy).
Recommendation
The Governing Body is asked to endorse the draft commissioning statement, as recommended by the Clinical Commissioning Committee.

Please indicate which Group this has been discussed with (please tick ✓)			
Executive Management Team (EMT) (concept only)	<input checked="" type="checkbox"/>	Quality Improvement Governance and Engagement Committee (QIGE)	
Clinical Commissioning Committee (CCC)	<input checked="" type="checkbox"/>	Finance and Performance Committee (F&P)	
Audit Committee	<input type="checkbox"/>	Remuneration Committee	
Council of Members (concept only)	<input checked="" type="checkbox"/>	Medicines Group (concept only)	<input checked="" type="checkbox"/>
Patient and Public Engagement:	By way of survey		
Equality Impact Assessment:	Stage 1 and 2 EIRA completed		
Resource Implication(s):	None		
For further information please contact:	Julie Lonsdale		

GOVERNING BODY – TUESDAY 20 SEPTEMBER 2016**GLUTEN FREE PRODUCTS PRESCRIBING POLICY****Approval Gateways**

Title/Forum	Name	Date	Signature
Chief Nursing Officer	Jennifer Aldridge	01 September 2016	

1. INTRODUCTION

- 1.1 The Clinical Commissioning Group (CCG) currently only funds certain Gluten Free (GF) products such as bread and flour; we do not fund cakes or biscuits. Spend per year is around £85,000 on GF products with further expense to NHS England on dispensing fees. Historically GF foods were not readily available from supermarkets, so access via prescriptions on the NHS was important. Now products are easily obtained, product ranges have expanded and prices are more competitive. Often costs to the NHS are higher than the equivalent costs to purchase products directly from supermarkets.
- 1.2 As recommended by the Clinical Commissioning Committee (CCC), the Governing Body is asked to endorse the draft commissioning statement not to fund the prescribing of GF food products for use in Coeliac Disease or gluten intolerances, taking account of the responses in the patient survey; the outcomes and discussions in the CCC meeting and the application of the Lancashire wide commissioning principles, outlined below.

2. CONTEXT

- 2.1 Making the best use of resources is a requirement of CCGs and in that context, Lancashire CCGs have identified this issue for consideration, with at least one in Lancashire having implemented a commissioning statement, as have others across the country.
- 2.2 The Lancashire commissioning 'Statement of Principles' and the NHS constitution should be considered when approving this commissioning statement.
- 2.3 A stage 1 and Stage 2 Equality Impact Risk Assessment (EIRA) have been undertaken which found no Equality and Inclusion issues.
- 2.4 The draft Fylde and Wyre CCG commissioning statement can be found in appendix 1.
- 2.5 The results of the Fylde and Wyre CCG patient survey can be found in appendix 2.

3. CCC CONSIDERATION AND RECOMMENDATION

- 3.1 A paper outlining the options, risks, patient survey results, the EIRA and the proposed draft commissioning statement were presented to the CCC at the 6th September 2016 meeting.

- 3.2 The main concern expressed was whether the health of patients would decline should they start eating gluten or not take in enough calories. The feeling of the committee was that all patients and the public should be encouraged to adopt more healthy eating styles, which would include sourcing naturally GF foods for coeliac patients. To this end good dietary advice will be provided to coeliac patients regarding the type and sources of appropriate foods. Patients will be directed to the excellent information resources provided by the coeliac society - Coeliac UK. GPs, who are concerned about their individual patient, may use existing pathways to seek additional dietary assessment and advice, as appropriate.
- 3.3 Other concerns were around the results of the survey and whether we have listened to public concerns. The online survey went live in August. The survey was sent to NHS providers and stakeholders across Fylde and Wyre, as well as patient participation groups, voluntary organisations, Healthwatch Lancashire and Coeliac UK. A media release was published in local newspapers and the survey was promoted via social media. A total of 241 responses were received. The committee noted that the majority of responses were from coeliac patients or carers of coeliac patients; these patients had been contacted by the Coeliac Society requesting them to respond to the survey. The two main public concerns were about people having to buy their own food on low incomes and not all shops stocking GF foods or supply issues. The committee felt that although GF foods may be higher in price than non-GF foods, they are still affordable and there is an option to buy naturally occurring GF foods such as potatoes and rice; which may be better than bread and pizza bases that arguably do not advocate adherence to healthy balanced diets. The CCG recognises that for some people on low incomes, having to pay for their GF foods will be an added pressure and whilst we cannot tackle this as a CCG, we can work with other organisations to ensure people are supported as far as possible.

Regarding the supply issues, the committee felt that large supermarkets usually stocked a good range of products and items currently available on prescription could all be purchased when in stock and frozen; this is currently what patients have to do when they have monthly prescriptions.

- 3.4 The CCC considered other options ie:
- To continue to allow prescribing to take place. The current practice of prescribing for GF products is already creating an inequity, in relation to other food intolerances. The CCG has a duty to promote equality and the EIRA has not highlighted a risk to equality and inclusion in relation to the protected characteristics.
 - To adopt a voucher scheme to control costs. This would allow patients to receive vouchers to put towards buying their own GF products directly from supermarkets. This would be difficult to set up, agree with local supermarkets and monitor. The CCG would have little control over the types of products being purchased. Also we do not give vouchers for other food intolerances, so this option would perpetuate inequity.

Given the evidence about availability and now relative affordability of GF foods and the option to manage a healthy diet with naturally occurring GF foods, the CCC concluded that the most equitable and cost effective option is to implement the commissioning statement.

3.5 The CCC acknowledged the potential risks of adopting the commissioning statement i.e.:

- The health and wellbeing of coeliac patients could decline if they eat gluten containing foods or if their energy consumption decreases. Mitigation against this is by providing patients with good quality and accessible information on how to source gluten free products as well as use of carbohydrates that naturally do not contain gluten. Coeliac UK is a good source of such information for patients. For patients who require it, additional dietary assessment and advice will be provided through GP referral.
- The CCG may receive letters of complaint. Mitigation against complaints has been considered with the public engagement exercise and survey. Further engagement is planned with the communications team. This will enable the CCG to understand the impact of the implementing the commissioning statement and be assured that patients are receiving good quality advice about managing their condition effectively.

In conclusion, the CCC made a recommendation to adopt the draft commissioning statement not to prescribe GF foods.

4. STATEMENT OF PRINCIPLES

4.1 The draft commission statement has been based on the CCG's statement of principles within the suite of policies for the commissioning of healthcare. Consideration of each of the five principles is detailed below.

4.2 **Appropriateness:** GF foods have been prescribed to support coeliac patients in sourcing GF products due to an historic limited availability of such products in shops. It does not accord with the principle of appropriateness to continue to prescribe for this group now that GF products are readily available to the general public, nor when prescribing of food products for other food intolerant groups does not occur.

4.3 **Effectiveness:** Coeliac disease is a condition that will deteriorate if a patient eats gluten in their diet. All coeliac patients understand the important requirement to avoid gluten. GF foods are not a treatment for coeliac disease and they will not produce a substantial improvement to the disease state; the disease state remains despite eating GF foods. It does not accord with the principle of effectiveness to prescribe something when alternative means of managing the condition (ie naturally occurring GF foods) are available.

4.4 **Cost Effectiveness:** This commissioning statement places limited reliance on the principle of cost-effectiveness, in that two or more alternative prescriptions are not being compared and therefore the issue of cost-effectiveness has not been considered in developing the statement.

4.5 **Ethics:** This commissioning statement places some reliance on the principle of ethics, on the grounds that GF products are readily available and affordable and naturally occurring GF foods are also available, hence patients are not being disadvantaged by implementing the commissioning statement.

- 4.6 **Affordability:** This commissioning statement places reliance on the principle of affordability in developing the statement. The CCG has a limited budget for all healthcare and prescribing and has to prioritise for the best use of these limited funds.

5. RECOMMENDATION

The Governing Body is asked to endorse the draft commissioning statement, as recommended by the Clinical Commissioning Committee.

Jennifer Aldridge
Chief Nursing Officer

Julie Lonsdale, Head of Medicines Optimisation

31/08/2016

APPENDIX 1

Gluten-Free food products

For use in Coeliac Disease and gluten intolerance

Commissioning Statement

Fylde and Wyre Clinical Commissioning Group has agreed not to fund the prescribing of gluten free food products for use in coeliac disease or gluten intolerances.

These food products are classified as BLACK

Supporting information

Historically, availability of Gluten Free (GF) foods in supermarkets was poor, therefore obtaining these products from community pharmacies via prescriptions improved access to them. However, with the increased awareness of coeliac disease and gluten sensitivity as well as a general trend towards eating less gluten, GF foods are now much easier and accessible to purchase. A wide and expanding range of GF foods are now available from supermarkets and online. It is acknowledged that in some supermarkets their GF food range can be more expensive than the gluten containing equivalents. Nonetheless, the price paid by the NHS for GF foods on prescription is much higher than supermarket prices and in some cases it may be twice as expensive. There has been a move from use of vacuum packed bread to fresh bread and this can attract higher remuneration fees to community pharmacies, such as out of pocket expenses or delivery fees, which are chargeable to the NHS.

Fylde and Wyre CCG uses the Lancashire Clinical Commissioning Groups Statement of Principles when developing commissioning decisions. In developing local commissioning policies, the CCG will commission only treatments or services which accord with **all** of the following principles:

- Appropriateness
- Effectiveness
- Cost-effectiveness
- Ethics
- Affordability

The NHS Constitution commits the CCG:

- To provide best value for taxpayers' money and the most-effective, fair and sustainable use of finite resources.
- To make decisions in a clear and transparent way

Both the Statement of Principles and the development of the GF commissioning statement have been through a public engagement process.

For details around the colour classification system please refer to the website of the Lancashire Medicines Management Group at: <http://www.lancsmmq.nhs.uk/>

APPENDIX 2 – Results of patient survey

Patient survey results

Background

As a CCG, our commissioning decisions and policies are based on five key principles. This means that we will only commission treatments or services which are appropriate, effective, cost-effective, ethical and affordable.

Currently patients in Fylde and Wyre who have been diagnosed with coeliac disease – an autoimmune condition where a person has an adverse reaction to gluten – are able to access some gluten-free products through a prescription from their GP.

These foods include bread, cereals, flour, oats and pasta, and are dispensed by pharmacists.

Gluten-free food prescriptions began in the 1960s when it was difficult for coeliac disease sufferers to get hold of, however in recent years a wide and growing range of gluten-free foods has become available in supermarkets.

Prescribed gluten-free bread can cost the NHS up to £8.70 for the product alone, with handling and delivery charges adding to that cost. A supermarket gluten-free loaf of bread usually costs between £2 and £3.

The CCG launched a survey to find out what patients in the area think about the current gluten-free prescriptions policy as it looks to conduct a review. A copy of the survey is available at appendix 3.

Executive summary

The online survey went live on 10 August 2016 with a deadline of Friday 26 August. The survey was sent to NHS providers and stakeholders across Fylde and Wyre, as well as patient participation groups, voluntary organisations, Healthwatch Lancashire and Coeliac UK. A media release was published in local newspapers and the survey was promoted via social media. Below is a highlight report of the responses:

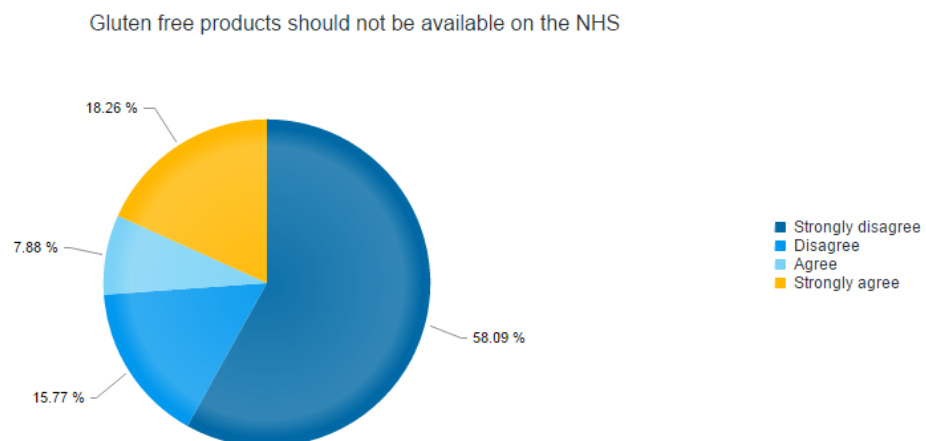
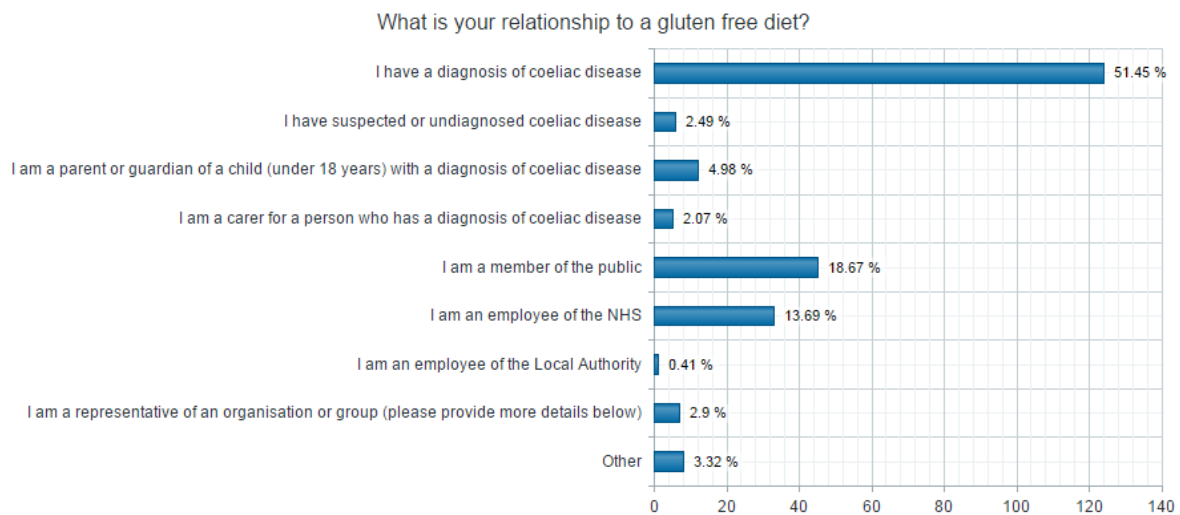
- A total of 241 responses were received (28% male and 72% female)
- 51% diagnosed with coeliac disease
- 10% either suspect coeliac disease or parent or carer of a coeliac patient.
- One respondent represents companies who provide gluten free products on prescription
- 63% believe funding gluten free products is equally important as medicine
- 73% believe gluten free products should be available on the NHS
- 28% believe the NHS should fund all gluten-free carbohydrates people need
- 33% believe the NHS should fund half of the gluten free carbohydrates people need
- 20% believe the NHS should only fund gluten-free flour mixes
- 26% believe the NHS should fund food products for all patients who have food intolerances

- 60% believe if the NHS stopped providing gluten free products people who find it more difficult to follow a gluten free diet.
- 57% believe if gluten-free products were not available on the NHS people would be more ill

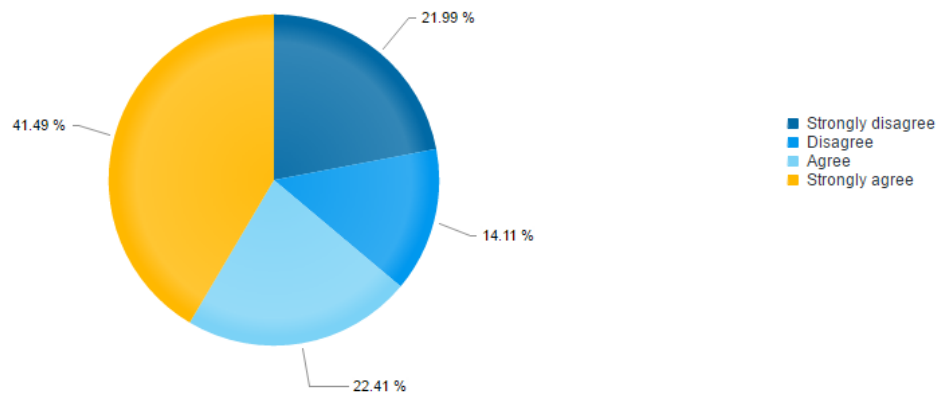
Over 100 thoughts and comments were shared and these mainly focused on the following themes:

- Affordability of gluten-free products compared to their gluten containing counterparts
- Availability of gluten-free products outside of the larger supermarkets
- Inefficiency of current system used to order gluten-free products on prescription
- Low quality and taste of all gluten-free products
- Surprise the NHS prescribes gluten free food

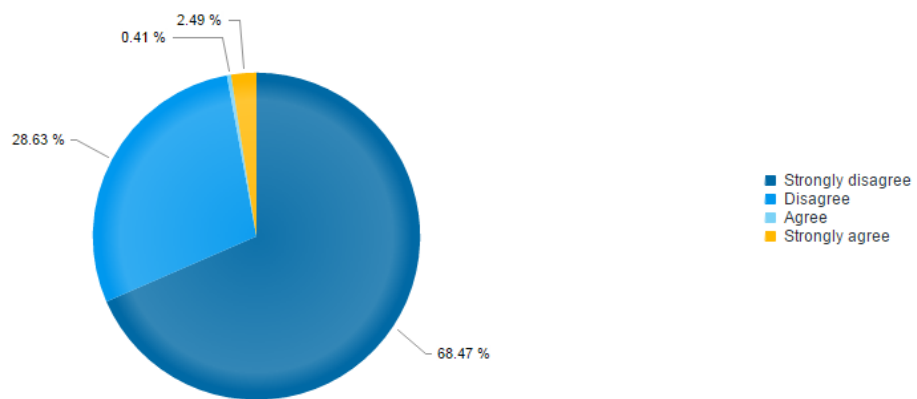
Detailed results



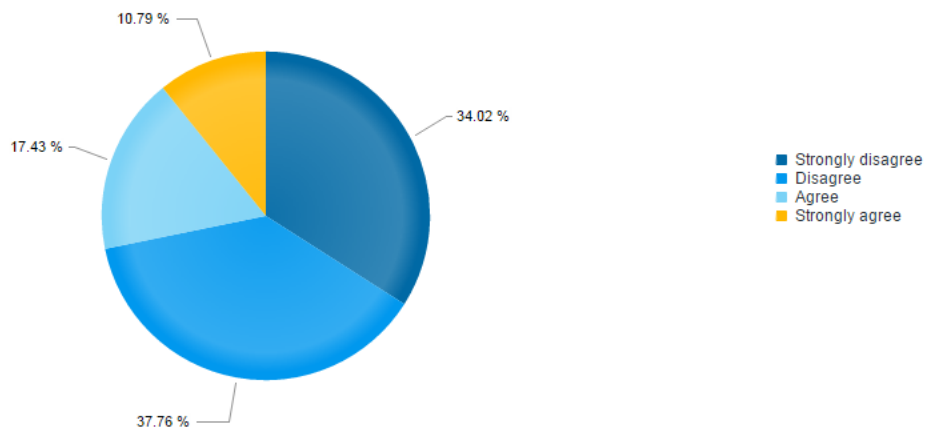
Funding gluten free products is equally as important as funding medicine on the NHS



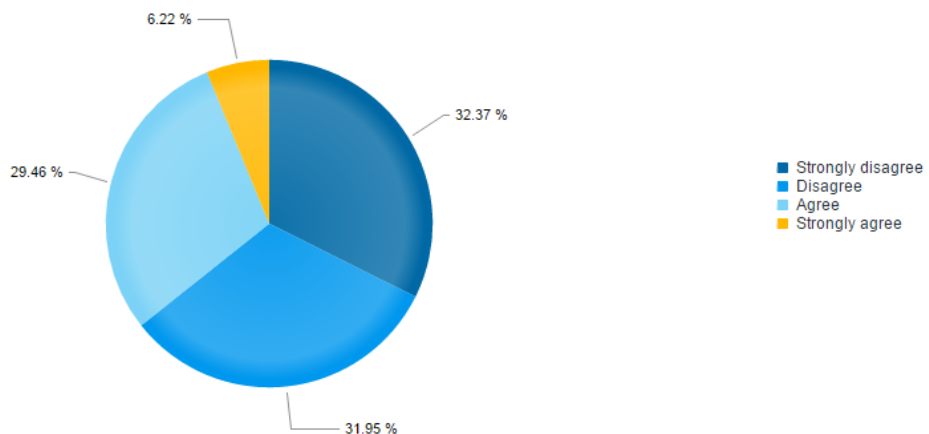
The NHS should pay for the whole family to have a gluten free diet, even if only one member of the family can't have gluten



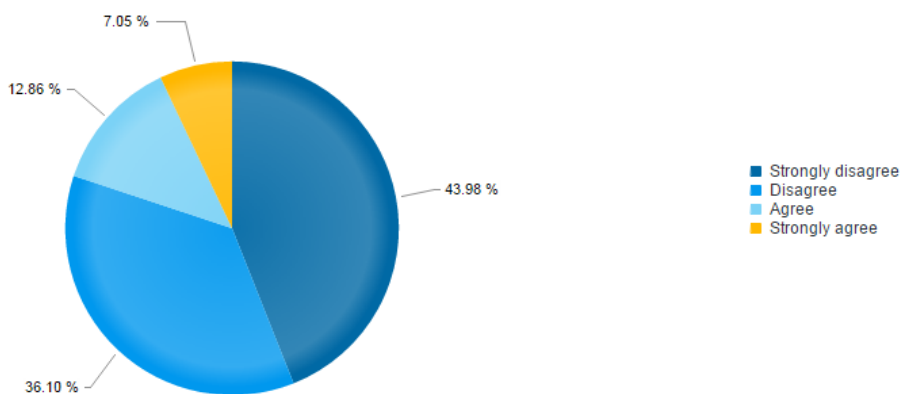
The NHS should fund all carbohydrates for people who need a gluten free diet



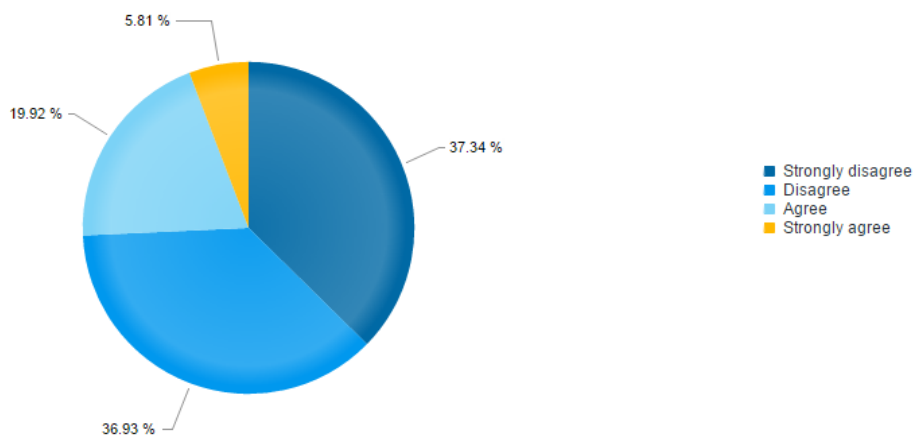
The NHS should fund half of the carbohydrates for people who need a gluten free diet



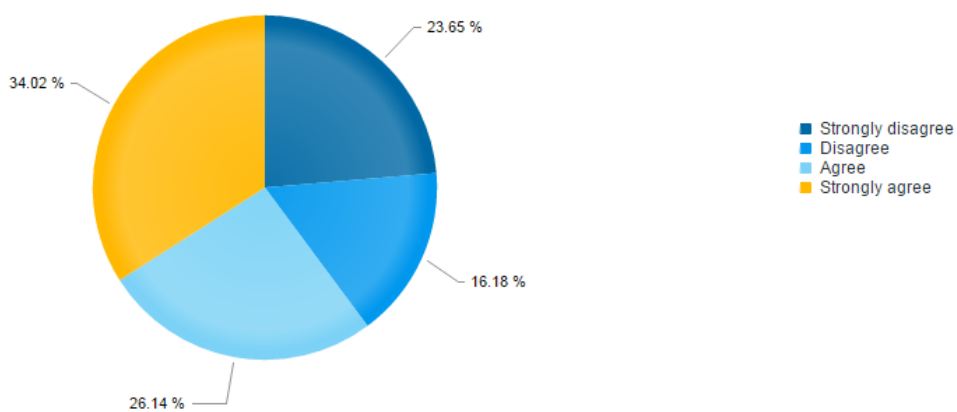
The NHS should only fund flour mixes, so people can make their own gluten free food



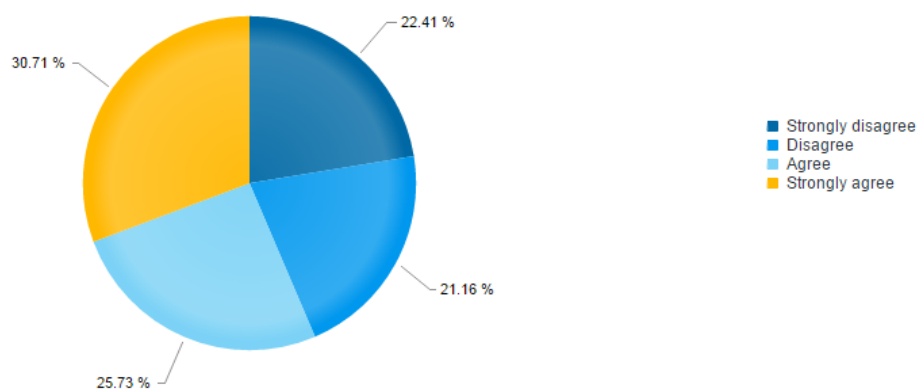
The NHS should fund food products for all patients who have food intolerances (not just those needing a gluten free diet)



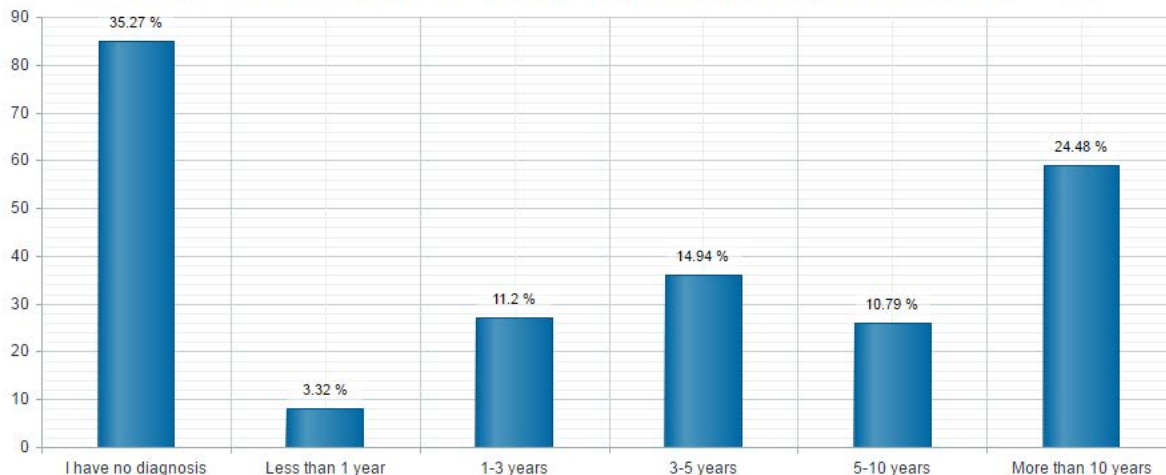
If gluten free products weren't available on the NHS, people would find it more difficult to follow a gluten-free diet



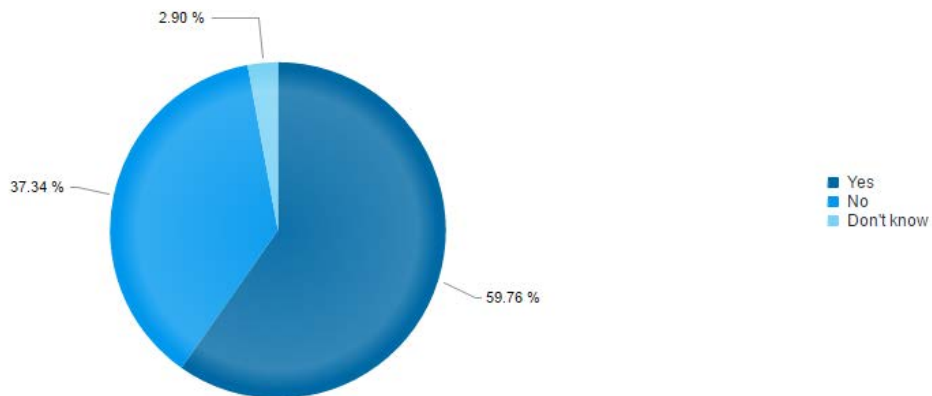
If gluten free products weren't available on the NHS, people would be more ill



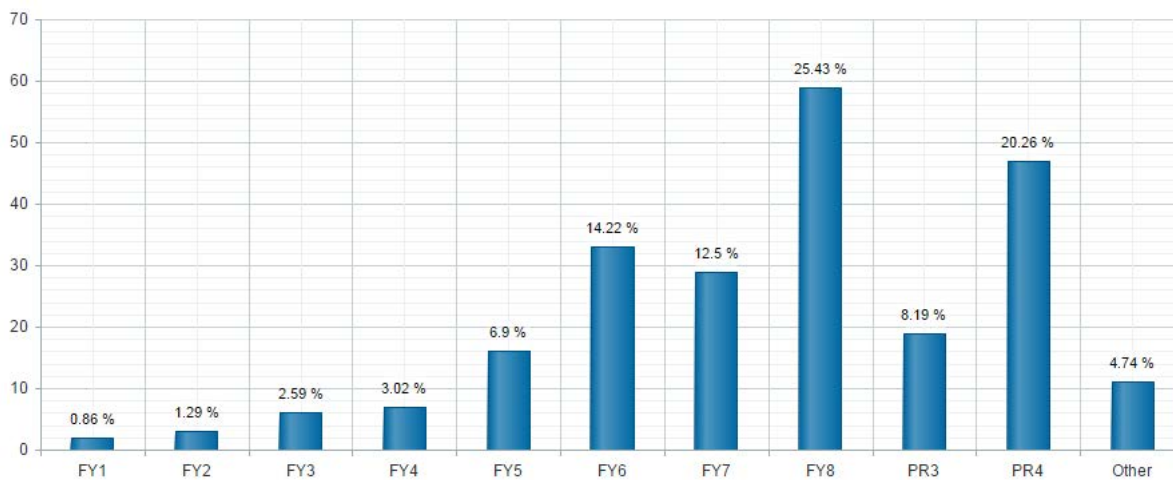
How long has it been since you have been diagnosed with a disease that means you have a gluten-free diet?



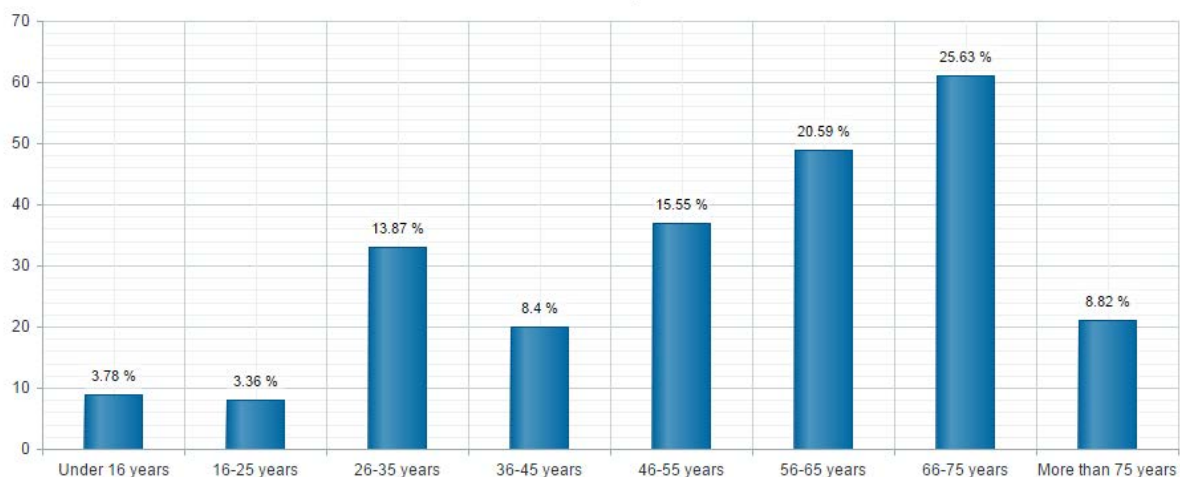
Are you eligible for free NHS prescriptions



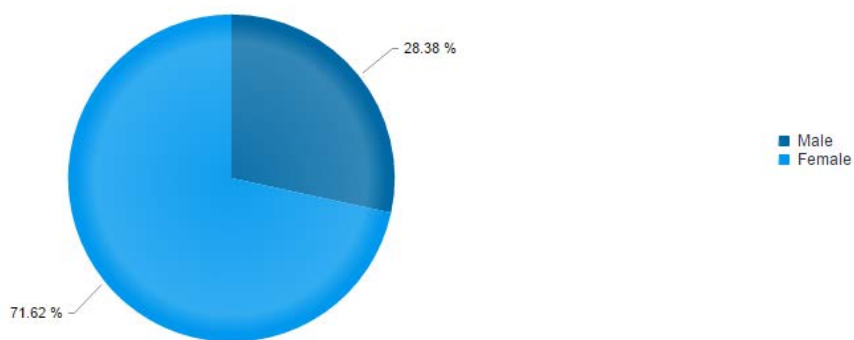
Postcode



How old are you?



Which gender do you consider yourself to be?



Which ethnicity do you consider yourself to be?

