

Self-Care (Phase 2) Consultation Communication and Engagement Plan

Version:	1.2 Draft
Author:	Katie Horan
Date:	September 2017

Contents

1. Background information
2. Aims and objectives
3. Timescales
4. Leadership for Engagement and Communications
5. Range and reach
6. Stakeholder matrix
7. Engagement plan
8. Audit of Engagement and Communications plan
9. Communication development
10. Communication toolkit

1. Background Information

In January 2016, following a 90 day formal consultation, NHS Warrington Clinical Commissioning Group approved guidance on self-care prescribing. This advised that for minor short term health problems, patients should access advice and purchase medicines such as homely remedies as they and their family need rather than being prescribed by their GP or other clinicians. Patients are expected, where possible, to try to alter their diet and life-style if it is probable that this is the cause of a minor health problem.

Following the successful implementation of this policy, where 87% of local people agreed making the change be a common sense approach, it is proposed that this policy is extended to include some additional medicines that fall within the following categories:

- Medicines and treatments that are available to purchase over-the-counter, used for the treatment of minor, short-term medical conditions.
- Medicines and treatments where there is limited evidence of clinical benefit or cost-effectiveness.
- Medicines and treatments that are prescribed to treat conditions where there is no clinical need for treatment.

NHS England has partnered with NHS Clinical Commissioners to support CCGs in ensuring that we use our prescribing resources effectively and deliver best patient outcomes from the medicines that our local population uses. CCGs asked for a nationally coordinated approach to the development of commissioning guidance in this area to ensure consistency and address unwanted variation. NHS England is undertaking a national consultation on medicines which can be considered to be of low priority for NHS Funding.

This national consultation runs from 21st July to 21st October 2017 and focuses on medicines of relatively low clinical effectiveness or which are unsafe, items which are clinically effective but where more cost effective items are available and items which are clinically effective but due to the nature of the item, are deemed a low priority for NHS Funding (travel vaccines), there are 18 items in total. These do not overlap Warrington CCG's medications for this phase 2 self-care consultation. However the national consultation is also asking views on over the counter medications – at this stage it is a consultation on the principle and any proposals which are developed will be subjected to further public consultation on specific items.

While taking into consideration NHS England's consultation on the principle of over the counter medication, the CCG have agreed to continue with Phase two of their self-care consultation on 29 identified medications.

Warrington proposal

Other than exceptional circumstance, medicines for minor health problems should be bought over the counter by patients INSTEAD of these medicines (outlined below) being routinely prescribed by GPs or other health care professionals in Warrington.

The new medications for the consultation are:

Medicines that can be purchased over-the-counter for the treatment of minor <u>or</u> short-term conditions		
Product category	Example products	Notes
Topical pain relief	Ibuprofen gel/cream/spray Diclofenac gel/cream/spray	For short term use only (NICE advises to consider topical NSAIDs and/or paracetamol ahead of oral NSAIDs, COX-2 inhibitors or opioids: for people with knee or hand osteoarthritis).
Oral antihistamines for hay fever	Loratadine Cetirizine Chlorphenamine	This would not include patients who are suffering debilitating symptoms
Decongestant nasal sprays and tablets	Pseudoephedrine tablets Sodium chloride nasal spray Xylometazoline/Oxymetazoline/ Ephedrine nasal sprays	
Teething products	Teething gels	
Vaginal moisturisers	Lubricant gels/creams Feminine washes	
Warts and verrucae	Salicylic acid and/or lactic acid ointment/solution/plasters/gels/paints	
Topical circulatory products	Heparinoid gel/cream	
Antiperspirants	Aluminium chloride sprays/roll-ons/solutions	
Antifungal treatments (e.g. for athlete's foot)	Miconazole cream Clotrimazole cream Antifungal nail paint	
Topical treatments for bites and stings	Crotamiton cream or lotion, hydrocortisone cream or ointment	
Topical treatments for cold sores	Antiviral creams such as aciclovir, cold sore patches	

Antibacterial Eye Drops (e.g. to treat conjunctivitis)	Chloramphenicol eye drops,	Exception - under 2 years of age or where patient has pain, visual deterioration or contact lens use. Ref: https://patient.info/doctor/antimicrobial-eye-preparations
Treatment for Diarrhoea	Oral rehydration sachets Loperamide	New – for short term use only
Head lice treatments	Malathion lotion Hedrin	
Treatments for infant colic	Simeticone drops, Lactase drops	New – In individual patients where lactose intolerance is a longer-term condition and it has been confirmed by testing, Colief® may be considered for prescribing on the NHS http://www.panmerseyapc.nhs.uk/recommendations/documents/PS99.pdf?UNLID=1688008262017213101340
Barrier creams for nappy rash	Zinc cream, zinc oxide ointment, petroleum jelly	
Threadworm	Mebendazole	Except pregnant or breastfeeding women or a child under two years old
Vaginal thrush	Clotrimazole, fluconazole	Except if the following apply <ul style="list-style-type: none"> •symptoms of thrush for the first time •under 16 or over 60 •thrush keeps coming back (more than twice in 6 months) •treatment hasn't worked •pregnant or breastfeeding •thrush and a weakened immune system - for example because of diabetes, HIV or chemotherapy http://www.nhs.uk/conditions/Thrush/Pages/Introduction.aspx
Haemorrhoids treatment	Anusol cream Proctosedyl_Ointment	

Products with little or no proven clinical or cost-effectiveness	
Product category	Example products
Cough preparations	Simple linctus, pholcodine linctus, branded cough medicines
Eye care products	Eye washes, cosmetic eye drops, blepharitis wipes
Probiotics	Live bacteria and yeasts promoted as having various health benefits. They're usually added to yoghurts or taken as food supplements, and are often described as 'good' or 'friendly' bacteria. http://www.nhs.uk/conditions/probiotics/Pages/Introduction.aspx

Products used for conditions where may be no clinical need to treat		
Product category	Example products	Comments
Mild acne	Abrasive agents, benzoyl peroxide and other topical treatments (including products that cannot be purchased over the counter)	
Cradle cap	Cradle cap shampoos	
Dandruff	Tar shampoos, antifungal products	
Baby milks		New – unless clinical need for specialist milk in line with Pan Mersey APC recommendations: http://www.panmerseyapc.nhs.uk/guidelines/documents/G16.pdf

Aims and objectives of the consultation

The aims of this consultation exercise are to:

- Inform people about how the proposals have been developed
- Describe and explain the proposals for changes to what medicines are available on prescription
- Seek people's views on the proposals
- Ensure that a diverse range of voices is heard which reflect the communities involved in the consultation
- Understand the responses made in reply to our proposals and take them onto account in decision-making
- Ensure that the consultation process maximises community engagement and complies with legal requirements and duties
- To promote the national consultation

Timescales

Friday 22nd September – Friday 15th December 2017

Final report to Governing Body on Wednesday 10th January 2018

Leadership for Stakeholder Communications and Engagement

Katie Horan, Engagement Manager will lead the overarching planning of the consultation with Zoe Graham, Senior Communications Officer, leading the communications.

	What?	Lead Officer
Patients and Public	Documents to be disseminated	Zoe Graham/ Katie Horan
	Public Events	Katie Horan
	Health Forum	Katie Horan/ Tilly Dobbin
	CCG member notification	Tilly Dobbin
	PPG Network	Katie Horan
	Press Release and website	Zoe Graham
	Social Media	Zoe Graham
Third Sector Organisations	Arrange to attend Third Sector orgs to discuss	Katie Horan
	Healthwatch Briefing	Zoe Graham
	Promotion to Third Sector Organisations	Zoe Graham
Primary Care	Information included in GP	Zoe Graham

	Commissioning bulletin	
	Commissioning PLT	Katie Horan
Partners and Providers	Stakeholder briefing to CEO's Information sent via Comms leads	Zoe Graham
MP's, Councillors and Scrutiny	Briefing Letter	Zoe Graham

Range / reach for stakeholder communications and engagement

- **Patient and public**

Summary documents, including questionnaire and Frequently Asked Questions, will be developed to inform patients and the public of the engagement. This will be developed in conjunction with CCG Lay Readers.

The resources will be communicated and circulated through a variety of communication channels. This will be a large scale communications campaign run over 12 weeks to ensure the public are made aware of the engagement. This will include features in the local press, regular press releases sent out to local media organisations, and poster drops in GP Practices and community facilities.

Information will be sent to the CCG's 'membership' and provider and partners members and networks.

Information will be taken to other public events that are taking place during the engagement.

PPGs will be asked to support the engagement within their Practice.

A public event will be facilitated to seek the views of patients and the public

- **Social media**

The engagement will be promoted extensively via social media channels (Twitter / Facebook / Instagram). Activity can be monitored and more posts can be added if necessary. A separate social media plan will be developed to enable the CCGs, partners and providers to promote consistent messages.

- **Third sector engagement and involvement**

Warrington CCG has signed up to adhere to the shared principles of the Local Compact, in relation to engagement and engagement this is *"understand that by consulting people in third sector organisations, involving them in decisions and helping them take part in the planning and delivery of services, long-term relationships and partnerships between sectors are built"*

Third sector organisations will be informed of the engagement, and asked to publicise on their websites, through social media and their membership, clients, service users etc.

Local Healthwatches, recognised as the patient consumer champion, will be informed of the engagement as a key stakeholder and ask to provide a response and support the engagement.

Focused engagement will take place with groups that have been identified through the Equality Impact Assessment.

Warrington Voluntary Action will be asked to promote the consultation and advise on any specific Third Sector Organisation to communicate and work with.

Warrington's Third Sector Network Hub, as the Strategic Forum for the third sector will be asked to support and promote the consultation.

- **Clinical engagement**

GP member practices (GPs, Practice Nurses and Practice Managers) will be informed of the consultation through the Clinical Commissioning Bulletin, GP Federation Meetings, PLT sessions (both GPs and Practice Nurses) and a specific GP Briefing.

CCG Clinical Leads will be involved and informed.

Practices will be issued with communication materials to promote to patients.

- **Internal CCG**

The engagement will be presented at relevant CCG Committees (Quality Committees, Finance and Performance).

CCG Staff will be informed of the consultation via the staff brief and bulletin.

- **Provider level**

Service Providers will be briefed and asked to support the consultation and will be issued with communications materials. Providers will also be asked to display and distribute the key messages through their own communications channels.

Specific stakeholder briefings will be produced to gain responses from providers.

- **Public Health / Local Authority**

Public Health and Local Authority communications colleagues will be briefed regarding the consultation and asked that they publicise it through their existing communications channels.

They will be provided with materials to distribute in various facilities and through their neighbourhoods teams.

We will work with Local Authority colleagues to ensure the consultation is effectively communicated via children services and schools.

- **Political engagement**

A briefing letter will be produced to inform all Councillors, Scrutiny Committees and MPs on the consultation.

Stakeholder matrix

POWER 	High	<p>Keep satisfied: but not so much that they become bored with messages:</p>	<p>Manage Closely: these are the people to fully engage and make the greatest efforts to satisfy.</p> <ul style="list-style-type: none"> • Patients and the Public • CCG Governing Body • Media • Local Authority Exec Committee • MPs • Local Council Members • Local Scrutiny Committee • Health and Wellbeing Board • Healthwatch Warrington • Third sector and patient support groups (via local CVS organisations) • Patient Participation Group members • Member Practices • Local Pharmacy Committee • Local Medical Committee • Bridgewater Healthcare NHS Trust for 111 and Extended Access staff
	Low	<p>Monitor: do not bore with excessive communication:</p> <ul style="list-style-type: none"> • Other NHS Staff (providers) • Local Social Enterprises • Local Chambers of Commerce • Housing Trusts and other public sector organisations 	<p>Keep informed: and engage to ensure no major issues are arising</p> <ul style="list-style-type: none"> • NHS England • Bridgewater Community Healthcare NHS Trust (BCH) Members • Warrington & Halton Hospitals NHS Foundation Trust (WHHFT) Members • NorthWest Boroughs NHS Foundation Trust • North West Ambulance NHS Trust
		Low	High
INTEREST 			

Red – High Power, High Interest – fully engage and satisfy
Orange – High Power, Mod Interest – inform, seek approval and satisfy
Blue – Mod Power, High Interest – inform and engage
Green – Low Power, Low Interest – monitor and inform

Strengths	Weaknesses
<ul style="list-style-type: none"> • Transparent and open process • Skilled communication and engagement resource, which is flexible and has the ability to scale up when required. • Effective and robust consultation process • Extensive engagement has previously taken place • Ensures effective and open relationship with local people • National direction 	<ul style="list-style-type: none"> • Continuously changing environment • Identified audience? Do the messages need to be segmented / targeted
Opportunities	Threats
<ul style="list-style-type: none"> • Continue to further enhance clinical engagement between provider and commissioner organisations. • Enhance robust working arrangements with partners and providers • Instil confidence in public and patients 	<ul style="list-style-type: none"> • What if the outcomes aren't what is expected • Loss of public and clinical engagement and confidence. • Lack of support for implementation by partner

Adherence to the Gunning Principles

When undertaking any public consultation in the UK the Gunning Principles must be applied. This has been confirmed by the Court of Appeal in 2001 (Coughlan case).

When planning the Self Care (phase 2) consultation the four principles will be applied as evidenced below.

1. When proposals are still at a formative stage - *Public bodies need to have an open mind during a consultation and not already made the decision, but have some ideas about the proposals.*

The consultation questions make clear the options to agree or disagree with the proposals. At presentations at public meetings and Third Sector Organisations it will be made clear this is a consultation and if the majority of the public did not agree it would not happen.

2. Sufficient reasons for proposals to permit 'intelligent consideration' - *People involved in the consultation need to have enough information to make an intelligent choice and input in the process. Equality Assessments should take place at the beginning of the consultation and published alongside the document.*

The consultation documents makes the reasons for the proposals clear, as below

- There are a number of medicines currently prescribed in Warrington that patients and the public can get over the counter
- The medicines on the list are usually prescribed for minor health problems only and where this is not the case they will continue to be prescribed.
- NHS Warrington CCG spends approximately £1million per year on the medicines that are available to buy over the counter, which are often only required short term for minor ailments. This money can be better spent on reducing health inequalities across the town for the benefit of the wider population.

A Frequently Asked Question sheet has been produced for the public to further understand the implications of the proposals.

The consultation document makes clear the impact of the proposals stating “All residents of Warrington have the potential to be affected as the proposal is that the medications will not be prescribed, unless in exceptional circumstances or if it is **NOT** a minor ailment. However the majority of the medications or alternatives can be purchased over the counter for less than the cost of a prescription.”

An Equality Impact Assessment has been undertaken to determine where specific engagement should be undertaken.

3. Adequate time for consideration and response - *Timing is crucial – is it an appropriate time and environment, was enough time given for people to make an informed decision and then provide that feedback, and is there enough time to analyse those results and make the final decision?*

The consultation is being undertaken over 12 weeks. The engagement and communications methods will be wide and varied, which included press, social media, emails, printed documents in various places and targeted engagement at groups and public events. As well as general engagement and communications focused work will be undertaken to target those people who are currently exempted, as these will be most impacted.

This will include:

- Attending public events
- Targeted engagement at Third Sector Organisations who represent the wider community – Warrington Disability Forum, Long Term Conditions Support Group, Speak Up (adults with learning disabilities), Priestley College, Older Persons Engagement Group

Targeted communications at CAB, charity shops, job clubs, schools news, community centres, libraries, young Healthwatch, Children's Centres, Health and Wellbeing Mentors

After the consultation there will be one month to produce the final report, which will include the analysis of the results and to mitigate any risks identified.

4. Must be conscientiously taken into account - *Think about how to prove decision-makers have taken consultation responses into account.*

The feedback from the consultation will be reported back to the Governing Body – with the themes from the engagement and will include any mitigating actions. If the proposals are agreed a comprehensive communications plan will be developed after the consultation to inform the community about the changes and self - care messages will be developed.

Consultation process

Before decision to undertake a formal consultation		
Who is the CCG staff or clinical lead?	Katie Horan – Engagement Zoe Graham – Communications Jenny Lunn – on behalf of Medicines Management Team	
What are we consulting on?	The proposals to stop the prescribing of certain over the counter medications (29)	
What do we want to achieve from the consultation?	To seek views on the proposals To seek what, if any, impact there would be for the community	
Has a EIA Screening been undertaken?	Yes dated 29.08.17	
Has a full EIA been undertaken?	Yes dated 29.08.17	
Has the consultation been added to the risk register	Yes dated 29.08.17	
Does a formal consultation need to be undertaken?	Yes – this would be a substantial variation of service	
Has any pre engagement taken place or is any planned or needed?	This is the second phase of self-care development. The first consultation – which included pre-engagement, was undertaken in 2015. Engagement and views will be used in this consultation to develop the key messages and engagement activities.	
Agreed timescales for engagement	Yes – Friday 22 nd September 2017 until Friday 15 th December 2017	
Agree costings and resources needed	Printing Venue hire/ refreshments for public event	
To commence consultation	Actions/updates	Lead and Timescales
Communication and engagement plan	Finalised	KH completed by 01.09.17
Summary document with survey	To use messages from 2015 consultation	KH/ZG completed by 01.09.17
Agreed survey	SurveyMonkey to be agreed and produced.	KH/ JLW completed by 01.09.17
From the EIA decide what groups to target	Completed – see audit of activity	KH

Agree commitment of CCG Lead to attend meetings, respond to finalise documents etc	KH and Medicines Management Team	KH
Agree CCG spokesperson for media	Dr. Catherine Doyle Dr. Dan Bunstone	ZG
To send/ discuss at Comms/ Engagement network to inform of plans	To send to established group to keep them aware and agree their support	ZG August 2017
To send plan to HW and WVA to agree their involvement	To send for further feedback and any gaps in the plan	KH August 2017
Briefings to be produced	<ul style="list-style-type: none"> • Healthwatch – Needs to include an opportunity for independent feedback and/ or engagement • Providers (WHHFT, NWB, Bridgewater, St. Roccas) • Warrington Borough Council • Public Health • Third Sector Hub – needs to include opportunity to attend meeting • Scrutiny – needs to include opportunity to attend meeting • MPs • Cllrs • Care Home • Primary Care • CCG PALS for any queries • LPC - needs to include opportunity to attend meeting • LMC - needs to include opportunity to attend meeting • Chairs of partnership boards – (LD, MH, CEHWB, OP, Carers) 	ZG/KH 20.09.17
Press release	Finalised	ZG
Website content	Finalised	ZG

Social Media pack	To be produced and scheduled throughout the engagement	ZG
FAQ if appropriate	FAQ to be produced. To be uploaded on website and sent with stakeholder briefings. To use 2015 as a template	ZG
Inform CCG PALS and any other relevant PALS	To inform for any patient inquiries. CCG PALS to add on Datix to capture any feedback/queries	KH
Audit trail of activity to be drafted	Drafted	KH - Ongoing
Agree who will finalise documents		KH/ZG/ MM team
Agreed who completes report after engagement		KH
During consultation		
Feedback log to be kept updated		KH
Catch up meetings to be arranged as appropriate		KH
Check on survey results and demographics to determine if more focused engagement is needed		KH
Update FAQ from feedback received		ZG
After consultation		
Report produced with engagement and communications audit trail		KH 01.18
Complete Equality Impact Assessment		KH/ MM Team
Complete Gunning Principles		KH

Take to CCG boards for decision	Primary Care Quality Committee agreed for commencement of the consultation 07.17	KH and MM Team Governing Body 10.01.18
Formal letters to Healthwatch, stakeholders and MPs on the decision and next steps	<ul style="list-style-type: none"> • Healthwatch • Providers • Warrington Borough Council • Third Sector Hub • Scrutiny • MPs • Cllrs • Care Home • Primary Care • CCG PALS • LPC • LMC 	ZG 01.18
Feedback to the third sector and wider community	Patient briefings	ZG
Evaluation		
To agree on the evaluation of the proposal if agreed		MM Team to evaluate

Appendix 2.

Audit of engagement activity – to be used in the final outcomes report

Stakeholder Group	CCG Action		Dates
Patients and Public			
Website	<p>The items to be uploaded are:</p> <ul style="list-style-type: none"> • Overview statements • Link to survey monkey • Frequency asked questions – will be added to throughout the engagement <p>Information put on Facebook and Twitter – social media pack to be produced</p> <p>Information sent to providers to put on their website</p>		22.09.17
Social Media	<p>Information put on Facebook and Twitter</p> <p>Updated throughout the engagement</p>		22.09.17
Consultation Document	<p>To be disseminated electronically</p> <ul style="list-style-type: none"> • Providers to send to membership and on website • All GP Practices • School News for parents and teachers • Chamber of Commerce • Warrington Collegiate • Neighbourhoods – Community Centres and community newsletters • Priestly College • Third Sector newsletter and e- 	<p>To be sent to and displayed</p> <p>All GP Practices</p> <ul style="list-style-type: none"> • The Gateway – for public and to all tenant organisations • Warrington Disability Partnership Centre for Independent Living • Healthwatch Warrington (including Men's HW and Young HW) • CAB • Pharmacies • Children's Centres 	22.09.17

	<p>news</p> <ul style="list-style-type: none"> • Children's Centres • Residents Group • Chester University Warrington Campus • Nurseries 	<ul style="list-style-type: none"> • WBC Job Clubs • WBC Contact Centre • Health and Wellbeing Mentors • Wellbeing Hub • LiveWire Sites and Libraries • Lifetime • Providers (for waiting rooms, outpatients etc) • Community centres/ venues to target new parents and young mums (breastfeeding and mums and tots groups) • Care Homes 	
<p>Health Forum To be discussed and disseminated to CCG Patient and Service User Forums.</p>	<p>EEC Team to send information to their Health Forum members.</p> <p>Medicines Management Team attended and presented to the Health Forum</p>		<p>22.09.17</p> <p>25.09.17 7pm</p>
<p>CCG 'Membership' Scheme The CCG have developed a membership scheme with approx. 200 individual and Third Sector representatives on the mailing list.</p>	<p>EEC Team to send information</p>		<p>22.09.17</p>
<p>PPGs Individual PPGs and PPG Networks</p>	<p>EEC Team to send information to the PPG Network</p> <p>Discussed the proposals at the PPG Network meeting</p>		<p>22.09.17</p>
<p>CCG Public Event</p>	<p>To hold a public event to be able to present the proposals and gain feedback</p>		<p>09.11.17</p>

	Discuss possibility of a focused event	
Third Sector Network Hub	To attend to discuss the proposals and gain feedback As the strategic third sector partners they will disseminate information across their own networks	25.10.17
Equality Groups and vulnerable groups (to focus on protected characteristics from the EIA)		
Warrington Disability Forum (Stay connected)	CCG to present and discuss the proposals	13.10.17
Speak Up for learning disabilities	CCG to present and discuss the proposals	17.10.17 to attend
Speak Up for people with mental health problems	CCG to present and discuss the proposals	Speak Up to lead on this.
WIRED Carers	CCG to present and discuss the proposals	Lymm 07.11.12 Culcheth 04.10.17
Warrington Parents and Carers	CCG promoted consultation – representative attended Health Forum for full presentation	
West Warrington OPEG	CCG to present and discuss the proposals	23.10.17
LifeTime	Promoted consultation at the centre	
WBC Job Club	CCG to attend and promote consultation	
Third Sector Network Hub	CCG presented the proposals	25.10.17
Primary Care Engagement		
GPs	EEC Team will send to all local GPs in weekly bulletin	22.09.17 Repeat monthly
Federations Meeting Healthier Warrington Phoenix Teaching Warrington Alliance	Information to be sent to the Chairs for distribution and offer for a presentation	22.09.17
Commissioning PLT	To inform Primary Care of the proposals	12.10.17
Other Clinical Engagement		

Pharmacists	To send briefings to all Pharmacists – Via GP Bulletin	22.09.17
Bridgewater Community Healthcare NHS Foundation Trust	To send briefings to Bridgewater for extended access and out of hours staff	22.09.17
Internal Engagement		
CCG Staff	Information to be sent via Staff bulletin Information to be presented at staff brief	26.09.17
Primary Care Quality Committee	Committee approved the consultation – to provide an update	17.07.17
Primary Care Development Group	Consultation discussed	20.09.17
Stakeholder Group		
Health and Wellbeing Boards	Information sent to the Board	19.09.17
Public Health	Stakeholder briefing to be sent	19.09.17
Bridgewater Community Healthcare NHS Foundation Trust	Stakeholder briefings to be sent	19.09.17
Warrington and Halton Hospitals NHS Foundation Trust	Stakeholder briefings to be sent	19.09.17
North West Boroughs	Stakeholder briefings to be sent	19.09.17
St Helens and Knowsley Hospitals NHS Trust	Stakeholder briefings to be sent	19.09.17
Warrington Borough Council/ Public Health	Stakeholder Briefings to be sent	19.09.17
Partnership Boards <ul style="list-style-type: none"> • Learning Disability and Austim • Carers • Hate Crime 	Stakeholder Briefings to be sent	19.09.17

<ul style="list-style-type: none"> • Mental Health • CYP 		
Schools	Both Primary and Secondary and Nurseries	Through WBC
Care Homes	To send briefings to all Care Home To send consultations surveys to all Care Homes To attend Care Home Forum	22.09.17 06.12.17
Local Medical Committee	Stakeholder Briefings to be sent Invitation to attend and present given – no response	19.09.17
Local Pharmaceutical Committee	Stakeholder Briefings to be sent Invitation to attend and present given – formal response received	19.09.17
Halton CCG and St Helens CCG	To keep them informed	19.09.17
LiveWire	Stakeholder Briefing to be sent	19.09.17
Political Engagement		
Overview and Scrutiny	To send Stakeholder briefing To attend Scrutiny	22.09.17 23.11.17
MPs	Stakeholder briefings to be sent Chair and Chief Clinical Officer to update MPs at briefing sessions.	22.09.17
Councillors	EEC Team to inform all councillors	22.09.17

Communication development

A. Aim

To develop a sustainable campaign that targets key audiences to create a talking point about the proposed changes to medicines prescribed in Warrington and how this affects them.

B. Objectives

- To ensure consistent and effective internal communication to all CCG staff and member practices
- To ensure effective communication with external key stakeholders in order to provide assurance and clarity
- To ensure effective management of media relations
- To maintain public confidence in local health care services

C. Key messages

- This is the second phase of our work reviewing what other medicines should be bought over the counter, rather than certain medicines being prescribed. The first phase took place in 2015
- We're reviewing a number of medicines that we believe people should buy over the counter, rather than them being routinely prescribed by healthcare professionals. This is because the medicines are:
 - they are easily accessible to buy over the counter
 - there is limited evidence of clinical benefit or cost effectiveness
 - or there is no clinical need for treatment
- We are undertaking a formal 12 week consultation on the proposal of 'other than exceptional circumstance, medicines for minor health problems should be bought over the counter by patients **INSTEAD** of these medicines (outlined below) being routinely prescribed by GPs or other health care professionals in Warrington'
- The medicines being considered under phase two of the project are:

Medicines that can be purchased over-the-counter for the treatment of minor or short-term conditions:

- Pain relief cream/ointment for short-term
- Oral antihistamines for hay fever
- Decongestant nasal sprays and tablets
- Teething gels
- Vaginal moisturisers (for example lubricant gels and creams)
- Warts and verrucae paints

- Heparinoid gel/cream
- Antiperspirants
- Antifungal treatments (for example for athletes foot)
- Treatments for bites and stings
- Treatments for cold sores
- Antibacterial eye drops
- Treatment for diarrhoea
- Head lice treatments
- Treatments for infant colic
- Creams/ointments for nappy rash
- Threadworm treatments
- Vaginal thrush
- Haemorrhoids treatment

Medicines with limited clinical or cost-effectiveness:

- Cough preparations
- Eye care products (for example blepharitis wipes)
- Probiotics

Medicines used for conditions where there may be no clinical need to treat:

- Treatments for mild acne
- Dandruff and cradle cap treatments
- Baby milks (unless a clinical need for a specialist milk)

There are some exclusions as some medicines are only available in certain circumstances. For example, some medicines may not be suitable for children under two years of age. If you explain your circumstances to your local pharmacist, they will be able to offer further advice. If you are worried about your symptoms and you haven't seen an improvement after self-care at home, your GP practice is the right place to contact.

As part of the consultation we need your views on the proposals and to understand the impact they may have on you.

To give your views about what you think about the proposal you have a variety of opportunities to give your feedback.

D. Target audiences

- Members of the public and their families/carers
- Partners and third sector organisations
- MPs

F. Risks

These groups have been identified as potential risks and must be considered when producing materials to inform:

- People with Learning Disabilities – easy read format
- Those who do not pay for prescriptions –as this will have the biggest impact on those. Need to ensure these groups are targeted.

G. Tools / tactics - ‘communications mix’

External communications - press releases, website articles, social media, local newspapers, third sectors contacts and networks and providers membership schemes will be the main communications channels used.

H. Internal communications

Staff and Clinical Commissioning bulletins, staff briefings and Federation and PLT Meetings

Communication toolkit

1. Frequently asked questions
2. Stakeholder briefings
3. Social Media
4. Press release
5. Website text
6. Internal briefing
7. Presentation

1. Frequently Asked Questions

What is happening?

Following on from the successful phase one consultation in 2015 about what people should buy to treat minor short term health problems, rather than being prescribed, we are now consulting about more medicines we think shouldn't be routinely prescribed by GPs and other health care professionals in Warrington.

We believe medicines included in the second phase of the consultation shouldn't be prescribed because:

- they are easily accessible to buy over the counter
- there is limited evidence of clinical benefit or cost effectiveness
- or there is no clinical need for treatment.

We are undertaking a formal 12 week consultation on the proposal of '*other than exceptional circumstance, medicines for minor health problems should be bought over the counter by patients INSTEAD of these medicines (outlined below) being routinely prescribed by GPs or other health care professionals in Warrington*'.

The consultation will run from Friday 22nd September until Friday 15th December 2017.

The medicines being considered under phase two of the project are:

Medicines that can be purchased over-the-counter for the treatment of minor or short-term conditions:

- Pain relief cream/ointment for short-term
- Oral antihistamines for hay fever
- Decongestant nasal sprays and tablets
- Teething gels
- Vaginal moisturisers (for example lubricant gels and creams)
- Warts and verrucae paints
- Heparinoid gel/cream

- Antiperspirants
- Antifungal treatments (for example for athletes foot)
- Treatments for bites and stings
- Treatments for cold sores
- Antibacterial eye drops
- Treatment for diarrhoea
- Head lice treatments
- Treatments for infant colic
- Creams/ointments for nappy rash
- Threadworm treatments
- Vaginal thrush
- Haemorrhoids treatment

Medicines with limited clinical or cost-effectiveness:

- Cough preparations
- Eye care products (for example blepharitis wipes)
- Probiotics

Medicines used for conditions where there may be no clinical need to treat:

- Treatments for mild acne
- Dandruff and cradle cap treatments
- Baby milks (unless a clinical need for a specialist milk)

Why are we doing this?

Each year, we spend over a £1million on prescribing medicines that patients can buy over the counter for minor, short term health problems.

We feel this is money that could, and should, be spent on other vital treatments for local people and make better use of our precious NHS resources.

For example, did you know that:

- Last year, we spent over £8,000 on dandruff and cradle cap treatments
- Each GP consultation costs on average £36 and prescription costs are an additional £27 per consultation
- We could save over £5,000 per month by not prescribing tablets for hayfever

What local people have already told us?

From the first phase of our consultation last year on average 87% of people who took part said that it made sense not to prescribe items such as pain killers for minor aches and pains, or vitamins unless there is a clinical need.

Are there any exclusions as to what I can buy over the counter?

There are some exclusions as some medicines are only available in certain circumstances. For example, some medicines may not be suitable for children under two years of age. If you explain

your circumstances to your local pharmacist, they will be able to offer further advice. If you are worried about your symptoms and you haven't seen an improvement after self-care at home, your GP practice is the right place to contact.

How can I get involved?

As part of the consultation we need your views on the proposals and to understand the impact they may have on you.

To give your views about what you think about the proposal you have a variety of opportunities to give your feedback:

- You can fill in the below survey, seal it and post back to our address, NHS Warrington Clinical Commissioning Group, Arpley House, 110 Birchwood Boulevard, Birchwood, Warrington, WA3 7QH
- Online - by filling in the online survey by visiting <https://www.surveymonkey.co.uk/r/SelfCarePhase2>
- Coming along to our public event to hear more about the proposals and to give your feedback on Thursday 9th November 10am, The Gateway, 89 Sankey Street, Warrington.

If people do not have access to the internet or need this leaflet in any other format, please contact the Engagement and Communications Team on 01925 843 745.

I currently don't pay for my prescriptions will I still be able to get the listed medications from my GP?

No, these medications will no longer be prescribed to any patient. Exceptional clinical need can be determined by your GP.

Where can I get the listed medications from if not from my GP?

Many of the medications are available from the high street, Pharmacists or from supermarkets and can often be bought for less than the cost of a prescription.

I am on a repeat prescription for some of these medications what will happen?

If the proposals are implemented speak to your GP about any impact for you if you have a repeat prescription. Some historic repeat prescriptions will need to be reviewed, not all current repeat medicines will be appropriate with the new guidance.

How will GPs be made aware of these changes if they are implemented?

All GPs will be informed through the CCG's existing communication channels about any changes brought about by this consultation.

How will the public be made aware of these changes if they are implemented?

A public awareness campaign will be planned, which will include information on self-care.

What do the GPs think about these proposed changes?

Part of this consultation will be to also seek the views of GPs and other health professionals

Can I still go and see my GP or Nurse?

This project isn't about stopping you seeing your GP or Nurse. If you are worried about your symptoms and you haven't seen an improvement after self-care at home, your GP Practice is the right point of call.

This project is about being sensible with NHS resources - looking at what medicines have the best outcomes and what medicines people should buy over the counter rather than being prescribed routinely.

2. Stakeholder briefing - PPG/Healthforum/Third sector/partners/GP practices/CCG PALs

Self-care consultation - what should we prescribe in Warrington?

- This is the second phase of our work reviewing what other medicines should be bought over the counter, rather than certain medicines being prescribed. The first phase took place in 2015
- We're reviewing a number of medicines that we believe people should buy over the counter, rather than them being routinely prescribed by healthcare professionals. This is because the medicines are:
 - they are easily accessible to buy over the counter
 - there is limited evidence of clinical benefit or cost effectiveness
 - or there is no clinical need for treatment
- We are undertaking a formal 12 week consultation on the proposal of 'other than exceptional circumstance, medicines for minor health problems should be bought over the counter by patients **INSTEAD** of these medicines (outlined below) being routinely prescribed by GPs or other health care professionals in Warrington'
- The medicines being considered under phase two of the project are:

Medicines that can be purchased over-the-counter for the treatment of minor or short-term conditions:

- Pain relief cream/ointment for short-term
- Oral antihistamines for hay fever
- Decongestant nasal sprays and tablets
- Teething gels

- Vaginal moisturisers (for example lubricant gels and creams)
- Warts and verrucae paints
- Heparinoid gel/cream
- Antiperspirants
- Antifungal treatments (for example for athlete's foot)
- Treatments for bites and stings
- Treatments for cold sores
- Antibacterial eye drops
- Treatment for diarrhoea
- Head lice treatments
- Treatments for infant colic
- Creams/ointments for nappy rash
- Threadworm treatments
- Vaginal thrush
- Haemorrhoids treatment

Medicines with limited clinical or cost-effectiveness:

- Cough preparations
- Eye care products (for example blepharitis wipes)
- Probiotics

Medicines used for conditions where there may be no clinical need to treat:

- Treatments for mild acne
- Dandruff and cradle cap treatments
- Baby milks (unless a clinical need for a specialist milk)

There are some exclusions as some medicines are only available in certain circumstances. For example, some medicines may not be suitable for children under two years of age. If you explain your circumstances to your local pharmacist, they will be able to offer further advice. If you are worried about your symptoms and you haven't seen an improvement after self-care at home, your GP practice is the right place to contact.

As part of the consultation we need your views on the proposals and to understand the impact they may have on you and the public.

- To hear what you think about the proposals you have a variety of opportunities to give your feedback:
 - Online - by filling in the online survey by visiting <https://www.surveymonkey.co.uk/r/SelfCarePhase2>

- Coming along to our public event to hear more about the proposals and to give your feedback on Thursday 9th November 10am, at The Gateway, 89 Sankey Street, Warrington.
- If people do not have access to the internet or need this leaflet in any other format, please contact the Engagement and Communications Team on 01925 843 745.

FOR HEALTHWATCH: Offer opportunity for independent feedback/ engagement

Third Sector Hub/ Scrutiny: Offer opportunity to attend meeting

3. Social media – One tweet/ Facebook message a week during the consultation

From today, we're asking for your views on proposed changes to what medicines are prescribed & what should be bought instead. For more information visit: (insert link to press release)

Proposed changes to what medicines are prescribed in our town. Visit (insert link) for details of how to have your say

Let us know your views on proposed changes to what medicines are prescribed in our town (insert link)

There's still time to have your say on proposed changes to what medicines are prescribed in our town (insert link)

4. Press release

PRESS RELEASE

Local people asked for their opinion on what NHS in Warrington should prescribe

NHS Warrington Clinical Commissioning Group is asking local people for their opinion on more medicines that could be bought over the counter instead of being prescribed.

Following on a successful phase one consultation in 2015, NHS Warrington is now reviewing more medicines that are readily available over the counter to treat minor, short term ailments such as head lice or diarrhoea.

The medicines being considered under phase two of the project are:

Medicines that can be purchased over-the-counter for the treatment of minor or short-term conditions:

- Pain relief cream/ointment for short-term
- Oral antihistamines for hay fever
- Decongestant nasal sprays and tablets
- Teething gels
- Vaginal moisturisers (for example lubricant gels and creams)
- Warts and verrucae paints
- Heparinoid gel/cream
- Antiperspirants
- Antifungal treatments (for example for athlete's foot)
- Treatments for bites and stings
- Treatments for cold sores
- Antibacterial eye drops
- Treatment for diarrhoea
- Head lice treatments
- Treatments for infant colic
- Creams/ointments for nappy rash
- Threadworm treatments
- Vaginal thrush
- Haemorrhoids treatment

Medicines with limited clinical or cost-effectiveness:

- Cough preparations
- Eye care products (for example blepharitis wipes)
- Probiotics

Medicines used for conditions where there may be no clinical need to treat:

- Treatments for mild acne
- Dandruff and cradle cap treatments
- Baby milks (unless a clinical need for a specialist milk)

There are some exclusions as some medicines are only available in certain circumstances. For example, some medicines may not be suitable for children under two years of age. If you explain your circumstances to your local pharmacist, they will be able to offer further advice. If you are worried about your symptoms and you haven't seen an improvement after self-care at home, your GP practice is the right place to contact.

Dr Catherine Doyle, Local GP and clinical lead for Medicines Management at NHS Warrington Clinical Commissioning Group said: "From the first phase of our consultation in 2015, on average 87% of people who took part said that it made sense not to prescribe items such as pain killers for minor aches and pains, vitamins unless there is a clinical need.

“Each year, the CCG spend over a £1million on prescribing medicines that patients can buy over the counter for minor, short term health problems.

“We believe the medicines included in the second phase of the consultation shouldn’t be routinely prescribed because they are easily accessible to buy over the counter, there is limited evidence of clinical benefit or cost effectiveness or there is no clinical need for treatment.

“It is the CCGs job to ensure the health budget for Warrington is spent as effectively as possible and we feel the money saved on medicines prescribed for minor, short terms illness could, and should, be spent on other vital treatments for local people and make better use of our precious NHS resources.”

The consultation runs from Friday 22nd September to Friday 15th December.

To have your say please visit (insert link when live) or by attending the public event to hear more about the proposals on Thursday 9th November, from 10am at The Gateway, 89 Sankey Street.

5. Website text

We’re asking for your views on what medicines we should prescribe in Warrington

We’re asking local people for their opinion on more medicines that could be bought over the counter instead of being prescribed.

Following on a successful phase one consultation in 2015, we are now reviewing more medicines that are readily available over the counter to treat minor, short term ailments such as head lice or diarrhoea.

The medicines being considered under phase two of the project are:

Medicines that can be purchased over-the-counter for the treatment of minor or short-term conditions:

- Pain relief cream/ointment for short-term
- Oral antihistamines for hay fever
- Decongestant nasal sprays and tablets
- Teething gels
- Vaginal moisturisers (for example lubricant gels and creams)
- Warts and verrucae paints
- Heparinoid gel/cream
- Antiperspirants
- Antifungal treatments (for example for athletes foot)
- Treatments for bites and stings
- Treatments for cold sores

- Antibacterial eye drops
- Treatment for diarrhoea
- Head lice treatments
- Treatments for infant colic
- Creams/ointments for nappy rash
- Threadworm treatments
- Vaginal thrush
- Haemorrhoids treatment

Medicines with limited clinical or cost-effectiveness:

- Cough preparations
- Eye care products (for example blepharitis wipes)
- Probiotics

Medicines used for conditions where there may be no clinical need to treat:

- Treatments for mild acne
- Dandruff and Cradle cap treatments
- Baby milks (unless a clinical need for a specialist milk)

There are some exclusions as some medicines are only available in certain circumstances. For example, some medicines may not be suitable for children under two years of age. If you explain your circumstances to your local pharmacist, they will be able to offer further advice. If you are worried about your symptoms and you haven't seen an improvement after self-care at home, your GP practice is the right place to contact.

The consultation runs from Friday 22nd September to Friday 15th December.

You can have your say by:

- Completing the online survey by visiting <https://www.surveymonkey.co.uk/r/SelfCarePhase2>
- Coming along to our public event to hear more about the proposals and to give your feedback on Thursday 9th November 10am the Gateway, 89 Sankey Street

If people do not have access to the internet or need this leaflet in any other format, please contact the Engagement and Communications Team on 01925 843 745.

6. Internal staff briefing

Self-care medicines consultation - phase two

We're launching a public engagement campaign to ask local people for their opinion on more medicines that could be bought over the counter instead of being prescribed.

Following on a successful phase one consultation in 2015, NHS Warrington is now reviewing more medicines that are readily available over the counter to treat minor, short term ailments such as head lice or diarrhoea.

The medicines being considered under phase two of the project are:

Medicines that can be purchased over-the-counter for the treatment of minor or short-term conditions:

- Pain relief cream/ointment for short-term
- Oral Antihistamines for hay fever
- Decongestant nasal sprays and tablets
- Teething gels
- Vaginal moisturisers (for example lubricant gels and creams)
- Warts and verrucae paints
- Heparinoid gel/cream
- Antiperspirants
- Antifungal treatments (for example for athletes foot)
- Treatments for bites and stings
- Treatments for cold sores
- Antibacterial eye drops
- Treatment for diarrhoea
- Head lice treatments
- Treatments for infant colic
- Creams/ointments for nappy rash
- Threadworm treatments
- Vaginal thrush
- Haemorrhoids treatment

Medicines with limited clinical or cost-effectiveness:

- Cough preparations
- Eye care products (for example blepharitis wipes)
- Probiotics

Medicines used for conditions where there may be no clinical need to treat:

- Treatments for mild acne
- Dandruff and cradle cap treatments
- Baby milks (unless a clinical need for a specialist milk)

We believe the medicines included in the second phase of the consultation shouldn't be routinely prescribed because they are easily accessible to buy over the counter, there is limited evidence of clinical benefit or cost effectiveness or there is no clinical need for treatment.

There are some exclusions as some medicines are only available in certain circumstances. For example, some medicines may not be suitable for children under two years of age. If you explain your circumstances to your local pharmacist, they will be able to offer further advice. If you are worried about your symptoms and you haven't seen an improvement after self-care at home, your GP practice is the right place to contact.

The consultation runs from Friday 22nd September to Friday 15th December.

You can have your say by:

- Completing the online survey by visiting <https://www.surveymonkey.co.uk/r/SelfCarePhase2>
- Coming along to our public event to hear more about the proposals and to give your feedback. Taking place on Thursday 9th November 10am the Gateway, 89 Sankey Street

If people do not have access to the internet or need this leaflet in any other format, please contact the Engagement and Communications Team on 01925 843 745.