

6<sup>th</sup> December 2018

**Ref PH507**

**To all Community Pharmacies in the Wessex area**

Dear Colleague

NHS England has published a new consultation on further items which should not be routinely prescribed in primary care as well as publishing new guidance on evidence-based interventions and the prescribing of gluten free foods. See information below.

**Consultation on a review and update of CCG guidance on *Items which should not be routinely prescribed in primary care***

NHS England continues to partner with NHS Clinical Commissioners (NHSCC) to support clinical commissioning groups (CCGs) in ensuring that they can use their prescribing resources effectively and deliver best patient outcomes from the medicines that their local population uses. A [national public consultation](#) has been launched on proposals to update and review commissioning guidance on eight more products. In the majority of cases there are other more effective, safer and/or cheaper alternatives available to the items that NHS England is recommending should not be routinely prescribed in primary care.

The consultation runs from 28 November 2018 until 28 February 2019. Details of public consultation events can be found [here](#)

**Prescribing Gluten-Free Foods in Primary Care: Guidance for CCGs**

NHS England has developed guidance for CCGs, which is intended to communicate changes in regulations, and to support CCGs with their development of their local Gluten-Free food prescribing policies. The new guidance follows extensive consultation by the Department of Health and Social Care and a change in the law which comes into force on 4 December 2018- that only bread and gluten free 'mixes' remain available via NHS prescription. Commissioning guidance and associated resources can be found [here](#)

**Evidence based interventions: Guidance for CCGS**

Following a public consultation, NHS England is also issuing new guidance on 17 interventions which clinicians say are of little or no value to patients. Four of the interventions, such as surgery to prevent snoring will now only be offered in exceptional circumstances, while a longer list of thirteen interventions such as, breast reduction surgery or the removal of benign skin lesions will be offered when specific clinical criteria are met. The move will free up resources so they can be directed elsewhere and reduce risks to patients by cutting out up to 100,000 unnecessary procedures. The guidance and supporting information can be found [here](#)

Kind regards

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