

AVAILABILITY OF GLUTEN-FREE PRODUCTS ON NHS PRESCRIPTION

CONSULTATION RESPONSE

22nd June 2017

RESPONDENT DETAILS

Royal College of Nursing

Response from:

Helen Donovan Professional Lead for Public Health Nursing on behalf of the Royal College of Nursing: helen.donovan@rcn.org.uk

1. Introduction

- 1.1 With a membership of around 435,000 registered nurses, midwives, health visitors, nursing students, health care assistants and nurse cadets, the Royal College of Nursing (RCN) is the voice of nursing across the UK and the largest professional union of nursing staff in the world. RCN members work in a variety of hospital and community settings in the NHS and the independent sector. The RCN promotes patient and nursing interests on a wide range of issues by working closely with the Government, the UK parliaments and other national and European political institutions, trade unions, professional bodies and voluntary organisations.
- 1.2 Nursing staff in all areas of practice care for people with coeliac disease and specific gluten intolerance; there are also many nurses who have a diagnosis of coeliac disease themselves. Nurses are, therefore, very aware of the needs of people who rely on Gluten Free (GF) products to maintain a healthy diet and support management of this long term health condition. GF products are essentially as important to manage the condition as insulin to an insulin dependent diabetic or anti-epileptic medication for those with epilepsy.

- 1.3 However, there have been anomalies with the prescribing cost options for those with long term conditions which the RCN has previously lobbied to address. As an example only those diabetics on insulin will be exempt from prescription costs - other medication for diabetes is charged¹. The issue of prescribing costs needs more detailed consultation and discussion to support management of all long term conditions.
- 1.4 The RCN acknowledges that this is a sensitive area and believe it needs a pragmatic and balanced approach. There are considerable demands on NHS resources and a need to rationalise the availability of services, and this includes the products available on prescription. As the consultation states, GF foods became available in the late 1960s when there were limited availability of such foods and in the main they could only be purchased from pharmacies. They are now readily available in most supermarkets and although they do cost more than non GF products they are not so expensive as to make them inaccessible to most people. However, there is a clear and recognised cost for these products which is more than the non GF equivalents. There is a disproportionate impact on those on lower income or who have mobility problems and are unable to access cheaper brands from larger supermarkets. We believe there should still be some products available on prescription or possibly through other mechanisms, such as personal health plans so they can be available to everyone who needs them.
- 1.5 The unintended consequences and risks of significantly limiting the availability and accessibility of these products could lead to people consuming foods they are intolerant to and lead to additional strains on the NHS with GP visits, hospital visits and/or admission.

2. Consultation Options:

No change (option 1),
Complete removal of access (option 2) and
Restricted access (option 3).

2.1 Option 3 would be our preferred option as it provides a balance, maintaining the ability for health care professionals to support those with coeliac disease with some products available on prescription whilst limiting the range to those most essential.

2.2 We agree that healthcare professionals need to be able to make decisions about what is best for their patients and use clinical judgement to identify and support patients where there is clinical need. In these cases, it is necessary for the NHS to support provision of staple gluten free foods including breads and

¹ Prescription Charges Coalition (2013) *Prescription Charges and People with Long-Term Conditions* http://www.prescriptionchargescoalition.org.uk/uploads/1/2/7/5/12754304/paying_the_price_report.pdf [Accessed June 2017]

flour mixes as an important clinical tool to support adherence to a gluten free diet.

2.3 We also know that the plethora of products available makes it very difficult for many prescribers in the primary care setting who are not experts in nutrition. Having a specific list of available products available on the schedule 1 would make it easier for primary care to implement and for CCGs to accommodate.

2.4 The current situation is unfair and has led to wide variation across the country with many CCGs already limiting the prescribing availability for gluten free products and this needs to be addressed.

3. CONSULTATION QUESTIONS

3.1

Do you think GF foods should be available on prescription in primary care?	YES	Please can you explain your answer to question 1.
<p>On balance we believe that certain GF foods should be available on prescription or via some other process to ensure those who are most vulnerable and unable to afford the additional cost. We are also mindful that good quality gluten free products are not universally available and therefore those on very low income or who have reduced access to the larger supermarkets would be disproportionately affected if GF products were not available at all.</p>		

3.2

Do you think GF prescribing should be restricted to certain foods? Yes or no.	Yes	If yes, which foods should remain on prescription and why
<p>As above prescribing should be restricted to a specific list of products</p>		

3.3

Do you think the range of bread products available on NHS prescription should be limited? Yes or no.	Yes	If yes, please explain your answer.
<p>As above although we would support that there should be a range of products available. This would support patients to have a more varied diet and provide options and would also help ensure a competitive market is maintained.</p>		

4. We would also support the wider need to provide good health promotion resources and recipes for GF diet. This should include alternatives to cereals, for example granola, also cakes and biscuits using flour alternatives, of which there

are many. In addition to the coeliac charities there is a role here for government agencies to provide this.

- 4.1 It is essential for those with coeliac or other gluten intolerant conditions to be supported to manage their condition and be aware of the risks of not adhering to diet but also the need for additives such as iron and calcium particularly to their diet. Any change in the prescribing options should be accompanied by awareness campaigns

Helen Donovan RCN Professional Lead for Public Health Nursing

RETURNING THE FORM

Please send your completed form to either the Department of Health (DH) mailbox at GFprescribing@dh.gsi.gov.uk or post your reply to DH at:

Prescribing Policy and Legislation Team
Department of Health
Room 2E14
Quarry House
Quarry Hill
Leeds
LS2 7UE

Thank you for taking the time to reply to this consultation.

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and nursing, promotes
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