

ROYAL PHARMACEUTICAL SOCIETY



Results of a survey of Pharmacists practicing in England about their experience of prescription charges

Introduction

England is the only UK nation which maintains prescription charges. The PDA and Royal Pharmaceutical Society (RPS) are both members of the Prescription Charges Coalition (PCC), a group of 51 organisations calling on the Westminster government to scrap prescription charges for people with long-term conditions.

The coalition is made up primarily of patient organisations representing those who require medicines to be prescribed because of their specific long-term medical conditions. All members of the coalition understand that if patients in England cannot afford their prescriptions, the consequences of individuals not receiving their prescribed medicines can increase costs for the NHS because their health may deteriorate as a result.

The two pharmacist organisations undertook a joint survey of members between Tuesday 16th and Sunday 28th January 2024. The survey generated over 1,000 responses from pharmacist practicing in England.

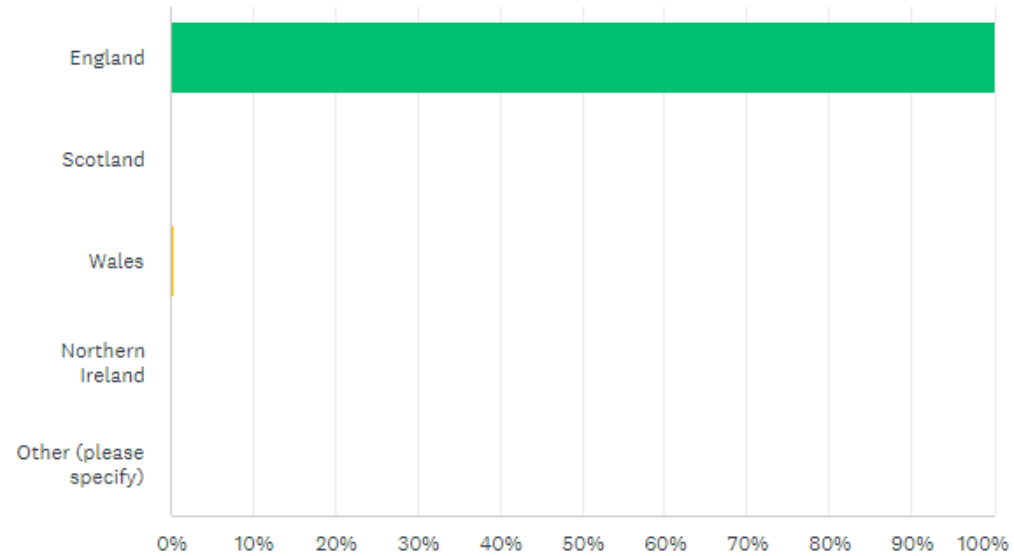
Most respondents only practiced in England, with less than 1% also practicing in other jurisdictions, mainly England/Wales.

Q1



Which country do you work in? (Select all that apply)

Answered: 1,359 Skipped: 0



ANSWER CHOICES	RESPONSES	
England	100.00%	1,359
Scotland	0.15%	2
Wales	0.52%	7
Northern Ireland	0.07%	1
Other (please specify)	0.15%	2
Total Respondents: 1,359		

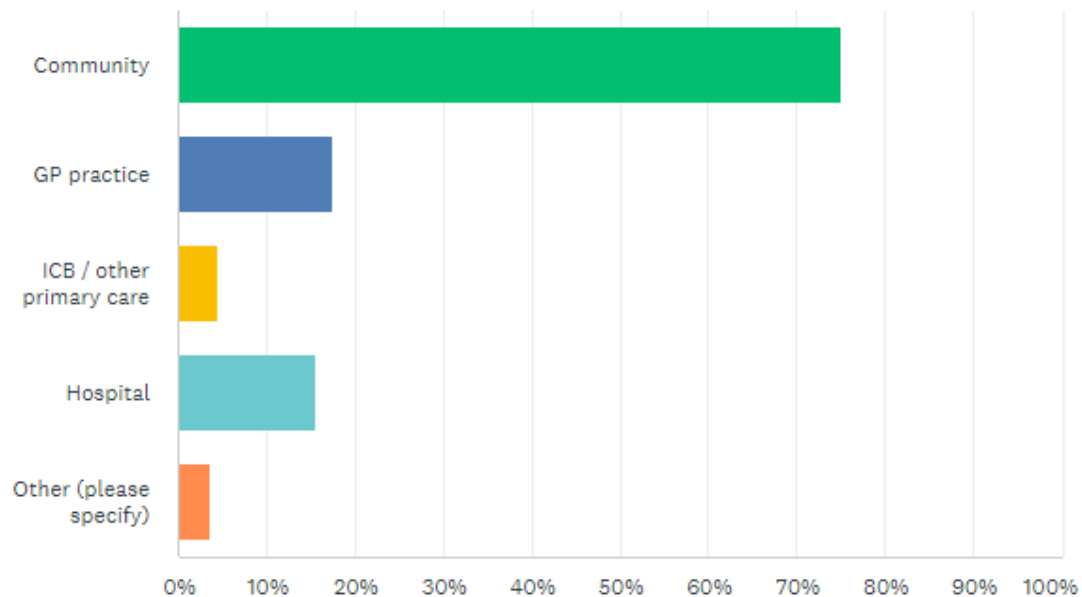
Portfolio working is a common feature amongst the profession, hence some respondents practice in more than one sector.

Q2



Which sectors do you work in? (Select all that apply)

Answered: 1,345 Skipped: 14



ANSWER CHOICES	RESPONSES	
Community	75.09%	1,010
GP practice	17.40%	234
ICB / other primary care	4.46%	60
Hospital	15.46%	208
Other (please specify)	Responses 3.72%	50
Total Respondents: 1,345		

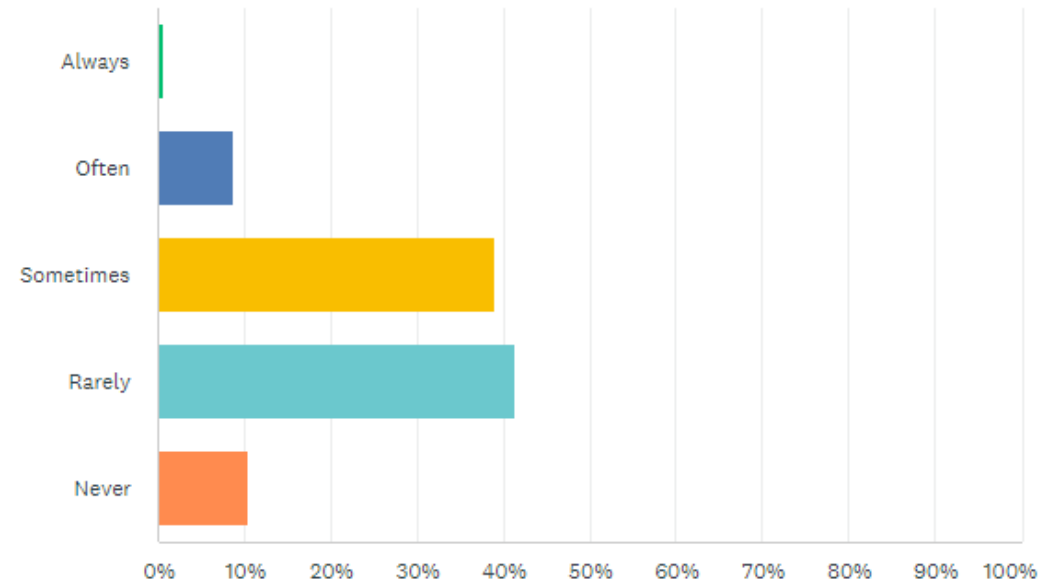
90% of respondents had seen patients decline entire prescriptions due to cost. 9% seeing this scenario often.

Q3



To the best of your knowledge, how often does a patient decline an ENTIRE prescription due to the cost?

Answered: 1,300 Skipped: 59



ANSWER CHOICES	RESPONSES
Always	0.54% 7
Often	8.77% 114
Sometimes	39.00% 507
Rarely	41.31% 537
Never	10.38% 135
TOTAL	1,300

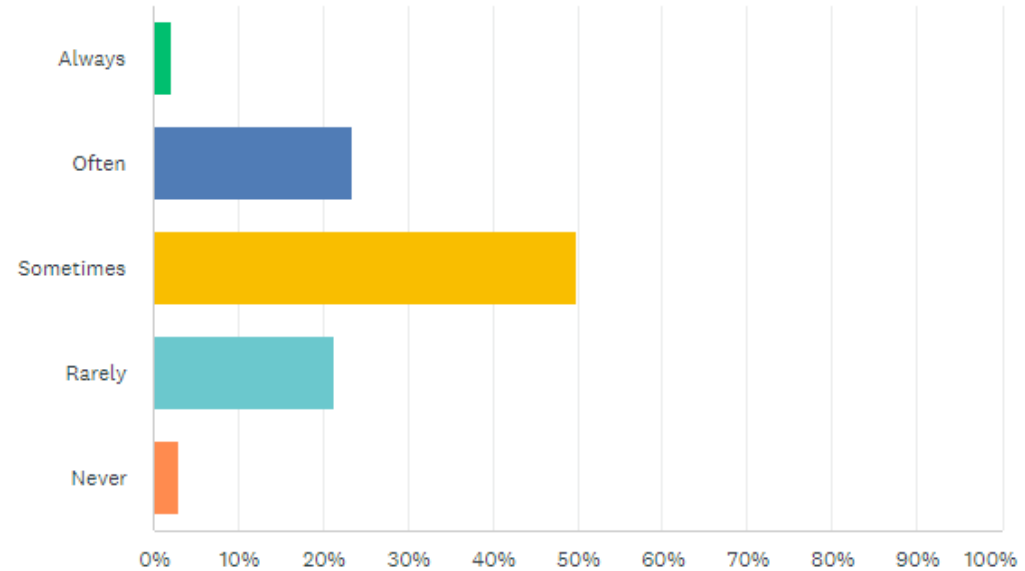
97% of respondents had seen patients decline parts of a prescription due to cost. 26% seeing this scenario often.

Q4



To the best of your knowledge, how often does a patient decline PART of a prescription due to the cost?

Answered: 1,288 Skipped: 71



ANSWER CHOICES	RESPONSES
Always	2.17% 28
Often	23.52% 303
Sometimes	49.92% 643
Rarely	21.35% 275
Never	3.03% 39
TOTAL	1,288

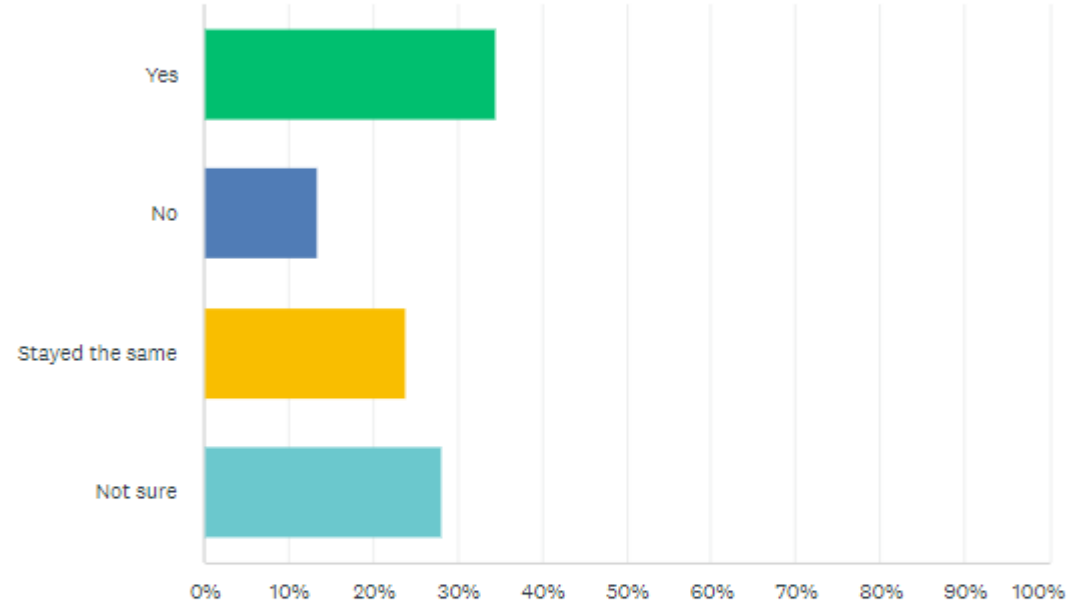
35% of respondents said their experience of patients declining prescriptions had increased in the last 12 months.

Q5



Has the rate at which patients decline a prescription increased in the last 12 months?

Answered: 1,275 Skipped: 84



ANSWER CHOICES	RESPONSES	
Yes	34.59%	441
No	13.41%	171
Stayed the same	23.84%	304
Not sure	28.16%	359
TOTAL		1,275

We asked respondents what the most common prescription medicines/conditions that patients declined were and common responses included:

- **Acute medicines** – patients may feel that they are going to recover anyway, but need to continue their long-term condition therapy
 - Antibiotics
 - Analgesics
- **Medicines which prevent illness rather than treat overt symptoms** (e.g. since patients do not actually “feel the benefit” they may only collect a painkiller or antibiotic and leave other items)
 - Antihypertensives (blood pressure medicine – some patients reduce daily dosage to make tablets last longer. Increases risk of stroke, MI)
 - Steroid (asthma preventer inhalers – patients collect the short-acting reliever inhalers alone. Very common and has significant impact on disease control resulting in significant deaths)
 - Statins (benefit of reduction in the risk of cardiovascular incidents no longer present)
 - Oral steroids (patients with respiratory conditions may pay for the antibiotic but leave the steroid tablet which will reduce overall disease control)
- **Add on medicines** (provided to prevent side effects of another medicine)
 - PPIs (lansoprazole, omeprazole, esomeprazole – often added to protect the stomach when taking anti-inflammatory pain-killers like naproxen & ibuprofen)
- **Mental Health medicines**
 - Antidepressants
- **Cheaper to buy OTC** (patients will do this even when the quantity is significantly smaller meaning they may still suffer with symptoms)
 - Analgesics (paracetamol, Ibuprofen, co-codamol)
 - Laxatives
 - Creams/ointments
- **Delaying payment**
 - Antibiotics – left until patient very poorly
 - Antihypertensives – reduce number of prescriptions required by cutting down on prescribed dose.

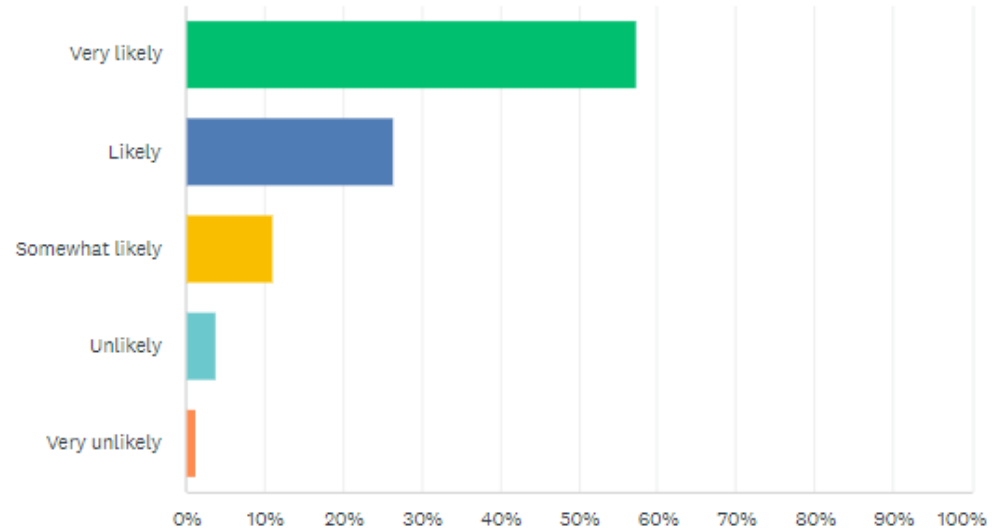
Though pharmacists are advising patients about the impact of not taking medicines, they cannot overcome the financial issues.

Q7



When a patient refuses a prescription medication based on cost, how likely are you to counsel them on the key benefits they stand to gain by taking the medication and the risks associated with not taking them?

Answered: 1,189 Skipped: 170



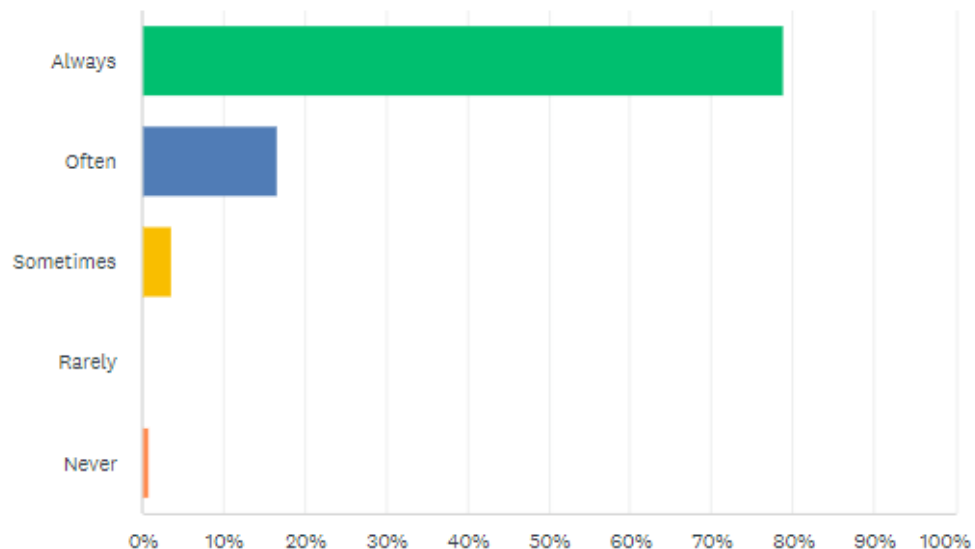
ANSWER CHOICES	RESPONSES	
Very likely	57.44%	683
Likely	26.49%	315
Somewhat likely	11.02%	131
Unlikely	3.87%	46
Very unlikely	1.18%	14
TOTAL		1,189

Q8



Do you inform your patients about spreading the cost of their prescription medication by purchasing a prepayment certificate?

Answered: 1,183 Skipped: 176



ANSWER CHOICES	RESPONSES
Always	78.87% 933
Often	16.65% 197
Sometimes	3.55% 42
Rarely	0.17% 2
Never	0.76% 9
TOTAL	1,183

Pharmacists are already advising patients about the options available to reduce the overall costs of prescriptions, with 79% saying they always do that and another 17% saying they do so often

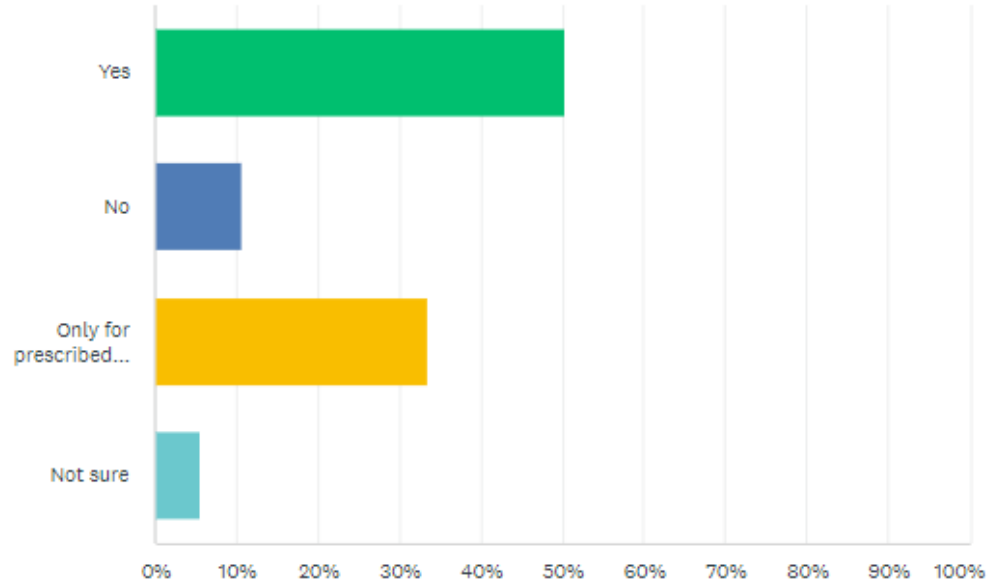
84% of pharmacists would support the widening of the exemption list for prescription charges with a further 6% unsure.

Q9



Do you support a widening of the long-term medical conditions eligible for exemption from prescription charges?

Answered: 1,178 Skipped: 181



ANSWER CHOICES	RESPONSES	
Yes	50.25%	592
No	10.70%	126
Only for prescribed medications relating to patients' long-term health	33.45%	394
Not sure	5.60%	66
TOTAL		1,178

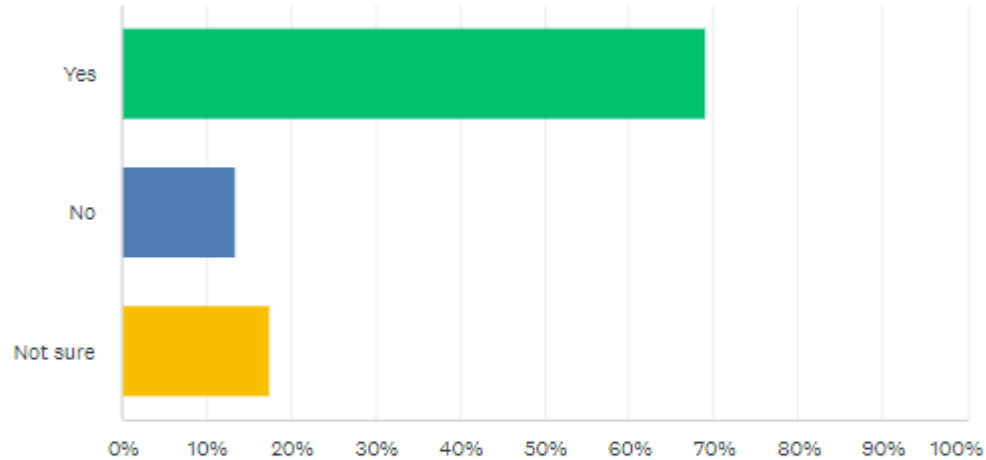
69% of pharmacists said that broadening the range of patients eligible for free prescriptions would lead to a reduction in incidents where patients decline prescriptions due to financial issues

Q10



Do you think broadening the range of patients eligible for free prescriptions would lead to a reduction in incidents where patients decline prescriptions due to financial issues?

Answered: 1,175 Skipped: 184



ANSWER CHOICES	RESPONSES	
Yes	69.11%	812
No	13.45%	158
Not sure	17.45%	205
TOTAL		1,175

More information

For more information on the wider campaign, please contact the Prescription Charges Coalition:



<http://www.prescriptionchargescoalition.co.uk/>