Alcohol (Minimum Pricing) (Scotland) Bill

Community Pharmacy Scotland

Who are we?

Community Pharmacy Scotland is the organisation which represents community pharmacy contractor owners in almost every aspect of their working lives, and is the voice of these vital healthcare professionals as they deliver pharmaceutical care to the people of Scotland.

It is empowered to represent the owners of Scotland’s 1232 community pharmacies and negotiates on their behalf with the Scottish Government. This covers all matters of terms of service and contractors’ NHS service activity including remuneration and reimbursement for the provision of NHS pharmaceutical services.

What do we do?

Community Pharmacy Scotland works with the Scottish Government on the development of new pharmaceutical care services and works to ensure that the framework exists to allow the owners of Scotland’s community pharmacies to deliver these services.

The Scottish community pharmacy contract puts the care of the individual right at its centre and with its focus on pharmaceutical care and improving clinical outcomes, community pharmacy contractors and their employee pharmacists are playing an increasingly important role in maximising therapeutic outcomes and improving medicine safety. Community pharmacy is at the heart of every community and plays an important part in the drive to ensure that the health professions provide the services and care the people of Scotland require and deserve.

Community Pharmacy Scotland is happy to provide further information to the Health and Sport committee as required in support of this submission.

Our Response to the Call for Evidence

Community Pharmacy Scotland broadly supports the proposed legislation around alcohol minimum pricing. As an organisation we recognise the scourge that alcohol misuse presents on society today and are keen to support any action that may help change Scotland’s relationship with alcohol.

Scotland’s levels of harmful drinking are significantly worse than the rest of the UK and there is some evidence that price can influence consumption (1). Alcohol is now 69% more affordable than in 1980 and consumption has increased by over 19% over the same period (2). The impact of this excessive consumption is estimated to cost Scots £3.56 billion each year, or £900 for every adult in Scotland (3).
It is for the reasons above that Community Pharmacy Scotland believes that action has to be taken to address the issue of alcohol misuse.

The advantages and disadvantages of establishing a minimum alcohol sales price based on a unit of alcohol

Community Pharmacy Scotland has looked at the peer review study by the University of Sheffield and while the evidence is purely based on modelling we believe the indication would be that minimum pricing could make an impact.

Community Pharmacy Scotland understands that minimum pricing of alcohol would be the first of its kind in Europe. The evidence gathering upon implementation is therefore key to determining the effectiveness (or otherwise) of the minimum pricing policy to be determined (i.e. it should be evidenced clearly from the outset). The lack of concrete evidence is a disadvantage to the introduction of the legislation. There is the possibility that the legislation could alienate public opinion and it may then be harder to change hearts and minds if the policy flounders.

Community Pharmacy Scotland also recognises that if the policy is evidenced correctly and is found to be a success this would be a positive achievement and place Scotland as an exemplar around this flagship policy. This could then be seen as an advantage.

The level at which such a proposed minimum price should be set and the justification for that level

Community Pharmacy Scotland believes that a minimum alcohol sales price based on a unit of alcohol of around 45p would be around the correct level. The effect of this level of minimum price is illustrated in the peer reviewed study. Together with an off-trade discount ban (4) it is estimated that implementation of a minimum pricing policy would lead to a 6.7% reduction in consumption. We believe this will have enough of an impact to positively dissuade many individuals from misusing alcohol due to the price differential. This would also have a positive impact on Scotland’s health and the public purse. The minimum price per unit would have to be reviewed depending on the impact and on an on-going basis. Minimum pricing will primarily target high strength drinks, sold at the cheapest prices and may have a greater effect on the heaviest drinkers.

Community Pharmacy Scotland would like to emphasise the point that we believe this is only one strand of the approach to tackling alcohol misuse in Scotland - although we do recognise that this fact has been stated by the current administration on many occasions. A minimum pricing policy should be implemented in Scotland as part of a comprehensive alcohol strategy. We note the steps already taken.

Community Pharmacy Scotland would welcome the opportunity to discuss further how community pharmacies could contribute to the national alcohol strategy.
What Pharmacy Can Offer

Community Pharmacy Scotland believes that staff working within community pharmacies have an important role to play with the public in terms of education around safe levels of alcohol consumption.

Community pharmacies are at the heart of local communities, already delivering public health services as part of the national pharmacy contract. Smoking cessation and sexual health services have been successfully rolled out and delivered nationally; the increased accessibility that the community pharmacy network provides now means that the Scottish public can tap into these NHS services in over 1200 premises throughout the country.

Alcohol Brief Interventions (ABIs) have been provided through GP practices since 2008. Due to the access that community pharmacies offer, Community Pharmacy Scotland feels that our network of pharmacies would be a natural extension for the provision of this service. Indeed some Health Boards have recognised this and have set up local schemes for pharmacy led ABIs. We feel a service set up nationally, additional to the public health services already within our national contract framework, would give added recognition and impetus to such initiatives.

Pharmacy led ABIs can be provided in an informal manner using innovative tools such as alcohol scratch cards which give a quick, simple illustration of an individual’s alcohol intake. This visual tool can then be used as an inroad to conducting a full ABI should the patient be receptive to this.

Community Pharmacy Scotland also believes that an NHS service delivered from pharmacies should go hand in hand with a formalisation of pharmacy’s place within care pathways for individuals with alcohol issues. Greater involvement with service delivery should be complemented by greater understanding of the roles and skills that other healthcare professionals and organisations have to bring to the benefit of individual patient care. Community pharmacists should be able to refer to a GP or directly into local drugs and alcohol teams for any individual requiring specialised advice.

Conclusion

Modelling evidence would tend to indicate that increasing price will have an effect on people’s drinking behaviour and reduce their consumption. We believe that it is time now to test this approach.

Support for minimum pricing alone will not address alcohol misuse but if used as part of a comprehensive alcohol strategy, alongside some of the other measures introduced through the Alcohol etc. (Scotland) Act 2010 we believe it could have significant impact on reducing alcohol-related harm and therefore Community Pharmacy Scotland supports the introduction of this legislation.

1. Changing Scotland’s Relationship with Alcohol: Discussion Paper on our Strategic Approach
3. The Societal Cost of Alcohol Misuse in Scotland for 2007 SG
4. Alcohol (Minimum Pricing)(Scotland) Bill 2011

Community Pharmacy Scotland
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