

Service Specification No.	LCPS1
Service	Locally Commissioned Pharmacy Service - Minor Ailment Scheme
Period	1 year
Date of Review	31 March 2020

1. Population Needs

1.1 National/Local Context and Evidence Base

- 1.1.1 Nationally, it is estimated that 57 million GP consultations a year are for minor ailments, costing the NHS a total of £2 billion.¹
- 1.1.2 Research estimates that 3% of all A&E consultations and 5.5% of GP consultations for common ailments could be managed in community pharmacies. This equates to over 650,000 visits to A&E and over 18 million GP consultations every year that could be diverted with a total annual cost saving of over £1billion.²
- 1.1.3 Community Pharmacies regularly provide advice and support to patients on a wide range of minor ailments and either recommend and sell treatment or refer to another healthcare professional.
- 1.1.4 The NHS Five Year Forward View described the need to make far greater use of pharmacists; in prevention and support for healthy living and support to self-care for minor ailments.³
- 1.1.5 A Minor Ailment Scheme has been commissioned from Community Pharmacies across Wigan Borough since 2007.
- 1.1.6 Local analysis of data for the scheme has shown that patients accessing the Minor Ailment Scheme would have otherwise consulted their GP, Walk in Centre or A&E. This supports the assumption that the scheme improves local primary care capacity by reducing medical practice workload related to minor ailments.

2. Outcomes

2.1 NHS Outcomes Framework Domains & Indicators

Domain 1	Preventing people from dying prematurely	✓
Domain 2	Enhancing quality of life for people with long-term conditions	
Domain 3	Helping people to recover from episodes of ill-health or following injury	✓
Domain 4	Ensuring people have a positive experience of care	✓
Domain 5	Treating and caring for people in safe environment and protecting them from avoidable harm	✓

1. Greater Manchester Medicines Strategy Implementation Plan: Short Term Objectives 2018-2021. Greater Manchester Health and Social Care Partnership (GMHSCP) 2018.

2. <https://www.england.nhs.uk/wp-content/uploads/2014/11/comm-pharm-better-quality-resilient-urgent-care.pdf>

3. Five Year Forward View, October 2014, <http://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf>

2.2 Local Defined Outcomes

- 2.2.1 The Minor Ailment Scheme will allow patients who are exempt from NHS prescription charges or hold a prepayment certificate, who would have otherwise gone to their GP for a prescription, to receive treatment from an agreed local formulary for a range of self-limiting conditions free of charge from the Pharmacy.
- 2.2.2 Patients will have access to a range of treatments and advice and will be supported where appropriate to self-treat rather than access their GP, Walk in Centre or A&E services.

3. Scope

3.1 Aims and Objectives of Service

- 3.1.1 To improve access and choice for people with minor ailments by:
- Promoting self-care through the Pharmacy, including provision of advice and where appropriate medicines and/or appliances without the need to visit the GP practice
 - Supplying appropriate medicines at NHS expense, in line with the Wigan Borough CCG Minor Ailment Scheme treatment protocols.
- 3.1.2 To improve primary care capacity by reducing medical practice workload related to minor ailments.
- 3.1.3 To reduce A&E attendances.

3.2 Service Description

- 3.2.1 The part of the Pharmacy used for provision of the service must provide a sufficient level of privacy and safety as required by the patient or their carer.
- 3.2.2 The Pharmacy Contractor has a duty to ensure that Pharmacists and staff involved in the provision of the service have relevant knowledge and are appropriately trained in the operation of the service.
- 3.2.3 The Pharmacy Contractor must have appropriate Standard Operating Procedures (SOPs) in place for the service. If the Pharmacist is to delegate aspects of service provision to other members of staff the SOP must make reference to their role and responsibilities, highlighting steps in the procedure where referral to the Pharmacist is necessary.
- 3.2.4 The Pharmacy Contractor has a duty to ensure that Pharmacists and staff involved in the provision of the service are aware of and operate within the Standard Operating Procedures and any local protocols.
- 3.2.5 This service cannot be provided solely by trained pharmacy staff. At all times a Pharmacist must be present and accountable. Overall accountability and responsibility will remain with the Pharmacist.
- 3.2.6 Staff to whom the Pharmacist delegates supply must have received adequate training in the management of minor ailments and be aware when to refer to the Pharmacist.

- 3.2.7 The managing Pharmacist has a duty to ensure that Pharmacists and staff involved in the provision of the service are aware of and operate within the Minor Ailment Scheme protocols produced by Wigan Borough CCG. The protocols issued in March 2016 have been **extended for 12 months** pending the outcome of the Greater Manchester Health and Social Care Partnership (GMHSCP) review of Minor Ailment Schemes following publication of the NHS England guidance on conditions for which over the counter items should not routinely be prescribed in primary care.
- 3.2.8 Providers are responsible for ensuring that staff remain alert to any developments in national guidance which has been issued since March 2016 and supersedes the information in the current protocols. Pending the update of the minor ailment protocols, providers must ensure that up to date evidence, best practice guidance and professional standards are followed at all times.
- 3.2.9 Pharmacists and registered technicians involved in the provision of the service should complete a Declaration of Competence to self-assess their competence to provide the Minor Ailment Scheme and this should be reassessed and updated at least every three years. Paperwork to support this can be found by visiting the CPPE website <https://www.cppe.ac.uk/services/declaration-of-competence>
- 3.2.10 Pharmacists and staff participating in the service must ensure they have appropriate insurance cover.
- 3.2.11 The Pharmacy will:
- provide advice on the management of the ailment, or;
 - provide advice and a medicine from the local formulary, supported by advice on its use, or;
 - provide advice on the management of the ailment plus a referral to an appropriate healthcare professional
- 3.2.12 All medication supplied should be in original packs and must contain a patient information leaflet. There is no need to label medication. However, if a Pharmacy wishes to do so then they can. Pharmacies are legally required to ensure that any information given to patients is available in an accessible information format.
- 3.2.13 Where appropriate the Pharmacy may sell additional OTC medicines to the person to help manage the minor ailment.
- 3.2.14 The Pharmacy will operate a triage system, and will refer to other health and social care professionals, where appropriate and as detailed in the treatment protocols.
- 3.2.15 If the patient presents with symptoms indicating the need for an immediate consultation with the GP, the Pharmacist should attempt to contact the surgery and make an appointment for the patient within the appropriate time frame. If the surgery is closed and/or the symptoms are sufficiently severe, the patient should be advised to contact the on-call doctor or attend A&E immediately.

- 3.2.16 The Pharmacy will maintain a record of the consultation and any medicine that is supplied using the minor ailment scheme consultation form. These consultation forms must be fully completed and kept for a minimum of 4 years to ensure effective ongoing service delivery and audit.
- 3.2.17 If a patient presents with multiple conditions one consultation form should be completed for all conditions i.e. one form should be completed per consultation not per condition.
- 3.2.18 Pharmacy staff should complete the front of the consultation form, ensuring all information is entered legibly. The patient or their carer should be asked to complete the back of the form detailing reason for exemption from prescription charges, if the patient refuses or is unable to provide this information they must not be supplied under this scheme.
- 3.2.19 The Pharmacy may choose to complete the consultation form electronically at the time of the consultation using the Service Pact module from Webstar. This must be printed and signed by the patient during the consultation and kept for a minimum of 4 years to ensure effective ongoing service delivery and audit.
- 3.2.20 The Pharmacy will have a system to check the person's eligibility for receipt of the service.
- 3.2.21 Pharmacy staff should be alert to potential abuse of the scheme by patients who attend for repeat supplies of medication or who make requests for multiple unrelated conditions and consider referral to other healthcare professionals where appropriate.
- 3.2.22 Pharmacy staff should be alert to requests for medication which may raise safeguarding concerns (e.g. repeated requests for analgesia for similar or unrelated conditions) and local safeguarding procedures must be followed, including raising awareness with the patient's GP if appropriate. A flowchart which supports how to raise safeguarding concerns within Wigan Borough CCG is available within schedule 2 of the contract.
- 3.2.23 CegedimRx on behalf of Wigan Borough CCG will provide appropriate software for the recording of relevant service information for the purposes of audit and the claiming of payment.
- 3.2.24 CegedimRx will install and provide training on Pharmacy-based Service PACT module. The software will be used to capture all consultation information.
- 3.2.25 CegedimRx will use the data collected to generate:
- pharmacy invoices for consultation
 - management information for WBCCG
 - management information for the pharmacies
- 3.2.26 All data supplied to CegedimRx must be treated as confidential and must not be disclosed to third parties without the express permission of the WBCCG.
- 3.2.27 All data will remain the property of the commissioning body (Wigan Borough CCG).
- 3.2.28 All patient-identifiable information will only be used for the purpose of this service and must not be used for other commercial purposes.

- 3.2.29 Pharmacists will share relevant information with other health care professionals and agencies, in line with locally determined confidentiality arrangements.
- 3.2.30 Wigan Borough CCG will provide details of relevant referral points which pharmacy staff can use to signpost service users who require further assistance.
- 3.2.31 Wigan Borough CCG will be responsible for the promotion of the service locally, including the development of publicity materials, which Pharmacies will be required to use to promote the service to the public. Please contact the CCG Medicines Management Team if these materials are required in an alternative format.
- 3.2.32 The managing Pharmacist MUST inform Wigan Borough CCG Medicines Management Team immediately if they are unable to provide the minor ailments scheme due to any circumstances.

3.3 Population Covered

- 3.3.1 Any patient entitled to receive NHS services who is exempt from prescription charges or holds a prepayment certificate can present to the Pharmacy and access the service for treatment of a current self-limiting condition covered by the minor ailment protocols.

3.4 Any Acceptance and Exclusion Criteria and Thresholds

- 3.4.1 The scheme is intended for treatment of acute, self-limiting minor ailment conditions only.
- 3.4.2 This service must not be used for the treatment of:
- long-term management of conditions including season long treatment of hayfever
 - patients with symptoms not indicative of any of the minor ailments included in the scheme
 - scheme formulary is contraindicated
 - lost medicine
 - medicine requested 'just in case'
 - medicine requested to take on holiday
 - medicine requested in lieu of uncollected repeat prescription
 - medicine requested to stock up medicine cabinet
 - patient or carer unwilling to complete scheme documentation
 - patient or carer unwilling to accept medication or quantity of medication available from the scheme
- 3.4.3 Pharmacists must adhere to the exclusion criteria for each condition as detailed in the individual treatment protocols.
- 3.4.4 Pharmacists must not treat family members on the scheme but should refer them to another Pharmacy providing the service.

3.5 Interdependence with other Services/Providers

- 3.5.1 Individual treatment protocols may require patients to be referred to an appropriate healthcare professional (e.g. Dentist, Podiatrist, GP, Walk-In Centre or Emergency Care Department).

4. Applicable Service Standards

4.1 Applicable National Standards (eg NICE)

NICE Quality Standard for Acute Kidney Injury (QS76)

4.1.1 Statement 1: People who are at risk of acute kidney injury are made aware of the potential causes.

NICE Quality Standard for Meningitis (bacterial) and Meningococcal Septicaemia in Children and Young People (QS19)

4.1.2 Statement 1: Parents and carers of children and young people presenting with non-specific symptoms and signs are given 'safety netting' information that includes information on bacterial meningitis and meningococcal septicaemia.

NICE Quality Standard for Constipation in Children and Young People (QS62)

4.1.3 Statement 1: Children and young people with constipation receive a full assessment before a diagnosis of idiopathic constipation is made.

NICE Quality Standard for Dyspepsia and Gastro-oesophageal Reflux Disease in Adults (QS96)

4.1.4 Statement 1: Adults with dyspepsia or reflux symptoms who present to community pharmacists are given advice about making lifestyle changes, using over-the-counter medicines and when to consult their GP.

NICE Quality Standard for Feverish Illness in Childhood (QS64)

4.1.5 Statement 1: Infants and children under 5 years with unexplained fever have their risk of serious illness assessed and recorded using the traffic light system.

4.1.6 Statement 4: Parents and carers who are advised that they can care for an infant or child under 5 years with unexplained fever at home are given safety net advice, including information on when to seek further help.

NICE Quality Standard Headaches in young people and adults (QS42)

4.1.7 Statement 2: People with a primary headache disorder are given information on the risk of medication overuse headache.

4.2 Applicable Standards set out in Guidance and/or issued by a Competent Body (eg Royal Colleges)

4.2.1 **General Pharmaceutical Council** Standards for Pharmacy Professionals.

4.2.2. **General Pharmaceutical Council** Standards for Registered Pharmacies.

4.2.3 **Royal Pharmaceutical Society** Interim Statement of Professional Standard. Supply of Over The Counter (OTC) medicines.

4.2.4 **Royal Pharmaceutical Society** Bowel Cancer - Quick Reference Guide.

4.2.5 **Royal Pharmaceutical Society** Chloramphenicol - Quick Reference Guide.

4.2.6 **Royal Pharmaceutical Society** Cough and Cold Products for Children - Quick Reference Guide.

4.2.7 **Royal Pharmaceutical Society** Lung Cancer - Quick Reference Guide.

4.2.8 **Royal Pharmaceutical Society** Oesophago-gastric Cancer - Quick Reference Guide.

- 4.2.9 **Royal Pharmaceutical Society** Pseudoephedrine and Ephedrine - Quick Reference Guide.
- 4.2.10 **Royal Pharmaceutical Society** Protecting Children and Young People - Quick Reference Guide.
- 4.2.11 **Royal Pharmaceutical Society** Protecting Vulnerable Adults - Quick Reference Guide.
- 4.2.12 **Royal Pharmaceutical Society** Raising Concerns, Whistleblowing and Speaking up Safely in Pharmacy.

4.3 **Applicable Local Standards**

- 4.3.1 Providers will review their Standard Operating Procedures for the service when there are any major changes in the law affecting the service or in the event of any dispensing incidents. In the absence of any of these events they will be reviewed every 2 years.
- 4.3.2 The Pharmacy co-operates with any locally agreed CCG led assessment of the service or service user experience.

5. **Applicable Quality Requirements**

5.1 **Quality Indicators**

- 5.1.1 Providers will be required to display promotional leaflets relating to the scheme and make these available to patients.
- 5.1.2 All Pharmacies participating in the scheme should have a copy of a minor ailments reference source for example "Minor Illness Major Disease" which is available from the pharmaceutical press.
- 5.1.3 Providers will provide self-care material when required in accordance with the individual treatment protocols to service users.
- 5.1.4 Providers should be able to demonstrate that Pharmacists and staff involved in the provision of the service have undertaken CPD in the treatment of minor ailments and any training as specified by Wigan Borough CCG.
- 5.1.5 The Pharmacy will permit announced or unannounced visits from Wigan Borough CCG and will co-operate with any locally agreed post payment verification and contract monitoring assessment of the service or service user experience as requested by Wigan Borough CCG.

6. **Payment**

6.1 **Payment Submission**

- 6.1.1 It is the responsibility of the individual Pharmacy contractor to inform Wigan Borough CCG of any change in ownership or account details which may affect payments for Locally Commissioned Services.
- 6.1.2 All claims for consultations should be submitted electronically via the CegedimRx Service Pact Module for the Minor Ailment Scheme.
- 6.1.3 Once claims are submitted to CegedimRx Service Pact, a unique identifier is produced for each consultation, this should be documented on the consultation form in the space provided to ensure a suitable audit trail is in place.

- 6.1.4 Pharmacies are asked to process claims in a timely manner. Claims submitted later than the 5th day of the following month to which the claim relates will not be processed until the next month.
- 6.1.5 Any claims submitted more than 3 months in arrears will not be accepted and payment will not be made.
- 6.1.6 Wigan Borough CCG will make the payments to Pharmacies via an invoice generated by CegedimRx.
- 6.1.7 Wigan Borough CCG reserves the right to verify claims by, but not limited to, inspecting paper and computer records in accordance with ethical guidelines.

6.2 Fees

- 6.2.1 All payments will be made on a monthly basis.
- 6.2.2 Consultation Fee - A fee of £3.00 will be paid for each consultation up to the first 200 consultations in total. A fee of £2.50 will be paid for each consultation thereafter.
- 6.2.3 A consultation consists of an interaction with a single patient. Only one consultation fee will be paid regardless of the number of items dispensed. The consultation fee will be paid even if the patient does not receive a supply of medication.
- 6.2.4 Drug Costs - Drug cost reimbursement will be at current Drug Tariff cost. If the drug is not within the Drug Tariff the cost will be the current Chemist and Druggist cost. In agreement with the LPC drug costs will be adjusted annually.
- 6.2.5 VAT - VAT will be paid on the drug cost only.
- 6.2.6 Payments can only be made to Pharmacies that have signed up to the Minor Ailment Scheme and meet the service specifications outlined above.
- 6.2.7 Payments are made to the Pharmacy Contractor not individual Pharmacists.

7. Termination of Service and Service Review

7.1 Notice period

- 7.1.1 Wigan Borough CCG and the contractor should give 3 months' notice of either party's desire to terminate the service.
- 7.1.2 Wigan Borough CCG should give 3 months' notice of any change to the terms of service.
- 7.1.3 Where contractors stop providing this service, they should inform the Medicines Management Team immediately (01942 482838) and endeavour to re-engage in the service as soon as possible.
- 7.1.4 The service will be reviewed in 12 months.
- 7.1.5 Next review: March 2020