MINOR AILMENT SERVICE (MAS)

Your health challenge

• It is estimated that 57 million visits to GPs are made every year for minor ailments\(^1\)
• There is a shortage of GPs across the country and the average waiting time for a GP appointment is likely to hit two weeks in 2016\(^2\)

Fact: Pharmacists are trained to provide advice and, where appropriate, supply medicines for minor ailments

How can community pharmacies help?

Pharmacists and pharmacy teams can offer support to patients to help them self care and, if appropriate, access medicines for minor conditions without having to visit their GP or an A&E department.

There are 75 locally commissioned MAS in England across different CCGs and local NHS England teams\(^3\) so this service is being used by a large number of commissioners to support urgent care.

Results from 74 services 1,722,230 patient consultations have shown:

• 84.3% of patients would have gone to their GP if MAS was not available;
• only 3% of patients would have purchased medicines if MAS was not available; and
• in 95.8% of consultations no onward referral to other NHS providers was necessary.\(^4\)

2. Pulse GP survey completed by 460 GPs – News story 20/05/15 accessed 21/12/15 http://dld.bz/eeM7T
3. PSNC Briefing 043/17: Analysis of Minor Ailment Services in England http://ow.ly/vy26Q100xGna
4. PSNC Briefing 044/17: Analysis of Minor Ailment Services Data http://ow.ly/vyP0x3OvGnv

“GP practice staff like the integrated working and increased communication between the GP and pharmacy staff, the prompt service with no need for appointment, the consistent message provided by the two different health care settings, the commitment by the pharmacies.”

GP practice staff, CPWY Bradford City CCG self care service evaluation\(^5\)

“The new unified scheme has delivered, on average, two hours per week per practice of additional GP appointment capacity as well as a 46% reduction in costs in comparison to the same quarter the previous year.”

NHS England Birmingham, Solihull & the Black Country, Pharmacy First evaluation\(^6\)

5. Bradford City CCG Self Care Service - Pharmacy First 8 Month Evaluation 2014 http://dld.bz/eeM8n

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Potential benefits of a community pharmacy minor ailments service

1. Takes pressure off overloaded GPs and A&E departments

Research shows that 3% of all A&E consultations and 5.5% of GP consultations for minor 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.6

2. Better value for money for the NHS

Treating minor ailments such as coughs and sore throats cost the NHS an extra £1.1 billion a year when patients are treated at A&E or GP practices rather than community pharmacies.6

3. Accessible care for patients

No appointments are needed to see a pharmacist and pharmacies generally have longer opening hours than GP practices including many being open at weekends. Since pharmacies are located near where people work and live they are perfectly placed to catch the working population who may struggle to get an appointment during the traditional opening hours of a GP surgery.

4. Encourages self care

In many cases people can take care of their minor ailments without having to visit a GP. Pharmacy teams can promote self care including provision of advice and, where appropriate medicines, without the need to visit a GP practice. Pharmacy teams can also provide advice on preventing certain minor ailments from occurring such as diet and lifestyle changes.

How might your local service work?

Generally the service is designed as a “walk in service” so the patient can present without referral or appointment. However, the service could include referrals, for example, from GP practices or NHS 111. The pharmacist or an appropriately trained member of staff could discuss with the patient either in a private area of the pharmacy or in a consultation room, the symptoms the patient is experiencing and offer self care advice and, if appropriate, a medicine. Patients may also be referred to another healthcare professional if appropriate.

The service could offer a small or large range of medicines to treat a range of conditions and could include Patient Group Directions (PGDs) to allow the supply of certain prescription-only medicines (POMs).

If the patient was exempt from prescription charges the medicine would be supplied free of charge. If the patient was not exempt then the medicine could be sold to the patient at the retail price or at an amount equivalent to the prescription charge. If PGDs are included in the service, the patient’s GP should be notified so their medical record can be updated to include the POM supplied under the PGD.

“Community pharmacies are an under-used resource: many are now open 100 hours a week with a qualified pharmacist on hand to advise on minor illnesses, medication queries and other problems. We can capitalise on the untapped potential, and convenience, that greater utilisation of the skills and expertise of the pharmacy workforce can offer.”

Transforming Urgent and Emergency Care Services in England, 2013

6. Pharmacy Research UK – Community Pharmacy Management of Minor Illness (MINA Study) http://dld.bz/eeM83

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