# SCHEDULE 2 – THE SERVICES

1. **Service Specifications**

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| **Service Specification No.** | Pharmacy 8 |
| **Service** | Pharmacy First Minor Ailments Service |
| **Commissioner Lead** | Sue Lawton Southampton Area HIOWICB |
| **Provider Lead** | Community Pharmacy South Central (CPSC)  Debby Crockford |
| **Period** | 1st April 2022 – 31st March 2024 |
| **Date of Review** | February 2024 |

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| **1. Population Needs** |
| **General Overview**  **1.1 National/local context and evidence base**  Minor ailments are defined as common or self-limiting or uncomplicated conditions which can be managed without medical intervention. The management of patients with minor self-limiting conditions, impacts significantly upon GP workload. The situation is most acute where patients do not pay prescription charges and may not have the resources to seek alternatives to a prescription from their GP. It is estimated that one in five GP consultations are for minor ailments and by reducing the time spent managing these conditions would enable them to focus on more complex cases. In 2003 8% of A&E department visits involve consultations for minor ailments, costing the NHS £136 million annually.  With the change in NHS systems architecture, and the prevailing economic climate, services such as Community Pharmacy based Minor Ailments service, which reduce costs, create GP time for the management of more complex long-term conditions and have a positive impact on urgent and emergency services are increasingly being adopted as part of system redesign. The NHS England evidence base report on the urgent care review, published in June 2013, highlighted the role that pharmacies could play in providing accessible care and helping many patients who would otherwise visit their GP for minor ailments. It concluded that; ‘*Community Pharmacy services can play an important* *role in enabling self-care, particularly amongst patients with minor ailments and long* *term conditions.’* The NHS Community Pharmacist Consultation Service (CPCS) was launched by NHS England and NHS Improvement in October 2019 and has since been expanded to include referral by GP practices.  **1.2 Local Evidence**  Education and promotion on use of Pharmacies is a priority for Southampton. Learning from other areas demonstrates that increased use of pharmacies and implementing minor ailment services has the potential to reduce pressure on the urgent care system, particularly Emergency Department (ED) and GPs.  Southampton has a diverse registered population of around 307,145 with 26 GP practices providing primary care services for the city population. Whilst the overall health of the population has improved over recent times, the city still faces numerous challenges and dramatic health inequalities exist within and between communities. Certain wards in Southampton have significant levels of deprivation with allied chronic health problems and co-morbidities, creating a high dependency on local health services.  Young working age patients and young children are the biggest users of ED and other urgent care services in the city. Up to 1 in every 100 patients registered with a Southampton GP attends ED during GP surgery opening times with a minor complaint that have been appropriately managed in an alternative setting. Cough, cold, sore throat, earache, diarrhoea and paediatric fever accounts for >30% of Walk-in Centre (WIC) attendances and >20% of non-injury presentations at the MIU – patients attending WIC and MIU say that they would attend GP or ED as an alternative. Many could have appropriately self-managed with advice and guidance from a Pharmacist.  Southampton Area Team as part of Hampshire and Isle of Wight ICB is committed to ensuring patients have same day access to the care and information they require to improve patient experience and outcomes, and to reduce pressure on the urgent care system. Promoting pharmacies for advice and guidance on self-management and implementing a Minor Ailments Service will support this. |
| **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** | **X** | | **Domain 4** | **Ensuring people have a positive experience of care** | **X** | | **Domain 5** | **Treating and caring for people in safe environment and protecting them from avoidable harm** | **X** |   **2.2 Local defined outcomes**   * To improve patients access to advice and medication for an agreed list of minor ailments for patients/families on low income. * To reduce the number of patients having to attend their local GP, ED or local urgent care 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 without the need to visit the GP practice. * Operating a referral system from local medical practices or other primary care providers. * Supplying appropriate medicines at NHS expense for those who are eligible. * To link with the Community Pharmacy Consultation Service (CPCS) to enable access to treatment for patients/families on low income.   3.1.2 To improve primary care capacity by reducing medical practice workload related to minor ailments.  **3.2 Service description**  3.2.1 The pharmacy will provide verbal and printed advice and support to people on the management of minor ailments:   * Paediatric Sore throat * Paediatric viral upper respiratory tract infection - Cold * Diarrhoea * Paediatric fever * Headlice – metal comb * Paed Insect bites and stings * Allergic rhinitis/Hayfever * Vaginal thrush * Oral thrush adult * Conjunctivitis * Migraine * Paediatric Headache * Athletes’ foot * Threadworm * Contact dermatitis * Dry Eye   3.2.2 Where appropriate the pharmacy may provide up to a maximum of two OTC medicines per minor ailment listed as detailed in section 3.3.10 to the person to help manage the minor ailment.  3.2.3 Each consultation will be paid at a rate of £ per consultation, only when a medicine has been supplied. Pharmacists cannot claim a consultation fee when a product is not supplied as this is deemed as part of Essential Service 6 Self Care.  3.2.4 When a patient is eligible for free provision of treatment then medicines from the designated formulary, section 3.3.10, may be provided free of charge. Pharmacies will be reimbursed for the drugs they supply at the Drug Tariff price, or where this is not available, the Chemist and Druggist trade price, for the appropriate calendar month plus VAT.  3.2.5 The pharmacy will operate a triage system, including referral to other health and social care professionals, where appropriate.  **3.3 Service outline**  3.3.1 The Minor Ailments service should be delivered by a Pharmacist, who can meet the required competencies, see section 5, or by suitably trained members of the pharmacy team acting under the supervision of a pharmacist. All pharmacy staff must be aware that the pharmacy provides the service, who can deliver the service and ensure that the pharmacy offers a user-friendly, non-judgmental approach to service delivery.  3.3.2 The pharmacist or pharmacy team member will assess the patient’s condition using a structured approach to responding to symptoms. As a minimum the assessment will cover:   * Nature and duration of symptoms * Expected symptoms * Concurrent medication and medical conditions * What is normal for the patient * Probable duration of symptoms * Exclusion of serious disease / alarm / red flag symptoms * Identify if patient is pregnant/ breastfeeding * Identify any medication already supplied / taken for the minor ailment   3.3.3 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.  3.3.4 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 local protocols. The Pharmacy must have an SOP or Sale of Medicines protocol in line with the requirements of Essential Service 6 of the Community Pharmacy Contractual Framework – Support for Self Care.  3.3.5 The pharmacy contractor has a duty to ensure that all pharmacy staff understand that this service is not intended to divert patients presenting in the pharmacy with a minor ailment listed on the minor ailment service. This service should only be offered to those who would usually consult the GP, out of hours, NHS 111 service, Minor Injury Unit, ED services for minor ailments, or have been referred via the Community Pharmacy Consultation Service (CPCS)  3.3.6 The pharmacy must use PharmOutcomes to maintain appropriate records, which should be updated within **24 hours** of consultation, this will ensure effective ongoing service delivery and audit.  3.3.7 The part of the pharmacy used for provision of the service provides a sufficient level of privacy and safety and meets other locally agreed criteria. If a consultation room is available, patients will be offered the opportunity of the consultation taking place within it.  3.3.8 Patient eligibility – please see section 3.4 and 3.5.  3.3.9 The pharmacy has a system to check the person’s eligibility for receipt of the service in line with the usual checks on NHS prescriptions and record via PharmOutcomes.  3.3.10 The following local minor ailments formulary will be used:   |  |  | | --- | --- | | **Ailment** | **Product** | | **Gastro-intestinal** | | | ***Diarrhoea*** | Oral re-hydration therapy sachets ( 1 x 6) | |  |  | | **Respiratory System** | | | ***Allergic rhinitis*** | Chlorphenamine 2mg/5ml SF Liquid (1 x 150ml) | |  | Cetirizine 1mg/ml solution (1 x 200ml) | |  | Sodium cromoglycate 2% eye drops (1 x 10ml) | |  | Beclometasone nasal spray 50mcg/spray (1 x 200 dose) | |  | | | ***Paed Sore throat*** | Paracetamol 120mg/5ml SF paed suspension | |  | Paracetamol 250mg/5ml SF suspension (1 x 100ml) | |  | Ibuprofen 100mg/5ml SF suspension (1 x 100ml) | |  |  | | ***Paed viral upper respiratory tract infection - Cold*** | Paracetamol 120mg/5ml SF paed suspension | | Paracetamol 250mg/5ml SF suspension (1 x 100ml) | | Ibuprofen 100mg/5ml SF suspension (1 x 100ml) | |  |  | | **Pain** | | | ***Paed Headache*** | Paracetamol 120mg/5ml SF paed suspension | |  | Paracetamol 250mg/5ml SF suspension (1 x 100ml) | |  | Ibuprofen 100mg/5ml SF suspension (1 x 100ml) | |  |  | | ***Migraine*** | Imigran Recovery tablets 50mg (1 x 2) | |  |  | | **Skin** | | | ***Athlete’s Foot*** | Clotrimazole 1% cream (1 x 20g) | |  | Miconazole 2% cream (1 x 30g) | |  | | | ***Contact Dermatitis*** | Hydrocortisone 1 % cream (1 x 15g) | |  |  | | ***Head Lice*** | Metal detection comb Nitty Gritty NitFree | |  |  | | ***Paed Insect Bites and Stings*** | Chlorphenamine 2mg/5ml SF Liquid (1 x 150ml) | |  |  | | ***Oral thrush*** | Miconazole oral gel 20mg/g (Daktarin) (1 x 15g) | |  |  | | **Vaginal Thrush** | | |  | Clotrimazole 2% cream (1 x 20g) | |  | Clotrimazole 500mg pessary (x1) | |  | Clotrimazole 10% vaginal cream (x1) | |  | Fluconazole 150mg capsule (x1) | |  |  | | **Eye** | | | ***Conjunctivitis*** | Chloramphenicol 0.5% eye drops (1 x 10ml) | |  |  | | ***Dry Eye*** | Hypromellose 0.3% eye drops x 10ml | |  | Clinitas Carbomer (carbomer 980 0.2%) gel drops x 10g (Altacor) | |  |  | | **Paediatric** | | | ***Fever*** | Paracetamol 120mg/5ml SF suspension (1 x 100ml) | |  | Paracetamol 250mg/5ml SF suspension (1 x 100ml) | |  | Ibuprofen 100mg/5ml SF suspension (1 x 100ml) | |  |  | | ***Threadworm*** | Mebendazole 100mg (Ovex single dose) tablet (x1) | |  | Mebendazole 100mg/5ml (Ovex) oral suspension (1 x 30ml) | |  |  |   *This list is correct as of 1st April 2022 and will be amended as required in accordance with local policy. All changes will be notified.*  3.3.11 The pharmacist will use their professional judgement to determine the most appropriate course of action for the patient. Pharmacists are accountable for the patient management decisions they make in the course of providing the Minor Ailment service. 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 health care professional.   **Advice Only**   * Provide information on symptoms, where appropriate include antibiotic use message * Promote self-care messages and what patients can do for themselves to help manage the minor ailment * Consider providing printed information to reinforce verbal messages * Dispel any misconceptions the patient may have about visiting a Pharmacy First e.g. the medication a Pharmacy can supply is likely to be the same as that supplied by a GP * Where and when to go for further advice/treatment if necessary * Management of future minor ailments   **Advice and Supply of medication from the formulary**   * Provide information on symptoms and where appropriate include antibiotic use message * Promote self-care messages and what patients can do for themselves to help manage the minor ailment * Consider providing printed information to reinforce verbal messages * Supply medication from the formulary * Explain how the treatment works including possible side-effects/ cautions and warnings with use * Dispel any misconceptions the patient may have about visiting a Pharmacy First e.g. the medication a Pharmacy can supply is likely to be the same as that supplied by a GP * Where and when to go for further advice/treatment if necessary * Management of future minor ailments * Record supply on PharmOutcomes   **Referral for non-urgent appointment**   * Provide information on symptoms and where appropriate include antibiotic use message * Promote self-care messages and what patients can do for themselves to help manage the minor ailment * Consider providing printed information to reinforce verbal messages * If necessary, supply medication from the formulary – Record supply on PharmOutcomes * Dispel any misconceptions the patient may have about visiting a Pharmacy First e.g. the medication a Pharmacy can supply is likely to be the same as that supplied by a GP * Management of future minor ailments * Advise patient to contact the GP surgery and make an appointment (as per usual care). ***Complete referral form and give to the patient to take to their GP***. * The pharmacy should not contact the GP surgery to arrange an appointment for the patient   **Urgent referral to the GP**   * Used when the patient presents with symptoms indicating the need for an immediate consultation with the GP * Patients should be advised to book their own urgent appointment with GP/Out of hours stating pharmacist recommendation. ***Complete referral form and give to the patient to take to their GP.***     **Appropriate use of antibiotic’s message**   * Discuss with the patient the key messages about antibiotics not being required for minor infections, such as coughs, colds, earache, sinusitis, flu, sore throat and diarrhoea,  because these are usually caused by viruses. * Discuss possible side effects of antibiotics, and problems caused by resistance.   3.3.12 When referring patients to their GP practice, pharmacists should not give patients the expectation of any specific treatment i.e. antibiotics, or the length of time it might take to arrange a GP appointment.  3.3.13 The Southampton Area HIOWICB will be responsible for the promotion of the service locally, including the development of publicity materials, which pharmacies can use to promote the service to the public.  3.3.14 The Southampton Area HIOWICB may provide patient information sheets to support self-care messages related to specific ailments covered by the scheme and make these available to pharmacies to print via PharmOutcomes.  3.3.15 If a patient presents more than twice within any month with the same symptoms and there is no indication for urgent referral, the pharmacist should consider referring the patient to their GP.  3.3.16 If the patient presents with symptoms outside the Minor Ailments service the patient should be treated in line with usual practice.  3.3.17 If the pharmacist suspects that the service is being misused/abused they should alert [hiowicb-hsi.so.pccommissioning@nhs.net](mailto:hiowicb-hsi.so.pccommissioning@nhs.net)  **3.4 Population covered**  3.4.1 This service is available to any person, including dependents e.g. children, who are:   * on low income – please see link and below  <https://psnc.org.uk/wp-content/uploads/2018/08/PSNC-Briefing-040.18-Dispensing-Factsheet-Exemptions-from-the-prescription-charge.pdf>   + HC2 Charges Certificate – Possession of a valid HC2 Charges Certificate   + Income Support (IS) – Possession of an IS award notice   + Income-related Employment and Support Allowance (ESA) – Possession of an ESA award notice   + Income-based Jobseeker’s Allowance (JSA) – Possession of a JSA award notice   + Universal Credit (UC) – Possession of a Universal Credit statement   + NHS Tax Credit Exemption Certificate – Possession of a valid Tax Credit Exemption Certificate   + Pension Credit Guarantee Credit (PCGC) – Possession of a PCGC award notice   And   * registered with a Southampton GP practice * who has a minor ailment listed in 3.2.1 * who would otherwise have visited a GP, OOH, NHS 111, Minor Injury Unit, ED or has been referred via the Community Pharmacy Consultation Service (CPCS)   3.4.2 The patient must be in attendance; the service cannot be carried out if the patient is absent. In the case of a child under 16, the parent or guardian must be in attendance, but the child being treated need not be present.  **3.5 Any acceptance and exclusion criteria and thresholds**  3.5.1 Patients will either self-refer into the service or will be referred by their GP, A & E, CPCS or other urgent care provider.  3.5.2 Patients must be registered with a GP within the Southampton area.  3.5.3 It is not a service intention to divert patients presenting in the pharmacy with a minor ailment. People who usually manage their own minor ailments through self-care and the purchase of an OTC medication should continue to self-manage and treat their minor ailments as per Essential Service 6 Support for Self-Care.  3.5.4 For patients who do not meet the service criteria, the pharmacy may provide advice and sell OTC medicines to the person to help manage the minor ailment, as described in Essential Service 6 Support for Self-Care.    **3.6 Interdependence with other services/providers**  3.6.1 The Provider shall ensure that effective and clear communication is maintained with patients and GP surgeries. |
| **4. Applicable Services Standards** |
| **4.1 Applicable national standards**  National Pharmaceutical Contractual Framework, with particular reference to Essential Services specification for Support for Self-care and Signposting.  **4.2 Applicable standards set out in Guidance and/or issued by a competent body (eg Royal Colleges)**  Standards provided by the GPhC.  **4.3 Applicable local standards**  4.3.1 The pharmacist will identify any concurrent medication or medical conditions which may affect the treatment of the patient.  4.3.2 The pharmacist will consider past medication supplied for the minor ailment to assess appropriateness of further supply.  4.3.3 There is no requirement to label the OTC product although pharmacies may wish to record the supply on the PMR in line with good practice guidelines.  4.3.4 Pharmacies and their staff are reminded of their existing obligations to comply with local and national guidance relating to child protection and safeguarding vulnerable adult procedures. |
| **5. Applicable quality requirements and CQUIN goals** |
| * 1. **Applicable quality requirements**   **5.1.1 Competency requirements to deliver the Service**  The Minor Ailments service is to be provided by a pharmacist who can meet the following Core competencies and is either already providing the Community Pharmacy Consultation Service (CPCS) **or** has completed the CPPE courses and assessments below. This is demonstrated by completion of the Declaration of Competence form for Minor Ailments on CPPE. Common clinical conditions and minor ailmentsConsultation skillsSafeguarding children and vulnerable adults Please note the additional self-assessment of core competencies – Provision of GSL, P and POM in accordance with PGD does not need to be completed.  **Core Competencies**   * Able to communicate with, counsel and advise people appropriately and effectively on minor ailments. * Able to assess the treatment needs of patients. * Able to act on referrals from, and make referrals to, other professions in healthcare and other sectors such as social care. * Able to promote the service appropriately to the public. * Able to explain the provision, range of conditions covered and features of the service to the public and other appropriate professionals. * Understands the pharmacotherapy for the full range of available medication and appropriate clinical guidance. * Able to develop the pharmacy team to support the delivery of a safe and effective service. * Each pharmacist providing the service should ensure that they can demonstrate that they have undertaken CPD relevant to this service.   **Suggested sources of information/CPD**  This CPD is not compulsory but is provided here as a guide:   * **British National Formulary** - <http://www.bnf.org/bnf/index.htm> * The **Centre for Pharmacy Postgraduate Education (CPPE),** has published a guide to be used in conjunction with the course, which provides the pharmacy context for pharmacy professionals taking the e-learning course, allowing them to apply their self-care learning to their own interactions with patients in the pharmacy and to increase awareness amongst patients and the public of the alternatives to GP appointments. NPA’s ‘Implementing a community minor ailment scheme’ is available to download from their website. - <http://www.cppe.ac.uk/default.asp> * **Clinical Knowledge Summaries –** <http://cks.nice.org.uk> * **Summary of product characteristics –** [www.medicines.org.uk](http://www.medicines.org.uk)   5.1.2 The pharmacy makes full use of the promotional material made available for the service including provision of local patient advice leaflets where applicable and those available to download and print – see section 6 Resources  5.1.3 The pharmacy reviews its standard operating procedures and the referral pathways for the service every 2 years.  5.1.4 The pharmacy can demonstrate that pharmacists and staff involved in the provision of the service have undertaken CPD relevant to this service.  5.1.5 The pharmacy participates in an annual ICB organised audit of service provision, when requested, following liaison with the CPSC.  5.1.6 The pharmacy co-operates with any locally agreed ICB-led assessment of service user experience.  **5.2 Applicable CQUIN goals (See Schedule 4 Part E)**  Not applicable  **5.3 Resources**   * Pharmacists are advised to refer to the most updated product information available (i.e. latest BNF version, Summary of Product Characteristics)   Minor Ailment Information Leaflets are available to print, if required, and patients may be directed to the follow websites:   * Patient.co.uk Health information leaflets [www.patient.co.uk](http://www.patient.co.uk) * Self Care Forum Factsheets <http://www.selfcareforum.org/fact-sheets/> * Treat Yourself better website - Not available as a leaflet but patients can be signposted to the website <http://www.treatyourselfbetter.co.uk/> |