



PHARMACY FIRST

Minor Ailment Service Specification

Locally Commissioned Community Pharmacy Service

This service is commissioned by NHS Airedale, Wharfedale and Craven (AWC) CCG to provide the local population with rapid access to a pharmacist who can give advice on, and where necessary supply medication from an agreed formulary, a range of minor ailments, releasing capacity in general practice and providing an appropriate alternative to the use of general practice or other health care environment (i.e. A&E, Out of Hours Urgent Care). The service is aimed at patients who use GP or Out of Hours services when they have a minor ailment rather than self-care or purchasing medicines over-the-counter (OTC). It is hoped that this service will change patient behaviours, educating and assisting patients in how to access self-care and the appropriate use of healthcare services.

Aims of the Pharmacy First service

- Release capacity in general practice.
- To provide the local population with rapid access to a pharmacist who can give advice on, and treat where necessary, a range of minor ailments.
- Be an appropriate alternative to the use of general practice or other health care environment (i.e. A&E, Out of Hours Urgent Care).
- Allow for improved promotion of self-care.

Objectives of the Pharmacy First service

- To provide a service to users who might have otherwise attended their GP or A&E for the treatment of minor ailments.
- To provide a service outside of normal GP opening hours to reduce the use of GP OOH services.
- To be a cost effective provider to allow for the redeployment of resources more appropriately in other parts of the wider health economy.

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1. Service Description

- 1.1. The agreement is for the pharmacy to provide advice and support, including printed information where appropriate, to people on the management of minor ailments, including where necessary, the supply of medicines for the treatment of the minor ailment.
- 1.2. Patients exempt from prescription charges will be supplied treatments free of charge.
- 1.3. For patients not exempt from prescription charges, the pharmacy may provide advice and sell OTC medicines to the person to help manage the minor ailment, as described in Essential Service 6 Self Care.
- 1.4. Only patients registered with an AWC GP are eligible to receive advice and treatment under this service. Those not registered with a GP or registered with a GP from outside the NHS AWC CCG area should, if possible, be transferred to the Pharmacy First service of a neighbouring CCG (dependent on patient registration with a qualifying GP practice) or provided with advice and purchase of OTC treatment, or referred to their own GP.
- 1.5. The pharmacy will operate a triage system, including referral to other health and social care professionals, where appropriate.
- 1.6. The patient must be in attendance (for child under 16, the parent or guardian must also be in attendance). In all other cases a consultation under the Pharmacy First service cannot be carried out.
- 1.7. It is not intended to divert patients presenting in the pharmacy with a minor ailment onto the Pharmacy First Service. People who usually manage their own minor ailments through self-care and purchase of OTC medication should continue to self-manage and treat their minor ailments as per essential service 6, self-care.

- 1.8. The Pharmacy First service is an opt-in service for patients and those who wish to consult their GP for a minor ailment are free to do so.

2. Duration

- 2.1. This agreement shall take effect for a period from 1st April 2016 to 31st March 2017.
- 2.2. Thereafter this agreement will be reviewed annually.

3. Premises

- 3.1. The pharmacist will give consideration to the part of the pharmacy used for provision of the service, which should provide a sufficient level of privacy and safety for patients accessing the service.
- 3.2. If a consultation room is available then the pharmacist can consider offering the client the option of the consultation taking place within the consultation room.

4. The Service

- 4.1. Only patients registered with a GP practice in the NHS AWC CCG area are eligible to receive advice and treatment under this service.
- 4.2. Patients will either self-refer into the service or will be referred by their GP or the OOH provider.
- 4.3. The consultation must be conducted by a pharmacist.

Consultation

- 4.4. The pharmacy will gain patient consent to share the details of the consultation with the patients GP. Patients who do not consent to sharing details cannot access the Pharmacy First service and will be transferred to usual care.
- 4.5. The pharmacist will assess the patient's condition using a structured approach to responding to symptoms.
- 4.6. If the management of the minor ailment falls outside of this service the patient can either be offered advice and purchase of OTC medicines to the person to help manage the minor ailment, as described in Essential Service 6 Self Care, or referred to their GP.
- 4.7. The pharmacist will identify any concurrent medication or medical conditions, which may affect the treatment of the patient.
- 4.8. The pharmacist will consider past medication supplied for the minor ailment to assess appropriateness of further supply.
- 4.9. The pharmacist will provide advice on the management of the condition to include the expected duration of the minor ailment and relevant self-care advice (see information to be provided section p3).
- 4.10. Where deemed to be of benefit to the patient, the pharmacy will provide a relevant information leaflet about the minor ailment.
- 4.11. The pharmacist will provide medication, only if necessary, from the formulary appropriate to the patient's condition. A consultation fee will be paid for advice only consultations.
- 4.12. The pharmacist who carried out the consultation will complete the required sections of the Pharmacy First Consultation form which will include a declaration of the advice and treatment provided.

- 4.13. Patients will complete the Pharmacy First Consultation form which includes a record of the treatment supplied, reason for prescription charge exemption, consent to sharing consultation details with their GP and CCG for fraud prevention and a prescription exemption declaration. Any information sent to the CCG will be completely anonymous and must not contain any patient identifiable information.
- 4.14. The pharmacy must check the person's eligibility for receipt of free treatment under the service in line with the usual checks for NHS Prescriptions.
- 4.15. The pharmacy will record the consultation on PharmOutcomes within 48 hours.

Information to be provided

- 4.16. Every patient who accesses the service will be provided with oral advice and printed information sheet(s) relevant to their minor ailment. This information will be supplied whether treatment is supplied or not.
- 4.17. Patients with limited literacy skills in English will be supplied with an easy read version of the leaflet where this is available. If an easy read version or printed information is not available in a language suitable for the patient the usual patient leaflet should be provided (to back up the verbal information given) and the patient advised to ask a family member / Carer to help them read the information. Only if the patient, carer and family members are unlikely to be able to read or understand the information, can printed information not be supplied.
- 4.18. The oral advice will include self-care messages, expected symptoms, the probable duration of symptoms and when and where to go for further advice/ treatment if needed.
- 4.19. Patients should also be informed that the product supplied can be purchased over-the-counter from any pharmacy.
- 4.20. Where the minor ailment is for an upper respiratory tract infection (including cough, cold, runny nose, earache) antibiotic stewardship advice and leaflet will be provided.
- 4.21. Where appropriate patients presenting with a cough may be issued with the Pharmacy First self-care of coughs information leaflet/ sheet.
- 4.22. The agreed information leaflets will be downloaded and printed by the pharmacy.

Supply of medication

- 4.23. Only medicines from the AWC Pharmacy First formulary will be used, as specified in the formulary (p5). These products can be used for any of their licensed indications at licensed doses. The pharmacist is professionally accountable for the treatment decisions made.

Records

- 4.24. The pharmacy will maintain a record of the consultation and any medicine that is supplied. This will be recorded on PharmOutcomes and the Pharmacy First Consultation form.
- 4.25. Details of the consultation will be sent to the patient's GP via the email reporting function within PharmOutcomes.

- 4.26. The paper consultation records will be kept in the pharmacy for 6 months to allow for Post Payment Verification checks to be carried out by the CCG.
- 4.27. The record on PharmOutcomes will be the enduring record of the consultation.
- 4.28. There is no requirement to label the product although pharmacies may wish to record the supply on the PMR in line with good practice.

Referral procedures

Referral for urgent appointment

- 4.29. If the patient presents with symptoms indicating the need for an immediate consultation with the GP, the pharmacist should advise the patient and refer the patient back to their GP (within surgery hours) or to contact the Out Of Hours Service, or advise the patient to attend A & E immediately (as appropriate).
- 4.30. The pharmacy should contact the patients GP / Out of Hours service and arrange an appointment for the patient.
- 4.31. This process should only be used when referral is deemed urgent, e.g. a red flag symptom.

Referral for non-urgent appointment

- 4.32. If the patient presents with symptoms indicating the need for a non-urgent consultation with the GP, the pharmacist should advise the patient and refer the patient back to their GP. The pharmacy should not contact the GP surgery to arrange an appointment for the patient.
- 4.33. 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.
- 4.34. If the patient presents with symptoms outside the Pharmacy First service the patient should be treated in line with usual practice.
- 4.35. If the pharmacist suspects that the service is being misused/ abused they should alert the Pharmacy First Scheme Co-ordinator.
- 4.36. The pharmacist should use their clinical judgement to decide the urgency, route and need for referral as they are professionally accountable for their actions.
- 4.37. When referring patients to their GP practice, pharmacists should not give patients the expectation of any specific treatment i.e. antibiotics or length of time until patients can expect GP appointment (unless booked directly by pharmacy).

5. Formulary

- 5.1. The pharmacy will hold adequate stocks (taking into consideration the possibility of an unexpected increase in demand) of the products required for the Pharmacy First service to ensure that clients can immediately access the necessary treatment.
- 5.2. The formulary products can be used for any of their licensed indications at licensed doses. The pharmacist is professionally accountable for the treatment decisions made.

Airedale, Wharfedale and Craven CCG Pharmacy First Formulary
Beclometasone 50 mcg nasal spray (200 sprays)
Cetirizine solution 5mg/5ml (200ml) SF
Cetirizine 10mg tablets (30)
Chlorphenamine Tablets 4 mg (30)

Airedale, Wharfedale and Craven CCG Pharmacy First Formulary
Clotrimazole 500mg pessary (1)
Clotrimazole cream 1% (20g)
Ephedrine 0.5% nasal drops (10ml)
Fluconazole 150 mg Cap (1)
Ibuprofen suspension 100mg/5ml (100ml) SF
Ibuprofen tablets 200mg (24)
Ibuprofen tablets 400mg (24)
Lidocaine alone or with Cetalkonium /Cetylpyridiniumteething gel (10/15g)
Loratadine syrup 5mg/5ml (100ml)
Loratadine 10mg tablets (30)
Mebendazole suspension (30ml)
Mebendazole 100mg tablet (1)
Mebendazole 100mg tablet (4)
Miconazole 2% cream (30g)
Paracetamol 500 mg Tablets (32)
Paracetamol soluble tabs 500mg (24)
ParacetamolSusp SF 120 mg / 5 ml (100ml) SF
ParacetamolSusp SF 250 mg / 5 ml (100ml) SF
Sodium chloride 0.9% nasal drops (10ml)
NB: This formulary may be amended as the service develops / new products are available. Reference should be made to the up-to-date formulary and costs hosted on www.cpwv.org .

- 5.3. Pharmacists can supply any brand of product as long as the active ingredients are the same and pack size is at least the size specified above (i.e. larger packs can be supplied).
- 5.4. Packs supplied by the pharmacy must not be a POM pack.
- 5.5. Each product must be supplied with a corresponding Patient Information Leaflet.
- 5.6. Reimbursement will only be made at the price listed in the formulary. This price will be based on Drug Tariff, Chemist and Druggist cost price or wholesaler's list price. A list of drugs and current prices will be published at www.cpwv.org. If pharmacies cannot get a specific medicine at stated reimbursement price they should inform the point of contact for the service.
- 5.7. Reimbursement for products will be inclusive of VAT. As a professional service the consultation fee will be zero rated VAT.

6. Conditions

- 6.1. The following conditions will be promoted to patients as being within the Pharmacy First service.

Cough	Cold
Sore throat	Threadworms
Athletes foot	Thrush
Fever	Blocked nose
Earache	Hay fever
Teething	Sprain or Strain

- 6.2. The formulary products can be used for any of their licensed indications at licensed doses pharmacists and therefore pharmacists can also treat: self-limiting pain, fungal infections (Ringworm, Candida interigo), headache (list not exhaustive).

7. Accessibility

- 7.1. The service must be available throughout the pharmacy's opening hours (both core and supplementary) on all days that the pharmacy is open.
- 7.2. If the pharmacy is unable to meet this level of service delivery then they must inform the service commissioner within NHS AWC CCG.
- 7.3. If due to unforeseen circumstances the pharmacy is unable to provide the service, the pharmacy should signpost patients to another pharmacy (convenient to the patient) who are able to provide the service to the patient. The pharmacy should ensure that the pharmacy to which the patient is being signposted is able to provide the service by phoning the pharmacy to check before the patient leaves the pharmacy.
- 7.4. Instances where a patient is signposted to another pharmacy because the Pharmacy First service is not available should be reported as an incident to NHS AWC CCG.

8. Payment

- 8.1. Remuneration will be made to the pharmacy at £4.50 per consultation to include;
- Set up costs (SOP development, staff training etc)
 - Pharmacist time to provide the service
 - Associated staff time to support the pharmacist in providing the service
 - Printing and providing information sheets
 - Completing claim forms and audit
- 8.2. Treatments supplied will be reimbursed as per the formulary plus VAT.
- 8.3. Payments will be made based on the information recorded on PharmOutcomes.
- 8.4. Payment will be made to pharmacies on a monthly basis.
- 8.5. Pharmacists must record information onto PharmOutcomes within 48 hours of the consultation. Consultations recorded onto PharmOutcomes over 48 hours may not be paid. Claims submitted which relate to provisions over 1 month old will not be paid.
- 8.6. Pharmacy First consultation forms are not to be sent to the CCG as part of the claim for payment as they contain patient identifiable information. The pharmacy must retain the Pharmacy First Consultation forms in line with the NHS guidance for record retention for at least 6 months following the consultation. The CCG may periodically request copies of the forms for specific months as part of their Post Payment Verification process. Any information supplied to the CCG must be anonymised and not contain any patient identifiable information.

9. Staff

- 9.1. The Pharmacy First Service can only be provided by a pharmacist who has demonstrated they are competent to provide a minor ailment service by completing the Minor Ailment Declaration of Competence self-assessment and declaration statement available at www.cppe.ac.uk

Core Competencies

- Able to communicate with, counsel and advise people appropriately and effectively on minor ailments.

- Able to assess the medication 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

10. Duty of pharmacy contractors

- 10.1. The pharmacy contractor has a duty to ensure that pharmacists and staff involved in the provision of the service are competent to deliver the service, have relevant knowledge and are appropriately trained in the operation of the service.
- 10.2. The pharmacy contractor must hold evidence of competency to provide the service for each pharmacist who conducts Pharmacy First consultations (i.e. retain copies of the Declaration of Competence declarations for each pharmacist) and make these available to the commissioner on their request.
- 10.3. 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.
- 10.4. The pharmacy should maintain appropriate records to ensure effective ongoing service delivery and audit.

11. Commissioner responsibilities

- 11.1. NHS CCG will provide the funding for PharmOutcomes for the recording of relevant service information for the purposes of audit and the claiming of payment.
- 11.2. NHS CCG 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.
- 11.3. NHS CCG will need to provide details of relevant referral points which pharmacy staff can use to signpost service users who require further assistance.
- 11.4. When relevant, the CCG will obtain or produce health promotion material relevant to the service users and make this available to pharmacies. This will be provided to pharmacies to be used in addition to the information sheet printed and provided to by the pharmacy. Topics are likely to include use of antibiotics.

12. Quality Indicators

- 12.1. The pharmacy is making full use of the promotional material made available for the service.
- 12.2. The pharmacy has appropriate health promotion and self-care material available for the user group and promotes its uptake.
- 12.3. The pharmacy reviews its standard operating procedures and the referral pathways for the service on an annual basis.
- 12.4. The pharmacy can demonstrate that pharmacists and staff involved in the provision of the service have undertaken CPD relevant to this service.
- 12.5. The pharmacy participates in an annual CCG organised, LPC agreed, audit of service provision.

- 12.6. The pharmacy co-operates with any locally agreed CCG assessment, which has been agreed with the LPC, of service user experience.

13. Governance

- 13.1. The Pharmacy will effectively manage any complaints using the Pharmacy own internal complaints procedures which must be consistent with the NHS' and Local Authority Social Services and National Health Service Complaints (England) Regulations.
- 13.2. Additionally the pharmacy will inform the CCG of any complaint relating to the Pharmacy First Service.
- 13.3. The Pharmacy will manage any incidents in line with the requirements of the NHS Contractual Framework for community pharmacy.
- 13.4. Additionally, the Pharmacy will directly report any incidents relating to the service to the CCG. This should be done using the CCG incident reporting form a copy of which can be found at Appendix 1. The Pharmacy will identify themselves on the paperwork (ie the incident will not be submitted anonymously). In response to incidents or near-misses the pharmacy must will reflect on current practice and, if appropriate, implement changes to reduce the risk of a similar event and improving the quality of care provided. The Pharmacy will consider and respond to the recommendations arising from any audit, Serious Untoward Incident report or Patient Safety Incident report produced by the CCG.
- 13.5. The pharmacy consents to the sharing of anonymised service activity data with the commissioner and Community Pharmacy West Yorkshire for the purpose of auditing the quality of the service, evaluating the service and making service payments.

14. Safeguarding

- 14.1. Pharmacies and their staff are reminded of their existing obligations to comply with local and national guidance relating to child protection procedures.
- 14.2. When dealing with all patients' pharmacy staff have a responsibility to consider if there is a potential safeguarding issue.
- 14.3. The provider shall comply with all relevant standards contained within the commissioners' policy for safeguarding children and adults (Commissioning policy and provider requirements). These include maintaining clear governance arrangements in relation to; reviewing the services safeguarding performance, ensuring staff training and development appropriate to their role and responsibility and having effective organisational policies and procedures in relation to safeguarding children and adults.
- 14.4. The provider shall actively work to protect service users and their families from abuse and ensure that local multiagency safeguarding procedures are followed where there are any concerns of abuse in relation to any children or adults.
- 14.5. The provider shall comply with any reasonable request for additional information and assurance in order to monitor compliance against these standards.

15. Confidential information

- 15.1. The pharmacy will ensure that the storage of patient records/ paperwork containing patient details is as outlined in the NHS code of practice for records management and associated guidance. Equipment used to store records should provide storage that is safe and secure from unauthorised access and which meets health and safety, and fire

regulations, but which also allow maximum accessibility of the information commensurate with its frequency of use.

- 15.2. The pharmacy will treat as confidential and restrict access to records and documents containing information relating to individual patients managed under the terms of the service to personnel authorised to participate in the service and, in the appropriate circumstances, other health care professionals and agencies, in line with local confidentiality arrangements, including where appropriate, the need for the permission of the client to share the information.
- 15.3. All parties will comply with the Data Protection Act, Caldicott and other legislation covering access to confidential client information. The requirement for confidentiality will be balanced with the needs of the service user.

16. Termination

- 16.1. Either party may terminate the agreement subject to providing three months' notice in writing.
- 16.2. The Commissioner shall be entitled (without prejudice to our rights and remedies for any breach of this agreement and without prejudice to any continuing obligations you have under this agreement) to terminate this agreement immediately if the Provider seriously breaches the terms of this agreement including by any act or omission which prejudicially affects or is likely so to affect the interests of the Commissioner.

**Airedale, Wharfedale and Craven
Clinical Commissioning Group**

Appendix 1- Local Enhanced Services Quality Incident and Complaints form

Provider Name	
LES Title	<i>Pharmacy First</i>
Pick Tick	Description of incident/complaint
Incident <input type="checkbox"/>	
Complaint <input type="checkbox"/>	
Date of incident/complaint	
	Actions taken
Key contact person and designation	

Please return to AWCCCG.Quality@nhs.net within 14 working days of incident/complaint occurrence.



Service Specification Agreement

This document constitutes the agreement of the pharmacy in regards to the delivery of the Airedale, Wharfedale and Craven (AWC) CCG Locally Commissioned Pharmacy First Minor Ailments Service.

Please tick

The pharmacy **agrees** to provide the Pharmacy First Service in accordance with the service specification

and

The pharmacy consents to the sharing and processing of service activity data with AWC CCG and Community Pharmacy West Yorkshire for the purpose of evaluating the service and making service payments

Pharmacy name:		
Address:		
Postcode:	Telephone No:	OCS code: F
Email:		

The above named pharmacy will undertake this Local Service in accordance with the service aims and requirements as set out in the service specification.

This agreement will be in force from 1st April 2016 to 31st March 2017.

Signature on behalf of the Pharmacy:

Please ensure you follow your company's process for signing of contracts and agreements.

Signature	Name	Date
	GPhC No	

Signature on behalf of the Commissioner:

Signature	Name	Date

Please return to:

Freepost RSXK-TTAT-BXGU Community Pharmacy West Yorkshire Brooklands Court, Carr Moor Side Leeds LS11 5HL (No postage required)	By Fax on: 0113 341 0351 By Email to: info@cpwy.org
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