

**Pharmacy First Service for:  
Winter Ailments: Sore throat &  
Common cold  
November 2020 – March 2021**

**Service Specification**

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## Background

Many GP consultations are for conditions that could potentially be self-managed. These common conditions are often self-limiting and require little or no medical intervention. Many people who consult GPs for common conditions could be dealt with effectively by a community pharmacist. Pharmacists are trained to deal with common conditions; offering advice, recommending over-the-counter (OTC) products or referring patients to other healthcare professionals as appropriate.

A Pharmacy First Service is a service whereby patients are encouraged to consult with a participating community pharmacy rather than their GP for a defined list of common conditions. The pharmacist will give advice and (if appropriate) supply medication from an agreed formulary or refer the patient to the GP if necessary. Medicines, when deemed necessary, are supplied free of charge.

Research from the Proprietary Association of Great Britain (PAGB) shows that up to 40% of GP time is taken dealing with patients suffering from common ailments.

The Pharmacy First Service has been provided by community pharmacies in Northern Ireland since November 2018 when it was introduced to manage “Sore throats, colds and flu-like illnesses” over the winter period.

For winter 2020 – 2021 changes to how the Pharmacy First Service is delivered are required due to the ongoing COVID 19 pandemic.

From 2<sup>nd</sup> November 2020 the Pharmacy First Service will commence for the management of Winter Ailments: Sore Throat and Common Cold and for the remote management of COVID symptoms.

The management of these conditions will continue until 31<sup>st</sup> March 2021. *Note: this date may be subject to change as the pandemic continues.*

## 1. Service Aim and Objectives

The aim of the Pharmacy First Service is to displace activity, including consultations, advice and generating prescriptions for common conditions, from general practice to a community pharmacy based service.

The objectives of the service are to:

- Reduce prescribing for sore throat and common cold and reduce the number of general practice consultations for these conditions.
- Support the cost-effective use of medicines and health service resources in primary care.
- Provide advice remotely to patients with COVID symptoms
- Promote the role of the community pharmacist as the first port of call for the management of these conditions.

### • Service Description

The Pharmacy First Service allows eligible patients to use their community pharmacy as the first port of call for the management of winter ailments: sore throat and common cold and for the remote management of COVID symptoms. The pharmacist offers advice, treats or refers patients according to their needs.

The Pharmacy First Service is available to any person registered with a GP in Northern Ireland.

Each Pharmacy First consultation must be carried out by an appropriately trained pharmacist.

The consultation may take place by phone, video conference or in person in the pharmacy at the discretion of the pharmacist.

### • Service Outline

#### 3.1 Eligibility for service

The following persons are **eligible** for the service:

- Persons who are registered with a GP in Northern Ireland

The following persons are **not eligible** for the service:

- Temporary residents
- Patients in Care Homes (Nursing or Residential).

### **3.2 Pharmacy Eligibility for service**

The service can only be provided from community pharmacies where the contractor:

- Holds a contract with the HSCB to deliver the service.
- Ensures staff are trained, competent and available to deliver the service.
- Ensures a Standard Operating Procedure (SOP) is in place to support delivery of the service in line with the service specification.

### **3.3 Patient consent**

- Before the consultation the pharmacist must give patients sufficient information to inform consent to avail of the service.
- A privacy notice should be used to explain to the patient how their personal data will be used and a copy supplied if requested.
- The pharmacist will seek verbal consent from the patient. In the interest of health and safety and infection control there is no requirement for patients to sign.

### **3.4 Pharmacy First Consultations**

Prior to the COVID 19 pandemic the service specification required patients to present in the pharmacy for a consultation with the pharmacist. The service specification has now been updated to include the use of **telephone or video consultations**. This update is being introduced to take into account the needs of:

- vulnerable members of the community;
- patients who are continuing to shield;

- patients who are isolating due to symptoms of coronavirus, confirmed diagnosis of coronavirus, household contact or on advice from NI Test and Trace Service.

All consultations carried out by video call should take place via the Pharmacy's HSC Zoom account as this enables the most appropriate security settings to be applied to all HSC users of Zoom. Details of how to apply for a HSC Zoom account can be found at <http://www.hscbusiness.hscni.net/services/3154.htm>

**Patients with symptoms of COVID 19 should not present to the pharmacy**

Advice should be provided to these patients using the service flowchart and COVID<sub>19</sub> advice sheet

Symptomatic patients should be advised to book a coronavirus test via the GOV.UK website at <https://www.gov.uk/get-coronavirus-test> or by calling 119. Symptoms include:

- High temperature
- New continuous Cough
- Loss of taste or smell

Care provided through the service includes the assessment, advice and treatment of symptoms of winter ailments: sore throat and common cold.

All patients are assessed by a pharmacist who considers the most appropriate course of action. This might involve the provision of advice and reassurance alone, or the provision of advice and reassurance alongside medicines which alleviate symptoms. In some cases the pharmacist may consider that referral to another healthcare professional is indicated.

Occasionally someone will present/call on behalf of someone else, for example a parent or guardian might present/call with a child or a carer might present/call on behalf of someone they care for.

The pharmacist assesses the symptoms in order to determine the cause and severity of the ailment. Having done so they will advise the individual (or their parent, guardian or carer) on the nature of the ailment, the symptoms to

expect, the expected duration of the ailment, any requirement for follow up and any steps that can be taken to alleviate the symptoms. Importantly individuals will also be advised on how they might care for themselves should the ailment recur. Relevant patient information leaflet(s) may be provided to the patient.

On occasion a pharmacist will decide that an individual's symptoms are such that a supply of medicine(s) is indicated. Where this is the case the medicine(s) should be selected from the agreed formulary. Where an individual expresses a preference for a product which is not included in the agreed formulary and the pharmacist considers that such a supply is appropriate the pharmacist is able to sell the patient that product and the consultation shall still be considered to be within the terms of service provided that a record of the consultation is made.

Where a medicine is supplied it shall be appropriately labelled and the pharmacist shall counsel the individual regarding its safe and effective use. Products will not be supplied to patients displaying COVID symptoms.

Pharmacists must ensure medicines supplied comply with current good practice guidelines e.g. Pharmaceutical Society guidance available at:

<http://www.psn.org.uk/publications/code-of-ethics-and-standards/>

MHRA Drug Safety Advice <https://www.gov.uk/drug-safety-update>

Pack/product updates and individual SPCs available at <https://www.medicines.org.uk/emc/>

Where supply of medicine and / or written patient information is indicated for a patient following a telephone or video consultation, arrangements for collection of these items must be agreed between the pharmacist and the individual.

Local arrangements should be in place for dealing appropriately with individuals requiring referral. This could be supported with written or verbal referral requests. Individuals may be advised to refer themselves to their GP where despite treatment their ailment does not improve.

### **3.5 Pharmacy First records**

- A record of every consultation must be made on the monthly record form on the date of the consultation
- A copy of all the monitoring forms relating to the previous month must be scanned and emailed to HSCB local office on the date of the second monthly prescription submission.
- All records must be retained in the pharmacy in line with the DOH Good Management, Good Records guidelines<sup>1</sup>
- On occasion where a patient **requires referral to their GP or OOH medical centre** details of the consultation should be securely transferred in line with locally agreed arrangements

### **3.6 Completion of the pharmacy voucher**

- When medication is supplied the pharmacist must complete and sign the pharmacy voucher at the time of the consultation.
- The pharmacy voucher should be accurately coded for any medicine(s) supplied using the usual product codes from the [NI code book](#)
- The pharmacy voucher must also be coded with the Pharmacy First code **97003/1**
- Pharmacy vouchers must be bundled separately from HS21 prescription forms and forwarded to BSO with the second monthly prescription submission.

- **Formulary**

The Pharmacy First Formulary includes and is limited to:

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<sup>1</sup> Department of Health's Good Management, Good Records Section M, outlines the requirements for retention and disposal of community pharmacy held records: <https://www.health-ni.gov.uk/articles/disposal-schedule-section-m>

Paracetamol 120mg in 5ml sugar-free suspension x <b>100ml</b>
Paracetamol 250mg in 5ml sugar-free suspension x <b>200ml</b>
Paracetamol 500mg tablets x <b>32</b>
Ibuprofen 100mg in 5ml sugar-free suspension x <b>100ml</b>
Ibuprofen 200 mg tablets x <b>24</b>
Ibuprofen 400 mg tablets x <b>24</b>
Pseudoephedrine 30mg/5ml linctus x <b>100ml</b>
Pseudoephedrine 60mg tablets x <b>12</b>
Sodium chloride 0.9% nasal drops x <b>10ml</b>

- **Premises**

Pharmacies participating in the Pharmacy First Service must have a consultation area that meets the following requirements:

- The consultation area should be where both the patient and pharmacist can sit down together; where possible social distancing requirements should be maintained.
- The patient and pharmacist should be able to talk at normal speaking volumes without being overheard by another person (including pharmacy staff).
- PPE should be used in line with the most up-to-date government advice available at:  
<https://www.gov.uk/government/publications/personal-protective-equipment-ppe-illustrated-guide-for-community-and-social-care-settings>
- The consultation area should be clearly designated as an area for confidential consultations, distinct from the general public areas of the pharmacy.

- **Pharmacists**

The service may only be provided by registered pharmacists who are competent to deliver the service in line with the service specification.

- **Remuneration and reimbursement**

7.1 Remuneration for service provision will be based on a capitation model and any products supplied via PV1 forms will be reimbursed by BSO in the usual manner. Initial funding of £200k per month has been made available to set up and deliver this service from 2<sup>nd</sup> November 2020. The funding covers both the service fees and the cost of products supplied. Service funding will be allocated to pharmacies, contracted to provide the service, on the following basis:

- One third divided equally amongst contractors
- The remaining two thirds to be allocated on prescribing volume, based on 19/20 dispensing data.

7.2 Service monitoring will comprise of the following two elements:

- PV1 forms submitted to BSO
- Monthly monitoring form which should be completed for every patient and returned by email to the local HSCB office on a monthly basis.

7.3 Post payment verification

- The pharmacy contractor will be required to submit all records requested by HSCB in relation to the Pharmacy First Service within 14 days of receipt of the request.
- The pharmacy contractor is required to co-operate on a timely basis in respect of any review or investigation being undertaken by HSCB / BSO regarding the Pharmacy First Service.
- In the event where HSCB / BSO cannot assure claims relating to the provision of the Pharmacy First Service recovery of the payment will be sought.

#### • **Other terms and conditions**

- The pharmacy contractor shall not publicise the availability of the service other than using any materials specifically provided by the HSCB other than with the prior agreement of the HSCB or in any way which is inconsistent with the professional nature of the service.
- The pharmacy contractor shall not give, promise or offer to any person any gift or reward as an inducement to or in consideration of his/her registration with the service.
- The pharmacy contractor shall not give, promise or offer to any person engaged or employed by him any gift or reward or set

targets, against which that person will be measured, to recruit patients to the service.

- The pharmacy contractor shall ensure that service provision is in accordance with professional standards.