



Clinical Community Pharmacy Service: Common Ailments

Service specification for the Common Ailments element of the Clinical Community Pharmacy Service in Wales

Authors

Name	Role
Jason Carroll	Community Pharmacy Lead (CTMUHB)

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1	First approved version	21 Feb 2022

1. INTERPRETATION

- 1.1. The definitions set out in The Pharmaceutical Services (Clinical Services) (Wales) Directions 2022 (or subsequent iterations of this document) apply to this specification.
- 1.2. “CCPS” means the Clinical Community Pharmacy Service, or one of the component services included within it.
- 1.3. “GP Practice” means a provider of GMS contract essential services.
- 1.4. “Local Health Board” (LHB) means the Local Health Board that the pharmacy in which the service is being provided is located.
- 1.5. “National Extended Services Management Board” (NESMB) means the Board established by LHBs to facilitate national discussion around community pharmacy extended services. In the event that the name of this board changes, this definition will be taken to mean the replacement board.
- 1.6. “Patient” means any person in receipt of the service.
- 1.7. “Pharmacist” means a person registered in Part 1 of the GPhC register or in the register maintained under Articles 6 and 9 of the Pharmacy (Northern Ireland) Order 1976.
- 1.8. “Pharmacist Independent Prescriber” means a Pharmacist who is listed in the NHS Wales approved list of Pharmacist Independent Prescribers.
- 1.9. “Pharmacy” means any premises included on a health board pharmaceutical list where a pharmacist provides drugs or services as part of pharmaceutical services.
- 1.10. “Pharmacy Contractor” (or “Contractor”) means a person lawfully conducting a retail pharmacy business.

2. SCOPE

- 2.1. This service specification relates to provision of the Common Ailments Service, the underlying purpose of which is for the registered pharmacist to provide advice and support to eligible patients complaining of a common ailment, and where appropriate, to supply drugs to them for the treatment of the common ailment.

3. AIMS

- 3.1. To deliver prudent healthcare using a ‘community pharmacy first’ model of care, by reducing the number of patients, who can be appropriately managed in the community pharmacy setting, from consulting their GP or other health services provider.

4. OUTCOMES

- 4.1. Greater access to advice and appropriate treatment for patients with common ailments.
- 4.2. Reduction in demand for consultations associated with common ailments, in general practice and other health care service providers.

5. SERVICE OUTLINE

- 5.1. All care shall be as part of NHS Wales and shall be made at no cost to patients.

Patient Eligibility

This service is available to:

- 5.2. Patients resident (including temporary residents), or registered with a GP practice located, in Wales.
- 5.3. Patients can self-refer to the service or be referred to the service by another healthcare provider.
- 5.4. Patients should present with symptoms indicative of a condition listed in the current edition of the NHS Wales Common Ailments Service Formulary developed by the All Wales Medicines Strategy Group (<http://cas.inform.wales.nhs.uk/IndexAMG.aspx>)
- 5.7. The pharmacy will offer a user-friendly, non-judgmental, patient-centred, and confidential service.
- 5.8. Where presenting symptoms or circumstances indicate a problem that is outside of the scope of this service, the pharmacist will refer patients to an appropriate service provider
- 5.9. The pharmacist/pharmacy will have relationships with other appropriate service providers such that patients with ongoing needs can be referred effectively.
- 5.10. All care provided to patient who are less than 16 years of age shall be offered in accordance with Fraser guidance and any other relevant guidance issued by the Welsh Assembly Government.

CAS Patient Registration

- 5.11. Individuals who are eligible for the service must register with a community pharmacy of their choice in order to receive advice and treatment under CAS.
- 5.12. Patients (or if under 16, their representative) wishing to register with a community pharmacy must read and understand the *Choose Pharmacy Information Governance leaflet* before the pharmacist attempts to register them.

- 5.13. Individuals may register with only one pharmacy at any one time.
- 5.14. Individuals may transfer to another pharmacy at any time. Where they choose to do so, the patient will be required to register with the (new) pharmacy.
- 5.15. Registering at a (new) pharmacy will automatically withdraw the individual from the pharmacy where they were previously registered for CAS.
- 5.16. Where an individual is registered with a pharmacy for CAS and has not accessed the service for a period of 12 months, they shall cease to be registered with that pharmacy. Where this occurs, individuals may choose to re-register with that pharmacy or another pharmacy at the time they need to access the service and provided that they remain eligible to access the service.
- 5.17. Registration may only be undertaken when the service is required i.e. when an individual is seeking advice or treatment. A pharmacy may not register a patient in advance of them requiring the service.
- 5.18. Each individual must be registered by performing an NHS patient demographic database trace using patient details (name, address, date of birth etc.) and their record annotated to confirm that they have consented to the service terms and conditions asset out in the *Choose Pharmacy Information Governance leaflet*.
- 5.19. Pharmacists may request individuals wishing to register with CAS to provide evidence of their identity, unless the patient is known to the pharmacist. Pharmacists should use their professional discretion if a patient requesting the service cannot provide ID.
- 5.20. If a child is registered by an adult, the identity of the adult should be confirmed. Registration should only occur where the adult has parental responsibility for the child or authorisation from a person with parental responsibility.

CAS Consultations

- 5.22. Care provided through CAS includes the presentation, assessment and treatment of symptoms typical of common ailments.
- 5.23. All patients should be assessed by a pharmacist who would then consider the most appropriate course of action. This may include:
 - 5.23.1. the provision of advice and reassurance alone; or
 - 5.23.2. the provision of advice and reassurance alongside medicines which alleviate symptoms where the ailment is self-limiting, or address the underlying cause of illness; or
 - 5.23.3. referral to a more appropriate healthcare professional where indicated.

- 5.24. Individuals should usually present themselves with symptoms seeking advice and/or treatment. Occasionally someone will present on behalf of someone else, for example a parent or guardian may present with child or a carer may present with someone they care for.
- 5.25. When conducting consultations, patients must be offered a chaperone in line with the pharmacy contractor's Chaperone Policy.
- 5.26. The pharmacist should assess the symptoms in order to determine the cause and severity of the presenting ailment. Having done so they will advise the individual (or their parent, guardian or carer) of:
 - 5.26.1. the nature of the ailment
 - 5.26.2. what symptoms related to the ailment they should expect
 - 5.26.3. any requirement for follow up, and
 - 5.26.4. any steps that can be taken to alleviate the symptoms.
- 5.27. Individuals should be advised on how they might care for themselves should the ailment reoccur.
- 5.28. 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 national CAS formulary.
- 5.29. Where an individual expresses a preference for a product which is not included in the CAS formulary and the pharmacist considers that such a supply would be appropriate, the pharmacist may sell the patient that product and the consultation shall still be considered to be within the terms of CAS provided that a record of the consultation is made.
- 5.30. Where a medicine is supplied it shall be appropriately labelled and the pharmacist shall counsel the individual regarding its safe and effective use.
- 5.31. Where a referral is indicated, this may 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.
- 5.32. Details of all CAS consultations should be recorded immediately, using the Choose Pharmacy Common Ailments Service module, regardless of whether or not a medicine is supplied. Where the Choose Pharmacy Common Ailments Service is temporarily unavailable (e.g. for planned maintenance) details of the consultation should be recorded on paper forms and transferred to the Common Ailments module retrospectively.
- 5.33. Unless otherwise agreed by the health board, details of medication supplied to a patient following a CAS consultation should be forwarded within 5 working days to the person with whom the patient is registered for General Medical Services.

CAS Formulary

- 5.34. The formulary available to the pharmacist includes selected Pharmacy (P) and General Sales List (GSL) and Prescription Only (POM) medicines and appliances from Part VIIIA and Part IXA of the Drug Tariff. The formulary can be accessed via the Choose Pharmacy application or via the following link <http://cas.inform.wales.nhs.uk/IndexAMG.aspx>

6. PROVIDER RESPONSIBILITIES

Contractors

- 6.1. Contractors wishing to provide this service will indicate this through submission of a Premises Listing Form to the NHS Wales Shared Services Partnership
- 6.2. Other than with the agreement of their Local Health Board, the contractor shall ensure that the service is provided from a consultation area which:
 - 6.2.1. Must be a clearly designated area for confidential discussion which is distinct from the general public areas of the pharmacy;
 - 6.2.2. Must be an area where both the patient receiving the service and the registered pharmacist can sit down together and talk at normal speaking volumes without being overheard by other visitors to the pharmacy or by any other person, including pharmacy staff;
 - 6.2.3. Must be an area which ensures the dignity and privacy of the patient is maintained;
- 6.3. Where clinically appropriate, the service may be provided remotely to a patient, via a telephone or video consultation conducted by the pharmacist.
- 6.4. The contractor must ensure that appropriate infection prevention and control policies are in place, including cleaning between patients, where appropriate.
- 6.5. The contractor shall ensure that appropriate indemnity arrangements are in place for registered pharmacists, registered pharmacy technicians and support staff providing the service;
- 6.6. The pharmacy contractor shall ensure that a standard operating procedure is in place at the pharmacy for the provision of CAS.
- 6.7. The contractor shall ensure that neither the standard operating procedure nor any guidance or instruction issued to pharmacists working at the pharmacy in anyway contradicts the pharmacists' professional responsibility to determine whether on any occasion to supply a medicine;
- 6.8. The contractor shall not give, promise or offer to any person any gift or reward as an inducement to or in consideration of his registration with the service.

- 6.9. The 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.
- 6.10. All support staff shall be fully informed and suitably trained in relation to their involvement in the service which may include the provision of any part of the service provided on behalf of a pharmacist, provided that they are competent and it is legal for them to do so. In this context, staff shall include any person or persons employed or engaged by the contractor, to provide any part of the service;
- 6.11. The contractor shall have awareness of, and ensure the service is provided in accordance with any relevant nationally or locally agreed standards;
- 6.12. The contractor shall ensure that all standards required by the General Pharmaceutical Council, so far as they relate to pharmacy owners and superintendent pharmacists, are met;
- 6.13. The contractor shall have appropriate arrangements in place to maintain service continuity and take all reasonable steps to ensure that patients are able to access this service in the event of unforeseen closure of the pharmacy;
- 6.14. The contractor shall notify the relevant Local Health Board, of circumstances which result in the temporary unavailability of the service;
- 6.15. The contractor shall participate in any reasonable publicity of the availability of the service required by the Local Health Board and shall not publicise the availability of the service other than with the agreement of the Local Health Board;
- 6.16. The contractor shall participate in any reasonable review of the service required by the Local Health Board including the reporting of any incidents to the Medical Director of the relevant Local Health Board.
- 6.17. The contractor shall ensure that the service is provided only by registered pharmacists who meet the requirements specified in 6.18

Providers

- 6.18. Registered pharmacists shall ensure that they:
 - 6.18.1. Have a Choose Pharmacy username and access to the Common Ailments module
 - 6.18.2. Have completed Safeguarding Children level 2 training within the previous three years;
 - 6.18.3. Have successfully completed a Disclosure and Barring Service (DBS) check request form which is to be processed through by the Disclosure and Barring Service; and

- 6.18.4. have their name included in the All Wales Pharmacy Database for the service.
- 6.19. Registered pharmacists shall sign a copy of the PGDs at each pharmacy from which they provide the service.
- 6.20. Registered pharmacists providing the service shall have indemnity insurance covering the provision of the service;
- 6.21. Pharmacists shall ensure that their practice complies with all relevant standards required by the General Pharmaceutical Council