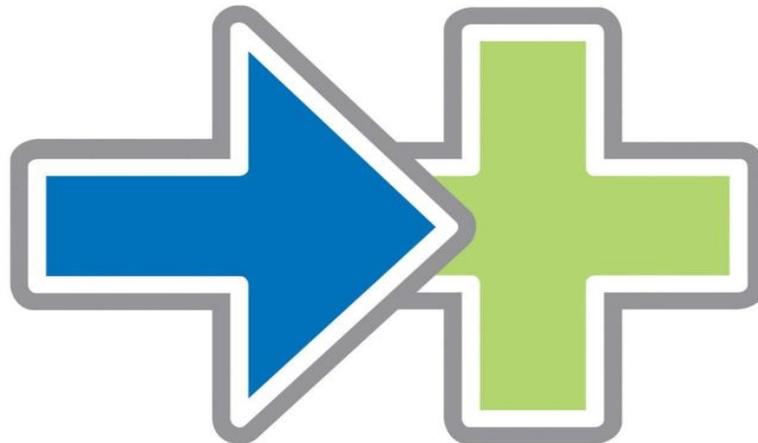




Health and Social  
Care Board

**COMMUNITY PHARMACY  
MINOR AILMENTS SERVICE**

SUPPORTING SELF-CARE



Reviewed January 2019

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## 1. Introduction

Research has shown that GPs can spend up to 40% of their working day dealing with minor ailments. Whilst this may be entirely appropriate for some patients, for the majority it is an inconvenient and inefficient way of getting help for these conditions.

Pharmacies are well placed within communities and are essentially an 'open door' to the Health Service offering free independent health advice without the need for an appointment. One of the services that community pharmacists are trained to provide is the treatment of minor ailments. When a patient presents at a pharmacy with symptoms of a minor ailment, the pharmacist establishes if the symptoms are indeed minor in which case the pharmacist can offer advice and, if necessary, recommend appropriate treatment. If the symptoms are of a more serious nature, the pharmacist will refer the patient to another healthcare professional.

The Minor Ailment Service was introduced to Northern Ireland in 2005, and referral into the service includes referral from GP practices, the community pharmacist or self-referral by the patient. Using this service the pharmacist can supply advice or advice and medicines for treatment of certain ailments, to suitable patients. Patients are not charged for this service.

Provision of a Minor Ailments Service through community pharmacies:

- Encourages patients to self-treat minor ailments
- Supports the use of pharmacy as a first point of call for health advice allowing pharmacists to make more use of their clinical skills
- Improves patient access to treatment without the need to contact their GP practice
- Provides an alternative to a GP consultation for minor ailments, allowing GPs more time for patients with more complex medical needs
- Benefits other parts of the healthcare service particularly Emergency departments and Out-Of-Hours medical services (OOHs)

## 2. Service Specification

**This service provides the management of specific minor ailments by contracted Community Pharmacies in Northern Ireland**

For eligibility into this service patients must be:

- Over the age of three months (although older age restrictions may apply for individual treatments)

**AND**

- Registered with a GP practice in Northern Ireland

The service only applies to those minor ailments specified by the Health and Social Care Board (HSCB) and only medicines on the HSCB minor ailment formulary may

be supplied.

Patients should be invited to take part in the service but can choose to decline participation.

In order to provide the minor ailment service Community Pharmacy Contractors must:

- Hold a contract with the HSCB to provide the service  
**AND**
- Ensure staff are trained, competent and available to deliver the service in line with the service specification and treatment algorithms  
**AND**
- Develop and ensure compliance with the Standard Operating Procedure (SOP) for implementation of the service (example see appendix 3). This SOP must be reviewed as appropriate.

## **2.1 Access to the Service**

There are three ways in which a patient can participate in the service:

### Self-referral

- Patient has heard about the service, has seen an advertisement or has previously accessed the service

### Referral by a pharmacist

- Patient presenting at the pharmacy with symptoms that fall into the therapeutic areas covered by the service

### Referral by GP practice / OOHs

- GP practices can refer a patient requesting an appointment or prescription to treat symptoms that fall into the therapeutic areas covered by the service. Patients should be offered a choice to be treated under the minor ailments service or seen by the GP

Practices should encourage patients to tell the pharmacist that they have been referred to the minor ailment service. Pharmacists should work with local GP practices and local OOHs centre to establish referral processes.

### **Who must not be referred?**

As well as the patient categories already mentioned the following groups of patients must not be referred into the service:

- Patients requesting to purchase a medicine contained within the formulary. The service must NOT be used to divert the sale of over the counter (OTC) medicines.
- Patients referred from their GP practice for a named medicine. If a GP has made a decision about the medicine a patient needs then a prescription should be issued or the patient asked to purchase OTC as appropriate.

A flowchart for GP referral can be found in appendix 1

## 2.2 Consultation

A pharmacist must undertake all consultations and complete the relevant paperwork at the time of the consultation.

When a patient / parent / guardian presents at the pharmacy with symptoms that fall into one of the therapeutic areas covered by the service, the pharmacist should carry out an assessment in the consultation area, or other private area of the pharmacy.

Outcomes of the consultation:

The patient may be given:

- Advice only
- Advice plus treatment from the minor ailment formulary (up to a maximum of two products per patient as appropriate)
- Referral to the GP if serious symptoms are reported

## 2.3 Professional Responsibility

- At all times the pharmacist will be required to preserve patient confidentiality in line with their responsibilities as members of the Pharmaceutical Society of Northern Ireland and GDPR regulations.
- At no point does this service abrogate the professional responsibility of the individual pharmacist. They must use their professional judgement at all times.
- The responsible pharmacist on the day is responsible for ensuring that the service is delivered in line with the service specification. Information on the responsible pharmacist regulations available here <http://www.psni.org.uk/publications/code-of-ethics-and-standards/>
- Complaints should be dealt with in line with the participating pharmacy's complaints SOP and the complaints procedures of the relevant GP practice.

## 2.4 Supply

- If appropriate the pharmacist may consider providing the patient with pharmaceutical advice only. A consultation fee can be claimed provided the consultation relates to a minor ailment detailed within the service and the relevant paperwork has been completed at the time of the consultation.
- Pharmacists can only supply products included in the current minor ailments formulary and in line with the treatment algorithms.  
If a patient requests a non-formulary item they may purchase this. In that case the patient has opted out of the service and a consultation fee must not be claimed.
- Pharmacists must adhere to the licensing information of all products that are supplied and the age restrictions in the algorithms.  
Only licensed OTC products may be supplied. All OTC products and packs

must be licensed appropriately, no prescription only medicines (POMs) may be supplied.

- Pharmacists must ensure medicines supplied comply with current good practice guidelines e.g.: Pharmaceutical Society guidance available at <http://www.psni.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/>
- Further information on minor ailments can be obtained from the reference sources listed in appendix 2

## **2.4 Standards and Evaluation**

- Training – The contractor must ensure that all pharmacy staff e.g.: pharmacists, locum pharmacists, technicians or pharmacy assistants, involved in the delivery of the service are fully competent and knowledgeable in all processes and procedures relating to this service
- Contract – Pharmacies must be contracted with HSCB for the provision of pharmaceutical services including the minor ailments service
- Evaluation and Monitoring – The monitoring and evaluation of the service will be carried out by HSCB. Pharmacies have a requirement to retain consultation forms in line with Department of Health’s Good Management, Good Records Section M <https://www.health-ni.gov.uk/articles/disposal-schedule-section-m> . Consultation forms may be requested by HSCB for the purpose of evaluation / audit. Feedback may also be sought in order to make amendments/improvements to the service.
- Standards – Participating pharmacies are expected to comply with this service specification. SOPs must be developed as part of the service provision. Elements of the procedure required are listed below under ‘Consultation Procedure’; however it will be up to individual contractors to develop robust SOPs (example appendix 3) to ensure that appropriate governance arrangements are in place.
- Standards for Minor Ailments Service ‘Supported Self Care’ can facilitate pharmacy audit (appendix 4)

## **3. Consultation Procedure**

### **3.1 Patient Status**

When a patient presents with symptoms relating to a minor ailment covered by the service or when a patient has been referred to use the service, the status of the patient should be checked verbally to ensure that the patient is both (a) over the age of 3 months and (b) registered with a GP in Northern Ireland.

### **3.2 Patient assessment by the pharmacist**

The pharmacist must ask questions to determine whether (a) to offer advice only or (b) to offer advice plus appropriate medication or (c) refer the patient to another healthcare professional. Examples questions include:

- Who is the patient and what are the symptoms? (include age / pregnant / breast feeding as appropriate)
- How long have the symptoms been present?
- Action already taken?
- Medication taken, to include (a) for this condition (b) regular prescribed medication (c) OTC or herbal remedies?
- Details of existing medical conditions
- Allergies

**The pharmacist should always consider ALARM symptoms and refer as appropriate**

### 3.3 Third Party Requests

A parent/guardian may present with a set of symptoms for a child however other third party requests for the service should only be accepted in very exceptional circumstances. In these cases the pharmacist must use their professional judgement to ensure they have adequate information to make a clear judgement about the diagnosis and to make a recommendation for appropriate treatment. A record should be made on the consultation form indicating the reason for the third party consultation.

### 3.4 Treatment Options

If a patient's symptoms relate to a minor ailment covered by the service the following options are recommended:

- Provision of advice – advice should be given on symptom control, expected duration of symptoms and when to contact the GP. Advice should be in line with treatment algorithms available at <http://www.hscbusiness.hscni.net/services/2055.htm> and relevant Clinical Knowledge Summaries available at <https://cks.nice.org.uk/>
- Provision of advice and suitable medication if necessary, from the MAS formulary. The formulary can also be accessed on the BSO website at <http://www.hscbusiness.hscni.net/services/2055.htm> The pharmacist may supply up to a maximum of TWO medicines from the formulary. Advice should be given as above and include correct use of the recommended medicine(s) and what to do if symptoms persist.
- Referral to GP or other healthcare professional if necessary or if serious symptoms reported.

### 3.5 MAS consultation documentation

- A consultation form (appendix 5) should be used to fully record the consultation. This form is attached to the right-hand-side of the pharmacy voucher.

- The consultation form and pharmacy voucher must be fully completed at the time of the consultation and signed by the pharmacist providing the service.
- For a group consultation e.g. treating a family for threadworms or head lice, a Group Consultation Record should be completed. This record is available on BSO website at <http://www.hscbusiness.hscni.net/services/2055.htm>. A copy can be found in appendix 8.
- Group consultations attract **ONLY ONE** consultation fee. Claims for consultation fees will be subject to continuous monitoring.
- The patient consent section (appendix 6) must be completed and signed by the patient/parent or guardian.
- In the case of a third party consultation a phone-call to the patient will be necessary to obtain consent for sharing information with the GP or HSCB and this should be recorded on the form and signed by the pharmacist (appendix 7).

Completed consultation forms must be held securely and confidentially in the pharmacy and be available to HSCB for monitoring purposes. Completed forms should be kept for the following period of time in line with the Department of Health's Good Management, Good Records Section M available at <https://www.health-ni.gov.uk/articles/disposal-schedule-section-m>

- Adults – eight years after the conclusion of treatment
- Children and young people – until the patient's 25<sup>th</sup> birthday or 26<sup>th</sup> if the young person was 17 at the conclusion of treatment.

Pharmacy software systems may facilitate recording of patient consultations and when approved such records will be acceptable in lieu of a written record.

- 3.6** Any product supplied must comply with The Code for Pharmacists requirements <http://www.psn.org.uk/about/code-of-ethics-and-standards/> - this includes labelling requirements, as per normally dispensed medicines.

### **3.7 Complete the Pharmacy Voucher**

- The pharmacist must complete and sign the pharmacy voucher at the time of the consultation, accurately coding for any medicine(s) supplied and the consultation fee (example in appendix 9).
- The specific codes allocated by BSO for the formulary products must be used for coding purposes. Codes from the ordinary code book must NOT be used. See MAS formulary for codes.
- When a group consultation has taken place a pharmacy voucher should be completed for each patient, however only ONE consultation fee can be claimed. The consultation fee can be claimed on any one family member's voucher.
- If the pharmacy voucher does not contain the name of the pharmacist providing the service, they should sign as normal and print their name

in the space allocated.

- Pharmacy vouchers must be bundled separately from HS21 prescription forms and forwarded to BSO at the end of the month that the consultation took place.

- 3.8** If the patient presents with symptoms outside the service the pharmacist should use their professional judgement to either advise and sell an OTC medicine suitable for the presenting symptoms or if necessary refer the patient to the GP.
- 3.9** If a patient presents more than twice in one month with the same symptoms (with the possible exception of head lice) and there is no indication for urgent referral, the patient should be referred to their GP surgery for a routine appointment. Pharmacists should be aware of the potential for patient abuse of the service. If the patient re-presents after initial treatment with symptoms that have not resolved within an appropriate time-scale for the condition, or if the symptoms have become worse, the patient should be referred to their GP.

### **3.10 Requests for named medicines**

If a patient requests a named medicine contained within the formulary the pharmacist must use their professional judgement to ascertain if this is a self-referral or product request.

Product requests should not be referred into the service. This service is NOT to be used to divert the sale of OTC medicines.

If it is a self-referral as a result of using the service previously the pharmacist should use their professional judgement to respond to these requests and personally re-assess the symptoms. The pharmacist is clinically responsible for any treatment or advice they give and the patient should be advised, treated or referred accordingly.

Referrals/requests for MAS formulary products to treat conditions not covered by the service should be considered an OTC sale as appropriate or referred to GP if more serious condition suspected.

All pharmacists, locums, pharmacy technicians and pharmacy assistants must understand and follow these conditions for supply.

## **4. Re-ordering Documentation**

Pharmacy Vouchers / Consultation forms

Additional supplies are ordered from De La Rue Smurfit using re-order forms available on the BSO website at

<http://www.hscbusiness.hscni.net/services/2540.htm> . Self-made re-order forms are not acceptable. The community pharmacy cypher number and name and address will need to be added to blank forms before

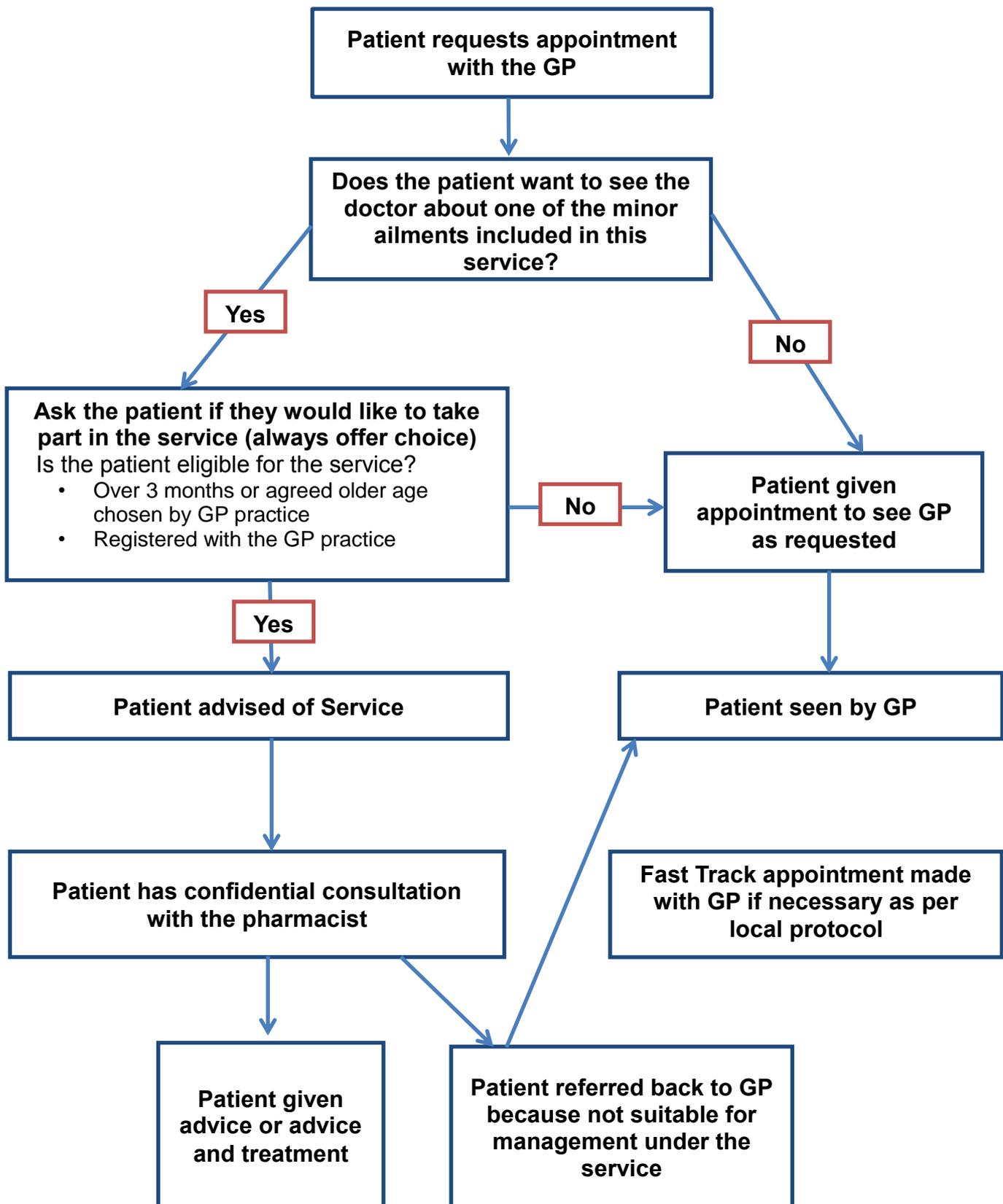
- a. Faxing to 08448360100 or
- b. Posting to DLRT (NI) Ltd

Lissie Industrial Estate East, Lissie Road  
Lisburn, Co. Antrim BT28 2LU

Phone enquires to DLRT on 028 92622999

Pharmacists must ensure voucher stock management procedures are robust with adequate security arrangements in place. See appendix 10 for sample voucher log.

**Appendix 1 Minor Ailments Service Flow Chart – GP Referral**



## Appendix 2            Information Sources

### References for further reading:

1. British National Formulary (BNF) and BNF for children (BNFc) – current edition <https://www.bnf.org/>
2. MIMS – current edition <https://www.mims.co.uk/> (sign up for the MIMS prescribing update bulletin at <http://www.mims.co.uk/bulletins>)
3. NICE Clinical Knowledge Summaries <https://cks.nice.org.uk/#>
4. Minor Illness or Major Disease. Addison, Brian; Brown, Alyson; Edwards, Ruth; and Gray, Gwen, Sixth edition  
<http://www.pharmpress.com/product/9780857112149/minor-illness-or-major-disease>

### Useful Websites

Northern Ireland Centre for Pharmacy Learning and Development  
<https://www.nicpld.org/>

COMPASS therapeutic notes  
<https://www.nicpld.org/courses/?programme=pharmacist&coursetype=cn>

Medicines and Healthcare products Regulation Authority  
<https://www.gov.uk/government/news/welcome-to-our-new-mhra-website>

Pharmaceutical Society of Northern Ireland  
<http://www.psni.org.uk/>

Business Services Organisation  
<http://www.hscbusiness.hscni.net/>

Health and Social Care Board  
<http://www.hscboard.hscni.net/>

Department of Health  
<https://www.health-ni.gov.uk/>

### Contacts

De La Rue Smurfit  
Telephone 028 92622999 / Fax 028 92622600 or 08448360100

# Pharmacy name

## MINOR AILMENTS STANDARD OPERATING PROCEDURE

Revision Chronology		
Version Number	Effective Date	Reason for Change

## Standard Operating Procedure

Master Copy

Training Copy D

<b>Title</b>	Minor ailments
<b>SOP Number</b>	Assign this SOP a number
<b>Version</b>	1
<b>Effective Date</b>	Enter date
<b>Review Date</b>	Enter review date (normally 12 months from effective date)
<b>Superseded Version Number &amp; Date (if applicable)</b>	

### PURPOSE

This Standard Operating Procedure (SOP) describes the minor ailments service process in this pharmacy:

- To ensure that the minor ailments service is operated in a safe and secure way by pharmacists, pharmacy staff and locums.
- To ensure that pharmacists, pharmacy staff, locums, GP practice staff and patients/ patient's representative understand how the scheme works.

Note: You could make this section more detailed to reflect your own pharmacy practice

### SCOPE

This procedure covers the minor ailments services operated by this pharmacy

## Responsible Personnel

The service will be delivered by accredited pharmacists, pharmacists (including locums) working in this pharmacy, dispensary support staff and counter staff involved in the dispensing process, who have been trained by the accredited pharmacist and have been deemed competent to be involved in the delivery of this service (e.g. to evaluate if a patient is eligible to participate in the service).  
**NB It must always be the pharmacist who carries out the consultation.**

The name(s) of the accredited pharmacist(s) for this pharmacy are:

Pharmacist Name	Date

Staff responsible for assessing patient eligibility to participate in the minor ailments service:

Name	Position	Confirmation Training Received	Confirmation of Competence	Date

## PROCEDURE

This section covers how the minor ailments service is operated in this pharmacy.

### 1. Presentation of Patient

***Follow normal procedure as per OTC SOP (enter title and number) with the following additions:***

- When a general request is made relating to a minor ailment covered in the Service or when a patient has been referred to use the Service, the status of the patient should be checked verbally to ensure that the patient is over the age of 3 months and registered with a GP practice in Northern Ireland.
- If patient presents more than twice within a month with the same symptoms and there is no indication for urgent referral, the patient should be referred to their GP for a routine appointment.
- If the patient re-presents after initial treatment with symptoms that have not resolved within a time frame appropriate to the condition, or indeed the symptoms have become worse, the patient should be referred to their GP. This will be dependent upon the nature of the symptoms and the underlying risk of major illness.
- If a patient presents with a prescription from a GP for an item available on the service formulary they must not be transferred into the service.
- If a patient requests a named medicine contained within the Minor Ailments Service formulary the pharmacist must use their professional judgement to ascertain if this a self-referral or product request.
  - Product requests should not be referred into the service. The service is not to be used to divert the sale of OTC medicines.
  - If it is a self-referral as a result of using the service previously, pharmacists should use their professional judgement to respond to these requests and personally re-assess the symptoms. The pharmacist is clinically responsible for any treatment or advice they give and the patient should be advised, treated or referred accordingly.
  - Referrals/requests for MAS formulary products to treat conditions not covered by the service should be considered an OTC sale as appropriate or referred to GP if more serious condition suspected.

### 2. Assessment of the patient

***Follow normal procedure as per OTC SOP (enter title and number) Questions must be asked by the pharmacist to obtain the information required to allow the appropriate recommendation of a medicine or referral to a GP if necessary e.g.***

- Who is the patient and what are the symptoms?
- How long have the symptoms been present and any other symptoms?
- Action taken already?

- Medication taken for this condition or any other medicines regularly taken including OTC, prescription or herbal remedies
- Any allergies or medical conditions?
- Pregnant or breastfeeding?
- Consider “alarm symptoms”

### **Third Party Requests**

A parent/guardian may present with a set of symptoms for a child however other third party requests for the service should only be accepted in very exceptional circumstances. In these cases the pharmacist must use their professional judgement to ensure they have adequate information to make a clear judgement about the diagnosis and to make a recommendation for appropriate treatment.

### **3. Completion of the Consultation Record**

- Complete an individual or multiple consultation record as appropriate e.g. multiple consultation record should be completed for families requiring treatment for head lice or threadworms.
- The patient consent section must be completed and signed by the patient/parent or guardian. In the case of a ‘third party consultation’ a phone-call to the patient will be necessary to obtain consent for sharing information with the GP or for the use of information in assessing the effectiveness of the service and this should be recorded on the form and signed by the pharmacist. The patient’s representative may sign the form to indicate receipt of treatment.

### **4. Provision of advice**

***Follow normal procedure as per OTC SOP (enter title and number) with the following additions:***

- Advice should be given on symptom control, expected duration of symptoms and when to contact the GP. Advice should be in line with treatment algorithms.
- If the patient presents with symptoms outside the service the pharmacist should use their professional opinion to make an OTC sale or refer the patient to the GP

### **5. Provision of supply of Medicines**

***Follow normal procedure as per OTC SOP (enter title and number) with the following additions:***

- The pharmacist may supply up to a maximum of two medicines from the set formulary in line with treatment algorithms

### **6. Assembly and labelling of required medicine or product**

***Follow normal procedure for labelling of dispensed medicines and***

**record on PMR as per SOP (enter title and number)**

## **7. Checking procedure**

***Follow normal procedure as per SOP (enter title and number)***

## **8. Completion of the Pharmacy Voucher**

- Complete the Pharmacy Voucher for each patient
- The pharmacist must complete, sign and date the voucher, recording their name when it does not appear on the voucher.
- The product code used must be as designated by the BSO in the minor ailments formulary
- A consultation fee may be claimed for each individual consultation but **only one fee** claimed for a multiple consultation
- If no medicine was required and the consultation offered 'advice only' write the phrase 'consultation fee' in the body of the voucher and code accordingly.

## **9. Transfer of the medicine/product to the patient**

***Follow normal procedure as per SOP (enter title and number) with the following additions:***

Offer advice regarding expected/normal duration of symptoms, what to do if symptoms worsen and when to consult a GP.

## **10. Submitting Vouchers and Retaining Consultation Forms**

***Follow normal procedure as per SOP (enter title and number) with the following additions:***

- Pharmacy vouchers must be bundled separately from HS21 prescription forms and forwarded to BSO at the end of the month that the consultation took place.
- The consultation forms must be completed in full at the time of the consultation and retained for the following time periods:  
Adults – eight years after the conclusion of treatment  
Children and young people – until the patient's 25<sup>th</sup> birthday or 26<sup>th</sup> if the young person was 17 at the conclusion of treatment.

## Appendix 4 – Community Pharmacy Audit

# Minor Ailments Service

## Supported Self Care Standard

### Standard SSC

In the provision of the direct supply of Over the Counter (OTC) medicines within the Minor Ailments Service, the pharmacist must ensure that appropriate medicines are provided in a timely manner with relevant advice and that the required documentation is completed.

#### Scope of the Standard

- Provision of Over the Counter (OTC) medicines within the contractual arrangements of the Minor Ailments Service.

#### Action Required

- Minor Ailments Service is provided in accordance with the current formulary, protocol and HSSB guidance.

#### Why it is important

Pharmacists have an important role in providing support to patients with self-limiting conditions, in a convenient and accessible way from the pharmacy. Most GPs spend a significant part of their time dealing with high levels of self-limiting conditions and it is estimated that between 100 and 150 million consultations are for conditions that are self-treatable.

The supply of OTC Medicines within a Minor Ailments Service builds on the pharmacist's role and allows pharmacists to supply agreed formulary medicines to patients at NHS expense while reducing the workload on GP colleagues.

It is therefore important that the service is delivered to agreed standards, the required documentation is completed to demonstrate the benefits of the service and to ensure probity in service delivery.

## MA1 Minor Ailments Criterion

Minor ailments service is provided in accordance with current formulary, standard operating procedure and HSCB service specification

Indicator	Audit result		Comments / actions to be taken	Target for completion	Date completed
	Y	N			
<b>Minor Ailments</b>					
OTC4.1 The pharmacy maintains a current SOP and formulary which are regularly reviewed <sup>1</sup>					
OTC4.2 The consultation is completed by the pharmacist					
OTC4.3 Medicines are supplied in accordance with the formulary <sup>2</sup>					
OTC4.4 Any product supplied must comply with The Code for Pharmacists requirements – this includes labelling and the provision of advice on how to take the medicine					
OTC4.5 Pharmacy Vouchers are completed in accordance with HSCB and BSO guidance <sup>3</sup>					
OTC4.6 Consultation forms are completed and retained in accordance with requirements <sup>4</sup>					

OTC4.7 Records are made available for monitoring purposes <sup>5</sup>					
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<sup>1</sup> The Minor Ailments Service is delivered in conjunction with the Northern Ireland Service protocol and formulary. Locally adapted practice protocols/formulary must be reviewed annually and records clearly identify the date of review. Both the practice protocol and formulary must be readily accessible and arrangements in place which ensure that all staff, including locums, are adequately informed.

<sup>2</sup> This Service must be used to supply only medicines listed within this formulary. The pharmacy must maintain adequate stocks of these medicines to support the Service. The Service is open to people presenting at the pharmacy or who have been referred by the GP surgery staff with symptoms of the minor ailments detailed within the service. The pharmacist, using their expertise, can decide if the patient would benefit from medicines for their symptoms. Up to a maximum of two medicines can be prescribed from the formulary. In the event that the pharmacist decides that it is not appropriate to supply a medicine and only advice is given then only a consultation fee can be claimed, provided the consultation is for a minor ailment detailed within the service.

Where a patient's symptoms fall outside those minor ailments detailed within the Service or where the pharmacist suspects at the symptoms may indicate a more serious illness the patient should be referred to their GP. If appropriate or urgent the pharmacist should assist with this referral.

<sup>3</sup> The Pharmacy Voucher must be coded to confirm the medicines supplied, as well as the consultation fee. In the event that the pharmacist decides not to supply a medicine the Pharmacy Voucher should be coded for the consultation fee only. These Pharmacy Vouchers should be forwarded to the BSO for payment on a monthly basis in accordance with the directions stated in protocol.

<sup>4</sup> Consultation forms must be completed as directed within HSCB guidance and be readily accessible. These must be held for the following time periods:-

- Adults - eight years after the conclusion of treatment
- Children and young people – until the patient's 25<sup>th</sup> birthday or 26<sup>th</sup> if the young person was 17 at the conclusion of treatment

<sup>5</sup> The HSCB may elect to audit and evaluate this Service periodically. Records must be maintained and made available in a manner which facilitates such requests having due regard to patient confidentiality and Data Protection legislation. Feedback from patients and health professionals providing and supporting such services will be central to such evaluations.

## Appendix 5 – Completed Consultation Record

### MINOR AILMENTS SERVICE CONSULTATION RECORD



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**1. Date of Consultation** 17/2/09

**Patient Details** (Use pharmacy PVR label)

Name: A Smith  
Address: 21 Main St  
Townsville  
Date of Birth: 9/4/1984

**2. Patient Referral to Minor Ailment Service from:**  
 Self referral  
 Pharmacy  
 GP surgery  
 OOH GP  
 Other (detail):

**3. Symptoms** (Refer to list of symptoms / conditions which can be treated under the Minor Ailments (MA) Service)  
 Please detail:  
 Itching and soreness of the vagina, cheese-like, odourless discharge

**4. Duration of symptoms**  
 < 24 hours  
 2-3 days  
 3-4 days  
 5-6 days  
 > 6 days

**5. Existing medical conditions which may impact on treatment**  
 Cardiovascular  
 Diabetes  
 Pregnancy/lactation  
 CNS problems  
 Respiratory disease  
 Liver/renal disease  
 Other conditions/medicines (Please detail): N/A

**6. Outcome**

Advice	Advice + Treatment	Referral to GP/ODH
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Advice detail:  
Cool and loose fitting clothes, cotton underwear, avoid irritants, hygiene.

Consultation fee claimed: Yes  No

**7. Treatment(s) supplied** (Refer to MA formulary)  
 Product 1: (a copy of pharmacy label may be used)  
 Name:  
 Directions/Dose:  
 Attach label for e.g. Clotrimazole combi

Product 2 (if needed):  
 Name:  
 Directions/Dose:

If the Minor Ailment Service was unavailable would the patient have gone to the GP for a consultation or prescription? Yes  No

I have provided this Service according to the N Guidelines for the Minor Ailments Service  
 signed:  
*A. Tabbatt*

Pharmacy Voucher Serial No  
**123456789**

Pharmacy Voucher number now automatically included on the Consultation record (Feb19)

## Appendix 6 – Patient Consent

### Patient Consent

I confirm I have received this treatment.

Yes  No

I give permission for the pharmacist to inform my GP of this treatment, if requested.

Yes  No

I agree that the information which I supply can be used to assess the effectiveness of the Service.

Yes  No

JOHN SMITH

Patient's Signature:

Date: 30.06.09



Department of  
**Health, Social Services  
and Public Safety**

[www.dhsspsni.gov.uk](http://www.dhsspsni.gov.uk)

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**Sláinte, Seirbhísí Sóisialta  
agus Sábháilteachta Poiblí**

—\*—\*—\*—

**Póistie, Resydenster Heisín  
an Fowk Siccar**

**Appendix 7 – Consent obtained on behalf of the patient**

**Patient Consent**

I confirm I have received this treatment.  
Yes  No

I give permission for the pharmacist to inform my GP of this treatment, if requested.  
Yes  No  *verbal consent obtained from the patient*

I agree that the information which I supply can be used to assess the effectiveness of the Service.  
Yes  No  *verbal consent obtained from the patient*

pharmacist's *A tablet*

Patient's Signature:

Date: *30 06 09*

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 Department of  
**Health, Social Services  
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as riobas  
**Sláinte, Seirbhísí Sóisialta  
agus Sábháilteachta Poiblí**  
as níos mó  
**Piontáir, Resydenter Heism  
an Fowk Siacar**

Appendix 8

**MINOR AILMENTS RECORD OF GROUP CONSULTATION WITH THE PHARMACIST**

To be used for 'multiple consultations' e.g. head lice or threadworms

<b>Date</b>		<b>Source of referral</b>		
<b>Patient Name</b>	1.	2.	3.	4.
<b>Address</b>				
<b>Age if under 17</b>				
<b>Symptoms</b>				
<b>Duration of symptoms</b>				
<b>Existing Medical conditions which may impact on treatment</b>				

<b>Outcome:</b>				
	<b>Patient 1</b>	<b>Patient 2</b>	<b>Patient 3</b>	<b>Patient 4</b>
<b>Product supplied Affix label</b>				
<b>Product supplied Affix label</b>				
<b>Advice</b>				
<b>Referral to GP</b>				
<b>Pharmacy Voucher No</b>				
<b>Patient/Parent or guardian consent for treatment</b>				
<b>Patient/Parent or guardian sharing of information</b>				
<b>Pharmacist Declaration.</b> I have provided this service according to the Service Specification for the NI Minor Ailments Service Signature <span style="float: right;">Print Name</span>				



## Appendix 10 - SAMPLE VOUCHER LOG

A sample sheet is included for pharmacy vouchers and an explanation of the columns is given below:

### Order and Receipt Log

1. **Date ordered** - Date the new vouchers were ordered by the pharmacist
2. **Ordered by (initials)** - Initials of the person who placed the order
3. **Method of order** - Indicate if the order was placed by fax or phone call
4. **No ordered** - Number of vouchers ordered
5. **Date received** - Date the delivery arrived at the pharmacy and was placed in the pharmacy safe
6. **Serial numbers** - The first and last serial number of each pad should be recorded. The numbers are in sequence however the last digit is a check digit. It should be recorded but will not appear to be in sequence. A separate line should be used to record the numbers of each pad
7. **Stored by (initials)** - Initials of the person who placed the vouchers in the safe and who completed the log book

### Order and Receipt Log

Date Ordered	Ordered by (initials)	Method of order	No. ordered	Date received	No. of pads	Serial Numbers	Stored by (initials)