

# **MEDICINES MANAGEMENT**

## **Minor Ailments Audit**

### **AUDIT REPORT**

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## 1. INTRODUCTION

- 1.1 The minor ailments service improves access and choice for people allowing them to obtain advice and treatment from pharmacies within Sheffield. NHS Sheffield is currently reviewing the formulary and monographs within the enhanced service and the results from this audit will support any changes made
- 1.2 The audit also aimed to establish if changes made in the way claims are made had been adopted correctly by community pharmacies.

## 2. AIMS AND OBJECTIVES

- 2.1 The aim was to establish whether the updated way of claiming for minor ailments has been adopted correctly by Community Pharmacists and to look at the quality of the service.
- 2.2 Our objective was to improve the record keeping and profile of the minor ailments service.
- 2.3 An action plan will be developed in line with recommendations in this report.

## 3. CRITERIA AND STANDARDS

- 3.1 The following criteria were developed in line with the NHS Sheffield Service Level Agreement for the provision of Minor Ailments Service.

Criteria	Standard
1. If patients are receiving more than one treatment it is recorded as one claim.	100%
2. The Pharmacist is always involved in all consultations. (Either directly or in a supervisory capacity)	100%
3. The Pharmacist Consultation Records (Green Forms) are kept securely for 2 years.	100%
4. All staff involved in the provision of the service has been trained to operate the service in accordance with the protocols.	100%
5. All medication supplied is made within the protocols of the service specification.	100%
6. All patients who have received care through the minor ailment scheme are registered with a Sheffield GP.	100%
7. All forms are signed by the patient and the declaration filled in.	100%
8. If a patient presents twice within a month with the same symptoms then a referral is made to their GP.	100%
9. The Patient Details section is completed.	100%
10. The Medical Information section is completed.	100%
11. The Details of Consultation section is completed.	100%
12. The Exemption section is ticked.	100%
13. The Patient Declaration is signed.	100%
14. The Pharmacist Declaration is signed.	100%

## 4. METHODOLOGY

4.1 Nine community pharmacies were selected to provide a representative sample of the community pharmacies across Sheffield. Information was obtained in two ways:-

- a) Firstly, a short questionnaire was distributed to the nine community pharmacies so as to ascertain the level of training and service delivery within the pharmacy.
- b) Each pharmacy was asked to make available, to NHS Sheffield, all Consultation Forms under the Minor Ailments Scheme referring to the month of April 2009. (These were collected from the pharmacy by a member of the pharmacy development team as they contained patient identifiable data.). The data obtained from these forms was used to assess compliance to the audit standards and related to duplication of claim forms and data completeness

4.2 The questionnaire and Consultation Forms provided the basis of the audit. The data obtained from these two data collection methods was entered onto a spreadsheet and analysed using Microsoft Excel.




## 5. RESULTS

5.1 A total of 1212 completed Pharmacist Consultation Record forms were included in this audit, 1193 of these were found to be covered by the protocol.

5.2 From two pharmacies that were found to have no duplicated forms, one; from a total of 170 forms had 41 on which more than one item had been dispensed and the second; out of a total of 155 forms, had 28 with more than one item dispensed.

AUDIT CRITERIA	STANDARD SET	STANDARD ACHIEVED
1. If patients are receiving more than one treatment it is recorded as one claim.	100%	97.4%
2. The Pharmacist is always involved in all consultations. (Either directly or in a supervisory capacity)	100%	100%
3. The Pharmacist Consultation Records (Green Forms) are kept securely for 2 years.	100%	88.9%
4. All staff involved in the provision of the service has been trained to operate the service in accordance with the protocols.	100%	88.9%
5. The Pharmacist partaking in the service has undertaken CPD relevant to minor ailments.	100%	100%
6. All medication supplied is made within the protocols of the service specification.	100%	98.43%
7. All patients who have received care through the minor ailment scheme are registered with a Sheffield GP.	100%	100%

8. If a patient presents twice within a month with the same symptoms then a referral is made to their GP.	<b>100%</b>	<b>100%</b>
9. The Patient Details section is completed.	<b>100%</b>	<b>59.7%</b>
10. The Medical Information section is completed.	<b>100%</b>	<b>75.2%</b>
11. The Details of Consultation section is completed.	<b>100%</b>	<b>74.5%</b>
12. The Exemption section is ticked	<b>100%</b>	<b>98.9%</b>
13. The Patient Declaration is signed	<b>100%</b>	<b>99.2%</b>
14. The Pharmacist Declaration is signed	<b>100%</b>	<b>86.5%</b>

	Compliant
	Partly Compliant
	Not Compliant

## 5.2

Pharmacy Number	Patient Details section completed (%)	Medical Information section completed (%)	Details of Consultation section completed (%)	Exemption section ticked (%)	Patient Declaration signed (%)	Pharmacist Declaration signed (%)
<b>Pharmacy 1 - Yes</b>	<b>35.5</b>	<b>100</b>	<b>100</b>	<b>99.4</b>	<b>100</b>	<b>99.4</b>
Partially	63.2	0	0	0	0	0
Minimal completion	1.3	0	0	0	0	0
No	0	0	0	0.6	0	0.6
<b>Pharmacy 2 - Yes</b>	<b>59.5</b>	<b>83.3</b>	<b>97.6</b>	<b>100</b>	<b>100</b>	<b>100</b>
Partially	40.5	16.7	2.4	0	0	0
Minimal completion	0	0	0	0	0	0
No	0	0	0	0	0	0
<b>Pharmacy 3 - Yes</b>	<b>64.6</b>	<b>53.1</b>	<b>41.7</b>	<b>97.9</b>	<b>98.9</b>	<b>100</b>
Partially	35.4	15.6	52.1	0	0	0
Minimal completion	0	29.2	6.2	0	0	0
No	0	2.1	0	2.1	1.1	0
<b>Pharmacy 4 - Yes</b>	<b>78.5</b>	<b>100</b>	<b>98.9</b>	<b>0</b>	<b>0</b>	<b>0</b>
Partially	20.4	0	1.1	0	0	0
Minimal completion	1.1	0	0	0	0	0
No	0	0	0	0	0	0
<b>Pharmacy 5 - Yes</b>	<b>74.2</b>	<b>92.1</b>	<b>98.9</b>	<b>100</b>	<b>100</b>	<b>100</b>
Partially	25.8	5.6	1.1	0	0	0
Minimal completion	0	2.2	0	0	0	0
No	0	0	0	0	0	0
<b>Pharmacy 6 - Yes</b>	<b>57.1</b>	<b>58.2</b>	<b>0</b>	<b>99.4</b>	<b>95.9</b>	<b>1.8</b>
Partially	42.3	21.2	7.6	0	0	0
Minimal completion	0.6	20	87.1	0	0	0
No	0	0.6	5.3	0.6	4.1	98.2
<b>Pharmacy 7 - Yes</b>	<b>51.2</b>	<b>40</b>	<b>98.8</b>	<b>97.6</b>	<b>100</b>	<b>100</b>
Partially	48.2	28.8	1.2	0	0	0
Minimal completion	0.6	31.2	0	0	0	0
No	0	0	0	2.4	0	0

Pharmacy Number	Patient Details section completed (%)	Medical Information section completed (%)	Details of Consultation section completed (%)	Exemption section ticked (%)	Patient Declaration signed (%)	Pharmacist Declaration signed (%)
<b>Pharmacy 8 - Yes</b>	<b>67.7</b>	<b>96.2</b>	<b>97.9</b>	<b>99.6</b>	<b>99.6</b>	<b>100</b>
Partially	32.3	3.4	2.1	0	0	0
Minimal completion	0	0.4	0	0	0	0
No	0	0	0	0.4	0.4	0
<b>Pharmacy 9 - Yes</b>	<b>48.8</b>	<b>53.7</b>	<b>36.4</b>	<b>96.9</b>	<b>99.4</b>	<b>90.7</b>
Partially	51.2	26.5	47.5	0	0	0
Minimal completion	0	19.8	16	0	0	0
No	0	0	0	3.1	0.6	9.3

## 6. DISCUSSION

- 6.1 **If patients are receiving more than one treatment it is recorded as one claim.** The majority of pharmacies are correctly recording this information and if a patient is presenting with multiple symptoms or requires more than one treatment then it is filled out as one claim. There were 32 (2.6%) excess claims made during the audit period 21 of these were from an individual pharmacy. The remaining 11 were distributed evenly from another six pharmacies. These six pharmacies also had numerous consultation records that contained more than one product / ailment on one record form (82 forms -9.2%), suggesting these few excess claims are not a misinterpretation of the service level agreement. It may be that the patient returned later in the day. Since April 2009 a letter has been distributed to pharmacies to clarify this issue and the individual pharmacy that had 21 over claims has been made aware.
- 6.2 **The pharmacist is always involved (directly or indirectly) in the consultation.** All pharmacies indicated in the questionnaire that the pharmacist was involved in all consultations (100%). Studying the pharmacist consultation records showed that 13.5% of the forms omitted to have the pharmacist's declaration filled out and were not signed by the pharmacist. This result is not a true representation of all the pharmacies as most of these were accountable to one pharmacy that had 98.2% (160) forms with no evidence of the pharmacist being involved in the consultation, as the pharmacist declaration was not signed.
- 6.3 **Pharmacist prescriptions (green forms) are retained in the pharmacy for 2 years.** All the pharmacies that answered this question (8 pharmacies) stated that the forms are retained for 2 years. One of the pharmacies failed to answer the question. Forms should be kept for 2 years in case there is a need to refer back to the consultation at a later date.
- 6.4 **All staff who are involved in the provision of the service are trained.** All the pharmacies that answered this question (8 pharmacies) stated that all staff are appropriately trained in the provision of the service. NHS Sheffield does not require evidence that staff have completed particular training packages however it does state that the pharmacy contractor has a duty to ensure that all pharmacists and staff involved in the provision of the service have the relevant knowledge and are appropriately trained. CPPE have a training package, 'responding to symptoms' and pharmacists and staff can keep up to date with the changes by reading journals and CPD articles. (e.g. from the PJ or the Chemist and Druggist)
- 6.5 **All medication supplied is made within the protocols of the service specification.** Of the 1212 forms looked at 19 of the medicines supplied were not obviously supplied in line with the protocol. Examples included hydrocortisone cream 1% for eczema, chlorphenamine tablets and syrup for a rash, miconazole oral gel for a 'sore mouth'. There were also 5 forms with medication supplied but no indication anywhere on the form of the patient's symptoms. The monographs are under current review and the number of symptoms that can be treated under the minor ailments scheme will increase. The list of medication that can be supplied under the scheme has also been up for review and some products that are not clinically effective have been removed as well as a number of products added to allow pharmacists to offer a wider service.
- 6.6 **All patients who have received care through the minor ailments scheme are registered with a Sheffield GP.** All Pharmacists responded positively in the questionnaire that a system is in place to ensure that all patients receiving care are registered with a Sheffield GP. The pharmacist consultation form requires the patient's GP to be recorded this was done in all?? bar of the consultations. It was noted that sometimes it was just the doctor's surgery recorded, patients may not always be aware of the individual doctor they are registered with.
- 6.7 **All forms signed by the patient and the declaration are filled in.** 0.8% (10 forms) omitted to have the patient's signature. Patients need to sign the form at the end of the consultation. They are signing to state;
- They have received the named medication for the reason specified **OR**

- They have consulted the pharmacist under the minor ailments scheme and confirm that no medicines have been issued to them
- They are exempt from NHS Charges
- They understand it is a NHS service and that the NHS will retain data relating to my use of the service and may contact me for my views

Patients should tick one of the two boxes in the patient declaration section depending on whether they received medication or just received advice.

6.8 If a patient presents twice within a month with the same symptoms then a referral is made to their GP. If patients present more than twice within any month with the same symptoms and there is no need for an urgent referral then the patient should be referred to their GP. The questionnaire demonstrated that all of the nine pharmacies have systems in place to ensure this happens. Entering the details of the consultation on the patients PMR would be a robust way of ensuring this is picked up.

#### 6.9 Each of the three sections of the consultation record are completed.

**Patient Details.** 59.7% of forms were filled out completely. The main factors missing were the patient's phone number and their NHS number. NHS Sheffield carries out evaluations of the services it commissions, for the minor ailments service patients are contacted by telephone to obtain their views on the service received. Patients don't always have their NHS number to hand, but if it is available all healthcare professionals should use it in any documentation relating to that patient.

**Medical Information.** The questions listed on the consultation record forms are designed to obtain all the relevant information from the patient to enable the pharmacist make a recommended course of action. The details recorded may also be needed to be recalled at a later date, for example if the patient returns for further advice or a complaint is received. It is therefore advisable to put as much detail as possible. 75.2% of forms presented had all the fields in this section completed.

**Details of consultation.** Any advice given should be documented, this should include any impression of what you felt the patient was presenting with and any follow up advice given. 74.5% of the forms presented had all the fields in this section completed however, some of the fields may not always be applicable. E.g. the patient may not be on any other medication so this field may be left blank.

6.10 **The declarations are completed and signed.** As mentioned in paragraph 6.2 most pharmacists had filled out the declaration. The one pharmacy that omitted to do this has been informed and a letter sent to reinforce the requirement of the service.

6.11 **Overall the results from the audit are reassuring to NHS Sheffield.** Patients are able to have easy access to quality advice and, if needed, medication. This is of clear benefit to the patient and will help to ensure patients use the appropriate service provider for their ailments.

## 7. RECOMMENDATIONS

7.1 The following recommendations are made as a result of the audit:

7.1.1 Communicate with all pharmacies that only one claim can be made per patient consultation, even if the patient presents with more than one symptom. (done in July 2009)

7.1.2 Ensure consultation records are kept for two years.

- 7.1.3 All staff involved in the provision of the service should be trained and should operate within the parameters of the protocol. Staff should be familiar with the medication that can be supplied for each ailment listed in the enhanced service.
- 7.1.4 Wherever available the patient's phone number and NHS number should be documented on the consultation record, it should be made clear to patients that they may be contacted by a member of NHS Sheffield to obtain their views on the service they received.
- 7.1.5 The medical information section of the consultation record extracts all the information required of the patient to enable the pharmacist to make a recommended course of action. Recording all the details provides an audit trail and allows staff to revisit the consultation at a later date if needed. E.g. if the patient returns or complains.
- 7.1.6 Any advice given, products supplied and dose recommended should be clearly recorded. Any follow up action recommended or sign posting to another healthcare professional should be recorded.
- 7.1.7 When patients sign the declaration on the consultation record they should indicate whether or not they received medication as a result of the consultation by ticking one of the two boxes, as well as indicating their reason for exemption.
- 7.1.8 Ensure the pharmacist is involved in all consultations; the pharmacist declaration must be filled out.

## [ Audit Tool ]

## Questionnaire

Question	Yes / No	Examples
Have all staff involved in the provision of the service been trained to operate the service in accordance with the protocols?		<ul style="list-style-type: none"> <li>• Evidence of briefings</li> <li>• SOPs signed by staff</li> <li>• Evidence of Healthcare training</li> </ul>
Has the Pharmacist partaking in the service undertaken any CPD relevant to minor ailments?		<ul style="list-style-type: none"> <li>• CPPE “Responding to Symptoms”</li> </ul>
Is the Pharmacist involved in all consultations? (Either directly or in a supervisory capacity)		<ul style="list-style-type: none"> <li>• Pharmacist has signed all consultation forms</li> </ul>
Is there a system in place to ensure the patient is registered with a Sheffield GP?		<ul style="list-style-type: none"> <li>• GP &amp; Surgery identified on all forms</li> </ul>
Where appropriate, is a record of advice or treatment given recorded?		<ul style="list-style-type: none"> <li>• Patients PMR</li> <li>• Patient Record card</li> <li>• Consultation form</li> </ul>
Is there a system in place to identify patients presenting with the same symptoms more than twice with any month?		<ul style="list-style-type: none"> <li>• PMR</li> <li>• Patient Record card</li> </ul>
Are records kept in cases where referral to a general practitioner is deemed necessary?		<ul style="list-style-type: none"> <li>• Referral records</li> <li>• Signposting records</li> </ul>
Are the Pharmacist Consultation Records (Green Forms) kept securely for 2 years?		

## APPENDIX B

Pharmacy Details / Label

### Pharmacist Consultation Record (Sheffield Minor Ailments Scheme)

Date of Consultation:

#### Patient Details:

Name	
Address	
Telephone Number	
Date of Birth	
NHS No (if known)	
GP's Name	
GP's Address	

#### Medical Information:

Symptoms:	
How long has the person had these symptoms?	
Has the person tried taking any medication yet?	
If so, what medication has been tried?	
Does the person suffer from any existing medical conditions?	
If so, what are they?	
What medication is being prescribed by the doctor for these conditions?	

#### Details of Consultation:

Advice Given	
Product(s) Supplied or Recommended (if any)	
Dose Recommended	
Was the patient signposted to another health care professional?	
If yes, to who?	

Exemption Information:		Evidence Seen?	YES / NO
I am exempt from paying prescription charges for the following reason:			
A. is under 16		G. has a valid War Pension certificate	
B. is 16, 17, 18 and in full time education		H. gets Income Support or income-related Employment and Support Allowance	
C. is 60 or over		K. gets Income-Based Job Seekers Allowance	
D. has a valid Maternity Exemption Certificate		L. is named on a current HC2 charges certificate	
E. has a valid Medical Exemption certificate		M. is entitled to or named on a valid NHS Tax Credit Exemption certificate	
F. has a valid Prescription Prepayment certificate		S. has a partner who gets Pension Credit guarantee credit (PCGC)	
I am the patient		I am the patient's representative	
<b>Patient Declaration (please tick which applies):</b>			
	I have received the above medicine(s) and am exempt from charges for the reason specified above. I understand this is an NHS service and that NHS will retain data relating to my use of the service and may contact me for my views.		
	I have consulted the pharmacist under the Minor Ailments Scheme, am exempt from charges and confirm that no medicines have been issued to me on this occasion. I understand this is an NHS service and that the NHS will retain data relating to my use of the service and may contact me for my views.		
Signature			
Name			
Date			
I am the patient		I am the patient's representative	

Pharmacist Declaration:	
	I confirm that I have provided appropriate advice / treatment for the patient named overleaf under the Sheffield Minor Ailments Scheme in accordance with the Service Specification *
Name	
Signature	
Date	

**IMPORTANT:** Your pharmacist is providing treatment and/or advice under the Minor Ailments Scheme in line with the symptoms you have described. If your symptoms persist you should seek further advice from your doctor. Please advise the doctor which pharmacy you have attended and what advice/treatment you have already received from the pharmacist.

**ACTION PLAN**

<b>Recommendation</b> <i>(List from Audit Report)</i>	<b>Action to be Taken</b> <i>(Steps Needed to Make Changes)</i>	<b>Lead</b> <i>(Who Will Do It?)</i>	<b>Deadline</b> <i>(When Will It Be Done?)</i>
<b>Communicate with all pharmacies to ensure only one claim is made per consultation</b>	<b>Send a letter to all contractors so they are reminded of the payment process</b>	<b>Steve Freedman</b>	<b>July 2009 (Done)</b>
<b>All staff who are involved in the provision of the service are trained</b>	<b>Send support material to pharmacies around the minor ailments listed in the service</b>	<b>Steve Freedman</b>	<b>May 2010</b>
<b>Ensure all details on the consultation form are completed</b>	<b>Communicate to all pharmacies a reminder to complete all sections of the consultation form. This will be done when issuing the updated service specification</b>	<b>Steve Freedman</b>	<b>May 2010</b>