

Primary Care Commissioning Committee

25 January 2017

Details	Part 1	✓	Part 2		Agenda Item No.	6
Title of Paper:	Proposal to align local Minor Ailment Scheme to GM standard					
Board Member:	Margaret O'Dwyer					
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Presenter:	Amy Lepiorz					
Please indicate:	For Decision	✓	For Information		For Discussion	

Executive Summary

Summary	Bury's Minor Ailment Scheme (known locally as Care at the Chemist) is a locally commissioned service (LCS) and was first commissioned in 2004. In 2014 a Greater Manchester minor ailments scheme was developed by the NHS England Local Area Team for local commissioners to adopt. In December 2016 a local Task and Finish group was convened to review the local scheme and consider whether to align to the GM scheme. This paper summarises the considerations behind the proposal to align with the GM scheme.					
Risk	High		Medium		Low	✓
	Please indicate above the overall level of risk associated with the paper then state here what the risks are and how this paper aims to address them. If the above summary itself is around managing risk etc. state "Included in Summary". NB Risks can include failure to act and lost opportunities.					
Recommendations	The Primary Care Commissioning Committee is asked to approve the change in service specification for the local minor ailments scheme to align with the Greater Manchester scheme					

Strategic themes

To deliver improved outcomes and reduce health inequalities for patients through better preventative strategies	✓
To deliver service re-design in priority areas through innovation	✓
To develop primary care to become excellent and high performing commissioners	✓
To develop the CCG leadership to work with the Local Authority to be excellent integrated commissioners	
To develop robust and effective working relationships with all stakeholders and partners to drive integrated commissioning	✓
To deliver long term financial sustainability through effective commissioning and innovative investment across the wider system	✓
To develop and influence the provider landscape through development of a Locality Care Organisation (LCO)	✓
Equality Analysis Assessed?	Supports NHS Bury CCG Governance arrangements

Proposal to align local Minor Ailment Scheme to Greater Manchester (GM) standard

1. Introduction and background

Bury's Minor Ailment Scheme (known locally as Care at the Chemist) is a locally commissioned service (LCS) and was first commissioned in 2004. It is currently delivered by 35 pharmacies across the Bury footprint, and all GP practices are engaged with the scheme. The scheme has had two major revisions since launch. It provides access to treatment for a range of minor ailments without the need to see a GP and is available to all patients registered with a Bury GP: if patients do not pay prescription charges they will receive medication free of charge.

In 2014 a Greater Manchester minor ailments scheme was developed by the NHS England Local Area Team for local commissioners to adopt. Currently Manchester, Salford and Stockport CCGs have commissioned this and Heywood Middleton and Rochdale are about to commence.

2. Further information

Total spend on the scheme Jan – Dec 2016 (total of 9610 consultations) was £68,856 comprising

- £29,797 for consultation fees
- £ 31,799 for medication
- £ 7,260 for bespoke software to run scheme

This spend was a 9% decrease over the previous calendar year. There was a steady decline in consultations between January and September 2016, which could be attributable to the implementation of the Prescribing for Clinical Need policy, whereby patients are encouraged to self-care for minor ailments.

A review of the current scheme took place via a Task and Finish group in December 2016, and the following issues were considered:

- The need to promote the 'self care' message rather than divert patients from GPs into the minor ailment scheme.
- Whether to adopt the GM service specification. The GM scheme differs from Bury's local scheme because:
 - o It doesn't pay pharmacies for a consultation unless medication is supplied.
 - o It allows for cross border consultations i.e. a Salford patient could access the scheme in a Manchester pharmacy.
 - o It does not enable tracking of patients between pharmacies (Bury's scheme allows all Bury pharmacies providing the scheme to see details of previous consultations, even if the patient visited a different pharmacy).
 - o It does not set limits for the maximum number of issues/ annum for individual medications.
 - o The GM software programme is provided by Pharmoutcomes which is a more commonly used web-based platform and would be around £5K/annum cheaper. Pharmoutcomes is already used for the annual flu vaccinations, and in some pharmacies for the dispensing of preparations for the Minor Eye Conditions Service (MECS).
 - o The consultation fee paid to pharmacies is 29% higher.
- The national direction of travel which is to encourage all CCGs to adopt a joined-up approach to the commissioning of minor ailment schemes by April 2018.

- The level of post payment verification currently undertaken in Bury, compared to the reduced level provided under the GM scheme.

3. Impact of proposed change to scheme

The main benefit of aligning to the GM scheme would be a consistent offer to patients across neighbouring boundaries. It would also reduce the need for our pharmacies to be running two software programmes.

There may also be reduced local administration related to the GM scheme as this is centralised. The likely financial impact of changing from the local Bury scheme to the GM scheme, assuming the number of consultations remains static, would be a net annual decrease in cost of £1962, because the increased consultation fee would be offset by the reduction in fees for software.

4. Recommendations

The Primary Care Commissioning Committee is asked to approve the change in service specification for the local minor ailments scheme to align with the Greater Manchester scheme.

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