The Pharmacy Scheme

A Closure Report for the Sure Start Newington with Gipsyville Pharmacy Scheme

April 2004

[Consortium] Solutions
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1. BACKGROUND

This report was commissioned by Sure Start Newington with Gipsyville produced by Consortium Hull, a non-profit making organisation dedicated to the regeneration of deprived communities. Consortium Hull's Research and Evaluation team have worked successfully with several Sure Start programmes and Children Fund providers delivering a range of services including:

- Programme and service evaluations
- Mapping and Baselining
- Data Collection and Monitoring
- Community Consultation
- Establishing/Conducting focus groups

This report aims to evaluate the Pharmacy Scheme by bringing together all the information gathered from local parents who have accessed the scheme and professionals who have worked within and supported the scheme, making clear recommendations to the local Sure Start programme.

2. INTRODUCTION

The idea for the Newington with Gipsyville Pharmacy Scheme is premised on similar schemes, which operate successfully through other Sure Start programmes in Hull (Longhill and Bilton Grange and Noddle Hill). The Scheme started on the 17\textsuperscript{th} November 2003 and operates for children aged 0-4 years, whose parents are registered with Sure Start Newington with Gipsyville.

Six Pharmacies, which are situated within the Sure Start Newington with Gipsyville areas, operate the scheme. These are:

- Kingston Pharmacy 442 Anlaby Road
- JE Mackenzie Pharmacy, 633 Anlaby Road
- Moss Pharmacy, 143 Askew Avenue
3. THE GIPSYVILLE WITH NEWINGTON PHARMACY SCHEME

3.1 Aims of the Pharmacy Scheme

The scheme aims to provide Parents who are registered to the Sure Start Newington with Gipsyville programme, with an alternative to visiting the G.Ps surgery. The scheme does this by:

- Providing a service that increases parent’s confidence in terms of self-help and appropriate medication for their children.
- Offering support and advice to parents with any health concerns they may have with their children.
- Educating parents on health issues for their children.
- Supplying in appropriate circumstances over the counter (otc) medication free of charge to treat an acute episode of a recognized condition.
- Decreasing inappropriate use of (otc) medication by supplying a minimum quantity to treat the acute episode only.

3.2 Medication Supplied and Conditions Treated

The Pharmacy Scheme will treat six recognised conditions and will provide six approved medications, in a small amount, to treat those conditions.

The following tables demonstrate what conditions will be treated and what medication will be used.
### CONDITION | MEDICATION
--- | ---
Temperature, aches and pains | Paracetamol sugar free elixir 120mg/5ml (50ml)
Cough | Simple Linctus Paediatric (50ml)
Diarrhoea | Dioralyte Sachets (4)
Nasal congestion | Normal Saline Nose Drops (10ml)
Nappy Rash | Conotrane Cream (100g)
Dry Skin | Aqueous Cream (100g)

#### 3.3 Staffing of the scheme

The Sure Start Community Health Co-ordinator was initially involved with the development of the scheme, working closely with the lead pharmacist from the East Riding and Hull Local Pharmaceutical Committee (ERHLPC) and a representative from the West Hull Primary Care Trust (WHPCT). Other staff from the local programme were also involved in establishing points of contact for parents to access the scheme. Accessible information about the scheme that has been distributed to parents throughout the Sure Start programme, at individual Sure Start sessions, and through the Sure Start health team. The Community Health Co-ordinator is also the budget holder for the scheme and ensures that the pharmacists are paid in accordance to the agreement made with them.

The lead pharmacist’s initial role within the scheme has been one of recruiting pharmacists in the area onto the scheme, generating interest for the scheme and ensuring that procedures are put in place to enable the scheme to operate smoothly.

The WHPCT representative’s initial role within the scheme has been one of encouraging local Doctors support of the scheme.
**Pharmacist Roles**

The scheme operates within local pharmacies, situated within the local Sure Start area. The Pharmacist administers the scheme within the pharmacy by conducting consultations and providing appropriate advice and medication to local parents whose children are registered with Sure Start Newington with Gipsyville.

Records of each consultation with eligible parents are forwarded by post/fax to the child’s G.P. by the pharmacist, to update their patient records. This is one of the requirements of the pharmacist in administering the scheme along with recording visits made to the pharmacy in the patient held record. This record is entitled ‘Personal Child Health Record’ and is issued to every newborn baby. A pharmacy record is also required to be kept for evaluation and claims purposes.

Each participating pharmacist receives a retainer fee of £1000 (£250 per quarter) for their role within the scheme. This is administered by Sure Start Newington with Gipsyville.

4. **PHARMASIST CONSULTATION**

All pharmacists participating in the scheme were visited by a member of the Consortium research team and were asked a series of questions to ascertain their initial opinions on the scheme. The questions focused on delivery, management, take up, administration, and quality of the scheme.

Questions asked:

1. What was it about this scheme that attracted you to become involved?
2. What is your role within the scheme?
3. How does the scheme operate within the Pharmacy?
4. Has been involved with the Pharmacy scheme impacted on the regular running of the chemist?
5. Who would you report to with any problems?
6. Can parents register as Sure Start users within the chemist?
7. Describe how parents can influence the scheme?
8. Describe how Parents feedback on the quality of the service?
9. Describe what systems are in place to ensure quality of service
10. Have you any issues or concerns with delivering the Pharmacy Scheme?
11. How do you feel the scheme will impact on the following
   a. Families lives
   b. Local G.P. Surgery
   c. The A and E department at Hull Royal Infirmary

4.1 Summary of Findings

All the pharmacists participating in the scheme felt that they were moving away from the more traditional role of the pharmacist in terms of dispensing prescription drugs to schemes such as The Pharmacy Scheme, where they could provide a service to parents from the local community. Each of the pharmacists is also participating in the West Hull Primary Care Trust Minor Ailment Scheme.

All the pharmacists saw their roles within the scheme as one of providing help, advice and dispensing medication, where necessary, to local parents registered to Sure Start. One pharmacist felt that the scheme was useful as, unlike some doctor’s surgeries, the chemist is open all day on a Saturday, which would save parents panicking or having to wait until the Monday.

Due to the lack of take up of the scheme none of the pharmacist felt that the scheme had impacted on the regular running of their pharmacy.

Most of the pharmacists felt that parents had the opportunity to feedback on the quality of the service they had received within the Chemist and would be willing to pass on any comments received to the Sure Start programme. Two of the pharmacists felt that parents didn’t get the opportunity to feed back on the service they had received, as there was no formal procedure put into place to do so. One of the pharmacist felt that this was Sure Start’s responsibility.
Four out of the six pharmacists explained that examining the records kept within the Chemist could help in monitoring the quality of the service provided. One pharmacist stated that there were no particular systems in place to check the quality of the service provided; the only system was in terms of the general quality that the pharmacy offered under the Medicines, Ethics and Practice guidelines. Another of the pharmacist stated that in terms of systems to ensure the quality, they followed guidelines set out for the scheme by Sure Start.

With regard to the impact of the scheme, all of the Pharmacists were in agreement that the scheme has the potential to make a large impact on families within Sure Start, by providing free across the counter medicine which they may have had to visit a doctor for. Also in terms of impacting on G.P. surgeries, there is the potential that the scheme could free up valuable Doctors time, therefore enabling them to use their time more effectively. They also felt that the scheme could potentially have an effect on Hull Royal Infirmary A & E department, as sometimes Parents panic and attend hospital, especially on a weekend, as they can not see a doctor until the Monday.

Three of the pharmacist mentioned that if they experienced a problem within the scheme that they would find the contact details of Sure Start. None of the pharmacist knew whom to contact within Sure Start. One of the pharmacists stated that if they had a problem with the scheme they would contact the lead pharmacist, and the remaining two stated that they would contact the WHPCT.

All of the pharmacists stated that no one from Sure Start has visited the pharmacy Scheme since it had started 3months ago. One pharmacist was on leave when the scheme started so had never seen anyone from Sure Start.

One of the pharmacist explained that for the Sure Start scheme, parents had to be registered to the Sure Start programme, which narrowed the number of people who could use the service. Three of the pharmacists thought it would be a good idea if parents could register as Sure Start users within the pharmacy.
5. DOCTORS RECRUITED ONTO THE PHARMACY SCHEME

Doctors must also be recruited to support the Sure Start Pharmacy scheme as they will be the natural point of contact for most parents who have a concern with their children's health. The six Doctors who are registered to the scheme are:

**Ayyub and Partners:** Dr M Ayyub, Dr D.Y.F.Yu and Dr A.M. Almed (Wheeler Street Health Care)

**Hussain(AW) and Partners:** Dr A.W. Hussain and Dr S.G. Hussain (236 St Georges Road)

**Mather and Partners:** Dr AA Mather, Dr J. Miller, Dr T.K. Konda (The Oaks Medical Center).

**Reiss S.H:** Dt S.H. Reiss (561 Anlaby Road)

**Styrakiewiez EG:** Dr E.G. Styrakiewiez (2 Lomond Road)

**Tak:** Dr A.E. Tak (531 Anlaby Road)

6. TAKE UP OF THE PHARMACY SCHEME

During the first three months of operation the scheme has provided a Pharmacy service to just 6 Sure Start parents. The pharmacists offered an explanation as to one of the reasons why this is. They all stated that they are all participating in both Sure Start and the WHPCT Pharmacy schemes and some confusion has arisen from this; mainly in terms of parents being able to determine the difference between the two schemes as parents who are registered with Sure Start are able to use both schemes if their doctor is registered to the WHPCT scheme.

Although efforts were made to contact the six parents who participated in the scheme, this was not possible as the details collected by the pharmacy were incomplete. All the pharmacies were also provided with feedback forms to distribute to parents who might use the scheme. However, no feedback forms were completed and returned.
7. THE WHPCT MINOR AILMENT SCHEME

This service is available to all patients registered with the surgeries participating in the scheme as identified below:

Dr S Scarfe (Orchard 2000 Medical Center)
Dr Blow and Partners (Orchard Park Health Center)
Dr Ayyub and Partners (Wheeler Street Health Care)
Dr Martin Smith and Partners (Sydenham House Surgery)
Dr Mather and Partners (The Oaks Medical Center)

The service is only available for minor illnesses identified below:

<table>
<thead>
<tr>
<th>Coughs</th>
<th>Sore Throat</th>
</tr>
</thead>
<tbody>
<tr>
<td>Temperature, aches and pains</td>
<td>Nasal Congestion</td>
</tr>
<tr>
<td>Hay Fever</td>
<td>Head Lice</td>
</tr>
<tr>
<td>Indigestion/Heartburn/Tummy upset</td>
<td>Diarrhea</td>
</tr>
<tr>
<td>Constipation</td>
<td>Teething</td>
</tr>
<tr>
<td>Insect bites and Stings</td>
<td>Contact dermatitis, Urticaria, pruritus</td>
</tr>
<tr>
<td>Mouth Ulcers</td>
<td>Athletes Foot</td>
</tr>
<tr>
<td>Vaginal Thrush</td>
<td>Threadworms</td>
</tr>
<tr>
<td>Dandruff</td>
<td>Hemorrhoids</td>
</tr>
</tbody>
</table>

Only Community Pharmacies who are committed to making staff available provide the service.

Patients willing to use the scheme must provide some evidence that they are registered to a participating practice. Such as a NHS card, practice record, pharmacy card and or be known to the pharmacist.
7.1 Duties of Participating Surgeries

All patients requesting appointments for symptoms matching the criteria identified can be offered this service using as long they do not pay for their prescriptions.

Patients presenting in person, accepting the service, should be issued with both a leaflet stamped by the practice for presentation at a participating community pharmacy and a service information leaflet.

Patients accepting transfer by phone will be advised to take evidence of identity and registration to one of the participating pharmacies. In the absence of an NHS card or pharmacy card the pharmacy may telephone the surgery to confirm registration.

Surgeries should co-operate and liaise with community pharmacists to activate the rapid referral procedure when required.

Participating GP surgeries should display official posters and provide leaflets promoting the service.

For patients under the age of 16, the parent/guardian can accept transfer into the scheme on behalf of the patient.

7.2 Duties of Participating Pharmacies

Patients should only be accepted into the service if the pharmacist can confirm their identity and has reasonable proof of registration with a participating GP.

All participating pharmacies will provide a professional consultation service for patients registered with participating GPs who present with one of the specified conditions.

The pharmacist will assess the patient’s condition. The consultation will consist of

- Patient assessment by pharmacist
• Provision of advice
• Provision of a medication, only if necessary, from the agreed formulary appropriate to the patient’s condition and the product license
• Either complete a new pharmacy card or make an entry onto existing card. Patients should be encouraged to hold only one card
• Pharmacist’s prescription shall be completed and sent to the PCT Pharmaceutical Adviser for payment.
• Enter details onto the PMR
• Normal rules of patient confidentiality apply
• The pharmacist should ensure that the patient has completed and signed the declaration of exemption of prescription charges (on FPPPharm.) and confirm this in the usual manner.

### 7.3 Rapid Referral Procedure

If the patient presents with symptoms indicating the need for an immediate consultation with the GP, the pharmacist should ring the surgery and make an appointment for the patient within the appropriate time frame. The rapid referral form should be faxed to the GP and a copy given to the patient. If the surgery is closed and/or the symptoms are sufficiently severe the patient should be advised to contact the on-call doctor or attend A & E immediately.

If the pharmacist suspects that the patient and/or parent is abusing the scheme they should alert the PCT Pharmaceutical Adviser or service co-ordinator.

Pharmacies will be required to complete a monthly summary sheet for each participating surgery and submit the FPPPharms attached to this sheet.

Feedback will be provided to the GP – to be agreed with each practice.

The pharmacist must provide evidence of completed further study within the area of minor ailments for example completion of the CPPE Minor Ailments course.
7.4 Expansion

During the period of this evaluation, the WHPCT has decided that over the coming months that their Pharmacy Scheme is to be expanded, and will include the all the minor ailments that the Sure Start scheme provides, as well as expand to incorporate more Doctors surgeries in the West Hull area.

8 SIMILARITIES AND DIFFERENCES BETWEEN THE SURE START AND THE WHPCT PHARMACY SCHEMES

Similarities
There are several similarities between the two schemes, the first being they are both schemes which offer patients direct access to advice, support, and medication for minor ailments without visiting a Doctor. Both schemes require proof of registration, either to a doctor’s surgery or to the Newington with Gipsyville Sure Start Programme. The two schemes offer payment to pharmacists to administer the schemes. All the pharmacists that operate the Sure Start scheme also operated the WHPCT scheme. Two of the Doctors practices are participating in both schemes. In addition to this, both schemes offer advice and over the counter medication for the following minor ailments:

- Temperature
- Coughs
- Diarrhea
- Nasal congestion

Differences
One scheme is offered to parents of 0-4 year old children registered to the Newington with Gipsyville Sure Start and the other is offered to any patients registered to participating G.P. practices, as long as they are not eligible to pay for their prescriptions. The Sure Start scheme offers treatment for six minor Ailments and the WHPCT scheme offers treatment for 18. The WHPCT appears to have
made stronger more rigorous links to the practices signed up to the scheme. In addition to this, the Sure Start scheme offers advice and over the counter medication for minor ailments, which the WHPCT does not, these are:

- Nappy Rash
- Dry Skin

9. CONCLUSION

The Sure Start pharmacy scheme provides a useful service to parents and ensures that they have a quick route to treating minor ailments, without having to access their local doctor. The scheme is therefore seen as a useful method of freeing up doctors time and lessening the unnecessary visits to the local Accident and Emergency department. However, the evidence shows that take-up of the scheme has been minimal. This is probably due to the fact that there are two very similar pharmacy schemes operating in the same area, through the same pharmacies, and parents are more likely to use the WHPCT scheme as it is more widely promoted through their local G.P and they do not have to be registered with Sure Start to use the scheme.

The study has shown that the scheme is not cost effective for the local programme. There has been six parents take up the scheme and this has resulted in the provision costing Sure Start £250.00 per parent, plus the additional cost of the over the counter medication supplied.

10. RECOMMENDATIONS

Due to the WHPCT planning to expand their provision to incorporate more G.Ps and all of the Minor Ailments that the Sure Start scheme provides, coupled with the take up of the Sure Start scheme being very low, the primary recommendation is to simply end the scheme, with immediate effect.

The secondary recommendation is to:
• Provide support to the WHPCT scheme, this can be done in several ways:

  o Firstly by referring parents to the WHPCT pharmacy scheme, ensuring that parents who do wish to use a pharmacy scheme can still do so.

  o Secondly to assist Sure Start parents to access the WHPCT pharmacy scheme by providing accurate information on the scheme to Sure Start parents.

  o Thirdly to market and promote the WHPCT pharmacy scheme by placing posters and leaflets in all future Sure Start venues.

The success and lessons of the scheme will be identified by evaluation work carried out by the WHPCT and a further recommendation would be to ensure that the local programme is involved in this work in order to support the pharmacy scheme in meeting the needs of Sure Start parents.