

# NHS PHARMACY FIRST SCOTLAND

## **What is it?**

NHS Pharmacy First Scotland (NHS PFS) is a consultation service designed to encourage the public to visit their community pharmacy as the first port of call for all minor illnesses and common clinical conditions. It is available in every Community Pharmacy in Scotland and replaces the Minor Ailments Service.

## **Who is eligible?**

Everyone registered with a GP practice in Scotland or the Defence Medical Services on a permanent or temporary basis (including care home residents).

People who live in Scotland (including gypsy or travellers / asylum seeker or dependant of an asylum seeker).

***Visitors to Scotland are excluded.***

**The narrative around the service nationally is intentionally designed not to set the expectation that a consultation will result in supply of medication, and this messaging should be carried through locally as well.**

## **What are the possible outcomes?**

The patient (or patient representative) will consult with a member of the pharmacy team, this can be in person or over the phone. The pharmacy team will assess their symptoms resulting in one or more of the following outcomes:

- Providing self-care advice to allow patient to manage their symptoms themselves
- Supply treatment for symptoms either via NHS or for the patient to purchase
- Refer the patient to another appropriate healthcare professional

There are some medicines available via PGD for the treatment of UTI, skin infections, impetigo and shingles as below.

- **NB there are strict exclusion criteria so please do not refer patients who will be excluded (see Table 1 below)**

Unlike the Minor Ailments Scheme only those medicines that appear on the [Pharmacy First Approved List](#) are available to be supplied as part of the patient's treatment (see Table 2 for the conditions included).

**Table 1 – Conditions where a PGD exists for treatment**

Condition	Patients potentially suitable for referral to NHS Pharmacy First Scotland
Cystitis (UTI)	<p>Women ages 16 – 65 <b>except:</b></p> <ul style="list-style-type: none"> <li>• Pregnant or breastfeeding women</li> <li>• Diabetes</li> <li>• Catheterised patients</li> <li>• Immunocompromised patients</li> <li>• Vaginal itch/discharge</li> <li>• Blood in the urine</li> <li>• Confused patients</li> <li>• Symptoms for &gt; 7 days</li> <li>• Had antibiotic treatment for UTI in last month</li> <li>• 2 or more UTI episodes in last 6 months</li> <li>• 3 or more UTI episodes in last 12 months</li> <li>• Taking a regular antibiotic to prevent UTIs</li> <li>• Symptoms suggesting an upper urinary tract infection such as: Fever, chills, nausea, vomiting, acute onset back pain, loin pain, flank tenderness or systemically unwell</li> </ul>
Impetigo	<p>All patients over 2 years old <b>except:</b></p> <ul style="list-style-type: none"> <li>• Impetigo in last 3 months</li> <li>• Multiple sites of skin infection</li> <li>• Underlying skin condition at same site as impetigo</li> <li>• Systemically unwell</li> </ul>
Shingles	<p>All patients over 18 years <b>except:</b></p> <ul style="list-style-type: none"> <li>• Rash affecting head, neck, arms or legs (only rash on torso can be treated on NHS PFS)</li> <li>• Rash involving multiple adjacent or non-adjacent dermatomes or where the rash spreads across both sides of the body</li> <li>• Rash present for more than 72 hours</li> <li>• Pregnant or breastfeeding women</li> <li>• Systemically unwell including symptoms of headache or fever</li> <li>• Recurrent shingles (2 or more episodes in patient's lifetime)</li> <li>• Severe pain not responding to OTC analgesics</li> </ul> <p>There are additional PGD exclusions for aciclovir but are relatively rare. Community pharmacists will refer a patient presenting with these back to the practice for assessment.</p>
<b>Skin Infections</b> - Infected insect bite  - Cellulitis (patient afebrile and healthy other than cellulitis)  - Acute paronychia with signs of cellulitis	<p>All patients over 18 years <b>except:</b></p> <ul style="list-style-type: none"> <li>• Cellulitis where patient has features suggestive of systemic infection e.g. febrile/feeling unwell</li> <li>• Cellulitis related to animal or human bite</li> <li>• Cellulitis related to surgical wound or chronic wound/leg ulcer/burns</li> <li>• Any sign of cellulitis on the face / around the eye (periorbital/ pre-septal/orbital cellulitis)</li> <li>• Cellulitis on arms or torso <b>NOT</b> linked to an insect bite</li> <li>• Recurrent cellulitis (more than one episode in 12 months)</li> <li>• Acute paronychia with signs of cellulitis AND a collection of pus requiring drainage AND/OR in severe pain</li> <li>• Diabetic foot infection</li> </ul>

**Table 2 – General Conditions**

	Condition	Patients potentially suitable for referral to NHS Pharmacy First Scotland
A	Acne	All patients unless severe
	Allergies	All patients over 1 year old
	Athletes Foot	All patients (caution if diabetic)
B	Bacterial Conjunctivitis	<b>Refer to optometry as first option if available</b> All patients over 2 years old without pain or visual disturbance
D	Dry Eyes	<b>Refer to optometry as first option if available</b> All patients over 18 years old without pain or visual disturbance or chronic symptoms
	Dry Skin	All patients except those who have failed to respond to treatment or have symptoms indicative of infection
E	Earache	All patients except: <ul style="list-style-type: none"> <li>• Systemically unwell</li> <li>• Fluid leaking from ear</li> <li>• Swelling around ear</li> <li>• Hearing loss/change in hearing</li> <li>• Something stuck in the ear</li> <li>• Children under 2 with pain in both ears</li> </ul>
H	Haemorrhoids (piles)	All patients over 18 years old except: <ul style="list-style-type: none"> <li>• Duration longer than 7 days despite treatment from pharmacy</li> <li>• Blood mixed in stool rather than on surface</li> </ul>
	Hayfever	All patients over 1 year old
	Headlice	All patients unless inflammation of scalp is present
M	Mouth Ulcers	All patients except: <ul style="list-style-type: none"> <li>• Ulcer present for &gt;3 weeks</li> <li>• Systemically unwell</li> <li>• Significant symptoms (multiple/large lesions)</li> </ul>
N	Nappy Rash	All patients except: <ul style="list-style-type: none"> <li>• Standard treatment fails or symptoms persist</li> <li>• Signs of infection or eczema</li> </ul>
R	Ringworm	All patients except: <ul style="list-style-type: none"> <li>• Symptoms persist despite treatment</li> </ul>
S	Scabies	All patients over 2 years old
	Sore Throat	All patients except: <ul style="list-style-type: none"> <li>• Systemically unwell</li> <li>• No improvement in symptoms for &gt;7 days</li> <li>• Difficulty swallowing liquids or associated breathing problems</li> </ul>
T	Threadworms	All patients over 2 years old except: <ul style="list-style-type: none"> <li>• Pregnant &amp; breastfeeding women</li> </ul>
	Thrush	Women between 16 – 60 years old except: <ul style="list-style-type: none"> <li>• Pregnant women</li> <li>• &gt;2 episodes in 6 months</li> <li>• Symptoms still present 7-14 days after treatment</li> <li>• Immunocompromised patients</li> <li>• Other symptoms eg frequent urination/vaginal bleeding etc</li> </ul>
	Oral Thrush	All patients over 4 months
W/V	Warts & Verrucae	All patients except: <ul style="list-style-type: none"> <li>• Warts on face or anogenital region</li> </ul>