

Publication Report



Prescribing & Medicines: Minor Ailments Service (MAS)

Financial Year 2012/13

Publication date – 25 June 2013



Contents

Introduction	2
Background	2
Service description	2
Treatments	2
Key points	4
Results and Commentary	5
Registrations	5
NHS Scotland	5
NHS Board.....	6
Treatments	7
NHS Scotland	7
NHS Board.....	7
Glossary.....	11
List of Tables.....	12
Contact.....	13
Further Information.....	13
Rate this publication.....	13
A1 – Background Information	14
Service outline.....	14
Top 10 – assumptions	14
A3 – Early Access details (including Pre-Release Access)	18
A4 – ISD and Official Statistics.....	19

Introduction

The Minor Ailments Service (MAS) was introduced to allow community pharmacies to provide direct care for common conditions. MAS went live across Scotland in July 2006, following the success of pilots in NHS Ayrshire & Arran and NHS Tayside.

Background

Minor ailments are generally described as common, often self-limiting, conditions. They normally require little or no medical intervention and are usually managed through self-care and the use of products that are available to buy without a doctor's prescription.

Consulting and advising on the treatment of minor ailments has always been a core service provided by community pharmacists. An average community pharmacist advises around ten members of the public a day on the treatment of such conditions, which equates to over 11,500 consultations a day in Scotland.

The pharmacist's role in managing minor ailments was initially recognised in ["The Right Medicine – A Strategy for Pharmaceutical Care in Scotland"](#).

It made a commitment to introduce schemes between general practitioners and community pharmacists to allow patients to use their pharmacy as the first port of call for the treatment of common illnesses within the NHS. In addition it outlined plans to develop a new system of remuneration for community pharmacy contractors that would provide incentives to modernise and deliver quality services¹.

Service description

[The Minor Ailments Service \(MAS\)](#) aims to support the provision of direct pharmaceutical care within the NHS by community pharmacists. It allows eligible people to register with the community pharmacy of their choice for the consultation and treatment of common self-limiting conditions. The pharmacist advises, treats or refers the person (or provides a combination of these actions) according to their needs. The eligibility criteria for MAS is detailed in [NHS Circular PCA\(P\)\(2011\)06](#). A patient registers for MAS for a period of 12 months. If there is further activity in that time period, the registration is extended for a further 12 months from the date of activity. If the patient is no longer eligible for free prescriptions or there was no further activity centrally recorded, the patient registration will lapse.

Treatments

During a consultation, a pharmacist has the choice of

- giving advice only
- treating
- referring the patient to another healthcare professional
- or a combination of the above.

¹ [Implementation of the Minor Ailment Service](#), NHS Education for Scotland (Pharmacy), June 2006.

When a pharmacist chooses to provide a treatment they do so in accordance with the national formulary for MAS, which is based on the British National Formulary (BNF) and the [Scottish Drug Tariff](#). In addition, NHS Boards have developed local MAS formularies in line with advice provided to other prescribers. Further details of both the national formulary and local NHS Board MAS formularies are available from the [community pharmacy website](#).

A CP2 form is used to both register a patient for MAS and to record the outcome of the MAS consultation (advice, treatment, referral or a combination of those). It is printed electronically by a community pharmacist's computer system. A CP1 form is completed manually (handwritten) and is used as a back up in the event that a CP2 form cannot be printed.

For the June 2013 publication a change has been made to the way that populations are calculated for the MAS tables. NRS (formerly GROS) Mid-year population estimates as at June 2011 have been used where previously GP list sizes were used as a proxy for population. This has been done to give more accurate estimates per person, and to allow cross-national comparison. Previous publications should not be used for comparison of population level data.

Key points

- The total number of MAS registrations increased by 5.2% between April 2012 and March 2013, indicating that the number of new registrations is slightly more than the number of lapsed registrations.
- In Scotland, 99.9% (1242 of 1243) of community pharmacies have patients registered for MAS at 31st March 2013.
- At 31st March 2013, 893,396 people were registered for the service. Across Scotland this equates to 17.0% of the population registered for MAS.
- Between April 2012 and March 2013 over 2 million items were dispensed under MAS at a cost of £4.45 million.
- MAS accounted for 2.15% of all items dispensed by community pharmacies in Scotland, with paracetamol the top item dispensed.

Results and Commentary

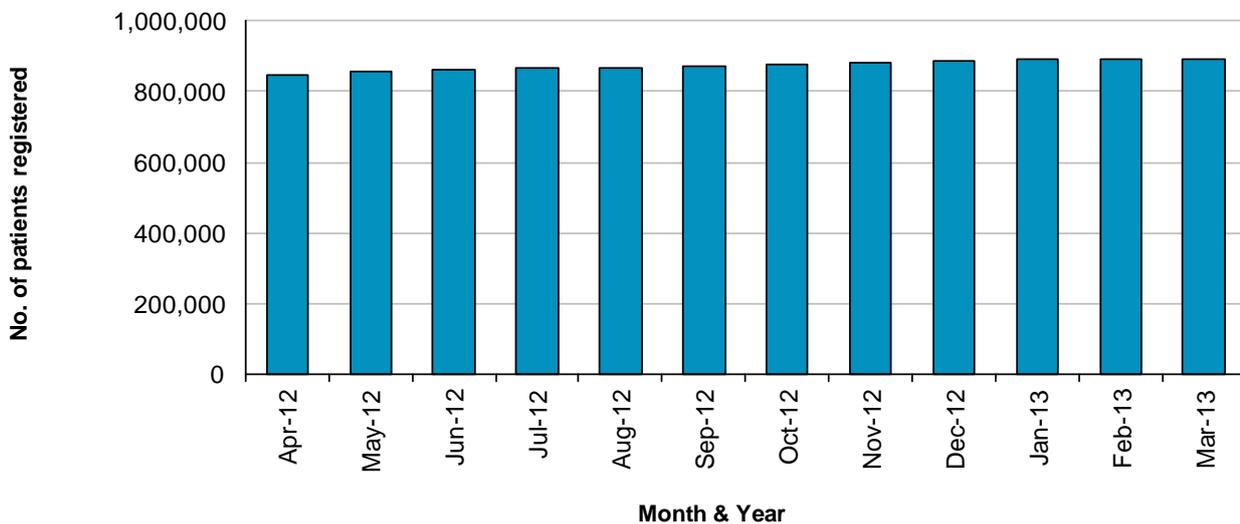
Registrations

The MAS registration data has been reviewed up to the period March 2013. Please note that for the purpose of these analyses, registrations are counted on the last day of the month and patients are counted in each month they are registered.

NHS Scotland

Figure 1 below shows the number of patients who were registered for MAS in Scotland by month, April 2012 to March 2013.

Figure 1 - Number of patients registered for MAS in Scotland, April 2012 to March 2013

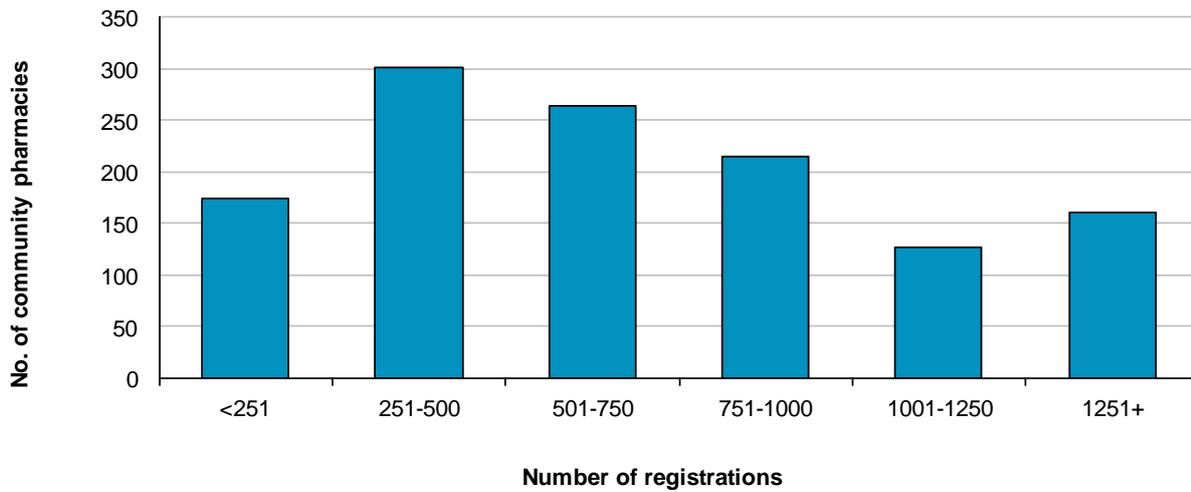


Source: Prescribing Information System, ISD Scotland

Figure 1 shows that the total number of MAS registrations increased by 5.2% between April 2012 and March 2013, indicating that the number of new registrations is slightly more than the number of lapsed registrations.

The number of community pharmacies by the number of patient registrations is shown in Figure 2.

Figure 2 - Number of community pharmacies in Scotland and number of patient registrations, March 2013

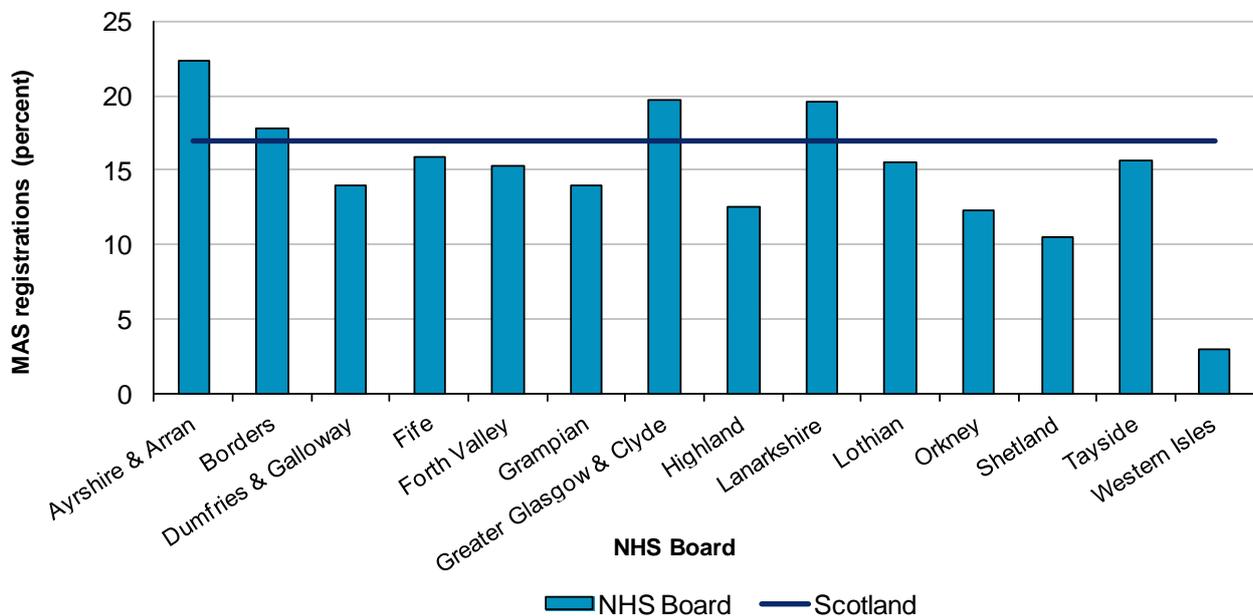


Source: Prescribing Information System, ISD Scotland

In March 2013, 99.9% of all community pharmacies in Scotland had one or more patients registered for MAS.

NHS Board

Figure 3 - MAS registrations per head of population by NHS Board, March 2013



Source: Prescribing Information System, ISD Scotland

Overall, 17.0% of the population in Scotland are registered with a pharmacy for MAS. Figure 3 shows that NHS Ayrshire and Arran has the highest percentage of the population registered at 22.4% in March 2013, while NHS Western Isles has the lowest at 3.0% of the population for the same time period.

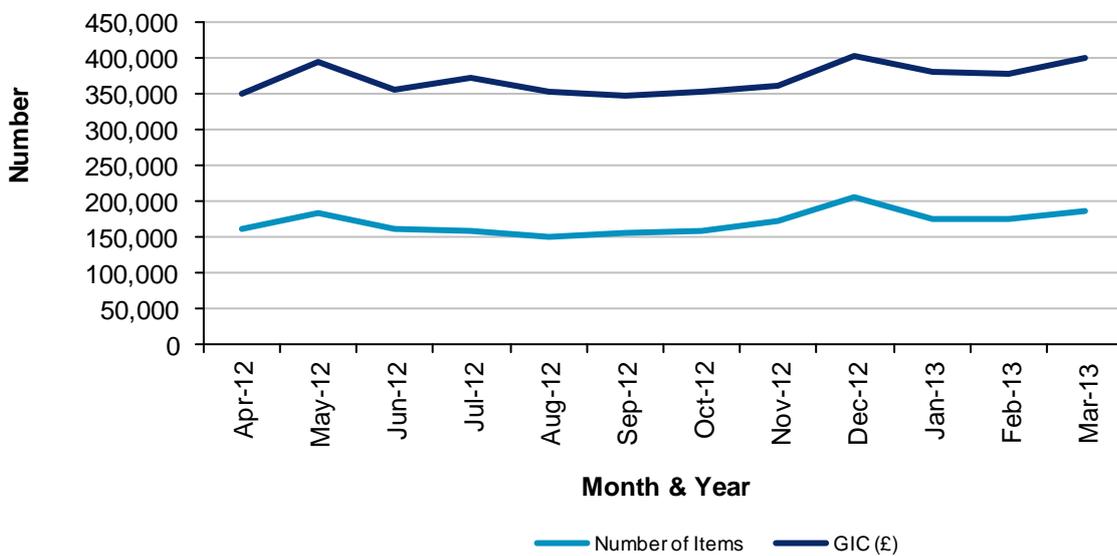
Treatments

The MAS treatments data has been reviewed up to the period March 2013. Please note that for the purposes of these analyses, data are provided for prescriptions written on both CP1 and CP2 prescription forms only.

NHS Scotland

Figure 4 shows the number of MAS items dispensed and GIC paid each month during financial year 2012/13.

Figure 4 – The number of MAS items dispensed and Gross Ingredient Cost paid in Scotland, April 2012 to March 2013



Source: Prescribing Information System, ISD Scotland

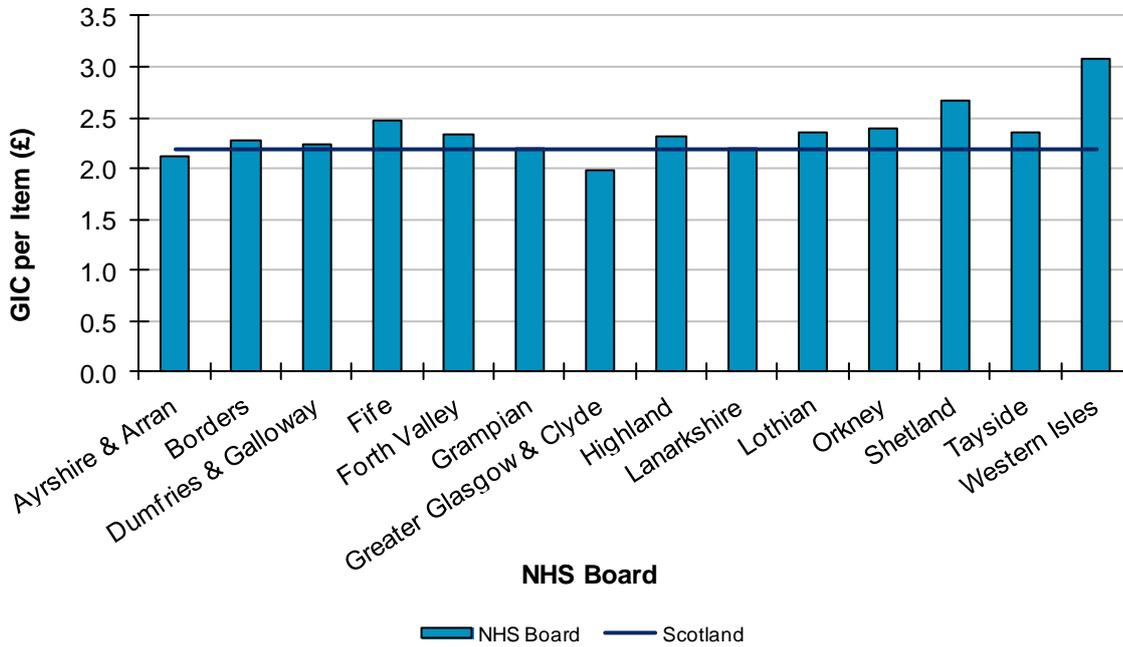
In financial year 2012/13 over 2 million items were dispensed for minor ailments, with the number of items peaking in May 2012, December 2012 and March 2013. The number of dispensed items was 8.2% higher in 2012/13 than in 2011/12.

The total GIC for MAS items dispensed during financial year 2012/13 was £4.45 million, with an average cost per item of £2.18. The GIC for items dispensed under MAS in 2012/13 was 13.1% higher than in 2011/12.

NHS Board

Figure 5 shows the average cost (GIC) per MAS item dispensed by NHS Boards during April 2012 to March 2013.

Figure 5 – The average GIC per MAS item dispensed by NHS Board, April 2012 to March 2013

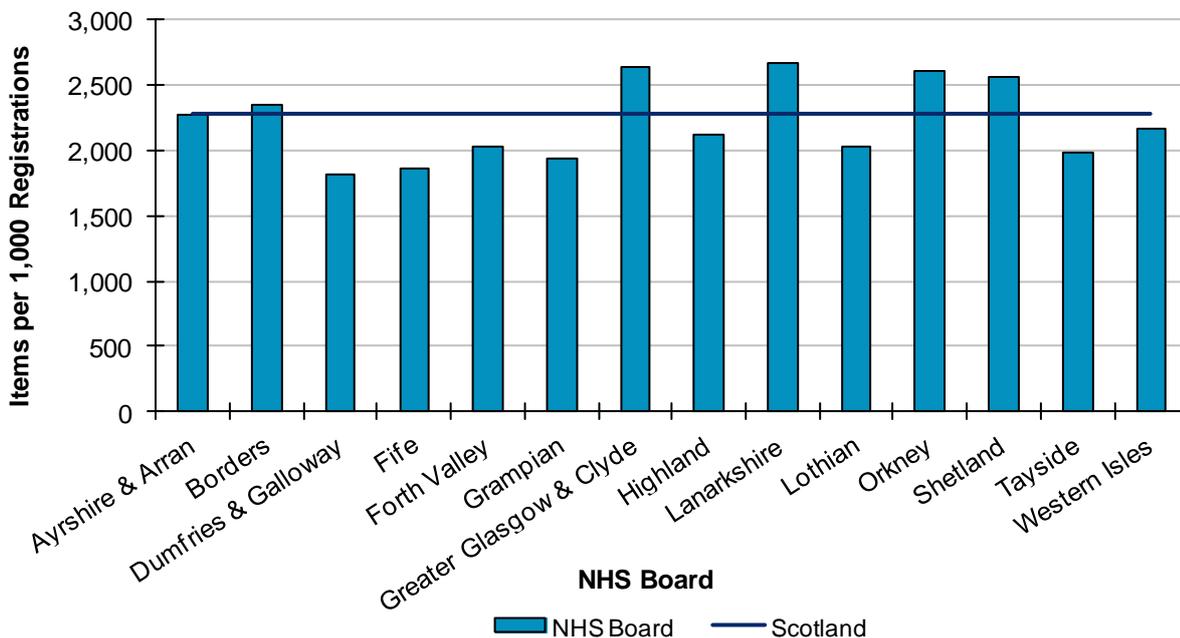


Source: Prescribing Information System, ISD Scotland

The average cost per item varied slightly between NHS Boards. NHS Western Isles had the highest average cost per item (£3.07) while NHS Greater Glasgow & Clyde had the lowest average cost of all the boards (£1.98).

Figure 6 shows the number of items dispensed per 1,000 MAS registrations by NHS Board between April 2012 and March 2013.

Figure 6 – Items dispensed in Scotland per 1,000 MAS registrations by NHS Board, April 2012 to March 2013

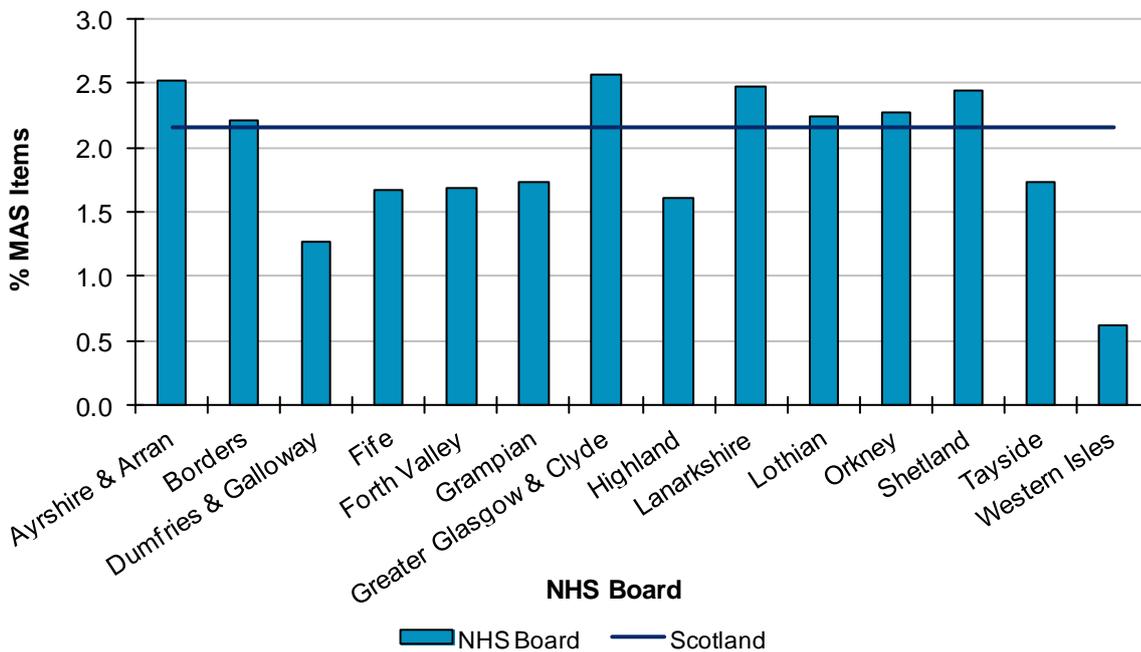


Source: Prescribing Information System, ISD Scotland

Across Scotland 2,278 items were dispensed per 1,000 MAS registrations, with MAS accounting for 2.15% of all items dispensed in Scotland by community pharmacists. NHS Lanarkshire dispensed the greatest number of items per 1,000 MAS registrations (2,670 items) while NHS Dumfries & Galloway dispensed the least (1,815 items).

Figure 7 shows what percentage of all items dispensed by the NHS Boards can be attributed to MAS during the last financial year.

Figure 7 – MAS items as a percent of all items dispensed by NHS Board, April 2012 to March 2013



Source: Prescribing Information System, ISD Scotland

The highest proportion of MAS dispensing is in NHS Greater Glasgow & Clyde (2.6% of items), closely followed by NHS Ayrshire & Arran (2.5% of items). MAS dispensing as a proportion of all dispensing is lowest in NHS Western Isles (0.6% of items).

Table 1 below shows the top 10 MAS items dispensed for 2012/13 and gives examples of what the drugs might be used for.

Table 1 – Top ten MAS items dispensed and uses, 2012/13

Drug Name	Examples of use in MAS¹	Number of Items
Paracetamol	Pain, fever	456,391
Ibuprofen	Pain, fever, inflammation	151,341
Simple Linctus ²	Cough	112,343
Emollients	Dry scaly skin	79,588
Dimeticone	Scabies, head lice	73,969
Chlorphenamine Maleate	Hayfever	64,029
Chloramphenicol	Eye infections	62,118
Compound Alginic Acid Preparations	Indigestion / heartburn	54,056
Clotrimazole	Vaginal thrush, athlete's foot	52,951
Cetirizine	Hay fever, other allergic reactions	41,991

Note: 1. The reason for prescribing is not captured on a prescription form. This section identifies the potential use of these drugs when prescribed in MAS.
 2. Chemical name is citric acid but is commonly known as simple linctus.

Source: Prescribing Information System, ISD Scotland

The top ten remains unchanged for 2012/13 however the rank order is different compared to 2011/12. Paracetamol was again the most frequently prescribed MAS item, representing 22.4% of all MAS items.

Glossary

Gross Ingredient Cost (GIC)	Cost of drugs and appliances reimbursed before deduction of any dispenser discount (note this definition differs from other parts of the UK).
Community Pharmacy	A retail pharmacy outlet holding a contract with a Health Board to provide NHS pharmaceutical services.
Prescription item	An item is an individual product prescribed e.g.100 aspirin tablets of 300mg.
Prescription form	A prescription form that can contain up to three items.
British National Formulary	A standard classification of drugs into conditions of primary therapeutic use, the aim is to provide prescribers, pharmacists and other healthcare professionals with sound up-to-date information about the use of medicines.
Minor Ailment Service (MAS)	Minor ailments are generally described as common, often self-limiting, conditions. They normally require little or no medical intervention and are usually managed through self-care and the use of products that are available to buy without a doctor's prescription.
CP2 / CP1	A CP2 form is used to both register a patient for MAS and to record the outcome of the MAS consultation (advice, treatment, referral or a combination of those). It is printed electronically by a community pharmacist's computer system. A CP1 form is completed manually (handwritten) and is used as a back up in the event that a CP2 form cannot be printed.
Registration	A registration of a single eligible person to register with the community pharmacy of their choice for use of the Minor Ailments Service. A person must be registered with a Scottish GP practice and fulfil certain criteria to be eligible for the service (see the Community Pharmacy website for further details). A patient registers for MAS for a period of 12 months. If there is further activity in that time period, the registration is extended for a further 12 months from the date of activity. If the patient is no longer eligible for free prescriptions or there was no further activity centrally recorded, the patient registration will lapse.
Treatment	During a MAS consultation, a pharmacist has the choice of giving advice only, treating, referring the patient to another healthcare professional, or a combination of the above. A treatment refers to a consultation in which a pharmacist dispenses a drug which is approved for MAS dispensing in accordance with the national formulary for MAS, which is based on the British National Formulary (BNF) and the Scottish Drug Tariff. Additionally NHS Boards have developed local MAS formularies in line with advice provided to other prescribers.
Dispensing Health Board	The NHS Board with which the dispenser holds a dispensing contract, i.e. Community Pharmacy, Dispensing Doctor or Appliance Supplier.
Over the counter	A drug for which a prescription is not needed.

List of Tables

Table No.	Name	Time period	File & size
1	MAS Registrations in Scotland	Apr 2012 to Mar 2013	Excel [139kb]
2	MAS Treatments in Scotland	Apr 2012 to Mar 2013	Excel [305kb]

Contact

Andrew Smith

Information Analyst

andrewsmith11@nhs.net

0131 275 7103

Catriona Young

Senior Information Analyst

catriona.young@nhs.net

0131 275 6599

Further Information

Further information can be found on the [ISD website](#)

Rate this publication

[Click here](#) to provide feedback and rate this publication.

Appendix

A1 – Background Information

Service outline

The Minor Ailment Service (MAS) was rolled out nationwide in July 2006 and is part of the Community Pharmacy (CP) contract where the aim is to modernise and improve primary and community care services. Individuals who are eligible for MAS can register with the community pharmacy of their choice. In order to be eligible an individual must be registered with a GP and also fulfill at least one of the following criteria².

- persons who are under 16 years of age or under 19 years of age and in full-time education
- persons who are aged 60 years or over
- persons who have a valid maternity exemption certificate, medical exemption certificate, or war pension exemption certificate
- persons who get Income Support, Income-based Jobseeker's Allowance, Income-related Employment and Support Allowance, or Pension Credit Guarantee Credit
- persons who are named on, or are entitled to, an NHS tax credit exemption certificate or a valid HC2 certificate.

The MAS specification details that the core objectives of the service include shifting the balance of care from GPs and nurses to community pharmacies where appropriate and help to address health inequalities. There are three status conditions for MAS; registered, lapsed and withdrawn. Each time a registered individual is treated through MAS their registration is extended for the next 12 months. If after 12 months an individual has had no activity then their registration will have lapsed. If an individual is no longer eligible for MAS then their registration will be withdrawn. Community pharmacies are remunerated for the fees of providing services and the cost of drugs dispensed and a capitation payment is received for the number of individuals registered.

Top 10 – assumptions

A drug may be available in a number of formulations, such as tablets and syrups, produced by different manufacturers. For example, paracetamol includes aggregated data for all preparations of that drug, both branded and generic.

² This information was sourced from [Community Pharmacy Scotland](#).

A2 – Publication Metadata (including revisions details)

Metadata Indicator	Description
Publication title	NHS Scotland Prescribing – Minor Ailment Service Registrations and Treatments
Description	Summary and detailed statistics on prescribing and dispensing in the community in Scotland for minor ailments service.
Theme	Health and Social Care
Topic	Health Care Personnel, Finance and Performance
Format	Excel workbooks
Data source(s)	Prescribing Information System (PIS). All data held in PIS is sourced from Practitioner Services Division (PSD) within NHS National Services Scotland who are responsible for the remuneration and reimbursement of dispensing contractors within Scotland. National Register for Scotland (formerly GROS): Mid-year population estimates taken from NRS.
Date that data are acquired	Data is acquired on a monthly basis from PSD following payment approximately 2 calendar months after the end of the month being claimed for payment by contactors
Release date	25 June 2013
Frequency	Annual
Timeframe of data and timeliness	Data covering year to 31 March 2013
Continuity of data	Data is held in PIS for the most recent 10 years and is stored in archive files back to 1993/94. The definition of the main measures such as gross ingredient cost and number of items are unchanged over this period. Types and value of dispensing fees are agreed with the Scottish Government and set annually. Details can be found in the Scottish Drug Tariff and in Primary Care circulars issued by the Government. Drug products are first licensed as proprietary medicines but generic versions often appear once the original patent expires. This can affect the price and uptake of these drugs. The Scottish Government sets the reimbursement price of generic drug products via the Scottish Drug Tariff which is updated and issued quarterly.
Revisions statement	Data are sourced from monthly pharmacy payments data on an ongoing basis therefore once published there is no routine requirement to revise historical data. However occasionally adjustments are made to pharmacy payments retrospectively by PSD for example due to an administrative error. Retrospective revisions can also occur the classification of drugs in the British National Formulary (BNF) . Where either of these occur and are deemed to be significant in line with ISD's Revisions policy, a revision will be made to published data. This will be notified on the website.
Revisions relevant to this publication	In this publication a change has been made to the way that populations are calculated for the MAS tables. NRS

	(formerly GROS) Mid-year population estimates have been used where previously GP list sizes were used as a proxy for population. This change has been made to give more accurate estimates per person, and to allow cross-national comparison. Previous publications should not be used for comparison of population level data.
Concepts and definitions	The data published in all these releases correspond to prescriptions that have been dispensed by community pharmacies in Scotland. This includes prescriptions which were issued in another UK country but dispensed in Scotland. These data do not include prescription drugs that were supplied and administered to patients in a hospital setting.
Relevance and key uses of the statistics	These statistics are the primary source of data used to monitor the national community drugs bill within Scotland and the pharmacy contract agreed with dispensing contractors. They are also used to monitor national and local prescribing indicators covering both the quality and efficiency of prescribing in general practice.
Accuracy	The data is sourced from a payment system and routine monthly checks are carried out by PSD on a random sample of approximately 5% of prescription payments. These check all data captured for payment and the accuracy of the payment calculation and have a target accuracy of 98% which is routinely met. Data that is captured but is not mandatory for payment purposes can be of lower quality, principally this includes the prescriber code which links a prescription back to the individual prescriber e.g. GP and their organisation including NHS Board. Routine monitoring of unallocated prescriptions is carried out and correct codes are applied before publication. This ensures that unallocated prescriptions account for under 2% of all prescriptions. For remaining unallocated prescriptions, the prescribing NHS Board is assumed to be the same as the dispensing NHS Board.
Completeness	The Prescribing Information System holds information on 100% of NHS Scotland prescriptions dispensed within the community and claimed for payment by a pharmacy contractor (i.e. pharmacy, dispensing doctor or appliance supplier). It does not include data on prescriptions dispensed but not claimed (likely to be very small) or prescriptions prescribed but not submitted for dispensing by a patient. Some research have estimated these latter prescriptions to account for around 6% of all prescriptions issued to patients. It is not possible to determine from payment data how much of the medicine dispensed to patients is actually taken in accordance with dosage instructions.
Comparability	The main measures of drug ingredient cost and volumes of items dispensed by community pharmacies are comparable across the UK countries. However it should be noted that the Gross Ingredient Cost (GIC) within Scotland is

	equivalent to the Net Ingredient Cost (NIC) in England, i.e. the reimbursement cost of drugs before any pharmacy discounts are applied. Also each country determines its own dispensing fees based on separate contractual arrangements with dispensing contractors in each country. A common formulary called the British National Formulary (BNF) is used to classify drugs based on therapeutic use. NRS (formerly GROS) Mid-year population estimates have been used where previously GP list sizes were used as a proxy for population. Previous publications should not be used for comparison of population level data.
Accessibility	It is the policy of ISD Scotland to make its web sites and products accessible according to published guidelines .
Coherence and clarity	All prescribing tables are accessible via the ISD website . Prescribing statistics are presented within excel spreadsheets for NHS Scotland and where appropriate broken down by NHS Board.
Value type and unit of measurement	The main units of measure of drug reimbursement costs are Gross Ingredient Cost (GIC) and Net ingredient cost (NIC) quantity. The latter takes account of pharmacy discounts, the rates for which are set by the Scottish Government in the Scottish Drug Tariff. There are a large number of individual dispensing remuneration fees paid to dispensing contractors details of which can be found in the Scottish Drug Tariff. Further details and definitions can be found in the glossary .
Disclosure	The ISD protocol on Statistical Disclosure Protocol is followed.
Official Statistics designation	National Statistics (Legacy designation, awaiting final designation by UK Statistics Authority).
UK Statistics Authority Assessment	Assessment by UK Statistics Authority completed and assessment report issued.
Last published	26-06-2012
Next published	24-06-2014
Date of first publication	28-06-2011
Help email	NSS.isdprescribing@nhs.net
Date form completed	06-06-2013

A3 – Early Access details (including Pre-Release Access)

Pre-Release Access

Under terms of the "Pre-Release Access to Official Statistics (Scotland) Order 2008", ISD are obliged to publish information on those receiving Pre-Release Access ("Pre-Release Access" refers to statistics in their final form prior to publication). The standard maximum Pre-Release Access is five working days. Shown below are details of those receiving standard Pre-Release Access and, separately, those receiving extended Pre-Release Access.

Standard Pre-Release Access:

Scottish Government Health Department
NHS Board Chief Executives
NHS Board Communication leads

Extended Pre-Release Access

Extended Pre-Release Access of 8 working days is given to a small number of named individuals in the Scottish Government Health Department (Analytical Services Division). This Pre-Release Access is for the sole purpose of enabling that department to gain an understanding of the statistics prior to briefing others in Scottish Government (during the period of standard Pre-Release Access).

Scottish Government Health Department (Analytical Services Division)

A4 – ISD and Official Statistics

About ISD

Scotland has some of the best health service data in the world combining high quality, consistency, national coverage and the ability to link data to allow patient based analysis and follow up.

Information Services Division (ISD) is a business operating unit of NHS National Services Scotland and has been in existence for over 40 years. We are an essential support service to NHSScotland and the Scottish Government and others, responsive to the needs of NHSScotland as the delivery of health and social care evolves.

Purpose: To deliver effective national and specialist intelligence services to improve the health and wellbeing of people in Scotland.

Mission: Better Information, Better Decisions, Better Health

Vision: To be a valued partner in improving health and wellbeing in Scotland by providing a world class intelligence service.

Official Statistics

Information Services Division (ISD) is the principal and authoritative source of statistics on health and care services in Scotland. ISD is designated by legislation as a producer of 'Official Statistics'. Our official statistics publications are produced to a high professional standard and comply with the Code of Practice for Official Statistics. The Code of Practice is produced and monitored by the UK Statistics Authority which is independent of Government. Under the Code of Practice, the format, content and timing of statistics publications are the responsibility of professional staff working within ISD.

ISD's statistical publications are currently classified as one of the following:

- National Statistics (ie assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (ie legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (ie still to be assessed by the UK Statistics Authority)
- other (not Official Statistics)

Further information on ISD's statistics, including compliance with the Code of Practice for Official Statistics, and on the UK Statistics Authority, is available on the [ISD website](#).

The United Kingdom Statistics Authority has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the Code of Practice for Official Statistics. Designation can be broadly interpreted to mean that the statistics:

- meet identified user needs;
- are well explained and readily accessible;
- are produced according to sound methods, and
- are managed impartially and objectively in the public interest.

Once statistics have been designated as National Statistics it is a statutory requirement that the Code of Practice shall continue to be observed.