

Publication Report



Minor Ailments Service (MAS) Registrations

September 2008 – September 2010

Publication date – 29 March 2011



Contents

Contents.....	1
About ISD.....	2
Official Statistics.....	2
Introduction	3
Background	3
Service description	3
Key points	4
Results and Commentary.....	5
NHS Scotland.....	5
NHS Board	6
Glossary.....	8
Contact.....	10
Further Information.....	10
Appendix	11
A1 – Background Information	11
How the data is obtained	11
Pilot Scheme	11
A2 – Publication Metadata (including revisions details).....	12
A3 – Early Access details (including Pre-Release Access)	15

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 (i.e. assessed by the UK Statistics Authority as complying with the Code of Practice)
- National Statistics (i.e. legacy, still to be assessed by the UK Statistics Authority)
- Official Statistics (i.e. 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](#).

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 role 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 services'.

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. A person must be registered with a Scottish GP practice and exempt from prescription charges to be eligible for the service.

ISD is not responsible for the contents of external internet sites.

ISD also collects and reports on the latest [MAS Treatments](#) data.

Key points

- There is an increasing trend in registrations since calendar year 2008, indicating that in the majority of months the number of new registrations is greater than the number of lapsed registrations.
- In Scotland, 99.8% of community pharmacies have patients registered for MAS at 30th September 2010.
- At 30th September 2010, 770,526 people were registered for the service. On average 14.0% of those registered with a GP in Scotland are also registered for MAS.

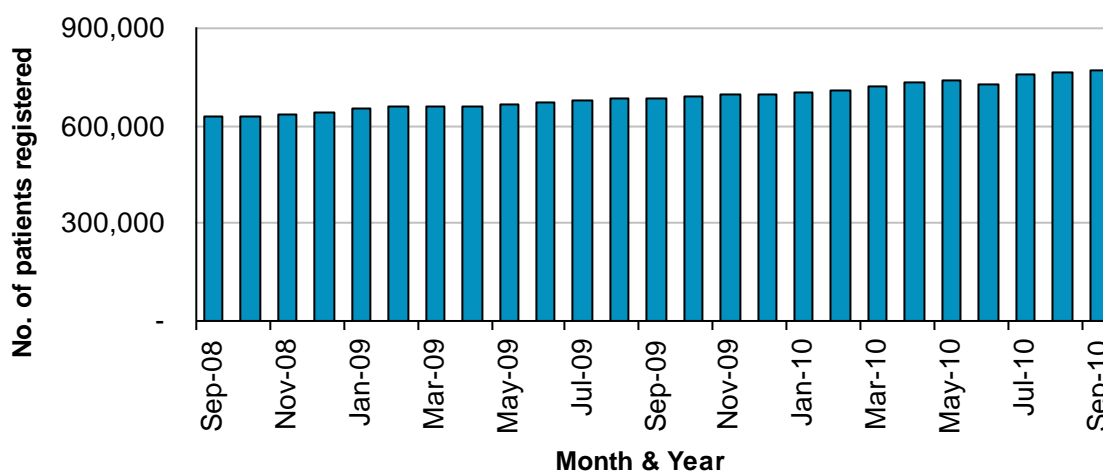
Results and Commentary

The MAS registration data has been reviewed up to the period September 2010. 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 over the past two years by month, from September 2008 to September 2010.

Figure 1 - Number of patients registered¹ for MAS in Scotland, September 2008 to September 2010



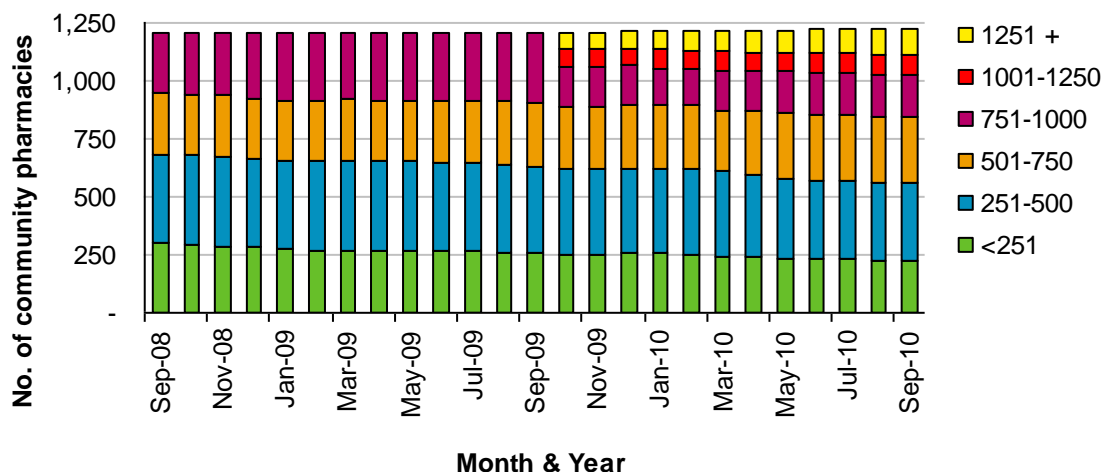
Note: 1. Number of patients registered on the last day of the month

Source: Prescribing Information System, ISD Scotland

It shows that, from the national roll out in 2006, there has been an increasing trend in registrations, indicating that in the majority of months the number of new registrations is greater than the number of lapsed registrations.

Figure 2 below shows the number of community pharmacies which fall into the different MAS registration bandings.

Figure 2 - Number of community pharmacies in Scotland and number of patient registrations¹, September 2008 to September 2010



Note: 1. The Minor Ailments Service capitation payment banding structure changed from a four band to six band structure in October 2009. Prior to this band four measured patient registrations greater than 750.

Source: Prescribing Information System, ISD Scotland

In September 2010, 99.8% of all community pharmacies in Scotland had one or more patients registered for MAS. The total number of registrations increased from September 2008 to September 2010 as more pharmacies moved into the higher registration groupings.

NHS Board

Information on the dispensing NHS Board to which a contractor is associated with has also been analysed. Figure 3 shows MAS registrations as a percentage of GP population by NHS Board.

NHS Board ciphers are displayed on figure 3 for reason of clarity. The table below provides a translation between the cipher and the NHS Board name. Please note that NHS Argyll and Clyde ceased to exist as a single entity from April 2006. Argyll and Bute was absorbed into NHS Highland and the remainder into NHS Greater Glasgow to become NHS Greater Glasgow and Clyde.

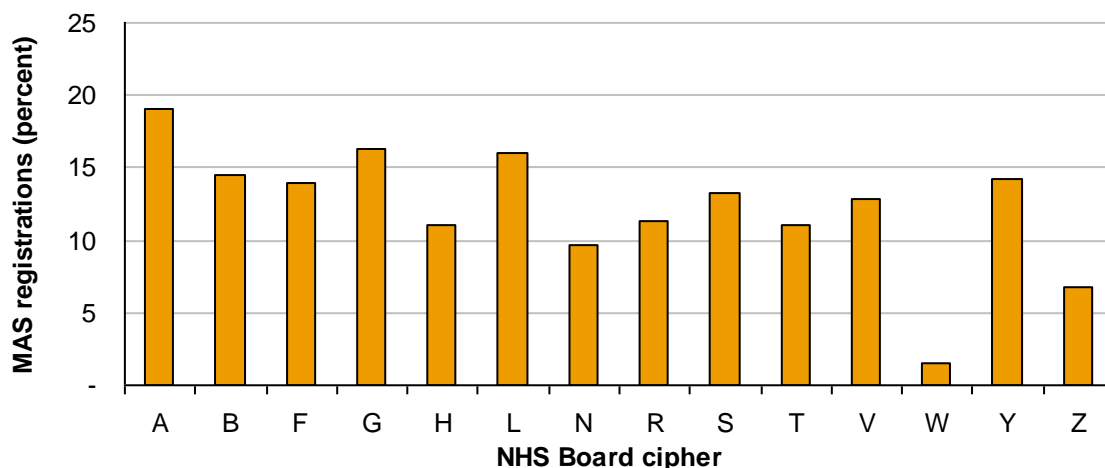
Table 1 - NHS Board Cipher – Translation

NHS Board Cipher	Name
A	Ayrshire & Arran
B	Borders
F	Fife
G	Greater Glasgow and Clyde
H	Highland
L	Lanarkshire
N	Grampian
R	Orkney
S	Lothian
T	Tayside
V	Forth Valley
W	Western Isles

Y	Dumfries & Galloway
Z	Shetland

Source: Prescribing Information System, ISD Scotland

Figure 3 - MAS registrations¹ as a percent of GP practice populations² by NHS Board, September 2010



Note: 1. Patients registered at 30th September 2010
 2. Practice populations at 1st September 2010

Source: Prescribing Information System, ISD Scotland

On average, 14.0% of patients registered with a GP in Scotland are also registered with a pharmacy for MAS. Of the NHS Boards, NHS Ayrshire and Arran had the highest percentage of registrations at both September 2009 and September 2010. NHS Greater Glasgow & Clyde was the next highest at September 2009 and is also second highest for September 2010.

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.
Dispensing Health Board	The NHS Board with which the dispenser holds a dispensing contract, i.e. Community Pharmacy, Dispensing Doctor or Appliance Supplier.

List of Tables

Table No.	Name	Time period	File & size
1	MAS Registrations in Scotland	Jul 2007 to Sep 2010	Excel [118kb]

Contact

Craig Collins

Information Analyst

Craig.Collins@nhs.net

0141 282 2124

Ross MacLean

Information Analyst

Ross.Maclean@nhs.net

0131 275 7639

Further Information

Further information can be found on the [Prescribing and Medicines](#) area of the ISD website.

Further information on other ISD publications and datasets can be found the on the [ISD website](#).

Appendix

A1 – Background Information

How the data is obtained

[Practitioner Services](#), a division of NHS National Services Scotland, processes all NHS prescriptions for payment of pharmacists, dispensing doctors and appliance suppliers. This gives a full record from which trends in prescribing can be investigated at a detailed level. The data includes prescribing by GPs, nurses, dentists, pharmacists and hospitals, where the latter was dispensed in the community. Hospital dispensed prescriptions are NOT included in the figures. The Information Services Division (ISD) cannot say what proportion of the drug dispensed is actually consumed. These data do NOT include products purchased "over the counter". Prescriptions processed internally by Boards for payment purposes are NOT included in these data.

Pilot Scheme

The Minor Ailment Service was introduced to help people deal with conditions where little or no medical intervention is usually required. Normally the condition can be managed through self-care and the use of products that are available to buy without a doctor's prescription. MAS went live across Scotland in July 2006, following the success of pilots in NHS Ayrshire & Arran and NHS Tayside.

A2 – Publication Metadata (including revisions details)

Metadata indicator	Description
Publication title	NHS Scotland Prescribing – Minor Ailment Service Registrations
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.
Date that data is 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	28 September 2010
Frequency	Annual
Timeframe of data and timeliness	Data covering year to 31 March 2010.
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 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.
Concepts and definitions	The data published in all these releases correspond to prescriptions that have been dispensed in the community in Scotland, i.e. dispensed by a pharmacy, dispensing doctor or appliance supplier. This includes prescriptions

	<p>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. Prescriptions issued in hospital to patients on discharge and dispensed in the community are included. Each excel workbook contains further detailed definitions of the main measures and links to a glossary.</p>
Relevance and key uses of the statistics	<p>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.</p>
Accuracy	<p>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.</p>
Completeness	<p>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 has estimated these latter prescriptions to account for around 6% of all prescriptions issued to patients. Of course 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.</p>
Comparability	<p>The main measures of drug ingredient cost and volumes of items dispensed in the community 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</p>

	(BNF) is used to classify drugs based on therapeutic use.
Accessibility	It is policy of ISD Scotland to make its websites 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 measure	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. The main measures of drug volume are items (the number of individual drug items on a prescription form), quantity (the total number of tablets, capsules etc), and defined daily doses (DDDs - estimated average daily maintenance doses for a total quantity of prescribed). Further details and definitions can be found in the glossary.
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.
Help email	NSS.isdprescribing@nhs.net
Date form completed	24-Mar-11

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)