Community Pharmacy TARGET Checklist Service Specification

1. Background

Antimicrobial resistance (AMR) is one of the most serious health threats being faced both globally and locally. In 2024 the UK published "Confronting antimicrobial resistance 2024 to 2029", which supports AMR stewardship. Key outcomes include engaging with the public and empowering them to understand the risk of exposure to antimicrobials.

Community pharmacy plays a central role in AMR stewardship. The TARGET (Treat Antibiotics Responsibly, Guidance, Education and Tools) antibiotic checklist is part of the TARGET toolkit. This toolkit helps to ensure that patients receive consistent, evidence-based information about antibiotic usage. Use of the TARGET antibiotic checklist promotes interactions between community pharmacy staff and patients at the point of dispensing an antibiotic prescription, facilitating individualised advice to the patient.

2. Service description

The service uses the TARGET antibiotic checklist, completed by patients when they present with an antibiotic prescription and then pharmacy staff, to guide conversations with patients about their antibiotic usage. The information collected on the checklist will allow for the conversation to be tailored to the individual patient.

3. Service aim and objectives

- To use the TARGET antibiotic checklist as a tool in clinically assessing the suitability of the prescribed antibiotic and dosage for the patient's infection.
- To facilitate the delivery of individualised, evidence-based counselling to patients/ carers following the dispensing of an antibiotic prescription.
- To facilitate signposting into flu vaccination services, where appropriate.

4. Service outline

4.1. The service will allow staff working within eligible community pharmacies to use the completed TARGET antibiotic checklist to discuss prescribed antibiotics with patients/ carers to help ensure they are used safely and effectively.

4.2. The TARGET antibiotic checklist will be completed by both pharmacy staff and patient/carer.

4.3. The TARGET checklist should be fully completed with 25 patients/ over a consecutive four-week period, between 6th October (TBC as start date for flu vaccination campaign) and 30th November 2025. If the target of 25 is not reached within four weeks, the time period can be extended for an additional two weeks but must be completed by 30th November.

4.4. The pharmacist will select the patients and either the pharmacist or pharmacy staff and explain the checklist completion process with the patient. Subsequent advice will be provided by the pharmacist who has completed the relevant training listed in section 7.

4.5. All relevant staff will be trained and competent to deliver the service (see section 7 'Training').

4.6. The pharmacy should actively promote the service using the resources provided by SPPG and PHA.

4.7. The pharmacy must hold a contract with SPPG to deliver the service.

4.8. A Standard Operating Procedure (SOP) must be in place to ensure the safe and effective operation of the service.

5. Provision of service

5.1. Patient eligibility for the service-

5.1.1. The following persons are **eligible** for the service:

- Patients who are registered with a GP in Northern Ireland
  - A parent/carer can complete the checklist for children under 18 years of age.

5.1.2. The following patients are **not eligible** for the service:

- Temporary residents
- Patients in Care Homes (Nursing or Residential)

5.2. The pharmacist will use the information provided by the patient/ carer on page 1 of the TARGET checklist to check the clinical appropriateness of the prescribed antibiotic, and that the antibiotic is the appropriate drug and dose for that patient and that infection.

5.3. The pharmacist will check prescribing against local antibiotic prescribing guidelines outlined in the NI Formulary.

5.4. Where clinically appropriate the pharmacist will contact the prescriber about the antibiotic prescription and document the reason and outcome of this discussion on the TARGET checklist. Examples of such interventions include, but are not limited to, drug allergy, inappropriate course duration, inappropriate antibiotic choice or incorrect dose.

5.5. Upon hand-out of the prescription, the pharmacist will use the information provided by the patient/carer on page 2 of the TARGET checklist to tailor the information given to the patient/carer as part of counselling. The TARGET Antibiotic prescription screening and counselling sheet should be used to provide appropriate advice.

5.6. Where appropriate, the pharmacist may also print and provide to the patient a TARGET patient leaflet specific to the infection being treated.

5.7. Where appropriate, the pharmacist will promote flu vaccination, and signpost into these services.

6. Records keeping

6.1. Both patient and pharmacist sections of the TARGET antibiotic checklist must be completed.

6.2. All records must be kept for the time periods in line with the Department of Health's Good Management, Good Records guidance:

- Adults-8 years after the conclusion of treatment.
- Children and young people-until the patient's 25th birthday, or 26th birthday if the young person was 17 at the conclusion of treatment, or 8 years after death.

6.3. The pharmacy will submit the TARGET checklist information to SPPG by the MS form provided.

7. Training

The pharmacy contractor must ensure that individuals providing the service are competent to do so and are familiar with up-to-date relevant information.

Pharmacists and relevant team members should familiarise themselves with the TARGET antibiotic checklist user guide and Antibiotic prescription screening and counselling sheet user guide.

The following resources are recommended:

- The Northern Ireland Formulary section on infections provides guidance on prescribing recommendations for adults and children. This can be accessed at 5.0 Infections (this section of the NIF includes children) | NI Formulary
- The new Antimicrobial Stewardship eLearning Course developed by the Northern Ireland Centre for Pharmacy Learning and Development (NICPLD) available at www.nicpld.org.
- The National Institute for Health and Care Excellence (NICE) has significant resources on antimicrobial stewardship including guidance, advice and quality standards which the pharmacy team should review before the service period. This can be accessed at Recommendations | Antimicrobial stewardship:

systems and processes for effective antimicrobial medicine use | Guidance | NICE

8. Premises

The service can be offered in any area of the pharmacy where patient confidentiality can be maintained.

Pharmacies participating in the TARGET Checklist Service are expected to have a consultation area that meets the following requirements:

- The consultation area should be where both the patient and pharmacist can sit down together
- The patient and pharmacist should be able to talk at normal speaking volumes without being overheard by another person (including pharmacy staff)

The consultation area should be clearly designated as an area for confidential consultations, distinct from the general public areas of the pharmacy.

9. Remuneration

9.1. Payment for the service will be made based on submission of 25 completed TARGET checklists via MS Form.

9.2. The payment for the service consists of the following components:

- A one-off set up fee of £200 per pharmacy contractor
- A consultation fee of £15 per completed TARGET checklist

10. Submission of records

Records can be submitted using the MS form at any point during the campaign period but must all be submitted by 12/01/2026, the same date for survey completion for the Stay Well this Winter campaign.

11. Monitoring

SPPG will be monitoring compliance with the requirements of this service specification and contract. Where the SPPG identifies failure to comply, the SPPG reserves the right to recover all, or part of, this funding. The pharmacy contractor is required to co-operate on a timely basis in respect of any review or investigation being undertaken by SPPG regarding the TARGET Checklist Service.