





Telford and Wrekin Pharmaceutical Needs Assessment (PNA) 2018/19 – 2020/21

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Contents

Ackno	knowledgements					
Execu	tive Summary	ii				
1.	Introduction	1				
1.1.2. 1.1.3. 1.1.4.	Background What is pharmacy needs assessment? Statutory Review Supplementary Statements How is the PNA used? Consultation on pharmaceutical needs assessments	1 1 1 2 2 3				
1.2. 1.2.1. 1.2.2.	National Strategic Context The NHS Five Year Forward View Community Pharmacy Clinical Services Review	4 4 4				
1.3.	Overview of NHS Pharmaceutical Services	5				
1.4.	Developing the PNA process	5				
1.5.	Consultation on the Draft PNA	7				
1.6.	Equalities Impact Assessment	7				
2.	The local picture in Telford & Wrekin	9				
2.1.	Local Development Plan	9				
2.2.	Telford & Wrekin Health & Wellbeing Strategy	9				
2.3.	Health & Care Services Transformation - Sustainability and Transform Plan (STP) overview	natioi 10				
2.4.	Future Fit	11				
2.5.	Neighbourhood working	11				
2.6. 2.6.1. 2.6.2. 2.6.3. 2.6.4.	Health & Wellbeing in Telford & Wrekin Our Borough Overview: Telford & Wrekin Health & Wellbeing Life expectancy, morbidity and mortality Healthy Lifestyles (adults and children)	12 12 13 13 14				
3.	Overview of Current Pharmaceutical Service Provision	17				
3.1.	Pharmacy contract applications – Market Entry	17				
3.2.	Rural dispensing	17				

3.3.	Dispensing Doctors: Dispensing Service Provision	18
3.4.	Dispensing Appliance Provider: Dispensing Service Provision	18
3.5.	Prescription Collection and Delivery	18
3.6.	Electronic Prescribing	19
3.7.	Community Pharmacy Services	19
4.	Essential Services	20
5 .	Advanced Services	22
	Medicines Use Review Overview: Medicine Use Review Service Provision: Medicine Use Reviews	22 22 23
	New Medicines Service Overview: New Medicines Service Service provision: New Medicines Service	23 23 24
	Appliance Use Review Overview: Appliance Use Review Service Provision: Appliance Use Review	24 24 25
	Stoma Customisation Service Overview: Stoma Customisation Service Service Provision: Stoma Customisation Service	25 25 25
5.5. 5.5.1.	NHS Urgent Medicine Supply Advanced Services (NUMSAS) Overview: NUMSAS	26 26
5.6. 5.6.1. 5.6.2.	Influenza Adult Vaccination Service Overview: Influenza Adult Vaccination Service Service Provision: Influenza Adult Vaccination Service	26 26 27
5.7.	Recommendations: Advanced Services	27
6.	Enhanced Services	28
6.1. 6.1.1. 6.1.2.	Pharmacy First Common Ailments Overview: Pharmacy First Common Ailments Service Provision: Pharmacy First Common Ailments Service	28 28 28
6.2. 6.2.1. 6.2.2.	, , , , , , ,	28 29 29

6.3. 6.3.1. 6.3.2.	Pharmacy First Urinary Tract Infections (UTI) and Impetigo Overview: Pharmacy First UTI/Impetigo Service Service provision: Pharmacy First UTI/Impetigo Service	29 29 29			
6.4.	Recommendations: Enhanced Services	29			
7.	Locally commissioned pharmacy services: Sexual Health Services				
7.1.	Sexual Health Needs	30			
7.2. 7.2.1. 7.2.2.	5 ,	30 31 31			
7.3. 7.3.1. 7.3.2.	,	32 32 33			
7.4. 7.4.1. 7.4.2.	Condom Distribution Scheme (CDS) Overview: CDS Service Provision: CDS	34 34 34			
7.5.	Recommendations: Sexual Health Services	34			
8.	Locally Commissioned Pharmacy Services: Substance Misuse Services	ces 35			
8.1.	Substance Misuse Needs	35			
8.2. 8.2.1. 8.2.2.	·	36 36 36			
8.3. 8.3.1. 8.3.2.	Needle and Syringe Programme Overview: Needle and Syringe Programme Service Provision: Needle and Syringe Programme	37 37 38			
-	Naloxone Provision Overview: Naloxone Provision Pilot Service Provision: Naloxone	39 39 40			
8.5.	Recommendations: Substance Misuse Services	41			
9.	Other Locally Commissioned Services:	41			
	Automated Pill Dispenser Overview: Automated Pill Dispenser Service Provision: Automated Pill Dispenser	41 41 41			

	Palliative Care Just-in-case Boxes Overview: Palliative Care Boxes Service Provision: Palliative Care Boxes	42 42 42
	Primary Eyecare Assessment Referral Service (PEARS) Overview: PEARS Service Provision: PEARS	42 42 43
9.4.2.	Healthy Start Vitamins Maternal and Infant Health Needs Overview: Healthy Start Vitamins Service Provision: Healthy Start Vitamins	43 43 44 44
	Healthy Living Pharmacy (HLP) Overview: HLP Service Provision: HLP	45 45 45
9.6.	Recommendations: Other Public Health Services	46
10.	Access to Pharmaceutical Services	46
10.1.	Overview	46
10.2.1.	Geographical Spread Pharmaceutical Coverage Within Telford & Wrekin Pharmaceutical Coverage Outside of Telford & Wrekin's Boundaries	47 47 47
10.3.1. 10.3.2. 10.3.3. 10.3.4. 10.3.5.	Opening Hours Weekday Pharmaceutical Service Provision Saturday Pharmaceutical Service Provision Sunday Pharmaceutical Service Provision Bank Holiday Provision Extended Hours Provision Dispensing Doctor Opening Hours	48 48 49 49 49
11.	Assessment of Current Pharmaceutical Service Provision	50
11.1.	Recommendations: Coverage of pharmaceutical services	51
11.2.	Aspirational Services	52
12.	Public Engagement: Community Pharmacy Survey	53
12.1.	Survey Methodology	53
12.2.	Key Headlines	54
13.	Appendices	56

13.1.	Appendix I - Telford & Wrekin PNA Steering Group Terms of Refere	nce 58			
13.2.	Appendix II –Health and Wellbeing Board Briefing Report 61				
13.3.	Appendix III -Consultation Responses	65			
13.4.	Appendix IV -Equalities Impact Assessment	66			
13.5.	Appendix V -Health and Wellbeing PNA Cover Report	77			
13.6.	Appendix VI -Recommendations from Community Pharmacy Clinica Services Review	al 81			
13.7.	Appendix VII –Community Pharmacy Providers List	84			
13.8.	Appendix VIII –Community Pharmacy Opening Times	86			
13.9.	Appendix IX –Currently Commissioned Services	94			
13.10.	Appendix X –Pharmacy Survey Responses (PharmOutcomes)	95			
13.11.	Appendix XI -Sexual Health Services Opening Times	102			
13.12. 13.12.1 13.12.2		106 106 bility			
13.12.3		g Children 108			
13.12.4	People				
13.12.5					
	Man F. Now Madiainas Carrias	110			
13.12.6	•	111			
13.12.7	. Map G: Appliance Use Review Service	111 112			
13.12.7 13.12.8	Map G: Appliance Use Review ServiceMap H: Stoma Customisation Service	111 112 113			
13.12.7	Map G: Appliance Use Review ServiceMap H: Stoma Customisation ServiceMap J: Adult Influenza Vaccination Service	111 112			
13.12.7 13.12.8 13.12.9	 Map G: Appliance Use Review Service Map H: Stoma Customisation Service Map J: Adult Influenza Vaccination Service Map K: Common Ailments Service 	111 112 113 114			
13.12.7 13.12.8 13.12.9 13.12.1	 Map G: Appliance Use Review Service Map H: Stoma Customisation Service Map J: Adult Influenza Vaccination Service Map K: Common Ailments Service Map L: Emergency Supply Service 	111 112 113 114 115			
13.12.7 13.12.8 13.12.1 13.12.1 13.12.1 13.12.1	 Map G: Appliance Use Review Service Map H: Stoma Customisation Service Map J: Adult Influenza Vaccination Service Map K: Common Ailments Service Map L: Emergency Supply Service Map M: Emergency Hormonal Contraception Service Map N: Chlamydia Screening Service 	111 112 113 114 115 116			
13.12.7 13.12.8 13.12.1 13.12.1 13.12.1 13.12.1 13.12.1	 Map G: Appliance Use Review Service Map H: Stoma Customisation Service Map J: Adult Influenza Vaccination Service Map K: Common Ailments Service Map L: Emergency Supply Service Map M: Emergency Hormonal Contraception Service Map N: Chlamydia Screening Service Map P: Chlamydia Treatment Service 	111 112 113 114 115 116 117 118 119			
13.12.7 13.12.8 13.12.1 13.12.1 13.12.1 13.12.1 13.12.1 13.12.1	 Map G: Appliance Use Review Service Map H: Stoma Customisation Service Map J: Adult Influenza Vaccination Service Map K: Common Ailments Service Map L: Emergency Supply Service Map M: Emergency Hormonal Contraception Service Map N: Chlamydia Screening Service Map P: Chlamydia Treatment Service Map Q: Supervised Consumption Service 	111 112 113 114 115 116 117 118 119 120			
13.12.7 13.12.8 13.12.1 13.12.1 13.12.1 13.12.1 13.12.1 13.12.1	 Map G: Appliance Use Review Service Map H: Stoma Customisation Service Map J: Adult Influenza Vaccination Service Map K: Common Ailments Service Map L: Emergency Supply Service Map M: Emergency Hormonal Contraception Service Map N: Chlamydia Screening Service Map P: Chlamydia Treatment Service Map Q: Supervised Consumption Service Map R: Needle Exchange Service 	111 112 113 114 115 116 117 118 119 120 121			
13.12.7 13.12.8 13.12.1 13.12.1 13.12.1 13.12.1 13.12.1 13.12.1 13.12.1	 Map G: Appliance Use Review Service Map H: Stoma Customisation Service Map J: Adult Influenza Vaccination Service Map K: Common Ailments Service Map L: Emergency Supply Service Map M: Emergency Hormonal Contraception Service Map N: Chlamydia Screening Service Map P: Chlamydia Treatment Service Map Q: Supervised Consumption Service Map R: Needle Exchange Service Map S: Naloxone Pilot Scheme 	111 112 113 114 115 116 117 118 119 120 121 122			
13.12.7 13.12.8 13.12.1 13.12.1 13.12.1 13.12.1 13.12.1 13.12.1 13.12.1 13.12.1	 Map G: Appliance Use Review Service Map H: Stoma Customisation Service Map J: Adult Influenza Vaccination Service Map K: Common Ailments Service Map L: Emergency Supply Service Map M: Emergency Hormonal Contraception Service Map N: Chlamydia Screening Service Map P: Chlamydia Treatment Service Map Q: Supervised Consumption Service Map R: Needle Exchange Service Map S: Naloxone Pilot Scheme Map T: Healthy Living Pharmacies (Level 1 Registered) 	111 112 113 114 115 116 117 118 119 120 121 122 123			
13.12.7 13.12.8 13.12.1 13.12.1 13.12.1 13.12.1 13.12.1 13.12.1 13.12.1	 Map G: Appliance Use Review Service Map H: Stoma Customisation Service Map J: Adult Influenza Vaccination Service Map K: Common Ailments Service Map L: Emergency Supply Service Map M: Emergency Hormonal Contraception Service Map N: Chlamydia Screening Service Map P: Chlamydia Treatment Service Map Q: Supervised Consumption Service Map R: Needle Exchange Service Map S: Naloxone Pilot Scheme Map T: Healthy Living Pharmacies (Level 1 Registered) Map U: GPs and Pharmacies by Population Density 	111 112 113 114 115 116 117 118 119 120 121 122			

13.13. Appendix XIII -Telford & Wrekin Community Pharmacy Survey Report 2017
13.14 Appendix XIV –Comments Received During the 60 Day Consultation Period 141

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Executive Summary

This PNA is an assessment of the provision of pharmacy services in Telford & Wrekin, undertaken in line with PNA Regulations and approved by the Health & Wellbeing Board.

The draft Pharmacy Needs Assessment (PNA) for 2018/19 – 2020/21 was published for the 60 day consultation period on 3rd January 2018. A total of 14 responses were received from a variety of groups, including the statutory consultees, such as: local pharmacies, care agencies and Health Watch Telford & Wrekin and the Local Pharmacy Committee. These were reviewed by the Health & Wellbeing Board and the PNA steering group. In relation to the proposed recommendations, the following areas were highlighted by consultees and are supported by specific PNA recommendations:

- Inclusion (substance misuse service) commented as the distribution of people moving into housing of multiple occupancy has changed, there is less provision of supervised consumption services in South Telford.
- ➤ Healthwatch commented that many patients are unaware Medicine Use Reviews, particularly those with mental health or long term conditions. They commented that some people have had negative experiences with the prescription ordering service and ask that the service is explained in more detail to users along with alternatives such as electronic prescriptions.
- ➤ Healthwatch also commented that Newport, as a university town, should have great accessibility to sexual health services, especially during out of hours and weekends. They also noted that although supervised consumption is available in Newport there is no needle exchange programme and that since this is part of the Telford & Wrekin Drug and Alcohol Strategy this should be considered here.

See Appendix XIII for the full consultation responses.

Summary of PNA Recommendations

Coverage of dispensing services

- ➤ Telford and Wrekin has reviewed its coverage of dispensing services. The PNA has highlighted that there is currently sufficient coverage within existing community pharmacies and GP dispensing practice (Newport). The current geographical location and opening hours of dispensing services provides adequate choice and accessibility for the majority of the public.
- A review of this recommendation will be considered to take into account any changes to primary care and community health services provision and to reflect housing expansion and potential population growth in the Borough. Key elements the review process will need to take into account include: The development of the Shropshire, Telford & Wrekin NHS Sustainability and Transformation Plan and Future Fit

programme and the associated implications for community pharmacy provision, changes to housing development and also technical modelling work to quantify the impact of demographic change and community pharmacy needs and demands.

Advanced Services

- Medicines Use review (MUR) and the New Medicines service (NMS) have become established advanced services. PNA analyses have shown that there is sufficient awareness of these services and they are offered by the majority of pharmacies. Telford and Wrekin would encourage all providers to continue to focus these review services on those identified within the national target groups and those that are that are identified as poorly adherent to prescribed treatment.
- The review of coverage of advanced services provided by community pharmacies in the PNA has shown that there is sufficient coverage of the Medicines Use Review (MUR) and the New Medicines service (NMS) services. Pharmacies falling considerably below the average number of MURs should be supported to increase the numbers of MURs, particularly in areas where there is an identified need, to help with the management of long-term conditions and reducing emergency admissions. This may be done by promoting the concept of MURs to the public so that they understand the differences between reviews done by GP and pharmacies. GP practices are also ideally placed to work with their local pharmacies to identify and refer on patients who require a MUR or NMS.
- Coverage of appliance user reviews and stoma appliance customisation services are low which is similar to the trend seen across England due to these services being a specialist area with many patients receiving the support they require either from a clinic or hospital or from a dispensing appliance provider located in another area.
- Annual seasonal influenza vaccination, as part of the national programme, makes a significant contribution to reducing illness and death from 'flu, which in turn contributes more widely to managing demand for health and social care services during the winter. Pharmacies having been increasingly playing a key role in the annual 'flu immunization programme in recent years. All pharmacies have the opportunity to provide influenza vaccination advanced service and are encouraged to do so to contribute to overall improving immunization coverage. During the 2017/18 season the national programme was extended to explicitly include social care workers in registered care homes, pharmacies providing the advanced service can also contribute to improving uptake in this group.

Enhanced Services

- ➤ There is a need for commissioners to work with local providers to increase referral to the common ailments service. Local commissioners need to encourage all community pharmacy providers to participate in the common ailments service and increase the number of consultations currently undertaken.
- ➤ Emergency supply services are available across Telford and Wrekin. There is a need for local commissioners to increase awareness with local healthcare providers of the

Emergency supply service and encourage all local providers to participate in delivery of this service.

- Local commissioners need to encourage all community pharmacy providers to participate in the Pharmacy First UTI/ Impetigo service, and increase the number of consultations currently undertaken. Local commissioners also need to work alongside providers and patient groups to increase awareness and referral into this service. Consideration should also be given to the further development of clinically focused services that can be delivered through accredited community pharmacies, improving access for patients.
- NHS England North Midlands, Telford and Wrekin County Council, and other local commissioners need to ensure there is equitable provision of locally commissioned services across Telford. This could be coordinated through the STP.

Sexual Health Services

- ➤ Emergency Hormonal Contraception (EHC): Assessment of the current provision suggests that there is adequate local coverage for EHC for women aged under 25 years. However, Telford and Wrekin Council encourage all community pharmacies to participate in this enhanced service, especially those open during weekends and extended hours during the week. Generally service provision during weekends is significantly less than that during weekdays. Community pharmacies open during the weekend offer essential provision during this time. Commissioners responsible for sexual health services provision have evaluated the extension of free EHC for women over 25 given previous PNA recommendation. EHC is already available to women of all ages free-of-charge through their GP practice and whilst it is acknowledged that expanding free EHC in pharmacies for women over 25 would reduce inequities in choice, this is not considered cost effective at this time.
- Chlamydia & Gonorrhoea Screening Scheme: Assessment of current provision suggests that there is adequate local coverage in terms of pharmacy sign up for the Chlamydia Screening Scheme. However, testing and treatment levels need to be improved amongst 15-24 young people, with a particular focus on men. A training programme should be developed as a way of encouraging and supporting pharmacies that have signed up to the scheme to improve access to Chlamydia & Gonorrhoea testing and treatment.
- Condom Distribution Scheme: Assessment of current provision suggests that there is adequate local coverage in terms of pharmacy sign up to distribute condoms, however more awareness is need to promote the scheme as well as distribution of condoms to young people accessing EHC and Chlamydia Screening & Treatment services within community pharmacies.

Substance Misuse Services

Supervised consumption and needle exchange services: Appropriate borough-wide provision of these services should be reviewed as part of the transition to the new STARS during 2018. Naloxone Provision: Following on from the pilot of distribution in these seven pharmacies, further consideration should be given to roll-out to additional pharmacies.

Other Public Health Services

- Primary Eyecare Assessment Referral Service (PEARS): The CCG will continue to work with local providers to raise awareness of the PEARS service. All providers are encouraged to participate and make closer links with their optometry colleagues.
- Healthy Living Pharmacies (HLP): All pharmacies who are not currently participating are encouraged to gain level 1 registration so that HLP is consistently offered across the borough.
- ➤ Healthy Start Vitamins: All pharmacies will be encouraged to participate in the free supply of healthy start vitamins.

Summary of Equalities Impact Assessment

The equality impact assessment (EIA) identified elements of the PNA with possible positive and negative impacts in relation to protected characteristics relative to the General Equality Duty:

- eliminate unlawful discrimination, harassment and victimisation
- advance equality of opportunity
- foster good relations between different groups

The following actions are recommended:

- Health Equity Audits (HEAs) will be undertaken for public health services provided in community pharmacies to assess the provision, uptake and outcome of public health services in relation to age, gender, ethnicity and socio-economic deprivation. The first cycle will commence from September 2018 and the first review of HEA cycle will be completed by September 2019.
- Continue to monitor the demand/need for EHC prescribing in women aged over 25 (review June 2019)
- Proactively use granular maps indicating levels of older people, people reporting long term limiting illness and non/limited English speaking communities alongside community pharmacy provision into the PNA review process to support future informed commissioning decisions.
- ➤ Ensure that the campaign and awareness raising programme recommended to publicise community pharmacy services uses resources and materials in different languages and that local community based support groups are used, where relevant to develop local publicity materials.

1. Introduction

1.1. Background

1.1.1. What is pharmacy needs assessment?

From 1 April 2013, every Health and Wellbeing Board (HWB) in England has had a statutory responsibility to publish and keep up-to-date a statement of the needs for pharmaceutical services for the population in its area, referred to as a 'pharmaceutical needs assessment' (PNA).

The PNA looks at the current provision of pharmaceutical services in an area, makes assessment of whether this meets current and future population needs and identifies any potential gaps in local services. The PNA process should part of the wider assessment of health and care needs of the population, as defined in the local Joint Strategic Needs Assessment (JSNA).

The PNA should include information on:

- Local pharmacies and the services they currently provide, including dispensing, providing advice on health, medicines reviews and local public health services, such as smoking cessation, sexual health and support for drug users
- Other local pharmaceutical services, such as dispensing GP surgeries
- Relevant maps relating to the area and providers of pharmaceutical services in the area
- > Services in neighbouring HWB areas that might affect the need for local services
- Potential gaps in provision that could be met by providing more pharmacy services, or through opening more pharmacies, and likely future needs.

1.1.2. Statutory Review

The 2013 Regulations, as amended, require a fundamental review of the PNA every three years, including statutory consultation. The HWB is required to keep the PNA up to date by maintaining the map of pharmaceutical services, assessing any on-going changes which might impact pharmaceutical need or require publication of a Supplementary Statement and by publishing a full revised assessment before April 2021.

In making an assessment of changes to need in its area, the HWB will have regard in particular to changes to the:

- Number of people in its area who require pharmaceutical services
- Demography of its area; and
- Risks to the health or well-being of people in its area.

In addition, because the PNA will be used by NHS England in accordance with the Regulations for Market Entry, HWBs will also more regularly need to consider whether they need to make a new assessment of their pharmaceutical need i.e. after identifying changes to the availability of pharmaceutical services that have occurred since publication of a previous PNA, where these changes are relevant to the granting of applications to open new or additional pharmacy premises. When making a decision as to whether the changes warrant a new assessment, HWBs will need to decide whether the changes are so substantial that the publication of a new assessment would be a proportionate response.

This is separate from the provision for Supplementary Statements described below, as the Supplementary Statement will simply be a statement of fact, and would not make any assessment on the impact of the change on the need for pharmaceutical services within a locality.

1.1.3. Supplementary Statements

Part 2 regulation 6 (3) of the 2013 Regulations makes provision for HWBs to issue a supplementary statement. These would be issued where:

- There has been a change to the availability of pharmaceutical services since the publication of the PNA
- This change is relevant to the granting of applications referred to in section 129(2)(c)(i) and (ii) of the NHS Act 2006 (i.e. applications to open a new pharmacy, to relocate or to provide additional services); and
- ➤ The HWB is satisfied that a revised PNA would be a disproportionate response.

Supplementary Statements may also be required following conclusion of applications to consolidate (merge) pharmacies. Once issued, the Supplementary Statement would become part of the PNA and so should be taken into consideration when considering any applications submitted to NHS England.

1.1.4. How is the PNA used?

There are three key commissioning bodies which contract with local pharmacies to deliver services, these are: NHS England North Midlands, NHS Telford & Wrekin Clinical Commissioning Group (CCG) and Telford & Wrekin Council. The PNA offers vital guidance for the commissioners of pharmacy services, to support the development of commissioning plans, service improvement and service transformation and redesign. More specifically the PNA will be used for:

▶ Market entry – NHS England North Midlands will use the PNA to make decisions on applications for new pharmacies and dispensing appliance provider premises or applications from current pharmacy providers to change their existing provision. Under the legal regulations¹ potential providers of NHS pharmaceutical services must submit a formal application to NHS England to be included on a relevant list by proving they are able to meet a pharmaceutical need as set out in the relevant PNA. NHS England North Midlands will then review the application in

- light of any gaps identified in local PNAs. The NHS Litigation Authority will also refer to the PNA when hearing any appeals on NHS England's decisions.
- ➤ Identifying areas where pharmacies can contribute to health and wellbeing priorities to improve population health and reduce health inequalities. This supports the HWBB to work with partners to target services to the areas where they are needed and limit any duplication in areas where provision is adequate.
- Providing an evidence-base for commissioners, to support the development and improvement of advanced, enhanced pharmaceutical services and public health services.

The intention is the PNA will:

- Ensure services are high quality, accessible and meet local needs
- Support existing community pharmacy providers to offer enhanced services
- Incorporate community pharmacies, where required, in redesigning service delivery in primary care to meet commissioning priorities
- Take an informed approach to commissioning services from community pharmacies to meet identified health needs
- Control gaps in provision and new market entry opportunities
- Ensure community pharmacies are used as a key provider to deliver public health messages
- Strengthen partnership working with community pharmacies across the health and social care sector to address growing public health problems and tackle health inequalities.

1.1.5. Consultation on pharmaceutical needs assessments

As part of the PNA process, each HWB must consult on the contents of the assessment, specifically with the following:

- Any Local Pharmaceutical Committee for its area (including any Local Pharmaceutical Committee for part of its area or for its area and that of all or part of the area of one or more other HWBs)
- Any Local Medical Committee for its area (including any Local Medical Committee for part of its area or for its area and that of all or part of the area of one or more other HWBs)
- Any persons on the pharmaceutical lists and any dispensing doctors list for its area
- Any LPS chemist in its area with whom the NHS England has made arrangements for the provision of any local pharmaceutical services;
- Any Local Healthwatch organisation for its area, and any other patient, consumer or community group in its area which in the opinion of HWB has an interest in the provision of pharmaceutical services in its area; and
- Any NHS trust or NHS foundation trust in its area;

- NHS England
- Any neighbouring Health and Wellbeing Board.

1.2. National Strategic Context

1.2.1. The NHS Five Year Forward View

The NHS Five Year Forward View¹, published in October 2014 recognises that the NHS needs to change in order to best meet the needs of an ageing population and the increase in the number of people living with long-term health conditions. The Five Year Forward View programme, which was further shaped by the General Practice Forward View² published in April 2016, is a comprehensive NHS reform programme. The aim is to transform health services so they are built around the needs of patients and citizens and offer the joined up and integrated care that many want and need, whilst also providing a new focus on prevention in order to keep us well.

1.2.2. Community Pharmacy Clinical Services Review

The independent Community Pharmacy Clinical Services Review³ (known as the Murray report, see Appendix VI), published in December 2016 was commissioned by the NHS England Chief Pharmaceutical Officer to inform the commissioning of community pharmacy services in the context of the Five Year Forward View aspirations. The report provides a summary of national policy, presents barriers, opportunities and recommendations for expanding the role of community pharmacy and pharmacists.

The Murray report proposes that pharmacy needs to "work in partnership with other parts of the health and care system whether this means other professions or, critically, patients themselves" and be a "core part of the integrated, convenient services that people need". There are proposals and recommendations for developing and improving pharmacy services and overcoming barriers, including within the following areas:

- New models of care
- Access to information
- Independent prescribing and workforce skills
- Commissioning arrangements

Pharmacy services have a key role to play in improving the health of local people. Community pharmacies are often the first point of contact for people, especially those in deprived communities and those who may otherwise struggle to access healthcare services. Offering a new deal for primary care is a key to the success of the Five Year Forward View. Building the public's understanding of pharmacies and online resources to reduce demand are highlighted as key areas for improvement.

¹ https://www.england.nhs.uk/five-year-forward-view/

² https://www.england.nhs.uk/gp/gpfv/about/

³ https://www.england.nhs.uk/commissioning/primary-care/pharmacy/ind-review-cpcs/

1.3. Overview of NHS Pharmaceutical Services

Under the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013, a person who wishes to provide NHS Pharmaceutical Services must apply to NHS England to be included on a 'pharmaceutical list'. The application must focus on meeting pharmaceutical need as outlined in the PNA. This is commonly known as the NHS 'market entry' system.

The following can be included in the pharmaceutical list:

- Pharmacy providers: a person or corporate body who provides NHS Pharmaceutical Services under the direct supervision of a pharmacist registered with the General Pharmaceutical Councils.
- Dispensing appliance providers: appliance suppliers are a sub-set of NHS pharmaceutical providers who supply, on prescription, appliances such as stoma and incontinence aids, dressings, bandages etc. They cannot supply medicines.
- ➤ Distance selling providers are internet and mail order based providers who deliver their services across England to anyone who requests it. They may be pharmacy or dispensing appliance providers. Under the 2013 Regulations only pharmacy providers may now apply to be distance selling premises
- Dispensing doctors: medical practitioners authorised to provide drugs and appliances in designated rural areas known as 'controlled localities'.
- Local pharmaceutical services (LPS) providers also provide pharmaceutical services in some HWB areas.

The two most common types of pharmacy provision are local pharmacy providers, referred to in this report as community pharmacies, and dispensing doctors, also commonly referred to as dispensing practices. Community pharmacies are often located in the heart of local communities, on high streets, supermarkets and neighbourhood centres. There are different types of community pharmacies, ranging from small, independent pharmacies to large chains and supermarket pharmacies.

NHS legislation provides that in certain rural areas classified as 'controlled localities' general practitioners may apply to dispense NHS prescriptions as 'dispensing doctors'. The provisions to allow GPs to dispense were introduced to enable patients access to dispensing services in rural communities that do not have reasonable access to a community pharmacy. Since 2005, a practice can only apply to be a dispensing practice if it is located in a 'controlled locality' and the total of all patient lists for the area within a 1.6km (1 mile) radius of the premises is fewer than 2,750. In the majority of cases, patients eligible to use the dispensing practice will therefore be located more than 1.6km (as the crow flies) away from the nearest pharmacy.

1.4. Developing the PNA process

A steering group of key stakeholders, which has overseen the refresh and governance of the PNA, included members from the following: CCG Medicines Management Team, local authority public health and research and intelligence teams, NHS England North Midlands and Health Watch Telford & Wrekin. The aims of the steering group were to:

- Coordinate update of the Pharmaceutical Needs Assessment (PNA) in line with current legislation.
- Oversee the overall process for updating the PNA within the required timescale.
- To agree the statement of the needs for pharmaceutical services in Telford and Wrekin.
- ➤ To agree and oversee the process for assessing the current provision of pharmaceutical services by pharmacies, appliance providers and dispensing practices within Telford and Wrekin (and neighbouring areas where appropriate).
- > To ensure that accurate maps identifying the premises where services are provided are produced.
- > To agree and oversee the process required for the statutory consultation with all relevant parties as laid out in the regulations
- To develop a framework for subsequent assessments and supplementary statements.
- > To take into account any further legislation that may impact on the PNA.

The guiding principles used previously for the PNA process remained in place:

- The PNA should be integrated with the JSNA process and incorporated into the framework as one of the key reports in the JSNA intelligence documents.
- ➤ There should be engagement with key local partners (community pharmacy providers, the Local Pharmaceutical Committee (LPC), GPs and local patient representatives).
- > Commitment to involve as many partners as possible during the PNA refresh and consultation process.

The Telford & Wrekin PNA process included the following elements:

- ➤ Engagement with the public through an online and paper-based survey. The survey was available at all local pharmacies, it was also made available to patient groups across Telford including the Telford Patients First group
- ➤ Engagement with current providers, through an online survey using PharmOutcomes to record current pharmaceutical service provision
- ➤ Identification of local needs derived from the Joint Strategic Needs Assessment (JSNA) process, including:
 - Demographic and socio-economic factors, including updated locality maps
 - Health and wellbeing priority facts and figures
 - Population health outcomes and surveillance trends
- Mapping of service provision as commissioned by NHS England North Midlands, NHS Telford and Wrekin CCG, Telford and Wrekin Council and the LPC, including:

- Community pharmacies and dispensing GP practice provision mapping to update information on: contact details, opening hours and provision of pharmaceutical services (essential, advanced and enhanced services)
- Consultation on the draft PNA with official consultees, professionals and residents undertaken between January and March 2018
- ➤ The mapping of pharmaceutical services outside Telford and Wrekin's borders was undertaken using dispensing reports from ePACT data
- Equalities Impact Assessment on the key findings and proposed PNA recommendations
- > Review of the PNA and consultation responses by the HWB.

1.5. Consultation on the Draft PNA

A 60 day consultation is being held to seek views on the key findings and the proposed recommendations in the PNA, in line with statutory duties. The consultation period will run from January 2018 to March 2018. The list of consultees, as defined through PNA regulations, were proactively engaged by PNA Steering Group members to ensure their involvement.

The consultation aimed to be open and transparent and as such the draft PNA was also made widely available through the CCG website and was publicised by the CCG and the Council. All the comments received during the consultation will be considered by the Health & Wellbeing Board in March 2018.

1.6. Equalities Impact Assessment

1.6.1. Overview

- Community pharmacies are a valuable and trusted public health service. The scale of daily contacts with the public means there is real potential to use community pharmacy teams more effectively to improve health and wellbeing and to reduce health inequalities.
- From 1st April 2013, Health and Wellbeing Boards (HWB) in England assumed the responsibility to publish and keep up-to-date a statement of the needs for pharmaceutical services of the population in its area, through Pharmaceutical Needs Assessment (PNA).
- PNAs have been used historically by the NHS to make decisions on which NHSfunded services need to be provided by local community pharmacies. Now following transition of public health services to local authorities, PNAs should also be used to assess the contribution of community pharmacies to local public health programmes.
- In addition, PNAs will be used by NHS England when deciding if new pharmacies are needed, in response to applications by businesses, including independent owners and large pharmacy companies. Applications are keenly contested by

- applicants and existing NHS contractors and can be open to legal challenge if not handled properly.
- The previous PNA identified EHC provision for under 25s as having a possible negative impact on older women. Provision of EHC to over 25s was considered, however this was deemed not to be financially justifiable given recent changes in NICE guidance. EHC for this age group continues to be provided free of charge through general practice and sexual health services and is available to purchase over the counter.
- The previous PNA also identified language provision as a possible gap. Language line (a phone translation service) was considered but deemed not to be financially justifiable as there is no additional funding for this. Pharmacists were asked to be mindful of their community's needs and to relay information in a clear and understandable way, writing down key messages for the patient and where possible offering leaflets in different languages. Alternative pharmacy resources were also signposted including pharmacy label translation services and emergency multilingual phrasebooks.
- Healthy Living Pharmacies are a new initiative aimed at promoting public health messages through pharmacies. The majority of pharmacies in Telford & Wrekin have registered as level 1 Healthy Living Pharmacies, in which they have to meet quality criteria defined by Public Health England. One of these is the provision of a Health Promotion Zone where education materials and campaign material is displayed and this must appeal "to a wide range of the public including men and women, young people, smokers, people with long term conditions, learning difficulties and older people. Where the community includes a significant ethnic minority group, then their needs must be accommodated."

The PNA affects all residents of Telford and Wrekin, in particular it affects;

- Customers/service-users the general public
- Partners Health & Wellbeing Board partners: the Council, NHS Telford & Wrekin, NHS England Shropshire and Staffordshire Area Team, Health Watch Telford & Wrekin
- **Employees** providers of community pharmacy services and their staff

The PNA is covers the years 2018/19 – 2020/21. After this period the analysis will be reviewed and a new analysis completed. See Appendix IV for full assessment.

2. The local picture in Telford & Wrekin

2.1. Local Development Plan

Telford & Wrekin Local Plan⁴ provides a framework to help manage change and development over the coming decades. The vision for the Plan is that by 2031 the Borough will:

- > Be a healthier, more prosperous and better connected place
- ➤ Have a population of approximately 198,000 people
- > Include sustainable development
- Support communities in the rural and urban areas
- Protect and enhance the environment and community green spaces
- Provide new development and inward investment offering a high quality of life for all those who for all those who live and work in and visit the area.

The Local Plan aspires to improve the health and wellbeing of local residents through the provision and quality of its housing, community green space, transport, social, cultural and health infrastructure and outlines commitments to provide:

- Sufficient homes of the right type and quality in the right places to meet a growing and ageing population
- > The right businesses and jobs to provide employment, economic prosperity
- > Education to deliver the skills required by growing businesses
- > Services and facilities to meet our communities' current and future needs.

One of the plan's objectives is to enhance the network of urban centres across the borough, strengthening their development with a healthy diversity which meets the needs of residents and visitors. Community pharmacy is an integral part of health infrastructure and therefore the development proposals in the Plan have key significance for the PNA process.

2.2. Telford & Wrekin Health & Wellbeing Strategy

The Health and Wellbeing Board is in place to ensure that the Council and the NHS Clinical Commissioning Group work effectively together in planning health and social care services to improve health and wellbeing in Telford and Wrekin. The Board's Health

⁴http://www.telford.gov.uk/info/20172/planning policy and strategy/1229/telford and wrekin local plan 2011-2031

& Wellbeing Strategy 2016-2019⁵ sets out the vision and priorities to "enable people in Telford and Wrekin to enjoy healthier, happier and longer lives."

The Strategy, which has been shaped by intelligence from the joint strategic needs assessment⁶ process which includes PNA, highlights three local cross-cutting priorities where the fastest progress needs to be made:

- Encourage healthier lifestyles
- > Improve mental wellbeing and mental health
- Strengthen our communities and community-based support.

Community pharmacy has a clear role to play in the delivery of all these priorities through:

- ➤ The services they provide, such as health promotion campaigns, stop smoking clinics and sexual health and drug treatment services and the important opportunity to Make Every Contact Count
- The relationship with their customers and the opportunity that offers to communicate and raise awareness raising with the public healthy, positive lifestyles and letting people know what support is available in their own communities.

2.3. Health & Care Services Transformation - Sustainability and Transformation Plan (STP) overview

The Shropshire, Telford & Wrekin NHS Sustainability and Transformation Programme⁷ is the local five-year plan put in place to transform health and care services for local people so they are fit for the future.

The STP acknowledges that the demand on health and care services continues to rise and outstrips the available funding, which puts pressure on all services, especially hospitals, GP surgeries and social care. Demographic change contributes to the picture, as the number of older people in our population grows and many people have more than one long-term health condition, leading to a greater need for certain services. The challenging financial climate means changes are essential to ensure health and care services become sustainable in the long term, as well as meeting the public's health and care needs more effectively.

Community pharmacy has the potential to contribute to the delivery of all the aims in the local STP, which are as follows:

Build resilience and social capital

http://www.telford.gov.uk/downloads/file/4005/health and wellbeing strategy 2016

⁶ http://www.telford.gov.uk/info/20121/facts and figures/424/joint strategic needs assessment jsna

⁷ http://www.telfordccg.nhs.uk/who-we-are/publications/strategies-and-plans/plans/2533-shropshire-and-telford-stp/file

- Integrate care across the NHS and Social Care
- More appropriate use of hospital care
- Work as one health system
- Sustainable workforce
- Sustainable finances

2.4. Future Fit

The Future Fit⁸ programme, which is one of the STP priorities, oversees the reconfiguration of acute and community hospital services in Shropshire, Telford & Wrekin and parts of Powys. Community pharmacy clearly has a contribution to make in delivering the main principles underpinning the Future Fit programme, including the following:

- Home is normal
- > Empowerment for patients and clinicians
- Sustainability
- New ways of working

Future Fit recognises that the design of high quality, safe, efficient and sustainable hospital services must be developed within the context of a whole health and care system. In this context, a clinical design work stream⁹ has been established to consider the health and social economy as a whole and establish models of care which fully integrate all services within it. Community pharmacy services are recognised as important in the delivery of the four key priority areas, which are:

- Long-term Conditions and Frailty
- Diagnostic and Treatment Centre
- Local Planned Care Services
- Urgent and Emergency Care

2.5. Neighbourhood working

The HWB strategy and the Council's strategic plan *Being the Change* both have a focus on promoting social responsibility and co-production principles to work with residents and develop community-based services and community-based support.

The STP also recognises that as the causes of poor health are rooted in our communities, there needs to be a focus on making the most of the skills of local people and organisations, supporting people to lead healthier lives, and promoting self-care. This will in turn relieve pressure on the healthcare system and ensure people get the

⁸ http://nhsfuturefit.org/

^{9 &}lt;u>http://nhsfuturefit.org/</u>

⁹ http://nhsfuturefit.org/useful-documents/draft-public-consultation-documents

best treatment – whenever and wherever they need it, by providing existing services differently.

The neighbourhood working approach in Telford & Wrekin, which is being jointly led by the Council and the CCG, focuses on a more joined-up way of working to prevent ill health and promote the support that local communities already offer. The Telford & Wrekin neighbourhood working programme is developing community-centred approaches ranging from things such as peer support and prevention, through to delivering NHS services in community settings.

The programme has three work streams: Community Resilience and Prevention, Neighbourhood Teams and Systematic Specialty Review and Transfer of Services to the Community. The main elements of the approach include: collaborative working between health, social care and voluntary sector and work which is driven by communities. There is a bottom up approach, based on local innovation, which allows the ability to be different, but recognition that one size does not fit all. There are four neighbourhoods, based on GP practice groupings: Newport, Central Telford, TelWell and South East Telford. There are currently 28 neighbourhood working projects in the programme and community pharmacies can directly contribute or raise awareness of many of these.

2.6. Health & Wellbeing in Telford & Wrekin

2.6.1. Our Borough

Telford and Wrekin is a place of contrasts, a distinctive blend of urban and rural areas, with green open spaces alongside contemporary housing developments and traditional market towns. On the face of it, the borough is a prosperous place but there are clear differences across the borough (see map A). Some neighbourhoods and communities in the borough are among the most deprived areas nationally, whereas equally some communities are amongst the more affluent in England.

The population of the borough continues to grow at above national rates – driven by the expansion of the local economy and record levels of housing growth. As the population grows, it has continued to change in line with national trends, with the population becoming more diverse and ageing. Although the population is ageing, it is younger than the national structure – with concentrations of younger population in south Telford (see map N). However, over half of the population increase between now and 2031 will be in the 65+ age group.

One of the biggest challenges for the borough remains health inequalities (see map B). It is important though to emphasise that the health of the borough is improving overall, however, for a number of key measures the health of the population is not as good as the national average. This is gap to the national position is most evident in the most deprived communities of the borough with key challenges including a lower life expectancy, higher rates of long term illness and disabilities, high obesity rates and high rates of admissions to hospital for a variety of conditions.

A key area which has seen significant improvement has been levels of educational attainment. The gap between the national and local picture has closed significantly at Key Stage One and Two, with attainment rates now above the England average. There does, though, remain a number of key challenges with regard to attainment levels, including attainment at secondary level and for a number of groups not achieving the same levels as their peers, including children in care, Pakistani children and children in receipt of free school meals.

There remains a high number of households which are income deprived in the borough, creating challenges for some communities (see maps C and D). However, unemployment rates in the borough have fallen and are now below England rates, including for young people who have previously had very high rates of unemployment.

2.6.2. Overview: Telford & Wrekin Health & Wellbeing

Telford & Wrekin has made much progress in recent years, particularly in smoking prevalence which is a risk factor for a range of diseases as well as being one of the main causes in health inequalities. However there remain significant health inequality gaps throughout the borough. Pharmacies have a key role to play in many of these areas. Healthy Living Pharmacy status will be one way of providing additional health and wellbeing services such as obesity management and smoking cessation advice. As a front-facing service that is frequently visited by hard to reach groups such as young people and those with drug and alcohol problems, they also play a role in improving awareness of screening services and NHS health checks.

The following sections give an overview of key areas where health local measures are worse than the national average for England. For further information please see Chapter 3: Being Healthy in Understanding Telford and Public Health Outcomes Framework summaries and data:

http://www.telford.gov.uk/downloads/download/806/public_health_outcomes_framework phof_summary

https://fingertips.phe.org.uk/profile/public-health-outcomes-framework/data#page/0

2.6.3. Life expectancy, morbidity and mortality

Summary of health measures worse which are significantly worse than average:

- Life expectancy at birth males & females
- Life expectancy at 65 years males and females
- Healthy life expectancy at birth males and females
- Gap in life expectancy at birth males and females
- Mortality rate for causes considered preventable
- Health-related quality of life for older people
- Infant mortality
- Under 75 mortality rates from cancer

- Under 75 mortality rates from liver disease
- Health related quality of life for older people
- Excess winter deaths index (3 years, all ages) (male)

2.6.4. Healthy Lifestyles (adults and children)

Summary of health measures worse which are significantly worse than average:

- Breastfeeding at birth and at 6-8 weeks
- Smoking status at time of delivery
- Under 18 conceptions
- Child excess weight (4-5 year olds, 10-11 year olds)
- Hospital admissions for unintentional and deliberate injuries in children
- Average number of portions of fruit and vegetables consumed daily (15 year olds)
- Average number of portions of fruit consumed daily (adults)
- Excess weight in adults
- > Smoking prevalence in adults in routine and manual occupations
- Hospital admissions for alcohol-related conditions
- Cancer screening coverage bowel cancer
- Adults aged 40-74 offered and receiving NHS Health Checks
- ➤ Flu vaccination coverage (65+ year olds, under 65s at risk, 2-4 year olds)

Table 1: Telford and Wrekin Health & Wellbeing Needs: Overview

Life expectancy, mortality and ill-health							
Indicator	Telford and Wrekin	England	Time Period	Indicator	Telford and Wrekin	England	Time Period
Healthy life expectancy at birth – Male (years)	59.54	63.39	2013 - 15	Chlamydia detection rate (15-24 year olds)	1990	1882	2016
Healthy life expectancy at birth – Female (years)	58.55	64.11	2013 - 15	% vaccination coverage – PPV (pneumonia)	67.3	70.1	2015/16
Life expectancy at birth – Male (years)	78.36	79.46	2013 - 15	% vaccination coverage - Flu (aged 65+)	69.7	70.5	2016/17
Life expectancy at birth – Female (years)	81.99	83.11	2013 - 15	% vaccination coverage - Flu (at risk individuals)	52.3	48.6	2016/17
Life expectancy at 65 – Male (years)	18.10	18.68	2013 - 15	% vaccination coverage - Shingles vaccination coverage (70 years old)	50.7	54.9	2015/16
Life expectancy at 65 – Female (years)	20.21	21.08	2013 - 15	Under 75 mortality rate from all cardiovascular diseases	79.2	74.6	2013 - 15
Gap in life expectancy at birth T&W and England as a whole – Male (years)	-1.10	0.00	2013 - 15	Under 75 mortality rate from cancer- Persons	152.6	138.8	2013 - 15
Gap in life expectancy at birth T&W and England as a whole – Female (years)	-1.12	0.00	2013 - 15	Under 75 mortality rate from liver disease	22.7	18.0	2013 - 15
Self-reported wellbeing - people with a low happiness score	10.82	8.75	2015/16	Under 75 mortality rate from respiratory disease	39.4	33.1	2013 - 15
Self-reported wellbeing - people with a high anxiety score	20.79	19.37	2015/16	Mortality rate from a range of specified communicable diseases,	7.0	10.5	2013 - 15
Injuries due to falls in people aged 65 and over (per 100,000 pop)	1402.00	2124.61	2014/15	including influenza			
Mortality rate from causes considered preventable (per 100,000 pop)	202.53	184.46	2013 - 15				
Emergency hospital readmissions within 30 days (per 100,000 pop)	11.45	11.78	2011/12				
Health related quality of life for older people-Persons	0.71	0.73	2015/16				

Adults – health & lifestyles				Children & Families – health and lifestyles			
Indicator	Telford and Wrekin	England	Time Period	Indicator	Telford and Wrekin	England	Time Period
Emergency Hospital Admissions for Intentional Self-Harm	174.7	196.5	2015/16	Low birth weight of term babies (%)	2.5	2.8	2015
Adults meeting the recommended '5-a-day' on a 'usual day' (%)	48.6	52.3	2015	Breastfeeding at 6-8 weeks (%)	36.32	43.15	2015/16
Average no. of portions of fruit consumed daily (adults)	2.2	2.5	2015	Maternal Smoking at delivery (%)	18.12	10.65	2015/16
Average no. of portions of vegetables consumed daily (adults)	2.2	2.3	2015	Under 18 conceptions (per 1,000 pop)	32.61	22.80	2014
Excess weight in adults (%)	71.1	64.8	2013 - 15	Child excess weight at 4-5 years (%)	25.54	22.14	2015/16
Physically active adults (%)	53.8	57.0	2015	Child excess weight at 10-11 years	37.43	34.17	2015/16
Physically inactive adults (%)	28.5	28.7	2015	Hospital admissions from injuries 0-14 year olds (per 1,000 pop)	136.27	104.20	2015/16
Smoking prevalence in adults current smokers (%)	15.6	15.5	2016	Hospital admissions from injuries in 15- 24 year olds (per 1,000 pop)	130.84	134.06	2015/16
Smoking prevalence in adult in routine and manual occupations (%)	26.2	26.5	2016	Smoking prevalence at age 15 - current smokers (%)	5.98	8.20	2014/15
Successful completion of drug treatment - opiate users (%)	7.1	6.7	2015	Emergency Hospital Admissions for Intentional Self-Harm (per 1,000 pop)	206.94	191.43	2014/15
Successful completion of drug treatment - non-opiate users (%)	44.3	37.3	2015	Average number of portions of fruit consumed daily at age 15	2.22	2.39	2014/15
Successful completion of alcohol treatment (%)	37.0	38.4	2015	Average number of portions of vegetables consumed daily at age 15	2.30	2.40	2014/15
Recorded diabetes (% of adults)	6.6	6.4	2014/15	15 year olds meeting the recommended "5-a-day" (%)	49.70	52.40	2014/15
Admission episodes for alcohol-related conditions (per 100,000 pop)	725	647	2015/16				

Source: Public Health Outcomes Framework

Overview of Current Pharmaceutical Service Provision

Pharmaceutical services in Telford and Wrekin are provided through:

- Community pharmacy providers
- Dispensing doctor practice (Wellington Road Surgery, Newport)
- Dispensing appliance provider (DAC)
- Distance selling (internet and mail order) providers (none located in Telford and Wrekin)

Medical services within Telford and Wrekin are provided by one acute trust, the Shrewsbury and Telford Hospitals NHS Trust (SaTH) based at two sites the Princess Royal Hospital, Telford and the Royal Shrewsbury Hospital. GP services are provided by 22 local sites. GP out of hours services are currently provided by 'Shropdoc'. Shropdoc provide a GP out of hours service to all localities. They hold stocks of emergency drugs that can be issued to patients when pharmaceutical services are unavailable, or if there should be significant difficulty in obtaining medication that was required without delay.

3.1. Pharmacy contract applications – Market Entry

NHS England North Midlands (Shropshire & Staffordshire), as the local representative of NHS England, is responsible for the provision of NHS pharmaceutical services. Applications for new, additional or relocated premises will need to made to NHS England. Routine applications for a new pharmacy will be assessed against this Pharmaceutical Needs Assessment or subsequent updates produced by the HWB. The pharmaceutical services to which each pharmaceutical needs assessment must relate are all the pharmaceutical services that may be provided under arrangements made by NHS England for:

(a) The provision of pharmaceutical services (including directed services) by a person on a pharmaceutical list;

- (b)The provision of local pharmaceutical services under an LPS scheme (but not LP services which are not local pharmaceutical services); or
- (c)The dispensing of drugs and appliances by a person on a dispensing doctors list (but not other NHS services that may be provided under arrangements made by the NHS Commissioning Board with a dispensing doctor).

3.2. Rural dispensing

The market entry system applies equally to urban and rural areas. However, where NHS England has determined that an area is controlled (rural in character), provided certain conditions are met, doctors as well as pharmacies can dispense NHS medicines. GPs, can in general, dispense NHS prescriptions only with NHS approval and only to their own patients, who live in the controlled locality and live more than 1.6km (as the crow flies) from a

pharmacy. The main purpose is to ensure patients in rural areas, who might have difficulty getting to their nearest pharmacy, can access the dispensed medicines they need. For further guidance see the 'NHS (Pharmaceutical Services) Regulations: http://www.legislation.gov.uk/uksi/2013/349/contents/made

3.3. Dispensing Doctors: Dispensing Service Provision

Dispensing practices are able to offer a dispensing service to meet pharmaceutical service needs for eligible patients (a range of other services are also offered through the GP contractual system but these are not in the scope of this needs assessment). Telford and Wrekin has defined the controlled localities within its borders. A controlled locality is an area which has been determined as being rural in character. Special rules relate to the provision of pharmaceutical services in such areas. Telford and Wrekin has one dispensing practice – The Surgery, Wellington Road Newport. The practice offers a dispensing service to its registered patients who live more than 1.6km from the nearest local pharmacy and reside within the controlled locality.

In accordance with the NHS (Pharmaceutical) Regulations 2013 local commissioners should hold maps defining rural and non-rural areas (controlled and non-controlled localities) within Telford and Wrekin boundaries. This determines the pharmaceutical services available to patients i.e. whether the GP practice dispenses to the patient or they receive their medication from a community pharmacy.

3.4. Dispensing Appliance Provider: Dispensing Service Provision

Telford and Wrekin has one dispensing appliance provider - Nucare Itd, Unit C5 & C6 Hortonwood, Telford, Shropshire, TF1 7ES (0800 783 3909). Nucare provides a home delivery dispensing service for NHS prescriptions for continence, stoma and wound care products. Nucare also have healthcare professionals who are able to answer queries and support patients with regards their appliance use. They also offer a stoma customisation service. Nucare's current opening hours are 8:30am to 5:30pm.

3.5. Prescription Collection and Delivery

There is no requirement for community pharmacies or dispensing doctors to offer a prescription collection and delivery service within the current pharmacy/dispensing doctors contract. Many pharmacies however do offer this as an additional service for patients in their area. Prescription collection services are widely used by all patient groups. The service has been especially useful for those who are unable to routinely attend their GP practice to order or pick up their prescription. Housebound and elderly people often rely on their pharmacy to support them with access to their prescriptions. Equally GP practices have also utilised prescription collection and delivery services to ensure their patients receive medicines in a timely manner.

Local guidance requires patients to be integral to ordering of their medicines where ever possible. An increasing number of GP practices are now offering people the ability to order

their medication online. Using a unique password, patients are able to access a list of their authorised repeat medication and order online.

Telford and Wrekin CCG are also currently rolling out their prescription ordering department (POD). Patients are directed to order their prescription medication by calling the POD team directly. The POD team is available from 8:00am to 18:00pm Monday to Friday. The POD operative will take each patient medication request and generate a prescription request at the patients practice. Once authorized the prescription will be sent electronically to the patients nominated pharmacy.

All non-dispensing GP sites now offer an electronic prescription service (EPS). EPS makes it possible for a patient's prescriptions to be sent electronically to the patients nominated pharmacy or dispenser without the need for a paper prescription.

Prescription delivery services are offered by some pharmacies. Pharmacies may have specific criteria for who they will deliver to. The service is often directed towards elderly housebound patients and those with a physical disability, who may experience difficulty in obtaining their prescription medication. Appendix X shows pharmacies that currently have a prescription collection and delivery service.

3.6. Electronic Prescribing

The development of a dedicated prescription ordering department (POD), electronic prescription services (transmission of a patient's medication request electronically to their nominated pharmacy) and established repeat prescription collection and delivery services, has provided comprehensive local coverage of dispensing service provision, ensuring provision of prescribed medication for people unable to easily access community pharmacies. For people living in more remote locations, collection and delivery services have been essential in ensuring housebound patients and those that have difficulties with accessing pharmacies are able to receive their prescribed treatment. (It should be noted that provision of a collection and delivery service is not an NHS pharmaceutical services requirement).

3.7. Community Pharmacy Services

Community pharmacies already make a significant contribution to the health and wellbeing of the local population. Essential services as outlined by the community pharmacy contract are delivered by all providers. Contract adherence is monitored by the local NHS England Director of Commissioning Operations (DCO) Team.

In previous years, contracts have been monitored using a self-assessment process and a number of site visits. Monitoring has helped to ensure that high standards of pharmaceutical care are being consistently delivered. Appendix VII details all pharmaceutical providers currently operating in Telford and Wrekin.

The NHS Pharmaceutical Services and Local Pharmaceutical Services Regulations (2013 Regulations) provides the legal framework that govern the services that pharmaceutical services providers can provide. Although dispensing practices provide a wide range of

services for their patients, for the purpose of the PNA, only the prescription dispensing services are considered within the regulation and PNA.

There are three levels of pharmaceutical services that community pharmacies can provide:

- Essential services services all pharmacies are required to provide
- ➤ Advanced services services to support patients with safe use of medicines
- > Enhanced services services that can be commissioned locally by NHS England

Pharmacies can also provide locally commissioned services which are commissioned by local commissioners such as Telford and Wrekin Council.

The following sections detail current service provision in Telford & Wrekin across Essential, Advanced and Enhanced services. Data for current pharmacy services provided in the borough was collated using a pharmacy practice questionnaire completed on the PharmOutcomes platform. All local providers were asked to complete the practice questionnaire. The questionnaire was developed nationally and approved by the PSNC (Pharmaceutical Services Negotiating Committee). Returned questionnaires were analysed by the Local Authority. Information regarding the dispensing service at Wellington Road Surgery (Newport) was obtained directly from the GP practice. Responses are summarised in Appendix X and maps of current provision are based on data from this survey. Currently provided services have been checked against local and NHS contracts and all responses were reviewed by pharmacies for validation. The following sections provide detailed analysis of current pharmaceutical service provision.

4. Essential Services

All providers are obliged to offer essential services:

Dispensing

This is the supply of medicines and appliances ordered on NHS prescriptions together with information and advice, to enable safe and effective use by patients and carers, and maintenance of appropriate records.

Repeat dispensing/ electronic Repeat Dispensing (eRD)

At least two thirds of all prescriptions generated in primary care are for patients needing repeat supplies of regular medicines, and since 2005 repeat dispensing has been an Essential Service within the Community Pharmacy Contractual Framework (CPCF). Under the repeat dispensing service pharmacy teams will:

- Dispense repeat dispensing prescriptions issued by a GP
- Ensure that each repeat supply is required
- Seek to ascertain that there is no reason why the patient should be referred back to their GP.

The service is now possible using both paper prescriptions and via the Electronic Prescription Service (EPS) as electronic Repeat Dispensing (eRD)

Waste management

Community pharmacies must accept unwanted medicines from households and individuals which require safe disposal. NHS England will then arrange for the collection and disposal of waste medicines from pharmacies. The aims of this essential service are to:

- Ensure the public has an easy method of safely disposing of unwanted medicines
- Reduce the volume of stored unwanted medicines in people's homes, by providing a route for disposal, thus reducing the risk of accidental poisonings in the home and diversion of medicines to other people not authorised to possess them.
- Reduce the risk of exposing the public to unwanted medicines which have been disposed of by non-secure methods.
- Reduce the environmental damage caused by the use of inappropriate disposal methods for unwanted medicines.

Public health (promotion of healthy lifestyles)

The provision of opportunistic healthy lifestyle advice and public health advice to patients receiving prescriptions who appear to:

- Have diabetes; or
- > Be at risk of coronary heart disease, especially those with high blood pressure; or
- Who smoke; or
- Are overweight

In addition, pro-active participation in national/local campaigns to promote public health messages to general pharmacy visitors during specific targeted campaign periods is part of the Public Health essential service. The aims of this essential service are to:

- Increase patient and public knowledge and understanding of key healthy lifestyle and public health messages so they are empowered to take actions which will improve their health.
- ➤ Target the 'hard to reach' sectors of the population who are not frequently exposed to health promotion activities in other parts of the health or social care sector.

Signposting

The provision of information to people visiting the pharmacy, who require further support, advice or treatment, which cannot be provided by the pharmacy, about other health and social care providers or support organisations who may be able to assist the person. Where appropriate, this may take the form of a referral.

Support for self-care

Pharmacies will help manage minor ailments and common conditions, by the provision of advice and where appropriate, the sale of medicines, including dealing with referrals from NHS 111. Records will be kept where the pharmacist considers it relevant to the care of the patient. The aims of this essential service are:

- To enhance access and choice for people who wish to care for themselves or their families
- People, including carers, are provided with appropriate advice to help them selfmanage a self-limiting or long-term condition, including advice on the selection and use of any appropriate medicines
- People, including carers, are opportunistically provided with health promotion advice when appropriate
- People, including carers, are better able to care for themselves or manage a condition both immediately and in the future, by being more knowledgeable about the treatment options they have, including nonpharmacological ones
- > To minimise inappropriate use of health and social care services.

Clinical governance

Pharmacies must apply clinical governance principles to the delivery of services. This will include use of standard operating procedures; recording, reporting and learning from adverse incidents; participating in continuing professional development and clinical audits; and assessing patient satisfaction.

Advanced Services

5.1. Medicines Use Review

5.1.1. Overview: Medicine Use Review

Medicines Review Service includes reviewing medicines adherence periodically, as well as responding to a need to make a significant prescription intervention during the dispensing process. Medicines Use Review (MUR) is about helping patients use their medicines more effectively. Effective and targeted MUR's will help to support patients with long term conditions and those who have been recently discharged from hospital. Adherence to long term medication has been found to be as low as 50%. MUR's will help to improve adherence and ensure outcomes related to medicines interventions are realised. Recommendations following an MUR will focus on healthier lifestyles as well as a better understanding of treatment. The aims of the service are to improve patient understanding and adherence or their prescribed medication by:

- Establishing the patient's actual use, understanding and experience of taking their medicines
- Identifying, discussing and resolving poor or ineffective use of their medicines
- > Identifying side effects and drug interactions that may affect patient compliance
- Improving the clinical and cost effectiveness of prescribed medicines and reducing medicine wastage.

National target groups were introduced in 2011 and include the following:

- Patients taking high risk medicines
- Patients recently discharged from hospital who had changes made to their medicines while they were in hospital (ideally patients discharged from hospital will receive an MUR within four weeks of discharge but in certain circumstances the MUR can take place within eight weeks of discharge)
- Patients with respiratory disease
- Patients at risk of or diagnosed with cardiovascular disease and regularly being prescribed at least four medicines.

From 1st April 2015, pharmacies have been advised to carry out more than 70% MURs within a financial year with patients from one of these target groups. In Telford & Wrekin, all 37 pharmacies are providers of MUR and have capacity to undertake up to 400 a year per pharmacy.

5.1.2. Service Provision: Medicine Use Reviews

For full list of providing pharmacies see Appendix IX and map E.

In 2016/17, there were 10,721 MURs with an average of 282 MURs per provider (see table below). Lakeside South had the highest activity per pharmacy of all three localities (average 288 MURs per pharmacy) though the annual average MUR activity was not significantly different in each locality. Across the borough, the monthly average activity per pharmacy was lower than the national average for every month April 2016 – March 2017 (national average ranged from 23.6 – 35.0 MURs per claiming pharmacy)¹⁰.

Locality	Average Activity per Provider
Hadley Castle	276.2
The Wrekin	283.6
Lakeside South	288
Telford & Wrekin	282.1

In 2017/18, all 37 pharmacies are signed up to deliver MUR. There is good coverage of MUR services at locality level in Telford & Wrekin (map E).

5.2. New Medicines Service

5.2.1. Overview: New Medicines Service

The New Medicines Service (NMS) provides support for people with long-term conditions newly prescribed a medicine to help improve medicines adherence; it is initially focused on particular patient groups and conditions. The aims of the service are:

Improve patient adherence which will generally lead to better health outcomes

¹⁰ PNSC, MUR Statistics 2016/17. Available from http://psnc.org.uk/funding-and-statistics/nhs-statistics/murstatistics/

- Increase patient engagement with their condition and medicines, supporting patients in making decisions about their treatment and self-management
- Reduce medicines wastage
- Reduce hospital admissions due to adverse events from medicines
- ➤ Lead to increased Yellow Card reporting of adverse reactions to medicines by pharmacists and patients, thereby supporting improved pharmacoviligance.

5.2.2. Service provision: New Medicines Service

For full list of providing pharmacies see Appendix IX and map F.

In 2016/17 there were 2,890 interactions involving NMS with an average of 78 interactions per provider (see table below). Hadley Castle had the highest activity per pharmacy of all three localities (average 103 interactions per commissioned pharmacy). All pharmacies currently provide NMS except one pharmacy.

Locality	Average Activity per Provider
Hadley Castle	102.5
The Wrekin	62.4
Lakeside South	62.1
Telford & Wrekin	78.1

In 2017/18, 36 pharmacies are signed up to deliver NMS. There is good coverage of NMS services at locality level in Telford & Wrekin (map F).

5.3. Appliance Use Review

5.3.1. Overview: Appliance Use Review

Appliance Use Review (AUR) can be carried out by a pharmacist or a specialist nurse in the pharmacy or at the patient's home. AURs should improve the patient's knowledge and use of their appliance by:

- Establishing the way the patient uses the appliance and the patient's experience of such use
- ➤ Identifying, discussing and assisting in the resolution of poor or ineffective use of the appliance by the patient
- Advising the patient on the safe and appropriate storage of the appliance
- Advising the patient on the safe and proper disposal of the appliances that are used or unwanted.

The service can be provided by pharmacies that normally provide the specified appliances in the normal course of their business. Before providing the service, the pharmacy must notify the NHS Business Services Authority and the CCG that it wishes to provide the service. It must also inform them as to whether the service will be provided at the patient's home and a statement of each location at which the service is to be provided.

5.3.2. Service Provision: Appliance Use Review

For full list of providing pharmacies see Appendix IX and map G.

In 2016/17, only two providers had interactions involving AUR: one in The Wrekin locality and one in Hadley Castle (see table below). This included 23 off site and 15 on premises interactions.

Locality	Total Activity (interactions)
Hadley Castle	23
The Wrekin	15
Lakeside South	0
Telford & Wrekin	38

In 2017/18, ten pharmacies are signed up to deliver Appliance Use Review: five in Lakeside South, three in The Wrekin and two in Hadley Castle (see map G). This means that there is currently no provision in Newport or Wellington (see appendix X). Service activity is as expected and in line with national activity.

5.4. Stoma Customisation Service

5.4.1. Overview: Stoma Customisation Service

The Stoma Appliance Customisation (SAC) service involves the customisation of more than one stoma appliance, based on the patient's measurements or a template. The aim of the service is to ensure proper use and comfortable fitting of the stoma appliance and to improve the duration of usage, thereby reducing waste.

If on presentation of a prescription a pharmacy is not able to provide the service because the provision of the appliance or the customisation is not within the pharmacist's normal course of business, the prescription must, subject to patient consent, be referred to another pharmacy or provider of appliances.

5.4.2. Service Provision: Stoma Customisation Service

For full list of providing pharmacies see Appendix IX and map H.

In 2016/17 there were 165 interactions involving stoma appliance customisation through ten providers (see below). Lakeside South had the highest activity per providing pharmacy (average of 20.3) though The Wrekin had the highest number of active providers (four pharmacies) and the highest number of interactions involving stoma customization:

Locality	Total Activity (interactions)
Hadley Castle	36
The Wrekin	68
Lakeside South	61
Telford & Wrekin	165

In 2017/18, seven providers are signed up to deliver stoma appliance customisation: four pharmacies in Lakeside South, two in The Wrekin and one in Hadley Castle. There is currently no provision in Newport or Donnington (see Appendix X). There is also no provision in Hadley but there is adequate public transport to the provider in Wellington. This suggests provision and coverage is adequate and in line with national averages.

5.5. NHS Urgent Medicine Supply Advanced Services (NUMSAS)

5.5.1. Overview: NUMSAS

NUMSAS is currently a pilot service commissioned by NHS England that manages a referral from NHS 111 to a community pharmacy, when a patient has contacted NHS 111 because they need urgent access to a medicine or an appliance that they have been previously prescribed on an NHS prescription. The service enables appropriate access to medicines or appliances out of hours via community pharmacy, relieving pressure on urgent and emergency care services by shifting demand from GP out of hours providers to community pharmacies. There must be an urgent need for the medicine or appliance and it must be impractical for the patient to obtain an NHS prescription for it without undue delay. This service is being commissioned as a national pilot advanced service and was launched on 4th December 2017.

5.6. Influenza Adult Vaccination Service

5.6.1. Overview: Influenza Adult Vaccination Service

This service supports the provision of the national flu vaccination programme between September and January every year and provides an alternative option to general practice. For most healthy people, influenza is usually a self-limiting disease. However, children, older people, pregnant women and those with certain long-term conditions are at increased risk of severe illness if they catch it. The vaccination provides protection against the most prevalent strains of the virus. The aims of the service are:

- Increase the uptake of seasonal influenza vaccine across Shropshire & Staffordshire in line with Department of Health recommendations
- Reduce the serious morbidity/mortality and hospitalisations from influenza by immunising those most likely to have a serious or complicated illness, should they develop influenza
- Improve access to seasonal influenza vaccine for eligible patients who are registered with a GP practice in Shropshire and Staffordshire.

There was a 300% increase in the number of flu vaccinations provided by pharmacies between 2015/16 and 2016/17. Both the proportion of pharmacies signed up to provide flu vaccination services (21 to 24) and the average provision per pharmacy (42 to 111 vaccinations per pharmacy) increased though this was lower than the national average of 113

vaccinations per pharmacy¹¹. Provision across Telford and Wrekin is variable and community pharmacies should continue to offer patients choice, increasing vaccination provision and uptake, particularly given that there has been generally a lower uptake of seasonal flu vaccination across some areas of Telford and Wrekin.

5.6.2. Service Provision: Influenza Adult Vaccination Service

For full list of providing pharmacies see Appendix IX and map J.

In 2016/17, 2,652 flu vaccinations were administered across 24 providers in Telford and Wrekin. This is a 300% increase in the number of vaccinations from 884 in 2015/16 and was by far the largest increase of all the CCGs in Shropshire and Staffordshire. This boosted Telford and Wrekin's activity from the second lowest activity to 4th highest activity of eight CCGs in Shropshire and Staffordshire. The average number of vaccinations per pharmacy rose to 111, above the average for Shropshire and Staffordshire (94 per pharmacy).

In 2017/18, 29 pharmacies are signed up to provide flu vaccination for NHS-eligible patients (see map J). These pharmacies are fairly evenly distributed though patients living in Hadley and Trench would benefit from more pharmacies in these areas providing this service. However, there is no evidence that patients in these areas aren't accessing this service elsewhere.

5.7. Recommendations: Advanced Services

- Medicines Use review (MUR) and the New Medicines service (NMS) have become established advanced services. PNA analyses have shown that there is sufficient awareness of these services and they are offered by the majority of pharmacies. Telford and Wrekin would encourage all providers to continue to focus these review services on those identified within the national target groups and those that are that are identified as poorly adherent to prescribed treatment.
- ➤ The review of coverage of advanced services provided by community pharmacies in the PNA has shown that there is sufficient coverage of the Medicines Use Review (MUR) and the New Medicines service (NMS) services. Pharmacies falling considerably below the average number of MURs should be supported to increase the numbers of MURs, particularly in areas where there is an identified need, to help with the management of long-term conditions and reducing emergency admissions. This may be done by promoting the concept of MURs to the public so that they understand the differences between reviews done by GP and pharmacies. GP practices are also ideally placed to work with their local pharmacies to identify and refer on patients who require a MUR or NMS.
- Coverage of appliance user reviews and stoma appliance customisation services are low, which is similar to the trend seen across England due to these services being a

¹¹ Pharmaceutical Services Negotiating Committee, Flu vaccination data for 2016/17 available from http://psnc.org.uk/services-commissioning/advanced-services/flu-vaccination-service/flu-vaccination-data-for-201617/

- specialist area, with many patients receiving the support they require either from a clinic, hospital or from a dispensing appliance provider located in another area.
- Annual seasonal influenza vaccination, as part of the national programme, makes a significant contribution to reducing illness and death from 'flu, which in turn contributes more widely to managing demand for health and social care services during the winter. Pharmacies having been increasingly playing a key role in the annual 'flu immunization programme in recent years. All pharmacies have the opportunity to provide influenza vaccination advanced service and are encouraged to do so to contribute to overall improving immunization coverage. During the 2017/18 season the national programme was extended to explicitly include social care workers in registered care homes, pharmacies providing the advanced service can also contribute to improving uptake in this group.

6. Enhanced Services

6.1. Pharmacy First Common Ailments

6.1.1. Overview: Pharmacy First Common Ailments

Patients can access community pharmacies for the self-management of a range of conditions. The service enables pharmacies to undertake consultations, provide advice and medications if appropriate for their condition similar to a consultation at a GP practice. Around a fifth of GP consultations are thought to related to minor ailments that could largely be dealt with by self-care and support from community pharmacies. There is a continued need to raise awareness of the service within the Borough and encourage GP practices/ out of hours providers to actively refer appropriate patients where possible. Providers are encouraged to support their patients with common ailments to access this service, which in turn will reduce the pressure on urgent care services and community healthcare.

6.1.2. Service Provision: Pharmacy First Common Ailments Service

For full list of providing pharmacies see Appendix IX and map K.

In 2016/17 there were 1,684 interactions through the common ailments service of 20,250 interactions over the whole of Shropshire and Staffordshire (8.3% of all interactions involving the common ailments service).

In 2017/18, 29 pharmacies have signed up to provide this service and 25 are currently providing (see Appendix X). Again, those currently providing this service are fairly evenly distributed but those in Hadley would benefit from more pharmacies in these areas providing this service, as there are residents in the top 10-30% most deprived in terms of health and disability living here. However, there is no evidence that patients in these areas aren't accessing this service elsewhere.

6.2. Pharmacy First Emergency Supply Service

6.2.1. Overview: Pharmacy First Emergency Supply Service

The Emergency Supply Service enables pharmacies to issue up to 14 days' worth of medication to patients who have run out of their prescribed medication when it is considered an emergency. Patients can access this service by presenting at their local pharmacy. Additionally, local out of hours providers, GP practices and NHS 111 actively sign post patients to this service.

6.2.2. Service provision: Pharmacy First Emergency Supply Service

For full list of providing pharmacies see Appendix IX and map L.

In 2016/17 there were 793 interactions involving the emergency supply service of 5,804 over the whole of Shropshire and Staffordshire (13.7% of all interactions involving emergency supply service).

In 2017/18, 22 pharmacies are signed up to provide this service; six in Lakeside South, six in The Wrekin and ten in Hadley Castle. There is good coverage (see map L) with provision in most areas except Leegomery, Shawbirch and Ironbridge which have public transport to nearby services.

6.3. Pharmacy First Urinary Tract Infections (UTI) and Impetigo

6.3.1. Overview: Pharmacy First UTI/Impetigo Service

This service allows pharmacies to provide antibiotic treatment for urinary tract infections (UTI) for women aged 16-74 and impetigo in children and adults who meet the inclusion criteria following assessment by a pharmacist under a Patient Group Direction (PGD).

6.3.2. Service provision: Pharmacy First UTI/Impetigo Service

For full list of providing pharmacies see Appendix IX.

In 2016/17 there were only four interactions involving the UTI/impetigo service, out of 13 interactions through seven providers in the whole of Shropshire.

In 2017/18, 19 pharmacies are signed up to provide this service in Telford & Wrekin: nine in Hadley Castle locality, four in The Wrekin and six in Lakeside South.

6.4. Recommendations: Enhanced Services

There is a need for commissioners to work with local providers to increase referral to the common ailments service. Local commissioners need to encourage all community

¹² Pharmacists will use their professional judgement when assessing the patient's need.

- pharmacy providers to participate in the common ailments service and increase the number of consultations currently undertaken.
- ➤ Emergency supply services are available across Telford and Wrekin. There is a need for local commissioners to increase awareness with local healthcare providers of the emergency supply service and encourage all local providers to participate in delivery of this service.
- ➤ Local commissioners need to encourage all community pharmacy providers to participate in the Pharmacy First UTI/ Impetigo service, and increase the number of consultations currently undertaken. Local commissioners also need to work alongside providers and patient groups to increase awareness and referral into this service. Consideration should also be given to the further development of clinically focused services that can be delivered through accredited community pharmacies, improving access for patients.
- NHS England North Midlands, Telford and Wrekin County Council and other local commissioners need to ensure there is equitable provision of locally commissioned services across Telford. This could be coordinated through the STP.

7. Locally commissioned pharmacy services: Sexual Health Services

7.1. Sexual Health Needs

Good sexual and reproductive health and the reduction of the prevalence and transmission of Sexually Transmitted Infections (STIs) are of public health importance, as they are avoidable but can lead to reproductive ill-health, such as infertility. STIs are also linked to some cancers such as cervical, anal, and oropharyngeal cancer and therefore have significant cost implications for the NHS as well as contributing to antibiotic resistance.

Teenage conception rates have been historically high in Telford & Wrekin, but rates have been declining over the past decade, decreasing from 64.2 conceptions per 1000 women under age 18 years in 1998, to 25 per 1000 in 2015. For the first time, in 2015, teenage conception rates in Telford are now rated 'similar' to the England average (20.8 per 1000) and the West Midlands regional average (23.7 per 1000). The highest rates of teenage pregnancy continue to be seen in the most deprived electoral wards.

Telford & Wrekin Council commissions South Staffordshire & Shropshire Healthcare NHS Foundation Trust to deliver the integrated sexual health services in Telford & Wrekin. The service includes the full range of sexual health services, prevention services, specialist outreach and online STI screening. A new Telford Town Centre clinic has been developed as a way to improve access. The Council also commissions community pharmacies in Telford & Wrekin to deliver emergency hormonal contraception and Chlamydia & Gonorrhoea Screening and Treatment.

7.2. Emergency Hormonal Contraception

7.2.1. Overview: Emergency Hormonal Contraception

Approved pharmacists can supply emergency hormonal contraception EHC (Levonorgestrel 1500mg or Ulipristal 30mg) to clients when appropriate, in line with the requirements of a locally agreed Patient Group Direction (PGD). The PGD specifies the age range (25 years and under) and inclusion criteria of clients that are eligible for the service. The service is confidential, easily accessible, non-judgmental and is made free of charge to the client.

The service requires community pharmacists to comply with contractual arrangements and link with existing local networks for integrated sexual health services. Clients excluded from the PGD criteria will be referred to other local services that will be able to assist them, as soon as possible, e.g. the integrated sexual health service. All pharmacies involved in this enhanced service need to ensure their accreditation is maintained.

The pharmacy will provide support and advice to clients accessing the service, including advice on the avoidance of pregnancy and sexually transmitted infections (STIs) through safer sex and condom use, advice on the use of regular contraceptive methods. The pharmacy will also provide onward signposting to services that offer long term contraceptive methods and diagnosis and management of STIs.

The aims of the EHC service are:

- > To increase the knowledge, especially among young people, of the availability of emergency contraception and contraception from pharmacies.
- > To improve access to emergency contraception and sexual health advice.
- > To increase the use of EHC by women who have had unprotected sex and help contribute to a reduction in the number of unplanned pregnancies in the client group.
- > To refer clients, especially those from hard to reach groups, into mainstream Integrated Sexual Health Services.
- > To increase the knowledge of risks associated with Sexually Transmitted Infections.
- To refer clients who may have been at risk of STIs to an appropriate service.
- ➤ To strengthen the local network of contraceptive and sexual health services in the community, to help ensure easy and swift access to advice and treatment.

7.2.2. Service Provision: Emergency Hormonal Contraception

For full list of providing pharmacies see Appendix X and map M.

In 2016/17, the 25 pharmacies providing EHC delivered 806 consultations in 2016/17, which was a 17% increase since 2013/14. The greatest levels of EHC activity for under 25s in pharmacies were seen in those aged 16 to 24 years. This age group accounts for 87% of all consultations (47% of total customers are aged 20-24 and 39% are aged 16-19). Telford Town Centre pharmacies showed the greatest uptake for EHC, delivering a third of all activity. This is not unexpected given the potential anonymity offered by the size and location of these providers. The second largest proportion of all EHC activity was based in the Newport area,

with 13% of all activity. This is likely to be due to Newport's rural location and ease of access for Newport's university population.

In 2017/18, 35 pharmacies have contracts to deliver a sexual health services in Telford & Wrekin (see Appendix IX) and 24 of these reported that they are currently delivering EHC in the pharmacy survey (see Appendix X and map M). There is good coverage of EHC provision, with all areas with higher than average teenage pregnancy rates covered. Opening hours for pharmacies currently providing EHC are listed in Appendix XI. There are also other local providers of EHC within Telford and Wrekin, including GPs, integrated sexual health service and School Nurses.

7.3. Chlamydia & Gonorrhoea Screening and Treatment

7.3.1. Overview: Chlamydia & Gonorrhoea Screening and Treatment

Sexually transmitted infections (STIs) disproportionately affect young people. Research shows that young people are more likely to have higher number of sexual partners, use barrier contraception inconsistently and are more likely to become re-infected after being diagnosed with and treated for an initial STI. Chlamydia is the most common STI and left untreated can lead to pelvic inflammatory disease, ectopic pregnancy, and infertility. Diagnostic rates for Chlamydia infection at a local authority-level are included in the national Public Health Outcomes Framework.

In Telford & Wrekin, there was a 38% increase in the number of gonorrhoea diagnoses between 2015 and 2016. In contrast nationally, there was an 11% drop in numbers over the same period. As a result, the Council commissions community pharmacies in Telford & Wrekin to issue chlamydia and gonorrhoea testing kits. From June 2017, community pharmacies have used a single chlamydia and gonorrhoea testing kit.

In line with the requirements of a locally agreed Patient Group Direction (PGD), approved pharmacists supply Azithromycin or Doxycycline to clients when appropriate for treatment. The PGD specifies the age range (25 years and under) and an inclusion criteria for clients that are eligible for the service. The service is confidential, easily accessible, non-judgmental and treatment is made free of charge to the client.

The aims of the service are to:

- > Offer a user-friendly, non-judgmental, client-centred and confidential service
- Increase access to Chlamydia testing within existing consultations
- Normalise Chlamydia testing within existing consultation
- Increase access to treatment of asymptomatic individuals with Chlamydia infection
- Increase access for young people to sexual health advice and referral on to specialist services where required
- Increase service users' knowledge of the risks associated with STIs

- Strengthen the network of contraception and sexual health services to help provide easy and swift access to advice
- Reach sexually active young men and women who do not use mainstream sexual health services
- > De-stigmatise Chlamydia infections and raise awareness of positive sexual health
- Reduce the burden on secondary care services by diagnosing and treating infections in the community
- ➤ Increase early detection and treatment of both Chlamydia and Gonorrhoea and therefore reduce transmission and complications associated with these infections.

7.3.2. Service Provision: Chlamydia & Gonorrhoea Screening and Treatment

For full list of providing pharmacies see Appendix X and maps N and P.

The uptake of Chlamydia testing in young people in Telford & Wrekin (across all sexual health service settings, including community pharmacy) is significantly lower than the national average. In 2016 (16.5%) of 15-24 year olds had taken part in Chlamydia testing, compared to 20% across England as a whole.

The Chlamydia diagnoses rates are similar to the national average for all 15-24 year olds. Chlamydia detection rates continue to be higher in females aged 15-24 years compared to males, which is due to females being more likely to access testing (see table below).

Table of Chlamydia Testing and Diagnosis Indicators

Indicator	Telford & Wrekin	England	Time period
Chlamydia diagnoses (15-24 year olds) (persons)	1,990	1,882	2016
Chlamydia diagnoses (15-24 year olds) (males)	1,056	1,269	2016
Chlamydia detection rate (15-24 year olds) - (females)	2,990	2,479	2016
Chlamydia proportion aged 15-24 screened	16.5%	20.7%	2016

Key to RAG rating:

Telford & Wrekin position statistically significantly worse than the England average

Telford & Wrekin position statistically significantly similar to the England average

Telford & Wrekin position statistically significantly better than the England average

Source: www.phoutcomes.info, http://fingertips.phe.org.uk/profile/sexualhealth

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According to the 2016/17 Performance Data Report, there were seven pharmacies signed up to distribute testing kits and five signed up to provide treatment for Chlamydia. However, despite the high level of sign up to this scheme only three pharmacies actively provided this. A total of 47 kits were given out with a total of 11 people treated for chlamydia in community pharmacies.

In 2017/18, 35 pharmacies have contracts to deliver sexual health services and 11 of these reported that they currently provide chlamydia treatment in the pharmacy survey (June 2017, see Appendix X, map N). Eight of these pharmacies also reported that they currently provide chlamydia screening service as well (Appendix X, map P). There is chlamydia screening provision in each locality (three in Lakeside South, one in The Wrekin and four in Hadley Castle) though none of the pharmacies in Wellington or Newport currently provide this service. Newport is adjacent to an area with a high proportion of 15 – 24 year olds due to Harper Adams agricultural university (see map N). However, the university has its own chlamydia testing and treatment services and hence students are less likely to seek this service in community pharmacies. Similarly, Wellington College currently have a weekly clinic for integrated sexual health services.

7.4. Condom Distribution Scheme (CDS)

7.4.1. Overview: CDS

Condom Distribution Schemes, known as "C-card" schemes, are confidential services that provide free condoms, sexual health advice and support to young people. The aims of this services are:

- To make condoms more accessible to young people, whilst providing them with support and information about sexual health and how to use condoms correctly.
- To encourage good longer-term sexual health awareness and behaviour and better use of further services.

7.4.2. Service Provision: CDS

For full list of providing pharmacies see Appendix IX.

In 2017/18, 27 pharmacies are signed up to deliver either registration and distribution of CDS, or distribution only.

7.5. Recommendations: Sexual Health Services

➤ Emergency Hormonal Contraception (EHC): Assessment of the current provision suggests that there is adequate local coverage for EHC for women aged under 25 years. However, Telford and Wrekin Council encourage all community pharmacies to participate in this enhanced service, especially those open during weekends and extended hours during the week. Generally service provision during weekends is significantly less than that during weekdays. Community pharmacies open during the weekend offer essential provision during this time. Commissioners responsible for sexual health services provision have evaluated the extension of free EHC for women

- over 25 given previous PNA recommendation. EHC is already available to women of all ages free-of-charge through their GP practice and whilst it is acknowledged that expanding free EHC in pharmacies for women over 25 would reduce inequities in choice, this is not considered cost effective at this time.
- Chlamydia & Gonorrhoea Screening Scheme: Assessment of current provision suggests that there is adequate local coverage in terms of pharmacy sign up for the Chlamydia Screening Scheme. However, testing and treatment levels need to be improved amongst 15-24 young people, with a particular focus on men. A training programme should be developed as a way of encouraging and supporting pharmacies that have signed up to the scheme to improve access to Chlamydia & Gonorrhoea testing and treatment.
- Condom Distribution Scheme: Assessment of current provision suggests that there is adequate local coverage in terms of pharmacy sign up to distribute condoms, however more awareness is need to promote the scheme as well as distribution of condoms to young people accessing EHC and Chlamydia Screening & Treatment services within community pharmacies.

8. Locally Commissioned Pharmacy Services: Substance Misuse Services

8.1. Substance Misuse Needs

Liver disease is the only major cause of early death in Telford and Wrekin which is still on the rise and this contributes to lower than average rates of life expectancy in both men and women. Although the most recent (2014-16) data suggests our liver disease mortality rate (21.4 per 100,000) is now similar to the England average (18.3 per 100,000) it is too soon to tell if this will be a sustained downward trend. Reducing the number of people who misuse drugs and alcohol continues to be a Telford and Wrekin Health & Wellbeing Board priority.

Community pharmacy services have a key role to play in improving treatment and recovery and minimising harm for people with substance misuse dependence problems, which are key aims of the Telford & Wrekin Drug & Alcohol Strategy.

The public survey of views and knowledge of pharmacy services indicated that 37% of respondents were aware of the substance misuse services offer in local community pharmacy, and 31% were aware that they could access clean needles from a pharmacy. Almost all of the 37 pharmacies offer a supervised consumption service, which benefited circa 670 people in recovery for drug dependence in 2016/17.

Telford & Wrekin Council has re-commissioned Inclusion (South Staffordshire and Shropshire NHS Foundation Trust) to provide a new, transformed system substance misuse treatment system (STARS) from April 2018. This new treatment system will continue to rely on

community pharmacies in Telford & Wrekin to deliver supervised consumption and needle exchange services through a subcontracting arrangement.

For more information on Telford & Wrekin's substance misuse indicators, see the Public Health Outcomes Framework available from:

http://www.telford.gov.uk/downloads/download/806/public_health_outcomes_framework_phof_summary

8.2. Supervised Consumption (supporting clients with opiate dependence)

8.2.1. Overview: Supervised Consumption

This service offers a client-focused non-judgmental, confidential approach to supervising the consumption of medicines; including methadone for the management of opiate (drugs) dependence by accredited pharmacists/pharmacies. The service requires the accredited pharmacist to supervise the taking of prescribed medicines at the point of dispensing in the pharmacy, ensuring that the correct dose has been administered appropriately to the correct patient. The pharmacy will also provide appropriate support and advice to the client, including referral to primary care colleagues and the new STARS substance misuse treatment system provided by Inclusion and other partners from April 2018.

The service aims:

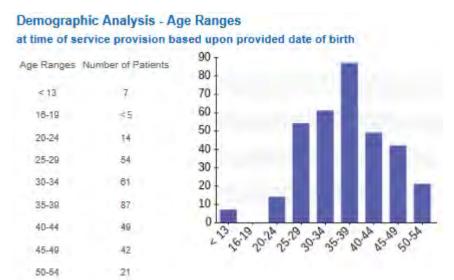
- To ensure the client follows their agreed treatment plan by:
- Dispensing in specified instalments (doses may be dispensed for the patient to take away to cover days when the pharmacy is closed, i.e. weekends).
- Ensuring each supervised dose is correctly consumed by the patient for whom it was intended whilst they are on site.
- To reduce the risk to local communities by:
- Ensuring that people taking the prescribed substances follow the prescriber's instructions and therefore prevent prescribed medicines entering onto the illicit drugs market
- Preventing accidental exposure of prescribed medication used in substance misuse

The pharmacy/pharmacist will provide service users with regular contact with health care professionals and will help them access further advice or assistance, where required. Pharmacy will also promote a healthier lifestyle, by referral to specialist treatment centres or other health and social care professionals where appropriate.

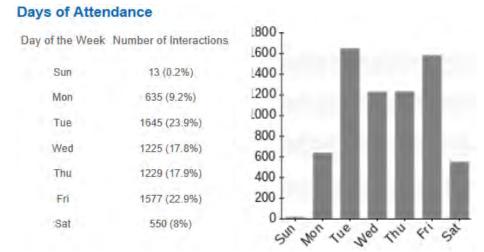
8.2.2. Service Provision: Supervised Consumption

For full list of providing pharmacies see Appendix X and map Q.

In 2016/17, 32 of 35 accredited pharmacies were actively providing this service, when 6874 personal interactions with 671 patients took place (average of 10.2 interactions per patient). The majority of patients (77.9%) received methadone solution and 22.1% received buprenorphine tablets. Tuesday and Friday were the most popular days for attendance (both >20% attendance) and the most common age group of patients was 35-39 (see graph below; ages 15-19 and >50 have been removed due to numbers <5).



Source: PharmOutcomes, Observed Consumption Client Registration Form 2016/17



Source: PharmOutcomes, Observed Consumption 2016/17

In 2017/18, 35 pharmacies have contracts to deliver supervised consumption services (see appendix IX) and 27 pharmacies currently provide this service, including three who also provide needle exchange services (see Appendix X and map Q).

8.3. Needle and Syringe Programme

8.3.1. Overview: Needle and Syringe Programme

Pharmacies offering the Syringe Provision and Needle Exchange service offer a non-judgmental, client-centred, confidential service for the provision of needles, syringes and other injecting equipment. Used equipment is accepted for safe disposal at the pharmacy. The pharmacies provide support and advice to the user, including referral to other health and social care professionals and specialist drug and alcohol treatment services (STARS from April 2018), where appropriate.

Harm reduction is a key objective of the Telford & Wrekin Drug and Alcohol Strategy and in this context pharmacies are expected to promote safe practice to users who inject, including advice on sexual health and sexually transmitted infections (STI), and blood borne viruses (BBV), for example HIV, Hepatitis B and C, including ways to get tested and immunised.

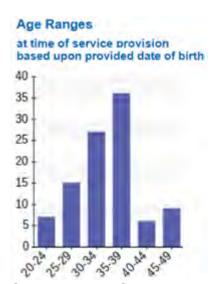
The Syringe Provision and Needle Exchange service aims:

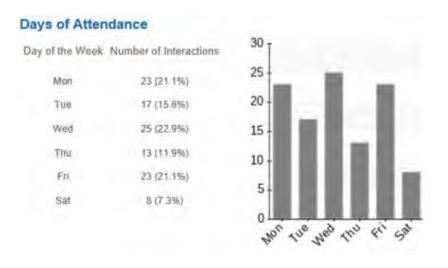
- ➤ To assist the service users to remain healthy until they are ready and willing to stop injecting and ultimately achieve a drug-free life with appropriate support
- ➤ To protect the health and reduce the rate of blood borne infections and drug related deaths of service users:
 - By reducing the rate of sharing and other high-risk injecting behaviours
 - By providing sterile injecting equipment and other support
 - By promoting safer injecting practices
 - By providing and reinforcing harm reduction messages, including safe sex advice and advice on overdose prevention (e.g. risks of poly-drug use, risks of using performance enhancing drugs and alcohol use).
- To improve the health of local communities, preventing the spread of blood borne infections by ensuring the safe disposal of used injecting equipment
- > To help service users access treatment, by offering referral to specialist substance misuse treatment centres and health and social care professionals where appropriate
- To aim to maximise the access and retention of all injectors, especially for the highly socially excluded
- ➤ To help service users access other health and social care services and to act as a gateway to other services (e.g. key working, prescribing, Hepatitis B immunisation, Hepatitis and HIV screening, primary care services etc).

8.3.2. Service Provision: Needle and Syringe Programme

For full list of providing pharmacies see Appendix X and map R.

In 2016/17, five pharmacies were accredited to deliver this service and all actively provided. There were 109 interactions with 45 patients (average of 2.4 interactions per patient). Monday, Wednesday and Friday were the most popular days for attendance (>20% for each, see graph below). The most common age group was 35-39 (see graph below; ages >50 years have been removed due to small numbers <5).





Source: PharmOutcomes, Needle Exchange 2016/17

In 2017/18, seven pharmacies have contracts to deliver needle exchange services (see appendix IX) and three are currently providing (see appendix X map R).

8.4. Naloxone Provision

8.4.1. Overview: Naloxone Provision

Britain continues to have a high number of drug-related deaths with opiate overdose remaining a major cause of death among injecting drug users. In England and Wales 2,022 deaths were registered in 2016, in which an opiate (mainly heroin or morphine) was mentioned on the death certificate: an average of six every day. This made up over half of all drug poisoning deaths, which has risen by 70% since 2015.¹³

Naloxone is a drug which temporarily reverses the effects of opioids such as heroin, methadone and morphine. For many years, Naloxone has been used within emergency medical settings to reverse the effects of opioid overdose and prevent death. UK Guidelines on Clinical Management of Drug Misuse fully endorses the use of Naloxone in overdose management and prevention.¹⁴

On the 1st October 2015, The Human Medicines (Amendment) (No. 3) Regulations 2015 (2015/1503) came into force. This allows Naloxone to be supplied by:

Persons employed or engaged in the provision of drug treatment services provided by, on behalf of or under arrangements made by one of the following bodies— a) an NHS body;(b) a local authority;(c) Public Health England; or(d) Public Health Agency... It can be supplied to

¹³ Office for National Statistics, Deaths related to drug poisoning in England and Wales: 2016 registrations. Available from

 $[\]frac{https://www.ons.gov.uk/people population and community/births deaths and marriages/deaths/bulletins/deaths related to dtodrug poisoning in england and wales/2016 registrations$

¹⁴ Department of Health, Drug Misuse and Dependence: UK guidelines on clinical management, 2017. Available from https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/668611/clinical_guidelines_2 https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/668611/clinical_guidelines_2

anyone in the course of lawful drug treatment services and only where required for the purpose of saving life in an emergency.

For explanatory memorandum see:

http://www.legislation.gov.uk/uksi/2015/1503/pdfs/uksiem 20151503 en.pdf

8.4.2. Pilot Service Provision: Naloxone

For full list of providing pharmacies see Appendix IX and map S.

A pilot of naloxone distribution is currently being set-up in Telford & Wrekin in the following pharmacies:

- Donnington Pharmacy
- Rowlands Hadley
- Rowlands Stirchley
- Asda Donnington
- Asda Town Centre Not participating as yet
- Tesco Wrekin Retail Park
- Woodside Pharmacy

Inclusion is a national organization that was established in 2002 as part of the specialist services division of SSSFT. It provides Overdose Awareness and use of Naloxone training to staff, service users, family members, hostel workers and others in line with local and national guidelines to reduce the numbers of drug related deaths from opioid overdose.

Staff supplying Naloxone have been appropriately trained (minimum requirement SMMGP online learning package and Inclusion Overdose Awareness and use of Naloxone training package) and have been signed off as competent by the Clinical Lead of the service. The Clinical Lead is responsible for keeping a register of appropriately trained staff/recovery champions/volunteers with the supply of Naloxone.

Training on how to recognise opioid overdose, overdose management, and administration of Naloxone injection is given before Naloxone is supplied. The training may be delivered on an individual or group basis. The training is not time consuming, taking five to ten minutes, and covers recognition of an opioid overdose and that the procedure is to:

- Ensure personal safety first
- Call an ambulance
- Place the victim in the recovery position
- Inject Naloxone into the thigh or upper arm muscle
- Wait with the victim until the ambulance arrives and safely dispose of the Naloxone kit to paramedics

The process of using the Naloxone kit is explained and demonstrated and an assessment checklist is carried out post training to ensure understanding. This is done each time a kit is given out or replaced.

One Naloxone pre-filled syringe/pack for intramuscular is supplied. Should there be an identified need for more than one kit, this should be discussed with the Clinical Lead. Each pack includes one Naloxone injection 1mg/ml as a 2ml pre –filled syringe. Each 2ml syringe is marked out with 5 x 0.4mg doses which is the minimum effective dose which can be given in an attempt to reverse the effects of opioid overdose.

The supply of Naloxone is recorded using Inclusion Community Medicines Supply and Administration Record. This data will be used for clinical audit and assessment of the pilot.

8.5. Recommendations: Substance Misuse Services

- Supervised consumption and needle exchange services: Appropriate borough-wide provision of these services should be reviewed as part of the transition to the new STARS during 2018.
- > Naloxone Provision: Following on from the pilot of distribution in these seven pharmacies, further consideration should be given to roll-out to additional pharmacies.

Other Locally Commissioned Services:

9.1. Automated Pill Dispenser

9.1.1. Overview: Automated Pill Dispenser

The automated pill dispenser (APD) is an aid for those with memory impairment. The dispenser holds 28 doses of medication and sounds an alarm when the medication is due. The device then flashes for up to an hour to alert the user to take the medication from the open slot.

Once a patient has been identified by social services or health staff (the assessor) as having problems remembering to take their medication and standard options have been considered, the pharmacist undertakes a Medication Use Review with the patient. If standard options are still not suitable, the APD will be demonstrated with the patient and if acceptable a referral will be made to the Medicines Management Team. Once the device is being used by the patient the pharmacist will then monitor compliance and the assessor will follow up with support if required.

9.1.2. Service Provision: Automated Pill Dispenser

For full list of providing pharmacies see Appendix IX.

In 2016/17, 394 APDs were distributed by 14 pharmacies, averaging 28 per pharmacy.

In 2017/18, there are 16 pharmacies that are commissioned to distribute APDs (see Appendix IX). These are distributed across all three localities with seven in Hadley Castle, five in The Wrekin and four in Lakeside South. A total of 305 APDs were distributed by 15 pharmacies from 1st April 2017 to 30th October 2017, with an average of 20 per pharmacy.

9.2. Palliative Care Just-in-case Boxes

9.2.1. Overview: Palliative Care Boxes

This scheme supports anticipatory prescribing and rapid access to medicines commonly prescribed in palliative care, by ensuring a Palliative Care Emergency Medicine Pack has been prescribed and placed in the patient's home. The packs are given to patients reaching the terminal phase of their illness. It also supports effective team working between doctors, nurses and pharmacists, both in and out of normal working hours.

A GP or a district, Macmillan or hospice outreach nurse working with the GP, will identify adult patients requiring palliative care support in their home. If it is anticipated that the patient's medical condition may deteriorate into the terminal phase of illness, and with the patient and carer's verbal agreement, the prescriber can initiate and prescribe an Emergency Medicine Pack. The GP practice will arrange for the chosen pharmacy to receive the prescription and supply the pack. The pack will be kept in the patient's home for rapid access to medicines commonly prescribed for breakthrough symptom control. All medicines will need to be authorised (prescribed doses, indication, directions, signed and dated) in the patient's community nursing notes by the prescriber in order to enable a community nurse to administer the prescribed medication. Community pharmacies are paid an annual retention fee of £100 for agreeing to participate in the service.

9.2.2. Service Provision: Palliative Care Boxes

For full list of providing pharmacies see Appendix IX.

In Telford & Wrekin, 26 pharmacies are currently accredited to issue Palliative Care Boxes (Appendix IX) with at least eight providers in each locality, though only 16 are currently providing (see appendix X). Service provision for supply of Palliative Care Boxes within Telford and Wrekin is currently considered adequate however the CCG will continue to recruit pharmacies to support the end of life pathway. Awareness of the service needs to be increased amongst local clinicians.

9.3. Primary Eyecare Assessment Referral Service (PEARS)

9.3.1. Overview: PEARS

The Primary Eyecare Assessment and Referral Service (PEARS) has been set up in Telford and Wrekin and as a gateway service for patients presenting with a range of eye conditions that could be treated in primary care. The service allows community pharmacies to supply medication in response to a diagnosis by the optometrist. The pharmacist will ensure that the

medication is appropriate and provide counselling on how to use the medicine and what to do if the condition deteriorates or fails to improve. The service aims to:

- Improve access for people with minor eye conditions by:
 - Promoting self-care through the pharmacy, including provision of advice and where appropriate medicines without the need to visit the GP practice;
 - Supplying appropriate medicines only when necessary at NHS expense.
- Utilise the expertise and accessibility of community pharmacies
- Encourage patients to visit community pharmacy for the management of minor eye ailments
- Integrate community pharmacy into the local care pathways as an integral provider of care within the community.

9.3.2. Service Provision: PEARS

For full list of providing pharmacies see Appendix IX.

In 2016/17 there were 337 interactions involving PEARS and in 2017 (1^{st} April – 23^{rd} November) there have been 236.

In 2017/18, 24 pharmacies are signed up to provide this service with geographical spread across all three localities (see Appendix IX).

9.4. Healthy Start Vitamins

9.4.1. Maternal and Infant Health Needs

Maternal and infant health in Telford & Wrekin is poorer than average on a series of measures¹⁵, this is exacerbated by high levels of social disadvantage in our local communities which creates obvious health inequalities. The key headlines are as follows:

Social disadvantage:

- 22% of children and young people (aged under 20 years) live in poverty (circa 8,700 children), which is significantly worse than the average for England (18%).
- 28.6% of women (8,900 females) aged 16-44 years live in communities classified within the most deprived fifth of areas in England.

Infant health:

 The rate of very low birthweight is significantly worse than the average for England, with 1.9% of babies (circa 39) weighing under 1500g each year.

¹⁵ Telford & Wrekin Council Intelligence, Maternal and Infant Health Report 2017. Available from http://www.telford.gov.uk/downloads/file/5233/maternal and infant health report january 2017

• Infant mortality rates (under 1 year old) are worse than the national average: sadly 41 deaths annually.

Maternal health and lifestyle:

- 71% of adults carry excess weight (i.e. overweight or obese), which is significantly worse than the national average (64.8%). This equates to circa 22,250 women of child bearing age (15-44 years).
- Levels of breastfeeding (both initiation at birth and duration at 6-8 weeks) have been historically low. Although rates have been improving slowly, almost a third (32.5%) of infants (655 babies) were not breastfed at birth, which is significantly worse than the average for England 25.7%.
- Maternal smoking remains significantly high. Despite recent fall in rates, 18.1% of women (circa 367) were still smoking at delivery in 2016/17.

9.4.2. Overview: Healthy Start Vitamins

The Department of Health recommends that vitamin supplements are beneficial during pregnancy and in growing children, when vitamin uptake may not be sufficient through diet alone. Healthy Start¹⁶, which replaced the historic Welfare Foods programme, is a statutory means-tested Government scheme. It aims to help children have the best nutritional start in life and support breastfeeding making healthy eating more affordable and providing healthy start vitamins. It supports pregnant women and families with babies and young children who are in receipt of benefits and also pregnant women under 18 years old, by providing coupons. These coupons can be exchanged for free vitamin supplements for children from six months until their fourth birthday, and free vitamin supplements for pregnant women and women with babies up to one year old. The Children's Healthy Start vitamin drops contain vitamins A, C and D and the Healthy Start women's vitamin tablets contain folic acid and vitamins D and C.

Community pharmacies have been supporting the supply of Healthy Start vitamins for eligible women and children in Telford & Wrekin for over 5 years. The service provided by participating community pharmacy is on a voluntary basis with no formal commissioning arrangements. The involvement of pharmacies has provided a greater number of sites and accessibility in local communities, with the support of professional advice where necessary.

9.4.3. Service Provision: Healthy Start Vitamins

For full list of providing pharmacies see Appendix IX.

In 2016/17, 512 vitamin tablets were supplied and 335 vitamin drops were supplied.

In 2017/18, all 37 pharmacies provide free Healthy Start vitamins to eligible customers but only 16 sell them (see Appendix IX for individual pharmacies). These 16 are evenly distributed over the Borough, with four in Lakeside South, seven in The Wrekin and five in Hadley Castle. However, there are none in Newport. There is also no provision for selling vitamins in Ironbridge, though there is adequate public transport to the next closest supplier.

¹⁶ https://www.healthystart.nhs.uk/

9.5. Healthy Living Pharmacy (HLP)

9.5.1. Overview: HLP

The Healthy Living Pharmacy scheme, which is supported by the Department of Health and Public Health England, is well implemented in many areas of the country and was recently adopted in Telford & Wrekin. The aim of the scheme is to recognize those pharmacies who achieve consistent delivery of a broad range of high quality services to meet local need, improving the health and wellbeing of the local population and helping to reduce health inequalities¹⁷. HLP can be used as an organisational development framework underpinned by three enablers of:

- workforce development a skilled team to pro-actively support and promote behaviour change, improving health and wellbeing
- premises that are fit for purpose
- engagement with the local community, other health professionals (especially GPs), social care and public health professionals and Local Authorities.

Community pharmacies wishing to become a Healthy Living Pharmacy are currently able to undertake a self-assessment and self-declaration process as part of a nationwide Level 1 standard.

To become a Level 1 HLP, pharmacies must demonstrate that:

- 1. They are well equipped to embrace the healthy living ethos and proactively promote health and wellbeing messages
- 2. They are actively engaging with the local community, including the public, health and social care professionals, commissioners, other local organisations (eg the voluntary sector)
- 3. They have a health promoting environment that embraces the ethos of a Healthy Living Pharmacy, including the pharmacy premises as well as staff attitudes and actions.

9.5.2. Service Provision: HLP

For full list of registered and providing pharmacies see Appendix X and map T.

Of the 37 pharmacies in Telford & Wrekin, 25 pharmacies are level 1 registered Healthy Living Pharmacies. ¹⁸ This equates to a rate of 1.5 HLPs per 10,000 population across the borough. Lakeside South, which has the highest early mortality rate (age <75 years) due to all causes and highest percentage of population in the most deprived IMD decile, has 1.43 HLPs per 10,000, just below the average for the borough (see table below). However, the number of HLPs is rising in all areas. An additional five pharmacies self-declared as HLP in the pharmacy survey in July 2017 but are not yet on the level 1 register (see Appendix X for

 $^{^{17}\ \}underline{\text{http://psnc.org.uk/services-commissioning/locally-commissioned-services/healthy-living-pharmacies/}$

¹⁸ Royal Society for Public Health. Healthy Living Pharmacies Level 1 Register. Available from https://www.rsph.org.uk/our-services/registration-healthy-living-pharmacies-level1/register.html

individual pharmacies). Two of these five pharmacies are situated in Lakeside South and a further pharmacy is working towards HLP status in this locality, so it is expected that all pharmacies in Lakeside South will have HLP status in the near future.

Locality	Number of Pharmacies	Number of level 1 registered HLPs	Rate of HLPs per 10,000 population ¹⁹	Standardised Mortality Ratio for All-Cause Early Mortality ²⁰	% Population in Most Deprived Decile of IMD 2015
Hadley Castle	13	8	1.10	107.90	2
The Wrekin	15	11	2.00	111.20	9
Lakeside South	9	6	1.43	124.90	35
Total	37	25	1.47	113.00	12

9.6. Recommendations: Other Public Health Services

- ➤ PEARS: The CCG will continue to work with local providers to raise awareness of the PEARS service. All providers are encouraged to participate and make closer links with their optometry colleagues.
- ➤ HLP: All pharmacies who are not currently participating are encouraged to gain level 1 registration so that HLP is consistently offered across the borough.
- Healthy Start Vitamins: All pharmacies will be encouraged to participate in the free supply of healthy start vitamins

10. Access to Pharmaceutical Services

10.1. Overview

Within Telford and Wrekin community pharmacies are conveniently located around local communities and GP practices, ensuring the availability of pharmaceutical services for their local communities. Telford and Wrekin has 37 registered pharmacy providers and one dispensing doctor practice. Using the most recent population estimates (172,976 – Office for National Statistics Mid-Year Estimates 2016) Telford and Wrekin has 21.4 pharmacies per 100,000 people. This is comparable with the Midlands and East average of 21 per 100,000 in 2016/17²¹.

¹⁹ Office for National Statistics, 2015 Mid-Year Estimates.

²⁰ Public health England, taken from local health profiles 2010-14.

²¹ NHS Digital, General Pharmaceutical Services, November 2017. PDF available from https://digital.nhs.uk/catalogue/PUB30135

10.2. Geographical Spread

10.2.1. Pharmaceutical Coverage Within Telford & Wrekin

Map U shows the location of pharmacies and the GP practices and working localities. The geographical spread of pharmacy providers mirrors the spread of GP practices and is focused on local communities and high population density. Population density in specific areas of the Wrekin (around Wellington) and Hadley Castle localities (around Newport) is significantly less and this is reflected in the number of pharmacies located in these specific areas.

Evening and weekend provision is displayed geographically in map V. The opening hours of community pharmacies located close to GP practices reflect the opening hours of those practices, ensuring pharmaceutical services are provided at appropriate times and locations. Providers have shown a great deal of flexibility in their hours of service to accommodate their local practices. A number of providers, located close to GP practices, are also open on Saturday mornings to allow for prescription collection for those people unable to visit the pharmacy during weekdays. The town centre has three community pharmacies which are easily accessible via local public transport. These particular providers deliver essential pharmaceutical services to people who use the town centre facilities, including those who work in the town centre. Their opening hours and the days they are open (including weekends) ensure pharmaceutical service provision reflects local needs throughout the week.

Telford has two large retail parks where three pharmacies are located (Tesco Pharmacy – Wrekin Retail Park / Boots and Sainsbury's Pharmacy – Forge Retail Park). The pharmacies offer extended weekday opening hours as well as weekend opening. They are generally accessible by local travel links and are essential providers of pharmaceutical services over the weekend. Pharmaceutical service coverage over the weekend is less than that during the week.

10.2.2. Pharmaceutical Coverage Outside of Telford & Wrekin's Boundaries

Telford and Wrekin recognises that local residents may obtain pharmaceutical services outside of its borders with Shropshire County and South Staffordshire. Prescribing/dispensing data was used to establish where prescriptions produced in the Telford and Wrekin area were dispensed. The vast majority of prescriptions generated in the Telford and Wrekin area are dispensed within its boundaries. The dispensing analysis highlighted that a number of pharmacies located close to the boundaries were being used by local residents. There were also a number of pharmacies that were offering dispensing services to care homes located within the borough.

There is a very limited need for dispensing provision outside of the current Telford and Wrekin boundaries for patients located close to boundary lines. The analysis showed a number of patients registered at practices not located close to boundary lines, who were using pharmacies outside of the boundaries. It can be concluded that this was a personal choice by specific patients as dispensing provision at these locations is considered adequate. Cross border provision from neighbouring HWBs will need to be assessed following publication of PNAs from these areas, however current analysis suggests this is being adequately met.

10.3. Opening Hours

Appendix VIII shows the current opening hours of pharmaceutical providers in Telford and Wrekin.

Core hours have been highlighted in yellow with additional hours highlighted in blue (this will include all supplementary hours). The shaded areas represent the total opening hours for each pharmacy. Each shaded block represents half an hour.

For example: Boots in Newport, opening hours on a Monday are 9:00am to 4:30pm with an hours break from 1:00pm to 1:30pm except during extended hours 9am – 6pm:

MONDAY																						
Pharmacy Name	8:30	9:00	9:30	10:00	10:30	11:00	11:30	12:00	12:30	13:00	13:30	14:00	14:30	15:00	15:30	16:00	16:30	17:00	17:30	18:00	18:30	19:00
Boots, Newport																						

All community pharmacies must provide pharmaceutical services for their contracted hours (minimum 40 core contractual hours or 100 for those that have opened under that exemption), which cannot be amended without the consent of NHS England, Shropshire and Staffordshire DCO Team. Many community pharmacies provide supplementary opening hours - these can be amended by the pharmacy with 90 days notice.

Opening hours for every pharmacy provider can also be found on the NHS Choices website www.nhs.uk Details for each pharmacy are outlined in Appendix VII.

10.3.1. Weekday Pharmaceutical Service Provision

Hadley Castle

Pharmaceutical services are available from 7.00am till 11.00pm

The Wrekin

Pharmaceutical services are available from 7.00am till 11.00pm (8.00am till 11.00pm on Monday)

Lakeside South

Pharmaceutical services are available from 9.00am till 6.00pm (extended until 8pm with supplementary hours)

10.3.2. Saturday Pharmaceutical Service Provision

For individual pharmacies see Appendix VIII and map V

➤ 31 pharmacies are open on a Saturday,14 of which are open for half a day. 17 pharmacies are open throughout the day with five pharmacies open late: Asda (Donnington) open from 7am till 9pm, Asda (Telford Town Centre) open from 7am till 10pm, Donnington Pharmacy open from 7am till 10pm, Wellington pharmacy (Chapel Lane) open from 8am till 10pm and High Street Newport Pharmacy open from 7:30am till 10:30pm.

All areas have pharmacy services, with the Hadley Castle and Wrekin localities having provision for extended hours. Lakeside South has service provision until 5pm.

10.3.3. Sunday Pharmaceutical Service Provision

For individual pharmacies see Appendix VIII and map V

- ➤ 11 pharmacies are open on a Sunday (three pharmacies located Hadley Castle, seven in The Wrekin and one in Lakeside South 5-7pm).
- Pharmaceutical service provision is available from 9am till 8pm
- Extended hours provision is available in Hadley Castle and The Wrekin localities.

10.3.4. Bank Holiday Provision

A number of pharmacies also now open on Bank Holidays. NHS England also work with community pharmacies to ensure there are adequate pharmaceutical services available on Christmas Day and Easter Sunday as the two days where pharmacies are still traditionally closed.

10.3.5. Extended Hours Provision

For individual pharmacies see Appendix VIII and map V.

Telford and Wrekin has five '100' hour community pharmacies:

- > Asda Pharmacy Donnington
- Asda Pharmacy in Malinsgate
- > Donnington pharmacy, Donnington
- > High Street pharmacy, Newport
- Wellington pharmacy, Chapel Lane, Wellington.

The DCO Team (Staffordshire & Shropshire DCO Team) closely monitors these contractual hours to ensure service continuity is being met. The central location and hours of service provide essential pharmaceutical cover for the local population. The '100' hour provision has been especially useful during evenings, bank holiday periods and during weekends. The long hours provide essential dispensing cover during times when other pharmacies are closed.

10.3.6. Dispensing Doctor Opening Hours

Wellington Road Surgery (Newport) dispensing practice provides a dispensing service to eligible patients registered at the practice. Opening hours reflect those of the practice opening hours. No weekend dispensing provision is available for eligible patients.

11. Assessment of Current Pharmaceutical Service Provision

Based on the above analyses, it is considered that pharmaceutical services in Telford and Wrekin are adequate for the local population. The reasons for this are as follows:

- Current geographical location of pharmacies is broadly centered on population density within each locality.
- ➤ There is sufficient choice for patients wanting to access dispensing services close to their GP practice or those that wish to travel into the town centre.
- Opening hours of pharmacies located close to GP practices reflect those of the GP practice. Additional opening during a Saturday ensures easy access to pharmacy services.
- Pharmacies located in the town centre and retail parks are easily accessible and offer long opening hours throughout the week and during weekends, providing significant service coverage. Parking in the town centre is charged according to length of stay, however parking at the retail parks is free of charge.
- ➤ Telford and Wrekin has five '100' hour pharmacy contracts offering substantial weekend and evening opening hours. These extended hours have also supported provision during Bank Holidays.
- Most pharmacies operate a collection and delivery service ensuring provision of medication to those unable to access a pharmacy (some pharmacies do have restrictions on who they will deliver to for example housebound, disabled).
- ➤ Electronic Prescription Services (EPS) now available in all GP practices other than Wellington Road Surgery (Newport). The transmission of prescriptions electronically to a dispensing provider allows patients an increased choice of dispensing site.
- ➤ Telford and Wrekin CCG have now established a prescription ordering department enabling patients to order their repeat prescription requests through a dedicated telephone request service. Once authorised prescription requests are sent electronically to the patients nominated pharmacy.
- 'Shropdoc' (GP out of hours provider) holds stocks of emergency drugs that can be issued to patients when pharmaceutical services are unavailable, or if there should be significant difficulty in obtaining medication that was required without delay.
- Following a review of dispensing services in the south of Telford there was an increase in provision in 2016 of opening hours at Anstice Pharmacy, which remains in place.

It should be noted that:

- > Service coverage during weekends is less than that provided during weekdays. This reflects the reduced demand for dispensing provision over the weekend period.
- There are a number of pharmacies providing services outside of the boundary of Telford and Wrekin, which Telford and Wrekin residents may easily find as accessible.

For example, residents located in the north of Telford may choose to use pharmacies located in Shropshire County. Telford and Wrekin will review the PNAs from bordering localities to ensure service provision is maintained in these areas.

11.1. Recommendations: Coverage of pharmaceutical services

- ➤ Telford and Wrekin has reviewed its coverage of dispensing services. The PNA has highlighted that there is currently sufficient coverage within existing community pharmacies and GP dispensing practice (Newport). The current geographical location and opening hours of dispensing services provides adequate choice and accessibility for the majority of the public.
- A review of this recommendation will be considered to take into account any changes to primary care and community health services provision and to reflect housing expansion and potential population growth in the Borough. Key elements the review process will need to take into account include: The development of the Sustainability and Transformation Plans, Future Fit programme and the associated implications for community pharmacy provision, changes to housing development and also technical modelling work to quantify the impact of demographic change and community pharmacy needs and demands.

11.2. Aspirational Services

Community pharmacies do and are ideally placed to support patient self-care, diagnosis of minor ailments and monitoring and review of long-term conditions. Pharmacist's clinical training enables them to use their skills to reduce the burden on general practice and out of hours' services, improving accessibility for patients.

There are a number of additional services that pharmacies are already providing and are willing to offer if commissioned (see summary table below and Appendix X for individual pharmacy responses). Although three or less pharmacies currently provide disease-specific medicines management services for diabetes (type 1 and 2), heart failure and hypertension, around ¾ are willing to if commissioned (see table). Similarly, including those currently providing and those who are willing to if commissioned, over ¾ pharmacies could provide a screening service for alcohol, chlamydia, gonorrhoea, cholesterol and diabetes. 26 pharmacies would be willing to provide an independent prescribing service, though none offer one currently.

Summary table of services currently provided / willing to provide if commissioned, PharmOutcomes survey July 2017 (for individual pharmacy responses see Appendix X):

	· · · · · · · · · · · · · · · · · · ·	· ·		,
Service	Currently Provide	Willing if commissioned	Need training	Need facility adjustment
Disease-Specific				
Medicines				
Management:				
Allergies	0	29	23	1
Alzheimer's /	1	29	25	1
dementia	'			'
Asthma	1	30	21	3
Coronary Heart	1	28	24	1
Disease				
Depression	0	28	23	1
Diabetes type 1	3 (1 also privately)	26	23	1
Diabetes type 2	2 (1 also privately)	26	22	1
Epilepsy	0	29	24	1
Heart Failure	1	28	24	1
Hypertension	2 (+1 only privately)	29	25	3
Parkinson's Disease	0	29	23	1
Screening				
Services:				
Alcohol	0	29	21	5
Chlamydia	9	21	15	4
Cholesterol	1 (+3 only privately)	27	20	4
Diabetes	3 (+2 only privately)	25	16	3
Gonorrhoea	1	28	21	4
H.pylori	0	26	19	3

HBA1C	0	25	18	3
Hepatitis	0	25	16	4
HIV	0	24	16	4
Vaccinations:				
Childhood vaccinations	(1 only privately)	24	17	1
HPV	(1 only privately)	23	16	1
Нер В	1 (+1 only privately)	22	15	1
Travel vaccinations	2 (+2 only privately)	21	15	1
Other Services:				
Sharps Disposal Service	5	22	13	4
NRT voucher	10	20	16	2
Smoking Cessation Counselling	9 (+1 only privately)	18	12	2
Supplementary Prescribing	0	28	23	3
Vascular Risk Assessment	0	26	21	2

The questionnaire also highlighted the diverse languages spoken by people attending pharmacies in Telford & Wrekin. 16 pharmacies serve communities who speak a language other than English and Polish is the most common language spoken by patients but not pharmacy staff (8 pharmacies). This may represent a group of patients who have additional difficulty accessing pharmacy services.

12. Public Engagement: Community Pharmacy Survey

12.1. Survey Methodology

A survey of public views on community pharmacy in Telford & Wrekin was undertaken between 1st September 2017 and 30th September 2017. The survey consisted of 12 questions covering themes such as awareness of and access to services and levels of satisfaction. Standard socio-demographic questions were included.

The survey was publicised through the NHS Telford and Wrekin CCG website and also to all Telford & Wrekin Council staff through the intranet. Paper copies of the survey were distributed to community pharmacies for completion. A number of groups were contacted and given printed copies of the survey, including: Health Champions, TACT and partners, Family Nurse Partnership, Telford & Wrekin Mental Health Forum, Senior Citizens Forum, Age UK, Telford Crisis Network, Adult Social Care Commissioning Team, Telford Crisis Network, SaTH Volunteers, Citizens Advice Bureaux. The survey was also distributed via Healthy Lifestyles Team clinics, Newport Social Prescribing Clinic and Community Participation Team community

contacts. The CCG also distributed the survey to 30 different community groups including Walking for Health, Take 5 Café, Taste not Waste, Telford Mind, Telford Twin & More, Turnpike Court Resident Living and Wednesday Art Group.

There were a total of 282 survey responses, which represents 0.2% of the total borough population. This was a decrease from the previous PNA survey where there were 417 responses at the end of the consultation but respondents broadly represented the most frequent users of pharmacy services. For full analysis of the 2017 survey see Appendix XIII.

12.2. Key Headlines

(Due to the relatively small number of respondents (282) any results must be interpreted with caution.)

- ➤ There was over representation from women in the survey and therefore men were under represented. Teenagers, young adults under 34 years and people in minority ethnic groups were under represented. Middle-aged people (aged 45-64 years), people with long-term conditions and people who care for another person with physical or mental conditions were over represented (though this is likely to represent the most frequent users of pharmacies).
- Of 236 who specified the pharmacy they "usually" visit, 16.1% identified Lawley Pharmacy. This was significantly higher than any other pharmacy and hence results may be biased towards this pharmacy.
- ➤ Almost all respondents (98.9% of 273 respondents) were able to find a pharmacy that fulfilled their preferences of where they would like to access a pharmacy. Almost all (95.3%) were less than 20 minutes away from their pharmacy.
- Fewer respondents agreed with the statement "I ask my pharmacist for health advice" (66.4%), suggesting either that this is not a major reason for accessing pharmacies either because they are unaware of this service (though the majority were aware they could seek advice on minor ailments, long-term conditions and lifestyle factors such as smoking cessation) or they prefer to seek advice elsewhere.
- ➤ The proportion of respondents visiting a pharmacy to buy over the counter medicines has increased from 10.9% in the previous PNA user survey to 68.5% making it the second most common reason to visit a pharmacy. Similarly, the proportion who visit pharmacies to obtain advice about their medication increased from 3.65% in the last PNA user survey to 28.3%.
- Fewer than five respondents used pharmacies for stop smoking advice and impetigo treatment suggesting that these services are either not publicised well or not available in many pharmacies
- ▶ 66% used the prescription collection service (prescription sent directly to pharmacy) suggesting that this is a commonly used service
- ➤ The three treatment services (for urinary tract infection, chlamydia and impetigo) were the services users were least aware about, perhaps as these are newer additions to services and only available in certain pharmacies.

13. Appendices

Appendix I	Telford & Wrekin PNA Steering Group Terms of Reference
Appendix II	Health & Wellbeing Board Briefing Report (Dec 2017)
Appendix III	Consultation Responses
Appendix IV	Equalities Impact Assessment
Appendix V	Health & Wellbeing PNA Cover Report (March 2018)
Appendix VI	Recommendations from Community Pharmacy Clinical Services Review (Murray Report)
Appendix VII	Community Pharmacy Provider List
Appendix VIII	Community Pharmacy Opening Hours
Appendix IX	Community Pharmacy Currently Commissioned Services
Appendix X	Pharmacy Survey Responses (from PharmOutcomes)
Appendix XI	Sexual Health Services opening times
Appendix XII	Maps
Appendix XIII	Community Pharmacy Survey Report
Appendix XIV	Comments Received During the 60 Day Consultation Period

13.1. Appendix I - Telford & Wrekin PNA Steering Group Terms of Reference

Membership

Name	Role/Title	Organisation
Core Members		
Helen Onions	Consultant in Public Health (chair)	Telford & Wrekin Council
Hitesh Patel	Pharmaceutical Adviser	NHS Telford & Wrekin CCG
Lynne Deavin	LPC Business Development Officer	Shropshire Local Pharmaceutical Committee
Clare Brehmer	Specialty Registrar in Public Health	Telford & Wrekin Council
Aislinn Bergin	Research and Information Manager	Healthwatch Telford & Wrekin
Mani Hussain	Chair – Pharmacy Local Professional Network	NHS England (North Mids)
Helen Homer	Senior Research & Intelligence Officer	Telford & Wrekin Council
Stacey Norwood	Public Health Commissioner	Telford & Wrekin Council
Amanda Alamanos	Primary Care Lead	NHS England (North Mids)
Andy Pickard	Pharmacy Advisor	NHS England (North Mids)
Damion Clayton	Senior Research & Intelligence Officer	Telford & Wrekin Council
Ruth Bolderston	Assistant Contracts Manager	NHS England (North Mids)
Non-core members		
Anna Hammond	CCG Primary Care Commissioning Lead	NHS Telford & Wrekin
Dr A Egleston	Dispensing Doctors Representative	GP Wellington Road, Newport
Gavin Ashford	Principal Planning Officer	Telford & Wrekin Council

Tom Cox	Communications Officer	Telford & Wrekin Council
Jacqui Seaton	Head of Medicines Management	NHS Telford & Wrekin CCG

Reporting and Governance Arrangements

PNA progress updates will be reported, as required, to the following:

- Helen Onions / Hitesh Patel will report to the Health & Wellbeing Board & Strategic Commissioning Group
- Hitesh Patel will report to the CCG Governance Board
- Amanda Alamanos / Ruth Bolderston will report to NHS England (North Midlands)
- Aislinn Bergin will report to Healthwatch representatives
- Helen Onions and Lynne Deavin will to report to the STP Neighbourhood Working Group
- Manir Hussain & Lynne Deavin will report to the Local Pharmaceutical Network
- Lynne Deavin & Hitesh Patel will report to the Local Pharmaceutical Committee

Purpose and Aims of the PNA Steering Group (Hitesh to check guidance)

- Coordinate update of the Pharmaceutical Needs Assessment (PNA) in line with current legislation
- Oversee the overall process for updating the PNA within the required timescale
- To agree the statement of the needs for pharmaceutical services in Telford and Wrekin
- ➤ To agree and oversee the process for assessing the current provision of pharmaceutical services by pharmacies, appliance providers and dispensing practices within Telford and Wrekin (and neighbouring areas where appropriate)
- > To ensure that accurate maps identifying the premises where services are provided are produced
- ➤ To agree and oversee the process required for the statutory consultation with all relevant parties as laid out in the regulations
- To develop a framework for subsequent assessments and supplementary statements
- To take into account any further legislation that may impact on the PNA.

Frequency of Meetings / Communications

➤ The group will meet as deemed necessary (2 monthly). Wherever possible email will be used to communicate ongoing PNA development

- Through the development phases the Public health lead and Medicines Management lead will coordinate the PNA development.
- Specific meetings around public consultation and formal consultation will be led by the communications team (LA and CCG)
- Other stakeholders will attend meetings only as necessary
- > A formal meeting / communication will be arranged to agree a final draft PNA prior to consultation
- ➤ Hitesh Patel will coordinate communication with Wellington Road Medical Practice, Newport during the PNA development
- Public engagement and consultation will be coordinated with support from Healthwatch Telford & Wrekin and local CCG patient group representatives.

Declarations of Interest

➤ Hitesh Patel's brother, Yogesh Patel, is the owner of Lawley Pharmacy (04.07.17)

13.2. Appendix II –Health and Wellbeing Board Briefing Report

TELFORD & WREKIN COUNCIL HEALTH & WELLBEING BOARD

TITLE: PHARMACEUTICAL NEEDS ASSESSMENT REFRESH BRIEFING

REPORT OF: HELEN ONIONS, CONSULTANT IN PUBLIC HEALTH, TELFORD & WREKIN COUNCIL, HITESH PATEL, PHARMACEUTICAL ADVISER, NHS TELFORD AND WREKIN CCG

DATE: 6th December 2017

LEAD CABINET MEMBER – Arnold England

PART A) - SUMMARY REPORT

1. SUMMARY OF MAIN PROPOSALS

Health & Wellbeing Boards assumed a legal duty for publishing and keeping up-to-date local pharmacy needs assessments in April 2013. This briefing updates the HWB on the 2017/18 refresh process taking place for the Telford & Wrekin PNA. The current PNA was published in April 2015 and further additions were made in 2016 following the subsequent in-depth review of pharmacy dispensing provision in South Telford requested by the HWB.

During 2017 colleagues from the Council's public health team, CCG, the Local Pharmaceutical Committee and NHS England have been coordinating the refresh PNA process. Key elements included are:

- Mapping of local pharmacy services, such as dispensing medicine, health advice and medicines reviews and local public health services
- Summary of demographic factors and health and wellbeing needs
- Public survey on views of local community pharmacy services
- > Equalities impact assessment
- Assessment of gaps in provision and recommendations regarding future provision and service developments

The draft PNA will be open for consultation between mid-December 2017 and mid-February 2018, meeting the 60 day consultation requirement. The proposed PNA and all consultation responses will be presented to the HWB in March 2018. Any changes and modifications will then be made to allow publication in April 2018.

2. RECOMMENDATIONS (AND TO WHOM ACTIONS APPLY e.g. CCG, Council)

The HWB is asked to note the PNA process and time scale and agree to review the PNA proposals and consultation responses in detail in March 2018.

3. IMPACT OF ACTION - (How it is intended that action will make a difference)

The PNA, which is part of the wider Joint Strategy Needs Assessment process, is used:

- to make decisions on which services, including public health services, need to be provided by local community pharmacies
- by NHS England when deciding if new pharmacies are needed, in response to applications by businesses, including independent owners and large pharmacy companies

4. SUMMARY IMPACT ASSESSMENT

COMMUNITY IMPACT	Do these	proposals contribute to a specific HWB Priority
	Yes The PNA process contributes to all three cross cutting priorities:	
		Encourage healthier lifestyles
		Improve mental wellbeing and mental health
		Strengthen our communities and community- based support
		proposals contribute to specific Co-Operative priority objective(s)?
	Yes	Improving the health and wellbeing of our communities and addressing health inequalities
		roposals impact on specific groups of people?
	Yes Community pharmacies play a key role in providing primary care services within our local communities.	
TARGET COMPLETION/DELIVERY DATE	The refre	shed PNA will be published in April 2018.
FINANCIAL/VALUE FOR MONEY IMPACT	No	There are no financial implications arising from this report. Any financial implications arising post consultation will be considered as part of a future report.
		(ER – 20/11/17)
LEGAL ISSUES	Yes/No	From 1st April 2013, Health and Wellbeing Boards (HWB) in England assumed the responsibility ²² to publish and keep up-to-date a statement of the needs for pharmaceutical services of the

²² Section 128A of NHS Act 2006, as amended by Health Act 2009 and Health and Social Care Act 2012

		population in its area, through Pharmaceutical Needs Assessment (PNA).
		These requirements are set out in the The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 sets out requirements.
EQUALITY & DIVERSITY	Yes	There is evidence that community pharmacy has a key role to play in reducing health inequalities as often pharmacies are the first point of call for those requiring support who may not have engaged with other health services.
IMPACT ON SPECIFIC WARDS	No	
PATIENTS & PUBLIC ENGAGEMENT	Yes	Consultation and engagement is a specific requirement of the PNA process. As part of this a survey of community views was undertaken during September 2017.
OTHER IMPACTS, RISKS & OPPORTUNITIES	Yes	The PNA is part of the wider Joint Strategic Needs Assessment process. The PNA contributes understanding of local pharmacy services needs and provision which could inform the STP and Future Fit programmes in terms of the transformation of health and social care services.

PART B) - ADDITIONAL INFORMATION

1. INFORMATION

Further information will be made available the PNA consultation web link during the consultation period.

2. <u>IMPACT ASSESSMENT – ADDITIONAL INFORMATION</u>

An equalities impact assessment process is current being undertaken and will be published as part of the PNA.

3. PREVIOUS MINUTES

Health and Wellbeing Board 16th September 2016 Health and Wellbeing Board 9th December 2015 Health and Wellbeing Board 11th March 2015 Health and Wellbeing Board 24th September 2014, Minute Number – HWB-12

4. BACKGROUND PAPERS

Report prepared by Helen Onions, Consultant in Public Health, helen.onions@telford.gov.uk

13.3.	Appendix III -Consultation Responses

13.4. Appendix IV -Equalities Impact Assessment

13.4.1. Overview

- Community pharmacies are a valuable and trusted public health service. The scale of daily contacts with the public means there is real potential to use community pharmacy teams more effectively to improve health and wellbeing and to reduce health inequalities.
- From 1st April 2013, Health and Wellbeing Boards (HWB) in England assumed the responsibility to publish and keep up-to-date a statement of the needs for pharmaceutical services of the population in its area, through Pharmaceutical Needs Assessment (PNA).
- PNAs have been used historically by the NHS to make decisions on which NHS-funded services need to be provided by local community pharmacies. Now following transition of public health services to local authorities, PNAs should also be used to assess the contribution of community pharmacies to local public health programmes.
- In addition, PNAs will be used by NHS England when deciding if new pharmacies are needed, in response to applications by businesses, including independent owners and large pharmacy companies. Applications are keenly contested by applicants and existing NHS contractors and can be open to legal challenge if not handled properly.
- The previous PNA identified EHC provision for under 25s as having a possible negative impact on older women. Provision of EHC to over 25s was considered, however this was deemed not to be financially justifiable given recent changes in NICE guidance. EHC for this age group continues to be provided free of charge through general practice and sexual health services and is available to purchase over the counter.
- The previous PNA also identified language provision as a possible gap. Language line (a phone translation service) was considered but deemed not to be financially justifiable as there is no additional funding for this. Pharmacists were asked to be mindful of their community's needs and to relay information in a clear and understandable way, writing down key messages for the patient and where possible offering leaflets in different languages. Alternative pharmacy resources were also signposted including pharmacy label translation services and emergency multilingual phrasebooks.
- Healthy Living Pharmacies are a new initiative aimed at promoting public health messages through pharmacies. The majority of pharmacies in Telford & Wrekin have registered as level 1 Healthy Living Pharmacies, in which they have to meet quality criteria defined by Public Health England. One of these is the provision of a Health Promotion Zone where education materials and campaign material is displayed and this must appeal "to a wide range of the public including men and women, young people, smokers, people with long term conditions, learning difficulties and older people. Where the community includes a significant ethnic minority group, then their needs must be accommodated."

The PNA affects all residents of Telford and Wrekin, in particular it affects;

- Customers/service-users the general public
- Partners Health & Wellbeing Board partners: the Council, NHS Telford & Wrekin,
 NHS England Shropshire and Staffordshire Area Team, Health Watch Telford & Wrekin

Employees – providers of community pharmacy services and their staff

The PNA is covers the years 2018/19 – 2020/21. After this period the analysis will be reviewed and a new analysis completed.

Name of person completing impact assessment and their post	Dr Clare Brehmer, Specialist Registrar in Public Health Helen Onions, Consultant in Public Health, Richard Taylor-Murison, Consultation and Equality Officer
Contact details	Clare.brehmer@telford.gov.uk Helen.onions@telford.gov.uk Richard.taylor-murison@telford.gov.uk
Date started	January 2018
Other officers/Stakeholders involved	See below for Telford and Wrekin Pharmaceutical Needs Assessment Steering Group membership

Name	Role/Title	Organisation
Helen Onions	Consultant in Public Health (chair)	Telford & Wrekin Council
Dr Clare Brehmer	Specialist Registrar in Public Health	Telford & Wrekin Council
Hitesh Patel	Pharmaceutical Adviser	NHS Telford & Wrekin CCG
Lynne Deavin	LPC Business Development	Shropshire Local
	Officer	Pharmaceutical Committee
Stacey Norwood	Public Health Commissioner	Telford & Wrekin Council
Jennifer Davies	Public Health Practitioner	Telford & Wrekin Council
Helen Homer	Senior Research & Intelligence Officer	Telford & Wrekin Council
Andy Pickard	Pharmacy Advisor	NHS England North Midlands
Amanda Alamanos	Primary Care Lead	NHS England North Midlands
Aislinn Bergin	Patient Engagement Lead	Healthwatch Telford & Wrekin

13.4.2. Impact Assessment

The positive and negative impact of the elements of the PNA have been consider in relation to protected characteristics relative to the General Equality Duty;

- eliminate unlawful discrimination, harassment and victimisation
- advance equality of opportunity
- foster good relations between different groups

People of different ages
People with ill health or people with a disability
People of different gender
People who are transgender
Different racial groups
People with different religion or beliefs
People of different sexual orientation
Women who are pregnant or breast-feeding

People that are married or in a civil partnership

People affected by deprivation

Impact (X)				
Positive	Negative	None		
X	X			
Х				
		Х		
		Х		
	Х			
		X		
		Х		
X				
		Х		
X				

It has been assessed that there are no positive or negative impacts of the PNA process or recommendations which have emerged for the following: gender, transgender, religion or beliefs, sexual orientation, marriage or civil partnership.

The identification of impacts relates to the introduction or change of services incorporated in the PNA.

This decision has been made on the basis that the PNA is a fully inclusive process and as part of the wider Joint Strategic Needs Assessment, adopts the principles of the Health and Wellbeing Strategy vision "To improve the health & wellbeing of our communities and address health inequalities". As such the community pharmacy services commissioned by Health & Wellbeing partner organisations are expected to be delivered irrespective of the protected characteristics of service users and taking account of the individual needs of people.

Expected impacts

People of different ages

The public survey on views on community pharmacy was a key component of the PNA process. People aged 45-64 years accounted for 39.9% of all survey respondents therefore this middle aged group were over represented in the survey given that the proportion of this age group in the general population is circa 26%. However, this age group are key users of community pharmacy services along with people aged 65 years and over. (*Positive impact*)

Younger people under 25 years were under represented in the public views survey.

Teenage pregnancy is a health issue which has been prioritised by the Telford & Wrekin Health and Wellbeing Board. At present Emergency Hormonal Contraception is on offer free of charge to women under age 25 years, promoting equal opportunities of access to this emergency medicine for younger women (positive impact). Telford Town Centre pharmacies delivered a third of all EHC activity in 2016/17 which indicates that this service is easily accessible for young people and provides anonymity. (Positive impact)

However, there are concerns that the cut off at age 25 for this service produces a negative impact for women above 25 years (*Negative impact*)

Chlamydia testing is offered to young people under 25 in community pharmacies, in line with the National Chlamydia Screening Programme requirements. (Positive impact)

A map identifying the distribution of pharmacies across areas with high proportions of older people has been produced (see map 1).

People with ill health or people with a disability

54.3% of the PNA public survey respondents reported suffering from a long standing limiting illness, disability or infirmity, compared to 18.2% of people in the general population as a whole. Therefore people with a long standing illness or disability were over represented in the survey.

All community pharmacies have a responsibility to meet Equality Act 2010 requirements and pharmacies are actively expected to ensure patients/public are able to access their services. Contractors work to resolve any associated issues where these arise. Specific examples of this would include prescription collection and delivery services, medication adherence support services (positive impact)

A map identifying the distribution of pharmacies across areas with high proportions of people reporting long term limiting illness has been produced (see map 2).

Women who are pregnant or breast-feeding

The Health Start Vitamins programme has operated in community pharmacies throughout Telford & Wrekin for a number of years. Under the national scheme the programme offers vitamins for pregnant women and their infants. This scheme has a positive impact on the health pregnant (positive impact)

People affected by deprivation

There are clear inequalities in health in Telford & Wrekin related to reduced life expectancy and socio-economic deprivation in our communities. As such improving life expectancy and reducing the associated health inequalities are included within the Health & Wellbeing Board's priorities. There are also inequalities in health identified within the other priorities, including the following which are relevant to community pharmacy service provision: smoking, teenage pregnancy and sexual health and substance misuse. There are clear recommendations in the PNA made to continue the provision of Chlamydia testing and treatment, Emergency Hormonal Contraception, supervised consumption for opiate addiction, needle exchange and smoking cessation services across the Borough. (Positive impact)

13.4.3. Consultation

The national guidance for PNAs is explicit regarding the statutory consultees which must be considered as part of the 60 day consultation process. These consultees include the following:

- any Local Pharmaceutical Committee for its area (including any Local Pharmaceutical Committee for part of its area or for its area and that of all or part of the area of one or more other HWBs) – Shropshire and Telford Local Pharmaceutical Committee
- any Local Medical Committee for its area (including any Local Medical Committee for part of its area or for its area and that of all or part of the area of one or more other HWBs) Shropshire Local Medical Committee
- any persons on the pharmaceutical lists and any dispensing doctors list for its area all community pharmacies and the one dispensing GP practice in Telford & Wrekin
- any LPS chemist in its area with whom the NHS England has made arrangements for the provision of any local pharmaceutical services;
- any Local Healthwatch organisation for its area, and any other patient, consumer or community group in its area which in the opinion of HWB has an interest in the provision of pharmaceutical services in its area – Health Watch Telford & Wrekin
- any NHS trust or NHS foundation trust in its area Shrewsbury & Telford Hospitals
 NHS Trust, Shropshire Community Health Service Trust, Shropshire &
 Staffordshire Mental Health Services Foundation Trust
- NHS England Shropshire and Staffordshire Area Team
- Any neighbouring Health and Wellbeing Board Shropshire Health & Wellbeing Board

The 60 day consultation period for these statutory consultees ran from Wednesday 3rd January 2018 until Sunday 4th March 2018. The draft PNA was published for consultation on the NHS Telford & Wrekin website. The consultees were all contacted regarding the publication and the launch was well publicised. Although there is not an expectation that PNAs are subject to public consultation the consultation was publically available and comments invited from all those who wished to contribute.

Engagement

The PNA process included a survey of public views on community pharmacy which was undertaken between 1st September and 30th September 2017. The survey consisted of 12 questions covering themes such as awareness of and access to services and levels of satisfaction. Standard socio-demographic questions were also included. There survey was publicised on the NHS Telford & Wrekin website and to Council staff through the intranet. A number of visits to community support groups were undertaken to obtain survey responses. There were 282 respondents in the survey (See Pharmacy User Survey Report for further details)

A professional stakeholder survey was carried out as part of the PNA with all community pharmacies. The survey asked contractors to consider the needs of their local population and which additional services they were willing to provide if commissioned.

Ongoing engagement

As part of our ongoing commitment to promote the use of our community pharmacies we will be actively seeking the views of our contractors about what they feel is required in their local communities.

We will continue to engage with our local Healthwatch colleagues to ensure we are continuously addressing local health needs.

13.4.4. Mitigating Actions

Emergency Hormonal Contraception – lack of access to free contraception for women aged over 25 years. The commissioner of sexual health services has considered expanding the service to women aged over 25 years old. Currently, there is insufficient justification to implement such a change. However, the need for EHC provision for those over 25 will continue to be monitored to inform the future commissioning of services.

Supporting people with language barriers – This was noted in the previous PNA and in the 2017 Pharmacy survey, several pharmacists stated languages (particularly Polish) that were spoken in the community but not by a pharmacist. This was not brought up as a specific problem by pharmacists or community members, however this will continue to be assessed. Pharmacies are encouraged to write down information, offer leaflets in different languages, use label translation services and the emergency multilingual phrasebooks where required. Using local community based support groups may also be considered. A number of our pharmacies are well positioned in local communities encouraging them to make links with community groups will raise the profile of pharmacy and potentially help to resolve communication difficulties.

It should be noted that the Community Language Information Standard is in development and will encourage a more consistent approach across the health economy.

A map identifying the distribution of pharmacies across areas of the borough with high proportions of community members who have limited ability to comprehend or speak English has been produced (see map 3).

Conclusion

In summary, the expansion of services provided by pharmacies more widely across the Borough will improve access to services for those who have traditionally the least opportunity to access preventative services. The changing nature and increased reliance on prevention information, advice and guidance provided by pharmacies will offer a more comprehensive

response to the local needs identified in the PNA. This approach which is designed to reduce inequalities will advance the equality of opportunity for people living in Telford & Wrekin.

The PNA sets out recommendations to further develop the relationship with community pharmacy, the commissioners of these services in the Council and the NHS and more widely across the health economy. This helps develop good relations between different communities and across Health & Wellbeing Board partners.

13.4.5. Review and Monitoring

The PNA is due to be considered by the Health & Wellbeing Board on 8th March 2018 and will be published by 1st April 2018 in line with the statutory duties of the Board.

Actions

Health Equity Audits (HEAs) will be undertaken for public health services provided in community pharmacies to assess the provision, uptake and outcome of public health services in relation to age, gender, ethnicity and socio-economic deprivation.

Actions:

Agree set of HEAs to be undertaken from September 2018.

First review of HEA cycle to be completed by September 2019.

Emergency Hormonal Contraception

Action:

Continue to monitor the demand/need for EHC prescribing in women aged over 25 (June 2019)

Use of enhanced PNA Mapping to support evidence based decision making related to PNA objectives

Action:

Proactively use granular maps indicating levels of older people, people reporting long term limiting illness and non/limited English speaking communities alongside community pharmacy provision into the PNA review process to support future informed commissioning decisions.

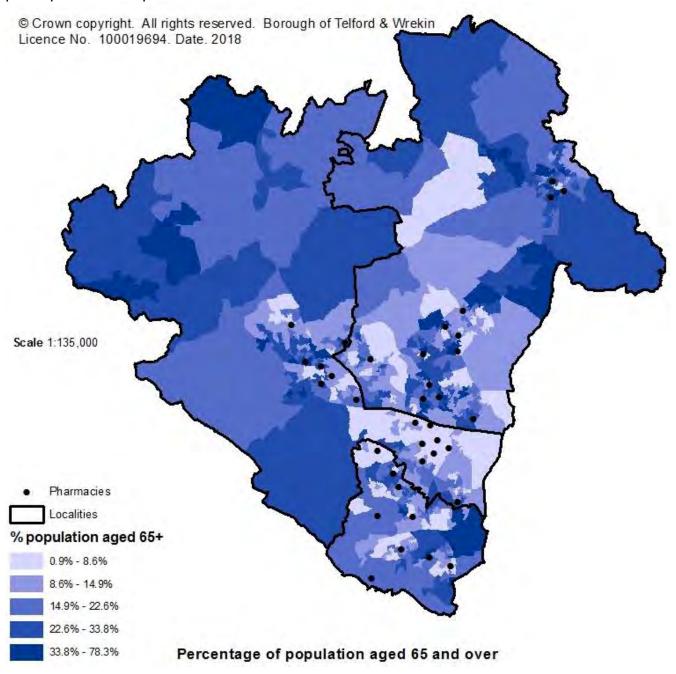
Supporting people with language barriers

Action:

Ensure that the campaign and awareness raising programme recommended to publicise community pharmacy services uses resources and materials in different languages and that local community based support groups are used, where relevant to develop local publicity materials.

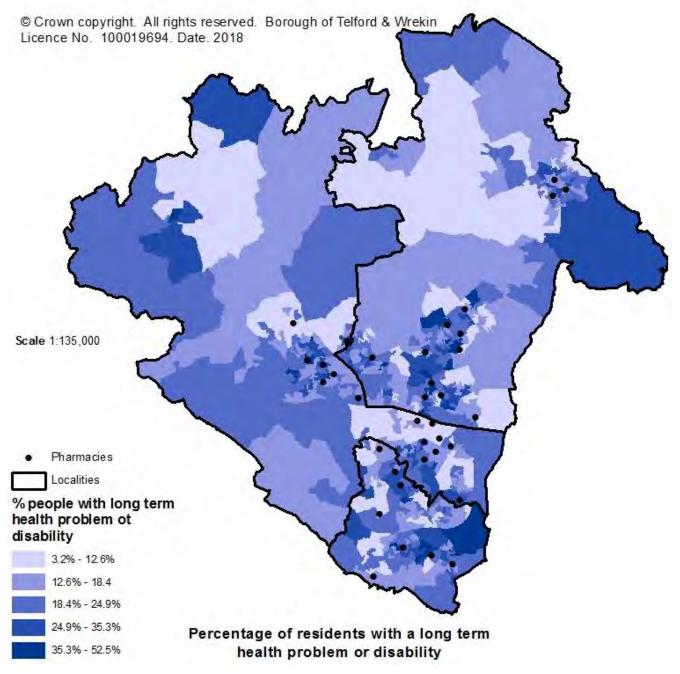
13.4.6. Map 1: Percentage of population aged 65 and over

Oakengates, Newport and Wellington are areas with high percentage of the population aged over 65. Pharmacies in these areas should be mindful of their community's additional needs eg. Hard of hearing, large print leaflets and multiple comorbidities and medications. However this map may also be used when considering future service provision for specific services utilisied mainly by the elderly eg. Medication use reviews, new medicines service, automated pill dispensers and palliative care boxes.



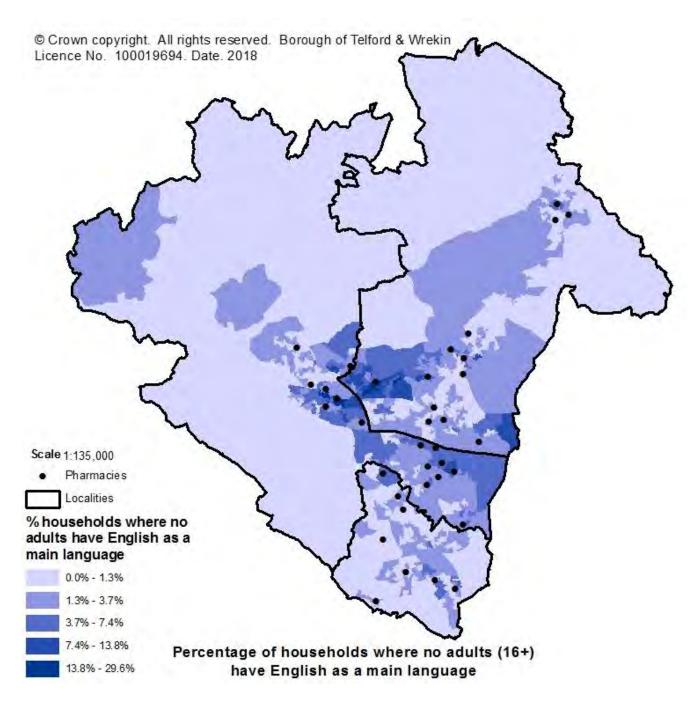
13.4.7. Map 2: Percentage of residents with long term health problem or disability

This map shows that residents with long term health problems or disability are fairly evenly distributed across the borough and therefore community pharmacies should consider the additional needs of these customers eg. Mobility issues requiring access to pharmacy via a ramp (if using wheelchair) or need for home delivery of prescriptions.



13.4.8. Map 3: Percentage of households where no adults (16+) have English as a main language

Priorslee, Hadley, Wellington and Hollinswood are all areas with a relatively higher proportion of households where no adults aged 16+ have English as a main language. Phramacies in these areas should be mindful of their community's needs eg. ability to access leaflets in other lanuages.



13.5. Appendix V -Health and Wellbeing PNA Cover Report

TELFORD & WREKIN COUNCIL HEALTH & WELLBEING BOARD

TITLE: PHARMACEUTICAL NEEDS ASSESSMENT 2018/19 - 2020/21

REPORT OF: HELEN ONIONS, CONSULTANT IN PUBLIC HEALTH, TELFORD & WREKIN COUNCIL, HITESH PATEL, PHARMACEUTICAL ADVISER, NHS TELFORD AND WREKIN CCG

DATE: 7th March 2018

LEAD CABINET MEMBER – Arnold England

PART A) - SUMMARY REPORT

2. SUMMARY OF MAIN PROPOSALS

This briefing updates the HWB on the consultation which took place for the Telford & Wrekin PNA during early January – early March 2018. This PNA refresh process updates the PNA published in April 2015, and the subsequent updates in 2016, which followed the review of pharmacy dispensing provision in South Telford as requested by the HWB.

During 2017 colleagues from the Council's public health team, CCG, the Local Pharmaceutical Committee and NHS England North Midlands coordinated the PNA refresh process, which includes the following key elements:

- Mapping of local pharmacy services, such as dispensing medicine, health advice and medicines reviews and local public health services
- > Summary of demographic factors and health and wellbeing needs
- Public survey on views of local community pharmacy services
- Equalities impact assessment
- Assessment of gaps in provision and recommendations regarding future provision and service developments

Following feedback from the HWB any changes or modifications will be made to allow for PNA publication by 1st April 2018.

3. RECOMMENDATIONS (AND TO WHOM ACTIONS APPLY e.g. CCG, Council)

The Board is requested to:

Note that the PNA process has been undertaken in-line with the national expectations and the associated statutory duties for the HWB.

- Consider and agree the content of the PNA Equalities Impact Assessment and support the remedial actions set out to reduce the negative impacts identified.
- Carefully consider all the consultation responses received from both the statutory consultees and wider respondents.
- Adopt the draft Telford and Wrekin Pharmaceutical Needs Assessment 2018/19–2020/21, including the proposed recommendations, subject to any amendments, which are appropriate in consideration of the consultation responses.

3. <u>IMPACT OF ACTION - (How it is intended that action will make a difference)</u>

The PNA, which is part of the wider Joint Strategy Needs Assessment process, is used:

- to make decisions on which services, including public health services, need to be provided by local community pharmacies
- by NHS England when deciding if new pharmacies are needed, in response to applications by businesses, including independent owners and large pharmacy companies

4. SUMMARY IMPACT ASSESSMENT

COMMUNITY IMPACT	Do these proposals contribute to a specific HWB Priority	
	Yes	The PNA process contributes to all three cross cutting priorities:
		Encourage healthier lifestyles
		Improve mental wellbeing and mental health
		Strengthen our communities and community-based support
	Do these proposals contribute to specific Co- Operative Council priority objective(s)? Yes Improving the health and wellbeing of our communities and addressing health inequalities Will the proposals impact on specific groups of people?	
	Yes	Community pharmacies play a key role in providing primary care services within our local communities.

TARGET COMPLETION/DELIVERY DATE	The refreshed PNA will be published by 1 st April 2018.	
FINANCIAL/VALUE FOR MONEY IMPACT	Yes	There are no financial implications arising from this report. Any financial implications arising post consultation will be considered as part of a future report. (ER – 20/11/17)
LEGAL ISSUES	Yes	From 1st April 2013, Health and Wellbeing Boards (HWB) in England assumed the responsibility1 to publish and keep up-to-date a statement of the needs for pharmaceutical services of the population in its area, through Pharmaceutical Needs Assessment (PNA). These requirements are set out in the The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 sets out requirements.
EQUALITY & DIVERSITY	Yes	There is evidence that community pharmacy has a key role to play in reducing health inequalities as often pharmacies are the first point of call for those requiring support who may not have engaged with other health services. An Equalities Impact Assessment has been undertaken as part of the PNA refresh process (Appendix C)
IMPACT ON SPECIFIC WARDS	No	remem process (rappensant s)
PATIENTS & PUBLIC ENGAGEMENT	Yes	Consultation and engagement is a specific requirement of the PNA process. As part of this a survey of community views was undertaken during August – September 2017. A 60 consultation took place between 3 January – 4 March 2018.
OTHER IMPACTS, RISKS & OPPORTUNITIES	Yes	The PNA is part of the wider Joint Strategic Needs Assessment process. The PNA contributes understanding of local pharmacy services needs and provision which could inform the STP

and Future Fit programmes in terms of the transformation of health and
social care services.

PART B) - ADDITIONAL INFORMATION

5. **INFORMATION**

See Appendices I – III for the full suite of PNA documents.

Appendix A Telford & Wrekin PNA - consultation document Jan18
Appendix B Telford & Wrekin PNA - consultation responses received

Appendix C Equalities Impact Assessment

6. <u>IMPACT ASSESSMENT – ADDITIONAL INFORMATION</u>

An equalities impact assessment process has been undertaken and further details can be seen in Appendix C

7. PREVIOUS MINUTES

Health and Wellbeing Board 6th December 2017 Health and Wellbeing Board 16th September 2016 Health and Wellbeing Board 9th December 2015 Health and Wellbeing Board 11th March 2015 Health and Wellbeing Board 24th September 2014, Minute Number – HWB-12

8. BACKGROUND PAPERS

Report prepared by Helen Onions, Consultant in Public Health, helen.onions@telford.gov.uk

13.6. Appendix VI -Recommendations from Community Pharmacy Clinical Services Review

Extract from Community Pharmacy Clinical Services Review undertaken by Richard Murray, Director of Policy at the King's Fund published by NHS England on 14th December 2016.

With other parts of the NHS facing severe financial and operational challenges, there needs to be renewed efforts to make the most of the existing clinical services that community pharmacy can provide and to do so at pace. This may require national action through the national contractual framework, as well action at local level. Looking into the medium-term, there is a need to ensure that community pharmacy is integrated into the evolving new models of care alongside other primary care professionals. This will include enhancing the support they provide to people with long-term conditions and public health, but should not be limited to these. Progress here will necessarily be more local in nature, built around the needs of patients and localities, however, NHS England and Public Health England can support and encourage this progress, not least to overcome some of the barriers that have to date prevented full use of community pharmacy. To make progress on these broader priorities, there are a number of specific steps national bodies can make. Action should include, but not be limited to, these steps.

Services

- 1. Full use should be made of the electronic repeat dispensing service. Except for patients not yet stabilised on their medication, electronic repeat dispensing should become the default for repeat prescribing and its use should be incentivised both for community pharmacies and for GPs.
- 2. The existing Medicine Use Reviews (MURs) element of the pharmacy contract should be redesigned to include on-going monitoring and regular follow-up with patients as an element of care pathways. This redesign should ensure that they are an integrated part of a multifaceted approach to helping people with long-term conditions that includes medicines optimisation, providing advice and helping people stay well. Such a service should be able to utilise transfer of care and referral schemes and electronic repeat dispensing (ERD), and have a focus on patients at high risk and those with multiple co-morbidities as well as those with single conditions that are clinical priorities such as diabetes, hypertension and COPD where evidence is already strongest. It should also include consideration of appropriate prescription duration to optimise outcomes and convenience for patients. Ultimately MURs should evolve into full clinical medication reviews utilising independent prescribing as part of the care pathway. For these to be safe and effective they would require access to a patient's full medical record which may not be possible immediately in all situations.
- 3. There is now a commitment that a minor ailments scheme should be locally commissioned across England by April 2018. There is a debate over whether this needs to be a national service, or a service commissioned locally by CCGs. Either way, NHS England should set out how it intends to deliver on this commitment and this should include testing models that use patient registration to enhance take-up, building on the experience in Scotland. While this could take place within the Vanguard programme as new care models develop, progress toward the April 2018 commitment clearly needs to happen sooner.

4. Consideration should be given to smoking cessation services becoming an element of a national contract.

New models of care

- 5. Existing Vanguard programs and resources should be used, in conjunction with the Pharmacy Integration Fund, to develop the evidence base for community pharmacists within new models of care. This applies to all the Vanguard types that work in community settings but should also specifically include:
 - Integrating community pharmacists and their teams into long term condition management pathways which implement the principles of medicines optimisation for residents of care homes. This should include pharmacist domiciliary visits to care home patients and full clinical medication review utilising independent pharmacist prescribing.
 - Community pharmacists being involved in case finding programmes for conditions which have significant consequences if not identified such as hypertension and for which the pharmacist is able to provide interventions (including referral) to prevent disease progression.
 - Utilising existing contractual levers and developing new ways of contracting, with individual or groups of pharmacists, in order to provide clinical services that utilise their clinical skills in ways that mitigate any perceived conflict of interest whilst providing the incentives for more rapid uptake of independent prescribing.

In all cases, new models of care that integrate pharmacy should involve appropriate patient engagement to ensure that both the service offer is built around patient need and that any necessary marketing with potential new users is effective. As best practice in commissioning and delivering these additional services from community pharmacy becomes clear, NHS England, Public Health England and other national partners should look to roll these out at pace, given the opportunities to use community pharmacy better and the deep challenges facing other parts of the NHS. This should include consideration of any workforce training implications for community pharmacists, pharmacy technicians and their teams.

Overcoming barriers

- 6. Public Health England already plans to provide advice to local government and to STPs presenting the evidence base for action. More widely, NHS England and its national partners should consider how best to support STPs in integrating community pharmacy into plans and overcome the current complexities in the commissioning landscape alongside further support for local commissioners in contracting for services now. Specifically, this should look at the changes necessary to make Local Pharmaceutical Services (LPS) Contracts easier to use.
- 7. Digital maturity and connectivity should be improved to facilitate effective and confidential communication between registered pharmacy professionals and other members of the healthcare team. This should include the ability for registered pharmacy professionals to see, document and share information with clinical records held by other healthcare professionals

and allow the actions, recommendations and rationale for clinical interventions made by registered pharmacy professionals to be visible to the relevant wider healthcare team.

- 8. Regulations should be amended to allow registered pharmacy technicians to work under Patient Group Directions to allow better use of skill-mix in delivering clinical pharmacy services.
- 9. Community pharmacists should be actively engaged to help explore and develop pathway approaches that integrate community pharmacists and their teams into primary care, and make best use of their skills in the identification and management of patients who will benefit most from their expertise. The leaders of the profession both at national and local level should consider what support is needed to pharmacists to build their professional confidence and break down barriers to new ways of working.
- 10. The Royal Pharmaceutical Society, Royal College of General Practitioners, the British Medical Association and the Pharmaceutical Services Negotiating Committee should come together to explore the practical steps that could be taken to unravel professional boundary issues and promote closer working between the professions. This would include consideration of professional responsibility and accountability, as well as how to conceptually put the patient at the centre of both professional worlds in a way that allows common objectives to be focused on patient outcomes. Initiatives involving pharmacists working in General Practice, and in some case becoming partners in those practices, should be encouraged and expanded as a way of contributing towards achieving this objective.
- 11. New evidence becomes available, circumstances change and new barriers can appear. Community pharmacy leaders and trade bodies across the sector, such as Pharmacy Voice, should come together with NHS England and Public Health England as a formal group to keep oversight of progress and recommend further action where necessary.

13.7. Appendix VII –Community Pharmacy Providers List

Key	Business	Address
1	Anstice Pharmacy	7 Anstice Square Madeley Telford TF7 5BD
2	A S Kitching Ltd	Limes Walk Oakengates Telford TF2 6EP
3	Aqueduct Pharmacy	Majestic Way, Aqueduct Telford Shropshire TF4 3RB
4	Asda Instore Pharmacy	St Georges Road Donnington Wood Telford TF2 7RX
5	Asda Instore Pharmacy	Southwater Way Malinsgate Telford TF3 4HZ
6	Boots the Chemist Ltd	2-3 Acorn Way Shawbirch Telford TF5 0LW
7	Boots the Chemist Ltd	52 High Street Newport Shropshire TF107AQ
8	Boots the Chemist Ltd	21-25 New Street Wellington Telford TF1 1LU
		4-10 North Sherwood Street Town Centre Telford TF3
9	Boots the Chemist Ltd	4AU
10	Boots the Chemist Ltd	Forge Retail Park Colliers Way Telford TF3 4AG
11	Jhoots Pharmacy	32 Market Street Oakengates Telford TF2 6ED
12	Jhoots Pharmacy	Lightmoor way, Lightmoor Telford, TF4 3QZ
		Health Centre, Wrekin Drive Donnington Telford TF2
13	Donnington Pharmacy	8EA
14	Ironbridge Pharmacy	The Square Ironbridge Telford TF8 7AQ
15	High Street Pharmacy	4 High Street Newport Telford TF107AN
4.0	Lauday Dharraaay	Off Birchfield Roundabout Lawley Bank Telford TF4
16	Lawley Pharmacy	2LL Leegomery Local Centre Leegomery Telford TF1
17	Leegomery Pharmacy	6XQ
18	Lloyds Pharmacy	Chapel Lane Wellington Telford TF1 1SS
		Charlton Medical Centre Lion Street, Oakengates
19	Lloyds Pharmacy	Telford TF2 6AQ
20	Lloyds Pharmacy	6 The Parade Donnington Telford TF2 8EB
21	Lloyds Pharmacy	Webb House, King St Dawley Telford TF4 2AA
22	Lloyds Chemist	46 High Street Dawley Telford TF4 2EX
	Lloyds Instore Pharmacy	
	(Sainsburys)	Forge Retail Park Colliers Way Telford TF3 4AG
24	Murrays Pharmacy	76 Upper Bar Newport Shropshire TF107AW
25	Malinslee Pharmacy	Church Road Malinslee Telford TF3 2JZ
00	Morrisons Instore	On single III VM allianctors. Talke and TE4 4DD
26	Pharmacy	Springhill Wellington Telford TF1 1RP
27	Muxton Pharmacy	9 Fieldhouse Drive Muxton Telford TF2 8JQ
28	Priorslee Pharmacy	Local Centre Priorslee Telford TF2 9NR
29	Rowlands Pharmacy	Unit2, Downmead Hollinswood Telford TF3 2EW
30	Powlande Pharmacy	The Pharmacy, Stirchley Health Centre Sandino Road Telford TF3 1FB
31	Rowlands Pharmacy Rowlands Pharmacy	Maythorne Close Sutton Hill Telford TF7 4DH
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32	Rowlands Pharmacy	Unit 6, Hadley Centre Hadley Telford TF1 5GQ

		Unit 3 The Shops, Teagues Crescent Trench Telford
33	Shire Pharmacy	TF2 6RX
34	Superdrug Stores	12-13 Dean Street Town Centre Telford TF3 4BT
35	Tesco Instore Pharmacy	The Retail Park, Arleston Wellington Telford TF1 2DE
36	Woodside Pharmacy	Parklane Centre Park Lane Telford TF7 5QZ
		Wellington Medical Practice Wellington Telford TF1
37	Wellington Pharmacy	1PZ
*	The Surgery	Wellington Road Newport Shropshire TF107HG

13.8. Appendix VIII –Community Pharmacy Opening Times

Core hours have been highlighted in yellow with additional hours highlighted in blue (this will include all supplementary hours). The shaded areas represent the total opening hours for each pharmacy. Each shaded block represents half an hour.

For example: Boots in Newport, opening hours on a Monday are 9:00am to 4:30pm with an hours break from 1:00pm to 1:30pm except during extended hours 9am – 6pm:

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13.9. Appendix IX – Currently Commissioned Services

			NHS Engla	nd Comissio	ned Servi	ces	•	•			•		Loca	Illy Comissio	ned Servic	es: Local Au	thority	•			Loca	
			anced Servi	ces		Enhar	nced Ser		Automated Pill Dispensers	Healthy	Start		Sexual Hea	alth Services	S		moking vices	Sub	stance Mis Services	suse	Commiss	s: CCG
Pharmacy Name	Medicines Use Review Service	New Medicine Service	Appliance Use Review Service	Stoma Appliance Customisation Service	Flu Vaccination (NHS)	Emergency Supply Service	Common Ailments	Urinary Tract Infections / Impetigo	Distribution of Pivotel Units	Healthy Start Vitamins (Free supply)	Healthy Start Vitamins (selling)	Chlamydia Treatment Service	Chlamydia Screening	Condom Distribution Scheme (distribution and/or registration)	Emergency Hormonal Contraception	NRT Voucher Service	Smoking Cessation Counselling Service	Naloxone Pilot	Needle and Syringe Exchange Service	Supervised Consumption	Palliative Care Emergency Just in Case boxes	Primary Eyecare Assessment Referral Service
Hadley Castle Locality																						
A.S Kitchings, Oakengates	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓						✓	✓
Asda, Donnington	✓	✓			✓	✓	✓			✓		✓	✓	✓	✓			✓	✓	✓	✓	✓
Boots, Newport	✓	✓			✓		✓		✓	✓		✓	✓	✓	✓					✓	✓	✓
Donnington pharmacy, Donnington	✓	✓			✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	
High Street pharmacy, Newport	✓	✓				✓	✓	✓	✓	✓		✓	✓		✓					✓	✓	
Jhoots, Oakengates	✓	✓			✓	✓	✓	✓		✓	✓	✓	✓	✓	✓					✓	✓	✓
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Lloyds Pharmacy, Oakengates	✓	✓			✓	✓	✓	✓		✓		✓	✓		✓					✓		✓
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MR Clarke, Newport	✓	✓			✓					✓		✓	✓	✓	✓	✓				✓	✓	✓
Muxton Pharmacy, Muxton	✓					✓		✓	✓	✓				✓						✓	✓	
Priorslee Pharmacy, Priorslee	✓	✓			✓	✓	✓	✓	✓	✓		✓	✓	✓	✓					✓	✓	✓
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Boots, Shawbirch	✓	✓			✓		✓			✓		✓	✓	✓	✓					✓		✓
Boots, Telford Shopping Centre	✓	✓			✓		✓			✓		✓	✓	✓	✓	✓				✓		✓
Boots, Wellington	✓	✓			✓		✓		✓	✓	✓	✓	✓	✓	✓					<		✓
Leegomery Chemist, Leegomery	✓	✓			✓		✓			✓		✓	✓		✓					✓		✓
Lloyds Pharmacy, Chapel Lane, Wellington	✓	✓			✓	✓	✓	✓		✓		✓	✓	✓	✓					<	✓	
Lloyds Pharmacy, Sainsbury's, Forge Retail Park	✓	✓			✓					✓	✓	✓	✓	✓	✓					✓		
L Rowlands, Hollinswood	✓	✓			✓			✓		✓	✓	✓	✓		✓				✓	✓		
L Rowlands, Stirchley	✓	✓	✓		✓	✓	✓	✓		✓		✓	✓	✓	✓			✓	✓	✓	✓	✓
Malinslee Pharmacy, Malinslee	✓	✓	✓	✓	✓		✓		✓	✓		✓	✓		✓	✓	✓			✓	✓	
Morrisons, Wellington	✓	✓				✓	✓		✓	✓		✓	✓	✓	✓		✓				✓	
Superdrug, TTC	✓	✓			✓					✓	✓	✓	✓		✓					✓	✓	✓
Tesco, Wrekin Retail Park	✓	✓			✓	✓				✓	✓	✓	✓	✓	✓			✓		✓	✓	✓
Wellington pharmacy, Chapel Lane	✓	✓			✓	✓	✓	✓	✓	✓		✓	✓		✓	✓				✓	✓	✓
Lakeside South Locality																						
Anstice Pharmacy, Madeley	✓	✓	✓		✓	✓	✓	✓		✓	✓	✓	✓	✓	✓	✓	✓		✓	✓	✓	✓
Aqueduct Pharmacy, Aqueduct	✓	✓	✓	✓	✓		✓		✓	✓		✓	✓		✓	✓	✓			✓	✓	✓
Ironbridge pharmacy, Ironbridge	✓	✓			✓		✓		✓	✓		✓	✓	✓	✓	✓	✓			✓	✓	
Jhoots, Lightmoor	✓	✓				✓	✓	✓		✓		✓	✓		✓					✓		
Lawley Pharmacy, Lawley	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓			~	✓	✓
Lloyds Pharmacy, High St, Dawley	✓	✓			✓	✓	✓	✓		✓	✓	✓	✓	✓	✓					✓	✓	✓
Lloyds Pharmacy, King St, Dawley	✓	✓			✓	✓	✓	✓		✓		✓	✓	✓	✓					✓	✓	
L Rowlands, Sutton Hill	✓	✓	✓	✓	✓			✓		✓	✓	✓	✓	✓	✓				✓	✓	✓	✓
Woodside Pharmacy, Park Lane	✓	✓	✓	✓		✓	✓		✓	✓		✓	✓	✓	✓	✓	✓	✓		✓	✓	✓

13.10. Appendix X – Pharmacy Survey Responses (PharmOutcomes)

	Essential Services		Advance	d Services	
Pharmacy Name	Dispense appliances	Medicines Use Review Service	New Medicine Service	Appliance Use Review Service	Stoma Appliance Customisation Service
Hadley Castle					
A.S Kitchings, Oakengates	Yes - All types	✓	✓	✓	✓
Asda, Donnington	Yes - All types	✓	✓	×	×
Boots, Newport	Yes, excluding stoma and incontinence appliances	✓	✓	×	*
Donnington pharmacy, Donnington	Yes - All types	✓	✓	×	Soon
High Street pharmacy, Newport	Yes, just dressings	✓	✓	Soon	Soon
Jhoots, Oakengates	Yes - All types	✓	✓	×	*
Lloyds Pharmacy, Donnington	Yes - All types	✓	✓	×	*
Lloyds Pharmacy, Oakengates	None	✓	✓	×	×
L Rowlands, Hadley	Yes - All types	✓	✓	×	×
MR Clarke, Newport	Yes - All types	✓	✓	×	×
Muxton Pharmacy, Muxton	Yes - All types	✓	Soon	×	×
Priorslee Pharmacy, Priorslee	Yes - All types	✓	✓	×	×
Shire Pharmacy, Trench	Yes - All types	✓	✓	✓	✓
The Wrekin					
Asda, Mallinsgate	Yes - All types	✓	✓	×	×
Boots, Forge Retail Park	Yes - All types	✓	✓	✓	*
Boots, Shawbirch	Yes - All types	✓	✓	×	×
Boots, Telford Shopping Centre	Yes, excluding stoma appliances	✓	✓	Soon	*
Boots, Wellington	Yes - All types	✓	√	×	*
Leegomery Chemist, Leegomery	Yes - All types	✓	√	×	*
Lloyds Pharmacy, Chapel Lane, Wellington	Yes - All types	✓	✓	×	×
Lloyds Pharmacy, Sainsbury's, Forge Retail Park	Yes, just dressings	✓	✓	×	×
L Rowlands, Hollinswood	Yes, just dressings	✓	√	×	×
L Rowlands, Stirchley	Yes - All types	✓	√	✓	Soon
Malinslee Pharmacy, Malinslee	Yes - All types	✓	√	✓	✓
Morrisons, Wellington	Yes - All types	✓	✓	Soon	*
Superdrug, TTC	Yes, just dressings	✓	✓	×	×
Tesco, Wrekin Retail Park	Yes - All types	✓	✓	×	*
Wellington pharmacy, Chapel Lane	Yes - All types	✓	✓	×	*
Lakeside South					
Anstice Pharmacy, Madeley	Yes - All types	✓	✓	✓	×
Aqueduct Pharmacy, Aqueduct	Yes - All types	✓	✓	✓	✓
Ironbridge pharmacy, Ironbridge	Yes - All types	√	√	Soon	Soon
Jhoots, Lightmoor	Yes - All types	✓	✓	×	×
Lawley Pharmacy, Lawley	Yes - All types	√ ·	√ ·	✓	✓
Lloyds Pharmacy, High St, Dawley	Yes - All types	✓	√	×	×
Lloyds Pharmacy, King St, Dawley	Yes - All types	√ ·	√ ·	×	×
L Rowlands, Sutton Hill	Yes - All types	✓	√	✓	✓
Woodside Pharmacy, Park Lane	Yes - All types	√	√	✓	✓
rroodoldo i lidillidoy, i dik Edilo	100 / 11 types				

Commissioned Services

Currently providing under contract	CP
Willing and able to provide if commissioned	WA
Willing but need training	WT
Willing but need facilities adjustment	WF
Willing but need training and facilities adjustment	WT;WF
Only provide privately	PP

	Disease-Specific Medicine Management Service										
Pharmacy Name	Allergies	Alzheimer's / Dementia	Asthma	СНБ	Depression	Diabetes Type I	Diabetes Type II	Epilepsy	Heart Failure	Hypertension	Parkdison's Disaese
Hadley Castle											
A.S Kitchings, Oakengates	WT	WT	WA	WT	WT	WT	WT	WT	WT	WT	WT
Asda, Donnington	WA	WT	WA	WT	WT	WT	WT	WT	WT	WT	WT
Boots, Newport	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Donnington pharmacy, Donnington	WT	WT	WA	WT	WT	WT	WT	WT	WT	WT	WT
High Street pharmacy, Newport	WA	WA	WA	WA	WA	СР	WA	WA	WA	WA	WA
Jhoots, Oakengates	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Lloyds Pharmacy, Donnington	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Lloyds Pharmacy, Oakengates											
L Rowlands, Hadley	WT	WT	WA	WT	WT	WT	WT	WT	WT	WT	WT
MR Clarke, Newport											
Muxton Pharmacy, Muxton	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Priorslee Pharmacy, Priorslee			WT:WF							WT:WF	
Shire Pharmacy, Trench	WT	WT	WT	WT	WT	WT	WT	WT	WT	WA	WA
The Wrekin											
Asda, Mallinsgate	WT	WT	WA	WT	WT	WT		WT	WT	WT	WT
Boots, Forge Retail Park	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Boots, Shawbirch	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Boots, Telford Shopping Centre	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Boots, Wellington		WT	WT:WF							WT:WF	
Leegomery Chemist, Leegomery			,							,	
Lloyds Pharmacy, Chapel Lane, Wellington	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Lloyds Pharmacy, Sainsbury's, Forge Retail Parl		WT	WT	WT	WT	CP	CP	WT	WT	WT	WT
L Rowlands, Hollinswood	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
L Rowlands, Stirchley	WA	CP	CP	CP	WA	CP	CP	WA	CP	CP	WA
Malinslee Pharmacy, Malinslee	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Morrisons, Wellington	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Superdrug, TTC	WT:WF		WT:WF	WT:WF	WT;WF	WT:WF	WT:WF	WT:WF	WT:WF	WT:WF	WT:WF
Tesco, Wrekin Retail Park	WA	WA	WA	WA	WA	WA	WA	WA	WA	WA	WA
Wellington pharmacy, Chapel Lane	WA	WA	WA	WA	WA	WA	WA	WA	WA	WA	WA
Lakeside South											
Anstice Pharmacy, Madeley	WT	WT	WT	WT		WT	WT	WT	WT	WT	WT
Aqueduct Pharmacy, Aqueduct	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Ironbridge pharmacy, Ironbridge	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Jhoots, Lightmoor											
Lawley Pharmacy, Lawley	WA	WA	WA	WA	WA	WA	WA	WA	WA	PP	WA
Lloyds Pharmacy, High St, Dawley											
Lloyds Pharmacy, King St, Dawley											
7 7 9 7											\A/T
L Rowlands, Sutton Hill	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT

		1	1				1	45	1	
Pharmacy Name	Antcoagulant Monitoring Service	AntiViral Distribution Service	Care Home Service	Chlamydia Treatment Service	Contraception Service	Emergency Hormonal Contraception	Gluten Free Food Supply Service	Home Delivery Service	Independent Prescribing Service	Language Access Service
Hadley Castle										
A.S Kitchings, Oakengates	WA	WT	WT	CP	WA	CP	WA	CP	WT	WT
Asda, Donnington	WT	CP	WA	CP	WT	CP	WA	WA	WT	WT
Boots, Newport	WT	WT	WF	WT	WT	WT	WT	СР	WT	WT
Donnington pharmacy, Donnington	WA	WA	WA	WT	WA	CP	WT	CP	WT	WT
High Street pharmacy, Newport	WT	WA	WA	WA	WT	CP	WA	CP	WA	WA
Jhoots, Oakengates	WT	WT	WT	WT	WT	WT	WT	CP	WT	WT
Lloyds Pharmacy, Donnington	WT	WT	CP	СР	WT	CP	WT	CP	WT	
Lloyds Pharmacy, Oakengates	•••		O.	<u> </u>	•••	<u> </u>		CP		
L Rowlands, Hadley	WT	WT		WA	WA	WA	WT	WT	WT	
MR Clarke, Newport	** .	**		***	**/*	CP	** .	** 1	***	
Muxton Pharmacy, Muxton	WA	WA	WT	WT	CP	PP	WT	CP	WT	WT
Priorslee Pharmacy, Priorslee		WT;WF		CP	WT;WF	CP	VV 1	CP	V V 1	V V I
Shire Pharmacy, Trench	WA	WA	WA	WA	WA	WA	WA	WA	WA	WA
The Wrekin	VVA	V V /\	V V /\	V V /\	VVA	V V /\	VVA	V V /\	V V /	VVA
Asda, Mallinsgate	WA	WA	WT	WA	WT	CP	WT		WT	WT
Boots, Forge Retail Park	WT	WT	WF	WT	WT	CP CP	WT	CP	WT	WT
Boots, Shawbirch	WT	WT	WF	WT	WT	CP CP	WT	CP	WT	CP
Boots, Telford Shopping Centre	WA	WA	CP	CP	WA	CP CP	WT	CP	WT	WT
Boots, Wellington	VVA	WT	CP	WT	VVA	CP CP	WT	PP	VVI	VVI
	WT	WT		WT	WT	UF .	VVI	СР		
Leegomery Chemist, Leegomery			CP			\A/T	\A/T	CP	\A/T	\A/T
Lloyds Pharmacy, Chapel Lane, Wellington	WT	WT	CP	WT	WT	WT	WT	CP	WT	WT
Lloyds Pharmacy, Sainsbury's, Forge Retail Park		WT		WT	WT	WT WT	WT		WT WT	WT
L Rowlands, Hollinswood	WT	WT	OD.	WT	WA		WT	0		CD.
L Rowlands, Stirchley	WA	WA	CP	WA	WA	CP	CP	CP	WA	CP
Malinslee Pharmacy, Malinslee	WT	WT	CP	CP	CP	CP	WA	CP	WT	CP
Morrisons, Wellington	\A/T-\A/E	\A/T.\A/E	WT	WT	CP	CP	WT	0	\A/T.\A/E	\A/T.\A/C
Superdrug, TTC		WT;WF		CP	CP	WA	WT;WF	CP	WT;WF	
Tesco, Wrekin Retail Park	WA	CP	WA	WA	WA	CP	WA	WA	WA	WA
Wellington pharmacy, Chapel Lane	WA	WA	WA	WA	WA	CP	WA	CP		WA
Lakeside South) A (T	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	0.0) A (T	0.0	0.0	0.0	\) A / T
Anstice Pharmacy, Madeley	WT	WT	WT	CP	WT	CP	CP	CP	WT	WT
Aqueduct Pharmacy, Aqueduct	WT	WT	CP	CP	CP	CP	CP	CP	WT	CP
Ironbridge pharmacy, Ironbridge	WF	WF	CP	CP	CP	CP	CP	CP	WT	CP
Jhoots, Lightmoor					WF	WF				
Lawley Pharmacy, Lawley	WT	WA	CP	CP	WT	CP	WA	CP	WT	WA
Lloyds Pharmacy, High St, Dawley	WT	WT	WT	WT	WT	CP		CP		
Lloyds Pharmacy, King St, Dawley								CP		
L Rowlands, Sutton Hill	WF	WT	WF	WT	WT	CP	WT	CP	WT	WT
Woodside Pharmacy, Park Lane	WT	WT	WT	WT	WT	CP	WA	WA		

		Medicines A and Complian Serv	nce Support					On Demand Availability of Specialist Drugs Service		
Pharmacy Name	Medication Review Service	Medicines Management Support Service	DomMAR Carer's Charts	Minor Ailments	MUR Plus / Medicines Optimisation Service	Needle and Syringe Exchange Service	Obesity Management (Adults and Children)	Directly Observed Therapy	Out of Hours Service	Palliative Care Scheme
Hadley Castle										
A.S Kitchings, Oakengates	CP	WT	CP	СР	WT	WT	WT	WT	WT	WT
Asda, Donnington	WT	WT	WT	CP	WA	СР	WA	CP	PP	CP
Boots, Newport	WT	WT	СР	CP	WT	WT	WT	CP	WT	CP
Donnington pharmacy, Donnington	CP	WT	WT	СР		WT	WT	WT	WT	CP
High Street pharmacy, Newport	CP	WA	WA	СР	WA	WA	WA	WA	WA	CP
Jhoots, Oakengates	CP	WT	WT	СР	WT	WT	WT	WT	WT	WT
Lloyds Pharmacy, Donnington	CP	WT	CP	СР	WT	WT	WT	WT	WT	WT
Lloyds Pharmacy, Oakengates	CP			СР						
L Rowlands, Hadley	CP	WT		WA	WT	WA	WT	WT		
MR Clarke, Newport										
Muxton Pharmacy, Muxton	WT	WT	WT	WT	WT	WT	WT	WT	WF	CP
Priorslee Pharmacy, Priorslee				СР		WT;WF			WT	CP
Shire Pharmacy, Trench	WA	WA	WT	WA	WA	WA	WA	WA	WA	WA
The Wrekin										
Asda, Mallinsgate	WT	WT	WT	CP	WT		WT	WT		CP
Boots, Forge Retail Park	WT	WT	WF	WT	WT	WF	WT	WF	WT	WT
Boots, Shawbirch	WT	WT	WT	СР	WT	WT	WT	WT		WT
Boots, Telford Shopping Centre	WT	WT	WT	WA	WA	WT	WT	CP	WT	WT
Boots, Wellington				CP						WT
Leegomery Chemist, Leegomery	CP		CP	CP						
Lloyds Pharmacy, Chapel Lane, Wellington	WT	СР	WT	CP	WT	WT	WT	WT		CP
Lloyds Pharmacy, Sainsbury's, Forge Retail Park		WT		WT	WT	WT	WT		WT	
L Rowlands, Hollinswood	СР	WT		WT	WT		WT	WT		WT
L Rowlands, Stirchley	CP	WA	WA	CP	СР	CP	WA	WA	WA	CP
Malinslee Pharmacy, Malinslee	CP	WT	CP	CP	WA	WA	WT	WT	WA	CP
Morrisons, Wellington	PP	WT	PP	CP		WT	WT			WA
Superdrug, TTC	CP	WT;WF	WT;WF		WT;WF	WT;WF		WT;WF	WT	WT;WF
Tesco, Wrekin Retail Park	WA	WA	WA	WA	WA	WA	WA	WA	СР	СP
Wellington pharmacy, Chapel Lane	СР	WA	CP	СР	WA	WA	WA	WA	CP	CP
Lakeside South								•		
Anstice Pharmacy, Madeley	WT	WT	WT	СР	WT	CP	WT	WT	WT	WT
Aqueduct Pharmacy, Aqueduct	CP	WT	CP	CP	WT	WA	WT	WT	WA	CP
Ironbridge pharmacy, Ironbridge	CP	WT	WT	CP	СР	WA	WT	WT	WA	CP
Jhoots, Lightmoor										
Lawley Pharmacy, Lawley	CP	WA	CP	CP	СР	WT	PP	WA	CP	CP
Lloyds Pharmacy, High St, Dawley	CP			CP		WT				
Lloyds Pharmacy, King St, Dawley				CP				l		
L Rowlands, Sutton Hill	WT	WT	WF	WA	WT	WF	WT	WT	WF	CP
Woodside Pharmacy, Park Lane	WT	WT	WT	CP	WT	WT	WT	WT		WA

				Screening Service								
Pharmacy Name	Phlebotomy Service	Prescriber Support Service	Schools Service	Alcohol	Chlamydia	Cholesterol	Diabetes	Gonorrhoea	H.pylori	HbA1C	Hepatitis	ΑIIV
Hadley Castle						•						
A.S Kitchings, Oakengates	WT	WT	WA	WT;WI	CP	WT	WT	WT	WT	WT	WA	WT
Asda, Donnington	WT	WA	WA	WA	CP	WA	WA	CP	WA	WA	WA	WA
Boots, Newport	WT	WT	WT	WT	WT	WT	WT	WT	WT		WT	WT
Donnington pharmacy, Donnington	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
High Street pharmacy, Newport	WA	WA	WA	WA		WA	WA	WA	WA	WA	WA	WA
Jhoots, Oakengates	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Lloyds Pharmacy, Donnington				WT	CP	WT	СР	WT	WT	WT	WT	WT
Lloyds Pharmacy, Oakengates												
L Rowlands, Hadley		WT	WT	WT	WA	WT	WT	WT	WT			
MR Clarke, Newport												
Muxton Pharmacy, Muxton												
Priorslee Pharmacy, Priorslee			,	WT;WI	CP		\	NT;WI				AF
Shire Pharmacy, Trench	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
The Wrekin												
Asda, Mallinsgate	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Boots, Forge Retail Park	VT;W		WT	WF	WF	WF	WF	WF	WF	WF	WF	WF
Boots, Shawbirch	ŴΤ	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Boots, Telford Shopping Centre				WT	CP	WT	WT	WT	WT	WT	WT	WT
Boots, Wellington						WT;WI		NT;WI				
Leegomery Chemist, Leegomery					,	,		<u> </u>				
Lloyds Pharmacy, Chapel Lane, Wellington	WT	WT	WT	WT	WT	WT	CP	WT	WT	WT	WT	WT
Lloyds Pharmacy, Sainsbury's, Forge Retail Par				WT	WT	СР	CP	WT				
L Rowlands, Hollinswood	WT		WT	WT	WT	WT	WT		WT	WT	WT	
L Rowlands, Stirchley	WA	WA	WA	WA	WA	WA	WA	WA	WA	WA	WA	WA
Malinslee Pharmacy, Malinslee	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Morrisons, Wellington			WT	WT	WT	PP	WA	WT		WT		
Superdrug, TTC	VT:W	WT;WF							WT:WI		VT:WI	WT:WF
Tesco, Wrekin Retail Park	WA	WA	WA	WA			WA	WA		WA		
Wellington pharmacy, Chapel Lane	WA	WA	WA	WA	WA	WA	WA	WA	WA	WA	WA	WA
Lakeside South												
Anstice Pharmacy, Madeley	WT	WT	WT	WT	CP	WT	WT	WT	WT	WT	WT	WT
Aqueduct Pharmacy, Aqueduct	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Ironbridge pharmacy, Ironbridge				WT	CP	WT	WT	WT	WT	WT	WT	WT
Jhoots, Lightmoor	1											
Lawley Pharmacy, Lawley	WT	CP	СР	WA	СР	WT	WA	WA	WT	WT	WF	WF
Lloyds Pharmacy, High St, Dawley						PP	PP					
Lloyds Pharmacy, King St, Dawley	1											
L Rowlands, Sutton Hill	WF	WT	WT	WF	WF	WF	WF	WF	WF	WF	WF	WF
Woodside Pharmacy, Park Lane	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT

		Va	ccinatio	ons			Stop Smok	ing Service			
Pharmacy Name	Flu Vaccination	Childhood Vaccinations	НРУ	Hepatitis B	Travel Vaccines	Sharps Disposal Service	NRT Voucher Service	Smoking Cessation Counselling Service	Supervised Consumption	Supplementary Prescribing	Vascular Risk Assessment Service (NHS Healthcheck)
Hadley Castle						-					
A.S Kitchings, Oakengates	СР	WT	WT	WT	WT	WT	WT	WT	WT	WT	WT
Asda, Donnington	СР	WA	WA	WA	WA	CP	WA	WA	CP	WT	WT
Boots, Newport	СР	WT	WT	WT	WT	WT	WT	WT	CP	WT	WT
Donnington pharmacy, Donnington	СР	WA	WA	WA	WA	WT	CP	CP	СР	WT	WT
High Street pharmacy, Newport	WA	WA	WA	WA		WT	WA	WA	WA	WA	WA
Jhoots, Oakengates	СР	WT	WT	WT	WT	WT	WT	WT	CP	WT	WT
Lloyds Pharmacy, Donnington	СР	WT	WT	CP	CP	WT	WT	WT	CP	WT	WT
Lloyds Pharmacy, Oakengates	СР				PP				СР		
L Rowlands, Hadley						CP	WT		CP	WT	WT
MR Clarke, Newport	CP						CP		CP		
Muxton Pharmacy, Muxton							WT	WT	CP	WF	WF
Priorslee Pharmacy, Priorslee	CP					WT;WF	WT;WF	WT;WF	CP	WT;WF	
Shire Pharmacy, Trench	WT	WT	WT	WT	WT	WT	WT	WT	WA	WT	WT
The Wrekin											
Asda, Mallinsgate	CP						WT	WT	CP	WT	
Boots, Forge Retail Park	PP	WT	WT	WT	WT	WF	WT	CP	CP	WT	WT
Boots, Shawbirch	СР	WT	WT	WT	WT	WF	WT	WF	СР	WT	WT
Boots, Telford Shopping Centre	CP	PP	PP	PP	PP	WT	CP	WT	CP	WT	WT
Boots, Wellington	СР					CP	WT		CP		
Leegomery Chemist, Leegomery	CP										
Lloyds Pharmacy, Chapel Lane, Wellington	СР	WT	WT	WT	WT	WT	WT	WT	CP	WT	WT
Lloyds Pharmacy, Sainsbury's, Forge Retail Park		WT			WT	CP					
L Rowlands, Hollinswood	CP	WT	WT	WT	WT		WT	WT	WT	WT	
L Rowlands, Stirchley	CP	WA	WA	WA	CP	WA	WA	WA	CP	WA	WA
Malinslee Pharmacy, Malinslee	CP	WT	WT	WT	WT	WA	CP	CP	CP	WT	WT
Morrisons, Wellington	PP							CP	WA		WT
Superdrug, TTC	CP					WT;WF	WT;WF		CP	WT;WI	WT;WF
Tesco, Wrekin Retail Park	CP	WA	WA	WA	WA	WA	WA	WA	CP	WA	WA
Wellington pharmacy, Chapel Lane	CP	WA	WA	WA	WA	WA	CP	WA	WA	WA	WA
Lakeside South		10/-	\A	\A	\ A / =	10/7		0.5	0.5	\ \ \ \ - \ \	10.7
Anstice Pharmacy, Madeley	CP	WT	WT	WT	WT	WT	CP	CP	CP	WT	WT
Aqueduct Pharmacy, Aqueduct	CP	WT	WT	WT	WT	WA	CP CP	CP	CP	WT	WT
Ironbridge pharmacy, Ironbridge	CP	WT	WT	WT	WT	WA	CP	CP	CP	WT	WT
Jhoots, Lightmoor	CD	\A/T	\A/T	\A/T	10/0	CD	CD	CD	CD	\A/T	\A/T
Lawley Pharmacy, Lawley	CP	WT	WT	WT	WA	CP	CP	CP	CP	WT	WT
Lloyds Pharmacy, High St, Dawley	CP							PP	CP		
Lloyds Pharmacy, King St, Dawley	CP	۱۸/۸	۱۸/۸	۱۸/۸	10/0	۱۸/۸	\ \ /T	\ \ /T	CD	\ \ /T	\ \ /T
L Rowlands, Sutton Hill Woodside Pharmacy, Park Lane	CP	WA	WA	WA	WA	WA	WT	WT	CP	WT	WT
woodside Pharmacy, Park Lane	PP	WT	WT	VVI	WT	WT	CP	CP	CP	WT	WT

	Healthy L	iving Pha	armacy			Collection and Delive	ry Services	
Pharmacy Name	HLP Level 1 Registered*	Healthy Living Pharmacy?	Number of Healthy Living Champions (FTE)	Prescription Collection Service	Free Delivery on Request	Delivery Groups	Delivery Areas	Chargeable Delivery Service
Hadley Castle								
A.S Kitchings, Oakengates	Х	✓	3	✓	✓			×
Asda, Donnington	X	✓	0	✓	×			×
Boots, Newport		✓	2	✓	✓	Housebound	Local Area	×
Donnington pharmacy, Donnington		soon	1	✓	✓	All	Telford and Wrekin	×
High Street pharmacy, Newport	Х	✓	2	✓	✓			×
Jhoots, Oakengates	X	✓	1	✓	✓	All	Local Area	×
Lloyds Pharmacy, Donnington	X	√	1	√	√	All	All	×
Lloyds Pharmacy, Oakengates	X	√	1	√	√	Housebound	7 41	×
L Rowlands, Hadley	X	√	1	√	√	All	Hadley	×
MR Clarke, Newport		soon	0	√ ·	√ ·	/ ui	riddicy	×
Muxton Pharmacy, Muxton		soon	0	√ ·	√ ·			✓
Priorslee Pharmacy, Priorslee	Х	√ ×	1	√ ·	√ ·			×
Shire Pharmacy, Trench	^	· /	1	<i>'</i>	· ✓			×
The Wrekin								
Asda, Mallinsgate		soon	0	√	×			×
Boots, Forge Retail Park	Х	soon	0	×	<i>~</i>	Disabled		×
Boots, Shawbirch	X	soon	1	<i>~</i>	· ✓	Disabled		×
Boots, Telford Shopping Centre	X	soon	1	✓	√			×
Boots, Vellington	X	soon	0	<i>✓</i>	· ✓			×
Leegomery Chemist, Leegomery	X	300 11	0	<i>→</i>	· ✓			×
Lloyds Pharmacy, Chapel Lane, Wellington	X	✓	0	✓	√			×
Lloyds Pharmacy, Chaper Larie, Weilington Lloyds Pharmacy, Sainsbury's, Forge Retail Park	X		0	→	×			×
L Rowlands, Hollinswood	X	soon	0	→	<i>~</i>			~
L Rowlands, Stirchley	^	soon	2	✓	√			×
Malinslee Pharmacy, Malinslee		✓	1	→	√	All	All	×
Morrisons, Wellington	X X	soon	0	→	√	All	All	×
Superdrug, TTC	^	× ×	0	✓	√		Telford & Wrekin	~
Tesco, Wrekin Retail Park	Х	✓	1	<i>✓</i>	×		Tellord & WTEKIT	×
Wellington pharmacy, Chapel Lane	^	soon	2	→	<i>~</i>	All	All	×
Lakeside South		30011				/NI	<u> </u>	
Anstice Pharmacy, Madeley		scon	0	1	1	All	4 mile Radius	×
Aqueduct Pharmacy, Nauedey Aqueduct Pharmacy, Aqueduct	Х	soon	0	∨	∨	All	All	×
Ironbridge pharmacy, Ironbridge		SOOH ✓	0	∨	∨	All	All	×
Jhoots, Lightmoor	X	✓	0	✓	√	All		×
Lawley Pharmacy, Lawley	Λ	∨		∨	∨	All	8 mile Radius	×
Lloyds Pharmacy, Lawley Lloyds Pharmacy, High St, Dawley	X	∨	2 1	∨	1	<i>A</i> II	o mile Radius	×
Lloyds Pharmacy, Righ St, Dawley Lloyds Pharmacy, King St, Dawley	X	∨	1	∨	∨	Housebound, Elderly	Local Area	×
L Rowlands, Sutton Hill		∨	3	∨	∨	i lousebouriu, Eiderly	LUCAI AI Ed	×
	X	∨	2	∨	∨	Whore there is a pead	Local Area	×
Woodside Pharmacy, Park Lane	X	, v		V	V	Where there is a need	Local Area	

^{*}HLP Level 1 Registered (completed the self-assessment process with RSPH) as of 23rd November 2017

13.11. Appendix XI -Sexual Health Services Opening Times

Pharmacy Name	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Hadley Castle							
A.S Kitchings, Oakengates*∞	9.00 - 17.00	9.00 - 17.00	9.00 - 17.00	9.00 - 17.00	9.00 - 17.00	closed (extended 8.30 - 14.30)	closed
Asda, Donnington*∞	8.00 - 23.00	7.00 - 23.00	7.00 - 23.00	7.00 - 23.00	7.00 - 23.00	7.00 - 22.00	11.00 - 17.00
Donnington pharmacy, Donnington	7.00 - 22.00	7.00 - 22.00	7.00 - 22.00	7.00 - 22.00	7.00 - 22.00	7.00 - 21.00	9.00 - 20.00
High Street pharmacy, Newport	7.30 - 22.30	7.30 - 22.30	7.30 - 22.30	7.30 - 22.30	7.30 - 22.30	7.30 - 22.30	9.00 - 19.00
Lloyds Pharmacy, Donnington*∞	9.00 - 17.30 (closed 12.00 - 13.00) (extended 8.30 - 18.00 and over lunch break)	9.00 - 17.30 (closed 12.00 - 13.00) (extended 8.30 - 18.00 and over lunch break)	9.00 - 17.30 (closed 12.00 - 13.00) (extended 8.30 - 18.00 and over lunch break)	9.00 - 17.30 (closed 12.00 - 12.30) (extended 8.30 - 18.00 and over lunch break)	9.00 - 17.30 (closed 12.00 - 12.30) (extended 8.30 - 18.00 and over lunch break)	9.00 - 13.00 (extended 9.00 - 17.00)	closed
MR Clarke, Newport	9.00 - 17.00 (extended 9.00 - 17.30)	closed (extended 9.00 - 13.00)	closed				
Priorslee Pharmacy, Priorslee*∞	9.00 - 18.00 (closed 13.00 - 14.00 except during extended hours)	9.00 - 18.00 (closed 13.00 - 14.00 except during extended hours)	9.00 - 18.00 (closed 13.00 - 14.00 except during extended hours)	9.00 - 18.00 (closed 13.00 - 14.00 except during extended hours)	9.00 - 18.00 (closed 13.00 - 14.00 except during extended hours)	closed (extended 9.00 - 13.00)	closed
The Wrekin							
Asda, Malinsgate	8.00 - 23.00	7.00 - 23.00	7.00 - 23.00	7.00 - 23.00	7.00 - 23.00	7.00 - 22.00	10.00 - 16.00
Boots, Forge Retail Park	9.00 - 17.30 (closed 14.00 - 15.00 except during extended	9.00 - 17.30 (closed 14.00 - 15.00 except during extended	10.30 - 16.30				

	hours 9.00 - 20.00) 9.00 - 17.00	hours 9.00 - 19.00)					
Boots, Shawbirch	(closed 12.30 - 13.00 except during extended hours 8.30 - 18.00)	closed (extended 9.00 - 17.00)	closed				
Boots, Telford Shopping Centre*∞	9.00 - 16.30 (except 13.00 - 13.30 except during extended hours 17.00 - 18.00)	9.00 - 16.30 (except 13.00 - 13.30 except during extended hours 17.00 - 18.00)	9.00 - 16.30 (except 13.00 - 13.30 except during extended hours 17.00 - 18.00)	9.00 - 16.30 (except 13.00 - 13.30 except during extended hours 17.00 - 18.00)	9.00 - 16.30 (except 13.00 - 14.00 except during extended hours 17.00 - 18.00)	9.00 - 16.30 (except 13.00 - 14.00 except during extended hours 17.00 - 18.00)	closed (extended 10.30 - 16.30)
Boots, Wellington	9.00 - 16.30 (closed 13.00 - 13.30 except during extended hours 9.00 - 17.30)	9.00 - 16.30 (closed 13.00 - 13.30 except during extended hours 9.00 - 17.30)	9.00 - 16.30 (closed 13.00 - 13.30 except during extended hours 9.00 - 17.30)	9.00 - 16.30 (closed 13.00 - 13.30 except during extended hours 9.00 - 17.30)	9.00 - 16.30 (closed 13.00 - 14.00 except during extended hours 9.00 - 17.30)	9.00 - 16.30 (closed 13.00 - 14.00 except during extended hours 9.00 - 17.30)	closed
L Rowlands, Stirchley	9.00 - 17.30 (closed 13.00 - 14.00 except extended hours 9.00 - 18.00 when it is closed 13.00 - 13.20)	9.00 - 17.30 (closed 13.00 - 14.00 except extended hours 9.00 - 18.00 when it is closed 13.00 - 13.20)	9.00 - 17.30 (closed 13.00 - 14.00 except extended hours 9.00 - 18.00 when it is closed 13.00 - 13.20)	9.00 - 17.30 (closed 13.00 - 14.00 except extended hours 9.00 - 18.00 when it is closed 13.00 - 13.20)	9.00 - 17.30 (closed 13.00 - 14.00 except extended hours 9.00 - 18.00 when it is closed 13.00 - 13.20)	closed (extended 9.00 - 13.00)	closed
Malinslee Pharmacy, Malinslee*	9.00 - 18.00 (except 13.00 - 14.00)	9.00 - 18.00 (except 13.00 - 14.00)	9.00 - 18.00 (except 13.00 - 14.00)	9.00 - 18.00 (except 13.00 - 14.00)	9.00 - 18.00 (except 13.00 - 14.00)	closed	closed
Morrisons, Wellington	9.00 - 17.00 (closed 13.00 - 14.00 except during extended	9.00 - 17.00 (except 13.30 - 14.00, extended 17.00 - 19.00)	9.00 - 17.00 (except 13.30 - 14.00, extended 17.00 - 19.00)	9.00 - 17.00 (except 13.30 - 14.00, extended 17.00 - 20.00)	9.00 - 17.00 (except 13.30 - 14.00, extended 17.00 - 20.00)	9.00 - 16.00 (closed 13.00 - 14.00 except during extended	closed (extended 10.00 - 16.00)

	hours 8.30 - 19.00)					hours 9.00 - 18.00)	
Tesco, Wrekin Retail Park	9.00 - 17.00 (closed 13.00 - 14.00 except during extended hours 8.00 - 21.00)	9.00 - 17.00 (closed 13.00 - 14.00 except during extended hours 8.00 - 21.00)	9.00 - 17.00 (closed 13.00 - 14.00 except during extended hours 8.00 - 21.00)	9.00 - 17.00 (closed 13.00 - 14.00 except during extended hours 8.00 - 21.00)	9.00 - 17.00 (closed 13.00 - 14.00 except during extended hours 8.00 - 21.00)	9.00 - 17.00 (closed 13.00 - 14.00 except during extended hours 8.00 - 21.00)	closed (extended 10.00 - 16.00)
Wellington pharmacy, Chapel Lane	8.00 - 23.00	8.00 - 23.00	8.00 - 23.00	8.00 - 23.00	8.00 - 23.00	8.00 - 22.00	9.00 - 20.00
Lakeside South							
Anstice Pharmacy, Madeley*∞	9.00 - 16.30 (closed 13.00 - 14.00 except during extended hours 9.00 - 20.00)	9.00 - 16.30 (closed 13.00 - 14.00 except during extended hours 9.00 - 20.00)	9.00 - 16.30 (closed 13.00 - 14.00 except during extended hours 9.00 - 20.00)	9.00 - 16.30 (closed 13.00 - 14.00 except during extended hours 9.00 - 20.00)	9.00 - 16.30 (closed 13.00 - 14.00 except during extended hours 9.00 - 20.00)	9.00 - 13.00 (extended 9.00 - 17.00)	closed
Aqueduct Pharmacy, Aqueduct*	9.00 - 18.00 (except 13.00 - 14.00)	9.00 - 18.00 (except 13.00 - 14.00)	9.00 - 18.00 (except 13.00 - 14.00)	9.00 - 18.00 (except 13.00 - 14.00)	9.00 - 18.00 (except 13.00 - 14.00)	closed	closed
Ironbridge pharmacy, Ironbridge*∞	9.00 - 17.30 (closed 12.00 - 14.00 except during extended hours 9.00 - 18.00)	9.00 - 18.00 (except 13.00 - 14.00)	9.00 - 18.00 (except 13.00 - 14.00)	9.00 - 18.00 (except 13.00 - 14.00)	9.00 - 18.00 (except 13.00 - 14.00)	closed (extended 9.00 - 13.00)	closed
Lawley Pharmacy, Lawley*∞	9.00 - 17.00 (extended 8.45 - 20.00)	9.00 - 17.00 (extended 8.45 - 19.30)	9.00 - 17.00 (extended 8.45 - 19.30)	9.00 - 17.00 (extended 8.45 - 19.30)	9.00 - 17.00 (extended 8.45 - 20.00)	closed (9.00 - 12.00)	closed
Lloyds Pharmacy, High St, Dawley	9.00 - 17.30 (closed 13.00 - 15.00 except	9.00 - 17.30 (closed 13.00 - 15.00 except	9.00 - 17.30 (closed 13.00 - 15.00 except	9.00 - 17.30 (closed 13.00 - 15.00 except	9.00 - 18.00 (closed 13.00 - 14.30 except	9.00 - 17.00 (closed 13.00 - 14.00 except	closed

	during extended hours)	during extended hours)	during extended hours)	during extended hours)	during extended hours 8.30 - 18.00)	during extended hours)	
L Rowlands, Sutton Hill	9.00 - 18.00 (except 12.45 - 13.45)	9.00 - 18.00 (except 12.45 - 13.45)	9.00 - 18.00 (except 12.45 - 13.45)	9.00 - 18.00 (except 12.45 - 13.45)	9.00 - 18.00 (except 12.45 - 13.45)	closed	closed
Woodside Pharmacy, Park Lane	9.00 - 17.00 (closed 12.45 - 13.15 except during extended hours 8.30 - 18.00)	9.00 - 17.00 (closed 12.45 - 13.15 except during extended hours 8.30 - 18.00)	9.00 - 17.00 (closed 12.45 - 13.15 except during extended hours 8.30 - 18.00)	9.00 - 17.00 (closed 12.45 - 13.15 except during extended hours 8.30 - 18.00)	9.00 - 17.00 (closed 12.45 - 13.15 except during extended hours 8.30 - 18.00)	9.00 - 11.00 (extended 9.00 - 12.00)	closed

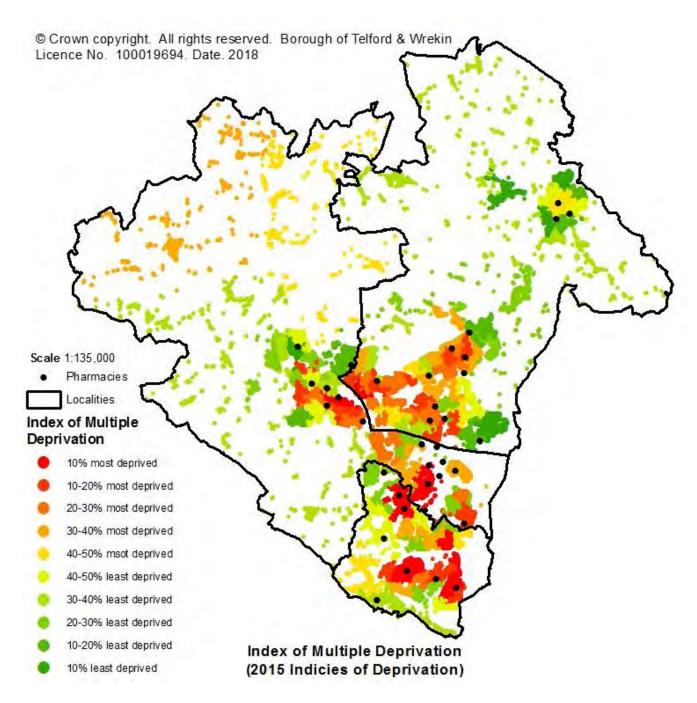
^{*}Pharmacy currently provides chlamydia treatment. ∞Pharmacy currently provides chlamydia screening.

Only provides chlamydia treatment:

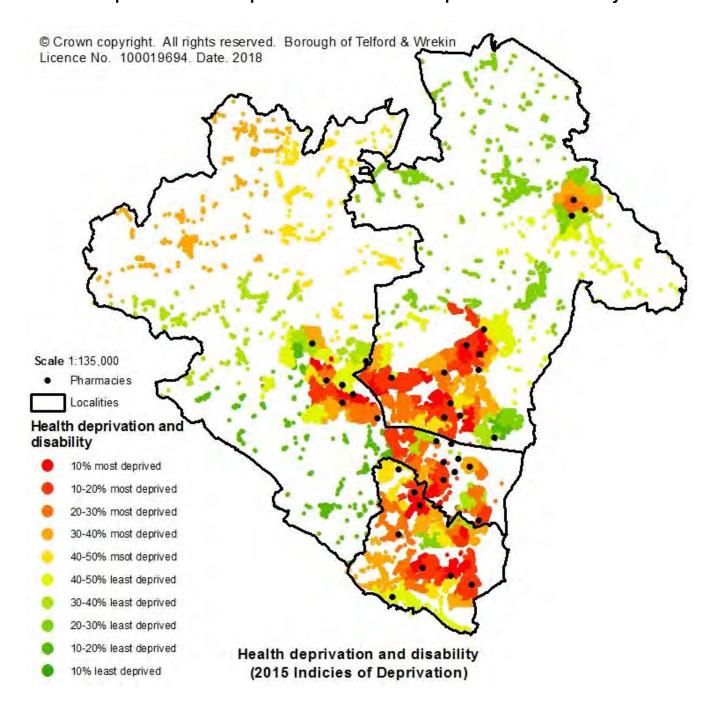
Superdrug	9.00 - 17.30 (closed 13.00 - 15.00 except during extended hours 8.30 - 17.00)	9.00 - 17.30 (closed 13.00 - 15.00 except during extended hours 8.30 - 17.00)	9.00 - 17.30 (closed 13.00 - 15.00 except during extended hours 8.30 - 17.00)	9.00 - 17.30 (closed 13.00 - 15.00 except during extended hours 8.30 - 17.00)	9.00 - 17.30 (closed 13.00 - 15.00 except during extended hours 8.30 - 17.00)	9.00 - 17.30 (closed 13.00 - 14.00 except during extended hours)	closed
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13.12. Appendix XII - Maps

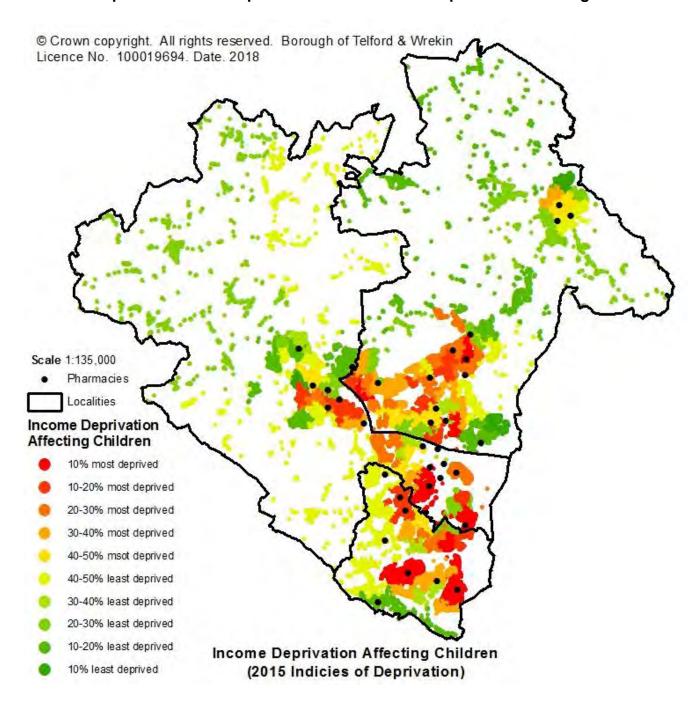
13.12.1. Map A: Indices of Multiple Deprivation 2015 - Overall



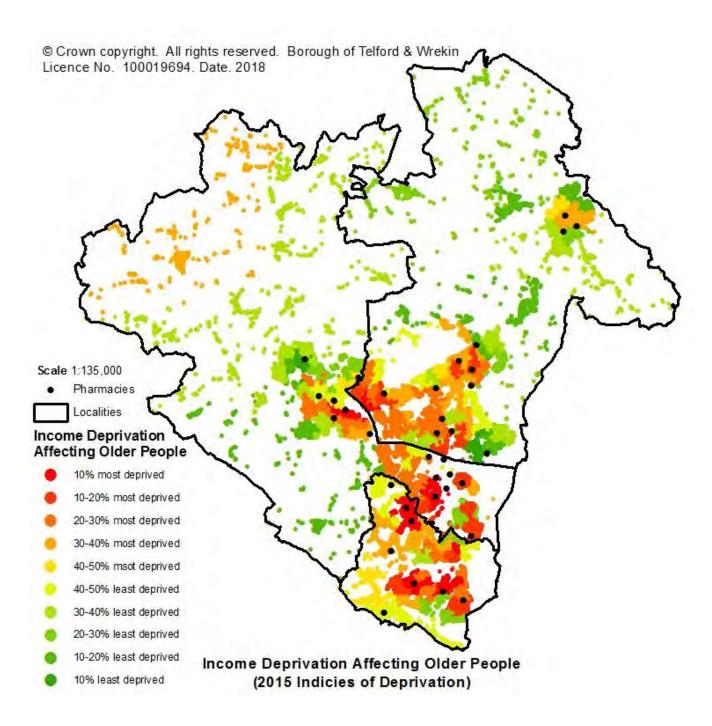
13.12.2. Map B: Indices of Deprivation 2015 - Health Deprivation and Disability



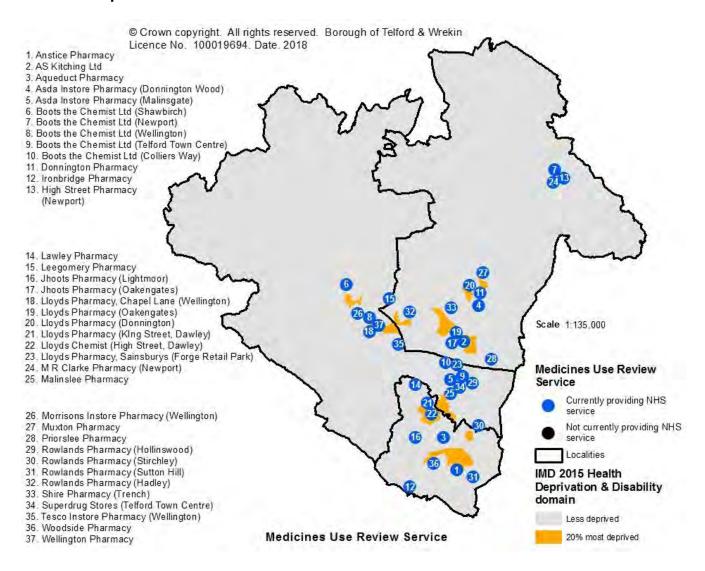
13.12.3. Map C: Indices of Deprivation 2015 -Income Deprivation Affecting Children



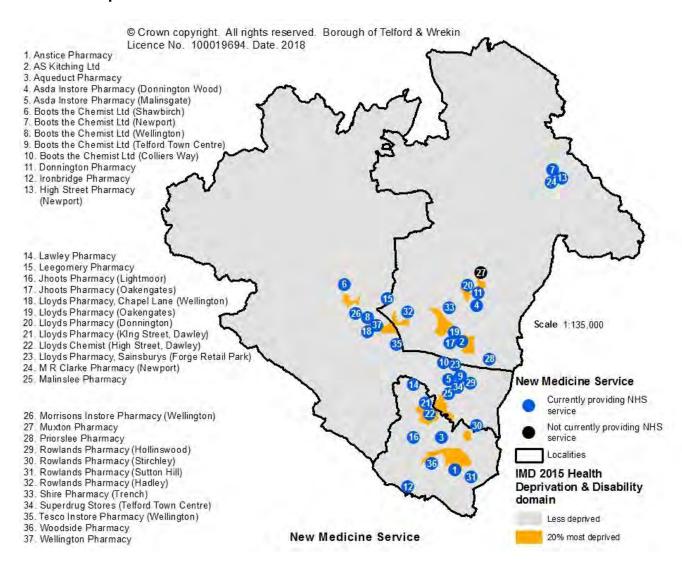
13.12.4. Map D: Indices of Deprivation 2015 –Income Deprivation Affecting Older People



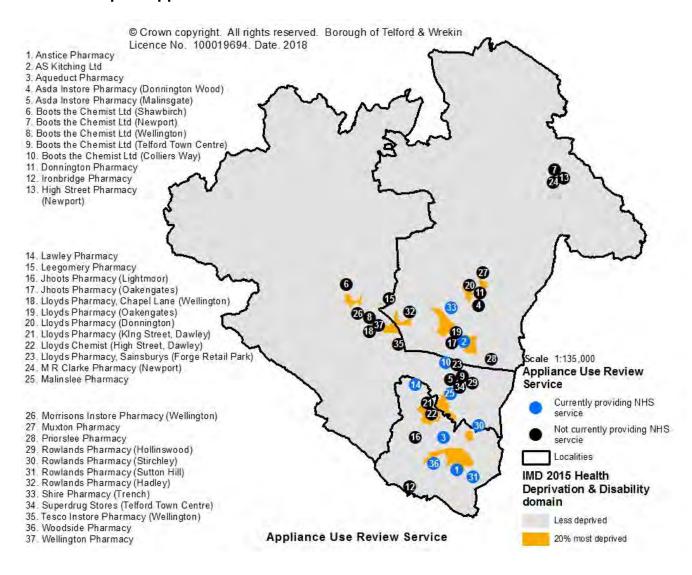
13.12.5. Map E: Medicines Use Review Service



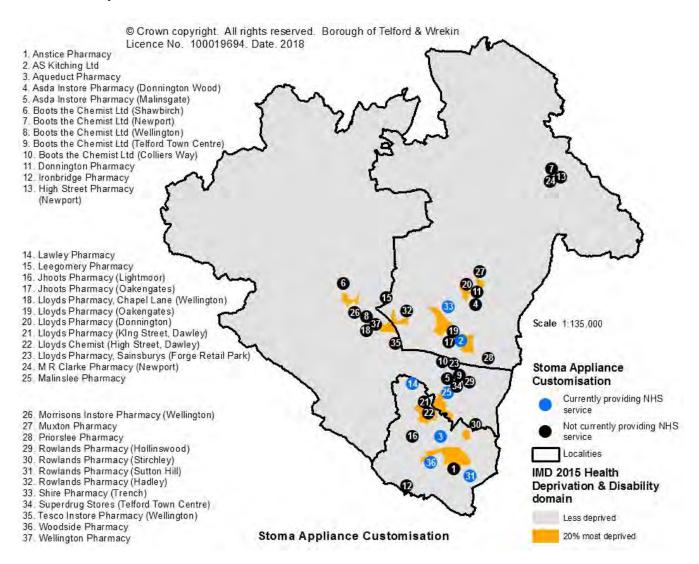
13.12.6. Map F: New Medicines Service



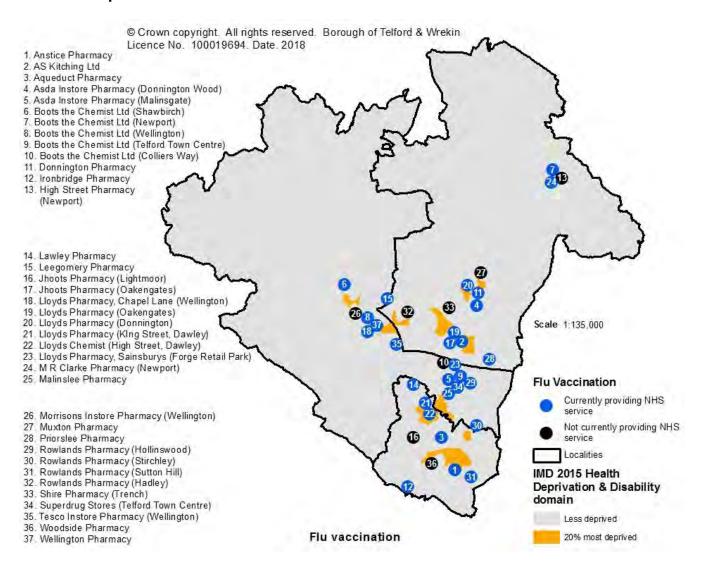
13.12.7. Map G: Appliance Use Review Service



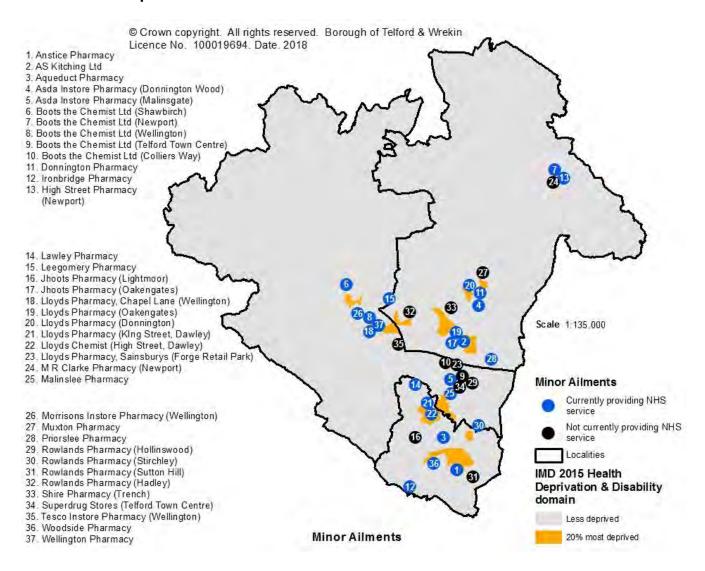
13.12.8. Map H: Stoma Customisation Service



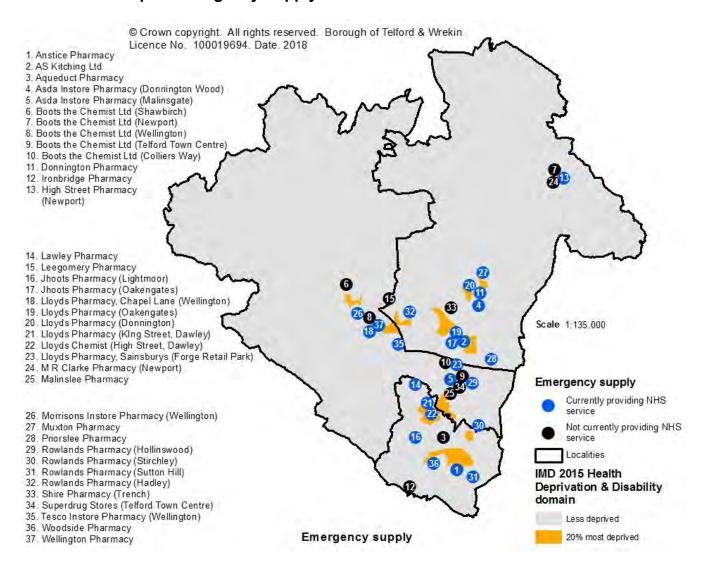
13.12.9. Map J: Adult Influenza Vaccination Service



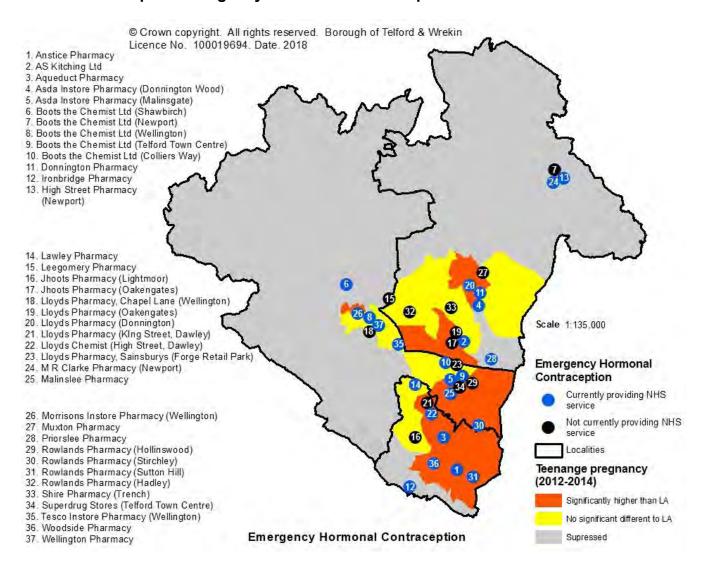
13.12.10. Map K: Common Ailments Service



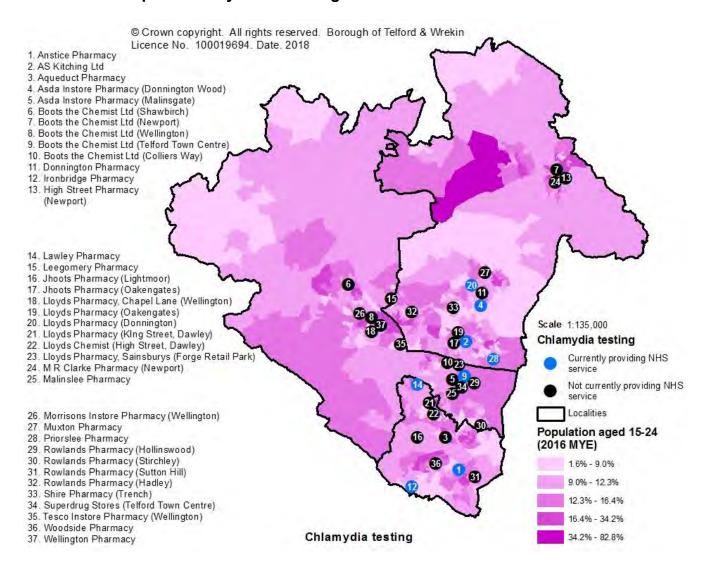
13.12.11. Map L: Emergency Supply Service



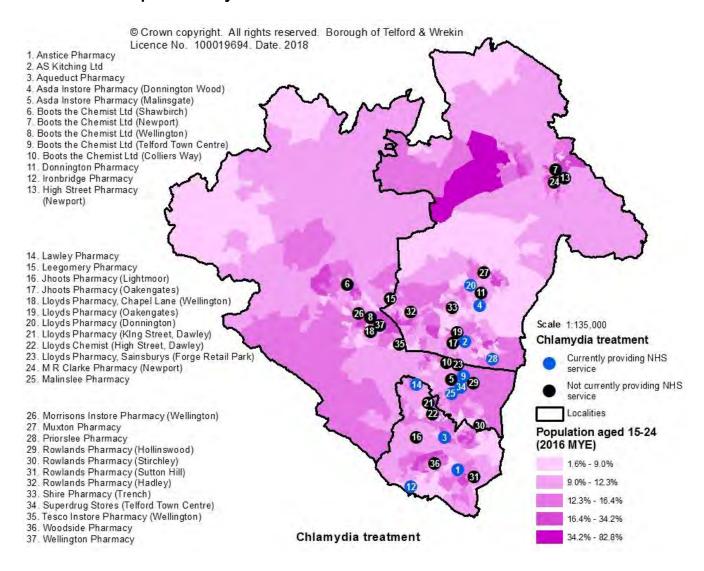
13.12.12. Map M: Emergency Hormonal Contraception Service



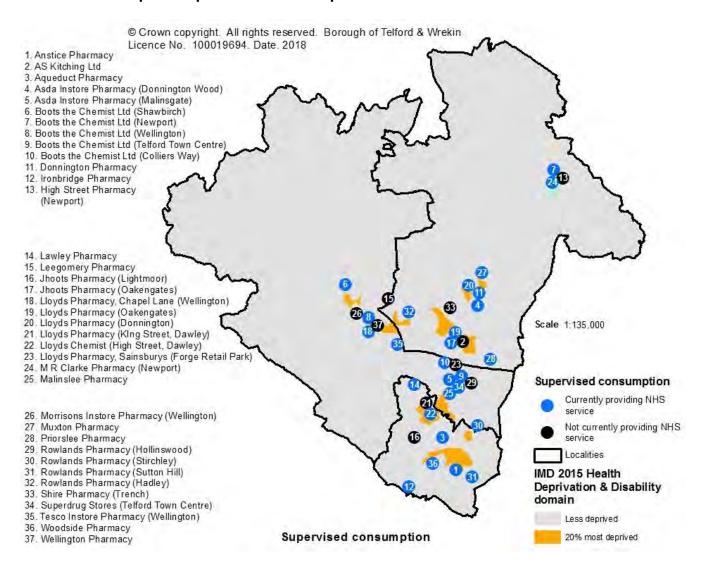
13.12.13. Map N: Chlamydia Screening Service



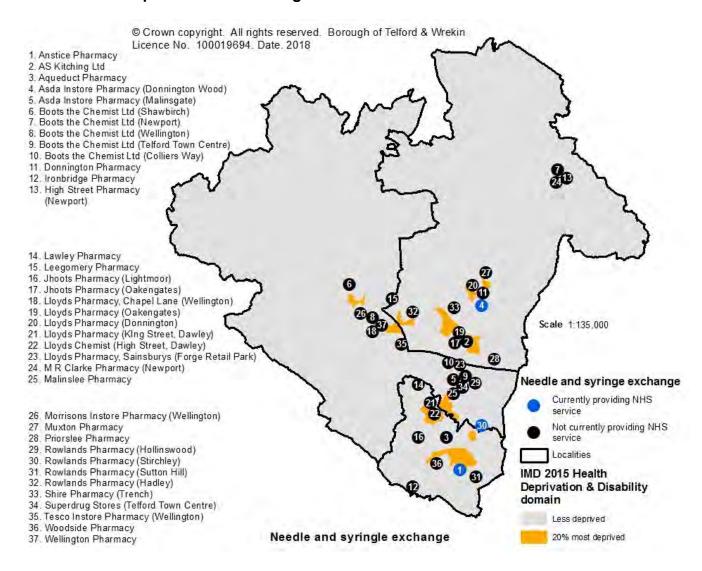
13.12.14. Map P: Chlamydia Treatment Service



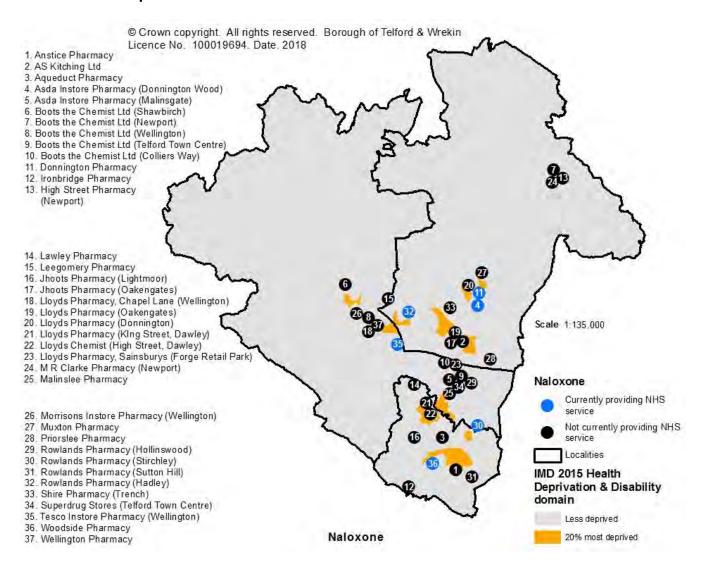
13.12.15. Map Q: Supervised Consumption Service



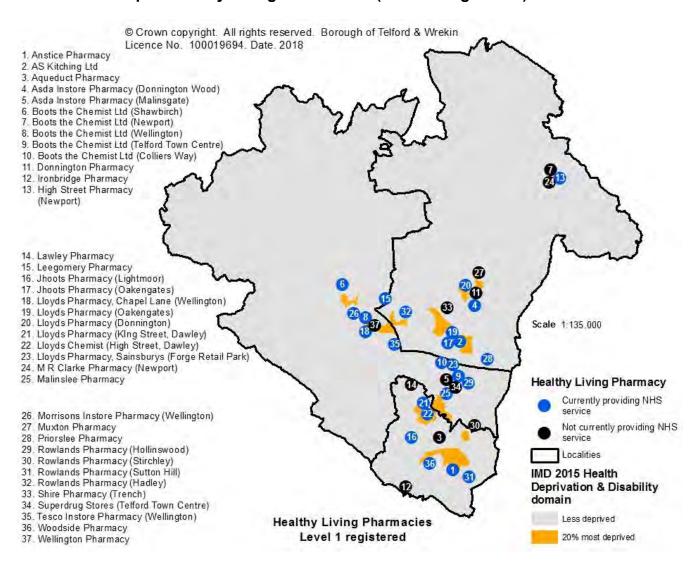
13.12.16. Map R: Needle Exchange Service



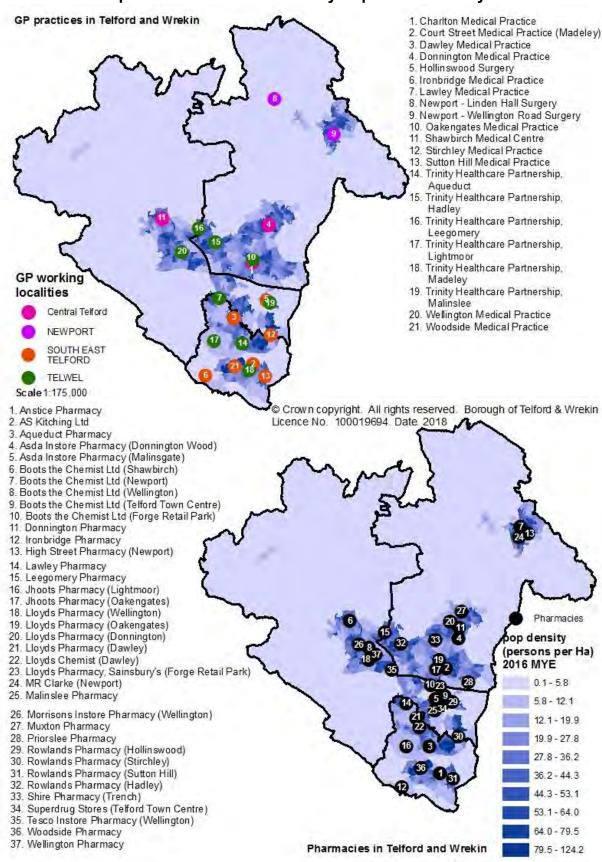
13.12.17. Map S: Naloxone Pilot Scheme



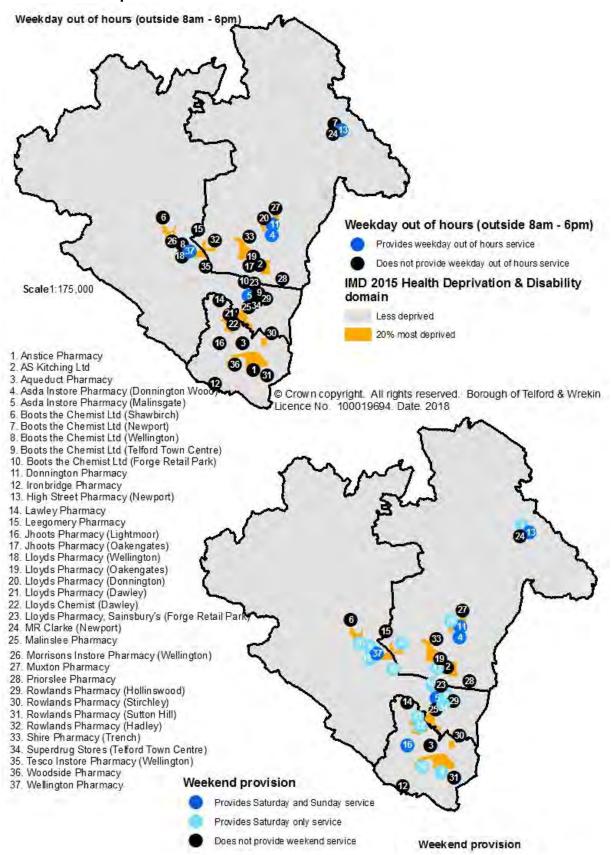
13.12.18. Map T: Healthy Living Pharmacies (Level 1 Registered)



13.12.19. Map U: GPs and Pharmacies by Population Density



13.12.20. Map V: Out of Hours and Weekend Provision



13.13. Appendix XIII -Telford & Wrekin Community Pharmacy Survey Report 2017

Key Headlines

- ➤ Due to the relatively small number of respondents (282) any results must be interpreted with caution.
- ➤ There was over representation from women in the survey and therefore men were under represented. Teenagers, young adults under 34 years and people in minority ethnic groups were under represented. Middle-aged people (aged 45-64 years), people with long-term conditions and people who care for another person with physical or mental conditions were over represented (though this is likely to represent the most frequent users of pharmacies).
- ➤ Of 236 who specified the pharmacy they "usually" visit, 16.1% identified Lawley Pharmacy. This was significantly higher than any other pharmacy (P<0.05) and hence results may be biased towards this pharmacy.
- Almost all respondents (98.9% of 273 respondents) were able to find a pharmacy that fulfilled their preferences of where they would like to access a pharmacy. Almost all (95.3%) were less than 20 minutes away from their pharmacy.
- Fewer respondents agreed with the statement "I ask my pharmacist for health advice" (66.4%), suggesting either that this is not a major reason for accessing pharmacies either because they are unaware of this service (though the majority were aware they could seek advice on minor ailments, long-term conditions and lifestyle factors such as smoking cessation) or they prefer to seek advice elsewhere.
- ➤ The proportion of respondents visiting a pharmacy to buy over the counter medicines has increased from 10.9% in the previous PNA user survey to 68.5% making it the second most common reason to visit a pharmacy. Similarly, the proportion who visit pharmacies to obtain advice about their medication increased from 3.65% in the last PNA user survey to 28.3%.
- Fewer than five respondents used pharmacies for stop smoking advice and impetigo treatment suggesting that these services are either not publicised well or not available in many pharmacies
- ➤ 66% used the prescription collection service (prescription sent directly to pharmacy) suggesting that this is a commonly used service
- ➤ The three treatment services (for urinary tract infection, chlamydia and impetigo) were the services users were least aware about, perhaps as these are newer additions to services and only available in certain pharmacies.

Survey Methodology

A survey of public views on community pharmacy in Telford & Wrekin was undertaken between 1st September 2017 and 30th September 2017. The survey consisted of 12 questions

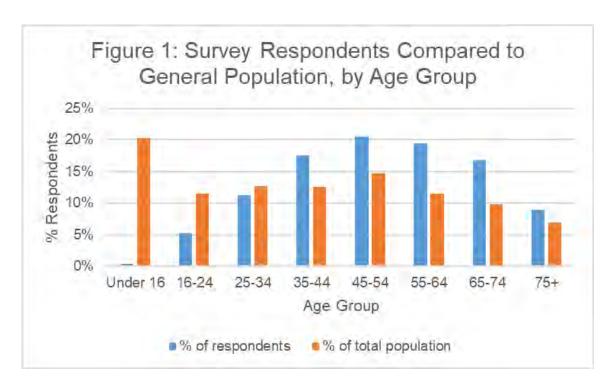
covering themes such as awareness of and access to services and levels of satisfaction. Standard socio-demographic questions were included. (See questionnaire attached)

The survey was publicised through the NHS Telford and Wrekin CCG website and also to all Telford & Wrekin Council staff through the intranet. Paper copies of the survey were distributed to community pharmacies for completion. The CCG also distributed the survey to 30 different community groups including Walking for Health, Take 5 Café, Taste not Waste, Telford Mind, Telford Twin & More, Turnpike Court Resident Living and Wednesday Art Group.

There were a total of 282 survey responses, which represents 0.2% of the total borough population. There were a total of 282 survey responses, which represents 0.2% of the total borough population. This was a decrease from the previous PNA survey where there were 417 responses at the end of the consultation but respondents broadly represented the most frequent users of pharmacy services.

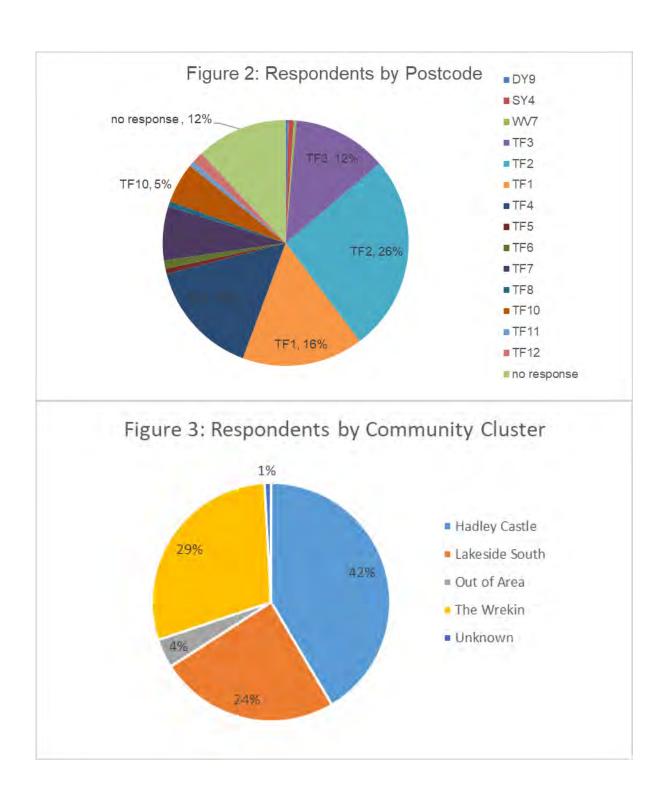
Survey Respondents Representation

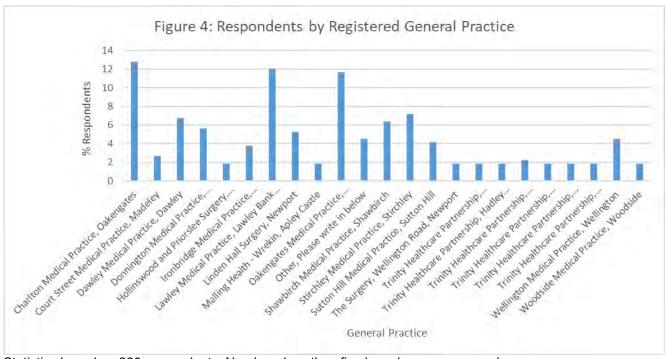
- ➤ **Gender split:** 71.2% of survey respondents were female and 28.7% were male (92.5% of all respondents stated their gender). In terms of comparison with the overall population is 50.3% are female and 49.7% male (ONS 2016 Mid-Year Estimates). Therefore women are over-represented in the survey and men are under-presented.
- ➤ **Age profile:** the age profile of survey respondents compared to the overall population is compared in Figure 1 (95.0% of respondents stated their age group). The most common age groups of survey respondents were those middle aged i.e. 45-54 years (20.5%) and 55-64 years (19.4%). These age groups were over represented compared to the overall population (ONS 2016 Mid-Year Estimates). Only 5.6% of respondents were aged under 25 and therefore young people were especially underrepresented in the survey.
- ➤ Ethnicity: 97.5% of respondents stated their ethnicity. Only 13 of 282 respondents were not English / White / Scottish / Welsh / Northern Irish / British. In comparison with the general population, those in black and minority ethnicity (BME) groups made up 4.9% of respondents, compared to 10.5% in the Borough overall (ONS 2011 Census).
- Longstanding illness, disability or infirmity: 54.3% of survey respondents stated they had a longstanding illness, disability or infirmity, compared to 18.2% in the overall population (ONS 2011 Census). Therefore people with a long-standing illness or disability were over represented in the survey.
- ➤ Carers: 40.9% of survey respondents help or support others with physical or mental health conditions compared to 10.8% of the overall population who provide unpaid care (ONS 2011 Census). Therefore carers were also overrepresented in the survey.



Geographical Information

Respondents were fairly equally distributed geographically, with TF2 being the most common postcode area (26% respondents, see figure 2) and distribution by locality roughly equaling the population distribution of residents (Hadley Castle 43.1% residents, The Wrekin 32.3%, Lakeside South 24.7%, ONS 2015 Mid-Year Estimates for Output Areas). Nine respondents were from out of area, reflecting usage of pharmacies by residents in surrounding areas (see figure 3). Charlton Medical Practice (Oakengates), Lawley Medical Practice and Oakengates Medical Practice were the most common GP practices that respondents were registered with (see figure 4).





Statistics based on 266 respondents. Numbers less than five have been suppressed.

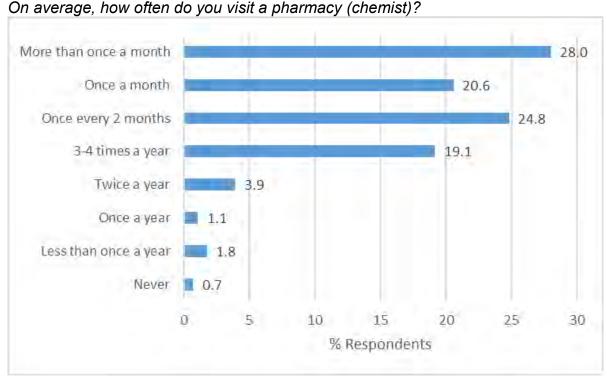
Overall Survey Analysis

The survey can be split into four main themes: Frequency of visits, Access, Reason for visits and services used and Awareness of services. Participants were also asked about their interest in new services and given the opportunity to add any additional comments.

Frequency of Visits

In this section respondents were asked about how often they visit a pharmacy and whether they have a "usual" pharmacy that they visit.

The most common attendance rate category was "more than once a month" (28.0%). 24.8% visited a pharmacy around once every 2 months and of those filling in the questionnaire only 0.7% never visited a pharmacy. Of 280 respondents, 85.4% had a "usual" pharmacy and of 236 who specified the pharmacy, 16.1% identified Lawley Pharmacy. This was significantly higher than any other pharmacy (P<0.05).



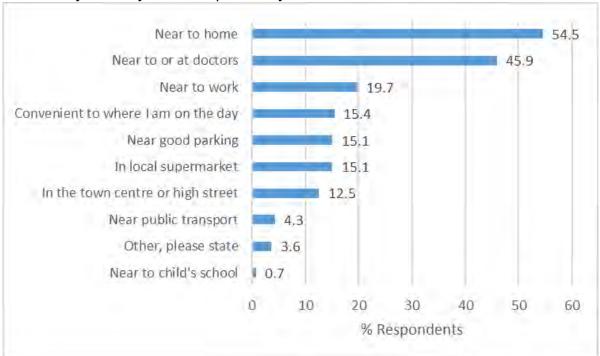
Statistics based on 282 respondents

Access

In this section respondents were asked where they visit, what was important to them about the location of the pharmacy, whether they were able to find a pharmacy that fulfilled these preferences, how they travelled to the pharmacy, how long their journey took and opening times.

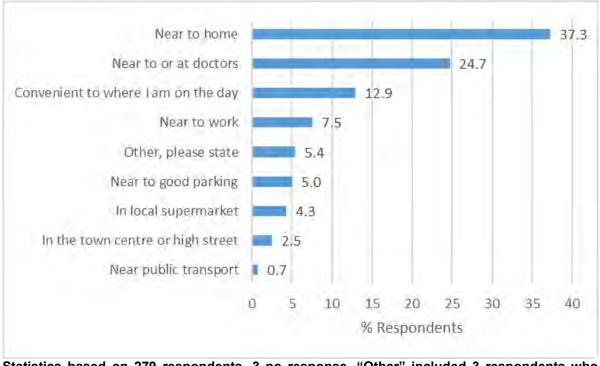
The majority of respondents visited a pharmacy close to home (54.5%) and 45.9% visited a pharmacy near to the doctors. However the importance they placed on these factors was less polarised, with only 37.3% preferring a pharmacy close to home and 24.7% preferring a pharmacy near to the doctors. No respondent placed importance on having a pharmacy near to their child's school. Almost all respondents (98.9% of 273 respondents) were able to find a pharmacy that fulfilled these preferences.

Where do you visit your usual pharmacy?



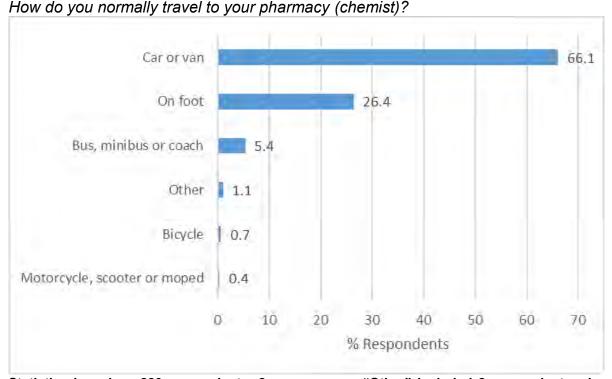
Statistics based on 279 respondents. 3 no response, 1 responded "other" but did not state reason. "Other" included 4 respondents who attended pharmacies with late and weekend opening times, 3 who visited pharmacies where they liked the staff and 2 where they were able to get the medication they required.

When choosing a pharmacy (chemist) which of these is most important to you?



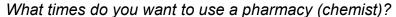
Statistics based on 279 respondents. 3 no response. "Other" included 3 respondents who preferred pharmacies with late and weekend opening times, 9 who preferred pharmacies where they liked the staff and 1 where they were able to get the medication they required.

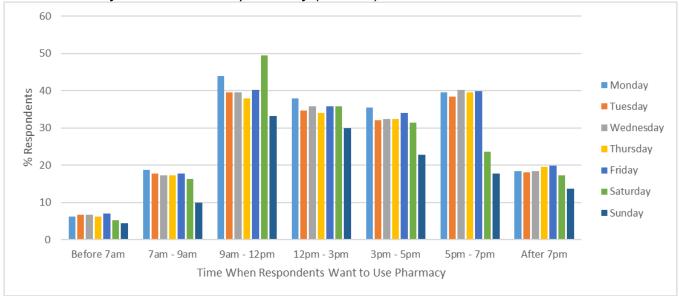
The majority travelled by car or van to their pharmacy (66.1%). Only 26.4% travelled on foot despite the majority (70.1%) being less than 10 minutes away from their pharmacy. 25.2% were 10-20 minutes away from their pharmacy and a very small percentage were more than 20 minutes away (3.6%) or more than 30 minutes away (1.1%, though two of these three respondents had postcodes within 12 minutes' walk of their chosen pharmacy).



Statistics based on 280 respondents. 2 no response. "Other" included 2 respondents who travelled by wheelchair.

The most popular times for wanting to use a pharmacy during the work week was 9am - 12pm and 5 - 7pm, which may suggest that many of the respondents either do not work (which would indicate a significant bias due to the demographics of respondents) or are able to go during their lunch-break. On weekends, the most popular time was 9am - 12pm. The majority (77.1%) stated that their pharmacy was open at the times that they wanted. Only 35 respondents stated that their pharmacy was not open when they wanted and due to small numbers we are unable to draw any conclusions about which pharmacies this applied to.





Statistics based on 271 respondents. 11 no response.

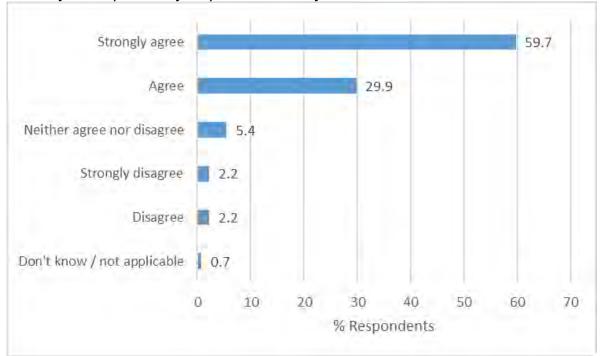
The

majority agreed with the statement that they could find a pharmacy when they needed one (88.3%), during the evening (71.6%) and during the weekend (75.0%). Almost all agreed with the statement that they could find a pharmacy close to where they needed it (91.6%, 251 of 274 respondents).

Other Factors Contributing to Access

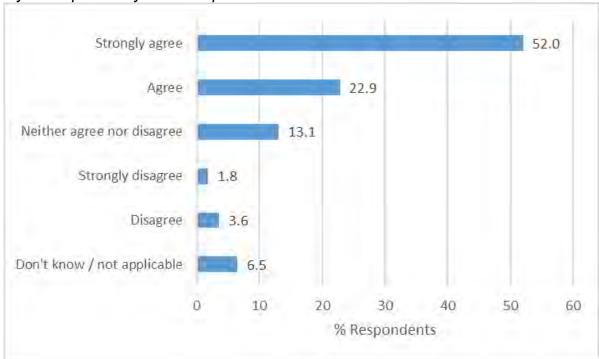
The majority of respondents agreed with the statement, "I find my usual pharmacy helpful and friendly" (89.6%) which shows that respondents are usually satisfied with the professional manner they receive from pharmacists and that this is not a significant barrier to accessing pharmacy services. However, fewer respondents agreed with the statements, "My usual pharmacy offers helpful advice on NHS services" (74.9%) and "I ask my pharmacist for health advice" (66.4%), suggesting either that these are not major reasons for accessing pharmacies or that people who want advice do not access pharmacies (and perhaps attend their GP surgery instead).

I find my usual pharmacy helpful and friendly.

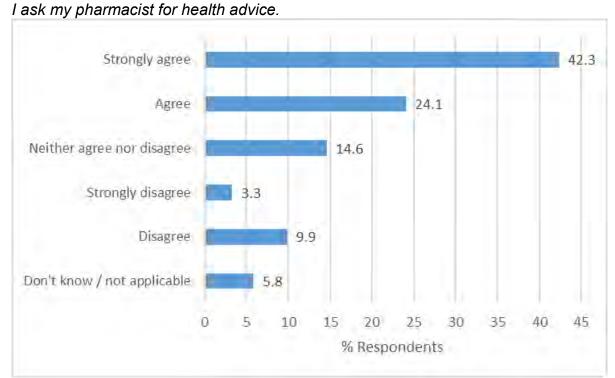


Statistics based on 278 respondents. 4 no response.

My usual pharmacy offers helpful advice on NHS services.



Statistics based on 275 respondents. 7 no response.

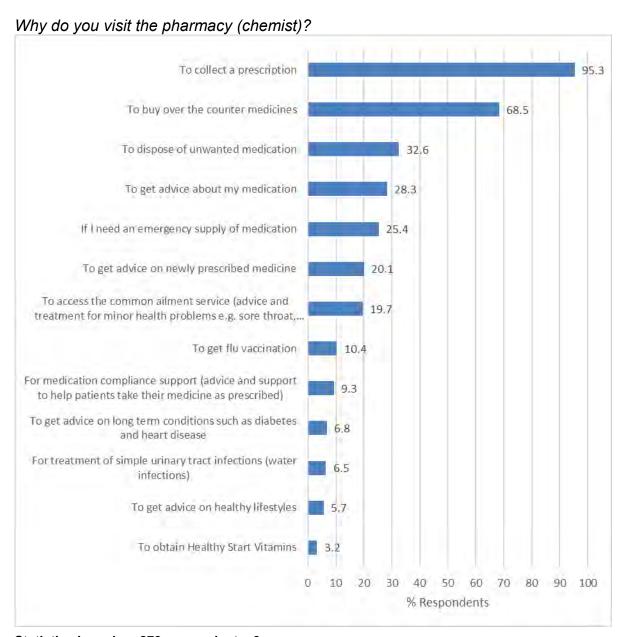


Statistics based on 274 respondents. 8 no response.

Reason for Visits and Services Used

In this section respondents were asked about their reason for visiting the pharmacy and the prescription delivery/collection services they used.

The main reason for using the pharmacy was to collect prescriptions (95.3%) and to buy over the counter medicines (68.5%). Interestingly, only 10.9% chose this reason in the previous PNA user survey, suggesting this has become a more common use of pharmacies. Similarly, 28.3% said they use pharmacies to get advice about their medication, which is a large increase from the 3.65% respondents in the previous PNA user survey. 10.4% said they use pharmacies to get their flu vaccination, and as a large proportion of respondents reported that they care for another person this suggests that many of these respondents who are eligible for flu vaccination through the NHS are not obtaining it through pharmacies. Fewer than five respondents reported that they use pharmacy services for emergency contraception, free condoms (if eligible) or chlamydia screening and treatment. This is likely to be significantly biased by the age range of the majority of respondents (only 45 respondents were under age 34). Similarly, fewer than five respondents used pharmacies for needle exchange and substance misuse services but it is likely that people accessing these services are underrepresented in this survey (though compared to the overall population numbers will be small). Fewer than five respondents used pharmacies for stop smoking advice and impetigo treatment suggesting that these services are either not publicised well or not available in many pharmacies.



Statistics based on 279 respondents. 3 no response.

Out of 274 respondents, 66% used the prescription collection service (prescription sent directly to pharmacy) suggesting that this is a commonly used service. However, only 9.5% used a prescription delivery service for housebound patients (prescription delivered to residence) suggesting that this is either not required or not offered. 7% used both services and 32% used neither service.

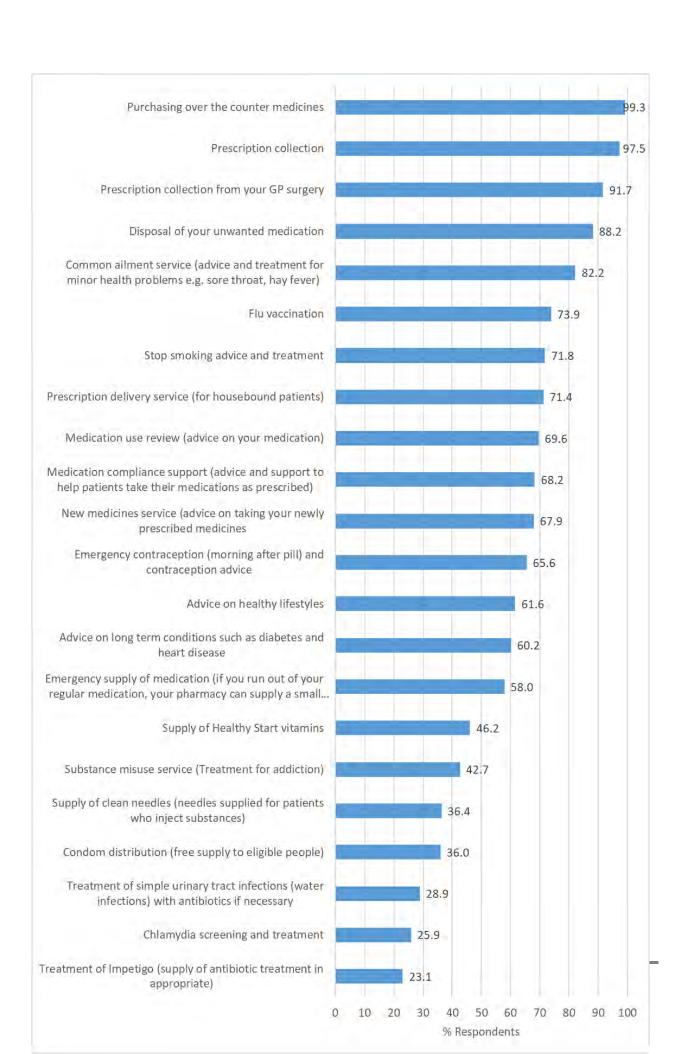
Awareness of Services

In this section respondents were asked about their awareness of extra services that may be available at their pharmacy. 86-96% of respondents answered these questions.

As expected, purchasing over the counter medication and prescription collection (delivery of prescription from GP to pharmacy) were the services that were most commonly known about.

However seven services were not known about by the majority: Supply of Healthy Start Vitamins (46.2% aware), Substance misuse service (Treatment for addiction)(42.7% aware), Supply of clean needles (needles supplied for patients who inject substances)(36.4% aware), Condom distribution (free supply for eligible people)(36.0% aware), Treatment of simple urinary tract infections (water infections) with antibiotics if necessary (28.9% aware), Chlamydia screening and treatment (25.9% aware), Treatment of impetigo (supply of antibiotic treatment if appropriate)(23.1% aware). Again, this is probably reflective of the older demographic of the survey respondents (as only 45 respondents were under age 34) but it is interesting that the three treatment services were the services users were least aware about, perhaps as these are newer additions to services.

Prior to this survey, were you aware that the following services could be available at the pharmacy (chemist)? (see next page)

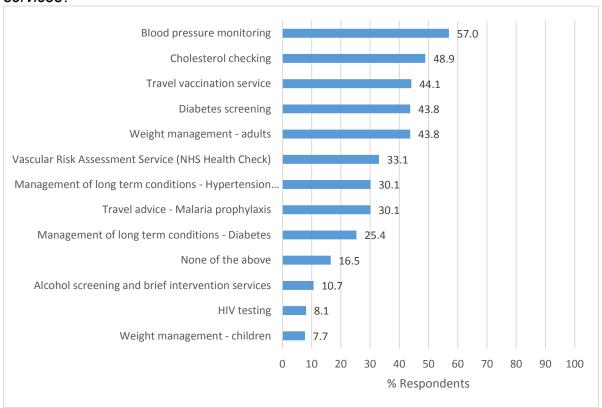


Interest in New Services and Other Comments

Question 11 asked respondents if they would be interested in any of a list of services. 272 responded to this question, with 16.5% choosing "none of the above". The services with the most interest were blood pressure monitoring (57.0%) and cholesterol checking (48.9%), probably reflecting the older demographic of the respondents. Weight management for children was the service with the least interest (7.7%) but we do not know how many of the respondents actually had children.

Question 12, allowed respondents to add any other comments about community pharmacy services. Overall, 87 respondents commented though 7 of these stated they had no further comments to add. There were 51 positive comments and 32 negative comments (three contained positive and negative comments). There were many positive comments related to the friendliness of staff at pharmacies and how helpful staff were especially in relation to advice. Several commented that staff are able to help them get their medications quickly in emergencies. Although most were happy with their pharmacy, a few commented that queues are long and they often have to wait. A few also commented that the medication they need is not often stocked and they have to wait several days for it to arrive.

If your pharmacy were to provide them, would you be interested in any of the following services?



Statistics based on 272 respondents. 10 no response.

13.14. Appendix XIII –Consultation Received During the 60 Day Consultation Period

Comments from Steering Group Members

- Should there be a definition of core hours and supplementary hours in the document? (Local Pharmaceutical Committee)
- ➤ The following should be added to section 6.4 Recommendations: Enhanced Services: Local commissioners need to encourage all community pharmacy providers to participate in the Pharmacy First UTI/ Impetigo service, and increase the number of consultations currently undertaken. Local commissioners also need to work alongside providers and patient groups to increase awareness and referral into this service. Consideration should also be given to the further development of clinically focused services that can be delivered through accredited community pharmacies, improving access for patients.
- ➤ The following should be added to section 11.2 Aspirational Services: Community pharmacies do and are ideally placed to support patient self-care, diagnosis of minor ailments and monitoring and review of long-term conditions. Pharmacist's clinical training enables them to use their skills to reduce the burden on general practice and out of hours' services, improving accessibility for patients.

Comments from Pharmacies

- Page 48 refers to Madeley Pharmacy this should read Anstice as per the rest of the report.
- ➤ Lakeside South states services available 9am 6pm this is incorrect. Anstice Pharmacy is open until 8pm Monday Friday. This also impacts on the overview.
- ➤ Have just checked the data with respect to our Rowlands branch in Hadley. The number of HLP champions is incorrect. We have 1 FTE HLP champion within the branch.
- ➤ Woodside address is given as Wensley Green. It's been Park Lane Centre for 12 years. I also believe that the opening hours for Lawley Pharmacy were incorrect.
- ➤ I was just wondering if there was a more accessible version of the Pharmaceutical Needs Assessment that our service users who might be able to access at all, to ensure that they are able to respond during the consultation period?
- Our total hours Monday to Friday are right 9 to 6 with no gaps and then 9 til 1 on a Saturday, sorry to bother you but does it matter that the middle of the day and Saturdays are on in blue as supplementary? (Priorslee Pharmacy)
- ➤ I have reviewed the PNA for Telford and Wrekin and have noted that Priorslee Pharmacy is showing as NOT providing NHS Flu in 2017-18 (appendix IX) which they are. Please can this be amended?
- However I am also a little confused as to why this is listed as an Enhanced Service; -I thought it was an Advanced Service in England?
- ➤ Just a few observations our opening hours are incorrect our core hours are 8am-9pm Monday to Saturday only closing for lunch at 2pm on Saturday. Sunday we are open 10-4pm and we offer all services within these core hours not just 9-5pm. HLP we have one trained champion.

- We are now supplying the Naloxone injection to those patients / clients who we feel may be at risk. All staff have completed training (Lawley Pharmacy)
- ▶ I've had a look at the hours that the LA used for contractors but unfortunately it is a little dated. My understanding of the consultation period and the PNA was to update the current provision of services. So our hours should read Monday, Tuesday and Thursday & Friday till 8pm Wednesday till 7.30pm. Can our hours be adjusted accordingly? (Lawley Pharmacy)
- South Lakeside opening hour summary stats pharmacies all close at 6pm on a weekday, when we are actually open until 8pm. On detailed breakdown our hours are listed correctly, but when referencing that we have opened until 8pm weekdays and till 5pm on a Saturday since 2016, they call us Madeley Pharmacy whereas we are known as Anstice Pharmacy throughout the rest of the report. We are down that we will soon be a HLP, which isn't the case, we are a HLP level 1 now. (Anstice Pharmacy)
- ➤ I have just looked through the Draft PNA and have noticed an inaccuracy on page 46 in section 10.3.2. Saturday Pharmaceutical Service Provision. This shows our Saturday opening hours as 7am to 9pm which is incorrect, we currently open from 7am to 10pm. The opening hours appear to be correct in the main opening hours section 13.8. Appendix VIII –Community Pharmacy Opening Times. (Asda Donnington)
- > As Inclusion is being renamed STARS should this be changed in the document?

Telephone comments from care agency

"Waiting lists for compliance aids – this is becoming a problem" (Response from carer).

Inclusion

This is a very thorough and comprehensive document. My only comment from a SMS perspective is the coverage of SC (supervised consumption). As more and more people move to houses of multiple occupancy in South Telford we have less availability for SC. At the moment the pharmacists are full, even Aqueduct. We have no more patients in treatment and it is unlikely numbers will be going up, however the distribution of them due to available accommodation has changed, therefore putting a lot more pressure on the South of Telford. I have arranged for Woodside to increase their numbers but we still do not have enough provision in those areas. Also when reading the specs it talks about the pharmacists being competent. Is that something done via yourselves?

Telford Patients First

➤ Looked through the draft and it seems ok apart from page 96 It's got the numbers mixed up as per Malinslee (25)

Shropshire Local Pharmaceutical Committee

- Firstly, we should like to deal with any minor inaccuracies to ensure proper representation of contractors and services within the PNA. There are three corrections required:
- > Rowlands Pharmacy, Hadley has HLP status with 1 FTE health champion
- Woodside Pharmacy is at the address of Park Land Centre, Woodside and not as stated;

- Lawley Pharmacy's opening hours are reported incorrectly and are as follows -8.45am-8pm Monday, Tuesday, Friday; 8.45am-7.30pm Wednesday, Thursday and 9am 12noon Saturday; Lakeside South states services available 9am 6pm this is incorrect it is open until 8pm. Anstice Pharmacy is open until 8pm Monday-Friday, it is called Madelely Pharmacy also in the report but should be known as Anstice throughout. Please also note that Anstice is now a HLP now and not working towards this anymore.
- > 11.1 Recommendations: We agree that there is adequate provision of pharmaceutical services in Telford and Wrekin, New contract applications can only be considered under the Regulations if there are significant changes in the health needs and therefore pharmaceutical needs of a population. Despite the development of Sustainability and Transformation Plans and those of Future Fit, contractors cannot be granted due to only anticipated future needs which may not transpire.
- ➤ 11.2 Aspirational Services: Community pharmacies do and are ideally placed to support patient self-care, diagnosis of minor ailments and monitoring and review of long term conditions. Pharmacists' clinical training enables them to use their skills to reduce the burden on general practice and out of ours' services. The Local Pharmaceutical Committee supports the utilisation of NHS resources to increase access to pharmaceutical services, and throughout workforce training, to widen the access and range on offer. The LPC has instigated meetings between SaTH

Comments from Healthwatch

Healthwatch Telford and Wrekin regret that we were not more closely involved in the original consultation and hope that in future we can work together to engage more people in the Pharmaceutical Needs Assessment at these early stages. However, we summarised the PNA documents for the final consultation and posted these on our website. They were also shared through social media and across our network – we asked people to share their feedback directly with Hitesh.

We also receive feedback continuously and have the opportunity to discuss various issues or insights with groups that we engage with. Our Feedback Centre, available through our website, provides the public with a place to provide feedback about their local services and see what others have to say. With regards pharmacies this feedback is generally very positive. Our comments here reflect not only this feedback but also those collected through direct discussions with local people in Telford and Wrekin.

Medicines Use Reviews

Feedback appears to indicate that many patients are unaware of this option, particularly those with mental health or long term conditions. Some patients waiting to access GP appointments might be better served by their pharmacist, who can offer them advice about the medicines that they are on. Both pharmacists and GP surgery receptionists should encourage those who are unsure about their medication to access this advice via their local pharmacy rather than their GP – it is advisable to consider why they might want to discuss it with their GP, however.

Awareness of Services

We would like to better understand how Telford & Wrekin are working towards increasing the local population's awareness of the types of services available through their pharmacies.

Prescription Ordering Department Service Feedback

The population of Telford & Wrekin have shared a significant number of negative stories about this service. Understanding that it is new and may be experiencing teething problems it is still important to recognise that many of its users are unhappy with the way the service is being delivered. The two most common comments are:

- Unanswered phones.
- Problems with staff attitude including the way they are asked about medication use and feeling they are insensitive to their needs.

We understand that the phone lines are being upgraded and that this should solve the former issue. We would also ask that the service is explained in more detail to users along with alternatives such as electronic prescriptions. Each user should feel that they are being questioned about their medication use to ensure that it best suits them rather than feeling that it is a cost-cutting exercise.

Newport Provision

We feel that as Newport is the location of a university that sexual health services should be better accessible, especially during out of hours and weekends. Whilst the university does have some limited services such as access to condoms we do not feel that this is sufficient as they may not be easily accessible during holidays.

Unmet Needs

There are some unmet needs that we feel must be made clearer within the PNA. The absence of health services in certain rural areas suggests that for some of the population it is much more difficult to access these. The inclusion of 'aspirational' services also indicates that there are services that could potentially be available. In particular we would draw attention to the high number of respondents within the survey (57% or 155/272) who indicated that they would be interested in pharmacies providing blood pressure monitoring. We have received feedback previously from people who are unhappy with being placed on a waiting list for a blood pressure monitor from their doctors and do not want to pay to purchase one. This seems less aspirational and more rational.

Needle Exchange

We would like to draw attention to the fact that although supervised consumption is available in Newport there is no needle exchange programme. As harm reduction is a key objective of the Telford & Wrekin Drug and Alcohol Strategy we feel that there should be a pharmacy where this is available that can serve the local community in Newport.

Impact of STP and Future Fit

Local services at community, primary and secondary care level will potentially face an overhaul of provision before the next PNA. We feel that this is an opportunity to see how the 'aspirational services' listed can be considered as part of the new delivery model. It is also important to continue to monitor and improve people's awareness of the services provided at pharmacy level. This might involve more targeted campaigns at certain times of the year or linking directly to local GP services. We suggest that going forward services at every level endeavour to work together to better serve the local population.

Digital/Online/Internet Pharmacies

More and more services are available through online means. The local population of Telford and Wrekin are able to access certain of these services via internet pharmacies including

sexual health services, diabetes, migraine, asthma, travel, and more. They can also get via online pharmacies, with some even offering consultation and treatment. These types of services are convenient for patients but are not included in the PNA.

Accessibility of the PNA

The report totalled 135 pages and dealt with complex datasets. We would advise that the PNA is made more accessible through easy read versions and different formats so as to reach a wider proportion of the population.

What Next?

Healthwatch Telford and Wrekin plan to engage with pharmacies within the period 2018/19 to increase feedback from users. We also aim to engage with those who live in more rural areas to ensure that their health and social care needs are being met. This will involve working with local parish councils and businesses. We hope that our comments are well received and that we can work together to ensure that pharmacy provision in Telford & Wrekin is not just acceptable but best for all areas of the community.