

Gateshead Pharmaceutical Needs Assessment 2018 - Draft for Consultation

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Executive Summary

Introduction

The purpose of this document is twofold:

- To determine if there are sufficient community pharmacies to meet the needs of the population of Gateshead; and
- To determine other services which could be delivered by community pharmacies to meet the identified health needs of the population.

The Health and Social Care Act 2012 transferred the responsibility for developing and updating Pharmacy Needs Assessments (PNA) to Health and Wellbeing Boards (HWB). A PNA describes the population's health needs and the pharmaceutical services which exist, or could be commissioned to address these. It is also used to identify any gaps in pharmaceutical services which could be filled by new pharmacies. The initial PNA was produced and implemented on 1 April 2015 with the requirement that each HWB must publish a statement of its revised assessment within 3 years of publication.

Through the Joint Strategic Health Needs Assessment (JSNA), the Council and the Clinical Commissioning Group (CCG) will identify the population's health needs. They will each commission services from pharmacies to address these needs. NHS England will use the PNA to decide if applications for new pharmacies are necessary to meet such needs or to provide commissioned services.

Pharmaceutical Needs Assessment process

Population health needs across Gateshead were identified in the JSNA and Gateshead Clinical Commissioning Group's Five Year Plan.

Health needs in Gateshead which can be addressed by pharmacies were considered in more detail. This included those needs that can be met through the core pharmacy contract with NHS England for services such as dispensing prescriptions, treatment of minor ailments and medicines advice. Other health needs that can be met through commissioned services, where community pharmacies might be one of a range of providers, were also considered.

The formal consultation on the draft PNA is planned to run from 23rd October to 22nd December 2017 in line with the guidance on developing PNAs and section 242 of the NHS Act 2006. A report on the consultation will be produced and included in the final PNA document.

Identified health needs

Gateshead has a population of around 201,600 in 2016 which is forecast to increase by 5.5% between 2014 and 2039. It has a higher proportion of older people in comparison with England as a whole, and it is predicted that the number of people aged 85 years and over will nearly double over the next 20 years. In terms of overall deprivation, Gateshead is ranked 73rd out of 326 local authorities (where 1 is most deprived). It is particularly disadvantaged in relation to employment and also disadvantaged in relation to income, education, skills and training. Higher than average proportions of children live in poverty.

Across a range of diseases and conditions – chronic obstructive airways disease (COPD), coronary heart disease (CHD), hypertension, diabetes, cancer – Gateshead has above average levels of need, particularly

in its most deprived communities. Local priorities agreed by the Health and Wellbeing board (HWB) for the Joint Strategic Health Needs Assessment (JSNA include reducing alcohol related harm, reducing smoking, tackling obesity through diet and exercise, and promoting mental wellbeing.

Current provision

There are 49 pharmacies in Gateshead, located primarily in areas of higher population density with 99.8% of residential addresses being within 1.5 miles of a community pharmacy. Gateshead is well provided for Monday to Friday, 9am to 5pm with more than one pharmacy in most towns and urban areas, allowing patient choice and capacity to provide enhanced services. There is one 100 hour pharmacy and two distant selling pharmacies, and two rural general practices (and additional 6 branch surgeries) provide dispensing services to some of their patients.

Services currently commissioned from pharmacies in Gateshead include emergency contraception, smoking cessation, needle exchange, supervised consumption of methadone, minor ailments, and specialist palliative care drugs. **There is adequate provision of all of these services across Gateshead.**

The Health and Wellbeing Board considers that that the current number of pharmacies and overall number of hours is adequate to meet the needs of people accessing pharmacy services, with the possible exception of the East locality.

However, currently there is varied access to pharmacy services in the evenings and at weekends across the localities and it is therefore recommended that NHS England and the CCG work with the LPC to review availability of pharmacy services out of normal working hours and implement any required changes..

Future provision

The CCG vision for community pharmacy is to complement dispensing medicines by greater involvement in the self-care agenda, and ensuring patients get the most out of their medicines. The role of pharmacies in promoting self-care will become even more important as the healthcare budget becomes stretched, and GPs have less time to spend on those with more minor health conditions This is consistent with the pharmacy white paper (April 2008).

Pharmacy services in Gateshead currently provide a wide range of commissioned services but have indicated a continued appetite for further development. A number of the pharmacies have achieved or are working to accreditation as Healthy Living Pharmacies which will continue to support their role in public health and to support the community in lifestyle challenges in Gateshead.

With regard to locally commissioned services, Public Health will work with the CCG to ensure that services are commissioned to meet local health needs.

1. Introduction

The White Paper: Pharmacy in England: Building on Strengths¹ – Delivering the Future was published by the Department of Health in April 2008, and set out the vision for pharmaceutical services in the future. It identified practical, achievable ways in which pharmacists and their teams could contribute to improving patient care through delivering personalised pharmaceutical services in the future.

These personalised services would be in addition to the services associated with the dispensing and safe use of medicines and as such, need to be commissioned specifically to meet the health needs of the local population. These services cannot be commissioned in isolation, and therefore form an integral part of the joint strategic needs assessment and the strategic commissioning plan, focusing on local priorities.

The Health Act 2009 introduced a legal requirement for all primary care organisations (PCOs) to publish an updated pharmaceutical needs assessment (PNA) by 1 February 2011. The Health and Social Care Act 2012 transferred the responsibility for developing and updating PNAs to Health and Wellbeing Boards (HWBs). All HWBs were required to produce a PNA by 1 April 2015 which required an update within 3 years and are therefore due to be renewed by 1 April 2018. The PNA is a strategic commissioning document and will also be used to identify where there are gaps in pharmaceutical services which could be filled by market entry.

To achieve this dual purpose the HWB needs to know what services are currently provided by pharmacies and whether there is sufficient geographical spread to meet identified health need. Mapping these pharmacy providers with the health needs of the population will identify any gaps in current service provision and define areas where a pharmacy service could be commissioned to meet that need.

1.1. What is the Pharmaceutical Needs Assessment (PNA)?

A pharmaceutical needs assessment (PNA) describes the health needs of the population, current pharmaceutical services provision and any gaps in that provision. It also identifies potential new services to meet health needs and help achieve the objectives of the strategic plan, while taking account of financial constraints.

The PNA will be used to:

- Inform commissioning plans about pharmaceutical services that could be provided by community pharmacists and other providers to meet local need;
- Support commissioning of high quality pharmaceutical services;
- Ensure that pharmaceutical and medicines optimisation services are commissioned to reflect the health needs and ambitions outlined within the joint strategic needs assessment;
- Facilitate opportunity for pharmacists to make a significant contribution to the health of the population of Gateshead; and
- Ensure that decisions about applications for market entry for pharmaceutical services are based on robust and relevant information.

This is not a stand-alone document. It is aligned with the Gateshead Joint Strategic Needs Assessment (JSNA) and Newcastle Gateshead Clinical Commissioning Group (CCG) Five Year Strategic Plan. It will be used as a tool to inform future service developments aimed at meeting the objectives of the strategic plan e.g., delivering care in the most appropriate setting, reducing reliance on hospital care, supporting those with long term conditions, promoting wellbeing and preventing ill-health, and improving access to primary care.

¹ <https://www.gov.uk/government/publications/pharmacy-in-england-building-on-strengths-delivering-the-future>

1.2. Market Entry

If a person (a pharmacist, dispenser of appliances or in some areas a GP) wants to provide NHS pharmaceutical services they are required to apply to the NHS to be included on a pharmaceutical list. Pharmaceutical Lists are compiled and held by NHS England. This is commonly known as the NHS “market entry” system.

Under the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations² (the “2013 Regulations”) a person who wishes to provide NHS pharmaceutical services must generally apply to NHS England to be included on the relevant list by proving they are able to meet a pharmaceutical need as set out in the relevant PNA.

The regulations allow an automatic exemption to the regulatory test for distance selling/internet based pharmacies provided that they provide:

- The uninterrupted provision of essential services, during the opening hours of the premises, to persons anywhere in England who request those services;
- The safe and effective provision of essential services without face to face contact between any person receiving the services, whether on their own or on someone else’s behalf, and the applicant or the applicant’s staff.

The Health Act 2009 replaced the “control of entry” test with a new test requiring Primary Care Organisations to have statements of pharmaceutical needs. The Health and Social Care Act 2012 transferred the responsibility for producing the PNA to Health and Well Being Boards. NHS England will use the PNA to determine applications to open new pharmacies in that local council area.

In December 2016, following the consultation on community pharmacy 2016/17, amendments to the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 came into force which facilitate pharmacy business consolidations from two sites on to a single existing site. Importantly, a new pharmacy would be prevented from stepping in straight away if a chain closes a branch or two pharmacy businesses merge and one closes. This would protect two pharmacies that choose to consolidate on a single existing site – where this does not create a gap in provision.

It is essential that HWBs are keenly aware of pharmacy services needed in the community, together with any gaps or opportunities in service provision so that these can be commissioned to support more effective patient care.

1.3. Gateshead PNA 2015 Recommendations

The 2015 PNA for Gateshead identified that at the time, there was adequate provision of NHS pharmaceutical services across Gateshead with further recommendations as follows:

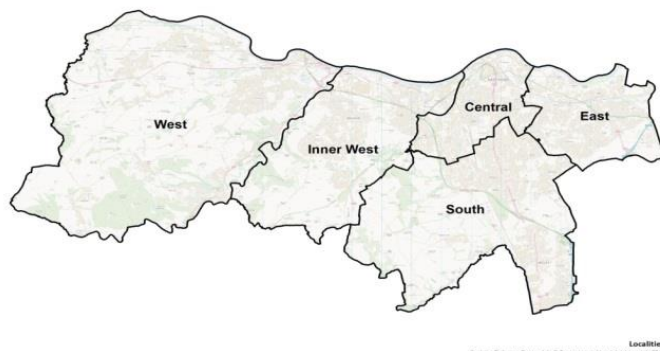
- there is a potential for reinvigorating the Health Living Pharmacy Scheme
- the Pharmacy Minor Ailments Scheme may be expanded across Gateshead as many pharmacies had expressed willingness to provide the service
- the network of extended hour pharmacies are essential to meet the needs of patients by extending access to pharmaceutical services outside core hours
- Concerns were raised about the accessibility of pharmacy services outside normal hours and therefore recommendations were made to review the pharmacy services in the out of hours period.

This report reflects on the progress made regarding the recommendations made in the 2015 PNA, summarised in section 10.

² <http://www.legislation.gov.uk/ukxi/2013/349/contents/made>

1.4. Gateshead Localities

Throughout the PNA reference is made to five localities which are built from ward boundaries. The five localities are shown in the map below and duplicated in the enlarged map in Appendix 5.



2. Gateshead Pharmaceutical Needs Assessment Process

Section 2 provides a brief overview of the methodology adopted in bringing together the information contained within the PNA.

2.1. Identification of health need

The JSNA and relevant local strategies (e.g. the Health and Well Being strategy, Long Term Conditions (LTC) strategy, Sexual Health strategy) have been reviewed, along with feedback from the public and local professionals, to summarise local health needs relevant to pharmacy services in Gateshead. This summary is set out at Section 3.

2.2. Assessment of current pharmaceutical provision

A steering group consisting of Gateshead Council's public health team, Newcastle Gateshead Clinical Commissioning Group, Healthwatch and the Local Pharmaceutical Committee was established to oversee the process. The steering group developed an online questionnaire ([Appendix 3](#)) which was sent to all pharmacy contractors across Gateshead in July 2017. This identified the current provision of pharmaceutical services in Gateshead.

Information was also gathered from a number of other sources e.g. NHS England, Commissioners, Public Health Observatory, Local Pharmaceutical Committee.

PNA Steering Group ([Appendix 11](#))

- Public Health Consultant (Gateshead Council)
- Chair (Gateshead and South Tyneside Local Pharmaceutical Committee)
- Communications Officer (Gateshead and South Tyneside Local Pharmaceutical Committee)
- Senior Medicine Optimisation Pharmacist (Gateshead CCG)
- Representative (Healthwatch Gateshead)
- Head of Pharmacy (NHS QE Hospital)

2.3. Public engagement

A short survey ([Appendix 4](#)) was developed to gather information from the public about the pharmacy services they currently use and would use in the future if they were commissioned. Each pharmacy in Gateshead was asked to display the surveys on their counter and encourage customers to complete them

from 17th July – 4th August 2017. The survey was also made available online through the Council's online consultation portal. The results are summarised below.

The formal consultation on the draft PNA for Gateshead will run from 23rd October until 22nd December 2017 in line with the guidance on developing PNAs and section 242 of the Health Service Act 2012, which stipulates the need to involve Health and Wellbeing Boards in scrutinising Health Services.

In keeping with the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations (2013), in addition to the Health and Wellbeing Board members, the following stakeholders will be consulted during this time:

- Gateshead Local Pharmaceutical Committee
- Gateshead Local Medical Committee
- All persons on the pharmaceutical lists and all dispensing doctors list in Gateshead
- Gateshead Clinical Commissioning Group
- Gateshead Healthwatch
- Queen Elizabeth NHS Foundation Trust, and NTW Mental Health NHS Foundation Trust
- NHS England
- Neighbouring HWBs in Newcastle, Durham, Northumberland, South Tyneside and Sunderland.
- General Practitioners
- General public via the council website and Healthwatch

Letters will be sent to all consultees informing them of the web site address (www.gateshead.gov.uk/consultation) which contains the draft PNA document. "A person is to be treated as served with a draft if that person is notified by the HWB of the address of a website on which the draft is available and is to remain available (except due to accident or unforeseen circumstances) throughout the minimum 60 day period for making responses to the consultation".

The consultation sets out to determine:

- Whether there are sufficient community pharmacies to meet the needs of the population?
- Whether other services could be delivered by community pharmacies?

The draft document will be updated to reflect significant comments received during the consultation period. The final document will be approved by Gateshead Health and Wellbeing Board.

Public Survey regarding local pharmacy services

The public survey was conducted over three weeks from 17th July – 4th August 2017. Details of the questionnaire and findings are described in [Appendix 4](#).

225 people responded to the survey with representation across all localities. The majority (70%) of respondents were over 55 years old (42% were over 65 years old) and only 15 (7%) were under 34 years old. This may be a reflection that the aging population is more likely to be prescribed medications and therefore visit their community pharmacy.

Many (61%) of the respondents to the survey were regular pharmacy users with 49% using the pharmacy at least monthly and 12% using the service each week with 87% of responding that they either always or usually use the same pharmacy service.

More than a third of additional comments provided indicated high levels of satisfaction with the service provided by community pharmacies without being prompted, although around 1 in 10 mentioned being dissatisfied.

Information regarding access and the range of pharmacy services was collected within the survey and the findings reflected within relevant sections in this document.

Given the small number of respondents, we cannot be confident that this survey is representative of the views of the wider population of Gateshead about community pharmacy. Nevertheless, it is the only such intelligence we have about people's views.

3. Identified Health Need

Unless otherwise stated, the information below is a snapshot (as at July 2017) taken from Gateshead's Joint Strategic Needs Assessment (www.gateshead.gov.uk/jsna) which contains detailed references to the sources used.

3.1. Population Profile

- Gateshead's population is projected to increase by 11,000 (5.5%) between 2014 and 2039 to 211,500.
- The population is ageing as seen in the population chart below (Chart 1): it is projected that by 2039 there will be an additional 14,400 people aged 65 years or older, an increase of 38%. There will also be a slight decrease in the number of children and young people aged 0-15 years of around 500 or 1.5%. Although the working age population is set to grow by 4,600 or 3.7% by 2039, this is due to the increase in retirement age.
- Increased housing provision may bring increasing demand on pharmaceutical services in the future. Table 1 below shows planned future housing developments by 2032.

Chart 1: Gateshead Population (2014 and 2039 Compared)

Source: ONS Sub National Population Projections 2014 2017

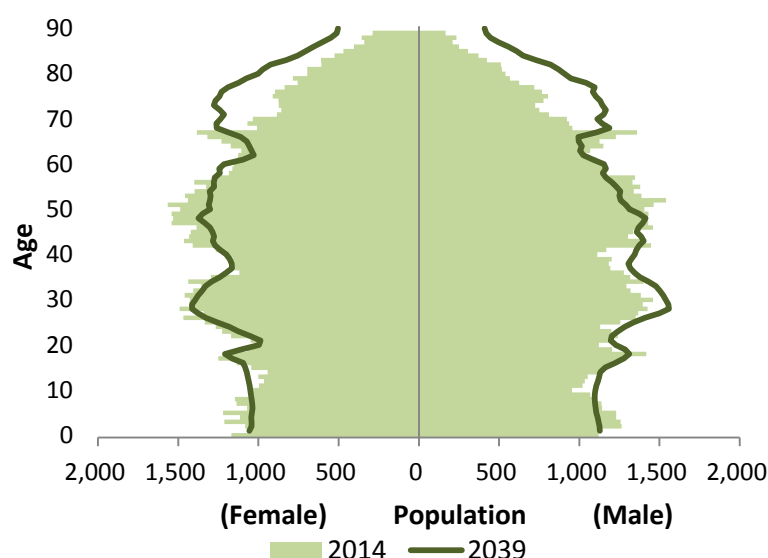


Table 1: Future Housing Developments

Source: Strategic Housing Land Availability Assessment

Area	No. of planned new homes (Approx.)
Birtley	413
Blaydon	235
Bridges	216
Chopwell & Rowlands Gill	288
Chowdene	13
Crawcrook & Greenside	14
Deckham	117
Dunston & Teams	441
Dunston Hill & Whickham East	70
Felling	359
High Fell	301
Lamesley	427
Lobley Hill & Bensham	6
Low Fell	40
Pelaw and Heworth	62
Ryton, Crookhill & Stella	51
Saltwell	202
Wardley & Leam Lane	7
Whickham North	109
Whickham South & Sunniside	46
Windy Nook & Whitehills	39
Winlaton & High Spenn	179

3.2. Ethnicity

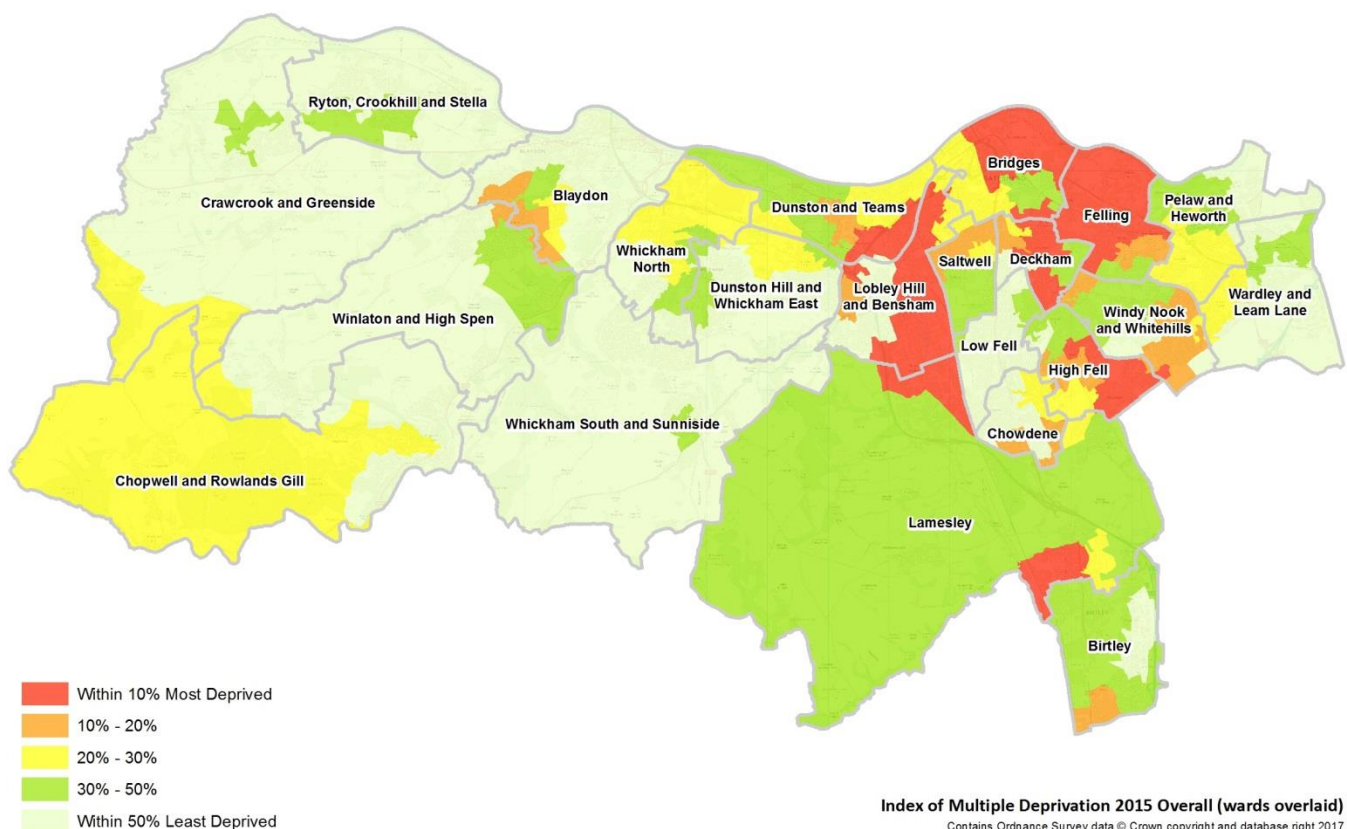
- It is estimated that around 3.7% (7,500) of the population are from a black or minority ethnic (BME) group. The BME population has increased from around 1.6% in 2001. This does not include Gateshead's orthodox Jewish community; over 3000 people state that their religion is Jewish, although this also includes the non-orthodox Jewish population. The Jewish community themselves estimate their population size to be around 4,500, including 1,500 students.

- Gateshead's increasing diversity may have implications in terms of support for different communities. For example, there have been significant increases in residents of Chinese (+690) and African (+695) origin, and 2% of households do not contain anyone who considers English to be their main language.

3.3. Social and Economic Disadvantage

- The Index of Multiple Deprivation (IMD) measures multiple deprivation for each local authority area as a whole and also for smaller Lower Layer Super Output Areas (LSOA) within each local authority. The index is made up of one overall and seven themed Domains or groupings of deprivation indicators including income, employment, health and disability, education skills and training, barriers to housing and services, crime and the living environment. The current index is IMD 2015.
- Overall, Gateshead is the 73rd most deprived local authority in England, out of 326 local authorities. Nearly 23,600 (12%) people in Gateshead live in one of the 10% most deprived areas of England. Nearly 49,800 (25%) live in the 20% most deprived areas.
- It is also possible to estimate the population living in the different deprivation bands at ward level. There are seven wards containing areas within the 10% most deprived in England. At 64%, Felling ward is estimated to have the highest proportion of its population living in the 10% most deprived areas in England. This is followed by High Fell (51%) and Deckham (41%) wards.

Index of Multiple Deprivation 2015



3.4. Life Expectancy and Mortality

- Life expectancy in Gateshead is currently 77.7 years for men and 81.4 years for women. Life expectancy for both men and women continues to increase although it is below the average for England and has been fairly constant over the last 10 years, currently standing at 1.8 years lower for men and 1.7 years lower for women.

- The main cause of deaths that explains the reason for the gap in life expectancy between Gateshead and England is cancer. For men, 30% of these deaths are due to cancer, 20% to gastro-intestinal and 19% to circulatory diseases. For women 33% are due to cancer, 21% to respiratory, and 20% to circulatory diseases. Lung cancer is the major cancer type and coronary heart disease is the major circulatory disease for men and women.
- Across Gateshead's LSOAs, life expectancy for men is 9.9 years less in the most deprived compared to the least deprived areas (deciles); for women, the difference is 8.7 years. The gap in life expectancy between people living in the most deprived and the least deprived areas has gradually been increasing over time.
- Within Gateshead wards, life expectancy for men living in Bridges is 9.3 years less than for men living in Whickham South and Sunnyside. Women living in Felling will live for 8.0 fewer years than women living in Whickham South and Sunnyside.
- Healthy life expectancy is 57.0 for men and 59.1 for women. Healthy life expectancy for men in Gateshead is about 6 years less than across England as a whole and for women it is about 5 years less. Compared to the North East, healthy life expectancy for men in Gateshead is about 2½ years less and for women 1 year less.

3.5. Health Needs: Long Term Conditions

There are more than 60,000 people in Gateshead currently on disease registers in scope of the CCG's LTC strategy, 7.2% of who have more than one LTC. The risk of unplanned hospitalisation increases with increasing number of LTCs. The percentage of people with LTCs is shown in the table opposite.

Hypertension is the main long term condition and is a major risk factor for cardiovascular disease as shown in Table 2. In 2015/16, 16.2% of the GP registered population of Gateshead had hypertension, which is higher than the England average of 13.8%. This may be due in part to higher rates of detection of hypertension in Gateshead. Nonetheless, it is estimated that the true prevalence of hypertension in Gateshead is 26.6%, meaning that there are many people with undiagnosed hypertension.

Premature mortality from cardiovascular disease is significantly worse in Gateshead (93.1 per 100,000 people younger than 75 years of age between 2013 and 2015, the equivalent of 480 people) than in England overall (74.6 per 100,000).

Of the 480 deaths due to cardiovascular disease (in people younger than 75 years of age), 314 were considered preventable. The rate of preventable deaths for men has consistently decreased since the early 2000s and has closed the gap to England, although it remains significantly worse than England. The rate of preventable deaths for women saw a significant decrease in the early to mid-2000s resulting in Gateshead moving from significantly worse than the England average to similar. However, from around 2008 onwards, the rate spiked significantly and is now significantly worse than the England average – though the gap has narrowed to England.

Diabetes mellitus is another major risk factor for cardiovascular disease. The proportion of people with diabetes is gradually

What services can/do pharmacies offer?

- Anti-coagulant monitoring
- Blood cholesterol check
- Blood glucose check
- Blood pressure check
- Medicine Use Review
- New Medicine Service
- NHS health check
- On demand availability of specialist drugs service (palliative care)

Table 2: Prevalence of Long Term Conditions 2015/16

	% Long term conditions
Asthma²	6.0%
Chronic obstructive pulmonary disease^{2#}	2.4%
Coronary heart disease²	4.0%
Diabetes (17+)²	6.7%
Heart Failure¹	0.8%
Hypertension²	16.2%
Stroke²	2.2%
Chronic kidney disease (18+)¹	5.7%
Epilepsy (18+)^{2#}	0.9%
Osteoporosis (50+)^{2#}	0.3%
Dementia¹	0.9%

increasing. Since 2010/11 Gateshead has seen a year on year increase from 5.9% to its current 2015/16 level of 6.7%.

The prevalence of diagnosed COPD in Gateshead was 2.7% in 2013/14. In the most recent update of this data, it is now only made available at Newcastle and Gateshead CCG level, and was 2.4% in 2015/16; this has changed little over recent years and remains higher than in England (1.9%). It is estimated that 40% of people with COPD in Gateshead are undiagnosed.

Nationally, mortality rates are decreasing for most cancers; however, mortality rates are increasing for liver cancer, pancreatic cancer, melanoma, oral cancer and some digestive cancers.

The pharmacy public survey ([Appendix 4](#)) identified that 5% of responders accessed a health check as part of the pharmacy service and 21% were aware of the medicine review performed by the pharmacy. 35% and 14% respectively further indicated that they would use these services if they were available.

3.6. Health Needs: Substance Misuse

3.6.1. Drugs

The total number of Gateshead residents in treatment for substance misuse 2016/17 was 1920. This is a small reduction from the previous year's figure of 1989. In the year to March 2017 there were 1,019 opiate users and over 300 non-opiate users (including alcohol and non-opiate) in treatment.

What services can/do pharmacies offer?

- Needle exchange
- Supervised administration of opiate substitutes

There were 145 young people in treatment in 15/16, 117 of these were new presentations.

- The majority were male (66%).
- 75% of young people in treatment were classed as living with parents or other relatives.

Alcohol and cannabis were joint highest substances with 71% of young people listing these as the primary substance they need help with.

There has also been a small increase in the use of legal highs across Gateshead.

Drug related deaths in Gateshead have more than tripled since 2012 (6 in 2012 and 19 in 2016); this is reflective of the national picture. The characteristics of the deceased remain similar – with the majority of deaths continuing to be male, white, aged 25-34yrs and male.

There were no respondents to the public survey regarding current use of substance misuse support services via the pharmacy. 1% indicated they would use the needle exchange or disposal of needles/syringes if available, although it is not clear whether this was with regards to substance misuse or other medications requiring disposal of injectable equipment e.g. diabetics requiring insulin.

3.6.2. Alcohol

In 2015, a survey of 101 Gateshead residents found that 62% reported binge drinking in the past 12 months. 28% binge drink weekly or more often. The survey found that 55% are 'increasing/higher risk drinkers' (drinking above the recommended safe limit each week. Alcohol misuse is a major problem within Gateshead in terms of health, social and economic consequences which affect a wide cross section of the borough at a considerable cost.

What services can/do pharmacies offer?

- NHS Health Checks

The rate of alcohol-related hospital admissions in Gateshead is 989 per 100,000 population, this is a slight decrease of 2.7% on the previous year (1017 per 100,000). However these figures remain significantly

higher than both the regional average (867) and the England average (645). Gateshead still has the highest rate for this indicator in the North East. Gateshead has the 2nd highest rate of alcohol related admissions (narrow) to hospital in England.

Gateshead remains significantly higher than the England average for mortality from chronic liver disease. Between 2013 and 2015 there were 98 deaths. Of particular note is the rate for women, which although starting from a much lower base than men continues to increase and is moving away from the England average. For example, between 2006 and 2008 there were 23 deaths from chronic liver disease, but between 2013 and 2015 this increased to 41 deaths.

Pharmacists can contribute identification and supporting alcohol awareness when discussing healthy life style options as part of medicine use review, new medicine services or other patient consultation opportunities.

3.7. Health Needs: Sexual Health

In 2015, there were 1,325 new Sexually Transmitted Infections (STI) diagnosed in Gateshead, a rate of 661 per 100,000 residents. This is similar to the rate in the North East of 667.

However, STIs disproportionately affect young people. Around a third (423) of new STIs being diagnosed are cases of chlamydia in people aged under 25.

What services can/do pharmacies offer?

- Emergency hormonal contraception
- Pregnancy testing
- Referral for further contraception
- Dual screening service
- C-card

Chlamydia is the most common STI, especially amongst young people. Public Health England (PHE) recommends that local areas should be working towards a Chlamydia diagnosis rate of at least 2,300 per 100,000 in the 15 to 24 age group, and this is now an indicator in the Public Health Outcomes Framework. The diagnosis rate reflects both coverage and the proportion testing positive (at all sites, NHS and non-NHS). In 2015, the chlamydia diagnosis rate for the 15 to 24 year old age group in Gateshead was at 1,760 per 100,000 residents. This rate is below the target and has dropped below the national average of 1,887 and the regional average of 1,794 per 100,000. In calendar year of 2015 54% of diagnoses of new STIs in Gateshead were in young people aged 15-24 years (compared to 45% in England). This includes those tested in specialist sexual health clinics (SHCs) only.

The number of teenage pregnancies in 2015 was 90 - the lowest number in recent history, and down from 119 the previous year. The longer term trend is down, having reduced from a high of 202 in 2000 and there has been a steady decrease since then. Despite the reduction, Gateshead's current Under 18s conception rate of 27.8 is similar to the North East rate of 28.0, and higher than the England rate of 20.8. The wards of Birtley, Blaydon, Chopwell & Rowlands Gill, Deckham, Dunston & Teams, Felling, High Fell, Pelaw & Heworth, Windy Nook & Whitehills all have significantly higher under 18 conception rates than the England median rate.

22 of the pharmacy services in Gateshead participate in the dual screening scheme for 15-24 year olds. In addition, 3 of these pharmacies participate in the service for under 25's whereby once registered for the scheme, condoms and lube can be accessed at a variety of settings across the borough: Pharmacies, Youth Clubs and GP Surgeries.

There were no respondents to the public survey that indicated their current use of chlamydia screening/treatment services via the pharmacy although 3% indicated they would if this service were available. This outcome may be a reflection of the small number (1%) of respondents in the survey who were within the 20-24 year cohort.

3.8. Health Needs: Smoking

Smoking remains the greatest contributor to premature death and disease in Gateshead. In 2013-15, Gateshead's mortality rate for deaths attributable to smoking in 35+ year olds was 385.9 per 100,000 population. Gateshead's rate is 36% higher than the England average.

What services can/do pharmacies offer?

- Active intervention smoking cessation
- NRT therapy
- NHS Health Checks

The biggest killer is lung cancer, which in 2013-15 killed 528 Gateshead people. COPD killed 422 people. In addition, there were 130 deaths from heart disease and 45 from stroke that were directly attributable to smoking. Smoking is also a major factor in deaths from many other forms of cancer and circulatory disease.

In Gateshead in 2016, the prevalence of smoking in adults was 17.9%. This is significantly worse than the England average of 15.5%. Indicatively (because of large confidence intervals), the overall direction of travel is down. Smoking prevalence is highest in deprived areas of Gateshead. The gap between the proportion of smokers in the most and least deprived quintiles in Gateshead is 17.5%. There is a pronounced social gradient.

At delivery, 13.2% of all women giving birth were known to smoke. This is significantly higher than the England average of 10.6%.

Smoking appears to be more common among children in Gateshead than in England overall, particularly among girls aged 14-15 years with 21% reporting that they smoke occasionally or regularly (compared to 8% of boys).

Pharmacists can contribute to the care of those wishing to stop smoking both as part of discussions of life style options when discussing medications and also opportunistically when discussing product options and offering appropriate support where necessary.

2% of respondents to the public survey that indicated that they currently used the stop smoking service provided by the pharmacy services and a further 1% indicated they would use this service if it were available.

3.9. Health Needs: Obesity

In Gateshead between 2013 and 2015 69% of adults had excess weight (overweight or obese). This is significantly worse than the England average of 64.8%. Local survey data suggests that obesity is more prevalent in areas that are more deprived and that highest levels are in those aged between 55 and 64.

What services can/do pharmacies offer?

- Weight management
- NHS Health Checks
- Healthy Living Pharmacy

Of children attending Gateshead schools, 23% of 4-5 year olds and 34% of 10-11 year olds had excess weight. As with the adult population, excess weight in children is more prevalent in areas that are more deprived.

The underlying causes of obesity are complex, but include the ready availability of high calorie food, and a more sedentary lifestyle. Addressing obesity will require action at an individual, environmental and societal level.

None of the respondents to the public survey that indicated that they currently used the pharmacy to provide weight management advice although 14% indicated they would use this service if it were available.

3.10. Health Needs: Vaccinations

In 2016/17, 73.8% of people aged 65 years or older had the seasonal influenza (flu) vaccine. This is below the Chief Medical Officers' target of 75% or higher.

What services can/do pharmacies offer?

- Influenza vaccination

In 2015/16, 54.9% of people younger than 65 years of age considered to be at risk received the flu vaccine. This remains well below the Chief Medical Officers' target of 75% or higher. The national flu campaign, implemented primarily via GP practices, targets those most at risk e.g. children and young people, older people (>65 years) and those in clinical risk groups as defined in the national campaign³. However, there are many people younger than 65 who are at high risk of contracting flu resulting in possible lost working hours and/or further transmission. As this target group are more likely to be in the working population community pharmacy could help identify these people and offer to vaccinate immediately, without the need to attend the GP surgery. The provision of an influenza vaccine service, commissioned by NHS England via community pharmacies, therefore is an opportunity to contribute to health protection across the community.

14% of respondents to the public survey indicated that they currently used adult flu vaccination provided by community pharmacy services and a further 17% indicated they would use this service if it were available. Interest was also expressed in other vaccination programmes such as pneumonia and travel vaccines subject to availability.

3.11. Health Needs: Older People

Many of the people whose lives are substantially affected by long-term illness or disability are in their eighties or nineties and have age-related conditions such as osteoarthritis, visual or sensory impairment, or Alzheimer's disease. But there are also older people who are disabled by health problems much earlier in life, for instance people who suffer a severe stroke or early-onset dementia.

What services can/do pharmacies offer?

- Advice/support to care homes
- Compliance aid assessment
- Prescription collection service
- Care home support/ advice
- Dementia Friends

Population projections indicate the number of persons in Gateshead, aged 65 years and over will increase by 38%, by 2039 an additional 14,400 elderly people. The number of people aged 85 and over is projected to increase by 5,200 (114%), creating additional demands for social care, housing support and health services. Long term conditions and dementia will be among the biggest challenges faced by health services going forwards.

As at 31 March 2017, 787 older people were looked after in long term residential or nursing care. This represents 2.1% of those aged 65 plus.

People with dementia require substantial amounts of care. Pharmacists can contribute to the care of those with dementia by reviewing their medication, and helping to ensure that patients remember to take the medicines they require by advising on and supplying appropriate support where necessary. The number of patients with dementia is expected to rise as the number of elderly people in Gateshead increases. According to Projection Older People Population Information (POPPI) data, there were predicted to be 2,603 people with dementia in 2015, and this is expected to rise to 3,735 by 2030.

An ageing population will be associated with more harm as a result of falls. After adjusting for age, the rate of emergency admissions for injuries due to falls in people 65 years of age or older is significantly higher in Gateshead than in England overall. It is predicted that there will be a 40% increase in the number of people affected by falls and the number of hospital admissions for falls in 2030. Community pharmacists are in an

³ <https://www.gov.uk/government/publications/national-flu-immunisation-programme-plan>

ideal position to review medication which could contribute to dizziness and falls. As the population ages the proportion of people with a disability is also likely to increase creating additional demands for service provision.

The majority of respondents to the public survey were by older people which is perhaps a reflection of the demographics described and also that this cohort of people experience higher levels of long-term conditions and so are frequently prescribed medication and access pharmacy services.

3.12. Health Needs: Other

Minor Ailments

Pharmacists have access to a considerable range of medicines which they can sell to the public for minor ailments. They are more accessible to the public than their GP as customers do not need to make an appointment to access treatment. As NHS resources become more stretched patients will be encouraged to take more responsibility for their care. Healthy living pharmacies could be centres for healthy living advice and a resource to treat minor ailments.

What services can/do pharmacies offer?

- Minor ailment scheme
- Travel clinic

The public survey did not specifically enquire about the use of a minor ailment scheme in community pharmacies but did identify that 70% of respondents would purchase over the counter medicines from the pharmacy.

Travel Clinics

Pharmacies have access to medicines and provide advice which may be useful to those travelling abroad, again without the need for an appointment with their GP although a formal consultation appointment with the pharmacist may be recommended for advice regarding travel vaccinations.

Only 2% of the respondents in the public survey were found to use the travel vaccination service in community pharmacies but that 22% stated that they would be likely to if this service was available.

4. Current Provision of Pharmaceutical Services

4.1. Definition of Pharmaceutical Services

4.1.1. Essential services

The national framework for community pharmacy requires every community pharmacy to open for a minimum of 40 hours per week, and provide a minimum level of 'essential services' which comprise:

- Dispensing
- Repeat dispensing
- Disposal of unwanted medicines
- Dispensing of appliances
- Promotion of healthy lifestyles e.g. public health campaigns
- Signposting patients to other healthcare providers
- Support for self-care
- Clinical governance including clinical effectiveness programmes.

4.1.2. Advanced Services

In addition to the essential services, the community pharmacy contract allows for 'advanced services'. Advanced services are those services that require accreditation of the pharmacist providing the service

and/or specific requirements to be met in regard to premises. They are commissioned by NHS England and the specification and payment is agreed nationally.

Advanced services currently include:

- Medicine Use Reviews (MUR)
- New Medicine Service (NMS)
- Appliance Use Review (AUR)
- Stoma Appliance Customisation Service (SAC)
- Flu vaccination service
- NHS Urgent Medicine Supply (NUMAS)

4.1.3. Locally Commissioned Services

Pharmacy services are currently commissioned locally by Public Health Teams, Clinical Commissioning Groups and NHS England. Most of the services provided locally were previously commissioned by the Primary Care Trust to meet local health need. However since April 2013 responsibility for these services has moved to Local Authorities, Clinical Commissioning Groups and NHS England.

Service reviews have been undertaken and new service specifications have been developed for services commissioned by the Public Health Department of Gateshead Council. Public Health currently commissions the following services from community pharmacies (See also maps at [Appendix 8](#)):

- Supervised consumption of opiates (Map 8G)
- Smoking cessation services (Map 8I)
 - Stop smoking service
 - Nicotine Replacement Therapy (NRT) supply service
- NHS health checks (Map 8J)
- Emergency hormonal contraception (Map 8K)
- Needle exchange (Harm Reduction)

Community pharmacies are expected to promote self-care through the sale of “over the counter” medicines and by giving advice. Support for “self-care” is an NHS essential service, and the population is encouraged to use community pharmacies to treat minor illness, therefore reserving GP appointments for more serious conditions. Community pharmacies are able to sell a wide range of medicines which are not available through other retail outlets, and give advice on when and how to use them. To further promote self-care, Newcastle Gateshead Clinical Commissioning Group (CCG) in conjunction with the Local Pharmaceutical Committee (LPC) launched its Minor Ailments scheme under the branding of Think Pharmacy First in August 2015.

Newcastle Gateshead CCG also commissions a number of pharmacies to stock an agreed list of medicines, specifically to support End of Life Care.

NHS England currently commissions community pharmacies to provide seasonal influenza vaccines to at risk patients.

4.1.4. Healthy Living Pharmacies

The Healthy Living Pharmacies (HLP) framework was launched in 2010 with the aim of promoting health, wellbeing and self-care which was adopted by Public Health England (PHE) to support the roll-out in pharmacies across the country. The 2015 PNA identified the potential to reinvigorate the HLP scheme in Gateshead and section 4.3 of this report provides further information on the current service.

4.2. Access to Pharmacy Services

4.2.1. Pharmacy Opening Hours.

NHS England is responsible for administering opening hours for all pharmacies in Gateshead via the Area Team (NHS England). Maps showing key opening times are attached in [Appendix 10](#).

Core hours: Each pharmacy is required to be open for 40 hours a week, unless a reduction is agreed by NHS England. The core hours are defined in the application and approval of the pharmacy contract and are provided as an 'essential' pharmacy service. There is one 100 hour pharmacy service contracted in Gateshead, and this pharmacy must be open for at least 100 hours per week.

Supplementary hours: These are provided on a voluntary basis by the pharmacy contractor often based on patient need and business viability, i.e. they are additional to the core hours provided. Supplementary hours can be amended by giving NHS England 90 days' notice of the intended change.

The charts below show, by locality, the numbers of pharmacies open outside of Monday to Friday 9am to 5pm, pharmacies open during weekday evenings, pharmacies open on Saturdays, and pharmacies open on Sundays. Numbers are for total hours, i.e. including both core and supplementary hours.

(If a pharmacy's hours differed on one day of the week from the other four days this difference is ignored on the chart. For example, if a pharmacy is open four days of the week, until 6pm but closes one day at 5pm it is counted on the chart as being open until 6pm. Therefore if a pharmacy opens one evening per week to mirror a surgery's late opening this is not reflected in these tables.)

Chart 2: Number of pharmacies open after 5pm on weekdays

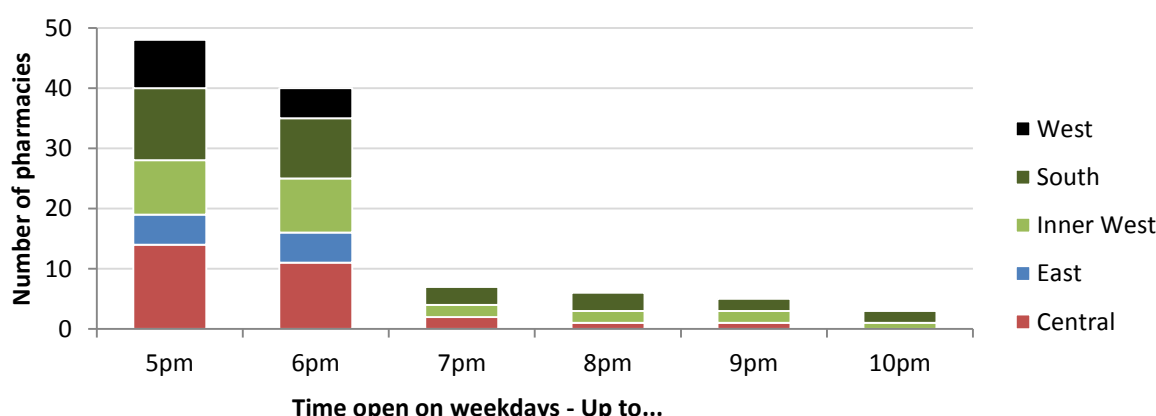


Chart 3: Number of pharmacies open on Saturdays

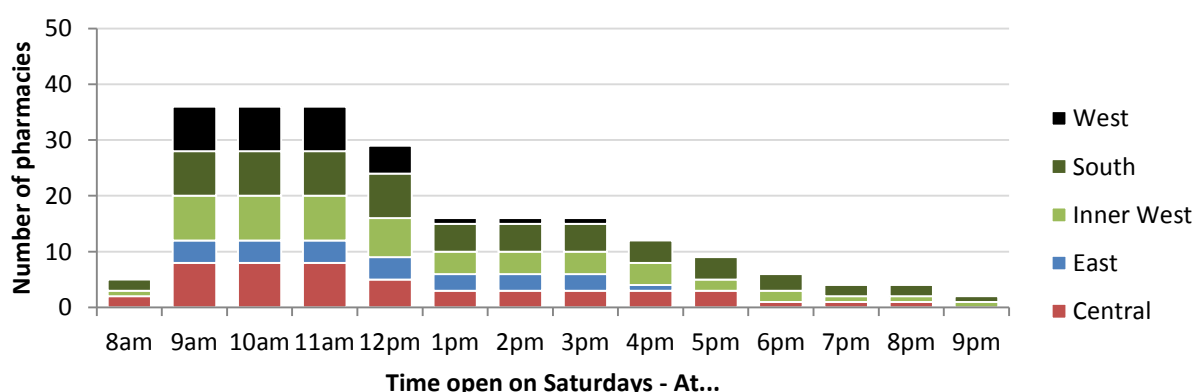
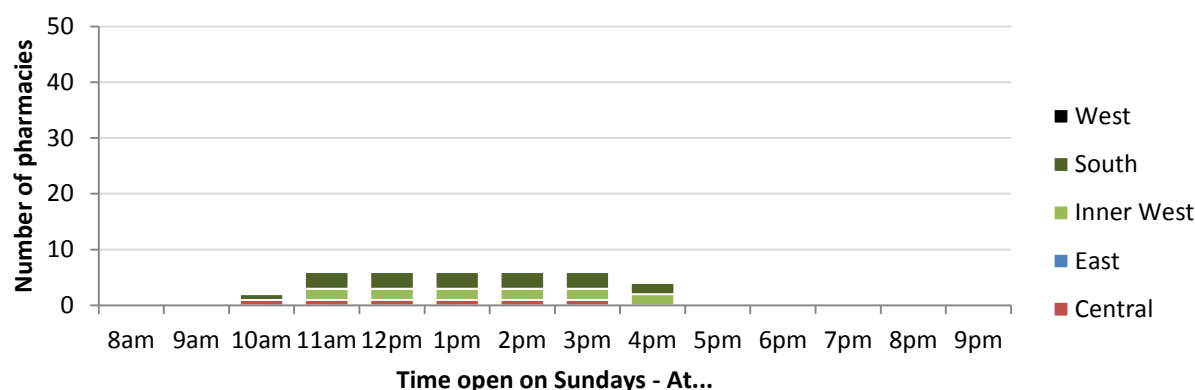


Chart 4: Number of pharmacies open on a Sunday



[Appendix 8](#) maps provide a visual account of the location and spread across Gateshead of the following;

- 8A: Pharmacies open before 9am on weekdays
- 8B: Pharmacies open throughout lunchtime on weekdays
- 8C: Pharmacies open after 5pm on weekdays
- 8D: Pharmacies open after 6pm on weekdays
- 8E: Pharmacies open on a Saturday
- 8F: Pharmacies open on a Sunday

Access to community pharmacy across Gateshead is well provided for during core hours:

- Most (86%) of the pharmacies in Gateshead open for more than the core contract hours with 40 (81%) being open until 6pm on weekday evenings;
- 35 (71%) of the pharmacies in Gateshead are open on Saturdays, of which 17 (34% of total pharmacies) remain open on Saturday afternoons;
- Only 6 (12%) of pharmacies are open on a Sunday and these tend to be those stores situated in supermarkets or shopping areas i.e. Metro Centre, Team Valley.

Therefore, there is access to community pharmacies for working residents, although it is recognised that this does rely to a large extent on the supplementary hours provided particularly by supermarket pharmacies and the 100 hour pharmacy. See section 4.2.2 regarding access to urgent care services

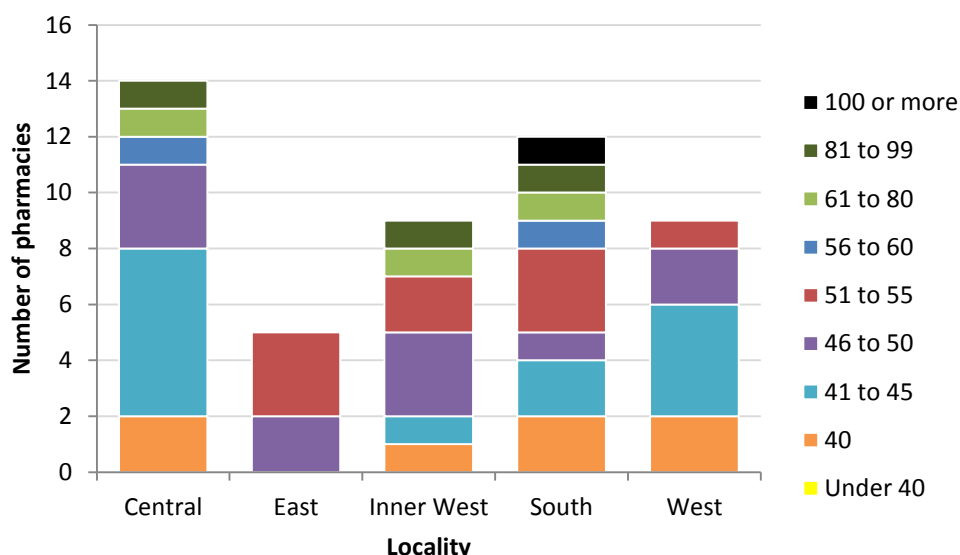
Table 3 illustrates how many Gateshead pharmacies provide supplementary hours (i.e. above 40) and the chart below shows how these are distributed across localities.

Table 3: Number of hours of pharmaceutical services available each week

Number of hours	Number of pharmacies	Percentage of pharmacies
Under 40	0	0%
40	7	14%
41 to 45	13	27%
46 to 50	11	22%
51 to 55	9	18%

56 to 60	2	4%
61 to 80	3	6%
81 to 99	3	6%
100 or more	1	2%
TOTAL	49	100%

Chart 5: Number of hours of pharmaceutical services available each week by locality



There are also pharmacies with extended opening hours in Newcastle and South Tyneside which patients in Gateshead could access. Due to the restrictions of Sunday opening hours, access to pharmaceutical services outside the hours of 10am to 5pm is limited.

Access to pharmacies that are open for longer during the day and the weekend is greater in the Central, Inner West and South localities of Gateshead with the East and West localities having limited Saturday morning and no Sunday access in the locality.

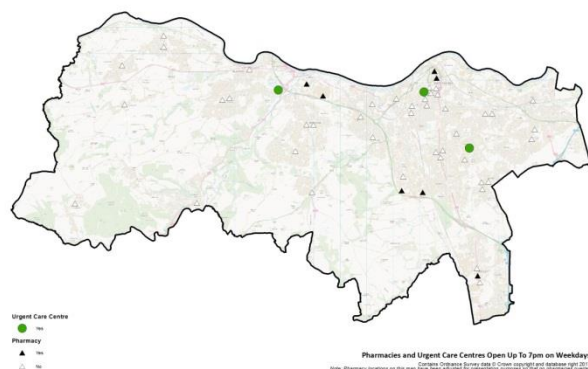
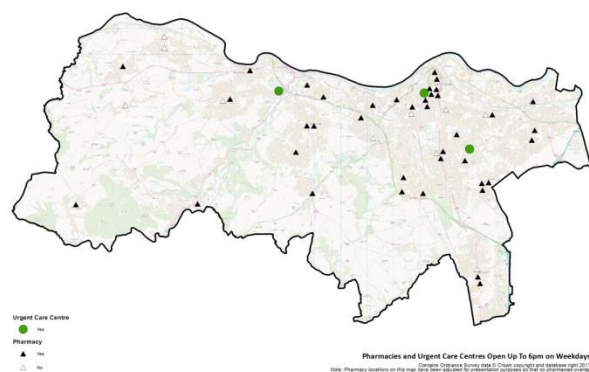
The areas of Gateshead that are within the 30% most deprived areas in the country account for 44% of the areas in Gateshead. However, they are found to benefit from 58% of the total available hours of pharmacy provision. (See Map 8D). From this information, although there is adequate access to community pharmacy services across the area, the east and west localities of Gateshead are less well served both with pharmacy premises and also the range of pharmacy opening hours.

Our survey showed that 48% of respondents would go to another pharmacy if their normal pharmacy was closed, and a further 35% would wait until it was open. Only 3% said they would go to hospital and no-one said they would go to a walk in centre.

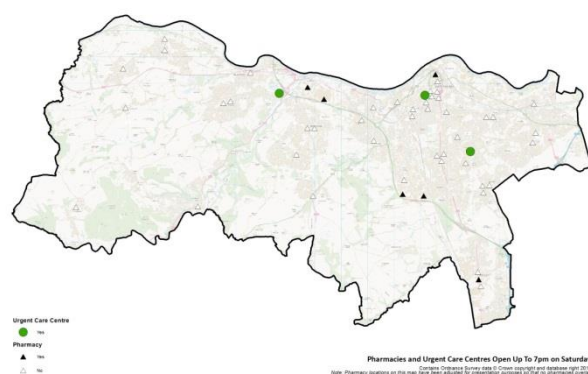
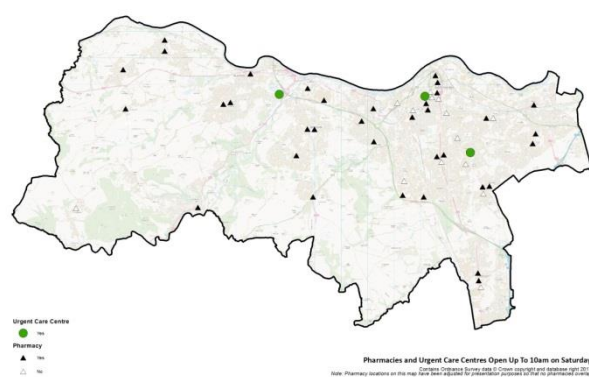
4.2.2. Urgent care

Gateshead urgent care services are based at the A&E department at Queen Elizabeth Hospital and walk in centres at Blaydon Walk In and Gateshead Health Centre. Although pharmacies are open and available to dispense prescriptions during the working day on weekdays and Saturday mornings the maps below show that this service diminishes after 6pm on weekdays after 6pm on Saturdays and the service which is less on a Sunday to the other days is further reduced after 4pm.

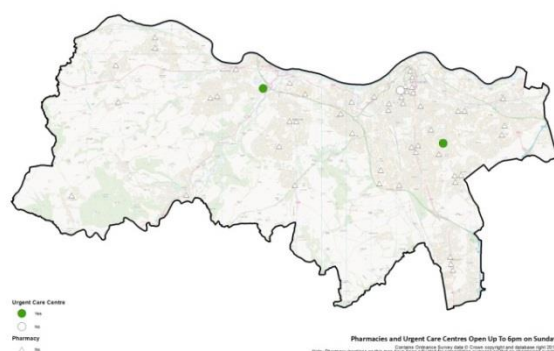
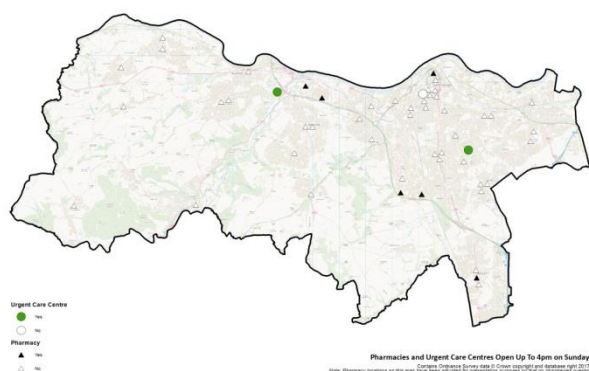
Pharmacy and Urgent Care opening times on a weekday



Pharmacy and Urgent Care opening times on a Saturday



Pharmacy and Urgent Care opening times on a Sunday



Note larger maps of pharmacy opening hours are available in Appendix 8.

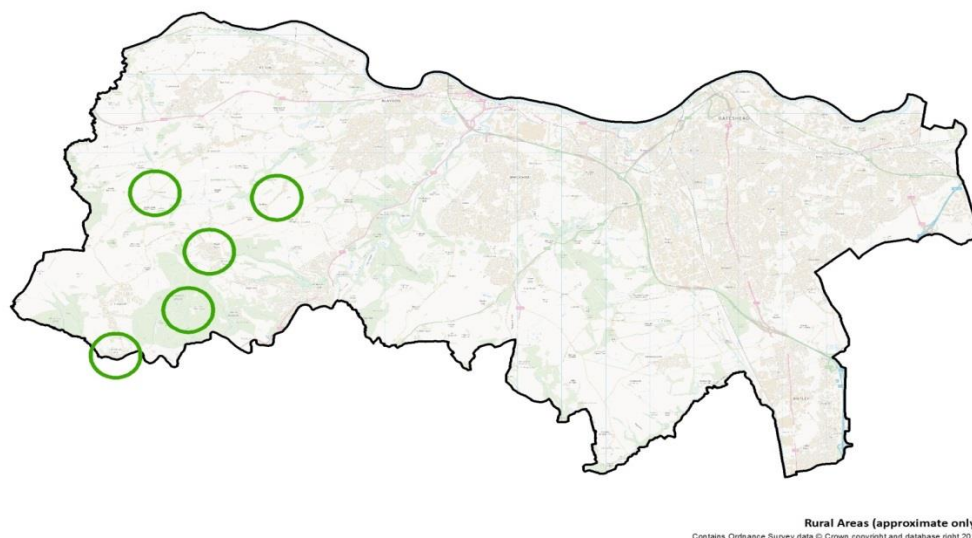
4.2.3. Dispensing Doctors

Some rural general practices provide dispensing services to some of their patients. Dispensing doctors can provide dispensing services to patients who live more than 1.6 kilometres (1 mile) away from a community pharmacy⁴. Two of Gateshead's 31 general practices (and additional 6 branch surgeries) provide dispensing services to some of their patients. There are controlled localities within the boundaries of

⁴ The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013

Gateshead, namely High Spen, Barlow, Blackhall Mill, Chopwell Wood and Coalburns. Special rules pertain to applications for new pharmacy premises within controlled localities. In rural areas, dispensing doctors contribute an important element to the provision of the network of medicines supply. The map below shows the settlements listed as controlled areas pin pointed on a map. However this is not a representation of the boundaries of the controlled localities, just an indication of the areas that might be affected. NHS England may wish to review the boundaries of the controlled locations at some future date.

Rural Areas (Controlled Localities)



4.2.4. Dispensing appliance contractors

Some patients may choose to have appliances supplied by appliance contractors. Although there are no dispensing appliance contractors located within Gateshead, these products are usually delivered to the patient's home, so distance to the dispenser is not an impediment to service. However, this may limit the ability of residents to access Appliance Use Review services to ensure that they get the most out of the appliances supplied.

4.2.5. Distance Selling Pharmacies

Currently there are two distance selling pharmacies registered in Gateshead ([Appendix 6](#)). Some pharmacies offer dispensing services which are available over the internet or by telephone. Delivery is then made by post, carrier or through a branch network. It is not known how many Gateshead residents currently use these services. As these pharmacies cannot provide face to face services, they cannot provide advanced and locally commissioned services.

It is difficult to measure the impact of these services on the overall community pharmacy service at present.

4.2.6. Essential Small Pharmacies

The nationally agreed financial support available for Essential Small Pharmacies (ESP) came to an end on the 31st March 2015. Previously in Gateshead, there was one essential small pharmacy KA & AO Limited ([Appendix 6](#)). An essential small pharmacy was, under the previous pharmacy regulations, a small pharmacy which was essential to a (usually) rural area but was only doing a small number of prescriptions – less than 26,400 per annum. KA & AO Limited is now open for 40 hours per week, and re-joined the pharmaceutical list when the ESP status ceased.

4.2.7. Practice pharmacists in GP practices

Newcastle Gateshead CCG commissions a practice medicines optimisation service into GP practices provided by a team of pharmacists and pharmacy technicians. The service does not provide the service described in the PNA although would work closely with community pharmacists, in particular in responding to issues identified in MUR or NMS services what may require response from the GP practice. The practice pharmacy service may also support other areas of care such as working with care homes in conjunction with the community pharmacy service.

4.2.8. Hospital services

NHS hospital trusts and private hospitals do not provide the type of pharmaceutical services which are in the scope of a PNA. NHS hospitals within Gateshead would like to work more closely with community pharmacists to improve care for discharged patients for a range of services such as discharge MUR's, stop smoking and other services.

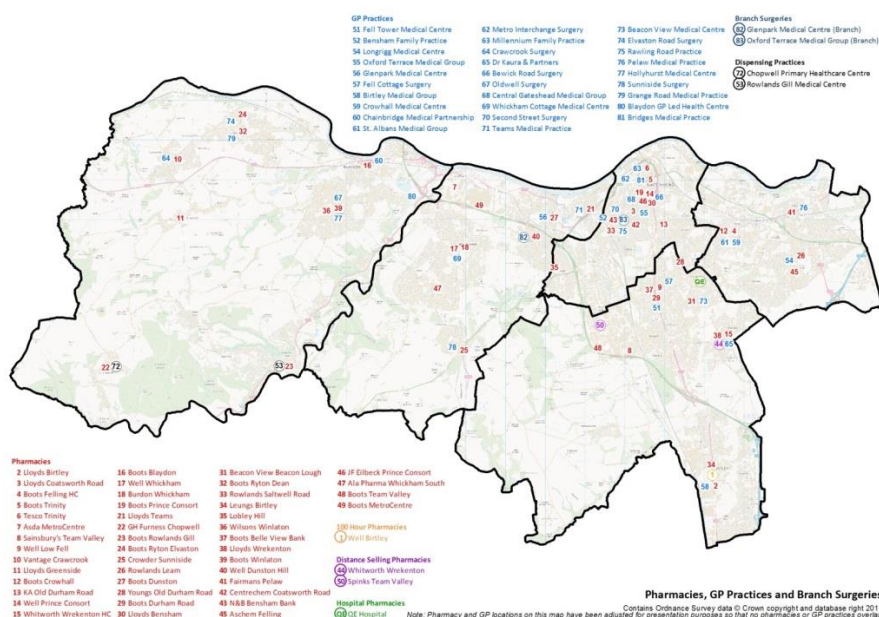
After considering all the elements of the PNA, Gateshead Council concludes that there continues to be adequate provision of NHS pharmaceutical services across most of Gateshead with the possible exception of the East locality, but recognises that services on Sundays and Bank Holidays are dependent on supermarket pharmacies opening and that the more rural areas in the west of the city are met by dispensing doctor services.

Response to the public survey indicated that 85% of respondents always or usually use the same pharmacy and more than 80% said it was easy to travel on foot or by public transport.

4.3. Current Provision of Essential Pharmacy Services

The map on the following page identifies the current provision of essential pharmaceutical services and will be used to determine any applications for new pharmacy contracts. This map is duplicated and enlarged in [Appendix 6](#).

Pharmacies, GP Practices and Branch Surgeries



Pharmacies in the surrounding areas of Northumberland, Newcastle, North Tyneside, South Tyneside, Sunderland and County Durham, which may provide services to residents of Gateshead, are shown in the map at [Appendix 7](#). This includes city centre pharmacies some of which open for extended hours.

There are 49 pharmacies in Gateshead, including one 100 hour pharmacy; three supermarket pharmacies open 60+ hours a week and two distance selling pharmacies. Pharmacies are located primarily in areas of higher population density, and close to doctors' surgeries. There is more than one pharmacy in most urban areas localities, allowing patient choice. There is a good choice of pharmacies between Monday and Friday. Services are more limited on Saturdays, but two thirds of pharmacies are open on Saturday mornings and a third are open on Saturday afternoons, allowing working residents to access pharmacy services. Sunday and evening provision across Gateshead is limited and mainly dependant on supermarket pharmacies.

Since the 2015 PNA there has been a movement of pharmacy ownerships and opening and closure of other premises resulting in a current total of 49 pharmacies.

Table 4: Average number of pharmacies per 100,000 population, May 2017

Sources: *Mid-Year Population Estimates 2015, Office for National Statistics (ONS) #Health and Social Care Information Centre *NHS England

Locality	No. of pharmacies	Population (mid-2015 resident population)*	Pharmacies per 100,000 population
Central	13	40,575	32.0
East	5	35,937	13.9
Inner West	9	34,444	26.1
South	13	45,026	28.9
West	9	45,014	20.0
Gateshead	49	200,996	24.4
England (2013)	#	54,786,327	
North East (2013)		2,624,621	+

The table above shows that Gateshead as a whole is well served by community pharmacies. Although East locality appears to have less pharmacies per 100,000 population, when considered with neighbouring pharmacies in Central and South Gateshead and South Tyneside, patients have ready access to community pharmacy services. As shown in the map below all residents in East locality have access to pharmacy services within 1.5 miles.

The map below shows that 99.8% of residential addresses in Gateshead are within 1.5 miles of a pharmacy (this map is duplicated and enlarged at [Appendix 9](#)) and this grows to 99.96% when dispensing doctors are taken into account. Within the localities, only the South and the West do not have 100% coverage, with 99.9% in the South and 99.3% in the West (note that the majority of residential addresses not covered by a pharmacy are in High Spenningsfield where there is a dispensing GP).

Responses to the public survey show that 87% of respondents always or usually use the same pharmacy. Half (51%) % travel to their pharmacy by car or taxi, 37% on foot, but just 7% by public transport. Despite this, more than 70% said it was easy to travel on foot or by public transport.

Residential Addresses Within 1.5 miles of a Gateshead Pharmacy

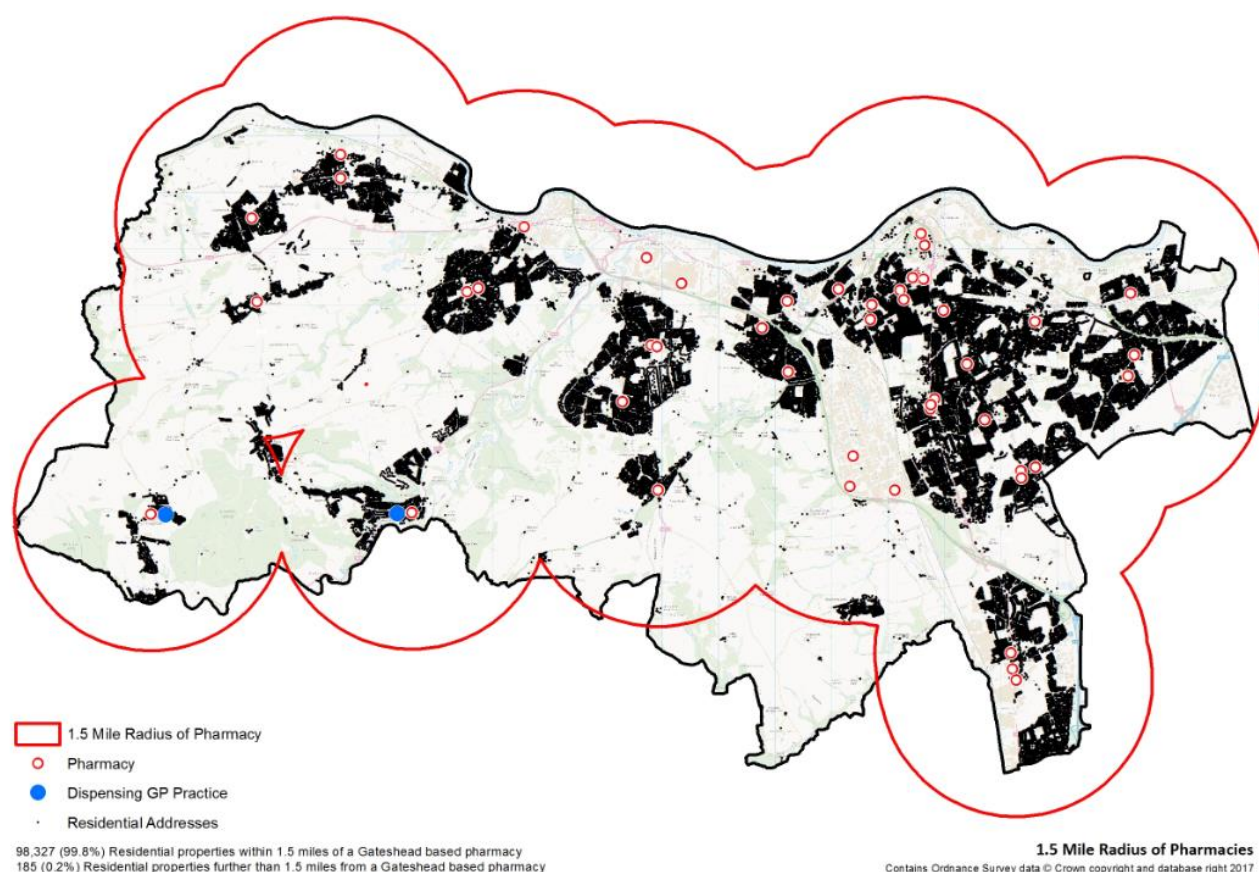


Table 5 below shows the number of prescriptions issued by practices for each locality. These figures do not take into account prescriptions issued by dentists.

Table 5: Average number of prescription items issued per pharmacy

Source: NHS Business Services Authority

[#]August 2016- July 2017 ⁺Practices have been assigned to a locality based on the location of the main surgery

Locality	No. of pharmacies	Number of Prescription items issued by practices ^{# +}	Average no. of prescription items per pharmacy per annum
Central	13	1,321,313	101,639
East	5	877,776	175,555
Inner West	9	869,354	96,595
South	13	1,317,598	101,354
West	9	1,137,764	126,418
Gateshead	49	5,523,805	112,731

Table 5 shows that pharmacies in the East locality issue more prescriptions per pharmacy than in the other areas which may be explained by the lower number of pharmacies per 100,000 population described previously in Table 4, although it should be highlighted that no parts of the East are more than 1.5 miles from a pharmacy. Access to pharmacy services out of core hours is also lower in this locality in comparison to others in Gateshead. However, when neighbouring pharmacies in Central and South Gateshead and South Tyneside are considered, patients have ready access to community pharmacy services.

4.3.1. Repeat dispensing

As part of the essential services component of the NHS contract, all pharmacies are contracted to provide a repeat dispensing service for patients who are considered by their GP to have a stable long term condition. The repeat dispensing service aims to increase patient choice and convenience, by allowing them to obtain their regular prescribed medicines and appliances directly from a community pharmacy for a period agreed by the prescriber. The service helps to minimise wastage by reducing the number of medicines and appliances dispensed which are not required by the patient and reduce the workload of General Medical Practices, by lowering the burden of managing repeat prescriptions. In Gateshead, all community pharmacies have the capability to deliver the electronic repeat dispensing (eRD) service.

The Health and Wellbeing Board considers that the current number of pharmacies and overall number of hours is adequate to meet the needs of people accessing pharmacy services, with the possible exception of the East locality.

However, currently there is varied access to pharmacy services in the evenings and at weekends across the localities and it is therefore recommended that NHS England and the CCG work with the LPC to review availability of pharmacy services out of normal working hours and implement any required changes.

4.4. Current Provision of Advanced Pharmacy Services

Information and findings regarding the current provision of pharmacy services was collected via the survey of pharmaceutical service providers in [Appendix 3](#). All 49 providers responded to the survey.

All of the pharmacies in the Gateshead area now provide or are soon to provide the New Medicine Service and Medicines Use Review. In addition 38 pharmacies provide a Flu Vaccination Service with 6 other pharmacies intending to begin providing the service in the next 12 months. Also, whilst only 19 provide the NHS Urgent Medicine Supply Advanced Service, a further 13 intend to provide it within the next 12 months. There is currently a lower delivery of the appliance use review (AUR), and stoma appliance customisation service (SAC) with only 6 pharmacies providing these services.

A number of people said they would be likely to use health checks (35%), travel vaccinations (22%), and the adult flu vaccination (17%) if they were available at their pharmacy. 19% also said they would use the disposal of unwanted medicines service if available at their pharmacy, which suggests there may be some who are unaware of the full range of essential and additional services available at pharmacies.

4.4.1. Medicine Use Review (MUR)

A consultation room is essential to provide advanced services, e.g. Medicine Use Reviews (MURs) and many locally commissioned services. Standards for consultation rooms are specified in the service specification for MURs⁵. They include:

- clear designation as an area for confidential consultations
- distinct from the general public areas of the pharmacy premises
- an area where both the person receiving MUR services and the registered pharmacist providing those services are able to sit down together and talk at normal speaking volumes without being overheard by any other person.

⁵ http://psnc.org.uk/wp-content/uploads/2013/06/MUR-service-spec-Aug-2013-changes_FINAL.pdf

All of the pharmacies in Gateshead have a consultation area which is an improvement on the 2015 PNA when 45 had provision.

Most (38) of the pharmacies had unaided wheelchair access into the building with two additional pharmacies planning to address this in the next 12 months. However, 45 of the pharmacies had wheelchair access into the consultation room.

MURs aim to improve patient knowledge and use of their medicines 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 which may affect medicine use
- Improving clinical and cost effectiveness of prescribed medicines and reducing waste.

Each pharmacy can provide a maximum of 400 MURs per year and at least 70%⁶ of the reviews must be with patients who fall into one of the national target groups, namely:

- Patients taking high risk medicines
- Patients recently discharged from hospital who had changes to their medicines
- Patients taking respiratory medicines
- Patients at risk of or diagnosed with cardiovascular disease and regularly being prescribed at least four medicines

The recent survey has identified that all 49 pharmacies provide MUR services which was not the case in the 2015 PNA where 44 out of 46 reported provision of MURs.

The number of MURs undertaken by pharmacies is generally driven by the fact that pharmacies can be paid for doing up to 400 MURs per year. If pharmacies do more than 400 MURs per year, there is no guarantee of being paid for the extra consultations performed. This places an unwelcome limit on the potential provision of this service locally, given the prevalence of LTCs and particularly the number of people experiencing more than one LTC.

A further development of the MUR is now termed as "prescription intervention MURs" or MUR plus Medicine Optimisation service. Both services involve the same consultation process. Regular MURs can be prompted pro-actively by identification of a certain group of patients (for example, those in the national target groups) that subsequently lead to an invitation for an MUR. A prescription intervention MUR is more reactive as it is the response to a significant adherence problem with a person's medication that subsequently leads to an MUR being conducted. The issue or issues that prompt the pharmacist to offer an MUR in this circumstance are likely to be highlighted as part of the dispensing process. Commonly the issues will highlight the need for the patient to develop their understanding of their medicines in order to improve their own use of the medicines.

The survey amongst pharmacy providers identified that one pharmacy currently provides a MUR plus service, one intends to provide it in the next 12 months and 33 (67%) would if this was a commissioned service.

4.4.2. New Medicines Services (NMS)

The New Medicines Service aims to help patients who have long term conditions get the best out of any new medicines which have been started particularly for those with the following conditions:

⁶ This service was reviewed and updated nationally in September 2014

- Asthma or Chronic Obstructive Pulmonary Disease
- Type 2 diabetes
- Antiplatelet or anticoagulant therapy
- Hypertension.

The majority of pharmacies in Gateshead provide this service. Pharmacists must be qualified to provide MURs to provide NMS.

The pharmacy department at Queen Elizabeth Hospital would like to continue to work closely with community pharmacy to identify patients who are discharged from hospital who would benefit from more counselling about new medicines they have been prescribed while inpatients.

4.4.3. Appliance Use Review (AUR)

The Appliance Review Service is intended to help patients make best use of their appliances in the same way as the MUR helps make best use of medicines. Training for pharmacists to perform this service is difficult to access, and therefore when provided in a pharmacy it tends to be done by trained appliance specialists. Six pharmacies currently provide this service, and a further two intend to provide it within the next 12 months as shown in the chart in [Appendix 3](#).

4.4.4. Stoma Appliance Customisation (SAC)

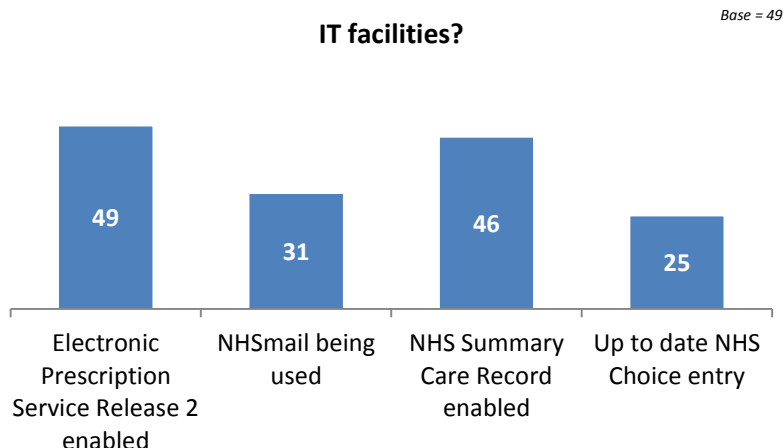
Stoma Appliance Customisation service ensures that stoma products are individually tailored to a patient's needs ensuring that a close fitting product is supplied. Extra training and specialisation is required to provide this service, and therefore it tends to be provided by specialist appliance companies. Six pharmacies currently provide this service in the Gateshead area.

The Health and Wellbeing Board recognises that there is currently good provision of the key advanced pharmacy services in particular regarding medicine use review (MUR) and new medicine service (NMS) via the majority of pharmacies in the locality.

4.4.5. Information Technology (IT) facilities in community pharmacy services

A number of strategies have been introduced to improve connectivity and governance around safe and effective information sharing across healthcare interfaces including the electronic transfer of prescriptions, access to NHS mail and NHS summary care records.

Chart 6 shows the status of the IT facilities recorded in the community pharmacies survey for Gateshead in August 2017.



4.4.6. Electronic Transfer of Prescriptions

Prescriptions can be sent directly from the GP's computer to computers in community pharmacies via a secure internet link. Eventually the paper prescription which is currently given to the patient will no longer be necessary and will cease to be the legal prescription. This will streamline the transfer of prescriptions from GP surgery to the pharmacy nominated by the patient. It will also encourage more GPs to use the

repeat dispensing scheme in the future as some GPs have complained about the awkwardness of using the paper based repeat dispensing system.

Release 1: In Electronic Prescription Service (EPS) release 1 the paper prescription form remained the legal prescription with a parallel electronic message flow linked via a barcode on the prescription which could be used to support the processing of the paper prescription with the aim of establishing the EPS infrastructure without the risk of disruption to the supply of medicines to patients.

Release 2: Release 2 supports the transmission of electronic prescriptions, e-repeat dispensing, patient nomination of their selected pharmacy, and the electronic submission of reimbursement claims to NHS Prescription Services.

The 2015 PNA identified that not all GP practices had been EPS release 2 enabled. The 2017 pharmacy services survey ([Appendix 3](#)) established that all pharmacy service in Gateshead are now EPS release 2 enabled.

4.4.7. NHS Mail and NHS Summary Records

NHS mail is a centrally funded and managed secure email and communications service which is approved by the NHS for exchanging patient data. The key benefit of the service is its security, which means it can be used for transmission of patient information between health professionals. Examples of the types of information that can be transmitted through the service include patient MUR information and hospital discharge communications.

31 (61%) of the pharmacies in Gateshead are using NHS mail with the remaining pharmacies being part of a roll out programme.

The NHS Summary Care Record (SCR) is an electronic summary of key clinical information (including medicines, allergies and adverse reactions) about a patient, sourced from the GP record. It is used by authorised healthcare professionals, with the patient's consent, to support their care and treatment. NHS Digital has been commissioned by NHS England to lead on the implementation of SCR into community pharmacies. Rollout has now commenced, and is forecast to be complete by autumn 2017.

46 (92%) of the pharmacy services in Gateshead are NHS SCR enabled with the remaining pharmacies part of the roll out programme.

The Health and Wellbeing Board recognises the need for effective and safe transfer of information across the healthcare interface to exchange patient data and recommends that this is fully implemented across the services. This includes ensuring that information regarding the services is maintained up to date to enable access to information regarding the broad range of services available from community pharmacies in the area.

4.5. Healthy Living Pharmacies (HLP)

The Healthy Living Pharmacy (HLP) concept was initially developed in Portsmouth and set out to recognise the significant role community pharmacies could play in helping reduce health inequalities by delivering consistent, high quality health and wellbeing services, promoting health and providing proactive health advice with a vision to develop community pharmacies from being suppliers of medicines to become Healthy Living Centres providing self-care advice and treatment for common ailments and healthy lifestyle interventions. The three levels to the service delivery are described as Level 1: Promotion, Level 2: Prevention and Level 3: Protection although levels 2 and 3 are yet to be standardised

Participation in the Healthy Living Pharmacy scheme by pharmacy services across Gateshead places them in an ideal position to support the call in the NHS Plan for health services to scale up efforts on prevention for example in relation to the health and lifestyle challenges.

A key part of the local strategy is to roll out the Making Every Contact Count (MECC) approach that uses the many day-to-day interactions which organisations and individuals have with people as an opportunity to enhance health and wellbeing in respect of diet, physical activity, smoking, alcohol consumption and mental wellbeing. It aims to give front-line workers the skills to engage individuals in conversations about the benefits of behaviour change to boost physical and mental health and wellbeing. The Public Health Team has developed training packages and these are being made available to pharmacies and their staff

Most (45) of the pharmacies in Gateshead indicated that they had either achieved or working towards national self-accreditation level 1 HLP, 4 of the pharmacies were not. The HLP scheme firmly sets out to build the role of the community pharmacy in the healthcare forum, supporting people with their medicines and management of their health and wellbeing.

In addition, all but one of the pharmacies were found to be working towards or had 80% staff in patient facing roles who are now “dementia friends”.

The Health and Wellbeing Board recognises the benefits of Healthy Living Pharmacy (HLP) scheme and recommends that all pharmacies become HLP level 1 enabled to further participate in the health of the community.

The Health and Wellbeing Board recommends that pharmacies should support implementation of the MECC approach.

4.6. Community Pharmacy Quality Payment Scheme

From 1 December 2016 until 31 March 2018 a Community Pharmacy Quality Payments Scheme has been introduced and forms part of the Community Pharmacy Contract Framework (CPCF) by the Department of Health. The scheme encourages a range of activities to widen their role beyond dispensing to improving the quality of health care for patients while at the same time helping to ease demand on other areas of the health system.

Gateway inclusion criteria to the CPCF require the pharmacy service to meet:

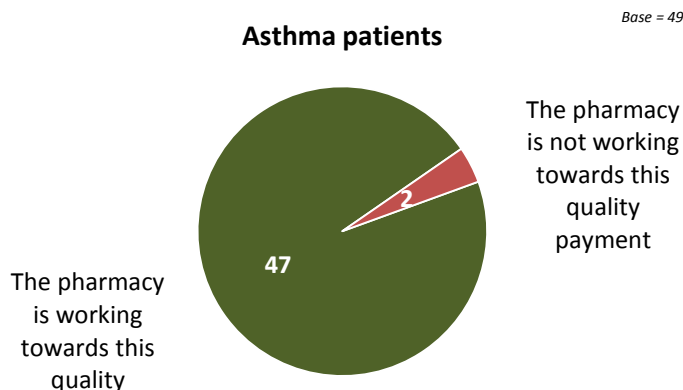
- provision of at least one specified Advanced Service;
- have their NHS Choices entry up to date;
- have the ability for staff to send and receive NHS Mail; and
- ongoing utilisation of the Electronic Prescription Service.

The scheme has established the community pharmacy sector development targets including:

- More effective treatment of asthma – referring asthma patients who have been dispensed too many short-acting reliever inhalers without any preventer inhaler for an asthma review;
- Better care for people with dementia; as part of the drive to ensure 80% of all pharmacy staff working in patient-facing roles takes part in the Alzheimer’s Society’s Dementia Friends training;

- Increased support for healthy living ensuring there is a Royal Society of Public Health trained health champion in every community pharmacy, and each community pharmacy obtains the Healthy Living Pharmacy Level 1 status.

In Gateshead, almost all (47) of the pharmacies responding to the survey identified that they could show evidence of asthma patients, for whom more than 6 short acting bronchodilator inhalers were dispensed without any corticosteroid inhaler within a 6 month period, being referred to an appropriate health care professional for an asthma review.



All pharmacies responding to the survey are either working towards or already have 80% of staff in patient facing roles who are now 'dementia friends'.

However, only 25 (51%) of the pharmacies in Gateshead were found to have up to date information on the NHS Choices page which is part of the gateway criteria for the scheme.

The finding described in this PNA is that there is improved delivery of Pharmacy Advanced Services since the PNA 2015. All pharmacies provide MUR and NMS and all are Healthy Living Pharmacies meeting community pharmacy quality payment scheme for asthma and dementia. Provision of support for people requiring Appliances and Stoma care is more limited in the area but this may be a reflection of the required needs of the local community. All pharmacies have electronic prescription transfer capability and most have or are working to NHS mail and care record capability. Only 25 out of the pharmacy premises had up to date information on NHS Choices

5. Hours of Provision of Medical Services in Gateshead

The basic GP contract requires GPs to offer appointments between 8.00am and 6.30pm Monday to Friday. To improve access, GPs have been required to provide more, routine appointments outside of these core hours. Pharmacy opening hours are not always required to mirror these extended surgery hours, as most appointments are pre-booked and the need for immediate provision of medicines is rare.

Additionally, the two Walk-in Centres at Blaydon and Queen Elizabeth hospital operate Monday to Sunday 8am to 10pm. The walk-in-centres are staffed and run by the Gateshead Health NHS Foundation Trust (Queen Elizabeth Gateshead). They are staffed primarily by nurses, and medicines are supplied from over labelled stock through the use of Patient Group Directions. (There are also three walk in centres in Newcastle operating from 8am to 8pm 7 days per week.)

Walk-in centres provide patients with medicines directly and do not require patients to use community pharmacy services.

Gateshead Doctors Out of Hours Service (GatDoc) provides home and centre visits between 6.30pm and 8am seven days a week, and 24 hour access at weekends and bank holidays. The out of hours provider has arrangements in place to ensure that they can access pharmaceutical advice, even within the out of hours period.

The arrangements for supply of drugs by the out of hours service utilises the network of community pharmacies with extended hours while they are open, with alternative arrangements when they are closed. The out of hours service is provided with up to date information on the extended opening hours of

pharmacies within Gateshead, and those that are convenient for patients with their own transport in neighbouring areas. Patients are provided with FP10 prescription forms when there are pharmacies open. When pharmacies are closed, the out of hours service provides patients with over-labelled medicines stocked in the centre or doctors bag. The cost of these medicines is reclaimed from the supplier by use of FP10 reconciliation forms.

Further work is currently ongoing with regarding emergency supply of medicines and direction to pharmacy services via NHS 111 services, see section 6.3.2

6. Commissioned Services

Since 2013, services are now commissioned from community pharmacies by several commissioners; namely Public Health teams within local councils, Clinical Commissioning Groups and NHS England. Some of these services are provided only through community pharmacies, some are part of a locality wide network of services which use multiple providers to improve patient accessibility. The following locally commissioned services are currently being commissioned either totally or in part from community pharmacies.

6.1. Services Commissioned by Gateshead Clinical Commissioning Group

6.1.1. Think Pharmacy First Minor Ailment Scheme

Think Pharmacy First Minor Ailment Scheme is a scheme targeted at those patients who would not normally purchase self-care medicines from their local pharmacy. These patients, and their families, are in receipt of a means tested benefit and would probably visit their surgery to have a medicine prescribed for a minor ailment because a prescription would be exempt from prescription charges. The current scheme pays for an extended consultation by the pharmacist as well as any medicines required from an approved formulary. The intention of the scheme is to reduce pressure on appointments within general practices and provide a more convenient service for patients, by providing simple remedies directly by consultation with a pharmacist. However, currently it is only intended to be available in pharmacies serving the most deprived parts of Gateshead. The most common interventions are for headlice treatments and paracetamol suspension for infants.

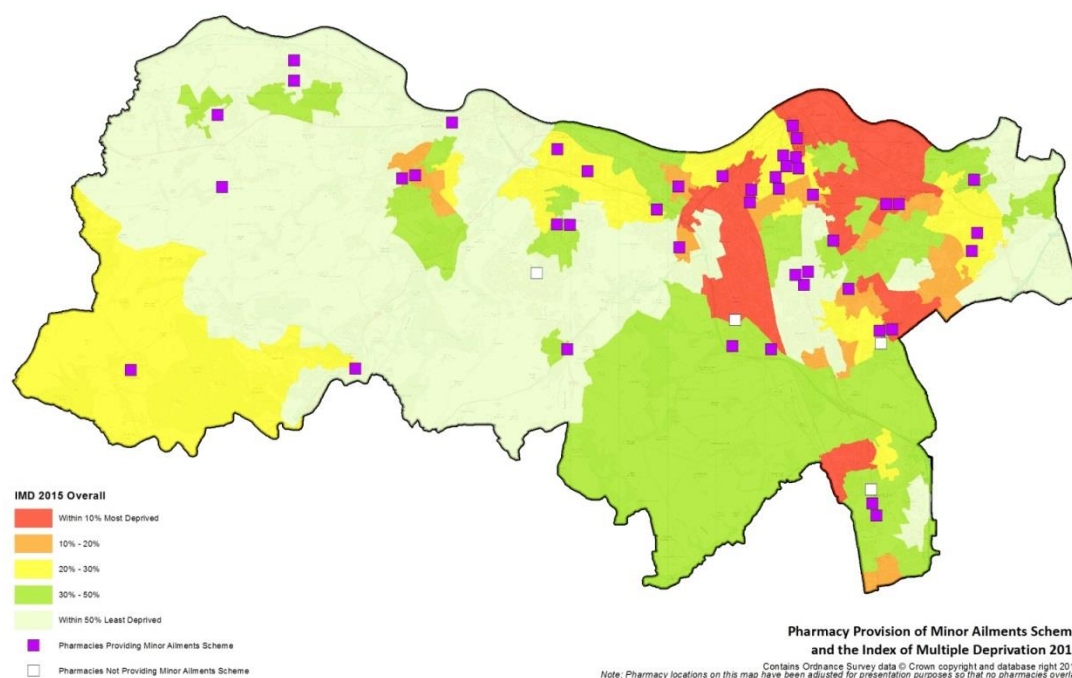
One of the strategic goals of the CCG to make better use of self-care and community pharmacists, reserving GP appointments for the more serious conditions which need medical input.

The 2015 PNA identified that only 11 pharmacies were providing the pharmacy minor ailment scheme and recommended that consideration be given to expanding this service.

The findings of the 2017 survey is that 45 of the pharmacist now provide the Think Pharmacy First Minor Ailment Scheme scheme with one further identifying that they would if commissioned and 2 expressing no interest to participate.

The map below shows the 45 pharmacies within Gateshead which provide medicines directly to patients through the Minor Ailment scheme, plotted against the index of multiple deprivation.

Index of Multiple Deprivation 2010 and Pharmacies Providing Minor Ailments Scheme



6.1.2. Specialist Drug Service

Some drugs are not routinely stocked in pharmacies because they are prescribed infrequently. To ensure that patients and professionals can access these drugs e.g. for terminal care, a few community pharmacies are commissioned by the CCG to hold them in readiness. The community pharmacies commissioned to provide this service are:

- RG Young, Deckham (Central)
- Asda MetroCentre (Inner West)
- Lloyds, Team Valley (South)
- Boots Pharmacy, Ryton (West)
- Boots Pharmacy, , Rowlands Gill (West)
- Well Pharmacy, Birtley (Inner West)

There is adequate provision of the Specialist Drug Service across Gateshead with many other pharmacies willing to provide the service if commissioned

6.2. Services Commissioned by Gateshead Council Public Health Team

6.2.1. Drug Misuse: Harm Reduction Service (Needle exchange)

Gateshead Public Health Team have commissioned the substance misuse services from 'change, grow, live (cgl)' since November 2014 provided under the local service name of Gateshead Evolve. This company is responsible for ensuring that there is adequate provision of needle exchange locations, and sufficient high quality providers of supervised opiate consumption. The aim of the drug misuse service is to reduce the harm done to patients by:

- reducing the risks associated with illegal drug use
- reducing the numbers of people who use illegal drugs

- promoting the responsible use of alcohol.

The key aim of the needle exchange service is to reduce the transmission of blood borne viruses and other infections caused by sharing injecting equipment. Services have been commissioned from community pharmacies and other providers, to provide needle exchange services, which encourage those who still use illegal drugs, to use them as safely as possible by providing access to clean needles and syringes. Appendix 8 map 8j shows the locations of the Pharmacy provision of supervised consumption services.

Needle exchange is currently provided by the Drug and Alcohol Treatment Service at Jackson Street as well as by 8 community pharmacies. A further pharmacy is expecting to provide this service within 12 months.

A further 13 pharmacies expressed an interest in the provider service to providing this service if commissioned

There are sufficient providers of needle exchange services to meet current demand for the service.

6.2.2. Drug misuse: supervised consumption of opiate substitutes

Services have been commissioned from community pharmacies to provide a supervised consumption scheme for methadone for those individuals who have made the decision to reduce their illegal opiate use. Substance misuse services prescribe an opiate substitute, tailoring the dose to the individual's needs. When a pharmacist supervises the patient's consumption of the methadone in the pharmacy, it will not end up being traded on the street, or accidentally being taken by children in the home. This also reduces the potential for criminal activity.

41 pharmacies are commissioned to provide supervised consumption services and are spread across localities as shown in the table below. There is a further pharmacy expecting to provide this service within 12 months and another pharmacy who would like to provide this service [Appendix 8](#) map 8J shows the locations of these services.

Locality	Number of pharmacies providing supervised administration of opiate substitutes service
Central	13
East	5
Inner West	6
South	8
West	9
Gateshead	41

The majority of pharmacies provide a daily contact which allows the pharmacy staff to get to know their clients, and provides opportunities for health messages to be re-enforced. The staff may also react to other cues about the client's health status, sign-posting to other relevant services. It is important that pharmacies providing supervised consumption services are linked into the support services offered by the Public Health team, so that the pharmacy receives relevant updates and alerts. It is also important that pharmacies serving larger numbers of clients have sufficient trained staff to serve all customers' health needs.

There is adequate provision of the supervised consumption of opiate substitutes service across Gateshead where it is needed. In many communities there is a choice of provider.

6.2.3. Emergency Hormonal Contraception (EHC)

To meet public health targets to reduce teenage pregnancy, a locally commissioned service was developed to make EHC more readily available. Although EHC is available without prescription the retail cost (around

£25) means it is unaffordable for many of the target group, and it is not licensed for women under 16. Pharmacists providing the service undergo extra training, and provide treatment against a Patient Group Direction in an attempt to reduce unintended pregnancies and subsequent terminations. Pharmacies can offer this service without the need for an appointment.

Pathways are in place for an immediate referral to community Sexual Health Services or Primary Care for Emergency Intrauterine Contraception as the first line option in response to Emergency Contraception. Pharmacists are trained in prioritising and advising of the optimal pathway. There are also pathways that have been developed to support ongoing reliable contraception and processes that have been implemented to enable pharmacists to refer women into specialist contraceptive services for ongoing advice, treatment and support.

[Appendix 8](#) Map 8H demonstrates the pharmacy provision of EHC across the Gateshead area

- Consultation
- Consultation + EHC
- Consultation + chlamydia screening kit
- Consultation + EHC + chlamydia screening kit

In 2014 1,209 packs of EHC were dispensed through the scheme, however, only 24 (2%) of consultations resulted in chlamydia screening kits being given out. Responsibility for the chlamydia screening element was taken over by South Tyneside NHS Foundation Trust from 1 April 2015.

Appendix Map 8L shows the locations of services which can provide EHC, together with teenage pregnancy “hotspots” (wards which are significantly higher than the England average). There is widespread availability of pharmacies offering EHC across Gateshead. Some people prefer the anonymity associated with supermarkets, rather than using local pharmacies where they may be known.

When considered with GP surgeries, the current service is adequate. Community pharmacies which are open at the weekends, and outside regular service hours during weekdays, are seen to offer a needed service.

6.2.4. Stop smoking services

Gateshead Public Health team has a well-developed NHS Stop Smoking service which is available from GP surgeries and community pharmacies. Pharmacies provide one of the locations for active intervention smoking cessation services and complement the services provided in general practice. The map in Appendix 8 map 8i shows the locations of these services.

A number of pharmacies that are contracted to deliver the stop smoking service (called Active Intervention) are at full capacity, seeing about 6-8 smokers a day, and therefore have to run waiting lists, a particular problem in the East of Gateshead where there is also the highest rates of prevalence. Additionally some of the pharmacies across the Gateshead do not fully deliver the contracted service as they don't have staff trained to do so.

When considered with other providers of stop smoking services, coverage across Gateshead is adequate. However, this service could be further improved with increased participation and training of staff within community pharmacies. Pharmacies with longer opening hours have the opportunity to provide the service to the working population who may not be able to access other services in normal working hours.

6.2.5. Healthy Start Vitamins

Public Health is in the process of exploring, with the LPC, the feasibility of a localised scheme across

Gateshead to provide a universal offer of healthy start vitamins to all pregnant women, women with a child under 12 months and children from six months old to four (i.e. up to their fifth birthday).

6.3. Services Commissioned by NHS England

6.3.1. Seasonal Influenza Vaccination

This service is commissioned to help meet national targets to immunise the over 65s and those at risk from influenza. Pharmacists undergo extra training to deliver this service, but can provide the service privately to those clients who do not qualify for NHS vaccines. Pharmacists have access to influenza vaccine over and above the vaccines ordered by GPs at the beginning of the seasonal campaign.

27 of the pharmacies in the 2017 survey were found to currently provide the influenza vaccination service with a further 5 planning to do so in the future and 4 not planning to provide this service.

6.3.2. Community Pharmacy Referral service

NHS England is currently working with community pharmacy representatives to develop services which they will then commission across the North East as the Community Pharmacy Referral Service (CPRS) with the aim of increasing capacity and relieve pressure on existing urgent care services and deliver care closer to home in the community. The service plans to enable NHS111 to refer patients to community pharmacies across the North East with the pilot planning to commence in December 2017.

7. Non Commissioned Services

Community pharmacies provide a range of services which are neither part of the core contract with the NHS, nor commissioned by Gateshead Council, the Clinical Commissioning Group or NHS England. These services are often very valuable for special patient groups e.g. the housebound, but are provided at the discretion of the pharmacy owner.

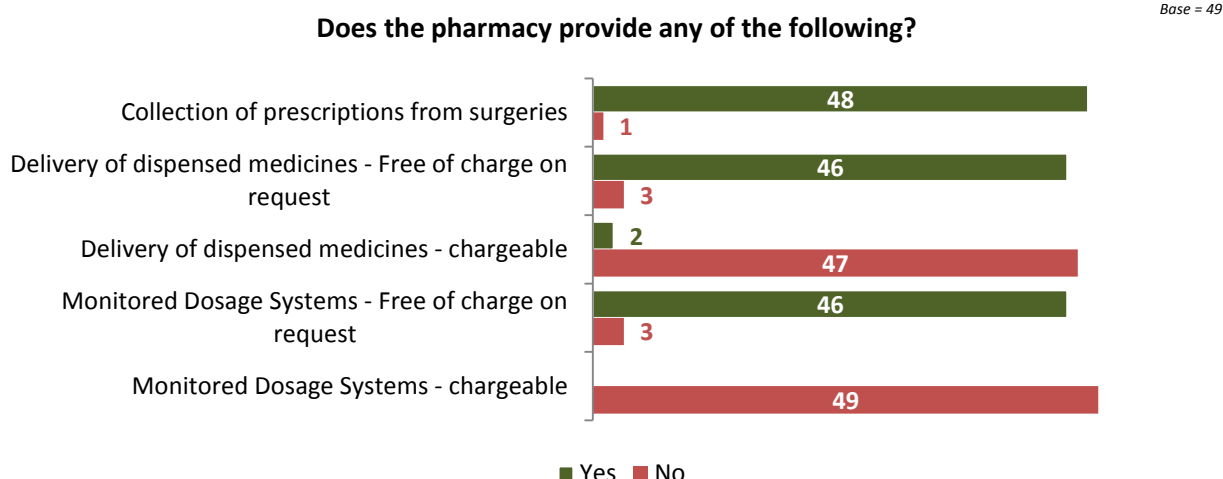
As these services are not reimbursed by the NHS, the decision to provide the service is often a commercial one, especially when the service increases the pharmacy's overhead costs. Non-commissioned services identified in the pharmaceutical needs assessment questionnaire are detailed in the chart below.

[Appendix 4](#) demonstrates that pharmacies offer a wide range of non NHS services. Some of the services are not aligned with the strategic priorities of the CCG or the council, but may be fulfilling a customer generated demand for non NHS services. In addition the response from the pharmacy providers demonstrated that there is considerable appetite for further extension of the pharmacy role within the community

The Health and Wellbeing Board recognises the appetite by community pharmacists in the area for further utilisation of pharmacy services as part of community healthcare provision
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7.1. Collection and delivery services

Two of the services which customers find extremely useful are the prescription collection from the surgery and home delivery services. Patients are often surprised to find that these are not NHS services.



48 pharmacies in Gateshead provide prescription collection services. As electronic prescriptions become more widely used the need for prescription collection services will diminish, as the prescriptions will be sent electronically to the pharmacy which the patient has chosen.

Most pharmacies (48) provide a prescription home delivery service.

Some pharmacies do put a limit on this service with regard to distance, and some only provide this service to housebound patients. Pharmacists are continually trying to balance the desire of customers to have their medicines delivered to their home, with the need to personally advise patients on their medicines.

7.2. Monitored Dosage Systems

Pharmacies are expected to make suitable arrangements or “reasonable adjustment” for patients who have disabilities which ensure that they can take their medicines as instructed by the doctor in line with the Equality Act 2010. This will sometimes require the use of monitored dose systems (MDS) to help patients take complicated drug regimens these are often seen as weekly or monthly cassettes with medication placed in boxes relating to the day and time of the day that the medicine is to be taken.

Family or carers may ask for medicines to be dispensed in MDS, without any assessment of whether this is the most appropriate way of providing the help that the patient needs to safely take their medicines. This is an ideal opportunity for the pharmacy service to engage with the person or their representative to ascertain the most appropriate delivery system for medicines to suit their needs.

NICE guidance NG67⁷ published in March 2017 recognised the role that pharmacists play in supporting people in the community and recommended that “use of a monitored dosage system should only be when an assessment by a health professional (for example, a pharmacist) has been carried out”.

All of the pharmacies responding in the survey were found to provide medicines in MDS, sometimes free of charge or chargeable. Some pharmacies insist on an assessment by GP, social services or other suitable professional before agreeing to provide this service.

⁷ <https://www.nice.org.uk/guidance/ng67>

8. Similar Local Authorities Provision for Pharmaceutical Needs

Chartered Institute of Public Finance and Accountancy Nearest Neighbours Model 2014

The Chartered Institute of Public Finance and Accountancy (CIPFA) nearest neighbours model groups local authority areas with similar characteristics together based on population, age, council tax bands, unemployment, retail premises, housing benefit, people born outside of the UK, standardised mortality rate, and a number of other indicators.

Tables 6 & 7 below demonstrate how Gateshead pharmacy services compare with the nearest neighbours.

Table 6 & 7: How do the CIPFA nearest neighbours compare with Gateshead?
No.

		Darlington (2015)	Halton (2018)	Knowsley (2015)	St. Helens (2015)	Stockton-on-Tees (2015)	Gateshead (2018)	Rochdale (2015)	Tameside (2015)	Barnsley (2015)	Salford (2017)	Stoke-on-Trent (2014)	Rotherham (2015)	Sunderland (2015)	Newcastle upon Tyne (2015)	Doncaster (2015)	Wakefield (2015)
Total population		105,400	126,500	147,200	177,600	194,800	201,000	214,200	221,700	239,300	245,600	251,600	260,800	277,200	292,900	304,800	333,800
Total pharmacies		23	34	36	49	41	49	51	60	53	59	71	69	67	65	79	75
Population per pharmacy		4583	3721	4089	3624	4751	4102	4200	3695	4515	4163	3544	3780	4137	4506	3858	4451
Provide distance selling		1	3	0	2	0	2	2	5	1	0	2	6	1	0	2	2
Pharmacies open...	For 100 hours per week	5	7	5	7	9	1	6	13	5	8	3	8	5	2	12	10
	Before 9am (weekdays)	11	15	17	14	25	22	28	32	28	22	-	-	-	30	-	-
	After 6pm (weekdays)	6	13	21	17	16	10	23	26	18	21	-	-	-	12	-	-
	On Saturday	20	22	24	30	36	35	27	42	21	29	-	-	38	47	54	-
	On Sunday	7	7	5	8	15	6	9	15	8	11	-	-	9	10	15	-
Pharmacies offer...	Supervised consumption	17	20	27	30	26	41	14	-	10	39	47	58	38	57	72	48
	Nicotine Replacement Therapy	20	20	33	41	-	45	-	-	0	15	-	-	-	-	-	-
	Stop smoking	12	24	33	31	18	37	33	-	-	56	27	-	54	42	0	9
	Health checks	6	0	0	0	-	15	0	-	0	8	-	0	3	-	-	-
	Emergency hormonal contraception	16	19	27	30	35	44	17	-	19	51	49	33	20	52	50	15

%

		Darlington	Halton	Knowsley	St. Helens	Stockton-on-Tees	Gateshead	Rochdale	Tameside	Barnsley	Salford	Stoke-on-Trent	Rotherham	Sunderland	Newcastle upon Tyne	Doncaster	Wakefield
Provide distance selling		4%	9%	0%	4%	0%	4%	4%	8%	2%	0%	3%	9%	1	0%	3%	3%
Pharmacies open...	For 100 hours per week	22%	21%	14%	14%	22%	2%	12%	22%	9%	14%	4%	12%	7%	3%	15%	13%
	Before 9am (weekdays)	48%	44%	47%	29%	61%	46%	55%	53%	53%	37%	-	-	-	46%	-	-
	After 6pm (weekdays)	26%	38%	58%	35%	39%	20%	45%	43%	34%	36%	-	-	-	18%	-	-
	On Saturday	87%	65%	67%	61%	88%	70%	53%	70%	40%	49%	-	-	57%	72%	68%	-
	On Sunday	30%	21%	14%	16%	37%	12%	18%	25%	15%	19%	-	-	13%	15%	19%	-
Pharmacies offer...	Supervised consumption	74%	59%	75%	61%	63%	84%	27%	-	19%	66%	66%	84%	57%	88%	91%	64%
	Nicotine Replacement Therapy	87%	59%	92%	84%	-	92%	-	-	0%	25%	-	-	-	-	-	-
	Stop smoking	52%	71%	92%	63%	44%	76%	65%	-	-	95%	38%	-	81%	65%	0%	12%
	Health checks	26%	0%	0%	0%	-	31%	0%	-	0%	14%	-	0%	4%	-	-	-
	Emergency hormonal contraception	70%	56%	75%	61%	85%	90%	33%	-	36%	86%	69%	48%	30%	80%	63%	20%

The population per pharmacy in Gateshead is slightly less but comparable to the direct neighbours in Newcastle, Sunderland and Darlington, with the pharmacies providing a similar spread of opening hours. However, Gateshead has a relatively low provision of 100 hour pharmacy services, having only one provider with Newcastle also only having a noticeably low provision (2 providers) in comparison to other neighbouring areas. However, the data suggests that Gateshead pharmacy services provide a more consistent availability of services, in particular regarding emergency hormonal contraception and stop smoking/ nicotine replacement therapies.

9. Future Provision

A number of reports and publications produced recently are expected to have an impact on the future of pharmacy services in the community:

The pharmacy white paper (April 2008) and the Royal Pharmaceutical Society's 2014 report *Now or Never: Shaping pharmacy for the future*⁸ gave a clear direction of travel for pharmacy services, shifting the emphasis from dispensing medicines to the provision of a wider range of services from community pharmacies, making better use of pharmacists' clinical skills.

Pharmacists are health professionals who have, and are recognised to have, a specific expertise in the use of medicines. To date, their clinical knowledge and expertise in the use of medicines has been underutilised within community pharmacy. These skills must be harnessed to ensure that patients have the same level of pharmaceutical care in the community as they currently receive within hospital settings. This would make a step change in the long-term conditions agenda.

In July 2015, as part of the NHS Five Year Forward View⁹ a new three year initiative to fund, recruit and employ clinical pharmacists in GP surgeries was launched by NHS England.

The benefits patients can expect include extra help to manage long-term conditions, specific advice for those with multiple medications and better access to health checks.

The scheme is focussed on areas of greatest need where GPs are under greatest pressure, and aims to build on the success of GP practices already employing pharmacists in patient-facing roles. The roll out of the clinical pharmacists in General Practice was set to commence from April 2017.

The Pharmacy Integration Fund (PhIF) has been created through the community pharmacy review that is led by the Department of Health as part of the package of proposals under consideration to transform the way pharmacy and community pharmacy services are commissioned from 2016/17 and beyond.¹⁰ In December 2015 the joint letter from the Department of Health and NHS England announced that a consultation would take place on how the Fund should be used. The Pharmacy Integration Fund is the responsibility of NHS England and is separate to any negotiations related to the Community Pharmacy Contractual Framework (CPCF).

The PhIF will be used to commission and evaluate activities that bring about clinical pharmacy integration within the NHS and the community demonstrating improvements in health outcomes for patients and the public in primary care and in the community and will be an important means of driving transformation of the pharmacy sector. It will aim to shift the balance of funding from dispensing activity towards clinical activity, putting pharmacists' skills, as well as those of other pharmacy professionals and their teams, to better use in line with calls from various commentators within the sector over the years to make better use of pharmacies, pharmacists and the wider pharmacy skill set.

Public Health England is developing a "value proposition" to inform the local commissioning of community pharmacy services by local authorities and NICE is expected to publish a guideline in 2018 about the role of community pharmacy in promoting health and well-being. This work is separate to the PhIF but will inform the future local commissioning of services for public health services from community pharmacy.

In September 2016 NHS England published *The Framework for Enhanced Health in Care Homes*. This describes an enhanced health in care homes (EHCH) care model that has come out of the six EHCH vanguards in England. The following areas have been identified for development:

- Mapping the range of services provided by community pharmacies to care homes and how they are commissioned;

⁸ Royal Pharmaceutical Society *Now or Never: Shaping Pharmacy for the Future*

⁹ NHS Five Year Forward View <https://www.england.nhs.uk/five-year-forward-view/>

¹⁰ <https://www.gov.uk/government/publications/putting-community-pharmacy-at-the-heart-of-the-nhs>

- Deployment of pharmacy professionals into care homes and evaluation of the models of integrated clinical pharmacy that achieve the best outcomes for patients.

The intention is to develop the new models of integrated clinical pharmacy for people looked after in their own homes.

Gateshead is one of only six areas nationally to be awarded Vanguard status by NHS England for its work to improve the health of patients living in care homes. The Vanguard bid, which is also backed by Gateshead Council, aims to build on the success of the area's care home initiative, which has already reduced non-elective admissions to hospital from people living in care homes by 9% in two years. The initiative sees individual GP practices each allocated to a specific care home, providing greater continuity of care and more effective prevention of illness through regular home visits.

The EHCH should provide further opportunity for pharmacists to support the vanguard initiative and to enhance the pharmacists role in multidisciplinary working.

In December 2016 The Murray Report¹¹ was published. The report commissioned by the Chief Pharmaceutical Officer to review Community Pharmacy Clinical Services. The report is a comprehensive review of the available evidence, points the way to a more clinical future for community pharmacists and pharmacy technicians which will help patients to benefit from their expertise as clinical healthcare professionals.

The report concluded In the future evolving Sustainability and Transformation Plans (STPs) may be able to provide the broader, whole-health economy oversight that would enable the system to unlock the potential of community pharmacy.

The Murray Report recommended:

- Services
 - Full use of the electronic repeat dispensing service
 - The MUR service should be redesigned to include on-going monitoring and regular follow-up with patients as an element of care pathways
 - Minor ailment schemes should be locally commissioned across the whole of England
 - Consideration should be given to smoking cessation services becoming an element of a national contract
- New models of care
 - Existing Vanguard programs and resources should be used, in conjunction with the PhIF to develop the evidence base for community pharmacists within new models of care.

A significant element includes overcoming barriers presented by the current complexities in the commissioning landscape that can in part be seen in the current provision of enhanced services.

Pharmacies provide a convenient and less formal environment for people to access readily available professional advice and help to deal with everyday health concerns and problems. The role of pharmacies in promoting self-care will become even more important as the healthcare budget becomes stretched, and GPs have less time to spend on those with more minor health conditions.

The pharmacy white paper quotes a survey showing that 84% of adults visit a pharmacy at least once a year. Our local survey found that 12% of respondents visited a pharmacy once a week and a further 49% visited at least once a month. Moreover, 38% said that they always visited the same pharmacy and a further 49% said that they mostly visited the same pharmacy. This gives the opportunity for pharmacists to have a complete picture of patients' health needs. Pharmacists in Gateshead are accessible and many offer extended opening times (late into the evenings or at weekends) to suit patients and customers.

¹¹ Independent Review of Community Pharmacy Clinical Services. The Murray Report 2016

<https://www.england.nhs.uk/commissioning/wp-content/uploads/sites/12/2016/12/community-pharm-clncl-serv-rev.pdf>

9.1. Potential future roles

Newcastle Gateshead Clinical Commissioning Group envisages seamless care for patients across the whole healthcare system, which would mean all elements of pharmacy, hospital, community and primary care working together to optimise the use of medicines and deliver better care for patients. The CCG principles for medicines are to ensure safe prescribing, reduce waste medicines, increase cost effective prescribing and ensure patient satisfaction.

The local Making Every Contact Count (MECC) approach uses the many day-to-day interactions which organisations and individuals have with people as an opportunity to enhance health and wellbeing in respect of diet, physical activity, smoking, alcohol consumption and mental wellbeing. It aims to give front-line workers the skills to engage individuals in conversations about the benefits of behaviour change to boost physical and mental health and wellbeing. The Public Health Team has developed training packages and these are being made available to community pharmacies and their staff.

Gateshead's practice medicines optimisation team have shown that pharmacists can have an important role in reviewing medication within the care home setting. If there was even closer working between the practice pharmacist team and community pharmacists who supply medicines to care homes, then greater gains could be made in reducing waste and supporting care homes in using medicines more effectively.

The CCG would like to see community pharmacists giving more support to housebound patients with targeted MURs. As respiratory disease is higher than the national average within Gateshead, causing frequent admissions to hospital, the CCG would like to see a focus on improving inhaler technique within this population.

Gateshead Health NHS Foundation Trust would also like to engage with community pharmacists, to take forward the project currently being supported by the Academic Health Sciences Network (AHSN) which identifies patients who would benefit from a discharge MUR or new medicines intervention to help recently discharged patients get the most from new medicines prescribed while in hospital. The Queen Elizabeth hospital has a particular interest in referring patients admitted to hospital for smoking related exacerbations, to community pharmacy smoking cessation services, when the patient may be highly motivated to quit smoking.

9.2. Potential future services

The Healthy Living Pharmacy scheme will have engagement by the majority of pharmacy services across Gateshead which should provide clear benefits around the health promotion agenda, in relation to the lifestyle challenges in Gateshead. There is therefore great opportunity for the pharmacy to act as source of health promotion activities and knowledge within that community; a one stop shop, gaining the trust and support of local residents and increasing footfall.

The majority of the community pharmacies are engaged in the provision of most of the advanced services, in particular MUR and NMS as well as local commissioned services by Gateshead Council and the CCG. This therefore places the community pharmacy service in prime position to support the community in the current health needs.

In addition, response from the pharmacy survey undertaken for the PNA demonstrates further appetite to engage in other services across the locality.

There may also be opportunities to enhance NHS health awareness through pharmacy and it is of note that many of the people responding to the public survey identified services what they would use if they were available, perhaps not realising that some of these were already being provided. Consideration could

therefore be made regarding how services are promoted to the general public and other health care services to ensure maximum benefit is gained from these services an example of which is the Community pharmacy referrals Service scheme planned to be piloted in December 2017.

The potential for further integration across the healthcare community, as outlined in the White Paper and Murray report as well as the implementation of the Pharmacy integration fund and enhanced services into care homes demonstrate recognition of the potential for community pharmacy services both in the important role to play in promoting the safe and effective use of medicines and in reducing inappropriate hospital admissions but also in the further development of clinical skills and implementation in the community setting.

Community pharmacists in Gateshead are ideally placed, and have the potential, to make a significant contribution to the delivery of services to meet the health needs of the population of Gateshead.

10. Reflection on PNA 2015 recommendations

The 2015 PNA concluded that there was adequate provision of pharmacies across Gateshead Monday to Friday 9am to 5pm. Services are more limited on Saturdays and that the pharmacies that opened on Saturday mornings and afternoons were sufficient for working residents to access pharmacy services. Sunday and evening provision across Gateshead was found to be limited and mainly dependant on supermarket pharmacies.

The population of Gateshead was found to have increased by less than 1% since the previous PNA and therefore, despite the fact that there is one less pharmacy provision, the current provisions continues to be considered adequate across the most of Gateshead, with the possible exception of the East locality.

Concerns were raised about the accessibility of pharmacy services outside normal hours and therefore recommendations were made to review the pharmacy services in the out of hours period.

There does not appear to have been a review, and accessibility of pharmacy services remains largely unchanged since the previous PNA. It is therefore recommended that NHS England and the CCG work with the LPC to review availability of pharmacy services out of normal working hours and implement any required changes.

There was recognition that the role of the Pharmacy Minor Ailments scheme was being reviewed and that with only 11 pharmacies participating at the time, there was willingness for further provision.

The re-launched Pharmacy First minor ailment scheme is now provided across the majority (45) of community pharmacies in Gateshead.

There was adequate support for the specialist drug access services, services for drug users: needle exchange and supervised emergency contraception services and smoking cessation although there was appetite identified within pharmacy services for further involvement in these schemes.

This continues to be the case in 2017.

There was also recognition to the potential to reinvigorate the Healthy Living Pharmacy scheme. By encouraging pharmacies to sign up there will be clear benefits around the health promotion agenda, in relation to the lifestyle challenges in Gateshead

11 of the pharmacies in Gateshead are now registered and a further 33 working towards the Healthy Living Pharmacies Scheme level 1.

11. Conclusions and Recommendations

There are 49 pharmacies in Gateshead, located primarily in areas of higher population density with 99.8% of residential addresses being within 1.5 miles of a community pharmacy. There is more than one pharmacy in most towns and urban areas, allowing patient choice and capacity to provide enhanced services.

There is adequate provision of pharmacies across Gateshead Monday to Friday 9am to 5pm. Services are more limited on Saturdays, but two thirds of pharmacies are open on Saturday mornings and a third are open on Saturday afternoons, allowing working residents to access pharmacy services. Sunday and evening provision across Gateshead is limited and mainly dependant on supermarket pharmacies. The two dispensing GP practices make a valuable contribution to the dispensing of prescriptions in very rural areas. It may be desirable for NHS England to review controlled localities, in order that new maps may be produced.

Response to the public survey indicated that 87% of respondents always or usually use the same pharmacy and more than 70% said it was easy to travel on foot or by public transport

The Health and Wellbeing Board considers that the current number of pharmacies and overall number of hours is adequate to meet the needs of people accessing pharmacy services, with the possible exception of the East locality.

However, currently there is varied access to pharmacy services in the evenings and at weekends across the localities and it is therefore recommended that NHS England and the CCG work with the LPC to review availability of pharmacy services out of normal working hours and implement any required changes. Should gaps in service be identified through that review a supplementary statement will be added to this Pharmaceutical Needs Assessment.

All pharmacies in Gateshead currently provide a number of advanced services including Medicine Use Review (MUR) and New Medicine Service. The majority of pharmacies in Gateshead are or are working to being an accredited with the Health Living Scheme which would contribute to the management of long term conditions and supporting people in the community including working into target groups such as those at risk of falls, dementia care, asthma and people with multimorbidity and multiple medications such as those residing in care homes.

In addition, a number of initiatives are expected to offer opportunity to further develop the clinical pharmacist role within the community setting, in particular in supporting residents in care homes.

The Health and Wellbeing Board recognises the benefits of Healthy Living Pharmacy (HLP) scheme and recommends that all pharmacies become HLP level 1 enabled to further participate in the health of the community.

The Health and Wellbeing Board recommends that pharmacies should support implementation of the MECC approach.

The majority of the pharmacy services in Gateshead are working towards the Community Pharmacy Quality Scheme which will set out to widen their role beyond dispensing to improving the quality of health care for patients while at the same time helping to ease demand on other areas of the health system. A key element of this service delivery is ensuring robust communication across the healthcare interface using electronic systems, currently in place planned for implementation by the majority of the pharmacy services.

The Health and Wellbeing Board recognises the need for effective and safe transfer of information across the healthcare interface to exchange patient data and recommends that this is fully implemented across the services. This includes ensuring that information regarding the services is maintained up to date to enable access to information regarding the broad range of services available from community pharmacies in the area.

With regard to the locally commissioned services provided by community pharmacies, the Pharmacy Minor Ailments (Pharmacy First) having been reviewed is now provided by the majority (94%) of pharmacies in the area.

There is adequate participation in the Gateshead Council commissioned services by pharmacies across the locality including: services for drug users - needle exchange and supervised consumption, emergency contraception is available from 63% (31 out of 49) of the pharmacies across Gateshead and all GP practices and smoking cessation treatment is available from 81% (39 out of 49) of the pharmacies. There may be further opportunities such as a localised service to supply healthy start vitamins to all pregnant women with a child under 12 months and children from six months old to four (i.e. up to their fifth birthday).

The Health and Wellbeing Board considers that provision of the locally commissioned services is adequate. However, some of these services such as smoking cessation could be further improved with increased participation and training of staff within community pharmacies. Pharmacies with longer opening hours have the opportunity to provide the service to the working population who may not be able to access other services in normal working hours.

38 community pharmacists have already been commissioned by NHS England to provide flu vaccine to target groups and a further 5 are undergoing training which will contribute to Gateshead reaching more of the target at risk population.

There are no gaps in the provision of specialist drug access services across Gateshead within the current network across South of Tyne with 6 pharmacy services, spread across the whole locality providing this service.

The Health and Wellbeing Board recognises the benefit of active participation of the pharmacy services in the locally commissioned services and also that other pharmacies expressed appetite in further provision of services.

After considering all the elements of the PNA, the Health and Wellbeing Board concludes that, with the possible exception of the East Locality, there is adequate provision of NHS pharmaceutical services across Gateshead.

Appendix 1: Glossary of Abbreviations

AUR	Appliance Use Review
BME	Black or Minority Ethnic group
CCG	Clinical Commissioning Group
CHD	Coronary Heart Disease
CIPFA	Chartered Institute of Public Finance and Accountancy
COPD	Chronic Obstructive Pulmonary Disease
CPCF	Community Pharmacy Contract Framework
EHCH	Enhanced Health in Care Homes scheme
EPS	Electronic Prescription Service
ESP	Essential Small Pharmacy
GatDoc	Gateshead Doctors Out of Hours Service
GP	General Practitioner
HLP	Healthy Living Pharmacies
HWB	Health and Wellbeing Board
IMD	Index of Multiple Deprivation
JSNA	Joint Strategic Health Needs Assessment
LPC	Local Pharmaceutical Committee
LSOA	Lower Layer Super Output Area
LTC	Long Term Conditions
MDS	Monitored Dosage System
MUR	Medicines Use Review
NDTMS	National Drug Treatment Monitoring System
NHS	National Health Service
NICE	National Institute for Health and Care Excellence
NMS	New Medicine Service
NUMAS	NHS Urgent Medicine Supply
PCO	Primary Care Organisation
PHE	Public Health England
PhIF	Pharmacy Integration Fund (PhIF)
PNA	Pharmaceutical Needs Assessment
POPPI data	Projection Older People Population Information
SCR	Summary Care Records
STI	Sexually Transmitted Infection
SAC	Stoma Appliance Customisation Service

Appendix 2: Consultation on the Draft Pharmaceutical Needs Assessment

The formal consultation on the draft PNA for Gateshead will run from 23rd October 2017 to 22nd December 2017 in line with the guidance on developing PNAs and section 242 of the Health Service Act 2012, which stipulates the need to involve Health and Wellbeing Boards in scrutinising Health Services.

In keeping with the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations (2013) the following stakeholders will be consulted during this time:

- Gateshead Local Pharmaceutical Committee
- Gateshead Local Medical Committee
- All persons on the pharmaceutical lists and all dispensing doctors list in Gateshead
- LPS chemists in Gateshead with whom NHS England has made arrangements for the provision of any local pharmaceutical services;
- Gateshead Clinical Commissioning Group
- Gateshead Healthwatch
- Gateshead Health NHS Foundation Trust, and Northumberland, Tyne & Wear Mental Health NHS Foundation Trust
- NHS England
- Neighbouring HWBs in Newcastle, Durham, Gateshead, South Tyneside and Sunderland.
- General Practitioners

Letters are to be sent to all consultees informing them of the web site address which contained the draft PNA document.

Findings of consultation:

To be completed after consultation process

Appendix 3: Survey of Pharmaceutical Service Providers

Survey of Pharmaceutical Service Providers

Pharmaceutical Needs Assessment 2018 *(Key Questions)*

Access

Does the pharmacy entrance allow for unaided wheelchair access?

- ☐ Yes
- ☐ No
- ☐ No - Plans in place to address in the next 12 months

Consultation facilities

Consultation areas should meet the standard set out in the contractual framework to offer advanced services

Is there a consultation area?

- ☐ Available (including wheelchair access) on the premises
- ☐ Available (without wheelchair access) on premises
- ☐ Planned within next 12 months
- ☐ No consultation room available
- ☐ Other (please specify)

IT facilities

IT facilities?

- ☐ Electronic Prescription Service Release 2 enabled
- ☐ NHS Mail being used
- ☐ NHS Summary Care Record enabled
- ☐ Up to date NHS Choice entry

Community Pharmacy Quality Payments Scheme

National self-accreditation Level 1 HLP Award

Select the option that applies:

- ☐ The pharmacy has achieved HLP status
- ☐ The pharmacy is working towards HLP status
- ☐ The pharmacy is not currently working towards HLP status

Dementia friends

Select the one that applies:

- ☐ The pharmacy is working towards this quality payment, or 80% of staff in patient facing roles are now dementia friends
- ☐ The pharmacy is not working towards this quality payment

Asthma patients

The pharmacy can show evidence of asthma patients, for whom more than 6 short acting bronchodilator inhalers were dispensed without any corticosteroid inhaler within a 6 month period, being referred to an appropriate health care professional for an asthma review.

Select the one that applies:

- ☐ The pharmacy is working towards this quality payment
- ☐ The pharmacy is not working towards this quality payment

Services**Advanced services**

Please give details of the Advanced Services provided by your pharmacy:

	Yes	Soon	No
	Currently providing	Intending to begin within the next 12 months	Not intending to provide
Medicines Use Review service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
New Medicine Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appliance Use Review service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stoma Appliance Customisation service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flu Vaccination Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NHS Urgent Medicine Supply Advanced Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Services (Enhanced, Commissioned and Private)

Use this section to record which Local services you currently deliver or would like to deliver at your pharmacy. These can be Enhanced Services, commissioned by the NHS England Area Team, Public Health Services commissioned by a Local Authority, CCG services or private services.

Please tick the box that applies for each service:

	Currently provide	Intend to provide within 12	Willing to provide	Not intending to provide	Offer
privately					
Anticoagulant Monitoring Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anti-viral Distribution Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Care Home Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlamydia Testing Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlamydia Treatment Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contraception Service (not an EHC service)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Supply Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gluten Free Food Supply Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home Delivery Service (not appliances)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independent Prescribing Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supplementary Prescribing Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Language Access Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medication Review Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medicines Assessment & Compliance Support Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MUR Plus/Medicines Optimisation Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Needle and Syringe Exchange Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obesity management (adults and children)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not Dispensed Scheme	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Out of hours services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phlebotomy Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prescriber Support Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sharps Disposal Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Schools Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patient Group Direction Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Disease specific Medicines Management Service:

Allergies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alzheimer's/dementia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asthma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COPD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Depression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes type I	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes type II	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Epilepsy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heart Failure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hypertension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parkinson's disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Screening Services:

Alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cholesterol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gonorrhoea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. pylori	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HbA1C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hepatitis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Vaccinations:

Seasonal Influenza Vaccination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Childhood vaccinations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hepatitis (at risk workers or patients)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HPV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel vaccines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

CCG Commissioned Services:

Think Pharmacy First Minor Ailments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On Demand Availability of Specialist Drugs Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NRT Supply Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Active Intervention Stop Smoking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Hormonal Contraception Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervised Administration of methadone, buprenorphine etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NHS Health Checks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Does the pharmacy provide any of the following?

	Yes	No
Collection of prescriptions from surgeries	<input type="checkbox"/>	<input type="checkbox"/>
Delivery of dispensed medicines - Free of charge on request	<input type="checkbox"/>	<input type="checkbox"/>
Delivery of dispensed medicines - chargeable	<input type="checkbox"/>	<input type="checkbox"/>

Monitored Dosage Systems - Free of charge on request

☐☐

Monitored Dosage Systems - chargeable

☐☐

Results of Survey of Pharmaceutical Service Providers

Survey of Pharmacies

When We Consulted

17 July 2017 – 11 August 2017

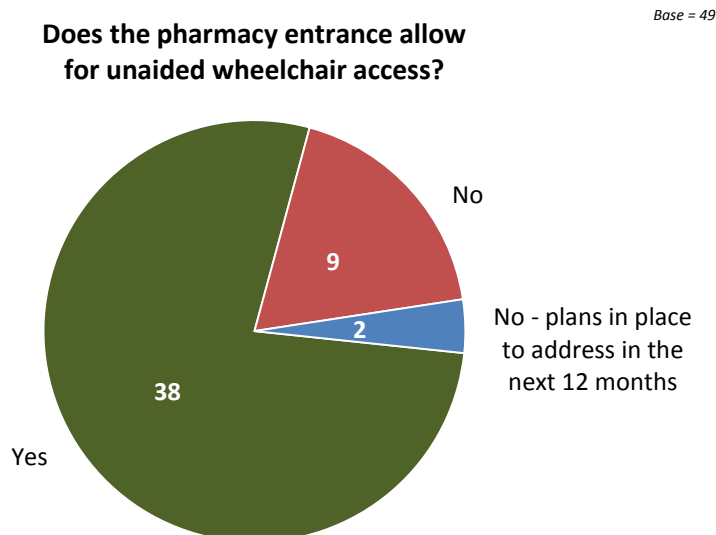
How We Consulted and Who Responded

A survey was built on-line using the PharmOutcomes website and circulated to all Gateshead pharmacies by the Local Pharmaceutical Committee Members on the PNA Steering Group.

All 49 pharmacies in Gateshead responded to the survey.

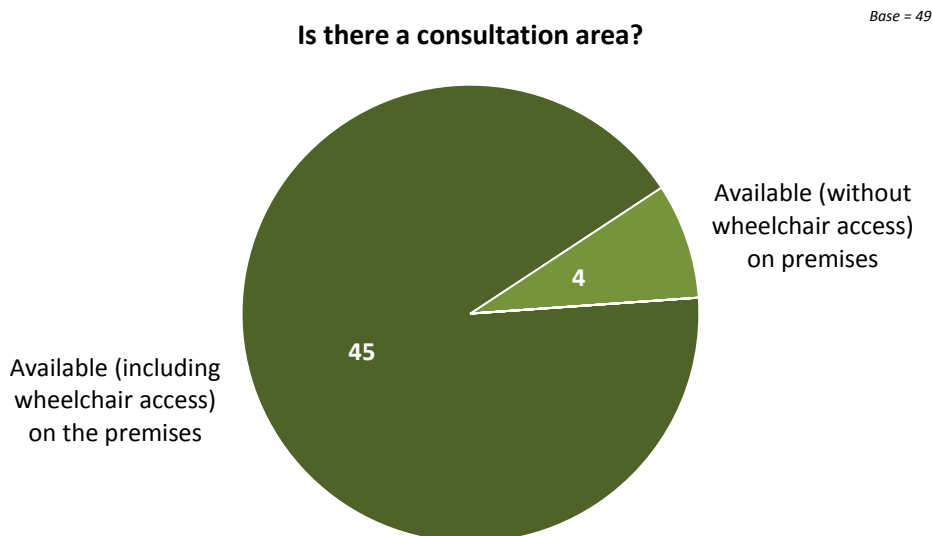
Survey Results

Most (38) pharmacies have unaided wheelchair access into their building and two additional pharmacies are planning to address this in the next 12 months. However, nine pharmacies do not have unaided wheelchair access.



All 49 of the pharmacies responding to the survey had a consultation area.

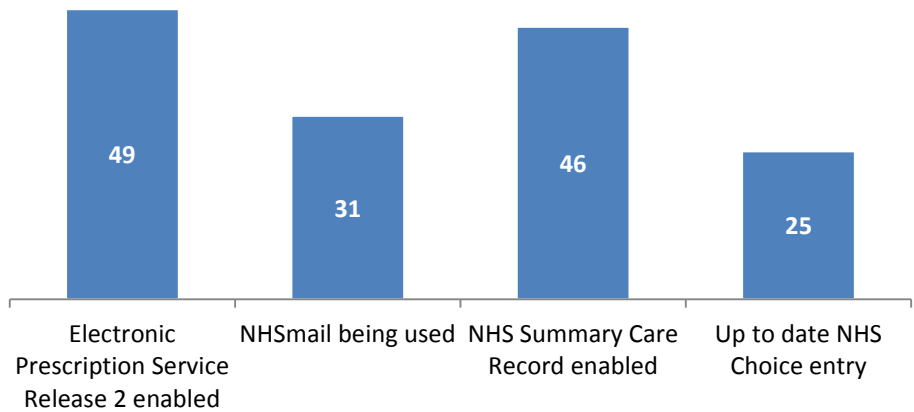
45 of these had wheelchair access into the consultation area.



All pharmacies are EPS Release 2 enabled, and 46 are NHS Summary Care Record enabled. 31 are using NHS Mail and 25 have an up to date NHS Choices entry.

IT facilities?

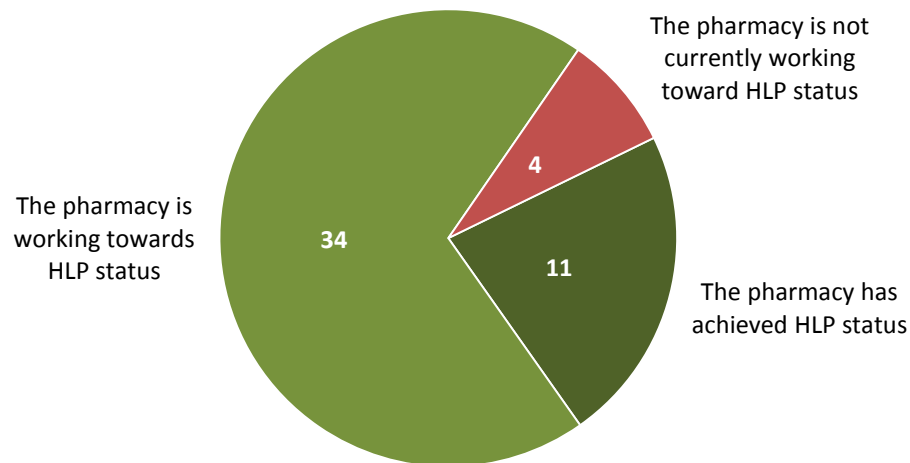
Base = 49



Most of the pharmacies responding to the survey have either achieved national self-accreditation level 1 HLP status (11), or are working towards it (34). Only 4 pharmacies are not working toward HLP status.

National self-accreditation Level 1 HLP Award

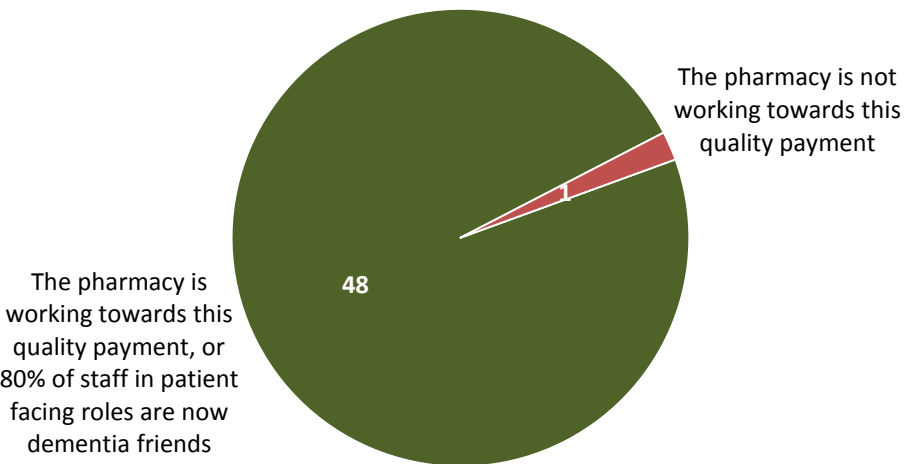
Base = 49



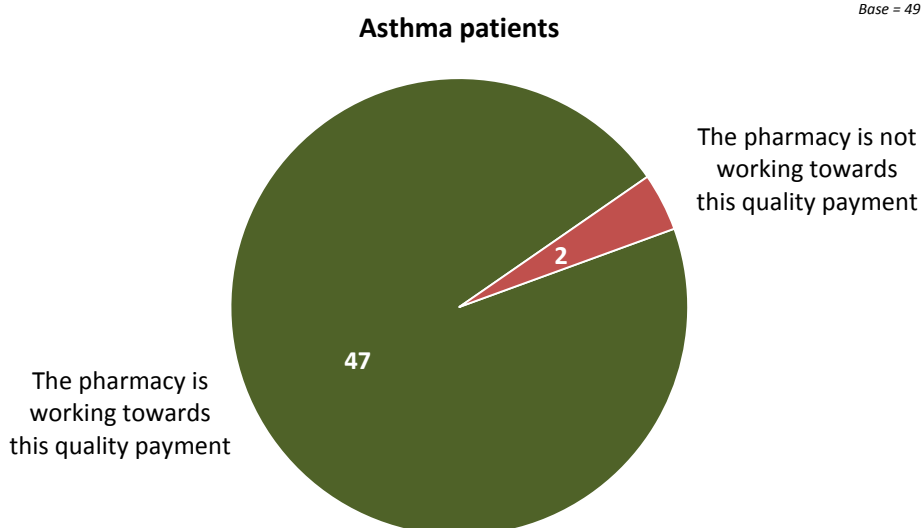
48 pharmacies responding to the survey are either working towards or already have 80% of staff in patient facing roles who are now 'dementia friends'. Only one pharmacy is not working towards this quality payment.

Dementia friends

Base = 49



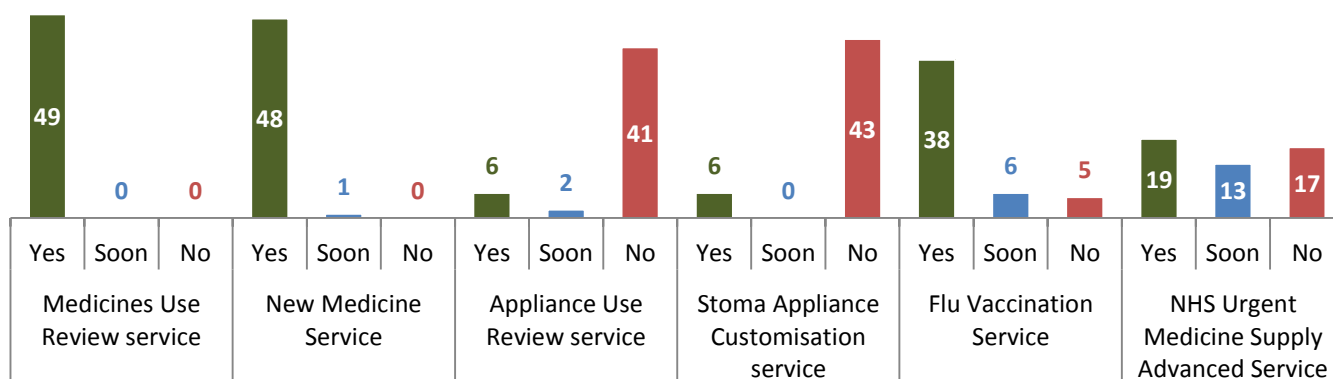
Almost all (47) of the pharmacies responding to the survey can show evidence of asthma patients, for whom more than 6 short acting bronchodilator inhalers were dispensed without any corticosteroid inhaler within a 6 month period, being referred to an appropriate health care professional for an asthma review.



Very few pharmacies provide a stoma appliance customisation service (6) or appliance use review (6). However all, or almost all, provide the New Medicine Service (48) and Medicines Use Review (49). In addition 38 pharmacies provide a Flu Vaccination Service with 6 intending to begin providing the service in the next 12 months. Also, whilst only 19 provide the NHS Urgent Medicine Supply Advanced Service, 13 intend to provide it within the next 12 months.

Please give details of the Advanced Services provided by your pharmacy:

Base = 49



Do you provide these services?

Base = 48

	Currently provide	Intend to provide within next 12 months	Would provide if commissioned	Not intending to provide	Offer privately
Anticoagulant Monitoring Service	3	1	28	17	0
Anti-viral Distribution Service	0	0	28	20	1
Care Home Service	6	0	22	17	4
Chlamydia Testing Services	12	1	26	10	0
Chlamydia Treatment Service	0	1	35	13	0
Contraception Service (not an EHC service)	5	1	33	10	0

	Currently provide	Intend to provide within next 12 months	Would provide if commissioned	Not intending to provide	Offer privately
Emergency Supply Service	28	5	14	2	0
Gluten Free Food Supply Service	4	0	31	14	0
Home Delivery Service (not appliances)	37	1	2	3	6
Independent Prescribing Service	0	0	21	28	0
Supplementary Prescribing Service	0	0	18	31	0
Language Access Service	0	0	24	25	0
Medication Review Service	8	1	32	8	0
Medicines Assessment & Compliance Support Service	2	1	33	13	0
MUR Plus/Medicines Optimisation Service	1	1	33	14	0
Needle and Syringe Exchange Service	8	1	13	27	0
Obesity management (adults and children)	0	0	36	13	0
Not Dispensed Scheme	1	0	30	17	1
Out of hours services	1	0	21	26	1
Phlebotomy Service	0	0	23	24	2
Prescriber Support Service	0	0	31	18	0
Sharps Disposal Service	3	0	26	20	0
Schools Service	1	0	32	16	0
Patient Group Direction Service	10	1	27	8	3

Disease specific Medicines Management Service:	Currently provide	Intend to provide within next 12 months	Would provide if commissioned	Not intending to provide	Offer privately
Allergies	0	2	34	13	0
Alzheimer's/dementia	0	0	36	13	0
Asthma	3	1	32	13	0

Disease specific Medicines Management Service:	Currently provide	Intend to provide within next 12 months	Would provide if commissioned	Not intending to provide	Offer privately
CHD	0	0	34	15	0
COPD	3	0	33	13	0
Depression	0	0	36	13	0
Diabetes type I	0	0	36	13	0
Diabetes type II	1	0	35	13	0
Epilepsy	0	0	36	13	0
Heart Failure	0	0	35	14	0
Hypertension	1	0	35	13	0
Parkinson's disease	0	0	36	13	0

Screening Services:	Currently provide	Intend to provide within next 12 months	Would provide if commissioned	Not intending to provide	Offer privately
Alcohol	2	0	31	15	0
Cholesterol	4	1	32	12	0
Diabetes	7	1	30	10	1
Gonorrhoea	1	0	28	19	1
H. pylori	0	0	32	17	0
HbA1C	0	0	33	16	0
Hepatitis	0	0	30	18	1
HIV	0	0	25	23	1

Vaccinations:	Currently provide	Intend to provide within next 12 months	Would provide if commissioned	Not intending to provide	Offer privately
Seasonal Influenza Vaccination	27	5	6	4	7
Childhood vaccinations	2	1	33	12	1

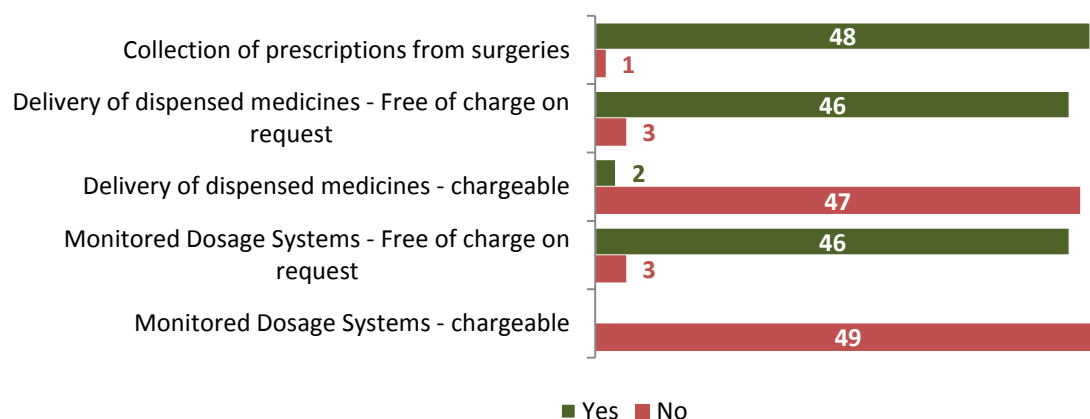
Vaccinations:	Currently provide	Intend to provide within next 12 months	Would provide if commissioned	Not intending to provide	Offer privately
Hepatitis(at risk workers or patients)	0	1	32	15	1
HPV	1	1	31	15	1
Travel vaccines	1	3	33	11	1

CCG	Commissioned	Currently provide	Intend to provide within next 12 months	Would provide if commissioned	Not intending to provide	Offer privately
Services:						
Think Pharmacy First Minor Ailments		45	1	1	2	0
On Demand Availability of Specialist Drugs Service		4	1	32	12	0
NRT Supply Service		39	4	4	2	0
Active Intervention Stop Smoking		23	6	12	8	0
Emergency Hormonal Contraception Service		31	9	7	2	0
Supervised Administration of methadone, buprenorphine etc.		40	1	1	7	0
NHS Health Checks		5	6	24	14	0

Almost all (48) pharmacies collect prescriptions from surgeries. Almost all (48) pharmacies deliver dispensed medicines, but only 46 do so free of charge, the other 2 charge for this service. None of the pharmacies responding to the survey charged for monitored dosage systems, but only 46 provided the service free of charge.

Base = 49

Does the pharmacy provide any of the following?



Appendix 4: Public Survey and Analysis Results

How do you use your local pharmacy?

We'd like your help to improve what is on offer in our local pharmacies by answering a few questions about the way you use them.

Your responses will help us to write a local Pharmaceutical Needs Assessment, which will help to ensure that your local pharmacy provides the services you need both now and in the future.

Once you've answered the questions below just hand it to a member of staff behind the counter. Alternatively, take this form away with you and visit www.gateshead.gov.uk/consultationsnew to complete it online.

Thank you for your help - **Gateshead Health and Wellbeing Board**



Complete it online at
www.gateshead.gov.uk/consultationsnew

How you use pharmacies

1. How often do you visit this or any other pharmacy?

(Please tick one box only)

- ☐ At least once a week
- ☐ At least monthly
- ☐ At least every three months
- ☐ At least every six months
- ☐ At least once a year
- ☐ Less than once a year

2. Do you always visit the same pharmacy?

(Please tick one box only)

- ☐ Always
- ☐ Usually
- ☐ No

3. Think about the pharmacy you visit most often, how do you usually get there?

(Please tick one box only)

- ☐ On foot
- ☐ Public transport
- ☐ Car or taxi
- ☐ Other

4. Thinking about the same pharmacy, is it easy or difficult to get there on foot or by public transport?

(Please tick one box only in each column)

- | | On foot | Public transport |
|------------|--------------------------|--------------------------|
| Easy | <input type="checkbox"/> | <input type="checkbox"/> |
| Difficult | <input type="checkbox"/> | <input type="checkbox"/> |
| Don't know | <input type="checkbox"/> | <input type="checkbox"/> |

5. Again, thinking of the same pharmacy, what type of pharmacy is it?

(Please tick one box only)

- ☐ On the High street
- ☐ In a supermarket
- ☐ In a Doctor's surgery
- ☐ Other

6. Have you ever needed something from a pharmacy but found it was closed at the time?

(Please tick one box only)

- ☐ Yes
- ☐ No (Go to Q9)
- ☐ Don't know

7. What did you need?

8. What did you do when you realised it was closed?

(Please tick one box only)

- ☐ Went to another pharmacy
- ☐ Went to a walk-in centre
- ☐ Waited until the pharmacy was open
- ☐ Went to a hospital
- ☐ Other

9. When you visit a pharmacy, which services do you use and are there any that you would be likely to use if they were available?

(Please tick all that apply)

	I use this	Likely to use if available		I use this	Likely to use if available
General Pharmacy Services			Sexual Health		
Dispensing of prescriptions	<input type="checkbox"/>		Pregnancy testing	<input type="checkbox"/>	<input type="checkbox"/>
Buying over the counter medicines	<input type="checkbox"/>		Chlamydia screening/treatment	<input type="checkbox"/>	<input type="checkbox"/>
Advice from your pharmacist (e.g. medicines/lifestyle)	<input type="checkbox"/>		Emergency hormonal contraception (morning after pill)	<input type="checkbox"/>	<input type="checkbox"/>
Disposing of old or unwanted medicines	<input type="checkbox"/>		Erectile dysfunction service	<input type="checkbox"/>	<input type="checkbox"/>
Medicine review/check	<input type="checkbox"/>		Substance Misuse/Palliative Care		
Smoking, Alcohol and Weight Management			Needle exchange or safe disposal of needles/syringes	<input type="checkbox"/>	<input type="checkbox"/>
Stop smoking service	<input type="checkbox"/>	<input type="checkbox"/>	Specialist drugs service (e.g. palliative care drugs or supervised consumption of methadone)	<input type="checkbox"/>	<input type="checkbox"/>
Alcohol advice	<input type="checkbox"/>	<input type="checkbox"/>			
Weight management	<input type="checkbox"/>	<input type="checkbox"/>	Checks/Screening/Monitoring		
Vaccinations			Anti-coagulant monitoring (e.g. warfarin)	<input type="checkbox"/>	<input type="checkbox"/>
Children's nasal flu vaccination	<input type="checkbox"/>	<input type="checkbox"/>	Health check (e.g. blood pressure, cholesterol or glucose check)	<input type="checkbox"/>	<input type="checkbox"/>
Adult flu vaccination	<input type="checkbox"/>	<input type="checkbox"/>			
Pneumonia vaccination	<input type="checkbox"/>	<input type="checkbox"/>	NHS minor ailments scheme (free over the counter medicine for those not paying for prescriptions)	<input type="checkbox"/>	<input type="checkbox"/>
Travel vaccinations	<input type="checkbox"/>	<input type="checkbox"/>			
Other					
Hair loss service	<input type="checkbox"/>	<input type="checkbox"/>			

10. Is there anything else you'd like to tell us about the pharmacy that you use?

11. Please tell us your age?

12. Are you...?

(Please tick one box only)

- ☐ Male
- ☐ Female
- ☐ Transgender

13. What is your postcode?

(Your postcode does not identify your individual address)

14. What is your ethnicity?

(Please tick one box only)

- ☐ White British ☐ White Other ☐ Mixed ☐ Asian ☐ Black ☐ Other

Results of Survey of Pharmacy Customers/Public

Survey of Pharmacy Customers/Public

When We Consulted

17 July – 6 August 2017

How We Consulted and Who Responded

A short paper survey was circulated to all Gateshead pharmacies by the Local Pharmaceutical Committee Members on the PNA Steering Group. Pharmacies were asked to display the survey on their counters and encourage customers to complete it. An on-line version of the survey was also built and accessible via the Council's website.

225 people responded to the survey. There was at least one response from every ward in Gateshead. The spread of responses from each locality is shown in the table.

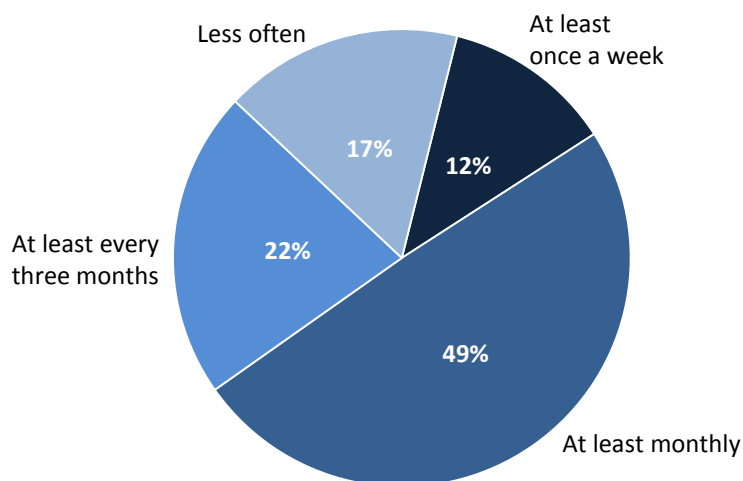
Locality	Number of people
Central	29
East	27
Inner West	38
South	56
West	51
Not in Gateshead	3
Unknown	21

Survey Results

Many (61%) respondents to the survey were regular pharmacy users – monthly or more often. Around a fifth (22%) use pharmacies at least every three months, and the remainder (17%) less often.

How often do you visit a pharmacy?

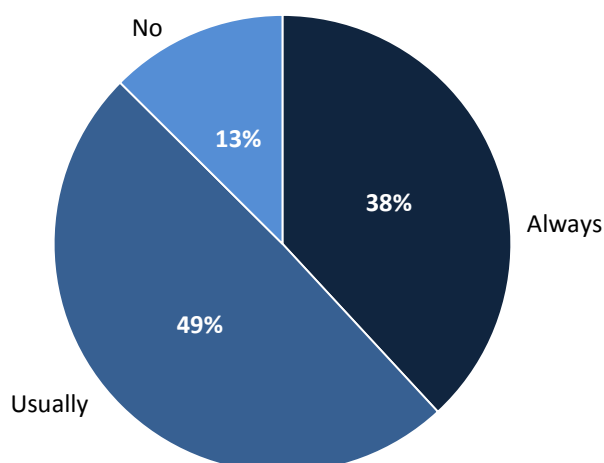
Base = 225



87% of respondents either always or usually visit the same pharmacy.

Do you always visit the same pharmacy?

Base = 223

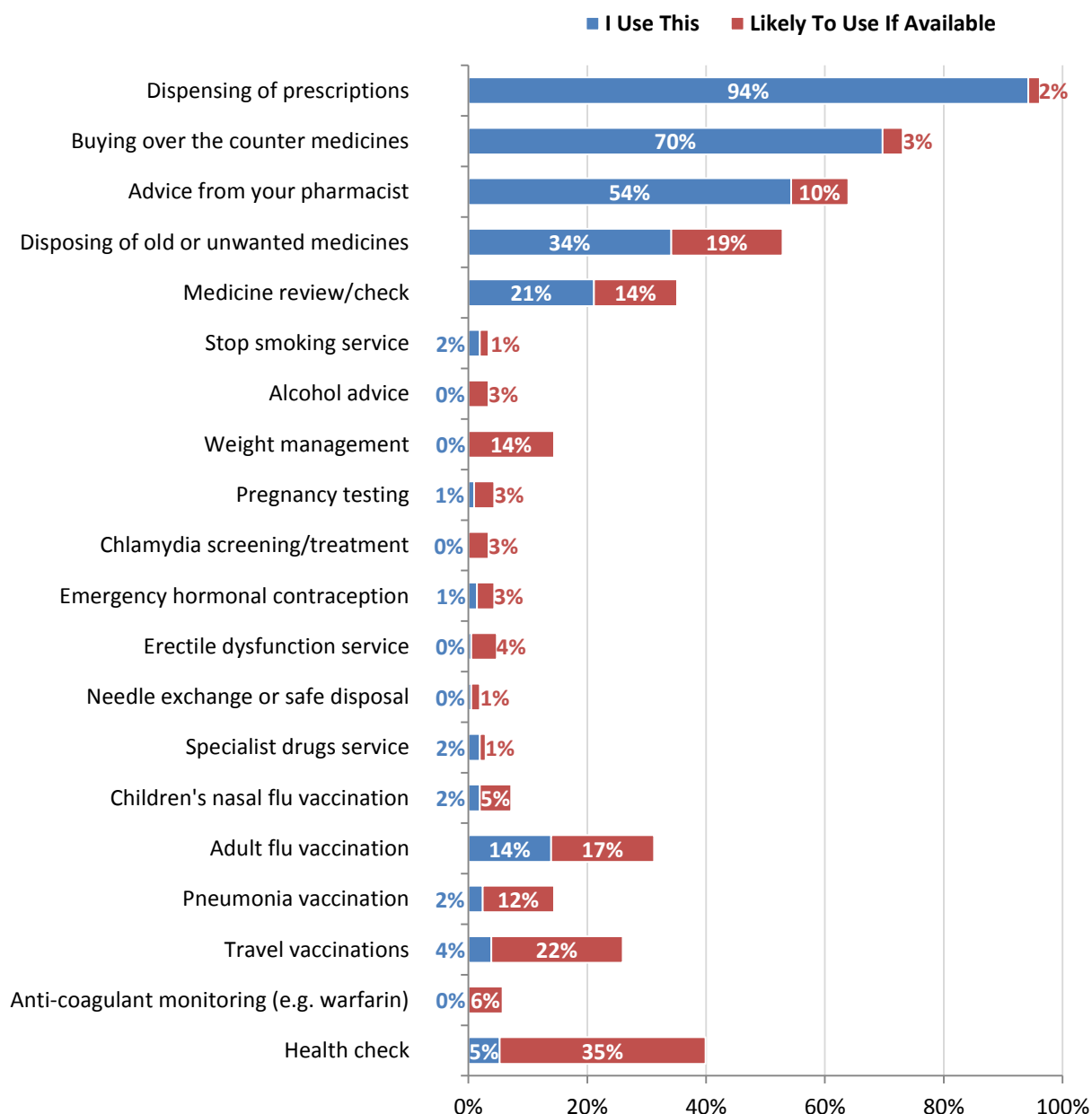


As would be expected, many respondents use pharmacies to collect prescriptions (94%) and buy over the counter medicines (70%). There was also a large proportion using them for advice (54%) and disposing of old or unwanted medicines (34%) as well as for their medicine review/check (21%).

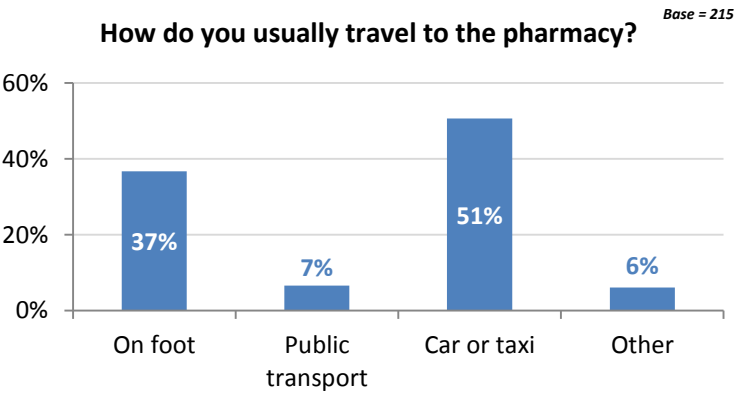
A number of people said they would be likely to use health checks (35%), travel vaccinations (22%), and the adult flu vaccination (17%) if they were available at their pharmacy. 19% also said they would use the disposal of unwanted medicines service if available at their pharmacy, which suggests there may be some who are unaware that this is an 'essential' service available at all pharmacies.

When you visit a pharmacy , which services do you use and are there any that you would be likely to use if they were available?

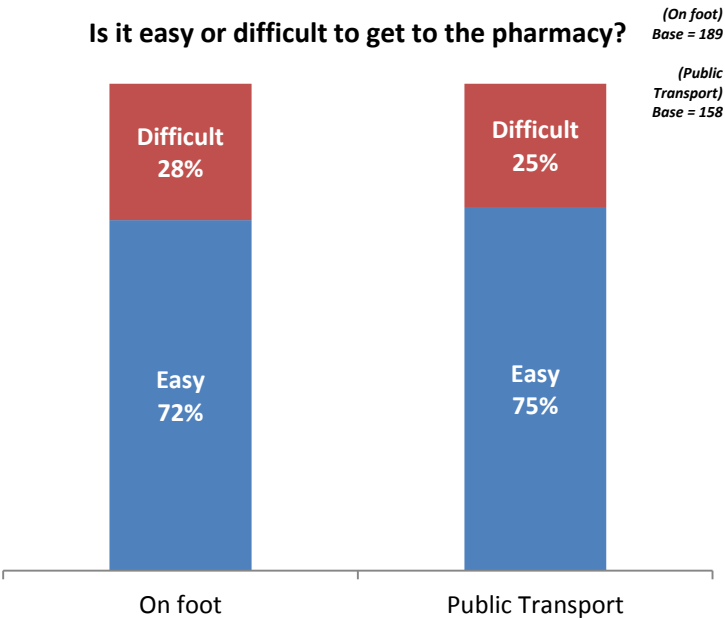
Base = 208



Half (51%) of respondents travel to their pharmacy by car or taxi. A large proportion (37%) travel on foot. Relatively few use public transport (7%).



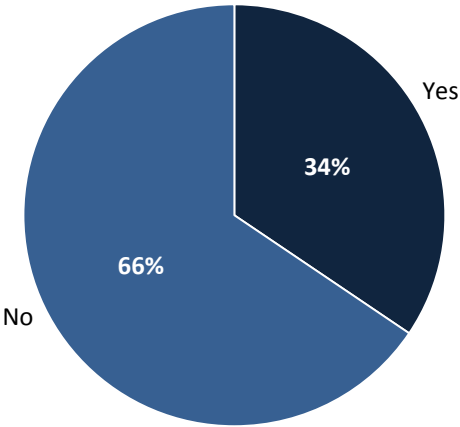
When asked about ease of travelling to their usual choice of pharmacy on foot or by public transport, 28% said it was difficult to get to on foot and 25% said it was difficult on public transport.



Over a third (34%) of respondents said they have needed something from a pharmacy in the past but found the pharmacy was closed at the time.

Of 56 respondents who said yes and could remember what they needed, 46% had wanted a prescription, 43% over the counter medicine, and 11% wanted medicine although they did not define whether it was prescribed or not.

Have you ever needed something from a pharmacy but found it was closed at the time? Base = 209

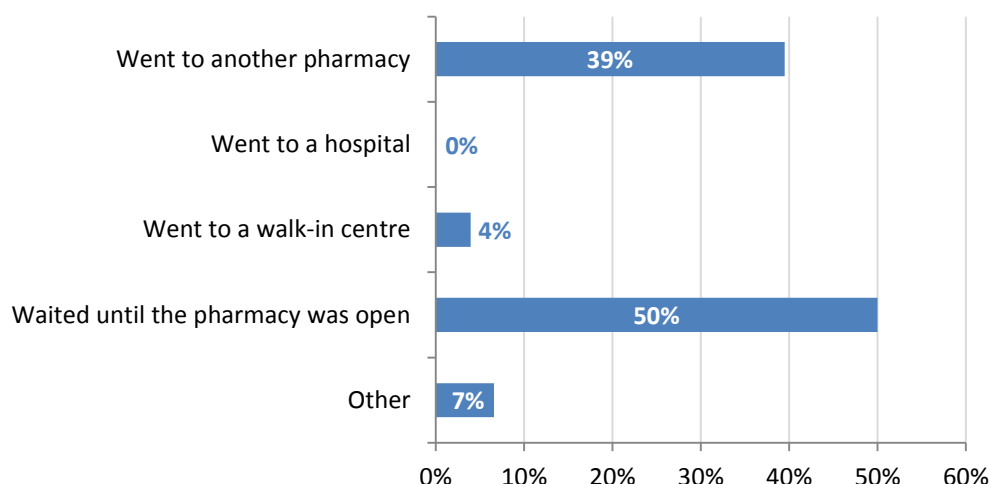


What did you need?

	No. people	% people
Prescription	26	46%
Over the counter medicine	24	43%
Medication – unknown type	6	11%

What did you do when you realised the pharmacy was closed?

Base = 76



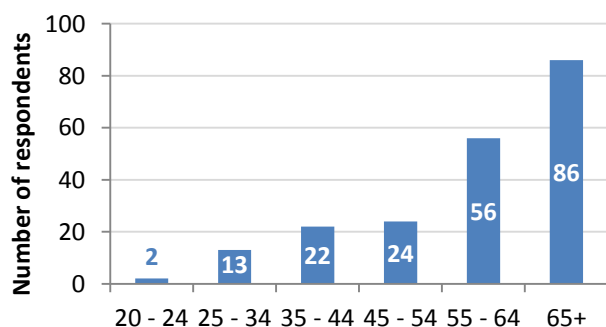
Half (50%) of respondents, on realising that the pharmacy was closed, waited until it was open. Over a third (39%) went to another pharmacy.

More than a third of the additional comments provided specifically mentioned high levels of satisfaction with the service provided by pharmacies without being prompted (although around 1 in 10 mentioned being dissatisfied). Around 1 in 10 respondents said they valued the delivery service and a similar number said their pharmacy had good links with their local GP practice.

However, 1 in 10 also said they have experienced issues with either the days or times that pharmacies are open, or being able to collect a prescription when the pharmacist was out.

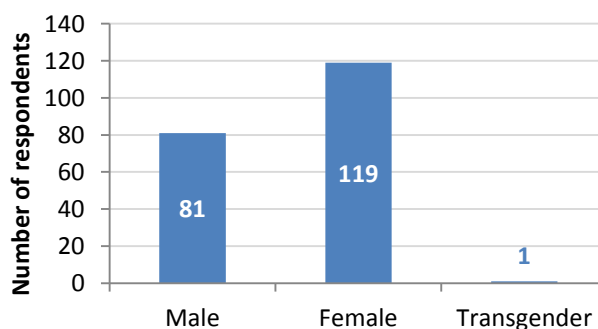
Age profile of respondents

Base = 203

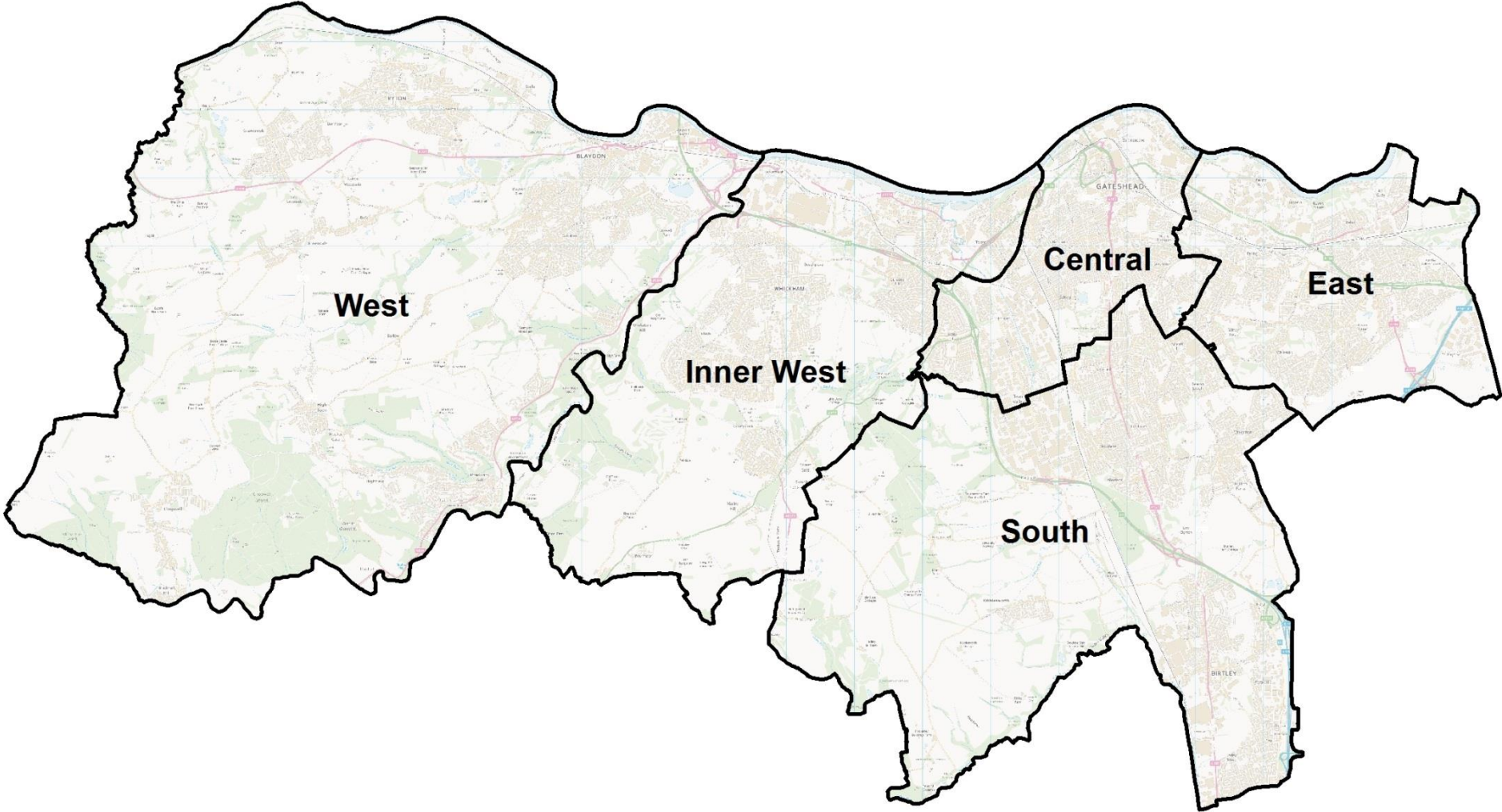


Gender of respondents

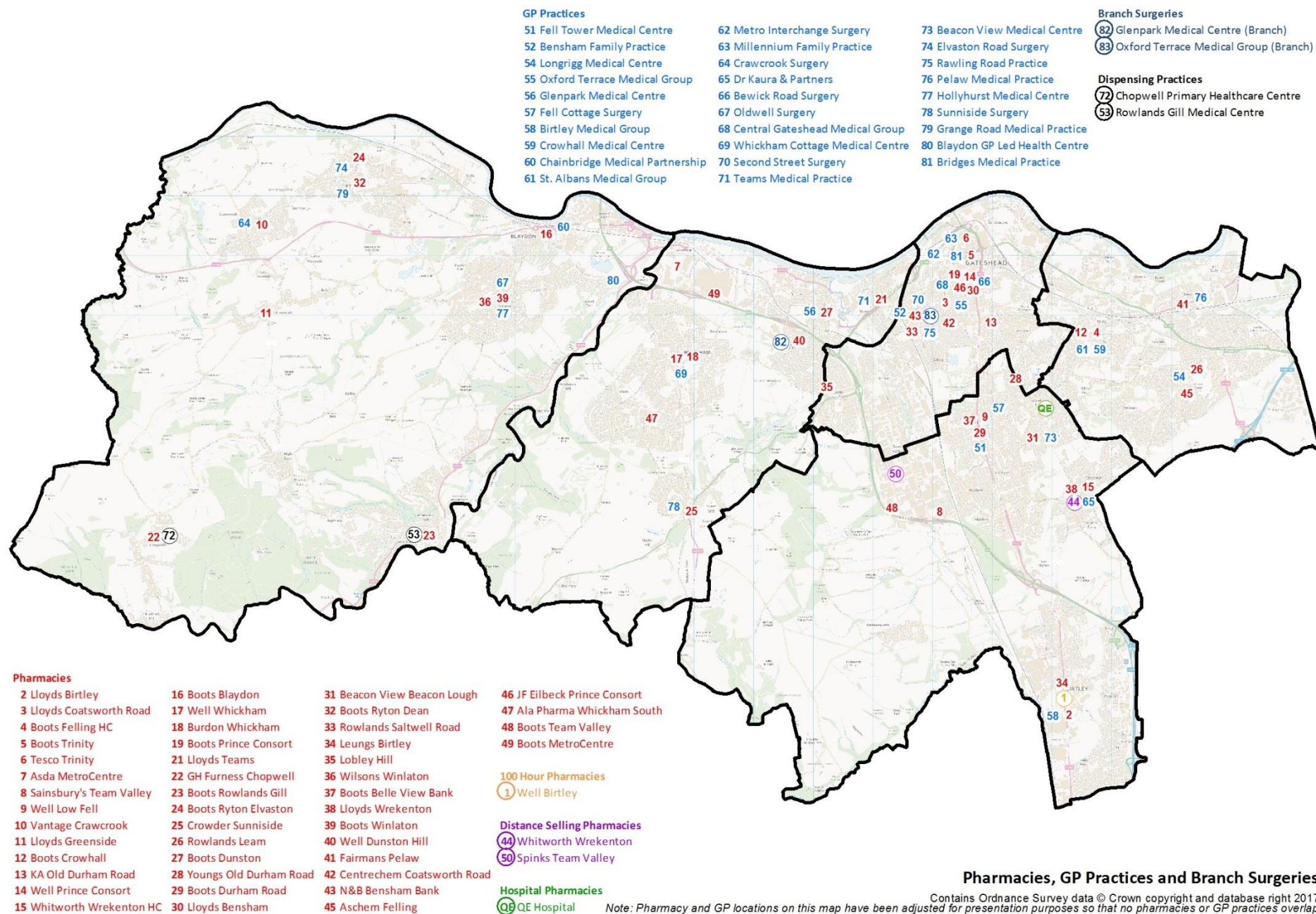
Base = 201



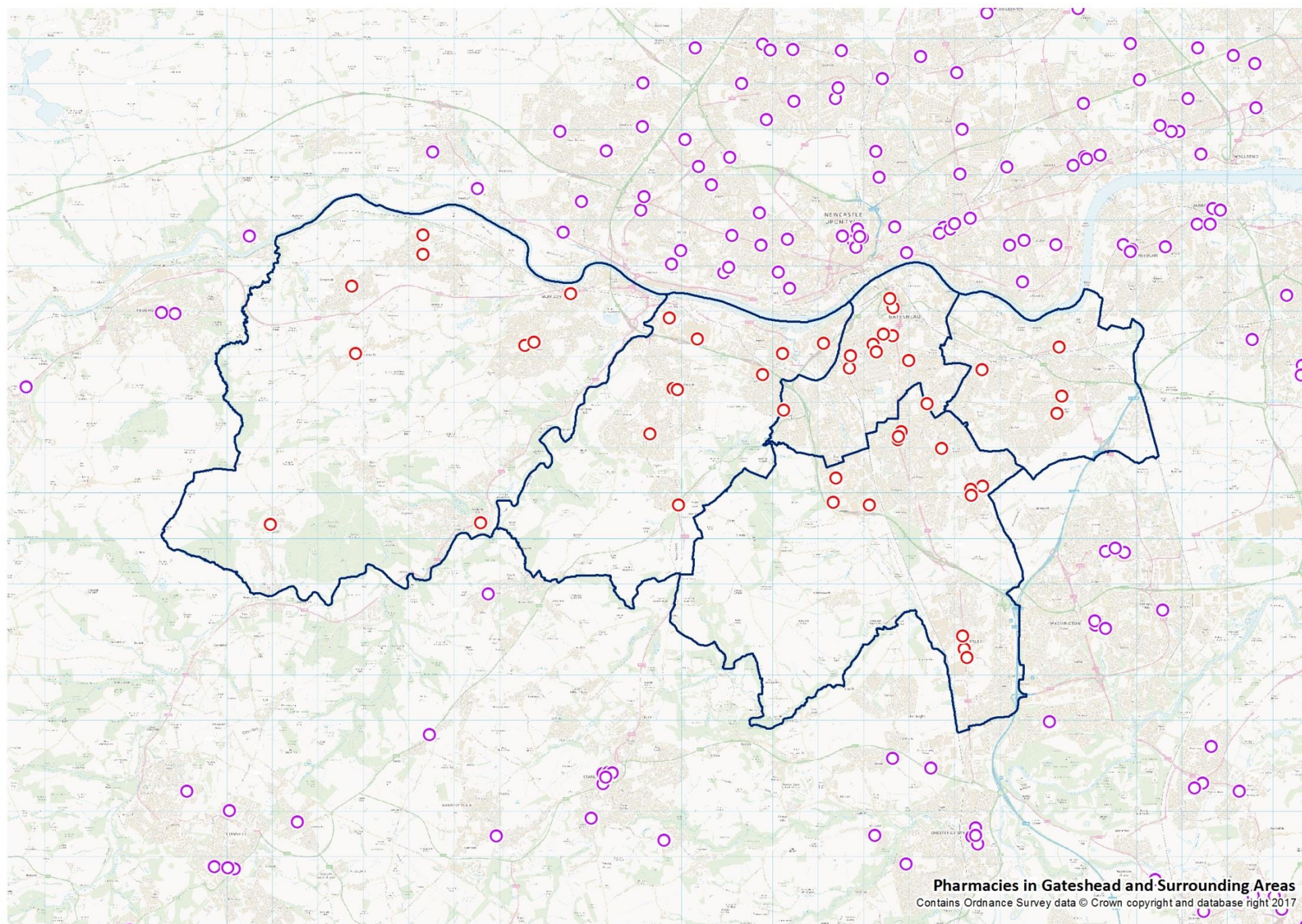
Appendix 5: Gateshead Localities



Appendix 6: Pharmacies, GP Practices and Branch Surgeries

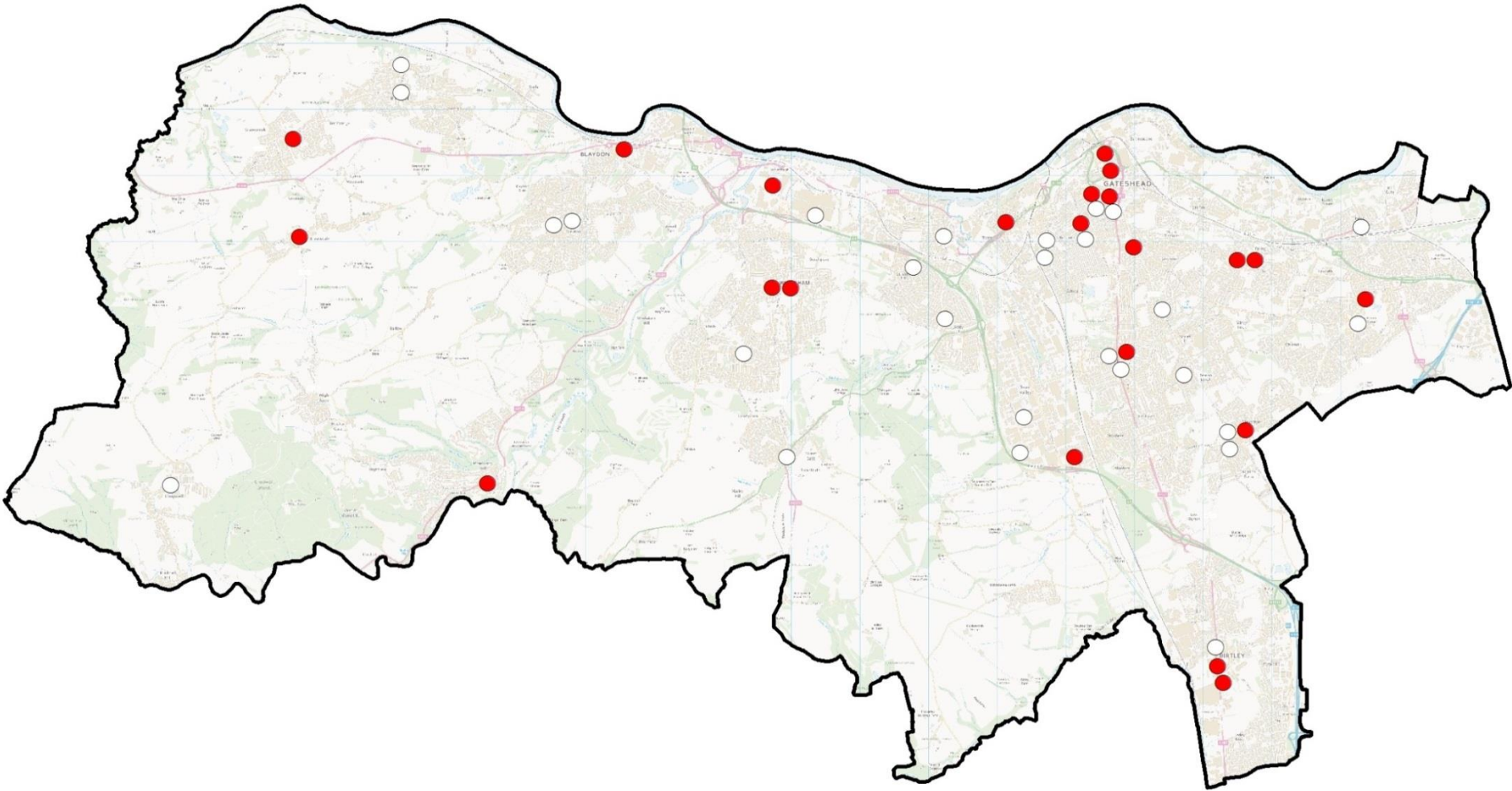


Appendix 7: Pharmacies in Gateshead and Surrounding Areas



Appendix 8: Maps of Pharmacy Opening Times and Commissioned Services

Map 8A:

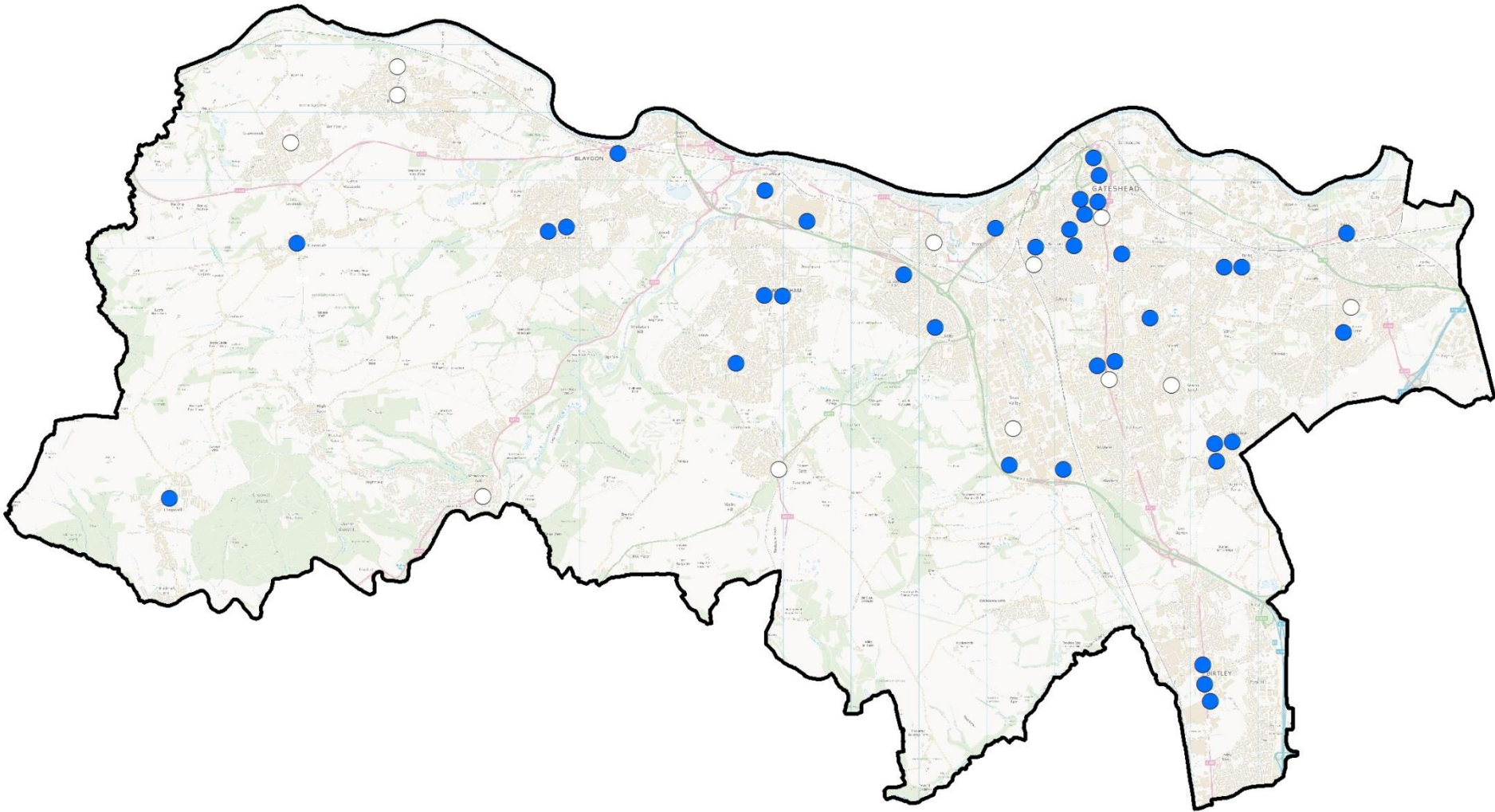


- Open before 9am
- Not open before 9am

Pharmacies Open Before 9am on Weekdays

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Note: Pharmacy locations on this map have been adjusted for presentation purposes so that no pharmacies overlap

Map 8B:

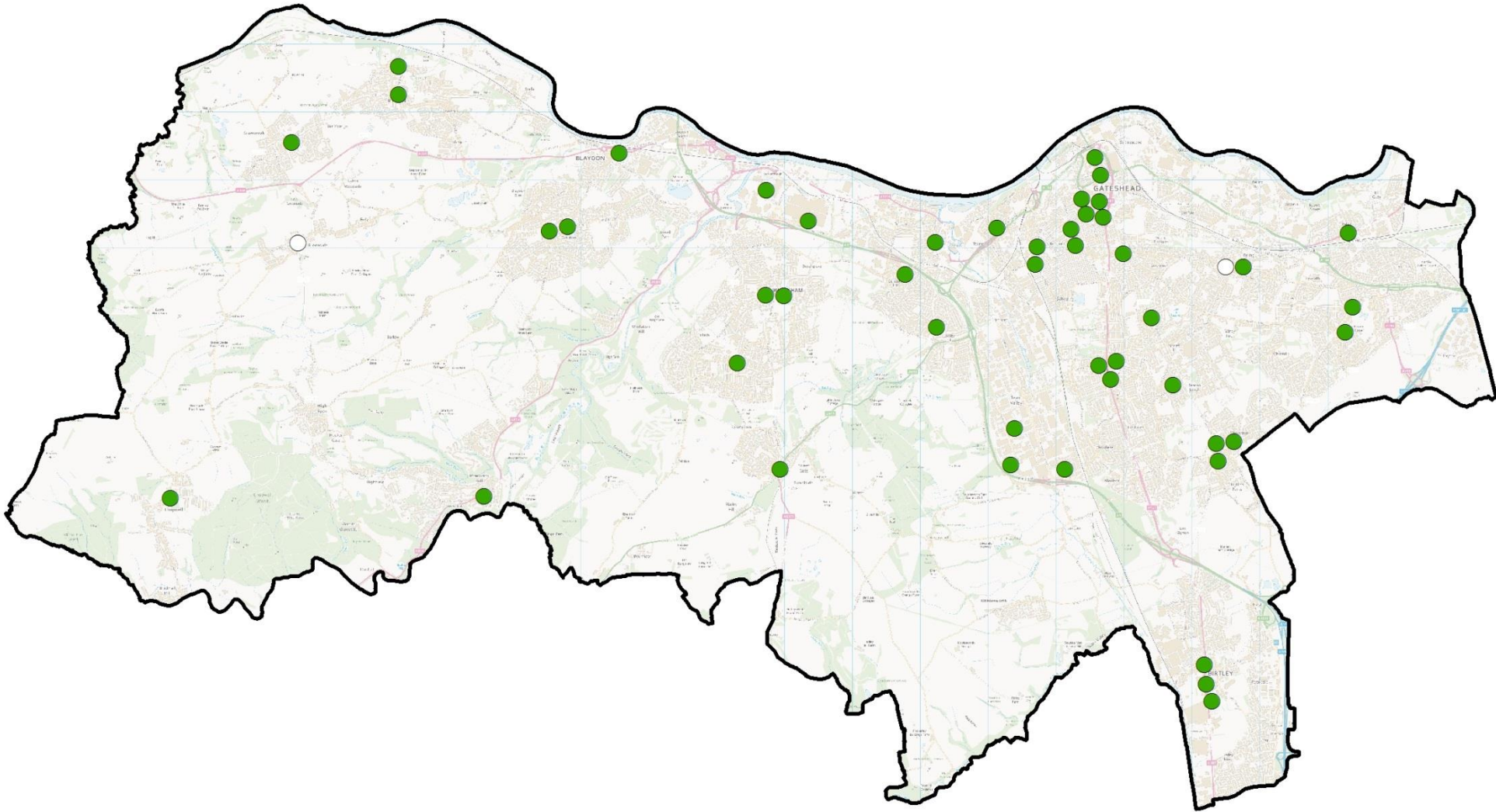


- Open throughout lunchtime
- Close at some point during lunchtime

Pharmacies Open Throughout Lunchtime on Weekdays

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Note: Pharmacy locations on this map have been adjusted for presentation purposes so that no pharmacies overlap

Map 8C:

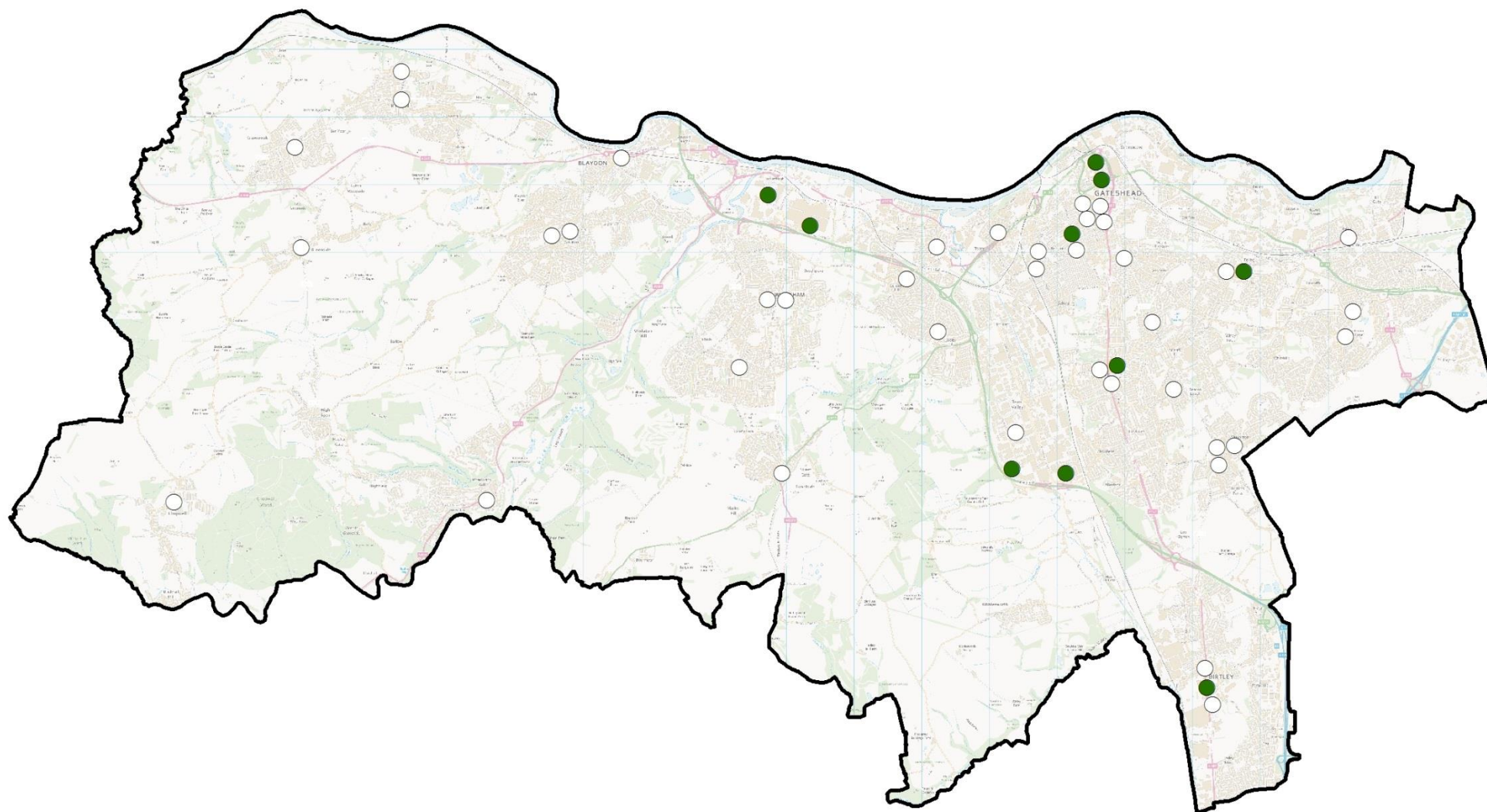


- Open after 5pm
- Not open after 5pm

Pharmacies Open After 5pm on Weekdays

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Note: Pharmacy locations on this map have been adjusted for presentation purposes so that no pharmacies overlap

Map 8D:

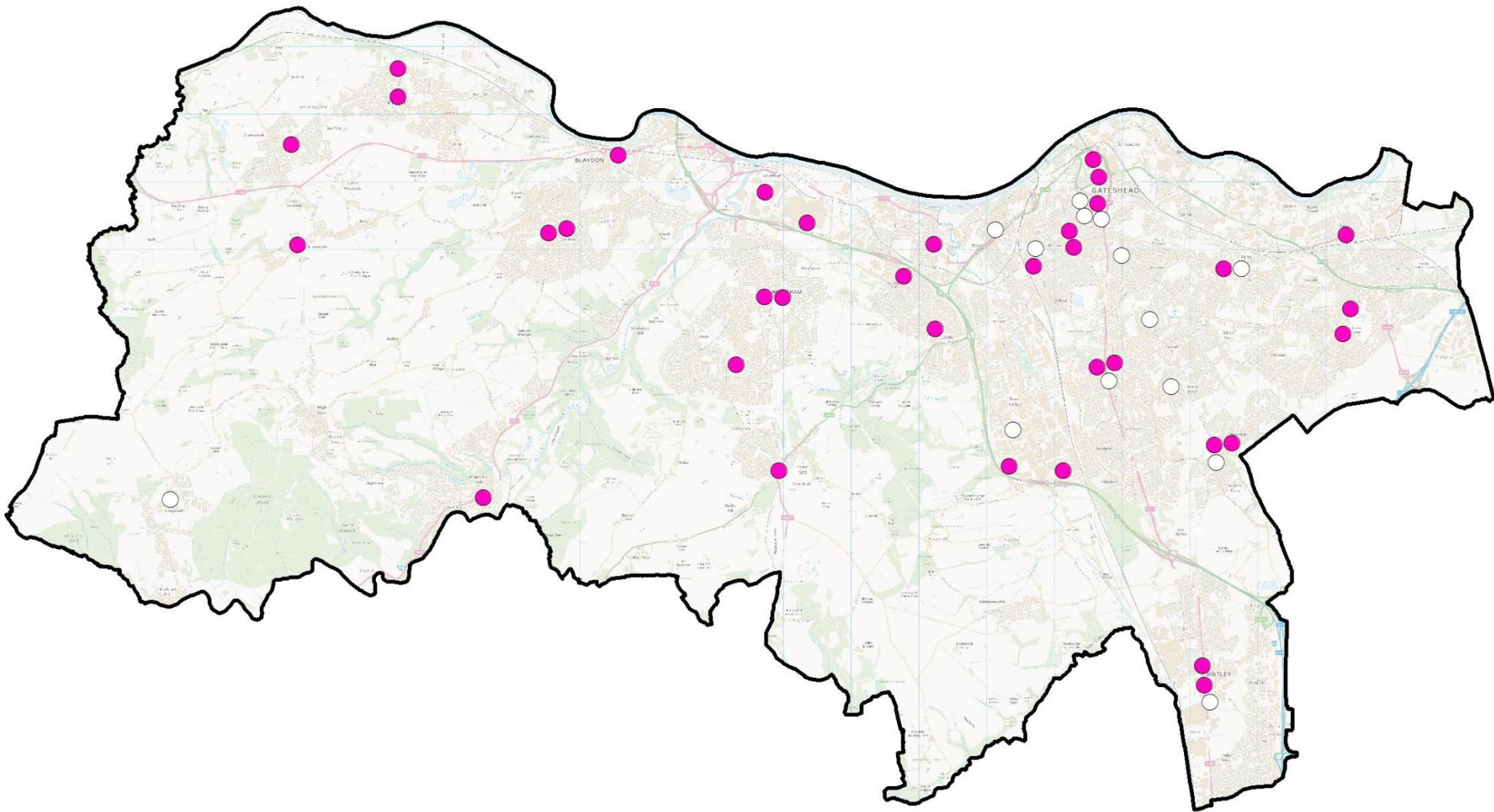


- Open after 6pm
- Not open after 6pm

Pharmacies Open After 6pm on Weekdays

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Note: Pharmacy locations on this map have been adjusted for presentation purposes so that no pharmacies overlap

Map 8E:

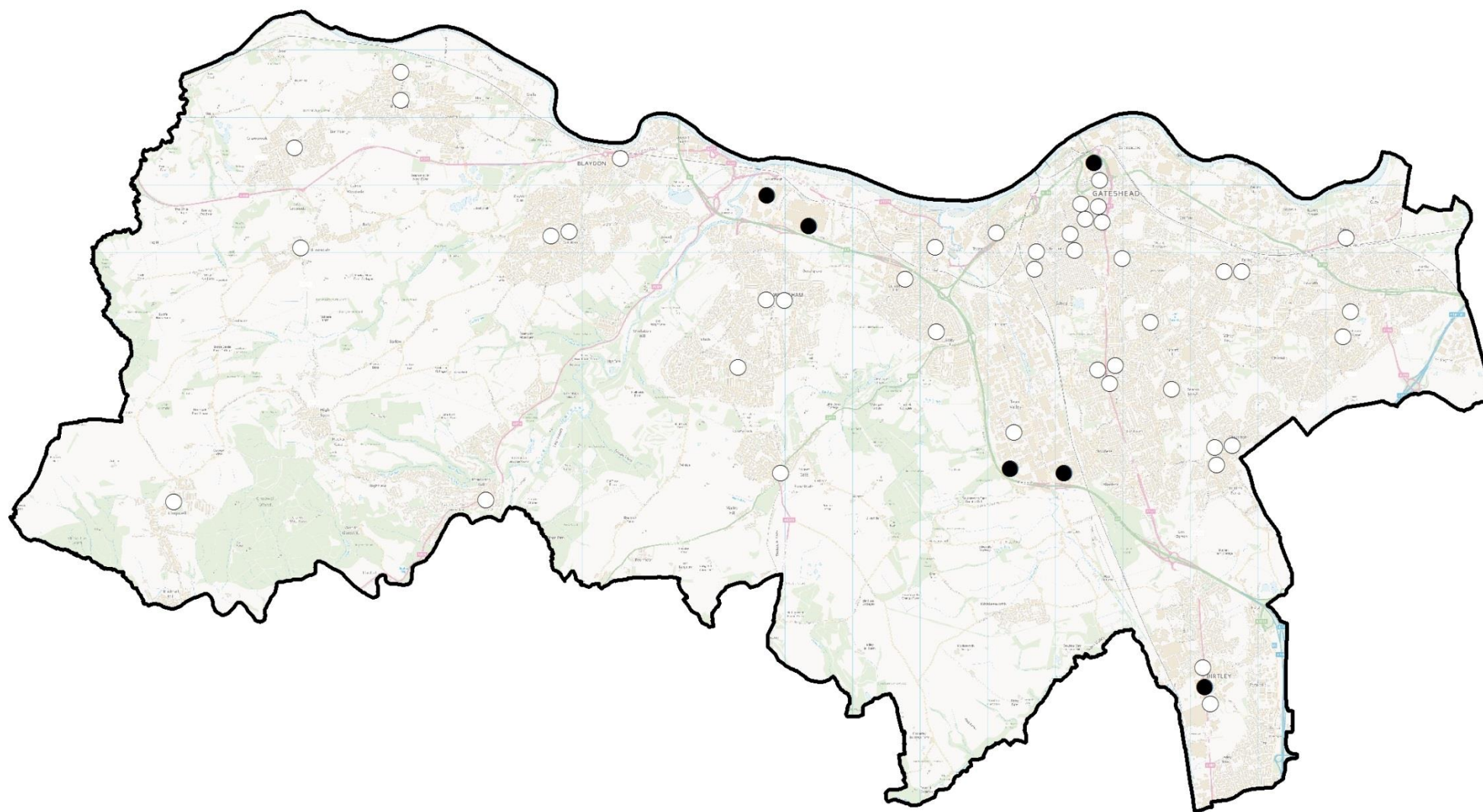


- Open on a Saturday
- Not open on a Saturday

Pharmacies Open on a Saturday

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Note: Pharmacy locations on this map have been adjusted for presentation purposes so that no pharmacies overlap

Map 8F:

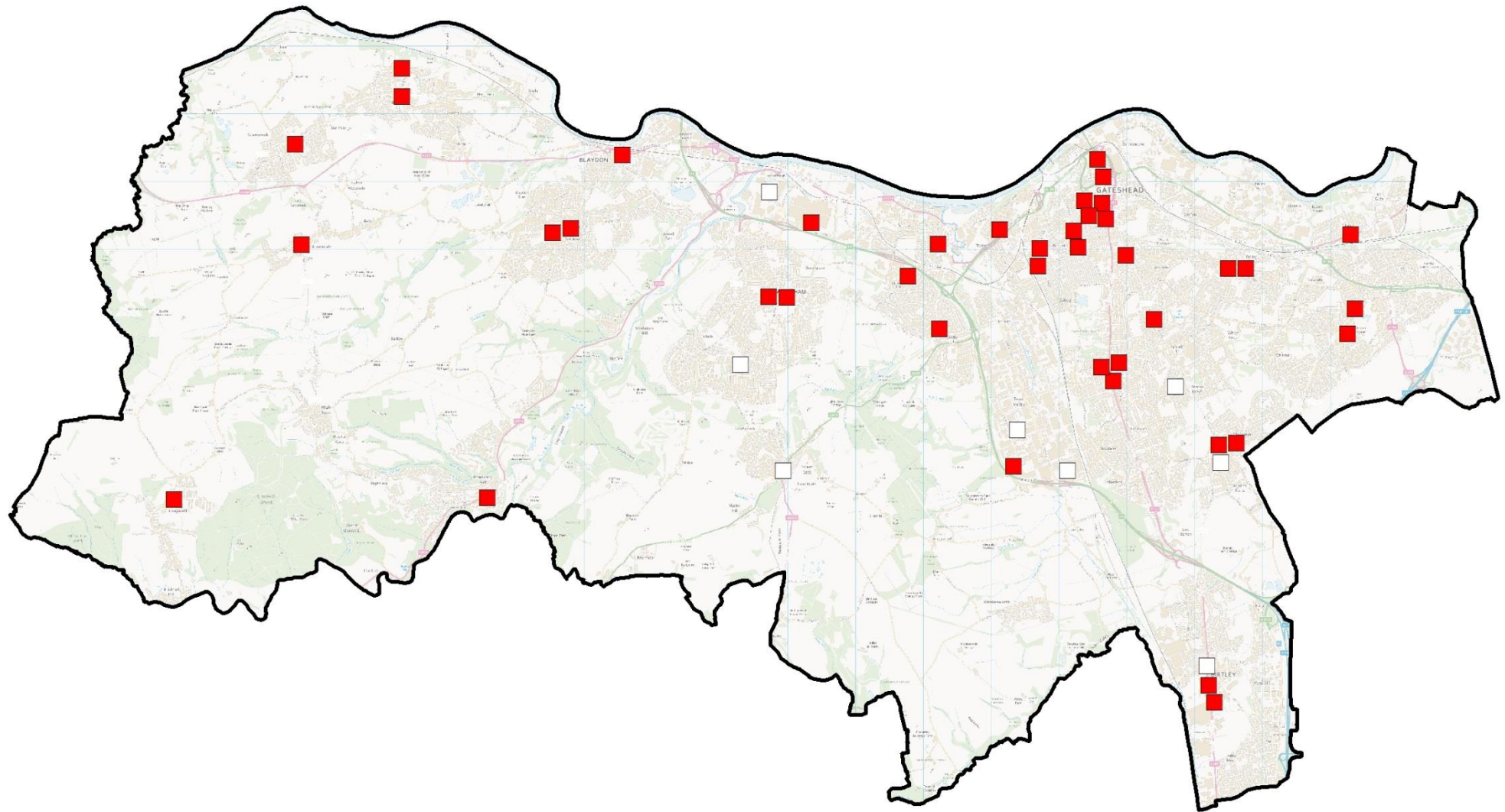


- Open on a Sunday
- Not open on a Sunday

Pharmacies Open on a Sunday

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Note: Pharmacy locations on this map have been adjusted for presentation purposes so that no pharmacies overlap

Map 8G:

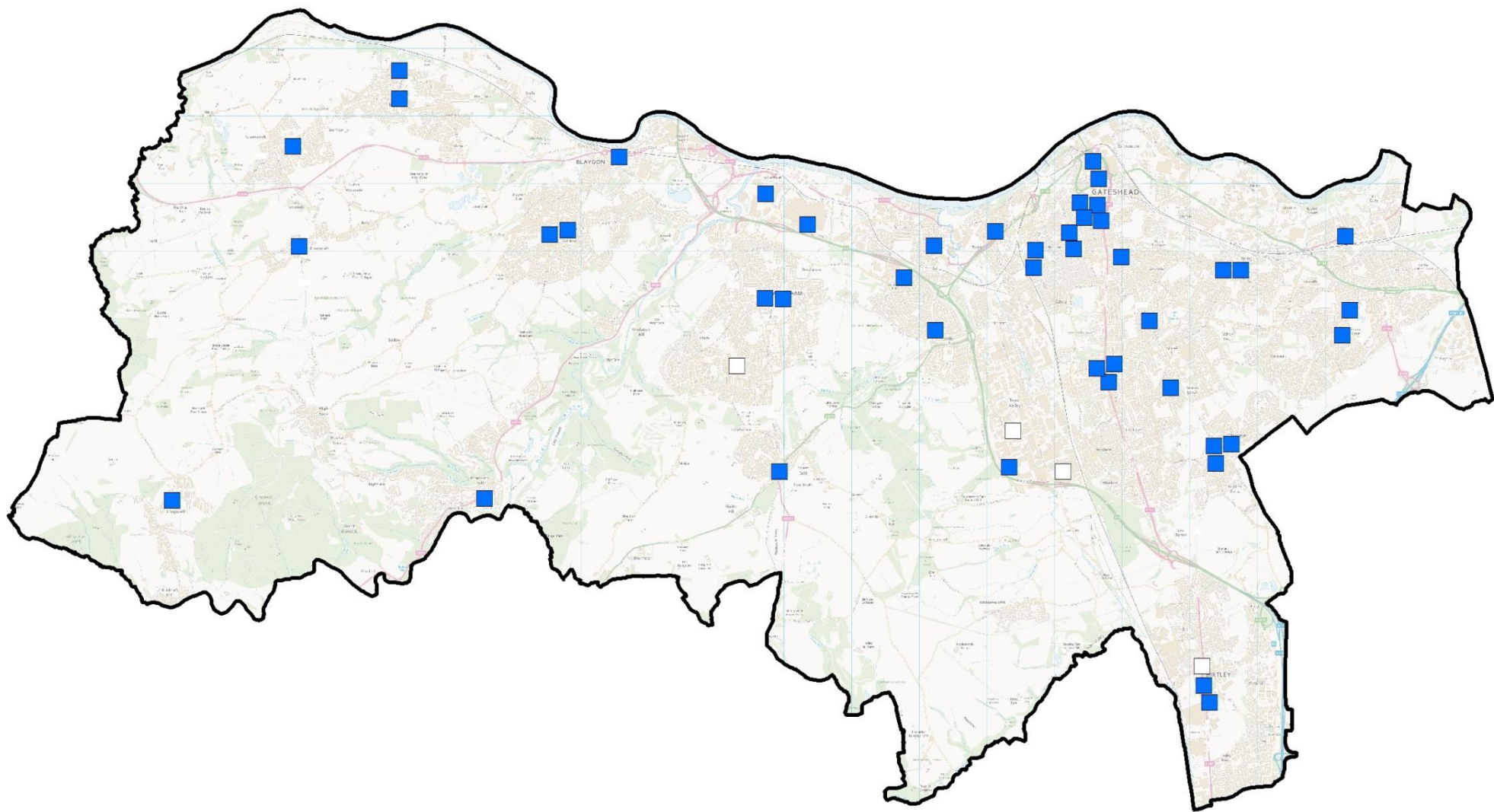


- Pharmacies Providing Supervised Consumption
- Pharmacies Not Providing Supervised Consumption

Pharmacy Provision of Supervised Consumption

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Note: Pharmacy locations on this map have been adjusted for presentation purposes so that no pharmacies overlap

Map 8H:

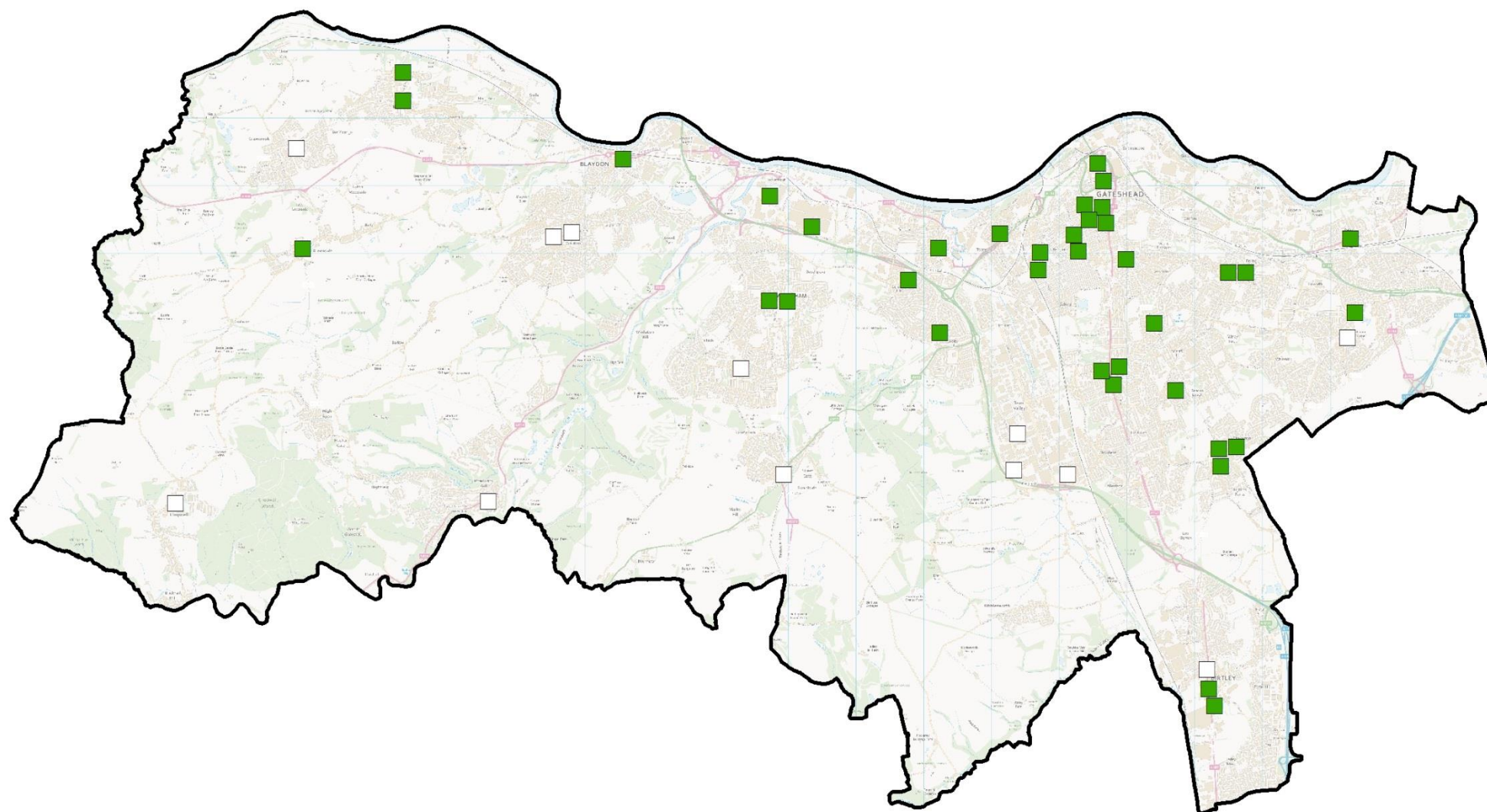


- Pharmacies Providing NRT
- Pharmacies Not Providing NRT

Pharmacy Provision of Nicotine Replacement Therapy (NRT)

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Note: Pharmacy locations on this map have been adjusted for presentation purposes so that no pharmacies overlap

Map 8I:

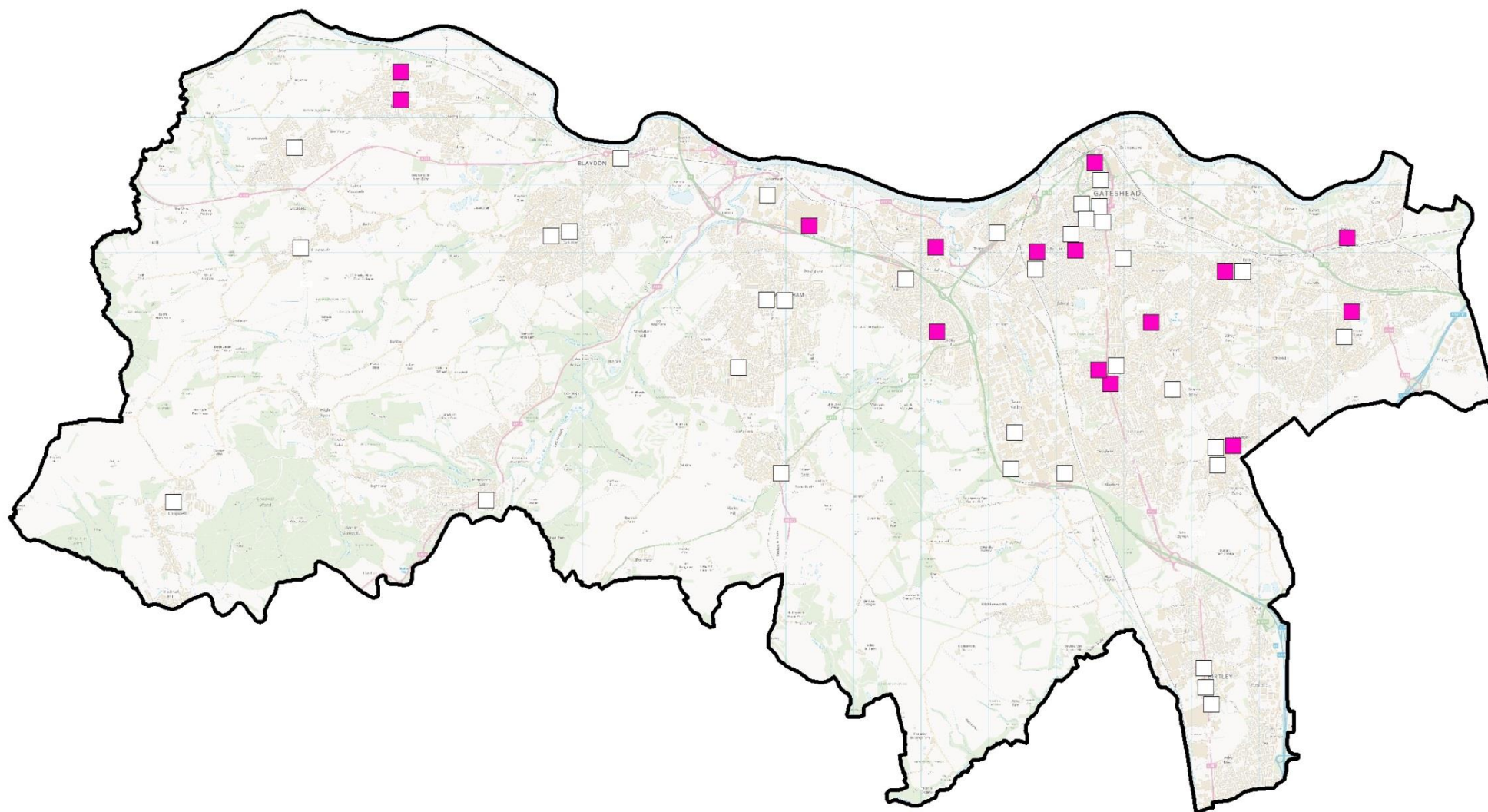


- Pharmacies Providing Stop Smoking Intervention
- Pharmacies Not Providing Stop Smoking Intervention

Pharmacy Provision of Stop Smoking Intervention

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Note: Pharmacy locations on this map have been adjusted for presentation purposes so that no pharmacies overlap

Map 8J:

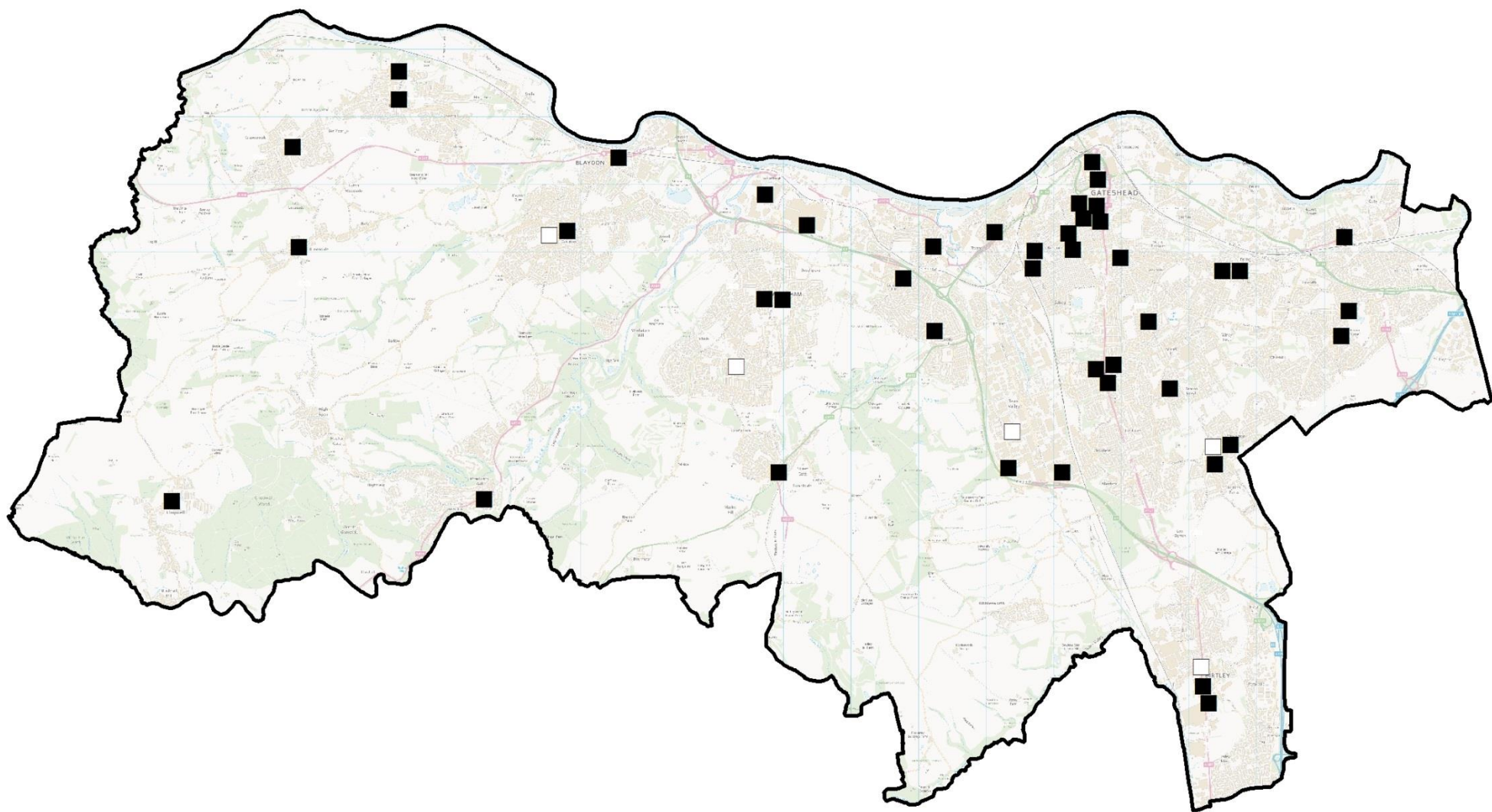


- Pharmacies Providing Health Checks
- Pharmacies Not Providing Health Checks

Pharmacy Provision of Health Checks

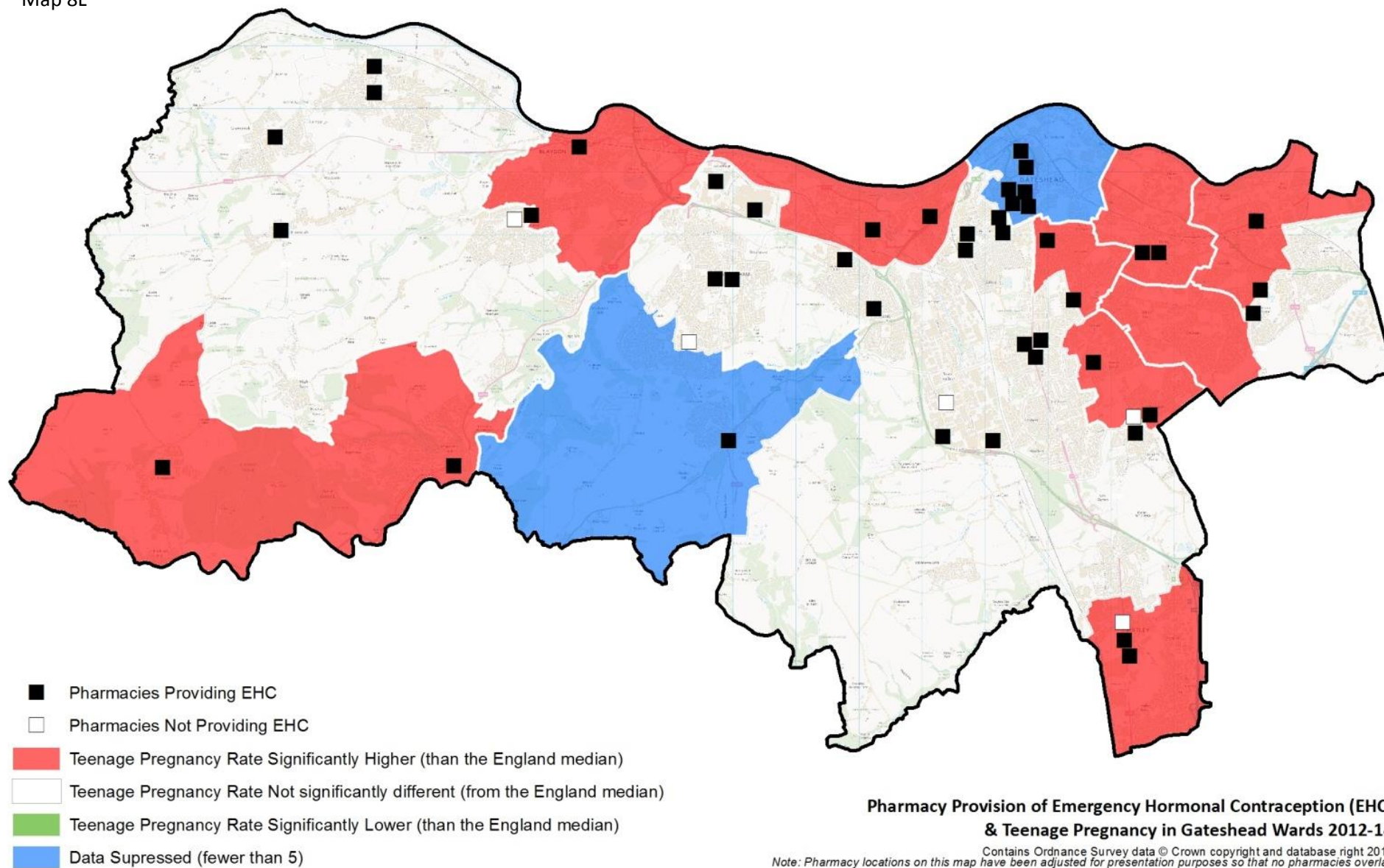
Contains Ordnance Survey data © Crown copyright and database right 2017
Note: Pharmacy locations on this map have been adjusted for presentation purposes so that no pharmacies overlap

Map 8K:

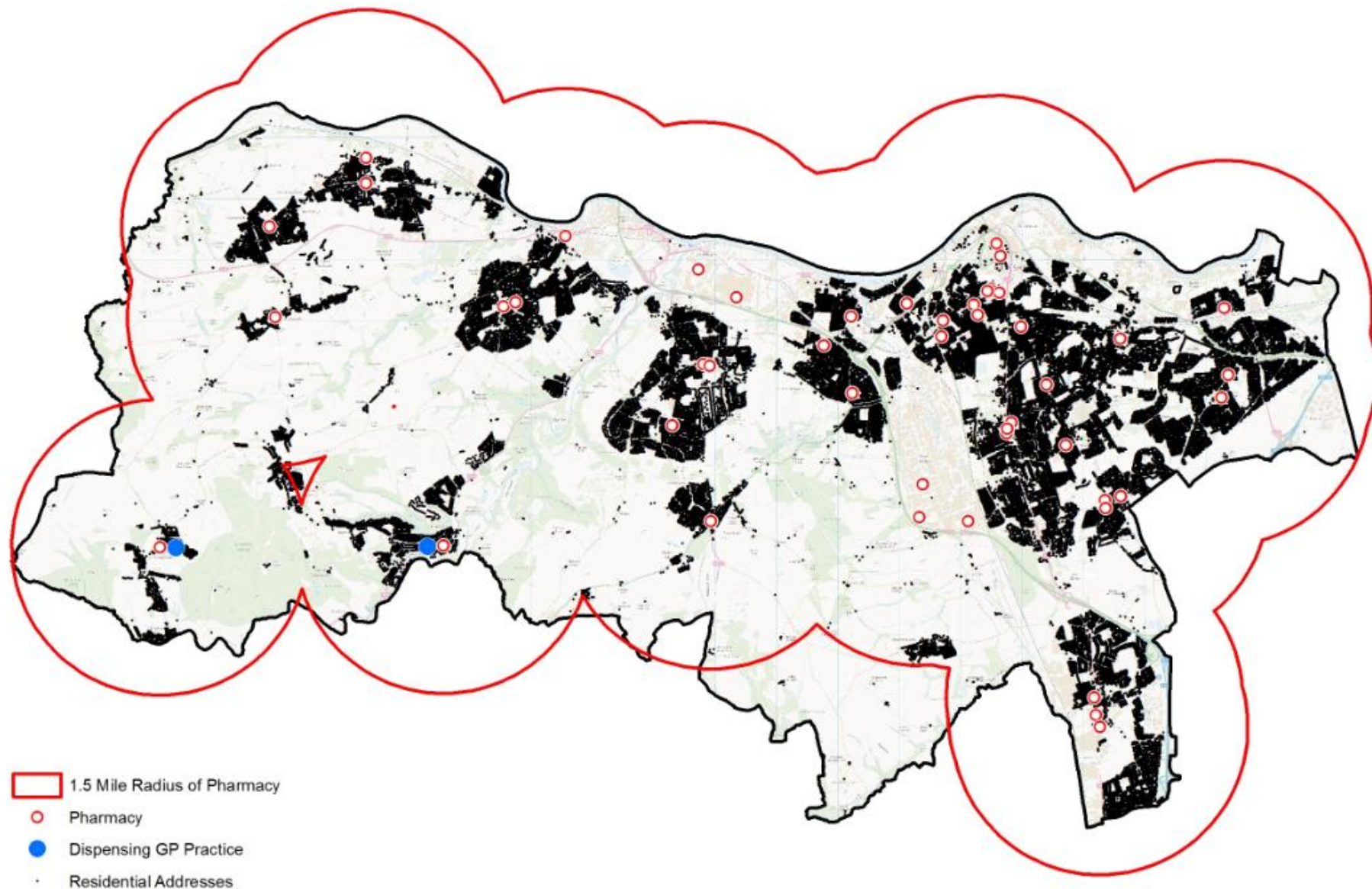


- Pharmacies Providing EHC
- Pharmacies Not Providing EHC

Map 8L



Appendix 9: Residential Addresses Within 1.5 Miles of a Pharmacy



98,327 (99.8%) Residential properties within 1.5 miles of a Gateshead based pharmacy
185 (0.2%) Residential properties further than 1.5 miles from a Gateshead based pharmacy

1.5 Mile Radius of Pharmacies

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Appendix 10: Pharmacy List. Service Offer, opening Times an Other Service Provider Summary

All Pharmacies

Total number of pharmacies: 49

FWW14	Bestway Panacea Healthcare Limited, Well, Co-operative Food Store, Arndale House, Durham Road, Birtley, DH3 2PG (Tel: 410 3135)
FEX02	Lloyds Pharmacy Limited, Lloyds Pharmacy, 9 Harras Bank, Birtley, Chester Le Street, DH3 2PE (Tel: 410 2198)
FR474	Lloyds Pharmacy Limited, Lloyds Pharmacy, 181 Coatsworth Road, Gateshead, Tyne & Wear , NE8 1SQ (Tel: 477 1616)
FMF20	Boots UK Limited, Your Local Boots Pharmacy, Felling Health Centre, Stephenson Terrace, Felling, Gateshead, NE10 9QG (Tel: 438 4300)
FGH89	Boots UK Limited, Boots, 13-15 Ellison Street, Trinity Square, Gateshead, NE8 1BF (Tel: 477 1306)
FD563	Tesco Stores Limited, Tesco Instore Pharmacy, 1 Trinity Square, Gateshead, Tyne & Wear, NE8 1AG (Tel: 693 9931)
FVM83	Asda Stores Ltd, Asda Pharmacy, Maple Row, Metrocentre, Gateshead, NE11 9YA (Tel: 461 9510)
FMG80	Lloyds Pharmacy Limited, Lloydspharmacy, Eleventh Avenue, Team Valley Trading Estate, Gateshead, NE11 0NJ (Tel: 487 6960, 451 9008)
FVR27	Bestway National Chemists Limited, Well, 14 Beaconsfield Road, Low Fell, Gateshead, NE9 5EU (Tel: 487 5927)
FN492	Lloyds Pharmacy Limited, Lloyds Pharmacy, Pattinson Drive, Crawcrook, Ryton, NE40 4US (Tel: 413 2234)
FYN48	Lloyds Pharmacy Limited, Lloyds Pharmacy, Rockwood Hill Road, Greenside, Ryton, NE40 4AX (Tel: 413 2484)
FW369	Boots UK Limited, Your Local Boots Pharmacy, 3 The Hub, Crowhall Lane,, Felling, Gateshead, NE10 9PW (Tel: 438 1378)
FAF46	K A & A O Limited, K & A Pharmacy, 292 Old Durham Road, Gateshead, Tyne & Wear , NE8 4BQ (Tel: 477 2797)
FME56	Bestway National Chemists Limited, Well, 105 Prince Consort Road, Gateshead, Tyne & Wear , NE8 1LR (Tel: 477 5349)
FFR49	Whitworth Chemists Limited, , Wrekenton Health Centre, Springwell Road, Wrekenton, Gateshead , NE9 7AD (Tel: 487 8733)
FMK83	Boots UK Limited, Your Local Boots Pharmacy, 9-10 The Precinct, Wesley Court, Blaydon, Gateshead, NE21 5BT (Tel: 414 3194)
FC155	Bestway National Chemists Limited, Well, 2-3 St Mary's Green, Whickham, Newcastle upon Tyne, NE16 4DN (Tel: 488 5296)
FML40	M D & A G Burdon Ltd, Whickham Pharmacy, 30-32 Front Street, Whickham, Gateshead, Tyne & Wear, NE16 4DT (Tel: 488 0956)
FQC72	Boots UK Limited, Your Local Boots Pharmacy, 127 Prince Consort Road, Gateshead, Tyne & Wear , NE8 1LR (Tel: 477 1140)
FAX07	Lloyds Pharmacy Limited, Lloyds Pharmacy, Teams Medical Centre, Watson Street, Teams Estate , Gateshead, NE8 2PQ (Tel: 460 7497)
FE708	G H Furness Ltd, , 13 Derwent Street, Chopwell, Tyne & Wear, NE17 7HU (Tel: 01207 561 266)
FYK96	Boots UK Limited, Your Local Boots Pharmacy, 34 Station Road, Rowlands Gill, Tyne & Wear, NE39 1PZ (Tel: 01207 544 103)
FCF93	Boots UK Limited, Your Local Boots Pharmacy, 6 Elvaston Road, Ryton, Tyne & Wear, NE40 3NT (Tel: 413 2479)
FK304	M R Crowder Ltd, M R Crowder Ltd, 9 Dewhurst Terrace, Sunniside, Newcastle upon Tyne, NE16 5LP (Tel: 488 5638)

FFE13	L Rowland & Company (Retail) Limited, Rowlands Pharmacy, Former Five Star Batteries, Leam Lane, Meresyde, Gateshead , NE10 8PE (Tel: 469 2410)
FL974	Boots UK Limited, Your Local Boots Pharmacy, Ravensworth Road, Dunston, Gateshead, Tyne and Wear, NE11 9FJ (Tel: 460 9366)
FAE19	R G Young Pharmacy Limited, , 33 Sheriffs Highway, Old Durham Road, Gateshead, NE9 5PJ (Tel: 482 6457)
FV555	Boots UK Limited, Your Local Boots Pharmacy, 544 Durham Road, Low Fell, Gateshead, NE9 6HX (Tel: 487 6519)
FDL28	Lloyds Pharmacy Limited, Lloyds Pharmacy, 13 Bewick Road, Gateshead, Tyne & Wear , NE8 4DP (Tel: 477 4456)
FCX29	Beacon View Pharmacy Limited, , Beacon View Health Centre, Beacon Lough Road, Gateshead, NE9 6YS (Tel: 487 2121)
FV192	Boots UK Limited, Your Local Boots Pharmacy, 2 Dean Terrace, Ryton, Tyne & Wear, NE40 3HQ (Tel: 413 2130)
FP214	L Rowland & Company (Retail) Limited, Rowlands Pharmacy, 76-78 Saltwell Road, Gateshead, Tyne & Wear , NE8 4XE (Tel: 477 1665)
FV468	Mr Simon Leung, Vantage Chemist, 2 Imperial Buildings, Durham Road , Birtley, Chester Le Street, DH3 1LG (Tel: 410 2125)
FG334	Lobley Hill Pharmacy Limited, Lobley Hill Pharmacy, 72 Malvern Gardens, Lobley Hill, Gateshead, NE11 9LL (Tel: 420 0213)
FJE40	Dalhart Pharmacy Ltd, R W Wilson, 50 Front Street, Winlaton, Gateshead, NE21 6AD (Tel: 414 2378)
FF805	Boots UK Limited, Boots, 479 Durham Road, Low Fell, Gateshead, NE9 5EX (Tel: 482 3776)
FRH52	Lloyds Pharmacy Limited, Lloyds Pharmacy, 1 Springwell Road, Wrekenton, Gateshead, NE9 7JN (Tel: 487 4258)
FLA85	Boots UK Limited, Your Local Boots Pharmacy, 16 Front Street, Winlaton, Tyne & Wear, NE21 4RE (Tel: 414 2472)
FWJ68	Bestway National Chemists Limited, Well, 17 The Crescent, Dunston, Gateshead, NE11 9SJ (Tel: 460 4687)
FX287	Fairmans Chemist Limited, Fairmans Pharmacy, 5 Brookfield Terrace, Pelaw, Gateshead, NE10 0QU (Tel: 469 2124)
FYN79	Centrechem Ltd, , 217 Coatsworth Road, Gateshead, Tyne & Wear , NE8 1SR (Tel: 477 1480)
FJA23	N & B Chemists Ltd, , 1 Liddell Terrace, Bensham, Gateshead, NE8 1YN (Tel: 477 6742)
FEM15	Whitworth Chemists Limited, , 7 Wrekenton Row, Gateshead, Tyne & Wear , NE9 7JD (Tel: 487 7007)
FRG71	Ashchem Limited, Ashchem Chemists, 11 Fewster Square, Leam Lane Estate, Felling, Gateshead, NE10 8XQ (Tel: 469 3018)
FPQ41	Ashchem Limited, Ashchem Chemists, The Health Centre, Prince Consort Road, Gateshead, Tyne & Wear, NE8 1NR (Tel: 477 2280)
FK744	Ala Pharma Ltd, Oakfield Pharmacy, 96 Oakfield Road, Whickham, Newcastle upon Tyne, NE16 5QU (Tel: 488 5640)
FNK51	Boots UK Limited, Boots, Unit 9, Team Valley Trading Est, Gateshead, NE11 0BD (Tel: 491 4348)
FMF10	Boots UK Limited, Boots, Units 46-52, Cameron Walk, The Metrocentre, Gateshead , NE11 9YQ (Tel: 493 2055)
FW278	Spinks The Chemist Ltd, Team Valley Pharmacy, 379 Princes Way South, Team Valley Trading Estate, Gateshead, NE11 0TU (Tel: 487 1007)

Pharmacy Opening Hours

[illegible]

	14:00-18:00	14:00-18:00	14:00-18:00	14:00-18:00	14:00-18:00		
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Number of pharmacies open for:

40 hours	7
41-45 hours	13
46-50 hours	11
51-55 hours	9
56-60 hours	2
61-80	3
81-99	3
100 or more	1

Number of pharmacies open on:

Weekdays before 9am	22
Weekdays throughout lunchtime	37
Weekdays after 5pm	47
Weekdays after 6pm	10
Saturday	35
Sunday	6

Pharmacy Services Offered**Number of pharmacies offering Gateshead public health team commissioned services:**

Supervised consumption of opiate substitutes	41
Stop smoking	37
Health checks	15
Emergency hormonal contraception	44
Nicotine Replacement Therapy	45

Number of pharmacies offering Gateshead CCG commissioned services:

Minor ailment scheme	45
On demand availability of specialist drugs service palliative care	4

Number of pharmacies offering NHS England commissioned services:

Influenza vaccination	27
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Number of pharmacies offering non-commissioned services (Source: 2014 survey of pharmacies):

(Pharmacies offering service privately shown in brackets)

Anti-coagulant monitoring	3
Blood cholesterol check	3 (1)
Blood glucose check	6
Blood pressure check	16 (3)
Melanoma screening	0
Safe disposal of sharps	4
Chlamydia screening as a stand alone service	9

Chlamydia treatment and partner notification	1
Erectile dysfunction service	1 (1)
Pregnancy testing	5
Referral for further contraception	22
Alcohol brief advice	7
Weight management	4 (3)
Childhood nasal flu vaccination	0
Pneumococcal vaccination	1
Advice/support to care homes	11 (2)
Anti-viral distribution service	0 (1)
Compliance aid assessment	4
Hair loss service	2
Prescription collection service	45
Travel clinic	2

Pharmacy Population Reach

Residential properties (proxy for households) within/further than 1.5 mile of a pharmacy (See Appendix 9 Map):

Residential properties within 1.5 miles of a pharmacy	98,327 (99.8%)
Residential properties further than 1.5 miles from a pharmacy	185 (0.2%)
Residential properties within 1 mile of a pharmacy	95,973 (97.4%)
Residential properties further than 1 mile from a pharmacy	2,539 (2.6%)

Other Service Providers

Dispensing GPs:

Dr Dawson & Imlah, Rowlands Gill Medical Centre, The Grove, Rowlands Gill, NE39 1PW
Dr M S Hassan & Dr M A Hassan, Chopwell Primary Health Care Centre, South Road, Chopwell, NE17 7BU

Dispensing Appliance Contractors:

None

Hospital Pharmacy Services:

Queen Elizabeth Hospital, Sheriff Hill, Gateshead, NE9 6SX

GP Out of Hours Services:

GATDOC, Queen Elizabeth Hospital Walk in Centre, Sheriff Hill, Gateshead, NE9 6SX

Walk In Centres

Queen Elizabeth Hospital Walk in Centre, Sheriff Hill, Gateshead, NE9 6SX
Blaydon Walk In Centre, Shibdon Road, Blaydon on Tyne, NE21 5NW

Appendix 11: Acknowledgements

The writing group for the PNA, consisting of representatives from Public Health, North Tyneside Council, North Tyneside Clinical Commissioning Group (CCG) and North-East Commissioning Support would like to thank the following for their contribution to the production of the PNA:

- Representatives on the PNA Steering Groups;
- South of Tyne Local Pharmaceutical Committee (LPC);
- Commissioning Leads, Gateshead Council;
- Planning Officers, Gateshead Council;
- Newcastle Gateshead Clinical Commissioning Group;
- Healthwatch Gateshead

Analytical support from Matt Liddle for his patience in creating all of the maps and graphs

Steering Group members:

- Gerald Tompkins Public Health Consultant, Gateshead Council (Chair)
- Matthew Liddle Senior Corporate Officer, Policy Performance and Communication, Gateshead Council
- David Carter Chairman Gateshead & South Tyneside LPC
- Neil Gammack Chief Pharmacist, Queen Elizabeth Hospital, Gateshead
- Sami Hanna Communications Officer ,Gateshead & South Tyneside LPC
- Wendy Hodgeson Operations Manager / Deputy Chief Executive, Healthwatch Gateshead
- Marc Hopkinson Newcastle Gateshead Clinical Commissioning Group (CCG)
- Steve Llewellyn Senior Medicine Optimisation Pharmacist, Newcastle Gateshead CCG
- Bill Westwood Chairman, Gateshead and South Tyneside Local Medical Committee
- Sue White Medicines Optimisation Pharmacist, North of England Commissioning Support