

Telford and Wrekin Pharmaceutical Needs Assessment (PNA) 2015/16- 2017/18



A DRAFT FOR CONSULTATION (December 2014)

Executive summary

Community pharmacies are often the first point of contact for people with a minor illness, especially those in deprived communities and those who may otherwise struggle to access healthcare services. Improved use of easily accessible skills within community pharmacies will help to reduce the pressure on other healthcare services. The public has a high regard for pharmacies, yet there remains a need to raise awareness of the many and varied services and benefits offered by community pharmacies.

With ever increasing demands on local health services there is a need to continuously assess the health needs of the population and to review where patients and service users can access health services. Patients with a chronic illness are often prescribed several medicines on a long term basis. A significant proportion of these patients are not taking their treatment as intended and therefore not achieving the intended health outcomes. Providers of pharmaceutical services have a key role to play in improving treatment concordance and improving the patient's understanding of their illness.

From 1 April 2013, every Health and Wellbeing Board (HWB) in England has had a statutory responsibility to publish and keep up-to-date a statement of the needs for pharmaceutical services for the population in its area. The 'pharmaceutical needs assessment' (PNA) should be part of the wider Joint Strategic Needs Assessment which identifies high level health and wellbeing needs of the area. The PNA is aimed to help in the commissioning of pharmaceutical services in the context of local priorities.

Decisions on whether to open new pharmacies are made through a formal application process to NHS England. The relevant NHS England Area Team reviews the application to decide if there is a need for a new pharmacy in the proposed location. When making the decision NHS England is required to refer to the local PNA. As these decisions may be appealed and challenged via the courts, it is important that PNAs comply with regulations and that mechanisms are established to keep the PNA up-to-date. In accordance with these regulations the Telford and Wrekin PNA is being updated every three years.

The PNA includes information on:

- Pharmacies in Telford and Wrekin and the services they currently provide, including dispensing, providing advice on health, medicines reviews and local public health services, such as sexual health services and support for drug users.
- Public views and opinions of community pharmacy, including accessibility and opening
- Relevant local maps of providers of pharmaceutical services in the area.
- Services in neighbouring Health and Wellbeing Board areas that might affect the need for services in Telford and Wrekin
- Potential gaps in provision that could be met by providing more pharmacy services, or through opening more pharmacies, and likely future needs.

The PNA refresh was undertaken in accordance with the requirements set out in regulations 3-9 Schedule 1 of the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013. In the process of undertaking the refresh views were sought from a wide range of key stakeholders to identify issues that affect the commissioning of pharmaceutical services and to meet local health needs and priorities.

The consultation of the key findings and proposed recommendations is taking place from Friday 12th December 2014 to Friday 13th February 2015. The consultation is seeking the views of the statutory consultees, other stakeholders and members of the public, on whether they agree with the contents of the draft PNA and whether it addressed issues that they considered relevant to the provision of pharmaceutical services. Please send comments via email to Pharmacy.Needs@telfordccg.nhs.uk

Access to dispensing services - Key findings

Telford and Wrekin has 37 community pharmacies and one dispensing doctor practice providing pharmaceutical services directly to its population. Looking at geographical location, population density, number of pharmacies per head of population and the public survey, we conclude that there is sufficient dispensing pharmaceutical provision in Telford and Wrekin, to offer choice and accessibility.

Based on PNA analyses current pharmaceutical services in Telford and Wrekin are considered to be adequate for the local population. The reasons for this are as follows:

- Current geographical location of pharmacies is broadly centered on population density within each cluster.
- There is sufficient choice for patients wanting to access dispensing services close to their GP practice or those that wish to travel into the town centre.
- Opening hours of pharmacies located close to GP practices reflect those of the GP practice. Additional opening during a Saturday ensures easy access to pharmacy services.
- Pharmacies located in the town centre and retail parks are easily accessible and offer long opening hours throughout the week and during weekends, providing significant service coverage. Parking in the town centre is charged according to length of stay, however parking at the retail parks is free of charge.
- With the opening of four new '100' hour pharmacy contracts there has been a substantial increase in weekend and evening opening hours. These extended hours have also supported provision during Bank Holidays
- Most pharmacies operate a collection and delivery service ensuring provision of medication to those unable to access a pharmacy (some pharmacies do have restrictions on who they will deliver to for example housebound, disabled).
- 'Shropdoc' (GP out of hours provider) holds stocks of emergency drugs that can be issued to patients when pharmaceutical services are unavailable, or if there should be significant difficulty in obtaining medication that was required without delay.

It should be noted that:

- Service coverage during weekends is less than that provided during weekdays. This reflects the reduced demand for dispensing provision over the weekend period. This provision would need to be reviewed following any changes to GP primary care services.
- There are a number of pharmacies providing services outside of the boundary of Telford and Wrekin, but this would not suggest local service coverage is deficient. Residents located in the north of Telford may choose to use pharmacies located in Shropshire County as they may be more accessible. Telford and Wrekin will review the PNAs from bordering localities to ensure service provision is maintained in these areas.

Recommendation

Telford and Wrekin has reviewed its coverage of dispensing services. The PNA has highlighted that there is currently sufficient coverage with existing community pharmacies and GP dispensing practice (Newport). The current geographical location and opening hours of dispensing services provides adequate choice and accessibility for the majority of the public.

An early review of this recommendation, will be required within 18 months to take into account any changes to: primary care and community health services provision and to reflect housing expansion and potential population growth in the Borough.

Access to advanced and enhanced pharmacy services - Key findings

Coverage of advanced and enhanced services is generally adequate across Telford and Wrekin, but there are areas of improvement that need to be considered by existing contractors. Telford and Wrekin encourages all contractors to engage with advanced, enhanced and locally agreed services for their patients.

Recommendations

Telford and Wrekin has reviewed its coverage of commissioned advanced and enhanced services provided by community pharmacies. The PNA has shown that there is sufficient coverage of MUR and NMS services based on current accreditation and provision. However Telford and Wrekin continues to encourage all community pharmacy contractors to engage with advanced service provision and support their local communities.

There is a need for commissioners to work with local contractors to increase awareness of common ailments service and improve on the current number of participating community pharmacies.

An evaluation of the newly commissioned flu vaccination service is needed to establish future commissioning intentions. Local healthcare partners need to work together improve on annual influenza vaccine uptake.

Locally Commissioned Services

Sexual Health Services - Key findings

- The public survey of views and knowledge of pharmacy services indicated that in terms of sexual health services: 67% of respondents were aware of the contraception service and advice offer in local community pharmacies, 32% of respondents were aware that pharmacies offered free condoms to those eligible and 24% of respondents reported awareness of the Chlamydia screening and treatment service in pharmacies
- Teenage conception rates have been historically high, but have been declining over the past decade and the highest rates seen in the most deprived electoral wards.
- The overall incidence of sexually transmitted infections (e.g. syphilis, gonorrhoea, genital warts and HIV infection) in Telford & Wrekin is low to average.
- Chlamydia testing and diagnoses rates in young people aged 15-24 years are lower than average, particularly in men.
- A total of 24 pharmacies are currently signed up to deliver an emergency hormonal contraception service and a further 11 pharmacies reported a willingness to deliver an EHC service through the pharmacy survey. There is a high level of satisfaction reported by EHC pharmacy service users.
- Town Centre pharmacies deliver the greatest uptake for EHC. This is not unexpected given the potential anonymity offered by the size and location of these pharmacies.
- In general sexual health service provision during weekends is significantly less than during weekdays. Community pharmacies open during the weekend offer essential provision during this time, especially those open during weekends and extended hours during the week.

Recommendations

Emergency Hormonal Contraception: Assessment of the current provision suggests that there is adequate local coverage for EHC. However, Telford and Wrekin Council encourage all community pharmacies to participate with this enhanced service, especially those open during weekends and extended hours during the week. Generally service provision during weekends is significantly less than that during weekdays. Community pharmacies open during the weekend offer essential provision during this time.

Chlamydia Screening Scheme: Assessment of current provision suggests that there is adequate local coverage in terms of pharmacy sign up for the Chlamydia Screening

Scheme. However, testing and treatment levels need to be improved amongst 15-24 young people, with a particular focus on men. A training programme should be developed as a way of encouraging and supporting pharmacies that have signed up to the scheme to improve access to Chlamydia testing and treatment.

Recommendation: Assessment of current provision suggests that there is adequate local coverage in terms of pharmacy sign up to distribute condoms, however more awareness is needed to promote the scheme as well as distributing condoms to young people accessing EHC and Chlamydia Screening & Treatment service within community pharmacies

Substance Misuse Services - Key findings

- Liver disease is the only major cause of early death in Telford and Wrekin which is still on the rise and this contributes to lower than average rates of life expectancy in both men and women. Reducing the number of people who misuse drugs and alcohol is Telford and Wrekin Health & Wellbeing Board priority.
- Community pharmacy services have a key role to play in improving treatment and recovery and minimising harm for people with substance misuse dependence problems, which are key aims of the Telford & Wrekin Drug & Alcohol Strategy.
- The public survey of views and knowledge of pharmacy services indicated that 52% of respondents were aware of the substance misuse services offer in local community pharmacy.
- The majority, 33 of out of 37 pharmacies offer a supervised consumption service, which benefited circa 280 people in recovery for drug dependence in 2013/14.
- Currently two pharmacies are offering a needle exchange service, which issued circa 1,015 needle packs to injecting drug users during 2013/14. In terms of future developments associated with drugs and alcohol misuse the majority of pharmacies indicate a willingness to offer services for alcohol screening and blood borne virus testing and immunisation.

Recommendations

Supervised consumption: Assessment of current need, demand and provision suggests there is an appropriate level of coverage across Telford & Wrekin, with only a small number of pharmacies not offering the service. Offering such a wide coverage has made it easier for clients to access the service within their localities. There are plans to try and engage all pharmacies in the service to achieve full coverage across Telford and Wrekin in the future.

Needle exchange: An increase in needle provision in the centre of the Telford is required. Client feedback and service evaluation will provide insight into the need for increased provision. A further three community pharmacies have been identified as potential sites to increase service capacity and improve needle provision, Asda, Town

Centre, Woodside Pharmacy and Oakengates Pharmacy. The central location of these sites as well as the weekend opening hours will significantly increase service provision.

Future substance misuse developments: Commissioners of public health services should seek to improve services for: alcohol screening and brief advice, blood borne virus testing and vaccination and naloxone provision (to reduce opiate overdose and drug-related deaths), considering community pharmacy provision. These intentions are: in line with agreed strategic objectives, evidence of effectiveness and best practice guidance and local levels of need and fit with the aspirations of local pharmacies.

Future Developments

The analyses in the PNA has highlighted key areas where community pharmacies could support delivery of the local health and wellbeing priorities. These should be taken into account when considering gaps in service delivery or where priority needs are not being met. Commissioning any new services from community pharmacies will need to be based on identified need. Services will need to be closely monitored to ensure they achieve the desired outcomes.

When reviewing and commissioning any future services, commissioners will need to consider where community pharmacy can improve the health and wellbeing of our communities, and address health inequalities. Commissioning strategies should focus on the strengths of community pharmacy and utilise them to help achieve local priorities.

Recommendations

- **Commissioners of pharmacy services and Health & Wellbeing partners should work together, supported by the LPC to raise awareness of pharmacy services and integrate them into local care pathways.**
- **Building on the local introduction of the PharmOutcomes system (by NHS England for quality monitoring and to support the seasonal 'flu immunisation service) commissioners and the LPC should work together to further roll out such systems across wider pharmacy services in Telford & Wrekin**
- **It is recommended that consideration be given to developing a Healthy Living Pharmacy programme in Telford & Wrekin.**
- **Cardiovascular Disease: It is recommended that consideration be given to developing pharmacy services to tackle CVD, particularly for groups who are less likely to access services through primary care**
- **Stop Smoking Services: Telford & Wrekin Council will award new Stop Smoking Services contracts to providers in January 2015, new services will be in operation from April 2015. It is recommended that pharmacies work closely with the providers organisations to expand the stop smoking services increasing the accessibility and reach in community pharmacies**

1. Introduction

1.1. Background

There have been significant changes in the NHS since the PNA was first published in 2011, as part of the Health and Social Care Act. Commissioning arrangements for the nationally agreed community pharmacy contract are now the responsibility of NHS England, locally supported and monitored by the Shropshire and Staffordshire Area Team (shortly to become the Shropshire, Staffordshire, Derby and Nottinghamshire Area Team). Public health responsibilities have now been moved to the local authority.

The Health and Wellbeing Board, hosted by the local authority, has the function of joining up commissioning local NHS services, social care and health improvement. It is intended that the HWB will allow local authorities to take a strategic approach and promote joint working across health and adult social care, children's services, including safeguarding, and the wider local authority agenda. These arrangements will give local authorities influence over NHS commissioning, and corresponding influence for NHS commissioners in relation to public health and social care.

Healthcare commissioners from Clinical Commissioning Groups and commissioners of public health services in local authorities need to consider community pharmacy as a willing provider of services and self-care advice, when redesigning local pathways to meet health and wellbeing needs.

1.2. National Context

1.2.1. The NHS Five Year Forward View

Since April 2013 NHS England has been responsible for commissioning the majority of community pharmacy services. NHS England has five main functions:

- Providing national leadership on commissioning for quality improvement
- Promoting and extending public and patient involvement and choice.
- Ensuring the development of GP commissioning consortia.
- Commissioning certain services, including community pharmacy services.
- Allocating and accounting for NHS resources.

The NHS Forward View published in October 2014, identifies three gaps that need to be addressed by the NHS:

- Health and wellbeing gap - which requires a radical upgrade in prevention
- Care and quality gap - which requires new models of care
- Funding gap - which requires increased efficiency and investment

Pharmacy services have a key role to play in improving the health of local people. Community pharmacies are often the first point of contact for people, especially those in deprived communities and those who may otherwise struggle to access healthcare

services. Offering a new deal for primary care is a key to the success of the Five Year Forward View. Building the public's understanding of pharmacies and on-line resources to reduce demand are highlighted as key areas for improvement.

1.2.2. White Paper Pharmacy in England

In the White Paper published in 2008 'Pharmacy in England building on strengths – delivering the future' the Government set an aim for community pharmacies to:

- Become "healthy living" centres promoting health and wellbeing and helping people to take better care of themselves.
- Supply certain common medicines and be the first port of call for people with minor ailments – saving every GP up to the equivalent of one hour per day or up to 57 million GP consultations a year.
- Support people with long term conditions, especially those starting out on a new course of treatment.

These priorities remain core principles for community pharmacies and world class pharmacy has several distinguishing features. It will be known in local communities:

- As a primary source of accessible, up-to-date, trusted and reliable health advice and information.
- For helping people to stay healthy and to improve their health where needed.
- For routinely promoting self care and for being associated with key public health initiatives, such as influenza immunisation and preventing heart disease.
- For providing new services to help people with acute conditions and long term conditions.
- For skilled, knowledgeable, competent and considerate staff.
- As part of a strong local network of health improvement services and 'local leaders' for health in the community.
- As a wider 'information retailer', helping people to interpret and decide about the many sources of information now available about medicines, as well as providing information about broader health, wellbeing and social matters such as sustainable development.

1.2.3. Health and Wellbeing Board PNA Duties

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

Decisions on whether to open new pharmacies are not made by the HWB. Pharmacies must submit a formal application to NHS England. The relevant NHS England Area Team will then review the application and decide if there is a need for a new pharmacy in the proposed

location. When making the decision NHS England is required to refer to the local PNA. As these decisions may be appealed and challenged via the courts, it is important that PNAs comply with regulations and that mechanisms are established to keep the PNA up-to-date. In accordance with these regulations, the Telford and Wrekin PNA will be updated every three years. The availability of new information for the PNA will be assessed by the PNA Steering Group every six months and if indicated 'Supplementary Statements' will be produced, which will include information on new needs for example changes to the population size.

The PNA should include information on:

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

The findings of the PNA will:

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

The purpose of the PNA was to establish a direct link between the needs of the population and the visions and goals of Telford and Wrekin and define areas where community pharmacies could assist in meeting these needs.

Since the last publication of the PNA there has been a significant reorganisation of the NHS and how services are now commissioned.

Enhanced and Advanced pharmaceutical services are now commissioned by NHS England. Local authorities and Clinical Commissioning Groups (CCGs) are able to commission community pharmacy services as 'locally agreed services'

The PNA will identify what is needed at a local level to support local commissioning plans. It will focus on the public health role of community pharmacies as well as the core requirement of supplying medication.

Informed decision making through the PNA will ensure service development is based on population need.

It has been recognised that community pharmacies can support the local population in achieving the health improvement part of Telford and Wrekin's Operational Plan. Consideration will need to be given to the location of pharmacies in relation to areas of social deprivation and health need, and the range and distribution of pharmacy services currently undertaken in these areas.

The PNA will offer vital guidance when commissioning and redesigning services. Within Telford and Wrekin, community pharmacies already successfully provide additional services such as Medication Use Review, supporting substance misuse clients, and supplying emergency hormonal contraception. The PNA will assess how and where these services are currently delivered.

Consultation on pharmaceutical needs assessments

When making an assessment for the purposes of publishing a pharmaceutical needs assessment, each HWB must consult the following about the contents of the assessment it is making:

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

2. Developing the PNA: The Process

2.1. Introduction

Following on from the NHS reorganisation it was agreed that the PNA, published in 2011, would be refreshed by March 2015, in line with the new duties of the Health & Wellbeing Board. There was recognition that the legislative changes to market entry regulations made it important that an up-to-date, robust PNA was required to assess future contact applications.

2.2. PNA Steering Group

A steering group was formed with key stakeholders to oversee the refresh of the PNA and provide governance. Membership included: including CCG Medicines Management, local authority public health and research and intelligence teams, NHS Area Team and Health Watch Telford & Wrekin. (See Appendix I for steering group terms of reference) The aims of the steering group were to:

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

Guiding principles used for the original PNA development remained in place:

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

2.3. Overview

Key elements in the PNA refresh during 2014 included the following areas of work:

- Briefing reports and presentations to the Health & Wellbeing Board, NHS Telford & Wrekin CCG Board and Local Pharmaceutical Committee (Appendix II)
- Community pharmacies and dispensing GP practice service provision mapping exercise, to update information on: contact details, opening hours and provision of pharmaceutical services (essential, advanced and enhanced services). The questionnaires used also gathered more detailed information on community pharmacy premises and the current

workforce. Views were also sought from community pharmacies services gaps in the context of needs of their local population.

- A public survey of views and opinions on community pharmacy
- Refresh of JSNA intelligence on:
 - Demographic and socio-economic factors, including updated locality maps
 - Health and wellbeing priority facts and figures
 - Population health outcomes and surveillance trends
- Community pharmacy service activity monitoring and analyses
- The mapping of pharmaceutical services outside Telford and Wrekin's borders was undertaken using dispensing reports from ePACT data. A summary of the findings has been included in the PNA.
- Equalities Impact Assessment on the key findings and proposed PNA recommendations

2.4. Consultation on the Draft PNA

A 60 consultation is now being held to seek views on the key findings and the proposed recommendations in the PNA. The consultation period is due to run from noon on Friday 12th December 2014 to noon on Friday 13th February 2015. The consultation aims to be open and transparent. The list of consultees, as defined through PNA regulations, will be proactively engaged by PNA Steering Group members to ensure their involvement. The draft PNA consultation will also be made more widely available through the CCG website and all comments will be considered by the steering group. Comments should be emailed to Pharmacy.Needs@telfordccg.nhs.uk

The steering group will provide further information on any parts of the PNA as requested during the consultation and will arrange to discuss the PNA proposals with any local groups or individuals as required.

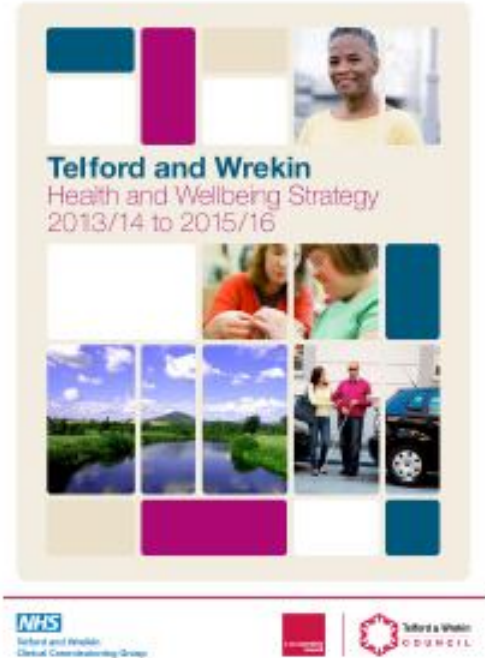
2.5. Health & Wellbeing Board Approval

Telford & Wrekin Health and Wellbeing Board are due to consider the draft PNA and all the consultation responses formally on 11 March 2015. Following this meeting the final PNA will be published by 31 March 2015.

3. Local Strategic Context

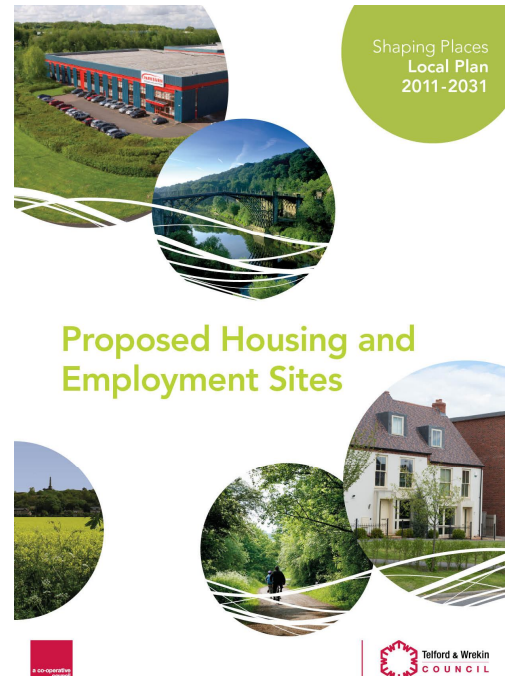
3.1. Telford & Wrekin Health and Wellbeing Strategy

- The Joint Strategic Needs Assessment identifies “the big picture” in terms of current and future health and wellbeing needs and inequalities in Telford and Wrekin.
- The overall aim of the process is to inform the development of commissioning priorities for the local authority and Telford and Wrekin. Commissioning in line with these local priorities is ensuring service development is needs-led improving health outcomes and reducing health inequalities of the local population.
- The Health and Wellbeing Strategy 2013/14 to 2015/16 priorities were agreed based on JSNA evidence of the top ten health and wellbeing issues.
- The PNA is a key component of the JSNA process



3.2. Shaping Places

- Shaping Places - the new Local Plan for the Telford and Wrekin makes proposals for development of housing, green space, shops, businesses, transport and community facilities
- The plan aims to strengthen the identity of Telford as a "green town" and building on our position in the top three cities for increasing the supply of housing and private sector jobs
- The Plan proposes a target of approximately 20,000 homes over a 20 year period, 11,885 homes are already committed a further and a further 8,115 new homes are still required.
- The new proposed sites equate to 9,986 homes - 23% more than the 8,115 new homes needed to deliver the Shaping Places target. Final approval of the Plan is expected during the Summer 2016



3.3. Health and Care Services Transformation

3.3.1. Better Care Fund

The Better Care Fund (BCF) is being used to transform the health and social care system in Telford and Wrekin, promoting greater independence for patients and service users and improving on current areas of integrated care.

In five years' time social care and health services will be fully integrated in the delivery of community-based services care. The development and implementation of integrated health and care structures, be contributing to a better patient experience and improvement in outcomes, but at a significant lower cost.

The aims of BCF are to:

- Deliver the best possible health and social care outcomes for individuals in a personalised way.
- Promote and encourage self-help and self-care wherever and for as long as possible
- Enable those at increased risk of hospital, nursing or residential care admission to have easy access to systems in place, to get appropriate help at an early stage.
- Ensure financial efficiency and reducing duplication.

3.3.2. Future Fit

Future Fit is the programme which is shaping the future of all health services in Shropshire, Telford & Wrekin. The programme is in place to ensure that excellent health services are designed to meet the changing needs of our population now and in the future, ensuring high quality services are in place in the context of the challenging financial environment.

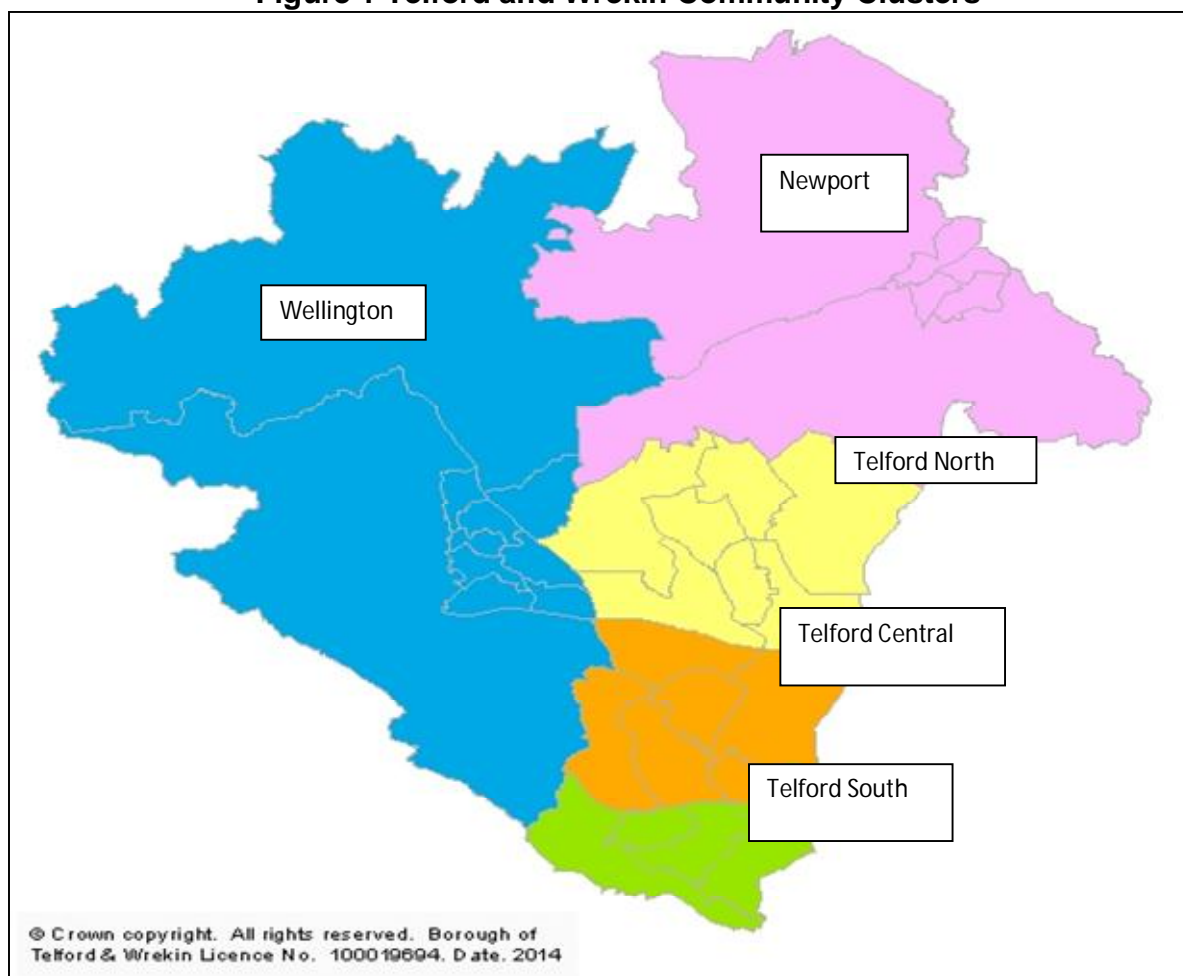
The FutureFit2 programme will develop the community based service response to the FutureFit vision of a more preventative more personalised better networked vision of a health and care system. The work will encompass a broad spectrum of community based care and community-based providers. Community pharmacy provision and developments will be a key component of the second phase of the programme.

4. Local Health and Wellbeing Needs

4.1. Telford and Wrekin community clusters

Telford and Wrekin has been divided into community clusters (localities) based on population density. The clusters are already in use within the local authority for area management and service delivery. (Figure 1) The clusters will be used to help determine pharmaceutical service needs and assess the need for dispensing provision.

Figure 1 Telford and Wrekin Community Clusters



Cluster	Wards	
Newport (pink)	Newport East Newport North Newport South	Newport West Edgmond Church Aston & Lilleshall
Wellington (blue)	Apley Castle Arleston College Dothill Ercall Magna	Ercall Haygate Park Shawbirch Wrockwardine
Telford North (Yellow)	Donnington Hadley & Leegomery Ketley & Oakengates Muxton	Priorslee St Georges Wrockwardine Wood & Trench
Telford Central (orange)	Brookside Dawley Magna Horsehay & Lightmoor	Lawley & Overdale Malinslee The Nedge
Telford South (green)	Cuckoo Oak Ironbridge Gorge	Madeley Woodside

4.2. Key demographic messages for Telford and Wrekin

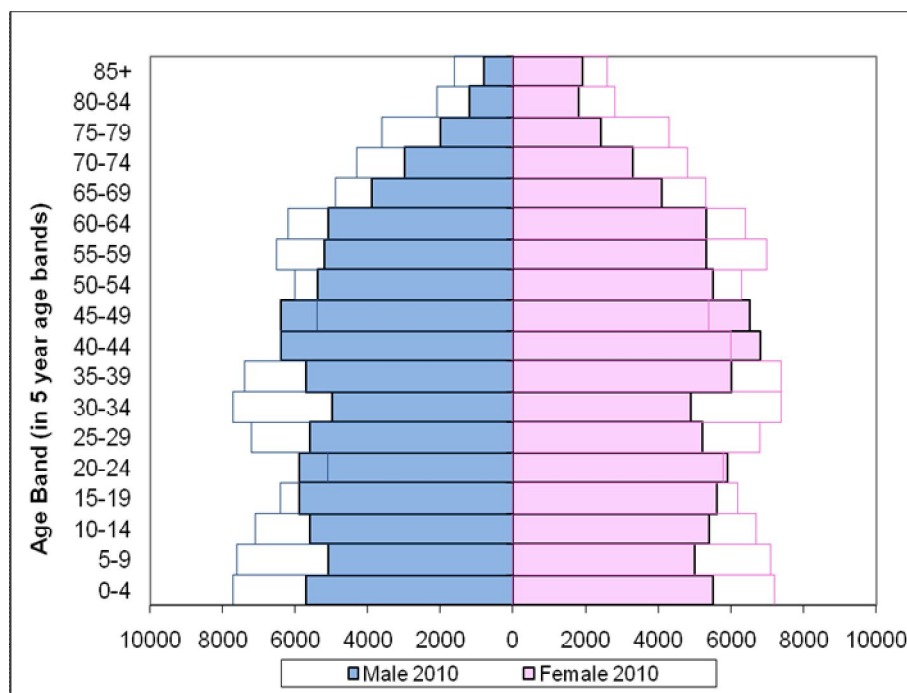
- The population of the Borough is currently estimated at 170,300, with a younger age structure than nationally. Mortality rate within Telford and Wrekin is improving, and this combined with an increasing fertility rate contributes to the growing population.
- The population of the Borough is forecast to increase to 196,300 by 2026, an increase of 26,100 people or 15%. This increase is largely through immigration of families due to the housing stock available in the Borough.
- During the period up to 2026 the 65+ population of the Borough will increase by 9,200 people, an increase of 37%. Currently this cohort represents 14.5% of the total population, by 2026 those aged 65+ will contribute 17.3% of the Borough's population.
- The population of young people within Telford & Wrekin is also projected to increase 29%, from 34,300 to 44,200 in 2026. Currently the 0-15 cohort accounts for 20.1% of the population, this is set to increase to 22.5% by 2026.
- It is projected that the BME population of Telford & Wrekin will increase by around 43% by 2026 from 15,200 to 21,800, with the over 65 cohort increasing by 51%, an additional 600 people.
- The population projections for the borough are due to be refreshed during 2015. This report will be made available at www.telford.gov.uk/factsandfigures

Table 1 Population growth in Telford and Wrekin (2010 to 2025)

Age band	Population projections		Increase from 2010 to 2025	
	2010	2025	Number	%
0-15	34,600	46,100	11,500	33%
16-29	31,900	35,600	3,700	12%
30-44	34,800	42,400	7,600	22%
45-64	44,500	49,200	4,700	11%
65-84	21,800	32,100	10,300	47%
85+	2,700	4,100	1,400	52%
Total	170,200	209,600	39,400	23%

Source: Telford and Wrekin Joint Strategic Needs Assessment: Council Population Projection Model

Figure 2 Population by age band and gender Population for 2010 and population projections for 2025



4.3. Key socio-economic messages for Telford and Wrekin

The JSNA indicates the following socio-economic headlines:

- Telford and Wrekin is in the top 30% most deprived local authorities in the West Midlands, and in the top 40% most deprived nationally.
- Across Telford and Wrekin there are pockets of nationally significant deprivation. There are 14 Telford and Wrekin SOAs (out of a total 108) ranked within the top 10% most deprived nationally (areas of Woodside, Malinslee, Cuckoo Oak, Brookside, Hadley & Leegomery, Dawley Magna, College and Donnington) an increase from six SOAs in the 10% most deprived in 2007.
- The most deprived wards are Woodside and Malinslee. All of Woodside's five SOAs rank in the 20% most deprived nationally as do three of the four SOAs in Malinslee.
- The more deprived areas are typically concentrated in the urban areas of the Borough, often around the new town estates. The exception to this is the 'Barriers to Housing and Services' domain for which the areas with the greatest level of deprivation are in the rural area.
- At the other end of the scale there are eight SOAs within the Borough which rank in the 10% least deprived nationally (areas of Priorslee, Shawbirch,

Apley Castle, Newport North, Ercall, Newport West) a slight increase from seven in 2007.

- Of the seven domains, Education, Skills & Training ranks the greatest number of SOAs in the 20% most deprived nationally – 41, over a third of SOAs, with 22 of these in the 10% most deprived. In total, these 41 SOAs represent 38% of the Borough's population.
- Within the 'Health Deprivation and Disability' domain some areas of the Borough have become considerably less deprived with the highest rank now 30,204 (out of 32,482, 8% least deprived) compared to 26,488 in 2007 (19% least deprived). However improvement has not been seen at the most deprived end of the scale resulting in a widening of the gap.
- The income deprivation affecting children index shows that 10,200 children (aged 0-15) across the Borough live in areas ranked in the 20% most deprived nationally, almost a third (31%) of the Borough's child population.
- The income deprivation affecting older people index shows 6,600 older people (65+M/60+F) within the Borough living in areas ranked in the 20% most deprived nationally, almost a quarter (24%) of the Borough's older population.
- Levels of deprivation across the Borough have increased with 13% of the population living in the 10% most deprived areas nationally in 2010 compared to 5% in 2007. Overall the changes in the 2010 profile for the Borough suggest that inequality has increased since 2007.

The Index of Multiple Deprivation is due to be refreshed in 2015. The report of the key findings for Telford & Wrekin will be made available at www.telford.gov.uk/factsandfigures

Appendix III shows the community pharmacies and dispensing doctor location mapped against national deprivation quintiles.

4.4. Telford & Wrekin Health & Wellbeing Priorities

Over the past 20 years, health and wellbeing in the Borough has improved significantly with people living longer and staying healthier than ever before. There are fewer smokers, early death rates under 75 years have reduced and life expectancy in men and women has improved. However, there are still some significant health challenges and inequalities across the borough, including increasing levels of overweight and obesity amongst adults and children. The Telford and Wrekin Health and Wellbeing Strategy (2013/14 to 2015/16) identifies the following ten priorities:

- Reduce excess weight in children and adults
- Reduce teenage pregnancy
- Improve emotional health and wellbeing
- Support people with autism
- Reduce the number of people who smoke
- Reduce the misuse of alcohol or drugs
- Improve adult and children carers' health and wellbeing
- Improve life expectancy and reduce health inequalities
- Support people to live independently
- Support people with dementia

Key facts and figures for the health and wellbeing priorities are summarised in Table 2.

Community pharmacy has a key role to play in delivering improved outcomes for the top ten health and wellbeing priorities. (see Appendix I for an overview of pharmacy services mapped to the priorities). Many services currently delivered in community pharmacies in Telford & Wrekin directly contribute to the health and wellbeing priorities, these are covered in following sections of the PNA.

Additional services, which are not currently provided but could be considered in the future, are later in the PNA). Future developments will be considered by commissioners with the LPC and pharmacy contractors and in the context of local need, wider service provision and funding.

Table 2 Telford and Wrekin Health & Wellbeing Priorities: Key Facts and Figures

<p>Reduce the number of people who smoke</p> <ul style="list-style-type: none"> • The adult smoking prevalence in 2013 was estimated to be higher than the national average, 21% compared to 18.4% in England. This equates to circa 27,800 smokers aged 16 years and over in Telford & Wrekin • In 2013/14 1,360 smokers quit with support from NHS Stop Smoking Services, including 98 pregnant women • Smoking quit rates per head of population remained significantly higher than the national average (1,015 per 100,00 pop compared to 688 across England as a whole) during 2013/14 • Levels of smoking in pregnancy are persistently, significantly worse than the national average. 22.4% of mothers smoked during pregnancy in 2013/14 (471 women still smoking at delivery), compared to 12.0% in England as a whole 	<p>Improve life expectancy and reduce health inequalities</p> <ul style="list-style-type: none"> • Life expectancy at birth is statistically significantly worse than the England average for men (77.9 years compared to 79.2 years) and women (81.6 years compared to 83.0 years) • The early death rates (under 75 years) from cancer and cardiovascular diseases remain significantly worse than the national average • 70% of adults are estimated to be overweight or obese in 2012 and the recorded prevalence of diabetes in 2012/13 (6.3%) was significantly higher than the England average (6.0%), • The uptake of ‘flu immunisation is lower than the national average in older people and younger people with chronic conditions and bowel cancer and cervical screening programmes uptake is also below the national averages • The uptake of NHS Health Checks is lower than the national average, 38.7% of 40-74 year olds taking up the offer, compared to 49.0 in England as a whole during 2013/14
<p>Reduce teenage pregnancy</p> <ul style="list-style-type: none"> • There were 123 conceptions amongst under 18 year olds in 2012, teenage pregnancy rates a declined significantly during the past three years • However, the under 18 conception rate in 2012 (36.8 per 1,000 females aged 15-17 years) remained statistically significantly worse than the national average for England (27.7 per 1,000) • The proportion of pregnant women under 18 opting to terminate their pregnancy (38.2%) was significantly lower than the England average (49.1%) in 2012 • The electoral wards with the highest teenage pregnancy rates are also amongst the most deprived wards • The proportion of 15-24 year olds screened for Chlamydia infection in 2013 was significantly lower than the national average (20.1% compared to 24.9% across England). The uptake of Chlamydia testing in young men is needs to increase 	<p>Reduce the misuse of alcohol or drugs</p> <ul style="list-style-type: none"> • Rates of early death (under 75 years) from “preventable” liver disease are worse than the national average, circa 30 early deaths every year • There are an estimated 1,020 opiate and crack cocaine users, circa 50% - 508 were in treatment in 2012/13. Drug treatment programme completion rates are average, 8% for opiate users and 38% non opiate users • In terms of alcohol consumption it is estimated that: <ul style="list-style-type: none"> ○ 24,265 people (18.7% of adults) are binge drinkers ○ 33,997 people (26% of adults) are higher risk drinkers ○ 4,151 are dependent drinkers • Approximately 440 hospital admissions per year which are directly related to alcohol, rates are significantly better than the England average and are decreasing • A wider group of admissions (circa 3,370 per year) are potentially related to alcohol, these rates are increasing although are currently better than the England average

Table 2 Telford and Wrekin Health & Wellbeing Priorities: Key Facts and Figures (cont.)

<p>Improve emotional health and wellbeing</p> <p>Self reported wellbeing indicators for Telford and Wrekin (2012/13):</p> <ul style="list-style-type: none"> • 4.7% of people report a low worthwhile • 11.9% of people report a low happiness • 20.1% of people report feeling anxious • It is estimated that in 2010 around 17,200 people in Telford and Wrekin suffered from a common mental disorder such as depression, anxiety and obsessive compulsive disorder • One in ten children aged between 5 and 16 years suffers with a mental health problem, and many continue into adulthood • There are on average 15 suicides every year. The largest proportion of suicides is amongst men aged 21 to 39 years • In 2012/13 there were 406 hospital stays for self-harm. The hospital admission rate for self-harm in 2012/13 was significantly higher than the national average 	<p>Improve adult and children carers' health and wellbeing</p> <ul style="list-style-type: none"> • Estimated 16,200 people over 18 providing unpaid care. Over 4,000 of these people are providing substantial and intense care • 193 young carers are known to us though there are an estimated 600 young people in the Borough with caring responsibilities • Carers are more likely to be female and the largest proportion are aged 35-64. Carers aged 18-45 are less likely to receive support services than those who are older • People who care for someone over 65 get fewer carers' services than the national average • The reported health of carers is below national average. Carers' health is poorer than that of non-carers, and the more hours spent caring, the poorer the reported health of carers. • There is a predicted decline in the proportion of people able to care for family, friends or neighbours in the borough as the ratio of adults to older people decreases.
<p>Support people to live independently</p> <ul style="list-style-type: none"> • 48% of people who completed a period of re-ablement in 2010/11 did not require any ongoing social care support. • There are pockets of good practice but these services are not joined up, are complex to navigate and patchy, leading to inequity in access • Where investment has taken place, there is evidence of reduced on going costs • Only approx. 30% of people who would benefit from re-ablement are currently accessing the service 	<p>Support people with dementia</p> <ul style="list-style-type: none"> • In 2010 an estimated 1,600 people aged 65 and over in Telford and Wrekin were suffering from dementia, by 2026 this is estimated to rise to 2,100. <p>Increased population and increased longevity of life leading to increased dementia prevalence</p> <p>Predicted decline in the number of carers due to social factors</p> <p>A need for a greater focus on local delivery of quality outcomes and local accountability for achieving them</p>
<p>Reduce excess weight in children and adults</p> <ul style="list-style-type: none"> • The estimated level of adults carrying excess weight (is 70%, which is higher than the national average of 63.8%) • Almost a quarter (24.2%) of Reception year children (aged 4-5yrs) are classified as obese, compared to 22.2% in England as a whole • Over a third (35%) of 10-11 year olds are classified as obese, the national average for England is 33.3% 	<p>Support people with autism</p> <ul style="list-style-type: none"> • Estimated that 1 in every 100 adults will be on the autistic spectrum, which equates to approximately 1,700 people in Telford and Wrekin. • Historically, local services have developed disparately, leading to inconsistencies in the services that users might expect and physical surroundings which are not fit for purpose

5. Current pharmaceutical service provision

5.1. Overview

Pharmaceutical services in Telford and Wrekin are provided through:

- Community pharmacy contractors
- Dispensing doctor practice (Newport Surgery)
- Dispensing appliance contractor (DAC)

Medical services within Telford and Wrekin are provided by one acute trust, the Shrewsbury and Telford Hospitals NHS Trust (SaTH) based at two sites the Princess Royal Hospital, Telford and the Royal Shrewsbury Hospital. GP services are provided by 22 local sites. This includes two walk in centres located within the town centre and the acute hospital site.

GP out of hours services are currently provided by 'Shropdoc'. Shropdoc provide a GP out of hours service to all clusters. They hold stocks of emergency drugs that can be issued to patients when pharmaceutical services are unavailable, or if there should be significant difficulty in obtaining medication that was required without delay.

Data for current pharmacy services provided in the borough was collated using a pharmacy practice questionnaire.

All local contractors and where possible their head office representatives were asked to complete the questionnaire and return to Telford and Wrekin in August 2014. The questionnaire was developed following discussion with the Local Pharmaceutical Committee.

Returned questionnaires were analysed by the Medicines Management Team.

Information regarding the dispensing service at Wellington Road Surgery (Newport) was obtained directly from the GP practice.

The following sections provide some detailed analysis of current pharmaceutical service provision.

5.1.1. Pharmacy contract applications - Control of entry

The Area Team as the local representative of NHS England, is currently responsible for the provision of NHS pharmaceutical services.

From 1 April 2013, responsibility for maintaining pharmaceutical lists moved to the NHS Commissioning Board (NHSCB) supported locally by the Area Team.

Applications for new, additional or relocated premises will need to be made to the NHSCB. Routine applications for a new pharmacy will be assessed against this Pharmaceutical Needs Assessment or subsequent updates produced by the HWB.

The pharmaceutical services to which each pharmaceutical needs assessment must relate are all the pharmaceutical services that may be provided under arrangements made by the NHSCB for—

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

5.1.2. Rural dispensing

The control of entry system applies equally to urban and rural areas. However, where a CCG has determined that an area is controlled (rural in character), provided certain conditions are met, doctors as well as pharmacies can dispense NHS medicines. GPs, can in general, dispense NHS prescriptions only with NHS approval and only to their own patients, who live in the controlled locality and live more than 1.6km (as the crow flies) from a pharmacy. The main purpose is to ensure patients in rural areas, who might have difficulty getting to their nearest pharmacy, can access the dispensed medicines they need.

For further guidance see the 'NHS (Pharmaceutical Services) Regulations: <http://www.legislation.gov.uk/ukxi/2013/349/contents/made>

5.2. Community Pharmacy Service Provision

Community pharmacies already make a significant contribution to the health and wellbeing of the local population. Essential services as outlined by the community pharmacy contract are delivered by all contractors. Contract adherence is monitored by the Area team.

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

5.3. Dispensing doctors: Pharmaceutical Service Provision

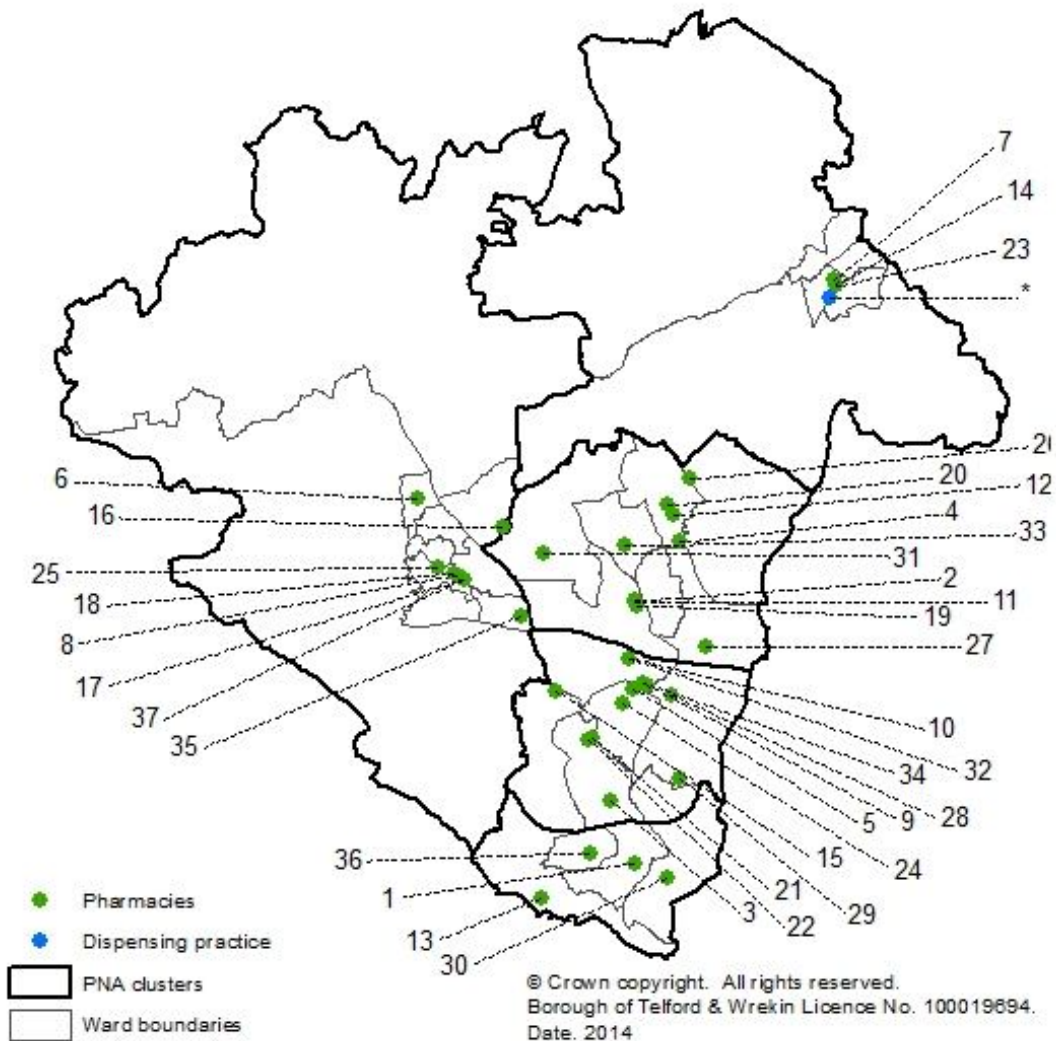
Telford and Wrekin has one dispensing practice – The Surgery, Wellington Road Newport. The practice offers a dispensing service to its registered patients who live more than 1.6km from the nearest local pharmacy and reside within the controlled locality. A controlled locality is an area which has been determined by Telford and Wrekin to be “rural in character”.

Dispensing practices are able to offer a dispensing service to meet pharmaceutical service needs for eligible patients. (A range of other services are also offered through

5.4. Dispensing appliance contractor: Pharmaceutical Service Provision

NHS Telford and Wrekin has one dispensing appliance contractor – Clinisupplies Ltd. See Appendix IV for contact details.

Figure 3 Community pharmacies / dispensing doctor contractor location within clusters



Key	Practice/business address	Address	Address	Address	Postcode
1	A S Kitching Ltd	Limes Walk	Oakengates	Telford	TF2 6EP
2	Aqueduct Pharmacy	Majestic Way	Aqueduct	Telford	TF4 3RB
3	Asda Instore Pharmacy	St Georges Road	Donnington Wood	Telford	TF2 7RX
4	Asda Instore Pharmacy	Southwater Way	Mallingsgate	Telford	TF3 4HZ
5	Boots the Chemist Ltd	2-3 Acorn Way	Shawbirch	Telford	TF5 0LW
6	Boots the Chemist Ltd	52 High Street	Newport	Shropshire	TF10 7AQ
7	Boots the Chemist Ltd	21-25 New Street	Wellington	Telford	TF1 1LU
8	Boots the Chemist Ltd	4-10 North Sherwood Street	Town Centre	Telford	TF3 4AS

Key	Practice/business address	Address	Address	Address	Postcode
9	Boots the Chemist Ltd	Forge Retail Park	Colliers Way	Telford	TF3 4AG
10	Donnington Pharmacy	Health Centre Wrekin Drive	Donnington	Telford	TF2 8EA
11	High Street Pharmacy	4 High Street	Newport	Telford	TF10 7AN
12	Ironbridge Pharmacy	The Square	Ironbridge	Telford	TF8 7AQ
13	Jhoots Pharmacy	32 Market Street	Oakengates	Telford	TF2 6ED
14	Lawley Pharmacy	Off Birchfield Roundabout	Lawley Bank	Telford	TF4 2LL
15	Leegomery Pharmacy	Leegomery Local Centre	Leegomery	Telford	TF1 4XQ
16	Lloyds Pharmacy	Chapel Lane	Wellington	Telford	TF1 1SS
17	Lloyds Chemist	15a Market Square	Wellington	Telford	TF1 1BU
18	Lloyds Pharmacy	Charlton Medical Centre	Lion Street, Oakengates	Telford	TF2 6AQ
19	Lloyds Pharmacy	6 The Parade	Donnington	Telford	TF2 8EB
20	Lloyds Pharmacy	Webb House, King St	Dawley	Telford	TF4 2AA
21	Lloyds Chemist	46 High Street	Dawley	Telford	TF4 2EX
22	M.R. Clarke, Chemist	76 Upper Bar	Newport	Shropshire	TF10 7AW
23	Malinslee Pharmacy	Church Road	Malinslee	Telford	TF3 2JZ
24	Morrisons Instore Pharmacy	Springhill	Wellington	Telford	TF1 1RP
25	Muxton Pharmacy	9 Fieldhouse Drive	Muxton	Telford	TF2 8JQ
26	N & E Jones Ltd	7 Anstice Square	Madeley	Telford	TF7 5HB
27	Priorslee Pharmacy	Local Centre	Priorslee	Telford	TF2 9RS
28	Rowlands Pharmacy	Unit 2, Downmead	Hollinswood	Telford	TF3 2EW
29	Rowlands Pharmacy	Stirchley Health Centre	Sandino Road	Telford	TF3 1DY
30	Rowlands Pharmacy	Maythorne Close	Sutton Hill	Telford	TF7 4DH
31	Rowlands Pharmacy	Shop 14, Gladstone Centre	Hadley	Telford	TF7 5NF
32	Sainsbury's Instore Pharmacy	Forge Retail Park	Colliers Way	Telford	TF3 4AG
33	Shire Pharmacy	Teagues Crescent	Trench	Telford	TF2 6RY
34	Superdrug Stores	12-13 Dean Street	Town Centre	Telford	TF3 4BT
35	Tesco Instore Pharmacy	The Retail Park, Arleston	Wellington	Telford	TF1 2DE
36	Wellington Pharmacy	Chapel Lane	Wellington	Telford	TF1 1PZ
37	Woodside Pharmacy	Park Lane Centre	Park Lane	Telford	TF7 5QZ
★	Wellington Road Surgery (Dispensing Doctor)	Wellington Road	Newport	Shropshire	TF10 7 HG

5.5. Prescription collection and delivery

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

Local guidance requires patients to be integral to ordering of their medicines. Pharmacies will facilitate the ordering process but they are advised that the patient must be involved in ordering their prescription. Generally patients must request a repeat prescription and the community pharmacy will then send the prescription requests to the patient's GP and collect the prescription when ready.

An increasing number of pharmacies and GP practices are now offering people the ability to order their medication online. Over the next 12 months (Beginning January 2015) Telford and Wrekin will aim to implement the electronic prescription service for all patients who have nominated a dispensing provider.

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

Appendix IV shows pharmacies that currently have a prescription collection and delivery service.

Appendix VI shows Community pharmacies/dispensing doctor location with GP practice location Telford and Wrekin mapped against population density.

5.5.1. Assessment of current dispensing service provision

Key findings

Based on the above analyses Telford and Wrekin considers current pharmaceutical services to be adequate for the local population. The reasons for this are as follows:

- Current geographical location of pharmacies is broadly centered on population density within each cluster.
- There is sufficient choice for patients wanting to access dispensing services close to their GP practice or those that wish to travel into the town centre.
- Opening hours of pharmacies located close to GP practices reflect those of the GP practice. Additional opening during a Saturday ensures easy access to pharmacy services.

- Pharmacies located in the town centre and retail parks are easily accessible and offer long opening hours throughout the week and during weekends, providing significant service coverage. Parking in the town centre is charged according to length of stay, however parking at the retail parks is free of charge.
- With the opening of four new '100' hour pharmacy contracts there has been a substantial increase in weekend and evening opening hours. These extended hours have also supported provision during Bank Holidays
- Most pharmacies operate a collection and delivery service ensuring provision of medication to those unable to access a pharmacy (some pharmacies do have restrictions on who they will deliver to for example housebound, disabled).
- 'Shropdoc' (GP out of hours provider) holds stocks of emergency drugs that can be issued to patients when pharmaceutical services are unavailable, or if there should be significant difficulty in obtaining medication that was required without delay.

It should be noted that:

- Service coverage during weekends is less than that provided during weekdays. This reflects the reduced demand for dispensing provision over the weekend period. This provision would need to be reviewed following any changes to GP primary care services.
- There are a number of pharmacies providing services outside of the boundary of Telford and Wrekin, but this would not suggest local service coverage is deficient. Residents located in the north of Telford may choose to use pharmacies located in Shropshire County as they may be more accessible. Telford and Wrekin will review the PNAs from bordering localities to ensure service provision is maintained in these areas.
- Questions have been raised about pharmaceutical service provision for the South Telford and Wrekin cluster during evenings (after 6pm) and weekends for residents who are unable to access public transport or have access to a car. Service for these individuals does need to be considered however to date Telford and Wrekin has not received any official complaints about lack of access to pharmaceutical services.
- The PNA will be reviewed to take account of population growth which may influence service requirements.

Recommendation

Telford and Wrekin has reviewed its coverage of dispensing services. The PNA has highlighted that there is currently sufficient coverage with existing community pharmacies and GP dispensing practice (Newport). The current geographical location and opening hours of dispensing services provides adequate choice and accessibility for the majority of the public.

An early review of this recommendation will be required following any changes to primary care GP service provision and to reflect housing and potential population growth in the locality.

5.5.2. Current service provision

Within Telford and Wrekin community pharmacies are conveniently located around local communities and GP practices (Appendix VI), ensuring the availability of pharmaceutical services for their local communities.

Telford and Wrekin has 37 registered pharmacy contractors and one dispensing doctor practice. Using the most recent population estimates (170,300 – 2012/13 data). Telford and Wrekin has approximately one pharmacy per 4,602 people. This is comparable with the West Midlands average (5,000 people per pharmacy).

The geographical spread of contractors is focused on local communities and high population density. Population density in specific areas of the Wellington and Newport cluster is significantly less and this is reflected in the number of pharmacies located in these specific areas. Although dispensing provision in these areas is considered adequate.

The opening hours of community pharmacies located close to GP practices reflect the opening hours of those practices, ensuring pharmaceutical services are provided at appropriate times and locations. Contractors have shown a great deal of flexibility in their hours of service to accommodate their local practices. A number of contractors located close to GP practices are also open on Saturday mornings to allow for prescription collection for those people unable to visit the pharmacy during weekdays.

The town centre has three community pharmacies which are easily accessible via local public transport. These particular contractors provide essential pharmaceutical services to people who use the town centre facilities, including those who work in the town centre and use the walk in centre (Malling Health) located in the town centre. Their opening hours and the days they are open (including weekends) ensure pharmaceutical services are not compromised throughout the week.

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

Pharmaceutical service coverage over the weekend is less than that during the week.

Weekday pharmaceutical service provision

Newport

Pharmaceutical services are available from 7.30am till 10.30pm

Wellington

Pharmaceutical services are available from 8.00am till 11.30pm (Mon-Thu) /11.00pm(Fri)

Telford North

Pharmaceutical services are available from 8.00am till 11.00pm

Telford Central

Pharmaceutical services are available from 8.00am till 11.00pm

Telford South

Pharmaceutical services are available from 8.00am till 6.00pm

Extended hours pharmaceutical service provision is available in the Newport, Wellington, Telford North and Telford Central clusters.

Saturday pharmaceutical service provision

- 30 pharmacies are open on a Saturday, 13 of which are open for half a day only.
- 17 pharmacies open throughout the day with four pharmacies Tesco (Arleston) open from 8am till 9pm, Asda (Donnington) open from 7am till 10pm, Asda, Telford Town Centre open 8am till 10pm and Wellington pharmacy, Chapel Lane and High Street Newport Pharmacy open 8am till 11pm.
- All clusters have pharmacy services, with the Newport, Telford Central, Wellington and Telford North having provision for extended hours.

Sunday pharmaceutical service provision

- 10 pharmacies are open on a Sunday (pharmacies located in Newport, Telford North, Wellington and Telford Central)
- Pharmaceutical service provision is available from 9am till 8pm
- Extended hours provision is available in Newport, Wellington and Telford North Clusters
- There is no pharmaceutical service provision for Telford South.

Bank holiday provision

Pharmaceutical service provision for Bank Holiday's is currently the responsibility of NHS England. The increase in '100' hour contract provision in Telford has helped to meet Bank Holiday requirements. However where service provision is required local contractors are asked to support a local rota service cover official bank holidays within the borough

Extended hours dispensing services

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

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

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

Dispensing Doctor Provision

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

The development of repeat prescription collection and delivery services has provided comprehensive local coverage of dispensing service provision, ensuring provision of prescribed medication for people unable to access community pharmacies.

5.6. Emergency supply of prescription only medication.

Current legislation allows registered community pharmacy contractors to supply prescription only medication to patients without a prescription where certain conditions are met. This exemption offers useful opportunity to ensure patients have access to their essential medication when their GP practice is closed. All contractors are encouraged to make use of the exemption where they feel it is appropriate to do so and emergency supply requirements are satisfied to ensure access to ongoing treatment.

Local out of hours providers (Shropdoc) actively sign post patients who have run out of their repeat medication to community pharmacies. This ensures better use of out of hours doctors services and continuity of essential medication.

6. Community Pharmacy Contractual Framework

The Community Pharmacy Contractual Framework was introduced on 1 April 2005. The framework has provided an important opportunity for Telford and Wrekin to review the pharmaceutical provision within the area and to ensure that provision is offered to consistently high standards. The framework describes three categories of service provided by community pharmacies: **essential**, **advanced** and **locally enhanced** services.

Since the introduction of the framework in 2005, Telford and Wrekin introduced a contract monitoring framework and can confirm that all contractors have been assessed as compliant with minimum standards.

6.1. Contract monitoring

The Area team will be monitoring the community pharmacy contract. It is intended that self-assessment questionnaires will be sent to every pharmacy contractor (Primary Care Contracting–Community Pharmacy Assurance Framework) and dispensing doctor practice. These will be reviewed by the Area Team and any areas that require further assessment will be followed up with individual contractors.

The Area team in Telford and Wrekin will visit contractors following any complaints or concerns raised by the general public or other health care professionals related to the delivery of the national contractual framework.

Contractual monitoring of advanced services MUR / NMS will continue with pharmacies reporting performance on a quarterly basis using the nationally agreed reporting templates.

7. Community Pharmacy Essential services

7.1. Overview

All contractors are obliged to offer essential services:

- **Dispensing**
The supply of medicines and appliances ordered on NHS prescriptions together with information and advice, to enable safe and effective use by patients and carers, and maintenance of appropriate records.
- **Repeat dispensing**
The management and dispensing of repeatable NHS prescriptions for medicines and appliances, in partnership with the patient and the prescriber. This service specification covers the requirements additional to those for dispensing, such that the pharmacist must also ensure the patient's need for a repeat supply and communicate any clinical issues to the prescriber.
- **Waste management**
Acceptance by community pharmacies, of unwanted medicines which require safe disposal from households and individuals. The Area Team will need to have in place suitable arrangements for the collection and disposal of waste medicines from pharmacies.
- **Public health (promotion of healthy lifestyles)**
Provide healthy lifestyle and public health advice to patients.

- **Signposting**

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

- **Support for self care**

Provide advice and support to enable people to care for themselves or their families.

- **Clinical governance**

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

- **Consultation facilities within community pharmacies**

The provision of national advanced and enhanced services requires consultation room facilities.

7.2. Current provision service provision

The PNA pharmacy survey confirmed all contractors were offering the defined essential services. Data collection for pharmacies offering advanced and enhanced services will need to be updated annually. The Area Team accepts that periodically this information may not be up to date; contractors have a responsibility to inform the Area Team if they are unable to offer enhanced services.

All pharmacies were asked to provide details of their consultation room facilities. Service activity has been included at a CCG / cluster level, this will be updated annually.

33 pharmacies reported that they had consultation room facilities available to deliver enhanced and advanced services. Two pharmacies reported that they did not have consultation rooms. 18 pharmacies reported that they had hand washing facilities available in the consultation room. 22 pharmacies reported that they had IT capability within their consultation rooms.

A number of pharmacies reported that they were developing their consultation rooms to have IT capability and hand washing facilities either within the consultation room or nearby to ensure they were equipped for future service delivery.

The Area Team will monitor all community pharmacies to ensure consultation rooms meet the required national standards for confidentiality and privacy. This will be a requirement for the provision of most national enhanced services and locally agreed services.

8. Community Pharmacy Advanced Services (National Contract)

Key findings

Medicines Use review (MUR) and the New Medicines service (NMS) have become established advanced services. PNA analyses has shown that there is sufficient awareness of these services and they are offered by the majority of pharmacies. Telford and Wrekin would encourage all contractors to continue to focus these review services on those identified within the target groups and those that are that are identified as poorly adherent to prescribed treatment.

Fewer pharmacies have registered as providers of the common ailments service which has been commissioned on a seasonal basis to help with Winter service pressures. There is a need to raise awareness of the service within the Borough. Contractors are encouraged to support their local population with the common ailments service which in turn will reduce the pressure urgent care services and community healthcare.

Community pharmacies have been commissioned to support the 2014/15 influenza campaign. 17 pharmacies have registered as providers for the vaccination programme:

- To increase the uptake of seasonal influenza vaccine across Telford and Wrekin in line with Department of Health recommendations
- To reduce the serious morbidity/mortality and hospitalisations from influenza by immunising those most likely to have a serious or complicated illness should they develop influenza.
- To improve access to seasonal influenza vaccine for eligible patients aged 18 years and over who are registered with a GP practice in Telford and Wrekin.

The service will allow community pharmacies to support local GP practices in the delivery of influenza vaccination.

Recommendations

Telford and Wrekin has reviewed its coverage of commissioned advanced and enhanced services provided by community pharmacies. The PNA has shown that there is sufficient coverage of MUR and NMS services based on current accreditation and provision. However Telford and Wrekin continues to encourage all community pharmacy contractors to engage with advanced service provision and support their local communities.

There is a need for commissioners to work with local contractors to increase awareness of common ailments service and improve on the current number of participating community pharmacies.

An evaluation of the newly commissioned flu vaccination service is needed to establish future commissioning intentions. Local healthcare partners need to work together improve on annual influenza vaccine uptake.

8.1. Medicines Use Review (MUR) and Prescription Intervention Service.

8.1.1. Overview

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

The aims of the service are to improve patient understanding and adherence or their prescribed medication by:

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

The service requires the pharmacy to have a suitable consultation room, and can only be carried out by accredited pharmacists. Accredited contractors are able to carry out 400 MURs each financial year. Currently, at least 50% of all MURs undertaken by each pharmacy in each year should be on patients within the national target groups:

- patients taking high risk medicines;
- patients recently discharged from hospital who had changes made to their medicines while they were in hospital. Ideally patients discharged from hospital with receive an MUR within four weeks of discharge but in certain circumstances the MUR can take place within eight weeks of discharge;
- patients with respiratory disease; and
- patients at risk of or diagnosed with cardiovascular disease and regularly being prescribed at least four medicines (from 1st January 2015).

From 1st April 2015 community pharmacies must carry out at least 70% of their MURs within any given financial year on patients in one or more of the agreed target groups.

8.1.2. Current provision

The table below shows MUR totals for Telford and Wrekin for the past three financial years.

Financial year	Total MURs
2007/08	3,207
2008/09	4,360
2009/10	4,320
2011/12	5440
2012/13	7469

Following an initial increase in the number of MURs completed in 2007/08 the number has remained relatively consistent. Up until 2011/12 where a significant increase was seen with a further increase in 2012/13.

The number of contractors completing all 400 MURs rose significantly in 2012/13
The table below shows an analysis of contractor involvement for MURs in Telford and Wrekin.

Financial year	% contractors performing more than 10 MURs	% contractors performing more than 50 MURs	% contractors performing more than 100 MURs	% contractors performing more than 200 MURs	% contractors performing maximum number of MURs
2007/08	73	58	42	24	0
2008/09	85	52	36	27	9
2009/10	82	67	48	30	3
2011/12	88	79	61	33	3
2012/13	89	89	79	55	24

If all 35 contractors in Telford and Wrekin did 400 MURs the total number of MURs possible would be 14,000.

Telford and Wrekin is keen to ensure that MURs are conducted appropriately for the benefit of patients. Contractors are encouraged to ensure MURs support a patient's adherence with their prescribed treatment and also takes into account any over the counter medication. MURs should be directed at those most likely to benefit or where the contractor believes compliance may be a concern. The increase in number is encouraging but Telford and Wrekin would stress the importance of quality rather than quantity. Recent updates to the delivery of MURs in community pharmacy have promoted informed consent and outcomes focused MUR service. Community pharmacies are actively promoting health and wellbeing as well as better medicines adherence.

Current contractor involvement for MUR at a cluster level (January 2013) is shown in Appendix VII.

8.1.3. Current service provision

Appendix VII shows the current contractor involvement for MUR at a cluster level.

8.2. Appliance Use Review (AUR)

8.2.1. Overview

Appliance Use Review (AUR) is the second advanced service to be introduced into the NHS community pharmacy contract. AURs can be carried out by a pharmacist or a specialist nurse in the pharmacy or at the patient's home. AURs should improve the patient's knowledge and use of any 'specified appliance' by:

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

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

8.2.2. Current service provision

Appendix VII shows the current contractor involvement for AUR at a cluster level.

8.3. Stoma Appliance Customisation (SAC)

8.3.1. Overview

Stoma Appliance Customisation (SAC) is the third advanced service in the NHS community pharmacy contract. The service involves the customisation of a quantity of more than one stoma appliance, based on the patient's measurements or a template. The aim of the service is to ensure proper use and comfortable fitting of the stoma appliance and to improve the duration of usage, thereby reducing waste. The stoma appliances that can be customised are listed in Part IXC of the Drug Tariff.

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

given the contact details of at least two pharmacies or suppliers who are able to provide the appliance or the customisation service.

8.3.2. Current service provision

Appendix VII Shows current contractor involvement for SAC at a cluster level.

8.4. New Medicines Service (NMS)

8.4.1. Overview

The New Medicine Service (NMS) was the fourth Advanced Service to be added to the NHS community pharmacy contract; it commenced on 1st October 2011.

The service provides support for people with long-term conditions newly prescribed a medicine to help improve medicines adherence; it is initially focused on particular patient groups and conditions.

The NMS was implemented as a time-limited service commissioned until March 2013; it would continue beyond this time if all parties agreed that the service had provided demonstrable value to the NHS.

In March 2013 NHS England agreed to extend the service for a further six months. No decision has been made about the future of the service beyond September 2013. This will be an NHS England decision that will take into account any emerging data from the Department of Health (DH) commissioned evaluation of the service. The evaluation is currently due to report in September, but the DH has said it may need to be extended to ensure that enough patients are recruited to it – the DH is considering this at the moment. Successful implementation of NMS would:

- improve patient adherence which will generally lead to better health outcomes
- increase patient engagement with their condition and medicines, supporting patients in making decisions about their treatment and self-management
- reduce medicines wastage
- reduce hospital admissions due to adverse events from medicines
- lead to increased Yellow Card reporting of adverse reactions to medicines by pharmacists and patients, thereby supporting improved pharmacovigilance
- receive positive assessment from patients
- improve the evidence base on the effectiveness of the service
- support the development of outcome and/or quality measures for community pharmacy.

8.4.2. Current service provision

Appendix VII Shows current contractor involvement for NMS at a cluster level

8.5. Influenza Vaccination service

Overview

NHS England Shropshire & Staffordshire have commissioned a community pharmacy vaccination service (from 1st November 2014), to contribute towards the national seasonal flu immunisation programme targeting the following cohort of patients:

- those aged 65 years and over
- those aged from 18 years to under 65 in clinical risk groups
- pregnant women aged 18 years and over

Accredited pharmacies are able to offer a patient group directive led service, which aims to:

- To increase the uptake of seasonal influenza vaccine across Shropshire & Staffordshire in line with Department of Health recommendations
- To reduce the serious morbidity/mortality and hospitalisations from influenza by immunising those most likely to have a serious or complicated illness should they develop influenza.
- To improve access to seasonal influenza vaccine for eligible patients aged 18 years and over who are registered with a GP practice in Shropshire and Staffordshire

Recommendations

Seasonal 'flu immunization programme: An evaluation of the newly commissioned flu vaccination service is needed to establish future commissioning intentions. Local healthcare partners need to work together improve on annual influenza vaccine uptake especially for hard to reach groups.

8.5.1. Current service provision

The community pharmacy mapping exercise clearly showed the majority of pharmacies were willing to offer a NHS commissioned flu vaccination service (Appendix VII). Many were already offering a private vaccination service.

To date 22 contractors are offering the commissioned service. Patient feedback on the service they have received will be collated using the Pharmoutcomes platform.

8.6. Common Ailment's Scheme (Pharmacy First Scheme)

8.6.1. Overview

The Pharmacy First Scheme aims to provide any patient who is registered with a GP practice in Telford and Wrekin (and exempt from prescription charges), with access to medication for the treatment of common ailments characterised by acute onset via Community Pharmacy. The service will be provided through Community Pharmacies contracted to NHS England Shropshire & Staffordshire Area Team who have signed up to provide this service.

The overall aim of the scheme is to ensure that patients can access self-care advice for the treatment of common ailments and, where appropriate, can be supplied with over the counter medicines, at NHS expense, to treat their ailment. This provides an alternative location from which patients can seek advice and treatment, rather than seeking treatment via a prescription from their GP or out of hours provider, or via a walk-in centre or accident and emergency. The service aims to:

- Improve patients' access to advice and appropriate treatment for common ailments
- Reduce GP workload for common ailments allowing greater focus on more complex and urgent medical condition
- Promote the role of the Pharmacist and self care
- Improve working relationships between Doctors and Pharmacists

The Pharmacy First Scheme is offered as a quicker alternative for patients to access healthcare. Patients may choose to refuse this service and continue to access treatments in the same way as they have done previously. Patients can be introduced to the scheme in a variety of ways:

- Referred by a GP surgery to a participating pharmacy
- Referred by a community health care professional or pharmacy staff
- Self refer into the scheme at a participating pharmacy
- Referred by OOH Service Provider or NHS 111

Acute Pain/Earache/Headache/Temperature	Heartburn/Indigestion
Athlete's foot	Infant colic
Bites and Stings	Mouth Ulcers
Colds/Flu-like symptoms/Nasal Congestion	Nappy rash
Cold Sores	Oral Thrush
Conjunctivitis (acute bacterial)	Scabies
Constipation (acute)	Sore Throat
Cough	Sprains and Strains
Cystitis	Teething
Dermatitis/Dry Skin/Allergic Type Skin Rash	Threadworms

Hay Fever (Seasonal Allergic Rhinitis)	Vaginal Thrush
Haemorrhoids	

Nationally there are similar schemes in many other areas which have been well utilised by eligible patient groups. There is some discussion about a nationally commissioned minor ailments scheme which would provide a more established service within community pharmacy. National marketing to support such schemes would raise public awareness and promote pharmacy as a 'first port of call' for minor ailments.

The service is currently commissioned to support increased demand on primary care services during the Winter period (1st December 2014 to 31st March 2015). A scheme was commissioned last year (Commenced 22nd January 2014 until 30th June 2014) based broadly on the same principles. During this period total of 645 consultations were undertaken by 25 accredited pharmacies. 29 pharmacies are currently accredited to provide the common ailments service. They are Geographically spread across all clusters. There is still a need to raise awareness of the scheme locally amongst healthcare providers and the public. Local partners should work together to aim to encourage all community pharmacies to participate and benefit their local communities.

9. Community Pharmacy Locally Commissioned Services: Public Health Services

9.1. Sexual Health Services

Key findings

- A Sexual Health Needs Assessment is being undertaken to shape service development and inform the next commissioning round, completion will be by March 2015. The intelligence developed for the PNA regarding sexual health need, demand and service provision will feed into this work and if required there will be feedback into the PNA process during the consultation period.
- The public survey of views and knowledge of pharmacy services indicated that in terms of sexual health services:
 - 67% of respondents were aware of the contraception service and advice offer in local community pharmacies. Over a fifth (22%) of respondents reported not being aware of the contraceptive service and advice available through pharmacies.
 - 32% of respondents were aware that pharmacies offered free condoms to those eligible, 48% reported not being aware of the service and a fifth (20%) were not sure.
 - Just under a quarter of respondents (24%) reported awareness of the

Chlamydia screening and treatment service in pharmacies but 55% were not aware of the service

- Teenage conception rates have been historically high, but have been declining over the past decade, decreasing from 187 conceptions in women under 18 in 2002 to 123 in 2012. However, under 18 conception rates still remain significantly worse than the national average. The highest rates of teenage pregnancy are seen in the most deprived electoral wards.
- The overall incidence of sexually transmitted infections (e.g. syphilis, gonorrhoea, genital warts and HIV infection) in Telford & Wrekin is low to average.
- Chlamydia testing and diagnoses rates in young people aged 15-24 years are lower than average, particularly in men.
- A total of 24 pharmacies are currently signed up to deliver an emergency hormonal contraception service in Telford & Wrekin. A further 11 pharmacies reported a willingness to deliver an EHC service through the pharmacy survey.
- There is a high level of satisfaction reported by EHC pharmacy service users. The majority of service users found out that pharmacies were offering free EHC to young people through a family member or friend. The vast majority of people using the service felt they: received enough information from the pharmacist about their emergency contraception, had enough privacy during the consultation and were able to ask questions received information about other services.
- A total of 24 pharmacies are currently signed up to deliver an emergency hormonal contraception service in Telford & Wrekin, delivering 684 consultations in 2013/14, a 9% increase on the previous year. A further 11 pharmacies reported a willingness to deliver an EHC service through the pharmacy survey.
- Town Centre pharmacies deliver the greatest uptake for EHC. This is not unexpected given the potential anonymity offered by the size and location of these pharmacies.
- In general sexual health service provision during weekends is significantly less than during weekdays. Community pharmacies open during the weekend offer essential provision during this time, especially those open during weekends and extended hours during the week.

Recommendations

Emergency Hormonal Contraception: Assessment of the current provision suggests that there is adequate local coverage for EHC. However, Telford and Wrekin Council encourage all community pharmacies to participate with this enhanced service, especially those open during weekends and extended hours during the week. Generally service provision during weekends is significantly less than that during

weekdays. Community pharmacies open during the weekend offer essential provision during this time.

Chlamydia Screening Scheme: Assessment of current provision suggests that there is adequate local coverage in terms of pharmacy sign up for the Chlamydia Screening Scheme. However, testing and treatment levels need to be improved amongst 15-24 young people, with a particular focus on men. A training programme should be developed as a way of encouraging and supporting pharmacies that have signed up to the scheme to improve access to Chlamydia testing and treatment.

Recommendation: Assessment of current provision suggests that there is adequate local coverage in terms of pharmacy sign up to distribute condoms, however more awareness is needed to promote the scheme as well as distributing condoms to young people accessing EHC and Chlamydia Screening & Treatment service within community pharmacies

9.1.1. Contraception: Emergency hormonal contraception (EHC)

Overview

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

The service requires community pharmacists to comply with contractual arrangements and link with existing local networks for integrated sexual health services.

Clients excluded from the PGD criteria will be referred to other local services that will be able to assist them, as soon as possible, e.g. the integrated sexual health service. All pharmacies involved in this enhanced service need to ensure their accreditation is maintained.

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

The aims of the EHC service are:

- To increase the knowledge, especially among young people, of the availability of emergency contraception and contraception from pharmacies.
- To improve access to emergency contraception and sexual health advice.

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

The service has been developed by Telford & Wrekin Council Public Health Team and the CCG Medicines Management Team and is funded through the local authority Public Health grant.

Current need, demand and service provision

A total of 24 pharmacies are currently signed up to deliver an emergency hormonal contraception service in Telford & Wrekin. A further 11 pharmacies reported a willingness to deliver an EHC service through the pharmacy survey. (Appendix IV)

- The total number of consultations in 2013/14 was 684, a 9% increase on consultations compared to the previous year. The proportions of consultations which resulted in the issue of EHC was higher at 99% in 2013/14 compared to 89% in 2012/13 (Figure 4).
- The greatest levels of EHC activity for under 25s in pharmacies are seen in those under 20 years, with a peak at age 19 (Figure 5).
- Telford Town Centre pharmacies showed the greatest uptake for EHC. This is not unexpected given the potential anonymity offered by the size and location of these providers. Almost half (46%) of EHC activity in 2013/14 was through one pharmacy.

As part of the EHC service, clients are routinely asked to provide some feedback on the service they received. Analyses of this feedback indicates a very positive picture from service users about their experience of using the scheme, including the following:

- The majority of service users found out that pharmacies were offering free EHC to young people through a family member or friend. The other main ways they found out were through a doctor or nurse (11%) and through another pharmacy (10%).
- 100% indicated that they had received enough information from the pharmacist about their emergency contraception.
- 99% indicated that they understood all/most of this information.
- 88% indicated that the pharmacist gave them leaflets with further information.

- 90% indicated that the pharmacist gave them information about other services they may need to contact.
- 100% indicated that they had enough privacy for their consultation with the pharmacist.
- 99% indicated that they had chance to ask questions during the consultation.
- 92% indicated that they did not mind the pharmacist asking them questions.

There are other local providers of EHC within Telford and Wrekin, including the integrated sexual health service and School Nurses. Appendix VIII lists alternative providers (opening hours vary according to site).

9.1.2. Condom Distribution Scheme

Overview

The C-Card condom scheme for young people under 25, coordinated by the integrated sexual health service operated by Staffordshire and Stoke-on-Trent Partnership NHS Trust, is available across Telford and Wrekin. The scheme provides access to free condoms, confidential advice and information on sexual health issues. Pharmacies provide information about the C-Card scheme and signpost clients to where they can sign up to the scheme. Pharmacies that have completed training and registered with the scheme will act as condom supply points for clients registered with the C-Card scheme. A number of pharmacies have completed the training to register and distribute condoms where others distribute only.

Current need, demand and service provision

Currently 33 out of out of the 35 community pharmacies in Telford and Wrekin are participating with the C-card scheme, with 15 pharmacies registering and distributing condoms and a further 18 distributing condoms only.

Figure 4 Trends in Emergency Hormonal Contraception Contacts in Under 25s

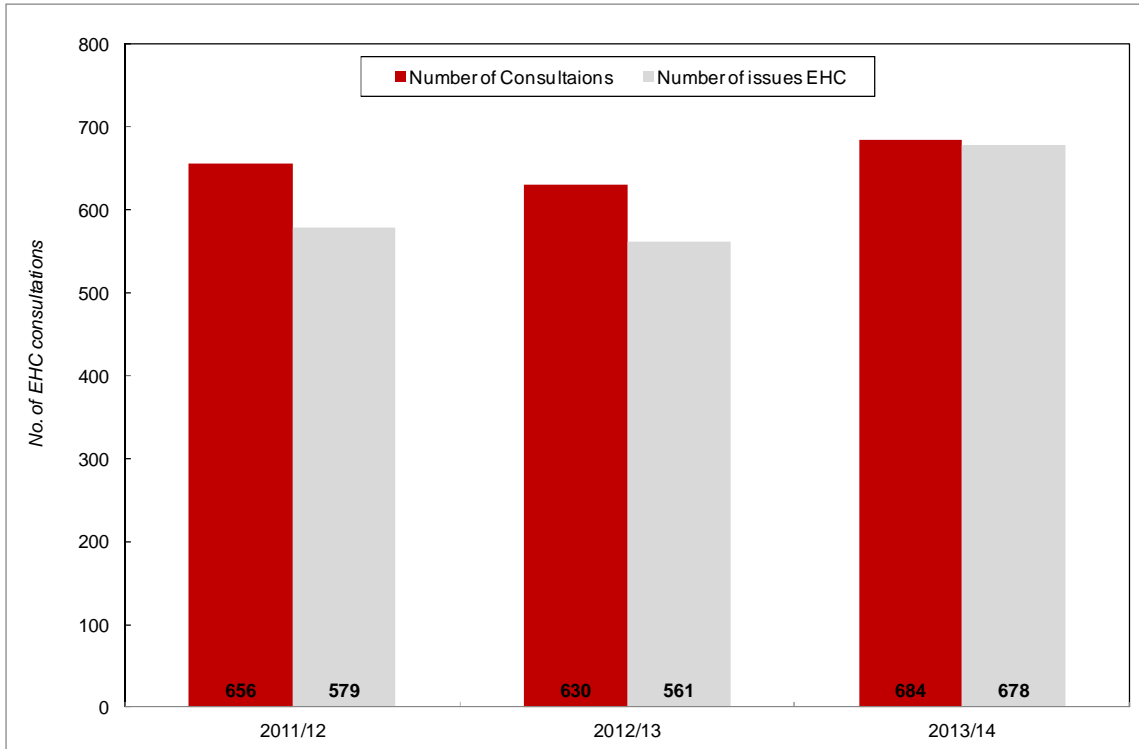
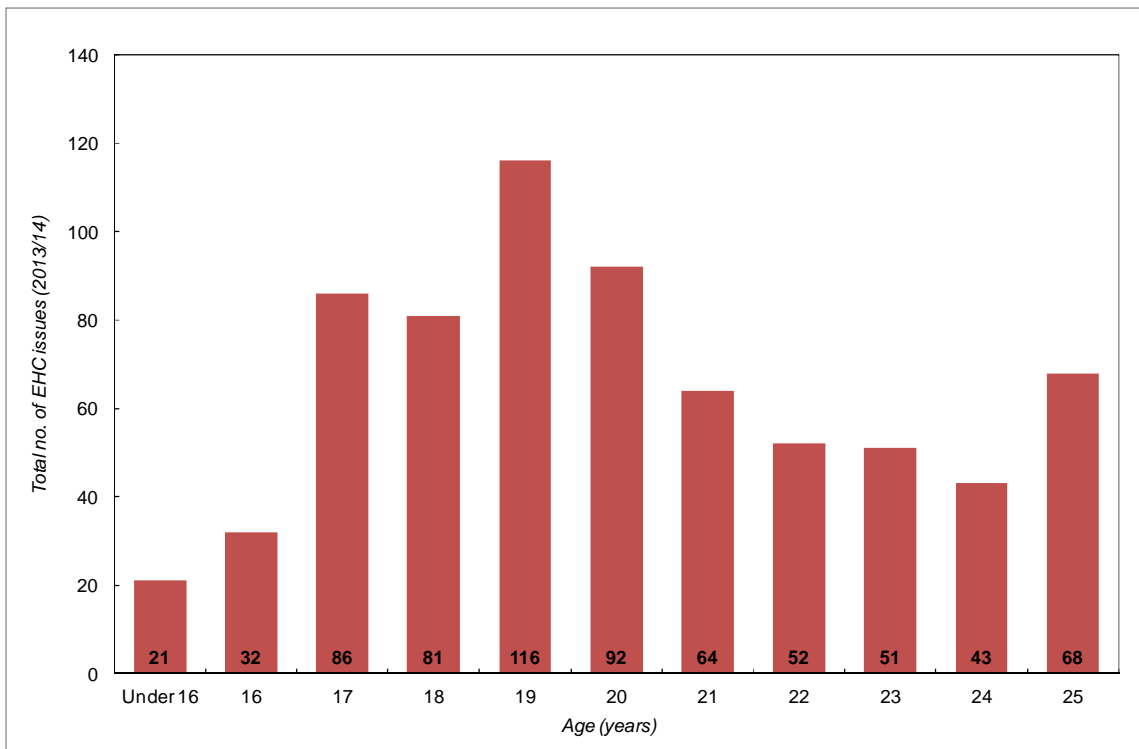


Figure 5 Emergency Hormonal Contraception Contacts in Under 25s by Age



9.1.3. Chlamydia Screening and Treatment

Overview

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

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

- To offer a user-friendly, non-judgmental, client-centred and confidential service
- To increase access to Chlamydia testing within existing consultations
- To normalise Chlamydia testing within existing consultation
- To increase access to treatment of asymptomatic individuals with Chlamydia infection
- To increase access for young people to sexual health advice and referral on to specialist services where required
- To increase Service Users' knowledge of the risks associated with STIs
- To strengthen the network of contraception and sexual health services to help provide easy and swift access to advice
- To reach sexually active young men and women who do not use mainstream sexual health services
- To de-stigmatise Chlamydia infections and raise awareness of positive sexual health
- To reduce the burden on secondary care services by diagnosing and treating infections in the community
- To increase early detection and treatment of both Chlamydia and therefore reduce transmission and complications associated with these infections

Current need, demand and service provision

The uptake of Chlamydia testing in young people in Telford & Wrekin (across all sexual health service settings, including community pharmacy) is significantly lower than the national average. In 2013 a fifth (20.1%) of 15-24 year olds had taken part in Chlamydia testing, compared to 24.9% across England as a whole (Table 3).

The Chlamydia diagnoses rates are lower than the national average for all 15-24 year olds and 15-24 year old males. Diagnostic rates in women aged 15-24 years are better than the England average (Table 3).

There are currently 29 pharmacies signed up to distribute home testing kits and provide treatment for Chlamydia. However, despite the high level of sign up to this scheme only 8 pharmacies are actively providing this service. (Appendix IX)

Table 3 Chlamydia Testing and Diagnosis Indicators

Indicator	Telford & Wrekin	England	Time period
Chlamydia diagnoses (15-24 year olds) - CTAD (persons)	1,719	2,016	2013
Chlamydia diagnoses (15-24 year olds) - CTAD (males)	1,008	1,387	2013
Chlamydia diagnoses (15-24 year olds) - CTAD (females)	2,477	2,634	2013
Chlamydia proportion aged 15-24 screened	20.1%	24.9%	2013

Key to RAG rating

Telford & Wrekin position statistically significantly worse than the England average	Telford & Wrekin position statistically significantly similar to the England average	Telford & Wrekin position statistically significantly better than the England average
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Source: www.phoutcomes.info <http://fingertips.phe.org.uk/profile/sexualhealth>

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9.2. Substance Misuse Services

9.2.1. Key findings

- Liver disease is the only major cause of early death in Telford and Wrekin which is still on the rise and this contributes to lower than average rates of life expectancy in both men and women. Reducing the number of people who misuse drugs and alcohol is Telford and Wrekin Health & Wellbeing Board priority.
- Community pharmacy services have a key role to play in improving treatment and recovery and minimising harm for people with substance misuse dependence problems, which are key aims of the Telford & Wrekin Drug & Alcohol Strategy.
- The public survey of views and knowledge of pharmacy services indicated that 52% of respondents were aware of the substance misuse services offer in local community pharmacy.
- The majority, 33 of out of 37 pharmacies offer a supervised consumption service, which benefited circa 280 people in recovery for drug dependence in 2013/14.

- Currently two pharmacies are offering a needle exchange service, which issued circa 1,015 needle packs to injecting drug users during 2013/14. In terms of future developments associated with drugs and alcohol misuse the majority of pharmacies indicate a willingness to consider offering services for alcohol screening and blood borne virus testing and immunisation.

Recommendations

Supervised consumption: Assessment of current need, demand and provision suggests there is an appropriate level of coverage across Telford & Wrekin, with only a small number of pharmacies not offering the service. Offering such a wide coverage has made it easier for clients to access the service within their localities. There are plans to try an engage all pharmacies in the service to achieve full coverage across Telford and Wrekin in the future.

Needle exchange: An increase in needle provision in the centre of the Telford is required. Client feedback and service evaluation will provide insight into the need for increased provision. A further three community pharmacies have been identified as potential sites to increase service capacity and improve needle provision, Asda, Town Centre, Woodside Pharmacy and Oakengates Pharmacy. The central location of these sites as well as the weekend opening hours will significantly increase service provision.

Future substance misuse developments: Commissioners of public health services should seek to improve services for: alcohol screening and brief advice, blood borne virus testing and vaccination and naloxone provision (to reduce opiate overdose and drug-related deaths), considering community pharmacy provision. These intentions are: in line with agreed strategic objectives, evidence of effectiveness and best practice guidance and local levels of need and fit with the aspirations of local pharmacies.

9.2.2. Supervised consumption (supporting clients with opiate dependence)

Overview

This service offers a client-focused non-judgmental, confidential approach to supervising the consumption of medicines, include methadone for the management of opiate (drugs) dependence by accredited pharmacists/pharmacies. Improving treatment and supporting recovery for people with opiate dependence is a key priority in the Telford & Wrekin Drug and Alcohol Strategy, which was approved by the Health and Wellbeing Board in March 2014.

This service requires the accredited pharmacist to supervise the taking of prescribed medicines at the point of dispensing in the pharmacy, ensuring that the correct dose has been administered appropriately to the correct patient. Community pharmacists are required to link in with existing local networks for substance misuse services where necessary. The pharmacy will also provide appropriate support and advice to the client, including referral to primary care colleagues and the Telford & Wrekin Drug and Alcohol Recovery Service (DARS) where appropriate.

The service aims:

To ensure the client follows their agreed treatment plan by:

- Dispensing in specified instalments (doses may be dispensed for the patient to take away to cover days when the pharmacy is closed, i.e. weekends).
- Ensuring each supervised dose is correctly consumed by the patient for whom it was intended whilst they are on site.

To reduce the risk to local communities by:

- Ensuring that people taking the prescribed substances follow the prescriber's instructions and therefore preventing prescribed medicines entering onto the illicit drugs market.
- Preventing accidental exposure of prescribed medication used in substance misuse.

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

The service has been developed by the Telford and Wrekin Council Public Health Team in collaboration with the CCG Medicines Management Team. Funding for the service is allocated from the local authority Public Health grant.

Current need, demand and service provision

The majority of pharmacies offer the supervised consumption service through a local authority contract, 33 out of 37 pharmacies (Appendix X) In 2013/14 a circa 47,400 supervised consumption episodes took place, supporting 280 clients in their dependency management and recovery.

9.2.3. Syringe Provision and Exchange Service

Overview

Pharmacies participating in this service offer a non-judgmental, client-centred, confidential service for the provision of needles, syringes and other injecting equipment. Used equipment is accepted for safe disposal at the pharmacy. The pharmacies provide support and advice to the user, including referral to other health and social care professionals and specialist drug and alcohol treatment services, where appropriate. Harm reduction is a key objective of the Telford & Wrekin Drug and Alcohol Strategy and in this context pharmacies are expected to promote safe practice to users who inject, including advice on sexual health and Sexually Transmitted Infections and Blood Borne Viruses, for example HIV, Hepatitis B and C including ways to get tested and immunised. The service aims are:

- To assist the service users to remain healthy until they are ready and willing to stop injecting and ultimately achieve a drug free life with appropriate support.

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

The service has been developed by the Telford & Wrekin Drug and Alcohol Recovery Service (DARS), Telford and Wrekin Public Health Team and the CCG Medicines Management Team. Funding for the service is received from the local authority Public Health Grant.

Current need, demand and service provision

Telford and Wrekin currently has two community pharmacies offering a needle provision and exchange service, at the L Rowlands branches in Stirchley and Hadley. During the period April 2013 to March 2014 a total of 741 1ml needle packs and 274 2ml needle packs were issued through these two pharmacies. Current figures suggest approximately 40-50 needle packs (1ml and 2ml) are distributed from each participating pharmacy every month and there are indications that there has been a recent increase on demand by at least, 25% at one of the pharmacist sites. It has been recognised that an increase in services would be desirable dependant on funding.

Needle provision is also currently available at the Drug and Alcohol Recovery Service (DARS), Portico House site in Wellington (9am – 5pm Mon - Fri).

Recommendation

An increase in needle provision in the centre of the Telford is required. Client feedback and service evaluation will provide insight into the need for increased provision. A further three community pharmacies have been identified as potential sites to increase service capacity and improve needle provision, Asda, Town Centre, Woodside Pharmacy and Oakengates Pharmacy The central location of these sites as well as the weekend opening hours will significantly increase service provision.

9.2.4. Future Substance Misuse Service Developments

- **Naloxone** is a drug used to reverse the effects of opiate overdose and helps to prevent drug-related deaths. Currently there is a low level of Naloxone prescribing/dispensing taking place in Telford & Wrekin, which has been easily accommodated by one pharmacy (Wellington). Expanding the provision of Naloxone is part of the Telford & Wrekin Drug and Alcohol Strategy. Colleagues from the Council (public health and DARS teams), local substance misuse treatment providers and the CCG Medicines Management Team are working on a new policy and protocols to support the safe expansion of Naloxone provision in the Borough. The feasibility of additional pharmacies providing Naloxone in the future across Telford and Wrekin wide will be considered as part of these developments.
- **Blood Borne Virus (BBV) testing and vaccination:** the majority of local pharmacies have indicated a willingness to consider offering testing and or vaccination services for Blood Borne Virus, including HIV and Hepatitis C testing and Hepatitis B vaccination in the future. In Telford & Wrekin there is a low prevalence of BBV infection and testing for Hepatitis C and immunisation levels for Hepatitis B are better than the national average. However, prevention and risk reduction are key aims of the Telford & Wrekin Drug and Alcohol Strategy and pharmacy provision of BBV screening services will be considered as part of wider developments.
- **Alcohol screening and brief advice:** There is strong evidence of that the impact of alcohol-related harm can be reduced by improving the awareness of alcohol harms in young people and delaying first use and by making lower risk drinking for adults the norm and an easy choice to make. Reducing alcohol consumption is a key aim of the Telford & Wrekin Drug and Alcohol Strategy. The majority of local pharmacies have indicated a willingness to consider offering alcohol screening and pharmacy provision will be considered as part of the wider developments of alcohol prevention and reduction work.

9.3. Healthy Start vitamins in community pharmacies

Key findings

- Community pharmacies now support the supply of healthy vitamins for eligible women and children in Telford & Wrekin and are the only sites where Healthy Start vitamins can be obtained.
- The involvement of pharmacies has provided a greater number of sites and accessibility in local communities, with the support of professional advice where necessary.

Recommendation

Healthy Start Vitamins: A continued focus to promote the uptake of Healthy Start vitamins is required. With all community pharmacies now participating in the distribution of Healthy Start Vitamins there is an opportunity to not only improve the uptake but also to increase awareness of the scheme.

Overview

Healthy Start is designed to help give children the best nutritional start in life by making healthy eating more affordable and providing healthy start vitamins. Healthy Start replaced the welfare food scheme and operates throughout Great Britain and Northern Ireland.

Healthy Start is a statutory Government scheme, which aims to help children have the best nutritional start in life and supports breastfeeding. It supports pregnant women and families with babies and young children who are in receipt of benefits and also supports pregnant women under 18 years old, by providing coupons. These coupons can be exchanged for free vitamin supplements for children from six months until their fourth birthday, and free vitamin supplements for pregnant women and women with babies up to one year old.

The Department of Health recommends that vitamin supplements are beneficial during pregnancy and in growing children, when vitamin uptake may not be sufficient through diet alone.

Children's Healthy Start vitamin drops contain vitamins A, C and D.

Healthy Start women's vitamin tablets contain folic acid and vitamins D and C.

Community pharmacies were approached to support the supply of healthy vitamins for eligible women and children in Telford. The service provided by community pharmacies was well received and now sees participating pharmacies as the only sites where Healthy Start vitamins can be obtained.

The service provided by participating community pharmacy is on a voluntary basis with no formal commissioning arrangements.

The involvement of pharmacies has provided a greater number of sites and accessibility in local communities, with the support of professional advice where necessary.

Current service provision

Current contractor involvement with the supply of Healthy Start vitamins is shown in Appendix VII.

Healthy Start vitamin supplies (April 2013 to March 2014)

Vitamin tablets	766
Vitamin drops	664

10. Community Pharmacy Locally Commissioned Services: CCG

10.1. Palliative care 'Just in Case' boxes

Overview

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

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

Community pharmacies are paid an annual retention fee of £100 for agreeing to participate in the service.

Current service provision

17 Pharmacies are currently accredited to issue Palliative care boxes (Appendix VII). Geographically each cluster within Telford and Wrekin has access to an accredited pharmacy.

Palliative care box issued from participating community pharmacies	
April 2011 - 31 March 2012	44
April 2012 - 31 March 2013	55
April 2013 - 31 March 2014	44

Recommendation

Supply of palliative care boxes: Service provision for supply of palliative care boxes within Telford and Wrekin is currently considered adequate however the CCG will continue to recruit pharmacies to support the end of life pathway. Awareness of the service needs to be increased amongst local clinicians.

10.2. PEARs (Primary Eyecare Assessment Referral Service)

10.2.1. Overview

The Primary Eyecare Assessment and Referral Service has been set up in Telford and Wrekin and as a gateway service for patients presenting with a range of eye conditions that could be treated in primary care.

The service allows community pharmacies to supply medication in response to a diagnosis by the optometrist. The pharmacist will ensure that the medication is appropriate and provide counselling on how to use the medicine and what to do if the condition deteriorates or fails to improve. The service aims to:

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

10.2.2. Current service provision

25 Pharmacies are currently accredited with a geographical spread across all five clusters. Although the service has been established over 12 months there is a need to raise awareness with community healthcare providers to improve uptake of the pathway.

11. Community pharmacies – non-commissioned services

11.1. Overview

As well as those services commissioned by NS England, Telford and Wrekin Local Authority and NHS Telford and Wrekin CCG a number of non-commissioned services are currently provided through many community pharmacies.

The pharmacy mapping exercise aimed to capture details of these services and a summary is available in the table overleaf.

Some of these services were provided at a charge to the patient.

Blood pressure testing
Cholesterol testing
Glucose testing
Allergy testing
Domiciliary dosage system dispensing
Health checks (not NHS Health Checks)
Emergency supply of medication
Vascular risk assessments
Travel advice (vaccines and Malaria Prophylaxis)
Obesity management services

None of these additional services were accredited by the CCG or local authority in Telford and Wrekin.

12. Suggested gaps in pharmaceutical services as identified by community pharmacies

As part of the PNA questionnaire community pharmacies were asked to consider the needs of their local population and what gaps they felt needed to be addressed. They were asked to list priorities they felt were important in meeting local needs and where community pharmacies could play an influential role. The table below summarises these responses.

Community pharmacy	Suggested gaps in pharmaceutical services. Feedback received from community pharmacy contractors
Superdrug pharmacy	More sexual health awareness among school children and students Mobility aids for elderly more readily available
Wellington pharmacy	Supporting people with language barriers Poor understanding of pharmacy services – Improving public awareness of what pharmacy offers Supporting patients in rural areas
Sainsburys pharmacy	Better support for young mothers Improved coordinated care for the elderly (discharge planning, medicines adherence support) Better understanding of the needs of disabled people
Anstice pharmacy	More efficient systems between pharmacy and GPs after patients have been discharged from hospital Training in secondary care staff to bring attention to time restraints when preparing monitored dosage systems. Improved communication is needed.
Lloyds pharmacy, Donnington	Needles exchange services/drug help outlet
Boots, Forge	Blood pressure testing Cholesterol testing
Boots, TTC	Supporting people with language barriers Commissioned delivery service
Boots, Newport	health check services Blood pressure testing

	Cholesterol testing
	Glucose testing
	Body weight management
	Sexual Health services
	Vaccination services
Lloyds High St, Dawley	Services for younger people
	Needles exchange - willing to undertake
Donnington pharmacy	Needle exchange service
	Emergency hormonal contraception
	Condom distribution service
Rowlands Hollinswood	Improving support for disabled people
	Tailored support for people with Impaired vision
	NHS Health Checks
	Improved coordinated care for the elderly
	Head Lice service
Jhoots	Improving services for the elderly and those with dementia
	Better support for young mothers
	Better support for young People (raise awareness of what pharmacy can offer)
Priorslee	More emergency appointments at walk in centre
	Access to carer services
	Vaccination services
Lloyds, Chapel Lane	Minor ailments service offered scheme all year round. Not just a seasonal service
	Alcohol screening and brief intervention service
Morrisons	Alzheimers/Dementia screening
	Homes service and delivery of monitored dosage system to care homes
	Medicines Management reviews
	Managing long term health conditions (Diabetes, Hypertension)
	Supporting people with language barriers
Asda, Southwater	Off site MURS commissioned to help optimise medication for patients in residential care
	Vaccination services
	Warfarin (anticoagulation) monitoring
AS Kitchings	Gluten free pilot (same as Scotland)
	Warfarin (anticoagulation) monitoring. Asthma, COPD checks
	Asthma, COPD checks with a focus on checking inhaler technique
	Diabetes checks - especially for those with mental health issues
	General supply of sexual health services - especially Chlamydia
Muxton pharmacy	Coordinated care for the elderly (work with other health and social care providers)
	Improving services offered to those with mental health issues
	Supply of Patient Group Medication (PGD) medications to stop referral to GPs
Lawley	Support for diabetes patients
	Medicines Discharge summary planning
	Minor Ailments scheme

13. Pharmaceutical services outside of Telford and Wrekin's boundaries

Telford and Wrekin recognises that local residents may obtain pharmaceutical services outside of its borders.

Telford and Wrekin borders with Shropshire County and South Staffordshire HWB.

ePACT data was used to establish where prescriptions produced in the Telford and Wrekin area were dispensed, if outside of the current Telford and Wrekin borders.

The vast majority of prescriptions generated in the Telford and Wrekin area are dispensed within its boundaries. The ePACT analysis highlighted that a number of community pharmacies located close to the boundaries were being used by local residents.

There were also a number of pharmacies that were offering dispensing services to care homes located within the borough.

The tables below show pharmacies outside Telford and Wrekin's boundaries that provide a significant dispensing service to residents and care homes in Telford and Wrekin.

Community pharmacies

Boots UK Ltd	Shifnal, Shropshire	TF11 8BN
Boots UK Ltd	Market Drayton, Shropshire	TF9 1PR
Gnosall Healthcare Ltd	Gnosall, Stafford	ST20 0GP
L Rowland and Co (retail) Ltd	Broseley, Shropshire	TF12 5ET
RE & Co Alman LTD	14 High Street, Much Wenlock	TF13 6AA
Murrays Healthcare	Market Drayton, Shropshire	TF9 3AL
Tesco Stores Limited	Cattle Market, Battlefield Road, Shrewsbury	SY1 4HA
Boots UK Ltd	Stafford	ST16 2BD

Pharmacies providing dispensing services to care homes

Pharmassured Ltd	UNIT 2 GT BRIDGE CENTRE CHARLES STREETWEST BROMWICH	B70 0BF
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Dispensing appliance contractors currently used in the area

Donald Wardle and Son	Stoke On Trent	ST1 2HH
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The community pharmacies outside of Telford and Wrekin's boundaries were used mainly by patients registered at the following surgeries:

Church Close Surgery
Linden Hall Surgery
Woodside Medical Practice

There is a very limited need for dispensing provision outside of the current Telford and Wrekin boundaries for patients located close to boundary lines. The analysis showed a number of patients registered at practices not located close to boundary lines, who were using pharmacies outside of the boundaries. It can only be concluded that this was a personal choice by specific patients as dispensing provision at these locations is considered adequate.

Cross border provision from neighboring HWBs will need to be assessed following publication of PNAs from these areas, however current analysis suggests this is being adequately met.

14. Public and Patient engagement

14.1. Key survey findings

- There was over representation from women in the public survey and therefore men were under represented. Young people under 25 years were under represented and middle aged people (aged 45-64 years) were over represented. People from BME groups were appropriately represented
- In general the survey responses were very positive with:
 - 73.2% of respondents stating they could access pharmacy services in under 10 minutes travel time
 - 92.4% of respondents stating they were happy with current opening times of their usual pharmacy
 - The majority of respondents (80%) found their community pharmacies helpful and supportive.
- The main reason reported for using pharmacy services was to collect prescriptions (82.9%) or to buy over the counter medicines (10.9%).
- Only a small percentage of respondents used pharmacies to obtain advice about healthy lifestyles, although 76% agreed that they could ask their pharmacist for health advice.

14.2. Overview

Public opinion is essential to the effective design and delivery of services provided for patients. Engagement and involvement of service users, patients and the public is a core principle of the Telford & Wrekin Health & Wellbeing Strategy. A survey of public views on community pharmacy in Telford & Wrekin was undertaken between 11th September 2014 and 9th October 2014. The survey consisted of 16 questions covering themes such as awareness of and access to services and levels of satisfaction. Standard socio-demographic questions were included. (Appendix X)

The survey was publicised through the NHS Telford and Wrekin CCG website and also to all Telford & Wrekin Council staff through the intranet. Paper copies of the survey were distributed to community pharmacies for completion. A number of patient groups were contacted and given printed copies of the survey, including: the Rheumatoid Arthritis Support Group, Bumps to Baby, Stroke Carers Group, Stirchley Medical Practice Patient Group, the Carers Association and the local branch of Diabetes UK.

Healthwatch Telford & Wrekin fully supported completion of the survey through their extensive local contacts, which maximized the reach of the survey.

There were a total of 417 survey responses, which represents 0.3% of the total borough population. This was an increase from the previous PNA survey where there were 203 responses at the end of the consultation. There were 417 responses, this is an increase from previous years where there were only 203 responses at the end of the consultation. A full survey report can be found in Appendix X.

14.3. Community pharmacies patient questionnaires

The clinical governance specification of the essential services requires pharmacy contractors to conduct an annual patient satisfaction survey.

The questionnaires allow patients to provide valuable feedback to pharmacies on the services they provide.

Contractors should use the survey to inform how they can develop and improve their pharmacy services.

NHS England are currently responsible for assessing these annual surveys. The clinical governance service specification stated that contractors should share with their local NHS England team, the area where the survey identified the greatest potential for improvement. They should also share the action being taken to improve performance, along with the areas in which the pharmacy is performing strongly. This requirement has not yet been written into regulations but as part of the PNA development, NHS England were asked to report any concerns that had been reported from the satisfaction surveys.

No concerns were highlighted about access. The majority of the responses are very positive, providing reassurance around service quality for those that access pharmacy services.

15. Future Developments

15.1. Communications, Marketing and Publicity

15.1.1. Overview

Supporting people to make better use of their community pharmacies will help to reduce pressure on the NHS urgent and emergency care systems and primary community care services. Raising awareness of community pharmacy services is needed to; reduce the number of people presenting to GPs with minor ailments, reduce those requiring emergency

admission to hospital with illnesses that could be effectively treated earlier by self-care or community-based services. In this context and in light of the public survey response there is a clear need to increase the public awareness of the services our community pharmacies can offer.

Recommendation

Commissioners of pharmacy services and Health & Wellbeing partners should work together, supported by the LPC to raise awareness of pharmacy services and integrate them into local care pathways.

15.2. Healthy Living Pharmacy

15.2.1. Overview

The Healthy Living Pharmacy approach, which supported by the Department of Health and Public Health England, is well implemented in many areas of the country. The aim of the framework is to achieve consistent delivery of a broad range of high quality services through community pharmacies to meet local need, improving the health and wellbeing of the local population and helping to reduce health inequalities¹. The concept provides a framework for commissioning public health services through three levels of increasing complexity and requires expertise with aspiring pharmacies to go from one level to the next, delivering consistent and high quality health and wellbeing services, promoting health and providing proactive health advice and interventions. The services provided as part of HLP should be tailored to local health needs, build on existing core pharmacy services (Essential and Advanced) and be recognised by the public

HLP can be used as an organisational development framework underpinned by three enablers of:

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

Community pharmacies wishing to become HLPs are required to consistently deliver a range of commissioned services based on local need and commit to and promote a healthy living ethos within a dedicated health-promoting environment.

Recommendation

It is recommended that consideration be given to developing a Healthy Living Pharmacy programme in Telford & Wrekin.

15.3. Improving service data and outcomes in community pharmacy

¹ <http://psnc.org.uk/services-commissioning/locally-commissioned-services/healthy-living-pharmacies/>

15.3.1. Overview

Timely collection of pharmacy service data can be used as evidence to the quality of services improving outcomes for patients. Systems are available on the market to enable real-time data collection from pharmacies across localities allowing CCG or local authority-level data collation. The intelligence can be used for audit and evaluation, as part of clinical governance assurance and for needs assessment purposes. These types of systems automate the invoicing, payment and validation process for pharmacies benefiting both provider and service commissioners in the contracting process. NHS England Shropshire and Staffordshire Area Team have implemented the PharmOutcomes system in pharmacies in Telford & Wrekin in November 2014, as part of the newly commissioned seasonal 'flu immunisation service. This approach is proving very beneficial allowing real-time data on immunisation levels and improved service monitoring and payment processes.

Recommendation

Building on the local introduction of the PharmOutcomes system (by NHS England for quality monitoring and to support the seasonal 'flu immunization service) commissioners and the LPC should work together to further roll out such systems across wider pharmacy services in Telford & Wrekin.

15.4. Cardiovascular Disease: Prevention, Detection and Management

15.4.1. Key findings

- **Cardiovascular disease (CVD)** e.g. heart disease and stroke, remains the biggest major cause of premature death and disability in Telford and Wrekin, and is a significant contributor to reduced life expectancy and associated health inequalities. The early death (under 75 years) mortality rate for all cardiovascular disease is significantly worse than the average for England.
- **High blood pressure (hypertension):** in 2013 13.8% of the population registered with a GP were diagnosed with hypertension (, circa 23,950 people. It is estimated that the true prevalence is nearer 23.9%, suggesting that over 17,500 adults may have undiagnosed (and therefore untreated) hypertension.
- **NHS Health Check:** 21.4% of eligible 40-74 year olds were offered an NHS Health Check in 2013/14, the checks aim to prevent CVD through risk assessment and tailored support and advice to the reduce risk. Of those people offered a health check 38.7% took up the invitation.
- **Excess Weight:** Levels of overweight and obesity are significantly worse than the average, with 70.2% of the adult population in 2012 in the excess weight category, 32.3% of adults being obese.
- **Diabetes:** in December 2014 a total of 9,029 people over the age of 17 were recorded as diagnosed with diabetes. Only just over half, 57.3% of these people have good glucose control, which is worse than the national average for England 69.8%.

Future service provision

- Community pharmacy services are ideally placed to have a key role in implementation of the prevention, detection and treatment of both cardiovascular risk factors, and cardiovascular diseases.
- In terms of future developments associated with cardiovascular prevention, detection and management, the majority of pharmacies indicate a willingness to consider offering a range of services related to both screening and management. A number of pharmacies identified specific services which they felt were gaps in current provision:
 - Blood pressure testing
 - Cholesterol testing and health check services
 - Glucose testing, Support for diabetes patients, and diabetes checks especially for those with mental health issues
 - Weight management
 - Alcohol screening
 - Alzheimers/Dementia screening
 - Warfarin (anticoagulation) monitoring during unsociable hours

Recommendation

Cardiovascular Disease: It is recommended that consideration be given to developing pharmacy services to tackle CVD, particularly for groups who are less likely to access services through primary care, as follows:

CVD Prevention

- Offer NHS Health Checks through pharmacies
- Incorporate blood pressure checks in the management of all long term conditions
- Provision of healthy lifestyle information and behavior change support
- Provision of weight management services
- Promotion of self monitoring of blood pressure
- Participation in awareness raising campaigns (e.g. know your numbers)
- Pulse checks and appropriate advice

CVD Detection

- Targeted outreach Blood Pressure testing in pharmacies in order to access those groups less likely to present in primary care, such as younger men, low income households and those in deprived areas
- Opportunistic testing of blood pressure with appropriate advice

CVD Management

- Support adherence to antihypertensive drug therapy and lifestyle change, particularly through self-monitoring of blood pressure and pharmacy medicine support
- Information and support about blood pressure management
- Medicine Usage Review, to include blood pressure checks for those on anti-hypertensive and others at high risk of developing high blood pressure
- Extension or development of the New Medicines Service

- Pending regulatory changes, high blood pressure is to be added to the conditions for targeted medicine use reviews (for patients on multiple medicines, to improve knowledge and identify any problems with the medicines). There could be further opportunities to use the capacity and skills in pharmacy to improve blood pressure control levels

15.5. Stop Smoking Services

Key findings

- Smoking is the single biggest cause of preventable ill-health, death and health inequalities both nationally and locally. Reducing the number of people who misuse drugs and alcohol is Telford and Wrekin Health & Wellbeing Board priority.
- Around 70% of smokers say they want to quit and 80% wish they had never started. NHS Stop Smoking Services provide effective and cost efficient treatment and smokers are four times more likely to stop with help and support than if they go it alone.
- There are still estimated to be circa 27,800 adult smokers (16+ years) in Telford and Wrekin. The prevalence of adult smoking (21%) is significantly worse than the national average (18.4%).
- There is a comparatively high uptake of stop smoking services in Telford & Wrekin per head of population. Quitter rates are impressively high, with in excess of 60% setting a quit date remaining quit at 4 weeks, compared to the national average of 51%.
- Despite the high quality stop smoking services in place locally the numbers of smokers seeking support from services to quit has declined over the past two years. This pattern has also been seen across the country and is thought in part to be due to the increasing popularity of e-cigarettes.

Recommendation

Stop Smoking Services: Telford & Wrekin Council will award new Stop Smoking Services contracts to providers in January 2015, new services will be in operation from April 2015. It is recommended that pharmacies work closely with the providers organisations to expand the stop smoking services increasing the accessibility and reach in community pharmacies

15.6. Overview

Stop Smoking Services, commissioned by the local authority as part of the new public health duties, are currently being delivered by two non-NHS providers, Ice Creates (core service) and North 51 (pregnancy service). The Council are currently undertaking a procurement process to award new contracts from stop smoking services from April 2015. The objectives for stop smoking services are to provide a support service which:

- Is accessible to all smokers
- Offers the best treatments available
- Is efficient and cost effective

- Achieves long term quitting
- Reaches adolescents and young adults
- Reaches disadvantaged smokers
- Reaches pregnant smokers.

15.7. Current need, demand and service provision

Currently, there are no pharmacies in Telford and Wrekin directly providing stop smoking services through sub-contract arrangements with the two contracted non-NHS service providers. One pharmacy (Kitchens, Oakengates) is currently providing accommodation for the local stop smoking service provider within their pharmacy premises. A total of 33 pharmacies reported a willingness to deliver stop smoking services in future through the community pharmacy survey.

Appendices

Appendix I	Telford & Wrekin PNA Steering Group Terms of Reference
Appendix II	Telford & Wrekin Health & Wellbeing Board Briefing Report Sept 2014
Appendix III	Community pharmacies and dispensing doctor locations mapped against socio-economic deprivation quintiles
Appendix IV	Community pharmacy contractor list
Appendix V	Community pharmacy opening hours
Appendix VI	Community pharmacies and dispensing doctor locations mapped against population density
Appendix VII	Delivery of advanced, enhanced and locally commissioned services
Appendix VIII	Sexual Health Services opening times
Appendix IX	Community pharmacy sexual health services provision mapped against teenage pregnancy rates
Appendix X	Community Pharmacy Survey Report