

Pharmaceutical Needs Assessment 2015

South Gloucestershire Health and Wellbeing Board

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This Pharmaceutical Needs Assessment has been produced through the PNA Steering Group for South Gloucestershire Health and Wellbeing Board by South Gloucestershire Council, with authoring support from Soar Beyond Ltd.

Executive summary

Every Health and Wellbeing Board (HWB) is now required to produce a Pharmaceutical Needs Assessment (PNA).

This mapping of pharmaceutical services against local health needs provides South Gloucestershire HWB with a framework for the strategic development and commissioning of services. It will enable the local pharmacy service providers and commissioners to:

- understand the pharmaceutical needs of the population
- gain a clearer picture of pharmaceutical services currently provided
- make appropriate decisions on applications for NHS pharmacy contracts
- commission appropriate and accessible services from community pharmacy
- clearly identify and address any local gaps in pharmaceutical services
- target services to reduce health inequalities within local health communities.

This PNA has been produced through the PNA Steering Group for South Gloucestershire HWB by South Gloucestershire Council, with authoring support from Soar Beyond Ltd.

NHS Pharmaceutical Services in England

NHS Pharmaceutical Services are provided by contractors on the pharmaceutical list held by NHS England. Types of providers are:

- community pharmacy contractors, including distance-selling pharmacies
- dispensing appliance contractors
- local pharmaceutical service providers
- dispensing doctors

Community pharmacies operate under a contractual framework agreed in 2005 which sets three levels of service:

Essential services:	Negotiated nationally. Provided from all pharmacies		
Advanced services:	Negotiated nationally. Provided from some pharmacies, specifically accredited		
Enhanced services:	Negotiated locally to address local health needs. Provided from selected pharmacies, specifically commissioned		

This contract enables NHS England area teams to commission services to address local needs, whilst still retaining the traditional dispensing of medicines and access to support for self-care from pharmacies.

Health in South Gloucestershire

The area

South Gloucestershire is characterised by urban development within the north and east fringes of Bristol and a large rural area containing the towns of Yate / Chipping Sodbury and Thornbury and over 30 villages. 60% of residents live in urban or suburban areas, the remainder either in rural villages or small market towns.

South Gloucestershire has seen substantial levels of development and population growth. Around 2,600 houses have been built since 2011. The building of a further 13,000 homes are planned to be completed between 2014 and 2020.

The population

The population has grown by 23% over the last 25 years and there are currently around 269,107 residents (mid-year 2013 estimates). This number is projected to rise to:

- 277,500 by 2016
- 289,500 by 2021

The elderly population is expected to grow particularly fast. Between 2012 and 2021, there are projected to be an additional 10,280 people aged 70 and over.

A number of housing developments are planned for South Gloucestershire which will significantly impact on the demand for services. Of particular note are the Charlton Hayes and Cribbs / Patchway developments in the Severnvale locality. The new community created by these neighbouring developments will require detailed, phased service planning. It is envisaged a new community pharmacy will be required to provide for this community but this need has been predicted beyond 2018, when this PNA will be superseded.

The increasing and ageing population will require flexible service delivery, particularly in rural communities. Provision from internet pharmacies, prescription delivery services from existing community pharmacy and dispensing GP practices are current examples of this flexible service delivery.

Health inequalities

South Gloucestershire on the whole is a relatively affluent area and levels of deprivation are low compared to national levels. However, pockets of deprivation do exist and there are marked health inequalities. Six areas have been defined as Priority Neighbourhoods because they are the most deprived, face the greatest health inequalities and have the greatest health need. These are Kingswood, Cadbury Heath, Staple Hill, Filton, Patchway and West Yate / Dodington. Particular populations which may have specific health needs include travellers, prisoners, minority ethnic communities and disabled people.

Health in rural areas

People living in rural areas tend to have better health, for example higher life expectancy and lower rates of infant mortality. However, the distances patients have to travel to reach health services are greater and public transport may be limited. The majority of the population has access to a car but certain groups, such as the economically disadvantaged and the elderly living alone, are less likely to have independent mobility. These groups are, therefore, much more reliant on public transport and pharmacy prescription collection and delivery services.

Health and illness

South Gloucestershire is generally a healthy place to live. The average life expectancy is significantly higher than the national life expectancy and is increasing. The premature (all-cause) mortality rate is 25.2% lower than the national average and 10.7% lower than the rate for the South West region. But the rates for the Priority Neighbourhood wards are significantly higher. The mortality rates from cardiovascular disease (CVD) and cancers remain the two greatest causes of premature death in South Gloucestershire, although the rates are below the national average. Rates are higher in the Priority Neighbourhood wards.

Lifestyle

Lifestyle issues of concern in some areas, particularly in the six Priority Neighbourhoods, include:

- smoking
- breastfeeding rates
- rates of teenage pregnancy.

Locally commissioned services, through the local authority, are provided by many community pharmacies to address these lifestyle issues.

There is also an opportunity to further address these issues through the annual public health campaigns run as part of the community pharmacy contract.

Pharmacies in South Gloucestershire

Pharmaceutical services are provided by community pharmacies, dispensing GP practices, hospitals, prisons and internet providers. South Gloucestershire has 55 community pharmacies (as at 2nd December 2014) for a population of about 269,107. Provision of current pharmaceutical services and locally commissioned services are well distributed serving all the main population centres. There is excellent access to a range of services commissioned, and privately provided from, pharmaceutical service providers.

Using current population estimates, the number of community pharmacies per 100,000 population for South Gloucestershire is 20.4. Table 1 shows the growth in the numbers of community pharmacies in South Gloucestershire over recent years compared with regional and national averages. South Gloucestershire is well served with community pharmacies with the rate of provision currently between England and South West region averages.

	Community pharmacies per 100,000 population					
England South West SHA South Gloucester						
2013/14	21.8	19.3*	20.8*			
2012/13	21.6	19.8	20.7			
2011/12	21.2	19.4	20.9			
2010/11	21.1	19.2	19.5			
2009/10	20.8	18.8	19.1			
2008/09	20.4	18.5	18.7			
2007/08	20.1	18.3	17.1			
2006/07	20.0	18.1	16.1			

Table 1 - Number of community pharmacies	s per 100,000 population
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*Figures for 2013/14 are for the South Region and the Bristol, North Somerset, Somerset and South Gloucestershire area of England.

A high proportion of community pharmacies in South Gloucestershire are open weekday evenings, Saturday and Sunday. There is also a higher than national ratio of independent providers-to-multiples providing a good choice of providers to local residents (national average is 61% versus 69% in South Gloucestershire⁶).

NHS legislation allows for GPs in certain areas to dispense NHS prescriptions for defined populations (controlled localities), particularly in rural communities who do not have reasonable access to a community pharmacy. In addition to 55 community pharmacies, South Gloucestershire has four dispensing GP practice sites providing pharmaceutical services.

Feedback on pharmaceutical services

The production of the PNA has involved a two-stage engagement and consultation process. In line with good practice, an engagement phase was first carried out to inform the draft PNA. It included a public survey on pharmacy provision, a survey of pharmacy contractors and a survey of dispensing GP practices. Responses to the community pharmacy patient questionnaire distributed by pharmacy contractors were also used to inform the draft PNA. The statutory consultation on the draft PNA was the second part of the two-stage engagement and consultation process.

The views from the public were gained from:

- a questionnaire circulated for comments from the general public
- the community pharmacy patient questionnaire distributed by pharmacy contractors

From the 210 responses received from the public questionnaire:

- 88% rated their satisfaction on the service received from their local pharmacy as 'Very satisfied' or 'Quite satisfied'
- 26% indicated that they used pharmacies up to every month for the purchase of over-the-counter medicines
- 44% indicated that they used pharmacies up to every month to obtain prescribed medicines
- 74% rated as 'Very important' or 'Quite important' that the pharmacy is close to their GP surgery; 89% that the pharmacy is close to their home; 30% that the pharmacy is close to where they work and 66% that the pharmacy is close to where they shop
- 43% rated as 'Very important' or 'Quite important' that the pharmacy is easy to access by using public transport
- 82% reported that parking outside a pharmacy was easy
- All respondents who travel by car to their community pharmacy report a travel time of no more than 20 minutes
- 27% respondents report sometimes travelling by bus or train to their pharmacy
- of those respondents who may walk to their pharmacy, 12% have a journey of over 20 minutes

Responses from the community pharmacy patient questionnaire showed that pharmacies were commended for 'staff availability' and 'approachability' and 'customer service'. Areas requiring improvement were 'giving healthy lifestyle advice', 'convenience' and 'signposting'.

Conclusions

As per Schedule 1 of the 2013 Pharmaceutical Services Regulations³, South Gloucestershire HWB has identified necessary services as essential services and advanced services as required by Paragraphs 1 and 3 of Schedule 1 to the Regulations.

South Gloucestershire HWB has identified enhanced services as pharmaceutical services which secure improvements or better access, or have contributed towards meeting the need for pharmaceutical services in the area of the HWB.

South Gloucestershire HWB has identified locally commissioned services as other services which secure improvements or better access, or have contributed towards meeting the need for pharmaceutical services in the area of the HWB.

Overall, South Gloucestershire residents are satisfied with the provision of pharmaceutical services. The most important location reported for accessing pharmacy services is 'close to home'.

Over half of residents surveyed indicated the importance of accessibility of public transport - indicating a high number of survey respondents using public transport to access community pharmacies.

Average daytime travel time to a community pharmacy or dispensing GP practice is up to 10 minutes for between over 96% (Yate locality) and over 99% (Kingswood locality) of the population. Between 71% (Severnvale locality) and 90% (Kingswood locality) have an average maximum walk of 20 minutes.

Access to necessary services

Access to essential services

In order to assess the provision of essential services against the needs of the residents of South Gloucestershire, the HWB consider access (travelling times by car, public transport and walking) and opening hours as the most important factors in determining the extent to which the current provision of essential services meets the needs of the population.

Access to essential services during normal working hours

South Gloucestershire HWB has determined that the travelling times by car, public transport and walking and opening hours of pharmacies in all three localities, and across the whole HWB area, are reasonable in all the circumstances.

There is no gap in the provision of essential services during normal working hours in any part of the HWB area.

Access to essential services outside normal working hours

There are nine 100 hour contract pharmacies and ten "late night" pharmacies open until at least 8pm on weekdays or weekends within the HWB area. Over one in three, or 34%, of pharmacies within the HWB area are either 100 hour or late night opening pharmacies. These are geographically spread across the HWB area and the three PNA localities. This is a significant proportion of pharmacies. There are a number of pharmacies open on Sundays in all three localities.

There are no pharmacies open in South Gloucestershire HWB area between midnight and 7am weekdays and Saturdays, or between 4pm Sundays and 7am on Mondays. Provision on some bank holidays in some localities, in particular the area around Thornbury, is varied. Based upon the consultation responses, results of the patient survey, population density and access to pharmacies across the HWB area, it is unclear if there is a gap in service which would equate to the need for access to essential services outside normal hours in this locality.

The HWB will monitor the uptake and need for necessary services and will consider the impact of any changes in this locality in the future which may provide evidence that a need exists.

> There is limited evidence as to whether or not there is a gap in the provision of essential services outside of normal working hours in any part of the HWB area. If a possible gap were to be identified, NHS England can commission or direct existing pharmacies to open longer, thereby meeting any such need.

Access to advanced services

There is no identified gap in the provision of advanced services as medicines use reviews (MURs) are available in over 90% of pharmacies and new medicines service (NMS) is available in over 83% of pharmacies across the three localities.

There are no gaps in the provision of advanced services in any part of the HWB area.

Future provision of necessary services

South Gloucestershire HWB has not identified any pharmaceutical services that are not currently provided that will, in specified future circumstances, need to be provided in order to meet a need for pharmaceutical services in any of the three localities.

No gaps in the need for pharmaceutical services in specified future circumstances have been identified in any part of the HWB area.

Future access to essential services

A number of large housing areas are to be developed in South Gloucestershire in the coming years. The HWB will consider the change in health needs of each of the three localities as the housing developments listed in Table 4 (Section 2) progress through the three-year time horizon of the PNA.

This represents a significant number of new dwellings being created within the HWB area which could have an impact on population densities.

The HWB will consider the responses from the public, pharmacy contractors and other stakeholders involved in these developments when considering the changing health needs of the residents of the HWB area. South Gloucestershire HWB area has not identified services that would, if provided either now or in future specified circumstances, secure improvements to better access to essential services in any of the three localities.

No gaps have been identified in essential services that if provided either now or in the life-time of this PNA would secure improvements, or better access, in any part of the HWB area.

Future access to advanced services

In 2012/13 MURs and NMS were available in pharmacies across localities. Where applicable, NHS England will encourage all pharmacies and pharmacists to become eligible to deliver the service in all pharmacies in all localities so that more suitable patients are able to access and benefit from this service.

Demand for the appliance advanced services (stoma appliance customisation (SC) and appliance use reviews (AUR)) is lower than for the other two advanced services due to the much smaller proportion of the population that may require the services. Pharmacies and dispensing appliance contractors (DACs) may choose which appliances they provide and may also choose whether or not to provide the two related advanced services. Contractors in the area will be encouraged to provide appliances to become eligible to deliver these advanced services where appropriate.

There are no gaps in the provision of advanced services at present or in the future that would secure improvement or better access to advanced services in any part of the HWB area.

Improvements and better access- gaps in provision

Access to enhanced services

There is no identified gap in the provision of enhanced services as the Specialist (Palliative Care) Drugs service is available from at least one community pharmacy across all three localities.

There is no gap in the provision of the enhanced service Specialist (Palliative Care) Drugs in any part of the HWB area.

Future access to enhanced services

Some of the enhanced services listed in the 2013 Directions⁵ are now commissioned by South Gloucestershire local authority (Support to Stop Smoking, emergency hormonal contraception (EHC), Chlamydia screening, needle exchange and supervised consumption services) and therefore fall outside of the definition of both enhanced services and pharmaceutical services.

There are no gaps identified in respect of securing improvements, or better access, to enhanced services provision on a locality basis as identified either now or in the lifetime of this PNA. In 2014, NHS England commissioned influenza immunisations from selected community pharmacies as a pilot scheme. Service reviews will need to be undertaken in order to establish the most effective model to increase immunisation uptake across different population groups.

Other NHS Services e.g. dispensing doctors

As required by Paragraph 5 of Schedule 1 to the 2013 Regulations³, South Gloucestershire HWB has had regard for any other NHS services that may affect the need for pharmaceutical services in the area of the HWB.

Based on current information no gaps have been identified in respect of securing improvements, or better access, to other NHS services either now or in the life-time of this PNA in any part of the HWB area.

Locally commissioned services e.g. local authority commissioned services

With regard to enhanced services and locally commissioned services, the HWB is mindful that only those commissioned by NHS England are regarded as pharmaceutical services. The absence of a particular service being commissioned by NHS England is, in some cases, addressed by a service being commissioned through South Gloucestershire local authority, in the case of Support to Stop Smoking services, EHC, Chlamydia screening, needle exchange, and supervised consumption services. This PNA identifies those as locally commissioned services (LCS).

The HWB notes that all LCS are available in all three localities in South Gloucestershire HWB area.

The HWB has not been presented with any evidence to date which concludes that any of these LCS should be decommissioned or expanded.

Based on current information, the HWB has not identified a need to commission any pharmaceutical services not currently commissioned. The activity data currently collected can be utilised alongside service user feedback to determine the commissioning of future services.

Section 1: Introduction

1.1 Background

The Health Act 2009, 128A¹, made amendments to the NHS Act 2006 requiring Primary Care Trusts (PCTs) to assess the needs for pharmaceutical services in its area and publish a statement of its assessment and any revised assessment. The regulations required the Pharmaceutical Needs Assessment (PNA) to be published by the 1st February 2011. There was also a requirement to re-write the PNA every three years or earlier if there were significant changes to the pharmaceutical needs of the area. South Gloucestershire PCT produced their first PNA in 2011.

The responsibility for the development, publishing and updating of PNAs became the responsibility of Health and Wellbeing Boards (HWBs) as a result of the Health and Social Care Act 2012². The act dramatically reformed the NHS from 1st April 2013: PCTs were abolished and HWBs, Clinical Commissioning Groups (CCGs) and NHS England were formed.

- HWBs, hosted by each 'upper tier' local authority, have their membership drawn from local leaders (including NHS England, CCGs and local government) and are responsible for the continual improvement of the health and wellbeing of the local population
- CCGs are GP-led NHS bodies responsible for planning, purchasing and monitoring the majority of local health services including hospital, community, emergency and mental health care
- NHS England oversees the operations of the CCGs as well as commissioning primary and specialist services (such as cancer care). Along with CCGs, it has the responsibility of improving health outcomes and reducing health inequalities

The NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (SI 2013/349)³, hereafter referred to as the Pharmaceutical Regulations 2013, came into force on 1st April 2013. Unless required to be produced earlier, these regulations permitted HWBs to a temporary extension of the PNAs previously produced by the PCT; HWBs are now required to publish their first PNA by 1st April 2015 latest.

The 2013 Regulations³ were updated to The National Health Service (Pharmaceutical and Local Pharmaceutical Services) (Amendment and Transitional Provision) Regulations 2014 on 1st April 2014. This PNA has considered these amendments but the 2013 Regulations³ have been referenced throughout.

¹ Health Act 2009 - <u>http://www.legislation.gov.uk/ukpga/2009/21/part/3/crossheading/pharmaceutical-services-in-england?view=plain</u>

² Health and Social Care Act 2012 - <u>http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted</u>

³ Pharmaceutical Regulations 2013 - <u>http://www.legislation.gov.uk/uksi/2013/349/contents/made</u>

1.2 Purpose of the PNA

NHS England is required to publish and maintain pharmaceutical lists for each HWB area. Any person wishing to provide NHS pharmaceutical services is required to be listed on the pharmaceutical list. NHS England must consider any applications for entry onto the pharmaceutical list. The Pharmaceutical Regulations 2013³ requires NHS England to consider applications to fulfil unmet needs determined within the PNA of that area, or applications for benefits unforeseen within the PNA. Such applications could be for the provision of NHS pharmaceutical services from new premises or to extend the range or duration of current NHS pharmaceutical services offered from existing premises. As the PNA will become the basis for NHS England to make determinations on such applications, it is therefore prudent that the PNA is compiled in line with the regulations, and with due process, and that the PNA is accurately maintained and up-to-date. Although decisions made by NHS England regarding applications to the pharmaceutical list may be appealed to the NHS Family Health Services Appeals Unit, the final published PNA cannot be appealed. It is likely the only challenge to a published PNA will be through application for a judicial review of the process undertaken to conclude the PNA.

The PNA should also be considered alongside the local authority's Joint Strategic Needs Assessment (JSNA)⁴. The PNA will identify where pharmaceutical services address public health needs identified in the JSNA⁴ as a current or future need. Through decisions made by the local authority, NHS England and the CCGs these documents will jointly aim to improve the health and wellbeing of the local population and reduce inequalities.

1.3 Scope of the PNA

The Pharmaceutical Regulations 2013³ details the information required to be contained within a PNA. A PNA is required to measure the adequacy of pharmaceutical services in the HWB area under five key themes:

- necessary services: current provision
- necessary services: gaps in provision
- other relevant services, current provision
- improvements and better access: gaps in provision
- other services.

In addition, the PNA details how the assessment was carried out. This includes:

- how the localities were determined
- the different needs of the different localities
- the different needs of people who share a particular characteristic

⁴ South Gloucestershire Joint Strategic Needs Assessment 2013 http://hosted.southglos.gov.uk/JSNA/South%20Glos%20JSNA%202013%20v4%20050313.pdf

• a report on the PNA consultation

As already mentioned, the PNA is aligned with the South Gloucestershire JSNA⁴.

To appreciate the definition of pharmaceutical services as used in this PNA, it is firstly important to understand the types of NHS pharmaceutical providers comprised in the pharmaceutical list maintained by NHS England. They are:

- 1. pharmacy contractors
- 2. dispensing appliance contractors
- 3. local pharmaceutical service providers
- 4. dispensing doctors

For the purposes of this PNA, pharmaceutical services has been defined as those which are / may be commissioned under the provider's contract with NHS England. A detailed description of each provider type, and the pharmaceutical services as defined in their contract with NHS England, is detailed below.

1.3.1 Pharmacy contractors

Pharmacy contractors operate under the Community Pharmacy Contractual Framework initially agreed in 2005. This sets three levels of service under which they operate.

Essential services - these can be found in Schedule 4 of the Pharmaceutical Regulations 2013³. They are nationally negotiated and must be provided from all pharmacies:

- dispensing of medicines
- repeat dispensing
- safe disposal of unwanted medicines
- promotion of healthy lifestyles
- signposting
- support for self-care
- clinical governance

Advanced services - these can be found in Parts 2 and 3 of The NHS Act 2006, the Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2013, the '2013 Directions'⁵.

and amendment

⁵ The 2013 Directions -

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/193012/2013-03-12_-_Advanced_and_Enhanced_Directions_2013_e-sig.pdf

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/266023/pharmaceutical _services_directions_amendment_2013.pdf

They are negotiated nationally and any contractor may provide:

- medicines use reviews (MURs)
- new medicines service (NMS) this service is temporarily commissioned and is currently under review nationally
- appliance use reviews (AURs)
- stoma appliance customisation (SC)

A full list of provision of advanced services provided by pharmacies in South Gloucestershire HWB area (correct as of 16th July 2014) can be found in Appendix A.

Enhanced services - these can be found in Part 4 of the 2013 Directions⁵. They are negotiated locally by NHS England Area Teams and may only be provided by contractors directly commissioned by NHS England:

- anticoagulant monitoring service
- care home service
- disease specific management service
- emergency supply service*
- gluten free supply service
- independent prescribing service
- home delivery service
- language access service
- medication review service
- minor ailment service
- needle and syringe exchange service*
- on demand availability of specialist drugs service
- out of hours service
- patient group direction service
- prescriber support service
- schools service
- screening service*
- stop smoking service*
- supervised administration service*
- supplementary prescriber service

The responsibility for public health services transferred from PCTs to local authorities with effect from 1st April 2013. Where these services* are currently commissioned by local authorities, they are not considered enhanced or pharmaceutical services. The 2013 Directions⁵, however, permit NHS England to commission them from pharmacy contractors if asked to do so by a local authority. In this case, if commissioned by NHS England they are enhanced services and fall within the definition of pharmaceutical services. In South Gloucestershire HWB area, NHS England does not currently commission any public health services from pharmacies.

A number of public health services are commissioned locally from community pharmacies by South Gloucestershire Council. These can be found listed in Appendix A.

A full list of enhanced services commissioned by NHS England in South Gloucestershire HWB area along with pharmacies commissioned to provide them (correct as 16th July 2014) can be found in Appendix A.

Pharmacy contractors comprise both those located within the South Gloucestershire HWB area as listed in Appendix A, those in neighbouring HWB areas and remote suppliers - such as internet pharmacies. Although internet pharmacies may provide services from all three levels as described above, and must provide all 'essential' services, they may not do so face-to-face. Additionally, they must provide services to the whole population of England. There are no internet pharmacies located within South Gloucestershire HWB area, as listed in Appendix A, but it should also be noted that (distance-selling) internet pharmacies throughout England (there were 211 in 2013/14⁶) are capable of providing services to South Gloucestershire HWB area.

1.3.2 Dispensing Appliance Contractors

Dispensing appliance contractors (DACs) operate under the Terms of Service for Appliance Contractors as set out in Schedule 5 of the 2013 Regulations³. They can supply appliances from an NHS prescription such as stoma and incontinence aids, dressings, bandages etc. DACs must provide a range of essential services such as dispensing of appliances, advice on appliances, signposting, clinical governance and home delivery of appliances. In addition, DACs may provide the advanced services of appliance use reviews (AURs) and stoma appliance customisation (SC). Pharmacy contractors, dispensing GP practices, and local pharmaceutical service (LPS) providers may supply appliances but DACs are unable to supply medicines.

There are currently no DACs in the South Gloucestershire HWB area. However residents can access DACs from elsewhere in the UK if required.

1.3.3 Local pharmaceutical service providers

A pharmacy provider may be contracted to perform specified services to their local population or a specific population group. This contract is locally commissioned by NHS England and provision for such contracts is made in the 2013 Regulations³ in Part 13 and Schedule 7. Such contracts are agreed outside the national framework although may be over and above what is required from the national contract. Payment for service delivery is locally agreed and funded.

⁶ General Pharmaceutical Services in England - 2003-04 to 2013-14:

http://www.hscic.gov.uk/searchcatalogue?productid=13373&topics=1%2fPrimary+care+services%2fC ommunity+pharmacy+services&sort=Relevance&size=10&page=1#top

In South Gloucestershire HWB, there are two LPS pharmacies. These are pharmacies whereby (pre-1996) a contractor made an application to operate a pharmacy where there had been deemed a lack of provision but where the usual funding arrangements may not have been adequate to retain a pharmacy's viability. These pharmacies operate under locally contracted arrangements and are reviewed each year with different funding arrangements to other pharmacies. These arrangements are to expire on 31st March 2015 and the pharmacies have been invited to return to the national contractual arrangements.

Table 2 - I	List of LPS	pharmacies	in	South	Gloucestershire	Health	and	Wellbeing
E	Board area							
							Sn	ecific

Name	Address	Locality	Opening hours	Specific services provided/ populations provided to	
My Globe Ltd t/a Ideal Pharmacy	1 High Street, Warmley, Bristol, BS15 4ND	Kingswood	Mon-Fri 09:00-13:00 14:00-18:00	Essential small pharmacy (ESLPS - provides all essential and advanced services	
Jhoots Healthcare Ltd t/a Jhoots Pharmacy	1c Pool Road, Kingswood, Bristol, BS15 1XL	Kingswood	Mon-Fri 09:00-13:00 13:30-17:30	Essential small pharmacy (ESLPS) - provides all essential and advanced services	

Data gathered from 2013/14 show that there were a total of 140 LPS pharmacies in England⁶. Of these, 102 were ESLPS, with only 27 in the whole South region. It is therefore unusual to find two ESLPS in close proximity.

1.3.4 Dispensing GP practices

The 2013 Regulations³, as set out in Part 8 and Schedule 6, permit GPs in certain areas to dispense NHS prescriptions for defined populations. These provisions are to allow patients in rural communities, who do not have reasonable access to a community pharmacy, to have access to dispensing services from their GP practice.

Dispensing GP practices therefore make a valuable contribution to dispensing services although they do not offer the full range of pharmaceutical services offered at community pharmacies. Dispensing GP practices can provide such services to communities within areas known as controlled localities - see Section 3.3 for further details. GP premises for dispensing must be listed within the pharmaceutical list held by NHS England and patients retain the right of choice to have their prescription dispensed from a community pharmacy, if they wish.

In South Gloucestershire HWB, there are two dispensing GP practices dispensing at four sites. Dispensing GP practices may dispense NHS prescriptions for their own patients who live more than 1 mile / 1.6km (as the crow flies) from their nearest community pharmacy. Details of the dispensing GP practices in South Gloucestershire can be found in Appendix A and on Map A.

1.3.5 Other providers of pharmaceutical services in neighbouring HWB areas

There are four other HWB areas which border the South Gloucestershire HWB area: Gloucestershire to the north and east, Wiltshire to the east, Bath and North East Somerset to the south and Bristol to the south and west. Therefore in determining the needs of, and pharmaceutical services provision to, the population of the South Gloucestershire HWB area, consideration has been made to the pharmaceutical service provision from the neighbouring HWB areas.

Map A provides a detailed analysis of pharmacy contractors and dispensing GP practices which lie across the South Gloucestershire HWB border but are within easy reach of the South Gloucestershire area.

1.3.6 Other services and providers in South Gloucestershire HWB area, out of scope of the PNA

As mentioned on page 8, for the purpose of this PNA, pharmaceutical services have been defined as those which are, or may be, commissioned under the provider's contract with NHS England.

The following are providers of pharmacy services in South Gloucestershire HWB area but not defined as pharmaceutical services, and therefore out of scope of the PNA.

Prisons - in South Gloucestershire HWB area there are three prisons. A pharmaceutical service is provided to the in-mates of these prisons under contract by LloydsPharmacy. This contract is locally commissioned by NHS England.

Minor injury units and walk-in centres - Yate minor injury unit provide an assessment and treatment service for minor illness and minor ailments. It provides a specific list of medicines to patients when clinically required. The following are services provided by NHS pharmaceutical providers in South Gloucestershire HWB area, commissioned by organisations other than NHS England or provided privately, and therefore out of scope of the PNA.

Local authority public health services - South Gloucestershire HWB commission the following 'locally commissioned services' from community pharmacies in South Gloucestershire HWB area:

- sexual health services:
 - Chlamydia screening and treatment services
 - emergency hormonal contraception services
- support to stop smoking services
- supervised administration of medicines
- needle and syringe exchange service

Privately provided pharmaceutical services - many providers offer the following:

- care home service
- home delivery service
- patient group direction service
- screening service

Services will vary between provider and in some cases may be provided free of charge.

1.4 Process for developing the PNA

As a direct result of the Health and Social Care Act², a paper was presented to South Gloucestershire HWB on 15th January 2014. The purpose of the paper was to inform the HWB of its statutory responsibilities under the Health and Social Care Act² to produce and publicise a PNA for its area by 1st April 2015. The HWB accepted the content of the paper at the meeting and the recommendation to delegate responsibility of the PNA to a steering group. It also agreed to the funding necessary to research and produce the PNA.

Step 1: Steering group

On 10th June 2014, the PNA Steering Group was established. The terms of reference and membership of the PNA Steering Group are found in Appendix B.

Step 2: Project management

At its first meeting, the PNA Steering Group agreed to outsource certain aspects of the PNA production but keep the project management of the PNA by the Public Health staff with the council's Health and Wellbeing Division.

Table 3 outlines the clear responsibilities within the project plan for the production of the PNA. This was created by the steering group and Soar Beyond Ltd were awarded the contract to deliver the sections to be outsourced.

Project Milestone	Date completed
PNA project approach and timetable agreed by HWB	January 2014
Establishment of BNSSG and Somerset PNA Joint Working Group	January 2014
Specification of work to be out-sourced	start February 2014
Establishment of South Gloucestershire PNA Steering Group	February 2014
Kick-off meeting with contractor for out-sourced work	March 2014
Agreement of PNA engagement and consultation plan by steering group	March 2014
Completion of data collection – current services and present and future health needs	start April 2014
Completion of service provision mapping	end April 2014
Return of questionnaires - public and pharmacy contractors (issue of questionnaires)	beginning July 2014 (end April 2014)
Collation of questionnaire responses	mid July 2014
Review and identify gaps in current service provision against present and future needs (out-sourced and reviewed by steering group before adoption)	start July 2014
First draft of PNA for internal review (drafting of certain sections to be out-sourced in line with out-sourced tasks above and reviewed by steering group before adoption)	start August 2014
Draft PNA complete and agreed by steering group	mid August 2014
Formal consultation on draft PNA starts	7 th September 2014
Draft PNA documents provided to HWB	11 th September 2014
Formal consultation closes	21 st November 2014
Analysis of consultation feedback (out-sourced)	mid November 2014
Response to consultation comments and production of consultation report (out-sourced and reviewed by steering group before adoption)	mid November 2014
PNA finalised in line with consultation (drafting of consultation revisions - out-sourced and reviewed by steering group before adoption)	December 2014
PNA and consultation report signed-off by HWB	January 2015
PNA published	February 2015
Deadline for issue of first PNA by HWB	1 st April 2015

Table 3 - Project plan for the production of the South Gloucestershire HWB PNA

Step 3: Review of existing PNA and JSNA

The PNA Steering Group reviewed the existing PNA and subsequent supplementary statements⁷ and JSNA⁴. It was agreed that the existing PNA and subsequent supplementary statements⁶ were accurate and up-to-date and the Deputy Director of Public Health would be responsible for the on-going maintenance of the current PNA until this PNA was published.

Step 4a: Public survey on pharmacy provision

A public survey to establish views about pharmacy services was produced by the steering group which was circulated by South Gloucestershire Council consultation lead to:

- South Gloucestershire councillors
- parish and town councils in South Gloucestershire
- a range of sheltered housing schemes and homes for older people
- South Gloucestershire council staff
- South Gloucestershire Youth Forum
- South Gloucestershire Equality Forum and Disability Equality Forum
- Safer Stronger Community Groups
- Priority Neighbourhood steering groups
- South Gloucestershire Welfare Advice Network
- Health Watch South Gloucestershire
- North Bristol NHS Trust
- University Hospital NHS Trust
- Avon and Wiltshire Mental Health Trust
- South Gloucestershire NHS Clinical Commissioning Group
- GP Surgeries in South Gloucestershire
- South Gloucestershire libraries, contact centre and One Stop Shops
- South Gloucestershire Health and Wellbeing Board
- a range of voluntary and community sector organisations including: CVS South Gloucestershire, Southern Brooks Partnership, Chase and Kings Forest Project, Age Concern, Over 50's Forum, West of England Centre for Inclusive Living (WeCIL), Care Forum, South Gloucestershire Parent Carer Forum

This was supported by media releases, a social media campaign and other communications to raise awareness of, and promote participation in, the consultation.

A separate survey was used to engage the traveller community about pharmacy services. This was distributed by the specialist health visitor for travellers working in South Gloucestershire.

⁷ South Gloucestershire PNA and subsequent supplementary statements, accessed on 17/7/14 – <u>http://hosted.southglos.gov.uk/oaof/pages/pharmaceutical%20needs%20assessment.htm</u>

A total of 210 responses were received, a summary of which can be found in Section 5. A copy of the public survey can be found in Appendix B, and the detailed responses can be found in Appendix J.

The findings from the traveller survey are also included in Appendix J.

Step 4b: Community pharmacy survey

The Pharmaceutical Services Negotiating Committee (PSNC) is recognised as the national body to negotiate on community pharmacy matters. PSNC produced a pharmacy survey for use in collating pharmacy data for the PNAs. The Avon Local Pharmaceutical Committee assisted in the circulation and collation of this survey.

A copy of the pharmacy survey which was sent to pharmacy contractors in South Gloucestershire HWB area can be found in Appendix D.

Step 4c: Dispensing GP practice survey

A short survey was prepared by the public health team which was then agreed by the steering group to be distributed to the dispensing GP practices to inform the PNA on services provided. A total of four responses (100%) were received back from the dispensing GP practices (two dispensing GP practices operate at four sites). A copy of the dispensing GP practice survey can be found in Appendix E.

Step 5: Preparing the draft PNA for consultation

The Deputy Director of Public Health, with support from Soar Beyond, reviewed and revised the content and detail of the existing PNA. The process took into account the JSNA⁴ and other relevant strategies in order to ensure the priorities were identified correctly. A draft PNA was approved for consultation by the PNA Steering Group at its meeting on 18th August 2014.

Step 6: Consultation-current stage

In line with the 2013 Regulations³, a consultation on the draft PNA was undertaken for 67 days between 7th September 2014 and 21st November 2014. The draft PNA and a consultation response form were issued to all identified stakeholders. The draft PNA was also be posted on the South Gloucestershire Council's website.

Step 7: Collation and analysis of consultation responses - future stage

The consultation responses were collated and analysed by the council's Engagement Manager and Soar Beyond. A summary of the responses received and analysis is noted in Appendix H.

Step 8: Production of final PNA - future stage

The collation and analysis of consultation responses was used by the Project Manager to revise the draft PNA and a final PNA was presented to the PNA Steering Group on 24th November 2014. The final PNA was then presented the South Gloucestershire HWB for approval and published.

1.5 Localities for the purpose of the PNA

The PNA Steering Group, at its second meeting, considered how the localities within the South Gloucestershire HWB geography would be defined.

The majority of health and social care data is available at local authority ward level and at this level provides reasonable statistical rigor. It was agreed that the council wards would be used to define the localities of the South Gloucestershire HWB geography.

The localities used for the PNA for South Gloucestershire HWB area are:

- Kingswood
- Severnvale
- Yate

A list of providers of pharmaceutical services in each locality can be found in Appendix A.

Section 2: Context for the PNA

2.1 Joint Strategic Needs Assessment

The PNA is undertaken in the context of the health, care and wellbeing needs of the local population as defined in the South Gloucestershire JSNA⁴. The JSNA⁴, as well as defining the needs of the local population, also identifies a strategic direction of service delivery to meet those needs and commissioning priorities to improve the public's health and reduce inequalities. The PNA should therefore be read alongside the JSNA⁴.

2.2 Joint Health and Wellbeing Strategy

South Gloucestershire HWB, in conjunction with South Gloucestershire CCG, has agreed a Joint Health and Wellbeing Strategy⁸ for 2013-2016. This strategy is guided by the JSNA⁴ and other relevant sources of information and has defined the following six priorities for South Gloucestershire:

- making the healthy choice, the easy choice
- tackling health inequalities
- making the best start in life
- fulfilling lives for all
- ageing well
- accessing the right services in the right place, at the right time

The Joint Health and Wellbeing Strategy also forecasted a number of challenges:

- population growth: by 4% in 2018
- ageing population: residents aged 85+ up by 27% in 2018
- rising health risk: obesity and binge drinking
- demand on all services: current trends suggest acute hospital admissions up by 8% and A+E by 5.5% by 2018 and residential care admissions up by 33% by 2020
- pressure on finances: no-growth in the economy until 2017, reduced council income, flat NHS income
- public sector reform: the emergence of new provider models and a greater emphasis on personalisation and choice
- identified areas for improvements:
 - health outcomes within the Priority Neighbourhoods
 - access to services in rural areas
 - continuing need to support carers
 - encourage volunteering and participation
 - better care for elderly in hospital

⁸ South Gloucestershire Joint Health and Wellbeing Strategy: <u>http://hosted.southglos.gov.uk/oaof/documents/Health%20Wellbeing%20Strategy%20Final.pdf</u>

- access to services for people with learning difficulties
- better educational and training outcomes at 16-18 years

2.3 **Population characteristics**

2.3.1 Overview

South Gloucestershire currently has an estimated resident population of around 269,107⁹. This is projected to rise to around 277,500 by 2016 and 289,500 by 2021¹⁰.

The South Gloucestershire population has grown by 7.1% between 2001 and 2011 and there are currently around 269,107 residents (mid-year 2013 estimates). This number is projected to rise to 289,457 in 2021 (based on 2011 baseline population of 263,417).

South Gloucestershire is characterised by urban development within the north and east fringes of Bristol and a large rural area containing the towns of Yate / Chipping Sodbury and Thornbury and over 30 villages. 60% of residents live in urban or suburban areas, the remainder either in rural villages or small market towns.

2.3.2 Age

The population structure in South Gloucestershire is very similar to the national average with:

- 24.1% aged under 20 years
- 58.4% aged between 20 and 64 years
- 17.5% aged 65 years and over.

⁹ Office of National Statistics: Mid 2013 population estimates for LSOA areas in England and Wales by SYOA and sex

¹⁰ Office of National Statistics: Interim 2011 sub-national population projections for England

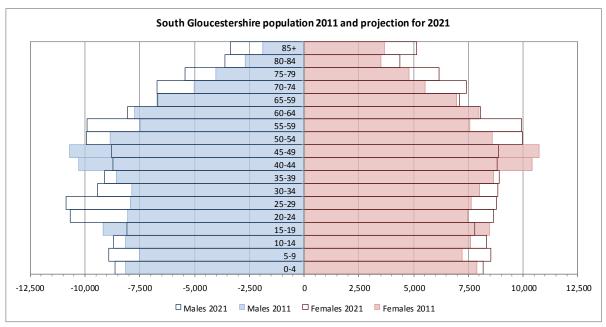


Figure 1 - South Gloucestershire population pyramid for 2011 and 2021

Source: Office of National Statistics: Interim 2011-based Subnational Population Projections

From Figure 1, it is clear that the elderly population will grow particularly fast. It is projected that by 2021 there will be an additional 7,500 people aged over 75 in South Gloucestershire. The greatest proportional rise will be in the over 85 age group where numbers are expected to increase by more than 50% by 2021¹¹.

This has implications for pharmacy services as, on average, older people receive many more prescription items than other age groups. Nationally, in 2007-2012¹³

- those aged 16-59 received an annual average of 9.5 items
- those aged 60 years and over received an annual average of 42.4 items.

This average number of prescription items received by older people has increased consistently each year over the past ten years.

The most significant impacts on the health services associated with an ageing population are from dementia, strokes and falls. The prevalence of these will increase with the increasing older population.

¹¹ Exeter data March 2010

¹² Office for National Statistics (2009) Experimental population estimates by ethnic group for local authority districts and higher administrative areas in England for 2007. Published in 2009 to supersede previously published estimates.

¹³ Health and Social Care Information Centre: Prescriptions Dispensed in the Community, Statistics for England - 2003-2013:

http://www.hscic.gov.uk/searchcatalogue?productid=14988&topics=1%2fPrimary+care+services%2fC ommunity+pharmacy+services&sort=Relevance&size=10&page=1#top

Similarly, the increase in older people is likely to place a greater demand on community pharmacies to provide prescription collection and delivery services for people who find it difficult to leave their homes.

2.3.3 Predicted population growth

A breakdown of major housing developments planned for the next five years, and the effect by locality, is listed in Table 4.

Table 4 - Actual and expected hou	se completions* in South	Gloucestershire, 2011-
2018		

		Completed			Planned				
Address	Locality	11/12	12/13	13/14	14/15	15/16	16/17	17/18	
Charlton Hayes	Severnvale	87	163	360	205	252	250	250	
Cribbs/ Patchway	Severnvale	90	0	0	0	305	425	425	
Land east of Coldharbour Lane	Severnvale	0	0	0	81	213	213	123	
Harry Stoke, Stoke Gifford	Severnvale	0	0	57	99	143	112	141	
Wallscourt Farm, Stoke Gifford	Severnvale	111	123	132	58	47	46	0	
East of Harry Stoke	Severnvale	0	0	0	0	0	185	185	
Frenchay	Severnvale	0	0	0	0	50	100	100	
Various- North Bristol	Severnvale	124	96	59	50	49	37	0	
Park Farm, Thornbury	Severnvale	0	0	0	125	125	125	125	
Various- Thornbury	Severnvale	18	17	14	0	170	169	25	
Severnvale total	I	430	399	622	618	1354	1662	1374	

		Comp	leted	Planned					
Address	Locality	11/12	12/13	13/14	14/15	15/16	16/17	17/18	
Various: East Bristol	Kingswood	179	144	37	0	124	77	16	
Various, Hanham	Kingswood	26	59	68	45	45	0	0	
GHQ Emersons Green	Kingswood	0	0	54	229	300	350	350	
Various- Kingswood	Kingswood	54	80	0	16	142	128	95	
Kingswood total		259	283	159	290	611	555	461	
Barnhill Quarry, Chipping Sodbury	Yate	0	0	0	60	40	40	30	
North Yate	Yate	0	0	0	60	245	245	245	
Various-Yate/ Chipping Sodbury	Yate	138	91	178	62	95	11	0	
Yate total		138	91	178	182	380	296	275	
South Gloucestershire total		827	773	959	1090	2345	2513	2110	

*For developments of 10+ dwellings

This population growth, coupled with the growing ageing population, will be the key driver for the need for continued growth of pharmaceutical service provision. For each major new housing development, the location and accessibility of existing pharmaceutical service provision will be reviewed in order to ensure there is adequate provision for the new community.

Developments of significant population growth

As demonstrated in Table 4, a wide range of housing developments are planned in South Gloucestershire over the coming years. A small number of these will provide significant new populations in the coming three to four years. GP provision is averaged at 1,750 residents per full time GP NHS South Gloucestershire had previously held a standard for densely populated areas of a maximum walk to a GP practice of 15 minutes.

North Yate: 3,000 new homes are planned to be completed by 2027/28, which would provide an estimated population growth of 7,200 new residents. Current walking times from the development site to the nearest pharmacy are 20-30 minutes.

The planning authority has made provision for a neighbourhood centre to include use for provision of healthcare services. NHS England has predicted that up to five full time equivalent GPs will be required to serve the additional population growth and that there is a lack of capacity in existing neighbouring practices. Around 540 new homes are predicted to be built by the end of 2018/19 resulting in a population growth of around 1,250.

Cribbs / Patchway: 5,700-5,800 new homes are planned to be completed by 2026/27 resulting in an additional population estimated to be almost 14,000 people. The current build programme is estimated to provide around 840 dwellings by the end of 2018/19 resulting in a new population of around 2,000 residents.

Charlton Hayes: a total of 2,400 new homes are planned by 2021/22 which would provide a population of around 5,500. It is estimated that around 900 of these will be completed by the end of 2014/15 with a further 752 planned by the end of 2017/18. This would result in an estimated increased population of 3,800 people. NHS England and South Gloucestershire Council are considering future plans for GP provision in Charlton Hayes. One option being considered is for provision to be secured from a site within the Cribbs / Patchway development. There are a number of pharmacies that would be accessible to this population: Jhoots Pharmacy, Conygre Road, Filton is 0.25-1.25km (from one end of the housing estate to the other as the crow flies) to Charlton Hayes, whilst Boots, Asda and Morrisons at Cribbs Causeway are at the other end.

Emersons Green (Lyde Green development): a further 1,229 new homes are planned at this site by the end of 2017/18, resulting in an extra population of around 2,300. Boots and Sainsbury's pharmacies at Emersons Green are 0.2-1.3 km (from one end of the housing estate to the other as the crow flies) from the development. It is not understood what access arrangements have, or will be in place, to cross the dual carriageway that dissects the new development and the retail park.

Harry Stoke: there are two phases to development at this site however the completion of homes and increase in population for the Severnvale locality are outside of the scope of this PNA for 2015. They should, however, be considered in the next assessment in three years.

2.3.4 Life expectancy

Life expectancy in South Gloucestershire is greater than the England and Wales average by approximately two years for men and 1.5 years for women. Over the period from 2001-2003 to 2010-2012, life expectancy in South Gloucestershire increased by 2.3 years for men and 2.6 years for women (see Figure 3).

The increase is higher than those seen nationally for women (2.3 years), but less than the national increase for men (2.99 years).

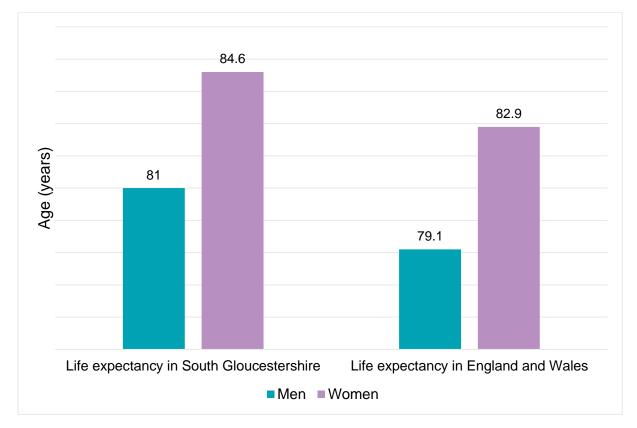


Figure 3 - Life expectancy in South Gloucestershire and nationally 2010-2012

Source: Health and Social Care Information Centre, Compendium of Population Health Indicators

2.3.5 Specific populations

2.3.5.1 Ethnicity

There are well-documented links between ethnic origin and health which show that people from some ethnic communities have higher levels of illness from some diseases compared to the general population. For example, Indian, Bangladesh and Pakistani communities have higher mortality rates from coronary heart disease (CHD) and stroke, and higher incidence rates of cataracts which are, in part, because of an increased prevalence of diabetes¹⁴.

Smoking rates are higher in Bangladeshi men (44%) compared to white British men (27%) and hypertension is a common problem with an increased risk of cardiovascular disease (CVD) and stroke associated with rising blood pressure levels.

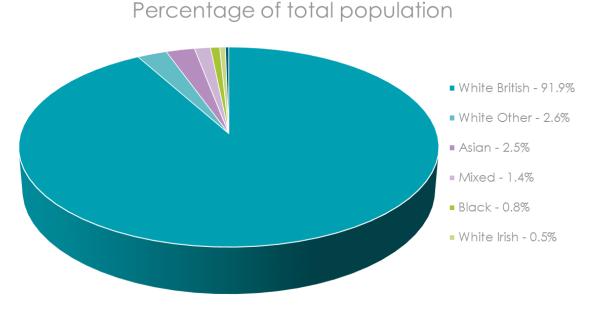
¹⁴ Association of Public Health Observatories (APHO) (2005) Indications of Public Health in the English Regions: Ethnicity and Health: SEPHO

African Caribbean and South Asian populations in the UK also have a higher prevalence of hypertension compared to the white population¹⁵.

Sickle cell and thalassaemia are inherited blood disorders. Thalassaemia is most common in Mediterranean, Indian, and Pakistani people; sickle cell in people from Africa, the Caribbean, the Eastern Mediterranean, Middle East and Asia and their descendants. Pregnant women from these groups are offered antenatal screening.

8.1% of the South Gloucestershire population is from black and minority ethnic (BME) groups which is lower than the England and Wales average of 14% (2011 Census).

Figure 4 - Breakdown of population by ethnic group in South Gloucestershire



Source - Office for National Statistics. Mid-year 2012 population estimates

Map G shows the prevalence of BME groups by ward.

For some BME groups, language may be a barrier to achieving healthy outcomes. Table 5 shows the number of school-age children, in each locality, not speaking English as their first language.

¹⁵ Lane DA and Lip GYH (2001) Ethnic Differences in Hypertension and blood pressure control in the UK Q J Med:94: 391-396

Table 5 - Number and percentage of school-age children in South Gloucestershire in
2014 where first spoken language is not English16

Locality	Number of school-age children	Percentage of school-age children
Kingswood	788	5.74%
Yate	541	5.80%
Severnvale	1103	9.92%

2.3.5.2 Children and young people

Child poverty affects one in nine children and young people in South Gloucestershire (as defined as living in a household where the income is less than half of the national average). This is lower than the national rate.

Levels of 'overweight' and 'very overweight' in school reception classes (as measured by the National Child Measurement Programme (NCMP)) are below the national average in South Gloucestershire but above the national average by Year 6 (as they are in adulthood).

Smoking prevalence amongst young people in South Gloucestershire (the percentage of children who reported that they had smoked at least one cigarette in the last four weeks) is higher than regional and national averages¹⁷.

South Gloucestershire has lower than average teenage pregnancy rates but repeat abortions in under 19s continue to be higher than the regional average.

2.3.5.3 Children in care

There are around 200 children who are unable to remain in the care of their parents in South Gloucestershire. A rise in numbers since 2007 is now beginning to slow. Incidence of children needing to be cared for because of parental drug or alcohol abuse is increasing. As described in Figure 5, there are fewer looked after children overall in South Gloucestershire per population than nationally and regionally.

¹⁶ January 2014 school census

¹⁷ Child and maternal health intelligence network: <u>http://www.chimat.org.uk/profiles</u>

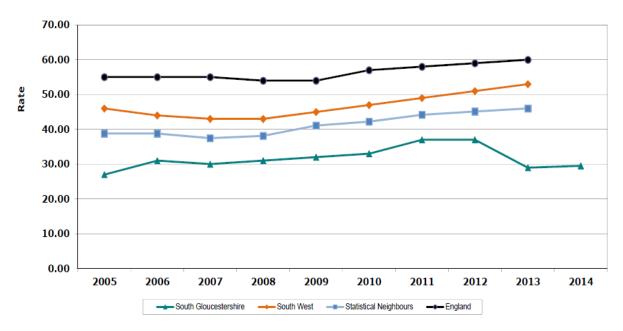


Figure 5 - Looked after children, rate per 100,000 children aged under 18

2.3.5.4 Prison populations

The three prisons - Her Majesty's Prisons (HMP) - in South Gloucestershire accommodate around 1,300 individuals at any one time: HMP Eastwood Park - 362, HMP Leyhill - 527 and HMP Ashfield - 400. These people are amongst the most deprived and vulnerable in South Gloucestershire. There are particular challenges in addressing high mental health, sexual health and drug service needs as well as in promoting health.

2.3.5.5 Disabled people

Accurate data on the number of disabled people in South Gloucestershire is not available. The proportion of people living with a limiting long-term illness is 15.6% in South Gloucestershire, compared to 17.6% in England. 6.8% of South Gloucestershire residents reported having a long-term health problem or disability that limits their day-to-day activities a little and 8.8% reported having such a problem that limits their day-to-day activities a lot¹⁸.

It is important to make sure that people with mobility problems can access pharmacy services and that medicines are dispensed in a format which is sensitive to people's needs e.g. easy opening tops, talking and Braille labels.

¹⁸ Census 2011- <u>http://www.ons.gov.uk/ons/guide-method/census/2011/census-data/2011-census-data-catalogue/index.html</u>

People with physical and sensory impairment

Visual impairment affects all age groups but predominantly older people. The numbers of people with moderate, severe and profound deafness are predicted to increase with an ageing population. Currently, the council's register of disabled residents shows 744 as visually impaired. However, this is likely to be an underestimate as registration is voluntary. There are believed to be a significant number of people who choose not to register. Estimates based on research in other areas suggest that up to 4,000 (9%) of South Gloucestershire residents aged 65 or over may have a moderate to severe visual impairment¹⁹.

People with learning difficulties

There are 872 people living with learning difficulties who are known to the joint local authority / South Gloucestershire CCG service. However, it is estimated that there could be almost 5,000 adults with some degree of learning disability living in South Gloucestershire²⁰.

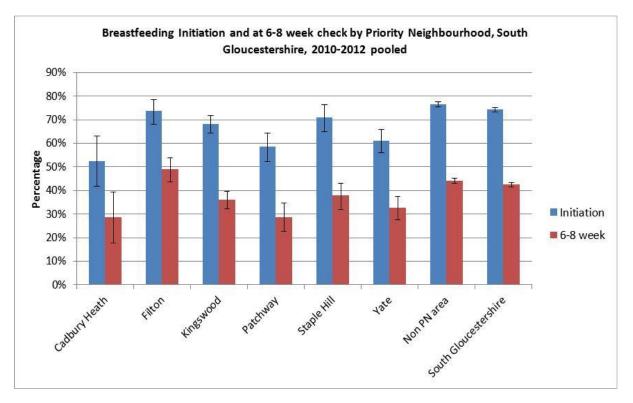
2.3.5.6 Breastfeeding populations

Figure 6 presents the percentage of infants who are breastfed at six to eight weeks for South Gloucestershire as a whole and for each of the Priority Neighbourhoods. Four of the Priority Neighbourhoods - Cadbury Health, Kingswood, Patchway and Yate have significantly lower breastfeeding rates than South Gloucestershire as a whole.

¹⁹ POPPI.co.uk, Crown Copyright, accessed Jan 2014

²⁰ POPPI.co.uk and PANSI.co.uk Crown Copyright, accessed Jan 2014

Figure 6 - Breastfeeding rates at six to eight weeks for South Gloucestershire as a whole and for each of the Priority Neighbourhood wards* 2010-2012



Source: NBT and UHB maternity data (initiation) and Child Health System (6-8 week). *Kings Chase, Parkwall and Yate Central wards contain the Priority Neighbourhoods of Kingswood, Cadbury Heath and Yate and West Dodington respectively

2.3.5.7 Homeless populations

Figure 7 shows 141 households were accepted as homeless in 2012/13 meaning the council had a statutory duty to re-house them. This compares with 155 households in 2011/12. This reduction runs contrary to the national trend which shows an increase in the number of duties accepted.

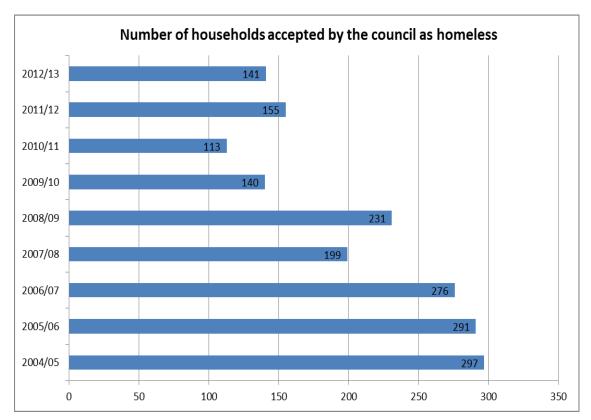


Figure 7 - Homeless populations in South Gloucestershire 2004/5-2012/13

2.3.5.8 Traveller population

There were 289 caravans occupied by travellers in July 2013 although the number fluctuated within the year. Approximately 75-80% were on authorised sites, 5% on their own land and 15% on unauthorised sites. In comparison, there were 261 caravans in July 2012.

This population group has significantly poorer health status and more self-reported symptoms of ill-health than other UK residents. There are marked inequalities in self-reported anxiety, respiratory problems (including asthma and bronchitis) and chest pain. There is also a higher prevalence of miscarriages, stillbirths, neonatal deaths and premature deaths of older offspring²¹. Explanations for this suggest poor living conditions, discrimination, lack of access to healthcare, low levels of educational attainment and poverty as causative.

In a survey, nerves and depression were the most common health problems among travellers, possibly as a result of discrimination.

²¹ Parry G et al (2004) The Health Status of Gypsies and Travellers in England: University of Sheffield: School of Health and Related Research.

High rates of asthma and lung conditions were also reported, which are likely to be exacerbated by high smoking prevalence, frequently damp conditions in trailers and poor quality amenity sites²².

2.3.5.9 Students

South Gloucestershire hosts the University of the West of England's main campus at Frenchay. Approximately 35,000 students attend the University. However the population resides across the border into Bristol as well as in South Gloucestershire.

2.3.5.10 Carers

The aging population, and the rise in new births, will further flatten the population pyramid for South Gloucestershire as demonstrated in Figure 1. In addition, the dependency ratio (as measured as the ratio of people aged 0-15 and 65+ as a percentage of people aged 16-64) is predicted to change from 54% (when measured in 2010) to 68% in 2035. This will have a significant impact on the demand for carers.

2.3.6 Deprivation

South Gloucestershire, on the whole, is a relatively affluent area and levels of deprivation are low compared to national levels. Only 10% of local authorities in England are better off. However, pockets of deprivation do exist and there are marked health inequalities between different population groups (addressed in the next section) and geographical areas. Map F details the community pharmacies and dispensing GP practices alongside the Index of Deprivation by Lower Super Output Area (LSOA), for South Gloucestershire.

Variation in health needs by locality

In October 2006, South Gloucestershire Council's Cabinet agreed the identification of Priority Neighbourhood areas based on clusters of small areas that are in need of additional support. The following six locations in South Gloucestershire have been defined as Priority Neighbourhoods because they are the most deprived, face the greatest health inequalities and have the greatest health need.

²² West of England Gypsy Traveller Accommodation (and other) Needs Assessment 2006-16 August 2007

Locality	Priority Neighbourhoods	Population (est.) mid- year 2012
Kingswood	Kingswood Cadbury Heath Staple Hill	14,800 Higher proportion of older residents (18.2%) and lower proportion of working age people (62.9%) than South Gloucestershire average
Severnvale	Filton Patchway	1,800 Lower proportion of older residents (15.7%) and a higher proportion of children (19.7%) than South Gloucestershire average
Yate	West Yate Dodington	8,000 Lower proportion of older residents (13.0%) and higher proportion of children (21.7%) and working residents (65.3%) than South Gloucestershire average

Table 6 - Priority Neighbourhoods in each locality

In this report, we have used the LSOAs that make up the Priority Neighbourhoods.

A brief overview of each locality is provided below.

Kingswood locality is the smallest locality covering 9.6% of South Gloucestershire's land area. It consists of the eastern suburbs of Bristol and part of the green belt that separates Bristol and Bath and areas bordering Yate. It has no rural or fringe areas. However, 1.4% of its population is amongst the most deprived in terms of access to housing and services.

• Kingswood locality is the smallest geographically but contains 40% of the population of South Gloucestershire

- the population contains a greater percentage of people over 65 and a slightly higher percentage of children under five than South Gloucestershire overall. It also contains three Priority Neighbourhoods: Staple Hill, Kingswood and Cadbury Heath and relatively high levels of deprivation compared to the other localities. All of these factors are associated with a greater need for healthcare.
- teenage pregnancy rates are higher in Kingswood than the other two localities.
- breastfeeding rates are lower than the South Gloucestershire average.

Severnvale locality has boundaries consisting of the northern suburbs of Bristol, green belt land to the north, the River Severn to the west and Yate locality to the east. The total area accounts for 37.6% of South Gloucestershire and it contains 32.9% of the population.

- 10% of Severnvale residents live in an area that suffers from deprivation in relation to access to services and housing. This is higher than for South Gloucestershire as a whole
- the locality population is generally younger than that in the other two localities. In areas where there is a high percentage of children under five years old there is likely to be greater demand for primary healthcare services
- Severnvale has one authorised gypsy and traveller site in Patchway.
- teenage pregnancy rates are lower than in Kingswood but slightly higher than in Yate locality
- breastfeeding rates are higher than the South Gloucestershire average

Yate locality's main population is centred in the market town of Chipping Sodbury and the commuter town of Yate. It has Gloucestershire to the north and Wiltshire to the east with the localities of Kingswood and Severnvale to the west and Bath and North East Somerset to the south.

- Yate locality covers 52% of South Gloucestershire but its population makes up just 27% of the population making it the most sparsely populated locality. It has the highest proportion of resident population that live in a rural area with 24.3% of its residents living in a village, hamlet or isolated dwelling. It also houses the largest proportion of all the localities that are likely to have access issues as 11% of residents in Yate locality live in an area where deprivation in relation to access to services and housing is high
- the percentage of the population over 65 years in Yate locality is the highest of the three localities
- Yate locality has one authorised gypsy and traveller site in Winterbourne
- the percentages of the population on registers for diabetes, coronary heart disease and hypertension in Yate locality are all lower than in Kingswood but higher than in Severnvale localities.
- breastfeeding rates are lower than the South Gloucestershire average

 Yate locality overall has the lowest teenage conception rate but Yate Central ward has the highest rate of all South Gloucestershire wards and is the only ward in which rates have not fallen

Population spread, growth and health inequalities

In planning pharmaceutical service provision, the following should be considered:

- provision of a geographical spread of pharmacies serving all the main population centres and with a wide range of opening hours
- excellent access to an enhanced range of services where small pockets of deprivation and high health need exist (Priority Neighbourhoods)
- accessibility by public transport, as well as parking provision
- flexible service delivery particularly for rural communities
- home delivery for housebound or rural communities
- an increase in demand from the anticipated annual one per cent growth of population, and an ageing population
- a review of provision to accompany each major new housing development

Rural aspects

People living in rural areas tend to score higher on standard measures of health such as life expectancy and infant mortality. However, the distances patients have to travel to reach health services are greater and public transport may be limited. 98% of rural dwellers in South Gloucestershire have access to a car.

According to the Indices of Multiple Deprivation, all the South Gloucestershire LSOAs that are ranked in the lowest 20% nationally for access to housing and services are in our rural areas. Overall there are 21 LSOAs that are classified as rural; 13 of these (62%) are in the bottom 40% most deprived in terms of access to housing and services²³. The majority of the population has access to a car but certain groups, such as the economically disadvantaged and the elderly living alone, are less likely to have independent mobility. These groups are, therefore, much more reliant on public transport and pharmacy prescription collection and delivery services.

2.4 Causes of ill health

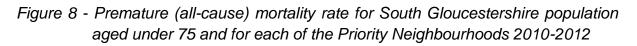
This section describes the leading causes of ill health in South Gloucestershire.

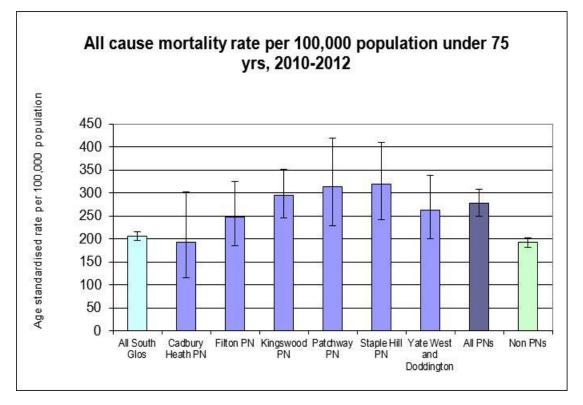
Figure 8 presents the premature (all-cause) mortality rate for South Gloucestershire as a whole and for each of the Priority Neighbourhoods.

²³ Indices of Multiple Deprivation 2010 at www.communities.gov.uk

The rate for South Gloucestershire is 205.5 people per 100,000 population. The most recently available England rate, for 2008-2010, is 280.7 per 100,000.

The mortality rates for the Priority Neighbourhoods are all higher than the South Gloucestershire rate with the exception of Cadbury Heath. The combined priority neighbourhood rate is significantly higher than the rate for South Gloucestershire as a whole.

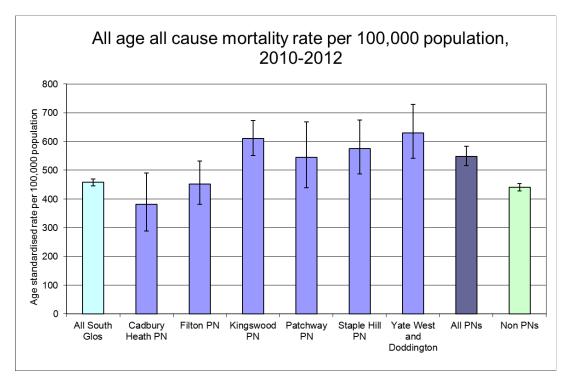




Source: Public Health Mortality files, ONS

In South Gloucestershire as a whole, the premature (all-cause) mortality rate is declining.

Figure 9 - All age (all-cause) mortality rate for South Gloucestershire as a whole and for each of the Priority Neighbourhoods 2010-2012



Source: Public Health Mortality files, ONS

The mortality rates from cardiovascular disease (CVD) and cancers remain the two greatest causes of premature death in South Gloucestershire, although the rates are below the national average.

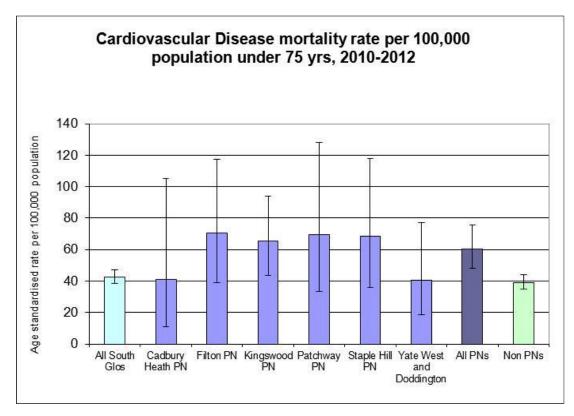
2.4.1 Cardiovascular disease

Deaths from CVD, which includes coronary heart disease and stroke, are the second greatest major cause of premature death for adults, accounting for approximately 21.2% of all premature deaths in South Gloucestershire between 2010 and 2012. There were 382 premature deaths in South Gloucestershire due to CVD over this time.

Figure 10 presents the premature CVD mortality rate for South Gloucestershire as a whole and for each of the Priority Neighbourhoods.

The higher rates of CVD in the Priority Neighbourhoods have implications for the provision of some enhanced pharmacy services, such as smoking cessation and weight management services.

Figure 10 - Cardiovascular disease mortality rate for South Gloucestershire as a whole and for each of the Priority Neighbourhoods



Source: Public Health Mortality files, ONS.

At a national level, three of the top five most common prescription categories in the UK relate to rheumatic diseases and gout, anti-epileptics and anti-angina drugs²⁴.

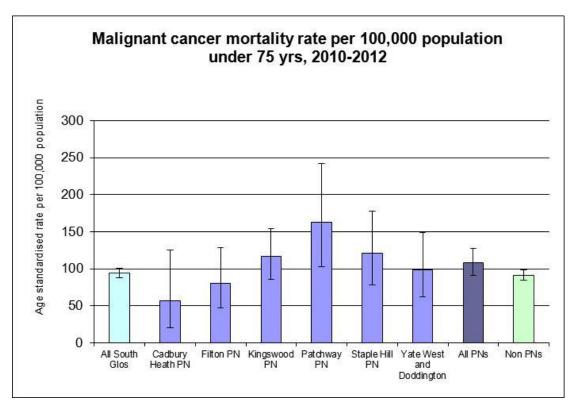
2.4.2 Cancers

Cancer is the main cause of premature death in South Gloucestershire accounting for 46.8% of premature deaths between 2010 and 2012. There were 847 premature deaths in South Gloucestershire over this time due to cancer and 18.8% of these were due to lung cancer. This is consistent with the regional and national proportions (20% and 24%). Lung cancer deaths are falling for men, but rising for women, reflecting the national picture.

Figure 11 presents the malignant cancer mortality rate for South Gloucestershire as a whole and for each of the Priority Neighbourhoods.

²⁴ The Information Centre for Health and Social care (2012) Prescription cost analysis-England: <u>http://www.hscic.gov.uk/catalogue/PUB10610</u>

Figure 11 - Malignant cancer mortality rate for South Gloucestershire as a whole and for each of the Priority Neighbourhoods 2010-2012



Source - Public Health Mortality files, ONS.

The higher rates of cancer mortality in Priority Neighbourhoods have implications for the provision of some enhanced pharmacy services, in particular smoking cessation.

2.4.3 Diabetes

Diabetes prevalence is increasing. The percentage of the population who were on the diabetes disease register (type 1 and type 2 combined) in South Gloucestershire in financial year 2010/11 was 4.8% of all those registered with a South Gloucestershire GP^{25} . Modelled estimates predict that, due to those who are undiagnosed, the true prevalence may be $6.2\%^{26}$.

2.4.4 Chronic obstructive pulmonary disease

Over the last ten years chronic obstructive pulmonary disease (COPD) death rates have remained relatively stable²⁷. Modelled data based on the Health Survey for England predicts that the number of older people in South Gloucestershire with COPD will rise, especially in the over 75s.

²⁵ Health and Social Care Information Centre Indicator Portal.

²⁶ Public Health England Diabetes Prevalence Model for Local Authorities.

²⁷ Calculated using ONS Mortality and Census data

The prevalence of COPD in 2011 in South Gloucestershire was estimated to be 4.3% (males) and 3.0% (females) of those aged over 15 years. These estimates equate to 4,504 men and 3,241 women²⁸. However, the register list size for those registered to a South Gloucestershire GP with COPD in 2010/11 is 3,414²⁹. This is likely to represent a degree of under-reporting in GP practices.

2.4.5 Depression and mental health

There are 1,320 people with bi-polar, schizophrenia or other psychosis registered to South Gloucestershire GPs (FY 2011/12)²⁵.

13.4% of patients registered to a GP practice in South Gloucestershire were on the depression register in 2011/12 in comparison to 11.7% in England. In 2012, prescriptions for antidepressant drugs had the thirteenth highest net ingredient cost and were the twelfth most frequently dispensed drug, nationally³⁰.

2.4.6 Unintentional injuries

In 2012 there were 19 premature deaths resulting from unintentional injuries in South Gloucestershire. This is a mortality rate of 6.8 deaths per 100,000, compared to the national (England and Wales) and regional rates of 9.8 and 9.6 per 100,000²⁵. Mortality rates from injury fluctuate each year due to fairly low numbers.

2.4.7 Asthma

In the financial year 2010/11, 6.8% of patients registered with a South Gloucestershire GP were recorded as having asthma.

2.4.8 Obesity

It is estimated that 59.2% of adults in South Gloucestershire are overweight or obese in comparison to 63.8% of adults in England as a whole³¹.

Data from the academic year of 2012/13 National Child Measurement Programme shows that, in South Gloucestershire, 6.0% and 15.2% of Reception and Year 6 pupils respectively are obese³². Figure 12 presents levels of obesity for Reception and Year 6 children for South Gloucestershire as a whole and for the Priority Neighbourhood wards as a whole.

³¹ Public Health Outcomes Framework, updated February 2014

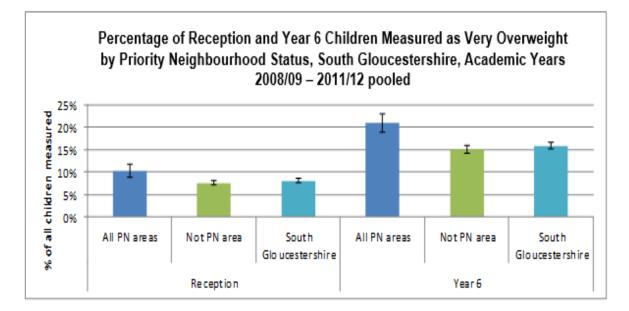
²⁸ Public Health England, COPD Prevalence Estimates Dec 2011

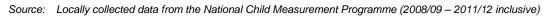
²⁹ Health and Social Care Information Centre Indicator Portal. QMAS 2010/11 data as at end of July 2011

³⁰ Health and Social Care Information Centre. Prescribing Cost Analysis – England 2012 (Analysis conducted through excluding prescriptions for medical equipment)

³² National Child Measurement Programme (2008/09)

Figure 12 - Levels of obesity amongst Reception and Year 6 children for South Gloucestershire, Priority Neighbourhoods and non-Priority Neighbourhood areas.





2.4.9 Palliative care

In 2012, 23.2% of people died at home. This has increased from a low of 17.5% in 2005.³³ The CCG strategic plan places a priority on improving services so that people who choose to die at home are able to do so. Pharmacy services have an important role in ensuring that specialised drugs and equipment are available in a timely and flexible manner.

2.4.10 Urgent care

Latest data available showed South Gloucestershire CCG within the highest 20% in England for emergency department attendances, admissions from residential and nursing homes and admissions with ambulatory care sensitive conditions.

³³ Primary Care Mortality Data

Managing Long Term Conditions

In planning pharmaceutical service provision the following should be considered:

- providing support to patients on multiple medications through medical review to help compliance and reduce side effects
- management of symptoms of asthma and chronic obstructive pulmonary disease, including education on improved inhaler device technique
- flexible models of delivery of medication for palliative care and cancer treatment

2.4.11 The prevalence of diseases by locality

Similar prevalence levels for stroke or transient ischaemic attack, coronary heart disease, hypertension, chronic obstructive pulmonary disease (COPD) and diabetes mellitus are seen across the localities. The prevalence of these diseases, with the exception of COPD, are slightly lower in Severnvale than in the other localities.

	Localities		
Diseases	Kingswood	Severnvale	Yate
Stroke or transient ischaemic attacks (TIA)	1.8%	1.5%	1.8%
Coronary heart disease	3.1%	2.8%	3.3%
Hypertension	14.4%	13.2%	14.3%
Chronic obstructive pulmonary disease	1.5%	1.3%	1.3%
Diabetes mellitus (diabetes) (ages 17+)	4.3%	3.8%	4.3%

Table 7 - Prevalence of diseases by locality9

Source: Quality and Outcomes Framework (QoF), HSCIC, 2012/13 data

2.5 Lifestyle issues

2.5.1 Drug and alcohol misuse

It is not possible to know how many people there are in South Gloucestershire who currently misuse drugs. Academic modelling estimates that there are around 1,250 opiate and crack users (OCUs) in South Gloucestershire. There are 583 individuals known to the treatment system indicating a 47% penetration rate into the estimated OCU population.

There are around 667 OCUs who have not actively engaged in treatment over the past two years.

Provision of clean needles and syringes makes an important contribution to minimising the harm to problem drug users who continue to inject and who are at risk of bloodborne viruses and other infections through sharing of equipment.

In 2012/13, 665 adult clients were treated by the South Gloucestershire Drug and Alcohol Action Team (DAAT) service. The majority of these clients have never injected; 31% have previously injected and only 8% of clients are currently injecting.

Opiates and 'opiates and crack' are by far the largest category of drug reported in the area. Nearly half of all clients are recorded as having this as a primary substance.

Treatment for opiate use can include the supervised administration of methadone in order to stabilise clients who may subsequently work towards abstinence.

Cannabis is the third most used drug in the area (9% of the total primary substances recorded) followed by benzodiazepines.

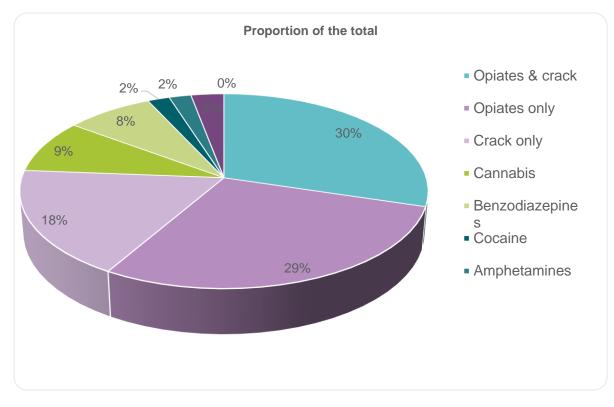


Figure 13 - Primary substance use in South Gloucestershire 2012/13

Source: www.NDTMS.net

During 2011/12 and 2012/13, there were 793 hospital admissions relating to drug misuse amongst South Gloucestershire residents. These admissions involved 650 patients of which 80 patients were admitted on two or more occasions in the two year period³⁴.

2.5.2 Alcohol and related disease

From April 2012 to March 2013 there were 6,589 alcohol related hospital admissions including 1,282 alcohol specific admissions. A national indicator has been set to monitor rates of hospital admissions. The rate of alcohol specific hospital admissions for the year 2012/13 was 159 per 10,000³⁴.

There is a lack of local data on problem drinking which includes increasing risk, higher risk and binge drinking³⁵. Estimates suggest that there are approximately 34,500 individuals at an increasing risk due to alcohol consumption and 11,000 individuals at a higher risk in South Gloucestershire.

It is estimated that there are approximately 32,500 binge drinkers within this region. It is important to note that a proportion of these individuals will be included in the former categories³⁶.

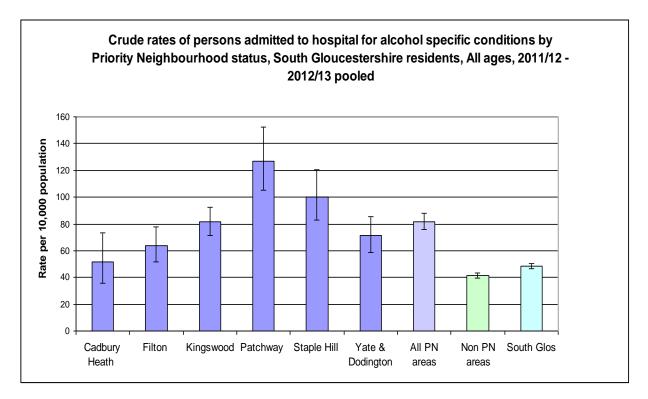
Figure 14 shows that between 2011/12 and 2012/13 the alcohol-specific admission rate for the Priority Neighbourhoods as a whole was 82 per 10,000 population compared to 48 for South Gloucestershire overall.

³⁴ South Gloucestershire Strategic Assessment of Crime and Disorder 2013/14

³⁵ Increasing risk and higher risk are also known as hazardous and harmful drinking respectively.

³⁶ Local Alcohol Profiles for England, PHE; accessed 12/05/2014 and ONS mid-year population estimates for 2012 (18-65 years of age)

Figure 14 - Crude alcohol-specific admission rates for South Gloucestershire as a whole and for each of the Priority Neighbourhood wards



Source: South Gloucestershire Crime and Disorder report (2014)

2.5.3 Sexual health and teenage pregnancy

2.5.3.1 Sexually transmitted infections

Sexually transmitted infections are relatively common. Pharmacies have an important role in promoting the use of barrier methods of contraception which help protect against the spread of disease.

2.5.3.2 Chlamydia

Chlamydia is the most common sexually transmitted infection among all age groups. Early diagnosis and treatment is important as 70% of people will have no symptoms. If left untreated it can cause long-term health problems, particularly in women. The highest rates of Chlamydia are among 15-24 year olds. A Chlamydia screening programme was introduced in South Gloucestershire during 2007. Public Health England (PHE) recommends that local areas should be working towards achieving a diagnosis rate of at least 2,300 per 100,000 15-24 year olds. Screening kits are available through a range of settings but there is considerable potential for greater involvement of local pharmacies in the distribution of kits and promotion of testing.

2.5.3.3 Teenage pregnancy

Teenage pregnancy rates in South Gloucestershire are below the England average³⁷. Over the last seven years the rate of teenage pregnancies in South Gloucestershire has almost halved from 37 conceptions per 1000 births in 2005 to 20 conceptions per 1000 births in 2011³⁷.

The rate of under 18 conceptions between 2009 and 2011 for South Gloucestershire was 24 per thousand population. This pooled data shows that there are three wards with significantly higher rates of under 18 conceptions than South Gloucestershire as a whole. These were Patchway, Kings Chase and Yate Central. These wards had a teenage conception rate that was over double that of the South Gloucestershire average.

Only Staple Hill has a significantly higher rate of teenage conceptions that result in deliveries.

Data from the same years shows that Siston was the only ward to have a rate of teenage conceptions that lead to termination that was significantly higher than that for South Gloucestershire as a whole.

2.5.4 Smoking

The smoking prevalence rate for South Gloucestershire is 17.5%, compared with 19.5% nationally³⁸. Smoking is responsible for around 320 deaths a year in South Gloucestershire³⁹.

2.5.5 Oral health

In 2013, data from the 2011/12 National Dental Epidemiology Programme Oral Health Survey of 5 Year-Old Children were released.

The results show that 22.2% of five-year-old children in South Gloucestershire had experience of dental decay, having one or more teeth that were decayed to dentinal level, extracted or filled because of caries (%d₃mft>0). This compares to 27.9% in England and 26.1% in Avon, Gloucestershire and Wiltshire (AGW) as a whole.

The average number of teeth per child affected by decay (decayed, missing or filled teeth (d₃mft)) was 0.42 in South Gloucestershire compared to 0.94 in England as a whole.

³⁷ Public Health Outcomes Framework: <u>http://www.phoutcomes.info/</u>

³⁸ Local Tobacco Control Profiles; Public Health England: <u>http://www.tobaccoprofiles.info/</u>

³⁹ Health and Social Care Information Centre Indicator Portal: <u>http://www.hscic.gov.uk/indicatorportal</u>

The disease burden in those children who have decay has remained similar across AGW between 2007/08 and 2011/12. South Gloucestershire has seen a larger reduction in the disease burden in those who have decay compared to other local authorities in the AGW area.

Section 3: NHS pharmaceutical services provision; currently commissioned

3.1 Community pharmacies

There are 55 community pharmacies in South Gloucestershire HWB area (as at 2nd December 2014) for a population of 269,107. This equates to an average of 20.4 pharmacies per 100,000 population. England average is 21.8 pharmacies per 100,000 population. Table 8 provides a breakdown, by locality, of average number of community pharmacies per 100,000. These figures include LPS pharmacies (locally commissioned). Please note: population figures used in this table* are the total GP practice registered population which is higher than ONS population estimates. The inflated figure is due to registrations from patients who have deceased, moved, who are temporary, or who live outside South Gloucestershire. This inflated population figure explains why the number of pharmacies per 100,000 population appears less than that stated earlier.

Area	Number of community pharmacies (as of 2 nd December 2014)	Total GP practice registered population (May 2014)*	Average number of community pharmacies per 100,000 population (as of 2 nd December 2014)	Average number of community pharmacies and dispensing GP practices per 100,000 population
Kingswood locality	22	109,670	20.1	21.0
Severnvale locality	21	95,286	22.0	22.0
Yate locality	12	71,327	16.8	21.0
South Gloucestershire Health and Wellbeing Board area	55	276,283	19.9	21.4
England (2013/14 data)	11,647	-	21.8	-

	Table 8 - A breakdown of	average community	pharmacies per	100,000 population ⁶
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Section 1.3 lists the essential services of the pharmacy contract. It is therefore anticipated that provision of all of these services is available from all contractors. Map C shows population densities, community pharmacies and dispensing GP practices.

With a high proportion of the population of South Gloucestershire living in a rural area, inevitably residents in some less densely populated areas will incur increased travel times to access community pharmacy or dispensing GP practice services.

3.1.1 Choice of community pharmacies

Table 9 shows the breakdown of community pharmacy ownership in South Gloucestershire. The data shows that pharmacy ownership is at levels similar to those seen nationally, with no one provider having a monopoly. People in South Gloucestershire therefore have a good choice of pharmacy providers.

Area	Multiples (%)	Independent (%)
England	61	39
South West region	76	24
South Gloucestershire (2014 data)	69	31

Table 9 - Community pharmacy ownership, 2012/136

Data for 2013/14 is available, however this is presented at NHS England Region and Area level. South Gloucestershire HWB area is in the BNSSSG (Bristol, North Somerset, Somerset, and South Gloucestershire) area of NHS England. Data for 2013/14 showed the BNSSSG area had 78% independent pharmacy contractors. This compared against 71% for the South Region. England figures remained the same for 2013/14.

3.1.2 Intensity of current community pharmacy providers

For most community pharmacy providers, dispensing provides the majority of their activity. Table 10 shows the average monthly dispensing activity from community pharmacies. The data shows that average activity in South Gloucestershire is less than the South West region and England average. This data suggests that, as a whole, community pharmacies in South Gloucestershire are well-placed for the anticipated population growth in the HWB area.

Area	Average number of monthly dispensed items per community pharmacy
England	6,628
South West region	7,201
South Gloucestershire	6,260

Table 10 - Average dispensed items per community pharmacy, 2012/136

Data for 2013/14 is available, however this is presented at NHS England Region and Area level. Data for 2013/14 showed that contractors in the BNSSSG area dispensed on average 7,517 dispensed items per month. This compared against 6,980 for the South Region. England figures slightly increased to 6,784 for 2013/14.

3.1.3 Weekend and evening provision

It is estimated that community pharmacies now are open approximately 150,000 hours per week more than 10 years ago. This has been mainly driven through the opening of '100 hour' pharmacies. There are over 700 in England open for over 100 hours per week. Table 11 shows that South Gloucestershire has a high percentage of its pharmacies open for 100 hours or more compared with regionally and nationally. Most 100 hour pharmacies are open late and at the weekends (see table on next page).

Table 11 - 100 hour pharmacies, 2013/14	1 6
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Area	Number (%) of 100 hour pharmacies
England	773 (6.7%)
South Region	153 (5.8%)
BNSSSG area	31 (10.5%)
South Gloucestershire (2014 data)	9 (16.4%)
Kingswood locality (2014 data)	4 (18.8%)
Severnvale locality (2014 data)	2 (9.5%)
Yate locality (2014 data)	3 (25%)

3.2 Dispensing appliance contractors

There are no dispensing appliance contractors (DACs) in South Gloucestershire HWB area however DAC services are available to the population from elsewhere in the UK. Appliances may be dispensed from community pharmacies and dispensing GP practices. As part of the essential services of appliance contractors, a free delivery service is available to all patients. It is therefore likely that patients will obtain appliances delivered from DACs outside the HWB area. There were 112 DACs in England in 2013/14⁶.

3.3 Dispensing GP practices

NHS legislation allows for GPs in certain areas to dispense NHS prescriptions for defined populations within rural communities. Geographical areas permitting dispensing by a GP practice are known as 'controlled localities'. NHS England define 'controlled localities' being areas which are 'rural in character' and therefore suitable for the provision of dispensing services by GP practices. One previous formal determinations of a 'controlled locality' had been made in the areas around Pilning (in 2001), otherwise no other 'controlled localities' have yet been determined within South Gloucestershire. Map H shows a copy of the controlled locality area of Pilning. NHS England plans to work with the Local Pharmaceutical Committee and the Local Medical Committee to draw up proposals for additional areas to be considered as controlled localities. The outcomes of the formal determination process will be published at a later date.

There are two dispensing GP practices which dispense from four sites in South Gloucestershire HWB area. There are 276,283 patients on the registers of GP practices in South Gloucestershire as of May 2014¹¹. This equates to 104% of the population. The inflated figure is due to registrations from patients who have deceased or moved (and erroneously not been removed), who are temporary or who live outside South Gloucestershire.

Provision of pharmaceutical services by a GP to a registered patient is only permissible by a GP practice, previously granted rights to dispensing, to a patient who is able to prove one of the following:

- that the patient would have serious difficulty in obtaining any necessary drugs or appliances from pharmacy premises because of distance or inadequacy of means of communication
- that the patient lives in a controlled locality at a distance of more than 1.6km from any pharmacy premises (with the exception of distance selling premises) and the doctor has outline consent and premises approval for the premises from which they would provide services from

• if the doctor or the practice has historic rights and the patient needs to rely on those. As well as living in a controlled locality at a distance of more than 1.6km from any pharmacy premises (with the exception of distance selling premises) the patient must meet other defined criteria

There are 9,943 patients registered as eligible for dispensing by their GP practice, which equates to 3.4% of the total population of South Gloucestershire. Further detail is provided in Table 12. NHS England is currently validating these figures, and they are expected to be revised downwards after the validation exercise.

 Table 12 - List of patients eligible for dispensing services from a dispensing GP practice in South Gloucestershire

Dispensing practice	Percentage of patients eligible for dispensing services
Three Shires Practice (Pucklechurch, Wick, and Marshfield practices)	96.6%
Close Farm surgery	7.0%

A list of dispensing GP practices in South Gloucestershire HWB area, along with their opening hours, can be found in Appendix A.

All dispensing GP practices are open after 6pm for at least one evening per week.

3.4 Distance-selling pharmacies

A distance-selling pharmacy provides services as per the Pharmaceutical Regulations, 2013³. It may not provide essential services face-to-face, and therefore provision is by mail order and / or wholly internet. As part of the terms of service for distance-selling pharmacies, provision of all services must be offered throughout England. It is therefore likely that patients within South Gloucestershire HWB area will be receiving pharmaceutical services from a distance-selling pharmacy outside South Gloucestershire HWB area.

There are no distance-selling pharmacies in South Gloucestershire HWB area. Figures in $2012/13^6$ show that in England there were 211 distance-selling pharmacies, accounting for 1.8% of the total number of pharmacies (South Region: 22 (0.8%), BNSSSG area: 3 (1%)).

3.5 Access to community pharmacies

The majority of community pharmacy providers in South Gloucestershire HWB area are sited in areas co-located with shops, GP practices, or other routine destinations;

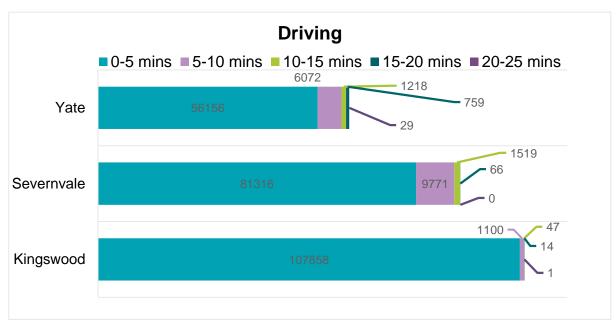
many also provide extended opening hours. As such they attract a high level of convenience.

The white paper, 'Pharmacy in England: Building on strengths – delivering the future'⁴⁰ noted that 99% of the population – even those living in the most deprived areas – can get to a community pharmacy within 20 minutes by car and 96% by walking or using public transport. A list of community pharmacies in South Gloucestershire HWB area and their opening hours can be found in Appendix A.

3.5.1 Routine weekday daytime access to community pharmacies and dispensing GP practices

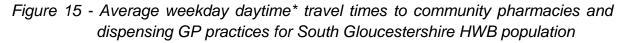
Average weekday daytime drive time, walking and public transport travel times to community pharmacies for the South Gloucestershire HWB population can be found in Table 13. Average drive time to community pharmacies and dispensing GP practices in South Gloucestershire is shown in Map D. Average walking time to community pharmacies and dispensing GP practices is shown in Map E.

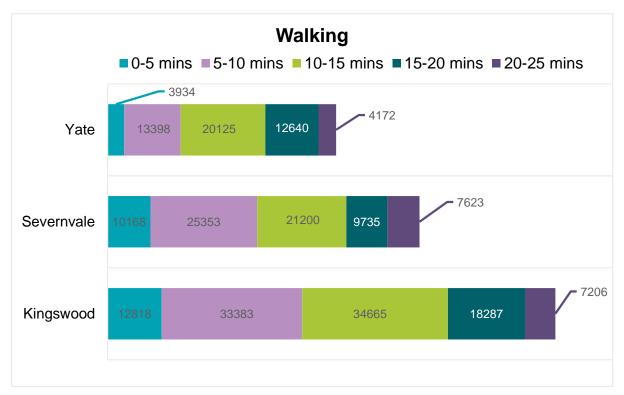
Figure 15 - Average weekday daytime* travel times to community pharmacies and dispensing GP practices for South Gloucestershire HWB population

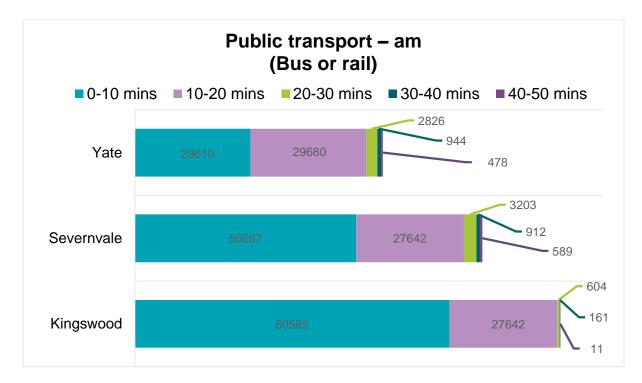


*Weekday daytime has been considered as Mon-Fri (excl. bank holidays), 9am-5.30pm

⁴⁰ 'Pharmacy in England: Building on strengths – delivering the future', Department of Health (2008) - <u>http://www.official-documents.gov.uk/document/cm73/7341/7341.pdf</u>

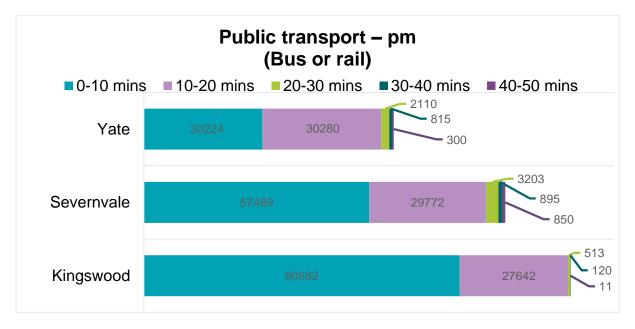






*Weekday daytime has been considered as Mon-Fri (excl. bank holidays), 9am-5.30pm

Figure 15 - Average weekday daytime* travel times to community pharmacies and dispensing GP practices for South Gloucestershire HWB population



*Weekday daytime has been considered as Mon-Fri (excl. bank holidays), 9am-5.30pm

3.5.2 Routine weekday evening access to community pharmacies

Community pharmacy providers open beyond 6pm, Monday to Friday (excluding bank holidays) varies within each locality; they are listed in the table below.

Table 13 - Community pharmacy	providers open Mon-Fr	i (excl. BH's) bevond 6pm
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Locality	Pharmacy name and address	Openings hours (Mon-Fri, excl. BH's)
	Asda, Craven Way, Longwell Green, Bristol, BS30 7DY	Mon 08:00-23:00, Tue-Fri 07:00-23:00
	Boots, Christchurch Medical Centre, North St, Downend, Bristol, Avon, BS16 5SG	Mon-Fri 08:30-13:00; 14:00-18:30
E 7, B P	Boots, Unit 1a, The Village, Emerson Way, Bristol, BS16 7AE	Mon-Fri 08:30-20:00
	Boots, Unit D, Gallagher Retail Park, Aldermoor Way, Longwell Green, Bristol, Avon, BS30 7DA	Mon-Sat 07:30-00:00

Locality	Pharmacy name and address	Openings hours (Mon-Fri, excl. BH's)
	Oldland Common Pharmacy, 179 High St, Oldland Common, Bristol, Avon, BS30 9QG	Mon-Fri 08:15-13:00; 14:00-18:30
	LloydsPharmacy, Willow Surgery, Hill House Road, Downend, Bristol, BS16 5FJ	Mon-Fri 08:00-19:00
	The Co-operative pharmacy, Food store, Halls Road, Kingswood, BS15 8JD	Mon-Fri 07:00-23:00
	The Co-operative pharmacy, Kingswood Health Centre, Alma Road, Kingswood, BS15 4EJ	Mon-Fri 09:00-18:30
	Sainsbury's Pharmacy, Emersons Way, Emersons Green, BS16 7AE	Mon-Fri 07:00-23:00
	Shaunak's Pharmacy, Hanham Health Ctr, 33 Whittucks Road, Hanham, Bristol, BS15 3HY	Mon-Fri 09:00-18:30
Severnvale	Asda Pharmacy, Highwood Lane, Patchway, Bristol, BS34 5TL	Mon-Fri 09:00-13:00; 14:00-22:00
	Boots Pharmacy, The Mall, 116 Cribbs Causeway, Patchway, Bristol, Bristol City, BS34 5UP	Mon-Fri 08:30-21:00
	Boots Pharmacy, Unit 1 Willow Brook Centre, Bradley Stoke Way, Bradley Stoke, Bristol, BS32 8EF	Mon-Fri 08:00-00:00
Severnvale	Bradley Stoke Pharmacy, Brook Way, Bradley Stoke, Bristol, BS32 9DS	Mon-Fri 07:00-23:00
	Hayfield Pharmacy, 508 Filton Avenue, Filton, Bristol, BS7 0QE	Mon-Fri 08:45-19:15
	Jhoots Pharmacy, 4-6 Ratcliffe Drive, Stoke Gifford, Stoke Gifford, BS34 8UE	Mon-Fri 08:30-13:00; 14:00-18:30
	LloydsPharmacy, The Parade, Coniston Road, Patchway, Bristol, Avon, BS34 5TF	Mon-Fri 09:00-19:00

		Openings hours
Locality	Pharmacy name and address	(Mon-Fri, excl. BH's)
	LloydsPharmacy, Concorde	
	Medical Centre, Braydon	Mon 08:30-20:00
	Avenue, Little Stoke, Bristol,	Tue-Fri 08:30-18:30
	Avon, BS34 6BQ	
	LloydsPharmacy, 8-10	
	Horseshoe Lane, Bristol, Avon,	Mon-Fri 08:30-18:30
	BS35 2AZ	
	Sainsbury's Pharmacy, Fox Den	Mon-Sat 08:00-13:30;
	Road, Filton, Bristol, BS34 8SS	14:00-20:00
	Tesco Pharmacy, Brook Way,	
	Bradley Stoke, Bristol, BS32	Mon-Sat 08:00-13:30
	8EF	14:00-20:00
	Wm Morrison Pharmacy,	
	Lysander Way, Cribbs	Mon, Tue, Wed, Sat 08:30-
	Causeway, Westbury On Trym,	20:00
	BS10 7UD	Thur, Fri 08:30-21:00
	Boots Pharmacy, West Walk,	
	Yate, Gloucestershire, BS37	Mon-Fri 08:00-20:00
	4AX	Worl-1 11 00.00-20.00
	Yate Family Pharmacy,	
	Kennedy Way Surgery,	
		Mon-Sat 07:00-22:30
	Kennedy Way, Yate, South	
	Gloucestershire, BS37 4AA	
	LloydsPharmacy, 14 West	
	Walk, Yate, Bristol, Avon BS37	Mon-Fri 09:00-18:30
	4AX	
	LloydsPharmacy, Courtside	
Yate	Surgery, Kennedy Way, Yate,	Mon-Sat 08:00-22:30
	City of Bristol, BS37 4DQ	
	North Yate Pharmacy,	
	Wellington Road, Yate, Bristol,	Mon-Fri 8:30-18:30
	South Gloucestershire, BS37	Mon-1 11 0.30-10.30
	5UY	
	Frome Valley Pharmacy, Frome	
	Valley Medical Centre, Court	Man Eri 00:00 18:20
	Road, Frampton Cotterell,	Mon-Fri 09:00-18:30
	Bristol, Avon, BS36 2DE	
	Tesco Pharmacy, 12 East Walk,	
	Yate Shopping Centre, Bristol,	Mon 08:00-22:30
	Avon, BS37 4AS.	Tue-Fri 06:00-23:00

Average access is difficult given the variety of opening hours and locations. Access is therefore considered at locality level and, as can be found from Table 13, there is a range of providers open after 6pm in all localities.

3.5.3 Routine Saturday daytime access to community pharmacies

The number, location and opening hours of community pharmacy providers open on a Saturday vary within each locality. A number of pharmacies are open only for Saturday mornings, whilst a small number are open until late evening.

Average access is difficult given the variety of opening hours and locations. Access is therefore considered at locality level.

In Kingswood locality, all pharmacies are open on a Saturday with the exception of Jhoots Pharmacy (Pool Road), Ideal Pharmacy (Warmley) and Shaunak's Pharmacy (Hanham Health Centre). Just over 50% of those pharmacies open on a Saturday are open beyond lunchtime.

Six pharmacies in Severnvale locality are not open on a Saturday. Of the 15 that are open, five do not open beyond 1pm. There is only one pharmacy not open in Yate locality on a Saturday. Four pharmacies close at, or after, lunchtime.

3.5.4 Routine Sunday daytime access to community pharmacies

The number, location, and opening hours of community pharmacy providers open on a Sunday vary within each locality. Each of the main shopping areas has a pharmacy open on Sundays.

Locality	Pharmacy name and address	Openings hours (Sundays)	
	Asda Pharmacy, Craven Way, Longwell Green, BS30 7DY	10:00-16:00	
Kinger	Boots Pharmacy, Emersons Way, Emersons Green, BS16 7AE	10:30-16:30	
Kingswood	Boots Pharmacy, Gallagher Retail Park, Longwell Green, BS30 7DA	10:30-16:30	
	The Co-operative Pharmacy, Food Store, Halls Road, Kingswood, BS15 8JD	10:00-16:00	

Table 14 - Community pharmacy	providers open Sundays.
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Locality	Pharmacy name and address	Openings hours (Sundays)
	Sainsbury's Pharmacy, Emersons Way, Emersons Green, BS16 7AE	09:30-16:30
	Asda Pharmacy, Highwood Lane, Patchway, BS34 5TL	10:00-16:00
	Boots Pharmacy, The Mall, Cribbs Causeway, BS34 5UP	10:00-16:00
	Boots Pharmacy, Brook Way, Bradley Stoke, BS32 8EF	10:00-16:00
Severnvale	Bradley Stoke Pharmacy, Brook Way, Bradley Stoke, BS32 9DS	10:00-18:00
	Sainsbury's Pharmacy, Fox Den Road, Filton, BS34 8SS	10:00-16:00
	Tesco Pharmacy, Brook Way, Bradley Stoke, BS32 8EF	10:00-16:00
	Wm Morrison Pharmacy, Lysander Way, Cribbs Causeway, BS10 7UD	10:00-16:00
Yate	Boots Pharmacy, North Walk, Yate, BS37 4AX	10:00-16:00
	Yate Family Pharmacy, Kennedy Way Surgery, Kennedy Way, Yate, BS37 4AA	10:00-17:00
	LloydsPharmacy, Courtside Surgery, Kennedy Way, Yate, BS37 4DQ	09:00-22:00
	Tesco Pharmacy, East Walk, Yate, BS37 4AS	10:00-14:00

Average access is difficult given the variety of opening hours and locations. Access is therefore considered at locality level.

3.5.5 Routine bank holiday access to community pharmacies

Community pharmacies are not obliged to open on nominated bank holidays. Whilst many opt to close, a number of pharmacies (often those in regional shopping centres, retail parks, supermarkets, and major high streets) opt to open - often for limited hours.

The number, location and opening hours of community pharmacy providers open on a bank holiday vary within each locality and on different bank holidays.

Annually, NHS England requests feedback from community pharmacies on their bank holiday intentions. For most bank holidays, a number of providers have planned to open and NHS England has deemed provision as satisfactory and not commissioned any further provision. NHS England commissions a bank holiday rota service on Easter Sunday and Christmas Day from one pharmacy for each locality and in some localities additionally for Boxing Day.

3.6 Advanced service provision from community pharmacies

Section 1.3 lists all advanced services which may be provided under the pharmacy contract. As these services are discretionary, not all providers will provide them all of the time. Data supplied from NHS England has been used to demonstrate in Appendix A which services were claimed (and therefore provided) from each provider in 2013/14.

All community pharmacies were asked to complete a pharmacy contractor survey. A copy of this can be found in Appendix D. 100% of pharmacies completed the survey through June / July 2014.

In response to the survey, only Jhoots Pharmacy, Pool Road, Kingswood responded to say that they do not currently have a consultation room; they note that one is planned in the next 12 months.

Table 15 lists a summary of the results from the pharmacy contractor survey relating to advanced service provision.

Advanced	Currently providing		
Service	Yes	No	
Medicines use reviews (MURs)	53/55 pharmacies said they currently provide this service	2/55 pharmacies (Grangebridge Pharmacy, Kingswood and Jhoots Pharmacy, Kingswood) said they will be providing this service 'soon'	

Table 15 - Pharmacy contractor survey- advanced service provision

Advanced	Currently providing		
Service	Yes	No	
New medicines service (NMS)	53/55 pharmacies said they currently provide this service	2/55 pharmacies (Grangebridge Pharmacy, Kingswood and Jhoots Pharmacy, Kingswood) said they will be providing this service 'soon'	
Appliance use review (AUR)	10/55 pharmacies said they currently provide this service: all Shaunak's pharmacies, Day Lewis Pharmacy in Filton, Bradley Stoke Pharmacy, Cohens Pharmacy in Thornbury, Tesco Pharmacy in Yate, Westbourne Road Pharmacy in Downend and Yate Family Pharmacy	4/55 pharmacies said they will be providing this service 'soon': Abbotswood Pharmacy in Yate, Alveston Pharmacy, Cleeve Wood Pharmacy and North Yate Pharmacy. All other providers said they do not provide this service	
Stoma customisation	8/55 pharmacies said they currently provide this service: all Shaunak's pharmacies, Bradley Stoke Pharmacy, Cohens Pharmacy in Thornbury, North Yate Pharmacy and Yate Family Pharmacy	4/55 pharmacies said they will be providing this service 'soon': Abbotswood Pharmacy in Yate, Alveston Pharmacy, Cleeve Wood Pharmacy and Westbourne Road Pharmacy in Downend. All other providers said they do not provide this service	

Table 19 lists a summary of the latest available data (2012/13) on provision of advanced services.

	Percentage of providers currently providing (Average number per provider, 2012/13)		
Advanced service	England	South West SHA	South Gloucestershire
Medicines use reviews (MURs)	92% (267)	94.1% (279)	101.9%** (290)
New medicines service (NMS)	82.3% (68)	88.2% (70)	92.6% (65)
Appliance use review (AUR)*	1.2% (197)	1.6% (37)	0
Stoma customisation (SC)*	15.2% (635)	20.9% (226)	16.7% (12)

Table 19 - Advanced service provision

*AUR and SC data includes provision from Dispensing Appliance Contractors

** Figure is greater than 100% due to pharmacy closures

Data for 2013/14 is available, however this is presented at NHS England region and area level. Data for 2013/14 showed that 96.3% of contractors in the BNSSSG area performed MURs, with on average 298 performed per year per contractor. This compared against 94.2% performers from the South Region performing an average of 298 MURs per year and 93.2% of contractors in England performing on average 284 MURs in 2013/14. Data for the same period showed that 88% of contractors in the BNSSSG area performed NMSs, with on average 83 performed per year per contractor. This compared against 84.5% performers from the South Region performing an average of 83 MURs per year and 80% of contractors in England performing on average 80 NMSs in 2013/14.

Number of providers and rate of provision of both the MUR and NMS services in South Gloucestershire HWB area are similar to the regional and national levels. Appendix A lists those community pharmacies who have provided these services (up until 31st March 2014). Seven community pharmacies in South Gloucestershire HWB area (13% of providers) had not provided the NMS service and two community pharmacies in South Gloucestershire HWB area (4% of providers) had not provided the MUR service. 35% of respondents to the community pharmacy contractor questionnaire indicated that they do not have a consultation room which complies with the requirements to perform NMS / MUR services.

Provision of the SC service is low compared with nationally and regionally. The number of providers of the AUR is very low regionally and nationally. There were only 113 community pharmacy or DAC providers nationally $(1\%)^6$.

3.7 Enhanced service provision

Under the pharmacy contract, enhanced services are those directly commissioned by NHS England. Therefore any locally commissioned services (LCS) commissioned by CCGs or the local authority are not considered here. They are outside the scope of the PNA, but are considered in Section 4.

The Bristol, North Somerset, Somerset and South Gloucestershire (BNSSSG) Area Team of NHS England currently commissions a Specialist (Palliative Care) Drugs Service. This service is to retain in stock a range currently commissioned on an annual contractual basis. At the stage of writing the PNA, information provided by NHS England lists those pharmacies who have been *invited* to provide the service for 2014/15. A number of providers had yet to return their contract for this year.

The Specialist (Palliative Care) Drugs Service is provided from the following pharmacies:

- Severnvale locality: Asda, Highwood Lane, Patchway and Tesco pharmacy, Brook Way, Bradley Stoke
- Kingswood locality: Boots Pharmacy, Gallagher Retail Park, Longwell Green
- Yate locality: Lloyds pharmacy, Courtside Surgery, Kennedy Way, Yate

The following pharmacy services are included here for information only - they are out of scope of the PNA.

Hospitals: Thornbury Hospital (and Southmead Hospital, which lies across the border in Bristol HWB area) provides inpatient and outpatient dispensing services, directly to the patient or by home-delivery for specialist medicines.

Minor injury units: Yate minor injuries unit is able to provide, directly to patients requiring treatment, a limited list of medicines.

Prisons: All three prisons in South Gloucestershire have in-house facilities to supply medicines to prisoners. In all cases, prescriptions are fulfilled by a contracted provider off-site and brought into the prison for supply or administration to prisoners. There is also a small Young Persons' accommodation centre called Vinney Green, in the Emersons Green area. Pharmaceutical services are provided by local community pharmacies.

3.8 Pharmaceutical service provision provided from outside South Gloucestershire HWB area

South Gloucestershire HWB area is bordered by four other HWB areas. The more densely populated south and west areas of South Gloucestershire, the southern parts of Severnvale locality and western parts of Kingswood locality border with Bristol HWB area. There is a high density of community pharmacies with generally good public transport links into these parts of north Bristol.

The rural northern and eastern parts of the Yate and Severnvale localities border with Wiltshire and Gloucestershire respectively. These areas continue to be rural in nature; density of community pharmacies and public transport access in these areas is limited from South Gloucestershire.

Southern parts of Yate and Kingswood localities of South Gloucestershire border with Bath and North East Somerset HWB area. There are few pharmacies immediately bordering South Gloucestershire in these areas and public transport is limited.

Section 4: Other services which may impact on pharmaceutical services provision

Community pharmacies and GP practices provide a range of other services. These are not considered pharmaceutical services under the 2013 Pharmaceutical Regulations³ and may be either privately funded or commissioned by NHS England, the local authority or the CCG.

Examples of such services include delivery services, allergy testing, care homes services and sexual health services; this is not an exhaustive list.

4.1 Other services provided by dispensing GP practices

Although not listed as a pharmaceutical service within the regulations, Dispensing Review on the Use of Medicines (DRUMs) may be provided by a dispensing GP practice which has opted to provide the Dispensing Services Quality Scheme (DSQS) The DSQS is a service annually commissioned by NHS England, optional for dispensing GP practices to provide. A DRUM is a face-to-face review with the patient to find out their compliance and agreement with their prescribed medicines. It will help to identify any problems they may be having. The dispensing GP practices in South Gloucestershire were sent a dispensing GP practice survey to complete in June / July 2014. Both dispensing GP practices completed the survey, for all sites from which dispensing GP practices confirmed they are able to provide DRUMs. NHS England confirms that all four sites participated in the DSQS scheme in 2013/14 and conducted DRUMs. Other information provided from the dispensing GP practices survey is listed in Table 16.

	Close Farm	Three	Shires Medical Pr	actice
	surgery	Marshfield surgery	Pucklechurch surgery	Wick surgery
Consultation room	Fully accessible with computer	Fully accessible with computer	Fully accessible with computer	Fully accessible with computer
Delivery service	Weekday delivery service	Delivery service - restricted on need	Delivery service - restricted on need	Delivery service - restricted on need
Access for people in rural areas	Locked box for drop off / collection	Late evening opening. Medicines available to pick up from one of the sites of the Three Shires practice, for patients registered with the dispensing GP practice	Late evening opening. Medicines available to pick up from one of the sites of the Three Shires practice, for patients registered with the dispensing GP practice	Late evening opening. Medicines available to pick up from one of the sites of the Three Shires practice, for patients registered with the dispensing GP practice
Other services provided	Supervised consumption. Dosette boxes	Chlamydia screening, health promotion, Emergency contraception	Chlamydia screening, health promotion, Emergency contraception	Chlamydia screening, health promotion, Emergency contraception
Trained dispensing assistants/ pharmacy assistants	Yes	Yes	Yes	Yes
Open at lunchtime	Yes	Yes	Yes	Yes
Car-parking	Yes	Yes	Yes	Yes

4.2 Local authority commissioned services provided by community pharmacies in South Gloucestershire

South Gloucestershire Council commission the following services from community pharmacies:

- 1. Support to stop smoking service: Level 1 NRT supply, and Level 2 Advisor
- 2. Sexual health service: Chlamydia screening and treatment service and emergency contraception service
- 3. Supervised consumption service
- 4. Needle exchange service

Services 1 and 2 are also provided from other providers e.g. GP practices. A full list of services and providers can be found in Appendix A.

4.3 Clinical Commissioning Group commissioned services

South Gloucestershire Clinical Commissioning Group (CCG) do not currently commission any services from community pharmacies.

4.4 Other services provided from community pharmacies

As part of the community pharmacy survey, found in Appendix D, community pharmacies were asked to indicate against a range of other services which they currently provide, would be willing to provide or would not be willing to provide. A number of pharmacies indicated that they currently provide a number of these services. Apart from those services commissioned by the local authority, these services are not currently commissioned. Therefore any services are privately provided and funded.

4.5 Collection and delivery services

Both GP practices indicate that they provide a medicine delivery service (see Table 16 above). Delivery is based upon individual patient need and is a voluntary not a statutory service.

From the pharmacy contractor survey, only two community pharmacies indicated that they do not currently provide a service to collect prescriptions from surgeries.

All pharmacies, with the exception of seven (supermarket) pharmacies, indicate that they offer a prescription delivery service free of charge.

A number of pharmacies offering delivery, indicated that this is restricted to 'local areas', to restricted patients or to restricted areas.

4.6 Language services

A small number of community pharmacies indicated they have staff members who speak languages other than English. It is recognised that this would be dependent on that member of staff and therefore difficult to predict availability.

4.7 Services for less-abled people

As a requirement of the Equalities Act 2012, community pharmacies are required to make 'reasonable adjustments' to their services to ensure they are accessible by all equalities groups, including less-abled persons. From the community pharmacy contractor survey, two thirds of respondents have disabled car parking facilities available close to the premises and 76% have a consultation room which is accessible to wheelchair users. 85% of respondents were satisfied that access to the pharmacy complies with the Equalities Act. Less than one in five pharmacies reported unable to provide printed information in easy-read, and / or large print and / or braille formats.

4.8 Electronic prescription service

Many GP practices are now able to transmit prescriptions electronically to a pharmaceutical service provider (community pharmacy or DAC). This system is known as EPS Release 2 and means that the patient no longer needs to obtain a paper prescription and present it at their pharmacy for dispensing. Electronic prescriptions are sent directly to the provider nominated by the patient. GP practices who provide this service are only able to transmit electronic prescriptions to a pharmacy who has a dispensing system enabled to receive electronic ('Release 2') 98% of respondents to the community pharmacy contractor prescriptions. questionnaire report that they have a system which is compliant to receive electronic prescriptions, with a further 2% unsure. Data available on which pharmacies in England are enabled to offer the EPS is available from NHS Choices⁴¹. Appendix A contains information (correct as 24th October 2014) from the NHS choices website showing that 100% of pharmacies in South Gloucestershire HWB area are enabled to provide the EPS.

⁴¹ NHS Choices website: <u>http://www.nhs.uk/Service-Search/Pharmacy/LocationSearch/10</u>

Section 5: Feedback on pharmaceutical service provision

The Pharmaceutical Regulations, 2013³ contain a list of persons who must be consulted on the PNA. These are listed in Appendix G. The Regulations³ state that these persons must be consulted at least once during the process of undertaking the assessment on a draft PNA.

As listed in Section 1.4, in addition to consulting on the draft PNA, the PNA Steering Group decided to request for feedback on pharmaceutical service provision from the public, pharmacy contractors and dispensing GP contractors.

5.1 Dispensing GP practice questionnaire

A copy of the dispensing GP practice questionnaire (Appendix E) was sent to all 4 practices in June 2014. All 4 dispensing GP practices in South Gloucestershire fully completed and returned the dispensing GP practice questionnaire. The results of the questionnaires were used within the analysis in Sections 3 and 4. A full copy of the results of the dispensing GP practice questionnaires is available on request from South Gloucestershire Council.

5.2 Pharmacy contractor questionnaire

A copy of the pharmacy contractor questionnaire (Appendix D) was circulated to all pharmacy contractors within South Gloucestershire with the aid of Avon Local Pharmaceutical Committee. 100% of contractors completed and returned the questionnaire, and the results were used within the analysis and recommendations of the final PNA. A full copy of the results from the pharmacy contractor questionnaire is available on request from South Gloucestershire Council.

5.3 Public survey

A public survey about pharmacy provision was developed (Appendix C) and compiled by South Gloucestershire PNA Steering Group. This was circulated by the local authority Consultation Lead to a range of stakeholders listed below and supported by media releases, social media campaigns and other communications to raise awareness of and promote participation in the consultation.

- South Gloucestershire Councillors
- parish and town councils in South Gloucestershire
- a range of sheltered housing schemes and homes for older people
- South Gloucestershire Council staff
- South Gloucestershire Youth Forum
- South Gloucestershire Equality Forum and Disability Equality Forum
- Safer Stronger Community Groups
- Priority Neighbourhood Steering Groups
- South Gloucestershire Welfare Advice Network

- Health Watch South Gloucestershire
- North Bristol NHS Trust
- University Hospital NHS Trust
- Avon and Wiltshire Mental Health Trust
- South Gloucestershire NHS Clinical Commissioning Group
- GP Surgeries in South Gloucestershire
- South Gloucestershire Libraries, contact centre and One Stop Shops
- South Gloucestershire Health and Wellbeing Board
- a range of voluntary and community sector organisations including: CVS South Gloucestershire, Southern Brooks Partnership, Chase and Kings Forest Project, Age Concern, Over 50's Forum, WeCIL, Care Forum, South Gloucestershire Parent Carer Forum.

A total of 210 surveys were received. A summary of the results can be found in Appendix J.

A separate survey was used to engage the traveller community about pharmacy services. This was distributed by the Specialist Health Visitor for travellers working in South Gloucestershire. The findings are presented in Appendix J. No access issues to pharmaceutical services were found in this group.

A further follow up was done with the under 16's and over 75 populations during the course of the consultation.

					Se	ex (%)											
		Male				Fem	ale		F	Prefer n	ot to say						
	:	58.1%				41.4	!%			0.8	5%						
					Ag	ge (%)											
U16	16-24	25-34	35-44	45-5	54	55-64	65-74			85+	Prefer not to say						
2.4%	3.9%	6.8%	10.1%	15.0	%	20.8%	30.0%			.0% 9.2		9.2		0% 9.2		0% 9.2	
			111	ness	or	disability	(%)?										
		Yes				No)		F	Prefer n	ot to say						
	51.5% 44.1%						%			4.4	4%						
				Eth	nnic	origin (%	6)										
Arab										0%							
Asian	/ Asian	British -	Banglad	eshi				0%									
Asian	/ Asian	British -	Indian							0%							
Asian	/ Asian	British -	Pakistar	ni			0%										
Asian	/ Asian	British -	Chinese	!						0%							
Asian	/ Asian	British -	Other (p	lease	sta	te)				0%							
Black	/ Africar	n / Carib	bean / B	lack E	Britis	sh - Africa	n			0%							
Black	/ African	/ Caribl	pean / Bla	ack Br	ritisł	n - Caribb	ean			0%							
Black	/ Africar	n / Carib	bean / B	lack E	Britis	sh - Other				0%							
Gypsy or traveller of Irish Heritage*									0%								
Mixed	/ Multip	le Ethni	c Groups	s - Wh	nite	and Asiar)			0.5%							
Mixed Africa		ole Ethr	nic Group	os - V	Nhit	te and Bl	ack			0%							

Table 17 - Demographic analysis of the 210 respondents

Ethnic origin (%)								
Mixed / Multiple Ethnic Groups – White and Black Caribbean	0%							
Mixed / Multiple Ethnic Groups – Other	0%							
White – English / Welsh / Scottish / Northern Irish / British	87%							
White – Irish	1%							
White – Other	3%							
Other ethnic group	1.5%							
Prefer not to say	7%							

*Responses were received by the specialist health visitor questionnaire for the traveller community

5.4 Consultation on the draft PNA

As required by the Regulations³, a consultation was undertaken for 60 days on the draft PNA. There were 44 responses received to the consultation. A summary of the responses can be found in Appendix H. The responses to consultation were considered by the PNA Steering Group, and revisions made to the draft PNA to produce this final PNA. A summary of the revisions made following the consultation can be found in Appendix I.

Section 6: Analysis of health needs and pharmaceutical service provision

As per Schedule 1 of the 2013 Pharmaceutical Services Regulations³, South Gloucestershire HWB has identified necessary services as essential services and advanced services as required by Paragraphs 1 and 3 of Schedule 1 to the Regulations.

South Gloucestershire HWB has identified enhanced services as pharmaceutical services which secure improvements or better access, or have contributed towards meeting the need for pharmaceutical services in the area of the HWB.

South Gloucestershire HWB has identified locally commissioned services which secure improvements or better access, or have contributed towards meeting the need for pharmaceutical services in the area of the HWB.

6.1 Localities within South Gloucestershire

As described within Section 1.5, the PNA Steering Group decided that the South Gloucestershire HWB PNA should be divided into three localities - Severnvale, Kingswood and Yate. Most health data is available at this level and the previous PNA used these localities effectively.

Each locality has pockets of marked health inequalities. These areas have been described by the council as Priority Neighbourhoods. This chapter analyses the health needs of each of the localities of South Gloucestershire and considers the pharmaceutical service provision.

6.2 Severnvale locality

6.2.1 Necessary services: current provision

Appendix A and Map A show the providers of pharmaceutical services both in and around Severnvale locality. There are 21 community pharmacy providers in Severnvale locality for a registered GP population of just over 95,000. This equates to an average of 22 pharmacies per 100,000 population. 99.98% of the population of Severnvale locality have an average travel time to a community pharmacy of not more than 20 minutes. Public transport and walking access times to a community pharmacy are greater than the other localities. Twelve pharmacies are open after 6pm and are well spread throughout the locality. Seven pharmacies are open on Sunday, although there are no pharmacies open on Sunday in the northern part of the locality. There is widespread access to the advanced services of MURs and NMS and there are a small number of pharmacies providing stoma customisation and AURs.

The Specialist (Palliative Care) Drugs service is provided by Asda, Patchway which has extended opening into the weekday evenings, Saturday and Sunday and also has good transport links.

The southern parts of Severnvale border with Bristol HWB area where there are a number of pharmacies within easy access. Northern parts of Severnvale border with rural Gloucestershire HWB area and nearby pharmacies in Wooton-under-Edge, Cam and Dursley are accessible by car and limited public transport.

Severnvale locality contains almost double the number of school-age children whose first spoken language is not English (Table 5) and the wards with the highest density of BME communities. A small number of pharmacies responded to their pharmacy survey indicating that they had staff able to speak alternative languages. Under the essential services of the pharmacy contract, community pharmacies are required to provide assurance to NHS England that their staff have an awareness of equality and diversity and have taken necessary adjustments to ensure services are accessible by all.

The publicly provided gypsy and traveller site in Patchway is well provided by nearby community pharmacies, many of whom are open at weekends and weekday evenings.

6.2.2 Necessary services: gaps in provision

Significant housing developments are planned in Severnvale, further details of which are provided in Section 2.3.3. Of note are the current developments in Charlton Hayes, Cribbs / Patchway, and Harry Stoke. It is anticipated that current pharmaceutical service provision from existing pharmacies will be able to cope with the demand from the new populations for the coming few years. This PNA will be reviewed by 2018 (at the latest) and the development completion dates for these sites run beyond this time. The Charlton Hayes development and Harry Stoke development will provide new, sizeable neighbourhoods. Both have pharmaceutical service provision in adjacent, existing neighbourhoods.

Development of the Cribbs / Patchway new neighbourhood is anticipated to be phased over a period up until 2026/27. The vast area covered, and density of housing in this new neighbourhood, will require significant community infrastructure including healthcare provision. NHS England and South Gloucestershire Council are developing plans for primary care services, including a GP practice, although it is understood this service will not be provided during the life of this PNA. Convenience and accessibility of pharmacy services co-located near or within GP practices have already been noted. It would, therefore, be prudent that a community pharmacy is considered as a gap in provision of necessary services at the point the GP practice in Cribbs / Patchway is being developed. Provision in or near to the practice should be made for a community pharmacy and the PNA (at the time the development is commenced) should note the necessary service gap in provision, allowing applications to be made to meet the need. This will be outside the lifetime of this PNA.

No gaps in provision of necessary services have been identified for Severnvale locality.

6.2.3 Other relevant services: current provision

There are two prisons in Severnvale. Pharmacy services are provided by a local community pharmacy under contract by NHS England. Medical services are provided in-house by a range of other providers including a primary care healthcare provider (GP practice) and mental health services provider.

It has already been noted that the Priority Neighbourhoods of Filton and Patchway have teenage pregnancies twice as high as the South Gloucestershire average. The supply of free condoms is not currently routinely provided through all community pharmacies, nor is the provision of ongoing contraception. From September 2014 all pharmacies providing free EHC to young people will also provide some condoms. If the need to reduce teenage pregnancy is a priority for the commissioners, there are community pharmacy-led schemes, such as condom supply and 'first contraceptive pill issue' which could be provided in more pharmacies to reduce the pregnancy and STI rates.

Although smoking prevalence in South Gloucestershire is lower than nationally, it is still responsible for about 320 annual deaths in the HWB area. A number of pharmacies in Severnvale locality listed in Appendix A are commissioned by the local authority to provide services to support people to stop smoking.

Community pharmacy prescription delivery services are available from almost all providers in Severnvale. This will remain invaluable to many residents, in particular those who are housebound or do not have access to their own transport.

Residents in Severnvale have access to pharmacy services provided by a number of urgent care providers. The Thornbury and neighbouring Southmead hospitals provide medicines to in-patients and out-patients. There is also a minor injuries unit (MIU) at Southmead, as well as Yate, which provide limited medicines to patients attending treatment at the MIU. The continuation of these provisions, in addition to the GP 'Out of Hours' service, is essential for the provision of urgent medicines.

6.2.4 Improvements and better access: gaps in provision

There are no pharmacies open in the Severnvale locality between midnight and 7am weekdays and Saturdays, or between 4pm Sundays and 7am on Mondays. Provision on some bank holidays in some areas, in particular the area around Thornbury, is varied. Based upon the consultation responses, results of the patient survey, population density and access to pharmacies across the HWB area, it is unclear if there is a gap in service which would equate to the need for access to essential services outside normal hours in this locality. The HWB will monitor the uptake and need for necessary services and will consider the impact of any changes in this locality in the future which may provide evidence that a need exists.

As defined by Map F, pockets of deprivation exist in Patchway and Filton wards in the Severnvale locality. Services should be considered from community pharmacies which improve uptake, access or health inequalities. In areas of deprivation, access to treatments for minor ailments or emergency supply of medicines may be sought through patient's GPs or 'Out of Hours' providers, rather than bought over the counter. The Joint Health and Wellbeing Strategy⁸ recognise that there is a growing impact on access to urgent care provision, which varies to that seen nationally. Targeted provision of a community pharmacy-based minor ailments service and emergency supply of medicines service in Priority Neighbourhoods could reduce pressure on (and cost of) general practice and urgent care providers; whilst increasing access to medicines and treatment and reducing the inequalities for people from areas of low deprivation.

6.2.5 Other services

A number of community pharmacy providers responded to the survey to indicate that they provide a range of private services. Diagnostic services (for example, cholesterol checks and diabetes checks) and 'flu' vaccination services were common examples. These services will help improve access for many, particularly from pharmacies providing these services throughout extended opening hours.

It has already been noted that the Priority Neighbourhoods of Filton and Patchway have teenage pregnancies twice as high as the South Gloucestershire average. The supply of free condoms is not currently provided through community pharmacies nor is the provision of ongoing contraception. If the need to reduce teenage pregnancy is a priority for the commissioners, there are community pharmacy-led schemes such as condom supply and 'first contraceptive pill issue' which could be provided to reduce the pregnancy rates.

Emergency admissions of care home residents to hospitals have been noted in the Joint Health and Wellbeing Strategy⁸ as a priority issue in South Gloucestershire and there are a number of care homes in the Severnvale locality supplied medicines by local community pharmacies. Schemes to optimise medicine use in care home residents could be considered to target this priority.

6.3 Yate locality

6.3.1 Necessary services: current provision

Yate locality has 12 community pharmacies and one dispensing GP practice across three sites for a population of just over 71,000. The average number of community pharmacies is 16.8 per 100,000. Over 96% of patients are eligible for dispensing by their GP practice and 99.95% have access to a community pharmacy or dispensing GP practice within a 20 minute drive. Yate locality is the most sparsely populated locality in South Gloucestershire.

Walking times and public transport travel times to a community pharmacy or dispensing GP practice are lower than those seen for Kingswood locality, but similar to Severnvale locality. Seven out of the 12 community pharmacies are open after 6pm on a weekday, 11 out of 12 are open on Saturday and four are open on Sundays. The high proportion of pharmacies open late and / or at weekends is relevant, as Yate locality has a higher proportion of working residents than South Gloucestershire as a whole. Advanced services are well provided for and the enhanced service of Specialist (Palliative Care) Drugs is provided by LloydsPharmacy, Courtside Surgery, Yate which is open late evenings, Saturdays and Sundays.

The locality borders with rural Gloucestershire in the north, Wiltshire in the east and Bath and North East Somerset to the south. Cross-border provision is provided within the market towns of Keynsham, Tetbury and Chippenham where there are a number of pharmacies (some of which are open late and at weekends) and limited public transport links.

There is one publicly provided gypsy and traveller site near Winterbourne which is well provided by nearby community pharmacies. There is one privately owned gypsy and traveller site in Pucklechurch which is well provided by nearby pharmacies.

6.3.2 Necessary services: gaps in provision

No gaps in provision of necessary services have been identified for Yate locality.

6.3.3 Other relevant services: current provision

HMP and Youth Offender Institute (YOI) Pucklechurch is a prison in Kingswood locality. Pharmacy services are provided by a local community pharmacy under contract by NHS England. Medical services are provided in-house by a range of other providers including a primary care healthcare provider (GP practice) and mental health services provider.

Teenage conceptions in parts of Yate are double that of the South Gloucestershire average. Appendix A lists the community pharmacies who are commissioned by the local authority to provide sexual health services, including the provision of emergency hormonal contraception.

Although smoking prevalence in South Gloucestershire is lower than nationally, it is still responsible for about 320 annual deaths in the HWB area. A number of pharmacies in Yate locality listed in Appendix A are commissioned by the local authority to provide services to support people to stop smoking.

All the dispensing GP practices, and almost all community pharmacies, in Yate locality report that they offer a private prescription delivery service. This is important, given that the locality has the highest proportion of residents aged over 65 in South Gloucestershire, the highest proportion of deprived residents and almost 25% of the population of the locality live in a rural area.

Residents in Yate locality have access to pharmacy services provided by a number of urgent care providers. There is a MIU at Yate, which provides limited medicines to patients attending treatment at the MIU. Additional MIUs are available at the neighbouring Southmead (in Bristol) and Chippenham (In Wiltshire). The neighbouring Southmead hospital, Chippenham hospital and Bath Royal United hospitals provide medicines to in-patients and out-patients. The continuation of these provisions is essential for the provision of urgent medicines, in addition to the GP 'Out of Hours' service.

6.3.4 Improvements and better access: gaps in provision

There are no pharmacies open in Yate locality between midnight and 7am weekdays and Saturdays, or between 4pm Sundays and 7am on Mondays. Provision on some bank holidays in some areas is varied. Based upon the consultation responses, results of the patient survey, population density and access to pharmacies across the HWB area, it is unclear if there is a gap in service which would equate to the need for access to essential services outside normal hours in this locality. The HWB will monitor the uptake and need for necessary services and will consider the impact of any changes in this locality in the future which may provide evidence that a need exists.

6.3.5 Other services

A number of community pharmacy providers responded to the survey to indicate that they provide a range of private services. Diagnostic services (for example, cholesterol checks and diabetes checks) and 'flu' vaccination services were common examples. These services will help improve access for many, particularly from pharmacies providing these services throughout extended opening hours, given the high percentage of working residents living in Yate locality.

Emergency admissions of care home residents to hospitals have been noted in the Joint Health and Wellbeing Strategy⁸ as a priority issue in South Gloucestershire and there are a number of care homes in the Yate locality supplied medicines by local community pharmacies. Schemes to optimise medicine use in care home residents could be considered to target this priority.

6.4 Kingswood locality

6.4.1 Necessary services: current provision

Kingswood has a registered GP population of almost 110,000, with 22 community pharmacies and one dispensing GP practice. Compared to the other localities in South Gloucestershire, it has a higher population of older people and lower population of working people. It has the lowest average travel times to a community pharmacy or dispensing GP practice than any of the other localities in South Gloucestershire with 100% of residents having up to a 20 minute average drive time.

Over 99% of residents can access a community pharmacy or dispensing GP practice within, on average, 20 minutes by public transport and over 90% can access a community pharmacy or dispensing GP practice within, on average, a 20 minute walk.

Ten out of the 22 community pharmacies are open after 6pm weekdays, 18 are open on a Saturday and five are open on a Sunday.

Kingswood locality is bordered to the south by Bath and North East Somerset and to the west by Bristol. Within easy private or public transport commuting distance are a number of community pharmacy providers in Keynsham and east Bristol, many are open evenings and weekends.

Most pharmacies provide MURs and the NMS. This is of particular relevance as Kingswood locality has higher than average rates of diabetes, coronary heart disease and hypertension than the other localities. A couple of pharmacies provide stoma customisation and AURs.

Boots at Longwell Green provide the enhanced service of Specialist (Palliative Care) Drugs and are open late in the weekday evening, Saturday and Sunday.

There are three Priority Neighbourhoods with relatively high levels of deprivation and healthcare needs: Kingswood, Staple Hill and Cadbury Heath.

There are two local pharmaceutical service providers, Ideal Pharmacy in Warmley and Jhoots, Pool Road, Kingswood, which provide all essential and advanced services and also provide locally commissioned public health services. The Essential Small Pharmacy (ESPLPS) contract is currently planned to expire at the end of March 2015. Both providers have been invited to return to the national pharmaceutical list from 1st April 2015.

Since the last PNA in 2011, dispensing GP services have ceased from Oldland Surgery. This practice provided dispensing services to only a small number of patients. Provision continues to be available from the surrounding community pharmacies in Oldland Common, Cadbury Heath and Longwell Green, many of whom offer a delivery service and have extended opening hours. Close Farm Surgery continues to provide a dispensing service. There has been no resultant gap in provision identified as a result of the cessation of dispensing services from this dispensing GP practice.

6.4.2 Necessary services: gaps in provision

No gaps in provision of necessary services have been identified in Kingswood locality.

6.4.3 Other relevant services: current provision

Teenage pregnancy rates are higher in Kingswood than the other two localities.

A locally commissioned service for the supply of emergency hormonal contraception with advice, condoms and signposting is provided by the majority of community pharmacies in South Gloucestershire, as listed in Appendix A.

Although smoking prevalence in South Gloucestershire is lower than nationally, it is still responsible for about 320 annual deaths in the HWB area. A number of pharmacies in Severnvale locality, listed in Appendix A, are commissioned by the local authority to provide services to support people to stop smoking.

A prescription collection and delivery service is offered by the dispensing GP practice and the majority of community pharmacies in Kingswood locality. This will be invaluable to those residents who are housebound or have no means of transport.

Residents in Kingswood locality have access to pharmacy services provided by a number of urgent care providers. There is a MUI in the neighbouring localities in Southmead, Yate, Bath and Bristol city centres which provides limited medicines to patients attending for treatment. The neighbouring Southmead, Bristol Royal Infirmary and Bath Royal United hospitals provide medicines to in-patients and out-patients. The continuation of these provisions is essential for the provision of urgent medicines in addition to the GP 'Out of Hours' service.

Vinney Green is a Young Persons' accommodation centre in Emersons Green. Pharmacy services are provided by local community pharmacies. Medical services are provided in-house by a range of visiting providers including a primary care healthcare provider (GP practice) and mental health services provider.

6.4.4 Improvements and better access: gaps in provision

There are no pharmacies open in Kingswood locality between midnight and 7am weekdays and Saturdays, or between 4pm Sundays and 7am on Mondays. Provision on some bank holidays in some areas is varied. Based upon the consultation responses, results of the patient survey, population density and access to pharmacies across the HWB area, it is unclear if there is a gap in service which would equate to the need for access to essential services outside normal hours in this locality. The HWB will monitor the uptake and need for necessary services and will consider the impact of any changes in this locality in the future which may provide evidence that a need exists.

6.4.5 Other services

A number of community pharmacy providers responded to the survey to indicate that they provide a range of private services. Diagnostic services (for example, cholesterol checks and diabetes checks) and 'flu' vaccination services were common examples. These services will help improve access for many, particularly from pharmacies providing these services throughout extended opening hours, given the high percentage of working residents living in Kingswood locality.

Emergency admissions of care home residents to hospitals have been noted in the Joint Health and Wellbeing Strategy⁸ as a priority issue in South Gloucestershire, and there are a number of care homes in the Kingswood locality supplied medicines from local community pharmacies. Schemes to optimise medicine use in care home residents could be considered to target this priority issue.

Section 7: Summary

The HWB has considered the following when assessing the provision of necessary services in the HWB area and each of the three PNA localities:

- the priorities identified in South Gloucestershire's HWB Strategy and JSNA⁴ (Section 2.2)
- population density per square km by Census 2011 Output Area and the relative location of pharmacy premises (Map C)
- Index of Multiple Deprivation (IMD) and deprivation ranges compared to the relative location of pharmacy premises (Map F)
- BME % population compared to the relative location of pharmacy premises (Map G and Figure 4)
- percentage of population of South Gloucestershire HWB and the average daytime travel times to nearest community pharmacy (Figure 15)
- using average drive time, over 92% of residents can access a pharmacy by car within five minutes (Map D and Figure 15)
- using average public transport times, over 95% of residents can access a pharmacy within 20 minutes (Figure 15)
- using average walking times, 61% of residents can access a pharmacy within 20 minutes increasing to 90% of residents within 30 minutes (Map E and Figure 15)
- the location of pharmacies within each of the three PNA localities and across the whole South Gloucestershire HWB area (Map A)
- the number, distribution and opening times of pharmacies within each of the three PNA localities and across the whole South Gloucestershire HWB area (Appendix A and Map B)
- the range of services provided by pharmacies in the each of the three PNA localities and the whole South Gloucestershire HWB (Appendix A)
- the average number of items per month per pharmacy dispensed within South Gloucestershire HWB area (Table 10)
- results of the patient survey (Appendix J)
- results of the consultation on the draft PNA (Appendix H)
- key housing developments sites within South Gloucestershire HWB area (Table 4)
- projected population growth (Section 2.3.3)
- findings from pharmacy contractor survey

• findings from dispensing doctors survey

South Gloucestershire is a mixed urban and rural area with a population of about 269,107. The population has grown by over 23% over the last 25 years and is predicted to continue to expand to about 289,500 by 2021. It is a relatively affluent area though a number of pockets of deprivation exist. Six areas, defined as Priority Neighbourhoods, have been identified due to their relative deprivation and marked health needs: Kingswood, Cadbury Heath, Staple Hill, Filton, Patchway, and West Yate / Doddington. South Gloucestershire has a number of traveller sites, three prisons and small pockets of BME communities. No gaps in necessary pharmaceutical services provision have been identified for specific populations in South Gloucestershire; however more public feedback is welcome from specific populations as no significant response to the patient survey had been received.

There are 55 community pharmacies and two dispensing GP practices operating at four sites which are well distributed throughout the main population areas. 53% of pharmacies are open after 6pm, 78% of pharmacies are open Saturdays and 31% are open on Sundays. All dispensing GP practices are open at least one weekday evening. Over 99% of the South Gloucestershire population have an average travel time of no more than 20 minutes to a community pharmacy or dispensing GP practice. The average numbers of community pharmacies per 100,000 population in South Gloucestershire is between that found nationally and regionally. There is a higher ratio of independents to multiples, providing a good choice of providers.

All dispensing GP practices, and the majority of community pharmacies, provide a prescription delivery service. This is essential for those residents who are housebound or unable to access community pharmacies or dispensing GP practices.

A number of large housing developments are planned or already under way and will contribute significantly to the predicted population growth. Many of these developments are planned to complete over the next ten to 15 years. Current pharmaceutical service providers have capacity to expand their service provision as communities grow. In addition, there are about 200 internet pharmacies in England providing pharmaceutical services nationally through remote means. As technologies develop, there is an opportunity to further embrace services provided by internet pharmacies.

The Charlton Hayes and Cribbs / Patchway developments will provide a concentrated expansion of new housing developments over the coming decade. It is envisaged that these new communities will require substantial community infrastructure planning.

It is anticipated that there will be the need for future additional pharmaceutical service provision for these communities, but this need will not be until a later, future stage of the development plan; beyond the duration of consideration of this PNA.

No further gaps in pharmaceutical service provision have been identified.

Section 8: Glossary

- A+E Accident and Emergency
- AURs Appliance Use Reviews
- BME Black and Minority Ethnic
- BNSSG Bristol, North Somerset, Somerset and South Gloucestershire
- CCGs Clinical Commissioning Groups
- COPD Chronic obstructive pulmonary disease
- CVD Cardiovascular disease
- **DACs Dispensing Appliance Contractors**
- DAAT- Drug and Alcohol Action Team
- DRUMs Dispensing Review on the Use of Medicines
- DSQS Dispensing Services Quality Scheme
- ESLPS Essential Small Pharmacies Local Pharmacy Scheme
- HMP Her Majesty's Prison
- HWBs Health and Wellbeing Boards
- JSNA Joint Strategic Needs Assessment
- LCS Locally Commissioned Services
- LPS Local Pharmaceutical Service
- LSOAs Lower Super Output Areas
- MIU Minor Injuries Unit
- MURs Medicines Use Reviews
- NMS New Medicines Service
- OCUs Opiate and crack users (OCUs)
- PCTs Primary Care Trusts
- **PNA Pharmaceutical Needs Assessment**
- **PSNC Pharmaceutical Services Negotiating Committee**
- SC Stoma Appliance Customisation
- UWE University of the West of England
- WeCL- West of England Centre for Inclusive Living

Appendix A: List of pharmaceutical service providers in South Gloucestershire HWB area

Severnvale l	evernvale locality					anced /ices	Local authority - locally commissioned services						
Contract Name	Trading Name	Address	Opening Hours	Specialist (Palliative Care) Drugs	Medicines Use Reviews	New Medicines Service	Sexual Health Service (Emergency contraception, Chlamydia screening and treatment)	Supervised consumption	Needle exchange	Support to Stop Smoking - Level 1 (NRT supply)	Support to Stop Smoking - Level 2 (Advisor)		
Community Pharr	nacy		I				1				I		
Asda Stores Ltd	Asda Pharmacy	Highwood Lane, Patchway, Bristol, BS34 5TL	Mon-Fri 09:00-13:00, 14:00-22:00; Sat 08:30-13:00, 14:00-22:00; Sun 10:00-13:00, 13:00-16:00	Y	Y	Y	Y	Y	Y	Y	Y		
Assan Pharmacy (South West) Limited	Cohen Chemist	8 Eastland Road, Thornbury, Bristol, BS35 1DS	Mon-Fri 09:00-13:00, 14:00-18:00	N	Y	Y	N	Ν	Ν	Y	Y		
Boots UK Ltd	Boots Pharmacy (2089)	116 The Mall, Cribbs Causeway Regional Shopping Centre, Patchway, Bristol, BS34 5UP	Mon-Fri 08:30-21:00; Sat 08:30-20:00; Sun 11:00-17:00	Ν	Y	Y	Y	Y	Ν	Y	Y		

Severnvale lo	Severnvale locality					inced vices	Local authority - locally commissioned services						
Contract Name	Trading Name	Address	Opening Hours	Specialist (Palliative Care) Drugs	Medicines Use Reviews	New Medicines Service	Sexual Health Service (Emergency contraception, Chlamydia screening and treatment)	Supervised consumption	Needle exchange	Support to Stop Smoking - Level 1 (NRT supply)	Support to Stop Smoking - Level 2 (Advisor)		
Boots UK Ltd	Boots Pharmacy (1035)	Unit 1 Willow Brook Centre, Bradley Stoke Way, Bradley Stoke, Bristol, BS32 8EF	Mon-Sat 08:00-00:00; Sun 10:00-16:00	N	Y	Y	Y	Y	N	Ν	N		
Boots UK Ltd	Boots Pharmacy (491)	43 High Street, Thornbury, Bristol, BS35 2AR	Mon-Sat 08:30-17:30	Ν	Y	Y	Y	Y	N	Ν	N		
Bradley Stoke Ltd	Bradley Stoke Pharmacy	Brook Way, Bradley Stoke, Bristol, BS32 9DS	Mon-Fri 07:00-23:00; Sat 08:00-20:00; Sun 10:00-18:00	Ν	Y	Ν	Y	Y	Y	Ν	Ν		
Day Lewis plc	Day Lewis Pharmacy	13 Gloucester Road North, Filton Park, Bristol, BS7 0SG	Mon-Fri 09:00-18:00	Ν	Y	Y	N	Y	N	Y	Y		
Fatz Ltd	Pilning Community Pharmacy	Pilning Surgery, Northwick Road, Pilning, Bristol, BS35 4JE	Mon, Tue, Wed, Fri 08:00-13:00, 14:00-18:00; Thur 08:00-13:00, 14:00-16:00	N	Y	Y	N	Ν	Ν	N	N		

Severnvale lo	evernvale locality					inced vices	Local authority - locally commissioned services						
Contract Name	Trading Name	Address	Opening Hours	Specialist (Palliative Care) Drugs	Medicines Use Reviews	New Medicines Service	Sexual Health Service (Emergency contraception, Chlamydia screening and treatment)	Supervised consumption	Needle exchange	Support to Stop Smoking - Level 1 (NRT supply)	Support to Stop Smoking - Level 2 (Advisor)		
Hayfield Pharmacy Ltd	H R Hobbs	508 Filton Avenue, Horfield, Bristol, BS7 0QE	Mon-Fri 08:45-19:15; Sat 09:00-13:00	Ν	N	N	Ν	N	N	Ν	N		
Bradley Stoke Bristol Ltd	Ferndene Pharmacy	Aldi Store, Ferndene, Bradley Stoke, Bristol, BS32 9DF	Mon-Fri 09:00-18:00	Ν	Y	Y	Y	Y	N	Y	Y		
Jhoots Healthcare Ltd	Jhoots Pharmacy	6 Ratcliffe Drive, Stoke Gifford, Bristol, BS34 8UE	Mon-Fri 08:30-13:00, 14:00-18:30; Sat 09:00-13:00	Ν	Y	Y	Y	Y	N	Ν	N		
Lloyds Pharmacy Ltd	LloydsPharmacy (6555)	Coniston Medical Practice, The Parade, Patchway, Bristol, BS34 5TF	Mon-Fri 09:00-19:00; Sat 09:00-13:00	Ν	Y	Y	N	Y	Y	Ν	N		
Lloyds Pharmacy Ltd	LloydsPharmacy (6261)	47 High Street, Thornbury, Bristol, BS35 2AR	Mon-Sat 09:00-17:30	Ν	Y	Y	Y	Y	Y	Ν	Ν		

Severnvale l	Severnvale locality						Local authority - locally commissioned services						
Contract Name	Trading Name	Address	Opening Hours	Specialist (Palliative Care) Drugs	Medicines Use Reviews	New Medicines Service	Sexual Health Service (Emergency contraception, Chlamydia screening and treatment)	Supervised consumption	Needle exchange	Support to Stop Smoking - Level 1 (NRT supply)	Support to Stop Smoking - Level 2 (Advisor)		
Lloyds Pharmacy Ltd	LloydsPharmacy (6455)	Concorde Medical Centre, Braydon Avenue, Little Stoke, Bristol, BS34 6BQ	Mon 08:30-20:00; Tue-Fri 08:30-18:30; Sat 09:00-13:00	Ν	Y	Y	Y	Y	N	Ν	N		
Lloyds Pharmacy Ltd	LloydsPharmacy (0751)	8-10 Horseshoe Lane, Thornbury, Bristol, BS35 2AZ	Mon-Fri 08:30-18:30; Sat 09:00-17:30	Ν	Y	Y	Y	N	N	Y	Y		
Matrix Primary Healthcare Ltd	Alveston Pharmacy	2 Greenhill Parade, Alveston, Bristol, BS35 3LU	Mon-Fri 09:00-18:00; Sat 09:00-13:00	N	Y	Y	N	Y	N	Y	Y		
Pasab Ltd	Jhoots Pharmacy	Conygre Medical Centre, 3 Conygre Road, Filton, Bristol, BS34 7DA	Mon-Fri 08:30-12:15, 13:30-18:00	Ν	Y	Y	N	Y	N	Y	Y		
Pasab Ltd	Jhoots Pharmacy	108 Rodway Road, Patchway, Bristol, BS34 5PG	Mon-Fri 09:00-13:00, 14:00-18:00	Ν	Y	Y	N	Y	N	Y	Y		

Severnvale lo	evernvale locality					anced /ices	Local authority - locally commissioned services						
Contract Name	Trading Name	Address	Opening Hours	Specialist (Palliative Care) Drugs	Medicines Use Reviews	New Medicines Service	Sexual Health Service (Emergency contraception, Chlamydia screening and treatment)	Supervised consumption	Needle exchange	Support to Stop Smoking - Level 1 (NRT supply)	Support to Stop Smoking - Level 2 (Advisor)		
Sainsburys Supermarkets Ltd	Sainsbury's Pharmacy	Fox Den Road, Filton, Stoke Gifford, Bristol, BS34 8SS	Mon-Sat 08:00-13:30, 14:00-20:00; Sun 10:00-13:30, 14:00-16:00	N	Y	Y	Y	Y	N	Y	Y		
Tesco Stores Ltd	Tesco In Store Pharmacy	Brook Way, Bradley Stoke, Bristol, BS32 8EF	Mon-Sat 08:00-13:30, 14:00-20:00; Sun 10:00-16:00	Y	Y	Y	Y	N	N	Y			
Wm Morrisons Supermarkets plc Pharmacy	Morrisons Pharmacy	Morrison's Pharmacy, Lysander Road, Cribbs Causeway, Bristol, BS10 7UD	Mon, Tue, Wed, Sat 08:30-20:00; Thur, Fri 08:30-21:00; Sun 10:00-16:00	Ν	Y	Y	Y	N	N	Y	Y		

Kingswood loca	ngswood locality					inced vices	Local authority - locally commissioned services						
Contract Name	Trading Name	Address	Opening Hours	Specialist (Palliative Care) Drugs	Medicines Use Reviews	New Medicines Service	Sexual Health Service (Emergency contraception, Chlamydia screening and treatment)	Supervised consumption	Needle exchange	Support to Stop Smoking - Level 1 (NRT supply)	Support to Stop Smoking - Level 2 (Advisor)		
Community Pharmacy	,												
Asda Stores Ltd	Asda Pharmacy	Craven Way, Longwell Green, Bristol, BS30 7DY	Mon 08:00-23:00; Tue-Fri 07:00-23:00; Sat 07:00-22:00; Sun 10:00-16:00	Ν	Y	N	Y	Ν	N	Y	Y		
Boots UK Ltd	Boots Pharmacy (1343)	Christchurch Family Medical Centre, North Street, Downend, Bristol, BS16 5SG	Mon-Fri 08:30-13:00, 14:00-18:30; Sat 09:00-12:00	Ν	Y	Y	N	Y	N	N	N		
Boots UK Ltd	Boots Pharmacy (473)	10-11 Kingschase Shopping Centre, Regent Street, Kingswood, Bristol, BS15 8LP	Mon-Sat 08:30-13:00, 14:00-17:30	N	Y	Y	Y	Y	N	Y	Y		
Boots UK Ltd	Boots Pharmacy	Unit 1a, Emersons Green Retail Centre, Emersons Way, Emersons Green, Bristol, BS16 7AE	Mon-Fri 08:30-20:00; Sat 08:30-19:00; Sun 10:30-16:30	N	Y	Y	Y	Y	N	Y	Y		

Kingswood loca	ngswood locality						Local authority - locally commissioned services					
Contract Name	Trading Name	Address	Opening Hours	Specialist (Palliative Care) Drugs	Medicines Use Reviews	New Medicines Service	Sexual Health Service (Emergency contraception, Chlamydia screening and treatment)	Supervised consumption	Needle exchange	Support to Stop Smoking - Level 1 (NRT supply)	Support to Stop Smoking - Level 2 (Advisor)	
Boots UK Ltd	Boots Pharmacy (5147)	98 High Street, Staple Hill, Bristol, BS16 5HL	Mon-Fri 09:00-18:00; Sat 09:00-17:30	N	Y	Y	Y	Y	Y	Y	Y	
Boots UK Ltd	Boots Pharmacy (6544)	Unit D, Gallagher Retail Park, Longwell Green, Bristol, BS30 7DY	Mon-Sat 07:30-00:00; Sun 10:30-16:30	Y	Y	Y	Y	Y	N	Y	Y	
Boots UK Ltd	Boots Pharmacy (6253)	1 School Road, Cadbury Heath, Bristol, BS30 8EN	Mon-Fri 09:00-13:00, 13:30-18:00; Sat 09:00-13:00	N	Y	Y	N	Y	Y	N	N	
D R Rosser Ltd	Westbourne Road Pharmacy	26 Westbourne Road, Downend, Bristol, BS16 6RX	Mon-Fri 09:00-17:30; Sat 09:00-13:00	N	Y	Y	Y	Y	Ν	Y	Y	
Dudley Taylor Pharmacies Ltd	Oldland Common Pharmacy	179 High Street, Oldland Common, Bristol, BS30 9QG	Mon 08:15-13:00, 14:00-19:00; Tue-Fri 08:15-13:00, 14:00-18:30; Sat 09:00-13:00	N	Y	Y	Y	Y	Ν	N	N	
Ellacombe Pharmacy Ltd	Ellacombe Pharmacy	24 Ellacombe Road, Longwell Green, Bristol, BS30 9BA	Mon-Fri 09:00-13:00, 14:15-17:00; Sat 09:00-13:00	N	Y	Y	N	Y	Ν	Y	Y	

Kingswood loca	lity	ngswood locality						Local authority - locally commissioned services					
Contract Name	Trading Name	Address	Opening Hours	Specialist (Palliative Care) Drugs	Medicines Use Reviews	New Medicines Service	Sexual Health Service (Emergency contraception, Chlamydia screening and treatment)	Supervised consumption	Needle exchange	Support to Stop Smoking - Level 1 (NRT supply)	Support to Stop Smoking - Level 2 (Advisor)		
Jhoots Healthcare Ltd	Jhoots Pharmacy	1c Pool Road, Kingswood, Bristol, BS15 1XL	Mon-Fri 09:00-13:00, 13:30-17:30	N	N	N	Ν	Ν	Ν	Ν	N		
Lloyds Pharmacy Ltd	LloydsPharmacy (7501)	Willow Surgery, Hill House Road, Downend, Bristol, BS16 5FJ	Mon-Fri 08:00-19:00; Sat 08:00-13:00	N	Y	Y	N	Ν	N	Y	Y		
My Globe Ltd	Ideal Pharmacy	1 High Street, Warmley, Bristol, BS15 4ND	Mon-Fri 09:00-13:00, 14:00-18:00	N	Y	Y	N	Y	N	Y	N		
National Co-Operative Chemists Ltd	Co-operative Pharmacy (200460)	10 Broad Street, Staple Hill, Bristol, BS16 5NX	Mon-Fri 08:45-18:00; Sat 08:45-17:00	N	Y	Y	Y	Y	N	Y	Y		
National Co-Operative Chemists Ltd	Co-operative Pharmacy (200733)	The Co-Op Food Store, Halls Road, Kingswood, Bristol, BS15 8JD	Mon-Fri 07:00-23:00; Sat 08:00-22:00; Sun 10:00-16:00	N	Y	Y	N	Ν	N	Y	Y		
National Co-Operative Chemists Ltd	Co-operative Pharmacy (200456)	Kingswood Health Centre, Alma Road, KIngswood, Bristol, BS15 4EJ	Mon-Fri 09:00-18:30; Sat 09:00-13:00	N	Y	Y	Y	Y	Y	Y	Y		

Kingswood local	lity			NHS England Enhanced Services	Und ced ced ced ces Medicines Use New Medicines Use Sexual Health Service Tocal antholicity Service New Medicines Use Reviews Service New Medicines Use Reviews Service Service Service Chlamydia screening and treatment) Needle exchange Needle exchange Support to Stop Smoking - Level 1 (NRT supply)						
Contract Name	Trading Name	Address	Opening Hours	Specialist (Palliative Care) Drugs	Medicines Use Reviews	New Medicines Service	Sexual Health Service (Emergency contraception, Chlamydia screening and treatment)	Supervised consumption	Needle exchange		Stop 2 (Ad
National Co-Operative Chemists Ltd	Co-operative Pharmacy (200455)	7 Badminton Road, Downend, Bristol, BS16 6BB	Mon-Fri 09:00-17:30; Sat 09:00-13:00	Ν	Y	Y	Y	Y	N	Y	Y
Oldara Ltd	Cleeve Wood Pharmacy	7 Cleeve Wood Road, Downend, Bristol, BS16 2SF	Mon-Fri 09:00-13:00, 14:00-17:30; Sat 09:00-13:00	Ν	Y	Y	Ν	Y	N	N	N
Sainsburys Supermarkets Ltd	Sainsbury's Pharmacy	Emersons Way, Emersons Green, Bristol, BS16 7AE	Mon-Fri 07:00-23:00; Sat 07:00-21:00; Sun 09:30-16:30	Ν	Y	Y	Y	Ν	N	Y	Y
Shaunak's Pharmacy Ltd	Shaunak's Pharmacy	123 - 125 High Street, Hanham, Bristol, BS15 3QY	Mon-Fri 09:00-18:00; Sat 09:00-17:30	Ν	Y	Y	Ν	Y	Ν	N	N
Shaunak's Pharmacy Ltd	Vantage Pharmacy	Hanham Health Centre, Whittucks Road, Hanham, Bristol, BS15 3HY	Mon-Fri 09:00-18:30	Ν	Y	Y	N	Ν	N	N	N
Targetgrange Ltd	Billing Pharmacy	5 Kingschase Shopping Centre, Regent Street, Kingswood, Bristol, BS15 8LP	Mon-Sat 09:00-17:30	Ν	N	N	Y	Y	N	N	N

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Kingswood locality						nced vices				- locally services	
Contract Name	Trading Name	Address	Opening Hours	Specialist (Palliative Care) Drugs	Medicines Use Reviews	New Medicines Service	Sexual Health Service (Emergency contraception, Chlamydia screening and treatment)	Supervised consumption	Needle exchange	Support to Stop Smoking - Level 1 (NRT supply)	Support to Stop Smoking - Level 2 (Advisor)
Dispensing GP Practice											
Close Farm Surgery	Close Farm Surgery	47 Victoria Road, North Common, Bristol, BS30 5JZ	Mon-Fri 08:30-18:30	Ν	Ν	Ν	Ν	Ν	Ν	Ν	N

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Yate locality	NHS England Enhanced Services	Adva Serv					- locally services				
Contract Name	Trading Name	Address	Opening Hours	Specialist (Palliative Care) Drugs	Medicines Use Reviews	New Medicines Service	Sexual Health Service (Emergency contraception, Chlamydia screening and treatment)	Supervised consumption	Needle exchange	Support to Stop Smoking - Level 1 (NRT supply)	Support to Stop Smoking - Level 2 (Advisor)
Community Pharmacy					1						
Boots UK Ltd	Boots Pharmacy (255)	15-17 North Walk, Yate, Bristol, BS37 4AP	Mon-Sat 08:30-17:45; Sun 10:00-16:00	N	Y	Y	Y	Y	N	Y	Y
Boots UK Ltd	Boots Pharmacy (908)	West Walk Primary Care Resource Centre, 21 West Walk, Yate, Bristol, BS37 4AX	Mon-Fri 08:00-20:00, Sat 09:00-14:00	N	Y	Y	Y	Y	Y	Ν	N
K&L Healthcare Ltd	Yate Family Pharmacy	Kennedy Way Surgery, Kennedy Way, Yate, Bristol, BS37 4AA	Mon-Sat 07:00-22:30; Sun 10:00-17:00	N	Y	Y	Ν	Ν	Ν	Ν	N
Lloyds Pharmacy Ltd	LloydsPharmacy (0752)	14 West Walk, Yate, Bristol, BS37 4AX	Mon-Fri 09:00-18:30; Sat 09:00-17:30	N	Y	Y	Y	Y	Ν	N	Ν
Lloyds Pharmacy Ltd	LloydsPharmacy (6962)	Courtside Surgery, Kennedy Way, Yate, Bristol, BS37 4DQ	Mon-Sat 08:00-22:30; Sun 09:00-22:00	Y	Y	Y	Y	Y	Ν	Ν	Ν

Yate locality				NHS England Enhanced Services	Adva Serv		com			- locally services	
Contract Name	Trading Name	Address	Opening Hours	Specialist (Palliative Care) Drugs	Medicines Use Reviews	New Medicines Service	Sexual Health Service (Emergency contraception, Chlamydia screening and treatment)	Supervised consumption	Needle exchange	Support to Stop Smoking - Level 1 (NRT supply)	Support to Stop Smoking - Level 2 (Advisor)
Lloyds Pharmacy Ltd	LloydsPharmacy (0091)	33 High Street, Chipping Sodbury, Bristol, BS37 6BA	Mon-Fri 09:00-18:00; Sat 09:00-17:30	N	Y	Y	Ν	Y	N	N	N
MJ Williams Ltd	Abbotswood Pharmacy	38 Abbotswood, Yate, Bristol, BS37 4NG	Mon-Fri 09:00-13:00, 14:00-18:00	N	Y	Y	Y	Y	N	Y	Y
Moul Pharmacy Ltd	Stuart Moul Pharmacy	14 Lower Stone Close, Frampton Cotterell, Bristol, BS36 2LE	Mon-Fri 09:00-13:00, 14:00-18:00; Sat 09:00-13:00	N	Y	N	Y	Y	N	Y	Y
Sharief Healthcare Ltd	North Yate Pharmacy	Wellington Road, Yate, Bristol, BS37 5UY	Mon-Fri 8:30-18:30; Sat 09:00-13:00	N	Y	N	Ν	N	N	N	N
Shaunak's Pharmacy Ltd	Frome Valley Pharmacy	Frome Valley Medical Centre, 2 Court Road, Framtpon Cotterell, Bristol, BS36 2DE	Mon-Fri 09:00-18:30; Sat 09:00-12:00	N	Y	Y	N	Y	N	N	N

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Yate locality	NHS England Enhanced Services	Adva Serv		com			- locally services				
Contract Name	Trading Name	Address	Opening Hours	Specialist (Palliative Care) Drugs	Medicines Use Reviews	New Medicines Service	Sexual Health Service (Emergency contraception, Chlamydia screening and treatment)	Supervised consumption	Needle exchange	Support to Stop Smoking - Level 1 (NRT supply)	Support to Stop Smoking - Level 2 (Advisor)
Shaunak's Pharmacy Ltd	Shaunak's Pharmacy	7 Flaxpits Lane, Winterbourne, Bristol, BS36 1JY	Mon-Fri 09:00-17:30; Sat 09:00-13:00	N	Y	Y	Y	Y	N	N	Ν
Tesco Stores Ltd	Tesco In Store Pharmacy	12 East Walk, Yate, Bristol, BS37 4AS	Mon 08:00-22:30; Tue-Fri 06:00-23:00; Sat 06:30-22:00; Sun 10:00-16:00	N	Y	Y	Y	Ν	N	N	Ν
Dispensing GP practic	e				•					•	
The Three Shires Medical Practice	Marshfield Surgery	2 Back Lane, Marshfield, Wiltshire, SN14 8NQ	Mon-Fri 08:30-17:30; Tues 08:30-18:30	N	N	N	N	Ν	N	N	Ν
The Three Shires Medical Practice	Pucklechurch Surgery	12 Beckett Court, Pucklechurch, BS16 9QG	Mon-Fri 08:30-17:30; Thur 08:30-18:30	N	N	N	N	Ν	N	N	Ν
The Three Shires Medical Practice	Wick Surgery	111 High Street, Wick, Bristol, BS30 5QQ	Mon 08:30-18:30; Tue-Fri 08:30-17:30	N	N	N	N	Ν	N	N	N

Appendix B: PNA Steering Group Terms of Reference

1. Objective / Purpose

To oversee and provide governance on the production of South Gloucestershire's PNA on behalf of the Health and Wellbeing Board to ensure that it satisfies the relevant regulations including consultation requirements.

2. Accountability

The steering group is to report to the Health and Wellbeing Board.

3. Membership

The steering group is to consist of:

- South Gloucestershire Council Director of Public Health or Deputy Director of Public Health (Chair)
- NHS England Area Team Head of Medicines Management Project Manager
- Clinical Commissioning Group (CCG) representative Medicines Manager or representative
- Local Medical Committee representative
- Local Pharmaceutical Committee representative
- Representative of dispensing practices (there are three in South Gloucestershire)
- South Gloucestershire Council Consultation Lead
- CCG Head of Patient and Public Involvement
- Healthwatch representative

Additional members may be co-opted on to the group for particular roles.

4. Frequency of meetings

There will be three six-weekly meetings at the start of the project with the first being held in February 2014. The frequency of following meetings will be reviewed. It is anticipated that these will become bi-monthly.

5. Responsibilities

- Provide a clear and concise PNA process
- Access information and data on population, demographics, pharmaceutical provision and health needs
- Consult, at least once, with (as a minimum) service users, current pharmaceutical service providers, primary care providers, acute trusts and neighbouring local authorities
- Ensure that due process is followed
- Report to Health and Wellbeing Board on both a draft and final PNA.
- Publish a Final PNA by February 2015.

Appendix C: Patient survey



Tell us what you think of Pharmacy Services?

We want to hear what you think of pharmacy services in South Gloucestershire to help us develop services in the future. This includes local pharmacy or chemist shops, pharmacy services in supermarkets, GP practices that dispense medicines for their patients and online pharmacies.

Your views will help us to develop our Pharmacy Needs Assessment (PNA), which will look at the need for pharmacy services in South Gloucestershire, the level and accessibility of pharmacy services and how these will be maintained and developed in the future.

We would be grateful if you would take a few minutes to answer the questions below about your own experience and views. The information you provide will be kept confidential. The closing date for responses is 5 July 2014.

You can also complete this survey online at: www.southglos.gov.uk/consultation

Further information is available from: 01454 868154 or by emailing: consultation@southglos.gov.uk

Choice of pharmacy, access and transport

Q1	What type of pharmacy do you normally use?
	Local pharmacy or chemist shop Online pharmacy
	Pharmacy within a supermarket I don't use a pharmacy
	Pharmacy within a GP practice or hospital
Q2	How often do you use pharmacy services for prescribed medicines only?
	Daily Fortnightly Less often
	Several times a week Monthly Never used
	Weekly Every 2 to 3 months
Q3	How often do you use pharmacy services for over the counter medicines and treatments (excluding prescribed medicines)?
	Daily Fortnightly Less often
	Several times a week Monthly Never used
	Weekly Every 2 to 3 months
Q4	A few GP practices in South Gloucestershire are dispensing practices with onsite pharmacy services. Have you ever had your prescriptions for medicines dispensed by any of these practices?
	Close Farm (North Common) Three Shires (Marshfield)
	Three Shires (Pucklechurch)

Q5	Thinking about the location of your community pharmacy, which of the following are most
	important to you?

	Very	Quite	No view	Not very	Not at all
	important	important	either way	important	important
It is close to my GP surgery					
It is close to my home					
It is close to my work					
It is close to shops I use					
It is easy to access using public transport (near bus stop or train station)					
There is easy parking nearby					
Other reason- please specify below					
Other reason					

How do you normally travel to your local pharmacy and how long does it take you?

	Less than				I don't use this form of
	10mins	10 to 20 mins	20 to 30 mins	Over 30 mins	transport
Private car					
Taxi					
Bus/train					
Cycle					
Walk					
Other, please tell us below					
Other travel mode					

Thinking about the services that the community pharmacy provides, which of the following Q7 are most important to you?

		Very	Quite	No view	Not very	Not at all	
		important	important	either way	important	important	Don't know
	Evening opening hours						
	Weekend opening hours						
	Adequate waiting area including enough seating						
	Space for wheelchairs, mobility scooters, prams etc						
(Quick service						
	Medicines are usually in stock						
	Staff know about me and my care						
	Staff are friendly and helpful and provide good customer service						
9	There is some privacy if I want to speak to someone/ there is a private consultation area						
	Wide range of services are available						
(Other services, please specify below						
(Other services						

Q6

Pharmacy Services

Q8	Local community pharmacies may offer a range of services. Which services are most important for you?				ost		
		Very important	Quite important	No view either way	Not very important	Not at all important	Don't know
	Range of over the counter medication or treatments						
	Prescriptions collected from your GP						
	Prescriptions delivered directly to your home						
	Advice on being healthy						
	Advice on minor illnesses or injuries						
	Advice on managing long term illnesses						
	Advice on medicines prescribed by your doctor						
	Disposal of medicines that are no longer needed						
	Other services, please specify below						
	Other services						
Q9	Which services would you use if they wapply Advice about leading a healthy life (diet and exercise) Help to stop smoking Help watching your weight including referral to exercise programmes Advice on minor illnesses or injurie such as urine infections, colds, ups stomach Advice on medicines prescribed to you by a doctor (Medicines use review) New medicines service (for further advice during the first month of being prescribed a new medicine) Advice on managing long term illnesses Diabetes check ups/ monitoring Other services	ng es set	Inh Chu Em Pre Coi Pre Coi Pre Coi Pre Sul Sul Ant Tre	vour local aler chec olesterol l ergency of scription arraceptic scription amydia te e condor egnancy te edle exch ostance n ticoagulat arres) atment of her servic	ks monitorin contrace on medici esting ns on the esting lange nisuse ion chec f head lic	ng ption with ines with NHS ks (blood	hout a out a
Q10	Overall, how would you rate your satisf	action w	ith your I	ocal phar	macy?		
	Very satisfied		Qui	ite dissati	sfied		
	Quite satsified		Ver	y dissatif	ied		

Don't know

Neither satisfeid or dissatisfied

Help with medicines including repeat prescriptions

Q11	What help with your medicines would be most important to you?						
		Very	Quite	No view	Not very	Not at all	
	I de a stand and half with any	important	important	either way	important	important	Don't know
	I do not need any help with my medicines						
	The pharmacy orders my repeat prescriptions from the doctor						
	The pharmacy collects my repeat prescriptions from the doctor						
	The prescription is delivered to my home						
	Someone explains my medicines to me						
	I am given a chart to help me remember when to take my medicines						
	My medicines are placed in an organiser to help me remember when to take them						
	My medicines are placed in a container that is easy to open						
	Labels with large print are placed on my medicines						
	Other, please specify						
	Other, please tell us						

Comments and suggestions

Q12 Please use this space to make any comments or suggestions about local pharmacy services.

About you

Please answer the following optional questions about yourself. This information will be used to help us plan future pharmacy services by helping us to understand more about who uses pharmacy services and why. Any personal information you supply will only be used for analysis purposes and your details will not be published.

Q13	Please tell us you full postcode.		
Q14	Are you? Female	Male	Prefer not to say
Q15	How old are you?		
	Under 16 35 to 44 16 to 24 45 to 54 25 to 34 55 to 64	65 to 74 75 to 84 85 or over	Prefer not to say
Q16	Do you have a longstanding illness or disa	ability?	
	Yes No	[Prefer not to say
Q17	Please tell us your ethnic origin		

Thank you for completing this questionnaire. Please return your completed survey to our FREEPOST address (no stamp is needed).

FREEPOST RTCT-JXLE-EET, South Gloucestershire Council, Pharmacy Needs Assessment Consultation, Civic Centre, High Street, Kingswood, BRISTOL, BS15 9TR.

Any personal information that you have supplied will be held by South Gloucestershire Council in accordance with the Data Protection Act. This information will only be used as part of this exercise and personal information will not be published or passed onto any other organisation.

Appendix D: Pharmacy survey

Date of Completion	
Pharmacy Name	
(Primary identification)	
Postcode	
Address	
Trading Name	
Is this pharmacy a Distance Selling	
Pharmacy? (i.e. it cannot provide	
Essential Services to persons	Yes No
present at the pharmacy)	
Pharmacy email address	
Pharmacy telephone	
Pharmacy fax	
Pharmacy website address (If no	
website write no website)	
Can we store the above information	
and use this to contact you?	🗌 Yes 🗌 No
Consent to store	

Core hours of opening

Day	Open from	То	Lunchtime (From – To)
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

Total hours of opening

Day	Open from	То	Lunchtime (From – To)
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

Consultation facilities

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

		le (including wheelchair access), premises	
Is there a consultation	Availab the pre	le (without wheelchair access), on mises	
area?	Planne	d within next 12 months	
	No con	sultation room available	
	Other (please specify)	
Where there is a consultation area, is it a closed room?			☐ Yes ☐ No ☐ N/A (N/A if no consultation room)
		Off-site consultation room approved by NHS	
Off-site arrangements		Willing to undertake consultations in patients home/ other suitable site	
		None apply	
		Other (please specify)	

Hand washing and toilet facilities

What facilities are	Hand washing in consultation area	
available to patients during consultations?	Hand washing facilities close to consultation area	
(Tick all that apply)	Have access to toilet facilities	
	None	

Information Technology

Is the pharmacy EPS* R2 enabled?	Yes, EPS R2 enabled	
(Electronic Prescription Service Release 2)	Planning to become EPS R2 enabled in the next 12 months	
	No current plans to provide EPS R2	

Information is often distributed to pharmacies as email attachments or via websites. Please indicate whether you are able to use the following common file formats in your pharmacy:

File format types (Please tick all that apply)	Microsoft Word	
	Microsoft Excel	
	Microsoft Access	
	PDF	
	Unable to open or view any file formats	

Essential Services (appliances)

In this section, please give	Yes – All types, or	
details of the	Yes, excluding stoma appliances, or	
essential services your	Yes, excluding incontinence appliances, or	
pharmacy provides	Yes, excluding stoma and incontinence appliances, or	
	Yes, just dressings, or	
	None	
	Other (please specify)	

Advanced services

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

Please tick the box that applies for each service.

Yes – Currently providing

Soon – Intending to begin within the next 12 months

No - Not intending to provide

	Yes	Soon	No
Medicines Use Review service			
New Medicine Service			
Appliance Use Review service			
Stoma Appliance Customisation service			

Commissioned Services

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

- **CP** Currently Providing NHS funded service
- WA Willing and able to provide if commissioned
- **WT** Willing to provide if commissioned but would need training
- WF Willing to provide if commissioned but require facilities adjustment
- PP Currently providing private service

If you are not willing or able to provide please leave blank

	СР	WA	WT	WF	PP
Anticoagulant Monitoring Service					
Anti-viral Distribution Service					
Care Home Service					

	СР	WA	WT	WF	PP
Chlamydia Testing Service					
Chlamydia Treatment Service					
Contraceptive service (not an EHC service)					
Disease Specific Medi	cines Mana	gement Ser	vice:		
Allergies					
Alzheimer's/ dementia					
Asthma					
CHD					
Depression					
Diabetes type I					
Diabetes type II					
Epilepsy					
Heart Failure					
Hypertension					
Parkinson's disease					
Other (please state – including funding source)		·	<u> </u>	·	1

End of Disease specific Medicines Management Service options

Emergency Hormonal Contraception Service			
Gluten Free Food Supply Service (i.e. not via FP10)			

Home Delivery Service (not appliances)			
Independent Prescribing Service			
Therapeutic areas covered (if providing)			
Language Access Service			

Note: This is not the NMS or MUR service

Medication Review			
Service			

Medicines Assessment and Compliance Support Service:

Medicines Management Support Service:			
i.e. the EL23 service (previously the Vulnerable Elderly / Adults Service			
DomMAR Carer's Charts			

End of Medicines Assessment and Compliance Support options.

Minor Ailments Scheme			
MUR Plus/Medicines Optimisation Service			
Therapeutics areas covered (if providing)			
Needle and Syringe Exchange Service			

Obesity management (adults and children)			

On Demand Availability of Specialist Drugs Service:

Directly Observed Therapy			
If yes state which medicines			
Out of Hours Services			
Palliative Care scheme			

Patient group directions (PGD)

Many Local Services involve the supply of a POM using a PGD. Please list those provided by the pharmacy in the text box below but indicate who commissions the service by ticking the boxes below and annotating each service name with the key:

AT – Area Team
LA – Local Authority
CCG – Clinical Commissioning Group
Pr – Offers a Private Service

Patient Group Direction Service - not including EHC (see separate	AT	LA	CCG	Pr
question)				

Please list the names of the medicines available if providing PGD services

Medicines available	

	СР	WA	WT	WF	PP
Phlebotomy Service					
Prescriber Support Service					

Schools Service			
Screening Service			
Alcohol			
Chlamydia			
Cholesterol			
Diabetes			
Gonorrhoea			
H. pylori			
HbA1C			
Hepatitis			
HIV			
Other (please state)			

End of screening service options

	СР	WA	WT	WF	PP
Seasonal Influenza Vaccination Service					
Other vaccinations					
Childhood vaccinations					
HPV					
Hepatitis (at risk workers or patients)					
Travel vaccines					
Other – (please state – including funding source)					

End of Other vaccinations options

Sharps Disposal			
Service			

Stop Smoking Service:

	СР	WA	WT	WF	PP
NRT Voucher Service					
Smoking Cessation Counselling Service					

End of Stop Smoking Service options

Supervised Administration (of methadone,			
buprenorphine etc)			

End of Supervised Administration Service options

	СР	WA	WT	WF	PP
Supplementary Prescribing					
Which therapy area					
Vascular Risk Assessment Service (NHS Healthchecks)					

Healthy Living Pharmacy

Is this a Healthy Living Pharmacy	☐ Yes
	Currently working towards HLP status
	□ No
If yes how many Healthy Living Champions do you currently have?	Full Time Equivalents

Collection and Delivery services

Does the pharmacy provide any of the following?

Collection of prescriptions from GP practices	🗌 Yes 🗌 No
Delivery of dispensed medicines – Free of charge on request	🗌 Yes 🗌 No
Delivery of dispensed medicines – Selected patient groups (list criteria)	
Delivery of dispensed medicines – Selected areas (list areas)	
Delivery of dispensed medicines - chargeable	🗌 Yes 🗌 No

Languages

One potential barrier to accessing services at a pharmacy can be language. To help the local authority better understand any access issues caused by language please answer the following two questions:

What languages other than English are spoken in the pharmacy	
What languages other than English are spoken by the community your pharmacy serves	

Almost done

If you have anything else you would like to tell us that you think would be useful in the formulation of the PNA, please include it here:

Other	

Please tell us who has completed this form in case we need to contact you. (For person completing the form, if different to pharmacy number given above)

Contact name	
Contact telephone	

Thank you for completing this PNA questionnaire

Appendix E Dispensing GP practice questionnaire

Survey of Dispensing Doctor Contractors in South Gloucestershire

What is this questionnaire about?

As you may be aware, the Health and Wellbeing Board has a statutory duty to develop and publish a Pharmaceutical Needs Assessment (PNA) in line with new regulations by 1 April 2015. Work has been underway on the PNA for South Gloucestershire for some time and I would like to update you on the process so far.

A Core Steering Group was established in February 2014 to lead the work. The steering group includes LMC representation as well as representation from a dispensing practice.

Information has been collated on the population and health needs of each of the localities in South Gloucestershire. Alongside that, information has been collated on the pharmaceutical services that are currently available.

The conclusions will now start to be drawn leading to the draft PNA for consultation being completed in September. The 12 week formal consultation period, which is required as part of the regulations, will take place from September to December 2014. All dispensing doctor contractors will be asked to comment as part of the consultation.

To help us form a clearer picture of the services available to patients living in the more rural parts of South Gloucestershire who may have problems accessing services, please can you answer the following questions and return this by e-mail by **Monday 2nd June 2014** at the latest, so that the information can be incorporated into the needs assessment.

Who should complete the questionnaire?

This questionnaire should be completed by the Dispensing Doctor/Practice Manager. The responses should be about the dispensary. If your practice offers dispensing services from several branch surgeries, please complete a return for *each dispensing site*.

If you do not wish to answer a question for any reason then leave it blank.

Section 1: About your dispensing premises

Name of practice and full postal address of dispensary	

1. Do you have a private or semi-private counselling / consultation area in or attached to your dispensary? (Please tick one)



Yes - Please go to Question 2 No - Please go to Question 3

2. Do you have more than one consultation area in your dispensary? (Please tick one)



Yes - Please go to Question 4

No - Please go to Question 4

3. Do you plan to introduce a consultation area into your dispensary in the future? (Please tick one)

Yes
No

4. Please answer the following specific questions about the consultation facilities that you have or plan to introduce in your dispensary

(Please tick one box in the first column. If you tick "planned" then provide an approximate date)

Description	1.1.1 Current	1.1.2 Planned	1.1.3 If planned, by when approx (mm/yy)
a) The consultation area / room is clearly signposted as a private consultation area within /near the dispensary?			/
b) Conversations in the consultation area / room cannot be overheard when talking at normal speaking volumes by other patients and staff?			/

c) Seating is available for patients and staff within the area?		/
d) The area / room accessible to the disabled?		/
e) There is a sink in the area/room?		/
f) There is an examination couch in the area/room?		/
g) There is a computer terminal in the area / room?		/
h) It is possible to access the internet from the computer?		/
i) It is possible to access the PMR/prescription record from the computer?		/

- 5. Do you currently use your consultation room for other practitioners to run clinics or services from your dispensary? (Please tick one)

🗌 No

If yes, then please describe what for and times used

6. Would you be willing to allow other practitioners to use your consultation room to run clinics or services from your dispensary? (Please tick one)

	Yes
\square	No

Section 2: The services your dispensary provides

1. Do the dispensary staff undertake any interventions while working in the dispensary (and make records of these interventions)? E.g. Healthy lifestyle interventions or prescription linked healthy lifestyle interventions

Yes Go to Q2No Go to Q3

2. What barriers do you experience to making interventions (Please tick one on each row)

	Strongly disagree	Disagree	Neither	Agree	Strongly agree
Other pressures of work e.g. dispensing					
Confidence / experience of making interventions					
Supporting materials and resources					

3. Have you completed a survey of patients using your dispensary? (Please tick one)

Yes Go to Q4No Go to Q5

4. What barriers have you experienced in undertaking the survey?

(Please tick one in each row)

	Strongly disagree	Disagree	Neither	Agree	Strongly agree
Preparing the materials					
Entering the					
data					
Undertaking					
the analysis					
Other					
pressures of					
work					
Confidence					
to approach					
patients					

5. Did you learn anything that you will now bring into practice in your dispensary/surgery?

Section 3: Advanced services

1. What prevents you from carrying out DRUMs or doing more DRUMs than you do? (Please tick one in each row)

	Strongly disagree	Disagree	Neither	Agree	Strongly agree
Premises not suitable					
Dispenser not trained					
Other pressures of					
work e.g. dispensing					
Difficult to identify					
patients					
Patients refusing					
invitation					
Patients do not turn					
up for appointments					
Don't see eligible					
patients because of					
collection and					
delivery					
Paperwork takes too					
long					
No feedback from					
GPs					
Lack of confidence /					
experience of					
undertaking DRUM					
Lack of confidence to					
approach patients					
Knowledge or skills to					
provide DRUM					

2. For DRUM, do you target patients from particular groups or with specific diseases? (Please tick one)

Yes
No

If yes, which groups?

3. Do you do offer any extra services?

For example needle exchange, supervised consumption etc.

4. Do you offer a delivery service for prescription items?

Yes
No

If yes, are there any restrictions/set days etc?

5. Does anyone else offer a delivery service on your behalf?

Yes
No

If yes, please give details?

6. Do you have any other arrangements in place to help patients in rural areas access their medicines?

No

Yes

If yes, please give details?

Section 4: Strategic Information for future planning

Who should we contact about contractual and professional issues associated with developing services? (Please write)	
Practice Name:	
Name of contact:	
Address:	
Daytime Tel No:	
Email:	

- 1. How many hours per week on average, if any, does the dispensary employ more than one person at one time? (Please write)
- 2. Is the dispensary open at all times that the practice is open?

	Yes
\square	No

Г

3. Please tell us what are the opening times of the dispensary?

	Morning	Afternoon
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

4. Is the dispensary open lunchtimes?

Yes
No

5. Are there car parking spaces available for all at your dispensary?

Yes
No

If yes, how many spaces are provided?

Dispensing assistants are members of staff who are involved in the dispensing process but not pharmacists or technicians. They must have the equivalent of the NVQ level 2 qualifications or be working towards this.

6. How many Dispending Assistants (write number)	Number
a) Are employed by the practice?	
b) Hold an NVQ level 2 or equivalent, or are declared	
competent?	
c) Are working towards such a qualification?	
d) Would like to commence training on an NVQ level 2	
or equivalent?	

Pharmacy technicians are members of staff who hold the NVQ level 3 qualifications for pharmacy technicians or equivalent.

7. How many Pharmacy Technicians (write number)	Number
a) Are employed by the practice?	
b) Hold an NVQ level 3 or equivalent?	
c) Are working towards such a qualification and	
registration?	
d) Would like to commence training on an NVQ level 3	
or equivalent?	
e) How many pharmacy technicians are registered	
with RPSGB?	

• •	staff have any additional q ea of health care?	ualifications o	r a speciality in a
Area/field	Qualification or speciality	Is this useful in your work?	
		Yes	No

9. Please tell us if the regular dispenser(s) has undertaken or is currently undertaking any specific training to provide services commissioned by NHS England or Council e.g. smoking cessation, EHC? (Please write)

10. If there were the opportunity to specialise in a particular service, area of practice or disease would the regular dispenser(s) who works in this dispensary be interested? (Please tick one)

Yes
No

f Yes, what area(s) would you be int	erested in specialis	ing in? (Ple	ease write)
--------------------	--------------------	----------------------	--------------	-------------

11. If this dispensary has no permanent manager or long-term dispenser in place then is there a member of staff that we could use as a point of contact at the dispensary? (Please tick one)

Yes
No

12. Please provide the name and contact details of the member of staff that we should contact. (Please write)

13. Please provide the name of the G.P(s) who is/are accountable for the quality of dispensing services.

Section 5: Information Technology and Communications

How many computers in dispensary	0	1	2	3	4	5+
1. How many computers in your dispensary have access to email?						
2. How many computers have access to the Internet? (Please tick one)						

3. What type of internet connection does the dispensary have? (Please tick one)

N3 (NHS net)
Other broadband connection
Company network
None
Don't know

- 4. Is it possible to access the internet while using the dispensing computer? (Please tick one)
 - Yes restricted
 Yes unrestricted
 No

We may need to contact you to clarify your answers, please complete this section so that we can contact you if required:

Survey completed by:

Thank you. Please return the questionnaire by Monday 2nd June 2014.

Appendix F: PNA timeline

South Gloucestershire HWB Pharmaceutical Needs Assessment Timeline

Stage	Dates	Key Actions	Outcomes
Set up	April - May 2014	 HWB paper to outline PNA responsibilities Produce project plan and secure resources. Agree work stream plans and timelines. 	 Delegated authority to PNA Steering Group for PNA production. Isolation of necessary funding and resource for PNA production. Formation of PNA Steering Group and PNA Project Group. Roles and responsibilities defined. Terms of Reference and meeting dates agreed
Information finding	June - July 2014	 First steering group and project group meetings. Second steering group and project group meetings 	 Work streams and timeline agreed. Public and pharmacy questionnaires agreed. Consultation plan drafted. Localities agreed. GIS maps agreed. Public health and pharmaceutical provision information presented. Results from public and pharmacy questionnaires presented. Pharmaceutical provision and access maps presented.
Analysis	July - August 2014	Third steering group meeting	 Analysis of information finding. Collation of findings to inform draft PNA.

		 Further, focussed public engagement (if required following initial public survey results) 	 Consideration of need for further public qualitative feedback. Identification and agreement to any potential gaps in provision of services Agreement to consultation plan. Results and analysis from further public engagement.
Draft PNA production	August - September 2014	 Electronic circulation of various draft PNA documents to steering group members HWB Board paper 	 Agreement of final Draft PNA for consultation Presentation to HWB on progress and draft PNA
Consultation	September- November 2014	 Third project group meeting Various stakeholder events 	 Distribution and (minimum 60 day) consultation on draft PNA. Feedback obtained on draft PNA Collation of responses to consultation.
Final considerations	December 2014	 Fourth steering group meeting 	Analysis of consultation responses.Agreement on final PNA
HWB approval	January 2015	 Health and Wellbeing Board report 	 Approval and sign-off by HWB Board of final PNA. Obtain HWB approval and resource allocation for ongoing review/update PNA
Publish final PNA	February 2015	 Circulate final PNA and host on HWB / council website 	 HWB PNA now 'live' and used by NHS England to consider 'Control of Entry' applications

Appendix G: Consultation plan and list of stakeholders

This document details the scope of formal consultation and the methods used to engage different stakeholders and ensure patient and public involvement within this PNA.

There is a need for the HWB to understand:

- Local people and their representatives affected by the service;
- Existing pharmacy services/community based providers;
- Patients affected by possible new services in the area;
- Patient services and formal complaints; and
- Other key stakeholders (specifically identified groups: gypsy and traveller community, young people)

The information from these was then used to inform the final PNA document.

Prior to publication of the final document a formal consultation on a draft version was undertaken. There is a statutory requirement for this to last for a minimum of 60 days. Neighbouring authorities had suggested that the consultation period runs at the same time in each area to avoid possible confusion – it therefore started for the public on 7th September 2014.

The steering group decided that it was important to assess the value in providing a variety of services from pharmacies even though technically out of scope of the legal requirements for this consultation and final document. This has been carefully presented in the document to ensure a distinction in legal obligation and recommendations outside of the legal obligation.

Key Audiences for formal consultation

The regulations state that: "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 NHS England has made arrangements for the provision of any local pharmaceutical services; .any Local Healthwatch organisation for its area, and any other patient, consumer or community group in its area which 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; and.
- any neighbouring HWB".

It was also decided that the following groups of people would be formally consulted on the draft PNA.

- general public
- Community Pharmacy Contractor Superintendent Offices
- Local Authority area CCGs
- neighbouring CCGs
- Local Voluntary Groups
- Scrutiny Committee
- Social services
- key equalities groups including Gypsy and Traveller group, young people, older people, homeless people, carers and people with disabilities

Consultation engagement

Key considerations

- The use of pharmacies within South Gloucestershire by residents outside of South Gloucestershire, and the use of border pharmacies by South Gloucestershire residents
- Targeting equalities groups who make use of pharmacies but can't be reached in traditional ways during the formal consultation period

There was two phases

- Phase 1 Informal consultation through survey and stakeholder discussion
- Phase 2 Formal consultation on draft PNA (including statutory consultees and target groups)

Phase 1

Actions	timescale	who
Public engagement survey	By 31/07/2014	Local authority
		engagement lead
Viewpoint Panel questionnaire	31/04/2014	Local authority
		engagement lead
Other information from existing research and engagement outcomes		Local authority
		engagement
		lead, PNA project
		lead
Consultation with Pharmacies		LPC
GIS mapping of pharmacies and their services		NHS South West
		Commissioning
		Support Unit

Analysis and drafting of document – June/July/August

Consultation documents

Summary, main document, questionnaire, background papers (including initial research summary, consultation plan, Equalities Impact Assessment, coverage maps) on website at South Gloucestershire Council consultation hub

Summary document and questionnaire were available on request and at key venues across South Gloucestershire ie doctor's surgeries, NHS locations, libraries and one stop shops

Full version, background papers, maps were available on request in paper form (printed on request)

Phase 2 – formal consultation

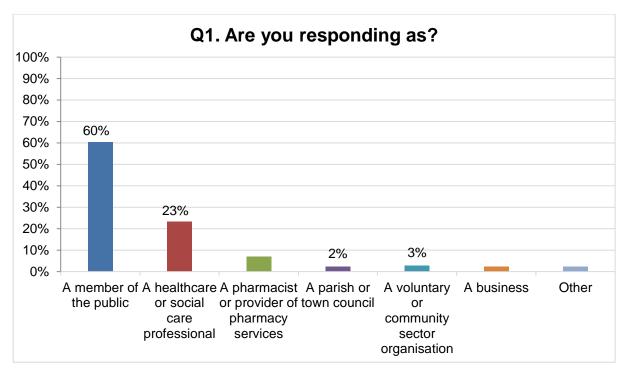
Audience	Actions	Timescale		Who
	Full document (simple word version) to be available for	Ready	by	PNA project lead /
	stakeholder consultation by 7 Sept	consultation start		Soar Beyond
	Summary document to be drafted and available from	Ready	by	Soar Beyond
	beginning September	consultation start		
	Questionnaire (paper and online versions)	Ready	by	Local authority
		consultation start		engagement lead,
				PNA Project lead
	Promotion/Notification			
General public/users of	Electronic Posters for display at pharmacies/doctor's			
pharmacies/patients	surgeries, hospital receptions, community centres etc)			
General public/users of	Postcards printed and distributed to pharmacies, doctor's			
pharmacies/patients	surgeries, hospital receptions??? (or flyer e-mailed?)			
Patients/public	Article in patient newsletters/communications			Liaison with South
	Partners to advise on deadline dates for their publications			Gloucestershire CCG
General public	Article for community newsletters, CVS Care Forum, etc			
General public	Press release			

All	SGC Website - (see below for documents) – documents available on consultation hub	
All	Partner websites - Information on websites directing people to consultation hub	
Statutory and other stakeholders	e-mail to all stakeholders with link to documents, for their response and to circulate through their channels	
General public	Social media promotion of the consultation on SGC and partner channels	
Internal council staff	Internal news release linking to consultation pages	
Partners internal staff	Partner internal channels	
MPs, councillors and Parishes	Information to make them aware of survey and link to online documents	
Local voluntary, health and community faith groups	E-mail with link to consultation pages	
Statutory Consultees	E-mail with link to consultation pages	
Equalities groups	Information sent to South Gloucestershire Equalities forum, Disability Equality Network and the Traveller's Service	

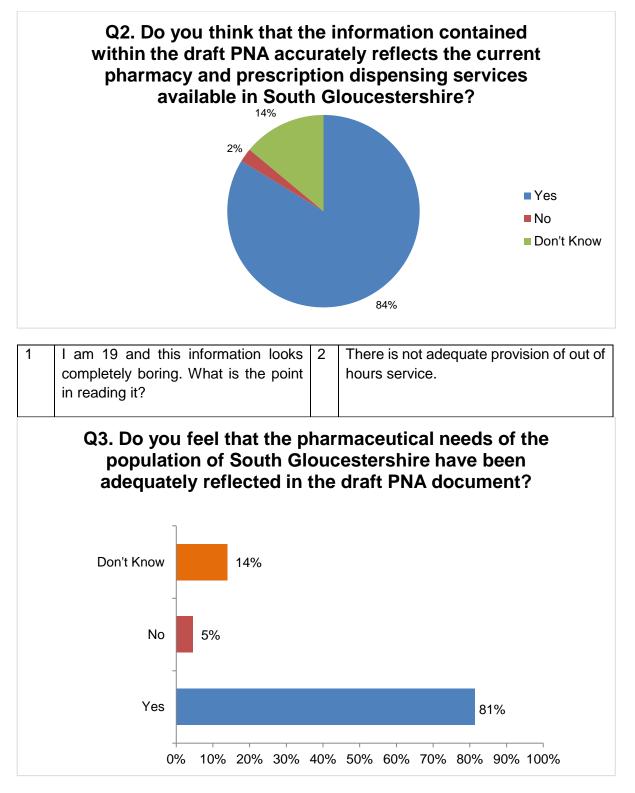
Appendix H: Summary of consultation responses and comments

A total of 44 responses were received to the consultation on the draft PNA. The PNA Steering Group considered these responses in their meeting on 24th November 2014, and the draft PNA was amended accordingly.

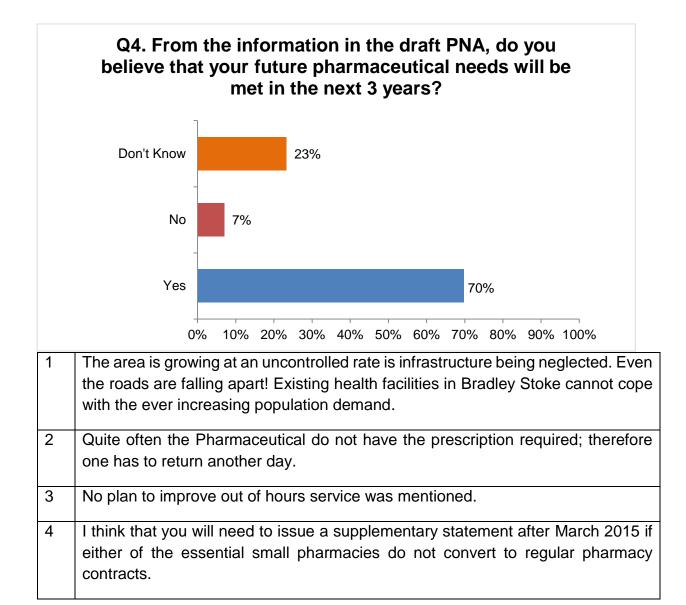
Below is a summary of the responses received.

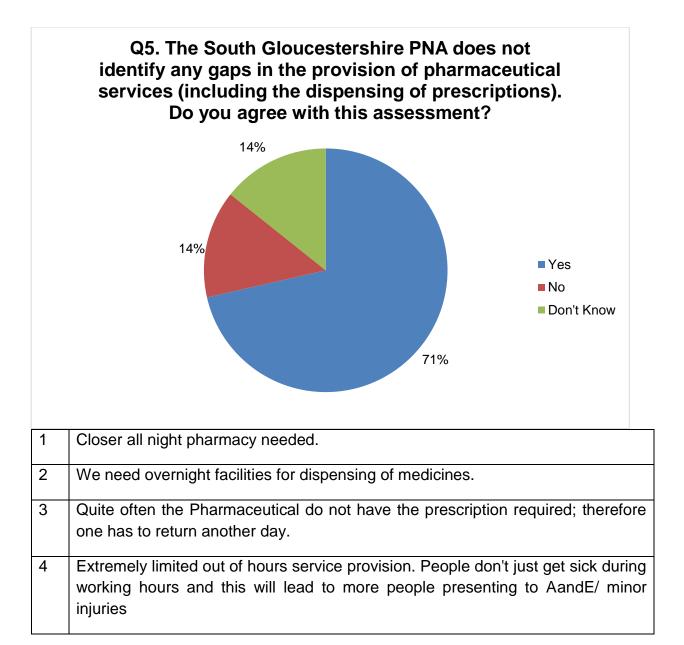


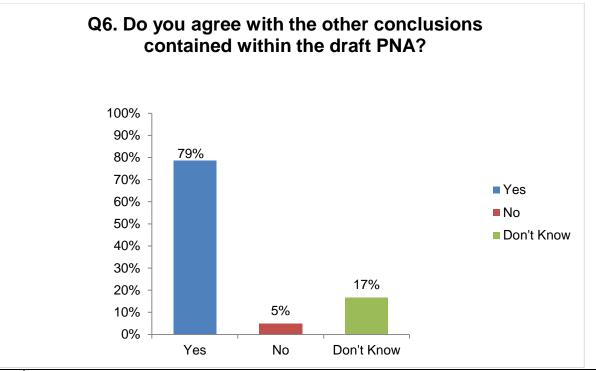
1	Kennedy Way Surgery	2	South Gloucestershire Council
3	South Gloucestershire Council	4	South Gloucestershire Council
5	South Glos Councillor	6	Alveston Pharmacy
7	Royal National Institute of Blind People		



1	Ideally, the PNA would benefit from a greater number of survey respondents.
2	To obtain out of hours pharmaceutical dispensing services we have driven for half an hour to Yate. Fortunately we have a car. There used to be a late opening pharmacy at Willow surgery, but this has now reduced its hours considerably and there seems to be no local out of hours pharmacy access.







1 I do not agree with you following assessment / conclusion for Sevenvale Chapter 6.2.4: "Access to community pharmacies on Sundays and some bank holidays is varied in some parts of the Severnvale locality, particularly in the north around Thornbury. Although community pharmacies are open in Cribbs Causeway on Sunday, and often on bank holidays, public transport may not be reliable. This is a gap in provision, although it has not yet been raised through complaints or the patient survey...Although not mentioned through any patient feedback, there is a gap in provision for pharmaceutical services from midnight to 7am weekdays and Saturday, and 4pm Sunday to 7am Monday" This comment is essentially saying that the Severnvale population need a pharmacy open 24 hours a day, 365 days a year providing all the services. This is very unrealistic. Also, the uptake of pharmaceutical services in those times and days mentioned are extremely low and would not be as beneficial as it looks on paper. You have also mentioned that there have been no complaints from the population regarding this, so this whole paragraph is based on assumptions and opinions of the South Gloucestershire Health and Wellbeing Board. The pharmaceutical needs assessment is a document that needs to be based on facts and feedback from the population that it is meant to serve. It should not include conclusions be based on opinions and assumptions of the organisation producing it. This conclusion/paragraph needs to be removed from the PNA.

Q7. Please use this space to make any other comments about the PNA or pharmacy services in South Gloucestershire that you think are relevant.

The area is not covered enough to provide an efficient service

We need to keep moving forward

1. The needs assessment comments on the possible difficulty of obtaining medicines at night and on Sundays even though the opening hours are above the national average. Has any work been done to assess the need for the dispensing of prescriptions during these periods? I suspect it is quite low and emergency arrangements might be in place such as doctors carrying emergency supplies or a hospital trust emergency pharmacy service being available.

2. My local pharmacies provide a generally efficient delivery service for housebound residents. How effective is this service in the more rural areas?

Pharmacists have been prompted as an alternative to seeing doctor for minor ailments. I have tried this three times but found that two of the three times I wasn't confident in the pharmacist's advice.

I currently live in South Wales and all the Doctors have Pharmacies attached, this is a very effective way of working, you literally come out of the Dr's and pick up your prescription on the way out.

Never had problems getting prescriptions.

I feel we are well-served with pharmacies in Bradley Stoke including out of hours.

From my own point of view as a pharmacy owner who has a close personal longstanding relationship with my customers, there are more than enough pharmacies to service the area. We are gaining customers from the 100 hour pharmacies who are unhappy with their service

We have several pharmacies which are walking distance away.

Extremely limited out of hours service provision. People don't just get sick during working hours and this will lead to more people presenting to AandE/ minor injuries, as we had to the last time we were not able to fill a prescription provided by the out of hours doctor.

I am aware of what my health is but even half of these questions are double dutch. What does PNA mean and what is all of this on about.

None thank you

Alveston Pharmacy also provides Sexual Health Service. Therefore the PNA needs to be amended as it shows that we do not provide it.

We are grateful for the opportunity to comment on the draft PNA. We would like to highlight some specific issues that affect blind and partially sighted people in accessing pharmacy services which we believe should be reflected in the PNA. The major issue reported to us by blind and partially sighted people in respect of pharmacy services is that blind people or those with sight loss find it difficult to read the labels on medicines, or access information leaflets. All pharmacies receive a payment as a contribution towards providing auxiliary aids to support people eligible for help with taking their medicines under the Equality Act 2010. These aids can include: Monitored dosage systems which help people to take the right medicines at the right time of day. Provision of large print labels for the partially sighted. Some pharmacies also have facilities to provide labels printed with Braille (and many original packs provided by manufacturers are now embossed with Braille). Provision of aids to help older people access their medicines e.g. winged lids for bottles. We welcome this approach but would request that the PNA specifically highlight these issues and make recommendations to address concerns. Actions might include: A review of the availability of accessible information in pharmacies Work with pharmacy contractors to better promote the availability of support for meeting the needs of particular patient groups Promoting the importance of sensory loss awareness training for staff working with patients in pharmacy settings

BS32 8DY	BS37 4AA	BS37 5AF	BS30 5SW
BS37 4HG	BS37 6AG	BS345SG	BS8 3BN
BS7 0RL	BS32 0HH	BS37 5FF	BS36 1EP
BS15 8NY	BS37 5AF	BS15 ODQ	BS30 9UJ
BS15 4RB	BS36 2FN	BS37 5AF	BS37 5AF
BS37 7AN	BS36 2EN	BS37 7YN	BS32 8BP
BS35	BS16 6SQ	BS16 6PL	BS32 0HB
BS35 1EA	BS37 5AF	GL12 8BJ	BS30 7DY
BS30 9BA	BS32 0HG	BS16 5QB	BS37 8RY
BS16 1ZL	BS165QG	GL51 3JX	BS37 4AA
BS35 3LU	BS3 4EB		

Q8. Please tell us your full postcode:

Appendix I: Revisions of the PNA following the consultation

Following an 8 week consultation on the Draft PNA, the following amendments were made:

Section	Amendment
Executive summary and Section 3	Updated data for the number of community pharmacies per 100,000 population for the year 2013/14 was available from the Health and Social Care Centre. Various data tables in the Executive summary and Section 3 have been updated.
Executive summary and Section 6	Statement added to note that, as per Schedule 1 of the Regulations, the HWB have defined necessary services as essential and advanced services, and enhanced and locally commissioned services as securing improvements and better access to pharmaceutical services. This has been added following recently circulated general feedback from NHS England central teams to HWBs. Conclusions now separated into access to necessary services and
	Improvements and better access.
Executive summary and Section 6	Following the consultation the conclusion on access to necessary services outside of normal working hours has been amended to:
	'There is limited evidence that there may be no gap in the provision of essential services outside of normal working hours in the Kingswood, Severnvale and Yate localities or across the whole HWB area. If there were to be a gap, NHS England can exercise their power to make pharmacies open longer'
Executive summary and Section6	Following the production of the draft PNA, pharmacies within the Essential

Section	Amendment
	Small Pharmacy Scheme have been given notice that the scheme is to be withdrawn from 1/4/15. All such pharmacies have been invited to return to the Pharmaceutical List and the national contract, and therefore all references to a potential gap should these pharmacies close, has been removed
Executive summary and Section 6	Section on Future Housing Developments and Better Access in the Draft PNA has been incorporated within additional sections added to the Final PNA on Future provision of necessary services, Future access to essential services, Future access to advanced services, Future access to enhanced services, Other NHS services, and Locally Commissioned Services. These have been inserted, as mentioned above, in response to general feedback from NHS England.
Section 3 and Appendix A	A number of providers' details changed, following information received from NHS England on various changes of ownership, relocations, and changes of opening hours
Section 5	Section amended to be titled 'Feedback on pharmaceutical services provision'. Additional text added describing how feedback was sought on pharmaceutical service provision, explaining the contractor survey responses, and feedback on the consultation.
Section 6.2.4,	Following the consultation, the Steering Group re-considered the gaps in service provision identified in this section in the Draft PNA.

Section	Amendment
	The conclusions were amended to "Based upon the consultation responses, results of the patient survey, population density and access to pharmacies across the HWB area, it is unclear if there is a gap in service which would equate to the need for access to essential services outside normal hours in this locality. The HWB will monitor the uptake and need for necessary services and will consider the impact of any changes in this locality in the future which may provide evidence that a need exists."
	The paragraph regarding UWE, and a potential gap in service provision, has been removed from the final PNA; no evidence to support this gap was identified, and the Steering Group concluded that provision in the neighbouring Bristol HWB area was likely to be most accessible for residents on the UWE Frenchay campus.
Section 6.3.4, and 6.4.4,	Following the consultation, the Steering Group re-considered the gaps in service provision identified in this section in the Draft PNA.
	The conclusions were amended to "Based upon the consultation responses, results of the patient survey, population density and access to pharmacies across the HWB area, it is unclear if there is a gap in service which would equate to the need for access to essential services outside normal hours in this locality. The HWB will monitor the uptake and need for necessary services and will consider the impact of any changes in this locality in the future

Section	Amendment
	which may provide evidence that a need exists"
Section 7	Statement added to clarify the process the HWB has taken to reach its conclusions:
	"The HWB has considered the following when assessing the provision of necessary services in the HWB area and each of the three PNA localities:
	 the priorities identified in South Gloucestershire's HWB Strategy and JSNA4 (Section 2.2)
	• population density per square km by Census 2011 Output Area and the relative location of pharmacy premises (Map C)
	 Index of Multiple Deprivation (IMD) and deprivation ranges compared to the relative location of pharmacy premises (Map F)
	• BME % population compared to the relative location of pharmacy premises (Map G and Figure 4)
	• percentage of population of South Gloucestershire HWB and the average daytime travel times to nearest community pharmacy (Figure 15)
	 using average drive time, over 92% of residents can access a pharmacy by car within five minutes (Map D and Figure 15)
	 using average public transport times, over 95% of residents can access a pharmacy within 20 minutes (Figure 15)
	 using average walking times, 61% of residents can access a pharmacy within 20 minutes increasing to 90% of

Section	Amendment
	residents within 30 minutes (Map E and Figure 15)
	• the location of pharmacies within each of the three PNA localities and across the whole South Gloucestershire HWB area (Map A)
	• the number, distribution and opening times of pharmacies within each of the three PNA localities and across the whole South Gloucestershire HWB area (Appendix A and Map B)
	• the range of services provided by pharmacies in the each of the three PNA localities and the whole South Gloucestershire HWB (Appendix A)
	 the average number of items per month per pharmacy dispensed within South Gloucestershire HWB area (Table 10)
	 results of the patient survey (Appendix J)
	 results of the consultation on the draft PNA (Appendix H)
	 key housing developments sites within South Gloucestershire HWB area (Table 4)
	 projected population growth (Section 2.3.3)
	 findings from pharmacy contractor survey
	 findings from dispensing doctors survey
Section 7	As mentioned previously above, removal of conclusions relating to the Essential Small Pharmacy Scheme, provision in UWE Frenchay campus, and provision on bank holidays.

Section	Amendment
Appendix H	Section completed, to include results of the consultation survey.

Appendix J: Patient survey: summary of responses

Q1: Wh	nat type	of pharmacy	do you use	? (%)						
Local p	bharmac	V	Pharmacy in supermarket		armacy n GP nctice / ospital	Onlir	Online pharmacy		Don't use a pharmacy	
64	1.8%	11.	9%	2	1.7%	1.29	%	C).4%	
Q2: Ho	w often	do you use p	harmacy se	ervice	s for p	rescribed m	edicine	s? (%)	
Daily	Severa times a week	a Weekly	Fortnightl	y N	lonthly	Every 2 - 3 months	Less	often	Never used	
0.9%	0.5%	4.8%	7.2%	3	31.4%	37.6%	17.	1%	0.5%	
	ow often ents?(%)	do you use)	pharmacy s	servic	es for	over the co	ounter r	nedici	nes and	
Daily	Severa times a week	a Weekly	Fortnightl	Fortnightly M		Every 2 - 3 months	Less	often	Never used	
0.4%	0.4%	5.9%	4.8%	1	14.5%	29.4%	40.	1%	4.8%	
	•	ever had yo ponses)	ur prescript	tions	disper	nsed by any	of the	ese pr	actices?	
Clos Farr		Mars	shfield		Puc	klechurch		Wic	K	
1			1			3		3		
	-	bout the location tant to you? (•	comr	nunity	pharmacy, v	which c	of the f	ollowing	
		Very important	Quite important	either		Not very important	Not important at all		ant at all	
It is clo my GP surgery		44.5%	29.3%				4.7%	6		
It is cl my hon		56.3%	32.6%	7	.9%	2.1%		1.1%	6	

It is close to my work	10.1%	20.2%	36.4%	17.8%	15.5%		
It is close to shops I use	29.6%	36.0%	18.3%	7.0%	9.1%		
It is easy to access using public transport	17.1%	25.9%	25.9%	10.6%	20.5%		
There is easy parking nearby	50.0%	32.4%	9.3%	5.5%	2.8%		
Other reason	22.9%	5.7%	28.5%	2.9%	40.0%		
Other comments: Late weekend and evening opening; Nearest chemist; Reliable							

Other comments: Late weekend and evening opening; Nearest chemist; Reliable service to local community; Well stocked; Accept online orders for repeat scripts; Delivers prescriptions; 'One-stop shop'; Collects prescriptions from the surgery; Local chemists-employ local people; Make up daily medication boxes, Walking distance

Q6: How do you normally travel to your local pharmacy and how long does it take you?(%)

	Less than 10 mins	10-20 mins	20-30 mins	Over 30 mins	I don't use this form of transport
Private car	80.1%	13.9%	0%	0%	6.0%
Taxi	3.4%	0%	0%	1.7%	94.9%
Bus/train	9.5%	9.5%	6.4%	1.6%	73.0%
Cycle	22.2%	11.1%	1.6%	1.6%	63.5%
Walk	47.0%	28.8%	10.6%	1.5%	12.1%
Other	11.1%	3.7%	0%	3.7%	81.5%

Other comments: Don't use one pharmacy as no one is more convenient; Mobility scooter; Mobility/electric scooter; Prescription delivered

Q7: Thinking about the services that the community pharmacy provides, which of the following are most important to you? (%)

	Very important	Quite important	No view either way	Not very important	Not important at all	Don't know
Evening opening hours	41.2%	30.8%	14.8%	9.9%	2.7%	0.6%
Weekend opening hours	47.6%	38.8%	7.3%	5.2%	1.1%	0%
Adequate waiting area including enough seating	20.5%	34.4%	23.6%	14.5%	6.5%	0.5%
Space for wheelchairs, mobility scooters, prams etc	19.6%	25.7%	31.3%	9.4%	12.3%	1.7%
Quick service	46.1%	43.6%	5.6%	3.1%	1.6%	0%
Medicines are usually in stock	56.9%	37.1%	5.5%	0%	0.5%	0%
Staff know about me and my care	28.0%	27.3%	28.4%	9.3%	6.5%	0.5%
Staff are friendly and helpful and provide good customer service	56.8%	37.1%	5.6%	0%	0.5%	0%

There is some privacy if I want to speak to someone/the re is a private consultation area	41.8%	33.3%	18.0%	3.7%	2.1%	1.1%
Wide range of services available	21.9%	40.4%	28.7%	5.7%	2.2%	1.1%
Other services	0%	11.9%	38.0%	2.4%	11.9%	35.8%

Other comments: Delivery services; Lloyds do online prescription service, so need to contact GP practice; Most doctors practices are closed by 6pm and not open at weekends; Travel info e.g. malaria prevention

Q8: Local community pharmacies may offer a range of services. Which services are most important for you? (%)

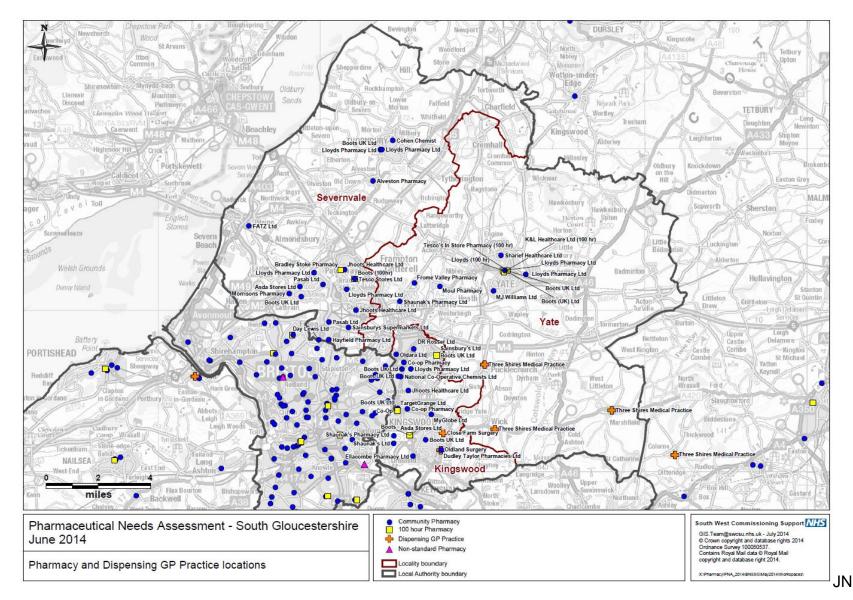
	Very important	Quite important	No view either way	Not very important	Not important at all	Don't know
Range of over the counter medication or treatments	50.3%	37.2%	8.9%	2.1%	0.5%	1.0%
Prescriptions collected from your GP	55.8%	29.1%	8.5%	3.6%	1.5%	1.5%
Prescriptions delivered directly to your home	14.4%	20.9%	37.5%	14.4%	10.7%	2.1%
Advice on being healthy	10.4%	25.8%	41.8%	14.9%	6.6%	0.5%

Advice on minor illnesses or injuries28.0%50.3%15.3%3.2%2.1%1.1%Advice on managing long term illnesses21.2%35.8%26.3%6.7%8.3%1.7%Advice on medicines prescribed by your doctor37.6%40.7%11.6%4.8%4.8%0.5%Disposal of medicines that are no longer needed34.0%35.7%20.7%3.7%4.8%1.1%Other services2.9%0%45.6%2.9%8.6%40.0%Other comments: Needle and syringe disposal; sharps disposal; Minor illness; smoking cessation; trimethorim prescribing by pharmacist; end of life -"just in case" boxes0.5%1.2%Advice about leading a healthy life (diet and exercise)6.8%1.2%440.0%Help to stop smoking1.2%1.2%1.2%Help vatching your weight including referral to exercise programmes7.1%16.8%Advice on medicines prescribed to you by a doctor (Medicines use review)13.6%10.0%								
managing long term illnesses21.2%35.8%26.3% 6.7% 8.3% 1.7% Advice on medicines prescribed by your doctor37.6% 40.7% 11.6% 4.8% 4.8% 4.8% 0.5% Disposal of medicines that are no longer needed34.0% 35.7% 20.7% 3.7% 4.8% 1.1% Other services2.9%0% 45.6% 2.9% 8.6% 40.0% Other comments: Needle and syringe disposal; sharps disposal; Minor illness; smoking cessation; trimethoprim prescribing by pharmacist; end of life -"just in case' boxes 6.8% 40.0% Q9: Which services would you use if they were available at your local pharmacy? (%) 1.2% 1.2% Help to stop smoking 1.2% 1.2% Help to stop smoking 1.2% 16.8% Help watching your weight including referral to exercise programmes 7.1% Advice on medicines prescribed to you by a doctor (Medicines use review) 13.6% New medicines service (for further advice during the underline service for further advice during the 10.0% 10.0%	minor illnesses or	28.0%	50.3%	15.3%	3.2%	2.1%	1.1%	
medicines prescribed by your doctor37.6%40.7%11.6%4.8%4.8%0.5%Disposal of 	managing long term	21.2%	35.8%	26.3%	6.7%	8.3%	1.7%	
medicines that are no longer needed34.0%35.7%20.7%3.7%4.8%1.1%Other 	medicines prescribed by your	37.6%	40.7%	11.6%	4.8%	4.8%	0.5%	
services2.9%0%45.6%2.9%8.6%40.0%Other comments: Needle and syringe disposal; sharps disposal; Minor illness; smoking cessation; trimethoprim prescribing by pharmacist; end of life -"just in case' boxesQ9: Which services would you use if they were available at your local pharmacy? (%)0.8%6.8%Advice about leading a healthy life (diet and exercise)6.8%Help to stop smoking1.2%Help watching your weight including referral to exercise programmes7.1%Advice on minor illnesses or injuries such as urine infections, colds, upset stomach16.8%Advice on medicines prescribed to you by a doctor (Medicines use review)13.6%	medicines that are no longer	34.0%	35.7%	20.7%	3.7%	4.8%	1.1%	
smoking cessation; trimethoprim prescribing by pharmacist; end of life -"just in case' boxesQ9: Which services would you use if they were available at your local pharmacy? (%)Advice about leading a healthy life (diet and exercise)6.8%Help to stop smoking1.2%Help watching your weight including referral to exercise programmes7.1%Advice on minor illnesses or injuries such as urine infections, colds, upset stomach16.8%Advice on medicines prescribed to you by a doctor (Medicines use review)13.6%		2.9%	0%	45.6%	2.9%	8.6%	40.0%	
(%)Advice about leading a healthy life (diet and exercise)6.8%Help to stop smoking1.2%Help watching your weight including referral to exercise programmes7.1%Advice on minor illnesses or injuries such as urine infections, colds, upset stomach16.8%Advice on medicines prescribed to you by a doctor (Medicines use review)13.6%New medicines service (for further advice during the 10.0%10.0%	smoking cessation; trimethoprim prescribing by pharmacist; end of life -"just in case'							
Help to stop smoking1.2%Help watching your weight including referral to exercise programmes7.1%Advice on minor illnesses or injuries such as urine infections, colds, upset stomach16.8%Advice on medicines prescribed to you by a doctor (Medicines use review)13.6%New medicines service (for further advice during the10.0%								
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programmes7.1%Advice on minor illnesses or injuries such as urine infections, colds, upset stomach16.8%Advice on medicines prescribed to you by a doctor (Medicines use review)13.6%New medicines service (for further advice during the 10.0%10.0%	Help to stop smoking					1.2%		
infections, colds, upset stomach16.8%Advice on medicines prescribed to you by a doctor (Medicines use review)13.6%New medicines service (for further advice during the 10.0%10.0%						7.1%		
(Medicines use review) 13.6% New medicines service (for further advice during the 10.0%	•					16.8%		
						13.6%		
						10.0%		

Diabetes check ups/ monitoring	5.5%
Inhaler checks	4.4%
Cholesterol monitoring	9.7%
Emergency contraception without a prescription	2.6%
Contraception medicines without a prescription	2.6%
Chlamydia testing	1.3%
Free condoms on the NHS	2.2%
Pregnancy testing	1.7%
Needle exchange	1.0%
Substance misuse	0.5%
Anticoagulation checks (blood thinners)	2.2%
Treatment of head lice	2.4%
Other services, please tell us below	0.6%
Other comments: Ability to check prescription is accurate both GP and pharmacy; Blood pressure checks; 'Flu jab; Help coping with being on benzodiazepines. Q10: Overall, how would you rate your satisfaction with you	Reduce alcohol intake;
Very satisfied	49.3%
Quite satisfied	38.6%
Neither satisfied or dissatisfied	8.7%
Quite dissatisfied	1.9%
Very dissatisfied	1.0%
Don't know	0.5%

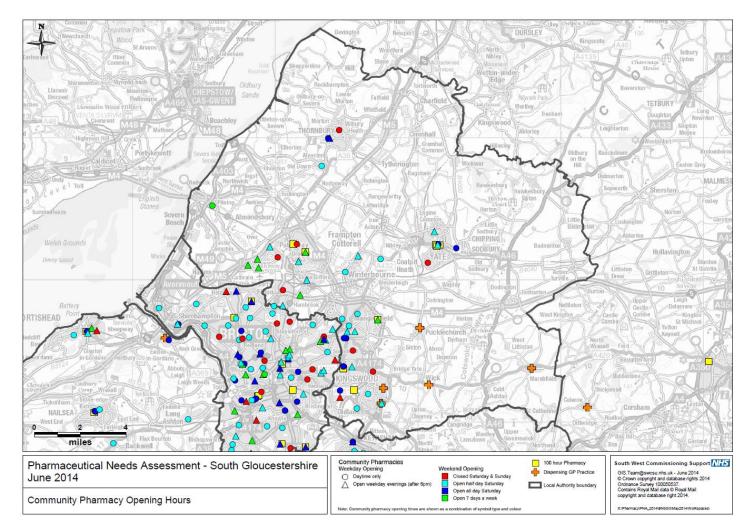
Map A: Pharmacy and dispensing GP practice locations

Map showing community pharmacies (including LPS), DACs, dispensing GP practices - both within HWB rea and in cross-border areas.



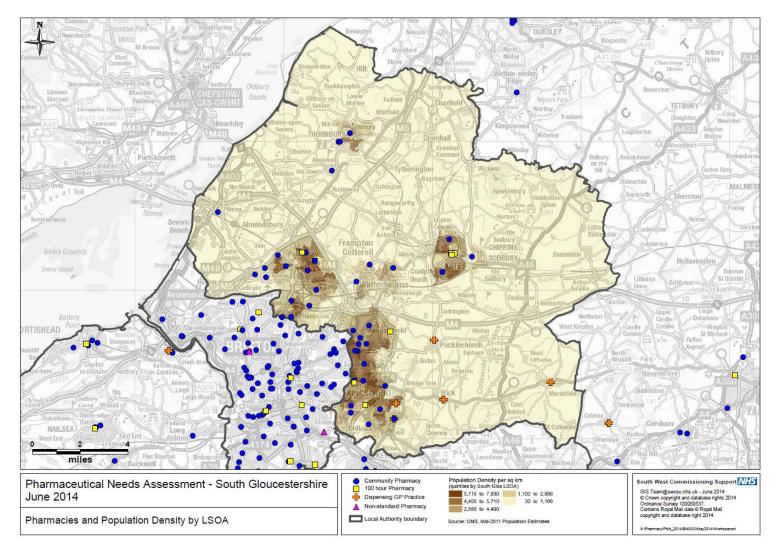
Map B: Community pharmacy opening hours

Map showing community pharmacies (including LPS), DACs, dispensing GP practices and the opening hours of community pharmacies.



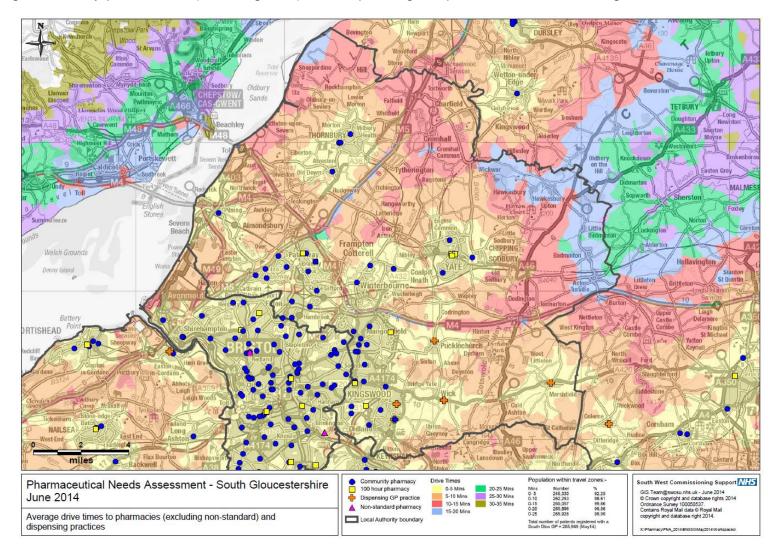
Map C: Pharmacies and population density by LSOA

Map showing community pharmacies (including LPS), DACs, dispensing GP practices and the population density by Lower Super Output Level.



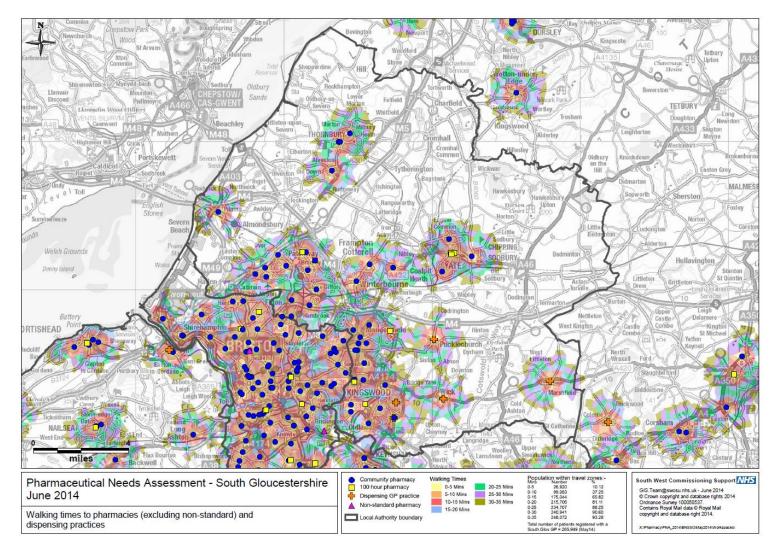
Map D: Average drive time to community pharmacies and dispensing practice in South Gloucestershire

Map showing community pharmacies (including LPS) and dispensing GP practices and the average drive time.



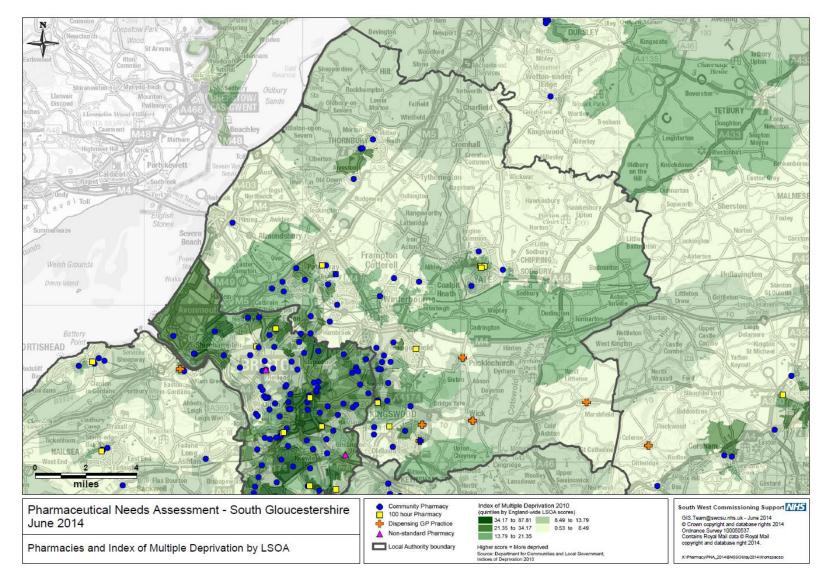
Map E: Average walking time to community pharmacies and dispensing practice in South Gloucestershire

Map showing community pharmacies (including LPS) and dispensing GP practices and the average walking time.



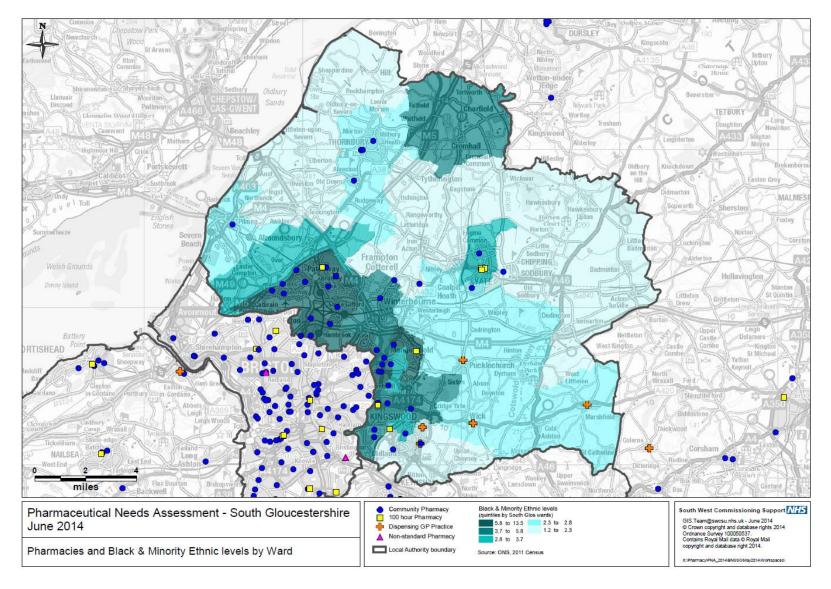
Map F: Pharmacies and Index of Multiple Deprivation by LSOA

Map showing community pharmacies (including LPS) and dispensing GP practices and the Index of Multiple Deprivation, by LSOA.



Map G: Pharmacies and black and minority ethnicity levels by ward

Map showing community pharmacies (including LPS) and minority ethnicity levels, by ward.



Map H: The controlled locality area around Pilning.

