

Appendix A

# **Medway Health and Wellbeing Board Pharmaceutical Needs Assessment**

**October 2022 – October 2025**

## Post consultation and post HWB final draft 22.7.22

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## Executive Summary

Health and Wellbeing Boards (HWB) have a statutory duty, under the *Health and Social Care Act 2012*<sup>(1)</sup>, to produce and maintain a pharmaceutical needs assessment (PNA) once every three years. The purpose being, to inform NHS England as to the required changes to the commissioning of local pharmaceutical services.

As per previous PNAs, this document looks at the current provision of pharmacy services across Medway and seeks to identify whether there are any potential gaps in

service delivery. The enclosed finding will be used by NHS England in its consideration of applications to join the pharmaceutical list, and by commissioners of community pharmacy enhanced and locally commissioned services.

To develop this iteration of the PNA, an independent subject matter expert organisation was commissioned; North of England Commissioning Support (NECS). Overseen by a locally established steering group, chaired by the Medway public health team, NECS has worked collaboratively with a range of stakeholders including: NHS England, Kent and Medway Clinical Commissioning Group, Medway Council, Medway Local Pharmaceutical Committee (LPC) and local community pharmacists. The aim being, to identify issues that affect the commissioning of community pharmacy services and to identify priorities for the future provision of community pharmacy services.

In order to inform the development of this document, a statutory consultation was undertaken from 20<sup>th</sup> April 2022 to 19<sup>th</sup> June 2022 in order to seek the views of statutory consultees, the public and other stakeholders, as to whether they agree with the contents of this pharmaceutical needs assessment. Any comments and feedback obtained from the consultation are reflected in this document. The PNA aligns closely with the health needs identified in the Joint Strategic Needs Assessment (JSNA) for Medway.

The document includes information on the following:

- A description of the PNA process, including the determination of localities.
- An assessment of health needs now and in the future.
- A description of community pharmacies in Medway.
- An assessment of current service provision and access, including any gaps.
- A consideration of possible future roles for community pharmacy.
- An assessment of community pharmacy's contribution to the Joint Health and Wellbeing Strategy.
- Key messages from stakeholder engagement activity and statutory consultation.
- A summary of findings and the statement of pharmaceutical needs assessment.

The key findings and recommendations of the PNA steering group are:

- 1) Community pharmacy services play an important role in supporting the services provided by GP practices and the Primary Care Networks (PCNs)
- 2) Overall, there is good pharmaceutical service provision in most of Medway from Monday to Friday. The majority of residents can access a pharmacy within a 20-minute walking distance and there is adequate choice of pharmacy
- 3) In urban areas there is good provision of pharmaceutical services on Saturday mornings and adequate provision on Saturday afternoons and Sundays.
- 4) Where the area is defined as rural by NHS England, there are dispensing practices to provide pharmaceutical services to the rural population from Monday to Friday. Most of the patients who live in the rural areas can access a community pharmacy within a 20-minute car drive if necessary.
- 5) The current provision of "standard 40-hour" pharmacies should be maintained, especially in rural/outlying areas.

- 6) The HWB recognises the importance of the supplementary hour provision by pharmacies within the area and the possible impact a change of these hours of delivery could have on access to pharmacy provision in Medway.
- 7) Loss of any of the 100-hour pharmacies could cause significant gaps in access to both essential pharmaceutical services and locally commissioned services that respond to particular population health needs.
- 8) There are proposed future housing developments across Medway which will mean that these areas will need to be reviewed on a regular basis to identify any significant increases in pharmaceutical need.
- 9) Any application must demonstrate that it is necessary, will provide value to the NHS and can improve on the availability of services across the specific area.
- 10) Commissioners should take cross border issues into account and consult with relevant stakeholders when they are reviewing, commissioning or decommissioning services, to avoid or mitigate against creating inequity of provision for the local population.

Medway Health and Wellbeing Board also wishes to acknowledge the contribution that community pharmacy services have made to the COVID-19 pandemic response since March 2020.

# 1. Introduction

## 1.1 Background

The *Health Act 2009* <sup>(2)</sup> introduced a legal requirement for all Primary Care Trusts (PCTs) to publish a pharmaceutical needs assessment (PNA) by 1 February 2011. The *Health and Social Care Act 2012* <sup>(1)</sup> subsequently transferred the responsibility to Health and Wellbeing Boards.

Consequently, each Health and Wellbeing Board was required to produce and publish its first pharmaceutical needs assessment in April 2015 with a requirement that a revised assessment must then be published within three years, or sooner in response to significant changes to the availability of pharmaceutical services.

In May 2021, the Department of Health and Social Care (DHSC) initially determined that the requirement to publish renewed PNAs would be suspended for a year (to April 2022) in order to reduce unnecessary extra pressure on local authorities, Local Pharmaceutical Committees, pharmacy contractors and other stakeholders during the response to the COVID-19 pandemic.

Further to this, due to ongoing pressures across all sectors in managing the pandemic response, the requirement to publish renewed PNAs was suspended further until October 2022.

Therefore, in light of the announcement and following on from the publication of the *PNA for Medway March 2018* <sup>(3)</sup> the Health and Wellbeing Board has now produced an updated PNA for publication on 1 October 2022.

## 1.2 Purpose of the Pharmaceutical Needs Assessment

The PNA is a comprehensive assessment of the current and future pharmaceutical needs of the local population. It describes:

- The health needs of the population (see section 4)
- Current pharmaceutical services provision and any gaps in that provision (sections 3.4 and 3.5)
- Potential new services to meet health needs and help achieve the objectives of the *Joint Health and Wellbeing Strategy* <sup>(4)</sup>

It takes account of the joint strategic needs assessment <sup>(5)</sup> (JSNA) and is a strategic commissioning document which will be used primarily by NHS England in its determination as to whether to approve applications to join the pharmaceutical list under the *NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013* <sup>(6)</sup>

The PNA will also be used to:

- Ensure that decisions about applications for market entry for pharmaceutical services are based on robust and relevant information;
- Inform commissioning plans about pharmaceutical services that could be provided by community pharmacists and other providers to meet local need - these services can be commissioned by local authorities, NHS England and Integrated Care Boards (ICBs);
- Support commissioning of high-quality pharmaceutical services including locally enhanced services;
- Ensure that pharmaceutical and medicines optimisation services are commissioned to reflect the health needs and ambitions outlined within the Joint Health and Wellbeing Strategy; and
- Facilitate opportunities for pharmacists to make a significant contribution to the health of the population of Medway.

### 1.3 Pharmacy market

Community pharmacies and appliance contractors are responsible for dispensing medications, appliances, and medical devices to NHS patients. They are not a direct part of the NHS but provide essential services on behalf of the NHS to the general public.

Under the *NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013* <sup>(6)</sup>, a person – i.e., a pharmacist, a dispenser of appliances or, in some rural areas, a GP – who wishes to provide NHS pharmaceutical services must apply to NHS England to be included on the relevant pharmaceutical list by proving they are able to meet a pharmaceutical need as set out in the relevant PNA. There are exceptions to this, such as applications to provide pharmaceutical services on a distance-selling (i.e. internet or mail order only) basis.

There are five types of market entry application that can be made to be included on the NHS England Pharmaceutical List. These are:

- To meet a current need identified in the PNA;
- To meet a future need identified in the PNA;
- To improve current access;
- To improve future access;
- To fulfil an unforeseen benefit, where the applicant provides evidence of a need that was not foreseen when the PNA was published.

### 1.4 National Context

Following publication of the *NHS Five Year Forward View* <sup>(7)</sup> in 2014 which set out a clear direction for the NHS over the period to 2020/21 the *NHS Long Term Plan* in 2019 <sup>(8)</sup> set out the ambition to accelerate the redesign of patient care to future proof the NHS for the decade ahead.



The *NHS Long Term Plan* <sup>(8)</sup> acknowledged the essential role pharmacists play within a health and care system with a commitment to community pharmacy:

- *The NHS will work with government to make greater use of community pharmacists' skills and opportunities to engage patients, while also exploring further efficiencies through reform of reimbursement and wider supply arrangements.*

## 1.5 Pharmacy Services NHS Overview

There are more than 11,600 community pharmacies in England providing accessible healthcare alongside the dispensing of medicines. For a typical pharmacy, NHS income accounts for 85-95% of their total turnover.

Community pharmacies in England provide a range of services including:

- Dispensing and Repeat Dispensing;
- Support for self-care;
- Signposting patients to other healthcare professionals;
- Participation in set public health campaigns (to promote healthy lifestyles);
- Disposal of unwanted medicines.

Key findings of *General Pharmaceutical Services in England 2015/16 - 2020/21*<sup>(9)</sup> indicated that:

- There were 11,600 active community pharmacies and 112 active appliance contractors in England during 2020/21. 236 new pharmacies opened during 2020/21, while 451 closed. This is the lowest number of active contractors since 2015/16.
- 1.03 billion prescription items were dispensed by community pharmacies and appliance contractors in England in 2020/21. This is a 1.79% decrease from the number of items dispensed in 2019/20 but still a 2.35% increase in items dispensed since 2015/16.
- 964 million prescription items were dispensed via the Electronic Prescription Service (EPS) in 2020/21, 93.9% of all items dispensed in the year by community pharmacies and appliance contractors. This is an increase of 58.6 percentage points from 2015/16.
- The cost of drugs and appliances reimbursed to community pharmacies and appliance contractors totalled £8.97 billion in 2020/21. This was an increase of 3.72% from £8.65 billion in 2019/20 and a six year high despite the reduction in dispensed items in 2020/21.
- 2.77 million seasonal influenza vaccines were administered by community pharmacies in 2020/21. This was a 60.9% increase from the 1.72 million vaccines administered in 2019/2020 and a 365% increase on the 595 thousand vaccines administered in 2015/16.

Over 95% of community pharmacies now have a private consultation room from which they can offer advice to patients and a range of nationally commissioned services such as vaccine administrations and private, personal discussions regarding medicines. Many pharmacies are also commissioned to offer public health services by Local Authorities and the NHS.

## **1.6 Community Pharmacy Contractual Framework 2019-2024**

The Department of Health and Social Care (DHSC), NHS England and NHS Improvement, and the Pharmaceutical Services Negotiating Committee (PSNC) have agreed a five year plan, the *Community Pharmacy Contractual Framework (CPCF)* <sup>(10)</sup> which describes a vision for how community pharmacy will support delivery of the NHS Long Term Plan.

In August 2021, the Framework described how community pharmacy services would be more integrated in the NHS, provide more clinical services, be the first port of call for healthy living support as well as minor illnesses and to support managing demand in general practice and urgent care settings.

The Pharmacy Quality Scheme (PQS) replaced the Quality Payments Scheme with the gateway and quality criteria changed on an annual basis, with some becoming CPCF Terms of Service requirements during 2020/21. For the 2021/22 scheme, there was a focus on priorities supporting recovery from COVID-19 which officially began on 1st September 2021.

By 2023/24, as outlined in the CPFT, the NHS and PSNC's vision that community pharmacies in England will:

- Be the preferred NHS location for treating minor health conditions;
- Take pressure off urgent care, out of hours services and GPs, reducing waiting times and offering convenient care for patients, closer to their homes;
- Become healthy living centres, helping local people and communities to stay healthy, identifying those at risk of disease and reducing health inequalities;
- Provide diagnostic testing on-site related to minor illness;
- Support key NHS targets such as tackling antimicrobial resistance; and
- Continue to ensure patients can safely and conveniently access the medicines they need as well as doing more to improve patient and medicines safety.

## **1.7 Pharmacy Integration Fund**

The Pharmacy Integration Fund (PhIF) was established in 2016 to accelerate the integration of:

- Pharmacy professionals across health and care systems to deliver medicines optimisation for patients as part of an integrated system;

- Clinical pharmacy services into primary care networks building on the NHS Five Year Forward View and NHS Long Term Plan.

The community pharmacy contractual framework (CPCF) agreement for 2019 – 2024 sets out the ambition for developing new clinical services for community pharmacy as part of the five-year commitment. The pharmacy integration programme will pilot and evaluate these services with the intention of incorporating them into the national framework depending on pilot evaluations.

### **1.8 Point of care testing**

As part of the Community Pharmacy Contractual Framework agreement of 2019, NHS England and NHS Improvement committed to explore point-of-care testing (POCT) by community pharmacists to help in the drive to conserve the use of antibiotics. The impact of the COVID-19 pandemic and emergence of new POCT technologies that are more robust and less prone to error have now broadened the scope for the deployment of POCT in community pharmacies. This can help to improve the quality and efficiency of the delivery of diagnostic services closer to home and support the recovery of primary care. This drive also reflects the NHS Long Term Plan focus on prevention of ill-health, making the best use of the clinical skills of pharmacists and providing more clinical services in convenient and accessible locations in the community

Examples of NHS-commissioned POCT services that can now be delivered in community pharmacies are:

- Non-invasive blood pressure monitoring as part of the hypertension case finding and blood pressure checks.
- Urinalysis for possible urinary tract infections.
- Chlamydia screening for the under 25s.
- Carbon monoxide monitoring as part of smoking cessation services.
- COVID-19 rapid antigen testing.
- Blood glucose measurements as part of diabetes prevention services;
- Oxygen saturation using oximeters to assess people presenting with breathing difficulties.
- Peak flow measurements for patients with asthma.

### **1.9 Working across Kent and Medway**

The NHS across England is changing with the creation of 42 Integrated Care Systems (ICS) designed to support better co-ordination of health and care services and improve overall health and outcomes and reduce inequalities.

On 1 July 2022, the NHS changes were formalised and this includes the establishment of the NHS Kent and Medway Integrated Care Board (ICB) – a statutory NHS organisation. This replaces the previously stated target date of 1 April 2022.

The ICB takes over the responsibilities previously held by the Clinical Commissioning Group (CCG) within the region as well as some of NHS England's commissioning functions which includes dental, community pharmacy and optometry services. ICBs will be required to develop plans, working with NHS England regional commissioning teams to take on effective delegated commissioning functions from 2023/24.

The ICB is responsible and accountable for NHS spend and performance within the system. Other functions of the ICB include promoting integration of health and care services, improving people's health and wellbeing and reducing health inequalities.

Under the new regulations a Medway and Swale Health and Care Partnership (HCP) has been established to bring together all local partners including NHS organisations, local authorities, and other key stakeholders. The HCP will have the responsibility for agreeing an integrated care strategy for improving health and well-being across the whole of Medway and Swale.

In Kent and Medway all the NHS organisations and the Kent and Medway councils have previously been working together as a sustainability and transformation partnership (STP) since 2016. In April 2021 NHS England formally accredited the Kent and Medway STP as an Integrated Care System working towards an integrated vision:

“We will work together to make health and wellbeing  
better than any partner can do alone”

### **1.10 Medway strategic objectives**

The Medway Health and Wellbeing Board brings together Medway Council, the ICB and a range of partners to promote integrated working between commissioners of health services, public health and social care services to improve the health and wellbeing of local people. The Health and Wellbeing Board produces a *Joint Strategic Needs Assessment (JSNA)* <sup>(5)</sup> which describes the health and wellbeing of people in Medway and how this compares to the rest of England. The PNA forms an integral part of the JSNA, which informs the *Joint Health and Wellbeing Strategy 2018-2023* <sup>(4)</sup>.

*The Strategy* <sup>(4)</sup> provides a high-level framework for improving health and wellbeing in Medway. It is based upon five themes and is used to inform commissioning across the health and care system.

- Theme 1: Giving every child a good start
- Theme 2: Enabling our older population to live independently and well
- Theme 3: Preventing early death and increasing years of healthy life
- Theme 4: Improving mental and physical health and well-being
- Theme 5: Reducing health inequalities

Throughout the PNA, examples whereby community pharmacy can support the achievement of the five key themes will be identified.

## 2. The Medway Health System

### 2.1 GP surgeries (including extended access)

There are 40 GP practices within Medway delivering primary medical services; 4 of these are dispensing doctors. Details of the practice locations can be found in Appendix 4.

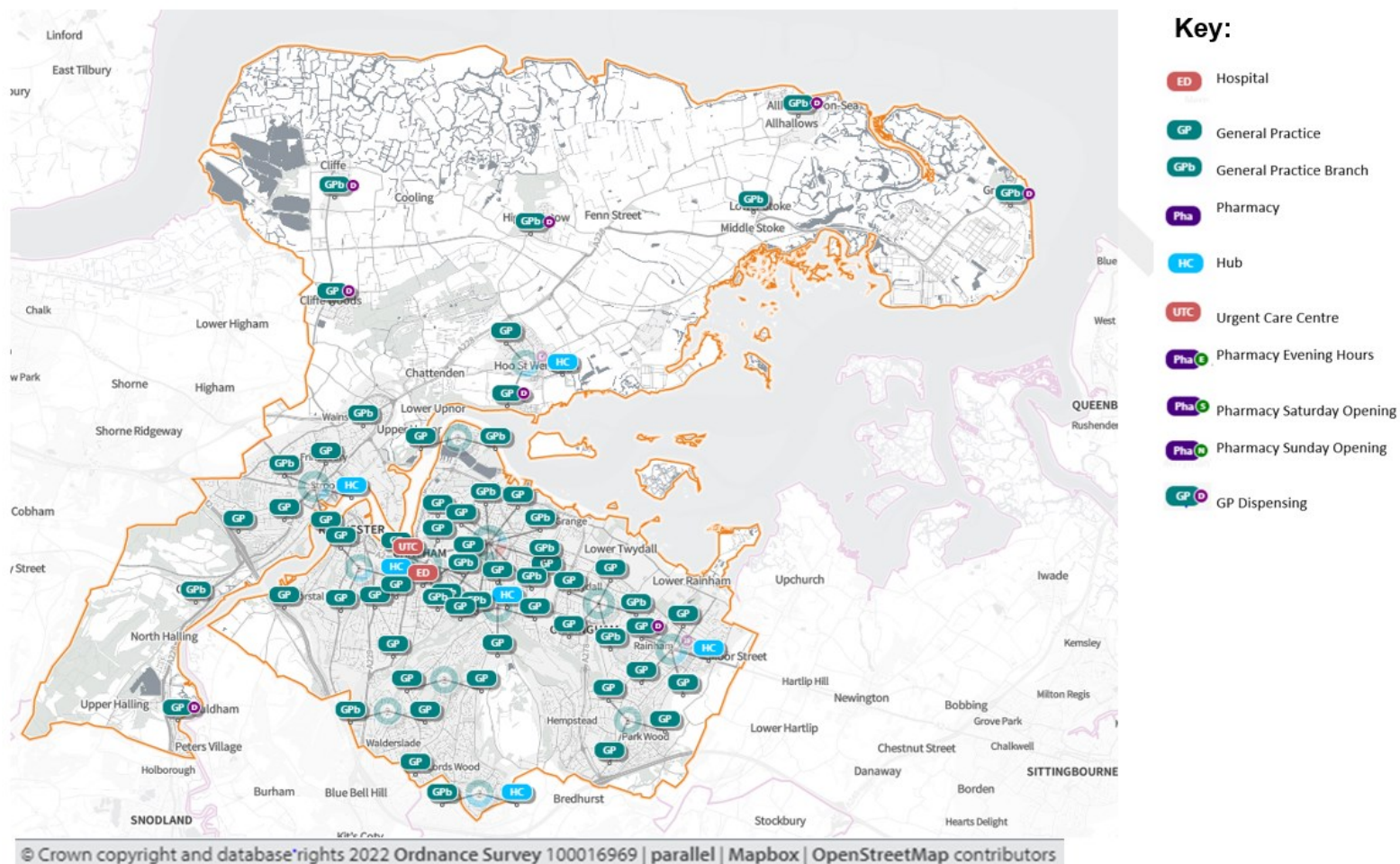
Extended access to GP services is provided by Medway Practices Alliance at 6 sites across Medway. The sites and hours of operation are detailed below:

HUB NAME, ADDRESS AND TEL NO.	MONDAY to FRIDAY OPENING TIMES <i>Bank Holidays Rochester Hub only – times as advised</i>	SATURDAY OPENING TIMES	SUNDAY OPENING TIMES
<b>Hub 1:</b> <b><u>ROCHESTER</u></b> Healthy Living Centre Delce Rd. Rochester ME1 2EL Tel: 01634 333 318	<u><i>Mon, Tues, Wed &amp; Thurs:</i></u> 08.00 to 20.00 2 x GP & 1 x ANP  <u><i>Fri:</i></u> 09.00 to 18.00 2 x GP & 1 x ANP	09.00 to 16.00 2 x GP 1 x ANP	09.00 to 14.00 2 x GP 1 x ANP
<b>Hub 2:</b> <b><u>RAINHAM</u></b> The Orange Suite Healthy Living Centre 103-107 High St. Rainham ME8 8AA Tel: 01634 333 375	<u><i>Mon, Tues &amp; Thurs:</i></u> 13.00 to 20.00 2 x GP  <u><i>Wed &amp; Fri:</i></u> 09.00 to 18.00 2 x GP		
<b>Hub 3:</b> <b><u>LORDSWOOD</u></b> Healthy Living Centre Sultan Rd. Chatham ME5 8TJ Tel: 01634 333 370	<u><i>Mon, Tues &amp; Thurs:</i></u> 08.00 to 20.00 2 x GP & 1 x ANP  <u><i>Wed &amp; Fri:</i></u> 09.00 to 18.00 2 x GP & 1 x ANP		

<p><b>Hub 4:</b></p> <p><b><u>HOO</u></b>  Walter Brice Centre  Tilley Close Hoo  Rochester  ME3 9AE  Tel: 01 634 382 201</p>	<p><b><u>Mon:</u></b>  <b>09.00 to 16.00</b>  <b>1 x GP</b></p>	<p><b>09.00 to 16.00</b>  <b>1 x GP</b></p>	<p><i>Currently closed for refurbishment until April 2022</i></p>
<p><b>Hub 5:</b></p> <p><b><u>BALMORAL</u></b>  Balmoral Gardens  Healthy Living Centre  Gillingham  ME7 4PN  Tel: 01 634 334 900</p>		<p><b>09.00 to 16.00</b>  <b>1 x GP</b></p>	
<p><b>Hub 6:</b></p> <p><b><u>STROOD</u></b>  Keystone Centre  Gun Lane  Rochester  ME2 4UL  01 634 719 252</p>	<p><b><u>Tues:</u></b>  <b>09.00 to 16.00</b>  <b>1 x GP</b></p>		

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**Figure 1: Map of GP practices highlighting extended access hub locations, Urgent Treatment Centre and Hospital**



## 2.2 GP enhanced services

NHS England or Clinical Commissioning Groups were able to commission “enhanced services” from GP practices. These are primary medical services (other than essential services, additional services or out of hours services) that go beyond what is required through the GP core contract. These have previously been referred to as Directed Enhanced Services (DES) or National Enhanced Services (NES). Enhanced services that are currently available with national specifications produced by NHS England are as set out in Table 1. This includes highlighting the possible contribution that community pharmacies can make now or in the future.

**Table 1: possible community pharmacy role in relation to GP enhanced services**

Service	Description
Health checks for people with a learning disability	<p>Allows GP practices to offer a medical to patients aged 14 years and over with a learning disability and produce a health action plan.</p> <p>Community pharmacies could help to deliver elements of individual patients’ health action plans by supporting behaviour change, providing advice and support about prescribed medications, supporting the management of long term conditions, help with self-care and signposting to other services.</p>
Targeted immunisation programmes	<p>Allows GP practices to provide the following targeted immunisation programmes:</p> <ul style="list-style-type: none"> <li>• childhood ‘flu (2 &amp; 3 year olds)</li> <li>• meningitis ACWY (18 year olds and University Freshers)</li> <li>• meningitis B (infants)</li> <li>• pertussis (pregnant women)</li> <li>• shingles (catch up)</li> <li>• seasonal ‘flu and pneumococcal (adults aged 65 and over and clinical at risk groups)</li> </ul> <p>Community pharmacies already make a significant contribution to improving access to seasonal ‘flu vaccine for adults aged 65 and over, adults in clinical at risk groups, adult carers and adult household contacts of people with a compromised immune system. For other immunisation programmes, community pharmacies can support uptake by promoting the benefits of immunisation and providing accurate information and advice.</p>



## 2.3 Primary Care Networks

Primary Care Networks (PCNs) are geographically based teams, led by GP practices in the PCN area, delivering services to their registered population of between 30,000 and 50,000 patients. PCNs have a Clinical Director providing strategic leadership and oversight of service delivery of the PCN and representing the PCN as part of the wider health and social care system.

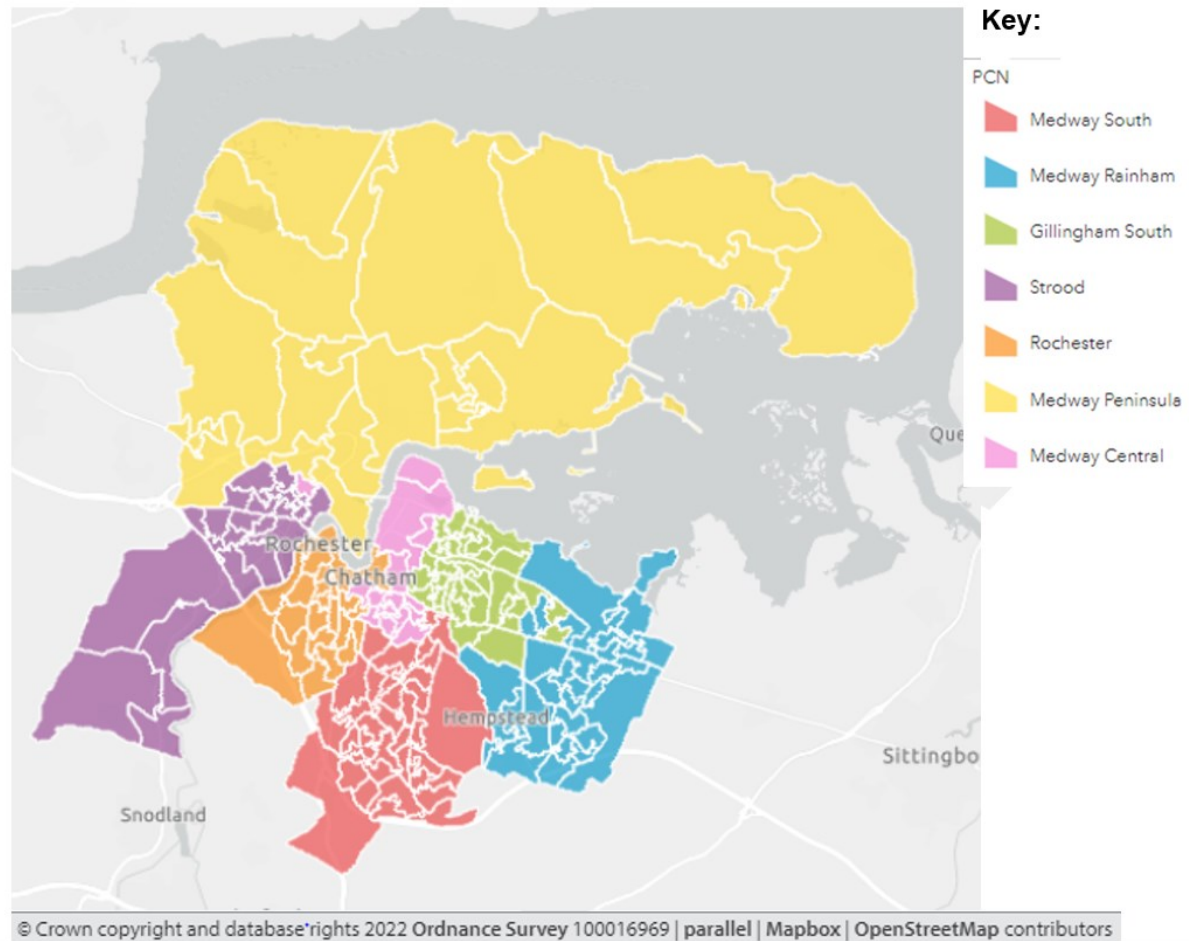
PCNs are expected to deliver seven NHS England specifications:

- Extended Hours Access
- Structured Medication Reviews and Optimisation
- Enhanced Health in Care Homes
- Anticipatory Care
- Personalised Care
- Supporting Early Cancer Diagnosis
- CVD Prevention and Diagnosis
- Tackling Neighbourhood Inequalities

There are seven PCNs within Medway:

- Rochester
- Medway Central
- Medway Peninsula
- Gillingham South
- Medway South
- Medway Rainham
- Strood

**Figure 2: Map of PCNs within Medway**



## **2.4 GP out-of-hours**

The GP out-of-hours service in Medway is provided by MedOCC. It deals with urgent problems and can also assess and manage patients with symptoms of cellulitis or deep vein thrombosis. The team works closely with district nursing teams, the rapid response team and other community/specialist teams. Patients who need urgent primary health care telephone the free NHS 111 service for guidance on the most appropriate service for their health needs; this includes access to the out of hours GP service, if appropriate. The service operates from Medway NHS Foundation Trust and can provide home visits if required. The hours of operation are from 6.30pm to 8.00am Monday to Friday and all day at weekends and on bank holidays.

## **2.5 Urgent Treatment Centre**

Medway's Urgent Treatment Centre (UTC) is located at Medway Maritime Hospital co-located with the Emergency Department. The service operates 24 hours a day, seven days a week.

## **2.6 Hospital Services**

There is one main hospital in Medway, Medway Maritime Hospital (Medway NHS Foundation Trust).

Hospital pharmacies do not provide services under the community pharmacy contractual framework and are therefore outside the scope of the PNA.

# **3. Pharmaceutical Needs Assessment process**

## **3.1 PNA development group**

As set out within section 1 of this PNA, the legislation that describes the duties of the Health and Wellbeing Board in regard to PNAs is the *National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013* <sup>(6)</sup> (as amended). As well as describing what each PNA was required to take into account when they were first developed and published, these 2013 Regulations also describe how each local PNA must be maintained by the HWB during its life.

The public health team within Medway Council oversaw the development of this PNA on behalf of the Medway Health and Wellbeing Board. In the process of undertaking

the PNA, a steering group was established in January 2022. The core membership of the group included representatives from the Medway Council public health team and planning policy team, Portfolio holder for Adult Services, Kent and Medway Clinical Commissioning Group, Kent and Medway Local Pharmaceutical Committee, NHSE and Medway Healthwatch. Full membership is set out in Appendix 2.

The steering group agreed the following:

- Terms of reference of the steering group, including the frequency of meetings;
- Content of a PNA questionnaire to pharmacists in Medway;
- Timeline of the PNA process;
- Structure of the PNA document;
- Process and questionnaires for engagement and consultation;
- Appropriate governance, including declaration of interests, and reporting arrangements.

The group was responsible for overseeing the completion of the PNA and ensuring it meets the minimum requirements set out in the regulations.

### **3.2 Determination of localities**

The *NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013* <sup>(6)</sup> state that, in making its assessment of needs, the Health and Wellbeing Board should have regard to the different needs of different localities in its area.

In accordance with this, the steering group considered how to assess these different needs and concluded that the most appropriate means of dividing the Medway area was to adopt the seven locality areas used by Medway and Swale Health and Care Partnership. These are as follows:

- Gillingham South
- Medway Central
- Medway Peninsula
- Medway South
- Rainham
- Rochester
- Strood

This approach is in line with the data available within the JSNA, although the Health and Wellbeing Board is also mindful that needs can vary between the wards in each locality and at sub-ward level.

### **3.3 Assessing health needs**

The *Local Government and the Public Involvement in Health Act 2007* <sup>(11)</sup> created the duty to undertake JSNAs. From April 2008, this duty was carried out by with local authorities and PCTs. The *Health and Social Care Act 2012* <sup>(1)</sup> transferred this duty, with effect from April 2013 to local authorities and CCGs to be exercised by Health and Wellbeing Boards.

This PNA is directly aligned to the Medway JSNA <sup>(5)</sup> and the statement of health needs is presented in section 4 of this document are consistent with it.

### **3.4 Current provision in Medway**

In order to assess the adequacy of provision of pharmaceutical services and other services provided by community pharmacies, the current provision of such services was identified and mapped using the previous PNA as a baseline. Initially this was based on information provided by the NHS England Sub Region, Kent and Medway CCG and Medway Council's public health team.

The information was then validated using a questionnaire made available to all community pharmacies including distance selling pharmacies. The questionnaire was not sent to appliance contractors. The survey was undertaken between 16.2.22 and 16.3.2022. A total of 36 out of 55 community pharmacy contractors responded, giving a response rate of 64%. A summary of the findings of the survey are described in section 10 with detail within Appendix 5.

In relation to the contractors who did not respond, information held by the local authority, based on information provided by the service commissioners (NHSE&I, Medway CCG and Medway Council) was used to inform PNA.

### **3.5 Future provision**

This PNA seeks to assess the current and future needs of the area, identifying any gaps in pharmaceutical services. Any such gaps may highlight the need for necessary provision or may require provision in specified future circumstances. In considering the future needs of the area and identifying any gaps in service the PNA has, in accordance with Regulation 9 (1) and (2), had regard to:

- The demography of Medway;
- Whether there is sufficient choice with regard to obtaining pharmaceutical services within Medway;
- The different needs of the localities within Medway;
- The pharmaceutical services provided in the area of any neighbouring Health and Wellbeing Boards

- Any other NHS services provided in or outside of Medway;
- Likely changes to the demography of Medway and/or the risks to the health or well-being of people of Medway.

The *Equality Act, 2010* <sup>(12)</sup> requires that in making this assessment, the needs of different population groups have been taken into account. This final PNA has been subject to a diversity impact assessment; this is included as Appendix 7.

### **3.6 Stakeholder engagement**

The views of the public and a range of agencies and groups were gathered in the form of a survey on Pharmacy Services. This was made available between 24/2/22 and 16/3/22 through Medway Council's website with the survey title "Help improve your local pharmacy services". The survey was also promoted using social media and through Healthwatch Medway and the Council standard communication channels.

In total, 389 people responded to the survey. These have been considered as part of this PNA. Section 10 and Appendix 6 of this document provides a summary of the analysis and outcomes of the public engagement.

### **3.7 Statutory consultation**

The formal consultation on the draft PNA for Medway ran from 20<sup>th</sup> April 2022 to 19<sup>th</sup> June 2022 in line with the guidance on developing PNAs and section 242 of the Health Service Act 2012, which stipulates the need to involve Health and Wellbeing Boards in scrutinising Health Services.

A total of 11 responses were received from community pharmacy providers, individual residents of Medway, GP practices, local provider organisations and NHSEI. In addition, comments regarding the draft PNA raised at Medway Council's Health and Wellbeing Board were included as part of the consultation response. A detailed summary can be found in Appendix 8.

In general, the consultation draft Pharmaceutical Needs Assessment 2022 was well received and supported with feedback which was generally positive. As a result of the consultation process a number of amendments were incorporated into the final PNA document with the agreement of the PNA Steering Group.

### **3.8 Recommendations and update from the previous PNA 2018 – 2021**

Following development of the PNA 2018-2021, Medway Health and Wellbeing Board made the following statements and recommendations:

- a) Overall, there is good pharmaceutical service provision in most of Medway from Monday to Friday. The majority of residents can access a pharmacy within a 20-minute walking distance and there is adequate choice of pharmacy.
- b) Where the area is defined as rural by NHS England, there are dispensing practices to provide pharmaceutical services to the rural population from Monday to Friday. Most of the patients who live in the rural areas can access a community pharmacy within a 20-minute car drive if necessary.
  - a. Hoo Peninsula: although there are mitigations in place such as deliveries by pharmacies and the use of internet pharmacy, it is recommended that the Health and Wellbeing Board monitors the situation on the Hoo Peninsula and explores whether wHoo Cares or other voluntary organisations can help to support access to pharmacies where public transport links are weak. Also, NHS England is expected to liaise with local providers and voluntary organisations such as wHoo Cares to achieve an innovative financially viable solution to the current situation.
  - b. Cuxton Village: it is important for the Health and Wellbeing Board to monitor the area to see if the need in the area changes significantly over the next three years (the life of the PNA).
- c) In urban areas there is good provision of pharmaceutical services on Saturdays and Sundays.
- d) In rural/outlying areas, access to pharmaceutical services on Saturdays is good where there is a local village pharmacy.
- e) There are proposed future housing developments across Medway which will mean that these areas will need to be reviewed on a regular basis to identify any significant increases in pharmaceutical need.
- f) The effect of the nearby proposed London Resort (formerly Paramount) site plans in North Kent is unlikely to have an effect on Medway over the next three years i.e., the life of the 2018 PNA.
- g) The current provision of “standard 40-hour” pharmacies should be maintained, especially in rural/outlying areas.
- h) The current provision of pharmacies who are contracted to open for at least 100 hours should be maintained.
- i) Any application must demonstrate that it is necessary, will provide value to the NHS and can improve on the availability of services across the specific area.
- j) Permission for any applicant to provide extra pharmaceutical services to this area must be carefully considered as to whether it will destabilise the current providers, resulting in closures and fewer pharmaceutical services being available at crucial times.
- k) The area is changing rapidly and as well as consulting this PNA, the PSRC at NHS England should carry out a rapid review of any area where there is an application, to ensure that the needs of this area have not changed in the lifetime of the PNA. This could include review of rural and urban classification and should be published alongside the PNA in the supplementary statements.
- l) The Health and Wellbeing Board has the responsibility for publishing supplementary statements when the pharmaceutical need and services to an area change significantly. It is the responsibility of the organisation managing the GMS contracts to inform NHS England when a practice ceases to dispense as this could affect the overall provision of pharmaceutical services across an area. It is the responsibility of NHS England to inform the HWB of any changes to pharmaceutical service provision, including dispensing services, so that a

decision can be made as to whether this change will affect access. This is particularly important where pharmacies are closing or consolidating due to the impact of recent funding cuts. The HWB has a duty to respond to all notifications under Regulation 26A (consolidation of pharmacies). It is proposed that the supplementary statements are issued every 3 months by NHS England (a member of the Board) as they hold all the relevant data. They will be published on the Medway Council website alongside the PNA.

## 4. An overview of Medway

This section includes information from the *Joint Strategic Needs Assessment (JSNA)* <sup>(5)</sup>. It provides a summary of the health needs of Medway and highlights relevant issues for the commissioning of pharmacy services.

### 4.1 Introduction

Medway is situated on the banks of the River Medway and is one of the largest urban conurbations in the South East outside of London. Medway Unitary Authority was formed in 1998 and consists of five main towns (Strood, Rochester, Chatham, Gillingham and Rainham), as well as a number of smaller towns and villages. Over time, the built-up areas of the main towns have expanded and in places there is little demarcation between the end of one town and the beginning of the next. While the towns are densely populated, there are larger more sparsely populated rural areas in the Hoo peninsula (to the north of Medway) and Cuxton and Halling (in the west).

Medway's economy is built upon a strong industrial heritage and has also had a petrochemical industry on the Hoo peninsula since Victorian times. Today, manufacturing and engineering are the largest sectors (by value) in Medway, but there is a broad and diverse range of industry sectors contributing to the local economy.

### 4.2 Population profile and demography

Medway has a population of 279,142. <sup>(1)</sup> The population has increased by 15,215 since the 2011 census <sup>(13)</sup> and the population is projected to reach 304,000 by 2028. <sup>(14)</sup> Natural growth remains Medway's main source of growth and there is also a significant flow of migrants into Medway from London. Significant outward migration from Medway - most notably to parts of Kent - has reduced the overall level of growth in recent years.

Compared to England, the population of Medway has a smaller proportion of people aged 65 and over (16.2% compared to the England average of 18.5%). Medway has a larger proportion of people between the ages of 0 and 14 compared to England (19.9% and 18.1% respectively), and between the ages of 15 and 24 years.



According to the 2011 census, the majority of the population (89.6%) in Medway are classified as White, with the next largest ethnic group being Asian or Asian British (5.2%) including Chinese. The proportion of the population that is White is slightly larger than in England and slightly lower than in Kent, although these differences are not significant. There are also no significant differences in ethnicity by gender. School census data <sup>(37)</sup> suggest that there has been a rapid increase in the proportion of people from minority ethnic groups in some parts of Medway; data from the 2021 census will be published later in 2022 and may confirm this.

### **4.3 Housing and Development Strategy**

Medway Council is in the process of preparing to adopt a new Local Plan to provide direction on the future growth of the area. The aim of the Local Plan is to ensure that Medway grows sustainably and to provide land for homes, jobs and services while protecting and enhancing the qualities of the area's environment and heritage. Medway is one of the largest urban areas and the population is growing (although the rate of growth has slowed in recent years) which results in some pressures on land supply to meet projected housing needs.

The tables below details housing delivery predictions. The housing trajectory includes all sites with planning permission (not started/under construction), as well as Strategic Land Availability Assessment (SLAA) sites and a figure for windfalls (35).

**Table 2: Housing delivery predictions**

Trajectory															
20/21	21/22	22/23	23/24	24/25	25/26	26/27	27/28	28/29	29/30	30/31	31/32	32/33	33/34	34/35	35/36
<b>Completions</b>	<b>Projected Annual Completions</b>														
1,082	1,375	1715	1784	2395	2131	1780	1878	1687	1925	1818	1901	1745	1550	1442	973

Year	20/21	21/22	22/23	23/24	24/25	25/26	0-5 yrs	5-10 yrs	10-15 yrs	15+ yrs
<b>Net Completions</b>	1,082	-	-	-	-	-	-	-	-	-
<b>Large site apps</b>		1,282	1,596	1,051	1,289	925	6,143	1,387	0	100
<b>Small site apps</b>		93	69	137	30	4	333	7	0	0
<b>SLAA sites</b>		0	50	596	852	978	2,476	6,574	6,491	3,116
<b>Windfall Allowance</b>		0	0	0	224	224	448	1,120	1,120	448
<b>Total</b>		1,375	1,715	1,784	2,395	2,131	9,400	9,088	7,611	3,664

**Phasing over the next 15 years (commitments on large and small sites)\***

<b>5 year period</b>	<b>0-5 years</b>	<b>5-10 years</b>	<b>10-15 years</b>
<b>No of dwellings</b>	6,476	1,394	0

\*figures in this table do not include SLAA sites or a windfall allowance

Until the Local Area Plan is published, figures on the number of anticipated new dwellings by PCN area could be subject to change. The following outlines the current estimates of the impact of housing development on population growth within Medway (36):

- Estimated population growth of 22,082 by 2038 in the rural towns of Hoo, Chattenden, Allhallows and High Halstow (Medway Peninsula)
- Estimated population growth of 20,369 in Chatham over 42 sites expected to be delivered by 2038.
- More modest growth in Gillingham with a total population growth of 5,762 from an estimated 2,401 new dwellings by 2035.
- An estimated population growth of 12,106 in Rochester and Strood from at least 5,044 new dwellings with the majority of these planned to be completed within the next 10 years.

#### 4.4 Life expectancy

Life expectancy at birth for males in Medway is 78.3, compared with the England average of 79.4. For females, life expectancy at birth is 82.4 compared with the England average of 83.1. <sup>(16)</sup> Medway is similar to most local authorities in that there is a gap in life expectancy between the affluent and those living in relative deprivation. There is generally an association between life expectancy at birth and deprivation in Medway.

**Figure 3: Health State Life Expectancy for Medway and England (average) <sup>(17)</sup>**

	Medway	England
Males	Life expectancy: <b>78.3</b> Healthy life expectancy: <b>60.9</b>	Life expectancy: <b>79.4</b> Healthy life expectancy: <b>63.1</b>
Females	Life expectancy: <b>82.4</b> Healthy life expectancy: <b>63.6</b>	Life expectancy: <b>83.1</b> Healthy life expectancy: <b>63.9</b>

Medway lags behind the England position and the people of Medway live, on average, shorter lives than the England average. They also live, on average, a greater part of their lives with illness or disability which limits their daily activities.

#### 4.5 Wider determinants of Health

Wider determinants, also known as social determinants, are a diverse range of social, economic and environmental factors which impact on people's health. They determine the extent to which different individuals have the physical, social and personal resources to identify and achieve goals, meet their needs and deal with changes to their circumstances. The Marmot review <sup>(18)</sup>, published in 2010, raised the profile of wider determinants of health by emphasising the strong and persistent link between social inequalities and disparities in health outcomes. Addressing the wider determinants of health has a key role to play in reducing health inequalities.

The Index of Multiple Deprivation 2019 measures socioeconomic disadvantage across seven domains:

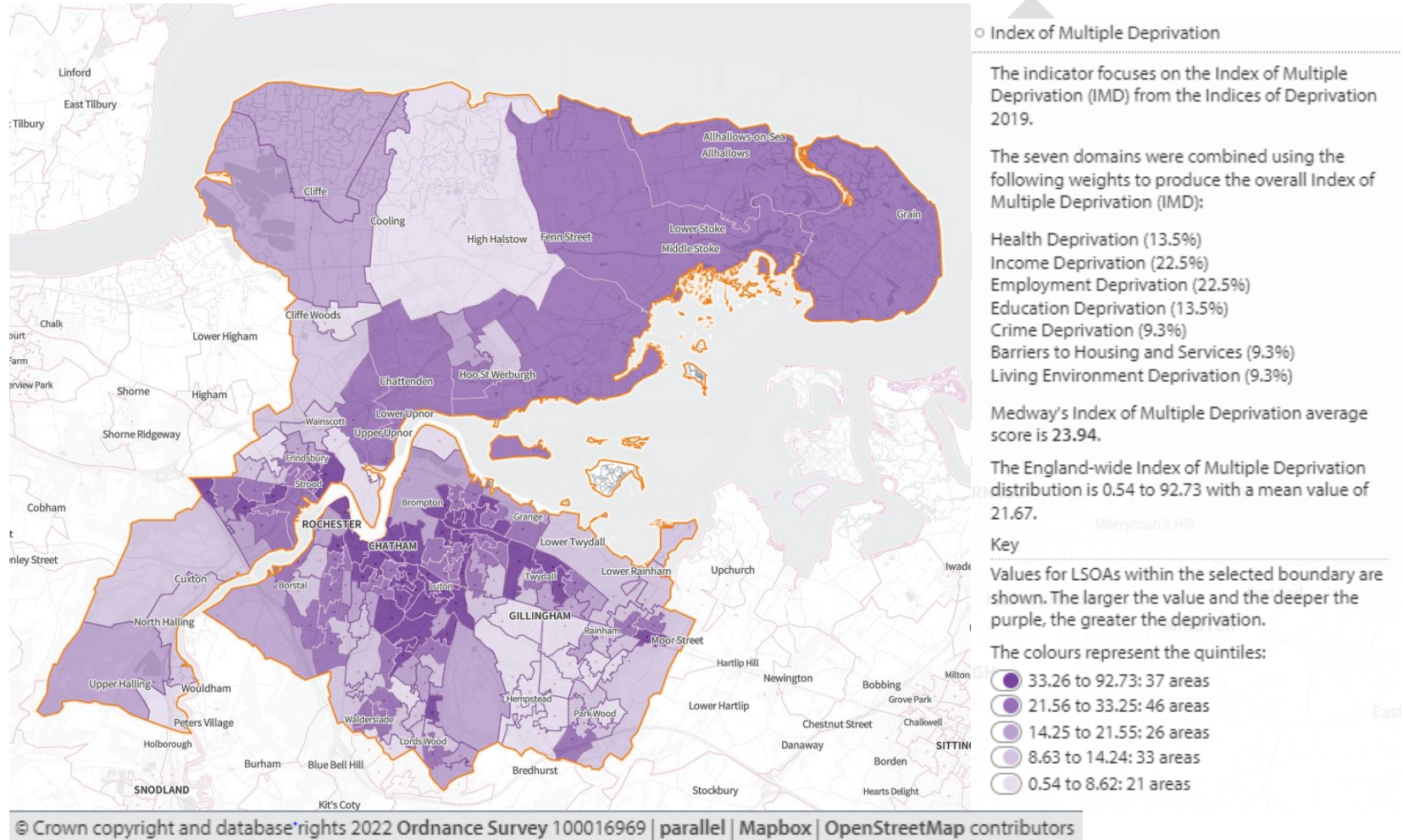
- Income
- Employment
- Health
- Education

- Barriers to housing and services
- Crime
- Living environment

The overall IMD2019 is a weighted average of the indices for the seven domains. Data is published by Lower Super Output Area (LSOA) - Super Output Areas are a geographic hierarchy designed to improve the reporting of small area statistics; Lower Super Output Areas have an average population of 1500. Between IMD2015 and IMD2019, Medway saw an increase in the number of LSOAs in the 10% most deprived LSOAs. The IMD2019 deprivation score for Medway is 23.9, compared with 21.7 for England.

DRAFT

**Figure 4: Index of Multiple Deprivation – LSOA Medway, 2019**



### **4.5.1 Income**

Households living on low incomes experience many disadvantages which can be far-reaching. Households in employment may still be in poverty, as income may not be sufficient to meet the costs of accommodation and daily living. Low income households are particularly vulnerable to changes in the cost of living and suffer the social exclusion and increased health risks of poverty.

Average (mean) full-time earnings for workers who are Medway residents was £606.10 per week; this is below the average for Great Britain (£613.10)<sup>(19)</sup>

18.2% of children are living in low-income families in Medway compared to 13.3% for the region and 19.1% nationally.

### **4.5.2 Employment**

Employment for working-age people can protect against social exclusion as well as impacting positively on health and wellbeing.

The percentage of out of work benefit claimants Medway (aged 16-64) in January 2022 was 4.8%, higher than the regional figure of 6.8% and the national figure of 4.4%.

In Medway 148,200 people (80.9% of the population) are economically active, with 19.1% economically inactive.<sup>(19)</sup>

### **4.5.3 Education, skills, qualifications**

Low educational attainment is correlated with poorer life outcomes and poor health.

The percentage of all children achieving a good level of development at the end of Reception is 73.7% for Medway, below the regional average of 74.6% but above the national average of 71.8%).<sup>(16)</sup>

In 2020/21, the percentage of 16/17-year-olds in Medway not in education, employment, or training (NEET) was a combined figure of 7.9% (regional figure was 6.4% and national figure was 5.5%).

In 2020 37.35 of 16–64-year-olds in Medway were qualified to at least NVQ Level 4 or higher (37.7%) compared to the region (45.1%) and Great Britain (43.1%).<sup>(19)</sup>

### **4.5.4 Housing and Homelessness**

In 2019/20, 1525 assessments on homelessness were made in Medway with 55.2% owed a prevention duty (threatened with homelessness within 56 days). 43.2% were owed a relief duty and 1.6% were assessed as not homeless.

#### 4.5.5 Crime

Crime can have a wide-ranging effect on people's health. In Medway, indicators relating to violent offences per 1000 of the population and sexual offences per 1000 of the population are higher than the regional and England averages. Reoffending levels are similar to the regional average and below the England average.

#### 4.6 Health Needs

##### 4.6.1 Smoking

Smoking accounts for more lives lost than any other modifiable risk factor. People from lower socio-economic groups, those suffering from mental health conditions and some minority ethnic groups have higher rates of smoking. Factors influencing smoking prevalence include educational attainment, employment, housing, income, and social cues. Young people who grow up in a household where adults smoke are more likely to become smokers themselves.

Smoking prevalence in Medway has been declining year on year and the gap between national and local prevalence has been eliminated. However, there is variation at ward level with 5 wards (Gillingham North, Chatham Central, Luton & Wayfield, Gillingham South and Strood South) all having a prevalence rate of over 15%.<sup>(20)</sup>

In Medway 10% of those aged 15 years were reported to be smokers in 2014/15, this compares to 8.2% in England.<sup>(21)</sup> More recent data from the Smoking, Drinking and Drug Use Among Young People in England survey reports a 5% prevalence rate for England in 2018. However, this survey does not provide local data.

Medway has seen a statistically significant decrease in the percentage of women smoking at time of delivery (SATOD) since 2010/11 with the rate reducing from 19.9% to 15.2% in 2019/20. England has also seen a decrease in this time period from 13.6% to 10.4%<sup>(16)</sup>

How pharmacies can support:

- NHS Health Checks
- Smoking Cessation
- Nicotine Replacement Therapy
- Active Intervention Smoking Cessation
- Smoking Cessation Advanced Service
- Supporting the annual public health campaign

## 4.6.2 Alcohol

In England, 10 million or more people drink at levels which increase their risk of health harms, and alcohol consumption is a leading factor for ill-health. Among those aged 15 to 49 in England it is the leading cause for ill-health, early mortality and disability. <sup>(22)</sup>

In Medway:

Alcohol-related mortality rate per 100,000 was 44.0 for 2020 (compared to 33.9 for the region and 37.8 for England)

Admissions episodes for alcohol-specific conditions for 2020/21 was 389 per 100,000 (compared to 540 for the region and 587 for England) <sup>(16)</sup>

How pharmacies can support:

- NHS Health Checks
- Healthy Living advice
- Signposting to services

## 4.6.3 Substance misuse

Substance misuse refers to the harmful or hazardous use of psychoactive substances, including alcohol and drugs. Drug misuse includes the harmful use of illegal drugs, 'legal highs' and prescription-only medicines. Substance misuse impacts on crime, health and social costs. Estimates of the prevalence of opiate and crack cocaine produced in 2016/17 <sup>(23)</sup> suggest that Medway has a rate of 8.09 per 1,000 population aged 15-64 opiate and/or crack cocaine users compared to an England rate of 8.85 per 1,000 and a regional rate of 6.17 per 1,000 of population. This is an increase of an estimated 200 users when compared with previous prevalence estimates produced in 2014/15.

In 2020-21, 920 adults received structured drug treatment in Medway; 56.5 percent for opiates (520 adults), 14.7 percent for non-opiate and alcohol (135 adults) and 11.4 percent for non-opiates only (105 adults) <sup>(24)</sup>. The number of adults in drug treatment in Medway has increased year on year since 2017/18.

Detailed below are the characteristics of people who were in drug treatment in Medway in 2020-21:

- **Gender:** 70 percent of adults in drug treatment in Medway were male and 30 percent were female
- **Age:** The age group with the largest proportion of adults in drug treatment in Medway was 30 to 39 (64%)



- **Ethnicity:** Ninety-five percent of adults in treatment were white, and two percent were mixed/multiple ethnic groups.

When engaged in effective treatment, people use fewer illicit drugs, commit less crime, improve their health and manage their health better. Preventing early drop-out and keeping people in treatment long enough to benefit contributes to these improved outcomes.

How pharmacies can support:

- Needle and syringe exchange
- Supervised administration of opiate substitutes
- Testing for blood borne diseases (e.g. Hep C)
- Brief intervention
- Signposting to support services

#### 4.6.4 Obesity

Living with being overweight or obese can have significant implications for an individual's physical and mental health. It can impact on family health and wellbeing, business and education, and contribute to significant costs across health, social care and a wide range of services.

Overweight and obesity are terms that refer to having excess body fat, which is related to a wide range of diseases, most commonly:

- type 2 diabetes;
- hypertension (high blood pressure);
- some cancers;
- heart disease;
- stroke; and
- liver disease.

In Medway, 71.6% of adults are classed as overweight compared to the regional average of 61.5% and England average of 62.8%). For reception age children, 25.5% are considered overweight or obese, compared to 21.9% for the region and 23.0% for England. This rises to 36.9% for year 6 children (compared to 31.7% for the region and 35.2% for England). 23.8% of adults are physically inactive (compared to 20.1% for the region and 22.9% for England). 39.3% of children and young people are physically active (compared to 45.4% for the region and 44.6% for England) <sup>(16)</sup>.

How pharmacies can support:

- Healthy Living Pharmacy - offering information, advice and support
- NHS Health Checks
- NHS Weight Management Programme referrals
- Promotion of health lifestyles
- Hypertension case finding service
- Supporting the annual public health campaign

## **4.6.5 Sexual Health**

### **4.6.5.1 Sexually Transmitted Infections**

The health and economic wellbeing of any population and the wellbeing of individuals can be critically influenced by sexual health. The financial case for sexual health services has been made repeatedly; effective sexual health services and the prevention of sexually transmitted infections (STI) and unplanned conceptions are cost-saving. Health inequalities exist within sexual health and key population groups can be identified for whom there are greater risks of experiencing sexual ill health. These are as follows: young people; gay, bisexual or other men who have sex with men; black and minority ethnic groups; and women of reproductive age.

In Medway, diagnostic rates in 2020 for both syphilis and gonorrhoea were below the England average (5.7 per 100,000 compared to 12.2 per 100,000 for syphilis and 64 per 100,000 compared to 101 for gonorrhoea). The chlamydia detection rate per 100,000 aged 15-24 is 1638 compared to the England average of 1408<sup>(16)</sup>.

Based on data for 2020, Medway has relatively low rates of HIV diagnosis (3.1 per 100,000 aged 15-59 compared to 5.7 per 100,000 for England). HIV testing coverage is 37.6%, falling below the England average of 46.0%. 54.7% of diagnoses are considered late (all CD4 less than 350), compared to 42.4% for England.

### **4.6.5.2 Teenage pregnancy**

Areas of high social disadvantage and deprivation typically correlate with high teenage pregnancy rates for reasons such as low aspirations, poor uptake of services and the cyclical nature of teenage pregnancy. Medway is typical of this trend. In 2019,

the under 18 conception rates (per 1,000) in Medway was 21.5% compared to a regional rate of 12.7 per 1,000 and an England rate of 15.7 per 1,000 <sup>(16)</sup>.

How pharmacies can support:

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

#### **4.7 Cancers**

Death rates from all cancers have decreased significantly over the last two decades due to a combination of early detection and improved treatment.

The rate of mortality from cancer in under 75s (3 year range, 2017-2019) in Medway was 144.5 per 100,000. This compares to 121.6 per 100,000 for the South East and 129.2 per 100,000 for England <sup>(16)</sup>.

How pharmacies can support:

- Advice and support
- Signposting
- Medicines optimisation
- New medicine service
- Discharge medicine service

#### **4.8 Long-term conditions**

A long-term condition (LTC) is a condition that cannot, at present, be cured but is controlled by medication and/or other treatment/therapies. Lifestyle factors play a major role in the prevention and management of LTCs and are largely modifiable. Healthier lifestyle patterns can delay the onset of chronic diseases, reduce premature deaths and have a considerable positive impact on wellbeing and quality of life.

The prevalence of long-term conditions increases with age and the proportion of the population with multiple long-term conditions also increases with age. People from lower socio-economic groups have increased risk of developing a long-term condition; better management can help to reduce health inequalities.

Information about how well the Medway health system delivers against the evidence-based standards of care for these conditions can be found in the JSNA <sup>(5)</sup> and health profiles <sup>(16)</sup>.

#### 4.9 Cardiovascular disease

Cardiovascular disease (CVD) covers a number of different problems of the heart and circulatory system. It is more prevalent in lower socio-economic and minority ethnic groups.

Death rates from cardiovascular disease have decreased significantly over the last two decades due to a systematic approach to secondary prevention and improved treatment.

Cardiovascular disease is a cause of premature death and health inequalities with a death rate of 70.6 per 100,000 persons aged under 75 in 2017-2019 in Medway <sup>(16)</sup>. The rate of premature mortality from cardiovascular disease considered preventable is 27.4 per 100,000 persons aged under 75 for the same period (2019 definition) <sup>(16)</sup>. Both rates are higher than the regional average, but lower than the England average.

How pharmacies can support:

- NHS Health Checks
- Education and support
- New medicine service
- Discharge medicine service
- Hypertension case finding service

#### 4.10 Diabetes

Diabetes is a chronic and progressive disease that impacts upon almost every aspect of life. It can people of all ages and is becoming more common. Diabetes can result in premature death, ill-health and disability, yet these can often be prevented or delayed by high quality care. Preventing Type 2 diabetes (the most common form) requires action to identify those at risk who have non-diabetic hyperglycaemia and prevention activities to tackle obesity, diet and physical activity.

How pharmacies can support:

- Lifestyle advice and support including low carb diet and exercise
- Healthy living advice

## 4.11 Respiratory

Respiratory diseases (those affecting the airways and lungs) are diagnosed in 1 in 5 people and are the third leading cause of death in the UK, after cardiovascular disease and cancer. They are also a major driver of health inequalities, and much of this disease is largely preventable. Respiratory disease covers a wide variety of conditions, including common conditions such as asthma and chronic obstructive pulmonary disease (COPD), lung cancer, infections such as pneumonia and flu, and less common diseases such as interstitial lung disease and mesothelioma. <sup>(25)</sup>

Within Medway, respiratory diseases are a contributor to premature death and health inequalities with a death rate of 36.1 per 100,000 persons aged under 75 in 2017-19 <sup>(16)</sup> compared to 27.7 per 100,000 for the region and 33.6 per 100,000 for England. The rate of premature mortality from respiratory disease considered preventable is 22.3 per 100,000 population aged under 75 for 2017-2019 (2019 definition). This is higher than regional and England rates.

How pharmacies can support:

- Advice and support
- Correct inhaler technique
- New medicine service
- Discharge medicine service

## 4.12 Dementia

Dementia is a group of related symptoms associated with an on-going decline of brain functioning. This may include problems with memory loss, confusion, mood changes and difficulty with day-to-day tasks.

The biggest risk factor for dementia is age; the older you are the more likely you are to develop the condition. But dementia is not an inevitable part of ageing. Although it is not possible to completely prevent dementia, leading a healthy lifestyle and taking regular exercise can lower the risk of dementia.

There are different types of dementia; all of them are progressive and interfere with daily life. Alzheimer's disease and vascular dementia together make up the vast majority of cases. Although there is no cure for dementia, early diagnosis and the right treatment can slow its progress, help to maintain mental function, and give time to prepare and plan for the future. The estimated dementia diagnosis rate (aged 65 and over) for Medway in 2021 is 50.7%, which is below the England position (61.6%)<sup>(16)</sup>.

How pharmacies can support:

- Dementia Friends Programme
- Compliance aid assessment
- Repeat prescription service
- Care home advice and support
- New medicine service
- Discharge medicine service

#### 4.13 Mental Health and Mental Wellbeing

In recent years, there has been increasing recognition of the impact of mental illness on the population. A wide range of variable factors can affect people's mental wellbeing both positively and negatively throughout their lives. People with mental illness are more likely to experience physical illness and have a lower life expectancy than people without mental illness.<sup>(26)</sup> It is estimated that people living with severe mental illness may die up to 20 years earlier than the general population.<sup>(27)</sup>

For 2018 - 2020, premature mortality in adults with severe mental illness was 102.9 per 100,000 (directly standardised rate) for Medway, compared with 83.4 per 100,000 for the region and 103.6 per 100,000 for England. The excess under 75 mortality rate in adults with a serious mental health illness for 2018 - 2020 was 385.4% for Medway (compared to 507.45 for the region and 451.0% for England)<sup>(16)</sup>. This rate is a measure of the extent to which adults with a serious mental health illness die younger than adults without a serious mental health illness. The suicide rate in 2018 – 2020 was 8.8 per 100,000 and this was below the regional rate (10.1%) and the England rate (10.4%)<sup>(16)</sup>.

Emergency hospital admissions for intentional self-harm in 2020/21 was 221.6 per 100,000 of population, higher than the regional figure of 201.9 per 100,000 and the England figure of 181.2 per 100,000<sup>(16)</sup> For the region, the self-reported wellbeing for low happiness and high anxiety scores in 2020/21 were both above the England average<sup>(16)</sup>.

How pharmacies can support:

- Information, advice and support on self-management and signposting to services

## 5. Current Provision of Pharmaceutical Services

### 5.1 Overview

NHS England & NHS Improvement (NHSE&I) is responsible for administering pharmacy services and for maintaining information regarding opening hours for all pharmacies, which is handled locally by South East Region (Thames Valley).

A table listing the current pharmacist services and key opening times is attached in appendix 3 and the figure 5 shows the location of the community pharmacy provision across Medway.

In Medway, there are currently 54 contractors providing NHS pharmaceutical services made up of:

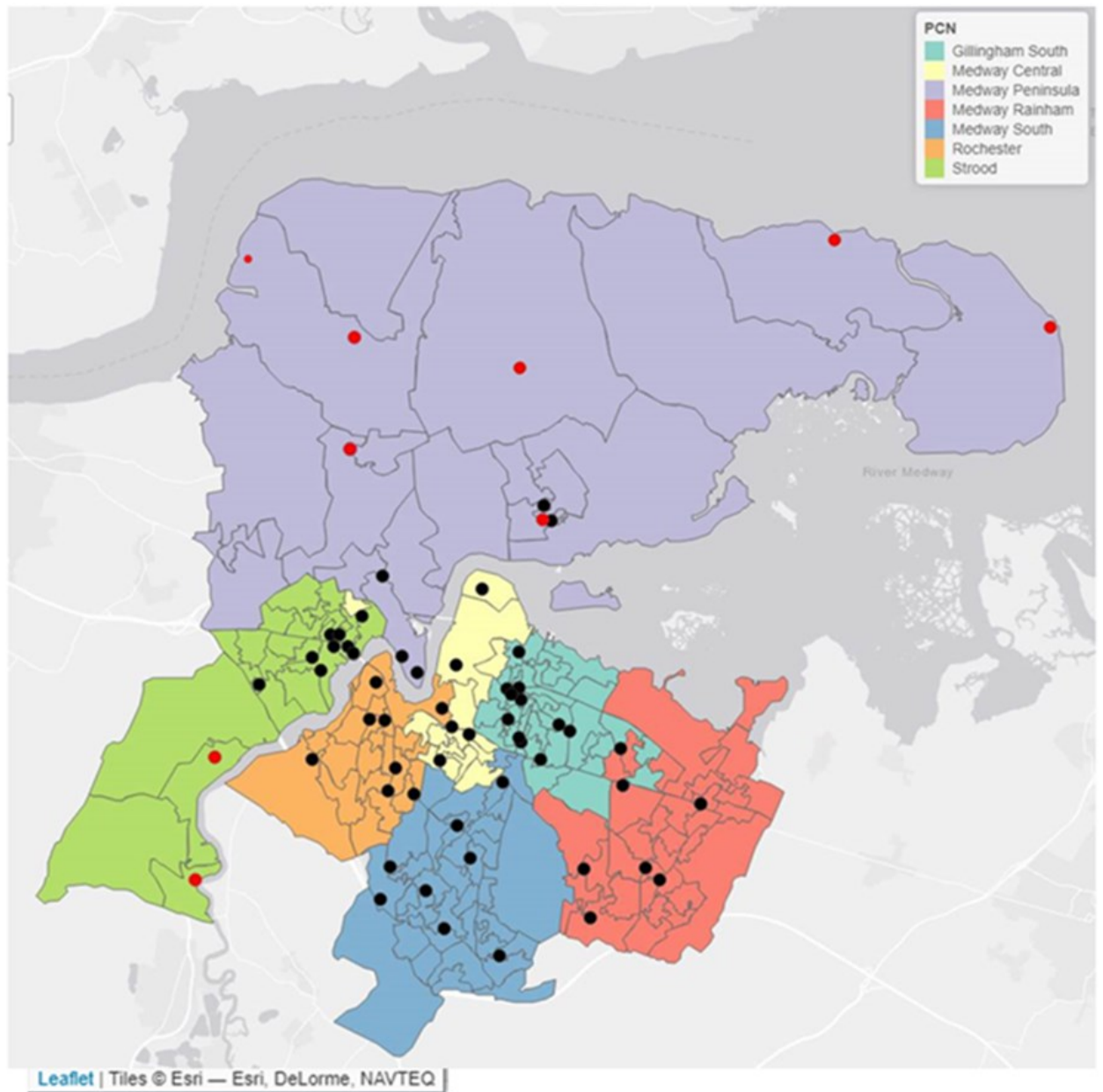
- 45 Standard contract (40 hour) pharmacies
- 6 100-hour pharmacy
- 2 Distance selling pharmacies
- 1 Appliance contractors
- 4 Dispensing doctors' services (over 8 sites, 7 of which are within Medway)

Based on ONS data population estimates (mid 2020)<sup>(13)</sup>, the national average number of pharmacies is 17.3 per 100,000 population in England, not including dispensing practices; this equates to one pharmacy per 5,784 population.

With 54 community pharmacy services in the Medway area and a population of 279,142 (based on ONS 2020 mid-year population estimates), the average number of community pharmacies is 19.3 per 100,000 people; this equates to one pharmacy per 5,169 population. i.e. slightly less than the national average (For further information see section 6.4).

If only the 51 "high street" pharmacies (pharmacies that people can walk into to access a range of services) are considered (i.e., excluding distance selling pharmacies and appliance contractors), the average number of pharmacies in Medway re-calculates as 18.27 per 100,000 population or one pharmacy per 5,474 population.

**Figure 5: Current Pharmacy provision in Medway**



**Key:**

- Community pharmacy
- Dispensing GP surgery

Dispensing doctors provide alternative access to dispensed medicines outside of community pharmacy provision. See section 5.7 for more details



In addition, in Medway there are also 4 dispensing doctors with branch sites providing services to the more rural locations of the area. This further extends access to dispensing services by 7 locations within the Medway boundary.

Prescribing and data reports (ePACT2) published by NHS Business Services Authority in January 2022 indicated that a total of 5,075,596 items were prescribed by GPs in the Medway HWB area in 2020/21 (see section 6 for further information on community pharmacy dispensing activity).

There has been a decrease of one 40-hour pharmacy and two 100-hour pharmacies in Medway since the last PNA was published. In addition, one distance selling pharmacy located in Medway closed in March 2022. See table 3 for a summary of the change in the number of community pharmacies.

Further information regarding these changes and access to pharmacy services is described in section 6.

**Table 3: Change in number of community pharmacies by type of pharmacy in Medway since the PNA 2018** NHSE info and PNA 2018(3)

Type of Pharmacy	2017	2022
<i>Standard Pharmacy (40 hour)</i>	46	45
<i>100 hour</i>	8	6
<i>Distance selling</i>	3	2
<i>Non-exempt Dispensing Appliance Contractors</i>	1	1
<b>TOTAL</b>	<b>58</b>	<b>54</b>
<i>Dispensing Doctors</i>	4 (8* sites)	4(8* sites)

\* One Medway practice has a dispensing function in a branch site that is located out of the Medway boundary (see section 5.7).

## 5.2 Standard contract (40 hours)

Figure 5 shows the current provision of essential pharmaceutical services within the Medway local authority boundary.

### **5.2.1 Core hours**

Community pharmacy contractors provide Essential Services (see section 7.1 essential services) as part of the NHS Community Pharmacy Contractual Framework (the 'pharmacy contract'). Most community pharmacies provide a core of 40 hours per week, although some pharmacies may be contracted to provide a 100-hour pharmacy service, and some may offer less than 40 hours.

Core opening hours can only be changed by first applying to NHS England and NHS Improvement and as with all applications, these may be granted or refused.

### **5.2.2 Supplementary hours**

These are provided on a voluntary basis by the pharmacy contractor, often based on patient need and business viability. As such, they are additional to the core hours provided. Supplementary hours can be amended by giving NHS England 90 days' notice of the intended change but would not be expected to fall unless there had been prior reduction in demand.

In Medway, a number of community pharmacies provide extended opening with the provision of supplementary hours, including 9 that provide between 50 and 60 hours and 5 that provide services for between 60 - 85 hours per week (detailed in section 6).

### **5.3 100-hour pharmacies**

Previous regulation <sup>(6)</sup> provided an exemption to the control of entry system for premises which are kept open for at least 100 hours per week for the provision of pharmaceutical services. Such 100-hour pharmacies provide extended and out-of-hours cover for pharmaceutical services across Medway. The new control of entry system came into force on 1st September 2012 whereby decisions on pharmacy contract applications became based on local PNAs. This removed the 100-hour exemption and exemptions allowing pharmacies to open automatically if they were situated in out-of-town shopping centres or one-stop primary care centres.

There are currently six 100-hour pharmacies within Medway which is a reduction of two 100-Hour service since the previous PNA was published.

### **5.4 Pharmacy Access Scheme**

In October 2016, as part of the renewed funding package for community pharmacies in England, the Department of Health and Social Care (DHSC) introduced of a Pharmacy Access Scheme (PhAS). This was to give patients access to NHS community pharmacy services in areas where there are fewer pharmacies with higher

health needs, so that no area need be left without access to NHS community pharmaceutical services.

This scheme has been updated from January 2022, with revised criteria, and is based on both the dispensing volume of the pharmacy, and distance from the next nearest pharmacy. Information provided by NHS England and NHS improvement in January 2022 indicated that three pharmacies in Medway were identified as being eligible for the Pharmacy Access Scheme for 2022 these are:

- Lloyds Pharmacy, Kestrel Road, Lordswood, Chatham
- Focus Chemists, Borstal Street, Rochester
- Island Pharmacy, Aster Drive. St Mary's Island, Chatham

## **5.5 Dispensing appliance contractors**

Dispensing Appliance Contractors (DAC) specialise in the supply of prescribed appliances such as catheter, stoma and incontinence products and dressings. These items are usually delivered direct to the patient's home. Community pharmacies can also provide this service, in accordance with the pharmaceutical regulations.

Dispensing appliance contractors (DAC) are different to pharmacy contractors because they only dispense prescriptions for appliances and cannot dispense prescriptions for medicines. They tend to operate remotely, receiving prescriptions either via the post or the electronic prescription service, and arranging for dispensed items to be delivered to the patient.

There is one Dispensing Appliance Contractor in Medway which has had a change of company and trading name in March 2021.

The majority (82%) of prescriptions for appliances generated in Medway primary care settings were dispensed by pharmacies, the appliance contractor and dispensing doctors within the Medway area. However, 18% of the appliances were found to be dispensed by appliance contractors outside the locality and across a broad range of suppliers. It is likely that these products are more specialist and therefore may not be supplied by all providers. This pattern of supply of appliance providers was found to be consistent for the last 3 years.<sup>(28)</sup>

## **5.6 Distance selling pharmacies**

Distance selling pharmacies are required to deliver the full range of essential services, though the 2013 regulations<sup>(6)</sup> do not allow them to provide essential services to people on a face-to-face basis on the premises of the pharmacy. They will receive prescriptions either via the electronic prescription service or through the post, dispense them at the pharmacy and then either deliver them to the patient or arrange for them to be delivered.

They must provide essential services to anyone, anywhere in England, where requested to do so and may choose to provide advanced services, but when doing so must ensure that they do not provide any essential or advanced services whilst the patient is at the pharmacy premises.

As of 30 June 2021, there were 379 distance selling premises in England, based in 115 health and wellbeing board areas. Not every health and wellbeing board therefore has one in their area, however, it is likely that some of their residents will use one. There are currently 2 distance selling pharmacies based in Medway.

## **5.7 Dispensing Doctors**

NHS legislation provides that in certain rural areas (classified as controlled localities) general practitioners may apply to dispense NHS prescriptions. A reserved location is designated, in a controlled locality, where the total patient population within 1.6 km (one mile) as the crow flies, of the proposed location of a new pharmacy is less than 2,750 at the time an application is received. Patients living in these areas have the choice of having their prescriptions dispensed from a pharmacy or from a dispensing GP, if one is available within their practice. Where an application for a new pharmacy is made in a controlled locality, a determination must also be made as to whether the location of the pharmacy is in a reserved location.

In Medway, there are 4 dispensing doctors, some of which have additional branch sites that also provide dispensing services:

- Riverside has a dispensary at both Cuxton and Halling branches
- HighParks dispensary is at Cliffe surgery Millcroft Rd branch
- The Elms – dispensary services at 4 branch sites across the Peninsula
- Maidstone Road Surgery has a main branch in Rainham (which doesn't dispense) but has a branch site at Upchurch within Swale that does dispense.

Dispensing of prescriptions by dispensing doctor services in Medway accounted for 5% (approximately 250,000 items) of the dispensed items in 2020/21, locations of which can be seen on figure 5. These services provide additional access to dispensing services for the population of Medway located in more rural areas.

## **5.8 Hospital Pharmacy Services**

NHS hospital trusts and private hospitals do not provide services under the community pharmacy contractual framework and are therefore outside the scope of the PNA.

## 5.9 Out of area providers of pharmaceutical services

Consideration has been given to pharmaceutical services provided by community pharmacy contractors outside of Medway area that provide dispensing services to the registered population. Out of area providers may include community pharmacies that are in neighbouring HWB areas, in particular those that may be close to the boundaries. In addition, distance selling pharmacies which may be in more distant locations provide an alternative dispensing and delivery service.

In Medway, the majority (92%) of the prescriptions issued by prescribers are dispensed by pharmacies or dispensing doctors within Medway. In addition to this, it is important to note that over the last 3 years, an average of 5% of the prescriptions dispensed by community pharmacies in the area are prescribed by GP practices out of the area, again demonstrating the cross-boundary activity.

Further information regarding dispensing activities and access to pharmacies are in sections 6.2 and 6.7 of this report.

## 6. Access to Community Pharmacy services in Medway

Since the last PNA 2018 <sup>(3)</sup> the following significant changes to pharmacy provision in Medway include the closure of the following premises:

- Lloyds, Hempsted Valley Shopping Centre Rainham provided a 100-hour service: closed September 2020
- Paydens, Balmoral Gardens, Gillingham South provided a 100-hour service: closed September 2020
- Lloyds, Station Road, Rainham North provided a 40-hour service: closed December 2020
- Hope Online Pharmacy, Knight Park Industrial Estate, Strood provided a Distance Selling pharmacy service: closed March 2022

There has also been some relocation of existing pharmacy services to alternative locations within the HWB area, generally close to previous sites and some changes of ownership or names of services.

A full list of pharmacy services is summarised in Appendix 3.

NHSE&I acknowledged that during the pandemic, there were occasions when temporary adjustments were needed to pharmacy opening hours as workload and other pressures on community pharmacy increased. It was recognised as important that pharmacy staff stay well and rest appropriately. Contractors were supported to consider steps to temporarily shorten the working day or have periods of time for staff to recover and catch up with any backlog of work.

All pharmacies, both those providing 40- and 100-hour services were required to be open at specific times during the day as defined by NHSE&I and patients provided with information about how to contact the pharmacy if urgent help was required. This

flexible approach to opening hours was no longer applicable by the time this PNA was carried out.

Subsequently, there have been some changes in hours of service, specifically regarding supplementary services rather than changes in core service delivery, with formal notification to NHSE&I as required by the NHS Regulations.

## 6.1 Number, type of pharmacies and geographical distribution

The following table shows the distribution of community pharmacies across the localities within Medway.

**Table 4: Distribution of community pharmacies, by locality**

Medway Locality	40-hour	100-hour	Distance selling	Appliance contractor	TOTAL
Gillingham South	8	2	0	0	10
Medway Central	7	0	0	0	7
Medway Peninsula	4	0	1	1	6
Medway South	9	1	0	0	10
Rainham	7	1	0	0	7
Rochester	6	1	0	0	7
Strood	5	1	1	0	7
<b>Total</b>	<b>45</b>	<b>6</b>	<b>3</b>	<b>1</b>	<b>54</b>

Data source: <sup>(29)</sup>

## 6.2 Dispensing activity in Medway

**Table 5: Average number of items dispensed per pharmacy (including Appliance contractors, distance selling pharmacies) in Medway, 2020/21**

	No of community pharmacies	Number of prescription items dispensed by pharmacies	Average no. of prescription items dispensed per pharmacy
Medway HWB area	55	4,626,589	84,120
England	11,600	1,030,000,000	86,711

- Dispensing doctors dispensing activities in Medway have been excluded from this information
- Hope Online pharmacy was providing dispensing services during this time period, therefore included in the figures

On average, community pharmacies in Medway dispensed around 84,120 prescription items per pharmacy during 2020/21 <sup>(28)</sup> compared to an average of 86,711 for England <sup>(29)</sup>. In addition, dispensing doctor practices sited in the more rural areas dispensed 5% of the prescriptions issued within the Medway area, thus providing additional access to dispensed medicine services.

In 2020/21, of the 55 pharmacy stores in Medway, 33 (60%) are part of a multiple or chain of pharmacy stores (defined as having 5 or more premises). Therefore, 40% of the pharmacy premises in Medway are smaller "independent" pharmacy stores. The community pharmacy stores which are part of the multiple chain accounted for 49% of the dispensed items in the Medway area in 2020/21. This indicates that the population of Medway make similar use of independent pharmacies as the larger businesses.

### **6.2.1 Out of area dispensing activity**

Prescribing and data reports (ePACT2) <sup>(28)</sup> published by NHS Business Services Authority in January 2022 indicated that in 2020/21, 92% of the items prescribed by GP practices in Medway were dispensed by pharmacies or dispensing GP practices in the Medway area and 8% (approximately 400,000 items) were dispensed "out of area".

The number of prescriptions dispensed out of area has increased over the last 3 years with 5.6% (approximately 285,000 items) being dispensed out of area in both 2018/19 and 2019/20.

Out of area dispensing may be due to people choosing to use a distance selling pharmacy for their medicine supplies or people who live on the boundaries of the area accessing pharmacies which are convenient to visit but are in a neighbouring HWB area.

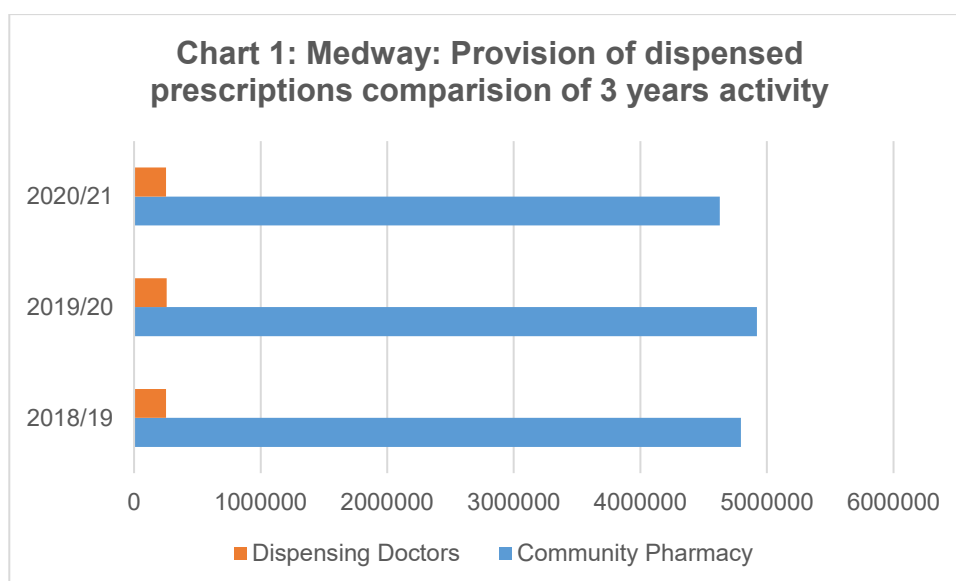
It is also possible that the change in out of area dispensing in 2019/20 has accounted for by people accessing pharmacies differently during the early phases of the COVID-19 Pandemic response.

To counter this information, Medway pharmacies also dispense some prescriptions services that are sourced from prescribers located out of the Medway boundaries. This activity has been seen to have reduced slightly over the last 3 years. In 2020/21, 4.3% of the dispensing activity of pharmacies in Medway were from prescribers out of area whereas in 2019/20 the activity was 4.5% and in 2018/19 it was 5.9%.

### **6.3 Access to pharmacies during pandemic**

Consideration has been given to whether people would use their pharmacies differently during periods of lockdown, restricted movement and working from home during the COVID-19 Pandemic. Chart 1 below indicates a similar annual trend

regarding the number of items being dispensed by pharmacies in Medway over the last 3 years during suggesting that generally, people have not significantly changed their pharmacy dispensing choices during this period.



#### 6.4 Access to pharmacies in areas of high population density

**Table 6: Average number of pharmacies per 100,000 population and persons per pharmacy in Medway**

Medway Locality	No of community pharmacies	Mid 2020 population estimate	Pharmacies per 100,000 population	Persons per pharmacy
Gillingham South	10	54,301	18.4	5,430
Medway Central	7	31,136	22.5	4,448
Medway Peninsula	6	29,912	20.1	4,985
Medway Rainham	7	46,425	15.1	6,632
Medway South	10	45,756	21.9	4,576
Rochester	7	35,670	19.6	5,096
Strood	7	35,942	19.5	5,135
<b>Medway area total</b>	<b>54</b>	<b>279,142</b>	<b>19.3</b>	<b>5,169</b>
<b>ENGLAND</b>	<b>11,600</b>	<b>56,550,138</b>	<b>20.5</b>	<b>4,879</b>

Data source (13 and 28)

Consideration of the number of pharmacies compared to the resident population, based on ONS 2020 mid-year population estimates seen in table 6 above indicates that across the Medway area, there are on average, 19.3 pharmacies per 100,000 population or 5,169 people per pharmacy in the area. This is slightly below the average of 20.5 pharmacies per 100,000 population or 4,879 persons per pharmacy



across England. Further to this, dispensing doctor facilities in the more rural locations within Medway provide additional access to dispensed medicines, accounting for an average of 5% of the dispensed medicines in the area.

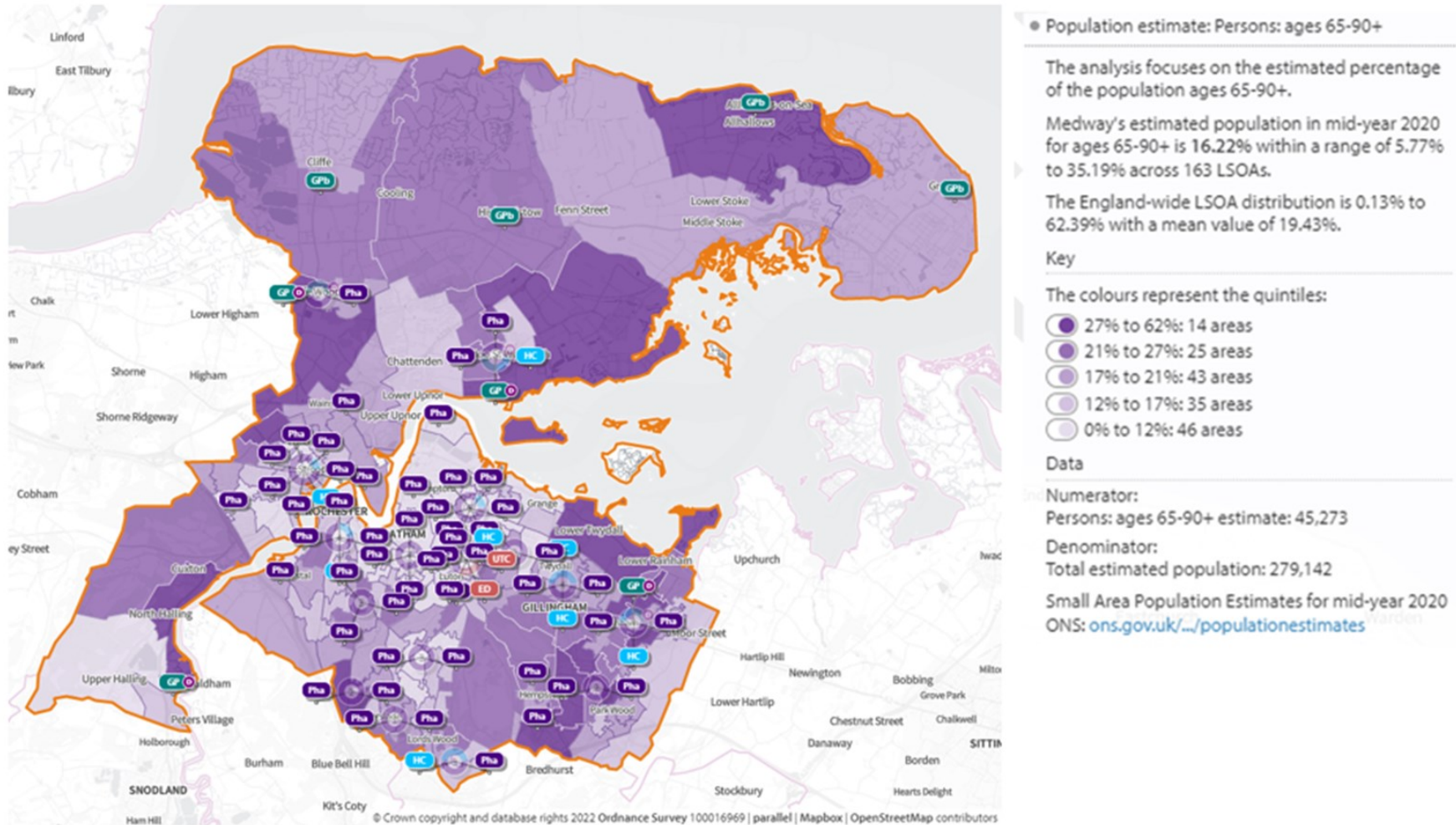
In terms of the location of pharmacies and the population density in Medway, as seen in figure 5, it can be seen that generally, the pharmacies are situated in the more concentrated populated areas, in particular in the northern part of Strood Locality, Rochester and Medway Central.

In contrast to this, the more rural areas of Medway, in particular on the Peninsula and Cuxton where the population is sparser, there is less pharmacy provision. In response to this, there is provision of dispensing doctor practices which are accessible to dispense medicines.

Figure 6 shows the distribution of community pharmacies and dispensing doctors in or near to areas with a high proportion of the population aged 65 and over where the darker shading on the map indicates the more densely populated areas. In general, the pharmacies are located in areas where there is more dense population although there are areas, such as on the Peninsula, where there is an older population and there are few pharmacies. This is compensated for, in part, with the dispensing doctor service provision although other pharmacy services, in particular the advanced services such as the New Medicine Service and the Hypertension case finding services may be less accessible to people in the more rural areas.

## 6.5 Access to pharmacies for older people

**Figure 6: Access to pharmacies in areas with a high proportion of the population aged 65 years and over, in Medway**



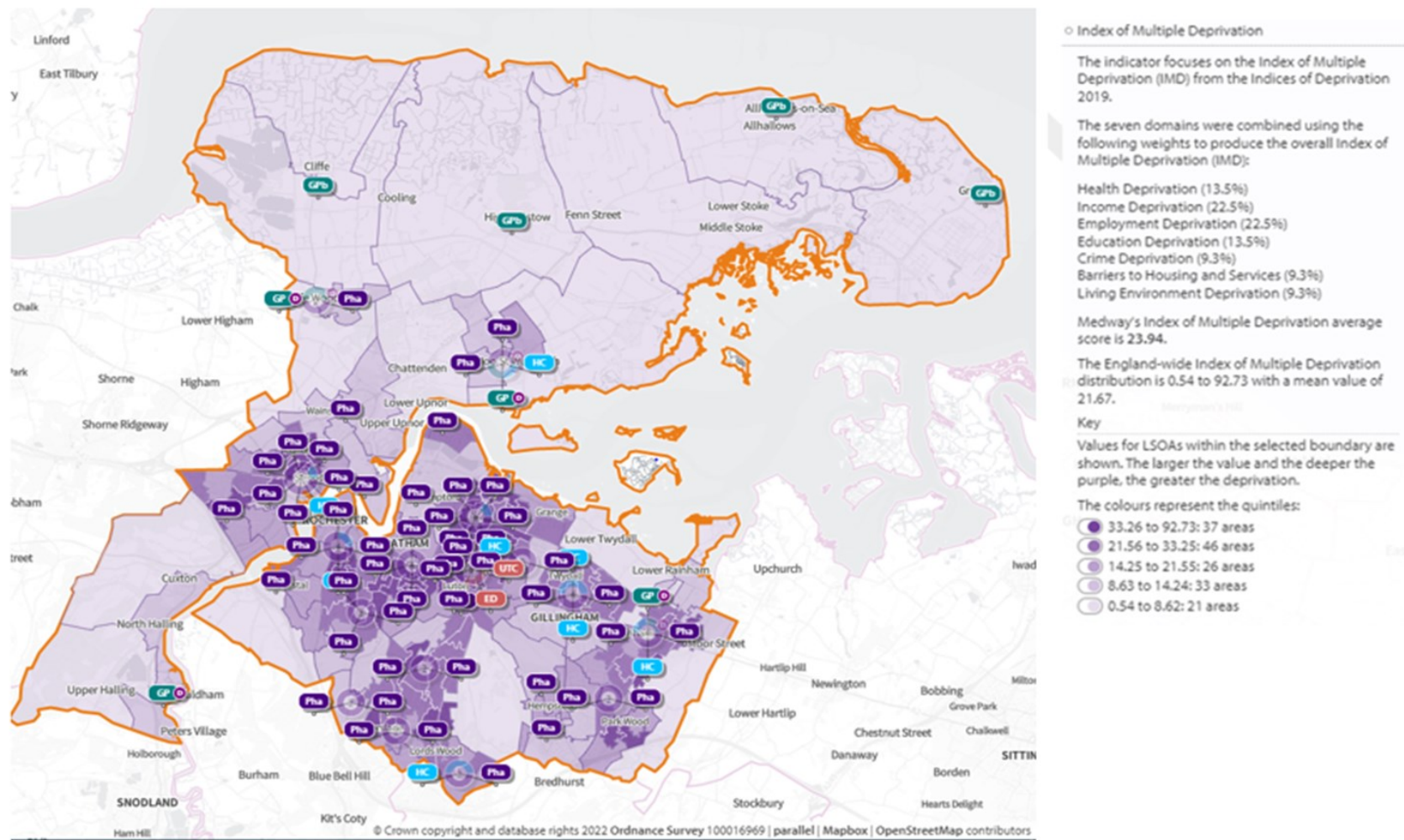
## 6.6 Access to pharmacies in areas of high deprivation

Figure 7 shows that generally there is a good distribution and sufficient provision of community pharmacies in or near to areas with the highest levels of deprivation. As noted previously, the exception to this is in the Peninsula and Cuxton where there are dispensing doctors rather than pharmacies providing access to dispensed medications.

This is in line with research findings from Durham University <sup>(30)</sup> which concluded that, across England, 89% of the population live within a 20-minute walk of a community pharmacy. Furthermore, there is greatest access in the most deprived areas, where 99.8% of the population live within a 20-minute walk of a community pharmacy.

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**Figure 7: Access to pharmacies in areas with high levels of deprivation (based on the Index of Multiple Deprivation 2019), in Medway**



## 6.7 Access to pharmacies by opening hours

As described in section 5 community pharmacy contractors are required to open for a minimum of 40 core hours per week unless a reduction is agreed with NHS England. These core hours are provided as part of essential pharmacy services. There are six 100-hour pharmacies in Medway, opened under the previous exemption which enabled longer opening hours, and these pharmacies must be open for at least 100 hours per week as core hours. Dispensing appliance contractors, one is based in Medway, are required to open for a minimum of 30 core hours per week.

In Medway, 89% of pharmacies are open for more than the core contracted 40 hours. Information provided by NHSE&I <sup>(29)</sup> in June 2022 indicated that an additional 441 supplementary hours of access to community pharmacy services were being provided per week across the Medway area.

Table 7 below and the charts that follow illustrate how important supplementary hours are to the provision of good access to pharmaceutical services

**Table 7: Distribution of the number of hours that pharmaceutical service (excluding Appliance Contractor) available each week in Medway 2021**

*Information from NHSE&I January 2022, updated June 2022*

Number of hours open each week	Number	%
Exactly 40 hours	5	9%
More than 40 and up to 45 hours	13	25%
More than 45 and up to 50 hours	15	28%
More than 50 and up to 55 hours	7	13%
More than 55 and up to 60 hours	2	4%
More than 60 and up to 80 hours	4	8%
More than 80 and less than 100 hours	1	2%
Exactly 100 hours	6	11%

In addition to the six 100-hour pharmacies in Medway, there are 5 pharmacies that provide significantly extended supplementary hours beyond their 40-hour core contracts. These pharmacies provide access to services on weekday evenings and both Saturdays and Sundays.

The HWB board recognises the importance of access to pharmacies in the evenings and weekends and that, in addition to the 100-hour pharmacy provision, some pharmacies, often located in Shopping Centres and supermarkets, provide extended opening hours as supplementary hours which, if reduced could impact on access for the population of Medway.

## 6.8 Ease of access to pharmacies

The following sections provide a summary of the opening hours of community pharmacies in Medway, split between weekdays and weekend provision. For the weekdays a pharmacy has been counted as being open during a particular time slot if it is open on three out of the five days.

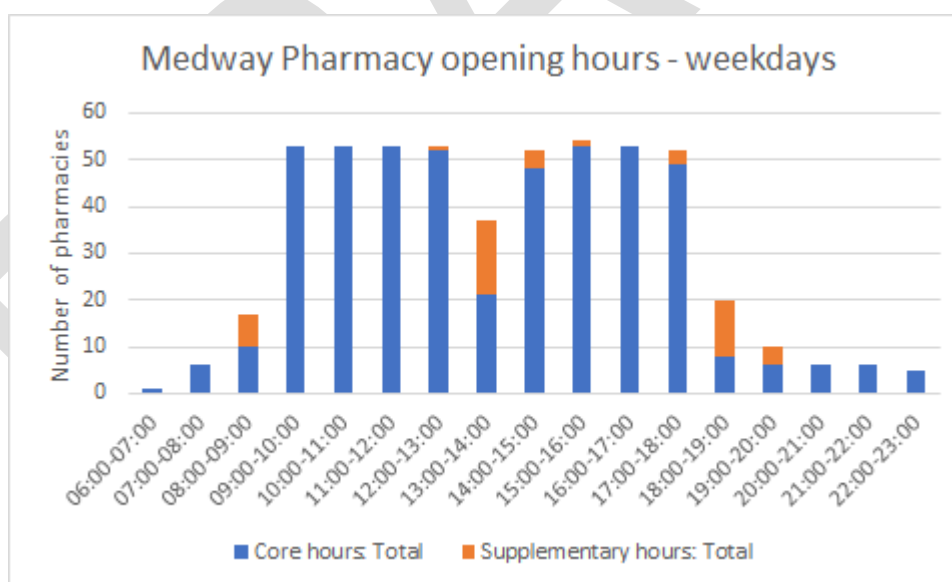
Figure 5 shows the location of these pharmacies in the Medway area. Full information regarding opening hours is described in appendix 3 including any variations to this general overview.

### 6.8.1 Weekday opening

Access to community pharmacy across Medway is well provided for during the hours from 9:00 am until 6:00 pm on weekdays across Medway.

31 pharmacies in Medway that are not 100-hour pharmacies remain open without closing for lunch time. Most of the pharmacies that have a break in service are closed for an hour over lunchtime.

Chart 2 shows the distribution trend of opening hours across the Medway area and how these are delivered in terms of core and supplementary hours.



#### 6.8.1.1 Weekday mornings

All community pharmacies in Medway are open from 9 am on weekday mornings. The pharmacies providing earlier opening times, as seen in chart 2, are generally those providing a 100-hour service and therefore these opening hours are included in the

core service. The majority of 40-hour pharmacies are open from 9 am in the weekday mornings.

In each locality, there is at least one pharmacy service that is open from 8.30 am and in 2 localities (Gillingham South, Rochester and Strood) there is at least one pharmacy premise open from 7 am on weekday mornings.

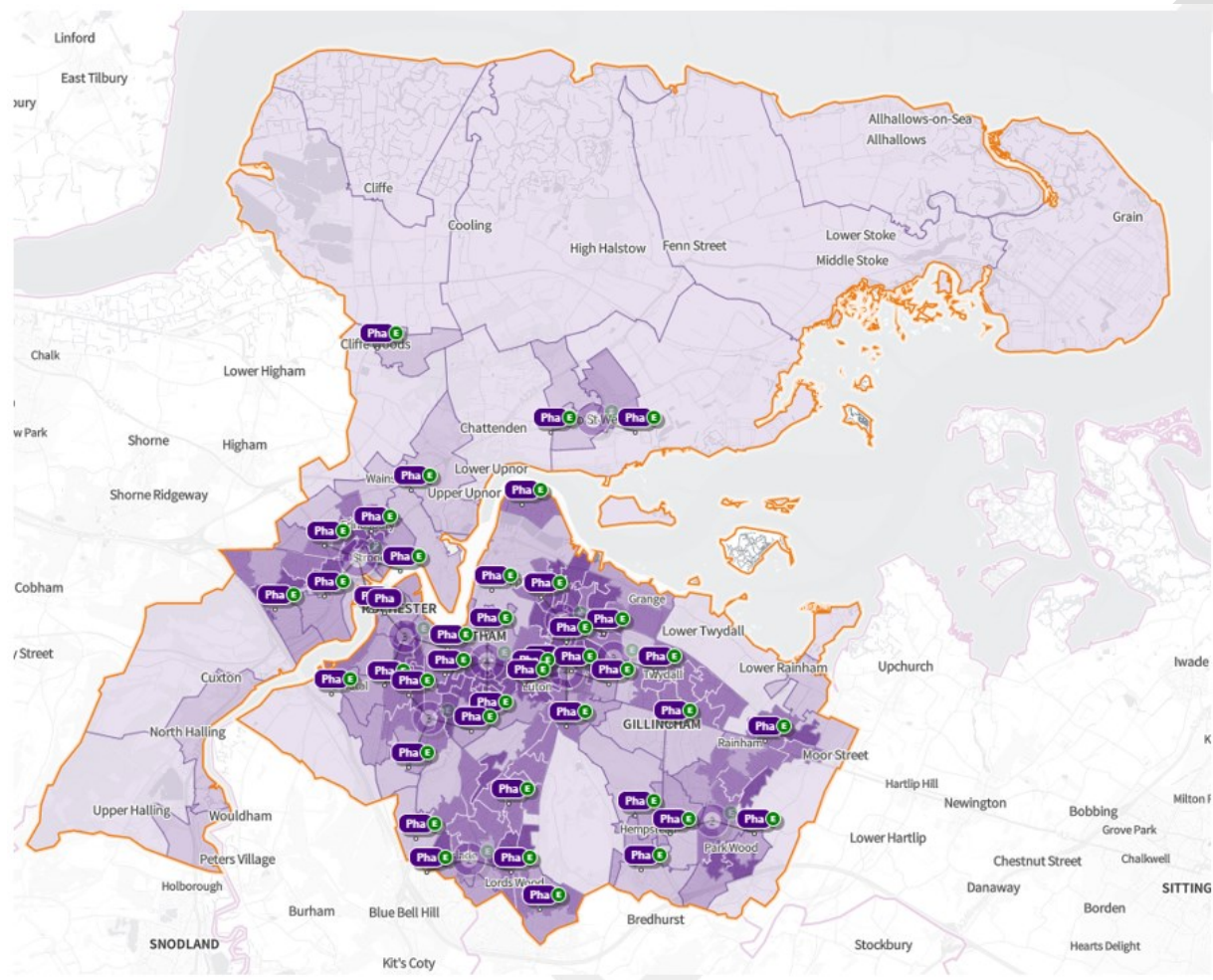
#### **6.8.1.2 Weekday evenings**

Most pharmacies remain open until between 5.30 pm and 6.00 pm after which there is a noticeable reduction in provision. There are 22 pharmacies that remain open until 7 pm and ten that are open until 8 pm, provided by 100-hour pharmacies or by supplementary hours.

Provision after 8pm is solely provided for by 100-hour pharmacies. Across the localities, there is some pharmacy provision later in the evenings, often to 7 pm or 8 pm this is seen in figure 8 below. These opening times provide access in the evenings, in particular in terms of the later GP service at the Rochester Healthy Living Centre which is open each weekday until 8 pm.

The exception to this is in Medway Peninsula where pharmacy provision ends at 6.30 pm in the weekday evenings. Whilst evening opening during this time within the Peninsula area would improve access and choice, no specific need for additional pharmacies to open has been identified. Taking this into account, it is considered that the community pharmacies across Medway that open during weekday evening alongside extended GP hours are accessible to people living in the Peninsula locality.

**Figure 8: Pharmacy Provision – Evenings**



**Key:**

-  Hospital
-  General Practice
-  General Practice Branch
-  Pharmacy
-  Hub
-  Urgent Care Centre
-  Pharmacy Evening Hours
-  Pharmacy Saturday Opening
-  Pharmacy Sunday Opening
-  GP Dispensing



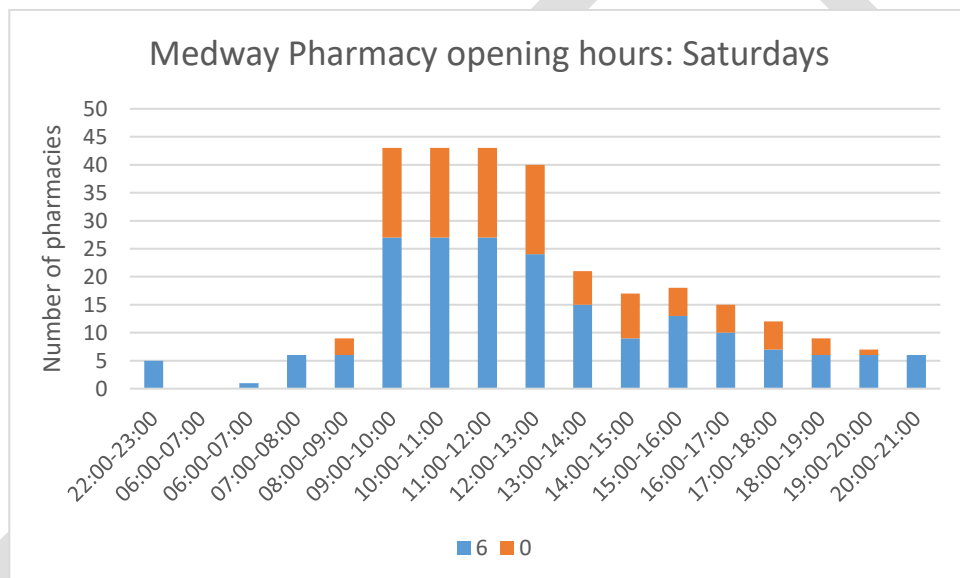
## 6.8.2 Weekend opening

None of the distance selling pharmacies open nor the dispensing appliance contractor are open on Saturdays or Sundays.

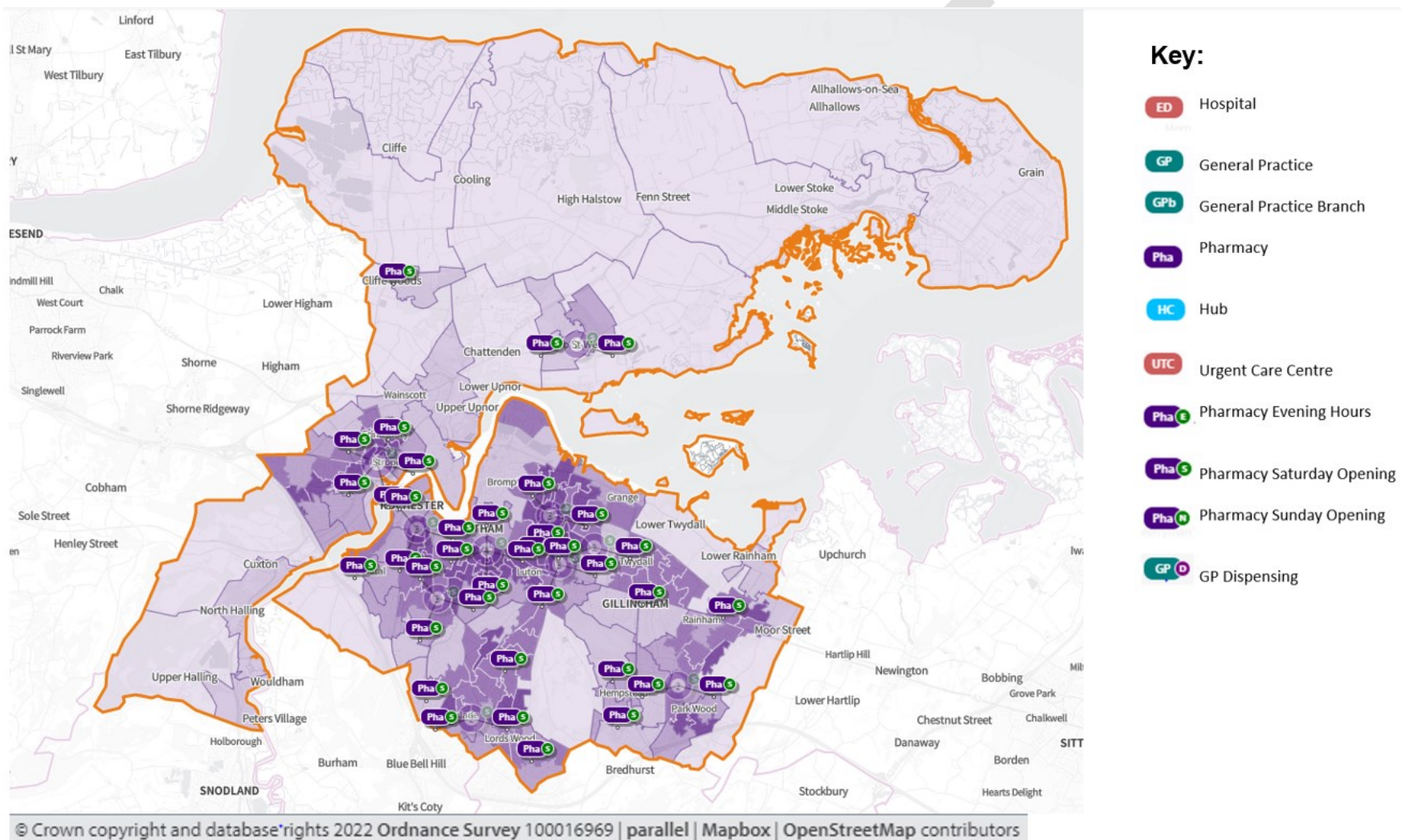
### 6.8.2.1 Saturday opening

In total, 43 pharmacies across the area are open on Saturdays. All these pharmacies open on Saturday mornings. this is reflected in figure 9. This reduces to 18 pharmacies that remain open on Saturday afternoons until 4 pm and after 7 pm is almost exclusively provided by the 100-hour pharmacies. This is reflected in chart 3.

All localities have a number of pharmacies that are open during all or part of Saturdays although there is more provision in the more populated areas of Medway. It is also important to note that much of the opening times on Saturdays are allocated as supplementary hours rather than the core service delivery.

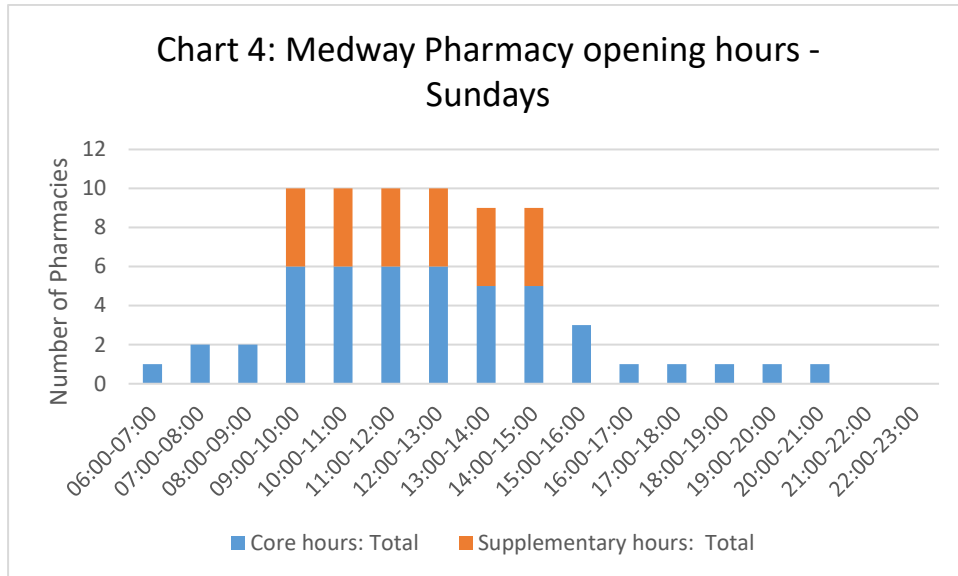


**Figure 9: Pharmacies Opening on Saturdays (denoted with PhaS)**



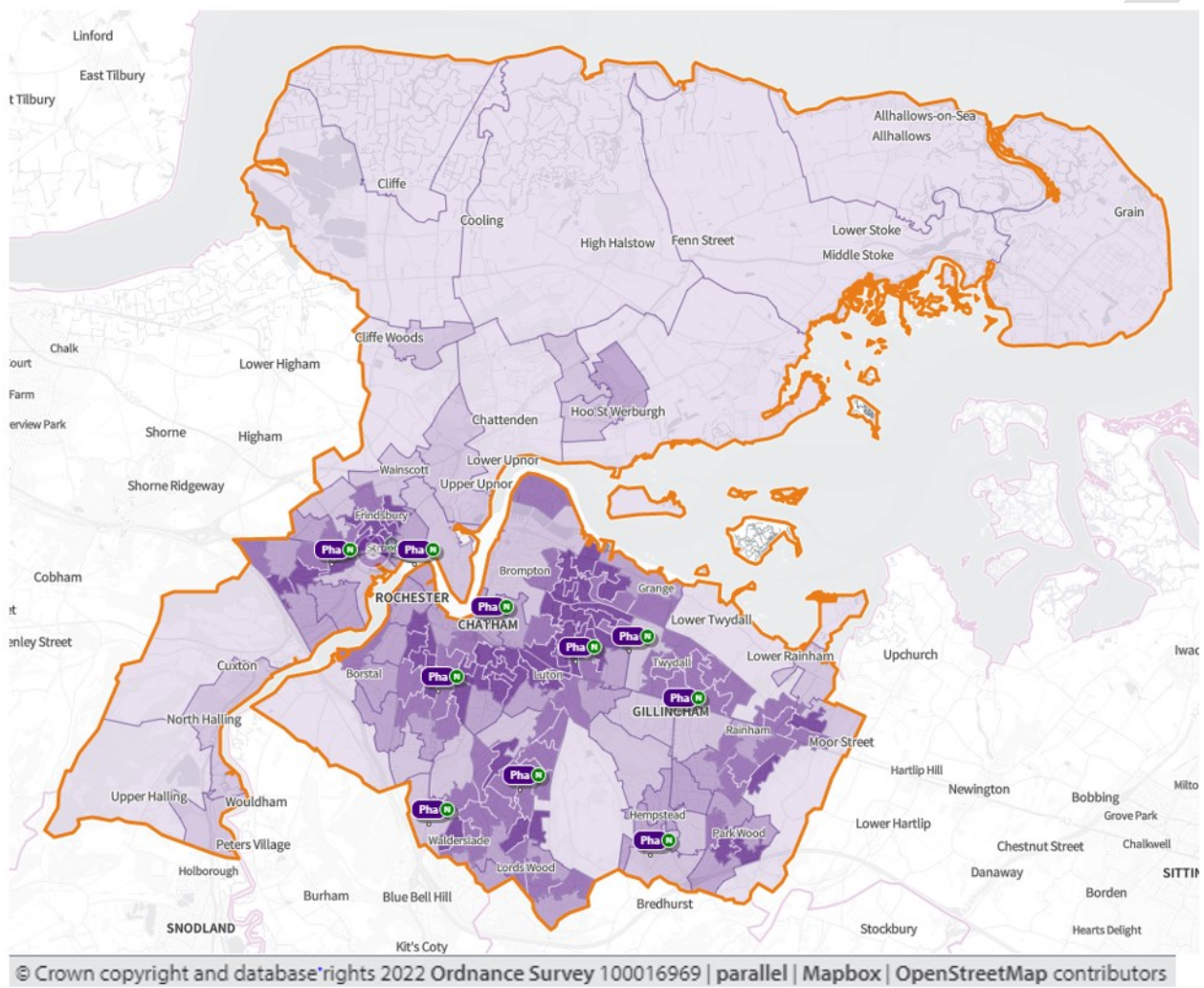
### 6.8.2.2 Sunday opening

In total, 10 pharmacies in Medway open on Sundays, the majority of which are open between 9 am and 3 pm. This is delivered by the core hours of the 100-hour pharmacies and other pharmacies by supplementary hour provision.



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**Figure 10: Pharmacies opening on Sunday (denoted with PhaN)**



Pharmacy access during the week and weekends is found to be adequate for the population of Medway for the majority of the localities. Provision is supplemented in the more rural areas with dispensing GP facilities which provide further access opportunity for the population in these areas to access medicine supplies.

Access to services in the weekday evenings and weekends is reduced but there remains provision across all localities. Access across these times is provided by the six 100-hour pharmacies (located across 5 of the 7 localities) and also by supplementary hours provided by some pharmacies with 40-hour contracts. These pharmacies are often in shopping centres or health living centres and allow community pharmacies greater scope to respond to local population needs and preferences.

Medway HWB board recognises the importance of access to pharmacies in the evenings and weekends and that, in addition to the 100-hour pharmacy provision, some pharmacies, often located in Shopping Centres and supermarkets, provide extended opening hours as supplementary hours which, if reduced could impact on access for the population of Medway.

### **6.8.3 Opening during extended GP access, GP out of Hours and Urgent Care Centre opening hours**

Extended hours community pharmacy provision across the Medway localities are seen in table 8. In addition to the community pharmacy provision, MedOCC can provide a short term supply of some medicines (e.g. antibiotics and analgesics) to patients seen in their services (GP out of hours service and the Urgent Treatment Centre at Medway Maritime Hospital) who need to start treatment outside of pharmacy opening hours. These medicines are provided under patient group directive arrangements which falls outside the scope of the PNA, but this ensures access to essential medicines 24 hours a day, 7 days a week for Medway residents.

**Table 8: Locality distribution of the community pharmacy 100 hour and supplementary hours >50 hours per week services in Medway**

Locality	100 hour pharmacy	40 hour pharmacy providing more than 10 supplementary hours (i.e. more than 50 hours in total)
Gillingham South	2	3
Medway Central	0	2
Medway Peninsula	0	1
Medway South	1	2
Rainham	1	3
Rochester	1	1
Strood	1	3

In response to the PNA consultation responses regarding community pharmacy service provision (see Section 10), NHSE have confirmed that community pharmacy

cover for bank holidays is continuously reviewed by the team involving liaison with the providers up to 3 months in advance of the public holiday to identify those who choose to open on bank holidays or who are willing to open under an enhanced service. More recently, because of workforce and other pressures, fewer pharmacies are making the decision to open on bank holidays, and therefore an assessment of the gaps is undertaken to endeavour to ensure there is reasonable access to community pharmacy services (which would not be to match normal opening hours). The enhanced service arrangements are agreed under a Service Level Agreement (SLA) and negotiated with the LPCs with a consistent approach and process across the region to make reasonable provision on bank holidays. The current three year SLA bank holiday agreements run out in April 2023.

As described in 6.8.1.2 there is seen to be adequate provision, largely provided by the 100-hour pharmacies and those with extended opening via supplementary hours, for accessing prescribed medicines for the majority of the Healthcare centre sites

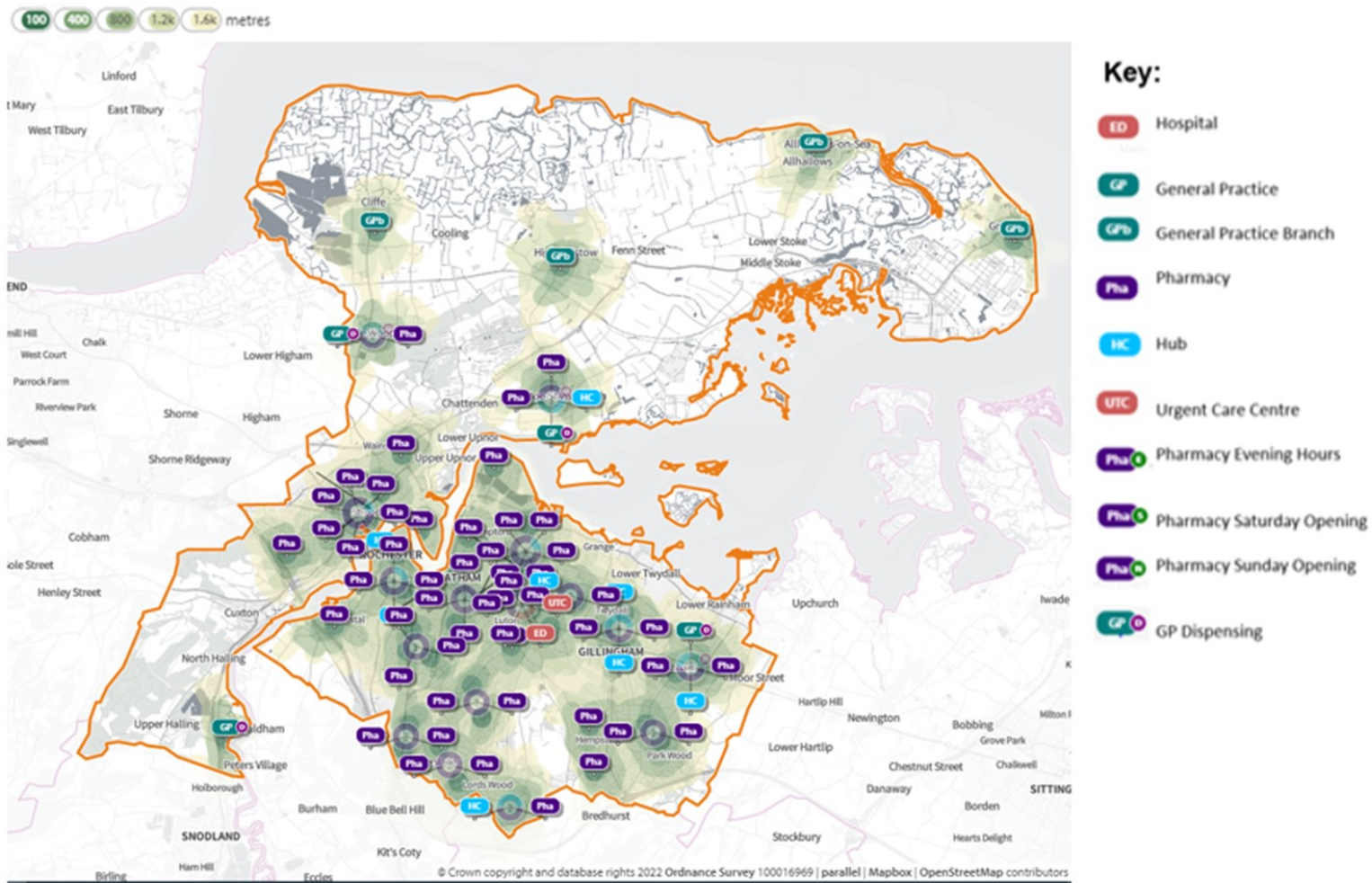
Since the last PNA 2018, two 100-hour pharmacies have closed, thereby reducing current the provision to 6 providers. The HWB recognises the importance of the 100-hour provision. Loss of any further of the 100-hour pharmacies could cause significant gaps in access to both essential pharmaceutical services and locally commissioned services that respond to particular population health needs.

Equally, the HWB recognises the importance of the supplementary hour provision by pharmacies within the area and the possible impact a change of these hours of delivery could have on access to pharmacy provision in Medway. The HWB will continue to be vigilant in monitoring the impact of changes of hours of community pharmacy providers.

#### **6.8.4 Access to pharmacies by foot and by public transport**

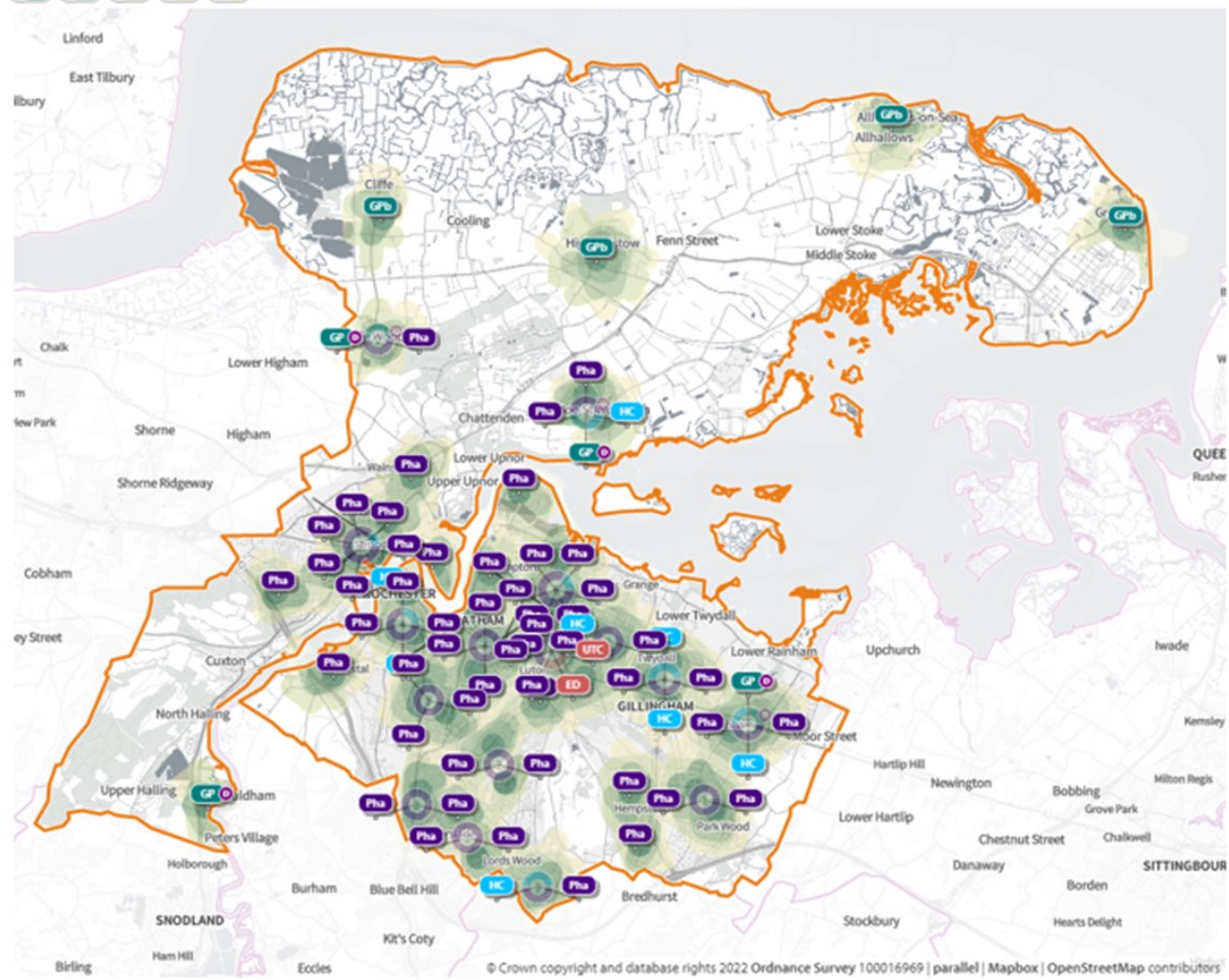
The following maps demonstrate access to community pharmacies by foot and by public transport in terms of travel time and distance travelled. The denser colour of the maps indicates the proximity of the pharmacy.

**Figure 11: Access to pharmacies by foot**  
**11a: by distance walked**



# 11b: by time taken to walk

3 6 9 12 15 minutes



## Key:

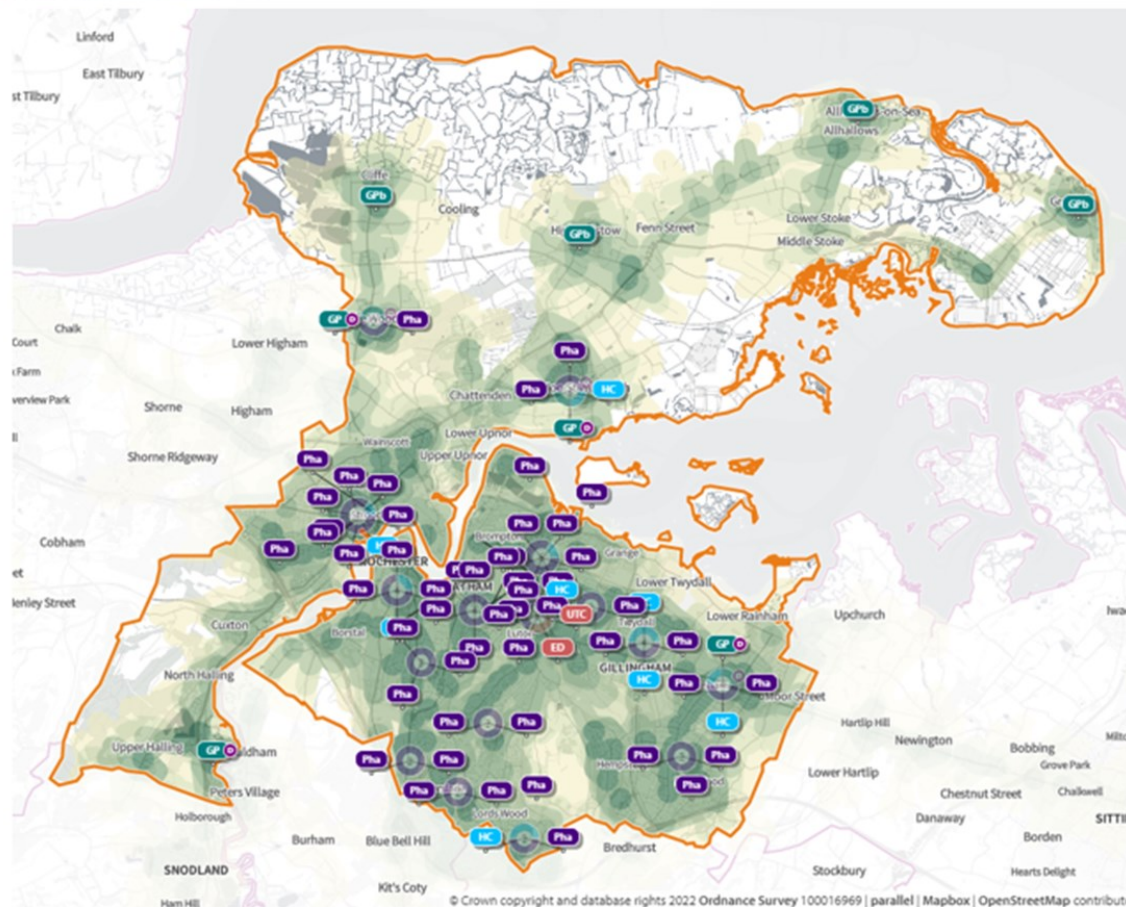
- Hospital
- General Practice
- General Practice Branch
- Pharmacy
- Hub
- Urgent Care Centre
- Pharmacy Evening Hours
- Pharmacy Saturday Opening
- Pharmacy Sunday Opening
- GP Dispensing

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**Figure 12: Access to pharmacies using public transport**  
**12a Pharmacy distance by public transport – morning weekdays**

5 10 15 20 30 minutes



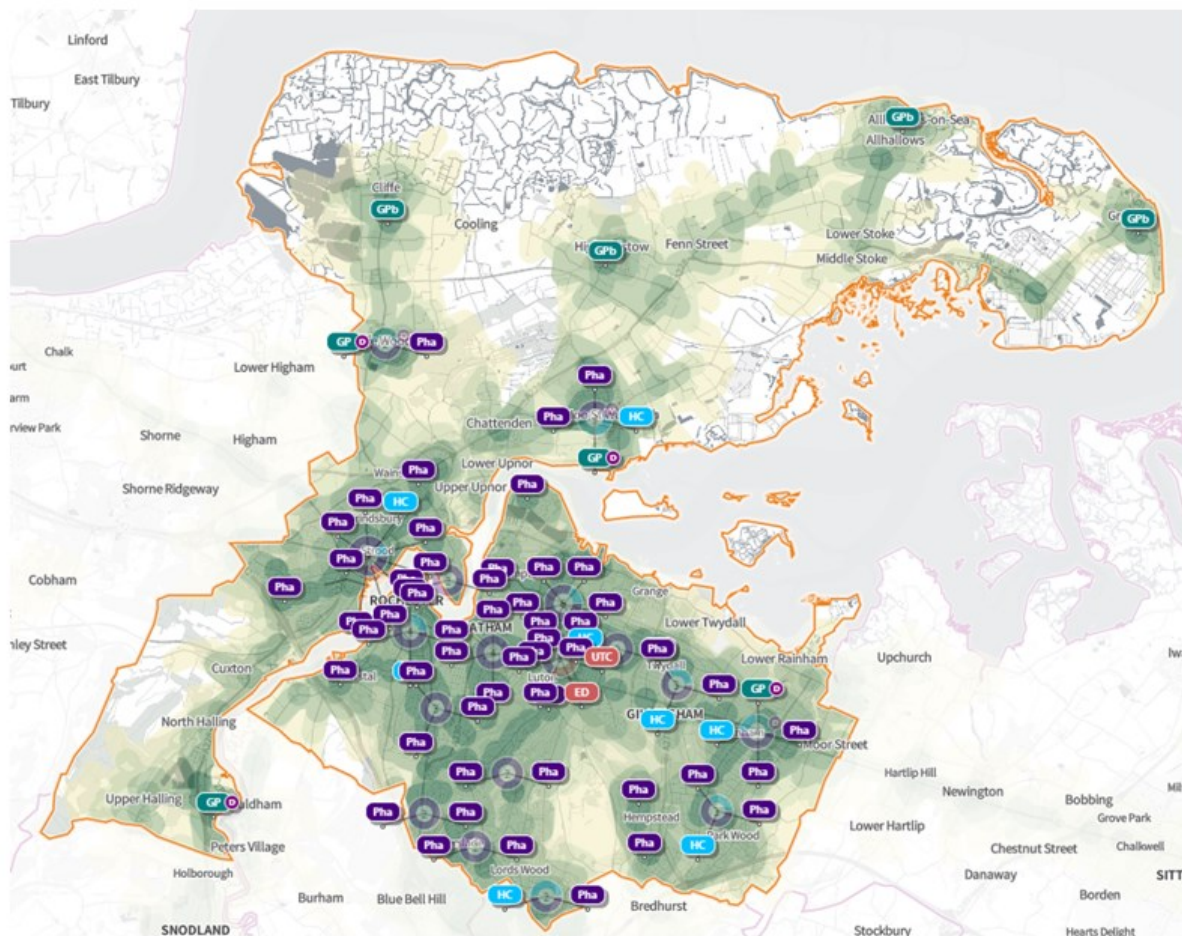
**Key:**

-  Hospital
-  General Practice
-  General Practice Branch
-  Pharmacy
-  Hub
-  Urgent Care Centre
-  Pharmacy Evening Hours
-  Pharmacy Saturday Opening
-  Pharmacy Sunday Opening
-  GP Dispensing

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## 12b: Pharmacy distance by public transport – evening weekday

5 10 15 20 30 minutes



### Key:

- Hospital
- General Practice
- General Practice Branch
- Pharmacy
- Hub
- Urgent Care Centre
- Pharmacy Evening Hours
- Pharmacy Saturday Opening
- Pharmacy Sunday Opening
- GP Dispensing

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Most parts of more densely populated areas in Medway are accessible by public transport and therefore access to pharmacies by foot or by public transport is considered accessible in these areas. Also, the majority of the residents living within the deprived areas of Medway, which may mean that there is not access to a car, are also able to access pharmaceutical services within one mile (1.6 km) of their residence.

Access to community pharmacy services is markedly reduced in the rural areas, in particular on the Hoo Peninsula, although there is provision of dispensing doctors' services to enable access to dispensed medicines.

Since the last PNA, there has been a significant increase of use of electronic prescriptions which enable patients to have their prescriptions (especially repeat prescriptions) sent electronically to a pharmacy of their choice, such as one close to their workplace or near their home. In addition, patients could choose to access medicines via a distance selling pharmacy, again utilising the electronic prescription service, thereby broadening possible choice of pharmacy service for the customer.

Locally pharmacies in the area have developed a collection and delivery service to these patients to ensure that patients, especially those who are vulnerable or elderly, are not disadvantaged by this closure. Delivery is not an element of the pharmacy contract and is not funded either by the NHS or local authorities.

As the Peninsula is also recognised as an area of rural deprivation and is designated as a Controlled Locality it is considered that it is important that provision should not rely on the goodwill of the local pharmacies.

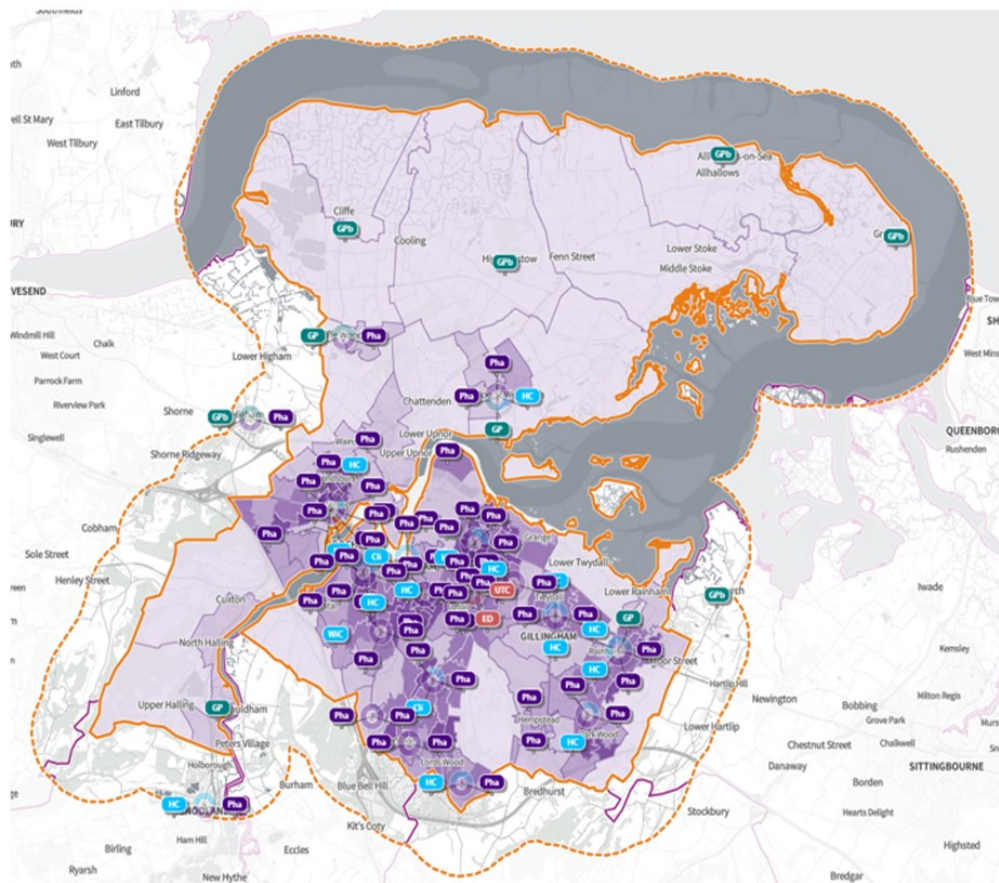
#### **6.8.5 Access to pharmacy services out of the Medway area**

It is important to note that pharmacy services that are out of the Medway area may provide additional alternatives for people to access medicines and advice.

In particular, there may be pharmacies close to residents who live on or close to the HWB area boundaries.

In addition, figure 13 demonstrates demonstrate the population density (darker colour indicating the denser population) regarding people living on the edges of the Medway area are in proximity to pharmacy services in the neighbouring areas such as Gravesham, Tonbridge and Malling, Maidstone and Swale. On occasions, pharmacies in these areas may be closer for people to access than those located within the boundaries of Medway itself.

**Figure 13: Map population density (darker areas more densely populated) and pharmacy locations both within area and on the boundary with neighbouring areas**



Population density: All

The analysis focuses on the estimated population density per km<sup>2</sup>.

Medway's estimated population density in mid-year 2020 is 1453.58 people/km<sup>2</sup> within a range of 72 to 17281 across 163 LSOAs.

The England-wide LSOA distribution is 2 to 106716 with a mean value of 4420.91 people/km<sup>2</sup>.

Key

Values for LSOAs within the selected boundary are shown.

The colours represent the quintiles:

- 6,513.01 to 106,716 pop/km<sup>2</sup>: 46 areas
- 4,334.01 to 6,513 pop/km<sup>2</sup>: 49 areas
- 2,578.01 to 4,334 pop/km<sup>2</sup>: 30 areas
- 747.01 to 2,578 pop/km<sup>2</sup>: 23 areas
- 2 to 747 pop/km<sup>2</sup>: 15 areas

Data

Numerator:  
Estimated population: 279,142

Denominator:  
Total area: 192.04 km<sup>2</sup>

Small Area Population Estimates for mid-year 2020  
ONS: [ons.gov.uk/.../populationestimates](https://ons.gov.uk/.../populationestimates)

Key:

- ED Hospital
- GP General Practice
- GPb General Practice Branch
- Pha Pharmacy
- HC Hub
- UTC Urgent Care Centre
- Pha(e) Pharmacy Evening Hours
- Pha(s) Pharmacy Saturday Opening
- Pha(n) Pharmacy Sunday Opening
- GP(D) GP Dispensing

Other options for accessing pharmacy services include choosing to have prescriptions dispensed closer to someone's place of work for convenience or to utilise distance selling pharmacy services.

In addition, some prescriptions may be specialist items which services such as dispensing appliance contractors can supply. This may also be facilitated using out of area provision.

As described earlier in this report, on average about 5% of prescriptions issued in Medway are dispensed by pharmacy contractors outside the area boundaries.

### **6.8.6 Feedback from customers regarding access to pharmacies**

In response to the customer survey, when asked how people usually travel to the pharmacy, the majority of people indicated that they travelled by car or taxi (46%) or on foot (47%) with only 1% of people having their medicines delivered by the pharmacy or collected by someone else.

In terms of ease of access to pharmacies as described, generally, people indicated that travel by foot, car or public transport was easy although some people did identify that all modes of transport were more challenging.

In response to finding the pharmacy was closed, the majority (39%) of people returned later with some people choosing to visit an alternative pharmacy (27%) and 10% calling NHS 111 service for further advice. No respondents indicated that they would contact the emergency services via 999. Of concern was that two people indicated that they "went without".

## **6.9 Improving access**

### **6.9.1 Electronic prescription service**

Whilst the Electronic Prescription Service (EPS) was being introduced across GP and pharmacy services at the time of the previous PNA publication, it has now been implemented as part of the essential dispensing service all community pharmacies are now required to provide.

EPS makes the prescribing and dispensing process more efficient and convenient for both patients and staff. Prescriptions can be sent directly from the GP's computer to the computer in the community pharmacy via a secure internet link. Eventually the paper prescription, which is currently given to the patient, will no longer be necessary and will cease to be the legal prescription. This will streamline the transfer of prescriptions from GP surgery to the community pharmacy nominated by the patient. It is also used to encourage more GPs to consider using the repeat dispensing scheme if a person's medicines are stable and suitable.

Information from NHSE&I in January 2020 indicated that 55 of the community pharmacy services were enabled to receive prescriptions generated electronically. Over the last three years, there has been a significant increase in the application of

electronic prescribing. During 2020/21, 86.6% of the prescriptions issued in Medway were via the electronic prescribing system <sup>(28)</sup>

### 6.9.2 Collection and delivery services

Two further services which improve access to medicines are prescription collection from the GP surgery and home delivery services. Patients are often surprised to find that these are not NHS services.

Almost all (97%) respondents indicated that they collect prescriptions from surgeries although generally there will be significantly less prescriptions than in previous PNAs with the implementation of electronic prescribing across primary care.

89% of pharmacies deliver dispensed medicines free of charge with some pharmacies charging for this service. The patient groups that the pharmacies generally provided this service for included those who were housebound, elderly and vulnerable.

35% of pharmacies also indicated that they charged for deliveries although no detail of patient groups was indicated. It is important for prescribers to take the needs of patients into account and, where it may not be possible for the patient to collect the prescription, to discuss options with patients and their relatives or carers.

It is also important to recognise that in response to COVID-19, the pandemic delivery service by community pharmacies was commissioned by NHSE&I. The service remained active until 31<sup>st</sup> March 2022 for people notified of the need to self-isolate by NHS Test and Trace in all areas of England.

### 6.10 Disability access

To comply with the Equality Act 2010 <sup>(12)</sup>, community pharmacies must make reasonable provision for access by patients who have disabilities. It sets out a framework which requires service providers to ensure they do not discriminate against persons with a disability. A person is regarded as being having a disability if they have a physical or mental impairment which has a substantial adverse effect on that person's ability to carry out day to day activities. If there are obstacles to accessing a service, then the service provider must consider what reasonable adjustments are needed to overcome that obstacle.

Common adjustments in community pharmacies include:

- Easy open containers;
- Large print labels;
- Reminder charts, showing which times of day medicines are to be taken;
- Monitored dosage system (MDS) to improve their adherence to medicines taking.

Most community pharmacies have made arrangements to ensure that those with a disability can access their pharmacy and consultation rooms. As part of the NHSE&I

regulations and guidance <sup>(31)</sup> almost all pharmacies comply with the need to have a consultation room as specified in order to deliver advanced services.

The requirements for the consultation room are that it is:

- Clearly designated as a room for confidential conversations, for example a sign is attached to the door to the room saying Consultation room;
- Distinct from the general public areas of the pharmacy premises;
- A room where both the person receiving the service and the person providing it can be seated together and communicate confidentially.

## 7. Medway Pharmaceutical Services Overview

The requirements for the commissioning of pharmaceutical services are set out in the *NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013* <sup>(6)</sup> and the *Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2013* <sup>(32)</sup>

NHS England and NHS Improvement (NHSE&I) commissions pharmaceutical services via the national community pharmacy contractual framework. Community pharmacies provide three tiers of pharmaceutical service which have been identified in regulations. These are:

- Essential Services: services all community pharmacies are required to provide;
- Advanced Services: services to support patients with safe and effective use of medicines or appliances that all community pharmacies may choose to provide as long as they meet the requirements set out in the directions;
- Enhanced Services: services that can be commissioned locally by NHS England.

Any organisation can commission services from community pharmacies. NHS England commissions essential, advanced and enhanced pharmaceutical services (see section 5) whilst Local Authorities and CCGs commission 'locally commissioned services'

In addition, a Local Pharmaceutical Service (LPS) contract allows NHSE&I to commission community pharmaceutical services tailored to meet specific local requirements. It provides flexibility to include a broader or narrower range of services (including services not traditionally associated with pharmacy) than is possible under the national pharmacy contract arrangements. Locally commissioned community pharmacy services can be contracted via a number of different routes and by different commissioners, including local authorities, Clinical Commissioning Groups (CCGs) and local NHS England teams.

## 7.1 Essential services

The NHS Community Pharmacy Contractual Framework (CPCF or the 'pharmacy contract')<sup>(10)</sup> that all pharmacies, including distance selling pharmacies, are required to provide the essential services.

As of October 2021, the essential services are:

- Dispensing of prescriptions,
- Dispensing of repeat prescriptions i.e. prescriptions which contain more than one month's supply of drugs on them.
- Disposal of unwanted medicines returned to the pharmacy by someone living at home, in a children's home, or in a residential care home.
- Promotion of healthy lifestyles, which includes providing advice and participating in NHS England and NHS Improvement health campaigns.
- Signposting people who require advice, treatment or support that the pharmacy cannot provide to another provider of health or social care services.
- Support for self-care which may include advising on over the counter medicines or changes to the person's lifestyle.
- Discharge medicines service. This service was introduced in 2021 and aims to reduce the risk of medication problems when a person is discharged from hospital. It is estimated that 60 percent of patients have three or more changes made to their medicines during a hospital stay. However, a lack of robust communication about these changes may result in errors being made once the person has left hospital. In summary, under this service a pharmacist will review a person's medicines on discharge and ensure that any changes are actioned accordingly
- Dispensing of appliances (in the "normal course of business")

Dispensing appliance contractors have a narrower range of services that they must provide:

- Dispensing of prescriptions.
- Dispensing of repeat prescriptions.
- For certain appliances, offer to deliver them to the patient and provide access to expert clinical advice.
- Where the contractor cannot provide a particular appliance, signposting or referring a patient to another provider of appliances who can.

In the previous PNA, all pharmacies were required to participate in the Health Living Pharmacy Scheme in recognition of the role that community pharmacy can play to help reduce health inequalities. The principle of community pharmacy being proactive in supporting the Public Health agenda has now been incorporated into the essential services as the promotion of health lifestyles.

In addition, the Pharmacy Quality Scheme (PQS) forms part of the Community Pharmacy Contractual Framework (CPCF). PQS is designed to support delivery of the NHS Long Term Plan and reward community pharmacies that deliver quality criteria in three quality dimensions: clinical effectiveness, patient safety and patient experience



### **7.1.1 Digital solutions**

In the previous PNA, digital solutions were in the process of being introduced and implemented to provide connectivity across healthcare settings.

Under the terms of <sup>(31)</sup> service community pharmacies are now required to have digital solutions in place including:

- Premises-specific NHSmail account which their staff can access and can send and receive NHSmail from thereby ensuring safe and secure transfer of information across healthcare settings. Pharmacy contractors should ensure that NHSmail accounts are regularly checked throughout the opening hours of the pharmacy.
- Pharmacy staff have access to the Electronic Prescription Service (EPS) at their pharmacy premises which must be constant and reliable throughout core and supplementary opening hours, in so far as that is within the control of the contractor. In addition, where a contractor is unable to access the EPS to dispense an EPS prescription, they must take all reasonable steps to ensure that the item is supplied within a reasonable timescale
- There is a comprehensive and accurate profile for their pharmacy on the NHS website ([www.nhs.uk](http://www.nhs.uk)).
- Staff working at the pharmacy can access NHS Summary Care Records (SCR) and that access is consistent and reliable during the pharmacy's opening hours, in so far as that is within the control of the contractor. Subject to the normal patient consent requirements, those registered professionals should access patients' SCRs whenever providing pharmaceutical services to the extent that they consider, in their clinical judgement, that it is appropriate to do so for example; prescription queries, advising patients on suitable medication, providing emergency supplies.

### **7.2 Advanced Services**

In addition to the essential services, the NHS Community Pharmacy Contractual Framework (CPCF) allows for the provision of 'advanced services'. Community pharmacies can choose to provide any of these services as long as they meet the service requirements including accreditation of the pharmacist providing the service and/or specific requirements to be met in regard to premises. They are commissioned by NHS England and the specification and payment is agreed nationally.

Advanced services currently (2022) include:

- Appliance Use Review (AUR)
- Community Pharmacy Consultation Service (CPCS)
- Hepatitis C testing Service
- Hypertension case-finding service (from October 2021)
- New Medicine Service (NMS)
- Stoma Appliance Customisation Service (SAC)
- Flu vaccination service
- Smoking Cessation Advanced Service (from 10.3.22)

Additional advanced services were also established in response to the COVID-19 pandemic including:

- COVID-19 Lateral Flow device distribution service
- Pandemic Delivery service

In April 2021, the Medicines Use Review (MUR) and Prescription Intervention Service services were decommissioned. Until 31st December 2020, 70% of MURs had to be targeted at high-risk medicines or patients who had recently been discharged from hospital.

The NHS Discharge Medicines Service was introduced as an essential service on 1st January 2021.

**Table 9: Distribution of community pharmacies providing advanced services, in Medway** Data Source: NHSE&I (29)

Pharmacy Advanced Service	Medway pharmacies providing this service
Community Pharmacy Consultation Service (CPCS)	51
Hepatitis C testing Service	3
New Medicines Service	45
Flu Vaccination service	45
Hypertension case-finding service*	16

Table 9 shows the distribution of pharmacies in Medway that deliver the advanced services. Some of the services introduced in early 2022 did not yet have information regarding provision to be reflected in this PNA.

### 7.2.1 Appliance use review

Appliance use Reviews (AURs) can be carried out by a pharmacist or a specialist nurse in the pharmacy or at the patient's home. Alternatively, where clinically appropriate and with the agreement of the patient, AURs can be provided by telephone or video consultation (in circumstances where the conversation cannot be overheard by others - except by someone whom the patient wants to hear the conversation, for example a carer). AURs should improve the patient's knowledge and use of any 'specified appliance'.

This service is usually provided by the Appliance Contractors (there is one in the Medway area) as a specialism of the services although this service could also be provided by local community pharmacies.

## **7.2.2 Community Pharmacist Consultation Service**

The NHS Community Pharmacist Consultation Service launched on 29th October 2019 as an Advanced Service. Since 1st November 2020, general practices have been able to refer patients for a minor illness consultation via CPCS, once a local referral pathway has been agreed. The service, which replaced the NHS Urgent Medicine Supply (NUMSAS) connects patients who have a minor illness or need an urgent supply of a medicine with a community pharmacy.

As well as referrals from general practices, the service takes referrals to community pharmacy from NHS 111 (and NHS 111 online for requests for urgent supply), Integrated Urgent Care Clinical Assessment Services and in some cases, patients referred via the 999 service.

The CPCS aims to relieve pressure on the wider NHS by connecting patients with community pharmacy, which should be their first port of call and can deliver a swift, convenient, and effective service to meet their needs. Thus, providing the opportunity for community pharmacy to play a bigger role than ever within the urgent care system. Since the CPCS was launched, an average of 10,500 patients per week are being referred for a consultation with a pharmacist following a call to NHS 111; these are patients who might otherwise have gone to see a GP. <sup>(33)</sup>

In January 2022, NHS England and NHS Improvement announced that community pharmacy contractors could expect to receive more referrals from NHS 111 for the Community Pharmacist Consultation Service (CPCS) following a review of the NHS Pathway algorithms.

Information from NHSE &I which indicated that in January 2022, there were 51 community pharmacies in Medway signed up to CPCS delivery, including one of the distances selling pharmacy services. However, there was no data available regarding number of type of referrals at the time of producing this PNA.

## **7.2.3 Hepatitis C testing service**

The Hepatitis C testing service was launched in September 2020 and focused on provision of point of care testing (POCT) for Hepatitis C (Hep C) antibodies to people who inject drugs (PWIDs), i.e. individuals who inject illicit drugs, e.g. steroids or heroin, but who haven't yet moved to the point of accepting treatment for their substance use. Where people test positive for Hepatitis C antibodies, they will be referred for a confirmatory test and treatment as appropriate.

This service is currently being provided by 3 pharmacies (Delmergate Ltd and Karsons Pharmacy in Chatham and also Karsons in Rochester).

## **7.2.4 Hypertension case-finding service**

In 2020, NHS England and NHS Improvement (NHSE&I) commenced a pilot involving pharmacies offering blood pressure checks to people 40 years and over. In some pharmacies within the pilot, where the patient's initial blood pressure reading was

elevated, they would be offered 24-hour ambulatory blood pressure monitoring (ABPM), which is the gold-standard for diagnosis of hypertension.

Following the initial findings of the pilot, the Department of Health and Social Care (DHSC) and NHSE&I proposed the commissioning of a new Hypertension case-finding service, as an Advanced service was commenced in October 2021 to support the programme of identification of undiagnosed cardiovascular disease.

The service aims to:

- Identify people with high blood pressure aged 40 years or older (who have previously not had a confirmed diagnosis of hypertension), and to refer them to general practice to confirm diagnosis and for appropriate management;
- At the request of a general practice, undertake ad hoc clinic and ambulatory blood pressure measurements;
- Provide another opportunity to promote healthy behaviours to patients.

Information from NHSE in January 2022 indicated that 16 pharmacies were signed up to delivery of the Hypertension Case finding services in Medway although it is recognised that there may be more pharmacies registering to deliver the service as it becomes established.

### **7.2.5 New Medicine Service (NMS)**

In England, around 15 million people have a long-term condition (LTC) and the optimal use of appropriately prescribed medicines is vital to the management of most LTCs. Non-adherence to prescribed medicine regimens is often a hidden problem, undisclosed by patients and unrecognised by prescribers. People make decisions about the medicines they are prescribed and whether they are going to take them very soon after being prescribed the new medicine

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

From 1st September 2021, a broad range of following conditions were covered by the service including respiratory conditions, diabetes (Type 2); hypertension, hypercholesterolaemia, osteoporosis, gout, glaucoma, epilepsy, Parkinson's disease, urinary incontinence/retention and many cardiac related conditions such as heart failure, atrial fibrillation, coronary heart disease, strokes and long term risks of venous thromboembolism/embolism.

Information from NHSE&I which indicated that in January 2022, 45 of the community pharmacy services were signed up to provide NMS. However, during to the pandemic, submissions to NHSE&I reflecting activity were temporarily ceased. These will recommence in April 2022.

In response to the customer questionnaire, 70% of respondents stated that they used their pharmacy for advice from their pharmacist e.g. about minor ailments or new medicines.

### **7.2.6 Stoma Appliance Customisation Service (SAC)**

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

### **7.2.7 Flu vaccination service**

Community pharmacy has been providing flu vaccinations under a nationally commissioned service since September 2015. Each year from September through to March the NHS runs a seasonal flu vaccination campaign aiming to vaccinate all patients who are at risk of developing more serious complications from the virus. The accessibility of pharmacies, their extended opening hours and the option to walk in without an appointment have proved popular with patients seeking vaccinations.

Information from NHSE&I indicated that 45 of the community pharmacies in Medway provided the Flu vaccination services.

64% of the pharmacies responding to the questionnaire indicated that they have been involved in the delivery of the 2021/22 Flu Vaccination Service.

### **7.2.8 Smoking Cessation Advanced Service**

The Smoking Cessation Advanced Service commenced in March 2022 for people referred to community pharmacies by hospital services. This service supplements other locally commissioned smoking cessation services and enables NHS trusts to refer patients discharged from hospital to a community pharmacy of their choice to continue their smoking cessation care pathway, including providing medication and behavioural support as required, in line with the NHS Long Term Plan care model for tobacco addiction.

As this service has only recently begun, there was no further data in terms of pharmacist sign up or activity regarding its implementation.

### **7.2.9 Additional Advanced services set up in response to the COVID-19 Pandemic**

In response to the pandemic, the majority of providers were involved in the distribution of Lateral Flow Device (LFD) tests and the Pharmacy Pandemic Delivery Service of medicines to vulnerable people.

### **7.2.10 COVID-19 lateral flow device distribution service**

At the end of March 2021, a new Advanced service, the NHS community pharmacy **COVID-19 lateral flow device distribution service** (or 'Pharmacy Collect' as it was

described in communications to the public) was added to the NHS Community Pharmacy Contractual Framework. This service aimed to improve access to COVID-19 testing by making lateral flow device (LFD) test kits readily available at community pharmacies for asymptomatic people, to identify COVID-positive cases in the community and break the chain of transmission.

The service was part of the Government's offer of lateral flow testing to all people in England and it worked alongside other available COVID-19 testing routes.

### **7.2.11 Pandemic Delivery of Medicines Service**

Delivery of medicines by pharmacies has not previously been a commissioned service although many pharmacies have offered this service, sometimes at a small cost to the customer.

In response to the needs of the community, Medway CCG established a Covid delivery service as a local commissioned service (described in section 8.1.3) in advance of the national enhanced Pandemic Delivery of Medicine service.

As the CCG service had been established locally, pharmacies in the Medway area did not claim for the service provision of the national service.

## **7.3 Local Enhanced services**

Enhanced services are the third tier of services that pharmacies may provide and they can only be commissioned by NHS England and NHS Improvement.

### **7.3.1 Covid vaccine administration (Local Enhanced Service)**

Alongside vaccination centres and hospitals, Primary Care Networks, (PCN) over 600 community pharmacy sites in England supported the vaccination of patients and health and care workers against coronavirus. Through their strong relationships in local places and neighbourhoods, community pharmacies helped to tackle vaccine inequalities and improve vaccination take-up.

Delivery of this service was as a Local Enhanced Service and required the pharmacists to submit an expression of Interest application in order to become a designated site for this service delivery.

Information from Kent and Medway CCG in March 2022 indicated that 6 pharmacies in Medway were providers of this enhanced service (3 in Rochester, 2 in Gillingham South and one in Chatham).

## 8. Medway Locally Commissioned Services

Locally commissioned services are not described in the 2013 regulations, but the term is often used to describe those services commissioned from pharmacies by local authorities and clinical commissioning groups (CCGs) and local NHS England teams. As noted in the definition of enhanced services, they are not classified as enhanced services because they are not commissioned by NHS England and NHS Improvement.

It is anticipated that from July 2022 clinical commissioning groups will be replaced by integrated care boards. These will be able to take on delegated responsibility for pharmaceutical services, and from April 2023 NHS England and NHS Improvement expects all integrated care boards to have done so. Health and Wellbeing Boards should therefore be aware that some services that are commissioned from pharmacies by clinical commissioning groups (and are therefore other NHS services) will move to the integrated care boards and will fall then within the definition of enhanced services.

It is important to note that during the time of this PNA, commissioning of new services by the Integrated Care System (ICS) have commenced and are included in this report.

In Medway, pharmacy services are currently commissioned locally by the Council's Public Health Team, Medway and Kent CCG and the local NHS England and NHS Improvements (NHSE&I) team.

### 8.1 Kent and Medway CCG Locally Commissioned services

At the time of preparing this PNA, Kent and Medway CCG commissioned the following services with Community pharmacy services:

- Palliative Care Medicines;
- Online Non Prescription Ordering Service (ONPOS)
- Covid Delivery Service

#### 8.1.1 Palliative care medicines

The local enhanced service for palliative care medicine supply from community pharmacies service aims are to provide an integrated Palliative Care Medicines service across primary and secondary care in the Kent and Medway CCG area in order to:

- Improve and ensure the availability of palliative care medicines in the Kent and Medway through community pharmacies during normal opening hours
- Provide relevant healthcare professionals (including other community pharmacists) with contact details of pharmacies in their locality who have committed to stock the full range of palliative care medication as per the palliative care formulary

Three community pharmacies (including one 100-hour pharmacy) hold stocks of specialist medicines which may be prescribed for patients at the end of life or for palliative care.

### **8.1.2 Online Non-Prescription Ordering Service (ONPOS)**

ONPOS is an online non-prescription service that facilitates the provision of wound products from an agreed (with the CCG) formulary or list without prescriptions. The service in Medway is well established having been delivered over the last 5 years, with expertise from Tissue Viability Nurses.

Four of the pharmacies in Medway are registered to support this service: Boots the Chemist (Hempstead Valley Shopping Centre and Pentagon Centre), Karsons Pharmacy and Sturdee Pharmacy.

### **8.1.3 Other CCG initiatives:**

Pandemic Delivery service:

In response to the local need to support access to medicines during the initial lockdown period of the Covid 19 Pandemic, Medway CCG established a locally enhanced service to deliver medicines. commissioned service.

Nine pharmacies in Medway provided this service during the pandemic

Self-care:

There is no specific minor ailment scheme in Medway but GPs provide the information to patients regarding attending pharmacy for self-care rather than prescribing. Patients are given leaflets during the GP consultation and are signposted to community pharmacy services when appropriate, to obtain further advice and purchase over-the-counter products if needed.

## **8.2 Medway Council Public Health commissioned services**

As part of its range of public health interventions Medway Council Public Health team currently commissions the following services from community pharmacies:

- Stop smoking services; including supply of smoking cessation products such as nicotine replacement and varenicline;
- Supervised consumption of opiate substitutes;
- Harm Reduction, including needle exchange;
- Emergency hormonal contraception, condom supply and chlamydia treatment

A number of pharmacies indicated that they provided locally commissioned services both via the CCG or the local authority although others indicated that they would provide these "if the service was commissioned". This suggests that there could be improved engagement and awareness regarding services that pharmacies in Medway could provide.



### **8.2.1 Stop smoking services**

The aim of these services is to provide their clients with access to stop smoking advice and pharmacological support as appropriate and in convenient locations. There is also a core team of smoking advisers at the Smokefree shop who may provide vouchers of recommendation for nicotine replacement therapy to be redeemed at a pharmacy.

In addition, GPs or trained pharmacists using a Patient Group Direction (PGD), can provide supplies of Varenicline a medicine in tablet form used in adults to help them stop smoking. However, unfortunately, due to national supply issues during 2021/22, varenicline has been largely unavailable.

In 2022, there were 35 community pharmacy services in Medway registered to deliver the Stop Smoking Service although not all provide the PGD service.

### **8.2.2 Supervised consumption of opioid substitutes**

Substances such as heroin, opium and morphine are known as 'opioids'. Many opioids are 'psychoactive', which means they affect the way the brain works and can change a person's mood or behaviour. Opioid dependence is associated with a wide range of social and health problems, including a high risk of infection and mental health problems. It also presents a danger that a person could take a fatal overdose. Services are commissioned from community pharmacies to provide a dispensing and supervised consumption scheme for opioid substitutes (such as methadone or Buprenorphine) for dependent drug users. To use the services, patients must have been assessed as requiring symptomatic treatment for drug related problems and have made the decision to reduce their illegal opioid use. Substance misuse services, prescribe an opioid substitute, tailoring the selected product and dose to the individual's needs. The service is therefore only available to patients who are being treated within the local integrated substance misuse and harm reduction service.

As the pharmacist supervises the patient's consumption of the opioid substitute in the pharmacy, risk of illegal diversion or consumption by anybody other than the patient is minimised.

In Medway, 28 pharmacies provided the supervised consumption service between 1/4/21 to 15/3/22. The number of supervisions was 16,960 based on each supervised dose given.

513 individual clients have utilised the service of which 315 individuals have received supervised support from pharmacies and other of whom received daily or weekly collection of dispensed medicines from pharmacies.

### **8.2.3 Harm Reduction / Needle exchange scheme**

The aim of the harm reduction and needle exchange scheme is to reduce the spread of blood borne viruses (such as HIV, hepatitis B and hepatitis C) and other infections associated with use of non-sterile injection equipment. It does so through the provision

of sterile injecting equipment and other associated products. It also helps to reduce the risk of needle stick injuries to others by reducing drug related litter through the safe collection and disposal of equipment. In addition, the service provides signposting or referral to specialist drug and alcohol treatment centres, or health and social care professionals where appropriate.

Service providers enable access to equipment, provide advice and information on its safe disposal, and distribute appropriate literature advising on harm reduction, safer sex and local services. Service users are encouraged to return used material in exchange for clean equipment.

The service is currently provided by 7 community pharmacies in Medway:

- Delmergate Pharmacy Chatham
- Karsons Pharmacy Rochester
- Lloyds Rainham Shopping Centre
- Medway Pharmacy
- Osbon Pharmacy
- Mediclinic Pharmacy
- Well Pharmacy – Chatham

Needle Exchange is also carried out at the service provider, Turning Point's hub and by partner agencies Open Road (HOPE Champions), Street Angels and Caring Hands. At the time of reviewing the PNA, there had been a total of 1090 of unique clients using needle exchange service across the whole service.

## **8.2.4 Sexual Health services**

### **8.2.4.1 Emergency Oral Contraception (EOC)**

Pharmacies can provide an anonymous service in an environment that respects the dignity and confidentiality of the patient. The service aims to improve access to emergency oral contraception (EOC) by providing it free of charge to females under the age of 30 years from community pharmacies in Medway and Kent.

The service also helps to increase the knowledge of emergency contraception and its use, especially among young people. Whilst emergency hormonal contraception is available to purchase without prescription at community pharmacies, the retail cost means that it may be unaffordable for many in greatest need.

Pharmacists who provide the service are specifically trained to assess the patient's suitability for emergency hormonal contraception and provide the medication under a Patient Group Direction (PGD). The patient will also be provided with support and advice and can be referred to specialist services if appropriate.

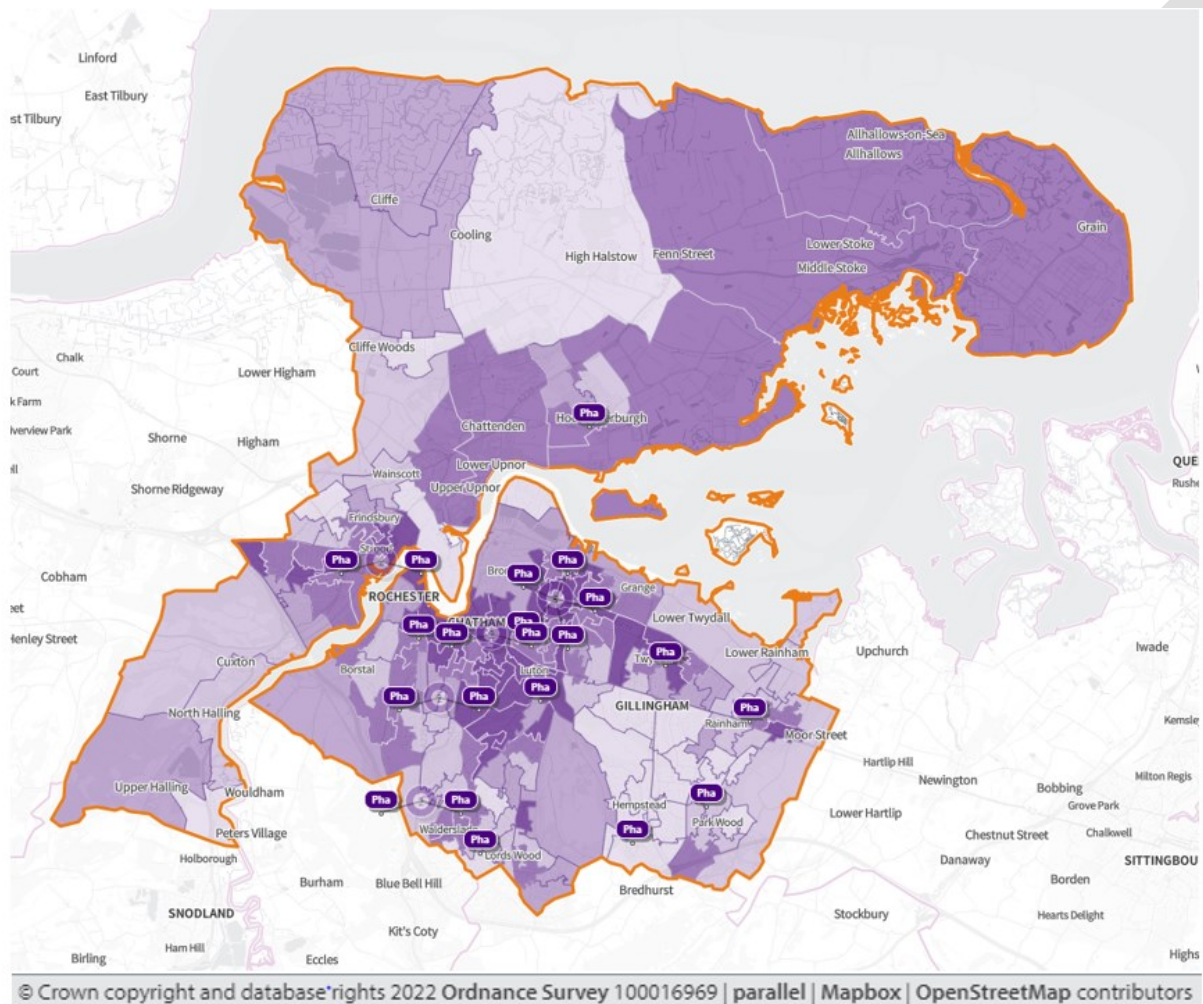
In Medway there are 23 Pharmacy stores that are contracted with to provide the EOC although at the time of the PNA review, only 13 were providing full time cover for the EOC service whilst staff were being trained to provide wider support.

Between April 2021 and February 2022, there were 1171 interventions providing EOC to patients via this service.

In addition to the intervention, as part of this service provision, the patient is offered Condoms as part of the EOC consultation and Chlamydia treatment can also be provided.

DRAFT

**Figure 14 – Pharmacies providing EOC**



○ Index of Multiple Deprivation

The indicator focuses on the Index of Multiple Deprivation (IMD) from the Indices of Deprivation 2019.

The seven domains were combined using the following weights to produce the overall Index of Multiple Deprivation (IMD):

- Health Deprivation (13.5%)
- Income Deprivation (22.5%)
- Employment Deprivation (22.5%)
- Education Deprivation (13.5%)
- Crime Deprivation (9.3%)
- Barriers to Housing and Services (9.3%)
- Living Environment Deprivation (9.3%)

Medway's Index of Multiple Deprivation average score is 23.94.

The England-wide Index of Multiple Deprivation distribution is 0.54 to 92.73 with a mean value of 21.67.

Key

Values for LSOAs within the selected boundary are shown. The larger the value and the deeper the purple, the greater the deprivation.

The colours represent the quintiles:

- 33.26 to 92.73: 37 areas
- 21.56 to 33.25: 46 areas
- 14.25 to 21.55: 26 areas
- 8.63 to 14.24: 33 areas
- 0.54 to 8.62: 21 areas

### 8.3 Non-Commissioned Services

Community pharmacies provide a range of services which are neither part of the core contract with the NHS, nor commissioned by Local Authority Council, the CCG or NHS England. These services may not be aligned with the strategic priorities of the CCG or the council but may be fulfilling a customer generated demand for non-NHS services and are often very valuable for certain patient groups e.g. the housebound. However, these services are provided at the discretion of the pharmacy owner and may or may not incur an additional fee.

As these services are not reimbursed by the NHS, the decision to provide the service is often a commercial one, especially when the service increases the pharmacy's overhead costs. Non-commissioned services identified in the Pharmacist PNA questionnaire included:

- Collection of prescriptions from GP practices
- Delivery of dispensed medicines
- Dispensing of medicines into Monitored Dosage Systems

It is worth noting that patients are often surprised to find that these are not NHS services.

### 8.4 Collection and delivery services

In the Pharmacy questionnaire, almost all (97%) pharmacies collect prescriptions from surgeries although generally this will be significantly less than in previous PNAs with the implementation of electronic prescribing across Primary care.

With the recent exception of the Local Enhanced and also the Medway CCG Medicine Delivery Service, which was established in response to the Covid Pandemic, delivery of medicines is not currently a commissioned service provided by pharmacies. However, 89% of pharmacies responding to the survey indicated that they delivered dispensed medicines free of charge, with 35% indicating that they may charge for this service.

The patient groups that the pharmacies generally provided this service for included those who were housebound, elderly and vulnerable and for those requiring end of life care or urgent medicines.

Regarding delivery services, the following comments were received in the customer survey responses:

*"As I have mobility problems I find their delivery service invaluable."*

*"I live 5 miles away and there is not a frequent bus service so if a delivery service was available it would be useful"*

## 8.5 Monitored Dosage Systems

Pharmacies are expected to make suitable arrangements or “reasonable adjustment” for patients who have disabilities which ensure that they can take their medicines as instructed by the doctor in line with the Equality Act 2010 <sup>(12)</sup>. This will sometimes require the use of monitored dose systems (MDS) to help patients take complicated drug regimens these are often seen as weekly or monthly cassettes with medication placed in boxes relating to the day and time of the day that the medicine is to be taken.

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

NICE guidance NG67<sup>(34)</sup> published in March 2017 recognised the role that pharmacists play in supporting people in the community and recommended that “use of a monitored dosage system should only be when an assessment by a health professional (for example, a pharmacist) has been carried out”.

89% of pharmacies responding to the survey indicated that they would provide medicines in monitored dosage systems (MDS) free of charge although 56% indicated that they would charge for this service. Again, no patient groups were indicated to clarify who may or may not be charged

At the time of renewing the PNA, work is ongoing to establish the use of a Reasonable Adjustment Flag (RAF) feature in the NHS electronic prescribing system to enable information to be input to help enable health and care professionals to record, share and view patients’ key potential reasonable adjustments or more often related considerations across the NHS; enabling staff and services to carry out their duty to provide assessments or adjustments when relevant criteria may be fulfilled.

This information sharing should help to identify patients who would benefit from interventions such as the provision of medicines in a MDS and evidence assessments that have been undertaken to support this decision.

## 9. Current and Future pharmacist role

Medway HWB values the contribution that community pharmacy makes to the local health economy through their essential services, advanced services and locally commissioned services. They are an important part of the medicines optimisation approach that helps patients to improve their outcomes, take their medicines correctly, avoid taking unnecessary medicines, reduce wastage, and improve medicines safety.

The addition of the discharge medicine service and the essential services provided by community pharmacy and the advanced services such as the Community Pharmacy Consultation Service, New Medicine Service and the Hypertension Case Finding service will further enhance the role of community pharmacy as being integral to the support of good medicine practice in the community.

Medway Council's public health team strongly supports the role that community pharmacy plays in promoting health and healthy lifestyle and in delivering evidence-based interventions for stop smoking, sexual health, and substance misuse.

The national vision for community pharmacy is in line with the local strategy and aspirations that community pharmacy has a critical role to play in the Medway health system. It is essential that community pharmacy continues to be recognised and supported to support the health needs of the population of Medway and that the people of Medway are aware of and fully utilise the services available from their Community Pharmacy services.

## 10. Engagement and Consultation

### 10.1 Stakeholder engagement

#### 10.1.1 Overview of response to the Public survey

An online survey was produced to enable people living in Medway to feed their views into the PNA. A total of 389 people responded to the survey and the full results of the survey can be found in appendix 6. Key headlines from the survey responses show that:

- 95% of respondents stated that they used pharmacies and that they received their dispensed medicines from the pharmacy. 5% of respondents indicated that they received their dispensed medicines from a dispensing doctor.
- 95% of respondents indicated that they had used their pharmacy for healthcare needs over the last 12 months with 73% of these respondents indicating that they use their pharmacy on a monthly basis and 16% using the pharmacy every 3 months.

- The majority (71%) of people indicated that they always used the same pharmacy all with a further (25%) usually using the same pharmacy. Of those that did use pharmacy services, the majority (89%) indicated that they accessed a community pharmacy on the high street or in a supermarket (8%) with only 1% indicating that they would use on-line pharmacy services.
- The majority of respondents (63%) indicated that they chose to use a pharmacy that was closest to their home although 6% indicated that this choice was based on the pharmacy being in a shopping centre or supermarket and 3% being nearer to people's place of work.
- 46% of people reported using a car or taxi to get to the pharmacy, with 47% travelling on foot. Only 1% of people having their medicines delivered by the pharmacy or collected by someone else.
- In terms of ease of access to pharmacies as described, generally, people indicated that travel by foot, car or public transport was easy although some people did identify that all modes of transport were more challenging.
- 28% identified that they had experience of having a healthcare need (e.g., prescriptions, medicines, advice) from a pharmacy but were not able to access it at the time. 67% of the people completing the survey had not experienced this issue. In a small number of cases (less than 10%) access had been difficult due to opening times, the pharmacy being too busy or availability of the pharmacist,
- 41% of people used their pharmacy for vaccine administration with a further 28% indicating that they would use this service if it were available.
- For more specific interventions that pharmacies can provide such as smoking advice, alcohol or weight management as examples were used less by survey respondents.
- The majority of respondents (75%) indicated that they had not changed the way they access their pharmacy services since the Covid pandemic. Of the 25% that indicated there had been changes, they described the main change as being that prescriptions are now issued electronically, the pharmacy delivering medicines and them phoning the pharmacy for advice rather than visiting in person.

### **10.1.2 Overview of Responses to the Survey of Pharmaceutical Service Providers**

An on-line survey was made available to all pharmacies in Medway, with support from the Local Pharmaceutical Committee. 64% (36) of the pharmacies responded to the survey and full details of the responses can be found in appendix 5

The PNA Steering group agreed not to collect information relating to the NHS essential service provision or regarding service opening times or facilities as this information is available via the national service contract or via NHSE&I. Therefore, the majority of the survey focussed on the additional services that the pharmacy providers were currently commissioned to deliver. As only 64% of the community pharmacy contractors completed the questionnaire and that not all responses provided information regarding all sections it was noted that, although this information provides an overview, it does not reflect the full service delivery across the area.



In terms of provision of, or willingness to provide additional locally commissioned services, it was clear that pharmacy providers would be willing to support and deliver additional services, if these were commissioned. In addition, more than half of the pharmacies indicated their intention to engage with new services being introduced at the time of the survey, namely the Hypertension finding service and the Stop Smoking advanced service.

A number of pharmacies indicated that they provided locally commissioned services both via the CCG or the local authority although others indicated that they would provide these "if the service was commissioned". This suggests that there could be improved engagement and awareness regarding services that pharmacies in Medway could provide.

97% of pharmacies stated that they collect prescriptions from surgeries and 89% deliver some dispensed medicines free of charge (with some others charging for this service). The patient groups that the pharmacies generally provided this service for included those who were housebound, elderly and vulnerable.

Many of the pharmacies responding to the survey felt there was need for further locally commissioned services in particular a minor ailments scheme (15 of the respondents) and also provision of Covid boosters, funded provision of monitored dosage systems and a funded delivery service were identified.

## **10.2 Formal consultation**

In line with the regulations, Medway Health and Wellbeing Board consulted for a minimum of 60 days with the following statutory consultees about the contents of this PNA from 20<sup>th</sup> April 2022 to 19<sup>th</sup> June 2022. A total of 11 responses were received from community pharmacy providers, individual residents of Medway, GP practices, local provider organisations and NHSEI. In addition, comments regarding the draft PNA raised at Medway Council's Health and Wellbeing Board were included as part of the consultation response.

In general, the consultation draft Pharmaceutical Needs Assessment 2022 was well received and supported with feedback which was generally positive. As a result of the consultation process a number of amendments were incorporated into the final PNA document with the agreement of the PNA Steering Group.

A detailed summary of the consultation process including a list of the stakeholders invited to contribute to the process, consultation questions posed, responses and further feedback to the PNA and the HWB response including a list of amendments made to the document is described in Appendix 8.

## 11. Summary of findings

Following the development of the PNA 2022-2025, the conclusions and final recommendations of Medway Health and Wellbeing Board are:

- 1) Community pharmacy services play an important role in supporting the services provided by GP practices and the PCNs as reflected by the changes in the essential, advanced and locally commissioned services as described in this report.
- 2) Medway Health and Wellbeing Board also wishes to acknowledge the contribution that Community pharmacy services have made to the recent Covid Pandemic response. The majority of pharmacies in Medway provided support to the local community both in terms of maintaining essential medicine services and also in the delivery of medicines to those unable to leave their homes, supplying Lateral Flow Device testing kits and in the support and administration of the covid vaccination programme.
- 3) Overall, there is good pharmaceutical service provision in most of Medway from Monday to Friday. The majority of residents can access a pharmacy within a 20-minute walking distance and there is adequate choice of pharmacy.
- 4) In urban areas there is good provision of pharmaceutical services on Saturday mornings and adequate provision on Saturday afternoons and Sundays.
- 5) Where the area is defined as rural by NHS England, there are dispensing practices to provide pharmaceutical services to the rural population from Monday to Friday. Most of the patients who live in the rural areas can access a community pharmacy within a 20-minute car drive if necessary.
  - a) Whilst evening opening during this time within the Peninsula area would improve access and choice, no specific need for additional pharmacies to open has been identified. Taking this into account, it is considered that the community pharmacies across Medway that open during weekday evenings supporting extended GP hours are accessible to people living in the more rural localities.
  - b) As the Peninsula is also recognised as an area of rural deprivation and is designated as a Controlled Locality it is considered that it is important that provision should not rely on the goodwill of the local pharmacies and dispensing doctor services.
- 6) The current provision of “standard 40-hour” pharmacies should be maintained, especially in rural/outlying areas.
- 7) The HWB recognises the importance of the supplementary hour provision by pharmacies within the area and the possible impact a change of these hours of delivery could have on access to pharmacy provision in Medway. The HWB will continue to be vigilant in monitoring the impact of changes of hours of community pharmacy providers.
- 8) Loss of any of the 100-hour pharmacies could cause significant gaps in access to both essential pharmaceutical services and locally commissioned services that respond to particular population health needs.
- 9) There are proposed future housing developments across Medway which will mean that these areas will need to be reviewed on a regular basis to identify any significant increases in pharmaceutical need.
- 10) The area is changing rapidly and as well as consulting this PNA, the PSRC at NHS England should carry out a rapid review of any area where there is an application,

to ensure that the needs of this area have not changed in the lifetime of the PNA. This could include review of rural and urban classification and should be published alongside the PNA in the supplementary statements.

- 11) Any application must demonstrate that it is necessary, will provide value to the NHS and can improve on the availability of services across the specific area.
- 12) Out of area provision impacts not only the delivery of dispensing services but also the provision and accessibility of enhanced or locally commissioned services, especially where areas border each other. Commissioners should take cross border issues into account and consult with relevant stakeholders when they are reviewing, commissioning or decommissioning services, to avoid or mitigate against creating inequity of provision for the local population.
- 13) The Health and Wellbeing Board has the responsibility for publishing supplementary statements when the pharmaceutical need and services to an area change significantly. It is the responsibility of the organisation managing the GMS contracts to inform NHS England when a practice ceases to dispense as this could affect the overall provision of pharmaceutical services across an area. It is the responsibility of NHS England to inform the HWB of any changes to pharmaceutical service provision, including dispensing services, so that a decision can be made as to whether this change will affect access. This is particularly important where pharmacies are closing or consolidating due to the impact of recent funding cuts. The HWB has a duty to respond to all notifications under Regulation 26A (consolidation of pharmacies). It is proposed that the supplementary statements are issued every 3 months by NHS England (a member of the Board) as they hold all the relevant data. They will be published on the Medway Council website alongside the PNA.

## Appendix 1 – Acknowledgements

The writing group for the PNA, led by the NHS North of England Commissioning Support Unit (NECS) would like to thank the following for their contribution to the production of the PNA:

- Medway Council Public Health Team;
- Representatives of the PNA Steering Group;
- Kent Local Pharmaceutical Committee (LPC);
- Kent and Medway Clinical Commissioning Group (CCG);
- Planning Policy Team, Medway Council;
- NHS England and NHS Improvement – South East Region;
- Business Intelligence team, North of England Commissioning Support (NECS).

## Appendix 2 – Membership of the Steering Committee

<b>Member</b>	<b>Position and Organisation</b>
Dr David Whiting <b>Chair</b>	Deputy Director of Public Health, Medway Council
Cllr. David Brake	Portfolio holder for Adults' Services, Medway Council
Lisa Dodd	Senior Transformation and Programme Manager, NECS
Donna Bradbury	Transformation and Delivery Manager, NECS
Sue White	Medicine Optimisation Pharmacist, NECS
Leisa Smith	Administrator, NECS
Martyn Cheesman	Healthwatch Manager for Medway
Bekithemba Mhlanga	Senior Pharmacy and Optometry Commissioning Manager for South East, NHS England
Tarlochan Gill	Chair of Local Professional Network for Pharmacy in Kent and Medway
Prina Sahdev	Associate Director of Medicines for Kent and Medway and Swale
Lachlan Anderson	Senior Planner, Planning Policy Team, Medway Council
Mark Anyaegbuna	Chief Executive Officer - Kent LPC
Dr Eluned Broom	Senior Public Health Intelligence Analyst. Medway Council
Bob Gaffney	Business Intelligence Manager, NECS

### Appendix 3 – Pharmacy Addresses

Trading Name	Pharmacy Owner/Company Name	Address 1	Address 2	Address 3	Address 4	Post Code	Opening hours	Pharmacy type
LloydsPharmacy	Lloyds Pharmacy Ltd	8 Rainham Shopping Centre	Rainham	Gillingham	Kent	ME8 7HW	Mon: 09:00-17:30 Tues: 09:00-17:30 Wed: 09:00-17:30 Thurs: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:00 Sun: CLOSED	40 hour
Phoenix Pharmacy	A F De Souza	373 Maidstone Road		Gillingham	Kent	ME8 0HX	Mon: 09:00-12:00; 13:00-18:00 Tues: 09:00-12:00; 13:00-18:00 Wed: 09:00-12:00; 13:00-18:00 Thurs: 09:00-12:00; 13:00-18:00 Fri: 09:00-12:00; 13:00-18:00 Sat: 09:00-12:00; 13:00-17:30 Sun: CLOSED	40 hour
LloydsPharmacy	Lloyds Pharmacy Ltd	17 Kestrel Road	Lordswood	Chatham	Kent	ME5 8TH	Mon: 09:00-13:00; 14:00-18:00 Tues: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thurs: 09:00-13:00; 14:00-18:00	40 hour

							Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00 Sun: CLOSED	
Boots the Chemists	Boots UK Ltd	5 Hempstead Valley Shopping Centre	Hempstead	Gillingham	Kent	ME7 3PB	Mon: 08:30-20:00 Tues: 08:30-20:00 Wed: 08:30-20:00 Thurs: 08:30-20:00 Fri: 08:30-20:00 Sat: 08:00-19:00 Sun: 10:00-16:00	40 hour
Woodlands Pharmacy	Gillingham MC Ltd	Woodlands Road	Woodlands Road	Gillingham	Kent	ME7 2BU	Mon: 07:00-22:30 Tues: 07:00-22:30 Wed: 07:00-22:30 Thurs: 07:00-22:30 Fri: 07:00-22:30 Sat: 07:00-22:30 Sun: 10:00-17:00	100 hour
Mediclinic Pharmacy	Mediclinic Pharmacy Ltd	74-76 Watling Street		Gillingham	Kent	ME7 2YW	Mon: 09:00-18:00 Tues: 09:00-18:00 Wed: 09:00-18:00 Thurs: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun: CLOSED	40 hour

Paydens Pharmacy	Paydens Ltd	The Healthy Living Centre	Balmoral Gardens	Gillingham	Kent	ME7 4PN	Mon: 08:00-20:00 Tues: 08:00-20:00 Wed: 08:00-20:00 Thurs: 08:00-20:00 Fri: 08:00-20:00 Sat: 09:00-16:00 Sun: CLOSED	40 hour
J Spensley	Paydens Ltd	1 Twydall Green		Gillingham	Kent	ME8 6JY	Mon: 08:30-17:30 Tues: 08:30-17:30 Wed: 08:30-17:30 Thurs: 08:30-17:30 Fri: 08:30-17:30 Sat: 09:00-13:00 Sun: CLOSED	40 hour
Fenns Chemist	Paydens Ltd	Unit 9-10, Walderslade Centre	Walderslade	Chatham	Kent	ME5 9LR	Mon: 09:00-18:00 Tues: 09:00-18:00 Wed: 09:00-18:00 Thurs: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun: CLOSED	40 hour
Knights Pharmacy	Paydens Ltd	39 Knights Road	Hoo	Rochester	Kent	ME3 9DT	Mon: 09:00-18:30 Tues: 09:00-18:30 Wed: 09:00-18:30 Thurs: 09:00-18:30 Fri: 09:00-18:30 Sat: CLOSED Sun: CLOSED	40 hour



Brompton Pharmacy	MAKS Pharmacy Ltd	3 High Street,	Brompton	Gillingham	Kent	ME7 5AA	Mon: 08:30-13:00; 14:00-18:30 Tues: 08:30-13:00; 14:00-18:30 Wed: 08:30-13:00; 14:00-18:30 Thurs: 08:30-13:00; 14:00-18:30 Fri: 08:30-13:00; 14:00-18:30 Sat: CLOSED Sun: CLOSED	40 hour
Boots the Chemists	Boots UK Ltd	19-21 Rainham Shopping Centre	Gillingham	Kent	Kent	ME8 7HW	Mon: 09:00-14:00; 15:00-18:00 Tues: 09:00-14:00; 15:00-18:00 Wed: 09:00-14:00; 15:00-18:00 Thurs: 09:00-14:00; 15:00-18:00 Fri: 09:00-14:00; 15:00-18:00 Sat: 09:00-14:00; 15:00-15:30 Sun: CLOSED	40 hour
Wayfield Pharmacy	Lawsat Pharm Ltd	163 Wayfield Road		Chatham	Kent	ME5 0HD	Mon: 09:00-13:00; 14:00-18:00 Tues: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thurs: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-12:30 Sun: CLOSED	40 hour

Cliffe Woods Pharmacy	Lawsat Pharm Ltd	7 Parkside Parade	Cliffe Wood	Rochester	Kent	ME3 8HX	Mon: 08:30-13:00; 14:00-18:00 Tues: 08:30-13:00; 14:00-18:00 Wed: 08:30-13:00; 14:00-18:00 Thurs: 08:30-13:00; 14:00-18:00 Fri: 08:30-13:00; 14:00-18:00 Sat: 09:00-12:00 Sun: CLOSED	40 hour
Merlin Pharmacy	Merlin Silverweed Ltd	54 Silverweed Road		Chatham	Kent	ME5 0QX	Mon: 09:00-18:00 Tues: 09:00-18:00 Wed: 09:00-18:00 Thurs: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-12:30 Sun: CLOSED	40 hour
Tesco Pharmacy	Tesco Stores Ltd	Courtney Road		Gillingham	Kent	ME8 0GX	Mon: 08:00-22:30 Tues: 06:30-22:30 Wed: 06:30-22:30 Thurs: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:30 Sun: 10:00-16:00	100 hour
Paydens Pharmacy	Paydens Ltd	134-136 Delce Road		Rochester	Kent	ME1 2DT	Mon: 09:00-18:00 Tues: 09:00-18:00 Wed: 09:00-18:00 Thurs: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun: CLOSED	40 hour

Karsons Pharmacy	Karsons Pharma Limited	33 Pattens Lane		Chatham	Kent	ME4 6JR	Mon: 09:00-13:00; 14:00-18:00 Tues: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thurs: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00 Sun: CLOSED	40 hour
Well	Bestway National Chemists Ltd	22 Magpie Hall Road		Chatham	Kent	ME4 5JY	Mon: 09:00-18:00 Tues: 09:00-18:00 Wed: 09:00-18:00 Thurs: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun: CLOSED	40 hour
College Pharmacy Ltd	Direct Health Solutions Ltd	87 Riverside Estate	Sir Thomas Langley Road	Rochester	Kent	ME2 4BH	Mon: 09:00-17:00 Tues: 09:00-17:00 Wed: 09:00-17:00 Thurs: 09:00-17:00 Fri: 09:00-17:00 Sat: CLOSED Sun: CLOSED	40 hour
Focus Chemists	J N & P Shaw	126 Borstal Street		Rochester	Kent	ME1 3JS	Mon: 09:00-18:00 Tues: 09:00-18:00 Wed: 09:00-18:00 Thurs: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun: CLOSED	40 hour

Ryders Chemist	Paydens Ltd	130 High Street		Rochester	Kent	ME1 1JT	Mon: 09:00-17:30 Tues: 09:00-17:30 Wed: 09:00-17:30 Thurs: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun: CLOSED	40 hour
Hoo Pharmacy	A & S Shillam LtdLtd	5 Main Road	Hoo	Rochester	Kent	ME3 9AA	Mon: 09:00-18:30 Tues: 09:00-18:30 Wed: 09:00-18:30 Thurs: 09:00-18:30 Fri: 09:00-18:30 Sat: 09:00-17:30 Sun: CLOSED	40 hour
Karsons Pharmacy	Karsons Pharma Limited	69-71 City Way		Rochester	Kent	ME1 2BA	Mon: 07:00-23:00 Tues: 07:00-23:00 Wed: 07:00-23:00 Thurs: 07:00-23:00 Fri: 07:00-23:00 Sat: 07:00-23:00 Sun: 08:30-13:30	100 hour
Fenns Chemist	Paydens Ltd	33-35 Parkwood Green		Rainham	Kent	ME8 9PW	Mon: 09:00-17:30 Tues: 09:00-17:30 Wed: 09:00-17:30 Thurs: 09:00-17:30 Fri: 09:00-18:00 Sat: 09:00-16:00 Sun: CLOSED	40 hour

Osbon Pharmacy	Osbon Ltd	1 Railway Street		Gillingham	Kent	ME7 1XF	Mon: 09:00-19:00 Tues: 09:00-19:00 Wed: 09:00-19:00 Thurs: 09:00-19:00 Fri: 09:00-19:00 Sat: 09:00-13:00 Sun: CLOSED	40 hour
Paydens Pharmacy	Paydens Ltd	139 New Road		Chatham	Kent	ME4 4PT	Mon: 09:00-18:30 Tues: 09:00-18:30 Wed: 09:00-18:30 Thurs: 09:00-18:30 Fri: 09:00-18:30 Sat: 09:00-13:00 Sun: CLOSED	40 hour
Smiths Pharmacy	Amco (Medway) Ltd	318-320 Canterbury Street		Gillingham	Kent	ME7 5JP	Mon: 09:00-13:00; 14:00-18:00 Tues: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thurs: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00 Sun: CLOSED	40 hour
Asda Pharmacy	Asda Stores Ltd	387 Maidstone Road		Chatham	Kent	ME5 9SD	Mon: 08:00-23:00 Tues: 07:00-23:00 Wed: 07:00-23:00 Thurs: 07:00-23:00 Fri: 07:00-23:00 Sat: 07:00-22:00 Sun: 10:00-16:00	100 hour

Sturdee Avenue Pharmacy	Cemat Ltd	46 Sturdee Avenue		Gillingham	Kent	ME7 2HN	Mon: 09:00-13:00; 14:00-18:30 Tues: 09:00-13:00; 14:00-18:30 Wed: 09:00-13:00; 14:00-18:30 Thurs: 09:00-13:00; 14:00-18:30 Fri: 09:00-13:00; 14:00-18:30 Sat: 09:00-13:00 Sun: CLOSED	40 hour
Merlin Pharmacy	Merlin City Way Ltd	364 City Way		Rochester	Kent	ME1 2BQ	Mon: 09:00-18:00 Tues: 09:00-18:00 Wed: 09:00-18:00 Thurs: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun: CLOSED	40 hour
Island Pharmacy	Maks Pharmacy Ltd	63 Aster Drive	St Marys Island	Chatham	Kent	ME4 3EB	Mon: 08:30-13:00; 14:00-18:30 Tues: 08:30-13:00; 14:00-18:30 Wed: 08:30-13:00; 14:00-18:30 Thurs: 08:30-13:00; 14:00-18:30 Fri: 08:30-13:00; 14:00-18:30 Sat: CLOSED Sun: CLOSED	40 hour

Bryant Road Pharmacy	Amco (Medway) Ltd	59-61 Bryant Road		Strood	Kent	ME2 3EP	Mon: 09:00-13:00; 14:30-18:00 Tues: 09:00-13:00; 14:30-18:00 Wed: 09:00-13:00; 14:30-18:00 Thurs: 09:00-13:00; 14:30-18:00 Fri: 09:00-13:00; 14:30-18:00 Sat: 09:00-13:00 Sun: CLOSED	40 hour
Boots the Chemists	Boots UK Ltd	30-34 The Pentagon		Chatham	Kent	ME4 4BB	Mon: 08:30-18:00 Tues: 08:30-18:00 Wed: 08:30-18:00 Thurs: 08:30-18:00 Fri: 08:30-18:00 Sat: 09:30-17:00 Sun: 10:00-16:00	40 hour
Tesco Pharmacy	Tesco Stores Ltd	3 Cuxton Road		Strood	Kent	ME2 2DE	Mon: 08:00-20:00 Tues: 08:00-20:00 Wed: 08:00-20:00 Thurs: 08:00-20:00 Fri: 08:00-20:00 Sat: 08:00-20:00 Sun: 10:00-16:00	40 hour
Pharmacy1st	Pharmacy1st	186-188 Canterbury Street		Gillingham	Kent	ME7 5XG	Mon: 09:00-18:00 Tues: 09:00-18:00 Wed: 09:00-18:00 Thurs: 09:00-18:00 Fri: 09:00-18:00 Sat: CLOSED Sun: CLOSED	40 hour

Medway Pharmacy	Medway Drive-Thru Ltd	465 Canterbury Street		Gillingham	Kent	ME7 5LJ	Mon: 07:30-22:00 Tues: 07:30-22:00 Wed: 07:30-22:00 Thurs: 07:30-22:00 Fri: 07:30-22:00 Sat: 07:30-22:00 Sun: 07:30-22:00	100 hour
Street End Pharmacy	Lawsat Pharm Ltd	23 Street End Road		Chatham	Kent	ME5 0AA	Mon: 08:30-12:30; 13:30-18:00 Tues: 08:30-12:30; 13:30-18:00 Wed: 08:30-12:30; 13:30-18:00 Thurs: 08:30-12:30; 13:30-18:00 Fri: 08:30-12:30; 13:30-18:00 Sat: CLOSED Sun: CLOSED	40 hour
Hempstead Pharmacy	Dr S Karim	148B Hempstead Road		Gillingham	Kent	ME7 3QE	Mon: 09:00-13:00; 14:00-18:00 Tues: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thurs: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-12:00 Sun: CLOSED	40 hour



Wainscott Pharmacy	Lawsat Pharm Ltd	Miller Way	Wainscott	Rochester	Kent	ME2 4LP	Mon: 08:30-13:00; 14:30-18:00 Tues: 08:30-13:00; 14:30-18:00 Wed: 08:30-13:00; 14:30-18:00 Thurs: 08:30-13:00; 14:00-17:30 Fri: 08:30-13:00; 14:30-18:00 Sat: CLOSED Sun: CLOSED	40 hour
Delmergate Ltd	Delmergate Ltd	21 Shirley Avenue		Chatham	Kent	ME5 9UR	Mon: 09:00-13:00; 14:00-17:30 Tues: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thurs: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-13:00 Sun: CLOSED	40 hour
Kamsons Pharmacy	Waremass Ltd	29 Darnley Road	Strood	Rochester	Kent	ME2 2EU	Mon: 08:45-19:00 Tues: 08:45-19:00 Wed: 08:45-19:00 Thurs: 08:45-19:00 Fri: 08:45-19:00 Sat: 08:45-13:00 Sun: CLOSED	40 hour

Morrisons Pharmacy	WM Morrisons Supermarkets plc	Neighbourhood Centre	Princes Park	Walderslade	Kent	ME5 7PQ	Mon: 09:00-20:00 Tues: 09:00-20:00 Wed: 09:00-20:00 Thurs: 09:00-20:00 Fri: 09:00-20:00 Sat: 09:00-19:00 Sun: 10:00-16:00	40 hour
Osbon Pharmacy	Osbon Ltd	17 Duncan Road		Gillingham	Kent	ME7 4LA	Mon: 09:00-19:00 Tues: 09:00-19:00 Wed: 09:00-19:00 Thurs: 09:00-19:00 Fri: 09:00-19:00 Sat: 09:00-13:00 Sun: CLOSED	40 hour
Karsons Pharmacy Ltd	Karsons Pharmacy Ltd	5 High Street		Strood	Kent	ME2 4AB	Mon: 09:00-13:00; 14:00-18:00 Tues: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thurs: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: CLOSED Sun: CLOSED	40 hour
Sunlight Pharmacy	Lawsat Pharm Ltd	Sunlight Centre	Richmond Road	Gillingham	Kent	ME7 1LX	Mon: 09:00-13:00; 14:00-18:00 Tues: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thurs: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00	40 hour

							Sat: CLOSED Sun: CLOSED	
Palmers Pharmacy	Centurion Park Ltd	98 Palmerston Road		Chatham	Kent	ME4 5SJ	Mon: 09:00-13:00; 14:00-18:00 Tues: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thurs: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-12:30 Sun: CLOSED	40 hour
Hobbs Pharmacy	Butt & Hobbs Ltd	41-43 Wells Road	Marlow Park, Strood	Rochester	Kent	ME2 2PW	Mon: 09:00-13:00; 14:00-18:00 Tues: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thurs: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: CLOSED Sun: CLOSED	40 hour

Boots the Chemists	Boots UK Ltd	83 High Street	Strood	Rochester	Kent	ME2 4AH	Mon: 09:00-17:30 Tues: 09:00-17:30 Wed: 09:00-17:30 Thurs: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun: CLOSED	40 hour
Pharmacy @ Gun Lane	G L Strood Ltd	Gun Lane Medical Centre	Gun Lane	Strood, Rochester	Kent	ME2 4UW	Mon: 07:00-22:30 Tues: 07:00-22:30 Wed: 07:00-22:30 Thurs: 07:00-22:30 Fri: 07:00-22:30 Sat: 07:00-22:30 Sun: 10:00-17:00	100 hour
Boots the Chemists	Boots UK Ltd	125 - 127 High Street		Gillingham	Kent	ME7 1BS	Mon: 09:00-17:30 Tues: 09:00-17:30 Wed: 09:00-17:30 Thurs: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun: CLOSED	40 hour
Williams Chemist	Amco (Medway) Ltd	86 Frindsbury Road	Frindsbury	Rochester	Kent	ME2 4HY	Mon: 09:00-13:00; 14:15-18:00 Tues: 09:00-13:00; 14:15-18:00 Wed: 09:00-13:00; 14:15-18:00 Thurs: 09:00-13:00; 14:15-18:00 Fri: 09:00-13:00; 14:15-18:00 Sat: 09:00-14:00 Sun: CLOSED	40 hour

Bod Pharma	Bod Pharma & Testing Ltd	The Dame Sybil Thorndike Medical Centre	Longley Road	Rochester	Kent	ME1 2TH	Mon: 08:30-18:30 Tues: 08:30-18:30 Wed: 08:30-18:30 Thurs: 08:30-18:30 Fri: 08:30-18:30 Sat: 09:00-12:00 Sun: CLOSED	40 hour
Atos Care	Atos Medical UK Ltd	Unit 69 Riverside Estate	Sir Thomas Longley Road, Medway City Estate	Rochester	Kent	ME2 4BH		40 hour
								Appliance contractor

#### Appendix 4 – GP Practices and Addresses

Practice Name	Address	PCN
Woodlands Family Practice	Gillingham Medical Centre, Woodlands Road, Gillingham, ME72BU	Gillingham South
Glebe Family Practice	Vicarage Road, Gillingham, ME7 5UA	Gillingham South
Pump Lane Surgery	13 Pump Lane, Rainham Mark, Gillingham, ME8 7AA	Gillingham South
Upper Canterbury Street Surgery	511 Canterbury Street, Gillingham, Kent, ME7 5LH	Gillingham South
Napier Road Surgery (Dr Jana's Practice)	151 Napier Road, Gillingham, Kent, ME7 4HH	Gillingham South
Medway Medical Centre	90-92 Malvern Road, Gillingham, ME7 4BB	Gillingham South
Balmoral Gardens (Red Suite)	Red Suite, Balmoral Gardens, Healthy Living Center, Gillingham, ME7 4PN	Medway Central
Bryant Street Medical Centre	29 Bryant Street, Chatham, ME4 5QS	Medway Central
Brompton Medical Centre (Sydenham House Medical Group)	28a Garden Street. Brompton, Gillingham, ME7 5AS	Medway Central
Maritime Health	68 New Rd, Chatham ME4 4QR	Medway Central
Kings Family Practice (Aspire Medical Health)	30-34 Magpie Hall Road, Chatham, ME4 5JY	Medway Central
The Elms Medical Centre	Tilley Close, Hoo St Werburgh, Rochester, ME3 9AE	Medway Peninsula
High Parks Medical Practice	Parkside, Cliffe Woods, Rochester, ME3 8HX	Medway Peninsula
Hoo St Werburgh Medical Practice (Aspire Medical Health)	98 Bells Lane, Hoo, Rochester, ME3 9HU	Medway Peninsula

Thames Avenue Surgery	2 Thames Avenue, Rainham, Gillingham, ME8 9BW	Medway Rainham
Orchard Family Practice	Red Suite, Rainham Healthy Living Centre, 103-107 High St, Rainham, ME8 8AA	Medway Rainham
Maidstone Road Surgery (Rainham)	53a/b Maidstone Road, Rainham, Gillingham, ME8 0DP	Medway Rainham
Waltham Road Medical Centre	4a Waltham Road, Gillingham, ME8 6XQ	Medway Rainham
Wigmore Medical Practice	114 Woodside, Wigmore, Gillingham, ME8 0PW	Medway Rainham
Eastcourt Lane Surgery	52 Eastcourt lane, Gillingham, ME8 6EY	Medway Rainham
Church View Practice	Yellow Suite, Rainham Healthy Living Centre, 103-107 High St, Rainham, ME8 8AA	Medway Rainham
Parkwood Family Practice	119 – 121 Long Catlis Road, Parkwood, Rainham, Gillingham, ME8 9RR	Medway Rainham
Long Catlis Road Surgery	Long Catlis Road, Rainham, Gillingham, ME8 9 PR	Medway Rainham
King George Road Surgery	52a King George Road, Walderslade, Chatham,, ME5 0TT	Medway South
Stonecross and West Drive Surgeries	25 Streetend Road, Chatham,	Medway South
Maidstone Rd Chatham Surgery	262 Maidstone Road, Chatham, ME4 6JL	Medway South
Reach Walderslade Village Surgery	62a Robin Hood Lane, Walderslade, Chatham, ME5 9LD	Medway South
Churchill Medical Group	94 Churchhill Avenue, Chatham, ME5 0DL	Medway South
Matrix Medical Practice (Luton MC) (Sydenham House Medical Group)	10 Beacon Hill, Luton, Chatham ME5 7JX	Medway South
Princes Park Medical Centre	Dove Close, Walderslade, Chatham, ME5 7TD	Medway South

City Way Medical Practice	65-67 City Way, Rochester, ME1 2AY	Rochester
Thorndike Health Care Centre	Longley Road, Rochester, ME1 2TH	Rochester
Castle Medical Practice	Rochester Community Healthy Living Centre, Delce Road, Rochester, ME1 2EL	Rochester
Borstal Village Surgery	25 Wouldham Road, Borstal, Rochester, Kent, ME1 3JY	Rochester
Riverside Medical Practice	Ferry Rd, Halling, Rochester ME2 1NP	Strood
Gun Lane Medical Centre (Sydenham House Medical Group)	Gun Lane Medical Centre Strood Rochester, ME2 4UW	Strood
Court View Surgery	2a Darnley Road, Strood, Kent, ME2 2HA	Strood
Apex Medical Centre	1st Floor, The Medical Centre, Gun Lane, Strood, Kent, ME2 4UW	Strood
Marlowe Park Medical Centre (Aspire Medical Health)	Wells Road, Strood, ME2 2PW	Strood
St Mary's Medical Centre	Vicarage Road, Strood, Rochester, Kent, ME2 4DG	Strood



## Appendix 5 – Survey of Pharmaceutical Providers

### When We Consulted

Dates: 16<sup>th</sup> February 2022 – 16th March 2022

### How We Consulted and Who Responded

An on-line survey was circulated to all Medway pharmacies with support from the Local Pharmaceutical Committee Members on the PNA Steering Group.

- 36 (66%) of the pharmacies in Medway responded to the survey.

### Survey Results: key findings

#### In addition to English what languages are spoken?

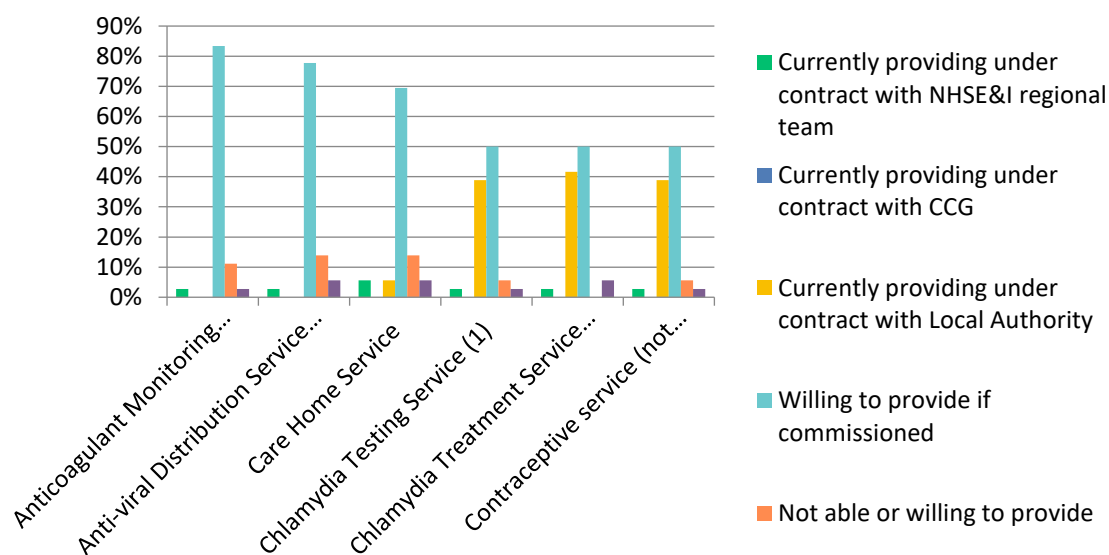
13 of the 36 respondents indicated that in addition to English other languages were spoken at the community pharmacy services.

These included:

Hindi (3)	Gujarati (1)	Panjabi (8)
Urdu (1)	Bengali (3)	Nepalese (1)
Yoruba (1)	Arabic (2)	Portuguese (2)
French (1)	Twi (2)	Ghanaian (1)
Russian (1)	Bulgarian (1)	

#### Which of the following other services does the pharmacy provide, or would be willing to provide?

Which of the following other services does the pharmacy provide, or would be willing to provide?

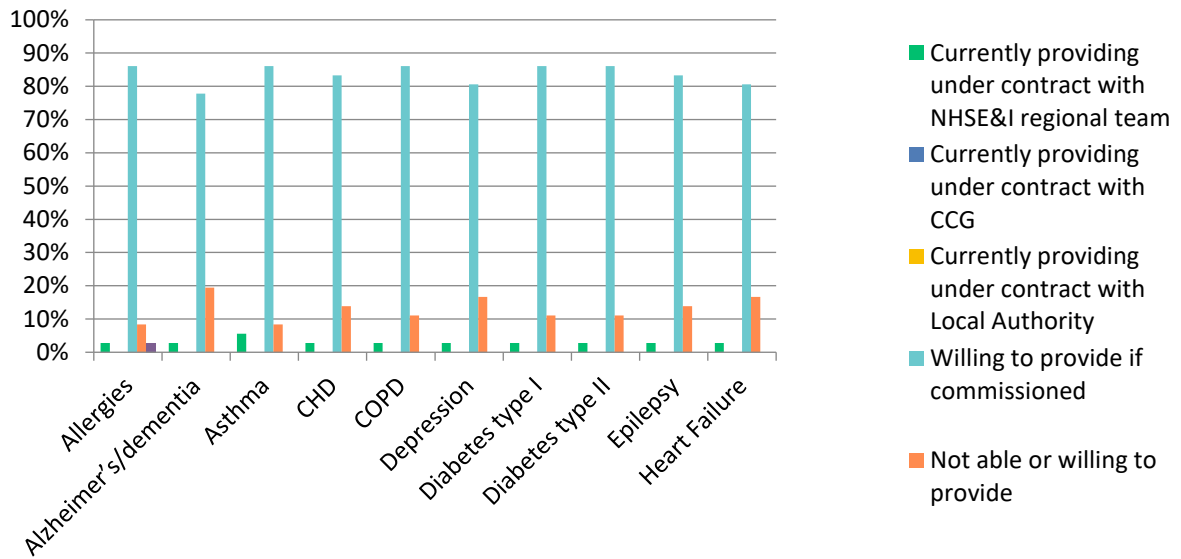


#### Which of the following Disease Specific Medicines Management Services does the pharmacy provide, or would be willing to provide?

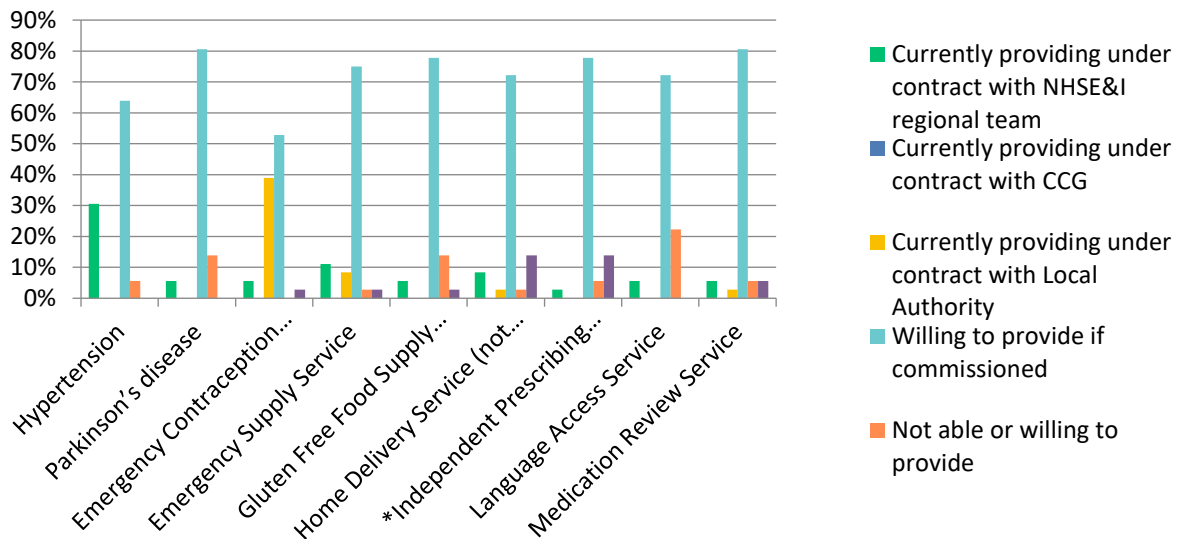
Oversight of provision of, or willingness to provide additional locally commissioned service by Community pharmacies in Medway is summarised in the table below. It is

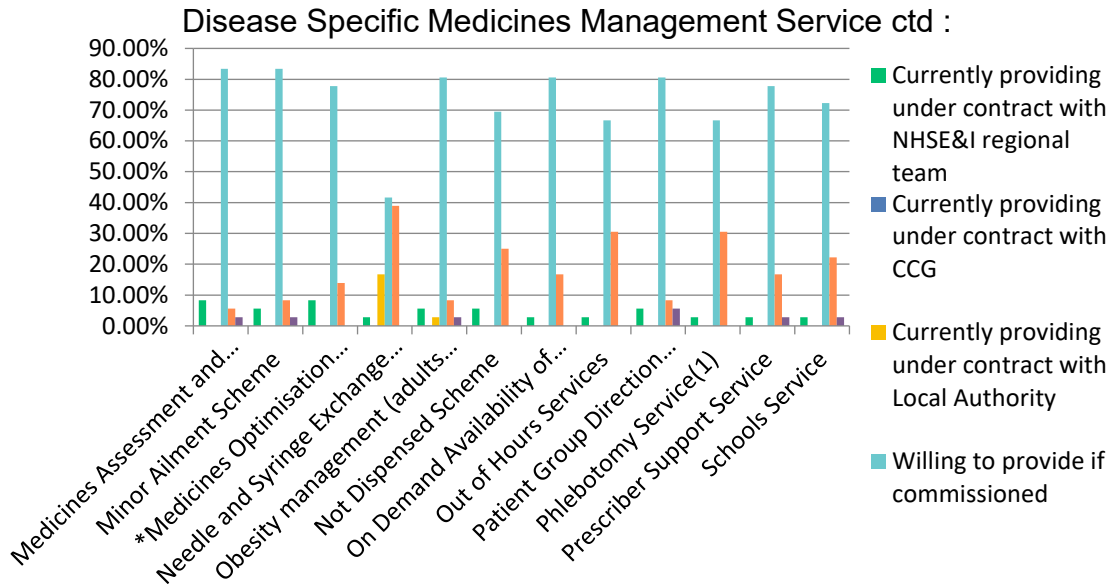
important to note that as only 64% of the community pharmacy contractors completed the questionnaire and that not all responses provided information regarding all sections regarding the additional services. Therefore, although this information provides an overview, it does not reflect the full service delivery across the area. In addition more than half of the pharmacies indicated their intention to engage with new services being introduced at the time of the survey, namely the Hypertension finding service and the Stop Smoking advanced service. Generally, it is clear that pharmacy providers would be willing to support and deliver additional services if these were commissioned.

### Disease Specific Medicines Management Service:



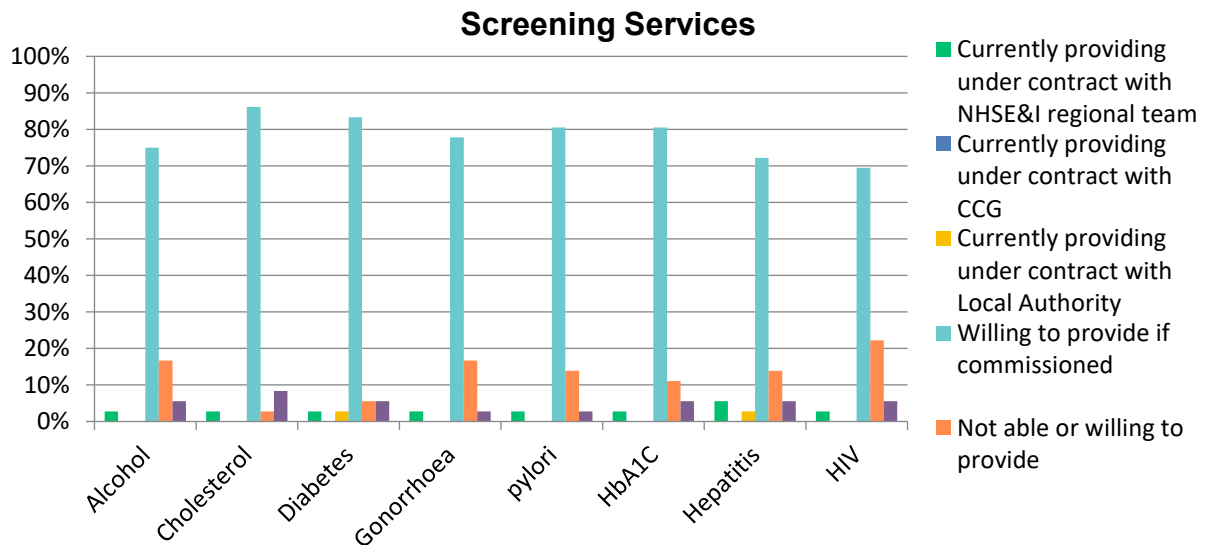
### Disease Specific Medicines Management Service ctd..





**Which of the following Screening Services does the pharmacy provide, or would be willing to provide?**

As seen previously, survey responses indicated that the majority of pharmacies were willing to provide screening services, if these were commissioned

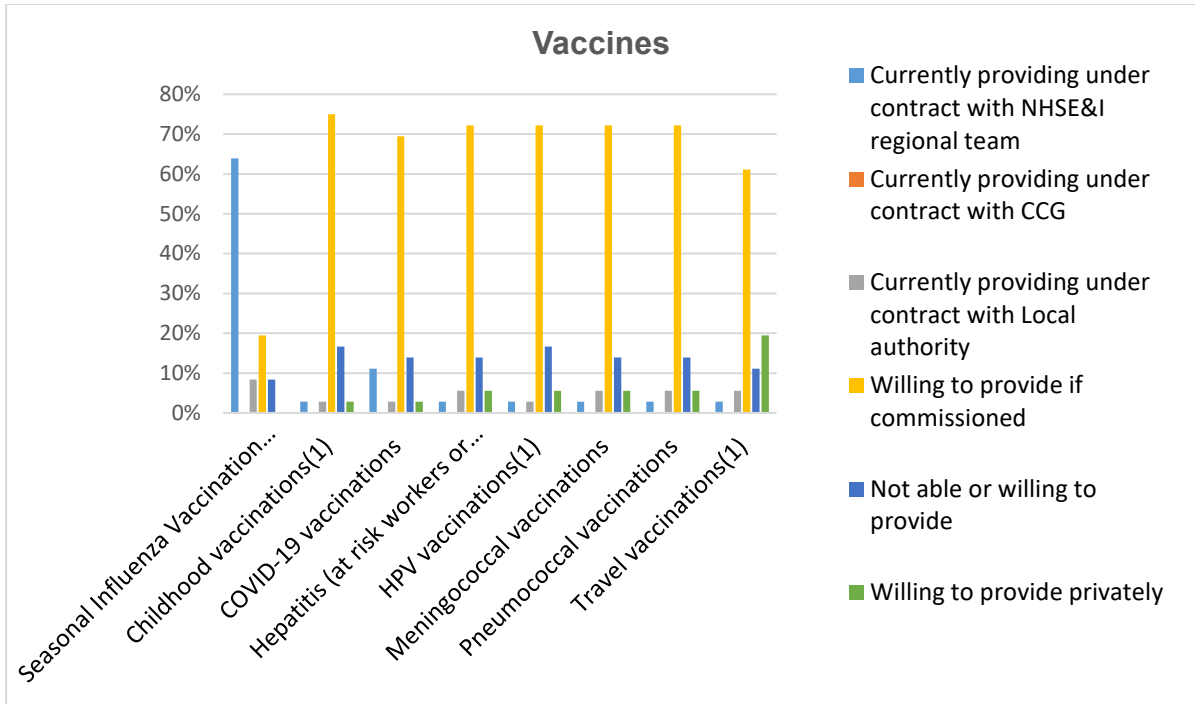


**Which of the following Vaccine administration service does the pharmacy provide, or would be willing to provide?**

In terms of provision of vaccines, 64% of the respondents indicated that they currently provide an administration of flu vaccine service and 11% the covid 19 vaccine services.

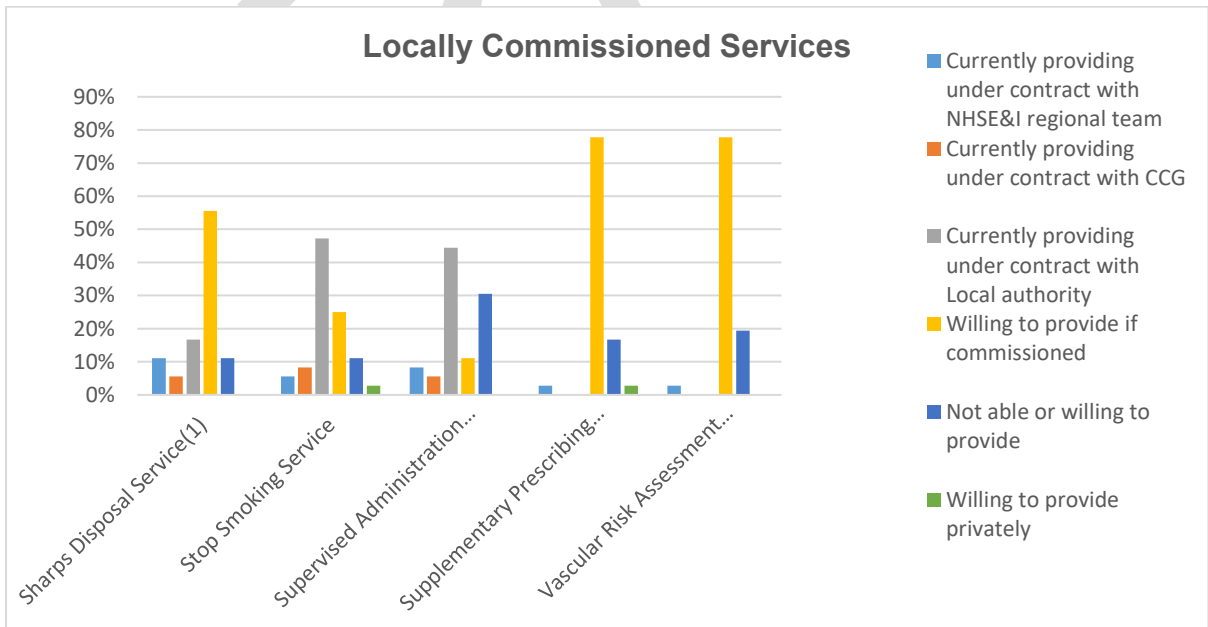
Provision of other vaccines are not currently commissioned services although there was indication that the majority (72%) of respondents would support these services if commissioned.

61% of respondents indicated that they would provide travel vaccines if commissioned and 19% would be willing to provide this as a private service.

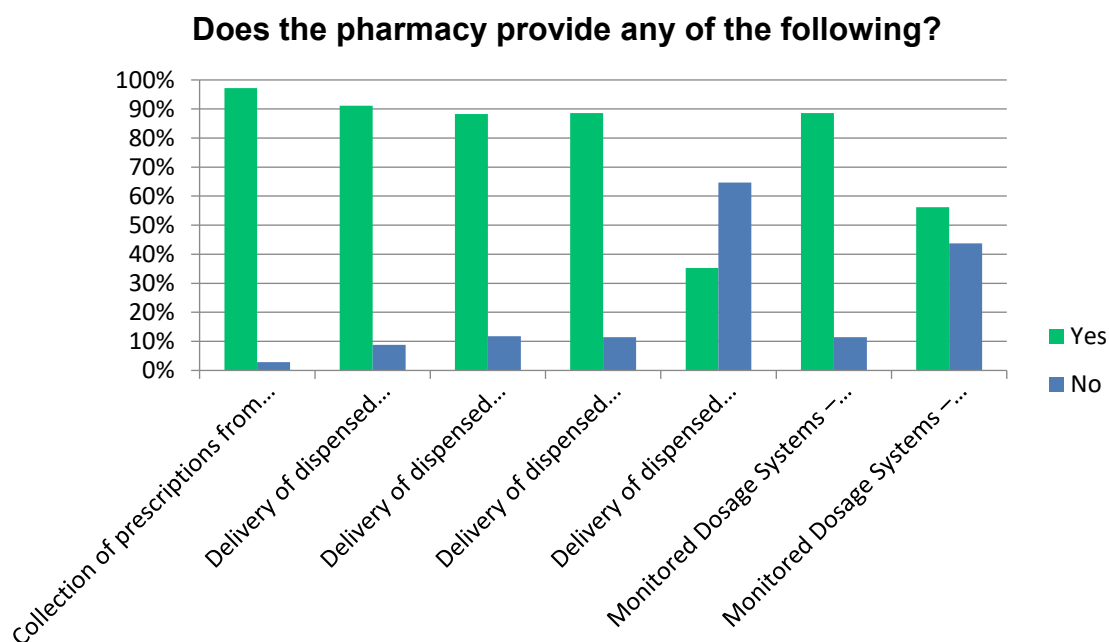


**Which of the following locally commissioned services does the pharmacy provide, or would be willing to provide?**

A number of pharmacies indicated that they provided locally commissioned services both via the CCG or the local authority although others indicated that they would provide these "if the service was commissioned". This suggests that there could be improved engagement and awareness regarding services that pharmacies in Medway could provide.



**Does the pharmacy provide any of the following non-commissioned services?**  
The majority of respondents to the survey indicated that they provide additional non-commissioned services.



Almost all (97%) respondents indicated that they collect prescriptions from surgeries although generally there will be significantly less prescriptions than in previous PNAs with the implementation of electronic prescribing across Primary care.

89% of pharmacies deliver dispensed medicines free of charge with some pharmacies charging for this service. The patient groups that the pharmacies generally provided this service for included those who were housebound, elderly and vulnerable. 35% of pharmacies also indicated that they charged for deliveries although no detail of patient groups was indicated.

89% of respondents indicated that they would provide medicines in monitored dosage systems (MDS) free of charge although 56% indicated that they would charge for this service. Again, no patient groups were indicated to clarify who may or may not be charged

**Is there a particular need for a locally commissioned service in your area? If so, what is the service requirement and why?**

23 respondents indicated that they felt that there was a need for further locally commissioned services in the area listing the following as possible service requirements:

- Minor Ailment schemes - suggested by 15 respondents
- Covid boosters - suggested by 1 respondent
- Funded provision of MDS – suggested by 3 respondents
- Funded medicine delivery service – suggested by 3 respondents
- Repeat prescription management service – suggested by 3 respondents
- Anticoagulant monitoring - suggested by 1 respondent
- Emergency contraception provision - suggested by 1 respondent

- Supply of antibiotics via Patient Group Directions (PGD) - suggested by 1 respondent

DRAFT

## Appendix 6 – Community Engagement Questionnaire

### Survey of Pharmacy Customers/Public

#### When We Consulted

24<sup>th</sup> February 2022 to 16<sup>th</sup> March 2022.

#### How We Consulted and Who Responded

An electronic survey was produced and initially tested via Healthwatch and other members of the PNA Steering Group. The on-line survey was then made accessible via the Council's website and promoted on behalf of the Health and Wellbeing Board by asking people living in the Medway area to help improve local pharmacy services by answering a few questions about the way they use pharmacies. It was explained that the responses would help to understand the needs of people in Medway and develop a comprehensive Pharmaceutical Needs Assessment (PNA) for the area. It was clarified that all responses would be kept confidential, and that taking part was completely voluntary.

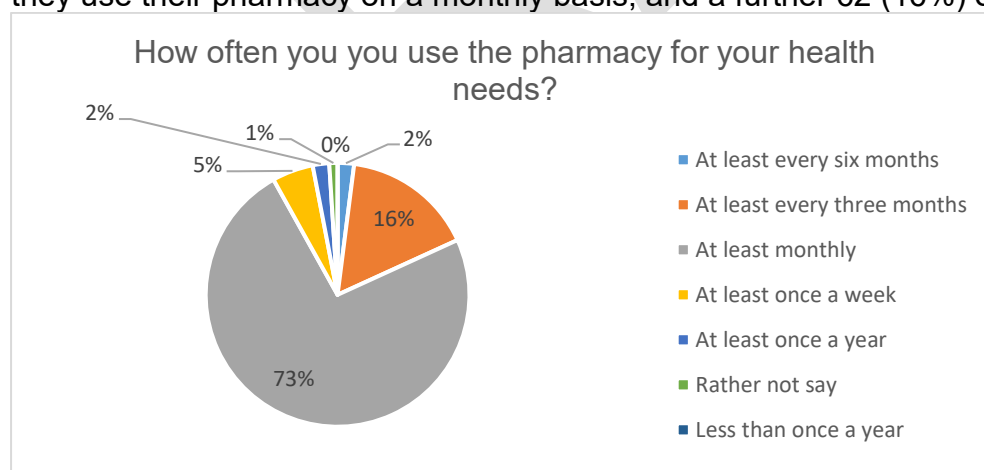
389 people provided complete survey responses.

#### Survey Results

Most respondents (371 people, 95% respondents) stated that they do use pharmacies.

95% (370) indicated that they receive their dispensed medicines from a pharmacy with 5% (19) of the respondents indicated that they received their dispensed medicines from a dispensing doctor's practice.

95% of respondents indicated that they had accessed their pharmacy for healthcare needs in the last 12 months. The majority (283; 73%) of these people indicated that they use their pharmacy on a monthly basis, and a further 62 (16%) every 3 months.



The majority (71%) of people indicated that they always used the same pharmacy all with a further (25%) usually using the same pharmacy. Of those that did use pharmacy services, the majority (89%) indicated that they accessed a community pharmacy on the high street or in a supermarket (8%) with only 1% indicating that they would use on-line pharmacy services.

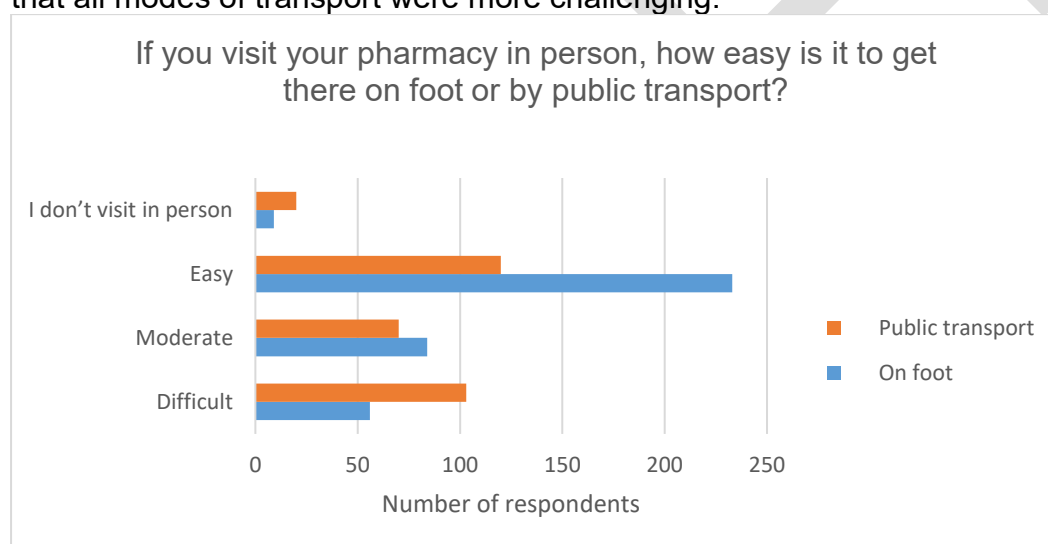
The majority of respondents, 63%, indicated that they chose to use the pharmacy that was closest to home although 6% indicated that this choice was based on the pharmacy being in a shopping centre or supermarket and 3% being nearer to people's place of work.

Some of the additional comments influencing the choice of pharmacy included:

- *"because of the expertise of the pharmacist who has never failed me"*
- *"it's not my local but a much better service, hence rather travel to it and get what we need"*
- *"they don't take hours to get a prescription dispensed or ask you to come back the next day"*

When asked how people usually travel to the pharmacy, the majority of people indicated that they travelled by car or taxi (46%) or on foot (47%) with only 1% of people having their medicines delivered by the pharmacy or collected by someone else.

In terms of ease of access to pharmacies as described, generally, people indicated that travel by foot, car or public transport was easy although some people did identify that all modes of transport were more challenging.

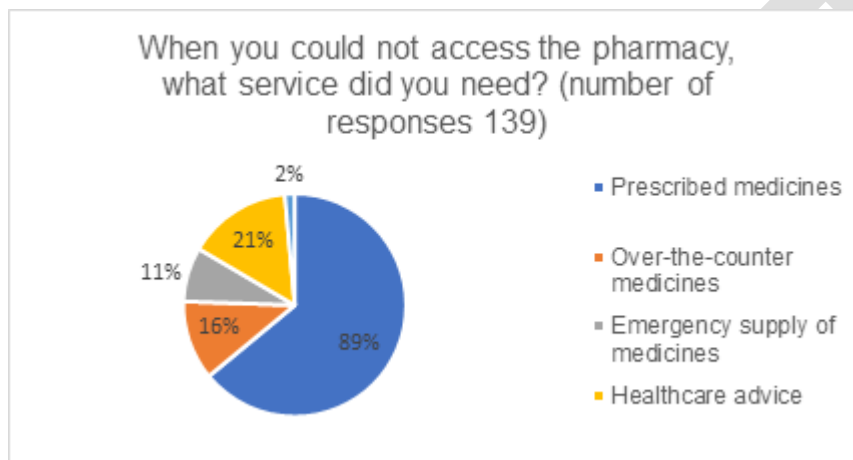
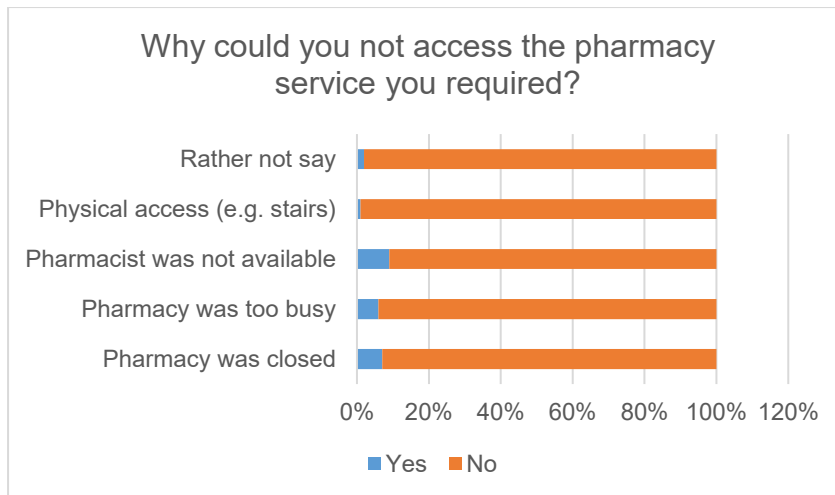


When travelling to the pharmacies:

- 60% indicated that travel by foot was easy with 22% indicating it was moderate and 14% difficult.
- 31% indicated that travel by public transport was easy with 18% indicating it was moderate and 26% difficult.

108 respondents (28%) identified that they had experience of having a healthcare need (e.g., prescriptions, medicines, advice) from a pharmacy but not able to access it at the time. 261 (67%) of the people completing the survey had not experienced this issue. In a small number of cases, less than 10% in ease instance, access had been difficult due to opening times, the pharmacy being too busy or availability of the pharmacist,

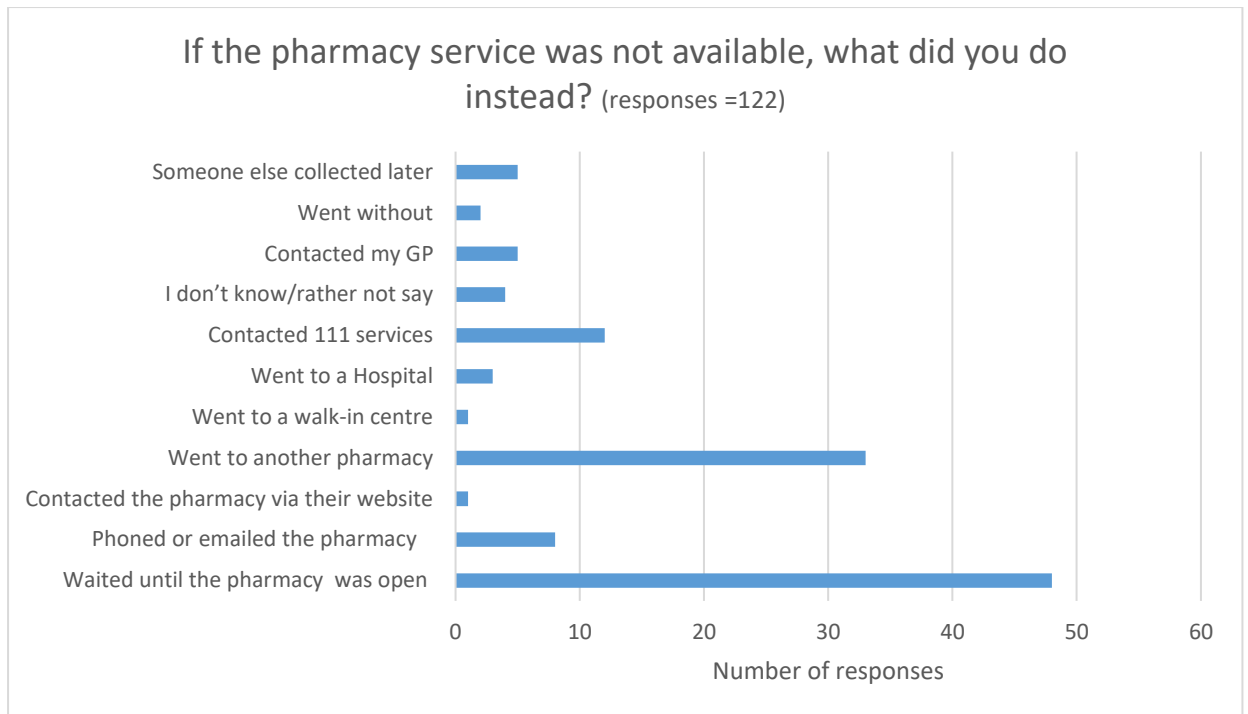




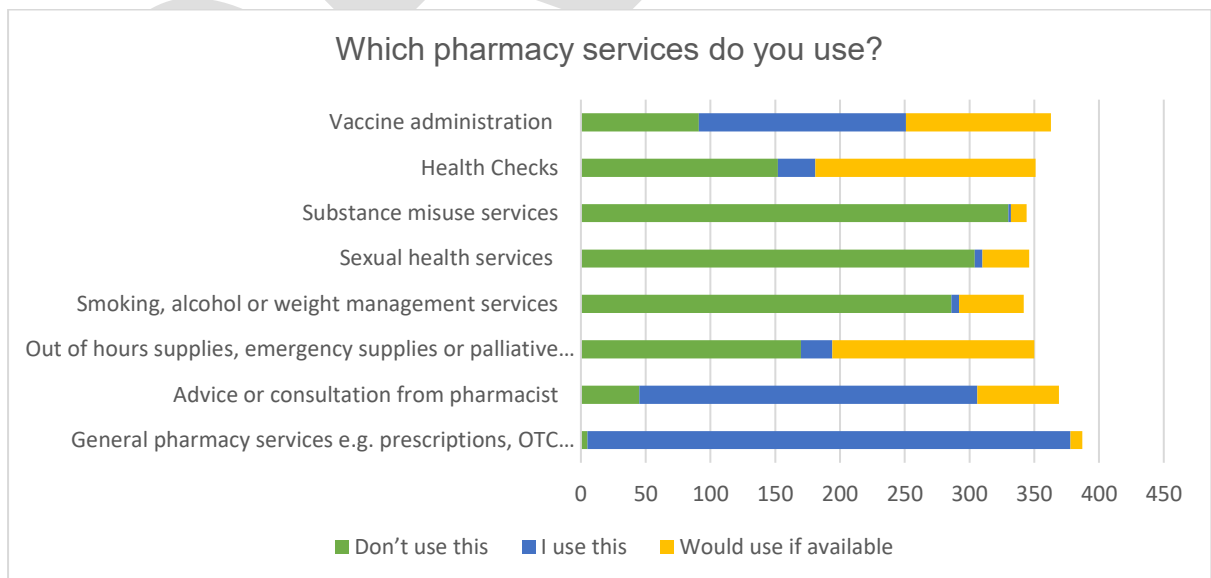
Additional information regarding why people could not access the service they needed included:

- Difficulties with medicine stock availability (stock shortages has been a national issue)
- Unable to access services due to movement restrictions during periods of the pandemic
- Difficulties with communication between the pharmacy and the doctors regarding release of prescriptions

In response to finding the pharmacy was closed, the majority (39%) of people returned later with some people choosing to visit an alternative pharmacy (27%) and 10% calling NHS 111 service for further advice. No respondents indicated that they would contact the emergency services via 999. Of concern was that two people indicated that they "went without".



Most people (96%) indicated that they used their pharmacy to access prescriptions and over-the-counter (OTC) medicines and 67% indicated that they would seek health advice from the pharmacist. A number (41%) of people used their pharmacy for vaccine administration with a further 29% indicating that they would if this service was available. The more specific interventions that pharmacies can provide such as smoking advice, alcohol or weight management, sexual health services and substance misuse services were used less by the survey respondents. In addition, a number of people indicated that they may use services if they were available, on particular regarding health checks and out of hours or emergency supplies.



In terms of the recent pandemic, 75% of respondents felt that they had not changed the way they accessed pharmacy services, whereas 25% indicated that they had. Changes identified included:

17% respondents indicated: Prescriptions are now being sent electronically to my nominated pharmacy  
5% respondents indicated: Pharmacy delivers medicines to me  
2% respondents indicated: Phone pharmacy for advice instead of visiting in person  
1% respondents indicated: Phone pharmacy for advice more frequently  
No responses regarding virtual consultations with the pharmacist (for example, Zoom meetings)

16% of respondents felt that the changes to the ways of accessing pharmacy services were improvements, whereas 5% thought not (75% did not answer this question and 4% preferred not to say).

### **Further comments regarding pharmacy services in Medway**

Many of the respondents provided additional comments regarding their views on the Pharmacy services in Medway including the following statements:

*"Absolutely fabulous"*

*"All my prescriptions go directly from my GP to the pharmacy electronically a very effective way of doing things a time saver for all parties"*

*"All staff are friendly and go above and beyond to help with any questions and dealing with our prescriptions. They order them from the doctor for us".*

*"All the staff deserve medals for dealing with the public during this pandemic!"*

*"Although always extremely busy, the service is first class and the staff always helpful".*

*"Always a friendly and helpful service".*

*"As I have mobility problems, I find their delivery service invaluable".*

## Appendix 7 – Diversity Impact Assessment

<b>TITLE</b> Name / description of the issue being assessed	Medway Council's Pharmaceutical Needs Assessment (PNA) 2022
<b>DATE</b> Date the DIA is completed	29 <sup>th</sup> March 2022
<b>LEAD OFFICER</b> Name, title and dept of person responsible for carrying out the DIA.	Dr David Whiting, Deputy Director of Public Health, Public Health

### 1 Summary description of the proposed change

- What is the change to policy / service / new project that is being proposed?
- How does it compare with the current situation?
- The PNA is a statutory document including a comprehensive statement of need for pharmaceuticals services for the population of Medway. Needs are identified and mapped against current services. Where gaps are identified, recommendations are made to inform future commissioning decisions.

### 2. Summary of evidence used to support this assessment

- E.g.: Feedback from consultation, performance information, service user records etc.
- ego: Comparison of service user profile with Medway Community Profile
- The process of developing the draft PNA for Medway has included gathering feedback from members of the public and pharmaceutical service providers. The also include a statutory 60 day consultation period with key stakeholders.
- The PNA process includes a review and assessment of information from a wide variety of sources. These are listed as an appendix within the document. The information reviewed includes information on the population of Medway and demography, health needs and the wider determinants of health. Anticipated changes in need (for example resulting from population growth) have also been considered. Information on service provision was also included as part of the review.

### 3 What is the likely impact of the proposed change?

Is it likely to:

- Adversely impact on one or more of the protected characteristic groups?
- Advance equality of opportunity for one or more of the protected characteristic groups?
- Foster good relations between people who share a protected characteristic and those who don't?

(insert ✓ in one or more boxes)

Protected characteristic groups (Equality Act 2010)	Adverse impact	Advance equality	Foster good relations
Age		✓	
Disabilty		✓	

<b>Gender reassignment</b>			
<b>Marriage/civil partnership</b>			
<b>Pregnancy/maternity</b>		✓	
<b>Race</b>			
<b>Religion/belief</b>			
<b>Sex</b>		✓	
<b>Sexual orientation</b>			
<b>Other (e.g. low income groups)</b>		✓	

#### 4 Summary of the likely impacts

- Who will be affected?
- How will they be affected?

PNAs can help support efforts to reduce health inequalities and improve the health and wellbeing of the population by identifying potential gaps or unmet needs and making recommendations to inform future commissioning decisions. It is anticipated that the PNA will have a positive impact of all residents of Medway. Including those with protected characteristics, as defined by the Equality Act 2010. No negative impacts of the PNA were identified in the Diversity Impact Assessment. Several positive benefits were identified including:

- Meeting access needs for those people with disabilities;
- Consideration of the health needs of people of all ages;
- Consideration of the needs and access to services for those in deprived communities;
- The possibility of improving pharmacy services for the local population

Specific considerations in the PNA process included health needs and provision of pharmacy services for children and young people, adults of working age, older people, pregnancy and maternity services and sex. Consideration has been given to the health needs and access to services for those in deprived areas and access to services by people with a disability including a range of common adjustments.

#### 5 What actions can be taken to mitigate likely adverse impacts, improve equality of opportunity or foster good relations?

- What alternative ways can the Council provide the service?
- Are there alternative providers?
- Can demand for services be managed differently?

No adverse impacts identified by the diversity impact assessment.

## 6 Action plan

Actions to mitigate adverse impact, improve equality of opportunity or foster good relations and/or obtain new evidence

Action	Lead	Deadline or review date

## 7 Recommendation

The recommendation by the lead officer should be stated below. This may be:

- to proceed with the change, implementing the Action Plan if appropriate
- consider alternatives
- gather further evidence

If the recommendation is to proceed with the change and there are no actions that can be taken to mitigate likely adverse impact, it is important to state why.

The recommendation is to proceed to statutory consultation with the draft PNA

## 8 Authorisation

The authorising officer is consenting that:

- the recommendation can be implemented
  - sufficient evidence has been obtained and appropriate mitigation is planned
- the Action Plan will be incorporated into the relevant Service Plan and monitored

<b>Assistant Director</b>	
<b>Date</b>	

Contact your Performance and Intelligence hub for advice on completing this assessment

RCC: phone 2406 email: [annamarie.lawrence@medway.gov.uk](mailto:annamarie.lawrence@medway.gov.uk)  
C&A: phone 1173 email: [michael.hood@medway.gov.uk](mailto:michael.hood@medway.gov.uk)  
BSD: phone 2472 email: [lesley.jones@medway.gov.uk](mailto:lesley.jones@medway.gov.uk)  
PH: phone 2636 email: [david.whiting@medway.gov.uk](mailto:david.whiting@medway.gov.uk)

## **Appendix 8 – Consultation on the Draft Pharmaceutical Needs Assessment for Medway**

The formal consultation on the draft PNA for Medway ran from 20th April 2022 to 19th June 2022 in line with the guidance on developing PNAs and section 242 of the Health Service Act 2012, which stipulates the need to involve Health and Wellbeing Boards in scrutinising Health Services.

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

- Medway Local Pharmaceutical Committee
- Medway Local Medical Committee
- All persons on the pharmaceutical lists and all dispensing doctors list in Medway
- Medway Clinical Commissioning Group
- Medway Healthwatch
- Medway Voluntary Action (MVA)
- Medway NHS Foundation Trust
- NHS England & NHS Improvements
- Neighbouring HWBs in Kent and Bexley Health
- Primary Care Networks in Medway

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

Stake holders were asked to respond to the following specific consultation questions

1. Are you responding to this survey as an individual or an organisation?
2. Does the pharmaceutical needs assessment reflect the current provision of pharmaceutical services within your area?
3. Are there any gaps in service provision i.e. when, where and which services are available that have not been identified in the pharmaceutical needs assessment?
4. Does the draft pharmaceutical needs assessment reflect the needs of your area's population?
5. Has the pharmaceutical needs assessment provided enough information to inform future pharmaceutical services provision and plans for pharmacies and dispensing appliance contractors?
6. Do you agree with the conclusions of the Medway Pharmaceutical Needs Assessment?
7. Do you have any other comments?

### **Findings of consultation:**

The comments received during the consultation have been below, along with notes on how they have been dealt with in this final version of the PNA.

In total 11 responses to the consultation were received:

- 6 individuals (not recorded if pharmacy providers or residents of Medway)
- 2 organisations representing pharmacy providers
- 1 GP practice (Riverside Medical Practice)
- Medway On Call Care (MedOCC)
- NHSE&I

**Q2:** 73% of the respondents felt that the pharmaceutical needs assessment reflected the current provision of pharmaceutical services within the Medway area.

- 2 respondents raised concerns about limited opening hours in evenings and at weekends
- 1 respondent raised concerns about access to pharmacy services in the more rural areas, in particular the Cuxton and Halling.

These two themes were repeated in responses to other questions and are addressed in a shared response below

**Q3:** 45% of respondents thought there were and 55% respondents that there were no gaps in service provision that had not been identified in the PNA.

- One respondent (MedOCC) suggested that there should be a "24/7 community pharmacy - ideally Medway Pharmacy on Canterbury Street, Gillingham as they are near to our out of hours base at Medway Maritime Hospital".
- One respondent felt that geographically some areas are not covered and another that their nearest pharmacy is in Strood or Snodland neither a walking distance away

**Q4:** 64% of respondents felt that the draft PNA reflected the needs of Medway's population.

Of the 36% respondents that disagreed, MedOCC reiterated concern regarding opening hours: "Insufficient provision after 11pm - and truly shocking provision over the Easter bank holiday days (nothing after 5pm)".

Concern was raised by one respondent that the pharmacies are only in main towns and another respondent raised concerns about one pharmacy in particular resulting in them changing to a pharmacy that delivers and is more reliable.

**Q5:** 73% of respondents identified that the PNA provided enough information to inform future pharmaceutical services provision and plans for pharmacies and dispensing appliance contractors. Other respondents were unsure about whether the PNA



provided enough information for future pharmacy services but felt it was important to raise concerns on behalf of their local communities.

Feedback also included concern that "not a big enough public consultation carried out" however the consultation regarding this PNA review was undertaken in line with the national guidance for the process. Public engagement was encouraged, via Healthwatch to inform the document, as described in appendix 5 with 389 members of the community contributing to the survey. Members of the public as well as stakeholders were also invited to respond to the formal consultation process although only 6 responses were received from individuals residing in Medway.

**Q6:** 64% of respondents agreed with the conclusions of the Medway PNA with MedOCC reiterating the need for access to longer pharmacy opening hours and two other respondents felt that the PNA findings don't "help the rural community"

**Q7:** Further comments included repeated concerns for reflection of the rural community's needs.

"Soon some patients in Cuxton attached to the Cuxton doctors won't be able to get their medicines from the surgery. This was delayed because of Covid."

The PNA working group have since clarified that there are no plans to reduce services – see below (page 131) for further information.

The response from Boots Pharmacy identified that there had been changes to the opening hours to those summarised in the PNA which have been addressed as amendments in the final PNA.

Boots also identified a statement in the executive summary (point 9) that had not been referenced within the document which has been removed.

HWB response to consultation findings:

### **Out of hours and weekend access**

Section 6.8.3 describes the extended hours community pharmacy provision across the Medway localities. In addition, the PNA recognises that the Urgent Treatment Centre has access to medicine provision via Patient Group Directives (which will be an agreed limited number of medicines). This ensures access to essential medicines 24 hours a day, 7 days a week for Medway residents.

There are 6 pharmacies that provide 100 hour service across Medway and a number of pharmacies provide additional supplementary hours to the contracted 40 hour service. As described in Section 5.3: 100 hour pharmacies were established in response to a historical exemption which has since (in 2012) been replaced by a control of entry system which has now removed the exemption that previously enabled the 100 hour services.

Section 6.8.3 and the PNA recommendations note the importance of the supplementary hour provision by pharmacies within the area and the possible impact a change in delivery of these hours could have on access to pharmacy services in Medway.

The various maps through the PNA document depicts the location of the community pharmacies and dispensing doctors services in Medway with specific references to proximity to the GP practices and urgent care centres, opening hours and ease of access if walking or driving to the services.

The HWB will continue to be vigilant in monitoring the impact of changes of hours of community pharmacy providers.

### **Bank Holiday opening times**

The HWB has clarified the process for management of bank holiday opening times with NHSE&I which has been used to inform the PNA document (section 6.8.3)

NHSE have confirmed that community pharmacy cover for bank holidays is continuously reviewed by the team involving liaison with the providers up to 3 months in advance of the public holiday to identify those who choose to open on bank holidays or who are willing to open under an enhanced service. More recently, because of workforce and other pressures, fewer pharmacies are making the decision to open on bank holidays, and therefore an assessment of the gaps is undertaken to endeavour to ensure there is reasonable access to community pharmacy services (which would not be to match normal opening hours). The enhanced service arrangements are agreed under a Service Level Agreement (SLA) and negotiated with the LPCs with a consistent approach and process across the region to make reasonable provision on bank holidays. The current three-year SLA bank holiday agreements run out in April 2023.

### **Access to pharmacy services in rural locations within Medway**

Clarification has been sought regarding the response raising concerns about access to the dispensing doctors services in Cuxton and Halling (see above)

In terms of the more rural areas of Medway, the HWB recognises there is more limited access to pharmacy services, some of which are in part compensated for by dispensing doctors services such as those on the Hoo Peninsula and in Cuxton and Halling and also that, there may be access to pharmacies in neighbouring authorities. The HWB identified (section 6.8.4) that there are fewer people living in these areas but that the pharmacy services may not be within walking distance. Access to services via public transport is also considered in the review and reflects the areas of population density but also may be more limited in rural areas. However, the PNA considers the current pharmacy provision is currently adequate.

In 2018 Medway HWB responded to a request from Kent HWB following a rurality review regarding pharmacy provision in Wouldham Kent and the proposed opening of a pharmacy in Peter's Village, Snodland. Medway HWB challenged this proposal on the basis that the area remains rural in nature and therefore it is appropriate for the residents of Cuxton and Halling to utilise the dispensing doctor service provided by Riverside Medical Practice.

Clarification for the current PNA review from NHSE regarding the 2018 pharmacy application request for Wouldham (Peters Village in Kent) and impact of opening a pharmacy on a dispensing doctors practice has found that there were two individual

applications submitted for Peters Village, Wouldham, both of these were refused in 2019. There are currently no applications being processed for this area.

See section 5.7 regarding rurality and dispensing doctor practices.

Further to this PNA consultation response, it has been clarified that the majority of people living in the Cuxton and Halling area are registered with Riverside Medical Practice and that there is no current intention by the practice to cease the dispensing service.

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## Appendix 9 – Abbreviations used

AUR	Appliance Use Review
CCG	Clinical Commissioning Group
COPD	Chronic obstructive pulmonary disease
COVID-19	Coronavirus -19
CPCF	NHS Community Pharmacy Contractual Framework
CPCS	Community Pharmacy Consultation Service
CVD	Cardiovascular disease
DAC	Dispensing appliance contractors
DES	Directed Enhanced Services
DHSC	Department of Health and Social Care
EOC	Emergency Oral Contraceptive
ePACT2	Prescribing data
EPS	Electronic Prescription Service
GP	General Practitioners
Hep C	Hepatitis C
HCP	Health and Care Partnership
HIV	Human Immunodeficiency Virus
HWB	Health and Wellbeing Board
ICB	Integrated Care Board
ICS	Integrated Care System
IMD2019	Index of Multiple Deprivation 2019
JSNA	Joint Strategic Needs Assessment
LFD	Lateral Flow Device
LPC	Local Pharmaceutical Committee
LPS	Local Pharmaceutical Service
LSOA	Lower Super Output Area
LTC	Long-term condition
MDS	Monitored Dose Systems
MedOCC	Medway Oncall Care
MUR	Medicines Use Review
NECS	North of England Commissioning Support
NES	National Enhanced Services

NHS	National Health Service
NHSE&I	NHS England and NHS Improvement
NMS	New Medicines Service
NUMSAS	NHS Urgent Medicine Supply
ONPOS	Online Non-Prescription Ordering
PCN	Primary Care Network
PCT	Primary Care Trust
PGD	Patient Group Direction
PhAS	Pharmacy Access Scheme
PHiF	Pharmacy Integration Fund
PNA	Pharmaceutical Needs Assessment
POCT	Point of care testing
PQS	Pharmacy Quality Scheme
PSNC	Pharmaceutical Services Negotiating Committee
PWIDs	People who inject drugs
RAF	Reasonable adjustment flag
SAC	Stoma Appliance Customisation Service
SATOD	Smoking at time of delivery
SCR	Summary Care Record
STP	Sustainability and Transformation Partnership
UTC	Urgent Treatment Centre

## Appendix 10 - References and Data Sources

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