



SHROPSHIRE HEALTH AND WELLBEING BOARD						
Report						
Meeting Date	19 th June 2025					
Title of report	Draft Pharmaceutical Needs Assessment 2025					
This report is for (You will have been advised which applies)	Discussion and agreement of recommendation s	X	Approval of recommendation s (With discussion by exception)	Information only (No recommendation s)		
Reporting Officer & email	Mark Trenfield Mark.trenfield@shropshire.gov.uk					
Which Joint Health & Wellbeing Strategy	Children & Young People Mental Health Healthy Weight & Physical Activity		Joined up work	Joined up working		
priorities does this report address? Please tick all that apply			Working with a	Improving Population Health Working with and building strong and vibrant communities		
	Workforce		Reduce inequa	lities (see below)	Χ	
What inequalities does this report address?	Inequalities in the county regarding access to pharmacy provision, and variation in the services that they offer.					

Report Content:

1. Executive Summary

Introduction

The production and publication of a Pharmaceutical Needs Assessment (PNA) became a statutory requirement in the Health Act 2009. Following the abolition of Primary Care Trusts (PCT) in 2013 this statutory responsibility was passed to Health and Wellbeing Boards (HWB) by virtue of the National Health Service (NHS) Pharmaceutical and Local Pharmaceutical Services (Amended) Regulations 2013, which came into force on 1st April 2013. The requirement is to publish a PNA at least every 3 years; there have been four previous PNAs in 2011, 2015, 2018 and 2022 (deadline was extended due to the impact of COVID-19). This PNA is due to be published by 1st October 2025

The PNA should highlight the needs for pharmaceutical services in the area, current provision of services, identify gaps and unmet needs and in consultation with stakeholders make recommendations on future developments that are required. The PNA will be used by organisations including Integrated Care Boards (ICB) and the Local Authority (LA) to plan and commission future services.

The PNA is a key document used by local area teams to make decisions on new applications for pharmacies and change of services or relocations by current pharmacies and is also used by commissioners reviewing the health needs within their area and to identify if any services can be commissioned through community pharmacies.

Pharmacies play an important role in the health system, not just the dispensing of medicines, but now providing additional clinical services, and as they are one of the first points off contact, they can improve people's health and wellbeing and also reducing health inequalities. There are more pharmacies in Shropshire than there are GP practices, and they are more accessible, including for those who might otherwise not access health services.

Shropshire HWB considers community pharmacies to be a key public health resource and recognises that they offer potential opportunities to commission health improvement initiatives and work closely with partners to promote health and wellbeing.

Before publishing the PNA, there is a statutory requirement to hold a 60-day public consultation, and this period was from the * until the * 2025. The purpose of the consultation is to identify the views of the statutory consultees, other stakeholders and members of the public on whether the PNA addresses the necessary and important issues.

Local Context

This PNA Covers the Shropshire Local Authority area; it together with Telford and Wrekin Council both form the geography which that is coterminous with NHS Shropshire, Telford and Wrekin Integrated Care Board (ICB).

Key demographic messages for Shropshire

- Shropshire is a diverse, large, predominately rural inland county with a wide range of land use, economic activities, employment and social conditions
- Shropshire's population was increasing more slowly than England between 2000 and 2020 (using ONS population estimates), but increase more sharply between 2020 and 2022. Much of the Shropshire population growth has been due to migration.

- Shropshire has a relatively high concentration of people in the older age groups. In 2023, 54.2% (52.7% in 2020) of the County's residents were aged 45 or over, 26.2% were aged 65 and above, and 3.6% were aged 85 and above, when compared to England this was 44%, 18.7% and 2.5% respectively (ONS 2024 Estimates).
- Shropshire, like many parts of the country, has an ageing population, with the median population age now 48.5 compared to 40.5 in England.
- Lower-Level Super Output areas in Harlescott, Monkmoor and Ludlow East wards are the three LSOAs with the highest deprivation levels within Shropshire. All three fall within the top 10% of most deprived LSOA areas within England. Looking at whole wards, the three most deprived wards within Shropshire are Monkmoor, Harlescott and Castlefields & Ditherington, (ONS 2019)
- 42.6% of Shropshire's population is classified as being 'Urban' and 57.4% as 'rural and has an overall population density of just over 101 persons per square kilometre, compared to 433 in England. Population density is particularly sparse in the South West of the county (39 persons per square kilometre).

Access to pharmaceutical services

- There are currently 43 community pharmacies and 17 dispensing GP practices in Shropshire, located throughout the county in towns, market towns and larger villages. Most community pharmacies are close to GP practices providing choice and convenience for patients.
- Approximately 91% of residents are within a 10-minute car journey of a community pharmacy or dispensing GP practice, although this drops to 87% for just a community pharmacy. However, there are greater challenges for those without access to cars, with only 48% of the population within 10 minutes of one using public transport on a weekday morning.
- As much of Shropshire is very rural, many localities are supported by GP practices that
 dispense to their patients. Dispensary opening hours usually reflect the opening times
 of the practice. Dispensing doctors offer services to help fulfil the pharmaceutical needs
 of the patients in these areas. However, while they will dispense medications to their
 patients, they do not offer the full services that community pharmacies do, unless the
 patients make an appointment.
- Most pharmacies opening times generally mirror those of the GP practices, however while most pharmacies open for at least some of the day on a Saturday, there are only 2 pharmacies that open after 6pm on a Saturday and there are only 6 pharmacies open at all on a Sunday in Shropshire, and only 4 pharmacies that open past 6pm on a weekday. There are no 24-hour pharmacies in Shropshire.
- There appears to be reasonable access to some services commissioned by Public Health in Shropshire, such as emergency hormonal contraception, however, some of these services do not operate at all pharmacies, and for some pharmacies that offer those services, activity is very low.

Current pharmaceutical provision

- The distribution of pharmacies per head-of-population, with or without dispensing GP practices, is of a lower ratio than the national average.
- The number of pharmacies has dropped since the previous PNA and therefore the ratio has increased, and the ratio likely to further increase with the most recent population projections predicting a growth of 7.89% by 2032.
- There is only one 100-hour pharmacy in Shropshire, as opposed to three in the previous PNA, this pharmacy is in Oswestry.
- Some advanced and locally commissioned pharmacy services are only provided by a small number of pharmacies, if at all. No pharmacy in Shropshire has signed up to the

dispensing appliance service, although they would probably dispense some appliances if available, but there is appliance service contractor in Telford and Wrekin.

Gaps in pharmaceutical provision

- Weekend and night access There is limited provision on Sundays, particularly in the South of the county. There is also limited provision after 6pm on weekdays and Saturdays.
- <u>Visibility of services</u> The resident survey highlighted that there were several services
 that community pharmacies provide, but the respondents didn't necessarily know that
 the pharmacy provided them. Likewise, there are some services that the pharmacies
 offer but activity was very low. Perhaps these services need to be more visible.
- <u>Increase in pharmacies signing up for services</u> The contractor survey highlighted a willingness for those contractors to provide more services if they were commissioned, if they were not always providing them or were intending to provide them.
- Further investigation and consideration may become necessary to evaluate if there is enough pharmacy provision given the projected growth of the population in future as growth between 2022 and 2032 is expected to be 7.89% 26,268 people.

2. Report Recommendations

That the committee notes the contents of the presentation and report and has the opportunity to shape the recommendations before it can go out for the statutory 60-day public consultation.

3. Main Report

Please see:

Appendix A. Pharmaceutical Needs Assessment 2025 – presentation Appendix B. Pharmaceutical Needs Assessment (PNA) 2025 – draft report

Risk assessment and opportunities appraisal		
Financial implications		
Climate Change		
Appraisal as applicable		
Where else has the	System Partnership	ShIPP
paper been presented?	Boards	
	Voluntary Sector	
	Other	
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List of Background Papers - NA

Cabinet Member (Portfolio Holder) or your organisational lead e.g., Exec lead or Non-Exec/Clinical Lead

Rachel Robinson, Executive Director – Public Health (DPH) Cllr Bernie Bentick, Portfolio Holder for Health & Public Protection

Appendices

Appendix A. Draft Pharmaceutical Needs Assessment 2025 – presentation Appendix B. Draft Pharmaceutical Needs Assessment (PNA) 2025 – draft report