



Pharmaceutical Needs Assessment (PNA) 2022-23

SHROPSHIRE



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 three previous PNAs in 2011, 2015 and 2018. The publication of this PNA was extended to October 2022 due to the impact of COVID-19.

Each HWB is required to publish its own revised PNA for its area. In Shropshire, the HWB must describe the current pharmaceutical services in the county, systematically identify any gaps, unmet needs, and in consultation with stakeholders make recommendations on future development.

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

Pharmacy has much more to offer than the safe and effective dispensing of medicines. It is increasingly expanding its provision of additional clinical services, becoming a persuasive force in improving the health and wellbeing of individuals and communities, and reducing health inequalities. They are easily accessible and are often first point of contact, 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.

The consultation of the key findings and proposed recommendations is taking place from 2nd August 2022 to 30th September 2022. The consultation is seeking the views of the statutory consultees, other stakeholders and members of the public on whether it addressed the issues that they consider relevant and important

Local Context

This PNA Covers the area of Shropshire Local Authority; together with Telford and Wrekin Council both form the geography which is Coterminal with NHS Shropshire, Telford and Wrekin Integrated Care System (ICS).

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 has been increasing at a slightly slower rate (8.3%) than England (9.1%) between 2000 and 2020 (using ONS population estimates). Much the Shropshire population growth has been due to migration.
- Shropshire has a relatively high concentration of people in the older age groups. In 2020, about 52.7% of the County's residents were aged 45 or over, compared to only 42.9% nationally (ONS 2020 Estimates).
- Shropshire, like many parts of the country, has an ageing population. Between 2000 and 2020 Shropshire median population age rose from 41.2 to 48.2. Whilst England's median age rose from 37.8 to 40.2 years old (ONS 2020 Estimates).
- LSOAs in Harlescott, Mookmoor 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)
- The number of people aged 0-18 is projected to decrease. In 2020 this age group accounts for 19.6% of Shropshire's population compared to 22.5% for England.

Access to pharmaceutical services

- There are currently 47 community pharmacies in Shropshire. located throughout the county in towns, market towns and larger villages.
- The pharmacies are usually close to GP practices providing choice and convenience for patients.
- Most pharmacies opening times generally mirror those of the GP practices, however most pharmacies also open for at least some of the day on a Saturday. There are 6 pharmacies open on a Sunday in Shropshire.
- Due to the rural nature of much of Shropshire, 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.
- There appears to be reasonable access to most services commissioned by Public Health in Shropshire, such as emergency hormonal contraception. However, this appears to be lower than some peer and neighbouring systems.

Current pharmaceutical provision

- The distribution of pharmacies per head-of-population shows the overall rate to be lower than the national average.
- There are three 100-hour pharmacies two of which are located in Shrewsbury and one in Oswestry.
- Some advanced services AUR and SAC are only provided by a small number of pharmacies.

Gaps in pharmaceutical provision

- Visibility of services - The patient survey highlighted communications about the specific services that community pharmacies provide, and which pharmacies have signed up to provide them. These services need to be more visible.
- Weekend access - There is limited provision on Sundays in the South of the county.
- Further investigation and consideration may become necessary to evaluate if there is enough pharmacy provision subsequent to growth in housing stock and projected population growth in the county.

Recommendations

1. Overall, there are sufficient numbers and a good choice of pharmacy contractors to meet Shropshire's pharmaceutical needs.
2. Review the opening times of pharmacies on Sundays specifically in South Shropshire.
3. Consider future joint training sessions bringing together representatives from community pharmacy and other organisations' pharmacists to promote integrated working.
4. Explore options for improving communications around provision of services delivered in community pharmacy.
5. The HWB will monitor the development of major housing sites and produce supplementary statements to the PNA if deemed necessary, to ensure that appropriate information on pharmacy needs is available.

More detailed discussion of these recommendations can be found in the main body of this assessment [here](#).

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Introduction and Background

The Pharmaceutical Needs Assessment (PNA) is a statutory requirement of Local Authority Health and Wellbeing Boards with the latest update due by 1st October 2022. The PNA should highlight the needs for pharmaceutical services in the area, current provision of services and any future services that are required. The PNA will be used by organisations including Integrated Care Systems (ICS), NHS England and the Local Authority (LA) to plan and commission future services. It will also be used by NHS England to identify whether new pharmacies are needed when applications are made.

The PNA is not new. There have been three previous PNAs in 2011, 2015 and 2018. There is a statutory requirement to hold a 60-day consultation period before publishing the PNA, in Shropshire this period was from the 2nd of August until the 30th of September 2022.

The purpose of a Pharmaceutical Needs Assessment (PNA) is to:

- Assess the pharmaceutical needs for its area
- Publish a statement of its assessment

In order for new pharmacies to open they must apply through a formal application process to NHS England (Appendix 1). NHS England will then review the PNA to determine whether there is a need in the particular area for a new pharmacy. It will enable them to assess the services pharmacists currently provide, identify any gaps in services and if there are any changes required to services based on health needs.

National Context

Integrated Care System

In 2019 the NHS Long Term Plan confirmed that every area will be served by an Integrated Care System ICS by 2021, later extended to July 2022 due to COVID-19.

Sustainability and Transformation Plans (STP)

The Shropshire, Telford and Wrekin NHS Sustainability and Transformation Programme is the local five-year plan put in place to transform health and care services for local people, so they are fit for the future.

The ICS acknowledges that the demand on health and care services continues to rise and outstrips the available funding, which puts pressure on all services, especially hospitals, GP surgeries and social care. Demographic change contributes to the picture, as the number of older people in our population grows and many people have more than one long-term health condition, leading to a greater need for certain services. The challenging financial climate means changes are essential to ensure health and care services become sustainable in the long term at the same time as well as meeting the public's health and care needs more effectively.

Community pharmacy has the potential to contribute to the delivery of all the aims in the local area, which are as follows:

- To build resilience and social capital
- Integrated care across the NHS and Social Care
- More appropriate use of hospital care
- Working as one health system
- Sustainable workforce
- Sustainable finances

Community Pharmacy Clinical Services Review

This independent report was commissioned by the Chief Pharmaceutical Officer and published by the Kings Fund in December 2016. The report highlights areas where pharmacies and pharmacists can work with other parts of the health and care system in order to be part of a fully integrated system. The report makes several recommendations that if implemented would see an expansion in the role of community pharmacies.

The Health and Wellbeing Board and PNA

NHS Pharmaceutical services are defined and governed by the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. The Shropshire Health and Wellbeing Board have a statutory responsibility to publish and keep an up-to-date statement of pharmaceutical need for the local area, which is known as the Pharmaceutical Needs Assessment (PNA). The PNA will enable services to be commissioned to address local priorities and meet locally identified needs.

NHS England will be the organisation responsible for deciding whether new pharmacies can open and they will refer to the PNA when making these decisions. As these decisions may be challenged legally it is important that the PNA complies with regulations and are kept up to date. In order to meet these obligations, the Shropshire PNA will be up-dated every three years. The PNA will also be updated with supplementary statements indicating significant changes in health needs and provision before the three years.

The PNA will determine what is required at a local level which will help commissioners, NHS England, the Local Authority and ICSs, with their commissioning plans. It will provide a focus on the public health role of community pharmacies, the dispensing services and the wider services they can offer to the community

Local Priorities

Joint Strategic Needs Assessment and Health and Wellbeing Strategy

Joint Strategic Needs Assessments (JSNAs) establishes the current and future health and wellbeing needs of a population and have been a statutory responsibility since 2007. They are developed in order to provide a single picture of health needs in the local area that identifies local priorities and can support and improve partnerships and strategic planning. The priorities in the Shropshire Health and Wellbeing Strategy are based upon the information from the JSNA. The preparation of a PNA should consider the work of the JSNA.

The scope of the assessment

The PNA will include the following information:

- Current services provided by local pharmacies, including dispensing, public health services and medicines reviews.
- Information about other pharmaceutical services, such as dispensing GP's
- Services in neighbouring Health & Wellbeing Boards areas that may have an impact on needs in Shropshire
- Identifying gaps in provision in Shropshire where additional services may be required

Information from the PNA will address the following principles:

- Pharmaceutical care that supports safe and effective use of medicines
- Pharmaceutical care that provides quality healthcare and public health information and advice to all members of the population
- High quality pharmacy premises that improve access and capacity to primary care services and medicines
- High quality pharmacy premises and standards of services that support key public health priorities
- Locally commissioned enhanced pharmaceutical services that have the potential to reduce avoidable hospital admissions and reduce bed-days
- High quality pharmaceutical support to prescribers for clinical and cost-effective use of resources

Process followed for updating the PNA

In order to up-date the previous PNA partners were involved to gather information and engage with the community and stakeholders, this included representatives from:

- The Local Pharmaceutical Committee (LPC)
- NHS England
- NHS Shropshire, Telford and Wrekin, Integrated Care System
- Public Health
- Healthwatch

The aim of working with partners was to ensure that the PNA fulfilled all of the requirements outlined in the scope of the assessment above.

PNA Steering Group

A PNA Steering group was established that included members from the above organisations. The steering group was involved in the production of the PNA and worked together to design the questionnaires, ensure that relevant activity data was available, identify local needs and support the consultation. The terms of reference for the PNA steering group are available in Appendix 2.

Overview of actions

Supporting information was collated using various data sources, for example, ONS and Public Health Statistics.

All community pharmacies were contacted and asked to complete a questionnaire to capture and update information (Appendix 3).

A patient survey was also undertaken supported by Health Watch Shropshire to gather patient's views and experience of using local pharmacies (Appendix 4).

Services provided across the border by other Local Authorities

Shropshire Council has nine other neighbouring Local Authorities (LA) and two Welsh Health Boards and some of their pharmacies are close to the Shropshire border. As patients can have their prescriptions dispensed at a pharmacy of their choice, it is often more convenient for them to receive pharmaceutical services (including dispensing) from pharmacies in other LA / Health Board areas. This public consultation document includes the locations and therefore possible impact of services that other LAs' pharmacies, near to our border, provide.

Consultation on pharmaceutical needs assessments

Regulation 8 of the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 state that when making an assessment for the purposes of publishing a pharmaceutical needs assessment, each HWB must consult the following about the contents of the assessment it is making.

- a) Any Local Pharmaceutical Committee for its area (including any Local Pharmaceutical Committee for part of its area or for its area and that of all or part of the area of one or more other HWBs)
- b) Any Local Medical Committee for its area (including any Local Medical Committee for part of its area or for its area and that of all or part of the area of one or more other HWBs)
- c) Any persons on the pharmaceutical lists and any dispensing doctors list for its area
- d) Any LPS chemist in its area with whom the NHSCB has planned for the provision of any local pharmaceutical services
- e) Any Local Healthwatch organisation for its area, and any other patient, consumer or community group in its area which in the opinion of HWB1 has an interest in the provision of pharmaceutical services in its area
- f) Any NHS trust or NHS foundation trust in its area
- g) The NHSCB
- h) Any neighbouring HWB

A formal consultation on the draft PNA was held between the 2nd of August and the 30th of September 2022, where stakeholders and the public were asked to comment on the assessment and the assumptions that it is making.

Statutory Consultation Response

In total 40 responses were received from stakeholders; 39 through the consultation portal where the draft assessment was hosted, and a substantive separate response from the Local Pharmaceutical Committee.

- 32 of the 39 responses (82%) were from members of the public. There were additionally responses from neighbouring colleagues in public health, multiple pharmacy contractors and local town or parish groups.
- Of those who responded to the question, the largest age group were 60-84 year olds (71% of responses). 45-59 were the next highest group (16%) and 85+ (6%).
- Most people agreed that the assessment is a good reflection of current pharmaceutical provision in Shropshire (65%) and a good reflection of the needs of the population (50%).
- 2 responses strongly disagreed that the assessment reflected current provision and need. These were identical responses for all questions except the demographic question of sex, and emphasised concern about provision in Ludlow on a Sunday.
- Services in Ludlow are also mentioned more widely in the responses and disproportionately appear in those responses that disagree the assessment reflects local needs. These specific concerns will be brought up with the Local Pharmaceutical committee and are now specifically mentioned and reflected in the recommendations of this report.
- 39% thought there were other services that could be provided by pharmacies in future to the local people in Shropshire.
- Specific provisions mentioned included some already provided ("simple cases of diagnoses", flu and Covid vaccinations etc) highlighting the recommendation around communication and signposting and the wider work underway in the ICS. Other identified health promotion rather than just disease management, and more efficient ways of managing medicine and sharps disposal without supervision.
- Of those who responded to the question, only 38% read the entire needs assessment. Additionally, one respondent commented upon the "many pages of dense text" and emphasised the need for summary of main points, with another stating they felt the assessment was too long to read.

Specific Responses

- Multiple stakeholders noted extension rather than expansion as a response to limited Sunday provision, which has been reflected as a core recommendation in this assessment.
- Multiple responses in open-ended questions mentioned staffing and communications/signposting, challenges acknowledged within the system itself and addressed in the recommendations here.
- Access via transport to health care appointments was commented, particularly with regard to public transport and car travel. We have further addressed this in detail in the section on [Access to pharmaceutical services](#).
- Some concerns were expressed about the wider healthcare system in relation to; excluded sex and sexuality cohorts; specific domains of clinical care (HIV/AIDS treatment); the Shrewsbury Hub proposals. Whilst beyond the scope of this assessment, concerned as it is with pharmacy service, it will be noted with clinical system representatives.
- The relationship between the Rural/Urban Classifications we use in our analyses here, and future NHSEI analyses of rurality, is a subject for future discussion at the system level and will be addressed in due course.
- This document reflects the position in terms of pharmacy opening time according to NHSE data on 31st March 2022.

Health Needs Analysis

Introduction

Overall, the health and wellbeing of people in Shropshire is predominately good and life expectancy is higher than the national average. Life expectancy at birth for males in Shropshire it is 80.2 years, versus 79.4 years for England as a whole. For females, 83.7 years for Shropshire versus 83.1 years for England as a whole (OHID 2018-20 data). However, as more of us live longer, we want to ensure that we can maintain good health, and quality of life, for longer – adding life to years as well as years to life.

Most people in Shropshire can expect to live a long life, have a good education, earn a decent wage and live in good accommodation. There are exceptions though, and health inequalities do exist meaning that some of us do not have the same life chances. This may be done due to where we live or other factors such as having a physical or learning disability. Other factors that can affect our health and wellbeing are the lifestyle choices we make such as smoking, drinking alcohol and not being physically active.

The Shropshire Health and Well-being Strategy (HWBS) identifies key challenges that affect the health and wellbeing of the whole population. It uses evidence presented in the Joint Strategic Needs Assessment (JSNA) to determine five priority areas that need to be addressed in order to improve the health of the population.

Shropshire Health and Wellbeing Board has developed a long-term vision for the local population to be healthy and fulfilled. The following priorities for the strategy have been identified:

- Joined up working
- Improving population health
- Working with and building strong and vibrant communities
- Reducing inequalities

Key focus: These are specific areas of health and being need in Shropshire which have been identified through careful analysis of data – the Joint Strategic Needs Assessment (JSNA)

Analysis of the data within the Shropshire Joint Strategic Needs Assessment have identified key areas of focus regarding health and care in the area. These key areas of focus for Shropshire, as outlined in the Shropshire Joint Health and Wellbeing Strategy, are summarised in the framework

The Shropshire JSNA highlights key health and social care issues that can have an impact upon the population of Shropshire.

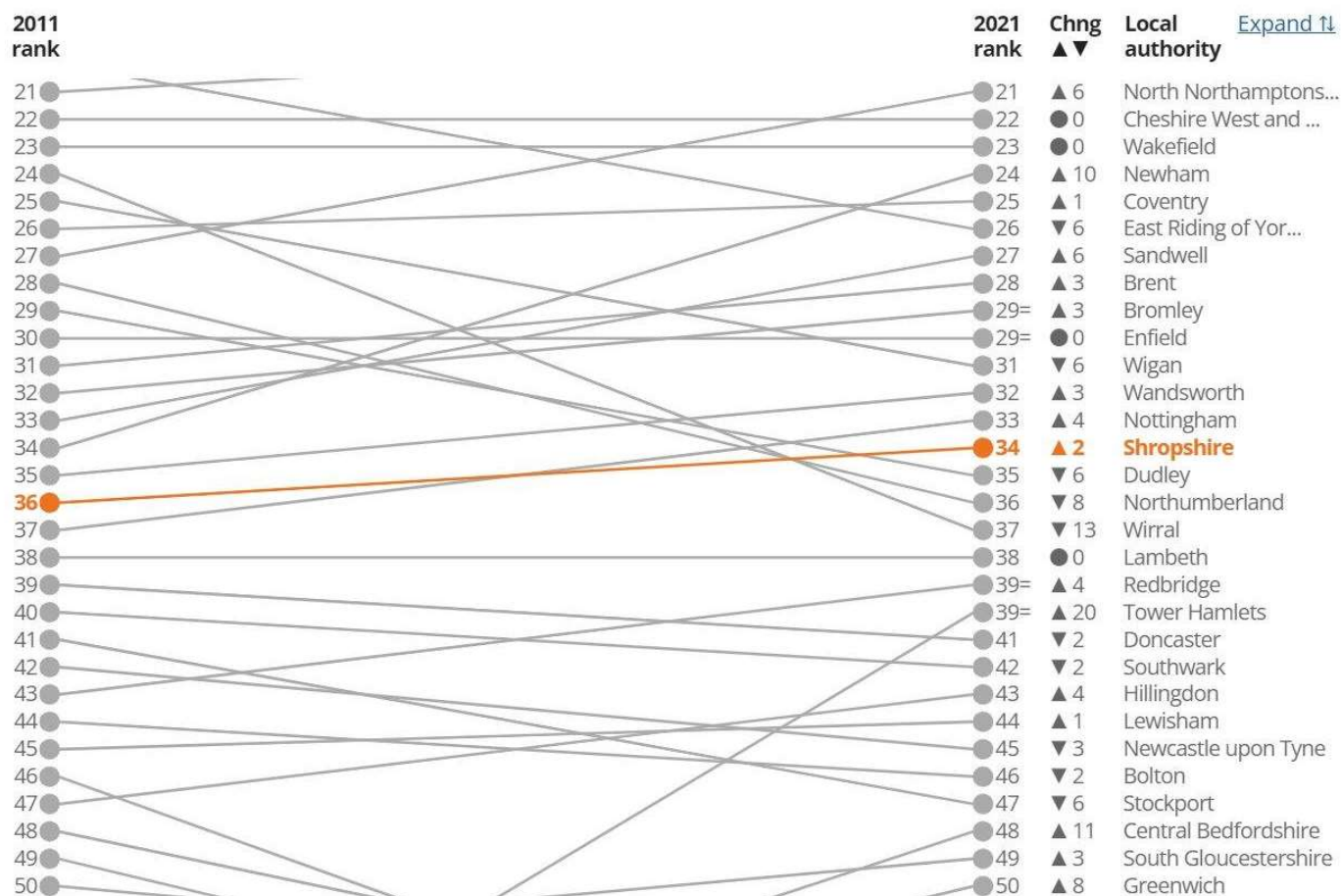
Key area of focus	Evidence of need in Shropshire	What will enable this?
<p>Workforce</p> <p>During COVID many people lost their job or had to take lower paid and less stable employment. We will work to make Shropshire workplaces fair, happy and healthy places for people to work in and promote wellbeing for all, no matter where they are employed.</p> <p>This includes promotion of a fair living wage, and opportunities to progress.</p>	<p>COVID-19 has had a measured impact on mental health and general wellbeing. Rates of in-work poverty have increased and Shropshire is a low wage economy.</p> <p>Shropshire often loses young people due to lack of opportunity to progress, or lack of employment sector/industry which they wish to enter.</p>	<p>Across all sectors (Health, Local Authority, Business, VCS) senior leadership commitment, embedment in policies and training plans to enable:</p> <ul style="list-style-type: none"> - Promotion of a fair living wage to reduce in-work poverty and promote better health - Adoption of 'Thrive at Work' West Midlands across all sectors. A workplace commitment that promotes employee health and wellbeing. Needs of Small & Medium Enterprises (SME)s will be considered. - Make Every Contact Count (MECC) training to build an informed workforce on preventative health choices.
<p>Mental Health</p> <p>The 5-year Mental Health Strategy for Shropshire and Telford & Wrekin will guide our ambitions over the next five years. This strategy has a 'life course' approach from pregnancy to childhood to older age. We also want to reduce stigma, normalise mental wellbeing and consider the needs of those providing unpaid care for someone with mental illness.</p>	<p>The Healthwatch Shropshire May 2020 survey of 568 people, 64% reported a slight or significant impact on mental health. There are an estimated 4,000 children with a mental health disorder in Shropshire. Mental Health Services have noticed a around a 30% increase in children's mental health services activity. Data is showing excess under 75's mortality rate adults with severe mental illness. All this is a concern for Shropshire.</p>	<p>The 5-year Mental Health Strategy for Shropshire and Telford & Wrekin will guide our ambitions over the next five years. This includes the Community Mental Health Transformation programme which will help improve access, deliver better outcomes and experiences for people through a more integrated and a holistic care model. A key element is increasing physical health checks for people with Serious Mental Illness.</p>
<p>Children and Young People (CYP)</p> <p>COVID has had a huge impact on many families, and particular focus will be CYP mental health and wellbeing. This includes children with SEND, the transition stage from child to adult, and support for parents. In addition, plans to create a Trauma Informed workforce will be implemented. Trauma has a life course effect, and although under the CYP header, all age is included. We will also continue to monitor child development at 2.5 years.</p>	<p>HOW DOES IT IMPACT THE LIVES OF YOUNG PEOPLE?</p> <p>Nationally and locally, there is growing concern regarding eating disorders in young people along with self-reported suicidal thoughts and self-harm.</p>	<p>As a system, create a trauma informed workforce through training and implementation. This will help professionals, volunteers and communities better identify and support people who have suffered from trauma and build a trauma informed workforce. We will continue to receive and scrutinise reports to the Board for the 0-25 Emotional Health and Wellbeing service provision for CYP. Mental Health work will be led by the 5-year strategy above. Social Prescribing will remain a HWBB priority, and a pilot for CYP in south-west Shropshire is rolling out.</p>
<p>Healthy weight and physical activity</p> <p>Our ambition is to reduce levels of obesity in Shropshire across all ages. This priority will be linked to drugs and alcohol, smoking and mental health, through preventative work around Musculoskeletal (MSK) conditions, respiratory health, Cardio-Vascular Disease (CVD), and cancer risk; food insecurity and reasons around obesity will all be included.</p>	<p>64.6% of adults in Shropshire are classed as overweight or obese. Health risks associated with excess weight include: type 2 diabetes; coronary heart disease; some types of cancer, such as breast cancer and bowel cancer, stroke and self-esteem.</p>	<p>This work, including actions, will be driven by the Shropshire Healthy Weight Strategy, currently in development. This will also include the effect of food insecurity and build on work being undertaken currently into the causes and links to the CYP priority above. Promotion of e.g. NHS on line 12-week weight loss plan, Couch to 5k running plan and referral to and uptake of NHS Health Check, National Diabetes Prevention Programme and Social Prescribing development will continue. Exercise costs will also be considered.</p>

Demography

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 has been increasing at a slightly slower rate (8.3%) than England (9.1%) between 2000 and 2020 (using ONS population estimates). Much of the Shropshire population growth has been due to migration.

Figure 1: Population rank of Shropshire at the time of the 2011 and 2021 Censuses



- Shropshire has a relatively high concentration of people in the older age groups. In 2020, about 52.7% of the County's residents were aged 45 or over, compared to only 42.9% nationally (ONS 2020 Estimates).
- Shropshire, like many parts of the country, has an ageing population. Between 2000 and 2020 Shropshire median population age rose from 41.2 to 48.2. Whilst England's median age rose from 37.8 to 40.2 years old (ONS 2020 Estimates).
- There are significantly lower proportions of older people living in poverty in Shropshire. In 2019 3% of Shropshire's population aged over 60 lived in areas within the most deprived 20% of areas within England.
- The number of people aged 0-18 is projected to decrease. In 2020 this age group accounts for 19.6% of Shropshire's population compared to 22.5% for England.
- 2% of the Shropshire population identified themselves as being from black, mixed or other non-white minority ethnic groups, significantly lower than the national figure of 14.6% and the West Midlands regional figure of 17.3%, (2011 census)

Figure 2: Population change (%) by age group in Shropshire, 2011 to 2021

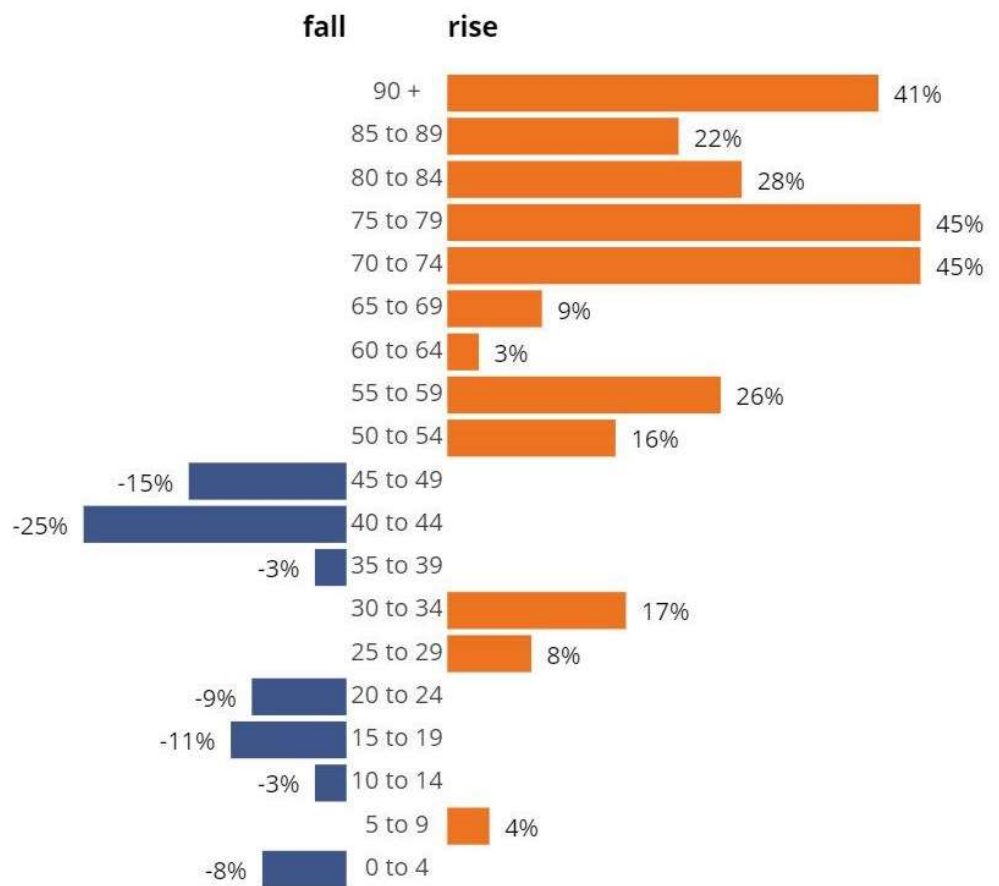


Figure 3 Population growth in Shropshire (2022 – 2032)

AGE GROUP	Population Projection		Change 2022 - 2027	% Change 2022-2027
	2022	2032		
0-4	14,592	14,755	163	1.12%
5-9	16,767	16,123	-643	-3.84%
10-14	18,675	17,767	-908	-4.86%
15-19	17,266	18,781	1,515	8.77%
20-24	13,439	14,896	1,457	10.84%
25-29	16,227	15,023	-1,204	-7.42%
30-34	18,247	15,978	-2,270	-12.44%
35-39	18,518	19,110	592	3.20%
40-44	18,412	21,626	3,214	17.46%
45-49	19,148	21,806	2,659	13.88%
50-54	24,642	21,834	-2,807	-11.39%
55-59	26,859	22,791	-4,067	-15.14%
60-64	24,806	28,651	3,846	15.50%
65-69	22,007	30,005	7,998	36.34%
70-74	21,482	25,693	4,211	19.60%
75-79	18,742	20,277	1,534	8.19%
80-84	11,780	16,954	5,174	43.92%
85-89	7,131	11,446	4,315	60.52%
90+	4,148	5,638	1,490	35.92%
All ages	332,884	359,152	26,268	7.89%

Source: 2018 ONS Population Projections for Las

Ethnicity

Table 2 Ethnic Populations, 2011 census

	Shropshire Unitary Authority		West Midlands Region		England	
	No.	%	No.	%	No.	%
All categories	306,129	-	5,601,847	-	53,012,456	-
White: English/Welsh/Scottish/ Northern Irish/British	292,047	95.4	4,434,333	79.2	42,279,236	79.8
White: Irish	1,410	0.5	55,216	1.0	517,001	1.0
White: Gypsy or Irish Traveller	312	0.1	4,734	0.1	54,895	0.1
White: Other White	6,105	2.0	139,386	2.5	2,430,010	4.6
Mixed/multiple ethnic group: White and Black Caribbean	765	0.2	68,533	1.2	415,616	0.8
Mixed/multiple ethnic group: White and Black African	231	0.1	9,232	0.2	161,550	0.3
Mixed/multiple ethnic group: White and Asian	669	0.2	32,561	0.6	332,708	0.6
Mixed/multiple ethnic group: Other Mixed	503	0.2	21,388	0.4	283,005	0.5
Asian/Asian British: Indian	752	0.2	218,439	3.9	1,395,702	2.6
Asian/Asian British: Pakistani	216	0.1	227,248	4.1	1,112,282	2.1
Asian/Asian British: Bangladeshi	208	0.1	52,477	0.9	436,514	0.8
Asian/Asian British: Chinese	1,020	0.3	31,274	0.6	379,503	0.7
Asian/Asian British: Other Asian	893	0.3	74,997	1.3	819,402	1.5
Black/African/Caribbean/ Black British: African	302	0.1	64,253	1.1	977,741	1.8
Black/African/Caribbean/ Black British: Caribbean	164	0.1	86,794	1.5	591,016	1.1
Black/African/Caribbean/ Black British: Other Black	114	0.0	31,078	0.6	277,857	0.5
Other ethnic group: Arab	179	0.1	18,079	0.3	220,985	0.4
Other ethnic group: Other	239	0.1	31,825	0.6	327,433	0.6

The number of people from a black and minority ethnic group in Shropshire County has increased from 3,431 (1.2%) in 2001 to 6,255 (2.0%) in 2011 but remains significantly lower than the national average of 14.6%.

Source: Key statistics for Local Authorities, 2011 Census, Office for National Statistics, © Crown copyright 2014

Generally, the age profile of people belonging to the minority ethnic groups is younger than the white population and, unlike national trends; the local ethnic population is not concentrated within deprived areas but distributed evenly throughout the County.

Deprivation

Key Socio-Economic Messages for Shropshire County

- Overall Shropshire County is a relatively affluent area. In England there are 32,485 'super output areas' (LSOA) of these only 9 LSOAs in Shropshire fall within the most deprived fifth of SOAs in England, (ONS).
- Shropshire is a diverse, large, predominantly rural, inland County, situated in the West Midlands. Overall Shropshire is a rural county with around 66% of the population living in areas classified as rural. Around 34% of the population resides in areas classed as being urban. Much of the South-West of Shropshire is classified as being sparsely populated.
- Shrewsbury is home to around a third of the population and is a key employment, shopping and cultural centre for Shropshire, as well as being a popular destination for tourists and visitors. The county's economy is based mainly on agriculture, tourism, food industries, healthcare and other public services. The profile of Shropshire County, its history, geography and population distribution makes delivering services effectively and efficiently more difficult.
- Shropshire covers 1,235 square miles and there are no areas in Shropshire that are considered major or minor conurbations.

The Index of Multiple Deprivation

The Index of Multiple Deprivation (IMD) 2019 is an index calculated from 39 indicators measuring deprivation in its broadest sense. The overall IMD 2019 score combines scores from seven areas (called domains), which are weighted as follows:

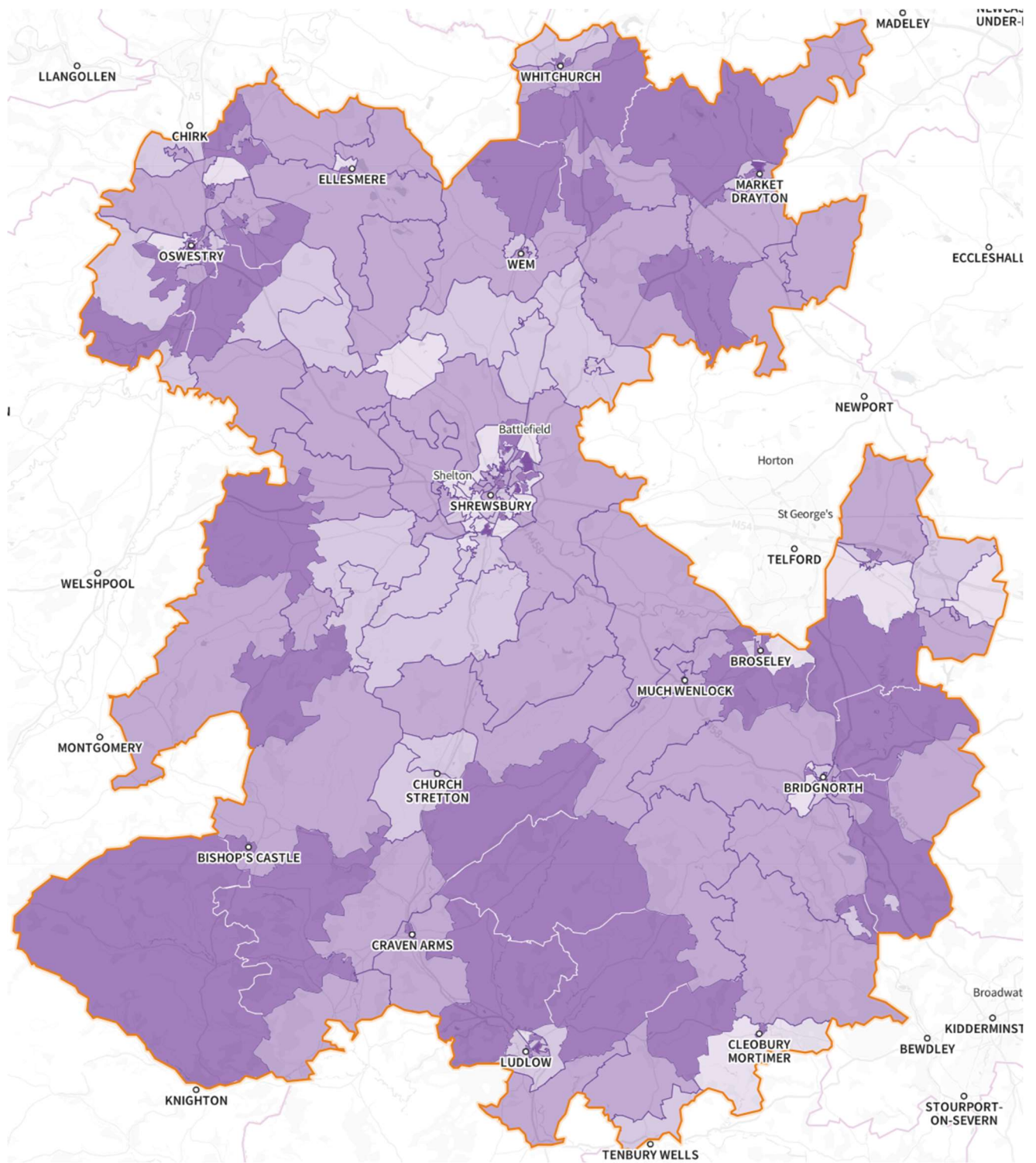
- Income (22.5%)
- Employment (22.5%)
- Health and disability (13.5%)
- Education, skills and training (13.5%)
- Barriers to housing and services (9.3%)
- Crime (9.3%)
- Living environment (9.3%)

Overall, in 2019, Shropshire LA was a relatively affluent area and was ranked as the 192nd most deprived County out of all 316 Local Authorities in England. The IMD is based on sub-electoral ward areas called Lower-level Super Output Areas (LSOAs), which were devised in the 2011 Census. Each LSOA is allocated an IMD score, which is weighted based on its population. There were 32,845 LSOAs in England; of these only 9 in Shropshire County fell within the most deprived fifth of all LSOAs in England. These LSOAs were located within the electoral wards of Market Drayton West, Oswestry South, Oswestry West, in North Shropshire; Castlefields and Ditherington, Harlescott, Meole, Monkmoor and Sundorne in Shrewsbury and Ludlow East in South Shropshire.

To get a more meaningful local picture, each LSOA in Shropshire LA was ranked from 1 (most deprived in Shropshire) to 194 (least deprived in Shropshire). Shropshire LSOAs were then divided into local deprivation quintiles which are used for profiling and monitoring of health and social inequalities in Shropshire County (1 representing the most deprived fifth of local areas and 5 the least).

Figure 1 shows the most deprived areas in Shropshire – the deeper the purple, the greater the deprivation. Deprivation tends to be situated around the major urban settlements in Shropshire (for example, include Shrewsbury, Oswestry, Market Drayton, Ellesmere, Ludlow, Wem) but there are significant areas of deprivation in the County's less densely populated rural areas.

Figure 4 : Index of Multiple Deprivation in Shropshire



The colours represent the quintiles:

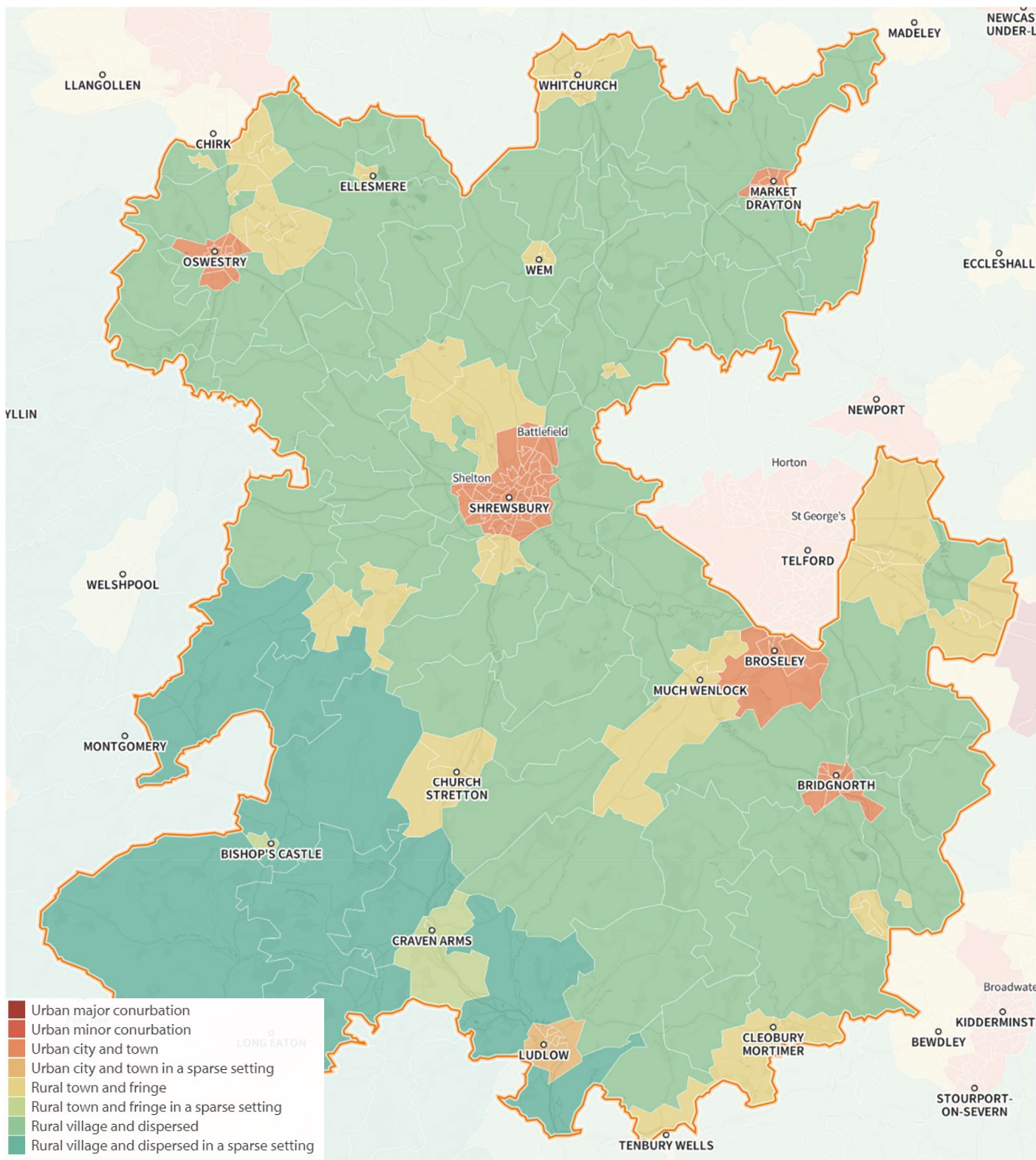
- 33.26 to 92.73: 9 areas
- 21.56 to 33.25: 46 areas
- 14.25 to 21.55: 66 areas
- 8.63 to 14.24: 46 areas
- 0.54 to 8.62: 26 areas

Index of Multiple Deprivation 2019, Ministry of Housing, Communities and Local Government
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Rural and Urban Classification in Shropshire

The Rural/Urban classification was introduced in 2004 and defines the rurality of very small geographies. The classification has been updated in 2011 to account for the changes in the population identified in the 2011 Census. The updated classification identifies eight settlement types and except for the major and minor conurbation categories classifications are assigned to either a 'sparse' or 'less sparse' regional setting. There are no areas in Shropshire classed as either a major or a minor urban conurbation, but the major urban cities or towns are Shrewsbury, Oswestry, Market Drayton, Broseley and Bridgnorth.

Figure 5: Rural and Urban Classification 2011 in Shropshire



Source: Rural and urban classification, ONS, 2011
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Housing Developments

The table below sets out the number of proposed new houses in each market town in Shropshire. There is projected to be a significant number of new houses built by 2036 and therefore there is likely to be an increase in population in these areas of new development.

Table 3 Proposed Development Distribution 2016-2036

	Settlement	Proposed Housing Guideline 2016-36
Strategic Centre	Shrewsbury	8,625
Principal Centres	Bridgnorth	1,500
	Ludlow	1,000
	Market Drayton	1,200
	Oswestry	1,800
	Whitchurch	1,600
	Sub-Total	7,100
Key Centres	Albrighton	500
	Bishop's Castle	150
	Broseley	250
	Church Stretton	250
	Cleobury Mortimer	200
	Craven Arms	500
	Ellesmere	800
	Highley	250
	Much Wenlock	150
	Shifnal	1,500
	Wem	600
	Sub-total	5,150
Rural Areas	Rural Areas	7,875
	Total	28,750

Source: Shropshire Local Plan Review, 2017

Overview of Health Needs

The following section is an overview of health and wellbeing in Shropshire looking at both outcomes and wider determinants. It pulls together a range of measures, with the purpose of prompting discussions about local challenges and successes around health and wellbeing across the lifespan.

Shropshire has a total population of 325,400 residents. 18.5% of the population are aged under 18, and 25.0% of the population are aged 65 or over. 2.0% of the population are from a black or minority ethnic (BME) population, and 4.6% of the population described themselves as non-white UK (i.e., not white British, English, Northern Irish, Scottish, or Welsh) at the last Census (2011). This compares to a BME population of 14.6% and a non-white UK population of 20.3% for England as a whole. 0.4% of the population report that they cannot speak English well or at all.

The Indices of Deprivation (IMD) combine a range of economic, social and housing indicators to provide a measure of relative deprivation, i.e., they measure the position of areas against each other within different domains. A rank of 1 indicates highest deprivation. Shropshire is ranked 110 out of 152 Local Authorities in England on overall deprivation and is ranked 121 out of 152 local authorities on income deprivation.

17.1% of pupils attending nursery and primary schools and 15.3% of pupils attending secondary school in Shropshire are eligible for and claiming free school meals. This compares with 23.0% of pupils attending nursery and primary schools and 20.9% of pupils attending secondary school for England as a whole.

50.3% of children in Shropshire achieved 5 and above in 2020/21 (academic) in English and Maths GCSE. This compares with 51.9% for England. Among pupils eligible for free school meals, 26.8% achieved 5 or above in English and Maths in 2020/21 (academic), compared to 29.9% nationally. 2.2% of working age people in Shropshire are unemployed, compared with 4.6% for England overall. The median gross weekly wage for employees living in Shropshire is £584.6. This compares with an England wage of £613.3.

The life expectancy at birth in Shropshire is 80.2 years for males and 83.7 years for females. This compares with 79.4 years for males and 83.1 years for females for England overall. At the last Census (2011) 5.0% of residents in Shropshire reported their health as poor or very poor, and 18.6% reported a long-term illness or disability that impacts on their day-to-day activities. People in Shropshire can expect a healthy life expectancy of 62.8 years for males and 67.1 years for females. This compares with 63.1 years for males and 63.9 years for females nationally. The standardised mortality rate for deaths from all causes under 75 is 89.7. For comparison, the standardised mortality rate for England is 100.

68.0% of adults in Shropshire are reported as obese or overweight (2013-15). This compares to 63.5% for England as a whole. 30.4% of adults in Shropshire report that they take part in sport and active recreation for an equivalent of 30 minutes three times per week. In 2020/21, 90.77% of the eligible population aged 40-74 in Shropshire were offered an NHS Health Check, and 38.65% received one. This compares to 71.82% and 33.39% respectively for England overall. 6.17% of people in Shropshire have a recorded diagnosis of diabetes, which compares to a national average of 6.37%. In no value no value% of children aged 4-5 years and no value% of children aged 10-11 whose weight was recorded were reported as obese or overweight. This compares with 27.73% of children aged 4-5 years and 40.91% of children aged 10-11 for England as a whole.

This report has been designed for viewing at single tier and county local authority geography. The following charts show a range of measures of health and wellbeing for Shropshire compared with either England or the average across all English single tier and county councils, and also with your chosen comparison group. You can select your chosen single tier or county authority and comparison group, such as all local authorities in the South-East, using the boxes above (start typing in 'South-East' and it will appear in the search box).

Topics included in this report are:

- Healthy life expectancy
- Older people's health and wellbeing
- Causes of death and ill health
- Healthy living
- Children's health and wellbeing

Lifestyle Risk Factors

Lifestyle risk factors to health are lifestyle behaviours that adversely affect health, for example, smoking, lack of physical activity, etc. These behaviours are important as many of them lead to developing long term conditions and non-communicable diseases, for example smoking can cause lung cancer. Therefore, disease can be prevented by tackling poor lifestyle behaviours. Lifestyle risk factors are of a concern to the health of the population in Shropshire as they are affected by health inequalities, for example, more smokers in more deprived areas and fewer people are physically active in older age groups.

- Smoking prevalence in adults 18+ in Shropshire is 13.7% and is similar to the England average of 13.9%, (OHID 2019 data).
- Smoking in early pregnancy in Shropshire is higher than the England average, 14.2% compared to 12.8%, (OHID 2018-19 data).
- It is estimated that 68% of adults in Shropshire are either overweight or obese, which is slightly higher than the England figure of 63.5%.
- Just under a quarter of adults (18.7%) are classed as physically inactive in Shropshire, lower than the England figures of 23.4%.
- Shropshire has a significantly higher rate of admissions for alcohol-related conditions in females, with 352 per 100,000 people compared to 332 for England. Admission episodes are also significantly higher for over 65 year old females.
- Shropshire has a significantly lower rate of alcohol abstinence than England (8.4% compared to 16.2%) and has a significantly higher percentage of population of who have ever had an alcoholic drink at the age of 15 (68.1% compared to 62.4%)

Long-term Conditions

Long term conditions are defined as health problems that require on-going management over a period of years or decades. This can include non-communicable diseases such as cardio-vascular disease (CVD), some communicable disease such as HIV, some mental health disorders such as depression and some on-going impairment such as blindness. Long term conditions are conditions that cannot, at present, be cured, but can be controlled by medication and other therapies.

Many long-term conditions and non-communicable disease are the result of lifestyle risk factors and changing demographics. Increases in the ageing population, increases in obesity and other lifestyle risk factors and possible increases in health inequalities will all lead to an increase in the prevalence of long-term conditions. This can lead to pressure on current service provision. Long term conditions therefore are a significant area of concern in Shropshire. There is also a higher recorded prevalence of long-term conditions in Shropshire, 13.1% compared to the England figure of 9.2%, (OHID).

Under 18 conception rates

In Shropshire the overall under-18 conception rate is slightly lower than the national figure; 3.4 births per 1,000 females aged 10-18 versus 3.9 for England. However, inequalities exist amongst certain sections of the population. Young women from deprived backgrounds, care leavers and those with low educational attainment are significantly more likely to become teenage mothers than the general population.

Mental Health and Substance Misuse

The Public Health Outcomes Framework (PHOF) includes measures of general well-being in the population. These measures assess whether people feel anxious, happy and whether they feel the things they do are worthwhile. The PHOF also looks at how many people successfully complete drug treatment.

- 8.2% of people in Shropshire reported a low score for happiness, similar, but slightly lower to the England figures at 9.2%, (OHID, 2020-21).
- 26.4% of people in Shropshire reported a high score for anxiety, similar, but slightly higher to the England figures at 24.2%, (OHID 2020-21).
- 21.2% of non-opiate users and 3.9% of opiate users successfully completed drug treatment in Shropshire. Corresponding England values were noticeably higher at 33% and 4.7%.

Maternal and Infant Health

- A significantly lower proportion of children in Shropshire live in poverty compared to the national average. (OHID 2016 and 2019)
- Chlamydia infection rates are noticeably lower than the England average for LAs
- Accidents are the most common cause of death in people aged 0-24 years in Shropshire.
- Immunisation is one of the most important mechanisms for protecting individuals and the community from serious diseases. In Shropshire, vaccination coverage for most primary immunisations is higher than the national figure (21 of 24 metrics detailed on OHID).
- In 2019/20 22.6% of reception and 29.7% of year 6 pupils were classed as either overweight or obese. Both measures are slightly lower than the England score at 23% and 35.2% respectively.

Healthy life expectancy in Shropshire

Life expectancy at birth is the average number of years that a person can be expected to live from birth, assuming that age-specific mortality levels remain constant. Healthy life expectancy is an estimate of expected years of life spent in good health. It has value in the assessment of healthy ageing, health improvement monitoring and health and social care need. There are important socio-demographic differences in healthy life expectancy. People from more deprived populations are more likely to live shorter lives, as well as live a greater proportion of their life in poor health.

Figure 6 Life expectancy at birth - male (from 2013-15 to 2018-20) & Life expectancy at birth - female (from 2013-15 to 2018-20) for Shropshire & England

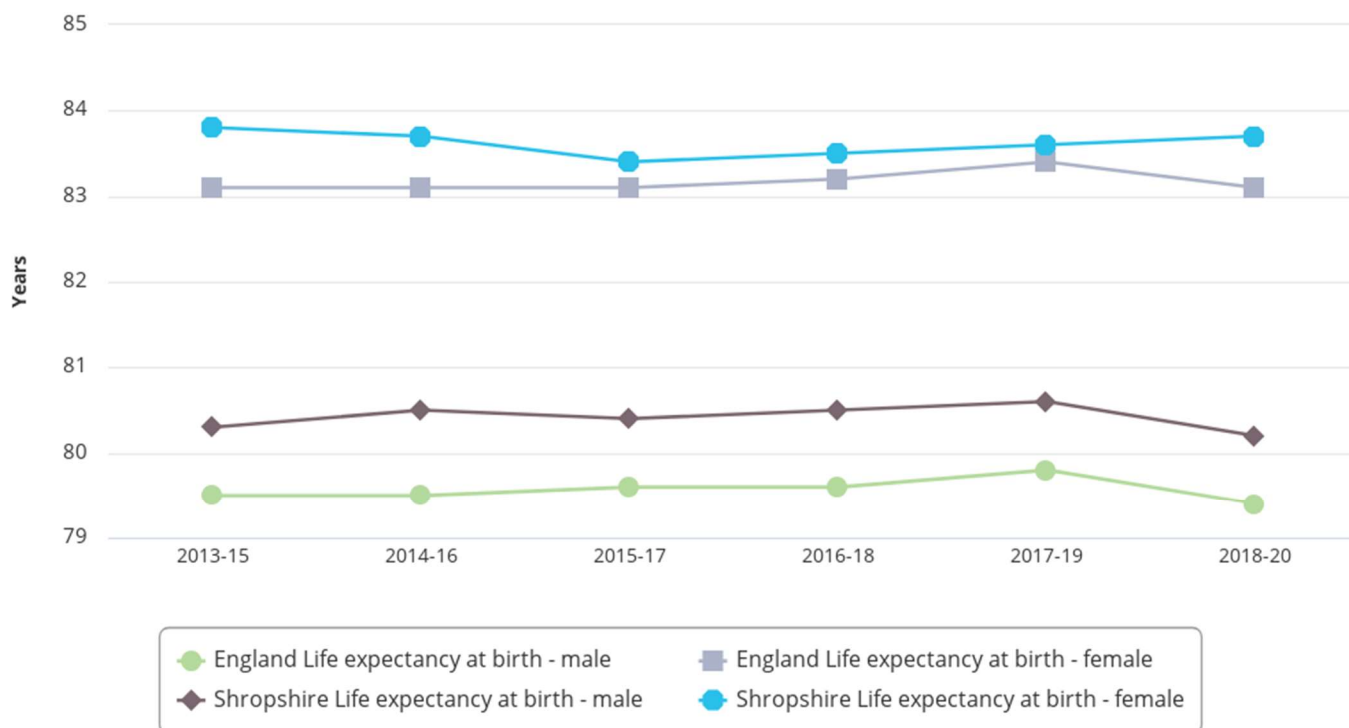


Figure 7: Healthy life expectancy at birth - male (from 2016-18 to 2018-20) & Healthy life expectancy at birth - female (from 2016-18 to 2018-20) for Shropshire & England

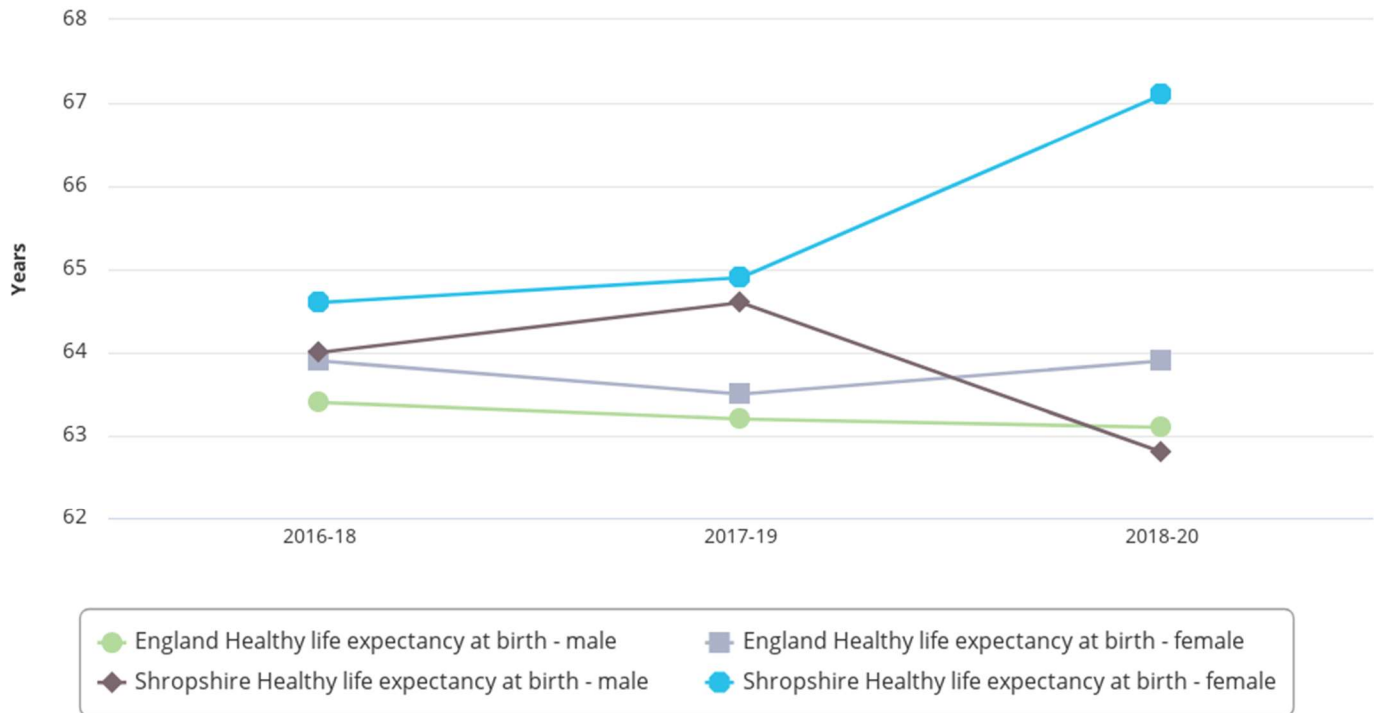
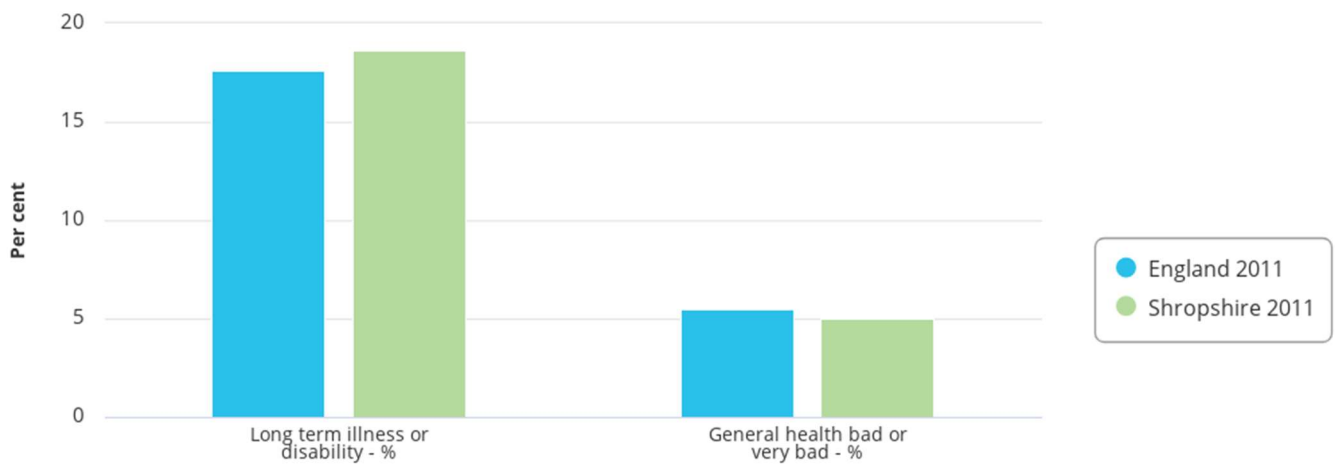


Figure 8: % of people with a limiting long-term illness or disability (2011) & % of people in bad or very bad health (2011) for Shropshire & England



Older people in Shropshire

The growing population of older people is one of the greatest challenges facing health and social care. As the population ages, the health and wellbeing of older people and the provision of services to meet their needs becomes increasingly important.

This section explores the relative health and wellbeing of older people in your area.

The Income Deprivation Affecting Older People Index (IDAOP) is based on the percentage of the population aged 60 and over who receive income support, income based job seekers allowance, pension credit or child tax credit claimants aged 60 and over, and their partners (if also aged 60 or over). A rank of 1 indicates highest deprivation.

Figure 9: IMD Income Deprivation Affecting Older People Index (IDAOP) - Rank for all single tier and county authorities 2019 for Shropshire (quantiles of All English single tier and county councils)



Disability free life expectancy is an estimate of expected years of life spent without a limiting long-standing illness or disability. It is calculated using self-reports of activity limiting illness, and is therefore a measure of functional health status, which has relevance for fitness for work and independent living.

Figure 10: Disability-free life expectancy at age 65 - male (2018-20) & Disability-free life expectancy at age 65 - female (2018-20) for Shropshire

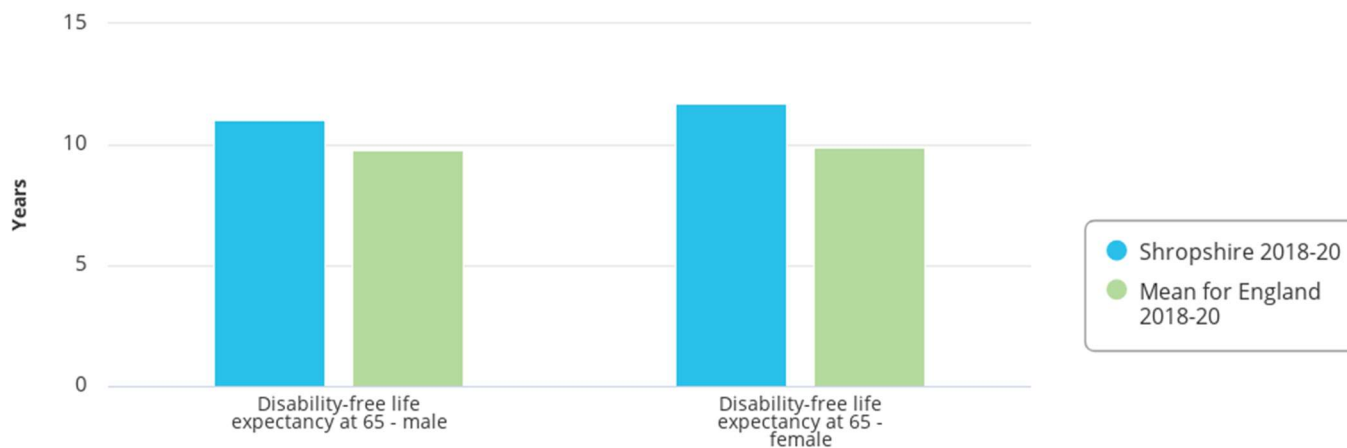


Figure 11: Percentage of pensioners who live alone (2011) in Shropshire and England

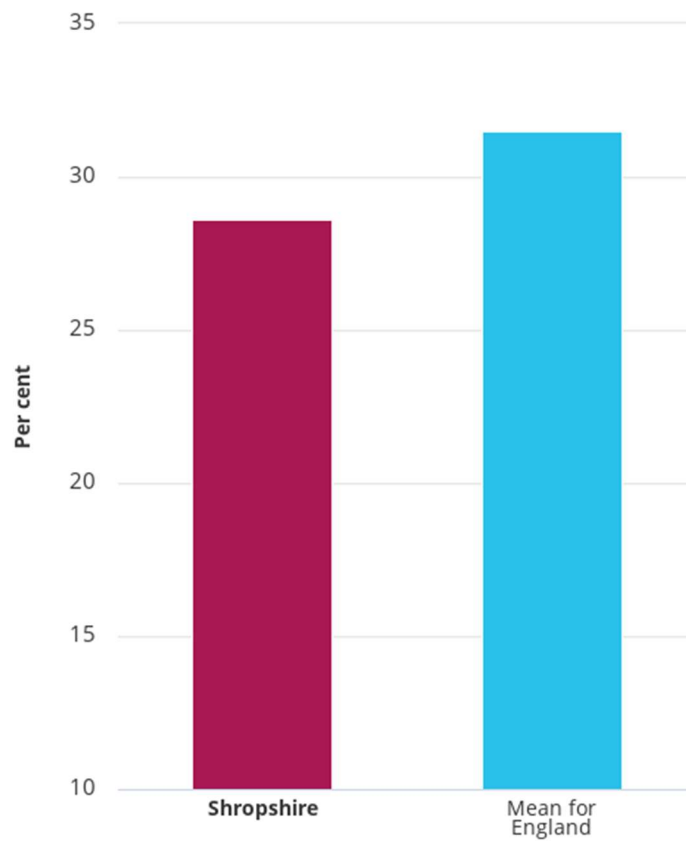
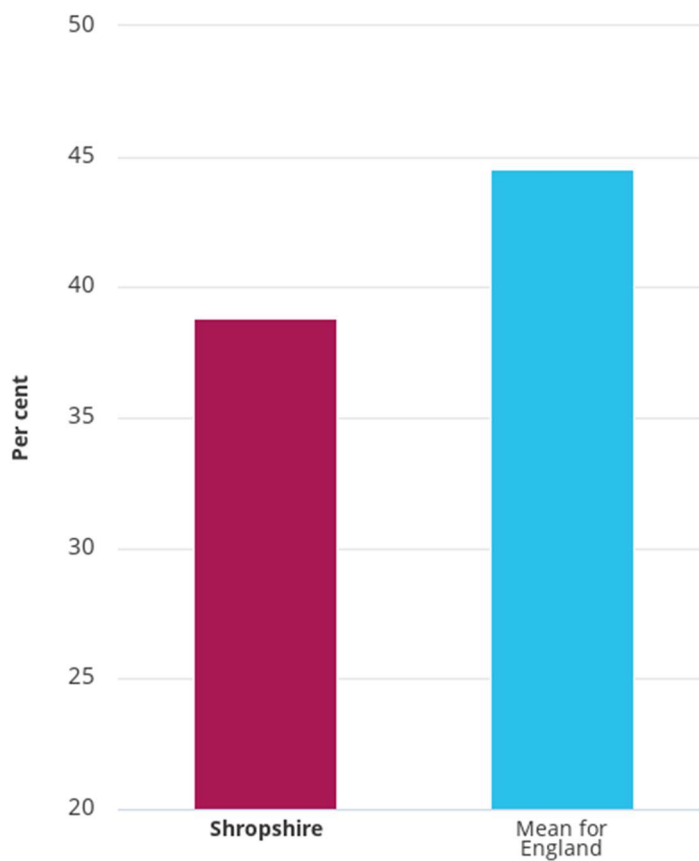


Figure 12: Proportion of people who use services who reported that they had as much social contact as they would like (2014/15) for Shropshire and England



The Excess Winter Deaths Index (EWD Index) is the excess winter deaths measured as the ratio of extra deaths from all causes that occur in the winter months compared with the expected number of deaths, based on the average of the number of non-winter deaths. It is calculated as the number of excess winter deaths divided by the average non-winter deaths, expressed as a percentage. For example, an EWD index of 20 shows that there were 20 per cent more deaths in winter compared with the non-winter period. The number of excess winter deaths depends on the temperature and the level of disease in the population as well as other factors, such as how well equipped people are to cope with the drop in temperature. Most excess winter deaths are due to circulatory and respiratory diseases, and the majority occur amongst the elderly population.

Figure 13: Excess winter deaths index (3 years, all ages) (%) (2014/15-16/17 (Winter)) for Shropshire (Quantiles of All English single tier and county councils)

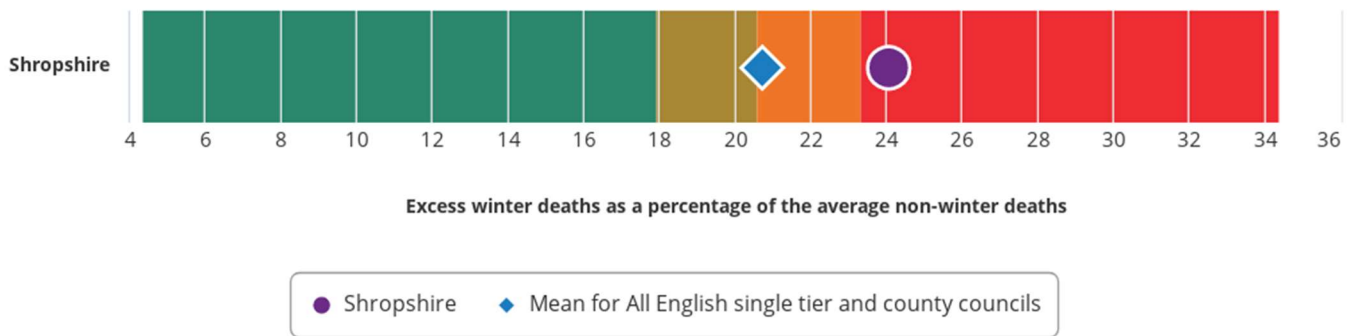
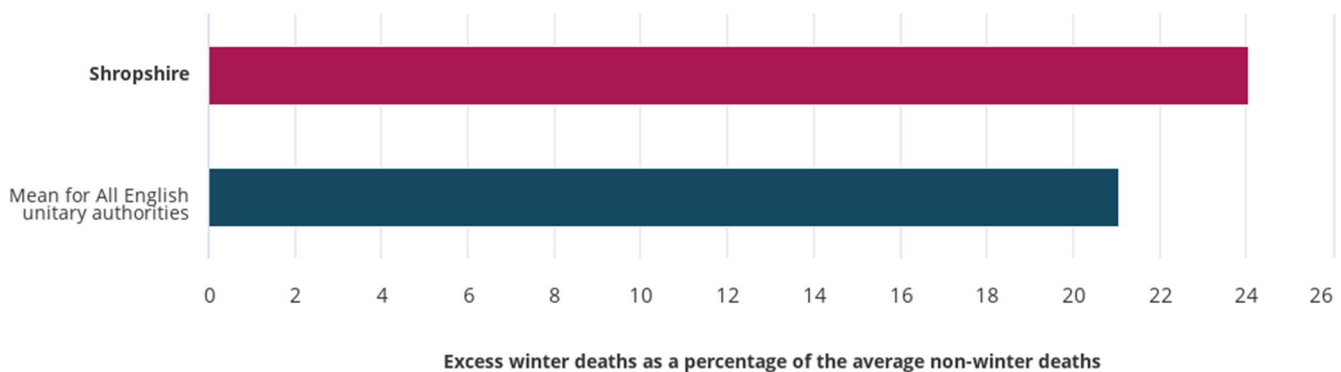


Figure 14: Excess winter deaths index (3 years, all ages) (%) (2014/15-16/17 (Winter)) for Shropshire



Causes of death and ill health in Shropshire

Premature mortality (early death) is a major public health concern. Mortality and premature mortality rates are often used as an indicator of population health. The charts below provide a comparison of mortality and premature mortality rates, highlighting some of the most common causes of death. For comparison, **the standardised mortality ratio for England is always 100**.

Figure 15: Deaths from all causes, all ages (standardised mortality ratio) (2015-2019), Deaths from all causes, under 75 years (standardised mortality ratio) (2015-2019) & Deaths from all causes, under 65 years (standardised mortality ratio) (2011-2015) for Shropshire

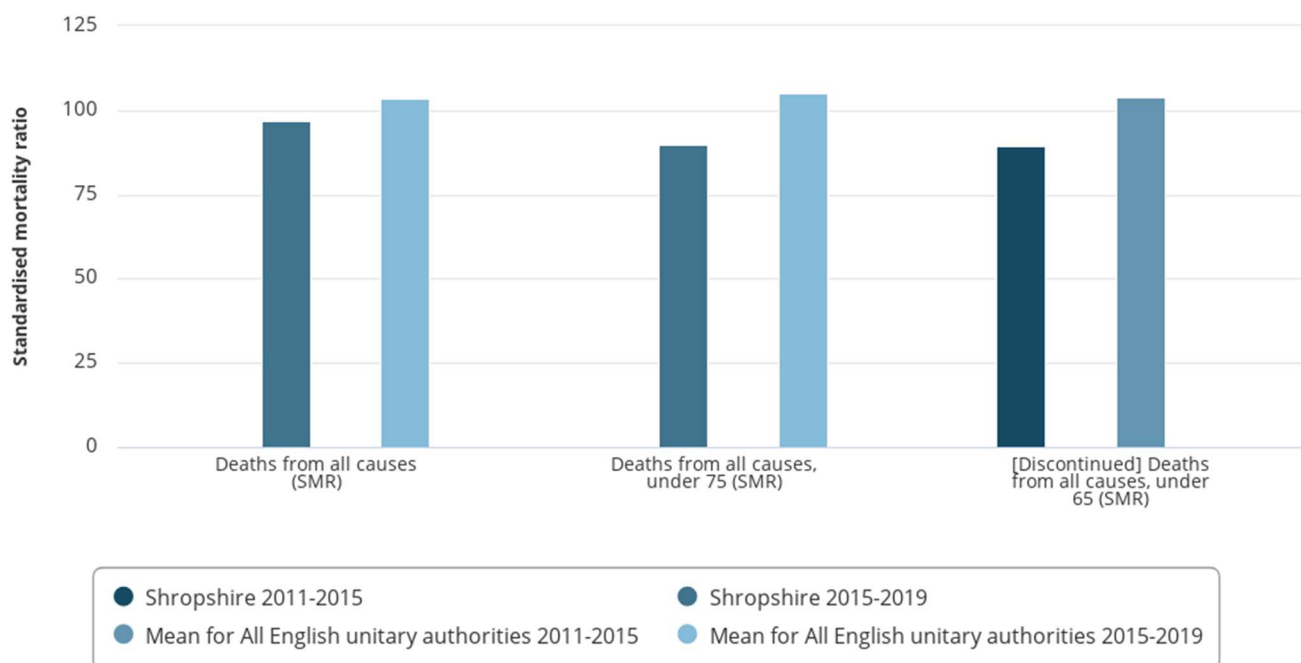


Figure 16: Standardised mortality ratio for cancer, respiratory diseases, circulatory disease and stroke among all ages for Shropshire and All English unitary authorities

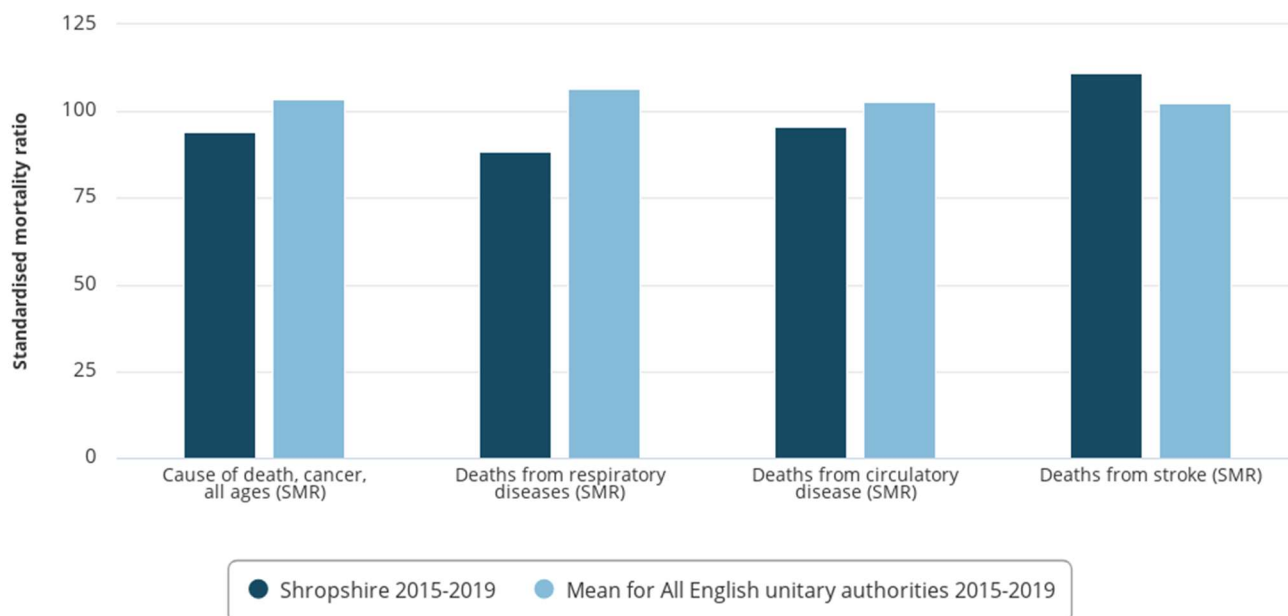


Figure 17: Deaths from all cancer, aged under 75 (standardised mortality ratio) (2015-2019) & Deaths from circulatory disease, under 75 years (standardised mortality ratio) (2015-2019) for Shropshire

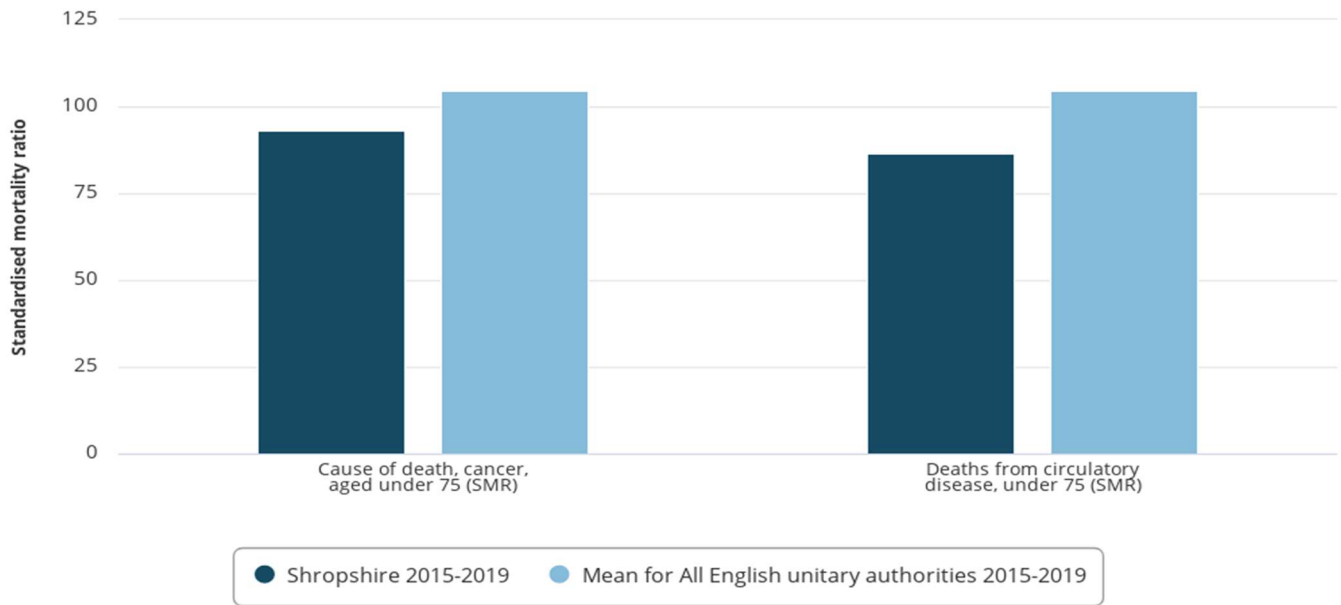
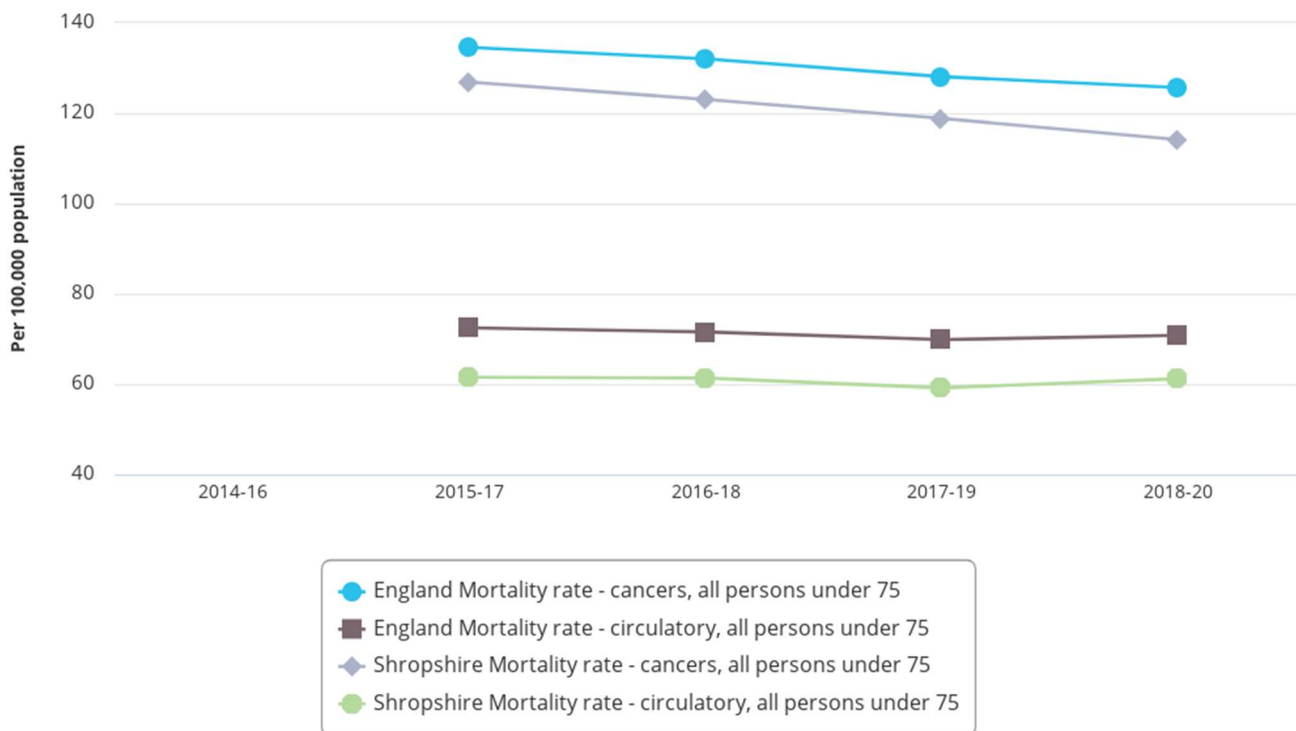


Figure 18: Mortality rate from all cancers at ages under 75 - all persons (from 2014-16 to 2018-20) & Mortality rate from all circulatory diseases at ages under 75 - all persons (from 2014-16 to 2018-20) for Shropshire & England



Healthy Living

Lifestyle and behaviour choices are important factors in influencing health. Unhealthy diets and physical inactivity are major risk factors for excess weight and obesity, and a number of serious health conditions including diabetes, cardiovascular disease and certain cancers.

Figure 19: Percentage of people aged 17 years and over with diabetes (2013/14) in Shropshire and England

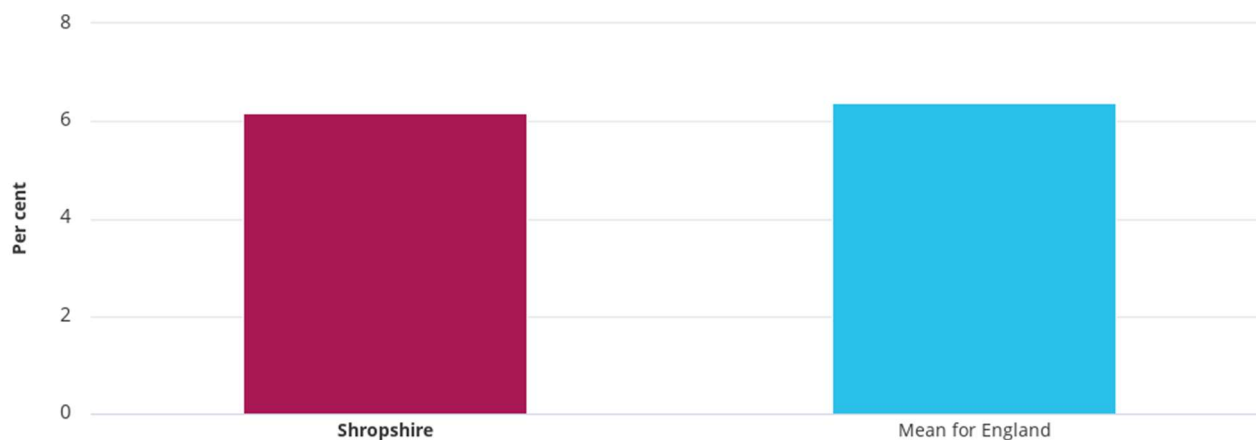


Figure 20: Percentage of adults (aged 18+) classified as overweight or obese (2020/21) & Percentage of adults (aged 18+) classified as obese (2020/21) for Shropshire & England

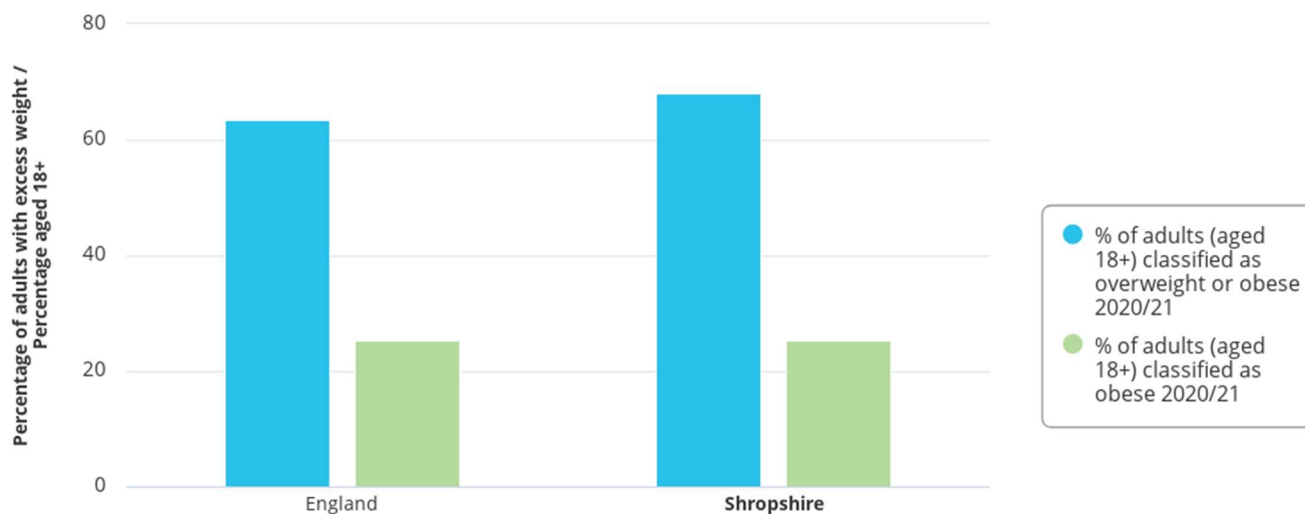


Figure 21: Number of fast food outlets per 100,000 (2011) for Shropshire and All English single tier and county councils

Quartiles for All English single tier and county councils

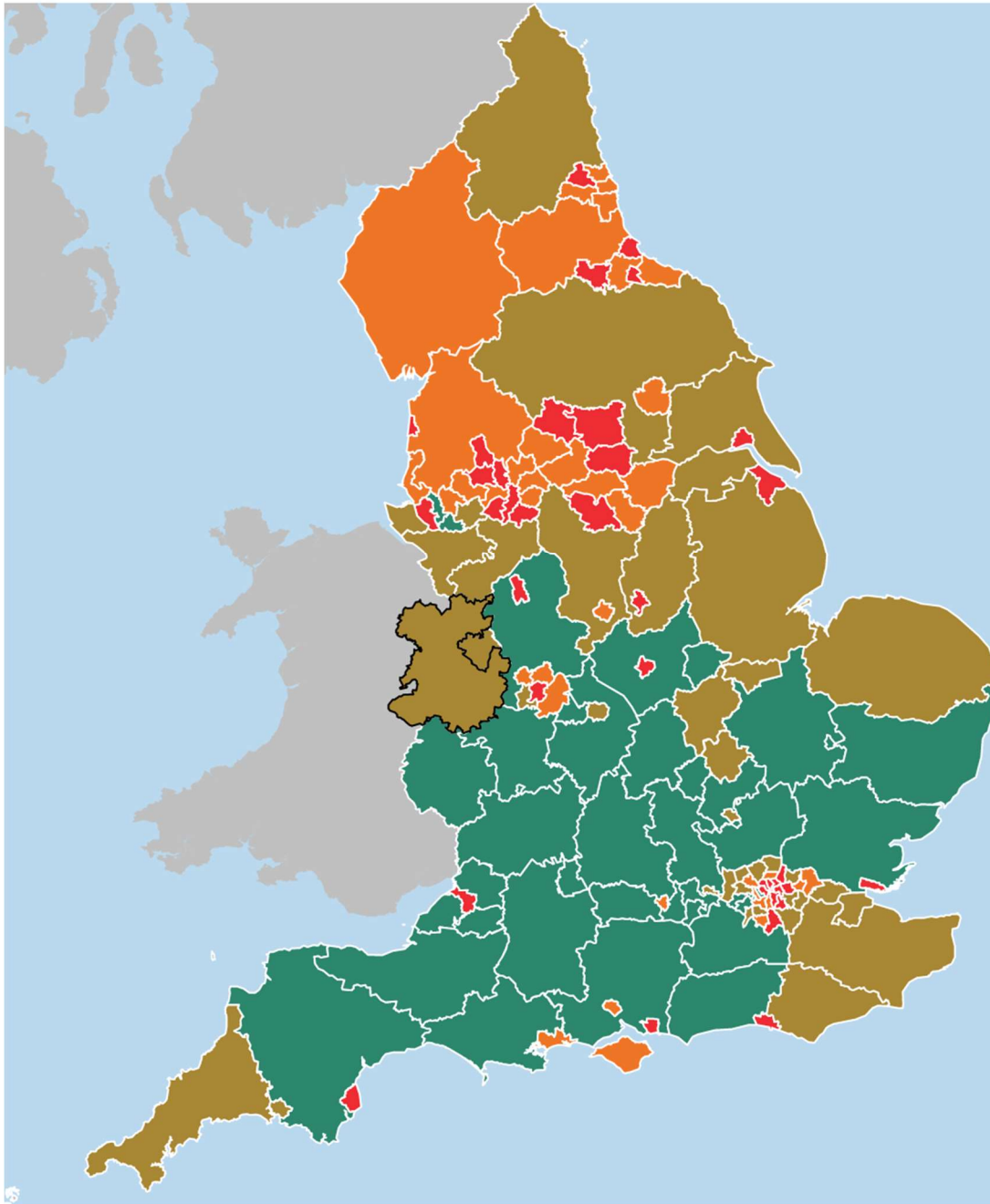
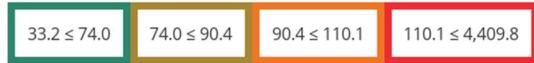
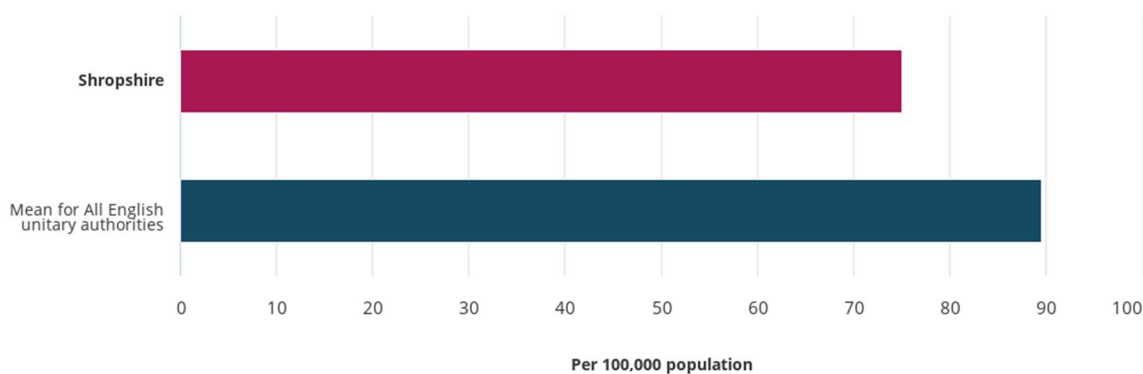


Figure 22: Number of fast-food outlets per 100,000 (2011) for Shropshire and All English unitary authorities



Children's health in Shropshire

The Income Deprivation Affecting Children Index (IDACI) is based on the percentage of children aged 0-15 living in families that are income deprived - i.e., in receipt of income support, income based jobseeker's allowance or pension credit, or those not in receipt of these benefits but in receipt of Child Tax Credit with an equivalised income (excluding housing benefits) below 60% of the national median before housing costs. A rank of 1 indicates highest deprivation.

Figure 23: IMD Income Deprivation Affecting Children Index (IDACI) - Rank for all single tier and county authorities (2019) for Shropshire (quantiles of All English single tier and county councils)

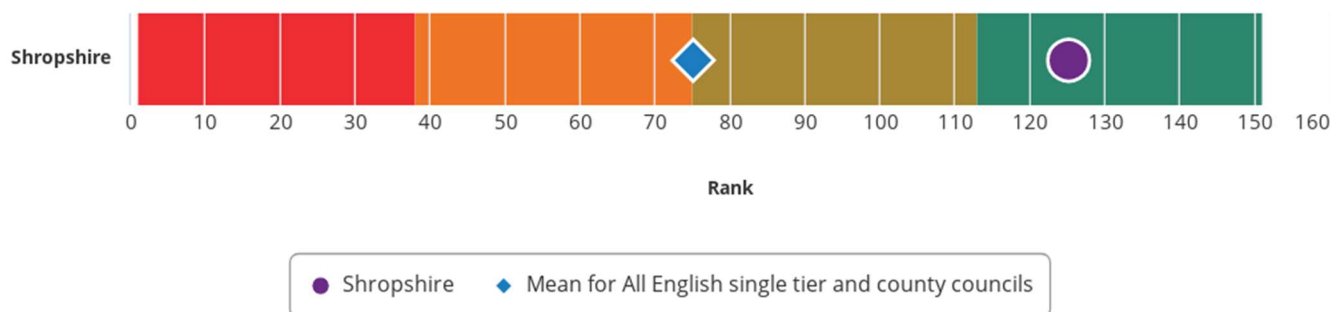


Figure 24: Percentage of babies with low birthweight (2013) for Shropshire and England

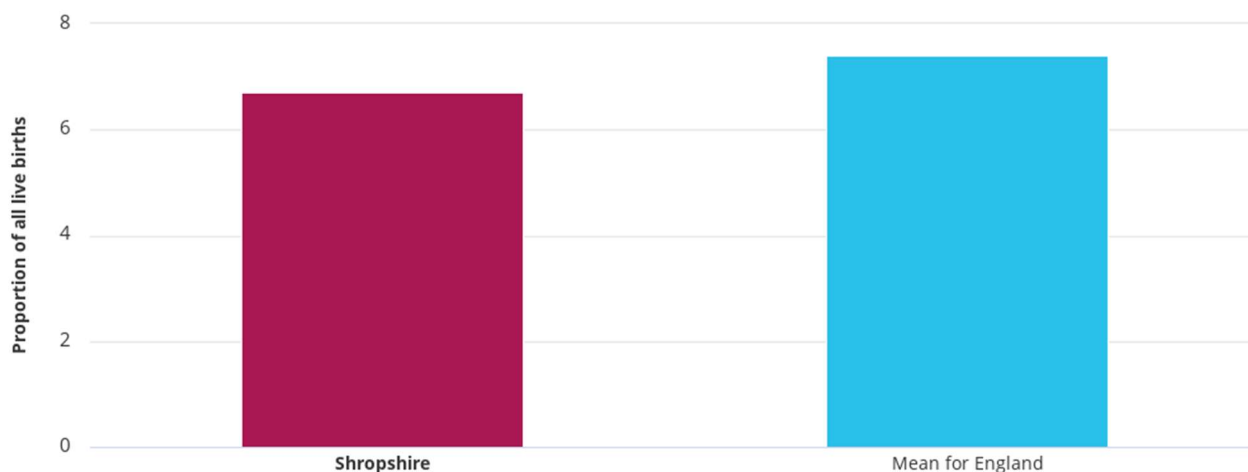


Figure 25: Excess weight (overweight or obese) and obesity in primary school aged children in Shropshire and England

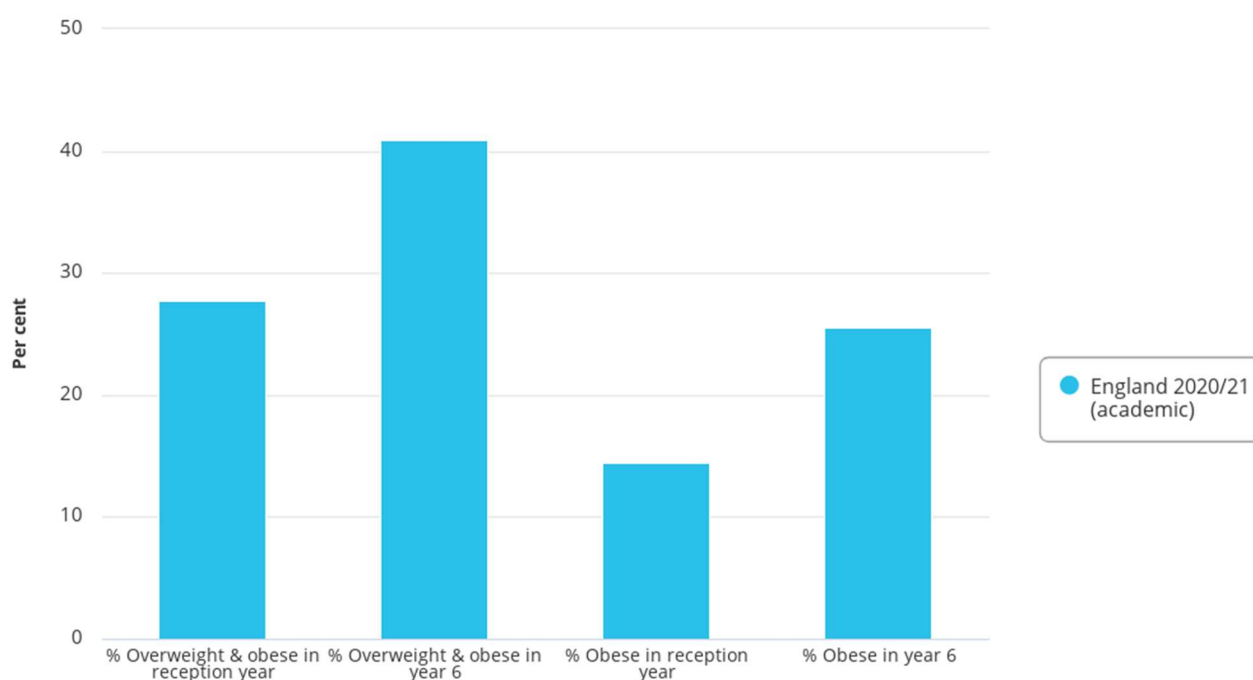
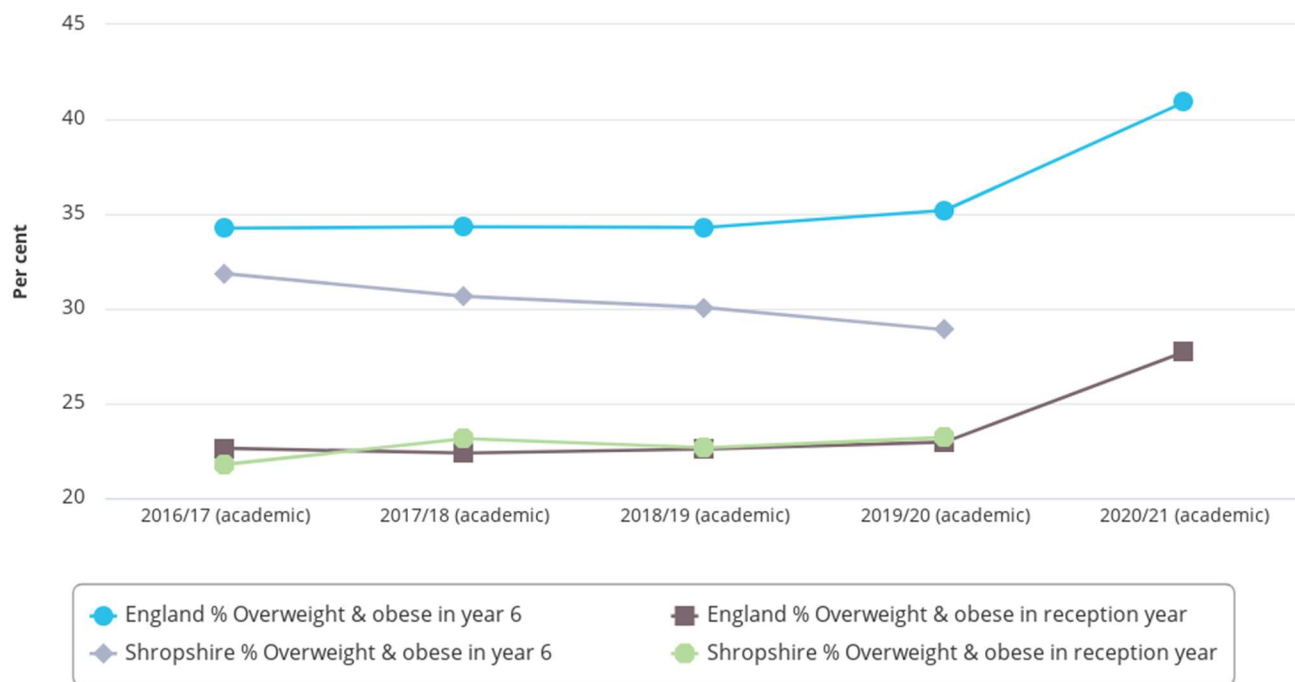


Figure 26: Excess weight (overweight or obese) in children in Shropshire and England



The Early Years Foundation Stage Profile (EYFSP) is a teacher assessment of a child's development at the end of the academic year in which they turn five. This is a key measure of early years development across a wide range of developmental areas. Children from more deprived backgrounds are more at risk of poorer development and the evidence shows that differences related to social background emerge early in life.

Figure 27: Percentage of all children achieving at least the expected level in the prime areas of learning and in the specific areas of literacy and mathematics at foundation stage (2018/19 (academic)) for Shropshire

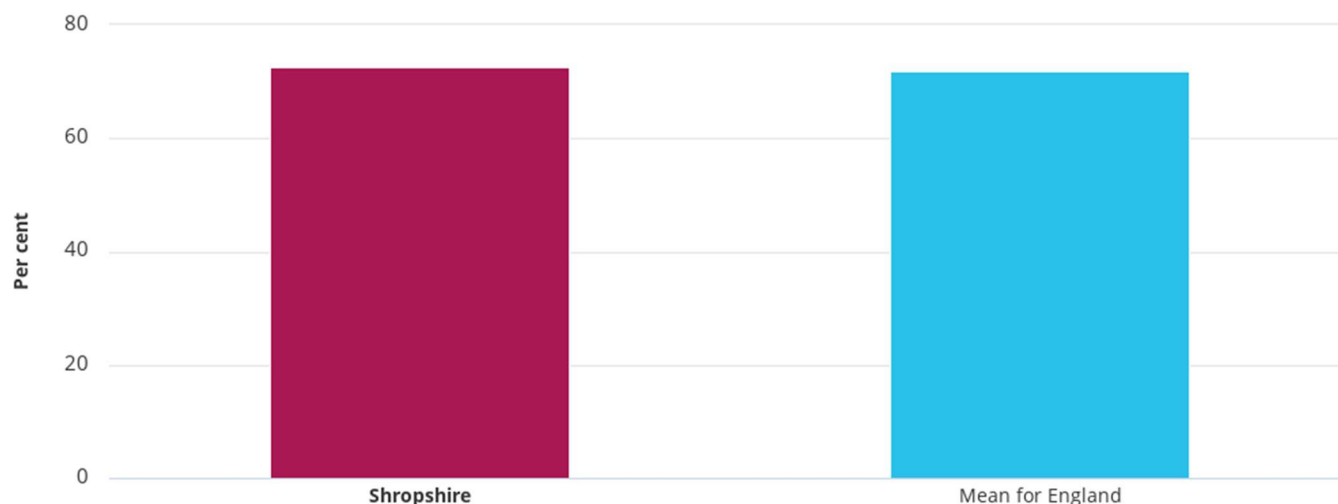


Figure 28: Percentage of half days missed due to overall absence in primary schools (2020/21 (academic)) & Percentage of half days missed due to overall absence in secondary schools (2020/21 (academic)) for Shropshire & England

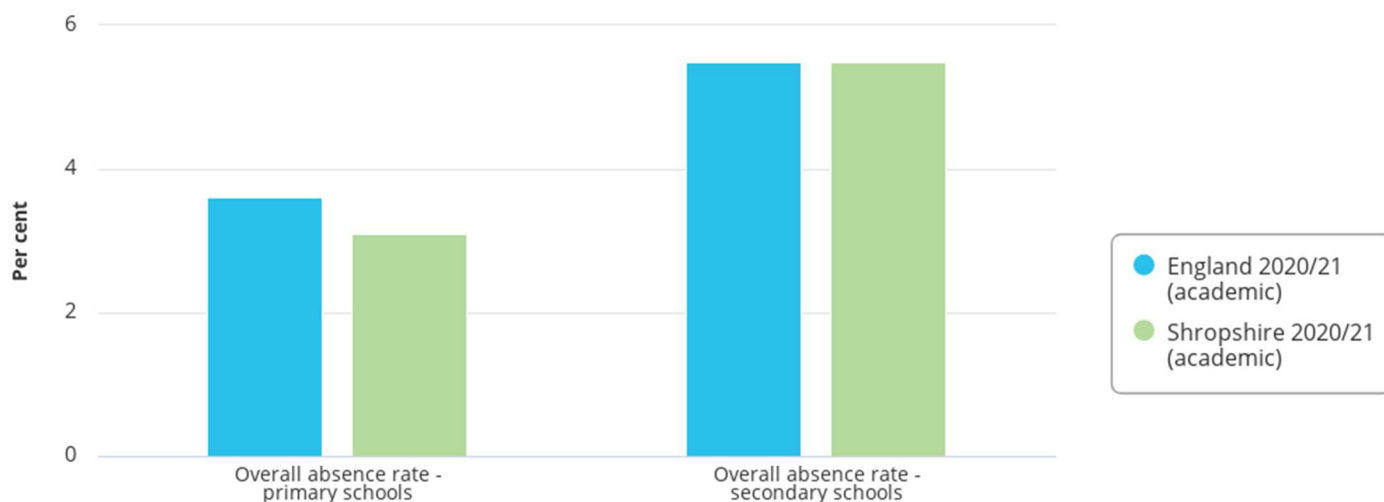


Figure 29: Percentage of 16 to 18 year olds who are not in education, employment or training (NEET) (2015) for Shropshire

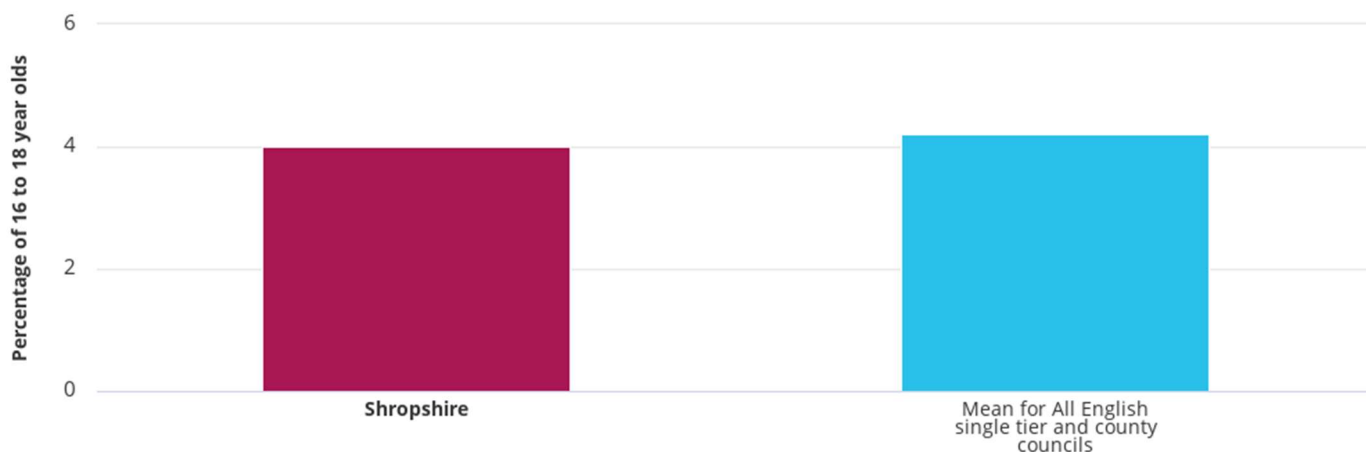
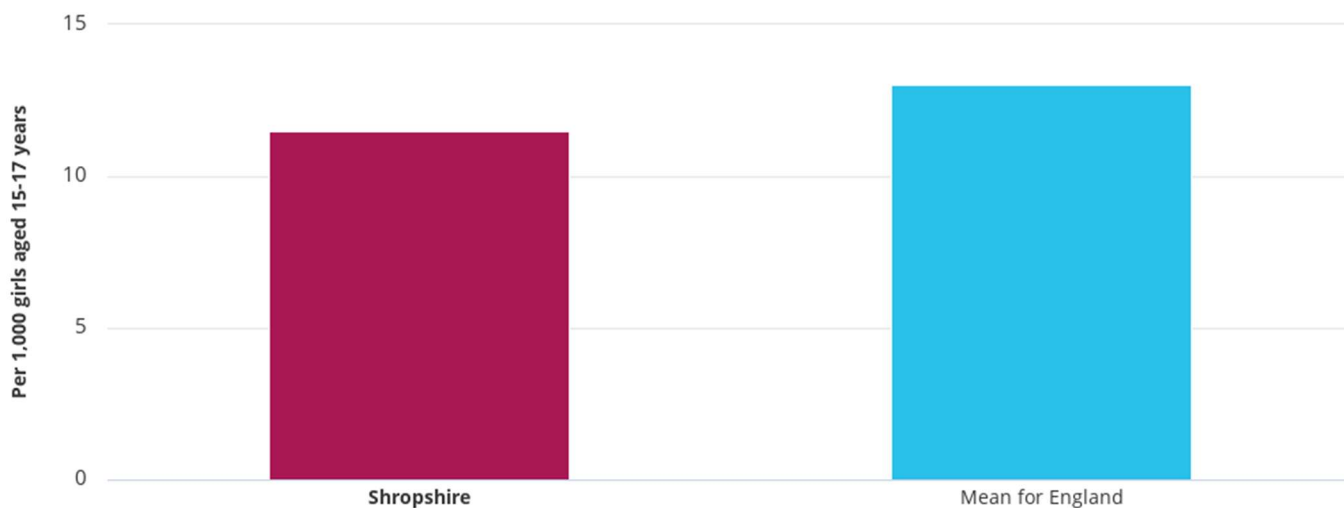


Figure 30: Under 18 conception rate (per 1,000 girls aged 15-17 years) (2013) for Shropshire and England



Current Pharmaceutical Provision

Pharmaceutical services in Shropshire are provided by the following:

- Community pharmacy contractors, including distance selling pharmacies
- Dispensing appliance contractors
- Dispensing GP practices

The NHS Pharmaceutical Services and Local Pharmaceutical Services Regulations (2013 Regulations) also provides the legal framework that govern the services that pharmaceutical providers can provide. Although dispensing practices provide a wide range of services for their patients, for the purpose of the PNA, only the prescription dispensing services are considered within the regulation and PNA.

There are three levels of pharmaceutical services that community pharmacies can provide:

- Essential services – services all pharmacies are required to provide
- Advanced services – a range of services that pharmacies can choose to offer, providing Secretary of State Directions are met
- Enhanced services – services that can be commissioned locally by NHS England

Pharmacies can also provide locally commissioned services which are commissioned by local commissioners such as Shropshire Council and Shropshire, Telford and Wrekin ICB. This section describes the current provision of these services within Shropshire.

There are 47 pharmaceutical service providers of which one is distance-selling. There are no appliance contractors (*Pharmacists which specialise in appliance devices, including customisation*). There are also 17 GP dispensing practices spread throughout Shropshire.

Figure 31: Number of pharmacies and dispensing practices

Community Pharmacies	Distance Selling Pharmacies	Shropshire, Telford and Wrekin ICS GP Dispensing Practices
47	1	17

- One STW ICS GP Dispensing Practice operates two branches which are both dispensing sites, (making 18 STW ICS Dispensing Practice sites).
- In addition to STW ICS Dispensing Practices/Sites there is one Dispensing Practice from a neighbouring system physically located with Shropshire (making 19 sites in total for Dispensing Practice sites within Shropshire)

There are 38 GP practices in Shropshire, of which 17 GP Practices are dispensing practices, (1 practice has two dispensing branch sites). Dispensing doctors are GP practices who are allowed to both prescribe and dispense prescription only medicines to their patients from within their surgeries. GPs are only allowed to become dispensing practices in specific circumstances. Due to the rural nature of Shropshire dispensing practices are located throughout the county, please see the Health Needs Analysis section for the maps of their location. There are 15 GP Practices that dispense to approximately 108,750 patients in Shropshire. Dispensary opening hours usually reflect the opening times of the practice. The GP Out-of-hours service in Shropshire is provided by Shropdoc. They can prescribe medicines in emergency circumstances, but do not routinely prescribe medication.

In Shropshire there is one urgent care centre, based at the Royal Shrewsbury Hospital site of The Shrewsbury and Telford Hospital NHS Trust (SaTH), four Minor Injury Units (MIU) one in Ludlow, Bridgnorth, Whitchurch and Oswestry. Three of the MIUs are located at the community hospitals

(Ludlow, Bridgnorth and Whitchurch). The MIU in Oswestry is located at the Oswestry Health Centre which is a multi-purpose outpatient health centre.

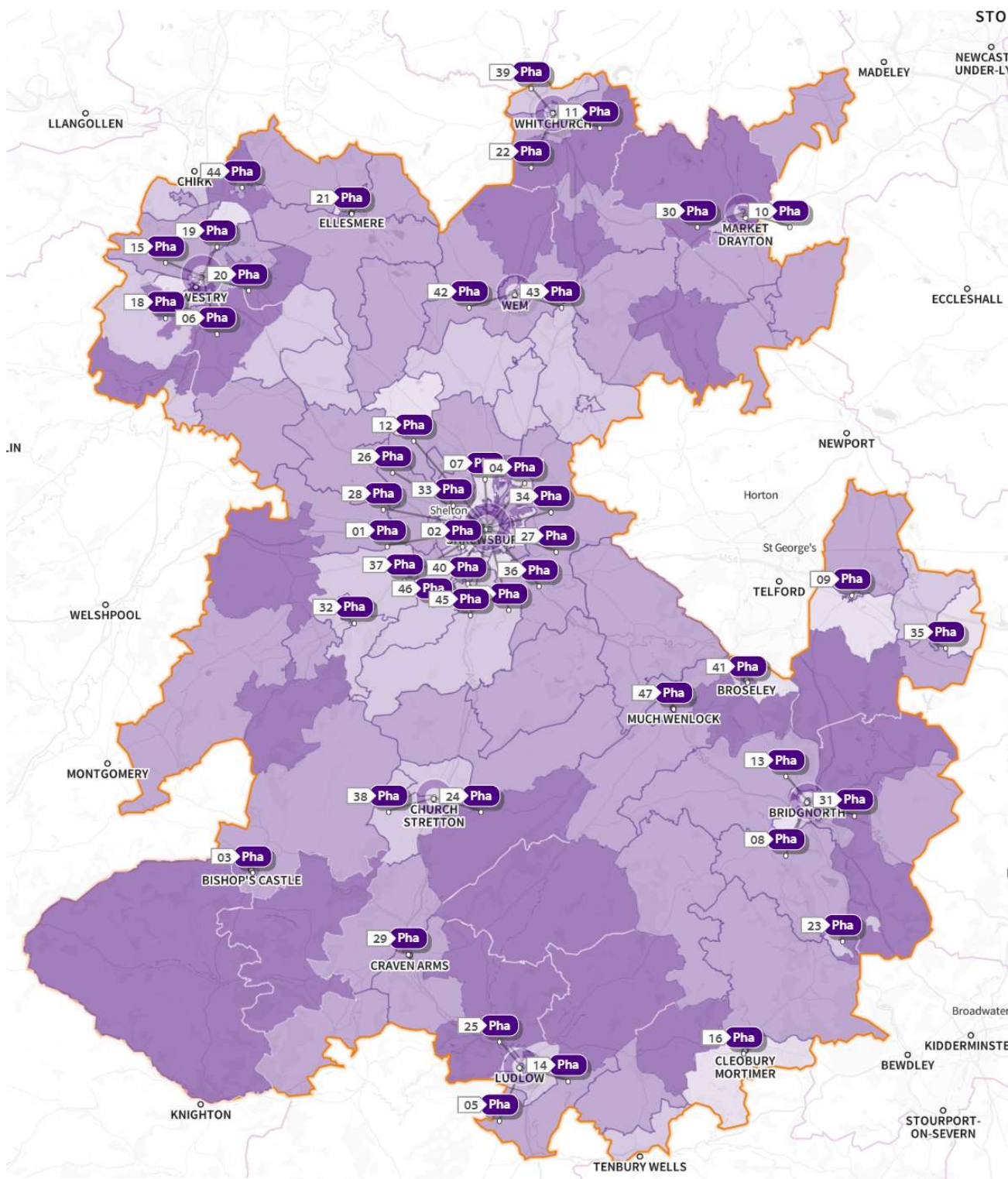
There are three community hospitals open in Shropshire which are sited throughout the county. The community hospitals are based in Ludlow, Whitchurch and Bridgnorth.

There is one acute trust in Shropshire, The Shrewsbury and Telford Hospital NHS Trust, which is based on two sites, one in Shrewsbury (Royal Shrewsbury Hospital) and one in Telford (Princess Royal Hospital). There is also the Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust

based near Oswestry. Mental health services are provided by Midland Partnership NHS Foundation Health Trust and community services from Shropshire Community Health NHS Trust.

The following maps show the locations of community pharmacies and dispensing practices in Shropshire, by deprivation and rural and urban classification.

Figure 32: Community Pharmacies by Index of Multiple Deprivation local quintile

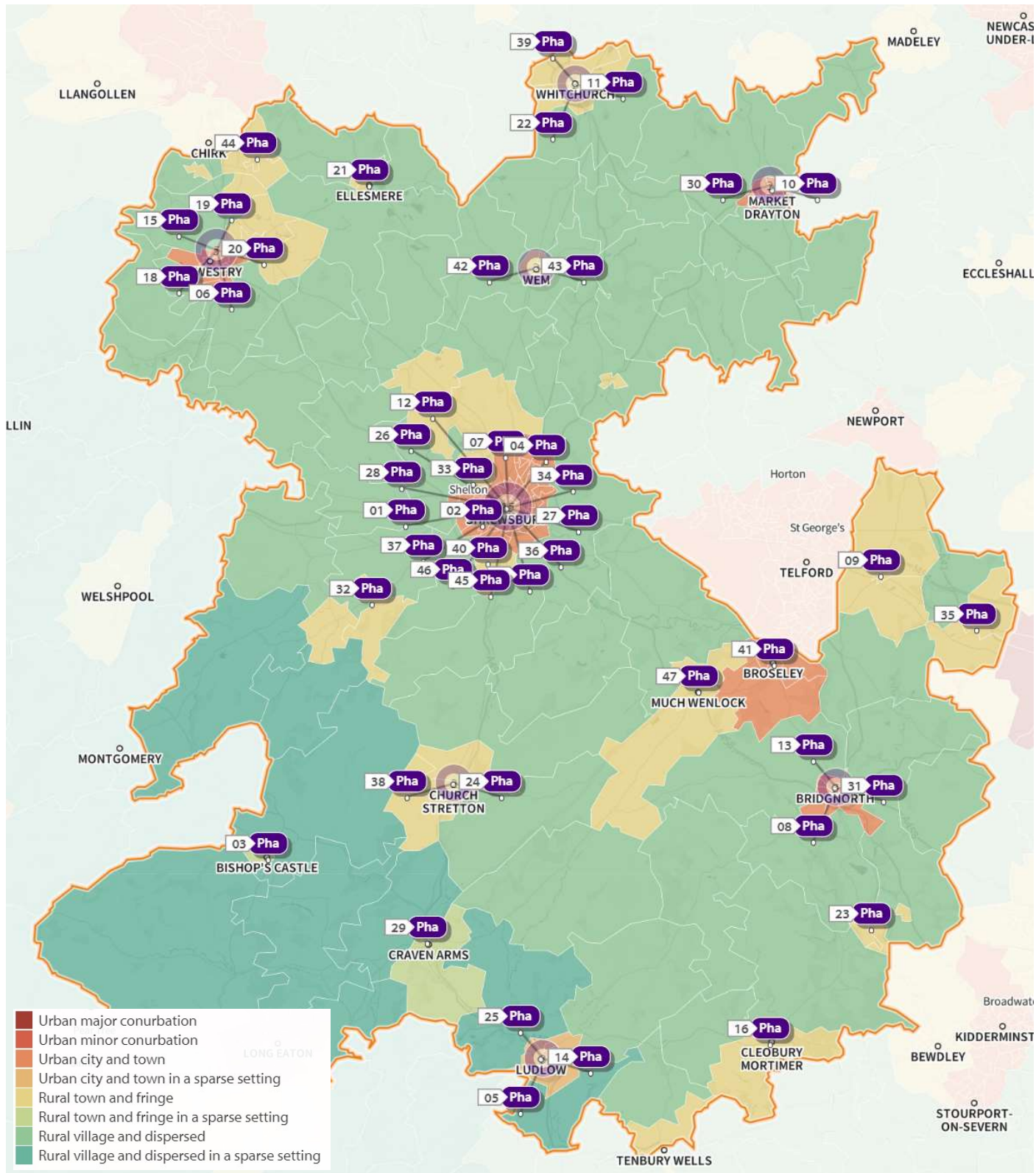


The colours represent the quintiles:

- 33.26 to 92.73: 9 areas
- 21.56 to 33.25: 46 areas
- 14.25 to 21.55: 66 areas
- 8.63 to 14.24: 46 areas
- 0.54 to 8.62: 26 areas

Index of Multiple Deprivation 2019, Ministry of Housing, Communities and Local Government
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Figure 33: Community Pharmacies by rural and urban classification

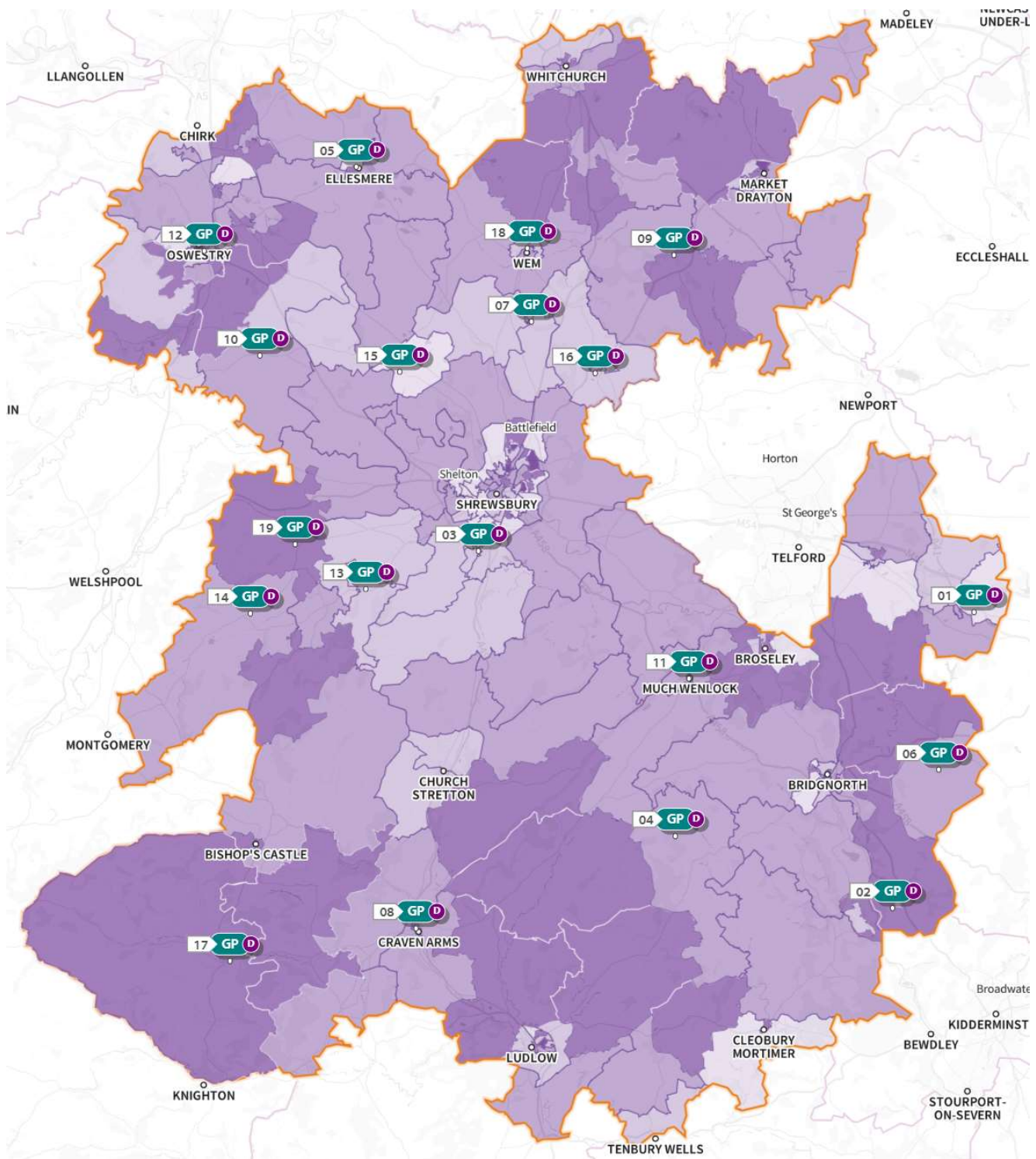


Source: Rural and urban classification, ONS, 2011
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Figure 34:Key for pharmacy maps

Map index	Name	Address	Town
1	Asda Pharmacy	Old Potts Way	Shrewsbury
2	Bicton Heath Pharmacy	Bicton Heath Shopping Centre	Shrewsbury
3	Bishops Castle Pharmacy	The Pharmacy	Bishops Castle
4	Boots	7-9 Pride Hill	Shrewsbury
5	Boots	34 Bull Ring	Ludlow
6	Boots	5-7 Church Street	Oswestry
7	Boots	37 Mytton Oak Road	Shrewsbury
8	Boots	30-31 High Street	Bridgnorth
9	Boots	7 Cheapside	Shifnal
10	Boots	48-50 Cheshire Street	Market Drayton
11	Boots	10-14 Watergate Street	Whitchurch
12	Boots	Meole Brace Retail Park	Shrewsbury
13	Bridgnorth Pharmacy	2 Mill Street	Bridgnorth
14	Brown and Francis	49 Bull Ring	Ludlow
15	Cambrian Pharmacy	Cambrian Medical Centre	Oswestry
16	Cleobury Pharmacy	Cleobury Pharmacy	Cleobury Mortimer
17	Conway Pharmacy	238 Monkmoor Road	Shrewsbury
18	Day Lewis Pharmacy	Oswald Road	Oswestry
19	Day Lewis Pharmacy	The Former Ticket Office	Gobowen
20	Day Lewis Pharmacy	14 English Walls	Oswestry
21	Day-Night Pharmacy Limited	5 Cross Street	Ellesmere
22	Green End Pharmacy	11-13 Green End	Whitchurch
23	Highley Pharmacy	Beulah House	Highley
24	Hillside Pharmacy	18 Sandford Avenue	Church Stretton
25	LloydsPharmacy	116-119 Lower Galderford	Ludlow
26	LloydsPharmacy	Meole Brace Retail Park	Shrewsbury
27	Lunts Healthcare Limited	The Tannery	Shrewsbury
28	Lunts Pharmacies	1-3 Hereford Road	Shrewsbury
29	Lunts Pharmacy	Drovers' House	Craven Arms
30	Murrays Healthcare	Medical Centre	Market Drayton
31	Murrays Healthcare	Northgate Health Centre	Bridgnorth
32	Pontesbury Pharmacy	Main Road	Shrewsbury
33	Radbrook Green Pharmacy	Bank Farm Road	Shrewsbury
34	Rhodes	28 Claremont Hill	Shrewsbury
35	Rhodes TC Chemist	77 High Street	Albrighton
36	Rowlands Pharmacy	Severn Fields Health Centre	Shrewsbury
37	Rowlands Pharmacy	Marsden Medical Practice	Shrewsbury
38	Rowlands Pharmacy	40 Sandford Avenue	Church Stretton
39	Rowlands Pharmacy	11 High Street	Whitchurch
40	Rowlands Pharmacy	7 Lansdowne Road	Shrewsbury
41	Rowlands Pharmacy	80 High Street	Broseley
42	Rowlands Pharmacy	Unit 1	Wem
43	Rowlands Pharmacy	Wem and Prees Med Prac	Wem
44	St Martins Pharmacy	Stans Superstore	Oswestry
45	Tesco Pharmacy	Cattle Market	Shrewsbury
46	Well	101 Mount Pleasant Road	Shrewsbury
47	Wenlock Pharmacy	14 High Street	Much Wenlock

Figure 35: Dispensing GP Practices by Index of Multiple Deprivation local quintile



The colours represent the quintiles:

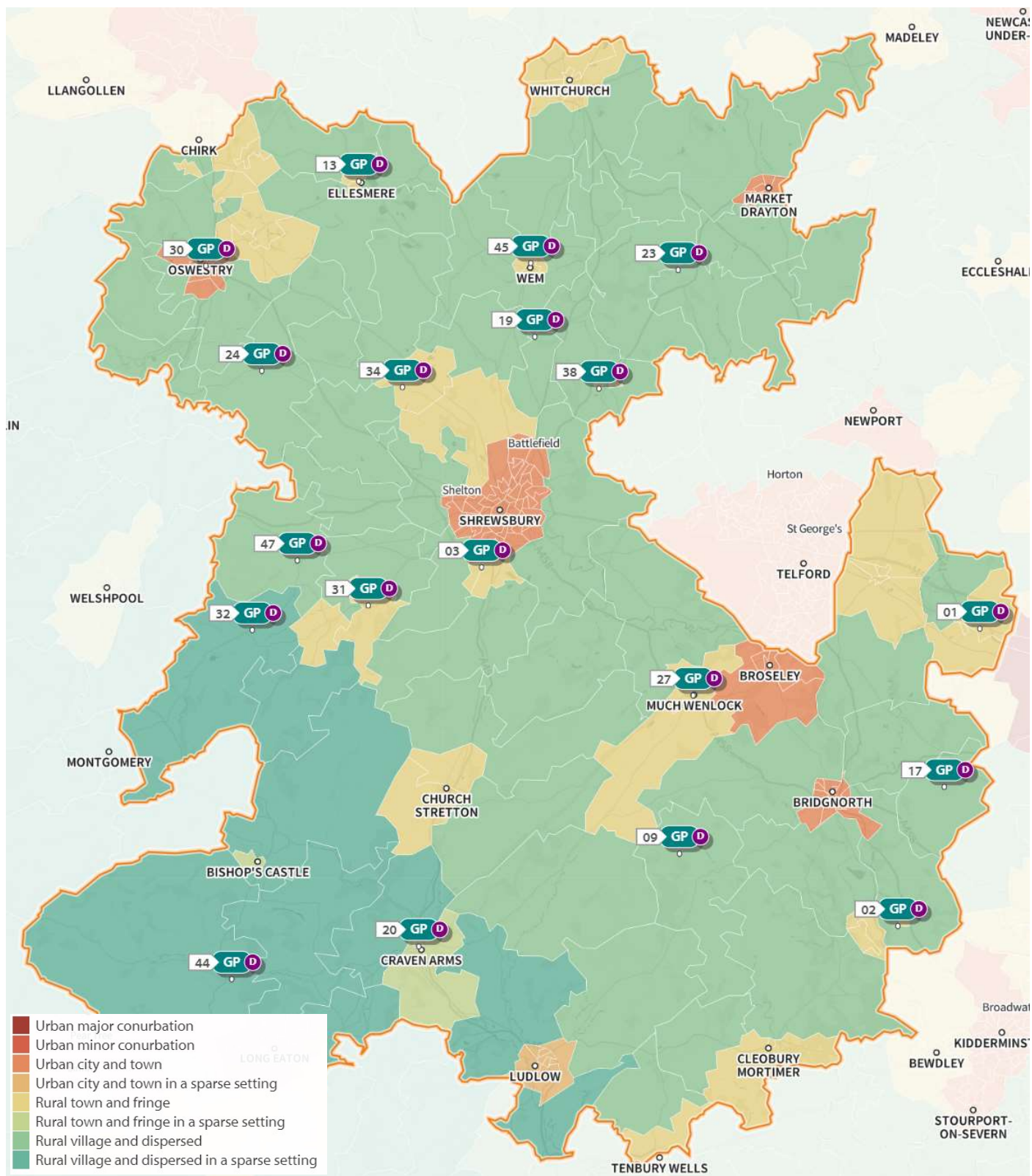
- 33.26 to 92.73: 9 areas
- 21.56 to 33.25: 46 areas
- 14.25 to 21.55: 66 areas
- 8.63 to 14.24: 46 areas
- 0.54 to 8.62: 26 areas

Index of Multiple Deprivation 2019, Ministry of Housing, Communities and Local Government
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Figure 36 – Dispensing GP Practices and deprivation score

Map index	Name	Address	Town	IMD Score of Surrounding LSOA
1	Albrighton Medical Practice	Shaw Lane	Albrighton	4.70
2	Alveley Medical Practice	Village Road	Bridgnorth	22.23
3	Beeches Medical Practice	1 Beeches Road	Shrewsbury	9.94
4	Brown Clee Medical Centre	Ditton Surgery	Bridgnorth	19.38
5	Churchmere Medical Group	Trimpley Street	Ellesmere	7.51
6	Claverley Medical Practice	Spicers Close	Claverley	14.62
7	Clive Medical Practice	20 High Street	Shrewsbury	10.46
8	Craven Arms Medical Practice	20 Shrewsbury Road	Craven Arms	30.82
9	Hodnet Medical Practice	18 Drayton Road	Hodnet	23.74
10	Knockin Medical Centre	Knockin	Oswestry	16.66
11	Much Wenlock & Cressage Medical Practice	Kingsway Lodge	Much Wenlock	15.61
12	Plas Ffynnon Medical Centre	Middleton Road	Oswestry	11.01
13	Pontesbury & Worthen Medical Practice	Hall Bank	Shrewsbury	10.13
14	Pontesbury & Worthen Medical Practice: Worthen Medical Practice	The Village Hall	Shrewsbury	21.32
15	Prescott Surgery	Prescott Fields	Shrewsbury	7.01
16	Shawbury Medical Practice	Poynton Road	Shrewsbury	12.62
17	The Meadows Medical Practice	Turnpike Meadow	Clun	22.24
18	Wem and Prees Medical Practice	New Street	Shrewsbury	10.63
19	Westbury Medical Centre	Vennington Road	Shrewsbury	24.49

Figure 37: Dispensing GP Practices by rural and urban classification



Source: Rural and urban classification, ONS, 2011
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Figure 38: Key for dispensing GP practice maps

Dispensing GP Map Code	Shropshire, Telford and Wrekin ICS GP Dispensing Pharmacy	Practice Population (as of 01 st Jan 2022)
1	Albrighton Medical Practice	8,161
2	Alveley Medical Practice	2,346
3	Beeches Medical Practice	6,695
19	Clive Surgery	4,664
20	Craven Arms Medical Practice	4,045
13	Churchmere Medical Practice (Ellesmere branch only)	20,764
23	Hodnet Medical Practice	3,450
44	Meadows Medical Practice	3,030
24	Knockin Medical Centre	3,797
27	Much Wenlock & Cressage Medical Practice (Cressage Branch only)	8,303
30	Plas Ffynnon Medical Centre	9,265
31 + 32	Pontesbury & Worthen Medical Practice	10,362
34	Prescott Surgery	7,345
38	Shawbury Medical Practice	4,459
45	Wem & Prees Medical Practice (Prees branch only)	12,064
47	Westbury Medical Centre	2,790
19	Brown Clee Medical Practice	3,782
	Total All Dispensing Practices	115,382

Figure 39: Pharmacies per head of population in Shropshire 2022 vs 2022 in England

England (Pharmacies only)	1:4,870
England (Pharmacies + Dispensing GP Practices)	1:4,462
Shropshire (Pharmacies only)	1:6,829
Shropshire (Pharmacies + Dispensing GP Practice sites*)	1:4,863

*Dispensing GP Practice sites = 17 Shropshire, Telford and Wrekin dispensing GP Practices +1 Practices dispenses from two branch sites + 1 Staffordshire GP Dispensing Practice which is on the border between Shropshire and Staffordshire (47 pharmacies + 19 different sites for GP dispensing Practices)

Source: GP Patient Registered Population (CSU Q1 2022-23), ONS for England population 2021 estimate and Pharmaceutical Journal (quoting NHS source)

The number of pharmacies per head of population in Shropshire is nearly a third lower than the national figure.

Financial pressures and viability of pharmacies has led to a reduction in overall supply.

When comparing 2022 to 2017 one can see there's been a slight increase population per pharmacy. This is likely a consequent of a combination of demographic change and financial pressures with a change to the viability of pharmacies leading to pressure on overall supply.

Figure 40: Pharmacies per head of population in Shropshire 2017

England	1:4,990
Shropshire	1:5,823

Source: GP Patient Registration System (Exeter), 2017, NHS Digital

When comparing the ratio of pharmacies between England and Shropshire one can see a significant difference; there are 4,870 people per pharmacy in England compared to 6,829 in Shropshire. However, when adding in dispensing practices the ratios are very similar.

This dependence on dispensing practices is characteristic of largely rural areas with dispersed populations. This is particularly true for Shropshire, which has over 3 times the number of dispensing practices compared to neighbouring Staffordshire, despite its larger population.

Community Pharmacy Contractual Framework and Services

All Shropshire pharmacies have an NHS Pharmaceutical Services Contract with NHS England. The contract consists of three different levels of services: essential, advanced and enhanced.

Essential Services

These are services which pharmacies on the NHS pharmaceutical list must provide as part of the NHS Community Pharmacy Contractual Framework. Whilst distance-selling pharmacy contractors provide Essential services they must not provide these services face- to-face at their premises. Essential services include:

- Dispensing medicines
- Dispensing appliances
- Repeat dispensing
- Disposal of unwanted medicines
- Public Health – promotion of healthy lifestyles
- Signposting
- Support for self-care
- Clinical governance
- Electronic Prescription Service
- Discharge Medicine Service
- Healthy Living Pharmacies

Dispensing medicines and/or appliances

The safe supply of medicines or appliances. Advice is given to the patient about the medicines being dispensed and how to use them. Records are kept of all medicines dispensed and significant advice provided, referrals and interventions made. Both nationally and within Shropshire there has been a growth in the number of monthly items prescribed; on average 518,258 items were prescribed each month in 2021-22 within Shropshire, (ePACT2). Some of the reasons which help to explain why rates have been increasing are shown below:

The size of the population

- The age structure of the population, notably the proportion of the those aged 60 and over, who generally receive more prescriptions than the young
- Improvements in diagnosis, leading to earlier recognition of conditions and earlier treatment with medicines
- Development of new medicines for conditions with limited treatment options
- Development of more medicines to treat common conditions
- Increased prevalence of some long-term conditions, for example, diabetes
- Shifts in prescribing practice in response to national policy, and new guidance and evidence
- Increased prescribing for prevention or reducing risk of serious events, for example use of lipid-lowering drugs to reduce risk of stroke or heart attack

Source: Health and Social Care Information Centre 2014

Repeat dispensing

The management of repeat medication for up to one year, in partnership with the patient and prescriber. The patient will return to the pharmacy for repeat supplies, without first having to visit the GP surgery. Before each supply the pharmacy will ascertain the patient's need for a repeat supply of a particular medicine. It is a great way for the GP practice to stay in control of prescription items and the service specification states that pharmacies must ask if anything has changed since the previous items were issued and do they need everything on the script today. It is suitable for stable patients on regular medication and pharmacies can help identify suitable patients.

Electronic Prescription Service (EPS)

The Electronic Prescription Service allows prescriptions to be sent direct to pharmacies and appliance contractors through IT systems used in GP surgeries. This means that patients do not have to collect a paper repeat prescription from the GP practice but can go straight to the nominated pharmacy or dispensing appliance contractor to pick up their medicines or medical appliances.

Prescriptions for acute items such as antibiotics can also be sent electronically if it is practical to do so. Eventually EPS will remove the need for most paper prescriptions, but the expectation currently is that up to 95% of all prescriptions should be issued electronically where the GP practice has EPS enabled. Patients have to nominate a particular community pharmacy or appliance contractor such that the electronic prescription can be sent to them securely, but this nomination can be changed at any time if a patient consents to do so.

Disposal of unwanted medicines

Pharmacies accept unwanted medicines from individuals. This does not include sharps which have to be returned to GP practices or Health Centres. The medicines are then safely disposed of and NHS England make arrangements for a waste contractor to collect the medicines from pharmacies at regular intervals.

Promotion of healthy lifestyles (public health)

Opportunistic one to one advice is given on healthy lifestyle topics, such as stopping smoking, to certain patient groups who present prescriptions for dispensing. Pharmacies will also get involved in a number of local campaigns every year as directed by NHS England. Campaign examples may include promotion of flu vaccination uptake or advice on increasing physical activity.

In Shropshire campaigns are coordinated by NHS England across the West Midlands region with every pharmacy normally provided with posters and/or leaflets or links on where to access them.

Feedback from pharmacies has generally been good. NHS England is carrying out further work to evaluate the campaigns. Future campaigns should continue to be planned to complement identified local needs.

Signposting patients to other healthcare providers

Pharmacists and staff will refer patients to other healthcare professionals or care providers when appropriate. The service also includes referral on to other sources of help such as local or national patient support groups.

Support for self-care

The provision of advice and support by pharmacy staff to enable people to derive maximum benefit from caring for themselves or their families. The main focus is on self-limiting illness, but support for people with long-term conditions is also a feature of the service.

Clinical governance

Pharmacies must have a system of clinical governance to support the provision of excellent care.

Requirements include:

- Provision of a practice leaflet for patients
- Use of standard operating procedures
- Patient safety incident reporting to the National Reporting and Learning Service
- Conducting clinical audits and patient satisfaction surveys
- Having complaints and whistle-blowing policies
- Acting upon drug alerts and product recalls to minimise patient harm
- Having cleanliness and infection control measures in place

Healthy living pharmacies

The Healthy Living Pharmacy (HLP) framework is aimed at achieving consistent provision of a broad range of health promotion interventions through community pharmacies to meet local need, improving the health and wellbeing of the local population and helping to reduce health inequalities.

Community pharmacy contractors will be required to become an HLP in 2020/21 as agreed in the five-year CCPF; this reflects the priority attached to public health and prevention work.

Electronic Prescription Service

The Electronic Prescription Service (EPS) enables prescriptions to be sent electronically from a prescriber to the pharmacy and then on to the NHSBSA for payment.

At least two thirds of all prescriptions generated in primary care are for patients needing repeat supplies of regular medicines, and since 2005 repeat dispensing has been an Essential Service within the Community Pharmacy Contractual Framework (CPCF).

Discharge Medicines Service

The Discharge Medicines Service (DMS) became a new Essential service within the Community Pharmacy Contractual Framework (CPCF) on 15th February 2021.

This service, which all pharmacy contractors have to provide, was originally trailed in the 5-year CPCF agreement, with a formal announcement regarding the service made by the Secretary of State for Health and Social Care in February 2020.

From 15th February 2021, NHS Trusts were able to refer patients who would benefit from extra guidance around prescribed medicines for provision of the DMS at their community pharmacy. The service has been identified by NHS England's Medicines Safety Improvement Programme to be a significant contributor to the safety of patients at transitions of care, by reducing readmissions to hospital.

Advanced pharmacy services

There are eight advanced services within the NHS Community Pharmacy Contractual Framework (CPCF). Community pharmacies can choose to provide any of these services commissioned by NHS England as long as they meet the requirements set out in the Secretary of State Directions.

A summary of each pharmacy and advanced services they provide can be found in appendix 3.

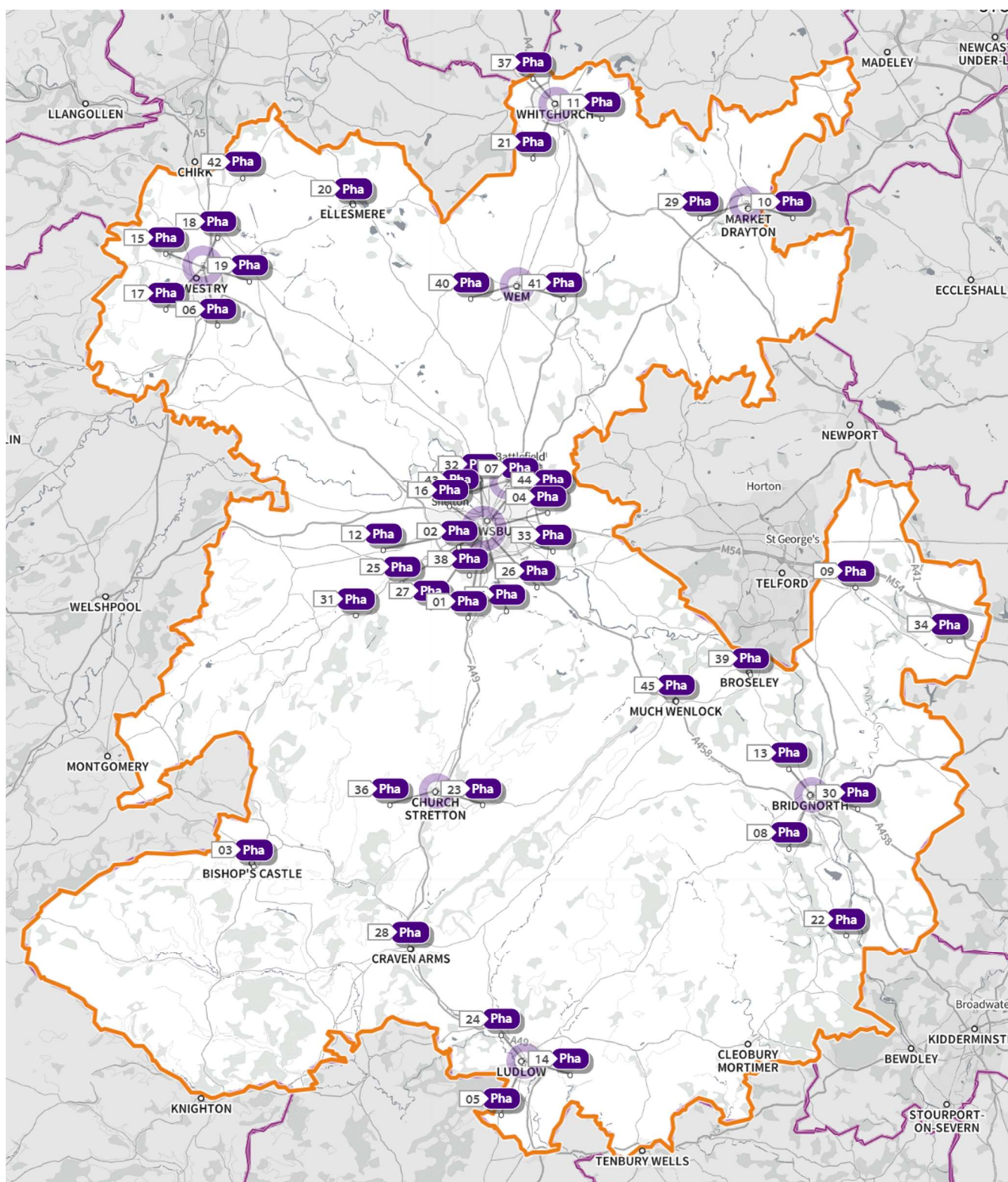
Community Pharmacist Consultation Service (CPCS)

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.

It replaces services offered previously through the Common and Minor Ailment scheme.

Figure 41 – Pharmacies providing CPCS



Source: PNA Community Pharmacy Questionnaire 2022
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Figure 42 – Pharmacies providing CPCS

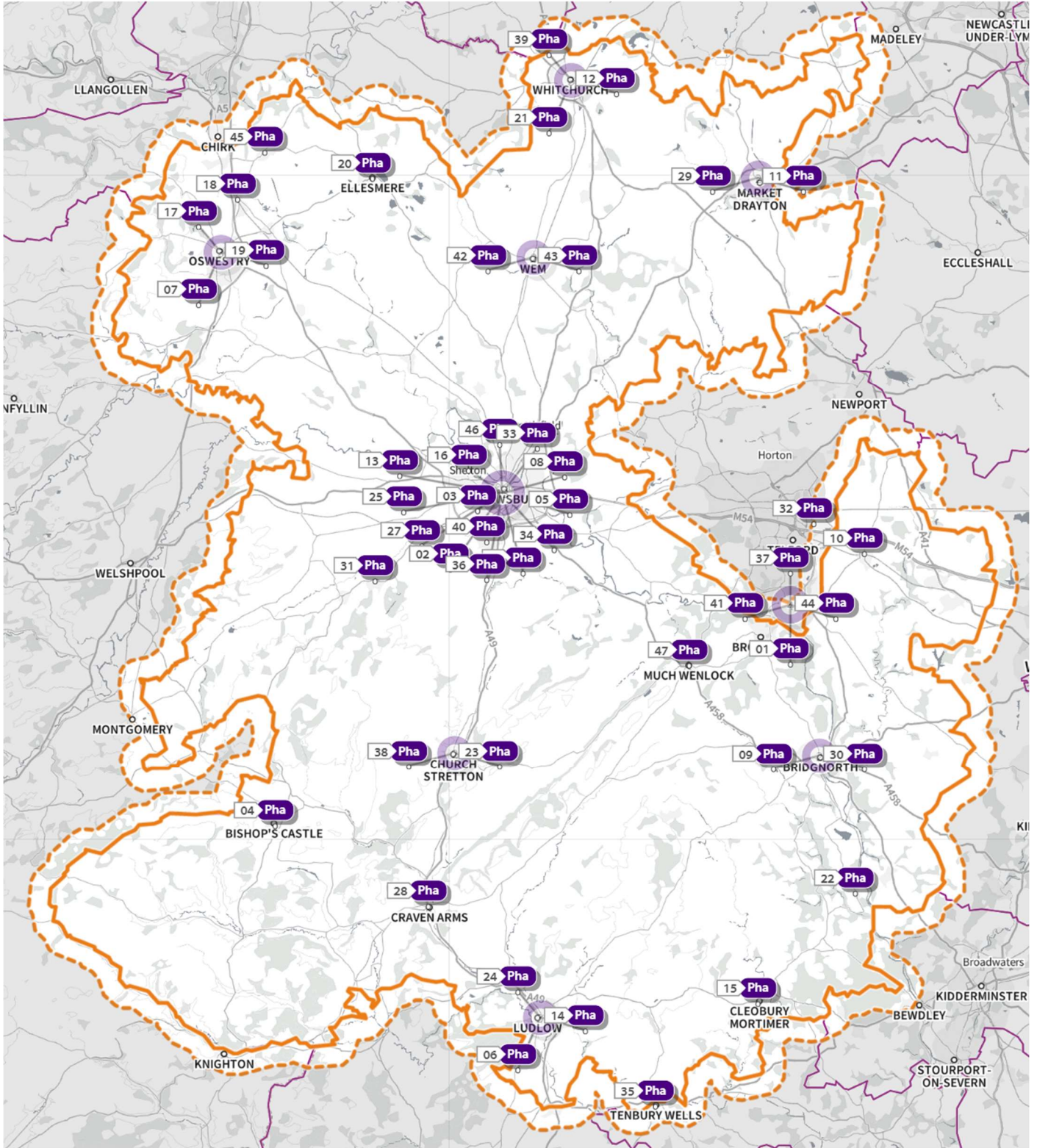
Map index	Name	Address	Town
1	Asda Pharmacy	Old Potts Way	Shrewsbury
2	Bicton Heath Pharmacy	Bicton Heath Shopping Centre	Shrewsbury
3	Bishops Castle Pharmacy	The Pharmacy	Bishops Castle
4	Boots	7-9 Pride Hill	Shrewsbury
5	Boots	34 Bull Ring	Ludlow
6	Boots	5-7 Church Street	Oswestry
7	Boots	37 Mytton Oak Road	Shrewsbury
8	Boots	30-31 High Street	Bridgnorth
9	Boots	7 Cheapside	Shifnal
10	Boots	48-50 Cheshire Street	Market Drayton
11	Boots	10-14 Watergate Street	Whitchurch
12	Boots	Meole Brace Retail Park	Shrewsbury
13	Bridgnorth Pharmacy	2 Mill Street	Bridgnorth
14	Brown and Francis	49 Bull Ring	Ludlow
15	Cambrian Pharmacy	Cambrian Medical Centre	Oswestry
16	Conway Pharmacy	238 Monkmoor Road	Shrewsbury
17	Day Lewis Pharmacy	Oswald Road	Oswestry
18	Day Lewis Pharmacy	The Former Ticket Office	Gobowen
19	Day Lewis Pharmacy	14 English Walls	Oswestry
20	Day-Night Pharmacy Limited	5 Cross Street	Ellesmere
21	Green End Pharmacy	11-13 Green End	Whitchurch
22	Highley Pharmacy	Beulah House	Highley
23	Hillside Pharmacy	18 Sandford Avenue	Church Stretton
24	LloydsPharmacy	116-119 Lower Galderford	Ludlow
25	LloydsPharmacy	Meole Brace Retail Park	Shrewsbury
26	Lunts Healthcare Limited	The Tannery	Shrewsbury
27	Lunts Pharmacies	1-3 Hereford Road	Shrewsbury
28	Lunts Pharmacy	Drovers' House	Craven Arms
29	Murrays Healthcare	Medical Centre	Market Drayton
30	Murrays Healthcare	Northgate Health Centre	Bridgnorth
31	Pontesbury Pharmacy	Main Road	Shrewsbury
32	Radbrook Green Pharmacy	Bank Farm Road	Shrewsbury
33	Rhodes	28 Claremont Hill	Shrewsbury
34	Rhodes TC Chemist	77 High Street	Wolverhampton
35	Rowlands Pharmacy	Marsden Medical Practice	Shrewsbury
36	Rowlands Pharmacy	40 Sandford Avenue	Church Stretton
37	Rowlands Pharmacy	11 High Street	Whitchurch
38	Rowlands Pharmacy	7 Lansdowne Road	Shrewsbury
39	Rowlands Pharmacy	80 High Street	Broseley
40	Rowlands Pharmacy	Unit 1	Wem
41	Rowlands Pharmacy	Wem and Prees Med Prac	Wem
42	St Martins Pharmacy	Stans Superstore	Oswestry
43	Tesco Pharmacy	Cattle Market	Shrewsbury
44	Well	101 Mount Pleasant Road	Shrewsbury
45	Wenlock Pharmacy	14 High Street	Much Wenlock

In addition, **Rowlands Pharmacy (Branch: 1071 – Harlescott, FA94) now offer CPCS** (subsequent to 31st March 2022, the date which this needs assessment reflects provision). Only Cleobury Mortimer Pharmacy have indicated they do not provide or intend to provide this service according to the community pharmacy questionnaire.

Influenza Adult Vaccination Service

This service supports the provision of the national flu vaccination programme between 1st September and 31st March every year and provides an alternative option to general practice. For most healthy people, influenza is usually a self-limiting disease. However, children, older people, pregnant women and those with certain long-term conditions are at increased risk of severe illness if they catch it. The vaccination provides protection against the most prevalent strains of the virus.

Figure 43: Map of pharmacies providing Influenza Adult Vaccination Service



Source: NHSE 2021/22

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Figure 44: Key for map of Provision of Influenza Vaccination Service in Shropshire 2021-22 with activity numbers

Map index	Name	Address	Town	Activity
1	Anstice Pharmacy	7 Anstice Square	Telford	159
2	Asda Pharmacy	Old Potts Way	Shrewsbury	85
3	Bicton Heath Pharmacy	Bicton Heath Shopping Centre	Shrewsbury	344
4	Bishops Castle Pharmacy	The Pharmacy	Bishops Castle	48
5	Boots	7-9 Pride Hill	Shrewsbury	2302
6	Boots	34 Bull Ring	Ludlow	511
7	Boots	5-7 Church Street	Oswestry	1487
8	Boots	37 Mytton Oak Road	Shrewsbury	1136
9	Boots	30-31 High Street	Bridgnorth	966
10	Boots	7 Cheapside	Shifnal	850
11	Boots	48-50 Cheshire Street	Market Drayton	995
12	Boots	10-14 Watergate Street	Whitchurch	776
13	Boots	Meole Brace Retail Park	Shrewsbury	1048
14	Brown and Francis	49 Bull Ring	Ludlow	71
15	Cleobury Pharmacy	Cleobury Pharmacy	Cleobury Mortimer	87
16	Conway Pharmacy	238 Monkmoor Road	Shrewsbury	1843
17	Day Lewis Pharmacy	Oswald Road	Oswestry	221
18	Day Lewis Pharmacy	The Former Ticket Office	Gobowen	373
19	Day Lewis Pharmacy	14 English Walls	Oswestry	1844
20	Day-Night Pharmacy Limited	5 Cross Street	Ellesmere	286
21	Green End Pharmacy	11-13 Green End	Whitchurch	1027
22	Highley Pharmacy	Beulah House	Highley	438
23	Hillside Pharmacy	18 Sandford Avenue	Church Stretton	218
24	LloydsPharmacy	116-119 Lower Galderford	Ludlow	547
25	LloydsPharmacy	Meole Brace Retail Park	Shrewsbury	1038
26	Lunts Healthcare Limited	The Tannery	Shrewsbury	552
27	Lunts Pharmacies	1-3 Hereford Road	Shrewsbury	352
28	Lunts Pharmacy	Drovers' House	Craven Arms	647
29	Murrays Healthcare	Medical Centre	Market Drayton	78
30	Murrays Healthcare	Northgate Health Centre	Bridgnorth	178
31	Pontesbury Pharmacy	Main Road	Shrewsbury	1654
32	Priorslee Pharmacy	The Barn	Telford	111
33	Radbrook Green Pharmacy	Bank Farm Road	Shrewsbury	234
34	Rhodes	28 Claremont Hill	Shrewsbury	719
35	Rowlands Pharmacy	7-9 Teme Street	Tenbury Wells	292
36	Rowlands Pharmacy	Marsden Medical Practice	Shrewsbury	172
37	Rowlands Pharmacy	The Pharmacy	Telford	448
38	Rowlands Pharmacy	40 Sandford Avenue	Church Stretton	146
39	Rowlands Pharmacy	11 High Street	Whitchurch	205
40	Rowlands Pharmacy	7 Lansdowne Road	Shrewsbury	255
41	Rowlands Pharmacy	80 High Street	Broseley	186
42	Rowlands Pharmacy	Unit 1	Wem	159
43	Rowlands Pharmacy	Wem and Prees Med Prac	Wem	293
44	Rowlands Pharmacy	Maythorne Close	Telford	171
45	St Martins Pharmacy	Stans Superstore	Oswestry	436
46	Well	101 Mount Pleasant Road	Shrewsbury	916
47	Wenlock Pharmacy	14 High Street	Much Wenlock	341

Hepatitis C testing service

The Community Pharmacy Hepatitis C Antibody Testing Service was added to the Community Pharmacy Contractual Framework (CPCF) in 2020, commencing on 1st September. The introduction of this new Advanced Service was originally trailed in the 5-year CPCF agreement, but its planned introduction in April 2020 was delayed by five months because of the COVID-19 pandemic.

The service is 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 Hep C antibodies, they will be referred for a confirmatory test and treatment, where appropriate.

The overall aim of the service is to increase levels of testing for HCV amongst PWIDs who are not engaged in community drug and alcohol treatment services to:

- increase the number of diagnoses of HCV infection;
- permit effective interventions to lessen the burden of illness to the individual;
- decrease long-term costs of treatment; and
- decrease onward transmission of HCV.

As the national Hepatitis C Programme is an elimination exercise, the service will be time limited. In the first instance ran until 31st March 2022, but in March 2022, NHS England and NHS Improvement, the Department of Health and Social Care and PSNC agreed that the service should continue to be commissioned until 31st March 2023.

Hypertension case-finding service

Hypertension case-finding was commissioned as an Advanced service from 1st October 2021.

The 5-year Community Pharmacy Contractual Framework (CPCF) agreement reached in July 2019 included a plan to pilot case finding for undiagnosed cardiovascular disease.

In 2020, NHS England 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 NHS England proposed the commissioning of a new Hypertension case-finding service, as an Advanced service, in the Year 3 negotiations.

New Medicine Service (NMS)

This service is designed to improve patients' understanding of a newly prescribed medicine for a long-term condition and help them get the most from the medicine. Research has shown that after ten days, two thirds of patients prescribed a new medicine reported problems including side effects, difficulties taking the medicine and a need for further information. The successful implementation of NMS is designed to:

- improve patient adherence which will generally lead to better health outcomes
- increase patient engagement with their condition and medicines, supporting patients in making decisions about their treatment and self-management
- reduce medicines wastage
- reduce hospital admissions due to adverse events from medicines

The pharmacist will provide the patient with information on their new medicine and how to use it when it is first dispensed. The pharmacist and patient will then agree to meet or speak by telephone in around a fortnight and a final consultation around 21-28 days after starting the medicine. Any issues or concerns identified can therefore be resolved.

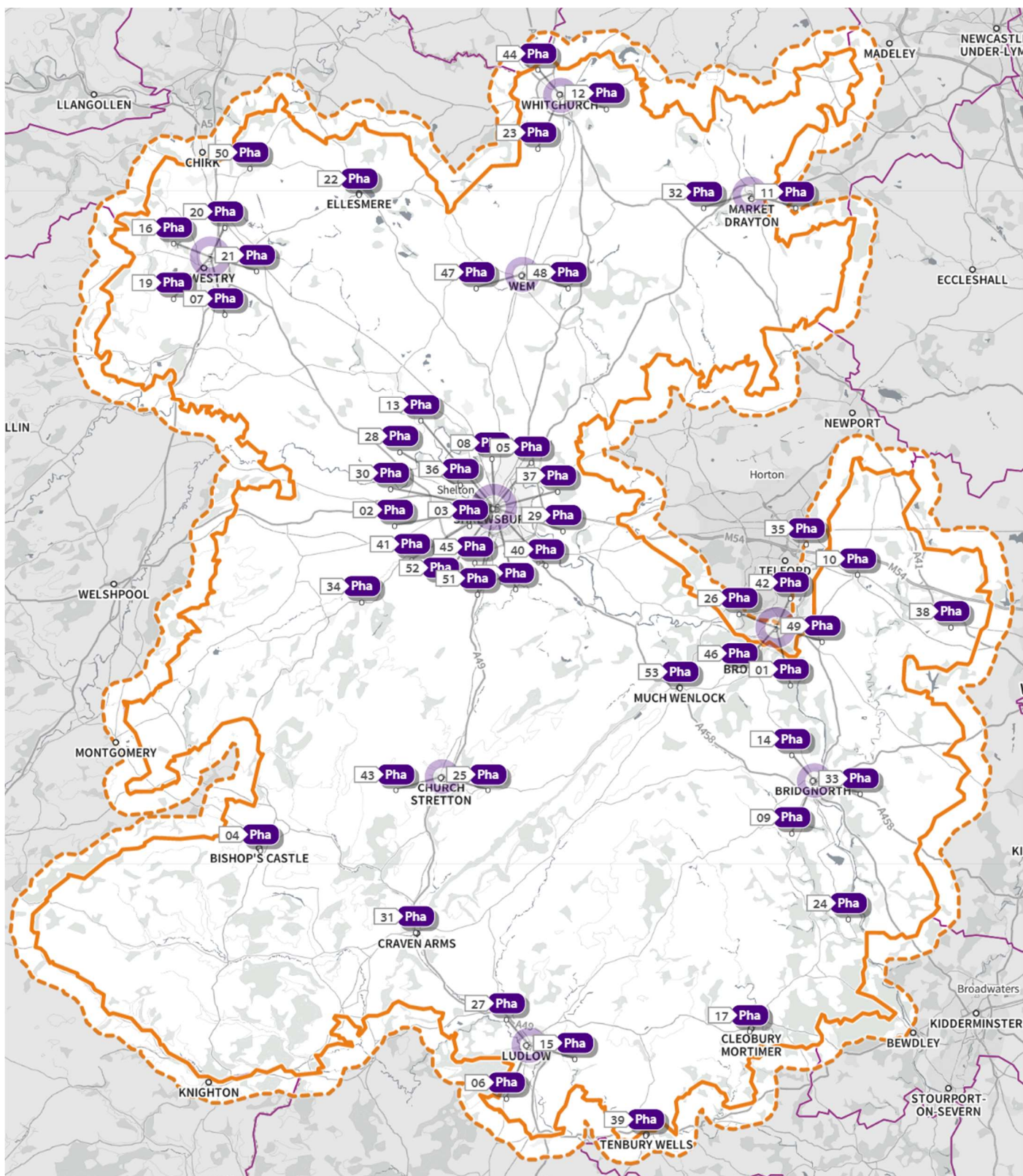
Figure 45: New Medicine Service activity 2020-21

Area	Number of pharmacies	Number of NMS	Average number per pharmacy
Shropshire	47	17,030	362
England*	11,233**	2,088,176	186

* England = 2021-22, <https://psnc.org.uk/>

** Using Q1 number of contractors

Figure 46 Map of Provision of New Medicine Service in Shropshire 2021-22



Source:

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Figure 47: Key for map of Provision of New Medicine Service in Shropshire 2021-22

Map index	Name	Address	Town
1	Anstice Pharmacy	7 Anstice Square	Telford
2	Asda Pharmacy	Old Potts Way	Shrewsbury
3	Bicton Heath Pharmacy	Bicton Heath Shopping Centre	Shrewsbury
4	Bishops Castle Pharmacy	The Pharmacy	Bishops Castle
5	Boots	7-9 Pride Hill	Shrewsbury
6	Boots	34 Bull Ring	Ludlow
7	Boots	5-7 Church Street	Oswestry
8	Boots	37 Mytton Oak Road	Shrewsbury
9	Boots	30-31 High Street	Bridgnorth
10	Boots	7 Cheapside	Shifnal
11	Boots	48-50 Cheshire Street	Market Drayton
12	Boots	10-14 Watergate Street	Whitchurch
13	Boots	Meole Brace Retail Park	Shrewsbury
14	Bridgnorth Pharmacy	2 Mill Street	Bridgnorth
15	Brown and Francis	49 Bull Ring	Ludlow
16	Cambrian Pharmacy	Cambrian Medical Centre	Oswestry
17	Cleobury Pharmacy	Cleobury Pharmacy	Cleobury Mortimer
18	Conway Pharmacy	238 Monkmoor Road	Shrewsbury
19	Day Lewis Pharmacy	Oswald Road	Oswestry
20	Day Lewis Pharmacy	The Former Ticket Office	Gobowen
21	Day Lewis Pharmacy	14 English Walls	Oswestry
22	Day-Night Pharmacy Limited	5 Cross Street	Ellesmere
23	Green End Pharmacy	11-13 Green End	Whitchurch
24	Highley Pharmacy	Beulah House	Highley
25	Hillside Pharmacy	18 Sandford Avenue	Church Stretton
26	Ironbridge Pharmacy	The Square	Telford
27	LloydsPharmacy	116-119 Lower Galderford	Ludlow
28	LloydsPharmacy	Meole Brace Retail Park	Shrewsbury
29	Lunts Healthcare Limited	The Tannery	Shrewsbury
30	Lunts Pharmacies	1-3 Hereford Road	Shrewsbury
31	Lunts Pharmacy	Drovers' House	Craven Arms
32	Murrays Healthcare	Medical Centre	Market Drayton
33	Murrays Healthcare	Northgate Health Centre	Bridgnorth
34	Pontesbury Pharmacy	Main Road	Shrewsbury
35	Priorslee Pharmacy	The Barn	Telford
36	Radbrook Green Pharmacy	Bank Farm Road	Shrewsbury
37	Rhodes	28 Claremont Hill	Shrewsbury
38	Rhodes TC Chemist	77 High Street	Wolverhampton
39	Rowlands Pharmacy	7-9 Teme Street	Tenbury Wells
40	Rowlands Pharmacy	Severn Fields Health Centre	Shrewsbury
41	Rowlands Pharmacy	Marsden Medical Practice	Shrewsbury
42	Rowlands Pharmacy	The Pharmacy	Telford
43	Rowlands Pharmacy	40 Sandford Avenue	Church Stretton
44	Rowlands Pharmacy	11 High Street	Whitchurch
45	Rowlands Pharmacy	7 Lansdowne Road	Shrewsbury
46	Rowlands Pharmacy	80 High Street	Broseley
47	Rowlands Pharmacy	Unit 1	Wem
48	Rowlands Pharmacy	Wem and Prees Med Prac	Wem
49	Rowlands Pharmacy	Maythorne Close	Telford
50	St Martins Pharmacy	Stans Superstore	Oswestry
51	Tesco Pharmacy	Cattle Market	Shrewsbury
52	Well	101 Mount Pleasant Road	Shrewsbury
53	Wenlock Pharmacy	14 High Street	Much Wenlock

Smoking Cessation Service

Smoking Cessation Service (SCS) which was commissioned as an Advanced service from 10th March 2022.

In July 2019, PSNC, NHS England and the Department of Health and Social Care (DHSC) agreed a five-year deal for community pharmacies, which included piloting a service to take stop smoking referrals from secondary care and then if successful, in Year 3 (2021/22) to commission such a service nationally.

Appliance Use Review (AUR) Service

Appliance Use Review (AUR) was the second Advanced Service to be introduced into the NHS Community Pharmacy Contractual Framework (CPCF).

This service aims to help patients better understand and use their prescribed appliances (for example, stoma appliances) by establishing the way the patient uses the appliance and the patient's experience of such use. The review allows identification, discussion and assistance in the resolution of poor or ineffective use of the appliance by the patient. Advice is provided to patients on the safe and appropriate storage of the appliance and proper disposal of the appliances that are used or unwanted. The service is conducted in a private consultation area or in the patient's home.

There were no AUR's completed in Apr-21 to Dec-21 in Shropshire pharmacies.

Stoma Appliance Customisation (SAC) Service

Stoma Appliance Customisation (SAC) is the third Advanced Service to be introduced into the English Community Pharmacy Contractual Framework (CPCF). This service involves the customisation of a quantity of more than one stoma appliance, based on the patient's measurements or a template. The aim of the service is to ensure proper use and comfortable fitting of the stoma appliance and to improve the duration of usage, thereby reducing waste.

There were 196 SAC's completed in Apr-21 to Dec-21 in Shropshire pharmacies

Locally commissioned (enhanced) services

Local commissioners (for example, NHSE North Midlands, Shropshire Council and Shropshire, Telford and Wrekin ICS) can commission additional services through service level agreements. These services are commissioned to reflect the needs of the area. Services that are commissioned in Shropshire are shown in Figure 47.

Figure 48: Summary of provision of locally commissioned services in Shropshire (2022)

Locally commissioned service	Commissioner	Number of Pharmacies providing	Percentage of pharmacies providing (%)
Emergency Hormonal Contraception	Local Authority	23	49%
Needle and Syringe Exchange	Local Authority	16	34%
Supervised consumption	Local Authority	35	74%
Sexual Health Services: Issue of treatment for Chlamydia	Local Authority	27	57%
Sexual Health Services: Issue of Chlamydia/Gonorrhoea Smartkits	Local Authority	29	62%
Emergency Supply	NHS England	29	62%
Condom Distribution Scheme	Local Authority	30	64%

In addition, pilots are being undertaken for:

Joint Pain in Pharmacy (JPiP)

This involves the undertaking of free training and delivering support to patients for self-management of joint pain. This community pharmacy service offers specific healthy lives interventions to patients aged 45 years and over who have joint pain affecting the hands, hips, knees or feet. The aims of the service are to help prevent worsening health for people with long-term health conditions affecting the joints, and to reduce the number and intensity of costly interventions in urgent planned or specialist care.

Community Pharmacy AF Screening (Telford & Wrekin and Shropshire Areas)

This pilot scheme will screen for atrial fibrillation (AF) in a targeted population of patients registered with a GP practice in Shropshire & Telford. This scheme is available to patients who are registered with a GP practice in either Telford or Shropshire only.

The overall aim of the scheme is to screen over 65 year olds for atrial fibrillation. The service aims to target those most at risk, i.e., anyone aged 65 and over with:

- coronary heart disease (angina, previous myocardial infarction, coronary artery bypass graft/stent)
- diabetes
- hypertension
- heart failure
- stroke/transient ischemic attack
- peripheral arterial disease

Local Authority Public Health

The Local Authority currently commissions the following enhanced services across Shropshire

- Supervised consumption
- Emergency Hormonal Contraception
- Needle and syringe exchange schemes
- Condom Distribution Scheme
- Sexual Health Services: Issue of treatment for Chlamydia
- Sexual Health Services: Issue of Chlamydia/Gonorrhoea Smartkits
- Healthy start vitamins

Supervised consumption

This service requires an accredited pharmacist to supervise the consumption of prescribed medicines at the point of dispensing. The Pharmacist offers a client focused non-judgmental, confidential service, providing support and advice to the patient, including referral to primary care or specialist centres where appropriate. Supervision of medicines includes methadone and other medicines used for the management of opiate dependence. Community pharmacists link in with existing local networks for substance misuse services where necessary. All community pharmacies in Shropshire offer this service, (Source: PharmOutcomes website).

Registrations

There were 147 registrations of clients to receive substitute prescribing of either methadone or buprenorphine at 32 different pharmacies. Table 13 shows a breakdown of client registrations by pharmacy.

Treatment Activity

There was a total of 1,913 treatments of methadone or buprenorphine given out by pharmacies across Shropshire between 01 March 2022 and 31 March 2022. Table 14 shows a breakdown of the treatment activity by pharmacy. Tracking has been using PharmOutcomes.

Data for the time period 01 April 2017 to 30 September 2017 shows activity for the pharmacy-based service in Shropshire for substitute prescribing of Methadone and Buprenorphine 1,442 treatments.

Figure 49 Number of Client Registrations for Substitute Prescribing per Pharmacy in Shropshire 01 April 2021 to 31 March 2022

Provider	Number of People
Lunts Pharmacies; Tannery	40
Bridgnorth Pharmacy Mill Street	12
Day Lewis PLC Oswestry, Oswald Road	8
Well Shrewsbury - Mount Pleasant Road	8
Bicton Heath Pharmacy	6
Boots UK Ltd Oswestry Church St	6
Your Local Boots Pharmacy Shrewsbury	6
Boots UK Ltd Bridgnorth High St	5
Boots UK Ltd Market Drayton Cheshire St	5
Rowlands Pharmacy Whitchurch	5
Lunts Pharmacy Hereford Rd	<5
Rhodes Shrewsbury	<5
Boots UK Ltd Ludlow Bull Ring	<5
Day Lewis PLC Oswestry	<5
LloydsPharmacy Ludlow	<5

Provider	Number of People
LloydsPharmacy in Sainsburys Shrewsbury	<5
Rowlands Pharmacy Sutton Farm	<5
Cleobury Mortimer Pharmacy	<5
Conway Pharmacy	<5
Day-night Pharmacy Ltd	<5
Green End Pharmacy	<5
Lunts Pharmacy Craven Arms	<5
Rowlands Pharmacy Church Stretton	<5
Rowlands Pharmacy Wem	<5
Your Local Boots Pharmacy Shifnal Cheapside	<5
Asda Shrewsbury	<5
Boots UK Ltd Shrewsbury Pride Hill	<5
Highley Pharmacy	<5
Pontesbury Pharmacy	<5
Rhodes TA Ltd	<5
St Martins Pharmacy; Stans Superstore, Overton Road	<5
Taylor's Chemists Radbrook Green	<5

Source: Shropshire substitute prescribing activity data covering 01 March 2022 to 31 April 2022 extracted from PharmOutcomes reports July 2022, Shropshire Public Health.

Figure 50 Number of Treatments of Buprenorphine or Methadone given out per Pharmacy in Shropshire from 01 April 2021 to 31 March 2022

Provider	Number of Interactions
Lunts Pharmacies; Tannery	396
Bridgnorth Pharmacy; Mill Street	149
Rowlands Pharmacy; Whitchurch	113
Well; Shrewsbury - Mount Pleasant Road	108
Day Lewis PLC Oswestry, Oswald Road	95
Your Local Boots Pharmacy; Shrewsbury Mytton	93
Boots UK Ltd Market Drayton Cheshire St	84
Boots UK Ltd Ludlow Bull Ring)	82
LloydsPharmacy in Sainsburys; Shrewsbury	63
Boots UK Ltd; Oswestry Church St	60
Rowlands Pharmacy Church Stretton	58
Bicton Heath Pharmacy	55
Day Lewis PLC Oswestry	55
Your Local Boots Pharmacy; Shifnal	50
Boots UK Ltd Bridgnorth High St	48
Green End Pharmacy	42
LloydsPharmacy Ludlow	42
Boots UK Ltd Shrewsbury Pride Hill	36
Rowlands Pharmacy; Sutton Farm	33

Provider	Number of Interactions
Cleobury Mortimer Pharmacy	26
Lunts Pharmacy; Craven Arms	26
Rhodes Shrewsbury	24
Rowlands Pharmacy; Wem	24
Boots UK Ltd Shrewsbury Meole Brace	23
Day-night Pharmacy Ltd Ellesmere	23
Highley Pharmacy	22
Pontesbury Pharmacy	22
Conway Pharmacy	14
Lunts Pharmacy; Hereford Rd	14
Wenlock Pharmacy	11
Rhodes TA Ltd	9
PCT Healthcare Ltd t/a Murrays Healthcare; Market Drayton	<5
Rowlands Pharmacy, Wem	<5
Asda Shrewsbury	<5
Taylor's Chemists Radbrook Green	<5

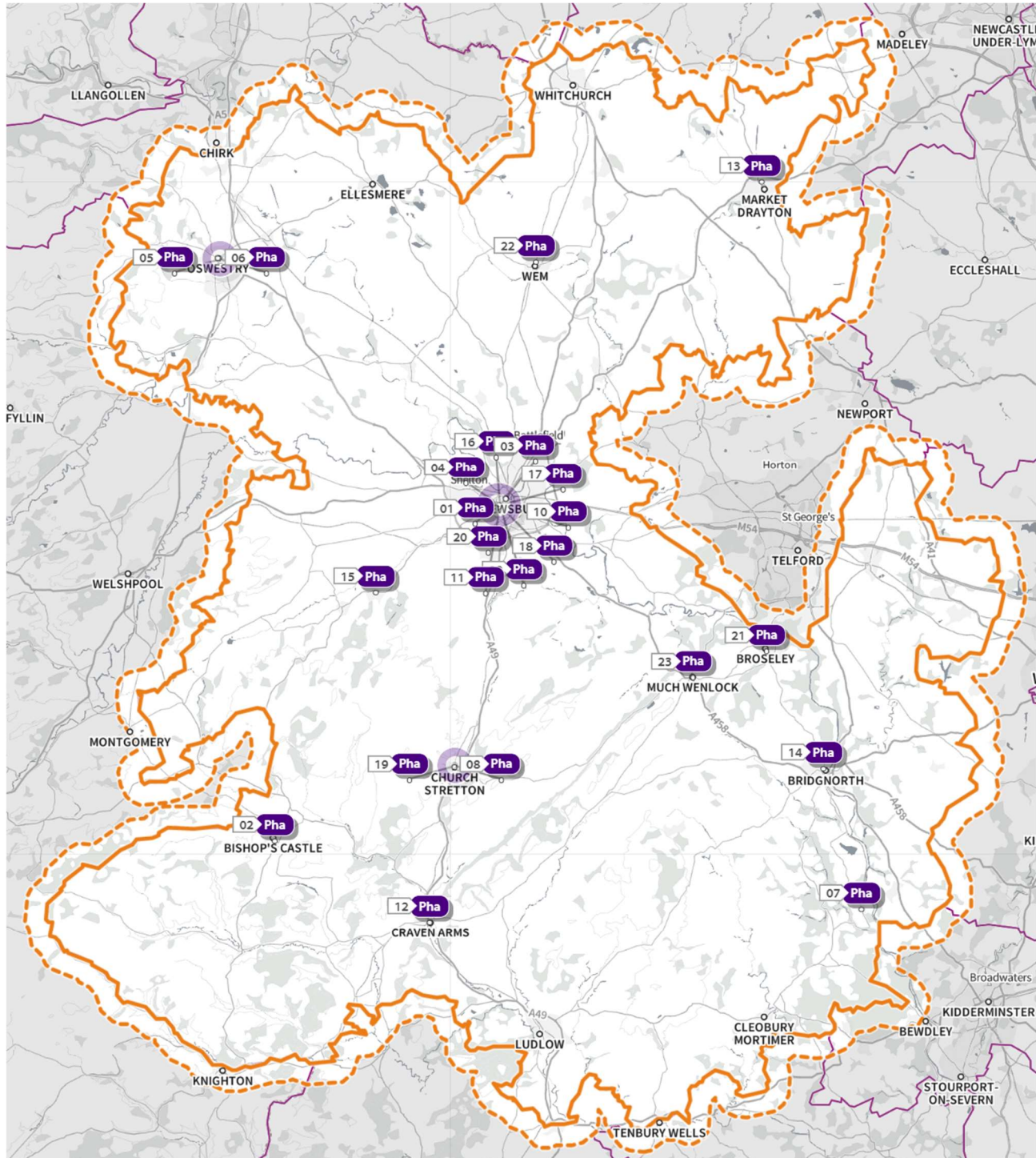
Source: Shropshire substitute prescribing activity data covering 01 April 2021 to 31 March 2022 extracted from PharmOutcomes reports July 2022, Shropshire Public Health.

Emergency Hormonal Contraception

Emergency Hormonal Contraception (EHC) is provided by accredited community pharmacists, free of charge and without prescription, under a 'patient group direction'. The service is available to young women up to the age of 25 years, from 21 community pharmacies in Shropshire.

Shropshire has a lower under 18 conception rates than England as a whole. For 2020-21, England was 12.2 conceptions per 1,000 women aged 15-17. Whilst Shropshire was 10.0 conceptions per 1,000 women aged 15-17. (ONS 2021 quarterly report)

Figure 51 Pharmacies providing EHC and ward based under 18 conception rates



Source: Under 18 conceptions data by ward, ChiMat, PHE

Figure 52 Emergency Hormonal Contraception by pharmacy in Shropshire

Map index	Name	Address	Town	Interactions
1	ASDA	Old Potts Way	Shrewsbury	<5
2	Bicton Heath Pharmacy	Bicton Heath Shopping Centre	Shrewsbury	25
3	Cleobury Pharmacy	Vaughan Rd	Cleobury Mortimer	9
4	Conway Pharmacy	238 Monkmoor Road	Shrewsbury	<5
5	Day Lewis Pharmacy	Oswald Road	Oswestry	<5
6	Day Lewis Pharmacy	14 English Walls	Oswestry	56
7	Highley Pharmacy	Beulah House	Highley	13
8	Hillside Pharmacy	18 Sandford Avenue	Church Stretton	15
9	LloydsPharmacy	Meole Brace Retail Park	Shrewsbury	149
10	Lunts Healthcare Limited	The Tannery	Shrewsbury	80
11	Lunts Pharmacies	1-3 Hereford Road	Shrewsbury	23
12	Lunts Pharmacy	Drovers' House	Craven Arms	7
13	Murrays Healthcare	Medical Centre	Market Drayton	6
14	Pontesbury Pharmacy	Main Road	Shrewsbury	14
15	Radbrook Green Pharmacy	Bank Farm Road	Shrewsbury	20
16	Rhodes	28 Claremont Hill	Shrewsbury	129
17	Rowlands Pharmacy	Sutton Rd	Shrewsbury	19
18	Rowlands Pharmacy	40 Sandford Avenue	Church Stretton	6
19	Rowlands Pharmacy	7 Lansdowne Road	Shrewsbury	24
20	Rowlands Pharmacy	High St	Broseley	10
21	Rowlands Pharmacy	Wem and Prees Med Prac	Wem	21
22	Wenlock Pharmacy	14 High Street	Much Wenlock	12

Needle Exchange

The following is a summary of the activity data for the pharmacies-based needle exchange programme in Shropshire and covers the year between the dates 01 April 2021 and 31 March 2022.

Beginning from 01 October 2016 activity data has been collected using PharmOutcomes which is a web-based reporting platform for community pharmacies. On 31st March 2022, 25 pharmacies in Shropshire had signed up to provide Needle Exchange Packs to injecting drug users. A list of the active providers (60%) is shown in Table 16.

Registrations

In order to receive the different packs containing needles and other injecting drug paraphernalia, clients are asked to first register at a pharmacy. They are then given a card which they can present at any pharmacy in Shropshire which participates in the needle exchange programme and receive further packs. The idea is that a client only has to register once. For the year from 01 March 2021 to 31 March 2022, there were 127 registrations of clients to receive Needle Exchange Packs from 15 different pharmacies in Shropshire. Table 16 shows a breakdown of client registrations by pharmacy.

Activity Data

Needle Exchange Pack Activity

A total of 4,680 needle exchange packs were given out by pharmacies across Shropshire for the period 01 April 2021 to 31 March 2022 (see Table 17). The last period of recorded activity was 2016/17 when a total of 5,356 packs were given out in Shropshire.

Figure 53 Number of Client Registrations for Pharmacy-based Needle Exchange Programme per Pharmacy in Shropshire 01 April 2021 to 31st March 2022

Provider	Number of Interactions
Boots UK Ltd; Oswestry Church St	44
Boots UK Ltd; Shrewsbury Pride Hill	39
LloydsPharmacy; Ludlow	7
PCT Healthcare Ltd t/a Murrays Healthcare Bridgnorth	6
Day Lewis PLC Oswestry, Oswald Road	5
Day-night Pharmacy Ltd Ellesmere	5
Rowlands Pharmacy Whitchurch	5
Cleobury Mortimer Pharmacy; Cleobury Mortimer	<5
Day Lewis PLC Oswestry	<5
Rhodes TA Ltd; Albrighton	<5
Lunts Pharmacy Hereford Rd, Shrewsbury	<5
PCT Healthcare Ltd t/a Murrays Healthcare, Market Drayton	<5
Boots UK Ltd Market Drayton Cheshire St	<5
Lunts Pharmacies; Tannery	<5
Lunts Pharmacy; Craven Arms	<5

Source: Shropshire pharmacy-based needle exchange activity data covering 01 March 2021 to 31 March 2022 extracted from PharmOutcomes reports July 2022, Shropshire Public Health.

Figure 54 Number of Provisions or Personal Interactions of Needle Exchange Packs per Pharmacy in Shropshire from 01 April 2021 to 31 March 2022

Provider	Number of Interactions
Boots UK Ltd Shrewsbury Pride Hill	1923
Boots UK Ltd Oswestry Church St	683
Lunts Pharmacies; Tannery	529
Rowlands Pharmacy; Whitchurch	288
Boots UK Ltd Market Drayton Cheshire St	286
Day Lewis PLC Oswestry, Oswald Road	241
Day-night Pharmacy Ltd Ellesmere	181
LloydsPharmacy Ludlow	176
Rhodes TA Ltd	158
Day Lewis PLC Oswestry	63
Cleobury Mortimer Pharmacy	41
PCT Healthcare Ltd t/a Murrays Healthcare Market Drayton	33
PCT Healthcare Ltd t/a Murrays Healthcare Bridgnorth	27
Lunts Pharmacy Craven Arms	25
Boots UK Ltd Whitchurch	15
Lunts Pharmacy Hereford Rd	11

Source: Shropshire pharmacy-based needle exchange activity data covering 01 April 2021 to 31 March 2022 extracted from PharmOutcomes reports July 2022, Shropshire Public Health.

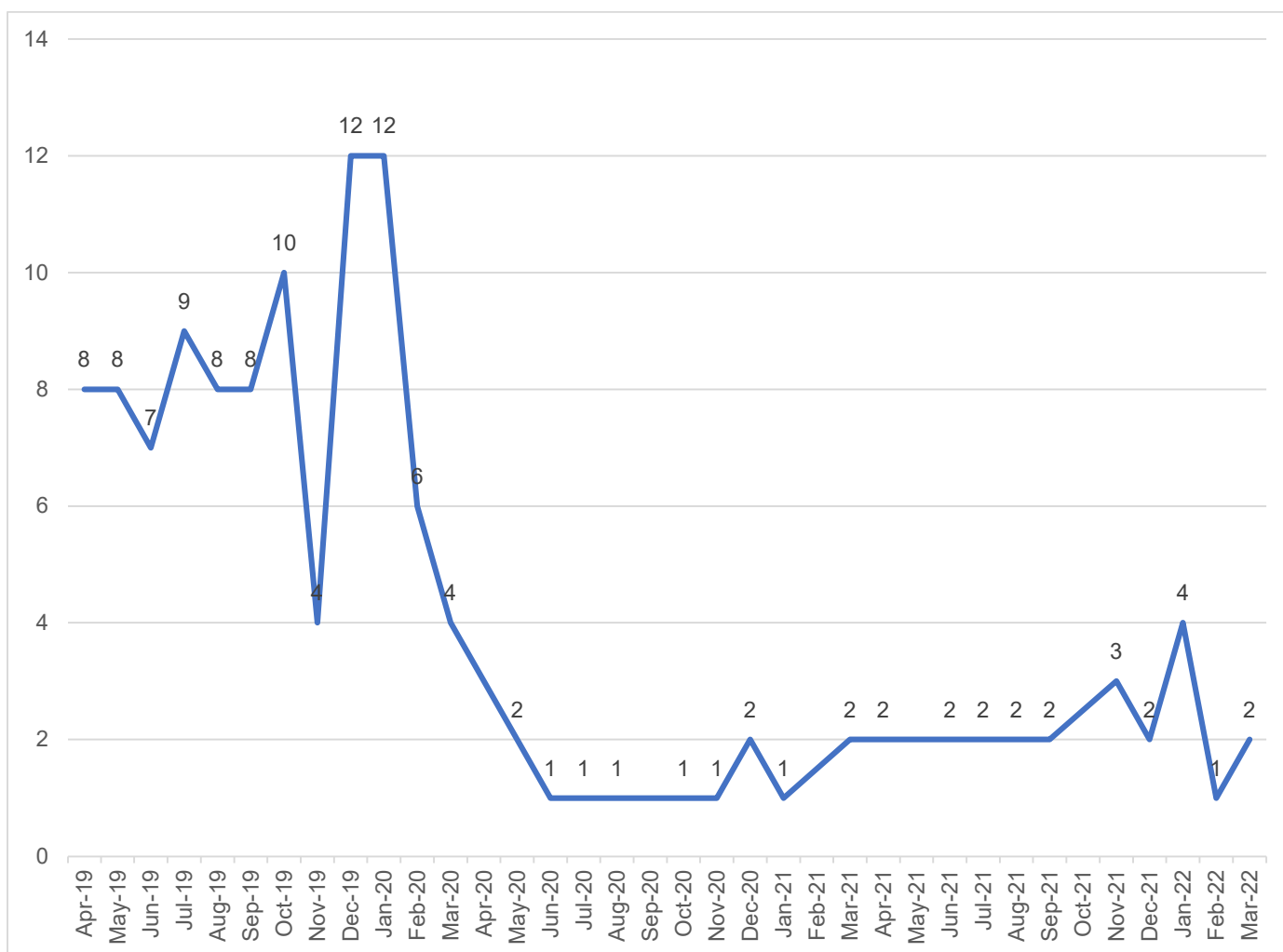
Condom Distribution Scheme

The Shropshire Condom Distribution Scheme (CDS) offers free condoms to young people from age 13 to 19, and in some services up to 25 years. To obtain a C (Condom) card, young people access a health or other trained professional, who following a short sexual health consultation, who will then issue them with an age-related card with an expiry date. Under 16's are assessed under Fraser Guidelines and safeguarding is an integral part of the registration process for all. C-card holders can then obtain free condoms from a variety of places including GP Practices, pharmacies or their place of education if the scheme is offered on site. Once the card expires, the young person needs to re-access a health or other trained professional to have it re-validated.

Pharmacies are an integral and essential part of the operation of CDS, and participate in either one of or both ways:

- **Distribution outlet** – 16 pharmacies located over Shropshire are part of the Distribution outlets. This means a young person aged 24 and under, who has signed up for a C-card, can collect a bag of pre-packed condoms relating to the star rating on their card. This is an over-the-counter transaction.
- **Provision of a C-card with Emergency Hormonal Contraception (EHC)** – Accredited pharmacists offer free registration and distribution of condoms in the local Condom Distribution Scheme (CDS) to women accessing Emergency Contraception aged up to 25 years. This is ensuring instant access to free contraception following an episode of unprotected sex.

Figure 55 Condom Distribution Scheme activity 01 April 2019 – 31 March 2022 – Number of interactions by month/year



Source: PharmOutcomes, Condom Distribution Scheme activity report 01 April 2019 to 31 March 2022, accessed July 2022

Figure 56a Condom Distribution Scheme activity 01 April 2019 – 31 March 2022 – Active Providers

Provider	Number of Interactions
Rhodes Shrewsbury	53
Rowlands Pharmacy (Wem)	19
Conway Pharmacy	14
Taylor's Chemists (Radbrook Green)	12
MSN Healthcare Ltd. T/A Severn Pharmacy (Riverside Shopping Centre) -	8
Lunts Pharmacies (Tannery)	5
PCT Healthcare Ltd t/a Murrays Healthcare (Bridgnorth)	<5
Rowlands Pharmacy (Bayston Hill)	<5
Day Lewis PLC (Oswestry, Oswald Road)	<5
Pontesbury Pharmacy	<5
Lunts Pharmacy (Hereford Rd)	<5
Lloyds Pharmacy (Ludlow)	<5
Lunts Pharmacy (Craven Arms) -	<5
PCT Healthcare Ltd t/a Murrays Healthcare Market Drayton	<5

Source: PharmOutcomes, Condom Distribution Scheme activity report 01 April 2019 to 31 March 2022, accessed July 2022

Table 18 Pharmacies in Shropshire taking part in the Condom Distribution Scheme April 2022

Name of Company/Organisation awarded to	Branch Address
Bicton Heath Pharmacy (Avicenna Partner)	Unit 2 Bicton Heath Shopping Centre Welshpool Road Bicton Heath Shrewsbury SY3 5AD
Bishops Castle (Avicenna Partner)	The Pharmacy, Church Street, Bishops Castle, Shropshire SY9 5AE
Cleobury Pharmacy (Avicenna Partner)	Off Vaughan Road, Cleobury Mortimer, Kidderminster DY1 48BB
Radbrook Green Pharmacy (Avicenna Partner)	Bank Farm Road, Radbrook, Shrewsbury SY3 6DU
Conway Pharmacy	238 Monkmoor Road, Shrewsbury SY2 5SR
Day Lewis Pharmacy	The Former Ticket Office, the Cross, Gobowen Oswestry SY11 3JS
Day Lewis Pharmacy	Pharmacy at Caxton, Oswald Rd, Oswestry SY11 1RD
Day Lewis Pharmacy	Old Chapel Pharmacy 14 English Walls Oswestry, Shropshire SY11 2PA
Lloyds Pharmacy Limited, Ludlow	116-119 Lower Galderford, Ludlow, Shropshire, SY8 1RU
Lunts Pharmacies Ltd (Craven Arms)	Drovers House, The Auction Yard, Craven Arms SY7 9BZ
Lunts Pharmacies Ltd (Hereford Road, Shrewsbury)	1-3 Hereford Road, Shrewsbury SY3 7QT
Lunts Pharmacies Ltd (Pontesbury)	Main Rd, Pontesbury, Shrewsbury SY5 0RR
Lunts Healthcare Ltd (The Tannery, Shrewsbury)	The Tannery, Barker St, Shrewsbury SY1 1QJ
Giles Evans Ltd - Highley Pharmacy	High St, Highley, Bridgnorth WV16 6LP
MSN Pharm Ltd - Rhodes Pharmacy, Claremont, Shrewsbury	28 Claremont Hill, Shrewsbury SY1 1RD
PCT Healthcare Ltd (Peak Pharmacy, Murrays Healthcare Ludlow)	Brown & Francis, 49 Bull Ring, Ludlow SY8 1AB
PCT Healthcare Ltd (Peak Pharmacy, Murrays Healthcare, Market Drayton)	Medical Centre, Maer Ln, Market Drayton TF9 3AL
PCT Healthcare Ltd (Peak Pharmacy, Murrays Healthcare, Bridgnorth)	Northgate Medical Centre, Old Smithfield, Bridgnorth WV16 4EN
R.E. & C.O. Alman Limited (Wenlock Pharmacy)	14 High St, Much Wenlock TF13 6AA
R.E. & C.O. Alman Limited, (Hillside Pharmacy, Church Stretton)	18 Sandford Avenue Church Stretton Shropshire SY6 6BW
L Rowland & Co (Retail) Ltd, Church Stretton	40 Sandford Avenue, Church Stretton, Shropshire SY6 6BH
L Rowland & Co (Retail) Ltd, Whitchurch	11 High Street, Whitchurch, Shropshire SY13 1AX
L Rowland & Co (Retail) Ltd, Wem & Prees MP, Wem	Wem & Prees Medical Practice, New Street, Wem SY4 5AF
L Rowland & Co (Retail) Ltd, Marden MP, Shrewsbury	Marden Medical Practice, 25 Sutton Road, Shrewsbury SY2 6DL
L Rowland & Co (Retail) Ltd, Bayston Hill, Shrewsbury	7 Lansdowne Road, Bayston Hill, Shrewsbury SY3 9HT
L Rowland & Co (Retail) Ltd, Severn Fields, Shrewsbury	Severn Fields Health Centre, Sundorne Road, Harlescott, Shrewsbury SY1 4RQ
L Rowland & Co (Retail) Ltd, Broseley	80 High Street, Broseley, Shropshire TF12 5ET
L Rowland & Co (Retail) Ltd, Unit 1 Morris Central, Wem	Unit 1 Morris Central Shopping Parade, Wem, Shropshire SY4 5NY
T.A Rhodes Limited	77 High St Albrighton WV7 3JA

Source: PharmOutcomes, Condom Distribution Scheme activity report 01April 2019 to 31 March 2022, accessed July 2022

Sexual Health Services: Issue of treatment for Chlamydia

Many Chlamydia cases go undiagnosed as Chlamydia is often asymptomatic. The National Chlamydia Screening Programme (NCSP) was set up to control and prevent the spread of chlamydia, targeting the higher risk group of young people aged under 25 who are sexually active.

Figure 57: Pharmacies in Shropshire actively providing Sexual Health Services: Issue of treatment for Chlamydia 01 April 2019 to 31 March 2022

Month Commencing	Number of Interactions
Apr 2019	<5
Jun 2019	<5
Sep 2019	<5

PharmOutcomes, 01April 2019 to 31 March 2022, accessed July 2022

Figure 58: Pharmacies in Shropshire actively providing Sexual Health Services: Issue of treatment for Chlamydia 01 April 2019 to 31 March 2022

Provider	Number of Interactions
Lunts Pharmacy (Hereford Rd) -	5
Taylor's Chemists (Radbrook Green)	<5

PharmOutcomes, 01April 2019 to 31 March 2022, accessed July 2022

Although just two pharmacies had interactions recorded for treatment of Chlamydia, many more pharmacies are registered for this service (see table 58), perhaps, indicating a need to promote this service with the residents and patients within Shropshire. This services, and enhanced services more generally are recovering from the impact of the Covid pandemic and the demands this has brought.

Figure 59: Pharmacies in Shropshire offering Sexual Health Services: Issue of treatment for Chlamydia 01 April 2022

Name of Company/Organisation awarded to	Branch Address
Cleobury Pharmacy (Avicenna Partner)	Off Vaughan road, Cleobury Mortimer, Kidderminster DY1 48BB
Radbrook Green Pharmacy (Avicenna Partner)	Bank Farm Road, Radbrook, Shrewsbury SY3 6DU
Conway Pharmacy	238 Monkmoor Road, Shrewsbury SY2 5SR
Day Lewis Pharmacy	The Former Ticket Office, the Cross, Gobowen Oswestry SY11 3JS
Day Lewis Pharmacy	Pharmacy at Caxton, Oswald Rd, Oswestry SY11 1RD
Day Lewis Pharmacy	Old Chapel Pharmacy 14 English Walls Oswestry, Shropshire SY11 2PA
Lloyds Pharmacy Limited, Ludlow	116-119 Lower Galderford, Ludlow, Shropshire, SY8 1RU
Lunts Pharmacies Ltd (Craven Arms)	Drovers House, The Auction Yard, Craven Arms SY7 9BZ
Lunts Pharmacies Ltd (Hereford Road, Shrewsbury)	1-3 Hereford Road, Shrewsbury SY3 7QT
Lunts Pharmacies Ltd (Pontesbury)	Main Rd, Pontesbury, Shrewsbury SY5 0RR
Lunts Healthcare Ltd (The Tannery, Shrewsbury)	The Tannery, Barker St, Shrewsbury SY1 1QJ
Giles Evans Ltd - Highley Pharmacy	High St, Highley, Bridgnorth WV16 6LP
PCT Healthcare Ltd (Peak Pharmacy. Murrays Healthcare Ludlow)	Brown & Francis, 49 Bull Ring, Ludlow SY8 1AB
PCT Healthcare Ltd (Peak Pharmacy, Murrays Healthcare, Market Drayton)	Medical Centre, Maer Ln, Market Drayton TF9 3AL
PCT Healthcare Ltd (Peak Pharmacy, Murrays Healthcare, Bridgnorth)	Northgate Medical Centre, Old Smithfield, Bridgnorth WV16 4EN
R.E. & C.O. Alman Limited (Wenlock Pharmacy)	14 High St, Much Wenlock TF13 6AA
R.E. & C.O. Alman Limited, (Hillside Pharmacy, Church Stretton)	18 Sandford Avenue Church Stretton Shropshire SY6 6BW
L Rowland & Co (Retail) Ltd, Church Stretton	40 Sandford Avenue, Church Stretton, Shropshire SY6 6BH
L Rowland & Co (Retail) Ltd, Whitchurch	11 High Street, Whitchurch, Shropshire SY13 1AX
L Rowland & Co (Retail) Ltd, Wem & Prees MP, Wem	Wem & Prees Medical Practice, New Street, Wem SY4 5AF
L Rowland & Co (Retail) Ltd, Marden MP, Shrewsbury	Marden Medical Practice, 25 Sutton Road, Shrewsbury SY2 6DL
L Rowland & Co (Retail) Ltd, Bayston Hill, Shrewsbury	7 Lansdowne Road, Bayston Hill, Shrewsbury SY3 9HT
L Rowland & Co (Retail) Ltd, Severn Fields, Shrewsbury	Severn Fields Health Centre, Sundorne Road, Harlescott, Shrewsbury SY1 4RQ
L Rowland & Co (Retail) Ltd, Broseley	80 High Street, Broseley, Shropshire TF12 5ET
L Rowland & Co (Retail) Ltd, Unit 1 Morris Central, Wem	Unit 1 Morris Central Shopping Parade, Wem, Shropshire SY4 5NY
Rhodes Pharmacy	28 Claremont Hill, Shrewsbury, Shropshire, SY1 1RD
T.A Rhodes Limited	77 High St Albrighton WV7 3JA

Source: Public Health Contracts – Shropshire LA, July 2022

Sexual Health Services: Issue of Chlamydia/Gonorrhoea Smartkits

Chlamydia and Gonorrhoea cause avoidable sexual and reproductive ill-health. The Chlamydia/ Gonorrhoea Screening Smartkit services provides a unisex kit for 16–24-year-olds. Which offers either a swab or urine collection and also includes a condom for the user. The kits can be tracked and monitored in terms of who's issued the kit to patients and those kits subsequently returned.

Figure 60: Pharmacies in Shropshire offering Sexual Health Services: Number of interactions with patients for the issue of Chlamydia/Gonorrhoea Smartkits 01 April 2019 to 31 March 2022

Month Commencing	Number of Interactions
May 2019	<5
Jun 2019	<5
Jul 2019	<5
Aug 2019	<5
Oct 2019	<5
Nov 2019	<5
Jan 2020	<5
Feb 2020	<5
Mar 2020	<5
Aug 2020	<5
Sep 2020	<5
Oct 2020	<5
Nov 2021	<5
Mar 2022	<5

Figure 61: Pharmacies in Shropshire offering Sexual Health Services: Number of interactions with patients for the issue of Chlamydia/Gonorrhoea Smartkits 01 April 2019 to 31 March 2022

Provider	Number of Interactions
MSN Healthcare Ltd. T/A Severn Pharmacy (Riverside Shopping Centre) -	5
PCT Healthcare Ltd t/a Murrays Healthcare (Market Drayton)	<5
Hillside Pharmacy (RE and CO Alman Ltd)	<5
Lunts Pharmacy (Craven Arms)	<5
Conway Pharmacy	<5
Dudley Taylor Pharmacies Ltd	<5
Lunts Pharmacy (Hereford Rd)	<5
PCT Healthcare Ltd t/a Murrays Healthcare (Bridgnorth)	<5
Rhodes Shrewsbury	<5

PharmOutcomes, 01 April 2019 to 31 March 2022, accessed July 2022

Although nine pharmacies had interactions recorded for interactions for the Chlamydia/Gonorrhoea Smartkit, many more pharmacies are registered for this service, see table 62. Perhaps, indicating a need to promote this service with the residents and patients within Shropshire.

Figure 62: Pharmacies in Shropshire offering Sexual Health Services: Issue of Chlamydia/Gonorrhoea Smartkits 01 April 2022

Name of Company/Organisation awarded to	Branch Address
Bicton Heath Pharmacy (Avicenna Partner)	Unit 2 Bicton Heath Shopping Centre Welshpool Road Bicton Heath Shrewsbury SY3 5AD
Bishops Castle (Avicenna Partner)	The Pharmacy, Church Street, Bishops Castle, Shropshire SY9 5AE
Cleobury Pharmacy (Avicenna Partner)	Off Vaughan Road, Cleobury Mortimer, Kidderminster DY1 48BB
Radbrook Green Pharmacy (Avicenna Partner)	Bank Farm Road, Radbrook, Shrewsbury SY3 6DU
Conway Pharmacy	238 Monkmoor Road, Shrewsbury SY2 5SR
Day Lewis Pharmacy	The Former Ticket Office, the Cross, Gobowen Oswestry SY11 3JS
Day Lewis Pharmacy	Pharmacy at Caxton, Oswald Rd, Oswestry SY11 1RD
Day Lewis Pharmacy	Old Chapel Pharmacy 14 English Walls Oswestry, Shropshire SY11 2PA
Lloyds Pharmacy Limited, Ludlow	116-119 Lower Galderford, Ludlow, Shropshire, SY8 1RU
Lunts Pharmacies Ltd (Craven Arms)	Drovers House, The Auction Yard, Craven Arms SY7 9BZ
Lunts Pharmacies Ltd (Hereford Road, Shrewsbury)	1-3 Hereford Road, Shrewsbury SY3 7QT
Lunts Pharmacies Ltd (Pontesbury)	Main Rd, Pontesbury, Shrewsbury SY5 0RR
Giles Evans Ltd - Highley Pharmacy	High St, Highley, Bridgnorth WV16 6LP
MSN Pharm Ltd - Rhodes Pharmacy, Claremont, Shrewsbury	28 Claremont Hill, Shrewsbury SY1 1RD
PCT Healthcare Ltd (Peak Pharmacy, Murrays Healthcare Ludlow)	Brown & Francis, 49 Bull Ring, Ludlow SY8 1AB
PCT Healthcare Ltd (Peak Pharmacy, Murrays Healthcare, Market Drayton)	Medical Centre, Maer Ln, Market Drayton TF9 3AL
PCT Healthcare Ltd (Peak Pharmacy, Murrays Healthcare, Bridgnorth)	Northgate Medical Centre, Old Smithfield, Bridgnorth WV16 4EN
R.E. & C.O. Alman Limited (Wenlock Pharmacy)	14 High St, Much Wenlock TF13 6AA
R.E. & C.O. Alman Limited, (Hillside Pharmacy, Church Stretton)	18 Sandford Avenue Church Stretton Shropshire SY6 6BW
L Rowland & Co (Retail) Ltd, Church Stretton	40 Sandford Avenue, Church Stretton, Shropshire SY6 6BH
L Rowland & Co (Retail) Ltd, Whitchurch	11 High Street, Whitchurch, Shropshire SY13 1AX
L Rowland & Co (Retail) Ltd, Wem & Prees MP, Wem	Wem & Prees Medical Practice, New Street, Wem SY4 5AF
L Rowland & Co (Retail) Ltd, Marden MP, Shrewsbury	Marden Medical Practice, 25 Sutton Road, Shrewsbury SY2 6DL
L Rowland & Co (Retail) Ltd, Bayston Hill, Shrewsbury	7 Lansdowne Road, Bayston Hill, Shrewsbury SY3 9HT
L Rowland & Co (Retail) Ltd, Severn Fields, Shrewsbury	Severn Fields Health Centre, Sundorne Road, Harlescott, Shrewsbury SY1 4RQ
L Rowland & Co (Retail) Ltd, Broseley	80 High Street, Broseley, Shropshire TF12 5ET
L Rowland & Co (Retail) Ltd, Unit 1 Morris Central, Wem	Unit 1 Morris Central Shopping Parade, Wem, Shropshire SY4 5NY
Rhodes Pharmacy	28 Claremont Hill, Shrewsbury, Shropshire, SY1 1RD
T.A Rhodes Limited	77 High St Albrighton WV7 3JA

Source: Public Health Contracts – Shropshire LA, July 2022

Healthy Start Vitamins

Healthy Start is a UK-wide government scheme to improve the health of low-income pregnant women and families receiving benefits and tax credits. Women who are at least 10 weeks pregnant and families with children under four years old qualify for Healthy Start if the family is receiving:

- Income Support, or
- Income-based Jobseeker's Allowance, or
- Income-related Employment and Support Allowance, or
- Child Tax Credit and has an annual income of £16,190 or less (2014/15).

Women also qualify during the whole of their pregnancy if they are under-18 when they apply, even if they are not in receipt of the above benefits or tax credits.

Every eight weeks, women get sent vitamin coupons, which they can swap for Healthy Start vitamins in their local area. The coupons are either for Healthy Start women's tablets or Healthy Start children's drops.

NHS Healthy start vitamins are available in select pharmacies in Shropshire, however following changes in licensing, Shropshire Council's Public Health team are currently reviewing processes between commissioned providers and local pharmacies to ensure healthy start vitamins are available for those who are eligible.

The following table shows the pharmacies that have issued healthy start vitamins to women in Shropshire in 2021-22. The two pharmacies issuing the most were both in supermarkets, (ASDA and Tesco) and between them they issued around a third of all the vitamins across Shropshire.

Figure 63 Pharmacies offering Healthy Start Vitamins 2021-22

Code	Pharmacy		
1	Asda Pharmacy	Old Potts Way	Shrewsbury
2	Bicton Heath Pharmacy	Bicton Heath Shopping Centre	Shrewsbury
3	Boots The Chemist	7 - 9 Pride Hill	Shrewsbury
4	Boots The Chemist	34 Bull Ring	Ludlow
5	Boots The Chemist	5 - 7 Church Street	Oswestry
6	Boots The Chemist	30 - 31 High Street	Bridgnorth
7	Boots The Chemist	48 - 50 Cheshire Street	Market Drayton
8	Boots The Chemist	10 - 12 Watergate Street	Whitchurch
9	Boots The Chemist	Meole Brace Retail Park	Shrewsbury
10	Brown & Francis	49 Bull Ring	Ludlow
11	Cambrian Pharmacy	Thomas Savin Road	Oswestry
12	Caxton Pharmacy	Oswald Road	Oswestry
13	Cleobury Mortimer Pharmacy	Off Vaughan Road	Cleobury Mortimer
14	Conway Pharmacy	238 Monkmoor Road	Telford Est Shopping Centre
15	Day Lewis Pharmacy	The Former Ticket Office, The Cross	Gobowen
16	Day Lewis Pharmacy	14 English Walls	Oswestry
17	Daynight Pharmacy	5 Cross Street	Ellesmere
18	Highley Pharmacy	Beulah House, High St	Highley
19	Hillside Pharmacy	18 Sandford Avenue	Church Stretton
20	Lunts Pharmacies	Drovers' House, Auction Yard	Craven Arms
21	Lunts Pharmacies	1 - 3 Hereford Road	Shrewsbury
22	Lunts Pharmacy	The Tannery, Barker St	Shrewsbury
23	Murrays Healthcare	Medical Centre, Maer Lane	Market Drayton
24	Murrays Healthcare	Northgate Health Centre, Northgate	Bridgnorth
25	Pontesbury Pharmacy	Main Road	Pontesbury
26	Radbrook Green Pharmacy	Adjacent to Radbrook Green Surgery	Radbrook
27	Rhodes Pharmacy	28 Claremont Hill, Shrewsbury, Shropshire, SY1 1RD	Shrewsbury
28	Rowlands Pharmacy	Severn Fields Heath Village	Shrewsbury
29	Rowlands Pharmacy	80 High Street	Broseley
30	Rowlands Pharmacy	Unit 1, Morris Central Shopping Parade	Wem
31	Rowlands Pharmacy	Wem & Prees Medical Practice	Wem
32	St Martins Pharmacy	Stan's Superstore, Overton Lane	St Martins
33	Tesco Pharmacy	Cattle Market, Battlefield Rd	Shrewsbury
34	Wenlock Pharmacy	14 High Street	Much Wenlock

Source: <https://www.nhs.uk/service-search/other-services/Healthy-start-vitamins/Shropshire/Results/108/-2.732/52.633/348/19019?distance=25>

NHS England

NHS England Staffordshire and Shropshire Area Team commission:

- Patient Group Direction Service (PGD)
- Emergency supply

Note:

- The common/minor ailments scheme is now covered by CPCS – see Advanced Services.
- From autumn 2022, the Covid-19 Vaccination Service will be commissioned as a National Enhanced Service (NES).

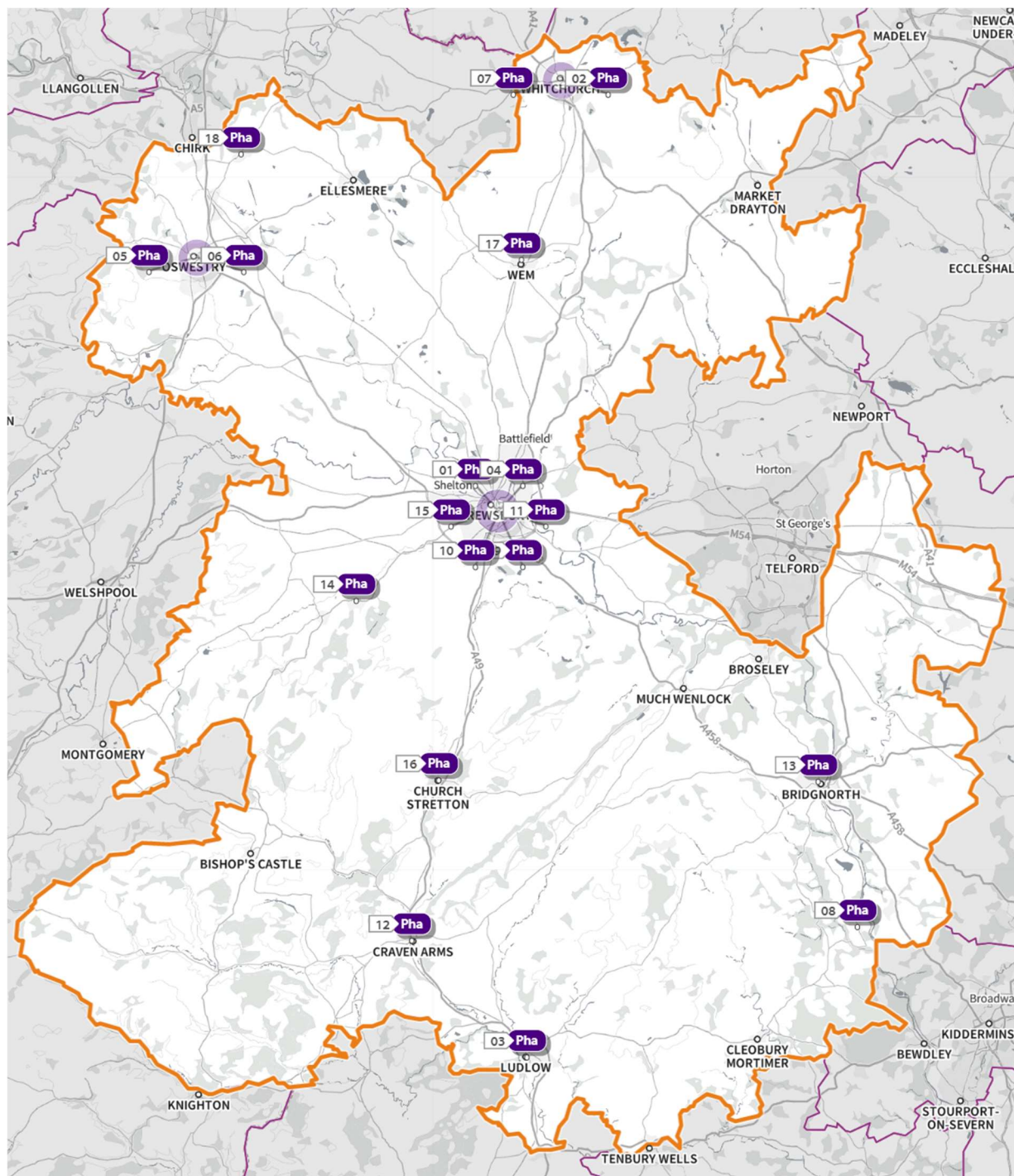
Patient Group Direction Service (PGD)

Patient Group Directions (PGDs) provide a legal framework that allows some medicines to be supplied and/or administered by named, authorised, registered health professionals, to a pre-defined group of patients needing preventative treatment or treatment for a condition without the need for a prescription.

PGDs may be appropriate when medicine use follows a predictable pattern, such as for patients attending for contraception, or where patients seek unscheduled care, such as for a minor ailment in a community pharmacy or walk-in centre.

- Extended Care Tier 1 and Tier 2 are listed as PGD services
- UTI and Impetigo services are now delivered under this contract.

Figure 64 – Pharmacies providing PGD services



Source: PNA Community Pharmacy Questionnaire 2022
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Figure 65: Pharmacies providing PGD services

Map index	Name	Address	Town
1	Asda Pharmacy	Old Potts Way	Shrewsbury
2	Boots	10-14 Watergate Street	Whitchurch
3	Brown and Francis	49 Bull Ring	Ludlow
4	Conway Pharmacy	238 Monkmoor Road	Shrewsbury
5	Day Lewis Pharmacy	Oswald Road	Oswestry
6	Day Lewis Pharmacy	14 English Walls	Oswestry
7	Green End Pharmacy	11-13 Green End	Whitchurch
8	Highley Pharmacy	Beulah House	Highley
9	LloydsPharmacy	Meole Brace Retail Park	Shrewsbury
10	Lunts Healthcare Limited	The Tannery	Shrewsbury
11	Lunts Pharmacies	1-3 Hereford Road	Shrewsbury
12	Lunts Pharmacy	Drovers' House	Craven Arms
13	Murrays Healthcare	Northgate Health Centre	Bridgnorth
14	Pontesbury Pharmacy	Main Road	Shrewsbury
15	Rhodes	28 Claremont Hill	Shrewsbury
16	Rowlands Pharmacy	40 Sandford Avenue	Church Stretton
17	Rowlands Pharmacy	Wem and Prees Med Prac	Wem
18	St Martins Pharmacy	Stans Superstore	Oswestry

Urinary tract infections (UTI) and impetigo

This service allows pharmacies to provide antibiotic treatment for urinary tract infections (UTI) for women aged 16-74 and impetigo in children and adults who meet the inclusion criteria following accreditation of pharmacists under a Patient Group Direction (PGD). There are 6 (12.5%) pharmacies in Shropshire who are signed up to provide at least one of these services (Figure 12).

During 2021/22 across Shropshire:

- There were 6 active providers for treatment of UTI

NB. As UTI and Impetigo services now sit under the PGD specification the provision as understood here comes from community pharmacy questionnaire data. This was an open question following confirmation of PGD provision and it may therefore underrepresent the real provision of UTI and Impetigo services, given the apparent decline in provision when comparison to the previous Needs Assessment.

Figure 66: UTI and Impetigo service provision in Shropshire 2020-21

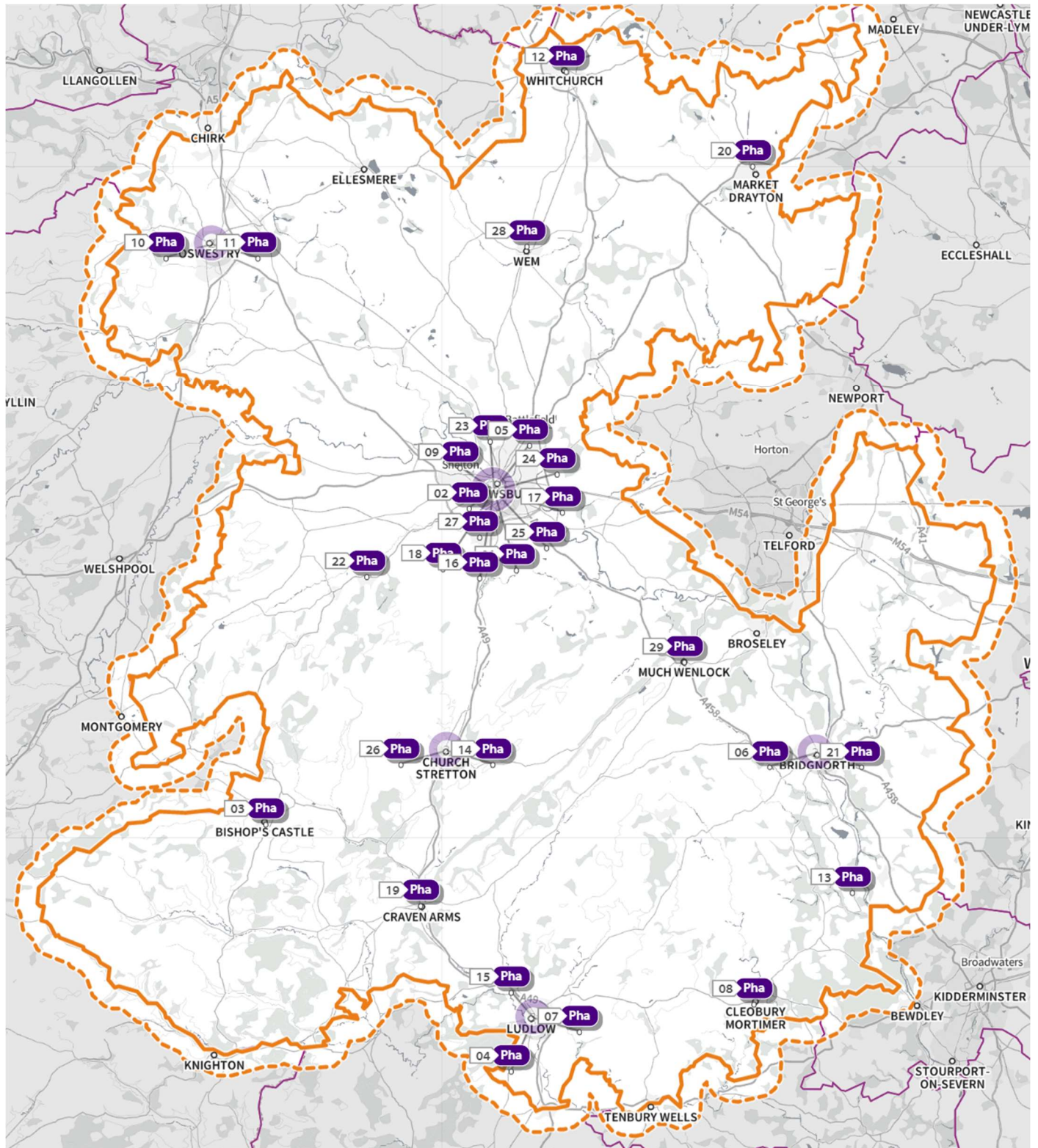
Map index	Name	Address	Town
1	Asda Pharmacy	Old Potts Way	Shrewsbury
2	Conway Pharmacy	238 Monkmoor Road	Shrewsbury
3	Green End Pharmacy	11-13 Green End	Whitchurch
4	LloydsPharmacy	Meole Brace Retail Park	Shrewsbury
5	Murrays Healthcare	Northgate Health Centre	Bridgnorth
6	St Martins Pharmacy	Stans Superstore	Oswestry

Emergency Supply

This service enables pharmacies to issue up to 14 days' worth of medication to patients who had run out of their prescribed medication during the pharmacy's regular opening hours.

During 2021/22 there were 29 pharmacies signed up to provide the service in Shropshire (Figure 14) with 1,013 provisions being made during the year (an average of around 35 per year for each pharmacy, an increase of 22 per year in 2016/17).

Figure 14 Map of Emergency Supply service provision in Shropshire 2021-22



Source – Pharmacy Questionnaire 2022

Figure 67: Key of map of Emergency Supply service provision in Shropshire 2021-22

Map index	Name	Address	Town
1	Asda Pharmacy	Old Potts Way	Shrewsbury
2	Bicton Heath Pharmacy	Bicton Heath Shopping Centre	Shrewsbury
3	Bishops Castle Pharmacy	The Pharmacy	Bishops Castle
4	Boots	34 Bull Ring	Ludlow
5	Boots	37 Mytton Oak Road	Shrewsbury
6	Boots	30-31 High Street	Bridgnorth
7	Brown and Francis	49 Bull Ring	Ludlow
8	Cleobury Pharmacy	Cleobury Pharmacy	Cleobury Mortimer
9	Conway Pharmacy	238 Monkmoor Road	Shrewsbury
10	Day Lewis Pharmacy	Oswald Road	Oswestry
11	Day Lewis Pharmacy	14 English Walls	Oswestry
12	Green End Pharmacy	11-13 Green End	Whitchurch
13	Highley Pharmacy	Beulah House	Highley
14	Hillside Pharmacy	18 Sandford Avenue	Church Stretton
15	LloydsPharmacy	116-119 Lower Galderford	Ludlow
16	LloydsPharmacy	Meole Brace Retail Park	Shrewsbury
17	Lunts Healthcare Limited	The Tannery	Shrewsbury
18	Lunts Pharmacies	1-3 Hereford Road	Shrewsbury
19	Lunts Pharmacy	Drovers' House	Craven Arms
20	Murrays Healthcare	Medical Centre	Market Drayton
21	Murrays Healthcare	Northgate Health Centre	Bridgnorth
22	Pontesbury Pharmacy	Main Road	Shrewsbury
23	Radbrook Green Pharmacy	Bank Farm Road	Shrewsbury
24	Rhodes	28 Claremont Hill	Shrewsbury
25	Rowlands Pharmacy	Marsden Medical Practice	Shrewsbury
26	Rowlands Pharmacy	40 Sandford Avenue	Church Stretton
27	Rowlands Pharmacy	7 Lansdowne Road	Shrewsbury
28	Rowlands Pharmacy	Wem and Prees Med Prac	Wem
29	Wenlock Pharmacy	14 High Street	Much Wenlock

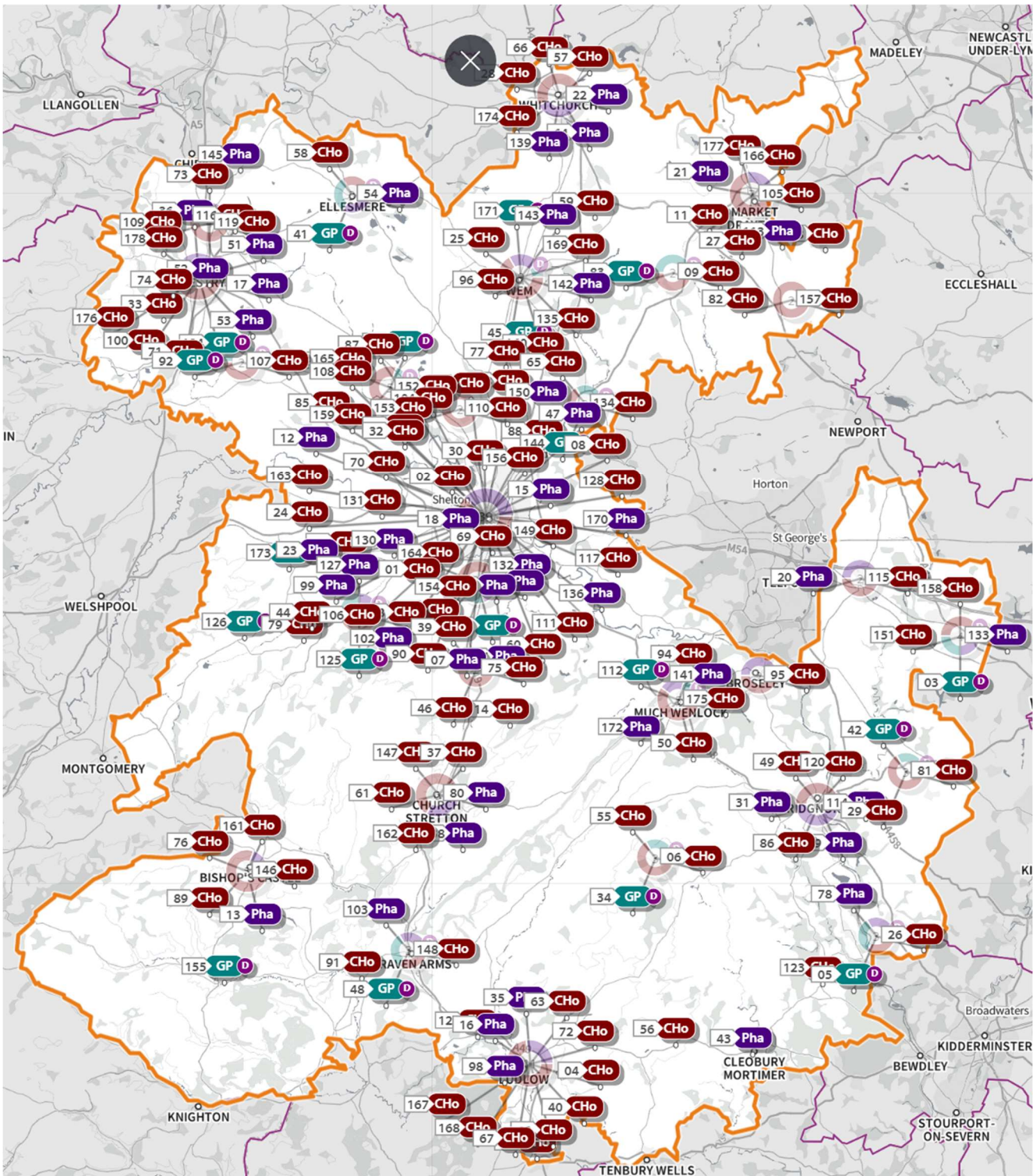
Findings from the emergency supply service across Shropshire during 2016/17 found only 4% of patients were under 20 compared with over three-quarters being aged 50 and over

Provision of Pharmaceutical services to Care Homes

Shropshire has a significant number of care home beds per head of population. Within Shropshire there are 160 care homes for adults (43 Nursing Care Homes, 117 Residential Care Homes). There are also a considerable number of children's homes, and many children are placed in these homes from outside of the county.

Care homes access support, advice and guidance from the Shropshire ICS Primary Care Support and Medicines Management Team by way of a care homes medicines management officer and other team members (pharmacists and technicians). The team carry out initial system checks within the homes, complete medication reviews for residents and provide clinical advice to people involved in the care of the residents. Community pharmacies also give advice, supply medicines, remove waste medicines and provide compliance aids to care homes in Shropshire.

Figure 15 Location of care homes in Shropshire



Source - SHAPE Atlas 2022

Areas of potential focus for care home provision

Figure 68: Ditton priors; 06 - Arden Grange Nursing & Residential Care Home and 55 – Ditton Priors Care Centre. Only have close access to a dispensing practice

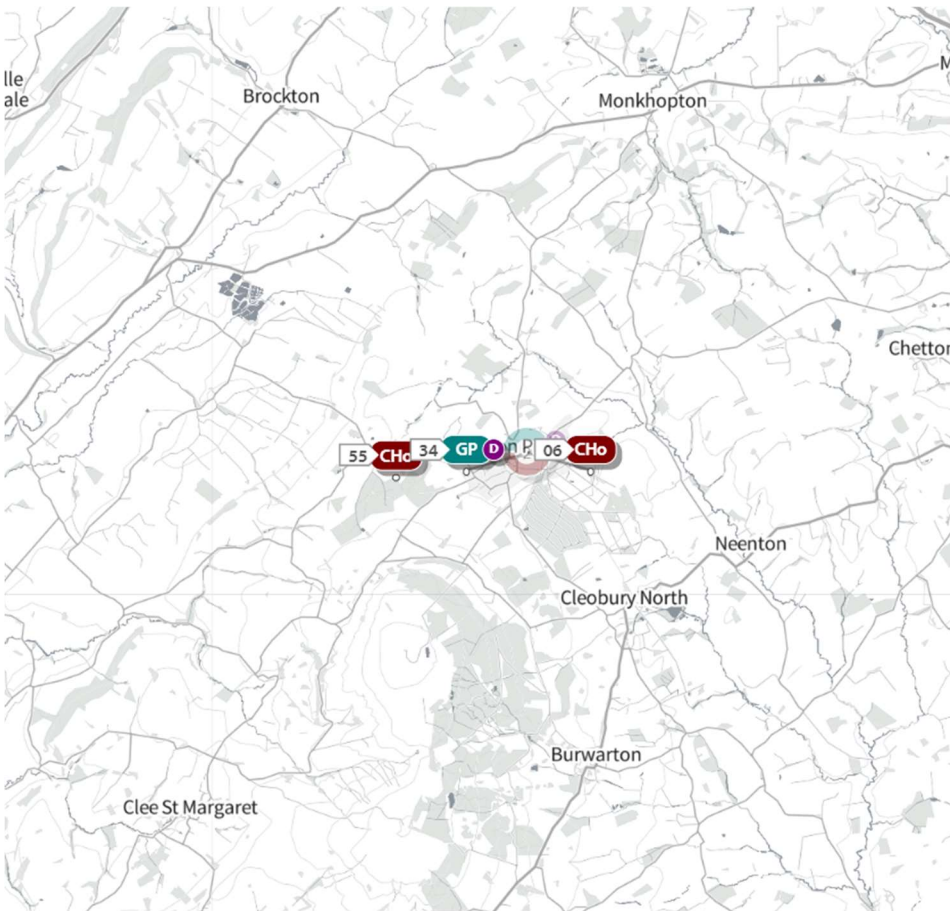
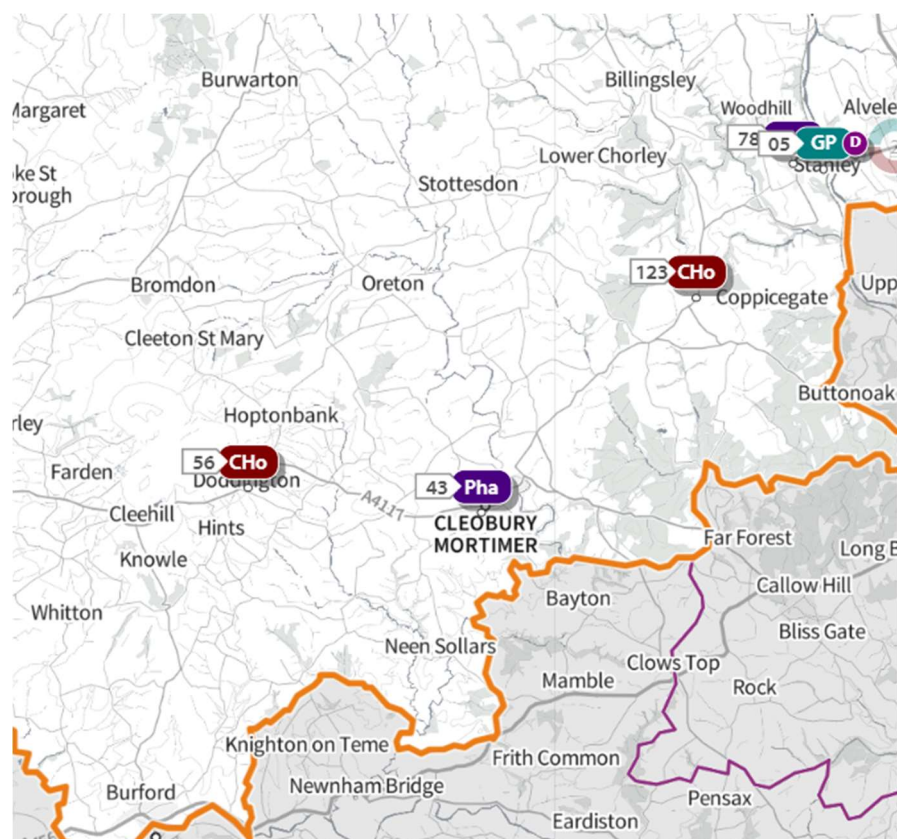


Figure 69: Doddington and Kirbet; 56 – Doddington Lodge and 123 – Park House Nursing Home. Significant distance to nearest pharmacies in Cleobury Mortimer and Alveley respectively.



Source - SHAPE Atlas 2022

Other services

There are also a range of non-commissioned services that pharmacies provide. These are either privately arranged or are provided free of charge to their communities and include: home delivery service (not appliances), care home service, contraceptive service, sharps disposal service, medicines assessment and compliance support service, on demand availability of specialist drugs service, language access service, gluten free food supply service, anti-viral distribution service, allergies, travel vaccines, obesity management and prescriber support service.

Shropshire Community Pharmacy Questionnaire

The PNA Pharmacy Questionnaire was emailed to all 47 Shropshire County pharmacies. The Public Health Department received 50 completed questionnaires (3 were duplicated)

The questionnaire had several different categories: premises and contact details; opening/closing times; consultation facilities; Services, advanced services, commissioned services, non-commissioned services, screening services and disease specific medicine management service.

Based on the Community Pharmacy Questionnaire (completed by 47 local pharmacies), pharmacies were also willing to provide:

Disease Specific Management Services

Table 29 shows the percentages of pharmacies willing to provide specific disease management services.

Table 29: Disease specific management services by responses

Service Summary	% Currently Commissioned	% Willing to Provide if Commissioned	% Willing to Provide Privately	% Not willing to Provide
Allergies	0%	61.7%	10.64%	0%
Alzheimer's/dementia	0%	68.09%	10.64%	0%
Asthma	2.13%	70.21%	10.64%	0%
CHD	0%	68.09%	10.64%	0%
COPD	0%	70.21%	10.64%	0%
Depression	0%	68.09%	10.64%	0%
Diabetes type I	0%	70.21%	10.64%	0%
Diabetes type II	0%	70.21%	10.64%	0%
Epilepsy	0%	68.09%	10.64%	0%
Heart Failure	0%	68.09%	10.64%	0%
Hypertension	21.28%	48.94%	12.77%	0%
Parkinson's disease	0%	65.96%	10.64%	0%
Emergency Contraception Service	48.94%	42.55%	14.89%	0%
Emergency Supply Service	65.96%	23.40%	4.26%	0%
Gluten Free Food Supply Service	0%	65.96%	12.77%	0%
Home Delivery Service (not appliances)	17.02%	51.06%	19.15%	0%
Independent Prescribing Service	0%	57.45%	12.77%	0%

Source: PNA Pharmacy Questionnaire 2022

Additional Services

Table 30 shows the additional service provision responses by pharmacies.

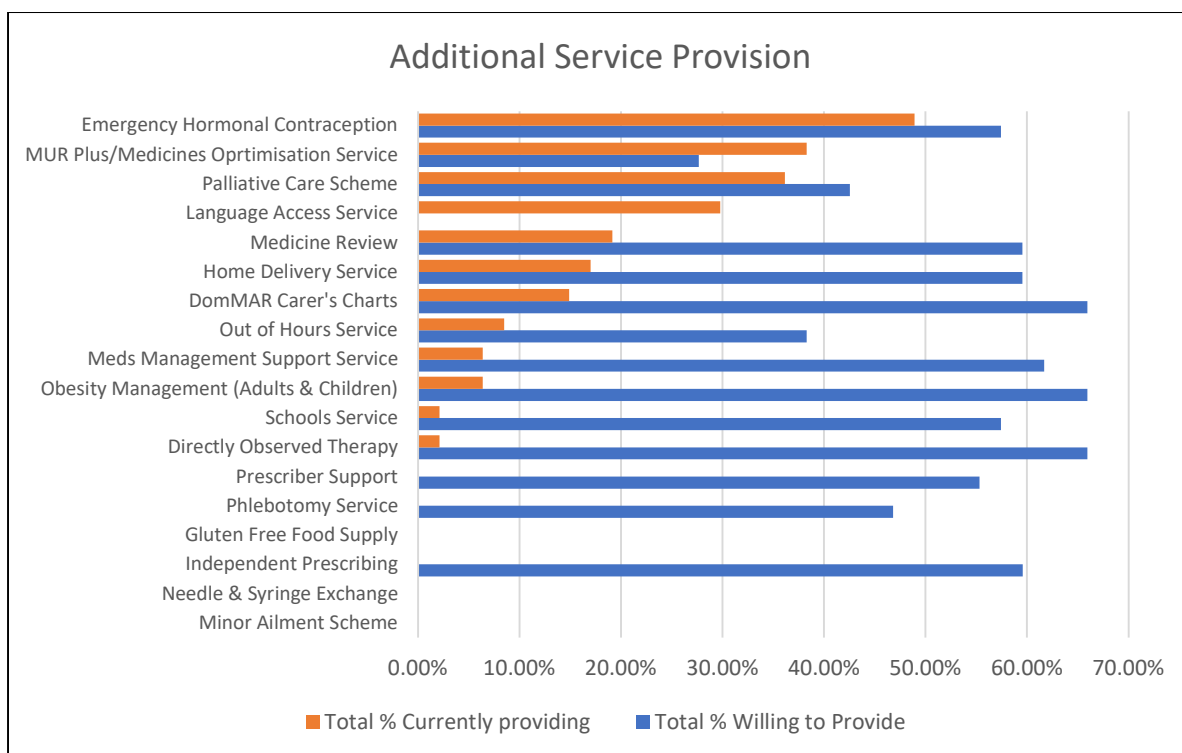
Table 30: Additional Services Provision

Services	% Currently Commissioned	% Willing to Provide if Commissioned	% Willing to Provide Privately	% Not willing to Provide
Emergency Hormonal Contraception	48.94%	42.55%	14.89%	0%
Home Delivery Service	17.02%	51.06%	8.51%	0%
Needle & Syringe Exchange	34%			
Medicine Review	19.15%	59.57%	0%	0%
DomMAR Carer's Charts	14.89%	65.96%	0%	0%
Directly Observed Therapy	2.13%	65.96%	0%	0%
Independent Prescribing	0%	57.45%	2.13%	0%
MUR Plus/Medicines Optimisation Service	38.3%	27.66%	0%	0%
Schools Service	2.13%	57.45%	0%	0%
Palliative Care Scheme	36.17%	42.55%	0%	0%
Language Access Service	29.8%	0.0%	0%	0%
Obesity Management (Adults & Children)	6.38%	65.96%	0%	0%
Out of Hours Service	8.51%	38.3%	0%	0%
Phlebotomy Service	0%	46.81%	0%	0%
Prescriber Support	0%	55.32%	0%	0%
Meds Management Support Service	6.38%	61.70%	0%	0%

Source: PNA Pharmacy Questionnaire 2022

Note: Emergency Hormonal Contraception, Directly Observed Therapy and Needle Exchange services are funded by the Local Authority Public Health Department. Home delivery, MAR charts and independent prescribing are provided wholly as private services.

Figure 16: Additional Service Provision



Source: PNA Pharmacy Questionnaire 2022

Screening Services

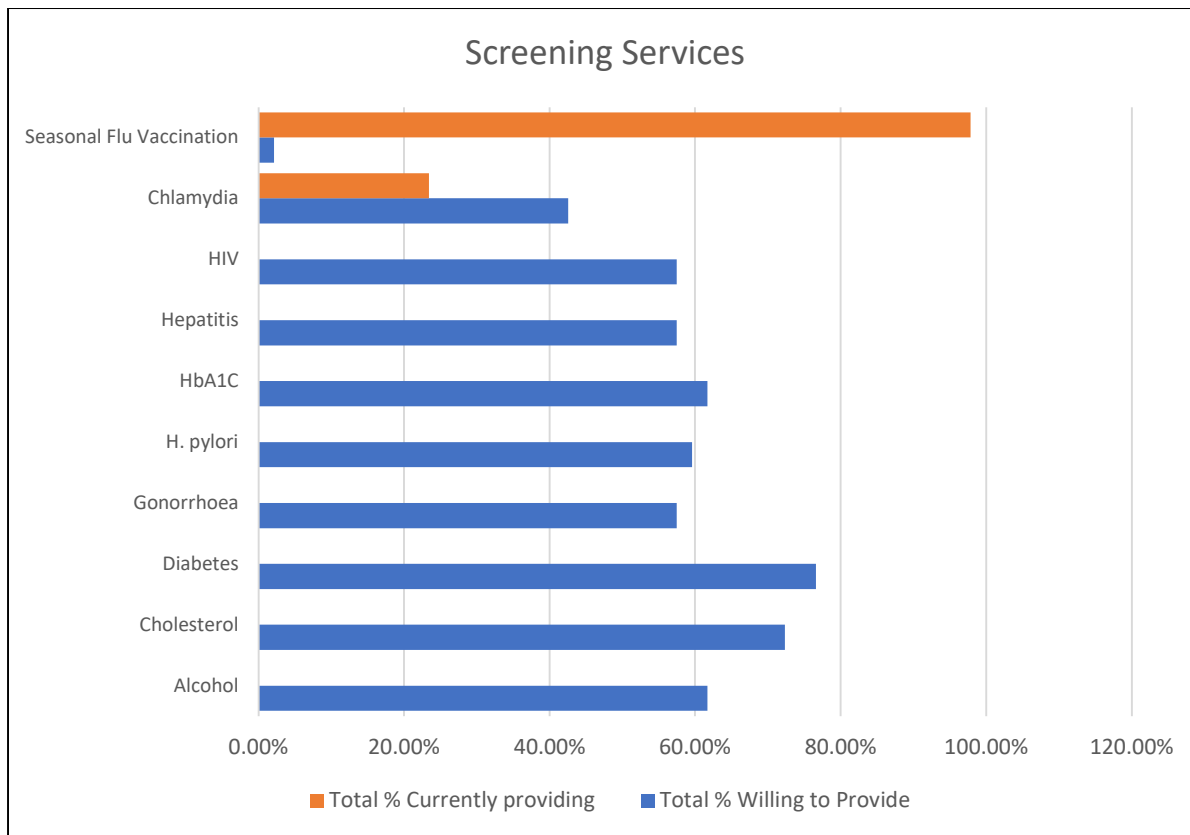
Table 31 shows all responses on whether pharmacies were willing to provide screening services. The majority of pharmacies indicated that they would be willing to provide a screening service for all those listed.

Table 31 Pharmacies Willing to Provide Screening Services

Summary	% Currently Commissioned	% Willing to Provide if Commissioned	% Willing to Provide Privately	% Not willing to Provide
Alcohol	0.0%	61.70%	0.0%	0.0%
Chlamydia	23.40%	42.55%	10.64%	0.0%
Cholesterol	0.0%	72.34%	0.0%	0.0%
Diabetes	0.0%	76.6%	0.0%	0.0%
Gonorrhoea	0.0%	57.45%	0.0%	0.0%
H. pylori	0.0%	59.57%	0.0%	0.0%
HbA1C	0.0%	61.7%	0.0%	0.0%
Hepatitis	0.0%	57.45%	0.0%	0.0%
HIV	0.0%	57.45%	0.0%	0.0%
Seasonal Flu Vaccination	97.87%	2.13%	0.0%	0.0%

Source: PNA Pharmacy Questionnaire 2022

Figure 17: Pharmacies Willing to Provide Screening Services



Source: PNA Pharmacy Questionnaire 2022

Additional Vaccinations and Services

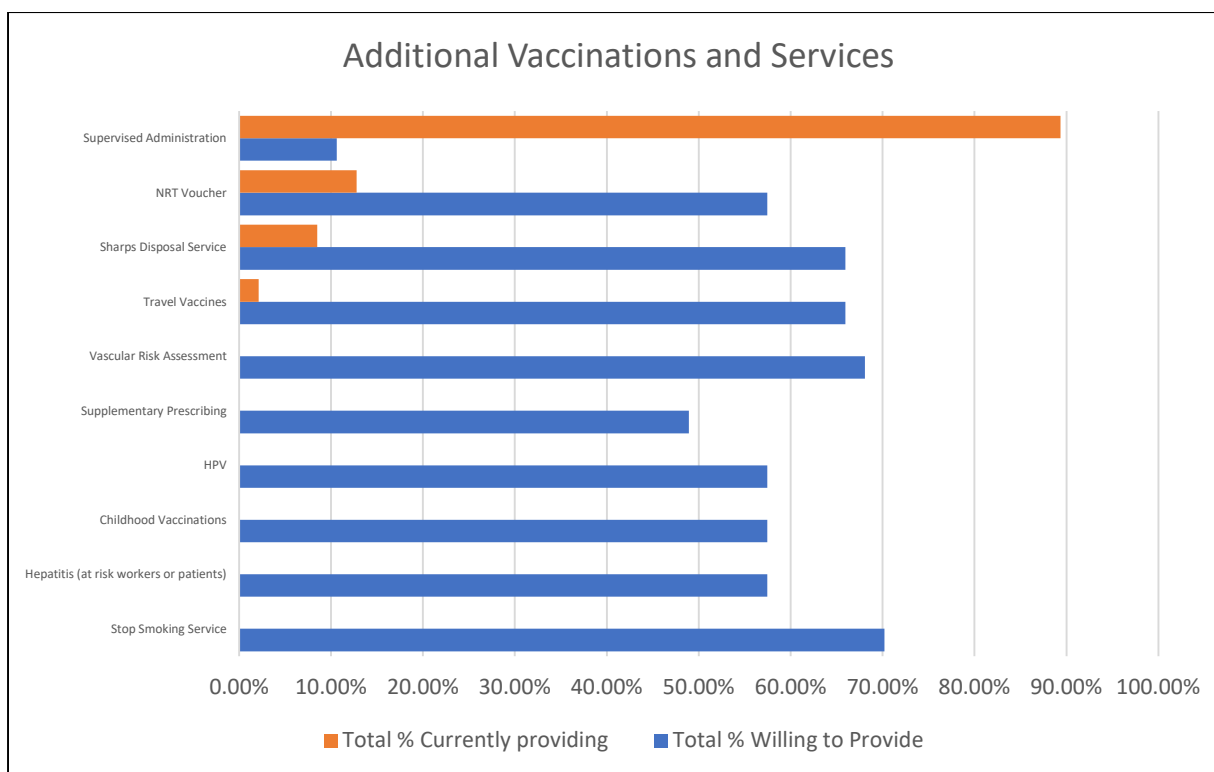
Table 32 shows all responses on whether pharmacies are willing to provide additional vaccination services. The follow table shows that the highest percentage of current provision overall was for supervised administration and NRT vouchers; many pharmacies however, indicated that they would be willing to provide a screening service for all those listed.

Table 32: Pharmacies providing or willing to provide additional vaccination and services by all responses

Service	% Currently Commissioned	% Willing to Provide if Commissioned	% Willing to Provide Privately	% Not willing to Provide
Supervised Administration	89.36%	10.64%	0.0%	0.0%
NRT Voucher	12.77%	57.45%	0.0%	0.0%
Stop Smoking Service	0.0%	70.21%	0.0%	0.0%
Travel Vaccines	2.13%	65.96%	0.0%	0.0%
Sharps Disposal Service	8.51%	65.96%	0.0%	0.0%
Hepatitis (at risk workers or patients)	0.0%	57.45%	0.0%	0.0%
Childhood Vaccinations	0.0%	57.45%	0.0%	0.0%
HPV	0.0%	57.45%	0.0%	0.0%
Supplementary Prescribing	0.0%	48.94%	0.0%	0.0%
Vascular Risk Assessment	0.0%	57.45%	10.64%	0.0%

Source: PNA Pharmacy Questionnaire 2022

Figure 18 Pharmacies Providing or Willing to Provide Additional Vaccination and Services



Source: PNA Pharmacy Questionnaire 2022

Medications Collection & Delivery Services

Of the 35 pharmacies that responded to this question (74.4%), 94% (33 of 35) said that they signed up to GP prescription collections and 94% provided a free medications delivery service to some or all patients.

Pharmacies were asked to categorise their selected patient delivery criteria and Table 33 shows the categorised results for the 35 responders. 5.7% of pharmacies indicated charging for meds delivery.

Table 33: Patient group delivery categories (35 responding Pharmacies)

Selected Patient Groups delivery (Categorised)	%
All Patients	42.90%
Elderly	11.40%
Housebound etc	25.70%
Palliative Care	5.70%
Vulnerable	2.90%
Privately Paid	5.70%
N/a	5.70%

Source: PNA Pharmacy Questionnaire 2022

Patient Pharmacy Questionnaire

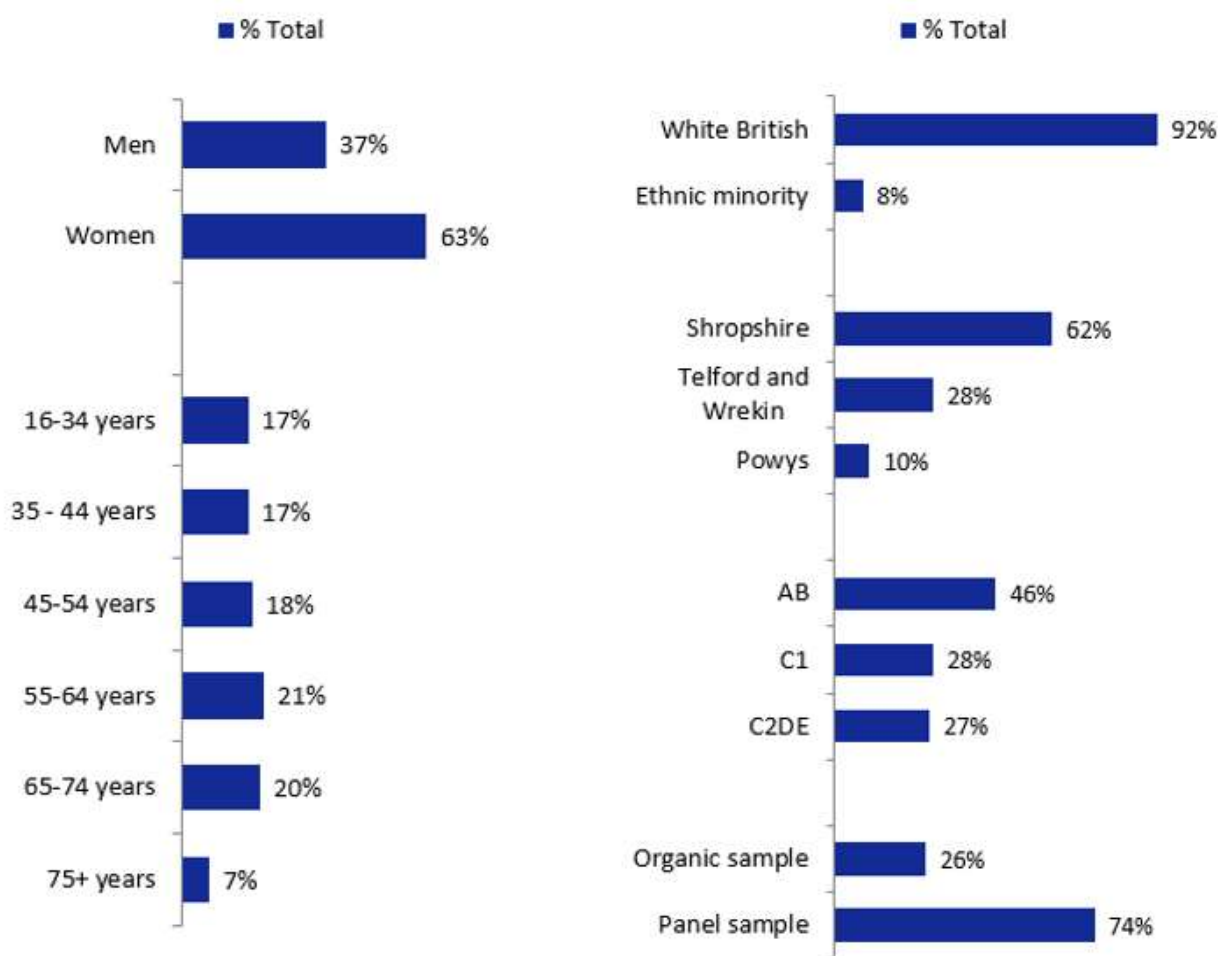
Shropshire Council, Telford and Wrekin Council and Shropshire Healthwatch invited patients to participate in a short on-line questionnaire. This ran from 24th June 2022 to 11th July 2022. The questionnaire was aimed to inform about community pharmacy services in Shropshire in order to find out about patients' experiences and forms an integral part of the Pharmaceutical Needs Assessment for 2022. In total 421 questionnaires were completed, and a copy of the questionnaire is contained within Appendix 4.

Of the respondent questionnaires 311 were recruited by an online commercial panel and 110 were from the organic sample of STW networks.

The respondent sample was slightly skewed towards women. This is often observed with health surveys. The sample was also slightly skewed towards the more affluent socio-economic groups. Almost half the sample identified as coming from the AB social groups. This may cause some bias within the survey. There was representation across all age groups. Finally, 62% of the sample identified themselves as coming from Shropshire LA area of the ICS patch.

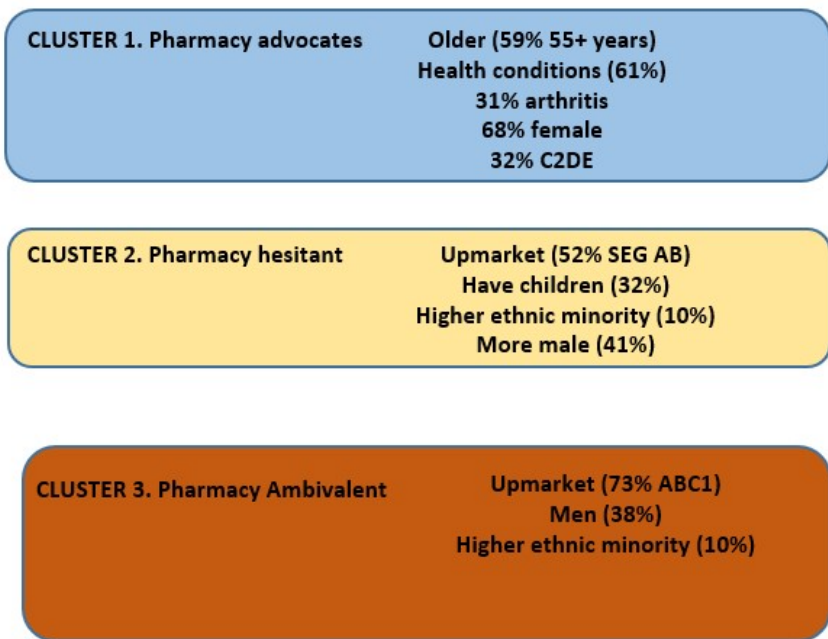
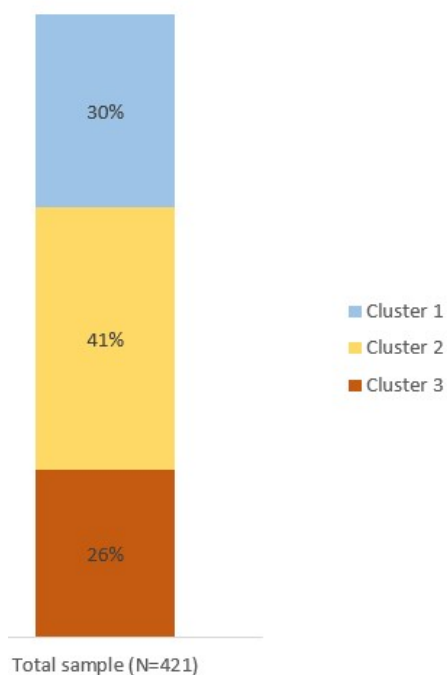
The charts below in the sample profile, give the core components of the sample population. On the left is the gender split, followed by demographic group distribution. On the right we have a broad ethnicity split, followed by a resident LA. Thirdly by socio-economic group and last by the recruiting method of the respondent.

Sample profile

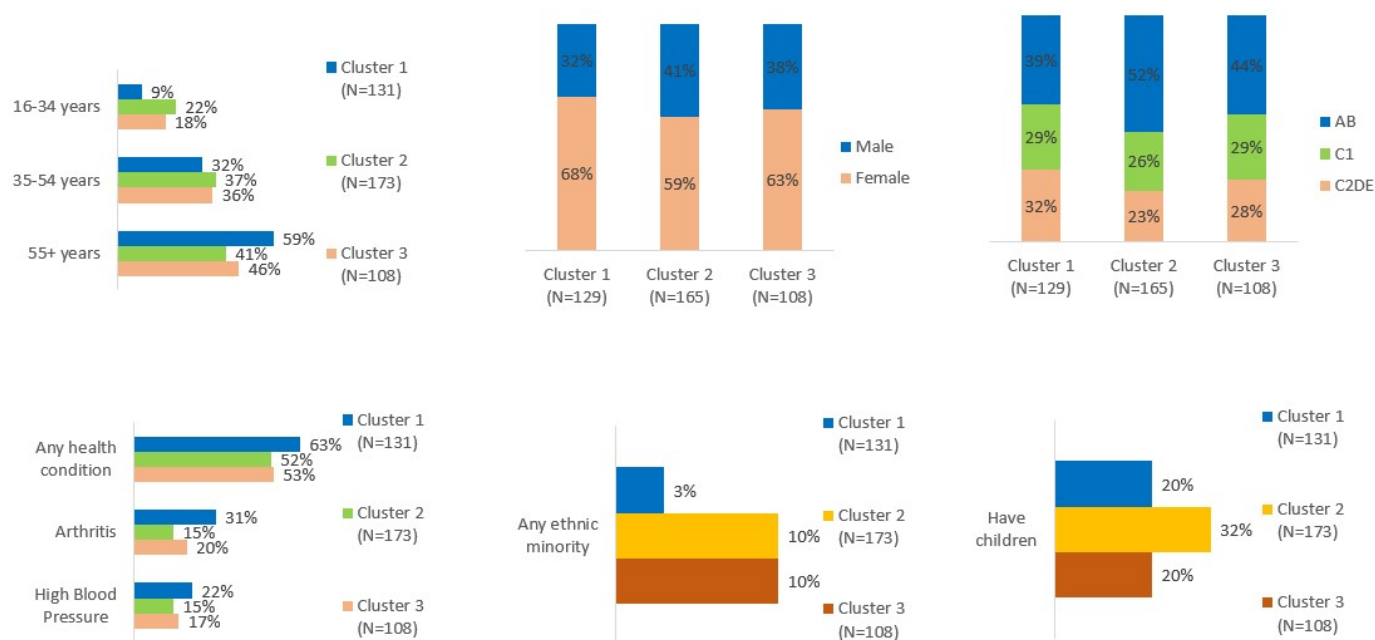


The sample population segmented into three distinct clusters in their attitude towards pharmacies

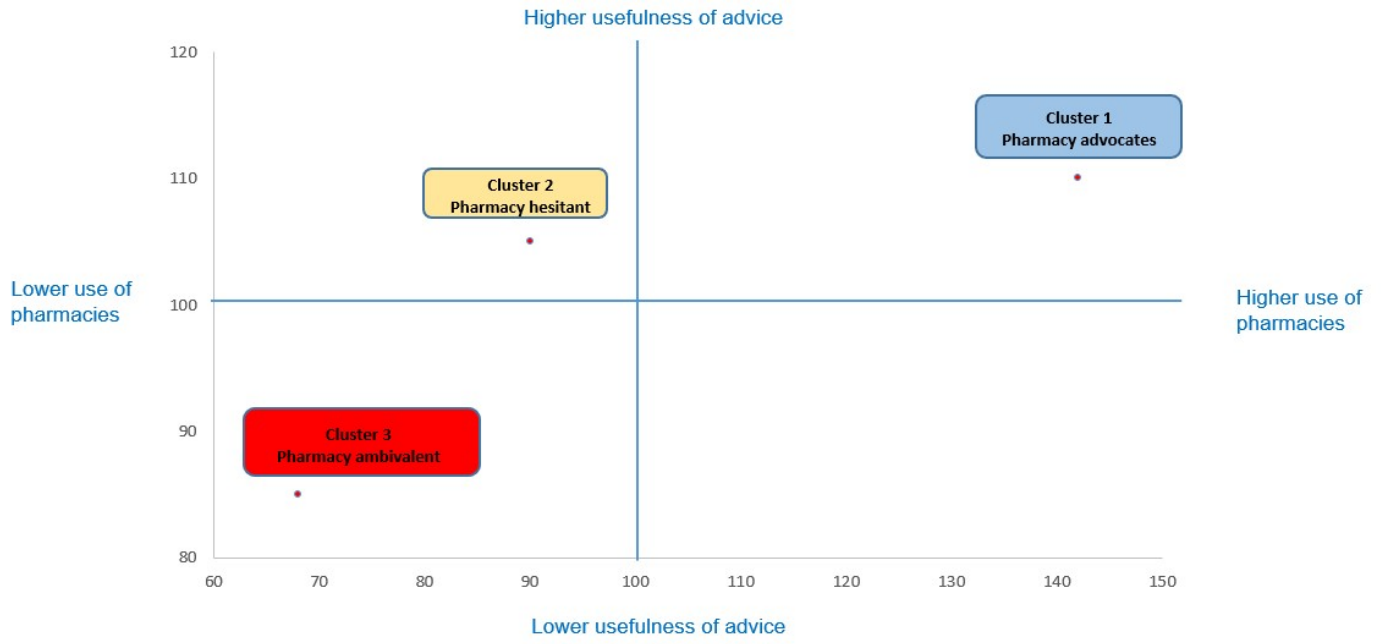
Cluster Characteristics



Demographic breakdown of the three clusters



Use of pharmacies and opinions of advice for the three identified clusters

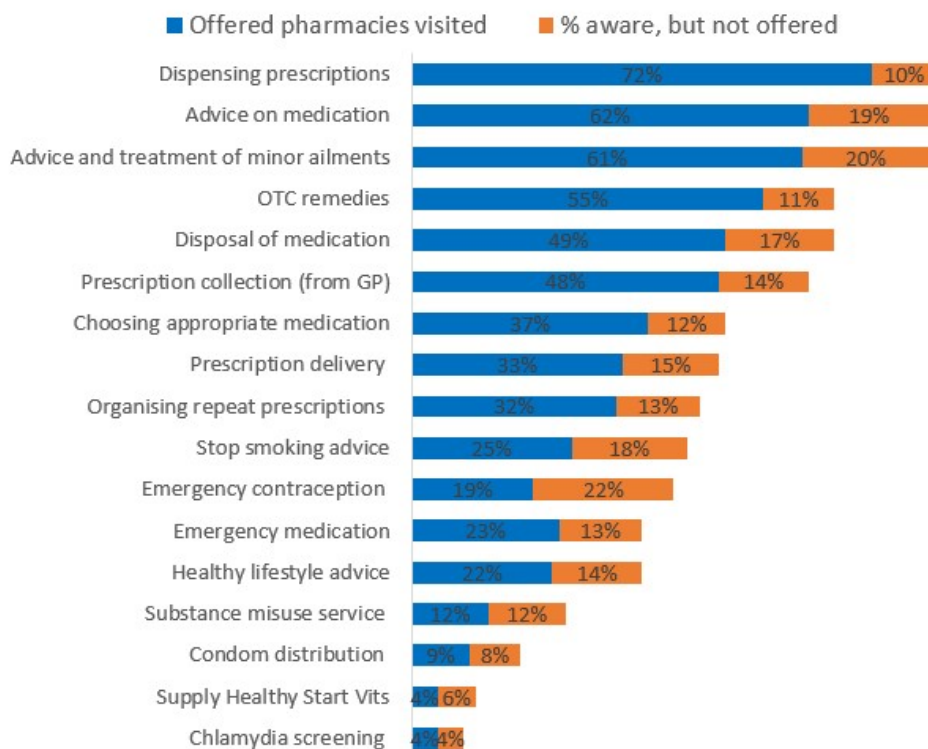


Awareness of Pharmacy Services

Respondents were asked about what extra services their usual pharmacy provided. Awareness was high for the key 'bread and butter' services offered by the pharmacies; dispensing prescriptions (81%), advice on medication (80%) and advice and treatment of minor ailments (80%). Awareness of providing over the counter (OTC) remedies was recorded at 65%, whilst high this would be preferred to be higher.

Awareness of all services was highest in the cluster 1 respondents with the cluster 3 respondents being lowest. Perhaps indicating a need for more effective information dissemination.

Figure 19: Which of the following services does your pharmacy provide?



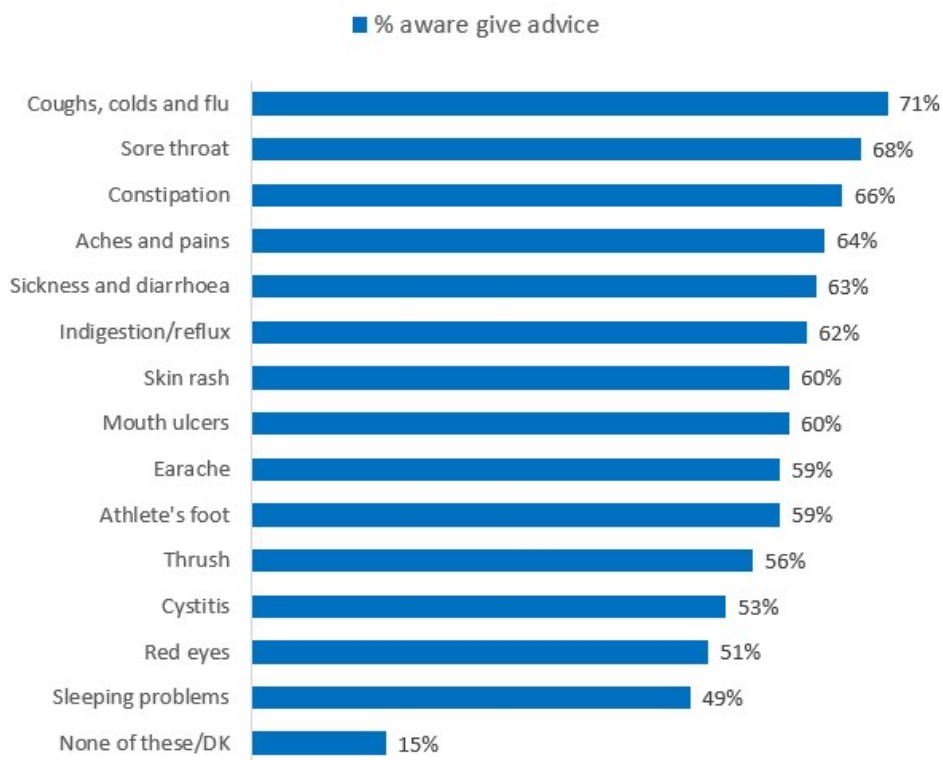
Q Which, if any, of the following services are you aware that pharmacies can offer? Which, if any, of the following services are offered at the pharmacies that you visit?
Base: all respondents (N=421)

Source: Pharmacy Patient Questionnaire 2022

Awareness of Pharmacy advice

Overall awareness of Pharmacists being able to offer advice for specific ailments was high. However, 15% of respondents were recorded as not being aware of any advice services offered by their pharmacist. This again may point to a need for further effective information to be disseminated.

There is a noticeable gap in awareness between clusters one and two. This gap is in the region of 15-20% for most services. Cluster three have a lower awareness again of around 10% on the cluster two respondents.

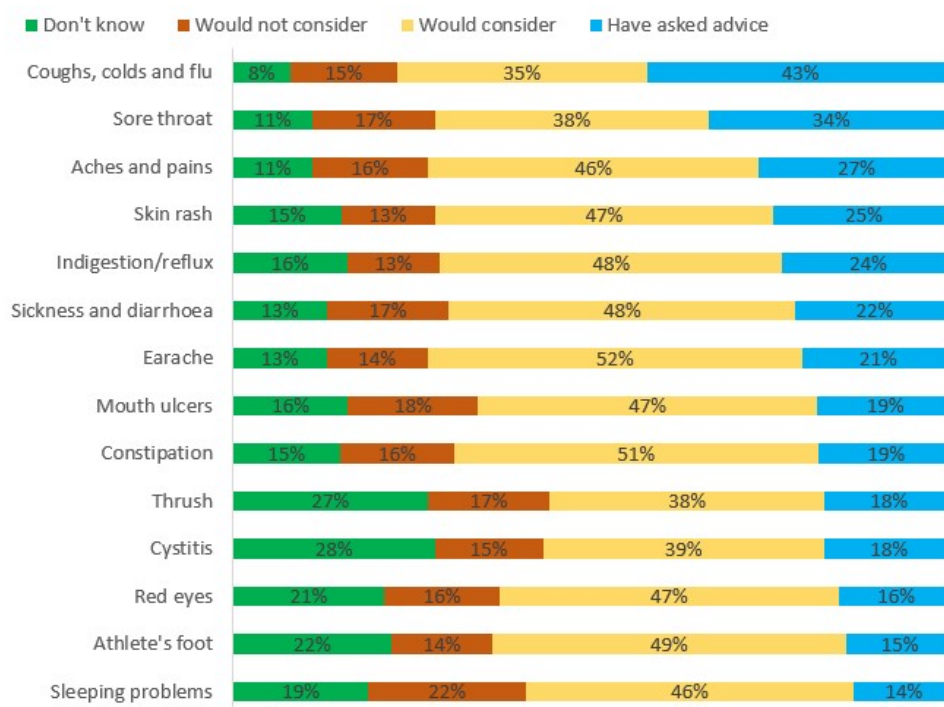


Q Which, if any, of the following are you aware pharmacists can treat or give advice on?
Base: all respondents (N=421)

Source: Pharmacy Patient Questionnaire 2022

Willingness to seek advice from a pharmacist

Willingness to approach or consider seeking advice from a pharmacist was high for most ailments. There is a noticeable portion of respondents who recorded don't know for all ailments. Ranging from 8% to 28% for the various ailments. This again perhaps highlights the need for effective communication to give advice on what services and advice pharmacists can offer.



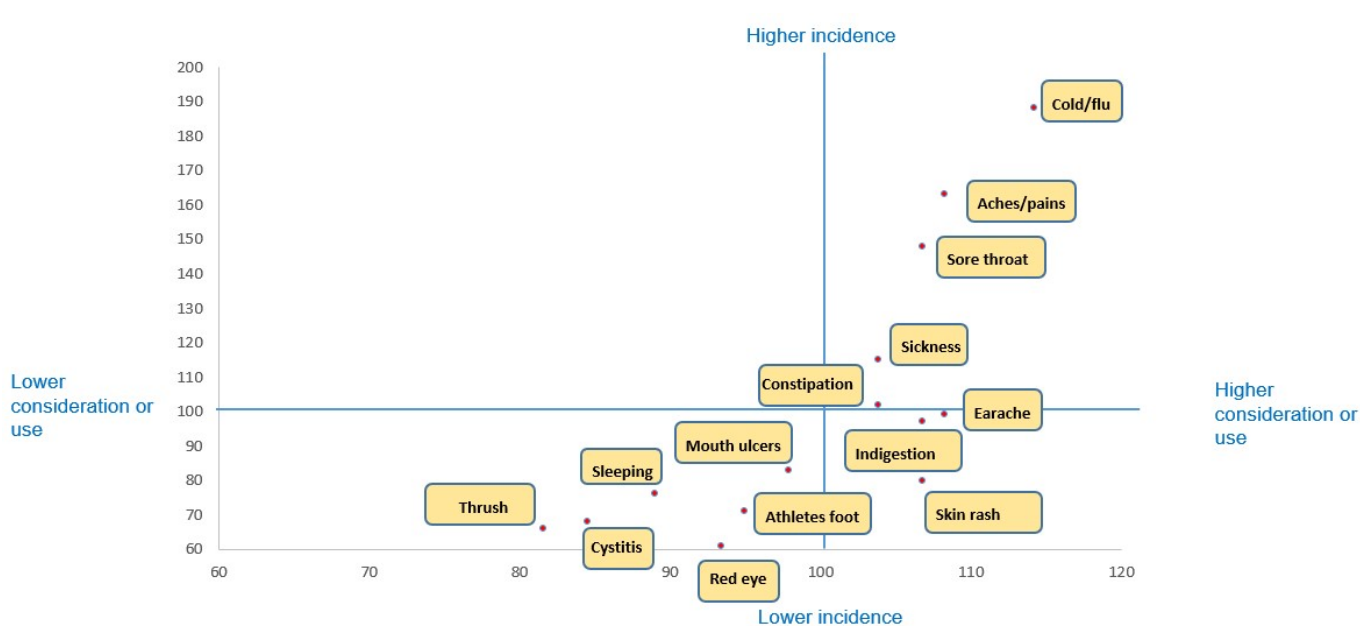
Q For each of these ailments please tell us your opinion of asking a pharmacist to treat this ailment or to provide advice.....?

Base: all respondents who have ever had ailment (N=see chart)

Source: Pharmacy Patient Questionnaire 2022

Incidence versus consideration of minor ailments

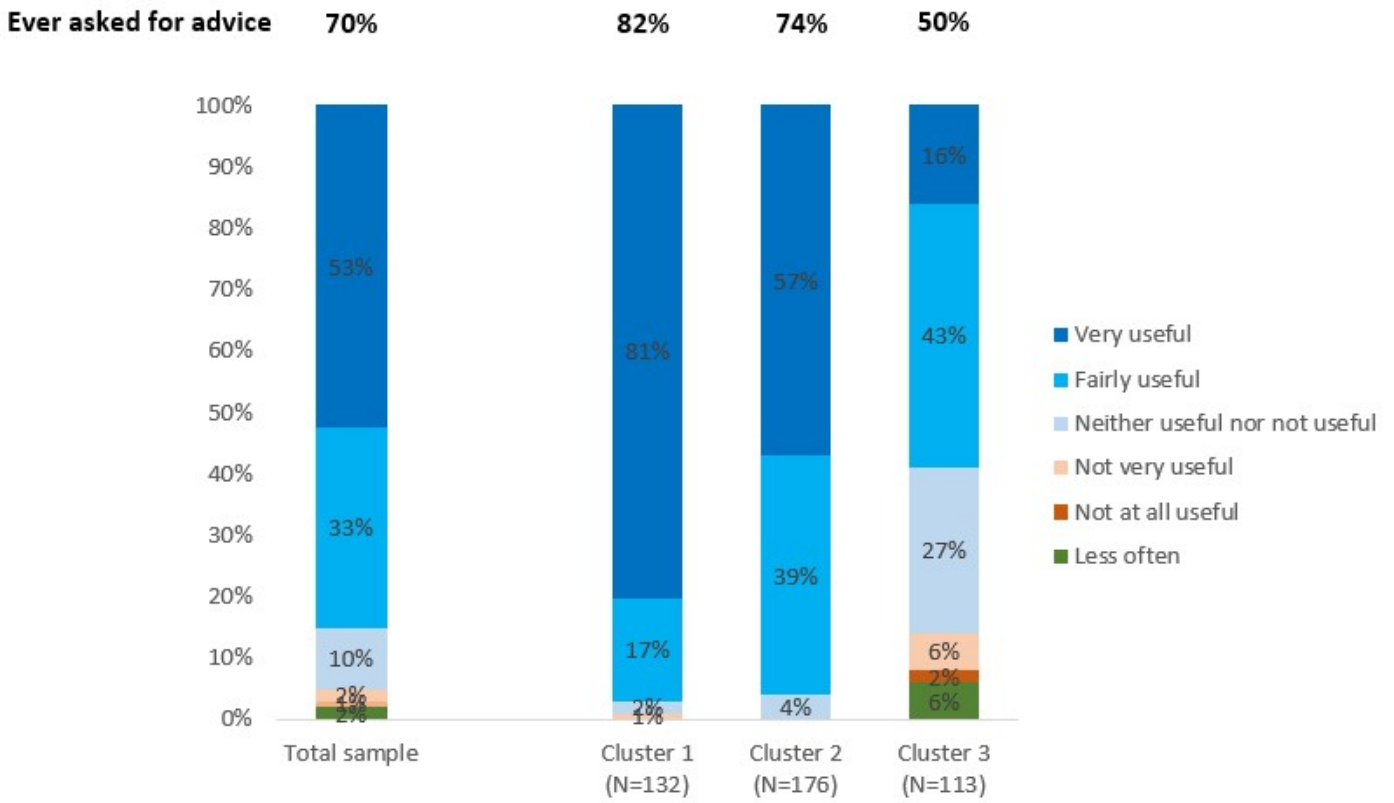
The chart below indicates a potential for some more targeted communication on a selection of common ailments. Those with high to medium incidence and low to medium consideration to seek advice from a pharmacist. This group of ailments would deliver most in promoting the service which pharmacists can offer and help other sections of the care community.



Source: Pharmacy Patient Questionnaire 2022

Usefulness of advice

Clusters one and two are relatively close in their willingness to seek advice from a pharmacist. Cluster three is noticeably lower. However, even here the numbers finding the advice un-useful are low. This really supports the value of the advice service which pharmacists offer.

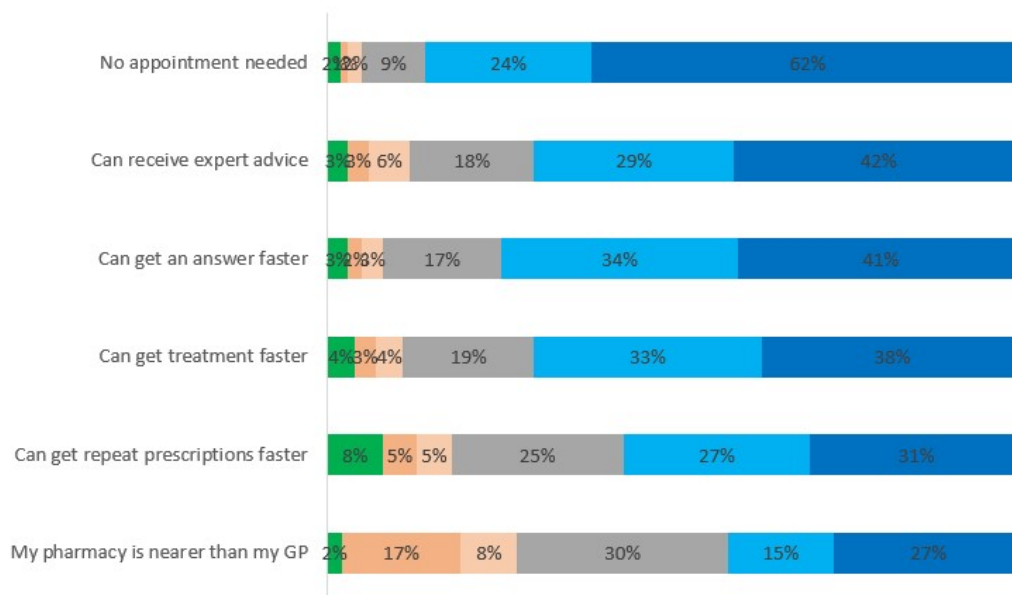


Q Which of these statements describe how useful you think the advice of a pharmacist is? It doesn't matter if you have never received advice?
Base: all respondents (N=1093)

Source: Pharmacy Patient Questionnaire 2022

Agreements attitudes to benefits

■ Don't know ■ Disagree strongly ■ Disagree slightly ■ Neither agree or disagree ■ Agree slightly ■ Agree strongly



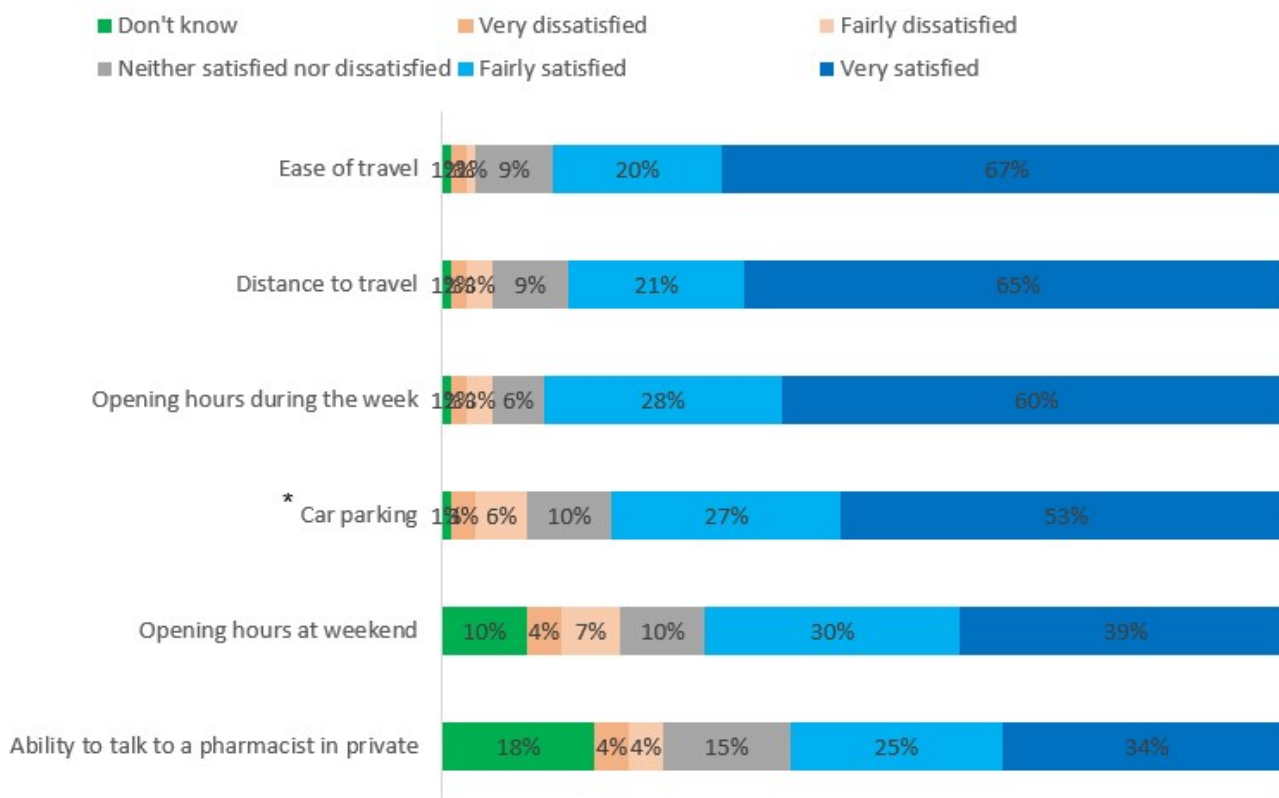
Q There are a number of benefits some people have said about using a pharmacy. How much do you agree or disagree that the following are benefits to you?
Base: all respondents (N=421)

Source: Pharmacy Patient Questionnaire 2022

Satisfaction with functional issues

Overall satisfaction appears relatively good. With higher satisfaction with the distance to travel to see a pharmacist and opening hours in the week being notably high. Lower was the opening times at weekend and ability to talk to a pharmacist in private.

Clusters two and three are recorded as noticeably lower for ability to talk to a pharmacist in private.



Q Still thinking about the pharmacy that you visit most often. How satisfied or dissatisfied are you with the following.....?

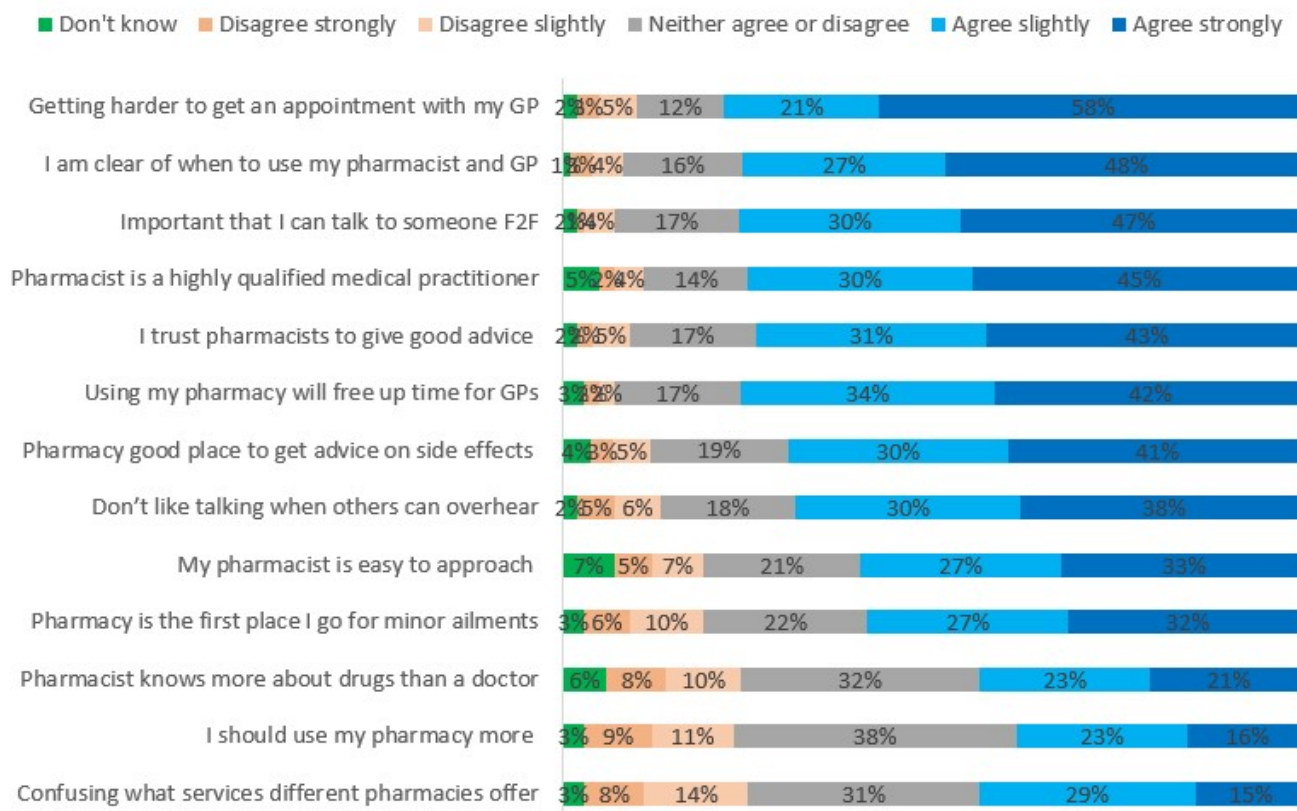
Base: all respondents (N=421)

* Those who travel by car

Source: Pharmacy Patient Questionnaire 2022

Agreement – Attitudes towards pharmacies

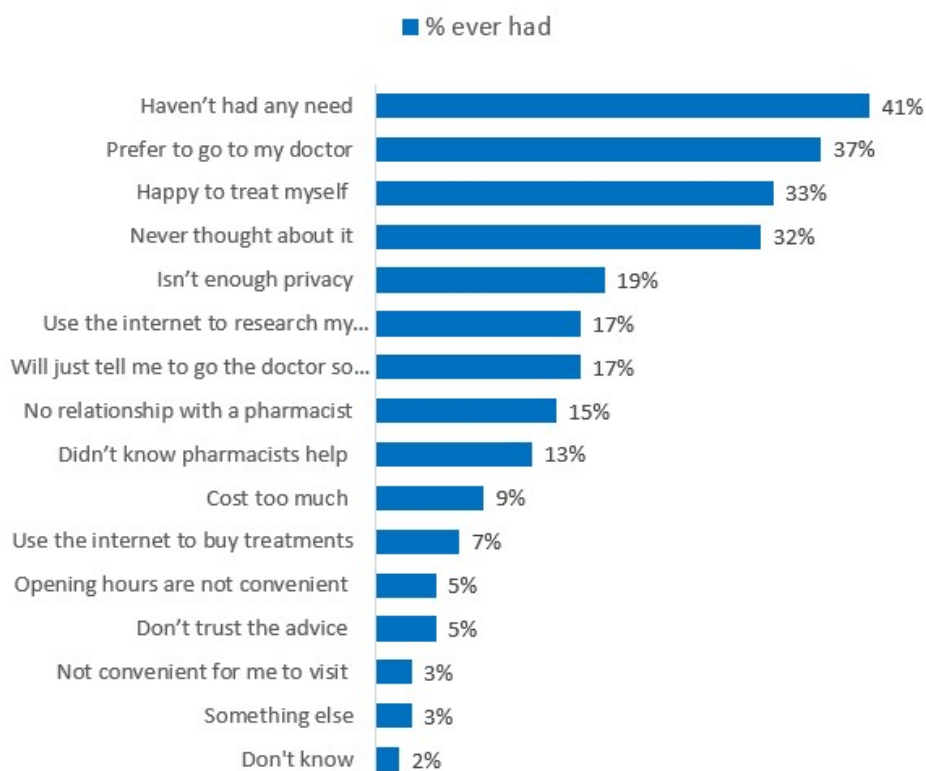
There was strong agreement (79%) recorded that it is more difficult to get a GP appointment. This could perhaps be used to promote the services pharmacists offer. Pharmacists are recognised as being highly qualified and trusted to give good advice. Almost half of the respondents agreed they could use their pharmacy more. However, 60% recorded their pharmacist was easy to approach and two-thirds don't like talking when others can overhear.



Q Below are something that other people have said about using their pharmacy. Please tell us how much you agree or disagree with each?
Base: all respondents (N=421)

Source: Pharmacy Patient Questionnaire 2022

Recorded reasons for not asking for advice



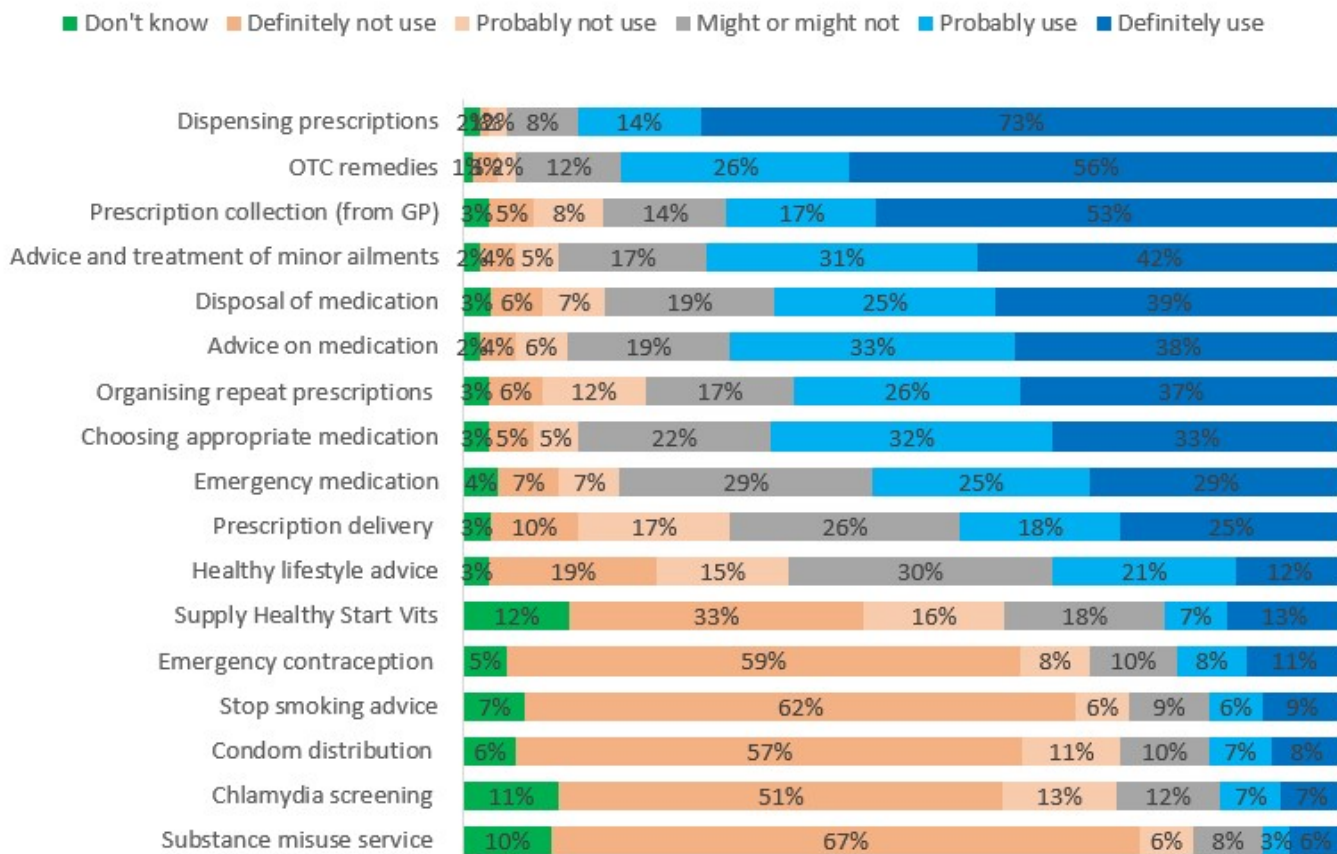
Q You said that there are some ailments that you wouldn't ask the advice of a pharmacist. Which, if any, of the following best describe your reasons?
Base: all respondents who would not ask for advice(N=207)

Source: Pharmacy Patient Questionnaire 2022

The different clusters recorded some common themes for not seeking advice from pharmacists. One key theme was the lack of privacy. However, there were some distinct sets within each cluster. Cluster 2 respondents were more likely to favour the non-specific responses like 'never thought about it' or 'no need prefer to go to the doctor'. This suggests that increased promotion may increase uptake within this cluster. Cluster 3 respondents largest answer was 'no relationship with pharmacist' followed by 'will just tell me to go to the doctor'. Self-diagnose and self-treat were also high in cluster 3.

Willingness to use pharmacy services

The variation in the 'willingness to use' question may be at least partially due to some services are relevant to a specific may be small sub-set of the population. For example, smoking and substance misuse. As may be expected the pharmacists core services recorded the highest percentages for example dispensing prescriptions and OTC remedies.



Q How likely or unlikely is it that you would use a pharmacy for each of the following in the future.....?

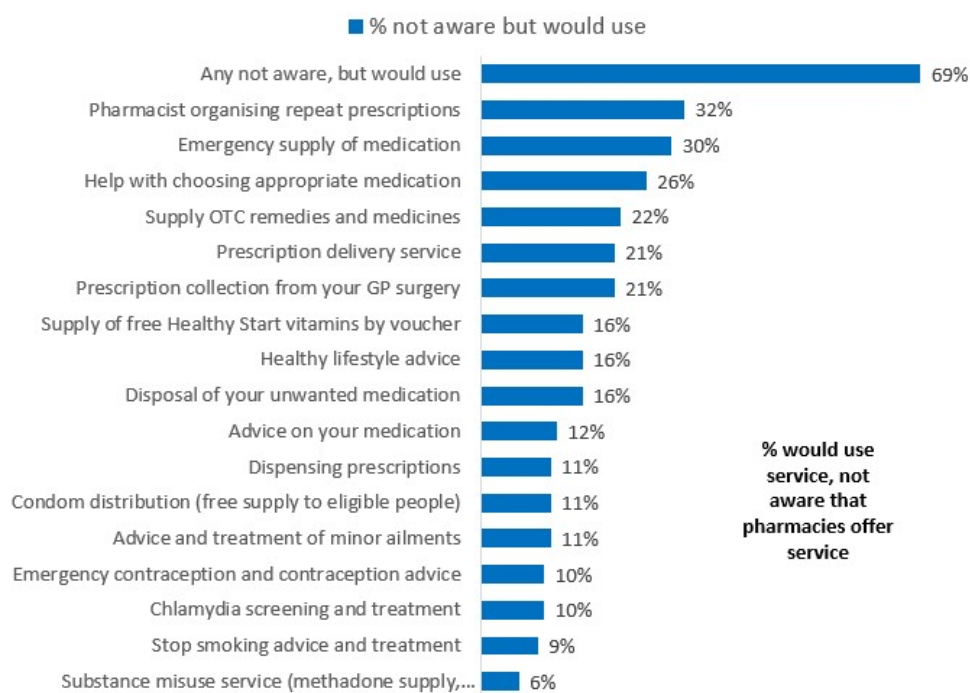
Base: all respondents (N=421)

Source: Pharmacy Patient Questionnaire 2022

Not aware of pharmacy services but would use

The chart below shows services offered by pharmacies which could increase in use if awareness of these services with the public were increased. 69% of respondents said they would use a service currently provided by pharmacists that they were unaware of at present. The largest potential service growth was in 'organising repeat prescriptions', 'emergency supply of medication' and 'help choosing appropriate medication'. Albeit, that some of these services may be used infrequently.

Cluster 2 respondents showed the highest potential for increased use of pharmacy services. Followed by cluster 3, with least potential in cluster 1, perhaps because of their comprehensive existing use of services at pharmacies. With Cluster 2 respondents the largest potential service uptake comes in 'organising repeat prescriptions', 'emergency prescriptions' and 'help choosing medications'. While cluster 3 respondents, 'prescription collection' and 'pharmacists organising repeat prescriptions' have the largest potential uptake.

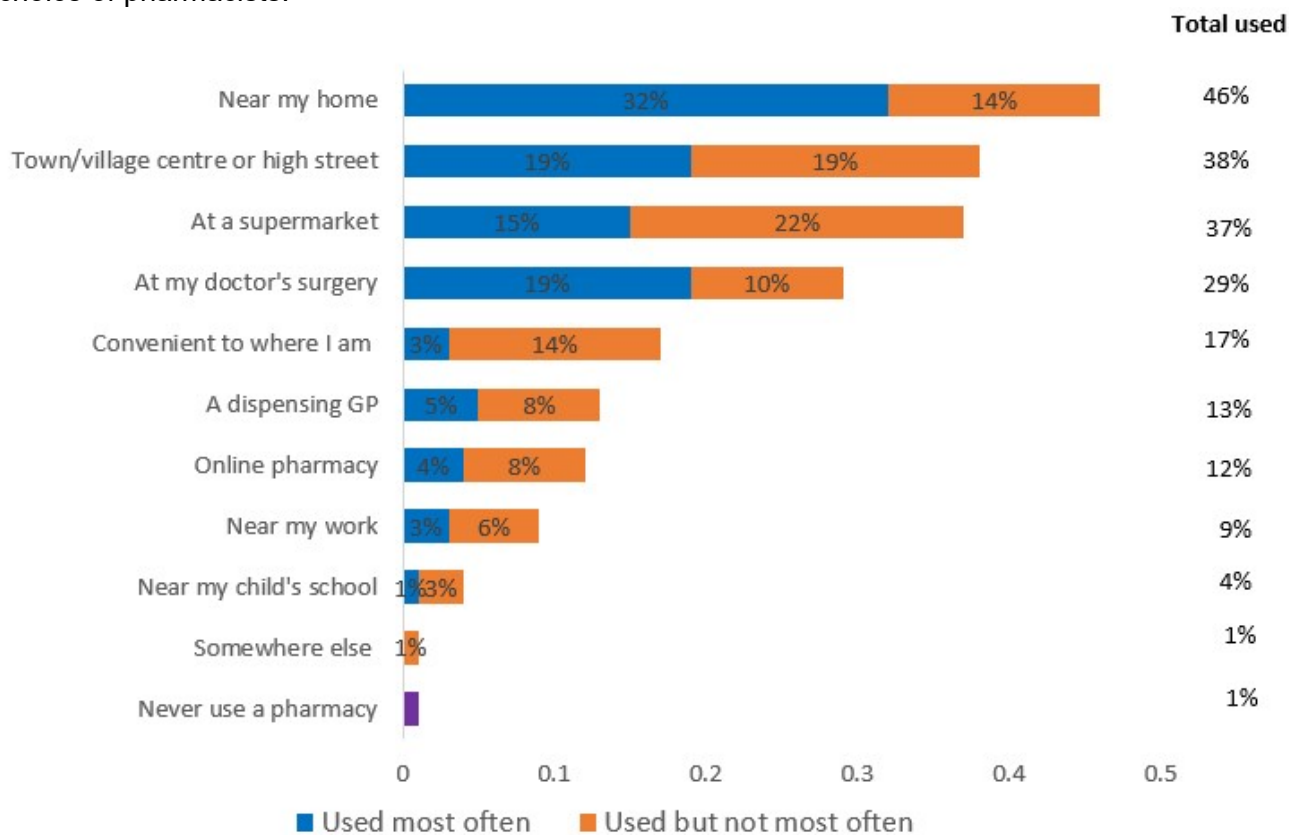


Q Which, if any, of the following services are offered at the pharmacies that you visit? How likely or unlikely is it that you would use a pharmacy for each of the following in the future....
Base: all respondents (N=421)

Source: Pharmacy Patient Questionnaire 2022

Types of pharmacy used

The location of the respondent's pharmacy varied. Most commonly used pharmacies were 'near my home'. Pharmacies 'on the high street' and 'in supermarkets' were often used by respondents. 29% of respondents used pharmacies at GPs, but 66% of respondents had never used these. This is probably due to the rural/urban origin of respondents. Where in a rural setting the GP pharmacists are more common and there is less choice of pharmacists.



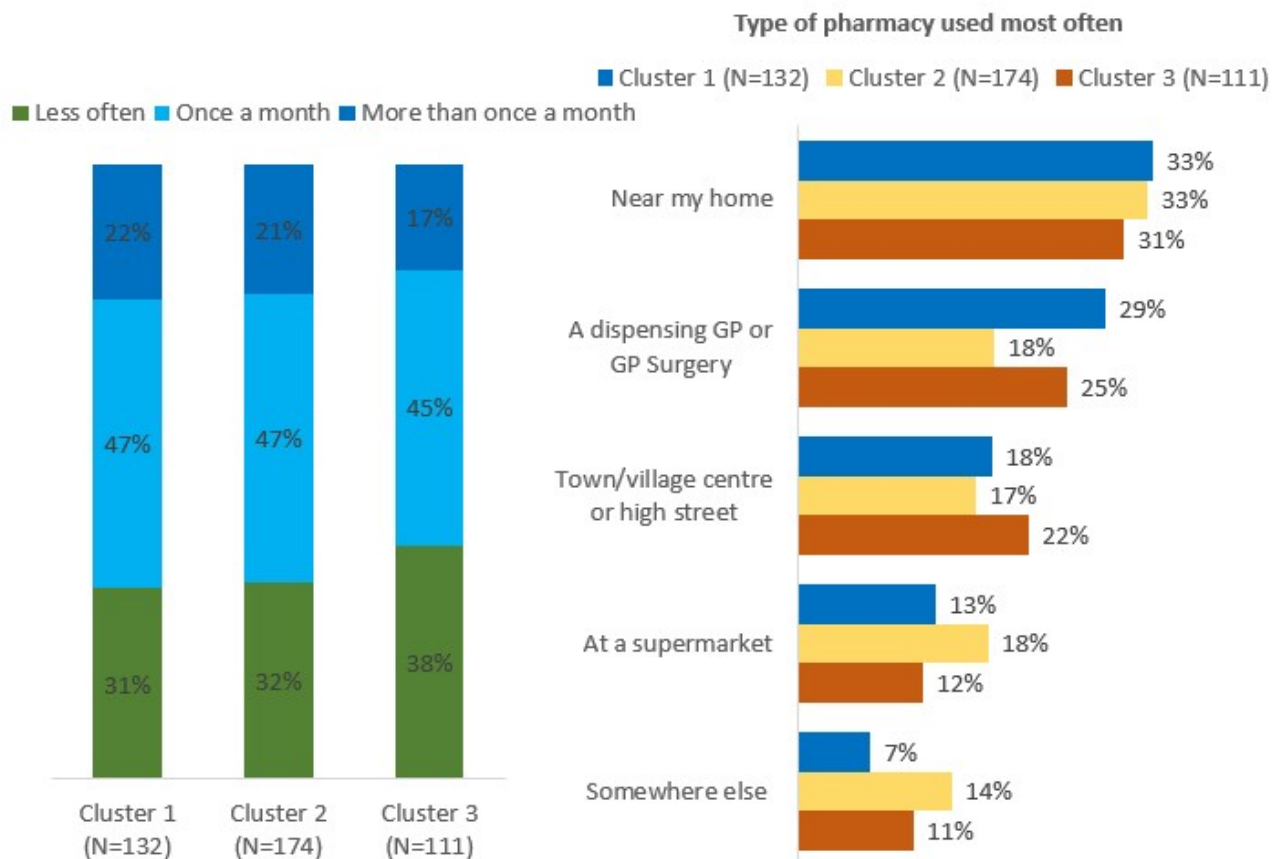
Q In which, if any, of the following places do you ever visit a pharmacy? And which pharmacy do you visit most often?

Base: all respondents (N=421)

Source: Pharmacy Patient Questionnaire 2022

Use of pharmacies by cluster

There is little difference in the frequency of visiting between the different clusters. Cluster 3 are the least likely to visit a pharmacy. Cluster 2 were more likely to visit a pharmacy at a supermarket. Due to the environment, this could impact on some key themes like engaging with the pharmacist and lack of privacy?



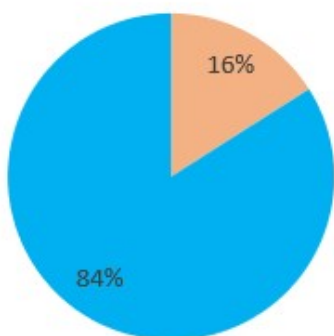
Q Do you have a pharmacy where your prescription is directly sent to by your GP? And which pharmacy do you visit most often?
 Base: all respondents (N=421)/ all respondents with a pharmacy where prescriptions sent (N=347)

Whether GP sent prescription

Most prescriptions were sent by the respondents GP to their pharmacy. This pharmacy was most likely to be 'near home'. Pharmacies at GP surgeries were also popular to collect prescriptions. Only 12% used pharmacies at supermarkets for collecting prescriptions. Even though more respondents had used these pharmacies (37%).

Whether have pharmacy where prescriptions sent by GP

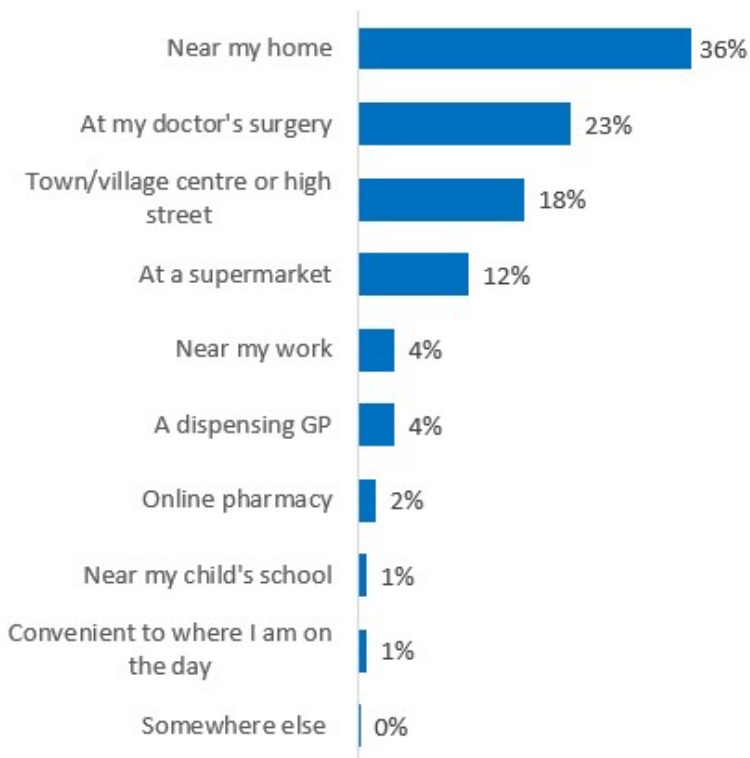
■ Don't have pharmacy ■ Have pharmacy



**80% rural
92% urban**

Type of pharmacy prescription sent

■ Total %



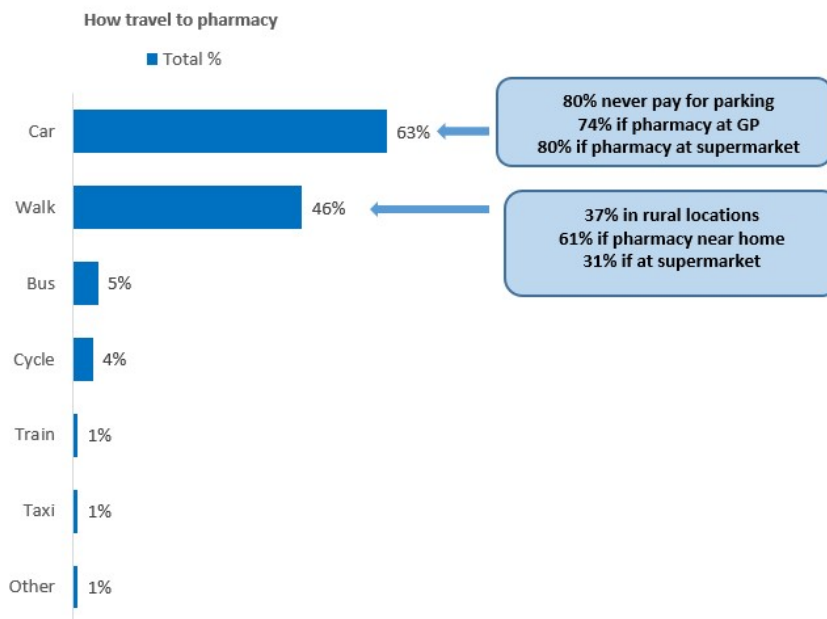
Q Do you have a pharmacy where your prescription is directly sent to by your GP? And which one does your GP send your prescriptions to?

Base: all respondents (N=421)/ all respondents with a pharmacy where prescriptions sent (N=347)

Source: Pharmacy Patient Questionnaire 2022

Method of transport – to pharmacy

Respondents living in rural locations were more likely to use their cars to visit pharmacies (70%) and less likely to walk (37%).

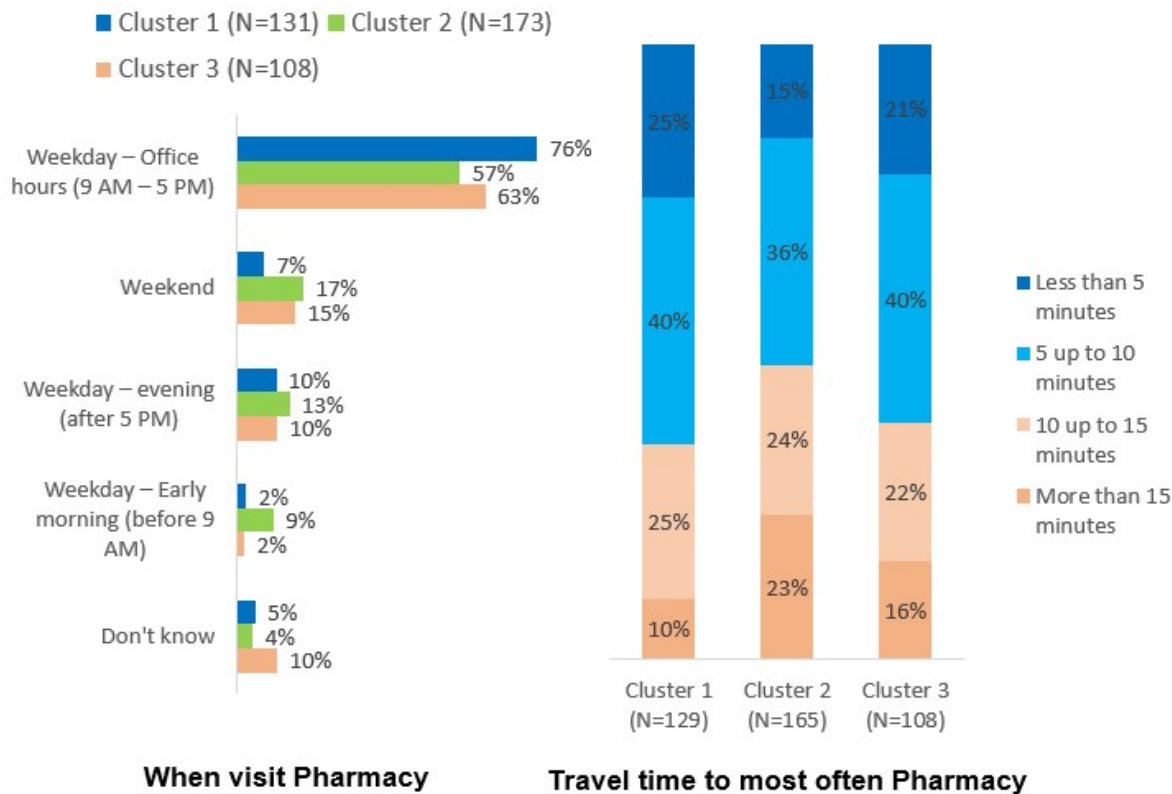


Q Do you have a pharmacy where your prescription is directly sent to by your GP? And which one does your GP send your prescriptions to?
Base: all respondents with most often pharmacy (N=402)

Source: *Pharmacy Patient Questionnaire 2022*

Visiting Pharmacies – times and travel

The most common time for visiting the pharmacist was ‘weekday, during office hours’. Cluster 2 respondents are more likely to visit outside ‘weekday office hours’, particularly ‘weekday mornings’ and ‘weekday evenings’. Cluster 2 respondents also travelled furthest, with nearly half travelling more than 10 minutes to visit their pharmacy.

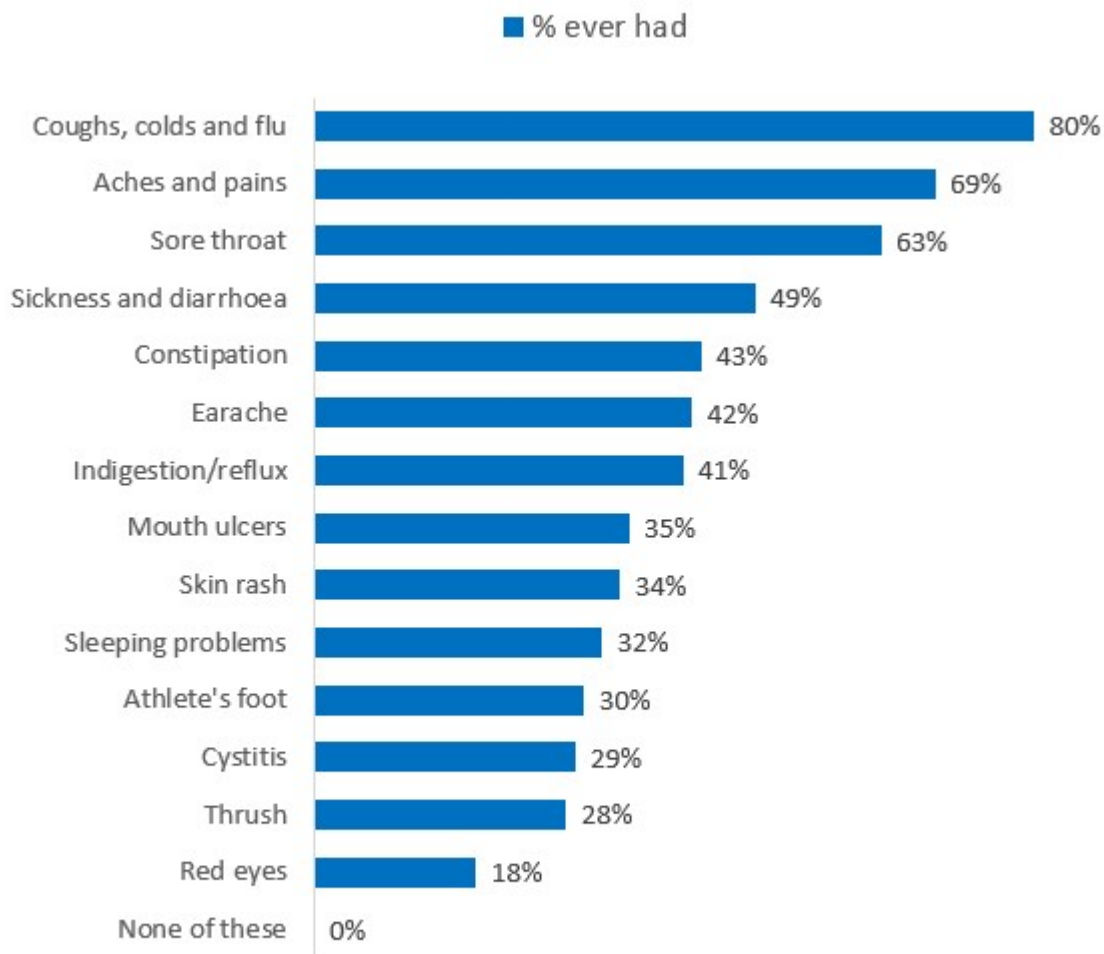


Q When do you usually visit a pharmacy? Thinking about the pharmacy that you visit most often. How long does your journey usually take when making a visit?
 Base: all respondents who visit pharmacies (N=412)

Source: Pharmacy Patient Questionnaire 2022

Minor ailments

All respondents had suffered from at least one of the minor ailments below. All of which the pharmacist can offer advice or services for. Cluster 1 responded with having had slightly more of these minor ailments.



Q Which, if any, of the following minor ailments have you ever had?

Base: all respondents (N=421)

Source: *Pharmacy Patient Questionnaire 2022*

Access to pharmaceutical services

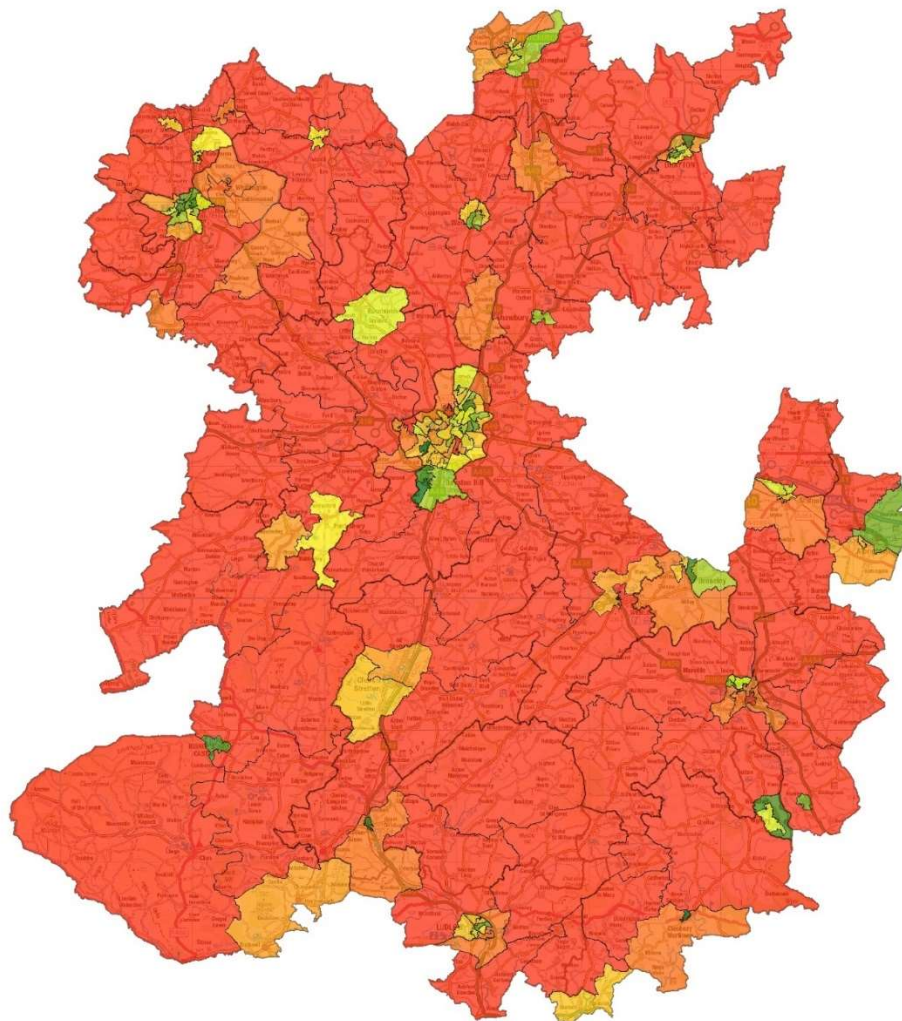
Geographical access

The map below gives a high level overview of 'geographical barriers', which relate to the physical proximity of local services for citizens living in Shropshire. They compare the mean road distance for people living in Shropshire's neighbourhood to the closest:

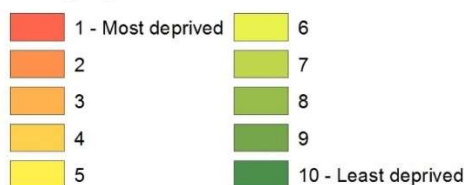
- Post office
- Primary school
- General store or supermarket
- GP surgery

Those areas in the deepest red are in the 1st decile, meaning they are amongst the most deprived in terms of access in whole of England.

Figure 70: Indices of Multiple Deprivation 2019; Geographical Barriers Sub-Domain



Geographical Barriers Sub Domain - National Decile



According to the Census 2011 in Shropshire there is a high proportion of households (84.2%) that own at least one car, partly a reflection of the dispersed nature of the population in the county. Whilst this means that some citizens are still able to access services from access-deprived areas there are significant numbers of in the County for whom access to dispensing services is limited. That public transport is limited in many of the rural parts of the county compounds this issue.

The table below shows how many citizens and neighbourhood areas sit inside and outside of different thresholds for different methods of transport. For example, 146,000 citizens in Shropshire are within 10 minutes' walk of a dispensing service, either through a community pharmacy or dispensing practice. By the same measure, 178,500 are outside of 10 minutes' walk to a dispensing service, and there 88 and 105 neighbourhoods inside and outside of this travel type and travel time respectively. This also included provision situation just outside the border of the country and a 1.5km buffer area has been applied in this analysis.

NB. LSOA inclusion/exclusion calculations use the polygon centroid.

Figure 71: Count of included and excluded citizens and LSOAs areas by method of transport and travel time

Method of Transport	Travel time	Number of citizens		LSOAs	
		Inside	Outside	Inside	Outside
Walk	10 mins	146,900	178,500	88	105
	20 mins	218,200	107,200	128	65
	30 mins	230,500	94,900	135	58
Public Transport	10 mins	214,600	110,800	127	66
	20 mins	259,200	66,200	153	40
	30 mins	278,200	47,200	165	28
Car	5 mins	242,000	83,500	142	51
	10 mins	303,700	21,700	179	14
	15 mins	323,100	2,400	191	2

Source: Analysis based upon SHAPE data 2022

Most of the potentially excluded populations in Shropshire are in rural villages where access to services and amenities is generally more limited and public transport provision scarcer. Even in the mostly densely populated areas of Shropshire (in urban city and town settings) there are likely to be groups from whom access is inhibited by a lack of access to personal transport or mobility issues.

Figure 72: Count of included and excluded citizens in different rural/urban classifications by method of transport and travel time

Method of Transport	Travel time	Number of citizens outside by rural/urban classification					
		Urban city and town	Urban city and town in a sparse setting	Rural town and fringe	Rural town and fringe in a sparse setting	Rural village and dispersed	Rural village and dispersed in a sparse setting
Walk	10 mins	55,100	8,600	16,200	-	85,500	13,100
	20 mins	5,100	-	8,500	-	82,700	10,900
	30 mins	-	-	8,500	-	75,500	10,900
Public Transport	10 mins	11,200	1,100	7,800	-	77,500	13,100
	20 mins	-	-	-	-	55,300	10,900
	30 mins	-	-	-	-	37,900	9,300
Car	5 mins	-	-	3,700	-	68,900	10,900
	10 mins	-	-	-	-	16,400	5,400
	15 mins	-	-	-	-	1,400	900

Source: Analysis based upon SHAPE data 2022

Broader deprivation can compound access-deprivation. Although deprivation tends to be concentrated in urban areas, there is a general inverse relationship between deprivation and rurality with less densely populated areas being less deprived by measures like the Indices of Multiple Deprivation due to relative material affluence. However, this often masks pockets of deprivation compounded by issues of access and other health issues such as social isolation.

The table below, as in the previous tables, shows the number of citizens excluded when taking into account different travel types and travel times. Here the counts are split by deprivation decile. As one would anticipate the exclusion profile is similar to that of the distribution of the general population, with the highest numbers in the middle deciles 4 to 6.

Figure 73: Count of included and excluded citizens in deprivation deciles by method of transport and travel time

		Number of citizens outside by deprivation decile (1 is most deprived)									
Method of Transport	Travel time	1	2	3	4	5	6	7	8	9	10
Walk	10 mins	2,800	1,600	1,300	37,400	44,300	35,200	22,200	17,200	9,600	6,900
	20 mins	-	-	-	23,700	33,800	26,100	13,200	10,300	-	-
	30 mins	-	-	-	23,700	33,800	21,100	13,200	3,100	-	-
Public Transport	10 mins	-	-	-	27,700	34,900	23,400	13,200	5,400	2,600	3,600
	20 mins	-	-	-	16,300	25,300	12,300	10,300	1,900	-	-
	30 mins	-	-	-	12,000	21,600	9,400	4,300	-	-	-
Car	5 mins	-	-	-	18,800	29,300	19,100	13,200	3,100	-	-
	10 mins	-	-	-	7,800	7,300	6,700	-	-	-	-
	15 mins	-	-	-	2,400	-	-	-	-	-	-

Source: Analysis based upon SHAPE data 2022

To account for these differences in the proportions of overall population in each decile, the table below shows the same data, but rather than numbers of population excluded it shows the ratio of citizens in each deprivation decile in Shropshire who are excluded from each travel type/travel time combination. Each cell is also colour coded red to green, with red cells showing ratios that have very high ratios i.e., the greatest proportion of population is excluded in red cells for that deprivation decile, with greens the least.

Although the most deprived decile (decile 1) has a high proportion of population excluded from being 10 minutes' walk from a dispensing service, the number of citizens in deciles 1 to 3 in Shropshire is relatively low (2,800, 1,600 and 1,300 respectively) and therefore we would need to be careful in drawing strong conclusion amongst these population groups.

Deciles 4 to 8 do have large numbers of citizens within them however, and in these groups, we can see a sharp social gradient; note how the numbers decrease and cells change from orange to yellow and green as one traces them to the right where the level of overall deprivation decreases. It shows that when accounting for other factors more deprived neighbourhoods have less access to dispensing services than less deprived areas.

Figure 747: Ratio of total population excluded in deprivation deciles by method of transport and travel

		Ratio of citizens outside by deprivation decile (1 is most deprived)									
Method of Transport	Travel time	1	2	3	4	5	6	7	8	9	10
Walk	10 mins	0.98	0.13	0.14	0.63	0.68	0.67	0.51	0.47	0.36	0.39
	20 mins				0.40	0.52	0.50	0.31	0.28		
	30 mins				0.40	0.52	0.40	0.31	0.08		
Public Transport	10 mins				0.47	0.54	0.45	0.31	0.15	0.10	0.21
	20 mins				0.27	0.39	0.23	0.24	0.05		
	30 mins				0.20	0.33	0.18	0.10			
Car	5 mins				0.32	0.45	0.36	0.31	0.08		
	10 mins				0.13	0.11	0.13				
	15 mins				0.04						

Source: Analysis based upon SHAPE data 2022

The following is a list of those neighbourhoods (LSOAs) which are most excluded. This means that they most frequently appear outside the boundaries of the different combination of travel types and travel times we've used so far in this analysis. All of the areas listed are outside at least 8 of the 9 categories.

Commensurate with the above findings around rural/urban classification, all of the most excluded areas are rural village locations.

Figure 75: List of most excluded neighbourhoods by number of travel type and time combination conditions not met

LSOA code	Rural/Urban category	IMD decile	Population	Exclusions
E01029004	Rural village and dispersed in a sparse setting	4	923	9
E01029015	Rural village and dispersed	4	1,432	9
E01028858	Rural village and dispersed	5	2,247	8
E01028868	Rural village and dispersed	6	1,466	8
E01028869	Rural village and dispersed	5	1,745	8
E01028882	Rural village and dispersed	4	1,744	8
E01028899	Rural village and dispersed	6	1,868	8
E01028960	Rural village and dispersed	5	1,335	8
E01028961	Rural village and dispersed	6	1,916	8
E01028993	Rural village and dispersed	4	1,529	8
E01028994	Rural village and dispersed in a sparse setting	6	1,424	8
E01033529	Rural village and dispersed in a sparse setting	4	1,051	8
E01033530	Rural village and dispersed in a sparse setting	5	1,970	8

The map below shows which areas in dark green are accessible in 10 minutes by car in dark green. Those areas and populations which are the most excluded are shown by the green border.

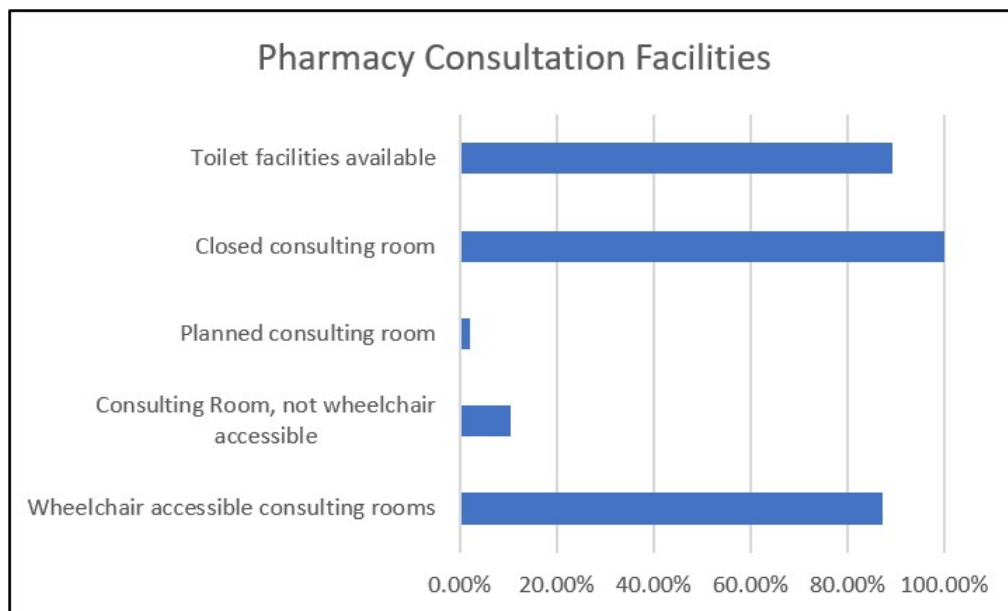
- Some areas on the western border of the county may be served by provision in Wales, for which data is not yet available to integrate into this analysis. For example, the area in the west of the map may be served by provision from Welshpool and Montgomery. There does not seem to be a large conurbation, where dispensing and broader provision is characteristically higher, near the north-western excluded area which may require further attention.
- As observed in previous iterations, the most excluded areas tend to be grouped in south and south-west Shropshire.
- There are potential hinterlands of provision between Shrewsbury, Church Stretton and Much Wenlock, and between Cleobury Mortimer and Highley
- Some areas are no longer excluded when the 1.5km buffer to Shropshire is extended;
 - At 3km – The north Shropshire area west of Market Drayton is served by Boots in Audlem in Cheshire.
 - At 5km - Southern half of the area in the north-east, south of Market Drayton, is served by 3 community pharmacies and 1 dispensing practice in Newport

Shropshire Community Pharmacy Questionnaires

Pharmacy Consultation Facilities

The community pharmacy questionnaire asked about consultation facilities in the pharmacy. The figure below indicates the types of consultation facilities provided by the responding pharmacies. The majority have wheelchair access and closed consultation rooms; 89% have access to toilet facilities.

Figure 28 Pharmacy Consultation Facilities



Source: PNA Pharmacy Questionnaire 2022

Languages – within pharmacies

The Shropshire Community Pharmacy Questionnaire asked about languages that were spoken within the pharmacy. Respondents were asked to give an indication of the languages other than English available within their pharmacies; 15 responded indicating the use of 15 languages, as shown on Table 39.

Table 39: Languages available in pharmacies

Languages spoken in pharmacies	Number of respondents
Urdu	5
Punjabi	5
Hindu	4
Mandarin	2
German	2
Spanish	2
Welsh	2
Bengali	1
Italian	1
Latvian	1
Polish	3
Romanian	1
Gujarti	1
Romanian	1
Cantonese	1

Source: PNA Pharmacy Questionnaire 2022

Gaps in pharmaceutical services in Shropshire

1. Overall, there are sufficient numbers and a good choice of pharmacy contractors to meet Shropshire's pharmaceutical needs.

Shropshire has 47 community pharmacies, of which one is distance-selling and in rural areas there are 15 GP practices that can dispense to patients registered with their practice. The rate of community pharmacies per head of population is 1:6,829 which is notably higher than the national average of 1:4,870. However, when comparing the rate of pharmacies and dispensing practices combined, Shropshire has a rate of 1:4,863 compared to 1:4,462 for England. This shows the particularly important role dispensing practices play in provision across the county. Generally, there is good geographical coverage of pharmaceutical services across Shropshire and the majority of residents can access them easily.

In terms of opening hours, there are 3 '100 hour' pharmacies across Shropshire equating to around one in fifteen pharmacies, with residents in Shrewsbury and Oswestry (North Shropshire) having access to a community pharmacy for at least 100 hours during the week. Most residents have good access to a pharmacy during weekdays and Saturdays. However, there appears to be less provision and choice on Sundays in South Shropshire and in particular on Sundays (see below).

2. Review the opening times of pharmacies on Sundays specifically in South Shropshire.

There is limited provision on Sundays in the south of the county as acknowledged by key stakeholders in the system and public consultation responses. In particular, despite the small sample size, the formal consultation had a disproportionate number of responses mentioning service provision in Ludlow specifically. There is a question whether this meets the demand threshold for "expansion" of pharmaceutical services as there are doubts across the system with regard to sustainable amount of prescription items prescribed out of hours (including Sundays) requiring dispensing.

Instead, the number of dispensing GP practices should be considered and emphasis should be made on existing pharmacies within the area to provide additional opening if needed.

Since the last assessment provision has increased for Bank Holidays. NHSE also work with community pharmacies to ensure there are adequate pharmaceutical services available on Christmas Day and Easter Sunday as the two days where pharmacies are still traditionally closed.

Feedback from contractors emphasises the significant challenges faced since the last needs assessment in terms of getting pharmacists to work regular shifts, having an impact on areas and times of currently limited provision. Additionally, this assessment recognises significant workforce issues and specifically the lack of pharmacists available, especially at weekends, and the financial implications of specific provision to address any limitations in Shropshire.

Locum pharmacists have already been called in from as far away as Manchester, and pharmacies are already struggling financially, both locally and nationally. There is pressure to operate to core hours only due to current and specific impacts of cost of living pay awards to staff, increased costs of energy and general running costs. Whilst supplementary hours may be desirable, the feedback back from contractors and the Local Pharmaceutical Committee (LPC) is that this could only be maintained with additional funding.

The LPC in particular note that forthcoming rurality mapping for controlled localities by NHSE&I will further aid understanding of variance in provision.

3. Consider future joint training sessions bringing together representatives from community pharmacy and other organisations' pharmacists to promote integrated working

Of specific note is that community pharmacists, unlike other parts of primary care, do not have protected learning time and due to regulatory issues, a responsible pharmacist must be present during the opening hours of pharmacies. This severely reduces opportunities to undertake training, which predominantly has to be completed outside of trading hours or involve provision of locums.

Potential training between community pharmacy and other providers could aid knowledge in areas specifically prioritised by stakeholders, for example training around prescribing for those with specific conditions, such as mental health conditions. Pharmacies have already undertaken suicide awareness as part of the Pharmacy Quality Scheme.

4. Explore options for improving communications around provision of services delivered in community pharmacy

There is a need to raise awareness, signposting and improve the availability of online information to promote the services currently available. There are also opportunities for both the HWB and within the Integrated Care System to capitalise on the capacity within the range of services offered from community pharmacies and for future service development.

Although responses to the patient survey were generally positive about community pharmacies, a gap that was highlighted in some of the comments was that there needed to be better communications about the specific services that community pharmacies provide, and which pharmacies have signed up to provide these services.

Pharmacies already promote specific services that they provide, with some use of social media as well as reaching out through their NHS partners. The system as a whole strongly endorses working collectively to further support this in the future.

Prescription on discharge is usually fulfilled by hospital pharmacies, but ongoing we should fully utilise DMS to ensure community pharmacies get timely information, including notification of when a patient goes into hospital. This would also help avoid waste from the likes of blister packs etc.

Furthermore, there is an overarching commitment from the ICS to identify ways in which health care can increasingly be delivered outside hospital and traditional health care settings. As demand for health and social care services is rising due to demographic changes, it is important that more can be done to improve the health and wellbeing of the population in communities. Community Pharmacies are well placed to deliver services in local communities and therefore have a profound impact on the health of our population over coming years.

Consideration should be given to including community pharmacy and the services they can provide in future commissioning plans and strategies in order to support the delivery of community-based services. Recent developments which will have a profound effect on the health of the population and therein pharmacy activity e.g., Shrewsbury Health Hub, did not involve pharmacies in the first phase. The LPC and community pharmacies are keen to be involved as they need to ensure their service provision supports and augments the aims of such innovations.

5. The HWB will monitor the development of major housing sites and produce supplementary statements to the PNA if deemed necessary, to ensure that appropriate information on pharmacy needs is available.

Appendix 1 Overview of Contract Applications and Market Entry

Pharmacy Contract Applications

NHS England is responsible for local provision of pharmaceutical services and maintaining pharmaceutical lists. Applications, once received into NHS England via Primary Care Services England (PCSE) website are reviewed by the Pharmacy Regulations Committee based in the Regional Team on a monthly basis.

In respect of the area of each Health and Well Being Board (HWB), the NHS England's representative PCSE must prepare, maintain and publish 2 lists of persons other than medical or dental practitioners, who provide pharmaceutical services in that area.

Those lists (which are pharmaceutical lists) are:

- a) a list of persons who undertake to provide pharmaceutical services in particular by way of the provision of drugs; and
- b) a list of persons who undertake to provide pharmaceutical services only by way of the provision of appliances.

Those lists must include:

- a) the address of the premises in the area of the HWB at which the listed person has undertaken to provide pharmaceutical services ("the listed chemist premises");
- b) the days on which and times at which, at those premises, the listed person is to provide those services during the core opening hours and any supplementary opening hours of the premises.

In respect of the area of each HWB the NHSCB must:

- a) prepare, maintain and publish an "EPS list" of all the NHS chemists situated in that area who participate in the Electronic Prescription Service; and
- b) include on its EPS list the address of any premises at which the Electronic Prescription Service is provided

Any applications for new or additional pharmacy premises and any relocation of services are made to NHS Commissioning Board.

The pharmaceutical services to which each PNA relates are all the pharmaceutical services that may be provided under arrangements with NHSCB for:

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

Market Entry Regulations

Applications for inclusion in a pharmaceutical list are now considered by NHS England (through their Regional Teams) and the 'market entry test' is now an assessment against the pharmaceutical needs

assessment produced by the local authority's Health and Wellbeing Board. The exemptions introduced in 2005 have been removed (other than the exception for distance selling pharmacies) and 'neighbourhoods' are no longer relevant for relocations.

Local Pharmaceutical Committees (LPCs) and the Pharmaceutical Services Negotiating Committee (PSNC) are both recognised as representing pharmacy contractors on NHS matters, and these matters are largely set out in the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. More than half of those regulations are taken up with market entry.

Relocations

The 'Relocations which do not result in significant change' application was bought in under The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013, to replace the Minor Relocation application of the 2005 regulations. The new regulations judge applications based on whether the relocation would affect the patient groups which use the pharmacy, and whether the relocation would result in a significant change to the arrangement for pharmaceutical services, rather than whether the relocation would be above or below 500m, or in the same neighbourhood.

The Regional Team must endeavour to determine the application as soon as is practicable, however this must be within four months from the date on which the complete application is received. There is a further thirty-day appeal period before the pharmacy can relocate, and the pharmacy must relocate within six months of being granted (subject to a possible 3-month extension).

Relocations which do not result in significant change are a notifiable application, meaning that all applications are circulated to the LPC and contractors likely to be affected if the application were to be granted, and they are allowed 45 days in which to make representations. This differs for some relocations processed under the 2005 Regulations in that those which were relocating less than 500m would be determined without consultation, and within 30 days. All relocations now are subject to the statutory consultation period.

Relocations that do not cause significant change are not judged against a Pharmaceutical Needs Assessment (PNA).

Pharmaceutical Needs Assessments

The PNA is produced by the local authority's Health and Wellbeing Board (HWB) at least every four years. Until April 2015, the PNA produced by the former PCT may be used until the HWB has produced its own. Between versions of the PNA a supplementary statement may be issued to record changes in the provision of pharmaceutical services (for example, the opening or closure of a pharmacy) but a supplementary statement cannot be used to record changes to the needs for pharmaceutical services.

The PNA will identify the pharmaceutical services that are needed, those that are provided, and hence those which are needed but not currently provided. It will also identify pharmaceutical services which are not needed, but which, if they were to be provided, would bring about improvements in or better access to pharmaceutical services. Again, such services that are provided are identified in the PNA. The PNA will also include details of other NHS services commissioned in the area which have an impact on the need to commission pharmaceutical services.

Applications

An applicant must submit an application form, a fee, and if they are not already on a pharmaceutical list, their fitness to practise declarations.

It is always for the applicant to decide if and when to make an application – there is a fee associated with each application, and once an application has been made, this will enter the public domain and other interested parties may consider making applications in the same area. This is via the PCSE Website <https://pcse.england.nhs.uk/services/market-entry/>

Fees

Applications must be accompanied by a fee in most cases – see the Pharmaceutical Services (Fees for Applications) Directions 2013. An exception exists allowing the Regional Team to waive the fee where it has invited the applicant to make that application.

The Regional team is required by the regulations to consider, before it seeks representations from interested parties, whether it would be beneficial to consider other applications alongside the application. This could arise for example if an application appeared to be meeting part of the needs identified in the PNA, where the Regional Team thinks that opening the opportunity to apply to others, in the light of that first application, may stimulate a more comprehensive offering. For this reason, applications must be as strong as possible, as the Regional Team is not obliged to accept an application on a first past the post principle.

If the Regional Team does decide to defer an application to invite other applications, it must do so for no longer than 6 months. The application is put on hold pending other applications.

The Regional Team may also defer an application if there are other applications in the pipeline, or if there are relevant appeals in process.

Timescales

If the application is a notifiable application (the meaning of which is set out in paragraph 18 of that schedule) including all routine applications as well as relocations, distance selling applications and relocations combined with change of ownership, then NHS England must endeavour to determine the application as soon as is practicable, and unless there is deferral of the application (see above) must determine it within 4 months of the date on which it had received all the information it required to determine the application.

For the applications which are not 'notifiable' such as change of ownership, NHS England must determine the application within 30 days of receiving all the information it needed. These limits can be extended if there is 'good cause' for delay.

Exemptions / Exceptions

The change in the market entry test to refer to the PNA means that it is no longer necessary to have exemptions to the test for the large out of town retail developments, the one stop primary medical centres, or the pharmacies undertaking to provide pharmaceutical services for at least 100 hours per week. These exemptions therefore cannot be used by an applicant (although existing pharmacies and those granted under the exemption continue).

There were misunderstandings about whether a 100-hour pharmacy would be able to apply to reduce its hours. The regulations have made it clear that such pharmacies cannot apply to reduce their hours.

The exemption for distance selling pharmacies continues. The reason this exception (as it is now called) is required, is because a true internet or mail order pharmacy, servicing a population spread throughout the country, cannot argue a strong enough case for meeting needs set out in a local PNA, nor could it be said to bring about a significant benefit under an unforeseen benefits application. New conditions have been introduced in regulation 64, which requires the pharmacy to be able to provide essential services safely, without face-to-face contact at the premises, and must ensure that persons anywhere in England are able to access the essential services.

There have been several applications refused by NHS England, and some of these have been the subject of appeals to the NHS Litigation Authority's Family Health Services Appeals Unit. In several cases, the applicant had failed to satisfy the Regional Team or the Appeals Unit, that they would be able to provide all the essential services without face-to-face contact at the pharmacy. In some cases, SOPs had not been provided, and in others, the SOPs had not been sufficient to satisfy the Regional Team or the Appeals Unit. It is likely that over time, the new requirements will be tested further, both at the Appeals Unit and in the High Court. Applicants and affected contractors wishing to make representations on applications may find it helpful to examine similar cases that have been considered by the Appeals Unit, and of course, legal advice may be needed to establish the latest position as to how the exemption requirements should be interpreted.

Making representations on applications

A pharmacy contractor that in the opinion of the Regional Team is likely to be affected by an application if it were to be granted will be notified if the application is a 'notifiable' application.

If invited to make representations, they will be considered only if they are substantial (for example, they contain a reasonable attempt to describe the reasons why the application should be granted or refused). There will be a right of appeal in most cases, but only if the pharmacy contractor made a reasonable attempt to express the grounds for opposing the application.

When invited to make representations, or when given a right to appeal it is essential to comply with timescales as late submissions will not be permitted.

Rurality, controlled localities and the provision of pharmaceutical services by doctors

Controlled localities

GP dispensing may be required where a pharmacy service would not be viable due to the nature or size of the population. GPs may dispense for their patients who have requested them to do so, if permission has been granted by NHS England (previously this permission was granted by the PCT). Generally, in order for permission to be granted the patients who ask their GP to dispense must be resident in a 'controlled locality' for which the GP has dispensing rights (i.e., an area which is rural in character which the GP has appropriate permission to dispense) and live at least 1.6km from an existing pharmacy.

If a new pharmacy wishes to open in a controlled locality, then there are additional tests that the applicant must satisfy, so as not to prejudice any dispensing by doctors being undertaken for patients in that area.

Similarly, if a GP is asked to dispense by their patients' resident in a controlled locality, NHS England must undertake a test to ensure that there is no prejudice to any local pharmacies.

NHS England is responsible for ensuring maps are available which show the areas which have been determined in the past to be controlled localities, and these will remain controlled localities unless and until a new determination finds that they no longer satisfy the requirements of being rural in character.

It is the responsibility of NHS England to publish a map defining controlled locality areas for Shropshire; the last review was undertaken in 2010.

Reserved location

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'.

A reserved location is an area within a controlled locality where the total of all patient lists for the area within a radius of 1.6km (1 mile) of the proposed premises or location is fewer than 2750. The effect of determining a reserved location is that the pharmacy application is not required to satisfy the prejudice test (but the market entry test still applies) in order to be entered onto the pharmaceutical list. However, a reserved location pharmacy is not afforded the so called 'one mile rule' and patients in a controlled locality both within one mile of the pharmacy and beyond have the right to choose whether to have their medicines dispensed at a pharmacy or GP surgery. Should the population reach or exceed 2750 the pharmacy if already open can apply to NHS England for a re-determination of reserved location status. If this status is removed then, subject to the prejudice test, the normal one-mile rule would apply (i.e., the doctors lose dispensing rights within a mile of the pharmacy).

Registration of dispensing doctor premises

NHS England (through the Regional Teams) keep a list of dispensing doctors (regulation 46(1)) and a list of premises from which those doctors are authorised to dispense (regulation 46(2)(a)). The list also includes the area in relation to which the GP has been granted outline consent (regulation 46(2) (b)).

New applications to dispense by GPs

New applications to dispense by GPs (outline consent and premises approval) are not permitted or considered if there is a pharmacy within 1.6km of the premises from which the practice wishes to start dispensing.

Relocations

Dispensing practices can relocate their premises if the granting of the application would not result in a significant change to the arrangements that are in place for the provision of pharmaceutical services (or local pharmaceutical services).

Further applications for relocation may be considered by NHS England only after 12 months has elapsed since the dispensing practice commenced providing services from the new premises.

Practice amalgamations

The amalgamation of a dispensing practice with a non-dispensing practice will trigger a new application for outline consent to dispense, and application for premises approval.

Appendix 2 PNA Steering Group Terms of Reference

Background

The Pharmaceutical Needs Assessment Working Group is a group which is focused on the delivery of this particular needs assessment. The Group meetings are to be chaired by the Commissioner/Lead or person writing the needs assessment. Other members of this group will include contributors to the needs assessment process, for example people who can access and interpret the necessary data, and the relevant Commissioning Manager. The group exists to meet stakeholder requirements in the delivery of the needs assessment outputs.

The production and publication of a Pharmaceutical Needs Assessment (PNA) became a statutory requirement in the Health Act 2009, with the most recent published in 2015 for both Shropshire and Telford and Wrekin. Due to ongoing COVID-19 pressures the Department of Health and Social Care have announced that the requirement for each Health and Wellbeing Board to publish a revised PNA by October 2022 (an extension of 6 months from the original date).

With the implementation of an Integrated Care System (ICS), it was agreed for the Shropshire and Telford & Wrekin Health and Wellbeing Board to collaborate on the production of a PNA. The proposal is for the creation of two separate PNA documents for each Health and Wellbeing Board and the Working Group will agree the formal content structure of the PNA along with methodology of the range of information intelligence to be collated and analysed. This should enable more efficient use of resources and generate a consistent reporting mechanism for the ICS.

The Pharmaceutical Needs Assessment is a thematic needs assessment that will contribute towards the Joint Strategic Needs Assessment (JSNA). The JSNA provides a framework to examine all the factors that impact on the health and wellbeing of the local population including economic, education, housing and environmental factors. This information enables the prioritising of resources, redesigning services and the commissioning and decommissioning of services that will improve outcomes for Shropshire's residents.

The JSNA is the process by which the current and future health and well-being needs of the local population are identified.

Purpose and Responsibilities of the Needs Assessment Working Group

- To write the needs assessment and provide the data necessary to do so.
- Coordinate update of the Pharmaceutical Needs Assessment (PNA) in line with current legislation
- To regularly refer to the scoping checklist to ensure the outputs from the needs assessment meet stakeholder requirements.
- To monitor work plans and timelines and ensure that the needs assessment is delivered in line with deadlines.
- To provide the expertise, knowledge and guidance to assist and advise on the needs assessment process.
- To support the analyst(s) by helping to identify and source the required data. To assist with providing the data under existing data sharing agreements, or put agreements in place to prevent data sharing issues becoming a blockage in the process.
- To assist with the interpretation of key datasets, particularly those held by partner agencies.
- To make timely useful contributions to the overarching needs assessment process.
- To act in an advisory capacity to the Needs Assessment Delivery Group, as Working Group members will be the specialists who will be contributing to the needs assessment process.
- To report progress to the Needs Assessment Delivery Group, including escalating issues where appropriate.
- To support communication activity once the final document has been approved e.g., publish needs assessment on relevant webpages (JSNA website), writing short articles for Group/Core briefs.
- To ensure that evaluation activity is actioned and followed up.
- To acknowledge the equal importance of all member and stakeholder needs.

Reporting and Governance

The JSNA is a statutory responsibility delivered in partnership across Health and Social Care.

The Needs Assessment Working Group reports to the Needs Assessment Delivery Group which is responsible for the overall ownership and delivery of the JSNA and other needs assessment work.

PNA progress updates will be reported as required to the following;

- **Health & Wellbeing Board**
 - Shropshire HWB Meeting Dates: 2021 - 9 Sep, 11 Nov. 2022 - 13 Jan, 3 Mar
- **ICB Governance Board**
- **NHS England**
- **Healthwatch**
- **Local Pharmaceutical Committee**

Membership

Position	Organisation
Local Authority PNA Lead: Gordon Kochane Alex Mclellan Population Health Management Lead Andy Fox	Shropshire Council
Pharmacy Advisor: Andrew Pickard	NHS England
LPC Chief Officer: Lynne Deavin	LPC
Medicines Management Lead: Elizabeth Walker Head of Information: Craig Lovatt	Shropshire, Telford & Wrekin ICS
HealthWatch: Jayne Randall-Smith Kate Parslow	HealthWatch Shropshire

The group will be administered and chaired by the Commissioner/Lead or person writing the needs assessment.

Frequency of Meetings

The group will meet as deemed necessary (2 monthly). Wherever possible email will be used to communicate ongoing PNA development

Specific meetings around public consultation and formal consultation will be led by the Communications team (Local Authority's and ICS)

Other stakeholders will attend meetings only as necessary

A formal meeting / communication will be arranged to agree a final draft PNA prior to consultation

Public engagement and consultation will be coordinated with support from Healthwatch and local ICS patient group representatives.

Appendix 3 – Summary of Advanced Services provided by pharmacy

Based upon activity data in 2021/22 and LPC guidance

CODE	Name	Address	Town	New Medicine Service (NMS) Activity	Stoma Customisation (STOMA) Activity	Community Pharmacist Consultation Service (CPCS) Activity	Seasonal Influenza Vaccination Advances Service (FLU) Income	Discharge Medicine Service Income	Covid Vaccination Service Activity
FLE79	Asda Pharmacy	Old Potts Way	Shrewsbury	Y	N	Y	Y	N	N
FG527	Bicton Heath Pharmacy	Bicton Heath Shopping Centre	Shrewsbury	Y	N	Y	Y	Y	Y
FMG15	Bishops Castle Pharmacy	The Pharmacy	Bishops Castle	Y	N	Y	Y	Y	N
FVN98	Boots	10-14 Watergate Street	Whitchurch	Y	N	Y	Y	Y	N
FA688	Boots	7-9 Pride Hill	Shrewsbury	Y	N	N	Y	Y	N
FWL73	Boots	Meole Brace Retail Park	Shrewsbury	Y	N	Y	Y	N	N
FQN20	Boots	30-31 High Street	Bridgnorth	Y	N	Y	Y	Y	N
FFY53	Boots	5-7 Church Street	Oswestry	Y	N	Y	Y	N	N
FCX86	Boots	34 Bull Ring	Ludlow	Y	N	Y	Y	Y	N
FTX21	Boots	48-50 Cheshire Street	Market Drayton	Y	N	N	Y	N	N
FNK63	Bridgnorth Pharmacy	2 Mill Street	Bridgnorth	Y	N	Y	N	N	N
FRY06	Brown and Francis	49 Bull Ring	Ludlow	Y	N	Y	Y	Y	N
FNC79	Cambrian Pharmacy	Cambrian Medical Centre	Oswestry	Y	N	Y	N	N	N
FLN24	Day Lewis Pharmacy	Oswald Road	Oswestry	Y	N	Y	Y	Y	Y
FVH82	Cleobury Pharmacy	Cleobury Pharmacy	Cleobury Mortimer	Y	N	Y	Y	Y	N
FJW10	Conway Pharmacy	238 Monkmoor Road	Shrewsbury	Y	N	Y	Y	Y	Y
FVG82	Day Lewis Pharmacy	14 English Walls	Oswestry	Y	N	Y	Y	Y	Y
FPG93	Day Lewis Pharmacy	The Former Ticket Office	Gobowen	Y	N	Y	Y	N	N
FRW67	Day-Night Pharmacy Limited	5 Cross Street	Ellesmere	Y	N	N	Y	Y	N
FPG90	Green End Pharmacy	11-13 Green End	Whitchurch	Y	N	Y	Y	Y	N
FCP52	Highley Pharmacy	Beulah House	Highley	Y	N	Y	Y	Y	Y
FJ747	Hillside Pharmacy	18 Sandford Avenue	Church Stretton	Y	Y	Y	Y	Y	N
FKY28	LloydsPharmacy	116-119 Lower Galderford	Ludlow	Y	Y	Y	Y	N	N
FRH34	LloydsPharmacy	Meole Brace Retail Park	Shrewsbury	Y	N	Y	Y	Y	N
FH024	Lunts Healthcare Limited	The Tannery	Shrewsbury	Y	N	Y	Y	Y	Y

FXC75	Lunts Pharmacies	1-3 Hereford Road	Shrewsbury	Y	N	Y	Y	N	N
FG592	Lunts Pharmacy	Drovers' House	Craven Arms	Y	N	Y	Y	N	Y
FTL94	Murrays Healthcare	Medical Centre	Market Drayton	Y	N	Y	Y	N	N
FWG73	Murrays Healthcare	Northgate Health Centre	Bridgnorth	Y	N	Y	Y	Y	N
FP363	Pontesbury Pharmacy	Main Road	Shrewsbury	Y	N	Y	Y	N	Y
FAC87	Radbrook Green Pharmacy	Bank Farm Road	Shrewsbury	Y	N	Y	Y	Y	N
FCQ01	Rhodes	28 Claremont Hill	Shrewsbury	Y	N	Y	Y	Y	N
FCV56	Rhodes TC Chemist	77 High Street	Wolverhampton	Y	N	Y	N	N	N
FPA00	Rowlands Pharmacy	Wem and Prees Med Prac	Wem	Y	Y	Y	Y	Y	N
FMJ05	Rowlands Pharmacy	80 High Street	Broseley	Y	Y	Y	Y	N	N
FA941	Rowlands Pharmacy	Severn Fields Health Centre	Shrewsbury	Y	Y	N	N	N	N
FM195	Rowlands Pharmacy	7 Lansdowne Road	Shrewsbury	Y	Y	Y	Y	Y	N
FGP34	Rowlands Pharmacy	40 Sandford Avenue	Church Stretton	Y	N	Y	Y	Y	N
FNF88	Rowlands Pharmacy	Unit 1	Wem	Y	Y	Y	Y	Y	N
FCM55	Rowlands Pharmacy	Marsden Medical Practice	Shrewsbury	Y	Y	Y	Y	N	N
FLA00	Rowlands Pharmacy	11 High Street	Whitchurch	Y	Y	Y	Y	N	Y
FVG38	St Martins Pharmacy	Stans Superstore	Oswestry	Y	N	Y	Y	Y	N
FN658	Tesco Pharmacy	Cattle Market	Shrewsbury	Y	N	Y	N	N	N
FVH68	Well	101 Mount Pleasant Road	Shrewsbury	Y	N	Y	Y	Y	N
FNK14	Wenlock Pharmacy	14 High Street	Much Wenlock	Y	Y	Y	Y	Y	N
FJR20	Boots	37 Mytton Oak Road	Shrewsbury	Y	N	Y	Y	Y	N
FRK71	Boots	7 Cheapside	Shifnal	Y	N	N	Y	N	N

Appendix 4 - Community Pharmacy Questionnaire

PNA Pharmacy Questionnaire 2021 Health and Wellbeing Board

Premises and contact details

Contractor code (ODS Code)	
Name of contractor (i.e., name of individual, partnership or company owning the pharmacy business)	
Trading name	
Address of contractor pharmacy	
Is this pharmacy one which is entitled to Pharmacy Access Scheme payments?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Possibly
Is this pharmacy a 100-hour pharmacy?	<input type="checkbox"/> Yes
Does this pharmacy hold a Local Pharmaceutical Services (LPS) contract? (i.e., it is not the 'standard' Pharmaceutical Services contract)	<input type="checkbox"/> Yes
Is this pharmacy a Distance Selling Pharmacy? (i.e., it cannot provide Essential Services to persons present at or in the vicinity of the pharmacy)	<input type="checkbox"/> Yes
Pharmacy premises shared NHS mail account	
Pharmacy telephone	
Pharmacy fax (if applicable)	
Pharmacy website address (if applicable)	
May the LPC update its premises and contact details for you with the above information?	<input type="checkbox"/> Yes

Opening hours and related matters

Core hours of opening

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

Total hours of opening

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

Consultation facilities

There is a consultation room (that is clearly designated as a room for confidential conversations; distinct from the general public areas of the pharmacy premises; and is a room where both the person receiving the service and the person providing it can be seated together and communicate confidentially) (tick as appropriate)

On premises	None, have submitted a request to the NHS England and NHS Improvement (NHSE&I) regional team that the premises are too small for a consultation room	<input type="checkbox"/>
	None, the NHSE&I regional team has approved my request that the premises are too small for a consultation room	<input type="checkbox"/>
	None (Distance Selling Pharmacy)	<input type="checkbox"/>
	Available (including wheelchair access)	<input type="checkbox"/>
	Available (without wheelchair access), or	<input type="checkbox"/>
	Planned before 1st April 2023, or	<input type="checkbox"/>
	Other (specify)	
Where there is a consultation area, is it a closed room?		<input type="checkbox"/> Yes <input type="checkbox"/> No

As a result of the Healthy Living Pharmacy Level 1 (HLP) criteria becoming Terms of Service requirements **from 1st January 2021**, almost all pharmacies will need to have a consultation room.

<https://psnc.org.uk/our-news/regs-reminder-14-consultation-rooms-and-remote-consultations/>

During consultations are there hand-washing facilities	In the consultation area	<input type="checkbox"/>
	Close to the consultation area, or	<input type="checkbox"/>
	None	<input type="checkbox"/>
Patients attending for consultations have access to toilet facilities		<input type="checkbox"/> Yes <input type="checkbox"/> No

Languages spoken (in addition to English)	
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Services

Does the pharmacy dispense appliances?

Yes – All types	<input type="checkbox"/>
Yes, excluding stoma appliances, or	<input type="checkbox"/>
Yes, excluding incontinence appliances, or	<input type="checkbox"/>
Yes, excluding stoma and incontinence appliances, or	<input type="checkbox"/>
Yes, just dressings, or	<input type="checkbox"/>
Other [identify]	
None	<input type="checkbox"/>

Advanced services

Does the pharmacy provide the following services?

	Yes	Intending to begin within next 12 months	No - not intending to provide
Appliance Use Review service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Community Pharmacist Consultation Service (CPCS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
C-19 LFD distribution	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Flu Vaccination Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hepatitis C testing service (Until 31 st March 2022)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hypertension case finding	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
New Medicine Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pandemic Delivery Service (Until 31 st March 2022)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stoma Appliance Customisation service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stop smoking service (from January 2022)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

	Currently providing under contract with			Willing to provide if commissioned	Not able or willing to provide	Willing to provide privately
	NHSE&I regional team	CCG	Local Authority			
Anticoagulant Monitoring Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anti-viral Distribution Service ⁽¹⁾	<input type="checkbox"/> ⁽¹⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Care Home Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlamydia Testing Service ⁽¹⁾	<input type="checkbox"/> ⁽¹⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlamydia Treatment Service ⁽¹⁾	<input type="checkbox"/> ⁽¹⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contraceptive service (not EC) ⁽¹⁾	<input type="checkbox"/> ⁽¹⁾					
Disease Specific Medicines Management Service:						
Allergies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alzheimer's/dementia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asthma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COPD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Depression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes type I	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes type II	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Epilepsy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heart Failure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

¹ These services are not listed in the Advanced and Enhanced Services Directions, and so are not 'Enhanced Services' if commissioned by the NHSE&I regional team. The NHSE&I regional team may commission them on behalf of the CCG or Local Authority, but when identified in the PNA they will be described as 'Other Locally Commissioned Services' or 'Other NHS Services'.

Hypertension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parkinson's disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state)						
Emergency Contraception Service ⁽¹⁾	<input type="checkbox"/> ⁽¹⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Supply Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gluten Free Food Supply Service (i.e., not via FP10)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home Delivery Service (not appliances) ⁽¹⁾	<input type="checkbox"/> ⁽¹⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independent Prescribing Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If currently providing an Independent Prescribing Service, what therapeutic areas are covered?						

	Currently providing under contract with			Willing to provide if commissioned	Not able or willing to provide	
	NHSE&I regional team	CCG	Local Authority			
Language Access Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medication Review Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medicines Assessment and Compliance Support Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minor Ailment Scheme	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medicine Optimisation Service ⁽¹⁾	<input type="checkbox"/> ⁽¹⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If currently providing a Medicines Optimisation Service, what therapeutic areas are covered?						
Needle and Syringe Exchange Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obesity management (adults and children) ⁽¹⁾	<input type="checkbox"/> ⁽¹⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not Dispensed Scheme	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On Demand Availability of Specialist Drugs Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Out of Hours Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patient Group Direction Service (name the medicines)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phlebotomy Service ⁽¹⁾	<input type="checkbox"/> ⁽¹⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prescriber Support Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Schools Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Screening Service						
Alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cholesterol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Currently providing under contract with			Willing to provide if commissioned	Not able or willing to provide	
	NHSE&I regional team	CCG	Local Authority			
Gonorrhoea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. pylori	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HbA1C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hepatitis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state)						<input type="checkbox"/>
Seasonal Influenza Vaccination Service ⁽¹⁾	<input type="checkbox"/> ⁽¹⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Other vaccinations ⁽¹⁾						
	Currently providing under contract with			Willing to provide if commissioned	Not able or willing to provide	
	NHSE&I regional team	CCG	Local Authority			
Childhood vaccinations	<input type="checkbox"/> ⁽¹⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COVID-19 vaccinations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hepatitis (at risk workers or patients) vaccinations	<input type="checkbox"/> ⁽¹⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HPV vaccinations	<input type="checkbox"/> ⁽¹⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meningococcal vaccinations						
Pneumococcal vaccinations						
Travel vaccinations	<input type="checkbox"/> ⁽¹⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other – (please state)						<input type="checkbox"/>
Sharps Disposal Service ⁽¹⁾	<input type="checkbox"/> ⁽¹⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stop Smoking Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervised Administration Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supplementary Prescribing Service (name therapeutic areas)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vascular Risk Assessment Service (NHS Health Check) ⁽¹⁾	<input type="checkbox"/> ⁽¹⁾	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Non-commissioned services

Does the pharmacy provide any of the following?

Collection of prescriptions from GP practices	<input type="checkbox"/> Yes <input type="checkbox"/> No
Delivery of dispensed medicines – Selected patient groups (list criteria)	
Delivery of dispensed medicines – Selected areas (list areas)	

Delivery of dispensed medicines – Free of charge on request	<input type="checkbox"/> Yes <input type="checkbox"/> No
Delivery of dispensed medicines – With charge	<input type="checkbox"/> Yes <input type="checkbox"/> No
Monitored Dosage Systems – Free of charge on request	<input type="checkbox"/> Yes <input type="checkbox"/> No
Monitored Dosage Systems – With charge	<input type="checkbox"/> Yes <input type="checkbox"/> No
Is there a particular need for a locally commissioned service in your area? If so, what is the service requirement and why?	<input type="checkbox"/> Yes <input type="checkbox"/> No

May the LPC update its opening hours and related matters and services details for you with the above information?	<input type="checkbox"/> Yes
---	------------------------------

Details of the person completing this form:

Contact name of person completing questionnaire on behalf of the contractor if questions arise	Contact telephone number

Appendix 5 Community Pharmacy Patient Survey

Q1 In which of these Local Authorities or principal area do you live in?

Please select one only

- q Shropshire
- q Telford and Wrekin
- q Powys
- q Herefordshire
- q Newcastle Under Lyme
- q South Staffordshire
- q Stafford
- q Worcester
- q Wyre Forest
- q Another Local Authority/Area

This survey is about the service you receive from community pharmacies or local chemists in your area.

Some people refer to pharmacies as 'the chemist', but in this survey we will just refer to them as pharmacies.

All the information gathered by us is covered by Data Protection laws. It can only be used for statistical or research purposes and you will never receive sales calls or direct mail as a result of giving us your details.

All our research is conducted in strict accordance with the Market Research Society's Code of Conduct.

-None of the information collected for research purposes is used for other purposes.

-All information collected is kept confidential

-Your anonymity is guaranteed

Q3 In which, if any, of the following places do you ever visit a pharmacy?

Please select all that apply

- q Near my home
- q At my doctor's surgery
- q At a supermarket
- q Near my work
- q Near my child's school
- q Town/village centre or high street
- q A dispensing GP
- q Convenient to where I am on the day
- q Online pharmacy
- q Somewhere else (please tell us where)
- q I never use a pharmacy
- q Don't know

Q4 Where else do you visit a pharmacy? *Please write in*

Q5 And which pharmacy do you visit most often? *Please select one only*

- q Near my home
- q At my doctor's surgery
- q At a supermarket
- q Near my work
- q Near my child's school
- q Town/village centre or high street

- q A dispensing GP
- q Convenient to where I am on the day
- q Online pharmacy
- q Somewhere else
- q None of these

Q6 Do you have a pharmacy where your prescription is directly sent to by your GP?

Please select one only

- q Yes
- q No
- q Don't know

Q7 And which one does your GP send your prescriptions to?

Please select one only

- q Near my home
- q At my doctor's surgery
- q At a supermarket
- q Near my work
- q Near my child's school
- q Town/village centre or high street
- q A dispensing GP
- q Convenient to where I am on the day
- q Online pharmacy
- q Somewhere else
- q None of these

Q8 On average how often do you visit a pharmacy?

Please select one only

- q More than once a week
- q About once a week
- q About once a fortnight
- q About once a month
- q About once every three months
- q About once every six months
- q Less often
- q Don't know

Q9 When do you usually visit a pharmacy?

Please select all that apply

- q Weekend
- q Weekday – Early morning (before 9 AM)
- q Weekday – Office hours (9 AM – 5 PM)
- q Weekday – evening (after 5 PM)
- q Don't know

Q10 And when do you visit a pharmacy most often?

Please select all that apply

- q Weekend
- q Weekday – Early morning (before 9 AM)
- q Weekday – Office hours (9 AM – 5 PM)
- q Weekday – evening (after 5 PM)
- q Don't know

Q11 Thinking about the pharmacy that you visit most often. How long does your journey usually take when making a visit?

Please select one only

- q Less than 5 minutes
- q 5 up to 10 minutes
- q 10 up to 15 minutes
- q 15 up to 20 minutes
- q 20 up to 25 minutes
- q 25 minutes or more
- q Don't know

Q12 And how do you travel to the pharmacy that you use most often?

Please select all that apply

- q Walk
- q Car
- q Bus
- q Cycle
- q Train
- q Taxi
- q Another method
- q Don't know

Q13 Do you have to pay for parking when you visit the pharmacy that you visit most often?

Please select one

- q Yes, always
- q Yes, sometimes
- q Never
- q Don't know

Q14 Still thinking about the pharmacy that you visit most often. How satisfied or dissatisfied are you with the following

Please select one for each

	Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Fairly dissatisfied	Very dissatisfied	Don't know/Not applicable
Opening hours at weekend	q	q	q	q	q	q
Opening hours during the week	q	q	q	q	q	q
Ease of travel	q	q	q	q	q	q
Car parking	q	q	q	q	q	q
Distance to travel	q	q	q	q	q	q
Ability to talk to a pharmacist in private	q	q	q	q	q	q

We would now like you to think about the services provided at pharmacies.

Please click on 'next' to continue.

Q15 What services can you think of that are offered by pharmacies?
Please write in

Q16 Which, if any, of the following services are you aware that pharmacies can offer?
Please select all that apply

- q Advice and treatment of minor ailments
- q Advice on your medication
- q Chlamydia screening and treatment
- q Condom distribution (free supply to eligible people)
- q Dispensing prescriptions
- q Disposal of your unwanted medication
- q Emergency contraception (morning after pill) and contraception advice
- q Emergency supply of medication
- q Healthy lifestyle advice
- q Help with choosing appropriate medication
- q Organising repeat prescriptions (i.e. the pharmacist organising repeat prescriptions on your behalf)

- q Prescription collection from your GP surgery
- q Prescription delivery service
- q Stop smoking advice and treatment
- q Substance misuse service (methadone supply, needle provision)
- q Supply of free Healthy Start vitamins by voucher
- q Supply over the counter remedies and medicines
- q None of these
- q Don't know

Q17 Which, if any, of the following services are offered at the pharmacies that you visit?
Please select all that apply

- q Advice and treatment of minor ailments
- q Advice on your medication
- q Chlamydia screening and treatment
- q Condom distribution (free supply to eligible people)
- q Dispensing prescriptions
- q Disposal of your unwanted medication
- q Emergency contraception (morning after pill) and contraception advice
- q Emergency supply of medication
- q Healthy lifestyle advice
- q Help with choosing appropriate medication
- q Organising repeat prescriptions (i.e. the pharmacist organising repeat prescriptions on your behalf)

- q Prescription collection from your GP surgery
- q Prescription delivery service

- q Stop smoking advice and treatment
- q Substance misuse service (methadone supply, needle provision)
- q Supply of free Healthy Start vitamins by voucher
- q Supply over the counter remedies and medicines
- q None of these
- q Don't know

Q18 And which, if any, of these services have you ever used at a pharmacy?
Please select all that apply

- q Advice and treatment of minor ailments
- q Advice on your medication
- q Chlamydia screening and treatment
- q Condom distribution (free supply to eligible people)
- q Dispensing prescriptions
- q Disposal of your unwanted medication
- q Emergency contraception (morning after pill) and contraception advice
- q Emergency supply of medication
- q Healthy lifestyle advice
- q Help with choosing appropriate medication
- q Organising repeat prescriptions (i.e. the pharmacist organising repeat prescriptions on your behalf)
- q Prescription collection from your GP surgery
- q Prescription delivery service
- q Stop smoking advice and treatment
- q Substance misuse service (methadone supply, needle provision)
- q Supply of free Healthy Start vitamins by voucher
- q Supply over the counter remedies and medicines
- q None of these
- q Don't know

Q19 How likely or unlikely is it that you would use a pharmacy for each of the following in the future
Please select one for each

	Definitely use	Probably use	Might or might not use	Probably not use	Definitely not use	Don't know
Advice and treatment of minor ailments	q	q	q	q	q	q
Dispensing prescriptions	q	q	q	q	q	q

Organising repeat prescriptions (i.e. the pharmacist organising repeat prescriptions on your behalf)	q	q	q	q	q	q
Help with choosing appropriate medication	q	q	q	q	q	q
Healthy lifestyle advice	q	q	q	q	q	q
Supply over the counter remedies and medicines	q	q	q	q	q	q
Emergency supply of medication	q	q	q	q	q	q
Stop smoking advice and treatment	q	q	q	q	q	q
Emergency contraception (morning after pill) and contraception advice	q	q	q	q	q	q
Advice on your medication	q	q	q	q	q	q
Prescription collection from your GP surgery	q	q	q	q	q	q
Prescription delivery service	q	q	q	q	q	q
Disposal of your unwanted medication	q	q	q	q	q	q
Substance misuse service (methadone supply, needle provision)	q	q	q	q	q	q
Supply of free Healthy Start vitamins by voucher	q	q	q	q	q	q
Chlamydia screening and treatment	q	q	q	q	q	q
Condom distribution (free supply to eligible people)	q	q	q	q	q	q

We would now like to talk to you about minor ailments.

Q20 Which, if any, of the following minor ailments have you ever had?

Please select all that apply

- q Athlete's foot
- q Aches and pains
- q Constipation
- q Coughs, colds and flu
- q Cystitis
- q Earache
- q Indigestion/reflux
- q Mouth ulcers
- q Red eyes
- q Sickness and diarrhoea
- q Skin rash

- q Sleeping problems
- q Sore throat
- q Thrush
- q None of these
- q Don't know

Q21 Which, if any, of the following are you aware pharmacists can treat or give advice on?
Please select all that apply

- q Athlete's foot
- q Aches and pains
- q Constipation
- q Coughs, colds and flu
- q Cystitis
- q Earache
- q Indigestion/reflux
- q Mouth ulcers
- q Red eyes
- q Sickness and diarrhoea
- q Skin rash
- q Sleeping problems
- q Sore throat
- q Thrush
- q None of these
- q Don't know

Q22 For each of these ailments please tell us your opinion of asking a pharmacist to treat this ailment or to provide advice? It doesn't matter if you have never had this ailment, it is your opinion that we are interested in. *Please select one for each*

	Have asked advice for this	Would consider asking for advice	Would not consider asking for advice	Don't know	Not applicable
Athlete's foot	q	q	q	q	q
Aches and pains	q	q	q	q	q
Constipation	q	q	q	q	q
Coughs, colds and flu	q	q	q	q	q
Cystitis	q	q	q	q	q
Earache	q	q	q	q	q
Indigestion/reflux	q	q	q	q	q
Mouth ulcers	q	q	q	q	q

Red eyes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sickness and diarrhoea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Skin rash	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sleeping problems	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sore throat	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thrush	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Q23 You said that there are some ailments that you wouldn't ask the advice of a pharmacist. Which, if any, of the following best describe your reasons?

Please select all that apply

- Never thought about it
- Haven't had any need
- I prefer to go to my doctor
- Pharmacists will just tell me to go the doctor so it's a waste of time
- I didn't know pharmacists could help
- I don't trust the advice of pharmacists
- I'm happy to treat myself without advice
- I use the internet to research my ailments
- I use the internet to buy my treatments
- The pharmacy opening hours are not convenient for me
- Things cost too much in a pharmacy
- It's not convenient for me to visit a pharmacy
- There isn't enough privacy, people can overhear what I am asking
- I have no relationship with a pharmacist
- Something else (please tell us what)
- Don't know

Q24 Why else would you not ask the advice of a pharmacist? Please write in

Q25 Which of these statements describe how useful you think the advice of a pharmacist is? It doesn't matter if you have never received advice, it is your opinion we are interested in.

Please select one only

- Very useful
- Fairly useful
- Neither useful nor not useful
- Not very useful
- Not at all useful
- Don't know

Q26 We would now like to ask you your opinion of using pharmacies.

There are a number of benefits some people have said about using a pharmacy. How much do you agree or disagree that the following are benefits to you? *Please select one for each*

	Agree strongly	Agree slightly	Neither agree nor disagree	Disagree slightly	Disagree strongly	Don't know
No appointment needed	q	q	q	q	q	q
My pharmacy is nearer than my GP	q	q	q	q	q	q
I can get an answer faster	q	q	q	q	q	q
I can get treatment faster	q	q	q	q	q	q
I can receive expert advice	q	q	q	q	q	q
I can get repeat prescriptions faster	q	q	q	q	q	q

Q27 Below are something that other people have said about using their pharmacy. Please tell us how much you agree or disagree with each? *Please select one for each*

	Agree strongly	Agree slightly	Neither agree nor disagree	Disagree slightly	Disagree strongly	Don't know
My pharmacy is the first place I go for minor ailments	q	q	q	q	q	q
I am clear of when to use my pharmacist and when to use my doctor	q	q	q	q	q	q
It is getting harder to get an appointment with my GP	q	q	q	q	q	q
Using my pharmacy more will free up time for GPs to treat more serious ailments	q	q	q	q	q	q
I should use my pharmacy more than I currently do	q	q	q	q	q	q
I trust pharmacists to give good advice	q	q	q	q	q	q
I think it's confusing to know what services different pharmacies offer	q	q	q	q	q	q
My pharmacist is easy to approach to get help and advice	q	q	q	q	q	q
I don't like talking to a pharmacist when other people can overhear	q	q	q	q	q	q

It's important to me that I can talk to someone face to face about my ailments	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
My pharmacy is a good place to go to get advice on side effects of medication I am taking	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A pharmacist is a highly qualified medical practitioner	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A pharmacist knows more about medication and drugs than a doctor	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

We would now like to ask you some questions about yourself.

Some questions may be perceived as sensitive, such as, health, gender and ethnicity. Providing information in response to these questions is entirely voluntary and you may withdraw your consent at any time and click 'prefer not to answer'. The answers that you provide will be used only for market research analysis purposes

Q28 Do you consent to the collection of this information?

Please select one

- Yes, I consent
- No, I do not consent

Q29 What is your ethnic group?

Please select one only

- White English/Welsh/Scottish/Northern Irish
- Irish
- Gypsy or Irish Traveller
- Any Other White background
- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed/Multiple ethnic background
- Indian
- Pakistani
- Bangladeshi
- Chinese
- Any other Asian background Asian or Asian British
- African
- Caribbean
- Any other Black/African/Caribbean background Black, African, Caribbean or Black British
- Arab
- Any other ethnic group
- Prefer not to say

- Q30 What is your age?
Please select one only
- q 16 - 24 years
 - q 25 - 34 years
 - q 35 - 44 years
 - q 45 - 54 years
 - q 55 - 64 years
 - q 65 - 74 years
 - q 75 years or more
 - q Prefer not to say
- Q31 How would you describe yourself?
Please select one only
- q Male
 - q Female
 - q Other
 - q Prefer not to say
- Q32 What is the occupation of the MAIN INCOME EARNER in your household?
If retired please select the most appropriate option that fits the job you performed prior to retirement?
Please select one only
- q Higher managerial/ professional/ administrative for example, Established doctor, Solicitor, Board Director in a large organisation (200+ employees, top level civil servant/public service employee)
 - q Intermediate managerial/ professional/ administrative for example, newly qualified (under 3 years) doctor, Solicitor, Board director small organisation, middle manager in large organisation, principal officer in civil service/local government
 - q Supervisory or clerical/ junior managerial/ professional/ administrative. Office worker, Student Doctor, Foreman with 25+ employees, salesperson.
 - q Skilled manual worker for example, Skilled Bricklayer, Carpenter, Plumber, Painter, Bus/ Ambulance Driver, HGV driver, AA patrolman.
 - q Semi or unskilled manual work for example, Manual workers, all apprentices to be skilled trades, Caretaker, Park keeper, non-HGV driver, shop assistant, pub/bar worker.
 - q Full time education
 - q Unemployed
 - q Other
 - q Prefer not to say
- Q33 Are you.....?
Please select one only
- q Married or living as married
 - q Divorced or separated
 - q Single

- q Other
- q Prefer not to say
- q Don't know
- q Prefer not to say

Q34 Which of the following best describes your current work status?

Please select one only

- q Employee in full-time job (30 hours or more per week)
- q Employee in part-time job (less than 30 hours per week)
- q Self-employed - full or part time
- q Government-supported training
- q Unemployed and available for work
- q Wholly retired from work
- q Full-time education at school, college or university
- q Looking after home/family
- q Permanently sick/disabled
- q Doing something else
- q Prefer not to say

Q35 Do you have children aged under 18 years of age living at home?

Please select as many as apply

- q No children
- q 0 - 4 years
- q 5 - 11 years
- q 11-18 years
- q Prefer not to say

Q36 Do you look after, or give any help or support to family members, friends, neighbours? Or others because of either: long-term physical or mental ill health /disability, or problems related to old age.

Please don't count anything you do as part of your paid employment.

Please select one only

- q No
- q Yes, 1-9 hours a week
- q Yes, 10-19 hours a week
- q Yes, 20 or more hours a week
- q Prefer not to say

Q37 Which, if any, of the following long-term health conditions do you have?

Please select as many as apply

- q **I DON'T have** any long-term health conditions
- q Alzheimer's disease or other cause of dementia
- q Arthritis or ongoing problem with back or joints
- q Autism or autism spectrum condition
- q Blindness or partial sight
- q A breathing condition such as asthma or COPD
- q Cancer (diagnosis or treatment in the last 5 years)
- q Deafness or hearing loss

- q Diabetes
- q A heart condition, such as angina or atrial fibrillation
- q High blood pressure
- q Kidney or liver disease
- q A learning disability
- q A mental health condition
- q A neurological condition, such as epilepsy
- q A stroke (which affects your day-to-day life)
- q Another long-term condition or disability
- q Prefer not to say

Q38 Do any of these conditions reduce your ability to carry out day-to-day activities?
Please select one only

- q Yes, a lot
- q Yes, a little
- q No, not at all
- q Prefer not to say

Q39 Which of the following types of area do you live in?
Please select one only

- q Rural
- q Suburban
- q Urban
- q Somewhere else
- q Don't know

Q40 And what is your full postcode? *Please write in*

Q41 If you wish, please use the space below to make any comments about pharmacies, pharmacists or about this survey.

Thank you for taking part in this survey.

Please click on the 'submit' button so that we can receive your answers

Appendix 5 Community Pharmacy Opening Times

Trading Pharmacy	Address	Opening Days	Opening Times
Asda Pharmacy	Old Potts Way Shrewsbury	Pharmacy Core Hours:	
		Monday-Saturday	08:00 – 22:00
		Sunday	10:00 – 16:00
		Actual Opening Hours:	
		Monday –Saturday	08:00 – 22:00
		Sunday	10:00 – 16:00
Well	101 Mount Pleasant Road Shrewsbury	Pharmacy Core Hours:	
		Monday-Friday	09:00 – 13:00
			14:00 – 18:00
		Actual Opening Hours:	
		Monday –Friday	09:00 – 18:00
		Saturday	09:00 – 13:00
Boots	37 Mytton Oak Road Shrewsbury	Pharmacy Core Hours:	
		Monday-Friday	09:00 – 13:00
			14:00 – 18:00
		Actual Opening Hours:	
		Monday –Friday	09:00 – 18:00
		Saturday	09:00 – 13:00

Boots

48-50 Cheshire Street
Market Drayton

Pharmacy Core Hours:

Monday-Thursday 09:00 – 13:00
14:00 – 17:30
Saturday 10:00 – 12:30

Actual Opening Hours:

Monday –Saturday 09:00 – 17:30

Boots

34 The Bull Ring
Ludlow

Pharmacy Core Hours:

Monday-Friday 09:00 – 13:00
14:00 – 17:30
Saturday 10:00 – 12:30

Actual Opening Hours:

Monday –Saturday 09:00 – 17:30

Boots

7 Cheapside
Shifnal

Pharmacy Core Hours:

Monday-Tuesday 09:00 – 13:00
14:00 – 17:30
Wednesday-Friday 09:00 – 13:00
14:30 – 17:30
Saturday 09:00 – 13:00

Actual Opening Hours:

Monday-Friday 09:00-18:15
Saturday 09:00-16:45

Boots

7-9 Pride Hill
Shrewsbury

Pharmacy Core Hours:

Monday-Thursday 08:30 – 13:30
15:00 – 17:00

Friday 09:00 – 14:00
15:00 – 17:00

Saturday 09:00 – 14:00
15:00 – 17:00

Actual Opening Hours:

Monday –Saturday 08:30 – 17:30
10:30 – 16:30

Sunday 16:30

Boots

30-31 High Street
Bridgnorth

Pharmacy Core Hours:

Monday-Thursday 09:00 – 13:30
15:00 – 17:00

Friday 09:00 – 14:00
15:00 – 17:00

Saturday 09:00 – 14:00
15:00 – 17:00

Actual Opening Hours:

Monday –Saturday 09:00 – 17:30

Boots

10-12 Watergate Street
Whitchurch

Pharmacy Core Hours:

Monday-Friday 09:00 – 13:00
14:00 – 17:00

Saturday 09:00 – 14:00

Actual Opening Hours:

Monday-Saturday 09:00-17:30

Boots

Meole Brace
Retail
Park

Shrewsbury

**Pharmacy Core
Hours:**

Monday-Thursday
09:00 –
13:00
15:00 –
17:30
09:00 –
Friday & Saturday
13:30
14:30 –
17:30

**Actual Opening
Hours:**

Monday –Friday
09:00 –
20:00
09:00 –
Saturday
18:00
10:30 –
Sunday
16:30

Murrays
Healthcare

Northgate Health
Centre

Bridgnorth

**Pharmacy Core
Hours:**

Monday-Friday
09:00 –
13:00

14:00 – 18:00

**Actual Opening
Hours:**

Monday –Friday
09:00 –
18:00
09:00 –
Saturday
13:00

Murrays
Healthcare

Drayton Health
Centre

Market Drayton

**Pharmacy Core
Hours:**

Monday & Tuesday
08:45 –
12:45
15:00 –
18:00
08:45 –
Wednesday - Friday
13:00
15:00 –
18:00
08:45 –
Saturday
13:00

Actual Opening Hours:

Monday –Friday **08:45 – 18:00**

Saturday **08:45 – 13:00**

Brown & Francis

49 Bull Ring

Ludlow

Pharmacy Core Hours:

Monday-Friday **09:00 – 13:00**

14:50 – 17:30

Saturday **09:00 – 13:00**

14:20 – 17:00

Actual Opening Hours:

Monday –Friday **08:30 – 17:30**

Saturday

Sunday **09:00 – 17:00**

Rowlands Pharmacy

Unit 1 Morris Central Shopping Park

Wem

Pharmacy Core Hours:

Monday-Friday **09:00 – 12:00**

13:00 – 17:30

Saturday **09:00 – 11:30**

Actual Opening Hours:

Monday-Friday **09:00 – 12:40**

13:00 – 17:30

Saturday **09:00 – 12:00**

Cambrian Pharmacy

Thomas Savin Road

Oswestry

Pharmacy Core Hours:

Monday-Friday **07:00 – 23:00**

Saturday - Sunday 08:00 – 18:00

Actual Opening Hours:

Monday-Friday 07:00 – 23:00
Saturday - Sunday 08:00 – 18:00

Day Lewis
Caxton
Pharmacy

Oswald Road
Oswestry

Pharmacy Hours:

Monday-Friday 09:00 – 13:00
14:00 – 17:30
Saturday 09:00 – 12:00

Actual Opening Hours:

Monday-Friday 08:30 – 18:00
Saturday 09:00 – 12:00

Day Lewis
Pharmacy

Station Road
Gobowen

Pharmacy Core Hours:

Monday-Friday 09:00 – 13:00
14:00 – 18:00

Actual Opening Hours:

Monday-Friday 09:00 – 13:00
14:00 – 18:00
Saturday 09:00 – 12:00

Day Lewis
Pharmacy

14 English Walls
Oswestry

Pharmacy Core Hours:

Monday- Thursday 09:00 – 13:00
14:00 – 17:30
Friday 09:00 – 13:00
14:30 – 17:30
Saturday 09:00 – 12:00

Actual Opening Hours:

Monday-Friday 09:00 – 17:30
Saturday 09:00 – 12:00

Conway Pharmacy	238 Monkmoor	Pharmacy Core Hours:	
	Shrewsbury	Monday- Friday	09:00 – 13:00 14:00 – 18:00
		Actual Opening Hours:	
		Monday-Friday	09:00 – 18:00
		Saturday	09:00 – 13:00
Bicton Heath Pharmacy	Unit 2 Bicton Heath Shopping Centre	Pharmacy Core Hours:	
	Shrewsbury	Monday- Friday	09:00 – 13:00 14:00 – 17:30
		Saturday	09:00 – 12:00
		Actual Opening Hours:	
		Monday-Friday	09:00 – 13:00 14:00 – 18:00
		Saturday	09:00 – 13:00
Cleobury Pharmacy	Off Vaughn Road	Pharmacy Core Hours:	
	Cleobury Mortimer	Monday - Friday	09:00 – 13:00 14:00 – 18:00
		Actual Opening Hours:	
		Monday-Friday	08:30 – 18:00
		Saturday	09:00 – 13:00
Bishops Castle Pharmacy	Church Street	Pharmacy Core Hours:	
	Bishops Castle	Monday- Friday	09:00 – 13:00 14:00 – 17:30

		Saturday	09:00 – 12:00
		Actual Opening Hours:	
		Monday & Thursday	08:30 – 18:00
		Tuesday, Wednesday & Friday	08:30 – 17:30
		Saturday	09:00 – 13:00
Highley Pharmacy	High Street Highley	Pharmacy Core Hours:	
		Monday- Friday	09:00 – 17:00
		Actual Opening Hours:	
		Monday-Friday	09:00 – 18:00
		Saturday	09:00 – 13:00
Day-Night Pharmacy Limited	5 Cross Street Ellesmere	Pharmacy Core Hours:	
		Monday- Friday	09:00 – 13:00 14:00 – 17:30
		Saturday	09:00 – 11:30
		Actual Opening Hours:	
		Monday-Friday	09:00 – 13:00 13:20 – 18:00
		Saturday	09:00 – 11:30
Lloyds Pharmacy	116 - 119 Galdeford Ludlow	Pharmacy Core Hours:	
		Monday- Thursday	09:00 – 12:00 14:30 - 18:30
		Friday	09:00 – 12:00 15:00 - 17:30
		Saturday	09:00 – 12:00 15:00 – 17:30
		Actual Opening Hours:	
		Monday-Friday	09:00 – 18:30

		Saturday	09:00 – 17:30
Lunts Pharmacies	Drovers House	Pharmacy Core Hours:	
	Craven Arms	Monday- - Thursday	09:00 – 13:00 14:00 – 17:30
		Friday	17:30
		Saturday	09:00 – 11:30
		Actual Opening Hours:	
		Monday-Friday	09:00 – 17:30
		Saturday	09:00 – 13:00
Lunts Pharmacies	1-3 Hereford Road	Pharmacy Core Hours:	
	Shrewsbury	Monday- Friday	09:00 – 13:00 14:00 – 17:30 09:00 – 11:30
		Saturday	11:30
		Actual Opening Hours:	
		Monday-Friday	09:00 – 18:00
		Saturday	09:00 – 12:00
Bridgnorth Pharmacy	2 Mill Street Bridgnorth	Pharmacy core hours:	
		Monday - Friday	09:00 – 17:00
		Actual Opening Hours:	
		Monday - Friday	09:00 – 18:00
		Saturday	09:00 – 13:00

**Lunts
Pharmacies**

The Tannery Baker St	Pharmacy Core Hours:	09:00 – 13:00 14:00 – 17:30
Shrewsbury	Monday- Friday	09:00 – 11:30
	Monday- Friday	09:00 – 11:30
	Saturday Actual Opening Hours:	08:30 – 18:00
	Monday-Friday	09:00 – 13:00
	Saturday	13:00

**Pontesbury
Pharmacy**

Main Road	Pharmacy Core Hours:	09:00 – 13:00 14:00 – 17:30
Pontesbury	Monday- Friday	09:00 – 11:30
	Saturday	11:30
	Actual Opening Hours:	09:00 – 13:00 14:00 – 18:00
	Monday, Wednesday, Thursday & Friday	09:00 – 13:00 14:00 – 17:30
	Tuesday	09:00 – 13:00
	Saturday	13:00

**Rhodes
Pharmacy**

28 Claremont Hill	Pharmacy Core Hours:	09:00 – 17:00
Shrewsbury	Monday- Friday	09:00 – 17:30
	Actual Opening Hours:	09:00 – 17:30
	Monday-Friday	09:00 – 17:30
	Saturday	CLOSED

**Hillside
Pharmacy**

18 Sandford Avenue	Pharmacy Core Hours:	09:00 – 17:00
Church Stretton	Monday- Friday	09:00 – 17:00

Actual Opening Hours:

Monday-Friday 09:00 – 17:30
Saturday 09:00 – 17:00

Wenlock Pharmacy

14 High Street
Much Wenlock

Pharmacy Core Hours:

Monday- Friday 09:00 – 17:00

Actual Opening Hours:

Monday-Friday 09:00 – 18:00
Saturday 09:00 – 13:00

Rowlands Pharmacy

11 High Street
Whitchurch

Pharmacy Core Hours:

Monday- Friday 09:00 – 13:00
Saturday 14:00 – 17:30
11:30

Actual Opening Hours:

Monday-Friday 09:00 – 13:00
Saturday 13:20 – 17:30
12:00

Rowlands Pharmacy

New Street
Wem

Pharmacy Core Hours:

Monday- Friday 09:00 – 13:00
Saturday 14:00 – 17:30
11:30

Actual Opening Hours:

Monday-Friday 09:00 – 13:00

13:20 –
17:30
09:00 –
12:00

Saturday

**Rowlands
Pharmacy**

Severn Fields Health
Centre

Sundorne Road

Shrewsbury

**Pharmacy Core
Hours:**

Monday-Friday

09:00 –
13:00
14:00 –
17:30
09:00 –
11:30

Saturday

**Actual Opening
Hours:**

Monday-Friday

09:00 –
13:00
13:20 –
18:00
09:00 –
12:00

Saturday

**Rowlands
Pharmacy**

25 Sutton Road

Shrewsbury

**Pharmacy Core
Hours:**

Monday-Friday

09:00 –
13:00
14:00 –
18:00
09:00 –
12:00

Saturday

**Actual Opening
Hours:**

Monday-Friday

09:00 –
18:00
09:00 –
12:00

Saturday

**Rowlands
Pharmacy**

40 Sandford Avenue
Church Stretton

Pharmacy Core Hours:

Monday-Friday

09:00 – 13:00
14:00 –
17:30
09:00 –
11:30

Saturday

**Actual Opening
Hours:**

Monday-Friday

09:00 – 13:00
13:20 –
17:30

Saturday

**Rowlands
Pharmacy**

7 Lansdowne Road	Pharmacy Core Hours:	
Bayston Hill	Monday-Friday	09:00 – 13:00 14:00 – 17:30
	Saturday	09:00 – 11:30
	Actual Opening Hours:	
	Monday - Friday	09:00 – 13:00 14:00 – 17:30
	Saturday	09:00 – 13:00

**Rowlands
Pharmacy**

80 High Street	Pharmacy Core Hours:	
Broseley	Monday-Friday	09:00 – 13:00 14:00 – 17:30
	Saturday	09:00 – 11:30
	Actual Opening Hours:	
	Monday-Friday	09:00 – 13:00 14:00 – 17:30
	Saturday	09:00 – 12:00

**St Martins
Pharmacy**

Stans Superstore	Pharmacy Core Hours:	
Oswestry	Monday-Friday	09:00 – 13:00 13:30 – 17:00
	Saturday	09:00 – 11:30
	Actual Opening Hours:	
	Monday-Friday	09:00 – 17:30
	Saturday	09:00 – 13:00

T A Rhodes Ltd	77 High Street	Pharmacy Core Hours:	
	Albrighton	Monday-Friday	09:00 – 17:00
		Actual Opening Hours:	
		Monday-Friday	09:00 – 18:00
		Friday	08:30 – 18:00
		Saturday	09:00 – 16:00

Radbrook Green Pharmacy	Bank Farm Road	Pharmacy Core Hours:	
	Shrewsbury	Monday-Friday	09:00 – 13:00 14:00 – 18:00
		Saturday	09:30 – 12:00
		Actual Opening Hours:	
		Monday-Friday	09:00 – 18:00
		Saturday	09:00 – 13:00

T/A Tesco Pharmacy	Cattle Market	Pharmacy Core Hours:	
	Battlesfield Road	Monday	08:00 – 22:30
	Shrewsbury	Tuesday – Friday	06:30 – 22:30
		Saturday	06:30 – 22:00
		Sunday	10:00 – 16:00
		Actual Opening Hours:	
		Monday	08:00 – 22:30
		Tuesday - Friday	06:30 – 22:30
		Saturday	06:30 – 22:00
		Sunday	10:00 – 16:00

Lloyds Pharmacy (In-store Sainsburys)	Meole Brace Retail Park	Pharmacy Hours:	
	Shrewsbury	Monday-Friday	07:00 – 23:00
		Saturday	07:00 – 22:00
		Sunday	10:00 – 16:00

Shop Hours:

	07:00 –
Monday-Friday	23:00
	07:00 –
Saturday	22:00
	10:00 –
Sunday	16:00

**Boots UK
Ltd**

5 Church Street
Oswestry

**Pharmacy Core
Hours:**

	09:00 –
Monday-Friday	13:00
	14:00 –
	18:00
	10:00 –
Saturday	12:30

**Actual Opening
Hours:**

	08:30 –
Monday-Friday	18:00
	08:30 –
Saturday	17:00
	10:00 –
Sunday	16:00

**Green End
Pharmacy**

11-13 Green End
Whitchurch

**Pharmacy Core
Hours:**

	09:00 –
Monday-Friday	17:00

**Actual Opening
Hours:**

	08:45 –
Monday-Friday	17:30
	08:45 –
Saturday	17:00

Appendix 6 Dispensing GP practices opening hours
Opening hours and surgery hours

Weekday	Monday			Tuesday			Wednesday			Thursday			Friday			Saturday	
Practice Name	From	To	Lunch	From	To	Lunch	From	To	Lunch	From	To	Lunch	From	To	Lunch	From	To
Albrighton - opening	08:00	20:30		08:00	18:30		08:00	18:30		08:00	18:30		08:00	18:30		Closed	
Albrighton - surgery	08:15	20:30		08:15	18:30		08:15	18:30		08:15	18:30		08:15	18:30		Closed	
Alveley - opening	08:30	18:00	12:30-14:00	08:30	18:00	12:30-14:00	08:30	12:30		08:30	18:00	12:30-14:00	08:30	18:00	12:30-14:00	Closed	
Alveley - surgery	09:00	17:00	11:30-15:00	09:00	17:00	11:30-15:00	08:30	10:30		09:00	17:00	11:30-15:00	09:00	16:30	11:30-14:30	Closed	
Beeches - opening	08:30	18:00	13:00-14:00	07:00	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	Closed	
Beeches - surgery	08:30	18:00	13:00-14:00	07:00	08:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	Closed	
Dorrington Branch	08:30	13:00		08:30	13:00		08:30	18:00	13:00-14:00	08:30	13:00		08:30	13:00		Closed	
Brown Clee - opening	08:00	17:30	13:00-14:00	08:00	17:30	13:00-14:00	08:00	17:30	13:00-14:00	08:00	17:30	13:00-14:00	08:00	17:30	13:00-14:00	Closed	
Brown Clee - surgery	08:00	17:30	13:00-14:00	08:00	17:30	13:00-14:00	08:00	17:30	13:00-14:00	08:00	17:30	13:00-14:00	08:00	17:30	13:00-14:00	Closed	
Stottesdon Branch	09:00	12:30		09:00	16:00	12:30-13:00	09:00	12:30		09:00	12:30		09:00	12:30		Closed	

Weekday	Monday			Tuesday			Wednesday			Thursday			Friday			Saturday	
Practice Name	From	To	Lunch	From	To	Lunch	From	To	Lunch	From	To	Lunch	From	To	Lunch	From	To
Clive Surgery - opening	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	Closed	
Clive Surgery - surgery	08:30	17:30	11:30-15:30	08:30	17:30	11:30-15:30	08:30	17:30	11:30-15:30	08:30	17:30	11:30-15:30	08:30	17:30	11:30-15:30	Closed	
Roden Branch				08:30	10:10		09:00	10:40		08:30	10:10					Closed	
Craven Arms - opening	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	17:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	Closed	
Craven Arms - surgery	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	17:00	13:00-14:00	08:30	18:00	13:00-14:00	09:30	18:00	13:00-14:00	Closed	
Ellesmere - opening	08:30	17:40	13:00-14:00	08:30	17:40	13:00-14:00	08:30	17:40	13:00-14:00	08:30	17:40	13:00-14:00	08:30	17:40	13:00-14:00	Closed	
Ellesmere - surgery	08:15	18:00	13:00-14:00	08:15	18:00	13:00-14:00	08:15	18:00	13:00-14:00	08:15	18:00	13:00-14:00	08:15	18:00	13:00-14:00	Closed	
Clay Pit St - Surgery	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	Closed	
Bridgewater - surgery	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	Closed	
Hodnet - opening	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	12:30		08:30	18:00	13:00-14:00	Closed	
Hodnet - surgery	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	12:30		08:30	18:00	13:00-14:00	Closed	

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Weekday	Monday			Tuesday			Wednesday			Thursday			Friday			Saturday	
Practice Name	From	To	Lunch	From	To	Lunch	From	To	Lunch	From	To	Lunch	From	To	Lunch	From	To
The Meadows - Opening	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	Closed	
Much Wenlock - opening	08:30	18:00		08:30	18:00		08:30	18:00		08:30	18:00		08:30	18:00		Closed	
Much Wenlock - surgery	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	Closed	
Cressage Branch - opening	08:30	18:00	12:30-14:00	08:30	18:00	12:30-14:00	08:30	18:00	12:30-14:00	08:30	18:00	12:30-14:00	08:30	12:30		Closed	
Cressage Branch - surgery	08:30	18:00	13:00-14:00	08:30	18:00	12:30-14:00	08:30	18:00	12:30-14:00	08:30	18:00	12:30-14:00	08:30	12:30		Closed	
Plas Ffynnon - opening	08:00	18:00		08:00	18:00		08:00	18:00		08:00	17:00		08:00	18:00		Closed	
Plas Ffynnon - surgery	08:30	18:00		08:30	18:00		08:30	18:00		08:30	17:00		08:30	18:00		Closed	
Pontesbury - opening	08:30	18:30		08:30	18:30		08:30	18:30		08:30	18:30		08:30	18:30		Closed	
Pontesbury - surgery	09:00	18:30	13:00-14:00*	09:00	18:30	13:00-14:00*	09:00	18:30	13:00-14:00*	09:00	18:30	13:00-14:00*	09:00	18:30	13:00-14:00*	Closed	
Prescott - opening	08:30	18:00		08:30	18:00		08:30	18:00		08:30	18:00		08:30	18:00		Closed	

Weekday	Monday			Tuesday			Wednesday			Thursday			Friday			Saturday	
Practice Name	From	To	Lunch	From	To	Lunch	From	To	Lunch	From	To	Lunch	From	To	Lunch	From	To
Shawbury - surgery	08:30	18:00	12:30-13:30	08:30	18:30	12:30-13:30	08:30	12:30		08:30	18:00	12:30-13:30	08:30	18:00	12:30-13:30	Closed	
Worthen - opening	08:30	18:00		08:30	18:00		08:30	12:00		08:30	18:00		08:30	18:00		Closed	
Worthen - surgery	08:30	18:00		08:30	18:00		08:30	12:00		08:30	18:00		08:30	18:00		Closed	
Knockin - opening	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	08:30	18:00	13:00-14:00	Closed	
Knockin - surgery	09:00	17:30	11:00-15:30	09:00	17:30	11:00-15:30	09:00	17:30	11:00-15:30	09:00	17:30	11:00-15:30	09:00	17:30	11:00-15:30	Closed	
The Meadows - Surgery	08:00	18:00	13:00-14:00	08:00	18:00	13:00-14:00	08:00	18:00	13:00-14:00	08:00	18:00	13:00-14:00	08:00	18:00	13:00-14:00	Closed	
Prescott - surgery	08:30	18:00		08:30	18:00		08:30	18:00		08:30	18:00		08:30	18:00		Closed	
Shawbury - opening	08:30	18:00	12:30-13:30	08:30	18:00	12:30-13:30	08:30	12:30		08:30	18:00	12:30-13:30	08:30	18:00	12:30-13:30	Closed	

* The practice is open during these times, but there are no face-to-face appointments, dispensary times are (8:30 – 13:00 and 14:00 - 18:30)

