

# **Pharmaceutical Needs Assessment (PNA)**

## **Public Health and Wellbeing Directorate**

## **Dudley Metropolitan Borough Council**

## **2022 – 2025**

**Date approved by Dudley Health and Wellbeing Board: 23 September 2022**

**Date published: 26 September 2022**

This PNA has been produced in accordance with the National Health Service (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013. Supplementary statements will be issued in response to changes to pharmaceutical services since the publication of this PNA.

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# Contents

<b>ACKNOWLEDGEMENTS .....</b>	<b>5</b>
<b>EXECUTIVE SUMMARY .....</b>	<b>6</b>
LOCAL CONTEXT .....	7
PROCESS .....	8
CONCLUSION.....	8
<b>INTRODUCTION TO PHARMACEUTICAL NEEDS ASSESSMENT .....</b>	<b>12</b>
WHAT IS A PHARMACEUTICAL NEEDS ASSESSMENT?.....	12
WHAT IS THE PURPOSE OF THE PNA? .....	12
LEGISLATIVE FRAMEWORK.....	13
FUTURE PNAs AND SUPPLEMENTARY STATEMENTS.....	14
NATIONAL POLICY.....	15
LOCAL POLICY.....	16
EXCLUSIONS FROM THE SCOPE OF THE ASSESSMENT .....	18
<b>NHS PHARMACEUTICAL SERVICES.....</b>	<b>20</b>
LOCAL PHARMACY SERVICES .....	21
PUBLIC HEALTH SERVICES.....	21
CLINICAL COMMISSIONING GROUPS AND TRANSITION TO INTEGRATED CARE SYSTEMS .....	23
OTHER SERVICES.....	24
THE PRIORY PHARMACY (LOCAL PHARMACEUTICAL SERVICE) .....	25
<b>PROCESS FOLLOWED IN DEVELOPING THE PNA.....</b>	<b>26</b>
CONSULTATION AND ENGAGEMENT .....	26
<b>DUDLEY BOROUGH .....</b>	<b>27</b>
ENVIRONMENT.....	27
ECONOMY .....	28
GEOGRAPHY .....	28
DEPRIVATION .....	29
POPULATION .....	29
AGE .....	31
LIFE EXPECTANCY .....	31
ETHNICITY.....	31
LIFESTYLES.....	31
<b>ACCESS TO COMMUNITY PHARMACIES AND PHARMACEUTICAL SERVICES .....</b>	<b>34</b>
PHARMACY NUMBERS, WALKING TIMES AND GEOGRAPHICAL AND PHYSICAL LOCATION .....	34
WALK TIME ZONES .....	36
ACCESS FOR PEOPLE WITH DISABILITIES .....	39
ASSESSMENT 1: GEOGRAPHICAL AND PHYSICAL LOCATION OF PHARMACIES .....	39
OPENING HOURS .....	41
ASSESSMENT 2 – OPENING HOURS .....	42
<b>NHS COMMISSIONED COMMUNITY PHARMACY SERVICES.....</b>	<b>45</b>
PROVISION OF ESSENTIAL SERVICES .....	45
DISPENSING .....	45
REPEAT DISPENSING/BATCH PRESCRIBING .....	47
ELECTRONIC PRESCRIPTION SERVICE – RELEASE 2 (EPS R2) .....	47

PROVISION OF ADVANCED SERVICES.....	47
COMMUNITY PHARMACIST CONSULTATION SERVICE (CPCS) .....	48
ASSESSMENT 3: COMMUNITY PHARMACIST CONSULTATION SERVICE .....	50
NEW MEDICINE SERVICE.....	53
ASSESSMENT 4: NEW MEDICINE SERVICE.....	57
APPLIANCE USE REVIEWS AND STOMA APPLIANCE CUSTOMISATION SERVICE .....	57
ASSESSMENT 5: AURs AND SAC.....	58
SEASONAL INFLUENZA VACCINATION .....	59
ASSESSMENT 6: SEASONAL INFLUENZA VACCINATION .....	62
SMOKING CESSATION SERVICE .....	62
HEPATITIS C TESTING SERVICE.....	63
HYPERTENSION CASE FINDING SERVICE.....	64
ASSESSMENT 7: HYPERTENSION CASE FINDING.....	67
NHS ENGLAND & IMPROVEMENT MIDLANDS ENHANCED SERVICES.....	68
CHRISTMAS DAY, BOXING DAY AND EASTER SUNDAY ENHANCED SERVICES .....	68
TIER 1 AND TIER 2 EXTENDED CARE SERVICES (ENHANCED SERVICE).....	68
BLACK COUNTRY INTEGRATED CARE SYSTEM COMMISSIONED SERVICES .....	71
PHARMACY FIRST MINOR AILMENTS SERVICE (PFMAS) .....	72
ASSESSMENT 8: MINOR AILMENTS SERVICE .....	76
COVID URGENT EYE CARE SERVICE (CUES) (FORMERLY MINOR EYE CONDITIONS SERVICE (MECS)) ..	76
ASSESSMENT 9: CUES .....	78
SPECIALIST PALLIATIVE CARE DRUGS SUPPLY SERVICE.....	81
ASSESSMENT 10: SPECIALIST PALLIATIVE CARE DRUGS SUPPLY SERVICE .....	83
<b>DIRECTORATE OF PUBLIC HEALTH AND WELLBEING SERVICES .....</b>	<b>84</b>
SEXUAL HEALTH SERVICES.....	84
PROVISION OF EMERGENCY HORMONAL CONTRACEPTION (EHC).....	85
ASSESSMENT 11: PROVISION OF EMERGENCY HORMONAL CONTRACEPTION (EHC).....	86
CHLAMYDIA SCREENING SERVICE .....	88
ASSESSMENT 12: PROVISION OF CHLAMYDIA SCREENING .....	90
C-CARD CONDOM SCHEME .....	90
ASSESSMENT 13: PROVISION OF C-CARD SERVICE .....	90
SMOKING CESSATION SERVICES & NICOTINE REPLACEMENT THERAPY (NRT) VOUCHERS .....	91
ASSESSMENT 14: SMOKING CESSATION & NRT VOUCHER SERVICE .....	92
SUBSTANCE MISUSE SERVICES.....	94
SUPERVISED CONSUMPTION.....	94
ASSESSMENT 15: SUPERVISED CONSUMPTION SERVICES .....	95
NEEDLE EXCHANGE SERVICE.....	97
ASSESSMENT 16: NEEDLE EXCHANGE SERVICES.....	97
ALCOHOL SCREENING AND BRIEF INTERVENTION .....	99
ASSESSMENT 17: PROVISION OF ALCOHOL SCREENING AND BRIEF INTERVENTION .....	101
NHS HEALTH CHECKS.....	103
ASSESSMENT 18: NHS HEALTH CHECKS.....	105
HEALTHY START VITAMINS.....	107
ASSESSMENT 19: HEALTHY START VITAMINS.....	109
PHARMACY PROVISION OF COVID-19 LATERAL FLOW DEVICES.....	111
PHARMACY PROVISION OF COVID-19 VACCINATIONS .....	111
ASSESSMENT 20: PHARMACY SUPPORT FOR COVID-19 SERVICES .....	112
<b>PATIENT &amp; PUBLIC INVOLVEMENT .....</b>	<b>114</b>
SUMMARY OF HEALTHWATCH DUDLEY RESEARCH (AUGUST 2014).....	114
SUMMARY OF HEALTHWATCH DUDLEY RESEARCH (AUGUST 2017):.....	116

2022 PUBLIC CONSULTATION.....	118
STATUTORY 60-DAY CONSULTATION .....	122
<b>ANALYSIS OF ONLINE REVIEWS OF PHARMACY SERVICE USERS.....</b>	<b>123</b>
<b>EXCEPTED APPLICATIONS .....</b>	<b>127</b>
PHARMACIES THAT INTEND TO OPEN FOR AT LEAST 100 HOURS PER WEEK .....	127
DISTANCE SELLING PHARMACIES .....	129
<b>SHAPING THE FUTURE.....</b>	<b>130</b>
<b>FUTURE DEVELOPMENTS IN HOUSING AND TRANSPORT .....</b>	<b>131</b>
<b>CONCLUSION .....</b>	<b>133</b>
ASSESSMENT 1: GEOGRAPHICAL AND PHYSICAL LOCATION OF PHARMACIES .....	133
ASSESSMENT 2 – OPENING HOURS .....	134
ASSESSMENT 3: COMMUNITY PHARMACIST CONSULTATION SERVICE (CPCS).....	134
ASSESSMENT 4: NEW MEDICINE SERVICE (NMS) .....	135
ASSESSMENT 5: APPLIANCE USE REVIEWS (AUR's) AND STOMA APPLIANCE CUSTOMISATION APPLIANCE (SAC).....	135
ASSESSMENT 6: SEASONAL INFLUENZA VACCINATION .....	135
ASSESSMENT 7: HYPERTENSION CASE FINDING.....	136
ASSESSMENT 8: PHARMACY FIRST – MINOR AILMENTS SERVICE.....	137
ASSESSMENT 9: COVID-19 URGENT EYE SERVICE (CUES).....	137
ASSESSMENT 10: SPECIALIST PALLIATIVE CARE DRUGS SUPPLY SERVICE .....	137
ASSESSMENT 11: PROVISION OF EMERGENCY HORMONAL CONTRACEPTION (EHC).....	138
ASSESSMENT 12: PROVISION OF CHLAMYDIA SCREENING .....	138
ASSESSMENT 13: PROVISION OF C-CARD SERVICE .....	138
ASSESSMENT 14: SMOKING CESSATION & NRT VOUCHER SERVICE .....	138
ASSESSMENT 15: SUPERVISED CONSUMPTION SERVICES .....	139
ASSESSMENT 16: NEEDLE EXCHANGE SERVICES.....	139
ASSESSMENT 17: PROVISION OF ALCOHOL SCREENING AND BRIEF INTERVENTION .....	139
ASSESSMENT 18: NHS HEALTH CHECKS.....	140
ASSESSMENT 19: HEALTHY START VITAMINS .....	140
ASSESSMENT 20: PHARMACY SUPPORT FOR COVID-19 SERVICES .....	140
<b>GLOSSARY .....</b>	<b>141</b>
<b>APPENDICES .....</b>	<b>144</b>
APPENDIX 1: KEY TO PHARMACY LOCATIONS IN MAPS .....	144
APPENDIX 2: DUDLEY GP PRACTICES .....	147
APPENDIX 3: PHARMACIES WITHIN 2KM BOUNDARY OF DUDLEY BY UPPER TIER LOCAL AUTHORITY (UTLA) .....	148
APPENDIX 4A: PHARMACY IT, LANGUAGES AND COLLECTION / DELIVERY SERVICES .....	150
APPENDIX 4B: PHARMACY ACCESSIBILITY .....	153
APPENDIX 5A: DUDLEY PHARMACIES AND THE SERVICES THEY PROVIDE.....	156
APPENDIX 5B: DUDLEY PHARMACIES AND THE SERVICES THEY PROVIDE – PUBLIC HEALTH SPECIFIC....	159
APPENDIX 6: DUDLEY PHARMACY OPENING TIMES.....	163
APPENDIX 7 – PUBLIC ENGAGEMENT SURVEY QUESTIONNAIRE .....	166
APPENDIX 8 – RESULTS OF 2022 PUBLIC ENGAGEMENT QUESTIONNAIRE.....	172
APPENDIX 9: 60-DAY PUBLIC CONSULTATION ON THE DRAFT PHARMACEUTICAL NEEDS ASSESSMENT ..	191
APPENDIX 10 – QUESTIONS FOR STATUTORY 60-DAY PUBLIC CONSULTATION.....	192
APPENDIX 11 – PUBLIC CONSULTATION FEEDBACK .....	195
<b>BIBLIOGRAPHY .....</b>	<b>201</b>



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This document builds on the Dudley Health and Wellbeing Board's second PNA published 1<sup>st</sup> April 2018 (Dudley Health and Wellbeing Board, 2018). Data regarding community pharmacies are accurate to March 2022.

# Executive Summary

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From 1<sup>st</sup> April 2013, every Health and Wellbeing Board (HWB) in England has a statutory responsibility to publish and keep up to date a statement of the needs for pharmaceutical services for the population in its area, referred to as a “Pharmaceutical Needs Assessment” (PNA) (Royal Pharmaceutical Society, 2013).

The PNA will help in the commissioning of pharmaceutical services in the context of local priorities, and will be used by NHS England & Improvement (NHS E&I) when making decisions on applications to open new pharmacies (referred to as the market entry test). As these decisions may be appealed and challenged via the courts, it is important that PNAs comply with regulations and that mechanisms are established to keep the PNA up-to-date (Local Government Association, 2013).

This PNA includes information on:

- The legislative background.
- Demography of the Dudley population.
- Pharmacies in Dudley and the services they currently provide.
- Maps relating to Dudley and providers of pharmaceutical services in the area.
- Services in neighbouring local authorities that might affect the need for services for our population in Dudley.
- Conclusions on assessments of pharmaceutical need.
- Potential gaps in provision that could be met by providing more services through our existing provision of pharmacies and likely future pharmaceutical needs.

The pharmaceutical services to which the PNA must relate are all the services that may be provided under arrangements commissioned by NHS E&I for:

- (a) the provision of pharmaceutical services (including essential, advanced and enhanced services) with a person on the NHS E&I pharmaceutical list (Contractor);
- (b) The provision of pharmaceutical services under the Local Pharmaceutical Services (LPS) scheme.

Additionally, services (whilst outside of the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013) may be commissioned locally to community pharmacy by the CCG and/or the local authority, both of which will be identified and reported within the PNA (Department of Health, 2013a).

The pharmaceutical services that Dudley community pharmacies provide (under NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013) are

made up of three different service levels:

- (a) **Essential services** – provided by all contractors in all community pharmacies.
- (b) **Advanced services** – can be provided by all contractors once accreditation requirements for pharmacists and premises have been met. 62 out of 63 pharmacies (excluding distance selling) are accredited to provide these services at March 2022.
- (c) **Enhanced services** – commissioned directly by NHS E&I Midlands Region in response to local needs.

## Local Context

The Metropolitan Borough of Dudley is located on the edge of the West Midlands conurbation, approximately 9 miles west of the city of Birmingham and 6 miles south of Wolverhampton. Rural Staffordshire and Worcestershire (Bromsgrove) border Dudley to the west and south respectively. Dudley is located in an area colloquially referred to as “The Black Country”. The former Dudley Clinical Commissioning Group, subsequently becoming Black Country and West Birmingham CCG (Dudley Place), was coterminous with Dudley Metropolitan Borough Council (MBC), and historically both organisations have coproduced the Joint Strategic Needs Assessment (JSNA). With the formation of the new Integrated Care System and Integrated Care Board across the Black Country from 1<sup>st</sup> July 2022 to replacing the CCG, the production of future PNAs may change to a wider footprint across the system.

The purpose of this PNA is to review the pharmaceutical service provision in Dudley, assess the pharmaceutical needs of the patients and public of the borough and publish a statement by 1<sup>st</sup> October 2022. Health and wellbeing needs for the local population are described in the Dudley JSNA. This PNA does not replicate these detailed descriptions of health needs and it should be read alongside the Dudley JSNA.

The website [www.allaboutdudley.info](http://www.allaboutdudley.info) is updated regularly. Its maps and data sets give a full picture of the health needs in Dudley. The maps produced for the PNA use the same deprivation and ward based descriptions together with locality and post code descriptors.

In Dudley, as at March 2022, there are 62 community pharmacies and one LPS contract (Priory Community Pharmacy; pharmacy). In addition there are two distance selling pharmacies (wholly mail order or internet pharmacies) and one dispensing appliance contractor (DAC), giving 65 pharmacies and one DAC in total which are providing pharmaceutical services under arrangements made with NHS England. A DAC can only supply appliances (e.g. continence/stoma/woundcare etc) and not any medication to service users.

A growth of patient facing pharmacies from 59 in 2005 (when legislation regulating pharmacy openings were relaxed) to the current 63 has improved access to pharmaceutical services for our population.

## **Process**

This PNA was undertaken in accordance with the requirements set out in regulations 3-9 Schedule 1 of the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013. Whilst undertaking this PNA, Dudley Health and Wellbeing Board has sought the views of a wide range of key stakeholders to establish issues that affect the commissioning of pharmaceutical services and to ensure local health needs and priorities are met.

A statutory 60-day public consultation from the 1<sup>st</sup> July 2022 to 29<sup>th</sup> August 2022 seeks the views of members of the public and other stakeholders, on whether they agree with the contents of this PNA and whether it addresses issues that they consider relevant to the provision of pharmaceutical services. Feedback gathered will be presented in the final report.

## **Conclusion**

We have considered geographical access to the Community Pharmacies in our area, the services they provide and their opening hours (Figure 1 and Appendices 1, 5 and 6). In addition through identification of needs linked in the JSNA, the publication of the Dudley Joint Health and Wellbeing Strategy and the Black Country Medicines Optimisation strategic plans, we have assessed the potential for those needs to be met through pharmaceutical services.

We conclude that in the main there are sufficient pharmacies in Dudley to provide essential pharmaceutical services to the residents. However a gap in geographical location and access within Russells Hall Estate has been identified (Dudley & Netherton Primary Care Network). Pharmacies are situated both within and very close to GP practices and also in the major shopping centres, supermarkets and locality High Streets. Our pharmacies are open to provide services at the times needed and used by patients and the public with one late opening of a pharmacy until 22:30 each night (Jhoots Pharmacy, ID 27, see figure 1 and appendix 6). From our assessment of access to pharmacies for those people with disabilities (appendix 4B), it is evident that access to some pharmacies within Dudley may be restricted. We conclude that access to pharmacies and their services must comply with the relevant legislation (The Equality Act 2010) to ensure equal access for all across the borough.

This PNA has therefore concluded that there is a need for a further pharmaceutical contract application as a gap has been identified at the Russells Hall estate. Given the

close proximity of the Emergency Treatment Centre and Out of Hours service (located at Russell Hall Hospital and operating 24 hours), to proportionately fulfil this gap in service provision for our population, any new application must ensure access to services until midnight (within core contracted hours).

Dudley pharmacies provide several advanced services. Provision of the New Medicine Service is offered from 62 of the 63 pharmacies within Dudley (excluding distance selling pharmacies). Provision of Seasonal Flu Vaccination service is offered from 59 of the same 63 pharmacies. All 63 provide a Community Pharmacist Consultation Service. We conclude that within each PCN, whilst not every community pharmacy provide these services, there are a sufficient number to offer patients a reasonable choice for access.

Dudley pharmacies provide the local enhanced service (NHS E&I commissioned) and local commissioned services by Black Country Integrated Care System (ICS): Pharmacy First- Minor Ailments Service (PFMAS), COVID-19 Urgent Eye Care Service (CUES) and Specialist Palliative Care Drugs Supply Service (SPCDS). Access to these services is good around the borough, particularly in areas with the greatest health need (identified by greatest four deciles of deprivation).

Black Country ICS commissions a SPCDS service to four pharmacies around the borough to ensure key end of life medication is always available (for patients) when required without delay. Each Dudley PCN except Sedgley, Coseley and Gornal and Kingswinford and Wordsley has one pharmacy to provide this service. In the North of the borough (Sedgley), access is available from a nearby pharmacy within Wolverhampton during extended opening hours. All other community pharmacies remain able to dispense end of life care medicines in line with the essential services component of the community pharmacy contractual framework.

Community pharmacies in Dudley are commissioned to provide a range of public health services (categorised as Local Commissioned Services) through direct contract within the Directorate of Public Health and Wellbeing, Dudley Council or through a sub-contracting arrangement with one of the commissioned providers (e.g. Change, Grow and Live (Substance Misuse Specialist) and Solutions 4 Health Ltd (Adult Wellbeing). Pharmacies can choose if they wish to provide public health services. Analysis demonstrates that 59 out of the 63 can provide at least one public health commissioned service (excluding distance selling pharmacies). See Appendix 5b for full details of service provision.

Each public health service is commissioned with a different service users in mind. For example we have community pharmacies open on a Sunday commissioned to provide Emergency Hormonal Contraception. We conclude that there are gaps in service provision in PCNs with certain public health services, in particular alcohol screening and brief intervention, NHS health checks, smoking cessation to under-18 year olds and pregnant women and Healthy Start vitamins. However, we further conclude that results from the pharmacy contractor survey provide evidence that sufficient existing

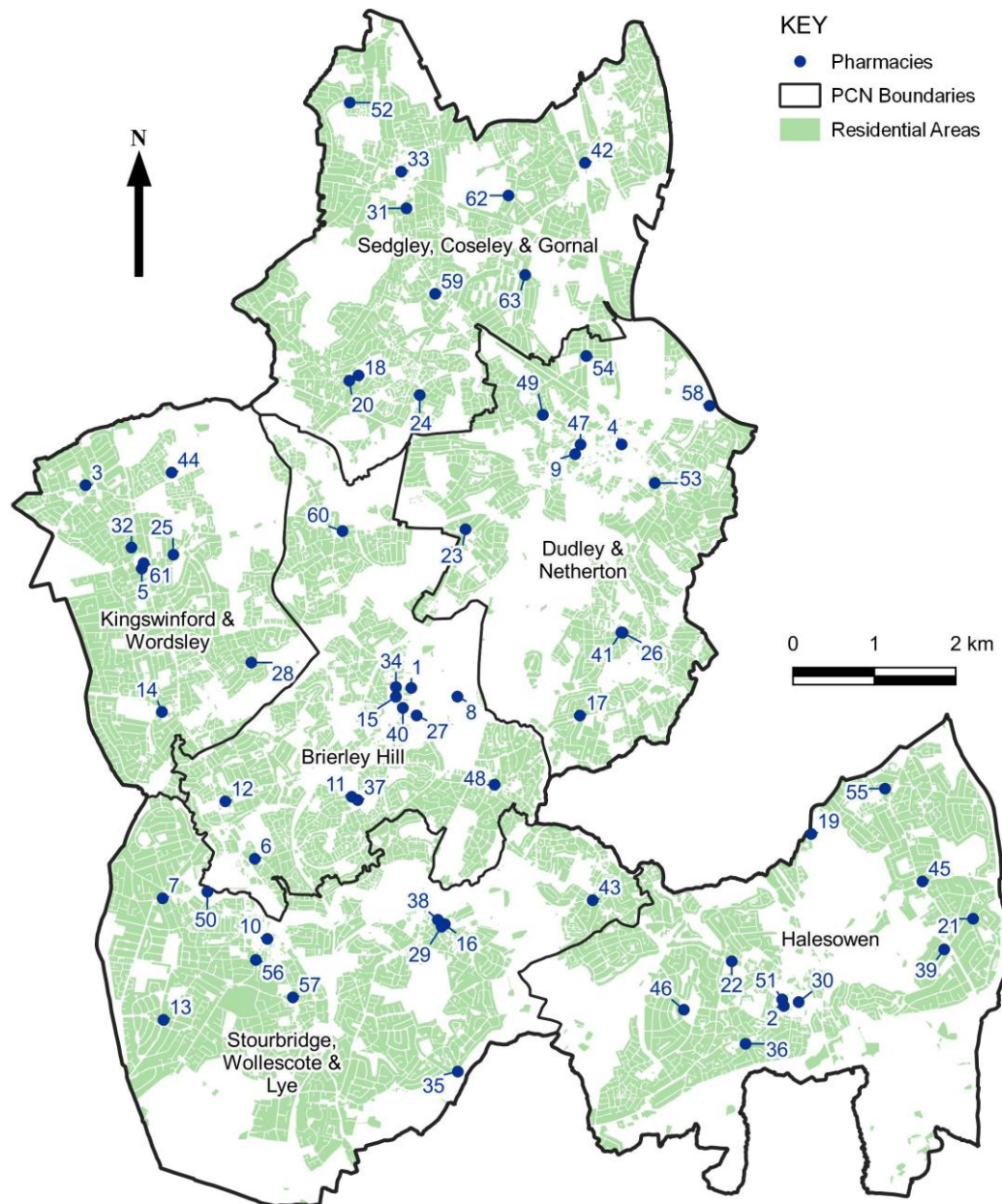
contractors are willing to fill any gaps that may arise or undertake any new services that Directorate of Public Health and Wellbeing (or its providers) may contemplate commissioning in the future.

The way in which pharmacies in Dudley embraced lateral flow testing for COVID-19 received national recognition, and pharmacies throughout the borough made a very significant effort to support the COVID-19 vaccination program. Their response has demonstrated how well placed and flexible our local pharmacies are in the face of a serious international public health threat.

A statutory consultation of a draft version of this PNA was undertaken between 1 July and 29 August 2022. No feedback was received that would require any significant amendments or further consultation.

We therefore conclude that there are no gaps in local commissioned services provision that could not be filled by the existing pharmacy contractors. The Directorate of Public Health and Wellbeing and the Black Country ICS Medicines Optimisation Team (working with the Dudley Local Pharmaceutical Committee) remain committed to continue to encourage and support all our pharmacies to improve access for patients for all local commissioned services.

**Figure 1: Location of Dudley Pharmacies by Primary Care Network (PCN)**



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC  
 Produced by: Intelligence Team, Dudley MBC  
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For key to pharmacies see appendix 1. Please note that there are two distance selling pharmacies (appendix 1, Table 16) which are **not** included on the map as patients cannot visit them. A table relating to the mapped location including postcodes, services provided and opening hours is also included in appendices 1, 4a, 4b, 5a, 5b and 6.

# **Introduction to Pharmaceutical Needs Assessment**

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Public health became the responsibility of local government when it transferred from the NHS to Local Authorities (LA) in April 2013. Dudley Metropolitan Borough Council (Dudley MBC) has a statutory duty through its Health and Wellbeing Board (HWB) to develop a Pharmaceutical Needs Assessment (PNA) periodically. The previous PNA was published by Dudley MBC in April 2018.

## **What is a Pharmaceutical Needs Assessment?**

A local PNA is a comprehensive assessment of the current and future pharmaceutical needs of the local population for community pharmacy, dispensing and appliance contractors and (where relevant) dispensing doctors and should identify where there are gaps in service provision (Department of Health, 2013a). The PNA will help in the commissioning of pharmaceutical services in the context of local priorities, and will be used by NHS England when making decisions on applications to open new pharmacies (referred to as the “Market Entry Test”). As these decisions may be appealed and challenged via the courts, it is important that PNAs comply with regulations and that mechanisms are established to keep the PNA up-to-date (Department of Health, 2013b).

## **What is the purpose of the PNA?**

- It will be used by NHS England and Improvement (NHS E&I) when making decisions on applications to open new pharmacies and dispensing appliance contractor premises; or applications from current pharmaceutical providers to change their existing regulatory requirements.
- It will help the HWB to work with providers to target services to the areas where they are needed and limit duplication of services in areas where provision is adequate.
- It will inform interested parties of the pharmaceutical needs in Dudley and enable work to plan, develop and deliver pharmaceutical services for the population.
- It will inform commissioning decisions by local commissioning bodies including local authorities (public health services from community pharmacies), NHS E&I and Integrated Care Systems (ICS) which replaced Clinical Commissioning Groups with effect from 1<sup>st</sup> July 2022.



## Legislative framework

Section 126 of the NHS Act 2006 places an obligation on NHS E&I to put arrangements in place so that drugs, medicines and listed appliances ordered via NHS prescriptions can be supplied to persons. Section 126 also describes the types of healthcare professionals who are authorised to order drugs, medicines and listed appliances on an NHS prescription. The first PNAs were published by NHS Primary Care Trusts (PCTs) according to the requirements in the 2006 Act. (Department of Health, 2013a).

The Health and Social Care Act 2012 (which received Royal Assent 27<sup>th</sup> March 2012) amended the NHS Act 2006. The 2012 Act established HWBs and transferred to them the responsibility to publish and keep up-to-date a statement of the needs for pharmaceutical services of the population in its area, with effect from 1 April 2013. The requirements on how to develop and update PNAs are set out in Regulations 3-9 Schedule 1 of the National Health Service (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 (UK Statutory Instrument, 2013).

The Health and Social Care Act 2012 also amended the Local Government and Public Involvement in Health Act 2007 to introduce duties and powers for HWBs in relation to Joint Strategic Needs Assessments (JSNAs). The preparation and consultation on the PNA should take account of the JSNA and other relevant local strategies in order to prevent duplication of work and multiple consultations with health groups, patients and the public. The development of PNAs is a separate duty to that of developing JSNAs. As a separate statutory requirement, PNAs cannot be subsumed as part of these other documents but can be annexed to them.

The PNA was last published by the HWB in April 2018, and normally has a maximum lifetime of three years. However, due to the COVID-19 pandemic, the timeline for this current PNA was extended until 1<sup>st</sup> October 2022. As part of developing their PNA, HWBs must undertake a consultation for a minimum of 60 days. The 2013 Regulations list those persons and organisations that the HWB must consult (UK Statutory Instrument, 2013). The regulations lay down the minimum information that must be contained within the PNA and also outline the process that must be followed in its development and that of any revised assessment.

The production and ongoing update, evaluation and revision of the Dudley PNA is a key part of the commissioning process for Community Pharmacy. This draft PNA for consultation is the third published by Dudley HWB under its statutory duty.

The PNA sets out to:

- Take stock of current community pharmacy service provision;
- To understand the pharmaceutical needs of the Dudley population;
- To consider the potential for community pharmacies in Dudley to meet population and health service needs;
- To support a rational approach to the commissioning of services from Dudley community pharmacies.

The following factors have been considered in the needs assessment:

- Access to and provision of essential pharmacy services within the borough;
- Access to and provision of advanced services – Community Pharmacist Consultation Service (CPCS), New Medicines Service (NMS), Appliance Use Reviews (AURs), Stoma Appliance Customisation (SAC), Flu Vaccination, Hypertension Case Finding Service, Smoking Cessation Service and Hepatitis C Testing Service.
- Access to and provision of enhanced services;
- Provision of local commissioned services by Black Country ICS and local public health services (Public Health and Wellbeing Directorate, Dudley MBC). Evaluation, development of and identification of potential service extensions directed by local and national strategic priorities;
- The potential for advanced, enhanced and local commissioned services (i.e. public health and/or ICS) to contribute to CCG and/or Local Authority priorities and to integrate with other services and care pathways;
- Identification of needs of the Dudley population linked to the JSNA and assessment of the potential of those needs to be met through pharmaceutical services.

The PNA will be used by NHS E&I when making decisions on applications to open new pharmacies and dispensing appliance contractor premises; or applications from current pharmaceutical providers to change their existing regulatory requirements. Such decisions are appealable to the NHS Resolution Family Health Services Appeal Unit (FHSAU), and decisions made on appeal can be challenged through the courts. PNAs will also inform the commissioning of enhanced services from pharmacies by NHS E&I, and the commissioning of services from pharmacies by the local authority and the ICS.

The use of PNAs for determining applications for new premises is well established. It is expected that some decisions made by NHS E&I may be appealed and that eventually there will be judicial reviews of decisions made by the FHSAU. It is therefore important that PNAs comply with the requirements of the regulations, that due process is followed in their development, and that they are kept up-to-date.

Primary Care Commissioning (PCC) has identified that failure to comply with the regulatory duties may lead to a legal challenge, for example where a party believes that they have been disadvantaged following refusal by NHS E&I of their application to open new premises (Primary Care Commissioning, 2013).

## **Future PNAs and Supplementary Statements**

The PNA will be updated every three years and supplementary statements may be published before this if deemed necessary by the HWB.

On behalf of the HWB, the Head of Healthcare Public Health (Public Health and Wellbeing, Dudley MBC) will lead responsibility for PNAs and will consider the need for producing a supplementary statement every six months or sooner as appropriate, in consultation with steering group members.

A revised PNA may need to be published when significant changes to the need for pharmaceutical services are identified, unless this is considered a disproportionate response (Royal Pharmaceutical Society, 2013). The HWB has therefore established a system that allows to:

- Identify changes to the need for pharmaceutical services within their area.
- Assess whether the changes are significant.
- Decide whether producing a new PNA is a disproportionate response.

HWBs need to ensure they are aware of any changes to the commissioning of public health services by the local authority and the commissioning of services by NHS E&I and the ICS as these may affect the need for pharmaceutical services. HWBs also need to ensure that NHS E&I Midlands regional team have access to their PNAs.

## **National Policy**

In April 2005 a 'new contract' (or more accurately a new set of regulations) was put in place for NHS community pharmacy services.

Historically, Primary Care Trusts (PCTs) were required to produce a Pharmaceutical Needs Assessment (PNA). This obligation was then transferred from PCTs to HWBs (by the Health and Social Care Act 2012), with the legal requirement for all HWBs to publish a PNA every three years.

The pharmaceutical services to which the PNA must relate are all the services that may be provided under arrangements made by NHS England for:

- a) the provision of pharmaceutical services with a person on the NHS E&I pharmaceutical list (Contractor); the provision of local pharmaceutical services under the Local Pharmaceutical Services (LPS) scheme;
- b) the dispensing of drugs and appliances with a person on a dispensing doctors list.

Additionally, services may be commissioned to community pharmacy by the ICS and/or the local authority, both of which will be identified and reported within the PNA. Pharmaceutical services can be provided from community pharmacies, dispensing doctors and appliance contractors.

In April 2008 the government published a White Paper, Pharmacy in England: Building on strengths – delivering the future (Department of Health, 2008a), which sets out practical, achievable ways in which pharmacists and their teams can contribute to improving patient care through delivering personalised pharmaceutical services and

care in the coming years. Whilst recognising that the role of pharmacy in dispensing medicines and ensuring the safe use of medicines will remain an important one, emphasis was placed on recognition of pharmacy's role in contributing to health improvement and wellbeing.

This PNA has been prepared at a time with significant recent change in the NHS as well as significant future change imminent within the next few months (aligned to the NHS England Long Term Plan published in January 2019). Specific to community pharmacy within this plan, NHS E&I will work with government to make greater use of community pharmacists' skills and opportunities to engage patients, while also exploring further efficiencies through reform of reimbursement and wider supply arrangements. Further details with the changing healthcare landscape can be found here <http://psnc.org.uk/the-healthcare-landscape/>

At the same time the NHS is continually being asked to improve quality and productivity in the background of unprecedented financial challenge following the COVID-19 pandemic. Subsequently, all areas of NHS spending, including pharmaceutical services will be scrutinised to ensure that money is spent to deliver the outcomes expected by patients and the public.

## **Local Policy**

The production of an annual JSNA has been a statutory duty placed on the Directors of Public Health, Children's Services and Adult Services since 2007. The Health and Social Care Act 2012 (which received Royal Assent on 27th March 2012) places "an equal & explicit obligation" on Local Authorities and Clinical Commissioning Groups (CCGs) to prepare a JSNA, and to develop a Joint Health & Wellbeing Strategy (JHWS) for meeting local needs identified in the JSNA from April 2013. This duty will be discharged by HWBs.

The Dudley JSNA includes an interactive web platform, All About Dudley, with a wide range of data describing the borough. This is complemented by deep dive needs assessments in specific subject areas and at the time of writing this PNA, in June 2022, is in the process of being updated.

Dudley Health and Wellbeing Board published its most recent Health and Wellbeing Strategy in 2017, setting out a clear strategic vision and identifying three key health priorities:

- Promoting healthy weight – by inspiring education settings, work and communities to develop projects to encourage people to make healthy choices and change the environment to make it easier for people to eat healthier and be active. Pharmacies are helping to achieve this through commissioning of public health services and NHS E&I services. They can also influence other factors

that influence health inequalities such as excessive alcohol, smoking and early detection of ill-health.

- Reducing loneliness and isolation – by making loneliness and isolation everyone's business, expanding the role of volunteering, creating opportunities for all ages to get together and connect and developing and implement tools to identify lonely people and refer to support in the community. The Healthy Living Pharmacy (HLP) framework is an essential service of the community pharmacy contract with NHS E&I (the commissioner) and can help to reduce loneliness and isolation by making every contact count, provide opportunities to signpost people to other services, provide a healthy and safe environment and supporting the development of health-enhancing assets in local communities.
- Reducing the impact of poverty – by stimulating the economy, to create good quality jobs and employ local people and prepare young people for work, ensuring that people have access to good quality and affordable housing, protecting people from financial abuse and providing credit services for all ages. Pharmacies can contribute to this through commissioning of public health services and NHS E&I advanced services which reduce the impact of Poverty by supporting healthier lifestyles and working on areas which influence health inequalities, for instance healthy vitamins and the C card scheme (Dudley Health and Wellbeing Board, 2017)

At the time of writing, the JHWS is expected to be reviewed and updated in the near future so these local priorities may be subject to change. However, the above three priorities will continue to be relevant and important contributors to better health.

At the time of writing, the Black Country ICS is currently developing a pharmacy and medicines optimisation transformation plan 2022-2024 which will bring together all parts of the pharmacy system across the Black Country to have a shared strategy of outcomes. Establishment of the Black Country ICS Pharmacy and Medicines Optimisation transformation plan provides community pharmacy with its best ever opportunity to truly integrate within the local pharmacy system. Commitment to deliver on the following interventions which have been highlighted by the National Audit Office previously as having a high impact on life expectancy remain of relevance:

- Increasing the prescribing of drugs to control blood pressure and cholesterol;
- Increasing anticoagulation treatment for Atrial Fibrillation;
- Improving blood sugar control for diabetes;

Again, community pharmacy has opportunity to support all of these interventions through integrated medicines optimisation across the health economy. The recent introduction of a new advanced service by NHS E&I (Hypertension Case Finding) will support better management of our populations blood pressure and thereby reduce cardiovascular risk.

In addition to local priorities there are national priority areas for improvement in health and wellbeing. The Department of Health has published outcomes frameworks for the

NHS, CCGs, Social Care, and Public Health which offer a way of measuring progress towards achieving these aims. The Public Health Outcomes Framework (PHOF) for England, 2022 sets out desired outcomes for public health, focussing on two high-level outcomes:

- Increased healthy life expectancy
- Reduced differences in life expectancy and healthy life expectancy between communities

The commissioning of services to providers (not just community pharmacy) is included in plans within the Public Health and Wellbeing Directorate for tackling local priorities in reducing smoking prevalence and smoking related deaths, alcohol misuse, tackling obesity, increasing healthy start vitamins uptake, improving chlamydia screening and treatment (15-24 age group) and NHS health checks (primary prevention and early detection of ill health).

In Dudley, as at March 2022, there are 62 community pharmacies (Figure 1, Appendix 1) and one LPS contract (Priory Community Pharmacy; pharmacy ID 54, Figure 1, Appendix 1) providing pharmaceutical services under arrangements made with NHS England. In addition there are two distance selling pharmacies (wholly mail order or internet pharmacies) and one dispensing appliance contractor. (Appendix 1, Table 16); there are no dispensing doctors within Dudley. This network of 65 community pharmacies includes six 100 hour pharmacies (Appendix 5a).

## **Exclusions from the scope of the assessment**

The PNA has a regulatory purpose which sets the scope of the assessment. However pharmaceutical services and pharmacists are evident in other areas of work in which the ICS has an interest but are excluded from this assessment. These include prisons, secondary and tertiary care sites where patients may be obtaining a type of pharmaceutical service that is not covered by this assessment and advice to clinicians and/or patients via specialist pharmacists.

Prisons - Dudley has no prisons within its area.

Hospital Pharmacy Services - Most of Dudley's hospital services are provided by Dudley Group of Hospitals Foundation Trust (DGFT), who operate at the following sites:

- Russells Hall Hospital, Pensnett Road, Dudley, DY1 2HQ
- Corbett Hospital Outpatients' Centre, Vicarage Road, Stourbridge, DY8 4JB
- Guest Hospital Outpatients' Centre Tipton Rd, Dudley, DY1 4SE

Some NHS services (commissioned by Black Country ICS) are also provided by West Midlands Private Hospital (Ramsay Healthcare), Colman Hill, Halesowen, B63 2AH and Stourside Hospital (Ramsay Healthcare), 60 Bradley Road, Stourbridge, DY8 1UX.

In addition patients are treated by the Black Country Healthcare NHS Foundation Trust at Bushey Fields Hospital (services to support mental health) and Dudley Integrated Health and Care NHS Trust (DIHC) based in the community within general practices (primary care mental health services including talking therapy, clinical pharmacist and pharmacy technician services to support medicines optimisation, physiotherapy, dieticians, paramedics, social prescriber link workers and care navigators. List not exhaustive).

The DGHFT pharmacy department commissions a monitored dosage system service to the Broadway Pharmacy (ID number 13, figure 1 and appendix 1). This facilitates a seamless, safer and a more efficient discharge for those discharged patients unable to manage and adhere to their medicines through conventional dispensing once back within their own place of residence. An assessment of need for a monitored dosage system is made by the ward pharmacist within the hospital ahead of the discharge planning process. The service ensures that the patients' GP and their regular dispensing community pharmacy are fully communicated with (by the Broadway Pharmacy) to provide an accurate list of post-discharge medication.

Although the PNA makes no assessment of the need for pharmaceutical services in secondary or tertiary care, it is concerned to ensure that patients moving in and out of hospital have an integrated pharmaceutical service which ensures the continuity of support around medicines.

Specialist Pharmacists - Dudley Integrated Health and Care NHS Trust (DIHC) provides a practice based clinical pharmacist in each GP practice within Dudley proportionate to patient list size. DIHC also provides two specialist clinical pharmacist roles, Older Persons and respiratory. A specialist community based Neurology pharmacist role is provided via Dudley Group of Hospitals Foundation NHS Trust.

# NHS Pharmaceutical Services

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The pharmaceutical services that community pharmacies provide are made up of three different service levels as defined in the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 (UK Statutory Instrument, 2013):

Essential services – provided by all contractors in all community pharmacies (England) and include; Dispensing and actions associated with dispensing (e.g. keeping records), Repeat dispensing, Disposal of waste medicines, Promotion of healthy lifestyles and Healthy Living Pharmacy programme, Prescription linked interventions, Public health campaigns, Signposting, Support for self-care, discharge medicines service and Clinical Governance. All pharmacy contractors must provide the full range of essential services.

Advanced services – can be provided by all community pharmacy contractors (England) once accreditation requirements for pharmacists and premises have been met. Advanced services include: Community Pharmacist Consultation Service (CPCS), New Medicine Service (NMS), Appliance Use Reviews (AUR), Stoma Appliance Customisation (SAC), Hepatitis C Testing Service, Smoking Cessation Service, Hypertension-Case Finding and Flu Vaccination.. Any pharmacy contractor may choose to provide advanced services, though there are accreditations which need to be met in relation to premises, training and notification to NHS E&I Midlands team.

Enhanced services – are commissioned locally directly by NHS E&I Midlands Team in line with PNAs produced by Health and Wellbeing Boards from the 1<sup>st</sup> April 2013 onwards. Enhanced services may include: Anticoagulant monitoring service, Care home service, Disease specific medicines management service, Gluten free food supply service, Independent prescribing service, Home delivery service, Language access service, Medication review service, Medicines assessment and compliance support service, Minor ailments service, On demand availability of specialist drugs service, Out of hours service, Patient group directions service (not related to public health services), Prescriber support service, Schools service and Supplementary prescribing service.

Currently, NHS E&I Midlands Team commission (enhanced services) an 'Out of Hours' rota for the provision of pharmaceutical services in Dudley to cover Christmas day, Boxing day, Easter Sunday and other national bank holidays in England. At the time of writing this PNA, the following community pharmacy Tier 1 Extended Care Services are being commissioned by NHS E&I Midlands team:

- Treatment of simple urinary tract infections in females via a patient group direction (PGD)
- Treatment of acute bacterial conjunctivitis via a PGD

Expansion of Tier 2 and Tier 3 services is discussed in more detail later. Enhanced services are commissioned by NHS E&I based on local population & system need.



## **Local Pharmacy Services**

Local pharmacy services are services which are commissioned locally (by commissioners other than NHS E&I) and fall outside of the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013. Hence, local commissioned pharmacy services have no influence on the commissioning of new pharmacy contract applications by NHS E&I.

The 2013 regulations set out the enhanced services which may be commissioned from pharmacy contractors. It is important to note that the definition of enhanced services has changed, and the current commissioning arrangements can now be seen as more complex since pharmacy services previously commissioned by one organisation (PCTs) can now be commissioned by at least three different organisations (ICS, local authorities and NHS E&I) and the responsibility for commissioning some services remains unresolved. Having said that, with the creation of the Black Country ICS and Integrated Care Board (ICB) from July 2022, commissioning is more likely to be aligned and joined up to overarching system outcomes.

## **Public Health Services**

The changes to enhanced services are summarised in the following extract from Primary Care Commissioning (PCC) (Primary Care Commissioning, 2013).

The commissioning of the following enhanced services which were listed in the Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2012 transferred from PCTs to local authorities with effect from 1 April 2013:

- Needle and syringe exchange
- Screening services such as chlamydia screening
- Stop smoking
- Supervised administration service (Methadone/Buprenorphine/Suboxone®)
- Emergency hormonal contraception services through patient group directions.

Where such services are commissioned by local authorities they no longer fall within the definition of enhanced services or pharmaceutical services as set out in the regulations and therefore should not be referred to as enhanced services.

However, the 2013 regulations do make provision for NHS E&I to commission the above services from pharmacy contractors when asked to do so by a local authority or clinical commissioning group (with inference to ICS moving forward). Where this is the case they are treated as enhanced services and fall within the definition of pharmaceutical services.

Dudley MBC, through the Public Health and Wellbeing Directorate, both directly and indirectly commissions public health services (through individual contracts for services)

with our pharmacy contractors and as such these services do not fall within the definition of “pharmaceutical services”. Please refer to Table 1 for a list of local commissioned public health services.

**Table 1:** Public Health Services Commissioned by Directorate of Health & Wellbeing Dudley MBC

Public Health Service	Commissioned Service
Emergency hormonal contraception (EHC)	The EHC service is commissioned by the Public Health and Wellbeing Directorate to provide the morning after pill to females aged over 13 years under a patient group direction (PGD).
Chlamydia screening service	Some pharmacies provide a chlamydia screening service to 15-24 years olds as part of a local programme which is co-ordinated by Brook and funded by Public Health.
C-card condom Scheme	As part of the “c-card” scheme, commissioned by Public Health and co-ordinated by Brook, this service allows for distribution of condoms to young people aged 13-24 years. This is a multi-agency borough wide scheme. Once registered a young person can access c-card services at any venue in the scheme.
Smoking cessation & nicotine replacement therapy (NRT) voucher	Pharmacies are commissioned to deliver an advice and counselling service to support smokers under 18 years of age and pregnant females to quit smoking. In addition Varenicline for stop smoking is supplied under Patient Group Direction commissioned by Solutions4Health Ltd (S4H) on behalf of Public Health and Wellbeing.
Supervised consumption service	A service whereby patients prescribed drug treatments for addiction can obtain their treatment on a frequent basis, often daily and that this treatment is taken in the presence of the pharmacist is commissioned by CGL on behalf of Public Health and Wellbeing.
Needle exchange & naloxone service	A needle exchange service whereby the pharmacy provides clean injecting equipment to drug users and takes in used injecting equipment for safe disposal. Commissioned by Change, Grow and Live (CGL) on behalf of the Public Health and Wellbeing.
Alcohol screening & brief interventions	Pharmacies are commissioned to deliver alcohol screening, evidence-based brief interventions, referral to specialist services, information and advice to and for alcohol users, in addition to those considered to be concerned for others.
NHS Health Checks	This is a primary prevention service aiming to prevent vascular diseases and manage an individual’s risk of developing them. The objective is to deliver the national NHS Health checks programme.
Healthy Start vitamins	Healthy Start is a UK-wide government scheme to improve the health of low-income pregnant women and families on benefits and tax credits. Women who are at least ten weeks pregnant and families with children under four years old (referred to as <i>Healthy Start beneficiaries</i> ) who qualify for Healthy Start can obtain vitamins through pharmacies commissioned to deliver this service.

## Clinical Commissioning Groups and transition to Integrated Care Systems

CCGs had a role to commission most NHS services locally, aside from those commissioned by NHS E&I such as GP core contracts (although in Dudley, this responsibility had transferred to the CCG) and specialised commissioned services. CCGs are able to commission services from pharmacies but similar to public health services these services will be known as local services and then fall outside the definition of enhanced services, and so have no bearing on pharmacy applications by NHS E&I.

In recent years, there has been a significant change in the NHS landscape. A new integrated health and care NHS Trust in Dudley has formed (from 1<sup>st</sup> April 2021) with a vision to care for Dudley patients in the “*community where possible and hospital where necessary*”. Dudley Integrated Health and Care NHS Trust (DIHC) is the first of its kind in the country, integrating primary care across Dudley with community physical and mental health services. This organisation will have responsibility for the health and wellbeing of the whole population of Dudley, working to an outcomes based contract to delivery its innovative services with general practices at the centre of patient care.

The NHS Long Term Plan created Primary Care Networks (PCNs) which are a group of general practices typically covering 30,000-50,000 patients within a population. The networks will provide the structure and funding for services to be developed locally, in response to the needs of the patients they serve. Within Dudley, there are six PCNs which have partially integrated with DIHC to pool resources to improve support for patient outcomes and narrow health inequalities, adopting a population health approach to targeted interventions. To support future working and aligned integration, Dudley Local Pharmaceutical Committee (LPC) following consultation has mapped its community pharmacy contractors to a PCN footprint as well as the appointment of a community pharmacy PCN lead. Dispensing data (essential service) was a key variable to influence, to which PCN a community pharmacy was mapped into. DIHC is presently supporting community pharmacies to integrate with PCNs to ensure transfers of appropriate care can occur with appropriate safety netting should care need to be redirected to another service. This is being achieved through clear pathways and communication at a PCN level (e.g. Community Pharmacist Consultation Service and Hypertension Case Finding which will be discussed later).

At the time of writing, NHS E&I have committed additional financial resource into the Black Country ICS through the planned recruitment of a whole time equivalent ( 37.5 hours per week) senior community pharmacy lead post (agenda for change band 8C). This senior post will be accountable to the NHS E&I regional pharmacy integration lead as well as the Black Country ICS Integrated Medicines Optimisation Committee with a key role in supporting and increasing operational delivery of many commissioned services to community pharmacy.

Community pharmacy teams have never before had a stronger opportunity (or level of support within the wider healthcare system) to truly integrate within the local health & care system to deliver population health benefit in a sustainable way.

At the time of writing this PNA, from July 2022, transformational NHS landscape change is planned that will decommission CCGs and replace with Integrated Care Systems (ICS) and an Integrated Care Board (ICB). The Black Country ICS and ICB have seen four CCGs in the Black Country (Dudley, Wolverhampton, Walsall and Sandwell & West Birmingham) merge to form one larger system where commissioning of health services for the population is much greater at approximately 1.4 million. This ensures greater harmonisation & access to services (with reduced unwarranted variation) for the Black Country, whilst ensuring greater cost efficiencies for the NHS at scale. More information about these changes can be accessed here [The Healthcare Landscape : PSNC Main site](#).

From hereon, this document will refer to the Black Country ICS as the commissioner, however, where CCG terminology is used (e.g. within maps already produced), this can be considered as an interchangeable term to represent the same organisation.

Black Country ICS currently commissions a specialist palliative care drugs supply service, Minor Ailments – Pharmacy First Service and a COVID-19 Urgent Eye Care Service (formerly the Minor Eye Conditions Service) to community pharmacies within Dudley.

## **Other Services**

Community pharmacy contractors also provide services directly to patients that are not commissioned by NHS E&I, Black Country ICS or Dudley MBC, for example some pharmacies provide a prescription ordering and/or collection service, home delivery service, influenza vaccinations, and travel medicines via Patient Group Directions (PGDs) and/or medication packed down into monitored dosage systems (MDS). These services are not commissioned or paid for by any commissioning organisation, however it is recognised that the prescription ordering and/or collection and delivery services and the MDS are valued by patients and the wider healthcare system. These two non-commissioned services have improved access, medicines safety and support positive health outcomes (to pharmaceutical services) for hard to reach and/or vulnerable groups within the borough e.g. housebound, those with dementia etc.

In making its assessment, Dudley HWB needs to take account of any services provided to its population which may affect the need for pharmaceutical services in its area. This could include services provided to the Dudley population by pharmacy contractors outside Dudley. For example, pharmacies in neighbouring HWB areas or those providing 'Homecare' services.

## **The Priory Pharmacy (Local Pharmaceutical Service)**

The idea of developing a community based pharmacy on the Priory estate (DY1) was born out of the local residents frustration of having to make a difficult journey to access both GP and pharmacy services. Relocation of a GP branch practice in 2000 and closure of the local pharmacy in 2001 created accessibility issues as Priory residents could no longer make a short journey to access health services.

A Local Pharmaceutical Service (LPS) contract was attractive to stakeholders as it allows a service specification to be tailored to the needs of the local population. In the case of the Priory estate, this includes significant health needs in an area with poor access to services. Furthermore, the area was not attracting pharmacy contract applications via the traditional, more commercial route where pharmacists apply for a contract. The LPS route meant the historical PCT could design a service specification and then go out to tender for the service. Key elements of the service specification included community involvement to steer the development of the service and delivery on a not for profit, basis.

The pharmacy opened in the autumn of 2008 (Pharmacy ID 54, figure 1 and appendix 1) and now provides a range of services in addition to dispensing (full details of service provision can be viewed in appendix 5a and 5b). The pharmacy is providing a portfolio of public health services including smoking cessation, emergency contraception provision, brief alcohol interventions, chlamydia screening etc. Furthermore, the pharmacy also hosts a number of other health services including health trainers, mental health services and psychological therapies. The provider continues to operate as a social enterprise and the pharmacy remains valued amongst the local community.

Unlike other commercial pharmaceutical contracts, a LPS contract is time limited and may be reviewed by NHS England in the future based on assessment of continuing local need.

## **Process followed in developing the PNA**

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This PNA was undertaken in accordance with the requirements set out in regulations 3-9 Schedule 1 of the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013.

A Community Pharmacy Development and PNA steering group was established, with membership drawn from Dudley Integrated Health and Care NHS Trust (the Pharmaceutical Public Health Team), Dudley MBC (Healthcare Public Health team and Consultant in Public Health Medicine, Integrated Commissioning Hub Intelligence Team), Dudley Local Pharmaceutical Committee, Primary Care Commissioning Manager (Black Country ICS – Dudley Place), Primary Care Contracts – Community Pharmacy (NHS England & Improvement Midlands Regional Team), Participatory Research Officer, Healthwatch Dudley and Dudley Local Medical Committee. PNA Steering Group Terms of Reference were agreed and a project action plan was devised and updated regularly. Minutes from regular PNA steering group meetings were taken but have not been made public during the PNA development due to the sensitive nature of the content (purpose of “Market Entry Test”) ahead of full publication.

The current commissioning of pharmaceutical services and plans as an organisation for the future as expressed in our JHWS have been reviewed and assessed. Data have been referenced to and with our JSNA and the JHWS.

## **Consultation and engagement**

Current pharmaceutical provision in Dudley was reviewed and the needs of our population assessed from the perspective of pharmaceutical services. A survey of Community Pharmacies’ current information technology (IT), premises and service provision (NHS and private) was conducted via the Pharmoutcomes online platform in April 2022 as part of baseline assessment (see appendix 4A and 4B for more information). All 63 service user facing pharmacies completed this survey.

Patients and members of the public were asked for their views on pharmacy services through a structured consultation ahead of the statutory 60-day formal consultation delivered by the council communications team. An innovative systematic search and compilation of online reviews of Dudley pharmacies was also undertaken to gain further understanding of the experiences of service users who left online reviews.

The statutory 60-day formal consultation period for the draft PNA occurred between Friday 1<sup>st</sup> July 2022 and 29<sup>th</sup> August 2022. Further details of the statutory 60-day consultation and the questionnaire to assist feedback for this PNA can be found at appendices 9 and 10. Comments received have been recorded in Appendix 11 and where appropriate have informed changes within the final report post consultation.

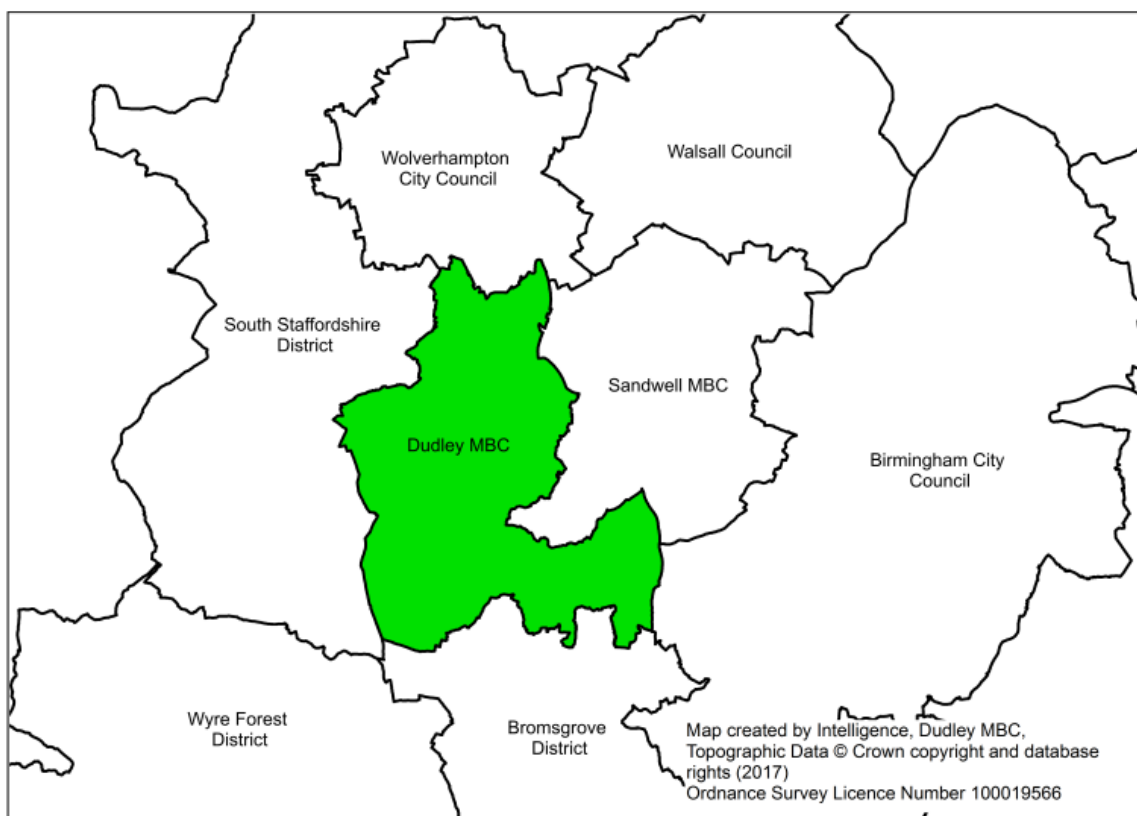
# Dudley Borough

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The Metropolitan Borough of Dudley is located on the edge of the West Midlands conurbation, approximately 9 miles west of the city of Birmingham and 6 miles south of Wolverhampton. Rural Staffordshire and Worcestershire (Bromsgrove) border Dudley to the west and south (Figure 2).

Being at the heart of the Black Country, which also includes parts of the neighbouring boroughs of Sandwell, Walsall and Wolverhampton, Dudley has a rich cultural and economic heritage. The borough is a predominantly urban area made up of four main towns; Dudley, Stourbridge, Halesowen and Brierley Hill. Each is interspersed with smaller towns and urban villages creating a very local feel to Dudley's communities. The legacy of heavy industry is still relevant to the health status of much of the population in Dudley.

**Figure 2:** Map of the Dudley Metropolitan borough council and neighbouring district boroughs



## Environment

Dudley borough covers 38 square miles, although predominantly an urban area; 20-30% is green space with 17% designated green belt. The borough has an extensive road infrastructure and access to the motorway near Dudley and Halesowen.

## **Economy**

In 2021, Dudley had an unemployment rate of 4.1%, compared to the national rate for England of 4.5%.

The trend in Dudley is of an overall decrease in the unemployment rate from 9.3% in 2013, mirroring the national trend, where there has been a decrease in unemployment year on year from 2013, until 2020, where an increase from 4.7% to 6.4% was seen in Dudley.

This increase was most likely to be partially related to the COVID-19 pandemic, but is larger than the increase for England in the same time period (3.9% to 4.7%).

## **Geography**

In this pharmaceutical needs assessment the main geographic areas used on illustrative maps and for analysis of information are Primary Care Networks (PCNs) (Figure 1).

To meet health needs, GP practices work together with community, mental health, social care, pharmacy, hospital and voluntary services in their local areas in groups of practices to form PCNs.

Dudley is subdivided into six PCN areas (see Figure 1):

- Brierley Hill;
- Dudley and Netherton;
- Halesowen;
- Kingswinford and Wordsley;
- Sedgley, Coseley and Gornal;
- Stourbridge, Wollescote and Lye

Output Areas are a set of hierarchical geographic boundaries designed and maintained by the Office for National Statistics (ONS) in England and are specifically designed for the publication of statistics for small areas, such as census results. The layer of Output Areas used in this document are Lower Layer Super Output Areas (LSOA) which have approximately 1,500 residents. As of the 2011 Census there were 201 LSOA in Dudley (Figure 33). Output Area boundaries are only subject to change after a national Census, so are a relatively stable geography for presenting data over time.

The borough of Dudley is divided into 24 Electoral Wards, the spatial units used to elect local government councillors (Figure 34). Electoral Ward boundaries are managed by The Local Government Boundary Commission for England and are subject to change over time. These Wards are also used for the publication of various statistics.



The pharmaceutical needs assessment will utilise these geographies to assess the needs of Dudley's population and whether these are met by pharmacies and the services they provide.

## **Deprivation**

The Indices of Deprivation are a measure of deprivation at a small area level across England. The most recent indices are from 2019 and are calculated using the Lower Layer Super Output Area (LSOA) geography.

The indices provides a set of measures based on seven different aspects of deprivation known as "domains", encompassing data on income, employment, education, health, crime, housing and the environment. The domains combine to form the Index of Multiple Deprivation (IMD), which is the official measure of relative deprivation for small areas across England.

Splitting the LSOAs in to ten equal groups or 'Deciles' helps to illustrate the relative level of deprivation between areas, from decile 1 (the 10% most deprived LSOAs in England) to decile 10 (10% least deprived in England).

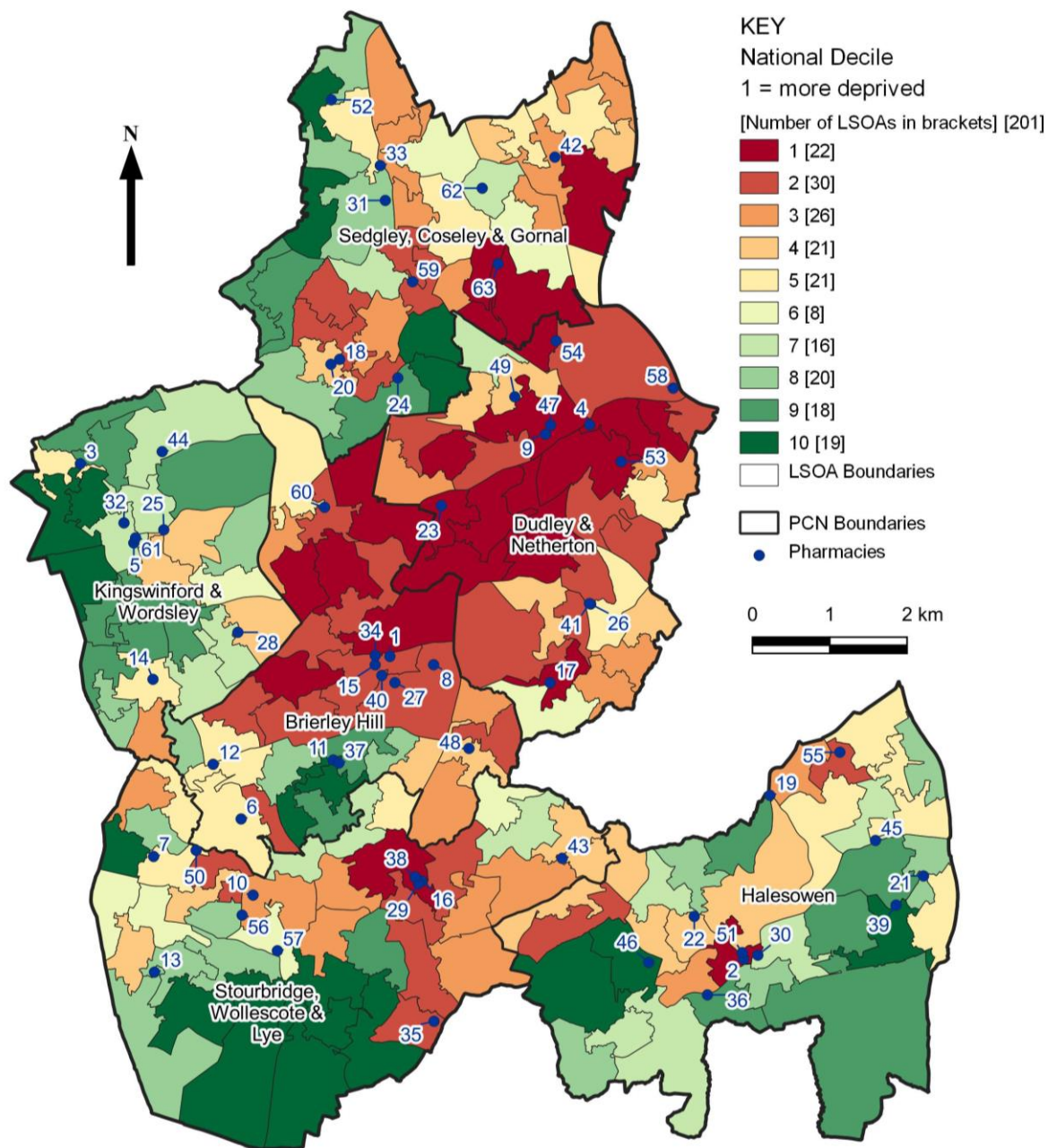
In Dudley the most deprived areas are in the Dudley & Netherton and Brierley Hill PCNs, with other clusters in areas of Sedgley, Coseley & Gornal, Stourbridge, Wollescote & Lye and parts of Halesowen (Figure 3).

Black Country ICS (Dudley Place) and Dudley MBC are coterminous geographically and will work together to produce a JSNA and JHWS that identifies local needs and develops a sustainable community strategy to address these needs. The JSNA brings together all the information on the health and wellbeing needs of Dudley's population. The data includes information on the main issues that affect people's life-chances, quality of life and health and wellbeing. The data that underpins the JSNA is updated regularly and can be found at [www.allaboutdudley.info](http://www.allaboutdudley.info). As this is all available electronically, only the top level points have been taken and included in this PNA.

## **Population**

Dudley has an estimated resident population of approximately 322,400 (2020). The population has been steadily growing at a modest but sustained rate in recent years. Between 2021 and 2042 the Dudley population is expected to increase by just under 30,000. Most of this increase is accounted for by the rise in the 65 and over age group.

**Figure 3: Index of Multiple Deprivation 2019 National Deciles by LSOA with Pharmacy Locations**



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / Indices of Deprivation 2019, MHCLG  
Produced by: Intelligence Team, Dudley MBC  
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For a table containing the key to the pharmacies on the map, see appendix 1.

## **Age**

The age profile maps (see Figure 4) show the differences in the age profiles of areas within Dudley, older age groups tend to be concentrated around the south and western parts of the borough and younger age groups concentrated in the central part of the district. The population of Dudley aged 65 and over is increasing as a proportion of the total. The proportion over 65 is also higher in Dudley than it is in England as a whole.

## **Life Expectancy**

The life-expectancy at birth in Dudley for males is 78.8 years and for females is 82.2. Both these values are similar to but less than the figures for England at 79.4 and 83.1 respectively.

For the male population in Dudley the ward with the highest life expectancy is Halesowen South, in contrast the lowest is Quarry Bank and Dudley Wood. For the female population Norton has the highest life expectancy. The lowest life expectancy for females is found in Castle and Priory ward.

Life expectancy for men in the most deprived areas of Dudley is 9.2 years lower than in the least deprived areas. This pattern is also seen for women where life expectancy in the most deprived areas is 8.6 years lower.

In the 2011 census, 78.2% of the Dudley population described their health as being either “good” or “very good”.

## **Ethnicity**

According to the 2011 Census, 88.5% of the borough’s population are White British, Asian groups constitute 6.1% of the population, 1.8% are people from a mixed ethnic background, 1.5% Black Ethnic Groups and a further 1.5% are from White groups other than British. The areas with the highest ethnic minority population are in the Dudley and Netherton PCN area and in the Lye area of the Stourbridge, Wollescote and Lye PCN. There are also lesser concentrations in parts of Brierley Hill and Halesowen PCN areas (see Figure 5). The pharmacy contractor survey indicated that many of our staff and pharmacists located within these areas speak a range of languages to overcome communication barriers to meet local needs (appendix 4A).

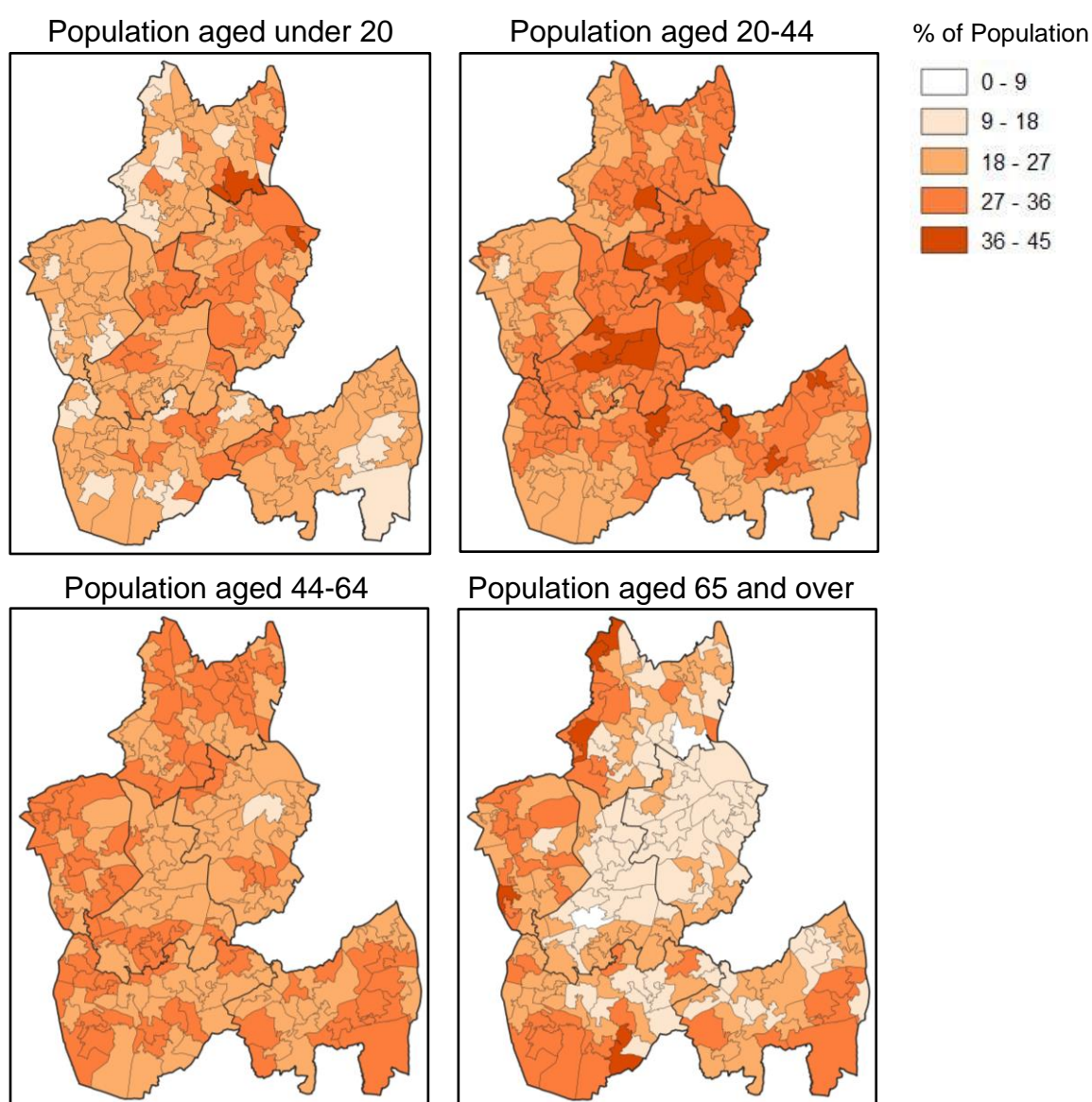
## **Lifestyles**

In 2015-18, it was estimated that 12.8% of the Dudley population aged 16+ were binge drinkers, which is lower than the England value of 15.4%.

It is estimated that 66.8% of adults aged 18+ were classified as overweight or obese in Dudley in 2020/21, compared to 63.5% for England. 26.9% of children in school year 6 (aged 10-11 years) are obese (2019/20), compared to 21% for England. Unhealthy weight is an increasing problem in Dudley and nationally, increasing the risk of a range of illnesses including type 2 diabetes and cardiovascular disease.

It is estimated that more than one in four people registered with a Dudley GP have high blood pressure that is undetected. There is probably an under diagnosis of a range of major diseases in Dudley such as Coronary Heart Disease, Stroke, Diabetes, Chronic Obstructive Pulmonary Disease (COPD), Mental Illness and Asthma.

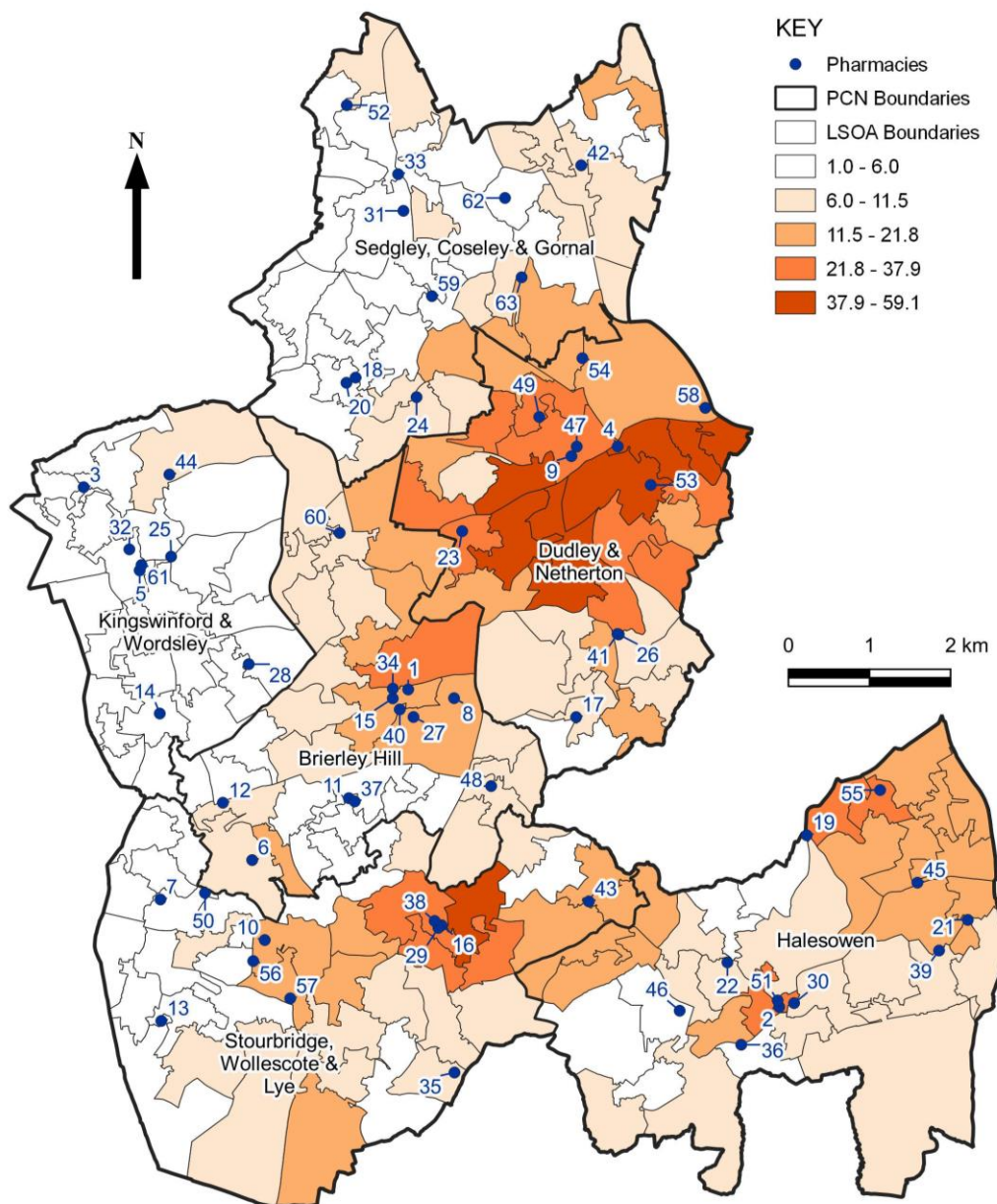
**Figure 4:** Dudley age profile, percentage of population in each age group by LSOA, Mid-Year Population Estimates 2020



Source: 2020 Mid-Year Population Estimates, ONS  
 Produced by: Intelligence Team, Dudley MBC  
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**Figure 5: Percentage of Population from Black and Minority Ethnic (BME) Groups**



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / 2011 Census  
 Produced by: Intelligence Team, Dudley MBC  
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For a table containing the key to the pharmacies on the map, see appendix 1.

## **Access to Community Pharmacies and Pharmaceutical Services**

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The maps in the PNA (Figures 1 and 4) illustrate that the geographical location of Dudley community pharmacies is well spread across the populated areas, covering deprived areas and those with higher numbers of BME groups.

Patients are not registered with individual pharmacies and have the choice where to have their prescriptions dispensed and where to access essential, advanced, enhanced and local pharmacy services. This makes matching targeted services to older people, specific disease states, deprivation or ethnicity difficult. The Black Country ICS, DIHC, NHS E&I and Dudley Public Health and Wellbeing, Dudley MBC, will work to involve all pharmacies in the borough to provide high quality and cost effective patient centred and patient specific medicines related services.

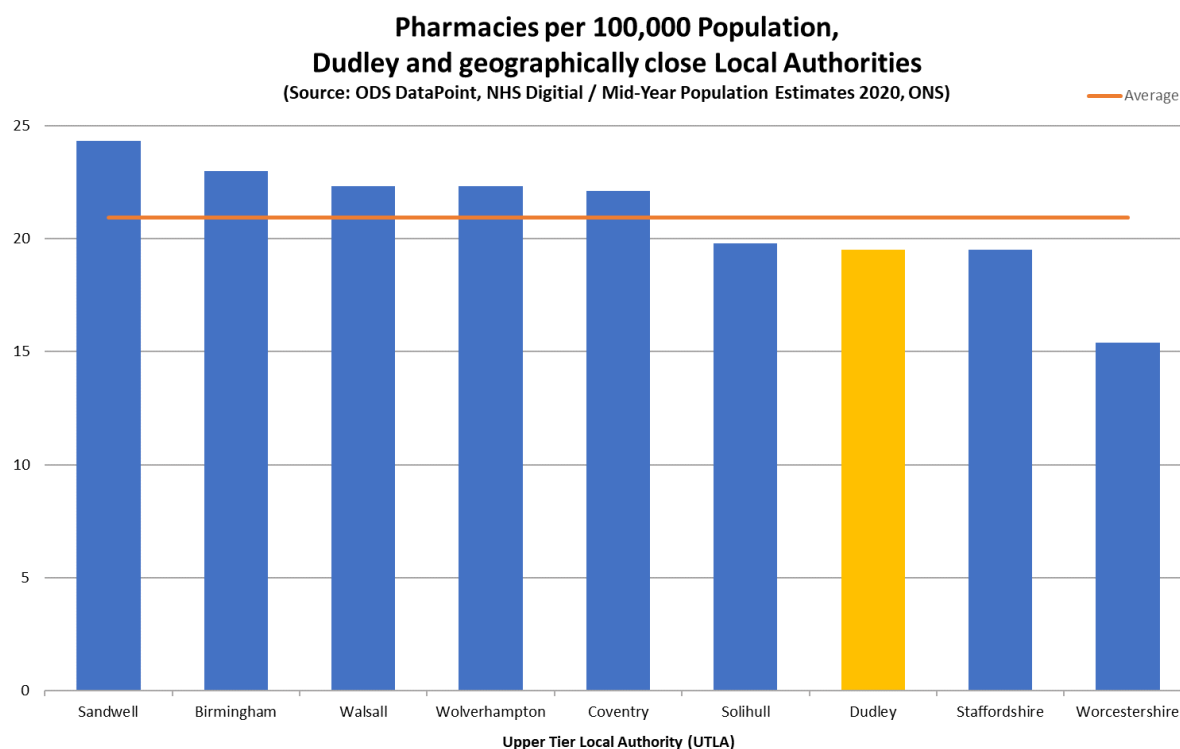
### **Pharmacy numbers, walking times and geographical and physical location**

The most recent estimate of the population of Dudley is 322,400 (2020). With 63 pharmacies within the borough (excluding the two “distance selling” pharmacies since patients cannot visit these to access essential services) this equates to one pharmacy to 5,117 people or approximately 19.5 pharmacies per 100,000 population. This is slightly below (although not statistically significant) the rate of pharmacies per 100,000 population in neighbouring and geographically close Local Authorities (Figure 6).

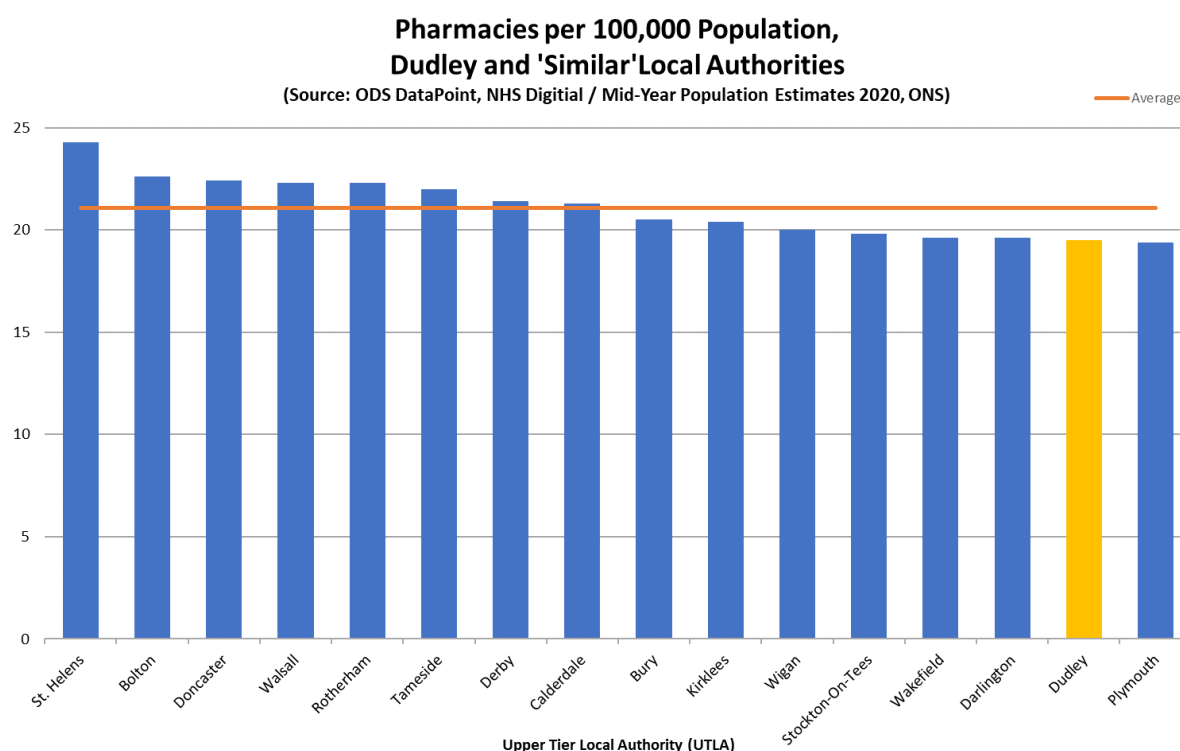
Dudley is one of eight areas with around 20 pharmacies per 100,000 population when compared with other ‘similar’ Local Authorities (Figure 7). The ‘Similar’ Local Authority areas have been compiled by CIPFA in their Nearest Neighbours model, which clusters Local Authorities together that have similar characteristics based on a range of demographic, deprivation and soci-economic indicators.

None of the ‘Similar’ or neighbouring Local Authorities has a rate of pharmacy provision that is significantly different from Dudley. We can therefore conclude that the ratio of pharmacies to patients is good and similar to the average provision per head of population when compared to other areas.

**Figure 6:** Number of pharmacies per 100,000 population, Dudley and other geographically close Local Authority areas



**Figure 7:** Number of Pharmacies per 100,000 population, Dudley and 'Similar' Local Authority areas



## Walk Time Zones

Walking time zones (taking account of the road and path network) have been mapped around the location of pharmacies within Dudley and neighbouring Local Authorities (Figure 8). This clearly shows that the very large majority of people live within reasonable walking distance of a pharmacy; approximately 92.5% of the Dudley population live within a slow 30 minute walk (defined as the average speed of a woman with a small child, or 1.6 miles per hour) of a pharmacy according to analysis of the electoral role.

Approximately 7.5% of Dudley's population live more than a 30 minute walk away from a pharmacy, the majority of which are in the Wards of Gornal, Hayley Green and Cradley South, and southern parts of Halesowen South, Norton, and Pedmore & Stourbridge East (see Figure 34 for location of wards). Each of these areas are low in deprivation (Figure 3) and have a high proportion of the population over the age of 45 (Figure 4). All of these areas are also without a nearby GP practice, are well served with public transport links and evidence from the community pharmacy contractor survey (appendix 4A) demonstrates that existing pharmacies (located near to these areas and figure 8) offer prescription collection and delivery services to ensure adequate pharmaceutical services access for essential services. Additionally, having reviewed the 2011 census data, between 77% and 84% of the population in these Wards have 1 or more cars per household. Having reviewed road travelling times (for our population) to pharmacies, all households within Dudley can access a pharmacy (both within Dudley and adjacent health and wellbeing board areas) within 10 minutes by car. Hence, any consideration for a new pharmaceutical contract within these areas would be disproportionate to identified need.

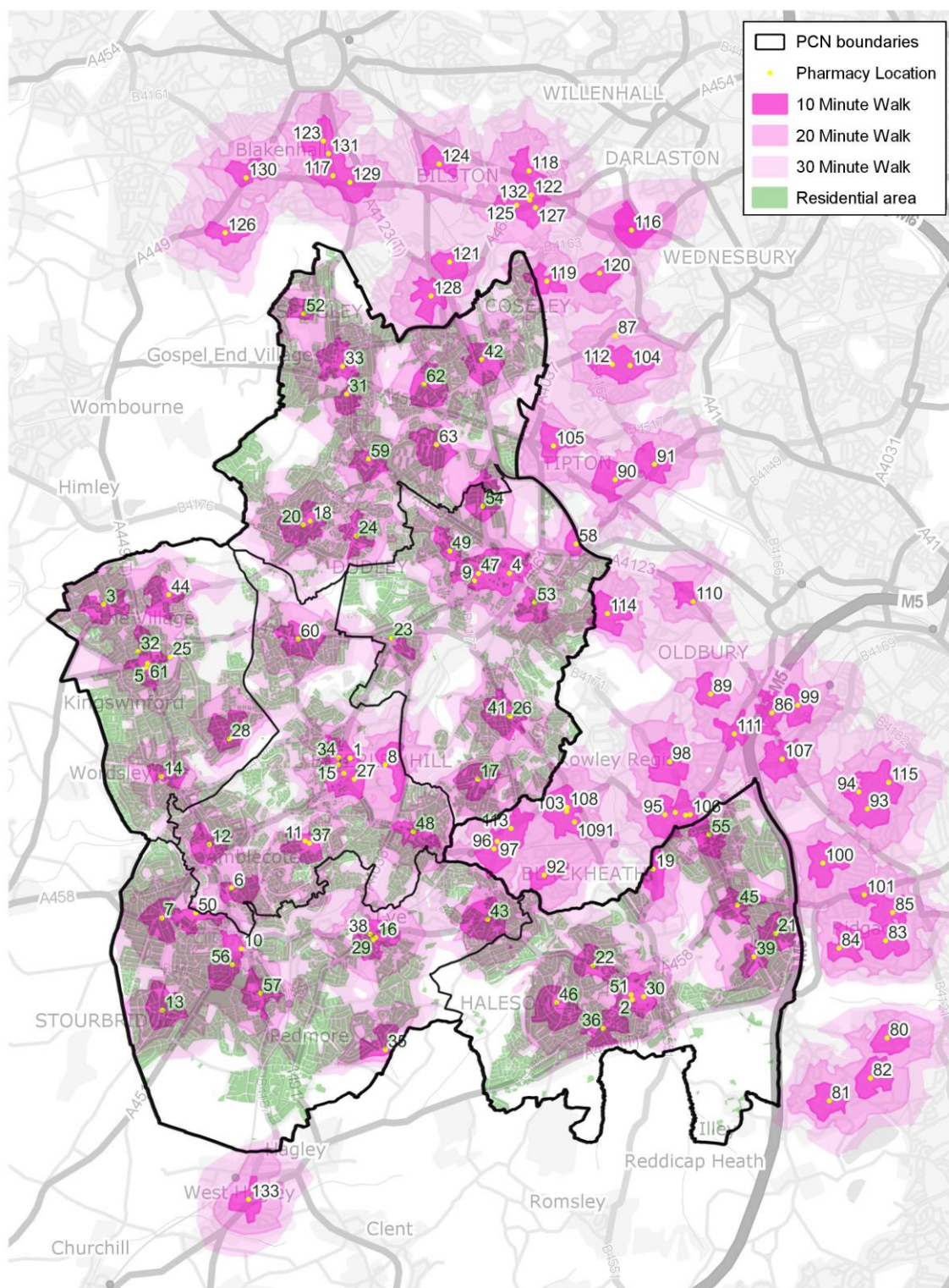
Detailed analysis has found that parts of the area known as the Russells Hall Estate lie outside a slow 30 minute walk time of a pharmacy, though nowhere is more than one mile by foot from a pharmacy. The area has a higher level of deprivation than the other areas in Dudley that are further than 30 minutes' walk from a pharmacy, and has lower car ownership than the borough average. However, the lack of a GP practice on the estate (there are several around the periphery) may reduce the viability of a separate pharmacy.

The majority of Dudley GP practices and all acute outpatient centres have a pharmacy within a short distance (Figure 9).

We do acknowledge that greater distances may need to be travelled to access pharmacies late in the evening and at weekends (unsociable hours).



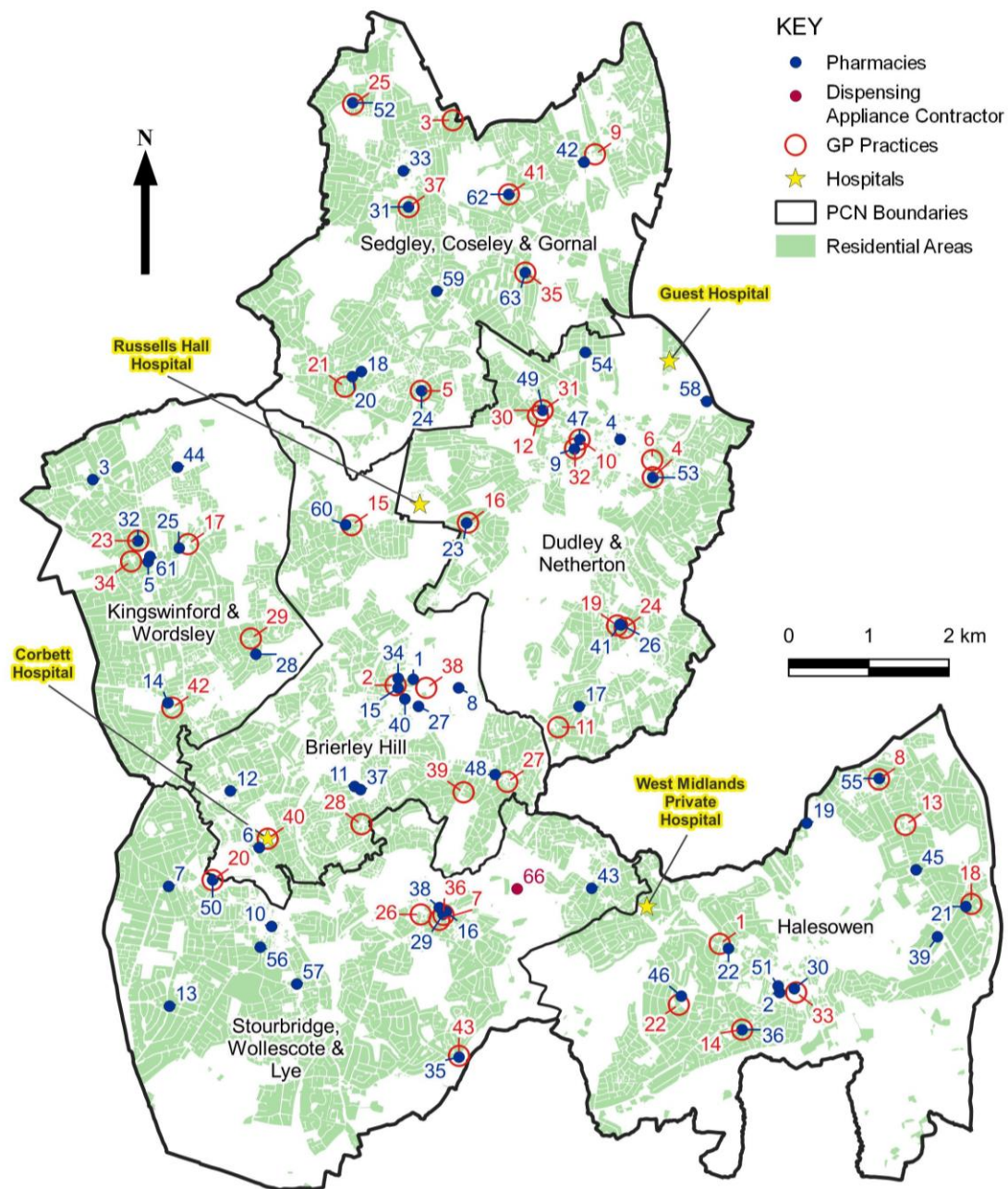
**Figure 8:** Walk times to Pharmacies within Dudley and neighbouring areas



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Calculated using a low walking speed of 1.6 miles/hour, which is the average speed for 'a woman with a small child'. Key to pharmacies located in appendix 1 and 3.

**Figure 9:** Pharmacies in relation to location of GP Practices and Acute Outpatient Centres



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC  
 Produced by: Intelligence Team, Dudley MBC  
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Key to pharmacy locations is in appendix 1 and to GP Practices in appendix 2

Dudley Local Authority area has borders with Wolverhampton, Sandwell, Birmingham, Worcestershire (Bromsgrove District) and Staffordshire (South Staffordshire District (Figure 10). Dudley is also close to the border of Walsall. Pharmacies operating from these areas and within 2km of the border of Dudley contribute to the pharmaceutical services provision to Dudley residents (Figure 10).

This demonstrates that there is a good geographical spread of pharmaceutical services within populated areas outside of Dudley to which Dudley residents can access.

## **Access for people with disabilities**

From 63 (out of 63 customer facing pharmacies) responses received from Dudley pharmacies via the online pharmacy contractor questionnaire (appendix 4B):

- 54 (86%) have wheelchair access for entrance onto their premises
- 31 (49%) have an automated front entrance door to assist entry
- 48 (76%) provide disabled parking within 10 meters of their premises
- 53 (84%) have wheelchair access to their consultation room
- 33 (52%) provide a hearing loop facility

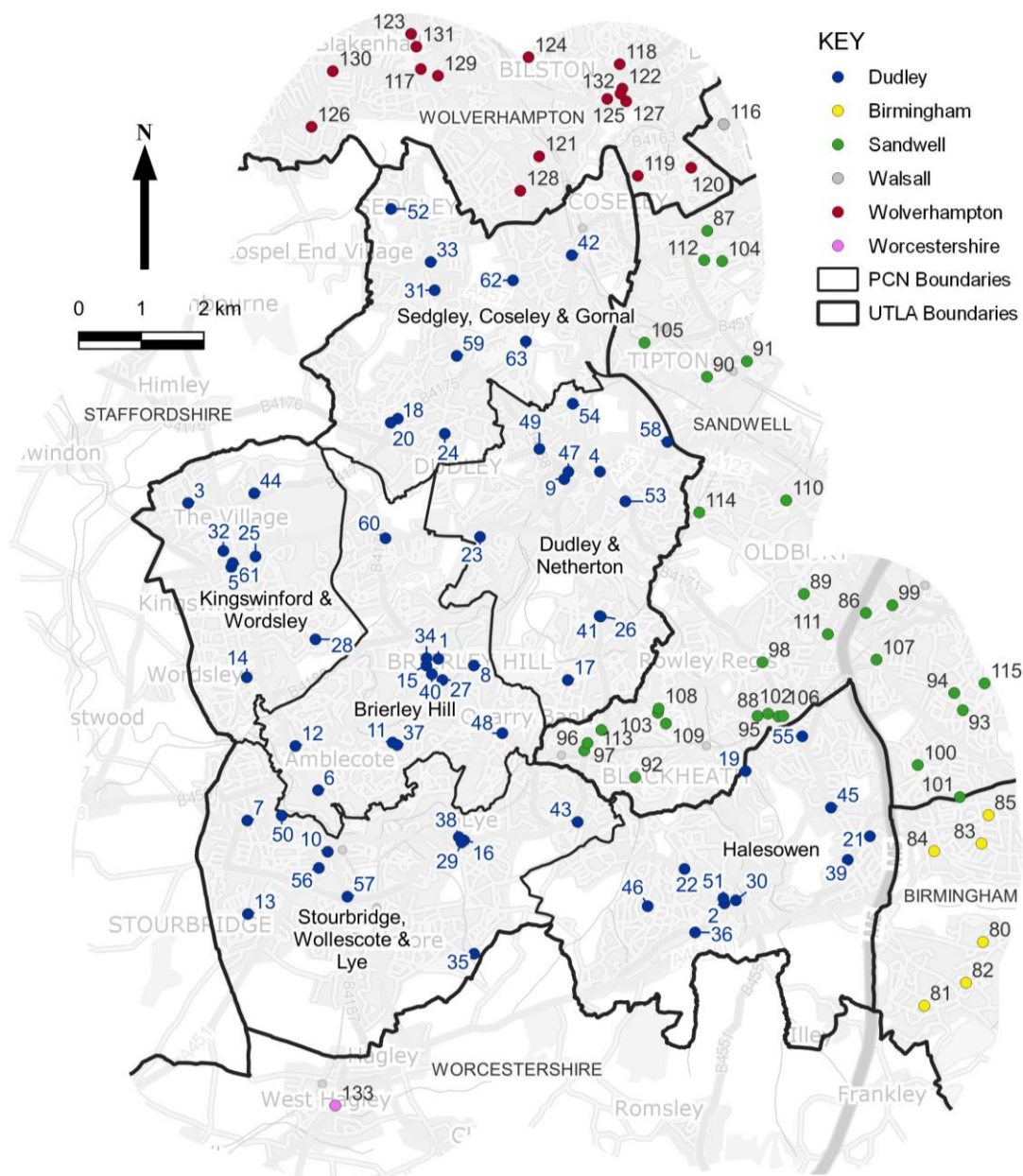
From our evaluation of responses from Dudley pharmacies, access to pharmacy premises for people with disabilities will be restricted in some locations. We conclude that all community pharmacies must enable access for people with disabilities in line with the relevant legislation (Equality Act 2010).

## **Assessment 1: Geographical and physical location of pharmacies**

From our evaluation of the geographical location and number of pharmacies per head of population, we conclude that there are broadly sufficient pharmacies in Dudley and the surrounding area to provide essential pharmaceutical services to its residents. Pharmacies are situated both within and very close to GP practices (figure 9) and all acute out-patient centres. Pharmacies are also located in each of the major shopping centres and locality High Streets in Dudley. However, we conclude that there is a gap in geographical provision of pharmaceutical services within the Russells Hall Estate in Dudley. We conclude any new consideration of a contract to fulfil this gap must ensure the pharmacy is open until midnight due to the close proximity of the Emergency Treatment Centre and out of hours service.



**Figure 10:** Location of Pharmacies within Dudley and a 2km boundary by Upper Tier Local Authority (UTLA)



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC  
 Produced by: Intelligence Team, Dudley MBC  
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Key to Dudley pharmacy locations in appendix 1, see appendix 3 for a key to the neighbouring pharmacies.

## Opening hours

The requirements for pharmacy 'core' contracted opening hours are 40 hours per week. These 'core' hours must be notified to NHS England along with any 'supplementary' hours that a contractor wishes to include over and above their core hours. Together they make up the total hours during which the pharmacy will provide pharmaceutical services. It is these notified core and supplementary hours, plus the distribution of the 100hour pharmacies over a week, that have been used in this assessment. The full details of opening hours of Dudley pharmacies on weekdays, Saturdays and Sundays are shown in appendix 6.

Coverage of pharmacies open during the weekday daytime is good.

In Brierley Hill PCN three pharmacies are open until at least 22:30 Monday to Friday, two being open until 23:00 (ID numbers 1 and 37). Halesowen (ID number 2) and Stourbridge, Wollescote & Lye (ID number 38) PCNs both have a pharmacy open until 23:00 on weekdays. Dudley & Netherton PCN have a pharmacy open until 21:00 (ID number 58) and Kingswinford & Wordsley until 20:00 (ID number 44). For the Sedgley, Coseley & Gornal area there is no pharmacy open after 19:00 on weekdays. However the Phoenix Pharmacy (100 hour contract; pharmacy ID 129) in Wolverhampton provides extended opening hours until 22:30 on weekdays and falls within 2km of the boundary (see figure 10 and appendix 3 for pharmacy details).

46 pharmacies are open on Saturday spread across the borough, with at least six pharmacies open on a Saturday in each PCN area. A number of pharmacies in or close to GP practices mirror the surgery opening hours, meaning they may be closed at the same time as the surgery.

Seven pharmacies in Dudley are open after 8pm on Saturdays, with three in Brierley Hill PCN and two in Stourbridge, Wollescote & Lye; both PCNs have pharmacies open until 22:30. Halesowen and Dudley & Netherton PCNs both have one pharmacy open late Saturdays, to 22:00 and 21:00 respectively. Morrisons Pharmacy (ID number 44) provides services until 19:00 on Saturdays in the Kingswinford & Wordsley PCN. For the Sedgley, Coseley & Gornal PCN the Phoenix Pharmacy (100 hour contract; pharmacy ID 129, figure 10 and appendix 3) in Wolverhampton provides extended opening hours until 22:30 on a Saturday.

On Sunday ten pharmacies are open, five of these are in Brierley Hill PCN, two in Stourbridge, Wollescote & Lye and one in each of Dudley & Netherton, Halesowen and Kingswinford & Wordsley. The 100 hour pharmacy at the Brierley Hill Health and Social Care Centre (ID number 27, Brierley Hill PCN) is open from 9.30 until 22:30 on Sundays.

There are no pharmacies open in Sedgley, Coseley & Gornal PCN on Sundays. However the Phoenix Pharmacy (100 hour contract) in Wolverhampton (figure 10 and appendix 3, ID number 129) provides extended opening hours, including on a Sunday. Also patients from this area accessing Out of Hours (OOH) medical services have

equal access to the late Sunday opening pharmacy in Brierley Hill. Any consideration of a full pharmaceutical contract to fill this gap would be disproportionate to the need.

The Dudley Emergency Treatment Centre (ETC) is located within Russell's Hall Hospital (Dudley & Netherton PCN) and is open 24 hours all year round. There are additional late opening pharmacies (all 100 hour contract pharmacies) in neighbouring Local Authorities and within 2km of the Dudley border, one in Wolverhampton (ID number 129), four in Sandwell with two in the Oldbury area (ID numbers 86 and 94) and two in Cradley Heath (ID numbers 109 and 113), and one in Birmingham (ID number 85) in Quinton (see figure 10 and appendix 3 for pharmacy details). However, within our current pharmacy providers in Dudley, we conclude an opening until midnight would be considered desirable to further improve access for our population, ideally within close proximity of the ETC.

The commissioned ETC, being the GP out of hours (OOH) service for Dudley residents, is required by national standards requirements to ensure that the urgent pharmaceutical needs of patients can be met. This will normally mean holding medicine stocks in accordance with the national formulary for OOH Service providers.

## **Assessment 2 – Opening Hours**

Using our evaluation of pharmacy opening hours (Core and Supplemental) we conclude that pharmacies are open to provide services at the times needed and used by the population. This assessment is supported by the results from the patient and public questionnaire and comments left in reviews.

Within the current contract regulations, contractors should review the core and supplementary hours of pharmacies located in or nearby to GP surgeries to bring them in line with the opening hours of neighbouring GP surgeries (if not already done), particularly since DIHC provides an extended access hub for additional general practice capacity within its integrated general practice (High Oak Surgery, ID 15, appendix 2).

Whilst the provision of 100 hour pharmacies within the borough and neighbouring health and wellbeing areas (see Figure 11) should mean that there is good access to pharmaceutical services on bank holidays, depending on the allocation of official bank holiday dates, gaps in provision may arise. Commissioning pharmaceutical services as an 'enhanced service' from an existing provider close to the ETC at the Russells Hall site of DGFT (up to 2 kilometres by car or 20 minutes walking distance) on Bank Holidays not covered by the regulations (Christmas Day and Easter Sunday) should be considered by NHS E&I.

This PNA has identified a geographical gap on the Russells Hall Estate as per Assessment 1 and therefore, any consideration of a new pharmaceutical contract to

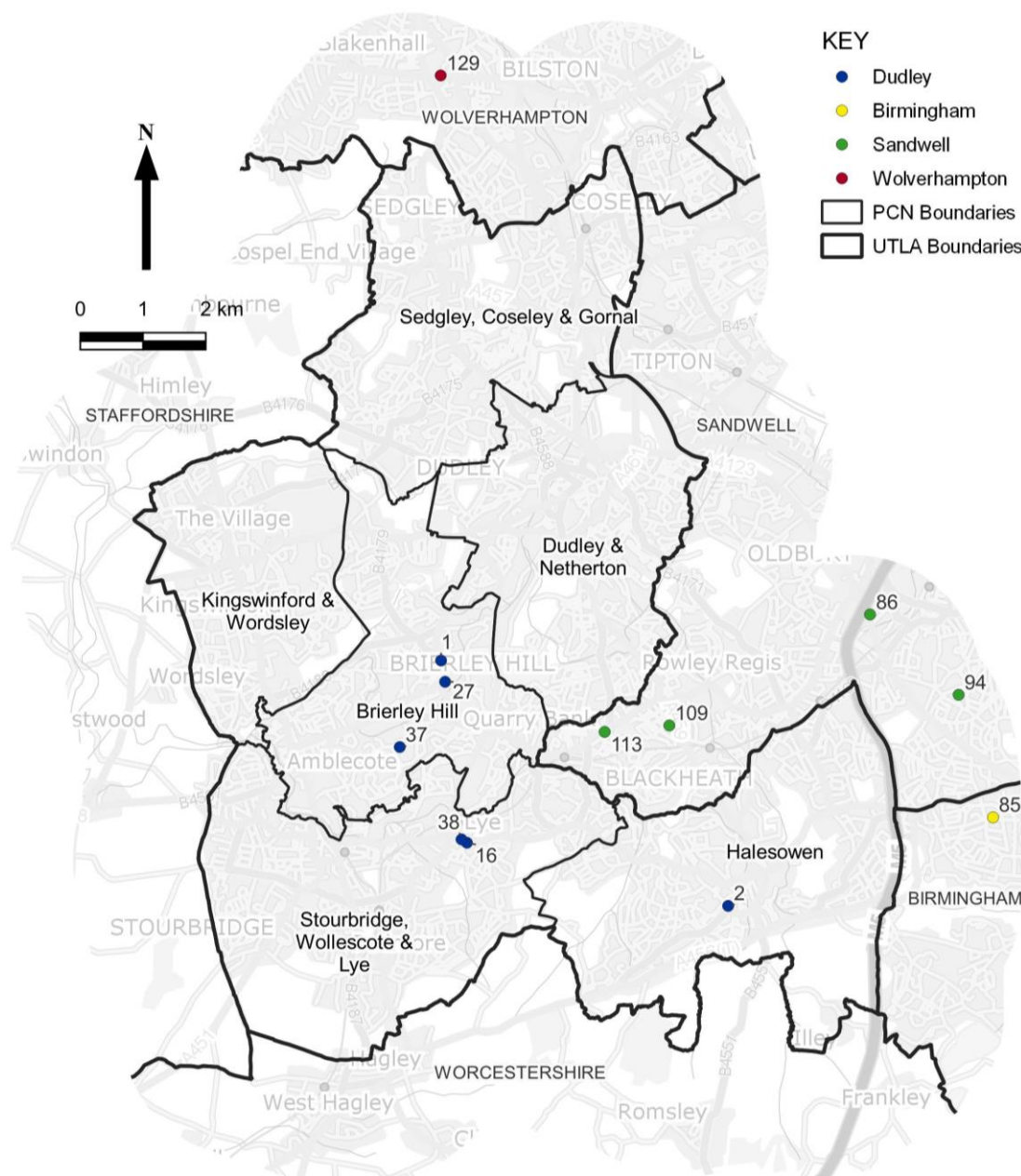
fulfil this gap to support extended access for our population must ensure opening until midnight within core contracted hours.

There are no pharmacies within Dudley open overnight. With the ETC providing 24 hours primary medical care since 1<sup>st</sup> April 2015, this may be considered a gap in pharmaceutical provision. However, the provider of the ETC has responsibility to stock key out of hour's medicines to enable access to medication to fulfil this potential gap in pharmaceutical provision overnight. The full list can be viewed here:

[NHS Electronic Drug Tariff \(nhsbsa.nhs.uk\)](https://nhsbsa.nhs.uk)

At the time of writing this PNA, no known pharmaceutical access issues overnight have been reported by the ETC provider to the commissioner (Black Country ICS). Any consideration of a full pharmaceutical contract to fill this gap overnight would be disproportionate to identified need.

**Figure 11:** Location of Pharmacies within 100 Hour Contracts in Dudley and a 2km boundary by Upper Tier Local Authority (UTLA)



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / PNA Contractor Questionnaire  
 Produced by: Intelligence Team, Dudley MBC  
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Key to Dudley pharmacy locations in appendix 1, see appendix 3 for a key to the neighbouring pharmacies.



# **NHS commissioned Community Pharmacy Services**

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## **Provision of Essential Services**

Sixty three (63) community pharmacies currently provide the following essential pharmaceutical services to the people of Dudley. Contract monitoring by NHS E&I has found no major deficiencies in this service.

- 1) Dispensing – All pharmacies provide a dispensing service.
- 2) Repeat dispensing – All pharmacists and pharmacies are accredited to provide this service, however it is dependent on GP practices participating in the scheme and issuing batch prescriptions.
- 3) Disposal of Unwanted Medicines – NHS England & Improvement Midlands provides suitable arrangements for the collection and disposal of waste medicines from pharmacies.
- 4) Promotion of Healthy Lifestyles – Provision of opportunistic healthy lifestyle advice to patients with long term conditions is difficult to monitor. However, the Public Health and Wellbeing, Dudley MBC continues to work with pharmacies to encourage this aspect of their role. Pharmacies proactive participation in the designated public health campaigns continues to improve. This is an area where much work continues to take place by the Public Health and Wellbeing, Dudley MBC working in partnership with Dudley (LPC) and NHS England.
- 5) Signposting – NHS England & Improvement, Black Country ICS and Dudley MBC provide sign posting information and pharmacies are making use of the information provided.
- 6) Support for self-care – This element is an integral part of community pharmacy services but difficult to measure. The Office of Public Health, Dudley MBC working in partnership with Dudley CCG has plans to develop pharmacy role in this area within the remit of the self-management programme (previously known as the expert patient programme).
- 7) Discharge Medicines Service – given this is a new service, data remains unavailable and can be considered for a supplementary statement at later date.
- 8) Clinical governance

The type and service provision of these pharmacies is outlined in the table in appendix 5a and 5b.

## **Dispensing**

All pharmacies (including those classed as “distance selling”) in Dudley provide a full dispensing service. Patients also make use of community pharmacies in other areas; appliance contractors, distance selling pharmacies and homecare providers as shown in Table 2 below.

**Table 2:** Pharmacies outside of Dudley dispensing annually between 9,000 and 71,000 prescription items written by Dudley GPs (2020-21)

ID*	Pharmacy	Local Authority	Comment
96	Hingleys Chemist	Sandwell	Next to Cradley Rd Surgery, a branch of Wychbury Medical Practice
97	Hingleys Chemist	Sandwell	Close to Cradley Rd Surgery, a branch of Wychbury Medical Practice
102	Lloyds Pharmacy	Sandwell	Close to Dudley GP practice
113	Tesco Instore Pharmacy	Sandwell	100 hour pharmacy
119	Bradley Chemist	Wolverhampton	Close to Dudley border
121	Central Pharmacy	Wolverhampton	Close to Dudley border
128	Murrays Healthcare	Wolverhampton	Close to Dudley border
Outside of 2km boundary	8PM Chemist	Walsall	Distance Selling Pharmacy; Majority of dispensing is for Care Home patients
Outside of 2km boundary	Bills Pharmacy	Staffordshire	Very near Moss Grove Surgery Kinver, a branch of Moss Grove Practice
Outside of 2km boundary	Care Quality Pharmacy	Coventry	Distance Selling Pharmacy
Outside of 2km boundary	Lloyds Direct	Ealing	Distance Selling Pharmacy
Outside of 2km boundary	Lloyds Direct	Ealing	Distance Selling Pharmacy
Outside of 2km boundary	OTC Direct Limited	Wigan	Dispensing Appliance Contractor
Outside of 2km boundary	Pharmacare Pharmacy	Walsall	
Outside of 2km boundary	Pharmacy2U	Leeds	Distance Selling Pharmacy
Outside of 2km boundary	Quantum Pharmacy	Birmingham	Distance Selling Pharmacy; Majority of dispensing is for Care Home patients

\*Key to ID numbers within 2km boundary of Dudley, see Figure 11 and appendix 3.

## **Repeat dispensing/batch prescribing**

All pharmacies can provide this service when presented with the appropriate prescription forms from GP surgeries (paper or electronic).

## **Electronic Prescription Service – Release 2 (EPS R2)**

All pharmacy contractors within Dudley are EPS R2 enabled (appendix 4A) and all GP practices are enabled to use this facility should they choose. EPS R2 and EPS repeat dispensing (eRD) is being increasingly adopted by Dudley general practices to support efficiencies within primary care and a green agenda (avoids paper).

## **Provision of Advanced Services**

Advanced services (as set out in the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013) include the following:

- Community Pharmacist Consultation Service (CPCS)
- New Medicines Service (NMS);
- Appliance Use Reviews (AUR);
- Stoma Appliance Customisation Service (SAC);
- Seasonal Influenza (Flu) Vaccination;
- Hypertension Case Finding Service
- Smoking Cessation Service
- Hepatitis C Testing Service

Where data has been located (from Knowledge Hub, data on file) for advanced service delivery (commissioned by NHS E&I), this has been presented in Table 3 below. For Hepatitis C Testing Service, data for the defined period below in table indicated zero activity by Dudley community pharmacies and hence is not tabulated. Hypertension Case Finding and Smoking Cessation are new services which have only been launched recently so limited activity data was available at the time of writing this PNA.

**Table 3: Advanced services activity by PCN**

Advanced Services	Brierley Hill (12)	Dudley & Netherton (11)	Halesowen (11)	Kingswinford & Wordsley (8)	Sedgley, Coseley & Gornal (10)	Stourbridge, Wollescote & Lye (11)
Community Pharmacist Consultation Service (CPCS)*	12	11	10	7	9	9
New Medicine Service (NMS)*	10	10	11	8	9	9
Flu Vaccination*	10	11	9	7	10	10
Blood Pressure checks & Ambulatory Blood Pressure Monitoring**	7	7	6	2	5	4
Key:						
	Provided by 75% or more pharmacies within PCN					
	Provided by 25-75 % of pharmacies within PCN					
	Provided by less than 25% of pharmacies within PCN					

Source: Derived from NHS Shared Business Services Authority data

( ) = Number of pharmacies within each PCN. These services are commissioned by NHS E&I.

\* Eighteen months of data from 1 April 2020 to 30 September 2021

\*\* Six months of data from 1 October 2021 to 31 March 2022

## Community Pharmacist Consultation Service (CPCS)

The NHS CPCS launched on 29th October 2019 as an Advanced Service.

In line with the ambitions set out in the NHS Long Term Plan, this service is expected to relieve pressure on urgent and emergency care, by referring patients within an agreed pathway to a consultation with a community pharmacist where otherwise they would have attended a GP appointment, GP out of hours appointment or A&E having run out of regular medicines or requiring support with low acuity/minor illness. The service will also help to tackle elements of existing health inequalities by providing urgent access to patients who are not registered with a GP.

NHS E&I have reported the following benefits of this service expansion to general practices:

- GP referrals into CPCS is one of several improvement measures available to improve access and one of the easiest to implement.

- GP CPCS helps to free up practice capacity to see higher acuity patients, as well as from secondary care and NHS [111](#). It will also build the platform for longer-term relationships between the pharmacy and general practice professions.
- GP Practices can refer patients directly in to Community Pharmacists in a way that is convenient, safe and effective utilising digital platforms.
- Approximately 6–8% of all GP & Nurse consultations can be safely transferred to a community pharmacist. This will free up capacity within general practices where access to appointments by patients is becoming increasingly challenging.
- It supports patients to self-manage their health more effectively with the support of community pharmacists.
- Support will be offered at a PCN level to provide consistency within general practices and to facilitate links with the community pharmacies.
- GP Practices that have implemented GP CPCS have seen a reduction in repeat calls for low acuity conditions, secondary care activity and having to turn away patients because appointment ledgers are full.

Since the CPCS was launched, the Pharmaceutical Service Negotiating Committee (PSNC) report an average of 10,500 patients per week are being referred for a consultation with a pharmacist following a call to NHS 111; these are patients who might otherwise have gone to see a GP. Since February 2021, CPCS has now been expanded into general practice and there is a lot of current work ongoing within the Black Country to drive increased activity from general practice within PCNs. PCNs have an incentivised component of their contract to increase uptake into community pharmacies. NHS E&I recently announced that community pharmacies can expect to receive more CPCS referrals from NHS 111 following a review of the NHS Pathways algorithms which support signposting right patient to right place of care.

The changes introduce three new low acuity conditions (scratches and grazes, teething, sinusitis) and incorporate general health information requests.

Further details regards the CPCS service are available [here](#)

[NHS-community-pharmacist-consultation-service-v2.pdf \(england.nhs.uk\)](#).

Community pharmacy requirements for service provision including premises, training and local collaboration are detailed within the national service specification available within above link.

All 63 patient facing pharmacies are accredited to deliver CPCS (information from pharmacy contractor survey and appendix 5a and 5b). 58 of these pharmacies delivered this service for the 18 months to 30 September 2021 (data available on file from the NHS Shared Business Services Authority).

Table 3 and figure 12 shows the level of CPCS activity by pharmacies within the six PCNs. All six PCNs demonstrate access in greater than 75% of its community pharmacy provision. This represents good service access and delivery for the population of Dudley.

Delivery of the service within individual pharmacies (within each PCN) is variable and barriers for some pharmacists (where activity is low) in delivering this service are likely to be time and capacity dependent (in the presence of an increasing volume of dispensing activity and recruitment challenges within the pharmacy workforce).

Pharmacies in other health and wellbeing board areas may provide CPCS for Dudley patients in line with the regulations for this national advanced service.

### **Assessment 3: Community Pharmacist Consultation Service**

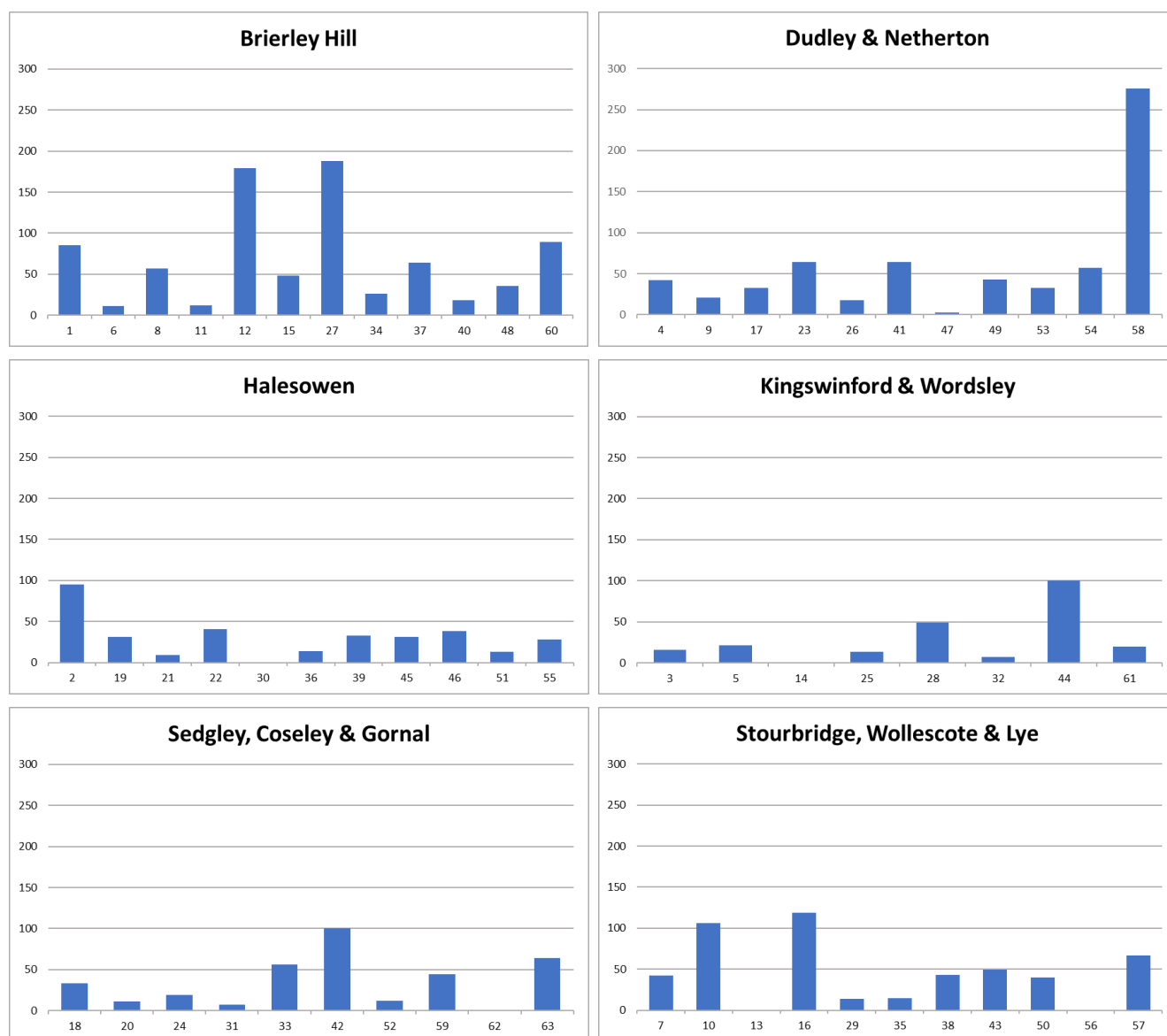
Provision of the CPCS is offered from greater than 75% of all the pharmacies in each PCN (Table 3). We conclude that whilst not every community pharmacy within a PCN has delivered activity, given patients have a choice to use any pharmacy within the PCN, there is good access and we therefore conclude that there are no gaps in provision.

We conclude that Dudley LPC (working in partnership with Black Country ICS, DIHC and the Pharmaceutical Public Health Team) will need to work with existing pharmacy contractors in order to overcome any barriers to provide an equitable service for all patients no matter which community pharmacy they regularly use.

This activity is expected to grow with increasingly more referrals being made to community pharmacies directly from the patients general practice particularly as DIHC, Black Country ICS, PCNs and Dudley LPC are working together to increase awareness amongst GP practice teams. Presently, there remain significant local and system support to drive this service forward.

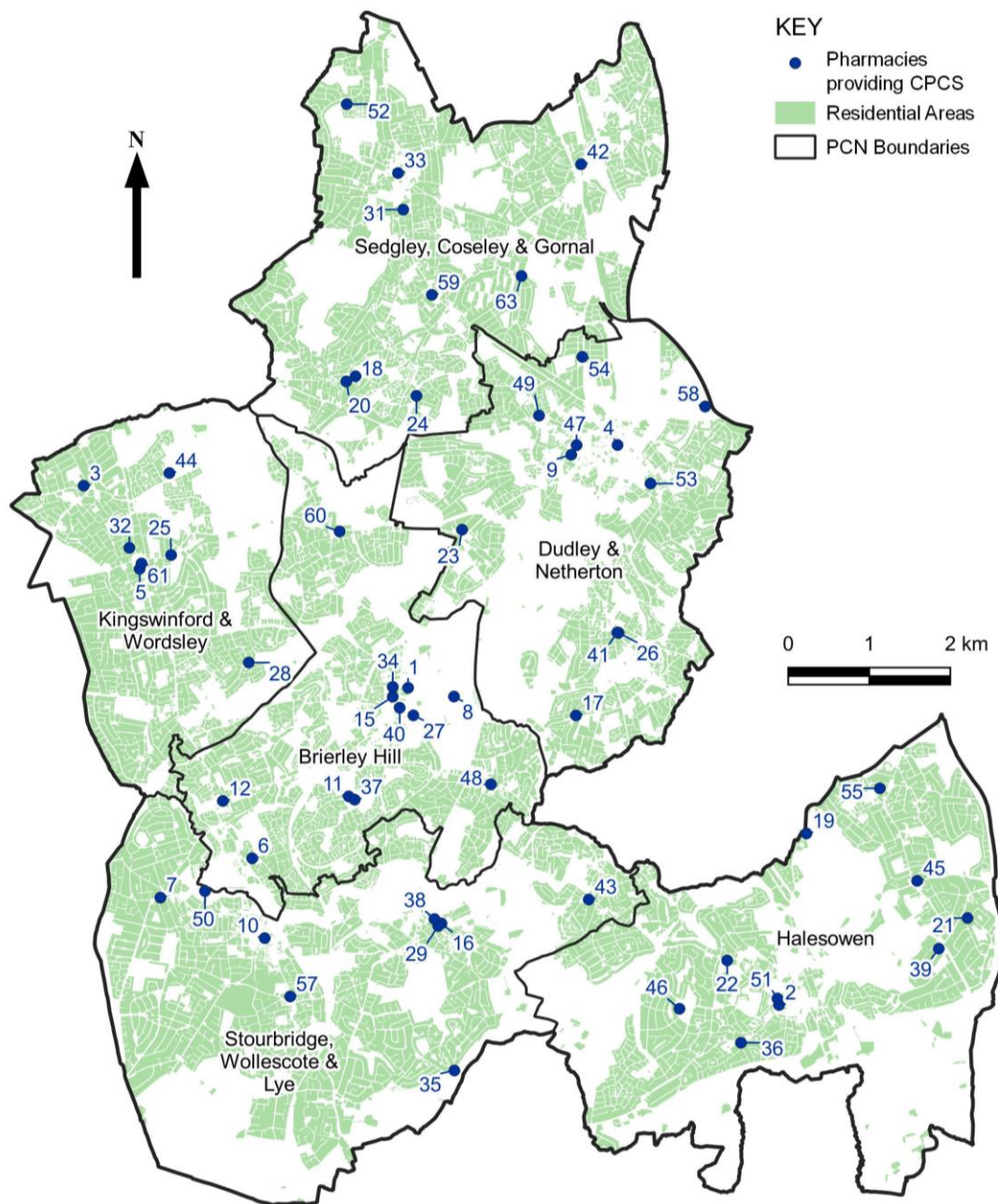
One of the key enablers identified within Dudley general practices to support increased activity is the local digital capability to support a seamless referral to community pharmacy integrated within the GP patient clinical system.

**Figure 12: CPCS in Dudley Pharmacies by PCN (18 months to 30/09/2021)**



See appendix 1 for key to Pharmacies.

**Figure 13:** Location of pharmacies providing Community Pharmacist Consultation Service (CPCS) in Dudley (18 months to 30/09/2021)



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / NHS Shared Business Services Authority data  
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For a table containing the key to the pharmacies on the map, see appendix 1.



## New Medicine Service

The New Medicine Service (NMS) commenced on 1<sup>st</sup> October 2011 and is now well established.

The service provides support for people with long-term conditions (LTCs) newly prescribed a medicine to help improve medicines adherence. It is presently focused on the following patient groups and conditions:

- Asthma and COPD;
- Diabetes (Type 2);
- Hypertension;
- Hypercholesterolaemia;
- Osteoporosis;
- Gout;
- Glaucoma;
- Epilepsy;
- Parkinson's disease;
- Urinary incontinence/retention;
- Heart failure;
- Acute coronary syndromes;
- Atrial fibrillation;
- Long term risks of venous thromboembolism/embolism;
- Stroke / transient ischemic attack; and
- Coronary heart disease

The expectation is that the service will:

- Help patients and carers manage newly prescribed medicines for a LTC and make shared decisions about their LTC.
- Recognise the important and expanding role of pharmacists in optimising the use of medicines.
- Increase patient adherence to treatment and consequently reduce medicines wastage and contribute to the NHS Quality, Innovation, Productivity and Prevention (QIPP) agenda.
- Supplement and reinforce information provided by the GP and practice staff to help patients make informed choices about their care.
- Link the use of newly-prescribed medicines to lifestyle changes or other non-drug interventions to promote well-being and promote health in people with LTCs.
- Promote and support self-management of LTCs, and increase access to advice to improve medicines adherence and knowledge of potential side effects.
- Support integration with LTC services from other healthcare providers and provide appropriate signposting and referral to these services.
- Through increased adherence to treatment, reduce medicines-related hospital admissions and improve quality of life for patients.

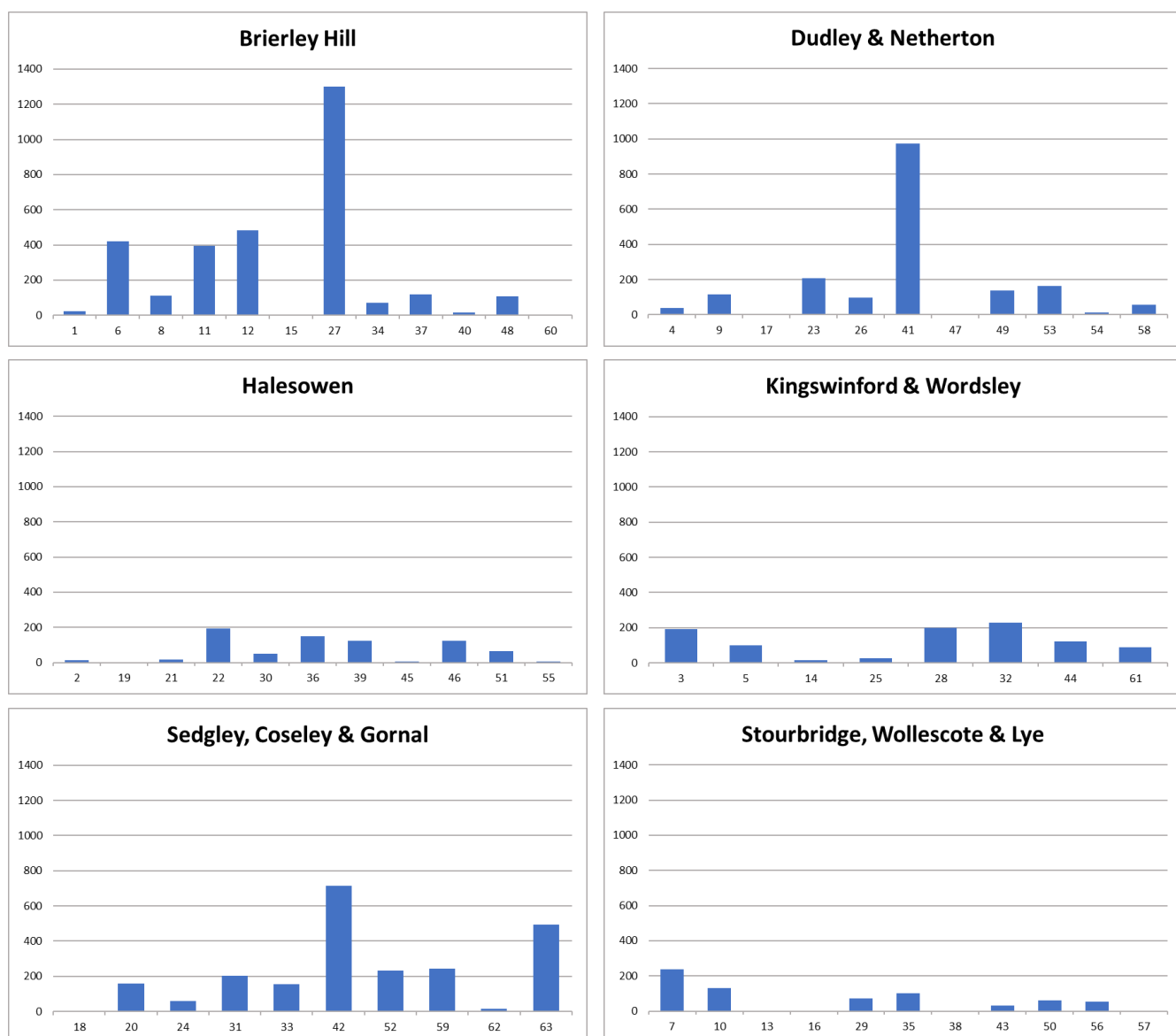
A review of available information demonstrates that 62 of patient facing pharmacies are accredited to deliver NMS (information from pharmacy contractor survey and appendix 5a and 5b). 57 of these pharmacies delivered this service for the 18 months to 30 September 2021 (viewing data available from the Knowledge Hub, data on file).

Table 3 and figure 14 shows the level of NMS activity by pharmacies within the six PCNs. All six PCNs demonstrate access in greater than 75% of its community pharmacy provision. This represents good service access and delivery for the population of Dudley.

Delivery of the service within each PCN is variable and barriers for some pharmacists (where activity is low) in delivering this service are likely to be time and capacity dependent (in the presence of an increasing volume of dispensing activity and recruitment challenges within the pharmacy workforce).

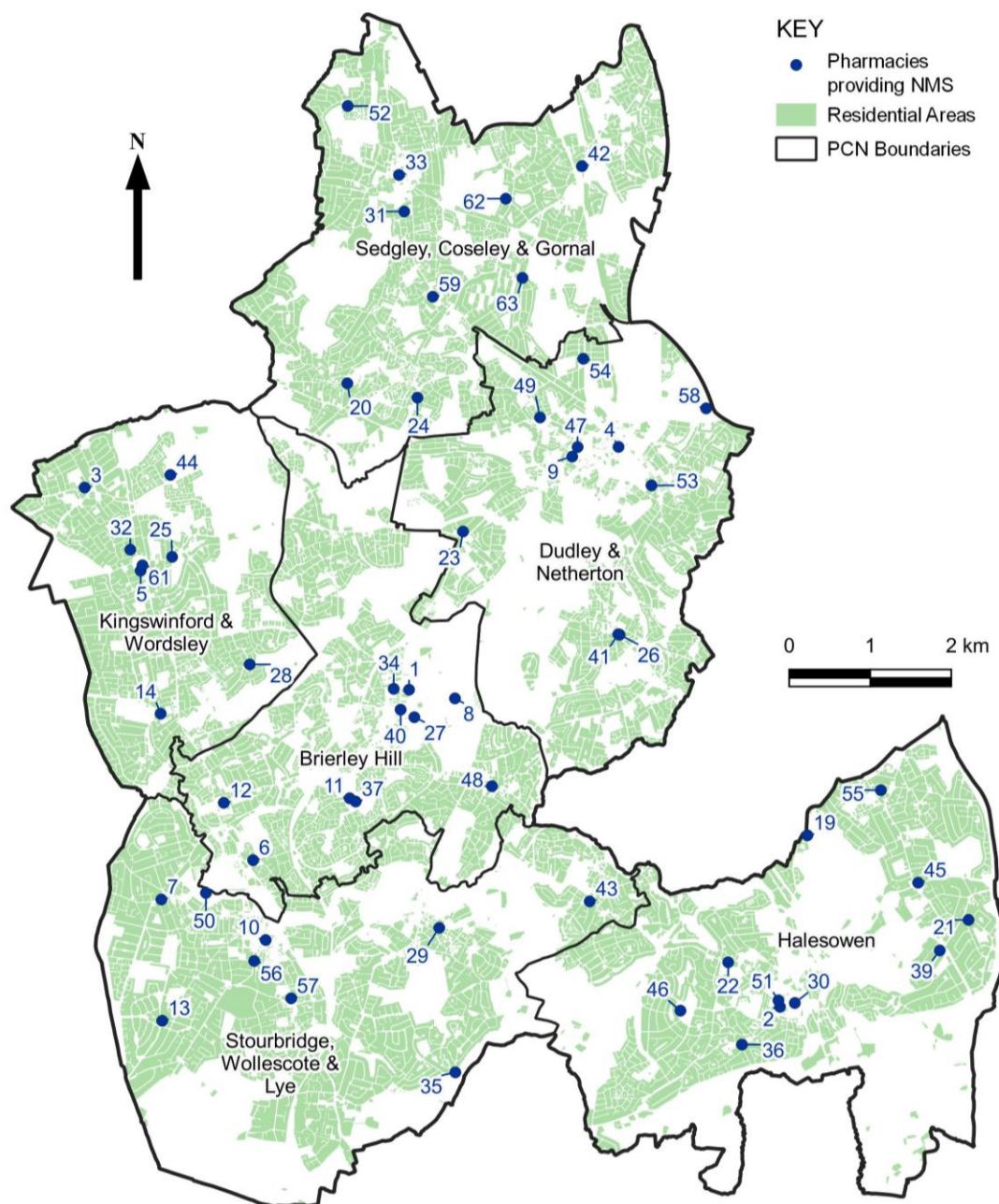
Pharmacies in Sandwell and Wolverhampton also provide NMS for Dudley patients in line with the regulations for this national advanced service.

**Figure 14:** NMS delivered in Dudley Pharmacies by PCN (18 months to 30/09/2021)



See appendix 1 for key to Pharmacies.

**Figure 15:** Location of pharmacies providing a New Medicine Service (NMS) in Dudley (18 months to 30/09/2021)



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / NHS Shared Business Services Authority data  
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For a table containing the key to the pharmacies on the map, see appendix 1.

## **Assessment 4: New Medicine Service**

Provision of the New Medicine Service is offered from equal to or greater than 75% of all the pharmacies in each PCN (Table 3). We conclude that whilst not every community pharmacy within a PCN has delivered activity, given patients have a choice to use any pharmacy within the PCN, we conclude there are no gaps in provision.

We conclude that Dudley LPC (working in partnership with NHS England, DIHC and the Pharmaceutical Public Health Team) will need to work with existing pharmacy contractors in order to overcome any barriers to provide an equitable service for all patients no matter which community pharmacy they regularly use.

The further development of the NMS service must focus on integration with chronic long term conditions management linking the conduct of and outcomes from NMS into local treatment pathways e.g. COPD, Asthma, Hypertension management etc.

## **Appliance Use Reviews and Stoma Appliance Customisation Service**

Appliance Use Review (AUR) was the second Advanced Service to be introduced into the English Community Pharmacy Contractual Framework (CPCF). AURs can be carried out by a pharmacist or a specialist nurse in the pharmacy or at the patient's home. AURs should improve the patient's knowledge and use of any specific appliance by:

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

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

Before a community pharmacy can provide the AUR and SAC service, accreditation requirements to demonstrate competence and knowledge within this clinical area need to be declared to the NHS England Area Team. Further details for these services can be found here <http://psnc.org.uk/services-commissioning/advanced-services/>

Whilst data from the NHS E&I [Knowledge Hub \(khub.net\)](https://khub.net) do demonstrate that some of the Dudley community pharmacies delivered this service (2020-21) , the accuracy of this data is questionable. The data demonstrates that only one multiple group of pharmacies (Lloyds Pharmacies) submitted claims and upon contacting representatives for this provider for the previous PNA, they were unaware that any of their pharmacies were providing this service. At the time of writing this document, an email communication has been sent to the head office of this provider, for which a reply had not as yet been received.

It is important to recognise that other providers locally deliver services to support patients with Stoma and Continence appliances. These include the stoma care nurses within secondary care, the Dudley Continence Service and the community nursing teams. Additionally, we are aware that Dispensing and Appliance Contractors (DAC) outside of Dudley provide this service to our eligible Dudley population.

Since the summer of 2019, DIHC (previously Dudley CCG) Pharmaceutical Public Health Team (PPHT) have been working in collaboration with a DAC (Salts Healthcare Ltd) to target those patients with potential unmet need in the community. This collaborative voluntary agreement (with Salts Healthcare Ltd) occurred following identification of a gap within Dudley for our community based ostomates who may not have received an appliance use review for many years (if at all). Whilst Dudley Group of Hospitals NHS Foundation Trust does have access to colorectal specialist nurses (stoma care nurses) if needed, capacity is often limited and much of their input will be for those patients new to stoma management following acute surgery. This has facilitated a stoma nurse specialist (2 days per week) working with our DIHC GP practice based pharmacist teams to complete targeted intervention to benefit our ostomate population. Improvements with patient stoma management through education, changes in appliance and/or ancillary products as well as practical advice has resulted with these reviews. As well as improving patient care and education of our ostomates, training and education has also been offered to healthcare professionals where knowledge of stoma care management is limited. Anecdotal data on file (within DIHC) demonstrates a positive patient experience as well as cost savings for the NHS in terms of appropriate management and use of stoma care products.

Dudley Health and Wellbeing Board welcomes its first DAC since our last PNA onto the health and wellbeing board list (Bullen Healthcare Ltd, see Appendix 1, Table 16) and this is expected to benefit our population and beyond.

## **Assessment 5: AURs and SAC**

We conclude that we are unaware of any unmet need of provision of AUR or SAC by pharmacy or appliance contractors.

## Seasonal Influenza Vaccination

This service was the fifth Advanced Service in the English Community Pharmacy Contractual Framework (CPCF) and provision of the service commenced from 16 September 2015.

The Department of Health (DH) recommends annual flu vaccination through the NHS to all individuals aged 65 years and over, during pregnancy and individuals aged from six months to less than 65 years if in recognised clinical risk groups.

Clinical at risk groups include those with:

- a heart problem;
- a chest complaint or breathing difficulties including asthma, bronchitis, emphysema, COPD;
- a kidney disease;
- lowered immunity due to disease or treatment (such as steroid medication or cancer treatment);
- a liver disease;
- a history of stroke or a transient ischaemic attack (TIA);
- diabetes;
- a neurological condition e.g. multiple sclerosis (MS) or cerebral palsy; and
- a problem with, or removal of, their spleen e.g. sickle cell disease
- the main carer of an older or disabled person
- Obesity with a BMI  $\geq 40$

Vaccination usually takes place between September and March each year. NHS England's main vaccination programme is commissioned through general practice.

Every year the NHS deals with 438 million visits to a pharmacy in England for health related reasons and 340 million GP consultations (NHS England, December 2013). The majority of the population within Dudley can access a community pharmacy within a 30 minute walk and crucially, access is greater in areas of highest deprivation (figure 8).

In December 2013 NHS England identified provision of seasonal flu immunisation to "at risk groups" as one of the various services for commissioners to consider via community pharmacies locally helping manage winter pressures (NHS England, December 2013).

Private vaccination services are already provided from many community pharmacies in the UK. Since 2002, various PCTs and subsequently Area Teams have commissioned community pharmacies to provide a flu vaccination service. Eligible groups have varied across the services. Where the NHS has commissioned flu vaccine targeted for "at risk" groups to community pharmacy, there is evidence that many

people who received the vaccine have never been vaccinated before e.g. in Sheffield where 20% of those vaccinated in community pharmacies were vaccinated for first time and 19% said they would not have had it if vaccine was not being offered at pharmacy (NHS Sheffield, 2014). Patient satisfaction with pharmacy flu vaccination provision is high with 99% of patients in Cumbria (Cumbria LPC, 2014), Sheffield (NHS Sheffield, 2014) and Isle of Wight (Pinnacle Health Partnership LLP, 2012), and 97% in Norfolk identifying the service as good or excellent (Healthwatch Norfolk, 2014). Patients cite easy access, convenience and no need to wait or need to book appointment as main reasons.

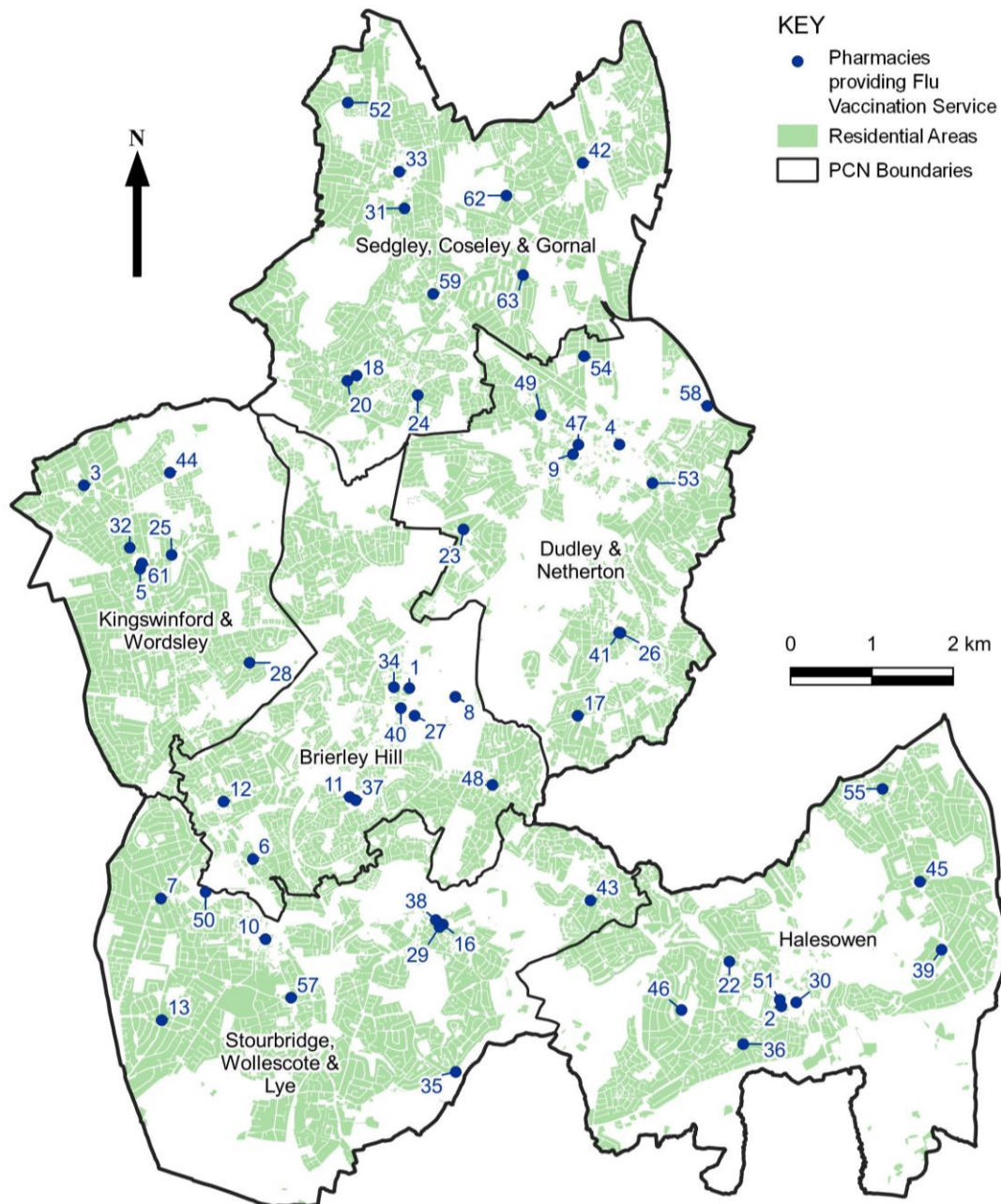
To participate with this service, community pharmacy contractors are required to sign up to and submit to NHS England, a service level agreement and a Patient Group Direction (PGD).

NHS England Area Team have emphasised that the service prioritises targeting increasing uptake in the under 65 years within one of the clinical risk groups (i.e. the harder to reach patients). This service does not cover influenza vaccination for occupational reasons or the vaccination of children (under 18 years of age).

It is important to recognise that the vast majority of seasonal influenza vaccinations for the eligible Dudley population will be provided through general practice and therefore alternative local providers continue to deliver this service.



**Figure 16:** Location of pharmacies providing the Seasonal Influenza Vaccination Service in Dudley (18 months to 30/09/2021)



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / NHS Shared Business Services Authority data  
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For a table containing the key to the pharmacies on the map, see appendix 1.

## **Assessment 6: Seasonal Influenza Vaccination**

Provision of the seasonal influenza vaccination service is offered from greater than 75% of all the pharmacies in each PCN (Table 3) and geographical access across the borough is considered to be excellent (figure 16). We conclude that there are no gaps in provision. Eligible patients for vaccination remain able to access this service through their general practice.

We further conclude that intelligence teams within organisations (Black Country ICS, DIHC and Directorate of Public Health and Wellbeing, Dudley MBC) should review influenza uptake data (for previous season) to determine areas around the borough where the target uptake (75% for all groups) has not been achieved and ensure greater targeted health promotion within these areas supporting all providers. We conclude to support the health protection of our population, this service is considered necessary through all providers for greater access and patient choice across the borough.

## **Smoking Cessation Service**

This advanced service has only recently been launched by NHS England during March 2022.

Whilst smoking rates have fallen significantly in the last ten years, smoking still accounts for more years of life lost than any other modifiable lifestyle risk factor.

Around 5.7 million people or nearly 14% of the adult population in England were reported to smoke in 2019 and will see their GP over a third more often than non-smokers. Smoking behaviour in the population continues to contribute to avoidable hospital admissions.

The NHS Long Term Plan set a goal that by 2023/24, all people admitted to hospital who smoke will be offered NHS-funded smoking cessation intervention. The plan committed to the adoption of the Ottawa Model for Smoking Cessation (OMSC), which has been evidenced across Canada to improve smoking quit rates by 11%.

As part of the OMSC, the smoking status of all admitted patients, is identified, followed by brief advice, personalised bedside counselling, timely nicotine replacement therapy and/or pharmacotherapy, and follow-up support for smoking cessation post-discharge.

To achieve successful quit, collaboration and an effective transfer of care are needed between secondary and primary care for all patients supported by the OMSC. Community pharmacy teams have considerable past experience of delivering such services successfully when these were previously commissioned in this setting.

For further detail of this service including service specification, training requirements and proposed patient pathway, please visit [Smoking Cessation Service \(SCS\) : PSNC Main site](#)

Given this service has only just been launched, at the time of writing this PNA, we are unaware of any service activity or local pathways to support patients from secondary care to be referred into community pharmacy.

It is also worth noting that the Directorate of Public Health and Wellbeing, Dudley MBC continue to commission stop smoking services from both community pharmacy and alternative providers within Dudley. This new advanced service is in addition to those local authority services already well established and this is to be welcomed for our population in Dudley.

Due to the lack of available data at this present time, we are unable to offer any conclusion on an assessment for access within Dudley for this service.

We conclude that the Black Country ICS should work with LPCs and secondary care acute trusts to facilitate a harmonised local pathway that is seamless and consistent for all contractors in Dudley as well as the Black Country.

A supplementary statement to this PNA can be considered at a later date as the service begins to develop.

## **Hepatitis C Testing Service**

The Community Pharmacy Hepatitis C Antibody Testing Service commenced on 1st September 2020 as an advanced service. Given, the national Hepatitis C Programme is an elimination exercise, the service will be time limited and at the time of writing, it is commissioned until 31<sup>st</sup> March 2023.

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 advanced service is part of NHS England and NHS Improvement's national programme to eliminate Hep C virus by 2025, five years earlier than the World Health Organisation goal. The service uses community pharmacies to target PWIDs for testing, as pharmacies are most likely to be visited by this group of service users.

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

1. increase the number of diagnoses of Hep C viral infection;
2. permit effective interventions to lessen the burden of illness to the individual;
3. decrease long-term costs of treatment; and
4. decrease onward transmission of Hep C virus.

It is important to recognise that within Dudley, Hep C virus testing (for this group of at risk service users) occurs in the main through the local authority (Directorate of Public Health and Wellbeing) commissioned substance misuse service delivered by the provider, Change, Grow and Live (CGL) situated in Lye.

Given zero activity data of delivery by Dudley community pharmacy contractors (for 18 months to 30 September 2021), we are unable to offer any conclusion on assessment of access to this service in the context of any identified need for our population. This assessment takes into account that Hep C virus testing is provided by the local commissioned specialist substance misuse service (provided by CGL) as above. Therefore, we conclude that we are unaware of any unmet need for this service through community pharmacy contractors.

## **Hypertension Case Finding Service**

This service was commissioned by NHS E&I as an advanced service in October 2021.

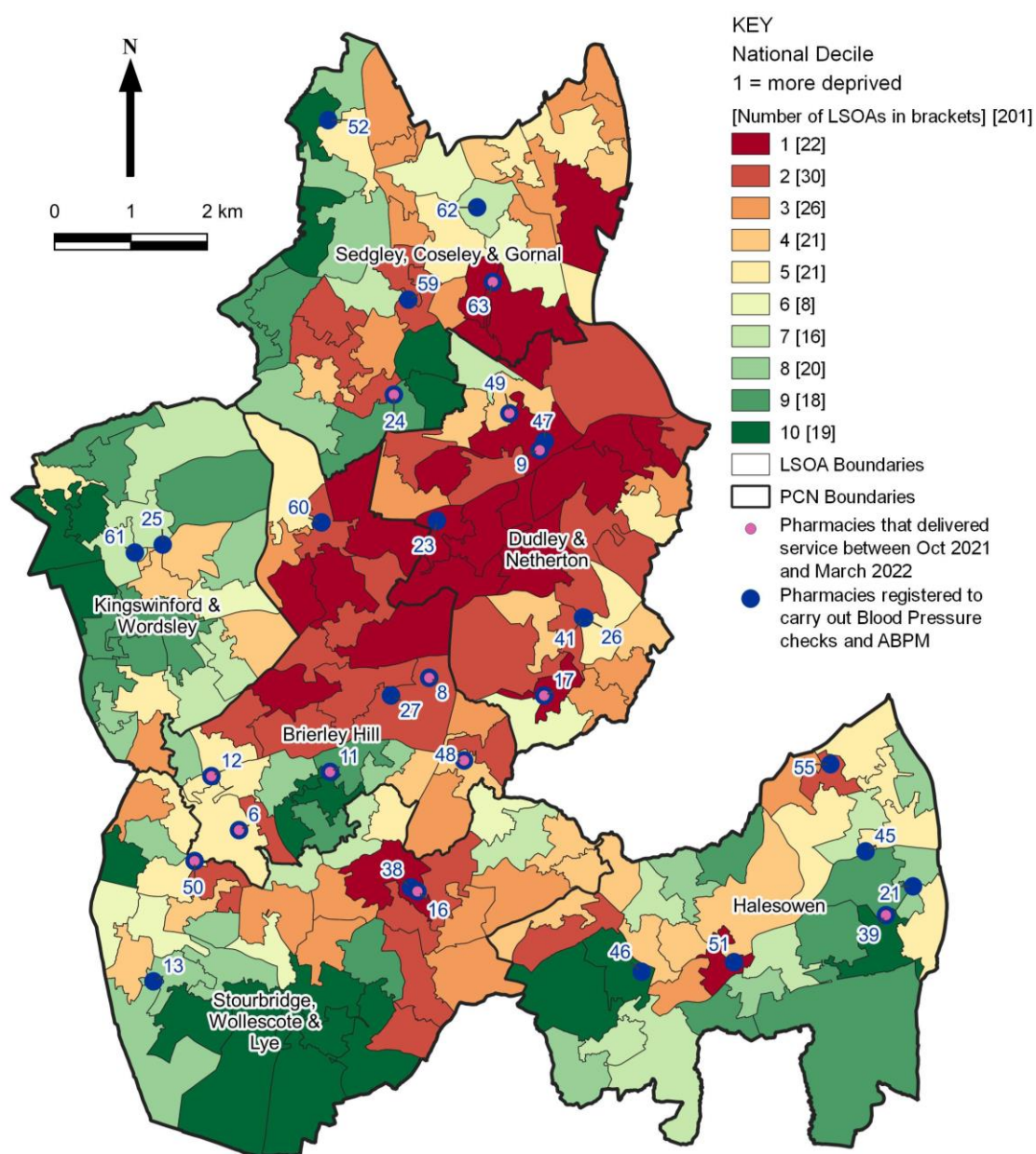
Cardiovascular disease (CVD) remains one of the leading causes of premature death in England. Hypertension (raised blood pressure) is the biggest risk factor for CVD and is one of the top five risk factors for all premature death and disability in England. An estimated 5.5 million people have undiagnosed hypertension across the country.

Early detection of hypertension is important and community pharmacy can play a key role in detection and subsequent treatment of hypertension and CVD, improving outcomes and reducing the burden of work on GPs.

Chapter 3 of the NHS Long Term Plan commits the NHS to reducing mortality and morbidity due to CVD, tackling inequalities and shifting towards prevention strategies. The NHS Long Term Plan specifically states that community pharmacy, in collaboration with other providers, will provide opportunities for the public to check on their health through tests for high blood pressure.

Residents of the most deprived areas in England are more likely to have high blood pressure (BP) compared to those in the least deprived areas. Additionally, within Dudley, for those patients with a diagnosis, anecdotally, there is an increased likelihood of their blood pressure (BP) not meeting target levels within those PCNs with greater deprivation. This continues to contribute to health inequality for CVD for our deprived communities when compared with those areas of affluence. Community pharmacy BP monitoring has the potential to increase the detection of hypertension within local PCNs and is expected to positively impact health inequalities by targeting people who do not routinely see their GP or use other NHS services.

**Figure 17:** Location of pharmacies registered to provide Blood Pressure checks and Ambulatory Blood Pressure Monitoring (ABPM) Service in Dudley at 31/03/2022 against Index of Multiple Deprivation 2019 National Deciles



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / NHS BSA / NHS Futures / Indices of Deprivation 2019, MHCLG. Produced by: Intelligence Team, Dudley MBC  
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For a table containing the key to the pharmacies on the map, see appendix 1.

The commissioning of such a service by NHS E&I is welcomed and is aligned to current activity by the Black Country ICS Cardiovascular Clinical Learning Network, promoting a programme across the wider healthcare system for hypertension and reduced CVD entitled “*detect, protect and perfect*”. This programme supports increased opportunistic and targeted case finding of hypertension (“*detect*”), initiation of interventions to lower BP and other CV risk factors (“*protect*”) and appropriate follow-up to target blood pressure to National Institute for Health and Care Excellence (NICE) targets (“*perfect*”).

The objectives of this service are to:

- Identify people aged 40 years or older, or at the discretion of the pharmacist people under the age of 40, with high blood pressure (who have previously not had a confirmed diagnosis of hypertension), and to refer them to general practice to confirm diagnosis and for appropriate management.
- At the request of a general practice, undertake ad hoc clinic and ambulatory blood pressure measurements
- Promote healthy behaviours to patients making every contact count

The introduction of this service will support the work that general practices and PCN teams in Dudley will be undertaking on CVD prevention and management aligned to the requirements of the PCN Direct Enhanced Service (DES). Presently, the DIHC Pharmaceutical Public Health Team are in the process of mobilising this service (via a Task and Finish group) through bringing together the PCN teams and community pharmacy colleagues to ensure operational requirements are clear to both parties. This will ensure true integration between general practice and community pharmacy meaning a more streamlined approach for our patients and population. A co-ordinated, seamless and sustained delivery of this service will be key to its success within Dudley and support achievement of the outcomes aligned within the PCN DES for CVD.

Further details about this service and how it is aligned to the requirements of the PCN DES can be found here [PSNC Briefing 035/21: Primary Care Networks – plans for 2021/22 and 2022/23 : PSNC Main site](#)

Ahead of delivering this service, there are bespoke requirements that need to be met by community pharmacy teams such as training/education around hypertension diagnosis and management, use of validated BP monitors (clinic BP and 24-hour ambulatory BP machines) and an understanding of signposting to other services depending upon the BP measured. A service pathway has been developed to ensure consistency with interpretation and onward referral (if appropriate) with this service which can be found here [Pathway Flow Diagram \(psnc.org.uk\)](#).

The service also allows GP teams to refer diagnosed patients into the pharmacy for routine clinic BP testing. This will help improve capacity for general practice whilst providing patients with more choice and access to BP checks if adopted in a co-ordinated and seamless manner.



For more information including the service specification please visit [Hypertension case-finding service : PSNC Main site](#)

## **Assessment 7: Hypertension Case Finding**

At the time of writing this PNA, Table 3 and Figure 17 demonstrates that 31 community pharmacies are accredited to deliver this service and of these, 13 have delivered activity. Presently, within each PCN (see Table 3), there is access to this service within at least a quarter of all pharmacies. Reassuringly, accessibility to this service increases to greater than 50% of all pharmacies within the two PCNs with greatest deprivation (Dudley & Netherton and Brierley Hill).

In part, an explanation for the strong start within Dudley & Netherton is that this PCN was chosen (due to known health inequalities with CVD) as part of a targeted population health approach across the wider Black Country ICS with support from DIHC Pharmaceutical Public Health Team, PCN Clinical Director, Black Country ICS Cardiovascular Clinical Learning Network and the academic health science network to accelerate the integration of this service within its general practices.

Given this is a relatively new service, we conclude that there is good access for our population in Dudley, with greatest access in areas of of higher deprivation (the expectation would be that the need for such a service is highest in these areas, in terms of health gain and narrowing health inequality). This conclusion is made on the basis that the majority of current blood pressure management (whether clinic readings or ambulatory) remains accessible for our population within their registered general practices and increasingly post COVID-19, many individuals have access to, and utilise home BP monitoring equipment as part of a self-care approach to long term conditions management.

We conclude that this is a desirable service for our population and encourage all community pharmacy contractors to work with PCNs to ensure this is accessible for all, but particularly for those living in areas of greater deprivation. A co-ordinated and seamless approach with local pathways and clear communication between PCN GP teams and community pharmacies will be key to the sustainable success of this service. We also conclude that this service should be aligned to the NHS Health Checks program.

## **NHS England & Improvement Midlands Enhanced Services**

### **Christmas Day, Boxing Day and Easter Sunday Enhanced Services**

This service provides for a full pharmaceutical service in selected pharmacies on Christmas Day, Boxing Day, New Year's Day and Easter Sunday. Whilst the provision of 100 hour pharmacies will provide pharmaceutical cover for the majority of bank holidays, it is important to note that this is often undertaken voluntarily by contractor(s) under an enhanced service commissioned by NHS England and is not required within the regulations. Any decisions on re-commissioning will be made with regard to the PNA. Only existing contractors in the areas of the PNA will be eligible. NHS E&I must ensure appropriate commissioning of pharmacy opening is available for the population of Dudley to access on national holidays, particularly as primary medical services remain available on such days (e.g. 24/7 emergency treatment centre and DIHC commissioned extended access hub).

### **Tier 1 and Tier 2 Extended Care Services (Enhanced Service)**

The Midlands Community Pharmacy Extended Care Service was rolled out to all community pharmacies across the Midlands region in late 2020. The service allows for the treatment of higher acuity conditions in a community pharmacy setting with the administration of antibiotics under Patient Group Directions (PGDs) where clinically appropriate.

Following a successful pilot within the North Midlands, restructuring of regional teams and the creation of NHS E&I Midlands enabled two levels of service to be expanded across the Midlands footprint:

- Tier 1 services
  - Treatment of uncomplicated urinary tract infections in females aged 16 to 65 years
  - Acute bacterial conjunctivitis in patients aged three months to two years
- Tier 2 services
  - Treatment of impetigo
  - Treatment of infected insect bites
  - Treatment of infected eczema

The aim of these services is to ensure that patients can access self-care advice for the treatment of a range of conditions, and, where appropriate, can be supplied with antibiotics or other prescription only medicines to treat their condition. This provides an alternative location from which patients can seek advice and treatment, rather than seeking treatment via a prescription from their GP or Out of Hours (OOH) provider, walk in centre or Accident and Emergency. This aligns to an ambition within the NHS Long Term Plan, to ensure greater use of community pharmacist clinical skills.



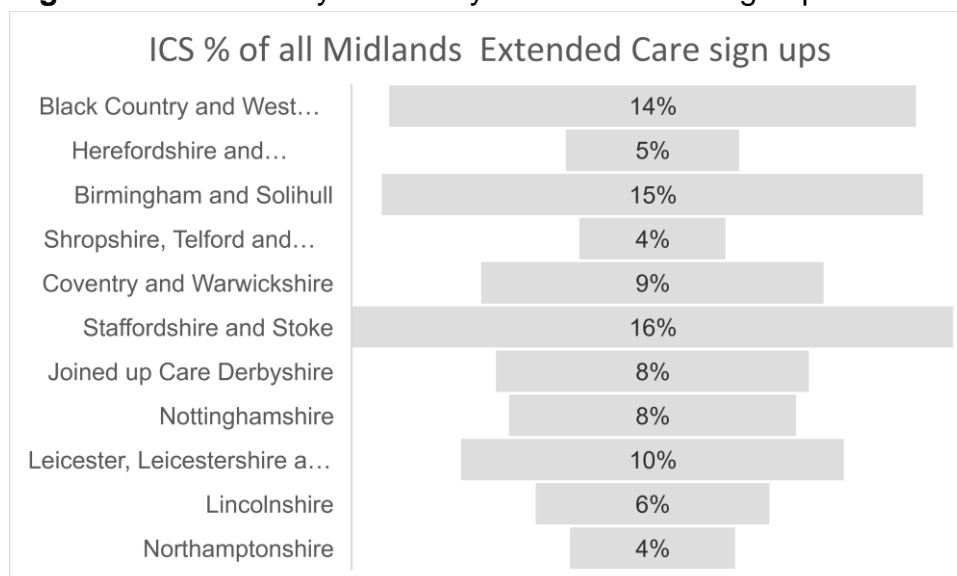
Additionally, objectives are as follows:

- Educate patients to seek advice and treatment from the most appropriate healthcare setting
- Improve patient's access to advice and appropriate treatment for these ailments via Community Pharmacy
- Reduce GP workload for these ailments allowing greater focus on more complex and urgent medical conditions
- Educate patients with aim of reducing requests for inappropriate supplies of antibiotics
- Promote the role of the pharmacist and self-care
- Improve working relationships between doctors and pharmacists
- The service is offered as a more accessible alternative for patients to access healthcare. However, patients may choose to refuse this service.
- The Community Pharmacy Extended Care Service includes a suite of PGDs which will allow pharmacists to treat patients presenting with certain conditions that otherwise would have to be seen by prescribers in General Practice.

These services will continue to be commissioned during 2022-2023 by NHS E&I Midlands with expansion into a Tier 3 service planned to support management of Otitis Media via a PGD (which is an infection of the middle ear that causes inflammation and a build-up of fluid behind the eardrum resulting in pain and discomfort).

Data on file (shared in personal communication with ICS medicine optimisation teams) from NHS E&I based on information for 2022-2023 demonstrate (Figure 17) that only 14% of all Black Country ICS pharmacy contractors are signed up to deliver these services. However, this percentage of sign-ups compares favourably when reviewed against other ICS in the Midlands.

**Figure 17:** Community Pharmacy Extended Care sign up across the Midlands by ICS

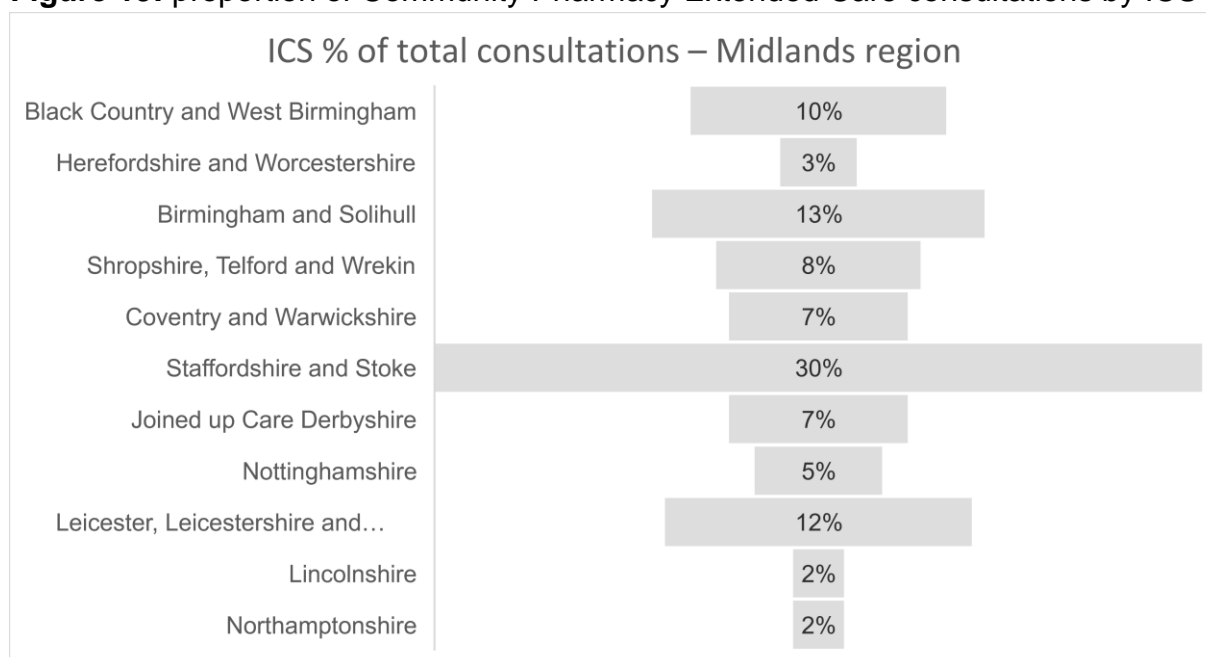


From personal communication by NHS E&I (data on file), a total of 21,621 extended care consultations took place within community pharmacy during financial year 2021-2022 (for the Midlands region). The majority of these consultations were for the Tier 1 service – treatment of uncomplicated urinary tract Infection in females aged 16-65. Data on file that has been shared in recent communication by NHS E&I is presented in Table 4 (for all of the Midlands region) and Figure 19:

**Table 4:** total Community Pharmacy Extended Care consultations by condition

<b>Tier 1 &amp; 2 conditions</b>	<b>Number of Consultations</b>
Urinary Tract Infection	16,635
Acute Bacterial Conjunctivitis (Suspended Q1 & Q2 2021/22)	723
Impetigo	854
Infected Eczema	332
Infected Insect bites	3077

**Figure 19:** proportion of Community Pharmacy Extended Care consultations by ICS



At the time of writing this PNA, given this service activity data is unavailable at a place level for individual pharmacy contractors (Dudley HWB area), we are unable to offer any conclusion on assessments for our PCNs and our local population. Again, it is recognised that access to these services is in addition to existing alternative providers (e.g. GP practices) and we conclude that all community pharmacies should sign up to support access to this desirable service across our HWB area.

We further conclude that the commissioner (NHS E&I) should work with Black Country ICS, PCNs, DIHC pharmacy team and Dudley LPC to ensure mobilisation of these services is delivered in a consistent and harmonised manner that supports seamless care for the service user. Similarly, to other advanced services discussed above, clear pathways of communication will be required by community pharmacy and general practices to ensure it is a sustainable service for our population to deliver the proposed outcomes. We conclude that to support integration and efficient patient referral from General practice to community pharmacy (and *vice versa*), NHS E&I should commit financial resource to developing a digital platform that ensures safeguards and appropriate referrals by non-clinical members of the general practice team (in today's general practice these are referred to as "*care navigators*"). Local evidence from implementation of CPCS service within Dudley has demonstrated that an IT solution that refers patients from general practice (via the clinical system EMIS WEB) to community pharmacy has vastly supported uptake of this service.

Once data can be determined for activity by our Dudley pharmacy contractors, we will review local access (with appropriate mapping) and produce a supplementary statement to this PNA.

## **Black Country Integrated Care System Commissioned Services**

Presently, the Black Country ICS commissions the following services to community pharmacy contractors in Dudley and Table 5 demonstrates the number of pharmacies within each PCN delivering activity:

- Pharmacy First Minor Ailments Service (PFMAS)
- COVID-19 Urgent Eye Care Service (CUES) / (MECS)\*
- Specialist Palliative Care Drugs Supply Service (SPCDS)\*\*

**Table 5** Black Country ICS Commissioned service provision by PCN, 2021

BC ICS Commissioned Services	Brierley Hill (12)	Dudley & Netherton (11)	Halesowen (11)	Kingswinford & Wordsley (8)	Sedgley, Coseley & Gornal (10)	Stourbridge, Wollescote & Lye (11)
Minor Ailments Service (MAS)	7	9	8	4	8	6
COVID-19 Urgent Eye Care Service (CUES) / (MECS)*	6	10	9	5	8	6
Key:						
	Offered by 75% or more pharmacies within PCN					
	Offered by 25-75 % of pharmacies within PCN					
	Offered by less than 25% of pharmacies within PCN					

Source: Black Country & West Birmingham CCG data

( ) = Number of pharmacies within each PCN

\* The Minor Eye Conditions Service (MECS) was renamed in 2021 to COVID-19 Urgent Eye Care Service (CUES)

\*\* The SPCDS service is not included within the table as it is only commissioned to four pharmacies in Dudley (see SPCDS section below for rationale).

## Pharmacy First Minor Ailments Service (PFMAS)

Minor ailments are defined as 'common' or self-limiting or uncomplicated conditions that can be diagnosed and managed without medical intervention (Selfcare Forum, 2011).

Community pharmacy based services to treat minor ailments were introduced across the UK more than twenty years ago (National Health Service, 2000) to reduce the burden of minor ailments on higher cost settings such as General Practice and Urgent Care settings, including hospital A&E departments and Walk-in Centres. Consultations for minor ailments are significantly less expensive when provided through community pharmacy and evidence suggests that the pharmacy-based service provides a suitable alternative to GP consultations (Paudyal, et al., 2013).

Following a successful evaluation of the NHS England West Midlands Enhanced Service pilot PFMAS (October 2014 to March 2015) this service was fully commissioned (by NHS England) for the period from April 2015 to March 2017.

From 31<sup>st</sup> May 2018, this service was decommissioned by NHS England with responsibility for commissioning transferring to CCGs as part of the programme of local primary care commissioning work for reducing demand on general practice and promoting self-care. Dudley CCG took over the commissioning from 1<sup>st</sup> June 2018 until 31<sup>st</sup> March 2021 when, through the merger of the Walsall, Dudley, Wolverhampton and

Sandwell & West Birmingham CCGs (as part of the NHS Long Term Plan), it became the responsibility of the new commissioner, Black Country CCG from 1<sup>st</sup> April 2021.

Black Country ICS remains committed to developing and furthering the PFMAS to ensure those with low incomes or greatest health need can still access effective medicines for self-care without a fee. This ensures equitable access for our population across the borough.

The conditions that the minor ailments scheme includes are:

- |                    |                          |
|--------------------|--------------------------|
| • acute cough      | • acute fever            |
| • sore throat      | • diarrhoea              |
| • earache          | • constipation           |
| • cold and flu     | • dry skin/simple eczema |
| • hay fever        | • cold sores             |
| • bites and stings | • dyspepsia              |
| • vaginal thrush   | • mouth ulcers           |
| • nappy rash       | • headlice               |

The service can be provided by any community pharmacy within the Black Country geography that fully meets the requirements for provision of the service. Dudley GP registered patients can access this service from all community pharmacy providers (willing to participate) within Dudley and the wider Black Country. For some of the Dudley population, access may be easiest in a neighbouring Health and Wellbeing board community pharmacy, particularly at times for out of hour's access.

Community pharmacies in the scheme will be able to provide advice and support to eligible people on the management of minor ailments, including where necessary, the supply of non-prescription medicines for people who would have otherwise accessed general practitioner (GP) services.

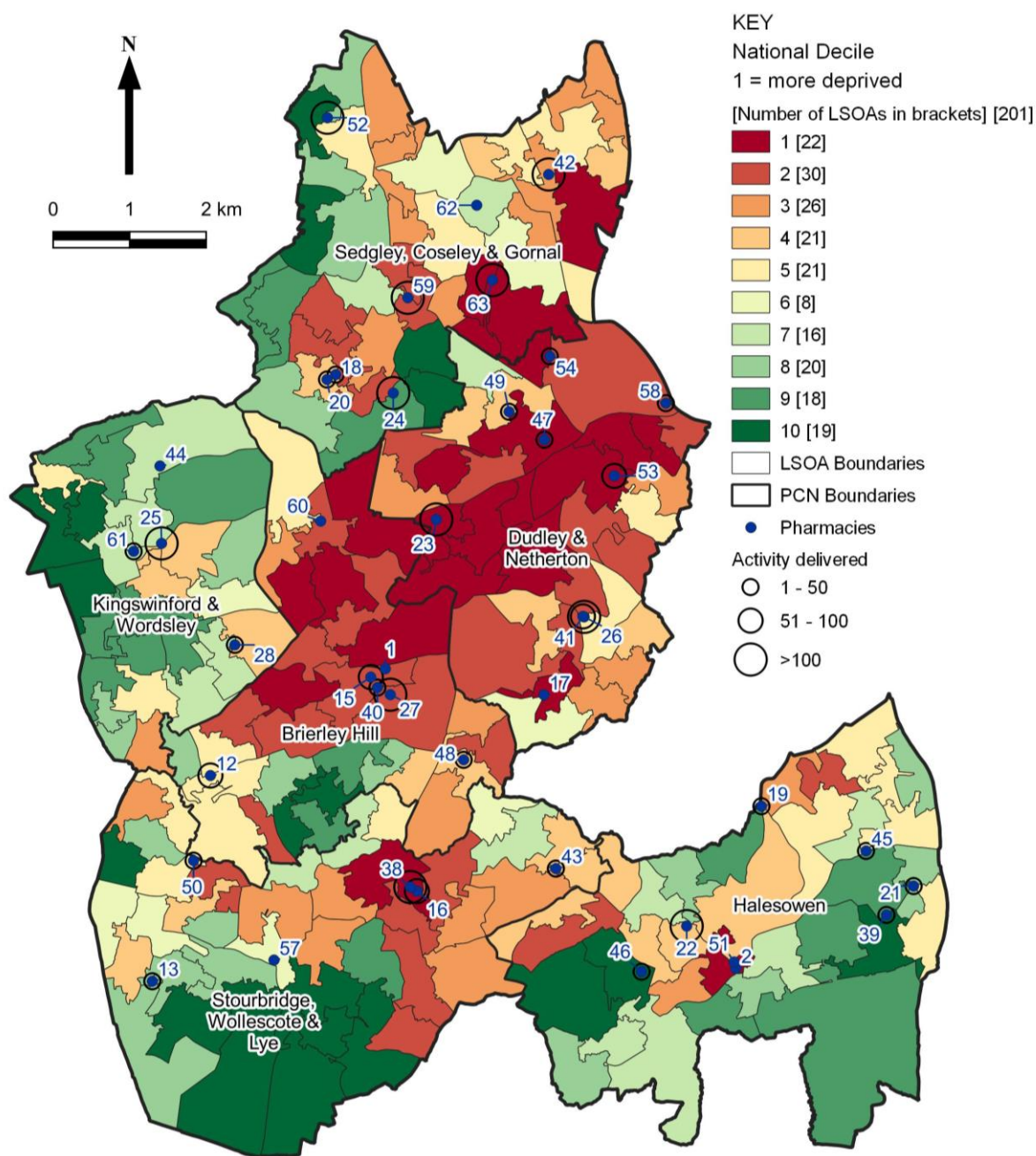
From the patient/public formal consultation conducted by Healthwatch Dudley in 2014 (see <http://healthwatchdudley.co.uk/reports/>), an overwhelming majority of responses (89%), when prompted on access to a minor ailments service locally, were in favour of such a scheme.

For the calendar year 2021, 42 out of 63 Dudley community pharmacies (excluding distance selling pharmacies) had delivered activity (figure 20 and Table 5). During the same period over 6900 consultations had been recorded for Dudley GP registered patients and there was evidence that the registered GP population had accessed this service in community pharmacies outside of Dudley within Wolverhampton and Sandwell (data on file). Evidence from data on file since the implementation of this service demonstrates increased uptake and activity by pharmacies.

Since, the last PNA, as discussed above (under section NHS E&I Advanced Services), community pharmacies are able to deliver CPCS with increased local focus on implementation currently ongoing. Whilst CPCS is an individual service in its own right, the availability of PFMAS is considered favourable as CPCS provides a pathway for eligible patients to be on-boarded for treatment supply, free at the point of access.

There is expectation that growth of CPCS activity within the next few years will drive increased uptake into PFMAS and commissioners will need to consider this for impact on local budgets. Therefore PFMAS is considered a desirable service, particularly in those areas of the borough with greatest deprivation where already stretched household incomes may prove a barrier to access medicines for self-care and thus potentially drive patients into more costly access points in the NHS (e.g. GP, A+E departments, urgent care centres etc).

Figure 20: Location of pharmacies offering Pharmacy First, Minor Ailments Service (MAS) in Dudley (2021) and Index of Multiple Deprivation 2019 National Deciles



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / Indices of Deprivation 2019, MHCLG / Black Country and West Birmingham CCG. Produced by: Intelligence Team, Dudley MBC  
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For a table containing the key to the pharmacies on the map, see appendix 1.

Figure 20 demonstrates that on the whole, there is good geographical access to this desirable service within Dudley, particularly in those areas of greatest need (greatest three deciles of deprivation). Jhoots Pharmacies Netherton & Brierley Hill (Pharmacy ID 26 & 27 appendix 1) delivered approximately 85% of all PFMAS activity in Dudley, both branches being situated in areas of greatest deprivation as well as the Brierley Hill branch being open >100 hours per week (ensuring favourable access). For those pharmacies delivering activity within Dudley, there is wide variation with number of provisions (represented by small, medium and large circles within figure 20). Gaps in access to this service exist within the Wordsley green community locality (community locality surrounding County Pharmacy (pharmacy ID 14 on map and appendix 1)) and Cockshot (community locality surrounding Rajja Chemist, ID number 55 on map and appendix 1). These community localities are within the greatest four deciles of deprivation and thus represent an area of high need for such a service.

Feedback from service users and local intelligence informs that barriers to service delivery exist within community pharmacies due to capacity (delivery of essential services), poor understanding of the service specification, lack of public awareness and staff changes (e.g. locum, relief pharmacists etc.). Challenges with access of the service to all times of the contracted opening hours of the community pharmacy continue to be reported.

## **Assessment 8: Minor Ailments Service**

We conclude that access to this desirable service is good around the borough, particularly in those areas with greatest health need (identified by greatest four deciles of deprivation)

We conclude that where gaps in service delivery have been identified (as above), there are sufficient existing contractors within these gaps willing to deliver this service and Dudley LPC (in partnership with Black Country ICS and the DIHC Pharmaceutical Public Health Team) will need to work with these contractors to overcome any barriers to service delivery to ensure an equitable service for patients no matter which community pharmacy they use and at whatever time or day of their contracted opening hours.

## **COVID Urgent Eye Care Service (CUES) (formerly Minor Eye Conditions Service (MECS))**

Historically, from 1 October 2018, Dudley CCG had commissioned a service called the Minor Eye Conditions Service (MECS).

The development of the MECS was part of an NHS E&I programme of work to ensure patients are seen at the right time, in the right place, by the right person. This has been



driven by the need to manage the demands being placed on secondary care ophthalmology services, and in doing so has recognised the potential to develop the role of eye health care professionals in primary care e.g. optometrists.

The service allows a rapid assessment of the needs of a Service User presenting with an eye condition by an Optometrist. Service users can be referred into this service by GPs and community pharmacists or access through self-referral into a participating optical practice. Optometrists can recommend or supply any General Sales List (GSL) or Pharmacy only (P) eye preparation during their professional practice. Optometrists may also produce a signed order for a Prescription Only Medicine (POM) for a limited number of eye preparations which can then be presented to a participating community pharmacy to be dispensed similar to a standard prescription.

Whilst the MECS had been running successfully for just under two years, due to the COVID-19 pandemic and national restrictions to community based routine eye care and non-urgent secondary care service access to prevent COVID-19 transmission, a new community based urgent eyecare service was launched called the COVID-19 Urgent Eyecare Service (CUES service) in the Black Country. This is a similar service to MECS but with greater focus on urgent symptoms.

Presently, the Black Country ICS continues to commission CUES via the optometry federation, Primary Eyecare Services Ltd (PES). It is accessible through signposting by other healthcare providers patients (e.g. GPs, community pharmacies, emergency treatment centre, NHS 111 etc) or self-referral by patients registered with a Black Country ICS GP practice. Patients with urgent eye symptoms, such as a red eye, painful eye, flashes and floaters, foreign body etc. can be signposted to CUES at a local participating optical practice. The service will provide initial contact, telephone triage, remote consultations and where necessary face to face assessments providing management of recent onset symptomatic or urgent ocular presentations. An extension of this service now allows optometrists who are qualified as independent prescribers to manage traditional acute eye conditions away from specialist eye clinics (e.g. hospitals) through the ability to prescribe a wide range of POM eye drops containing antibacterials, steroids, antivirals etc.

Following examination by a participating Optometrist, this service allows pharmacies to provide selected medication ordered on a signed order (POM only) to exempt patients, free of charge. The signed order (for POM) acts as a legal mechanism for medicine supply in the same way as a private prescription and the pharmacist will need to record an entry into the private prescription book. Those service users that pay for their NHS prescription(s) will be subject to the standard NHS prescription levy under this Service. For General Sales List or Pharmacy only preparations, the signed order will act as a treatment recommendation for all Service Users to self-care and self-purchase via the participating community pharmacy. For a selected formulary of P licensed eye formulations (e.g. Sodium Cromoglicate 2% for hay fever) on a signed order, prescription levy exempt Service users can receive treatment free at the point

of care. For this reason, it is desirable that community pharmacies are accredited to deliver both this Service and the PFMAS.

More details can be found here: [Primary Eyecare provides NHS-funded eyecare services via local opticians](#)

Table 5 and Figure 21 (data from pharmacy questionnaire, appendix 5a) demonstrates that 44 out of 63 patient facing pharmacies are accredited to deliver CUES. However, from data on file, during the calendar year 2021, only 16 (from 44) community pharmacies delivered activity in Dudley and many of these delivered less than five units of activity (See Figure 21). Total provision of activity (based on claims made by pharmacy contractors, data on file) for the calendar year by Dudley community pharmacies was 68. Assuming community pharmacy contractors have submitted claims correctly to the commissioner, this means that only 68 written orders/treatment recommendations were presented to the pharmacy for the calendar year, 2021.

Anecdotal feedback from service users and local intelligence within community pharmacy informs that barriers to service delivery exist within community pharmacies due to capacity (delivery of essential services and other more established services), poor understanding of the service specification, lack of promotional materials by commissioner or optical care provider (Primary Eyecare Service Ltd), lack of public awareness with service and staff changes within pharmacies (e.g. locum, relief pharmacists, work force pressures etc.). From anecdotal experience from DIHC pharmacists working within general practice, many service users inappropriately bring their signed order or treatment recommendation following CUES access into the general practice for an NHS prescription. Thus, either, the medicine supply pathway and/or communication to the service user (by healthcare professional) needs clarification at the point of service user access to avoid unnecessary return back into general practice. That said, some service users, whilst they can access their medication via CUES as a one off for acute complaints; there may be a perceived need for further supplies as part of a longer-term chronic eye complaint (e.g. dry eyes) where service users then approach the GP rather than adopting the recommending self-care approach and purchasing appropriate eye drops over the counter (where clinically appropriate) for example. Additionally, recognition remains that many service users will still access their GP for acute eye complaints with subsequent prescribing of medication as appropriate if needed.

## **Assessment 9: CUES**

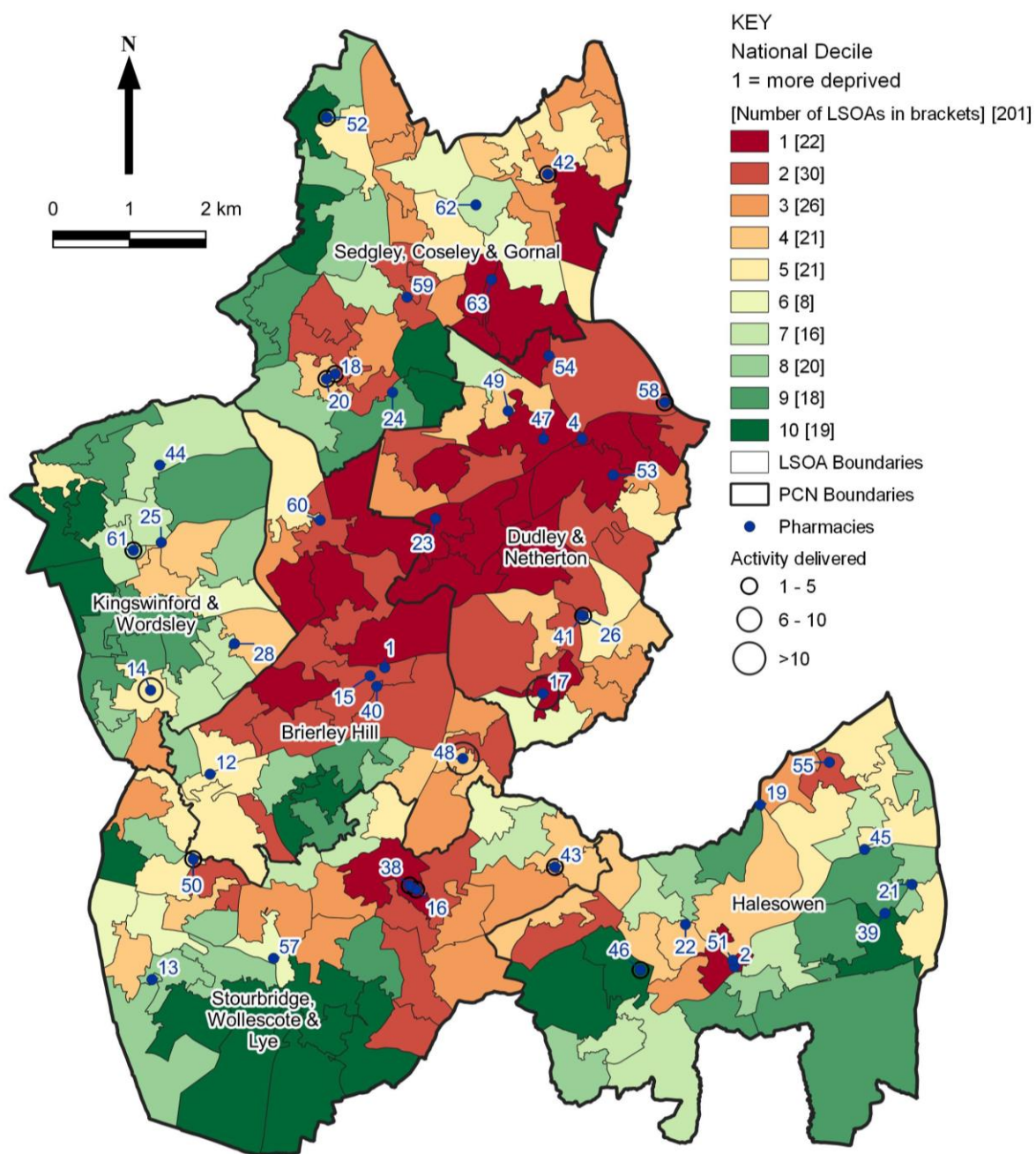
We conclude that access to this desirable service is good around the borough, even though actual delivered activity is low.

To improve activity amongst Dudley community pharmacies, we conclude that Dudley LPC (in partnership with Black Country ICS, DIHC Pharmaceutical Public Health Team and the optical provider, Primary Eyecare Services Ltd) will need to work with

community pharmacy contractors to overcome any barriers to service delivery to ensure an equitable service for patients no matter which community pharmacy they use.

Black Country ICS (commissioner) is recommended to ensure the optical provider holding the main contract for CUES (Primary Eyecare Services Ltd) provides clear communication to service users to ensure treatment recommendations and/or signed orders are directed to the community pharmacy. Signposting and utilisation of this service should be reviewed by the commissioner to ensure the correct access points of care are being used in the NHS (aligned to the original vision for MECS). At future planned contract reviews (between the Black Country ICS and optical care provider for CUES), a comparison of activity by the provider for written signed orders/treatment recommendations (accessed by Dudley GP registered patients) should be matched with activity delivered by this service by community pharmacy contractors. If this identifies a significant difference (which we hypothesise), this should then be further investigated to understand why (and offer solutions moving forward).

**Figure 21:** Location of pharmacies offering COVID-19 Urgent Eyecare Service (CUES) in Dudley (2021) and Index of Multiple Deprivation 2019 National Deciles



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / Indices of Deprivation 2019, MHCLG / Black Country and West Birmingham CCG. Produced by: Intelligence Team, Dudley MBC  
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Key to pharmacy ID numbers in appendix 1

## **Specialist Palliative Care Drugs Supply Service**

Black Country ICS commissions (facilitated via Midlands & Lancashire Commissioning Support Unit) a Specialist Palliative Care Drugs Supply (SPCDS) Service to four community pharmacies within the borough.

It is important to note that this service is not commissioned in isolation. Assessment of need of provision is not made against the total availability of service by all providers but on the basis of need within the population of Dudley borough and access during core and extended hours during the day.

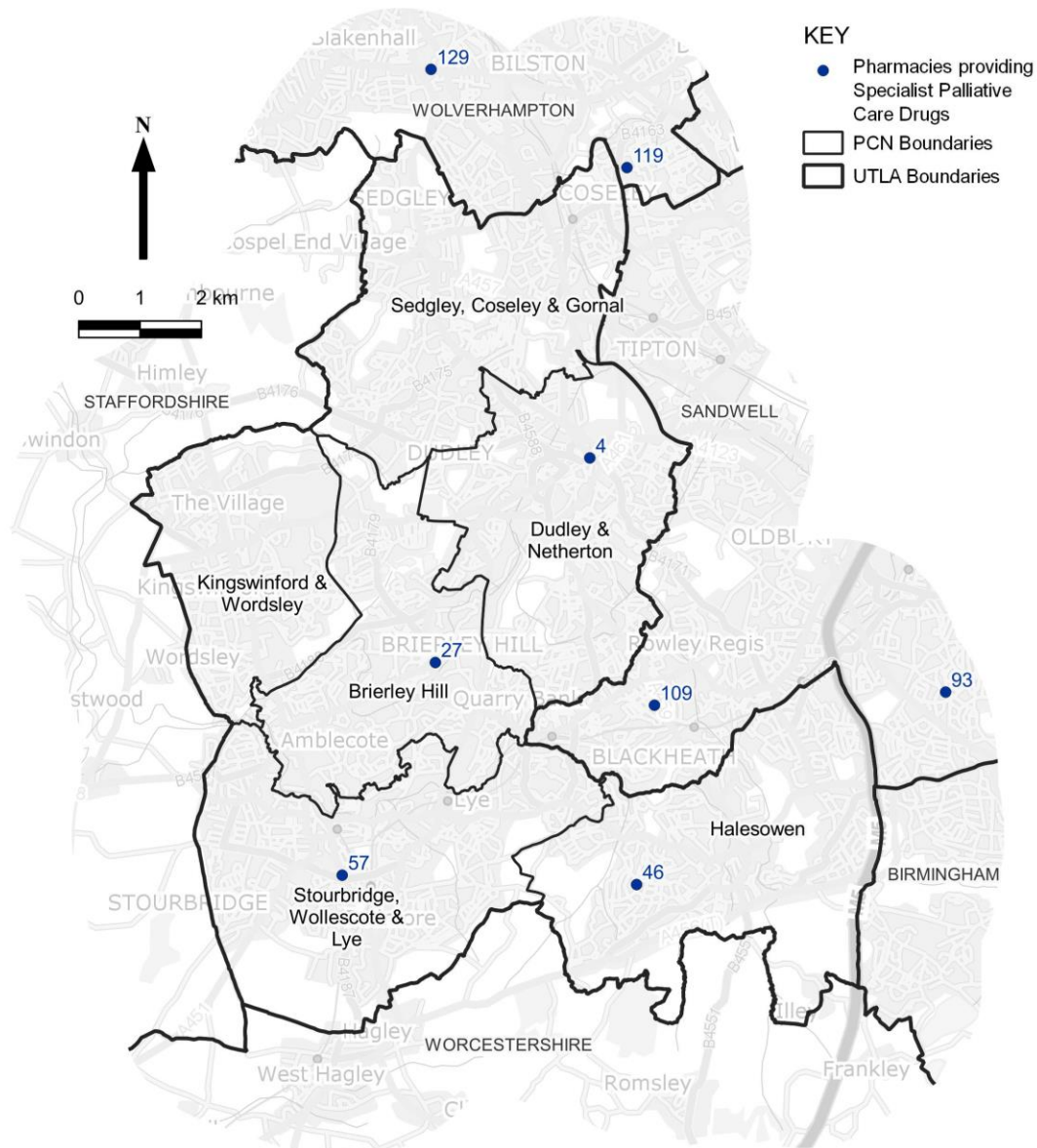
Historically, this service was first commissioned as an enhanced service pilot for twelve months (April 2016 to March 2017) by NHS E&I within pre-selected community pharmacies across the West Midlands area. Following the end of the pilot, NHS England West Midlands took the decision not to re-commission the service and responsibility for ongoing commissioning was transferred to CCGs as part of their local end of life care pathway and/or strategy. Dudley CCG, working in partnership with other neighbouring CCGs and palliative care teams considered this to be a necessary service for improving end of life care and continuation of the historical service was agreed. Following the merger of the four CCGs (Dudley, Wolverhampton, Sandwell & West Birmingham and Walsall), the service became the responsibility of the new Black Country ICS.

The aim of this service is to provide a network of community pharmacies, across the Black Country who undertake to improve access for patients to specialist medicines when they are required during end of life care. This will be done by:

- Ensuring providers hold agreed stocks of Specialist Palliative Care Drugs (SPCD). This will ensure medicines necessary for effective symptom control are immediately available to patients, carers and their representatives.
- Allowing on demand, prompt access and continuity of supply of specialist palliative care drugs during extended pharmacy opening hours including into the evening (10pm) seven days per week. It will be expected that working with NHS England & Improvement, at least one Pharmacy per Health and Wellbeing Board area will be open on a Bank Holiday.
- Providers will be expected to contact alternative providers within the network of this service to source SPCD where, in exceptional circumstances, the required SPCD cannot be supplied in a timely fashion.
- Supporting patients, carers and clinicians by providing them with up-to-date information, advice and referral where appropriate. Thereby reducing the demand for hospital based services and lowering levels of unplanned hospital admissions.

- Providing advice on safe use, side-effects and the safe disposal of controlled drugs to staff, patients, carers and their representatives. Thus enhancing the care and safety of palliative patients.
- The service will be collection only, however providers are encouraged to provide delivery services, if it meets the need of the patient and capacity exists to do so.

**Figure 22:** Location of pharmacies providing Specialist Palliative Care Drugs within Dudley and a 2km boundary by Upper Tier Local Authority (UTLA)



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / Black Country and West Birmingham CCG  
 Produced by: Intelligence Team, Dudley MBC  
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See appendix 1 and appendix 3 for key to pharmacies.

Within Dudley, four community pharmacies (figure 22) provide this service (Swinford Pharmacy, ID number 57 appendix 1; Boots Dudley, ID number 4 appendix 1; Jhoots Pharmacy, ID number 27 appendix 1 and Murrays Pharmacy, ID number 46 appendix 1). Jhoots Pharmacy (ID number 27, appendix 1) will provide extended hours access for the Dudley population (100 hour pharmacy with weeknight and weekend opening hours until 22:30). This ensures good access to the service in the Dudley & Netherton, Halesowen, Stourbridge and Brierley Hill townships. The north of the borough (Sedgley Township) will have good access to this service from a community pharmacy located within Wolverhampton (figure 22, pharmacy ID 119 and 129, appendix 3).

Additionally, all community pharmacies within Dudley (irrespective of this commissioned service) have a contractual obligation under the essential services framework to dispense medicines when presented with a prescription in a timely efficient manner, including palliative care medicines. Therefore, all community pharmacies are able to supply this group of medicines to ensure adequate access across the borough.

It should also be noted that local end of life care pathways are designed to ensure anticipatory specialist palliative care medicines are prescribed and made available (to the patient) ahead of actual need to support dignity with care toward the end of life.

To meet overnight need (defined as 10pm to 8am, seven days per week) for SPCD, a community clinical hub hosting the overnight palliative care community team situated within Brierley Hill Health has access to a limited stock of key injectable end of life medication (e.g. Morphine, Midazolam, Glycopyrronium and Levomepromazine) should a need arise. This service is commissioned by the Black Country ICS – Dudley place and is delivered by the acute hospital trust in the community.

## **Assessment 10: Specialist Palliative Care Drugs Supply Service**

We conclude that the population of Dudley has good access to the SPCDS service for those pharmacies commissioned within Dudley and neighbouring health and wellbeing board areas. All community pharmacies within Dudley (irrespective of this commissioned service) remain able to dispense these medicines when called upon via an NHS prescription and for overnight access (10pm to 8am). Access to limited key stock overnight is available as mentioned above through a central community clinical hub where in exceptional circumstance a need may arise.

Therefore no gaps in service provision have been identified.



# Directorate of Public Health and Wellbeing Services

## Sexual Health Services

Pharmacies' position within the community and extended opening times at evenings and weekends, particularly on Sundays, has led to commissioning for the provision of sexual health services from Dudley pharmacies. Currently the Directorate of Public Health and Wellbeing are undergoing a review of the borough's sexual health services, including those provided by community pharmacies. Initial recommendations support the continuation of the well established Emergency Hormonal Contraception (EHC) pharmacy provision; however, as previously mentioned, chlamydia treatment and HIV point of care testing services within pharmacies were decommissioned from April 2022. Currently pharmacies are also able to offer chlamydia screening to 15-24-year-olds as part of the local chlamydia screening programme and free condoms for 13-25-year-olds via the C-card scheme, both managed by Brook and funded by the Directorate of Public Health and Wellbeing.

The borough's chlamydia Screening Programme and C-card scheme remain under review and therefore pharmacies should continue provision under current arrangements pending the outcome of the review.

**Table 6:** Pharmacy sexual health service provision by PCN, twelve months to 31/03/2022

Sexual Health Services	Brierley Hill (12)	Dudley & Netherton (11)	Halesowen (11)	Kingswinford & Wordsley (8)	Sedgley, Coseley & Gornal (10)	Stourbridge, Wollescote & Lye (11)
EHC using PGD	9	8	6	6	9	7
Chlamydia screening	7	9	6	4	5	7
Key:						
	Offered by 75% or more pharmacies within PCN					
	Offered by 25-75 % of pharmacies within PCN					
	Offered by less than 25% of pharmacies within PCN					

Source: Claims submitted to the Directorate of Public Health and Wellbeing, Dudley MBC / PNA Contractor Questionnaire / PharmOutcomes  
( ) = Number of pharmacies within each PCN



## **Provision of Emergency Hormonal Contraception (EHC)**

This service is commissioned by Dudley MBC's Directorate of Public Health and Wellbeing to provide EHC (levonorgestrel 1500 micrograms) to females aged over 13 years under a patient group direction (PGD). A PGD signed by a doctor and by a pharmacist, allows nurses and pharmacists to supply and administer prescription only medicines (POMs) to patients using their own assessment of patient clinical need, without necessarily referring to a doctor for an individual prescription.

The standard criteria for pharmacies providing the emergency hormonal contraception service are:

- accredited premises (a consultation area to the standard required for provision of advanced services)
- pharmacists to complete defined Centre for Pharmacy Postgraduate Education (CPPE) distance learning materials and
- attendance at training events as deemed appropriate by the commissioner.

EHC provision is well established within Dudley pharmacies. For the twelve month period to end of March 2022, 45 pharmacies are accredited to provide the EHC service across Dudley, with 40 active providers totalling 2952 provisions or personal interactions. The pharmacies are located in areas of known higher rates of teenage conception (Figure 23) and there is good geographical access to EHC across the borough. There are pharmacies providing EHC within the large shopping centres, and high streets across the borough as well as within local small independent community pharmacies and the LPS pharmacy on The Priory Estate.

Groups of pharmacies have been accredited in the Dudley, Halesowen and Stourbridge areas to ensure comprehensive service cover is available in areas where large numbers of aged 16 to 19 girls attend tertiary college.

Accredited pharmacies are now open in five out of six PCNs on a Sunday. None of the accredited pharmacies in Sedgley are open on a Sunday. However, analysis of the supply of EHC to females across the borough shows that over 50% of women choose to use the pharmacies within the Merry Hill shopping centre and Dudley town centre to access the EHC service. Public transport links are good from Sedgley, and all areas of the borough, to the Merry Hill Shopping Centre and Dudley town centre allowing women to travel there with ease. The Phoenix pharmacy (100 hour contract) in Wolverhampton (Figure 10 and Appendix 3, ID number 132) provides extended opening hours (including Sundays) and Sedgley patients can access provision of EHC supply confidentially (under PGD) through a service commissioned by Wolverhampton Public Health Department.

Dudley MBC Directorate of Public Health and Wellbeing also commissions sexual health specialist services.

Dudley Contraception & Sexual Health Service and Brook for under 25-year olds across the borough enable females to access EHC. Further details of these services can be accessed here:

<http://www.dgft.nhs.uk/services-and-wards/genito-urinary-medicine>

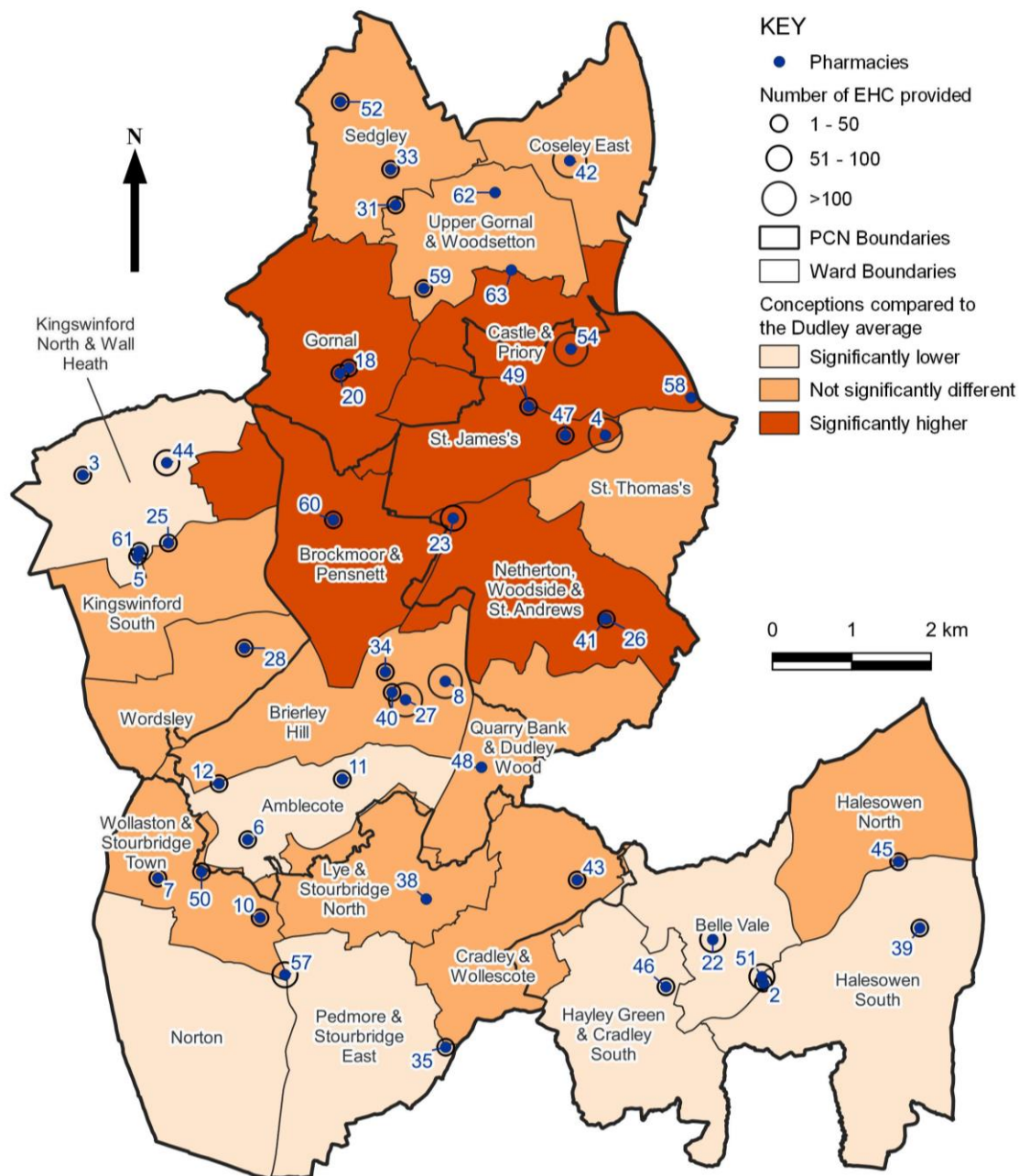
and <https://www.brook.org.uk/regions/brook-dudley/>

Females 16 years and over can also access EHC from any community pharmacy over the counter subject to meeting defined criteria as a private non-commissioned service at their own cost. Access, also remains via the patients registered GP (although this is not a desirable approach due to timely access being critical).

## **Assessment 11: Provision of Emergency Hormonal Contraception (EHC)**

We conclude that women across the borough have good access to this service, particular in areas of greater teenage conception rates. We further conclude that support and encouragement will be provided by Dudley MBC Directorate of Public Health and Wellbeing to other pharmacies within the borough who wish to become accredited to provide this service subject to ongoing funding and identified need. This will improve access further for the Dudley population.

**Figure 23:** Location of pharmacies offering emergency hormonal contraception (EHC) in Dudley (2021/22) and Ward rate of conceptions per thousand females aged 15-17 (2017-19) relative to the Dudley average



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / Directorate of Public Health & Wellbeing, Dudley MBC / PNA Contractor Questionnaire / SPLASH, UKHSA. Produced by: Intelligence Team, Dudley MBC  
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Key to pharmacies ID numbers in appendix 1

## **Chlamydia Screening Service**

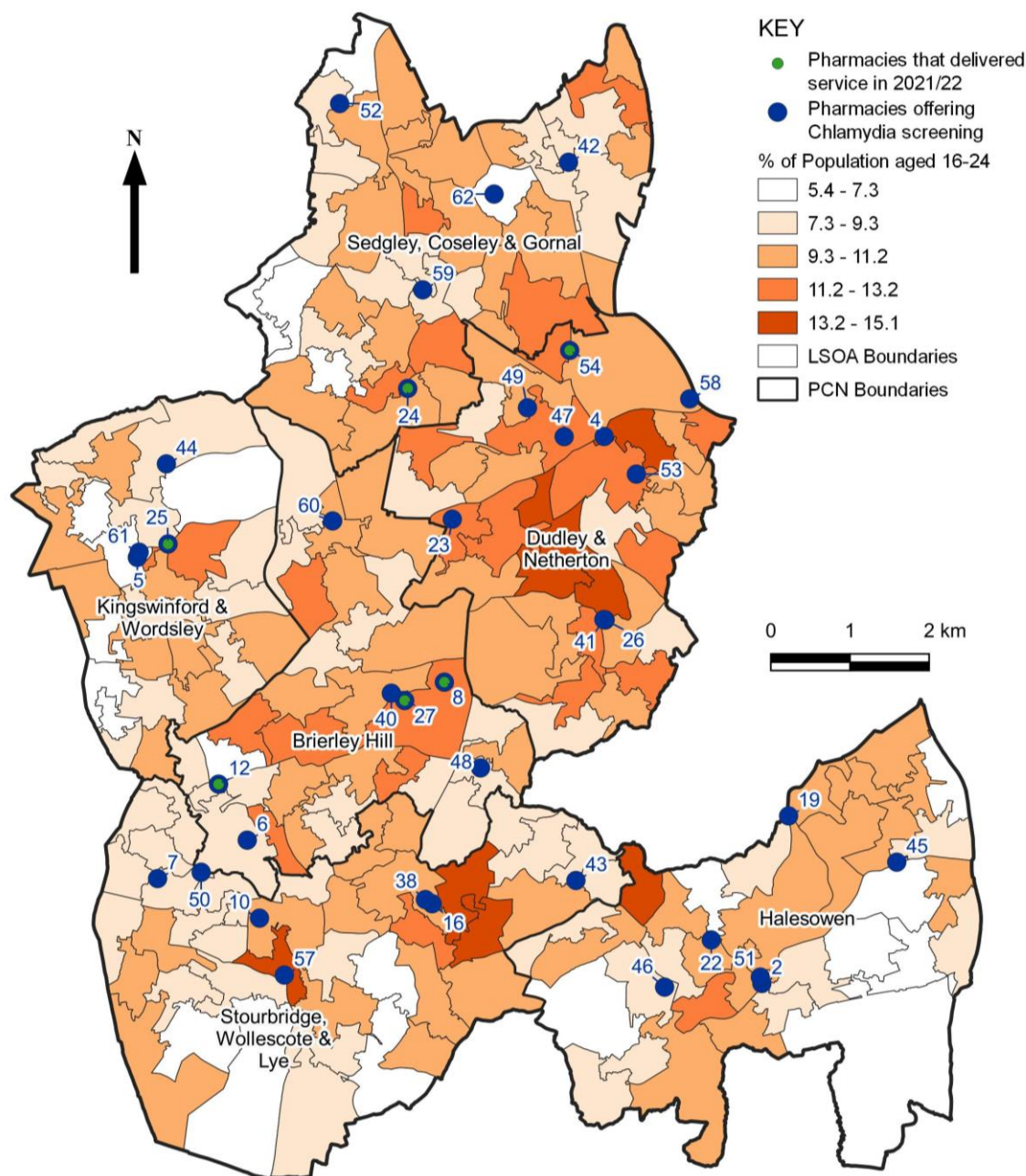
This service is for the distribution of screening kits by trained pharmacy staff and is commissioned by Dudley Council's Directorate of Public Health and Wellbeing Children and Young People's (CYP) Manager through Brook (the main local provider of CYP Sexual Health Services).

Chlamydia is the most common Sexually Transmitted infection (STI) in the UK with the prevalence of infection highest in young sexually active people aged 15–24 (PHE. 'Sexually Transmitted Infections and Screening for chlamydia in England: 2020 report') chlamydial infection has a high frequency of transmission as it is largely an asymptomatic infection. At least 50% men and 70% women display no symptoms (NICE 2021).

The English National Chlamydia Screening Programme (NCSP) was introduced in 2002. Following a comprehensive review in 2021, the principle aim of the English NCSP (Eighth Edition 2022) has been updated: to prevent the adverse consequences of untreated chlamydia infection with a focus on reducing reproductive harm of untreated infection in young women and other people with a womb or ovaries under the age of 25 (which includes transgender men, and non-binary people assigned female at birth, and intersex people with a womb or ovaries). Chlamydia impacts highly on reproductive health and can lead to serious and costly health problems including pelvic inflammatory disease, chronic pelvic pain, infertility, and ectopic pregnancy.

For the twelve month period to the end of March 2022, 38 Pharmacies were contracted to provide this service via the Brook CSP, however figures show that only six are active with 49 provisions or personal interactions (Figure 24). The local CSP is part of the ongoing sexual health review previously mentioned and therefore pharmacies should continue provision pending the outcome of the review.

**Figure 24:** Location of pharmacies offering chlamydia screening in Dudley (2021/22) and percentage of population aged 16 to 24 (2020) by LSOA



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / Directorate of Public Health & Wellbeing, Dudley MBC / PharmOutcomes / 2020 Mid-Year Population Estimates, ONS. Produced by: Intelligence Team, Dudley MBC. © Crown Copyright and database right 2022. Ordnance Survey 100019566.

Key to pharmacy ID number in appendix 1.

## **Assessment 12: Provision of Chlamydia Screening**

We conclude there is good geographical access for young women (and other people with a womb or ovaries\*) under the age of 25 to access a chlamydia screening service across the borough. However, a new female-only benchmark Diagnostic Rate Indicator of 3,250 per 1000 aged 15-24 (Female) is included in the Public Health Outcomes Framework from January 2022 and all pharmacies providing the EHC service are therefore encouraged to provide chlamydia screening to support increased case finding and timely treatment.

## **C-card Condom Scheme**

Pharmacies are contracted to provide this service via Brook who are commissioned by Dudley Council's Directorate of Public Health and Wellbeing. 16 pharmacies were contracted in 2021-2022 to deliver the c-card scheme. Activity is recorded on the Therapy Audit system provided by Brook and utilised by all c-card providers.

The c-card scheme is aimed at young people between 13-24-years-old who can register to get a range of free condoms, lube, dams, information and advice. The aim of the service is to promote reproductive and sexual health and help young people to access local services. Once registered a young person can access c-card services at any venue that is part of the scheme. With the highest rates of chlamydia amongst 15-24-year-olds, condom use should be promoted and encouraged with every sexual health intervention, linking to the pharmacy EHC provision and chlamydia screening programme.

## **Assessment 13: Provision of C-card Service**

In 2020 Brook provided c-card training for every pharmacy in the Dudley borough so that young people can access condoms and sexual health advice within their neighbourhood. During 2021-2022, only six pharmacies are active members of the scheme with some saying that Therapy Audit completion is time consuming. Each pharmacy has been issued with a QR code poster which considerably reduces time inputting, and it is hoped that this will result in increased activity. The c-card scheme is part of the current sexual health review. Dudley MBC Directorate of Public Health and Wellbeing will work with Dudley LPC to promote service uptake as appropriate following the current review of sexual health services within the borough.

## **Smoking Cessation Services & Nicotine Replacement Therapy (NRT) Vouchers**

For adults (defined as  $\geq 18$  years of age), the Let's Get Health Dudley Stop Smoking Service is provided by Solutions for Health Ltd (S4H) as part of the integrated adult wellness service within Dudley. Residents of Dudley borough, those who work within the borough and/or those registered with Black Country - Dudley Place general practices are able to access this service.

There are two levels of the smoking cessation pharmacy services for adults commissioned by S4H.

Provision of Nicotine Replacement Therapy (NRT) following behavioural support by accredited Let's Get Health Dudley stop smoking cessation advisers (S4H Stop Smoking Advisors provide support virtually and face to face in their venues and clinics). This involves intensive one to one support to smokers who want to quit and set a quit date, over a twelve week period (time variable depending on clients need – maximum 30 minutes) plus follow-up. Within Table 7, this is in reference to smoking cessation advice.

S4H provide PGD training to pharmacies for Champix® (non-proprietary name is varenicline) provision, although there have been national issues with Champix® supplies being made available which has resulted in pharmacies no longer providing this service. For more details of this supply disruption which begun in June 21, please visit [Champix out of stock 2021 \(ncsct.co.uk\)](http://ncsct.co.uk)

Dudley Public Health and Wellbeing also commission smoking cessation provision for under 18-year-olds and support during pregnancy.

For under 18-year-olds, school nurses complete an assessment of the young person in a school setting and a voucher is given to be exchanged at a participating pharmacy in borough. The pharmacy will exchange the voucher for NRT as dispensing any other prescribed medication. PharmOutcomes is used for recording and claims purposes. Cessation support is available from the school nurse for those in the school setting, for other young people aged 16-18 including in a college setting, they can access support from the Cranstoun Here4YOUth wellbeing service, they will also be provided with a voucher for NRT in the same way as the nurses. Here4YOUth will provide cessation support as they are the commissioned substance misuse provider for Dudley young people.

For pregnant women of all ages, S4H provide NRT for the woman and her partner, behavioural support for cessation is either provided by S4H or the Healthy Pregnancy Support Service staff.



**Table 7:** Pharmacy NRT voucher service provision by PCN, twelve months to 31/03/2022

	Brierley Hill (12)	Dudley & Netherton (11)	Halesowen (11)	Kingswinford & Wordsley (8)	Sedgley, Coseley & Gornal (10)	Stourbridge, Wollescote & Lye (11)
NRT Voucher scheme	3	3	5	0	3	2
Key:						
	Offered by 75% or more pharmacies within PCN					
	Offered by 25-75 % of pharmacies within PCN					
	Offered by less than 25% of pharmacies within PCN					

Source: PNA Contractor Questionnaire  
( ) = Number of pharmacies within each PCN

A map of Dudley with the locations of the pharmacies providing NRT voucher service is shown in figure 25 as well as smoking prevalence by ward. Table 7 identifies service provision by PCN for this necessary public health service. These demonstrates that there is limited access to the NRT voucher service across the borough for young people and pregnant individuals. However, due to significant changes within public health with smoking cessation services (transfer of commissioning responsibility from Dudley MBC to S4H), there is confusion amongst community pharmacy contractors for which NRT vouchers they are able to supply. Incidents of community pharmacy teams incorrectly rejecting service users (young persons and pregnancy) for provision of NRT (via voucher) have been reported into the commissioner delaying service availability. Dudley LPC, working in partnership with the Health & Wellbeing commissioning lead for children are advised to ensure confusion amongst contractors is resolved.

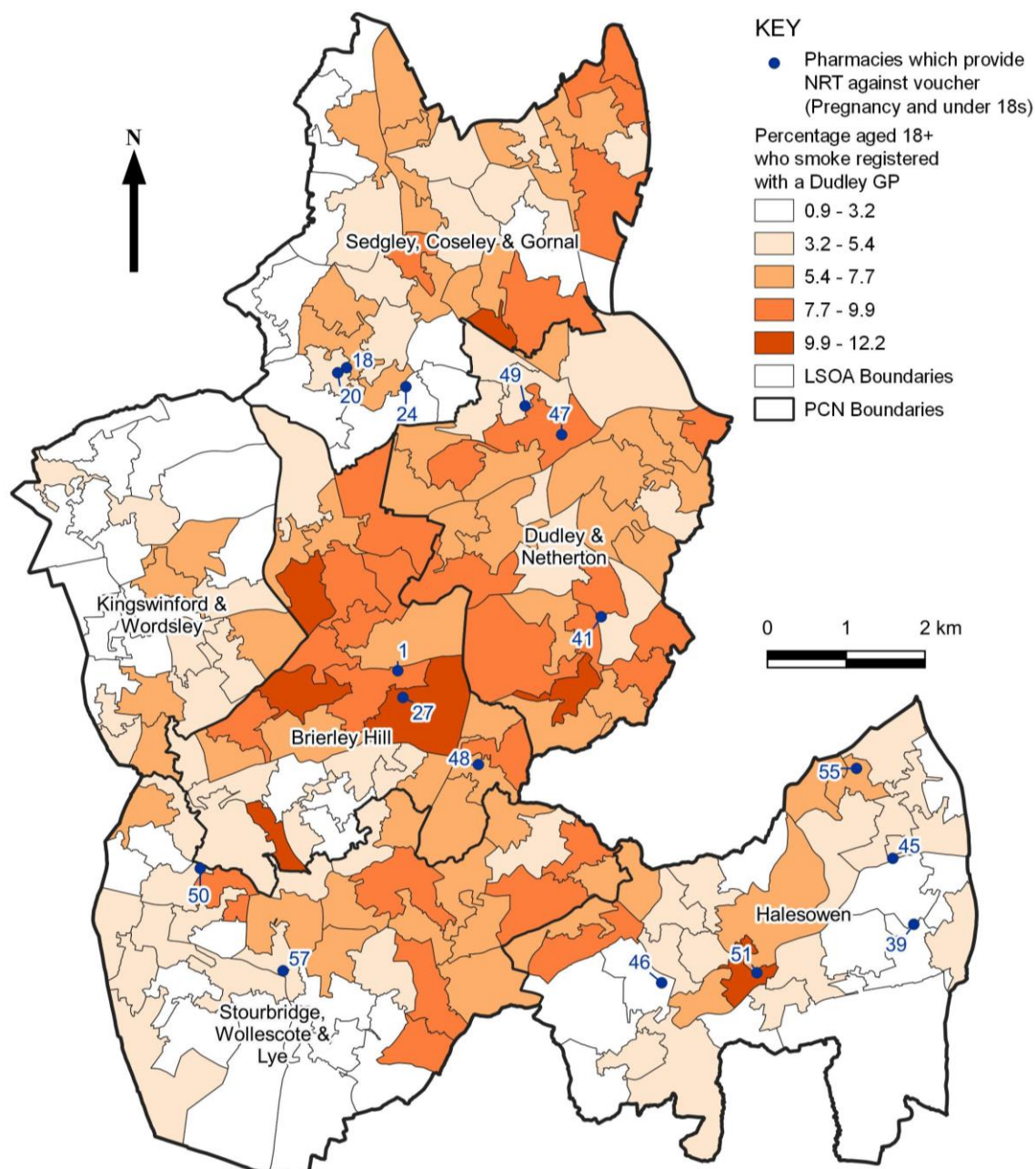
Data on file from the contractor questionnaire in spring 2022 determines willingness by community pharmacy contractors to deliver a Smoking cessation Service.

## Assessment 14: Smoking Cessation & NRT Voucher Service

It is recognised that an alternative provider (S4H) within Dudley delivers the main adult Smoking Cessation service. For under 18 year olds and pregnant females, the NRT Voucher Service across the borough is average, given that fewer than half of all pharmacies within each PCN deliver this service and within Kingswinford and Wordsley and Stourbridge, Wollescote and Lye PCNs access is poor. The service has low uptake, and the Directorate of Public Health and Wellbeing are working with the LPC to support pharmacy contractors to increase participation. Whilst there are gaps with service delivery, we conclude that willingness is there from existing pharmacy contractors to deliver this service. The commissioner is advised to ensure service uptake is targeted in the two PCNs where access is particularly poor.



**Figure 25:** Location of pharmacies offering a Smoking Cessation service (NRT Voucher Scheme) in Dudley (2021/22) and the percentage of people aged 18+ who smoke registered with a Dudley GP (as at 31/03/2022) by LSOA



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / PNA Contractor Questionnaire / GP data, EMIS.  
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See appendix 1 for a key to the pharmacy ID numbers

## Substance Misuse Services

The community pharmacy substance misuse services are commissioned by Change, Grow and Live (CGL), formerly known as Crime Reduction Initiatives (CRI), on behalf of the Directorate of Public Health and Wellbeing, Dudley MBC. CGL is a registered charity which provides a range of community and specialist services including drug and alcohol services across the UK. Table 8 shows the activity for twelve months to March 2022 of substance misuse services in pharmacies within Dudley by PCN.

**Table 8:** Pharmacy substance misuse provision by PCN, twelve months to 31/03/2022

Substance Misuse services	Brierley Hill (12)	Dudley & Netherton (11)	Halesowen (11)	Kingswinford & Wordsley (8)	Sedgley, Coseley & Gornal (10)	Stourbridge, Wollescote & Lye (11)
Supervised consumption service	6	10	7	5	7	6
Needle exchange and Naloxone service	2	4	1	1	2	3
Key:						
	Offered by 75% or more pharmacies within PCN					
	Offered by 25-75 % of pharmacies within PCN					
	Offered by less than 25% of pharmacies within PCN					

Source: CGL

( ) = Number of pharmacies within each PCN

## Supervised consumption

Participating pharmacists can provide instalment dispensing and supervised administration of controlled substances, methadone and buprenorphine (Subutex®/Suboxone®), to individuals in the course of their drug treatment. Clear channels of communication with the key worker, care co-ordinator, prescriber and pharmacist, are part of the shared care arrangements. Clients of community pharmacy dispensing programmes are dependent drug users or others assessed as requiring symptomatic treatment for drug related problems.

The provision of supervised administration of medication for drug users in the Dudley Borough is an essential element of a client's treatment journey. As set out in NICE guidelines (National Collaborating Centre for Mental Health, 2008) all new clients, for safe clinical governance reasons, should receive supervised administration of medication in order to establish a level of stability that will contribute to the client's

recovery. Supervised administration of medication ensures that the client is in contact on a daily basis with a healthcare professional, at a time when they are possibly most at risk.

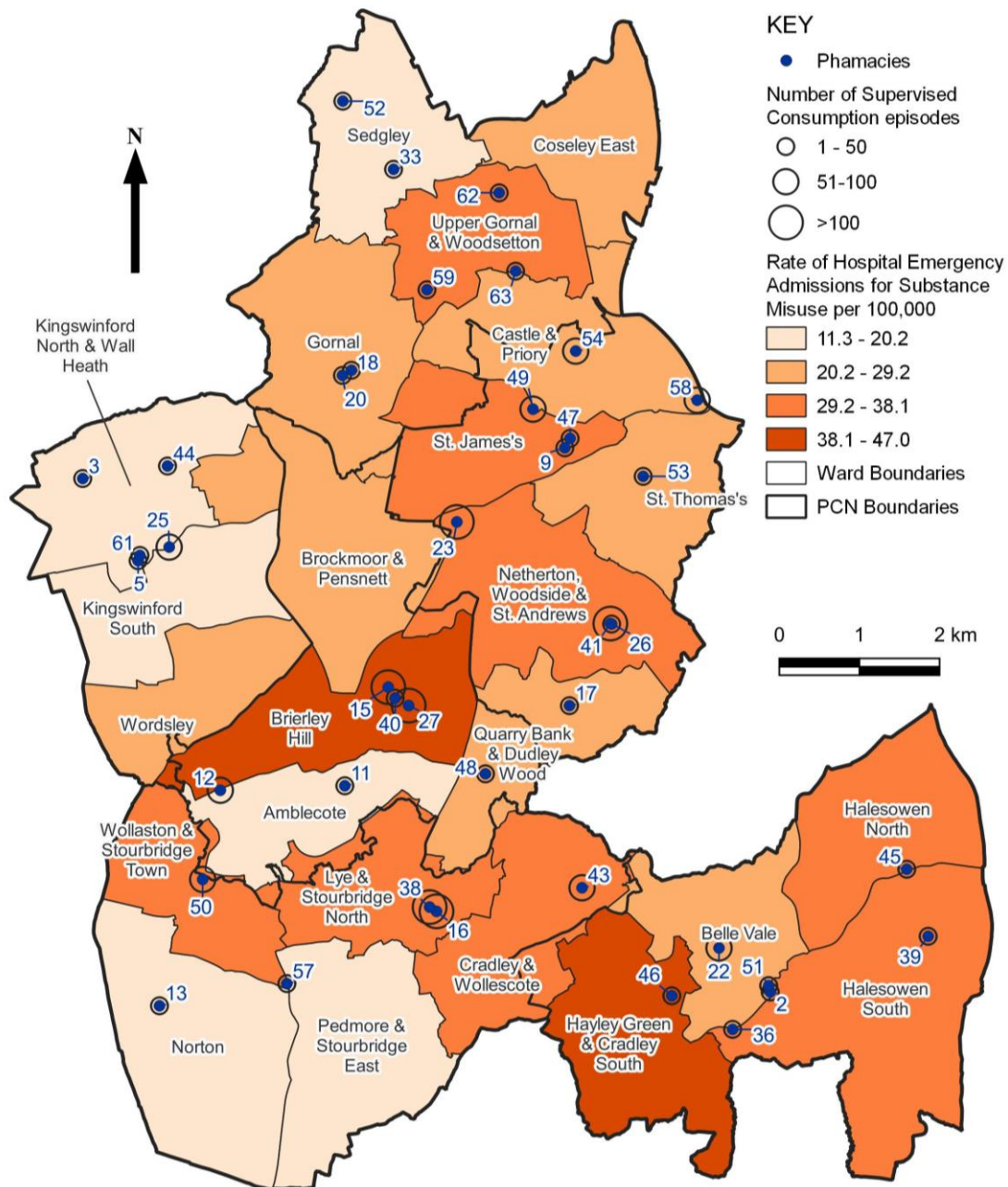
41 community pharmacies provided instalment dispensing and a supervised consumption treatment service during the period of twelve months to March 2022 (Figure 26). This demonstrates good access to a supervised consumption service for those areas with greatest need. Each of these pharmacies will have the appropriate facilities for supervised consumption/self-administration to maintain privacy for the patient/client.

There is good pharmacy provision in each PCN. There is no current minimum or maximum number of clients per pharmacy, and the placement of clients will be based on client preference and pharmacy availability. The maximum number of patients the pharmacy will offer to dispense for is to be agreed with the Commissioning Manager at CGL. Patients may be unable to have their prescription dispensed at the pharmacy of their choice and pharmacists will suggest alternative pharmacies in the local area. No gaps have been identified. CGL state that the number of pharmacies commissioned to provide this service reflects local need and resources.

## **Assessment 15: Supervised consumption services**

We conclude that current community pharmacy contractors provide good service provision and coverage across all six PCNs. No gaps have been identified in service provision.

**Figure 26:** Location of pharmacies offering a supervised consumption service in Dudley (2021/22) and rate of Hospital Emergency Admissions for Drug Misuse per 100,000 population (2017/18 to 2021/22) by Ward



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / Change Grow Live (CGL)  
 Produced by: Intelligence Team, Dudley MBC  
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Key to pharmacy ID numbers in appendix 1

## **Needle Exchange Service**

Needle Exchange Services (NES) are an important aspect of harm reduction and preventing the spread of blood borne viruses (BBV), this is particularly relevant in Dudley with its history of high injecting drug use. During the year to March 2022, thirteen pharmacies provide NES within the borough (Figure 27), in addition to the service provided from Atlantic House in Lye (main provider of substance misuse services within Dudley).

The areas with the most discarded needle locations were found in Halesowen, Stourbridge, Wollaston and Lye and Brierley Hill. Figure 27 shows that there are pharmacies providing a needle exchange service within these PCNs.

Naloxone is an emergency antidote for opiate overdose and is provided by all pharmacies offering the needle exchange service to service users. This is an additional service that has been commissioned by the substance misuse provider since the last PNA.

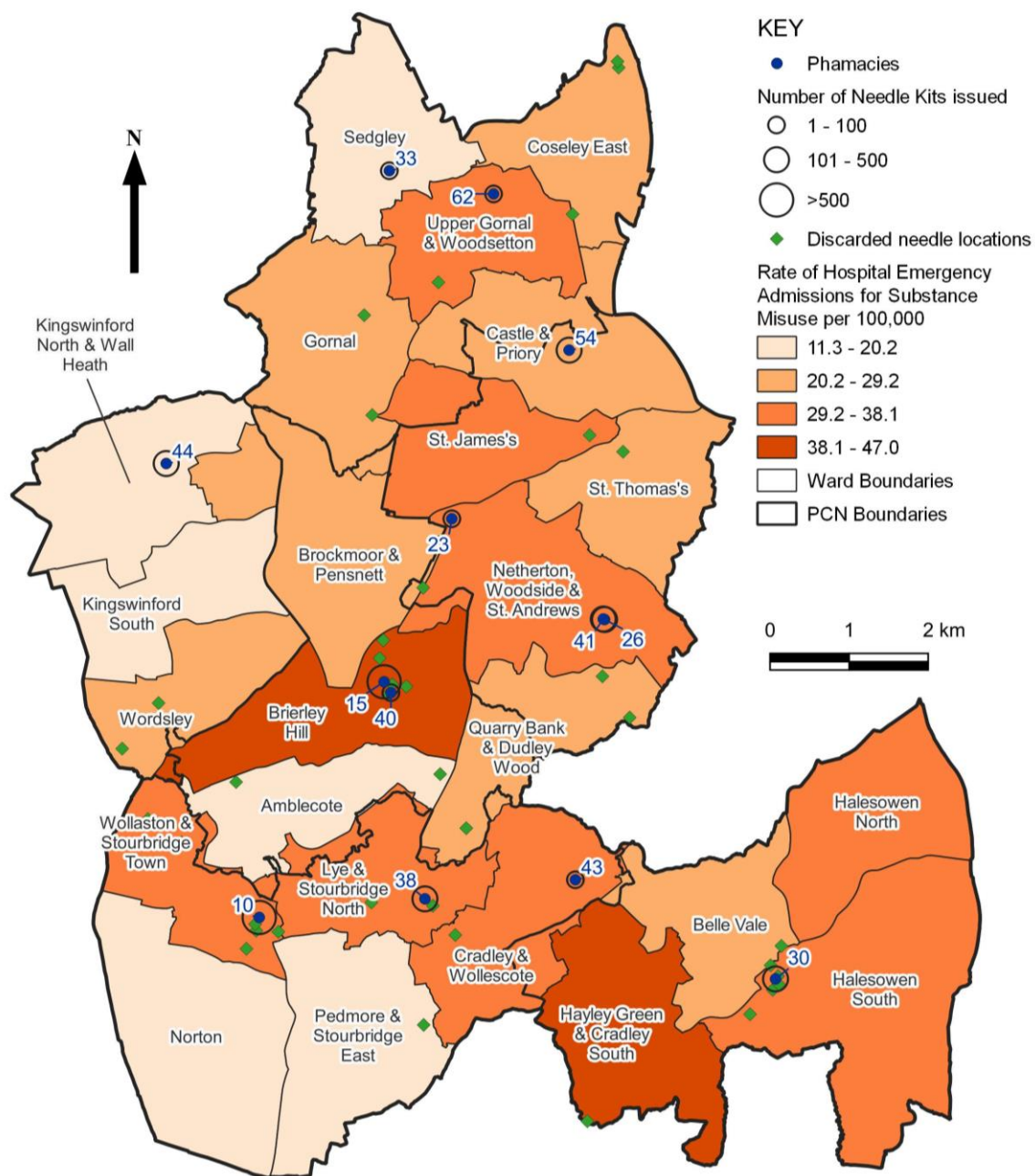
Community pharmacy is well placed to support harm reduction for those service users who may not be engaged with substance misuse services.

## **Assessment 16: Needle Exchange Services**

We conclude there is good access for both Needle exchange and naloxone services across the borough within those areas of greatest discarded needles located. Gaps for NES have been identified within wards such as Wordsley, St James and St Thomas based on needle finds. Many service users will also utilise the main provider (CGL, Atlantic House in Lye) to access NES and Naloxone. We further conclude that those community pharmacy contractors already providing instalment dispensing and supervised administration services of controlled substances are well placed and willing to provide this service if CGL wish to commission it within their resource envelope. Consideration should be given to targeting access within Wordsley, St James and St Thomas wards within the borough of Dudley.



**Figure 27:** Location of pharmacies offering needle exchange and Naloxone services in Dudley (2021/22), discarded needle locations (2021/22) and rate of Hospital Emergency Admissions for Drug Misuse per 100,000 population (2017/18 to 2021/22) by Ward



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / Change Grow Live (CGL) / Street Cleansing Team, Dudley MBC. Produced by: Intelligence Team, Dudley MBC  
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Key to pharmacy ID number in appendix 1

## **Alcohol Screening and Brief Intervention**

This service is commissioned by the Public Health Manager for substance misuse. The service for community pharmacy is commissioned alongside a service for several optical practices within the borough.

The Alcohol Misuse – A Needs Assessment for Dudley 2012 reports that tackling the impact of alcohol misuse in Dudley is a priority for all of the statutory agencies and our voluntary sector partners. The health impacts of alcohol within Dudley are demonstrated by higher than regional and national rates of premature alcohol mortality and higher than expected rates of alcohol related admissions to hospital, especially emergency admissions.

Within the context of services to prevent or treat alcohol related problems, the terms alcohol screening and brief intervention, include all practices used to identify real or potential alcohol problems, and motivate individuals to take positive action to promote their own health.

There are five elements to this commissioned service, subject to pharmacy staff accreditation:

### **1) Identification**

Using defined criteria (see below), patient walking into a participating Dudley Pharmacy or Optical practice will be offered screening using the AUDIT alcohol assessment tool (Alcohol Usage Disorder Identification Test, WHO 1982). Defined Criteria for Screening include:

- Any patient that the Pharmacist / trained staff member identifies as needing advice/support around alcohol use.
- Any patient that has not completed AUDIT in the last twelve months.
- Vulnerable groups: Females and Males aged 18 – 30 years; Black and Racial Minority Groups (BRM) all age groups; males and females aged over 65 years; Homeless people; and Diabetics.
- Patients presenting frequently with symptoms which may be associated with alcohol misuse.
- Patients identified during a Medication Use Review (MUR), New Medicine Service (NMS) or through participation within another public health service.

### **2) Screening**

The trained staff member will undertake AUDIT with the patient. The AUDIT score and number of units consumed per week plus patient details are tracked on PharmOutcomes (IT software tool).

### **3) Brief Intervention**

If the score determines that the patient scores 7 or below (low risk drinker), then the patient receives a information explaining their alcohol levels are within safe limits.

Scoring 8 to 15 (includes hazardous drinking category), the trained staff member carries out a brief intervention which includes:

- Explanation of daily benchmarks
- What is a unit of alcohol
- Explanation of category of drinker
- Explanation on safer drinking

### **4) Follow-up**

Those patients having scored 8 or more (hazardous drinking category), should be contacted using three follow-up questions after four weeks to determine behaviour change.

### **5) Referral**

If a patient scores 16 or more (harmful or dependent drinking category) then an appropriate referral (subject to client consent) is made to the specialist alcohol treatment service (CGL) commissioned by Health & Wellbeing.

Brief interventions usually last between three to five minutes and help one in eight people at risk of an alcohol use disorder reduce their drinking to a low level of risk (Department of Health, 2008b).

There has been a reduction in activity during the pandemic, training is recommencing for alcohol IBA and there has been an increase in screening uptake in recent months, especially during dry January 2022.

In recent years, Dudley community pharmacies have improved uptake of AUDIT screening through public health promotional campaigns (i.e. poster displays in windows, alcohol awareness campaigns etc.), supporting conversations about alcohol through other services and the prominent display and supply of alcohol screening scratch cards within pharmacies encouraging patients to self-assess their alcohol intake. Some Dudley pharmacies also provide outreach work within target populations of alcohol misuse such as for young people in colleges, schools and the main shopping centres (i.e. Merry Hill, Stourbridge and Halesowen).

Figure 28 shows the Narrow Alcohol-related Admissions for the period 2019-2021 mapped against service activity from community pharmacies for. The narrow measure considers where the primary diagnosis is an alcohol-attributable code, or a secondary diagnosis is an alcohol-attributable external cause code (Public Health England, 2017).



34 pharmacies fulfil the following accreditation criteria to provide alcohol brief interventions and screening in Dudley:

- staff attendance at Alcohol Identification and Brief Advice training session delivered by Dudley Council Directorate of Public Health and Wellbeing.
- availability of consultation room in keeping with standards for advanced services

21 of the accredited pharmacies delivered activity (defined as those pharmacies indicating they provide this service in the Pharmaceutical Contractor Questionnaire for Alcohol Identification and Brief Intervention during the twelve month period to March 2022 (table 9 and figure 28). This demonstrates that access to this desirable service through community pharmacy needs to be improved to benefit the health and wellbeing of the population. Gaps in service provision exist within areas of greatest need. Barriers to providing this service include busy workloads within pharmacies with respect to core essential services (existing capacity), lack of confidence in service delivery (training need) and recent re-organisational change within public health has resulted in key staff roles driving this service becoming redundant.

**Table 9:** Pharmacy alcohol screening and brief intervention service provision by PCN, twelve months to 31/03/2022

	Brierley Hill (12)	Dudley & Netherton (11)	Halesowen (11)	Kingswinford & Wordsley (8)	Sedgley, Coseley & Gornal (10)	Stourbridge, Wollescote & Lye (11)
Alcohol Screening and Brief Intervention	6	5	5	1	2	2
Key:						
	Offered by 75% or more pharmacies within PCN					
	Offered by 25-75 % of pharmacies within PCN					
	Offered by less than 25% of pharmacies within PCN					

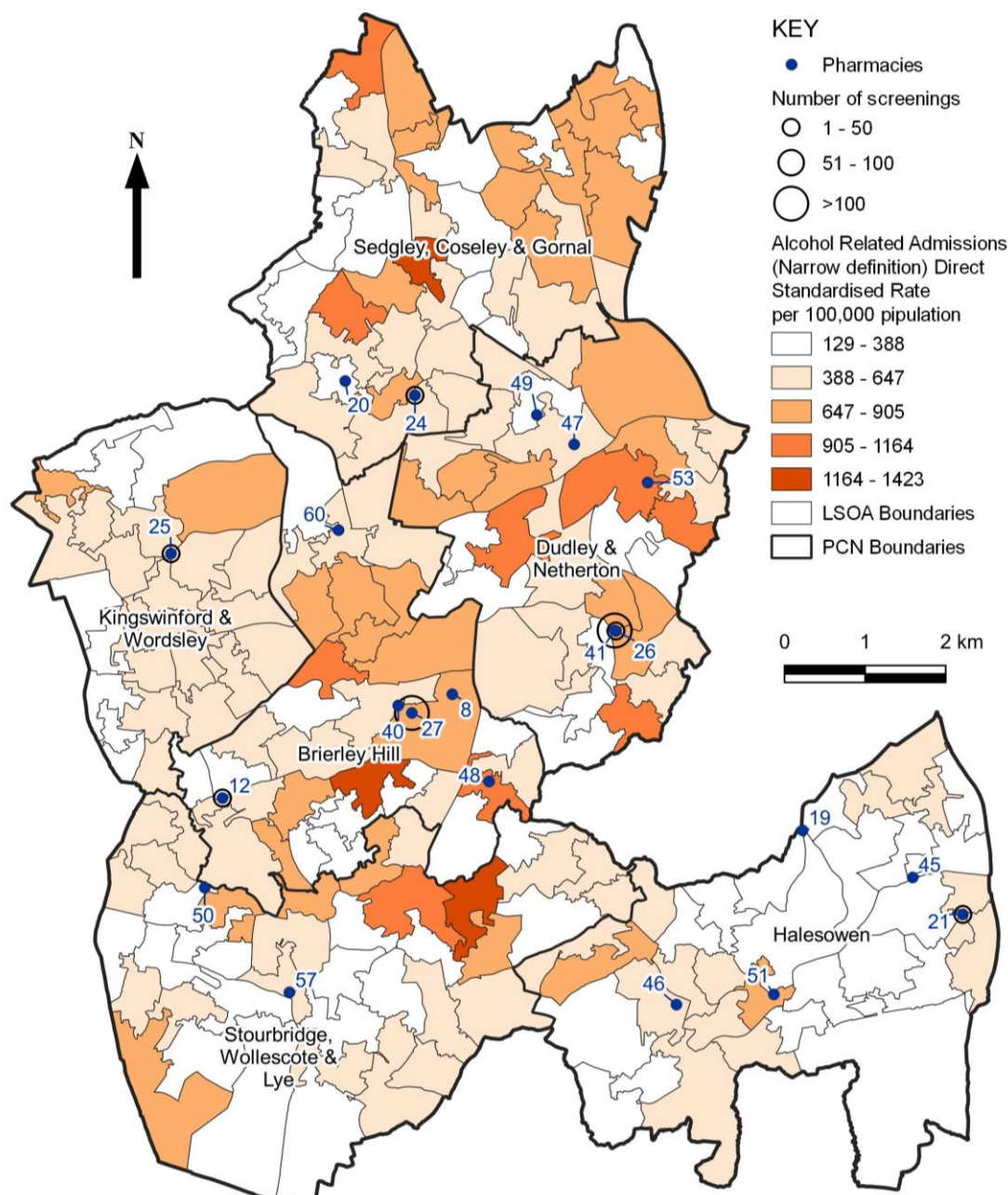
Source: Claims submitted to the Directorate of Public Health and Wellbeing, Dudley MBC / PNA Contractor Questionnaire

( ) = Number of pharmacies within each PCN

## Assessment 17: Provision of Alcohol Screening and Brief Intervention

We conclude that gaps exist with access to this service particularly in some PCNs with the lowest provision (Kingswinford & Wordsley, Sedgley, Coseley & Gornal & Stourbridge, Wollescote & Lye). However, we further conclude that there are sufficient existing contractors within these gaps willing to deliver this service. Dudley Council Directorate of Public Health and Wellbeing will need to work with Dudley LPC and existing contractors to provide an equitable service for all patients irrespective of which community pharmacy they regularly use.

**Figure 28:** Location of pharmacies offering Alcohol Screening and Brief Interventions in Dudley and the rate of Alcohol Related (Narrow) Hospital Admissions per 100,000 (2019-21) by LSOA



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / Directorate of Public Health and Wellbeing, Dudley MBC / PNA Contractor Questionnaire / Secondary Uses Service. Produced by: Intelligence Team, Dudley MBC. © Crown Copyright and database right 2022. Ordnance Survey 100019566.

Key to pharmacy ID numbers in appendix 1

## NHS Health Checks

The NHS Health Checks is a national mandated public health service, commissioned by local authorities, for the purpose of identifying and supporting patients with risk factors for a range of common long term conditions including cardiovascular disease. In Dudley, a range of providers including pharmacies, optometrists and the adult wellness service are able to undertake NHS Health Checks through the majority are delivered through primary care. Collectively cardiovascular disease affects over six million people in England and kills over 38,000 people under the age of 75 each year ([British Heart Foundation](#)). It also accounts for a large portion of the mortality gap between the most affluent and most deprived groups. Having one vascular condition also increases the likelihood of developing others.

A number of risk factors lies behind most cardiovascular disease. Some are called “fixed factors” because they can’t be changed. Damage to the cardiovascular system increases with age, and progresses faster in men than women, in those with a family history of cardiovascular disease and in some ethnic groups. Importantly however, the rate at which cardiovascular damage progresses is also determined by “modifiable factors”, i.e. factors which can be altered. Early intervention to reduce risk can prevent, delay, and, in some circumstances, reverse the onset of vascular disease. These modifiable factors include:

- smoking
- physical inactivity and a sedentary lifestyle
- unhealthy diet and obesity
- high blood pressure
- raised cholesterol levels
- impaired glucose regulation (higher than normal blood glucose levels, but not as high as in diabetes).

The national NHS Health Checks program invites everyone between the ages of 40 and 74 who does not have existing cardiovascular disease to have a comprehensive vascular risk assessment once every five years, with the offer of personalised advice and treatment and individually tailored management to help individuals manage any identified risks more effectively. It has the potential to make a significant contribution to identifying and reducing undiagnosed disease within Dudley, including diabetes, chronic kidney disease (CKD), stroke and transient ischemic attacks (TIA), and undiagnosed hypertension. Approximately 82,000 people in Dudley are eligible for invitation over the five year cycle. Between 2013 and 2018 around 72% of the eligible population accepted the invitation of an NHS Health Check, placing Dudley amongst the best performing local authorities in England. However, uptake has not been evenly distributed across the borough but has often been higher in less disadvantaged areas and communities that traditionally engage less with preventative services have tended to be left behind.

Pharmacies began to offer NHS Health Checks in Dudley from 2012, generally on an opportunistic basis. To minimise inconvenience to patients, pharmacies that offer NHS Health Checks have been provided with point of care test (POCT) machines that do a pin prick blood test to measure cholesterol, avoiding the need for the patient to attend for a separate blood test elsewhere. A quiet consultation room is also required. Dudley Council Public Health has provided ongoing staff training and robust quality assurance of the program and equipment.

Whilst pharmacies potentially offer an additional element of choice and convenience for patients, NHS health Checks can take up to 30 minutes to complete and in practice can be difficult to offer opportunistically. A further practical limitation is the need for manual transcription of reported findings in primary care if the outputs are to be entered into patient's clinical record.

**Table 10:** Pharmacy public health NHS Health Checks service provision by PCN, twelve months to 31/03/2022

	<b>Brierley Hill (12)</b>	<b>Dudley &amp; Netherton (11)</b>	<b>Halesowen (11)</b>	<b>Kingswinford &amp; Wordsley (8)</b>	<b>Sedgley, Coseley &amp; Gornal (10)</b>	<b>Stourbridge, Wollescote &amp; Lye (11)</b>
NHS Health Checks	5	4	4	1	5	6
Key:						
	Offered by 75% or more pharmacies within PCN					
	Offered by 25-75 % of pharmacies within PCN					
	Offered by less than 25% of pharmacies within PCN					

Source: Claims submitted to the Directorate of Public Health and Wellbeing, Dudley MBC / Pharmacies registered to provide NHS Health Checks  
( ) = Number of pharmacies within each PCN

25 pharmacies (data from PharmOutcomes) in Dudley were accredited to deliver the NHS health checks service as of April 2022 (Figure 29). However, the national program was effectively suspended in March 2020 for two years due to the COVID-19 pandemic and during this time only one pharmacy undertook any NHS Health Checks. In December 2021, the Government published a national review of the program with a number of significant changes in the recommendations once the national suspension was lifted. These include

- 1) There should be a much greater linkage to other lifestyle services in integrated care systems with an emphasis on behaviour change.
- 2) Given the potential for the program to widen health inequalities, there should be a greater emphasis on improving access to more vulnerable and

deprived populations, learning from successes with the COVID-19 vaccination program.

- 3) The program should start younger, reaching 30-39-year-olds too (though the report offered no advice on how this should be funded).
- 4) There should be a digital offer, developed nationally, for lower risk patients and those who are more digitally literate or would prefer such an approach.
- 5) An evidence-based approach should be taken to widen the conditions considered by the program (for instance mental health and musculoskeletal conditions)
- 6) The revised program should be rigorously evaluated and subject to ongoing learning.

As pandemic pressures have gradually eased, organisations are beginning to restart NHS Health Checks. However, this is being done gradually in view of sustained health service pressure to enable organisations to develop capacity again. At the time of publication of the 2022 PNA no pharmacy in Dudley is actively being commissioned to deliver NHS Health Checks as the program delivery model is being reviewed to take account of the recommendations in the national review. However, pharmacies are well placed to support the program in a modified form in future.

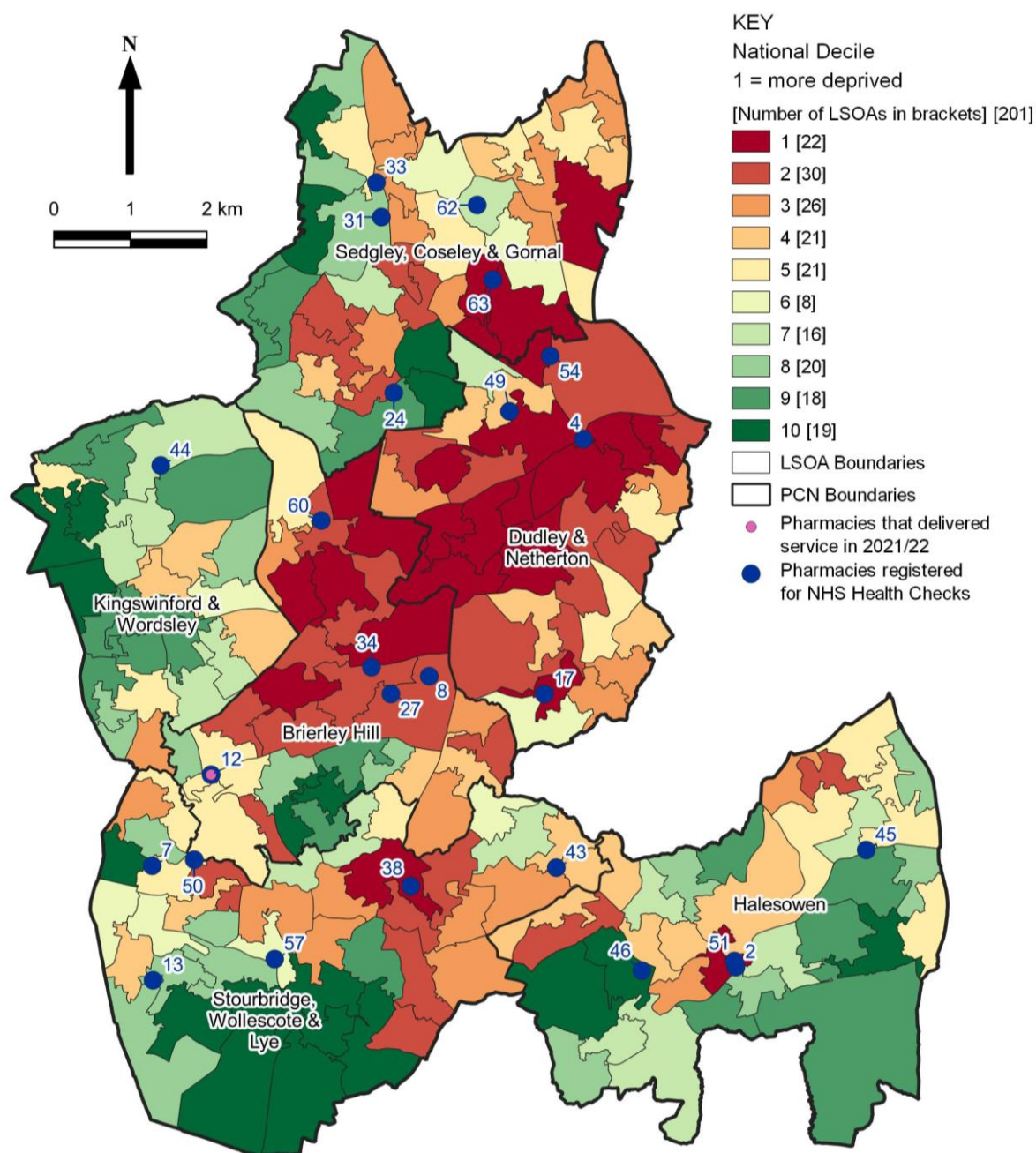
## **Assessment 18: NHS Health Checks**

A temporary pause has been placed on NHS Health Checks in pharmacies during and following the COVID-19 pandemic to allow time to develop a new model of care that incorporates the recommendations from the national review.

We conclude that pharmacies are well placed to support some of the new elements of the program and have historically been a helpful adjunct to a service that is predominantly delivered through primary care. Improving access to NHS Health Checks in more deprived areas of the borough to narrow the life expectancy gap remains a priority, though there are a number of other contractors delivering NHS Health Checks in these areas.



**Figure 29:** Location of pharmacies registered to provide NHS Health Checks Service in Dudley and Index of Multiple Deprivation 2019 National Deciles



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / Indices of Deprivation 2019, MHCLG / Directorate of Public Health & Wellbeing, Dudley MBC. Produced by: Intelligence Team, Dudley MBC  
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Key to pharmacy ID numbers in appendix 1.

## Healthy Start Vitamins

This service is commissioned by the Directorate of Public Health and Wellbeing, Dudley MBC.

- 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 ten weeks pregnant and families with children under four years old (referred to as *Healthy Start beneficiaries*) qualify for Healthy Start if they receive Universal credit and their family's monthly 'take-home pay for this period' is £408 or less from employment
- Child Tax Credit and the family's annual income is £16,190 or less
- Income Support
- Income-based Jobseeker's Allowance
- Pension Credit (which includes the child addition)
- Working Tax Credit run-on (paid for four weeks if your working hours, or your partner or carer's, go to less than 16 hours per week)
- income-related Employment and Support Allowance (ESA)

Women under 18 years old who are not receiving any benefits, and people with no recourse to public funds who have a British child aged under four years also qualify.

The scheme consists of two elements. Funds are loaded onto a Healthy Start smart card which can be used in shops that accept Mastercard payments. £4.25 is paid each week of pregnancy from the tenth week of pregnancy, then £8.50 each week for children from birth to one year old, and £4.25 each week for children between one and four years old or until qualifying eligibility benefits end, whichever is sooner. The card can be used to purchase cows' milk, formula milk, fresh, frozen or tinned fruit and vegetables and fresh, dried or tinned pulses.

In addition, pregnant women, women with a child under one year old and children aged up to four years old who have a Healthy Start smart card can also get free vitamins with their card. Children take five vitamins drops per day, comprising 233 micrograms of vitamin A, 20 milligrams of vitamin C and 10 micrograms of vitamin D3. Women take one tablet per day, comprising 70 milligrams of vitamin C, 10 micrograms of vitamin D and 400 micrograms of folic acid. They are suitable for vegetarians and are free from wheat, fish, egg, salt, colouring, flavours, preservatives and gluten.

Healthy Start vitamins are important because:

- 8% of children under five in the UK do not have enough vitamin A in their diet (Scientific Advisory Committee on Nutrition, 2008)
- families in lower-income groups tend to have less vitamin C in their diet (Scientific Advisory Committee on Nutrition, 2008)

- all pregnant and breastfeeding women and young children are at risk of vitamin D deficiency (Scientific Advisory Committee on Nutrition, 2007). Teenagers, younger women and those from ethnic minorities are particularly at risk.

A priority for the Department of Health is to improve access to Healthy Start vitamins by increasing the number of outlets where they are available, not just for Healthy Start beneficiaries, but also the population identified as being at risk and potentially able to benefit from vitamin supplementation. Dudley MBC Directorate of Public Health and Wellbeing commissioned this service from community pharmacists to improve local access to Healthy Start vitamins with the aim of improving uptake for our Healthy Start beneficiaries within Dudley as well as others within the population identified as at-risk whom may benefit from vitamin supplementation (at their own cost).

This service aligns to our vision for “*all children in Dudley borough to have the best start in life, investing in the first 1001 days*”.

The scheme recently moved away from paper vouchers to a smart card, and uptake has dropped nationally as old paper voucher claimants needed to reapply for the new card scheme which has led to ongoing issues. Dudley’s uptake for the healthy start scheme was 33% as at the end of March 2022. This compares to 59% at the end of March 2021.

The current offer has been reduced from around 30 pharmacies offering vitamins, initially to 11 (Figure 30) and was then further reduced to seven in 2021. This decision was based on the amount of activity and wasted stock with the seven best performing sites in each area retained to ensure people could still access vitamins locally, the seven sites are:

- ASDA Halesowen, Queensway, Halesowen B63 4AB
- Gornal Wood Pharmacy, 18 Abbey Rd, Gornal Wood DY3 2PG
- Morrisons Pharmacy, Charterfield Shopping Centre, Stallings Lane, Kingswinford, DY6 7SH
- Murrays Pharmacy, 57 Queensway, Halesowen B63 4AG
- Priory Community Pharmacy, 95-97 Priory Rd, Dudley DY1 4EH
- Tesco, Birmingham Rd, Dudley DY1 4RP
- Village Pharmacy, 9 Market St, Kingswinford DY6 9JS



**Table 11:** Pharmacy Healthy Start Vitamins service activity by PCN, twelve months to 31/03/2022

	Brierley Hill (12)	Dudley & Netherton (11)	Halesowen (11)	Kingswinford & Wordsley (8)	Sedgley, Coseley & Gornal (10)	Stourbridge, Wollescote & Lye (11)
Healthy Start Vitamins	3*	2	2	2	1	1*
Key:						
	Provided by 75% or more pharmacies within PCN					
	Provided by 25-75 % of pharmacies within PCN					
	Provided by less than 25% of pharmacies within PCN					

Source: Claims submitted to the Directorate of Public Health and Wellbeing, Dudley MBC

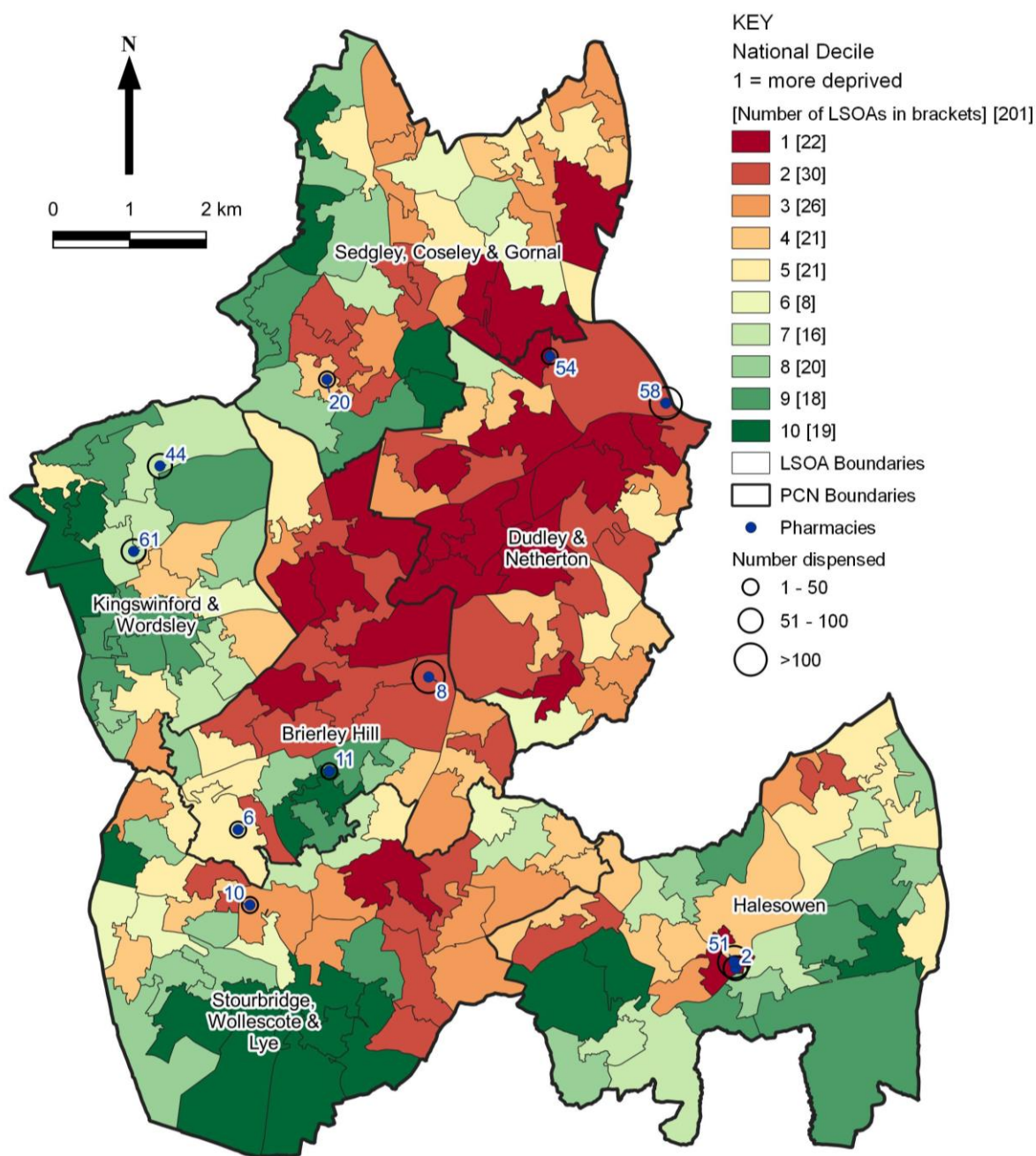
( ) = Number of pharmacies within each PCN

From April 2022, four Boots Pharmacies have terminated (Pharmacy IDs 6,8,10 & 11; see appendix 1)

## Assessment 19: Healthy Start Vitamins

We conclude that access to this service is poor within Dudley, particularly in Dudley and Netherton PCN which is one of the areas of greatest deprivation and the greatest health need. We further conclude that Public Health and Wellbeing will identify pharmacy contractors within areas of high need and work with them to support greater access for our population. However, this will first require improvement of the factors that have caused fewer people to take up the service since changing to smart cards to be addressed nationally. Until then, there is a risk that those who would benefit most from the service will continue to find it the least accessible.

**Figure 30:** Location of pharmacies providing Healthy Start Vitamins Service in Dudley (2021/22) and Index of Multiple Deprivation 2019 National Deciles



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / Indices of Deprivation 2019, MHCLG / Directorate of Public Health & Wellbeing, Dudley MBC. Produced by: Intelligence Team, Dudley MBC  
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Key to pharmacy ID numbers in appendix 1.

## **Pharmacy provision of COVID-19 Lateral Flow Devices**

The winter of 2020-21 was one of the most challenging periods of the COVID-19 for Dudley, with rates peaking at amongst the highest seen in England at one point. As soon as lateral flow device (LFD) testing became available in November 2020, pharmacies in the borough and Dudley MBC Directorate of Public Health and Wellbeing recognised the opportunity they afforded to promote widescale and accessible testing to help reduce community transmission.

Faced with the need to rapidly expand coverage of testing venues across the borough and knowing that pharmacies are trusted by and located in the heart of some of our most disadvantaged communities, the Directorate of Public Health and Wellbeing worked collaboratively with the local pharmaceutical committee (LPC) and its provider company, *Central Health Solutions* to design, pilot and implement an effective testing programme based in pharmacies. Within a week of inviting pharmacies to express an interest a third had indicated willingness to participate.

This pharmacy LFD testing model saw selected pharmacies across the borough offer pre-booked COVID-19 tests for people with no symptoms. From the beginning of the service in December 2020 until 31<sup>st</sup> March 2022, the 32 pharmacies that signed up to the project delivered more than 34,000 supervised LFD tests. The model proved flexible enough to support pop-up testing centres in venues including colleges, a primary school and places of worship during localised outbreaks

Dudley was the first local authority in England to utilise pharmacies to provide asymptomatic LFD testing and this flexible model has been highlighted by the Government as an exemplar model and shared with many other areas. This approach has been recognised nationally for its positive impact and demonstration of partnership working during the pandemic by being shortlisted as one of the finalists at the Local Government Association (LGA) Awards later in 2021.

Although thanks to the success of the vaccination program the impact of COVID-19 has been greatly mitigated and pharmacies no longer need to provide a LFD testing service, the success of the scheme in Dudley clearly demonstrates how pharmacies can quickly step up during a public health emergency to serve their local communities in innovative ways.

## **Pharmacy provision of COVID-19 Vaccinations**

Since the start of 2021 pharmacies in Dudley have made a significant contribution to support the national vaccination program against COVID-19. In some cases, pharmacies have been directly providing vaccinations in the pharmacy, whilst elsewhere they have provided pharmacy staff to work off site and assist in other vaccination centres including community centres and places of worship. Pharmacies provided vital additional capacity to bolster the service established in primary care and

mass vaccination centres. This allowed greater choice and access for patients within their local communities. Pharmacy sites also were able to provide COVID-19 vaccination cover during weekends, further improving accessibility to the population. This collective effort resulted in overall higher vaccination rates in Dudley than would otherwise have been.

Pharmacies provided vaccination services to nationally agreed standards. The vaccines offered were often determined by what was being distributed centrally but pharmacies were accredited to offer all available COVID-19 vaccines.

The locations and selected pharmacies have changed over time to reflect the changing requirements of the program (Figure 31) but were able to be stood up very quickly when needed. As of June 2022, several pharmacies continue to provide vaccinations with capacity to expand the service across multiple locations should this be required for subsequent booster campaigns.

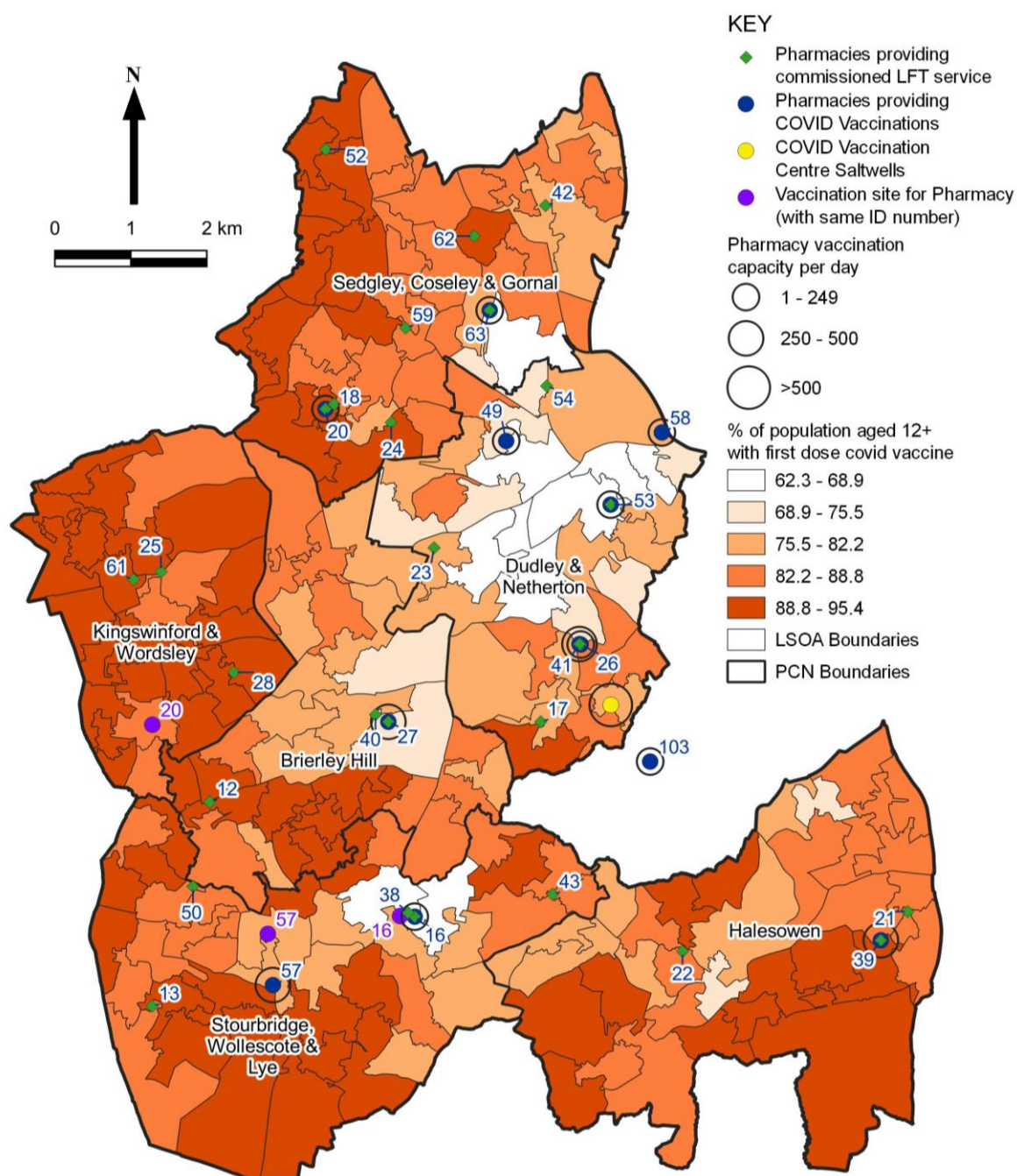
## **Assessment 20: Pharmacy support for COVID-19 services**

We conclude that although by June 2022 the need for LFD testing and vaccination in pharmacies had greatly reduced compared to during the peak of infections, Dudley has proved to be well served by pharmacies that continue to offer, as part of a wider service in other locations, sufficient COVID-19 vaccination capacity. No gaps with this service delivered through community pharmacy have been identified.

Throughout the pandemic pharmacies remained open to provide essential services to the public and dealt with an unprecedented level of demand, especially in the early part of the pandemic. Many pharmacies significantly increased their support for housebound, clinically extremely vulnerable (CEV) or isolating patients and help protect them from COVID-19 by arranging to deliver prescriptions and other medical supplies.

In any future serious public health emergency, or indeed should the situation with COVID-19 deteriorate, we conclude that pharmacy contractors in Dudley have proven to be well placed to expand testing and/or vaccination capacity at pace and at scale to meet additional needs, whilst delivering an equitable and accessible service, particularly in more disadvantaged areas.

**Figure 31:** Location of pharmacies and other sites offering LFD testing and COVID-19 vaccinations in Dudley (2021/22) and percentage of population aged twelve and over with first dose COVID-19 vaccination (as of 5th May 2022) by LSOA



Source: ODS DataPoint, NHS Digital / LLPG, Dudley MBC / Directorate of Public Health & Wellbeing, Dudley MBC / Black Country and West Birmingham CCG / UKHSA. Produced by: Intelligence Team, Dudley MBC. © Crown Copyright and database right 2022. Ordnance Survey 100019566.

Key to pharmacy ID numbers in appendix 1 and 3



## **Patient & Public Involvement**

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As part of previous PNAs, patients and the public were consulted on their views and requirements for community pharmacies services through commissioning research to Healthwatch Dudley both in 2014 (gained mostly through postal questionnaire) and 2017 (mostly through focus groups). The rationale for adopting different research methodology for the second PNA was to triangulate and better understand some of the responses gained in 2014, and in particular to improve our understanding of the needs of service users from black, Asian and minority ethnic backgrounds and other groups that were thought to have been under-represented in the 2014 survey. A new online survey was undertaken in 2022, alongside an innovative piece of research that summarised online reviews of pharmacies.

The full reports for both previous consultations are available at:

<https://healthwatchdudley.co.uk/reports/>

### **Summary of Healthwatch Dudley Research (August 2014)**

Paper and online questionnaires were distributed to pharmacies as follows:

- 7,200 paper questionnaires (100 questionnaires for each of the 72 pharmacies)
- 827 paper questionnaires returned and analysed (PNA 2014/15 2017/18 Summary

In addition, a focus group was carried out with the Halesowen Asian Elders Association in which 70 people participated.

Results from respondents were as follows:

- Survey response rate was 11.5%
- Replies were received from all five localities in Dudley (3% responses from out of borough. DY1, DY2, B63, WV14 underrepresented and DY3, DY6, DY9 and B64 overrepresented.
- 61% female, 39% male (women make up 50.8% of population)
- 95% white British (underrepresentation of BAME groups)
- Over 75% of responses came from age groups 55 and over (this group makes up just 30% of the population)

Analysis revealed the following themes:

- Overall, patients and the public were happy with the available pharmacy services (prompt, friendly, well-informed staff)
- 57% of people used pharmacies near their home (41% use pharmacies near their GP)
- 89% of people visited pharmacies between 9am to 6pm on weekdays

- Pharmacies were commonly open at times people want to use them, in convenient places.

The following areas for service improvement were identified:

- Focus on development of pharmacy services close to peoples' homes and GP practices, as well as expanding pharmacy opportunity in other areas of community
- Reviewing pharmacy opening hours to align with GP opening hours
- Pharmacies should strive to become more aware and provide better services for people with 'special needs' e.g. large print labels, translation services, community language speakers, space for wheelchair turning
- Pharmacies should provide remote services such as health checks and support for people with chronic conditions
- Pharmacies should promote services such as smoking cessation, immunisations and alcohol advice
- Expand pharmacy links with primary and secondary sectors
- Ensure private consultation areas are available in all pharmacy premises
- Continue rollout and promote awareness of the Minor Ailments Scheme
- Keep up to date with changing healthcare needs, advances in technology and social media.

2014 Focus Group feedback found that:

- 6/70 of the focus group had heard of Healthy Living Pharmacies
- 45/70 people were aware of the wide range of services offered by pharmacies
  - Services used by focus group members included prescription medicines, blood pressure check, cholesterol check, medicine use reviews, over the counter medicines, support bandages, beauty and feminine care products and photo development.
- Barriers to pharmacy services included:
  - Unclear opening hours, poor disability access, language barrier, delays in prescription deliver/collection
  - Some members of the focus group reported receiving help from young family members to collect their prescriptions
- Areas for improvement included:
  - Improve pharmacy access to medical records
  - Improve availability of prescription medicines, or signpost to other pharmacy which has the medicine in stock
  - More constant presence of pharmacist for advice and service provision
  - Improved communication
  - Prescription delivery services
  - Offer more testing and medical advice services

## **Summary of Healthwatch Dudley Research (August 2017):**

### **Methods**

For the 2017 public consultation, focus groups were set up to engage with people from Black, Asian and Minority Ethnic groups, males, younger persons or people living in disadvantaged areas. These groups were all under-represented in the responses to the PNA public engagement work that was undertaken in 2014.

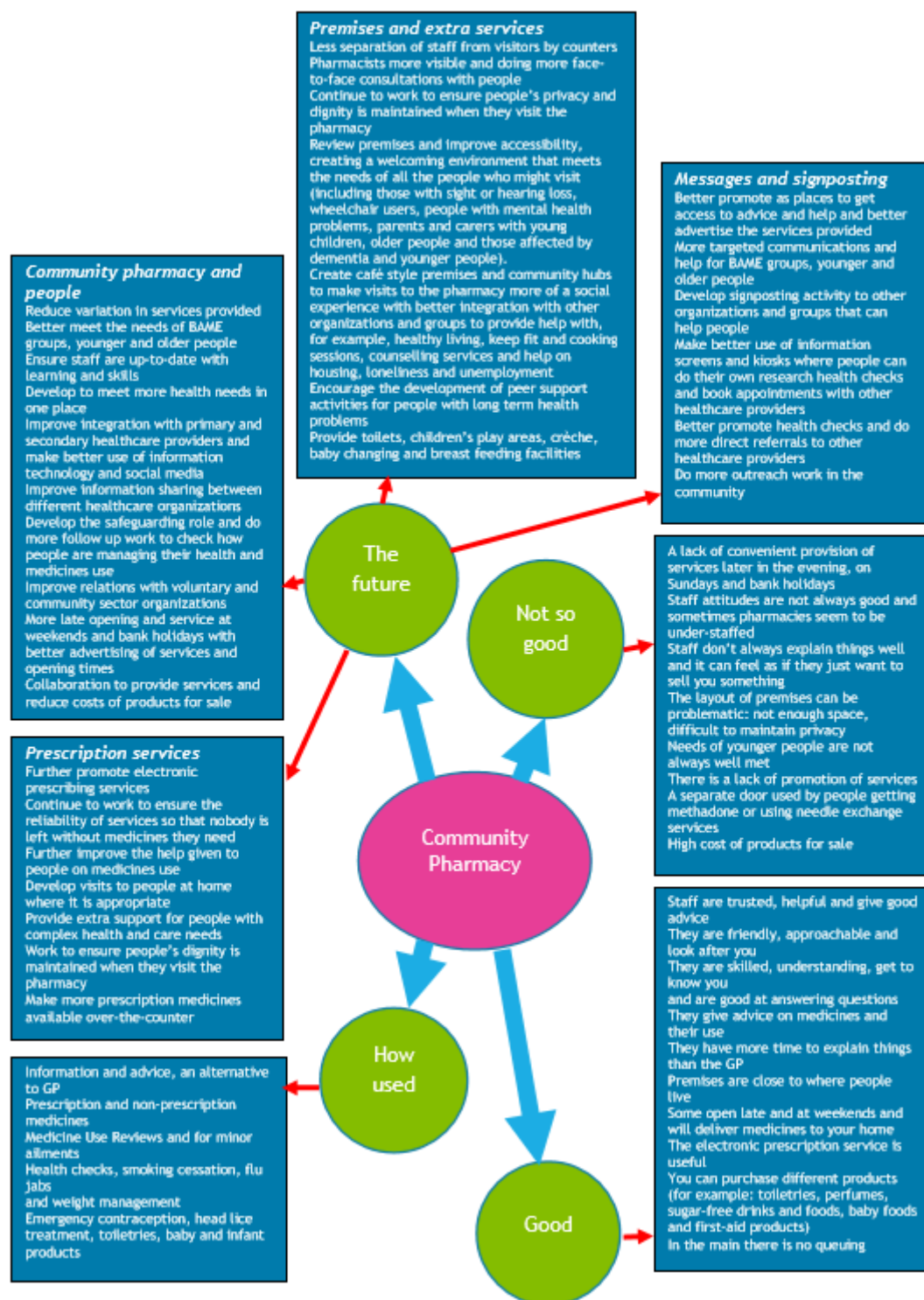
- Groups were facilitated with between six and ten people for one to one and a half hours. Groups and individuals received a modest remuneration for participation.
- 78 people (21 males, 57 females) were invited from a range of events and networks including the Special People's Network Event Pharmacy and me, the Brierley Hill Project - Recovery Café, Bengali Women's Group - Halesowen, African Caribbean Community Network – Dudley, Young Health Champions, and the Centre for Equality and Diversity - Women's Coffee Morning Group.

### **Results**

- People involved were aware of their local community pharmacies. There was limited knowledge of different pharmacy services. People commented on personalised/friendly pharmacy service, as well as unfriendly/unhelpful pharmacy experiences.
- Areas suggested for improvement included pharmacies to integrate more closely with different organisations and services, and more signposting of available services (including health promotion but extending further to services that would improve quality of life such as housing, unemployment, issues with welfare benefits and mental health problems). The opportunity pharmacies provided for engaging with people who were lonely or isolated was also noted,
- Limitations: people involved are more likely to be engaged with pharmacy services as they have already demonstrated that they are more likely to be involved with the community. Men and young people still underrepresented in these focus groups. Furthermore, the remuneration offer may have influenced who applied to participate.



**Figure 32:** Healthwatch Information Map of responses to community pharmacy enquiries.



During the formal consultation period for the draft PNA (14 December 2017 – 13 February 2018) this document was available to patients, public and other community stakeholders (i.e. voluntary sector) on the Dudley MBC public accessible website.

## **2022 public consultation**

### **Methods**

A new public consultation was carried out in May 2022 to gather contemporary views and requirements for community pharmacies services. An online questionnaire was developed, whilst paper copies were made available to order for those who were unable to access the questionnaire online.

Information about the survey was circulated through the following channels:

- 2 copies of each poster were sent to all pharmacies in the borough to display
- A press release was issued
- Promotion via social media on Dudley Council Facebook and Twitter
- Display on GP practice waiting room screens
- Adverts in Dudley and Halesowen Chronicles, Express & Star, online at Express & Star and adverts on Black Country Radio
- Information was available on Connect, Dudley Council's staff intranet
- Posters were displayed internally at council buildings including the Council House, Five Family Centres, Dudley Council Plus Holloway Chambers, Priory Hall, Wollescote Hall, Ward House, Thomas Robinson building, Corbyn Road, Mere Centre, Wordsley, 3 – 5 St James' Road, Mary Stevens Park, Saltwells Education Centre, Harbour building (housing), Health and Social Care Centres in Brierley Hill and Stourbridge, and Children's Services offices

To improve engagement with people from groups that had been under-represented in previous consultations the Healthy Communities team supported people from the Roma community to complete the questionnaire through their own community contacts and volunteers, shared the questionnaire with the COVID-19 Community Champions and their networks. They also shared details with the traveller community.

The Children and Young People's team shared with services including Brook, Here4YOUth, School Nurses, Health Visitors, Family Nurse Partnership.

### **Results**

#### **Demographics**

211 people responded to the questionnaire. All responses received were online.

- The majority of respondents were female (81.6%), with 17.9% males and 0.53% preferring not to say
- More responses were received from people aged 45-54 (32.5%), 55-64 (21.5%) and 35-44 (17.3%). Fewer responses were received from people under 18 (0 responses) 8-24 (2.6%), 25-34 (8.9%) and 75+ (6.8%).
- The majority respondents were of White British ethnicity (88.0%) with responses also received from people whose ethnicity was Indian (3.1%),

Caribbean (1.6%), Chinese (1.1%), Pakistani (1.1%), White Irish (1.1%), Any other Asian background (0.5%), any other mixed background (0.5%), any other white background (0.5%), Arab, Gypsy, Roma and Traveller (0.5%), White and Asian (0.5%), White and Black Caribbean (0.5%)

- The majority of respondents identified their sexual orientation as heterosexual or straight (89.7%) with 3.3% identifying as gay or lesbian, 1.6% bisexual and 1.6% other.
- 16.4% of respondents had a disability
- 54.5% of people were employed full-time, 18.3% were employed part-time, 8.3% were retired, 1.1% were unemployed, 1.1% self-employed, 2.1% full-time homemaker, 1.1% were still studying, 1.6% were disabled or too ill to work.

### **Use of pharmacies**

- The majority of respondents said they used pharmacies for themselves (90.6%). 31.1% said they used pharmacies for a child or young person, 27.3% for an elderly person and 22.6% for someone else they cared for
- 48.6% of respondents used pharmacies once a month, 29.3% once every few months, 15.1% once a week or more, 3.8% once in six months and 3.3% less often
- The majority of respondents (70.7%) said they often used pharmacies near their home. 47.4% often used pharmacies at or near their GP surgery
- When asked to rank their preference for when they would want to use pharmacy services, most respondents preferred to use pharmacies between 9am to 6pm
- When asked what helped them choose when considering their choice of pharmacies, the most common responses were “close to home” (81.1%), “friendly staff” (57.6%) and “close to GP surgery” (47.6%). When asked to comment about other reasons to choose a specific pharmacy, respondents commonly cited pharmacies having a stock of the medications or products they required, pharmacy being located at a supermarket or other location they commonly shopped at and staff knowledge of them or their condition.
- When asked about barriers to visiting pharmacies, the most common responses were “opening times not convenient for me” (38.1%), “none” (32.4%) and “service I needed was not available” (19.5%). When asked to comment about other barriers to visiting specific pharmacies, long wait times, rude staff/ poor customer service and not having medications or products in stock were commonly cited.
- When asked how they typically travelled to a pharmacy, most respondents used a car (54.3%) or walked (39.2%).

- The majority of respondents were able to get to a pharmacy within 0-15 minutes (86.8%) with 10.4% saying it took 16-30 minutes and 0.94% over 30 minutes and 1.9% saying journey time varied.

### **Services used at pharmacies**

- The majority of respondents used prescription and medication services at pharmacies with 86.3% using pharmacies to collect medication their GP had prescribed, 63.7% using repeat prescription services, 56.1% purchasing over the counter medications and 12.7% using prescription delivery services
- Health and wellbeing services were not used by the majority of respondents with 1.4% using stop smoking services, 3.4% using health eating and living services and 0.5% using alcohol advice services
- Sexual health services were not used by the majority of respondents with 0.5% using chlamydia screening services, 3.9% seeking pregnancy and contraception advice and 1.9% using pharmacies to obtain emergency contraception. No respondents used HIV testing services
- 23.6% of respondents used pharmacies for long term condition advice and management and 2.4% used pharmacies for warfarin services
- With regards to other services 60.5% of respondents said they used pharmacies for minor conditions advice, 28.6% used pharmacies for immunisations and 10% sought advice on baby and child health
- Non-medical products commonly bought at pharmacies included toiletries and sun cream (45.5%) and cosmetics (30.8%).

### **When asked to consider the pharmacy they most often used:**

- 51.4% of people used the pharmacy at or near their doctor's surgery, 27.9% used high street pharmacies and 12.0% used supermarket pharmacies. Local or independent pharmacies near respondents' homes were commonly used
- Feedback was broadly positive. Most people agreed or strongly agreed:
  - The staff are friendly
  - Staff provide good information and advice
  - Staff respect their privacy
  - The pharmacy is accessible for people with disabilities
  - The pharmacy provides an area for private consultations
  - There was convenient parking near the pharmacy
  - The opening hours for the pharmacy were convenient
- Respondents cited the following improvements that could be made to provide them with a better service:
  - 42.1% responded that they would like to experience faster services
  - 20.1% responded having information about alternative pharmacists
  - 17.6% responded that there should be a private area for consultations

- When asked to comment on other improvements, people cited having required items in stock, clear communication when prescriptions were ready or delayed and longer opening hours (particularly on Saturdays).

## **Virtual services**

When asked if they would like pharmacies to offer more virtual services, the majority of respondents preferred to visit in person (70.4%). 20.6% said they would like pharmacies to offer more online consultations and advice and 21.1% said they would like them to offer more telephone consultations and advice.

## **How COVID-19 impacted people's use of pharmacies**

66.8% of respondents said that COVID-19 had not impacted on how they used pharmacies. 14.9% collected lateral flow tests and 9.9% received their COVID-19 vaccination at pharmacies. 3.5% said they required virtual services or deliveries due to having to shield or self-isolate.

## **Analysis of survey results**

People mostly used pharmacies for themselves, although a significant proportion used pharmacies for someone they provided care for. Pharmacies close to home were the most used and this was the most important factor in deciding which pharmacy to visit. The majority of respondents could get to a pharmacy within 15 minutes.

Feedback about pharmacies respondents most commonly used was broadly positive. The majority of respondents agreed that staff were friendly, able to provide helpful advice and information and were respectful. Most respondents also agreed that pharmacies were accessible to those with disabilities and provided convenient parking and opening hours.

Areas for improvement include:

- Opening hours: despite many respondents reporting that pharmacies provided convenient opening hours, pharmacies not being open at convenient times was cited as one of the main barriers to access, suggesting certain groups are not able to get to pharmacies when they need to (eg workers)
- Some respondents reported that staff were unfriendly or rude and that customer service could be improved. This is despite the majority of respondents giving positive feedback about staff
- Wait times in pharmacies and delays in prescriptions being ready
- Clearer communication between the pharmacy and customer to let them know about when their prescription was ready or when there were going to be delays.
- Provision of more virtual services or telephone consultations.

The survey generally reflected the findings of the analysis of online reviews. Common themes included the importance of customer services, staff respecting privacy and long wait times in pharmacies and for prescriptions to be ready for collection. A number of reviewers and responders to the questionnaire commented that opening hours should be longer, particularly on weekends

As with previous surveys for the PNA, there are some issues with how representative the respondents were of the population of Dudley. In particular, fewer people from younger age groups respondent, with no one under the age of 18 completing the survey. There was also a low response from those age over 75. Although, in terms of ethnicity, the percentage of respondents from different ethnic groups was not dissimilar to the Dudley population as a whole, the actual number of responses was low for Black, Asian, Gypsy, Roma and Traveller and other ethnic minorities. Similarly, the proportion of respondents identifying as gay, lesbian, bisexual or other sexual orientations was not dissimilar to the Dudley population, but there was a low number of respondents overall. Responses were received from all localities within the borough, but there were fewer responses were received from people living in DY4, B62, B64 and WV14. Further engagement work may be required to ensure that pharmacy services are meeting the needs of all populations within Dudley.

The majority of respondents did not utilise pharmacies for Health and Wellbeing Services, Sexual Health Services or Services for the Management of Long-Term Conditions. The feedback received may, therefore, not apply to these services. Further engagement work may be needed to gather views of these specific services.

## **Statutory 60-day consultation**

Whilst it is important and good practice to engage service users, there is a statutory requirement for the Health and Wellbeing Board to consult specified organisations for a period of 60 days prior to final publication and to report on any feedback. The PNA steering group undertook consultation with the appropriate organisations, as well as with the general public between 1 July and 29 August 2022.

25 responses were received, of which seven came from community pharmacies, organisations or health and social care professionals. Answers to all questions that were consulted upon, and all free text comments received are provided in Appendix 11. Only two comments required any change to be made to the PNA, which in both cases were minor clarifications.

It should be noted that limited feedback from the 60-day statutory consultation is to be expected since if robust engagement has been undertaken throughout the process of writing the PNA, there should be no surprises from the statutory consultation.

# **Analysis of online reviews of pharmacy service users**

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In addition to formal consultation through a public questionnaire, in April 2022 Dudley MBC Directorate of Public Health and Wellbeing piloted a novel method of gathering additional information about customer and patient satisfaction of local pharmacies. Making use of user generated, freely available online reviews, this project collated and summarised the experience of users of Dudley pharmacies, including what they valued and criticised. This has provided a unique perspective to complement the findings of the public survey and brought rich additional learning to what people think about local pharmacies.

## **Methods**

A single researcher trawled through several major sources of online reviews: Google reviews, Facebook reviews, NHS Choices, Yell reviews, pharmacies' own reviews and Care Quality Commission (CQC) pharmacy reviews. Online reviews for each of the pharmacies included were analysed within Microsoft Excel, both qualitatively to establish areas of feedback (customer service, medication services etc), and quantitatively to count how frequently these subjects were mentioned.

## **Inclusion criteria**

Pharmacies located within Dudley Council, trading on 31 March 2022, with any online reviews posted on any of the above platforms. 62 out of 68 pharmacies identified in the Dudley area were included in this project. five were excluded as they had permanently ceased trading before 31 March 2022, and one was excluded as no available online reviews for it could be identified.

## **Review exclusion criteria**

Lack of particular focus of feedback (for example statements simply stating: "amazing" or "awful" without further explanation).

## **Results**

1377 online reviews/ratings were reviewed. 1055 written reviews were included and evaluated (after exclusion of 223 ratings alone and 101 reviews from excluded pharmacies). One CQC review of Lloyds Pharmacy (national review but chain operating locally) was included. Table 12 lists the number of reviews that cited specific features.

**Table 12:** Summary of online pharmacy reviews

Area of feedback	Specific feedback	Number of reviews mentioning topic
Customer service	Good customer service	513
	Poor customer service	158
	Continuity of care/part of the community	21
	Short staffed	22
	Payment issues	6
Environment	Good stock/range of products	53
	Poor stock/range of products	18
	Well-priced products	7
	Expensive products	14
	Clean, tidy, well-decorated	22
	Dirty, untidy, poorly decorated	8
	Good location	35
	Poor parking	2
	Good opening hours	13
	Poor opening hours: Unpredictable, incorrect, short	42
	Following COVID-19 precautions	15
	Not following COVID-19 precautions	14
	Accessible for people with disabilities (ramp, door)	5
	Quick and flexible in identifying and fixing medication errors/emergency medication	4
	Incorrect/missing/out-of-date medications	56
Medication	Ease/efficiency of processing medications	41
	Difficulty in processing medication request (system)	9
	Short waiting times in store	13
	Long waiting times in store	85
	Short wait after ordering medications	14
	Long wait after ordering medications	29
	Good stock of medications	6
	Poor stock of medications	11
	Good medication delivery service	25
	Poor delivery service	7
	Text service for medication pickup	11
	Lack of updates for patients regarding medication pickup	6
	Ability to collect medication for others	2
	Good communication with GP Surgeries	4
	Poor communication with GP Surgeries	2
	Good accessibility on telephone	3
	Poor accessibility on telephone	42
Other services	Good range/quality of services (LFT, smoking cessation, vaccination, fit-to-fly, opticians, DPD delivery)	43
	Unorganised/inefficient/unsafe/unhygienic services	37
	Lack of inhaler recycling services	1



The most frequently commented upon aspect of pharmacy service provision was Customer Service. Reviewers praised pharmacy service providers who they perceived as being helpful, polite, professional, efficient and friendly. Reviewers approved where service providers acted in a discreet and informative manner when discussing medical conditions and medications. Multiple reviews highlighted providers who were sensitive and thoughtful in assisting people with disabilities, or those who were receiving end of life care. Providers who were flexible and efficient in resolving medication errors or assisting in form submission and processing (such as medical exemption or private prescription services) were praised by reviewers. Additionally, reviewers described the benefits of long-serving local pharmacies becoming established features of the community, such as a good existing knowledge of patients' medical conditions, good rapport and perceived trustworthiness.

In contrast, some pharmacy service providers were criticised by reviewers for being judgmental, rude, unhelpful or unwelcoming. In particular, reviewers found it distressing if medical conditions or medications were discussed loudly or indiscreetly in pharmacy settings. Confidentiality was widely mentioned in online reviews.

Regarding medication services, the most common complaints from reviewers were regarding long waits instore for medications. A number of complaints concerned incorrect, missing or out-of-date medications dispensed by pharmacies. This caused distress in reviewers as they would potentially have to return multiple times to the same pharmacy to resolve these issues, wasting time and money, as well as losing confidence in the service. Reviewers appreciated pharmacists who were quick and flexible to identify and address medication errors as well as those who dispensed emergency medication. Furthermore, reviewers praised the ease of using online prescription services, as well as medication delivery services. Multiple reviewers highlighted the importance of being able to collect medications for friends/family.

Regarding the pharmacy setting itself, the most widely reviewed aspect was the range and quality of products such as toiletries, gifts and beauty products. The second most commented upon aspect of pharmacies was their location. Reviewers approved of centrally located pharmacies, close to shops, foodbanks and GP practices with good public transport links and parking availability. Additionally, pharmacies with good access for people with disabilities were praised with ramps and automatic doors being felt to be especially beneficial. Pharmacies which were clean, tidy and smartly decorated were praised and reviewers appreciated the presence of informative healthy living posters in store. Furthermore, reviewers praised pharmacies with longer opening hours as well as those pharmacies which were open on weekends and bank holidays, as they offered improved accessibility to pharmacy services. In contrast, pharmacies were criticised when they closed at lunchtime or if their opening hours differed from those stated online.

The most frequently reviewed element of communication was the pharmacy's accessibility via phonelines. Reviewers appreciated clear updates regarding appointments or prescription collections, whether through texts or phone calls.

Furthermore, pharmacies with good communication links to GP practices were praised as reviewers reported this improved the perceived efficiency in resolving medication issues.

Reviewers appreciated the quality and range of services provided by pharmacies, including Lateral Flow Testing for COVI-19, smoking cessation services, vaccination, fit-to-fly testing, opticians services, DPD delivery and inhaler recycling services. Vaccination services were criticised where the service providers appeared rushed, unorganised, inefficient or unhygienic.

The Lloyds Pharmacy chain, which includes branches in Dudley, was reviewed by the CQC in September 2019, and were found to be overall good (good: domains of “safe”, “effective”, “caring” and “responsive”; outstanding: “well led”).

## **Discussion**

A key advantage to this approach was the free access to a large pool of praise, complaints, comments and ratings from pharmacy users who might well otherwise not have engaged with any formal consultation process about their use and opinions of Dudley’s pharmacies. Disadvantages included the need to exclude reviews if they left no explanation as they could not be analysed further, and it was not possible to verify that all reviews were from genuine service users.

This study has identified that, amongst people who choose to leave online reviews after visiting a pharmacy, those experiencing good service outnumber those receiving poor service by a significant margin. Efficient and friendly customer service, confidentiality when discussing medical problems, telephone accessibility, convenient location, longer opening hours, disabled facilities and range of additional products were among the features most commented upon and valued.

Providers should consider how well they meet these expectations.

## Excepted Applications

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Historical changes in the control of market entry test to refer to the PNA means that it is no longer required 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. However, existing pharmacies granted an application prior to this change (September 2013) by PCT's historically under these exemptions may continue to provide pharmaceutical services. The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 make it clear that pharmacies that opened under the exemption historically of providing at least 100 hours of pharmaceutical services each week cannot apply to reduce their hours now that this exemption does not exist.

Presently there is only one category of exempt application in the control of market entry test which is for distance selling pharmacies (previously referred to as wholly mail order or internet pharmacies within the regulations).

Whilst three of the four exemptions under control of market entry now cease to exist for new pharmaceutical services applicants, it is important to document the legacy that the historical exemptions have left for the population of Dudley.

Dudley patients and residents have significantly benefitted from access to pharmaceutical services under one of the historical four control of market entry exemptions.

### **Pharmacies that intend to open for at least 100 hours per week**

It remains a condition of this exemption that the total contractual hours during which pharmaceutical services will be available are not less than 100 hours each week. The usual 40 hours minimum does not apply. Patients who are unable to access services during normal shopping hours benefit particularly from these pharmacies.

- NHS E&I may remove from the list if the pharmacy repeatedly fails to meet the terms of the exemption without good cause.
- Continues to support improving access to out of hour's services. Pharmacies should be prepared to open at NHS E&I request. NHS E&I requests can include opening on designated bank holidays to provide the full range of pharmaceutical services including any enhanced services commissioned from the pharmacy on other days of the year.
- Comply with the directive that a 100 hour operates must be agreed by NHS E&I to ensure that they are provided at times relevant to the needs of Dudley residents.
- Ensure that opening hours include Saturday, Sunday and Bank Holiday service provision.

- Applicants were also required to provide the advanced services (the pharmacy will have an approved consulting room and will carry out all advanced services).
- Applicants should be willing to fully comply with all the requirements of the NHS E&I procedure for monitoring pharmacies that open for 100 hours document including the process and paperwork for informing NHS England & Improvement of the planned and actual pharmacist cover (Community Pharmacy Contract Framework).

In Dudley, the pharmacies approved under this now obsolete exempt category are the following 100 hour pharmacies:

**Table 13:** 100 hour pharmacies within Dudley

ID	Pharmacy	PCN	Address
1	Asda Pharmacy	Brierley Hill	PEARSON STREET, BRIERLEY HILL
27	Jhoots Pharmacy	Brierley Hill	BRIERLEY HILL H&SCC
37	Lloyds Pharmacy	Brierley Hill	SAINSBURYS WYTHYMOOR VILLAGE
2	Asda Pharmacy	Halesowen	THE CORNBOW SHOPPING CTR,
16	Day Night Pharmacy	Stourbridge, Wollescote & Lye	45 HIGH STREET, LYE
38	Lye Pharmacy	Stourbridge, Wollescote & Lye	37 HIGH STREET, LYE

For pharmacy key, see appendix 1.

Dudley patients also use 100 hour pharmacies in neighbouring areas of Birmingham, Sandwell and Wolverhampton:

**Table 14:** 100 hour pharmacies within 2km of the Dudley Local Authority (LA) border

ID	Pharmacy	LA	Address
85	Ridgacre HSE	Birmingham	RIDGACRE HOUSE MED CTR
86	Asda Pharmacy	Sandwell	OLD PARK LANE, OLDBURY
94	Hills Pharmacy	Sandwell	15 HILL TOP ROAD, OLDBURY
109	Pharmacy 365	Sandwell	249 HALESOWEN ROAD, CRADLEY
113	Tesco Instore	Sandwell	1 FOXOAK STREET, CRADLEY
129	Phoenix	Wolverhampton	PHOENIX HEALTH CENTRE

For pharmacy key, see appendix 3.

We have concluded that extended access to pharmacies out of normal office and GP surgery hours fulfils the pharmaceutical service needs of Dudley patients.

Brierley Hill is well served by extended opening hour pharmacies as are Halesowen and Stourbridge. The Phoenix Pharmacy in Wolverhampton (pharmacy ID 129, figure 10 and appendix 3) provides extended opening hours to Sedgley residents. Sedgley residents accessing OOH medical services (Dudley Emergency Treatment Centre) also have access to late opening pharmacies within Brierley Hill.

We have concluded that there is a need for the provision of pharmaceutical services during the extended hours. The 100 hour pharmacies in Dudley and neighbouring areas form an essential part of meeting this need therefore any amendments to their existing opening hours would have a detrimental effect for the population of Dudley.

As the start of a week is not defined in the regulations, the Family Health Services (FHS) Functions committee was previously asked to define it during the Dudley Primary Care Trust PNA in 2011. This was determined to be midnight between Sunday & Monday. This is included in the PNA for reference. This determination is necessary to enable NHS E&I to better control the opening hours by 100 hour pharmacies in relation to bank holidays.

## **Distance Selling Pharmacies**

There are two distance selling pharmacies operating within Dudley for which Dudley patients do make use of their services.

- Dixons Green Pharmacy: <https://dixonsgreenpharmacy.co.uk/>
- Meds at Home Limited: <http://www.medsathome.co.uk/>

These pharmacies are not mapped because patients cannot visit them to access face to face essential services as per the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations (UK Statutory Instrument, 2013).

Additionally, this exemption from control of market entry remains since a true internet or mail order service, servicing a population spread throughout the country cannot argue a strong enough case for meeting needs set out in a local PNA. Neither could it be said to bring about a significant benefit under an unforeseen benefits application.

The NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (UK Statutory Instrument, 2013) detail several conditions for distance selling pharmacies in addition to the regulations governing all pharmacies. As compliance with the conditions is a pre-requisite for all distance selling pharmacies to remain on the pharmaceutical list, breach of the conditions could lead to removal from the Pharmaceutical List by NHS E&I.

Dudley patients do make use of distance selling pharmacies on the pharmaceutical list of other NHS England & Improvement Teams (other than the NHS E&I Midlands Team).

## Shaping the Future

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NHS England & Improvement (NHS E&I) have published a letter outlining the next steps for the delegation of some direct commissioning functions to integrated care boards (ICBs), alongside a roadmap for specialised commissioning.

From this date, all ICBs will assume delegated responsibility for primary medical services (currently delegated to all CCGs) and nine ICBs will also take on delegated responsibility for one or more pharmaceutical services, general ophthalmic services, and dental services (primary, secondary and community). Three of the ICBs are in the North West and six in the South East.

The Health and Care Act received Royal Assent on 28 April 2022 and as a result ICBs will become legally and operationally established on 1 July 2022. This fulfils NHS E&I long-term policy ambition of giving systems responsibility for managing local population health needs, tackling inequalities and addressing fragmented pathways of care. A key enabler to realising this ambition is the delegation of direct commissioning functions to ICBs. By giving ICBs responsibility for a broader range of functions, they will be able to design services and pathways of care that better meet local priorities. They will also have greater flexibility to integrate services across care pathways, ensuring continuity for patients and improved health outcomes for the local population.

From 1st April 2023 NHS E&I will:

- Delegate responsibility to all ICBs for all pharmaceutical, general ophthalmic and dental services.
- Delegate responsibility to all ICBs/multi-ICBs for specialised services that have been identified as suitable and ready for further integration subject to system readiness.

Therefore, the responsibility of the NHS Pharmaceutical Services (and Local Pharmaceutical Services) contract within Dudley will be delegated down to the Black Country ICB from April 2023. This is considered favourable to ensure population health outcomes and narrowing of health inequality has the best opportunity to be realised.

## **Future developments in housing and transport**

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The Black Country Core Strategy (2011) identified several Regeneration Corridors within Dudley Borough which link the four main town centres. The centres and corridors contain most areas where housing growth would be concentrated over the plan period – originally up to 2026. The Dudley Borough Development Strategy (Dudley MBC, 2017) built on this work. The emerging Black Country Plan will continue to identify housing growth areas for the new plan period – up to 2039. The Regeneration Corridors may influence pharmaceutical need with respect to an increasing housing stock and population within the next three years, so development sites under construction or with existing full or outline planning permission have been considered (see appendix 1 for pharmacy details).

Regeneration Corridor 10 – Pensnett. The total number of dwellings completed in the period April 2011 – March 2021 was 678, the total number under construction as of March 2021 was 63, and there is full or outline planning permission for a further 201 dwellings where work has not started. There are two adjacent sites where dwellings are under construction or have planning permission and both are within 1.3 km of three existing pharmacies ID 20, 44 and 60.

- Regeneration Corridor 11a – Dudley town centre to Brierley Hill. 1,102 dwellings have been built within this corridor between 2011-2021 whilst 31 dwellings were outstanding (construction started but not finished) as of March 2021. There is full or outline planning permission for another 231 dwellings. Most of these sites are in the vicinity of Dudley or Brierley Hill town centres which both have good pharmacy provision.
- Regeneration Corridor 11b – Brierley Hill to Stourbridge town centre. 867 dwellings have been completed between 2011 – 2021, ten dwellings are under construction (as of March 2021) and there is full or outline planning permission for 430 dwellings which have not started construction. The related sites are located around or between Brierley Hill and Stourbridge which are areas with good existing pharmacy provision.
- Regeneration Corridor 13 – Jewellery Line (Stourbridge Junction to Rowley Regis). 632 dwellings have been completed in this corridor in the period 2011-2021. 44 were under construction as of March 2021, with full or outline planning permission for another 49. Most housing under construction is on two sites both within approximately 0.7 km of Lye town centre which is served by three pharmacies ID 16, 29 and 38. Housing not started with planning permission is spread across a number of small sites, with the largest located within approximately 1 km of Lye centre.
- Regeneration Corridor 14 – Coombswood to Halesowen. Total dwellings completed between 2011 and 2021 was 171, with 48 under construction as of March 2021. There is full or outline planning permission for 202 dwellings where construction has

not started. The main development sites are in the vicinity of Halesowen town centre which has good provision from pharmacies ID 2, 30 and 51.

- Regeneration Corridor 16 – Dudley town centre to Coseley. The housing stock has increased by 663 dwellings in the period 2011-2021, with three more under construction as of March 2021 and full or outline planning permission for another 506. The principal site of potential future housing is not yet under development and is on the eastern edge of the borough adjacent to Sandwell, approximately 0.5 km from pharmacy ID 105 (see appendix 3 for details) and 1km from pharmacies ID 42 and 63.

We are not aware of any significant new housing developments due to be completed within the next three years that are specifically designed for older people who might be expected to have greater health needs and higher levels of pharmacy utilisation.

To plan pharmaceutical services for projected demographic changes in the future, we conclude that pharmaceutical service provision should also be reviewed in the event of new housing developments within the borough. To facilitate this, we further conclude that the Directorate of Public Health and Wellbeing will communicate with the planning department (Directorate of Regeneration & Enterprise) within Dudley MBC to ensure notification of new housing developments are received, to enable the assessment of future pharmaceutical services need.

During the lifetime of this PNA, the West Midlands Metro light rail extension through Dudley town centre to Brierley Hill is expected to open. This major public transport network improvement project is likely to improve accessibility to certain pharmacies.



## Conclusion

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Patients are not registered with individual pharmacies and have the choice where to have their prescriptions dispensed and where to access essential, advanced, enhanced and other local pharmacy services (i.e. public health services). The differing needs of patients and the public across the borough have been taken into consideration as far as possible. The patient/public questionnaire covered many different groups and support for pharmacies to tackle language barriers, disability access and promote confidentiality and better communication skills will be considered as part of local development plans.

This PNA has concluded that there is one gap in geographical access to pharmaceutical service provision on the Russell's Hall Estate. Any application to close this gap should ensure opening until midnight due to the proximity of the Emergency Treatment Centre, the out of hours service and public comments of opening hours.

This PNA has concluded that there are sufficient current contracted pharmacies to act as willing providers in the areas of deprivation, higher disease prevalence and for the rising population of older people if local commissioners (Directorate of Public Health and Wellbeing, Dudley MBC, Black Country Integrated Care System and/or NHS England and Improvement ever wished to commission local pharmacy services or other enhanced services from existing community pharmacies.

Having taken note of the public's preference for a range of pharmacy locations, e.g. next to or close to GP practices, within high streets and shopping areas, the PNA has concluded that if GP practices move premises within a primary care network, a similar level of patient access to all pharmaceutical services in that area should be maintained. No increase is to be made in the number of contracts in that area (apart from the gap identified within Russell's Hall Estate (Dudley & Netherton PCN) as above), however, improvements in quality of premises, provision of full range of advanced, enhanced and locally commissioned pharmacy services would be required.

### **Assessment 1: Geographical and physical location of pharmacies**

From our evaluation of the geographical location and number of pharmacies per head of population, we conclude that there are broadly sufficient pharmacies in Dudley and the surrounding area to provide essential pharmaceutical services to its residents. Pharmacies are situated both within and very close to GP practices (figure 9) and all acute out-patient centres. Pharmacies are also located in each of the major shopping centres and locality High Streets in Dudley. However, we conclude that there is a gap in geographical provision of pharmaceutical services within the Russells Hall Estate in Dudley. We conclude any new consideration of a contract to fulfil this gap must ensure the pharmacy is open until midnight due to the close proximity of the Emergency Treatment Centre and out of hours service.

## **Assessment 2 – Opening Hours**

Using our evaluation of pharmacy opening hours (Core and Supplemental) we conclude that pharmacies are open to provide services at the times needed and used by the population. This assessment is supported by the results from the patient and public questionnaire and comments left in reviews.

Within the current contract regulations, contractors should review the core and supplementary hours of pharmacies located in or nearby to GP surgeries to bring them in line with the opening hours of neighbouring GP surgeries (if not already done), particularly since DIHC provides an extended access hub for additional general practice capacity within its integrated general practice (High Oak Surgery, ID 15, appendix 2).

Whilst the provision of 100 hour pharmacies within the borough and neighbouring health and wellbeing areas (see Figure 11) should mean that there is good access to pharmaceutical services on bank holidays, depending on the allocation of official bank holiday dates, gaps in provision may arise. Commissioning pharmaceutical services as an “enhanced service” from an existing provider close to the Emergency Treatment Centre at the Russells Hall site of DGFT (up to 2 kilometres by car or 20 minutes walking distance) on Bank Holidays not covered by the regulations (Christmas Day and Easter Sunday) should be considered by NHS E&I.

This PNA has identified a geographical gap on the Russells Hall Estate as per Assessment 1 and therefore, any consideration of a new pharmaceutical contract to fulfil this gap to support extended access for our population must ensure opening until midnight within core contracted hours.

There are no pharmacies within Dudley open overnight. With the ETC providing 24 hours primary medical care since 1<sup>st</sup> April 2015, this may be considered a gap in pharmaceutical provision. However, the provider of the ETC has responsibility to stock key out of hour’s medicines to enable access to medication to fulfil this potential gap in pharmaceutical provision overnight. The full list can be viewed here:

[NHS Electronic Drug Tariff \(nhsbsa.nhs.uk\)](https://nhsbsa.nhs.uk)

At the time of writing this PNA, no known pharmaceutical access issues overnight have been reported by the ETC provider to the commissioner (Black Country ICS). Any consideration of a full pharmaceutical contract to fill this gap overnight would be disproportionate to identified need.

## **Assessment 3: Community Pharmacist Consultation Service (CPCS)**

Provision of CPCS is greater than 75%. We conclude that whilst not every community pharmacy within a PCN has delivered activity, given patients have a choice to use any

pharmacy within the PCN, there is good access, and we therefore conclude that there are no gaps in provision.

To increase referrals to the service, Dudley LPC (working in partnership with Black Country ICS, DIHC and the Pharmaceutical Public Health Team) will need to work with existing pharmacy contractors to address any barriers to provide an equitable service for all patients no matter which community pharmacy they regularly use and increase awareness amongst GP practices to improve referral to the service.

#### **Assessment 4: New Medicine Service (NMS)**

Provision of the New Medicine Service is offered from equal to or greater than 75% of all the pharmacies in each PCN. Within each PCN patients have a choice to use any pharmacy, whilst not every community pharmacy within a PCN has delivered activity.

We conclude there are no gaps in provision and that Dudley LPC (working in partnership with NHS England & Improvement, DIHC and the Pharmaceutical Public Health Team) will need to work with existing pharmacy contractors to overcome any barriers to provide an equitable service for all patients no matter which community pharmacy they regularly use.

The further development of the NMS service must focus on integration with chronic long term conditions management linking the conduct of and outcomes from NMS into local treatment pathways such as COPD, Asthma and Hypertension management.

#### **Assessment 5: Appliance Use Reviews (AUR's) and Stoma Appliance Customisation appliance (SAC)**

We conclude that we are unaware of any unmet need of provision of AUR or SAC by pharmacy or appliance contractors.

#### **Assessment 6: Seasonal Influenza Vaccination**

Provision of the seasonal influenza vaccination service is offered from greater than 75% of all the pharmacies in each PCN (Table 3) and geographical access across the borough is considered to be excellent (figure 16). We conclude that there are no gaps in provision. Eligible patients for vaccination remain able to access this service through their general practice.

We further conclude that intelligence teams within organisations (Black Country ICS, DIHC and Directorate of Public Health and Wellbeing, Dudley MBC) should review influenza uptake data (for previous season) to determine areas around the borough

where the target uptake (75% for all groups) has not been achieved and ensure greater targeted health promotion within these areas supporting all providers. We conclude that to support health protection of our population, this service is considered necessary through all providers for greater access and patient choice across the borough.

## **Assessment 7: Hypertension Case Finding**

At the time of writing this PNA, 31 community pharmacies are accredited to deliver this service and of these, 13 have delivered activity. Presently, within each PCN (see Table 3), there is access to this service within at least a quarter of all pharmacies. Reassuringly, accessibility to this service increases to greater than 50% of all pharmacies within the two PCNs with greatest deprivation (Dudley & Netherton and Brierley Hill).

In part, an explanation for the strong start within Dudley & Netherton is that this PCN was chosen (due to known health inequalities with CVD) as part of a targeted population health approach across the wider Black Country ICS with support from DIHC Pharmaceutical Public Health Team, PCN Clinical Director, Black Country ICS Cardiovascular Clinical Learning Network and the academic health science network to accelerate the integration of this service within its general practices.

Given this is a new service, we conclude that there is good access for our population in Dudley, with greatest access in areas of of higher deprivation (the expectation would be that the need for such a service is highest in these areas, in terms of health gain and narrowing health inequality). This conclusion is made on the basis that the majority of current blood pressure management (whether clinic readings or ambulatory) remains accessible for our population within their registered general practices and increasingly post COVID-19, many individuals have access to, and utilise home BP monitoring equipment as part of a self-care approach to long term conditions management.

We conclude that this is a desirable service for our population and encourage all community pharmacy contractors to work with PCNs to ensure this is accessible for all, but particularly for those living in areas of greater deprivation. A co-ordinated and seamless approach with local pathways and clear communication between PCN GP teams and community pharmacies will be key to the sustainable success of this service. We also conclude that this service should be aligned to the NHS Health Checks program.

## **Assessment 8: Pharmacy First – Minor Ailments Service**

We conclude that access to this desirable service is good around the borough, particularly in those areas with greatest health need (identified by greatest four deciles of deprivation) We further conclude that where gaps in service delivery have been identified there are sufficient existing contractors within these gaps willing to deliver this service and Dudley LPC (in partnership with Black Country ICS and the DIHC Pharmaceutical Public Health Team) will need to work with these contractors to overcome any barriers to service delivery to ensure an equitable service for patients no matter which community pharmacy they use and at whatever time or day of their contracted opening hours.

## **Assessment 9: COVID-19 Urgent Eye Service (CUES)**

We conclude that access to this desirable service is good around the borough, although actual delivered activity is low.

To improve activity amongst Dudley community pharmacies, we conclude that Dudley LPC (in partnership with Black Country ICS, DIHC Pharmaceutical and Directorate of Public Health and Wellbeing, optical provider and Primary Eyecare Services Ltd) will need to work with community pharmacy contractors to overcome any barriers to service delivery to ensure an equitable service for patients no matter which community pharmacy they use.

Black Country ICS (commissioner) is recommended to ensure the optical provider holding the main contract for CUES (Primary Eyecare Services Ltd) provides clear communication to service users to ensure treatment recommendations and/or signed orders are directed to the community pharmacy. Signposting and utilisation of this service should be reviewed by the commissioner to ensure the correct access points of care are being used in the NHS (aligned to the original vision for MECS).

## **Assessment 10: Specialist Palliative Care Drugs Supply Service**

We conclude that the population of Dudley has good access to the SPCDS service for those pharmacies commissioned within Dudley and neighbouring health and wellbeing board areas. All community pharmacies within Dudley (irrespective of this commissioned service) remain able to dispense these medicines when called upon via an NHS prescription and for overnight access (10pm to 8am). Access to limited key stock overnight is available through a central community clinical hub where in exceptional circumstance a need may arise. We conclude there are no gaps in service provision.

## **Assessment 11: Provision of Emergency Hormonal Contraception (EHC)**

We conclude that women across the borough have good access to this service, particular in areas of greater teenage conception rates. We further conclude that support and encouragement will be provided by Dudley MBC Directorate of Public Health and Wellbeing to other pharmacies within the borough who wish to become accredited to provide this service subject to ongoing funding and identified need. This will improve access further for the Dudley population.

## **Assessment 12: Provision of Chlamydia Screening**

We conclude there is good geographical access for young women (and other people with a womb or ovaries\*) under the age of 25 to access a chlamydia screening service across the borough. However, a new female-only benchmark Diagnostic Rate Indicator of 3,250 per 1000 aged 15-24 (Female) is included in the Public Health Outcomes Framework from January 2022 and all pharmacies providing the EHC service are therefore encouraged to provide chlamydia screening to support increased case finding and timely treatment.

## **Assessment 13: Provision of C-card Service**

In 2020 Brook provided c-card training for every pharmacy in the Dudley borough so that young people can access condoms and sexual health advice within their neighbourhood. During 2021/2022, only six pharmacies are active members of the scheme with some saying that Therapy Audit completion is time consuming. Each pharmacy has been issued with a QR code poster which reduces time inputting, and it is hoped that this will result in increased activity. The c-card scheme is part of the current sexual health review. Dudley MBC Directorate of Public Health and Wellbeing will work with Dudley LPC to promote service uptake as appropriate following the current review of sexual health services within the borough.

## **Assessment 14: Smoking Cessation & NRT Voucher Service**

It has been recognised that an alternative provider (S4H) within Dudley deliver the main adult Smoking Cessation service. For under-18-year-olds and pregnant females, the NRT Voucher Service across the borough is average, given, it is recognised that less than 50% of all pharmacies within each PCN deliver this service and within Kingswinford and Wordsley and Stourbridge, Wollescote and Lye PCNs access is poor. The service has low uptake, and the Directorate of Public Health and Wellbeing

are working with the LPC to support pharmacy contractors to increase participation. Whilst there are gaps with service delivery, we conclude that the willingness is there from our existing pharmacy contractors to deliver this service. The commissioner should target service uptake through community pharmacies in the two PCNs where access is particularly poor.

### **Assessment 15: Supervised consumption services**

We conclude that current community pharmacy contractors provide good service provision and there is good coverage across all six PCNs. No gaps have been identified in service provision.

### **Assessment 16: Needle Exchange Services**

We conclude there is good access for both Needle exchange and naloxone services across the borough within those areas of greatest discarded needles located. Gaps for NES have been identified within wards such as Wordsley, St James and St Thomas based on needle finds. Many service users will also utilise the main provider (CGL, Atlantic House in Lye) to access NES and Naloxone. We further conclude that those community pharmacy contractors already providing instalment dispensing and supervised administration services of controlled substances are well placed and willing to provide this service if CGL wish to commission it within their resource envelope. Consideration should be given to targeting access within Wordsley, St James and St Thomas wards within the borough of Dudley.

### **Assessment 17: Provision of Alcohol Screening and Brief Intervention**

We conclude that gaps exist with access to this service particularly in some PCNs with the lowest provision (Kingswinford & Wordsley, Sedgley, Coseley & Gornal & Stourbridge, Wollescote & Lye). However, we further conclude that there are sufficient existing contractors within these gaps willing to deliver this service. We conclude that Directorate of Public Health and Wellbeing will need to work with Dudley LPC and existing contractors to provide an equitable service for all patients no matter which community pharmacy they regularly use.

## **Assessment 18: NHS Health Checks**

A temporary pause has been placed on NHS Health Checks in pharmacies during and following the COVID-19 pandemic to allow time to develop a new model of care that incorporates the recommendations from the national review.

We conclude that pharmacies are well placed to support some of the new elements of the program and have historically been a helpful adjunct to a service that is predominantly delivered through primary care. Improving access to NHS Health Checks in more deprived areas of the borough to narrow the life expectancy gap remains a priority, though there are several other contractors delivering NHS Health Checks in these areas.

## **Assessment 19: Healthy Start Vitamins**

We conclude that access to this service is poor within Dudley, particularly in Dudley and Netherton PCN which is one of the areas of greatest deprivation and the greatest health need. We further conclude that Directorate of Public Health and Wellbeing will identify pharmacy contractors within areas of high need and work with them to support greater access for our population. However, this will first require improvement of the factors that have caused fewer people to take up the service since changing to smart cards to be addressed nationally. Until then, there is a risk that those who would benefit most from the service will continue to find it the least accessible.

## **Assessment 20: Pharmacy support for COVID-19 services**

We conclude that although by June 2022 the need for LFD testing and vaccination in pharmacies had reduced compared to during the peak of infections, Dudley has proved to be well served by pharmacies that continue to offer, as part of a wider service in other locations and sufficient COVID-19 vaccination capacity. No gaps with this service delivered through community pharmacy have been identified. In any future serious public health emergency, or indeed should the situation with COVID-19 deteriorate, we conclude that pharmacy contractors in Dudley have proven to be well placed to expand testing and/or vaccination capacity at pace and at scale to meet additional needs, whilst delivering an equitable and accessible service, particularly in more disadvantaged areas.



# Glossary

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## **Clinical Commissioning Group (CCG)**

NHS organisations set up by the Health and Social Care Act 2012 to organise the delivery of NHS services in England. CCGs are clinically led groups that include all the GP groups in their geographical area.

## **Demography**

Make up of a particular human population for example the size, age structure. Studied using statistics such as births, deaths and migration.

## **Health and Wellbeing Board**

The Health and Wellbeing Board has responsibility for the health and wellbeing of Dudley residents. The board brings together Dudley Council, Dudley Clinical Commissioning Group, NHS England and partners in the voluntary and community sectors. The Health and Wellbeing Board has responsibility for publishing the Pharmaceutical Needs assessment.

**Integrated Care System (ICS)** Coming into existence on 1 July 2022, this is an overarching partnership of organisations that deliver health and care services in a defined area. It consists of an **Integrated Care Partnership (ICP)** which includes NHS organisations and local authorities in that defined area with responsibility for improving health and wellbeing of the local population. It also includes an **Integrated Care Board (ICB)** that takes over the functions of CCGs to manage the budget for and to provide local health services.

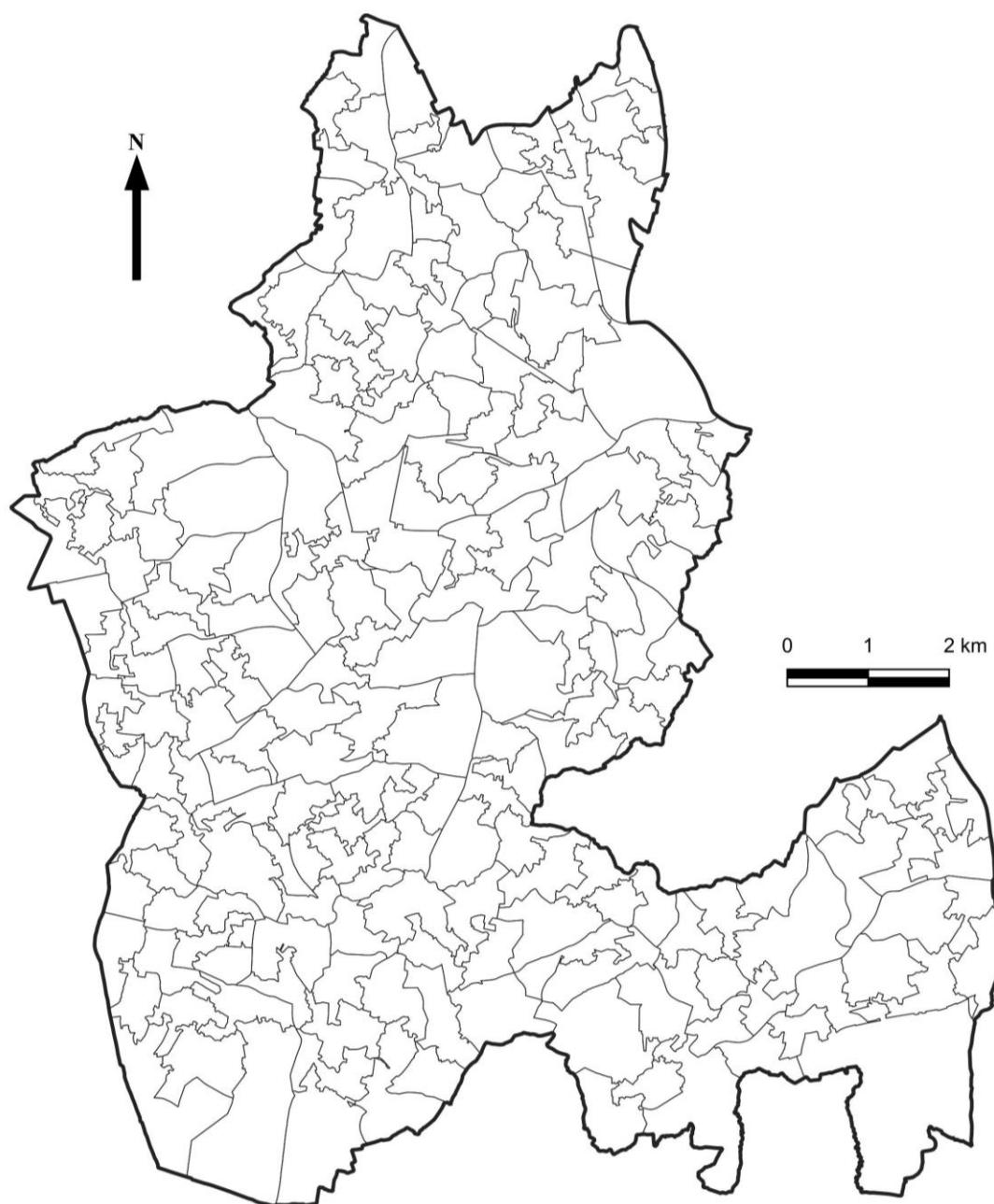
## **Lower Layer Super Output Areas (LSOA)**

Output Areas are a set of hierarchical geographic boundaries designed and maintained by the Office for National Statistics (ONS) in England and are specifically designed for the publication of statistics for small areas, such as census results. The layer of Output Areas used in this document are Lower Layer Super Output Areas (LSOA) which have approximately 1,500 residents. As of the 2011 Census there were 201 LSOA in Dudley. Output Area boundaries are only subject to change after a national Census, so are a stable geography for presenting data over time.

## **Wards**

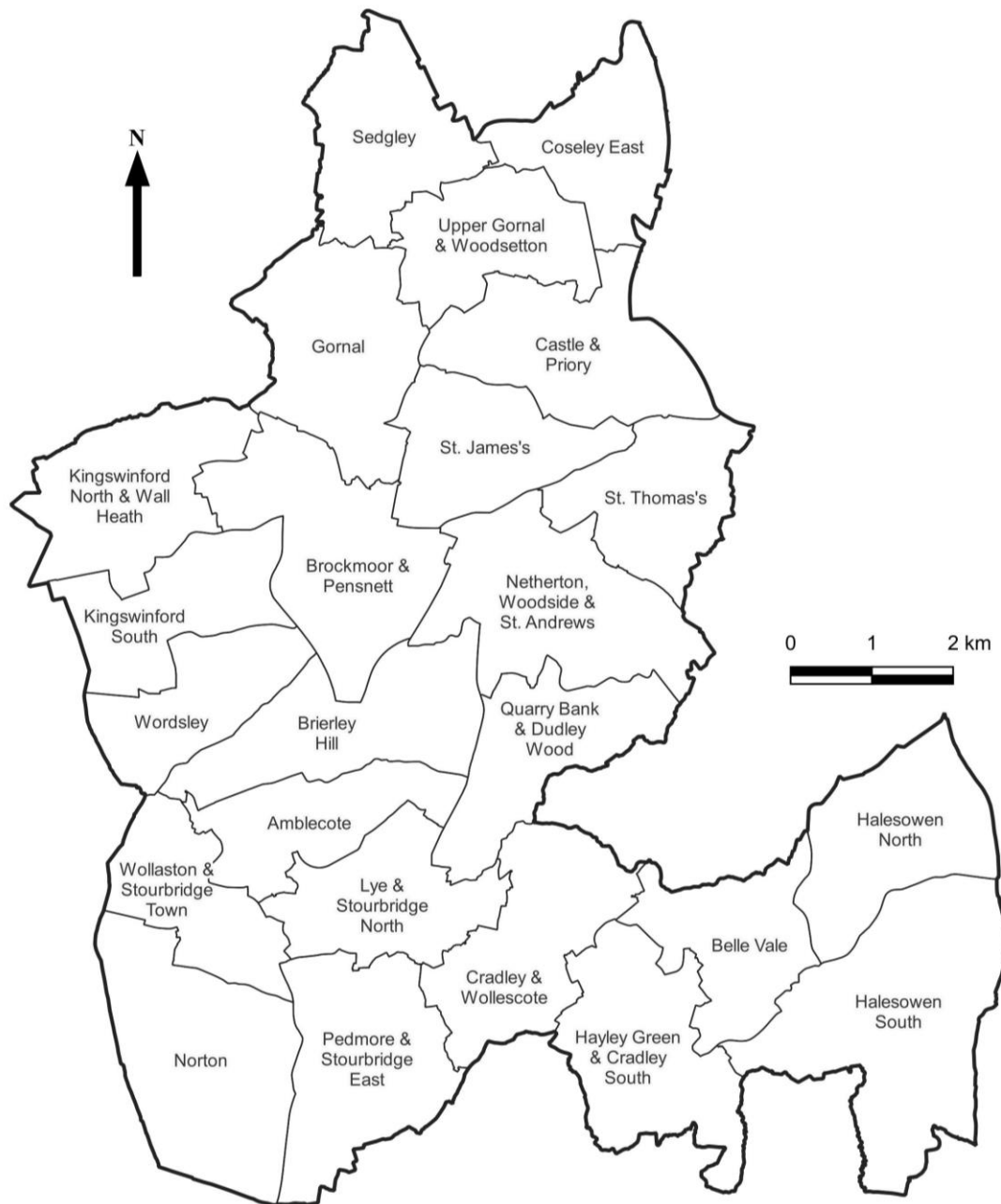
Dudley Metropolitan Borough is divided into 24 Electoral Wards, the spatial units used to elect local government councillors. Each Ward is represented by three councillors. Electoral Wards are managed by The Local Government Boundary Commission for England and are subject to change over time. These Wards are also used for the publication of various statistics.

**Figure 33:** Map of Lower Layer Super Output Areas (LSOA) in Dudley



Source: Ordnance Survey / Office for National Statistics (ONS)  
Produced by: Intelligence Team, Dudley MBC  
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**Figure 34:** Map of Dudley Metropolitan Borough Council's 24 Electoral Wards



Source: Ordnance Survey  
Produced by: Intelligence Team, Dudley MBC  
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## Appendices

### Appendix 1: Key to pharmacy locations in maps

**Table 15:** Map ID, Name and Addresses and PCN of Pharmacies within Dudley

ID	Pharmacy	Address	Postcode	PCN
1	Asda Pharmacy	PEARSON STREET, BRIERLEY HILL	DY5 3BJ	BH
2	Asda Pharmacy	THE CORNBOW SHOPPING CTR, QUEENSWAY MALL, HALESOWEN	B63 4AB	H
3	Boots	14 ALBION PARADE, WALL HEATH	DY6 0NP	KW
4	Boots	25-26 MARKET PLACE, DUDLEY	DY1 1PJ	DN
5	Boots	16-18 MARKET STREET, KINGSWINFORD	DY6 9JR	KW
6	Boots	STOURBRIDGE HTH & SCC, JOHN CORBETT DRIVE, AMBLECOTE	DY8 4HZ	BH
7	Boots	141 BRIDGNORTH ROAD, WOLLASTON	DY8 3NX	SWL
8	Boots	UNIT3, MERRY HILL CENTRE, BRIERLEY HILL	DY5 1QT	BH
9	Boots	STEPPING STONES MED CTR, STAFFORD STREET, DUDLEY	DY1 1RT	DN
10	Boots	5 RYEMARKET, STOURBRIDGE	DY8 1HJ	SWL
11	Boots	OFF SQUIRES COURT, WITHYMOOR VILLAGE, BRIERLEY HILL	DY5 3RJ	BH
12	Brettell Lane Pharmacy	108B BRETTELL LANE, STOURBRIDGE	DY8 4BS	BH
13	Broadway Pharmacy	95 THE BROADWAY, NORTON, STOURBRIDGE	DY8 3HX	SWL
14	County Pharmacy Ltd	15 WORDSLEY GREEN CENTRE, WORDSLEY	DY8 5PD	KW
15	Day Night Pharmacy	20 ALBION STREET, BRIERLEY HILL	DY5 3EE	BH
16	Day Night Pharmacy	45 HIGH STREET, LYE	DY9 8LQ	SWL
17	Dudley Wood Pharmacy	2 BUSH ROAD, DUDLEY	DY2 0BH	DN
18	Eggington JT Ltd	ABBEY ROAD, LOWER GORNAL	DY3 2PG	SCG
19	Evergreen Pharmacy	161 COOMBS ROAD, HALESOWEN	B62 8AF	H
20	Gornal Wood Pharmacy	18 ABBEY ROAD, GORNAL WOOD	DY3 2PG	SCG
21	Grange Pharmacy	8 HOWLEY GRANGE ROAD, HALESOWEN	B62 0HN	H
22	Hawne Chemist	177 STOURBRIDGE ROAD, HALESOWEN	B63 3UD	H
23	Holly Hall Pharmacy	178 STOURBRIDGE ROAD, HOLLY HALL, DUDLEY	DY1 2ER	DN
24	Jhoots Pharmacy	100A MILKING BANK, DUDLEY	DY1 2TY	SCG
25	Jhoots Pharmacy	468 HIGH STREET, KINGSWINFORD	DY6 8AW	KW
26	Jhoots Pharmacy	145 HALESOWEN ROAD, NETHERTON	DY2 9PY	DN
27	Jhoots Pharmacy	BRIERLEY HILL H & S C C, VENTURE WAY, BRIERLEY HILL	DY5 1RG	BH
28	Lad Chemist	30 MADELEY ROAD, HIGH ACRES, KINGSWINFORD	DY6 8PF	KW
29	Lloyds Pharmacy	173A HIGH STREET, LYE	DY9 8LN	SWL
30	Lloyds Pharmacy	11 PECKINGHAM STREET, HALESOWEN	B63 3AW	H
31	Lloyds Pharmacy	175 THE RIDGEWAY, SEDGLEY	DY3 3UH	SCG
32	Lloyds Pharmacy	MOSS GROVE SURGERY, 15 MOSS GROVE, KINGSWINFORD	DY6 9HS	KW

ID	Pharmacy	Address	Postcode	PCN
33	Lloyds Pharmacy	24-28 DUDLEY STREET, SEDGLEY	DY3 1SB	SCG
34	Lloyds Pharmacy	204 TALBOT STREET, BRIERLEY HILL	DY5 3DS	BH
35	Lloyds Pharmacy	WYCHBURY MEDICAL CTR, 121 OAKFIELD ROAD, STOURBRIDGE	DY9 9DS	SWL
36	Lloyds Pharmacy	ST MARGARETS WELL SURGERY, 2 QUARRY LANE, HALESOWEN	B63 4WD	H
37	Lloyds Pharmacy	WYTHYMOOR VILLAGE, SANDRINGHAM WAY, BRIERLEY HILL	DY5 3JR	BH
38	Lye Pharmacy	37 HIGH STREET, LYE	DY9 8LF	SWL
39	Manor Pharmacy	12 MANOR LANE, HALESOWEN	B62 8PY	H
40	McArdle I Ltd	92 HIGH STREET, BRIERLEY HILL	DY5 3AP	BH
41	Milan Chemist	137 HALESOWEN ROAD, NETHERTON	DY2 9PY	DN
42	Millard & Bullock	UNIT 2, JOSIAH HOUSE, CASTLE STREET, COSELEY	WV14 9DD	SCG
43	Modi Pharmacy	118 COLLEY GATE, HALESOWEN	B63 2BU	SWL
44	Morrisons Pharmacy	CHARTERFIELD SHOPPING CTR, STALLINGS LANE, KINGSWINFORM	DY6 7SH	KW
45	Murrays Pharmacy	5&6 HALESOWEN ROAD, HALESOWEN	B62 9AA	H
46	Murrays Pharmacy	33 THORNHILL ROAD, HALESOWEN	B63 1AU	H
47	Murrays Pharmacy	CROSS STREET HEALTH CTR, CROSS STREET, DUDLEY	DY1 1RN	DN
48	Murrays Pharmacy	37-38 HIGH STREET, QUARRY BANK, BRIERLEY HILL	DY5 2AA	BH
49	Murrays Pharmacy	ST JAMES MEDICAL PRACTICE, MALHOUSE DRIVE, DUDLEY	DY1 2BY	DN
50	Murrays Pharmacy	LION MEDICAL CTR, 2 LOWNDES ROAD, STOURBRIDGE	DY8 3SS	SWL
51	Murrays Pharmacy	57 QUEENSWAY, THE CORNBOW SHOPPING CTR, HALESOWEN	B63 4AG	H
52	Northway Pharmacy	6 ALDERWOOD PRECINCT, THE NORTHWAY, SEDGLEY	DY3 3QY	SCG
53	Pharmaco Dudley Limited	5 BEAN ROAD, DUDLEY	DY2 8TH	DN
54	Priory Community Pharmacy	95-97 PRIORY ROAD, DUDLEY	DY1 4EH	DN
55	Rajja Chemist	5 CLEMENT ROAD, HALESOWEN	B62 9LR	H
56	Stourbridge Pharmacy	35 WORCESTER STREET, STOURBRIDGE	DY8 1AT	SWL
57	Swinford Pharmacy	90 HAGLEY ROAD, STOURBRIDGE	DY8 1QU	SWL
58	Tesco Pharmacy	TESCO SUPERSTORE, BIRMINGHAM NEW ROAD, DUDLEY	DY1 4RP	DN
59	The Arcade Pharmacy	4 THE ARCADE, UPPER GORNAL	DY3 2DA	SCG
60	The Pharmacy Galleria	96 HIGH STREET, PENSNETT	DY5 4ED	BH
61	Village Pharmacy	9-11 MARKET STREET, KINGSWINFORM	DY6 9JS	KW
62	Woodsetton Pharmacy	41 BOURNE STREET, DUDLEY	DY3 1AF	SCG
63	Wrens Nest Pharmacy	100 MAPLE GREEN, DUDLEY	DY1 3QZ	SCG

PCN Key:

BH = Brierley Hill

DN = Dudley and Netherton

H = Halesowen

KW = Kingswinford and Wordsley

SCG = Sedgley, Coseley and Gornal

SWL = Stourbridge, Wollescote and Lye

**Table 16:** Map ID, Name and Addresses of Distance Selling Pharmacies and Dispensing Appliance Contractors within Dudley

<b>ID</b>	<b>Pharmacy</b>	<b>Address</b>	<b>Postcode</b>	<b>Type</b>
<b>64</b>	Dixons Green Pharmacy	75A DIXON GREEN ROAD, DUDLEY	DY2 7DJ	DSP
<b>65</b>	Meds At Home	UNIT 26, DELPH INDUSTRIAL ESTATE, DELPH ROAD, BRIERLEY HILL	DY5 2UA	DSP
<b>66</b>	Bullens Healthcare	UNIT 19A, THE HAYES TRADING ESTATE, FOLKES ROAD, STOURBRIDGE	DY9 8RG	DAC

## Appendix 2: Dudley GP Practices

**Table 17:** Map ID, Name and Postcode of GP Practices within Dudley

ID	Practice Name	Postcode	Code
1	Alexandra Medical Centre	B63 3UH	M87623
2	AW Surgeries	DY5 3EE	M87009
3	Bath Street Medical Centre	DY3 1LS	M87621
4	Bean Medical Practice	DY2 8TH	M87036
5	Castle Meadows Surgery	DY1 2TY	M87620
6	Central Clinic	DY2 7BX	M87605
7	Chapel Street Medical Centre	DY9 8BT	M87628
8	Clement Road Medical Practice	B62 9LR	M87034
9	Coseley Medical Centre	WV14 9DJ	M87021
10	Cross Street Health Centre	DY1 1RN	M87025
11	Dudley Wood Surgery	DY2 0EF	Y02212
12	Eve Hill Medical Practice	DY1 2QD	M87006
13	Feldon Lane Practice	B62 9DR	M87020
14	Halesowen Medical Practice	B63 4WD	M87602
15	High Oak Surgery	DY5 4DS	Y02653
16	Keelinge House Surgery	DY1 2ER	M87601
17	Kingswinford Medical Practice	DY6 8DN	M87008
18	Lapal Medical Practice	B62 0HP	M87014
19	Links Medical Practice	DY2 9PS	M87617
20	Lion Health	DY8 3SS	M87011
21	Lower Gornal Medical Practice	DY3 2NQ	M87015
22	Meadowbrook Surgery	B63 1AB	M87001
23	Moss Grove Surgery	DY6 9HS	M87003
24	Netherton Health Centre	DY2 9PU	M87028
25	Northway Medical Centre	DY3 3QY	M87037
26	Pedmore Medical Practice	DY9 8DJ	M87030
27	Quarry Bank Medical Centre	DY5 2AE	M87027
28	Quincy Rise Surgery	DY5 3JR	M87618
29	Rangeways Road Surgery	DY6 8PN	M87041
30	St James's Medical Practice 1	DY1 2BY	M87612
31	St James's Medical Practice 2	DY1 2BY	M87026
32	Steppingstones Medical Practice	DY1 1RT	M87017
33	Stourside Medical Practice	B63 3HN	Y01756
34	Summerhill Surgery	DY6 9JG	M87018
35	The Greens Health Centre	DY1 3QZ	M87012
36	The Limes Surgery Medical Centre	DY9 8LL	M87019
37	The Ridgeway Surgery	DY3 3UH	M87007
38	The Waterfront Surgery	DY5 1RU	M87010
39	Thorns Road Surgery	DY5 2JS	M87638

ID	Practice Name	Postcode	Code
40	Three Villages Medical Practice	DY8 4JB	M87005
41	Woodsetton Medical Centre	DY3 1AF	M87016
42	Wordsley Green Health Centre	DY8 5PD	M87023
43	Wychbury Medical Group	DY9 9DS	M87024

### Appendix 3: Pharmacies within 2km Boundary of Dudley by Upper Tier Local Authority (UTLA)

**Table 18:** Birmingham pharmacies within 2km of Dudley

ID	Pharmacy	Address	Postcode
80	Boots	61 STEVENS AVENUE, BIRMINGHAM	B32 3SD
81	Knights Bartley Green Pharmacy	1 CURDALE ROAD, BARTLEY GREEN, BIRMINGHAM	B32 4HD
82	Knights Jiggins Lane Pharmacy	17 JIGGINS LANE, BARTLEY GREEN, BIRMINGHAM	B32 3LE
83	Lloyds Pharmacy	17 FARADAY AVENUE, QUINTON, BIRMINGHAM	B32 1JP
84	Rajja Chemist	5 DWELLINGS LANE, QUINTON, BIRMINGHAM	B32 1RJ
85	Ridgacre HSE Pharmacy	RIDGACRE HOUSE MED CTR, 83 RIDGACRE ROAD, QUINTON, BIRMINGHAM	B32 2TJ

**Table 19:** Sandwell pharmacies within 2km of Dudley

ID	Pharmacy	Address	Postcode
86	Asda Pharmacy	OLD PARK LANE, OLDBURY	B69 4PU
87	Asda Pharmacy	WEDNESBURY OAK ROAD, TIPTON	DY4 0BP
88	Boots	24 HIGH STREET, ROWLEY REGIS	B65 0DR
89	Boots	1 HARTLEBURY ROAD, WARLEY, OLDBURY	B69 1DF
90	Duggals Chemist	75 PARK LANE EAST, TIPTON	DY4 8RP
91	Duggals Chemist	MOSTYN BUILDING, LOWER CHURCH LANE, TIPTON	DY4 7PE
92	Haden Vale Pharmacy	50 BARRS ROAD, CRADLEY HEATH	B64 7HG
93	Hill Top Pharmacy	1 POTTERY ROAD, OLDBURY	B68 9EX
94	Hills Pharmacy	15 HILL TOP ROAD, OLDBURY	B68 9DU
95	Hingley Pharmacy	DARBY STREET, ROWLEY REGIS	B65 0BA
96	Hingleys Chemist	59 CRADLEY ROAD, CRADLEY HEATH	B64 6AG
97	Hingleys Chemist	95 HIGH STREET, CRADLEY HEATH	B64 5HF
98	Jhoots Pharmacy	ROWLEY VILLAGE, WARLEY, ROWLEY REGIS	B65 9EN
99	Langley Pharmacy	21 LANGLEY HIGH STREET, OLDBURY	B69 4SN
100	Lloyds Pharmacy	WARLEY MEDICAL CENTRE, AMBROSE HOUSE, KINGSWAY, OLDBURY	B68 0RT
101	Lloyds Pharmacy	518 HAGLEY ROAD WEST, WARLEY, OLDBURY	B68 0BZ
102	Lloyds Pharmacy	HALESOWEN STREET, ROWLEY REGIS	B65 0HG
103	Murrays Healthcare	234 HALESOWEN ROAD, CRADLEY HEATH	B64 6HN
104	Murrays Healthcare	GLEBEFIELDS HEALTH CENTRE, ST. MARKS ROAD, TIPTON	DY4 0SN
105	Murrays Healthcare	NEPTUNE HEALTH PARK, SEDGLEY ROAD WEST, TIPTON	DY4 8LY



ID	Pharmacy	Address	Postcode
106	MW Phillips Chemists	396 LONG LANE, BLACKHEATH, ROWLEY REGIS	B65 0JE
107	Oldbury Pharmacy	196 CAUSEWAY GREEN ROAD, OLDBURY, WARLEY, OLDBURY	B68 8LS
108	Peaches Pharmacy	185 HALESOWEN ROAD, CRADLEY HEATH	B64 6HF
109	Pharmacy 365	249 HALESOWEN ROAD, CRADLEY HEATH	B64 6JD
110	Portway Pharmacy	51A NEW BIRMINGHAM ROAD, TIVIDALE, OLDBURY	B69 2JQ
111	Rowley Pharmacy	352 OLDBURY ROAD, ROWLEY REGIS	B65 0QH
112	Swanpool Pharmacy	SWANPOOL MEDICAL CENTRE, ST MARKS ROAD, TIPTON	DY4 0SZ
113	Tesco Pharmacy	1 FOXOAK STREET, CRADLEY HEATH	B64 5DF
114	Tivdale Pharmacy	213 REGENT ROAD, TIVIDALE, OLDBURY	B69 1RZ
115	Vishnu Pharmacy	57 HURST ROAD, WARLEY, SMETHWICK	B67 6LY

**Table 20:** Walsall pharmacies within 2km of Dudley

ID	Pharmacy	Address	Postcode
116	Brutons Pharmacy (Moxley)	101 HIGH STREET, MOXLEY, WEDNESBURY	WS10 8RT

**Table 21:** Wolverhampton pharmacies within 2km of Dudley

ID	Pharmacy	Address	Postcode
117	Anderson Chemist	311 DUDLEY ROAD, WOLVERHAMPTON	WV2 3JY
118	Boots	PROUDS LANE, BILSTON	WV14 6PW
119	Bradley Chemist	83 HALL GREEN STREET, BILSTON	WV14 8TH
120	Brutons Pharmacy (Bradley)	1 MERVYN PLACE, BRADLEY, BILSTON	WV14 8DD
121	Central Pharmacy	UNIT 6, PARK PARADE, OVERFIELD DRIVE, BILSTON	WV14 9XW
122	Church Pharmacy	45 CHURCH STREET, BILSTON	WV14 0AX
123	Dudley Road Pharmacy	425 DUDLEY ROAD, WOLVERHAMPTON	WV2 3AH
124	Ettingshall Pharmacy	3 NEW STREET, ETTINGSALL, WOLVERHAMPTON	WV2 2LR
125	High Street Pharmacy	76 HIGH STREET, BILSTON	WV14 0EP
126	Lloyds Pharmacy	PENN MANOR MEDICAL CENTRE, MANOR ROAD, PENN, WOLVERHAMPTON	WV4 5PY
127	Morrisons Pharmacy	MORRISONS SUPERMARKET, BLACK COUNTRY ROUTE, BILSTON	WV14 0DZ
128	Murrays Healthcare	128 CHILDS AVENUE, COSELEY, BILSTON	WV14 9XB
129	Phoenix Pharmacy	PHOENIX HEALTH CENTRE, PARKFIELD ROAD, WOLVERHAMPTON	WV4 6ED
130	Rexall Chemist	204 PENN ROAD, PENN, WOLVERHAMPTON	WV4 4AA
131	Supercare Pharmacy	UNIT 1 BLAKENHALL GARDENS, 420 DUDLEY ROAD, WOLVERHAMPTON	WV2 3AY
132	Superdrug Pharmacy	1 MARKET WAY, BILSTON	WV14 0DR

**Table 22:** Worcestershire pharmacies within 2km of Dudley

ID	Pharmacy	Address	Postcode
133	Well Pharmacy	96 WORCESTER ROAD, HAGLEY, STOURBRIDGE	DY9 0NJ

## Appendix 4A: Pharmacy IT, Languages and Collection / Delivery services

**Table 23:** Pharmacy IT, Languages and Collection / Delivery services

ID	Pharmacy	Information Technology			Languages - Other than English		Collection of:	Delivery of:	
		EPS 2 Enabled	Unrestricted Internet Access	NHS Mail account	Spoken by pharmacy staff	Spoken by community pharmacy serves	prescriptions from surgeries	dispensed medicines: free	dispensed medicines: chargeable
1	Asda Pharmacy	✓	✓	✓	✓		✓		
2	Asda Pharmacy	✓	✓	✓					
3	Boots	✓	✓	✓	✓		✓		✓
4	Boots	✓	✓	✓	✓		✓	✓	✓
5	Boots	✓	✓	✓	✓		✓		✓
6	Boots	✓	✓	✓	✓		✓		✓
7	Boots	✓	✓	✓			✓		✓
8	Boots	✓	✓	✓			✓		✓
9	Boots	✓		✓	✓	✓	✓		✓
10	Boots	✓	✓	✓			✓		✓
11	Boots	✓	✓	✓					✓
12	Brettell Lane Pharmacy	✓	✓	✓	✓		✓	✓	
13	Broadway Pharmacy	✓	✓	✓	✓		✓	✓	
14	County Pharmacy Ltd	✓	✓	✓	✓		✓	✓	✓
15	Day Night Pharmacy	✓	✓	✓	✓	✓	✓	✓	
16	Day Night Pharmacy	✓	✓	✓	✓	✓	✓	✓	
17	Dudley Wood Pharmacy	✓	✓	✓			✓	✓	
18	Eggington JT Ltd	✓	✓	✓			✓	✓	
19	Evergreen Pharmacy	✓		✓			✓	✓	
20	Gornal Wood Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓

ID	Pharmacy	Information Technology			Languages - Other than English		Collection of:	Delivery of:	
		EPS 2 Enabled	Unrestricted Internet Access	NHS Mail account	Spoken by pharmacy staff	Spoken by community pharmacy serves	prescriptions from surgeries	dispensed medicines: free	dispensed medicines: chargeable
21	Grange Pharmacy	✓	✓	✓	✓	✓	✓	✓	
22	Hawne Chemist	✓	✓	✓			✓	✓	
23	Holly Hall Pharmacy	✓	✓	✓	✓	✓	✓	✓	
24	Jhoots Pharmacy	✓	✓	✓			✓	✓	
25	Jhoots Pharmacy	✓		✓			✓	✓	
26	Jhoots Pharmacy	✓	✓	✓			✓	✓	
27	Jhoots Pharmacy	✓	✓	✓			✓	✓	
28	Lad Chemist	✓	✓	✓	✓	✓	✓	✓	
29	Lloyds Pharmacy	✓		✓	✓		✓		✓
30	Lloyds Pharmacy	✓	✓	✓			✓		✓
31	Lloyds Pharmacy	✓	✓	✓			✓		✓
32	Lloyds Pharmacy	✓		✓					✓
33	Lloyds Pharmacy	✓	✓	✓	✓	✓	✓		✓
34	Lloyds Pharmacy	✓		✓	✓		✓		
35	Lloyds Pharmacy	✓		✓			✓		✓
36	Lloyds Pharmacy	✓		✓	✓		✓		
37	Lloyds Pharmacy	✓	✓	✓			✓		
38	Lye Pharmacy	✓	✓	✓	✓	✓	✓	✓	
39	Manor Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓
40	McArdle I Ltd	✓	✓	✓	✓	✓	✓	✓	
41	Milan Chemist	✓	✓	✓	✓		✓	✓	
42	Millard & Bullock	✓	✓	✓			✓	✓	
43	Modi Pharmacy	✓	✓	✓	✓	✓	✓	✓	

ID	Pharmacy	Information Technology			Languages - Other than English		Collection of:	Delivery of:	
		EPS 2 Enabled	Unrestricted Internet Access	NHS Mail account	Spoken by pharmacy staff	Spoken by community pharmacy serves	prescriptions from surgeries	dispensed medicines: free	dispensed medicines: chargeable
44	Morrisons Pharmacy	✓	✓	✓			✓	✓	
45	Murrays Pharmacy	✓	✓	✓			✓		
46	Murrays Pharmacy	✓	✓	✓		✓	✓		
47	Murrays Pharmacy	✓		✓	✓	✓	✓		
48	Murrays Pharmacy	✓	✓	✓	✓	✓	✓		
49	Murrays Pharmacy	✓	✓	✓	✓	✓	✓		
50	Murrays Pharmacy	✓	✓	✓		✓	✓		
51	Murrays Pharmacy	✓	✓	✓	✓	✓	✓		
52	Northway Pharmacy	✓	✓	✓			✓	✓	
53	Pharmaco Dudley Limited	✓		✓	✓		✓	✓	
54	Priory Community Pharmacy	✓	✓	✓			✓	✓	
55	Rajja Chemist	✓	✓	✓	✓	✓	✓	✓	
56	Stourbridge Pharmacy	✓	✓	✓			✓	✓	
57	Swinford Pharmacy	✓	✓	✓			✓	✓	
58	Tesco Pharmacy	✓		✓	✓				
59	The Arcade Pharmacy	✓	✓	✓			✓	✓	
60	The Pharmacy Galleria	✓		✓	✓	✓	✓	✓	
61	Village Pharmacy	✓		✓	✓		✓	✓	✓
62	Woodsetton Pharmacy	✓	✓	✓	✓		✓	✓	
63	Wrens Nest Pharmacy	✓	✓	✓	✓	✓	✓	✓	

Source: PNA Contractor Questionnaire

## Appendix 4B: Pharmacy accessibility

**Table 24:** Pharmacy accessibility

ID	Pharmacy	Wheelchair Access to:			Disabled Parking (within 10m)	Disabled Toilet	Automatic Door	Doorbell	Hearing Loop	Large Print Labels
		Entrance (unaided)	Consultation Room	All Areas						
1	Asda Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	
2	Asda Pharmacy	✓	✓	✓	✓	✓	✓			✓
3	Boots	✓	✓	✓	✓		✓		✓	✓
4	Boots	✓	✓	✓			✓		✓	✓
5	Boots	✓	✓	✓			✓		✓	✓
6	Boots	✓		✓	✓		✓		✓	✓
7	Boots	✓	✓	✓	✓	✓	✓	✓	✓	✓
8	Boots	✓	✓	✓			✓		✓	✓
9	Boots	✓		✓	✓				✓	✓
10	Boots	✓		✓	✓		✓		✓	
11	Boots	✓	✓	✓	✓		✓		✓	✓
12	Brettell Lane Pharmacy	✓	✓	✓	✓					✓
13	Broadway Pharmacy	✓	✓	✓				✓		✓
14	County Pharmacy Ltd			✓	✓					✓
15	Day Night Pharmacy	✓	✓	✓	✓					
16	Day Night Pharmacy	✓	✓	✓				✓		✓
17	Dudley Wood Pharmacy	✓	✓	✓	✓					✓
18	Eggington JT Ltd	✓	✓	✓	✓					✓
19	Evergreen Pharmacy			✓					✓	
20	Gornal Wood Pharmacy	✓	✓	✓	✓	✓		✓	✓	✓
21	Grange Pharmacy		✓	✓						✓

ID	Pharmacy	Wheelchair Access to:			Disabled Parking (within 10m)	Disabled Toilet	Automatic Door	Doorbell	Hearing Loop	Large Print Labels
		Entrance (unaided)	Consultation Room	All Areas						
22	Hawne Chemist	✓	✓	✓	✓		✓			✓
23	Holly Hall Pharmacy	✓	✓	✓	✓			✓		✓
24	Jhoots Pharmacy	✓	✓	✓	✓			✓		✓
25	Jhoots Pharmacy	✓	✓	✓	✓				✓	
26	Jhoots Pharmacy	✓	✓	✓	✓					✓
27	Jhoots Pharmacy	✓	✓	✓	✓		✓		✓	
28	Lad Chemist	✓	✓	✓	✓					✓
29	Lloyds Pharmacy	✓	✓	✓	✓			✓	✓	
30	Lloyds Pharmacy			✓	✓		✓	✓	✓	✓
31	Lloyds Pharmacy	✓	✓	✓	✓	✓	✓	✓	✓	✓
32	Lloyds Pharmacy	✓	✓	✓	✓				✓	
33	Lloyds Pharmacy	✓	✓	✓	✓		✓		✓	✓
34	Lloyds Pharmacy			✓			✓		✓	
35	Lloyds Pharmacy	✓	✓	✓	✓				✓	
36	Lloyds Pharmacy	✓	✓	✓	✓				✓	
37	Lloyds Pharmacy	✓	✓	✓	✓	✓	✓		✓	
38	Lye Pharmacy	✓		✓	✓			✓	✓	✓
39	Manor Pharmacy	✓	✓	✓	✓	✓	✓		✓	✓
40	McArdle I Ltd	✓	✓	✓	✓					✓
41	Milan Chemist	✓	✓	✓						✓
42	Millard & Bullock	✓	✓	✓	✓		✓			✓
43	Modi Pharmacy		✓							✓
44	Morrisons Pharmacy	✓	✓	✓	✓	✓	✓		✓	
45	Murrays Pharmacy	✓	✓	✓	✓		✓			✓

ID	Pharmacy	Wheelchair Access to:			Disabled Parking (within 10m)	Disabled Toilet	Automatic Door	Doorbell	Hearing Loop	Large Print Labels
		Entrance (unaided)	Consultation Room	All Areas						
46	Murrays Pharmacy	✓	✓	✓			✓			✓
47	Murrays Pharmacy	✓	✓	✓	✓		✓			✓
48	Murrays Pharmacy	✓	✓	✓			✓			✓
49	Murrays Pharmacy	✓	✓	✓	✓		✓		✓	✓
50	Murrays Pharmacy	✓	✓	✓	✓		✓			✓
51	Murrays Pharmacy	✓	✓	✓	✓				✓	✓
52	Northway Pharmacy		✓	✓	✓					✓
53	Pharmaco Dudley Limited	✓	✓	✓				✓		✓
54	Priory Community Pharmacy	✓	✓	✓	✓	✓	✓	✓		✓
55	Rajja Chemist	✓	✓	✓	✓		✓	✓		✓
56	Stourbridge Pharmacy								✓	
57	Swinford Pharmacy	✓	✓	✓	✓			✓		✓
58	Tesco Pharmacy	✓	✓	✓	✓	✓	✓		✓	✓
59	The Arcade Pharmacy			✓						✓
60	The Pharmacy Galleria	✓	✓	✓	✓			✓		✓
61	Village Pharmacy	✓	✓	✓	✓		✓		✓	✓
62	Woodsetton Pharmacy	✓	✓	✓	✓	✓	✓		✓	✓
63	Wrens Nest Pharmacy	✓	✓	✓	✓	✓			✓	✓

Source: PNA Contractor Questionnaire

## Appendix 5A: Dudley Pharmacies and the Services they provide

**Table 25:** Types of Pharmacies within Dudley and the Services they provide

ID	Pharmacy	Distance Selling <sup>1</sup>	100 Hour a Week or more Opening <sup>1</sup>	Advanced Services			CCG Commissioned Services <sup>2</sup>		
				CPCS <sup>2</sup>	NMS <sup>3</sup>	Flu Vaccination <sup>3</sup>	MAS	CUES	SPCDS
1	Asda Pharmacy		✓	✓	✓	✓	✓	✓	
2	Asda Pharmacy		✓	✓	✓	✓	✓	✓	
3	Boots			✓	✓	✓			
4	Boots			✓	✓	✓		✓	✓
5	Boots			✓	✓	✓			
6	Boots			✓	✓	✓			
7	Boots			✓	✓	✓			
8	Boots			✓	✓	✓			
9	Boots			✓	✓	✓			
10	Boots			✓	✓	✓			
11	Boots			✓	✓	✓			
12	Brettell Lane Pharmacy			✓	✓	✓	✓	✓	
13	Broadway Pharmacy			✓	✓	✓	✓	✓	
14	County Pharmacy Ltd			✓	✓			✓	
15	Day Night Pharmacy			✓	✓		✓	✓	
16	Day Night Pharmacy		✓	✓	✓	✓	✓	✓	
17	Dudley Wood Pharmacy			✓	✓	✓	✓	✓	
18	Eggington JT Ltd			✓		✓	✓	✓	
19	Evergreen Pharmacy			✓	✓	✓	✓	✓	
20	Gornal Wood Pharmacy			✓	✓	✓	✓	✓	
21	Grange Pharmacy			✓	✓	✓	✓	✓	
22	Hawne Chemist			✓	✓	✓	✓	✓	



ID	Pharmacy	Distance Selling <sup>1</sup>	100 Hour a Week or more Opening <sup>1</sup>	Advanced Services			CCG Commissioned Services <sup>2</sup>		
				CPCS <sup>2</sup>	NMS <sup>3</sup>	Flu Vaccination <sup>3</sup>	MAS	CUES	SPCDS
23	Holly Hall Pharmacy			✓	✓	✓	✓	✓	
24	Jhoots Pharmacy			✓	✓	✓	✓	✓	
25	Jhoots Pharmacy			✓	✓	✓	✓	✓	
26	Jhoots Pharmacy			✓	✓	✓	✓	✓	
27	Jhoots Pharmacy		✓	✓	✓	✓	✓		✓
28	Lad Chemist			✓	✓	✓	✓	✓	
29	Lloyds Pharmacy			✓	✓	✓			
30	Lloyds Pharmacy			✓	✓	✓			
31	Lloyds Pharmacy			✓	✓	✓			
32	Lloyds Pharmacy			✓	✓	✓			
33	Lloyds Pharmacy			✓	✓	✓			
34	Lloyds Pharmacy			✓	✓	✓			
35	Lloyds Pharmacy			✓	✓	✓			
36	Lloyds Pharmacy			✓	✓	✓			
37	Lloyds Pharmacy		✓	✓	✓	✓			
38	Lye Pharmacy		✓	✓	✓	✓	✓	✓	
39	Manor Pharmacy			✓	✓	✓	✓	✓	
40	McArdle I Ltd			✓	✓	✓	✓	✓	
41	Milan Chemist			✓	✓	✓	✓	✓	
42	Millard & Bullock			✓	✓	✓	✓	✓	
43	Modi Pharmacy			✓	✓	✓	✓	✓	
44	Morrisons Pharmacy			✓	✓	✓	✓	✓	
45	Murrays Pharmacy			✓	✓	✓	✓	✓	
46	Murrays Pharmacy			✓	✓	✓	✓	✓	✓

ID	Pharmacy	Distance Selling <sup>1</sup>	100 Hour a Week or more Opening <sup>1</sup>	Advanced Services			CCG Commissioned Services <sup>2</sup>		
				CPCS <sup>2</sup>	NMS <sup>3</sup>	Flu Vaccination <sup>3</sup>	MAS	CUES	SPCDS
47	Murrays Pharmacy			✓	✓	✓	✓	✓	
48	Murrays Pharmacy			✓	✓	✓	✓	✓	
49	Murrays Pharmacy			✓	✓	✓	✓	✓	
50	Murrays Pharmacy			✓	✓	✓	✓	✓	
51	Murrays Pharmacy			✓	✓	✓	✓	✓	
52	Northway Pharmacy			✓	✓	✓	✓	✓	
53	Pharmaco Dudley Limited			✓	✓	✓	✓	✓	
54	Priory Community Pharmacy			✓	✓	✓	✓	✓	
55	Rajja Chemist			✓	✓	✓		✓	
56	Stourbridge Pharmacy			✓	✓				
57	Swinford Pharmacy			✓	✓	✓	✓	✓	✓
58	Tesco Pharmacy			✓	✓	✓	✓	✓	
59	The Arcade Pharmacy			✓	✓	✓	✓	✓	
60	The Pharmacy Galleria			✓	✓		✓	✓	
61	Village Pharmacy			✓	✓	✓	✓	✓	
62	Woodsetton Pharmacy			✓	✓	✓	✓	✓	
63	Wrens Nest Pharmacy			✓	✓	✓	✓	✓	
64	Dixons Green Pharmacy	✓		✓					
65	Meds At Home	✓		✓					

Sources: 1. NHS / 2. Black Country and West Birmingham CCG / 3. PNA Contractor Questionnaire

CPCS = Community Pharmacist Consultation Service

NMS = New Medicine Service

MAS = Pharmacy First, Minor Ailment Service

CUES = COVID-19 Urgent Eye Care Service (previously known as MECS, Minor Eye Conditions Service)

SPCDS = Specialist Palliative Care Drugs Supply Service

## Appendix 5B: Dudley Pharmacies and the Services they provide – Public Health Specific

**Table 26:** Pharmacies within Dudley and the Public Health Services they provide

ID	Pharmacy	Public Health Commissioned Services								
		Alcohol Screening & Brief Intervention <sup>1,2</sup>	Sexual Health - Chlamydia Screening <sup>1,4</sup>	Sexual Health - Emergency Hormonal Contraception <sup>1,2</sup>	Smoking Cessation - NRT Voucher Scheme <sup>1</sup>	Substance Misuse - Supervised Consumption <sup>3</sup>	Substance Misuse - Needle Exchange <sup>3</sup>	Substance Misuse – Nalaxone Supply <sup>3</sup>	NHS Health Checks <sup>2</sup>	Healthy Start Vitamins <sup>2</sup>
1	Asda Pharmacy				✓					
2	Asda Pharmacy		✓	✓		✓			✓	✓
3	Boots			✓		✓				
4	Boots		✓	✓					✓	
5	Boots		✓	✓		✓				
6	Boots		✓	✓						
7	Boots		✓	✓					✓	
8	Boots	✓	✓	✓					✓	
9	Boots					✓				
10	Boots		✓	✓			✓	✓		
11	Boots			✓		✓				
12	Brettell Lane Pharmacy	✓	✓	✓		✓			✓	
13	Broadway Pharmacy					✓			✓	
14	County Pharmacy Ltd									

ID	Pharmacy	Public Health Commissioned Services								
		Alcohol Screening & Brief Intervention <sup>1,2</sup>	Sexual Health - Chlamydia Screening <sup>1,4</sup>	Sexual Health - Emergency Hormonal Contraception <sup>1,2</sup>	Smoking Cessation - NRT Voucher Scheme <sup>1</sup>	Substance Misuse - Supervised Consumption <sup>3</sup>	Substance Misuse - Needle Exchange <sup>3</sup>	Substance Misuse – Naloxone Supply <sup>3</sup>	NHS Health Checks <sup>2</sup>	Healthy Start Vitamins <sup>2</sup>
15	Day Night Pharmacy					✓	✓	✓		
16	Day Night Pharmacy		✓			✓				
17	Dudley Wood Pharmacy					✓			✓	
18	Eggington JT Ltd			✓	✓	✓				
19	Evergreen Pharmacy	✓	✓							
20	Gornal Wood Pharmacy	✓		✓	✓	✓				✓
21	Grange Pharmacy	✓								
22	Hawne Chemist		✓	✓		✓				
23	Holly Hall Pharmacy		✓	✓		✓	✓	✓		
24	Jhoots Pharmacy	✓	✓		✓				✓	
25	Jhoots Pharmacy	✓	✓	✓		✓				
26	Jhoots Pharmacy	✓	✓	✓		✓				
27	Jhoots Pharmacy	✓	✓	✓	✓	✓			✓	
28	Lad Chemist			✓						
29	Lloyds Pharmacy									
30	Lloyds Pharmacy						✓	✓		
31	Lloyds Pharmacy			✓					✓	
32	Lloyds Pharmacy									
33	Lloyds Pharmacy			✓		✓	✓	✓	✓	

ID	Pharmacy	Public Health Commissioned Services								
		Alcohol Screening & Brief Intervention <sup>1,2</sup>	Sexual Health - Chlamydia Screening <sup>1,4</sup>	Sexual Health - Emergency Hormonal Contraception <sup>1,2</sup>	Smoking Cessation - NRT Voucher Scheme <sup>1</sup>	Substance Misuse - Supervised Consumption <sup>3</sup>	Substance Misuse - Needle Exchange <sup>3</sup>	Substance Misuse – Naloxone Supply <sup>3</sup>	NHS Health Checks <sup>2</sup>	Healthy Start Vitamins <sup>2</sup>
34	Lloyds Pharmacy			✓					✓	
35	Lloyds Pharmacy			✓						
36	Lloyds Pharmacy					✓				
37	Lloyds Pharmacy									
38	Lye Pharmacy		✓	✓		✓	✓	✓	✓	
39	Manor Pharmacy			✓	✓	✓				
40	McArdle I Ltd	✓	✓	✓		✓				
41	Milan Chemist	✓	✓	✓	✓	✓	✓	✓		
42	Millard & Bullock		✓	✓						
43	Modi Pharmacy		✓	✓		✓			✓	
44	Morrisons Pharmacy		✓	✓		✓	✓	✓	✓	✓
45	Murrays Pharmacy	✓	✓	✓	✓	✓			✓	
46	Murrays Pharmacy	✓	✓	✓	✓	✓			✓	
47	Murrays Pharmacy	✓	✓	✓	✓	✓				
48	Murrays Pharmacy	✓	✓	✓	✓	✓				
49	Murrays Pharmacy	✓	✓	✓	✓	✓			✓	
50	Murrays Pharmacy	✓	✓	✓	✓	✓			✓	
51	Murrays Pharmacy	✓	✓	✓	✓	✓			✓	✓
52	Northway Pharmacy		✓	✓		✓				

ID	Pharmacy	Public Health Commissioned Services								
		Alcohol Screening & Brief Intervention <sup>1,2</sup>	Sexual Health - Chlamydia Screening <sup>1,4</sup>	Sexual Health - Emergency Hormonal Contraception <sup>1,2</sup>	Smoking Cessation - NRT Voucher Scheme <sup>1</sup>	Substance Misuse - Supervised Consumption <sup>3</sup>	Substance Misuse - Needle Exchange <sup>3</sup>	Substance Misuse – Naloxone Supply <sup>3</sup>	NHS Health Checks <sup>2</sup>	Healthy Start Vitamins <sup>2</sup>
53	Pharmaco Dudley Limited	✓	✓			✓				
54	Priory Community Pharmacy		✓	✓		✓	✓	✓	✓	✓
55	Rajja Chemist				✓					
56	Stourbridge Pharmacy									
57	Swinford Pharmacy	✓	✓	✓	✓	✓			✓	
58	Tesco Pharmacy		✓	✓		✓				✓
59	The Arcade Pharmacy		✓	✓		✓				
60	The Pharmacy Galleria	✓	✓	✓					✓	
61	Village Pharmacy		✓	✓		✓				✓
62	Woodsetton Pharmacy		✓	✓		✓	✓	✓	✓	
63	Wrens Nest Pharmacy			✓		✓			✓	

Sources: 1. PNA Contractor Questionnaire / 2. Directorate of Public Health and Wellbeing, Dudley MBC / 3. Change Grow Live (CGL) / 4. PharmOutcomes

## Appendix 6: Dudley Pharmacy Opening Times

**Table 27:** Opening Hours of Pharmacies within Dudley

ID	Name	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
1	Asda Pharmacy	08:00-23:00	07:00-23:00	07:00-23:00	07:00-23:00	07:00-23:00	07:00-22:00	10:00-16:00
2	Asda Pharmacy	08:00-23:00	07:00-23:00	07:00-23:00	07:00-23:00	07:00-23:00	07:00-22:00	10:00-16:00
3	Boots	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00, 14:00-17:30	CLOSED
4	Boots	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	CLOSED
5	Boots	09:00-12:30, 13:00-17:30	09:00-12:30, 13:00-17:30	09:00-12:30, 13:00-17:30	09:00-12:30, 13:00-17:30	09:00-12:30, 13:00-17:30	09:00-12:30, 13:00-17:00	CLOSED
6	Boots	08:30-13:00, 14:00-18:00	08:30-13:00, 14:00-18:00	08:30-13:00, 14:00-18:00	08:30-13:00, 14:00-18:00	08:30-13:00, 14:00-18:00	CLOSED	CLOSED
7	Boots	09:00-12:00, 13:00-18:00	09:00-12:00, 13:00-18:00	09:00-12:00, 13:00-18:00	09:00-12:00, 13:00-18:00	09:00-12:00, 13:00-18:00	09:00-12:00, 13:00-17:00	CLOSED
8	Boots	09:00-19:00	09:00-19:00	09:00-19:00	09:00-19:00	09:00-19:00	09:00-18:00	11:00-17:00
9	Boots	09:00-13:00, 14:00-18:30	09:00-13:00, 14:00-18:30	09:00-13:00, 14:00-18:30	09:00-13:00, 14:00-18:30	09:00-13:00, 14:00-18:30	CLOSED	CLOSED
10	Boots	09:00-13:00, 14:00-17:30	09:00-13:00, 14:00-17:30	09:00-13:00, 14:00-17:30	09:00-13:00, 14:00-17:30	09:00-13:00, 14:00-17:30	09:00-13:00, 14:00-17:30	CLOSED
11	Boots	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	CLOSED	CLOSED
12	Brettell Lane Pharmacy	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00	CLOSED
13	Broadway Pharmacy	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00	CLOSED
14	County Pharmacy Ltd	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00	CLOSED
15	Day Night Pharmacy	09:00-19:00	09:00-19:00	09:00-19:00	09:00-19:00	09:00-19:00	09:00-17:30	CLOSED
16	Day Night Pharmacy	07:30-22:30	07:30-22:30	07:30-22:30	07:30-22:30	07:30-22:30	07:30-22:30	09:00-19:00
17	Dudley Wood Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:30-12:30	CLOSED

ID	Name	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
18	Eggington JT Ltd	09:00-13:00, 13:30-18:00	09:00-13:00, 13:30-18:00	09:00-13:00, 13:30-18:00	09:00-13:00, 13:30-18:00	09:00-13:00, 13:30-18:00	09:00-13:00, 14:00-17:00	CLOSED
19	Evergreen Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	09:00-18:00	CLOSED	CLOSED
20	Gornal Wood Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-14:00	CLOSED
21	Grange Pharmacy	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	CLOSED	CLOSED
22	Hawne Chemist	09:00-19:00	09:00-19:00	09:00-19:00	09:00-19:00	09:00-19:00	09:00-13:00	CLOSED
23	Holly Hall Pharmacy	08:30-14:00, 14:30-18:30	08:30-14:00, 14:30-18:30	08:30-14:00, 14:30-18:30	08:30-14:00, 14:30-18:30	08:30-14:00, 14:30-18:30	08:30-12:00	CLOSED
24	Jhoots Pharmacy	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	CLOSED	CLOSED
25	Jhoots Pharmacy	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	CLOSED	CLOSED
26	Jhoots Pharmacy	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	CLOSED	CLOSED
27	Jhoots Pharmacy	08:00-22:30	08:00-22:30	08:00-22:30	08:00-22:30	08:00-22:30	08:00-22:30	09:30-22:30
28	Lad Chemist	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED
29	Lloyds Pharmacy	08:30-19:00	08:30-19:00	08:30-19:00	08:30-19:00	08:30-19:00	09:00-13:00	CLOSED
30	Lloyds Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED
31	Lloyds Pharmacy	08:30-19:00	08:30-19:00	08:30-19:00	08:30-19:00	08:30-19:00	CLOSED	CLOSED
32	Lloyds Pharmacy	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	CLOSED	CLOSED
33	Lloyds Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-17:00	CLOSED
34	Lloyds Pharmacy	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	CLOSED	CLOSED
35	Lloyds Pharmacy	08:30-18:15	08:30-18:00	08:30-18:15	08:30-18:00	08:30-18:15	08:30-12:30	CLOSED
36	Lloyds Pharmacy	08:45-18:15	08:45-18:15	08:45-18:15	08:45-18:15	08:45-18:15	CLOSED	CLOSED
37	Lloyds Pharmacy	07:00-23:00	07:00-23:00	07:00-23:00	07:00-23:00	07:00-23:00	07:00-22:00	10:00-16:00
38	Lye Pharmacy	08:00-23:00	08:00-23:00	08:00-23:00	08:00-23:00	08:00-23:00	08:00-21:00	09:00-21:00
39	Manor Pharmacy	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-14:00	CLOSED
40	McArdle I Ltd	09:00-18:00	09:00-18:00	09:00-17:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED
41	Milan Chemist	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-15:00	CLOSED
42	Millard & Bullock	08:45-18:30	08:45-18:30	08:45-18:30	08:45-18:30	08:45-18:30	09:00-17:00	CLOSED



ID	Name	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
43	Modi Pharmacy	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-16:00	09:00-13:00, 14:00-18:00	09:00-13:00	CLOSED
44	Morrisons Pharmacy	08:00-20:00	08:00-20:00	08:00-20:00	08:00-20:00	08:00-20:00	08:00-19:00	10:00-16:00
45	Murrays Pharmacy	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:00	CLOSED
46	Murrays Pharmacy	08:30-18:15	08:30-18:15	08:30-18:15	08:30-13:00	08:30-18:15	09:00-13:00	CLOSED
47	Murrays Pharmacy	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	CLOSED	CLOSED
48	Murrays Pharmacy	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-13:00	CLOSED
49	Murrays Pharmacy	09:00-19:00	09:00-19:00	09:00-19:00	09:00-19:00	09:00-19:00	09:00-13:00	CLOSED
50	Murrays Pharmacy	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	09:00-17:30	CLOSED
51	Murrays Pharmacy	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:00	CLOSED
52	Northway Pharmacy	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:30-12:30	CLOSED
53	Pharmaco Dudley Limited	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	CLOSED	CLOSED
54	Priory Community Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-17:00	09:00-18:00	09:30-12:30	CLOSED
55	Rajja Chemist	09:00-18:30	09:00-18:30	09:00-18:30	09:00-13:00	09:00-18:30	CLOSED	CLOSED
56	Stourbridge Pharmacy	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	09:00-12:00	CLOSED
57	Swinford Pharmacy	09:00-19:00	09:00-19:00	09:00-19:00	09:00-18:00	09:00-19:00	09:00-13:00	CLOSED
58	Tesco Pharmacy	08:00-21:00	08:00-21:00	08:00-21:00	08:00-21:00	08:00-21:00	08:00-21:00	10:00-16:00
59	The Arcade Pharmacy	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:30-13:00	CLOSED
60	The Pharmacy Galleria	09:00-19:00	09:00-19:00	09:00-19:00	09:00-19:00	09:00-19:00	08:30-13:00	10:00-14:00
61	Village Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-14:00	CLOSED
62	Woodsetton Pharmacy	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	CLOSED	CLOSED
63	Wrens Nest Pharmacy	09:00-13:00, 14:00-18:30	09:00-13:00, 14:00-18:30	09:00-13:00, 14:00-18:30	09:00-13:00, 14:00-18:30	09:00-13:00, 14:00-18:30	CLOSED	CLOSED

Source: PNA Contractor Questionnaire

## Appendix 7 – public engagement survey questionnaire

Who would you visit a pharmacy for?

- Myself
- A child or young person
- An elderly person
- For someone else I care for

How often do you use pharmacy services?

- Once a week or more
- Once a month
- Once every few months
- Once in six months
- Less often

Where do you use pharmacy services (rate never, rarely, sometimes, often)?

- Near my home
- Near my work
- Near or at my doctor's surgery
- On the high street
- At the supermarket

When would you prefer to use pharmacy services?

- |                            | Mon-Fri | Sat | Sun |
|----------------------------|---------|-----|-----|
| • before 9am               |         |     |     |
| • between 9am-6pm          |         |     |     |
| • between 6pm-8pm          |         |     |     |
| • between 8pm and midnight |         |     |     |

When considering a choice of pharmacy, which of the following helps you choose?

- Close to home
- Close to GP surgery
- Close to work
- I am seen quickly
- They offer a service I need
- They offer helpful information and advice
- Friendly staff
- Other, please specify

Is there anything that has stopped you using a pharmacy or chemist when you need to?

- Opening times not convenient for me
- Service I needed was not available
- Pharmacist was not available when I needed
- I couldn't get to a pharmacy
- None
- Other: please specify

How do you typically travel to a pharmacy?

- Car
- Taxi
- Public Transport (metro, train, bus)
- Walk
- Bicycle
- Other, please state

How long does it take to travel to your usual pharmacy?

- 0-15 minutes
- 16-30 minutes
- Over 30 minutes
- Varies

What pharmacy services do you use?

#### **Prescription and medication services**

- Collecting medication my GP has prescribed for me
- Repeat prescription service
- Non-prescription medicines (off the shelf)
- Delivering prescriptions to my house
- Advice on medication

#### **Health and wellbeing services**

- Stop smoking advice
- Healthy eating & living advice
- Alcohol advice services
- Health checks e.g. Blood pressure, sugar, cholesterol levels

#### **Sexual health services**

- Chlamydia screening service
- Pregnancy and contraception advice
- Emergency contraception e.g. Morning after pill

- HIV testing service

### **Long term conditions management**

- Long term conditions advice eg Diabetes, high blood pressure
- Stroke services e.g. Warfarin clinic

### **Other services and advice**

- Needle exchange/Methadone supply
- Advice on baby/child health
- Immunisation/vaccination/jabs e.g. flu
- Minor conditions advice e.g. sore throat, hay fever, cystitis

### **Non-medical products**

- Toiletries and suncream
- Food and drink
- Cosmetic products
- Travel advice/ vaccines

### **Questions about the pharmacy you most frequently use:**

What sort of pharmacy do you most often use?

- Supermarket
- High street
- Pharmacy near or at my doctor's surgery
- Other, please specify
- I do not use a pharmacy (the following questions will be skipped)

Thinking about the pharmacy you most often use, to what extent do you agree with the following statements? (Strongly disagree, disagree, neither agree nor disagree, agree, strongly agree and not applicable to me)

- The staff are friendly
- Staff provide good information and advice
- Staff respect my privacy
- The pharmacy is accessible for people with disabilities
- The pharmacy provides access to language translation services
- The pharmacy provides an area for private consultations
- There is convenient parking near the pharmacy
- The pharmacy is easy to get to using public transport (metro, bus, train)
- Opening hours of the pharmacy are convenient
- The pharmacy provides a range of useful services e.g. Stop smoking, blood pressure, sugar, cholesterol checks
- The pharmacy provides delivery of prescriptions to my house

- The pharmacy provides extra advice/ support e.g. text message reminders, pill dispensers
- The pharmacy provides useful range of baby/child products
- Products at the pharmacy are good value for money

What, if any, improvements could the pharmacy you most frequently use make to provide you with a better service?

- Clearer packaging/labelling
- Provide faster services
- Clearly displayed opening hours
- Include private areas for consultations
- Information about alternative chemist or pharmacy
- Introduce a medicine delivery service
- Other please state

Would you like your pharmacy to offer more virtual services?

- I would like them to offer more online consultations and advice
- I would like them to offer more telephone consultations and advice
- No, I prefer to visit my pharmacy in person

## **Covid**

Has Covid 19 impacted how you use pharmacies?

- No
- Yes, I used a pharmacy to collect Lateral Flow Tests (LFTs)
- Yes, I attended my Covid vaccination at a pharmacy
- Yes, I was shielding/ self-isolating and required virtual services or deliveries
- Other, please state

## **About you**

We are asking for this information so we can assess responses by different population groups and see how the characteristics of consultation respondents compare to those of the borough population as a whole

## Gender

- Male
- Female
- Other
- Prefer not to say

## Age

- Under 18
- 18 to 24
- 25 to 34
- 35 to 44
- 45 to 54
- 55 to 64
- 65 to 74
- 75+
- Prefer not to say

## Ethnicity

- White British
- White Irish
- Any other white background
- Gypsy, Roma and Traveller
- Indian
- Pakistani
- Bangladeshi
- Any other Asian background
- Arab
- Chinese
- Caribbean
- African
- Any other Black background
- White and Black Caribbean
- White and Black African
- White and Asian
- Any other Mixed background
- Prefer not to say
- Other, please state

## What is your sexual orientation?

- Heterosexual or straight
- Gay or lesbian
- Bisexual

- Other
- Prefer not to say

Do you have a disability?

- Yes
- No
- Prefer not to say

Employment:

- Employed full-time
- Employed part-time
- Unemployed
- Self-employed
- Full-time homemaker
- Retired
- Still studying
- Disabled or too ill to work
- Prefer not to say

What is your postcode?

## Appendix 8 – Results of 2022 public engagement questionnaire

### Respondent gender

ANSWER CHOICES	RESPONSES	
Male	17.89%	34
Female	81.58%	155
Other	0.53%	1
Prefer not to say	0.00%	0
<b>TOTAL</b>		<b>190</b>

### Respondent sexuality

ANSWER CHOICES	RESPONSES	
Heterosexual or straight	89.67%	165
Gay or lesbian	3.26%	6
Bisexual	1.63%	3
Other	1.63%	3
Prefer not to say	3.80%	7
<b>TOTAL</b>		<b>184</b>



## Respondent ethnicity

ANSWER CHOICES	RESPONSES	
White British	87.96%	168
White Irish	1.05%	2
Any other white background	0.52%	1
Gypsy, Roma and Traveller	0.52%	1
Indian	3.14%	6
Pakistani	1.05%	2
Bangladeshi	0.00%	0
Any other Asian background	0.52%	1
Arab	0.52%	1
Chinese	1.05%	2
Caribbean	1.57%	3
African	0.00%	0
Any other Black background	0.00%	0
White and Black Caribbean	0.52%	1
White and Black African	0.00%	0
White and Asian	0.52%	1
Any other Mixed background	0.52%	1
Prefer not to say	0.52%	1
Other, please state	0.00%	0
<b>TOTAL</b>		<b>191</b>

## Respondent sexual orientation

ANSWER CHOICES	RESPONSES	
Heterosexual or straight	89.67%	165
Gay or lesbian	3.26%	6
Bisexual	1.63%	3
Other	1.63%	3
Prefer not to say	3.80%	7
<b>TOTAL</b>		<b>184</b>

## Respondent answer to: Do you have a disability?

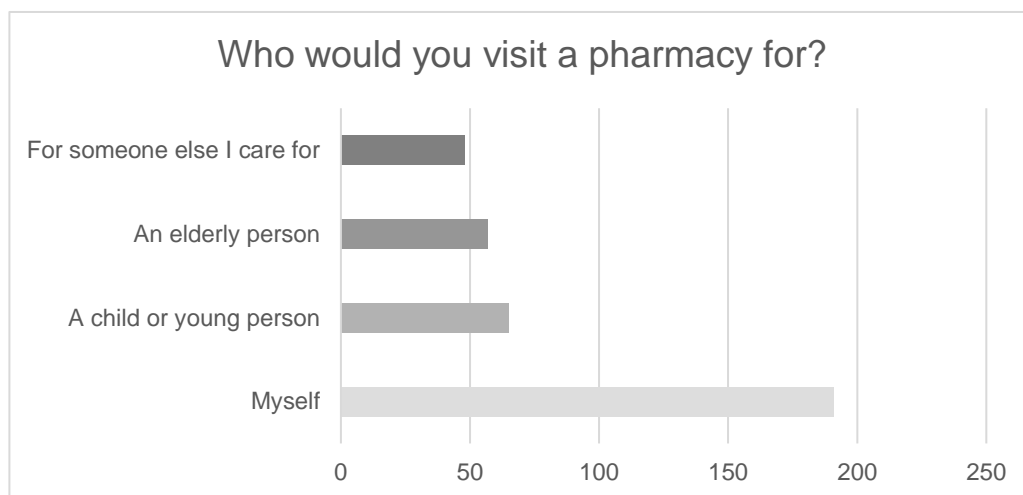
ANSWER CHOICES	RESPONSES	
Yes	16.40%	31
No	77.78%	147
Prefer not to say	5.82%	11
<b>TOTAL</b>		<b>189</b>

## Respondent employment

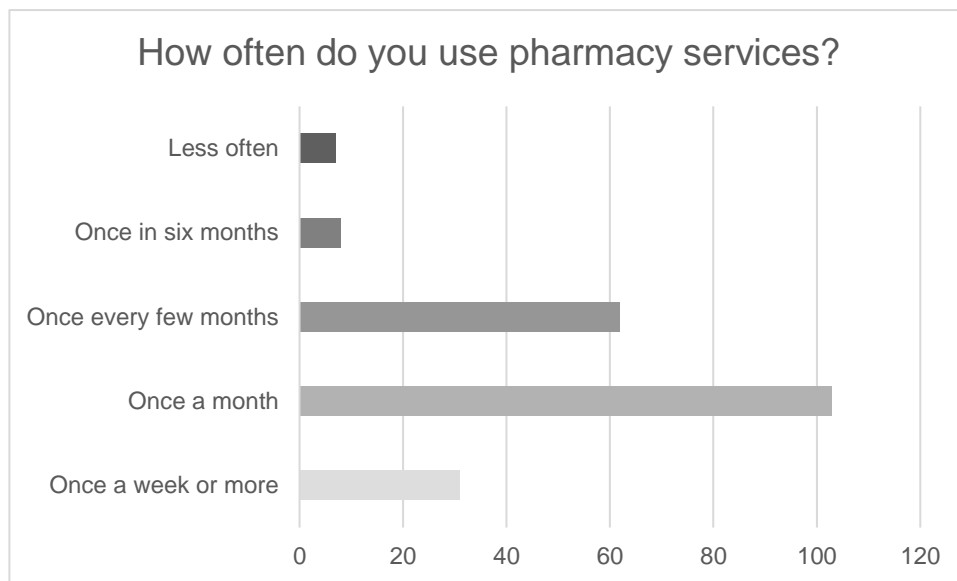
ANSWER CHOICES	RESPONSES	
Employed full-time	54.45%	104
Employed part-time	18.32%	35
Unemployed	1.05%	2
Self-employed	1.05%	2
Full-time homemaker	2.09%	4
Retired	18.32%	35
Still studying	1.05%	2
Disabled or too ill to work	1.57%	3
Prefer not to say	2.09%	4
<b>TOTAL</b>		<b>191</b>

Respondent postcode

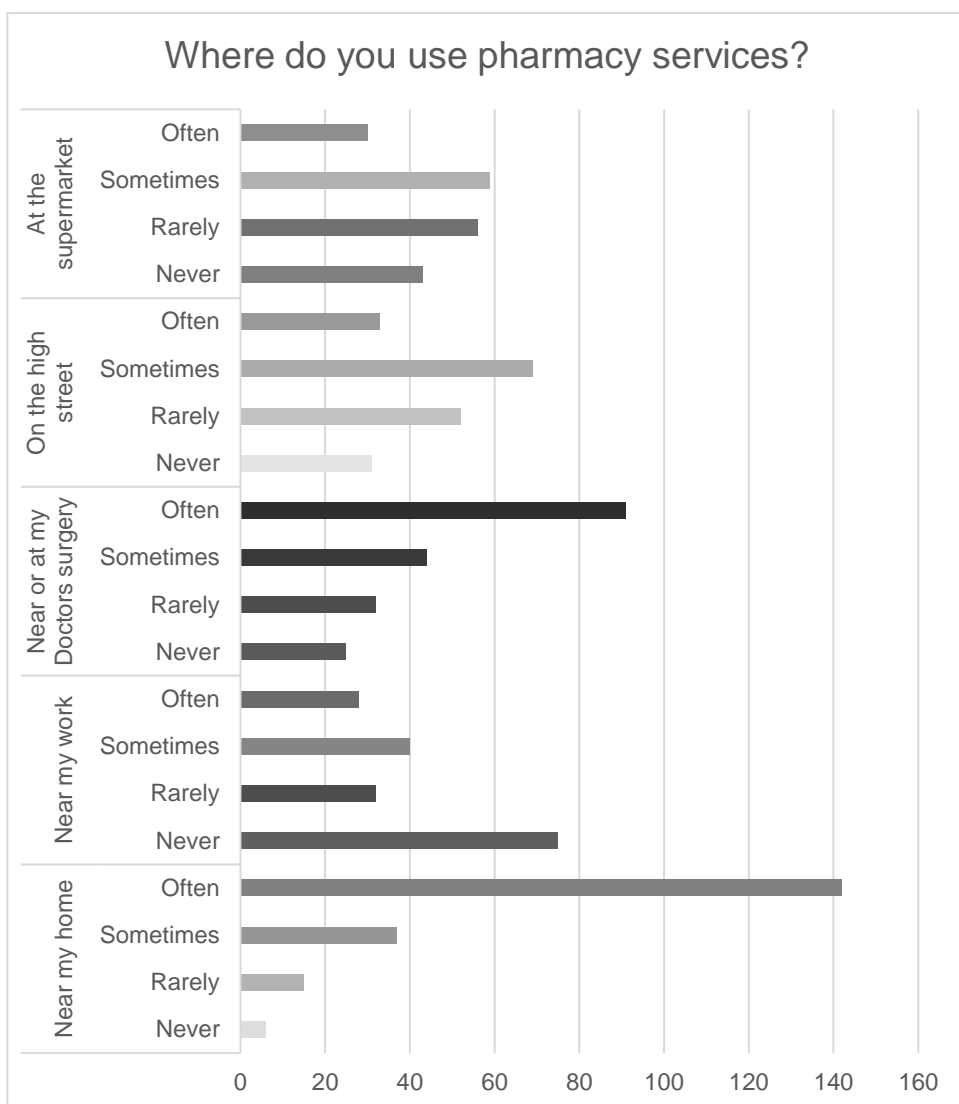
<b>Respondent Postcode</b>	<b>Response percent</b>	<b>Response count</b>
<b>DY1 Dudley</b>	16.20%	29
<b>DY2 Netherton</b>	7.80%	14
<b>DY3 Sedgley</b>	8.40%	15
<b>DY4 Tipton (within Dudley borough)</b>	2.80%	5
<b>DY5 Brierley Hill</b>	12.30%	22
<b>DY6 Kingswinford</b>	10.60%	19
<b>DY8 Stourbridge</b>	16.80%	30
<b>DY9 Lye</b>	7.30%	13
<b>B62 Halesowen</b>	3.90%	7
<b>B63 Halesowen (Hasbury)</b>	7.30%	13
<b>B64 (within Dudley borough)</b>	1.10%	2
<b>WV14 Coseley</b>	0.60%	1
<b>Outside Dudley Borough</b>	5.00%	9
<b>Total</b>		179



ANSWER CHOICES	RESPONSES	
Myself	90.52%	191
A child or young person	31.28%	66
An elderly person	27.49%	58
For someone else I care for	22.27%	47
Total Respondents: 211		



ANSWER CHOICES	RESPONSES	
Once a week or more	15.17%	32
Once a month	48.34%	102
Once every few months	29.38%	62
Once in six months	3.79%	8
Less often	3.32%	7
<b>TOTAL</b>		<b>211</b>



	NEVER	RARELY	SOMETIMES	OFTEN	TOTAL	WEIGHTED AVERAGE
Near my home	3.00% 6	7.50% 15	19.00% 38	70.50% 141	200	3.57
Near my work	42.86% 75	18.29% 32	23.43% 41	15.43% 27	175	2.11
Near or at my Doctors surgery	13.09% 25	16.75% 32	23.04% 44	47.12% 90	191	3.04
On the high street	16.85% 31	28.26% 52	37.50% 69	17.39% 32	184	2.55
At the supermarket	22.99% 43	29.95% 56	31.55% 59	15.51% 29	187	2.40

When would you prefer to use pharmacy services on a weekday?

	1	2	3	4	TOTAL	SCORE
Monday - Friday: Before 9 am	12.89% 25	21.65% 42	23.20% 45	42.27% 82	194	2.05
Monday to Friday: Between 9am - 6pm	54.19% 110	19.70% 40	17.24% 35	8.87% 18	203	3.19
Monday to Friday: Between 6pm - 8pm	29.53% 57	42.49% 82	22.28% 43	5.70% 11	193	2.96
Monday to Friday: Between 8pm - Midnight	6.19% 12	14.43% 28	35.05% 68	44.33% 86	194	1.82

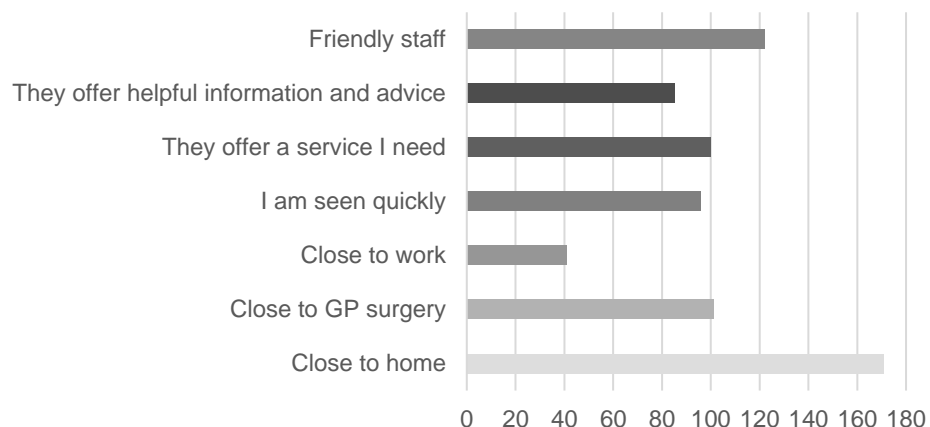
When would you prefer to use pharmacy services on a Saturday?

	1	2	3	4	TOTAL	SCORE
Before 9 am	11.58% 22	28.42% 54	20.00% 38	40.00% 76	190	2.12
Between 9am - 6pm	80.00% 160	11.50% 23	5.00% 10	3.50% 7	200	3.68
Between 6pm - 8pm	6.84% 13	52.11% 99	36.84% 70	4.21% 8	190	2.62
Between 8pm - Midnight	3.13% 6	6.77% 13	36.98% 71	53.13% 102	192	1.60

When would you prefer to use pharmacy services on a Sunday?

	1	2	3	4	TOTAL	SCORE
Before 9 am	14.74% 28	24.74% 47	20.53% 39	40.00% 76	190	2.14
Between 9am - 6pm	78.00% 156	11.50% 23	5.50% 11	5.00% 10	200	3.63
Between 6pm - 8pm	4.21% 8	58.42% 111	33.16% 63	4.21% 8	190	2.63
Between 8pm - Midnight	3.66% 7	5.76% 11	38.74% 74	51.83% 99	191	1.61

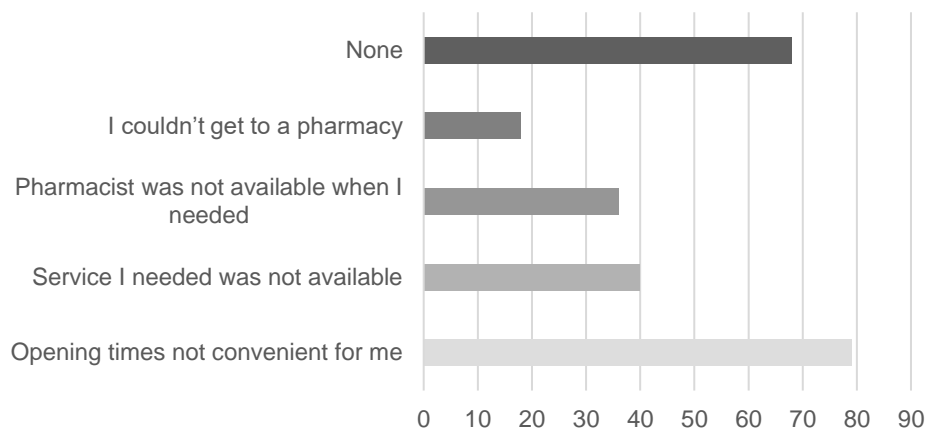
### When considering a choice of pharmacy, which of the following helps you choose?



ANSWER CHOICES		RESPONSES	
Close to home		81.04%	171
Close to GP surgery		47.87%	101
Close to work		19.91%	42
I am seen quickly		45.97%	97
They offer a service I need		47.39%	100
They offer helpful information and advice		39.81%	84
Friendly staff		57.35%	121
Other (please specify)	Responses	10.90%	23
Total Respondents: 211			



### Is there anything that has stopped you using a pharmacy or chemist when you need to?

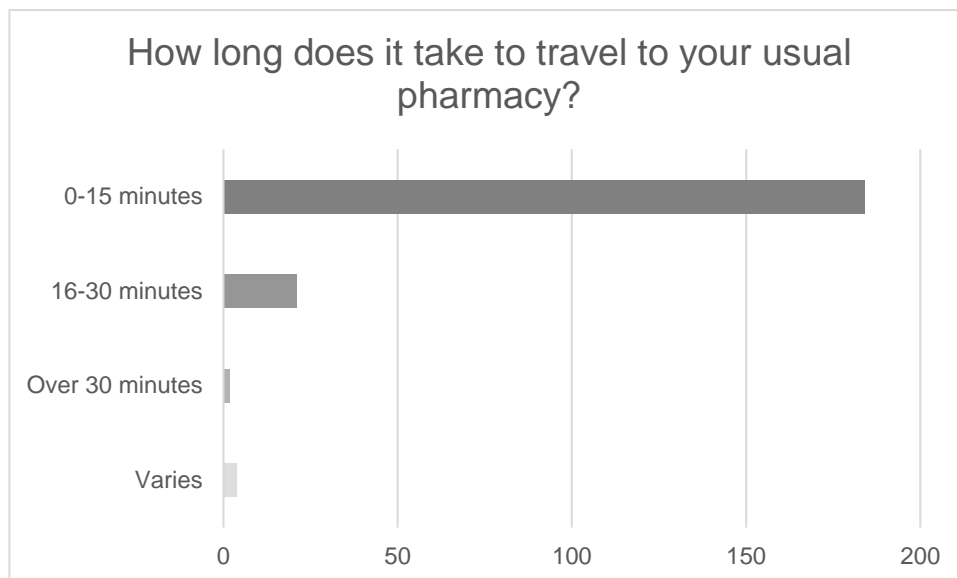


ANSWER CHOICES	RESPONSES	
Opening times not convenient for me	37.80%	79
Service I needed was not available	19.62%	41
Pharmacist was not available when I needed	17.70%	37
I couldn't get to a pharmacy	9.09%	19
None	32.54%	68
Other (please specify)	Responses	18.66% 39
Total Respondents: 209		

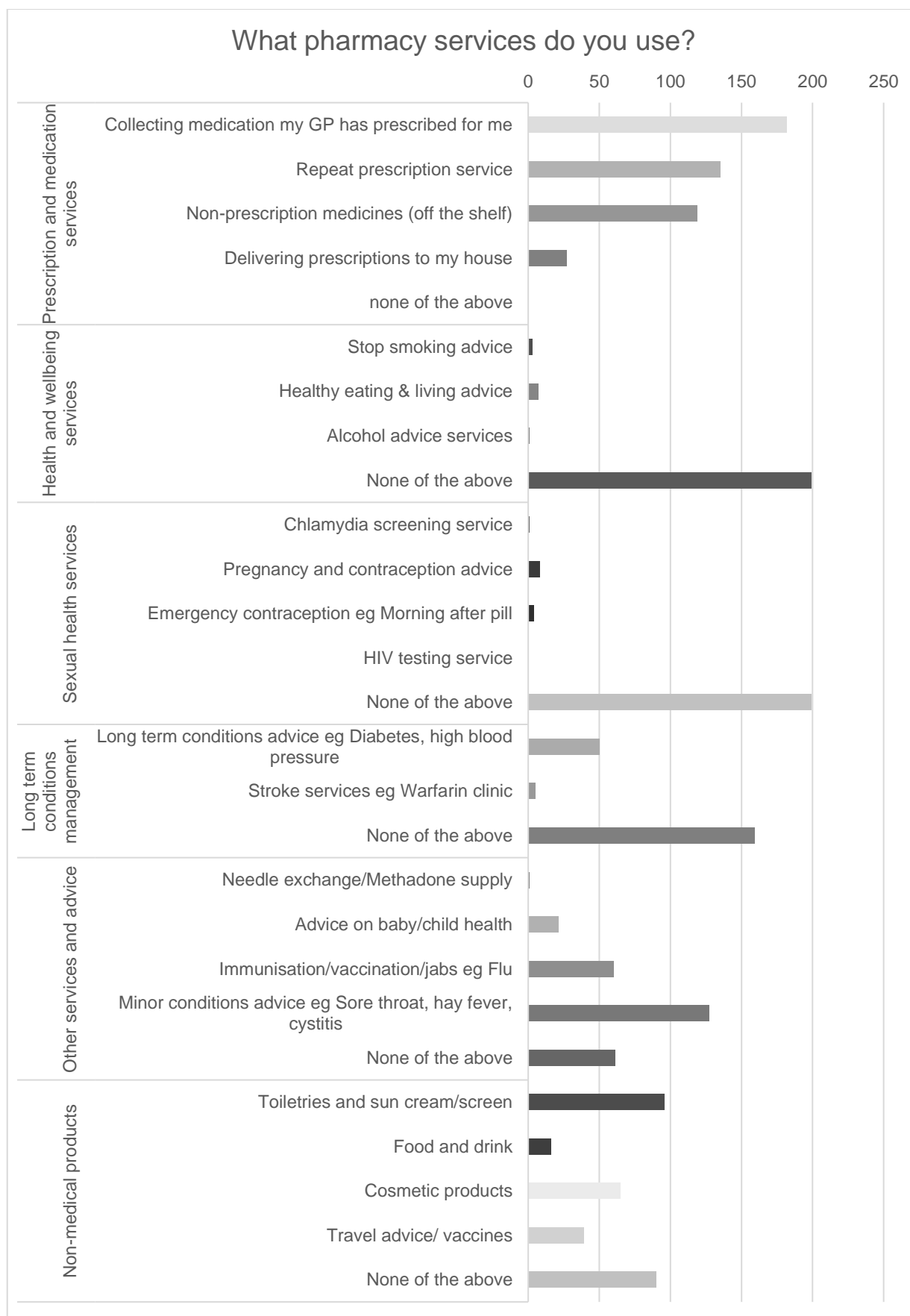
## How do you typically travel to a pharmacy?

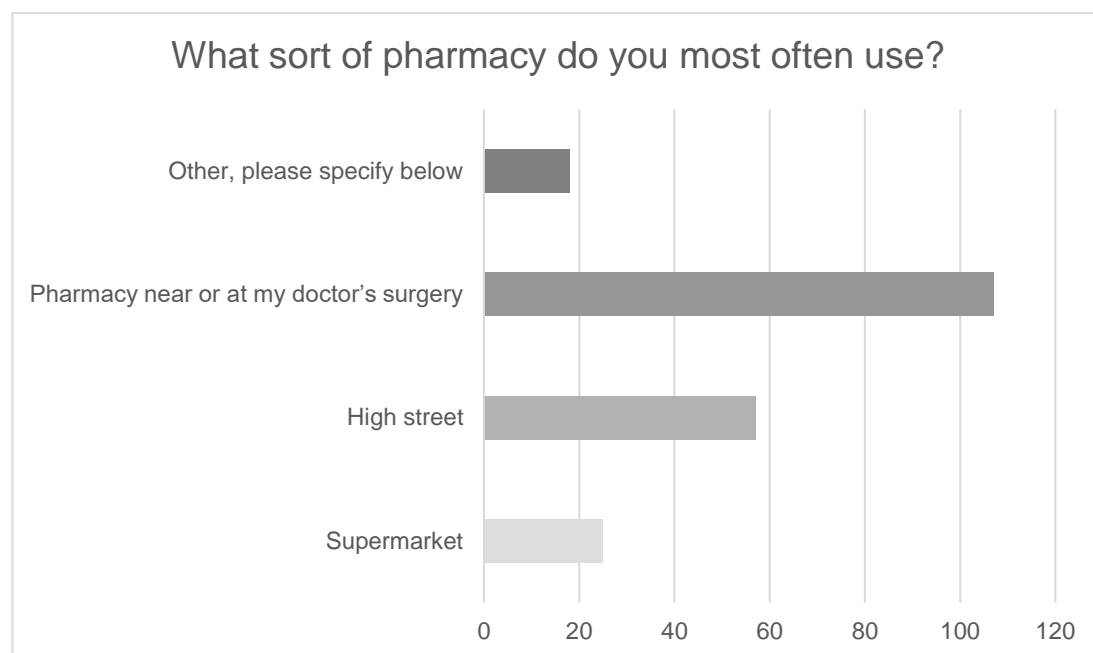


ANSWER CHOICES		RESPONSES	
Car		54.03%	114
Taxi		1.42%	3
Public Transport (metro, train, bus)		3.32%	7
Walk		39.34%	83
Bicycle		0.00%	0
Other (please specify)	Responses	1.90%	4
TOTAL			211



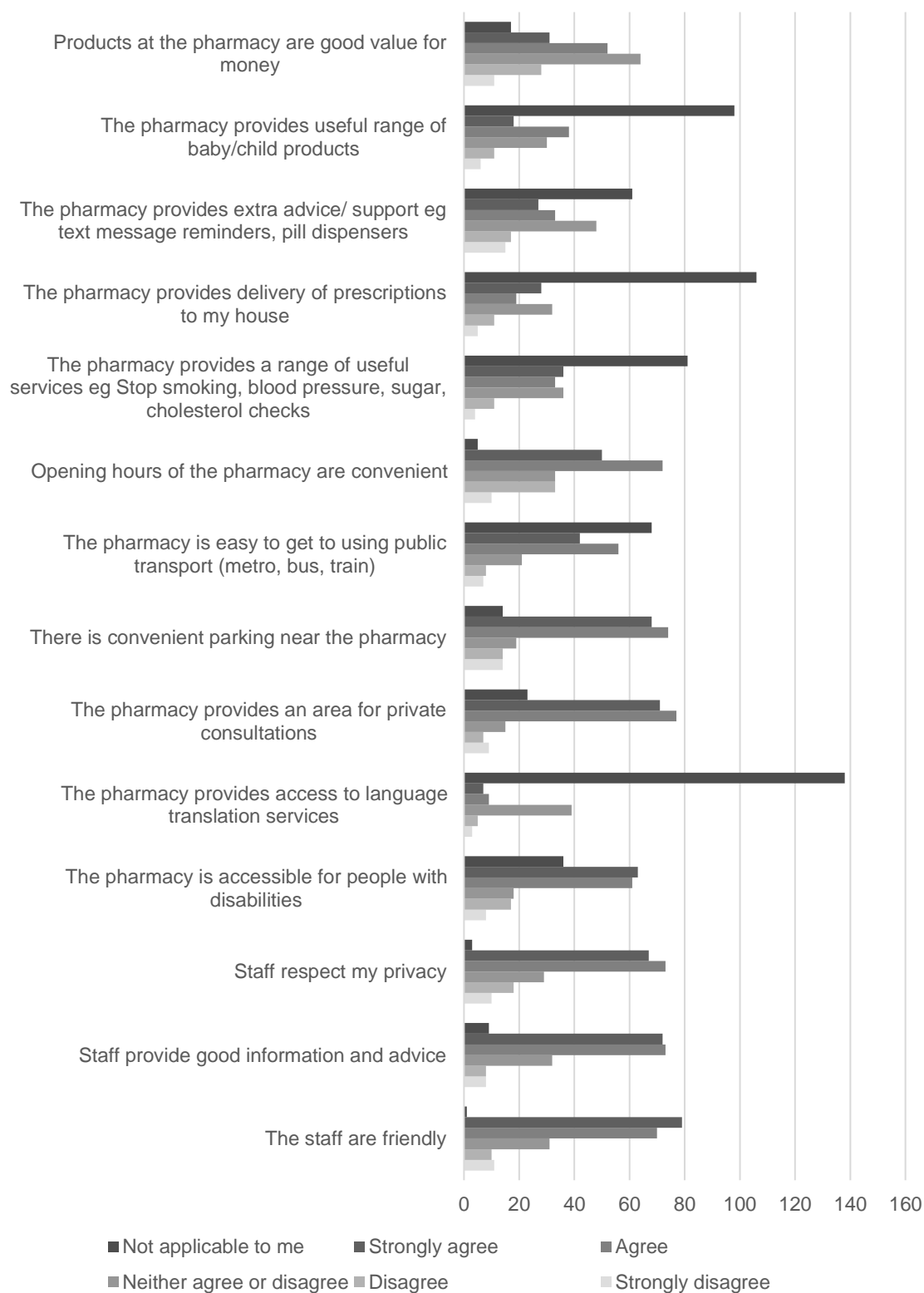
ANSWER CHOICES	RESPONSES	
0-15 minutes	87.20%	184
16-30 minutes	9.95%	21
Over 30 minutes	0.95%	2
Varies	1.90%	4
<b>TOTAL</b>		<b>211</b>



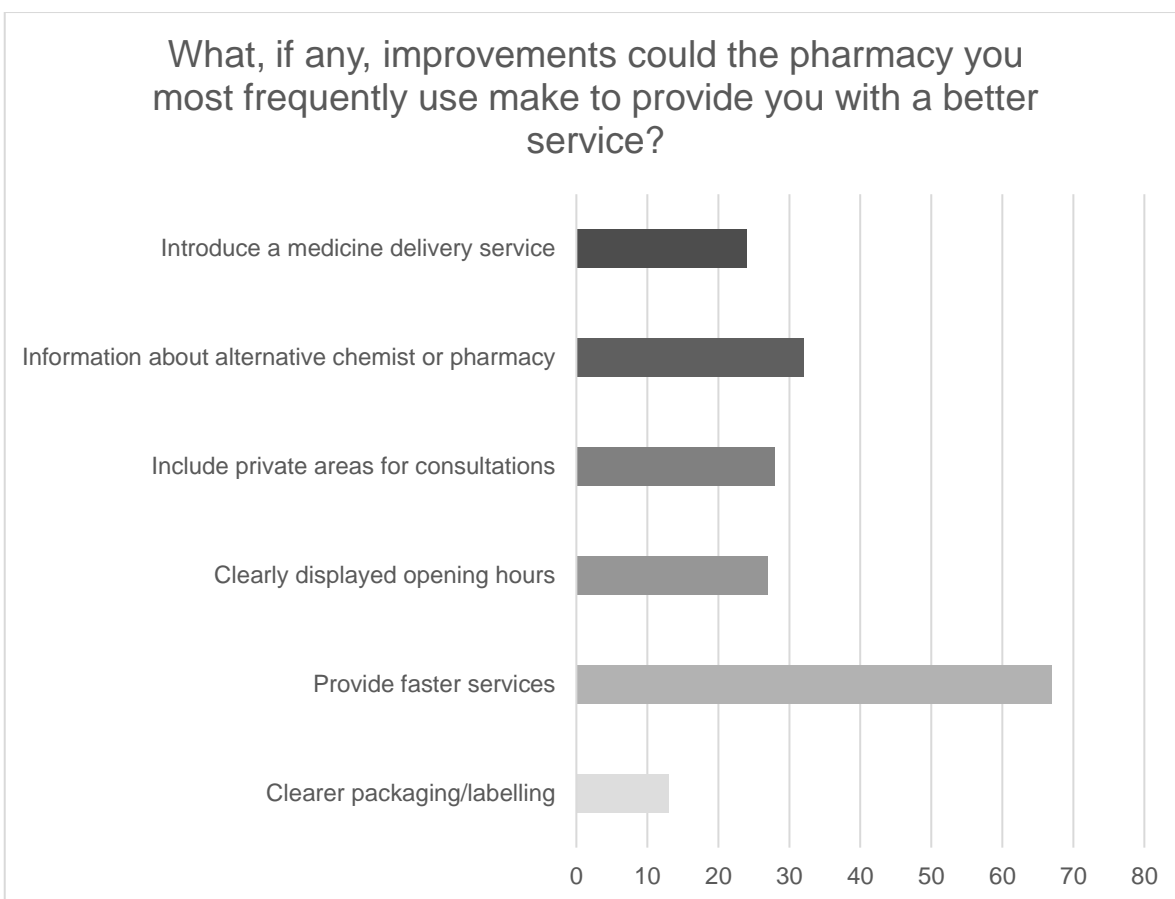


ANSWER CHOICES	RESPONSES	
Supermarket	12.08%	25
High street	28.02%	58
Pharmacy near or at my doctor's surgery	51.21%	106
Other, please specify below	8.70%	18
I do not use a pharmacy (the following questions will be skipped)	0.00%	0
<b>TOTAL</b>		<b>207</b>

Thinking about the pharmacy you most often use, to what extent do you agree with the following statements?



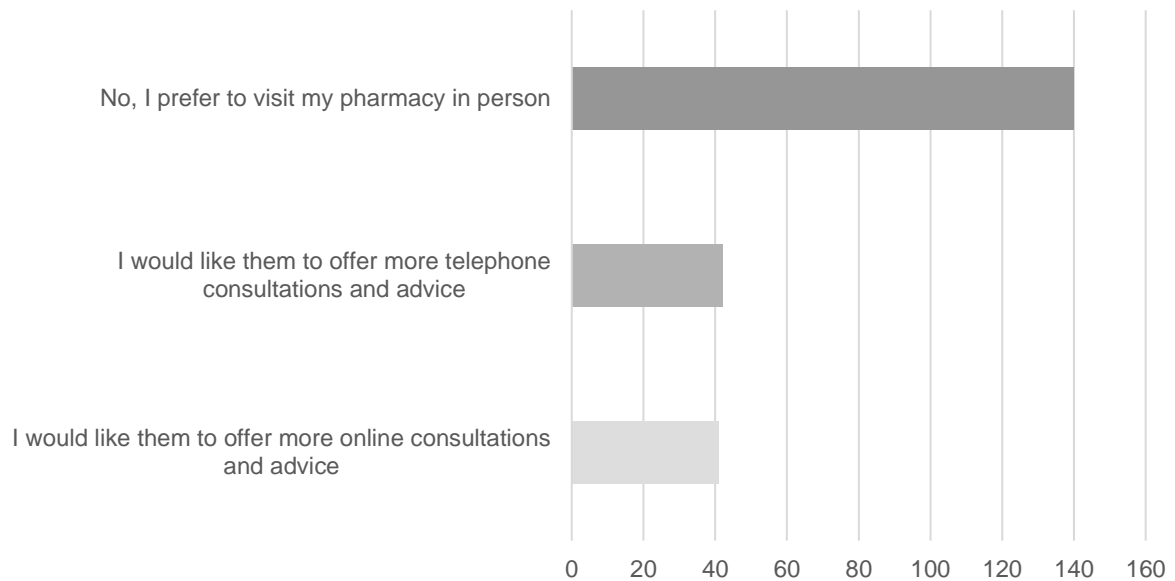
	STRONGLY DISAGREE	DISAGREE	NEITHER AGREE OR DISAGREE	AGREE	STRONGLY AGREE	NOT APPLICABLE TO ME
The staff are friendly	5.47% 11	4.98% 10	15.42% 31	34.83% 70	38.81% 78	0.50% 1
Staff provide good information and advice	3.98% 8	3.98% 8	15.92% 32	36.32% 73	35.32% 71	4.48% 9
Staff respect my privacy	5.03% 10	9.05% 18	14.57% 29	36.68% 73	33.17% 66	1.51% 3
The pharmacy is accessible for people with disabilities	3.96% 8	8.42% 17	8.91% 18	30.20% 61	30.69% 62	17.82% 36
The pharmacy provides access to language translation services	1.50% 3	2.50% 5	19.00% 38	4.50% 9	3.50% 7	69.00% 138
The pharmacy provides an area for private consultations	4.48% 9	3.48% 7	7.46% 15	37.81% 76	35.32% 71	11.44% 23
There is convenient parking near the pharmacy	6.93% 14	6.93% 14	9.41% 19	36.14% 73	33.66% 68	6.93% 14
The pharmacy is easy to get to using public transport (metro, bus, train)	3.48% 7	3.98% 8	10.45% 21	27.36% 55	20.90% 42	33.83% 68
Opening hours of the pharmacy are convenient	4.95% 10	16.34% 33	16.34% 33	35.15% 71	24.75% 50	2.48% 5
The pharmacy provides a range of useful services eg Stop smoking, blood pressure, sugar, cholesterol checks	2.00% 4	5.50% 11	18.00% 36	16.00% 32	18.00% 36	40.50% 81
The pharmacy provides delivery of prescriptions to my house	2.50% 5	5.50% 11	15.50% 31	9.50% 19	14.00% 28	53.00% 106
The pharmacy provides extra advice/support eg text message reminders, pill dispensers	7.50% 15	8.50% 17	24.00% 48	16.50% 33	13.50% 27	30.00% 60
The pharmacy provides useful range of baby/child products	3.00% 6	5.50% 11	15.00% 30	19.00% 38	9.00% 18	48.50% 97
Products at the pharmacy are good value for money	5.45% 11	13.37% 27	31.68% 64	25.74% 52	15.35% 31	8.42% 17



ANSWER CHOICES	RESPONSES	
Clearer packaging/labelling	8.18%	13
Provide faster services	42.14%	67
Clearly displayed opening hours	16.98%	27
Include private areas for consultations	17.61%	28
Information about alternative chemist or pharmacy	20.13%	32
Introduce a medicine delivery service	15.09%	24
Other (please specify)	Responses 33.33%	53
Total Respondents: 159		

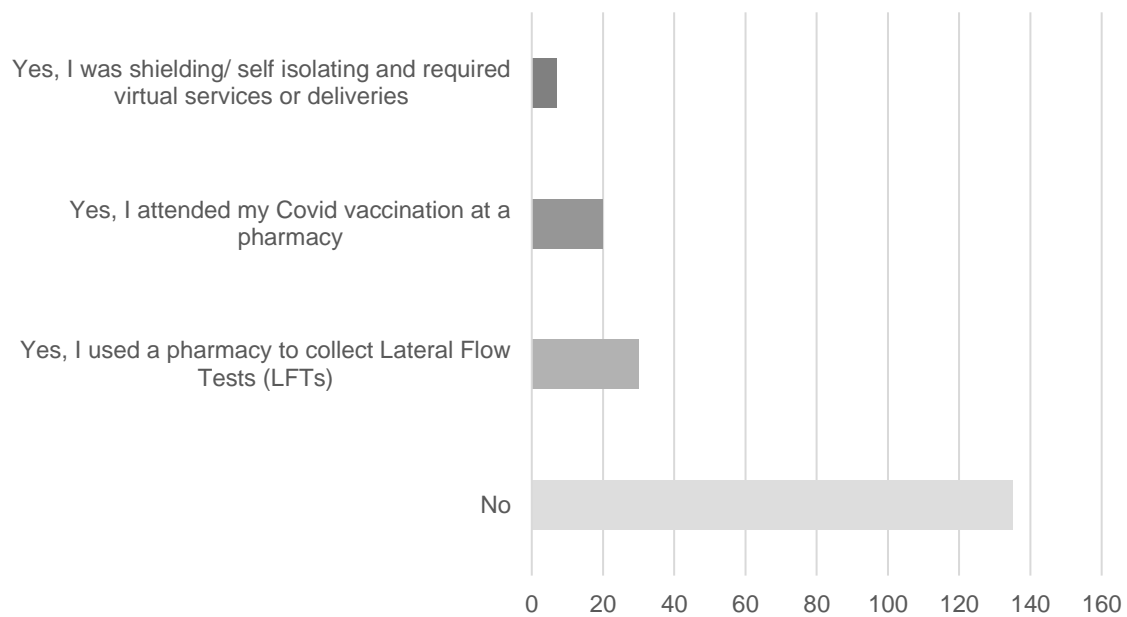


## Would you like your pharmacy to offer more virtual services?



ANSWER CHOICES	RESPONSES	
I would like them to offer more online consultations and advice	20.20%	40
I would like them to offer more telephone consultations and advice	21.21%	42
No, I prefer to visit my pharmacy in person	70.71%	140
Total Respondents: 198		

## Has Covid 19 impacted how you use pharmacies?



ANSWER CHOICES	RESPONSES	
No	67.16%	135
Yes, I used a pharmacy to collect Lateral Flow Tests (LFTs)	14.93%	30
Yes, I attended my Covid vaccination at a pharmacy	9.45%	19
Yes, I was shielding/ self isolating and required virtual services or deliveries	3.48%	7
Other (please specify)	<a href="#">Responses</a> 4.98%	10
<b>TOTAL</b>		<b>201</b>

## **Appendix 9: 60-day Public Consultation on the draft Pharmaceutical Needs Assessment**

### **Overview – what is the PNA?**

From 1<sup>st</sup> April 2013, every Health and Wellbeing Board (HWB) in England has a statutory responsibility to publish and keep up to date a statement of the needs for pharmaceutical services of the population in its area, referred to as a Pharmaceutical Needs Assessment (PNA).

The PNA looks at the current provision of pharmaceutical services across Dudley and whether this meets the current and future needs of the population and identifies any potential gaps to service delivery. Dudley's HWB is currently undertaking its third PNA for publication by 1 October 2022.

The PNA is a key document which will be used by NHS England & Improvement (NHS E&I) to inform decisions regarding applications for new or changes to, existing pharmaceutical services. PNAs will also be used by NHS E&I to make decisions in the commissioning of NHS-funded services that can be provided by local community pharmacies. In addition, Local Authorities and Clinical Commissioning Groups can also use the PNA when commissioning services to meet local health needs and priorities.

### **Consultation period**

Dudley's draft PNA consultation is open for 60 days. Consultation begins on Friday 1 July 2022 and closes on Monday 29 August 2022.

### **How to complete the survey**

Please follow the link below to complete the PNA Consultation Survey:

<https://www.dudley.gov.uk/residents/care-and-health/adult-health-social-care/healthy-lifestyles/dudley-pharmaceutical-needs-assessment/>

If you require further information you can contact us on:

[david.pitches@dudley.gov.uk](mailto:david.pitches@dudley.gov.uk)

All information provided will remain anonymous and kept strictly confidential. It will be used only for the stated purposes and will not be passed on to a third party. We thank those who are taking the time to participate in the consultation and provide us with feedback.

### **Next steps**

The feedback and the comments from this consultation will be considered and amendments made to the PNA as necessary. The HWB will approve and publish the final PNA by 1 October 2022.

## Appendix 10 – questions for statutory 60-day public consultation

### Dudley Health & Wellbeing Board Pharmaceutical Needs Assessment (PNA) Consultation 2022-2025

Question 1. Which best describes your interest in the consultation?	
A member of the general public	<input type="checkbox"/>
A family member or carer of someone who uses pharmacy services	<input type="checkbox"/>
A Health or Social Care Professional	<input type="checkbox"/>
On behalf of an organisation	<input type="checkbox"/>
On behalf of a community pharmacy business	<input type="checkbox"/>

Twelve specific closed questions will be asked as part of the consultation process, with the opportunity to comment freely about any aspect of the full document as well as any of the twelve consultation specific questions within the final open question.

	Question	Yes	No	Not sure
2	Geographical and Physical location of Pharmacies			
	The PNA has concluded that there are broadly sufficient community pharmacies in Dudley and the surrounding area providing services to residents. However, there is a gap identified within the Russell's Hall Estate. Do you agree with this assessment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Pharmacy Opening Hours			
	The PNA has concluded that its Community Pharmacies are open at the times needed and used by patients and the public. Do you agree with this assessment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Provision of Advanced Services			
	The PNA has concluded there are sufficient Community Pharmacies across all PCN localities providing the "Community Pharmacist Consultation Service". This gives patients a reasonable choice to access this service. No gaps have been identified. Do you agree with this assessment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Question	Yes	No	Not sure
5	The PNA has concluded there are sufficient Community Pharmacies across all PCN localities providing the “New Medicine service”, giving patients a reasonable choice to access this service. No gaps have been identified. Do you agree with this assessment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	The PNA has concluded that we are unaware of any additional need for provision of “Appliance Use Review” and “Stoma Appliance Customisation” Service through pharmacy. Do you agree with this assessment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	The PNA has concluded there is sufficient provision of the Seasonal Influenza (Flu) Vaccination service within pharmacies in Dudley. Do you agree with this assessment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	Local Commissioned Services – Black Country Integrated Care System (ICS)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	The PNA has concluded that although there are isolated gaps in the provision of the “Pharmacy First – Minor Ailments Service”, overall access is good around the borough. This gives patients a reasonable choice to access this service. No gaps were identified. Do you agree with this assessment?			
9	The PNA has concluded there is sufficient provision of the “Covid Urgent Eyecare Service” (CUES) around the borough. This gives patients a reasonable choice to access this service. Do you agree with this assessment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	The PNA has concluded that the population of Dudley has good access to the Specialist Palliative Care Drugs Supply Service based on those pharmacies commissioned within Dudley and neighbouring areas. Do you agree with this assessment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Question	Yes	No	Not sure
11	Directorate of Public Health and Wellbeing Services. Dudley MBC			
	Dudley MBC commissions a range of Public Health Services from Community Pharmacies which they can choose to provide but require accredited premises and trained personnel. Public Health will continue to pay for these services if funding and national reviews of the service permit. Are you happy with the range of services available?			
	a. Sexual Health Services: Emergency Hormonal Contraception & Chlamydia Screening & C- Card Condom Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	b. Smoking Cessation & Nicotine Replacement Therapy (NRT) Voucher Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	c. Substance Misuse Services: Supervised Consumption & Needle Exchange Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	d. Alcohol Screening and Brief Intervention	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	e. NHS Health Checks	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	f. Healthy Start Vitamins	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	COVID- 19 Services			
	In response to the COVID-19 pandemic, Community Pharmacies have provided services, such as COVID- 19 Lateral Flow Tests and COVID -19 Vaccination Services across Dudley. The PNA concludes if a future public health emergency arises with COVID-19 cases, pharmacies are well placed and accessed to deliver these services to meet the needs of Dudley's population. Do you agree with this assessment?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	Has the PNA given you adequate information to inform your own future service provision? ( <b>Question to be completed by Community Pharmacy staff only</b> )	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	If you have any other comments, on the above questions or the full document, or you feel any additional information should be included, please explain here:			

## Appendix 11 – public consultation feedback

A total of 25 responses were received, of which one was from a community pharmacy business, two were on behalf of organisations, four were from health or social care professionals, three were from people responding as family members of carers of people who used pharmacies and 15 were from members of the public.

The relatively low response rate should be borne in mind when interpreting the table below. In addition, the principle audience for the statutory 60-day consultation comprises healthcare providers, whilst the main consultation of the general public and service users occurred in May 2022, earlier in the PNA development process.

### Summary of respondents

1. Which best describes your interest in the consultation?	Proportion
A member of the general public	15/25 (60%)
A family member or carer of someone who uses pharmacy services	3/25 (12%)
A Health or Social Care Professional	4/25 (16%)
On behalf of an organisation	2/25 (8%)
On behalf of a community pharmacy business	1/25 (4%)

### Responses to closed questions and number responding to each

Question	Yes	No	Not sure
2. The PNA has concluded that there are broadly sufficient community pharmacies in Dudley and the surrounding area providing services to residents. However, there is a gap identified within the Russell's Hall Estate. Do you agree with this assessment?	14	1	10
3. The PNA has concluded that its Community Pharmacies are open at the times needed and used by patients and the public. Do you agree with this assessment?	14	9	2
4. The PNA has concluded there are sufficient Community Pharmacies across all PCN localities providing the "Community Pharmacist Consultation Service". This gives patients a reasonable choice to access this service. No gaps have been identified. Do you agree with this assessment?	15	4	6

Question	Yes	No	Not sure
5. The PNA has concluded there are sufficient Community Pharmacies across all PCN localities providing the “New Medicine service”, giving patients a reasonable choice to access this service. No gaps have been identified. Do you agree with this assessment?	11	5	9
6. The PNA has concluded that we are unaware of any additional need for provision of “Appliance Use Review” and “Stoma Appliance Customisation” Service through pharmacy. Do you agree with this assessment?	9	4	12
7. The PNA has concluded there is sufficient provision of the Seasonal Influenza (Flu) Vaccination service within pharmacies in Dudley. Do you agree with this assessment?	18	6	1
8. The PNA has concluded that although there are isolated gaps in the provision of the “Pharmacy First – Minor Ailments Service”, overall access is good around the borough. This gives patients a reasonable choice to access this service. No gaps were identified. Do you agree with this assessment?	9	8	8
9. The PNA has concluded there is sufficient provision of the “COVID Urgent Eyecare Service” (CUES) around the borough. This gives patients a reasonable choice to access this service. Do you agree with this assessment?	5	4	16
10. The PNA has concluded that the population of Dudley has good access to the Specialist Palliative Care Drugs Supply Service based on those pharmacies commissioned within Dudley and neighbouring areas. Do you agree with this assessment?	10	4	11
11. Dudley MBC commissions a range of Public Health Services from Community Pharmacies which they can choose to provide but require accredited premises and trained personnel. Public Health will continue to pay for these services if funding and national reviews of the service permit. Are you happy with the range of services available?			
a. Sexual Health Services: Emergency Hormonal Contraception & Chlamydia Screening & C- Card Condom Service	11	3	11
b. Smoking Cessation & Nicotine Replacement Therapy (NRT) Voucher Service	12	1	12



Question	Yes	No	Not sure
c. Substance Misuse Services: Supervised Consumption & Needle Exchange Service	10	2	13
d. Alcohol Screening and Brief Intervention	8	1	16
e. NHS Health Checks	12	8	5
f. Healthy Start Vitamins	13	3	9
<b>12.</b> In response to the COVID-19 pandemic, Community Pharmacies have provided services, such as COVID- 19 Lateral Flow Tests and COVID -19 Vaccination Services across Dudley. The PNA concludes if a future public health emergency arises with COVID-19 cases, pharmacies are well placed and accessed to deliver these services to meet the needs of Dudley's population. Do you agree with this assessment?	19	5	1
<b>13.</b> Has the PNA given you adequate information to inform your own future service provision? (question to be completed by Community Pharmacy staff only)	3	2	0

## Additional comments

Respondent	Comments	PNA steering group response	Changes to PNA
A member of the general public	Pharmacy service at russells hall is poor and acts as a bed blocker. Would linking community pharmacy and out of hospital home visits be a good start.	We cannot comment on individual services as they are not within the remit of the PNA. Page 54 describes the New Medicine Service (NMS) that promotes safe transfer of medicine from hospital to community.	None required
A member of the general public	As a working person, I feel pharmacies should be open longer on Saturdays and open on Sundays. During the week it is difficult to access pharmacies while I am working.	We conclude that this PNA has sufficient pharmacies open on Saturdays and Sundays. It is recognised that individuals may need to travel a bit further in some parts of the borough to access a pharmacy during the weekends.	None required
A member of the general public	Well written, comprehensive document. No or limited mention of pharmacy involvement in COVID in the summary document yet it is included in the assessment. On page 20 under Specialist pharmacists, I think that the description of the Specialist Neurology pharmacist should be as a clinical pharmacist like the other two. The use of the word community would be misconstrued in this context. Even though the role is part of the hospital community services. Page 24 - very pleased to see the planned recruitment of an 8c overseeing the integration of pharmacy into the ICS. How about including the Borough libraries as distributors of the consultative? Include COVID in summary document.	<p>The PNA Steering Group recognises the value of pharmacy involvement in COVID-19 in Assessment 20. This has now been acknowledged in the Executive Summary of the report as well.</p> <p>The description of the Neurology Pharmacist is not in the PNA remit. The role was mentioned in the report to highlight good practice in integration of a specialist service within a community setting.</p> <p>We will consider how we can include our borough libraries in future PNA consultations.</p>	Yes (minor clarification)

<b>Respondent</b>	<b>Comments</b>	<b>PNA steering group response</b>	<b>Changes to PNA</b>
A member of the general public	I had cause to report a serious failing of service levels of a local pharmacy. Such that it put the public at risk during covid lockdown. The NHS complaints system was totally unsuitable and unhelpful. We had no other means of flagging up this problem.	This concern is out of the remit of the PNA. If there is a concern with a community pharmacy service, this should be taken up by the pharmacy involved through their complaints procedure.	None required
A Health or Social Care Professional	Our Care home find that our pharmacy can not deliver medication that has been prescribed evening or weekend when we have called ANP for home visit.	We conclude that access to pharmacies for Dudley residents is sufficient. We recognise that not all pharmacies that care homes are registered with will be open during the weekend in which case they may need to use an alternative pharmacy, but weekend coverage is adequate.	None required
On behalf of an organisation	The phrase 'this might be considered a gap' (in Sunday opening hours section) could lead potential applicants to believe a gap may exist and may lead to unwanted applications. The intended outcome of the statement 'However, within our current pharmacy providers in Dudley, we conclude an opening until midnight would be considered desirable' is unclear. It is possible that due to the timing of production of this draft, the recent changes in the opening hours of a number of Boots pharmacies may not have been reflected in the draft PNA. NHS England will have been notified and will have a list of the current opening hours.	We have amended the relevant texts to clarify these points. For purposes of publishing the PNA, we had to have a cut off date where further data could not be considered given the time required for mapping which was 31 <sup>st</sup> March 2022. However, we have a local process to monitor any opening hours or other significant pharmaceutical access or service changes when we become aware from the market entry team. Future supplementary statements to this PNA can therefore be published to note any changes to opening hours.	Yes (minor clarification)

<b>Respondent</b>	<b>Comments</b>	<b>PNA steering group response</b>	<b>Changes to PNA</b>
On behalf of an organisation and received by email	We understand that there was appropriate involvement of different professions in reaching the conclusion and find your draft PNA to be robust and based on sound and rational geographical divisions in the borough as well as seeking to take into account any cross border issues.	PNA group acknowledge this feedback. No changes required.	None required

No amendments (such as spelling errors) have been made to free text responses.

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