



# Pharmaceutical Needs Assessment 2022

Ealing  
Health and Wellbeing Board

This Pharmaceutical Needs Assessment (PNA) has been produced by Soar Beyond, contracted by Ealing Council. The production has been overseen by the PNA Steering Group for Ealing Health and Wellbeing Board with authoring support from Soar Beyond Ltd.

## Contents

<b>List of tables</b> .....	<b>8</b>
<b>List of figures</b> .....	<b>10</b>
<b>List of maps</b> .....	<b>11</b>
<b>Executive summary</b> .....	<b>12</b>
<b>Section 1: Introduction</b> .....	<b>13</b>
1.1 Background .....	13
1.1.1 NHS Long Term Plan (LTP) .....	13
1.1.2 Services stopped and changed .....	14
1.2 Purpose of the PNA .....	16
1.3 Scope of the PNA.....	16
1.3.1 Community pharmacy contractors.....	17
1.3.2 Dispensing Appliance Contractors (DACs).....	18
1.3.3 Dispensing GP practices .....	18
1.3.4 Local Pharmaceutical Service (LPS) providers .....	18
1.3.5 Pharmacy Access Scheme (PhAS) providers .....	18
1.3.6 Other services and providers in Ealing HWB area .....	19
1.4 Process for developing the PNA .....	19
1.5 Localities for the purpose of the PNA.....	21
<b>Section 2: Context for the PNA</b> .....	<b>23</b>
2.1 NHS Long Term Plan (LTP) .....	23
2.2 Joint Strategic Needs Assessment (JSNA) .....	24
2.3 Ealing Health and Wellbeing Strategy.....	24
2.4 Population characteristics .....	25
2.4.1 Overview .....	25
2.4.2 Age.....	25
2.4.3 Predicted population growth.....	29
2.4.4 Life expectancy at birth .....	30
2.4.5 Fertility rate.....	31
2.4.6 Diversity.....	31
2.4.7 Deprivation .....	40
2.5 Other considerations .....	42
2.5.1 Burden of disease .....	42
2.5.2 Hospital admissions.....	43

2.5.3	Causes of death .....	45
2.5.4	Palliative care .....	47
2.5.5	Lifestyle-related morbidity.....	47
2.5.6	Other lifestyle indicators .....	49
2.5.7	COVID-19 pandemic .....	50
<b>Section 3: NHS pharmaceutical services provision, currently commissioned</b>		<b>52</b>
3.1	Community pharmacies.....	53
3.1.1	Choice of community pharmacies .....	54
3.1.2	Weekend and evening provision .....	54
3.1.3	Access to community pharmacies.....	55
3.1.4	Advanced Service provision from community pharmacies .....	58
3.1.5	Enhanced Service provision.....	60
3.2	Dispensing Appliance Contractors (DACs).....	60
3.3	Distance-Selling Pharmacies (DSPs).....	60
3.4	Local Pharmaceutical Service (LPS) providers .....	61
3.5	Dispensing GP practices .....	61
3.6	PhAS pharmacies .....	61
3.7	Pharmaceutical service provision provided from outside Ealing.....	61
<b>Section 4: Other services that may affect pharmaceutical services provision</b>		<b>63</b>
4.1	Local authority-commissioned services provided by community pharmacies in Ealing .....	63
4.2	CCG-commissioned services .....	63
4.3	Other services provided from community pharmacies .....	64
4.4	Changed collection and delivery services .....	64
4.5	Language services .....	64
4.6	Services for less-abled people .....	64
4.7	GP practices providing extended hours.....	64
4.8	Other providers .....	65
<b>Section 5: Findings from the public questionnaire</b>		<b>66</b>
5.1	Visiting a pharmacy.....	66
5.2	Choosing a pharmacy .....	66
5.3	Mode of transport to a community pharmacy .....	66
5.4	Time to get to a pharmacy.....	66
5.5	Preference for when to visit a pharmacy .....	67
5.6	Service provision from community pharmacies .....	67

<b>Section 6: Analysis of health needs and pharmaceutical service provision ...</b>	<b>69</b>
6.1 Pharmaceutical services and health needs .....	69
6.1.1 Ealing health needs .....	69
6.1.2 Ealing Health and Wellbeing Strategy (HWS) .....	70
6.1.3 Priorities from the NHS Long Term Plan (LTP) .....	71
6.2 Essential Services (ES).....	72
6.3 Advanced Services .....	74
6.4 Enhanced Services .....	77
6.4.1 COVID-19 vaccination.....	77
6.4.2 London Vaccination Service.....	77
6.4.3 Bank holidays.....	77
6.5 Locally Commissioned Services (LCS) .....	77
6.5.1 CCG-commissioned services .....	78
6.5.2 Local Authority-commissioned services.....	78
6.6 PNA localities .....	80
6.6.1 Acton .....	82
6.6.2 Ealing .....	84
6.6.3 Greenford .....	86
6.6.4 Hanwell.....	88
6.6.5 Northolt.....	90
6.6.6 Perivale .....	92
6.6.7 Southall .....	94
6.7 Necessary Services: gaps in provision in Ealing .....	96
6.8 Improvements and better access: gaps in provision in Ealing.....	98
<b>Section 7: Conclusions.....</b>	<b>101</b>
7.1 Current provision of Necessary Services .....	101
7.1.1 Necessary Services – normal working hours.....	101
7.1.2 Necessary Services – outside normal working hours .....	102
7.2 Future provision (over the next three years), of Necessary Services .....	102
7.3 Improvements and better access – gaps in provision .....	102
7.3.1 Current and future access to Advanced Services.....	102
7.3.2 Current and future access to Enhanced Services .....	103
7.3.3 Current and future access to Locally Commissioned Services (LCS)	103
<b>Appendix A: List of pharmaceutical service providers in Ealing.....</b>	<b>104</b>

Acton locality .....	104
Ealing locality .....	105
Greenford locality .....	106
Hanwell locality .....	107
Northolt locality.....	108
Southall locality .....	109
<b>Appendix B: PNA Steering Group terms of reference .....</b>	<b>110</b>
<b>Appendix C: Public questionnaire .....</b>	<b>113</b>
<b>Appendix D: Pharmacy contractor questionnaire .....</b>	<b>122</b>
<b>Appendix E: Commissioner questionnaire .....</b>	<b>128</b>
<b>Appendix F: PCN questionnaire.....</b>	<b>132</b>
<b>Appendix G: PNA Project Plan.....</b>	<b>134</b>
<b>Appendix H: Results of the public questionnaire.....</b>	<b>135</b>
<b>Appendix I: Results of the pharmacy contractor questionnaire .....</b>	<b>147</b>
<b>Appendix J: Results of the commissioner questionnaire .....</b>	<b>162</b>
<b>Appendix K: Consultation plan and list of stakeholders .....</b>	<b>165</b>
<b>Appendix L: Summary of consultation responses.....</b>	<b>167</b>
<b>Appendix M: Consultation comments .....</b>	<b>171</b>
<b>Appendix N: Alphabetical list of pharmaceutical service providers in Ealing HWB area 173</b>	
<b>Appendix O: Opportunities for service provision from community pharmacies in Ealing .....</b>	<b>177</b>
1 Introduction .....	177
2 Health needs identified in the NHS Long Term Plan (LTP).....	178
3 Health needs in Ealing.....	178
4 Opportunities for further community pharmacy provision.....	179
4.1 Existing services .....	179
4.2 New services .....	179
4.3 Possible disease-specific services.....	181
5 Recommendations .....	181
<b>Map 1: Pharmacies and population density by output area .....</b>	<b>183</b>
<b>Map 2: Pharmacies and IMD 2019 by output area .....</b>	<b>184</b>
<b>Map 3: All contractors in Ealing.....</b>	<b>185</b>
<b>Map 4: Peak driving times to nearest pharmacy .....</b>	<b>186</b>
<b>Map 5: Walking times to nearest pharmacy .....</b>	<b>187</b>

**Abbreviations ..... 188**

## List of tables

Table 1: Timeline for PNAs .....	13
Table 2: Ealing’s population estimates and proportions by sex and five-year-age-bands, 2021 .....	27
Table 3: Ealing’s population by locality and age groups, 2020.....	28
Table 4: Ealing’s population projections and magnitude of change compared with England in 2021, 2031 and 2041.....	29
Table 5: Life expectancy in Ealing compared with England average, 2015-19 .....	30
Table 6: Ethnic minority population in Ealing localities and wards, Ealing and England, 2011 .....	33
Table 7: Proficiency in English (% of people who cannot speak English well or at all), Ealing localities and wards, LB Ealing and England, 2011 .....	34
Table 8: Ethnicity of children in schools, Ealing and England, 2021.....	35
Table 9: Children aged under 18 in care (rate per 10,000 children), 2016-20 .....	36
Table 10: Long-term support needs of younger and older adults met by admission to residential and nursing care (rate per 100,000 people), 2019-20 .....	36
Table 11: Percentage of older people living in income-deprived homes/living alone, Ealing localities and wards, Ealing and England .....	37
Table 12: Populations with disabilities in Ealing and England (rate per 100,000 people), 2020 and 2030 projections .....	38
Table 13: Households in temporary accommodation in Ealing, London and England (rate per 1,000), Q1 2021-22 .....	39
Table 14: GP-recorded disease prevalence, Ealing and England, 2020-21 .....	42
Table 15: All causes, CHD, stroke, myocardial infarction and COPD emergency SARs, Ealing localities, wards, Ealing overall and England, 2015-16 to 2019-20 .....	43
Table 16: All causes, all cancers, circulatory and respiratory diseases SMRs, Ealing wards, Ealing and England, 2015-19.....	45
Table 17: Place of death, Ealing and England, 2020.....	47
Table 18: Prevalence of lifestyle related morbidities, Ealing wards, Ealing and England .....	48
Table 19: Other lifestyle indicators, LB Ealing, London and England.....	50
Table 20: COVID-19 cumulative reported rates for Ealing, London and England (27 January 2022) .....	51
Table 21: Number of pharmacies (including DSPs) per 100,000 population .....	53
Table 22: Breakdown of average community pharmacies per 100,000 population .....	54
Table 23: Community pharmacy ownership, 2020-21 .....	54
Table 24: Number of 100-hour pharmacies (and percentage of total) .....	55
Table 25: Percentage of community pharmacy providers open Monday to Friday (excluding bank holidays) beyond 6 pm, on Saturday and Sunday .....	57
Table 26: Providers of Advanced Services in Ealing (2020-21) by percentage of community pharmacy providers by locality (number of pharmacies).....	58
Table 27: Advanced Service provision by percentage of providers currently providing .....	59
Table 28: Commissioned services from community pharmacies in Ealing .....	63
Table 29: Public questionnaire respondents about services .....	67

Table 30a: Demographic analysis of community pharmacy user questionnaire respondents – sex.....	67
Table 30b: Demographic analysis of community pharmacy user questionnaire respondents – age.....	68
Table 30c: Demographic analysis of community pharmacy user questionnaire respondents – illness or disability.....	68
Table 31: Opening hours of community pharmacies by number and type of contractor per locality .....	80
Table 32: Provision of NHSE Advanced and Enhanced Services by locality (number of community pharmacies) .....	81
Table 33: Provision of LCS (CCG and LA) by locality (number of community pharmacies) .....	81

## List of figures

Figure 1: Population pyramid, Ealing 2020.....	26
Figure 2: Crude fertility rate per 1,000 females aged 15–44, Ealing localities, Ealing and England, 2015-19.....	31
Figure 3: Ealing population estimates by ethnic group, 2020 .....	32
Figure 4: Ealing population estimates by ethnic group, 2020-50.....	32
Figure 5: Ealing deprivation levels by LSOA based on IMD 2019 ranking .....	41
Figure 6: COVID-19 cumulative cases reported rates for localities in Ealing (27 January 2022) .....	51
Figure 7: All contractors in Ealing.....	52
Figure 8: Peak driving times to nearest pharmacy .....	56
Figure 9: Walking times to nearest pharmacy .....	56
Figure 10: Map identifying Ealing HWB pharmacies and cross-border pharmacy provision .....	62

## List of maps

Map 1: Pharmacies and population density by output area .....	183
Map 2: Pharmacies and IMD 2019 by output area .....	184
Map 3: All contractors in Ealing .....	185
Map 4: Peak driving times to nearest pharmacy .....	186
Map 5: Walking times to nearest pharmacy .....	187

## Executive summary

Every Health and Wellbeing Board (HWB) is required to produce a Pharmaceutical Needs Assessment (PNA). There is also a requirement to reassess and revise the PNA within three years of its previous publication. However, the HWB must make a revised assessment as soon as it is reasonably practicable after identifying any changes that have occurred since the previous assessment that may have an effect on the needs of pharmaceutical services. Due to the COVID-19 pandemic, the Department of Health and Social Care postponed the requirement for all HWBs to publish until 1 October 2022.

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

- Understand the pharmaceutical needs of the population
- Gain a clearer picture of pharmaceutical services currently provided
- Make appropriate decisions on applications for NHS pharmacy contracts
- Commission appropriate and accessible services from community pharmacies
- Clearly identify and address any local gaps in pharmaceutical services
- Target services to reduce health inequalities within local health communities

This PNA has been produced through the PNA Steering Group on behalf of Ealing HWB by the London Borough of Ealing, with authoring support from Soar Beyond Ltd.

### NHS pharmaceutical services in England

NHS pharmaceutical services are provided by contractors on the pharmaceutical list held by NHS England and NHS Improvement (NHSE&I). Types of providers are:

- Community pharmacy contractors, including Distance-Selling Pharmacies (DSPs)
- Dispensing Appliance Contractors (DACs)
- Local Pharmaceutical Service (LPS) providers
- Dispensing doctors

### Pharmaceutical service providers in Ealing

Ealing has 71 community pharmacies and four DSPs (as of February 2022) for a population of around 340,300. Combining these, Ealing has an average of 22.0 community pharmacies and DSPs per 100,000 population compared with 20.6 per 100,000 in England.

### Conclusions

Provision of current pharmaceutical services and locally commissioned services is well distributed, serving all the main population centres. There is excellent access to a range of services commissioned from pharmaceutical service providers. As part of this assessment no gaps have been identified in provision either now or in the future (over the next three years) for pharmaceutical services deemed necessary by Ealing HWB.

## Section 1: Introduction

### 1.1 Background

The NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (SI 2013/349),<sup>1</sup> hereafter referred to as the Pharmaceutical Regulations 2013, came into force on 1 April 2013. Unless required to be produced earlier, the Pharmaceutical Regulations 2013 permitted Health and Wellbeing Boards (HWBs) a temporary extension of the Pharmaceutical Needs Assessments (PNAs) previously produced by the Primary Care Trust (PCT); HWBs were then required to publish their first PNA by 1 April 2015 at the latest. The Pharmaceutical Regulations 2013 require each HWB to publish a statement of its revised assessment within three years of its previous publication and this document fulfils this regulatory requirement. Due to the COVID-19 pandemic, the Department of Health and Social Care (DHSC) postponed the requirement for all HWBs to publish until 1 October 2022.

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

**Table 1: Timeline for PNAs**

2009	2011	2013	2015	Ongoing
Health Act 2009 introduces statutory framework requiring PCTs to prepare and publish PNAs	PNAs to be published by 1 February 2011	Pharmaceutical Regulations 2013 outline PNA requirements for HWB	HWB required to publish own PNAs by 1 April 2015	PNAs reviewed every 3 years* *publication of PNAs was delayed during the COVID-19 pandemic

Since the 2018 PNA there have been several significant changes to the Community Pharmacy Contractual Framework (CPCF), national directives and environmental factors, which need to be considered as part of this PNA.

#### 1.1.1 NHS Long Term Plan (LTP)<sup>2</sup>

The NHS Long Term Plan (LTP) was published in January 2019, and it set out the priorities for healthcare for the next ten years. It is wide-ranging and includes chapters on new service models, action on prevention and health inequalities, and progress on care quality and outcomes. The priority clinical areas that could be affected by community pharmacy services are set out below. A more detailed description is available in [Section 2.1](#).

Priority clinical areas in the LTP include:

- Prevention
  - Smoking

<sup>1</sup> The NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. [www.legislation.gov.uk/uk/si/2013/349/contents/made](http://www.legislation.gov.uk/uk/si/2013/349/contents/made)

<sup>2</sup> NHS Long Term Plan. [www.longtermplan.nhs.uk/](http://www.longtermplan.nhs.uk/)

- Obesity
- Alcohol
- Antimicrobial resistance
- Stronger NHS action on health inequalities
- Better care for major health conditions
  - Cancer
  - Cardiovascular disease
  - Stroke care
  - Diabetes
  - Respiratory disease
  - Adult mental health services

### 1.1.2 Services stopped and changed

- **Medicines Use Reviews (MURs)** were decommissioned on 31 March 2021. A number of additional services have been introduced including additional eligible patients for the New Medicine Service (NMS).
- **Discharge Medicines Service (DMS):** A new Essential Service from 15 February 2021. NHS trusts were able to refer patients who would benefit from extra guidance around new prescribed medicines for provision of the DMS at their community pharmacy. The service has been identified by the NHSE&I Medicines Safety Improvement Programme to be a significant contributor to the safety of patients at transitions of care, by reducing readmissions to hospital.<sup>3</sup>
- **Community Pharmacist Consultation Service (CPCS):**<sup>4</sup> An Advanced Service introduced on 29 October 2019 to enable community pharmacies to play a greater role in urgent care provision. The service replaces the NHS Urgent Medicine Supply Advanced Service (NUMSAS) and local pilots of the Digital Minor Illness Referral Service (DMIRS). The first phase was to offer patients a consultation with a pharmacist from referral from NHS 111, integrated urgent clinical assessment services and, in some cases, 999. From 1 November 2020, GP CPCS was launched, where GPs can refer patients for minor illness consultation but not for urgent supply of medicine or appliances, with a locally agreed referral pathway. The CPCS and GP CPCS aims to relieve pressure on the wider NHS by connecting patients with community pharmacies who are integrated with primary care-level services, part of the NHS LTP.

<sup>3</sup> PSNC. Discharge Medicines Service (DMS). <https://psnc.org.uk/services-commissioning/essential-services/discharge-medicines-service/>

<sup>4</sup> PSNC. Community Pharmacist Consultation Service (CPCS). <https://psnc.org.uk/services-commissioning/advanced-services/community-pharmacist-consultation-service/>

- **Coronavirus pandemic:** The COVID-19 pandemic placed greater demands on health systems and community pharmacies. Community pharmacists had to adapt, adopt changes to healthcare services provided and remain open during the pandemic to provide for the pharmaceutical needs of the population.<sup>5</sup> During the pandemic there was a net loss of 215 pharmacies nationally, with 236 opening while 451 closed during 2020-21, which resulted in the lowest number of pharmacies in England since 2015-16.<sup>6</sup> In response to the pandemic, two Advanced Services were also created: the pandemic delivery service and COVID-19 Lateral Flow Device (LFD) provision. The COVID-19 vaccination service was also added as an Enhanced Service provided from community pharmacies and commissioned by NHSE&I. Due to the easing of COVID-19 restrictions by the government, the pandemic delivery service was decommissioned on 5 March 2022 at 23:59. From 1 April, the government no longer provides free universal symptomatic and asymptomatic testing for the general public in England.<sup>7</sup>
- **Remote Access:** From November 2020, community pharmacies had to facilitate remote access to pharmaceutical services at or from the pharmacy premises.
- **Pharmacy Quality Scheme (PQS):** The PQS scheme is a voluntary scheme that forms part of the CPCF.<sup>8</sup> It supports delivery of the NHS LTP and rewards community pharmacy contractors that deliver quality criteria in three quality dimensions: clinical effectiveness, patient safety and patient experience. The PQS has been developed to incentivise quality improvement in specific areas yearly. The PQS for 2022-23 is under development at the time of writing.

---

<sup>5</sup> Hayden JC and Parkin R. The Challenges of COVID-19 for community pharmacists and opportunities for the future. *Irish J Psych Med* 2020; 37(3), 198-203. <https://doi.org/10.1017/ipm.2020.52>

<sup>6</sup> Wickware C. Lowest number of community pharmacies in six years, official figures show. *Pharmaceutical J*. 28 October 2021. <https://pharmaceutical-journal.com/article/news/lowest-number-of-community-pharmacies-in-six-years-official-figures-show>

<sup>7</sup> Cabinet Office. Living with COVID-19. 6 May 2022. [www.gov.uk/government/publications/covid-19-response-living-with-covid-19/covid-19-response-living-with-covid-19](http://www.gov.uk/government/publications/covid-19-response-living-with-covid-19/covid-19-response-living-with-covid-19)

<sup>8</sup> NHSE&I. Pharmacy Quality Scheme: guidance 2021/22. September 2021. [www.england.nhs.uk/wp-content/uploads/2021/09/Pharmacy-Quality-Scheme-guidance-September-2021-22-Final.pdf](http://www.england.nhs.uk/wp-content/uploads/2021/09/Pharmacy-Quality-Scheme-guidance-September-2021-22-Final.pdf)

## 1.2 Purpose of the PNA

NHSE&I is required to publish and maintain pharmaceutical lists for each HWB area. Any person wishing to provide NHS pharmaceutical services is required to be listed on the pharmaceutical list. NHSE&I must consider any applications for entry to the pharmaceutical list. The Pharmaceutical Regulations 2013 require NHSE&I to consider applications to fulfil unmet needs determined within the PNA of that area, or applications for benefits unforeseen within the PNA. Such applications could be for the provision of NHS pharmaceutical services from new premises or to extend the range or duration of current NHS pharmaceutical services offered from existing premises. As the PNA will become the basis for NHSE&I to make determinations on such applications, it is therefore prudent that the PNA is compiled in line with the regulations and with due process, and that the PNA is accurately maintained and up to date. Although decisions made by NHSE&I regarding applications to the pharmaceutical list may be appealed to the NHS Primary Care Unit, the final published PNA cannot be appealed. It is likely the only challenge to a published PNA will be through application for a judicial review of the process undertaken to conclude the PNA.

The PNA should also be considered alongside the local authority's Joint Strategic Needs Assessment (JSNA).<sup>9</sup> For the purpose of this PNA, the JSNA used is an online web-based tool with the most up to date information.

The PNA will identify where pharmaceutical services address public health needs identified in the JSNA as a current or future need. Through decisions made by the local authority, NHSE&I and the CCGs, these documents will jointly aim to improve the health and wellbeing of the local population and reduce inequalities.

CCGs are to be replaced by Integrated Care Boards (ICBs) as part of Integrated Care Systems (ICS). ICS delegation has been delayed until July 2022 due to the COVID-19 pandemic, and some will not go live until April 2023. It is anticipated that ICSs will take on the delegated responsibility for pharmaceutical services from NHSE&I and therefore some services commissioned from pharmacies by CCGs currently may fall under the definition of Enhanced Services. For the purpose of this PNA, at the time of writing, only services commissioned by NHSE&I as per the regulations have been considered as 'pharmaceutical services'.

Although the Steering Group is aware that during the lifetime of this PNA CCGs will transition into ICBs, we have referred to CCGs throughout the document with the intention that the CCG will refer to its successor body when in place.

## 1.3 Scope of the PNA

The Pharmaceutical Regulations 2013 detail the information required to be contained within a PNA. A PNA is required to measure the adequacy of pharmaceutical Ealing under five key themes:

- Necessary Services: current provision

---

<sup>9</sup> Ealing Joint Strategic Needs Assessment (JSNA).

[www.ealing.gov.uk/info/201072/strategies\\_plans\\_and\\_policies/1963/ealings\\_joint\\_strategic\\_needs\\_assessment/1](http://www.ealing.gov.uk/info/201072/strategies_plans_and_policies/1963/ealings_joint_strategic_needs_assessment/1)

- Necessary Services: gaps in provision
- Other relevant services: current provision
- Improvements and better access: gaps in provision
- Other services

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

- How the localities were determined
- The different needs of the different localities
- The different needs of people who share a particular characteristic
- A report on the PNA consultation

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

- Pharmacy contractors
- Dispensing Appliance Contractors (DACs)
- Local Pharmaceutical Service (LPS) providers
- Dispensing doctors

For the purposes of this PNA, ‘pharmaceutical services’ has been defined as those services which are/may be commissioned under the provider’s contract with NHSE&I. A detailed description of each provider type, and the pharmaceutical services as defined in their contract with NHSE&I, is set out below.

### 1.3.1 Community pharmacy contractors

The CPCF, last agreed in 2019,<sup>10</sup> is made up of three types of services:

- Essential Services
- Advanced Services
- Enhanced Services

Details of these services can be found in [Section 6](#).

All pharmacies were required to become Level 1 Healthy Living Pharmacies by April 2020.

The responsibility for public health services transferred from PCTs to local authorities with effect from 1 April 2013.

Pharmacy contractors comprise both those located within the Ealing HWB area as listed in Appendix A, those in neighbouring HWB areas and remote suppliers, such as Distance Selling Pharmacies (DSPs). Although DSPs may provide services from all three levels as described above, and must provide all Essential Services, they may not provide Essential Services face-to-face on the premises.

Additionally, they must provide services to the whole population of England.

---

<sup>10</sup> DHSC. Community Pharmacy Contractual Framework: 2019 to 2024. 22 July 2019. [www.gov.uk/government/publications/community-pharmacy-contractual-framework-2019-to-2024](http://www.gov.uk/government/publications/community-pharmacy-contractual-framework-2019-to-2024)

### **1.3.2 Dispensing Appliance Contractors (DACs)**

DACs operate under the Terms of Service for Appliance Contractors as set out in Schedule 5 of the Pharmaceutical Regulations 2013. They can supply appliances against an NHS prescription such as stoma and incontinence aids, dressings, bandages, etc. They are not required to have a pharmacist, do not have a regulatory body and their premises do not have to be registered with the General Pharmaceutical Council.

DACs must provide a range of Essential Services such as dispensing of appliances, advice on appliances, signposting, clinical governance, and home delivery of appliances. In addition, DACs may provide the Advanced Services of Appliance Use Review (AUR) and Stoma Appliance Customisation (SAC).

Pharmacy contractors, dispensing doctors and LPS providers may supply appliances, but DACs are unable to supply medicines.

### **1.3.3 Dispensing GP practices**

The Pharmaceutical Regulations 2013, as set out in Part 8 and Schedule 6, permit GPs in certain areas to dispense NHS prescriptions for defined populations.

These provisions are to allow patients in rural communities, who do not have reasonable access to a community pharmacy, to have access to dispensing services from their GP practice. Dispensing GP practices therefore make a valuable contribution to dispensing services although they do not offer the full range of pharmaceutical services offered at community pharmacies. Dispensing GP practices can provide such services to communities within areas known as controlled localities.

GP premises for dispensing must be listed within the pharmaceutical list held by NHSE&I and patients retain the right of choice to have their prescription dispensed from a community pharmacy if they wish.

### **1.3.4 Local Pharmaceutical Service (LPS) providers**

A pharmacy provider may be contracted to perform specified services to their local population or a specific population group.

This contract is locally commissioned by NHSE&I and provision for such contracts is made in the Pharmaceutical Regulations 2013 in Part 13 and Schedule 7. Such contracts are agreed outside the national framework although they may be over and above what is required from national contract. Payment for service delivery is locally agreed and funded.

### **1.3.5 Pharmacy Access Scheme (PhAS) providers<sup>11</sup>**

The PhAS has been designed to capture the pharmacies that are most important for patient access, specifically those pharmacies where patient and public access would be materially affected should they close. The PhAS takes isolation and need levels into account.

---

<sup>11</sup> DHSC. 2022 Pharmacy Access Scheme: guidance. 4 July 2022. [www.gov.uk/government/publications/community-pharmacy-contractual-framework-2019-to-2024/2021-to-2022-pharmacy-access-scheme-guidance](https://www.gov.uk/government/publications/community-pharmacy-contractual-framework-2019-to-2024/2021-to-2022-pharmacy-access-scheme-guidance)

Pharmacies in areas with dense provision of pharmacies remain excluded from the PhAS. In areas with high numbers of pharmacies, public access to NHS pharmaceutical services is not at risk. The scheme is focused on areas that may be at risk of reduced access, for example, where a local population relies on a single pharmacy.

DSPs, DACs, LPS contractors and dispensing doctors remain ineligible for the scheme.

From 1 January 2022, the revised PhAS is to continue to support patient access to isolated, eligible pharmacies and ensure patient access to NHS community pharmaceutical services is protected.

### **1.3.6 Other services and providers in Ealing HWB area**

As stated in [Section 1.3](#), for the purpose of this PNA, 'pharmaceutical services' has been defined as those services that are or that may be commissioned under the provider's contract with NHSE&I.

[Section 4](#) outlines services provided by NHS pharmaceutical providers in Ealing commissioned by organisations other than NHSE&I or provided privately, and therefore out of scope of the PNA. At the time of writing the commissioning organisations primarily discussed are the local authority and CCG.

## **1.4 Process for developing the PNA**

Ealing HWB has statutory responsibilities under the Health and Social Care Act to produce and publicise a revised PNA at least every three years. The last PNA for Ealing was published in March 2018 and is therefore due to be reassessed in line with the extended timetable by October 2022.

Ealing's PNA Steering Group and the Director of Public Health have delegated authority to oversee the production and publication of Ealing's PNA on behalf of Ealing HWB. At its meeting on 16 March 2022, Ealing HWB formally delegated the responsibility of the PNA to the Steering Group.

Ealing Council commissioned Soar Beyond Ltd to produce the 2022 PNA, based on the latter's significant experience of providing services to assist pharmaceutical commissioning, including the production of Ealing's previous two PNAs in 2015 and 2018.

### **Step 1: Steering group**

On 19 October 2021 Ealing's PNA Steering Group was established. The terms of reference and membership of the group can be found in Appendix B.

### **Step 2: Project management**

At this first meeting, Soar Beyond Ltd and the local authority presented and agreed the project plan and ongoing maintenance of the project plan. Appendix G shows an approved timeline for the project.

### **Step 3: Review of existing PNA and JSNA**

Through the project manager, the PNA Steering Group reviewed the existing PNA and subsequent supplementary statements<sup>12</sup> and JSNA.

#### **Step 4a: Public questionnaire on pharmacy provision**

A public questionnaire to establish views about pharmacy services was produced by the Steering Group, which was circulated to all residents via:

- Ealing Council website
- Distribution of paper copies of the questionnaires and posters to all local pharmacies and libraries
- Distribution of posters to all GP practices and Ealing Council offices
- Online questionnaire to Ealing Residents Panel
- Healthwatch promoted via social media (Twitter and Facebook) and via news item on website
- Social media

A total of 206 responses were received. A copy of the public questionnaire can be found in Appendix C and the detailed responses can be found in Appendix H.

#### **Step 4b: Pharmacy contractor questionnaire**

The Steering Group agreed a questionnaire to be distributed to the local community pharmacies to collate information for the PNA. The Local Pharmaceutical Committees (LPC) supported this questionnaire to gain responses.

A total of 42 responses were received. A copy of the pharmacy questionnaire can be found in Appendix D and the responses can be found in Appendix I.

#### **Step 4c: Commissioner questionnaire**

The Steering Group agreed a questionnaire to be distributed to all relevant commissioners in Ealing to inform the PNA.

Two responses were received. A copy of the commissioner questionnaire can be found in Appendix E and the responses can be found in Appendix J.

#### **Step 4d: PCN questionnaire**

The Steering Group agreed a questionnaire to be distributed to all PCNs in Ealing to inform the PNA.

No responses were received. A copy of the PCN questionnaire can be found in Appendix F.

### **Step 5: Mapping of services**

Details of services and service providers was collated and triangulated to ensure the information upon which the assessment was based was the most robust and accurate. NHSE&I, as the commissioner of service providers and services classed as necessary

---

<sup>12</sup> Ealing PNA 2018 and subsequent supplementary statements.

[www.ealing.gov.uk/downloads/download/3050/pharmaceutical\\_needs\\_assessment](http://www.ealing.gov.uk/downloads/download/3050/pharmaceutical_needs_assessment)

and relevant, was predominantly used as a base for information due to its contractual obligation to hold and maintain pharmaceutical lists. Information was collated, ratified and shared with the Steering Group before the assessment was commenced. The pharmaceutical list from NHSE&I dated February 2022 was used for this assessment.

### **Step 6: Preparing the draft PNA for consultation**

The Steering Group reviewed and revised the content and detail of the existing PNA. The process took into account the JSNA and other relevant strategies in order to ensure the priorities were identified correctly. The Steering Group was fully aware of the potential changes brought about with the easing of restrictions that had been brought in due to the COVID-19 pandemic. However, as the PNA is an assessment taken at defined moment in time it was agreed the pragmatic way forward would be to monitor such changes and if necessary update the PNA before finalising or publish with accompanying supplementary statements as per the regulations, unless the changes had a significant impact on the conclusions. In the case of the latter the group were fully aware of the need to reassess.

### **Step 7: Consultation**

In line with the Pharmaceutical Regulations 2013, a consultation on the draft PNA was undertaken between 16 May 2022 and 15 July 2022. The draft PNA and consultation response form was issued to all identified stakeholders. These are listed in the final PNA. The draft PNA was also posted on Ealing's website.

### **Step 8: Collation and analysis of consultation responses**

The consultation responses were collated and analysed by Soar Beyond Ltd. A summary of the responses received and analysis is noted in Appendix L, and consultation comments are included in Appendix M.

### **Step 9: Production of final PNA - future stage**

The collation and analysis of consultation responses was used by the project manager to revise the draft PNA, and the final PNA was presented to the PNA Steering Group.

The final PNA was presented to the Ealing HWB for approval and publication before 1 October 2022.

## **1.5 Localities for the purpose of the PNA**

The PNA Steering Group, at its first meeting, considered how the localities within Ealing would be defined. The majority of health and social care data is available at local authority council ward level and at this level provides reasonable statistical rigour. It was agreed that the council wards would be used to define the localities of Ealing.

The localities used for the PNA for Ealing are:

- Acton
- Ealing
- Greenford
- Hanwell

- Northolt
- Perivale
- Southall

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

The information contained in Appendix A has been provided by NHSE&I (who is legally responsible for maintaining the pharmaceutical list of providers of pharmaceutical services in each HWB area), Ealing Council and North West London CCG (NWL CCG).

## Section 2: Context for the PNA

### 2.1 NHS Long Term Plan (LTP)<sup>13</sup>

The NHS LTP was published in January 2019 and it set out the priorities for healthcare for the next ten years. It is wide-ranging and includes chapters on new service models, action on prevention and health inequalities, and progress on care quality and outcomes.

Priority clinical areas in the LTP include:

- Prevention
  - Smoking
  - Obesity
  - Alcohol
  - Antimicrobial resistance
  - Stronger NHS action on health inequalities
- Better care for major health conditions
  - Cancer
  - Cardiovascular disease
  - Stroke care
  - Diabetes
  - Respiratory disease
  - Adult mental health services

There are specific aspects of the LTP that include community pharmacy and pharmacists:

- Section 4.21 states that ‘Pharmacists have an essential role to play in delivering the Long Term Plan’ and goes on to state: ‘In community pharmacy, we 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.’
- Section 1.10 refers to the creation of fully integrated community-based healthcare. This will be supported through the ongoing training and development of multidisciplinary teams in primary and community hubs. From 2019, NHS 111 will start direct booking into GP practices across the country, as well as referring on to community pharmacies, who support urgent care and promote patient self-care and self-management. CCGs will also develop pharmacy connection schemes for patients who do not need primary medical services. Pharmacy connection schemes have developed into the CPCS, which has been available since 29 October 2019 as an Advanced Service.
- Section 1.12 identifies ‘pharmacist review’ of medication as a method to reduce avoidable A&E attendances, admissions and delayed discharge, streamlining patient pathways to reduce avoidable outpatient visits and over-medication.
- Section 1.26 states that urgent treatment centres will work alongside other parts of the urgent care network, including primary care, community pharmacists, ambulance and other community-based services to provide a locally accessible and convenient alternative to A&E for patients who do not need to attend hospital.

<sup>13</sup> NHS Long Term Plan [www.longtermplan.nhs.uk/](http://www.longtermplan.nhs.uk/)

- Section 3.68 identifies community pharmacists as part of the process of improving the effectiveness of approaches such as the NHS Health Check, rapidly treating those identified with high-risk conditions, including high blood pressure. The hypertension case-finding service has been developed as an Advanced Service from community pharmacies.
- Section 3.86 states: ‘We will do more to support those with respiratory disease to receive and use the right medication.’ Of NHS spend on asthma, 90% goes on medicines, but incorrect use of medication can also contribute to poorer health outcomes and increased risk of exacerbations, or even admission. The NMS is an Advanced Service that provides support for people with long-term conditions newly prescribed a medicine, to help improve medicines adherence.
- Section 6.17 identifies ten priority areas. Section 6.17(v) identifies pharmacists as key in delivering value for the £16 billion spent on medicines annually. It states: ‘Research shows as many as 50% of patients do not take their medicines as intended and pharmacists will support patients to take their medicines to get the best from them, reduce waste and promote self-care.’

## 2.2 Joint Strategic Needs Assessment (JSNA)

The PNA is undertaken within the context of the health, care and wellbeing needs of the local population, as set out in the Ealing JSNA. JSNAs are assessments of the current and future health and social care needs of the local community, which may be met by Ealing Council, NWL CCG, NHSE&I or other providers. JSNAs are produced by HWBs, and are unique to the local area.

The PNA is undertaken in the context of the health, care and wellbeing needs of the local population, as defined in the Ealing JSNA.<sup>14</sup> The JSNA, as well as defining the needs of the local population, also identifies a strategic direction of service delivery to meet those needs, and commissioning priorities to improve the public’s health and reduce inequalities. The PNA should therefore be read alongside the JSNA.

## 2.3 Ealing Health and Wellbeing Strategy

The current Ealing Health and Wellbeing Strategy (HWS) (2016-21)<sup>15</sup> is guided by the JSNA and other relevant sources of information. The commissioning of services to address ill health is informed by the JSNA. The PNA is informed by the JSNA.

The HWS identifies four long-term ambitions to promote wellness for residents of Ealing:

- Create and sustain good mental and physical health for children and adults at every stage of life
- Reduce health inequalities by improving outcomes for neighbourhoods and communities experiencing poor health
- Enable people of working age to participate as fully as possible in working life, to improve the health and economic outcomes for them and their families

---

<sup>14</sup> Ealing JSNA.

[www.ealing.gov.uk/info/201072/strategies\\_plans\\_and\\_policies/1963/ealings\\_joint\\_strategic\\_needs\\_assessment/1](http://www.ealing.gov.uk/info/201072/strategies_plans_and_policies/1963/ealings_joint_strategic_needs_assessment/1)

<sup>15</sup> Ealing Health and Wellbeing Strategy 2016-21.

[www.ealing.gov.uk/downloads/download/3755/health\\_and\\_wellbeing\\_strategy](http://www.ealing.gov.uk/downloads/download/3755/health_and_wellbeing_strategy)

- Enable everyone to be healthy and independent for as long as possible, helping to prevent or delay the need for social and acute care

The HWS highlights the need for a multi-agency approach (including local pharmaceutical service providers) in addressing the above priorities, in order to realise a more coherent and effective response and to accomplish set outcomes.

Regulation 9 of the Pharmaceutical Regulations 2013 requires that HWBs, when carrying out assessments for the purpose of publishing PNAs, have regard to:

- The number of people in its area who require pharmaceutical services
- The demography of its area
- The risks to the health or wellbeing of people in its area

Pharmaceutical service providers have the potential to play a greater role in identifying and helping address priority health needs as they are strategically placed in the community and have daily interactions with the local population.

Community pharmacies can have a significant impact on improving the health and wellbeing of local populations.

As a prerequisite to understanding local health needs and how pharmaceutical service providers can be involved in various interventions, [Sections 2.4](#) and [2.5](#) further examine the population of Ealing characteristics and major causes of ill health.

## 2.4 Population characteristics

### 2.4.1 Overview

The population of Ealing has risen from 307,300 in 2001 to 340,300 in 2020. The number of males and females is evenly spread –171,800 males and 168,600 females. Ealing is the fourth largest London borough in terms of population,<sup>16</sup> after Barnet (399,000), Croydon (388,600) and Newham (355,300). At 61 persons per hectare, Ealing is also the fourth most densely populated borough in Outer London (after Haringey, Brent and Waltham Forest).<sup>17</sup>

### 2.4.2 Age

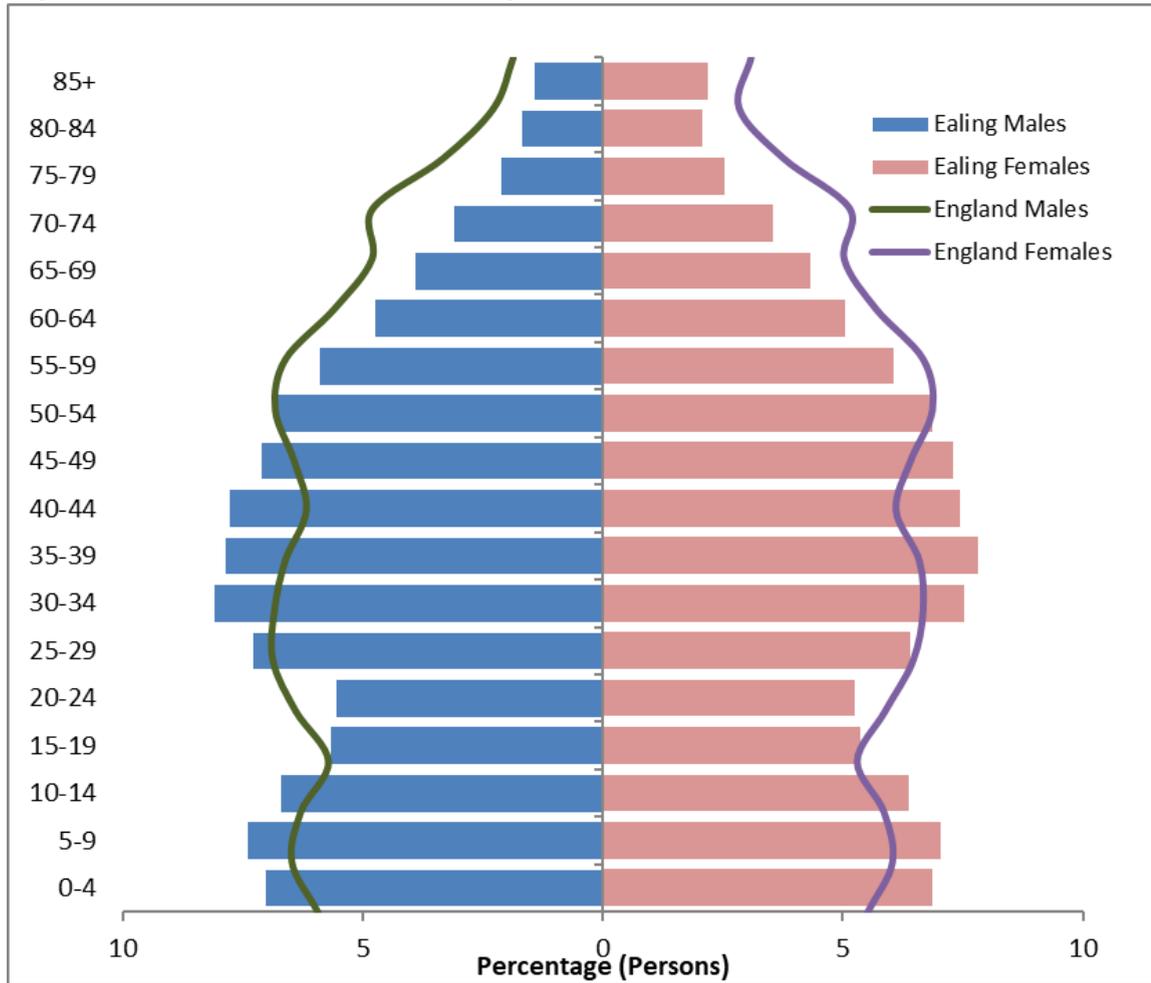
Compared with England, Ealing has a higher proportion of males and females aged 0–14 and 25–49, but a lower proportion of all other ages (Figure 1). Most notably, Ealing has a lower proportion of people aged 55 and above compared with England. The most populous age band in Ealing is 25–44 (Table 2).

Table 3 shows population numbers and proportions for Ealing localities, London Borough (LB) of Ealing and England. Amongst localities in the borough, Northolt has the highest proportion of population aged 0–15 (26%), while Acton has the highest proportion of those aged 16–24 (12%). Ealing and Acton have the highest proportion of population aged 25–64 (both over 57%). Ealing, Greenford and Perivale localities have the highest proportion of people aged 65 and over (all 14% or just over).

<sup>16</sup> Office for National Statistics (ONS). Mid-Year Population Estimates (MYE) 2020.

<sup>17</sup> ONS. MYE 2020. Population estimates and population density in the UK mid-2001 to mid-2020.

Figure 1: Population pyramid, Ealing 2020



Source: Office for National Statistics (ONS). Mid-Year Population Estimates (MYE) 2020

**Table 2: Ealing's population estimates and proportions by sex and five-year-age-bands, 2021**

<b>Age band (years)</b>	<b>Male</b>	<b>Male (%)</b>	<b>Female</b>	<b>Female (%)</b>	<b>Total</b>	<b>Total (%)</b>
<b>Under 1</b>	2,300	1.3	2,200	1.3	4,400	1.3
<b>1–4</b>	9,100	5.4	8,800	5.3	18,000	5.4
<b>5–9</b>	11,700	6.9	10,900	6.6	22,700	6.8
<b>10–14</b>	12,400	7.3	11,500	6.9	23,900	7.1
<b>15–19</b>	10,600	6.3	10,100	6.1	20,600	6.2
<b>20–24</b>	8,500	5.1	7,600	4.6	16,100	4.8
<b>25–29</b>	11,900	7.0	10,400	6.3	22,300	6.7
<b>30–34</b>	12,700	7.5	11,200	6.7	23,900	7.1
<b>35–39</b>	12,900	7.6	12,500	7.5	25,400	7.6
<b>40–44</b>	13,200	7.8	12,700	7.6	25,900	7.7
<b>45–49</b>	12,100	7.2	12,300	7.4	24,400	7.3
<b>50–54</b>	11,700	6.9	11,500	6.9	23,200	6.9
<b>55–59</b>	10,300	6.1	10,500	6.3	20,800	6.2
<b>60–64</b>	8,300	4.9	8,700	5.3	17,000	5.1
<b>65–69</b>	6,800	4.0	7,500	4.5	14,300	4.3
<b>70–74</b>	5,500	3.3	6,000	3.6	11,600	3.5
<b>75–79</b>	3,700	2.2	4,500	2.7	8,100	2.4
<b>80–84</b>	2,800	1.7	3,400	2.0	6,200	1.9
<b>85 and over</b>	2,500	1.5	3,700	2.3	6,200	1.8
<b>Total</b>	169,000	100	165,900	100	334,900	100

Source: Greater London Authority (GLA) 2020-based housing-led round population projections, 2021; % figures are based on the estimated numbers which have not been rounded

Table 3: Ealing's population by locality and age groups, 2020

Locality	Total population	Population aged 0–15	Population aged 0–15 (%)	Population aged 16–24	Population aged 16–24 (%)	Population aged 25–64	Population aged 25–64 (%)	Population aged 65 and over	Population aged 65 and over (%)
<b>Acton</b>	66,600	13,100	19.7	7,700	11.6	38,200	57.4	7,600	11.4
<b>Ealing</b>	69,800	13,500	19.4	6,200	8.9	40,200	57.6	9,900	14.2
<b>Greenford</b>	45,800	10,500	23.0	4,300	9.4	24,500	53.5	6,500	14.2
<b>Hanwell</b>	27,700	6,600	23.8	2,400	8.7	15,000	54.2	3,700	13.4
<b>Northolt</b>	30,200	7,900	26.3	2,900	9.6	15,700	52.0	3,700	12.3
<b>Perivale</b>	15,700	3,300	20.7	1,500	9.6	8,800	56.1	2,200	14.0
<b>Southall</b>	70,600	16,400	23.3	6,900	9.8	37,600	53.3	9,800	13.9
<b>Ealing LB</b>	340,300	74,500	21.9	33,100	9.7	187,100	55.0	45,700	13.4
<b>England</b>	56,550,100	10,852,200	19.2	5,950,600	10.5	29,283,200	51.8	10,464,000	18.5

Source: ONS MYE 2020 (experimental statistics)

### 2.4.3 Predicted population growth

The population of Ealing is projected to rise by 4.8% to around 351,000 by 2031 and by 10.0% to around 368,300 by 2041. These rates are comparable to the overall growth expected across England over the same period (Table 4). However, a decline in numbers of those aged 0–14 is projected for both Ealing and England, whilst the highest expected growth is for people aged 65 years and over.

**Table 4: Ealing’s population projections and magnitude of change compared with England in 2021, 2031 and 2041**

		2021	2031	2031	2031	2041	2041	2041
Area	Age group	Total population	Total population	Change since 2021 (number)	Change since 2021 (%)	Total population	Change since 2021 (number)	Change since 2021 (%)
England	0–14	10,017,500	9,119,900	-897,600	-9.0	9,423,700	-593,800	-5.9
England	15–29	10,302,600	11,101,200	798,600	7.8	10,849,900	547,300	5.3
England	30–44	11,142,500	11,428,900	286,400	2.6	11,670,100	527,600	4.7
England	45–64	14,481,900	14,466,000	-15,900	-0.1	14,840,600	358,700	2.5
England	65+	10,550,000	12,952,100	2,402,100	22.8	14,652,300	4,102,300	38.9
England	All ages	56,494,400	59,068,000	2,573,600	4.6	61,436,600	4,942,200	8.7
Ealing	0–14	68,900	62,100	-6,800	-9.9	65,300	-3,600	-5.2
Ealing	15–29	59,100	69,400	10,300	17.4	68,000	8,900	15.1
Ealing	30–44	75,100	68,200	-6,900	-9.2	73,800	-1,300	-1.7
Ealing	45–64	85,400	90,800	5,400	6.3	87,500	2,100	2.5
Ealing	65+	46,400	60,500	14,100	30.4	73,700	27,300	58.8
Ealing	All ages	334,900	351,000	16,100	4.8	368,300	33,400	10.0

Source: GLA 2020-based housing-led round population projections, 2021

## 2.4.4 Life expectancy at birth

Ealing's life expectancy at birth data is presented by sex and ward and compared with England using red, amber and green ratings (Table 5). Ealing has a significantly higher both male (80.9) and female life expectancy (84.6) compared with the England averages (79.7 and 83.2 respectively). South Acton is the only ward where male life expectancy is significantly lower than the national average (77.4 years). Norwood Green is the only ward with a lower female life expectancy rate (81.5 years) compared with the England average.

**Table 5: Life expectancy in Ealing compared with England average, 2015-19**

Locality	Ward	Male life expectancy (years)	Female life expectancy (years)
Acton	Acton Central	80.9	86.0
Acton	East Acton	81.4	84.9
Acton	South Acton	77.4	83.2
Acton	Southfield	82.2	86.3
Ealing	Cleveland	82.8	87.0
Ealing	Ealing Broadway	81.0	85.2
Ealing	Ealing Common	81.9	84.5
Ealing	Hanger Hill	82.3	85.5
Ealing	Northfield	82.4	87.6
Ealing	Walpole	81.9	84.3
Greenford	Greenford Broadway	79.7	83.9
Greenford	Greenford Green	81.4	84.9
Greenford	North Greenford	82.9	85.8
Hanwell	Elthorne	79.2	82.9
Hanwell	Hobbayne	83.2	85.4
Northolt	Northolt Mandeville	81.8	84.8
Northolt	Northolt West End	81.0	83.4
Perivale	Perivale	81.3	86.9
Southall	Dormers Wells	79.4	85.5
Southall	Lady Margaret	78.8	82.1
Southall	Norwood Green	78.2	81.5
Southall	Southall Broadway	79.1	85.2
Southall	Southall Green	79.9	83.5
Ealing LB		80.9	84.6
England		79.7	83.2

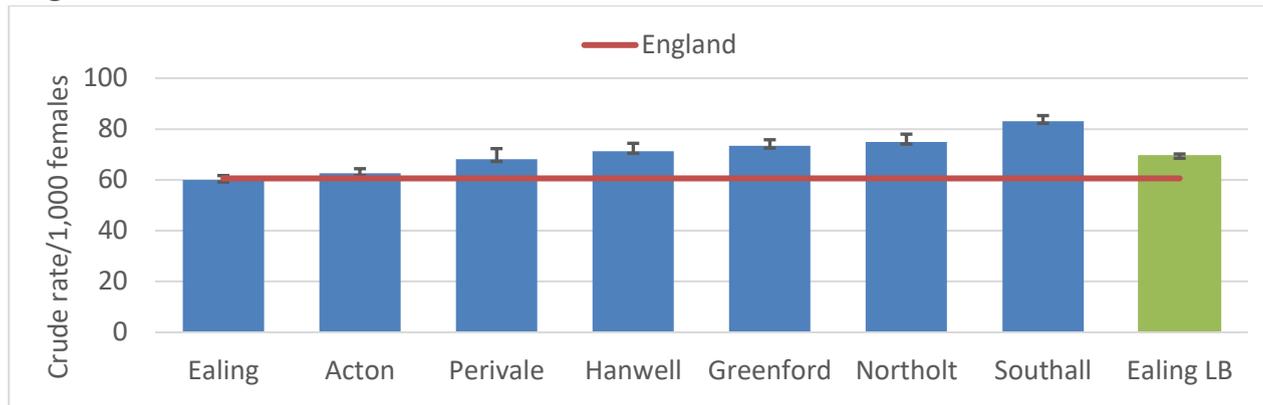
	Statistically significantly higher than England average
	The difference is not statistically significant
	Statistically significantly lower than England average

Source: Public Health England (PHE). Local Health Profile 2021

## 2.4.5 Fertility rate

Ealing's fertility rate (69.4 live births per 1,000 females aged 15–44) is significantly higher than the England average (60.6 per 1,000 females). Compared with England, all localities within LB Ealing have a higher fertility rate except for Ealing and Acton localities, which are statistically similar to England.

**Figure 2: Crude fertility rate per 1,000 females aged 15–44, Ealing localities, Ealing and England, 2015-19**



Source: PHE. Local Health Indicators 2020

## 2.4.6 Diversity

### 2.4.6.1 Ethnicity

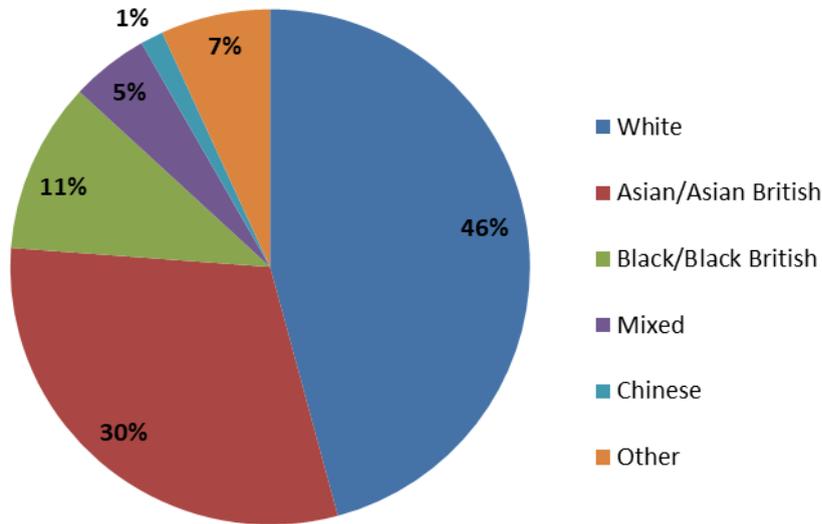
Ealing is an ethnically diverse borough. At the last census around two in every three residents were recorded as being from an ethnic minority group.<sup>18</sup> Ealing has a larger proportion of non-White ethnic population (54%<sup>19</sup>) compared with the London (42%) and England (15%) averages.<sup>20</sup> The largest group among non-White ethnic groups is Asian (30%), followed by Black (11%) (Figure 3).

<sup>18</sup> Ethnic minority population includes Asian/Asian British, Black/Black British, Mixed background, White Irish, White Other, Irish Travellers, Roma/Gypsies, Any Other background, but excludes people who identify as White British: English/Welsh/Scottish/Northern Irish.

<sup>19</sup> GLA. 2016-based Central Trend Ethnic Group Projections. Nov 2017.

<sup>20</sup> National Census Data. 2011.

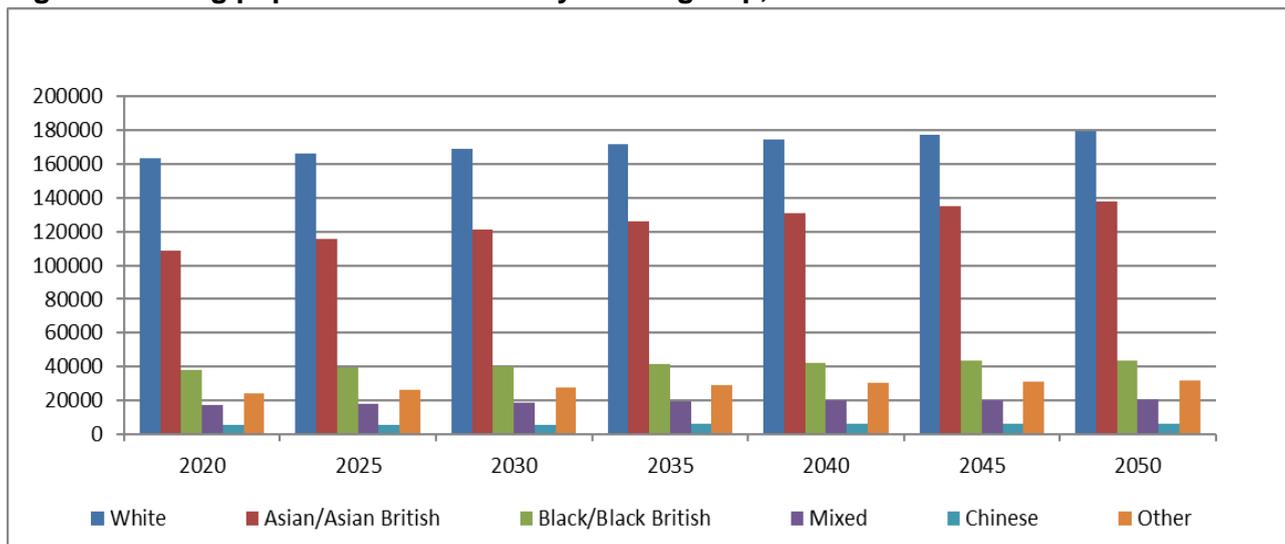
**Figure 3: Ealing population estimates by ethnic group, 2020**



Source: GLA 2016-based Central Trend Ethnic Group Projections, Nov 2017

The White ethnic group population is expected to have a 10% rise in numbers between 2020 and 2050. For all other ethnicities, the projections show a steeper rise in numbers over the 30-year period: Asian/Asian British by 27%, Black/Black British by 15%, residents of mixed ethnic heritage by 17%, Chinese by 27% and population of other ethnic origin by 29% (Figure 4).

**Figure 4: Ealing population estimates by ethnic group, 2020-50**



Source: GLA. 2016-based Central Trend Ethnic Group Projections. Nov 2017

The proportion of residents from ethnic minority groups varies between areas, with the highest levels in the Southall area (Table 6).

**Table 6: Ethnic minority population in Ealing localities and wards, Ealing and England, 2011**

<b>Locality</b>	<b>Ward</b>	<b>Ethnic minority population</b>	<b>Ethnic minority population (%)</b>
<b>Acton</b>	Acton Central	10,055	65.2
<b>Acton</b>	East Acton	13,632	72.9
<b>Acton</b>	South Acton	10,100	67.9
<b>Acton</b>	Southfield	5,867	43.5
<b>Ealing</b>	Cleveland	8,323	57.2
<b>Ealing</b>	Ealing Broadway	7,737	55.2
<b>Ealing</b>	Ealing Common	7,776	55.5
<b>Ealing</b>	Hanger Hill	10,609	68.2
<b>Ealing</b>	Northfield	11,291	76.7
<b>Ealing</b>	Walpole	6,659	50.0
<b>Greenford</b>	Greenford Broadway	13,060	74.1
<b>Greenford</b>	Greenford Green	10,543	73.5
<b>Greenford</b>	North Greenford	6,324	46.8
<b>Hanwell</b>	Elthorne	8,414	57.9
<b>Hanwell</b>	Hobbayne	8,735	61.4
<b>Northolt</b>	Northolt Mandeville	10,191	67.1
<b>Northolt</b>	Northolt West End	10,032	66.3
<b>Perivale</b>	Perivale	12,233	79.8
<b>Southall</b>	Dormers Wells	12,473	89.7
<b>Southall</b>	Lady Margaret	12,620	90.8
<b>Southall</b>	Norwood Green	11,866	84.6
<b>Southall</b>	Southall Broadway	12,967	96.5
<b>Southall</b>	Southall Green	13,907	95.4
<b>Ealing LB</b>		235,414	69.6
<b>England</b>		10,733,220	20.2

Source: ONS Census 2011

### 2.4.6.2 Language

The proportion of people in Ealing who cannot speak English well, or at all, is significantly higher than the England average in all wards. The highest proportions are found in the Southall locality (Table 7).

**Table 7: Proficiency in English (% of people who cannot speak English well or at all), Ealing localities and wards, LB Ealing and England, 2011**

Locality	Ward	Number	%
Acton	Acton Central	1,026	7.0
Acton	East Acton	1,162	6.5
Acton	South Acton	990	7.0
Acton	Southfield	278	2.2
Ealing	Cleveland	640	4.6
Ealing	Ealing Broadway	484	3.6
Ealing	Ealing Common	533	3.9
Ealing	Hanger Hill	1,052	7.1
Ealing	Northfield	353	2.7
Ealing	Walpole	450	3.5
Greenford	Greenford Broadway	1,210	7.3
Greenford	Greenford Green	1,133	8.3
Greenford	North Greenford	1,137	8.1
Hanwell	Elthorne	695	5.0
Hanwell	Hobayne	801	5.9
Northolt	Northolt Mandeville	892	6.2
Northolt	Northolt West End	853	6.0
Perivale	Perivale	1,340	9.2
Southall	Dormers Wells	1,487	11.2
Southall	Lady Margaret	1,297	9.7
Southall	Norwood Green	1,300	9.7
Southall	Southall Broadway	2,027	15.7
Southall	Southall Green	2,113	15.2
<b>Ealing LB</b>		<b>23,253</b>	<b>7.2</b>
<b>England</b>		<b>843,845</b>	<b>1.7</b>

Source: ONS Census 2011

### 2.4.6.3 School children

The majority of children registered in Ealing's state-funded schools and special schools are from ethnic minority groups (Table 8). Amongst ethnic minority groups, the highest proportion of children in local schools are Asian.

**Table 8: Ethnicity of children in schools, Ealing and England, 2021**

Ethnic group	State-funded primary schools (%)		State-funded secondary schools (%)		Special schools (%)	
	England	Ealing	England	Ealing	England	Ealing
<b>All White</b>	<b>72.8</b>	<b>30.0</b>	<b>71.7</b>	<b>27.4</b>	<b>72.6</b>	<b>23.1</b>
White British	64.8	13.7	65.0	14.4	67.7	11.6
Irish	0.2	0.6	0.3	0.7	0.2	1.0
Traveller of Irish heritage	0.1	0.2	0.0	0.1	0.1	0.3
Gypsy/Roma	0.4	0.1	0.2	0.1	0.4	0.2
Any other White background	7.3	15.4	6.2	12.2	4.2	9.9
<b>All Mixed</b>	<b>6.6</b>	<b>9.5</b>	<b>6.0</b>	<b>8.4</b>	<b>6.3</b>	<b>8.6</b>
White And Black Caribbean	1.6	2.0	1.5	2.4	1.9	2.5
White And Black African	0.9	1.1	0.8	0.9	0.9	0.8
White And Asian	1.6	2.7	1.5	2.5	1.1	3.2
Any other mixed background	2.5	3.7	2.2	2.6	2.4	2.1
<b>All Asian</b>	<b>11.3</b>	<b>30.4</b>	<b>11.7</b>	<b>30.0</b>	<b>10.2</b>	<b>28.8</b>
Indian	3.3	16.1	3.3	15.2	1.9	11.7
Pakistani	4.4	6.0	4.5	6.3	4.6	6.8
Bangladeshi	1.7	1.5	1.9	1.8	1.8	1.6
Any other Asian background	1.9	6.8	2.0	6.7	1.9	8.7
<b>All Black</b>	<b>5.4</b>	<b>12.3</b>	<b>6.2</b>	<b>15.9</b>	<b>7.0</b>	<b>21.4</b>
Caribbean	0.9	2.7	1.2	3.4	1.3	4.5
African	3.7	8.6	4.2	11.6	4.6	15.4
Any other Black background	0.8	1.0	0.8	0.9	1.1	1.6
<b>Chinese</b>	<b>0.5</b>	<b>0.5</b>	<b>0.4</b>	<b>0.4</b>	<b>0.3</b>	<b>0.3</b>
Any other ethnic group	2.1	16.0	2.2	15.7	1.8	15.7
<b>Unclassified</b>	<b>1.3</b>	<b>1.3</b>	<b>2.0</b>	<b>2.2</b>	<b>1.8</b>	<b>2.0</b>
<b>Minority ethnic pupils</b>	<b>33.9</b>	<b>85.0</b>	<b>33.0</b>	<b>83.4</b>	<b>30.5</b>	<b>86.7</b>

Source: School Census January 2021 (Schools, Research & Statistics Team) and Schools, Pupils and their Characteristics, Jan 2021 National tables (Department for Education)

#### 2.4.6.4 Children and adults in care

In Ealing, the rate of children in care has been consistently lower than the England average for the last four years. In 2020 there were 330 children from Ealing in care (Table 9). The local authority is responsible for all children who were Ealing residents at the time of going into care, regardless of whether that care is provided in Ealing or elsewhere in the country.

**Table 9: Children aged under 18 in care (rate per 10,000 children), 2016-20**

Area	2016 No	2016 Rate	2017 No	2017 Rate	2018 No	2018 Rate	2019 No	2019 Rate	2020 No	2020 Rate
<b>Ealing</b>	370	46	345	42	345	42	355	43	330	40
<b>London</b>	9,860	50	9,910	50	9,890	49	10,030	50	10,010	49
<b>England</b>	70,440	60	72,670	62	75,420	64	78,150	65	80,080	67

Source: Department for Education. Children Looked After in England, 2021

In Ealing, the rate of adult residents admitted permanently to residential and nursing care homes was significantly lower than both the London and England averages during 2019-20 (Table 10).

**Table 10: Long-term support needs of younger and older adults met by admission to residential and nursing care<sup>21</sup> (rate per 100,000 people), 2019-20**

Age group	London – No	London – Rate	London – No	London – Rate	England – No	England – Rate
18–64	13	6.1	632	10.8	4,952	14.6
65 and over	107	238.6	4,665	431.3	60,461	584.0

Source: ASCOF, Health and Social Care Information Centre, 2021

#### 2.4.6.5 Older people

It is estimated that there are 47,000 older people (aged 65 and over) living in Ealing (Table 3). Ealing has a lower proportion of older people as compared with the England average population (Figure 1). However, the percentage of older people who are income deprived or living alone is higher than the England average in most wards (Table 11).

<sup>21</sup> The transition from ASC-CAR (Adults Social Care – Combined Activity Return) to SALT (Short and Long Term Support) resulted in a change to which admissions were captured by this measure, and a change to the measure definition. Previously, the measure was defined as: ‘Permanent admissions of younger/older adults to residential and nursing care homes, per 100,000 population.’ With the introduction of SALT, the measure was redefined as: ‘Long-term support needs of younger/older adults met by admission to residential and nursing care homes, per 100,000 population.’ Included now are 12-week disregards and full-cost clients, whereas previously they were excluded from the measure. Furthermore, whilst ASC-CAR recorded the number of people who were admitted to residential or nursing care during the year, the relevant SALT tables record the number of people for whom residential/nursing care was planned as a sequel to a request for support, a review, or short-term support to maximise independence.

**Table 11: Percentage of older people living in income-deprived homes/living alone, Ealing localities and wards, Ealing and England**

Locality	Ward	Income deprived older people aged 60+ <sup>24</sup>		People living alone aged 65+ <sup>25</sup>	
		Number	%	Number	%
Acton	Acton Central	524	23.5	558	37.9
	East Acton	636	26.0	520	33.9
	South Acton	756	31.8	639	38.8
	Southfield	324	14.9	542	40.3
Ealing	Cleveland	491	17.5	630	36.2
	Ealing Broadway	392	16.2	561	33.5
	Ealing Common	456	18.8	556	35.1
	Hanger Hill	362	12.5	608	30.6
	Northfield	285	12.8	523	35.1
	Walpole	357	17.2	555	39.5
Greenford	Greenford Broadway	692	24.9	623	32.0
	Greenford Green	486	19.0	478	28.1
	North Greenford	455	17.4	409	24.4
Hanwell	Elthorne	509	23.8	490	34.7
	Hobayne	577	23.5	569	35.5
Northolt	Northolt Mandeville	535	22.2	516	31.9
	Northolt West End	730	32.6	603	40.9
Perivale	Perivale	510	19.0	425	25.3
Southall	Dormers Wells	766	29.7	420	26.0
	Lady Margaret	510	21.1	283	18.6
	Norwood Green	688	28.7	315	21.1
	Southall Broadway	721	31.7	281	20.0
	Southall Green	640	31.5	224	18.7
Ealing LB		12,399	22.3	11,328	31.3
England		1,790,712	14.2	2,725,596	31.5

	Statistically significantly lower than England average
	The difference is not statistically significant
	Statistically significantly higher than England average

Source: PHE, Local Health (Ministry of Housing, Communities and Local Government, IDAOPI Data) 2019 and National Census 2011

#### 2.4.6.6 Less-abled populations

Table 12 gives the projected number and population rate of disabilities among people aged 18–64 and 65+ for Ealing and England in 2020 and 2030.

In 2020, the prevalence rates of all listed disabilities except serious visual impairment and learning disability among those aged 18–64 were lower than the England averages. For Ealing residents aged 65+ with a severe hearing loss, the rate was slightly higher than the national figure. Rates of all disabilities in Ealing and England are predicted to rise by 2030, except for serious visual impairment and learning disability for people aged 18–64, where little change is expected.

**Table 12: Populations with disabilities in Ealing and England (rate per 100,000 people), 2020 and 2030 projections**

Indicator	Ealing (2020) No	Ealing (2020) Rate	Ealing (2030) No	Ealing (2030) Rate	England (2020) No	England (2020) Rate	England (2030) No	England (2030) Rate
People aged 18–64 predicted to have impaired mobility	10,937	5,118	11,031	5,370	1,837,532	5,396	1,898,163	5,490
People aged 18–64 predicted to have a moderate personal care disability	7,960	3,725	7,982	3,886	1,327,157	3,897	1,354,595	3,918
People aged 18–64 predicted to have a serious personal care disability	1,771	829	1,770	862	294,014	863	299,870	867
People aged 18–64 predicted to have a serious visual impairment	139	65	134	65	22,134	65	22,475	65
People aged 18–64 predicted to have some hearing loss	19,312	9,037	20,074	9,773	3,323,280	9,759	3,445,235	9,964
People aged 18–64 predicted to have severe hearing loss	1,205	564	1,203	586	200,583	589	208,526	603
People aged 18–64 predicted to have a learning disability	5,214	2,440	5,022	2,445	830,148	2,438	845,807	2,446
People aged 65 and over predicted to have a moderate or severe visual impairment	3,984	8,661	5,109	8,778	921,060	8,767	1,135,285	8,941
People aged 65 and over predicted to have some hearing loss	27,667	60,146	35,098	60,306	6,392,818	60,852	7,815,848	61,557
People aged 65 and over predicted to have severe hearing loss	3,642	7,917	4,633	7,960	829,978	7,900	1,068,291	8,414
People aged 65 and over predicted to have a learning disability	955	2,076	1,217	2,091	219,439	2,089	265,065	2,088

Source: PANSI<sup>22</sup> and POPPI,<sup>23</sup> with ONS 2018-based Population Projections, 2020

<sup>22</sup> Projecting Adult Needs and Service Information (PANSI). [www.pansi.org.uk/](http://www.pansi.org.uk/)

<sup>23</sup> Projecting Older People Population Information (POPPI). [www.poppi.org.uk/](http://www.poppi.org.uk/)

### 2.4.6.7 Homeless population

In Ealing, the rate of homeless households living in temporary accommodation is significantly higher than in London and five times the England average (Table 13).

**Table 13: Households in temporary accommodation in Ealing, London and England (rate per 1,000), Q1 2021-22**

Area	Number	Rate
Ealing	2,463	20.0
London	60,830	17.1
England	96,600	4.1

Source: LG Inform, 2021

### 2.4.6.8 Asylum seekers and refugees

Of all UK applications for asylum in 2019 (35,737), 54% were granted asylum at the initial decision and recognised as refugees (compared with 27% in 2010).<sup>24</sup> The region of the UK that hosts the largest number of asylum seekers in dispersed accommodation is North West England. London generally has the highest numbers of asylum seekers receiving subsistence only and living in private accommodation.

At the end of March 2021, about 49.3% of England's asylum seekers receiving subsistence only were residing in London (2,035 people out of 6,903 supported in London under section 95<sup>25</sup>). In March 2021, Ealing was among London boroughs with the highest asylum-seeking population; 468 asylum seekers were receiving support under section 95.<sup>26</sup>

### 2.4.6.9 Traveller population

Traveller groups have frequented Ealing for many years. The government's 'caravan counts' consistently record Ealing as having one of the largest Traveller populations in the Greater London area. According to the latest count of Traveller caravans in January 2020, there were 47 socially rented caravans at authorised sites.<sup>27</sup> These figures do not include the large and unrecognised 'hidden' Traveller communities who, due to a deficit in caravan site provision and rapid evictions from roadside encampments, live in other forms of accommodation.<sup>28</sup>

The total Traveller population in Ealing is estimated to be in excess of 2,000 individuals at certain times of the year. Currently, the variety of Traveller groups resorting to, or residing in the borough, are largely from the following traditional communities:

<sup>24</sup> Home Office. Immigration Statistics (Asylum and Resettlement – Outcome analysis of asylum applications). 2021.

<sup>25</sup> Immigration and Asylum Act 1999, s 95: 'Asylum seekers are entitled to section 95 support if they meet the destitution test. A person is 'destitute' if they do not have adequate accommodation or enough money to meet living expenses for themselves and any dependants now or within the next 14 days.'

<sup>26</sup> Home Office. Immigration Statistics 2021: Asylum Data Tables, Volume 4. 2021.

<sup>27</sup> Department for Levelling Up, Housing and Communities. Traveller Caravan Count. 15 December 2021. [www.gov.uk/government/collections/traveller-caravan-count](http://www.gov.uk/government/collections/traveller-caravan-count)

<sup>28</sup> Ealing Council. Travellers in Ealing. [www.egfl.org.uk/school-effectiveness/teaching-and-learning/equality-and-achievement/gypsy-roma-and-traveller-0](http://www.egfl.org.uk/school-effectiveness/teaching-and-learning/equality-and-achievement/gypsy-roma-and-traveller-0)

#### **2.4.6.9.1 Travellers of Irish heritage**

Traveller Irish communities are the largest group in the Ealing locality. Parish registers show that they have had associations with the area for at least two centuries.

#### **2.4.6.9.2 East European Roma**

Roma families constitute now the second largest travelling group in the borough.

Roma families have a very strong allegiance to their traditions, which can be traced back to northern India and ancient Persia (modern Iran and Iraq). Their first language is Roma, and their second language is generally that of their point of departure, e.g. Polish, Czech, Slovak, Albanian, Romanian or any of the languages of the former Yugoslavia.

#### **2.4.6.9.3 English, European and international circus and fairground travellers**

Occupational Travellers (English, European and international circus and fairground people) arrive at pre-booked sites at specific times of the year, generally around holiday times, and provide entertainment for the duration of their stay. Ealing Common, Walpole Park, Acton Park and Southall Park are the most frequently used locations in Ealing.

Circus families, although sharing a common culture, can be from a range of backgrounds. Ealing Gypsy, Roma and Traveller Achievement Service has had experience of working with circus families from Australia, France, Germany, Spain, New Zealand, the USA, England and Italy, as well as English families engaged in circus work for the first time.

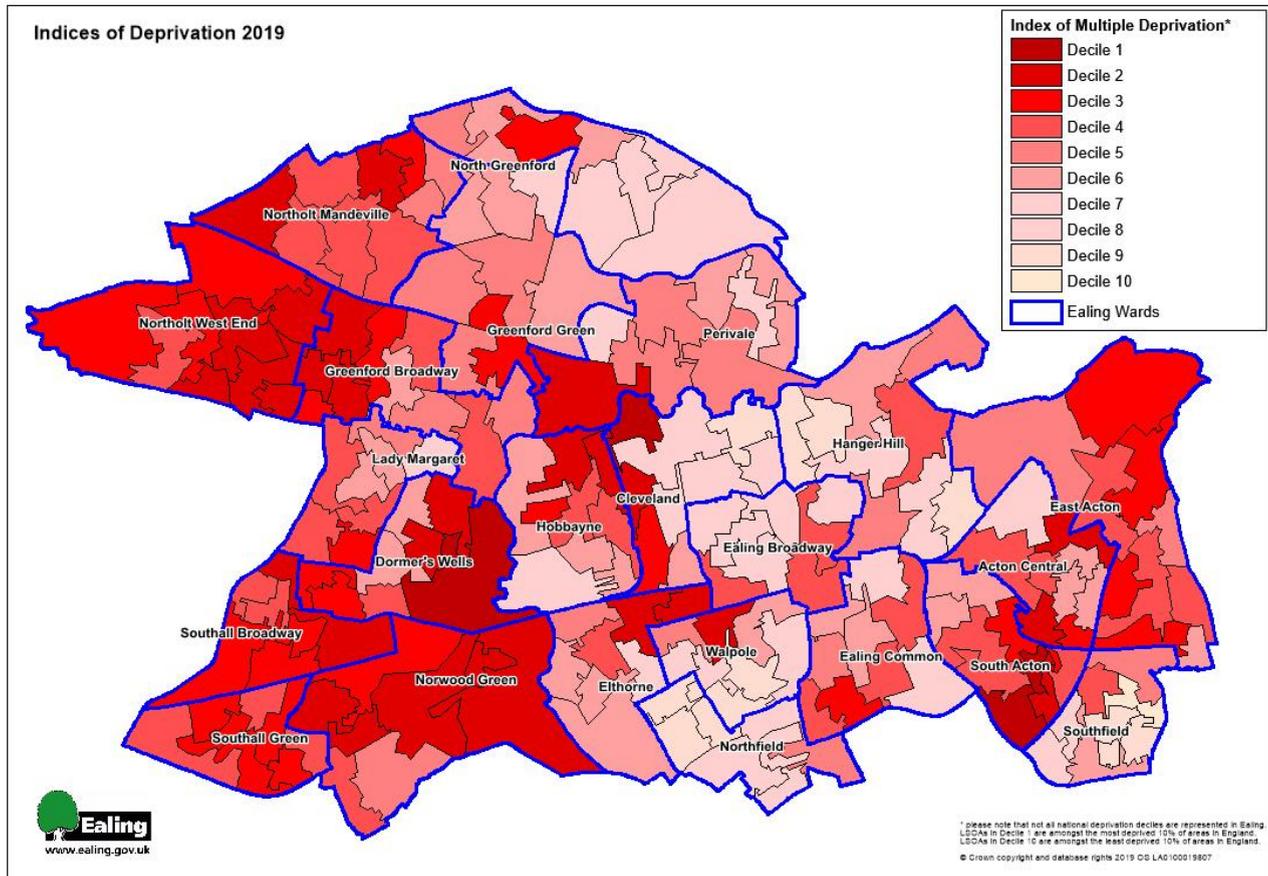
#### **2.4.7 Deprivation**

Figure 5 shows Ealing wards and levels of deprivation based on the Index of Multiple Deprivation (IMD) 2019 Lower Layer Super Output Area (LSOA) ranking.<sup>29</sup> At 22.7, Ealing's overall IMD score shows a slightly higher level of deprivation compared with London and England scores (21.8 and 21.7 respectively). The darker shades indicate areas of higher deprivation. Broadly speaking, the most deprived areas within the borough are found in the extremes of West and East, such as areas in and around Southall, Northolt and Acton.

---

<sup>29</sup> Ministry of Housing Communities and Local Government. English Indices of Deprivation 2019: mapping resources. 2019 [www.gov.uk/guidance/english-indices-of-deprivation-2019-mapping-resources](http://www.gov.uk/guidance/english-indices-of-deprivation-2019-mapping-resources)

Figure 5: Ealing deprivation levels by LSOA based on IMD 2019 ranking



Source: Ministry of Housing, Communities and Local Government, 2019

Community pharmacy providers in Ealing and surrounding areas in relation to IMD per Output Area 2019 can be found in Figure 5.

## 2.5 Other considerations

### 2.5.1 Burden of disease

Table 14 shows GP recorded prevalence rates for leading causes of long-term ill health in Ealing as compared with England rates.

**Table 14: GP-recorded disease prevalence, Ealing and England, 2020-21**

Disease	Ealing prevalence (%)	England prevalence (%)
Stroke or Transient Ischaemic Attacks (TIA) (all ages)	1.1	1.8
Coronary Heart Disease (CHD) (all ages)	2.5	3.0
Hypertension (all ages)	12.5	13.9
Chronic kidney disease (18+)	2.3	4.0
Asthma (all ages) – NWL CCG	4.7	6.5
Chronic Obstructive Pulmonary Disease (COPD) (all ages) – NWL CCG	0.9	1.9
Cancer (all ages)	1.9	3.2
Diabetes mellitus (diabetes) (17+)	9.0	7.1
Musculoskeletal condition (long term) (16+)	12.2	18.6
Mental health	1.1	0.9
Dementia (all ages)	0.5	0.7
Depression (18+)	6.3	12.3

Source: PHE. National GP Profiles 2021, NHS Health Check Profile 2021, Cancer Services 2021, Dementia Profile 2021 & PHE Modelled Prevalence Estimates, 2017

## 2.5.2 Hospital admissions

Table 15 shows all causes, CHD, stroke, myocardial infarction (heart attack) and COPD Standardised Admissions Ratios (SAR) for Ealing and wards. Overall, Ealing had significantly more admissions than expected for all causes, CHD and stroke. Southall also had significantly higher admissions ratio for myocardial infarction and four wards also had higher than expected figures of COPD admissions.

**Table 15: All causes, CHD, stroke, myocardial infarction and COPD emergency SARs, Ealing localities, wards, Ealing overall and England, 2015-16 to 2019-20**

Locality	Ward	All causes	CHD	Stroke	Myocardial infarction	COPD
Acton	Acton Central	93.8	89.1	89.2	76.3	146.5
Acton	East Acton	88.7	87.1	109.0	72.4	96.5
Acton	South Acton	106.0	102.2	123.6	98.9	116.7
Acton	Southfield	74.2	49.6	74.2	60.0	49.9
Ealing	Cleveland	104.0	73.1	107.2	54.2	59.8
Ealing	Ealing Broadway	89.7	83.0	95.6	65.0	42.8
Ealing	Ealing Common	96.1	97.9	93.7	81.4	52.1
Ealing	Hanger Hill	75.6	89.4	82.5	61.5	42.6
Ealing	Northfield	87.8	92.5	77.4	50.9	97.1
Ealing	Walpole	93.7	68.8	100.0	61.2	76.2
Greenford	Greenford Broadway	120.1	135.3	118.2	91.5	126.2
Greenford	Greenford Green	101.4	109.3	108.8	68.5	79.7

Locality	Ward	All causes	CHD	Stroke	Myocardial infarction	COPD
Greenford	North Greenford	93.6	122.1	116.7	78.8	48.5
Hanwell	Elthorne	111.9	111.9	106.8	90.5	105.3
Hanwell	Hobbayne	116.2	98.5	122.6	74.1	98.7
Northolt	Northolt Mandeville	110.7	124.7	118.8	84.2	142.4
Northolt	Northolt West End	124.1	158.2	124.1	117.0	169.8
Perivale	Perivale	99.0	139.9	78.0	94.9	44.2
Southall	Dormers Wells	134.6	168.5	155.1	127.9	105.6
Southall	Lady Margaret	138.6	217.5	136.3	152.4	76.7
Southall	Norwood Green	152.8	170.4	138.8	131.1	91.1
Southall	Southall Broadway	149.2	236.5	162.0	151.4	95.7
Southall	Southall Green	141.6	236.9	169.5	162.6	119.0
Ealing LB		108.5	123.9	113.7	92.2	87.9
England		100	100	100	100	100

Source: PHE, Local Health Profile, 2021

	Statistically significantly lower than England average
	The difference is not statistically significant
	Statistically significantly higher than England average

### 2.5.3 Causes of death

Table 16 shows Ealing localities and wards that had significantly more deaths than expected for all causes, all cancers, circulatory and respiratory diseases, for all ages and under-75s (premature deaths). Overall, when compared with England and regardless of age, Ealing had significantly lower ratios of mortality from all causes, all cancers and all respiratory diseases, whilst the Standardised Mortality Ratios (SMRs) for all circulatory diseases were similar.

**Table 16: All causes, all cancers, circulatory and respiratory diseases SMRs, Ealing wards, Ealing and England, 2015-19**

Locality	Ward	All causes (All ages)	All causes (Under 75s)	All cancers (All ages)	All cancers (Under 75s)	All circulatory diseases (All ages)	All circulatory diseases (Under 75s)	All respiratory diseases (All ages)
Acton	Acton Central	82.4	90.6	73.3	70.3	86.0	97.1	96.6
Acton	East Acton	85.3	98.7	102.0	115.2	96.4	108.7	77.1
Acton	South Acton	107.7	122.7	106.9	126.3	103.4	124.6	73.5
Acton	Southfield	76.8	67.7	84.1	88.9	75.4	52.3	79.5
Ealing	Cleveland	70.7	78.2	83.1	88.7	72.8	72.7	61.6
Ealing	Ealing Broadway	84.3	92.5	73.6	80.9	89.8	110.5	84.1
Ealing	Ealing Common	84.3	95.8	79.8	94.7	95.7	79.7	86.7
Ealing	Hanger Hill	81.9	73.2	79.6	78.1	84.2	70.4	63.8
Ealing	Northfield	72.8	76.1	73.0	61.7	88.9	109.9	63.1
Ealing	Walpole	86.1	84.1	98.8	104.9	99.9	52.6	68.5

Locality	Ward	All causes (All ages)	All causes (Under 75s)	All cancers (All ages)	All cancers (Under 75s)	All circulatory diseases (All ages)	All circulatory diseases (Under 75s)	All respiratory diseases (All ages)
Greenford	Greenford Broadway	96.3	92.5	77.2	87.1	98.4	112.3	110.5
Greenford	Greenford Green	86.9	79.8	80.1	77.4	99.1	91.0	101.7
Greenford	North Greenford	76.0	80.3	81.2	71.2	79.8	73.3	66.3

Source: PHE, Local Health Profile, 2021

	Statistically significantly lower than England average
	The difference is not statistically significant
	Statistically significantly higher than England average

### 2.5.4 Palliative care

Ealing had a significantly higher percentage of deaths in hospital (52.3%) than the England average (45.3%) during 2020.

**Table 17: Place of death, Ealing and England, 2020**

Place of death	Number of deaths in Ealing	% deaths Ealing	% deaths England	Ealing compared with England
<b>Hospital</b>	1,583	52.3	45.3	Significantly higher
<b>Own home</b>	707	23.3	24.5	Similar
<b>Hospice</b>	169	5.6	4.1	Significantly higher
<b>Care home</b>	523	17.3	24.0	Significantly lower

Source: ONS. Deaths by place of occurrence, 2021

### 2.5.5 Lifestyle-related morbidity

Table 18 shows prevalence rates of childhood, adult obesity and injuries among under-15s in Ealing wards. Overall Ealing had a significantly higher obesity prevalence rate than the England average among children in Reception and Year 6.

Southall area has the highest ratio of obese children in both Reception and Year 6, closely followed by Greenford and Northolt.

When it comes to Ealing's adult population, according to the latest obesity model (2006-08), Northolt has the highest ratio of obese adults, followed by Greenford and Southall. The latest figures for overweight and obese population are shown in Table 18.

Table 18: Prevalence of lifestyle related morbidities, Ealing wards, Ealing and England

Locality	Ward	Obese children in Reception (%) 2017/18-2019/20	Obese children in Year 6 (%) 2017/18-2019/20	Emergency admissions for injury in under-15s (crude rate per 10,000) 2015/16-2019/20	% of adult population with obesity 2006-08 model
Acton	Acton Central	6.7	27.2	60.8	15.5
Acton	East Acton	10.7	21.7	53.7	19.0
Acton	South Acton	11.0	24.4	57.5	16.6
Acton	Southfield	6.1	15.2	82.2	13.4
Ealing	Cleveland	8.9	19.0	67.9	16.0
Ealing	Ealing Broadway	3.4	18.0	76.4	11.6
Ealing	Ealing Common	8.8	23.6	70.8	12.9
Ealing	Hanger Hill	7.6	20.3	56.8	12.7
Ealing	Northfield	6.2	9.9	75.2	13.1
Ealing	Walpole	7.5	9.4	67.5	14.0
Greenford	Greenford Broadway	10.9	27.6	65.8	22.6
Greenford	Greenford Green	10.7	28.7	49.6	21.5
Greenford	North Greenford	9.7	23.6	69.3	21.4
Hanwell	Elthorne	9.1	19.5	79.5	15.5
Hanwell	Hobbayne	9.6	23.0	80.4	18.0
Northolt	Northolt Mandeville	10.4	23.6	74.0	24.6
Northolt	Northolt West End	15.4	28.5	70.5	26.4
Perivale	Perivale	10.2	24.1	63.8	18.7
Southall	Dormers Wells	12.8	27.5	80.2	19.6
Southall	Lady Margaret	12.4	27.0	71.9	20.4
Southall	Norwood Green	12.5	23.6	62.5	21.3
Southall	Southall Broadway	15.2	31.9	63.2	19.5
Southall	Southall Green	11.1	28.9	67.5	21.2
Ealing LB		10.3	23.9	67.9	18.1
England		9.7	20.4	97.8	24.2

Source: PHE Obesity Profile, National Child Measurement Programme data 2020, PHE Local Health 2021 & APHO Health Profiles, 2010

	Statistically significantly lower than England average
	The difference is not statistically significant
	Statistically significantly higher than England average

### **2.5.6 Other lifestyle indicators**

Ealing has significantly higher rates than the England average for drug misuse across the population and injuries due to falls among people aged 65 and over. Flu vaccine uptake rate among persons aged 65 years and below is significantly lower than the England average.

Sexual health and dental outcomes are significantly worse than the England average. However, for each of these three indicators, Ealing rates are not significantly different from London rates.

Table 19: Other lifestyle indicators, LB Ealing, London and England

Indicator	Ealing	London	England	Year
Baby's first feed breastmilk (%)	75.5	76.3	67.4	2018-19
Smoking prevalence <sup>32</sup> (18+) (%)	8.4	11.1	12.1	2020
Smoking at time of delivery (%)	2.7	4.6	9.6	2020-21
Overweight and obese adults (18+) (%)	60.7	55.7	62.8	2019-20
Physically active adults (19+) (%)	59.8	65.2	66.4	2019-20
Meeting the recommended '5-a-day' diet (16+) (%)	52.4	55.8	55.4	2019-20
Drug Misuse – opiate and/or crack cocaine est prevalence (15–64-year-olds) (crude rate/1,000)	10.4	9.3	8.9	2016-17
Admissions due to substance misuse (15–24-year-olds) (DSR*/100,000)	51.4	55.6	84.7	2017-18 2019-20
Alcohol-related admissions (DSR/100,000)	576	416	519	2019-20
Injuries due to falls in people aged 65 and over (DSR/100,000)	2,444	2,215	2,222	2019-20
Flu vaccine uptake (people aged 65+) (%)	71.4	71.8	80.9	2020-21
Under-18 conceptions (crude rate/1,000)	9.0	13.5	15.7	2019
Chlamydia diagnoses (15–24-year-olds) (rate per 100,000**)	1,352	1,819	1,408	2020
HIV diagnosis at late stage of infection (15+-year-olds newly diagnosed) (%)***	43.0	38.4	42.4	2018-20
All new sexually transmitted infections (rate per 100,000)	963	1,167	562	2020
MMR for two doses (5 years old) (%)****	74.9	75.1	86.6	2020-21
Children aged 5 with one or more decayed, missing or filled teeth (%)	29.4	27.0	23.4	2018-19
Children and young people aged 0–19 admitted to hospital for tooth extraction (%)	0.7	0.5	0.4	2019-20

Source: PHE, Quality Outcomes Framework; Mental Health Dementia and Neurology Profile, Co-occurring substance misuse and mental health issues (for Drug Misuse indicator)

\* DSR: Directly Standardised Ratio

\*\* Higher diagnoses are indicative of good performance. The national target was at least 2,300 diagnoses.

\*\*\* Benchmarked against goal of 25%. 50% and above rate is an issue of concern.

\*\*\*\* Higher proportion is indicative of good performance. The national target was at least 95%.

	Statistically significantly better than England average
	The difference is not statistically significant
	Statistically significantly worse than England average

### 2.5.7 COVID-19 pandemic

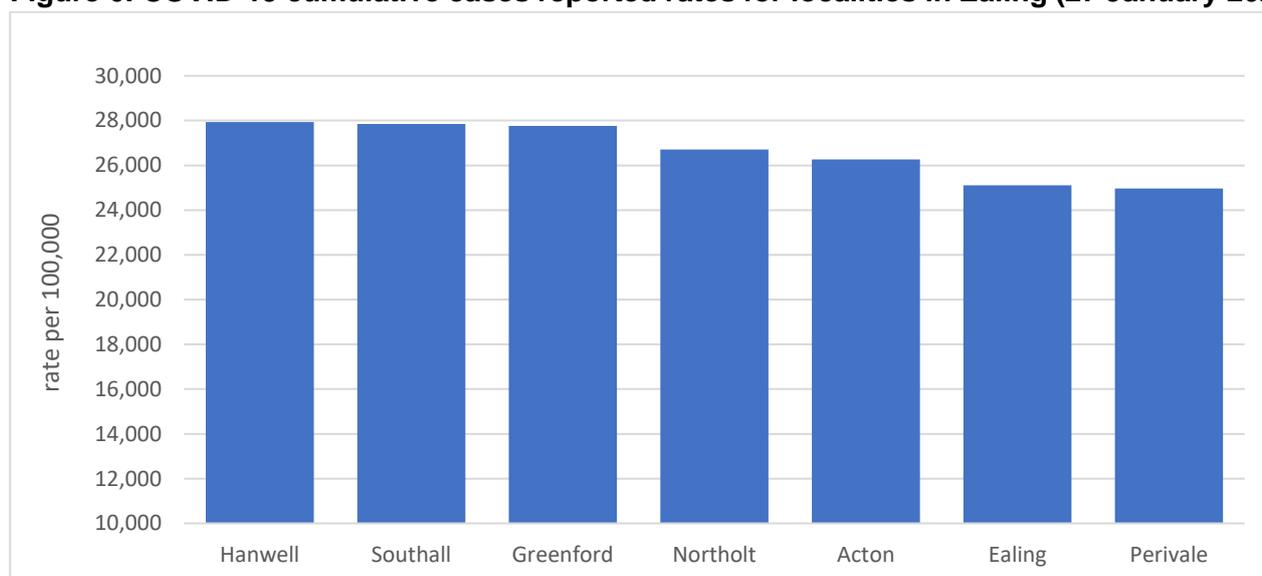
As of late January 2022, Ealing's cumulative rates for both COVID-19 infections and mortality since the start of the COVID-19 pandemic are statistically significantly higher than for London and England (Table 20).

**Table 20: COVID-19 cumulative reported rates for Ealing, London and England (27 January 2022)**

	<b>Ealing</b>	<b>London</b>	<b>England</b>
<b>Cumulative cases rate per 100,000</b>	26,664.5	24,317.9	24,042.3
<b>Cumulative mortality rate per 100,000</b>	289.4	244.0	269.8

Source: PHE. <https://coronavirus.data.gov.uk>; ONS Mortality Data<sup>30</sup>

So far in the pandemic, Hanwell, Southall and Greenford localities have seen the highest rates of cases in the borough, whilst Perivale and Ealing localities registered the lowest rates (Figure 6).

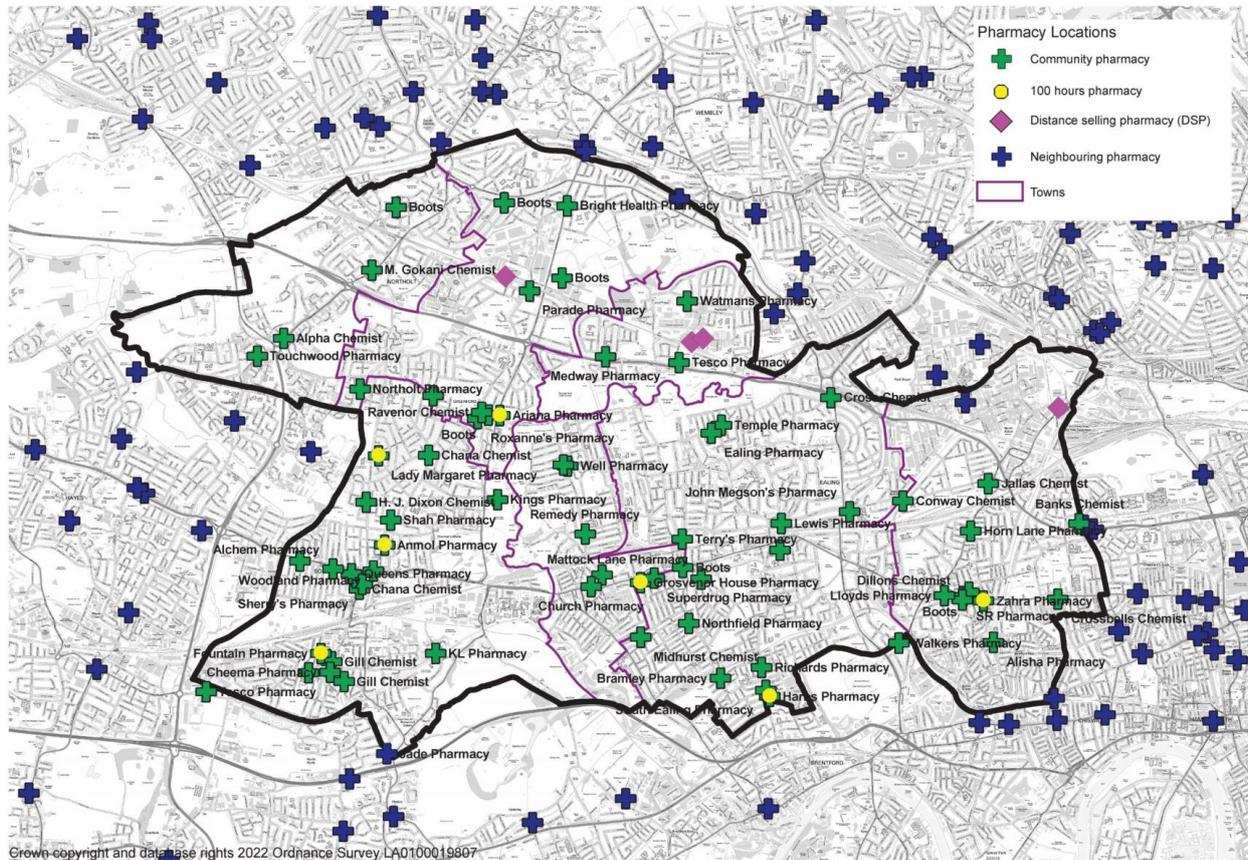
**Figure 6: COVID-19 cumulative cases reported rates for localities in Ealing (27 January 2022)**

Source: PHE. <https://coronavirus.data.gov.uk>

<sup>30</sup> ONS. Death registrations and occurrences by local authority and health board. August 2022. [www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/causesofdeath/datasets/deathregistrationsandoccurrencesbylocalauthorityandhealthboard](https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/causesofdeath/datasets/deathregistrationsandoccurrencesbylocalauthorityandhealthboard) The mortality data for COVID-19 related deaths is not available by smaller geographic area. The latest ONS publication for COVID-19 related deaths by MSOA covered the period from 1 March to 31 July 2020 and was published in August 2020.

## Section 3: NHS pharmaceutical services provision, currently commissioned

Figure 7: All contractors in Ealing<sup>31</sup>



(A full suite of full-size maps are also included as part of the appendices)

There are a total of 75 contractors in Ealing.

- 64 x 40-hour community pharmacies
- 7 x 100-hour community pharmacies
- 4 x DSP

Where discussed, the total number of community pharmacies includes DSPs.

<sup>31</sup> Some Ealing pharmacies are illustrated outside the Ealing boundary on the map, and some neighbouring pharmacies are inside the Ealing boundary. Please note this is due to the positioning of the pharmacy locations on the software, and the marked Ealing pharmacies are within the Ealing footprint.

### 3.1 Community pharmacies

<p>71 community pharmacies and 4 DSPs in Ealing</p> 	<p>340,300 population of Ealing</p> 	<p>20.9 community pharmacies per 100,000 population* (22.0 including DSPs)</p> 
---	---	--

\*Correct as of February 2022

During the COVID-19 pandemic there was a net loss of 215 pharmacies in England, with 236 opening while 451 closed during 2020-21, which resulted in the lowest number of pharmacies in England since 2015-16.<sup>32</sup>

Since the previous PNA was published in 2018, there has been no change in the number of pharmacies in Ealing. The England average is 20.6 community pharmacies per 100,000 population, which has decreased slightly from 2018 when the average number was 21.2. The London average has also decreased to 20.7 from the previous 21.2 community pharmacies per 100,000 population. London has a transient population with generally good transport links. Populations may therefore find community pharmacies in neighbouring HWB areas more accessible and/or more convenient.

There is a variable rate of community pharmacies per 100,000 population in neighbouring HWB areas to Ealing: Hillingdon (20.7), Harrow (24.6), Brent (24.4), Hammersmith and Fulham (22.3) and Hounslow (19.4).

Table 21 shows the change in the numbers of community pharmacies over recent years compared with regional and national averages. Ealing is well served with community pharmacies and is slightly higher than the London and national averages.

**Table 21: Number of pharmacies (including DSPs) per 100,000 population**

	England	London	Ealing
2020-21	20.6	20.7	22.0
2019-20	21.0	21.2	22.3
2018-19	21.2	20.7	22.1

Source: ONS Mid-Year Population<sup>33</sup>

Table 22 provides a breakdown, by locality, of the average number of community pharmacies per 100,000 population. The number and rate of community pharmacies vary widely by locality.

<sup>32</sup> Wickware C. Lowest number of community pharmacies in six years, official figures show. Pharmaceutical J. 28 October 2021. <https://pharmaceutical-journal.com/article/news/lowest-number-of-community-pharmacies-in-six-years-official-figures-show>

<sup>33</sup> ONS. Estimates of the population for the UK, England and Wales, Scotland and Northern Ireland. [www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationestimatesforukenglandandwalesscotlandandnorthernireland](http://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populationestimatesforukenglandandwalesscotlandandnorthernireland)

**Table 22: Breakdown of average community pharmacies per 100,000 population**

Locality	Number of community pharmacies (Feb 2022)	Number of DSPs	Total population (ONS mid-year 2020)	Average number of community pharmacies per 100,000 population (with DSPs)
Acton	11	1	66,600	16.6 (18.0)
Ealing	17	0	69,800	24.4
Greenford	10	1	45,800	21.8 (24.0)
Hanwell	7	0	27,700	25.3
Northolt	4	0	30,200	13.2
Perivale	3	2	15,700	19.1 (31.8)
Southall	19	0	70,600	26.9
Ealing HWB area	72	4	340,300	21.2 (22.3)
London	1,873		8,965,488	20.7
England	11,636		56,760,975	20.6

The public questionnaire details the perception of access to community pharmacies and the services they provide ([Section 5](#)).

The full results of the pharmacy user questionnaire are detailed in [Section 5](#).

[Section 6.2](#) lists the Essential Services of the pharmacy contract. It is assumed that provision of all these services is available from all contractors. Further analysis of the pharmaceutical service provision and health needs for each locality is explored in [Section 6](#).

### 3.1.1 Choice of community pharmacies

Table 23 shows the breakdown of community pharmacy ownership in Ealing. The data shows that pharmacy ownership is at similar levels to those seen in the rest of London, and Ealing has a much higher percentage of independent pharmacies compared with nationally, with no one provider having a monopoly in any locality. People in Ealing therefore have a good choice of pharmacy providers.

**Table 23: Community pharmacy ownership, 2020-21**

Area	Multiples (%)	Independent (%)
England	60%	40%
London	39%	61%
Ealing	20%	80%

### 3.1.2 Weekend and evening provision

There are 1,094 (9.4%) community pharmacies in England open for 100 hours or more per week. This has decreased slightly since 2017, where there were 1,161 100-hour pharmacies.

Table 24 shows that the Ealing has a similar percentage of its pharmacies open for 100 hours or more when compared with nationally. Most 100-hour pharmacies are open late on weekdays.

**Table 24: Number of 100-hour pharmacies (and percentage of total)**

Area	Number (%) of 100-hour pharmacies
England (2021)	1,094 (9.4%)
London	104 (5.5%)
Ealing (2021)	7 (9.3%)

### 3.1.3 Access to community pharmacies

Community pharmacies in Ealing are particularly located around areas with a higher density of population (see [Map 1](#)). Many also provide extended opening hours and/or open at weekends.

A previously published article<sup>34</sup> suggests:

- 89% of the population in England has access to a community pharmacy within a 20-minute walk
- This falls to 14% in rural areas
- Over 99% of those in areas of highest deprivation are within a 20-minute walk of a community pharmacy

The same study found that access is greater in areas of high deprivation. Higher levels of deprivation are linked with increased premature mortality rates.

The information below shows the calculated travel times to community pharmacies via a variety of methods of travel. A list of community pharmacies in Ealing and their opening hours can be found in Appendix A.

#### 3.1.3.1 Routine daytime access to community pharmacies

The following maps show travel times to community pharmacies using a variety of options.

In summary:

- Driving: 95% of the population can drive to a pharmacy within 2 minutes (100% within 3 minutes)
- Walking: 89% of the population can walk to a pharmacy within 10 minutes (99.9% within 20 minutes)

<sup>34</sup> Todd A, Copeland A, Husband A. The positive pharmacy care law: an area-level analysis of the relationship between community pharmacy distribution, urbanity and social deprivation in England. *BMJ Open* 2014, Vol. 4, Issue 8. <http://bmjopen.bmj.com/content/4/8/e005764.full.pdf%20html>

Figure 8: Peak driving times to nearest pharmacy

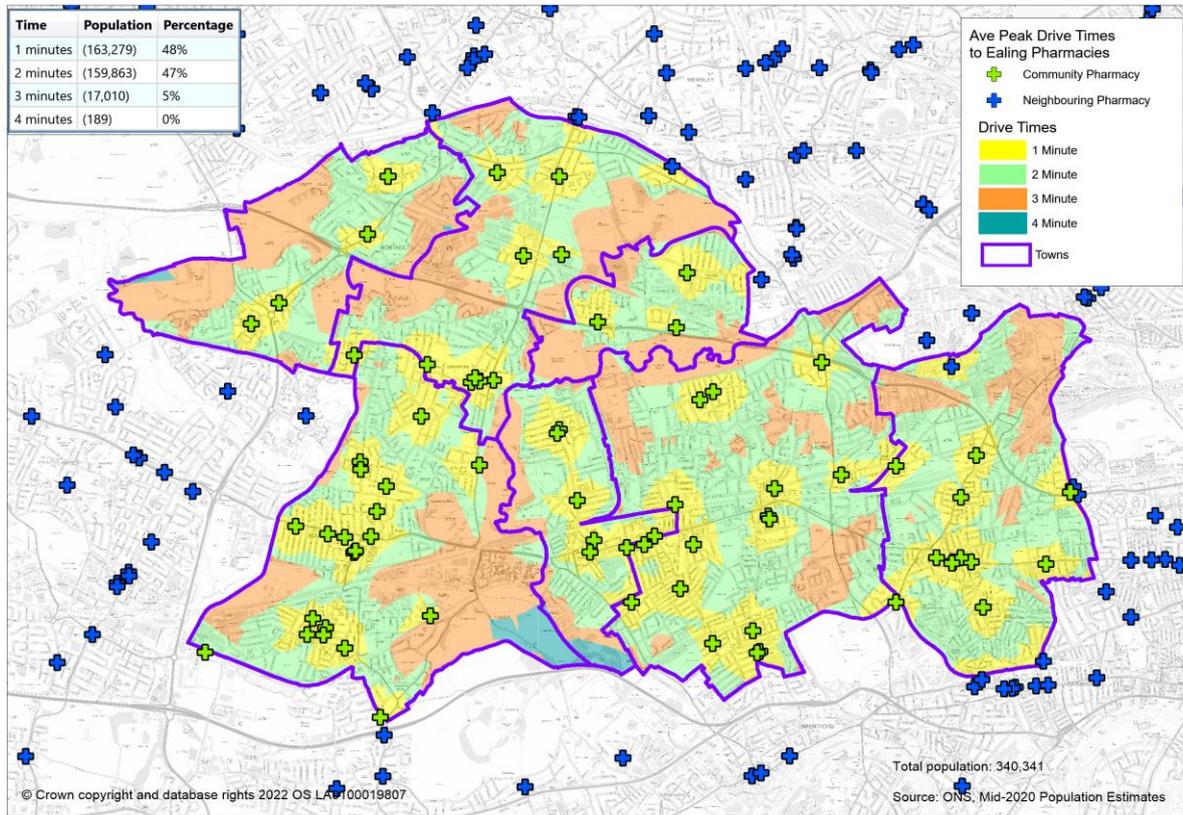
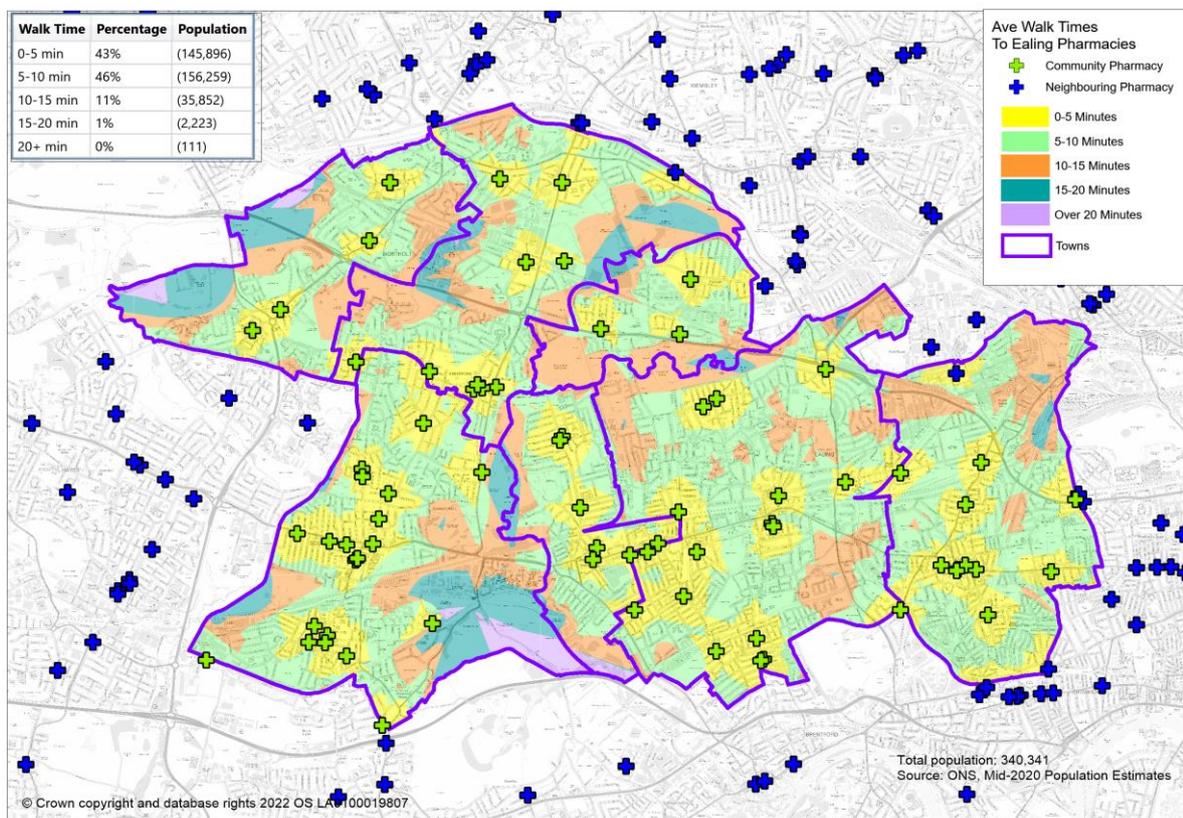


Figure 9: Walking times to nearest pharmacy



### 3.1.3.2 Routine weekday evening access to community pharmacies

The number, location and opening hours of community pharmacy providers open beyond 6 pm, Monday to Friday (excluding bank holidays) vary within each locality; they are listed in Table 25.

Full details of all pharmacy opening hours can be found in Appendix A. 'Average' access is difficult given the variety of opening hours and locations. Access is therefore considered at locality level and can be found in Table 25. The population of Ealing has good access to community pharmacies in the evening as the majority of providers in Ealing are open after 6 pm.

**Table 25: Percentage of community pharmacy providers open Monday to Friday (excluding bank holidays) beyond 6 pm, on Saturday and Sunday**

Locality	Percentage of pharmacies open beyond 6 pm	Percentage of pharmacies open on a Saturday	Percentage of pharmacies open on a Sunday
Acton	67%	92%	8%
Ealing	76%	100%	18%
Greenford	45%	73%	27%
Hanwell	28%	86%	14%
Northolt*	50%	100%	0%
Perivale	60%	60%	20%
Southall	100%	79%	32%
<b>Ealing HWB area (2021)</b>	<b>72%</b>	<b>90%</b>	<b>21%</b>

\* There are 100-hour pharmacies within neighbouring localities and neighbouring boroughs for Northolt residents to access

### 3.1.3.3 Routine Saturday daytime access to community pharmacies

The number, location and opening hours of community pharmacy providers open on Saturdays vary within each locality. Of the pharmacies in Ealing HWB area, 90% are open on Saturdays, several of which are open into the late afternoon. Access is therefore good. Full details of all pharmacies open on Saturdays can be found in Appendix A.

### 3.1.3.4 Routine Sunday daytime access to community pharmacies

The percentage of community pharmacy providers open on Sundays across Ealing is 21%. Fewer pharmacies are open on Sundays than any other day in Ealing, as is the case nationally. While Northolt does not have any pharmacies open on a Sunday there are short travel times to other localities for this provision.

Full details of all pharmacies open on Sundays can be found in Appendix A.

### 3.1.3.5 Routine bank holiday access to community pharmacies

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

NHSE&I has commissioned two Enhanced Services to provide coverage over bank holidays, Easter Sunday and Christmas Day, to ensure that there are pharmacies open on these days with their location near to the hubs and out-of-hours providers so that patients can easily access medication if required. In Ealing there are two pharmacies that are commissioned specifically for bank holiday coverage:

<b>Jallas Pharmacy, 313 Horn Lane, Acton W3 0BU</b>	Christmas Day and Easter Sunday: 10:00–18:00
<b>Jallas Pharmacy, 313 Horn Lane, Acton W3 0BU</b>	All other bank holidays: 10:00–14:00
<b>Remedy Chemist, 83 Greenford Avenue, Hanwell W7 1LJ</b>	Christmas Day and Easter Sunday: 10:00–18:00
<b>Remedy Chemist, 83 Greenford Avenue, Hanwell W7 1LJ</b>	All other bank holidays: 10:00–14:00

### 3.1.4 Advanced Service provision from community pharmacies

Data supplied from NHSE&I has been used to demonstrate how many community pharmacies per locality have signed up to provide the Advanced Services in Table 26. Details of individual pharmacy providers can be seen in Appendix A.

Note: Community pharmacy COVID-19 LFD distribution service stopped on 1 April 2022, and the COVID-19 medicine delivery service stopped on 5 March 2022 at 23:59. These services have therefore not been included in Table 26.

**Table 26: Providers of Advanced Services in Ealing (2020-21) by percentage of community pharmacy providers by locality (number of pharmacies)**

Advanced Service	Acton (12)	Ealing (17)	Greenford (11)	Hanwell (7)	Northolt (4)	Perivale (5)	Southall (19)
NMS	67%	83%	82%	86%	100%	80%	84%
Community pharmacy seasonal influenza vaccination	75%	65%	82%	57%	75%	40%	79%
CPCS*	67%	82%	82%	71%	50%	60%	79%
Hypertension case-finding service	25%	59%	45%	57%	25%	50%	37%

\* This includes CPCS and GP CPCS consultations

There is no data on AUR.

The information in Table 27 provides detail of the **recorded activity** of Advanced Service delivery in Ealing for 2021-22 (7 months). It must be stressed that the impact of the COVID-19 pandemic will have affected this activity data in several ways:

- Face-to-face services needed to be adjusted to enable telephone consultations
- Some Advanced Services had delayed implementation dates
- Referral pathways from NHS 111 and GP practices were focused on the pandemic
- The increased workload and provision of pandemic-specific services will have affected the ability to provide other Advanced Services

- The effect of the extra workload on community pharmacies may have affected the timeliness of claims, which are used to measure activity

[Section 6.3](#) lists all Advanced Services that may be provided under the pharmacy contract. As these services are discretionary, not all providers will provide them all of the time.

Data supplied from NHSE&I has been used in Table 27 to demonstrate how many are actually providing these Advanced Services across the area.

**Table 27: Advanced Service provision by percentage of providers currently providing**

Advanced Service	England	London	Ealing
NMS*	85%	81.5%	81%
Community pharmacy seasonal influenza vaccination*	63.5%	67%	75%
CPCS*	77%	71%	79%
Hypertension case-finding service**	5%	2%	9%
Community pharmacy hepatitis C antibody testing service (currently until 31 March 2022)*	0.1%	0.3%	0%
AUR*	0.3%	0.2%	0
SAC*	8%	2.1%	1%

Source: NHS BSA Dispensing Data

\* Data from NHS BSA 2021-22 as of December 2021

\*\* Data from NHS BSA as of November 2021

Appendix A lists those community pharmacies who have provided these services as of December 2021.

Table 27 provides information on the activity of Advanced Services across Ealing. For this PNA, activity data across the last four years has been used as the most recent data will have been affected by the COVID-19 pandemic and will therefore not be an accurate reflection.

Table 27 shows Advanced Services are used, but information is skewed due to the pandemic. New services such as CPCS are in place, but data shows low uptake nationally, based on referrals into the service.<sup>35</sup> A recent report (October 2021) demonstrated there are currently over 6,500 GP practices in England and only 862 practices referred patients to CPCS.<sup>36</sup>

The new hypertension service, which started in October 2021, shows low use nationally and regionally. Ealing has higher than national (9% vs 5%) and regional usage of the hypertension service across the pharmacies.

To date, there has been low use of the community pharmacy hepatitis C antibody-testing service nationally and regionally.

<sup>35</sup> NHS BSA. Dispensing Data. [www.nhsbsa.nhs.uk/prescription-data/dispensing-data](http://www.nhsbsa.nhs.uk/prescription-data/dispensing-data)

<sup>36</sup> Royal College of General Practitioners. Making the Community Pharmacist Consultation Service a Success. October 2021. [www.rpharms.com/recognition/all-our-campaigns/policy-a-z/cpcs](http://www.rpharms.com/recognition/all-our-campaigns/policy-a-z/cpcs)

There has been no recorded provision of the AUR service from community pharmacy providers in Ealing to 1 December 2021. The number of providers of the AUR is also very low regionally and nationally.

### **3.1.5 Enhanced Service provision**

Under the pharmacy contract, Enhanced Services are those directly commissioned by NHSE&I ([Section 1.3](#)). Therefore, any Locally Commissioned Services commissioned by CCGs or the local authority are not considered here. They are outside the scope of the PNA but are considered in [Section 4](#).

NHSE&I (London region) currently commissions the London Vaccination Service from pharmacies in Ealing. This Enhanced Service is in addition to the national flu vaccination Advanced Service and includes a top-up element for seasonal flu as well as pneumococcal vaccinations for certain cohorts and MenACWY in 18–24-year-olds living in London permanently or temporarily.

Delivery of the COVID-19 vaccination has been added as an Enhanced Service from community pharmacies to support the public during the pandemic.

For the last two years NHSE&I has had an Enhanced Service for coverage over bank holidays, to ensure that there are pharmacies open on these days and that their location is near to the hubs and out-of-hours providers so that patients can easily access medication if required. The current service level agreements expire in August 2022 and are being extended. This is a change since the publication of the 2018 PNA. There are two community pharmacies providing this service in Ealing.

### **3.2 Dispensing Appliance Contractors (DACs)**

There are no DACs in Ealing, however DAC services are available to the population from elsewhere in the UK. Appliances may also be dispensed from community pharmacies. The community pharmacy contractor questionnaire received 38 responses and 83% of respondents reported that they provide all types of appliances (8% stated they provided none).

As part of the Essential Services of appliance contractors, a free delivery service is available to all patients. It is therefore likely that patients will obtain appliances delivered from DACs outside Ealing. There were 112 DACs in England in 2020-21.

### **3.3 Distance-Selling Pharmacies (DSPs)**

A DSP provides services as per the Pharmaceutical Regulations 2013. It may not provide Essential Services face to face and therefore provision is by mail order and/or wholly internet. As part of the terms of service for DSPs, provision of all services offered must be offered throughout England.

It is therefore likely that patients within Ealing will be receiving pharmaceutical services from a DSP outside. There are four DSPs in Ealing.

- PPRX Ltd, Room 112, Biz Space, 4-6 Wadsworth Road, Perivale, London UB6 7JJ
- My Own Chemist, 4-5 Northolt Trading Estate, Belvue Road, Northolt UB5 5QS

- Lloyds Direct (previously Echo), 17 Wadsworth Road, Perivale, London UB6 7JD
- Zee Pharmacy, 8E Europa Studios, Victoria Road, London NW10 6ND

A DSP must not provide Essential Services to a person who is present at the pharmacy, or in the vicinity of it. In addition, the pharmacy's standard operating procedures must provide for the Essential Services to be provided safely and effectively without face-to-face contact with any member of staff on the premises.

A DSP may provide Advanced and Enhanced Services on the premises, as long as any Essential Service that forms part of the Advanced or Enhanced Service is not provided to persons present at the premises.

Figures for 2020-21 show that in England there were 372 DSPs, accounting for 3.2% of the total number of pharmacies. This has increased significantly from 2015-16, when there were 266 DSPs, accounting for 2.3% of all pharmacy contractors.

### **3.4 Local Pharmaceutical Service (LPS) providers**

There are no LPS pharmacies in Ealing.

### **3.5 Dispensing GP practices**

There are no dispensing GP practices in Ealing.

### **3.6 PhAS pharmacies**

From January 2022, this scheme is being updated to continue to support patient access to isolated, eligible pharmacies.

There are no PhAS pharmacies in Ealing.

### **3.7 Pharmaceutical service provision provided from outside Ealing**

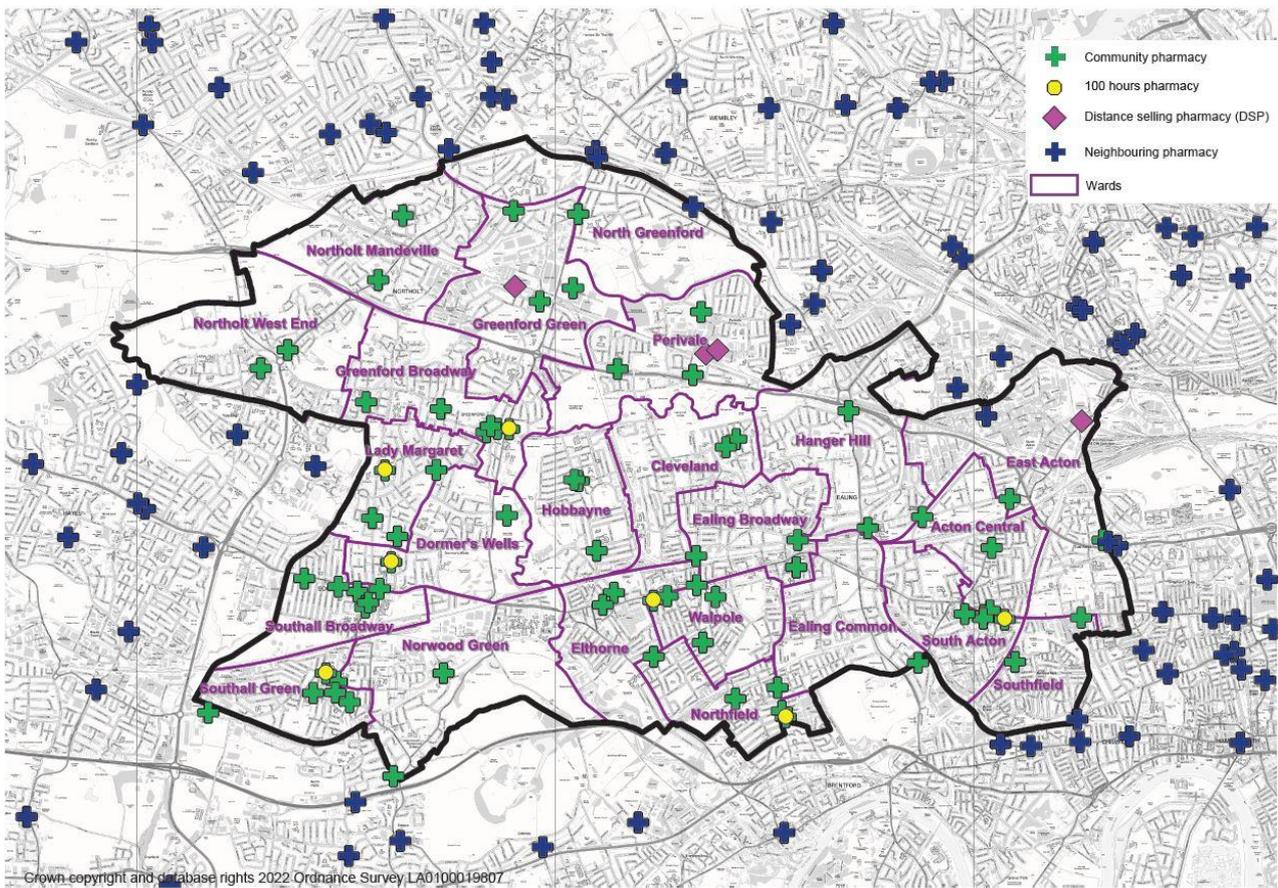
Ealing is bordered by five other HWB areas: Hillingdon, Harrow, Brent, Hammersmith and Fulham, and Hounslow. As previously mentioned, like most London boroughs, Ealing has a comprehensive transport system. As a result, it is anticipated that many residents in Ealing will have reasonable access to pharmaceutical service providers in neighbouring HWBs and beyond.

There are significant providers that the Steering Group would like to mention, which lie in close proximity to the borders of Ealing:

- Bedford Park Pharmacy, 5 Bedford Park Corner, Chiswick, London W4 1LS
- PM Williams Pharmacy, 5 Northolt Road, London HA2 8HB
- Chana Pharmacy, 96-98 High Street, London NW10 4SL

A number of other providers lie within close proximity to the borders of Ealing boundaries and are marked on Figure 10. Further analysis of cross-border provision is undertaken in [Section 6](#).

Figure 10: Map identifying Ealing HWB pharmacies and cross-border pharmacy provision



## Section 4: Other services that may affect pharmaceutical services provision

Community pharmacies and GP practices provide a range of other services. These are not considered pharmaceutical services under the Pharmaceutical Regulations 2013 and may be either free of charge, privately funded or commissioned by the Local Authority (LA) or CCG.

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

The services commissioned in Ealing are described below and in [Section 6](#), and those commissioned from community pharmacy contractors in Ealing are listed in Table 28.

**Table 28: Commissioned services from community pharmacies in Ealing**

Commissioned service	CCG-commissioned service	LA-commissioned service
Supervised consumption of opiates		x
Needle exchange service		x
Emergency Hormonal Contraception (EHC)		x
COVID-19 testing (stopping 1 April 2022)		x
In-hours on-demand anticipatory medicines service	x	
Out-of-hours on-demand anticipatory medicines service	x	

### 4.1 Local authority-commissioned services provided by community pharmacies in Ealing

Ealing commissions four services from community pharmacies:

- Supervised consumption of opiates
- Needle exchange service
- EHC
- COVID-19 lateral flow testing

These services may also be provided from other providers, e.g. GP practices and community health services. A full list of services and community pharmacy providers can be found in Appendix A.

### 4.2 CCG-commissioned services

NWL CCG currently commissions two services in Ealing:

- In-hours palliative care medicines supply service
- Out-of-hours palliative care medicines supply service

Further details of the services may be found in [Section 6.5.1](#). A full list of community pharmacy providers is listed in Appendix A.

CCGs are to be replaced by ICBs as part of ICSs. It is anticipated that ICSs will take on the delegated responsibility for pharmaceutical services from 2023 from NHSE&I and therefore some services commissioned from pharmacies by CCGs will fall under the definition of Enhanced Services.

### **4.3 Other services provided from community pharmacies**

As part of the community pharmacy contractor questionnaire, found in Appendix D, respondents were asked to indicate which from a range of other services, including disease-specific, vaccination and screening services, they currently provide, would be willing to provide or would not be willing to provide. The majority of pharmacies indicated that they either currently provide these services or would be willing to provide if commissioned.

A summary of the community pharmacy contractor questionnaire responses is detailed in Appendix I.

### **4.4 Changed collection and delivery services**

All pharmacies who responded offer collection of prescriptions from GP practices. Of those who responded, 77% of pharmacies offer a free delivery service of dispensed medicines on request, while 37% provide a chargeable service. Depending on the area in question and the ability of residents to pay for a delivery service, this could affect individuals' ability to receive a delivery service and affect their access to medications.

Free delivery is required to be offered without restriction by all DSPs to patients who request it throughout England. Free delivery of appliances is also offered by DACs. There are no DACs based in Ealing, however, there are 110 throughout England.

### **4.5 Language services**

Of the pharmacies who responded to the community pharmacy contractor questionnaire, 31 reported that they offer at least one additional language in addition to English. The most common spoken additional languages were Gujarati, Hindi, Punjabi, Urdu, Swahili and Polish. The full list can be seen in Appendix I, Q15.

### **4.6 Services for less-abled people**

Under the Equality Act 2010,<sup>37</sup> community pharmacies are required to make 'reasonable adjustments' to their services to ensure they are accessible by all groups, including less-abled persons. The questionnaire identifies that 87% have a consultation room that is accessible to wheelchair users.

### **4.7 GP practices providing extended hours**

There are a number of GP practices in Ealing that provide extended hours. The normal working hours that a GP practice is obliged to be available to patients are 08:00 to 18:30 Monday to Friday; a number of practices offer extended hours both before and after these times, including on a Saturday morning.

---

<sup>37</sup> Equality Act 2010. [www.legislation.gov.uk/ukpga/2010/15/contents](http://www.legislation.gov.uk/ukpga/2010/15/contents)

#### **4.8 Other providers**

The following are providers of pharmacy services in Ealing but are not defined as pharmaceutical services under the Pharmaceutical Regulations 2013.

**NHS Hospitals** – pharmacy service provision is provided to Ealing hospital patients at:

- Ealing Hospital, Uxbridge Road, Southall UB1 3HW
- West London Mental Health Trust, 13 Uxbridge Road, Ealing UB1 3EU

**Urgent care centres** – Ealing Hospital

There are no walk-in centres and minor injury units in Ealing, but residents can attend one at West Middlesex Hospital (commissioned by LB Hounslow).

## Section 5: Findings from the public questionnaire

A public questionnaire about pharmacy provision was developed (Appendix C) and compiled by Ealing PNA Steering Group. This was circulated to residents via:

- Ealing Council website
- Distribution of paper copies of the questionnaires and posters to all local pharmacies and libraries
- Distribution of posters to all GP practices and Ealing Council offices
- Circulated online questionnaire to Ealing Residents Panel
- Healthwatch promoted via social media (Twitter and Facebook) and via news item on website

From the 206 responses received from the public questionnaire:

### 5.1 Visiting a pharmacy

- 89% have a specific pharmacy (three respondents (1%) prefer online pharmacies)
- 46% have visited a pharmacy once a month or more for themselves in the past six months; seven respondents (4%) have not visited a pharmacy in the last six months

### 5.2 Choosing a pharmacy

Reason for choosing pharmacy	% Respondents stating 'extremely/very important'
Convenience	90%
Quality of service	90%
Availability of medication	93%
Accessibility	43%

- 90% (185) describe the service as good or excellent (six respondents (3%) identified the service from their pharmacy as poor)

### 5.3 Mode of transport to a community pharmacy

Patients reported accessing a pharmacy in the following ways:

- Walking – 71%
- Car – 18%.
- Bicycle – 3%
- Public transport – 2%
- Wheelchair/mobility scooter – 2%

99% of respondents travel to the pharmacy from home.

### 5.4 Time to get to a pharmacy

≤30 mins	≤15 mins
99%	83%

- 80% report no difficulty in travelling to a pharmacy
- Of the 37 respondents who report difficulty in travelling to a pharmacy, 25 report that this is due to lack of parking

## 5.5 Preference for when to visit a pharmacy

The information from respondents showed that there was no preferred day or time of day to visit a pharmacy.

Of note: 97% of respondents suggest that the pharmacy is open on the most convenient day and 94% state it is open at the most convenient time.

## 5.6 Service provision from community pharmacies

There was generally an excellent awareness of the Essential Services provided from community pharmacy (over 90%) with the exception of the disposal of unwanted medicines (75%) and DMS (25%). However due to DMS being a service provided to patients discharged from hospital, you would not expect a high percentage to be aware due to the lack of need or perceived need. (See Appendix H, Q18).

Table 29 shows the awareness of respondents for some of the non-Essential Services that are or may be provided and a second column that identifies the percentage that would wish to see the service provided.

**Table 29: Public questionnaire respondents about services**

<b>Service</b>	<b>% of respondents who were aware</b>	<b>% of respondent who 'would like to see always provided'</b>
DMS	25%	59%
CPCS	20%	59%
Flu vaccination	86%	85%
NMS	27%	48%
Stop smoking/nicotine replacement therapy	52%	51%
Supervised consumption	23%	31%
Sexual health services	38%	63%
Immediate access to specialist drugs	20%	65%
Needle exchange	17%	37%
Hepatitis testing	9%	43%
COVID-19 vaccination	61%	80%

It can be seen that there is a lack of awareness of some of these services that could be provided but also a perceived need for the provision of these services from community pharmacy.

A full copy of the results can be found in Appendix H.

Tables 30a–c provides the demographic analysis of respondents.

**Table 30a: Demographic analysis of community pharmacy user questionnaire respondents – sex**

<b>Sex</b>	<b>Male</b>	<b>Female</b>
<b>Percentage</b>	54%	44%

**Table 30b: Demographic analysis of community pharmacy user questionnaire respondents – age**

<b>Age range</b>	<b>&lt;18</b>	<b>18–24</b>	<b>25–34</b>	<b>35–44</b>	<b>45–54</b>	<b>55–64</b>	<b>65–74</b>	<b>&gt;75</b>	<b>Prefer not to say</b>
<b>Percentage</b>	0%	2%	2%	6%	16%	30%	31%	12%	1%

**Table 30c: Demographic analysis of community pharmacy user questionnaire respondents – illness or disability**

<b>Illness or disability?</b>	<b>Yes</b>	<b>No</b>	<b>Prefer not to say</b>
<b>Percentage</b>	12%	82%	6%

## Section 6: Analysis of health needs and pharmaceutical service provision

### 6.1 Pharmaceutical services and health needs

[Section 2](#) discusses Ealing's JSNA and local strategies. In addition, the priorities outlined in the NHS LTP (especially those where community pharmacies can have an impact) need consideration.

The following priorities can be supported by the provision of pharmaceutical services within the Ealing.

Some of these services are Essential Services and already provided, and some will be Advanced or Enhanced Services that are recently introduced or are yet to be commissioned.

To note: there have been temporary changes to the service requirements within the NHS CPCF that were introduced during the COVID-19 pandemic. The changes were agreed by Pharmaceutical Services Negotiating Committee (PSNC) with NHSE&I and the DHSC to allow pharmacy contractors and their teams to prioritise the provision of key services to patients during periods of time when capacity in pharmacies and the wider NHS became very stretched. These services are temporary, with the Advanced Services due to stop, however it should be noted how community pharmacy has contributed as a system provider and has been able to step up to national priorities to meet the needs of the population.

It should also be recognised that there was a significant increase in the demand for self-care, minor ailment treatment and advice during the pandemic. An audit conducted by the PSNC enabled them to measure the reliance that the public has had on pharmacies through the pandemic and the additional pressure that this had put on teams.<sup>38</sup>

At present it is not clear what shape services locally commissioned by CCGs will take in the long-term future. The development of the ICS across Ealing as part of NWL CCG will conceivably lead to an alignment of these Locally Commissioned Services across the ICS area.

#### 6.1.1 Ealing health needs

The population of Ealing has risen from 307,300 in 2001 to 340,300 in 2020. Ealing is the fourth-largest London borough in terms of population,<sup>39</sup> and, at 61 persons per hectare, Ealing is also the fourth most densely populated borough in Outer London. The population of Ealing is projected to rise by 4.8% to around 351,000 by 2031.

Ealing has a lower proportion of people aged 65 and above compared with England (13.4% vs 18.5%) but the percentage of older people who are income deprived or living alone is higher than the England average in most wards.

---

<sup>38</sup> PSNC. Pharmacy Advice Audit: 2022 audit. <https://psnc.org.uk/contract-it/essential-service-clinical-governance/clinical-audit/psnc-pharmacy-advice-audit/>

<sup>39</sup> ONS. MYE. 2020.

Ealing has a significantly higher both male (80.9) and female life expectancy (84.6) compared with the England average (79.7 and 83.2 respectively).

At the last census around two in every three residents were recorded as being from a Black and Minority Ethnic (BME) group.<sup>40</sup> The proportion of people in Ealing who cannot speak English well, or at all, is significantly higher than the England average in all wards.

In Ealing, the rate of homeless households living in temporary accommodation is significantly higher than in London and five times the England average. In addition, Ealing was among London boroughs with the highest asylum-seeking population, and has one of the largest Traveller populations in the Greater London area.

At 22.7, Ealing's overall IMD score shows slightly higher level of deprivation compared with London and England scores (21.8 and 21.7 respectively). Broadly speaking, the most deprived areas within the borough are found in the extremes of West and East, such as areas in and around Southall, Northolt and Acton. Community pharmacy providers in Ealing and surrounding areas in relation to IMD per Output Area 2019 can be found in [Map 2](#).

In terms of causes of ill health in Ealing:

- Significantly higher obesity prevalence rate than the England average among children in Reception and Year 6
- Lower level of eating the recommended 5-a-day
- Sexual health – high levels of new STI diagnosis
- Dental outcomes are significantly worse than the England average.
- Alcohol admissions are higher than the England average
- Drug misuse is higher than the England average (10.4/100,000 vs 8.9)
- Uptake of flu vaccination is lower than the England average (71.4% vs 80.9%)
- COVID-19 infections and mortality since the start of the pandemic are statistically significantly higher than for London and England

Overall, when compared with England and regardless of age, Ealing had significantly lower ratios of **mortality** from all causes, all cancers and all respiratory diseases, while the mortality ratios for all circulatory diseases were similar. However, Ealing had significantly more hospital admissions than expected for all causes, CHD and stroke. In addition:

- Ealing had a significantly higher percentage of palliative care deaths in hospital (52.3%) as compared with the England average (45.3%) during 2020
- Compared with England averages Ealing has a greater prevalence of diabetes (9.0% vs 7.1%). Most other disease prevalence is below the England average

### 6.1.2 Ealing Health and Wellbeing Strategy (HWS)

The HWS identifies four long-term ambitions to promote wellness for residents of Ealing:

---

<sup>40</sup> BME population includes Asian/Asian British, Black/Black British, Mixed background, White Irish, White Other, Irish Travellers, Roma/Gypsies, Any Other background, but excludes people who identify as White British: English/Welsh/Scottish/Northern Irish.

- Create and sustain good mental and physical health for children and adults at every stage of life
- Reduce health inequalities by improving outcomes for neighbourhoods and communities experiencing poor health
- Enable people of working age to participate as fully as possible in working life, to improve the health and economic outcomes for them and their families
- Enable everyone to be healthy and independent for as long as possible, helping to prevent or delay the need for social and acute care

The HWS highlights the need for a multi-agency approach (including local pharmaceutical service providers) in addressing the above priorities in order to realise a more coherent and effective response and to accomplish set outcomes.

### 6.1.3 Priorities from the NHS Long Term Plan (LTP)

LTP priorities that can be supported from community pharmacy:

- Prevention
  - Smoking
  - Obesity
  - Alcohol
  - Antimicrobial resistance
  - Stronger NHS action on health inequalities
- Better care for major health conditions
  - Cancer
  - Cardiovascular disease
  - Stroke care
  - Diabetes
  - Respiratory disease
  - Adult mental health services

From 2019, NHS 111 started direct-booking into GP practices across the country, as well as referring on to community pharmacies who support urgent care and promote patient self-care and self-management. The **CPCS** has been available since October 2019 as an Advanced Service, with the addition of GP CPCS from 1 November 2020.

‘Pharmacist review’ of medication as a method to reduce avoidable A&E attendances, admissions and delayed discharge, streamlining patient pathways to reduce avoidable outpatient visits and over-medication, has been identified as an important part of the services that can be provided from community pharmacy, and should include services that support patients to take their medicines to get the best from them, to reduce waste and promote self-care.

The LTP also identifies community pharmacists as part of the process of improving the effectiveness of approaches such as the **NHS Health Check**, rapidly treating those identified with high-risk conditions, including high blood pressure. The **hypertension case-finding service** has been developed as an Advanced Service from community pharmacy as part of this process, but other disease-specific programmes should be made part of the service options available including for respiratory conditions, diabetes and cancer. For example, the LTP states: 'We will do more to support those with respiratory disease to receive and use the right medication.' Of NHS spend on asthma, 90% goes on medicines, but incorrect use of medication can also contribute to poorer health outcomes and increased risk of exacerbations or even admission. The NMS is an Advanced Service that provides support for people with long-term conditions prescribed a new medicine, to help improve medicines adherence.

Community pharmacy also has an important role in optimising the use of medicines, and the LTP identifies pharmacists as key in delivering value for the £16 billion spent on medicines annually.

Ealing HWB has designated that all Essential Services are to be regarded as Necessary Services. The Advanced Services are all considered relevant.

## 6.2 Essential Services (ES)

The Essential Services (ES) of the community pharmacy contract **must** be provided by all contractors:

- ES 1: Dispensing of medicines
- ES 2: Repeat dispensing/electronic repeat dispensing (eRD)
- ES 3: Disposal of unwanted medicines
- ES 4: Public Health (promotion of healthy lifestyles)
- ES 5: Signposting patients to other healthcare providers
- ES 6: Support for self-care
- ES 7: Discharge Medicines Service (DMS)

ES1 and ES2 support patients living with long-term conditions by providing timely supply of medicines and advice to patients. ES2 may be of particular benefit to patients on medicines as part of their treatment for long-term conditions, e.g. diabetes, or cardiovascular or respiratory conditions.

Using ES3, pharmacies can direct patients in the safe disposal of medicines and reduce the risk of hoarding medicines at home, which may increase the risk of error in taking medicines or the taking of out-of-date medicines.

ES4 can support local and national campaigns informing people of managing risk factors associated with many long-term conditions, such as smoking, healthy diet, physical activity and alcohol consumption.

ES4 provides the ability to:

- Improve awareness of the signs and symptoms of conditions such as stroke, e.g. FAST campaign

- Promote validated information resources for patients and carers
- Collect data from the local population on their awareness and understanding of different types of disease and their associated risk factors
- Target at-risk groups within the local population to promote understanding and access to screening programmes, e.g. men in their 40s for NHS Health Checks

Community pharmacy also plays a vital role in the management of minor ailments and self-care. Community pharmacists are potentially the most-accessed healthcare professionals in any health economy and are an important resource in supporting people in managing their own self-care and in directing people to the most appropriate points of care for their symptoms. Although the evidence base is currently very small in measuring the effectiveness and value of community pharmacies' contribution to urgent care, emergency care and unplanned care, there is a growing recognition of the importance of this role. The current pandemic has highlighted this even further and there appears to be a desire and appetite to do more to integrate the system and pharmacy workforce spanning across community pharmacy, primary and secondary care, to improve health outcomes and reduce inequalities.

Using ES5, pharmacies can signpost patients and carers to local and national sources of information and reinforce those sources already promoted. Appropriate signposting has a significant role in supporting the numerous outcomes highlighted as priorities in the Ealing HWS. Essential Services may also identify other issues such as general mental health and wellbeing, providing an opportunity to signpost to other local services or services within the pharmacy, e.g. repeat dispensing.

Through ES6, pharmacy staff can advise patients and carers on the most appropriate choices for self-care and direct queries to the pharmacist for further advice when purchasing over-the-counter medicines or general sales lists products. Some over-the-counter medicines are contraindicated, e.g. decongestant use in circulatory disease, and inappropriate use could increase the risk of an unplanned hospital admission. Equally, some symptoms can be much more significant in certain long-term conditions, e.g. foot conditions in diabetes, and the attempted purchase of an over-the-counter medicine by a patient or carer could alert a pharmacist and lead to an appropriate referral. Promotion of self-care is an important aspect of the management of many long-term conditions and a key element in the support of patients. Advanced Services provide a key opportunity for the pharmacist to help support patients in reaching their goals

ES7: From 15 February 2021, NHS trusts were able to refer patients who would benefit from extra guidance around new prescribed medicines for provision of the DMS at their community pharmacy. The service has been identified by the NHSE&I Medicines Safety Improvement Programme to be a significant contributor to the safety of patients at transitions of care, by reducing readmissions to hospital.

Underpinning the Essential Services is a governance structure for the delivery of pharmacy services. This structure is set out within the Pharmaceutical Regulations 2013 and includes:

- A patient and public involvement programme

- A clinical audit programme
- A risk management programme
- A clinical effectiveness programme
- A staffing and staff programme
- An information governance programme

This structure provides an opportunity to audit pharmacy services and to influence the evidence base for the best practice and contribution of pharmacy services, especially to meeting local health priorities within Ealing.

Both Essential and Advanced Services provide an opportunity to identify issues with side effects, changes in dosage, confirmation that the patient understands the role of the medicine or appliance in their care and opportunities for medicine optimisation. Appropriate referrals can be made to GPs or other care settings, resulting in patients receiving a better outcome from their medicines and, in some cases, cost-saving for the commissioner.

### **6.3 Advanced Services**

The Advanced Services are all considered relevant for the purpose of this PNA.

There are several Advanced Services within the NHS CPCF. Advanced Services are not mandatory for providers to provide and therefore community pharmacies can choose to provide any of these services as long as they meet the requirements set out in the Secretary of State Directions. The Advanced Services are listed below and the number of pharmacy participants for each service in Ealing can be seen in [Section 3.1.4](#) and later in this section by locality.

- A.1: Appliance Use Review (AUR)
- A.2: Stoma Appliance Customisation (SAC)
- A.3: COVID-19 LFD distribution service (stopped 1 April 2022)
- A.4: Pandemic delivery service (stopped 5 March 2022, at 23:59)
- A.5: Community Pharmacist Consultation Service (CPCS)
- A.6: Flu vaccination service
- A.7: Hepatitis C testing service
- A.8: Hypertension case-finding service
- A.9: New Medicine Service (NMS)
- A.10: Smoking cessation Advanced Service

Although the Steering Group has determined that Advanced Services are relevant but not Necessary Services, Ealing HWB would wish to support all existing pharmaceutical service providers to make available all Advanced Services where appropriate.

Evidence shows that up to half of medicines may not be taken as prescribed or simply not taken at all. Advanced Services have a role in highlighting issues with medicines or appliance adherence and in reducing waste through inappropriate or unnecessary use of medicines or appliances. Polypharmacy is highly prevalent in long-term conditions management.

## A.1 Appliance Use Review (AUR)

AURs should improve the patient's knowledge and use of any 'specified appliance' by:

1. Establishing the way the patient uses the appliance and the patient's experience of such use
2. Identifying, discussing and assisting in the resolution of poor or ineffective use of the appliance by the patient
3. Advising the patient on the safe and appropriate storage of the appliance; and
4. Advising the patient on the safe and proper disposal of the appliances that are used or unwanted.

## A.2 Stoma Appliance Customisation (SAC)

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. The stoma appliances that can be customised are listed in Part IXC of the Drug Tariff.

## A.3 and A.4 Services provided to give support during the COVID-19 pandemic

From 16 March 2021, people who have been notified of the need to self-isolate by NHS Test and Trace have been able to access support for **the delivery of their prescriptions from community pharmacies**.

**C-19 LFD distribution service**, which pharmacy contractors can choose to provide, as long as they meet the necessary requirements, aims to improve access to COVID-19 testing by making LFD test kits readily available at community pharmacies for asymptomatic people, to identify COVID-positive cases in the community and break the chain of transmission.

From 24 February 2022, the government has been easing COVID-19 restrictions. Therefore, the pandemic delivery was decommissioned on 6 March 2022. Since 1 April, the government no longer provides free universal symptomatic and asymptomatic testing for the general public in England.<sup>41</sup>

## A.5 Community Pharmacist Consultation Service (CPCS)

Since 1 November 2020, general practices have been able to refer patients for a minor illness consultation via CPCS, once a local referral pathway has been agreed. As well as referrals from general practices, the CPCS takes referrals from NHS 111 (and NHS 111 online for requests for urgent supply), Integrated Urgent Care Clinical Assessment Services and, in some cases, the 999 service. The service has been available since 29 October 2019.

## A.6 Flu vaccination

The inclusion of flu vaccination as one of the Advanced Services contributes to improving access and opportunity for the public to receive their seasonal vaccine, therefore increasing

---

<sup>41</sup> Cabinet Office. Living with COVID-19. 6 May 2022. [www.gov.uk/government/publications/covid-19-response-living-with-covid-19/covid-19-response-living-with-covid-19](https://www.gov.uk/government/publications/covid-19-response-living-with-covid-19/covid-19-response-living-with-covid-19)

uptake across the population. Community pharmacy has been providing flu vaccinations under a nationally commissioned service since September 2015. The accessibility of pharmacies, their extended opening hours and the option to walk in without an appointment have proved popular with patients seeking vaccinations – provided each year from September to March.

Vaccination is a key intervention to protect at-risk groups, such as older people, people living with diabetes, COPD or cardiovascular disease, or carers, against diseases such as seasonal flu or shingles.

### **A.7 Hepatitis C testing service**

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 such as 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. Recent developments in the treatment options for Hepatitis C make the early identification of patients an important part of the management of the condition.

### **A.8 Hypertension case-finding service**

This is a recently introduced Advanced Service. The service has two stages – the first is identifying people at risk of hypertension and offering them blood pressure measurement (a 'clinic check'). The second stage, where clinically indicated, is offering 24-hour ambulatory blood pressure monitoring. The blood pressure test results will then be shared with the patient's GP to inform a potential diagnosis of hypertension.

### **A.9 New Medicine Service (NMS)**

The NMS provides support to people who are newly prescribed a medicine to manage a long-term condition, which will generally help them to appropriately improve their medication adherence and enhance self-management of the long-term condition. Specific conditions/medicines are covered by the service, which are detailed below.

The service is split into three stages, which are: 1. Patient engagement, 2. Intervention, and 3. Follow-up.

From 1 September 2021, the following conditions are covered by the service:

- 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/TIA
- CHD

The antiplatelet/anticoagulant therapy eligibility continues, but it is now included in the above list by reference to the underlying condition/reason for prescribing.

The NHS BSA has published a list of medicines that are suitable for NMS.<sup>42</sup>

## **A.10 Smoking cessation**

This service enables NHS trusts to refer patients discharged from hospital to a community pharmacy of their choice to continue their smoking cessation care pathway, including providing medication and behavioural support as required, in line with the NHS LTP care model for tobacco addiction.

## **6.4 Enhanced Services**

### **6.4.1 COVID-19 vaccination**

This has been added into the Enhanced Services provided from community pharmacies and commissioned by NHSE&I. On 21 January 2022 it was the one-year anniversary of providing COVID-19 vaccinations in Ealing from community pharmacies.

This has been added into the Enhanced Services provided from community pharmacies and commissioned by NHSE&I. The number of pharmacies currently providing COVID-19 vaccination under the terms of an Enhanced Service has doubled from October 2021 to January 2022, and latest reports are that over 22 million doses have been provided by community pharmacies in the 12 months to 14 January 2022.

### **6.4.2 London Vaccination Service**

This service is provided in addition to the national flu vaccination Advanced Service and includes a top-up element to cover additional groups of patients, e.g. carers, asylum seekers and the homeless, as well as providing vaccination for those aged 2–18.

There is also provision for pneumococcal vaccination to eligible cohorts and MenACWY for 18–24-year-olds living permanently or temporarily in London.

### **6.4.3 Bank holidays**

For the last two years NHSE&I has had an Enhanced Service for coverage over bank holidays to ensure that there are pharmacies open on these days and that their location is near to the hubs and out-of-hours providers so that patients can easily access medication if required.

## **6.5 Locally Commissioned Services (LCS)**

Locally commissioned community pharmacy services can be contracted via a number of different routes and by different commissioners, including local authorities, CCGs and NHS England's local teams. In Ealing, most commissioned services are public health services and hence are commissioned by the Ealing Public Health Team.

---

<sup>42</sup> NHS BSA. New Medicine Service (NMS) – Drug Lists. [www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/dispensing-contractors-information/new-medicine-service-nms-drug-lists](http://www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/dispensing-contractors-information/new-medicine-service-nms-drug-lists)

Appendix A provides a summary of LCS within Ealing pharmacies and [Sections 4.1](#) and [4.2](#) provide a description of those services. It is important to note the commissioning status of each service as this defines whether or not it is an LCS.

LCS are included within this assessment where they affect the need for pharmaceutical services or where the further provision of these services would secure improvements or better access to pharmaceutical services.

### **6.5.1 CCG-commissioned services**

#### **6.5.1.1 In-hours palliative care medicines supply service**

Good End of Life Care (EoLC) ensures all residents have a dignified, controlled and peaceful end to their life, regardless of age and cause of death. In order to achieve a good outcome, the needs of the patient, carer and family should be identified and services provided to meet these needs.

Ealing had a significantly higher percentage of palliative care deaths in hospital (52.3%) than the England average (45.3%) during 2020. Provision of this service helps to enable appropriate deaths at home.

The aim of the EoLC/palliative care pharmacy rota service is to improve access to the supply of specialist palliative care drugs within the community in a timely manner for patients, carers and health professionals. National guidance recommends that palliative care formularies should be agreed as part of EoLC pathways. There should be adequate provision of these drugs for both in-hours and out-of-hours settings, supporting home death scenarios.

#### **6.5.1.2 Out-of-hours palliative care medicines supply service**

There is no publicly published list of which pharmacies provide the service. Community pharmacies in Ealing, in conjunction with Hounslow HWB area, operate a joint on-call service for the supply of palliative care drugs out of hours, 365 days a year. The pharmacist must live within one hour's travel of the pharmacy and provide an on-call service for a continuous week from midnight on Sunday night for both HWB areas.

The consequential provision, for every out-of-hours period, is that one pharmacy (in either Ealing or Hounslow) is available to be called out to dispense urgent prescriptions.

The LPC manages the service and ensures stocks of drugs are available in the pharmacies prior to their on-call week.

Publication of which pharmacy is on call for the two HWB areas is shared with the GP out-of-hours provider. To ensure the security of these pharmacies, this information is not published here or elsewhere publicly.

### **6.5.2 Local Authority-commissioned services**

#### **6.5.2.1 Emergency Hormonal Contraception (EHC)**

This service is commissioned by London North West Sexual Health directly, making EHC available for all women, regardless of age, from the agreed community pharmacy providers.

Sexual health has a major focus in the HWS, with the role of pharmacies already highlighted in the provision of EHC.

Teenage conception includes all conceptions before the mother's 20th birthday, but the national focus is on conception under 18. The conception rate is the number of pregnancies that start before the mother's 18th birthday (per 1,000 young women aged 15 to 17) and includes pregnancies that end either in birth or in termination.

According to data from 2019, the teenage conception rate for Ealing (9.0/1,000) continues to reduce and is now lower than the national average in England (15.7) London (13.5). These rates are discussed in [Section 2.5.6](#).

In Ealing, seven pharmacies (10%) are commissioned to provide this service. This is a significant reduction on the number previously reported in 2018, which identified 17 pharmacies providing this service.

There is a very strong evidence base for the use of EHC in reducing unplanned or unwanted pregnancies, especially in teenage years. Its use forms part of an overall national strategy to reduce the rate of teenage pregnancy within England as recommended by NICE (National Institute for Health and Care Excellence). Provision of EHC services within Ealing is reviewed annually.

#### **6.5.2.2 Substance misuse services – supervised consumption**

Community pharmacies have been used for a number of years by drug and alcohol service providers in the provision of supervised consumption services and needle exchange services.

Access to substance misuse services has a significant role in supporting several outcomes highlighted in the HWS.

There is a higher prevalence of drug misuse in Ealing when compared with the England average (10.4/100,000 vs 8.9)

Supervised consumption involves the client consuming methadone or buprenorphine under the direct supervision of a pharmacist in a community pharmacy. It is a medicines adherence service that aims to:

- Reduce the risk of harm to the client by over- or under-usage of drug treatment
- Reduce the risk of harm to the local community by the inappropriate use of prescribed medicines via the illicit drug market
- Reduce the risk of harm to the community by accidental exposure to prescribed medicines

Eleven pharmacies (15%) in Ealing are sub-commissioned to provide this service by RISE (CGL), the substance misuse provider for adults.

#### **6.5.2.3 Needle exchange service**

This service is an integral part of the harm reduction strategy for drug users. It aims to reduce the spread of blood-borne pathogens, e.g. hepatitis B, hepatitis C and HIV, and to act as a referral point for service users to other health and social care services.

Nine pharmacies (12%) in Ealing are sub-commissioned to provide this service by RISE (CGL), the substance misuse provider for adults.

#### 6.5.2.4 COVID-19 supervised Lateral Flow Tests (LFT)

Residents who do not have symptoms but want to get tested can go to a pharmacy (or library) that is offering rapid tests to take at home.

Residents who would like advice on how to take an LFT can receive an assisted test from pharmacies.

### 6.6 PNA localities

There are 71 community pharmacies and four DSPs, making a total of 75 contractors within Ealing. Individual pharmacy opening times are listed in Appendix A.

As described within [Section 1.5](#), the PNA Steering Group decided that the Ealing HWB PNA should be divided into seven localities:

- Acton
- Ealing
- Greenford
- Hanwell
- Northolt
- Perivale
- Southall

Substantial health data is available at this level, and populations and their health needs vary widely between wards. This is illustrated and discussed in detail in [Section 2](#).

Community pharmacy information by locality is summarised in the following three tables in terms of opening hours and availability of services.

**Table 31: Opening hours of community pharmacies by number and type of contractor per locality**

Opening times	Acton (11)*	Ealing (17)	Greenford (10)*	Hanwell (7)	Northolt (4)	Perivale (3)*	Southall (19)
DSP	1	0	1	0	0	2	0
100-hour pharmacy	1 (9%)	2 (12%)	1 (10%)	0	0	0	3 (16%)
After 18:30 weekday	2 (18%)	6 (35%)	4 (40%)	1 (14%)	1 (25%)	3 (100%)	18 (95%)
Saturday	11 (100%)	17 (100%)	8 (80%)	6 (86%)	4 (100%)	3 (100%)	15 (79%)
Sunday	1 (9%)	3 (18%)	3 (30%)	1 (14%)	0	1 (33%)	6 (32%)

\* DSPs do not provide Necessary Services face to face on the premises and are not included in the opening hours assessment in this table

**Table 32: Provision of NHSE Advanced and Enhanced Services by locality (number of community pharmacies)**

<b>NHSE Advanced or Enhanced* Service</b>	<b>Acton (11)^</b>	<b>Ealing (17)</b>	<b>Greenford (10)^</b>	<b>Hanwell (7)</b>	<b>Northolt (4)</b>	<b>Perivale (3)</b>	<b>Southall (19)</b>
NMS	8 (73%)	14 (82%)	9 (90%)	6 (86%)	4 (100%)	4 #	16 (84%)
CPCS	8 (73%)	14 (82%)	9 (90%)	5 (71%)	2 (50%)	3 (100%)	15 (79%)
Flu vaccination	9 (82%)	11 (78%)	9 (90%)	4 (57%)	3 (75%)	1 (33%)	15 (79%)
SAC	1 (9%)	0	0	0	0	0	0
AUR	0	0	0	0	0	0	0
Hep C testing	0	0	0	0	0	0	0
Hypertension finding	3 (27%)	10 (59%)	5 (50%)	4 (57%)	1 (25%)	2 (67%)	7 (37%)
Stop smoking	0	0	0	0	0	0	0
C-19 vaccination*	0	4 (23%)	1 (10%)	1 (14%)	1 (25%)	0	0
London Vaccination*	9 (82%)	12 (71%)	9 (90%)	6 (86%)	4 (100%)	2 (67%)	14 (74%)
Bank holiday coverage*	1 (9%)	0	0	1 (14%)	0	0	0

\* Enhanced

^ DSP does not provide any services

# One DSP listed as providing NMS in Perivale

**Table 33: Provision of LCS (CCG and LA) by locality (number of community pharmacies)**

<b>CCG</b>	<b>Acton (11)^</b>	<b>Ealing (17)</b>	<b>Greenford (10)^</b>	<b>Hanwell (7)</b>	<b>Northolt (4)</b>	<b>Perivale (3)^</b>	<b>Southall (19)</b>
In-hours access to palliative care medicines and advice	2 (18%)	2 (12%)	1 (10%)	1 (14%)	1 (25%)	1 (33%)	2 (11%)
<b>LA</b>							
Supervised consumption of opiates	2 (18%)	3 (18%)	0	0	2 (50%)	0	4 (21%)
Needle exchange service	2 (18%)	3 (18%)	0	0	2 (50%)	0	2 (11%)
EHC	1 (9%)	2 (12%)	2 (20%)	0	1 (25%)	0	1 (5%)
COVID-19 LFT	0	5 (29%)	3 (30%)	0	0	0	3 (16%)

^ DSPs do not provide any of these services therefore excluded from numbers

Appendix A contains details of pharmacy opening times, contractual status and the provision of Advanced Services, Enhanced Services and LCS. A number of community pharmacies provide free prescription delivery services, which many residents may find helpful.

**For the purposes of the PNA Necessary Services for Ealing are:**

- All **Essential** Services

The following **Advanced** Services are considered **relevant**:

- CPCS
- NMS
- Flu vaccination
- Appliance Use Review (AUR)
- Stoma Appliance Customisation (SAC)
- Hepatitis C testing service
- Hypertension case-finding service
- Stop smoking Advanced Service

Ealing HWB has identified **Enhanced** Services as pharmaceutical services that secure improvements or better access, or that have contributed towards meeting the need for pharmaceutical services in Ealing.

**Enhanced** Services in Ealing:

- COVID-19 vaccination
- London Flu Vaccination Service
- Bank holiday coverage

Taking the health needs highlighted in each locality into consideration, this section considers the pharmaceutical service provision within each locality.

Ealing's total population is predicted to grow by 4.8% in the next ten years, changing from approximately 340,00 in 2021 to 351,00 in 2031. Population growth has not been broken down by locality. An assumption of growth of 1.6% over the period of this PNA (to 2025) has been applied to assess potential impact by locality.

## **6.6.1 Acton**

### **6.6.1.1 Necessary Services: current provision**

Acton has a population of 66,600 and lies to the east of Ealing. It has some areas of high deprivation.

There are 11 community pharmacies in Acton and the estimated average number of community pharmacies per 100,000 resident population is 16.6, significantly lower than the England average of 20.6. In addition, there is one DSP in Acton.

Of the 11 community pharmacies:

- 2 pharmacies (18%) are open after 6.30 pm on weekdays
- 11 pharmacies (100%) are open on Saturdays
- 1 pharmacy (9%) is open on Sundays
- 10 hold a standard 40-core hour contract, while 1 holds a 100-core hour contract

There are also a number of accessible providers open in neighbouring localities and HWB areas.

### 6.6.1.2 Necessary Services: gaps in provision

There is no specific information on housing developments or population growth by locality. Assuming population growth of 1.6% during the three-year period of the PNA, there would not be a significant impact on the provision of Necessary Services.

There are pharmacies open beyond what may be regarded as normal hours in that they provide pharmaceutical services during supplementary hours in the evening during the week and are open on Saturday and Sunday.

There are other pharmacies located in adjacent localities and HWB areas that are easily accessible.

There is adequate pharmaceutical service provision across Acton.

**No gaps in the provision of Necessary Services have been identified for Acton.**

### 6.6.1.3 Other relevant services: current provision

Table 32 shows the pharmacies providing Advanced and Enhanced Services in Acton. Regarding Advanced Services that are considered relevant, there are the following numbers of providers (based on 11 community pharmacies, as the DSP does not provide any of these services):

- CPCS – 8 (73%)
- NMS – 8 (73%)
- Flu vaccination – 9 (82%)
- SAC – 1 pharmacy (9%) provides this service
- Hypertension case-finding service – 3 (27%)

There is currently no data for the other Advanced Services either due to no provision or delayed implementation.

### 6.6.1.4 Improvements and better access: gaps in provision

The Steering Group considers that it is those services provided in addition to those considered Necessary for the purpose of this PNA that should reasonably be regarded as providing either an improvement or better access to pharmaceutical provision. This includes Enhanced and Locally Commissioned Services, which are described in [Sections 6.4](#) and [6.5](#).

Regarding access to **Enhanced** Services (based on 11 community pharmacies, as the DSP does not provide any of these services):

- 9 pharmacies (82%) provide the London Vaccination Service
- No pharmacy provides the COVID-19 vaccination service
- 1 pharmacy (9%) provides bank holiday provision for the whole HWB area

Regarding access to **Locally Commissioned Services** within the 11 pharmacies:

- 2 pharmacies (18%) provides the access to palliative medicines service commissioned via the CCG (this is a joint service with providers in neighbouring localities and HWBs)
- 1 pharmacy (9%) provides EHC
- No pharmacy provides the supervised COVID-19 LFT service
- 2 pharmacies (18%) provide the supervised consumption service
- 2 pharmacies (18%) provide the needle exchange service

Ill health and the causes of ill health are discussed in [Section 6.1](#) and expanded upon in [Section 6.8](#) regarding improvements and better access to pharmacy services across Ealing.

Acton does have some significant adverse variances in health identified when compared with the Ealing and national averages:

- South Acton is the only ward in Ealing where male life expectancy is significantly lower than the national average
- The SMR for South Acton under-75s is 122.7
- There are significantly higher levels of hospital admission for stroke in South Acton
- There are significantly higher levels of COPD admissions in Acton Central

Consideration should be given to incentives for further uptake from current providers and extending provision through community pharmacies. Implementation of the recently introduced Advanced Services – hypertension case-finding service and stop smoking Advanced Service – should be considered, as stroke and COPD have been identified above.

There is no evidence to suggest there is a gap in service that would equate to the need for access to Necessary Services outside normal hours.

**No gaps have been identified that if provided either now or in the future (over the next three years), would secure improvements or better access to services in Acton.**

## 6.6.2 Ealing

### 6.6.2.1 Necessary Services: current provision

Ealing locality has a population of 69,800 and lies centrally within Ealing HWB area.

There are 17 community pharmacies in Ealing locality and the estimated average number of community pharmacies per 100,000 resident population is 24.4 significantly higher than the England average of 20.6.

Of the 17 community pharmacies:

- 6 pharmacies (35%) are open after 6.30 pm on weekdays
- 17 pharmacies (100%) are open on Saturdays
- 3 pharmacies (18%) are open on Sundays

- 15 pharmacies hold a standard 40-core hour contract while 2 hold a 100-core hour contract

There are also a number of accessible providers open in neighbouring localities and HWB areas.

#### **6.6.2.2 Necessary Services: gaps in provision**

There is no specific information on housing developments or population growth by locality. Assuming population growth of 1.6% during the three-year period of the PNA, there would not be a significant impact on the provision of Necessary Services.

There are pharmacies open beyond what may be regarded as normal hours in that they provide pharmaceutical services during supplementary hours in the evening during the week and are open on Saturday and Sunday.

There are other pharmacies located in adjacent localities and HWBs that are easily accessible.

There is good pharmaceutical service provision across Ealing locality.

**No gaps in the provision of Necessary Services have been identified for Ealing locality.**

#### **6.6.2.3 Other relevant services: current provision**

Table 32 shows the pharmacies providing Advanced and Enhanced Services in Ealing locality. Regarding Advanced Services that are considered relevant, there are the following numbers of providers:

- CPCS – 14 (82%)
- NMS – 14 (82%)
- Flu vaccination – 11 (65%)
- SAC – none
- Hypertension case-finding service – 10 (59%)

There is currently no data for the other Advanced Services either due to no provision or delayed implementation.

#### **6.6.2.4 Improvements and better access: gaps in provision**

The Steering Group considers it is those services provided in addition to those considered Necessary for the purpose of this PNA that should reasonably be regarded as providing either an improvement or better access to pharmaceutical provision. This includes Enhanced and Locally Commissioned Services, which are described in [Sections 6.4](#) and [6.5](#).

Regarding access to **Enhanced Services**:

- 12 pharmacies (71%) provide the London Vaccination Service
- 4 pharmacies (24%) provide the COVID-19 vaccination service

- No pharmacy provides bank holiday provision (this is provided from other localities for the whole HWB area)

Regarding access to **Locally Commissioned Services** within the 17 pharmacies:

- 2 pharmacies (12%) provide the access to palliative medicines service commissioned via the CCG (this is a joint service with providers in neighbouring localities and HWBs)
- 2 pharmacies (12%) provide EHC
- 5 pharmacies (29%) provide the supervised C-19 LFT service
- 3 pharmacies (18%) provides the supervised consumption service
- 3 pharmacies (18%) provide the needle exchange service

Ill health and the causes of ill health are discussed in [Section 6.1](#) and expanded upon in [Section 6.8](#) regarding improvements and better access to pharmacy services across Ealing.

Ealing locality does not have any significant adverse variances in health identified when compared with the Ealing and national averages either for death or hospitalisation (except Cleveland ward, which has an all-cause SAR of 104.1).

There is no evidence to suggest there is a gap in service that would equate to the need for access to Necessary Services outside normal hours.

**No gaps have been identified that if provided either now or in the future (over the next three years), would secure improvements or better access to services in Ealing locality.**

### 6.6.3 Greenford

#### 6.6.3.1 Necessary Services: current provision

Greenford has a population of 45,800 and lies to the north of Ealing.

There are ten community pharmacies in Greenford and the estimated average number of community pharmacies per 100,000 resident population is 21.8, similar to the England average of 20.6. In addition, there is one DSP in Greenford.

Of the 10 community pharmacies:

- 4 pharmacies (40%) are open after 6.30 pm on weekdays
- 8 pharmacies (80%) are open on Saturdays
- 3 pharmacies (30%) are open on Sundays
- 9 hold a standard 40-core hour contract, while 1 holds a 100-core hour contract

There are also a number of accessible providers open in neighbouring localities and HWB areas.

#### 6.6.3.2 Necessary Services: gaps in provision

There is no specific information on housing developments or population growth by locality. Assuming population growth of 1.6% during the three-year period of the PNA, there would not be a significant impact on the provision of Necessary Services.

There are pharmacies open beyond what may be regarded as normal hours in that they provide pharmaceutical services during supplementary hours in the evening during the week and are open on Saturday and Sunday.

There are other pharmacies located in adjacent localities and HWB areas that are easily accessible.

Generally, there is good pharmaceutical service provision across Greenford.

**No gaps in the provision of Necessary Services have been identified for Greenford.**

### 6.6.3.3 Other relevant services: current provision

Table 32 shows the pharmacies providing Advanced and Enhanced Services in Greenford. Regarding Advanced Services that are considered relevant, there are the following numbers of providers (based on 10 community pharmacies, as the DSP does not provide any of these services):

- CPCS – 9 (90%)
- NMS – 9 (90%)
- Flu vaccination – 9 (90%)
- SAC – not provided
- Hypertension case-finding service – 5 (50%)

There is currently no data for the other Advanced Services either due to no provision or delayed implementation.

### 6.6.3.4 Improvements and better access: gaps in provision

The Steering Group considers it is those services provided in addition to those considered Necessary for the purpose of this PNA that should reasonably be regarded as providing either an improvement or better access to pharmaceutical provision. This includes Enhanced and Locally Commissioned Services, which are described in [Sections 6.4](#) and [6.5](#).

Regarding access to **Enhanced Services**:

- 9 pharmacies (90%) provide the London Vaccination Service
- 1 pharmacy (10%) provides the COVID-19 vaccination service
- No pharmacy provides bank holiday provision (this is provided from other localities for the whole HWB area)

Regarding access to **Locally Commissioned Services** (based on 10 community pharmacies as the DSP does not provide any of these services):

- 1 pharmacy (10%) provides the access to palliative medicines service commissioned via the CCG (this is a joint service with providers in neighbouring localities and HWB areas)

- 2 pharmacies (20%) provide EHC
- 3 pharmacies (30%) provide the supervised C-19 LFT service
- No pharmacies provide supervised consumption service
- No pharmacies provide the needle exchange service

Ill health and the causes of ill health are discussed in [Section 6.1](#) and expanded upon in [Section 6.8](#) regarding improvements and better access to pharmacy services across Ealing.

Greenford has few significant adverse variances in health identified when compared with the Ealing and national averages:

- There are higher all-cause SAR in the under-75s across Greenford
- There are high levels of admissions for COPD specifically in Greenford Broadway

Consideration should be given to incentives for further uptake of services from current providers and extending provision through community pharmacies. Ealing does have higher than average levels of drug misuse and, while there are no providers in Greenford for some services, they are available in neighbouring localities.

There is no evidence to suggest there is a gap in service that would equate to the need for access to Necessary Services outside normal hours.

**No gaps have been identified that if provided either now or in the future (over the next three years), would secure improvements or better access to services in Greenford.**

## 6.6.4 Hanwell

### 6.6.4.1 Necessary Services: current provision

Hanwell has a population of 27,700 and lies in the centre of Ealing.

There are seven community pharmacies in Hanwell and the estimated average number of community pharmacies per 100,000 resident population is 25.3, significantly higher than the England average of 20.6.

Of the 7 community pharmacies:

- 1 pharmacy (14%) is open after 6.30 pm on weekdays
- 6 pharmacies (86%) are open on Saturdays
- 1 pharmacy (14%) is open on Sundays
- All 7 hold a standard 40-core hour contract

There are also a number of accessible providers open in neighbouring localities and HWB areas.

### 6.6.4.2 Necessary Services: gaps in provision

There is no specific information on housing developments or population growth by locality. Assuming population growth of 1.6% during the three-year period of the PNA, there would not be a significant impact on the provision of Necessary Services.

There are pharmacies open beyond what may be regarded as normal hours, in that they provide pharmaceutical services during supplementary hours in the evening during the week and are open on Saturday and Sunday.

There are other pharmacies located in adjacent localities and HWB areas that are easily accessible.

There is good pharmaceutical service provision across Hanwell.

**No gaps in the provision of Necessary Services have been identified for Hanwell.**

#### 6.6.4.3 Other relevant services: current provision

Table 32 shows the pharmacies providing Advanced and Enhanced Services in Hanwell. Regarding Advanced Services that are considered relevant; there are the following numbers of providers

- CPCS – 5 (71%)
- NMS – 6 (86%)
- Flu vaccination – 4 (57%)
- SAC – no pharmacy provides this service
- Hypertension case-finding service – 4 (57%)

There is currently no data for the other Advanced Services, either due to no provision or delayed implementation.

#### 6.6.4.4 Improvements and better access: gaps in provision

The Steering Group considers it is those services provided in addition to those considered Necessary for the purpose of this PNA that should reasonably be regarded as providing either an improvement or better access to pharmaceutical provision. This includes Enhanced and Locally Commissioned Services, which are described in [Sections 6.4](#) and [6.5](#).

Regarding access to **Enhanced Services**:

- 6 pharmacies (86%) provide the London Vaccination Service
- 1 pharmacy (14%) provides the COVID-19 vaccination service
- 1 pharmacy (14%) provides bank holiday provision for the whole HWB area

Regarding access to **Locally Commissioned Services** within the 7 pharmacies:

- 1 pharmacy (14%) provides the access to palliative medicines service commissioned via the CCG (this is a joint service with providers in neighbouring localities and HWB areas)

No pharmacies provide EHC, supervised consumption service or the needle exchange service. These services are available in the neighbouring localities of Ealing and Southall.

Ill health and the causes of ill health are discussed in [Section 6.1](#) and expanded upon in [Section 6.8](#) regarding improvements and better access to pharmacy services across Ealing.

Hanwell does have significantly higher levels of hospital admission for all causes compared with the Ealing and national averages:

Consideration should be given to incentives for further uptake from current providers and extending provision through community pharmacies, for example implementation of the recently introduced Advanced Services – hypertension case-finding service and stop smoking Advanced Service.

There is no evidence to suggest there is a gap in service that would equate to the need for access to Necessary Services outside normal hours.

**No gaps have been identified that if provided either now or in the future (over the next three years), would secure improvements or better access to services in Hanwell.**

## 6.6.5 Northolt

### 6.6.5.1 Necessary Services: current provision

Northolt has a population of 30,200 and lies to the north-west of Ealing. It has some of the highest areas of deprivation in Ealing.

There are four community pharmacies in Northolt and the estimated average number of community pharmacies per 100,000 resident population is 13.2, significantly lower than the England average of 20.6.

Of the 4 community pharmacies:

- 1 pharmacy (25%) is open after 6.30 pm on weekdays
- 4 pharmacies (100%) are open on Saturdays
- No pharmacies are open on Sundays
- All 4 hold a standard 40-core hour contract

There are also a number of accessible providers open in neighbouring localities and HWB areas.

### 6.6.5.2 Necessary Services: gaps in provision

There is no specific information on housing developments or population growth by locality. Assuming population growth of 1.6% during the three-year period of the PNA there would be a reduction in the ratio of pharmacies per 100,000 population to 13.0.

There are pharmacies open beyond what may be regarded as normal hours in that they provide pharmaceutical services during supplementary hours in the evening during the week and are open on Saturday. There are pharmacies open on a Sunday in the neighbouring localities of Greenford and Southall.

There are other pharmacies located in adjacent localities and HWB areas that are easily accessible.

There is adequate pharmaceutical service provision across Northolt.

**No gaps in the provision of Necessary Services have been identified for Northolt.**

### 6.6.5.3 Other relevant services: current provision

Table 32 shows the pharmacies providing Advanced and Enhanced Services in Northolt. Regarding Advanced Services that are considered relevant, there are the following numbers of providers:

- CPCS – 2 (50%)
- NMS – 4 (100%)
- Flu vaccination – 3 (75%)
- SAC – no pharmacy provides this service
- Hypertension case-finding service – 1 (25%)

There is currently no data for the other Advanced Services either due to no provision or delayed implementation.

### 6.6.5.4 Improvements and better access: gaps in provision

The Steering Group considers it is those services provided in addition to those considered Necessary for the purpose of this PNA that should reasonably be regarded as providing either an improvement or better access to pharmaceutical provision. This includes Enhanced and Locally Commissioned Services, which are described in [Sections 6.4](#) and [6.5](#).

Regarding access to **Enhanced Services**:

- 4 pharmacies (100%) provide the London Vaccination Service
- 1 pharmacy (25%) provides the COVID-19 vaccination service
- No pharmacy provides bank holiday provision (this is provided from other localities for the whole HWB area)

Regarding access to **Locally Commissioned Services** within the 4 pharmacies:

- 1 pharmacy (25%) provides the access to palliative medicines service commissioned via the CCG (this is a joint service with providers in neighbouring localities and HWB areas)
- 1 pharmacy (25%) provides EHC
- None provide the supervised C-19 LFT service
- 2 pharmacies (50%) provides the supervised consumption service
- 2 pharmacies (50%) provide the needle exchange service

Ill health and the causes of ill health are discussed in [Section 6.1](#) and expanded upon in [Section 6.8](#) regarding improvements and better access to pharmacy services across Ealing.

Northolt does have some significant adverse variances in health identified when compared with the Ealing and national averages:

- Northolt had significantly more emergency admissions than expected for all causes, CHD, COPD and stroke
- The SMR for Northolt West End under-75s is 118.2
- The SMR for under-75s circulatory diseases in Northolt West End is 154.4
- Northolt had a higher obesity prevalence rate than the England average among children in Reception and Year 6

Consideration should be given to incentives for further uptake from current providers and extending provision through community pharmacies. Implementation of the recently introduced Advanced Services – hypertension case-finding service and stop smoking Advanced Service – should be considered, based on the health issues identified above.

There is no evidence to suggest there is a gap in service that would equate to the need for access to Necessary Services outside normal hours.

**No gaps have been identified that if provided either now or in the future (over the next three years), would secure improvements or better access to services in Northolt.**

## 6.6.6 Perivale

### 6.6.6.1 Necessary Services: current provision

Perivale has a population of 15,700 and lies to the north of Ealing.

There are three community pharmacies in Perivale and the estimated average number of community pharmacies per 100,000 resident population is 19.1, similar to the England average of 20.6.

There are two DSPs in Perivale, which make up 40% of the contractors in the locality. For the purposes of the discussion below, the focus is on the service provision from the three community pharmacies, as the DSPs do not provide face-to-face Necessary Services on their premises. One DSP does provide the NMS and this is reflected in the narrative.

Of the 3 community pharmacies:

- All 3 pharmacies (100%) are open after 6.30 pm on weekdays
- All 3 pharmacies (100%) are open on Saturdays
- 1 pharmacy (33%) is open on Sundays
- All 3 hold a standard 40-core hour contract

There are also a number of accessible providers open in neighbouring localities and HWB areas.

### 6.6.6.2 Necessary Services: gaps in provision

There is no specific information on housing developments or population growth by locality. Assuming population growth of 1.6% during the three-year period of the PNA there would not be a significant impact on the provision of Necessary Services.

There are pharmacies open beyond what may be regarded as normal hours in that they provide pharmaceutical services during supplementary hours in the evening during the week and are open on Saturday and Sunday.

There are other pharmacies located in adjacent localities and HWB areas that are easily accessible.

There is adequate pharmaceutical service provision across Perivale.

**No gaps in the provision of Necessary Services have been identified for Perivale.**

### 6.6.6.3 Other relevant services: current provision

Table 32 shows the pharmacies providing Advanced and Enhanced Services in Perivale. Regarding Advanced Services that are considered relevant; there are the following numbers of providers (based on 3 community pharmacies, as only one DSP provides the NMS service#):

- CPCS – 3 (100%)
- NMS – 4<sup>#</sup>
- Flu vaccination – 2 (67%)
- SAC – no pharmacy provides this service
- Hypertension case-finding service – 2 (67%)

There is currently no data for the other Advanced Services either due to no provision or delayed implementation.

### 6.6.6.4 Improvements and better access: gaps in provision

The Steering Group considers it is those services provided in addition to those considered Necessary for the purpose of this PNA that should reasonably be regarded as providing either an improvement or better access to pharmaceutical provision. This includes Enhanced and Locally Commissioned Services, which are described in [Sections 6.4](#) and [6.5](#).

Regarding access to **Enhanced** Services:

- 2 pharmacies (67%) provide the London Vaccination Service
- No pharmacy provides the COVID-19 vaccination service
- No pharmacy provides bank holiday provision (this is provided from other localities for the whole HWB area)

Regarding access to **Locally Commissioned Services** within the three community pharmacies:

- 1 pharmacy (33%) provides the access to palliative medicines service commissioned via the CCG (this is a joint service with providers in neighbouring localities and HWB areas)

No pharmacies provide EHC, the supervised consumption service or the needle exchange service. These services are available in the neighbouring locality of Ealing and some services are available in Greenford.

Ill health and the causes of ill health are discussed in [Section 6.1](#) and expanded upon in [Section 6.8](#) regarding improvements and better access to pharmacy services across Ealing.

Perivale has better than average health indicators, with an all-cause SMR of 78.0. The only adverse variance when compared with national averages is a significantly higher level of hospital admission for CHD.

Consideration should be given to incentives for further uptake from current providers and extending provision through community pharmacies. Implementation of the recently introduced Advanced Services – hypertension case-finding service and stop smoking Advanced Service – should be considered due to the prevalence of CHD, as been identified above.

There is no evidence to suggest there is a gap in service that would equate to the need for access to Necessary Services outside normal hours.

**No gaps have been identified that if provided either now or in the future (over the next three years), would secure improvements or better access to services in Perivale.**

## 6.6.7 Southall

### 6.6.7.1 Necessary Services: current provision

Southall has a population of 70,600, making it the most populated locality in Ealing. It lies to the south of Ealing and has some areas of the highest deprivation in Ealing. The highest proportions of people in Ealing who cannot speak English well or at all are found in the Southall locality; in some wards this is over 15%.

There are 19 community pharmacies in Southall and the estimated average number of community pharmacies per 100,000 resident population is 28.3, significantly higher than the England average of 20.6.

Of the 19 community pharmacies:

- 18 pharmacies (95%) are open after 6.30 pm on weekdays
- 15 pharmacies (79%) are open on Saturdays
- 6 pharmacies (32%) are open on Sundays

- 16 hold a standard 40-core hour contract, while 3 hold a 100-core hour contract

There are also a number of accessible providers open in neighbouring localities and HWB areas.

#### **6.6.7.2 Necessary Services: gaps in provision**

There is no specific information on housing developments or population growth by locality. Assuming population growth of 1.6% during the three-year period of the PNA, there would not be a significant impact on the provision of Necessary Services.

There are pharmacies open beyond what may be regarded as normal hours in that they provide pharmaceutical services during supplementary hours in the evening during the week and are open on Saturday and Sunday. The provision of these services is likely to support other neighbouring localities where there are fewer providers.

There is very good pharmaceutical service provision across Southall.

**No gaps in the provision of Necessary Services have been identified for Southall.**

#### **6.6.7.3 Other relevant services: current provision**

Table 32 shows the pharmacies providing Advanced and Enhanced Services in Southall. Regarding Advanced Services that are considered relevant, there are the following numbers of providers

- CPCS – 15 (79%)
- NMS – 16 (84%)
- Flu vaccination 15 (79%)
- SAC – no pharmacy provides this service
- Hypertension case-finding service – 7 (37%)

There is currently no data for the other Advanced Services either due to no provision or delayed implementation.

#### **6.6.7.4 Improvements and better access: gaps in provision**

The Steering Group considers it is those services provided in addition to those considered Necessary for the purpose of this PNA that should reasonably be regarded as providing either an improvement or better access to pharmaceutical provision. This includes Enhanced and Locally Commissioned Services, which are described in [Sections 6.4](#) and [6.5](#).

Regarding access to **Enhanced Services**:

- 14 pharmacies (74%) provide the London Vaccination Service
- No pharmacy provides the COVID-19 vaccination service
- No pharmacy provides bank holiday provision (this is provided from other localities for the whole HWB area)

Regarding access to **Locally Commissioned Services** within the 19 pharmacies:

- 2 pharmacies (11%) provide the access to palliative medicines service commissioned via the CCG (this is a joint service with providers in neighbouring localities and HWB areas)
- 1 pharmacy (5%) provides EHC
- 3 pharmacies (16%) provide the supervised C-19 LFT service
- 4 pharmacies (21%) provides the supervised consumption service
- 2 pharmacies (11%) provide the needle exchange service

Ill health and the causes of ill health are discussed in [Section 6.1](#) and expanded upon in [Section 6.8](#) regarding improvements and better access to pharmacy services across Ealing.

Southall can be seen to have the greatest prevalence of ill health and has many significant adverse variances identified when compared with the Ealing and national averages:

- Norwood Green is the only ward with a lower female life expectancy rate (81.5 years) than the England average
- Southall area has the highest ratio of obese children in both Reception and Year 6
- The all-cause SMR for Norwood Green is 112.7 and the SMR for COPD is 131.6
- Dormers Wells, Southall Broadway and Southall Green all have a higher SMR for circulatory disease (as high as 220.3 in Southall Broadway)
- There are significantly higher levels of emergency hospital admissions in Southall in all wards for all-cause, CHD, stroke and myocardial infarction (but not COPD)

Consideration should be given to incentives for further uptake from current providers and extending provision through community pharmacies. Implementation of the recently introduced Advanced Services – hypertension case-finding service and stop smoking Advanced Service – should be considered, based on the information identified above.

There is no evidence to suggest there is a gap in service that would equate to the need for access to Necessary Services outside normal hours.

**No gaps have been identified that if provided either now or in the future (over the next three years), would secure improvements or better access to services in Southall.**

## 6.7 Necessary Services: gaps in provision in Ealing

For the purposes of the PNA **Necessary Services** for Ealing are:

- All **Essential Services**

The following **Advanced Services** are considered **relevant**:

- CPCS
- NMS
- Flu vaccination
- AUR

- SAC
- Hepatitis C testing service
- Hypertension case-finding service
- Stop smoking Advanced Service
- C-19 LFD distribution service (stopped)
- Pandemic delivery service (stopped)

Ealing HWB has identified **Enhanced** Services as pharmaceutical services that secure improvements or better access, or that have contributed towards meeting the need for pharmaceutical services in the HWB area.

Ealing HWB has identified **Locally Commissioned** Services that secure improvements or better access or have contributed towards meeting the need for pharmaceutical services in the HWB area.

The following have been considered when assessing the provision of Necessary Services in Ealing and each of the seven localities:

- The health needs of the population of Ealing locally from the HWB and nationally from the NHS LTP
- IMD and deprivation by locality
- Population changes at HWB level ([Section 2](#))
- [Section 3.1.3](#) discusses access to community pharmacies including:
  - Driving: 95% of the population can drive to a pharmacy within 2 minutes (100% within 3 minutes)
  - Walking: 89% of the population can walk to a pharmacy within 10 minutes (99.9% within 20 minutes)
- The location of pharmacies the Ealing ([Section 3](#), Figure 7)
- The number, distribution and opening times of pharmacies within each of the seven localities and across the whole of Ealing (Appendix A)
- Results of the public questionnaire ([Section 5](#) and Appendix H)
- Results of the contractor questionnaire (Appendix I)

Over the next ten-year period there is planned population growth of 4.8% within Ealing. This information is not provided by locality.

There are some localities with limited or no opening outside of 'normal' hours, but the short travel times within Ealing mean that services can be easily accessed from pharmacies in neighbouring localities. In Ealing, 49% of pharmacies are open later than 6.30 pm on weekdays, with 90% of community pharmacies open on Saturdays and 21% open on Sundays.

There is adequate provision of Necessary Services within Ealing.

## 6.8 Improvements and better access: gaps in provision in Ealing

The Steering Group considers it is those services provided in addition to those considered Necessary for the purpose of this PNA that should reasonably be regarded as providing either an improvement or better access to pharmaceutical provision. This includes Advanced, Enhanced and Locally Commissioned Services, which are described in [Sections 6.3 to 6.5](#).

The PNA recognises that any addition of pharmaceutical services by location, provider, hours or services should be considered, however, a principle of proportionate consideration should apply.

The health needs of the population of Ealing were outlined in [Section 2](#) and summarised in [Section 6.1](#). Ealing has very high population density and a slightly higher level of deprivation than the England average.

Overall, when compared with England and regardless of age, Ealing had significantly lower ratios of mortality from all-causes, all cancers and all respiratory diseases, whilst the mortality ratios for all circulatory diseases were similar.

The highest risk factors for causing death and disease for the Ealing population are summarised below; for locality information see [Section 6.6](#).

Factor or area of ill health:

- All-cause emergency hospital admissions
- Diabetes (increased prevalence 9%)
- STIs & sexual health
- Flu vaccine uptake (71.4%)
- Obesity in children
- COVID-19 infections and mortality
- Hospital admissions related to alcohol
- Drug misuse
- Palliative care hospital deaths

Should these be priority target areas for commissioners, they may want to consider the current provision and uptake of services from community pharmacies.

The results of the two responses to the commissioner questionnaire can be seen in Appendix J. There were some services identified as 'would consider commissioning' from community pharmacies, including alcohol screening, hepatitis vaccinations, asthma and hypertension.

Up to 89% of the 39 contractor responses (Appendix I) to the question 'Which of the following other services does the pharmacy provide, or would be willing to provide?' indicated that they would be willing to provide disease-specific services, screening and additional vaccination services if commissioned (varied by disease).

There is good access to the Advanced Services, e.g. NMS and CPCS, with 82% and 79% of community pharmacies providing these services respectively across Ealing. The London Vaccination Enhanced Service is provided by 78% of community pharmacies.

While the uptake of existing services (e.g. NMS, CPCS) has been difficult to assess completely, methods to enhance the uptake should be considered, including awareness campaigns (healthcare professionals and public) and gaining a clear understanding of the COVID-19 pandemic impact. The public questionnaire does indicate a lack of awareness of some of these services from community pharmacies ([Section 5.6](#)).

Consideration should be given to incentives for further uptake from current providers and extending provision through community pharmacies. Delivery of the recently implemented Advanced Services – stop smoking and hypertension case-finding service – would seem apt. Where applicable, all pharmacies and pharmacists should be encouraged to become eligible to deliver Advanced Services in all pharmacies across the Ealing. This will mean that more eligible patients are able to access and benefit from these services.

The public questionnaire did not record any specific themes relating to pharmacy opening times ([Section 5](#)). This and other information on current provision allows us to conclude, therefore, that there is no significant information to indicate there is a gap in the current provision of pharmacy opening times.

The same conclusion is reached in considering whether there are any future specified circumstance that would result in creating a gap in pharmaceutical provision at certain times, based upon the current information and evidence available.

It is anticipated that, in all cases, pharmaceutical service providers will make reasonable adjustments under the Equality Act 2010 to ensure services are accessible to all populations. The PNA was not provided with any evidence to identify a gap in service provision for any specific population.

The impact of the COVID-19 pandemic on service provision from community pharmacies has been significant during the life of the previous PNA:

- New Advanced Services have had their implementation delayed
- Community pharmacy priorities have been centred on pandemic service delivery, e.g. LFD distribution and COVID-19 vaccination
- Pharmacies have seen significantly increased demand for existing services, e.g. repeat dispensing

The successful implementation of new Advanced and Enhanced Services to support the pandemic response is an indicator that implementation of additional new services from community pharmacies in the future is possible.

The PNA Steering Group recognises that there are potential opportunities to commission services from community pharmacy or other healthcare providers that would promote health and wellbeing, address health inequalities and reduce pressures elsewhere in the health system. Where the potential exists for community pharmacies to contribute to the health and wellbeing of the population of Ealing, this has been included within the document. Appendix O discusses some possible services that could fulfil these criteria.

While no gaps in pharmaceutical service provision have been identified, the Steering Group recognises that the burden of health needs in Ealing will increase as the population grows and ages and would welcome proactive proposals from commissioners, including NHSE&I and all CCGs to commission pharmacy services that meet local needs but are beyond the scope of the PNA.

## Section 7: Conclusions

The HWB provides the following conclusions and recommendations on the basis that funding is at least maintained at current levels and or reflects future population changes.

The PNA is required to clearly state what is considered to constitute Necessary Services as required by paragraphs 1 and 3 of Schedule 1 to the Pharmaceutical Regulations 2013.

For the purposes of this PNA, Necessary Services for Ealing HWB are defined as Essential Services.

Other Advanced Services are considered relevant as they contribute toward improvement in provision and access to pharmaceutical services.

For the purpose of this PNA, Enhanced Services are defined as pharmaceutical services that secure improvements or better access to or that have contributed towards meeting the need for pharmaceutical services in Ealing.

Locally Commissioned Services are those that secure improvements or better access to or that have contributed towards meeting the need for pharmaceutical services in Ealing, and are commissioned by the CCG or local authority, rather than NHSE&I.

The assessment concludes there is adequate provision and access to pharmaceutical services across the whole of Ealing. However, Ealing HWB will monitor the any changes to population due to housing and regeneration project and therefore consider the impact of any changes in this area in the future that may provide evidence that a need exists. Any required amendments should made through the three-year life cycle of this report.

### 7.1 Current provision of Necessary Services

#### Necessary Services – gaps in provision

Necessary Services are Essential Services that are described in [Section 6.2](#).

Access to Necessary Service provision in Ealing is provided by locality in Section 6.6.

In reference to [Section 6](#), and as required by paragraph 2 of schedule 1 to the Pharmaceutical Regulations 2013:

#### 7.1.1 Necessary Services – normal working hours

**There is no current gap in the provision of Necessary Services during normal working hours across Ealing to meet the needs of the population.**

### 7.1.2 Necessary Services – outside normal working hours

**There are no current gaps in the provision of Necessary Services outside normal working hours across Ealing to meet the needs of the population.**

### 7.2 Future provision (over the next three years), of Necessary Services

**No gaps have been identified in the need for pharmaceutical services in specified future circumstances across the whole of Ealing (over the next three years).**

### 7.3 Improvements and better access – gaps in provision

Advanced Services are considered relevant as they contribute toward improvement in provision and access to pharmaceutical services.

Enhanced Services are defined as pharmaceutical services that secure improvements or better access to or that have contributed towards meeting the need for pharmaceutical services in Ealing.

Locally Commissioned Services are those that secure improvements or better access to or that have contributed towards meeting the need for pharmaceutical services in Ealing, and are commissioned by the CCG or local authority, rather than NHSE&I.

#### 7.3.1 Current and future access to Advanced Services

Details of the services are outlined in [Section 6.3](#) and the provision in each locality discussed in [Section 6.6](#).

[Section 6.8](#) discusses improvements and better access to services in relation to the health needs of Ealing.

There are no gaps in the provision of Advanced Services across the whole of Ealing.

Appendix O discusses the opportunities that may be available for expansion of existing services or delivery of new services from community pharmacies that may have benefit to the population of Ealing.

**There are no gaps in the provision of Advanced Services at present or in the future (over the next three years), that would secure improvements or better access to Advanced Services across the whole of Ealing.**

### 7.3.2 Current and future access to Enhanced Services

Details of the services are outlined in [Section 6.4](#) and the provision in each locality discussed in [Section 6.6](#).

[Section 6.8](#) discusses improvements and better access to services in relation to the health needs of Ealing.

**No gaps have been identified that if provided either now or in the future (over the next three years), would secure improvements or better access to Enhanced Services across the whole of Ealing**

### 7.3.3 Current and future access to Locally Commissioned Services (LCS)

With regard to LCS, the PNA is mindful that only those commissioned by NHSE&I are regarded as pharmaceutical services. The absence of a particular service being commissioned by NHSE&I is in some cases addressed by a service being commissioned through the council or local authority; these services are described in [Section 6.5](#) and their provision by locality discussed in [Section 6.6](#).

[Section 6.8](#) discusses improvements and better access to LCS in relation to the health needs of Ealing.

Appendix O discusses the opportunities that may be available for expansion of existing services or delivery of new services from community pharmacies that may have benefit to the population of Ealing.

Based on current information the Steering Group has not considered that any of these LCS should be decommissioned, or that any of these services should be expanded.

A full analysis has not been conducted on which LCS might be of benefit as this is out of the scope of the PNA.

**Based on current information no gaps have been identified in respect of securing improvements or better access to Locally Commissioned Services either now or in specific future (over the next three years) circumstances across Ealing to meet the needs of the population.**

## Appendix A: List of pharmaceutical service providers in Ealing

### Acton locality

Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NHSE&I Advanced										NHSE&I Enhanced			CCG		LA						
										NMS	AUR	SAC	CPCS	Hep C testing	Flu vaccination	C-19 LFD Distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu vaccination	Bank Holidays	Anticipatory medicines	EHC	Supervised consumption	Needle exchange	C-19 test					
Crossbells Chemist	FA252	Community	131 The Vale, Acton, London	W3 7RQ	09:00-18:30	09:00-13:00	Closed	-	-	-	-	-	-	Y	-	Y	Y	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Zahra Pharmacy	FC091	Community	72 High Street, Acton, London	W3 6LE	06:30-22:30	08:00-20:00	09:00-17:00	Y	-	-	-	-	-	Y	-	Y	Y	-	-	-	-	Y	-	Y	-	-	-	-	-	-	-
Lloyds Pharmacy	FDD32	Community	1 Crown Street, Acton, London	W3 8SA	08:30-18:45	08:45-17:00	Closed	-	-	Y	-	Y	Y	-	Y	Y	-	-	-	-	Y	-	-	-	Y	Y	-	-	-	-	-
Jallas Chemist	FDR11	Community	311-313 Horn Lane, Acton, London	W3 0BU	09:00-13:00, 14:00-18:30	09:00-18:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	-	-	Y	Y	-	-	-	-	-	-	-	-	-
Boots	FEL12	Community	Unit 17, The Oaks Shopping Centre, Acton High Street, London	W3 6RE	09:00-18:00	09:00-18:00	Closed	-	-	Y	-	-	-	-	Y	Y	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-
Banks Chemist	FLD79	Community	59 Old Oak, Common Lane, East Acton, London	W3 7DD	09:00-18:30 (Thu 09:00-18:00)	09:00-14:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	-	Y	-	Y	-	-	-	-	-	-	-	-
Conway Chemist	FLW42	Community	8 Station Parade, West Acton, London	W3 0DS	09:00-18:30 (Wed 09:00-18:00)	09:00-13:30	Closed	-	-	Y	-	-	-	-	Y	Y	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-
Zee Pharmacy	FQ169	DSP	8E Europa Studios, Victoria Road, London	NW10 6ND	09:00-17:00	Closed	Closed	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Horn Lane Pharmacy	FQE36	Community	142 Horn Lane, Acton, London	W3 6PG	09:00-18:30 (Thu 09:00-17:30)	09:30-14:00	Closed	-	-	Y	-	-	Y	-	-	Y	-	-	-	-	-	-	-	-	-	Y	Y	-	-	-	-
Dillons Chemist	FV837	Community	17 Church Road, Acton, London	W3 8PU	09:00-18:00 (Wed 09:00-17:00)	09:00-13:00	Closed	-	-	-	-	-	Y	-	Y	Y	Y	-	-	-	Y	-	-	-	-	-	-	-	-	-	-
SR Pharmacy	FX732	Community	155 High Street, Acton, London	W3 6LP	09:00-18:00	09:00-15:00	Closed	-	-	Y	-	-	-	-	Y	Y	Y	-	-	-	Y	-	-	Y	-	-	-	-	-	-	-
Alisha Pharmacy	FXY41	Community	257 Acton Lane, Chiswick	W4 5DG	09:00-18:30 (Wed 09:00-17:00)	09:00-13:00	Closed	-	-	Y	-	-	Y	-	Y	-	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-

## Ealing locality

Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NHSE&I Advanced										NHSE&I Enhanced			CCG		LA			
										NMS	AUR	SAC	CPCS	Hep C testing	Flu vaccination	C-19 LFD Distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu vaccination	Bank Holidays	Anticipatory medicines	EHC	Supervised consumption	Needle exchange	C-19 test		
Walkers Pharmacy	FA244	Community	6 The Broadway, Gunnersbury Lane, London	W3 8HR	08:30-18:30	10:00-17:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	-	-	-	-	-	-	-	-	Y
Midhurst Chemist	FA987	Community	92 Elthorne Park Road, Ealing, London	W7 2JD	09:00-18:30 (Thu 09:00-14:00)	09:30-13:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	Y	-	-	-	-	-	-	-	-	-
Richards Pharmacy	FAH22	Community	112 South Ealing Road, London	W5 4QJ	09:00-18:00	09:00-16:00	Closed	-	-	-	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	-	-
Lewis Pharmacy	FC280	Community	36 Haven Green, Ealing, London	W5 2NX	10:00-13:30, 14:30-18:00	10:00-15:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	Y	-	-	-	-	-	-	-	-	-
John Megson's Pharmacy	FFT93	Community	15 Queens Parade, Hanger Lane, London	W5 3HU	09:00-13:00, 14:00-18:00 (Thu-Fri 09:00-13:00, 14:00-18:30)	Closed	Closed	-	-	-	-	-	-	-	Y	Y	-	-	-	-	-	-	-	-	-	-	-	-
Superdrug Pharmacy	FGF31	Community	18-19 Broadway Shopping Centre, Ealing, London	W5 5JY	09:00-14:00, 14:30-19:00	09:00-14:00, 14:30-17:30	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	Y	-	-	-	-	-	-	-	-	-
Northfield Pharmacy	FGK24	Community	30 Northfield Avenue, London	W13 9RL	08:30-18:30 (Thu 08:30-18:00)	09:00-17:30	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	Y	-	-	-	Y	
Harbs Pharmacy	FHJ50	Community	193 South Ealing Road, Ealing, London	W5 4RH	07:00-23:00 (Mon 08:00-23:00)	07:00-22:00	11:00-17:00	Y	-	Y	-	-	Y	-	Y	Y	-	-	-	-	Y	-	-	-	-	-	-	-
Ealing Pharmacy	FHN86	Community	157 Pitshanger Lane, Ealing, London	W5 1RH	09:00-18:00	09:00-17:30	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	Y	-	-	-	-	-	-	-	-	-
Boots	FHP49	Community	Unit 36, Ealing Broadway Centre, Ealing, London	W5 5JY	09:00-19:00	09:00-18:00	11:00-17:00	-	-	Y	-	-	Y	-	Y	-	-	-	Y	Y	-	-	-	-	-	-	-	-
Mattock Lane Pharmacy	FKC09	Community	8 St. John's Parade, Mattock Lane, London	W13 9LL	08:45-19:00	09:00-17:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	Y	Y	-	Y	Y	Y	Y	Y	Y	Y
Cross Chemist	FM205	Community	5 Royal Parade, Hanger Lane, London	W5 1ET	08:30-19:00	08:30-13:00	Closed	-	-	Y	-	-	Y	-	Y	-	-	Y	Y	-	-	-	-	Y	Y	-	-	-
South Ealing Pharmacy	FPM91	Community	186 South Ealing Road, Ealing, London	W5 4RJ	08:30-18:30	09:00-14:00	Closed	-	-	-	-	-	-	-	Y	Y	Y	-	Y	Y	-	-	-	-	-	-	-	Y
Temple Pharmacy	FTF00	Community	110 Pitshanger Lane, Ealing, London	W5 1QP	09:00-18:30	09:00-18:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	Y	Y	-	-	-	-	-	-	-	-
Grosvenor House Pharmacy	FV215	Community	147 The Broadway, West Ealing, London	W13 9BE	07:00-23:00	07:00-20:00	10:00-17:00	Y	-	Y	-	-	Y	-	Y	Y	Y	-	-	-	-	-	-	Y	Y	-	-	-
Terry's Pharmacy	FW270	Community	4 Castle Hill Parade, The Avenue, London	W13 8JP	09:00-18:00	09:00-13:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	-	Y
Bramley Pharmacy	FX725	Community	261 Northfield Avenue, Ealing, London	W5 4UA	09:00-18:30 (Thu 09:00-18:00)	09:00-13:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	-	-

## Greenford locality

Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NHSE&I Advanced										NHSE&I Enhanced			CCG		LA		
										NMS	AUR	SAC	CPCS	Hep C testing	Flu vaccination	C-19 LFD Distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu vaccination	Bank Holidays	Anticipatory medicines	EHC	Supervised consumption	Needle exchange	C-19 test	
Parade Pharmacy	FDR42	Community	386 Oldfield Lane North, Greenford, Middlesex	UB6 8PU	09:00-18:00	09:00-13:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	-
Boots	FDX68	Community	Unit 11 Greenford Westway Retail Park, 1000 Greenford Road, Greenford, Middlesex	UB6 0UW	09:00-18:00	09:00-18:00	11:00-17:00	-	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	-	-	-	-	-	-
Boots	FFN11	Community	42 The Broadway, Greenford, Middlesex	UB6 9PT	09:00-18:00	09:00-18:00	11:00-17:00	-	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	-	-	-	-	-	-
Northolt Pharmacy	FGJ27	Community	Grand Union Health Centre, Taywood Road, Northolt, Middlesex	UB5 6WL	09:00-18:30	Closed	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	Y
Bright Health Pharmacy	FH357	Community	1318 Greenford Road, Greenford, Middlesex	UB6 0HL	09:00-19:00	09:00-13:00	Closed	-	-	-	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	Y
Roxanne's Pharmacy	FJJ99	Community	51 The Broadway, Greenford, Middlesex	UB6 9PN	09:00-18:00	09:00-17:30	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	Y	-	-	Y	-	-	-
Ravenor Chemist	FLK52	Community	70 The Broadway, Greenford, Middlesex	UB6 9QA	09:00-18:00	Closed	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	Y	-	-	-	-
My Own Chemist	FM850	DSP	4-5 Northolt Trading Estate, Belvue Road, Northolt, Middlesex	UB5 5QS	09:00-14:00, 14:30-17:30	Closed	Closed	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chief Cornerstone Pharmacy	FT601	Community	4 Eastmead Avenue, Greenford, Middlesex	UB6 9RA	08:30-19:00	08:30-13:00	Closed	-	-	Y	-	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-
Boots	FWX06	Community	47A-47B Oldfield Circus, Northolt, Middlesex	UB5 4RR	09:00-18:00	09:00-18:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	-	-	-	-	-	-
Ariana Pharmacy	FXX52	Community	472 Greenford Road, Greenford, Middlesex	UB6 8SQ	Mon 08:00-Wed 20:00 non stop; Thu-Fri 08:00-20:00	09:00-19:00	10:00-16:00	Y	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	Y	-	-	-	-	Y

## Hanwell locality

Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NHSE&I Advanced										NHSE&I Enhanced			CCG	LA				
										NMS	AUR	SAC	CPCS	Hep C testing	Flu vaccination	C-19 LFD distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu Vaccination	Bank holidays	Anticipatory medicines	EHC	Supervised consumption	Needle exchange	C-19 test		
Greenford Chemist	FC472	Community	340 Greenford Avenue, Hanwell, London	W7 3DA	09:00-18:00	09:00-13:00	Closed	-	-	Y	-	-	-	-	-	Y	Y		-	Y	-	-	-	-	-	-	-	-
Superdrug Pharmacy	FHY42	Community	85-87 The Broadway, Hanwell, London	W13 9BP	09:00-14:00, 14:30-18:00	09:00-14:00, 14:30-17:30	Closed	-	-	Y	-	-	Y	-	Y	Y	-		-	Y	-	-	-	-	-	-	-	-
Boots	FJ498	Community	68 The Broadway, West Ealing, London	W13 0SR	09:00-18:00	09:00-18:00	12:00-16:00	-	-	Y	-	-	Y	-	-	Y	-		-	Y	-	-	-	-	-	-	-	-
Remedy Pharmacy	FK802	Community	83 Greenford Avenue, Hanwell, London	W7 1LJ	09:00-18:30 (Wed 09:00-18:00; Thu 09:00-19:30)	10:00-13:00	Closed	-	-	Y	-	-	-	-	-	Y	Y		Y	-	Y	Y	-	-	-	-	-	-
Well Pharmacy	FL911	Community	333 Greenford Avenue, London	W7 1JH	09:00-18:00	09:00-13:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y		-	Y	-	-	-	-	-	-	-	-
Church Pharmacy	FLA36	Community	83 Uxbridge Road, Hanwell, London	W7 3ST	09:00-19:30	09:00-18:30	Closed	-	-	-	-	-	Y	-	Y	Y	-		-	Y	-	-	-	-	-	-	-	-
Touchwood Pharmacy	FWW56	Community	Hanwell Heath Centre, 20 Church Road, London	W7 1DR	09:00-18:00	Closed	Closed	-	-	Y	-	-	Y	-	Y	Y	Y		-	Y	-	-	-	-	-	-	-	-

## Northolt locality

Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NHSE&I Advanced										NHSE&I Enhanced			CCG	LA		
										NMS	AUR	SAC	CPCS	Hep C testing	Flu vaccination	C-19 LFD Distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu vaccination	Bank Holidays	Anticipatory medicines		EHC	Supervised consumption	Needle exchange
M. Gokani Chemist	FAF65	Community	32 Church Road, Northolt, Middlesex	UB5 5AB	09:00-19:00 (Wed 09:00-18:00)	09:00-14:00	Closed	-	-	Y	-	-	-	-	-	Y	Y	-	-	-	-	-	-	Y	Y	-
Alpha Chemist	FCY66	Community	480 Church Road, Northolt, Middlesex	UB5 5AU	09:00-18:00 (Wed 09:00-17:30)	09:00-13:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	Y	Y	-	-	-
Touchwood Pharmacy	FPW44	Community	493-495 Yeading Lane, Northolt, Middlesex	UB5 6LN	09:00-18:00	09:00-13:00	Closed	-	-	Y	-	-	-	-	-	Y	Y	-	Y	Y	-	-	-	Y	Y	-
Boots	FTL27	Community	5 Haydock Green, Northolt, Middlesex	UB5 4AP	09:00-18:30	09:00-17:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	-	-	-	-	-

## Perivale locality

Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NHSE&I Advanced										NHSE&I Enhanced			CCG	LA		
										NMS	AUR	SAC	CPCS	Hep C testing	Flu vaccination	C-19 LFD distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu Vaccination	Bank holidays	Anticipatory medicines		EHC	Supervised consumption	Needle exchange
Medway Pharmacy	FA150	Community	18 Medway Parade, Perivale	UB6 8HR	09:00-18:45 (Wed 09:00-14:00)	09:00-12:00	Closed	-	-	Y	-	-	Y	-	-	Y	Y	-	-	-	-	-	-	-	-	-
PPRX Ltd	FGC61	DSP	Room 112, Biz Space, 4-6 Wadsworth Road, Perivale, London	UB6 7JJ	09:00-17:00	Closed	Closed	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Watmans Pharmacy	FKP75	Community	179 Bilton Road, Perivale	UB6 7HQ	09:00-19:00	09:00-13:30	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	Y	-	-	-	-
Lloyds Direct	FN849	DSP	17 Wadsworth Road, Perivale, London	UB6 7JD	09:00-13:00, 14:00-18:00	Closed	Closed	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Tesco Pharmacy	FX886	Community	Hoover Building, Bideford Avenue, Perivale	UB6 8DW	08:00-20:00	08:00-20:00	10:00-16:00	-	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	-	-	-	-	-

## Southall locality

Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NHSE&I Advanced										NHSE&I Enhanced			CCG		LA			
										NMS	AUR	SAC	CPCS	Hep C testing	Flu vaccination	C-19 LFD Distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu vaccination	Bank Holidays	Anticipatory medicines	EHC	Supervised consumption	Needle exchange	C-19 test		
Cheema Pharmacy	FC041	Community	57 King Street, Southall	UB2 4DQ	09:00-20:00	09:00-19:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	-	-
Puri Pharmacy	FE009	Community	39 Western Road, Southall, Middlesex	UB2 5HE	09:15-19:00	Closed	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	Y	Y	Y	-	-
Tesco Pharmacy	FEM60	Community	Bulls Bridge Industrial Estate, Hayes Road, Southall	UB2 5NB	09:00-21:00	09:00-21:00	11:00-17:00	-	-	Y	-	-	Y	-	Y	Y	-	-	-	-	-	-	-	-	-	-	-	-
Kings Pharmacy	FF912	Community	50 Greenford Avenue, Southall	UB6 9AT	09:30-19:00	09:30-12:30	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	-	-
Fountain Pharmacy	FGW38	Community	43 Featherstone Road, Southall	UB2 5AB	08:00-23:00	08:00-23:00	08:00-18:00	Y	-	Y	-	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	-
Gill Chemist	FH598	Community	31-33 King Street, Southall	UB2 4DG	09:00-20:30	09:00-20:30	12:00-19:00	-	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	Y	-	-	-	-	Y	-
Anmol Pharmacy	FHD61	Community	97 North Road, Southall	UB1 2JW	07:00-23:30 (Fri 06:00-23:30)	06:00-23:30	Closed	Y	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	Y	-	-	-	-	-	-
Alchem Pharmacy	FJ580	Community	123 The Broadway, Southall	UB1 1LW	09:15-19:30 (Fri 09:15-13:00, 14:00-19:30)	10:00-18:00	Closed	-	-	-	-	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	-
Gill Chemist	FKD11	Community	79 Norwood Road, Southall	UB2 4EA	09:00-19:00	09:00-14:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	-	-	Y	-	-	-	-
Queens Pharmacy	FL684	Community	61 The Broadway, Southall	UB1 1JY	09:00-20:00	09:00-19:00	10:30-19:00	-	-	Y	-	-	-	-	Y	Y	-	-	-	Y	-	-	-	Y	Y	-	-	-
Shah Pharmacy	FLF32	Community	13 North Parade, North Road, Southall	UB1 2LF	09:00-19:00	Closed	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	-	Y	-	-	-	-	-
Sherry's Pharmacy	FQP22	Community	48 South Road, Southall	UB1 1RR	09:30-19:00	Closed	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	-	-	-	-	-	-	-
KL Pharmacy	FQQ74	Community	1-2 Tyler Road, Southall	UB2 4XQ	09:00-18:30	09:00-13:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	-	-	-	-	-	-	-
Woodland Pharmacy	FR895	Community	227 The Broadway, Southall	UB1 1ND	09:00-19:00 (Wed 09:00-17:00)	Closed	Closed	-	-	-	-	-	Y	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	-
H. J. Dixon Chemist	FTC65	Community	185 Lady Margaret Road, Southall	UB1 2PT	09:00-19:00	09:00-17:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	-	Y
Lady Margaret Pharmacy	FTX12	Community	223 Lady Margaret Road, Southall	UB1 2NH	07:00-23:00	07:00-20:00	10:00-17:00	Y	-	Y	-	-	Y	-	Y	Y	-	-	-	-	-	-	-	-	-	-	-	-
Chana Chemist	FVM26	Community	52 South Road, Southall	UB1 1RQ	09:00-21:00	09:00-20:00	10:00-19:00	-	-	Y	-	-	Y	-	-	Y	-	-	-	Y	-	-	-	-	-	-	-	-
Chana Chemist	FVN27	Community	33 High Street, Southall	UB1 3HA	09:00-19:00	10:00-16:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	-	-
Chana Chemist	FYG50	Community	251 Allenby Road, Southall	UB1 2HB	09:00-19:00	09:00-18:00	Closed	-	-	-	-	-	-	-	-	Y	Y	Y	-	-	Y	-	-	-	Y	-	-	-

## Appendix B: PNA Steering Group terms of reference

### Purpose

The Steering Group will oversee the development of and sign off the Pharmaceutical Needs Assessment (PNA) for Ealing Health and Wellbeing Board (HWB).

### Objectives

- To oversee the development of and sign off the PNA in accordance with and ensure the Ealing PNA complies with the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013.
- Ensure the PNA takes into account the local demography within the London Borough (LB) of Ealing and ascertain whether there is sufficient choice and accessibility (e.g. physical access, language etc.) with regard to obtaining pharmaceutical services.
- Ensure the PNA takes into account Ealing's JSNA and all relevant strategies and plans both in the NWL CCG and the council. These include, for example, the Children and Young People's Plan, and Health and Wellbeing Strategy.
- Ensure the consultation on the PNA meets the requirements of Regulation 8 of the Pharmaceutical Regulations 2013. In particular, ensure that both patients and the public are involved in the development of the PNA.
- Ensure all appropriate stakeholders in Ealing are aware, engaged and involved in the development of the PNA.
- Present the PNA first and final draft to the HWB.
- Publish the PNA on the council's website by October 2022.

### Governance

- The Health and Social Care Act 2012 transferred the statutory responsibility for PNAs from NHS Primary Care Trusts to HWBs from 1 April 2013, with a requirement to publish a revised assessment at least every three years.
- This Steering Group has been established to oversee the production of the 2022 PNA for LB Ealing, reporting progress and presenting the final report to the HWB on or before the March 2022 meeting.
- The HWB will be informed of progress towards the production of the PNA and relevant milestones through the HWB programme manager's quarterly updates.
- If a statement or decision from the HWB is needed in relation to the production of the draft PNA, the chair of the Steering Group is welcome to draft a formal report for consideration.

### Frequency of meetings

Meetings will be arranged at key stages of the project plan. The Steering Group will meet in summer 2022 to sign off the PNA for submission to the HWB.

### Responsibilities

- Provide a clear and concise PNA process.

- Review and validate information and data on population, demographics, pharmaceutical provision, and health needs.
- To consult with the bodies stated in Regulation 8 of Pharmaceutical Regulations 2013:
  - Any Local Pharmaceutical Committee (LPC) for its area
  - Any Local Medical Committee (LMC) for its area
  - Any persons on the pharmaceutical lists and any dispensing doctors list for its area
  - Any LPS chemist in its area
  - Any local healthwatch organisation for its area
  - Any NHS trust or NHS foundation trust in its area
  - The NHS Commissioning Board
  - Any neighbouring HWB
- Ensure that due process is followed.
- Report to HWB on both a draft and final PNA.
- HWB have delegated the responsibility to sign off the draft PNA and the final PNA to the Director of Public Health/Steering Group.
- Publish a final PNA by October 2022.

## Membership

Soar Beyond are not to be a core member however will chair the meetings. Each core member has one vote. The Director of Public Health, or a member of her team, will have the casting vote, if required. Core members may provide a deputy to meetings in their absence. The Steering Group shall be quorate with three core members in attendance, one of which must be an LPC member and one an NWL CCG representative. Non-attending members are unable to cast a vote – that vote may otherwise sway the casting decision. To be included in decision-making, members' (or their nominated deputies') attendance is essential.

Additional members (if required):

- CCG commissioning managers
- NHS trust chief pharmacists

In attendance at meetings will be representatives of Soar Beyond Ltd who has been commissioned by LB Ealing to support the development of the PNA. Other additional members may be co-opted if required.

## Membership:

Delegate	Job title	Organisation
Anna Bryden	Director of Public Health	LB Ealing Council
Rajiv Ahlawat	Strategic Intelligence & Corporate Performance Manager	LB Ealing Council
Mira Mangara	Public Health Analyst	LB Ealing Council
Joanna Sumner	Assistant Director Communities	LB Ealing Council
Cheryl Curling	Media and Communications Manager	LB Ealing Council

<b>Delegate</b>	<b>Job title</b>	<b>Organisation</b>
Keith Lewis	Head of Marketing	LB Ealing Council
Ian Oakley	Committee Liaison Executive	Ealing LMC
Dr Arim Ismail	Locum GP	Ealing LMC
Gerald Alexander	Middlesex Group of LPCs representative	Ealing, Hammersmith and Hounslow LPC
Simon Hall	Chair	Ealing Community Network (ECN)
Daniel Norman	Operations Manager	Healthwatch Ealing
Christopher Jack	Assistant Director of Primary Care Network	NWL CCG
Michelle Johnson	Equality, Diversity and Inclusion Lead for NHS in NWL	NHS
Dilo Lalande	Senior Engagement and Equalities Manager (Hounslow & Ealing)	NWL Integrated Care System and NWL CCG
Kam Grewal	Ealing Lead Pharmacist	NWL CCG
Simon Crawford	Deputy Chief Executive	London North West University Healthcare NHS Trust
Sally-Anne Kayes	Senior Commissioning Manager Market Entry/Pharmacy	NHS England and NHS Improvement – London Region
Anjna Sharma	Director of Pharmacist Services	Soar Beyond Ltd
Kajal Mistry	Associate Director	Soar Beyond Ltd
Christina Wells	Senior Project Executive	Soar Beyond Ltd

## Appendix C: Public questionnaire



### Pharmaceutical Needs Assessment 2022 Public Questionnaire Ealing Health and Wellbeing Board

Tell us what you think of pharmacy services in Ealing

We want to hear what you think of pharmacy services in the London Borough of Ealing. Everybody's views are important to ensure the pharmacy services in Ealing meet your needs. Your views will help us to develop future pharmacy services and how these are accessed.

The information you give us will enable us to:

- check whether or not our services are equally accessible to everyone who is entitled to them;
- identify and address any barriers to accessing (information about) our services;
- continually improve the services we deliver.

We would be grateful if you would take your time to answer some questions about your own experience and views. It takes between 10 and 15 minutes, depending on your answers.

**The information in the questionnaire you provide is confidential.** Please see the privacy statement below (on p 2) to understand what happens to your information and answers. Information returned in the 'A bit about you' section will be recorded separately from your questionnaire response.

This questionnaire is available in other formats upon request. If you require this, please contact:  
PNA Team, Soar Beyond Ltd, Email: [info@soarbeyond.co.uk](mailto:info@soarbeyond.co.uk) or call 01142 927 972

If you would like to complete this online please follow the link below or scan the QR code:

<https://www.surveymonkey.co.uk/r/EalingPNA2022Public>



**Closing date for this questionnaire is 31<sup>st</sup> December 2021**

Please return the questionnaire to your pharmacist or post back to:  
PNA Team, Soar Beyond Ltd, 1 Marchmont Gate, Maxted Road, Hemel Hempstead, HP2 7BE

N.B. All responses to these questions are anonymous; responses are added together and no individuals are identified. Any information provided will be treated as strictly confidential and in line with GDPR (General Data Protection Regulation). The information will be held securely and used for the purpose of planning appropriate services for all communities. It will not be passed on to any third party. For more detail on the Public Health privacy notice please visit: [https://www.ealing.gov.uk/info/201045/data\\_protection/1420/privacy\\_statement](https://www.ealing.gov.uk/info/201045/data_protection/1420/privacy_statement)

**1) Do you normally use a specific pharmacy? (Please note this question is required)**

Yes – If happy to do so, please provide the name and address below:

---

No

I prefer to use an online pharmacy – If happy to do so, please provide the website below:

---

**2) How would you rate your overall satisfaction with your regular/preferred pharmacy? (Please note this question is required)**

Excellent       Good       Fair       Poor

**3) How easy or difficult has it been to speak to your pharmacy over the last 18 months, during the pandemic? (Please note this question is required)**

Very easy     Fairly easy     Neither easy nor difficult     Fairly difficult     Very difficult

**4) On a scale from 1 to 10 (1 being not well at all and 10 being extremely well) how well does your local community pharmacy meet your needs? (Please note this question is required)**

1     2     3     4     5     6     7     8     9     10

**5) How important is each of the following aspects to you when choosing a pharmacy?**

	<b>Extremely important</b>	<b>Very important</b>	<b>Moderately important</b>	<b>Fairly important</b>	<b>Not at all important</b>
Quality of service (friendly staff, expertise)					
Convenience (e.g. location, opening times)					
Accessibility (e.g. parking, clear signage)					
Availability of medication/ services (e.g. stocks, specific services)					
Other, please specify _____					

**6)** In the last six months, how frequently have you visited/contacted (spoken to, emailed or visited in person) a pharmacy?

**For yourself:**

- Once a week or more
- Once a month
- Once every few months
- Once in six months
- I haven't visited/contacted a pharmacy in the last 6 months

**For someone else:**

- Once a week or more
- Once a month
- Once every few months
- Once in six months
- I haven't visited/contacted a pharmacy in the last 6 months

I normally prefer to use an internet/online pharmacy (An internet pharmacy is one which is operated partially or totally online where prescriptions are sent electronically and dispensed medication is sent via a courier to your home) – If happy to do so, please provide the website

---

**7)** Who do you normally visit/contact a pharmacy for? (Please select all that apply)

- Yourself     A family member     A neighbour/friend     Someone you are a carer for
- All of the above
- Other, please specify \_\_\_\_\_

**8)** If you visit/contact a pharmacy regularly *on behalf of someone else*, please give a reason why? (Please select all that apply)

- Opening hours of the pharmacy not suitable for the person
- The person can't access the pharmacy (for example due to disability/lack of transport)
- The person cannot use the delivery service
- For a child/dependant
- The person is too unwell
- The person does not have access to digital or online services
- All of the above
- Other, please specify \_\_\_\_\_

**9)** How would you usually travel to the pharmacy? (Please select one answer)

- Car     Taxi     Public transport     Walk     Bicycle     Wheelchair/mobility scooter
- I don't, someone goes for me
- I don't, I use an online pharmacy or delivery service
- I don't, I utilise a delivery service
- Other, please specify \_\_\_\_\_

*If you have answered that you don't travel to a pharmacy, please go to question 13.*

**10)** If you travel to a pharmacy, where do you travel from? (Please select all that apply)

- Home                       Work  
 Other, please specify \_\_\_\_\_

**11)** On average, how long does it take you to travel to a pharmacy? (Please select one answer)

- 0 to 15 minutes  
 16 to 30 minutes  
 Over 30 minutes

**12)** Do you face any of the following difficulties when travelling to a pharmacy? (Please select all that apply)

- Lack of parking                       Lack of suitable public transport  
 It's too far away                       Lack of disabled access/facilities  
 No, I don't face any difficulty  
 Other, please specify \_\_\_\_\_

**13)** What is the most convenient day for you to visit/contact a pharmacy? (Please select one answer)

- Monday to Friday     Saturday     Sunday     Varies     I don't mind

**14)** Is your preferred pharmacy open on the most convenient day for you?

- Yes                       No

**15)** When do you prefer to visit/contact a pharmacy? (Please select one answer)

- Morning (8 am–12 pm)                       Lunchtime (12 pm–2 pm)     Afternoon (2 pm–6 pm)  
 Early evening (6 pm–8 pm)                       Late evening (after 8 pm)     Varies  
 I don't mind/no preference

**16)** Is your preferred pharmacy open at the most convenient time for you/at your preferred time?

- Yes                       No

**17)** How frequently do you buy an over-the-counter (i.e. non-prescription) medicine from a pharmacy? (Please select one answer)

- Daily                       Weekly                       Fortnightly                       Monthly                       Yearly  
 Rarely                       Never

18) Which of the following [pharmacy services](#) are you aware that a pharmacy may provide? (Please select one answer for each service – even if you do not use the service)

Service	Are you aware that a pharmacy may provide this?	
Advice from your pharmacist	<input type="checkbox"/> Yes	<input type="checkbox"/> No
COVID-19 lateral flow device (LFD) distribution service	<input type="checkbox"/> Yes	<input type="checkbox"/> No
COVID-19 asymptomatic testing using a lateral flow device (LFD)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
COVID-19 vaccination services	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Flu vaccination services	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Buying over the counter medicines	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Dispensing prescription medicines	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Dispensing appliances	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Repeat dispensing services	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Home delivery and prescription collection services	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Medication review	<input type="checkbox"/> Yes	<input type="checkbox"/> No
New medicine service	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Discharge from hospital Medicines Service	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Emergency supply of prescription medicines	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Disposal of unwanted medicines	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Appliance Use Review	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Community Pharmacist Consultation Service (urgent care referral)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Hepatitis testing service	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Stoma appliance customisation service	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Needle exchange	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Stopping smoking / nicotine replacement therapy	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Sexual health services (chlamydia testing /treating, condom distribution, emergency contraception)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Immediate access to specialist drugs e.g. palliative care medicines	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Supervised consumption of methadone and buprenorphine	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Travel immunisation (some pharmacies)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Other, please specify _____	<input type="checkbox"/> Yes	<input type="checkbox"/> No

19) Which of the following [pharmacy services](#) would you like to see always provided by your pharmacy? (Please select one answer for each service)

Service	Would you like to see this service always provided?
Advice from your pharmacist	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
COVID-19 lateral flow device (LFD) distribution service	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
COVID-19 asymptomatic testing using a lateral flow device (LFD)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
COVID-19 vaccination services	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Flu vaccination services	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Buying over the counter medicines	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Dispensing medicines	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Dispensing appliances	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Repeat dispensing services	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Home delivery and prescription collection services	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Medication review	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
New medicine service	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Discharge from hospital Medicines Service	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Emergency supply of prescription medicines	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Disposal of unwanted medicines	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Appliance Use Review	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Community Pharmacist Consultation Service (urgent care referral)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Hepatitis testing service	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Stoma appliance customisation service	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Needle exchange	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Stopping smoking / nicotine replacement therapy	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Sexual health services (chlamydia testing /treating, condom distribution, emergency contraception)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Immediate access to specialist drugs e.g. palliative care medicines	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Supervised consumption of methadone and buprenorphine	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Travel immunisation (some pharmacies)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> No opinion
Other, please specify _____	

**20)** Is there a consultation room available where you cannot be overheard in the pharmacy you normally visit / contact?

- Yes       No       I don't know

**21)** If there is a consultation room, is it fully accessible to wheelchair users, or to people with other accessibility needs?

- Yes       No       I don't know

Any other comments you would like to make about the consultation room?

---

**22)** Is your pharmacy able to provide medication on the same day that your prescription is sent to it? (Please select one answer)

- Yes  
 No – it normally takes one day  
 No – it normally takes two or three days  
 No – it normally takes more than three days  
 I don't know

**23)** Would you like to be alerted when your medication is ready for collection?

- Yes – by text  
 Yes – by email  
 No

**24)** If you use your pharmacy to collect regular prescriptions, how do you order your prescriptions? (Please select all that apply)

- Paper request form to my GP practice  
 Paper request form through my pharmacy  
 By email to my GP practice  
 Online request to my GP practice  
 My pharmacy orders on my behalf  
 Electronic Repeat Dispensing (eRD)  
 NHS app  
 Varies  
 Other (Please specify) \_\_\_\_\_

**25)** Have you ever used [Electronic Repeat Dispensing](#) (eRD) (Electronic repeat dispensing (eRD) is a process that allows you to obtain repeated medication/appliances without the need for your GP to hand sign authorised repeat prescriptions each time. This allows your GP to authorise and issue a batch of repeat prescriptions until you need to be reviewed. The prescriptions are then available for dispensing at the specified intervals at your nominated pharmacy).

Yes – Please tell us if you have any comments about it

---

No

I don't know / I have never heard of it

**26)** Not all health needs require a GP appointment or a visit to an urgent treatment centre or A&E. Many minor health needs can be met by phoning 111 or visiting a pharmacy. What types of treatments or advice would you like to receive from pharmacies so they can better meet your needs?

---

---

---

**27)** Do you have any other comments you would like to make about your pharmacy services, including any improvements you would like to see?

---

---

---

**Thank you for completing this questionnaire**

**For more information about Ealing Pharmaceutical Needs Assessment, please visit**

[www.ealing.gov.uk/info/201042/current\\_consultations/2894/have\\_your\\_say\\_on\\_pharmacy\\_services\\_in\\_ealing](http://www.ealing.gov.uk/info/201042/current_consultations/2894/have_your_say_on_pharmacy_services_in_ealing)

## A bit about you

Please tell us a little about yourself. This information helps us to understand how views of different groups of people may differ.

All personal information will be kept completely confidential and used for research purposes only, in accordance with the Data Protection Act 2018 and GDPR. Information will be used in a summary form only and no individual will be identified.

### 28) Are you?

Male       Female       Prefer not to say       Prefer to self-describe \_\_\_\_\_

### 29) What is your age group?

Below 18       18–24       25–34       35–44       45–54  
 55–64       65–74       75 or above       Prefer not to say

**30)** The Equality Act 2010 defines a person as having a disability if s/he 'has a long term physical or mental impairment which has a substantial and long-term adverse effect on his/her ability to carry out normal day to day activities'. Do you consider yourself to have a disability?

Yes       No       Prefer not to say

### 31) Which ethnic group do you consider you belong to?

- White – English, Welsh, Scottish, Northern Irish, British
- White – Irish
- White – Gypsy/Irish Traveller
- White – Other
- Any other White background (please specify) \_\_\_\_\_
- Mixed / multiple ethnic groups – White and Black Caribbean
- Mixed / multiple ethnic groups – White and Black African
- Mixed / multiple ethnic groups – White and Asian
- Any other Mixed / multiple ethnic background (please specify) \_\_\_\_\_
- Asian / Asian British – Indian
- Asian / Asian British – Pakistani
- Asian / Asian British – Bangladeshi
- Asian / Asian British – Chinese
- Any other Asian background (please specify) \_\_\_\_\_
- Black / African / Caribbean / Black British – African
- Black / African / Caribbean / Black British – Caribbean
- Any other Black / African / Caribbean background (please specify) \_\_\_\_\_
- Arab
- Any other ethnic group (please specify) \_\_\_\_\_
- Prefer not to say

## Appendix D: Pharmacy contractor questionnaire

### **PNA 2022 Pharmacy Contractor Questionnaire Ealing Health and Wellbeing Board**

Soar Beyond are supporting the London Borough of Ealing to produce their 2022 Pharmaceutical Needs Assessment. We are undertaking a survey of all pharmacy contractors within Ealing.

We would therefore be grateful if you could spend a few minutes to complete the questions below. If you prefer, you may complete the survey online at

<https://www.surveymonkey.co.uk/r/EalingPNA2022PharmacyContractor>



**Please complete this questionnaire by 31<sup>st</sup> December 2021**

**Premises and contact details**

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

**Opening hours and related matters****Core hours of opening**

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

**Total hours of opening**

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

### Consultation facilities

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

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

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

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

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

### Services

Does the pharmacy dispense appliances?

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

**Advanced Services**

Does the pharmacy provide the following services?

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

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

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

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

SERVICE	*NHSE&I regional team	*CCG	*Local authority	Willing to provide if commissioned	Not able or willing to provide	Willing to provide privately
Hypertension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parkinson's disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Contraception Service <sup>(1)</sup>	<input type="checkbox"/> <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Supply Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gluten Free Food Supply Service (i.e. not via FP10)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home Delivery Service (not appliances) <sup>(1)</sup>	<input type="checkbox"/> <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independent Prescribing Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If currently providing an Independent Prescribing Service, what therapeutic areas are covered?						
Language Access Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medication Review Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medicines Assessment and Compliance Support Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minor Ailment Scheme	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medicines Optimisation Service <sup>(1)</sup>	<input type="checkbox"/> <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If currently providing a Medicines Optimisation Service, what therapeutic areas are covered?						
Needle and Syringe Exchange Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obesity management (adults and children) <sup>(1)</sup>	<input type="checkbox"/> <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not Dispensed Scheme	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On Demand Availability of Specialist Drugs Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Out of Hours Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patient Group Direction Service (name the medicines)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phlebotomy Service <sup>(1)</sup>	<input type="checkbox"/> <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prescriber Support Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Schools Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Screening Service</b>						
Alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cholesterol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gonorrhoea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. pylori	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HbA1C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hepatitis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SERVICE	*NHSE&I regional team	*CCG	*Local authority	Willing to provide if commissioned	Not able or willing to provide	Willing to provide privately
HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (Please state)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seasonal Influenza Vaccination Service <sup>(1)</sup>	<input type="checkbox"/> <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Other Vaccinations<sup>(1)</sup></b>						
Childhood vaccinations	<input type="checkbox"/> <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COVID-19 vaccinations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hepatitis (at risk workers or patients) vaccinations	<input type="checkbox"/> <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HPV vaccinations	<input type="checkbox"/> <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meningococcal vaccinations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pneumococcal vaccinations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel vaccinations	<input type="checkbox"/> <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (Please state)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sharps Disposal Service <sup>(1)</sup>	<input type="checkbox"/> <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stop Smoking Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervised Administration Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supplementary Prescribing Service (Please name therapeutic areas)				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vascular Risk Assessment Service (NHS Health Check) <sup>(1)</sup>	<input type="checkbox"/> <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

*\*Currently providing under contract with*

### Non-commissioned services

Does the pharmacy provide any of the following?

Collection of prescriptions from GP practices	<input type="checkbox"/> Yes <input type="checkbox"/> No
Delivery of dispensed medicines – Selected patient groups (Please list criteria)	
Delivery of dispensed medicines – Selected areas (Please list areas)	
Delivery of dispensed medicines – Free of charge on request	<input type="checkbox"/> Yes <input type="checkbox"/> No
Delivery of dispensed medicines – With charge	<input type="checkbox"/> Yes <input type="checkbox"/> No
Monitored Dosage Systems – Free of charge on request	<input type="checkbox"/> Yes <input type="checkbox"/> No
Monitored Dosage Systems – With charge	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Is there a particular need for a locally commissioned service in your area?</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>If so, what is the service requirement and why?</b>	

May the LPC update its opening hours and related matters and services details for you with the above information?	<input type="checkbox"/> Yes <input type="checkbox"/> No
---	--

### Details of the person completing this form:

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

## Appendix E: Commissioner questionnaire

### **PNA Commissioner Questionnaire 2022 Ealing Health and Wellbeing Board**

Soar Beyond are supporting the London Borough of Ealing to produce their 2022 Pharmaceutical Needs Assessment. We are undertaking a survey of all commissioners who are responsible for commissioning services from community pharmacies in Ealing (even if they do not commission services currently).

We would therefore be grateful if you could spend a few minutes to complete the questions below. If you prefer, you may complete the survey online at

<https://www.surveymonkey.co.uk/r/EalingPNA2022Commissioner>



**Please complete the questionnaire by 31<sup>st</sup> December 2021**



Which of the following services do you commission or may be considering commissioning from local community pharmacies?

SERVICE	Currently commissioning	Would consider commissioning in the future	Not likely to commission in the future
Anticoagulant Monitoring Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Anti-viral Distribution Service <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Care Home Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlamydia Testing Service <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlamydia Treatment Service <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contraceptive service (not EC) <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>Disease Specific Medicines Management Service:</b>			
Allergies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alzheimer's/dementia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asthma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COPD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Depression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes type I	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes type II	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Epilepsy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heart Failure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hypertension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parkinson's disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Contraception Service <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Emergency Supply Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gluten Free Food Supply Service (i.e. not via FP10)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home Delivery Service (not appliances) <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independent Prescribing Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>If currently commissioning an Independent Prescribing Service, what therapeutic areas are covered?</b>			
Language Access Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medication Review Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medicines Assessment and Compliance Support Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minor Ailment Scheme	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medicines Optimisation Service <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>If currently commissioning a Medicines Optimisation Service, what therapeutic areas are covered ?</b>			

SERVICE	Currently commissioning	Would consider commissioning in the future	Not likely to commission in the future
Needle and Syringe Exchange Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Obesity management (adults and children) <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not Dispensed Scheme	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On Demand Availability of Specialist Drugs Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Out of Hours Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patient Group Direction Service (name the medicines)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Phlebotomy Service <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prescriber Support Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Schools Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Screening Service:			
Alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cholesterol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gonorrhoea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. pylori	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HbA1C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hepatitis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Seasonal Influenza Vaccination Service <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other vaccinations:			
Childhood vaccinations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COVID-19 vaccinations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hepatitis (at risk workers or patients) vaccinations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HPV vaccinations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meningococcal vaccinations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Pneumococcal vaccinations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel vaccinations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Sharps Disposal Service <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stop Smoking Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervised Administration Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supplementary Prescribing Service (name therapeutic areas)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Vascular Risk Assessment Service (NHS Health Check) <sup>(1)</sup>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Details of the Person Completing this Questionnaire – if questions arise**

Contact name	Contact telephone number

## Appendix F: PCN questionnaire

### **PNA 2022 Primary Care Network (PCN) Questionnaire Ealing Health and Wellbeing Board**

#### **What is this questionnaire about?**

As you may be aware, the London Borough of Ealing has a statutory duty to develop and publish a revised Pharmaceutical Needs Assessment (PNA) at least every three years. The next PNA will be published by October 2022. Work has been underway on the PNA for some time and I would like to update you on the process so far.

A core Steering Group was established to lead the work. The Steering Group includes Local Medical Committee (LMC) and Local Pharmaceutical Committee (LPC) representation.

Information is being collated on the population and health needs of each of the localities in Ealing. Alongside that, information is being collated on the pharmaceutical services that are currently available.

The conclusions will start to be drawn leading to the draft PNA for consultation being completed by summer 2022. All PCNs will be invited to comment as part of the consultation.

To help us form a clearer picture of the services available to patients living in the more rural parts of the Health and Wellbeing Board area who may have problems accessing services, please can you answer the following questions by **31<sup>st</sup> December 2021 at the latest**, so that the information can be incorporated into the needs assessment.

#### **Who should complete the questionnaire?**

This questionnaire should be completed by the PCN Clinical Director / Senior Pharmacist. The responses should be about the pharmaceutical services provided by the PCN.

Please note, we are aware that activities and priorities have changed significantly in the last year with the impact of COVID-19, and therefore would like to emphasise there is no right or wrong answer for these questions. The answers will provide a clear understanding of the current provision of pharmaceutical services within your PCN as well as the needs for future developments.

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

If you would like to complete this online please go to:

<https://www.surveymonkey.co.uk/r/EalingPNA2022PCN>



Please complete the questionnaire by **31<sup>st</sup> December 2021**

**1) What do you know about your local pharmaceutical provision across your PCN?**

---

**2) Have your PCN employed PCN pharmacist(s)?**

Yes       No       I don't know

*If "No" or "I don't know", please go to question 5*

**3) How many PCN pharmacists have your PCN employed?**

1     2     3     4     5     6     7     8+

**4) And how do you see this role dovetailing into the current pharmaceutical service provision across your PCN?**

---

I don't know

**5) Who is leading your pharmacy integration strategy at a local level?**

---

I don't know

**6) Do you know who your Community Pharmacy PCN Lead is?**

Yes       No

**7) Do you have any plans that have been developed between the pharmacy and the PCN for pharmacy services across your PCN?**

Yes       No       I don't know

**8) Is the community pharmacy contract integrated into the way the PCN operates?**

Yes       No       I don't know

**9) How do you rate the quality of the service in your local pharmaceutical provision in Ealing?**

Excellent     Very Good     Good       Adequate     Poor     Very Poor     I don't know

**10) Which of the following community pharmacy services is your PCN signposting / referring / using? (Please select all that apply)**

- Community Pharmacist Consultation Service (CPCS)
- New Medicines Service (NMS)
- Flu Vaccination Service
- Appliance Use Review (AUR)
- Stoma Appliance Customisation (SAC)
- Discharge Medicines Service (DMS)
- Pandemic Delivery Service (commissioned until 31<sup>st</sup> March 2022)

**11) Is the technology suitable to provide effective pharmaceutical services across your PCN? (E.g. Discharge Medicine Service – access and permissions to edit summary care records in community pharmacy)**

Yes       No       I don't know

**12) Is there anything further you would like to add regarding pharmaceutical service provision across your PCN?**

---



---



---

**Thank you for completing this questionnaire**

## Appendix G: PNA Project Plan

	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
<b>Stage 1: Project Planning &amp; Governance</b> <ul style="list-style-type: none"> <li>Stakeholders identified</li> <li>First Steering Group meeting conducted</li> <li>Project Plan, Communications Plan and Terms of Reference agreed</li> <li>PNA localities agreed</li> <li>Questionnaire templates shared and agreed</li> </ul>													
<b>Stage 2: Research and analysis</b> <ul style="list-style-type: none"> <li>Collation of data from NHSE&amp;I, PH, LPC and other providers of services</li> <li>Listing and mapping of services and facilities with the borough</li> <li>Collation of information regarding housing and new care home developments</li> <li>Equalities Impact Assessment</li> <li>Electronic, distribution and collation</li> <li>Analysis of questionnaire responses</li> <li>Steering Group Meeting Two</li> <li>Draft Update for HWB</li> </ul>													
<b>Stage 3: PNA development</b> <ul style="list-style-type: none"> <li>Triangulation, review and analysis of all data and information collated to identify gaps in services based on current and future population needs</li> <li>Develop Consultation Plan</li> <li>Draft PNA</li> <li>Engagement for consultation</li> <li>Steering Group Meeting Three</li> <li>Draft update for HWB</li> </ul>													
<b>Stage 4: Consultation &amp; final draft production</b> <ul style="list-style-type: none"> <li>Coordination and management of consultation</li> <li>Analysis of Consultation responses</li> <li>Production of Consultation findings report</li> <li>Draft Final PNA for approval</li> <li>Steering Group Meeting Four</li> <li>Minutes to meetings</li> <li>Edit and finalise Final PNA 2022</li> <li>Draft update for HWB</li> </ul>													

## Appendix H: Results of the public questionnaire

Total responses received:<sup>1</sup> 206

1 - Do you normally use a specific pharmacy? (Please note this question is required)	%	Responses
Yes	89%	184
No	9%	19
I regularly prefer to use an online pharmacy	1%	3

Answered: 206 Skipped: 0

### Comments:

Provided name and address of pharmacy	173
Provided name and website of online pharmacy	0

2 - How would you rate your overall satisfaction with your regular/preferred pharmacy?	%	Responses
Excellent	59%	122
Good	31%	63
Fair	7%	15
Poor	3%	6

Answered: 206 Skipped: 0

3 - How easy has it been to speak to your pharmacy team over the last 18 months, during the pandemic?	%	Responses
Very easy	54%	112
Fairly Easy	27%	55
Neither Easy nor Difficult	15%	31
Fairly Difficult	2%	4
Very Difficult	2%	4

Answered: 206 Skipped: 0

4 - On a scale from 1 to 10 (1 being not well at all and 10 being extremely well) how well does your local community pharmacy meet your needs?	%	Responses
1	2%	4
2	1%	2
3	0%	1
4	1%	3
5	2%	5
6	1%	3
7	7%	14

<sup>1</sup> Please note that some percentage figures will add up to more or less than 100%. This is either due to respondents being able to give more than one response to a question, or figures have been rounded up to the nearest whole percent.

<b>4 - On a scale from 1 to 10 (1 being not well at all and 10 being extremely well) how well does your local community pharmacy meet your needs?</b>	<b>%</b>	<b>Responses</b>
8	15%	31
9	20%	41
10	50%	102

Answered: 206 Skipped: 0

<b>5 - How important is each of the following aspects to you when choosing a pharmacy?</b>	<b>%</b>	<b>Responses</b>
<b>Quality of service (friendly staff, expertise)</b>		
Extremely important	58%	117
Very important	32%	64
Moderately important	10%	20
Fairly important	1%	1
Not at all important	0%	0
<b>Convenience (e.g. location, opening times)</b>		
Extremely important	56%	112
Very important	34%	68
Moderately important	8%	16
Fairly important	2%	4
Not at all important	1%	1
<b>Accessibility (e.g. parking, clear signage)</b>		
Extremely important	26%	53
Very important	17%	34
Moderately important	20%	41
Fairly important	14%	29
Not at all important	22%	45
<b>Availability of medication/services (e.g stocks, specific services)</b>		
Extremely important	65%	132
Very important	28%	57
Moderately important	4%	8
Fairly important	2%	4
Not at all important	1%	1
<b>Other</b>		
Extremely important	56%	30
Very important	22%	12
Moderately important	9%	5
Fairly important	0%	0
Not at all important	13%	7

Answered: 203 Skipped: 3

**Comments:**

Customer service/advice	15	Connected to GP	9
Availability of medication/ vaccination	6	Opening hours	5
Location	4	Delivery service	2
Lack of parking car & bike	2	Keeps good records	2
Alerts when prescriptions ready	1	Lack of space	1
Easy to contact by phone	1	Not feeling safe	1
Lack of space	1	Blood tests	1
Good stock levels	1		

<b>6a - In the last six months, how frequently have you visited/ contacted (spoken to, emailed or visited in person) a pharmacy for yourself?</b>	<b>%</b>	<b>Responses</b>
Once a week or more	7%	14
Once a month	39%	78
Once every few months	38%	76
Once in six months	11%	21
I haven't visited/contacted a pharmacy in the last 6 months	4%	7
I normally prefer to use an internet/ online pharmacy	1%	2

**Answered: 198 Skipped: 8****Comments:**

Provided name of internet pharmacy	2
------------------------------------	---

<b>6b - In the last six months, how frequently have you visited/ contacted (spoken to, emailed or visited in person) a pharmacy for someone else?</b>	<b>%</b>	<b>Responses</b>
Once a week or more	5%	7
Once a month	29%	40
Once every few months	22%	30
Once in six months	13%	17
I haven't visited/contacted a pharmacy in the last 6 months	31%	42
I normally prefer to use an internet/ online pharmacy	0%	0

**Answered: 136 Skipped: 70**

<b>7 - Who would you normally visit/contact a pharmacy for? (Please select all that apply)</b>	<b>%</b>	<b>Responses</b>
Yourself	90%	182
A family member	43%	86
A neighbour/friend	5%	11
Someone you are a carer for	2%	5
All of the above	1%	3
Other	1%	1

**Answered: 202 Skipped: 4**

**Comments:**

Housebound patient (dementia)	1
-------------------------------	---

<b>8 - If you visit/contact a pharmacy regularly on behalf of someone else, please give a reason why? (Please select all that apply)</b>	<b>%</b>	<b>Responses</b>
Opening hours of the pharmacy not suitable for the person	19%	16
The person can't access the pharmacy (for example due to disability/lack of transport)	33%	28
The person cannot use the delivery service	3%	3
For a child/dependant	27%	23
The person is too unwell	14%	12
The person does not have access to digital or online services	8%	7
All of the above	2%	2
Other (please specify)	31%	27

**Answered: 86 Skipped: 120**

**Comments:**

Convenience	22	Housebound/disabled	3
Coming from GP	1	Person in quarantine	1

<b>9 - How would you usually travel to the pharmacy?</b>	<b>%</b>	<b>Responses</b>
Car	18%	36
Taxi	0%	0
Public transport	2%	5
Walk	71%	144
Bicycle	3%	6
Wheelchair/mobility scooter	2%	4
I don't, someone goes for me	0%	1
I don't, I use an online pharmacy or delivery service	0%	0
I don't, I utilise a delivery service	1%	3
Other	2%	4

**Answered: 203 Skipped: 3**

**Comments:**

Bicycle/walking	1	Pharmacy delivers	1
Skate	1	Varies	1

<b>10 - If you travel to the pharmacy, where do you travel from?</b>	<b>%</b>	<b>Responses</b>
Home	99%	186
Work	7%	14
Other	1%	1

**Answered: 187 Skipped: 19**

**Comments:**

GP	1	Hospital	1
----	---	----------	---

<b>11 - On average, how long would it take you to travel to a pharmacy?</b>	<b>%</b>	<b>Responses</b>
0 to 15 minutes	83%	156
16 to 30 minutes	16%	30
Over 30 minutes	1%	2

**Answered: 188 Skipped: 18**

<b>12 - Do you have any of the following difficulties when travelling to a pharmacy? (Please select all that apply)</b>	<b>%</b>	<b>Responses</b>
Lack of parking	14%	25
Lack of suitable public transport	2%	4
It's too far away	2%	3
Lack of disabled access/facilities	1%	2
No, I don't face any difficulty	80%	146
Other	8%	14

**Answered: 183 Skipped: 23**

**Comments:**

Personal mobility issues	3	Parking availability	2
Dangerous road for walk/bike	2	Restricted opening hours	2
Pavement too narrow for wheelchair	1	Pavement is uneven	1

<b>13 - What is the most convenient day for you to visit/contact a pharmacy?</b>	<b>%</b>	<b>Responses</b>
Monday to Friday	21%	40
Saturday	5%	9
Sunday	2%	4
Varies	30%	57
I don't mind	43%	83

**Answered: 193 Skipped: 13**

<b>14 - Is your preferred pharmacy open on the most convenient day for you?</b>	<b>%</b>	<b>Responses</b>
Yes	97%	185
No	3%	5

**Answered: 190 Skipped: 16**

<b>15 - When do you prefer to visit / contact a pharmacy?</b>	<b>%</b>	<b>Responses</b>
Morning (8 am–12 pm)	14%	27
Lunchtime (12 pm–2 pm)	3%	5
Afternoon (2 pm–6 pm)	12%	23
Early evening (6 pm–8 pm)	6%	11
Late evening (after 8 pm)	1%	2
Varies	36%	69
I don't mind/No preference	29%	56

**Answered: 193 Skipped: 13**

<b>16 - Is your preferred pharmacy open at the most convenient time for you / at your preferred time?</b>	<b>%</b>	<b>Responses</b>
Yes	94%	181
No	6%	12

**Answered: 193 Skipped: 13**

<b>17 - How frequently do you buy an over-the-counter (i.e non-prescription) medicine from a pharmacy?</b>	<b>%</b>	<b>Responses</b>
Daily	0%	0
Weekly	4%	8
Fortnightly	5%	10
Monthly	38%	72
Yearly	13%	24
Rarely	40%	76
Never	1%	2

**Answered: 192 Skipped: 14**

**18 - Which of the following pharmacy services are you aware that a pharmacy may provide? (Please select all that apply- even if you do not use the service)**

Service	Yes (%)	Yes	No (%)	No
Advice from your pharmacist	98%	186	2%	4
COVID-19 lateral flow device (LFD) distribution service	84%	153	16%	29
COVID-19 asymptomatic testing using a lateral flow device (LFD)	59%	99	41%	70
COVID-19 vaccination services	61%	107	39%	67
Flu vaccination services	86%	159	14%	26
Buying over-the-counter medicines	99%	186	1%	2
Dispensing prescription medicines	98%	186	2%	3
Dispensing appliances	62%	106	38%	65
Repeat dispensing services	94%	177	6%	12
Home delivery and prescription collection services	69%	124	31%	55
Medication review	37%	64	63%	107
New medicine service	27%	44	73%	119
Discharge from hospital medicines service	25%	41	75%	122
Emergency supply of prescription medicines	58%	102	42%	75
Disposal of unwanted medicines	75%	136	25%	45
Appliance Use Review	16%	26	84%	134
Community Pharmacist Consultation Service (urgent care referral)	20%	32	80%	132
Hepatitis testing service	9%	15	91%	143
Stoma appliance customisation service	11%	17	89%	144
Needle exchange	17%	28	83%	133
Stopping smoking/nicotine replacement therapy	52%	90	48%	82
Sexual health services (chlamydia testing/treating, condom distribution, emergency contraception)	38%	63	62%	104
Immediate access to specialist drugs e.g. palliative care medicines	20%	32	80%	126
Supervised consumption of methadone and buprenorphine	23%	37	77%	122
Travel immunisation (some pharmacies)	48%	79	52%	87

**19 - Which of the following pharmacy services would you like to see always provided by your pharmacy?**

Service	Yes (%)	Yes	No (%)	No	No opinion (%)	No opinion
Advice from your pharmacist	93%	172	1%	1	6%	11
COVID-19 lateral flow device (LFD) distribution service	88%	159	0%	0	12%	21
COVID-19 asymptomatic testing using a lateral flow device (LFD)	72%	131	3%	5	25%	46
COVID-19 vaccination services	80%	144	3%	6	17%	31

Service	Yes (%)	Yes	No (%)	No	No opinion (%)	No opinion
Flu vaccination services	85%	154	2%	3	14%	25
Buying over-the-counter medicines	96%	175	0%	0	4%	8
Dispensing medicines	96%	173	1%	1	4%	7
Dispensing appliances	67%	116	1%	2	32%	56
Repeat dispensing services	92%	166	1%	2	7%	13
Home delivery and prescription collection services	79%	142	3%	5	18%	32
Medication review	58%	102	14%	24	28%	50
New medicine service	48%	84	6%	10	46%	80
Discharge from hospital medicines service	59%	103	3%	6	37%	65
Emergency supply of prescription medicines	88%	156	1%	2	11%	20
Disposal of unwanted medicines	84%	150	3%	5	13%	23
Appliance Use Review	37%	64	5%	9	57%	98
Community Pharmacist Consultation Service (urgent care referral)	59%	103	5%	8	37%	65
Hepatitis testing service	43%	76	5%	9	51%	90
Stoma appliance customisation service	29%	50	6%	11	65%	113
Needle exchange	37%	65	9%	16	53%	93
Stopping smoking/nicotine replacement therapy	51%	88	7%	12	43%	74
Sexual health services (chlamydia testing/treating, condom distribution, emergency contraception)	63%	109	5%	8	33%	57
Immediate access to specialist drugs, e.g. palliative care medicines	65%	114	4%	7	31%	54
Supervised consumption of methadone and buprenorphine	31%	53	13%	22	57%	98
Travel immunisation (some pharmacies)	70%	125	3%	5	27%	48

**Comments:**

What matters is easy access	1	PCR testing service	1
Don't want needle exchange or methadone centre	1	Disposal of medication blister packs	1

20 - Is there a consultation room available where you cannot be overheard in the pharmacy you normally visit/contact?	%	Responses
Yes	61%	117
No	13%	24
I don't know	26%	50

Answered: 191 Skipped: 15

<b>21 - If there is a consultation room, is it fully accessible to wheelchair users, or to people with other accessibility needs?</b>	<b>%</b>	<b>Responses</b>
Yes	24%	45
No	12%	22
I don't know	64%	117

**Answered: 184 Skipped: 22**

**Any other comments you would like to make about the consultation room?**

Very small – and no room for wheelchair	6
No privacy – door kept open/can be overhead	2
Used as an office or storeroom	2

<b>22 - Is your pharmacy able to provide medication on the same day that your prescription is sent to it?</b>	<b>%</b>	<b>Responses</b>
Yes	44%	84
No – it normally takes one day	17%	32
No – it normally takes two or three days	23%	45
No – it normally takes more than three days	5%	9
I don't know	11%	22

**Answered: 192 Skipped: 14**

<b>23 - Would you like to be alerted when your medication is ready for collection?</b>	<b>%</b>	<b>Responses</b>
Yes – by text	80%	152
Yes – by email	10%	20
No	10%	19

**Answered: 191 Skipped: 15**

<b>24 - If you use your pharmacy to collect regular prescriptions, how do you order your prescriptions? (Please select all that apply)</b>	<b>%</b>	<b>Responses</b>
Paper request form to my GP practice	7%	12
Paper request form through my pharmacy	2%	4
By email to my GP practice	19%	33
Online request to my GP practice	44%	74
My pharmacy orders on my behalf	21%	36
Electronic Repeat Dispensing (eRD)	9%	16
NHS app	11%	19
Varies	5%	8
Other	11%	19

**Answered: 170 Skipped: 36**

**Comments:**

Phone	8	Online System	3
Mobile App	6	N/A	2

<b>25 - Have you ever used Electronic Repeat Dispensing (eRD)?</b>	<b>%</b>	<b>Responses</b>
Yes	19%	37
No	41%	77
I don't know/have never heard of it	40%	76

**Answered: 190 Skipped: 16**

**Please specify any comment about eRD:**

Good system	9
Didn't know was an option	4
Never heard of system but would use	3
Issues when medicines don't run at the same time	2
Works smoothly when items in stock	1
Large orders would be more convenient	1
App isn't that user friendly	1
Haven't needed to use	1
GP has advised against using	1

<b>26 - Not all health needs require a GP appointment or a visit to an urgent treatment centre or A&amp;E. Many minor health needs can be met by phoning 111 or visiting a pharmacy. What types of treatments or advice would you like to receive from pharmacies so they can better meet your needs?</b>	<b>Responses</b>
Minor ailments service	66
None/I don't know	14
Pain relief	11
Ear wax removal	9
Non-urgent care	6
Health check-up	5
Prescribing prescription drugs	3

**Answered: 90 Skipped: 116**

<b>27 - Do you have any other comments you would like to make about your pharmacy?</b>	<b>Responses</b>
Good service	39
No comments	16
Better opening hours	11
Poor service	8
Short-staffed	3
Website needs updating	1
Needs to have a pharmacist always on duty	1
Can no longer get emergency prescription	1
Needs a delivery service	1
Provision for more disabled parking	1

**Answered: 67 Skipped: 139**

## A bit about you

<b>28 - Are you:</b>	<b>%</b>	<b>Responses</b>
Female	44%	85
Male	54%	104
Prefer not to say	2%	3
Prefer to self-describe	0%	0

**Answered: 192 Skipped: 14**

<b>29 - What is your age group?</b>	<b>%</b>	<b>Responses</b>
Below 18	0%	0
18–24	2%	3
25–34	2%	4
35–44	6%	12
45–54	16%	31
55–64	30%	57
65–74	31%	60
75 or above	12%	24
Prefer not to say	1%	2

**Answered: 193 Skipped: 13**

<b>30 - Do you consider yourself to have a disability?</b>	<b>%</b>	<b>Responses</b>
Yes	12%	23
No	82%	159
Prefer not to say	6%	11

**Answered: 193 Skipped: 13**

<b>31 - Which ethnic group do you consider you belong to?</b>	<b>%</b>	<b>Responses</b>
White – English, Welsh, Scottish, Northern Irish, British	64%	122
White – Irish	3%	5
White – Gypsy/Irish Traveller	0%	0
White – Other	13%	25
Any other White background	1%	1
Mixed/multiple ethnic groups – White and Black Caribbean	1%	1
Mixed/multiple ethnic groups – White and Black African	0%	0
Mixed/multiple ethnic groups – White and Asian	0%	0
Any other Mixed/multiple ethnic background	0%	0
Asian/Asian British – Indian	6%	11
Asian/Asian British – Pakistani	1%	1
Asian/Asian British – Bangladeshi	0%	0
Asian/Asian British – Chinese	1%	1
Any other Asian background	2%	4
Black/African/Caribbean/Black British – African	2%	3
Black/African/Caribbean/Black British – Caribbean	0%	0
Any other Black/African/Caribbean background	0%	0
Arab	1%	1
Any other ethnic group	1%	1
Prefer not to say	7%	14

**Answered: 190 Skipped: 16**

**Comments:**

European	2	Jewish	1
Sri Lankan	1	Italo-British	1
Born in Malta, naturalised British	1	Asian from Africa	1

## Appendix I: Results of the pharmacy contractor questionnaire

Total responses received:<sup>1</sup> 41

<b>1 - Pharmacy-specific questions: ODS code, trading name, etc</b>	<b>N/A</b>
---	------------

Answered: 41 Skipped: 0

<b>2 - Is this pharmacy one which is entitled to Pharmacy Access Scheme payments?</b>	<b>%</b>	<b>Responses</b>
Yes	12%	5
No	71%	29
Possibly	17%	7

Answered: 41 Skipped: 0

<b>3 - Is this pharmacy a 100-hour pharmacy?</b>	<b>%</b>	<b>Responses</b>
Yes	5%	2
No	95%	39

Answered: 41 Skipped: 0

<b>4 - Does this pharmacy hold a Local Pharmaceutical Services (LPS) contract? (i.e. it is not the 'standard' Pharmaceutical Services contract)</b>	<b>%</b>	<b>Responses</b>
Yes	20%	8
No	80%	32

Answered: 40 Skipped: 1

<b>5 - Is this pharmacy a Distance Selling Pharmacy? (i.e. it cannot provide Essential Services to persons present at or in the vicinity of the pharmacy)</b>	<b>%</b>	<b>Responses</b>
Yes	0%	0
No	100%	41

Answered: 41 Skipped: 0

<b>6 - May the LPC update its premises and contact details for you with the above information?</b>	<b>%</b>	<b>Responses</b>
Yes	98%	40
No	2%	1

Answered: 40 Skipped: 1

<b>7-10 - Questions relating to opening hours: core and total hours of opening, including lunchtime closures</b>	<b>N/A</b>
--	------------

<sup>1</sup> Please note that some percentage figures will add up to more or less than 100%. This is either due to respondents being able to give more than one response to a question, or figures have been rounded up to the nearest whole percent.

Answered: 37 Skipped: 4

<b>11 - There is a consultation room (distinct from the public area, clearly designated and confidential) on premises:</b>	<b>%</b>	<b>Responses</b>
None, have submitted a request to NHSE&I that premises are too small	0%	0
None, NHSE&I has approved my request that premises are too small	0%	0
None (Distance Selling Pharmacy)	0%	0
Available (including wheelchair access)	87%	34
Available (without wheelchair access)	8%	3
Planned before 1st April 2023	0%	0
Other	5%	2

Answered: 39 Skipped: 2

**Comments:**

Yes including wheelchair access, and we also have a built-in vaccination room	1
Planning to extend in 2022/23	1

<b>12 - Where there is a consultation area, is it a closed room?</b>	<b>%</b>	<b>Responses</b>
Yes	100%	39
No	0%	0

Answered: 39 Skipped: 2

<b>13 - During consultations are there hand-washing facilities?</b>	<b>%</b>	<b>Responses</b>
In the consultation area	82%	32
Close to the consultation area	15%	6
None	3%	1

Answered: 39 Skipped: 2

<b>14 - Do patients attending for consultations have access to toilet facilities?</b>	<b>%</b>	<b>Responses</b>
Yes	46%	18
No	54%	21

Answered: 39 Skipped: 2

**15 - Languages spoken (in addition to English)**

Hindi	26	Gujarati	23	Punjabi	13
Urdu	12	Swahili	8	Polish	7
Italian	4	Arabic	4	Pashto	3
French	3	Farsi	3	Bengali	3
Tamil	2	Spanish	2	German	2
Turkish	2	Pakistani	2	Albanian	1
BSL	1	Persian	1	Mandarin	1
Cantonese	1	Swedish	1	Portuguese	1
Hungarian	1	Armenian	1	Russian	1
Afghani	1	Sinhala	1	Goan	1
Malay	1	Twi	1	Telugu	1
Serbian	1	Burmese	1		

Answered: 31 Skipped: 10

16 - Does the pharmacy dispense appliances?	%	Responses
None	8%	3
Yes – All types	82%	31
Yes, excluding stoma appliances	0%	0
Yes, excluding incontinence appliances	0%	0
Yes, excluding stoma and incontinence appliances	3%	1
Yes, just dressings	5%	2
Other	3%	1

Answered: 38 Skipped: 3

**Comments:**

Some, that are available through regular wholesalers	1
--	---

17 - Does the pharmacy provide the following services?	%	Responses
<b>Appliance Use Review Service</b>		
Yes	30%	11
Intending to begin within 12 months	22%	8
No – not intending to provide	49%	18
<b>Community Pharmacist Consultation Service (CPCS)</b>		
Yes	95%	36
Intending to begin within 12 months	5%	2
No – not intending to provide	0%	0
<b>C-19 Lateral Flow Device (LFD) Distribution</b>		
Yes	97%	38
Intending to begin within 12 months	0%	0
No – not intending to provide	3%	1
<b>Flu Vaccination Service</b>		
Yes	85%	33
Intending to begin within 12 months	13%	5
No – not intending to provide	3%	1
<b>Hepatitis C Testing Service (until 31<sup>st</sup> March 2022)</b>		
Yes	14%	5
Intending to begin within 12 months	22%	8
No – not intending to provide	65%	24
<b>Hypertension Case-Finding</b>		
Yes	38%	14

<b>17 - Does the pharmacy provide the following services?</b>	<b>%</b>	<b>Responses</b>
Intending to begin within 12 months	43%	16
No – not intending to provide	19%	7
<b>New Medicine Service</b>		
Yes	92%	35
Intending to begin within 12 months	8%	3
No – not intending to provide	0%	0
<b>Pandemic Delivery Service (until 31<sup>st</sup> March 2022)</b>		
Yes	90%	35
Intending to begin within 12 months	0%	0
No- not intending to provide	10%	4
<b>Stoma Appliance Customisation Service</b>		
Yes	17%	6
Intending to begin within 12 months	25%	9
No – not intending to provide	58%	21

Answered: 39 Skipped: 2

<b>18 - Which of the following other services does the pharmacy provide, or would be willing to provide?</b>	<b>%</b>	<b>Responses</b>
<b>Anticoagulant Monitoring Service</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	3%	1
Willing to provide if commissioned	77%	30
Not able or willing to provide	10%	4
Willing to provide privately	8%	3
<b>Antiviral Distribution Service</b>		
Providing (contract with NHSE&I)	5%	2
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	76%	28
Not able or willing to provide	14%	5
Willing to provide privately	5%	2
<b>Care Home Service</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	5%	2
Willing to provide if commissioned	69%	27
Not able or willing to provide	21%	8
Willing to provide privately	3%	1
<b>Chlamydia Testing Service</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	3%	1
Willing to provide if commissioned	77%	30
Not able or willing to provide	13%	5
Willing to provide privately	5%	2
<b>Chlamydia Treatment Service</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	82%	32

<b>18 - Which of the following other services does the pharmacy provide, or would be willing to provide?</b>	<b>%</b>	<b>Responses</b>
Not able or willing to provide	10%	4
Willing to provide privately	5%	2
<b>Contraceptive Service (not EC)</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	8%	3
Willing to provide if commissioned	79%	31
Not able or willing to provide	5%	2
Willing to provide privately	5%	2

Answered: 39 Skipped: 2

<b>19 - Which of the following other services does the pharmacy provide, or would be willing to provide? – Disease Specific Medicines Management Services (DSMMS)</b>	<b>%</b>	<b>Responses</b>
<b>Allergies</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	87%	34
Not able or willing to provide	8%	3
Willing to provide privately	3%	1
<b>Alzheimer's/dementia</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	82%	32
Not able or willing to provide	15%	6
Willing to provide privately	3%	1
<b>Asthma</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	87%	34
Not able or willing to provide	8%	3
Willing to provide privately	3%	1
<b>CHD</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	82%	32
Not able or willing to provide	13%	5
Willing to provide privately	3%	1
<b>COPD</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	87%	34
Not able or willing to provide	8%	3
Willing to provide privately	3%	1

<b>19 - Which of the following other services does the pharmacy provide, or would be willing to provide? – Disease Specific Medicines Management Services (DSMMS)</b>	<b>%</b>	<b>Responses</b>
<b>Depression</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	82%	32
Not able or willing to provide	13%	5
Willing to provide privately	3%	1
<b>Diabetes type I</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	89%	34
Not able or willing to provide	8%	3
Willing to provide privately	3%	1
<b>Diabetes type II</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	87%	34
Not able or willing to provide	8%	3
Willing to provide privately	3%	1
<b>Epilepsy</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	82%	32
Not able or willing to provide	13%	5
Willing to provide privately	3%	1
<b>Heart Failure</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	84%	32
Not able or willing to provide	13%	5
Willing to provide privately	3%	1
<b>Hypertension</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	87%	33
Not able or willing to provide	8%	3
Willing to provide privately	3%	1
<b>Parkinson's disease</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	84%	31
Not able or willing to provide	14%	5
Willing to provide privately	3%	1

<b>19 - Which of the following other services does the pharmacy provide, or would be willing to provide? – Disease Specific Medicines Management Services (DSMMS)</b>	<b>%</b>	<b>Responses</b>
<b>Other</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	84%	21
Not able or willing to provide	8%	2
Willing to provide privately	8%	2

**Answered: 39 Skipped: 2**

**Comment:**

Any other disease as required by the NHS	2	Unable to make decision without head office approval	1
--	---	--	---

<b>20 - Which of the following other services does the pharmacy provide, or would be willing to provide?</b>	<b>%</b>	<b>Responses</b>
<b>Emergency Contraception Service</b>		
Providing (contract with NHSE&I)	13%	5
Providing (contract with CCG)	3%	1
Providing (contract with LA)	15%	6
Willing to provide if commissioned	64%	25
Not able or willing to provide	0%	0
Willing to provide privately	5%	2
<b>Emergency Supply Service</b>		
Providing (contract with NHSE&I)	39%	15
Providing (contract with CCG)	3%	1
Providing (contract with LA)	8%	3
Willing to provide if commissioned	45%	17
Not able or willing to provide	3%	1
Willing to provide privately	3%	1
<b>Gluten-Free Food Supply Service (i.e. not via FP10)</b>		
Providing (contract with NHSE&I)	5%	2
Providing (contract with CCG)	3%	1
Providing (contract with LA)	3%	1
Willing to provide if commissioned	74%	28
Not able or willing to provide	13%	5
Willing to provide privately	3%	1
<b>Home Delivery Service (not appliances)</b>		
Providing (contract with NHSE&I)	13%	5
Providing (contract with CCG)	5%	2
Providing (contract with LA)	3%	1
Willing to provide if commissioned	62%	24
Not able or willing to provide	10%	4
Willing to provide privately	8%	3
<b>Independent Prescribing Service</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	66%	25

<b>20 - Which of the following other services does the pharmacy provide, or would be willing to provide?</b>	<b>%</b>	<b>Responses</b>
Not able or willing to provide	24%	9
Willing to provide privately	11%	4

Answered: 39 Skipped: 2

<b>21 - Which of the following other services does the pharmacy provide, or would be willing to provide?</b>	<b>%</b>	<b>Responses</b>
<b>Language Access Service</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	71%	27
Not able or willing to provide	24%	9
Willing to provide privately	3%	1
<b>Medication Review</b>		
Providing (contract with NHSE&I)	23%	9
Providing (contract with CCG)	0%	0
Providing (contract with LA)	5%	2
Willing to provide if commissioned	64%	25
Not able or willing to provide	8%	3
Willing to provide privately	0%	0
<b>Medicines Assessment and Compliance Support Service</b>		
Providing (contract with NHSE&I)	8%	3
Providing (contract with CCG)	3%	1
Providing (contract with LA)	3%	1
Willing to provide if commissioned	79%	30
Not able or willing to provide	8%	3
Willing to provide privately	0%	0
<b>Minor Ailment Scheme</b>		
Providing (contract with NHSE&I)	11%	4
Providing (contract with CCG)	8%	3
Providing (contract with LA)	3%	1
Willing to provide if commissioned	68%	26
Not able or willing to provide	11%	4
Willing to provide privately	0%	0
<b>Medicines Optimisation Service</b>		
Providing (contract with NHSE&I)	5%	2
Providing (contract with CCG)	3%	1
Providing (contract with LA)	0%	0
Willing to provide if commissioned	85%	33
Not able or willing to provide	5%	2
Willing to provide privately	3%	1

Answered: 39 Skipped: 2

**If currently providing a Medicines Optimisation Services, what therapeutic areas are covered?**

Dependant on head office authorisation	1
--	---

<b>22 - Which of the following other services does the pharmacy provide, or would be willing to provide?</b>	<b>Responses</b>
<b>Needle and Syringe Exchange Service</b>	
Providing (contract with NHSE&I)	1
Providing (contract with CCG)	2
Providing (contract with LA)	2
Willing to provide if commissioned	19
Not able or willing to provide	15
Willing to provide privately	0
<b>Obesity Management (adults and children)</b>	
Providing (contract with NHSE&I)	0
Providing (contract with CCG)	0
Providing (contract with LA)	0
Willing to provide if commissioned	34
Not able or willing to provide	4
Willing to provide privately	1
<b>Not-Dispensed Scheme</b>	
Providing (contract with NHSE&I)	1
Providing (contract with CCG)	0
Providing (contract with LA)	0
Willing to provide if commissioned	32
Not able or willing to provide	4
Willing to provide privately	1
<b>On-Demand Availability of Specialist Drugs Service</b>	
Providing (contract with NHSE&I)	0
Providing (contract with CCG)	0
Providing (contract with LA)	0
Willing to provide if commissioned	29
Not able or willing to provide	8
Willing to provide privately	1
<b>Out-of-Hours Services</b>	
Providing (contract with NHSE&I)	0
Providing (contract with CCG)	0
Providing (contract with LA)	1
Willing to provide if commissioned	21
Not able or willing to provide	13
Willing to provide privately	1
<b>Patient Group Direction Service</b>	
Providing (contract with NHSE&I)	5
Providing (contract with CCG)	0
Providing (contract with LA)	0
Willing to provide if commissioned	27
Not able or willing to provide	3
Willing to provide privately	2
<b>Phlebotomy Service</b>	
Providing (contract with NHSE&I)	0
Providing (contract with CCG)	0
Providing (contract with LA)	0
Willing to provide if commissioned	29
Not able or willing to provide	9
Willing to provide privately	1
<b>Prescriber Support Service</b>	
Providing (contract with NHSE&I)	0

<b>22 - Which of the following other services does the pharmacy provide, or would be willing to provide?</b>	<b>Responses</b>
Providing (contract with CCG)	0
Providing (contract with LA)	0
Willing to provide if commissioned	31
Not able or willing to provide	6
Willing to provide privately	1
<b>Schools Service</b>	
Providing (contract with NHSE&I)	0
Providing (contract with CCG)	0
Providing (contract with LA)	0
Willing to provide if commissioned	29
Not able or willing to provide	8
Willing to provide privately	1

**Answered: 39 Skipped: 2**

**Please name the medicines for your Patient Group Direction Service:**

Willing to do any PGDs	2	EHC	1
Flu Vaccinations	2	Pneumonia	1
Nitrofurantoin & Trimethoprim & Pneumonia Vaccination	1	Sildenafil, Finasteride 1mg Tablets	1

<b>23 - Which of the following other services does the pharmacy provide, or would be willing to provide? – Screening Services:</b>	<b>%</b>	<b>Responses</b>
<b>Alcohol</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	74%	29
Not able or willing to provide	21%	8
Willing to provide privately	5%	2
<b>Cholesterol</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	87%	34
Not able or willing to provide	8%	3
Willing to provide privately	5%	2
<b>Diabetes</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	87%	34
Not able or willing to provide	8%	3
Willing to provide privately	5%	2
<b>Gonorrhoea</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	74%	28
Not able or willing to provide	21%	8
Willing to provide privately	5%	2

<b>23 - Which of the following other services does the pharmacy provide, or would be willing to provide? – Screening Services:</b>	<b>%</b>	<b>Responses</b>
<b>H. pylori</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	79%	31
Not able or willing to provide	15%	6
Willing to provide privately	5%	2
<b>HbA1C</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	85%	33
Not able or willing to provide	10%	4
Willing to provide privately	5%	2
<b>Hepatitis</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	77%	30
Not able or willing to provide	18%	7
Willing to provide privately	5%	2
<b>HIV</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	72%	28
Not able or willing to provide	23%	9
Willing to provide privately	5%	2
<b>Other</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	80%	20
Not able or willing to provide	16%	4
Willing to provide privately	4%	1

**Answered: 39 Skipped: 2**

Comments:

Willing to provide more services	1	All screening services	2
----------------------------------	---	------------------------	---

<b>24 - Which of the following other services does the pharmacy provide, or would be willing to provide? – Vaccinations</b>	<b>%</b>	<b>Responses</b>
<b>Seasonal Influenza Vaccination Service</b>		
Providing (contract with NHSE&I)	79%	31
Providing (contract with CCG)	3%	1
Providing (contract with LA)	3%	1
Willing to provide if commissioned	13%	5
Not able or willing to provide	3%	1

<b>24 - Which of the following other services does the pharmacy provide, or would be willing to provide? – Vaccinations</b>	<b>%</b>	<b>Responses</b>
Willing to provide privately	0%	0
<b>Childhood vaccinations</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	74%	28
Not able or willing to provide	21%	8
Willing to provide privately	5%	2
<b>COVID-19 vaccinations</b>		
Providing (contract with NHSE&I)	13	5
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	64%	25
Not able or willing to provide	23%	9
Willing to provide privately	0%	0
<b>Hepatitis (at-risk workers or patients) vaccinations</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	72%	28
Not able or willing to provide	18%	7
Willing to provide privately	8%	3
<b>HPV vaccinations</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	74%	29
Not able or willing to provide	18%	7
Willing to provide privately	5%	2
<b>Meningococcal vaccinations</b>		
Providing (contract with NHSE&I)	5%	2
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	67%	26
Not able or willing to provide	21%	8
Willing to provide privately	8%	3
<b>Pneumococcal vaccinations</b>		
Providing (contract with NHSE&I)	28%	11
Providing (contract with CCG)	3%	1
Providing (contract with LA)	3%	1
Willing to provide if commissioned	46%	18
Not able or willing to provide	13%	5
Willing to provide privately	8%	3
<b>Travel vaccinations</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	64%	25
Not able or willing to provide	15%	6
Willing to provide privately	21%	8

<b>24 - Which of the following other services does the pharmacy provide, or would be willing to provide? – Vaccinations</b>	<b>%</b>	<b>Responses</b>
<b>Other vaccinations</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	63%	19
Not able or willing to provide	17%	5
Willing to provide privately	20%	6

**Answered: 39 Skipped: 2**

Other:

Private travel clinic	3	All vaccinations as needed	2
Vaccination room being built	2	Chicken pox	1
Private Pneumococcal vaccination	1	Shingles	1

<b>25 - Which of the following other services does the pharmacy provide, or would be willing to provide?</b>	<b>%</b>	<b>Responses</b>
<b>Sharps Disposal Service</b>		
Providing (contract with NHSE&I)	3%	1
Providing (contract with CCG)	0%	0
Providing (contract with LA)	3%	1
Willing to provide if commissioned	72%	28
Not able or willing to provide	21%	8
Willing to provide privately	3%	1
<b>Stop Smoking Service</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	3%	1
Providing (contract with LA)	3%	1
Willing to provide if commissioned	82%	31
Not able or willing to provide	11%	4
Willing to provide privately	3%	1
<b>Supervised Administration Service</b>		
Providing (contract with NHSE&I)	18%	7
Providing (contract with CCG)	5%	2
Providing (contract with LA)	3%	1
Willing to provide if commissioned	54%	21
Not able or willing to provide	18%	7
Willing to provide privately	3%	1
<b>Supplementary Prescribing Service</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0
Willing to provide if commissioned	68%	25
Not able or willing to provide	30%	11
Willing to provide privately	3%	1
<b>Vascular Risk Assessment Service (NHS Health Check)</b>		
Providing (contract with NHSE&I)	0%	0
Providing (contract with CCG)	0%	0
Providing (contract with LA)	0%	0

<b>25 - Which of the following other services does the pharmacy provide, or would be willing to provide?</b>	<b>%</b>	<b>Responses</b>
Willing to provide if commissioned	79%	31
Not able or willing to provide	18%	7
Willing to provide privately	3%	1

Answered: 39 Skipped: 2

Please name the therapeutic areas for your Supplementary Prescribing Service:

All therapeutic areas	2
-----------------------	---

<b>26 - Non-commissioned services: Does the pharmacy provide any of the following?</b>	<b>%</b>	<b>Responses</b>
<b>Collection of prescriptions from GP practices</b>		
Yes	90%	35
No	10%	4
<b>Delivery of dispensed medicines – Selected patient groups</b>		
Yes	92%	36
No	8%	3
<b>Delivery of dispensed medicines – Selected areas</b>		
Yes	79%	31
No	21%	8
<b>Delivery of dispensed medicines – Free of charge on request</b>		
Yes	76%	29
No	24%	9
<b>Delivery of dispensed medicines – With charge</b>		
Yes	38%	14
No	62%	23
<b>Monitored Dosage Systems – Free of charge on request</b>		
Yes	97%	36
No	3%	1
<b>Monitored Dosage Systems – With charge</b>		
Yes	25%	8
No	75%	24

Answered: 39 Skipped: 2

Please list your criteria for your selected patient groups:

Elderly/disabled/housebound	16	All patients within area	5
Vulnerable/isolating	2	Residential homes	1

Please list your criteria for your selected areas:

Locally	4	3-mile radius	2
5-mile radius	1	All areas	2

<b>27 - Is there a particular need for a locally commissioned service in your area? If so, what is the service requirement and why?</b>	<b>%</b>	<b>Responses</b>
Yes	49%	18
No	51%	19

**Answered: 37 Skipped: 4**

**Please state the service requirement and why:**

Sexual health services	9	Smoking cessation	7
Covid services	3	Needle exchange	2
Independent prescribing service	2	Travel vaccination clinic	2
Minor Ailments service	2	Monitored dosage system	1
Mental health services	1	Ear services	1
Supervised consumption service	1	Obesity	1
Commissioned delivery service	1	Phlebotomy service	1

<b>28 - May the LPC update its opening hours and related matters and services details for you with the above information</b>	<b>%</b>	<b>Responses</b>
Yes	92%	35
No	8%	3

**Answered: 38 Skipped: 3**

## Appendix J: Results of the commissioner questionnaire

Total responses received: 2

### 1 - Which of the following services do you commission or may be considering commissioning from local community pharmacies?

Anticoagulant Monitoring Service	Not likely to commission in the future	1
Antiviral Distribution Service	Not likely to commission in the future	1
Care Home Service	Not likely to commission in the future	1
Chlamydia Testing Service	Not likely to commission in the future	2
Chlamydia Treatment Service	Not likely to commission in the future	2
Contraceptive Service (not EC)	Not likely to commission in the future	2

### 2 - Which of the following Disease-Specific Medicines Management Services do you commission or may be considering commissioning from local community pharmacies?

Allergies	Not likely to commission in the future	1
Alzheimer's/dementia	Not likely to commission in the future	1
Asthma	Consider commissioning in the future	1
CHD	Not likely to commission in the future	2
COPD	Not likely to commission in the future	1
Depression	Not likely to commission in the future	1
Diabetes type I	Not likely to commission in the future	2
Diabetes type II	Not likely to commission in the future	2
Epilepsy	Not likely to commission in the future	1
Heart Failure	Not likely to commission in the future	2
Hypertension	Would consider commissioning in the future	1
	Not likely to commission in the future	1
Parkinson's disease	Not likely to commission in the future	1
Other	Not likely to commission in the future	1

### 3 - Which of the following other services do you commission or may be considering commissioning from local community pharmacies?

Emergency Contraception Service	Not likely to commission in the future	2
Emergency Supply Service	Not likely to commission in the future	1
Gluten-Free Food Supply Service (i.e. not via FP10)	Not likely to commission in the future	1
Home Delivery Service (not appliances)	Not likely to commission in the future	1
Independent Prescribing Service	Not likely to commission in the future	2

### 4 - Which of the following other services do you commission or may be considering commissioning from local community pharmacies?

Language Access Service	Not likely to commission in the future	1
Medication Review	Not likely to commission in the future	1
Medicines Assessment and Compliance Support Service	Not likely to commission in the future	1
Minor Ailment Scheme	Not likely to commission in the future	1
Medicines Optimisation Service	Not likely to commission in the future	1

**5 - Which of the following other services do you commission or may be considering commissioning from local community pharmacies?**

Needle and Syringe Exchange Service	Currently commissioning	1
	Not likely to commission in the future	1
Obesity Management (adults and children)	Not likely to commission in the future	1
Not-Dispensed Scheme	Not likely to commission in the future	1
On-Demand Availability of Specialist Drug Service	Not likely to commission in the future	2
Out-of-Hours Services	Not likely to commission in the future	1
Patient Group Direction Service	Not likely to commission in the future	1
Phlebotomy Service	Not likely to commission in the future	1
Prescriber Support Service	Not likely to commission in the future	1
Schools Service	Not likely to commission in the future	1

**6 - Which of the following screening services do you commission or may be considering commissioning from local community pharmacies?**

Alcohol	Would consider commissioning in the future	1
	Not likely to commission in the future	1
Cholesterol	Not likely to commission in the future	2
Diabetes	Not likely to commission in the future	2
Gonorrhoea	Not likely to commission in the future	2
H. pylori	Not likely to commission in the future	2
HbA1c	Not likely to commission in the future	2
Hepatitis	Not likely to commission in the future	2
HIV	Not likely to commission in the future	2
Other	Not likely to commission in the future	2

**7 - Which of the following vaccinations services do you commission or may be considering commissioning from local community pharmacies?**

Seasonal Influenza Vaccination Service	Not likely to commission in the future	1
Childhood vaccinations	Not likely to commission in the future	1
COVID-19 vaccinations	Not likely to commission in the future	1
Hepatitis (at-risk workers or patients) vaccinations	Would consider commissioning in the future	1
	Not likely to commission in the future	1
HPV vaccinations	Not likely to commission in the future	2
Meningococcal vaccinations	Not likely to commission in the future	1
Pneumococcal vaccinations	Not likely to commission in the future	1
Travel vaccinations	Not likely to commission in the future	1
Other vaccinations	Not likely to commission in the future	1

**8 - Which of the following other services do you commission or may be considering commissioning from local community pharmacies?**

Sharps Disposal Service	Currently commissioning	1
	Not likely to commission in the future	1
Stop Smoking Service	Not likely to commission in the future	2
Supervised Administration Service	Currently commissioning	1
	Not likely to commission in the future	1
Supplementary Prescribing Service	Not likely to commission in the future	1
Vascular Risk Assessment Service (NHS Health Check)	Not likely to commission in the future	2

## Appendix K: Consultation plan and list of stakeholders

### Consultee as required by Pharmaceutical Regulations 2013 Part 2 (8)

Stakeholder role	PNA briefing letter sent	Steering Group representation	PNA production engagement: Questionnaires	Draft PNA link sent
LPC Ealing	Y	Y	Contractor/Public/Commissioner	Y
LMC Ealing, Locum GP	Y	Y	Contractor/Public/Commissioner	Y
LMC Ealing, Committee Liaison Executive,	Y	Y	Contractor/Public/Commissioner	Y
Director of Healthwatch Operations Healthwatch Ealing	-	-	Public	Y
Operations Manager, Healthwatch Ealing	Y	Y	Contractor/Public/Commissioner	Y
Ealing Council Website	-	-	Public	Y
Questionnaires and posters distributed to 74x pharmacies & 11x libraries, and Ealing Council office	-	-	Public	-
Online questionnaire circulated to Ealing Residents panel	-	-	Public	-
Easy Read & paper copies available on request	-	-	Public	-
Healthwatch promoted via social media (Twitter & Facebook) and website	-	-	Public	Y
Deputy Chief Executive, London North West University Healthcare NHS Trust	-	-	-	Y
London North West University Healthcare NHS Trust x2	-	-	-	Y
Senior Commissioning Manager Market Entry/Pharmacy, NHSE&I – London Region	Y	Y	Contractor/Public/Commissioner	Y
Hillingdon HWB	-	-	-	Y
Harrow HWB	-	-	-	Y
Brent HWB	-	-	-	Y
Hammersmith & Fulham HWB	-	-	-	Y
Hounslow HWB	-	-	-	Y

**Other consultees**

<b>Stakeholder role</b>	<b>PNA briefing letter sent</b>	<b>Steering Group representation</b>	<b>PNA production engagement: Questionnaires</b>	<b>Draft PNA link sent</b>
Diversity and Inclusion Lead for the NHS in NWL	Y	Y	Pharmacy/Public/Commissioner	Y
Senior Engagement and Equalities Manager (Hounslow & Ealing), NW London Integrated Care System and NWL CCG	Y	Y	Pharmacy/Public/Commissioner	Y
Assistant Director of PCN, NWL CCG	Y	Y	Pharmacy/Public/Commissioner	Y
Ealing Lead Pharmacist, NWL CCG	Y	Y	Pharmacy/Public/Commissioner	Y
CCG Member	-	-	Commissioner	Y
London-wide LMC	-	-	-	Y
Hillingdon LPC	-	-	-	Y
Harrow LPC	-	-	-	Y
Brent LPC	-	-	-	Y
Hammersmith and Fulham LPC	-	-	-	Y
Hounslow LPC	-	-	-	Y
Director of Public Health, LB Ealing	Y	Y	Pharmacy/Public/Commissioner	Y
Strategic Intelligence & Corporate Performance Manager, LBE	Y	Y	Pharmacy/Public/Commissioner	Y
Public Health Analyst, LBE	-	-	Public	Y
PHE Team Members x3	-	-	Public	Y
Assistant Director Communities, LBE	Y	Y	Pharmacy/Public/Commissioner	Y
Media and Communications Manager, LBE	Y	Y	Pharmacy/Public/Commissioner	Y
Ealing and Hounslow CVS – Comms Manager	-	-	Public	Y
Chief Pharmacist – West London Mental Health Trust	-	-	-	Y
Chief Pharmacist – Ealing Hospital	-	-	-	Y
Chair, Ealing Community Network (ECN)	Y	Y	Public	Y

## Appendix L: Summary of consultation responses

As required by the Pharmaceutical Regulations 2013,<sup>1</sup> Ealing HWB held a 60-day consultation on the draft PNA from 16 May to 15 July 2022.

The draft PNA was hosted on the Ealing Council website and invitations to review the assessment, and comment, were sent to a wide range of stakeholders including all community pharmacies in Ealing. A number of members of the public had expressed an interest in the PNA and were invited to participate in the consultation as well as a range of public engagement groups in Ealing as identified by Ealing Council and Ealing Healthwatch. Responses to the consultation were possible via an online survey or email.

There were in total **9 responses**, all of them from the internet survey; responses received:

- 2 (22%) from the public
- 4 (44%) from healthcare or social care professionals
- 1 (11%) from employees or members of Ealing Council
- 1 (11%) from a voluntary or community sector organisation
- 1 (11%) from a business or organisation

The following are the main themes, and PNA Steering Group's response, to feedback received during the consultation on the draft PNA:

- Information provided in the PNA
- Correction of data in the PNA

All responses were considered by the PNA Steering Group at its meeting on 10 August 2022 for the final report. A number of additional comments were received that were considered by the Steering Group in the production of the final PNA. Please see Appendix M: Consultation comments report for detailed responses.

Below is a summary of responses to specific questions, asked during the consultation.<sup>2</sup>

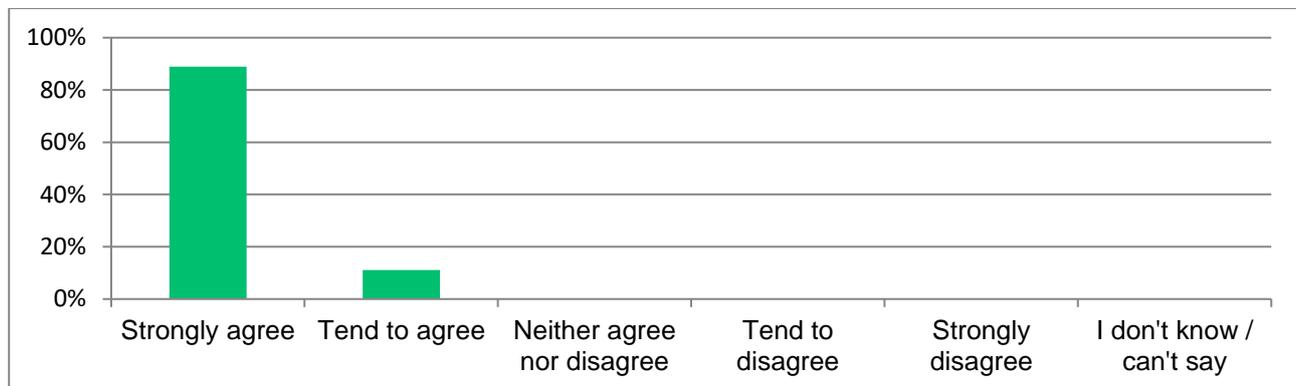
---

<sup>1</sup> Pharmaceutical Regulations 2013. [www.legislation.gov.uk/ukxi/2013/349/contents/made](http://www.legislation.gov.uk/ukxi/2013/349/contents/made)

<sup>2</sup> Please note that some percentage figures will add up to more or less than 100%. These figures have been rounded up to the nearest whole percent.

**Consultation questions and responses:**

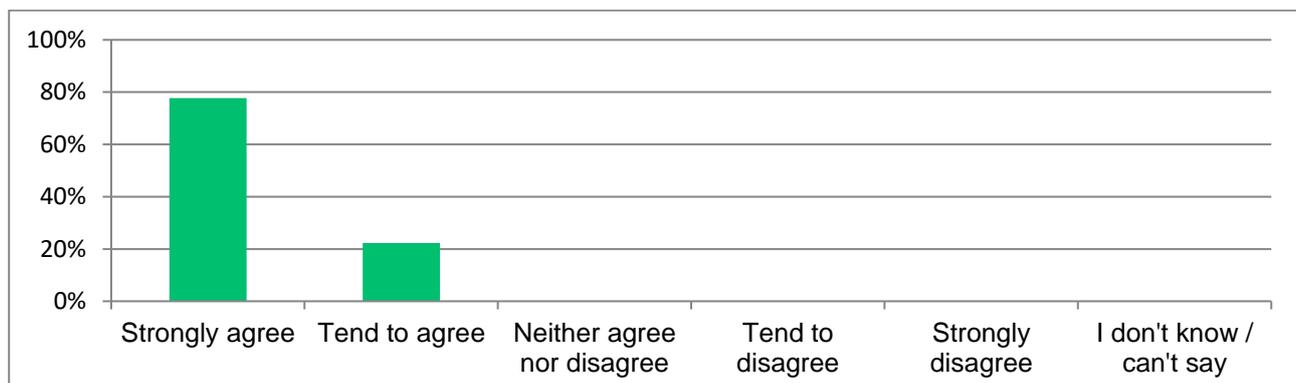
**Q1 – The draft Ealing PNA does not identify any gaps in the provision of pharmaceutical services.**



Answer choices	Responses
Strongly agree	8
Tend to agree	1
Neither agree nor disagree	0
Tend to disagree	0
Strongly disagree	0
I don't know / can't say	0

Answered: 9; Skipped: 0

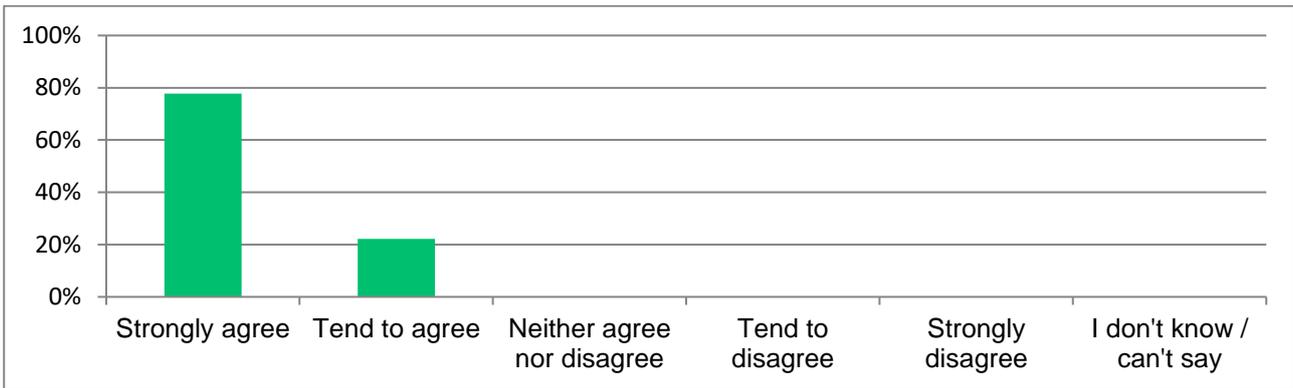
**Q2 – The draft Ealing PNA reflects the current provision (supply) of pharmaceutical services within Ealing.**



Answer choices	Responses
Strongly agree	7
Tend to agree	2
Neither agree nor disagree	0
Tend to disagree	0
Strongly disagree	0
I don't know / can't say	0

Answered: 9; Skipped: 0

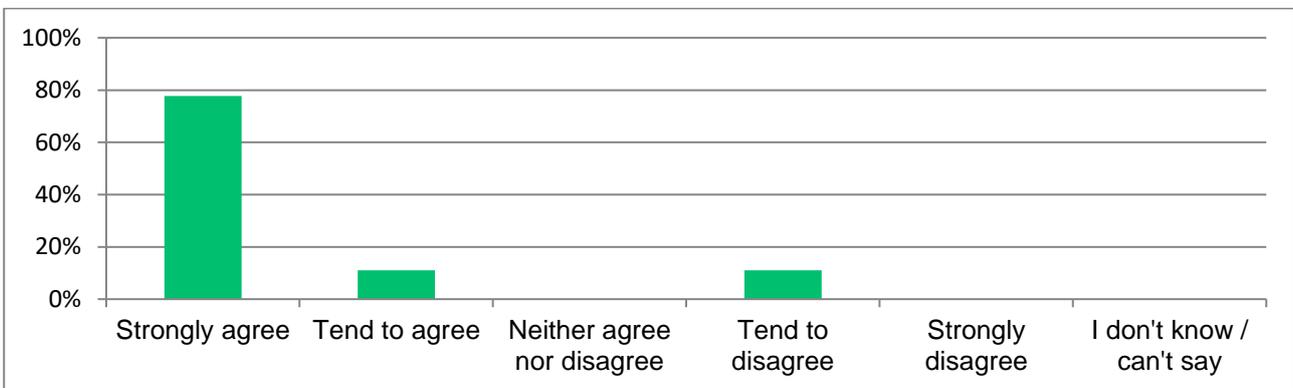
**Q3 – The draft Ealing PNA reflects the current pharmaceutical needs of Ealing residents.**



Answer choices	Responses
Strongly agree	7
Tend to agree	2
Neither agree nor disagree	0
Tend to disagree	0
Strongly disagree	0
I don't know / can't say	0

Answered: 9; Skipped: 0

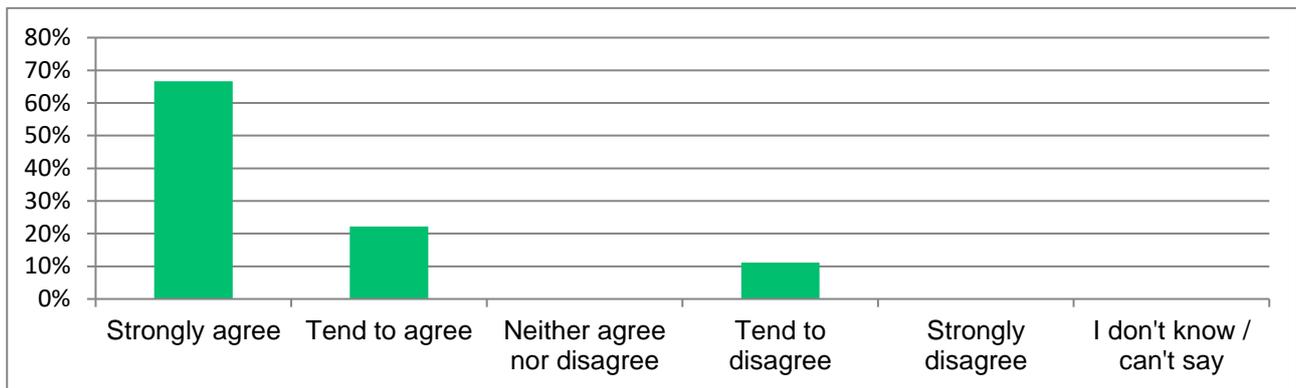
**Q4 – The draft Ealing PNA reflects the future (over the next three years) pharmaceutical needs of Ealing residents.**



Answer choices	Responses
Strongly agree	7
Tend to agree	1
Neither agree nor disagree	0
Tend to disagree	1
Strongly disagree	0
I don't know / can't say	0

Answered: 9; Skipped: 0

**Q5 – To what extent do you agree or disagree with the conclusions in the draft Ealing PNA?**



Answer choices	Responses
Strongly agree	6
Tend to agree	2
Neither agree nor disagree	0
Tend to disagree	1
Strongly disagree	0
I don't know / can't say	0

Answered: 9; Skipped: 0

## Appendix M: Consultation comments

Comment number	Question	Responding as	Comment	Steering Group response
1	Current provision	A healthcare or social care professional	I have noticed a minor error in local services	Noted. Locally commissioned services have been checked with commissioners to ensure provider lists are correct
2	Future provision	A voluntary or community sector organisation	Although the full draft needs assessment mentions 1% of responders using an online pharmacy, this is likely to grow significantly, especially for repeat prescriptions. Currently the GP software seems to be incapable of switching between urgent prescription fulfilment and repeat (ie typically non-urgent) fulfilment so mistakes do occur, resulting in delayed fulfilment.	Re Online pharmacy: Noted Re GP software: Noted, GP software capability is out of scope of the PNA
3	Conclusions	A voluntary or community sector organisation	As explained previously it does not reflect the likely increase in use of online pharmacies or the problems that inflexible GP software can create.	Noted.
4	Any other comments	Business or organisation – Boots UK Ltd	It appears that possibly due to the timing of production of this draft, the recent changes in the opening hours of a number of Boots pharmacies have not been reflected in the draft PNA.	Updated opening hours since time of writing has been added as a supplementary statement
5	Any other comments	A healthcare or social care professional	Printed copy would have been good rather than a lengthy PDF	Noted.
6	Any other comments	A member of the public	Good, but where do I find exact opening hours for my local pharmacies	These can be found in Appendix A and Appendix N. Additionally up to date information regarding pharmacy opening hours can be found on the NHS website <a href="https://www.nhs.uk">Find Pharmacy Services - NHS (www.nhs.uk)</a>

Comment number	Question	Responding as	Comment	Steering Group response
7	Sent via email	A healthcare or social care professional	<p>1. re contractor questionnaire and discrepancies - I am not sure if they relate to the PNA survey. Furthermore we don't have a copy of the return... as none was sent as acknowledgment for what I remember.</p> <p>2. On page 100 it indicates that Mattock Lane Pharmacy does NOT provide Hep c or Supervised consumption - it does provide both ON page 101 it says Terrys does not provide EHC which it does. I can't be sure but is unlikely that I would have missed these.</p> <p>Also for Shah Pharmacy it says it does NOT provide Hypertension service... it does now... (but in Dec 21 it did not). I suspect particularly the BP service .... others will have started the service since Dec 21... so how do we pick that up for all?</p>	<p>1. Noted. Contractor questionnaire acknowledgements were not sent 2. Advanced Service data is as of Dec 2021. Locally commissioned services have been checked with commissioners to ensure provider lists are correct.</p>

## Appendix N: Alphabetical list of pharmaceutical service providers in Ealing HWB area

Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NHSE&I Advanced										NHSE&I Enhanced			CCG	LA									
										NMS	AUR	SAC	CPCS	Hep C testing	Flu vaccination	C-19 LFD Distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu vaccination	Bank Holidays	Anticipatory medicines		EHC	Supervised consumption	Needle exchange	C-19 test						
Alchem Pharmacy	FJ580	Community	123 The Broadway, Southall, Middlesex	UB1 1LW	09:15-19:30 (Fri 09:15-13:00, 14:00-19:30)	10:00-18:00	Closed	-	-	-	-	-	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Alisha Pharmacy	FXY41	Community	257 Acton Lane, Chiswick	W4 5DG	09:00-18:30 (Wed 09:00-17:00)	09:00-13:00	Closed	-	-	Y	-	-	Y	-	-	Y	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	
Alpha Chemist	FCY66	Community	480 Church Road, Northolt, Middlesex	UB5 5AU	09:00-18:00 (Wed 09:00-17:30)	09:00-13:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	-	-	Y	-	Y	Y	-	-	-	-	-	-	-	-	
Anmol Pharmacy	FHD61	Community	97 North Road, Southall, Middlesex	UB1 2JW	07:00-23:30 (Fri 06:00-23:30)	06:00-23:30	Closed	Y	-	Y	-	-	Y	-	Y	Y	Y	-	-	-	Y	-	Y	-	-	-	-	-	-	-	-	-	
Ariana Pharmacy	FXK52	Community	472 Greenford Road, Greenford, Middlesex	UB6 8SQ	Mon 08:00-Wed 20:00 non stop; Thu-Fri 08:00-20:00	09:00-19:00	10:00-16:00	Y	-	Y	-	-	Y	-	Y	Y	-	-	-	-	Y	-	Y	-	-	-	-	-	-	-	-	Y	
Banks Chemist	FLD79	Community	59 Old Oak, Common Lane, East Acton, London	W3 7DD	09:00-18:30 (Thu 09:00-18:00)	09:00-14:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	-	Y	-	Y	-	-	-	-	-	-	-	-	-	
Boots	FTL27	Community	5 Haydock Green, Northolt, Middlesex	UB5 4AP	09:00-18:30	09:00-17:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	
Boots	FWX06	Community	47A-47B Oldfield Circus, Northolt, Middlesex	UB5 4RR	09:00-18:00	09:00-18:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	
Boots	FDX68	Community	Unit 11 Greenford Westway Retail Park, 1000 Greenford Road, Greenford, Middlesex	UB6 0UW	09:00-19:00	09:00-19:00	11:00-17:00	-	-	Y	-	-	Y	-	Y	Y	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	
Boots	FFN11	Community	42 The Broadway, Greenford, Middlesex	UB6 9PT	09:00-18:00	09:00-18:00	11:00-17:00	-	-	Y	-	-	Y	-	Y	Y	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	
Boots	FJ498	Community	68 The Broadway, West Ealing, London	W13 0SR	09:00-18:00	09:00-18:00	12:00-16:00	-	-	Y	-	-	Y	-	-	Y	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	
Boots	FEL12	Community	Unit 17, The Oaks Shopping Centre, Acton High Street, London	W3 6RE	09:00-18:00	09:00-18:00	Closed	-	-	Y	-	-	-	-	Y	Y	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	
Boots	FHP49	Community	Unit 36, Ealing Broadway Centre, Ealing, London	W5 5JY	08:45-20:00	08:45-19:00	11:00-17:00	-	-	Y	-	-	Y	-	-	Y	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	
Bramley Pharmacy	FX725	Community	261 Northfield Avenue, Ealing, London	W5 4UA	09:00-18:30 (Thu 09:00-18:00)	09:00-13:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	
Bright Health Pharmacy	FH357	Community	1318 Greenford Road, Greenford, Middlesex	UB6 0HL	09:00-19:00	09:00-13:00	Closed	-	-	-	-	-	Y	-	Y	Y	Y	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	Y	

Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NHSE&I Advanced										NHSE&I Enhanced			CCG		LA			
										NMS	AUR	SAC	CPCS	Hep C testing	Flu vaccination	C-19 LFD Distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu vaccination	Bank Holidays	Anticipatory medicines	EHC	Supervised consumption	Needle exchange	C-19 test		
Chana Chemist	FVM26	Community	52 South Road, Southall, Middlesex	UB1 1RQ	09:00-21:00	09:00-20:00	10:00-19:00	-	-	Y	-	-	Y	-	-	Y	-	-	-	Y	-	-	-	-	-	-	-	-
Chana Chemist	FYG50	Community	251 Allenby Road, Southall, Middlesex	UB1 2HB	09:00-19:00	09:00-18:00	Closed	-	-	-	-	-	-	-	Y	Y	Y	-	-	Y	-	-	-	Y	-	-	-	-
Chana Chemist	FVN27	Community	33 High Street, Southall, Middlesex	UB1 3HA	09:00-19:00	10:00-16:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	-	-
Cheema Pharmacy	FC041	Community	57 King Street, Southall, Middlesex	UB2 4DQ	09:00-20:00	09:00-19:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	-	-
Chief Cornerstone Pharmacy	FT601	Community	4 Eastmead Avenue, Greenford, Middlesex	UB6 9RA	08:30-19:00	08:30-13:00	Closed	-	-	Y	-	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	-
Church Pharmacy	FLA36	Community	83 Uxbridge Road, Hanwell, London	W7 3ST	09:00-19:30	09:00-18:30	Closed	-	-	-	-	-	Y	-	Y	Y	-	-	-	Y	-	-	-	-	-	-	-	-
Conway Chemist	FLW42	Community	8 Station Parade, West Acton, London	W3 0DS	09:00-18:30 (Wed 09:00-18:00)	09:00-13:30	Closed	-	-	Y	-	-	-	-	Y	Y	-	-	-	Y	-	-	-	-	-	-	-	-
Cross Chemist	FM205	Community	5 Royal Parade, Hanger Lane, London	W5 1ET	08:30-19:00	08:30-13:00	Closed	-	-	Y	-	-	Y	-	-	Y	-	-	Y	Y	-	-	-	Y	Y	-	-	-
Crossbells Chemist	FA252	Community	131 The Vale, Acton, London	W3 7RQ	09:00-18:30	09:00-13:00	Closed	-	-	-	-	-	Y	-	Y	Y	-	-	-	-	-	-	-	-	-	-	-	-
Dillons Chemist	FV837	Community	17 Church Road, Acton, London	W3 8PU	09:00-18:00 (Wed 09:00-17:00)	09:00-13:00	Closed	-	-	-	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	-	-
Ealing Pharmacy	FHN86	Community	157 Pitshanger Lane, Ealing, London	W5 1RH	09:00-18:00	09:00-17:30	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	-	-	-	-	-	-	-
Fountain Pharmacy	FGW38	Community	43 Featherstone Road, Southall, Middlesex	UB2 5AB	08:00-23:00	08:00-23:00	08:00-18:00	Y	-	Y	-	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	-
Gill Chemist	FH598	Community	31-33 King Street, Southall, Middlesex	UB2 4DG	09:00-20:30	09:00-20:30	12:00-19:00	-	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	Y	-	-	-	-	Y	-
Gill Chemist	FKD11	Community	79 Norwood Road, Southall, Middlesex	UB2 4EA	09:00-19:00	09:00-14:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	-	-	Y	-	-	-	-
Greenford Chemist	FC472	Community	340 Greenford Avenue, Hanwell, London	W7 3DA	09:00-18:00	09:00-13:00	Closed	-	-	Y	-	-	-	-	-	Y	Y	-	-	Y	-	-	-	-	-	-	-	-
Grosvenor House Pharmacy	FV215	Community	147 The Broadway, West Ealing, London	W13 9BE	07:00-23:00	07:00-20:00	10:00-17:00	Y	-	Y	-	-	Y	-	Y	Y	Y	-	-	-	-	-	-	Y	Y	-	-	-

Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NHSE&I Advanced										NHSE&I Enhanced			CCG		LA		
										NMS	AUR	SAC	CPCS	Hep C testing	Flu vaccination	C-19 LFD Distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu vaccination	Bank Holidays	Anticipatory medicines	EHC	Supervised consumption	Needle exchange	C-19 test	
H. J. Dixon Chemist	FTC65	Community	185 Lady Margaret Road, Southall, Middlesex	UB1 2PT	09:00-19:00	09:00-17:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	Y
Harbs Pharmacy	FHJ50	Community	193 South Ealing Road, Ealing, London	W5 4RH	07:00-23:00 (Mon 08:00-23:00)	07:00-22:00	11:00-17:00	Y	-	Y	-	-	Y	-	-	Y	Y	-	-	-	Y	-	-	-	-	-	-
Horn Lane Pharmacy	FQE36	Community	142 Horn Lane, Acton, London	W3 6PG	09:00-18:30 (Thu 09:00-17:30)	09:30-14:00	Closed	-	-	Y	-	-	Y	-	-	Y	-	-	-	-	-	-	Y	Y	-	-	
Jallas Chemist	FDR11	Community	311-313 Horn Lane, Acton, London	W3 0BU	09:00-13:00, 14:00-18:30	09:00-18:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	Y	Y	-	-	-	-	-	-	
John Megson's Pharmacy	FFT93	Community	15 Queens Parade, Hanger Lane, London	W5 3HU	09:00-18:00 (Thu-Fri 09:00-18:30)	09:00-13:00	Closed	-	-	-	-	-	-	-	Y	Y	-	-	-	-	-	-	-	-	-	-	
Kings Pharmacy	FF912	Community	50 Greenford Avenue, Southall, Middlesex	UB6 9AT	09:30-19:00	09:30-12:30	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	
KL Pharmacy	FQQ74	Community	1-2 Tyler Road, Southall, Middlesex	UB2 4XQ	09:00-18:30	09:00-13:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	Y	-	-	-	-	-	-	-	
Lady Margaret Pharmacy	FTX12	Community	223 Lady Margaret Road, Southall, Middlesex	UB1 2NH	07:00-23:00	07:00-20:00	10:00-17:00	Y	-	Y	-	-	Y	-	Y	Y	-	-	-	-	-	-	-	-	-	-	
Lewis Pharmacy	FC280	Community	36 Haven Green, Ealing, London	W5 2NX	10:00-13:30, 14:30-18:00	10:00-15:00	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	Y	-	-	-	-	-	-	-	
Lloyds Direct (previously Echo)	FN849	DSP	17 Wadsworth Road, Perivale, London	UB6 7JD	09:00-13:00, 14:00-18:00	Closed	Closed	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	
Lloyds Pharmacy	FDD32	Community	1 Crown Street, Acton, London	W3 8SA	08:30-18:45	08:45-17:00	Closed	-	-	Y	-	Y	Y	-	Y	Y	-	-	Y	-	-	-	Y	Y	-	-	
M. Gokani Chemist	FAF65	Community	32 Church Road, Northolt, Middlesex	UB5 5AB	09:00-19:00 (Wed 09:00-18:00)	09:00-14:00	Closed	-	-	Y	-	-	-	-	Y	Y	-	-	Y	-	-	-	Y	Y	-	-	
Mattock Lane Pharmacy	FKC09	Community	8 St. John's Parade, Mattock Lane, London	W13 9LL	08:45-19:00	09:00-17:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	Y	Y	-	Y	Y	Y	Y	Y	Y	
Medway Pharmacy	FA150	Community	18 Medway Parade, Perivale, Middlesex	UB6 8HR	09:00-18:45 (Wed 09:00-14:00)	09:00-12:00	Closed	-	-	Y	-	-	Y	-	-	Y	Y	-	-	-	-	-	-	-	-	-	
Midhurst Chemist	FA987	Community	92 Elthorne Park Road, Ealing, London	W7 2JD	09:00-18:30 (Thu 09:00-14:00)	09:30-13:00	Closed	-	-	Y	-	-	Y	-	-	Y	Y	-	-	Y	-	-	-	-	-	-	

Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NHSE&I Advanced										NHSE&I Enhanced		CCG	LA					
										NMS	AUR	SAC	CPCS	Hep C testing	Flu vaccination	C-19 LFD Distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu vaccination	Bank Holidays	Anticipatory medicines	EHC	Supervised consumption	Needle exchange	C-19 test		
My Own Chemist	FM850	DSP	4-5 Northolt Trading Estate, Belvue Road, Northolt, Middlesex	UB5 5QS	09:00-14:00, 14:30-17:30	Closed	Closed	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Northfield Pharmacy	FGK24	Community	30 Northfield Avenue, London	W13 9RL	08:30-18:30 (Thu 08:30-18:00)	09:00-17:30	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	Y	-	-	-	-	Y
Northolt Pharmacy	FGJ27	Community	Grand Union Health Centre, Taywood Road, Northolt, Middlesex	UB5 6WL	09:00-18:30	Closed	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	-	Y
Parade Pharmacy	FDR42	Community	386 Oldfield Lane North, Greenford, Middlesex	UB6 8PU	09:00-18:00	09:00-13:00	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	-	-	-	-	-
PPRX Ltd	FGC61	DSP	Room 112, Biz Space, 4-6 Wadsworth Road, Perivale, London	UB6 7JJ	09:00-17:00	Closed	Closed	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Puri Pharmacy	FE009	Community	39 Western Road, Southall, Middlesex	UB2 5HE	09:15-19:00	Closed	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	-	Y	Y	Y	Y	Y
Queens Pharmacy	FL684	Community	61 The Broadway, Southall, Middlesex	UB1 1JY	09:00-20:00	09:00-19:00	10:30-19:00	-	-	Y	-	-	-	-	Y	Y	-	-	-	Y	-	-	-	Y	Y	-	-	-
Ravenor Chemist	FLK52	Community	70 The Broadway, Greenford, Middlesex	UB6 9QA	09:00-18:00	Closed	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	-	-	Y	-	-	Y	-	-	-	-	-
Remedy Pharmacy	FK802	Community	83 Greenford Avenue, Hanwell, London	W7 1LJ	09:00-18:30 (Wed 09:00-18:00; Thu 09:00-19:30)	10:00-13:00	Closed	-	-	Y	-	-	-	-	-	Y	Y	Y	-	Y	-	Y	Y	-	-	-	-	-
Richards Pharmacy	FAH22	Community	112 South Ealing Road, London	W5 4QJ	09:00-18:00	09:00-16:00	Closed	-	-	-	-	-	-	-	-	Y	-	-	-	-	-	-	-	-	-	-	-	-
Roxanne's Pharmacy	FJJ99	Community	51 The Broadway, Greenford, Middlesex	UB6 9PN	09:00-18:00	09:00-17:30	Closed	-	-	Y	-	-	Y	-	Y	Y	Y	Y	-	Y	Y	-	-	Y	-	-	-	-
Shah Pharmacy	FLF32	Community	13 North Parade, North Road, Southall, Middlesex	UB1 2LF	09:00-19:00	Closed	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	Y	-	-	Y	-	-	-	-	-	-
Sherry's Pharmacy	FQP22	Community	48 South Road, Southall, Middlesex	UB1 1RR	09:30-19:00	Closed	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	Y	-	-	-	-	-	-	-	-	-
South Ealing Pharmacy	FPM91	Community	186 South Ealing Road, Ealing, London	W5 4RJ	08:30-18:30	09:00-14:00	Closed	-	-	-	-	-	-	-	Y	Y	Y	Y	Y	Y	-	-	-	-	-	-	-	Y
SR Pharmacy	FX732	Community	155 High Street, Acton, London	W3 6LP	09:00-18:00	09:00-15:00	Closed	-	-	Y	-	-	-	-	Y	Y	Y	-	-	Y	-	-	Y	-	-	-	-	-
Superdrug Pharmacy	FHY42	Community	85-87 The Broadway, Hanwell, London	W13 9BP	09:00-14:00, 14:30-18:00	09:00-14:00, 14:30-17:30	Closed	-	-	Y	-	-	Y	-	Y	Y	-	-	-	Y	-	-	-	-	-	-	-	-

## Appendix O: Opportunities for service provision from community pharmacies in Ealing

### 1 Introduction

Any local commissioning of services for delivery by community pharmacy lies outside of the requirements of a PNA; it is considered as being additional to any Necessary Services required under the regulations.

In reviewing the provision of Necessary Services and considering Advanced, Enhanced and Locally Commissioned Services for Ealing as part of the PNA process it was possible to identify opportunities for service delivery via the community pharmacy infrastructure that could positively affect the population.

Not every service can be provided from every pharmacy and that service development and delivery must be planned carefully. However, many of the health priorities either at a national or local level can be positively affected by services provided from community pharmacies, albeit being out of the scope of the PNA process.

Where applicable, all pharmacies and pharmacists should be encouraged to become eligible to deliver Advanced Services in all pharmacies across all CCG localities. This will mean that more eligible patients are able to access and benefit from these services.

Across Ealing there were 41 responses to the contractor questionnaire. When asked if they would be willing to provide specific services if they were commissioned to do so, the responses varied by disease state. However, some of the positive responses were as high as 89%, indicating that the possibility for a broader provision of services is possible.

The results of the two responses to the commissioner questionnaire can be seen in Appendix J. There were some services were identified as 'would consider commissioning' from community pharmacies including alcohol screening, hepatitis vaccinations, asthma and hypertension.

The impact of the COVID-19 pandemic on service provision from community pharmacies has been significant during the life of the previous PNA:

- New Advanced Services have had their implementation delayed
- Community pharmacy priorities have been centred on pandemic service delivery, e.g. lateral flow test distribution and COVID-19 vaccination
- pharmacies have seen significantly increased demand for existing services, e.g. repeat dispensing

The successful implementation of new Advanced and Enhanced Services to support the pandemic response is an indicator that implementation of additional new services from community pharmacies in the future is possible.

## 2 Health needs identified in the NHS Long Term Plan (LTP)

The LTP identifies community pharmacists as part of the process of improving the effectiveness of approaches such as the **NHS Health Check**, rapidly treating those identified with high-risk conditions, including high blood pressure. The **hypertension case-finding service** has been developed as an Advanced Service from community pharmacy as part of this process, but other disease-specific programmes should be made part of the service options available including for respiratory conditions, diabetes and cancer. For example, the LTP states: 'We will do more to support those with respiratory disease to receive and use the right medication.' Of NHS spend on asthma, 90% goes on medicines, but incorrect use of medication can also contribute to poorer health outcomes and increased risk of exacerbations, or even admission. The New Medicines Service (NMS) is an Advanced Service that provides support for people with long-term conditions newly prescribed a medicine to help improve medicines adherence.

LTP priorities that can be supported from community pharmacy:

- Prevention
  - Smoking
  - Obesity
  - Alcohol
  - Antimicrobial resistance
  - Stronger NHS action on health inequalities
- Better care for major health conditions
  - Cancer
  - Cardiovascular disease
  - Stroke care
  - Diabetes
  - Respiratory disease
  - Adult mental health services

## 3 Health needs in Ealing

The health needs of the population of Ealing were briefly outlined in [Section 2](#) and summarised in [Section 6.1](#) of the PNA.

Overall, when compared with England, and regardless of age, LB Ealing had significantly lower ratios of mortality from all-causes, all cancers and all respiratory diseases, while the mortality ratios for all circulatory diseases were similar.

The highest risk factors for causing death and disease for the Ealing population are summarised below.

Factor or area of ill health:

- All-cause emergency hospital admissions
- Diabetes (increased prevalence 9%)
- STIs & sexual health
- Flu vaccine uptake (71.4%)

- Obesity in children
- COVID-19 infections and mortality
- Hospital admissions related to alcohol
- Drug misuse
- Palliative care hospital deaths

#### **4 Opportunities for further community pharmacy provision**

Should these be priority target areas for commissioners, they may want to consider the current and future service provision from community pharmacies, in particular the screening services they are able to offer.

Based on these priorities and health needs community pharmacy can be commissioned to provide services that can help manage and support in these areas.

##### **4.1 Existing services**

###### **4.1.1 Essential Services**

Signposting for issues such weight management and health checks.

###### **4.1.2 Advanced Services**

Some of the existing Advanced Services could be better utilised within Ealing, i.e. Community Pharmacist Consultation Service (CPCS) and NMS, including a focus on particular health needs in the population for these services, e.g. diabetes and coronary heart disease.

The flu vaccination uptake is low and well below the national average in Ealing. Highlighting the service availability in community pharmacies may help to reduce the deficit.

###### **4.1.3 Locally Commissioned Services**

Sexual health services are not commissioned in community pharmacies in Ealing (except Emergency Hormonal Contraception (EHC)). Of respondents to the public questionnaire, 63% indicated that they would wish to see such services available from community pharmacies. Based on the identified health needs around sexual health, expansion of the EHC services to include STI screening and/or treatment may be beneficial. In addition, coupling such services with the hepatitis C testing Advanced Service could be advantageous.

##### **4.2 New services**

From the public questionnaire there is a wish that a variety of services are provided from community pharmacies. From the contractor questionnaire there is also a willingness to deliver some services if commissioned, albeit not in all pharmacies.

###### **4.2.1 Advanced Services**

These services would be commissioned by NHSE&I.

There are several new or recently introduced Advanced Services being implemented that could be beneficial to the population of Ealing based on the identified health needs, including:

- **Hypertension case finding service**

This is a recently introduced Advanced Service. The service has two stages – the first is identifying people at risk of hypertension and offering them blood pressure measurement (a ‘clinic check’). The second stage, where clinically indicated, is offering 24-hour ambulatory blood pressure monitoring. The blood pressure test results will then be shared with the patient’s GP to inform a potential diagnosis of hypertension.

- **Hepatitis C testing service**

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, such as 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.

- **Stop smoking**

There is a new stop smoking Advanced Service for people referred to pharmacies by a hospital, which has been commissioned from January 2022 (delayed). The service is aimed at stop smoking support for those beginning a programme of smoking cessation in secondary care and referred for completion in community pharmacy. The Department of Health and Social Care and NHSE&I proposed the commissioning of this service, as an Advanced Service.

#### 4.2.2 Locally Commissioned Services

Based on the local and national health needs identified throughout this document, there are opportunities for community pharmacy to positively impact outcomes.

The NHS Health Check is a national programme for people aged 40–74 that assesses a person’s risk of developing **diabetes, heart disease, kidney disease** and **stroke**. It then provides the person with tailored support to help prevent the condition, advising on lifestyle changes to reduce their risk. Nationally, there are over 15 million people in this age group who should be offered an NHS Health Check once every five years, and local authorities are responsible for commissioning NHS Health Checks.

As the rates of diabetes are higher than the national average and hypertension, stroke circulatory disease are all priority health areas in Ealing (with high prevalence in many wards) then the provision of Health Checks through community pharmacies within the existing infrastructure could be considered or reviewed.

Below are examples of services that have been commissioned in some areas of England either by NHSE&I or CCGs. These would be seen as add-on services to Advanced Services or could be commissioned separately.

There are many examples of different service types on the Pharmaceutical Services Negotiating Committee (PSNC) website, those below are described to give an idea of the type of service available. The conditions listed have been identified as health priorities either as causes of ill health in Ealing or in the NHS LTP.

### 4.3 Possible disease-specific services

- **Weight management**

There are many different examples of weight management services already provided from a number of community pharmacies in England. These may be targeted to localities, e.g. areas of higher deprivation, or coupled with programmes for other ill health, e.g. cardiovascular disease or diabetes.

- **Diabetes**

Diabetes-focused pharmacy (Wessex LPN). The framework is categorised into six elements: 1. The pharmacy team, 2. Prevention and lifestyle, 3. Complications of diabetes, 4. Education programmes, 5. Medicines adherence, 6. Signposting.

- **Cardiovascular**

In addition to the hypertension case-finding Advanced Service the following is possible.

AF screening service (multiple LPC areas): This service provides patients at high risk of Atrial Fibrillation (AF) with a consultation that gathers information and screens them for AF using a portable heart monitoring device called an AliveCor monitor. Patients who have this arrhythmia detected will be counselled by the pharmacist about the implications of the diagnosis and referred to their GP for ongoing management. The pharmacy consultation will: 1. Screen identified cohorts for AF using a portable heart monitor device; 2. Counsel the patient on the results of the analysis; 3. Where appropriate, send the report and refer the patient to their GP for further investigation and management; 4. Offer advice on a healthier lifestyle; and 5. Signpost the patient to other services available in the pharmacy such as a Stop Smoking Service or Weight Loss Support Service.

- **Respiratory**

Six pharmacies in north-east Essex are piloting a Chronic Obstructive Pulmonary Disease (COPD) project aimed at reducing demand on GPs and hospitals during the busy winter period. Funded through winter pressures money, the service proactively checks that patients with COPD are aware of what to do if they start an exacerbation (whether this is a formal written plan or not) and also checks that they have a rescue pack at home if this is part of the plan. If they haven't, there is a Patient Group Direction element to supply this. The service is different to other rescue pack schemes in that rescue packs are discussed and supplied to patients when they are well, rather than when they have started to exacerbate.

## 5 Recommendations

### 1. Highlight to the public the services that are currently available from community pharmacies

This will help to manage the following issues:

- The existing services can have improved utilisation
- The public questionnaire made it clear that members of the public were not aware of all the available services
- Members of the public wish to see many of these services provided ([Section 5](#))

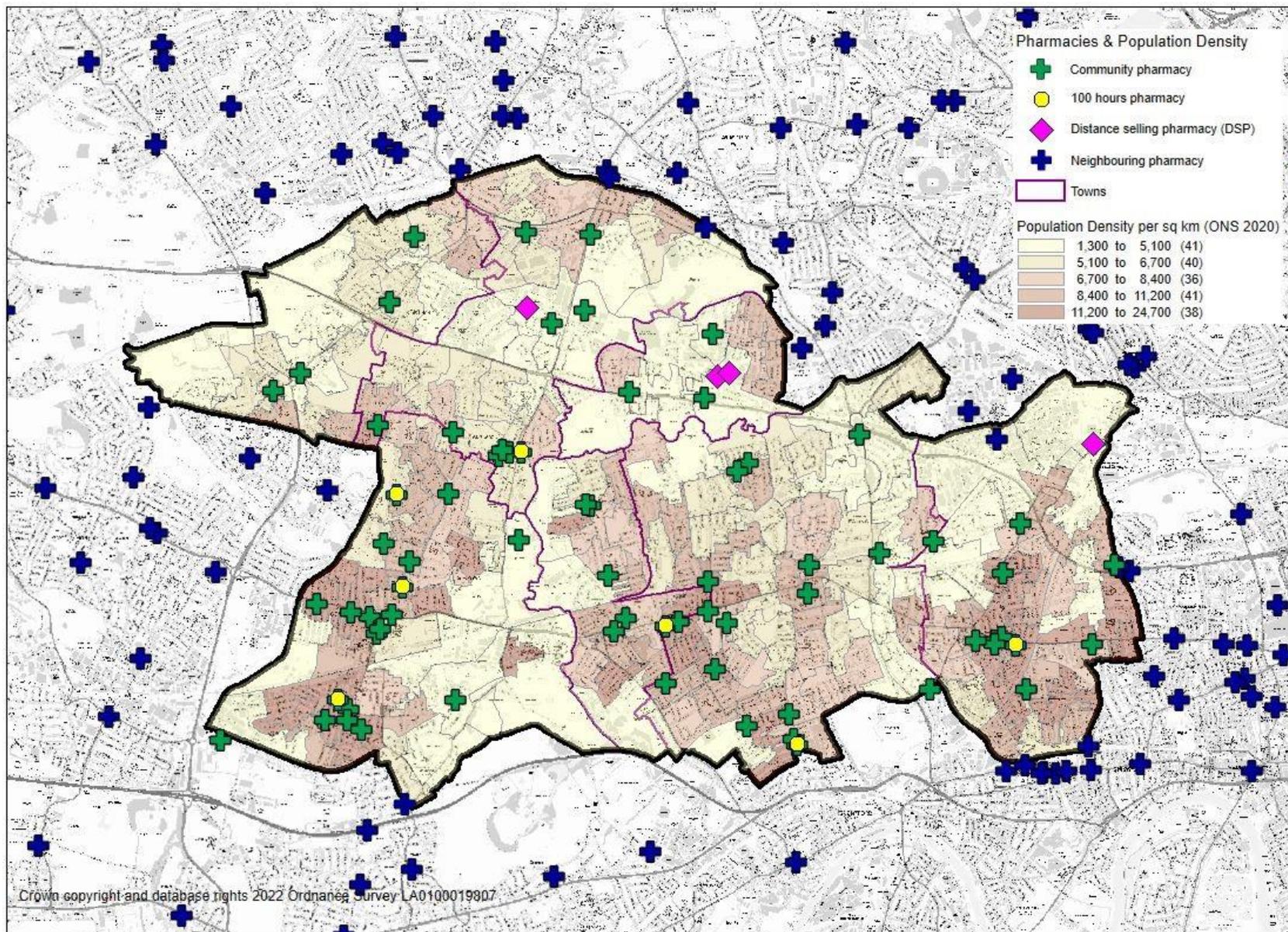
**2. Identify the best way to deliver the new Advanced Services**

Smoking cessation and hypertension case-finding can meet the health needs of Ealing, albeit in targeted localities.

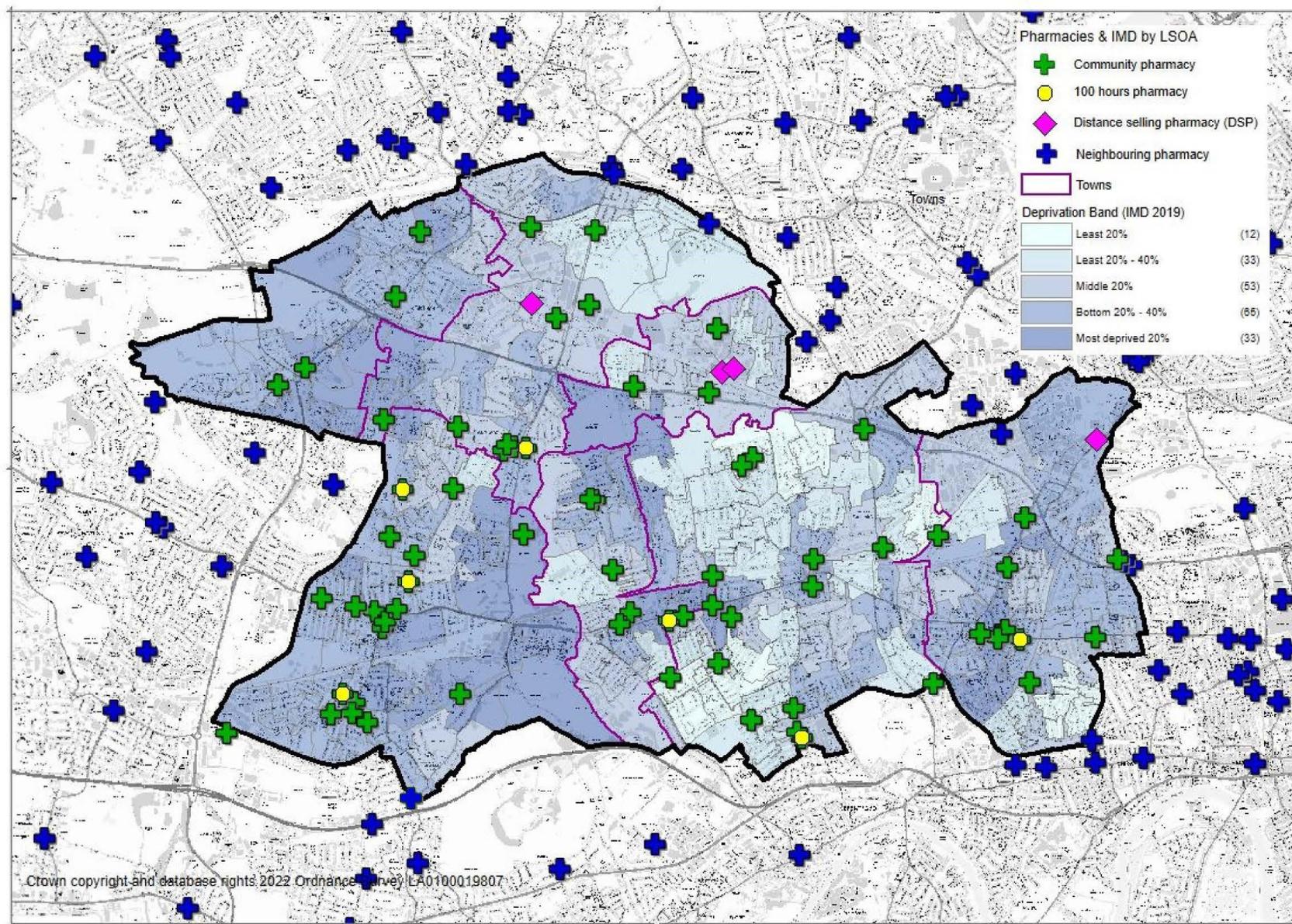
**3. Consider the provision of new Locally Commissioned Services**

To meet specific health needs in Ealing, e.g. diabetes, weight management, cardiovascular or COPD services.

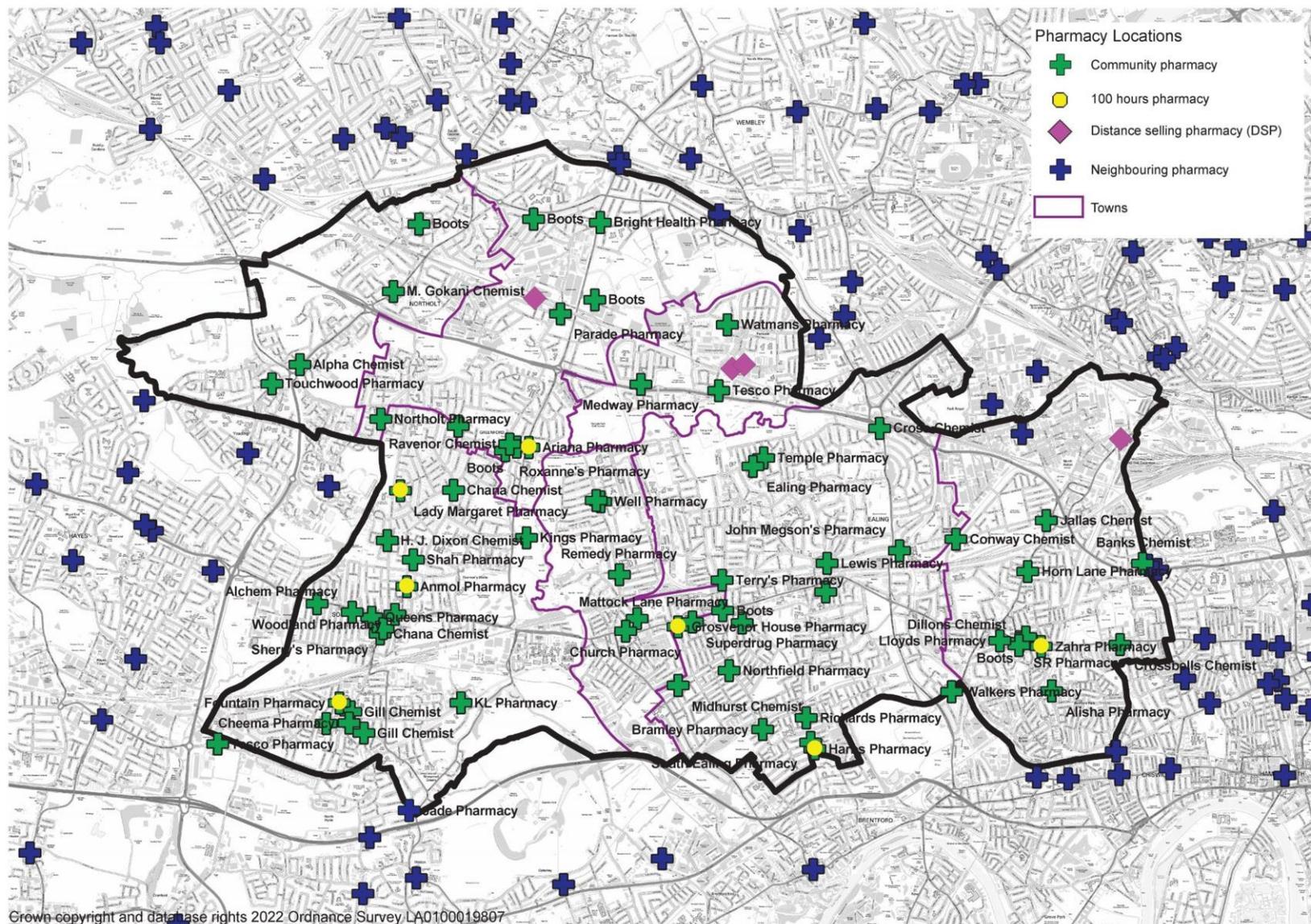
Map 1: Pharmacies and population density by output area



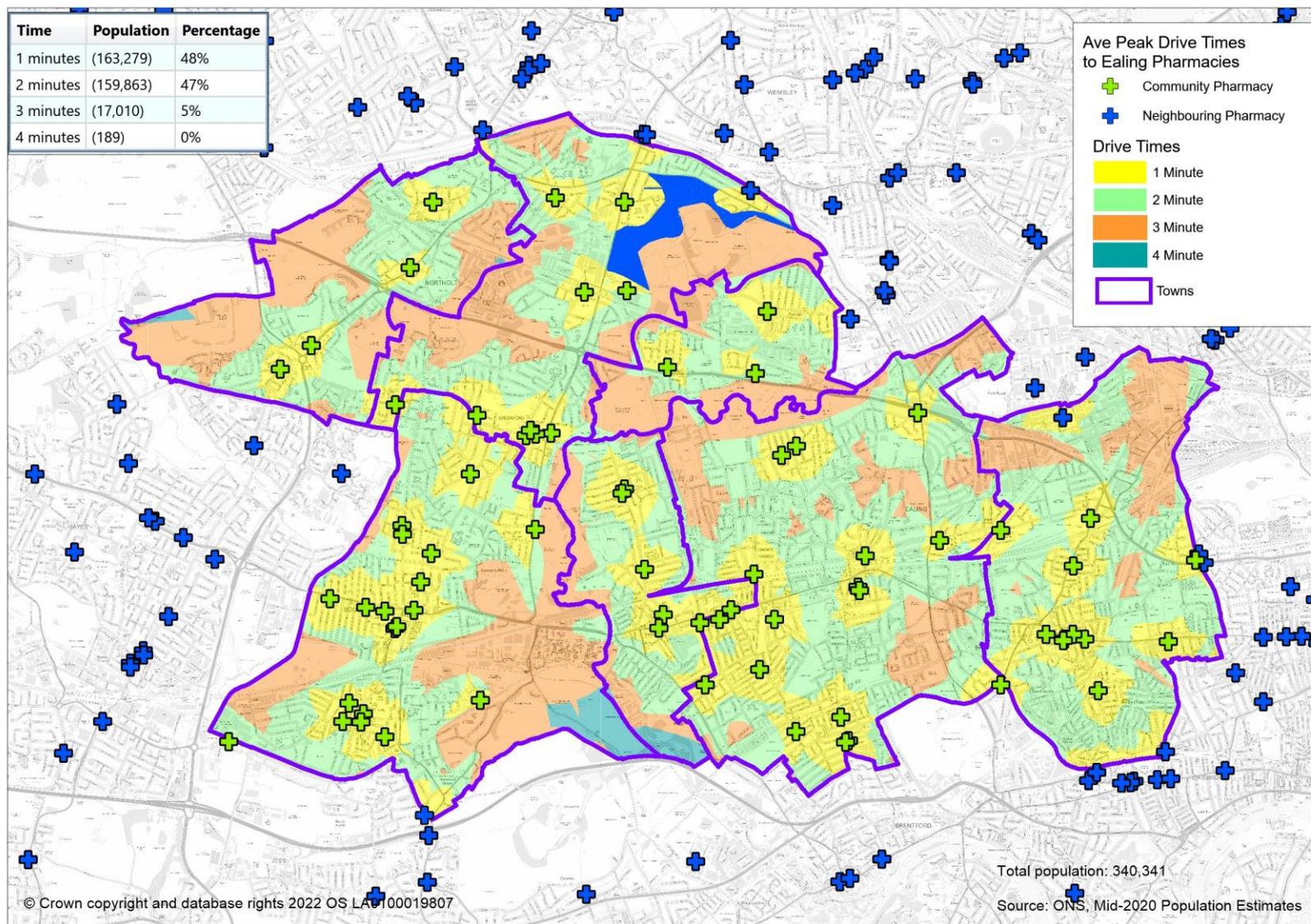
Map 2: Pharmacies and IMD 2019 by output area



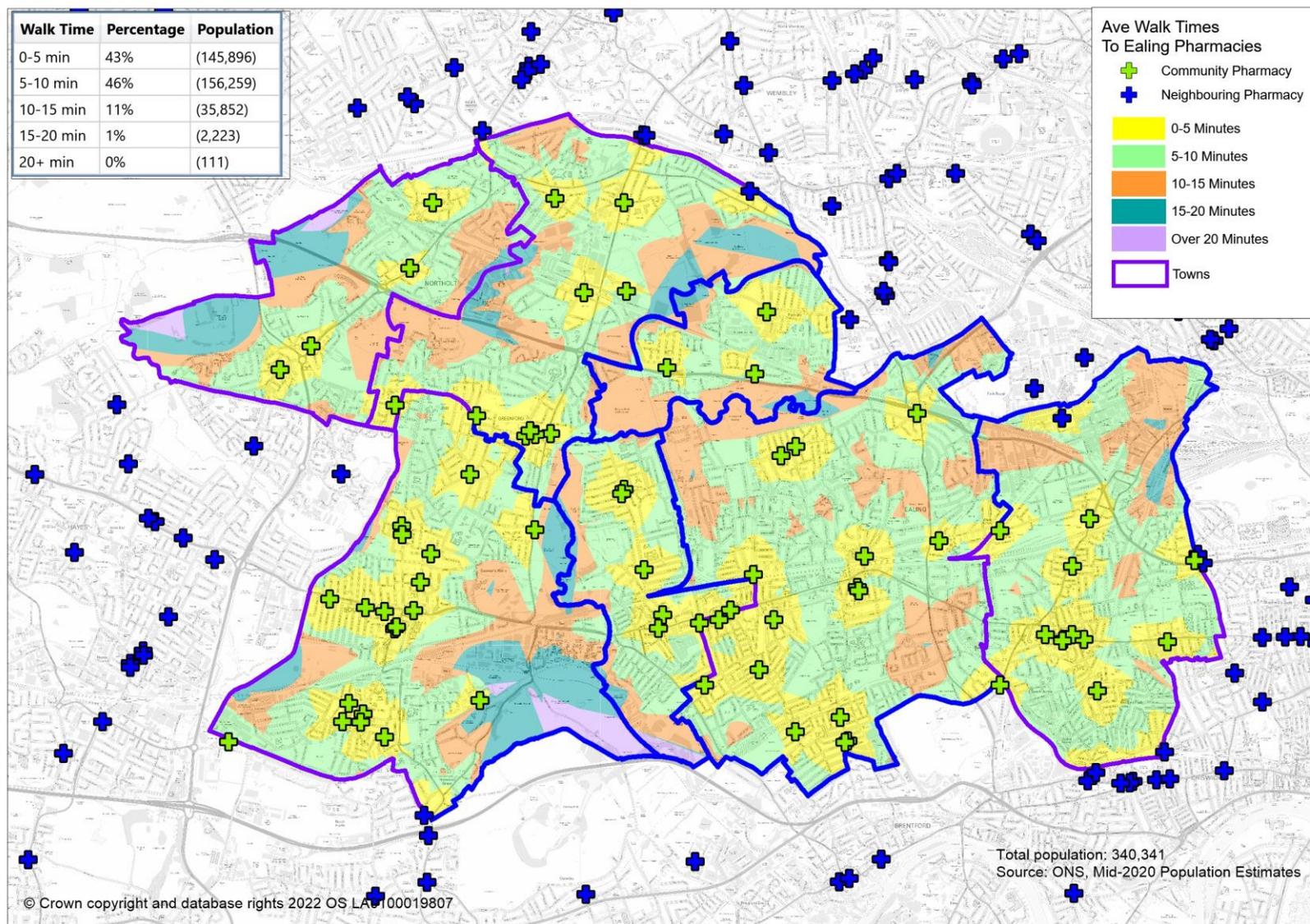
Map 3: All contractors in Ealing



Map 4: Peak driving times to nearest pharmacy



## Map 5: Walking times to nearest pharmacy



## Abbreviations

AUR – Appliance Use Review  
BME – Black and Minority Ethnic  
BSA – Business Services Authority  
C-19 – COVID-19  
CCG – Clinical Commissioning Group  
CHD – Coronary Heart Disease  
COPD – Chronic Obstructive Pulmonary Disease  
CPCF – Community Pharmacy Contractual Framework  
CPCS – Community Pharmacist Consultation Service  
DAC – Dispensing Appliance Contractor  
DHSC – Department of Health and Social Care  
DMIRS – Digital Minor Illness Referral Service  
DMS – Discharge Medicines Service  
DSP – Distance Selling Pharmacy  
EHC – Emergency Hormonal Contraception  
EoLC – End of Life Care  
ES – Essential Services  
GLA – Greater London Authority  
GP – General Practitioner  
HIV – Human Immunodeficiency Virus  
HWB – Health and Wellbeing Board  
HWS – Health and Wellbeing Strategy  
ICB – Integrated Care Board  
ICS – Integrated Care Systems  
IDAOPI – Income Deprivation Affecting Older People Index  
IMD – Index of Multiple Deprivation  
JSNA – Joint Strategic Needs Assessment  
LA – Local Authority  
LB – London Borough  
LCS – Locally Commissioned Services  
LFD – Lateral Flow Device

LFT – Lateral Flow Test  
LPC – Local Pharmaceutical Committee  
LPS – Local Pharmaceutical Service  
LSOA – Lower Layer Super Output Areas  
LTP – Long Term Plan  
MUR – Medicines Use Review  
MYE – Mid-Year Population Estimate  
NHS – National Health Service  
NHSE&I – NHS England and NHS Improvement  
NICE – National Institute for Health and Care Excellence  
NMS – New Medicine Service  
NUMSAS – NHS Urgent Medicine Supply Advanced Service  
NWL – North West London  
ONS – Office for National Statistics  
PANSI – Projecting Adult Needs and Service Information  
PCN – Primary Care Network  
PCT – Primary Care Trust  
PhAS – Pharmacy Access Scheme  
PHE – Public Health England  
PNA – Pharmaceutical Needs Assessment  
POCT – Point of Care Testing  
POPPI – Projecting Older People Population Information  
PQS – Pharmacy Quality Scheme  
PSNC – Pharmaceutical Services Negotiating Committee  
PWID – People Who Inject Drugs  
SAC – Stoma Appliance Customisation  
SAR – Standardised Admission Ratio  
SMR – Standardised Mortality Ratio  
STI – Sexually Transmitted Infection  
TIA – Transient Ischaemic Attack