

Draft Pharmaceutical Needs Assessment 2022

Ealing
Health and Wellbeing Board

This 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.



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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 coronavirus 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 draft 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 72 community pharmacies and 4 Distance Selling Pharmacies (DSPs) (as of February 2022) for a population of around 340,300. Combining these, Ealing has an average of 22.3 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 pharmeutical services deemed necessary by Ealing HWB.

Section 1: Introduction

1.1 Background

The NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (SI 2013/349),¹ 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 coronavirus pandemic, the Department of Health and Social Care 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	The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 outlines 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 coronavirus pandemic

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

1.1.1 NHS Long Term Plan²

The NHS Long Term Plan 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. Table 2 identifies the priority clinical areas that could be affected by community pharmacy services. A more detailed description is available in Section 2.1 of this document.

¹ The NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 www.legislation.gov.uk/uksi/2013/349/contents/made

² NHSE&I. NHS Long Term Plan. www.longtermplan.nhs.uk/

Table 2: Priority clinical areas in the LTP include:

Smoking	Cancer
Obesity	Cardiovascular disease
Alcohol	Stroke care
Antimicrobial resistance	Diabetes
Stronger NHS action on health inequalities	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 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.³
- Community Pharmacist Consultation Service (CPCS): 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 supply advanced scheme (NUMSAS) and local pilots of 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 from 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 Long Term Plan.
- 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.⁵ 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

³ Discharge Medicine Service (DMS) https://psnc.org.uk/services-commissioning/essential-services/discharge-medicines-service/

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

⁵ 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

pharmacies in England since 2015-16.⁶ In response to the pandemic, two Advanced Services were also created: the pandemic delivery service and COVID-19 lateral flow test 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 will no longer provide free universal symptomatic and asymptomatic testing for the general public in England.⁷

- Remote Access: From November 2020, community pharmacies had to facilitate remote access to pharmaceutical services at or from the pharmacy premises.⁸
- Pharmacy Quality Scheme (PQS): The PQS scheme is a voluntary scheme that forms part of the Community Pharmacy Contractual Framework (CPCF).⁹ It supports delivery of the NHS Long Term Plan 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 are currently (at the time of writing) under development.

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.

⁶ 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

⁷ Gov.uk. Living with COVID-19. 23 February 2022. www.gov.uk/government/publications/covid-19-response-living-with-covid-19

⁸ Regs explainer (#12): Facilitating remote access to pharmacy services : PSNC Main site

⁹ NHSE&I. Pharmacy Quality Scheme. September 2021. <u>www.england.nhs.uk/wp-content/uploads/2021/09/Pharmacy-Quality-Scheme-guidance-September-2021-22-Final.pdf</u>

The PNA should also be considered alongside the local authority's Joint Strategic Needs Assessment (JSNA).¹⁰ For the purpose of this PNA, the JSNA used is an online webbased 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 the 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
- 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
- Local pharmaceutical service providers

¹⁰ Ealing Joint Strategic Needs Assessment (JSNA).

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 Community Pharmacy Contractual Framework, last agreed in 2019,¹¹ 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 Distance Selling Pharmacies (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.

1.3.2 Dispensing Appliance Contractors (DACs)

Dispensing Appliance Contractors (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 Reviews (AURs) and Stoma Appliance Customisation (SAC).

Pharmacy contractors, dispensing doctors and Local Pharmaceutical Service (LPS) providers may supply appliances, but DACs are unable to supply medicines.

¹¹ DHSC. Community Pharmacy Contractual Framework. 22 July 2019. www.gov.uk/government/publications/community-pharmacy-contractual-framework-2019-to-2024

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) providers¹²

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.

Pharmacies in areas with dense provision of pharmacies remain excluded from the scheme. 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.

Distance Selling Pharmacies (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.

¹² DHSC. 2022 Pharmacy Access Scheme: guidance. 3 February 2022. https://www.gov.uk/government/publications/community-pharmacy-contractual-framework-2019-to-2024/2021-to-2022-pharmacy-access-scheme-guidance

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 Health and Wellbeing Board (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 statements¹³ 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

¹³ Ealing PNA 2018 and subsequent supplementary statements. www.ealing.gov.uk/downloads/download/3050/pharmaceutical_needs_assessment

- Circulated 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.

No responses were received. A copy of the commissioner questionnaire can be found in Appendix E.

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 commissioner 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 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 Feburary 2022 was used for this assessment.

Step 5: 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 bought about with the easing of restrictions that had been bought 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.

1.5 Localities for the purpose of the PNA

The PNA Steering Group, at its first meeting, considered how the localities within the 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 the 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 Plan¹⁴

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.

Table 3: Priority clinical areas in the LTP include:

Prevention	Better care for major health conditions
Smoking	Cancer
Obesity	Cardiovascular disease
Alcohol	Stroke care
Antimicrobial resistance	Diabetes
Stronger NHS action on health inequalities	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 don't need primary medical services. Pharmacy connection schemes
 have developed into the Community Pharmacist Consultation Service (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.
- 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

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¹⁴ NHS Long Term Plan <u>www.longtermplan.nhs.uk/</u>

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 New Medicine Service (NMS) is an Advanced Service which 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.¹⁵ 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.

2.2 Ealing Health and Wellbeing Strategy

The current Ealing Health and Wellbeing Strategy (HWS) (2016-21)¹⁶ 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
- Enable everyone to be healthy and independent for as long as possible, helping to prevent or delay the need for social and acute care

¹⁵ Ealing JSNA.

www.ealing.gov.uk/info/201072/strategies plans and policies/1963/ealings joint strategic needs assessment/1

¹⁶ Ealing Health and Wellbeing Strategy 2016-21.

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 2.3 and 2.4 further examine the population of Ealing characteristics and major causes of ill health.

2.3 Population characteristics

2.3.1 Overview

The population of Ealing has risen from 307,300 in 2001 to 340,300 in 2020. The number of males and females are evenly spread –171,800 males and 168,600 females. Ealing is the fourth largest London borough in terms of population,¹⁷ 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).¹⁸

2.3.2 Age

Compared with England, Ealing has a higher proportion of males and females aged 0–14 and 25–49 years, 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 years (Table 4).

Table 5 shows population numbers and proportions for Ealing localities, London Borough (LB) of Ealing and England. Amongst localities inn 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 localitiess have the highest proportion of people aged 65 and over (all 14% or just over).

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¹⁷ ONS. MYE 2020.

¹⁸ ONS. MYE 2020. Population estimates and population density in the UK mid-2001 to mid-2020

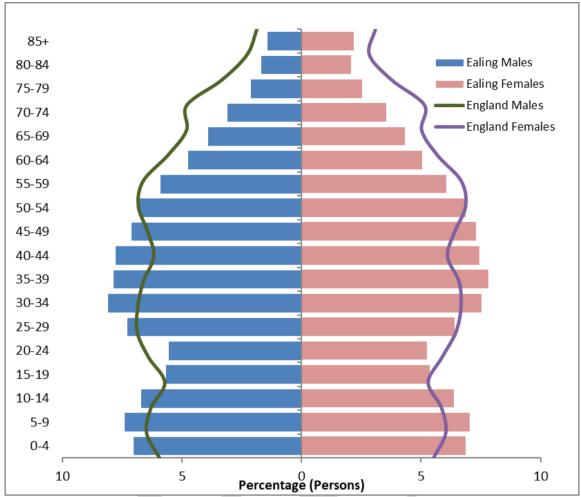


Figure 1: Population pyramid, Ealing 2020

Source: ONS MYE 2020

Table 4: Ealing's population estimates and proportions by sex and five-year-age-bands, 2021

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

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

Table 5: 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 (%)
Acton	66,600	13,100	19.7	7,700	11.6	38,200	57.4	7,600	11.4
Ealing	69,800	13,500	19.4	6,200	8.9	40,200	57.6	9,900	14.2
Greenford	45,800	10,500	23.0	4,300	9.4	24,500	53.5	6,500	14.2
Hanwell	27,700	6,600	23.8	2,400	8.7	15,000	54.2	3,700	13.4
Northolt	30,200	7,900	26.3	2,900	9.6	15,700	52.0	3,700	12.3
Perivale	15,700	3,300	20.7	1,500	9.6	8,800	56.1	2,200	14.0
Southall	70,600	16,400	23.3	6,900	9.8	37,600	53.3	9,800	13.9
Ealing LB	340,300	74,500	21.9	33,100	9.7	187,100	55.0	45,700	13.4
England	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)

2.3.3 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 6). 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 6: 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

2.3.4 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 7). 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 7: 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

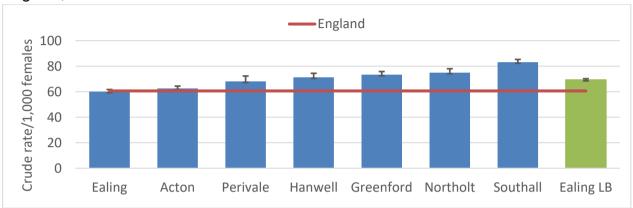
Source: PHE. Local Health Profile 2021

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

2.3.5 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 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

2.3.6 Diversity

2.3.6.1 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.¹⁹ Ealing has a larger proportion of non-white ethnic population (54%²⁰) compared with the London (42%) and England (15%) averages.²¹ The largest group among non-white ethnic groups is Asian (30%), followed by Black (11%) (Figure 3).

¹⁹ 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.

²⁰ GLA. 2016-based Central Trend Ethnic Group Projections. Nov 2017.

²¹ National Census Data. 2011.

1%
7%
5%

White

Asian/Asian British

Black/Black British

Mixed

Chinese

Other

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).

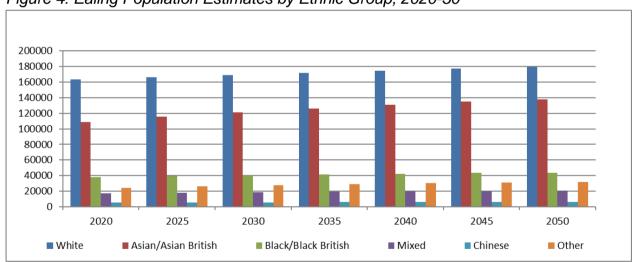


Figure 4: Ealing Population Estimates by Ethnic Group, 2020-50

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

The proportion of residents from ethinic minority groups varies between areas, with the highest levels in the Southall area (Table 8).

Table 8: Ethnic minority population in Ealing localities and wards, Ealing and England, 2011

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

Source: ONS Census 2011

2.3.6.2 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 9).

Table 9: 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	Hobbayne	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
Ealing LB		23,253	7.2
England		843,845	1.7

Source: ONS Census 2011

2.3.6.3 School children

The majority of children registered in Ealing's state-funded schools and special schools are from ethnic minority groups (Table 10). Amongst ethnic minority groups, the highest proportion of children in local schools are Asian.

Table 10: 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
All White	72.8	30.0	71.7	27.4	72.6	23.1
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
All Mixed	6.6	9.5	6.0	8.4	6.3	8.6
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
All Asian	11.3	30.4	11.7	30.0	10.2	28.8
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
All Black	5.4	12.3	6.2	15.9	7.0	21.4
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
Chinese	0.5	0.5	0.4	0.4	0.3	0.3
Any other ethnic group	2.1	16.0	2.2	15.7	1.8	15.7
Unclassified	1.3	1.3	2.0	2.2	1.8	2.0
Minority ethnic pupils	33.9	85.0	33.0	83.4	30.5	86.7

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

2.3.6.4 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 11). 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 11: 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
Ealing	370	46	345	42	345	42	355	43	330	40
London	9,860	50	9,910	50	9,890	49	10,030	50	10,010	49
England	70,440	60	72,670	62	75,420	64	78,150	65	80,080	67

Source: DfE. 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 12).

Table 12: Long-term support needs of younger and older adults met by admission to residential and nursing care²² (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

2.3.6.5 Older people

It is estimated that there are 47,000 older people (aged 65 and over) living in Ealing (Table 5). 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 13).

²² 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 13: Percentage of older people living in income-deprived homes/living alone, Ealing localities and wards, Ealing and England

Locality Ward			orived older ged 60+ ²⁴	People living alone aged 65+ ²⁵		
		Number	%	Number	%	
	Acton Central	524	23.5	558	37.9	
Acton	East Acton	636	26.0	520	33.9	
Acton	South Acton	756	31.8	639	38.8	
	Southfield	324	14.9	542	40.3	
	Cleveland	491	17.5	630	36.2	
	Ealing Broadway	392	16.2	561	33.5	
Ealing	Ealing Common	456	18.8	556	35.1	
Calling	Hanger Hill	362	12.5	608	30.6	
	Northfield	285	12.8	523	35.1	
	Walpole	357	17.2	555	39.5	
	Greenford Broadway	692	24.9	623	32.0	
Greenford	Greenford Green	486	19.0	478	28.1	
	North Greenford	455	17.4	409	24.4	
Hanwell	Elthorne	509	23.8	490	34.7	
Hallwell	Hobbayne	577	23.5	569	35.5	
Northolt	Northolt Mandeville	535	22.2	516	31.9	
Northolt	Northolt West End	730	32.6	603	40.9	
Perivale	Perivale	510	19.0	425	25.3	
	Dormers Wells	766	29.7	420	26.0	
	Lady Margaret	510	21.1	283	18.6	
Southall	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	

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

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

2.3.6.6 Less-abled populations

Table 14 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 14: 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	Englan d (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

Indicator	Ealing (2020) No	Ealing (2020) Rate	Ealing (2030) No	Ealing (2030) Rate	England (2020) No	Englan d (2020) Rate	England (2030) No	England (2030) Rate
People aged 18–64 predicted to have severe hearing loss	1,205	564	1203	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: PANSI²³ and POPPI,²⁴ with ONS 2018-based Population Projections, 2020

²³ PANSI. <u>www.pansi.org.uk/</u>

²⁴ POPPI. www.poppi.org.uk/

2.3.6.7 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 15).

Table 15: 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

2.3.6.8 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).²⁵ 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 95²⁶). In March 2021, Ealing was among London boroughs with the highest asylum-seeking population; 468 asylum seekers were receiving support under section 95.²⁷

2.3.6.9 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. 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. On the communities who is a commodation.

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:

²⁵ Home Office. Immigration Statistics (Asylum and Resettlement – Outcome analysis of asylum applications). 2021.

²⁶ 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.'

²⁷ Home Office. Immigration Statistics 2021: Asylum Data Tables, Volume 4. 2021.

²⁸ Department for Levelling Up, Housing and Communities. Traveller Caravan Count. 15 December 2021. www.gov.uk/government/collections/traveller-caravan-count

²⁹ Ealing Council. Travellers in Ealing. www.egfl.org.uk/school-effectiveness/teaching-and-learning/equality-and-achievement/gypsy-roma-and-traveller-0

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.

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.

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.

2.3.7 Deprivation

Figure 5 shows Ealing wards and levels of deprivation based on the Index of Multiple Deprivation (IMD) 2019 LSOA ranking.³⁰ 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.

³⁰ 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

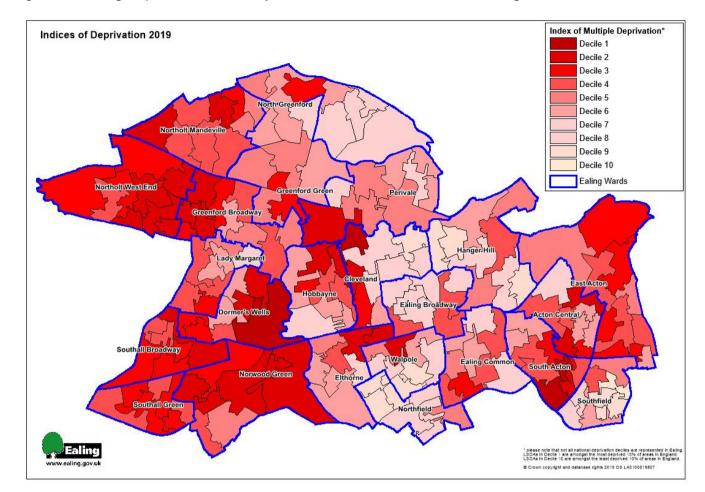


Figure 5: Ealing deprivation levels by LSOA based on IMD 2019 ranking

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 on Figure 5.

2.4 Other considerations

2.4.1 Burden of disease

Table 16 shows GP recorded prevalence rates for leading causes of long-term ill health in Ealing as compared with England rates.

Table 16: 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 (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 (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

2.4.2 Hospital admissions

Table 17 shows all causes, coronary heart disease (CHD), stroke, myocardial infarction (heart attack) and chronic obstructive pulmonary disease (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 17: All causes, CHD, stroke, myocardial infarction and COPD emergency standardised admission ratios (SAR), Ealing localities, wards, Ealing overall and England, 2015-16 to 2019-20

Locality	Ward	All causes	СНД	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	СНД	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: Public Health England, Local Health Profile, 2021

	<u> </u>			
	Statistically significantly lower than England average			
	The difference is not statistically significant			
Statistically significantly higher than England				

2.4.3 Causes of death

Table 18 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 mortality ratios for all circulatory diseases were similar.

Table 18: All causes, all cancers, circulatory and respiratory diseases standardised mortality ratios (SMR), 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: Public Health England, Local Health Profile, 2021

Ocuroc.	Codroc: T dollo Troditit England, Eccal Troditit T Tollic, Ecc T					
	Statistically significantly lower than England average					
	The difference is not statistically significant					
	Statistically significantly higher than England average					

2.4.4 Palliative care

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

Table 19: Place of death, Ealing and England, 2020

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

Source: ONS Deaths by place of occurrence, 2021

2.4.5 Lifestyle-related morbidity

Table 20 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 20.

Table 20: 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, NCMP 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

2.4.6 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 to London rates.

Table 21: 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 ³² (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/100,0000)	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: Public Health England, QOF; Mental Health Dementia and Neurology Profile, Co-occurring substance misuse and mental health issues (for Drug Misuse indicator)

^{****} 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

^{*} 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

2.4.7 COVID-19 pandemic

As of late January 2022, Ealing's cumulative rates for both COVID-19 infections and mortality since the start of the pandemic are statistically significantly higher than for London and England (Table 22).

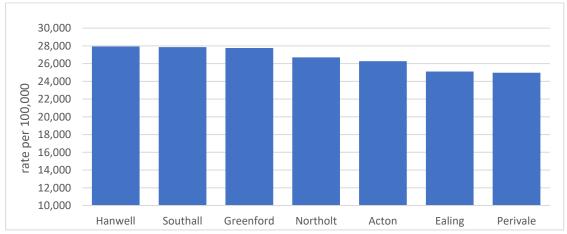
Table 19: COVID-19 cumulative reported rates for Ealing, London and England (27 January 2022)

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

Source: PHE. https://coronavirus.data.gov.uk; ONS Mortality Data31

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)

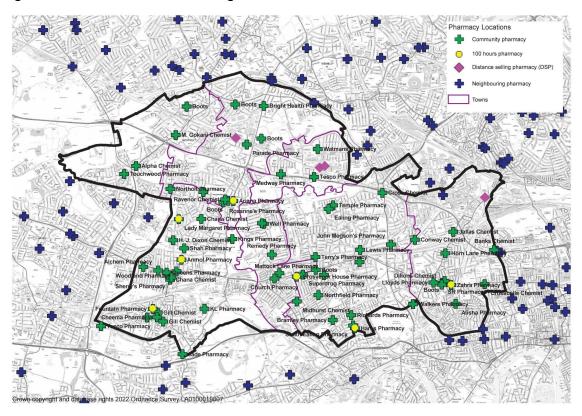


Source: PHE. https://coronavirus.data.gov.uk

³

Section 3: NHS pharmaceutical services provision, currently commissioned

Figure 7: All contractors in Ealing



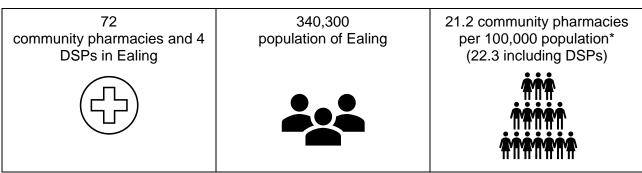
(A full suite of full size maps are also included as part of the appendices)

There are a total of 76 contractors in Ealing.

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

Where discussed the total number of community pharmacies includes DSP.

3.1 Community pharmacies



*Correct as of February 2022

In England during the coronavirus pandemic there was a net loss of 215 pharmacies, with 236 opening while 451 closed during 2020-21, which resulted in the lowest number of pharmacies in England since 2015-16.³²

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 20 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 20: Number of pharmacies (including DSPs) per 100,000 population

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

Source: ONS Mid-Year Population³³

Table 21 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

³² 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

ONS. Estimates of the population for the UK, England and Wales, Scotland and Northern Ireland. <a href="https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates/datasets/populatione

Table 21: A breakdown of average community pharmacies per 100,000 population

Locality	Number of community pharmacies (Feb 2022)	Number of Distance Selling Pharmacies	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	20	0	70,600	28.3
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 1.3 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 22 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 22: 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 23 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 23: 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 (9.2%)

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 article³⁴ suggests

- 89% of the population in England has access to a community pharmacy within a 20minute 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.

³⁴ 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://bmiopen.bmi.com/content/4/8/e005764.full.pdf%20html

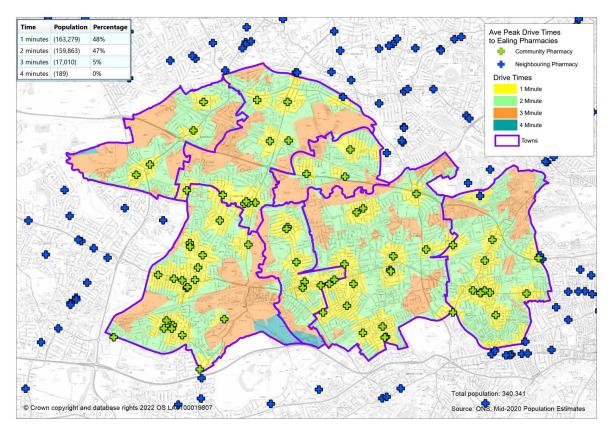
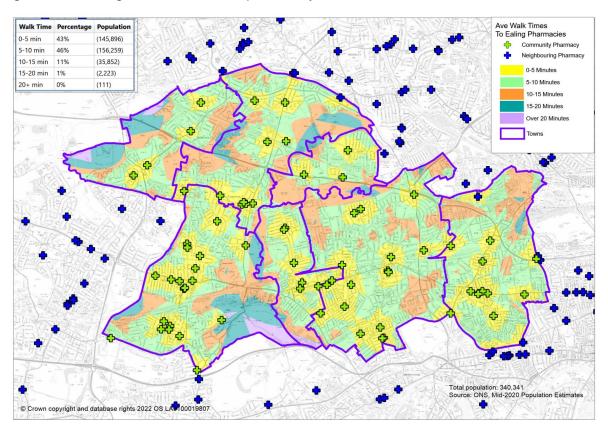


Figure 8: Peak driving times to nearest pharmacy





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)

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) varies within each locality; they are listed in Table 24.

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 from Table 24. 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 24: 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 6pm	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	95%	85%	25%
Ealing HWB area (2021)	67%	90%	21%

^{*}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 number 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 patients can easily access medication if required. In Ealing there are two pharmacies that are commissioned specifically for bank holiday coverage:

Jallas Pharmacy, 313 Horn Lane, Acton W3 0BU	Christmas Day and Easter Sunday: 10:00–18:00
Jallas Pharmacy, 313 Horn Lane, Acton W3 0BU	All other bank holidays: 10:00–14:00
Remedy Chemist, 83 Greenford Avenue, Hanwell W7 1LJ	Christmas Day and Easter Sunday: 10:00–18:00
Remedy Chemist, 83 Greenford Avenue, Hanwell W7 1LJ	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 25 below. Details of individual pharmacy providers can be seen in Appendix A.

Note: Community pharmacy Covid-19 lateral flow distribution service will stop on April 1st, 2022, and Covid- 19 medicine delivery service will stop on March 5th, 2022, at 23:59 and have therefore not been included in the table below.

Table 25: Providers of Advanced Services in Ealing (2020-21) by percentage of community pharmacy providers by locality (number of pharmacies)

<u> </u>		, ,	<u> </u>				
Advanced Service	Acton (12)	Ealing (17)	Greenford (11)	Hanwell (7)	Northolt (4)	Perivale (5)	Southall (20)
New Medicine Service (NMS)	67%	83%	82%	86%	100%	80%	85%
Community pharmacy seasonal influenza vaccination	75%	65%	82%	57%	75%	40%	85%
Community Pharmacist Consultation Service (CPCS)*	67%	82%	82%	71%	50%	60%	85%
Hypertension case- finding service	25%	59%	45%	57%	25%	50%	40%

^{*} This includes CPCS and GP CPCS consultations

There is no data on Appliance Use Review (AUR).

The information in Table 26 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 1.3 lists all Advanced Services which 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 26 to demonstrate how many are actually providing these Advanced Services across the area.

Table 26: Advanced Service provision by percentage of providers currently providing

Advanced Service	England	London	Ealing
New Medicine Service (NMS)*	85%	81.5%	82%
Community pharmacy seasonal influenza vaccination*	63.5%	67%	75%
Community Pharmacist Consultation Service (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%
Appliance Use Review (AUR)*	0.3%	0.2%	0
Stoma Appliance Customisation (SAC)*	8%	2.1%	1%

Source: NHS BSA Dispensing Data

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

Table 26 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 26 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.³⁵ A recent report (October 2021) demonstrated there are currently over 6,500 GP practices in England and only 862 practices referred patients to CPCS.³⁶

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.

There has been no recorded provision of the AUR service from community pharmacy providers in Ealing up until 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

^{*} Data from NHSA BSA 2021-22 7 months

^{**} Data from NHS BSA November 2021

³⁵ NHS BSA. Dispensing Data. <u>www.nhsbsa.nhs.uk/prescription-data/dispensing-data</u>

³⁶ 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

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 Advanced Flu Vaccination 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 their location is near to the hubs and out-of-hours providers so 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 Dispensing Appliance Contractors (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

A Distance Selling Pharmacy (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 providers (LPS)

There is 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 the Pharmacy Access Scheme (PhAS), to continue to support patient access to isolated, eligible pharmacies.

There is 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.

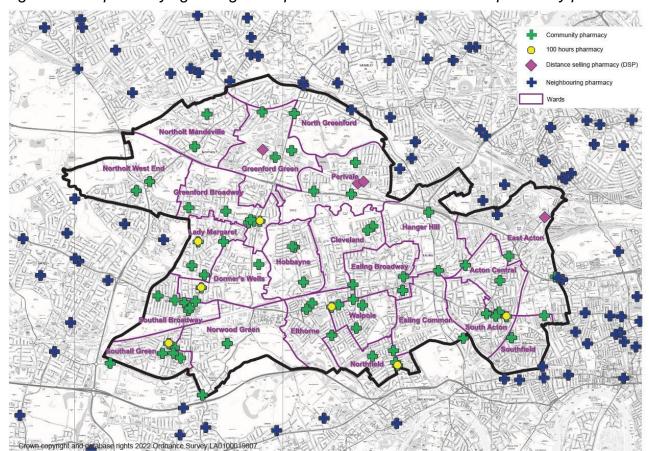


Figure 10: Map identifying Ealing HWB pharmacies and cross-border pharmacy provision

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 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 27.

Table 27: Commissioned services from community pharmacies in Ealing

Commissioned service	CCG-commissioned service	LA-commissioned service
Supervised consumption of opiates		Х
Needle Exchange Service		Х
Emergency Hormonal Contraception (EHC)		Х
COVID-19 testing (stopping 1 April 2022)		Х
In-hours on-demand anticipatory medicines service	х	
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 integrated care boards as part of the Integrated Care Systems (ICS). It is anticipated that ICS 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 Distance Selling (internet) Pharmacies (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 a further 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 2010,³⁷ community pharmacies are required to make 'reasonable adjustments' to their services to ensure they are accessible by all groups, including lessabled 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.

60

³⁷ Equality Act 2010. 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 (3 respondents (1%) prefer online pharmacies)
- 46% have visited a pharmacy once a month or more for themselves in the past six months; 7 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 (6 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 Discharge Medication Service (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 28 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 28: Public questionnaire respondents about services

Service	% of respondents who were aware	% of respondent who 'would like to see always provided'
DMS	25%	59%
CPCS	20%	59%
Flu vaccination	86%	85%
NMS	27%	48%
Stop smoking/NRT	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.

Table 29 provides the demographic analysis of respondents.

Table 29a: Demographic analysis of community pharmacy user questionnaire respondents - Sex

Sex	Male	Female
Percentage	54%	44%

Table 29b: Demographic analysis of community pharmacy user questionnaire respondents - Age

Age Range	<18	18–24	25–34	35–44	45–54	55–64	65–74	>75	Prefer not to say
Percentage	0%	2%	2%	6%	16%	30%	31%	12%	1%

Table 29c: Demographic analysis of community pharmacy user questionnaire respondents – Illness or disability

Illness or disability?	Yes	No	Prefer not to say
Percentage	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 Community Pharmacy Contractual Framework that were introduced during the COVID-19 pandemic.

The changes were agreed by PSNC with NHSE&I and the Department of Health and Social Care (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 Pharmaceutical Services Negotiating Committee (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.³⁸

At present it is not clear what shape services locally commissioned by CCGs will take in the long-term future. The development of the Integrated Care System (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,³⁹ 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.

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

³⁹ ONS. MYE. 2020.

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.

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.⁴⁰ 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 to 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

⁴⁰ 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.

6.1.2 Ealing Health and Wellbeing Strategy (HWS)

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 neighborhoods 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

Table 30: LTP priorities that can be supported from community pharmacy

Prevention	Better care for major health conditions
Smoking	Cancer
Obesity	Cardiovascular disease
Alcohol	Stroke care
Antimicrobial resistance	Diabetes
Stronger NHS action on health inequalities	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 **Community Pharmacist Consultation Service (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 New Medicine Service (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 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

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 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 Community Pharmacy Contractual Framework (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 lateral flow device distribution service (stopping 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

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 lateral flow device 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 lateral flow device (LFD) test kits readily available at community pharmacies for asymptomatic people, to identify COVID-positive cases in the community and break the chain of transmission.

From 24 February 2022, the government has been easing COVID-19 restrictions. Therefore, the pandemic delivery was decommissioned on 6 March 2022.

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 service (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, patients referred via 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 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.

 $^{^{41}\} Gov.uk.\ Living\ with\ COVID-19.\ 23\ February\ 2022.\ \underline{www.gov.uk/government/publications/covid-19-response-living-with-covid-19/covid-19-response-living-with-covid-19}$

Vaccination is a key intervention to protect at-risk groups, such as older people, people living with diabetes, COPD or CVD, 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 (ABPM). 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

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

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 Business Services Authority (NHS BSA) has published a list of medicines that are suitable for NMS.⁴²

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 past 12 months (to 14 January 2022).

6.4.2 London Vaccination Service

This service is provided in addition to the National Advanced Flu Vaccination 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 holiday

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

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.

Appendix A provides a summary of Locally Commissioned Services (LCS) within Ealing pharmacies and Sections 4.1 and 4.2 provide a description of those services.

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

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%) as compared with 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 to 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 Local Pharmaceutical Committee 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 outof-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 of 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 2.4.6.

In Ealing, 7 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. 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

Five pharmacies (7%) 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 (13%) 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 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 72 community pharmacies and 4 DSPs, making a total of 76 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 (20)
DSP	1	0	1	0	0	2	0
100-hour pharmacy	1 (9%)	2 (12%)	1 (10%)	0	0	0	3 (15%)
After 18:30 weekday	2 (18%)	6 (35%)	4 (40%)	1 (14%)	1 (25%)	3 (100%)	18 (90%)
Saturday	11 (100%)	17 (100%)	8 (80%)	6 (86%)	4 (100%)	3 (100%)	16 (80%)
Sunday	1 (9%)	3 (18%)	3 (30%)	1 (14%)	0	1 (33%)	6 (30%)

^{*}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)

NHSE Advanced or Enhanced* Service	Acton (11)^	Ealing (17)	Greenfor d (10)^	Hanwell (7)	Northolt (4)	Perivale (3)	Southall (20)
NMS	8 (73%)	14 (82%)	9 (90%)	6 (86%)	4 (100%)	4 #	17 (85%)
CPCS	8 (73%)	14 (82%)	9 (90%)	5 (71%)	2 (50%)	3 (100%)	16 (80%)
Flu vaccination	9 (82%)	11 (78%)	9 (90%)	4 (57%)	3 (75%)	1 (33%)	16 (80%)
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%)	8 (40%)
Stop Smoking	0	0	0	0	0	0	0
C-19 vaccination*	0	4 (23%)	1 (10%)	1 (14%)	1 (25%)	0	1 (5%)
London Vaccination*	9 (82%)	12 (71%)	9 (90%)	6 (86%)	4 (100%)	2 (67%)	14 (70%)
Bank holiday coverage*	1 (9%)	0	0	1 (14%)	0	0	0

^{*}Enhanced

#One DSP listed as providing NMS in Perivale

Table 33: Provision of Locally Commissioned Services (CCG and LA) by locality (number of community pharmacies)

CCG	Acton (11^)	Ealing (17)	Greenfor d (10)^	Hanwell (7)	Northolt (4)	Perivale (3)^	Southa II (20)
In-hours access to palliative care medicines and advice	1 (9%)	2 (12%)	1 (10%)	1 (14%)	1 (25%)	1 (33%)	3 (15%)
LA							
Supervised consumption of opiates	2 (18%)	1 (6%)	0	0	1 (25%)	0	1 (5%)
Needle Exchange Service (NEX)	2 (18%)	2 (12%)	0	0	2 (50%)	0	2 (10%)
EHC	1 (9%)	2 (12%)	2 (20%)	0	1 (25%)	0	1 (5%)
Covid-19 Lateral Flow Testing	0	5 (29%)	3 (30%)	0	0	0	4 (20%)

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

[^]DSP does not provide any services

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
- Stoma Appliance Customisation
- 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. There is one DSP in Acton.

Of the 11 community pharmacies:

- 2 pharmacies (17%) are open after 6.30 pm on weekdays
- 11 pharmacies (92%) are open on Saturdays
- 1 pharmacy (8%) 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 HWBs 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 anyof these services):

- CPCS 8 (73%)
- NMS 8 (73%)
- Flu vaccination 9 (82%)
- Stoma Appliance Customisation 1 pharmacy 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 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 provides bank holiday provision for the whole HWB area

Regarding access to **locally commissioned services** within the 11 pharmacies:

- 1 pharmacy (9%) 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
- Significantly higher levels of hospital admission for stroke in South Acton
- 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.

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 20.5.

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 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 (78%)
- Stoma Appliance Customisation 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 (23%) 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
- 1 pharmacy (6%) provides the supervised consumption service
- 2 pharmacies (12%) 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 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 10 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%)
- Stoma Appliance Customisation 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 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 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 allcause SAR in the under 7-5s 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 7 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%)
- Stoma Appliance Customisation 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 provides the COVID-19 vaccination service
- 1 pharmacy provides bank holiday provision for the whole HWB area

Regarding access to **locally commissioned services** within the 7 pharmacies:

 1 pharmacy 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%)
- Stoma Appliance Customisation 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 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 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
- 1 pharmacy (25%) provide 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
- 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 20.56.

There is 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 are open after 6.30 pm on weekdays
- All 3 pharmacies are open on Saturdays
- 1 pharmacy 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[#]
- Flu vaccination 1 (33%)
- Stoma Appliance Customisation no pharmacy provides this service
- Hypertension case-finding service 2 (67%)
- C-19 LFD Distribution Service 3 (100%) (service now stopped)

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 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 are significantly higher levels 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 prevelance 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 20 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 20 community pharmacies:

- 18 pharmacies (90%) are open after 6.30 pm on weekdays
- 16 pharmacies (80%) are open on Saturdays
- 6 pharmacies (30%) are open on Sundays
- 17 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 16 (80%)
- NMS 17 (85%)
- Flu vaccination 16 (80%)
- Stoma Appliance Customisation no pharmacy provides this service
- Hypertension case-finding service 8 (40%)

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 (70%) provide the London Vaccination Service
- 1 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 20 pharmacies:

- 3 pharmacies (15%) 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
- 4 pharmacies (20%) provide the supervised C-19 LFT service
- 1 pharmacy (5%) provides the supervised consumption service
- 2 pharmacies (10%) 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) compared with 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
- Appliance Use Review
- Stoma Appliance Customisation

- 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 Commission**ervices 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 table below summarises the highest risk factors for causing death and disease for the Ealing population, for locality information see Section 6.6.

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

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 were 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. 78% of community pharmacies provide the London Vaccination Enhanced Service.

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 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. lateral flow test distribution and COVID-19 vaccination
- Managing 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, which 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 L discusses some possible services that could fulfil these criteria.

While <u>no gaps</u> in pharmaceutical service provision have been identified, the Steering Group recognise that the burden of health needs in Ealing will increase as the population grows and ages and would welcome proactive proposals from commissioners, including NHS England 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 which 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.

7.1 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 of 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 L 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

With regard to Locally Commissioned Services (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 L 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

												NI	HSE	&I /	Adv	anceo	i			HSE& hance		CCG		L	A	
Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	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	ЕНС	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	-	-	-	-	-	Υ	-	Υ	Υ	-		-	-	-	-	-	-	-	-
Zahra Pharmacy	FC091	Community	72 High Street, Acton, London	W3 6LE	06:30-22:30	08:00-20:00	09:00-17:00	Υ	-	-	-	-	Υ	-	Υ	Υ	-		-	Υ	-	Υ	,	,	-	-
Lloyds Pharmacy	FDD32	Community	1 Crown Street, Acton, London	W3 8SA	08:30-18:45	08:45-17:00	Closed	-	-	Υ	-	Υ	Υ	-	Υ	Υ	-		-	Υ	-	-	-	Υ	Υ	-
Jallas Chemist	FDR11		311-313 Horn Lane, Acton, London	W3 0BU	09:00-13:00, 14:00-18:30	09:00-18:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	Υ	-	-	-	-	-
Boots	FEL12	Community	Unit 17, The Oaks Shopping Centre, Acton High Street, London	W3 6RE	09:00-18:00	09:00-18:00	Closed	-	-	Υ	-	-	-	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
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	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	-
Conway Chemist	FLW42		8 Station Parade, West Acton, London	W3 0DS	09:00-18:30 (Wed 09:00-18:00)	09:00-13:30	Closed	-	-	Υ	-	-	-	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
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	-	-	Υ	-	-	Υ	-	-	Υ	-		-	-	-	-	-	Υ	Υ	-
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	-	-	-	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	-
SR Pharmacy	FX732	Community	155 High Street, Acton, London	W3 6LP	09:00-18:00	09:00-15:00	Closed	-	-	Υ	-	-	-	-	Υ	Υ	Υ		-	Υ	-	-	Υ	-	-	-
Alisha Pharmacy	FXY41	Community	257 Acton Lane, Chiswick	W4 5DG	09:00-18:30 (Wed 09:00-17:00)	09:00-13:00	Closed	-	-	Υ	-	-	Υ	-	-	Υ	-		-	Υ	-	-	-	-	-	-

Ealing locality

												NF	ISE	&I A	\ dv a	anced				HSE& hance		ccg		L	A	
Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Mondayto Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NMS	AUR	SAC	CPCS	Hep C testing	$^{\rm ST}$	C-19 LFD distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu Vaccination	Bank holidays	Anticipatory medicines	ЕНС	Supervised consumption	Needle exchange	C-19 test
Walkers Pharmacy	FA244		6 The Broadway, Gunnersbury Lane, London	W3 8HR	08:30-18:30	10:00-17:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	-	-	-	-	-	-	Υ
Midhurst Chemist	FA987		92 Elthorne Park Road, Ealing, London	W7 2JD	09:00-18:30 (Thu 09:00-14:00)	09:30-13:00	Closed	-	-	Υ	-	-	Υ	-	-	Υ	Υ		-	Υ	-	-	-	-	-	-
Richards Pharmacy	FAH22	Community	112 South Ealing Road, London	W5 4QJ	09:00-18:00	09:00-16:00	Closed	-	-	-	-	-	-	-	-	Υ	-		-	-	-	-	-	-	-	-
Lewis Pharmacy	FC280	Community	36 Haven Green, Ealing, London	W5 2NX	10:00-13:30, 14:30-18:00	10:00-15:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-		-	-	-	-
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	-	-	-	-	-	-	-	-	Υ	Υ		-	-	-	-	-	-	-	-
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	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Northfield Pharmacy	FGK24	Community	30 Northfield Avenue, London	W13 9RL	08:30-18:30 (Thu 08:30-18:00)	09:00-17:30	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	Υ	-	-	Υ
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	Υ	-	Υ	-	-	Υ	-	-	Υ	Υ		-	-	-	Υ	-	-	-	-
Ealing Pharmacy	FHN86	Community	157 Pitshanger Lane, Ealing, London	W5 1RH	09:00-18:00	09:00-17:30	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Boots	FHP49	Community	Unit 36, Ealing Broadway Centre, Ealing, London	W5 5JY	08:45-20:00	08:45-19:00	11:00-17:00	-	-	Υ	-	-	Υ	-	-	Υ	-		-	Υ	-	-	-	-	-	-
Mattock Lane Pharmacy	FKC09	Community	8 St John's Parade, Mattock Lane, London	W13 9LL	08:45-19:00	09:00-17:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		Υ	Υ	-	Υ	Υ	-	Υ	Υ
Cross Chemist	FM205	Community	5 Royal Parade, Hanger Lane, London	W5 1ET	08:30-19:00	08:30-13:00	Closed	-	-	Υ	-	-	Υ	-	-	Υ	-		Υ	Υ	-	-	-	Υ	Υ	-

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Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Mondayto Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NMS	AUR	SAC	ا م	Flu vaccination	C-19 LFD distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu Vaccination	Bank holidays	Anticipatory medicines	ЕНС	Supervised consumption	Needle exchange	19
South Ealing Pharmacy	FPM91	Community	186 South Ealing Road, Ealing, London	W5 4RJ	08:30-18:30	09:00-14:00	Closed	-	-	-	-	- -		Y	Υ	Υ		Υ	Υ	-	-	-	-	-	Υ
Temple Pharmacy	FTF00	Community	110 Pitshanger Lane, Ealing, London	W5 1QP	09:00-18:30	09:00-18:00	Closed	,	-	Υ	-	٠ ١		Y	Υ	-		Υ	Υ	-	-	-	-	-	-
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	Υ	-	Υ	-	- \		Υ	Υ	Υ		-	-	-	-	-	-	Υ	-
Terry's Pharmacy	FW270	Community	4 Castle Hill Parade, The Avenue, London	W13 8JP	09:00-18:00	09:00-13:00	Closed	-	-	Υ	-	- \	<i>/</i> -	Y	Υ	Υ		-	Υ	-	-	-	-	-	Υ
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	-	-	Υ	-	- ì	<i>/</i> -	Y	Υ	Υ		-	Υ	-	-	-	-	-	-

Greenford locality

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Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	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	ЕНС	Supervised consumption	Needle exchange	C-19 test
Parade Pharmacy	FDR42	Community	386 Oldfield Lane North, Greenford	UB6 8PU	09:00-18:00	09:00-13:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	-
Boots	FDX68	Community	Unit 11 Greenford Westway Retail Park, 1000 Greenford Road, Greenford	UB6 0UW	09:00-19:00	09:00-19:00	11:00-17:00	-	-	Υ		-	Υ	-	Υ	Υ	-			Υ	-	-	-	,	-	-
Boots	FFN11	Community	40-42 The Broadway, Greenford	UB6 9PT	09:00-18:00	09:00-18:00	11:00-17:00	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Northolt Pharmacy	FGJ27	Community	Grand Union Health Centre, Taywood Road, Northolt	UB5 6WL	09:00-18:30	Closed	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-		-	Υ
Bright Health Pharmacy	FH357	Community	1318 Greenford Road, Greenford	UB6 0HL	09:00-19:00	09:00-13:00	Closed	-	-	-	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	Υ
Roxanne's Pharmacy	FJJ99	Community	51 The Broadway, Greenford	UB6 9PN	09:00-18:00	09:00-17:30	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		Υ	Υ	-	-	Υ	-	-	-
Ravenor Chemist	FLK52	Community	70 The Broadway, Greenford	UB6 9QA	09:00-18:00	Closed	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	Υ	-	-	-
My Own Chemist	FM850	DSP	4-5 Northolt Trading Estate, Belvue Road, Northolt	UB5 5QS	09:00-14:00, 14:30-17:30	Closed	Closed	-	-	-	-	-	-	-	-	-	-		-	1	-	-	-	-	-	-
Chief Cornerstone Pharmacy	FT601	Community	4 Eastmead Avenue, Greenford	UB6 9RA	08:30-19:00	08:30-13:00	Closed	-	-	Υ	-	-	-	-	-	Υ	-		-	-	-	-	-	-	-	-
Boots	FWX06	Community	47A-47B Oldfield Circus, Northolt	UB5 4RR	09:00-18:00	09:00-18:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Ariana Pharmacy	FXK52	Community	472 Greenford Road, Greenford	UB6 8SQ	Mon 08:00-Wed 20:00 non stop; Thu-Fri 08:00-20:00	09:00-19:00	10:00-16:00	Υ	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	Υ	-	-	-	Υ

Hanwell locality

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Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	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	ЕНС	Supervised consumption	Needle exchange	C-19 test
Greenford Chemist	FC472		340 Greenford Avenue, Hanwell, London	W7 3DA	09:00-18:00	09:00-13:00	Closed	-	-	Υ	-	-	-	-	-	Υ	Υ		-	Υ	-	-	-	-	-	-
Superdrug Pharmacy	FHY42		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	-	,	Υ	-	-	Υ	-	Y	Υ	-		-	Υ	-		-	-	-	-
Boots	FJ498	Community	68 The Broadway, West Ealing, London	W13 0SR	09:00-18:00	09:00-18:00	12:00-16:00	-	-	Υ	-	-	Υ	-	-	Υ	-		-	Υ	-	-	-	-	-	-
Remedy Pharmacy	FK802	C:ommunity	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	-	,	Υ	-	-	-	-	-	Υ	Υ		Υ	-	Υ	Υ	-	-	-	-
Well Pharmacy	FL911		333 Greenford Avenue, London	W7 1JH	09:00-18:00	09:00-13:00	Closed	-	-	Υ	-	-	Υ	- '	Y	Υ	Υ		-	Υ	-	-	-	-	-	-
Church Pharmacy	FLA36	Community	83 Uxbridge Road, Hanwell, London	W7 3ST	09:00-19:30	09:00-18:30	Closed	-	-	-	-	-	Υ	- '	Y	Υ	-		-	Υ	-	-	-	-	-	-
Touchwood Pharmacy	FWW56	Community	Hanwell Heath Centre, 20 Church Road, London	W7 1DR	09:00-18:00	Closed	Closed	-	-	Υ	-	-	Υ	- '	Υ	Υ	Υ		-	Υ	-	-	-	-	-	-

Northolt locality

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Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Mondayto Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NMS	AUR	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
M. Gokani Chemist	FAF65	Community	32 Church Road, Northolt	UB5 5AB	09:00-19:00 (Wed 09:00-18:00)	09:00-14:00	Closed	-	-	Υ	- -	-	-	Υ	Υ	-		-	Υ	-	-	-	-	Υ	-
Alpha Chemist	FCY66	Community	480 Church Road, Northolt	UB5 5AU	09:00-18:00 (Wed 09:00-17:30)	09:00-13:00	Closed	-	-	Υ		Υ	-	Υ	Υ	-		-	Υ	-	Υ	Υ	-	-	-
Touchwood Pharmacy	FPW44		493-495 Yeading Lane, Northolt	UB5 6LN	09:00-18:00	09:00-13:00	Closed	-	-	Υ	- -	-	-	-	Υ	Υ		Υ	Υ	-	-	-	Υ	Υ	-
Boots	FTL27	Community	5 Haydock Green, Northolt	UB5 4AP	09:00-18:30	09:00-17:00	Closed	-	-	Υ		Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-

Perivale locality

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Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NMS	AUR	SAC	2	nep c tesung Flu vaccination	9 LF	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu Vaccination	Bank holidays	Anticipatory medicines	ЕНС	Supervised consumption	Needle exchange	191
Medway Pharmacy	FA150	Community	18 Medway Parade, Perivale	UB6 8HR	09:00-18:45 (Wed 09:00-14:00)	09:00-12:00	Closed	-	-	Υ	-	- '	Y	- -	Υ	Υ		-	-	-	-	-	-	-	-
PPRX Ltd	FGC61		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	,	,	Υ	-	- '	Y	- Y	Υ	Υ		,	Υ	-	Υ	-	-	-	-
Lloyds Direct	FN849	DSP	17 Wadsworth Road, Perivale, London	UB6 7JD	09:00-13:00, 14:00-18:00	Closed	Closed	-	-	Υ	-	-	-	- -	-	-		-	-	-	-	-	-	-	-
Tesco Pharmacy	FX886	Community	Hoover Building, Bideford Avenue, Perivale	UB6 8DW	08:00-20:00	08:00-20:00	10:00-16:00	-	-	Υ	-	- '	Y	- Y	Υ	-		-	Υ	-	-	-	-	-	-

Southall locality

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Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	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	ЕНС	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	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	-
Puri Pharmacy	FE009	Community	39 Western Road, Southall	UB2 5HE	09:15-19:00	Closed	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		,	Υ	-	-	-	-	Υ	Υ
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	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	-	-	-	-	-	-	-
Kings Pharmacy	FF912	Community	50 Greenford Avenue, Southall	UB6 9AT	09:30-19:00	09:30-12:30	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	-
Fountain Pharmacy	FGW38	Community	43 Featherstone Road, Southall	UB2 5AB	08:00-23:00	08:00-23:00	08:00-18:00	Υ	-	Υ	-	-	-	-	-	Υ	-		-	-	-	-	-	-	-	-
Gill Chemist	FH598	Community	31-33 King Street, Southall	UB2 4DG	09:00-20:30	09:00-20:30	12:00-19:00	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	Υ	-	-	-	Υ
Anmol Pharmacy	FHD61	Community	97 North Road, Southall	UB1 2JW	07:00-23:30 (Fri 06:00-23:30)	06:00-23:30	Closed	Υ	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	Υ	-	-	-	-
Jade Pharmacy	FHJ72		3 Crosslands Parade, Crosslands Avenue, Southall	UB2 5RB	09:00-17:00	09:00-13:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		Υ	-	-	Υ	-	-	-	Υ
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	-	-	-	-	-	-	-	-	Υ	,			-	-	-	-	-	-	-
Gill Chemist	FKD11	Community	79 Norwood Road, Southall	UB2 4EA	09:00-19:00	09:00-14:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Queens Pharmacy	FL684	Community	61 The Broadway, Southall	UB1 1JY	09:00-20:00	09:00-19:00	10:30-19:00	-	-	Υ	-	-	-	-	Υ	Υ	-		-	Υ	-	-	-	Υ	Υ	-
Shah Pharmacy	FLF32	Community	13 North Parade, North Road, Southall	UB1 2LF	09:00-19:00	Closed	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	Υ	-	-	-
Sherry's Pharmacy	FQP22	Community	48 South Road, Southall	UB1 1RR	09:30-19:00	Closed	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-

	ODS number	Pharmacy type	Address	Postcode	Monday to Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs				NH	ISE	E&I Advanced					NHSE&I Enhanced			ccg		LA		
Pharmacy name									PhAS	NMS	AUR	SAC	S	c tes	Flu vaccination	wition	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu Vaccination	Bank holidays	Anticipatory medicines		Supervised consumption	70 22	C-19 test
KL Pharmacy	FQQ74	Community	1-2 Tyler Road, Southall	UB2 4XQ	09:00-18:30	09:00-13:00	Closed	-	-	Υ	-	-	Υ	- '	Y	Υ	-		-	Υ	-	,	-	-	-	-
Woodland Pharmacy	FR895	Community	227 The Broadway, Southall	UB1 1ND	09:00-19:00 (Wed 09:00-17:00)	Closed	Closed	-	-	-	-	-	Υ	-	-	Υ	-		-	-	-	-	-	-	-	-
HJ Dixon Chemist	FTC65	Community	185 Lady Margaret Road, Southall	UB1 2PT	09:00-19:00	09:00-17:00	Closed	-	-	Υ	-	-	Υ	- '	Y	Υ	Υ		-	Υ	-	-	-	-	-	Υ
Lady Margaret Pharmacy	FTX12		223 Lady Margaret Road, Southall	UB1 2NH	07:00-23:00	07:00-20:00	10:00-17:00	Υ	-	Υ	-	-	Υ	- '	Y	Υ	-		-	-	-	-	-	-	-	-
Chana Chemist	FVM26	Community	52 South Road, Southall	UB1 1RQ	09:00-21:00	09:00-20:00	10:00-19:00	-	-	Υ	-	-	Υ	-	-	Υ	-		-	Υ	-	,	-	-	-	-
Chana Chemist	FVN27	Community	33 High Street, Southall	UB1 3HA	09:00-19:00	10:00-16:00	Closed	-	-	Υ	-	-	Υ	- '	Y	Υ	Υ		-	Υ	-	-	-	-	-	-
Chana Chemist	FYG50	Community	251 Allenby Road, Southall	UB1 2HB	09:00-19:00	09:00-18:00	Closed	-	-	-	-	-	-	- '	Y	Υ	Υ		-	Υ	-	-	-	-	-	-

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 Ealing Borough 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 the ICP 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 (PCTs) 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 the London Borough of 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 for its area
 - o Any Local Medical Committee 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
 - o 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 irector 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 a 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 have been commissioned by London Borough of 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	London Borough of Ealing Council
Rajiv Ahlawat	Strategic Intelligence & Corporate Performance Manager	London Borough of Ealing Council
Mira Mangara	Public Health Analyst	London Borough of Ealing Council

Delegate	Job title	Organisation		
Joanna Sumner	Assistant Director Communities	London Borough of Ealing Council		
Anthony Lewis	Head of Strategy, Performance and Intelligence	London Borough of Ealing Council		
Cheryl Curling	Media and Communications Manager	London Borough of Ealing Council		
Keith Lewis	Head of Marketing	London Borough of Ealing Council		
James Winstanley	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)		
Matthew Van Mol-Jones	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		
Boba Rangelov	Patient & Public Engagement and Equalities Manager	NWL CCG		
	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 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 31st 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

the purpose of planning approparty. For more detainttps://www.ealing.gov.uk/info	l on the	Public H	ealth privacy	/ notice p	on to any third blease visit:
1) Do you normally use a spe	ecific pharmac	y? (Please no	te this questior	n is required)	
☐ Yes – If happy to do so, ple	ease provide t	he name and	address below	:	
□ No					
☐ I prefer to use an online	pharmacy -	If happy to d	lo so, please	provide the w	vebsite below:
2) How would you rate your of this question is required)	overall satisfac	ction with your	regular/preferi	ed pharmacy?	? (Please note
□ Excellent □ Goo	d	□ Fair	□ Poor		
3) How easy or difficult has i pandemic? (Please note this	•		rmacy over the	e last 18 mont	hs, during the
□ Very easy □ Fairly easy	□Neither eas	y nor difficult	□ Fairly diffi	cult □ V	ery difficult
4) On a scale from 1 to 10 (1 local community pharmacy m	•		•	•	well does your
□1 □2 □3 □4	□ 5 □ 6	□ 7 □ 8	□ 9 □ 10)	
5) How important is each of t	he following a	spects to you	when choosing	a pharmacy?	Not at all
Г	important	important	important	important	important
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					

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

person) a pharmacy? For yourself: For someone else: ☐ Once a week or more □ Once a week or more ☐ Once a month □ Once a month □ Once every few months □ Once every few months ☐ Once in six months ☐ Once in six months ☐ I haven't visited/contacted a pharmacy ☐ I haven't visited/contacted a pharmacy in the last 6 months 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/dependent ☐ 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 □ Bicycle ☐ Wheelchair/mobility scooter □ Walk ☐ 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 _____

6) In the last six months, how frequently have you visited/contacted (spoken to, emailed or visited in

If you have answered that you don't travel to a pharmacy, please go to question 13.

10) If you travel to	a pharmacy, who	ere do you trav	el from? (Pleas	e select all that	apply)
□ Home	□ Work				
☐ Other, please sp	ecify				
11) On average, h	ow long does it ta	ake you to trave	el to a pharmac	y? (Please sele	ect one answer)
□ 0 to 15 minutes	-				
☐ 16 to 30 minutes	S				
□ Over 30 minutes	S				
12) Do you face ar apply)	ny of the following	difficulties whe	en travelling to a	a pharmacy? (P	lease select all that
☐ Lack of parking	□ Lac	k of suitable p	ublic transport		
☐ It's too far away	□ Lac	k of disabled a	ccess/facilities		
$\hfill\Box$ No, I don't face	any difficulty				
☐ Other, please sp	ecify				
13) What is the ranswer)	nost convenient	day for you to	visit/contact a	pharmacy? (F	Pleased select one
☐ Monday to Frida	ay □ Saturday	□ Sunday	□ Varies	☐ I don't mind	t
14) Is your preferre	ed pharmacy ope	n on the most	convenient day	for you?	
□ Yes □ N	No				
15) When do you	prefer to visit/con	tact a pharmac	y? (Please sele	ect one answer))
☐ Morning (8 am–	12 pm)	☐ Lunchtime	(12 pm–2 pm)	☐ Afternoon ((2 pm–6 pm)
□ Early evening (6	6 pm–8 pm)	□ Late eveni	ng (after 8 pm)	□ Varies	
□ I don't mind/no լ	preference				
16) Is your preferre	ed pharmacy ope	n at the most o	convenient time	for you/at your	preferred time?
□ Yes □ N				, , , , , , , , , , , , , , , , , , , ,	p
17) How frequen pharmacy? (Pleas			ounter (i.e. no	on-prescription)	medicine from a
□ Daily	□ Weekly	□ For	tnightly	☐ Monthly	□ Yearly
□ Rarely	□ Never				

18) Which of the following <u>pharmacy services</u> 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	□ Yes	□ No	
COVID-19 lateral flow device (LFD) distribution service	□ Yes	□ No	
COVID-19 asymptomatic testing using a lateral flow device (LFD)	□ Yes	□ No	
COVID-19 vaccination services	□ Yes	□ No	
Flu vaccination services	□ Yes	□ No	
Buying over the counter medicines	□ Yes	□ No	
Dispensing prescription medicines	□ Yes	□ No	
Dispensing appliances	□ Yes	□ No	
Repeat dispensing services	□ Yes	□ No	
Home delivery and prescription collection services	□ Yes	□ No	
Medication review	□ Yes	□ No	
New medicine service	□ Yes	□ No	
Discharge from hospital Medicines Service	□ Yes	□ No	
Emergency supply of prescription medicines	□ Yes	□ No	
Disposal of unwanted medicines	□ Yes	□ No	
Appliance Use Review	□ Yes	□ No	
Community Pharmacist Consultation Service (urgent care referral)	□ Yes	□ No	
Hepatitis testing service	□ Yes	□ No	
Stoma appliance customisation service	□ Yes	□ No	
Needle exchange	□ Yes	□ No	
Stopping smoking / nicotine replacement therapy	□ Yes	□ No	
Sexual health services (chlamydia testing /treating, condom distribution, emergency contraception)	□ Yes	□ No	
Immediate access to specialist drugs e.g. palliative care medicines	□ Yes	□ No	
Supervised consumption of methadone and buprenorphine	□ Yes	□ No	
Travel immunisation (some pharmacies)	□ Yes	□ No	
Other, please specify	□ Yes	□ No	

19) Which of the following <u>pharmacy services</u> 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	☐ Yes ☐ No ☐ No opinion
COVID-19 lateral flow device (LFD) distribution service	☐ Yes ☐ No ☐ No opinion
COVID-19 asymptomatic testing using a lateral flow device (LFD)	☐ Yes ☐ No ☐ No opinion
COVID-19 vaccination services	☐ Yes ☐ No ☐ No opinion
Flu vaccination services	☐ Yes ☐ No ☐ No opinion
Buying over the counter medicines	☐ Yes ☐ No ☐ No opinion
Dispensing medicines	☐ Yes ☐ No ☐ No opinion
Dispensing appliances	☐ Yes ☐ No ☐ No opinion
Repeat dispensing services	☐ Yes ☐ No ☐ No opinion
Home delivery and prescription collection services	☐ Yes ☐ No ☐ No opinion
Medication review	☐ Yes ☐ No ☐ No opinion
New medicine service	☐ Yes ☐ No ☐ No opinion
Discharge from hospital Medicines Service	☐ Yes ☐ No ☐ No opinion
Emergency supply of prescription medicines	☐ Yes ☐ No ☐ No opinion
Disposal of unwanted medicines	☐ Yes ☐ No ☐ No opinion
Appliance Use Review	☐ Yes ☐ No ☐ No opinion
Community Pharmacist Consultation Service (urgent care referral)	☐ Yes ☐ No ☐ No opinion
Hepatitis testing service	☐ Yes ☐ No ☐ No opinion
Stoma appliance customisation service	☐ Yes ☐ No ☐ No opinion
Needle exchange	☐ Yes ☐ No ☐ No opinion
Stopping smoking / nicotine replacement therapy	☐ Yes ☐ No ☐ No opinion
Sexual health services (chlamydia testing /treating, condom distribution, emergency contraception)	☐ Yes ☐ No ☐ No opinion
Immediate access to specialist drugs e.g. palliative care medicines	☐ Yes ☐ No ☐ No opinion
Supervised consumption of methadone and buprenorphine	☐ Yes ☐ No ☐ No opinion
Travel immunisation (some pharmacies)	☐ Yes ☐ No ☐ No opinion
Other, please specify	

•	re a consultati risit / contact?	ion room available where you cannot be overheard in the pharmacy yo
□ Yes	□ No	☐ I don't know
21) If there accessibili		tion room, is it fully accessible to wheelchair users, or to people with othe
□ Yes	□ No	☐ I don't know
Any other	comments you	would like to make about the consultation room?
	r pharmacy abl elect one answ	le to provide medication on the same day that your prescription is sent to it er)
□ Yes		
□ No – it r	normally takes	one day
□ No – it r	normally takes	two or three days
□ No – it r	normally takes	more than three days
□ I don't k	now	
23) Would	d you like to be	e alerted when your medication is ready for collection?
□ Yes – b	y text	
□ Yes – b	y email	
□ No		
	use your pharrelect all that ap	macy to collect regular prescriptions, how do you order your prescriptions
□ Paper re	equest form to	my GP practice
□ Paper re	equest form the	rough my pharmacy
□ By ema	il to my GP pra	actice
□ Online r	equest to my (GP practice
☐ My phai	rmacy orders o	on my behalf
□ Electron	nic Repeat Disp	pensing (eRD)
□ NHS ap	р	
□ Varies		
□ Other (F	Please specify)	

a process that allows you to obtain repeated medication/appliances without the need for your GP hand sign authorised repeat prescriptions each time. This allows your GP to authorise and issue batch of repeat prescriptions until you need to be reviewed. The prescriptions are then available 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_o n_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 y	you?				
□ Male	□ Female	☐ Prefer not to say	☐ Prefer to self-de	escribe	
29) Wha	t 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	
mental ir	mpairment w	•	and long-term ad	ility if s/he 'has a long terr verse effect on his/her a nave a disability?	. ,
□ Yes		□ No	☐ Prefer not to sa	ay	
31) Whic	ch ethnic grou	up do you consider you	u belong to?		
□ White	- English, We	elsh, Scottish, Norther	n Irish, British		
□ White	- Irish				
□ White	- Gypsy/Irish	Traveller			
□ White	- Other				
☐ Any ot	her White ba	ckground (please spec	cify)		
☐ Mixed	/ multiple eth	nnic groups - White an	d Black Caribbean		
☐ Mixed	/ multiple eth	nnic groups - White an	d Black African		
☐ Mixed	/ multiple eth	nnic groups - White an	d Asian		
☐ Any ot	her Mixed / n	nultiple ethnic backgro	und (please specif	y)	
□ Asian	/ Asian Britis	h - Indian			
□ Asian	/ Asian Britis	h - Pakistani			
□ Asian	/ Asian Britis	h - Bangladeshi			
□ Asian	/ Asian Britis	h - Chinese			
☐ Any ot	her Asian ba	ckground (please spec	cify)		
□ Black	/ African / Ca	aribbean / Black British	- African		
□ Black	/ African / Ca	aribbean / Black British	- Caribbean		
☐ Any ot	her Black / At	frican / Caribbean back	ground (please sp	ecify)	
□ Arab					
☐ Any ot	her ethnic gro	oup (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 31st December 2021

Premises and contact details

Contractor code (ODS	Code)			
owning the pharmacy	e. name of individual, pa business)	artnership or company		
Trading name	_			
Address of contractor	•			
payments?	vhich is entitled to Pharr	macy Access Scheme		∕es
Is this pharmacy a 100			=	'es
contract? (i.e. it is not contract)	old a Local Pharmaceuti the 'standard' Pharmace	eutical Services		es es
provide Essential Servithe pharmacy)	tance Selling Pharmacy ices to persons present	at or in the vicinity of	Y	′es
Pharmacy premises sh	nared NHS mail account	t		
Pharmacy telephone				
Pharmacy fax (if applic	cable)			
Pharmacy website add	dress (if applicable)			
May the LPC update it the above information	s premises and contact ?	details for you with	Y	es
Opening hours and Core hours of opening Day		То		Lunchtime (From –
-				To)
Monday				
Tuesday				
Wednesday	1			
Thursday				
Friday				
Saturday				
Sunday				
Total hours of opening	a			
Day	Open from	То		Lunchtime (From – To)
Monday	1			,
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 NHS Improvement (NH are too small for a cons				
On premises	None, the NHSE&I regit that the premises are to				
On premises	None (Distance Selling				
On premises	Available (including who	eelchair access)			
On premises	Available (without whee	elchair access), or			
On premises	Planned before 1st Apr	il 2023, or			
On premises	Other (Please specify)				
	Where there is a consu	Itation area, is it a closed room?		Yes No	
requirements fr	om 1st January 2021, a	macy Level 1 (HLP) criteria becoming Imost all pharmacies will need to have a der-14-consultation-rooms-and-remote-	a coi	nsultation room.	
During consult washing faciliti	ations are there hand- es	In the consultation area]	
		Close to the consultation area, or]	
		None]	
	ding for consultations toilet facilities] Yes 🗌 No	
Languages spo	oken (in addition to				
Services Does the pharm	nacy dispense appliances	s?			
Yes – All types					
Yes, excluding	stoma appliances, or]	
Yes, excluding incontinence appliances, or]	
Yes, excluding stoma and incontinence appliances, or]	
Yes, just dress				J	
Other (Please	identify)				
None	None				

Advanced services

Chlamydia Treatment

Management Service

Alzheimer's/dementia

Contraceptive service (not

Disease Specific Medicines

Service⁽¹⁾

Allergies

EC)(1)

Does the pharmacy provide the following services?

SERVICE			Yes	Yes Intending begin with next 12 mo		thin intending to	
Appliance Use Review service							
Service (CPCS)	Consultati	on					
C-19 LFD distribution							
Flu Vaccination Service							
Hepatitis C testing service (Until 31st March 2022)							
Hypertension case finding							
New Medicine Service							
Pandemic Delivery Service (Until 31st March 2022)							
Stoma Appliance Customisation	n service						
Which of the following other ser	s the ph *CCG	*Local Authority	Willing to	Not able of willing to	or Willing to provide		
Anticoagulant Monitoring Service Anti-viral Distribution							
Service ⁽¹⁾ Care Home Service							
Chlamydia Testing Service ⁽¹⁾	<u></u> (1)						

Asthma			
CHD			
COPD			
Depression			
Diabetes type I			

(1)

¹ 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 region	*CCG	*Local Authority	Willing to provide if commission	Not able or willing to provide	Willing to provide privately
	al team			ed		
Diabetes type II						
Epilepsy						
Heart Failure						
Hypertension						
Parkinson's disease						
Other (please state)						
Emergency Contraception Service ⁽¹⁾	[(1)					
Emergency Supply Service						
Gluten Free Food Supply Service (i.e. not via FP10)						
Home Delivery Service (not appliances) ⁽¹⁾	[1)					
Independent Prescribing Service						
If currently providing an Independent Prescribing Service, what therapeutic areas are covered?						
Language Access Service						
Medication Review Service		<u> </u>				
Medicines Assessment and						
Compliance Support Service Minor Ailment Scheme						
	(1)					
Medicines Optimisation Service ⁽¹⁾						
If currently providing a Medicines Optimisation Service, what therapeutic areas are covered?						
Needle and Syringe Exchange Service						
Obesity management (adults and children) ⁽¹⁾	[1)					
Not Dispensed Scheme						
On Demand Availability of Specialist Drugs Service						
Out of Hours Services						
Patient Group Direction Service (name the medicines)						
Phlebotomy Service ⁽¹⁾	[1)					
Prescriber Support Service						
Schools Service						
Screening Service						

SERVICE	*NHSE &I region al team	*CCG	*Local Authority	Willing to provide if commissior ed	Not able or willing to provide	Willing to provide privately			
Alcohol									
Cholesterol									
Diabetes									
Gonorrhoea									
H. pylori									
HbA1C									
Hepatitis									
HIV									
Other (Please state)									
Seasonal Influenza Vaccination Service ⁽¹⁾	(1)								
Other Vaccinations ⁽¹⁾									
Childhood vaccinations	[1)								
COVID-19 vaccinations									
Hepatitis (at risk workers or patients) vaccinations	(1)								
HPV vaccinations	[1]								
Meningococcal vaccinations									
Pneumococcal vaccinations									
Travel vaccinations	[1]								
Other (Please state)									
Sharps Disposal Service ⁽¹⁾	[1)								
Stop Smoking Service									
Supervised Administration Service									
Supplementary Prescribing Service (Please name therapeutic areas)									
Vascular Risk Assessment Service (NHS Health Check) ⁽¹⁾	[(1)								
*Currently providing under contract with Non-commissioned services Does the pharmacy provide any of the following?									
Collection of prescriptions from	•		. ,		Yes No				
Delivery of dispensed medicine (Please list criteria)				,					
Delivery of dispensed medicine (Please list areas)									
Delivery of dispensed medicine Delivery of dispensed medicine			ge on reque	est L	Yes No				
Monitored Dosage Systems – I		Yes N							

Monitored Dosage Systems – With charge	☐ Yes ☐ No
Is there a particular need for a locally commissioned service in your area? If so, what is the service requirement and why?	☐ Yes ☐ No
May the LPC update its opening hours and related matters and services details for you with the above information?	☐ Yes ☐ 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 31st December 2021

Community pharmacy services overview

Community Pharmacy Contractual Framework (CPCF)²

Community pharmacies are contracted and commissioned in England under the national Community Pharmacy Contractual Framework (CPCF). This sets out the services that need to be provided, how quality is assured and other expectations, such as safety. CPCF is made up of three different service types and below are examples of what is already commissioned in community pharmacy:

- Essential services provided by all pharmacy contractors and are commissioned by NHS England
 - a. Dispensing medicines and appliances
 - b. Repeat dispensing
 - c. Discharge medicines service
 - d. Disposal of unwanted medicines
 - e. Promotion of Health Lifestyles Public Health
 - f. Signposting to other healthcare providers
 - g. Clinical governance
 - h. Support for self care
- 2. Advanced services provided by all contractors once accreditation requirement have been met and are commissioned by NHS England
 - a. Appliance use reviews (AUR)
 - b. Community Pharmacist Consultation Service (CPCS)
 - c. C-19 Lateral flow device distribution service
 - d. Flu vaccination service
 - e. Hepatitis C testing service
 - f. Hypertension case-finding service
 - g. New medicines service
 - h. Pandemic delivery service active until 31st March 2022
 - i. Stoma appliance customisation
 - j. Stop smoking advanced service will be commissioned from January 2022
- 3. Locally commissioned services services commissioned by Local Authorities, Clinical Commissioning Groups and NHS England in response to the needs of the local populations.

Pharmacy Quality Scheme (PQS)

The Pharmacy Quality Scheme (PQS) forms part of the CPCF. It supports delivery of the NHS Long Term Plan and rewards community pharmacy contractors that achieve quality criteria in the three domains of healthcare quality: clinical effectiveness, patient safety and patient experience³.

The new PQS for 2021/22 from September 2021 will focus on priorities supporting recovery from Covid-19 and examples of criteria include⁴:

- 20 new NMS provisions
- Identifying people who would benefit from weight management advice and onward referral, including to the recently introduced NHS Digital Weight and/or Local Authority funded tier 2 weight management service
- Checking inhaler technique, as part of catch-up NMS, ensuring patients have personalised asthma action plans and use of spacers in children, and encouraging return of unwanted and used inhalers for disposal to protect the environment

Full details of PQS 2021/21 can be found here:

Pharmacy Quality Scheme Announcement September 2021-2022.pdf (nhsbsa.nhs.uk)

² **PSNC**, **Pharmaceutical Services Negotiating Committee**. Community Pharmacy Contractural Framework. *PSNC*. [Online] [Cited: October 06, 2021.] https://psnc.org.uk/contract-it/the-pharmacy-contract/

³ **PSNC, Pharmaceutical Services Negotiating Committee.** Pharmacy Quality Scheme. *PSNC*. [Online] [Cited: October 2021, 2021.] https://psnc.org.uk/services-commissioning/pharmacy-quality-scheme/

⁴ NHS BSA, NHS Business Services Authority. Pharmacy Quality Scheme (PQS) 2021/22. *NHSBA*. [Online] [Cited: October 06, 2021.] https://www.nhsbsa.nhs.uk/sites/default/files/2021-08/Pharmacy%20Quality%20Scheme%20Announcement%20September%202021-2022.pdf

Which of the following services do you commission or may be considering commissioning from local community pharmacies?

SERVICE	Currently	Would consider	Not likely to
	commissioning	commissioning in	commission in
	_	the future	the future
Anticoagulant Monitoring Service			
Anti-viral Distribution Service ⁽¹⁾			
Care Home Service			
Chlamydia Testing Service ⁽¹⁾			
Chlamydia Treatment Service(1)			
Contraceptive service (not EC) (1)			
Disease Specific Medicines Manag	gement Service:		
Allergies			
Alzheimer's/dementia			
Asthma			
CHD			
COPD			
Depression			
Diabetes type I			
Diabetes type II			
Epilepsy			
Heart Failure			
Hypertension			
Parkinson's disease			
Other (please state)			
Emergency Contraception Service ⁽¹⁾			
Emergency Supply Service			
Gluten Free Food Supply Service (i.e. not via FP10)			
Home Delivery Service (not appliances)(1)			
Independent Prescribing Service			
If currently commissioning an Inde Service, what therapeutic areas ar		g	
Language Access Service			
Medication Review Service			
Medicines Assessment and Compliance Support Service			
Minor Ailment Scheme			
Medicines Optimisation Service(1)			
If currently commissioning a Medic what therapeutic areas are covere		Service,	

SERVICE	Currently commissioning	Would consider commissioning in the future	Not likely to commission in the future
Needle and Syringe Exchange Service			
Obesity management (adults and children) ⁽¹⁾			
Not Dispensed Scheme			
On Demand Availability of Specialist Drugs Service			
Out of Hours Services			
Patient Group Direction Service (name the medicines)			
Phlebotomy Service ⁽¹⁾			
Prescriber Support Service			
Schools Service			
Screening Service:			
Alcohol			
Cholesterol			
Diabetes			
Gonorrhoea			
H. pylori			
HbA1C			
Hepatitis			
HIV			
Other (please state)			
Seasonal Influenza Vaccination Service ⁽¹⁾			
Other vaccinations:			
Childhood vaccinations			
COVID-19 vaccinations			
Hepatitis (at risk workers or patients) vaccinations			
HPV vaccinations			
Meningococcal vaccinations			
Pneumococcal vaccinations			
Travel vaccinations			
Other (please state)			
Sharps Disposal Service ⁽¹⁾			
Stop Smoking Service			
Supervised Administration Service			
Supplementary Prescribing Service (name therapeutic areas)			
Vascular Risk Assessment Service (NHS Health Check) ⁽¹⁾			
Details of the Person Complet	ing this Questic	onnaire - if questions	s arise
Contact name		Contact telephone n	

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 31st 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 not 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.surveymonkev.co.uk/r/EalingPNA2022PCN



Please complete the questionnaire by 31st 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 phamacy 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 31st 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	Мау	Jun	Jul	Aug	Sep
Stage 1: Project Planning & Governance Stakeholders identified First Steering Group meeting conducted Project Plan, Communications Plan and Terms of Reference agreed PNA localities agreed Questionnaire templates shared and agreed													
Stage 2: Research and analysis Collation of data from NHSE&I, PH, LPC and other providers of services Listing and mapping of services and facilities with the borough Collation of information regarding housing and new care home developments Equalities Impact Assessment Electronic, distribution and collation Analysis of questionnaire responses Steering Group Meeting Two Draft Update for HWB													
 Stage 3: PNA development Triangulation, review and analysis of all data and information collated to identify gaps in services based on current and future population needs Develop Consultation Plan Draft PNA Engagement for consultation Steering Group Meeting Three Draft update for HWB 													

Stage 4: Consultation & final draft production							
 Coordination and management of consultation 							
Analysis of Consultation responses							
Production of Consultation findings report							
Draft Final PNA for approval							
Steering Group Meeting Four							
Minutes to meetings							
Edit and finalise Final PNA 2022							
Draft update for HWB							

Appendix H: Results of the public questionnaire

Total responses received:1 206

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

¹ 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.

3	0%	1
4	1%	3
5	2%	5
6	1%	3
7	7%	14
8	15%	31
9	20%	41
10	50%	102

Answered: 206 Skipped: 0

5 - How important is each of the following aspects to you when choosing a pharmacy?	%	Responses
Quality of service (friendly staff, expertise)		
Extremely important	58%	117
Very important	32%	64
Moderately important	10%	20
Fairly important	1%	1
Not at all important	0%	0
Convenience (e.g. location, opening times)		
Extremely important	56%	112
Very important	34%	68
Moderately important	8%	16
Fairly important	2%	4
Not at all important	1%	1
Accessibility (e.g. parking, clear signage)		
Extremely important	26%	53
Very important	17%	34
Moderately important	20%	41
Fairly important	14%	29
Not at all important	22%	45
Availability of medication/services (e.g stocks,		
specific services)		
Extremely important	65%	132
Very important	28%	57
Moderately important	4%	8
Fairly important	2%	4
Not at all important	1%	1
Other		
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		

6a - In the last six months, how frequently have you visited/ contacted (spoken to, emailed or visited in person) a pharmacy for yourself?	%	Responses
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:

ded name of internet pharmacy 2

6b - In the last six months, how frequently have you visited/ contacted (spoken to, emailed or visited in person) a pharmacy for someone else?	%	Responses
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

7 - Who would you normally visit/contact a pharmacy for? (Please select all that apply)	%	Responses
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:

nentia) 1

8 - If you visit/contact a pharmacy regularly on behalf of someone else, please give a reason why? (Please select all that apply)	%	Responses
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

9 - How would you usually travel to the pharmacy?	%	Responses
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

10 - If you travel to the pharmacy, where do you travel from?	%	Responses
Home	99%	186
Work	7%	14
Other	1%	1

Answered: 187 Skipped: 19

Comments:

GP	1	Hospital	1

11 - On average, how long would it take you to travel to a pharmacy?	%	Responses
0 to 15 minutes	83%	156
16 to 30 minutes	16%	30
Over 30 minutes	1%	2

Answered: 188 Skipped: 18

12 - Do you have any of the following difficulties when travelling to a pharmacy? (Please select all that apply)	%	Responses
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

13 - What is the most convenient day for you to visit/contact a pharmacy?	%	Responses
Monday to Friday	21%	40
Saturday	5%	9
Sunday	2%	4
Varies	30%	57
I don't mind	43%	83

Answered: 193 Skipped: 13

14 - Is your preferred pharmacy open on the most convenient day for you?	%	Responses
Yes	97%	185
No	3%	5

Answered: 190 Skipped: 16

15 - When do you prefer to visit / contact a pharmacy?	%	Responses
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

16 - Is your preferred pharmacy open at the most convenient time for you / at your preferred time?	%	Responses
Yes	94%	181
No	6%	12

Answered: 193 Skipped: 13

17 - How frequently do you buy an over-the- counter (i.e non-prescription) medicine from a pharmacy?	%	Responses
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)	84%	153	16%	29
distribution service				
COVID-19 asymptomatic testing using	59%	99	41%	70
a lateral flow device (LFD)				
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	69%	124	31%	55
collection services				
Medication review	37%	64	63%	107
New medicine service	27%	44	73%	119
Discharge from hospital medicines	25%	41	75%	122
service				
Emergency supply of prescription	58%	102	42%	75
medicines				
Disposal of unwanted medicines	75%	136	25%	45
Appliance Use Review	16%	26	84%	134
Community Pharmacist Consultation	20%	32	80%	132
Service (urgent care referral)				
Hepatitis testing service	9%	15	91%	143
Stoma appliance customisation	11%	17	89%	144
service				
Needle exchange	17%	28	83%	133
Stopping smoking/nicotine	52%	90	48%	82
replacement therapy				
Sexual health services (chlamydia	38%	63	62%	104
testing/treating, condom distribution,				
emergency contraception)				
Immediate access to specialist drugs	20%	32	80%	126
e.g. palliative care medicines				
Supervised consumption of	23%	37	77%	122
methadone and buprenorphine	1001		500/	
Travel immunisation (some	48%	79	52%	87
pharmacies)				

19 - Which of the following pharmacy services would you like to see always provided by your pharmacy?

Service	Yes (%)	Yes	No (%)	No	No opinio n (%)	No opini on
Advice from your pharmacist	93%	172	1%	1	6%	11
COVID-19 lateral flow device (LFD) distribution service	88%	159	0%	0	12%	21

Service	Yes (%)	Yes	No (%)	No	No opinio n (%)	No opini on
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
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	4	Disposal of medication	1
methadone centre	ı	blister packs	ı

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

21 - If there is a consultation room, is it fully accessible to wheelchair users, or to people with other accessibility needs?	%	Responses
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

22 - Is your pharmacy able to provide medication on the same day that your prescription is sent to it?	%	Responses
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

23 - Would you like to be alerted when your medication is ready for collection?	%	Responses
Yes – by text	80%	152
Yes – by email	10%	20
No	10%	19

Answered: 191 Skipped: 15

24 - If you use your pharmacy to collect regular prescriptions, how do you order your prescriptions? (Please select all that apply)	%	Responses
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

25 - Have you ever used Electronic Repeat Dispensing (eRD)?	%	Responses
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

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?	Responses
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

27 - Do you have any other comments you would like to make about your pharmacy?	Responses
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

A bit about you

28 - Are you:	%	Responses
Female	44%	85
Male	54%	104
Prefer not to say	2%	3
Prefer to self-describe	0%	0

Answered: 192 Skipped: 14

29 - What is your age group?	%	Responses
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

30 - Do you consider yourself to have a disability?	%	Responses
Yes	12%	23
No	82%	159
Prefer not to say	6%	11

Answered: 193 Skipped: 13

31 - Which ethnic group do you consider you belong to?	%	Responses
White - English, Welsh, Scottish, Northern Irish,	64%	122
British		
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

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: 141

1 - Pharmacy-specific questions: ODS code, trading name,	N/A
etc	

Answered: 41 Skipped: 0

2 - Is this pharmacy one which is entitled to Pharmacy Access Scheme payments?	%	Responses
Yes	12%	5
No	71%	29
Possibly	17%	7

Answered: 41 Skipped: 0

3 - Is this pharmacy a 100-hour pharmacy?	%	Responses
Yes	5%	2
No	95%	39

Answered: 41 Skipped: 0

4 - Does this pharmacy hold a Local Pharmaceutical Services (LPS) contract? (i.e. it is not the 'standard' Pharmaceutical Services contract)	%	Responses
Yes	20%	8
No	80%	32

Answered: 40 Skipped: 1

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)	%	Responses
Yes	0%	0
No	100%	41

Answered: 41 Skipped: 0

6 - May the LPC update its premises and contact details for you with the above information?	%	Responses
Yes	98%	40
No	2%	1

Answered: 40 Skipped: 1

¹ 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.

7-10 - Questions relating to opening hours: core and total	N/A
hours of opening, including lunchtime closures	

11 - There is a consultation room (distinct from the public area, clearly designated and confidential) on premises:	%	Responses
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

12 - Where there is a consultation area, is it a closed room?	%	Responses
Yes	100%	39
No	0%	0

Answered: 39 Skipped: 2

13 - During consultations are there hand-washing facilities?	%	Responses
In the consultation area	82%	32
Close to the consultation area	15%	6
None	3%	1

Answered: 39 Skipped: 2

14 - Do patients attending for consultations have access to toilet facilities?	%	Responses
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	%	Responses
services?		
Appliance Use Review Service Yes	30%	11
	22%	8
Intending to begin within 12 months		18
No – not intending to provide	49%	18
Community Pharmacist Consultation Service (CPCS)		
Yes	95%	36
Intending to begin within 12 months	5%	2
No – not intending to provide	0%	0
C-19 Lateral Flow Device (LFD) Distribution		
Yes	97%	38
Intending to begin within 12 months	0%	0
No – not intending to provide	3%	1
Flu Vaccination Service		
Yes	85%	33
Intending to begin within 12 months	13%	5
No – not intending to provide	3%	1
Hepatitis C Testing Service (until 31st March 2022)		
Yes	14%	5
Intending to begin within 12 months	22%	8
No – not intending to provide	65%	24
Hypertension Case-Finding		
Yes	38%	14
Intending to begin within 12 months	43%	16
No – not intending to provide	19%	7
New Medicine Service		
Yes	92%	35
Intending to begin within 12 months	8%	3
No – not intending to provide	0%	0
Pandemic Delivery Service (until 31 st March 2022)		
Yes	90%	35
Intending to begin within 12 months	0%	0
No- not intending to provide	10%	4
Stoma Appliance Customisation Service		
Yes	17%	6
Intending to begin within 12 months	25%	9
No – not intending to provide	58%	21

18 - Which of the following other services does	%	Responses
the pharmacy provide, or would be willing to		
provide?		
Anticoagulant Monitoring Service	20/	4
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
Antiviral Distribution Service		
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
Care Home Service		
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
Chlamydia Testing Service		
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
Chlamydia Treatment Service		
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	10%	4
Willing to provide privately	5%	2
Contraceptive Service (not EC)		
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

19 - Which of the following other services does	%	Posnonsos
the pharmacy provide, or would be willing to	70	Responses
provide? - Disease Specific Medicines		
Management Services (DSMMS)		
Allergies		
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
Alzheimer's/dementia	370	l
	00/	0
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
Asthma	20/	
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
CHD		
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
COPD		
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
Depression		
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
Diabetes type I		
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
Diabetes type II	370	•
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
Epilepsy	370	
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
Heart Failure	0,0	
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
Hypertension		
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
Parkinson's disease		
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
Other		
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

Comment:

Any other disease as required by	2	Unable to make decision	1
the NHS		without head office approval	I

20 - Which of the following other services does the pharmacy provide, or would be willing to provide?	%	Responses
Emergency Contraception Service		
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
Emergency Supply Service		
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
Gluten-Free Food Supply Service (i.e. not via FP10)		
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
Home Delivery Service (not appliances)		
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
Independent Prescribing Service		
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
Not able or willing to provide	24%	9
Willing to provide privately	11%	4

21 - Which of the following other services does the pharmacy provide, or would be willing to provide?	%	Responses
Language Access Service		
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
Medication Review		
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
Medicines Assessment and Compliance		
Support Service		
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
Minor Ailment Scheme		
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
Medicines Optimisation Service		
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

If currently providing a Medicines Optimisation Services, what therapeutic areas are covered?

Dependant on head office authorisation	1
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22 - Which of the following other services does the pharmacy	Responses
provide, or would be willing to provide?	-
Needle and Syringe Exchange Service	
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
Obesity Management (adults and children)	
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
Not-Dispensed Scheme	
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
On-Demand Availability of Specialist Drugs Service	
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
Out-of-Hours Services	
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
Patient Group Direction Service	
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
Phlebotomy Service	
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
Prescriber Support Service	

Providing (contract with NHSE&I)	0
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
Schools Service	
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

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

23 - Which of the following other services does	%	Responses
the pharmacy provide, or would be willing to		-
provide? - Screening Services:		
Alcohol		
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
Cholesterol		
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
Diabetes		
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
Gonorrhoea		
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

H. pylori		
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
HbA1C		
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
Hepatitis		
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
HIV		
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
Other		
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

Comments:

Willing to provide more services	1	All screening services	2
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24 - Which of the following other services does the pharmacy provide, or would be willing to provide? - Vaccinations	%	Responses
Seasonal Influenza Vaccination Service		
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
Willing to provide privately	0%	0
Childhood vaccinations	_	

24 - Which of the following other services does	%	Responses
the pharmacy provide, or would be willing to		
provide? - Vaccinations		
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
COVID-19 vaccinations	070	
Providing (contract with NHSE&I)	13	5
Providing (contract with NTOEQ)	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
	0 70	
Hepatitis (at-risk workers or patients) vaccinations		
	20/	1
Providing (contract with NHSE&I)	3% 0%	1
Providing (contract with CCG)		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
HPV vaccinations	201	
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
Meningococcal vaccinations		
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
Pneumococcal vaccinations		
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
Travel vaccinations		
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
Other vaccinations		
		•

24 - Which of the following other services does the pharmacy provide, or would be willing to provide? – Vaccinations	%	Responses
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

Other:

Private travel clinic	3	All vaccinations as needed	2
Vaccination room being built	2	Chicken pox	1
Private Pneumococcal vaccination	1	Shingles	1

25 - Which of the following other services does the pharmacy provide, or would be willing to provide?	%	Responses
Sharps Disposal Service		
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
Stop Smoking Service		
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
Supervised Administration Service		
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
Supplementary Prescribing Service		
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
Vascular Risk Assessment Service (NHS Health Check)		
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	18%	7
Willing to provide privately	3%	1

Please name the therapeutic areas for your Supplementary Prescribing Service:

	,		
All therapeutic areas			2

26 - Non-commissioned services: Does the pharmacy provide any of the following?	%	Responses
Collection of prescriptions from GP practices		
Yes	90%	35
No	10%	4
Delivery of dispensed medicines – Selected patient groups		
Yes	92%	36
No	8%	3
Delivery of dispensed medicines – Selected areas		
Yes	79%	31
No	21%	8
Delivery of dispensed medicines – Free of charge on request		
Yes	76%	29
No	24%	9
Delivery of dispensed medicines – With charge		
Yes	38%	14
No	62%	23
Monitored Dosage Systems – Free of charge on request		
Yes	97%	36
No	3%	1
Monitored Dosage Systems – With charge		
Yes	25%	8
No	75%	24

Please list your criteria for your selected patient groups:

i loude het your erhond for your e	0.00t0u	pationi	g. e a p e.	
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

27 - Is there a particular need for a locally commissioned service in your area? If so, what is the service requirement and why?		Responses
Yes	49%	18
No	51%	19

Please state the service requirement and why:

i loade diate the service requiremen	it alia wily.		
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

28 - May the LPC update its opening hours and related matters and services details for you with the above information		Responses
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: Alphabetical list of pharmaceutical service providers in Ealing HWB area

												NI	ISE	&I /	Adv	ancec	i			HSE& hance		CCG		L	Ą	
Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Mondayto Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	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	ЕНС	Supervised consumption	Needle exchange	C-19 test
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	-	-	-	-	-	-	-	-	Υ	-		-	-	-	-	-	-	-	-
Alisha Pharmacy	FXY41	Community	257 Acton Lane, Chiswick	W4 5DG	09:00-18:30 (Wed 09:00-17:00)	09:00-13:00	Closed	-	-	Υ	-	-	Υ	-	-	Υ	-		-	Υ	-	-	-	-	-	-
Alpha Chemist	FCY66	Community	480 Church Road, Northolt	UB5 5AU	09:00-18:00 (Wed 09:00-17:30)	09:00-13:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	Υ	Υ	-	-	-
Anmol Pharmacy	FHD61	Community	97 North Road, Southall	UB1 2JW	07:00-23:30 (Fri 06:00-23:30)	06:00-23:30	Closed	Υ	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	Υ	-	-	-	-
Ariana Pharmacy	FXK52	Community	472 Greenford Road, Greenford	UB6 8SQ	Mon 08:00-Wed 20:00 non stop; Thu-Fri 08:00- 20:00	09:00-19:00	10:00-16:00	Υ	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	Υ	-	-	- '	Υ
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	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	-
Boots	FTL27	Community	5 Haydock Green, Northolt	UB5 4AP	09:00-18:30	09:00-17:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Boots	FWX06	Community	47A-47B Oldfield Circus, Northolt	UB5 4RR	09:00-18:00	09:00-18:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Boots	FDX68	Community	Unit 11 Greenford Westway Retail Park, 1000 Greenford Road, Greenford	UB6 0UW	09:00-19:00	09:00-19:00	11:00-17:00	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Boots	FFN11	Community	40-42 The Broadway, Greenford	UB6 9PT	09:00-18:00	09:00-18:00	11:00-17:00	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Boots	FJ498	Community	68 The Broadway, West Ealing, London	W13 0SR	09:00-18:00	09:00-18:00	12:00-16:00	-	-	Υ	-	-	Υ	-	-	Υ	-		-	Υ	-	-	-	-	-	-
Boots	FEL12	Community	Unit 17, The Oaks Shopping Centre, Acton High Street, London	W3 6RE	09:00-18:00	09:00-18:00	Closed	-	-	Υ	-	-	-	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-

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Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Mondayto Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NMS	AUR	SAC	S	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
Boots	FHP49	Community	Unit 36, Ealing Broadway Centre, Ealing, London	W5 5JY	08:45-20:00	08:45-19:00	11:00-17:00	-	-	Υ	-	-	Υ	-	-	Υ	-		-	Υ	-	-	-	-	-	-
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	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	-
Bright Health Pharmacy	FH357	Community	1318 Greenford Road, Greenford	UB6 0HL	09:00-19:00	09:00-13:00	Closed	-	-	-	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	Υ
Chana Chemist	FVM26	Community	52 South Road, Southall	UB1 1RQ	09:00-21:00	09:00-20:00	10:00-19:00	-	-	Υ	-	-	Υ	-	-	Υ	-		-	Υ	-	-	-	-	-	-
Chana Chemist	FYG50	Community	251 Allenby Road, Southall	UB1 2HB	09:00-19:00	09:00-18:00	Closed	-	-	-	-	-	-	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	-
Chana Chemist	FVN27	Community	33 High Street, Southall	UB1 3HA	09:00-19:00	10:00-16:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	-
Cheema Pharmacy	FC041	Community	57 King Street, Southall	UB2 4DQ	09:00-20:00	09:00-19:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	-
Chief Cornerstone Pharmacy	FT601	Community	4 Eastmead Avenue, Greenford	UB6 9RA	08:30-19:00	08:30-13:00	Closed	-	-	Υ	-	-	-	-	-	Υ	-		-	-	-	-	-	-	-	-
Church Pharmacy	FLA36	Community	83 Uxbridge Road, Hanwell, London	W7 3ST	09:00-19:30	09:00-18:30	Closed	-	-	-	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Conway Chemist			8 Station Parade, West Acton, London	W3 0DS	09:00-18:30 (Wed 09:00-18:00)	09:00-13:30	Closed	-	-	Υ	-	-	-	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Cross Chemist	FM205	Community	5 Royal Parade, Hanger Lane, London	W5 1ET	08:30-19:00	08:30-13:00	Closed	-	-	Υ	-	-	Υ	-	-	Υ	-		Υ	Υ	-	-	-	Υ	Υ	-
Crossbells Chemist	FA252	Community	131 The Vale, Acton, London	W3 7RQ	09:00-18:30	09:00-13:00	Closed	-	-	-	-	-	Υ	-	Υ	Υ	-		-	-	-	-	-	-	-	-
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	-	-	-	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	-
Ealing Pharmacy	FHN86	Community	157 Pitshanger Lane, Ealing, London	W5 1RH	09:00-18:00	09:00-17:30	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-

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Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Mondayto Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NMS	AUR	SAC	CPCS	Hep C testing		C-19 LFD distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu Vaccination	Bank holidays	Anticipatory medicines	EHC	Supervised consumption	Needle exchange	19
Fountain Pharmacy	FGW38	Community	43 Featherstone Road, Southall	UB2 5AB	08:00-23:00	08:00-23:00	08:00-18:00	Υ	-	Υ	-	-	-	-	-	Υ	-		-	-	-	-	-	-	-	-
Gill Chemist	FH598	Community	31-33 King Street, Southall	UB2 4DG	09:00-20:30	09:00-20:30	12:00-19:00	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	Υ	-	-	-	Υ
Gill Chemist	FKD11	Community	79 Norwood Road, Southall	UB2 4EA	09:00-19:00	09:00-14:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Greenford Chemist	FC472	Community	340 Greenford Avenue, Hanwell, London	W7 3DA	09:00-18:00	09:00-13:00	Closed	-	-	Υ	-	-	-	-	-	Υ	Υ		-	Υ	-	,	-	,	-	-
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	Υ	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	-	-	,	-	-	Υ	-
HJ Dixon Chemist	FTC65	Community	185 Lady Margaret Road, Southall	UB1 2PT	09:00-19:00	09:00-17:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	Υ
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	Υ	-	Υ	-	-	Υ	-	-	Υ	Υ		-	-	-	Υ	-	-	-	-
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	-	-	Υ	-	-	Υ	-	-	Υ	-		-	-	-	-	-	Υ	Υ	-
Jade Pharmacy	FHJ72	Community	3 Crosslands Parade, Crosslands Avenue, Southall	UB2 5RB	09:00-17:00	09:00-13:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		Υ	-	-	Υ	-	-	-	Υ
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	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	Υ		-	-	-	-
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	-	-	-	-	-	-	-	-	Υ	Υ		'	-	-	-	-	'	-	-
Kings Pharmacy	FF912	Community	50 Greenford Avenue, Southall	UB6 9AT	09:30-19:00	09:30-12:30	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-		-	-	-	-
KL Pharmacy	FQQ74	Community	1-2 Tyler Road, Southall	UB2 4XQ	09:00-18:30	09:00-13:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Lady Margaret Pharmacy	FTX12	Community	223 Lady Margaret Road, Southall	UB1 2NH	07:00-23:00	07:00-20:00	10:00-17:00	Υ	-	Υ	-	-	Υ	-	Υ	Υ	-		-	-	-	-	-	-	-	-

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Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Mondayto Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NMS	AUR	SAC	S	Hep C testing	Flu vaccination	distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu Vaccination	Bank holidays	Anticipatory medicines	ЕНС	Supervised consumption	Needle exchange	C-19 test
Lewis Pharmacy	FC280	Community	36 Haven Green, Ealing, London	W5 2NX	10:00-13:30, 14:30-18:00	10:00-15:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Lloyds Direct (previously Echo)	FN849	DSP	17 Wadsworth Road, Perivale, London	UB6 7JD	09:00-13:00, 14:00-18:00	Closed	Closed	-	-	Υ	-	-	-	-	-	-	-		-	-	-	-	-	-	-	-
Lloyds Pharmacy	FDD32	Community	1 Crown Street, Acton, London	W3 8SA	08:30-18:45	08:45-17:00	Closed	-	-	Υ	-	Υ	Υ	-	Υ	Υ	-		-	Υ	-	-	-	Υ	Υ	-
M Gokani Chemist	FAF65	Community	32 Church Road, Northolt	UB5 5AB	09:00-19:00 (Wed 09:00-18:00)	09:00-14:00	Closed	-	-	Υ	-	-	-	-	Υ	Υ	-		-	Υ	-	-	-	-	Υ	-
Mattock Lane Pharmacy	FKC09	Community	8 St. John's Parade, Mattock Lane, London	W13 9LL	08:45-19:00	09:00-17:00	Closed	-	,	Υ	-	-	Υ	-	Υ	Υ	Υ		Υ	Υ	-	Υ	Υ	,	Υ	Υ
Medway Pharmacy	FA150	Community	18 Medway Parade, Perivale	UB6 8HR	09:00-18:45 (Wed 09:00-14:00)	09:00-12:00	Closed	-	-	Υ	-	-	Υ	-	-	Υ	Υ		-	-	-	-	-	-	-	-
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	-	-	Υ	-	-	Υ	-	-	Υ	Υ		-	Υ	-	-	-	-	-	-
My Own Chemist	FM850	DSP	4-5 Northolt Trading Estate, Belvue Road, Northolt	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	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	Υ	-	-	Υ
Northolt Pharmacy	FGJ27	Community	Grand Union Health Centre, Taywood Road, Northolt	UB5 6WL	09:00-18:30	Closed	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	Υ
Parade Pharmacy	FDR42	Community	386 Oldfield Lane North, Greenford	UB6 8PU	09:00-18:00	09:00-13:00	Closed	-	,	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-		-
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	UB2 5HE	09:15-19:00	Closed	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	Υ	Υ

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Pharmacy name	ODS number	Pharmacy type	Address	Postcode	Mondayto Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs	PhAS	NMS	AUR	SAC	co.	Hep C testing	Flu vaccination	C-19 LFD distribution	Hypertension case-finding	Stop smoking	C-19 vaccination	London Flu Vaccination	Bank holidays	Anticipatory medicines	ЕНС	Supervised consumption	Needle exchange	C-19 test
Queens Pharmacy	FL684	Community	61 The Broadway, Southall	UB1 1JY	09:00-20:00	09:00-19:00	10:30-19:00	-	-	Υ	-	-	-	-	Υ	Υ	-		-	Υ	-	-	-	Υ	Υ	-
Ravenor Chemist	FLK52	Community	70 The Broadway, Greenford	UB6 9QA	09:00-18:00	Closed	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	Υ	-	-	-
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	-	-	Υ		-	-	-	-	Υ	Υ		Υ	-	Υ	Υ	-	-	-	-
Richards Pharmacy	FAH22	Community	112 South Ealing Road, London	W5 4QJ	09:00-18:00	09:00-16:00	Closed	-	-	-	-	-	-	-	-	Υ	-		-	-	-	-	-	-	-	-
Roxanne's Pharmacy	FJJ99	Community	51 The Broadway, Greenford	UB6 9PN	09:00-18:00	09:00-17:30	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		Υ	Υ	-	-	Υ	-	-	-
Shah Pharmacy	FLF32	Community	13 North Parade, North Road, Southall	UB1 2LF	09:00-19:00	Closed	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	Υ	-	-	-
Sherry's Pharmacy	FQP22	Community	48 South Road, Southall	UB1 1RR	09:30-19:00	Closed	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
South Ealing Pharmacy	FPM91	Community	186 South Ealing Road, Ealing, London	W5 4RJ	08:30-18:30	09:00-14:00	Closed	-	-	-	-	-	-	-	Υ	Υ	Υ		Υ	Υ	-	-	-	-	-	Υ
SR Pharmacy	FX732	Community	155 High Street, Acton, London	W3 6LP	09:00-18:00	09:00-15:00	Closed	-	-	Υ	-	-	-	-	Υ	Υ	Υ		-	Υ	-	-	Υ	-	-	-
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	-	-	Υ	,	-	Υ	-	Υ	Υ	-		-	Υ	-		-		-	-
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	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Temple Pharmacy	FTF00	Community	110 Pitshanger Lane, Ealing, London	W5 1QP	09:00-18:30	09:00-18:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	-		Υ	Υ	-	-	-	-	-	-
Terry's Pharmacy	FW270	Community	4 Castle Hill Parade, The Avenue, London	W13 8JP	09:00-18:00	09:00-13:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	Υ

	ODS number	Pharmacy type	Address	Postcode	Mondayto Friday opening hours	Saturday opening hours	Sunday opening hours	100 hrs				Νŀ	ISE	&I &	&I Advanced					NHSE&I Enhanced		CCG	LA			
Pharmacy name									PhAS	NMS	AUR	SAC	cPcs	충	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
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	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	-	-	-	-	-	-	-
Tesco Pharmacy	I I	Community	Hoover Building Rideford	UB6 8DW	08:00-20:00	08:00-20:00	10:00-16:00	-	-	Υ	-	-	Υ	-	Υ	Υ	-		-	Υ	-	-	-	-	-	-
Touchwood Pharmacy	FPW44	Community	493-495 Yeading Lane, Northolt	UB5 6LN	09:00-18:00	09:00-13:00	Closed	-	-	Υ	-	-	-	-	-	Υ	Υ		Υ	Υ	-	-	-	Υ	Υ	-
Touchwood Pharmacy	FWW58	Community	Hanwell Heath Centre, 20 Church Road, London	W7 1DR	09:00-18:00	Closed	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	-
Walkers Pharmacy	FA244	Community	8 The Broadway, Gunnersbury Lane, London	W3 8HR	08:30-18:30	10:00-17:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	-	-	-	-	-	-	Υ
Watmans Pharmacy	FKP75	Community	179 Bilton Road, Perivale	UB8 7HQ	09:00-19:00	09:00-13:30	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	Υ	-	-	-	-
Well Pharmacy	FL911	Community	333 Greenford Avenue, London	W7 1JH	09:00-18:00	09:00-13:00	Closed	-	-	Υ	-	-	Υ	-	Υ	Υ	Υ		-	Υ	-	-	-	-	-	-
Woodland Pharmacy			227 The Broadway, Southall	UB1 1ND	09:00-19:00 (Wed 09:00-17:00)	Closed	Closed	-	-	-	-	-	Υ	-	-	Υ	-		-	-	-	-	-	-	-	-
Zahra Pharmacy	FC091	Community	72 High Street, Acton, London	W3 6LE	06:30-22:30	08:00-20:00	09:00-17:00	Υ	-	-	-	-	Υ	-	Υ	Υ	-		-	Υ	-	Υ	-	-	-	-
Zee Pharmacy	FQ169	DSP	8E Europa Studios, Victoria Road, London	NW10 6ND	09:00-17:00	Closed	Closed	-	-	-	-	-	-	-	-	-	-		-	-	-	-	-	-	-	-

Appendix L: Opportunities for Service Provision from Community Pharmacies in Ealing

Introduction

Any local commissioning of services for delivery by community pharmacy lies outside of the requirements of a PNA; they are 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
- Managing 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.

Health needs identified in the NHS Long Term Plan

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

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 to 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 table below summarises the highest risk factors for causing death and disease for the Ealing population.

Factor or area of ill health	Factor or area of ill health							
All cause emergency hospital admissions	Covid infections and mortality							
Diabetes (increased prevalence 9%)	Hospital admissions related to alcohol							
STIs and sexual health	Drug misuse							
Flu vaccine uptake (71.4%)	Palliative care hospital deaths							
Obesity in children								

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.

A. Existing Services

Essential Services

Signposting for issues such weight management and Health checks.

Advanced Services

Some of the existing Advanced Services could be better utilised within Ealing, i.e, CPCS and NMS, including a focus on particular health needs in the population for these services, e.g. diabetes, CHD.

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.

Locally Commissioned Services

Sexual health services are not commissioned in community pharmacies in Ealing (except 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 Advanced Hepatitis C testing service could be advantageous.

B. 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.

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 (ABPM). 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 (DHSC) and NHSE&I proposed the commissioning of this service, as an Advanced Service.

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 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 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.

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

<u>Diabetes-focused pharmacy</u> (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 with a consultation which 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 <u>Chronic Obstructive Pulmonary Disease (COPD)</u> 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.

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)

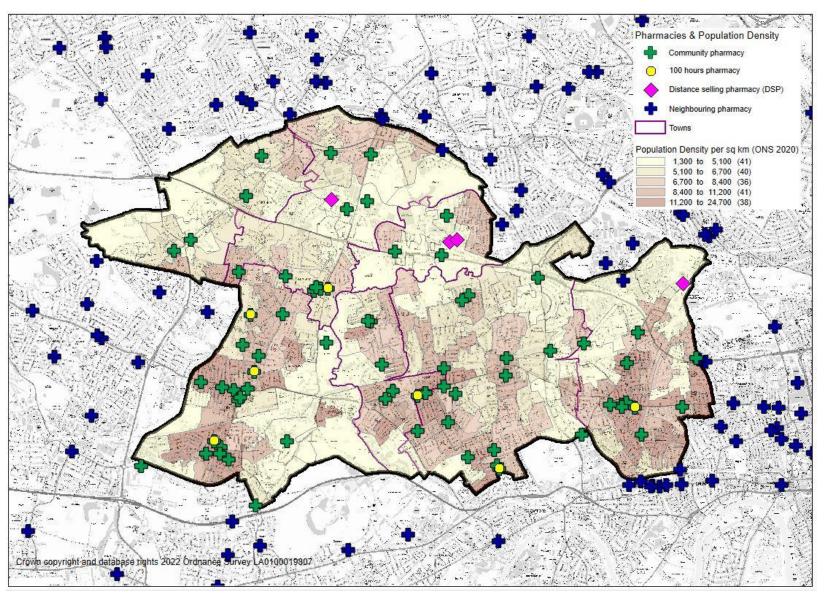
2. Identify the best way to deliver the new Advanced Services

Smoking cessation and hypertension case-finding can meet the health needs of Ealing, albeit in targeted localities.

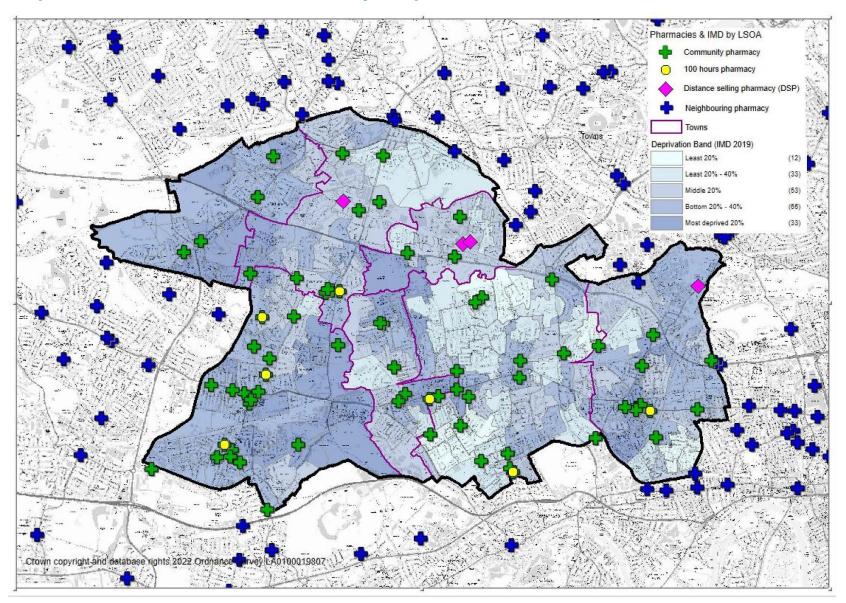
3. Consider the provision of new locally commissioned services

To meet specific health needs in Ealing, e.g. diabetes, weight management, cardiovascular or COPD services.

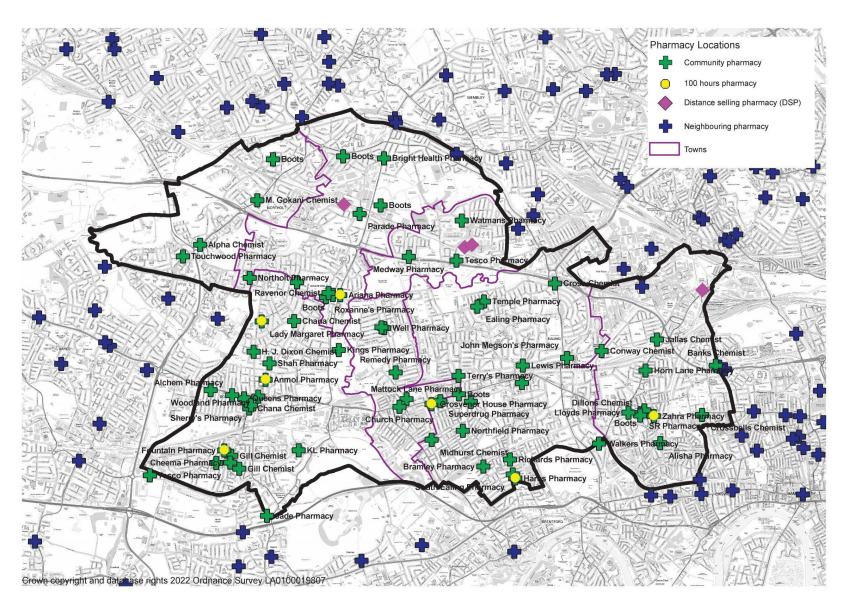
Map 1: Pharmacies and population density by output area



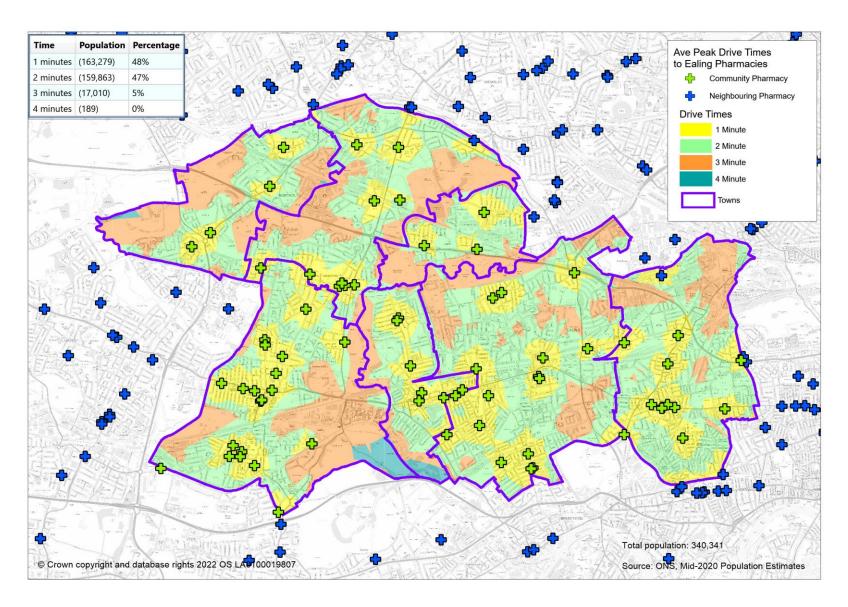
Map 2: Pharmacies and IMD 2019 by output area



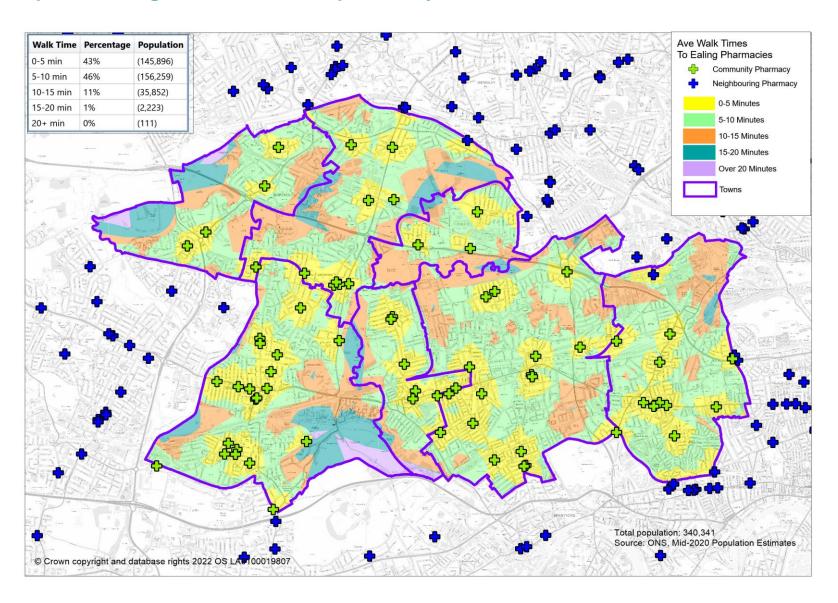
Map 3: All contractors in Ealine



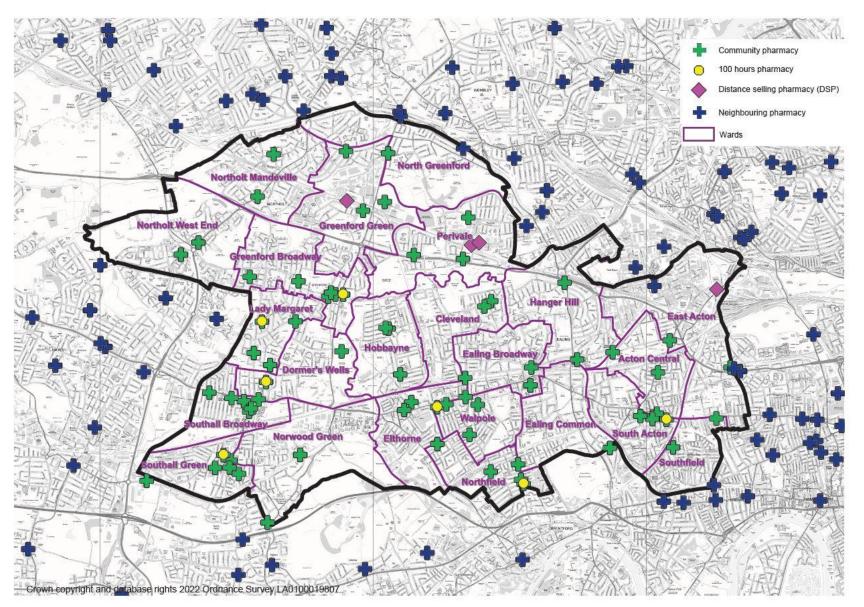
Map 4: Peak driving times to nearest pharmacy



Map 5: Walking times to nearest pharmacy



Map 5: Map identifying Ealing pharmacies and cross-border pharmacy provision



Abbreviations

ABPM – Ambulatory Blood Pressure Monitoring

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

CVD - Cardiovascular Disease

DAC - Dispensing Appliance Contractor

DfE – Department for Education

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

LASA - Look Alike Sound Alike

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 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