

STOKE-ON-TRENT

PHARMACEUTICAL NEEDS ASSESSMENT

OCTOBER 2022

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0 EXECUTIVE SUMMARY

0.1 Introduction

A Pharmaceutical Needs Assessment (PNA) is a statement of the needs of pharmaceutical services for a specified population. The PNA looks at the current provision of pharmaceutical services across a defined area, makes an assessment of whether this meets current and future population needs and identifies any potential gaps in current services or improvements that could be made in future pharmaceutical service provision.

The Health and Social Care Act 2012 transferred responsibility for developing and updating of PNAs to Health and Wellbeing Boards (HWBBs). Every HWBB has a statutory responsibility to publish and keep up to date a PNA for the population in its area through supplementary statements. The PNA will be used:

- To identify areas where pharmacies can contribute to health and wellbeing priorities to improve population health and reduce health inequalities.
- As an evidence base for local commissioners to identify and commission services from community pharmacies as appropriate.
- By NHS England's area team to make decisions on any application for opening new pharmacies and dispensing appliance contractor premises or applications from current providers of pharmaceutical services to change their existing provision.

0.2 What is the population of Stoke-on-Trent like?

Stoke-on-Trent has a resident population of just over 256,500 people and covers a largely urban geographical area of 36 square miles. Similar to many other areas in the region, a major characteristic of Stoke-on-Trent is its ageing population with its population continuing to grow in both size and average age.

The proportion of people from ethnic minority groups continues to grow locally but remains lower than the national average. The single largest ethnic minority group in the city is Pakistani (4.2%), and along with the ward of Lightwood North and Normacot in the south of the city, the wards with the largest concentration of Non-White British people were located in the three wards of Hanley Park and Shelton, Etruria and Hanley, and Moorcroft.

Stoke-on-Trent is characterised by high levels of deprivation and is currently ranked the 14th most deprived local authority area (out of 326) in England. Just over 134,000 people in the city live in

areas classified as being among the top 20% most deprived in England, which means five out of every ten people in Stoke-on-Trent are living in the top quintile of deprivation (compared with two out of ten nationally).

0.3 What is the health of Stoke-on-Trent like?

Overall people in Stoke-on-Trent have a shorter life expectancy than nationally, and have a healthy life expectancy of around 57 years. Hence both men and women spend more time in poor health than the average retirement age and there remain large health inequalities across the city. A number of demographic, socio-economic, cultural and environmental factors combine to increase the risk of an individual experiencing poorer health and wellbeing outcomes. Evidence also indicates that it is often the same families and communities that suffer a range of inequalities.

There are a number of factors that can help prevent ill health or diagnose problems early to enable better treatment, especially immunisation and screening. Childhood immunisation rates are better than national averages. City residents who are eligible take up their offer of an NHS Health Check more often than the national rate. However, a lower proportion of people take up cancer screening.

Around 40% of ill-health is thought to be preventable through healthier lifestyles. The prevalence of Stoke-on-Trent children who were overweight or obese in Reception (4-5 year olds) is 27.8% and increases significantly to 40.4% by the time children are in Year 6 (10-11 year olds). Adult smoking rates overall in Stoke-on-Trent remain high with just under one in five adults (18.2%) smoking regularly. There are large numbers of our population who drink too much over the life course, eat unhealthily and remain inactive.

More people in Stoke-on-Trent report having a limiting long-term illness. By the time people reach 65 they will have developed at least one chronic condition and large proportions will also have developed two or three conditions. Of particular concern are the growing numbers of people with multiple or complex conditions, and the increasing prevalence of dementia as the population ages.

Most care will occur in primary care or community settings. However, a higher than average proportion in Stoke-on-Trent also occurs in hospital settings, particularly among young children and older patients. Older people are also higher users of social care. Admission rates in Stoke-on-Trent for acute conditions that could be managed effectively in primary care or outpatient settings are higher than average.

0.4 What is current pharmaceutical provision like and are there any gaps?

Pharmacy is the third largest healthcare profession, with a universally available and accessible community service. Pharmacies are well used and based on a recent national audit conducted by the Pharmaceutical Services Negotiating Committee 7,200 people a day visit a pharmacy in Stoke-on-Trent. The same source found that the average pharmacy carried out around 17 informal consultations per day, equating to a total of 1,156 daily in Stoke-on-Trent.

Local data from the Engagement Survey found that 56% of respondents used their pharmacy at least monthly.

Stoke-on-Trent has 68 pharmaceutical service providers of one is an appliance contractor. The rate of community pharmacies and dispensing practices is 26.5 per 100,000 population, which is much higher than the national average of 21.5.

A national patient survey indicated that the public value a variety of types of pharmacy ownership. Around one-third of pharmacies in Stoke-on-Trent are owned by independent contractors whilst the remaining two-thirds are owned by multiple contractors.

The Engagement Survey found that local pharmacy services met the needs of the majority of respondents.

Overall there are sufficient numbers and a good choice of pharmacy contractors to meet Stokeon-Trent's pharmaceutical needs.

There is good geographical coverage across the city for pharmaceutical services and almost 100% of Stoke-on-Trent residents live within a five-minute drive of their local pharmacy. Well over 90% of residents can also access their local pharmacy within a one-mile walk or within 15 minutes using public transport.

In terms of opening hours, there are eight '100 hour' pharmacies across Stoke-on-Trent equating to around one in eight pharmacies, with all residents in the city having access to a community pharmacy for at least 100 hours during the week. Residents also have good access to a pharmacy during weekdays and Saturdays and Sundays however those within the east of the city have less access on a Sunday.

A number of pharmacies also now open on Bank Holidays. NHS England also work with community pharmacies to ensure there are adequate pharmaceutical services available on Christmas Day and Easter Sunday (this is because many larger stores containing pharmacies are closed on these two days due to current trading laws).

The Sustainability and Transformation may also want to consider commissioning extended pharmaceutical services on Sundays as one of the potential solutions to reducing A&E attendances. Prior to any potential changes, however, there should be adequate assessment of the likely impact on existing services, both within and outside the city, particularly on those pharmacies under contractual obligation to open on Sundays. Any such changes should be targeted to provide relevant services where they do not exist, and can achieve the outcome required without detriment to existing contractors already open and providing services.

In terms of the protected characteristics, pharmacies have a positive impact in meeting the needs of all people. Examples of this include:

- Antenatal and postnatal support to pregnant women and mothers.
- Pharmacies have staff members who speak a number of languages that are amongst the frequent main languages spoken across the city.
- Adjustments to medicines for disabled people as appropriate, for example large print labels.
 Most pharmacies also have a separate consultation room with wheelchair access.
- Delivery of dispensed medicines to an individual's home.

Findings from the Engagement Survey found most people used pharmacies for collecting their prescriptions. Health advice and disposal of unwanted medicines were also popular services. A small number of respondents wanted to see the introduction of services such as blood tests, health checks and information and the ability to prescribe some medicines for minor illnesses.

Stoke-on-Trent has good provision of advanced pharmacy services such as the New Medicine Service (NMS) across the city that help to deal with adherence to medicines and the management of people with long-term conditions. Continuing to promote this service would help adherence with medication, management of side effects and potentially avoid emergency admissions.

Coverage of Appliance Use Reviews is very low, whereas Stoma Appliance Customisation services are high. Reviewing appliance use may prevent the need for customisation.

An adult flu vaccination service was introduced as the fifth advanced service in September 2015. The number of pharmacies signed up to provide flu vaccination is high, although citywide flu vaccine uptake is slightly below average.

Pharmacies falling considerably below the average number of NMSs should be supported to increase their numbers, particularly in areas where there is an identified need, to help with the management of long-term conditions and reducing emergency admissions. This may be done by promoting the concept of NMSs to the public so that they understand the differences between reviews done by GPs and pharmacies. GP practices are also ideally placed to work with their local pharmacies to identify and refer on patients who require an NMS. Overall uptake of flu vaccination across the city is slightly lower than the national average. Further work should be done to support and market community pharmacies to increase the provision of flu vaccination across the city.

There are also opportunities for pharmacies to support the health, wellbeing and care needs of Stoke-on-Trent residents through locally commissioned services. In Stoke-on-Trent there are a number of services that are currently provided by pharmacies alongside other providers helping to meet the varying health needs of local residents. These include provision of: emergency supply of medication, treatment of urinary tract infections and impetigo, emergency hormonal contraception, supervised administration, needle exchange, sexual health services and palliative care.

Commissioners should consider the wider role of pharmacies in commissioning strategies (for example, primary care) so that opportunities to provide effective services are maximised locally.

The HWBB will continue to monitor any major developments (for example, planned housing developments, demographic changes) and in line with regulations produce supplementary statements to the PNA where deemed necessary. They will also monitor any proposed changes to Government policy that could have an effect on the provision of pharmaceutical provision, for example extended opening of GP services.

The HWBB will continue to monitor any local or national policy development that impact on the provision of pharmaceutical services in Stoke-on-Trent and continue to publish supplementary statements where needed.

1 INTRODUCTION

1.1 What is a pharmaceutical needs assessment?

A Pharmaceutical Needs Assessment (PNA) is a statement of pharmaceutical service needs for a specified population. The PNA looks at the current provision of pharmaceutical services across a defined area, assesses whether this meets current and future population needs and identifies any potential gaps to service delivery.

The Health and Social Care Act 2012 transferred responsibility for developing and updating PNAs to Health and Wellbeing Boards (HWBBs). Every HWBB has a statutory responsibility to publish and keep up to date a PNA for the population in its area through supplementary statements.

The NHS Pharmaceutical Services and Local Pharmaceutical Services Regulations (2013 Regulations) states that HWBBs must publish their first PNA by 1st April 2015. These should then be updated at least once every three years or before if there has been a significant change in service need or provision. In addition, the HWBB is required to keep up to date a map of provision of NHS pharmaceutical services within its area and publish any supplementary statements.

1.2 How will the PNA be used?

Uses of the PNA include:

- Identifying areas where pharmacies can contribute to health and wellbeing priorities to improve population health and reduce health inequalities. It will help the HWBB to work with providers to target services to the areas where they are needed and limit duplication of services in areas where provision is adequate.
- Providing an evidence base to NHS England area teams to identify and commission advanced and enhanced services. It will also inform local authority and clinical commissioning groups when commissioning local services from community pharmacies.
- Market entry the PNA will be used by NHS England's area team to make decisions on any application for opening new pharmacies and dispensing appliance contractor premises or applications from current providers of pharmaceutical services to change their existing provision. Under legal regulations potential contractors of NHS pharmaceutical services must submit a formal application to NHS England to be included on a relevant list by proving they are able to meet a current pharmaceutical need as identified in the relevant PNA. NHS England's area team will then review the application in light of any gaps

identified in local PNAs. The NHS Litigation Authority will also refer to the PNA when hearing appeals on NHS England's decisions.

1.3 What are the NHS pharmaceutical services?

NHS pharmaceutical services as set out in the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 and the Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2013 are commissioned solely by NHS England.

For the purposes of the PNA, pharmaceutical services included within the scope are:

- **Community pharmacies** are registered premises where pharmacists work as healthcare professionals either as sole traders, partnerships or limited companies.
- **Dispensing appliance contractors (DACs)** who are appliance suppliers for a specific subset of NHS pharmaceutical contractors who supply, on prescription, appliances such as stoma and incontinence aids, dressings and bandages but cannot supply medicines.
- Distance selling contractors are internet and mail order-based contractors who provide
 their services across England to anyone who requests it. They may be pharmacy or
 dispensing appliance contractors. Under the 2013 Regulations only pharmacy contractors
 may now apply to be distance selling premises.
- Local pharmaceutical services (LPS) contractors provide a level of pharmaceutical services in some HWBB areas. An LPS contract allows NHS England to commission community pharmaceutical services tailored to specific local requirements.
- **Dispensing doctors** are medical practitioners authorised to provide pharmaceutical services from medical practice premises in designated rural areas known as "controlled localities". They can dispense NHS prescriptions to their own patients who live more than one mile (1.6 km as the crow flies) from a pharmacy. Controlled localities are rural areas which have been determined by NHS England, a predecessor organisation (primary care trust), or on appeal by the NHS Litigation Authority. The one-mile rule does not apply to practices in **reserved locations** and patients in these localities both within one mile of the pharmacy and beyond have the right to choose whether to have their medicines dispensed at a pharmacy or at their GP surgery. A reserved location is an area within a controlled locality where the total of all patient lists for the area within a radius of one mile of the proposed premises or location is fewer than 2,750.

Under the NHS Community Pharmacy Contractual Framework there are three different levels of services that pharmacies could provide. These are:

- Essential services these are those services which every community pharmacy who
 provides NHS pharmaceutical services must provide as set out in their terms of service and
 includes the dispensing of medicines, promotion of healthy lifestyles and support for selfcare.
- Advanced services these are services that community pharmacies and DACs can
 provide subject to accreditation as necessary. These include Medicines Use Reviews and
 the New Medicines Service for community pharmacists and Appliance Use Reviews and
 the Stoma Customisation Service for dispensing appliance contractors.
- Enhanced services additional locally commissioned services that are commissioned by NHS England such as services to care homes, language access and patient group directions.

Other organisations, for example clinical commissioning groups and local authorities can commission services from community pharmacies. However, these services are not part of NHS Pharmaceutical Services as defined by the 2013 Regulations and therefore cannot be described as enhanced services and should be described as **locally commissioned services**.

1.4 The process for developing the updated PNA for Stoke-on-Trent

 A PNA working group was set up across Stoke-on-Trent and Staffordshire with a view to shaping the production of the PNAs for the two areas. This included a range of stakeholders from Stoke-on-Trent City Council, Staffordshire County Council, NHS CCGs and provider trusts such as MPFT, the Local Pharmaceutical Committees (LPC) for North Staffordshire and South Staffordshire, Healthwatch and the Local Professional Network (LPN) for pharmacies.

The PNA process for Stoke-on-Trent included:

- An Engagement Survey with the public (run by Healthwatch on behalf of Stoke-on-Trent City Council) asking people about their use and experiences of local pharmacies.
- An online Community Pharmacy Questionnaire for pharmacies to complete about current and future pharmaceutical needs and services.
- Identifying local needs through use of the Joint Strategic Needs Assessment (see figure 1
 which illustrates the JSNA process in commissioning cycle).

- Collecting information on pharmacy **service provision** from NHS England, Staffordshire County Council, Stoke-on-Trent City Council, the LPC and other commissioners.
- A public consultation on the draft PNA (run by Stoke-on-Trent City Council) asking both residents and professionals what they thought about the draft PNA.
- Production of the final PNA for Stoke-on-Trent and sign-off by the HWBB for publication by 1 October 2022.

Figure 1: The role of the Joint Strategic Needs Assessment in the commissioning cycle



1.5 Definition of localities for the PNA

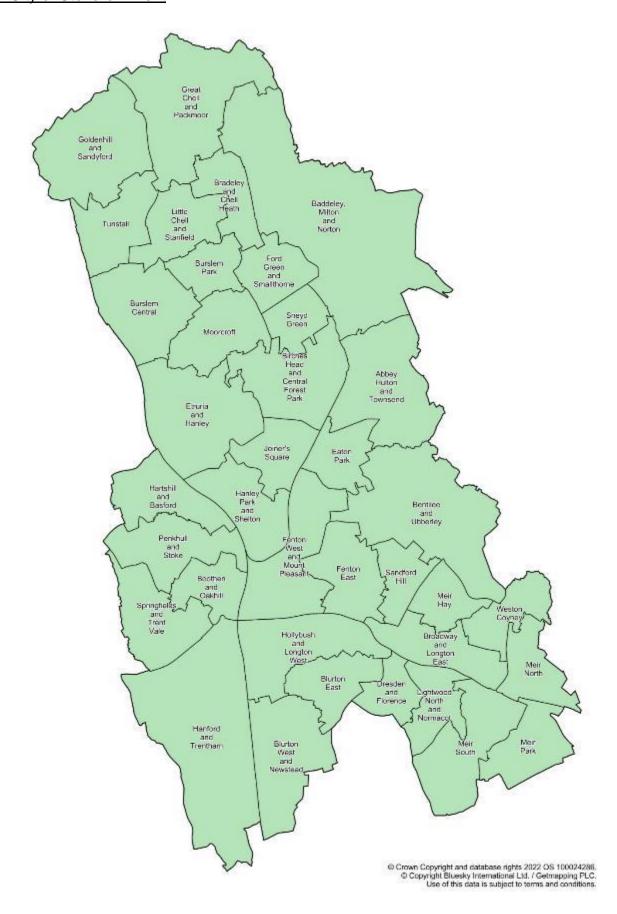
Stoke-on-Trent has a resident population of just over 256,600 and covers an area of approximately 36 square miles (or 93 km²). Together with the neighbouring boroughs of Newcastle-under-Lyme and Staffordshire Moorlands, it is part of North Staffordshire.

The city is comprised of six towns: Tunstall, Burslem, Hanley, Stoke, Fenton and Longton. Known locally as the Potteries, the city was the home of the pottery industry in England. Formerly an industrial area, the city is now a centre for service industries and distribution centres.

In Stoke-on-Trent, health, social and wellbeing services or programmes are commissioned by Stoke-on-Trent City Council and Clinical Commissioning Group, NHS England and UKHSA / OHID (formerly Public Health England).

The PNA for Stoke-on-Trent is based on the geographical boundary of the city (map 1).

Map 1: City of Stoke-on-Trent



1.6 Pharmacy services aligned to Sustainability and Transformation Partnerships

Building upon the work of Sustainability and Transformation Partnerships (STPs), NHS planning guidance published in January 2019 saw the release of the NHS Long Term Plan. This sets out a national ambition over the next five and ten years for all STPs to evolve into Integrated Care Systems (ICSs). ICSs would be central to the delivery of the Long-Term Plan by bringing together local organisations to redesign care and improve population health, creating shared leadership and action. ICSs exist to improve the health of all residents, address the growth of people living with multiple and long term conditions, preventing illness, tackling variation in care and delivering seamless services while getting maximum impact for every pound.

Throughout 2019, Staffordshire and Stoke-on-Trent created their Five Year Plan, setting out objectives for how services will transform for the local population, over the following five years. Unfortunately, this work had to pause due to the COVID-19 pandemic and so this plan was not published.

For community pharmacies, the NHS Long Term Plan states:

- NHS England will work with Government to make greater use of community pharmacists' skills and opportunities to engage patients;
- NHS England and the Government will explore further efficiencies through reform of reimbursement and wider supply arrangements;
- NHS England will work with community pharmacists and others to provide opportunities for the public to check their health, through tests for high blood pressure and other high-risk conditions; and
- NHS 111 will start direct booking into GP practices across the country, as well as referring on to community pharmacies who can support urgent care and promote patient self-care and self-management.

NHS England also makes several mentions of pharmacists, in particular noting the role that they will play in local Primary Care Networks. Pharmacists may be involved in helping to identify and treat people with high-risk conditions, undertaking a range of medicine reviews, including educating patients on the correct use of inhalers, and offering medicine reviews to care home residents.

The report states that funding for primary care networks will be used to substantially expand the number of clinical pharmacists, who are now a key part of the general practice team; and

Pharmacists will routinely work in general practice helping to relieve pressure on GPs and supporting care homes.

Map 2: Stoke-on-Trent and Staffordshire's Sustainability and Transformation Partnership localities



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2 WHAT IS THE POPULATION OF STOKE-ON-TRENT LIKE?

2.1 Population structure

Stoke-on-Trent had an estimated residential population of 256,622 in 2020. Since the 2011 Census, the city's population has increased by just over 3% (7,900 people). As the population of the city continues to grow and change, this will have an impact on both the provision and use of health and social care services as well as pharmaceutical services.

Figure 2: Stoke-on-Trent population timeseries 2001-2020

Source: Office for National Statistics 2022

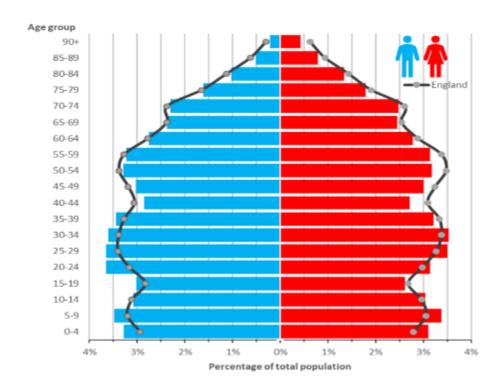
The overall population structure of Stoke-on-Trent is largely similar to England (figure 3). Around one in five people in the city are aged under 16 (compared to 19.2% in England), whilst among older people, 17.3% of local people are aged 65 and over compared with 18.5% in England (table 1 and figure 3).

Table 1: Population breakdowns of Stoke-on-Trent and England in 2020

Area	0-4	05-15	16-24	25-49	50-64	65-74	75+	Total
Stoke-on- Trent	16,391 (6.4%)	36,294 (14.1%)	28,852 (11.2%)	83,561 (32.6%)	47,110 (18.4%)	24,661 (9.6%)	19,753 (7.7%)	256,622
England	3,239,447 (5.7%)	7,612,793 (13.5%)	5,950,637 (10.5%)	18,449,296 (32.6%)	10,833,946 (19.2%)	5,598,428 (9.9%)	4,865,591 (8.6%)	56,550,138

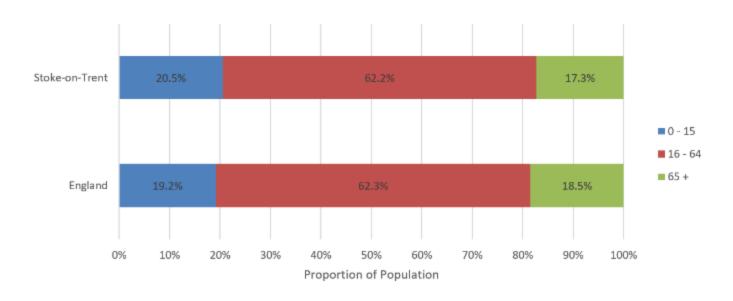
Source: Office for National Statistics 2017

Figure 3: 2020 population structures of Stoke-on-Trent and England



Source: Office for National Statistics 2022

Figure 4: Population breakdowns of Stoke-on-Trent and England in 2020



Source: Office for National Statistics 2022

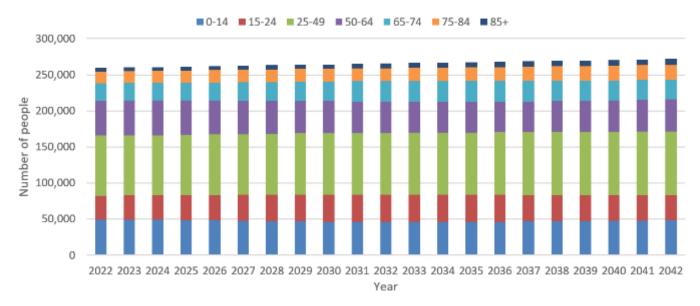
2.2 Future populations

The population of Stoke-on-Trent continues to grow, as it does in the rest of England. Since 2002, the numbers of people living in the city has increased by nearly 16,700, which is equivalent to a 6.5% growth.

The overall population of Stoke-on-Trent is projected to increase by 4.6% between 2022 and 2042 (figure 5). This is smaller than the projected increase in England of 6.9%. The largest rate of increase locally over the next decade is projected to be among older people aged 85 years old and over – an increase of almost two fifths (figure 6). Among all people aged 65 and over, numbers are projected to increase by over 10,200 across the city. Whilst these local projections may alter over the coming years as a consequence of changes in birth rates, migration and immigration patterns, the changing population of Stoke-on-Trent will continue to have an impact on the provision and use of a range of health, social care and pharmaceutical services.

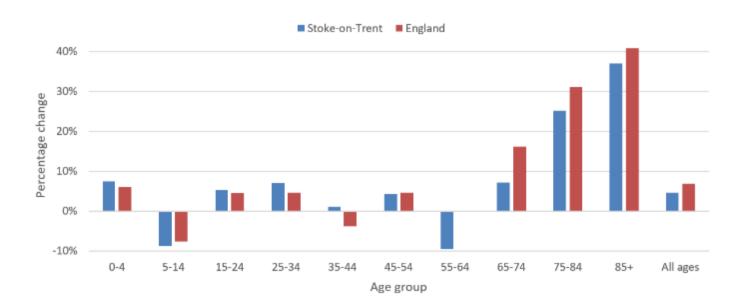
In line with population projections, around 670 new houses are planned to be built every year in the city over the next 20 years. However, there are a number of housing developments in various stages of planning in the city and not all plans have been adopted yet and are subject to change. The HWBB will therefore continue to monitor whether future housing developments require additional pharmaceutical provision. As well as schools and other community facilities such as local shops and newsagents, the City Council needs to ensure they include pharmaceutical provision as part of their planning process under the consideration of provision of healthcare facilities.

Figure 5: Population projections for Stoke-on-Trent up to 2042



Source: Office for National Statistics 2020

Figure 6: Projected population change between 2022 and 2042



Source: Office for National Statistics 2020

2.3 Ethnicity

The health needs and health outcomes of people from ethnic minority groups are known to differ from the general population. These differences can be the result of a range of factors, including genetic predisposition to certain conditions (such as diabetes, obesity, coronary heart disease, mental health), poor access to healthcare services, language barriers, cultural differences and, at times, discrimination.

According to latest estimates, there were 51,000 people from ethnic minority groups in Stoke-on-Trent in 2016, which is 20.2% of the population compared with 22.1% in England (figure 7). The largest ethnic minority group in the city were classified as Asian (9.5%). Since the 2011 Census, the percentage of local people from ethnic minority groups has increased from 13.6% to 20.2% (compared with an increase in England from 20.2% to 22.1%).

The wards of Lightwood North and Normacot (in the south of the city), along with Hanley Park and Shelton, Etruria and Hanley, and Moorcroft have the highest numbers of people from ethnic minority groups.

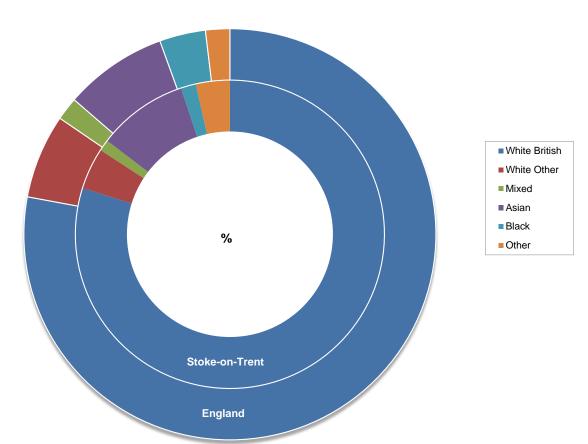


Figure 7: Ethnicity in Stoke-on-Trent and England (2016)

Source: Office for National Statistics 2017

2.4 Deprivation

Deprivation is caused by many different factors such as poverty, a lack of qualifications, homelessness, social housing, unemployment, low wages. People who find themselves living in deprived areas are more likely to experience poorer health, live shorter lives and to have a greater use of and demand for health and social care services compared with people from more affluent areas.

The Index of Multiple Deprivation 2019 (IMD 2019) is the official measure of deprivation in England. It is comprised of seven different domains of deprivation which, when combined, form the overall summary measure of multiple deprivation. The IMD 2019 measures deprivation at Lower Super Output Area (which are small geographical areas containing around 1,500 people each).

Stoke-on-Trent is characterised by high levels of deprivation and is currently ranked the 13th most deprived local authority (out of 317) in England. The most deprived areas of the city are located around the wards of Tunstall, Burslem Central, Bentilee and Ubberley, and Blurton West and Newstead (map 3).

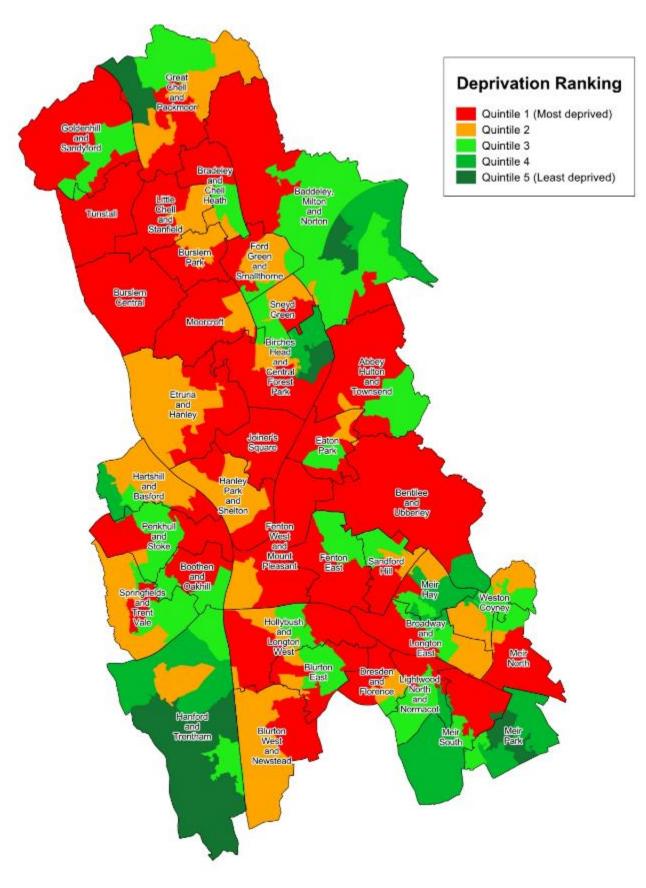
Just over 136,900 people in the city were living in areas classified as being among the top 20% most deprived in England (figure 8). This means that five out of every ten people in Stoke-on-Trent (53.0%) are living in the top quintile of deprivation (compared with two out of ten nationally). On the other hand, only 4.8% of people across the city (around 12,350) were living in areas classified as the least deprived.

100% 90% 80% 70% **5** Percentage of Population 60% 50% **3** 40% 2 30% **1** 20% 10% 0% Stoke-on-Trent England Area

Figure 8: Population quintiles by 2019 Index of Multiple Deprivation

Source: Office for National Statistics 2019

Map 3: 2019 Index of Multiple Deprivation in Stoke-on-Trent



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3 THE HEALTH OF LOCAL PEOPLE

The health and wellbeing of people living in Stoke-on-Trent is generally worse than the England average. This section provides a summary of the key health challenges faced by local people and focuses particularly on those issues which pharmacies could potentially contribute to improving.

This section should be read in conjunction with Stoke-on-Trent's Joint Strategic Needs
Assessment which provides a range of resources looking at the health and social care needs of local people.

3.1 Life expectancy

How long a person lives is influenced by many factors, including individual lifestyle choices and the wider 'determinants of health', such as education, employment, housing, access to healthcare services. Cancer, circulatory disease and respiratory disease are among those health indicators which have been shown to have the greatest impact upon life expectancy.

Life expectancy remains one of the best overall measures of the city's health status. One of the reasons for this is that every death that takes place within an area is included in its calculation, and it remains relatively straight forward to understand.

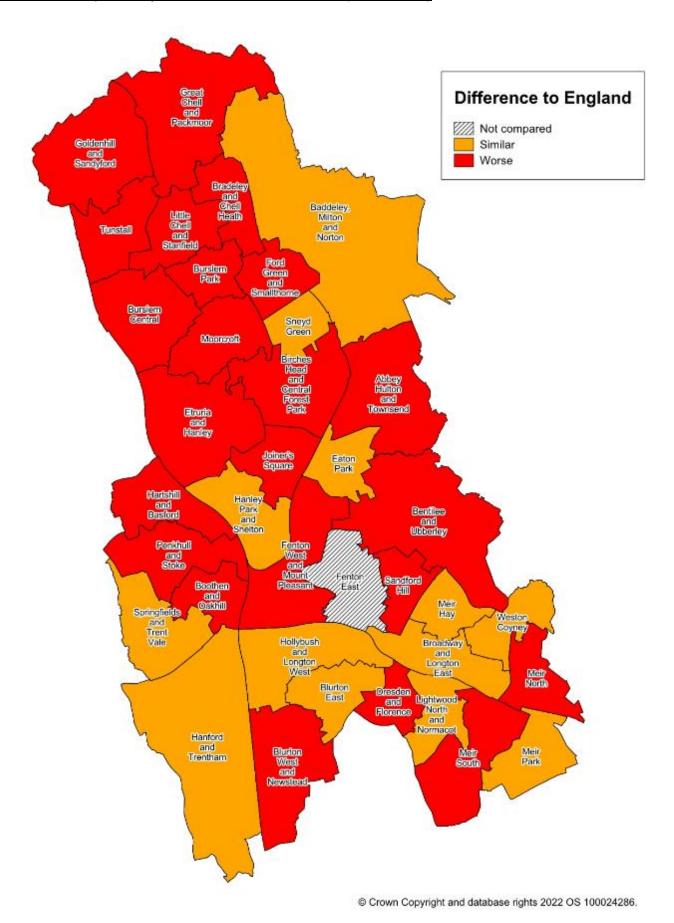
Life expectancy at birth among men in the city has stalled in recent years, and is currently 76.5 years compared with 79.8 years in England (based on 2017-19). In contrast, life expectancy continues to increase among women locally and is currently 80.2 years compared with 83.4 years in England. Overall, women across the city live on average 3.7 years longer than men, which is larger than the national gap of 3.6 years.

Men living in the most deprived areas of the city (based on 2018-20) live on average 9.4 years less compared with those in the least deprived areas, whilst among women this gap is 8.8 years.

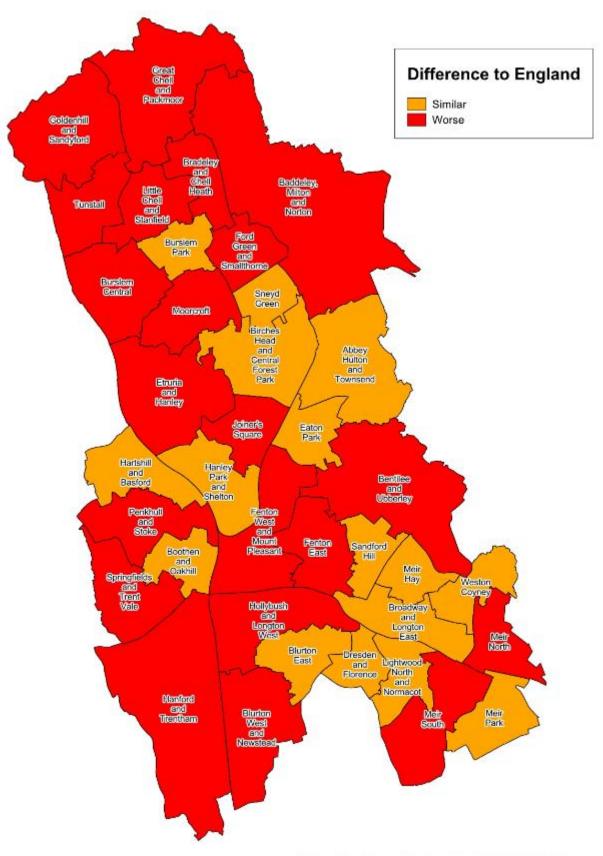
Across the city, there are also marked differences in life expectancy at birth. Among males, life expectancy ranged from 72.1 years in the ward of Burslem Central to 82.8 years in Meir Park, a gap of 10.7 years. Life expectancy among females ranged from 76.2 years in Joiner's Square to 88.3 years in Meir Hay, a gap of 12.1 years.

Compared with the averages for England, life expectancy for men was significantly *lower* among 23 of the 37 wards in the city (map 4) and among 21 wards for women (map 5).

Map 4: Male life expectancy at birth in Stoke-on-Trent (2017-2019)



Map 5: Female life expectancy at birth in Stoke-on-Trent (2017-2019)



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Healthy life expectancy is an estimate of the number of years that someone is likely to live in 'good health'. Healthy life expectancy for men in Stoke-on-Trent was 56.7 years and 56.7 years for women (figure 9). This means that, on average, local men could expect to live around 71% of their lives being healthy compared with around 74% for women. Both of these are below national levels.

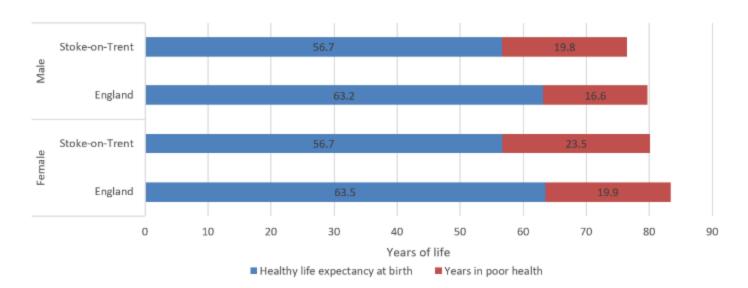


Figure 9: Healthy life expectancy at birth (2017-2019)

Source: Office for National Statistics 2021

3.2 Main causes of death

Around 3,000 people die in Stoke-on-Trent each year. The three most common causes of death in the city during 2017-2019 were cancer (35.5% of all deaths), circulatory disease (19.6%) and deaths from respiratory disease (11.4%). Between them these three conditions accounted for just under 67% of all deaths, which is higher than England (59.5%).

3.3 Preventable and premature mortality

Preventable mortality is a high-level indicator that can broadly be used to measure the success of public health interventions. The major causes of preventable deaths can largely be attributed to the social determinants of health, which include things such as education, employment, housing, as well as lifestyle risk factors such as smoking, drinking, unhealthy diets, physical inactivity.

Mortality rates from preventable deaths remain plateaued in Stoke-on-Trent, although they remain significantly higher than the national average (figure 10). Across the city, around half of the people aged under 75 die from causes that are largely thought to be preventable, which is the equivalent of around 460 deaths each year.

300 Directly Standardised Rate per 100,000 250 200 150 100 50 2015 -2016 2004 -2017 -2005 -2006 2007 2008 2009 2010 -2011 -2012 -2013 2014 -06 07 80 09 10 11 12 15 17 18 19 Year

Stoke-on-Trent

Figure 10: Preventable mortality under 75 years of age (2004-2019)¹

Source: Public Health England 2020

Premature mortality looks at deaths in people under the age of 75. Of the 8,412 people who died in the city between 2018-20, 3,136 (37.3%) died prematurely. Among the three leading causes of death in the city – cancer, circulatory disease and respiratory disease – premature mortality rates have fallen over the past decade (figure 11). In spite of these falls, however, current rates for all three conditions locally remain significantly higher than England.

England

In 2020 around 330 people under 75 years of age died from cancer in Stoke-on-Trent, making it the largest killer of local people (29.7% of all deaths of those aged under 75). Of all those who die from cancer each year in the city, around 155 die are considered preventable, accounting for 33.1% of all preventable deaths under 75.

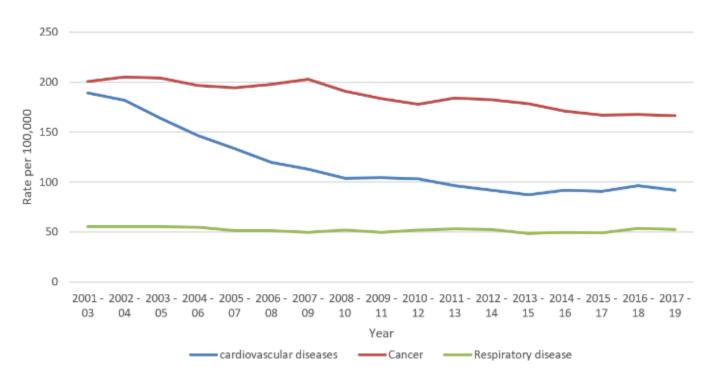
¹ The vertical bars on the charts (used throughout the report) show the 95% confidence intervals (95% CI), and have been used here to test whether there is a statistically significant difference

between Stoke-on-Trent and England. If the bars of the 95% CI overlap, then there is said to be no difference (statistically) between areas. If the bars do not overlap, there is a significant difference (statistically) between areas.

In 2020 around 250 people under 75 years of age died in Stoke-on-Trent from cardiovascular disease every year, making up around 22.5% of all deaths of those aged under 75. Of all these deaths, just over 100 are preventable which accounts for 21.7% of all premature deaths under 75.

Respiratory disease is the third largest killer of local people accounting for around 10% of all deaths, and in 2020 110 died from respiratory disease. Around 100 people deaths are considered preventable each year from respiratory disease, accounting for 21.6% of all preventable deaths.

Figure 11: Premature mortality (under 75) from leading causes of disease in Stoke-on-Trent (2001-2019)



Source: Public Health England 2020

3.4 Health protection

There are many different factors that can help prevent ill health or diagnose problems early to enable better treatment, especially immunisation and screening. This section looks at some of the interventions designed to keep local people healthy by preventing ill health or detecting disease early to improve treatment outcomes.

3.4.1 Immunisations

Uptake rates for childhood immunisations are higher in Stoke-on-Trent than England across all the major vaccinations (figure 12). However more importantly, local immunisation rates in most cases are now lower than the 95% optimum protective target set by the World Health Organisation for all

PNA for Stoke-on-Trent 2022	Page 3
MMR for children aged five (this currently stands at 95.7% across the city).	
vaccinations apart from one-year PCV (95.2%), two-year Dtap/IPV/Hib (95.8%) and one	e dose of

98% 96% 94% Percentage 92% 90% 88% 86% 84% 82% Dtap / IPV / Hib Dtap / IPV / Hib Hib / MenC PCV PCV booster MMR for one MMR for one MMR for two booster dose dose doses

2 yrs

England

· · · · · · WHO target

Figure 12: Childhood immunisations in 2020/21

Source: Office for Health Improvement & Disparities 2022

Stoke-on-Trent

1 yr

People aged 65 and over, along with those at risk (such as babies and people with certain medical conditions) were of a similar level of likeliness to be vaccinated against flu in Stoke-on-Trent compared with England (table 2). As large numbers of people aged over 65 are admitted to hospital for vaccine preventable conditions such as pneumonia, increasing levels of pneumococcal vaccinations remain important.

Table 2: Adult immunisation uptake rates in 2020/21

	Flu v	raccination	Pneumococcal vaccine
Area	65 and over (%)	Under 65 at risk (%)	65 and over (%)
Stoke-on-Trent	79.6	50.9	70.3
England	80.9	53.0	70.6

Source: Office for Health Improvement & Disparities 2022

3.4.2 Screening

Uptake of screening in 2021 for breast, cervical and bowel cancer varies considerably in Stoke-on-Trent compared with England. On average, around 71.3% of women (aged 53-70) were screened for breast cancer in 2021 (higher than the England average of 64.1%), 67.7% of women (aged 25-49) were screened for cervical cancer (similar to the England average of 68%), whilst 61.6% of people in the city (aged 60-74 years) were screened for bowel cancer (lower than the national average of 65.2%). The percentage of women being screened for breast cancer has fallen in the

5 yrs

latest year both locally and nationally. This may be attributed to the effects of the pandemic but will need to be monitored closely over the coming years. Factors which affect screening uptake include age, ethnicity, deprivation along with the effectiveness of service provision.

3.4.3 NHS Health Checks

The NHS Health Checks programme aims to help prevent heart disease, stroke, diabetes, kidney disease and certain types of dementia. Everyone between the ages of 40 and 74 (who is eligible) is invited to have a check-up at their doctors to assess their risk of developing these conditions, and is given support and advice to help them reduce or manage their risk.

The percentage of people in Stoke-on-Trent receiving an NHS Health Check has been consistently higher than England since the programme was launched in 2013. At present, over half (57.8%) of eligible people in the city have received a check compared with 46.5% in England (this percentage is significantly higher locally).

3.5 Lifestyle risk factors

Our lifestyles have a big impact on our health. Smoking, physical activity, drinking, our weight, the food we eat, taking illegal (and legal) drugs, along with many other lifestyle factors, all have an impact on our health, both good and bad. Around 40% of ill health is thought to be preventable through healthier lifestyles, and people with one lifestyle risk factor are also likely to have others as well. National research indicates that people in more deprived areas are likely to have more lifestyle risk factors, leading to inequalities in health and health outcomes.

3.5.1 Smoking

Smoking is the single biggest preventable cause of disease and premature death in the UK. One in two regular smokers are killed by tobacco, with half dying before the age of 70, and losing an average of 21 years of life. Smoking is a major risk factor for many diseases, such as lung cancer, chronic obstructive pulmonary disease and heart disease (all among the biggest killers of local people). Smoking also causes cancer in many other parts of the body such as the mouth, throat and stomach.

In Stoke-on-Trent in 2019 under one fifth (18.2%) of adults smoke (compared with 13.9% nationally), which means there are about 36,200 current smokers in the city. The prevalence of smoking is also higher locally among routine and manual social groups, contributing to increases in health inequalities.

In 2017 – 19 around 1,200 people died in the city as a result of smoking. The current rate of smoking-attributable deaths in the city is significantly *higher* than the national average, and each day in Stoke-on-Trent approximately 1.1 people die from a smoking related disease.

Smoking during pregnancy harms unborn babies and results in both short and longer term health problems for children. Smoking during pregnancy increases the risks of miscarriage, stillbirth, low birth weight, and increases the risk of cot death and respiratory disease.

Just over 15% of women smoked during pregnancy in Stoke-on-Trent in 2020/21 which was significantly higher than the England average of 9.6% (figure 13).

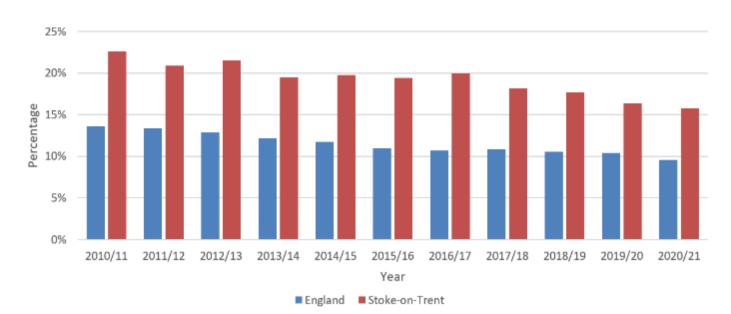


Figure 13: Percentage of women smoking at time of delivery (2010/11-2020/21)

Source: Office for Health Improvement & Disparities 2022

3.5.2 Breastfeeding

Breastfeeding provides the very best nutrition for babies, and has been shown to have a range of health and social benefits. These include helping to protect babies against infection, gastroenteritis, urinary tract infections, allergies and obesity. Benefits to the mother of breastfeeding include a faster return to pre-pregnancy weight and possibly lower risks of breast and ovarian cancer.

Breastfeeding rates in Stoke-on-Trent remain lower than national averages. The percentage of local women breastfeeding their babies for the first feed after of delivery remains around 53%

compared with 67.4% in England. Alongside initiation rates, breastfeeding rates at 6-8 weeks locally are 32.1% compared with 47.6% in England.

3.5.3 Alcohol misuse

Excessive drinking is linked with higher death rates from circulatory disease, cirrhosis of the liver, stomach cancers, and also leads to increases in physical and sexual assaults, crime, domestic and child abuse.

In 2017-19, more than double the rate of people in Stoke-on-Trent died as a result of alcohol than the England average (Stoke-on-Trent - 21.3 per 100,000, England - 10.9 per 100,000). The rate of admissions to hospital for alcohol-related problems has reduced slightly over the past few years however still remains higher than the national average, with were nearly 1,700 admissions in 2020/21.

The percentage of adults in Stoke-on-Trent who successfully completed treatment for alcohol increased sharply from 30.4% in 2019 to 47.9% in 2020. This completion rate is now significantly higher than the national average of 35.3%.

Between 2018/19 and 2020/21, 45 children under 18 were admitted to hospital due to alcohol in Stoke-on-Trent. Locally, admission rates for alcohol-specific conditions among young people continue to fall, and are now similar to the national average.

3.5.4 Obesity, healthy eating and physical activity

The percentage of Reception schoolchildren (4-5 year olds) who were overweight or obese in Stoke-on-Trent in 2019/20 was 27.8%, whilst among Year 6 children (10-11 year olds), this figure increases locally to 40.4% (figure14). The percentage of Year 6 pupils in the city who are overweight or obese have slowly increased over the past decade, and remain significantly *higher* than England.

Around three quarters of adults in the city were either overweight or obese which is *higher* than the national average. This means approximately 151,000 adults (18 and over) are likely to have a weight problem across the city. These high numbers locally go hand in hand with lower levels of healthy eating and lower levels of physical activity.

A large proportion of older people are also at risk of malnutrition (especially among people aged 85 and over) with numbers projected to increase sharply in Stoke-on-Trent in line with demographic changes.

Reception - Stoke-on-Trent

Year 6 - Stoke-on-Trent

Reception - England

Year 6 - England

Academic year

Figure 14: Percentage of schoolchildren overweight and obese (2006/07-2019/20)

Source: Office for Health Improvement & Disparities 2022

3.5.5 Sexual health

Teenage pregnancy can have a detrimental impact upon the health of both mothers and their babies. Babies born to teenage mothers are more likely to be born prematurely, to have a low birth weight, to have a higher risk of cot death and are more likely to be born into poverty. For mothers, teenage pregnancy can increase the likelihood of poor educational attainment, unemployment and poverty.

Although the current teenage conception rate in Stoke-on-Trent remains significantly *higher* than the national average, the overall rate in the city continues to fall (figure 15). The city is no longer ranked among the top ten worst performers in the country (ranked 11th), and in 2019 there were 104 teenage conceptions (to girls aged 15-17 years old) in Stoke-on-Trent. This compares with 224 conceptions a year a decade ago.

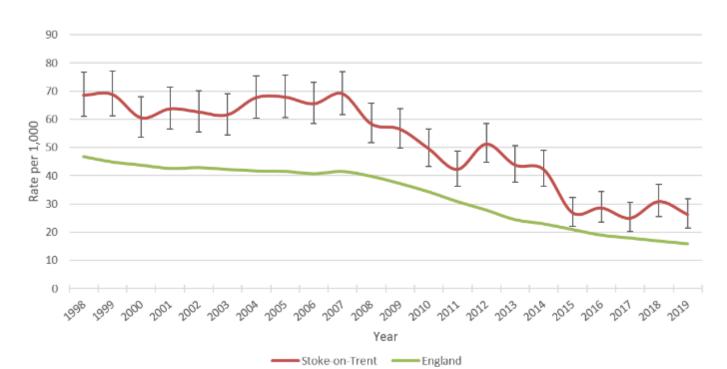


Figure 15: Teenage conception rates among 15-17-year olds (1998-2019)

Source: Office for National Statistics 2022

Chlamydia is the most commonly diagnosed sexually transmitted infection in England, but it often has no symptoms and so a large number of cases remain undiagnosed. The National Chlamydia Screening Programme was set up to control and prevent the spread of chlamydia, targeting those most at risk (young people aged 15-24).

Over the past decade screening rates both locally and national have fallen with just over one tenth of young people aged 15-24 screened for chlamydia during 2020 in Stoke-on-Trent, which is significantly *lower* than the England average of 14.3%. This rate is considerably lower than the national target of at least 2,300 (per 100,000 population, figure 16). We do not know if this is due to lower levels of chlamydia in different areas as the national target does not account for this, or whether young people most at risk of chlamydia are not being targeted appropriately for testing.

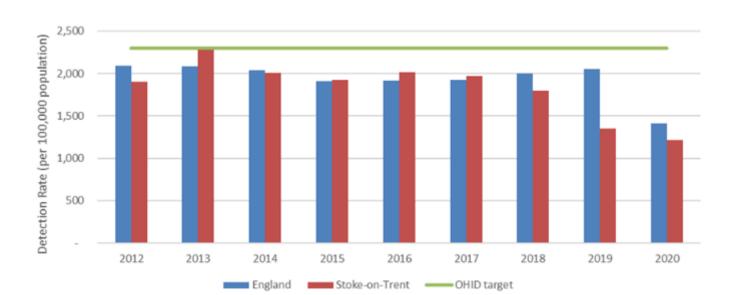


Figure 16: Chlamydia detection rates among 15-24-year olds (2012-2020)

Source: Office for Health Improvement & Disparities 2022

3.6 Long-term conditions

Long-term conditions (LTCs) are those conditions which currently cannot be cured but can be controlled and managed with the use of medication and other therapies. People with LTCs are more likely to see their GP and use pharmaceutical services, be admitted to hospital and stay in hospital longer than people without LTCs.

National estimates suggest there is a rising demand for the prevention and management of people with multiple conditions, especially multiple LTCs. By the time most people reach 65 they will have developed at least one chronic condition, and a large proportion will have developed two or three conditions. As the local population continues to age and live longer, more people are likely to develop LTCs and to live with these conditions for longer.

People in Stoke-on-Trent are more likely to have a limiting long-term illness compared with England. Across a number of conditions recorded in general practice, the prevalence of LTCs is higher in the city compared with England (figure 17). Many of these conditions can be supported by pharmacies. At just over 16%, hypertension is the most prevalent LTC recorded locally, which equates to around 48,000 people in the city (this figure is likely to be higher due to undiagnosed hypertension).

Defending the figure of the fi

Figure 17: Prevalence of long-term conditions in 2020/21

Source: NHS Digital 2022

The numbers of people with dementia (aged 65 and over) continues to grow, both locally and nationally. If the current prevalence of dementia remains the same, the ageing population means that the number of people aged 65 and over with dementia in Stoke-on-Trent could rise from around 2,900 in 2020 to nearly 4,100 by 2040.

Stoke-on-Trent England

Research suggests that between a quarter and half of people older than 85 are estimated to be frail, with the overall prevalence in people aged 75 and over approximately 9%. Based on this, there are around 1,800 frail elderly people in the city, and this number is likely to increase in line with an ageing population.

3.7 Growing demand on health and social care

Most health care occurs in primary care or community settings. However, a large proportion of care in Stoke-on-Trent also occurs in hospital settings.

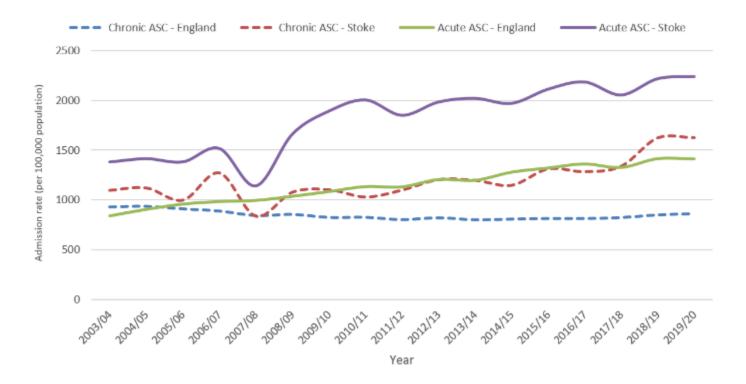
Large proportions of people who attend A&E departments and minor injury units in the city are likely to require information and advice about minor illnesses and conditions. Pharmacies are ideally placed to help reduce some of this demand through the common ailments services which support patients with common minor illnesses, such as diarrhoea, minor infections, headaches and sore throats.

Older people are also more likely to spend a longer time in hospital because their needs are often more complex. National research suggests that longer hospital stays can also lead to harm, particularly among older people.

Each year in Stoke-on-Trent large numbers of people are admitted to hospital for acute and chronic conditions that can be managed effectively in primary care and outpatient settings, including community pharmacies.

Hospital admissions for these ambulatory care sensitive conditions (ACS), as they are known, continue to increase locally (figure 18). In 2019/20, around 3,000 people were admitted to hospital for acute ACS conditions that should not usually require hospital admission, whilst a further 4,200 were admitted for chronic ACS conditions.

Figure 18: Unplanned admissions from ambulatory care sensitive (ACS) conditions (2003/04-2019/20)



Source: NHS Digital 2022

The number of emergency hospital admissions due to falls among people aged 65 and over continues to decrease locally, and the current rate is significantly *lower* than England (figure 19). In 2020/21, there were around 750 admissions due to falls, which are now similar to numbers a decade ago. Approximately two thirds of all admissions for falls in 2020/21 were among people aged 80 and over.

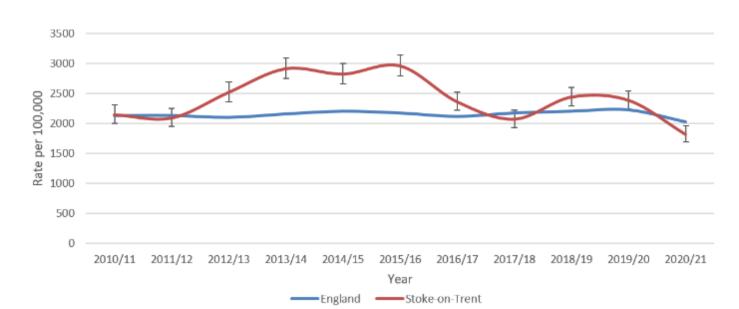


Figure 19: Hospital admissions due to falls in people aged 65 and over (2010-2021)

Source: Office for Health Improvement & Disparities 2022

The risk of adverse effects and interactions with other drugs increases with the number of medicines someone takes and may contribute to the increased risk of falls, particularly amongst older people. The risks of falls can also increase when starting a new medicine or changing a dose and community pharmacists are well placed to advise patients on this during medicine reviews.

During 2020/21 there were around 3400 permanent admissions to residential and nursing care homes among people aged 65 years and over in the city, with the rate being significantly *higher* than the national average.

3.8 End of life care

Compared with home, hospices and care homes, hospital is the least preferred place that people choose to die. Nationally, only 3% of people choose to die in hospital but around 50% of people actually die in hospital and nearly 30% of all hospital beds are occupied by someone in their last year of life.

Across Stoke-on-Trent, the proportion of people (all ages) dying at home or their usual place of residence in 2020 was 25.3%, and has increased in recent years (figure 20). However, the current proportion remains significantly *lower* than the England average of 27.4%. The proportion of deaths in hospital in Stoke-on-Trent continues to fall.

Care homes Hospital Hospice 60 50 40 Percentage 20 10 0 2011 2012 2013 2014 2015 2016 2017 2018 2019 2020

Year

Figure 20: Percentage of Stoke-on-Trent deaths by location (2011-2020)

Source: Office for Health Improvement & Disparities 2022

3.9 Covid-19

The Covid-19 pandemic impacted all areas of life in the UK during 2020 and 2021. As of May 2022, the rollout of the vaccine and booster program, end of free LFD testing and removal of almost all legal requirements around Covid-19 mean that we are now in the "Living with Covid" phase. Healthcare providers are still experiencing impacts ranging from staff sickness absence to staff testing requirements to increased hospital bed occupancy but any impacts on demand for services are likely to now be greatly reduced.

4 CURRENT PROVISION OF PHARMACEUTICAL SERVICES

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

As described in section 1.3, there are three levels of pharmaceutical services that community pharmacies can provide:

- Essential services services all pharmacies are required to provide.
- Advanced services services to support patients with safe use of medicines.
- Enhanced services services that can be commissioned locally by NHS England.

Pharmacies can also provide locally commissioned services which are commissioned by local commissioners such as Stoke-on-Trent City Council. This section describes the current provision of these services within Stoke-on-Trent.

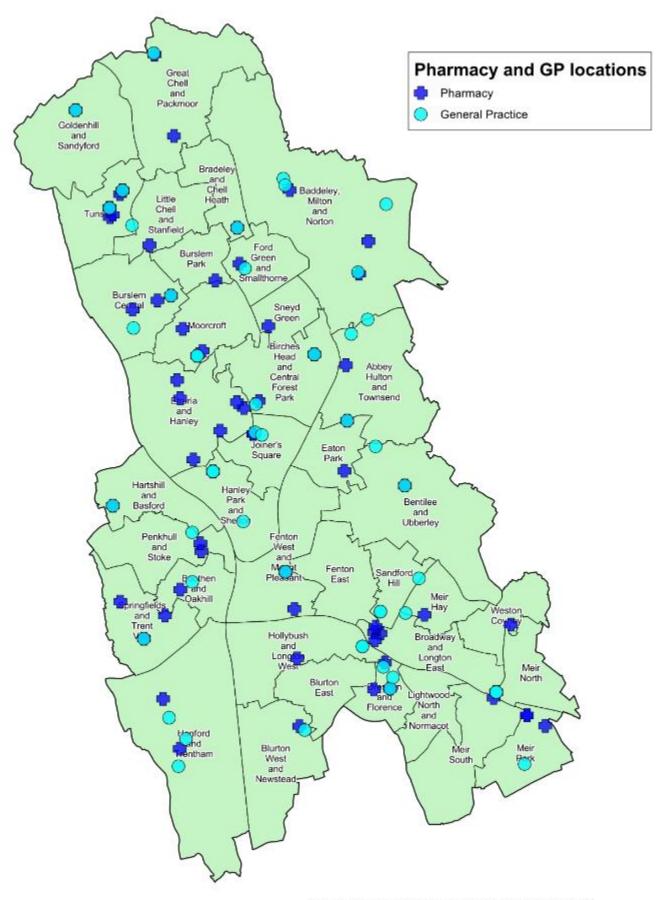
4.1 Pharmaceutical provision in Stoke-on-Trent

Pharmacies are the third largest healthcare profession in the UK, with a universally available and accessible community service. There are 68 community pharmacies in the city.

A recent audit conducted by the Pharmaceutical Services Negotiating Committee concluded that 1.6 million people a day visit a pharmacy in England, equating to around 7,200 in Stoke-on-Trent. The same source found that the average pharmacy carried out around 17 informal consultations per day, equating to a total of 1,156 daily in Stoke-on-Trent.

There are 68 pharmaceutical service providers in Stoke-on-Trent of which one is an appliance contractor. There is also one GP dispensing practice, Trinity Medical Centre situated in Blythe Bridge, Staffordshire Moorlands which is a member practice of Stoke-on-City CCG (although this falls outside the boundary of the city, table 3). Map 6 shows the location of pharmaceutical providers alongside GP practices in Stoke-on-Trent.

Map 6: Pharmaceutical providers and GP practices in Stoke-on-Trent (April 2022)



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The rate of community pharmacies and dispensing practices is 26.5 per 100,000 population which is above the national average of 21.4 (figure 23).

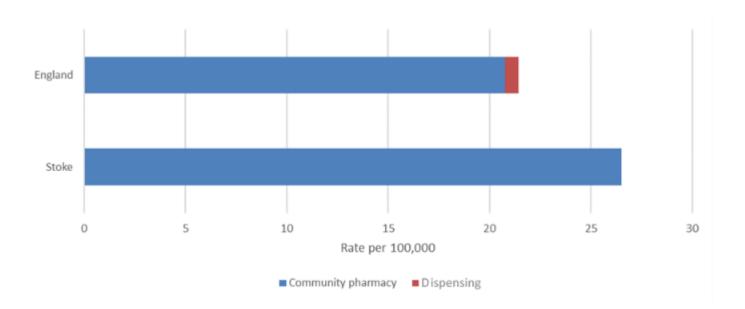


Figure 21: Pharmaceutical providers per 100,000 population (April 2022)

Source: NHS Business Services Authority 2022, NHS Digital 2017, NHS England North Midlands 2022

A national patient survey indicated that the public value a variety of types of pharmacy. In terms of ownership around one-third of pharmacies in Stoke-on-Trent are owned by independent contractors whilst the remaining two-thirds are owned by multiple contractors. (Note: for the purposes of this assessment the national definition of multiple contractors is used which are those community pharmacies who own six or more pharmacies).

4.2 Essential pharmacy services

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

- dispensing medicines
- dispensing appliances
- repeat dispensing
- disposal of unwanted medicines
- public health promotion of healthy lifestyles

- signposting
- support for self-care
- clinical governance
- Discharge Medicines Service

Dispensing medicines and/or appliances – the safe supply of medicines or appliances. Advice is given to the patient about the medicines being dispensed and how to use them. Records are kept of all medicines dispensed and significant advice provided, referrals and interventions made. Nationally, the number of prescriptions dispensed each year continues to grow and have increased from around 752 million in 2006 to over 1.25 billion in 2021. Some of the reasons which help to explain these increases are shown below:

Factors which influence the number of prescriptions dispensed

The size of the population.

The age structure of the population, notably the proportion of the those aged 60 and over, who generally receive more prescriptions than the young.

Improvements in diagnosis, leading to earlier recognition of conditions and earlier treatment with medicines.

Development of new medicines for conditions with limited treatment options.

Development of more medicines to treat common conditions.

Increased prevalence of some long-term conditions, for example, diabetes.

Shifts in prescribing practice in response to national policy, and new guidance and evidence.

Increased prescribing for prevention or reducing risk of serious events, for example use of lipid-lowering drugs to reduce risk of stroke or heart attack.

Source: Health and Social Care Information Centre 2014

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

Electronic Prescription Service (EPS) – the Electronic Prescription Service allows prescriptions to be sent direct to pharmacies and appliance contractors through IT systems used in GP surgeries. This means that patients do not have to collect a paper repeat prescription from the GP practice, but can go straight to the nominated pharmacy or dispensing appliance contractor to pick up their medicines or medical appliances. Currently 97.8% of prescriptions issued in Stoke-on-Trent are via the EPS. Patients have to nominate a particular community pharmacy or appliance contractor so that the electronic prescription can be sent to them securely, but this nomination can be changed at any time if a patient consents to do so.

Disposal of unwanted medicines – pharmacies accept unwanted medicines from individuals. The medicines are then safely disposed of.

Promotion of healthy lifestyles (public health) – opportunistic one to one advice is given on healthy lifestyle topics, such as stopping smoking, to certain patient groups who present prescriptions for dispensing. Pharmacies will also get involved in up to six local campaigns every year as directed by NHS England. Campaign examples may include promotion of flu vaccination uptake or advice on increasing physical activity.

In Stoke-on-Trent campaigns are coordinated by NHS England across the West Midlands region with every pharmacy normally provided with posters and/or leaflets or links on where to access them. During 2021/22 following campaigns were planned:

- COVID-19 vaccination campaign
- Winter vaccines
- Weight management
- Smoking cessation

Future campaigns are currently in negotiations with the Department of Health and Social Care and NHSE&I and will be released in due course Feedback from pharmacies has generally been good – going forward it will be collected electronically by NHS England so further work can be done to evaluate the campaigns. Future campaigns should continue to be planned to complement identified local needs (as described in sections 2 and 3).

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

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

Clinical governance – pharmacies must have a system of clinical governance to support the provision of excellent care. Requirements include:

- provision of a practice leaflet for patients
- use of standard operating procedures
- patient safety incident reporting to the National Reporting and Learning Service
- conducting clinical audits and patient satisfaction surveys
- having complaints and whistle-blowing policies
- acting upon drug alerts and product recalls to minimise patient harm
- having cleanliness and infection control measures in place

Findings from the Engagement Survey found most people used pharmacies for collecting their prescriptions. Health advice and disposal of unwanted medicines were also popular services. A small number of respondents wanted to see the introduction of services such as blood tests, health checks and the ability to prescribe some medicines for minor illnesses.

4.3 Advanced pharmacy services

There are eight currently active advanced services (discounting both pandemic within the community pharmacy contract. Community pharmacies can choose to provide any of these services commissioned by NHS England as long as they meet the requirements set out in the Secretary of State Directions.

The number of pharmacies who provide these services in Stoke-on-Trent is shown in table 3. There is overall good coverage of New Medicine Service (NMS) across the city. Coverage of Appliance Use Reviews and Stoma Appliance Customisation services in the city are low which is similar to the trend seen across England. This is mainly due to these services being a specialist area with many patients receiving the support they require either from a clinic or hospital or from a dispensing appliance contractor located in another area, for example Staffordshire. The number of pharmacies providing Influenza Vaccination services (for adults) is better than the national average. Since the last PNA 3 additional service have been added; Hypertension Case-Finding Service, Hepatitis C Testing Service and Smoking Cessation Service (SCS). Uptake on these services are still in their infancy so there is limited data at this juncture.

During the height of the pandemic two additional services were commissioned; C-19 lateral flow device distribution service and Pandemic Delivery Service. Both services have subsequently been decommissioned however the possibility remains that both services may be recommissioned with the emergence of new variants.

Table 3: Number of responding pharmacies providing advanced services in Stoke-on-Trent (2022)

Area	New Medicine	Appliance Use	Stoma Appliance	Influenza Vaccination	Hepatitis C testing	Community Pharmacist Consultation Service	Hypertension case finding	Stop Smoking service	C-19 lateral flow device distribution service	Pandemic delivery service
Stoke-on- Trent	60	4	3	59	0	60	23	2	44	24
	100%	7%%	5%	98%	0%	100%	38%	3%	73%	60%
England*	9,543	65	1,278	9,816	10	9,284	**	**	**	**
	82.0%	0.6%	11.0%	84.4%	0.1%	79.8%				

Source: NHS Digital 2022, NHS England North Midlands 2022 *2020/21 data used **no data available

Medicines Use Review (MUR) – The Medicines Use Review (MUR) and Prescription Intervention Service was decommissioned on 31st March 2021.

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

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

The Department of Health commissioned researchers from the University of Nottingham to lead an academic evaluation of the service, investigating both the clinical and economic benefits of it. The findings from the evaluation were published in August 2014 and were overwhelmingly positive, with the researchers concluding that as the NMS delivered better patient outcomes for a reduced cost to the NHS it should be continued. This was the basis for NHS England's firm decision to continue commissioning this advanced service.

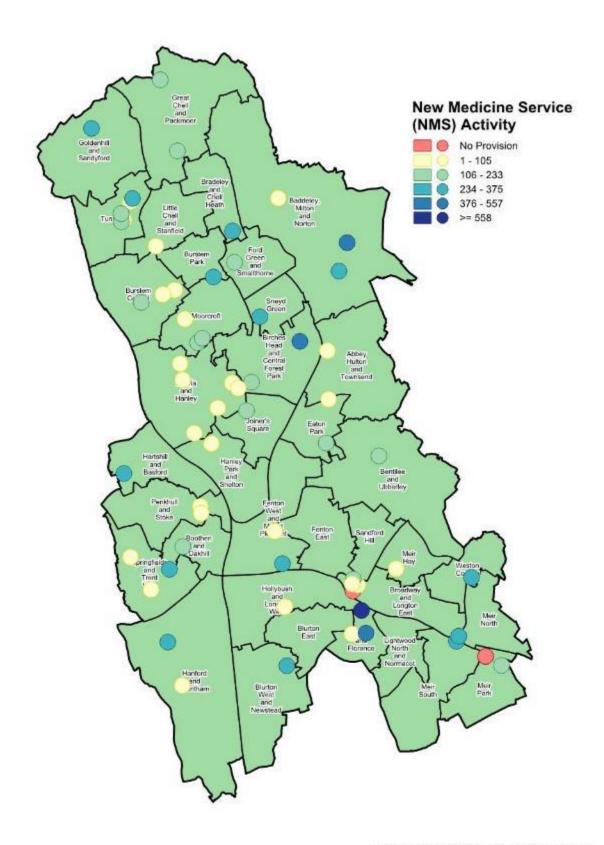
The pharmacist will provide the patient with information on their new medicine and how to use it when it is first dispensed. The pharmacist and patient will then agree to meet or speak by telephone in around a fortnight and a final consultation around 21-28 days after starting the medicine. Any issues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

On average every participating pharmacy in the city saw around 171 patients annually (in 2021/22) which is higher than the national average of 127 (table 4 and map 7).

Table 4: New Medicine Service activity (2021/22)

Area	Number of pharmacies	Number of NMS	Average number per pharmacy
Stoke-on- Trent	66	11,280	171
England	10,573	1,338,206	127

Source: NHS Digital 2022, NHS England North Midlands 2022



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Appliance Use Review (AUR) – this service aims to help patients better understand and use their prescribed appliances (for example, stoma appliances) by establishing the way the patient uses the appliance and the patient's experience of such use. The review allows identification, discussion and assistance in the resolution of poor or ineffective use of the appliance by the patient. Advice is provided to patients on the safe and appropriate storage of the appliance and proper disposal of the appliances that are used or unwanted. The service is conducted in a private consultation area or in the patient's home. (map 8)

Stoma Appliance Customisation (SAC) – this service involves the customisation of a quantity of more than one stoma appliance, based on the patient's measurements or a template. The aim of the service is to ensure proper use and comfortable fitting of the stoma appliance and to improve the duration of usage, thereby reducing waste. The provision of SACs during 2021/22 in the city has declined since 2018 (map 9).

Table 5: Appliance Use Review and Stoma Appliance Customisation activity (2021/22)

	Appliance Use Review			Stoma Appliance Customisation		
	Number of pharmacies	Number	Average per pharmacy	Number of pharmacies	Number	Average per pharmacy
Stoke-on-Trent	4	0	0	6	6,774	1,129
England	65	48,076	740	1,278	1,529,708	1,623

Source: NHS Digital 2022, NHS England North Midlands 2022

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

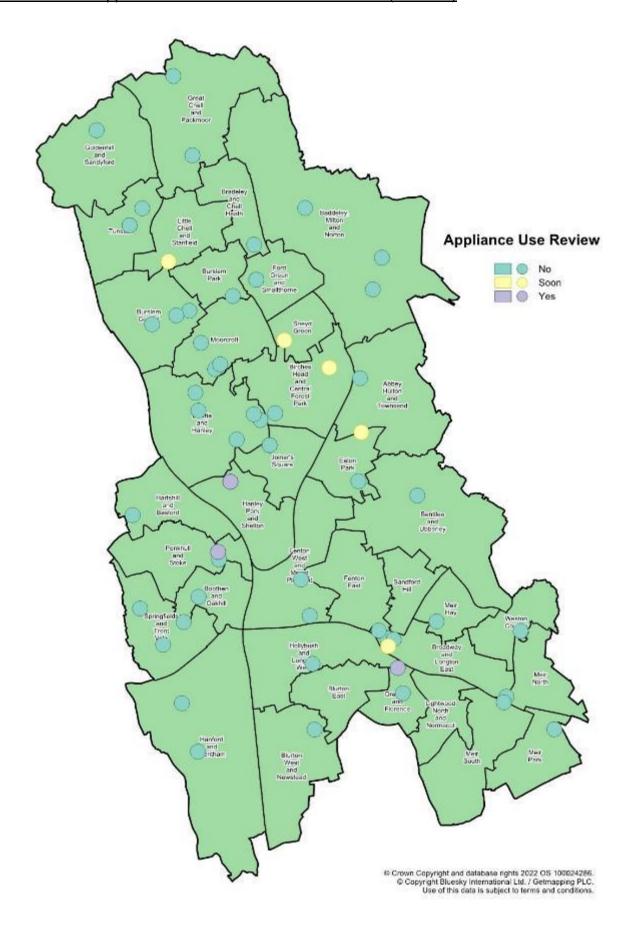
The proportion of pharmacies signed up to provide flu vaccination services is better than the national average (98% locally v 84% nationally), although provision per pharmacy during 2021/22 in Stoke-on-Trent was lower than the average (table 6 and map 10). Further work could be done to support community pharmacies to increase provision.

Table 6: Influenza Vaccination (for adults) activity (2021/22)

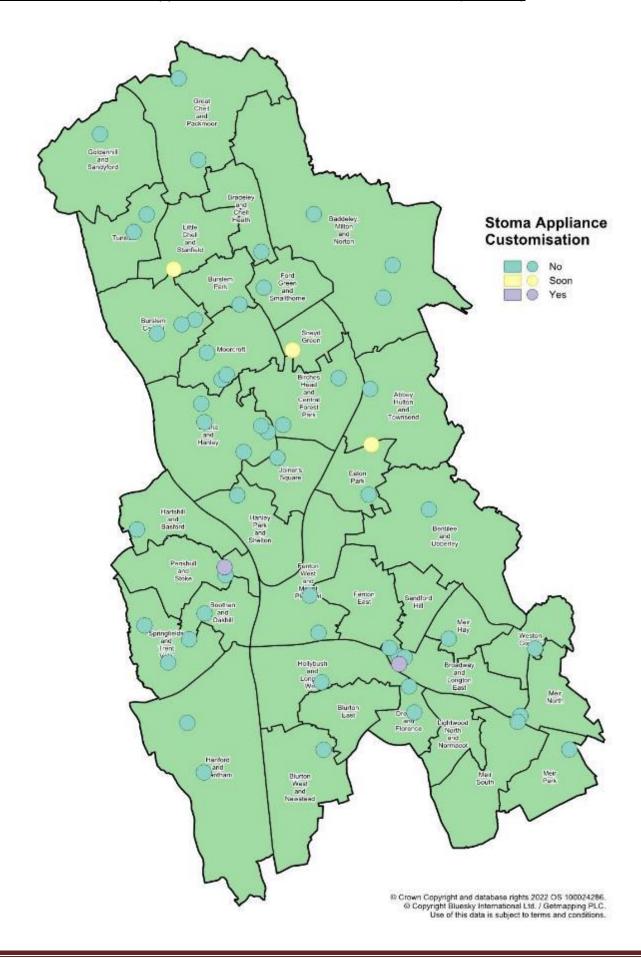
Area	Number of pharmacies	Number of vaccinations	Average number per pharmacy
Stoke-on- Trent	59	23,477	398
England	9,817	4,838,727	493

Source: NHS Digital 2022, NHS England North Midlands 2022

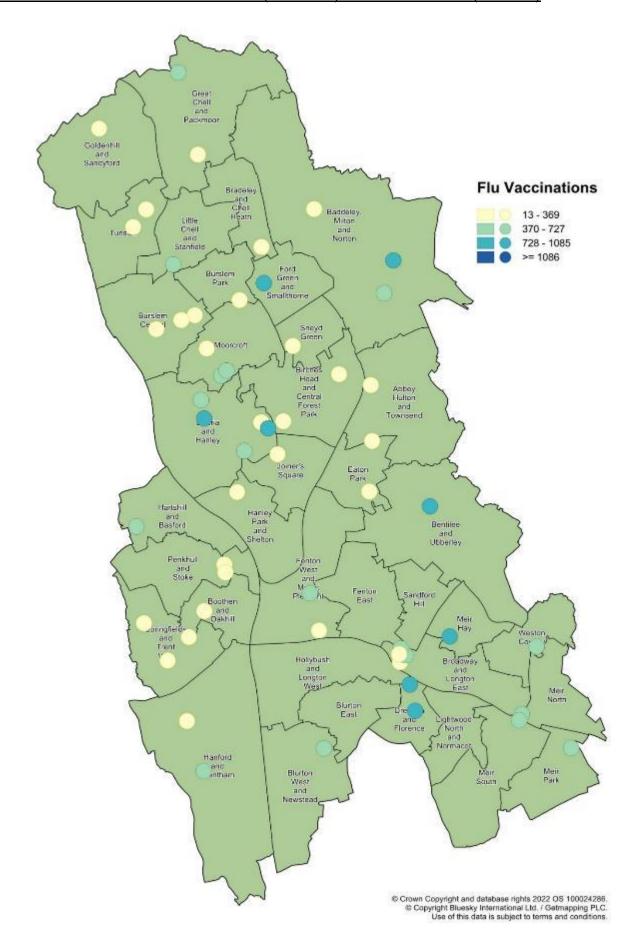
Map 8: Provision of Appliance Use Review in Stoke-on-Trent (2021/22)



Map 9: Provision of Stoma Appliance Customisation in Stoke-on-Trent (2021/22)



Map 10: Provision of Influenza Vaccination (for adults) in Stoke-on-Trent (2021/22)



Community Pharmacist Consultation Service (CPCS) Activity - As well as referrals from general practices, the service takes referrals to community pharmacy 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 CPCS aims to relieve pressure on the wider NHS by connecting patients with community pharmacy, which should be their first port of call and can deliver a swift, convenient and effective service to meet their needs. Since the CPCS was launched, an average of 10,500 patients per week being referred for a consultation with a pharmacist following a call to NHS 111; these are patients who might otherwise have gone to see a GP. In Stoke-on-Trent the average number per pharmacy is similar to England.

On average every participating pharmacy in the city saw around 42 patients annually (2021/22) which is similar to the national average of 41 (table 7 and map 11).

Table 7: Community Pharmacist Consultation Service (CPCS) Activity (2021/22)

Area	Number of pharmacies	Number	Average number per pharmacy
Stoke-on- Trent	68	2,853	42
England	9,284	379,388	41

Source: NHS Digital 2022, NHS England North Midlands 2022

Hypertension Case-Finding Service - In 2020, NHS England and NHS Improvement (NHSE&I) commenced a pilot involving pharmacies offering blood pressure checks to people 40 years and over. In some pharmacies within the pilot, where the patient's initial blood pressure reading was elevated, they would be offered 24-hour ambulatory blood pressure monitoring (ABPM).

Following the initial findings of the pilot, the Department of Health and Social Care (DHSC) and NHSE&I proposed the commissioning of a new Hypertension case-finding service, as an Advanced service, in the Year 3 negotiations.

The Hypertension Case Finding service started in October 2021 so as of yet there is no national data to compare against, however over a third of responding pharmacists within the city already include this service with an additional 27 responding with the intent to add the service soon.

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

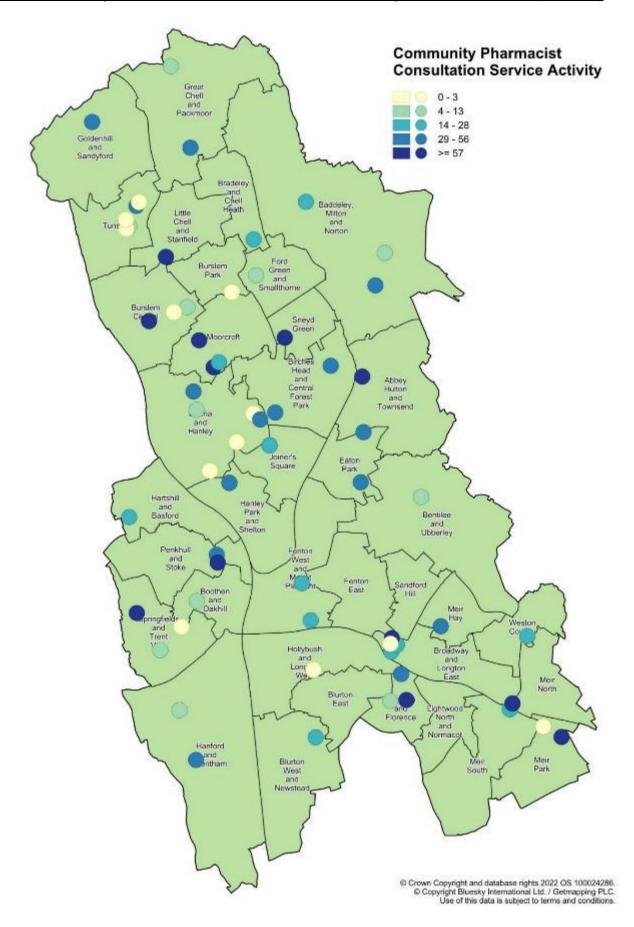
Currently there are no Hepatitis C testing services in the city which is in line with national data. Although 3 pharmacists responded with the intent to be adding this service soon.

Smoking Cessation Service (SCS) - In 2020/21 a Pharmacy Integration Fund pilot on smoking cessation began to test a new model of working in which community pharmacies managed the continuing provision of smoking cessation support initiated in secondary care following patient discharge from hospital.

The early findings from the pilot indicated that a consistent, national offer could be achieved through community pharmacy, and that it could create the capacity needed to enable NHS trusts to transfer patients for smoking cessation support into the community.

On 10th March 2022 a Stop Smoking Service was commissioned as an advanced service.

Map 11: Community Pharmacist Consultation Service Activity in Stoke-on-Trent (2021/22)



C-19 lateral flow device distribution service - COVID-19 lateral flow antigen tests allow the detection of people with high levels of the COVID-19 virus, making them effective in identifying individuals who are most likely to transmit the virus, including those not showing symptoms.

The service allowed asymptomatic people to collect LFD test kits, free of charge, from community pharmacies, so they could undertake regular testing as part of the Government's COVID-19 plan. The wide availability of the test kits helped curb the spread of the disease within England and the rest of the United Kingdom; within Stoke-on-Trent 44 of its pharmacies offered this service.

Pandemic delivery service – The majority of pharmacies already use a delivery service either as a paid for provision or free. However, restrictions set out by the government in response to the global pandemic limited the outside movement of the general public especially those deemed clinically extremely vulnerable. This advanced service was initially established to cater for this particular subset of people allowing them to effectively shield from the general population. Within Stoke 24 pharmacies across the city offered this service.

4.4 Enhanced and locally commissioned pharmacy services

Local commissioners (for example, NHS England and Stoke-on-Trent City Council) can commission additional services through service level agreements. Sometimes commissioners will only allow certain pharmacies in particular areas to deliver these services. Some services are also contracted by other providers, for example smoking cessation through subcontracting arrangements. Services that are commissioned in Stoke-on-Trent are shown in table 8.

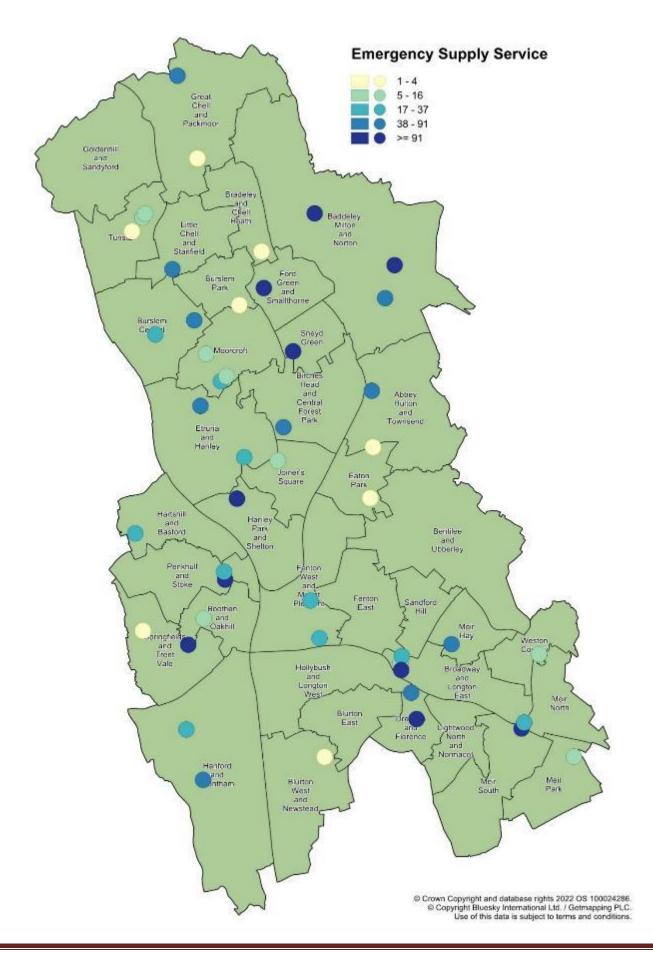
Table 8: Provision of locally commissioned services in Stoke-on-Trent (2021/22)

Commissioned service	Number of pharmacies	Percentage of pharmacies
Emergency supply	46	68
Urinary tract infections	45	66
Impetigo	19	28
Emergency hormonal contraception	41	60
Supervised consumption	47	69
Needle exchange	18	26
Palliative care	16	24
C-Card LA	27	
Chlamydia screening CCG	19	28
Covid-19 vaccinations	5	7

Source: Combined Healthcare NHS Trust 2022, NHS England North Midlands 2022, Stoke-on-Trent City Council 2022, Stoke-on-Trent Drug and Alcohol Rehabilitation Service 2022

Emergency supply – this service enables pharmacies to issue up to 14 days' worth of medication to patients who have run out of their prescribed medication during the pharmacy's regular opening hours.

During 2021/22 there were 46 pharmacies signed up to provide the service in Stoke-on-Trent (map 12) with approximately 3432 provisions being made during the year (an average of around 74 per year for each pharmacy).



Urinary tract infections (UTI) – this service allows pharmacies to provide antibiotic treatment for urinary tract infections (UTI) for women aged 16-74 who meet the inclusion criteria following accreditation of pharmacists under a Patient Group Direction (PGD). There are 45 active providers for treatment of UTI with 1,098 provisions being made, averaging at 24 per active pharmacy (map 13).

Emergency hormonal contraception – this service allows pharmacies to provide emergency hormonal contraception (EHC) where appropriate in line with the locally agreed PGD. Evidence suggests that community pharmacy based EHC services provide timely access to treatment and are rated highly by women who use them. This is one of Stoke-on-Trent's strategies to support reducing teenage pregnancy rates across the city. EHC is provided in a number of settings of which pharmacies are one. There are 41 pharmacies in the city which offer this service.

This service is commissioned by Stoke-on-Trent City Council. The service is available when an accredited pharmacist is at the pharmacy and is generally available without an appointment. The service is confidential and available free of charge to women of all ages (map 14).

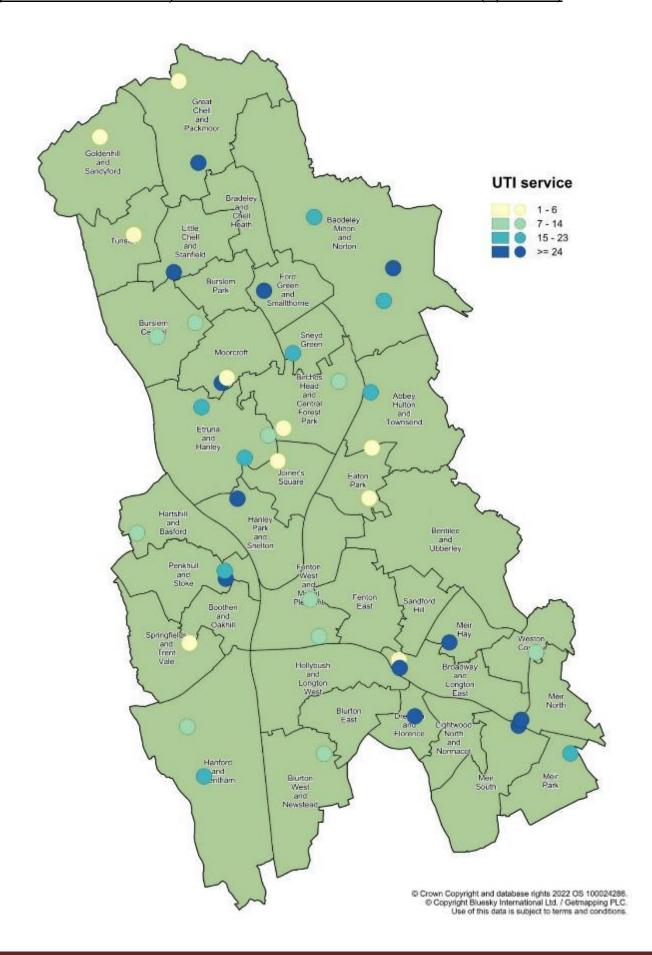
The Community Pharmacy Extended Care Service includes a suite of PGDs which will allow pharmacists to treat patients presenting with certain conditions that otherwise would have to be seen by prescribers in General Practice. The service is open to any eligible patient who is registered with a GP practice contracted to NHS England and Improvement (NHSE&I) Midlands Staffordshire and Shropshire Area. Three additional tier 2 services have been added under this umbrella:

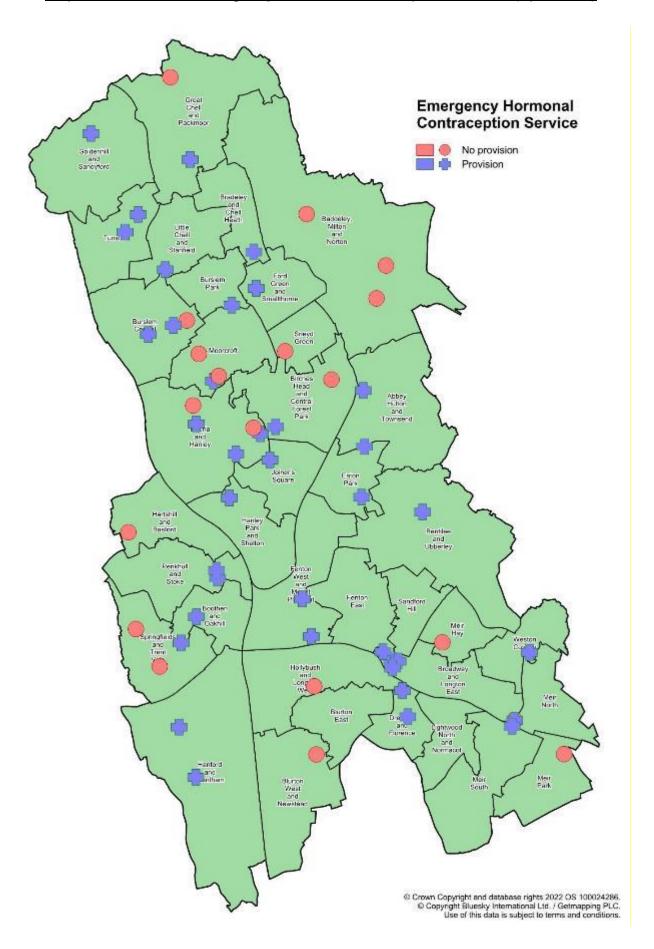
- Impetigo service— this service allows pharmacies to provide antibiotic treatment for
 impetigo in children and adults who meet the inclusion criteria following accreditation of
 pharmacists under a Patient Group Direction (PGD). During 2021/22 in Stoke-on-Trent
 there were 19 active providers for treatment of impetigo with 89 provisions being made
 across the board (map 15).
- **Infected insect bites service –** During 2021/22 in Stoke-on-Trent there were 25 active providers for the treatment of infected insect bites with 157 provisions (map 16).
- **Eczema service** During 2021/22 in Stoke-on-Trent there were 9 active providers for the treatment of infected insect bites with 28 provisions

The service currently has been paused due to concerns being raised, looking at the quality, safety, effectiveness and appropriateness of new and existing clinical services to manage infection

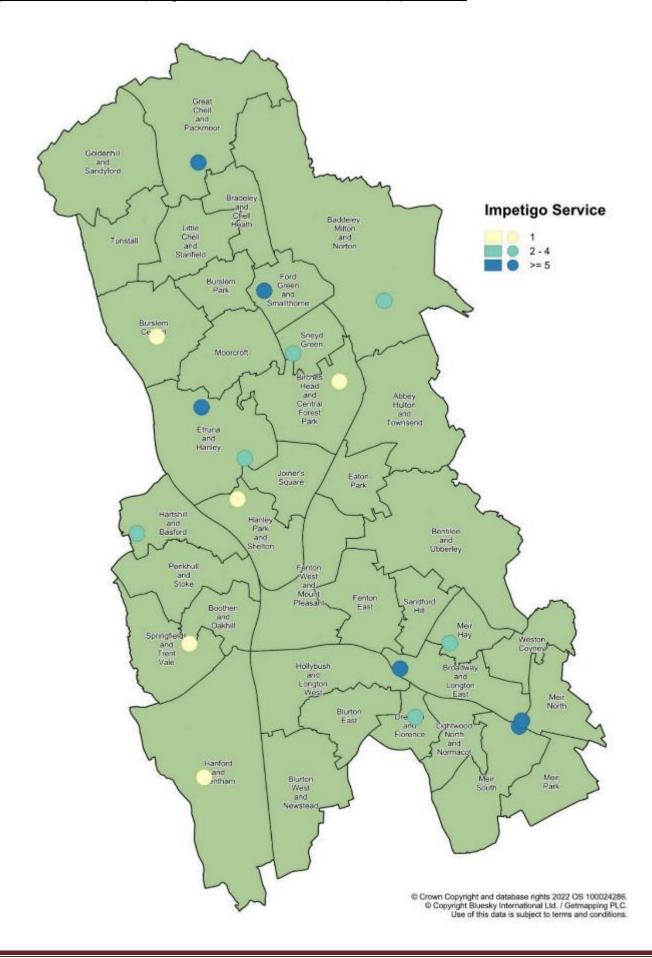
without a prescription under the legal direction of a PGD.	PNA for Stoke-on-Trent 2022	Page 6
	without a prescription under the legal direction of a PGD.	
provided by community phormonics and other core cottings, including the cumply of antimicrobials		imicrobiais
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	provided by community pharmacies and other care settings, including the supply of ant without a prescription under the legal direction of a PGD.	imicrobials

Map 13: Provision of urinary tract infections services in Stoke-on-Trent (April 2022)

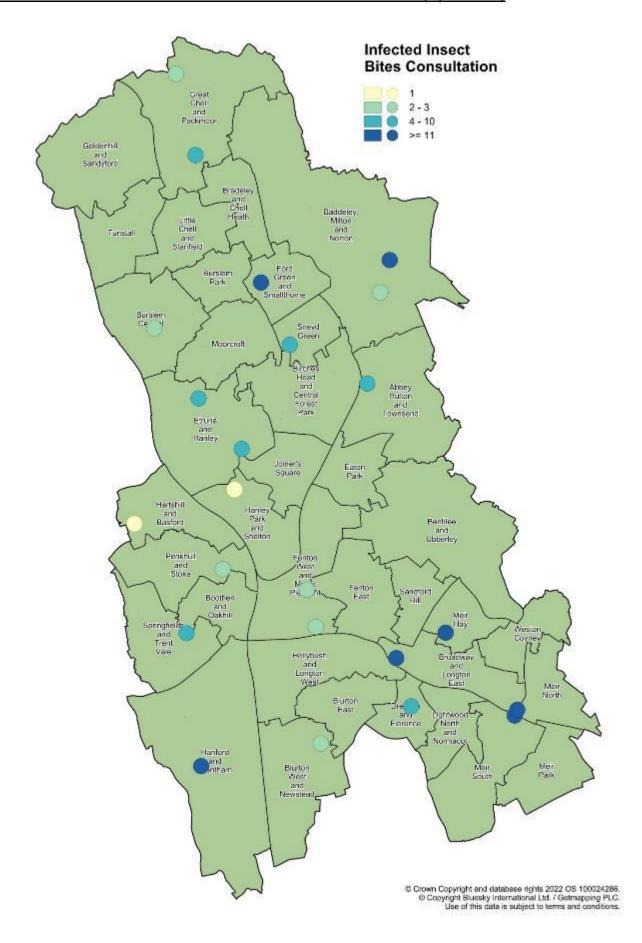




Map 15: Provision of impetigo services in Stoke-on-Trent (April 2022)



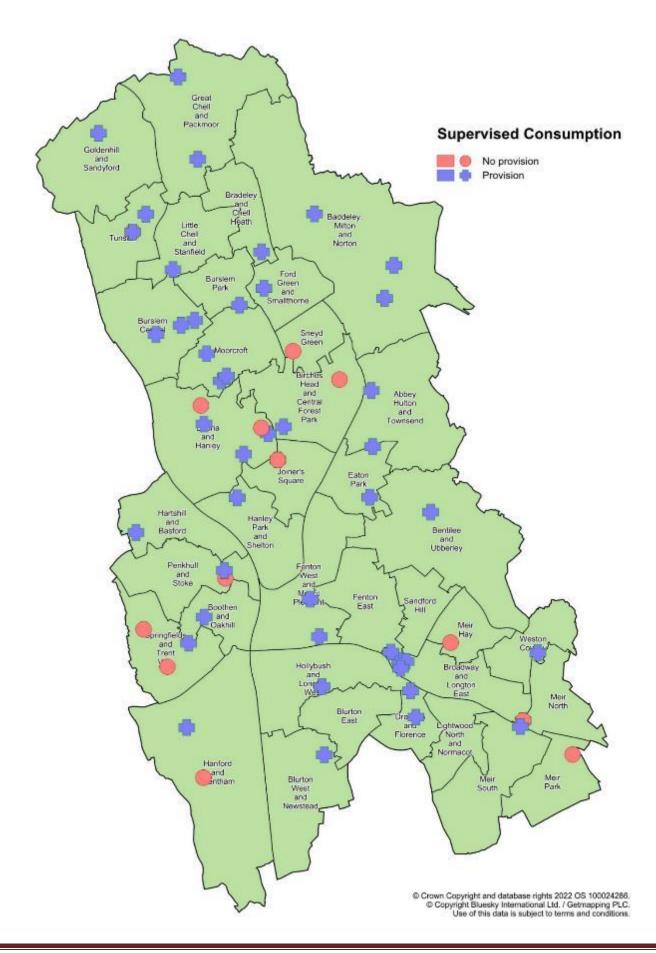
Map 16: Provision of infected insect bites consultation services (April 2022)

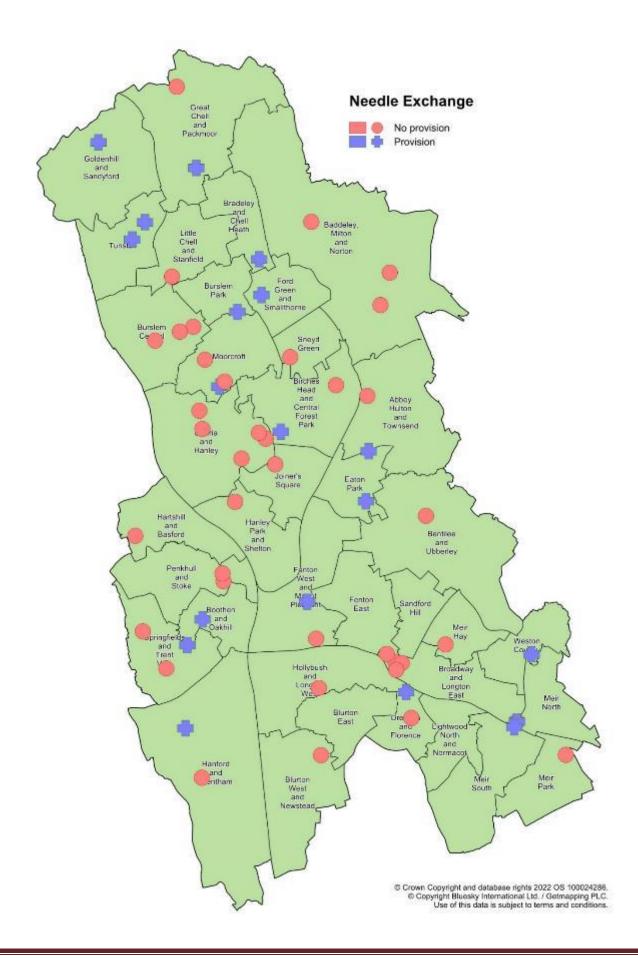


Supervised consumption – supervised consumption of prescribed medicines (methadone and buprenorphine) at the point of dispensing in the pharmacy, ensuring that the dose has been administered to the patient. This is particularly important for treatment of opiate dependence, patients with some mental health conditions and other vulnerable groups.

Forty-seven pharmacies (66%) in Stoke-on-Trent provide the supervised consumption service to drug misusers and there is a good spread of access to this service across the city (map 17). The service is available on a named patient basis.

Needle and syringe exchange service – access to sterile needles and syringes, and sharps containers for return of used equipment. Pharmacies will also promote safe injecting practice and reduce transmission of infections by substance misusers through associated materials, for example condoms, citric acid and swabs. This service is commissioned by Stoke-on-Trent City Council from the Stoke-on-Trent Drug and Alcohol Rehabilitation Service who have placed needle exchange services in 18 pharmacies across the city to match local needs (map 18). Needle exchange is also available from addiction recovery services.





Palliative care – this service supports anticipatory prescribing and allows rapid access to medicines commonly prescribed in palliative care, to enable a greater percentage of patients to have a home death, rather than to be moved to hospital. The service also enables treatment to be given in a preferred place of care, thereby helping to avoid unnecessary admissions to hospital. The service ensures that a network of community pharmacies hold stocks of palliative care medications to ensure patients have timely access to end of life medicines when required. There are currently sixteen pharmacies in Stoke-on-Trent who provide this service (map 19).

C-Card – the C-Card scheme enables young people aged 13-24 and those from high risk groups (including people aged 25 and over) to access free condoms from a range of local community venues including pharmacies, GP practices and education venues. The scheme is designed to make condoms more accessible, available and acceptable by ensuring a range of professionals across Stoke-on-Trent are trained to register C-Cards and distribute condom packs in a variety of locations whilst providing effective services that fall in line with the Quality Criteria for Young Person Friendly Health Services. Young people and high-risk groups are also provided with information about staying safe and as a result know how to use condoms correctly, subsequently reducing the incidence of sexually transmitted infections and unintended conceptions. Currently 27 pharmacies offer the C-Card scheme across the city (map 20).

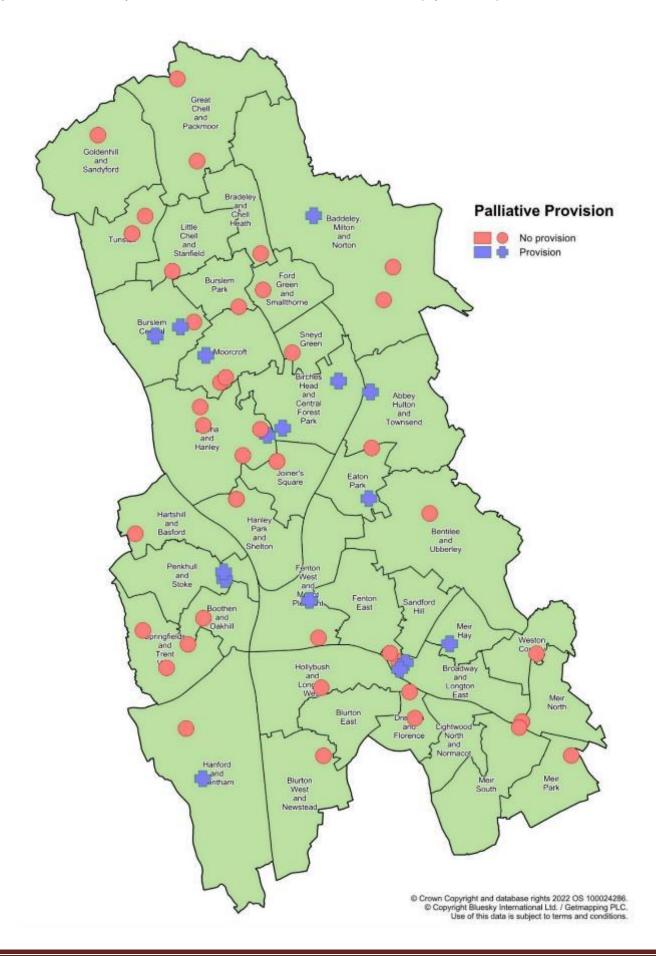
Covid-19 vaccinations – The majority of vaccinations dispensed during the height of the pandemic were administered through mass vaccination centres. However, as time progresses it may not be feasible to continue using large scale venues to mass vaccinate and a greater role will be played by Local vaccination services (LVS), made up of sites led by general practice teams working together in Primary Care Networks (PCN) and community pharmacy sites. In December 2021 nationally, over 600 practices were providing this service; five of these were based in Stoke.

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

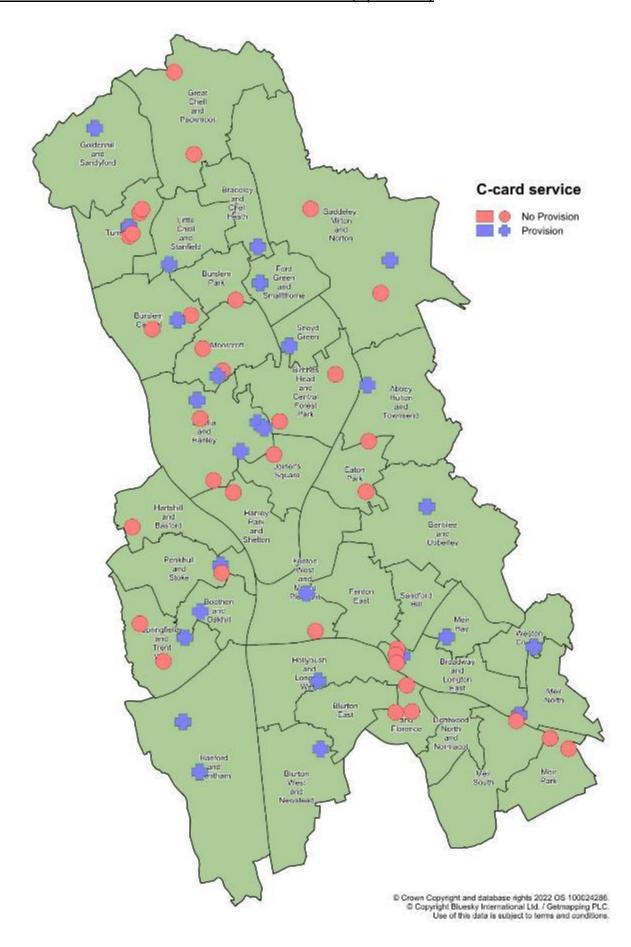
Based on the Community Pharmacy Questionnaire (completed by 60 of the 68 local pharmacies), pharmacies were also willing to provide: anticoagulant monitoring service, anti-viral distribution service, a care home service, along with a chlamydia treatment and contraception service. Pharmacies were also willing to provide a range of disease specific medicines management services such as asthma, coronary heart disease, depression, epilepsy, Alzheimer's/dementia, Parkinson's disease and diabetes.

Based on data from the Engagement Survey, a small number of respondents would like pharmacies to:

- Introduce blood tests and health checks.
- Provide signposting to other services.
- Prescribe some medicines for minor illnesses.



Map 20: Provision of c-card services in Stoke-on-Trent (April 2022)



4.5 Healthy living pharmacies

The healthy living pharmacy (HLP) framework is a tiered commissioning framework which allows community pharmacies to provide a broad range of services to meet local need, improve population health and wellbeing and reduce health inequalities. HLPs are required to deliver a range of commissioned services based on local need and promote a healthy living environment to the communities they serve (figure 22).

Figure 22: Characteristics of a Healthy Living Pharmacy



Level 1 is around promoting health, wellbeing and self-care which from July 2016 onwards changed from being a commissioner-led process to a profession-led self-assessment process. In April 2020 being a Healthy Living Pharmacy became an Essential Service requirement, and all pharmacies are required to be able to demonstrate the skills to be able to claim HLP status. Discussions are still ongoing as to how the HLP requirements will be applied to distance selling contracts.

5 ACCESS TO PHARMACEUTICAL SERVICES

5.1 Geographical access

Around three in ten residents in Stoke-on-Trent do not have access to a car meaning they are reliant on others or good accessible public transport to get around. This is higher than the national average of 26% (table 9).

Table 9: Proportion of households with no car or van (2011)

Area	Number	Percentage
Stoke	33,225	30.9
England	5,691,251	25.8

Source: Office for National Statistics 2013 (2011 Census)

There is good geographical access to pharmaceutical services in Stoke-on-Trent:

- 63% of residents are within a ten-minute walk of their nearest pharmacy and 95% are within a 20-minute walk.
- All residents are within a five-minute drive from their nearest pharmacy.
- Over 90% are within ten minutes of their nearest pharmacy if using public transport (table 10).

Table 10: Access to nearest pharmacy by mode of transport for Stoke-on-Trent residents

			Public transport					
Access times	Walking (%)	Driving (%)	7am-9am (%)	10am-12 noon (%)				
Under 5 minutes	25.0	100	42.6	43.8				
5-9 minutes	42.3	0.0	50.5	49.6				
10-14 minutes	24.1	0.0	4.7	4.2				
15-20 minutes	6.9	0.0	0.5	0.7				
20 minutes and over	1.7	0.0	0.2	0.2				
No access	0.0	0.0	1.5	1.5				
Good access (under 10 minutes)	67.2	100	93.1	93.4				

			Public transport				
Access times	Walking (%)	Driving (%)	7am-9am (%)	10am-12 noon (%)			
Poor access (20 minutes or over OR no access)	1.7	0.0	1.7	1.7			

Source: Experian Public 2014, Stoke-on-Trent City Council 2014

Maps for walking, drive time and public transport are shown in Appendix 2.

5.2 Opening hours

There are eight '100 hour' pharmacies across Stoke-on-Trent equating to around one in eight pharmacies, with all residents in the city having access to a community pharmacy for at least 100 hours during the week.

Community pharmacies in Stoke-on-Trent open from 7am on Monday to Fridays. The majority are open by 9am when there is likely to be an increase in demand for dispensing of prescriptions generated by GP services. On a weekday most pharmacies close by 6.00pm in the evening with around one in eight of pharmacies across the city open during the week until at least 10pm.

Around two thirds pharmacies are also open on Saturdays, the majority of opening by 9am, with four opening before 8am in the morning. Around a third of pharmacies then close by 1pm and ten pharmacies open until at least 8.00pm (map 22).

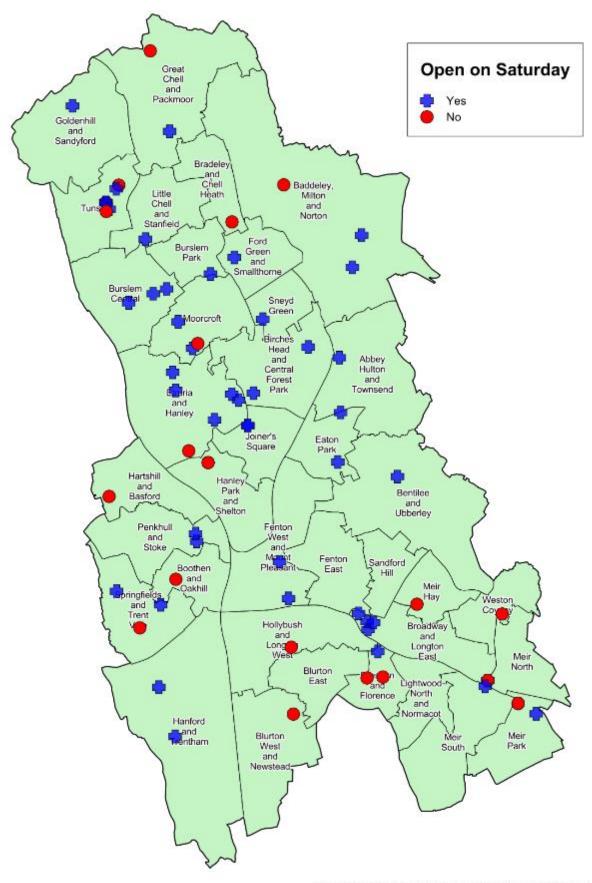
Fifteen pharmacies are also open on Sunday from around 10am. Nine close by 4pm (map 23). Some of this is due to trading regulations which restricts opening hours for pharmacies located in supermarkets and shopping centres to six hours.

Demand for dispensing services is much lower at weekends as GP surgeries are usually closed. In addition, residents do have access to dispensing services on Sundays from alternative provision, for example walk-in-centres, minor injury units or from pharmacies in bordering areas.

A number of pharmacies also now open on Bank Holidays. NHS England also work with community pharmacies to ensure there are adequate pharmaceutical services available on Christmas Day and Easter Sunday (this is because many larger stores containing pharmacies are closed on these two days due to current trading laws).

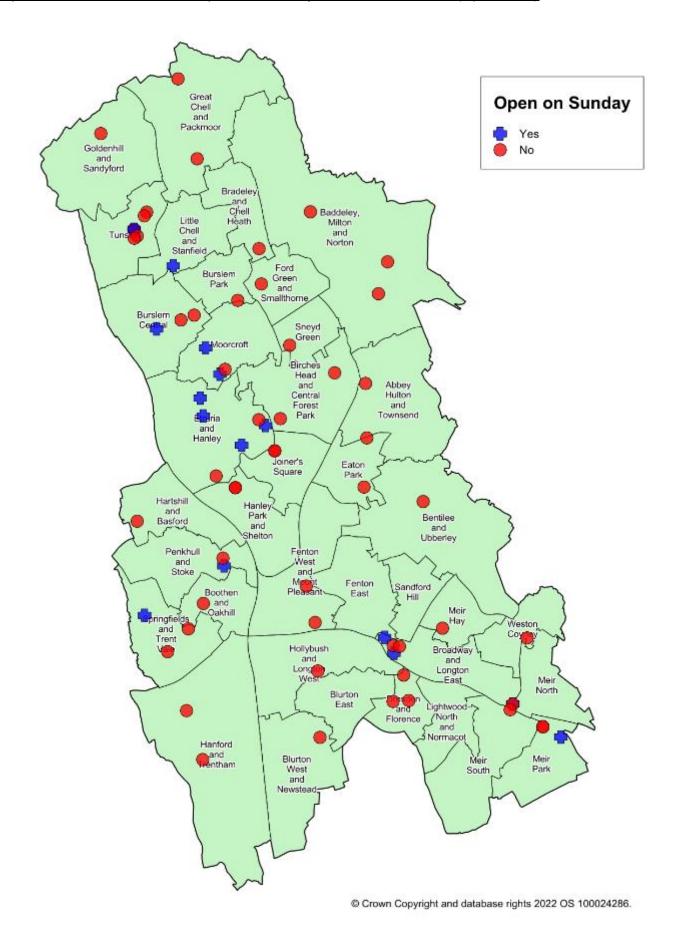
Information on the latest opening hours for every pharmacy is available at NHS Choices http://www.nhs.uk/Service-Search/Pharmacy/LocationSearch/10. Pharmaceutical providers are encouraged to check their details and update them where necessary.

Map 22: Pharmacies that are open on Saturdays in Stoke-on-Trent (April 2022)



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Map 23: Pharmacies that are open on Sundays in Stoke-on-Trent (April 2022)



5.3 Access to pharmaceutical services for protected groups

The Equality Act (2010) protects people on the basis of nine protected characteristics. The equality duty covers the following nine protected characteristics: age, disability, gender (sex), gender reassignment, marriage and civil partnership, pregnancy and maternity, race (this includes ethnic or national origins, colour or nationality), religion or belief (this includes lack of belief) and sexual orientation.

The PNA regulations require that the HWBB considers the different needs of people who share protected characteristics. This section of the PNA summarises how these have been considered and addressed for each of the protected characteristics. In addition, all pharmacies are expected to comply with the provisions of the Equality Act 2010.

5.3.1 Age

The protected characteristic of age means a person belonging to a particular age (for example, 32 years) or being within an age group (for example, 30-39 years). This covers all ages, including children and young people.

It is important that pharmaceutical services meet the needs of all ages. National data suggests that families with young children and older people are more frequent users of pharmacy services. The ageing population has implications for the future demand for all health and care services, including those provided by community pharmacies. For example, there may be an increased demand for pharmaceutical services in terms of dispensing of medicines and also additional need for supporting older people living independently for longer.

The age profile of Stoke-on-Trent residents has been described in section 2. Examples of where Stoke-on-Trent pharmacies are already supporting residents of all ages are:

- Access to sexual health services such as emergency hormonal contraception, chlamydia screening and condoms for young people.
- Raising disease awareness, for example, through a dementia awareness campaign.
- Supporting adults and in particular older populations through NMS in the management of long-term conditions.
- Treatment of minor ailments for families with young people and older people.

5.3.2 Disability

A person has a disability if they have a physical or mental impairment which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities. Disabilities can have an impact on people of all ages and from all communities, and can be present from birth or acquired through accident, illness or as a consequence of ageing. Many people who are disabled may have more than one disability. Adults with learning disabilities or dementia are most likely to have repeat adult protection referrals, as are those in a permanent care home and those in a mental health inpatient setting.

There is no complete dataset that contains the numbers of people with disabilities. Therefore, a number of measures are presented to estimate levels of disability within Stoke-on-Trent.

Census data – the 2011 Census collected information on self-reported limiting long-term illness that can be used as a proxy for overall disease and disability. Based on the Census, around 56,500 Stoke-on-Trent residents (23%) have a limiting long-term illness which is higher than the average in England (18%).

Disability benefit statistics – these provide a proxy for numbers of people who are disabled. Disability Living Allowance (DLA) is payable to people aged under 16 or over 65 who are disabled and who have personal care needs, mobility needs or both. In Stoke-on-Trent just over 6,250 people claimed DLA (Aug 2021), DLA is a discretionary payment and claimants will typically experience significant barriers to full participation in local life. Working age people and a number of older adults are now awarded Personal Independence Payments (PIP) instead of DLA. In Stoke-on-Trent over 16,350 people were in receipt of PIP in January 2022. Working age people who are unable to work may also receive Employment Support Allowance (ESA). In August 2022, 10,631 people in Stoke-on-Trent received ESA.

GP disease registers – these provide the number of patients on clinical registers in general practice, which can then be used to calculate disease prevalence. The data are captured as part of the Quality and Outcomes Framework which was introduced as part of the General Medical Services. In most cases GPs are only required to capture 80% of the population to achieve payment with some practices seeking to identify all patients who will benefit, and others stopping once the target level is achieved. Based on 2021 data, around 1,912 people were on learning disability registers in Stoke-on-Trent Clinical Commissioning Group making up 0.65% of the population, which is higher than the England average but significantly less than that expected. In

addition, around 2,770 people were on mental health registers (schizophrenia, bipolar disorder and other psychoses) which is 0.9% of the population and similar to the England average.

Estimates of people with sensory impairments – information on the number of people who have a sensory impairment at a local level is limited. Some information is available from local registers held by social care. Registration of sensory impairment is voluntary and therefore these figures do not provide a complete picture of the numbers of people in Stoke-on-Trent who have a visual or hearing impairment.

- Based on national prevalence surveys, it is estimated there are around 455 people in Stoke-on-Trent who have a serious visual impairment, and 905 people who can be classed as sight impaired.
- Based on national estimates, there are around 500 adults with profound hearing loss in Stoke-on-Trent and a further 23,200 adults with moderate or severe hearing loss.
- People with hearing and vision impairment are more likely to be older people (aged 75 and over).

People with disabilities are however a high-risk group and may require additional support in terms of services meeting their pharmaceutical needs. Some of the adjustments that pharmacies currently make include easy open containers and/or large print labels. Some pharmacies also have facilities to provide labels printed with Braille (and many original packs provided by manufacturers are now embossed with Braille). Pharmacies also need to continue to link in with carers where appropriate to enable vulnerable groups to meet their service needs.

The Community Pharmacy Questionnaire included a question asking if any consultation facilities existed on site and if they included wheelchair access. The results showed that 90% of pharmacies (27 out of 30 respondents to this question) have a consultation area with wheelchair access whilst three pharmacies (10%) did not have wheelchair access.

5.3.3 Gender (sex)

Gender is being male or female, or not identifying as either. The wider social roles and relationships that structure men's and women's lives can change over time and vary between cultures.

There are some services that are currently provided for women, for example EHC. National research indicates that men may be less frequent visitors to pharmacies and therefore some additional marketing may be required to ensure that men's pharmaceutical needs are met.

5.3.4 Gender reassignment

Gender dysphoria is a condition in which an individual's psychological experience of themselves as a man or woman is incongruent with their external bodily sexual characteristics. The individual's physical sex is not aligned to their gender identity. Sometimes, the distress/discomfort is sufficiently intense that an individual undergoes transition from one point on a gender continuum to another (this is most commonly from male-to-female or female-to-male). This typically involves changes to social role and presentation and may necessitate treatment with cross-sex hormones and/or having gender-related surgery. As a national service, patients may be referred to a gender identity clinic for initial assessment and treatment before potentially being referred for sex reassignment surgery, although there is no specialist centre in the West Midlands providing these services.

Protection is provided where someone has proposed, started or completed a process to change their sex and this is referred to as gender reassignment in the legislation. It is estimated nationally that 1 in 4,000 people are receiving medical help for gender dysphoria, which equates to around 63 people in Stoke-on-Trent. Reports suggest that there has been a growth in the number of people who have presented for treatment in the UK, although the West Midlands appears to have a low prevalence.

Pharmacies may be part of the care pathway for people who undergo gender reassignment. Their role is typically to ensure that medicines (for example, hormone therapy) which form part of the treatment are available. Furthermore, pharmacies may offer NMS to help with adherence and to identify any medication-related issues as appropriate.

5.3.5 Marriage and civil partnerships

Marriage is the legal union between a man and a woman, whilst civil partnership has the legal recognition of a same-sex couple's relationship. Civil partners must be treated the same as married couples on a range of legal matters.

Data from the 2011 Census provide information on marital and civil partnership status at a local level. Around 43.7% of Stoke-on-Trent's population are married (table 11). An additional 302 people are in a registered same-sex civil partnership making up around 0.2% of the population.

Table 11: Population by marital and civil partnership (2011)

Relationship	Stoke-on-Trent (%)	England (%)
Single (never married or never registered a same-sex civil partnership)	72,307 (36.0%)	14,889,928 (34.6%)
Married	87,581 (43.7%)	20,029,369 (46.6%)
In a registered same-sex civil partnership	302 (0.2%)	100,288 (0.2%)
Separated (but still legally married or still legally in a samesex civil partnership)	5,584 (2.8%)	1,141,196 (2.7%)
Divorced or formerly in a same-sex civil partnership which is now legally dissolved	19,728 (9.8%)	3,857,137 (9.0%)
Widowed or surviving partner from a same-sex civil partnership	15,140 (7.5%)	2,971,702 (6.9%)
All residents aged 16 and over	200,642	42,989,620

Source: Office for National Statistics 2013 (2011 Census)

There are no additional needs that have been identified by the PNA with respect to marriage and civil partnership.

5.3.6 Pregnancy and maternity

Maternity is defined as the period after giving birth. It is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, including as a result of breastfeeding. For all areas covered by the Act, a woman is protected from unfavourable treatment because of pregnancy or because she has given birth.

The protected status primarily applies to staff currently employed at pharmacies within Stoke-on-Trent.

There were 3,256 live births in Stoke-on-Trent in 2019. Community pharmacies are ideally placed to provide health promotion advice to women who are pregnant or planning on becoming pregnant. They are also ideally placed to provide information on antenatal care at the point of sale

of pregnancy tests. They can also provide advice around diet and nutrition including vitamins (some already provide Healthy Start vouchers).

Pharmacists also provide advice to women who are pregnant or breastfeeding about which medicines can be taken and those to avoid as they may be potentially harmful to their babies in the womb or breastfed babies.

5.3.7 Race and ethnicity

Race refers to a group of people defined by their colour, nationality, ethnic or national origins. A racial group can also be made up of two or more distinct racial groups.

People from some ethnic minority groups often experience poorer health outcomes. This may be as a result of multiple factors including genetic predisposition to certain diseases (for example, diabetes, coronary heart disease and mental health), poor access to services, language barriers, cultural differences and, at times, discrimination.

The ethnic profile of Stoke-on-Trent has been described briefly in section 2. In terms of main language spoken, findings from the 2011 Census found that around 94% of Stoke-on-Trent residents stated English as their main language. Other common main languages spoken in Stoke-on-Trent were:

- Urdu (1%)
- Polish (0.7%)
- Punjabi (0.6%)

In those areas of the city where there are higher proportions of people from ethnic minority groups (the four wards of Lightwood North and Normacot, Hanley Park and Shelton, Etruria and Hanley, and Moorcroft), pharmacies may need to consider how they communicate health messages effectively, and in particular for those communities where English is not the first spoken language. Based on the 2011 Census, the most commonly spoken languages in these four wards were Urdu, Punjabi, Kurdish, Polish and Bengali.

The languages spoken by pharmacy staff were collected through the Community Pharmacy Questionnaire. Of the 30 responses to the CPQ, nine pharmacies noted that their staff spoke a variety of languages, which included Punjabi, Urdu, Telugu and Polish. Apart from Polish, the other languages spoken by staff in pharmacies broadly reflected those languages spoken by people in their local communities.

5.3.8 Religion or belief

This area includes any religious or philosophical belief and includes a lack of belief, for example Humanism and Atheism. A belief need not include faith or worship of a God or Gods, but must affect how a person lives their life or perceives the world.

The 2011 Census found Christianity to be the majority religious affiliation in Stoke-on-Trent. Over the last decade this proportion has dropped, with significant increases in people stating they had no religious affiliation over the same time period. Muslims are the next largest group in the city (table 12).

In terms of pharmaceutical needs, pharmacies should be able to provide additional medicinerelated support, for example advice on whether an individual's medicines include ingredients from animals and/or during certain times of the year, for example, during Ramadan.

Table 12: Population by religion (2011)

Belief	Stoke-on-Trent (%)	England (%)
Christian	151,624 (60.9)	31,479,876 (59.4)
Buddhist	760 (0.3)	238,626 (0.5)
Hindu	1,384 (0.6)	806,199 (1.5)
Jewish	66 (0.0)	261,282 (0.5)
Muslim	14,993 (6.0)	2,660,116 (5.0)
Sikh	579 (0.2)	420,196 (0.8)
Other religion	923 (0.4)	227,825 (0.4)
No religion	62,737 (25.2)	13,114,232 (24.7)

Belief	Stoke-on-Trent (%)	England (%)
Religion not stated	15,942 (6.4)	3,804,104 (7.2)
Total	249,008	53,012,456

Source: Office for National Statistics 2013 (2011 Census)

5.3.9 Sexual orientation

Sexual orientation is whether a person's sexual attraction is towards their own sex, the opposite sex or to both sexes. There is no hard data on the number of lesbians, gay men and bisexuals in the UK as no national census has ever asked people to define their sexuality. The official government figure is between 5-7% of the population which Stonewall, a lesbian, gay and bisexual charity, feels is a reasonable estimate. HM Treasury and the Department of Trade and Industry completed a survey to help the Government analyse the financial implications of the Civil Partnerships Act (such as pensions, inheritance and tax benefits). They concluded that there were 3.6 million gay people in Britain – around 6% of the total population or 1 in 17 people.

In 2019, experimental statistics using the Annual Population Survey (APS) found 2.7% of people over the age of 16 in the UK identified themselves as lesbian, gay or bisexual; considerably lower than previous estimates. ²

This indicates that whilst there is a visible community of lesbian, gay and bisexual people in the city, there may also be a significant invisible community which may need to be considered by both commissioners and pharmaceutical providers. There are no additional needs that have been identified by the PNA with respect to sexual orientation.

² **c**

² Sexual orientation, UK: 2019, Office for National Statistics, Crown copyright, https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/sexuality/bulletins/sexualidentityuk/2019

6 ARE THERE ANY PHARMACEUTICAL GAPS IN STOKE-ON-TRENT?

Stoke-on-Trent has a resident population of just over 256,600 and covers a geographical area of 36 square miles. The city's population continues to grow, and older people will become an increasing proportion of Stoke-on-Trent's residents. We have high levels of deprivation shared with many other former industrial areas, with around half the population living in the most deprived 20% of areas in England.

Overall people in Stoke-on-Trent have a shorter life expectancy than nationally, and have a healthy life expectancy of around 57 years. Hence both men and women spend more time in poor health than the average retirement age and there remain large health inequalities across the city. A number of demographic, socio-economic, cultural and environmental factors combine to increase the risk of an individual experiencing poorer health and wellbeing outcomes. Evidence also indicates that it is often the same families and communities that suffer a range of inequalities.

There are a number of factors that can help prevent ill health or diagnose problems early to enable better treatment, especially immunisation and screening. Childhood immunisation rates are better than national averages. City residents who are eligible take up their offer of an NHS Health Check more often than the national rate. However, a lower proportion of people take up cancer screening.

Around 40% of ill-health is thought to be preventable through healthier lifestyles. The prevalence of Stoke-on-Trent children who were overweight or obese in Reception (4-5 year olds) is 27.8% and increases significantly to 40.4% by the time children are in Year 6 (10-11 year olds). Adult smoking rates overall in Stoke-on-Trent remain high with just under one in five (18.2%) adults smoking regularly. There are large numbers of our population who drink too much over the life course, eat unhealthily and remain inactive

More people in Stoke-on-Trent report having a limiting long-term illness. By the time people reach 65 they will have developed at least one chronic condition and large proportions will also have developed two or three conditions. Of particular concern are the growing numbers of people with multiple or complex conditions, and the increasing prevalence of dementia as the population ages.

Most care will occur in primary care or community settings. However, a higher than average proportion of care in Stoke-on-Trent also occurs in hospital settings, particularly among young children and older patients. Older people are also higher users of social care. Admission rates in

Stoke-on-Trent for acute conditions that could be managed effectively in primary care or outpatient settings are higher than average.

Pharmacy is the third largest healthcare profession, with a universally available and accessible community service. Pharmacies are well used and based on national estimates around 1.1 million informal consultations are made to a community pharmacy for health-related reasons every week. In Stoke-on-Trent which equates to around 17 visits day. Local data from the Engagement Survey found that just 56% of respondents used their pharmacy at least monthly.

Stoke-on-Trent has 68 pharmaceutical service providers of which two are distance-selling pharmacies and one an appliance contractor. The rate of community pharmacies and dispensing practices is 26.5 per 100,000 population, which is much higher than the national average of 21.5.

A national patient survey indicated that the public value a variety of types of pharmacy ownership. Around one-third of pharmacies in Stoke-on-Trent are owned by independent contractors whilst the remaining two-thirds are owned by multiple contractors.

The Engagement Survey found that local pharmacy services met the needs of the majority of respondents.

Overall there are sufficient numbers and a good choice of pharmacy contractors to meet Stokeon-Trent's pharmaceutical needs.

There is good geographical coverage across the city for pharmaceutical services and almost 100% of Stoke-on-Trent residents live within a five-minute drive of their local pharmacy. Well over 90% of residents can also access their local pharmacy within a one-mile walk or within 15 minutes using public transport.

In terms of opening hours, there are eight '100 hour' pharmacies across Stoke-on-Trent equating to around one in eight pharmacies, with all residents in the city having access to a community pharmacy for at least 100 hours during the week. Residents also have good access to a pharmacy during weekdays and Saturdays and Sundays however those within the east of the city have less access on a Sunday.

A number of pharmacies also now open on Bank Holidays. NHS England also work with community pharmacies to ensure there are adequate pharmaceutical services available on Christmas Day and Easter Sunday (this is because many larger stores containing pharmacies are closed on these two days due to current trading laws).

The STP may also want to consider commissioning extended pharmaceutical services on Sundays as one of the potential solutions to reducing A&E attendances. Prior to any potential changes, however, there should be adequate assessment of the likely impact on existing services, both within and outside the city, particularly on those pharmacies under contractual obligation to open on Sundays. Any such changes should be targeted to provide relevant services where they do not exist, and can achieve the outcome required without detriment to existing contractors already open and providing services.

In terms of the protected characteristics, pharmacies have a positive impact in meeting the needs of all people. Examples of this include:

- Antenatal and postnatal support to pregnant women and mothers.
- Pharmacies have staff members who speak a number of languages that are amongst the main languages spoken across the city.
- Adjustments to medicines for disabled people as appropriate, for example large print labels.
 Most pharmacies also have a separate consultation room with wheelchair access.
- Delivery of dispensed medicines to an individual's home.

Findings from the Engagement Survey found most people used pharmacies for collecting their prescriptions. Health advice and disposal of unwanted medicines were also popular services. A small number of respondents wanted to see the introduction of services such as blood tests, health checks and information and advice on a range of health conditions.

Stoke-on-Trent has good provision of advanced pharmacy services such as the New Medicine Service (NMS) across the city that help to deal with adherence to medicines and the management of people with long-term conditions. Continuing to promote this service would help adherence with medication, management of side effects and potentially avoid emergency admissions.

Coverage of Appliance Use Reviews is very low, whereas Stoma Appliance Customisation services are high. Reviewing appliance use may prevent the need for customisation.

An adult flu vaccination service was introduced as the fifth advanced service in September 2015. The number of pharmacies signed up to provide flu vaccination is high, although uptake is slightly lower than national average.

The Community Pharmacist Consultation Service (CPCS), as a relatively new service, already has a high pharmacy uptake and provision. Continuing to promote this service will potentially relieve the continued pressures upon GP services.

The Hepatitis C testing service, is a time limited exercise to eliminate. Therefore, a significant push should be made to promote and highlight the service as much as possible in the time available.

Pharmacies falling considerably below the average number of NMSs should be supported to increase their numbers, particularly in areas where there is an identified need, to help with the management of long-term conditions and reducing emergency admissions. This may be done by promoting the concept of NMSs to the public so that they understand the differences between reviews done by GPs and pharmacies. GP practices are also ideally placed to work with their local pharmacies to identify and refer on patients who require an NMS. Overall uptake of flu vaccination across the city is slightly lower than the national average. Further work should be done to support and market community pharmacies to increase the provision of flu vaccination across the city.

There are also opportunities for pharmacies to support the health, wellbeing and care needs of Stoke-on-Trent residents through locally commissioned services. In Stoke-on-Trent there are a number of services that are currently provided by pharmacies alongside other providers helping to meet the varying health needs of local residents. These include provision of: emergency supply of medication, treatment of urinary tract infections and impetigo, emergency hormonal contraception, supervised administration, needle exchange, sexual health services and palliative care.

Commissioners should consider the wider role of pharmacies in commissioning strategies (for example, primary care) so that opportunities to provide effective services are maximised locally.

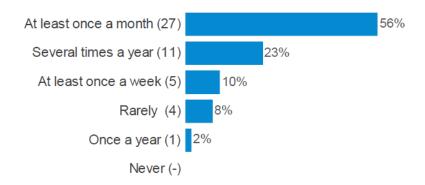
The HWBB will continue to monitor any major developments (for example, planned housing developments, demographic changes) and in line with regulations produce supplementary statements to the PNA where deemed necessary. They will also monitor any proposed changes to

Government policy that could have an effect on the provision of pharmaceutical provision, for example extended opening of GP services.

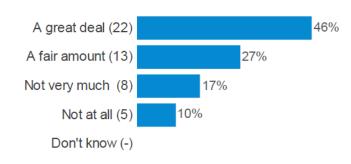
The HWBB will continue to monitor any local or national policy development that impact on the provision of pharmaceutical services in Stoke-on-Trent and continue to publish supplementary statements where needed.

APPENDIX 1 FINDINGS FROM THE ENGAGEMENT SURVEY

On average, how often do you use your local community pharmacy? (Please select only one answer).



To what extent does your pharmacy meet your needs? (Please select only one answer).



Please tell us why:

It's local, knows its clientele, folk are confident about the staff. Carries all we need, rarely short of stock, even in the pandemic, knowledgeable and friendly staff.

Missing items. Text to say it's ready then it's not & you have to wait for them to put it up. Also, problem with methadone users who walk to the front & drink medication at counter without waiting or using a booth.

Our chemist in Blythe Bridge closes on a Saturday

Helpful advice, good opening hours

Very efficient staff

As I only go in there for my prescriptions, I do not really use it much as other non prescription items are far too expensive

They supply all my medications and text me when it's ready for collection.

Because sometimes when you go there you have to wait for a longtime to be seen to.

It has everything I need

I can always pick up my perscription from there

Collect my prescriptions recently had my blood pressure done

Opening hours are continually reduced due to locum pharmacists blackmailing pharmacy owners with their exorbitant rates

Never got what you need. Or no pharmacist stopped going and use other now

I get my inhalers and tablets. They're really helpful with sorting them out for me.

Mostly my dad goes for me.

They don't have any first aid available..specially on weekends

They do flu jabs and my husbands repeat prescription

It's the only one in walking distance to get prescriptions from

Always a massive queue and wait

Convenient for prescriptions, advice from pharmacist

Able to get any prescriptions, good opening hours

The local pharmacy to my home address is the one on Milton Road in Sneyd Green. As this is a small pharmacy, the opening hours are limited meaning I struggle to get there outside of my work hours. The parking outside is also an issue with the parking restrictions which are in place but not enforced.

Staff slow. Very disorganised. Always a long wait. Never know opening hours

It always takes so long for them to dispense medications

They order and deliver mum's prescription and deliver mine at the same time

Always have what my children need i stoke and ready

All our PX are provided by the chemist

Repeat prescriptions are never done on time, always after 6 the day they are due or the day after they are due, never answer the phone, it rings once they then take it off the hook, don't see people quick enough, can be 20 people waiting sometimes as only 1 pharmacist on, who may I add goes to dinner when she feels like leaving people unable to get there prescriptions when she is eating, smackheads walk in and get seen and served straight away, regardless of que size and those people who have waited 20 minutes for a prescription

I collect my repeat prescriptions from there

great advise, great staff, sometimes there is a long line of people

The pharmacy is within walking distance from home and extremely convenient for collecting prescriptions which have been sent direct from my GP

Pharmaceutical Needs Assessment Survey 2022

Please tell us why:

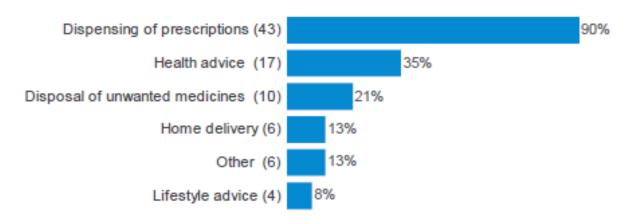
Pharmacy is quiet and I never wait long. Staff are helpful and knowledgeable.

rare;y have the proescriotion ready even whn this is a week after requesting, never ready if just been to the doctors and need the medication immediatley, have to prove to them that you need the meds some staff are rude and unhelpful and the area is always untidy

Friendly staff, always helpful and offer good advice

I find some of the staff very judgemental to clients and poor practice around their behaviour to people based on race and ethnicity and to those with mental health and substance misuse issues. I find that some staff behaviour is embedded into the service

What services do you use at the pharmacy? (Tick as many as appropriate).



What other services would you like to see at your local pharmacy?

You say tick as many, but it only allows me to tick one. I'd say all the above.

Open on a Saturday people who work can only go on a Saturday so they go elsewhere

Would like to be able to tick more than 1 on question 3.

More information about the services available locally.

blood tests, health checks

None

I think they should be able to prescribe some medicines for minor illnesses

More provision for ENT services and Impetigo

Don't know.

Don't know.

First aid

All good

Dispensing of antibiotics

No other services just more staff to cope better with demand

Efficient service

room for advise insted of people rining 111

Text service when prescriptions are ready to collect which have been sent to the pharmacy directly following GP appointments - there have been times where I've experienced long delays waiting for these as I've arrived too early.

All day opening (it currently closes for an hour at lunchtime).

What other services would you like to see at your local pharmacy?

Toiletries and household

it would be best that they concentrate on the medicine side and get that right before trying to extend the offer, the staff are not particulary custemr foucssed so I would not feel comfortable to ask them for adivce or any other service

I know some pharmacy do offer blister packs, but less pharmacies are offering this service now. I think it should be widely available. It helps to empower adults to maintain independence when they might be struggling with many boxes of medication.

More community information Up to date information around health services More promotion of vaccinations and also more delivery. Morw promotion of health interventions etc

What if anything, prevents you from using services at your local pharmacy?

Nothing.

Lack of privacy

Nothing

If anything prevents me from using the services at my local pharmacy i would really struggle because that means if i have any health issues i won't be able to get my prescriptions or get some health advice.

Nothing

Nothing

Short Hours due to locums blackmailing pharmacies

Never what you need or prescription takes forever get sent over or no pharmacist

Just when I'm too ill to go.

Having to go on my own. I wouldn't be able to do that because of my anxiety and my phobias. That's why my dad goes for me or goes with me.

There is always a long wait or they are closed when I finish work or at the weekend when I'm off

Νo

Nothing

Our Chemist in Blythe Bridge closes on a Saturday if you are a working parent we have to drive to Tesco for prescription etc

Nothing

The time you have to wait is ridiculous and half the time they haven't got the prescription in stock

Parking and the opening hours.

You have to wait such a long time to get served and the prices are very high

We don't use the ones near to us as the parking is bad near one and the queues bad at the other. We use the one next to our GP.

Waiting times, prescriptions never done

long lines

Opening & closing times are not always convenient, especially as they close during lunchtimes and early on Saturdays

The wait time & lack of customer service skills

Short opening hours on Saturday

wait times for products ordered, lack of communication, staff attitude

N/A

What if anything, prevents you from using services at your local pharmacy?

The attitudes of some staff, not to me but to others it creates a culture I don't like eg pharmacy at Cobridge and to a lesser degree at Huntbach streeet

Other comments:

See above.

Trentham Road is overwhelmed with drug addicts

Often sort out issues with GP, errors, omissions

None.

None.

No

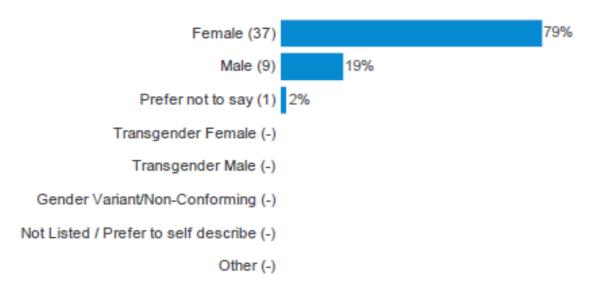
Glebedale medical practice pharmacy has to be the worst pharmacy around, always receiving endless amounts of complaints because of their poor service

I also have my flu jab there

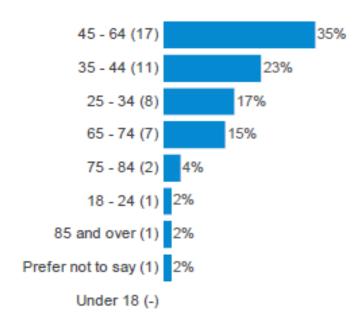
I think, in general, pharmacies should be enabled to provide more patient support, eg being able to sell certain medications/ alternatives etc, like has now been agreed with HRT. Most people use the same pharmacy so the pharmacist has a certain knowledge of the individual. Surely this would help out our stretched GP services.

I think that the culture at some pharmacies has led to poor practice and prejudicial attitudes around patients or customers where English is not the first language, around ethnicity and other groups. This is something staff and other customers when I worked in health identified was happening too, this is not just my opinion

What is your gender?



What are group are you in?



How would you describe your ethnicity

White: English, Welsh, Scottish, Northern Irish or British (41) White: Irish (2) 4% White: Any other White background (1) 2% Mixed or Multiple Ethnic Groups: White and Black Caribbean (1) 2% Asian or Asian British: Pakistani (1) 2% Black, African, Caribbean or Black British: African (1) 2% Prefer not to say (1) 2% White: Gypsy or Irish Traveller (-)

Mixed or Multiple Ethnic Groups: White and Black African (-)

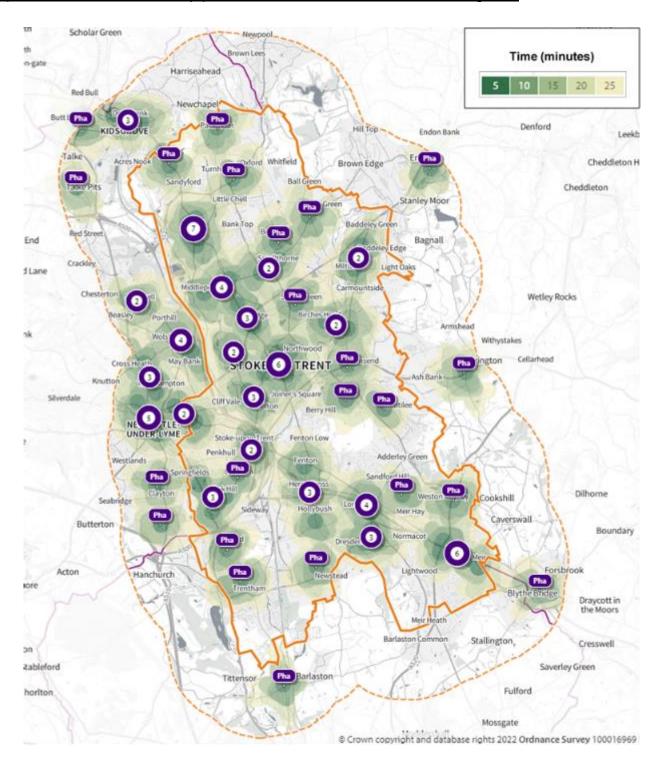
Mixed or Multiple Ethnic Groups: White and Asian (-)

Mixed or Multiple Ethnic Groups: Any other Mixed or Multiple ethnic background (-)

Asian or Asian British: Indian (-)

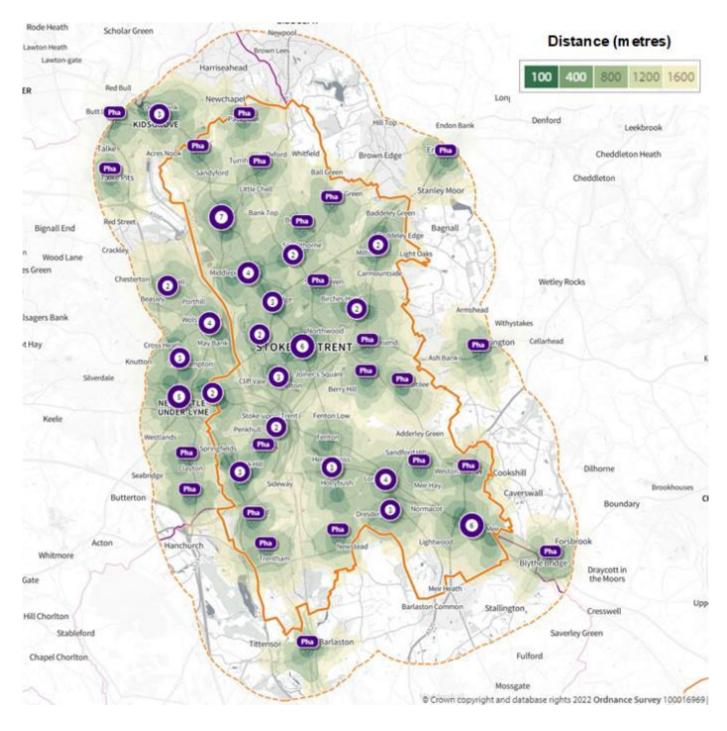
APPENDIX 2 ACCESS TO PHARMACIES BY MODE OF TRANSPORT

Map 24: Access to community pharmacies in Stoke-on-Trent – walking time

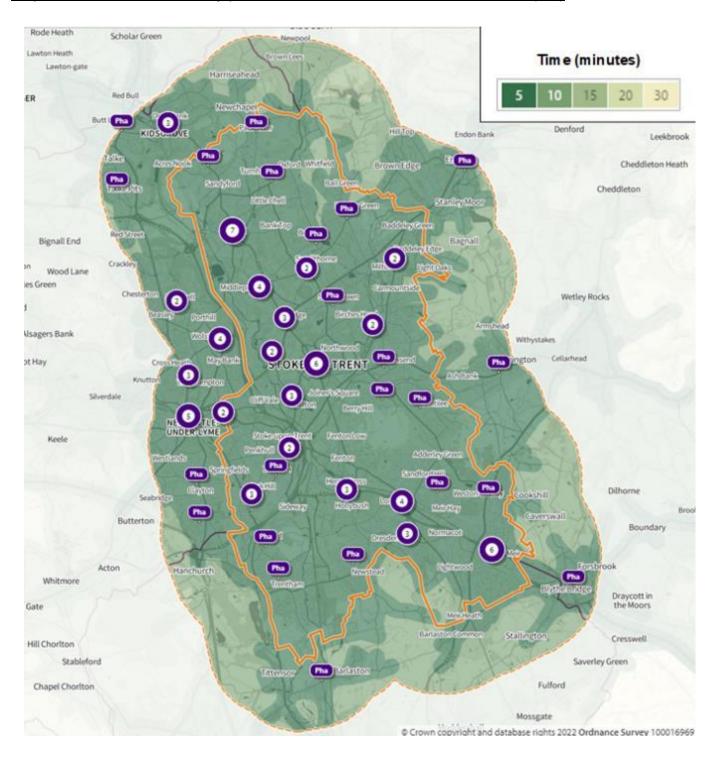


N.B. Maps also show a 2km buffer (dotted line) to allow consideration of neighbouring provision Source: Office for Health Improvement & Disparities 2022 (SHAPE Tool)

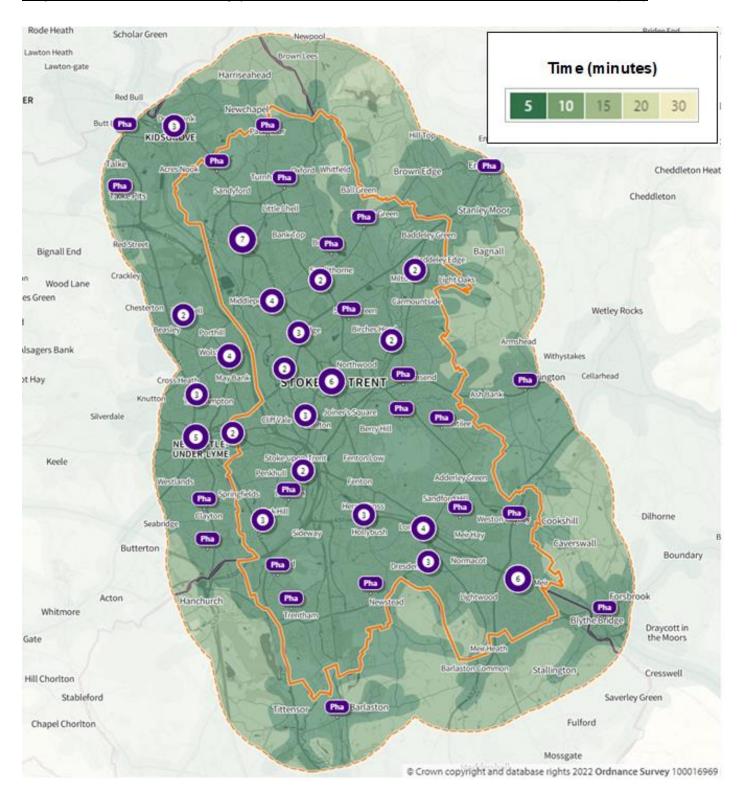
Map 25: Access to community pharmacies in Stoke-on-Trent – walking distance



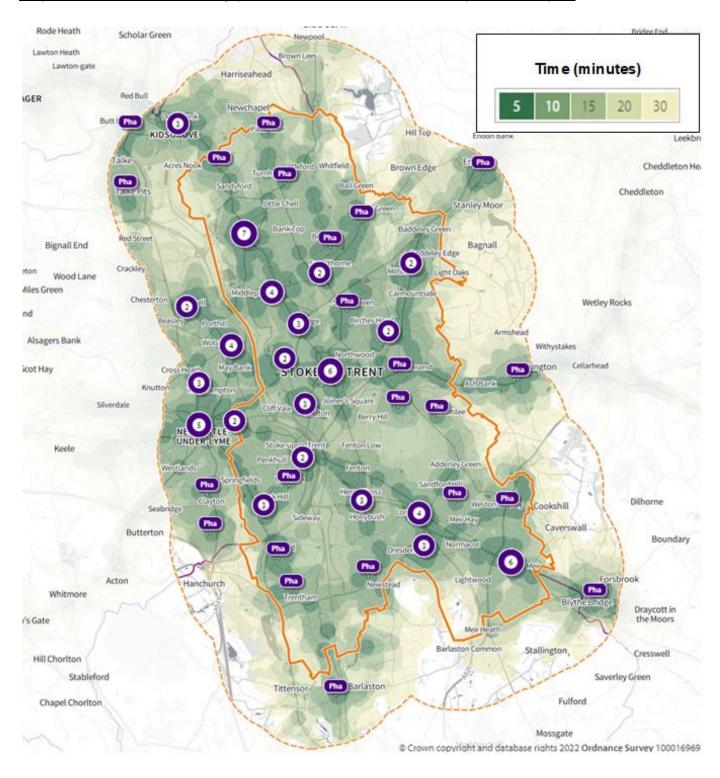
Map 26: Access to community pharmacies in Stoke-on-Trent – drive time (car)



Map 27: Access to community pharmacies in Stoke-on-Trent – drive time rush hour (car)



Map 28: Access to community pharmacies in Stoke-on-Trent – public transport



APPENDIX 3 INDIVIDUAL PHARMACY BY SERVICE PROVISION

Pharmacy		New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	Impetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
ALLIED PHARMACIES TRENTHAM ROAD LONGTON STOKE ON TRENT ST3 4DF	35	✓	~		~	✓	~		✓	✓		~	✓	~			✓	_	_		_
ASDA PHARMACY LTE SCOTIA ROAD TUNSTA STOKE ON TRENT STO	ALL	~			~	~	✓			✓		~					✓	✓			

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	mpetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
BIRCHES HEAD PHARMACY 12 DIANA ROAD STOKE ON TRENT STAFFORDSHIRE ST1 6RS	~		<u> </u>	~	✓	~		~	✓				_	~			~	~		
BLURTON PHARMACY 8 INGESTRE SQ BLURTON S ON T ST3 3JT	✓			~	~	~		~	~			~				✓	✓			~

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	mpetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
BOOTS BENTILEE HEALTH CENTRE DAWLISH DRIVE STOKE ON TRENT ST2 0EU	✓			~	~	~	_	~	✓	J	~	✓	_			~		_	_	_
BOOTS UNIT 5, RIDGEHOUSE DRIVE, FESTIVAL RETAIL PARK, STOKE ON TRENT ST1 5SJ	~			~	✓	~			~		~	~				~				

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	Impetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
BOOTS PHARMACY 3 5 UPPER MARKET SQUARE ST1 1PZ	~			~	~	~		~	✓		~	~		~		~	~			
BOOTS UK 25 BENNETT PRECINCT LONGTON STOKE ON TRENT ST3 2HX	~			~	✓	~			✓		~	~		~		✓				
BURSLEM PHARMACY CHAPEL LANE BURSLEM ST6 2AB	~			✓	✓	~										~	~			

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	Impetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
DERBY STREET PHARMACY 17 DERBY STREET HANLEY STOKE ON TRENT ST1 3LE	~	~	✓	✓	✓	~			~		~	✓				~	✓			
EATON PARK PHARMACY 2 SOUTHALL WAY ST2 9LT	~			~	✓	~		~	~		~	~	~	~	~	~	~			
GRAHAMS PHARMACY 99 FORD GREEN ROAD	✓			~	~	~		~	✓		~	✓	~			~	✓	~	~	✓

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	mpetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
SMALLTHORNE STOKE ON TRENT STAFFS ST6 1NT			<u> </u>			_	_	_										_		
HARTSHILL PHARMACY ASHWELL ROAD HARTSHILL S ON T ST4 6AT	~			~	✓	~		~	~			~				~	~	~		~
HERON CROSS PHARMACY 2 DUKE	~			~	✓	~		~	~		~	~				✓	~			✓

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	mpetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
STREET HERON CROSS STOKE ON TRENT ST4 3BL	_		0,			_		_		- U			_					_		
LLOYDS PHARMACY 29 DERBY STREET HANLEY STOKE ON TRENT, ST13LE ST1 3LE	~			~	✓	✓			~		~	✓					~			
LLOYDS PHARMACY LLOYDS PHARMACY GLEBEDALE ROAD	~			✓	✓	~			✓		~	~	~	~		~	~			✓

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	nfluenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	mpetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
FENTON STOKE ON TRENT ST4 3AQ						_	_											_		_
LLOYDS PHARMACY 128 WERRINGTON ROAD BUCKNALL ST2 9AJ	~			~	✓	~		~	~		~	~	~			~	~			
LLOYDSPHARMACY NORFOLK STREET SHELTON STOKE ON	~			✓	✓	~			~		~	~				~	~	✓		✓

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	mpetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
TRENT STAFFORDSHIRE ST1 4PB	_	_				_	_	_	_		_	_	<u>-</u>					_		
LLOYDSPHARMACY 84 UPPER HUNTBACH ST HANLEY STOKE ON TRENT STAFFS ST1 2BU	✓			✓	✓	~			~		~	~	~	~		~	✓			
LLOYDSPHARMACY COBRIDGE COMMUNITY HEALTH CENTRE ELDER	~			✓	✓	~			✓		✓	~	~			~	~			

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	Impetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
ROAD COBRIDGE STOKE ON TRENT ST6 2JN													_	_						
LLOYDSPHARMACY LLOYDSPHARMACY INSIDE SAINSBURYS,				~	•	•			✓		~	•		•			~			•

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	Impetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
LONGTON PHARMACY 22 THE STRAND LONGTON STOKE ON TRENT ST3 2JH	~			~	~	~	_	_	_		✓	~		_		~	✓		_	_
MEIR HAY PHARMACY UNIT 3 AMISON STREET ST3 1LD	✓			~	✓	~		~	✓					~			~	~		✓
MIDDLEPORT PHARMACY 185 NEWCASTLE ST MIDDLEPORT ST6 3QJ	~			~	✓	~		~	~	~	✓	~		~		~	✓	✓		✓

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	mpetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
MILLERS CHEMIST 114 BELGRAVE ROAD DRESDEN S ON T ST3 4LR	✓			~	✓	~		~	~		~	~			~	✓	✓	~	~	✓
MILTON PHARMACY 29 MILLRISE RD MILTON S ON T ST2 7BN	✓			~	✓	~		~	~			✓			~	✓	✓	~		✓
MILTONS CHEMISTS 15 19 CAMPBELL PLACE STOKE	✓	✓	✓	~	~	✓		~	~		~	~		✓		~	✓			

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Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	Impetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
ON TRENT STAFFORDSHIRE ST4 1NH															_					
MILTONS CHEMISTS LTD 1375 LEEK ROAD ABBEY HULTON ST2 8BW	✓			~	✓	~			~		~	~		~		~	~		~	~
MORRISONS PHARMACY MORRISONS PHARMACY, RIDGEHOUSE DRIVE, FESTIVAL PARK ST1 5NY	~			~		✓											~	~	~	~

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	Impetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
NORFOLK STREET PHARMACY 1 5 NORFOLK STREET SHELTON STOKE ON TRENT ST1 4PB	~	~		~	~	✓			~		✓	~			✓	~	~	✓		✓
NORTON PHARMACY 20 KNYPERSLEY ROAD NORTON STOKE ON TRENT ST6 8HX	~			~	✓	~		~	~			~		~		~	~			

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	Impetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
PACKMOOR PHARMACY SAMUEL STREET PACKMOOR S ON T ST7 4SR	~			✓	✓	~		✓	✓			✓			~	~	✓		✓	~
QUEEN STREET PHARMACY 38 QUEEN STREET BURSLEM ST6 3EG	~			~	~	✓		~	~	~	~	~		~		~				

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	mpetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
RAVEN PHARMACY ELDER ROAD COBRIDGE STOKE ON TRENT ST6 2JF	✓			✓	✓	~										✓	~		_	_
RIDGWAYS PHARMACY 73 BADDELEY GREEN LANE BADDELEY GREEN S ON T ST2 7JL	~			~	~	~		~	~			~				~	~		~	~
SNEYD GREEN PHARMACY 72 74 MILTON	✓			~	✓	✓						✓					✓	✓		✓

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	Impetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
RD STOKE ON TRENT ST1 6HD						_	_	_		U)										_
SUPERDRUG PHARMACY HANLEY, THE POTTERIES CENTRE STOKE ON TRENT ST1 1PS	~			✓	✓	~			~											
TESCO BATH ROAD ST3 2JB	✓			✓	~	~		~			✓	~				~				

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	mpetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
TESCO 291 NEWCASTLE ROAD STOKE ON TRENT ST4 6PL	✓			~	~	~		_	_				_							_
TESCO PHARMACY LYSANDER ROAD MEIR PARK STOKE ON TRENT ST3 7WB	~			✓	✓	~											~			
TESCO PHARMACY, TESCO STORES LTD	✓			~	~	~			~		~	~				✓	~	~	~	✓

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	mpetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
CLOUGH STREET, HANLEY ST1 4AA			o,				_						_							
TRENTHAM PHARMACY 17 WERBURGH DRIVE TRENTHAM STOKE ON TRENT ST4 8JT	~			~	✓	✓		~	~		~	✓		~			~	✓		✓
WATERLOO PHARMACY 159 WATERLOO ROAD COBRIDGE ST6 2ER	~			~	✓	~		✓				~		~		~				

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	Impetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
WATERLOO PHARMACY 68 THE STRAND LONGTON ST3 2NR	✓		~	✓	~	~		~	✓		~	~		~		~	~	~	~	✓
WELL 27 WESTON ROAD, MEIR ST3 6AB	~			~		~					~	✓	~				~	~		✓
WELL 42 DUNNING STREET, TUNSTALL ST6 5AP	✓			~		✓					~	✓	~				✓			

PNA for Stoke-on-Trent 2022

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	Impetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
WELL 9 15 DUNNING STREET, TUNSTALL ST6 5AP	~			✓		~					~	~	~			~				
WELL 16 FURLONG ROAD, TUNSTALL ST6 5UD	~			~		~					~		~			✓				
WELL 792 UTTOXETER ROAD, MEIR ST3 7AE	~			✓		~					~	✓	~			✓	~	~		✓

PNA for Stoke-on-Trent 2022

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	Impetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
WELL 7 9 NEW KINGSWAY WESTON COYNEY ST3 6NA	~			✓		~					~	~	~			~	✓			
WELL BROOK MEDICAL CENTRE, CHELL HEATH ROAD, STOKE ON TRENT ST6 7NN	~			~		~					~	~	✓			~				
WELL 237 BLURTON ROAD, BLURTON ST3 2AF	~			✓		✓										✓				

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	Impetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
WELL UNIT 1 MOORLAND SERVICE STATION, MOORLAND ROAD, BURSLEM ST6 1JP	~			~		✓					~		✓			~				
WELL 57 BIDDULPH ROAD, CHELL ST6 6SW	~			~		~					~	~	~			~	✓	~	~	✓
WELL ANNE STREET, GOLDENHILL, STOKE ON TRENT ST6 5QJ	~			~		✓					~	~	~			~	~			

PNA for Stoke-on-Trent 2022

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	Impetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
WELL 30 WILSON ROAD, HANFORD, STOKE ON TRENT ST4 4QQ	•			~		~					~	~	~		_	✓	~			
WELL 688 690 LONDON ROAD, OAKHILL ST4 5BA	~			~		~					~	✓	~			~	~	~		✓
WELL 974 976 LONDON ROAD TRENT VALE STOKE ON TRENT ST4 5NX	✓			~																

Pharmacy	New Medicine Service	Appliance Use Review	Stoma Appliance Customisation	Community Pharmacist Consultation Service	C-19 Lateral Flow Device Distribution	Influenza Vaccinations	Hepatitis C Testing	Hypertension Case Finding	Pandemic Delivery Service	Stop Smoking Advanced Service	Emergency Hormonal Contraception	Emergency Supply Service	Needle And Syringe Exchange Service	Palliative Care	C-19 Vaccinations	Supervised Consumption	Uti Consultation And Supply	Impetigo Consultation And Supply	Infected Eczema Consultation And Supply	Infected Insect Bites Consultation and Supply
WELL 363 LONDON ROAD WEST END ST4 5AN	~			~		✓					~	✓	~			~				
WESTON ROAD PHARMACY WESTON ROAD MEIR ST3 6AB	~			~	✓	✓			✓							✓	~	✓		✓

APPENDIX 4 RESULTS FROM THE PNA CONSULTATION

The 2013 Pharmaceutical Regulations state that each HWBB must consult about the contents of their (draft) PNA for a minimum of 60 days. In Stoke-on-Trent, the statutory consultation for the city's PNA took place between 15th July 2022 to 13th September 2022 (a total of 60 days).

The Regulations set out a list of key stakeholders that must be consulted with. These stakeholders were contacted via email and asked for their feedback on the content of the draft PNA. Members of the public living in the city were also given the opportunity to consult on the PNA. The consultation was made available on the City Council's website and promoted through various means within the county council.

Findings from the consultation

One multiple pharmacy contractor responded to the (draft) PNA during the consultation. Their response to consultation is included below.

- 1. Do you think the draft PNA accurately reflects the pharmacy needs of local people in Stoke-on-Trent?
 - a. Yes
- 2. Do you think the PNA accurately reflects the current range of pharmacy services available to local people in Stoke-on-Trent?
 - a. Yes
- 3. Do you think there are any gaps in the services pharmacies currently provide to local people in Stoke-on-Trent?
 - a. No
- 4. Do you think there are other services that could be provided by pharmacies in the future to local people in Stoke-on-Trent?
 - a. No
- 5. Is there any other information that you would like to see included in the PNA?
 - a. No
- 6. Do you have any other comments to make on the draft PNA?
 - a. Concise and to the point.

- 7. Which best describes you?
 - a. Other
- 8. If other, please provide details
 - a. Multiple pharmacy contractor

Alongside members of the public living in the city, a number of key stakeholders were contacted as part of the consultation process. These are listed below.

- Key stakeholders contacted during the consultation
 - Pharmaceutical stakeholders
 - Pharmacies
 - All dispensing practices
 - Local Pharmaceutical Committee (North and South Staffordshire)
 - The Staffordshire and Shropshire LPN for pharmacy
 - Staffordshire Health and Wellbeing Board
 - Cheshire Health and Wellbeing Board
- NHS stakeholders
 - GP practices
 - VoCare (Staffordshire Doctors Urgent Care)
 - Local Medical Committee (North and South Staffordshire)
 - Staffordshire and Stoke-on-Trent Integrated Care Board
 - Midlands Partnership NHS Foundation Trust
 - North Staffordshire Combined Healthcare Trust
 - University Hospital of North Midlands NHS Trust
 - West Midlands Ambulance Service NHS Trust
- Local authorities
 - Newcastle-under-Lyme Borough Council
 - Stafford Borough Council
 - o Staffordshire County Council
 - Staffordshire Moorlands District Council
- Additional key stakeholders
 - Healthwatch Stoke-on-Trent
 - VAST Stoke-on-Trent and Staffordshire

Letter sent to key stakeholders during the consultation

Consultation on the Stoke-on-Trent Pharmaceutical Needs Assessment

The Health and Wellbeing Board (HWBB) of Stoke-on-Trent City Council have produced a draft local Pharmaceutical Needs Assessment (PNA), which will help ensure residents have good access to local pharmacy services. The last PNA was produced in 2018 and by law all local authority HWBBs in England must publish a new PNA by 1st October 2022.

The PNA looks at the current provision of pharmaceutical services across Stoke-on-Trent and whether this meets the needs of the population and identifies any potential gaps in service delivery. The PNA will also be used by NHS England to consider applications to open new pharmacies, or to commission additional services from pharmacies.

We're asking key stakeholders to comment on the contents of the draft PNA before it is finalised and published next year. We would like to invite you to take part in this consultation which will run from 15th July to 13th September 2022.

The draft PNA, further information and a link to the online feedback form can be found on the following website: www.stoke.gov.uk/pharmacyconsultation

You can make your views known in the following ways:

- Online by completing a feedback form online at: www.stoke.gov.uk/pharmacyconsultation
- By post by handwriting a feedback form and returning to : PNA Consultation
 Stoke-on-Trent City Council Civic Centre, Glebe Street Stoke-on-Trent, Staffs
 ST4 1HH
- •By email by sending your views to pharmacyconsultation@stoke.gov.uk

To limit the environmental impact of this consultation we would prefer that the document is read electronically. However, if you do require a paper copy of the form or have any queries, please email pharmacyconsultation@stoke.gov.uk

All feedback will be considered and a consultation report will be included within the final PNA (due to be published by 1st October 2022). This will give an overview of the feedback received and set out how this has impacted the final document.

We look forward to receiving your feedback on the draft PNA.

Yours faithfully

Andrea Fallon

Interim Director of Public Health