

# Pharmaceutical Needs Assessment for Westminster

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2018-2021



City of Westminster

Compiled by Healthy Dialogues Ltd



Healthy Dialogues  
LTD

— Behaviour Change Solutions For Health —

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# Executive Summary

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Community pharmacies provide a range of services including dispensing medicines, promoting health and wellbeing and early detection of diseases. They can offer long opening hours and are situated in local communities, which means they can be more easily accessible than most other community health services. They are key to connecting local people and communities to healthcare and public health services that they need.

There is a strong network of 93 community pharmacies located throughout Westminster. This Pharmaceutical Needs Assessment (PNA) reviews the need for pharmacy services and assesses the current service provision to identify gaps. The PNA is a statutory responsibility of the Health and Wellbeing Board. It is used for informing decisions on applications for new pharmacies, changes in premises and services of existing pharmacies.

This PNA assesses the health and wellbeing needs of the population Westminster with respect to pharmacy services. The current pharmacy provision and their services have been examined in detail, including users' views. Key findings are outlined below.

## Key Demographics and Health Needs

- Westminster is a vibrant and densely populated borough with a daytime population nearly four times that the size of the resident population. The population is expected to rise substantially in the coming years.
- Nearly half of the population were born abroad and nearly one-third identify as from BME groups; the highest proportion of whom live in Church Street.
- Circulatory diseases, cancers and respiratory diseases are the biggest causes in the differences in life expectancy between the least and most deprived.
- Recorded mental illness, sexually transmitted infections and smoking are high in the borough.
- Excess weight in children and dental decay are high and childhood vaccination coverage is low.

## Key Findings from User Views

- Community survey respondents stated that they are happy with the pharmacy services they receive in the borough.
- Respondents mostly use the pharmacies to obtain prescription medications, repeat prescriptions and over the counter medications.
- The top three services respondents would use if provided were health checks, home delivery and prescription collection services.
- Suggestions for improvement included providing longer opening hours, more Sunday opening hours and option of basic blood tests and scans/x-rays at their local pharmacies.

## Health and Wellbeing Board Statements on Service Provision

The categorisation of these services into those stipulated by the PNA regulations are summarised in the table that follows. <b>Necessary services: current provision (Schedule 1, paragraph 1)</b>	<b>Necessary services: gaps in provision (Schedule 1, paragraph 2)</b>
Essential Services (see Chapter 6)	No gaps in provision of necessary services (see Chapter 6)
<b>Other relevant services: current provision (Schedule 1, paragraph 3)</b>	
<ul style="list-style-type: none"> <li>• Medicine Use Review service</li> <li>• New Medicine Service</li> <li>• Appliance Use Reviews</li> <li>• Stoma Appliance Customisation Service</li> <li>• NHS Urgent Medicine Supply Advanced Service</li> <li>• National NHS England Flu Service (Advanced Service)</li> </ul>	
<b>Other services (Schedule 1, paragraph 5)</b>	
Commissioned Services:	<ul style="list-style-type: none"> <li>• Minor Ailments Scheme</li> <li>• NHS Health Checks</li> <li>• Supervised Administration</li> <li>• Needle Exchange Services</li> <li>• Stop Smoking Services</li> </ul>
Privately Delivered Services	<ul style="list-style-type: none"> <li>• Alcohol Misuse Services</li> <li>• Weight Management Services</li> <li>• Emergency Hormonal Contraception</li> <li>• Sexual Health Screening and Treatment Services</li> <li>• Care Home Advice Service</li> <li>• Out of Hours Palliative Care Service</li> </ul>
<b>Improvements and better access: gaps in provision (Schedule 1, paragraph 4)</b>	
<ul style="list-style-type: none"> <li>• HIV Screening service</li> <li>• Child and Family Weight Management Services</li> </ul>	

### Necessary Services

These services are fundamental for patients to obtain prescribed medicines in a safe and reliable manner. All pharmacies are required to deliver and comply with the specifications for all essential services.

The range of options for dispensing NHS prescriptions, facilities within pharmacies, the range of opening hours and the close proximity of pharmacies to local residents are sufficient for supplying a necessary pharmaceutical service with no gaps in Westminster.

### Other Relevant Services

These are services provided which are not necessary to meet the need for pharmaceutical services in the area, but which nonetheless have secured improvements or better access to pharmaceutical services. They include:

- Medicine Use Review service
- New Medicine Service
- Appliance Use Reviews
- Stoma Appliance Customisation Service
- NHS Urgent Medicine Supply Advanced Service
- National NHS England Flu Service (Advanced Service)

These services are sufficient for supplying a relevant service with no gaps.

### **Other Services**

Other services are services that are provided or arranged by a local authority or NHS England to meet the needs of local populations. The Health and Wellbeing Board is satisfied that these services are sufficient to secure improvement, or better access to pharmaceutical services, in its area. In Westminster these include:

- Minor Ailment Schemes
- NHS Health Checks
- Supervised Administration
- Needle Exchange Services
- Stop Smoking Services

### **Improvements and better access**

There are no gaps in services that the Health and Wellbeing Board considers could, if provided, secure improvements, or better access to pharmaceutical services of a specific type.

There is an opportunity for existing pharmacies to provide better access to two services, if locally commissioned. These are:

- HIV screening services
- Child and family weight management services

### **Recommendations**

Recommendation 1: NHS Pharmacies are contracted to participate in up to six public health campaigns each year. Only one campaign per year has been delivered through pharmacies in recent years. The Health and Wellbeing Board recommend better co-ordination between NHS England, Public Health England, CCGs and Local Authorities to ensure pharmacies are better utilised to deliver key health promotion messages to the public.

Recommendation 2: Currently no Westminster pharmacies have been commissioned to deliver out of hours palliative care drugs. The Health and Wellbeing Board recommend further exploration by relevant stakeholders to identify if there is a current or future need for the provision of this service.

In summary, Westminster Health and Wellbeing is satisfied that the **current pharmacy provision is sufficient for supplying a necessary and relevant pharmaceutical service with no gaps in the in the borough.**

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# Chapter 1 - Introduction

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## Role of Pharmacies

- 1.1 Community pharmacists and their teams work at the heart of communities and are trusted professionals in supporting individual, family and community health. Community pharmacies are often patients' and the public's first point of contact and, for some, their only contact with a healthcare professional. Community pharmacies are not only a valuable health asset, but also an important social asset because often they are the only healthcare facility located in an area of deprivation.
- 1.2 Pharmacies provide a range of care responsibilities for patients and the public including dispensing medications, providing basic health checks, healthcare and preventative care and educating patients on the use of prescriptions and over-the-counter medications.

## Purpose of the Pharmaceutical Needs Assessment

- 1.3 The Pharmaceutical Needs Assessment (PNA) identifies the key health needs of the local population and how those needs are being fulfilled, or could be fulfilled, by pharmaceutical services in different parts of the borough. The role of the PNA is twofold:
  - to inform local plans for the commissioning of pharmaceutical services and
  - to support the 'market entry' decision making process (undertaken by NHS England) in relation to applications for new pharmacies or changes of pharmacy premises.
- 1.4 As outlined in the 2013 regulations, this PNA describes pharmaceutical services in terms of the following summary categories:

**A. Necessary Services – Current Provision:** services currently being provided which are regarded to be “necessary to meet the need for pharmaceutical services in the area”. This includes services provided in the Borough as well as those in neighbouring Boroughs

**B. Necessary Services – Gaps in Provision:** services *not* currently being provided which are regarded by the HWB to be necessary “in order to meet a current need for pharmaceutical services”.

**C. Other Relevant Services – Current Provision:** services provided which are not necessary to meet the need for pharmaceutical services in the area, but which nonetheless have “secured improvements or better access to pharmaceutical services”.

**D. Improvements and Better Access – Gaps in Provision:** services *not* currently

provided, but which the HWB is satisfied would “secure improvements, or better access to pharmaceutical services” if provided.

**E. Other Services:** any services provided or arranged by a local authority, NHS England, the CCG, an NHS trust or an NHS foundation trust which affects the need for pharmaceutical services in its area or where future provision would secure improvement, or better access to pharmaceutical services specified type, in its area.

## Policy Background Relating to the PNA

- 1.5 From 2006, NHS Primary Care Trusts (PCT) had a statutory responsibility to assess the pharmaceutical needs for its area and to publish a statement of its assessment and of any revised assessment. This was generally undertaken by public health teams within the PCTs.
- 1.6 With the abolition of Primary Care Trusts and the creation of Clinical commissioning groups in 2013 Public Health functions were transferred local authorities. Health and Wellbeing boards were introduced and hosted by local authorities to bring together Public Health, Adult Social Care, Children’s services and Healthwatch.
- 1.7 The Health and Social Care Act of 2012 put responsibility of the developing and updating the Pharmaceutical Needs Assessments and Joint Strategic Needs Assessments on the Health and Wellbeing boards.
- 1.8 The 2018-21 Pharmaceutical Needs Assessment must be produced and published by 1st April 2018. The Health and Wellbeing Board are also required to revise their latest PNA publication if they deem there to be significant changes in pharmaceutical services within the 2018-21 timeframe.
- 1.9 The PNA must be put out for consultation for a minimum of 60 days prior to its publication. The 2013 Regulations list those persons and organisations that the HWB must consult, which include:
  - Any relevant local pharmaceutical committee (LPC) for the HWB area
  - Any local medical committee (LMC) for the HWB area
  - Any persons on the pharmaceutical lists and any dispensing GP practices in the HWB area
  - Any local Healthwatch organisation for the HWB area, and any other patient, consumer and community group, which in the opinion of the HWB has an interest in the provision of pharmaceutical services in its area
  - Any NHS Trust or NHS Foundation Trust in the HWB area
  - NHS England
  - Any neighbouring Health and Wellbeing board.
- 1.10 The NHS Pharmaceutical Services and Local Pharmaceutical Services Regulations of 2013 and the Department of Health Information Pack for Local Authorities and Health and Wellbeing boards provide guidance as to the requirements that should be

contained in the PNA publication and the process to be followed to develop the publication. The development and publication of this PNA has been carried out in accordance with these Regulations.

- 1.11** Joint Strategic Needs Assessments are a strategic valuation of the health and wellbeing needs of the local population, and this PNA builds on the findings of the JSNA by supporting the commissioning and the development of appropriate, sustainable and effective pharmacy services. For further information on the JSNA please refer to <http://www.jsna.info>.

## Additional Considerations Regarding Pharmacy Funding

- 1.12** From October 2016 the government has imposed a two-year funding package that will lead to 4% reduction in funding in 2016/17 and a further 3.4% in funding in 2017/18.
- 1.13** In consideration of these funding cuts the Department of Health introduced the Pharmacy Access Scheme (PhAS) in December 2016 to ensure that access to NHS community pharmaceutical services is protected, particularly in areas where there is higher health needs. Qualifying pharmacies, i.e. those with high dependency and located where pharmacy services are sparse, receive an additional payment that will protect them from the full effect of the reduction in funding imposed from December 2016.
- 1.14** The Government has also introduced a Quality Payment Scheme from December 2016 to March 2018. Pharmacies qualify for additional funding if they meet the following four criteria:
- Provision of at least one advanced service
  - NHS Choices entry up to date
  - Staff able to send and receive NHS email
  - On-going utilisation of the Electronic Prescription Service (EPS)

# Chapter 2 - Local health and wellbeing priorities

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**2.1** All Health and Wellbeing boards are required to produce a Health and Wellbeing Strategy that sets out how partners will meet local health needs, improve outcomes and reduce health inequalities within the borough.

**2.2** The **Joint Health and Wellbeing Strategy for Westminster 2017 – 2022** outlines the commitment of the Health and Wellbeing Board and partners including voluntary and community groups, businesses and people to ensure people are enabled to be well, stay well and live well, supported by a collaborative and cohesive health and care system. Its vision is that all people are able to enjoy a healthier city and healthier life and it addresses physical and mental ill health by making improvements to employment, housing, education, community resilience, safety and the environment within Westminster.

There are four priorities for the local area:

1. Improving outcomes for children and young people
2. Reducing the risk factors for, and improving the management of, long term conditions such as dementia
3. Improving mental health through prevention and self-management
4. Creating and leading a sustainable and effective local health and care system.

**2.3** Alongside this, the Westminster Health and Wellbeing board are working with Kensington and Chelsea and Hammersmith and Fulham to pool together budgets to support health and social care services to work together more closely. This budget is called the **Better Care Fund** which aims to support to residents in Westminster by providing people with the right care, in the right place, at the right time, including expansion of care in the community setting. This includes:

- Helping people self-manage, providing care navigation, working in partnership with the local community and voluntary sector and local faith groups.
- Investing in locality-based social work, working alongside GPs and care navigators to prevent reliance on expensive health and social care packages.
- Reducing delayed discharges from hospital through strengthening 7-day social care provision.
- Integrating NHS and social care systems around the NHS number through a single point of access across health and social care, to ensure those frontline professionals, and ultimately all patients and service users, have access to all of the records and information they need.
- Improving outcomes through transforming the quality, consistency and coordination of care across nursing and care homes in Westminster and improving primary care support to our care homes.
- Coordinating dementia support across health and social care ensuring an effective pathway from early diagnosis to end of life care.

- 2.4 Northwest London Sustainability and Transformation Plans (STP)** outline how the Local Authorities and NHS within the sub-region including Westminster, will work together to radically transform the way they provide health and social care for the population. Their aim is to provide excellent quality care in the right place and when needed, help people to look after themselves and maximise opportunities to keep the healthy majority healthy. There are five delivery areas the STP will focus:
1. Radically upgrading prevention and wellbeing
  2. Eliminating unwarranted variation and improving long-term condition management
  3. Achieving better outcomes and experiences for older people
  4. Improving outcomes for children and adults with mental health needs
  5. Ensuring we have safe, high quality sustainable acute services
- 2.5** Additionally Northwest London Collaboration of Clinical Commissioning Groups are launching **Prescribing Wisely**. Prescribing Wisely is a set of recommendations for GPs and other prescribers to reduce the prescribing of medicines that can be purchased without a prescription. This supports patient self-care as well as potentially reducing GP appointments and prescription costs.
- 2.6** In November 2017, it is anticipated that the Westminster Health and Wellbeing Board and the Central London CCG Governing Body will consider the Case for Change and an Outline Commissioning Strategy to establish in Westminster **an Accountable Care Partnership** from April 2019. It is envisaged that rather than a range of different providers delivering health and social care services in the community an integrated arrangement will be established where GPs, community nurses, social workers and other health and social care professionals will work together as a part of single multi-disciplinary teams, utilising a single contract framework to deliver better and more joined up health and social care services.
- 2.7** It is anticipated that this programme will play a key role in the work required to develop additional health and social care capacity within the community in order to reduce pressure on hospital services and to improve services for older people and people with multiple long term conditions.
- 2.8** This programme is at an early stage but it is currently envisaged that the scope of this new contractual arrangement will be agreed in January 2018 and a full Business Case considered in May 2018. A procurement process will then take place which should result in the identification of a preferred provider in November 2018 and the new arrangements beginning to be rolled out in April 2019.
- 2.9** This PNA has taken these local policies and strategies into consideration when reviewing the pharmaceutical needs.

# Chapter 3 - The Pharmaceutical Needs Assessment Process

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- 3.1 This PNA has been developed using a range of information sources to describe and identify population needs and current service provision from the network of community pharmacies (see table 3.1). This includes:
- Nationally published data
  - Joint Strategic Needs Assessment
  - A survey to Westminster pharmacy providers
  - A community questionnaire to the Patients and Public of Westminster
  - Comments made during the consultation process

**Table 3.1 PNA 2018-21 data sources**

<b>Health need and priorities</b>	National benchmarking ward and borough-level data from Public Health England Westminster City Council Joint Strategic Needs Assessment (JSNA) Office of National Statistics 2014 mid-year estimates Synthesis from national datasets and statistics
<b>Current Pharmaceutical Services</b>	Commissioning data held by the NHS England Commissioning data held by Westminster City Council Survey to community pharmacy providers Direct phone call with pharmacies to clarify any discrepancies
<b>Patients and the Public</b>	Community questionnaire

- 3.2 These data have been combined to describe the Westminster population, current and future health needs and how pharmaceutical services can be used to support the Health and Wellbeing Board (HWB) to improve the health and wellbeing of our population.

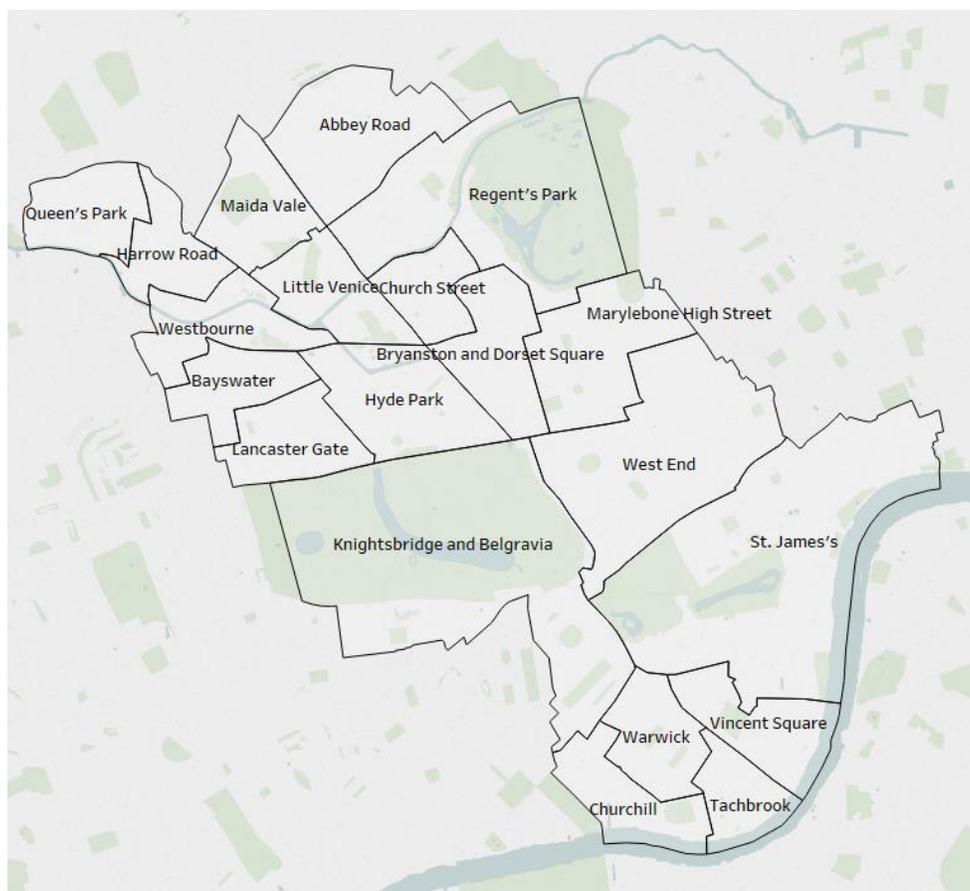
## Methodological Considerations

### Geographical Coverage

3.3 For the purposes of the PNA the geographical area of Westminster City Council is presented using two approaches to define localities:

- **Electoral wards** are used to summarise demographic and health need. Westminster has 20 electoral wards in total (illustrated in figure 3.1).
- Provision and choice of pharmacies is determined by using a **500 metres radius** from the centre of the postcode of each pharmacy. This is considered to be approximately a 10-minute walk from the outer perimeter of the buffer zone created.

Figure 3.1 Westminster City Council Electoral Wards



3.4 The rationale for using the more detailed 500m-radius approach was to identify the range of access and service provision in a far more precise fashion than ward averages would allow. For example, where boundaries of wards are main roads, pharmacies on the opposite side of the road would not be counted towards the ward's provision, thereby giving an inaccurate picture of provision; use of the more detailed 500m-radius approach avoids this. It also allows the PNA to

assess the impact of pharmacies in surrounding boroughs that are within 500m of the borough border.

- 3.5 The 500m-radius approach illustrates where there is at least one pharmacy within 500m and where there is no pharmacy within 500m. The distance of 500m was chosen by the Steering Group as being a reasonable measure to identify variation and choice. However, whilst highlighting variation, it is not always used to determine gaps in services; in some instances, wider measures are more appropriate (e.g. where there is lower patient demand for services, such as needle exchange and dispensing outside normal working hours). These instances have all been stated in the relevant sections of the report.

### **Pharmacy Contractor Survey**

- 3.6 The contractor survey was sent to the pharmacies within Westminster and the response rate was 92% (85/92). The results from this survey are referred to throughout this document.

### **Patient and Public Engagement and Assessment of Protected Characteristics**

- 3.7 A community pharmacy questionnaire was used to engage with 193 people to understand their use and experience of local pharmacies from September to October 2017. Information obtained from these surveys informed the analysis of the use and views of pharmacies by people from the protected characteristics and vulnerable groups.

## **Governance and Steering Group**

- 3.8 The development of the PNA was advised by a Task and Finish group whose membership included representation from the following organisations:
- Westminster City Council Public Health team
  - Clinical Commissioning Group
  - Westminster and Kensington Chelsea Local Pharmaceutical Committee (LPC)
  - Healthwatch.

The membership and Terms of Reference of the steering group can be found in Appendix A.

## **Regulatory Consultation Process and Outcomes**

- 3.9 This PNA was published for public consultation in December 2017 for 60 days. All comments have been considered and incorporated into this final report.

# Chapter 4 - Health Needs and Population Changes

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- 4.1** Much of the demographic and health information included here is covered in detail in this chapter as well as in the Joint Strategic Needs Assessment (JSNA) and the Annual Public Health Report for the City of Westminster. The JSNA identifies current and future health and social care needs of the borough's population and analyses whether these needs are being met locally. For the borough's highlights report please see <https://www.jsna.info/online/highlightreports>.
- 4.2** The analysis of health needs and population changes are based on analysis completed in October 2017. They are outlined in three sub-sections of this chapter: Population Characteristics and Projections; Wider Determinants of Health and Inequalities and Risk Factors for Mortality and Morbidly.
- 4.3** The aim of this chapter is to present an overview of health and wellbeing in Westminster, particularly the areas likely to impact on needs for community pharmacy services. This includes an analysis of the latest Westminster population and inequalities projections.
- 4.4** All the maps that follow present the size of population in relation different factors such as population density, wellbeing and smoking prevalence. They are displayed in gradients, whereby the lowest figures have the lightest colour and the highest figures have the darkest colour. Each map is supplemented with a legend that outlines the distances between these gradients.
- 4.5** The City of Westminster is situated in the heart of London. The borough covers eight and a half square miles and extends to Regent's Park in the north, Hyde Park in the west and Covent Garden in the east. The southern boundary follows the north bank of the River Thames. The borough has main town centre areas in Mayfair, Victoria, Maida Vale, Paddington, Marylebone and Bayswater.

## Population Characteristics and Projections

- 4.6** Characteristics of the local population have been summarised in Table 4.1.

**Table 4.1: Population Characteristics at a Glance**

The borough at a glance...			
<b>242,100</b>	Residents	<b>11,049</b>	New migrants registered with local GPs
<b>247,614</b>	Registered with local GPs	<b>£42,141</b>	Average annual pay
<b>897,293</b>	Daytime population in an average weekday	<b>8.8%</b>	Unemployment rate (JSA) (London 3.1%)
<b>118,975</b>	Households	<b>Ranked 98<sup>th</sup></b>	Most deprived borough in England (out of 326) (20 <sup>th</sup> in London)
<b>920,000</b>	Median house price	<b>Ranked 33<sup>rd</sup></b>	Income Deprivation Affecting Children Index (out of 326) (14 <sup>th</sup> in London)
<b>71.1%</b>	Renters	<b>7 (7.42)</b>	Live births each day
<b>38.8%</b>	From BME groups	<b>3 (3.22)</b>	Deaths each day
<b>49.8%</b>	Born abroad (2011 Census)	<b>55,385</b>	Local businesses
<b>30.8%</b>	Main language not English	<b>13.4%</b>	Local jobs in Public Sector
<b>52.6%</b>	State school pupils whose main language not English	<b>Ranked 1<sup>st</sup></b>	For high carbon emissions in London
<b>38.2%</b>	of the borough is green space		

**4.7** Westminster is a densely populated and vibrant Central London borough, with a daytime population nearly four times the size of the resident population. The area has a large proportion of young working age residents and very few children, as well as high levels of international migration and cultural diversity, with rich and poor living side by side.

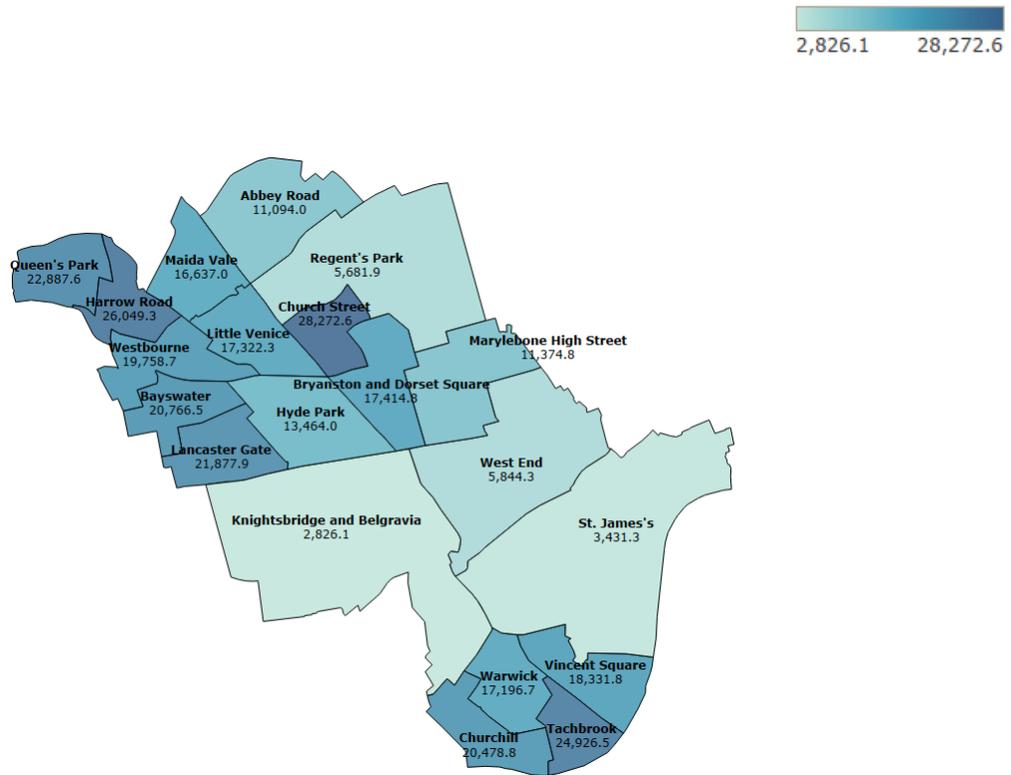
**4.8** The Office for National Statistics estimates the Westminster **resident population** in 2014 mid-year estimates to be 242,100 and the **daytime population** as 897,293.

**4.9** **Population density** is high in Westminster at an average of 112 per hectare. This is double that of London at an average 56.2 residents per hectare. The high density wards are mainly in the northern deprived parts in Westminster. The most densely populated wards include Church Street, Harrow Road and Tachbrook (Figure 4.1).

#### Daytime population

The day time population of Westminster is much higher than the numbers of usual residents and the flow of these people into Westminster needs to be considered when planning for pharmacy provision, although there is no evidence that this significantly affects service provision at present.

**Figure 4.1 Population Density of Westminster per square kilometre by Ward, mid 2014 estimates.**

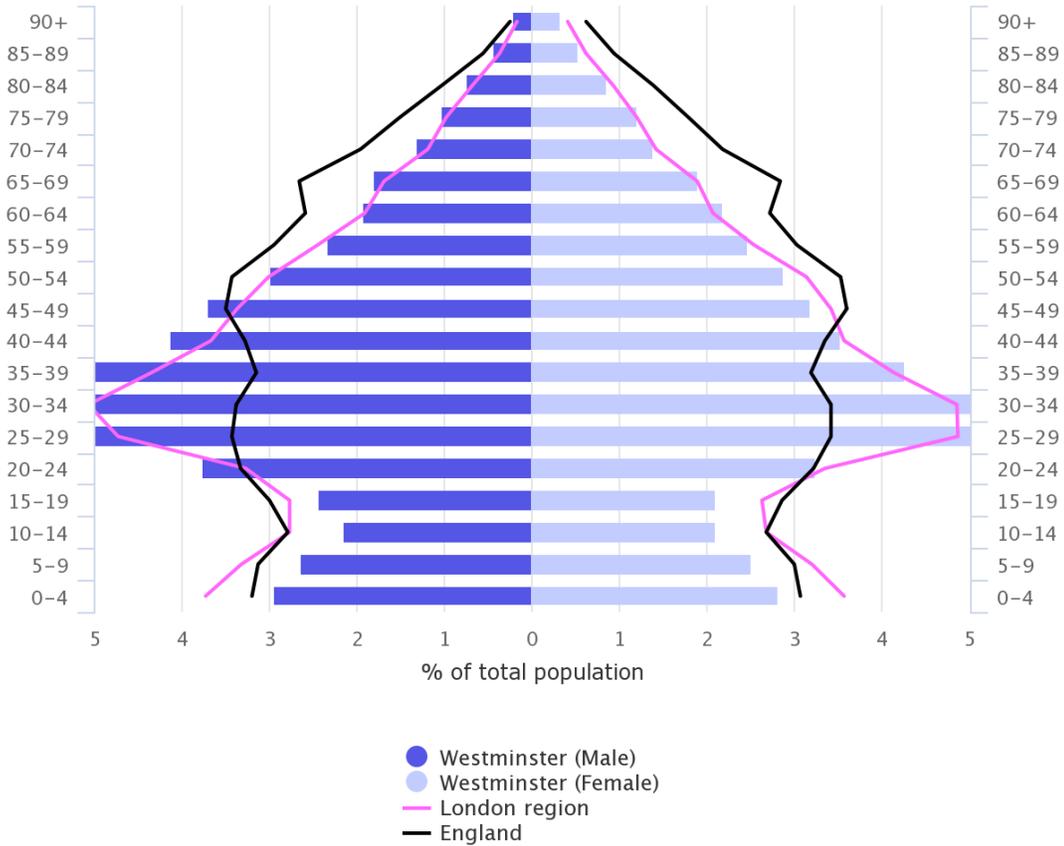


Source: ONS, 2015

### Age and Gender Structure

- 4.10 The **gender** split is unusual, with more men than women. This is particularly the case in the 20-50 year old age groups, but there are more women in the 50+ groups (see Figure 4.2).
- 4.11 The **age** profile in Westminster is typical of inner city areas, with a very high proportion of young working age adults, and a smaller proportion of older people. Westminster has the smallest proportion of children age 0-15 in London (not including City of London).
- 4.12 The 198,100 residents aged 16 to 64 represent 74.1% of the total population. The average is 37.7 years, slightly older than London at 36 years.
- 4.13 The proportion of the total population aged 65+ is similar to London, but not as large as England. Compared to London, the borough has the 5th highest proportion of younger working age residents (Figure 4.2).

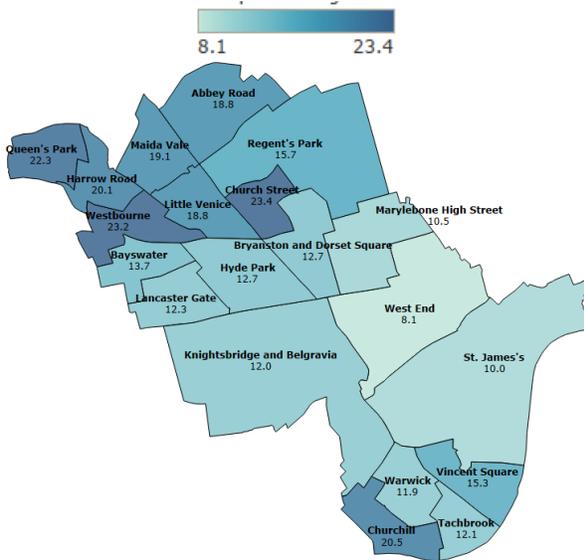
**Figure 4.2: Proportion of resident population by age-band and gender, Mid-2014 estimates for Westminster, 2015**



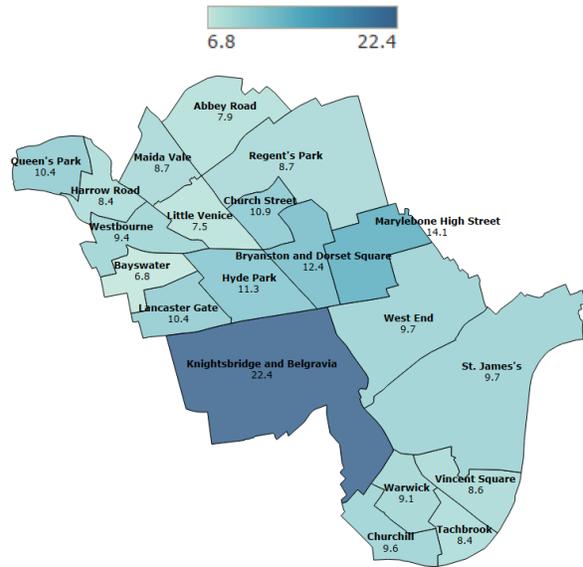
Source: ONS 2015

**4.14** Most of the 0-15 and population live in the northern deprived wards, while a high proportion of older people live in affluent parts including Knightsbridge & Belgravia (Figure 4.3 to 4.6).

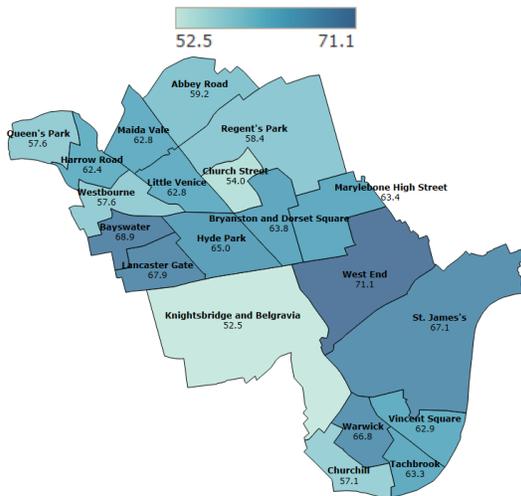
**Figure 4.3: % of 0-15 Population by Ward, 2015.**



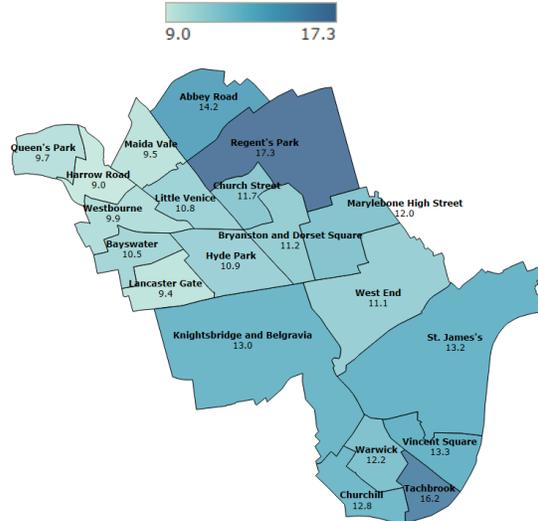
**Figure 4.4: % of 16-24 Population by Ward, 2015.**



**Figure 4.5: % of 25-64 Population by Ward, 2015.**



**Figure 4.6: % of 65 + Population by Ward, 2015.**



Source: ONS, 2017

**4.15** The older population of expected Westminster is expected to increase in the next decade. Predictive modeling that estimates that there will be a 15% increase of residents who are aged 65 and over by 2024 due to improvements in the life expectancy of the baby-boom generation (Table 4.2).

#### Increasing elderly population

As the population ages, the demand on health care and dispensing services increases. Accessibility is an important factor for the elderly population.

**Table 4.2 Projected population growth by age group for Westminster**

	2014	2024
<b>65-74</b>	9,824	10,322
<b>75-84</b>	5,523	6,837
<b>85+</b>	2,230	3,117
<b>Total 65+</b>	17,577	20,277

Source: PHE, 2017, based on ONS 2011 census

### Ethnicity and Diversity

**4.16** Nearly half, 49.8% of the borough's population were **born abroad** according to ONS census 2011. The largest migrant populations by country of birth are United States (3.6%), France (2.6%) and Iraq (2.1%).

**4.17** 38.3% of the population is from **Black, Asian and minority ethnic (BME) groups**. Westminster has a smaller Black population and Asian population than the London average, but the largest proportion nationally from the 'Arab' group (e.g. Middle East & North Africa) and the 14th highest from 'Mixed' groups (Table 4.3).

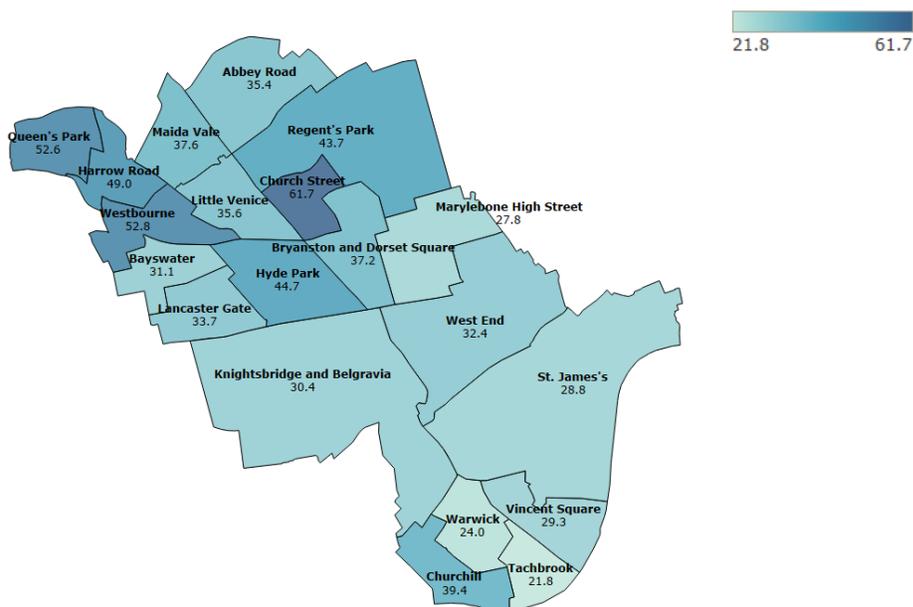
**Table 4.3 Black and Minority Ethnic population breakdown for Westminster, London and England and Wales**

Region	White	Mixed	Asian or Asian British	Black or Black British	Other
<b>Westminster</b>	61.68%	5.19%	14.52%	7.51%	11.09%
<b>London</b>	59.79%	4.96%	18.49%	13.32%	3.44%
<b>England and Wales</b>	85.97%	2.18%	7.51%	3.33%	1.01%

Source: ONS, 2011

**4.18** Most of the minority ethnic groups in Westminster reside in the northern deprived wards. Church Street, Westbourne and Queen's Park have the highest percentage of Black and Minority Ethnic residents (Figure 4.7).

**Figure 4.7: Percentage of black and ethnic minority groups by wards in Westminster, 2016**



Source: PHE, 2016

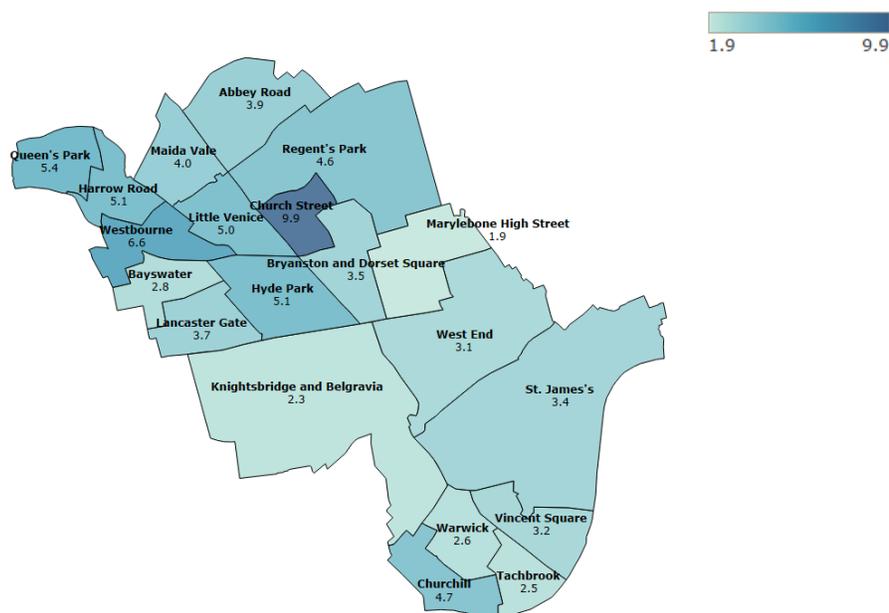
**4.19** Just under a third (30.8%) of the borough's residents state their **main language is not English**. A breakdown by ward in Figure 4.8 show percentages of residents who do not speak English well. Nearly 10% of residents in Church Street do not speak English well or at all. High numbers of residents in Harrow Road, Hyde Park, Queens Park also do not speak English well or at all.

### Pharmacy provision for cultural and language barriers

Areas where diversity is higher correlate with areas of higher levels of deprivation and poorer health. For example, Ethnic minority communities have higher incidence of long-term conditions such as diabetes and cardiovascular disease.

Cultural and language barriers can create problems for people who wish to engage with healthcare services. Pharmacies employ staff from diverse backgrounds who may be able to speak multiple languages.

**Figure 4.8: Percentage of people that cannot speak English well or at all by ward in Westminster in 2011**



Source: PHE, 2016

**4.20** Arabic is by far the most common language after English, followed by French, Spanish, and Italian (Table 4.4).

**Table 4.4: Proportion of languages spoken in Westminster**

Languages spoken as a first language	
English	69%
Arabic	5.7%
French	3.0%
Spanish	2.2%
Italian	1.8%
Portuguese	1.7%
Bengali	1.4%
Greek	1.1%
German	1.1%
Russian	1.0%

Source: ONS, 2015

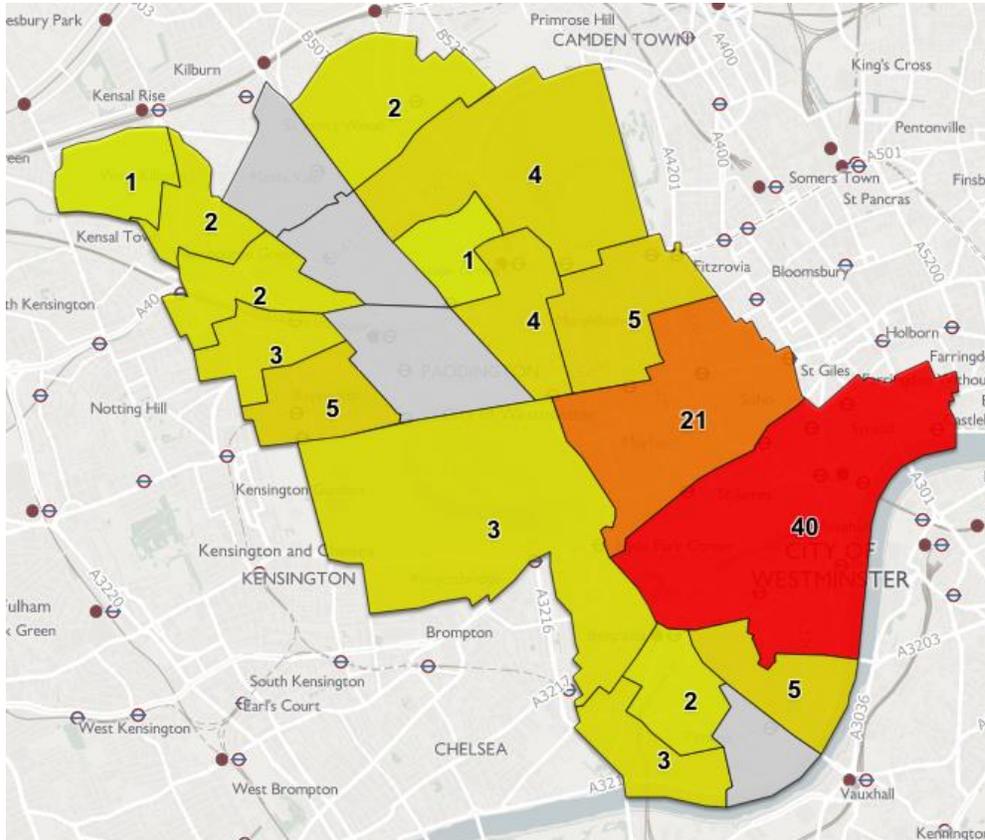
**4.21** Over half (52.6%) of the state school pupils' first language is not English.

### Population Increase

**4.22** There are quite a few proposed large-scale development sites in the borough, which will likely result in significant and concentrated increases in population if completed. At present, timescales for some developments are likely to be longer than the timescale of the 2018-2021 PNA.

**4.23** According to Greater London authority, there are 56 major and medium-sized construction sites have started construction while another 47 have obtained planning permission (Figure 4.9 and). A high majority of these are situated within St James's and West End. Table 4.5 outlines the number of units of all of the development sites that have acquired planning permission.

**Figure 4.9: Number of medium and large-scale housing development sites that have acquired planning permission in Westminster from October 2018**



Source: Local Government Association, 2017

**Table 4.5: Construction sites by number of units within each ward in Westminster**

Ward	Construction not started	Construction started	All developments
Abbey Road	101	204	305
Bayswater	60	67	127
Bryanstan and Dorset Square	214	141	355
Church Street	261	18	279
Churchill	395	570	965
Harrow Road	18	261	279
Hyde Park	288	942	1230
Knightsbridge and Belgravia	120	70	190
Lancaster Gate	217	145	362
Little Venice	48	693	741
Maida Vale	85	201	286
Marylebone High Street	304	407	711
Queen's Park	30	120	150
Regent's Park	153	133	286
St. James's	1486	1273	2759
Tachbrook	12	8	20
Vincent Square	483	443	926
Warwick	219	25	244
West End	1106	937	2043
Westbourne	214	68	282
<b>Total</b>	<b>6727</b>	<b>12540</b>	<b>19267</b>

Source: Westminster City Council, 2017

**4.24** There are currently no other known factors that could affect changes in the patterns of the population of Westminster or the patterns of social traffic.

**4.25** The population of the borough is expected to increase by 1.86% by 2021 to 246,091 residents. These figures are based on mid-year population estimates and assumptions such as future fertility, mortality and migration.

#### Changes in populations

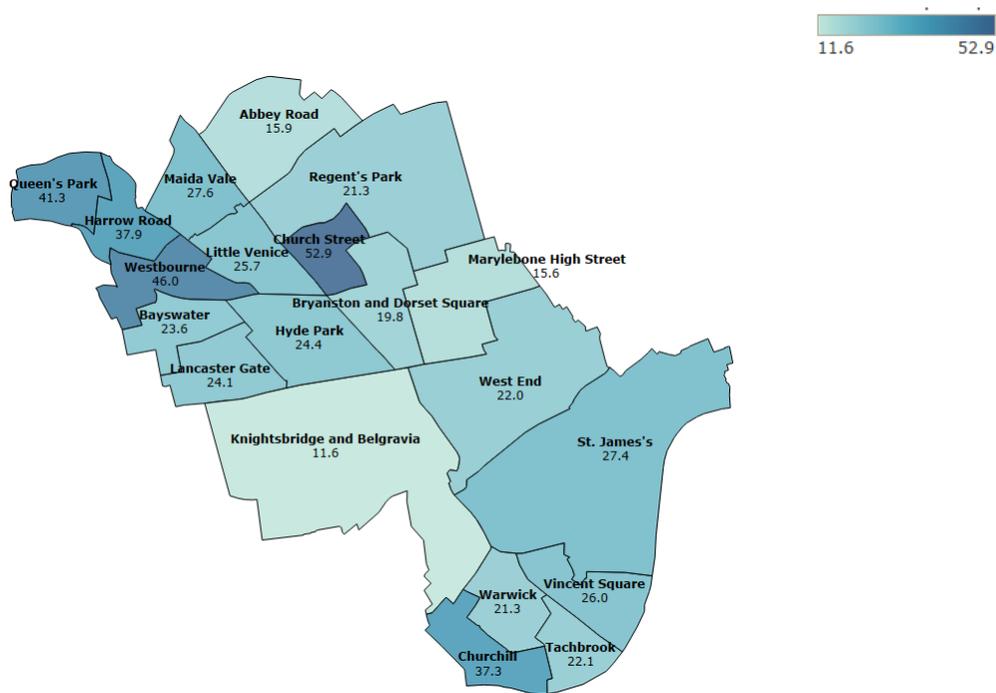
Population increases and new developments may increase demand on community pharmacy services, and different population groups will have different needs.

## Wider Determinants of Health and Inequalities

**4.26** There are a range of social, economic and environmental factors that impact on an individual's health behaviours, choices and goals and ultimately their health outcomes. These are outlined in Fair Society, Healthy Lives: The Marmot Review report and include life expectancy, healthy life expectancy, education, employment and fuel poverty to name a few, which we explore in this chapter.

- 4.27** The **Index of Multiple Deprivation** is a combined measure of deprivation based on a total of 37 separate indicators that encompass the wider determinants of health and reflect the different aspects of deprivation experienced by individuals living in an area. The 37 indicators fall under the following categories: Income Deprivation, Employment Deprivation, Health Deprivation and Disability, Education, Skills and Training Deprivation, Barriers to Housing and services, Living Environment Deprivation and Crime.
- 4.28** Figure 4.10 illustrates the vast differences between the wards of the borough. Church Street has the highest multiple deprivation scores while Knightsbridge and Belgravia have the lowest.

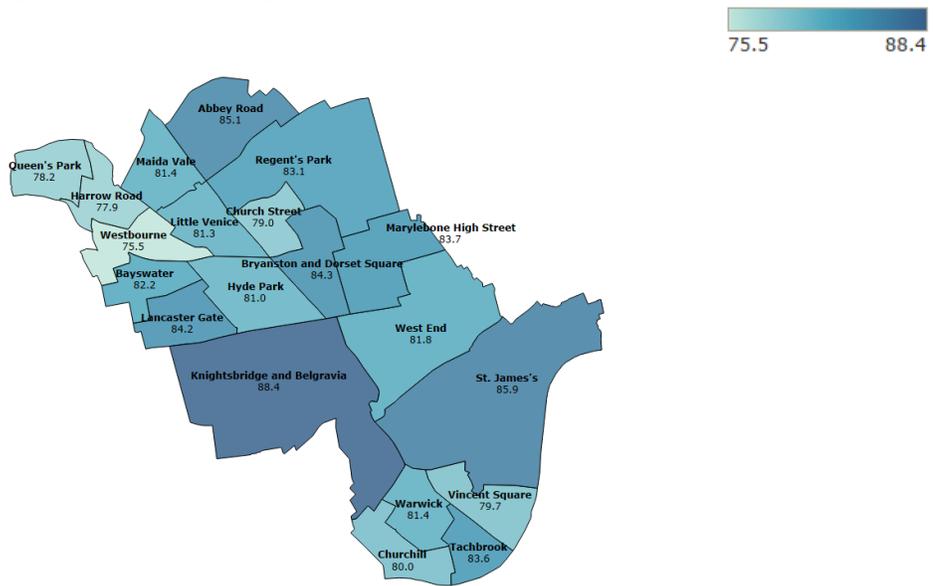
**Figure 4.10 The Index of Multiple Deprivation scores in Westminster by ward in 2015**



Source: PHE, 2016

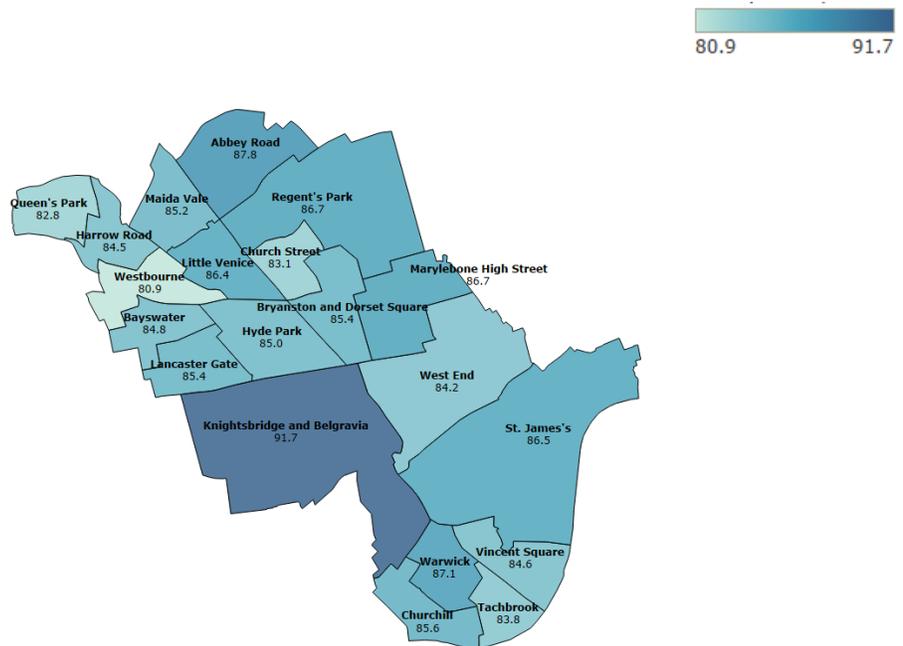
- 4.29** Life expectancy for males at birth in Westminster is 82.2, and 86 years for females. This is among the highest nationally and nearly three years higher than the national figures for **life expectancy**.
- 4.30** The **Slope Index of Inequality** measures the absolute difference in life expectancy between the most and least deprived areas. In Westminster there is a significant variation in life expectancy across the social gradient with an 11.3 year life expectancy gap for men and a 7.1 year gap for women between those who live in the most deprived areas and the least deprived areas.
- 4.31** Knightsbridge and Belgravia has the highest life expectancy and Westbourne has the lowest in the borough for both genders (see Figures 4.9 and 4.10).

Figure 4.9: Life expectancy at birth of Males by Ward in Westminster in 2015



Source: PHE 2016

Figure 4.10: Life expectancy at birth of Females by Ward in Westminster in 2015

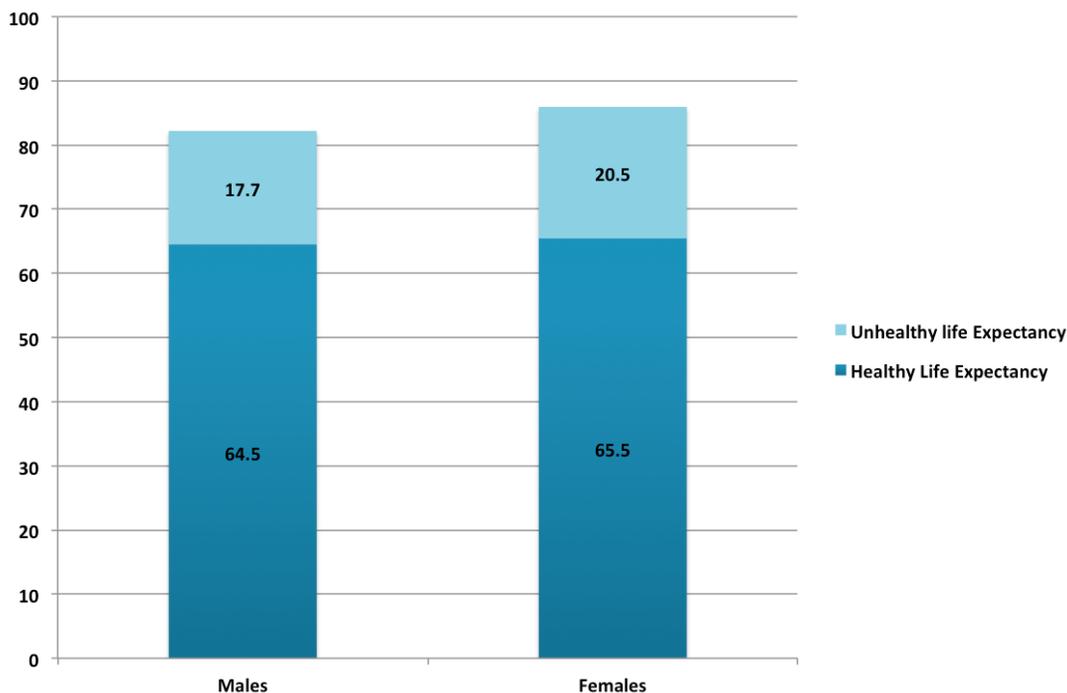


Source: PHE, 2016

**4.32 Healthy life expectancy at birth** is the average number of years an individual should expect to live in good health considering age-specific mortality rates and prevalence for good health for their area.

**4.33** The latest figures (2015) for residents in Westminster show that males have a healthy life expectancy at birth of 64.5 and females, 65.5 years. This is better than the England healthy life expectancy of 63.5 and 64.8 years respectively. These figures indicate that males living in Westminster could live with ill health for 17.7 years and females for 20.5 years (see figure 4.11).

**Figure 4.11 Life expectancy and Healthy life expectancy for Males and Females in Westminster in 2015**



Source: PHE, 2016

**4.34** Compared to the rest of England, Westminster has a low **dependency ratio** of 39.9%. A dependency ratio compares the estimated number of people who are less likely to be working (such as children and people of state pension age) with the number of people of working age. A low ratio indicates that the working population has fewer dependants. It is estimated that 60.7% of the national population are dependents.

**Pharmacy provision within deprived communities**

Access to community pharmacy services in the communities where there is high deprivation is important in addressing health inequalities.

This PNA will take into account whether the services provided by pharmacies are available in our most deprived communities and are sufficient to meet their local populations.

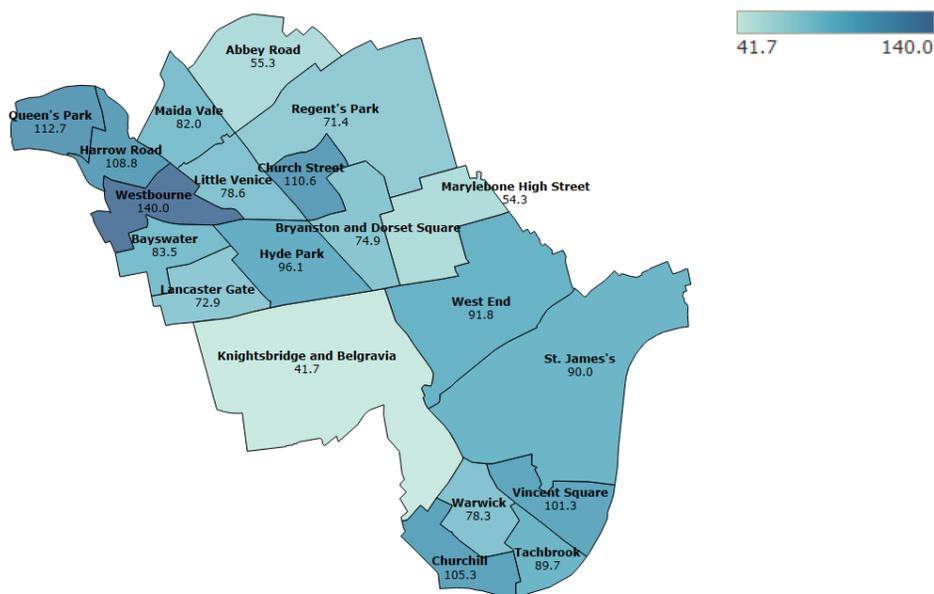
**4.35** 650 residents are **long-term unemployed**, this equates to 3.7% of the working-age population (based on 2016 figures), similar to national figures.

- 4.36 Nearly a third (32.2%) of under 16s, 8,465 children residing in Westminster are from **low-income families**. This is significantly higher than England here one fifth of children are from low-income families.
- 4.37 A higher rate of people living in Westminster experience **fuel poverty**, 12.9% of people did not have enough income to afford sufficient fuel in 2014, higher than the national rate of 10.6% and an increase from 9.9% from the previous year.

### Premature Mortality

- 4.38 The **standardised mortality ratio** is a good indicator for the effect of the prevalence of risk factors, prevalence and severity of disease, and the effectiveness of interventions and treatment. The differences of early mortality rates in different areas can reveal where focus is needed to reduce variation in life expectancy and health inequalities.
- 4.39 Figure 4.12 presents the standardised mortality ratio for deaths from all causes aged under 75, otherwise known as premature mortality. This measure is used to identify deaths usually considered 'avoidable'. Premature mortality is higher in the north of the borough, among the more deprived wards.

Figure 4.12 Standardised mortality ratio 2010-2014 by Ward in Westminster in 2015



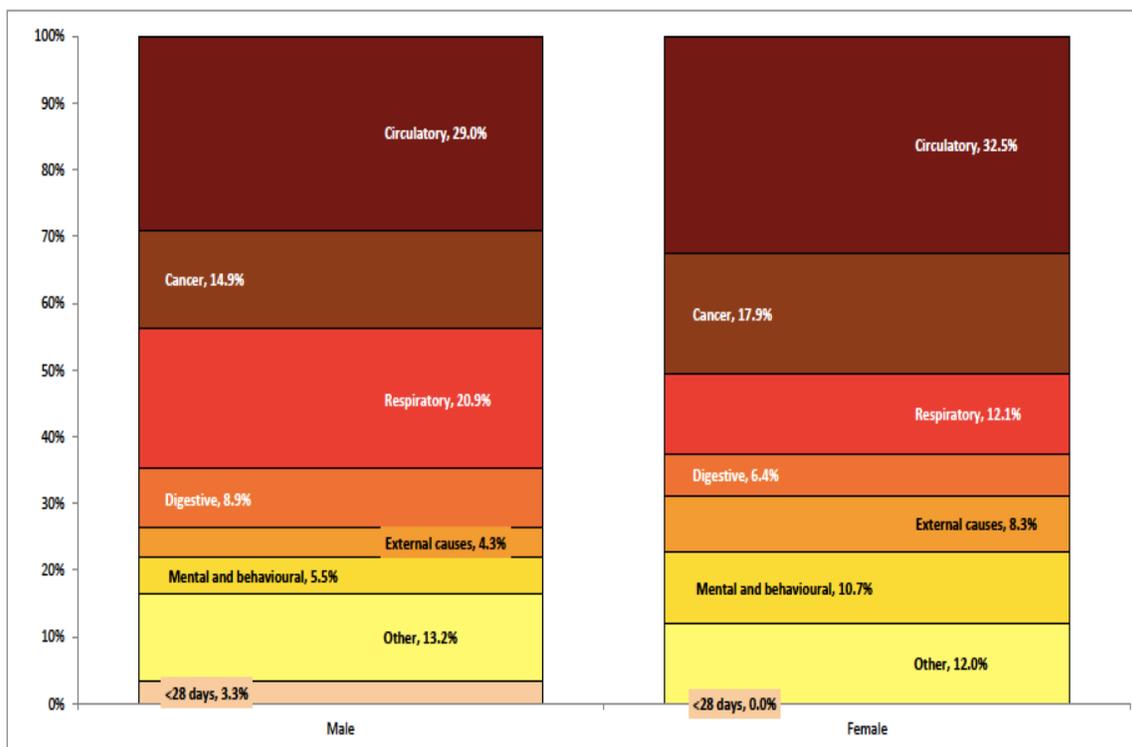
Source: PHE, 2016

- 4.40 A closer look at where the causes of the **life expectancy gap** lie show that circulatory diseases such as coronary heart disease and stroke are the biggest cause of the differences in life expectancy in Males. They account for 29% of the life expectancy gap between the most deprived quintile and least deprived quintile in the borough. Following that is digestive disease

(which includes alcohol related conditions such as chronic liver disease and cirrhosis) that accounts for 20.9% of the gap and cancer that accounts for 14.9% of the gap.

**4.41** Circulatory diseases are also the biggest cause of the differences in life expectancy between deprivation quintiles in women, accounting for 32.5%. Cancer accounts for 17.9% of the life expectancy gap followed by respiratory diseases at 12.1%. Figure 4.13 presents the differences in life expectancy by cause between the most deprived and the least deprived quintiles of the borough.

**Figure 4.13: Life expectancy gap between the most deprived quintile and the least deprived quintile for Westminster by broad cause of death, 2012-2014**



Source: PHE, 2016

### Medicine Use Reviews and the New Medicine Service

Many long-term conditions such as circulatory or respiratory diseases and cancers, are managed with medication. Pharmacy services play an important part of the long-term conditions pathway by ensuring that medicines are used effectively and safely and therefore improving outcomes for patients.

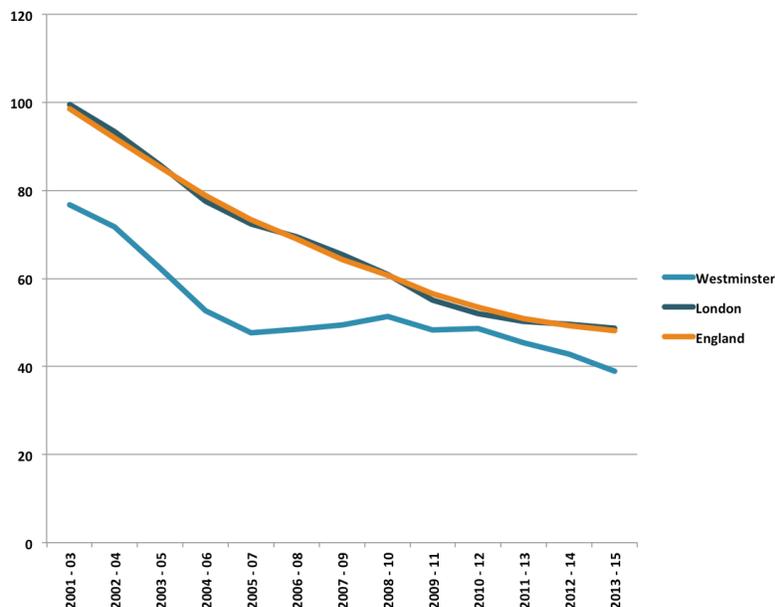
Pharmacies can support patients, clinicians and carers to achieve the maximum benefit from medicines whilst reducing the risks associated with treatment.

Targeted Medicine Use Reviews and the New Medicine Service can encourage patients to adhere to their prescribed regimen, help to manage medicines related risks and reduce re-admissions to hospital. It is recommended that patients with long-term conditions with multiple medicines should be reviewed at regular intervals.

### Circulatory Diseases

- 4.42** The borough's premature death rate from **cardio-vascular disease** considered preventable is the 4th lowest in London. In Westminster, 91 people or 27.2 per 100,000 residents die from CVD considered preventable. This is substantially lower than London and England rates of 48.7 and 48.1 deaths per 100,000 population respectively.
- 4.43** These rates have been lower than London and England since 2001 and have been reducing over the years (see Figure 4.14) and this is likely due more timely high quality treatment, effective prescribing, and a reduction in the number of smokers.

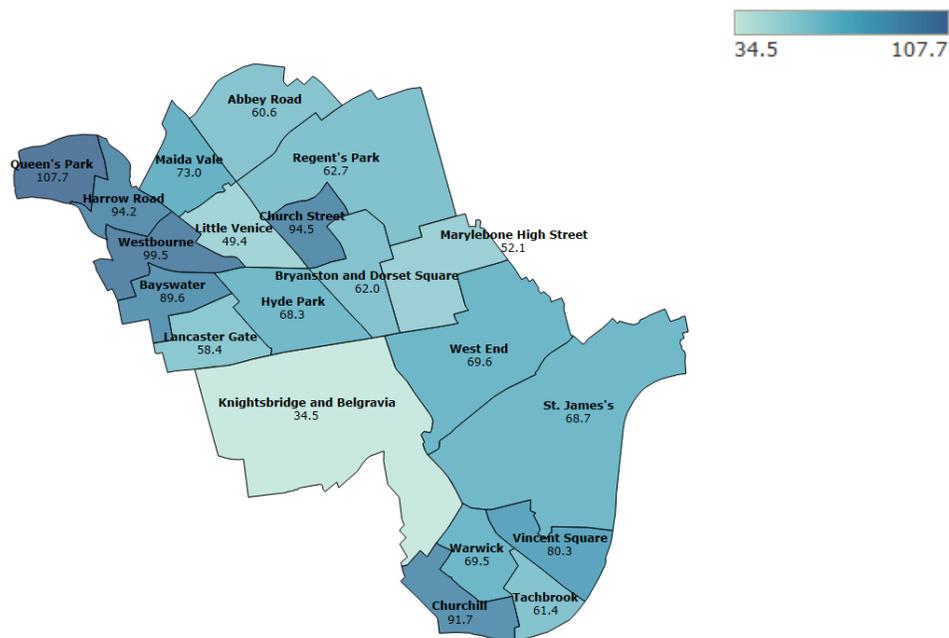
**Figure 4.14: Under 75 mortality rate per 100,000 from cardiovascular disease for Westminster, London and England from 2001 to 2015**



Source: PHE, 2016

4.44 Currently, the under 75-mortality rate consider preventable and non-preventable is highest in the boroughs where deprivation is highest. These include Queen’s Park, Westbourne, Church Street and Churchill.

Figure 4.15: Under 75 mortality rate from circulatory disease by ward in Westminster, London and England from 2013 to 2015



Source: PHE, 2016

4.45 Currently 27.8 per 100,000 residents of the borough die prematurely each year from **coronary heart disease** and 15.5 people per 100,000 die of a stroke. These rates are relatively similar to national figures.

### Respiratory Diseases

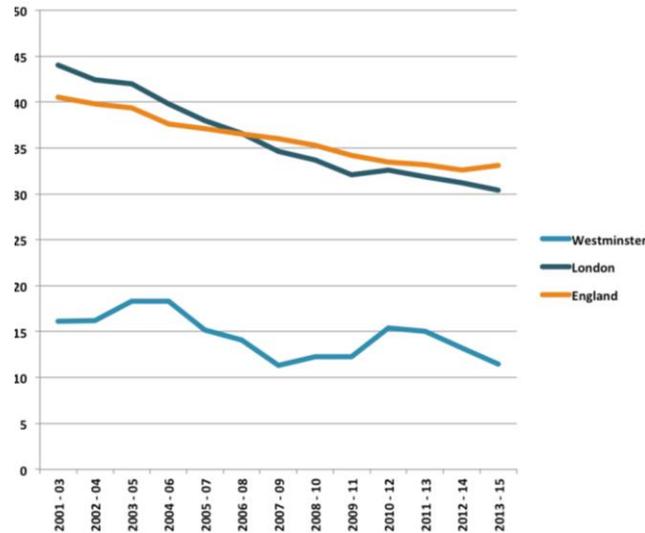
4.46 Westminster has a substantially lower death rate caused by **respiratory diseases** considered preventable. 11.5 per 100,000 residents die each year from preventable respiratory disease.

4.47 The rates of deaths by respiratory disease considered preventable have reduced in the last few years and remained lower than regional and national figures since 2001.

### NHS Health Checks

Pharmacies may provide NHS Health Checks for people aged 40-74 years. This includes providing a full vascular risk assessment and along with advice and support to help reduce the risk of heart disease, strokes, diabetes and obesity.

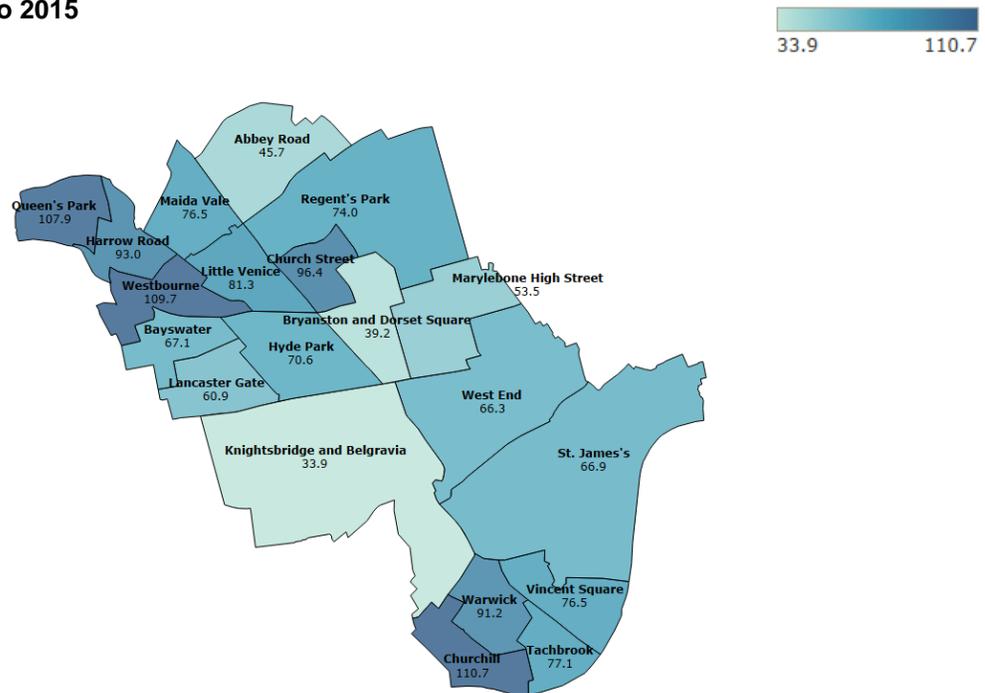
**Figure 4.16: Under 75 mortality rate from respiratory disease for Westminster, London and England from 2001 to 2015**



Source: PHE, 2016

**4.48** The Under 75 mortality rate from respiratory disease including those considered preventable and not preventable is higher in the wards where deprivations is highest, i.e. Westbourne, Churchill, Church Street and Queens Park (see Figure 4.17).

**Figure 4.17: Under 75 mortality rate from respiratory disease by ward in Westminster, London and England from 2013 to 2015**



Source: PHE, 2016

**4.49 Chronic Obstructive Pulmonary Disease (COPD)** is a highly preventable cause of morbidity and mortality that sits within respiratory diseases. Prevalence rates and hospital admission rates for COPD in Westminster are similar to that of London and lower than England.

**4.50 Tuberculosis** is on the decline in Westminster. Westminster CCG recorded a three-year crude rate of 17.5 per 100,000 population diagnosed with TB. This is lower than the rest of London (30.4 per 100,000 population).

### Cancer

**4.51** The overall prevalence of all **cancers** is 1.7% for Central London CCG. This is similar to the sub-regional figure of 1.7% and lower than the national figure of 2.4%. This may be a reflection of poor early diagnosis of cancer where chances of survival much poorer in areas of deprivation.

**4.52** NHS Central London CCG **screening** coverage is low compared to the rest of London. It is the poorest performing CCG for breast, bowel and cervical cancer screening coverage. Population diversity, migration and high use of private services create a constant challenge to improvement.

**4.53** Despite this the premature mortality rate for cancer, i.e. under 75 years, is low when compared with regional and national figures. Currently 107.2 per 100,000 residents of the borough die prematurely each year from cancer, compared with 129.7 for London and 138.8 for England. This is the 2nd lowest figure of the London boroughs. Premature mortality has been substantially lower than England and London overall since 2001 (see Figure 4.18).

#### Early detection and diagnosis of cancers

Pharmacists can play an important role in the early detection and diagnosis of cancer.

Raising awareness and talking to patients about signs and symptoms of different cancers can result in earlier diagnosis and therefore better treatment options for patients.

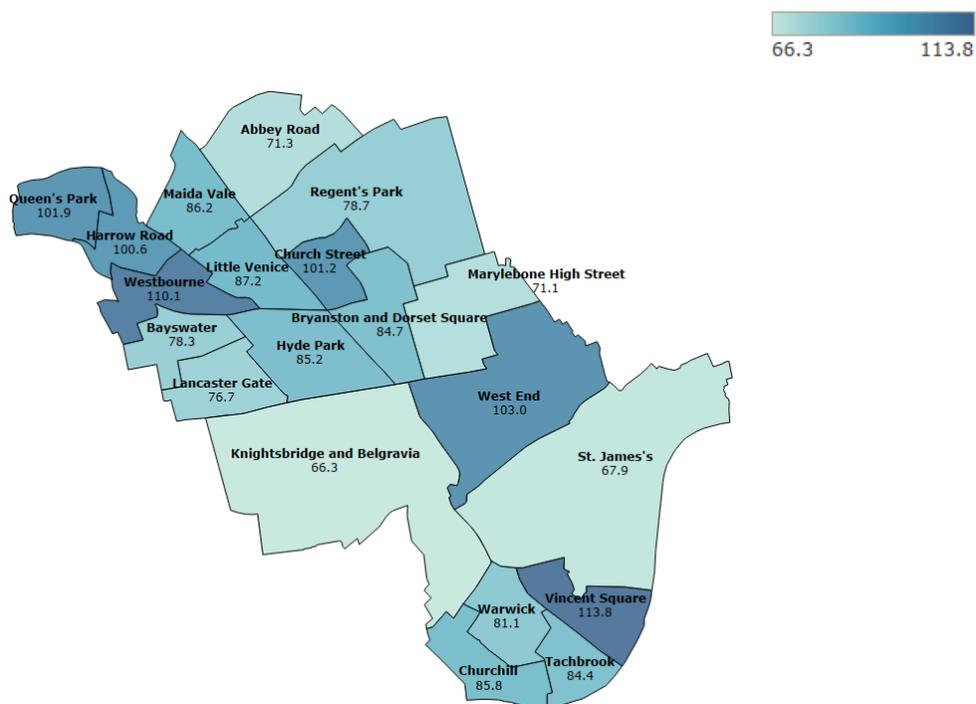
**Figure 4.18: Under 75 mortality rate from cancer for Westminster, London and England from 2001 to 2015**



Source: PHE, 2016

4.54 Standardised mortality by cancer is highest within the more deprived wards of the borough, specifically Westbourne and Church Street (see Figure 4.19).

Figure 4.19: Under 75 mortality rate from cancer by ward in Westminster, London and England from 2013 to 2015



Source: PHE, 2016

## Risk Factors for Mortality and Morbidity

### Risk Factors in Adults

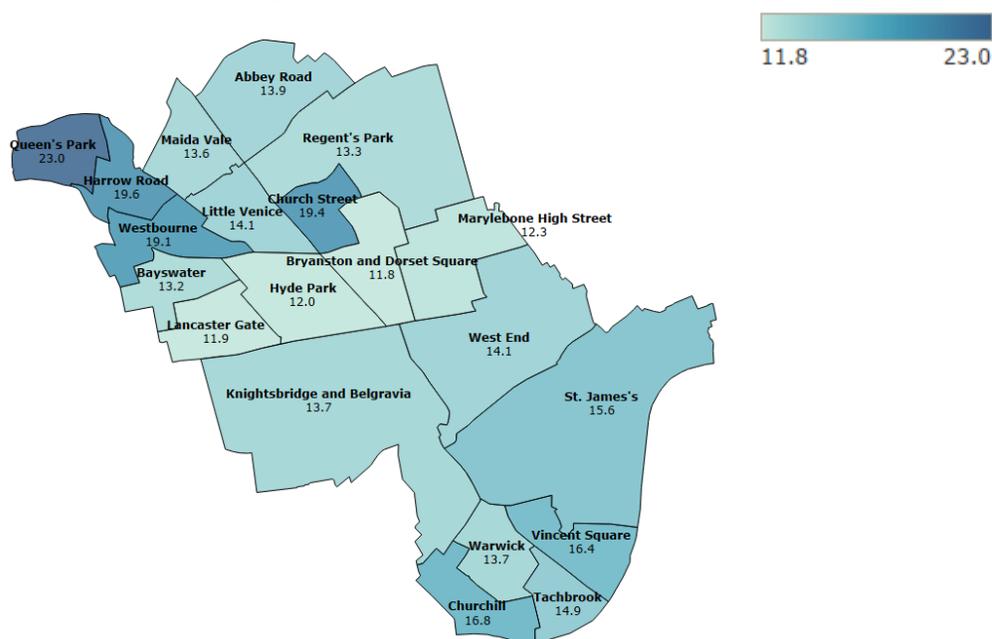
4.55 **Smoking** is the leading cause for preventable death in the world. 18% of adults surveyed in Westminster smoke. This is a higher rate than for London and England.

#### Stop Smoking Services

Pharmacies may provide proactive promotion of smoking cessation through to provision of full NHS stop smoking programme.

4.56 Over half (54.5%) of adults are **overweight or obese** in Westminster, this is lower than regional and national figures. Obesity is recognised as a major determinant of premature mortality and avoidable ill health. There are marked differences in levels of obesity between wards in the borough, 11.8% of adults are obese in Bryanstown and Dorset Square, whereas Queens Park has more than double the rate at 23%.

Figure 4.20: % of adults who are obese by ward in Westminster in 2015



Source: PHE, 2016

4.57 Over one fifth (22.2%) of adults residing in the borough are considered **physically inactive**, meaning they engage in less than 30 minutes of moderate physical activity per week. This is similar to London levels. People who are physically inactive increase their chances of cardiovascular disease, coronary heart disease and stroke. People who have a physically active lifestyle reduce their risk of obesity, diabetes, osteoporosis and some cancers and improved mental health.

#### Weight Management Services

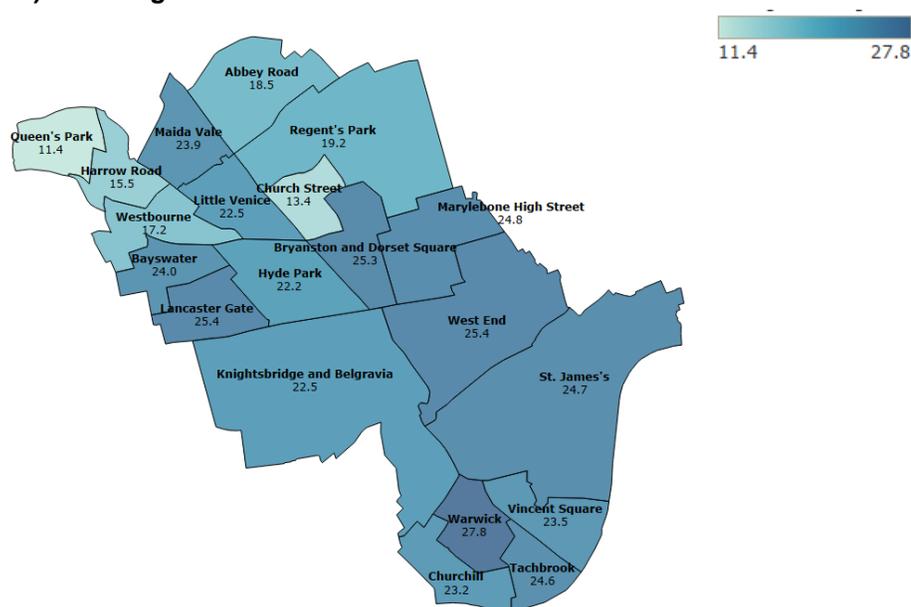
Pharmacies can provide services that can promote healthy eating and physical activity, weight management services for adults or brief interventions.

4.58 **Alcohol consumption** contributes to morbidity and mortality from a diverse range of conditions. 36.1 per 100,000 deaths are alcohol-related and 501 Westminster per 100,000 residents were admitted to hospital in 2015/16, lower than regional and national figures. Modelled estimates show that binge drinking is highest in Warwick, Lancaster Gate and Bryanstown and Dorset Square (see figure 4.16).

#### Alcohol Misuse Services

Pharmacies may provide Alcohol misuse services that include proactive brief interventions and advice on alcohol with referrals to specialist services for problem drinkers.

Figure 4.16: % of adults (16+) who binge drink in Westminster in 2015



Source: PHE, 2016

4.59 There are currently 1,445 residents in Westminster diagnosed with **HIV**, the 5th highest rate aged 15-59 in the region. A quarter (25.9%) of cases in 2014-16 were diagnosed late, compared to the London average of 33.7%. Late diagnosis carries with it an increased risk of poor health and death and it increases the chances of onward transmission.

#### Sexual Health Services

Pharmacies can provide Sexual health services such as emergency hormonal contraception services; condom distribution; pregnancy testing and advice; chlamydia screening and treatment; other sexual health screening, including syphilis, HIV and

4.60 Of those who are tested for **Sexually Transmitted Infections (STIs)**, 5.4% tested positively for an infection (excluding chlamydia) in Westminster, the third highest rate in London. Rates of Chlamydia among 15-24 year olds are less high but still slightly above the national average.

4.61 One-fifth (21.5%) of those registered with a GP in Westminster have a **common mental illness**, this is the highest rate in London (16.4%) and England (15.6%). The high rate is likely due to good identification and reporting by GPs in the borough.

#### Medicine adherence

Medicines are a key component of mental health care and pharmacists have the expertise required to improve adherence to medication support the reduction of inappropriate use of medicines.

4.62 Westminster has the 4th highest percentage (1.34) of people registered with a GP who are known to have a **severe mental illness**, markedly higher than London (1.03%) and England (0.83%).

## Risk Factors in Older Adults

**4.63** The proportion of older population is rising and older people are the biggest and costliest users of healthcare. The biggest costs are for those with complex needs, long-term conditions, and functional, sensory or cognitive impairment including Dementia.

**4.64** **Health-related quality of life** gives an indication of levels of good health, wellbeing and independence. This is measured using a health status score in the over 65s and looks at Mobility, Self-care, Usual activities, Pain / discomfort and Anxiety / depression. In Westminster the average score is 0.741, close to the national norm of 0.733.

**4.65** **Loneliness and isolation** of older people is a risk factor for ill-health and premature mortality. People who are lonely and social-isolated are more likely to need healthcare resources and long-term care. Nearly half (45.3%) of Westminster's older generation (65+) are living alone and are at risk of loneliness and isolation.

**4.66** The number of people living with **dementia** is increasing. Approximately 1300 people (5% of over 65s) are living with dementia in Westminster today, half of whom are over 85 years of age. This is predicted to rise to 2320 by year 2025. This can have an impact on levels of paid and unpaid health and care provision.

### Dementia Friendly pharmacies

Pharmacies can be a very important place that people living with dementia need to access. Dementia friendly pharmacies can support people living with dementia to feel confident and empowered to do things that they have always been able to do such as collecting a prescription.

**4.67** **Falls** are the largest cause of emergency hospital admissions and a major cause of loss of independence, disability or death in older people. 2,214 per 100,000 emergency admissions for the over 65s were due to falls in 2015/16 in Westminster, lower than London overall and similar to national rates.

### Falls Prevention

Pharmacy services can support people to manage their medicines and signpost them to services that can assist them to live independently, prevent falls thereby prevent hospital admissions.

## Risk Factors in Children and Young People

**4.68** The younger working population are usually considered to be low users of the healthcare system. However, pharmacies may provide enhanced services such as immunisations, minor ailment services and sexual health services which may be more accessible than GPs and secondary care and also reduce the demand on these services.

**4.69** Just over one in ten (11.6%) of 15 year olds with a **long-term illness, disability or medical condition** diagnosed by a doctor in London. Young people from the more deprived areas are more likely to report poor health and this can have a significant impact on overall life chances.

**4.70** There were 34 **under 18 conceptions** in the borough in 2015, this is slightly lower than our regional and national comparators. Teenage mothers nationally are three times as likely to suffer from post-natal depression, are less likely to breastfeed and more likely to smoke.

**4.71** Based on the 2015/16 latest **GCSE figures** pupils in Westminster are doing well. 63.6% of pupils achieved 5A\*-C GCSEs, this is a small decline from the previous year and yet significantly better than the national percentage of 57.8%.

**4.72** **Childhood obesity** is on the rise and can have significant impact on health outcomes. A child who is overweight or obese can have increased blood lipids, glucose intolerance, Type 2 diabetes, hypertension, increases in liver enzymes associated with fatty liver, exacerbation of conditions such as asthma and psychological problems such as social isolation, low self-esteem, teasing and bullying.

**4.73** Nearly one-quarter of Reception age children (23.7%) and two out of every five (39.7%) Year 6 children are overweight or obese, this is higher than regional and national figures.

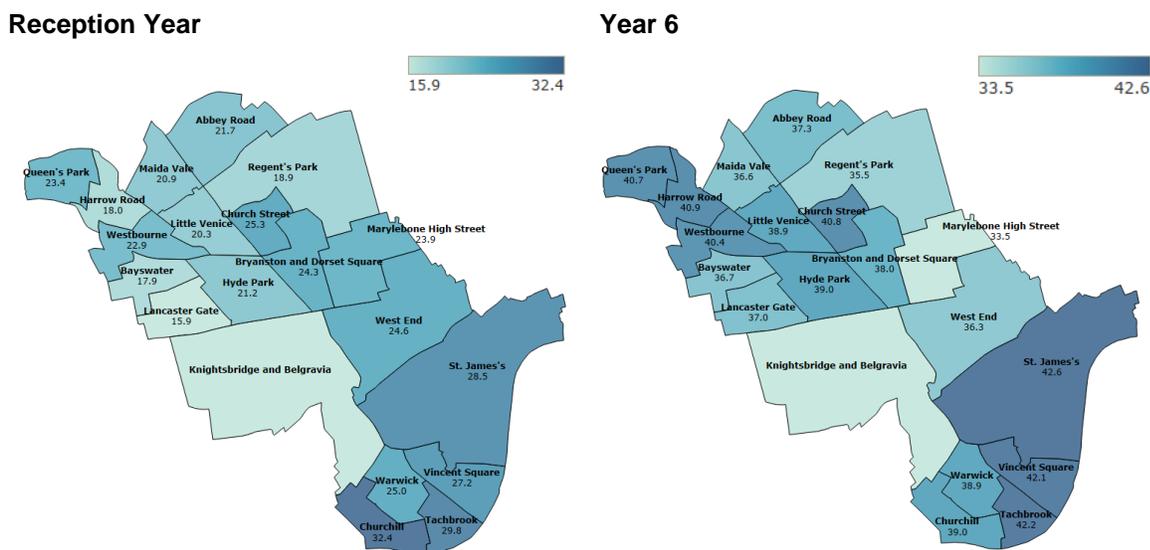
**4.74** Churchill and Tachbrook wards have the highest rates of overweight and obesity in Reception age children and St James's, Tachbrook and Vincent Square have the highest rates of excess weight in Year 6 children the borough (see Figure 4.17).

**Health Champions and Health Trainers**

The 'walk-in' nature of pharmacies mean that they are ideally placed to offer opportunistic screening and brief interventions for a better health and wellbeing. People can be supported to make positive health behaviour changes on topics such as smoking, alcohol, weight management, sexual health, physical activity and mental health.

Healthy Champions and Health Trainers situated within pharmacies in areas of high deprivation and can bridge the gap between healthcare and the community and voluntary services that can support it.

**Figure 4.17: % of children who are overweight or obese in Reception and Year 6 by ward in Westminster**



Source: PHE, 2016

**4.75 Dental decay** is a highly preventable disease, caused by a high-sugar diet. Over a third (35.1%) of children have decayed, missing or filled teeth in Westminster, this is substantially worse than regional than national figures.

#### **Dental Health Promotion**

Due to the frequency of their contact with the public and in promoting health and wellbeing, pharmacists can be effective in raising awareness of oral health.

**4.76 Vaccinations** help prevent serious illness in children, especially potentially severe disease such as meningitis, whooping cough, and tetanus. Yet Westminster has poorer coverage rates than the rest of England in all childhood vaccinations for which there is data.

#### **Vaccinations**

Due to better flexibility of opening hours and convenient locations, pharmacies can improve uptake of some vaccinations.

**4.77 Substance misuse** in young people is linked to mental health issues such as depression, disruptive behaviour and suicide. It is also linked to adverse experiences and behaviours such as truancy, exclusion from school, homelessness, time and care and serious or frequent offending. 54.3 per 100,000 hospital admissions for 15-24 year olds in Westminster (2013/14 to 2015/16) are due to substance misuse, this is lower than England figures.

#### **Substance misuse services**

Pharmacies can increase accessibility to a range of substance misuse services including needle and syringe services; supervised consumption of medicines to treat addiction, e.g. methadone; hepatitis testing and hepatitis B and C vaccination; HIV testing; provision of naloxone to drug users for use in emergency overdose situations.

## Summary of Demographics and Health Needs of Westminster

The City of Westminster is situated in the heart of London. It is a densely populated borough with a daytime population nearly four times the size of the resident population, likely a result of tourism and people who commute to work. The population is expected to rise substantially in the coming years.

Westminster has a large proportion of young working age residents and comparatively fewer children. The average age is 37.7 years.

Nearly half of the population was born abroad and nearly one-third identify as being from Black or Minority Ethnic groups, the highest proportion of whom live in Church Street ward.

There are vast differences inequalities in deprivation and life expectancy. Church Street and Westbourne have the highest levels of deprivation and the lowest life expectancy, whereas deprivation levels are markedly lower in Knightsbridge and Belgravia and Marylebone High Street, where life expectancy is highest.

Circulatory diseases, cancers and respiratory diseases are the biggest causes in the differences in life expectancy. Overall mortality rates for these diseases have been declining in the last five years. Premature mortality is highest in Westbourne, Queen's Park and Church Street.

Although smoking rates are declining through the years, 18% of adults in Westminster smoke, this figure is higher than regional and national figures.

Overall the proportion of adults who are overweight or obese is lower than regional and national figures, however obesity figures are markedly different between wards. Nearly one-quarter of adults residing in Queens Park are obese.

Rates of excess weight in children are very high, particularly in Year 6 pupils residing in St James's, Tachbrook and Vincent Square. The proportion of children who have dental decay is also high and the coverage of Vaccinations in children are low.

The proportion of adults who are diagnosed with a mental illness are high in comparison to London and England, this may be a result of successful efforts by GPs to identify mental illness.

Rates of STIs including chlamydia and HIV are also high and an area of concern.

# Chapter 5 - Patient and Public Engagement and the Protected Characteristics

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- 5.1 This section discusses the results of the patient and public engagement that was carried out from September to October 2017. We also examine the health needs specific to protected characteristics and vulnerable groups that we have engaged during this process and the implications they may have on the PNA.
- 5.2 A “protected characteristic” means a characteristic listed in section 149(7) of the Equality Act 2010. There are also certain vulnerable groups that experience a higher risk of poverty and social exclusion than the general population. These groups often face difficulties that can lead to further social exclusion, such as low levels of education and unemployment or underemployment.
- 5.3 A community questionnaire was used to engage with residents to understand their use and experience of local pharmacies. The PNA task and finish group and the communications team of the City of Westminster approved this questionnaire for use with the local population. This questionnaire is available as Appendix B.
- 5.4 The engagement plan and methods of dissemination of the survey are referenced in Appendix C. Additionally we conducted outreach in four community pharmacies, some of which were located in the more deprived wards of the borough. Adult services also supported residents in their sheltered schemes to fill out these community questionnaires.
- 5.5 We engaged with about 211 residents in Westminster during the drafting of this needs assessment and its consultation. Paper copies and an online version were used for the purposes of this engagement. Eighteen questionnaires could not be used as the information provided was insufficient for analysis.

## **Community Pharmacy Questionnaire Response**

- 5.6 A total of 193 usable questionnaires were collected between 23<sup>rd</sup> September 2017 and 20<sup>th</sup> October 2017. A small number of respondents declined to answer some equal opportunities monitoring questions.
- 5.7 The two main sources of questionnaires in this sample were those returned by Adult services which were completed by their service users (74) and about 60 that were collected through outreach at community pharmacies in Queen’s Park, Harrow Road and Church Street wards. We were unable to secure outreach in South Westminster pharmacies. Community and

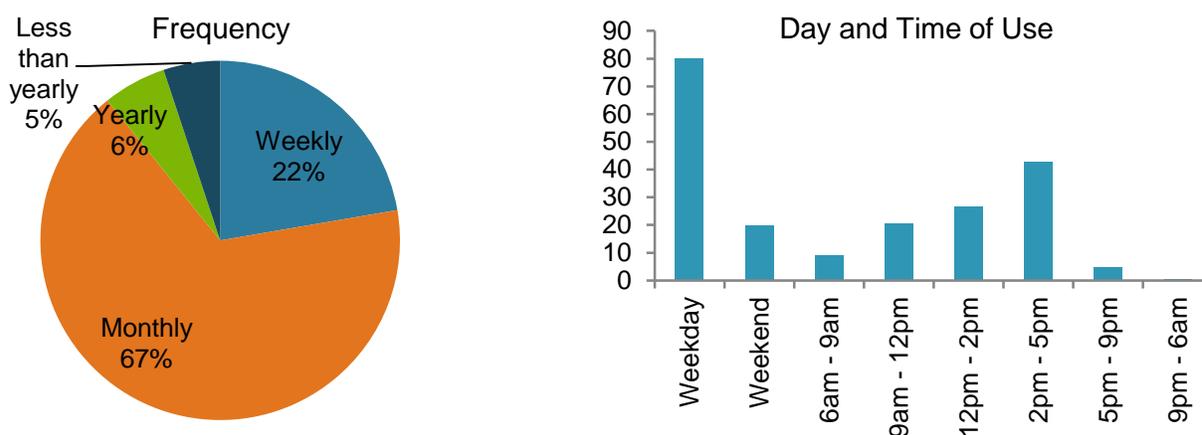
Maternity Champions in Westminster encouraged their teams and service users to complete the questionnaires and we were able to engage with local residents in Westbourne Ward at an event at the Stowe Centre organised by Westbourne community champions. In addition to this online questionnaire links were disseminated through several newsletters and mailing lists.

## Results of the Community Pharmacy Questionnaire

### Use of Pharmacies

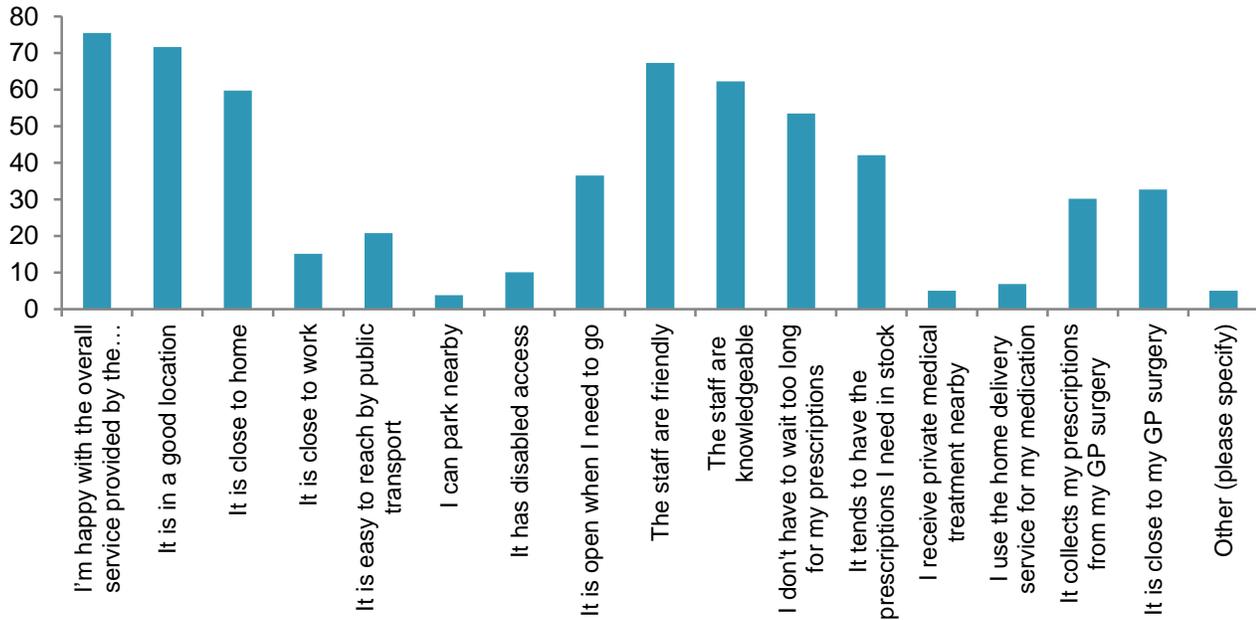
**5.8 Times and frequency** of pharmacy use was explored. 67% of the sample population visit a pharmacy monthly and 22% weekly. 80% of them used the pharmacy on weekdays and 43% visit the pharmacy between 2-5 pm (see Figure 5.1).

**Figure 5.1: Times and frequency of use of Westminster pharmacies**



**5.9** 75% of the sample population were happy with the overall service they received from the pharmacies. Friendly staff was the main reason respondents use a pharmacy. Good location was the second most important factor for people choosing a particular pharmacy. Other reasons why people chose to use their pharmacy included friendly and knowledgeable staff, closeness to home and not having to wait too long for their prescriptions (see Figure 5.2).

**Figure 5.2: Reasons why people use their pharmacy most often**



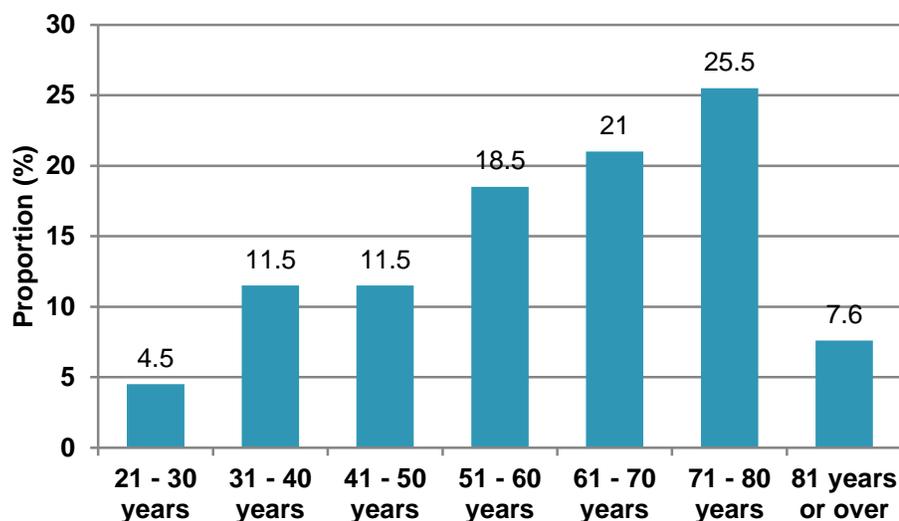
- 5.10 The **feedback** in the open text boxes was mainly positive with respondents saying they were generally happy with the services being provided and they found the staff quite friendly and helpful.
- 5.11 The **top three pharmacy services** used by respondents were obtaining prescription medication, repeat prescriptions, and obtaining over the counter medication.
- 5.12 The top three services respondents would use if provided were home delivery and prescription collection service, health checks including blood glucose, cholesterol, blood pressure and BMI (height and weight), and blood pressure measurement service.
- 5.13 Suggestions for improvement were mainly around longer opening hours and pharmacies being open on Sunday. A few respondents mentioned that it would be good to have basic blood tests and scans/x-rays at their local pharmacies.

## Protected Characteristics

### Age

- 5.14** The current age profile and projections of the borough are discussed in the chapter on population statistics.
- 5.15** Pharmacies provide essential services to all age groups such as dispensing, promotion of healthy lifestyles and signposting patients to other healthcare providers. Pharmacies providing services to vulnerable adults and children are required to be aware of the safeguarding guidance and local safeguarding arrangements.
- 5.16** The single biggest age group in the sample population were the 71-80 year olds at 25%, followed by the 61-70 year olds at 21%. This is probably explained by the high number of returns from adult services and the sheltered residential schemes (see Figure 5.3).

**Figure 5.3: Age profile of survey respondents**

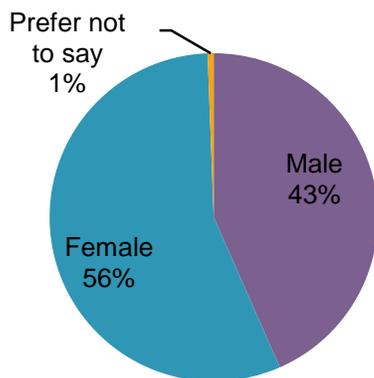


- 5.17** The use of pharmacies by the over 60s is similar to those of the other age groups, except that they use pharmacies more frequently.
- 5.18** Based on the sample that we surveyed, we did not identify any gaps in access to the provision of pharmaceutical services based on age.

### Gender and gender reassignment

- 5.19** 108 of our respondents were female, 85 were male and two respondents did not disclose their gender. Gender reassignment was not captured on the questionnaire (Figure 5.4).

**Figure 5.4: Breakdown survey respondents by Gender**

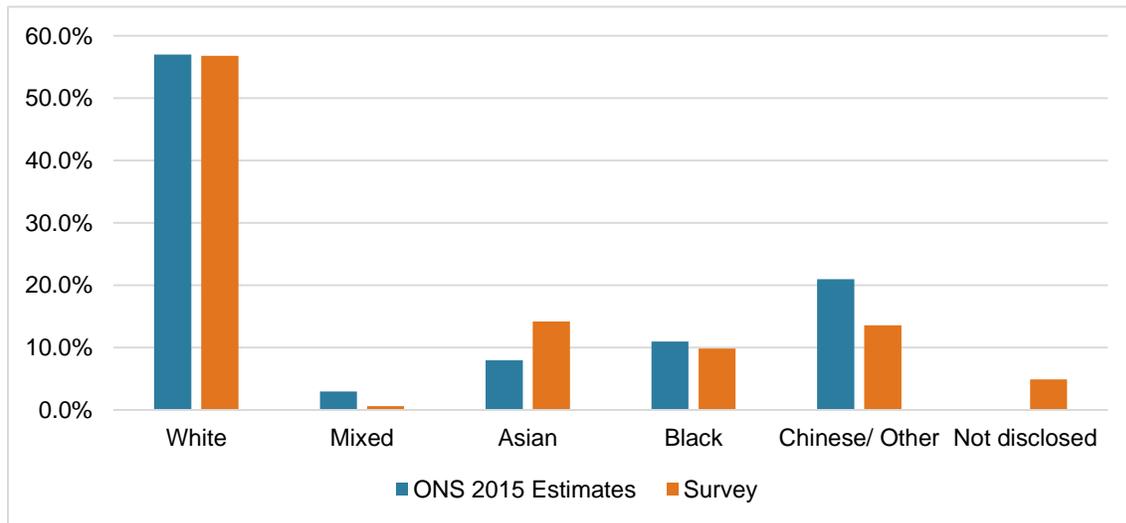


- 5.20** As compared to women, more men in our sample use the pharmacy weekly. Men tend to use the pharmacy mainly for themselves, but a greater percentage of women use the pharmacy for their children, spouses and parents.
- 5.21** Other than that, the use and experience of pharmacies across genders was quite similar. Both men and women were satisfied with the overall service provided and good location was important to them when choosing their pharmacy.
- 5.22** Based on the sample that we surveyed, we did not identify any gaps in access to the provision of pharmaceutical services based on gender.

### **Ethnicity**

- 5.23** The ethnicity breakdown of the sample population was not very different from the general population in the borough, making the sample quite representative in this aspect (see Figure 5.5).
- 5.24** Ninety-two of the respondents identified as White and 62 respondents identified as belonging to Black and other ethnic minority groups. White English was the single largest ethnic group followed by Asian.

**Figure 5.5: Comparison of breakdown of Ethnicity between ONS mid-year estimates and Patient and Public Survey respondents**



**5.25** Within the sample population it was noted that respondents from BME groups were more likely to use the pharmacies for their spouses, children or parents when compared to those from White ethnic groups. Other than that, the use and experience of pharmacies did not differ between ethnic groups.

**5.26** The questionnaire responses have not identified any gaps in access to the provision of pharmaceutical services to the different ethnic groups.

### Religion and Belief

**5.27** The City of Westminster has a diverse population as noted in previous chapters and multiple religions are practiced within the borough. Of those who responded, eighty-five respondents identified as Christian, 35 as Muslim and 19 as having no religion (see Figure 5.6). A small number of respondents identified as either Sikh, Jewish, Hindu or Buddhist.

**5.28** No differences were noted in the experience and use of the pharmacies based on religion and belief and no gaps have been identified in the provision of services with respect to faith or belief.

### Employment Status

**5.29** Eighty-four respondents were retired, 50 employed (either part or full time), 34 unemployed and two were students.

**5.30** Employed respondents use the pharmacies on the weekend more than those who are unemployed or retired. Other than that, no significant differences are noted in the use and overall experience of local pharmacies.

5.31 Retired respondents are overall quite happy with the services being provided and are less likely to want new services. Other than that no significant differences were noted and no gaps in the provision of pharmacy services were identified.

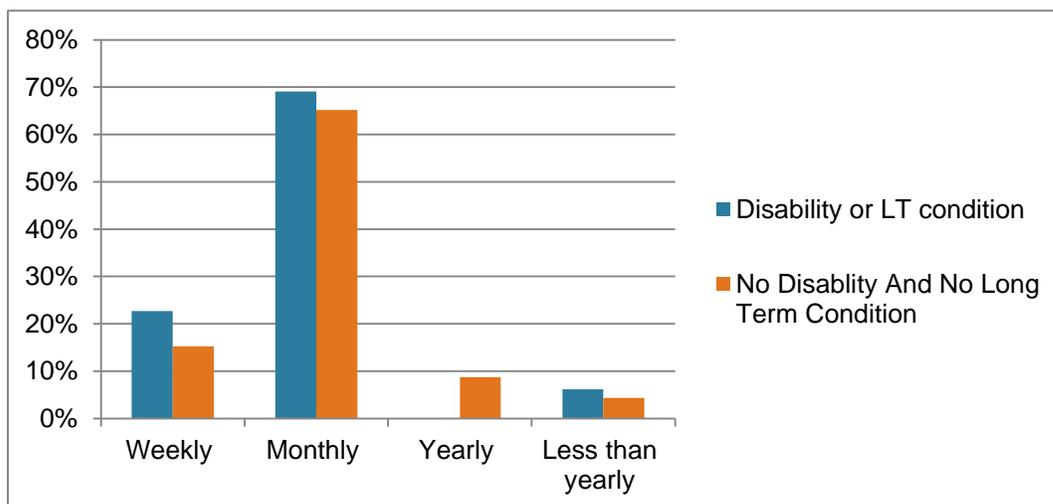
### Disability and Long-Term Conditions

5.32 All pharmacies must comply with the Disability Discrimination Act 1995 (now superseded by the Equality Act 2010). Pharmacy contractors may have assessed the extent to which it would be appropriate to install hearing loops, or provide access ramps wide aisles to allow wheelchair access. Accessible information formats are alternatives to printed information, used by blind and partially sighted people, or others with a print impairment.

5.33 Fifty-seven identified as having a disability and 94 said they had a long-term condition. Fifty-four said they had both a long-term condition and a disability. Types of disability listed by participants ranged from those impacting on mobility such as osteoarthritis and stroke to sensory impairments and mental health disorders such as bipolar. In terms of long-term conditions, ten respondents mentioned diabetes as a stand alone or with other co-morbidities. Heart disease, blood pressure were the second most mentioned long-term conditions.

5.34 The frequency of pharmacy use by the group with disability and long-term conditions is mainly weekly and monthly. Yearly or less than yearly use is lower in this group as compared to the rest of the sample population (see Figure 5.6).

**Figure 5.6: Frequency of pharmacy use by survey respondents with and without a long-term condition or disability**



5.35 Their overall satisfaction of using pharmacy services was similar to the rest of the sample and their top criteria for choosing the pharmacy they visited was whether the pharmacies were meeting their overall need and their location. There were no comments on disability specific

access requirements by the respondents themselves. The top three services being used and will use if available were in line with the whole sample.

- 5.36** Survey responses identified no gaps in the provision of pharmacy services for people with disabilities or long-term conditions.

### **Sexual Orientation**

- 5.37** 127 respondents identified as heterosexual, eight as LGBT and 15 respondents preferred not to disclose their sexual orientation. The sample size was too small to comment on any differences in the use of pharmacies by people of different sexual orientations. No gaps in the provision of pharmacy services were identified for this protected characteristic.

### **Marital Status**

- 5.38** Eight-four respondents identified themselves as single, 53 as married, five as co-habiting and three in a civil partnership.

- 5.39** No differences were noted in the use and experience of those who are single and those who are married, co-habiting or in a civil partnership and therefore there were no identified gaps in service provision.

### **Pregnancy and Maternity**

- 5.40** Our sample had only five respondents (3.4%) who were pregnant or breastfeeding. The sample size is too small to note any differences in their use or experience of using community pharmacies and therefore no gaps in service provision were identified.

- 5.41** The patient and public engagement undertaken as part of the PNA 2018-2021 process, shows that the current provision of pharmaceutical services is sufficient to meet the current needs of the population.

## Summary of the Patient and Public Engagement and the Protected Characteristics

Patient and public engagement was undertaken to understand how people use their pharmacies, what they use them for and their views of the pharmacy provision. It included an exploration of the health needs specific to protected characteristics and vulnerable groups.

Findings showed that generally people are happy with the pharmacy services in the borough and found staff to be friendly. Respondents mostly use the pharmacies for obtaining prescription medication, repeat prescriptions and obtaining over the counter medication.

The top three services respondents would use if provided were health checks and home delivery and prescription collection services.

Suggestions for improvement included providing longer opening hours, more Sunday opening hours and option of basic blood tests and scans/x-rays at their local pharmacies.

**Overall findings show that the pharmacy provision is sufficient for supplying a necessary service with no gaps in the borough.**

# Chapter 6- Access to Pharmaceutical Essential Services

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- 6.1** All pharmacy contractors must provide Essential services, but they can choose whether they wish to provide Advanced, Enhanced or Locally Commissioned services. All pharmacies are required to deliver and comply with the specifications for all essential services, these are:
- Dispensing
  - Repeat dispensing
  - Disposal of waste medicines
  - Support for self-care
  - Public health
  - Signposting
  - Clinical governance
- 6.2** This chapter looks at the adequacy of provision of essential services by considering:
- Distribution and choice
  - Geographical distribution of pharmacies, within and outside the borough
  - Distribution in relation to health services and transport links
  - Opening hours
  - Accessibility

## **Pharmacy Distribution and Choice**

- 6.3** There are currently 94 pharmacies in Westminster as of October 2017. These have been marked on Figure 6.1, listed in Appendix D. One of these pharmacies (Bullen & Smears) is not considered a community pharmacy as it is an appliance-only contractor and therefore excluded from much of the analysis in the PNA.
- 6.4** There are 38 community pharmacies per 100,000 resident population within Westminster (based on a 2018 population estimate of 241,952). This is almost twice the London and England averages, both of which are 22 (General Pharmaceutical Services in England 2006/07 to 2015/16). The high density of pharmacies is well suited to meet the demand from the daily influx of the commuting population during weekdays.
- 6.5** The PNA examines the geographical accessibility of pharmaceutical services and has hence used the postcode of the pharmacy to consider which borough the pharmacy belongs to. Due to use of a 500m radius buffer, the services that these pharmacies provide are still taken account of for the Westminster PNA.



**Table 6.1: Distribution of pharmacies by ward**

Westminster Ward	Number of Pharmacies	Westminster Ward	Number of Pharmacies
West End	16	Lancaster Gate	3
Marylebone High Street	12	Little Venice	3
St James's	11	Knightsbridge and Belgravia	2
Hyde Park	9	Churchill	2
Warwick	6	Westbourne	2
Bryanston and Dorset Square	5	Abbey Road	2
Church Street	4	Tachbrook	2
Regent's Park	4	Bayswater	1
Harrow Road	3	Vincent Square	1
Maida Vale	3	Queen's Park	1

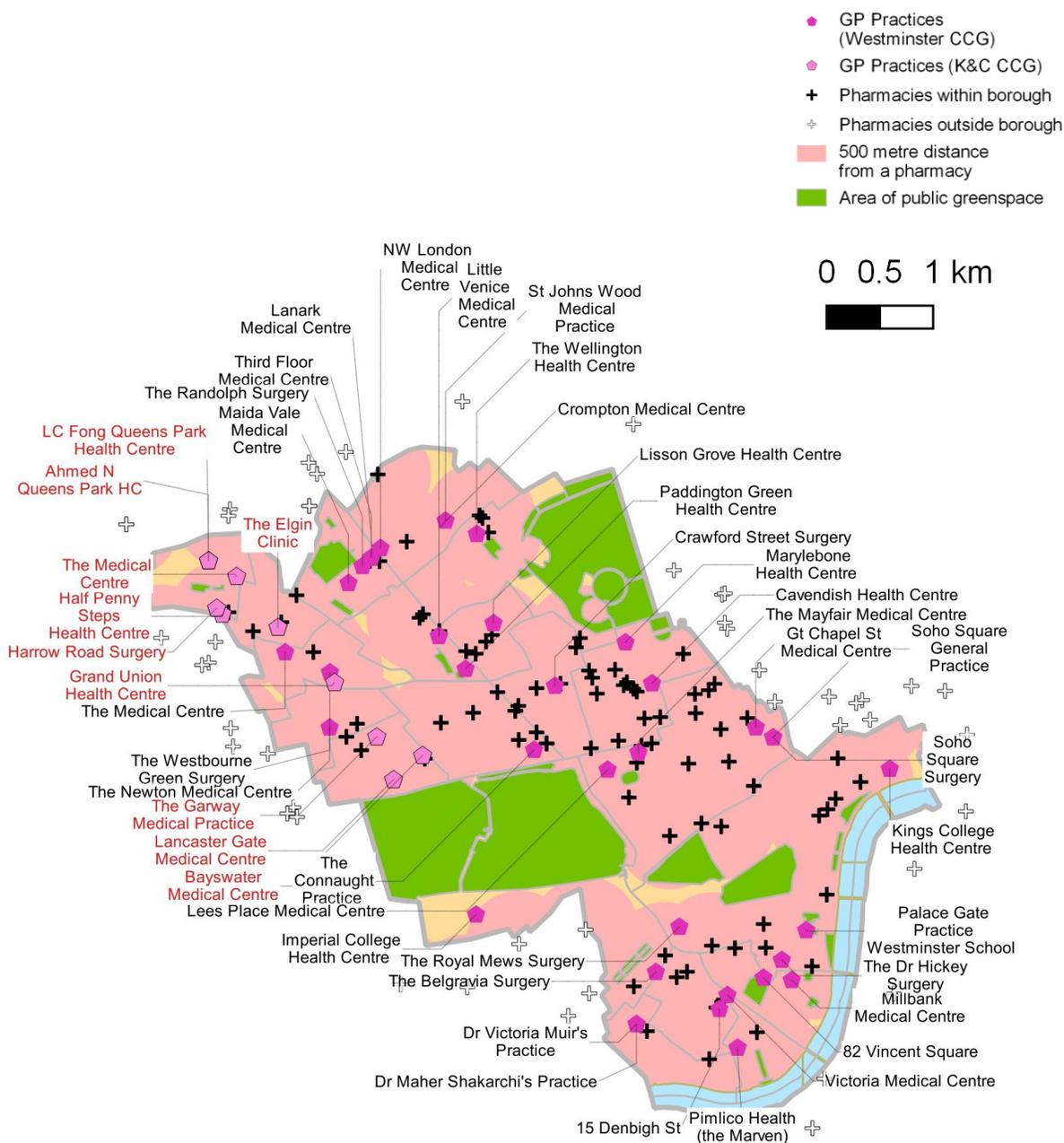
Source: Contractor Survey and NHS England, 2017

- 6.9** There is one distance selling pharmacy based within Westminster (Pharmacierge).
- 6.10** No pharmacies in Westminster have a Local Pharmaceutical Service (LPS) contract with NHS England as of October 2017. No pharmacies are eligible for Pharmacy Access Scheme payments.

### **Pharmacy Distribution in Relation to Primary Care**

- 6.11** The NHS Central London Clinical Commissioning (CL CCG) Group was set up in 2013 following the Health and Social Care Act of 2012. CL CCG is responsible for the planning and commissioning of health services for people living in Westminster or registered with Westminster GP practices (apart from Queen's Park and Paddington, which is covered by West London CCG).
- 6.12** Its aim is to improve the care provided to patients, reduce health inequalities and raise the quality and standards of GP practices within its allocated budget.
- 6.13** Altogether there are 39 GP practices located within Westminster, 34 of which are members of the CL CCG these are displayed in Figure 6.2, which shows that there is a pharmacy within 500 metres of all GP practices in the borough.
- 6.14** There are no known plans for changes in GP practices, including moves or closures in this PNA period. There are also no known firm plans for changes in the number and sources of prescriptions, i.e. primary medical services or the appointment of additional providers of primary medical services in the area.

Figure 6.2. GP practices in Westminster and 500 metre pharmacy coverage, 2017

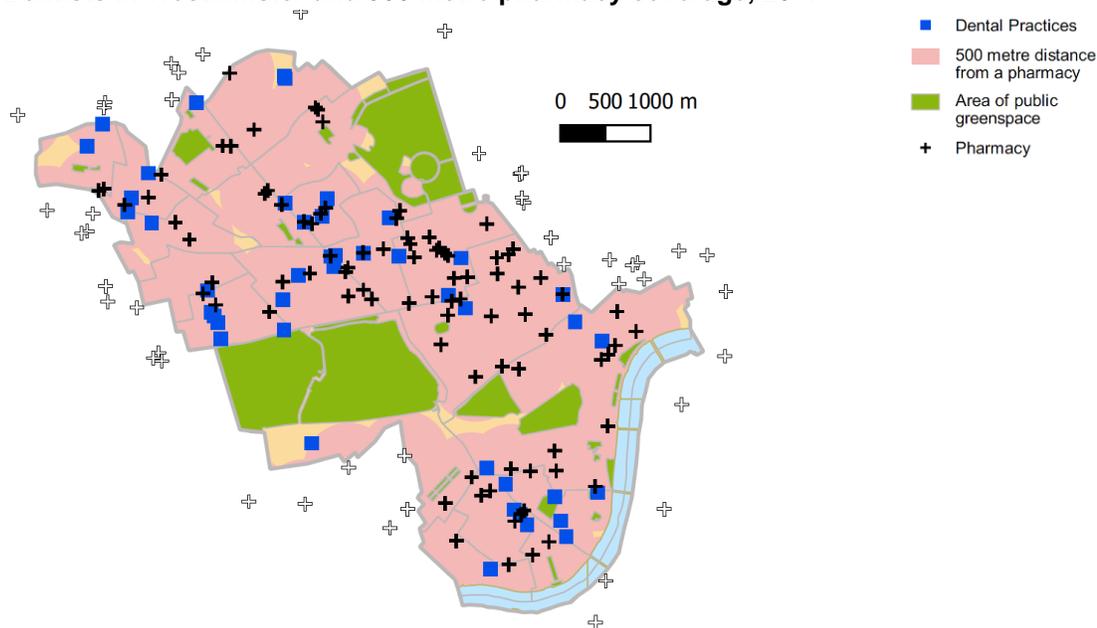


Source: Ordnance Survey, NHS England and Contractor Survey, 2017

### Pharmacy Distribution in Relation to Dentists

6.15 There are 61 dental practices in City of Westminster area, this is a substantial increase since the previous PNA was published when there was 40 Dental Practices. Figure 6.3 shows that there is a pharmacy within 500 metres of all dentists in the borough.

**Figure 6.3. Dentists in Westminster and 500 metre pharmacy coverage, 2017**



Source: Ordnance Survey, NHS England and Contractor Survey, 2017

### **Acute Care, Mental Health Care and Community Health Services**

**6.16** The main secondary care provider for the Central London CCG population are Chelsea & Westminster Hospital and St. Mary's Hospitals. Mental health services are provided by Central and North West London NHS Foundation Trust.

**6.17** Central London Community Healthcare (CLCH) is the NHS community healthcare provider for Westminster. It provides range of services including adult community nursing, children and family services, rehabilitation, End of Life care and long-term condition management. They provide a walk-in centre at the Soho Centre for Health and Care for treatments for a range of conditions including:

- minor ear, nose and throat problems
- sprains and strains
- wound infections
- minor burns and scalds
- minor head injuries
- skin conditions
- minor respiratory conditions such as cough
- mild abdominal pain or discomfort
- insect and animal bites and stings
- minor eye injuries
- minor injuries to the back, shoulder and chest

**6.18** There is one known planned change to NHS services in the area of Westminster for the period of this PNA. The Prescribing Wisely proposal will reduce the number of prescriptions written by GPs for medicines that can be bought over the counter at pharmacies. It will also reduce automated repeat prescriptions by asking patients to order them when needed.

### Dispensing

**6.19** Westminster pharmacies dispense an average of 3,355 per month (based on NHS Business Services Authority, Jan-Apr 2017 data). This is similar to the London average of 5,295 per month and lower than England average at 6,675 per month. This suggests there is capacity amongst these pharmacies to fulfill any potential increased demand for pharmaceutical services.

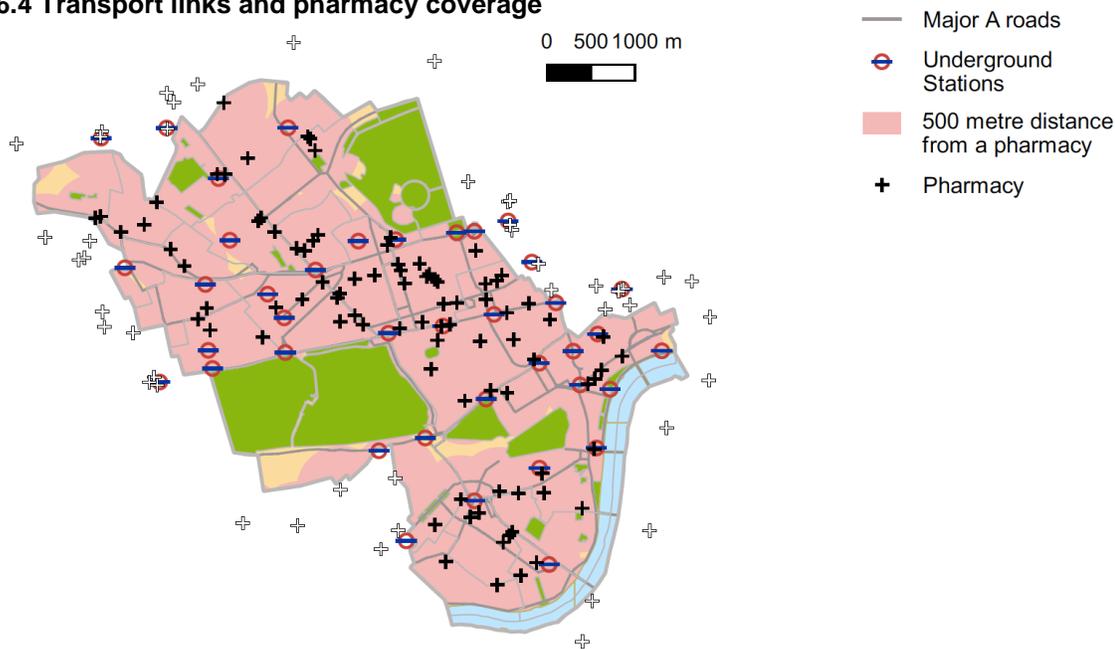
### Transport Networks

**6.20** The local population is not bound by electoral ward or borough boundaries when accessing pharmaceutical services. The excellent travel infrastructure available within central London places many more pharmacies, both inside and outside the borough, within convenient access to our local population.

**6.21** According to the 2011 census, the main forms of transport that residents aged 16–74 used to travel to work were: underground, metro, light rail, tram (23.6%); driving a car or van (8.2%); on foot (8.2%); bus, minibus or coach (8.0%); work mainly at or from home (7.0%); bicycle (3.1%); train (2.1%).

**6.22** Altogether there are 31 tube and rail stations in Westminster, all of which are within 500 metres of a pharmacy (see Figure 6.4).

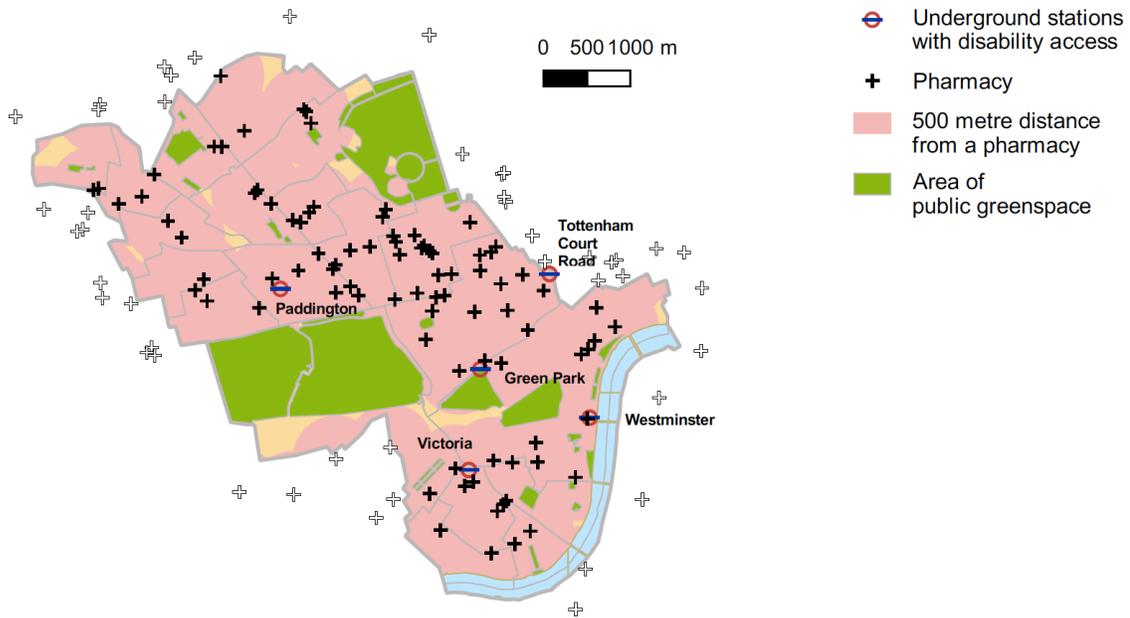
**Figure 6.4 Transport links and pharmacy coverage**



Source: Contractor Survey, Transport for London and NHS England, 2017

**6.23** There are five Underground stations that are wheelchair accessible; these are Westminster, London Victoria, Green Park, Paddington and Tottenham Court Road, Earl's Court and Kensington (Olympia). Of these all are within 500 metres of a pharmacy. These are shown in Figure 6.5.

**Figure 6.5 Tube stations that are wheelchair accessible and pharmacy coverage**



**Source: Contractor Survey, Transport for London and NHS England, 2017**

### Parking

**6.24** Only five of the 80 pharmacies that responded have free car parking. Sixty-five have paid car parking nearby. Forty-three pharmacies have disabled parking close to the premises. All major A roads are within 500 metres of a pharmacy (see Figure 6.4).

### Opening Times

**6.25** Pharmacy contracts with NHS England stipulate the core hours during which each pharmacy must remain open. A pharmacy may stay open longer than the stipulated core opening hours, these are called supplementary hours.

**6.26** Opening times were obtained from NHS England in August 2017. Additionally, market entry updates to the NHS England pharmaceutical list were reflected on the original list. Opening times were also collected as a part of the pharmacy contractor survey.

**6.27** This PNA has used the core and supplementary hours reported by pharmacies from the contractor survey to produce the figures below. For pharmacies that did not respond and for

pharmacies in surrounding boroughs, we have used the opening times as held by NHS England on October 2017.

**6.28** NHS England has seven 100-hour pharmacies (core) on their list for Westminster. They are listed in Table 6.2 below.

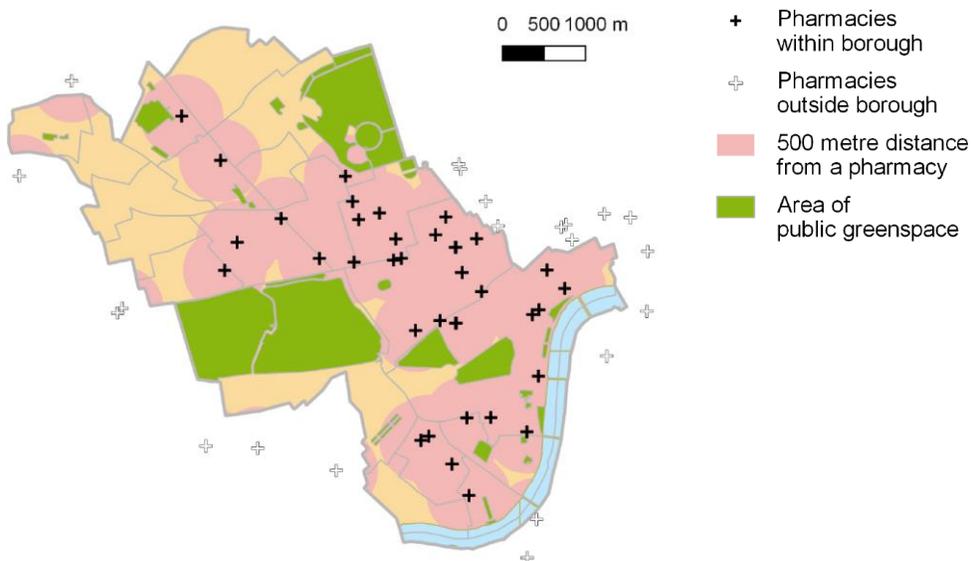
**Table 6.2: 100 hour pharmacies**

Pharmacy	Address	Ward
Devonshire Pharmacy	215 Edgware Road	Hyde Park
Nasslam Pharmacy	19 Edgware Road	Hyde Park
Central Pharmacy	427-429 Harrow Road	Harrow Road
Boots UK	100 Oxford Street	West End
Bin-Seena Pharmacy	73 Edgware Road	Hyde Park
Alrasheed Pharmacy	39 Edgware Road	Hyde Park
Safeer Pharmacy	194 Edgware Road	Bryanston and Dorset Square

Source: NHS England, 2017

**6.29** Thirty-five pharmacies are open before 9am on weekdays within the borough with a further 18 open in boroughs around Westminster within 500m outside the border. These are presented in Figure 6.6 and Table 6.3.

**Figure 6.6: Pharmacies that are open before 9am on a weekday**



Source: NHS England, 2017

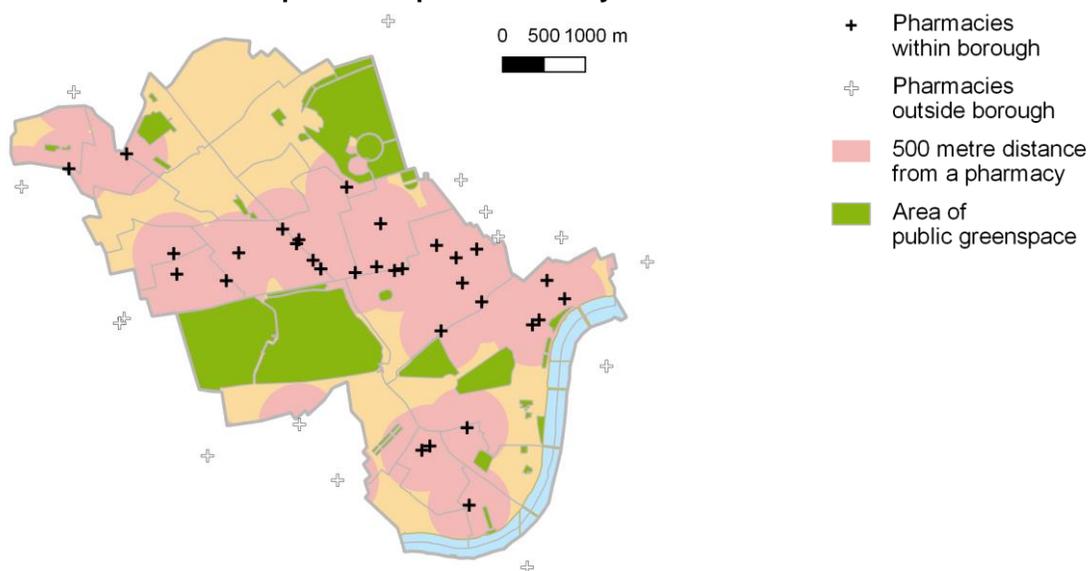
**Table 6.3: Pharmacies open before 9am on weekdays by ward**

Westminster Ward	Number of Pharmacies	Westminster Ward	Number of Pharmacies
West End	10	Maida Vale	1
St James's	8	Vincent Square	1
Marylebone High Street	4	Regent's Park	1
Warwick	3	Lancaster Gate	1
Hyde Park	3	Little Venice	1
Bryanston and Dorset Square	1	Tachbrook	1

Source: Contractor Survey and NHS England, 2017

**6.30** There are 33 pharmacies still open after 7pm on weekdays with a further 16 in other boroughs within 500m of Westminster (see Figure 6.7 and Table 6.4).

**Figure 6.7: Pharmacies that are open after 7pm on weekdays**



Source: Contractor Survey and NHS England, 2017

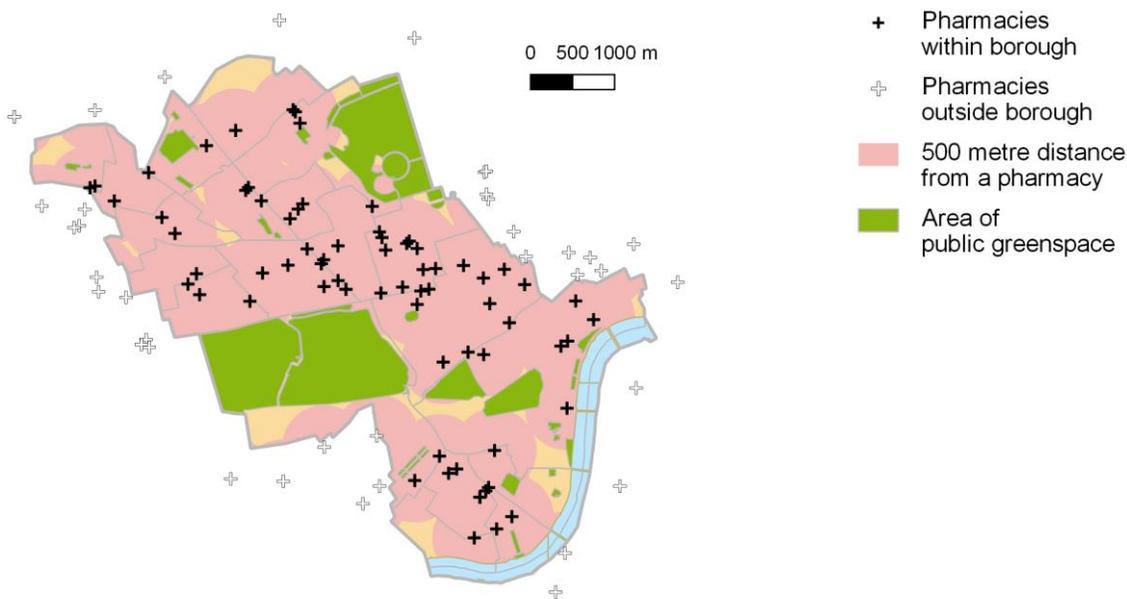
**Table 6.4: Pharmacies closing after 7pm by ward**

Westminster Ward	Number of Pharmacies	Westminster Ward	Number of Pharmacies
West End	7	Marylebone High Street	2
Hyde Park	7	Vincent Square	1
St James's	4	Bayswater	1
Warwick	2	Maida Vale	1
Bryanston and Dorset Square	2	Harrow Road	1
Lancaster Gate	2	Regent's Park	1
Tachbrook	1	Harrow Road	1

Source: Contractor Survey and NHS England, 2017

**6.31** A vast majority of the pharmacies in Westminster are open on Saturday (74/92). A further 38 outside the borough but within 500m of Westminster are open on Saturday (Figure 6.8 and Table 6.5).

**Figure 6.8 Pharmacies open on Saturday and 500-metre coverage**



Source: Contractor Survey and NHS England, 2017

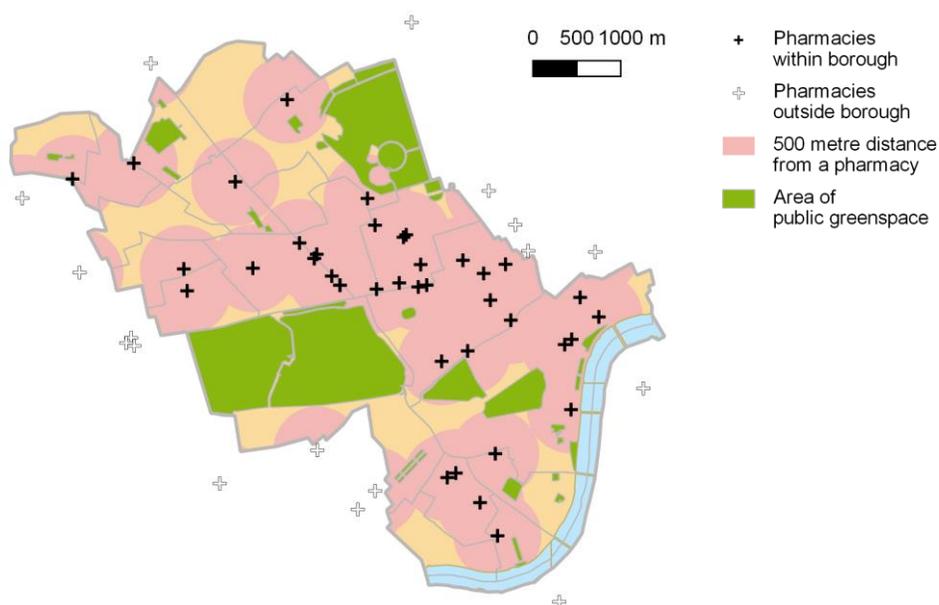
**Table 6.5: Pharmacies open on Saturday by ward**

Westminster Ward	Number of Pharmacies	Westminster Ward	Number of Pharmacies
West End	12	Tachbrook	2
Marylebone High Street	9	Maida Vale	2
Hyde Park	9	Westbourne	2
St James's	7	Harrow Road	2
Warwick	6	Knightsbridge and Belgravia	2
Regent's Park	4	Abbey Road	1
Bryanston and Dorset Square	3	Bayswater	1
Church Street	3	Queen's Park	1
Lancaster Gate	3	Vincent Square	1
Little Venice	3	Churchill	1

Source: Contractor Survey and NHS England, 2017

**6.32** There are 41 pharmacies open on a Sunday within the borough with a further 16 open in boroughs around Westminster within 500m of the border (Figure 6.9, Table 6.6).

**Figure 6.9: Pharmacies open on a Sunday and their 500 metre coverage**



Source: Contractor Survey and NHS England, 2017

**Table 6.6: Pharmacies open on Sunday by ward**

Westminster Ward	Number of Pharmacies	Westminster Ward	Number of Pharmacies
West End	9	Tachbrook	1
Hyde Park	7	Lancaster Gate	1
St James's	6	Vincent Square	1
Marylebone High Street	5	Harrow Road	1
Warwick	3	Little Venice	1
Regent's Park	2	Bayswater	1
Bryanston and Dorset Square	2	Maida Vale	1

Source: Contractor Survey and NHS England, 2017

## Appliance Contractors

- 6.33** Appliance contractors provide services to people who need appliances such as stoma and incontinence care aids, trusses, hosiery, surgical stockings and dressings. They range from small sole-trader businesses to larger companies. They do not supply drugs. However, pharmacies and dispensing doctors can also supply appliances.
- 6.34** There are is one appliance-only contractors in Westminster: Bullen & Smears on Broadwick Street.

- 6.35 Forty-six of the pharmacies that responded to the survey supply stoma care aids with a further six intending to begin within the next 12 months.
- 6.36 Fifty-one of the pharmacies that responded to the survey supply incontinence aids with another four intending to begin within the next 12 months.
- 6.37 Sixty-six of the pharmacies that responded to the survey supply dressings with none intending to begin within the next 12 months.

### Communication

- 6.38 Pharmacies hire staff from a variety of ethnic backgrounds and who speak a variety of languages. The most common **languages** spoken other than English in Westminster pharmacies are Gujarati, Hindi and Arabic.

**Table 6.7: Top 10 languages spoken by a member of staff at the pharmacies in Westminster**

Language	Number of Pharmacies
Gujarati	42
Hindi	37
Arabic	29
Urdu	17
Swahili	16
Spanish	16
Bengali	15
French	13
Italian	13
Polish	12

Source: Contractor Survey, 2017

- 6.39 The top three languages spoken by residents in the borough (other than English) are French, Arabic and Spanish. All of these are spoken by at least one member of staff from a range of pharmacies across the borough. Table 6.7 lists the most common languages spoken by a member of staff in the pharmacies that responded to the survey.

### Consultation Rooms

- 6.40 Ideally, pharmacies should have consultation areas or rooms with wheelchair access in order to be able to offer a broad range of services.
- 6.41 Sixty-six of the community pharmacies that responded to the survey reported having a clearly signposted private consulting room. 4 pharmacies report having an offsite consulting room/area.
- 6.42 Sixty-four of the pharmacies report having consulting rooms that comply with MUR/NMS requirements with six more planning some for the future.

6.43 Sixty-five pharmacies report having **hand washing facilities** close to the consultation room. Patients have access to **toilet facilities** in 24 pharmacies.

### Disability Access

6.44 Fifty-two of the pharmacies with a consultation room indicated that they were **accessible to wheelchair users** and another four are planning for such access.

6.45 Accessible information formats are alternatives to printed information, used by blind and partially sighted people, or others with a print impairment. More than half of the pharmacies that responded to the survey provide **printed information in large print format** (46/80) and 34 provide it in **Easy Read format**. Three pharmacies within the borough provides information in **Braille**.

### Collection and Delivery of Medication

6.46 **Repeat dispensing** allows patients to collect their repeat prescriptions from a pharmacy without having to request a new prescription from their GP. The benefits of repeat dispensing include reduction of medicine waste, reduction in GP practice workload, improved predictability of pharmacy workload and greater convenience for patients. All pharmacies offer a repeat prescription service.

6.47 Pharmacies in Westminster further improve access by providing delivery services to the local population. Seventeen of the pharmacies surveys reported that they **deliver dispensed medicines**, free of charge (see Table 6.8).

Table 6.8: Collection of prescriptions and delivery of medication

Type of collection or delivery service	Number of pharmacies
Collection of prescriptions from surgeries	57
Delivery of dispensed medicines - free of charge on request	43
Delivery of dispensed medicines - free of charge to selected patient groups only	42
Delivery of dispensed medicines - chargeable	19

Source: Contractor Survey, 2017

6.48 All pharmacies provide a **disposal service** of unwanted or unused medicines. No pharmacies are commissioned to provide a sharps disposal service.

## Information Technology

- 6.49** IT can improve high quality care by enabling storage accessibility of patient records, electronic prescribing and improve medicines management. Twenty-seven of the pharmacies surveyed reported to have access to an **IT system** within the consultation room and another six more are intending one within the next 12 months. Five of these pharmacies have access to patient records from this IT system.
- 6.50** Seventy of the surveyed pharmacies are currently **Release 2** enabled, with two others intending to be enabled in the next 12 months.
- 6.51** 45 pharmacies reported that they have access to **Microsoft Office applications** and all pharmacies have access to **NHS.net email**.

### Summary of necessary services: current provision (Schedule 1, paragraph 1) Necessary services: gaps in provision (Schedule 1, paragraph 2)

Necessary services are fundamental for patients to obtain prescribed medicines in a safe and reliable manner. All pharmacies are required to deliver and comply with the specifications for all essential services.

Dispensing NHS prescriptions, access (both location and hours of opening) and facilities (including provision of suitable consultation areas and disability access) were considered in the evaluation of essential services for this PNA.

The Westminster Health and Wellbeing Board believes that the range of opening hours, options for delivery of medications and the close proximity of pharmacies to local residents and transport facilities is **sufficient for supplying a necessary pharmaceutical service with no gaps in the borough**.

# Chapter 7- Advanced, Locally Enhanced and Locally Commissioned Services Provided by Pharmacies

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## Categorisation of Pharmaceutical Services

- 7.1 Pharmaceutical services in relation to PNAs include:
- **Essential services** which every community pharmacy providing NHS pharmaceutical services must provide and is set out in their terms of service
  - **Advanced services** - services community pharmacy contractors and dispensing appliance contractors can provide subject to accreditation as necessary
  - **Locally Enhanced Services** - services commissioned locally by NHS England's area teams
  - **Other Locally Commissioned Services** - Public Health Services commissioned by the Local Authorities in order to meet the needs of the population.
- 7.2 The categorisation of these services into those stipulated by the PNA regulations (defined in Chapter 1) for Westminster are summarised in Table 7.1.
- 7.3 This chapter outlines the Other Relevant Services, Other Services and Improvements and better access of pharmacy services in Westminster.

**Table 7.1: Summary of categorisation of services into those stipulated by PNA regulations**

Necessary services: current provision (Schedule 1, paragraph 1)	Necessary services: gaps in provision (Schedule 1, paragraph 2)
Essential Services (see Chapter 6)	No gaps in provision of necessary services (see Chapter 6)
<b>Other relevant services: current provision (Schedule 1, paragraph 3)</b>	
<ul style="list-style-type: none"> <li>• Medicine Use Review service</li> <li>• New Medicine Service</li> <li>• Appliance Use Reviews</li> <li>• Stoma Appliance Customisation Service</li> <li>• NHS Urgent Medicine Supply Advanced Service</li> <li>• National NHS England Flu Service (Advanced Service)</li> </ul>	
<b>Other services (Schedule 1, paragraph 5)</b>	
Commissioned Services:	<ul style="list-style-type: none"> <li>• Minor Ailments Scheme</li> <li>• NHS Health Checks</li> <li>• Supervised Administration</li> <li>• Needle Exchange Services</li> <li>• Stop Smoking Services</li> </ul>
Privately Delivered Services	<ul style="list-style-type: none"> <li>• Alcohol Misuse Services</li> <li>• Weight Management Services</li> <li>• Emergency Hormonal Contraception</li> <li>• Sexual Health Screening and Treatment Services</li> <li>• Care Home Advice Service</li> <li>• Out of Hours Palliative Care Service</li> </ul>
<b>Improvements and better access: gaps in provision (Schedule 1, paragraph 4)</b>	
<ul style="list-style-type: none"> <li>• HIV Screening service</li> <li>• Child and Family Weight Management Services</li> </ul>	

## Other Relevant Services: Current Provision (Schedule 1, paragraph 3).

There are four services within the NHS community pharmacy contractual framework considered relevant. Community pharmacies can choose to provide any of these services as long as they meet the requirements set out in the Secretary of State Directions.

### Medicines Use Reviews (MURs)

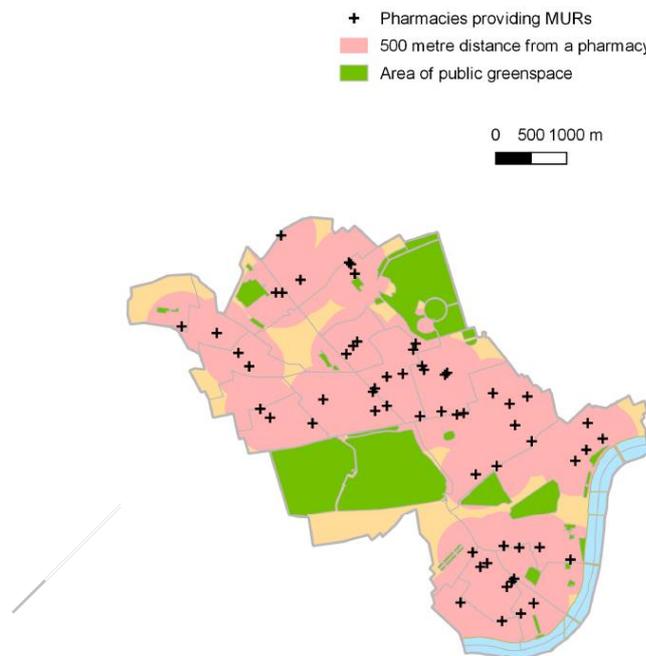
- 7.4 The Medicines Use Review and Prescription Intervention Service (MUR) as part of the community pharmacy contractual framework was the first advanced service to be introduced. The purpose of the MUR service is, with the patient's agreement, to improve their knowledge and use of medicines, through a specific consultation between the pharmacist and the patient. In particular, by:

- establishing the patient's actual use, understanding and experience of taking medicines
- identifying, discussing and resolving poor or ineffective use of medicines
- identifying side effects and drug interactions that may affect the patient's compliance with the medicines prescribed for them
- improving clinical and cost effectiveness of medicines prescribed also helping to reduce medicines wastage

**7.5** MURs improve adherence with the prescribed regimen, help to manage risks related to poor medicines management and therefore improve patient outcomes and reduce hospital admissions.

**7.6** At present, NHS England reports that 61 pharmacies (that are currently still operating) provided MURs during 2016/17. These pharmacies and their reach are displayed in Figure 7.1 and listed in Appendix D).

**Figure 7.1: Pharmacies that provides in the Westminster and their 500 metre coverage, October 2017**



**Source: NHS England, 2017**

**7.7** Eligible pharmacies can deliver up to 400 MURs each year. NHS England recorded activity the average number of MURs delivered per pharmacy between April 2016 and April 2017 was 217 (although some of these pharmacies have ceased operating). Table 7.2 presents this MUR activity by ward. There is therefore capacity within existing pharmacies to provide for any increasing future need.

**Table 7.2: Number of MURs provided, Westminster pharmacies, 2016/17**

Ward	Number of Pharmacies	Total Number of MURs provided	Average Number per Pharmacy
Abbey Road	2	579	289.5
Bayswater	1	34	34.0
Brompton & Hans Town	1	178	178.0
Bryanston and Dorset Square	5	669	133.8
Church Street	4	714	178.5
Churchill	2	468	234.0
Harrow Road	1	217	217.0
Hyde Park	5	589	117.8
Knightsbridge and Belgravia	1	3	3.0
Lancaster Gate	3	791	263.7
Little Venice	1	338	338.0
Maida Vale	2	564	282.0
Marylebone High Street	6	654	109.0
Queen's Park	1	137	137.0
Regent's Park	4	883	220.8
St James's	7	1939	277.0
Tachbrook	2	320	160.0
Vincent Square	1	176	176.0
Warwick	6	1784	297.3
West End	9	2740	304.4
Westbourne	2	562	281.0
<b>Total</b>	<b>66</b>	<b>14339</b>	<b>217.3</b>

Source: NHS England, 2017

- 7.8** Given the wide distribution of MUR services across the borough the Health and Wellbeing Board are satisfied that there is sufficient provision for supplying a relevant service with no gaps.

### **New Medicines Services (NMS)**

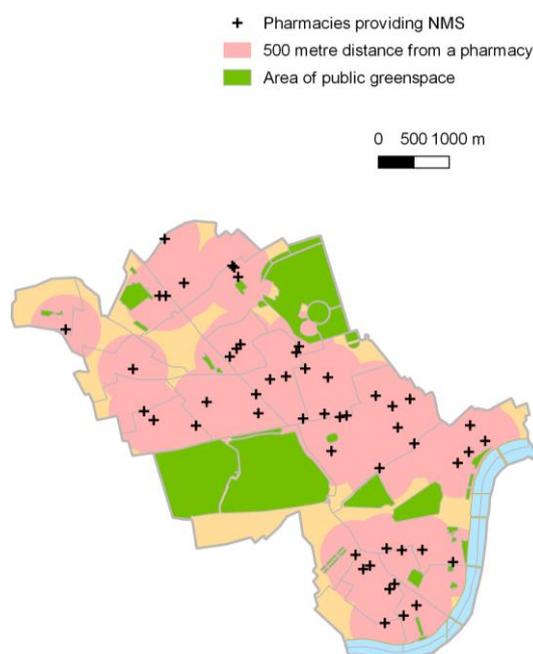
- 7.9** The New Medicine Service (NMS) supports patients with long-term conditions, who are taking a newly prescribed medicine, to help improve medicines adherence. The service is focused on the following patient groups and conditions:

- asthma and chronic obstructive pulmonary disease (COPD)
- type 2 diabetes
- antiplatelet/anticoagulant therapy
- hypertension

- 7.10** This service is designed to improve patients' understanding of a newly prescribed medicine for their long-term condition, and help them get the most from the medicine.

- 7.11** New Medicines Service can only be provided by pharmacies and is conducted in a private consultation area to ensure patient confidentiality.

**Figure 7.2: Pharmacies that provide NMS in Westminster and their 500 metre coverage, October 2017**



Source: NHS England, 2017

**7.12** Fifty-two pharmacies (that are currently still operating) provided NMSs in 2016/17. These are presented in Figure 7.3 and listed in Appendix D. They delivered an average of 32 NMSs per pharmacy (Table 7.3).

**Table 7.3: Number of NMS provided, Westminster pharmacies, 2016/17**

Ward	Number of Pharmacies	Total Number of NMSs provided	Average Number per Pharmacy
Abbey Road	2	14	7.0
Brompton & Hans Town	1	28	28.0
Bryanston and Dorset Square	4	100	25.0
Church Street	3	13	4.3
Churchill	1	202	202.0
Hyde Park	3	129	43.0
Knightsbridge and Belgravia	1	1	1.0
Lancaster Gate	3	171	57.0
Little Venice	1	1	1.0
Maida Vale	2	196	98.0
Marylebone High Street	3	55	18.3
Queen's Park	1	124	124.0
Regent's Park	4	87	21.8
St James's	7	214	30.6
Tachbrook	2	10	5.0
Vincent Square	1	16	16.0
Warwick	5	151	30.2
West End	9	225	25.0
Westbourne	1	3	3.0
<b>Total</b>	<b>54</b>	<b>1740</b>	<b>32.2</b>

Source: NHS England, 2017

- 7.13** The highest numbers of NMS were delivered in Churchill and Queen's Park where deprivation is high.
- 7.14** There is scope for pharmacies in other high-deprivation wards such as Church Street and Westbourne to provide more NMS.
- 7.15** NMS are supplied widely across the borough, therefore the Health and Wellbeing Board are satisfied that this is sufficient for supplying a relevant service with no gaps.

### **Appliance Use Reviews (AURs)**

- 7.16** Appliance Use Review (AUR) is another advanced service that community pharmacy and appliance contractors can choose to provide so long as they fulfil certain criteria.
- 7.17** AURs can be carried out by, a pharmacist or a specialist nurse either at the contractor's premises or at the patient's home. AURs help patient's to better understand and use their prescribed appliances by:
- Establishing the way the patient uses the appliance and the patient's experience of such use
  - Identifying, discussing and assisting in the resolution of poor or ineffective use of the appliance by the patient
  - Advising the patient on the safe and appropriate storage of the appliance
  - Advising the patient on the safe and proper disposal of the appliances that are used or unwanted
- 7.18** Only one pharmacy, Lloyds Pharmacy, 50-54 Wigmore Street has been commissioned to deliver SACs in Westminster.
- 7.19** Given the flexibility of how this service can be delivered, and the low volume of use, the Health and Wellbeing board are satisfied that the AUR service is sufficient for supplying a relevant service with no gaps.

### **Stoma Appliance Customisation Service (SAC)**

- 7.20** The SAC 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.
- 7.21** Only one pharmacy, Lloyds Pharmacy, 50-54 Wigmore Street has been commissioned to deliver SACs in Westminster.
- 7.22** Residents can access the SAC service either from non-pharmacy providers within the Borough (e.g. community health services) or from dispensing appliance

contractors outside of the Borough. Therefore current provision is sufficient to meet the current and future needs of this borough.

### **NHS Urgent Medicines Supply Advanced Service (NUMSAS)**

**7.23** The NUMSAS is a pilot service that was set up to relieve the pressure on urgent and emergency care services by shifting the demand from GP out-of-hours providers to community pharmacy. It enables appropriate urgent access to medicines or appliances through community pharmacies. Patients who contact NHS 111 can access this service.

**7.24** NHS England lists 15 pharmacies that provide NUMSAS in the borough (Table 7.4), these are widely placed across the borough.

**Table 7.4: Locations of pharmacies that provide NUMSAS in Westminster by ward, October 2017**

<b>Westminster Ward</b>	<b>Number of Pharmacies</b>	<b>Westminster Ward</b>	<b>Number of Pharmacies</b>
Marylebone High Street	3	Tachbrook	1
Maida Vale	2	Churchill	1
Westbourne	1	West End	1
Warwick	1	Hyde Park	1
Bryanston and Dorset Square	1	Bayswater	1
Church Street	1	Knightsbridge and Belgravia	1

NHS England, 2017

**7.25** The Health and Wellbeing Board considers that the existing NUMSAS is sufficient for supplying a relevant service.

### **National NHS England Flu Service**

**7.26** Flu vaccination by injection, commonly known as the "flu jab" is available every year on the NHS to protect certain groups who are at risk of developing potentially serious complications, such as:

- anyone over the age of 65
- pregnant women
- adults with an underlying health condition (particularly long-term heart or respiratory disease)
- adults with weakened immune systems

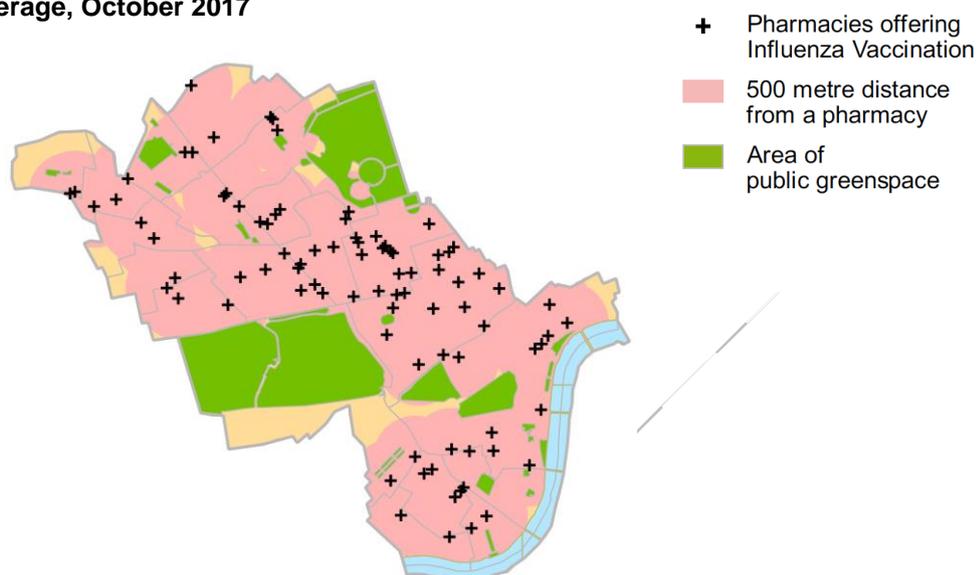
**7.27** GPs currently provide the majority of flu vaccinations and pharmacies can help improve access to this service given their convenient locations, extended opening hours and walk-in service. The National Advanced Flu Service is an advanced service commissioned by NHS England to maximise the uptake of the flu vaccine by those who are 'at-risk' due to ill-health or long terms condition.

**7.28** In addition to the Advanced Flu Service the NHS England London Region commissions the London Pharmacy Vaccination Service (2017/18). It covers other

vaccines in addition to flu and can be provided by any pharmacy in London. It provides a vaccination service where there may otherwise be gaps and is offered to a wider patient group.

**7.29** There is strong coverage of Flu Vaccination across the borough. NHS England commissions 53 pharmacies to provide a flu vaccine (Figure 7.3 and Table 7.5).

**Figure 7.3: Pharmacies that provide Flu Vaccinations in Westminster and their 500 metre coverage, October 2017**



Source: NHS England, 2017

**Figure 7.5: Pharmacies that provide Flu Vaccinations in Westminster by ward, October 2017**

Westminster Ward	Number of Pharmacies	Westminster Ward	Number of Pharmacies
West End	10	Westbourne	2
Marylebone High Street	7	Abbey Road	2
St James's	6	Little Venice	2
Hyde Park	5	Bayswater	1
Regent's Park	4	Churchill	1
Warwick	4	Knightsbridge and Belgravia	1
Maida Vale	3	Tachbrook	1
Bryanston and Dorset Square	3	Harrow Road	1
Church Street	3	Vincent Square	1
Lancaster Gate	3		

Source: NHS England, 2017

**7.30** As shown in Figure 7.3 and Table 7.4 the pharmacy provision of flu vaccination is easily accessible throughout the borough. The Health and Wellbeing Board believes that the current provision of flu vaccinations is sufficient for supplying a relevant service with no gaps.

### Summary of Other Relevant Services: Current Provision (schedule 1, paragraph 3).

Community pharmacies can choose to provide any or all of the four Other Relevant Services within the NHS community pharmacy contractual framework, as long as they meet the requirements set out in the Secretary of State Directions. The advanced services are:

- Medicine Use Review service
- New Medicine Service
- Appliance Use Reviews
- Stoma Appliance Customisation Service
- NHS Urgent Medicine Supply Advanced Service
- National NHS England Flu Service

The number and proximity of pharmacies locally means the vast majority of residents in the borough live close to a pharmacy that provides Medicine Use Review services, New Medicine Services, NHS Urgent Medicine Supply Advanced Service and a Flu Vaccination service. The Health and Wellbeing Board believes that the current provision of these services **is sufficient for supplying a relevant service with no gaps.**

Both the Stoma Customisation Service and Appliance Use Reviews are supplied by one pharmacy within the borough and can be provided by community health services and specialist nurses. In considering the low volume of use of this service the Health and Wellbeing Board are satisfied that the **Stoma Customisation Service and Appliance Use Review service is sufficient for supplying a relevant service with no gaps.**

### Other Services: Current Provision (schedule 1, paragraph 5).

- 7.31** Certain enhanced services are commissioned by NHS England Regulations 2013. The responsibilities for commissioning some of the locally enhanced services under the previous regulations now sits within public health and are commissioned by Local Authorities.
- 7.32** The following section outlines the enhanced services currently commissioned by NHS England and Public Health and explores their relevance to the local population and their current and future commissioning. Other services provided privately by pharmacies are also explored.

## NHS England Commissioned Services

### Minor Ailment Scheme

- 7.33** The Minor Ailment Scheme offers free advice and treatment for minor, self-limiting conditions such as mild skin conditions, coughs and colds and aches and pains. This service helps to relieve pressure from GPs and Secondary Care.
- 7.34** The NHS England commissioned Minor Ailments Scheme only covers the northern part of the Central London CCG area through four pharmacies (see Table 7.6).

**Table 7.6: Locations of Minor Ailment provision in Westminster, October 2017**

Pharmacy	Address	Ward
Medicare (London) Ltd Pharmacy	570 Harrow Road	Queen's Park
Bayswater Pharmacy	39-41 Porchester Road	Bayswater
<b>K.S.C1T Ltd</b>	27-29 Church Street	Church Street
Market Chemist	91-93 Church Street	Church Street

Source: NHS England, 2017

- 7.35** The North West London Collaboration of CCGs Prescribing Wisely initiative encourages the public to use community pharmacies for advice and help with common self-limiting ailments and to purchase any over the counter medicines they need. In considering these factors, the Health and Wellbeing Board are satisfied that there is no need for provision of the Minor Ailment Scheme.

## Public Health Commissioned Services

### NHS Health Checks

- 7.36** Screening services within pharmacies can bring a range of benefits including identifying patients at risk of developing a specific disease or condition and providing advice, screening and signposting or referrals.
- 7.37** NHS Health Checks is a screening programme set up to identify the risk of vascular disease in the population early and then to help people reduce or avoid it. Generally NHS Health Checks take place as part of general practice services, yet pharmacies are also well placed to play a key role.
- 7.38** Altogether eight pharmacies in Westminster indicated in the survey that they provide NHS Health Checks across the borough. Three of these pharmacies are commissioned by Westminster City Council to do deliver NHS Health Checks (see Table 7.7).

**Table 7.7: Locations of NHS Health Checks provision in Westminster, October 2017**

Pharmacy	Address	Ward
Portmans Pharmacy	93-95 Tachbrook Street	Tachbrook
Simmonds Pharmacy	105 Lupus Street	Churchill
Bayswater Pharmacy	39-41 Porchester Road	Bayswater

Source: WCC commissioning data, 2017

**7.39** Most GPs in Westminster are commissioned to provide NHS Health Checks and currently pharmacies perform a very small number of health checks. The Health and Wellbeing Board identifies the level of this service to be sufficient, with no gaps.

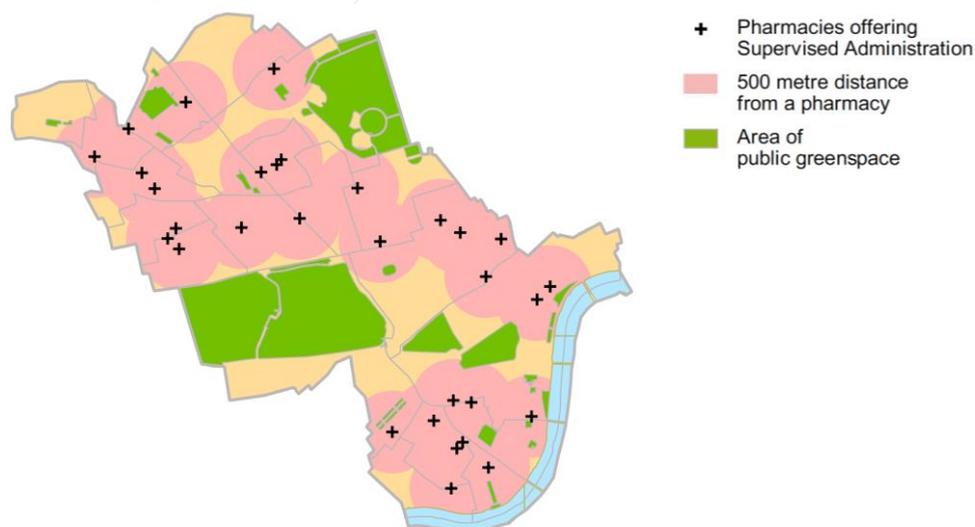
### Supervised Administration Service

**7.40** Pharmacists providing a Supervised Administration Service supervise the consumption of medicines at the point of dispensing in a pharmacy. It ensures that the correct dosage has been administered properly and provides a confidential, non-judgmental approach for patients who need support to manage their medicines.

**7.41** Westminster has commissioned 31 pharmacies to provide a Supervised Administration Service. These are shown in Figure 7.4 and Table 7.8.

**7.42** In considering the wide reach of this service within areas of high deprivation across the borough the Health and Wellbeing Board identifies the level of this service to be sufficient, with no gaps.

**Figure 7.4: Pharmacies that provide Supervised Administration in Westminster and their 500 metre coverage, October 2017**



Source: WCC Commissioning data, 2017

**Table 7.8: Locations of Pharmacies that provide Supervised Administration in Westminster, October 2017**

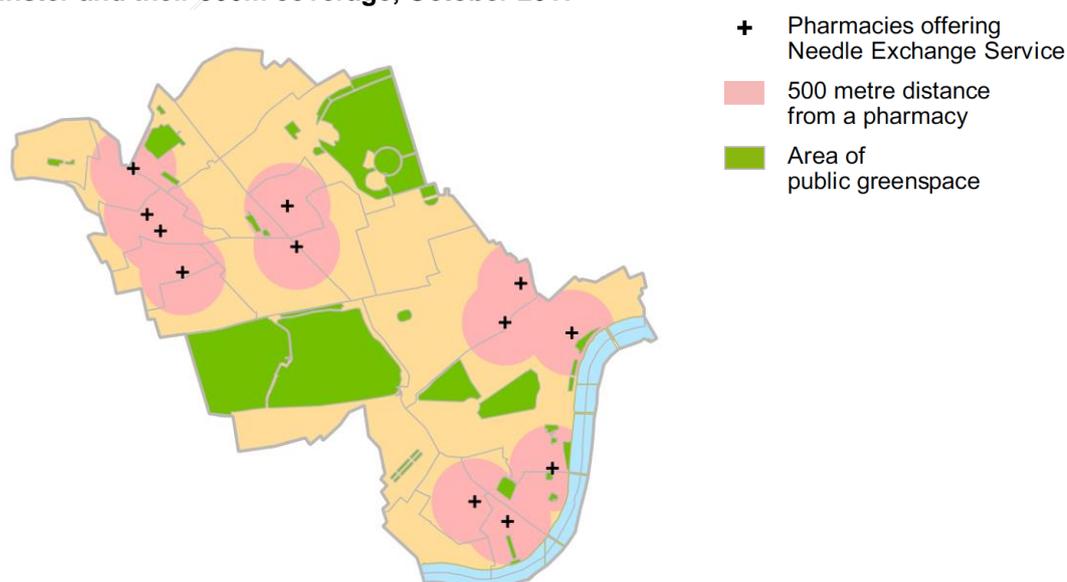
Westminster Ward	Number of Pharmacies	Westminster Ward	Number of Pharmacies
West End	4	Maida Vale	2
St James's	4	Regent's Park	1
Church Street	3	Bayswater	1
Warwick	3	Harrow Road	1
Marylebone High Street	2	Knightsbridge and Belgravia	1
Hyde Park	2	Churchill	1
Westbourne	2	Tachbrook	1
Lancaster Gate	2	Vincent Square	1

Source: WCC Commissioning data, 2017

### Needle and Syringe Exchange

- 7.43 Good access to Needle and Syringe Exchange supports safer use of drugs by injecting drug users by reducing the transmission of viruses and other infections caused by needles and syringes, such as HIV and Hepatitis B and C.
- 7.44 A Needle and Syringe Exchange Service provides sterile needles, syringes and associated materials to drug misusers and disposes of used needles, syringes and associated materials. Additionally the service offers advice to drug misusers and where appropriate makes referrals to other health care professionals or a specialist drug treatment centre.
- 7.45 Twelve pharmacies are commissioned by Westminster Public Health to provide a Needle and Syringe Exchange Service (Figure 7.5 and Table 7.9).

**Figure 7.5: Pharmacies that provide a Needle and Syringe Exchange service in Westminster and their 500m coverage, October 2017**



Source: WCC Commissioning data, 2017

**Table 7.9: Pharmacies that provide a Needle and Syringe Exchange service in Westminster, October 2017**

Pharmacy	Address	Ward
Bayswater Pharmacy	39-41 Porchester Road	Bayswater
Boots The Chemist	44-46 Regent Street	West End
Browns Chemist	195 Shirland Road	Maida Vale
Devonshire	215 Edgware Road	Hyde Park
Portmans Pharmacy	93-95 Tachbrook Street	Tachbrook
Benson Pharmacy	276 Harrow Road	Westbourne
Market Chemist	91-93 Church Street	Church Street
Sumer Health Ltd	340 Harrow Road	Westbourne
Superdrug Pharmacy	50 Strand	St James's
Victoria Pharmacy	58 Horsferry Road	St James's
Warwick Pharmacy	34-36 Warwick Way	Warwick
Watsons Pharmacy	1 Frith Street	West End

Source: WCC Commissioning data, 2017

**7.46** The Needle Exchange service is spread across the borough and mapped well to areas of greatest need. Given the specialist nature and low volumes of service use compared to normal dispensing, the Health and Wellbeing Board identifies the level of these services to be sufficient, with no gaps.

### **Stop Smoking Service**

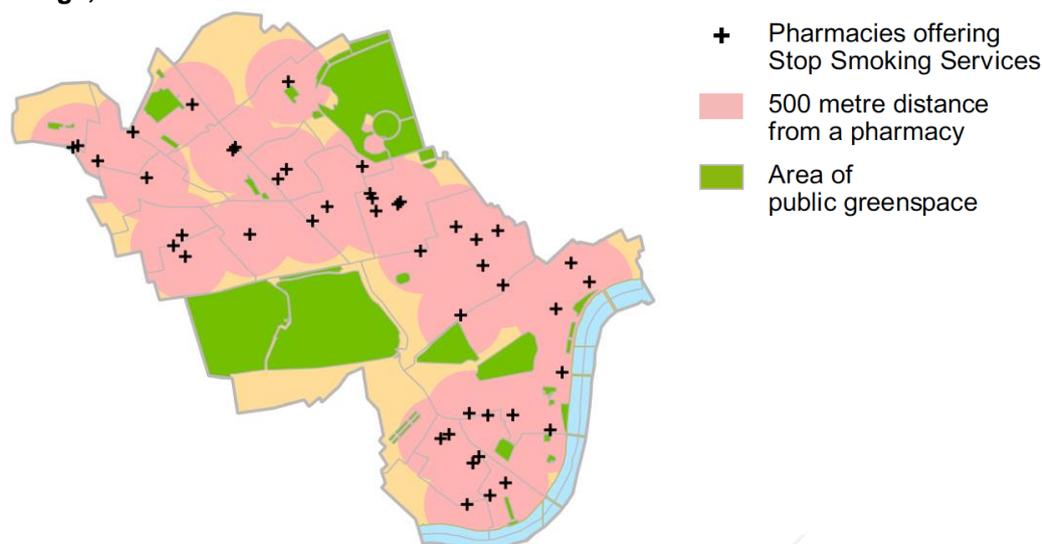
**7.47** Smoking is the single biggest preventable cause of death and inequalities and levels of smoking are high in Westminster. Securing good access to stop smoking services increases the opportunity for the population to benefit from improvements in health including reduced risk of cancers, circulatory diseases and respiratory diseases.

**7.48** A stop smoking service within a pharmacy can provide advice and support to patients wishing to give up smoking and where appropriate supply nicotine replacement therapies.

**7.49** Figure 7.6 presents the reach of the Stop Smoking Service by pharmacies in Westminster. Forty-six pharmacies are currently commissioned to offer this service.

**7.50** Table 7.10 outlines the number of pharmacies that are commissioned by Westminster City Council Public Health to deliver stop smoking services.

**Figure 7.6: Pharmacies that provide Stop Smoking services in Westminster and their 500m coverage, October 2017**



Source: WCC Commissioning data, 2017

**Table 7.10: Locations of Pharmacy providing Stop Smoking services in Westminster by ward, October 2017**

Westminster Ward	Number of Pharmacies	Westminster Ward	Number of Pharmacies
St James's	7	Church Street	2
West End	7	Lancaster Gate	2
Marylebone High Street	5	Little Venice	2
Warwick	5	Maida Vale	2
Regent's Park	2	Bayswater	1
Tachbrook	2	Queen's Park	1
Harrow Road	2	Westbourne	1
Bryanston and Dorset Square	2	Vincent Square	1
Church Street	2		

Source: WCC Commissioning data, 2017

**7.51** In considering the reducing number of smokers in Westminster and the wide reach of Stop Smoking Services on offer, the Health and Wellbeing Board identifies the Service provided in local pharmacies as sufficient for supplying a service with no gaps.

### Services Provided Privately by Pharmacies

#### Alcohol Misuse Service

**7.52** The Alcohol Misuse Service can provide brief interventions to identify and higher risk and increasing risk drinkers and provide support to motivate individuals to modify their drinking patterns.

**7.53** Although alcohol-related hospital admissions and binge drinking rates are lower in Westminster than nationally, binge drinking widespread across the borough.

**7.54** Currently six pharmacies identified themselves as providing an alcohol misuse and screening service privately (shown in Table 7.11) and 51 others would be willing to provide this service if commissioned.

**Table 7.11: Pharmacies that provide Alcohol Misuse and Screening services in Westminster, October 2017**

Trading Name	Address	Ward
Dolphins Pharmacy	9-11 The Broadway	St James's
Victoria Pharmacy	58 Horsferry Road	St James's
Star Pharmacy	33 Strutton Ground	St James's
Sherlock Holmes Pharmacy	82a Baker St	Marylebone High Street
Nashi Pharmacy	55 Westbourne Grove	Lancaster Gate
Benson Pharmacy	276 Harrow Road	Westbourne

Source: Contractor Survey, 2017

**7.55** The Health and Wellbeing Board is satisfied that the Alcohol Misuse Service provided in local pharmacies is sufficient for supplying a service with no gaps.

### Weight Management Services

**7.56** Obesity in the borough is low in comparison to national figures, however rates are increasing and childhood obesity is high. This likely to have significant impact on healthy-life expectancies and future health costs. Weight management services, particularly for children would expand the health promotion role of pharmacies.

**7.57** The contractor survey identified 20 pharmacies that provide weight management services (see Table 7.12) and 41 more willing to provide this service if commissioned. These are strategically placed in areas where childhood obesity is high the borough.

**Table 7.12 Location of pharmacies that provide Weight Management by ward in Westminster, 2017**

Westminster Ward	Number of Pharmacies	Westminster Ward	Number of Pharmacies
St James's	3	Tachbrook	1
Hyde Park	3	Bayswater	1
Church Street	2	Maida Vale	1
Bryanston and Dorset Square	2	Westbourne	1
West End	2	Lancaster Gate	1
Marylebone High Street	1	Little Venice	1
Churchill	1		

Source: Contractor Survey, 2017

**7.58** Health and Wellbeing Board is satisfied that the current Weight Management Service provided in local pharmacies is not sufficient for supplying a service for children and families.

### Sexual Health Screening and Treatment

**7.59** Pharmacies can be commissioned to provide services such as condom distribution; pregnancy testing and advice, Chlamydia screening and treatment and other sexual health screening, including syphilis, HIV and gonorrhoea. These services are currently provided by GPs, GUM Clinics and Secondary Care Centres.

**7.60** Six pharmacies in the borough offer chlamydia screening (see Table 7.13 below). Five of those also offer chlamydia treatment (see Table 7.14).

**Table 7.13 Location of pharmacies that provide Chlamydia Screening in Westminster, October 2017**

Trading Name	Address	Ward
Dolphins Pharmacy	9-11 The Broadway	St James's
Victoria Pharmacy	58 Horsferry Road	St James's
Star Pharmacy	33 Strutton Ground	St James's
Sedley Place	361 Oxford Street	West End
Sherlock Holmes Pharmacy	82a Baker St	Marylebone High Street
Nashi Pharmacy	55 Westbourne Grove	Lancaster Gate

Source: Contractor Survey, 2017

**Table 7.14 Location of pharmacies that provide Chlamydia Treatment in Westminster, October 2017**

Trading Name	Address	Ward
Victoria Pharmacy	58 Horsferry Road	St James's
Portmans Pharmacy	93-95 Tachbrook Street	Tachbrook
Sedley Place	361 Oxford Street	West End
Sherlock Holmes Pharmacy	82a Baker St	Marylebone High Street
Nashi Pharmacy	55 Westbourne Grove	Lancaster Gate

Source: Contractor Survey, 2017

**7.61** Three pharmacies in the borough offer gonorrhoea screening and they are outlined in Table 7.15 below. Fifty-four pharmacies stated that they would be willing to be commissioned to offer the service.

**Table 7.15 Location of pharmacies that provide Gonorrhoea Screening in Westminster, October 2017**

Trading Name	Address	Ward
Dolphins Pharmacy	9-11 The Broadway	St James's
Sedley Place	361 Oxford Street	West End
Sherlock Holmes Pharmacy	82a Baker St	Marylebone High Street

Source: Contractor Survey, 2017

**7.62** Within Westminster there is extensive provision to provide Sexually Transmitted Infections screening and treatment within Local Authority commissioned services currently outside of pharmacies. Additionally Westminster City Council is commissioning e-services that will provide remote chlamydia treatment within pharmacies from April 2018. Therefore the Health and Wellbeing board are satisfied that Sexual Health Screening and Treatment services is sufficient with no gaps.

### **Emergency Hormonal Contraception**

**7.63** The Emergency Hormonal Contraception (EHC) service aims to reduce unintended pregnancies. Pharmacies that provide EHC can provide signposting to mainstream contraception services and provide information in risks associated with sexually transmitted infections.

**7.64** Fifty-eight of the surveyed pharmacies provide Emergency Hormonal Contraception within a 72-hour period, these are located throughout the borough (see Table 7.16). All of these pharmacies, 56, offer the service privately. Fifty-five pharmacies offer the service within a 120 hour period and again majority of these are offer this as a private service (53/55). These are widely spread across Westminster, including one in Knightsbridge and Belgravia where the population of young people is highest.

**Table 7.16 Ward locations of pharmacies that provide EHC in 72 hour period, October 2017**

<b>Westminster Ward</b>	<b>Number of Pharmacies</b>	<b>Westminster Ward</b>	<b>Number of Pharmacies</b>
West End	10	Lancaster Gate	2
St James's	8	Westbourne	2
Marylebone High Street	7	Abbey Road	2
Hyde Park	5	Little Venice	2
Regent's Park	4	Church Street	1
Bryanston and Dorset Square	3	Bayswater	1
Warwick	3	Knightsbridge and Belgravia	1
Maida Vale	2	Tachbrook	1
Churchill	2	Harrow Road	1
Vincent Square	1		

**Source: Contractor Survey, 2017**

**7.65** The prevalence of under 18 conceptions is low in the borough, therefore Health and Wellbeing Board is satisfied that the EHC provided in local pharmacies is sufficient.

### **The Care Home Advice Service**

**7.66** The Care Home Advice Service involves providing advice and support to the staff and management within the care home on medicines management, to ensure the proper and effective ordering, storage and administration of drugs and appliances and proper record keeping. This is essential as residents in care homes are often on a large number of medicines that often require additional support with compliance.

**7.67** The Care Home Advice Service includes advice on medicines management, best practice guidelines and staff training and signposting.

**7.68** Twelve pharmacies responded indicated that they provide Care Home Advice services (outlined in Table 7.17) and another 43 would be willing to provide advice to care homes if commissioned to do so. No pharmacies were commissioned to deliver this service in the borough.

**Table 7.17: Locations of Care Home Advice Service provision by ward in Westminster, October 2017**

Westminster Ward	Number of Pharmacies	Westminster Ward	Number of Pharmacies
St James's	2	Maida Vale	1
Marylebone High Street	2	West End	1
Westbourne	1	Bryanston and Dorset Square	1
Tachbrook	1	Little Venice	1
Lancaster Gate	1	Regent's Park	1

Source: Contractor Survey, 2017

**7.69** The PNA did not identify any needs for the provision of commissioned Care Home Advice Service in the borough. Therefore Health and Wellbeing Board therefore identifies the current private provision of the Care Home Advice Service to be sufficient.

### **Out of Hours Palliative Care Service**

**7.70** In line with providing care closer to home, it is essential that there is good access to drugs used in the palliative environment for those patients choosing to die at home. Pharmacology management and support can support improvements to patients' quality of life while reducing costs and use of unnecessary medications.

**7.71** Out of hours palliative care drugs is a locally enhanced service that supports this. Three pharmacies in the borough, Benson Pharmacy in Westbourne, Star Pharmacy in St. James' and Pharmaciege in West End provide this service privately. No pharmacies have been commissioned to deliver this service in the borough.

**7.72** The nearest two pharmacies that that deliver commissioned Out of Hours Palliative Care Drugs are in Kensington and Chelsea. These are 24/7 Zafash Pharmacy and Lloyds Pharmacy on Canal Way.

**7.73** The Health and Wellbeing Board identifies the provision of the Out of Hours Palliative Care Service to be sufficient for supplying a necessary service. However further exploration of end of life care by relevant stakeholders is required to identify if there is a need for this service.

## Improvements and Better Access: Gaps in Provision (Schedule 1, paragraph 4)

**7.74** There are two services the Health and Wellbeing Board is satisfied would, if they were locally commissioned to be provided through existing pharmacies, may secure improvements, or better access to pharmaceutical services of a specific type. These are:

- HIV screening
- Child and family weight management services

### Summary of Other (Locally Enhanced) Services: current provision (schedule 1, paragraph 5) and Improvements and better access: gaps in provision (Schedule 1, paragraph 4)

The following section defines the enhanced services commissioned and delivered in response to local health and wellbeing needs. It includes Public Health commissioned services. The following services are **sufficient in providing a relevant services with no gaps**:

- Commissioned Services:
- Minor Ailments Scheme
  - NHS Health Checks
  - Supervised Administration
  - Needle and Syringe Exchange Services
  - Stop Smoking Services

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- Privately Delivered Services
- Alcohol Misuse Services
  - Weight Management Services
  - Emergency Hormonal Contraception
  - Sexual Health Screening and Treatment Services
  - Care Home Advice Service
  - Out of Hours Palliative Care Service

There are two services the Health and Wellbeing Board is satisfied may, if they were locally commissioned to be provided through existing pharmacies, secure improvements, or better access to pharmaceutical services of a specific type. These are:

- HIV screening
- Child and Family Weight Management Services

## Other Skills and Services Identified in the Pharmacy Contractor Survey

### Utilisation of Clinical Skills in the Pharmacy

- 7.75** Fifty-one of the pharmacies reported that that the clinical skills in their pharmacies were “totally utilised”, 22 respondents felt they were “partly utilised” and just one feeling that they were not utilised at all

### Pharmacists with a Special Interest

- 7.76** Four of the pharmacies surveyed have pharmacists with special interests.

### Health Champions

- 7.77** Health Champions are people who, with training and support, voluntarily bring their ability to relate to people and their own life experience to transform health and wellbeing in their communities. Forty-six of the pharmacies in Westminster that responded stated that they have a health champion.

### Health Trainers

- 7.78** Health trainers help people to develop healthier behaviour and lifestyles in their own local communities using behaviour change conversations. They offer practical support to change their behaviour to achieve their own choices and goals. Twelve of the pharmacies in Westminster that responded stated that they have a health trainer.

### Dementia Friendly Environment

- 7.79** Dementia Friendly environments offer additional support and understanding to people who have Dementia. To achieve Dementia Friendly Status pharmacy staff attend brief training on what it's like to live with dementia and make changes to their pharmacy environment so that it is more welcoming to some who suffers from dementia. Fifty-nine of the pharmacies in the reported being a dementia friendly environment.

### Public Health Campaigns

- 7.80** Pharmacies are required to participate in up to six public health campaigns at the request of NHS England. This can involve delivering prescription-linked interventions such as smoking cessation or simply the display and distribution of leaflets provided by NHS England.
- 7.81** Only one campaign was delivered through pharmacies a year in the last few years. In November 2016 the campaign was focused on Oral Health and Pain Management for children and young people, in 2015 it was on Raising Awareness of Asthma Management in children and young people.
- 7.82** Better coordination is required between NHS England, Public Health England, CCGs and Local Authorities to ensure pharmacies are better utilised to deliver key health promotion messages to the public. Consideration should be given to schedule further local Child and Family Weight Management campaigns to address the high levels of child obesity in Westminster.

# Appendices

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Appendix A – Terms of Reference

Appendix B – Community Questionnaire

Appendix C – Community Engagement Plan

Appendix D - Pharmacy listings and opening times and Essential Services