



# **Bromley Pharmaceutical Needs Assessment**

**Draft for consultation  
September 2014**

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## Executive Summary

### Introduction

The Health and Social Care Act of 2012 brought about significant reforms to the NHS, one of which included the inception of Health and Wellbeing Boards (HWB) across England. Health and Wellbeing Boards were designed to bring together the NHS, public health, adult social care and children's services as well as elected representatives and Local Healthwatch. The Bromley HWB has many responsibilities, one of which is to develop and produce a Pharmaceutical Needs Assessment (PNA). The PNA looks specifically at the current provision of pharmaceutical services in Bromley and determines whether these pharmaceutical services meet the needs of the population currently and over the lifetime of this PNA (2015-18) and determines if there are or are likely to be any potential gaps within the service provision.

The primary purposes of the Bromley Pharmaceutical Needs Assessment are summarised below:

- The PNA will be used by the NHS when making decisions on applications to open new pharmacies and dispensing appliance contractor premises; or applications from current pharmaceutical providers to change their existing regulatory requirements.
- The PNA will help the HWB to work with providers to target services to the area where they are needed.
- The PNA will inform interested parties of the PNA and enable collaborative work to plan, develop and deliver pharmaceutical services for the population.
- The PNA will help inform commissioning decisions by local commissioning bodies.

### Local context

The health of people in Bromley is generally better than the England average. Overall, deprivation in Bromley is below average, but there are areas within the Borough where there is significant deprivation. The population of Bromley is growing, with 320,057 residents in 2014, projected to increase to 330,361 by 2018. The proportion of older people in Bromley (aged 65 and over) is expected to increase gradually from 17.74% of the population in 2014 to 17.84% by 2019. The pattern of population change in the different age groups is variable between wards, with some wards, such as Darwin, experiencing a large rise in the proportion of young people and others such as Biggin Hill experiencing a large rise in the proportion of over 75s. The latest (2014) GLA population projection estimates show that 17.34% of the population is made up of Black and minority ethnic (BME) groups.

Life expectancy at birth in Bromley has been rising steadily over the last 20 years, currently at 80.7 years for men and 84.5 years for women. However, there is an 8.7

year gap for men and 7.9 years for women between the highest and lowest life expectancy wards in Bromley, with the lowest life expectancy in the most deprived wards.

Mortality in Bromley is chiefly caused by circulatory disease (32%) and cancer (30%) with higher mortality rates for both conditions in the more deprived areas of the borough. There is a need for continued action to address health inequalities associated with deprivation.

Pharmaceutical services in Bromley are provided through a network of 60 pharmacy contractors, including four 100 hour contracts.

Good pharmaceutical services are an essential component of the healthcare landscape in Bromley and provide not only essential services, but a range of locally commissioned services including stop smoking advice, emergency contraception, Chlamydia testing and treatment, needle exchange, supervised drug dependency treatment and NHS health checks.

Pharmacies are an accessible source of advice and support, open throughout the day, into the evening and at weekends.

The patient survey carried out as part of this PNA revealed that pharmacies in Bromley are used for a wide range of services and are rated very highly by users.

To meet the needs of the growing population, and to help reduce inequalities in Bromley, it is vital that appropriate pharmaceutical services are in place and that they are accessible and improve choice to support the most deprived and vulnerable individuals in Bromley.

## **Findings and Assessment**

As of September 2014, there are 60 pharmacies registered in the Bromley HWB area.

The assessment found that the population of Bromley's HWB area currently has adequate numbers of pharmaceutical contractors to meet the needs of the population. This is clearly demonstrated through the following points:

- There is good distribution of pharmacies in Bromley providing adequate choice within a reasonable travel distance.
- Our survey results show that 74% prefer to use a pharmacy near where they live and the access demonstrated is sufficient.
- 100% of the Bromley population live within a 10 minute car journey to a pharmacy.
- Over 90% of prescriptions generated by Bromley prescribers are dispensed in the area.

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The PNA considered the provision of:

**Necessary Services** – these are services that the regulations describe as necessary to meet a current need

**Relevant Services** – these are services which secure improvements, or better access to pharmaceutical services.

SERVICES	NECESSARY OR RELEVANT
<b>ESSENTIAL SERVICES- these are fundamental pharmacy services.</b>	
ALL ESSENTIAL SERVICES	NECESSARY
<b>ADVANCED SERVICES</b>	
Medicines Use Review (MUR) - these help to improve medicines adherence and outcomes for patients with long term conditions. This service supports the delivery of local strategic outcomes.	NECESSARY
New medicines Service (NMS) - This service supports patients with long term conditions, who are newly prescribed certain medicines, to help improve adherence.	NECESSARY
AUR	RELEVANT
SAC	RELEVANT
<b>LOCALLY COMMISSIONED SERVICES</b>	
SUPERVISED CONSUMPTION	NECESSARY
NEEDLE SYRINGE PROVISION	RELEVANT
EMERGENCY HORMONAL CONTRACEPTION	RELEVANT
CHLAMYDIA SCREENING AND TREATMENT	RELEVANT
PAN-LONDON C-CARD SCHEME	RELEVANT
HIV POINT OF CARE TESTING	RELEVANT
SMOKING CESSATION SERVICES	RELEVANT
NHS HEALTHCHECKS	RELEVANT
SEASONAL INFLUENZA VACCINATION	RELEVANT
TAILORED DISPENSING SERVICE	RELEVANT

### ***Essential Services***

As regards **Essential Services**, no gaps have been identified, and we have concluded that there is adequate provision in terms of choice and access for Bromley residents.

### ***Advanced Services***

**Advanced services** are essential in improving outcomes for patients with long term conditions.

We consider Medicines Use Reviews (MURs) to be a **necessary service** for our population. As patients can usually only access this service from their regular pharmacy we would wish to see all pharmacies provide this service.

The New Medicines Service (NMS) service is considered to be a **relevant service**. We see this service as an important service which is not being delivered by all pharmacies across Bromley. The service is however available from other pharmacies and in each area there is provision if required. The service supports many of our local outcomes.

### ***Locally Commissioned Services***

**Locally Commissioned Services** are those that are commissioned by the LA, CCGs or other commissioners in the area.

The Needle Exchange Service is an important public health service which reduces risk to drug users and the general population. It is considered to be a **relevant service**. Pharmacies provide important access during evenings and weekends. There is provision from the wider treatment system during weekdays. The current pattern of provision is consistent with the needs of the population and there are no gaps in provision.

The Supervised Consumption Service performs a critical role in supporting drug users in treatment to manage their treatment programme while minimising the diversion of drug treatment onto the streets. The supervised administration service from pharmacies is a necessary service. The pattern of provision is consistent with the needs of the population and there are no gaps in provision.

The Emergency Hormonal Contraception service is considered to be a relevant service providing additional access and choice to emergency contraception. The provision from pharmacies in Bromley is currently adequate with 22 providers.

The Chlamydia Screening and Treatment Service is a relevant service for the population and one which pharmacy, along with other providers makes a valuable contribution towards delivering. There is good coverage by pharmacies providing this service across Bromley, but work is ongoing to encourage more pharmacies to participate.

Bromley commissions a condom distribution service with 19 pharmacies participating in the C-Card scheme allowing for 14-24 year olds registration to receive free condoms. This scheme is an integral component to providing an integrated Sexual Health Service in pharmacy setting and is considered to be a **relevant service**. This is a fairly new addition to the integrated sexual health service in pharmacy and therefore needs investment in developing and promoting awareness among young people in Bromley.

HIV Point of Care testing in community pharmacies is a **relevant service** which improves access in areas of high prevalence. This is a newly commissioned scheme which is set up in an area where prevalence rate is highest in the borough. Careful monitoring is required to assess the appropriate roll out of the scheme to other areas of need.

The Stop Smoking Service is an important strand of efforts to reduce smoking rates locally. It is considered to be a **relevant service**. Pharmacy is well placed to increase service accessibility as well as access to nicotine replacement therapies at the point of care. We note that there is no gap in provision given that the areas of high prevalence in each locality are sufficiently provided with pharmacies that

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provide stop smoking services and data shows that most of quits in Bromley use services other than pharmacies. The absence of pharmacy provision is therefore not an absence of service provision for that population.

NHS Health Checks are considered to be a relevant service provided by pharmacies, offering choice to residents. There are no gaps in provision, as there is provision either provided by, or linked with, every GP surgery in Bromley.

The Tailored Dispensing Service is commissioned by the CCG, and aims to support patients with long term conditions to use their prescribed medicines independently and to support self-care. This service is considered to be a relevant service for the population. No gaps have currently been identified in the provision of this service.

The Flu Vaccination Service is commissioned by NHS England, and is considered to be a relevant service. No gaps in provision have been highlighted at this time.

### **Conclusion**

We have concluded that at present we have adequate provision in terms of choice and access to pharmaceutical services in order to meet the needs of our population.

In terms of future need, no specific gaps in provision have been identified; however, any potential changes in services will need to be considered alongside any changes taking place within the NHS, and in line with population need as assessed in the JSNA and the Health & Wellbeing Strategy.



## 1 Introduction

This document has been prepared by Bromley's Health and Wellbeing Board (HWB) in accordance with the NHS Pharmaceutical and Local Pharmaceutical Services Regulations 2013. It replaces the Pharmaceutical Needs Assessment (PNA) published by the former Bromley PCT.

### 1.1 Background and legislation

The Health Act 2009<sup>1</sup> made amendments to the National Health Service (NHS) Act 2006 stating that each Primary Care Trust (PCT) must in accordance with regulations:

- Assess needs for pharmaceutical services in its area
- Publish a statement of its first assessment and of any revised assessment

The regulations stated that a PNA must be published by each PCT by the 1st February 2011. There was a duty to rewrite the PNA within 3 years or earlier if there were any significant changes which would affect the current or future pharmaceutical needs within the PCT's locality. This meant that subsequently revised PNAs were due to be produced by February 2014.

However, the Health and Social Care Act 2012 brought about the most wide-ranging reforms to the NHS since its inception in 1948. These reforms included the abolition of PCTs and the introduction of Clinical Commissioning Groups (CCGs) who now commission the majority of NHS services. Public Health functions were not transferred to CCGs and are now part of the remit of Local Authorities.

In order to ensure integrated working and plan how best to meet the needs of any local population and tackle local inequalities in health, the 2012 legislation called for Health and Wellbeing Boards (HWB) to be established and hosted by local authorities. These boards bring together the NHS, public health, adult social care and children's services, including elected representatives and Local Healthwatch.

The Health and Social Care Act 2012<sup>2</sup> transferred responsibility for the developing and updating of PNAs to HWBs. It also made provision for a temporary extension of PCT's PNAs and access to them by NHS England and HWBs.

In order that these newly established HWBs had enough time to gather the information and publish a new PNA, the NHS Pharmaceutical and Local Pharmaceutical Services Regulations 2013<sup>3</sup> gave a requirement that each HWB must publish its first pharmaceutical needs assessment by 1st April 2015, unless a need for an earlier update is identified.

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<sup>1</sup> <http://www.legislation.gov.uk/ukpga/2009/21/part/3/crossheading/pharmaceutical-services-in-england?view=plain>

<sup>2</sup> <http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted>

<sup>3</sup> <http://www.legislation.gov.uk/uksi/2013/349/regulation/6/made>

The preparation and consultation on the PNA should take account of the HWB's Joint Strategic Needs Assessment (JSNA) and other relevant local strategies in order to prevent duplication of work and multiple consultations with health groups, patients and the public.

The PNA, published by the HWB by April 2015, will have a maximum lifetime of three years. HWBs will also be required to publish a revised assessment when significant changes to the need for pharmaceutical services are identified, unless this is considered a disproportionate response.

As part of developing their first PNA, HWBs must undertake a consultation for a minimum of 60 days. The 2013 Regulations list those persons and organisations that the HWB must consult. This list includes:

- 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 HWB

The Health and Social Care Act 2012 also transferred responsibility for using PNAs as the basis for determining market entry to a pharmaceutical list from PCTs to NHS England. The PNA will be used by NHS England when making decisions on applications to open new pharmacies and dispensing appliance contractor premises; or applications from current pharmaceutical providers to change their existing regulatory requirements.

Such decisions are appealable to the NHS Litigation Authority's Family Health Services Appeal Unit (FHSAU), and decisions made on appeal can be challenged through the courts.

PNAs will also inform the commissioning of enhanced services from pharmacies by NHS England, and the commissioning of services from pharmacies by the local authority and other local commissioners eg CCGs.

## **1.2 Duty of the Health and Wellbeing Board**

The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 set out the legislative basis and the full HWB responsibilities for developing and updating PNAs, which may be summarised as follows:

- Publish the PNA. The first PNA for the HWB area must be published by 1 April 2015
- Maintain and keep the PNA up to date
- In response to changes in the availability of pharmaceutical services, there is a requirement for the HWB to determine whether or not it needs to revise the

PNA or, where this is thought to be a disproportionate response, to issue a supplementary statement setting out the change(s). As a minimum, a new PNA must be published every 3 years.

- In addition, the HWB is required to keep up to date a map of provision of NHS Pharmaceutical Services within its area.
- The HWB must make the PNA, and any supplementary statements, available to NHS England and neighbouring HWBs.

### **1.3 Purpose of the PNA**

This PNA will serve several key purposes:

- It will be used by NHS England when making decisions on applications to open new pharmacies and dispensing appliance contractor premises; or applications from current pharmaceutical providers to change their existing regulatory requirements. Decisions on whether to open new pharmacies are not made by the HWB. If a person wants to provide NHS pharmaceutical services, they are required to apply to the NHS to be included on a pharmaceutical list. Pharmaceutical lists are compiled and held by NHS England. Under the NHS (Pharmaceutical Services and Local Pharmaceutical Services) a person who wishes to provide NHS pharmaceutical services must generally apply to NHS England to be included on a relevant list by proving they are able to meet a pharmaceutical need as set out in the relevant PNA. There are exceptions to this, such as applications for needs not foreseen in the PNA or to provide pharmaceutical services on a distance-selling (internet or mail order only) basis. The relevant NHS England Area Team will then review the application and decide if there is a need for a new pharmacy in the proposed location. When making the decision, NHS England is required to refer to the local PNA.
- It will help the HWB to work with providers to target services to the areas where they are needed. It will inform interested parties of the pharmaceutical needs in Bromley and enable work to plan, develop and deliver pharmaceutical services for the population.
- It will inform commissioning decisions by local commissioning bodies including local authorities (public health services from community pharmacies), NHS England and Clinical Commissioning Groups (CCGs).

### **1.4 Circumstances under which the PNA is to be revised or updated**

It is important that the PNA reflects changes that affect the need for pharmaceutical services in Bromley. Where the HWB becomes aware that a change may require the PNA to be updated then a decision to revise the PNA will be made. Not all changes to pharmaceutical services will result in a change to the need for services. Where required, the HWB will issue supplementary statements to update the PNA as changes take place to the provision of services locally.

## 1.5 Scope of the Pharmaceutical Needs Assessment

A Pharmaceutical Needs Assessment is defined in the regulations as follows:

*“The statement of the needs for pharmaceutical services which each HWB is required to publish by virtue of section 128A of the 2006 Act(1) (pharmaceutical needs assessments), whether it is the statement of its first assessment or of any revised assessment, is referred to in these Regulations as a “pharmaceutical needs assessment”.*

*The pharmaceutical services to which each pharmaceutical needs assessment must relate are all the pharmaceutical services that may be provided under arrangements made by the NHS Commissioning Board (now known as NHS England) for –*

- *the provision of pharmaceutical services (including directed services) by a person on a pharmaceutical list*
- *the provision of local pharmaceutical services under a Local Pharmaceutical services (LPS) scheme (but not LP services which are not local pharmaceutical services); or*
- *the dispensing of drugs and appliances by a person on a dispensing doctors list (but not other NHS services that may be provided under arrangements made by the NHSCB with a dispensing doctor).”*

Pharmaceutical services are defined by reference to the regulations and directions governing pharmaceutical services provided by community pharmacies (which may be LPS providers), dispensing doctors and appliance contractors.

Whether a service falls within the scope of pharmaceutical services for the purposes of PNA depends on who the provider is and what is provided:

For **dispensing practices** the scope of the service to be assessed in the PNA is the dispensing service. This means that, for the purposes of the PNA, it is concerned with whether patients have adequate access to dispensing services, including where those services are provided by dispensing doctors but not concerned with assessing the need for other services dispensing doctors may provide as part of their national or local contractual arrangements.

For **appliance contractors** the scope of the service to be assessed in the PNA is the dispensing of appliances and the provision of Appliance Use Review (AUR) service and Stoma Appliance Customisation Service (SAC). This means that, for the purposes of the PNA, it is concerned with whether patients have adequate access to dispensing services, including dispensing of appliances, AURs and SACs where these are undertaken by an appliance contractor but not concerned with other services appliance contractors may provide.

For **community pharmacy contractors** the scope of the services to be assessed in the PNA is broad and comprehensive. It includes the essential, advanced and enhanced services elements of the pharmacy contract whether provided under the terms of services for pharmaceutical contractors or under LPS contracts.

Other providers may deliver services that meet a particular pharmaceutical service need although they are not considered pharmaceutical services under the relevant regulations. It is therefore important that these are considered as part of the assessment.

## 1.6 What is excluded from the scope of this assessment

The PNA has a regulatory purpose that sets the scope of the assessment. Pharmaceutical services are evident in other areas of work in which the HWB has an interest but are excluded from this assessment. These include provision from prison pharmacy and secondary care services where patients may be obtaining a type of pharmaceutical service that is not covered by this assessment.

## 1.7 Minimum Requirements for the PNA

Schedule 1 of the NHS 2013 Regulations state that the PNA must include, as a minimum, a statement of the following:

- **Necessary services** - pharmaceutical services which have been assessed as required to meet a pharmaceutical need. This should include their current provision (within the HWB area and outside of the area) and any current or likely future gaps in provision.
- **Relevant services** - services which have secured improvements, or better access, to pharmaceutical services. This should include their current provision (within the HWB area and outside of the area) and any current or future gaps in provision.
- Other NHS services, either provided or arranged by a Local Authority, NHS England, a CCG, an NHS Trust or Foundation Trust which either impact upon the need for pharmaceutical services, or which would secure improvements, or better access to, pharmaceutical services within the area.
- A map showing the premises where pharmaceutical services are provided.
- An explanation of how the assessment was made.

## 1.8 Development of the PNA

The process of developing the PNA has taken into account the requirement to involve and consult people about changes to health services. The specific legislative requirements in relation to development of PNAs were considered.

**STAGE 1:** The PNA was developed using a project management approach. A steering group was established. The group met regularly during the development of the PNA. The steering group included representation from the following groups:

- Local Pharmaceutical Committee
- Local Medical Committee
- Primary Care Commissioning (PCC)
- NHS England (NHSE) area team
- Bromley Public Health
- Bromley Clinical Commissioning Group
- Healthwatch Bromley
- Voluntary Sector Strategic Network (VSSN)

Stakeholder views were gathered through feedback in meetings, via telephone or feedback online via email.

**STAGE 2:** The contractor questionnaire and patient survey were approved by the steering group. The contractor questionnaire was undertaken during autumn 2014. A patient survey was undertaken in August 2014 of the views of Bromley residents on the current pharmaceutical services provision. Once completed the results of both were analysed. The contractor survey results were validated against data already held.

**STAGE 3:** The content of the PNA including demographics, localities and background information was approved by the steering group. In looking at the health needs of the local population, the local Joint Strategic Needs Assessment (JSNA), the CCG's Annual Health Report and other health data were considered.

**STAGE 4:** As required by legislation, a consultation exercise with stakeholders was carried out for 60 days. The list of stakeholders consulted included the following groups:

- The Local Pharmaceutical Committee (LPC)
- The Local Medical Committee (LMC)
- Persons on the pharmaceutical list and ESPLPS
- Healthwatch Bromley
- Other patient, consumer and community groups in the area with an interest in the provision of pharmaceutical services in the area:
  - Community Links Bromley
  - Voluntary Services Strategic Network (VSSN)
  - Bromley Healthcare
  - St Christopher's Hospice
- Bromley CCG
- NHS trusts and NHS foundation trusts in the area
- King's College Hospital NHS Foundation Trust
- Oxleas NHS Foundation Trust
- NHS England.
- Neighbouring HWBs.

## **1.9 Consultation on the PNA**

A statutory consultation exercise was carried out over the autumn of 2014 in accordance with the 2013 Regulations for a period of 60 days until 22 December 2014. The statutory consultees were written to regarding the consultation, provided a link to the council's web site where the draft PNA was published and invited to respond on line. Paper copies were made available to those unable to access on line.

A report of the consultation including any changes to the PNA was produced before the final PNA was published and is included at appendix F.

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

Located in South-East London, Bromley is the largest of the London boroughs. At approximately 150 square kilometres it is 30% larger than the next largest borough. The communities within Bromley differ substantially. The North-East and North-West of the borough contend with similar issues (such as higher levels of deprivation and disease prevalence) to those found in the inner London Boroughs we border (Lambeth, Lewisham, Southwark, Greenwich), while in the South, the borough compares more with rural Kent and its issues.

The PNA steering group considered how the areas in Bromley could be defined for the PNA.

## **1.11 Rationale for selection of PNA Localities**

Options considered:

- a) The initial Bromley PNA consisted of three localities. These were now considered to be too large to differentiate the populations within Bromley.
- b) Six localities to match the Integrated Teams in Bromley – there is considerable overlap between these areas as well as gaps in other areas.
- c) Eight localities as identified in the Orpington and Beckenham Needs Assessments – these were based on deprivation and population make up – but are not all geographically contiguous and eight was considered to be too many localities.
- d) The preferred option was four localities:

Comprising the North of the Borough: The features of this locality are

- higher deprivation levels
- a younger population
- a higher proportion of ethnic minorities
- more urban

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- higher risk factors for circulatory disease

Comprising the East of the Borough: The features of this locality are

- higher deprivation levels
- a predominantly white population with young and old
- A settled Gypsy Traveller population
- A higher burden of disease.

Comprising Central area of the borough: The features of this locality are

- lower levels of deprivation
- long life expectancy
- a high volume of Long Term Conditions<sup>4</sup> associated with an older population

Comprising the South of the Borough: The features of this locality are

- moderate levels of deprivation
- a lower density population
- more rural.

For the purposes of this PNA the agreed localities are **North, South, East and Central** and the wards included in each locality are shown in Table 1 below.

**Table 1 Localities of the Bromley PNA**

<b>Bromley PNA locality wards</b>			
<b>North</b>	<b>Central</b>	<b>East</b>	<b>South</b>
Bickley	Bromley Common and Keston	Cray Valley East	Biggin Hill
Bromley Town	Chelsfield and Pratts Bottom	Cray Valley West	Darwin
Chislehurst	Farnborough and Crofton	Orpington	
Clock House	Hayes and Coney Hall		
Copers Cope	Petts Wood and Knoll		
Crystal Palace	Shortlands		
Kelsey and Eden Park	West Wickham		
Mottingham and Chislehurst North			
Penge and Cator			
Plaistow and Sundridge			

<sup>4</sup> Long term conditions are conditions that can't be cured but can be controlled by medication or other therapies. Examples include diabetes, hypertension and asthma.



## **2 Assessment of need for pharmaceutical services**

Assessing the need for pharmaceutical services is a complex process. In addition to taking account of all views submitted from the stakeholders outlined above, this PNA considered a number of factors, including:

- The size and demography of the population across Bromley
- Whether there is adequate access to pharmaceutical services across Bromley
- Different needs of different localities within Bromley
- Pharmaceutical services provided in the area of neighbouring HWBs which affect the need for pharmaceutical services in Bromley.
- Other NHS services provided in or outside its area which affect the need for pharmaceutical services in Bromley.
- Whether further provision of pharmaceutical services would secure improvements, or better access, to pharmaceutical services, or pharmaceutical services of a specified type, in the area.
- Likely changes to needs in the future occurring due to changes to the size of the population, the demography of the population, and risks to the health or wellbeing of people in its area which could influence an analysis to identify gaps in the provision of pharmaceutical services.

## 2.1 Pharmaceutical Services

### The Community Pharmacy Contractual Framework

The Community Pharmacy Contractual Framework was introduced in 2005. Under the framework, there are three types of service which can be provided by community pharmacy and/or appliance contractors:

- Essential services
- Advanced services
- Locally enhanced services

When assessing service provision, there are two considerations of interest for the PNA: opening hours and service necessity/relevance. These are defined as:

**Core and Supplementary hours:** A pharmacy has 40 core contractual hours (or 100 for those that have opened under the former exemption from the control of entry test), which cannot be amended without the consent of NHSE, together with supplementary hours, which are all the additional opening hours. A pharmacy may also have more than 40 core hours where it has made an application based on that higher number, and NHSE has agreed that application.

**Necessary and Relevant Services:** Necessary services i.e. pharmaceutical services which have been assessed as required to meet a pharmaceutical need. This should include their current provision (within the HWB area and outside of the area) and any current or likely future gaps in provision. Relevant services i.e. services which have secured improvements, or better access, to pharmaceutical services, which may include choice. This should include their current provision (within the HWB area and outside of the area) and any current or future gaps in provision.

#### 2.1.1 Essential Services

Pharmacies have to open for a minimum of 40 hours per week. They have to provide essential services as listed in Table 2.

**Table 2 Provision included in the contractual framework for Essential Services**

SERVICE	DESCRIPTION
Dispensing	The safe supply of medicines or appliances. Advice is given to patient about the medicines being dispensed and how to use them. Records are kept of all medicines dispensed and significant advice provided, referrals and interventions made.
Repeat dispensing	The management of repeat medication for up to one year, in partnership with the patient and prescriber. The patient will return to the pharmacy for repeat supplies, without first having to visit the GP surgery. Before each supply the pharmacy will ascertain the patient's need for a repeat supply of a particular medicine.
Disposal of unwanted medicines	Pharmacies accept unwanted medicines from individuals. The medicines are then safely disposed of.
Promotion of Healthy Lifestyles (Public health)	Opportunistic one to one advice is given on healthy lifestyle topics, such as stopping smoking, to certain patient groups who present prescriptions for dispensing. Pharmacies will also get involved in local campaigns organised by NHS England.
Signposting patients to other healthcare providers	Pharmacists and staff will refer patients to other healthcare professionals or care providers when appropriate.
Support for self-care	The provision of advice and support by pharmacy staff to enable people to derive maximum benefit from caring for themselves or their families.
Clinical governance	Pharmacies must have a system of clinical governance to support the provision of excellent care.

### 2.1.2 Advanced Services

Advanced services currently comprise of four services:

- Medicines Use Reviews
- Appliance Use Reviews
- Stoma Appliance Customisation.
- New Medicines Service

### 2.1.3 Medicines Use Reviews

Medicines Use Review (MUR) is a service provided under the Community Pharmacy Contractual Framework. The pharmacist conducts an adherence focused medicines review with the patient. The review assesses the patient's use of their medicines and attempts to identify and address any problems they may be experiencing. The MUR can be conducted on a regular basis, e.g. every 12 months, or on an ad hoc basis, when a significant problem with a patient's medication is highlighted during the dispensing process (Prescription Intervention). Where necessary, a referral is made to the patient's GP.

The service is nationally available to a national service specification which has been applied in Bromley. MURs are conducted in a private consultation area which ensures patient confidentiality. MURs can only be provided by community pharmacists.

A pharmacy that is accredited to provide MURs can currently provide a maximum of 400 MURs in a year. 70% of MURs undertaken have to be from a specified group of patients:

- Patients taking certain high risk medications
- Patients recently discharged from hospital
- Patients prescribed certain respiratory medicines
- Patients diagnosed with cardiovascular disease or another condition which puts them at increased risk of developing cardiovascular disease.

#### **2.1.4 Appliance Use Reviews (AUR)**

This service is similar to the MUR service, it aims to help patients better understand and use their prescribed appliances (e.g. stoma appliances) rather than their medicines. The service is conducted in a private consultation area or in the patient's home. This service can be provided by either pharmacy or appliance contractors.

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

Stoma Appliance Customisation (SAC) involves the customisation of a quantity of more than one stoma appliance, based on the patient's measurements or a template.

#### **2.1.6 New Medicines Service (NMS)**

This service is designed to improve patients' understanding of a newly prescribed medicine for a long term condition, and help them get the most from the medicine. The NMS is conducted in a private consultation area which ensures patient confidentiality. This service can be provided by pharmacies only.

The NMS was implemented as a time-limited service commissioned until March 2013. However, following a positive outcome of the Department of Health funded academic evaluation of the service it has been agreed that NHS England will continue commissioning the service.

#### **2.1.7 Local Enhanced Services (LES) and Locally Commissioned Services (LCS)**

This group of services is commissioned locally by the NHSE area team, Clinical Commissioning Groups (CCGs) and Local Authorities (LAs) in order to meet the needs of their population. A wide range of services are commissioned across England including:

- minor ailments management
- palliative care services

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- care home services
- head lice management services
- gluten free food supply services
- services to schools
- out of hours services
- supplementary and independent prescribing by pharmacists
- medicines assessment and compliance support
- vaccination service

Local services that are commissioned by the NHSE are called local enhanced services (LES). These can include services such as pharmacy out of hours (OOH) rota and palliative care. Similar locally commissioned services (LCS) by the local authority or CCGs such as public health services are not considered to be LES, but regard is had to these

Other services commissioned from local authorities and CCGs fall outside the definition of enhanced services. They have no bearing on NHSE decisions on pharmacy applications although regard is had to them.

Public health locally commissioned services can include:

- Substance misuse services: needle and syringe services; supervised consumption of medicines to treat addiction; Hepatitis testing and Hepatitis B and C vaccination; HIV testing; provision of naloxone to drug users for use in emergency overdose situations
- Sexual health services: emergency hormonal contraception services; condom distribution; pregnancy testing and advice; Chlamydia screening and treatment; other sexual health screening, including syphilis, HIV and gonorrhoea; contraception advice and supply (including oral and long acting reversible contraception)
- Stop smoking services: proactive promotion of smoking cessation through to provision of full NHS stop smoking programmes
- NHS Health Checks for people aged 40-74 years: carrying out a full vascular risk assessment and providing advice and support to help reduce the risk of heart disease, strokes, diabetes and obesity
- Weight management services: promoting healthy eating and physical activity through to provision of weight management services for adults who are overweight or obese
- Alcohol misuse services: providing proactive brief interventions and advice on alcohol with referral to specialist services for problem drinkers.

These services can be called LES if the LA or CCG ask NHSE to commission them on their behalf.

### **2.1.8 Non commissioned value added services**

Community pharmacies provide some services that are not commissioned from any particular sources. These services add value to the local provision. They can include:

- Repeat prescription collection and delivery service
- Travel vaccinations
- Screening services
- Weight management
- Provision of dispensing private prescriptions
- Sale of over the counter medicines

## **2.2 Market Entry and Pharmaceutical Providers**

Four categories of pharmacy applications were exempt from the reformed “necessary or expedient” definition introduced as part of the 2005 Pharmaceutical Services Regulations reforms in 2005. These were:

- pharmacies based in approved retail areas (large retail shopping areas of 15,000 square metres or more leasehold gross floor space away from town centres)
- pharmacies that intended to open for at least 100 hours per week
- consortia establishing new one stop primary centres
- wholly mail order or internet-based (distance-selling) pharmacy services.

Under the 2012 regulations there is only one remaining exemption category for “mail order or internet-based (distance-selling) pharmacy services” known as “distance selling”. Existing pharmacies opened under the 2005 exemption categories will still be required to meet the conditions of the category the application was granted under.

### **2.2.1 100 hours pharmacies**

Certain pharmacies opened under previous regulations undertaking to provide pharmaceutical services for 100 hours a week. The NHSE may not vary or remove the 100 hour conditions on premises that were granted their contract under the 100 hour application exemption.

### **2.2.2 Distance selling pharmacies (Internet pharmacies)**

Patients have the right to access pharmaceutical services from any community pharmacy including mail order/wholly internet pharmacy of their choice and therefore can access any of the many internet pharmacies available nationwide. New conditions have been introduced in the regulations, which require all distance selling pharmacies (including those admitted under the 2005 regulations) to be able to provide essential services safely, without face to face contact at the premises, and ensure that persons anywhere in England are able to access the essential services.

### **2.2.3 Essential Small Pharmacies Local Pharmaceutical Services**

The Essential Small Pharmacies Local Pharmaceutical Services (ESPLPS) was developed to replace the Essential Small Pharmacies Scheme (ESP), following the agreement of a new national contractual framework for community pharmacy. It came into force in April 2006. The scheme was set up to run for five years, and in the summer of 2011 it was extended for a further two years. The scheme allowed PCTs to nominate pharmacies as being necessary for the proper provision of pharmaceutical services in its area, but where viability was questionable without additional financial support, because of the small number of items dispensed. These contracts are due to be terminated in March 2015.

There is one pharmacy in the North Locality of Bromley with such a contract.

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

Appliance contractors provide services to people who need appliances such as stoma and incontinence care aids, trusses, hosiery, surgical stockings and dressings. They do not supply drugs. However, pharmacies and dispensing doctors can also supply appliances.

### **2.2.5 Dispensing doctors**

Provision for doctors to provide pharmaceutical services in certain circumstances has been made in various NHS Acts and Regulations for many decades. Doctors in certain localities are allowed to offer a dispensing service to eligible patients. This PNA does not define rurality. There are no dispensing doctors in Bromley.

### **2.2.6 Hospital pharmacy**

Hospitals provision for Bromley residents is commissioned from:

- King's College Hospital NHS Foundation Trust at two sites- Denmark Hill campus and Princess Royal University Hospital
- Oxleas NHS Foundation Trust
- Guy's and St Thomas' NHS Foundation Trust
- South London and Maudsley NHS Foundation Trust
- Lewisham and Greenwich NHS Trust
- Croydon Health Services NHS Trust

They provide pharmaceutical services to the hospital population.

The PNA makes no assessment of the need for pharmaceutical services in hospital settings.

### **2.2.7 Other provision of pharmaceutical services**

Pharmaceutical services are provided by other services. These can include arrangements for:

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- Prison population
- Services provided in neighbouring HWB areas
- Private providers

The PNA makes no assessment of these services.

### **2.2.8 GP Practices**

There are 45 GP practices in Bromley.



### 3 Context in Bromley

Key findings from the Census 2011:

- The population of Bromley increased 4.7% since the 2001 census (295,532 in 2001 compared with 309,392 in 2011).
- Over 33% of the adult population are single
- Almost half the adult population (48.5%) is married or in a registered same-sex civil partnership.
- 11% of adults are divorced or formerly in a same-sex civil partnership which is now legally dissolved or separated.
- Widows and widowers make up nearly 7% of the population.
- Married couple households make up 34.4% of the total households.
- One-person households represent 31.2% of all households.
- Almost 31% of households have two or more cars or vans.
- 77.4% of the population gave their ethnic origin as White British.
- 85.6% of the population of Bromley were born in the UK.
- 60.7% of the population gave their religion as Christian.
- Over 66% of the economically active population are in employment with only 2.3% unemployed.
- 13.3% of the population are retired.
- Just over 33% of Bromley's adult population have qualification at a degree level or higher.
- 71.7% of homes are owner occupied (owned outright, owned with a mortgage or loan or shared ownership).

#### 3.1 Demographics (from JSNA)<sup>5</sup>

- The latest (2014) estimate of the resident population of Bromley is 320,057, having risen by 21,775 since 2001.
- The resident population is expected to increase to 330,361 by 2018 and 339,154 by 2023.
- Although the number of 0 to 4 year olds is projected to decrease by 2019 to 21,016 and then to 20,825 by 2024, there has been an increase in the number of live births since 2002.
- The proportion of older people in Bromley (aged 65 and over) is expected to increase gradually from 17.74% of the population in 2014 to 17.84% by 2019 and 18.28% by 2024.
- The pattern of population change in the different age groups is variable between wards, with some wards, such as Darwin, experiencing a large rise in the proportion of young people and others such as Biggin Hill experiencing a large rise in the proportion of over 75s.

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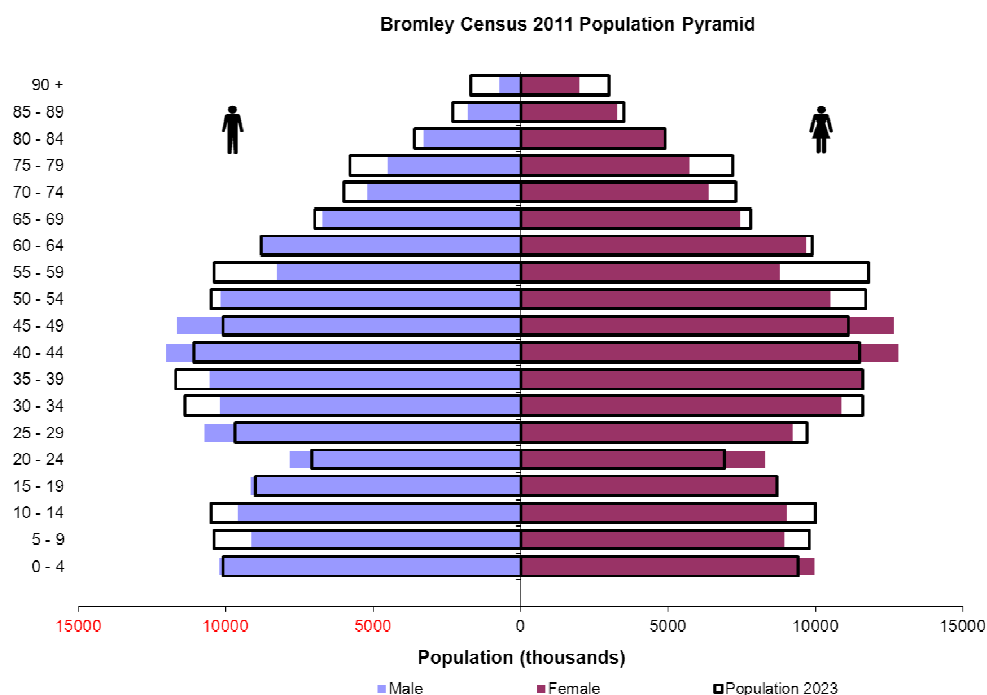
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<http://cde.bromley.gov.uk/documents/s50007165/Joint%20Strategic%20Needs%20Assessment%20201213%2014022013%20Health%20Scrutiny%20Sub-Committee.pdf> Accessed-14 February 2013

- The latest (2014) GLA population projection estimates show that 17.34% of the population is made up of Black and minority ethnic (BME) groups; an increase from 8.4% in 2001.
- The BME group experiencing the greatest increase within Bromley’s population is the Black African community, from 1.1% of the population in 2001 to 4.7% of the population in 2024.

The graph below at Figure 1 from the Office for National Statistics (ONS) 2011 Census data provides an overview of the age and gender of the population within Bromley.

**Figure 1**



The age distribution of people in Bromley is very similar to that for England as a whole.

The latest (2014) estimate of the resident population of Bromley is 320,057. The pattern of population change in the different age groups is not consistent between wards, with some wards experiencing a large rise in the proportion of young people and others experiencing a large rise in the population of over 75s.

The largest reduction in the 0-4 year age group will be seen in Clock House (11%). For over 75s, the population is projected to increase and the largest increase will be in Biggin Hill and Darwin (32% and 25% respectively) (Figures 2 and 3).

Figure 2

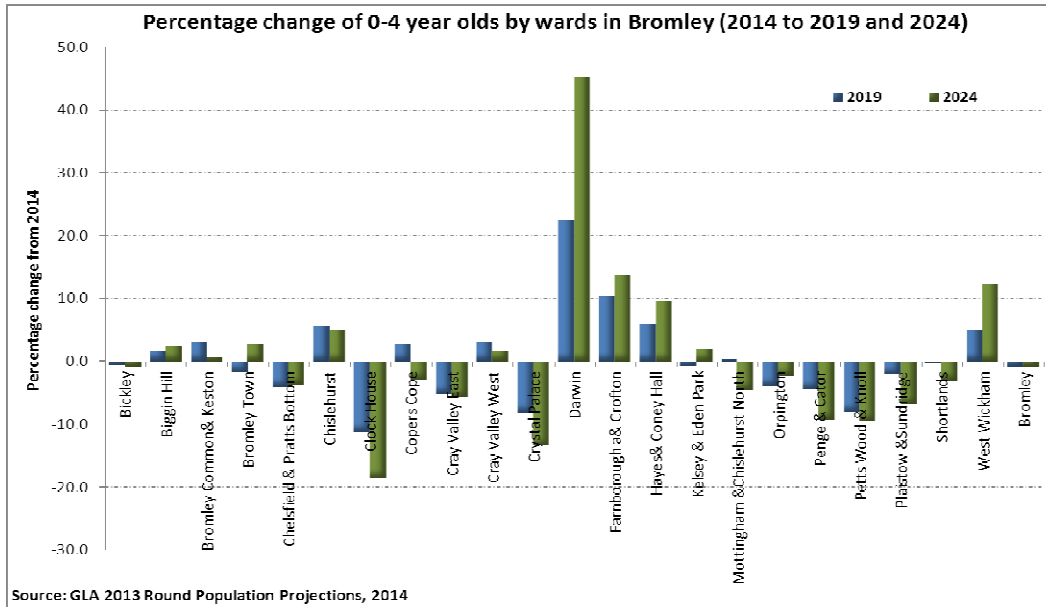
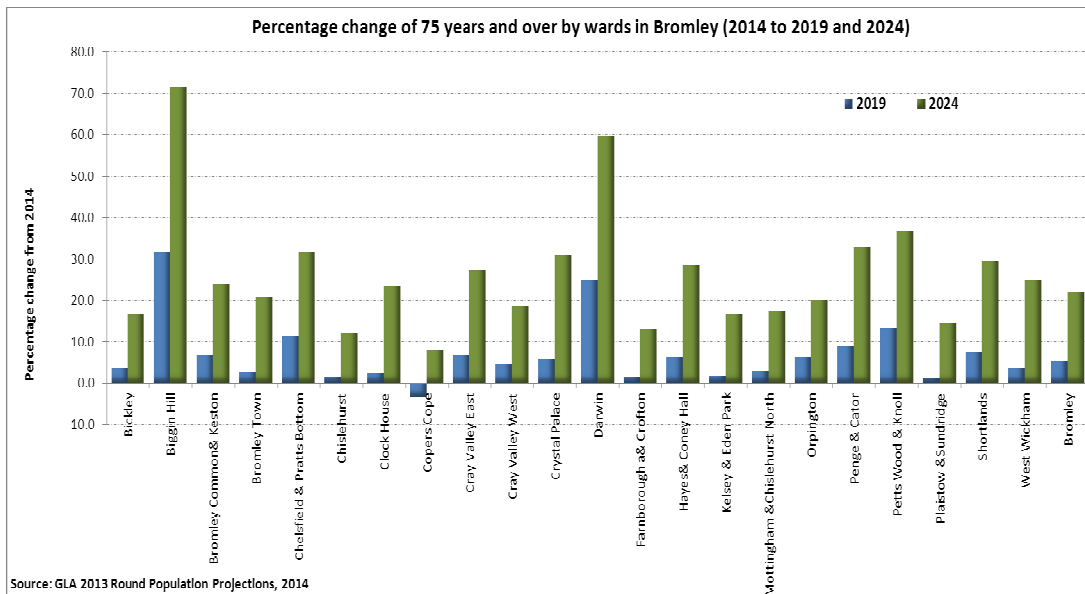


Figure 3



Population density is highest in the North locality at 154,000 persons and the South is the least dense locality (15, 500). Bromley is expected to reach 345,000 persons by 2024 with the South locality expected to have the highest increase.

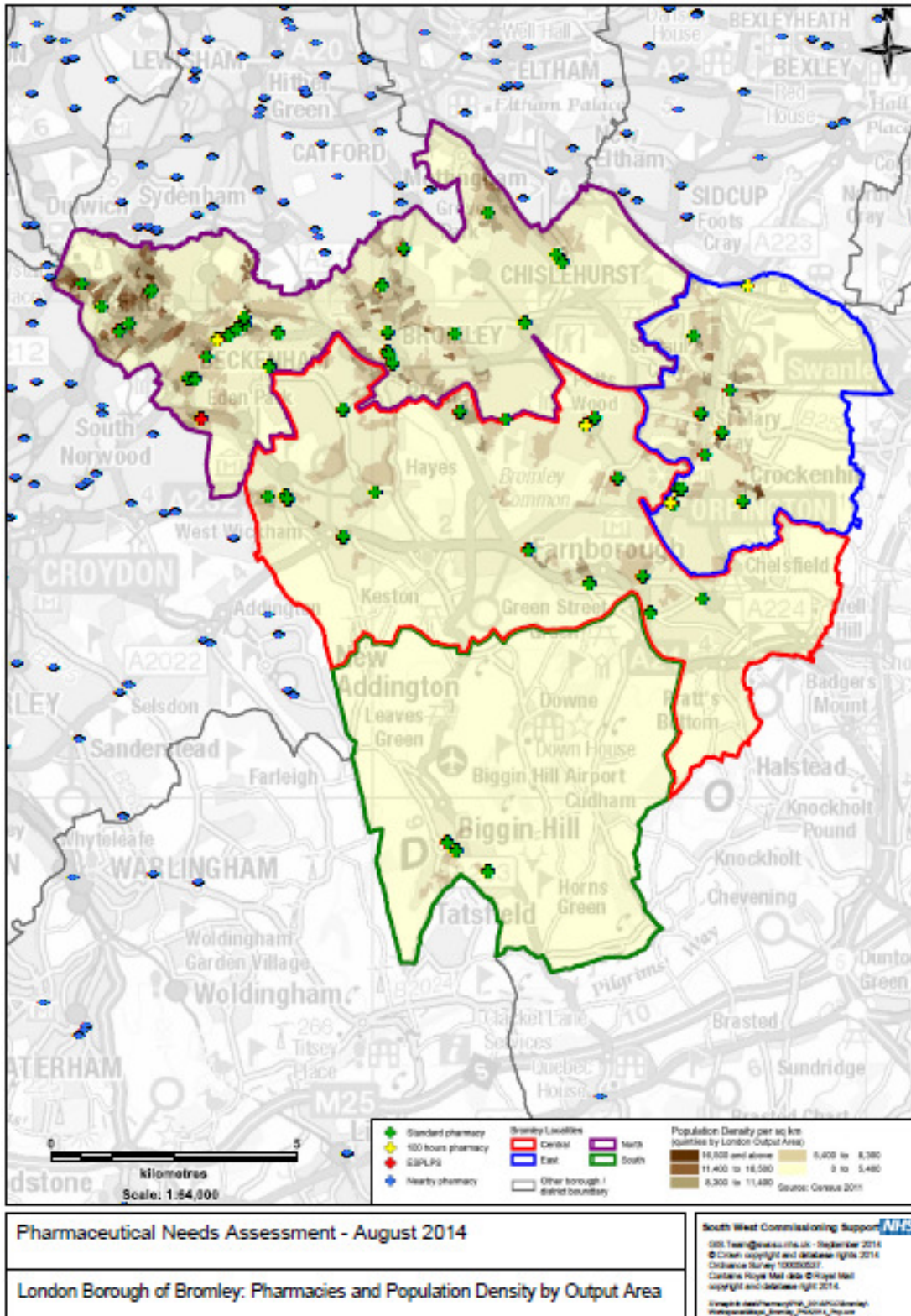
**Table 3 Locality projections**

<b>Localities</b>	<b>2014</b>	<b>2024</b>	<b>% change</b>
North	154130	166488	8%
Central	101602	107229	6%
East	48781	51635	6%
South	15572	18015	16%

*Source: GLA, 2013 Round SHLAA Population Projections, 2014*

Map 1 below shows the distribution of pharmacies in Bromley and population density. The above projection periods exceed that of the PNA which has to be refreshed after three years.

Map 1: Distribution of Pharmacies in Bromley and population density



Population density per square km by Census 2011 Output Area. Population density ranges (shades of brown) are based on London-wide values grouped as quintiles (divided into fifths). Data source: ONS, Census 2011.

A survey of the population in England showed that the people more likely to visit a pharmacy once a month or more are: older people, women aged 55 and older and those with long term conditions<sup>6</sup>. Conversely, men, younger adults and people in employment are less likely to visit a pharmacy once a month or more.

**Table 4 Age structure across Bromley wards**

	0-19 years		75+ years	
	No	%	No	%
Bickley	3649	23.6	1626	10.5
Bromley Town	4401	24.0	1166	6.4
Chislehurst	3515	22.9	1767	11.5
Clock House	3929	24.5	876	5.5
Copers Cope	2792	17.5	1334	8.4
Crystal Palace	3029	23.5	451	3.5
Kelsey & Eden Park	3943	24.2	1536	9.4
Mottingham & Chislehurst North	2842	27.6	708	6.9
Plaistow & Sundridge	3812	24.5	1142	7.3
Penge & Cator	4629	25.8	739	4.1
<b>NORTH LOCALITY</b>	<b>36541</b>	<b>23.7</b>	<b>11345</b>	<b>7.4</b>
Bromley Common & Keston	4132	25.7	1374	8.5
Chelsfield & Pratts Bottom	3503	23.6	1381	9.3
Farnborough a & Crofton	3414	22.9	1926	12.9
Hayes & Coney Hall	3941	24.1	1453	8.9
Petts Wood & Knoll	3153	22.5	1443	10.3
Shortlands	2267	22.4	1083	10.7
West Wickham	3594	23.5	1601	10.5
<b>CENTRAL LOCALITY</b>	<b>24004</b>	<b>23.6</b>	<b>10261</b>	<b>10.1</b>
Cray Valley East	4304	27.1	1246	7.9
Cray Valley West	4999	29.1	1270	7.4
Orpington	3639	23.1	1779	11.3
<b>EAST LOCALITY</b>	<b>12942</b>	<b>26.5</b>	<b>4295</b>	<b>8.8</b>
Biggin Hill	2363	23.0	732	7.1
Darwin	1199	22.6	538	10.1
<b>SOUTH LOCALITY</b>	<b>3562</b>	<b>22.9</b>	<b>1270</b>	<b>8.2</b>

Source: GLA, 2013 Round SHLAA Population Projections, 2014

East Locality has the highest population of young people and pharmacies in the East locality should ensure they maximise opportunities to target health promotion and public health interventions in order to improve health and delay onset of disease and long term conditions.

<sup>6</sup> Long-term conditions are conditions that cannot be cured but can be managed through medication and/or therapy. They include a broad range of medical issues, for example asthma, diabetes, cancer and arthritis.

Wards in the South Locality are expected to see the largest rises in population of the over 75s. Pharmacies in these areas should ensure they maximise opportunities, amongst other services, to target health promotion, signpost to appropriate services and provide MURs for those with long term conditions if appropriate.

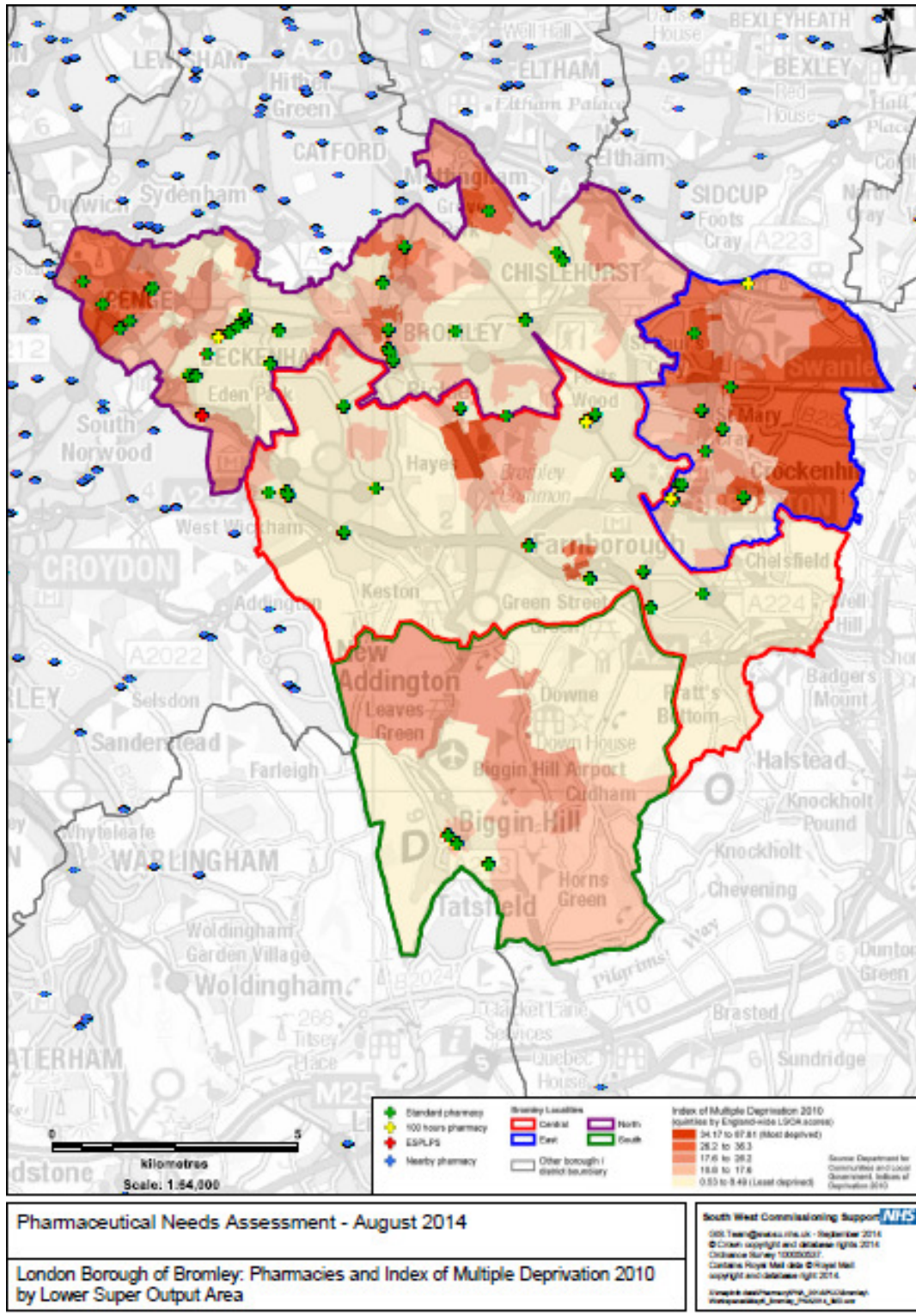
### **3.2 Deprivation**

The health of people in Bromley is generally better than the England average. Deprivation is lower than average, however about 17.4% (10,500) children live in poverty. There is a correlation between deprivation and higher incidence of long term conditions, earlier onset of disease and lifestyle related health inequalities.

Access to services that improve outcomes for deprived communities is important in reducing health inequalities. Those areas which have higher levels of deprivation can be seen on the map to either have a pharmacy in the area, or have access to one nearby, either in Bromley or in a neighbouring borough.

Map 2 below shows Bromley Pharmacies and Index of Multiple Deprivation by LSOA. More deprived areas on the map have a pharmacy in the area or access to one nearby, either in Bromley or in a neighbouring borough.

Map 2: Bromley Pharmacies and Index of Multiple Deprivation by LSOA



Index of Multiple Deprivation 2010 by Census Lower Super Output Area. Deprivation ranges (shades of green) are based on England-wide deprivation scores grouped as quintiles.

Data source: Dept. for Communities & Local Government.



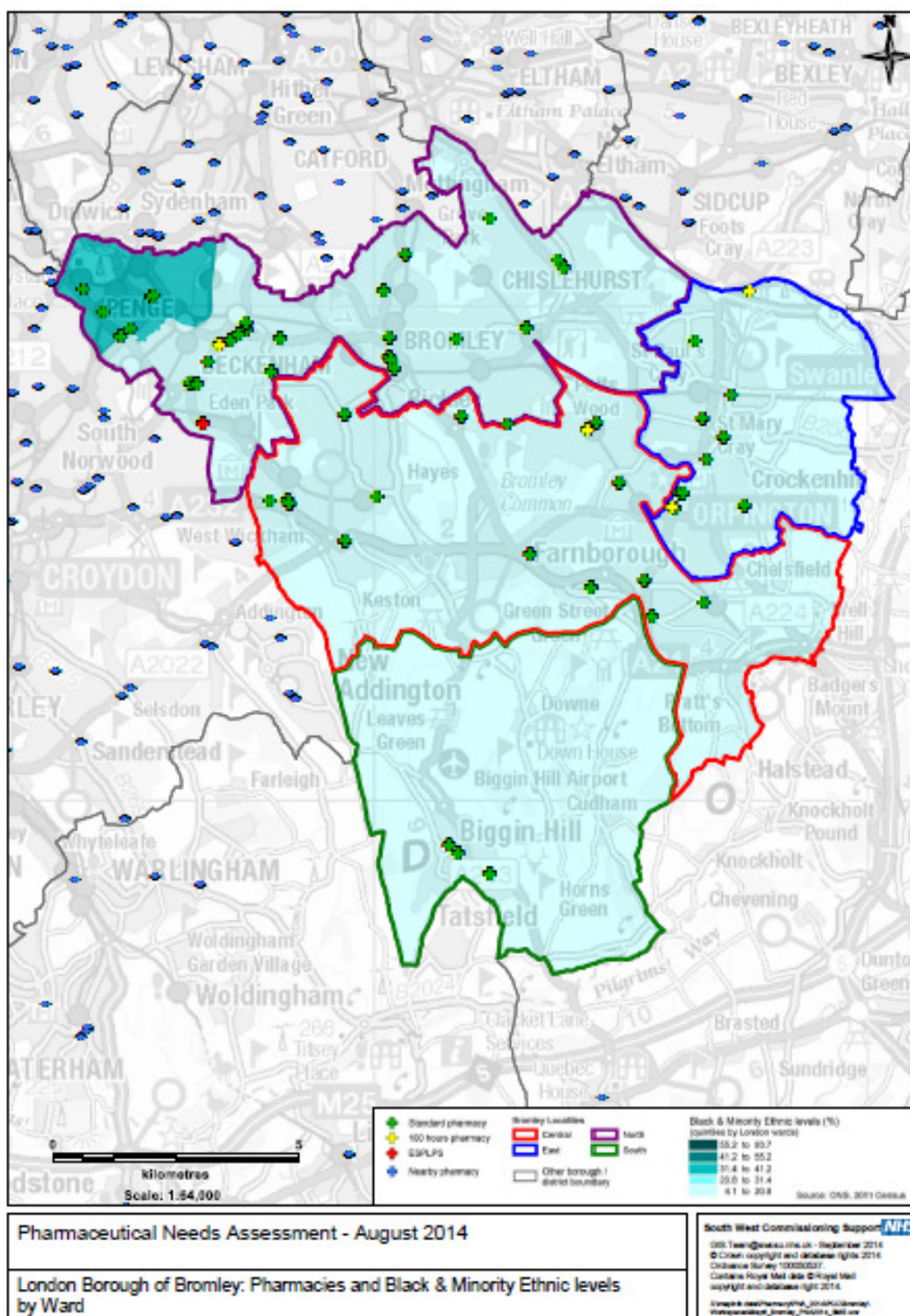
### **3.3 Ethnicity**

The Black and Minority Ethnic population is not consistent across Bromley and certain wards have a higher concentration of ethnic minorities than others. The North-West of Bromley has the highest proportion of ethnic minority population. These areas may therefore have higher disease burden due to the increased risk amongst certain BME groups.

Bromley has a large Gypsy Traveller community concentrated chiefly in the Cray valley area. Evidence suggests that we can expect to see a lower life expectancy amongst this group as well as higher prevalence of long term illness.

Map 3 shows the provision of pharmacies mapped against BME levels.

Map 3: Pharmacies and Black & Minority Ethnic levels (BME) by Ward



Black & Minority Ethnic levels by electoral ward. BME ranges (shades of turquoise) are based on London-wide percentages grouped as quintiles. Data source: ONS, 2011 Census.

### 3.4 Life Expectancy and the Burden of Disease

**Life expectancy** at birth in Bromley has been rising steadily over the last 20 years, currently at 80.7 years for men and 84.5 years for women. However, there is an 8.7 year gap for men and 7.9 years for women between the highest and lowest life expectancy wards in Bromley, with the lowest life expectancy in the most deprived wards.

**Mortality** in Bromley is chiefly caused by circulatory disease (32%) and cancer (30%) with higher mortality rates for both conditions in the more deprived areas of the borough.

There is a need for continued action to address **health inequalities** associated with deprivation.

There is evidence to show that there are many people living in Bromley with undiagnosed **hypertension**, and a number of people with known hypertension which has not been adequately controlled. These people are at higher risk of stroke, kidney disease heart disease and other conditions.

**Diabetes** represents a continuing challenge in Bromley. The number of people affected has been rising since 2002, and for those diagnosed, control of the associated risk factors for circulatory disease is less effective than nationally. Work is necessary both to prevent and to improve identification of diabetes.

**Cancer** remains one of the key causes of mortality in Bromley, and although survival rates have been improving, incidence of all cancers is rising, indicating the need for good prevention strategies. In addition, a significant proportion of cancers are diagnosed outside the two week referral pathway, leading to later diagnoses, which will adversely impact survival rates, as will the low cancer screening uptake in the more deprived parts of the borough.

The rate of **sexually transmitted infections** is lower in Bromley than in London or nationally. The low prevalence of chlamydia in Bromley means that it has been necessary to adopt a targeted screening programme, which is proving successful with a high proportion of those tested proving positive for the disease. Although Bromley as a whole has a low **HIV** prevalence, the HIV rate in the North West of the Borough is four times the Borough average and the prevalence is rising steadily.

The number of **live births** is rising, reflecting the rising trends in the general fertility rates. The trends have implications for Bromley primary schools and children's services in the borough. There are higher birth rates in Bromley women aged 25-39 than England and London and there is a rising trend towards older motherhood.

**Abortion** rates in women in their 20s are high. These women are also more likely to report a previous termination than other age groups.

Further work is needed to encourage the **uptake of childhood immunisations** as vaccination rates for several categories, such as MMR, Hib/MenC, DTaP/IPV (pre-school), and HPV, remain below the national recommendation of 95% coverage.

There remains a potential for **measles outbreaks**, particularly in older children and young adults due to poor immunisation uptake, as seen in the 11 confirmed measles cases in 2013.

There were 14 confirmed cases of **pertussis** (whooping cough) in 2013, highlighting the importance of immunisation against pertussis, in particular the uptake of maternal pertussis vaccination programme.

**Seasonal flu vaccination** rate in Bromley is lower than that of London and England, meaning a large proportion of at risk individuals remain vulnerable to the serious health effects of flu.

There is a rising prevalence of **smoking** in Bromley. This has a negative impact on Bromley's morbidity and mortality rates, local economy, health inequalities, local environment, hospital admission, re-admission and post-operative complication rates. Bromley has a particularly high smoking prevalence within routine and manual worker groups, prevalence is 8% higher than the general population in Bromley and continues to increase (prevalence was 24.3% in 2011-12, rising to 26.1% in 2012-13). There is evidence that illicit tobacco and shisha use are becoming more common in Bromley.

Bromley has the third highest levels of overweight and **obesity** in London, 65% are either overweight or obese and the prevalence is rising. The prevalence of **childhood obesity** is higher than the England average and is now reducing slowly in reception year children, but continues to rise in the Year 6 cohort. Excess weight contributes significantly to the incidence and progression of diseases such as type 2 diabetes, circulatory disease and cancer. A significant proportion of Bromley's residents (21.2% obese) are at higher risk of these conditions and of premature death.

There is scope to increase levels of **physical activity** participation in Bromley to increase health benefits. Targeting inactive populations will produce the greatest reduction in chronic disease.

Indicators of child health in Bromley are rated better than the national average for most aspects. **Family homelessness** and **A&E attendances in children** are rated as higher than the national average. The child mortality rate is also higher than the national and London rate.

Rates of **Type 1 Diabetes** in the children of Bromley are slightly lower than predicted rates based on national data and rates of **Type 2 Diabetes** (obesity-related) in Bromley similar to predicted rates based on national data.

**Self harm** appears to be an increasing issue for young people in Bromley, and there is some evidence that rates of presentation to services with self harm are higher in Bromley than in most London boroughs.

**Teenage conception** rates are falling in Bromley, however a higher percentage of these conceptions lead to terminations year on year. This upward trend of terminations is clearly an indication of unplanned or unwanted pregnancies.

In Bromley, one person in six has a **mental health problem** at any one time, and one in four will have a problem during their lifetime. The percentage of over 18s with depression is significantly higher in Bromley than the percentages for both England and London, however, the suicide rate in Bromley is below the England average. In 2012, 91% of all people dying by suicide were men, of which the 45 years and over age group had the highest number of male deaths. The number of people admitted to hospital with deliberate self harm has been rising over the last ten years, with the highest numbers in the 15 to 19 year age group.

The number of people in Bromley with **dementia** continues to rise, especially in the over 85 year age group, however identification of dementia is below expected levels.

**Substance Misuse** - Although estimates suggest that approximately 15,000 Bromley residents will have taken an illicit drug in the last year, the number of opiate, crack and injecting drug users is estimated to be under 3000. The rates of opiate, crack and injecting drug use have been falling over the last two years and are lower than the rates for London and England. In 2012-13, there were 529 treatment episodes for substance misuse in Bromley and an increase in the number of opiate users successfully completing treatment. There is a higher proportion of older (60 years+) people being treated for substance misuse in Bromley. This age group often present with more complex problems which will impact on health and social care services.

**Alcohol misuse** is a significant public health issue, with over 26% of the population regularly consuming quantities of alcohol sufficient to damage their health. This is similar to national levels, which have been showing a trend towards an increasing proportion of people in higher risk groups. Of concern is the trend of increasing alcohol specific hospital admission rates in under 18 year olds in Bromley.

### **3.5 The role of Community Pharmacy in improving health**

Community pharmacy is accessible and well placed to deliver a range of services which collectively contribute to tackling health inequalities and improving the health status of the local population. For example:

- Health promotion advice is provided as an essential service by all community pharmacies, with health campaigns being provided as agreed with NHSE.
- Dispensing services ensure that patients can access the medicines they have been prescribed.
- MURs and the NMS can promote adherence with the prescribed regimen, help to manage medicines-related risks and reduce re-admissions to hospital.

As such, pharmacy plays an important role in ensuring patients can obtain the maximum benefit from medicines whilst reducing the risks associated with treatment.

## DRAFT FOR CONSULTATION

Provision of a range of enhanced and locally commissioned services which aim to tackle lifestyle choices which influence health outcomes, e.g. smoking cessation, needle and syringe provision; or help to prevent morbidity and mortality associated with disease e.g. seasonal influenza vaccine.

## 4 Assessment of Provision in Bromley

### 4.1 Introduction and approach

This section describes the current provision of pharmaceutical services using the following data sources:

- Benchmarking data from the Health and Social Care Information Centre (HSCIC) November 2013
- Data collected from Bromley LA, CCG and NHSE
- Results of the contractor questionnaire and patient survey conducted in 2014

Consideration is given to the regulations when assessing services, choice for the population and the needs of specific populations.

The regulations governing the development of the PNA require the HWB to consider the needs of pharmaceutical services in terms of **necessary** and **relevant** services:

- **Necessary services** i.e. pharmaceutical services which have been assessed as required to meet a pharmaceutical need. This should include their current provision (within the HWB area and outside of the area) and any current or likely future gaps in provision.
- **Relevant services** i.e. services which have secured improvements, or better access, to pharmaceutical services. This should include their current provision (within the HWB area and outside of the area) and any current or future gaps in provision.

The criteria above were used to agree which services should be considered as necessary or relevant. The decisions are shown in table 5.

**Table 5 Services categorised as necessary or relevant**

SERVICES	NECESSARY OR RELEVANT
ESSENTIAL SERVICES- these are fundamental pharmacy services.	
ALL ESSENTIAL SERVICES	NECESSARY
ADVANCED SERVICES	
Medicines Use Review (MUR) - these help to improve medicines adherence and outcomes for patients with long term conditions. This service supports the delivery of local strategic outcomes.	NECESSARY
New medicines Service (NMS) - This service supports patients with long term conditions, who are newly prescribed certain medicines, to help improve adherence.	NECESSARY
AUR	RELEVANT
SAC	RELEVANT
LOCALLY COMMISSIONED SERVICES	
SUPERVISED CONSUMPTION	NECESSARY

NEEDLE SYRINGE PROVISION	RELEVANT
EMERGENCY HORMONAL CONTRACEPTION	RELEVANT
CHLAMYDIA SCREENING AND TREATMENT	RELEVANT
PAN-LONDON C-CARD SCHEME	RELEVANT
HIV POINT OF CARE TESTING	RELEVANT
SMOKING CESSATION SERVICES	RELEVANT
NHS HEALTHCHECKS	RELEVANT
SEASONAL INFLUENZA VACCINATION	RELEVANT
TAILORED DISPENSING SERVICE	RELEVANT

## 4.2 The availability of choice

For patients, choice is a mechanism to drive up the quality of services and improve patient satisfaction. For the overall health system, choice is a mechanism to encourage more appropriate and cost effective use of available services. The factors which have been taken into account when considering whether or not there is sufficient choice are the:

- Current level of access to NHS pharmaceutical services in the area
- Extent to which existing services already offer a choice
- Extent to which choice may be improved through the availability of additional providers or additional facilities
- Need for specialist or other services which would improve the provision of, or access to services for specific populations

Community pharmacies improve access to healthcare and increase the choice available to service users.

Access to a greater range of services is generally available in urban areas and this applies to pharmaceutical services. All of the large towns in Bromley have more than one pharmacy in the town centre in addition to those in the surrounding suburbs.

In rural areas, services and businesses are not always available in the immediate locality and public transport may be less frequent or non-existent. Residents of these areas have to make arrangements for shopping and other services including pharmaceutical services.

## 4.3 Protected characteristics of the population

Table 6 sets out how pharmacy can support the specific needs of the population as defined by the protected characteristics in equality legislation.

**Table 6: Meeting the needs of specific populations**

Protected Characteristic	How pharmacy can support the specific population
Age	Age has an influence on which medicine and method of delivery is prescribed. Older people have a higher prevalence of illness and take many medicines. The medicines management of older people is complicated by multiple disease, complex medication regimes and the aging process affecting the body's capacity to



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Protected Characteristic	How pharmacy can support the specific population
	<p>metabolise and eliminate medicines from it.</p> <p>Community pharmacies can support people to live independently by supporting optimisation of use of medicines, support with ordering, re-ordering medicines, home delivery to the housebound and appropriate provision of multi-compartment compliance aids and other interventions such as reminder charts to help people to take their medicines.</p> <p>Supporting independence by offering:</p> <ul style="list-style-type: none"> <li>• Reablement services following discharge from hospital</li> <li>• Falls assessments</li> <li>• Supply of daily living aids</li> <li>• Identifying emerging problems with peoples health</li> <li>• Signposting to additional support and resources</li> </ul> <p>Younger people, similarly, have different abilities to metabolise and eliminate medicines from their bodies.</p> <p>Advice can be given to parents on the optimal way to use the medicine or appliance and provide explanations on the variety of ways available to deliver medicines.</p> <p>Pharmacy staff provide broader advice when appropriate to the patient or carer on the medicine, for example, its possible side effects and significant interactions with other substances.</p> <p>The safe use of medicines for children and older people is one where pharmacies play an essential role.</p>
Disability	<p>When patients are managing their own medication but need some support, pharmacists and dispensing doctors must comply with the Equality Act 2010. Where the patient is assessed as having a long term physical or mental impairment that affects their ability to carry out every day activities, such as managing their medication, the pharmacy contract includes funding for reasonable adjustments to the packaging or instructions that will support them in self-care. The first step should be a review to ensure that the number of medications and doses are reduced to a minimum. If further support is needed, then compliance aids might include multi-compartment compliance aids, large print labels, easy to open containers, medication reminder alarms/charts, eye dropper or inhaler aids.</p> <p>Each pharmacy should have a robust system for assessment and auxiliary aid supply that adheres to clinical governance principles.</p>
Gender	<p>It is well documented that men are often more unlikely to access healthcare services. Community pharmacies are ideally placed for self-care by providing advice and support for people to derive maximum benefit from caring for themselves or their families.</p> <p>When necessary, access to advice, provision of over the counter medications and signposting to other services is available as a walk in service without the need for an appointment.</p> <p>Community pharmacy is a socially inclusive healthcare service providing a convenient and less formal environment for those who do not choose to access other kinds of health service.</p>
Race	Black and minority ethnic (BME) groups generally have

## DRAFT FOR CONSULTATION

Protected Characteristic	How pharmacy can support the specific population
	worse health than the overall population, although some BME groups fare much worse than others, and patterns vary from one health condition to the next. Evidence suggests that the poorer socio-economic position of BME groups is the main factor driving ethnic health inequalities. Language can be a barrier to delivering effective advice on medicines, health promotion and public health interventions. There are opportunities to access translation services that should be used when considered necessary. The patient survey shows that 95% of the Bromley population - even those living in the most deprived areas - can get to a pharmacy within 15 minutes by car. Community pharmacy is consequently a socially inclusive healthcare service providing a convenient and less formal environment for those who cannot easily access or do not choose to access other kinds of health service.
Religion	Pharmacies can provide advice to specific religious groups on medicines derived from animal sources and during periods of fasting.
Pregnancy and maternity	Pharmacies can provide advice to pregnant mothers on medicines and self-care. They have the expertise on advising which medicines are safe for use in pregnancy and during breast feeding.
Sexual orientation	No specific needs are identified.
Gender reassignment	Provision of necessary medicines and advice on adherence and side effects.
Marriage and civil partnership	No specific needs are identified.

### 4.4 Essential Services

Essential services are mandatory within the pharmacy contract and are managed and monitored by NHS England's area teams. The fact that all pharmacy premises must provide these services means they can be used across the borough to focus on reducing health inequalities. Essential services can be used by pharmacy contractors to help deliver the local authority public health measures, improving outcomes by targeting people using an opportunistic approach.

In order to assess the provision against the needs of the population the PNA has considered the distribution of pharmacies, the provision of dispensing services and their opening hours. The 2008 White Paper Pharmacy in England: Building on strengths – delivering the future<sup>7</sup> states that it is a strength of the current system that community pharmacies are easily accessible, and that 99% of the population, including those living in the most deprived areas, can get to a pharmacy within 20 minutes by car and 96% by walking or using public transport.

Maps 17-19 (in the appendix) show the travel distance to a pharmacy in Bromley using a car, public transport or by walking.

<sup>7</sup> [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/228858/7341.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/228858/7341.pdf)  
Accessed 13th July 2014

#### **4.5 Location of pharmacies**

Bromley has 60 pharmacies, 4 of which have a 100 hour contract. A map showing all the pharmacy locations including the locations of the 100 hour pharmacies is shown in map 4.

A map and list of all the pharmacies in their localities is shown below in each locality section.

There is good distribution of pharmacies in Bromley providing adequate choice within a reasonable travel distance. A lower provision identified in the 2011 PNA has been met by a new pharmacy opening in Mottingham and Chislehurst North.

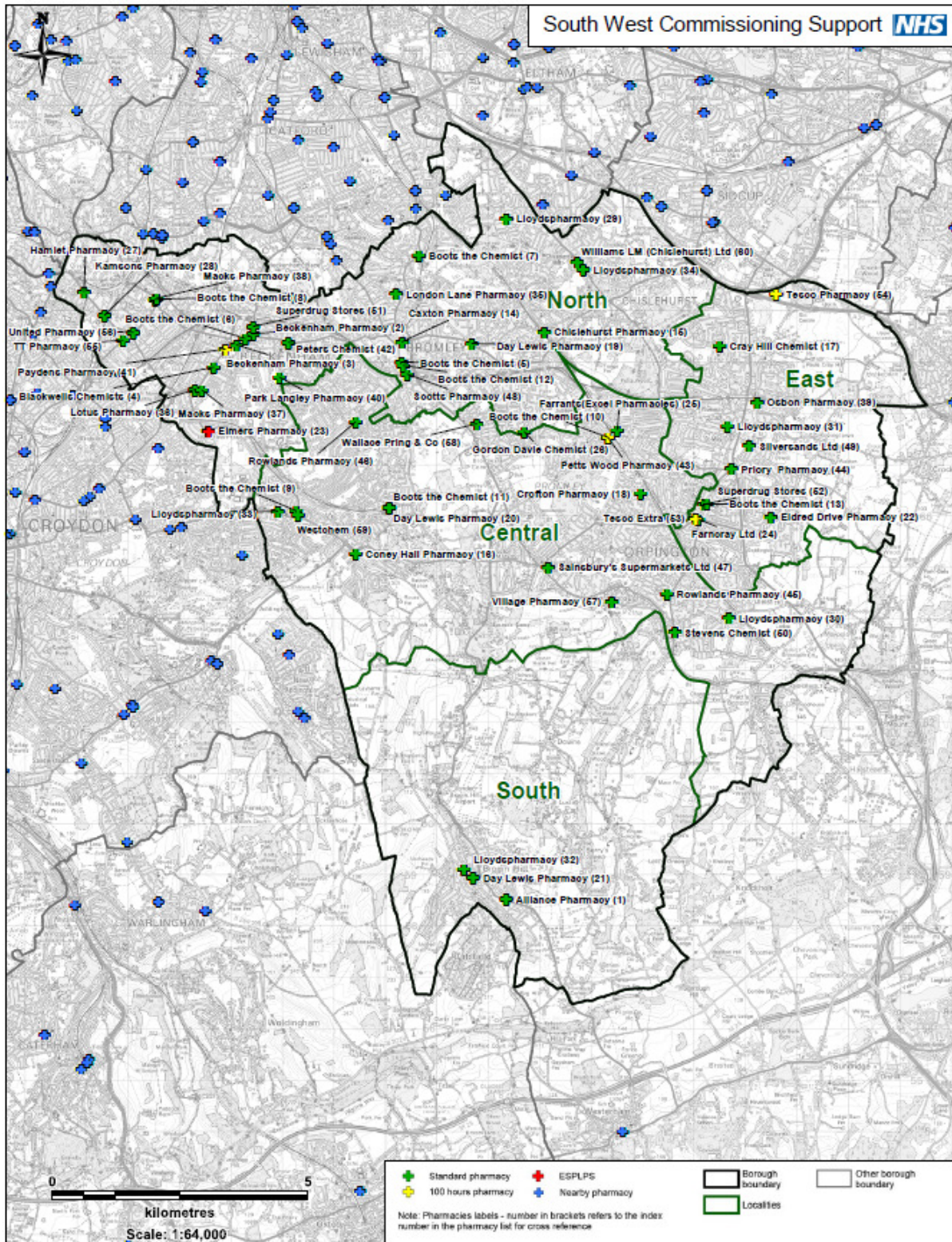
#### **4.6 Dispensing locations**

Table 7 shows the number of pharmacies in each London borough and the prescription items dispensed per 100,000 population. The data is the latest available and it should be noted that Bromley now has 60 pharmacies rather than the 59 in the table.

#### **4.7 Comparison with other areas**

Table 7 below also indicates the number of pharmacies and the number of items dispensed compared to all other London boroughs and the England average.

Map 4: Bromley Pharmacy locations



Pharmaceutical Needs Assessment - August 2014

London Borough of Bromley: Pharmacy locations

**South West Commissioning Support NHS**

GIS Team@swcsu.nhs.uk - August 2014  
 © Crown copyright and database rights 2014  
 Ordnance Survey 100050537  
 Contains Royal Mail data © Royal Mail  
 copyright and database right 2014

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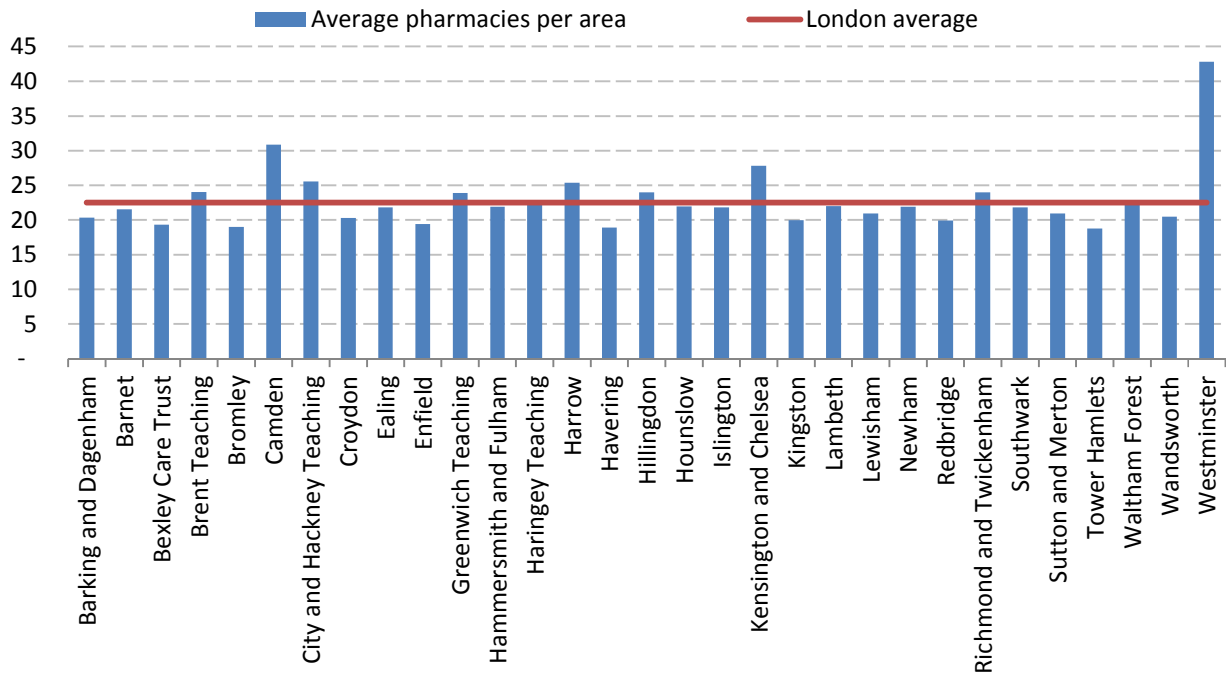
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**Table 7: Community pharmacies on a PCT pharmaceutical list at 31 March, prescription items dispensed per month and population by PCT, England 2012-13 (to be updated with new figures when HSCIC release new data in November 2014)**

	Number of community pharmacies	Prescription items dispensed per month (000)s	Population (000)s Mid 2011 <sup>(1)</sup>	Pharmacies per 100,000 population	Average prescription items dispensed per month per community pharmacy	Prescription items dispensed per month per 100 000 population (000)s
<b>ENGLAND</b>	<b>11,495</b>	<b>76,191</b>	<b>53,107</b>	<b>22</b>	<b>6628</b>	<b>1.43</b>
<b>LONDON</b>	<b>1,846</b>	<b>9,644</b>	<b>8,204</b>	<b>23</b>	<b>5225</b>	<b>1.18</b>
Barking and Dagenham	38	240	187	20	6328	1.29
Barnet	77	363	358	22	4715	1.02
Bexley Care Trust	45	269	233	19	5982	1.16
Brent Teaching	75	370	312	24	4938	1.19
<b>Bromley</b>	<b>59</b>	<b>326</b>	<b>311</b>	<b>19</b>	<b>5529</b>	<b>1.05</b>
Camden	68	210	220	31	3084	0.95
City and Hackney Teaching	65	262	255	26	4036	1.03
Croydon	74	431	365	20	5818	1.18
Ealing	74	411	339	22	5554	1.21
Enfield	61	442	314	19	7238	1.41
Greenwich Teaching	61	320	255	24	5247	1.25
Hammersmith and Fulham	40	190	182	22	4747	1.04
Haringey Teaching	57	283	256	22	4972	1.11
Harrow	61	331	240	25	5429	1.38
Havering	45	336	238	19	7469	1.41
Hillingdon	66	356	275	24	5395	1.29
Hounslow	56	320	255	22	5713	1.26
Islington	45	193	206	22	4299	0.94
Kensington and Chelsea	44	140	158	28	3173	0.88
Kingston	32	187	160	20	5849	1.17
Lambeth	67	337	304	22	5036	1.11
Lewisham	58	317	277	21	5463	1.14
Newham	68	440	310	22	6471	1.42
Redbridge	56	347	281	20	6193	1.23
Richmond and Twickenham	45	202	188	24	4493	1.08
Southwark	63	315	289	22	5001	1.09
Sutton and Merton	82	472	392	21	5762	1.21
Tower Hamlets	48	337	256	19	7023	1.32
Waltham Forest	59	281	260	23	4762	1.08
Wandsworth	63	339	308	20	5385	1.10
Westminster	94	275	220	43	2927	1.25

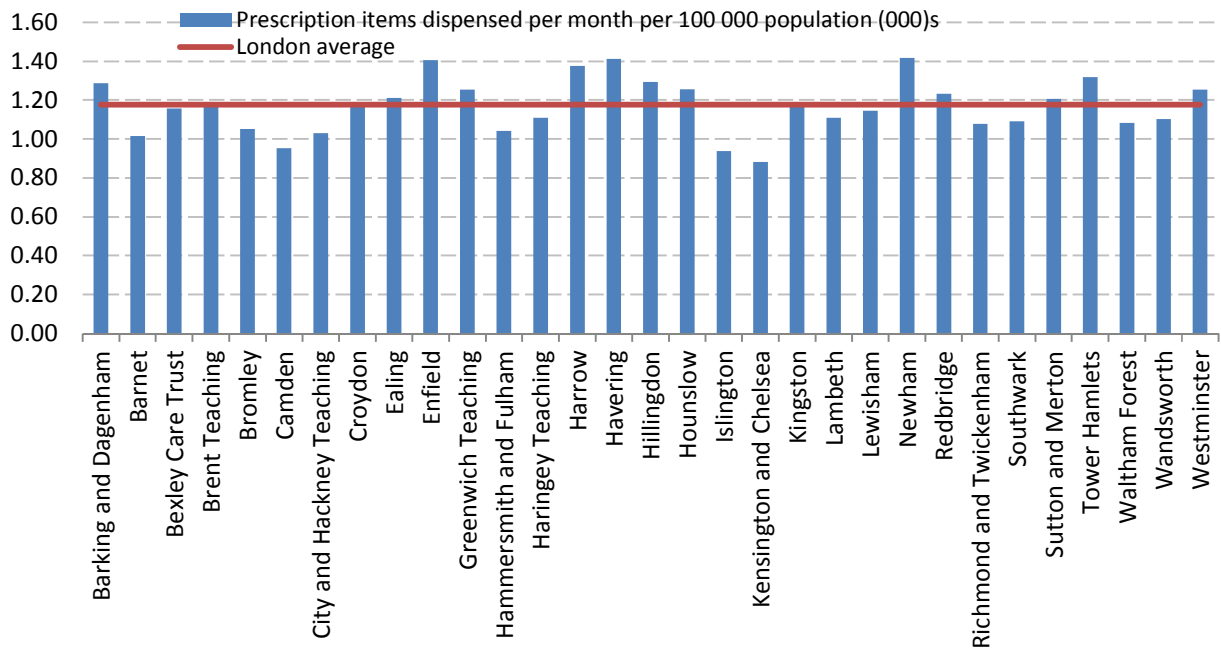
Sources: NHS Prescription Services part of the NHS Business Services Authority Population data - Office of National Statistics (2011 mid-year Estimates based on 2011 census) Notes: The figures are quoted according to the HSCIC website, however the number of Pharmacies in the area has since changed to 60. Full details of the current community pharmacy providers are listed in each localities details and the appendix.

Figure 4 Average pharmacies per 100,000 population per area



Community pharmacies on a PCT pharmaceutical list at 31 March 2013, average number of pharmacies per 100,000 population per area, England 2012-13 (to be updated with new figures when HSCIC release new data in November 2014). NB: The figures are quoted according to the HSCIC website; however the number of pharmacies in the area has since changed to 60. Full details of the current community pharmacy providers are listed in each localities details and the appendix.

Figure 5 Prescription items dispensed per month per 100,000 population



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Community pharmacies on a PCT pharmaceutical list at 31 March 2013, prescription items dispensed per month and population by PCT, England 2012-13. Sources: NHS Prescription Services part of the NHS Business Services Authority. NB: The figures are quoted according to the HSCIC website, however the number of Pharmacies in the area has since changed to 60. Full details of the current community pharmacy providers are listed in each localities details and the appendix.

Bromley has fewer pharmacies than the London average (Figure 4) 19 compared to 23. However, Figure 5 shows that Bromley Pharmacies dispense (items per month) below the London average. There is capacity for an increase in dispensing within the current pharmacies and provision is adequate in the area. Since these figures were released one more pharmacy has opened in Mottingham and Chislehurst North.

**Table 8 Dispenser data summary**

Total Items	Ward	%
136,787	Bickley Total	3.2%
173,349	Biggin Hill Total	4.1%
128,550	Bromley Common and Keston Total	3.0%
293,624	Bromley Town Total	6.9%
286,193	Chelsfield and Pratts Bottom Total	6.8%
204,933	Chislehurst Total	4.8%
5,085	Clock House Total	0.1%
151,216	Copers Cope Total	3.6%
233,633	Cray Valley East Total	5.5%
155,946	Cray Valley West Total	3.7%
115,807	Crystal Palace Total	2.7%
186,396	Farnborough and Crofton Total	4.4%
223,162	Hayes and Coney Hall Total	5.3%
363,635	Kelsey and Eden Park Total	8.6%
108,283	Mottingham and Chislehurst North Total	2.6%
292,801	Orpington Total	6.9%
172,393	Penge and Cator Total	4.1%
221,313	Petts Wood and Knoll Total	5.2%
135,359	Plaistow and Sundridge Total	3.2%
47,993	Shortlands Total	1.1%
193,463	West Wickham Total	4.6%
<b>3,829,921</b>	<b>Total</b>	<b>90.6%</b>

Items	Neighbouring Boroughs	%
14,439.00	Bexley	0.3%
36,590.00	Croydon	0.9%
15,750.00	Greenwich	0.4%
4,415.00	Lambeth	0.1%
154,113.00	Lewisham	3.6%
8,899.00	Sevenoaks	0.2%
6,069.00	Southwark	0.1%
240,275.00	Total in Neighbouring Boroughs	5.7%

Grand Total	All Areas	4,225,544.00
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Source ePACT -Dispenser data summary of Bromley 2013-2014

Over 90% of prescriptions generated by Bromley prescribers are dispensed in the area. Just under 4% of the dispensing is in the neighbouring borough of Lewisham. Pharmacies in neighbouring boroughs, appliance contractors and distance selling pharmacies provide some pharmaceutical services to the Bromley population.

**Table 9: % of prescription items dispensed in each locality**

NORTH (29 pharmacies)	%	CENTRAL(17 pharmacies)	%	EAST (11 pharmacies)	%	SOUTH (3 pharmacies)	%
Bickley	3.2	Bromley Common and Keston	3	Cray Valley East Total	5.5	Biggin Hill	4.1
Bromley Town	6.9	Chelsfield and Pratts Bottom	6.8	Cray Valley West Total	3.7	Darwin	0
Chislehurst	4.8	Farnborough and Crofton	4.4	Orpington	6.9		
Clock House	0.1	Hayes and Coney Hall	5.3				
Copers Cope	3.6	Petts Wood and Knoll	5.2				
Crystal Palace	2.7	Shortlands	1.1				
Kelsey and Eden Park	8.6	West Wickham	4.6				
Mottingham and Chislehurst North	2.6						
Penge and Cator	4.1						
Plaistow and Sundridge	3.2						
Total items	39.8	Total items	30.4	Total items	16.1	Total items	4.1

Source ePACT -Dispenser data summary of Bromley 2013-2014

From Table 9 it can be seen that the highest number of items dispensed are in the North locality which also has the highest number of pharmacies and is the most densely populated locality in Bromley.

#### 4.8 Repeat Dispensing

Repeat dispensing allows patients who have been issued with a repeatable prescription to collect their repeat medication from a pharmacy without having to request a new prescription from their GP. Benefits of repeat dispensing include:

- Reduced GP practice workload, potentially freeing up time for clinical activities
- Greater predictability in workload for pharmacies, which facilitates the delivery of wider pharmaceutical services
- Reduced waste, because pharmacies are required to only dispense the medicines the patients need
- Greater convenience for patients.

In Bromley, between April 2013 and March 2014, repeat dispensing accounted for 1.1% of all items dispensed, and 2.3% of electronically prescribed items were repeat dispensing items, this compares with 6.6% and 13.1% respectively for England as a whole.

#### 4.9 Electronic Prescribing Service (EPS)

EPS reduces the paper administration associated with current prescribing and dispensing processes by enabling prescriptions to be generated, transmitted and received electronically. EPS frees up dispensing staff from re-keying in prescription



information and allows better management of stock control in a pharmacy. It saves many patients a journey to the GP surgery to collect a prescription. EPS gives patients more choice by allowing them to nominate a pharmacy near where they live, work or shop. It is suitable for patients with stable conditions who don't want to go to their GP practice every time to collect their repeat prescription., who collect medicines from the same place most of the time or use a prescription collection service currently. EPS requires GP surgeries and pharmacies to be enabled (live) in order to be able to provide the service.

Latest statistics<sup>8</sup> (28th July 2014) indicate that nationally:

- 2437 (29%) GP practices are live, meaning they can issue prescriptions via EPS
- 11119 (95%) Pharmacies are live, meaning they can dispense prescriptions via EPS.

In Bromley, at the end of March 2014, 37 (80.4%) of GP practices were EPS enabled and live and 18.4% of items were being supplied electronically<sup>9</sup> All Bromley pharmacies are able to dispense prescriptions via EPS.

#### 4.10 Bromley localities – profile and access

Table 10 indicates the wards that make up the 4 Bromley localities.

**Table 10: Bromley localities: wards**

Bromley PNA locality wards			
North	Central	East	South
Bickley	Bromley Common and	Cray Valley East	Biggin Hill
Bromley Town	Keston	Cray Valley West	Darwin
Chislehurst	Chelsfield and Pratts	Orpington	
Clock House	Bottom		
Copers Cope	Farnborough and		
Crystal Palace	Crofton		
Kelsey and Eden Park	Hayes and Coney Hall		
Mottingham and	Petts Wood and Knoll		
Chislehurst North	Shortlands		
Penge and Cator	West Wickham		
Plaistow and Sundridge			

##### 4.10.1 East Bromley locality profile

East Bromley locality consists of three wards:

- Cray Valley East
- Cray Valley West
- Orpington

<sup>8</sup> <http://systems.hscic.gov.uk/eps/stats> Accessed 2<sup>nd</sup> August 2014

<sup>9</sup> <http://www.england.nhs.uk/ourwork/pe/mo-dash/> Accessed 30<sup>th</sup> September 2014

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The East Locality has a population of 48,781, a high level of deprivation, with high levels of unemployment, overcrowded and social housing, lone parent and lone pensioner households, with the lowest level of educational attainment.

This locality has a high proportion of children and young people (both under 5s and under 19s), as well as housing the Bromley's large Gypsy Traveller population.

People in this locality are more likely than other localities to perceive their health as "not good", and to report limiting long term illness.

Uptake of cancer screening and breastfeeding are low in this locality.

The rate of teenage pregnancy is higher in this locality than for England as a whole.

The East Locality has below Bromley average life expectancy for males and females. This is matched by the high circulatory disease and cancer mortality rates, again above the Bromley average. This reflects a high disease burden in under 75s for most chronic conditions.

The prevalence of asthma, atrial fibrillation, chronic kidney disease, coronary heart disease, Coronary Obstructive Pulmonary Disease (COPD), diabetes, heart failure, hypertension and obesity are all greater than the Bromley average in this locality.

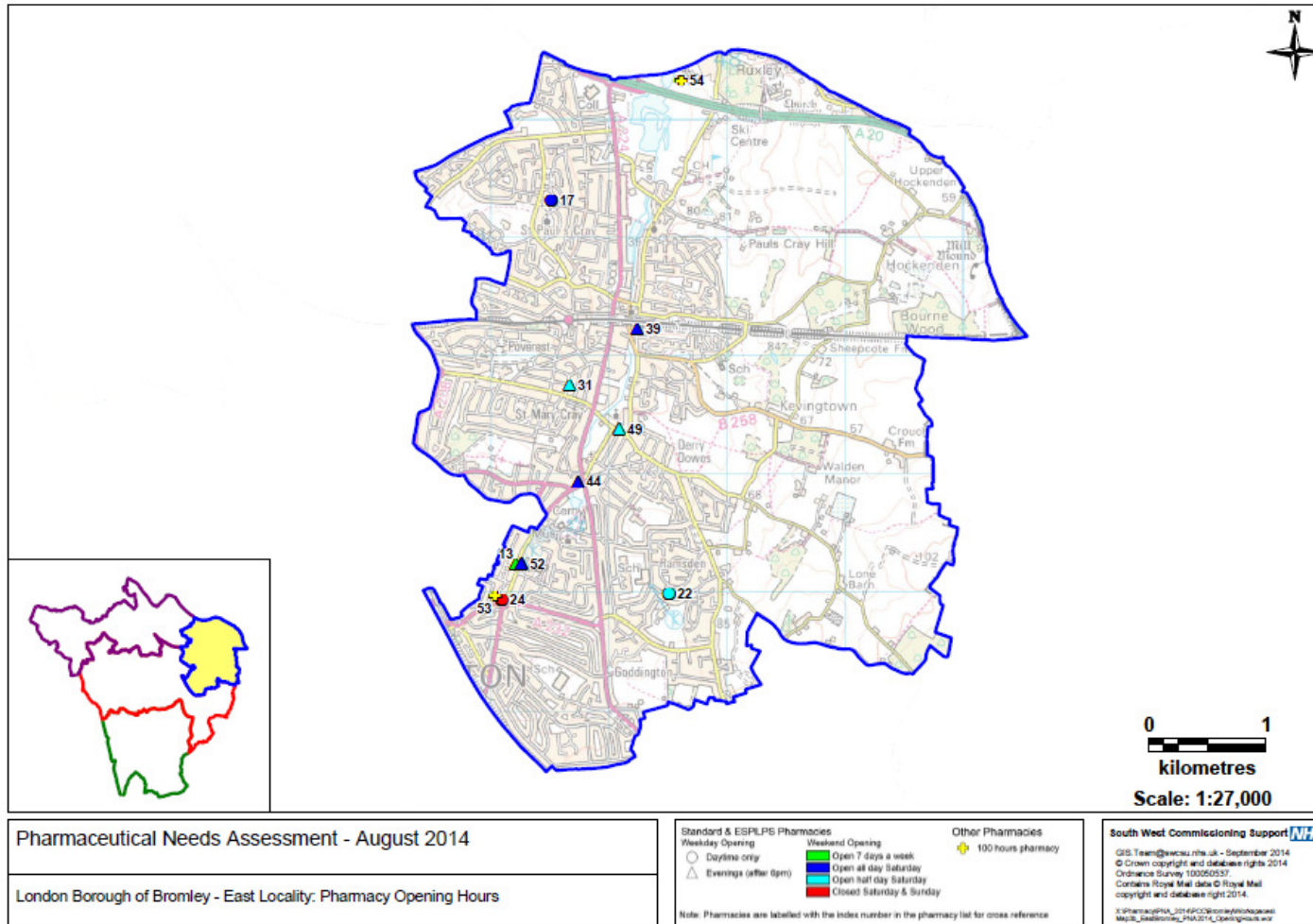
The prevalence of dementia and serious mental illness in this locality are comparable to the Bromley average.

This high disease burden is reflected in high emergency admission rates across all the recorded specialties except gynaecology, and higher than the Bromley average first outpatient referral rates in many specialties (cardiology, colorectal surgery, COPD, dermatology, diabetes, gastroenterology, general medicine, gynaecology, obstetrics, pain management and plastic surgery).

It is important that preventive services for people living in deprivation need to be accessible and flexible enough to offer opportunistic engagement, since this population have lower uptake rate.

Services should be available to aid the reduction of emergency admissions for long term conditions, in particular, asthma, atrial fibrillation, cancer, COPD, coronary heart disease and diabetes, as well as services to reduce emergency admissions to paediatrics, trauma and orthopaedics and general medical and general surgical specialties as rates are higher than the Bromley average.

Map 5: East Bromley Locality Opening Hours



#### 4.10.2 Access to a Pharmacy in East Bromley

There are 11 pharmacies in the East Bromley locality. Two of these pharmacies provide services for 100 hours each week.

**Table 11: Pharmacies in East Bromley locality**

Map Index	Trading Name	Address1	Address2	Address3	Post Code	Contract
13	Boots The Chemist	216 High Street	Orpington	Kent	BR6 0LS	40 hours
17	Cray Hill Chemist	88 Cotmandene Crescent	St Pauls Cray	Orpington	BR5 2RG	40 hours
22	Eldred Drive Pharmacy	25 Eldred Drive	Ramsden Estate	Orpington	BR5 4PE	40 hours
24	Farncray Ltd	330 High Street	Orpington	Kent	BR6 0NQ	40 hours
31	Lloydspharmacy	34 Marion Crescent	Poverest Road	St Mary Cray	BR5 2DD	40 hours
39	Osbon Pharmacy	55 High Street	St Mary Cray	Orpington	BR5 3NJ	40 hours
44	Priority Pharmacy	8 Carlton Parade	Orpington	Kent	BR6 0JB	40 hours
49	Silversands Ltd	Anglesea Healthy Living Centre	1 Kent Rd, St Mary Cray	Orpington	BR5 4AD	40 hours
52	Superdrug Stores	Superdrug Stores	207-215 High Street	Orpington	BR6 0PS	40 hours
53	Tesco Extra	9 Augustus Lane	Orpington	Kent	BR6 0NH	100 hours
54	Tesco Pharmacy	Edgington Way	Sidcup	Kent	DA14 5BN	100 hours

**Table 12: Opening hours in East Bromley locality**

DAY	EARLIEST OPENING	LATEST CLOSING
MONDAY	8.00am	22.30
TUESDAY	6.30am	22.30
WEDNESDAY	6.30am	22.30
THURSDAY	6.30am	22.30
FRIDAY	6.30am	22.30
SATURDAY	6.30am	22.00
SUNDAY	10.00am	16.00

Opening hours in East Bromley displayed visually:

#### WEEKDAYS

Trading Name	Post Code	7:00 AM	7:30 AM	8:00 AM	8:30 AM	9:00 AM	9:30 AM	10:00 AM	10:30 AM	11:00 AM	11:30 AM	12:00 PM	12:30 PM	1:00 PM	1:30 PM	2:00 PM	2:30 PM	3:00 PM	3:30 PM	4:00 PM	4:30 PM	5:00 PM	5:30 PM	6:00 PM	6:30 PM	7:00 PM	7:30 PM	8:00 PM	8:30 PM	9:00 PM	9:30 PM	10:00 PM	10:30 PM	
BOOTS THE CHEMIST	BR6 0LS																																	
CRAY HILL CHEMIST	BR5 2RG																																	
ELDRED DRIVE PHARMACY	BR5 4PE																																	
FARNCRAY LTD	BR6 0NQ																																	
LLOYDSPHARMACY	BR5 2DD																																	
OSBON PHARMACY	BR5 3NJ																																	
PRIORITY PHARMACY	BR6 0JB																																	
SILVERSANDS LTD	BR5 4AD																																	
SUPERDRUG STORES	BR6 0PS																																	
TESCO EXTRA	BR6 0NH																																	
TESCO PHARMACY	DA14																																	

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SATURDAYS

Trading Name	Post Code	6:30 AM	7:00 AM	7:30 AM	8:00 AM	8:30 AM	9:00 AM	9:30 AM	10:00 AM	10:30 AM	11:00 AM	11:30 AM	12:00 PM	12:30 PM	1:00 PM	1:30 PM	2:00 PM	2:30 PM	3:00 PM	3:30 PM	4:00 PM	4:30 PM	5:00 PM	5:30 PM	6:00 PM	6:30 PM	7:00 PM	7:30 PM	8:00 PM	8:30 PM	9:00 PM	9:30 PM	10:00 PM		
BOOTS THE CHEMIST	BR6 0LS																																		
CRAY HILL CHEMIST	BR5 2RG																																		
ELDRED DRIVE PHARMACY	BR5 4PE																																		
FARNCRAY LTD	BR6 0NQ																																		
LLOYDS PHARMACY	BR5 2DD																																		
OSBON PHARMACY	BR5 3NU																																		
PRIORY PHARMACY	BR6 0JB																																		
SILVERSANDS LTD	BR5 4AD																																		
SUPERDRUG STORES	BR6 0PS																																		
TESCO EXTRA	BR6 0NH																																		
TESCO PHARMACY	DA14 5BN																																		

SUNDAYS

Trading Name	Post Code	8:00 AM	8:30 AM	9:00 AM	9:30 AM	10:00 AM	10:30 AM	11:00 AM	11:30 AM	12:00 PM	12:30 PM	1:00 PM	1:30 PM	2:00 PM	2:30 PM	3:00 PM	3:30 PM	4:00 PM	4:30 PM	5:00 PM	5:30 PM	6:00 PM	6:30 PM	7:00 PM	7:30 PM	8:00 PM		
BOOTS THE CHEMIST	BR6 0LS																											
CRAY HILL CHEMIST	BR5 2RG																											
ELDRED DRIVE PHARMACY	BR5 4PE																											
FARNCRAY LTD	BR6 0NQ																											
LLOYDS PHARMACY	BR5 2DD																											
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SUPERDRUG STORES	BR6 0PS																											
TESCO EXTRA	BR6 0NH																											
TESCO PHARMACY	DA14 5BN																											

In terms of opening hours, on a Saturday one pharmacy is closed, three open for half a day and there are two pharmacies open till 22.00. There are three Pharmacies open on a Sunday.

There is good access to pharmaceutical services in East Bromley.

#### 4.10.3 Central Bromley locality profile

Central Bromley locality has a population of 101,602 and consists of seven wards:

- Bromley Common and Keston
- Chelsfield and Pratts Bottom
- Farnborough and Crofton,
- Hayes and Coney Hall
- Petts Wood and Knoll
- Shortlands
- West Wickham.

The majority of the **Central Locality** covers the least deprived areas of Bromley, and has the highest life expectancy for males and females (above the Bromley average). The proportion of over 65s and over 75s is highest in this locality and although population growth will be below the Bromley average in the area over the next 10 years, this growth will be in the older age groups, and there will be a fall in the proportion of the population under the age of 19 years.

The prevalence of asthma, atrial fibrillation, coronary heart disease, dementia, diabetes, hypertension, learning disability and stroke are all higher than the Bromley average in this locality.

Bromley Common & Keston ward has some distinguishing features within the Central Locality. Although it has above average levels of deprivation, the ward comprises a more urban and deprived northern area- and a more affluent, residential semi-rural southern area.

The population is fairly evenly distributed in age between children, working age and older people. There is a relatively high proportion of single parent households. A significant proportion of the residents have no qualifications and are in routine and semi- routine work.

There is a considerable proportion of social rented households. It is also noteworthy that the lowest proportion of adults in receipt of social funded care in Bromley live in this area. The Trinity village development opened recently and includes 120 extra care housing units.

Overall the sense of wellbeing is poor, and higher than average proportions of people are reporting bad and very bad health as reported in the 2011 Census. Levels of healthy eating are low and smoking levels are above average.

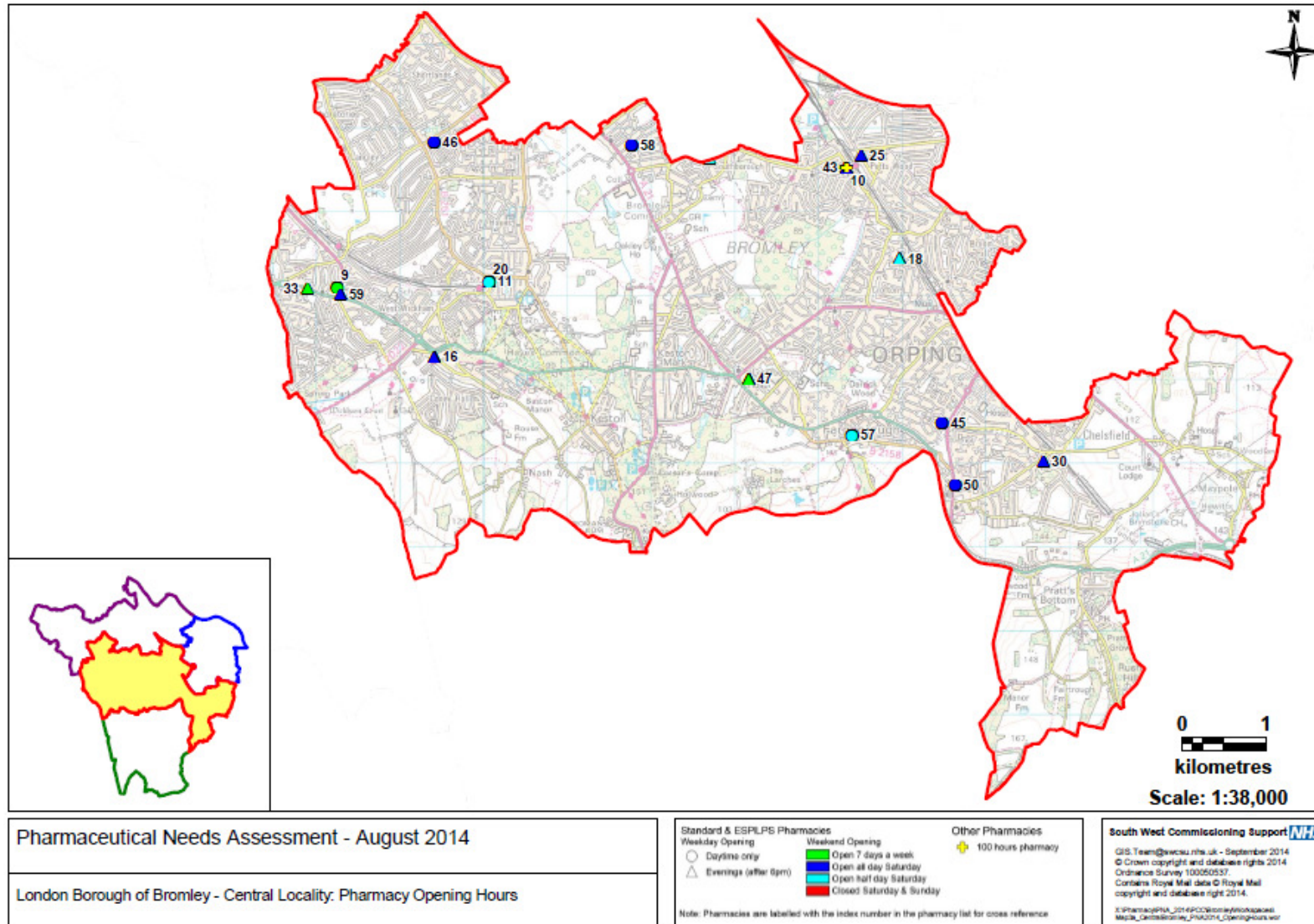
The burden of disease is average in the area except for heart failure, chronic obstructive pulmonary disease and coronary heart disease which are high. Overall the ward has a potential for worsening health outcomes as risk factors combine later in life.

In the Central Locality, there is a need for services acceptable and accessible for older people.

## DRAFT FOR CONSULTATION

There is a need for good services for circulatory disease (atrial fibrillation, CHD, hypertension, stroke), respiratory disease, diabetes and dementia as these appear to be of higher than average prevalence in this population.

Map 6: Central Locality Opening Hours





#### 4.10.4 Access to a Pharmacy in Central Bromley

There are seventeen pharmacies in Central Bromley. One pharmacy is open for 100 hours.

**Table 13: Pharmacies in Central Bromley locality**

Map Index	Trading Name	Address1	Address2	Address3	Post Code	Contract
9	Boots The Chemist	90 Station Road	West Wickham	Kent	BR4 0PU	40 hours
10	Boots The Chemist	77 Queensway	Petts Wood	Orpington	BR5 1DQ	40 hours
11	Boots The Chemist	15 Station Approach	Hayes	Bromley	BR2 7EQ	40 hours
16	Coney Hall Pharmacy	5 Kingsway	Coney Hall	West Wickham	BR4 9JB	40 hours
18	Crofton Pharmacy	1 Place Farm Avenue	Crofton Lane	Orpington	BR6 8DG	40 hours
20	Day Lewis Pharmacy	5 Station Approach	Heyes	Kent	BR2 7EQ	40 hours
25	Farrants(Excel Pharmacies)	13 Station Square	Petts Wood	Orpington	BR5 1LY	40 hours
30	Lloydspharmacy	13-15 Windsor Drive	Chelsfield	Orpington	BR6 6EY	40 hours
33	Lloydspharmacy	108 High Street	West Wickham	Kent	BR4 0ND	40 hours
43	Petts Wood Pharmacy	83 Queensway	Petts Wood	Orpington	BR5 1DQ	100 hours
45	Rowlands Pharmacy	10 Crescent Way	Sevenoaks Road	Orpington	BR6 9LP	40 hours
46	Rowlands Pharmacy	121 Westmoreland Road	Bromley	Kent	BR2 0TY	40 hours
47	Sainsbury's Supermarkets Ltd	4 Pallant Way	Locks Bottom	Farnborough	BR6 8NZ	40 hours
50	Stevens Chemist	5 High Street	Green Street Green	Orpington	BR6 6BG	40 hours
57	Village Pharmacy	131 High Street	Farnborough Village	Farnborough	BR6 7AZ	40 hours
58	Wallace Pring & Co	40 Chatterton Road	Bromley	Kent	BR2 9QE	40 hours
59	Westchem	89 Station Road	West Wickham	Kent	BR4 0PX	40 hours

**Table 14: opening hours in Central Bromley locality**

DAY	EARLIEST OPENING	LATEST CLOSING
MONDAY	8.00am	22.00
TUESDAY	8.00am	22.00
WEDNESDAY	8.00am	22.00
THURSDAY	8.00am	22.00
FRIDAY	8.00am	22.00
SATURDAY	8.00am	23.00
SUNDAY	8.00am	23.00

# DRAFT FOR CONSULTATION

Opening hours in Central Bromley displayed visually:

## WEEKDAYS

Trading Name	Post Cod	7:00 AM	7:30 AM	8:00 AM	8:30 AM	9:00 AM	9:30 AM	10:00 AM	10:30 AM	11:00 AM	11:30 AM	12:00 PM	12:30 PM	1:00 PM	1:30 PM	2:00 PM	2:30 PM	3:00 PM	3:30 PM	4:00 PM	4:30 PM	5:00 PM	5:30 PM	6:00 PM	6:30 PM	7:00 PM	7:30 PM	8:00 PM	8:30 PM	9:00 PM	9:30 PM	10:00 PM
BOOTS THE CHEMIST	BR2 7EQ	[Visual grid]																														
BOOTS THE CHEMIST	BR4 0PU	[Visual grid]																														
BOOTS THE CHEMIST	BR5 1DQ	[Visual grid]																														
ONEY HALL PHARMACY	BR4 9JB	[Visual grid]																														
CROFTON PHARMACY	BR6 8DG	[Visual grid]																														
DAY LEWIS PHARMACY	BR2 7EQ	[Visual grid]																														
FARRANTS(EXCEL PHARMACIES)	BR5 1LY	[Visual grid]																														
LLOYDSPHARMACY	BR4 0ND	[Visual grid]																														
LLOYDSPHARMACY	BR6 6EY	[Visual grid]																														
PETTS WOOD PHARMACY	BR5 1DQ	[Visual grid]																														
ROWLANDS PHARMACY	BR2 0TY	[Visual grid]																														
ROWLANDS PHARMACY	BR6 9LP	[Visual grid]																														
SAINSBURY'S SUPERMARKETS	BR6 8NZ	[Visual grid]																														
STEVENS CHEMIST	BR6 6BG	[Visual grid]																														
VILLAGE PHARMACY	BR6 7AZ	[Visual grid]																														
WALLACE PRING & CO	BR2 9QE	[Visual grid]																														
WESTCHEM	BR4 0PX	[Visual grid]																														

## SATURDAYS

Trading Name	Post Cod	6:30 AM	7:00 AM	7:30 AM	8:00 AM	8:30 AM	9:00 AM	9:30 AM	10:00 AM	10:30 AM	11:00 AM	11:30 AM	12:00 PM	12:30 PM	1:00 PM	1:30 PM	2:00 PM	2:30 PM	3:00 PM	3:30 PM	4:00 PM	4:30 PM	5:00 PM	5:30 PM	6:00 PM	6:30 PM	7:00 PM	7:30 PM	8:00 PM	8:30 PM	9:00 PM	9:30 PM	10:00 PM	10:30 PM				
BOOTS THE CHEMIST	BR2 7EQ	[Visual grid]																																				
BOOTS THE CHEMIST	BR4 0PU	[Visual grid]																																				
BOOTS THE CHEMIST	BR5 1DQ	[Visual grid]																																				
ONEY HALL PHARMACY	BR4 9JB	[Visual grid]																																				
CROFTON PHARMACY	BR6 8DG	[Visual grid]																																				
DAY LEWIS PHARMACY	BR2 7EQ	[Visual grid]																																				
FARRANTS(EXCEL PHARMACIES)	BR5 1LY	[Visual grid]																																				
LLOYDSPHARMACY	BR4 0ND	[Visual grid]																																				
LLOYDSPHARMACY	BR6 6EY	[Visual grid]																																				
PETTS WOOD PHARMACY	BR5 1DQ	[Visual grid]																																				
ROWLANDS PHARMACY	BR2 0TY	[Visual grid]																																				
ROWLANDS PHARMACY	BR6 9LP	[Visual grid]																																				
SAINSBURY'S SUPERMARKETS LTD	BR6 8NZ	[Visual grid]																																				
STEVENS CHEMIST	BR6 6BG	[Visual grid]																																				
VILLAGE PHARMACY	BR6 7AZ	[Visual grid]																																				
WALLACE PRING & CO	BR2 9QE	[Visual grid]																																				
WESTCHEM	BR4 0PX	[Visual grid]																																				

## SUNDAYS

Trading Name	Post Code	8:00 AM	8:30 AM	9:00 AM	9:30 AM	10:00 AM	10:30 AM	11:00 AM	11:30 AM	12:00 PM	12:30 PM	1:00 PM	1:30 PM	2:00 PM	2:30 PM	3:00 PM	3:30 PM	4:00 PM	4:30 PM	5:00 PM	5:30 PM	6:00 PM	6:30 PM	7:00 PM	7:30 PM	8:00 PM	8:30 PM	9:00 PM	9:30 PM	10:00 PM	10:30 PM					
BOOTS THE CHEMIST	BR2 7EQ	[Visual grid]																																		
BOOTS THE CHEMIST	BR4 0PU	[Visual grid]																																		
BOOTS THE CHEMIST	BR5 1DQ	[Visual grid]																																		
ONEY HALL PHARMACY	BR4 9JB	[Visual grid]																																		
CROFTON PHARMACY	BR6 8DG	[Visual grid]																																		
DAY LEWIS PHARMACY	BR2 7EQ	[Visual grid]																																		
FARRANTS(EXCEL PHARMACIES)	BR5 1LY	[Visual grid]																																		
LLOYDSPHARMACY	BR4 0ND	[Visual grid]																																		
LLOYDSPHARMACY	BR6 6EY	[Visual grid]																																		
PETTS WOOD PHARMACY	BR5 1DQ	[Visual grid]																																		
ROWLANDS PHARMACY	BR2 0TY	[Visual grid]																																		
ROWLANDS PHARMACY	BR6 9LP	[Visual grid]																																		
SAINSBURY'S SUPERMARKETS LTD	BR6 8NZ	[Visual grid]																																		
STEVENS CHEMIST	BR6 6BG	[Visual grid]																																		
VILLAGE PHARMACY	BR6 7AZ	[Visual grid]																																		
WALLACE PRING & CO	BR2 9QE	[Visual grid]																																		
WESTCHEM	BR4 0PX	[Visual grid]																																		

In terms of opening hours all Pharmacies open on a Saturday, three open for half a day and there is one pharmacy open till 23.00. There are four Pharmacies open on a Sunday providing services from 8.00am till 23.00.

Pharmaceutical need for the recent development (approximately 800 homes) in Bromley Common is currently being met by the existing network of pharmacies.

There is good access to pharmaceutical services in Central Bromley.

#### **4.10.5 North Bromley locality profile**

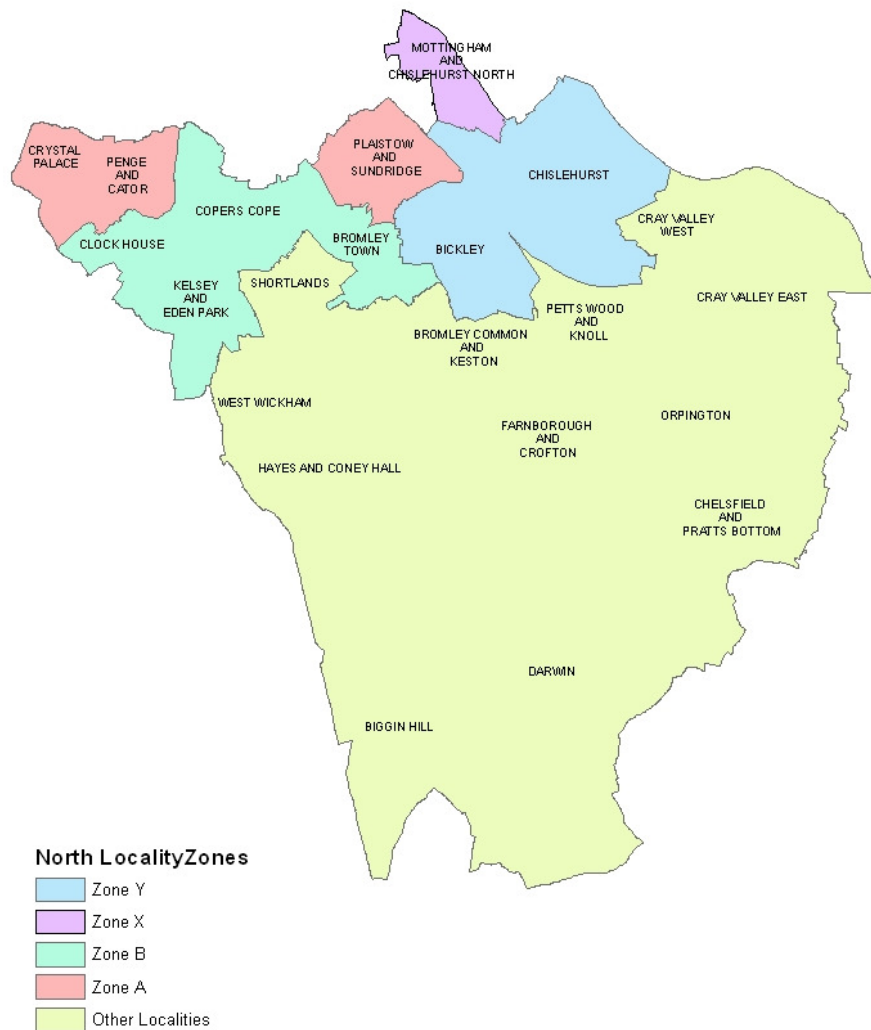
North Bromley locality consists of ten wards:

- Bickley
- Bromley Town
- Chislehurst
- Clock House
- Copers Cope
- Crystal Palace
- Kelsey and Eden Park
- Mottingham and Chislehurst North
- Penge and Cator
- Plaistow and Sundridge

North Bromley locality has a population of 154,130 and comprises four distinct areas, or zones, which have some overlap in their characteristics. These are indicated in map 7.

- Zone A represents Crystal Palace, Penge & Cator and Plaistow & Sundridge wards.
- Zone B represents Bromley Town, Clock House, Copers Cope and Kelsey & Eden Park wards.
- Zone X represents Mottingham & Chislehurst North ward
- Zone Y represents Chislehurst and Bickley wards

Map 7: North Bromley locality zones



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Zones A and X have a high level of deprivation.

**Zone A** has the highest proportion of black and ethnic minorities and people born outside the UK. It has a higher population of under 5s than the other zones, which is also higher than the Bromley average.

Population growth over the next 10 years will be above the Bromley average, and this will include the over 75s and the under 19s.

Zone A has the highest proportion of population health status reported as 'Bad', and to report limiting long term illness.

Uptake of childhood immunisations, influenza immunisation and breastfeeding are all below the Bromley average. The rate of teenage pregnancy is higher in this zone than for England as a whole.

Zone A has a lower than Bromley average life expectancy for males and females. This is matched by the highest circulatory disease and cancer mortality rates, across Bromley, despite a below average disease burden for most chronic conditions.

The prevalence of serious mental illness, learning disability and smoking are all greater than the Bromley average in this zone.

Again, despite a below average disease burden, there are high emergency admission rates in a number of specialties. For asthma, cancer, coronary heart disease, and COPD, the emergency admission rates are the highest across the Beckenham zones. For diabetes, general medicine and gynaecology, emergency admission rates are above the Bromley average.

In **Zone X** there is a higher than average proportion of under 5s and lone parents. Overcrowded housing and unemployment levels are also higher than average.

Like Zone A, Zone X has a high proportion of population health status reported as 'Bad', and to report limiting long term illness.

Uptake of childhood immunisations, influenza immunisation and breastfeeding are all below the Bromley average. The rate of teenage pregnancy is higher in this zone than for England as a whole.

Zone X has a lower than Bromley average life expectancy for males and females. This is matched by the higher than average circulatory disease and cancer mortality rates, despite a below average disease burden for most chronic conditions.

Zones B and Y are both being moderately deprived areas.

**Zone B** has an above average projected population growth which will be the greatest in the under 19 years age group (12.6%), although there will be a 9.9% increase in the proportion over 75s as well.

This zone has a higher than average proportion of under 5s, black and minority ethnic groups, and lone pensioner households. The proportion of overcrowded housing is above average, but there is a higher than average proportion of people in higher managerial and professional occupations and the highest proportion of people with level 4-5 qualifications.

Although health status is more likely to be reported as good or very good in this zone, mortality is above average with lower life expectancy for both males and females than the Bromley average.

Zone B has above average uptake of childhood and below average uptake of over 65 flu immunisations.

The prevalence at all ages of serious mental illness and asthma are all higher than the Bromley average in zone B.

Emergency admission rates are higher than the Bromley average for atrial fibrillation, cancer, COPD, diabetes and trauma & orthopaedics.

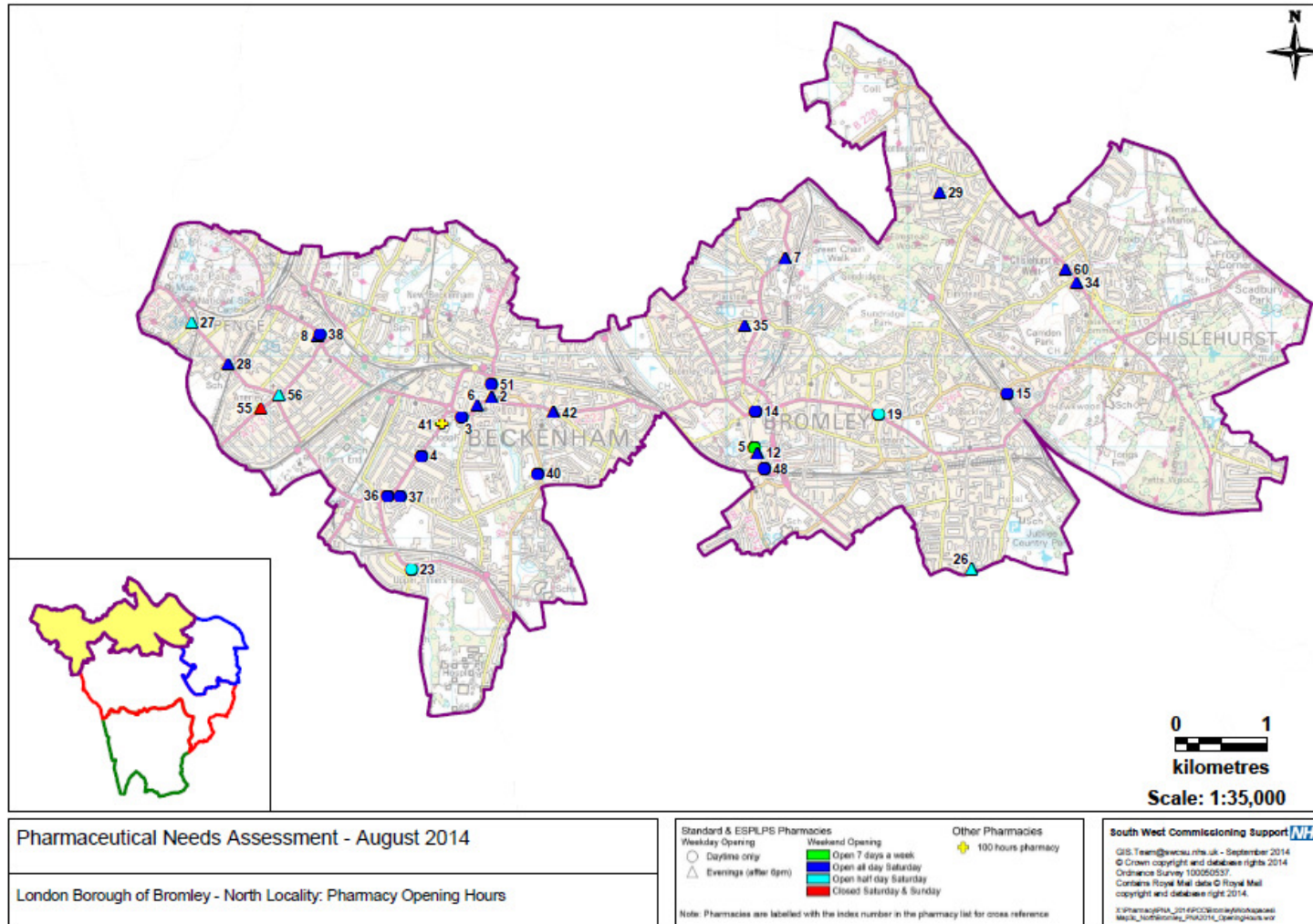
**Zone Y** is predicted to have below Bromley average population growth over the next ten years.

This zone has a higher than average population of over 75s and lone pensioners. The proportion of people with Long Term Limiting Illnesses is also above the Bromley average, and there is a below average life expectancy for women. The disease burden for this zone is higher than average, which is likely to reflect the age structure of the population.

The key recommendations for services in the Bromley Locality are as follows:

- Services provided in this area should be easily accessible to a high turnover population, a significant proportion of whom have been born outside the UK, particularly as the proportion of emergency hospital admissions is higher than average.
- Reducing the incidence of teenage pregnancy is a priority, through partnership working with health, local authority and voluntary agencies as this will impact on the health of families.
- Preventive services for people living in deprivation need to be accessible and flexible enough to offer opportunistic engagement, since this population have lower uptake rates.
- There is a need for good services for children under the age of 5 years. Key interventions include improvements in immunisation uptake, encouraging increased levels of breastfeeding
- There is a need for good services to prevent circulatory disease, diabetes and HIV as this area has the highest proportion of BME population in Bromley.
- There is a need for good services for serious mental illness as the prevalence is higher in this area than in the rest of Bromley.
- Early detection of breast and cervical cancer through screening has been shown to reduce mortality, screening uptake is low in deprived areas of Bromley and work is needed to improve this.

Map 8: North Bromley Locality Opening Hours



DRAFT FOR CONSULTATION

**4.10.6 Access to a Pharmacy in North Bromley**

There are 29 pharmacies in North Bromley. One pharmacy is open for 100 hours.

**Table 15 Pharmacies in North Bromley locality**

Map Index	Trading Name	Address1	Address2	Address3	Address	Postcode	Contract of 40 hours
2	Beckenham Pharmacy	Beckenham Pharmacy Limited	70 High Street	Beckenham	Kent	BR3 1ED	40 hours
3	Beckenham Pharmacy	Beckenham Pharmacy Limited	171-173 High Street	Beckenham	Kent	BR3 1AH	40 hours
4	Blackwells Chemists	Blackwells Chemists Ltd	245 Croydon Road	Beckenham	Kent	BR3 3PS	40 hours
5	Boots The Chemist	Boots UK Limited	234 The Glades Shopping Centre	High Street	Bromley	BR1 1HD	40 hours
6	Boots The Chemist	Boots UK Limited	182 High Street	Beckenham	Kent	BR3 1EW	40 hours
7	Boots The Chemist	Boots UK Limited	125 Burnt Ash Lane		Bromley	BR1 5AB	40 hours
8	Boots The Chemist	Boots UK Limited	4-5 Coleman House	High Street	Penge	SE20 7EX	40 hours
12	Boots The Chemist	Boots UK Limited	Unit B	77-81 High Street	Bromley	BR1 1JY	40 hours
14	Caxton Pharmacy	Patel J V Limited	3 Widmore Road	Bromley	Kent	BR1 1RL	40 hours
15	Chislehurst Pharmacy	Science Pharma Ltd	59 Chislehurst Road	Chislehurst	Kent	BR7 5NP	40 hours
19	Day Lewis Pharmacy	Tayzana Limited	195 Widmore Road		Bromley	BR1 2RG	40 hours
23	Elmers Pharmacy	Medimpo Limited	172 Upper Elmers End Road	Beckenham	Kent	BR3 3DY	40 hours
26	Gordon Davie Chemist Ltd	Rajesh Doshi	195 Southborough Lane	Bromley	Kent	BR2 8AR	40 hours
27	Hamlet Pharmacy	Hamlet Pharmacy	45 Anerley Road	Upper Norwood	London	SE19 2AS	40 hours
28	Kamsons Pharmacy	Waremoss Limited	121 ANERLEY ROAD	London		SE20 8AJ	40 hours
29	Lloyds pharmacy	Lloyds pharmacy Limited	4-6 Cranley Parade	Beaconsfield Road	Mottingham	SE9 4DZ	40 hours
34	Lloyds pharmacy	Lloyds pharmacy Limited	59 High Street	Chislehurst	Kent	BR7 5AF	40 hours
35	London Lane Pharmacy	X-Pharm Ltd	84A London Lane		Bromley	BR1 4HE	40 hours
36	Lotus Pharmacy	Longprofit Limited	119 Croydon Road	Elmers End	Beckenham	BR3 3RA	40 hours
37	Macks Pharmacy	Mr Ranjinish Patel	2 Eden Park Avenue	Elmers End	Beckenham	BR3 3HN	40 hours
39	Macks Pharmacy	Mr Rajinish Patel	165 High Street	Penge	London	SE20 7DS	40 hours
40	Park Langley Pharmacy	Park Langley Pharmacy Limited	90 Wickham Road		Beckenham	BR3 6QH	40 hours
41	Paydens Pharmacy	Paydens Limited	399-401 Croydon Road	Beckenham	Kent	BR3 3PR	100 hours
42	Peters Chemist	Kandelia Limited	15 Bromley Road	Beckenham	KENT	BR3 5NT	40 hours
48	Scotts Pharmacy	Wallace Pring & Co	7 High Street	Bromley	Kent	BR1 1LF	40 hours
51	Superdrug Stores	Superdrug Stores Plc	190-192 High Street	Beckenham	Kent	BR3 1AY	40 hours
55	TT Pharmacy	Vincent K Torku	174 Croydon Road	London		SE20 7YZ	40 hours
56	United Pharmacy	United Pharmacy	5 The Parade	Croydon Road	Anerley	SE20 7AA	40 hours
60	Williams Lm (Chislehurst) Ltd	Williams Lm (Chislehurst) Ltd	89-93 High Street	Chislehurst	Kent	BR7 5AG	40 hours





SUNDAYS

Trading Name	Post Code	8:00 AM	8:30 AM	9:00 AM	9:30 AM	10:00 AM	10:30 AM	11:00 AM	11:30 AM	12:00 PM	12:30 PM	1:00 PM	1:30 PM	2:00 PM	2:30 PM	3:00 PM	3:30 PM	4:00 PM	4:30 PM	5:00 PM	5:30 PM	6:00 PM	6:30 PM	7:00 PM	7:30 PM	
BECKENHAM PHARMACY	BR3 1AF																									
BECKENHAM PHARMACY	BR3 1RD																									
BLAKKABEL'S CHEMISTS	BR3 3FS																									
BOOTS THE CHEMIST	BR1 1JY																									
BOOTS THE CHEMIST	BR1 3AB																									
BOOTS THE CHEMIST	BR3 1EW																									
BOOTS THE CHEMIST	SE20 7DX																									
BOOTS THE CHEMIST	BR1 1HD																									
CANTON PHARMACY	BR1 1RL																									
CHISLEHURST PHARMACY	BR7 5NP																									
DAY FERRIS PHARMACY	BR1 2RF																									
ELMETS PHARMACY	BR3 3UY																									
GORDON DAVIE CHEMIST LTD	BR2 8AR																									
HAMLETT PHARMACY	SE19 2AS																									
KAMEONS PHARMACY	SE20 3AU																									
LLOYDS PHARMACY	BR7 5AF																									
LLOYDS PHARMACY	SC3 4DZ																									
LONDON LANE PHARMACY	BR1 4HE																									
LOTJS PHARMACY	BR3 3FA																									
MACKS PHARMACY	BR3 3HN																									
MACKS PHARMACY	SE20 7DS																									
PARK LANGLEY PHARMACY	BR3 6QH																									
PAYDENS PHARMACY	BR3 3FR																									
PELLETS CHEMISTS	BR3 3NT																									
SCOTT'S PHARMACY	BR1 1LF																									
SUPERDRUG STORES	BR3 1AY																									
TT PHARMACY	SE20 7YZ																									
UNITED PHARMACY	SE20 7AA																									
WILLIAMS LM (CHISLEHURST) LTD	BR7 5AG																									

On a Saturday twenty eight pharmacies are open, five open for half a day and there is one pharmacy open till 20.00. There are two Pharmacies open on a Sunday providing services from 8.00am till 20.00.

There is good access to pharmaceutical services in North Bromley.

#### **4.10.7 South Bromley locality profile**

The South Locality comprises Biggin Hill and Darwin wards, with a population of 45,572.

The South Locality has the smallest population, but a high projected population growth, which will be the greatest in the over 75 age group, although there will be a significant increase in the proportion under 19s as well.

The rural nature of the area separates the South Locality from the rest of Bromley which is more urban.

Of the two wards in this locality, Biggin Hill is the more affluent area with a predominantly working age population, high proportion of owner occupied houses and big green spaces but very limited public open spaces. Although Biggin Hill has a low proportion of children under 5 years of age, there is an average proportion of lone parent households. In contrast, Darwin ward has a higher proportion of older people.

Although life expectancy is above average in the South Locality, Darwin ward has a high burden of disease, in particular circulatory diseases and diabetes. Biggin Hill, has a high prevalence of risk factors for disease including obesity, binge drinking and poor eating habits in a young population, an indicator that disease could present later in life if risk factors are not modified. Obesity levels in adults and children are also higher than average in Darwin ward, where the teenage pregnancy rate is also above average.

In the South Locality, there is a sense of wellbeing and people are reporting good and very good health.

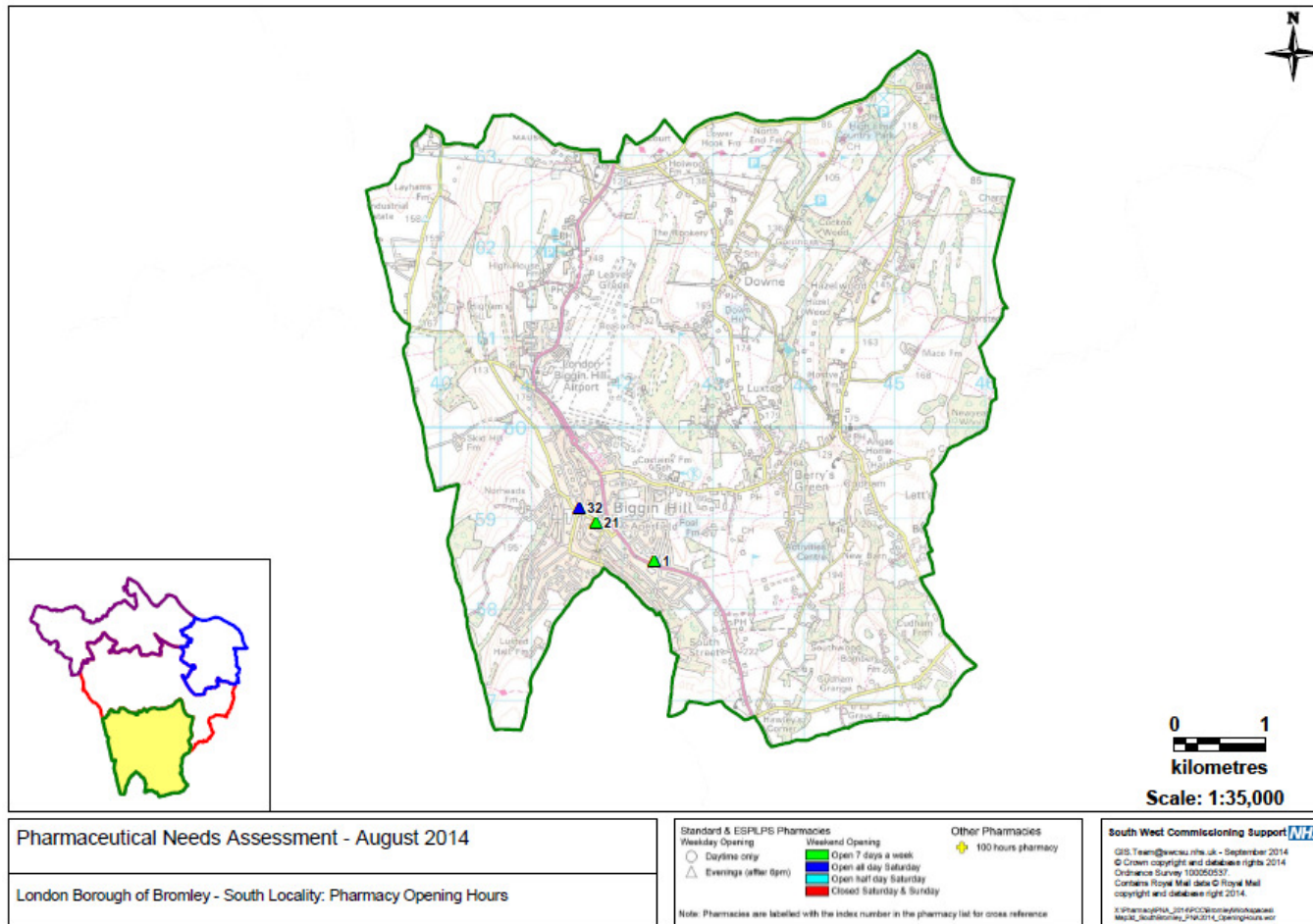
Public transport accessibility is poor in the South Locality.

There is a need for good preventative services in the South Locality, together with good services for circulatory disease. Access to services is an issue, with poor public transport links.

However, responses from the patient survey show that:

- 92% of responses said that they either walk or drive to get to a pharmacy, only 3% use public transport.
- 95% of responses said that they could get to the pharmacy in 15 minutes and of these 39% said they could do so in less than 5 minutes.
- Fewer than 2% of responses found it difficult to get to the pharmacy.

Map 9: South Bromley Locality Opening Hours



### 4.10.8 Access to a pharmacy in South Bromley

There are three pharmacies in South Bromley.

**Table 17 Pharmacies in South Bromley locality**

Map index	Trading Name	Contractor Name (Legal Entity)	Address1	Address2	Address3	Post Code	Contract
1	ALLIANCE PHARMACY	BOOTS UK LIMITED	C/O Waitrose	Main Road	Biggin Hill	TN16 3JZ	40 hours
21	DAY LEWIS PHARMACY	DAY LEWIS CHEMISTS LIMITED	136 Main Road	Biggin Hill	Kent	TN16 3BA	40 hours
32	LLOYDSPHARMACY	LLOYDSPHARMACY LTD	3 Roundway		Biggin Hill	TN16 3XZ	40 hours

**Table 18 Opening hours in South Bromley locality**

DAY	EARLIEST OPENING	LATEST CLOSING
MONDAY	8.00	21.00
TUESDAY	8.00	21.00
WEDNESDAY	8.00	21.00
THURSDAY	8.00	21.00
FRIDAY	8.00	21.00
SATURDAY	8.00	20.00
SUNDAY	10.00	16.00

Opening hours in North Bromley displayed visually:

#### WEEKDAYS

Trading Name	Post Code	7:00 AM	7:30 AM	8:00 AM	8:30 AM	9:00 AM	9:30 AM	10:00 AM	10:30 AM	11:00 AM	11:30 AM	12:00 PM	12:30 PM	1:00 PM	1:30 PM	2:00 PM	2:30 PM	3:00 PM	3:30 PM	4:00 PM	4:30 PM	5:00 PM	5:30 PM	6:00 PM	6:30 PM	7:00 PM	7:30 PM	8:00 PM	8:30 PM	9:00 PM
ALLIANCE PHARMACY	TN16	[Blue bar]																												
DAY LEWIS PHARMACY	TN16	[Blue bar]																												
LLOYDSPHARMACY	TN16	[Blue bar]																												

#### SATURDAYS

Trading Name	Post Code	6:30 AM	7:00 AM	7:30 AM	8:00 AM	8:30 AM	9:00 AM	9:30 AM	10:00 AM	10:30 AM	11:00 AM	11:30 AM	12:00 PM	12:30 PM	1:00 PM	1:30 PM	2:00 PM	2:30 PM	3:00 PM	3:30 PM	4:00 PM	4:30 PM	5:00 PM	5:30 PM	6:00 PM	6:30 PM	7:00 PM	7:30 PM	
ALLIANCE PHARMACY	TN16 3JZ	[Blue bar]																											
DAY LEWIS PHARMACY	TN16 3BA	[Blue bar]																											
LLOYDSPHARMACY	TN16 3XZ	[Blue bar]																											

SUNDAYS

Trading Name	Post Code	8:00 AM	8:30 AM	9:00 AM	9:30 AM	10:00 AM	10:30 AM	11:00 AM	11:30 AM	12:00 PM	12:30 PM	1:00 PM	1:30 PM	2:00 PM	2:30 PM	3:00 PM	3:30 PM	4:00 PM	4:30 PM	5:00 PM	5:30 PM	6:00 PM	6:30 PM	7:00 PM	7:30 PM	8:00 PM
ALLIANCE PHARMACY	TN16 3JZ																									
DAY LEWIS PHARMACY	TN16 3BA																									
LLOYDS PHARMACY	TN16 3XZ																									

All three pharmacies are open on a Saturday and there is one pharmacy open till 20.00. There are two Pharmacies open on a Sunday providing services between 10.00 and 16.00.

There is good access to pharmaceutical services in South Bromley.

**4.10.9 Provision from other providers**

Both Urgent Care Centres in Bromley (at the PRUH and at Beckenham Beacon) are able to dispense small quantities of medication, but neither has a pharmacy.

St Christopher’s Hospice is outside the Borough, but there is a prescribing budget with the hospice to dispense drugs for Bromley patients.

**4.10.10 Conclusion for Essential services**

Essential services are necessary services and we have not identified any gaps. We have concluded that there is adequate provision in terms of choice and access for Bromley residents.

Bromley residents can also access pharmaceutical services from neighbouring boroughs and distance selling pharmacies.

Our survey results show that 74% prefer to use a pharmacy near where they live and the access demonstrated is sufficient.

From the maps in the appendix it can be seen that 100% of the Bromley population live within a 10 minute car drive to a pharmacy and that for over 98% the journey is less than 5 minutes.

During off peak times the journey times are 5 minutes for 100% of the population.

Maps 18a and 18b show that 97.5% of the population can access a pharmacy by public transport within 20 minutes and 100% within 30 minutes.

Map 19 shows that 90% of the population can access a pharmacy by walking within 20 minutes. This increases to 96.7% within a 30 minute walk.

#### 4.11 Advanced Services

Any contractor may choose to provide Advanced Services. There are requirements which need to be met in relation to premises, training or notification to NHS England. Advanced services offer an opportunity for pharmacy contractors to engage patients and empower them to take greater responsibility for their health through their prescribed medication or appliance.

Similarly dispensing appliance contractors would do the same for patients to whom they supply appliances. Providing patients with a better understanding of their medication or appliance can help to prevent unnecessary exacerbations of conditions and reduce the possible risk of patients accessing urgent care services with the aim of leading to better health outcomes.

#### 4.12 Medicines Use Reviews (MURs)

The MUR service is an advanced service within the NHS community pharmacy contractual framework. It is a structured review that is undertaken by a pharmacist to help patients to manage their medicines more effectively.

The MUR involves the pharmacist reviewing the patient's use of their medication, ensuring they understand how their medicines should be used and why they have been prescribed, identifying any problems and then, where necessary, providing feedback to the prescriber. A Prescription Intervention is a type of MUR which is triggered by a significant adherence problem which comes to light during the dispensing of a prescription. It is over and above the basic interventions, relating to safety, which a pharmacist makes as part of the dispensing service.

An MUR is a way to:

- improve patients' understanding of their medicines
- highlight problematic side effects and propose solutions where appropriate
- improve adherence
- reduce medicines wastage, usually by encouraging the patient only to order the medicines they require

MURs must only be provided for patients who have been using the pharmacy for the dispensing of their prescriptions for the previous three months (regular pharmacy). This does not however apply to prescription interventions.

**Table 19 MUR provision in Bromley**

Year	AREA	Number of community pharmacies	Pharmacies providing MUR services	Total MURs	Average MURs per providing pharmacy
2012/13	BROMLEY	59	58	16178	278
	LONDON	1846	1660	436294	263

*Sources: NHS Prescription Services part of the NHS Business Services Authority.  
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Notes: The figures are quoted according to the HSIC website, however the number of pharmacies in the area has since changed to 60. Full details of the current community pharmacy providers are listed in each localities details and the appendix.

Table 19 indicates that pharmacies in Bromley averaged below the maximum limit but above the London average. Not all pharmacies in the area are providing the service. Each pharmacy can provide 400 MURs per year.

### 4.12.1 Provision of MURs by locality

#### EAST BROMLEY

7 of the 11 pharmacies have provided MURs in June 2014 (NHSBSA).

**Table 20: MUR provision in East Bromley locality**

EAST BROMLEY					
Map Index	Pharmacy Name	Premises Address 1	Premises address 2	Premises address 3	Premises postcode
13	BOOTS UK LIMITED	216 HIGH STREET	ORPINGTON	KENT	BR6 0JN
17	CRAY HILL CHEMIST LIMITED	88 COTMANDENE CRESCENT	ST PAULS CRAY	ORPINGTON	BR5 2RG
22	ELDRED DRIVE PHARMACY	25 ELDRED DRIVE	RAMSDEN ESTATE	ORPINGTON	BR5 4PE
24	FARNCRAY LTD	330 HIGH STREET	ORPINGTON	KENT	BR6 0NQ
31	LLOYDSPHARMACY	34 MARION CRESCENT	POVEREST ROAD	ST MARY CRAY	BR5 2DD
53	TESCO EXTRA	10 AUGUSTUS LANE		ORPINGTON	BR6 0NH
54	TESCO PHARMACY	EDGINGTON WAY		SIDCUP	DA14 5BN

#### CENTRAL BROMLEY

11 of the 17 pharmacies in the area have provided MURs in June 2014 (NHSBSA)

**Table 21: MUR provision in Central Bromley locality**

CENTRAL BROMLEY					
Map Index	Pharmacy Name	Premises Address 1	Premises address 2	Premises address 3	Premises postcode
9	BOOTS UK LIMITED	90 STATION ROAD	WEST WICKHAM	KENT	BR4 0PU
10	BOOTS UK LIMITED	77 QUEENSWAY	PETTS WOOD	ORPINGTON	BR5 1DQ
11	YOUR LOCAL BOOTS PHARMACY	15 STATION APPROACH	HAYES	BROMLEY	BR2 7EQ
16	CONEY HALL PHCY	5 KINGSWAY	CONEY HALL	WEST WICKHAM	BR4 9JB
18	CROFTON PHARMACY	1 PLACE FARM AVENUE	CROFTON LANE	ORPINGTON	BR6 8DG
20	DAY LEWIS PHARMACY	5 STATION APPROACH		HEYES	BR2 7EQ
25	FARRANTS(EXCEL PHARMACIES)	13 STATION SQUARE	PETTS WOOD	ORPINGTON	BR5 1LY
30	LLOYDSPHARMACY	13-15 WINDSOR DRIVE	CHELSFIELD	ORPINGTON	BR6 6EY
33	LLOYDSPHARMACY	108 HIGH STREET	WEST WICKHAM		BR4 0ND
43	PETTS WOOD PHARMACY	83 QUEENSWAY	PETTS WOOD	ORPINGTON	BR5 1DQ
45	ROWLANDS PHARMACY	10 CRESCENT WAY	SEVENOAKS ROAD	ORPINGTON	BR6 9LP



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46	ROWLANDS PHARMACY	121 WESTMORELAND ROAD		BROMLEY	BR2 0TY
47	SAINSBURY'S SUPERMARKETS LTD	4 PALLANT WAY	LOCKS BOTTOM	FARNBOROUGH	BR6 8NZ
50	STEVENS CHEMIST	5 HIGH STREET	GREEN STREET GREEN	ORPINGTON	BR6 6BG
57	VILLAGE PHARMACY	131 HIGH STREET	FARNBOROUGH VILLAGE	FARNBOROUGH	BR6 7AZ
58	WALLACE PRING & CO	40 CHATTERTON ROAD		BROMLEY	BR2 9QE

NORTH BROMLEY

21 of the 29 pharmacies have provided MURs in June 2014 (NHSBSA)

Table 22 MUR provision in North Bromley locality

NORTH BROMLEY					
Map Index	Pharmacy Name	Premises Address 1	Premises address 2	Premises address 3	Premises postcode
3	BECKENHAM PHARMACY	171-173 HIGH STREET	BECKENHAM	KENT	BR3 1AH
2	BECKENHAM PHARMACY	70 HIGH STREET	BECKENHAM	KENT	BR3 1ED
4	BLACKWELLS CHEMISTS	245 CROYDON ROAD	BECKENHAM	KENT	BR3 3PS
12	BOOTS UK LIMITED	UNIT B	77-81 HIGH STREET	BROMLEY	BR1 1JY
6	BOOTS UK LIMITED	182 HIGH STREET	BECKENHAM	KENT	BR3 1EW
5	BOOTS UK LIMITED	40 THE GLADES	HIGH STREET	BROMLEY	BR1 1DN
8	BOOTS UK LIMITED	4-5 COLEMAN HOUSE	HIGH STREET	PENGE	SE20 7EX
14	CAXTON PHARMACY	3 WIDMORE ROAD	BROMLEY	KENT	BR1 1RL
19	DAY LEWIS PHARMACY	195 WIDMORE ROAD		BROMLEY	BR1 2RG
23	ELMERS PHARMACY	172 UPPER ELMERS END ROAD	BECKENHAM	KENT	BR3 3DY
26	GORDON DAVIE CHEMIST LTD	195 SOUTHBOROUGH LANE		BROMLEY	BR2 8AR
28	KAMSONS PHARMACY	121 ANERLEY ROAD		LONDON	SE20 8AJ
29	LLOYDSPHARMACY	4-6 CRANLEY PARADE	BEACONSFIELD ROAD	MOTTINGHAM	SE9 4DZ
34	LLOYDSPHARMACY	59 HIGH STREET	CHISLEHURST	KENT	BR7 5AF
35	LONDON LANE PHARMACY	84A LONDON LANE		BROMLEY	BR1 4HE
36	LOTUS PHARMACY	119 CROYDON ROAD	ELMERS END	BECKENHAM	BR3 3RA
37	MACKS PHARMACY	2 EDEN PARK AVENUE	ELMERS END	BECKENHAM	BR3 3HN
40	PARK LANGLEY PHARMACY	90 WICKHAM ROAD	PARK LANGLEY	BECKENHAM	BR3 6QH
41	PAYDENS PHARMACY	399-401 CROYDON ROAD		BECKENHAM	BR3 3PR
42	PETERS CHEMIST	15 BROMLEY ROAD		BECKENHAM	BR3 5NT
51	SUPERDRUG STORES PLC	190-192 HIGH STREET		BECKENHAM	BR3 1AY
56	UNITED PHARMACY	5 THE PARADE	CROYDON ROAD	ANERLEY	SE20 7AA
58	WALLACE PRING & CO	40 CHATTERTON ROAD		BROMLEY	BR2 9QE
7	YOUR LOCAL BOOTS PHARMACY	125 BURNT ASH LANE		BROMLEY	BR1 5AB

## SOUTH BROMLEY

All 3 of the pharmacies in the locality provided MURs in June 2014 (NHSBSA).

**Table 23: MUR provision in South Bromley locality**

SOUTH BROMLEY					
Map Index	Pharmacy Name	Premises Address 1	Premises address 2	Premises address 3	Premises postcode
1	ALLIANCE PHARMACY	C/O WAITROSE	MAIN ROAD	BIGGIN HILL	TN16 3JZ
21	DAY LEWIS PHARMACY	THE SURGERY	STOCK HILL	BIGGIN HILL	TN16 3TJ
32	LLOYDSPHARMACY	3 ROUNDWAY		BIGGIN HILL	TN16 3XZ

There is adequate provision within the current system to ensure MUR services are available across the HWB area.

The MUR service is considered to be a **necessary** service which we would like to see all contractors provide. Table 19 shows that Pharmacies in Bromley delivered below the maximum limit and that not all pharmacies in the area are providing the service.

#### 4.13 New Medicines Services (NMS)

The new medicine service (NMS) is provided to patients who have been prescribed for the first time, a medicine for a specified long term condition, to improve adherence. The NMS involves three stages, recruitment into the service, an intervention about fourteen days later, and a follow up after a further fourteen days.

**Table 24: Community pharmacies on a PCT pharmaceutical list at 31 March, number and percentage providing New Medicines Services by SHA<sup>(1)</sup>, England 2012-13<sup>(2)</sup>**

	Number of community pharmacies	Number of community pharmacies providing NMS	Percentage of community pharmacies providing NMS	Total NMS	Average NMS per community pharmacies
LONDON	1,846	1,453	(78.7)	107,454	74
BROMLEY	59	52	(88.1)	3,162	61

Sources: NHS Prescription Services part of the NHS Business Services Authority.  
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Notes: The figures are quoted according to the HSCIC website, however the number of Pharmacies in the area has since changed to 60. Full details of the current community pharmacy providers are listed in each localities details and the appendix.

In 2012-13, 82.3 (9,464) per cent of community pharmacies in provided 647,859 NMSs. This is an average of 68 NMSs per pharmacy in England. The average in Bromley is 61 NMSs per pharmacy. This service has recently been reviewed and the Department of Health has agreed that it will continue for 2014-2015. If this service continues beyond then NHS England will encourage pharmacies and pharmacists to become eligible to deliver the service so that more eligible patients are able to access and benefit from this service.

#### 4.13.1 Conclusion of provision of advanced services

Advanced services are essential in improving outcomes for patients with long term conditions.

We consider MURs to be a **necessary service** for our population. As patients can usually only access this service from their regular pharmacy we would wish to see all pharmacies provide this service.

We consider the NMS service to be a **necessary service**. This is an important service with proven patient benefits. If this service continues beyond 2015, we would wish to see this service widely available.

AUR and SACs are considered to be **relevant services** that are available from DACs as well as pharmacies.

#### 4.14 Locally commissioned services

Since the NHS reforms local enhanced services can be commissioned by NHSE or by other commissioners such as LAs and CCGs. For the purposes of this PNA locally commissioned services are defined as:

- **Local enhanced services (LES)** - those that are commissioned by NHSE either directly or on behalf of other commissioners
- **Locally commissioned services (LCS)** - those that are commissioned by the LA, CCGs or other commissioners in the area

The services commissioned from Bromley pharmacies are shown in the Appendix B.

#### 4.15 Local Authority public health commissioned services

Local authorities have responsibility for commissioning a wide range of public health services and social care services.

Services that Bromley Council commission from community pharmacies include:

Drugs Misuse Service

- Needle and Syringe Exchange
- Supervised Consumption

Sexual Health Service

- Emergency Hormonal Contraception services
- Chlamydia Testing and Treatment

- Pan-London C-Card Scheme
- HIV Point of Care Testing

Stop Smoking Services

NHS Health Checks

The services that Bromley CCG commission include:

- Tailored Dispensing Service

#### **4.15.1 Drugs Misuse Services**

Pharmacies can provide two services to reduce the harm associated with substance misuse:

- Needle and syringe provision
- Supervised administration services

##### **4.15.1.2 Needle syringe provision**

This is an essential element of measures to reduce harm associated with injecting drug use. The service provides clean injecting equipment and takes in used equipment for safe disposal. The service also provides an opportunity to signpost users to treatment services and to convey health promoting messages.

The service aims to:

- a) Reduce the spread of blood borne viruses such as HIV/AIDS, Hepatitis C and Hepatitis B through the management of needles, syringes and associated materials in the community.
- b) Reduce drug-related harms such as overdoses and premature mortality through providing advice.

Currently in Bromley, 28 of the 60 pharmacies are commissioned to provide needle exchange provision.

In response to the findings of the 2010-2011 PNA, where it was noted that;

- a) there was an absence of providers in the Orpington hub,
- b) 18 more pharmacies indicated a willingness to join the suite of providers.

There has been a significant expansion of the service from just 18% of local pharmacies providing the service to about 47% in 2014. This service includes one 100 hour pharmacy.

Table 25 Distribution of Pharmacies Providing Needle Exchange Services

Locality	No. of Pharmacies in Locality	Pharmacies commissioned
North	29	15
East	11	4
Central	17	9
South	3	0

**Patients' views** - of the respondents to the patient survey, 35.8% were aware of this service, 1.85% of responders reported using the service and 5.5% said that they would use the service.

**Gaps in commissioning** - the current pattern of provision is consistent with the needs of the population and there are no gaps in provision.

### Conclusions/Key messages

The needle exchange service is an important public health service which reduces risk to drug users and the general population. It is considered to be a **relevant** service. Pharmacies provide important access during evenings and weekends. There is provision from the wider treatment system during weekdays.

#### 4.15.1.3 Supervised consumption services

The underlying purpose is to supervise substitute prescription medication for drug users in treatment. The service monitors client compliance with treatment whilst providing support and management particularly during the early stages of treatment. The pharmacist supervises, often daily, the taking of drug treatment by clients in the pharmacy. This service is part of the national framework for drug treatment services aimed at:

- a) improving consistency and quality of care to the patient
- b) reducing the risk of harm to the local community by managing dosage consumption and minimising further abuse
- c) reducing drug-related harms such as overdoses and premature mortality through providing advice.

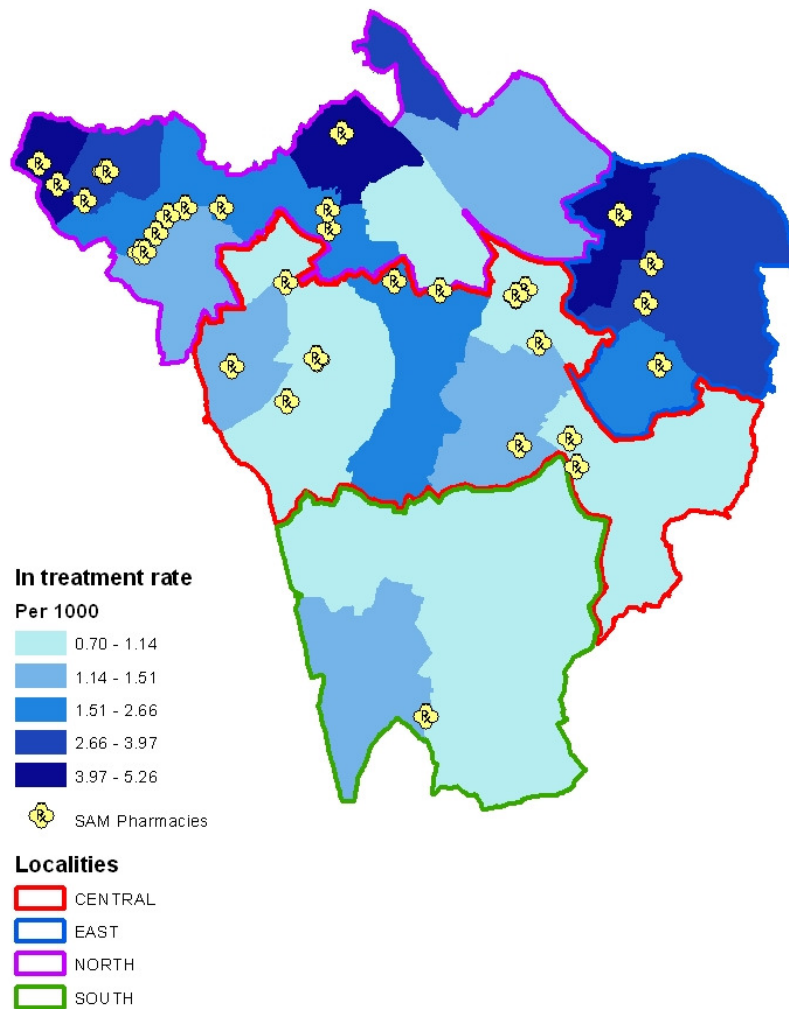
Currently in Bromley, 33 of the 60 pharmacies are commissioned to provide supervised consumption services. In the 2010-2011 PNA it was noted that;

- a) the pattern of provision was consistent with the needs of the population at the time and there were no gaps in service
- b) 21 more pharmacies indicated a willingness to provide the service

There has been a significant expansion of the service since then, from one in four of the local pharmacies providing the service to more than half in 2014. The current provision aims to ensure that there is a comprehensive network of supervised consumption sites across the borough to increase client choice.

### Map 10 Rate of people in treatment for substance misuse

Rate of people in treatment for substance misuse per 1000 by place of residence overlaid with pharmacies providing SAM



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**Gaps in commissioning** - the pattern of provision is consistent with the needs of the population and there are no gaps in provision.

### Conclusions/Key messages

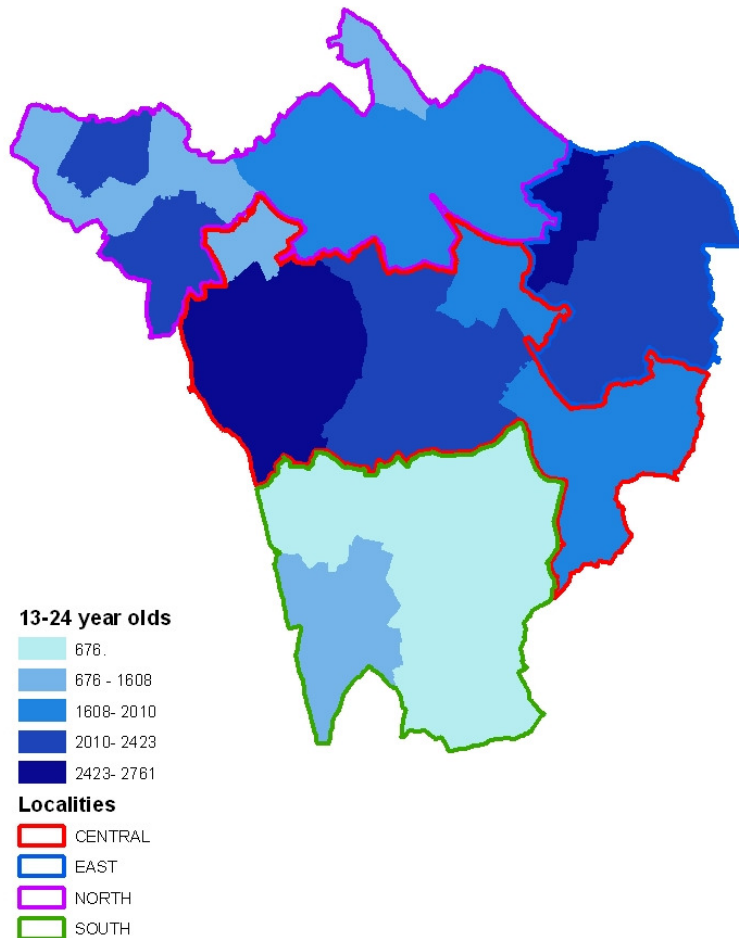
The supervised consumption service performs a critical role in supporting drug users in treatment to manage their treatment programme while minimising the diversion of drug treatment onto the streets. The supervised administration service from pharmacies is a **necessary** service.

### 4.15.2 Sexual health services

In Bromley, three of the sexual health services commissioned from community pharmacies (Emergency hormonal contraception, Chlamydia screening and treatment and the C-Card Scheme) are targeting young people aged 14-24 years. Map 11 shows the geographical distribution of young people in Bromley.

#### Map 11 Distribution in numbers of 13-24 year olds by wards in Bromley

Distribution in numbers of 13-24 year olds by wards in Bromley  
Source: GLA 2013, Round Population Projections



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#### 4.15.2.1 Emergency Hormonal Contraception service

This is offered free to young girls aged 14-24 years as part of an Integrated Sexual Health Service. The service is a component of the wider Bromley Public Health Strategy aimed at avoiding unwanted pregnancies and reducing teenage pregnancy. The service provides safe local access to contraception and contraception advice through appropriately trained pharmaceutical staff.

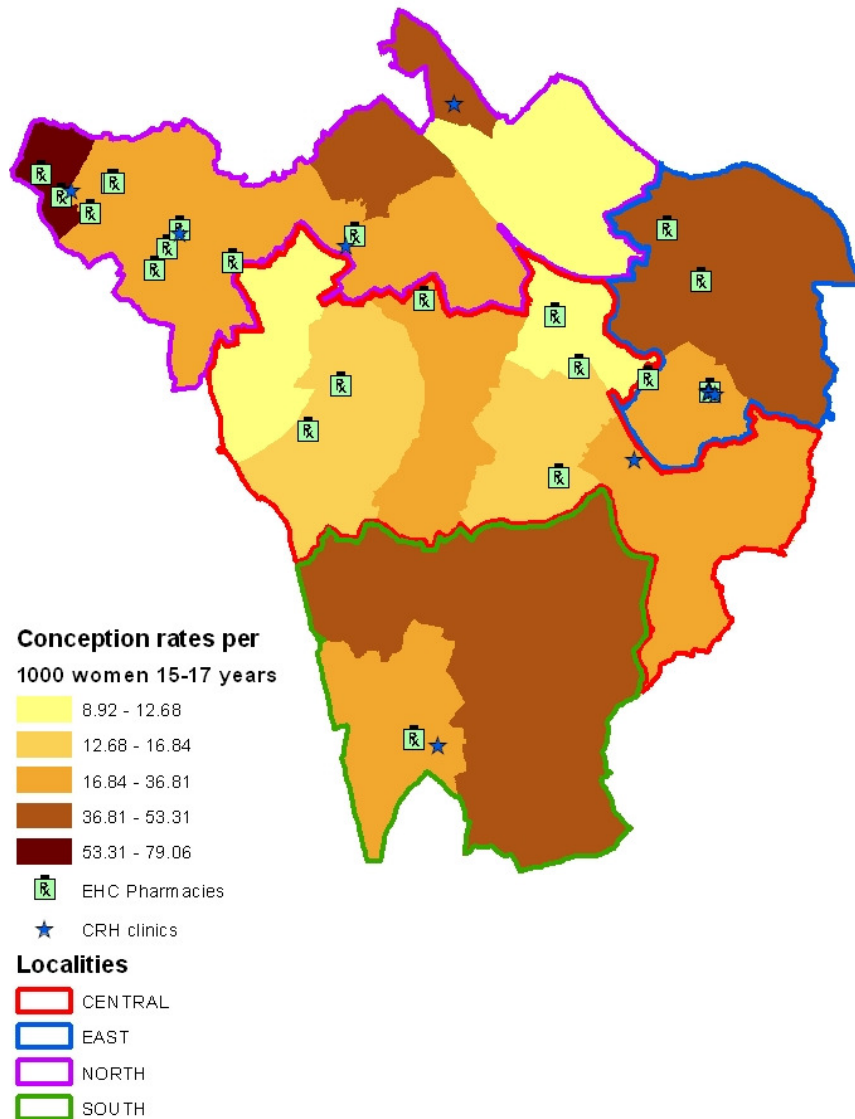
Teenage pregnancy is associated with adverse health and social outcomes. Although teenage pregnancy rates in Bromley are relatively low (24 per 1000 women aged 15-17, 2012) and have continued to decline since 1998, the rates are still higher than the 2010 target of 18 per 1000 women. In addition, the number of

terminations of those women who are pregnant continues to rise, indicating that largely these are unwanted pregnancies.

Currently in Bromley, 22 of the 60 pharmacies are commissioned to provide emergency hormonal contraception to young girls under 25 years. In addition, the service is also provided in Contraception and Reproductive Health Clinics (C&RH), Accident and Emergency and Urgent Care Centre. However, these sites operate on appointment only and do not offer a walk in service. Pharmacies are therefore uniquely placed to provide a fast, appointment free and out of hours accessible service.

**Map 12: location of pharmacies providing EHC by wards that show the teenage conception rate in Bromley.**

Teenage conception rates in Bromley, 2009-2011 overlaid with location of pharmacies providing EHC and C&RH Clinics



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Table 26 lists the non-pharmacy sites offering EHC by ward and locality.



Table 26 Non pharmacy EHC provision

Clinic	Ward	Locality
Orpington C&RH Clinic	Chelsfield & Pratts Bottom	Central
Eldred Drive C&RH Clinic	Orpington	East
Beckenham C&RH Clinic	Kelsey & Eden Park	North
Mottingham C&RH Clinic	Mottingham & Chislehurst North	North
Penge C&RH Clinic	Penge & Cator	North
Bromley Young Peoples C&RH Clinic	Bromley Town	North
Urgent Care Centre (Beckenham Beacon)	Kelsey & Eden Park	North
Biggin Hill C&RH Clinic	Biggin Hill	South

**Patients' views** – of the respondents to the patient survey, 42.6% were aware of this service, but only 2% of the responders were in the target age group. Of those in the target age group, 50% were aware of the service and 25% had, or would use the service.

**Gaps in commissioning** - there is a need for further work to promote EHC provision in pharmacy, particularly in certain wards in the North locality and increase awareness in the target group.

### Conclusions/Key messages

The pharmacy provides a bespoke fast, appointment free and out of hours accessible EHC service. Absence of this service would limit access considerably and would impact adversely the reduction of teenage pregnancy. The EHC service is considered to be a **relevant** service providing additional access and choice to emergency contraception.

The provision from pharmacies in Bromley is currently adequate with 22 providers.

#### 4.15.2.2 Chlamydia Screening and Treatment

Chlamydia is often asymptomatic and if untreated may lead to serious reproductive health consequences. In line with Public Health England recommendations (on-going commissioning of high volume, good quality screening services across primary care and sexual health services), Bromley commissions local pharmacies to offer opportunistic testing and treatment, if the test is positive, to young people (16-24 years) and their partners.

The underlying purpose of the service is for the local pharmacies to:

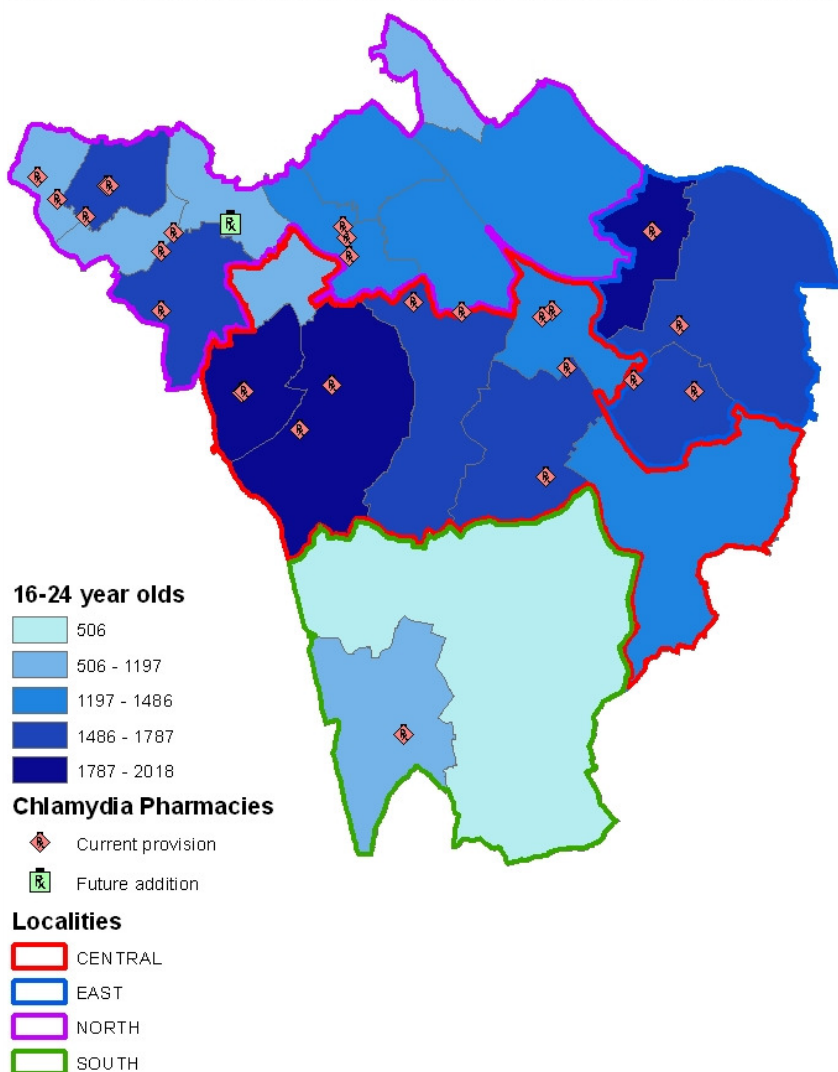
- identify 16-24 year olds who are greatest at risk
- offer chlamydia testing advice and carry out the test
- offer treatment for positive tests, follow on advice and referrals to health care professionals as appropriate.

Currently in Bromley, 29 (48%) pharmacies are providing chlamydia testing and treatment services, however one of them provides testing only. The 2010-2011 PNA identified that 64% of pharmacies were providing the service with 12 more willing to be commissioned. The reduction in the number of pharmacies providing Chlamydia screening and treatment service is due to the changes to the integrated sexual health service contract.

In 2013/14, 1049 kits were issued in Bromley local pharmacies to young people 16-24 years; an uptake of 42% and 9% positivity rate. In addition to provision in pharmacy, Chlamydia screening and testing in 16-24 year olds is carried out in General Practice, Contraception and Reproductive Health clinics, schools, Youth Offending teams and an on- line service at ([www.checkurself.org.uk](http://www.checkurself.org.uk)).

**Map 13: Number of 16-24 year olds by area in Bromley**

Number of 16-24 year olds by area of residence in Bromley, 2014 overlaid with location of pharmacies providing screening and treatment



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**Patient views** - the PNA patients' survey asked about respondent's knowledge of, past use and possible future use of the locally commissioned services. Analysis of responses on the Chlamydia screening and treatment service showed that 1 in 4 of the residents were aware of the service. Only 2% of respondents were in the target age group, of these, 38% were aware of the service, but none had or would use the service from a pharmacy. Gender breakdown showed awareness among men was particularly low (17%).

**Gaps in commissioning** - there is good coverage by pharmacies providing this service across Bromley, but work is ongoing to encourage more pharmacies to participate.

### **Conclusions/Key messages**

The Chlamydia Screening and Treatment Service is a **relevant** service for the population and one which pharmacy, along with other providers makes a valuable contribution towards delivering.

#### **4.15.2.3 Pan-London C-Card Scheme**

Bromley commissions a condom distribution service with 19 pharmacies participating in the C-Card scheme allowing for 14-24 year olds registration to receive free condoms. The scheme is an important part of the complete patient care pathway when pharmacies provide EHC, Chlamydia screening and treatment and condom distribution. It introduces a prevention message for young people and encourages behavioural change.

Bromley C-Card scheme is part of the pan London C-Card scheme aimed at providing under 25 year olds with a C-card, free condoms from any of the London outlets. There are currently 25 other London boroughs using the London C-Card branding with on-line information of where to access the condoms.

The scheme also uses outlets other than pharmacies including libraries, youth centres, contraception and reproductive clinics, schools and colleges, sports centres, making for a widely accessible service to young people.

**Patients' views** - the PNA patients' survey asked about resident's knowledge of, past use and possible future use of the locally commissioned services. Analysis of responses on the C- Card scheme showed that this service had the second highest awareness rate of all the locally commissioned services. Half of the residents reported awareness of the service but there was low past use (<1%) and willingness to use in the future especially in the target group.

**Gaps in commissioning** - this is a fairly new addition to the integrated sexual health service in pharmacy and therefore needs investment in developing and promoting awareness among young people in Bromley.

## Conclusions/Key messages

This scheme is an integral component to providing an integrated Sexual Health Service in pharmacy setting and is considered to be a **relevant** service. It recognises the pivotal role community pharmacies can make in supporting Bromley young people in self-management of relationships towards responsible behaviour.

### 4.15.2.4 Point of Care HIV Testing

HIV is a long term condition and therefore many people living with HIV have complex needs. Diagnosis is the first step to HIV care, however the prognosis and quality of life very much depends on early diagnosis as well as preventing onward transmission.

The rate and number of people diagnosed with HIV and accessing HIV related care is increasing year on year. Although Bromley is just above the 2 per 1000 prevalence threshold, there is marked variation with high rates of up to 8 per 1000 population in places. The sexual health strategy targets testing in areas of highest prevalence. Implementation of HIV point of care testing in pharmacies is in line with recommendations on increasing delivery of sexual health services and STI management in community services ([Increasing the uptake of HIV testing among men who have sex with men](#), NICE public health guidance 34 (2011)).

Point of care HIV testing in Bromley has been rolled out in 2014 after the success of the discrete 2013 Pilot in various community settings. Currently 2 pharmacies have been commissioned in the highest prevalence areas of Bromley to provide point of care testing.

Although the commissioned Sexual Health Outreach Team currently work with the pharmacists to provide this service within the pharmacy premises, it is the cooperation and support from the pharmacists themselves that raises awareness, acceptability and encourages increased testing among high risk groups and as a by-product that normalises HIV testing as part of routine primary care practice. Other than pharmacies, HIV testing is available in a range of services; these include general practice, antenatal care, genitourinary medicine (GUM clinics) and drugs services. These are commissioned to offer HIV testing to high risk individuals or if clinically indicated.

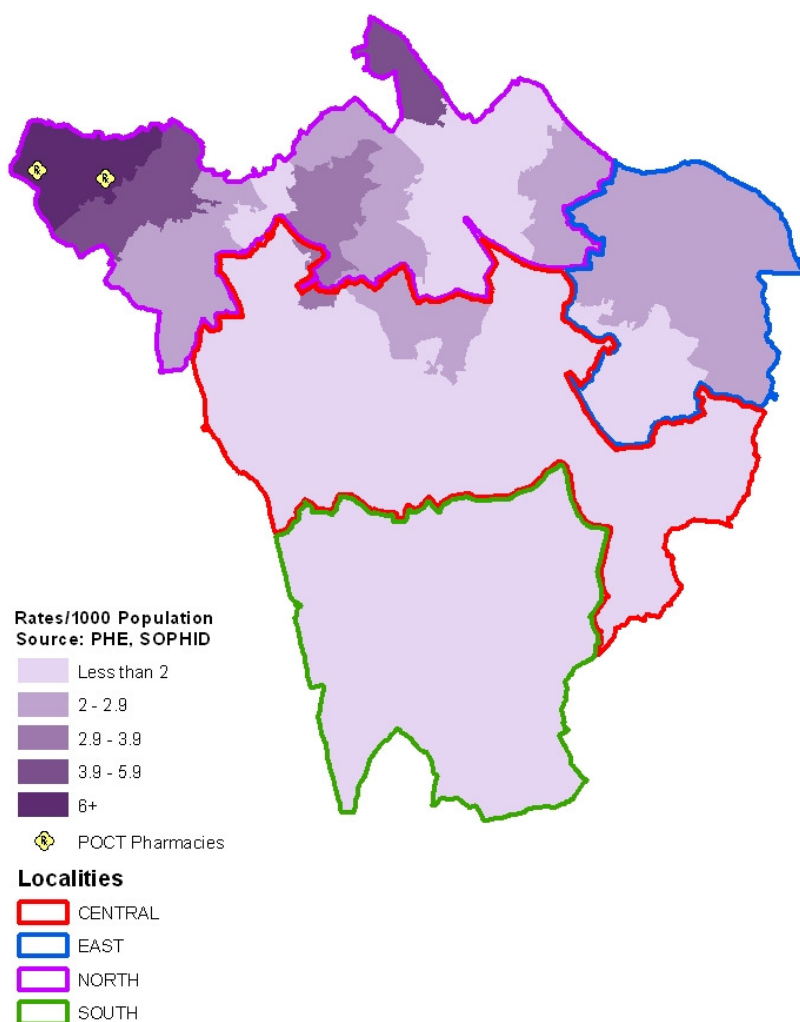
**Patients' views** - the PNA patients' survey asked about resident's knowledge of, past use and possible future use of the locally commissioned services. Analysis of responses on the Point of Care HIV testing service showed that only 6% of the respondents were aware of the service, reflecting a fairly new service that is not widely available. The responses on past use and willingness to use in the future were very low, particularly past use as no respondents had used the service before. When asked about sexual health advice, 93% of the respondents declared no advice had been given by the pharmacist and nor did they need it.

**Gaps in commissioning** - this is a newly commissioned scheme which is set up in an area where prevalence rate is highest in the borough.

**Future prospects** - careful monitoring is required to assess the appropriate roll out of the scheme to other areas of need.

#### Map 14 Prevalence of diagnosed HIV in 15-59 year olds by MSOA in Bromley

Prevalence of diagnosed HIV in 15-59 year olds by MSOA in Bromley, 2012  
overlaid with location of pharmacies providing Point of Care Testing



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### Conclusions/Key messages

HIV Point of Care testing in community pharmacies is a **relevant** service which improves access in areas of high prevalence.

#### 4.15.3 Stop smoking services

The stop smoking service is an important strand of concerted national efforts to reduce smoking rates among populations especially routine and manual workers. Smoking is the single biggest cause of preventable ill health and death in the borough.

Pharmacies are seen as key providers due to their opening hours, accessibility, ability to advise and supply nicotine replacement therapies (NRT) as well as provide counselling. The aim of the stop smoking service delivered in pharmacies is to offer:

- advice and support to clients wishing to give up smoking
- where appropriate supply appropriate drugs and aids
- make referrals to other healthcare professionals.
- sell a broad range of over the counter NRTs which can be used by those wishing to manage their own quit attempts.

### **Current commissioning**

There are 48 pharmacies providing stop smoking services in Bromley. They provide 1:1 support, pharmacological and non-pharmacological assistance. There has been an increase in the number of pharmacies providing stop smoking services in Bromley. In the previous PNA (2010/11), it was noted that 42 (70%) pharmacies provided the service with a further 12 pharmacies willing to be commissioned. During 2013/14, 182 quitters used pharmacy stop smoking services. This comprised approximately 18% of all quitters achieved by Bromley Council. The map below shows the location of these pharmacies and smoking prevalence in the borough. Other than pharmacy services, Bromley stop smoking is delivered in primary care and through Bromley Health Care outreach work.

**Patients' views** - the PNA survey of patients asked about respondents' knowledge of, past use and possible future use of locally commissioned services. Analysing data relating to the stop smoking service showed that this service was the best known of all the locally commissioned services with 57% of the patients aware of the service, perhaps reflecting the national promotion of stop smoking services. Despite the level of smoking prevalence (18%) and a high awareness of the service in pharmacy, fewer than 1% of respondents said that they have used the service in the past and only 1.2% of the respondents said that they would use it in the future. The PNA survey also asked about the need for advice on stopping smoking and if it was given. 6% of respondents said the advice on smoking given to them by the pharmacist was needed.

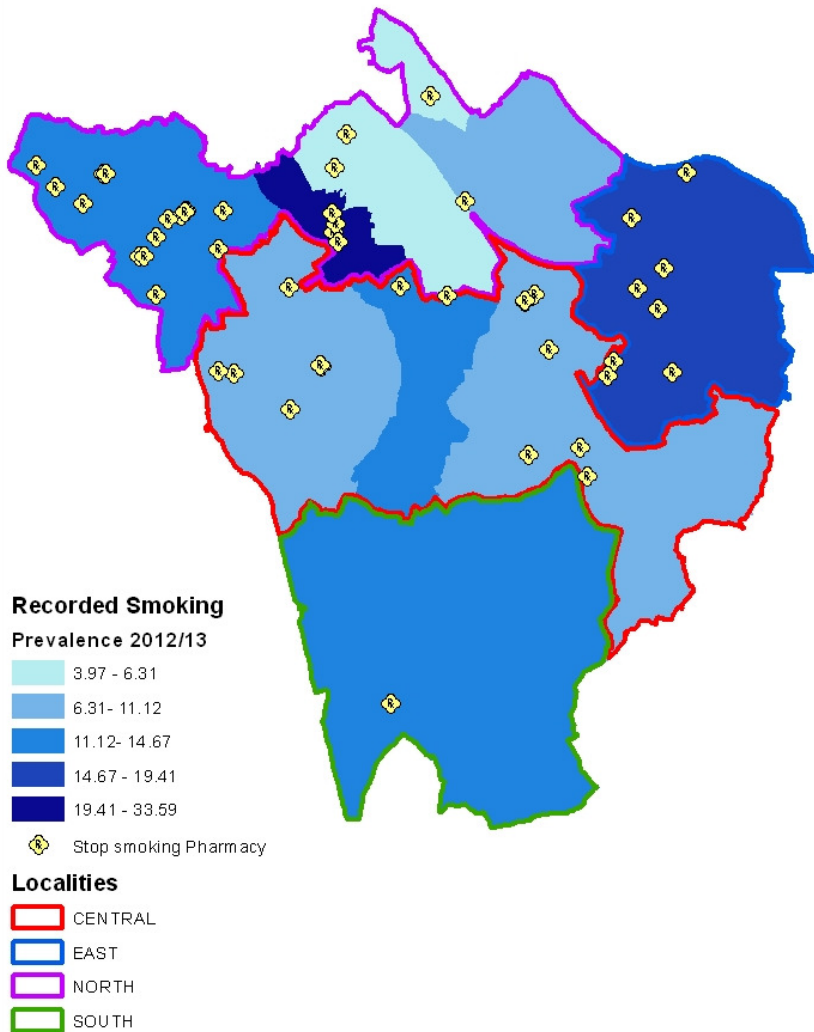
**Gaps in commissioning** - we note that there is no gap in provision given that the areas of high prevalence in each locality are sufficiently provided with pharmacies that provide stop smoking services and data shows that most of quits in Bromley use services other than pharmacies. The absence of pharmacy provision is therefore not an absence of service provision for that population.

### **Conclusions/Key messages**

The stop smoking service is an important strand of efforts to reduce smoking rates locally. It is considered to be a **relevant service**. Pharmacy is well placed to increase service accessibility as well as access to nicotine replacement therapies at the point of care.

**Map 15: Recorded smoking prevalence in Bromley General Practice by place of residence**

Recorded Smoking Prevalence in Bromley General Practice by Place of Residence, 2012/13  
overlaid with location of pharmacies providing Stop Smoking Services



The smoking prevalence data reflects only Bromley GP registered residents and excludes residents registered with a GP outside the borough boundaries  
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**4.15.4 NHS Health Checks**

The NHS Health Checks Programme is a national public health programme aimed at prevention of heart disease, stroke, diabetes, chronic kidney disease and vascular dementia. Individuals aged between 40 and 74 years without established cardiovascular disease are invited to attend for a health check to assess and manage their risk of developing cardiovascular disease. It is recommended that local programmes aim to increase their percentage uptake each year.

**Current commissioning**

Currently, 12 pharmacies are commissioned to deliver NHS Health Checks in Bromley and there are a further 10 undergoing supervision to bring them to alternative provider status.

The previous PNA highlighted that 9 pharmacies were being commissioned with a further 39 willing to take part.

**Patients' views** - the PNA survey of patients asked about respondents' knowledge of, past use and possible future use of locally commissioned services. Analysing data relating to the NHS Health Check service showed that one in four of the patients knew of the service.

Only 1.5% of respondents said they had used the service in the past. However 6.5% of the residents in the target group said they would be willing to use the service in future. This may reflect the fact that this a fairly new service with only 12 pharmacies currently commissioned, and that this service is also provided in GP surgeries and from other providers.

NHS Health checks was one of the services residents said they would want to see provided in their pharmacies.

### **Conclusions/Key messages**

NHS Health Checks are considered to be a relevant service provided by pharmacies, offering choice to residents. There are no gaps in provision, as there is provision either provided by, or linked with, every GP surgery in Bromley.



## 4.15.5 CCG Commissioned Services

### 4.15.5.1 Tailored Dispensing Service

The aim of the service is to support patients with long term conditions (LTCs) to use their prescribed medicines independently and to support self-care. Patients will be referred to the service following a formal assessment by the Medicines Assessment and Support Service (MASS). When a patient requires a dispensing adjustment, compliance aid or medicines reminder system ('auxiliary aid'), this may be provided as part of community pharmacy essential services if the patient meets the criteria specified by the Equality Act 2010 (EA). Where a patient does not satisfy the EA criteria, the Tailored Dispensing Service (TDS) allows provision of a dispensing adjustment/aid from a community pharmacy signed up to provide this service.

#### **Current commissioning**

There are 38 community pharmacies providing the TDS service.

#### **Gaps in commissioning**

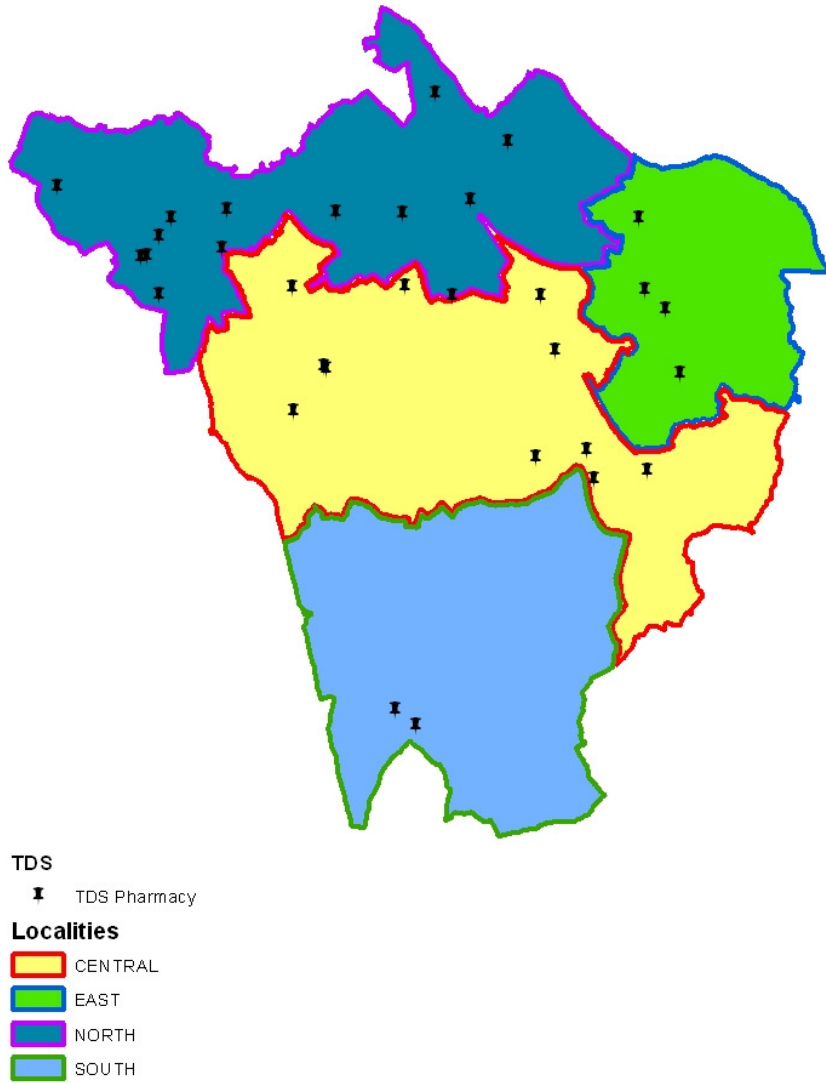
No gaps care currently identified.

#### **Conclusion**

This service is considered to be a **relevant** service for the population. It allows provision for those patients who do not satisfy the EA criteria, to receive interventions tailored to their individual patient needs, supporting them to take their prescribed medicines independently.

Map 16 Distribution of pharmacies providing the Tailored Dispensing Service

Distribution of Pharmacies providing the Tailored Dispensing Service  
by Locality in Bromley, 2014



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#### 4.15.6 NHSE Commissioned Services

##### 4.15.6.1 Flu vaccination

The aim of the service is

- To reduce the serious morbidity and mortality from influenza by immunising people in the target groups, who are most likely to have a serious or complicated illness should they develop influenza. This can avert the need for the patient to be hospitalised.
- To improve choice and access to seasonal influenza vaccination services in primary care.
- To increase the provision of seasonal influenza vaccination to all target groups, particularly hard to reach groups.

##### **Current commissioning**

This service is commissioned in time for the influenza season each year and provision varies. In 2014, flu vaccination has been commissioned from 43 pharmacies in Bromley. An up to date list of providers would be available from NHSE.

**Patients' views** - of the responders to the PNA patient survey, only 15% knew about this service and only about 4% had or would use it. This may reflect the fact that this service is relatively new.

Patient surveys are conducted regularly within the service and feedback indicates that patients are very happy with the service.

**Gaps in commissioning**- none highlighted at present time

##### **Conclusion**

This service is considered to be a **relevant** service for the population providing increased access and choice.

##### 4.15.7 Locally commissioned services gaps and conclusion

We have concluded that there is sufficient capacity within the existing network of provision to meet the needs of our population.

If GP surgeries move to 7 day opening or extended hours we would anticipate NHSE to discuss extended opening hours with the current providers to ensure alignment.

## **5 Future Services**

### **5.1 Health and Population Trends**

The population of Bromley continues to grow, and is predicted to expand further over the next ten years. Whilst there has been an increase in the number of under 4 year olds over the last ten years, this has now reached a plateau, whilst the proportion of older people in Bromley will continue to increase, from 17.7% of the population in 2014 to 18.3% by 2024. Health planning needs to take account of this rise in the numbers of older people, particularly in the South of the Borough which will see the largest increase in numbers of over 75s.

The ethnic minority population in Bromley is also set to increase, particularly the Black African community.

In terms of health needs, the key priorities for Bromley are diabetes, obesity, dementia and emotional wellbeing in young people.

As the population of older people increases, it is expected that there will be larger numbers of people with multiple long term conditions. Dementia prevalence rises with age, and an increase in the number of cases has been predicted. HIV prevalence has been rising, particularly in the North West corner of the borough.

### **5.2 Housing Development**

The most recently published report on the London Borough of *Bromley 5 year supply of deliverable sites for housing* shows that there are 1,160 residential units under construction, 665 with planning permission but not yet commenced and 239 awaiting the signing of legal agreements. In addition there are a further 539 units on “small sites” (less than 10 units) scattered across the borough.

There are proposals which support the existing town centres, notably cinema, retail and residential proposals in Bromley & Orpington.

There is no planned change in major employers across the Borough. However, there is likely to be a contraction in the public sector, possibly with the exception of Education. Education providers (now mostly academies) are likely to increase their staff as the significant increase in pupil rolls leads to expansion in the education sector (spread across the Borough).

We do not foresee any gaps in provision for pharmaceutical services.

### **5.3 Primary care developments and future needs**

The Care Act and the Better Care Fund may have an impact on delivery of healthcare in the future. GP services merging, opening or closing would affect the need for pharmaceutical services in the area.

As the new NHS structure is in its early years there will inevitably be some movement of commissioned services between the NHS organisations. This may lead to services being de-commissioned and different ones commissioned in their place.

Any potential change to the services should be based on the population need of the local areas of which the PNA, along with the JSNA and HWB strategy, should be considered.

#### **5.4 How pharmaceutical services can help deliver a healthier population**

Community pharmacies are located at the heart of communities where people live, shop, work and eat. It is estimated that 96% of the population, even those living in the most deprived areas can reach a community pharmacy within 20 minutes on foot or on public transport.

From our survey we found that 93% can get to a pharmacy within a 15 minute car journey and less than 2% found it difficult to get to a pharmacy.

Community pharmacies have a unique combination of strengths as a primary care provider:

- accessible health expertise
- a network of premises close to where people live, work and shop
- a reach into deprived communities
- a willingness to dispense health, not just medicines.

Community pharmacists and pharmacy technicians are the amongst the most accessible primary care professionals, available without an appointment up to 100 hours a week, including evenings and weekends for people who might not want to visit their GP or A&E but are in need of advice or support from a healthcare professional.

The wide distribution of the community pharmacy and the wider primary care network, right across the full spectrum of socio-demographic locations, allow pharmacies to provide unrivalled access to NHS and public health services, helping to address inequalities in provision and access.

Medicines remain the most common treatment offered to patients and dispensing and supplying medicines safely is at the heart of what community pharmacy does and what patients expect. Pharmacists can play a critical role in promoting the safe use of medicines, in reducing inappropriate hospital admissions and in ensuring that integrated care supports patients as they move between hospital and the community. Pharmacists' expertise can also be capitalised on to tackle persistent problems relating to adverse effects and poor use of medicines, including the costs associated with unused medicines and their safe disposal.

Primary care is a first point of contact, so there are millions of opportunities every day to keep people out of hospital, tackle health inequalities and recognise when people want to make changes in their lives.

A commitment across primary care to making every contact count has the potential to deliver huge benefits for patients, public health and the sustainability of our

national health service. Early detection of illness and tackling major lifestyle problems including smoking, obesity, drug and alcohol abuse, and sexually transmitted disease are the responsibility of all members of the primary care team and offer opportunities for contact with people who do not regard themselves as patients.

A broad customer base, including those who do not perceive themselves as ill, make pharmacies an ideal location for delivering services aimed at early identification and intervention in health and lifestyle issues. These include screening (e.g. diabetes, chlamydia, and high blood pressure) and brief interventions (e.g. alcohol use or exercise).

Pharmacies can also signpost or refer patients to other health or social care services, based on issues that are raised or identified.

The 60 pharmacies in Bromley provide a strong network enhancing the primary care provision across the borough.

Medicines remain the most common treatment offered to patients and dispensing and supplying medicines safely is at the heart of what community pharmacies do and what patients expect.

Pharmacy should be considered an important provider of the integrated urgent care systems locally. Pharmacy can, among other things, provide people with advice and treatment for minor ailments (by sale of over the counter medicines) as well as access to prescription only medicines.

## **5.5 Prescribing by pharmacists**

Non-medical prescribing (NMP) is prescribing by pharmacists (and other allied healthcare professionals), working within their clinical competence as either independent or supplementary prescribers.

Independent prescribing is prescribing by a practitioner, who is responsible and accountable for the assessment of patients with undiagnosed or diagnosed conditions and for decisions about the clinical management required, including prescribing.

NMP could be utilised to enable commissioners and clinicians to transform and develop a range of more integrated services, driving improvement and securing better value for money.

The extension of prescribing responsibilities gives flexibility to innovate when designing cost-effective quality services that improve patient access and choice. NMP has a role to play in supporting delivery of outcomes for commissioners by enhancing access to quality individualised care whilst providing value for money and choice in the way patients are treated.

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These challenges are set in the context of an ageing population with increasing numbers of patients living with long-term conditions and raised patient expectations at a time of great financial pressure.

Pharmacy itself also has a role in ensuring that it develops robust interfaces between other providers of urgent care services, such as general practice, community hospitals and out of- hours service providers to ensure that people receive a seamless service.

## 6 Patient Survey Analysis

The patient survey for the PNA was open to Bromley residents from 14<sup>th</sup> July to 15<sup>th</sup> August 2014.

There are several caveats that should be acknowledged regarding the data collected. In this instance the online survey was a self-selecting sample – meaning that respondents made the effort to seek out and complete it themselves. Therefore the respondent sample was not a true reflection of the population of the borough. The results obtained give a decent broad overview of the public's perception – but cannot be used to determine geographic/demographic inequalities/differences at a robust level. We have therefore reported the top line results only.

The circulation included the following:

BME Groups	Pharmacies
Residents Associations	Community Links Bromley
Voluntary Organisations	Cotmandene and Mottingham Shops
Voluntary Sector Strategic Network	Bromley Gypsy Traveller project
LBB Partners	Bromley Healthcare Staff
CCG Patient Advisory Group	LBB Staff
Faith Groups	Youth Workers Facebook account
X by X	Youth Club Meetings
CCG GP Newsletter	My Life Website
One Bromley	In Touch
Press Release via local media	

There were 334 total responses.

Q1 Why and how often do you use a pharmacy?

The highest response for using a pharmacy about once a week was to buy medicines (5%).

The highest response for using a pharmacy about once a month was to get a prescription for themselves (42%).

The highest reason for using a pharmacy less than once a month was to buy medicines (62%).

### Prescription Collection

42% of responses said that they use a pharmacy about once a month and 51% said that they use a pharmacy less than once a month to collect a prescription for themselves. Further comments revealed that some patients had to pick the latter as their prescriptions are often written for two months.

27% of responses said that they use a pharmacy about once a month and 37% said that they use a pharmacy less than once a month to collect a prescription for someone else. 33% said that they never collect a prescription for someone else.



74% said that never would someone else collect a prescription for them and 20% said that someone else would collect a prescription for them less than once a month.

Buying medicines

75% of responses said that they never let someone else buy medicines for them.

Of the responses that use a pharmacy to buy medicines for themselves or for someone else the highest frequency was less than once a month.

To get advice





89% of responses said that they never let someone else get advice for them.

Of the responses that use a pharmacy to get advice for themselves or for someone else the highest frequency was less than once a month.

To get a service the pharmacy offers

Of responses that use a pharmacy to get a service that it offers, 38% do so less than once a month and 15% about once a month.

Q2. Do you.....?


		Response Percent
Use the same pharmacy all of the time		44.14%
Use different pharmacies but visit one most often		47.75%
Use different pharmacies and none more frequently than any other		7.51%
I never use a pharmacy		0.60%

91% of responses would use the same pharmacy all the time or most often.

Q3 Name of Pharmacy used.

The responses varied with pharmacies named across all the localities and a few from outside the area.

Q4 Why do you use this pharmacy?

4. Why do you use this pharmacy? (please click all that apply to you)				
			Response Percent	Response Total
1	Close to my home		74.10%	246

4. Why do you use this pharmacy? (please click all that apply to you)				
			Response Percent	Response Total
2	Close to my work		10.84%	36
3	Close to my doctor		48.49%	161
4	Close to children's school or nursery		2.41%	8
5	Close to other shops		25.00%	83
6	The pharmacy delivers		10.84%	36
7	It is easy to get to the pharmacy		50.00%	166
8	It is easy to park at the pharmacy		29.82%	99
9	I just like the pharmacy		28.31%	94
10	I trust the people there		40.66%	135
11	The people know me and look after me		33.73%	112
12	They don't know me		2.71%	9
13	I have always used this pharmacy		28.31%	94
14	The service is quick		36.45%	121
15	They usually have what I need in stock		45.18%	150
16	They have good opening hours		34.04%	113
17	The pharmacy collects my prescription and delivers my medicines		12.35%	41
18	The pharmacy was recommended to me		3.61%	12
19	They provide good advice and information		35.54%	118
20	The customer service		28.92%	96
21	It is a well known big chain		12.35%	41
22	It is not one of the big chains		18.98%	63
23	There is a private area if I need to talk to the pharmacist		25.60%	85
24	Other (please specify):		14.46%	48

Of the responses for using a particular pharmacy the main reasons were:

- location (close to doctors, home or work)
- Ease of access (parking, opening hours)
- Having medicines in stock









Of the other responses, the highest responses for using a particular pharmacy were:

- Prescription collection service including repeat prescriptions
- Staff and good service

Q5. Is there a more convenient or nearer pharmacy that for some reason you do not use?

68% of responses said that they use their nearest pharmacy.




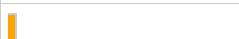

Q6. Reasons why responses said they do not use the pharmacy nearest to them:


6. If you have answered 'Yes' to the above question, please tell us why you do not use that pharmacy				
			Response Percent	Response Total
1	It is not easy to park		26.61%	29
2	I have had a bad experience in the past		20.18%	22
3	The service is too slow		18.35%	20
4	They do not have what I need in stock		8.26%	9
5	There is not enough privacy		11.93%	13
6	It is not open when I need it		21.10%	23
7	It is not wheelchair/baby buggy friendly		1.83%	2
8	I do not want others to see me in my nearest pharmacy		0.00%	0
9	Other (please specify):		43.12%	47

Access (parking and opening hours) and service (past experience, service and stock) are the main reasons for not using a pharmacy that is convenient or nearer.

Personal preference (for a smaller or larger pharmacy) and service from the pharmacist and staff were other reasons for using a pharmacy further away.




Q7. If you go to a pharmacy yourself, how do you usually get there?

7. If you go to the pharmacy yourself, how do you usually get there?				
			Response Percent	Response Total
1	Walk		43.50%	144
2	Bus		3.02%	10
3	Train		0.30%	1
4	Car		48.94%	162
5	Bike		1.81%	6
6	Taxi		0.00%	0

7. If you go to the pharmacy yourself, how do you usually get there?				
			Response Percent	Response Total
7	Other (please specify):		2.42%	8

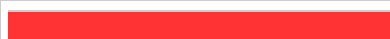


92% of responses said that they either walk or drive to get to a pharmacy, only 3% use public transport.

Q8. ...and how long does it take to get there?

8. ....and how long does it usually take to get there?				
			Response Percent	Response Total
1	Less than 5 minutes		38.79%	128
2	Between 5 and 15 minutes		56.06%	185
3	More than 15 minutes		5.15%	17

95% of responses said that they could get to the pharmacy in 15 minutes and of these 39% said they could do so in less than 5 minutes.

Q9. Overall, how easy is it for you to get to the pharmacy?

9. Overall, how easy is it for you to get to the pharmacy?				
			Response Percent	Response Total
1	Easy		79.52%	264
2	OK		18.98%	63
3	Difficult		1.51%	5

Fewer than 2% of responses found it difficult to get to the pharmacy.

Q10. How would you find out information about a pharmacy?

57% of responses said they would use the internet to find information on opening hours or services offered by a pharmacy.

Q11. We would like to understand how easy it is for you to communicate with your pharmacist.

11. We would like to understand how easy it is for you to communicate with your pharmacist:				
	Yes	No, but I have someone who will translate for me	No, I would prefer this in another language	Response Total
Are you able to talk to a pharmacist in English?	100.0% (332)	0.0% (0)	0.0% (0)	332
Are you able to read information in English?	99.4% (327)	0.6% (2)	0.0% (0)	329

100% of the responses said that they could talk to their pharmacist in English and 99% said that they could read information in English, they remainder had someone how could translate for them.

Q12. Do you feel able to discuss something in private with a pharmacist?

12. Do you feel able to discuss something private with a pharmacist?				
			Response Percent	Response Total
1	Yes		80.31%	257
2	No		19.69%	63

80% of responses felt able to discuss something in private with the pharmacist.

Q13. When is the most convenient time for you to use a pharmacy?

13. When is it most convenient for you to use a pharmacy? (please tick all that apply)				
	Normal weekday	Saturday	Sunday	Response Total
Before 9am	47.7% (71)	32.9% (49)	19.5% (29)	149
Between 9am and noon	33.7% (138)	43.7% (179)	22.7% (93)	410
Between noon and 2pm	31.9% (102)	40.3% (129)	27.8% (89)	320

<b>13. When is it most convenient for you to use a pharmacy? (please tick all that apply)</b>				
	<b>Normal weekday</b>	<b>Saturday</b>	<b>Sunday</b>	<b>Response Total</b>
Between 2pm and 5pm	34.6% (116)	40.9% (137)	24.5% (82)	335
Between 5pm and 8pm	55.8% (168)	24.9% (75)	19.3% (58)	301
After 8pm	49.4% (79)	26.9% (43)	23.8% (38)	160

The highest responses to the most convenient time to use a pharmacy were between 9am and noon followed by between 2pm and 5pm.

The largest preference for using a pharmacy before 9am, between 5-8pm or after 8pm was on a normal weekday.

At the weekend, the most convenient times are between 9am and 5pm.

Q14. If there has been a time when you were not able to use your normal pharmacy, what did you do?

66% of responses said they went to another pharmacy and 23% waited till the pharmacy was open.

Q15. Your pharmacy may offer other services; tell us what you know about them.

The services that most responses knew were available from the pharmacy were sexual health (condom provision, emergency contraception, chlamydia testing and treatment and pregnancy testing), smoking cessation, screening services (check-ups) and home delivery.

The two services most used were medicines use reviews and minor ailments. Minor ailments and blood pressure check-ups were the services that would be used the most if they were available.

Provision of the morning after pill was the least likely service to be used from a pharmacy and 25% said that they did not know this service was available from a pharmacy. This may be reflective of the age range and gender of the responders: 78% over the age of 46 and 25% male.

Q16. Has your pharmacist ever talked to you about...

<b>16. Has your pharmacist ever talked to you about:</b>						
	<b>Yes, and the advice was welcome</b>	<b>Yes, but I was not interested</b>	<b>No, and I would like some advice</b>	<b>No, and I do not need advice</b>	<b>I cannot remember</b>	<b>Response Total</b>
Smoking	5.7% (15)	2.7% (7)	1.1% (3)	86.6% (227)	3.8% (10)	262

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16. Has your pharmacist ever talked to you about:						
	Yes, and the advice was welcome	Yes, but I was not interested	No, and I would like some advice	No, and I do not need advice	I cannot remember	Response Total
Alcohol	1.2% (3)	2.0% (5)	0.8% (2)	93.0% (238)	3.1% (8)	256
Your weight	3.1% (8)	1.5% (4)	6.2% (16)	85.4% (222)	3.8% (10)	260
Heart Disease	4.3% (11)	2.0% (5)	5.5% (14)	84.0% (215)	4.3% (11)	256
Emotional wellbeing	4.3% (11)	1.2% (3)	4.3% (11)	85.9% (220)	4.3% (11)	256
Sexual Health advice	0.8% (2)	2.0% (5)	0.4% (1)	93.3% (236)	3.6% (9)	253
Healthy eating	4.3% (11)	1.2% (3)	3.9% (10)	87.2% (225)	3.5% (9)	258
Skin cancer	0.8% (2)	0.8% (2)	6.5% (16)	87.0% (215)	4.9% (12)	247

Most responders said they had not been talked to about these services and that they did not need the advice.

Of the responses that would have liked advice the highest responses were for advice on skin cancer, weight and heart disease.





Q17. Are there any other services you would like available at your pharmacy?

The highest requests were for blood tests, repeat prescriptions and travel advice/vaccines.







Q18. Is there anything else you would like to tell us about local pharmacy services?

Of the 105 responses, the most responses (50) were about the helpful, friendly and excellent services provided by the pharmacy staff.

Q19. What gender are you?

19. What gender are you?				
			Response Percent	Response Total
1	Male		24.77%	82
2	Female		73.11%	242
3	Transgender		1.51%	5
4	Would rather not say		0.60%	2

Q20. What age are you?

20. What age are you?			Response Percent	Response Total
1	Under 16		0.00%	0
2	16 to 25		2.41%	8
3	26 to 35		8.13%	27
4	36 to 45		11.14%	37
5	46 to 55		23.19%	77
6	56 to 65		30.42%	101
7	Over 66		24.70%	82

Q21. Do you have to pay prescription charges?

54% did not have to pay prescription charges.

Q22. Do you consider yourself to have a disability?

83% of responses said they were not disabled and 11% were unregistered disabled.

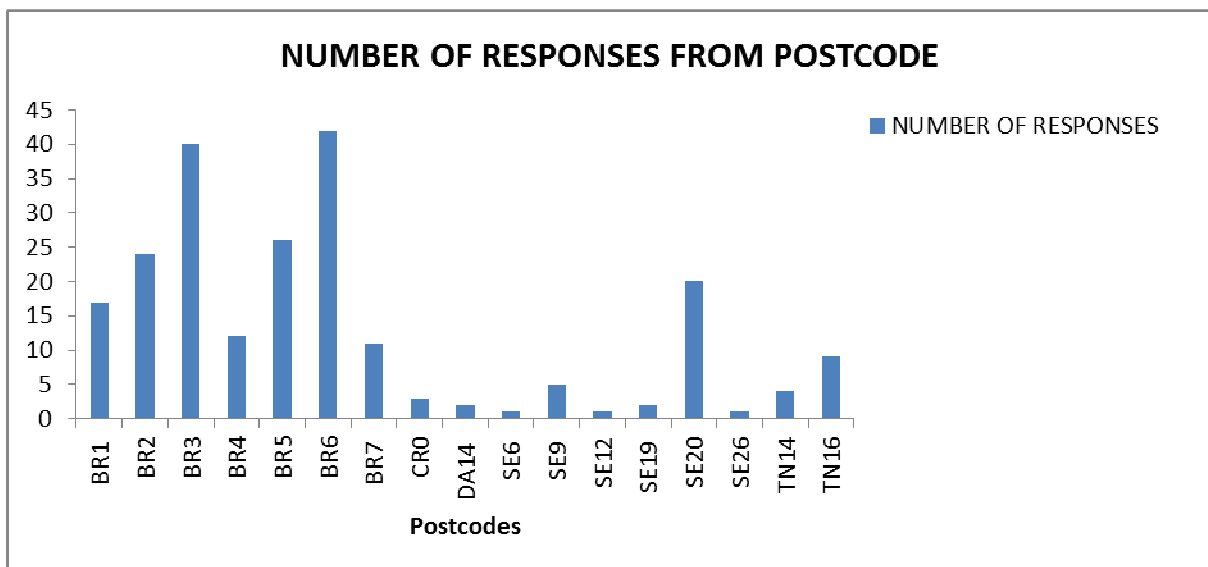
Q23. Are you housebound?

98% of responses said they were not housebound.

Q24. Do you have easy access to the internet?







95% of responses said that they had easy access to the internet.

Q25. Postcodes of where patients who responded to the survey live?





Q26. What is your work situation?

26. What is your work situation?			Response Percent	Response Total
1	Full-time (days)		42.17%	140
2	Full-time (nights)		0.00%	0
3	In full time education		0.00%	0
4	House wife/husband		2.71%	9
5	Part time		19.28%	64
6	Retired		29.52%	98
7	Unemployed		0.90%	3
8	Other (please specify):		5.42%	18

Q27. To which ethnic group do you feel you belong?

89% of responses to the survey said they belong to the British group.

## **7 Appendices**

A Acknowledgements

B Local enhanced services and local commissioned services in Bromley

C List of pharmacies in Bromley

C Maps

D Glossary of terms

E Summary for the purpose of complying with NHS Regulations 2013

F Consultation report

G Equality Impact Assessment

## **Appendix A – Acknowledgements**

We would like to acknowledge the members of the Steering Group for their support in producing Bromley Health and Wellbeing Board's first PNA:

Dr Agnes Marossy, Consultant in Public Health, London Borough of Bromley (LBB)  
Amanda Day, Head of Communications, London Borough of Bromley (LBB)  
Susan Mubiru, Senior PH Intelligence Analyst, London Borough of Bromley (LBB)  
Karen Hong, Head of Medicines Management, Bromley Clinical Commissioning Group (BCCG)  
Maria Davison, Commissioning Manager Bromley Clinical Commissioning Group (BCCG)  
Dr Donya Young, Local Medical Committee (LMC) Representative  
Kit Tse, Local Pharmaceutical Committee (LPC)  
Piyush Amin, Vice Chair, Local Pharmaceutical Committee (LPC)  
Raj Matharu, Chief Officer, Local Pharmaceutical Committee  
Pat Cordery, Commissioning Manager, NHS England  
Tushar Shah Clinical Advisor for Pharmacy, NHS England  
Pat Wade, Chair, Voluntary Sector Strategic Network (VSSN)  
Folake Segun, Director, Healthwatch Bromley  
Paul Burns, Pharmacy Adviser, Primary Care Commissioning CIC  
Daniel Mann, Director of corporate development, Primary Care Commissioning CIC  
Dipti Patel, Pharmacy Associate, Primary Care Commissioning CIC

## Appendix B – Local enhanced services and local commissioned services in Bromley

The Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2013

**Enhanced Services** provided by pharmacy contractors either as enhanced services (**ES**) commissioned by NHS England or locally commissioned service (**LCS**) by local authority, CCG or other. **ES** shown in **bold** type are currently commissioned. **Additional LCS** shown at the end of this table.

Enhanced Service Description – 2013 Directions	Is this service commissioned from Pharmacies or further information re Need	If yes, Service Description	Commissioned by NHS England	Commissioned by local Authority	Commissioned by CCG or other (stated)
<b>Anticoagulant Monitoring Service</b>	AQP	Community Anticoagulant Monitoring Service	No	No	This is not commissioned as a locally commissioned service from pharmacies but as an Any Qualified Provider ( AQP ) from a single provider.
<b>Care Home Service</b>	The CCG Medicines Management (MM) Team provide some MM support to care homes including individual medication reviews and training to care home staff on the safe handling and administration of medicines.	N/A	No	No	No

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<b>Enhanced Service Description – 2013 Directions</b>	<b>Is this service commissioned from Pharmacies or further information re Need</b>	<b>If yes, Service Description</b>	<b>Commissioned by NHS England</b>	<b>Commissioned by local Authority</b>	<b>Commissioned by CCG or other (stated)</b>
<b>Disease Specific Medicines Management Service</b>	No specific need has been identified	n/a	No	No	No
<b>Gluten Free Food Supply Service</b>	Patient Survey: 266 responses. 30.1% know offered, 42.5% didn't know offered, 0.8% have used, 3.4% would use	n/a	No	No	No
<b>Independent Prescribing Service</b>	No specific need has been identified	n/a	No	No	No
<b>Home Delivery Service</b>	Many pharmacies provide non-commissioned service, no additional need.	n/a	No	No	No
<b>Language Access Service</b>	Patient Survey: 332 responses. 100% say able to talk to pharmacist in English, and 99.4% able to read information in English, with 0.6% having someone to read in English and translate for them.	n/a	No	No	No

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<b>Enhanced Service Description – 2013 Directions</b>	<b>Is this service commissioned from Pharmacies or further information re Need</b>	<b>If yes, Service Description</b>	<b>Commissioned by NHS England</b>	<b>Commissioned by local Authority</b>	<b>Commissioned by CCG or other (stated)</b>
<b>Medication Review Service</b>	The CCG Medicines Management team may provide individual medication reviews as part of the prescribing support role to GP practices. No further specific need has been identified.	n/a	No	No	No
<b>Medicines Assessment and Compliance Support Service</b>	Yes	Medicines Assessment and Support Service (MASS) commissioned from Bromley Healthcare. Tailored Dispensing Service (TDS). Commissioned from community pharmacies	No	No	Yes
<b>Minor Ailment Scheme</b>	Patient Survey: 289 responses. 10.7% would use service.	Minor Ailments Pharmacy Service	No	No	No
<b>Needle and Syringe Exchange Service</b>	Yes	NEX ( Needle Exchange)	No	Yes	No
<b>On Demand Availability of Specialist Drugs Service</b>	Being considered by NHSE	End of Life Care – access to palliative drugs	No	No	No

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Enhanced Service Description – 2013 Directions	Is this service commissioned from Pharmacies or further information re Need	If yes, Service Description	Commissioned by NHS England	Commissioned by local Authority	Commissioned by CCG or other (stated)
<b>Out of Hours Services</b>	Patient Survey. EMDoc has drugs for OOH.	n/a	No	No	No
<b>Patient Group Direction Services</b>	Yes	(1) Immunisation Services  (2) Emergency Hormonal Contraception  (3) Chlamydia Treatment (doxycycline and erythromycin)	(1) Yes Flu Vaccination  (2) No  (3) No	(1)No  (2)Yes  (3) Yes	No
<b>Prescriber Support Service</b>	The CCG MM team provide prescribing support to GP practices and other providers.	n/a		No	No
<b>Schools Service</b>	No specific need has been identified.	n/a	No	No	No
<b>Screening Service</b>	Yes	(1) Chlamydia Screening  (2) NHS Health Checks	No	(1) Yes  (2) Yes	No
<b>Stop Smoking Service</b>	Yes	Stop Smoking Service	No	Yes via Community Provider (Bromley)	No

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<b>Enhanced Service Description – 2013 Directions</b>	<b>Is this service commissioned from Pharmacies or further information re Need</b>	<b>If yes, Service Description</b>	<b>Commissioned by NHS England</b>	<b>Commissioned by local Authority</b>	<b>Commissioned by CCG or other (stated)</b>
				Healthcare)	
<b>Supervised Administration Service</b>	Yes	Supervised Administration of Methadone & Buprenorphine	No	Yes	No
<b>Supplementary Prescribing Service</b>	No specific need has been identified.	n/a	No	No	No
<b>Other Locally Commissioned Services (non-ES)</b>	Yes	(1) HIV Point of Care Testing (2) Pan London C-Card condom scheme		(1)Yes  (2) Yes	



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**Appendix C - List of pharmacies in Bromley**

	Area Team-	South London	HWB-Bromley		Information on List last updated on:	31/12/2013						
MAP INDEX	ODS Code	Contractor Name (Legal Entity)	Trading Name	Locality	Address of Contractor 1	Address of Contractor 2	Address of Contractor 3	Address of Contractor 4	Postcode	Type of Contract	Standard Hours	
1	FQN66	BOOTS UK LIMITED	BOOTS THE CHEMIST	Central	90 Station Road	West Wickham	Kent		BR4 0PU	Standard	40 hours	
2	FC864	BOOTS UK LIMITED	BOOTS THE CHEMIST	Central	77 Queensway	Petts Wood	Orpington	Kent	BR5 1DQ	Standard	40 hours	
3	FR570	BOOTS UK LIMITED	BOOTS THE CHEMIST	Central	15 Station Approach	Hayes	Bromley	Kent	BR2 7EQ	Standard	40 hours	
4	FG145	FILTERLIGHT LIMITED	CONEY HALL PHARMACY	Central	5 Kingsway	Coney Hall	West Wickham	Kent	BR4 9JB	Standard	40 hours	
5	FN052	CROFTON PHARMACY	CROFTON PHARMACY	Central	1 Place Farm Avenue	Crofton Lane	Orpington	Kent	BR6 8DG	Standard	40 hours	
6	FT602	DAY LEWIS PLC	DAY LEWIS PHARMACY	Central	5 Station Approach	Hayes	Kent		BR2 7EQ	Standard	40 hours	
7	FGG04	PAYDENS LIMITED	FARRANTS(EXCEL PHARMACIES)	Central	13 Station Square	Petts Wood	Orpington	Kent	BR5 1LY	Standard	40 hours	
8	FE693	AAH RETAIL PHARMACY LIMITED	LLOYDSPHARMACY	Central	13-15 Windsor Drive	Chelsfield	Orpington	Kent	BR6 6EY	Standard	40 hours	
9	FRD37	LLOYDSPHARMACY LIMITED	LLOYDSPHARMACY	Central	108 High Street	West Wickham	Kent		BR4 0ND	Standard	40 hours	
10	FR247	PETTS WOOD PHARMACY LIMITED	PETTS WOOD PHARMACY	Central	83 Queensway	Petts Wood	Orpington	Kent	BR5 1DQ	Standard	100 hours	
11	FL057	L.ROWLAND & CO (RETAIL) LIMITED	ROWLANDS PHARMACY	Central	10 Crescent Way	Sevenoaks Road	Orpington	Kent	BR6 9LP	Standard	40 hours	
12	FJV12	L.ROWLAND & CO (RETAIL) LIMITED	ROWLANDS PHARMACY	Central	121 Westmoreland Road	Bromley	Kent		BR2 0TY	Standard	40 hours	
13	FLK72	SAINSBURY'S SUPERMARKETS LTD	SAINSBURY'S SUPERMARKETS LTD	Central	4 Pallant Way	Locks Bottom	Farnborough	Kent	BR6 8NZ	Standard	40 hours	
14	FMK62	PAYDENS (STEYNING) LIMITED	STEVENS CHEMIST	Central	5 High Street	Green Street Green	Orpington	Kent	BR6 6BG	Standard	40 hours	

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15	FM963	VILLAGE PHARMACY	VILLAGE PHARMACY	Central	131 High Street	Farnborough Village	Farnborough	Kent	BR6 7AZ	Standard	40 hours
16	FTK32	WALLACE PRING & CO	WALLACE PRING & CO	Central	40 Chatterton Road	Bromley	Kent		BR2 9QE	Standard	40 hours
17	FL891	WESTCHEM	WESTCHEM	Central	89 Station Road	West Wickham	Kent		BR4 0PX	Standard	40 hours
18	FD35	BOOTS UK LIMITED	BOOTS THE CHEMIST	East	216 High Street	Orpington	Kent		BR6 0LS	Standard	40 hours
19	FTK80	CANTERBURY PHARMACY LIMITED	CRAY HILL CHEMIST	East	88 Cotmandene Crescent	St Pauls Cray	Orpington	Kent	BR5 2RG	Standard	40 hours
20	FKV60	RAN PHARMA LIMITED	ELDRED DRIVE PHARMACY	East	25 Eldred Drive	Ramsden Estate	Orpington	Kent	BR5 4PE	Standard	40 hours
21	FRC25	FARNCRAY LTD	FARNCRAY LTD	East	330 High Street	Orpington	Kent		BR6 0NQ	Standard	40 hours
22	FQF14	KINGSWOOD-GK LIMITED	LLOYDSPHARMACY	East	34 Marion Crescent	Poverest Road	St Mary Cray	Orping-N, Kent	BR5 2DD	Standard	40 hours
23	FJ793	OSBON LIMITED	OSBON PHARMACY	East	55 High Street	St Mary Cray	Orpington	Kent	BR5 3NJ	Standard	40 hours
24	FTM53	PRIORY PHARMACY	PRIORY PHARMACY	East	8 Carlton Parade	Orpington	Kent		BR6 0JB	Standard	40 hours
25	FR366	SILVERSANDS (MEDWAY) LTD	SILVERSANDS LTD	East	Anglesea Hlthy Living Ctr	1 Kent Rd, St Mary Cray	Orpington	Kent	BR5 4AD	Standard	40 hours
26	FJK92	SUPERDRUG STORES PLC	SUPERDRUG STORES	East	Superdrug Stores	207-215 High Street	Orpington	Kent	BR6 0PS	Standard	40 hours
27	FX096	TESCO EXTRA	TESCO EXTRA	East	9 Augustus Lane	Orpington	Kent		BR6 0NH	Standard	100 hours
28	FPK91	TESCO SUPERSTORE	TESCO PHARMACY	East	Edgington Way	Sidcup	Kent		DA14 5BN	Standard	100 hours
29	FPA70	BECKENHAM PHARMACY LIMITED	BECKENHAM PHARMACY	North	70 High Street	Beckenham	Kent		BR3 1ED	Standard	40 hours
30	FE112	BECKENHAM PHARMACY LIMITED	BECKENHAM PHARMACY	North	171-173 High Street	Beckenham	Kent		BR3 1AH	Standard	40 hours
31	FQ399	BLACKWELLS CHEMISTS LTD	BLACKWELLS CHEMISTS	North	245 Croydon Road	Beckenham	Kent		BR3 3PS	Standard	40 hours
32	FM350	BOOTS UK LIMITED	BOOTS THE CHEMIST	North	234 The Glades Shopping Centre	High Street	Bromley	Kent	BR1 1HD	Standard	40 hours
33	FKG02	BOOTS UK LIMITED	BOOTS THE CHEMIST	North	182 High Street	Beckenham	Kent		BR3 1EW	Standard	40 hours
34	FDX70	BOOTS UK LIMITED	BOOTS THE CHEMIST	North	125 Burnt Ash Lane		Bromley	Kent	BR1 5AB	Standard	40 hours
35	FQD55	BOOTS UK LIMITED	BOOTS THE CHEMIST	North	4-5 Coleman House	High Street	Penge	London	SE20 7EX	Standard	40 hours

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36	FAH85	BOOTS UK LIMITED	BOOTS THE CHEMIST	North	Unit B	77-81 High Street	Bromley	Kent	BR1 1JY	Standard	40 hours
37	FKE53	PATEL J V LIMITED	CAXTON PHARMACY	North	3 Widmore Road	Bromley	Kent		BR1 1RL	Standard	40 hours
38	FXW06	SCIENCE PHARMA LTD	CHISLEHURST PHARMACY	North	59 Chislehurst Road	Chislehurst	Kent		BR7 5NP	Standard	40 hours
39	FD505	TAYZANA LIMITED	DAY LEWIS PHARMACY	North	195 Widmore Road		Bromley	Kent	BR1 2RG	Standard	40 hours
40	FJC01	MEDIMPO LIMITED	ELMERS PHARMACY	North	172 Upper Elmers End Road	Beckenham	Kent		BR3 3DY	ESPLPS	40 hours
41		GORDON DAVIE CHEMIST Ltd	GORDON DAVIE CHEMIST	North	195 Southborough Lane	Bromley	Kent		BR2 8AR	Standard	40 hours
42	FA819	HAMLET PHARMACY	HAMLET PHARMACY	North	45 Anerley Road	Upper Norwood	London		SE19 2AS	Standard	40 hours
43	FA767	WAREMOSS LIMITED	KAMSONS PHARMACY	North		London			SE20 8AJ	Standard	40 hours
44	FH398	LLOYDSPHARMACY LIMITED	LLOYDSPHARMACY	North	4-6 Cranley Parade	Beaconsfield Road	Mottingham	London	SE9 4DZ	Standard	40 hours
45	FVN52	LLOYDSPHARMACY LIMITED	LLOYDSPHARMACY	North	59 High Street	Chislehurst	Kent		BR7 5AF	Standard	40 hours
46	FJW74	X-PHARM LTD	LONDON LANE PHARMACY	North	84A London Lane		Bromley	Kent	BR1 4HE	Standard	40 hours
47	FDN35	LONGPROFIT LIMITED	LOTUS PHARMACY	North	119 Croydon Road	Elmers End	Beckenham	Kent	BR3 3RA	Standard	40 hours
48	FY725	MR RANJINISH PATEL	MACKS PHARMACY	North	2 Eden Park Avenue	Elmers End	Beckenham	Kent	BR3 3HN	Standard	40 hours
49	FRH46	MR RAJINISH PATEL	MACKS PHARMACY	North	165 High Street	Penge	London		SE20 7DS	Standard	40 hours
50	FKM27	PARK LANGLEY PHARMACY LIMITED	PARK LANGLEY PHARMACY	North	90 Wickham Road		Beckenham	Kent	BR3 6QH	Standard	40 hours
51	FAD85	PAYDENS LIMITED	PAYDENS PHARMACY	North	399-401 Croydon Road	Beckenham	Kent		BR3 3PR	Standard	100 hours
52	FW698	Kandelia Limited	Peters Chemist	North	15 Bromley Road	Beckenham	KENT		BR3 5NT	Standard	40 hours
53	FVR97	WALLACE PRING & CO	SCOTTS PHARMACY	North	7 High Street	Bromley	Kent		BR1 1LF	Standard	40 hours
54	FG099	SUPERDRUG STORES PLC	SUPERDRUG STORES	North	190-192 High Street	Beckenham	Kent		BR3 1AY	Standard	40 hours
55	FX117	VINCENT K TORQU	TT PHARMACY	North	174 Croydon Road	London			SE20 7YZ	Standard	40 hours
56	FYA22	UNITED PHARMACY	UNITED PHARMACY	North	5 The Parade	Croydon Road	Anerley	London	SE20 7AA	Standard	40 hours

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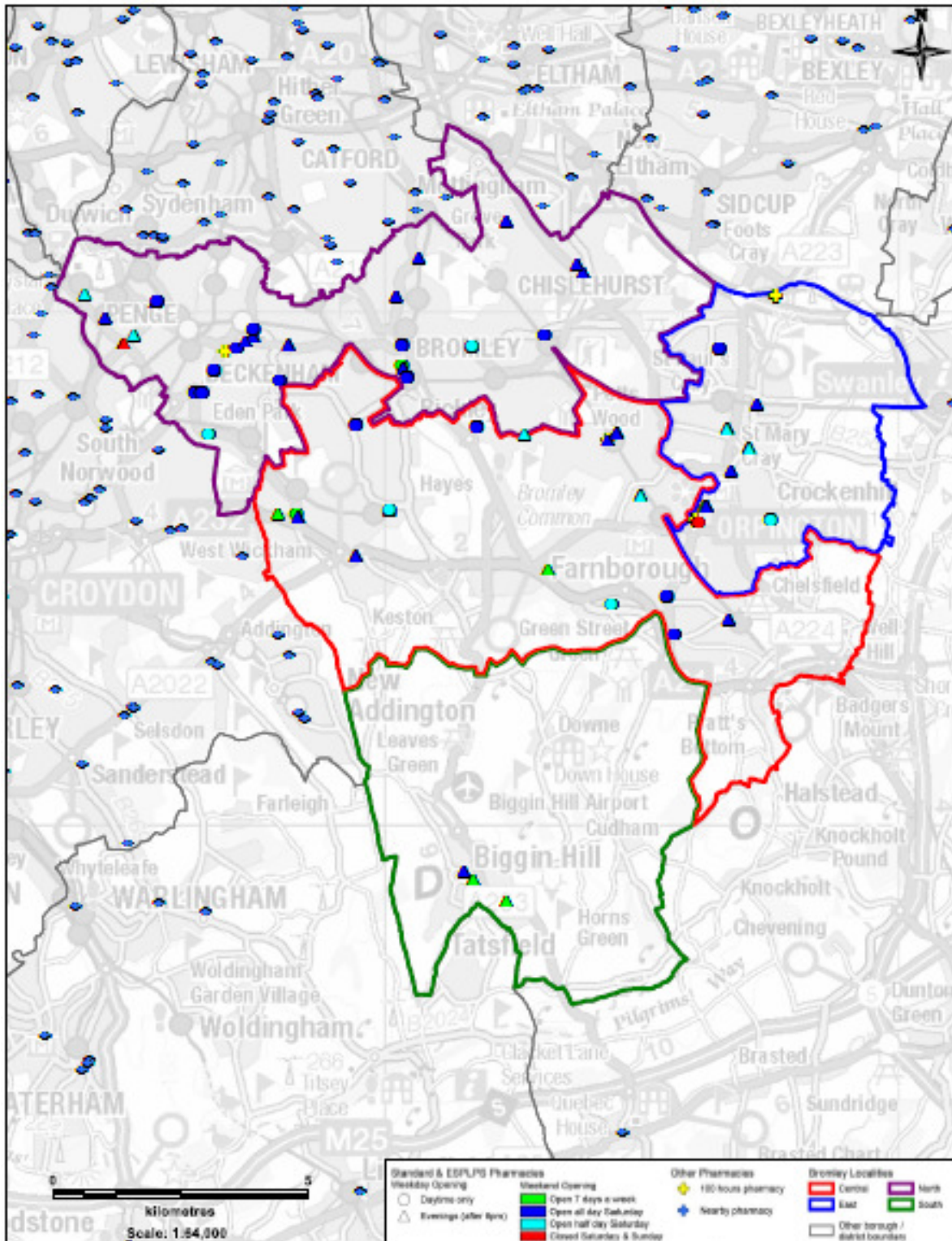
57	FVF13	WILLIAMS LM (CHISLEHURST) LTD	WILLIAMS LM (CHISLEHURST) LTD	North	89-93 High Street	Chislehurst	Kent		BR7 5AG	Standard	40 hours
58	FVR91	BOOTS UK LIMITED	ALLIANCE PHARMACY	South	C/O Waitrose	Main Road	Biggin Hill	Kent	TN16 3JZ	Standard	40 hours
59	FWA21	DAY LEWIS CHEMISTS LIMITED	DAY LEWIS PHARMACY	South	The Surgery	Stock Hill	Biggin Hill,	Kent	TN16 3TJ	Standard	40 hours
60	FMW42	LLOYDSPHARMACY LTD	LLOYDSPHARMACY	South	3 Roundway		Biggin Hill	Kent	TN16 3XZ	Standard	40 hours

## Appendix D – Maps used for Bromley PNA

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- Map 1: Distribution of Pharmacies in Bromley and population density
- Map 2: Bromley Pharmacies and Index of Multiple Deprivation by LSOA
- Map 3: Pharmacies and Black & Minority Ethnic levels (BME) by Ward
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- Map 4a: Opening hours of all Bromley pharmacies **(in appendix)**
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- Map 6: Central Bromley Locality Opening Hours
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- Map 8: North Bromley Locality Opening Hours
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- Map 10 Rate of people in treatment for substance misuse
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- Map 17a: Average drive time to a pharmacy in Bromley **(in appendix)**
- Map 17b: Off peak drive times to a pharmacy in Bromley **(in appendix)**
- Map 17c: Peak drive time to a pharmacy in Bromley **(in appendix)**
- Map 18a: Public transport travel times to a pharmacy in Bromley, Tuesday 9-1 pm **(in appendix)**
- Map 18b: Public transport travel times to a pharmacy in Bromley, Tuesday 1-5pm **(in appendix)**
- Map 19: Walking Distance to a pharmacy in Bromley **(in appendix)**
- Map 20: 1.6km buffers around Bromley pharmacies **(in appendix)**

Map 4a: Opening hours of all Bromley pharmacies

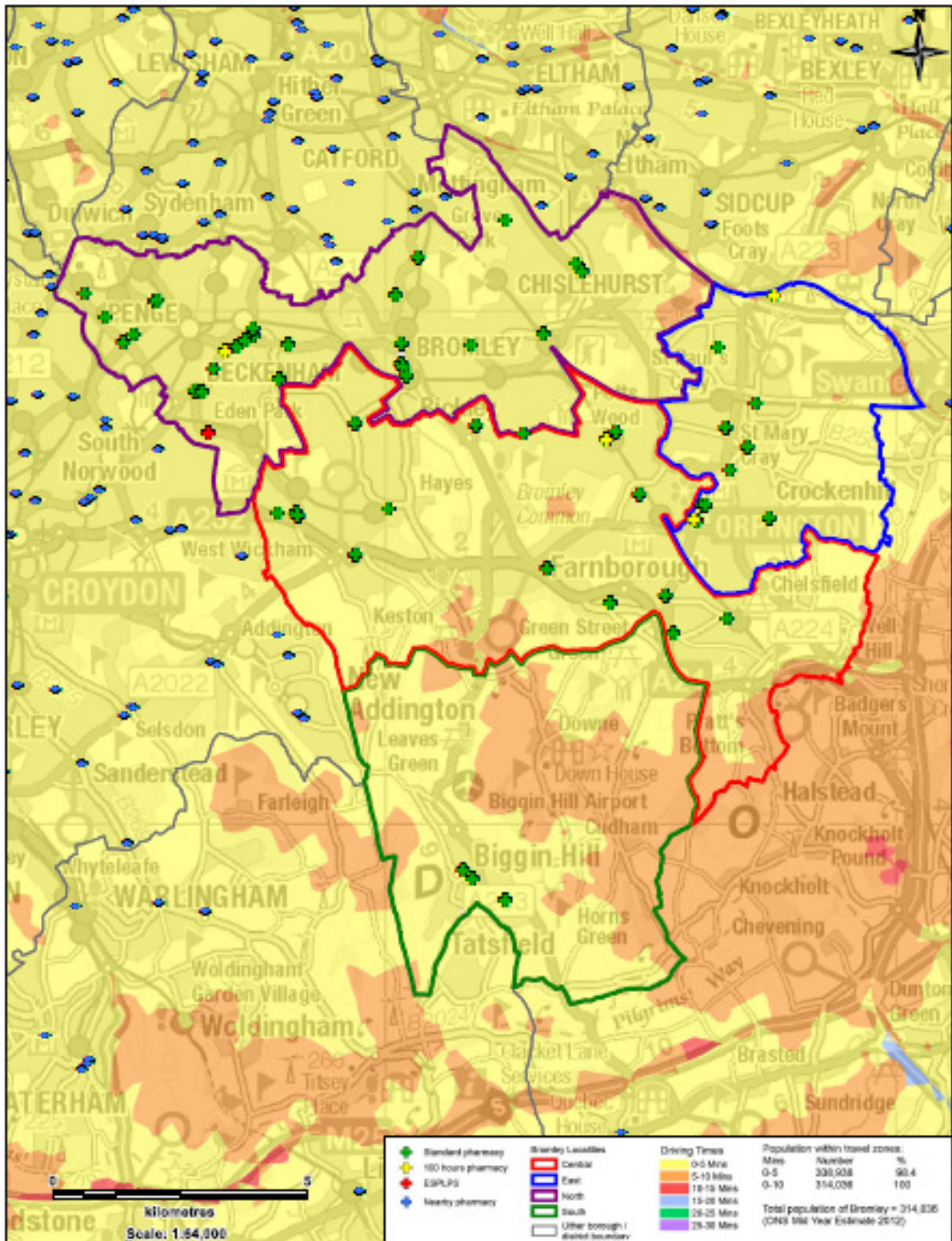


Pharmaceutical Needs Assessment - August 2014

London Borough of Bromley: Pharmacy Opening Hours

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Map 17a Average drive time to a pharmacy in Bromley



Pharmaceutical Needs Assessment - August 2014

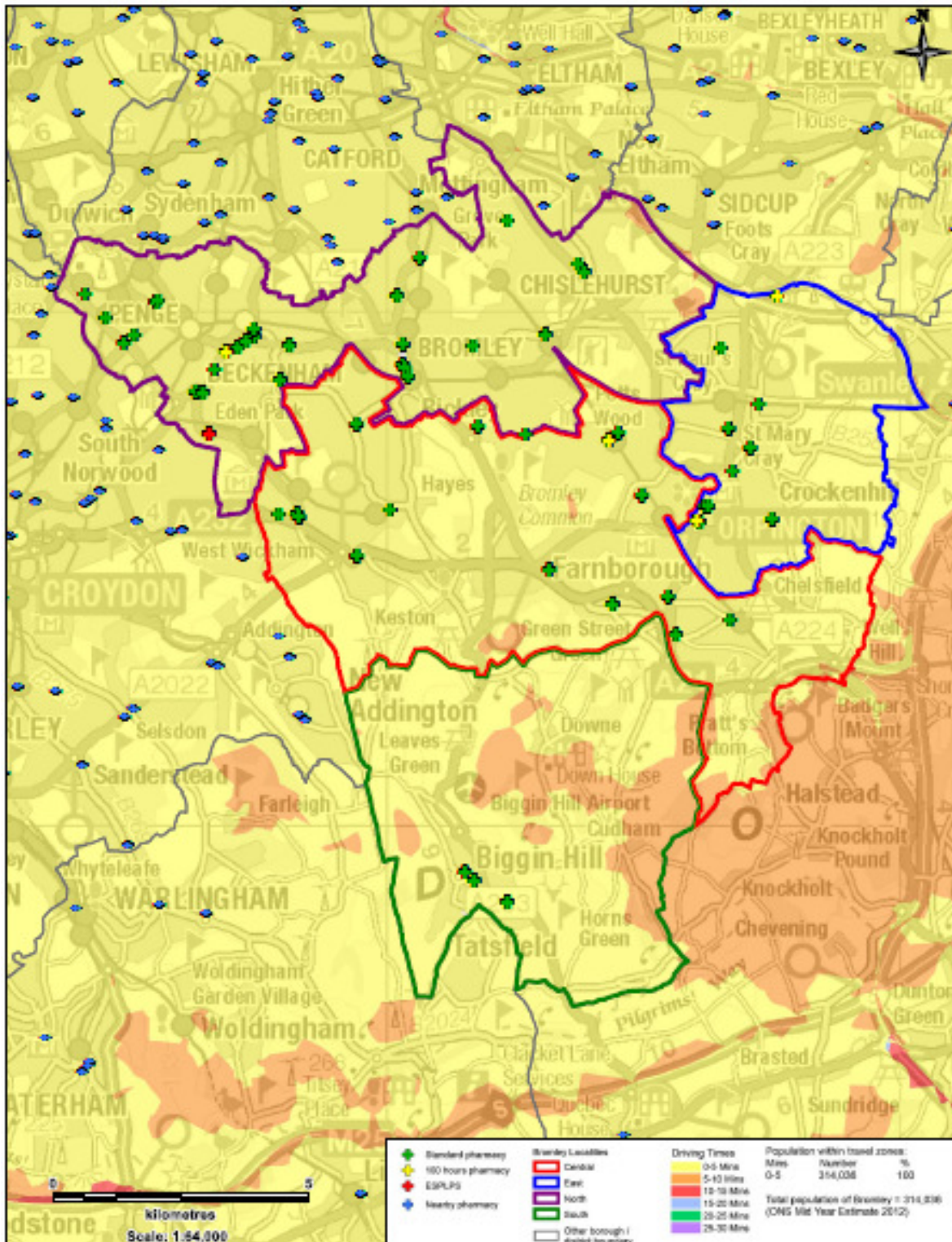
London Borough of Bromley: Average drive times to nearest pharmacy

South West Commissioning Support **NHS**

085\_Team@swcsu.nhs.uk - September 2014  
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Created using PharmacyMap, a tool developed by  
 the pharmacy team at South West Commissioning Support

Map 17b Off peak drive times to a pharmacy in Bromley



Pharmaceutical Needs Assessment - August 2014

London Borough of Bromley: Off peak drive times to nearest pharmacy

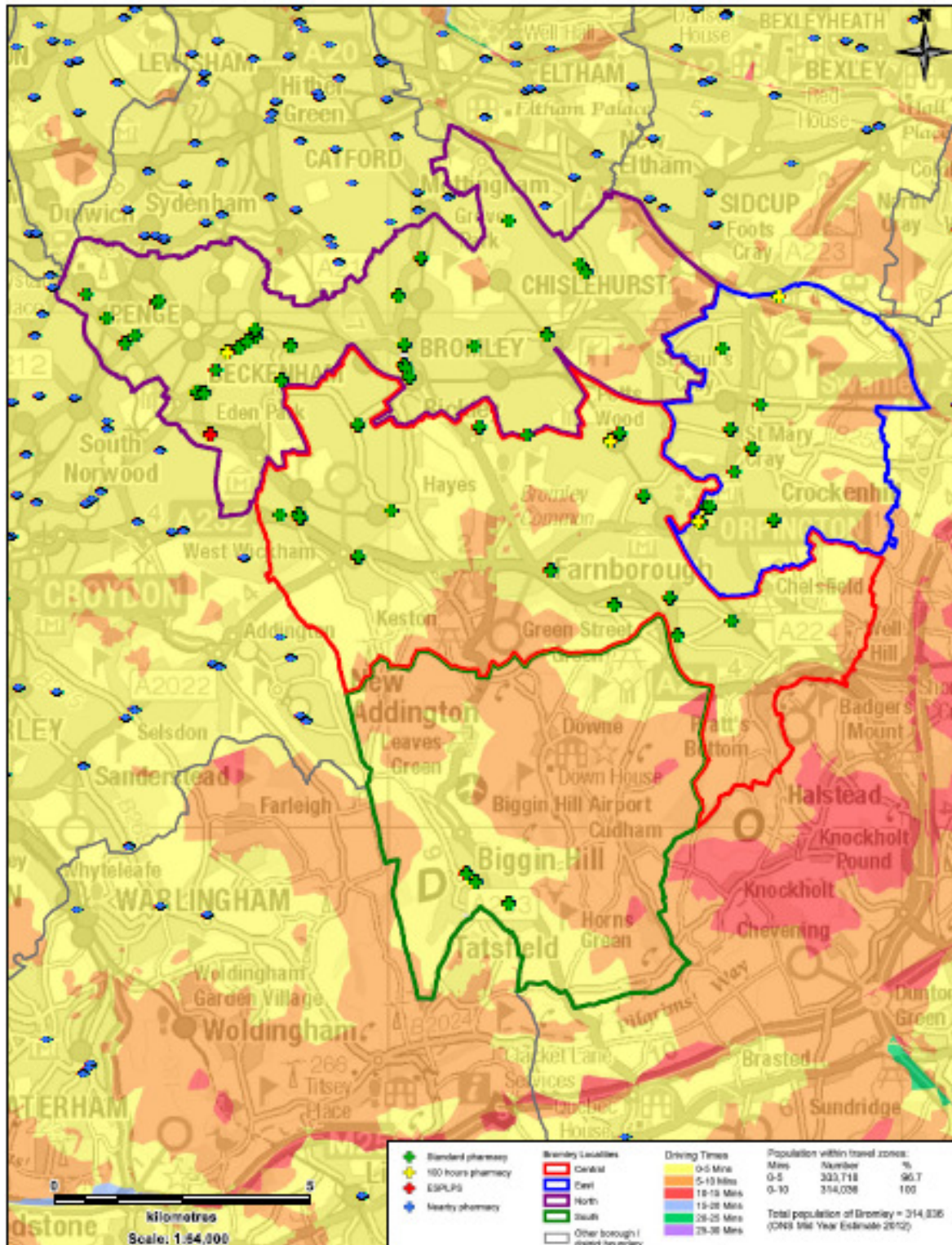
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Map 17c Peak drive time to a pharmacy in Bromley



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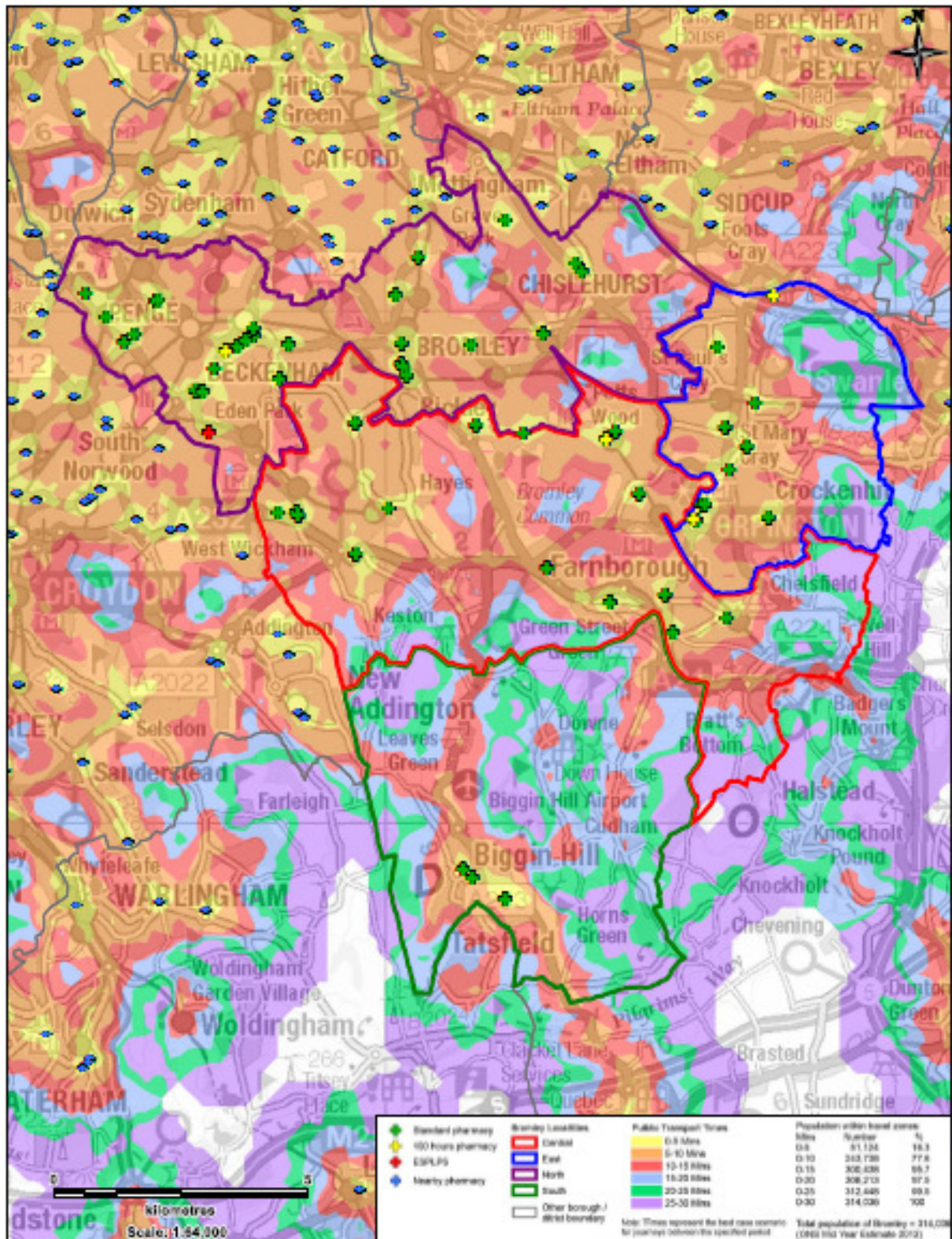
London Borough of Bromley: Peak drive times to nearest pharmacy

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London Borough of Bromley: Peak drive times to nearest pharmacy

Map 18a Public transport travel times to a pharmacy in Bromley, Tuesday 9-1 pm

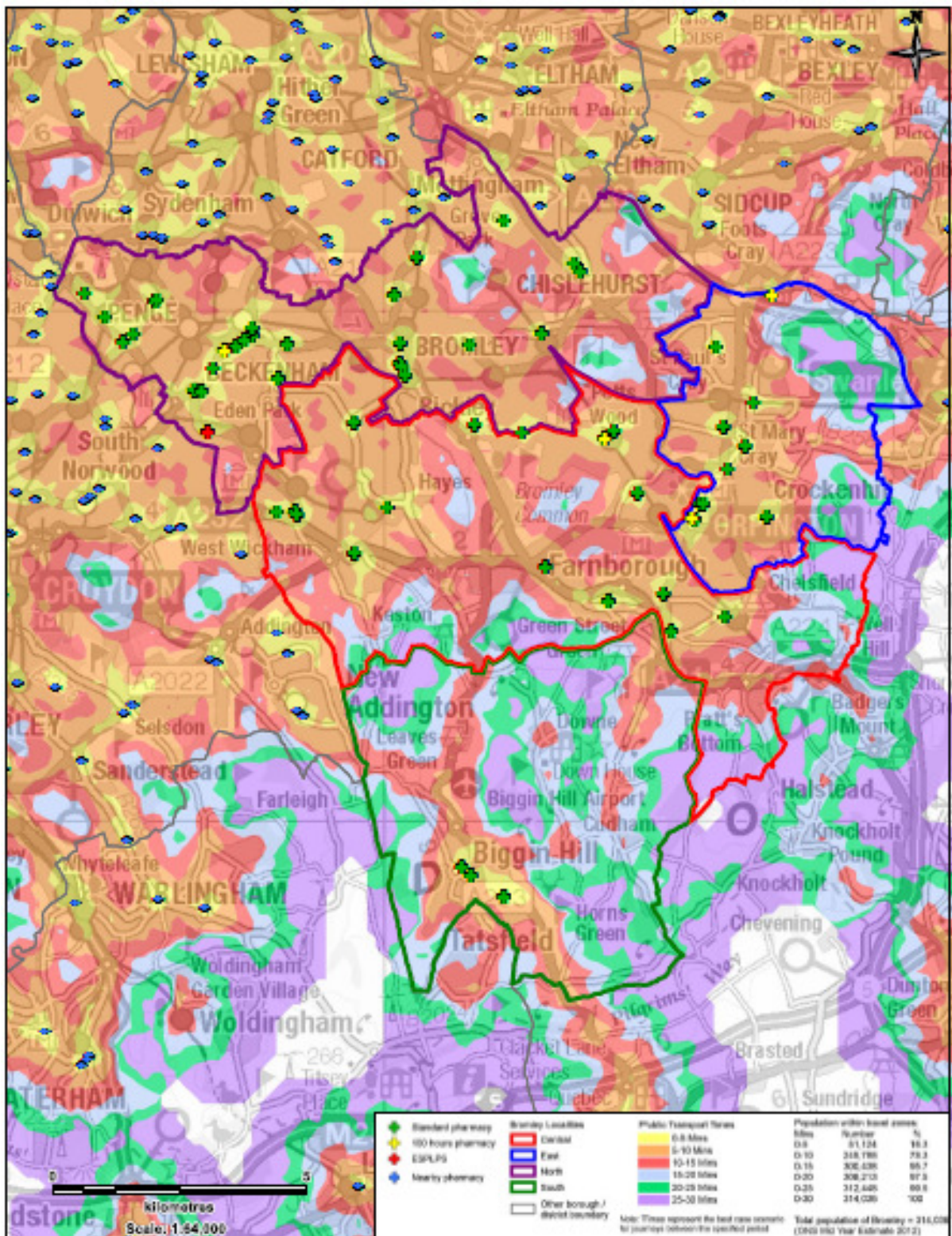


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London Borough of Bromley: Public Transport times to nearest pharmacy Tuesday, 9am to 1pm

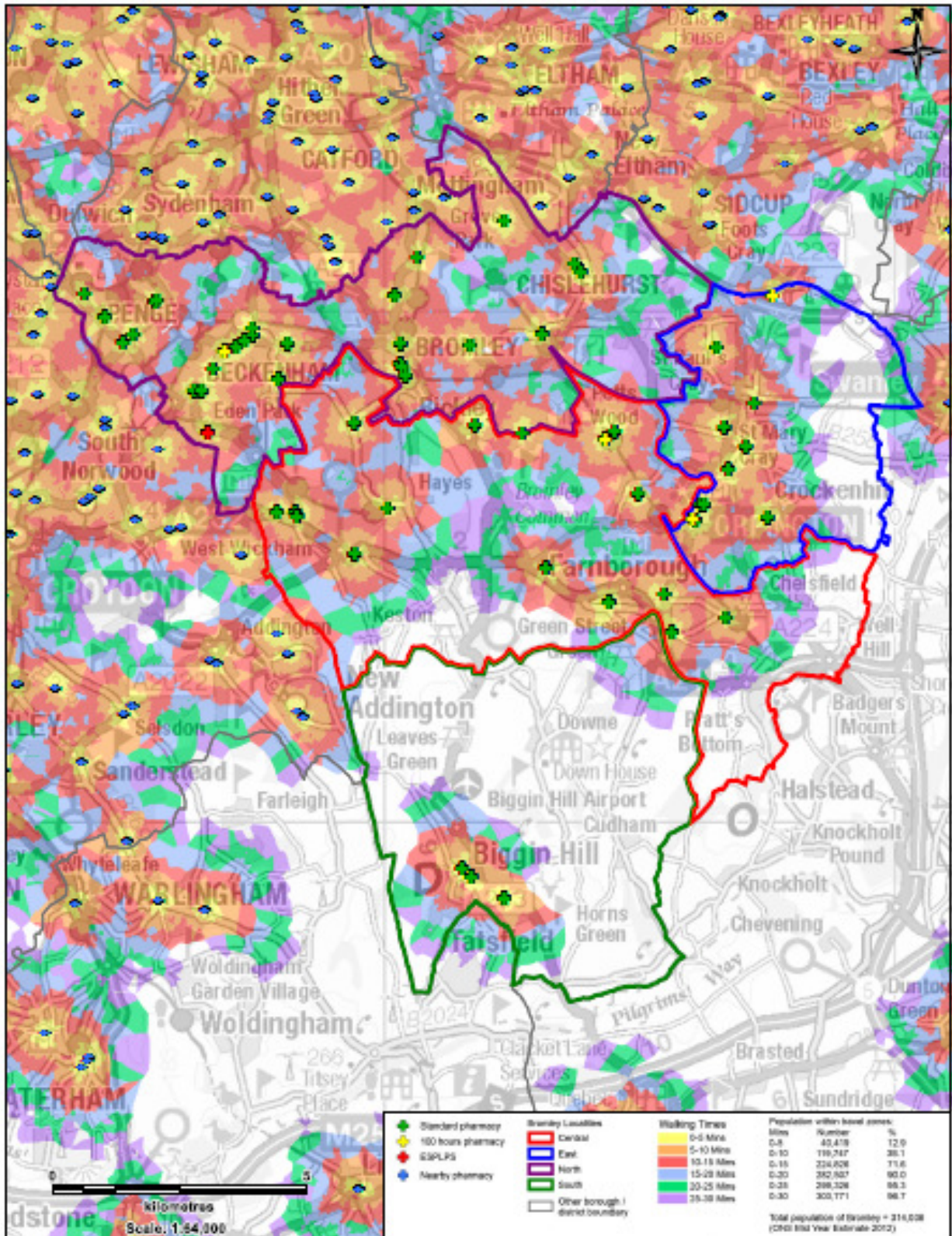
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Map 18b Public transport travel times to a pharmacy in Bromley, Tuesday 1-5pm



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<p>London Borough of Bromley: Public Transport times to nearest pharmacy Tuesday, 1pm to 5pm</p>	

Map 19 Walking Distance to a pharmacy in Bromley

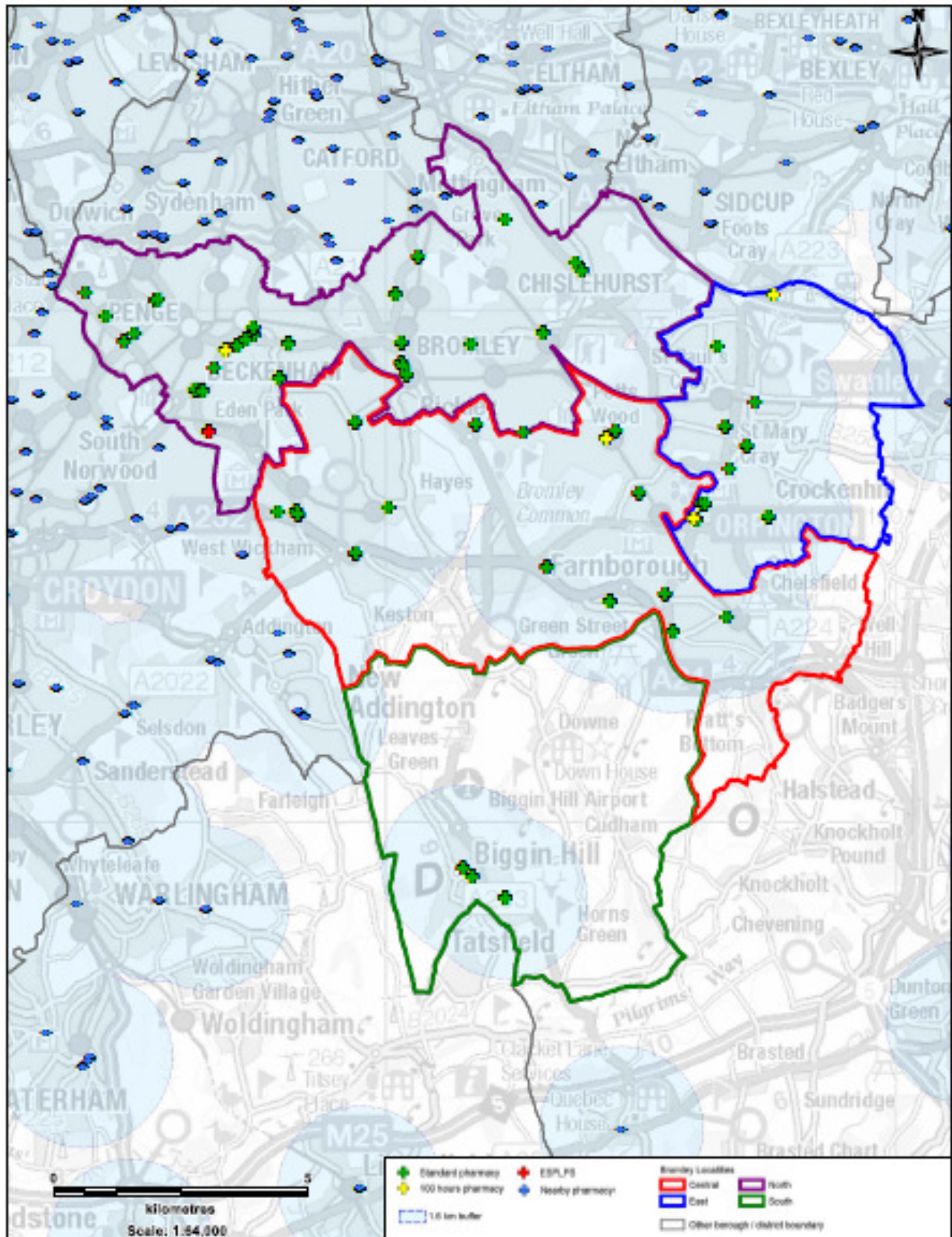


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London Borough of Bromley: Walking times to nearest pharmacy

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Map 20: 1.6km buffers around Bromley pharmacies



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London Borough of Bromley: 1.6km buffers around pharmacies

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## Appendix D: Glossary of terms

A&E	Accident and Emergency
AUR	Appliance Use Review
BAME	Black, Asian and Minority Ethnic
CCGs	Clinical Commissioning Groups
COPD	Chronic Obstructive Pulmonary Disease
CPD	Continuing professional development
CVD	Cardiovascular Disease
DACs	Dispensing Appliance Contractors
EHC	Emergency hormonal contraception
EPS	Electronic prescription services
GP	General practitioner
GUM	Genito-urinary medicine
HIV	Human Immunodeficiency Virus
HPA	Health Protection Agency
HWB	Health & Wellbeing Board
IBA	Identification and Brief Advice
IMD	Index of multiple deprivation
JSNA	Joint Strategic Needs Assessment
LAs	Local Authorities
LMC	Local Medical Committee
LPC	Local Pharmaceutical Committee
MURs	Medicines Use Reviews
NHS	National Health Service
NHSE	NHS England
NICE	National Institute for Care Excellence
NMS	New Medicine Service
NRT	Nicotine replacement Therapy
ONS	Office of National Statistics
PCT	Primary Care Trust
PGD	Patient Group Direction
PHE	Public Health England
PMR	Patient Medication Record
PNA	Pharmaceutical Needs Assessment
PSNC	Pharmaceutical Services Negotiating Committee
RPS	Royal Pharmaceutical Society
SAC	Stoma Appliance Customisation
STIs	Sexually transmitted infections
UPI	Unprotected Sexual Intercourse

## **Appendix E - Summary for the purpose of complying with NHS Regulations 2013, Schedule 1**

### **Current provision – necessary and other relevant services**

As described in particular in section 5 and required by paragraphs 1 and 3 of schedule 1 to the Regulations, Bromley HWB has had regard to the pharmaceutical services referred to in this PNA in seeking to identify those that are necessary, have secured improvements or better access, or have contributed towards meeting the need for pharmaceutical services in the area of the HWB.

**Bromley HWB has determined that while not all provision was necessary to meet the need for pharmaceutical services, the majority of the current provision was likely to be necessary as described in Table 5 with the remainder identified as providing improvement or better access without the need to differentiate in any further detail.**

### **Necessary services – gaps in provision**

As described in particular in section 5 (Essential services) and required by paragraph 2 of schedule 1 to the Regulations, Bromley HWB has had regard to the following in seeking to identify whether there are any gaps in necessary services in the area of the HWB.

### **Access to essential services**

In order to assess the provision of essential services against the needs of our population we consider access (travelling times and opening hours) as the most important factor in determining the extent to which the current provision of essential services meets the needs of the population.

### **Access to essential services during normal working hours**

Bromley HWB has determined that the travel times as identified in section 5 (Conclusion for Essential services) to access essential services are reasonable in all the circumstances.

**Based on the information available at the time of developing this PNA no current gaps in the need for provision of essential services during normal working hours have been identified.**

### **Access to essential services outside normal working hours**

In Bromley there is good access to essential services outside normal working hours due to the 100 hour pharmacies and the supplementary opening hours offered by the other pharmacies. It is not expected that any of the current pharmacies will reduce the number of core opening hours, indeed 100 hour pharmacies are unable to, and NHS England foresees no reason to agree a reduction of core opening hours for any service provider except on an ad hoc basis to cover extenuating circumstances.

**Based on the information available at the time of developing this PNA no current gaps in the provision of essential services outside normal working hours have been identified.**

### **Access to advanced and enhanced services**

Insofar as only NHS England may commission these services, and as shown in Table 5, MURs and Supervised Consumption are considered necessary and access has been considered throughout the borough.

**Based on the information available at the time of developing this PNA no current gaps in the provision of necessary advanced and enhanced services have been identified.**

### **Future provision of necessary services**

Bromley HWB has not identified any pharmaceutical services that are not currently provided but that will, in specified future circumstances, need to be provided in order to meet a need for pharmaceutical services.

**Based on the information available at the time of developing this PNA no gaps in the need for pharmaceutical services in specified future circumstances have been identified.**

### **Improvements and better access – gaps in provision [paragraph 4]**

As described in particular in section 5 and required by paragraph 4 of schedule 1 to the 2013 Regulations, Bromley HWB has had regard to the following in seeking to identify whether there are any gaps in other relevant services in the area of the HWB.



### **Access to essential services – present and future circumstances**

Bromley HWB considered the conclusion in respect of current provision as set out above and the information in respect of essential services. While it had not been possible to determine which current provision of essential service by location or standard hours provided improvement or better access, the HWB was satisfied that some current provision may do so. Bromley HWB has not identified services that would, if provided either now or in future specified circumstances, secure improvements to or better access to essential services.

**Based on the information available at the time of developing this PNA no gaps have been identified in essential services that if provided either now or in the future would secure improvements, or better access, to essential services.**

### **Current and future access to advanced services**

Not all pharmacies are currently offering MURs or NMS, however these services are not commissioned by NHS England but provided by the pharmacy should it choose to do so.

**Based on the information available at the time of developing this PNA no gaps have been identified in the need for advanced services that if provided either now or in the future would secure improvements, or better access, to advanced services.**

### **Current and future access to enhanced services**

NHS England commissioned just one enhanced service (flu vaccination) from pharmacies in 2014/15 and the future of this service is unknown at the time of writing this PNA. It may also commission this service from other non-pharmacy providers, principally GP practices.

Many of the enhanced services listed in the 2013 directions are now commissioned by Bromley local authority (public health services) or Bromley CCG and so fall outside of the definition of both enhanced services and pharmaceutical services.

**Based on the information available at the time of developing this PNA no gaps in respect of securing improvements, or better access, to enhanced services either now or in specified future circumstances have been identified.**

## **Other NHS Services**

As required by paragraph 5 of schedule 1 to the 2013 Regulations, Bromley HWB has had regard in particular to section 5 (Essential services, dispensing data and provision from other providers) in considering any other NHS Services that may affect the determination in respect of pharmaceutical services in the area of the HWB.

## **How the assessment was carried out**

As required by paragraph 6 of schedule 1 to the 2013 Regulations:

In respect of how the HWB considered whether to determine localities in its area for the purpose of this PNA, see section 2 (Rationale for selection of PNA localities).

In respect of how the HWB took into account the different needs in its area, including those who share a protected characteristic, see sections on Bromley localities and Table 6

In respect of the consultation undertaken by the HWB, see section 2 (Development of the PNA Stage 4).

## **Map of provision**

As required by paragraph 7 of schedule 1 to the 2013 Regulations, the HWB has published a map of premises providing pharmaceutical services at Map 4. In addition, this PNA also includes additional mapping to that required by regulation.

## Appendix F - EQUALITY IMPACT ASSESSMENT

### Stage 1 – screening to establish if the function has any relevance to any equality issue and/or monitored group i.e.

- Could the function affect one or more equality group in a different way to another group?
- Establish whether different equality groups have different needs
- Establish whether the function contributes to or hinders equality of opportunity

1a	<p>Please give a brief description of the function and its purpose*</p> <p>Pharmaceutical Needs Assessment (PNA) for Bromley. The Health and Social Care Act 2012 transferred responsibility for the development and updating of PNAs to Health and Wellbeing Boards (HWBs).</p> <p>A PNA will use the Joint Strategic Needs Assessment (JSNA) and other Board approved documents to identify the local health priorities. It should look at current demographics and future trends and developments which may impact on the health of the local population. The PNA will look at issues that may affect it across the 3 years it could be valid for.</p> <p>The PNA will also identify where pharmaceutical services are currently used to address these priorities and where changes may be required to fill any current identified gaps or to address possible future health needs.</p> <p>The PNA should be a tool which is used to inform commissioners of the current provision of pharmaceutical services and where there are any gaps, in relation to the local health priorities, which could be addressed by improving services or access to services in the area. The commissioners who would find it most useful are Clinical Commissioning Groups (CCGs), Local Authority Public Health and NHS England.</p> <p>The PNA is of particular importance to NHS England who since 1 April 2013 has been identified in the Health and Social Care Act 2012 as responsible for maintaining pharmaceutical lists. The PNA is a key document in making decisions with regards to applications made under the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. A public survey has been carried out whose findings are being analysed and should reveal usage of pharmaceutical services and potential blocks for groups.</p> <p>*Function can mean process, service, policy or project</p>				
1b	<p>How would you classify the function type?</p> <p><input type="checkbox"/> The service is provided on the basis of an application and /or targeted then go to question 1c</p> <p><input checked="" type="checkbox"/> The service is open to all go to question 1d</p>				
1c	<p>Is the function accessible for all groups? Either tick the box 'Accessible to all groups' and provide <u>relevant evidence</u> OR tick the box for each group to whom the function is <u>not accessible</u> or for whom there may be needs or considerations to accommodate.</p> <table border="1" data-bbox="167 1892 1388 2038"> <tr> <td data-bbox="167 1892 805 2004"><input checked="" type="checkbox"/> *Accessible for all groups</td> <td data-bbox="805 1892 1388 2004"><input type="checkbox"/> Pregnancy &amp; maternity</td> </tr> <tr> <td data-bbox="167 2004 805 2038"><input type="checkbox"/> Age</td> <td data-bbox="805 2004 1388 2038"><input type="checkbox"/> Race</td> </tr> </table>	<input checked="" type="checkbox"/> *Accessible for all groups	<input type="checkbox"/> Pregnancy & maternity	<input type="checkbox"/> Age	<input type="checkbox"/> Race
<input checked="" type="checkbox"/> *Accessible for all groups	<input type="checkbox"/> Pregnancy & maternity				
<input type="checkbox"/> Age	<input type="checkbox"/> Race				

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	<input type="checkbox"/> Disability <input type="checkbox"/> Gender <input type="checkbox"/> Marriage & civil partnership	<input type="checkbox"/> Religion & belief <input type="checkbox"/> Transgender or Transsexual
1d	Is it likely that there will be a negative impact on one or more of the equality groups, or is it clear at this stage that it will be equality neutral? (No negative impact on the groups) Please tick in the box equality neutral OR tick the box for the group(s) that will suffer a negative impact. If you have ticked the box 'equality neutral' please provide evidence.	
	<input checked="" type="checkbox"/> Equality neutral <input type="checkbox"/> Age <input type="checkbox"/> Disability <input type="checkbox"/> Gender <input type="checkbox"/> Marriage & civil partnership	<input type="checkbox"/> Pregnancy & maternity <input type="checkbox"/> Race <input type="checkbox"/> Religion & belief <input type="checkbox"/> Transgender or Transsexual
	If you consider that the impact is Equality Neutral then go to question 1h Otherwise go to question 1e	
1e	What are the negative impacts associated with this function? Please list and give details then go to question 1f  N/A	
1f	Are there positive impacts associated with this function? If yes, please list and give details.	
Age	<p>Age has an influence on which medicine and method of delivery is prescribed. Older people have a higher prevalence of illness and take many medicines. The medicines management of older people is complicated by multiple disease, complex medication regimes and the aging process affecting the body's capacity to metabolise and eliminate medicines from it.</p> <p>The PNA is directing resources at various age groups where improvement in health is required eg pre-school age children and aiming to achieve a more healthy population for the over 65 year age group. The public survey was open to all age groups. Response rates by age were as follows:</p> <p>16 to 25 years – 2.41%          26 to 35 years – 8.13%          36 to 45 years – 11.14%</p>	

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	<p>46 to 55 years – 23.19%                      56 to 65 years – 30.42%                      Over 66 years – 24.70%</p> <p>Community pharmacies can support people to live independently by supporting optimisation of use of medicines, support with ordering, re-ordering medicines, home delivery to the housebound and appropriate provision of multi-compartment compliance aids and other interventions such as reminder charts to help people to take their medicines.</p> <p>Supporting independence by offering:</p> <ul style="list-style-type: none"> <li>• Re-ablement services following discharge from hospital</li> <li>• Falls assessments</li> <li>• Supply of daily living aids</li> <li>• Identifying emerging problems with peoples health</li> <li>• Signposting to additional support and resources</li> </ul> <p>Younger people, similarly, have different abilities to metabolise and eliminate medicines from their bodies.</p> <p>Advice can be given to parents on the optimal way to use the medicine or appliance and provide explanations on the variety of ways available to deliver medicines.</p> <p>Pharmacy staff provide broader advice when appropriate to the patient or carer on the medicine, for example, its possible side effects and significant interactions with other substances.</p> <p>The safe use of medicines for children and older people is one where pharmacies play an essential role.</p>
Disability	<p>Issues around access to pharmacy services and types of services provided were asked in the public survey. 15% of respondents described themselves as disabled with just under 2% describing themselves as housebound. Issues raised are discussed within the document and outcomes relating to these can be identified and discussed by the HWBB. The survey will be published alongside the PNA.</p> <p>When patients are managing their own medication but need some support, pharmacists and dispensing doctors must comply with the Equality Act 2010. Where the patient is assessed as having a long term physical or mental impairment that affects their ability to carry out every day activities, such as managing their medication, the pharmacy contract includes funding for reasonable adjustments to the packaging or instructions that will support them in self-care. The first step should be a review to ensure that the number of medications and doses are reduced to a minimum. If further support is needed, then compliance aids might include multi- compartment compliance aids, large print labels, easy to open containers, medication reminder alarms/charts, eye dropper or inhaler aids.</p> <p>Each pharmacy should have a robust system for assessment and auxiliary aid supply that adheres to clinical governance principles.</p>
Gender	

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	<p>Responses to the survey were split as 24.77% male and 73.11% female, with 1.51% transgender and 0.6% non-committal. Some of the services discussed are solely directed to addressing female conception issues which may be reflected in the response ratio across the genders. Also, more women are visiting the pharmacy possibly due to caring responsibilities for older and younger relatives. It is well documented that men are often more unlikely to access healthcare services. Community pharmacies are ideally placed for self-care by providing advice and support for people to derive maximum benefit from caring for themselves or their families.</p> <p>When necessary, access to advice, provision of over the counter medications and signposting to other services is available as a walk in service without the need for an appointment.</p> <p>Community pharmacy is a socially inclusive healthcare service providing a convenient and less formal environment for those who do not choose to access other kinds of health service.</p>
Race	<p>Black and minority ethnic (BME) groups generally have worse health than the overall population, although some BME groups fare much worse than others, and patterns vary from one health condition to the next. Evidence suggests that the poorer socio-economic position of BME groups is the main factor driving ethnic health inequalities. Language can be a barrier to delivering effective advice on medicines, health promotion and public health interventions.</p> <p>There are opportunities to access translation services that should be used when considered necessary. The patient survey shows that 95% of the Bromley population - even those living in the most deprived areas - can get to a pharmacy within 15 minutes by car. Community pharmacy is consequently a socially inclusive healthcare service providing a convenient and less formal environment for those who cannot easily access or do not choose to access other kinds of health service.</p>
Religion	Pharmacies can provide advice to specific religious groups on medicines derived from animal sources and during periods of fasting.
Pregnancy and maternity	Pharmacies can provide advice to pregnant mothers on medicines and self-care. They have the expertise on advising which medicines are safe for use in pregnancy and during breast feeding.
Sexual orientation	No specific needs are identified.
Gender reassignment	Provision of necessary medicines and advice on adherence and side effects.
Marriage and civil partnership	No specific needs are identified.
1g	<p>At this stage, what plans could be built in to address any negative impacts, and/or to add measures which promote a positive impact, or could you consider an alternative approach which may better achieve the promotion of equality?</p> <p>N/A</p>

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1h	<p>The Council has a responsibility to promote positive attitudes to equal opportunities in public life. Has this responsibility been discharged in the application of this function? If yes give examples.</p> <p>The services which may be commissioned as a result of the PNA analysis by the health and Wellbeing Board will generally be targeted to meet the needs of individual patients from feedback received. The overall effect would be improved access to services which will impact disadvantaged groups in a positive manner overall.</p>
1i	<p>Are there any Human Rights Issues? If so what are they?</p> <p>N/A</p>
1j	<p>Is a full impact assessment required?</p> <p><input type="checkbox"/> YES – If you have established that there may not be equality of opportunity in 1c or assessed that there would be negative impact on an equality group in 1 d go to Stage 2</p> <p><input checked="" type="checkbox"/> NO - please sign off the process (stage 3) and fill in any actions identified, if any in the action plan.</p> <p><input type="checkbox"/> Don't know. i.e. not enough evidence. Please go to stage 2.</p>

**Stage 2 – full impact assessment**

2a	Does the function affect or impact on the public, whether directly or indirectly?		
	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> Don't know
	Provide any relevant information here.		
2b	Have complaints or feedback been received about the function and its effect on different equality groups?		
	<input type="checkbox"/> yes	<input type="checkbox"/> no	<input type="checkbox"/> Don't know
	Provide evidence by documenting all reliable up to date information.		

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2c	Outsourced services - if the function is provided by external organisations/agencies on behalf of the Council please detail any arrangements you have to ensure that the function promotes equality; this may include contract conditions.
	Provide evidence by documenting all reliable up to date information.
2d	Does the function have employment implications for Council staff
	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Don't know
	Provide evidence by documenting all reliable up to date information.
2e	If you have established that the function does have an adverse impact on one or more of the groups, then you must identify whether this is justifiable. If not, then the function must be changed. Please set out the adverse impact and the business justification for continuing with this situation.
2f	Monitoring – give details of any monitoring being carried out on existing functions.
2f (i)	If this is a new function, or not currently monitored, are you planning to monitor the impact of the function
	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Don't know
	If yes <b>add details to action plan</b>



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	If no please explain why it is not considered appropriate to do so.
2g	<p>Consultation – If you have not carried out consultation, or if you need to carry out further consultation who will you be consulting with and by what methods?</p> <p><b>Add details to action plan</b></p>
2h	<p>Evidence – what further evidence do you have about considerations with regard to equality issues that you have made concerning this function? e.g. audit reports, minutes from meetings or survey results</p>
2i	<p>Publishing – if the equality impact assessment forms part of an overall review then the results should be published as part of any report that goes forward to Elected Members. If not the findings of the impact assessment should be published on our Council’s web site.</p> <p><b>Add details to action plan</b></p>
2j	<p>Training and development - please list any staff training issues that have arisen as a result of conducting the impact assessment</p> <p><b>Add details to action plan</b></p>

**Appendix G – Consultation response report**

To be completed after consultation period.