

Sandwell Pharmaceutical Needs Assessment 2022

Made in accordance with the National Health Service (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013

Produced by:

Public Health Sandwell MBC

Approved by:

Sandwell Health and Wellbeing Board

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Chapter		
	Executive Summary	6
	Regulatory Statements	12
1	Introduction to the Pharmaceutical Needs Assessment	16
	What is a Pharmaceutical Needs Assessment?	16
	Objectives	16
	Mitigating the impacts of coronavirus (COVID-19)	17
	What is Excluded from the Scope of the Assessment?	17
	Process Followed in the Development of the PNA	18
	PNA Review Process	19
	Steering Group	19
2	Public Health Needs and Demography	20
	Identification of Local Health Needs	20
	Sandwell Borough Geography	22
	Sandwell Demographics	24
	<i>Age Profile</i>	24
	<i>Population Projections</i>	27
	<i>Housing growth</i>	29
	<i>Ethnicity</i>	29
	<i>Life Expectancy</i>	31
	<i>Deprivation in localities</i>	32
	Local Health Needs and Priorities	34
	<i>Smoking</i>	34
	<i>Alcohol</i>	35
	<i>Physical Activity</i>	36
	<i>Obesity</i>	37
	<i>Teenage Conceptions</i>	39
	<i>Disease Prevalence</i>	40
3	Community Pharmacy Provision in Sandwell	43
	Location of Pharmacies	43
	Pharmacy Access Scheme	46
	Identification of Pharmaceutical Service Provision	47

	Access to Community Pharmacy and Services	47
	Opening hours	47
	Walking and Public Transport Distance to Pharmacies	49
4	Pharmaceutical Services	52
	Definition of Pharmaceutical Services	52
	Essential Services	52
	Pharmacy contractor questionnaire responses	54
	Pharmacy accessibility and facilities	54
	Advanced Services	55
	<i>Appliance Under Review</i>	58
	<i>Community Pharmacist Consultation Service</i>	59
	<i>COVID-19 LFD Distribution</i>	61
	<i>Flu Vaccination Service</i>	63
	<i>Hepatitis C Testing Service</i>	65
	<i>Hypertension Case Finding Service</i>	67
	<i>New Medicines Service (NMS)</i>	69
	<i>Pandemic Delivery Service</i>	71
	<i>Stoma Appliance Customisation service</i>	73
	<i>Smoking Cessation Service</i>	75
	Enhanced Services	78
	Other enhance services (provided under contract with NHSE&I)	78
	Locally Commissioned Service	79
	Pharmacy Quality Scheme	79
	Healthy Living Pharmacy	82
	Impacts of COVID-19	83
5	Public Experiences of Sandwell Pharmacies	86
	The Process	86
	Enhancing inclusivity	86
	The results	87
	Impacts of COVID-19 on access to pharmacy services	88
6	Future Pharmaceutical Service Development	90
	The Future	90
	Conclusion	96

7	Consultation	100
8	References	101

Executive Summary

The pharmaceutical needs assessment (PNA) is a report that assesses the pharmaceutical needs of the local population as well as the location and provision of pharmaceutical services. The report identifies whether there are any unmet pharmaceutical needs or gaps in service provision and produces recommendations to strengthen service provision. The report is primarily used by NHS England (NHSE) to facilitate decision-making regarding applications for new pharmacies however it is also used to:

- Understand the current and future pharmaceutical needs for the population of Sandwell
- Understand the current provision of pharmaceutical services
- Identify and address gaps in pharmaceutical services
- Understand the impacts of coronavirus (COVID-19) on the provision and accessibility of pharmaceutical services
- Inform commissioning decisions for pharmaceutical services by local authorities, NHS England and NHS Improvement (NHSE&I), and clinical commissioning groups (CCGs).

The PNA is a statutory document that must be updated once every three years. The last PNA was published in June 2018 and due to the additional demands on pharmacies nationwide in response to the COVID-19 pandemic the next PNA is due to be published by October 2022. Local health and wellbeing boards (HWBBs) are responsible for the PNA.

This report includes a summary of the demographics of the Sandwell population and local health needs, geographic accessibility of local pharmacies, an overview of pharmaceutical service provision by locality, views from Sandwell residents on the provision of pharmaceutical services and views from pharmacy contractors and Sandwell residents on the impacts of COVID-19 on accessibility and provision of pharmaceutical services.

Currently there are 82 pharmacies in Sandwell serving a population of 329,042 residents, of which three are distance selling pharmacies and ten are 100-hour

pharmacies. This equates to one pharmacy per 4013 residents which is greater than the England average of one pharmacy per 5086 residents. The population of Sandwell is predicted to increase by 12.7% from 2018 to 2043 which is higher than the England average. With the current pharmaceutical provision, this projected population increase would equate to one pharmacy per 4435 residents. It is anticipated that the current distribution of pharmacies will be able to meet the demands from an increasing population. Most residents live within a 15-minute walking distance of a pharmacy and all residents live within a 20-minute travel via public transport to a local pharmacy. There are numerous pharmacies within each locality with extended opening hours covering weekday early mornings and evenings, Saturdays and Sundays. No geographic gaps in service provision have been identified in this PNA.

Three different levels of pharmaceutical services are provided by pharmacies:

- **Essential services and clinical governance:** provided by all pharmacy contractors and are commissioned by NHSE
- **Advanced services:** which can be provided by all contractors once accreditation requirements have been met and are commissioned by NHSE
- **Locally commissioned (enhanced) services:** commissioned by Local Authorities, CCGs and NHSE in response to the needs of the local population

There are ten advanced services commissioned by a range of pharmacies in Sandwell. The information below is based on the 73 pharmacies that responded to the pharmacy contractor questionnaire.

- There is excellent provision of the community pharmacist consultation service (CSPS), COVID-19 lateral flow device (LFD) test distribution service, flu vaccination service and new medicines service (NMS) across all localities
- Provision of the Hepatitis C point of care testing is low however this service is due to be recommissioned at the end of March 2022
- The pandemic delivery service is
- to be decommissioned at the end of March 2022, before the publication of this PNA

- The appliance under review (AUR) service is currently offered in all localities except Rowley Regis, however two pharmacies in Rowley Regis intend to provide this service within the next 12 months
- At least one pharmacy in each locality offers the stoma appliance customisation (SAC) service
- The hypertension case finding service is available in each locality. Less than half of pharmacies across the borough currently offer the hypertension case finding service however an additional 38.0% intend to provide this service in the next 12 months
- At present 14.3% of pharmacies provide a stop smoking service with an additional 42.9% intending to provide this by the end of 2022. A goal of the NHS Long Term Plan is to offer all smokers admitted to hospital an NHS-funded tobacco treatment service by 2023/24 with the continuity of these smoking cessation programmes on discharge. There is likely to be an increased demand for smoking cessation support placed on pharmacies however it is anticipated that the current and intended provision of smoking cessation services will be capable of meeting this increase in demand

Sandwell is the 8th most deprived local authority in England. Sandwell residents experience poorer health than people living in other areas of England. The male and female life expectancy is lower in Sandwell than the England average, and the prevalence of risk factors such as smoking, alcohol-related mortality, obesity, and physical inactivity are higher in Sandwell than regional and national averages. Addressing these risk factors will be fundamental for closing the gap in life expectancy. This PNA has found that the provision of enhanced services such as diabetes screening, blood pressure and cholesterol checks, diabetes management and smoking cessation service is low across the borough, however willingness to provide these services if commissioned is high. Pharmacies have a key front-line role in supporting patients with chronic illness and providing healthy lifestyle advice. The role of pharmacies in the management of CVD risk factors could be strengthened through the commissioning of related services and by promoting the wider role of pharmacists to residents.

Sandwell has a larger proportion of under 16-year olds compared with the England average and also has a higher rate of teenage conceptions compared with the national average. Few responses were received from the public survey from adults aged <25 years and therefore the views of this demographic on accessibility of pharmacy services cannot be commented on. Only 25 pharmacies responded stating they are commissioned to provide emergency contraception for free without prescription to under 18-year olds, and none of these were in Tipton. Whilst emergency contraception can either be purchased from other pharmacies or obtained for free with a prescription for those under 18 years old, the lack of free emergency contraception without prescription for under 18-year olds in all localities highlights a gap in the provision of this service. Ensuring young people are aware of where they can access emergency hormonal contraception for free without prescription and appropriate sign posting of those requesting emergency contraception to their GP to access non-emergency contraception is vital for supporting young women. Future PNA's should consider different channels for engaging with young people to gain their opinions about pharmacy services.

Pharmacy contractors and Sandwell residents were asked about the impacts of COVID-19 on accessibility and provision of pharmaceuticals services. Many pharmacy contractors have responded to the pandemic by offering additional services and by moving some face-to-face services to online or over the phone. Pharmacies reported that patients are relying on pharmacies more than before the pandemic and this is reflected in the reported increased waiting times for dispensing and other services. The need for workforce capacity building should be considered to ensure pharmacies can continue to meet the additional demands placed upon them.

Overall, the results from the residents' survey indicate that most respondents did not feel COVID-19 had negatively impacted accessibility to pharmacies or provision of pharmaceutical services. One in ten respondents reporting using pharmaceutical services during the pandemic that they hadn't previously used. This may represent the ongoing and future role of pharmacies in alleviating the pressures in primary care. A small proportion of respondents reported services they use have been stopped since the pandemic which is in keeping with the pharmacy contractor responses. It is essential that pharmacies that have stopped services are able to sign post patients to another service provider.

Resident responses regarding general pharmacy accessibility and service provision show that whilst most felt they could find an open pharmacy at a location that suits them, the responses suggest a possible demand for more weekend opening hours. Pharmacies provide a whole host of services to support patients, many of which respondents were not aware of suggesting a need to promote the wider roles of pharmacists in supporting Sandwell residents. It is important to note that these conclusions are drawn from a small sample of Sandwell residents which are not representative of the demographics of Sandwell's population. In particular, young adults, males, and Black and Minority Ethnic (BME) communities are underrepresented in the responses. Thus, this report recommends that further targeted engagement of underrepresented groups is undertaken to ensure needs are currently being met.

This PNA concludes that there are sufficient pharmacies serving the Sandwell population with good accessibility via walking or public transport. Whilst there are pharmacies in each locality open on the weekends, the results suggest a possible demand for greater access to pharmacies at the weekends. There is good availability of advanced services across the borough. In general, the wider services offered by pharmacists such as offering lifestyle advice should be promoted to raise awareness of the wider roles of pharmacists in supporting residents' health needs. The results suggest that residents' pharmaceutical needs can be met by the existing network of community pharmacies however further targeted engagement of groups underrepresented in the residents' survey is recommended to ensure needs are being met.

This report makes the following recommendations to strengthen the provision of pharmaceutical services in Sandwell:

- Pharmacies should be knowledgeable of which advanced and enhanced services are offered by pharmacies in neighbouring wards/localities in order to sign post patients to appropriate service providers when needed
- Where a service has been stopped due to COVID-19, it is important that pharmacies can sign post residents to another service provider

- Pharmacies should support young people in accessing emergency contraception by ensuring they are aware of where they can access this service for free without a prescription. Pharmacies should support young people seeking emergency contraception by signposting them to their GP to discuss non-emergency contraceptive options
- The role of pharmacies in the management of CVD risk factors could be strengthened through the commissioning of related services and by promoting the wider role of pharmacists (e.g. providing lifestyle advice) to residents
- Pharmacy workforce capacity building should be considered in order to meet the additional demands for pharmaceutical services
- Further targeted engagement of groups underrepresented in the residents' survey is recommended to ensure needs are currently being met

Regulatory Statements

It is a legislative requirement that PNAs are developed in accordance with the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013.¹ Regulation 4 Schedule 1 of the 2013 regulations set out the minimum information to be contained in a PNA. Detailed below are the seven statements included in schedule 1.

Statement 1: current provision of necessary services

A statement of the pharmaceutical services that the health and wellbeing board (HWBB) has identified as services that are provided:

- in the area of the HWBB and which are necessary to meet the need for pharmaceutical services in its area; and
- outside the area of the HWBB but which nevertheless contribute towards meeting the need for pharmaceutical services in its area (if the HWBB has identified such services)

There is currently sufficient provision of pharmacies in Sandwell borough delivering essential pharmaceutical services. Currently there are 82 pharmacies in Sandwell serving a population of 329,042 residents, of which three are distance selling pharmacies and ten are 100-hour pharmacies. This equates to one pharmacy per 4013 residents which is greater than the England average of one pharmacy per 5086 residents.

Statement 2: gaps in provision of necessary services

A statement of the pharmaceutical services that the HWBB has identified (if it has) as services that are not provided in the area of the HWBB but which the HWBB is satisfied:

- need to be provided (whether or not they are located in the area of the HWBB) in order to meet a current need for pharmaceutical services, or pharmaceutical services of a specified type, in its area;
- will in specified future circumstances, need to be provided (whether or not they are located in the area of the HWBB) in order to meet a future need for

pharmaceutical services, or pharmaceutical services of a specified type, in its area

No gaps in the provision of essential pharmaceutical services across the borough were identified in this PNA. Based on the responses to the pharmacy contractor questionnaire, the AUR is not currently offered in Rowley Regis however two pharmacies intend to offer this service by the end of 2022 which will close the gap in provision of this service. An additional 42.9% of pharmacies intend to offer a smoking cessation service by the end of this year, this will help meet the anticipated increased demand for smoking cessation support generated from hospital discharge referrals.

Statement 3: current provision of other relevant services

A statement of the pharmaceutical services that the HWBB has identified (if it has) as services that are provided:

- in the area of the HWBB and which, although they are not necessary to meet the need for pharmaceutical services in its area, nevertheless have secured improvements, or better access, to pharmaceutical services in its area;
- outside the area of the HWBB and which, although they do not contribute towards meeting the need for pharmaceutical services in its area, nevertheless have secured improvements, or better access, to pharmaceutical services in its area;
- in or outside the area of the HWBB and, whilst not being services of the types described above, they nevertheless affect the assessment by the HWBB of the need for pharmaceutical services in its area

A plethora of enhanced services are provided across the borough however access to these services is low given that for some services e.g. the anticoagulant monitoring service only a couple of pharmacies are currently providing the service. However, this is because some local services are not commissioned as enhanced services by NHSE. Many pharmacies demonstrated willingness to provide these services if they were commissioned. It should also be noted that some services are provided by other organisations, e.g. smoking cessation is commissioned by Public

Health Sandwell and therefore pharmacy involvement is limited to signposting. Others such as healthchecks are commissioned through other agencies or through surgeries and fall outside the scope of pharmacies.

Statement 4: improvements and better access, gaps in provision

A statement of the pharmaceutical services that the HWBB has identified (if it has) as services that are not provided in the area of the HWBB but which the HWBB is satisfied:

- would, if they were provided (whether or not they were located in the area of the HWBB), secure improvements, or better access, to pharmaceutical services, or pharmaceutical services of a specified type in its area
- would, if in specified future circumstances they were provided (whether or not they were located in the area of the HWBB), secure future improvements, or better access, to pharmaceutical services, or pharmaceutical services of a specified type, in its area

Pharmacies that responded to the questionnaire contributed towards the full list of enhanced services offered to Sandwell residents. As most pharmacies are not currently commissioned to provide many of these enhanced services, the provision across the borough of some of these services is low. For extended care services that depend on third party referral, low provision is due to low volume of referrals. Other services commissioned (e.g. flu vaccination and Covid-19 vaccination) have been provided to a high level. Wider commissioning of enhanced services in future would likely lead to further health improvements for residents.

Statement 5: other NHS services

A statement of any NHS services provided or arranged by a local authority, the NHSCB, a CCG, an NHS trust or an NHS foundation trust to which the HWBB has had regard in its assessment, which affect:

- the need for pharmaceutical services, or pharmaceutical services of a specified type, in its area; or

- whether further provision of pharmaceutical services in its area would secure improvements, or better access, to pharmaceutical services, or pharmaceutical services of a specified type, in its area

As part of the PNA process, local authority commissioners, Sandwell West Birmingham CCG and local NHS England & Improvement were consulted to produce an up to date list of additional pharmaceutical services provided across the borough.

Statement 6: how the assessment was carried out

An explanation of how the assessment has been carried out, and in particular:

- how it has determined what are the localities in its area;
- how it has taken into account (where applicable)
 - the different needs of different localities in its area, and
 - the different needs of people in its area who share a protected characteristic; and
- a report on the consultation that it has undertaken.

The scope of this PNA was to assess the pharmaceutical needs and service provision within Sandwell borough and thus the geographic boundaries of Sandwell were used to determine which localities to include in the assessment. All six of Sandwell's towns were included in this PNA. Data in the PNA are presented at locality and/or ward level.

Statement 7: map of provision

A map that identifies the premises at which pharmaceutical services are provided in the area of the HWBB

A map is provided in chapter 3 which details the location of each pharmacy at a locality level and whether the pharmacy is a community pharmacy, distancing selling or 100-hour pharmacy.

Chapter 1

Introduction to Pharmaceutical Needs Assessments

What is a Pharmaceutical Needs Assessment?

The PNA is a statutory document that states the pharmaceutical needs of the local population. This includes dispensing services as well as public health and other services that pharmacies may provide. It should identify where there are gaps in service provision and help in the commissioning of pharmaceutical services in the context of local priorities. The PNA is primarily used by NHSE when making decisions on applications to open new pharmacies.

The Health and Social Care Act 2012 transferred responsibility for public health from the NHS to Local Authorities. This act also transferred responsibility for the PNA from primary care trusts to HWBBs with effect from the 1st April 2013. Sandwell Metropolitan Borough Council (MBC) is responsible for Sandwell's HWBB, which brings together influential people from across the council to make sure that services work together with the same aims, so that resources (time, money and people) are used where they can make the biggest impact.²

The previous PNA was published by Sandwell MBC in June 2018. It is a statutory requirement for the PNA to be updated every three years. However, due to the COVID-19 pandemic, an extension on the requirement to publish an updated PNA was granted until October 2022.

Objectives

The purpose of a PNA is to help Sandwell MBC, Sandwell HWBB, Sandwell and West Birmingham CCG, Sandwell Local Pharmacy Committee (LPC), pharmacy contractors, NHSE&I, and other stakeholders to:

- Understand the current and future pharmaceutical needs for the population of Sandwell
- Understand the current provision of pharmaceutical services
- Identify and address gaps in pharmaceutical services

- Understand the impacts of coronavirus (COVID-19) on the provision and accessibility of pharmaceutical services
- Inform commissioning decisions for pharmaceutical services by local authorities, NHSE&I, and CCGs.
- Inform decisions regarding the award of new NHS pharmacy contracts

Mitigating the impacts of coronavirus (COVID-19)

National, regional and local evidence on the impacts of COVID-19 shows that inequalities in physical and mental health have widened as a consequence of the pandemic. This is a result of both the direct effects of the virus, and the indirect effects through the control measures taken. While COVID-19 is not the primary focus of this PNA, it is recognised that its impacts on health and wellbeing inequalities, and on how people interact with services, are likely to influence what people need from community pharmacy services and how they access them.

To make an assessment of the impact of COVID-19 on both pharmacy contractors and service users, an additional set of questions has been added to both the public and pharmacy contractor surveys to capture the following:

- How has public access to pharmacy services has been affected?
- How has the pandemic has changed what people use pharmacy services for?
- How has the pandemic changed the way pharmacies deliver services and the types of services they deliver?

This information will help us to understand and address any new barriers to accessing services, as well as highlighting opportunities to improve the local offer.

What is excluded from the scope of the assessment?

The PNA is primarily for the assessment of accessibility and service provision at community pharmacies, and therefore pharmacists working in other areas e.g. distance selling pharmacies, GP practices, prisons, secondary and tertiary care centres and the services they provide are outside the scope of this assessment.

Process followed in the development of the PNA

This PNA was undertaken by Sandwell PNA Steering Group, in accordance with the requirements set out in regulations 3–9 of Schedule 1 of the NHS Pharmaceutical Services and Local Pharmaceutical Services Regulations 2013. The PNA process consisted of the following three key stages:

- Review of the current provision of pharmaceutical services in Sandwell (including the impacts of COVID-19)
- Assessment of the need for pharmaceutical services in the local population (including the impacts of COVID-19 on accessibility and use of services)
- A consultation period to gather feedback from the public and other stakeholders

Information was gathered from community pharmacies in Sandwell to determine the provision of pharmaceutical services via an online or postal survey.

A public survey (available online or by post, in English, Bengali, Panjabi, Polish, Urdu, and British Sign Language) was promoted and distributed between December 2021–January 2022 by the following groups:

- Patient Participation Groups via Healthwatch Sandwell
- Sandwell Council and ‘Healthy Sandwell’ Twitter and Facebook accounts
- Promotion via Sandwell Deaf Community Association
- Sandwell Council Press release statement
- Promotion in Sandwell Residents Newsletter and Weekly Staff Roundup
- Promotion and distribution supported by members of Sandwell Council including the Public Health Development Officers, Volunteer Sector Support Team, and Councillors

A statutory 60-day public consultation period is planned from the 5th May 2022 to the 8th July 2022 to enable the public and other stakeholders to review the draft PNA. Any comments or feedback gathered will be presented in the final report.

PNA review process

Should significant changes regarding the provision of pharmaceutical services in Sandwell arise during the lifespan of this PNA (Oct 2022–Sept 2025), the PNA document will be refreshed or supplementary statements added. This action will be overseen by Sandwell HWBB. Changes affecting pharmaceutical service provision which may warrant a refresh to this current PNA include but are not limited to:

- New pharmacy contracts
- Pharmacy closures
- Pharmacies merge or consolidate
- Changes to pharmacy locations
- Changes to pharmacy opening hours
- Local intelligence and significant issues relating to pharmacy enhanced service provision
- Appliance provision changes
- Significant changes in public health intelligence or primary care service developments that may impact either beneficially or adversely on pharmacy-based services

Steering group

A PNA Steering Group was established in October 2021 and included representatives from the following organisations:

- Healthwatch Sandwell
- Sandwell and West Birmingham CCG
- Sandwell LPC
- Sandwell MBC Public Health

The Terms of Reference document including full membership list can be found in **Appendix 1**.

Chapter 2

Public Health Needs and Demography

Identification of Local Health Needs

The aim of this document is to assess the pharmaceutical needs of Sandwell residents and review the provision of pharmaceutical services within Sandwell. More comprehensive and detailed information on the health needs of Sandwell can be found in Sandwell's Joint Strategic Needs Assessments (JSNAs). The most recent Sandwell JSNA published in September 2020 covers early years (children aged 0–5). Sandwell JSNA work over the past decade includes the following:

- Children and young people 5 to 19 years – 2017
- Adult mental health and wellbeing – 2017
- Children and young people – emotional wellbeing and mental health – 2016
- Children and young people 0 to 19 years – 2014
- Alcohol – needs across the life course – 2013
- Long term conditions -2014
- Learning disabilities – 2014
- Environment and health 2013
- Frail older people – 2012
- Obesity - 2011

Prior JSNAs can be accessed via Sandwell Trends <https://www.sandwelltrends.info/jsna-2/>. It is recommended that this PNA is read alongside the Sandwell JSNAs as the PNA does not replicate detailed descriptions of health needs.

Sandwell Public Health's future JSNA Programme will be integrated with the council's 2030 Vision for Sandwell to be a thriving, optimistic and resilient community. Sandwell's Vision 2030 includes 10 ambitions which will drive change in the borough:

1. Sandwell is a community where families have high aspirations and where we pride ourselves on equality of opportunity, adaptability and resilience
2. Sandwell is a place where we live healthy lives and live them for longer
3. Our workforce and young people are skilled, talented and have rewarding jobs

4. Our children benefit from the best start in life and a high-quality education
5. Our communities are built on mutual respect and taking care of each other
6. We have excellent and affordable public transport that connects the borough to the wider West Midlands
7. We have new homes to meet the housing needs in attractive neighbourhoods
8. Our distinctive towns and neighbourhoods are successful centres of community life
9. Sandwell has become a location of choice for industries of the future
10. Sandwell has a national reputation for getting things done

The findings and recommendations presented in this PNA will support Ambition 2 of Sandwell's Vision 2030 by ensuring the whole population has access to the pharmaceutical services they need.

Data and intelligence for this PNA was obtained from a variety of sources and includes:

- Office for National Statistics
- NHS England and NHS Improvement
- NHS England Business Services Authority
- Office for Health Improvement & Disparities – Public Health Profiles
- SHAPE Atlas
- Public questionnaire
- Pharmacy contractor questionnaire

Sandwell Borough Geography

Sandwell borough is a densely populated urban area located in the West Midlands, it covers an area of 85.56 km², including 1,200 hectares of green space and over 30 miles of canals. Sandwell is bordered by the neighbouring local authorities of Wolverhampton, Walsall, Birmingham and Dudley.

The total population of Sandwell is 329,042 according to ONS estimates (2020). The population estimates for the six localities within Sandwell has been shown in **Table 1** below. The population of Sandwell has increased from 322,712 as recorded in the 2018 PNA (using ONS 2016 data). In comparison with 2016 data, there is an increase in population across all towns in Sandwell.

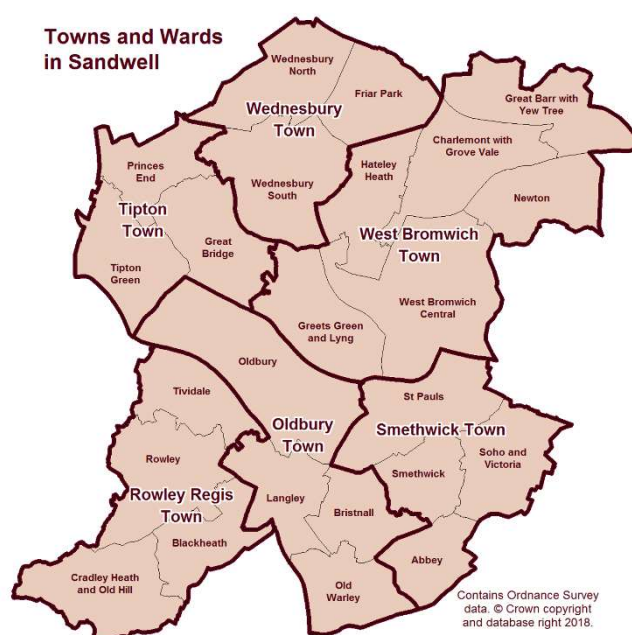


Table 1. Ward count and population by locality

Locality name	Number of wards in each locality	Population
Oldbury	4	53,707
Rowley Regis	4	51,243
Smethwick	4	61,586
Tipton	3	41,662
Wednesbury	3	39,491
West Bromwich	6	81,353
Sandwell Population	24	329,042

Source: Office for National Statistics (ONS) - Table SAPE23DT8a: Mid-2020 Population Estimates for 2020 Wards and 2021 LAs in England and Wales by Single Year of Age and Sex - Experimental Statistics

Based on available data, this PNA describes the health needs and current provision of pharmaceutical services at the borough, locality, ward or lower super output area

(LSOA) level. Electoral wards are political geographic units whose boundaries may change over time, whereas LSOAs are designed to report information on small areas and are less likely to change, thereby providing a consistent basis for tracking population changes over time. **Table 2** below shows the population of Sandwell by ward.

Table 2. Sandwell population by ward

Localities and the wards within them	Population
Oldbury	53,707
Bristnall	12,266
Langley	13,957
Old Warley	12,256
Oldbury	15,228
Rowley Regis	51,243
Blackheath	12,192
Cradley Heath and Old Hill	13,934
Rowley	12,149
Tividale	12,968
Smethwick	61,586
Abbey	12,640
Smethwick	15,302
Soho and Victoria	17,764
St Pauls	15,880
Tipton	41,662
Great Bridge	13,533
Princes End	13,548
Tipton Green	14,581
Wednesbury	39,491
Friar Park	12,735
Wednesbury North	13,175
Wednesbury South	13,581
West Bromwich	81,353
Charlemont with Grove Vale	12,281
Great Barr with Yew Tree	12,890
Greets Green and Lyng	13,939
Hateley Heath	15,250
Newton	12,455
West Bromwich Central	14,538
Sandwell Population	329,042

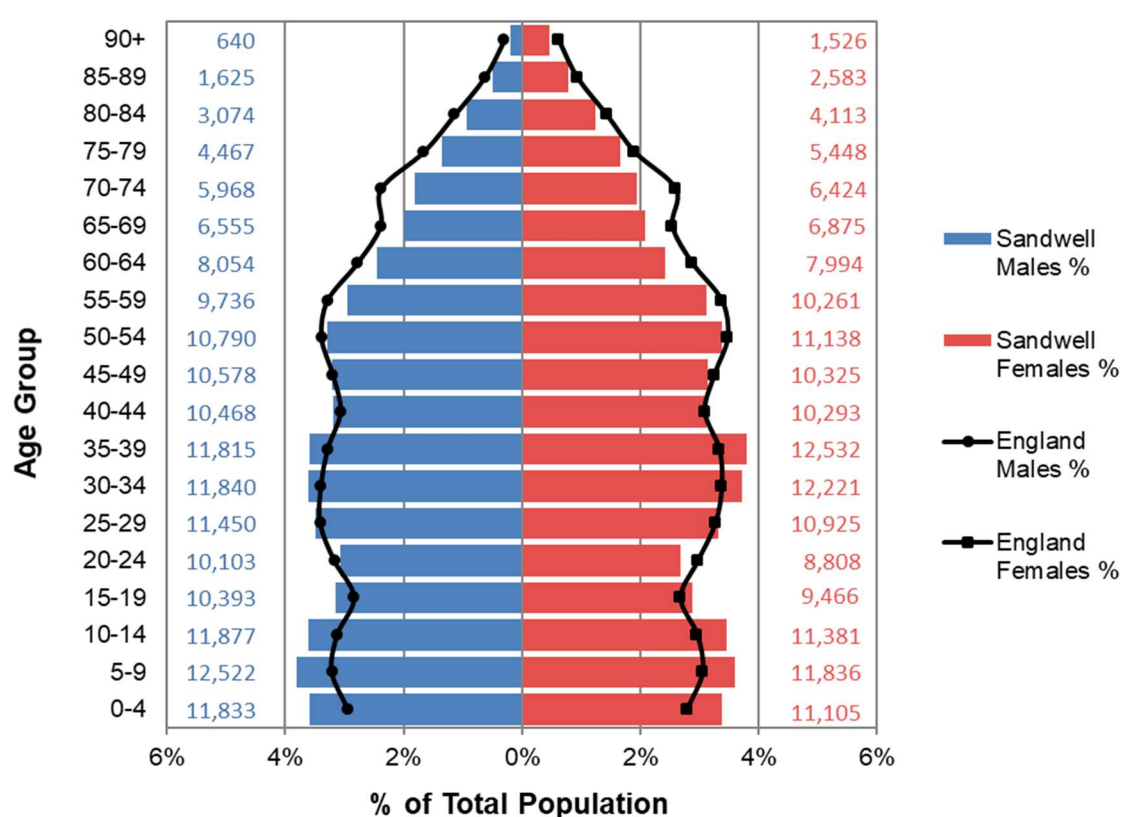
Source: Office for National Statistics (ONS) -
Table SAPE23DT8a: Mid-2020 Population
Estimates for 2020 Wards and 2021 LAs in
England and Wales by Single Year of Age and
Sex - Experimental Statistics

Sandwell Demographics

Age Profile

Sandwell has higher proportion of young people compared with England as shown in **Figure 1**. The proportion of males and females aged 0–19 years is higher than the England average. Similarly, there are proportionally more 30–39 year olds in Sandwell than in England. There are less older adults (≥ 55 years old) in Sandwell compared with England.

Figure 1. Mid-2020 estimated Sandwell population in each group



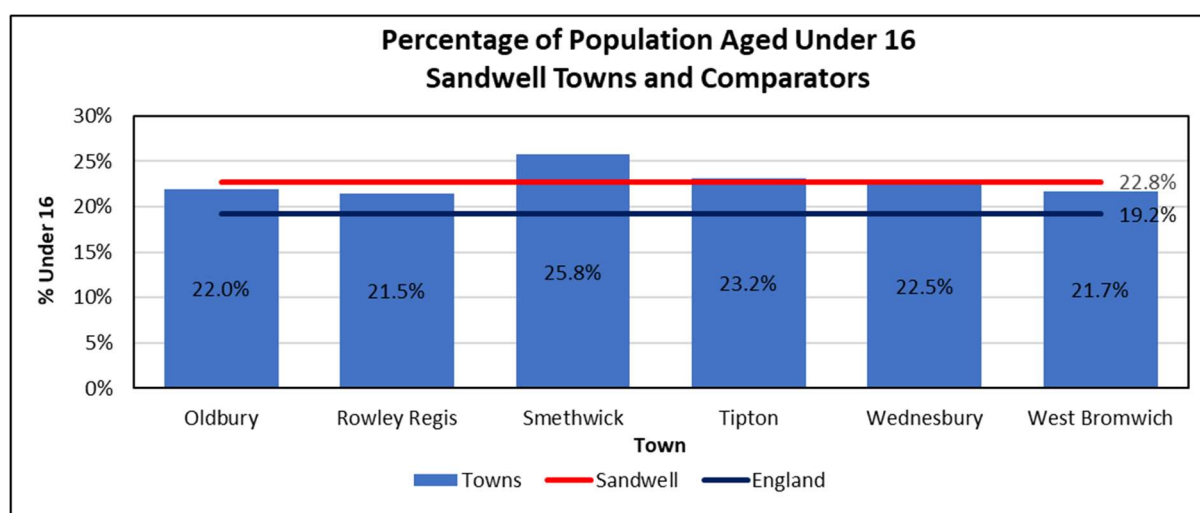
Source: Office for National Statistics (ONS) - Mid-Year Population Estimates, UK, June 2020

The age structure of Sandwell varies by ward and locality. Of the five wards with the highest proportion of under 16-year olds, three of these wards are located in Smethwick, one in West Bromwich and one in Tipton (**Table 3**). Sandwell has a higher proportion of under 16-year olds compared with the England average. Within Sandwell, when ward level data is aggregated to locality level data, Smethwick and Tipton have the highest proportion of young people (**Figure 2**).

Table 3. Five wards in Sandwell with the highest under 16-year old population

Ward	Locality	Percentage under 16-years olds
Soho and Victoria	Smethwick	29.1%
St Pauls	Smethwick	26.4%
Greets Green and Lyng	West Bromwich	25.2%
Smethwick	Smethwick	25.1%
Princes End	Tipton	24.9%

Source: Office for National Statistics (ONS) - Table SAPE23DT8a: Mid-2020 Population Estimates for 2020 Wards and 2021 LAs in England and Wales by Single Year of Age and Sex - Experimental Statistics

Figure 2. Percentage of population under 16 years in Sandwell compared with national average

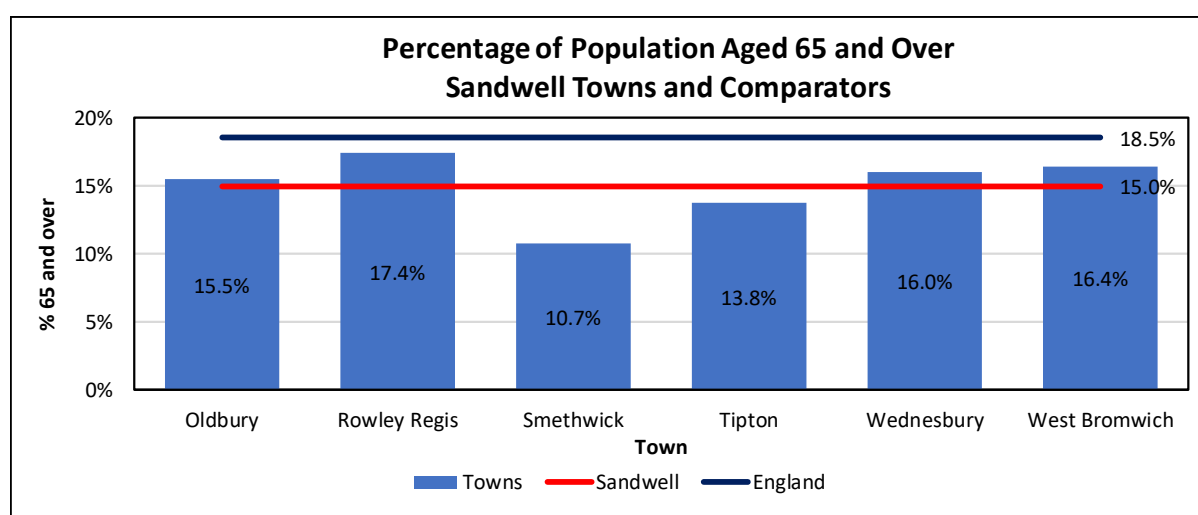
Source: Office for National Statistics (ONS) - Table SAPE23DT8a: Mid-2020 Population Estimates for 2020 Wards and 2021 LAs in England and Wales by Single Year of Age and Sex - Experimental Statistics

The wards with the highest proportion of older adults (≥ 65 years) are located in the West Bromwich, Oldbury, and Rowley Regis localities (**Table 4**). When this data is aggregated to locality level data, Rowley Regis and West Bromwich have the highest proportion of older adults. There are less older adults in Sandwell compared with the national average (**Figure 3**).

Table 4. Five wards in Sandwell with the highest over 65-year old population

Ward	Locality	Percentage aged 65 and older
Charlemont with Grove Vale	West Bromwich	20.2%
Newton	West Bromwich	19.8%
Old Warley	Oldbury	18.8%
Blackheath	Rowley Regis	18.5%
Rowley	Rowley Regis	17.9%

Source: Office for National Statistics (ONS) - Table SAPE23DT8a: Mid-2020 Population Estimates for 2020 Wards and 2021 LAs in England and Wales by Single Year of Age and Sex - Experimental Statistics

Figure 3. Percentage of population aged 65 and over in Sandwell compared with England

Source: Office for National Statistics (ONS) - Table SAPE23DT8a: Mid-2020 Population Estimates for 2020 Wards and 2021 LAs in England and Wales by Single Year of Age and Sex - Experimental Statistics

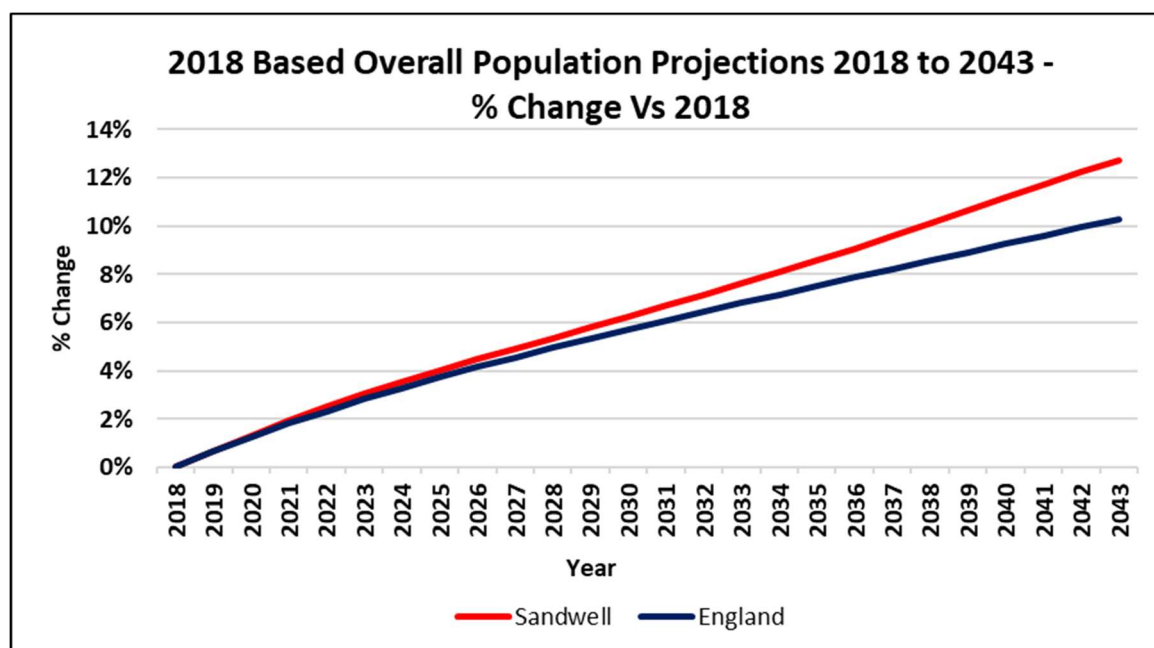
What this means for our PNA?

Smethwick and Tipton have the highest proportion on young people compared with Sandwell's other towns and this may represent a proportionally greater need for pharmaceutical services tailored towards young people in these areas. Whereas, in the other four towns, there is likely to be a proportionally greater demand for pharmaceutical services from older adults.

Population projections

The predicted population growth projection for Sandwell in all age groups from 2018 to 2043 is 12.7%. This is above the predicted rise for England which is 10.3% (**Figure 4**).

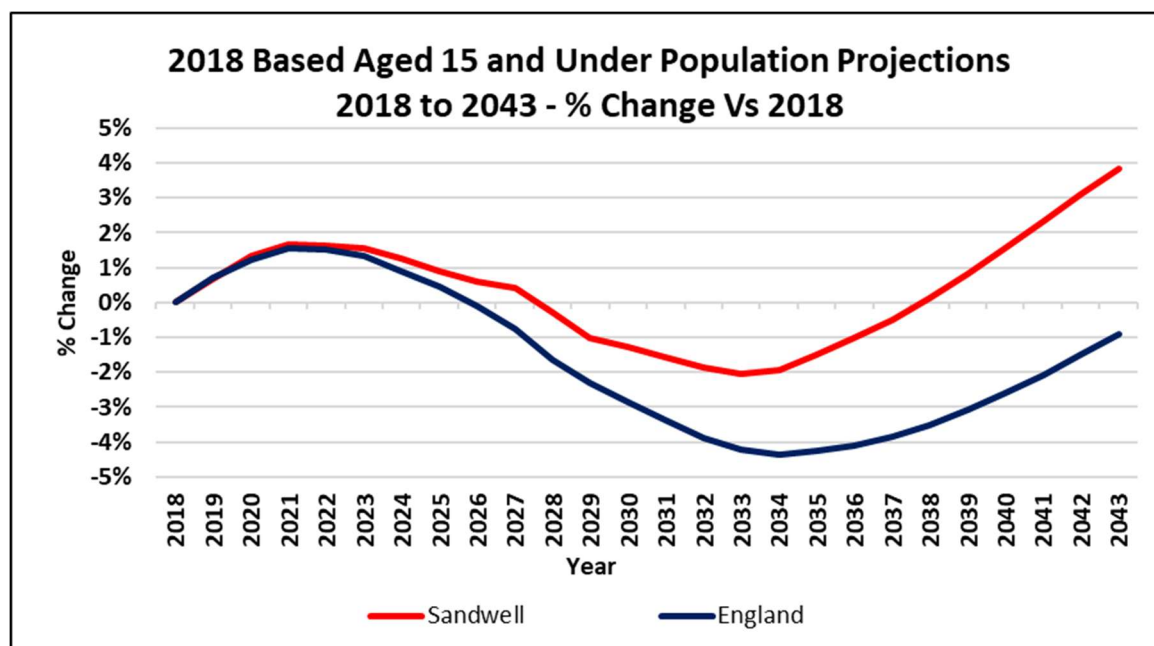
Figure 4. Population growth projection 2018-2043



Source: Office for National Statistics (ONS) - 2018 Based Population Projections

The 15 and under age group population is expected to rise during 2021–2022, followed by a gradual decline to reach its lowest point in 2033–35. It is then expected to rise steeply until 2043. Overall, the Sandwell under 16 population is expected to increase by 3.8% from 2018–2043 whereas the England population is predicted to decrease by 0.9% during the same period as shown in **Figure 5**. However, the ONS model used to make population projections may under-estimate the population growth rate that will result from higher birth rates in BME communities. This is notable given the high proportion of BME residents in Sandwell. Further, the long projection period exceeds the scope of this PNA which is expected to be updated in 2025.

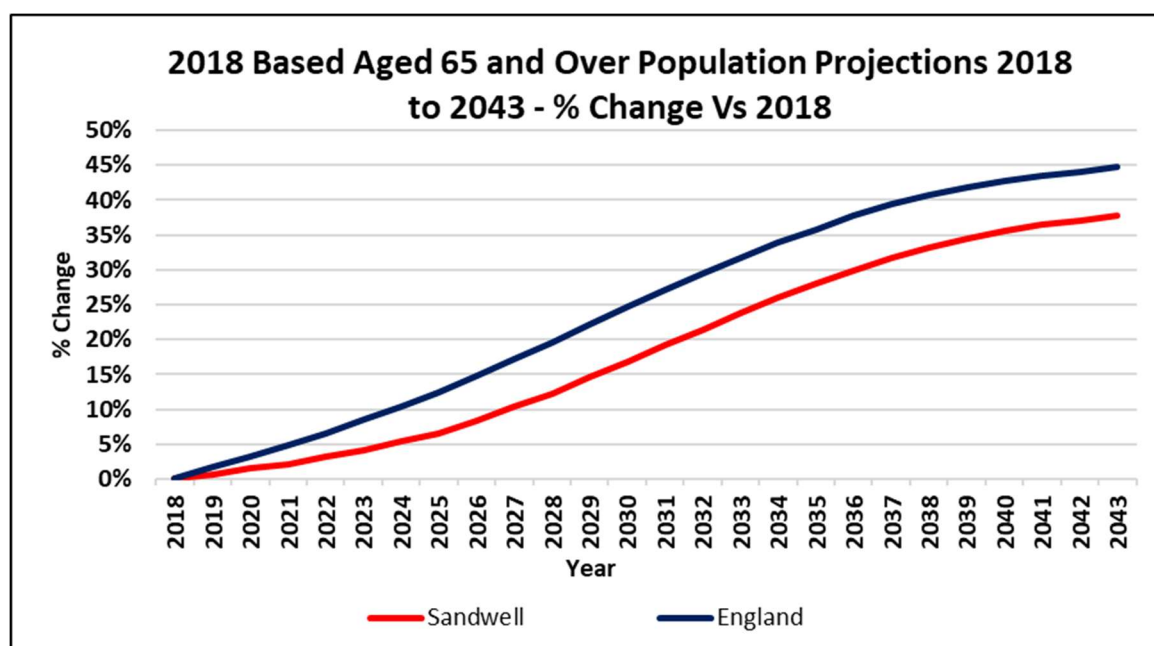
Figure 5. Population Projections from 2018–2043 in 15 and under age group



Source: Office for National Statistics (ONS) – 2018 Based Population Projections

The growth in population for the over 65 age group is expected to increase steadily by 37.9% in 2043, and population growth is expected to be less than for England (**Figure 6**).

Figure 6. Population Projections from 2018-2043 in 65 and above age group



Source: Office for National Statistics (ONS) – 2018 Based Population Projections

Housing growth

There is planned housing in the adjoining areas of Greater Icknield (Birmingham) and Smethwick (Sandwell) which has the potential for 4000 new homes. The 2 areas that fall under Sandwell are Grove Lane (800 new homes) and part of Brindley Canalside (400 new homes). Analysis of this housing data did not indicate that in the next three years there will be population increases of a sufficient size to impact on need for new pharmaceutical providers.

What this means for our PNA?

The projected increase in population during the lifespan of the PNA is not anticipated to affect the delivery of pharmaceutical services. The existing pharmacies should be able to meet the needs of the population.

Ethnicity

Sandwell is an ethnically diverse borough with 34.2% of the population from BME communities. As identified in the previous PNA, Smethwick has the highest proportion of BME residents in the under 16 and over 65 years age groups. Rowley Regis has the lowest proportion of BME residents in these age groups (**Table 5**).

Table 5. Proportion of residents from BME communities by age group

Area	% BME residents under 16 Years of age	% BME residents aged 65+
Sandwell	45.6%	14.3%
England	26.1%	8.4%
Locality		
Oldbury	44.7%	13.4%
Rowley Regis	21.4%	4.0%
Smethwick	74.2%	35.8%
Tipton	30.8%	7.2%
Wednesbury	29.9%	7.7%
West Bromwich	53.9%	17.0%

Source: Office for National Statistics (ONS) -2011
Census Table DC2101EW - Ethnic group by sex by age

What this means for our PNA?

Pharmacy services are frequently accessed by families with young children and older adults. Having a large number of residents within these categories may increase the demand for pharmacy services in these areas. There is a correlation between ethnic diversity and health inequalities, whereby BME communities experience a higher levels of health inequalities throughout the life course which leads to a higher prevalence of chronic diseases such as diabetes and cardiovascular disease. Therefore, it's likely that there will be an increased demand for pharmacy services in localities with a high proportion of older BME residents. There may also be additional needs, such as the need for pharmacists to speak additional languages in these localities to overcome barriers to accessing services.

Life expectancy

Life expectancy is a measure of how long a person born in an area would be expected to live using current observed rates of mortality. The gap in life expectancy between the best and worst areas can help us understand the extent of health inequalities present across the borough.

The life expectancy at birth for men in Sandwell is 76.1 years and women is 80.7 years, these are both lower than the average life expectancy for West Midlands (males, 78.5 years; females, 82.5 years) and England (males, 79.4 years; females, 83.1 years). Inequalities in life expectancy also exist within the borough for both men and women. The ward of Old Warley (Oldbury) has the highest male life expectancy of 80.5 years, whereas the ward of Princes End (Tipton) has the lowest male life expectancy of 73.7 years (6.8 years difference in life expectancy; **Table 6**). The ward of Rowley (Rowley Regis) has the highest female life expectancy of 85.6 years, whereas the ward of Great Bridge (Tipton) has the lowest female life expectancy of 76.5 years (9.1 years difference in life expectancy; **Table 7**).

Table 6. Male Life Expectancy (Years) By Ward - 2016-20

Sandwell Town	Ward Name	Quintile	Male LE at Birth
Tipton	Princes End	Worst	73.7
Smethwick	Smethwick		74.2
Tipton	Great Bridge		74.4
West Bromwich	Greets Green and Lyng		74.5
Tipton	Tipton Green		74.7
Sandwell Town	Ward Name	Quintile	Male LE at Birth
West Bromwich	Newton	Best	78.7
West Bromwich	Great Barr with Yew Tree		78.8
Smethwick	Abbey		78.9
West Bromwich	Charlemont with Grove Vale		79.9
Oldbury	Old Warley		80.5

Source: The Office for Health Improvement and Disparities analysis of ONS death registration data and mid-year population estimates via Local Health website - Life expectancy at birth, 2016 to 2020

*best fit wards

Table 7. Female Life Expectancy (Years) By Ward – 2016-20

Sandwell Town	Ward Name	Quintile	Female LE at Birth
Tipton	Great Bridge	Worst	76.5
Smethwick	Smethwick		78.8
West Bromwich	Hateley Heath		79.0
Wednesbury	Wednesbury North		79.2
Smethwick	Soho and Victoria		79.3
Sandwell Town	Ward Name	Quintile	Female LE at Birth
West Bromwich	Newton	Best	83.7
Oldbury	Old Warley		83.9
Smethwick	Abbey		84.5
West Bromwich	Great Barr with Yew Tree		84.7
Rowley Regis	Rowley		85.6

Source: The Office for Health Improvement and Disparities analysis of ONS death registration data and mid-year population estimates via Local Health website - Life expectancy at birth, 2016 to 2020

*best fit wards

What this means for our PNA?

Closing the gap in life expectancy observed across the borough is one of the key priorities of the HWBB. Pharmacy services such as smoking cessation, vascular risk assessment, alcohol interventions and healthy living advice are all activities which can impact on life expectancy.

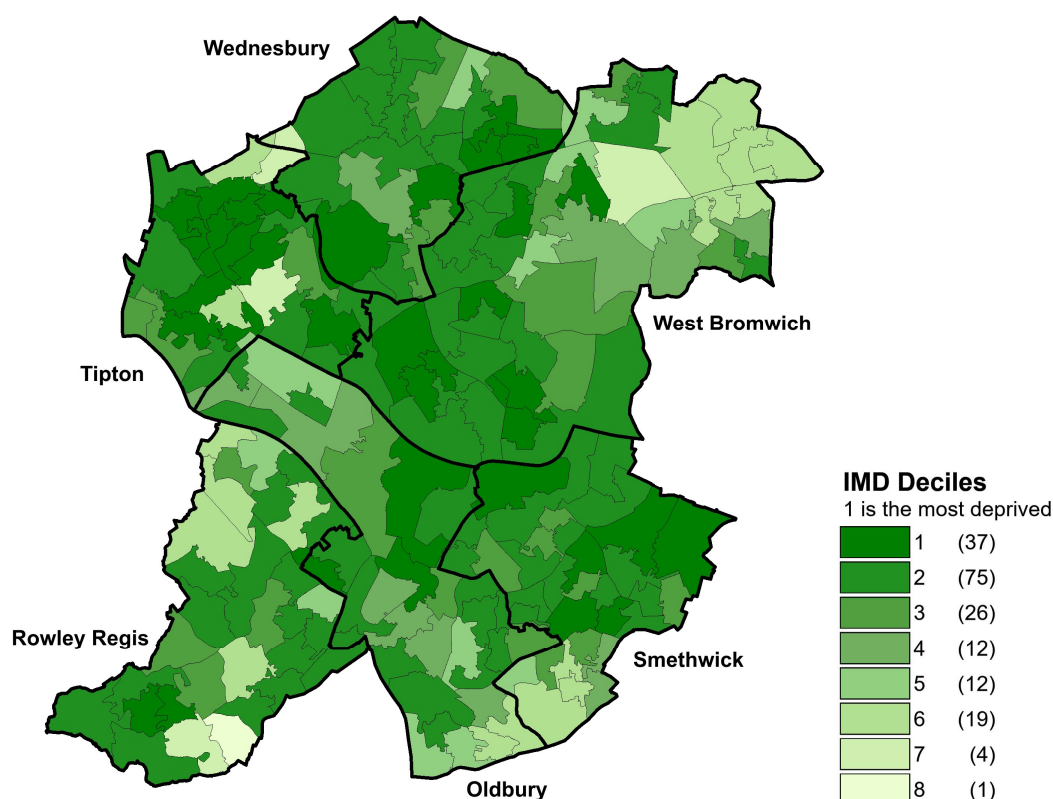
Deprivation in localities

Deprivation to many means poverty and is not an easy term to measure. Poverty impacts on individuals, families, communities and society, and its consequences are far-reaching (including social isolation, low educational attainment, unemployment, and impacts on mental and physical health). One of the most common measures of deprivation is the England Indices of Multiple Deprivation (IMD) which is a measure of relative deprivation for LSOAs in England. The IMD applies weightings to different themes such as housing, health and well-being, education and skills, income deprivation, and crime to generate a score for each LSOA which are ranked relative to each other. The relative level of deprivation experienced by a population has a direct correlation with health outcomes for that population. Sandwell is the 8th most deprived

local authority in England and deprivation is spread throughout the borough rather than being concentrated in hotspots (**Figure 7**).

Overall Sandwell has a high level of deprivation compared with England. All of the Sandwell LSOAs are in the 80 percent most deprived LSOAs in England. Analysis of the IMD for the LSOAs in Sandwell shows that each of the localities has significant levels of deprivation with no locality having a LSOA in the least deprived 20% nationally, and very few areas in Sandwell fall into the 40% of least deprived areas in England (Oldbury, Smethwick and Wednesbury have no LSOAs in the 40% of least deprived areas in England).

Figure 7. Sandwell LSOAs and Town IMD 2019 National Deciles



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*Lower Layer Super Output Areas (LSOAs) are small areas with an average population of approximately 1,500 people or 650 households

Source: [Ministry of Housing, Communities & Local Government](#)

Note: Deciles rank the LSOA in England into ten bands and so any LSOA in decile 1 is in the ten percent most deprived LSOA in England and any in decile 10 is in the ten percent least deprived LSOA in England.

What this means for our PNA?

People in more deprived areas generally live with poorer health. Increased deprivation is also associated with a higher prevalence of smoking, harmful drinking, poor diet and poor mental health. Community pharmacies have an extended role to play in educating and supporting communities to adopt healthier lifestyles.

Local health needs and priorities

Smoking

Smoking is the largest avoidable cause of death and of social inequalities in life expectancy in the UK.³ Whilst prevalence rates of smoking in Sandwell have fallen in recent years; smoking rates remain higher than the regional and national prevalence rates (**Table 8**). Reducing smoking rates further is a key focus for health services, particularly for “harder to reach groups”, such as for routine and manual workers who are known to have higher smoking prevalence rates.

Table 8. Smoking Prevalence, 2020

Area	Smoking Prevalence in Adults (18+)
Sandwell	13.7%
West Midlands Region	12.8%
England	12.1%

Source: PHE Local Tobacco Control Profiles, Office of National Statistics (ONS) Annual Population Survey (APS)

Note: APS was formerly conducted via face-to-face interview. Due to COVID-19 The mode has changed for this indicator to telephone only. This means the current indicator has a different methodology and should not be compared to the previously published indicator. The final prevalence figures as published are lower than would have been expected if data collection had stayed the same for 2020. Data for 2020 is based on Q2-Q4 survey collection only, resulting in less precise estimates than observed for a typical year of APS.

What this means for our PNA?

Pharmacies have an important role in providing support for smoking cessation by providing access to nicotine replacement therapy (NRT) and providing advice from pharmacists and trained staff. Pharmacies are a unique provider in that they provide

access to NRT at the point of care and provide a “walk in” service across extended opening hours which is particularly important for improving accessibility of care for harder to reach groups.

Alcohol

Male alcohol-related mortality is a significant problem in Sandwell. Male deaths from alcohol-related diseases and conditions are considerably more than for the West Midlands and England (**Table 9**). The rate for women is statistically similar to the regional and national rates. Over time Sandwell’s alcohol-related hospital admission rates have been improving in males, and at 608.8 per 100,000 this is statistically similar to the national (England) rate of 603.2 per 100,000 (**Table 10**). Alcohol-related admission rates for females are lower in Sandwell than the regional and national averages.

Table 9. Alcohol-related mortality, all ages, directly age-standardised rate per 100,000 population, 2020

Area	Alcohol-Related Mortality Rate - Males	Alcohol-Related Mortality Rate - Females
Sandwell	103.7	26.4
West Midlands Region	65.2	23.4
England	57.3	20.9

Source: Local Alcohol Profiles for England - calculated by OHID: Population Health Analysis (PHA) team from the Office for National Statistics (ONS) Annual Death Extract Public Health Mortality File and ONS Mid Year Population Estimates.

Note: New method. This indicator uses a new set of attributable fractions, and so differ from that originally published.

Table 10. Admission episodes for alcohol-related conditions (Narrow), all ages, directly age-standardised rate per 100,000 population, 2020/2021

Area	Admission Episodes for Alcohol-Related Conditions (Narrow), Males	Admission Episodes for Alcohol-Related Conditions (Narrow), Females
Sandwell	608.8	237.9
West Midlands Region	684.5	359.5
England	603.2	321.9

Source: Local Alcohol Profiles for England - calculated by OHID: Population Health Analysis (PHA) team using data from NHS Digital - Hospital Episode Statistics (HES) and Office for National Statistics (ONS) - Mid Year Population Estimates.

Note: New method. This indicator uses a new set of attributable fractions, and so differ from that originally published.

What this means for our PNA?

Pharmacies have a potential role in providing structured brief interventions in alcohol use, as well as providing opportunistic lifestyle advice and signposting patients to other healthcare services.

Physical activity

Physical inactivity is linked to conditions such as obesity, diabetes, cancer, dementia, stroke, heart disease, and hypertension. Regular physical activity helps to prevent and alleviate these conditions and is essential for physical and mental health and wellbeing. The Active Lives Survey collects data on the engagement in, and attitudes to, sport and physical activity in England and Wales. The 2019/20 survey shows that in Sandwell only 59.9% of adults undertook the recommended levels of 150 minutes of physical activity per week. This was lower than the rates for adults in the West Midlands Region at 63.0% and England at 65.9% (**Table 11**).

Table 11. Percentage of adults aged 19 and over doing at least 150 moderate intensity equivalent (MIE) minutes of physical activity per week, 2020/2021

Area	% of Adults Physically Active
Sandwell	59.9%
West Midlands Region	63.0%
England	65.9%

Source: Office for Health Improvement and Disparities (based on the Active Lives Adult Survey, Sport England)

Obesity

Obesity in adults is also estimated from the Active Lives Survey. **Table 12** shows that the percentage of adults who are overweight or obese in Sandwell is higher than the West Midlands and England averages.

Table 12. Percentage of adults aged 18 and over classified as overweight or obese, 2020/2021

Area	Percentage of adults (aged 18+) classified as overweight or obese
Sandwell	70.8%
West Midlands Region	66.8%
England	63.5%

Source: Office for Health Improvement and Disparities (based on the Active Lives Adult Survey, Sport England)

Obesity in children is measured through the National Child Measurement Programme (NCMP). In Sandwell 24.6% of reception class children (4–5 year olds) are overweight or obese and 42.9% of year 6 children (10-11-year olds) are overweight or obese. The figures for Sandwell wards and localities can be seen below, for reception year and year 6 (**Table 13**).

Table 13. Childhood obesity (overweight including obesity) by ward and locality

Locality	Ward	Reception: Prevalence of overweight (including obesity)	Year 6: Prevalence of overweight (including obesity)
Oldbury	Bristnall	26.0%	41.8%
	Langley	26.4%	41.4%
	Old Warley	21.1%	39.1%
	Oldbury	22.7%	43.0%
	Total	24.1%	41.4%
Rowley Regis	Blackheath	26.1%	41.5%
	Cradley Heath and Old Hill	25.9%	45.1%
	Rowley	25.5%	39.6%
	Tividale	20.2%	44.7%
	Total	24.4%	42.8%
Smethwick	Abbey	20.2%	40.7%
	St Pauls	22.8%	45.5%
	Smethwick	22.5%	42.9%
	Soho and Victoria	23.2%	45.9%
	Total	22.4%	44.2%
Tipton	Great Bridge	24.3%	38.3%
	Princes End	31.5%	42.5%
	Tipton Green	24.8%	40.8%
	Total	26.8%	40.6%
Wednesbury	Friar Park	31.3%	48.2%
	Wednesbury North	24.3%	41.9%
	Wednesbury South	25.0%	47.3%
	Total	27.3%	46.0%

West Bromwich	Charlemont with Grove Vale	22.9%	41.6%
	Great Barr with Yew Tree	23.4%	40.2%
	Greets Green and Lyng	26.0%	42.5%
	Hateley Heath	26.5%	42.5%
	Newton	24.4%	42.3%
	West Bromwich Central	22.7%	45.7%
	Total	24.5%	42.6%
Sandwell	Grand Total	24.6%	42.9%

The data presented above only includes children participating in the NCMP in state-maintained schools.

Source: NHS Digital, National Child Measurement Programme via Local Health website

Note: The 2019/20 NCMP data collection stopped in March 2020 when schools were closed due to the Covid-19 pandemic. In a usual NCMP collection year, national participation rates are around 95% of all eligible children, however in 2019/20 the number of children measured was around 75% of previous years.

What this means for our PNA?

Pharmacies provide advice and support for healthy lifestyles as part of their core contract. However, examples of enhanced services are evolving whereby pharmacies play an increasing role in actively supporting adults and children to increase level of exercise, chose healthier food options and maintain a healthy weight.

Teenage conceptions

The rate of teenage conceptions in Sandwell is higher than the West Midlands and England rate at 16.3 conceptions per 1000 women under 18 years old (**Table 14**). However, the rate of teenage conceptions in Sandwell has fallen dramatically over the past 10 years (reduced by almost half since 31.6 per 1,000 in 2015).

Table 14. Under 18 conception rates per 1,000, 2020

Area	Rate of teenage (under 18) conceptions
Sandwell	16.3
West Midlands Region	15.1
England	13.0

Source: Office for National Statistics (ONS) via Public Health Outcomes Framework (PHOF)

What this means for our PNA?

Pharmacies in Sandwell provide access to Emergency Hormonal Contraception (EHC) through a Patient Group Direction (PGD). The service is free of charge to women using the service. Pharmacies are a safe, accessible and non-judgemental provider of EHC services.

Disease prevalence

Disease prevalence can be measured using data recorded for the Quality and Outcomes Framework (QoF) used by GPs. This data is helpful but has its limitations; there can be under recording which is not apparent meaning that prevalence looks lower than in practice. In addition, the start of COVID-19 pandemic in the last quarter of 2019-20 has led to unprecedented changes to the work of GP practices and consequently data may have been impacted. However, as a comparative tool it can help to demonstrate variation across CCG areas. Generally, Black Country and West Birmingham CCG area shows a similar prevalence across disease types with England (**Table 15**).

Table 15. Disease Prevalence

Disease	Black Country & West Birmingham CCG %	England %
Atrial fibrillation	1.8%	2.1%
Asthma	6.5%	6.4%
Cancer	2.6%	3.2%
Secondary prevention of coronary heart disease	3.4%	3.1%
Chronic kidney disease	4.5%	4.0%
Chronic obstructive pulmonary disease	1.9%	1.9%
Dementia	0.6%	0.7%
Depression	12.0%	12.3%
Diabetes mellitus	9.0%	7.1%
Epilepsy	0.9%	0.8%
Heart failure	0.9%	0.9%
Hypertension	14.7%	13.9%
Learning disability	0.6%	0.5%
Mental health	1.0%	1.0%
Non-diabetic hyperglycaemia	4.4%	5.3%
Obesity	8.4%	6.9%
Osteoporosis: secondary prevention of fragility fractures	0.6%	0.8%
Peripheral arterial disease	0.5%	0.6%
Palliative care	0.5%	0.5%
Rheumatoid arthritis	0.9%	0.8%
Stroke and transient ischaemic attack	1.7%	1.8%

Source: Quality and Outcomes Framework (QoF) 2020-21

What this means for our PNA?

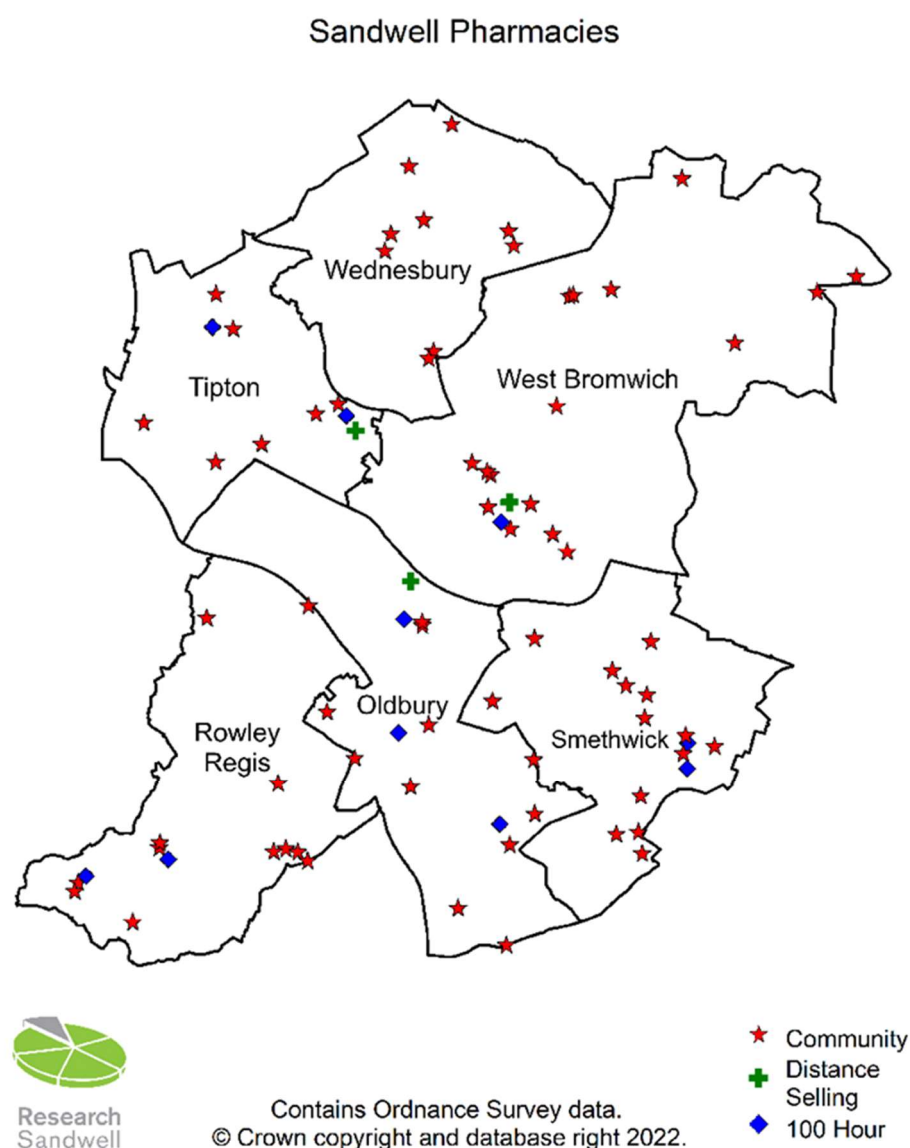
Pharmacies provide essential services and support for patients with long-term conditions. Ensuring that medicines taken to manage long-term conditions are used safely and effectively improves outcomes for patients and reduces the risk of drug-related hospital admissions. Pharmacies have a role in ensuring patients, clinicians and carers can obtain the maximum benefit from medicines whilst reducing risks associated with treatment. In addition, pharmacies can provide healthy lifestyle advice which will support the prevention and management of long-term conditions.

Community Pharmacy Provision in Sandwell MBC

Location of pharmacies

The map below (**Figure 8**) shows the distribution and type of pharmacies available in Sandwell. In Sandwell there are community, distance selling, and 100-hour pharmacies. Wednesbury is the only town that does not have access to a 100-hour pharmacy. Rowley Regis, Smethwick and Wednesbury do not have access to a distance selling pharmacy.

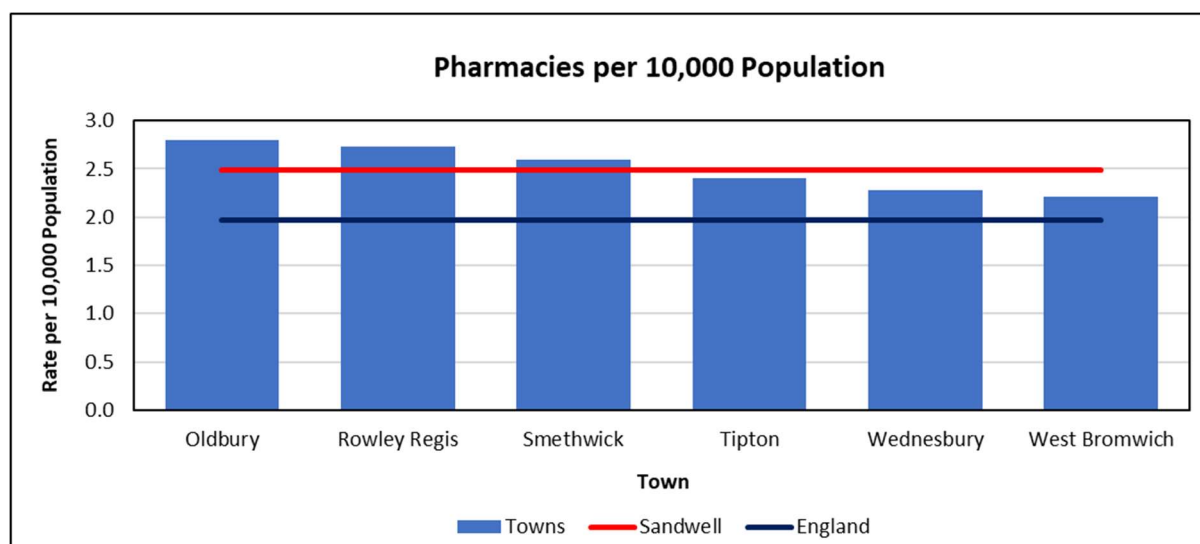
Figure 8. Map of pharmacy locations in Sandwell



In total, there are 82 pharmacies in Sandwell (including three distance selling pharmacies and ten 100-hour pharmacies) serving a population of 329,042 residents. This equates to one pharmacy per 4013 residents, which is greater than the England average of one pharmacy per 5086 residents.

There is a good distribution of community pharmacies across the borough. With all towns having more than the England average rate of community pharmacies per 10,000 population. Oldbury, Rowley Regis, and Smethwick have the highest rate of community pharmacies per 10,000 population (**Figure 9**).

Figure 9. Community pharmacies per 10,000 population



Pharmacy Data Sources: NHS England and NHS Digital
Population Data Source: Office for National Statistics

Pharmacies in Sandwell are spread evenly compared with the population of each town. West Bromwich has the most pharmacies and the largest population of all Sandwell towns. Wednesbury has the least number of pharmacies and also the smallest population of all Sandwell towns (**Table 16**).

Table 16. Number of pharmacies by locality

Locality	Ward	All Pharmacies	100 Hour Pharmacies	Mid-2020 Population
Oldbury	Bristnall	4	1	12,266
	Langley	5	1	13,957
	Old Warley	2	0	12,256
	Oldbury	4	1	15,228
	Total	15	3	53,707
Rowley Regis	Blackheath	4	0	12,192
	Cradley Heath and Old Hill	7	2	13,934
	Rowley	1	0	12,149
	Tividale	2	0	12,968
	Total	14	2	51,243
Smethwick	Abbey	4	0	12,640
	Smethwick	2	0	15,302
	Soho and Victoria	7	2	17,764
	St Pauls	3	0	15,880
	Total	16	2	61,586
Tipton	Great Bridge	5	1	13,533
	Princes End	3	1	13,548
	Tipton Green	2	0	14,581
	Total	10	2	41,662
Wednesbury	Friar Park	2	0	12,735
	Wednesbury North	4	0	13,175
	Wednesbury South	3	0	13,581
	Total	9	0	39,491
West Bromwich	Charlemont with Grove Vale	3	0	12,281
	Great Barr with Yew Tree	2	0	12,890
	Greets Green and Lyng	3	1	13,939
	Hateley Heath	0	0	15,250
	Newton	2	0	12,455
	West Bromwich Central	8	0	14,538
	Total	18	1	81,353
Sandwell	Grand Total	82	10	329,042

Pharmacy Data Source: NHS England

Population Data Source: Office for National Statistics

Pharmacy Access Scheme

The aim of the Pharmacy Access Scheme (PhAS) is to ensure that a baseline level of patient access to NHS community pharmaceutical services in England is protected.⁴ The PhAS is an additional monthly payment made to all eligible pharmacies in areas where there are fewer pharmacies. The PhAS has been designed to capture the pharmacies that are most important for patient access, specifically those pharmacies where patient and public access would be materially affected should they close. The PhAS takes isolation and need levels into account.

The objective of the 2022 PhAS is to create a scheme that is more targeted and representative of the pharmacy market as it is now, and that better targets support to pharmacies that are deemed essential for local provision of physical NHS pharmaceutical services. To best protect access, the scheme is focused on areas that may be at risk of reduced access, for example, where a local population relies on a single pharmacy. The 2022 PhAS will apply from 1 January 2022. The pharmacies in Sandwell that qualify for this scheme are listed in **Table 17** below.

Table 17. Sandwell pharmacies eligible for the 2022 Pharmacy Access Scheme at June 2022

Fcode	Pharmacy Name	Address	Postcode	Sandwell Town
FKE95	Boots UK Ltd	Unit D Gallagher Retail Park, Axletree Way, Wednesbury	WS10 9QY	Wednesbury
FL134	Portway Healthcare Limited	51a New Birmingham Road, Tividale	B69 2JQ	Rowley Regis
FYL65	Forrest DP Ltd	145 Hamstead Road, Great Barr, Birmingham	B43 5BB	West Bromwich
FYV46	Chempharm Ltd	85 Church Vale, West Bromwich	B71 4DH	West Bromwich

Contractors had to be registered on the Manage Your Service (MYS) platform to provide the Community Pharmacist Consultation Service (CPCS) by 31 December 2021 in order to receive the first PhAS payment. To continue to receive PhAS payments, they must continue to be registered for CPCS for greater than or equal to half of the number of full days in the relevant month.

Source: GOV.UK

Identification of Pharmaceutical Service Provision

NHSE provided a list of pharmacy contractors including their locations and opening hours. A contractor questionnaire was also sent to Sandwell community pharmacies via an email link to Snap Surveys and via post.

Access to Community Pharmacy and Pharmaceutical Services

The maps in this PNA illustrate that the geographical location of Sandwell community pharmacies is well spread across the populated areas, covering deprived areas and those with a higher proportion of BME residents.

Patients are not registered with individual pharmacies and so have choices about where to have their prescriptions dispensed and where to access essential, advanced, enhanced and local pharmacy services.

Opening Hours

For a full list of pharmacies and their opening hours please see **Appendix 2**. In total there are 64 pharmacies that open Saturdays and 17 pharmacies that are open on a Sunday (**Table 18**).

Table 18. Pharmacies by locality and number open on the weekends

Locality	Ward	All Pharmacies	Open Saturdays	Open Sundays
Oldbury	Bristnall	4	4	1
	Langley	5	5	2
	Old Warley	2	1	1
	Oldbury	4	3	1
	Total	15	13	5
Rowley Regis	Blackheath	4	3	1
	Cradley Heath and Old Hill	7	4	2
	Rowley	1	0	0
	Tividale	2	1	0
	Total	14	8	3
Smethwick	Abbey	4	4	0
	Smethwick	2	2	0
	Soho and Victoria	7	5	3
	St Pauls	3	2	0
	Total	16	13	3

Tipton	Great Bridge	5	4	2
	Princes End	3	3	2
	Tipton Green	2	2	0
	Total	10	9	4
Wednesbury	Friar Park	2	2	0
	Wednesbury North	4	3	1
	Wednesbury South	3	2	0
	Total	9	7	1
West Bromwich	Charlemont with Grove Vale	3	2	0
	Great Barr with Yew Tree	2	1	0
	Greets Green and Lyng	3	2	1
	Hateley Heath	0	0	0
	Newton	2	2	0
	West Bromwich Central	8	7	0
	Total	18	14	1
Sandwell	Grand Total	82	64	17

Pharmacy Data Source: NHS England

There are 30 pharmacies that are open after 6.30pm and 29 pharmacies that are open before 9am which demonstrates good access to pharmaceutical services throughout the Borough, out of normal office hours (**Table 19**).

Table 19. Pharmacies by locality and number with extended hours

Locality	Ward	All Pharmacies	Open Before 9am	Open After 6:30pm
Oldbury	Bristnall	4	1	3
	Langley	5	1	2
	Old Warley	2	1	1
	Oldbury	4	1	1
	Total	15	4	7
Rowley Regis	Blackheath	4	2	1
	Cradley Heath and Old Hill	7	4	2
	Rowley	1	0	0
	Tividale	2	2	0
	Total	14	8	3
Smethwick	Abbey	4	0	1
	Smethwick	2	0	2

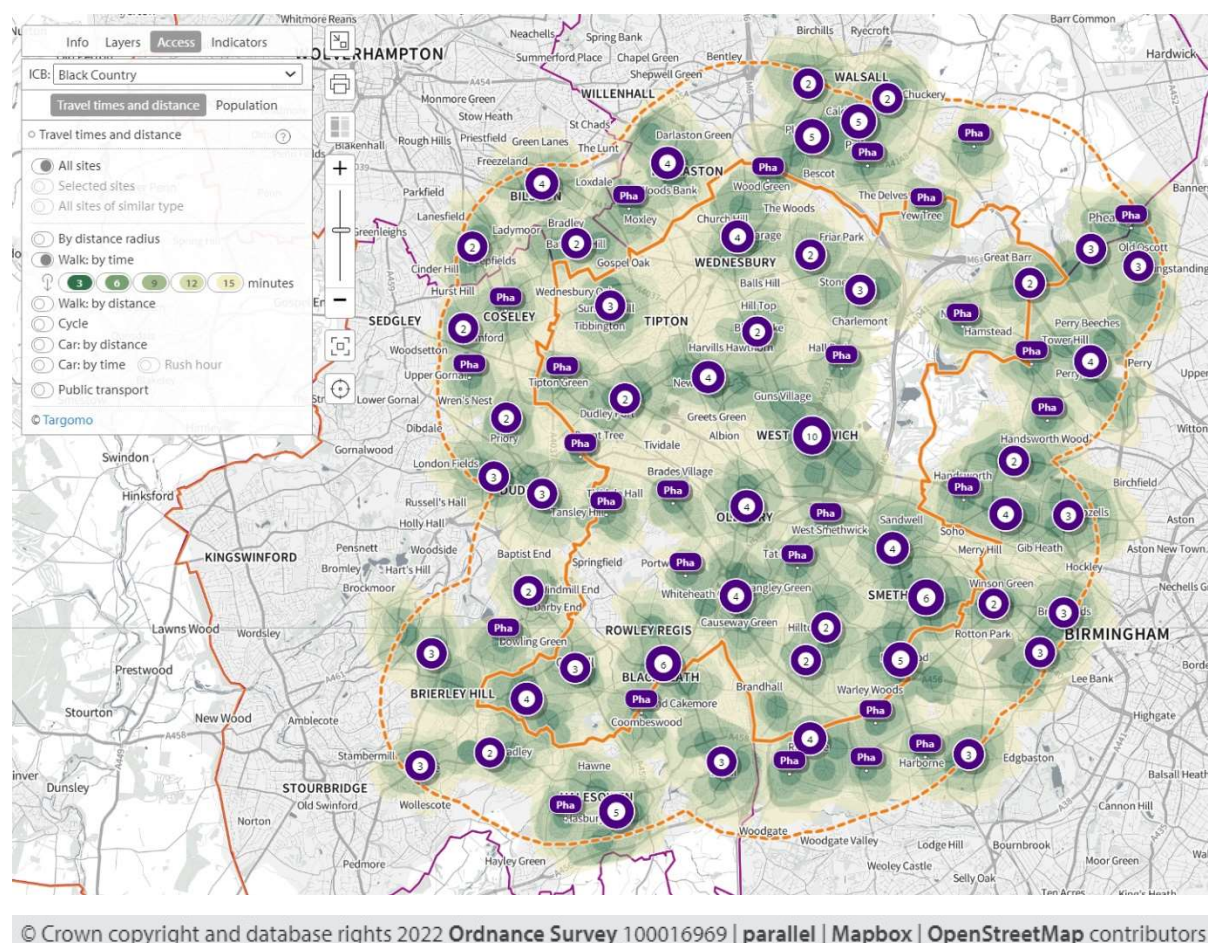
	Soho and Victoria	7	3	3
	St Pauls	3	0	2
	Total	16	3	8
Tipton	Great Bridge	5	3	3
	Princes End	3	1	2
	Tipton Green	2	1	0
	Total	10	5	5
Wednesbury	Friar Park	2	0	0
	Wednesbury North	4	1	2
	Wednesbury South	3	1	1
	Total	9	2	3
West Bromwich	Charlemont with Grove Vale	3	0	1
	Great Barr with Yew Tree	2	0	0
	Greets Green and Lyng	3	2	1
	Hateley Heath	0	0	0
	Newton	2	1	1
	West Bromwich Central	8	4	1
	Total	18	7	4
Sandwell	Grand Total	82	29	30

Pharmacy Data Source: NHS England

Walking and Public Transport Distance to Pharmacies

The map below shows areas within a 15-minute walking distance of a pharmacy for Sandwell residents (**Figure 10**). This includes pharmacies within a 2km boundary of Sandwell which may also be accessed by Sandwell residents. Most residents can access a pharmacy within a reasonable walking time.

Figure 10. Areas within a 15-minute walk to a pharmacy

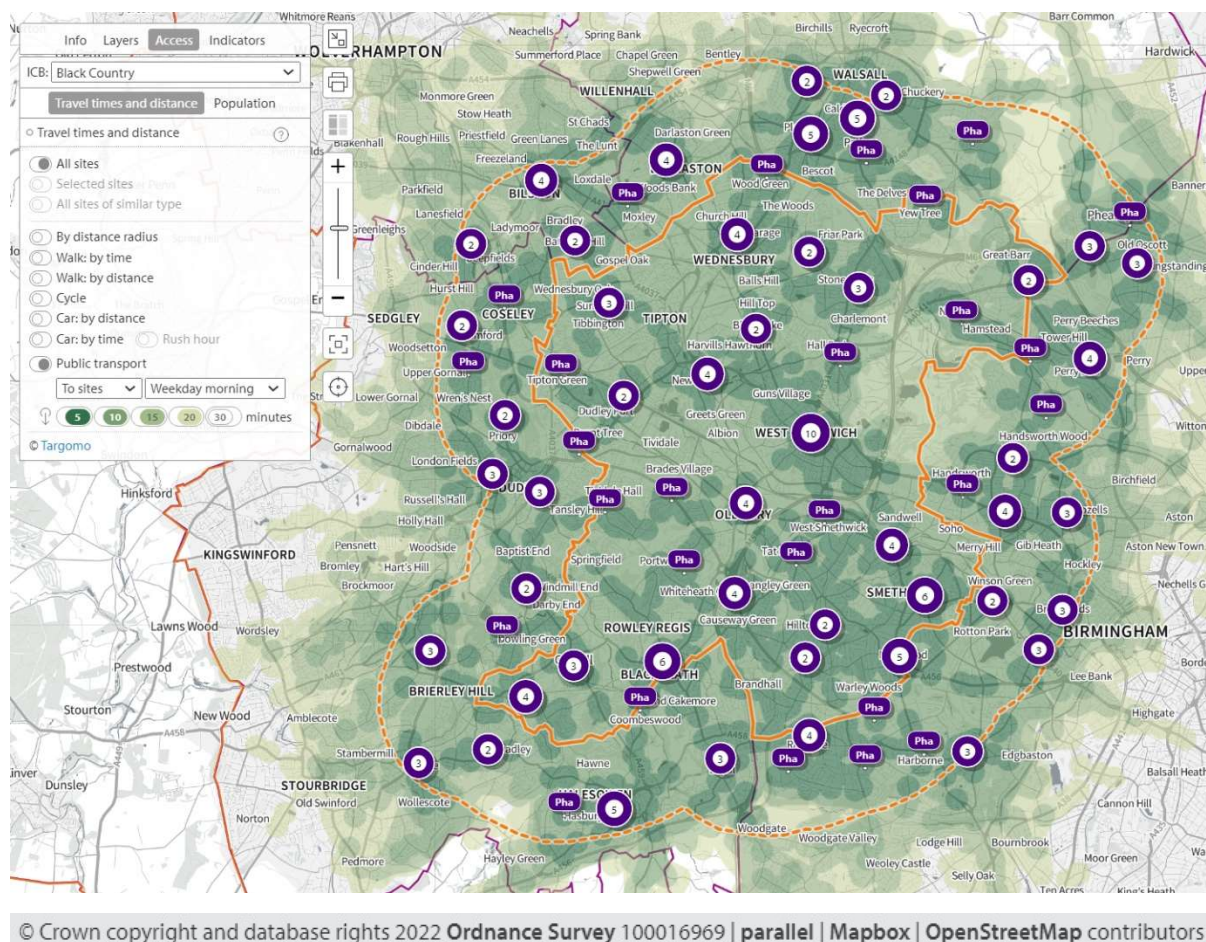


Source: SHAPE Place Atlas 2022

The map was exported from the SHAPE Place Atlas on 17/08/2022

The public transport map below demonstrates that all Sandwell residents can get to a pharmacy within 20 minutes by travelling on public transport on a weekday morning (**Figure 11**). All Sandwell residents can also access a pharmacy within 20 minutes on public transport on weekday afternoons and evenings (maps available in **Appendix 3** and **Appendix 4**)

Figure 11. 20 minutes travel to a pharmacy by public transport (weekday mornings)



Source SHAPE Atlas 2022

The map was exported from the SHAPE Place Atlas on 17/08/2022

What does this mean for this PNA?

From our evaluation of the geographical location and number of pharmacies per head of population, we conclude that there are sufficient pharmacies in Sandwell and the surrounding area to provide essential pharmaceutical services to its residents. No gaps in geographical provision of pharmaceutical services have been identified in Sandwell.

Chapter 4

Pharmaceutical Services

Definition of Pharmaceutical Services

The Community Pharmacy Contractual Framework (CPCF)⁵ consists of three different types of services provided by pharmacies:

- **Essential services and clinical governance:** provided by all pharmacy contractors and are commissioned by NHS England
- **Advanced services:** which can be provided by all contractors once accreditation requirements have been met and are commissioned by NHS England
- **Locally commissioned (enhanced) services:** commissioned by Local Authorities, CCGs and NHS England in response to the needs of the local population

Essential Services

In total, 82 pharmacies currently provide Essential Services to the people of Sandwell.

A description of all the Essential Services provided by pharmacy contractors is available in **Table 20** below. This includes the Discharge Medicines Service (DMS) which became a new essential service within the CPCF on 15th February 2021.

Table 20. A description of all Essential Services⁶

Service	Description
Dispensing medicines	Pharmacies are required to maintain a record of all medicines dispensed and keep records of any interventions made which they judge to be significant. The Electronic Prescription Service (EPS) is also being implemented as part of the dispensing service.
Dispensing appliances	Whilst the Terms of Service requires a pharmacist to dispense any non-blacklisted medicine “with reasonable promptness”, for appliances the obligation to dispense arises only if the pharmacist supplies such products “in the normal course of business”. Therefore, contractors may choose to dispense appliances as part of their usual business, or they may choose to do so on an ad-hoc basis or not at all.

Repeat dispensing	At least two thirds of all prescriptions generated in primary care are for patients needing repeat supplies of regular medicines. Pharmacists will ensure repeat prescriptions are issued by the GP, ensure each repeat supply is needed, and ascertain that there is no need for the patient to be referred back to their GP. The majority of repeat dispensing is now carried out by EPS which is more efficient.
Clinical governance	Adherence with the clinical governance requirements is part of the Terms of Service set out in Schedule 4 of the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. The clinical governance requirements of the CPCF cover a range of quality related issues including: audit, patient satisfaction surveys, complaints procedures, practice leaflet requirements, patient safety incident reporting, whistle-blowing, and emergency planning.
Promotion of healthy lifestyles	Pharmacies are required to take part in up to six health campaigns per year on topics identified by NHSE&I. All community pharmacy contractors participate in the same campaigns, thus having a greater exposure to the target groups. Wherever possible, the campaigns should support NHSE&I's operational and public health priorities, such as smoking, obesity, and alcohol. In addition, pharmacies are required to undertake prescription-linked interventions on major areas of public health concern, such as encouraging smoking cessation.
Disposal of unwanted medicines	Pharmacies accept and dispose of in a safe manner, all unused and unwanted medicines from individual patients. This does not include medicines from Care Homes.
Signposting	Pharmacies are often the most accessible health care professional and may, at times, need to refer a patient to another health care provider. NHS England will provide pharmacies with lists of sources of care and support in the area. Pharmacists and their staff have an obligation to always signpost whenever it is appropriate to do so.
Support for self-care	This is the provision of advice to help people manage minor ailments, common and self-limiting conditions. The service also covers providing support to those who have long term conditions, to help them derive maximum benefit from caring for themselves. This may also include dealing with referrals from NHS 111.

Discharge Medicines Service	NHS Trusts can refer patients who would benefit from extra guidance around newly prescribed medicines to the DMS at their community pharmacy. The service has been identified by NHSE&I Medicines Safety Improvement Programme to be a significant contributor to the safety of patients during transition of care, by reducing readmissions to hospital.
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Pharmacy contractor questionnaire responses

Overall, 73 (89.0%) out of 82 pharmacy contractors in Sandwell responded to the pharmacy contractor questionnaire. The following data are based on these responses. Note not all pharmacy contractors provided a response to each question, therefore the base number for percentages is based on the number that responded. The pharmacy contractor questionnaire and questionnaire responses can be found in **Appendix 5** and **Appendix 6**, respectively.

Pharmacy accessibility and facilities

- In total, 93.1% of pharmacies are accessible via wheelchair
 - Three pharmacies in Oldbury, one pharmacy in Rowley Regis and one pharmacy in West Bromwich responded no/unsure to wheelchair accessibility
- All pharmacies reported access to parking close to the pharmacy
- 97.3% of pharmacies have a patient consultation room with a consultation room planned for the remaining two pharmacies before April 2023
 - 79.5% of pharmacies have wheelchair accessible consultation rooms
- 91.8% of pharmacies have hand washing facilities within or in close proximity to the consultation room
- Patients have access to toilets at 35.6% of pharmacies
- Panjabi (76.7%), Hindi (58.9%), Urdu (53.4%) and Gujarati (34.2%) are the most frequently reported additional languages spoken by pharmacy staff
- All pharmacies are electronic prescription service (EPS) release 2 enabled, allowing prescriptions to be sent from the GP directly to the pharmacy
- All pharmacies have an active NHS email address enabling sharing of patient identifiable data with other healthcare providers which may be necessary for continuity of care

- 97.3% of pharmacies have access to summary care records which enhances safe prescribing practice

What does this mean for our PNA?

Physical accessibility to pharmacies in Sandwell is high across the borough. All pharmacies in Sandwell should aim to be wheelchair accessible and thus pharmacies currently without wheelchair accessibility to the building itself or within the consultation areas should consider measures to enhance accessibility for wheelchair users. Access to a private consultation room with handwashing facilities will likely become increasingly important as the role of community pharmacists expands to support the growing demand for primary care. Similarly, pharmacies with customer toilets could support additional diagnostic testing such as urinalysis. More than half of pharmacies have staff members that speak Panjabi or Urdu, two of the most frequently spoken languages in Sandwell after English. Whilst this may indicate improved accessibility for non-English speaking residents, the availability of staff members speaking these languages on the day of a visit to a pharmacy may be unpredictable. IT enablement is high across pharmacies in Sandwell, and this is important for improving patient safety and improving continuity of care across the health service.

Advanced Services

There are ten Advances Services within the NHS CPCF which pharmacy contractors can choose to provide if they meet the requirements set out in the Secretary of State Directions. A description of each of these services can be found in **Table 21** below.

At the time of conducting the 2018 PNA, there were only six Advanced Services: Medicines Use Review (MUR), New Medicine Service (NMS), NHS Urgent Medicine Supply Service (NUMSAS), Flu vaccination service, Stoma Appliance Customisation (SAC), and Appliance Use Review (AUR). The MUR service was decommissioned on the 31st March 2021, and NUMSAS has been replaced by the Community Pharmacist Consultation Service (CPCS).

Table 21. A description of all Advanced Services within the NHS CPCF⁷

Service	Description
Appliance Use Review (AUR) service	AUR aims to improve patient knowledge and use of any specified appliance by assessing how the patient uses the appliance, resolving issues of poor usage, advising on safe storage and disposal. AUR can be undertaken by a pharmacist or specialist nurse in the pharmacy, in the patients' home, by telephone or video consultation.
Community Pharmacist Consultation Service (CPCS)	Since the 1 st November 2020, general practices have been able to refer patients for a minor illness consultation via CPCS, once a local referral pathway has been agreed. In addition, the service takes referrals to community pharmacy from NHS 111, Integrated Urgent Care Clinical Assessment Services and in some cases, patients referred via the 999 service. The CPCS aims to relieve pressure on the wider NHS by connecting patients with community pharmacy, which should be their first port of call and can deliver a swift, convenient and effective service to meet their needs.
COVID-19 LFD distribution	This service aims to improve access to COVID-19 testing by making lateral flow device (LFD) test kits readily available at community pharmacies to identify COVID-positive cases in the community and break the chain of transmission. The service works alongside NHS Test and Trace's other COVID-19 testing routes.
Flu vaccination service	Each year from September through to March the NHS runs a seasonal flu vaccination campaign aiming to vaccinate all patients who are at risk of developing more serious complications from the virus. The accessibility of pharmacies, their extended opening hours and the option to walk in without an appointment have proved popular with patients seeking vaccinations. To participate, pharmacies must register their details with NHS England, have a consultation room and appropriately trained staff.
Hepatitis C testing service (Until 31 st Mar 2022)	The service is focused on provision of point of care testing for Hepatitis C antibodies for people who inject drugs but who haven't yet moved to the point of accepting treatment for their substance use. Where people test positive for Hepatitis C antibodies, they will be referred for a confirmatory test and treatment, where appropriate.

Hypertension case finding service	This service will identify people aged 40 and above who have not previously been diagnosed with hypertension and refer those with suspected hypertension to general practice for ongoing management. The service will also promote healthy behaviours to service users.
New Medicine Service (NMS)	This service ensures that patients with a long-term condition have a good understanding of the reason for being prescribed new medicines and how to get the best from them. This in turn will increase adherence. It has been reported that when prescribed a new medicine, two thirds of patients have problems or would like additional information within 10 days, this service is designed to support that need. At first dispensing, the pharmacist has a conversation explaining the new medicine to the patient. They then agree to a follow up conversation by phone or face-to-face around two weeks later to discuss how the patient is getting on with the medicine and to identify any problems. A final consultation is agreed for about a month after initial dispensing to have another check-in. Pharmacies have to provide a quarterly report to NHS England of NMSs conducted.
Pandemic Delivery Service (Until 31 st Mar 2022)	Most community pharmacies already offer a prescription delivery service to some or all patients, either as a free of charge or paid for service. From 16th March 2021 until the 31st March 2022, people who have been notified of the need to self-isolate by NHS Test and Trace are able to access support for the delivery of their prescriptions from contractors.
Stoma Appliance Customisation (SAC) service	This service aims to ensure the proper fitting and comfortable customisation of more than one stoma appliance at any time. This is to improve the duration of use of stoma appliances and reduce waste.
Smoking cessation service (from Jan 2022)	The NHS Long Term Plan set a goal that by 2023/24, all people admitted to hospital who smoke will be offered NHS-funded tobacco treatment services. This service will ensure that patients starting a programme of smoking cessation in hospital are referred for completion in a community pharmacy.

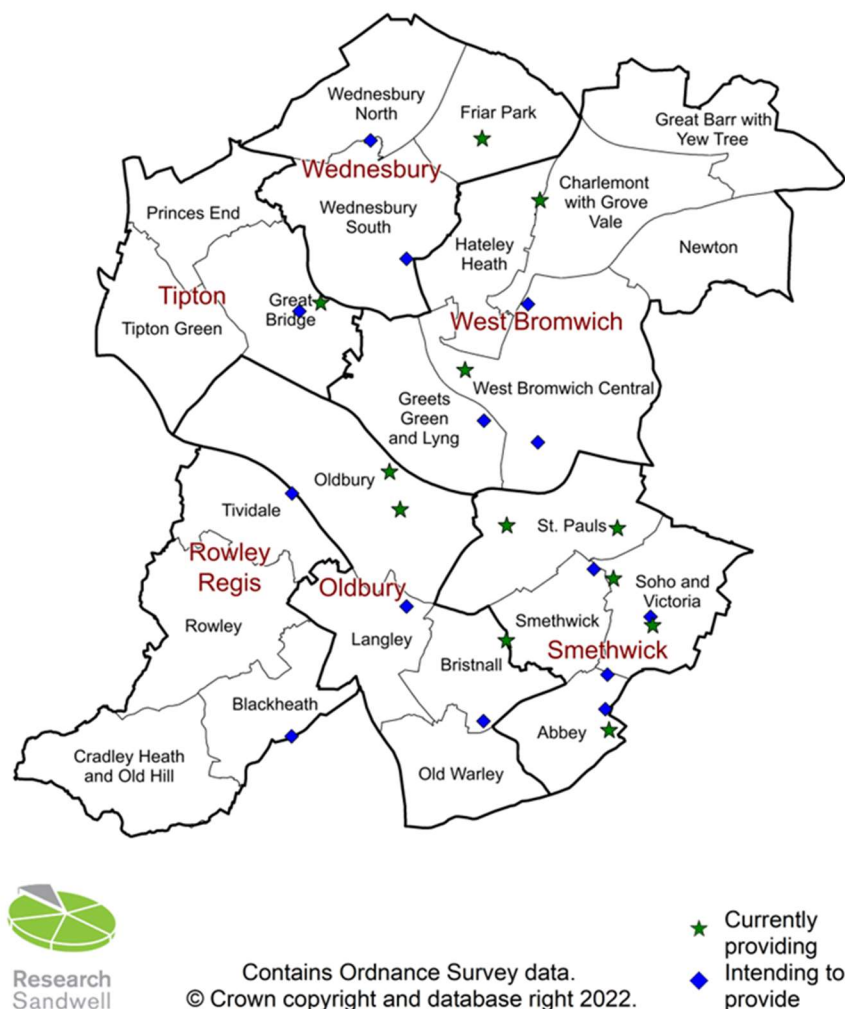
Appliance Use Review (AUR) service

Of the 69 pharmacy contractors that provided a response, 12 (17.4%) pharmacies offer the AUR service, with a further 14 (20.3%) intending to offer the service within the next 12 months. The AUR service is currently available in all localities except Rowley Regis. However, 2 pharmacies in Rowley Regis intend to offer the service in the next year (**Table 22; Figure 12**).

Table 22. Appliance Under Review service provision by locality

			Appliance Use Review service		
		Base	Yes	Intending to begin within next 12 months	No - not intending to provide
Total	Sandwell	69	12	14	43
Locality	Oldbury	13	3	2	8
	Rowley Regis	12	-	2	10
	Smethwick	14	5	4	5
	Tipton	9	1	1	7
	Wednesbury	8	1	2	5
	West Bromwich	13	2	3	8

Figure 12. Provision and intention to provide the Appliance Use Review service by locality and ward



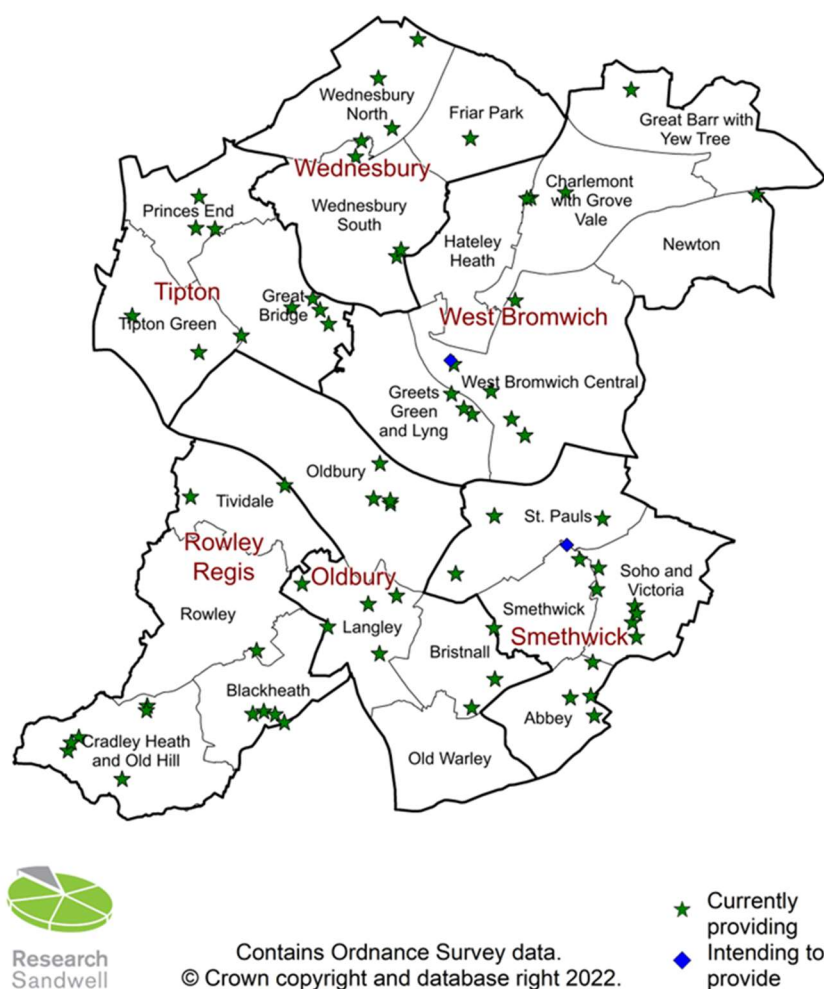
Community Pharmacist Consultation Service (CPCS)

In Sandwell, 70 (95.9%) pharmacies offer the CPCS which accepts referrals to manage minor illness and urgent supply of medicines from general practice and NHS 111. There is excellent coverage of pharmacies in Sandwell supporting and alleviating pressure in the wider NHS (**Table 23; Figure 13**).

Table 23. Community Pharmacist Consultation Service by locality

		Base	Community Pharmacist Consultation Service (CPCS)		
			Yes	Intending to begin within next 12 months	No - not intending to provide
Total	Sandwell	73	70	2	1
Locality	Oldbury	13	12	-	1
	Rowley Regis	13	13	-	-
	Smethwick	15	14	1	-
	Tipton	10	10	-	-
	Wednesbury	8	8	-	-
	West Bromwich	14	13	1	-

Figure 13. Provision and intention to provide the CPCS service by locality and ward



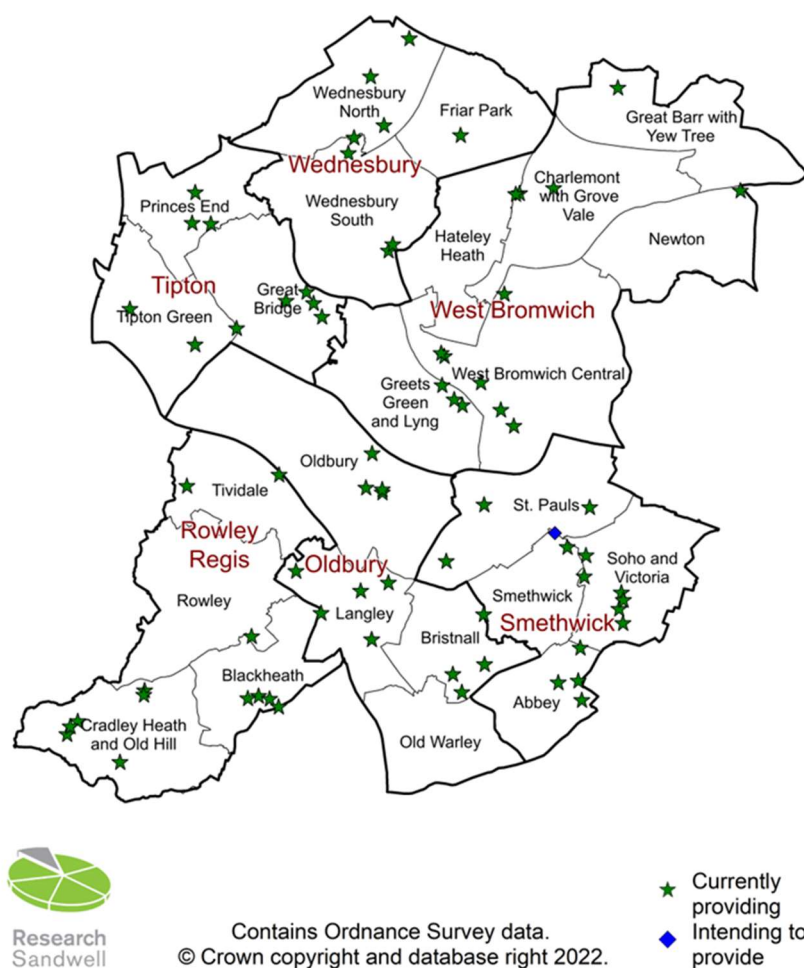
COVID-19 LFD distribution

Overall, 98.6% of pharmacies that responded to the questionnaire are community distributors of COVID-19 LFD test kits which highlights one of the roles pharmacies have played in supporting the pandemic response (**Table 24; Figure 14**).

Table 24. COVID-19 LFD test distribution by locality

		Base	C-19 LFD distribution		
			Yes	Intending to begin within next 12 months	No - not intending to provide
Total	Sandwell	73	72	1	-
Locality	Oldbury	13	13	-	-
	Rowley Regis	13	13	-	-
	Smethwick	15	14	1	-
	Tipton	10	10	-	-
	Wednesbury	8	8	-	-
	West Bromwich	14	14	-	-

Figure 14. Provision and intention to provide the COVID-19 LFD distribution service by locality and ward



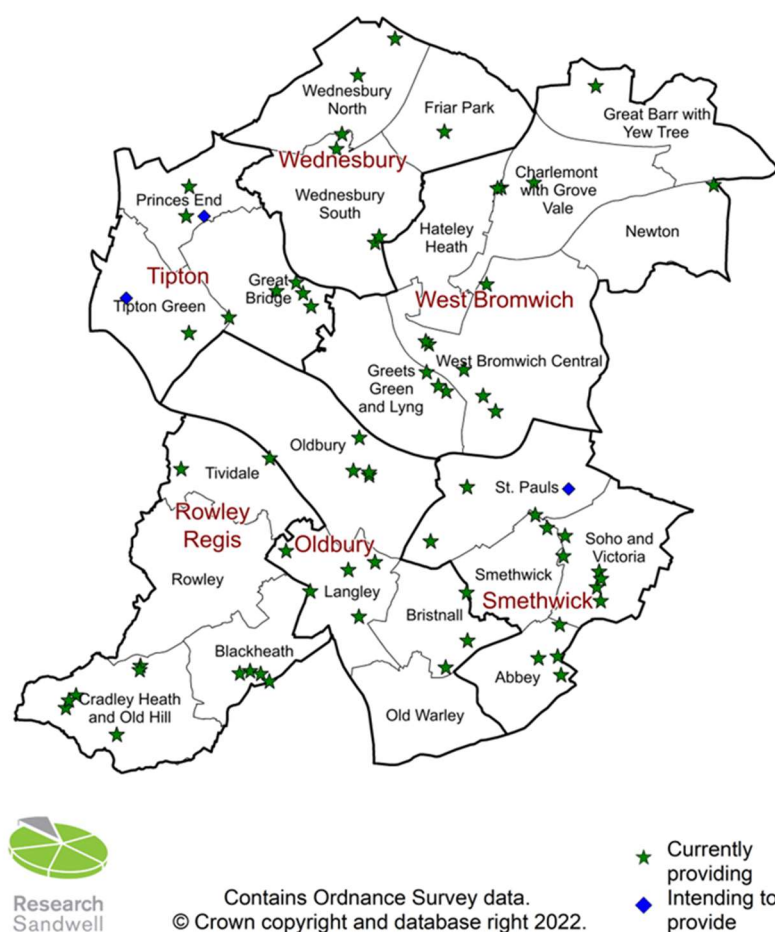
Flu Vaccination Service

In total, 67 (91.8%) of Sandwell pharmacies provide the flu vaccination service with excellent coverage across each locality. Flu vaccination of vulnerable adults and young children is important in reducing the severity of illness and mortality from flu. In the COVID-19 era, this is even more important due to the increased risk of severe illness if COVID-19 and flu are contracted simultaneously. Pharmacies have a key role in the front-line response to communicable disease and accessibility to flu vaccinations is high across the borough (**Table 25; Figure 15**).

Table 25. Flu vaccination Service provision by locality and ward

		Base	Flu Vaccination Service		
			Yes	Intending to begin within next 12 months	No - not intending to provide
Total	Sandwell	73	67	3	3
Locality	Oldbury	13	12	-	1
	Rowley Regis	13	12	-	1
	Smethwick	15	14	1	-
	Tipton	10	8	2	-
	Wednesbury	8	7	-	1
	West Bromwich	14	14	-	-

Figure 15. Provision and intention to provide the flu vaccination service by locality and ward



Hepatitis C testing service

The UK Government is a signatory to the World Health Assembly resolution and World Health Organization (WHO) goal of eliminating Hepatitis C as a major public health threat by 2030. This service is part of NHSE&I's national programme to eliminate Hepatitis C virus by 2025. As the national Hepatitis C Programme is an elimination exercise, the current service will run until the 31st March 2022. There are however plans to recommission the Hepatitis C testing service.

In total, 7 (10.4%) of pharmacies in Sandwell currently provide point of care antibody testing for Hepatitis C. Point of care testing is not currently available in Oldbury or Wednesbury. Provision of point of care testing for Hepatitis C is low in Sandwell and may not be very accessible to those most at risk of Hepatitis C if there is inadequate

sign posting to pharmacies that offer the service, inadequate promotion at pharmacies that do offer the service or if travel costs present an additional barrier. However, Hepatitis C screening is also available to at-risk individuals upon request via a GP or local sexual health service (**Table 26; Figure 16**).

Table 26. Hepatitis C testing service provision by locality

		Base	Hepatitis C testing service (Until 31st March 2022)		
			Yes	Intending to begin within next 12 months	No - not intending to provide
Total	Sandwell	67	7	15	45
Locality	Oldbury	13	-	1	12
	Rowley Regis	13	1	3	9
	Smethwick	13	1	4	8
	Tipton	8	2	4	2
	Wednesbury	7	-	2	5
	West Bromwich	13	3	1	9

Figure 16. Provision and intention to provide the hepatitis C testing service by locality and ward (until 31st March 2022)



Hypertension case finding

Cardiovascular disease (CVD) is one of the leading causes of premature death in England, affecting seven million people and accounting for 1.6 million disability adjusted life years. In England, hypertension is the biggest risk factor for CVD and a key driver of health inequalities, accounting for a 27% gap in life expectancy for men and 24% gap in life expectancy for women between rich and poor population.⁸

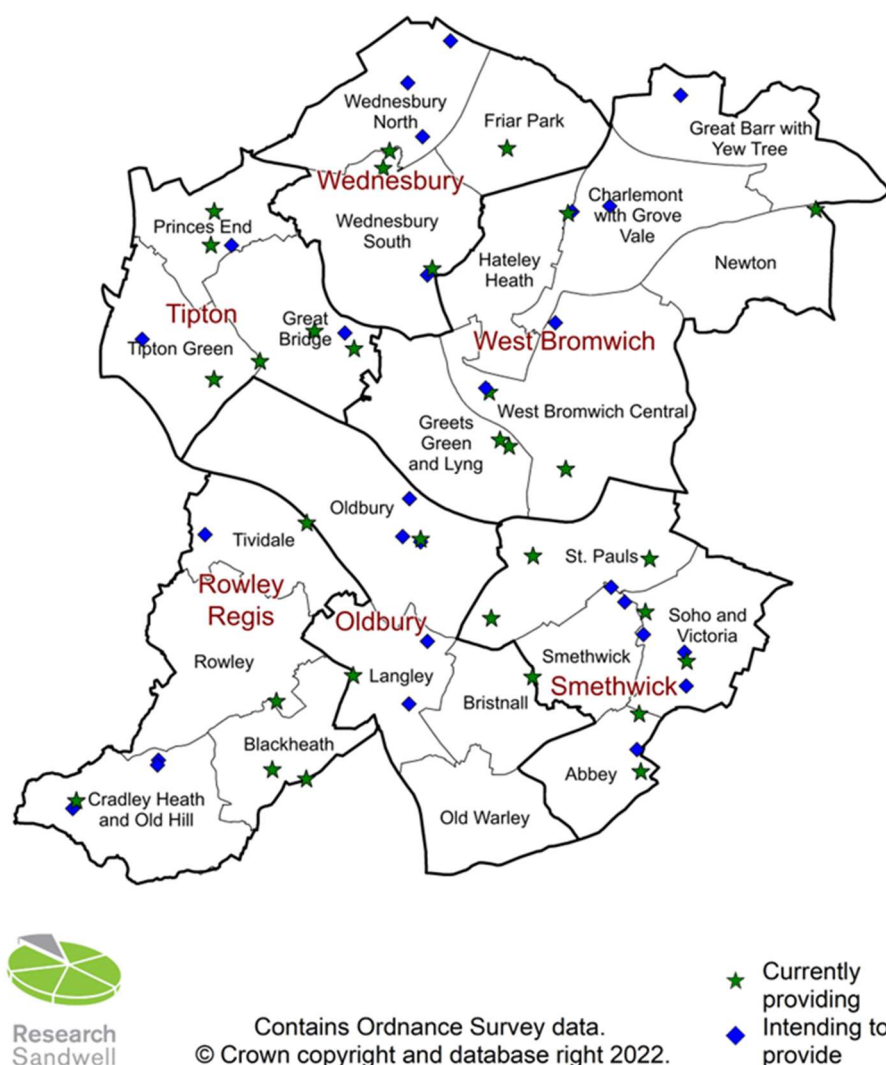
In Sandwell, 31 (43.7%) patient-facing pharmacies offer the hypertension case finding service. With an additional 27 (38.0%) pharmacies intending to offer the service within

the next 12 months. The hypertension case finding service is available in all localities (Table 27; Figure 17).

Table 27. Hypertension case finding by locality

		Base	Hypertension case finding		
			Yes	Intending to begin within next 12 months	No - not intending to provide
Total	Sandwell	71	31	27	13
Locality	Oldbury	13	3	5	5
	Rowley Regis	13	5	4	4
	Smethwick	15	7	6	2
	Tipton	9	6	3	-
	Wednesbury	8	4	4	-
	West Bromwich	13	6	5	2

Figure 17. Provision and intention to provide the hypertension case finding service by locality and ward



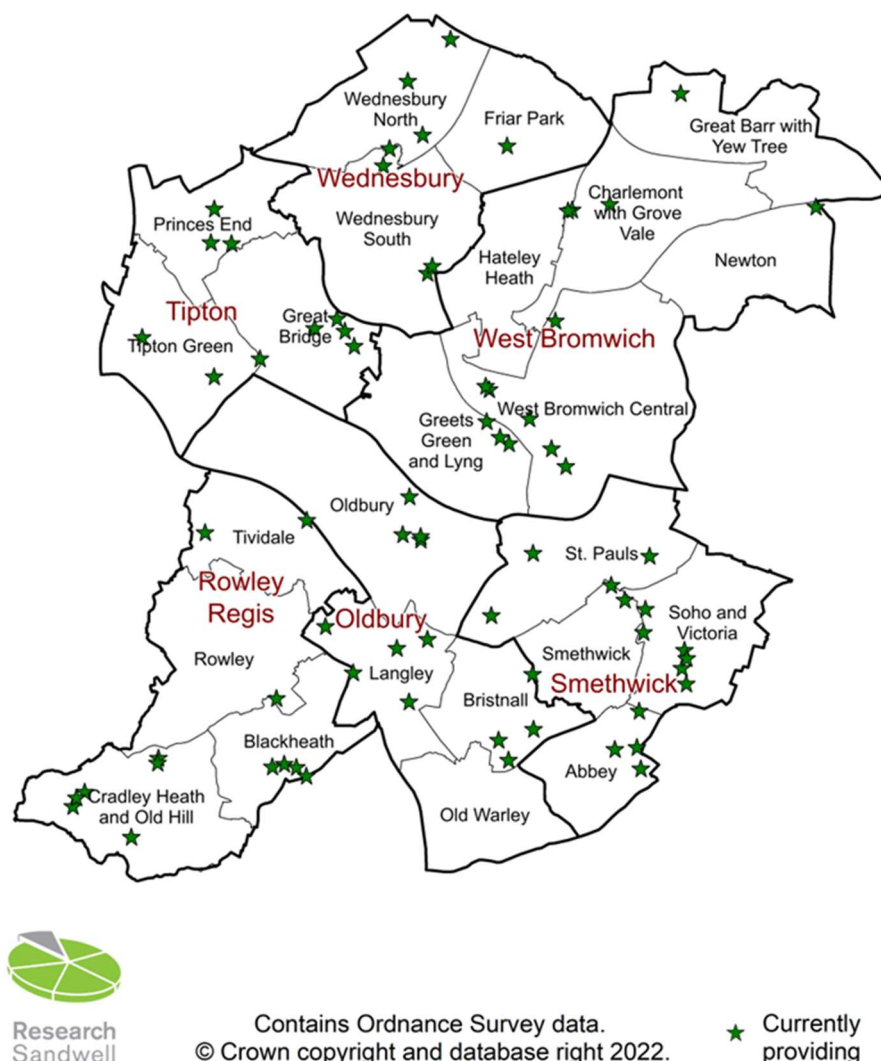
New Medicines Service (NMS)

All patient-facing pharmacies in Sandwell that responded to the questionnaire provide the NMS. The NMS is one of the ways pharmacists can support people with long-term conditions by ensuring they understand why they are on a particular medication and how to take it, thereby enhancing medication adherence (**Table 28; Figure 18**).

Table 28. New Medicines Service provision by locality

		Base	New Medicine Service		
			Yes	Intending to begin within next 12 months	No - not intending to provide
Total	Sandwell	73	73	-	-
Locality	Oldbury	13	13	-	-
	Rowley Regis	13	13	-	-
	Smethwick	15	15	-	-
	Tipton	10	10	-	-
	Wednesbury	8	8	-	-
	West Bromwich	14	14	-	-

Figure 18. Provision and intention to provide the NMS by ward



Pandemic Delivery Service

From the 16th March 2021, people who have been notified of the need to self-isolate by NHS Test and Trace are able to seek support from community pharmacies under the Pandemic Delivery Service. This is part of a package of measures which the Government put in place to support people to self-isolate effectively and reduce the spread of COVID-19. All patient-facing community pharmacies (excludes distance selling pharmacies) are required to ensure that people who have been notified by NHS Test and Trace to self-isolate can receive their prescription medicines and appliances by home delivery during the ten-day self-isolation period, if they are unable to arrange for medicines to be picked up.

In Sandwell, 52 (74.3%) of pharmacies have been able to provide this service to patients who are self-isolating (**Table 29; Figure 19**). However, this service has only been commissioned until the 31st March 2022 and thus may not be a service offered during the lifespan of this PNA.

Table 29. Pandemic Delivery Service provision by locality

		Base	Pandemic Delivery Service (Until 31st March 2022)		
			Yes	Intending to begin within next 12 months	No - not intending to provide
Total	Sandwell	70	52	3	15
Locality	Oldbury	13	9	-	4
	Rowley Regis	13	9	1	3
	Smethwick	15	12	-	3
	Tipton	9	6	2	1
	Wednesbury	8	5	-	3
	West Bromwich	12	11	-	1

Figure 19. Provision and intention to provide the pandemic service by locality and ward (until 31st March 2022)



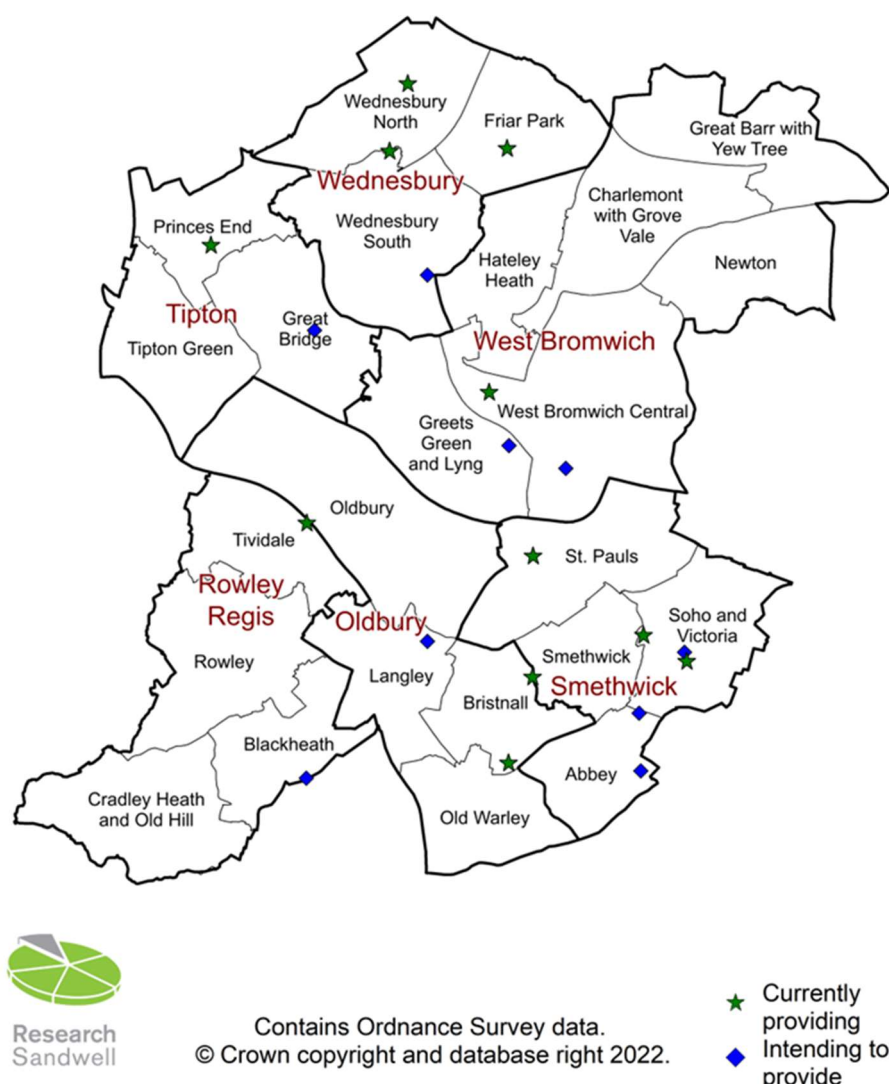
Stoma Appliance Customisation (SAC) service

This service can be provided by pharmacies that normally provide stoma appliances in the normal course of their business. At present, 20 (29.4%) pharmacies either provide or intend to provide the SAC service. At least one pharmacy in each locality currently provides the SAC service (**Table 30; Figure 20**).

Table 30. Stoma Appliance Customisation service provision by locality

		Base	Stoma Appliance Customisation service		
			Yes	Intending to begin within next 12 months	No - not intending to provide
Total	Sandwell	68	11	9	48
Locality	Oldbury	13	2	1	10
	Rowley Regis	13	1	1	11
	Smethwick	13	3	3	7
	Tipton	8	1	1	6
	Wednesbury	8	3	1	4
	West Bromwich	13	1	2	10

Figure 20. Provision and intention to provide the SAC service by locality and ward



Smoking cessation service

In Sandwell, smoking cessation services are commissioned by Sandwell MBC Public Health and provided by a community provider. Pharmacies play a key role in access to nicotine replacement therapy and opportunistic lifestyle advice. Pharmacies are set to play an integral role in supporting smokers who have recently been discharged from hospital and have been commenced on a smoking cessation pathway during admission and need to complete a programme of smoking cessation in the community. At present only 14.3% of pharmacies in Sandwell are able to provide a stop smoking service, however an additional 42.9% of pharmacies are intending to provide this service in the next 12 months (**Table 31; Figure 21**).

Table 31. Smoking cessation service provision by locality

		Base	Stop smoking service (from January 2022)		
			Yes	Intending to begin within next 12 months	No - not intending to provide
Total	Sandwell	70	10	30	30
Locality	Oldbury	13	1	4	8
	Rowley Regis	13	4	4	5
	Smethwick	15	1	10	4
	Tipton	8	2	4	2
	Wednesbury	8	1	4	3
	West Bromwich	13	1	4	8

Figure 21. Provision and intention to provide the smoking cessation service by locality and ward



What does this mean for this PNA?

Pharmacies in Sandwell provide an array of advanced services for residents. There is excellent provision of the CSPA, COVID-19 LFD test distribution service, flu vaccination service and NMS across the borough. Provision of the Hepatitis C point of care testing is low however this service is due to be recommissioned at the end of March 2022. The pandemic delivery service is also to be decommissioned at the end of March 2022, before the publication of this PNA. The AUR service is not currently available in Rowley Regis, however two pharmacies are intending to implement it in the next 12 months so there will be at least one pharmacy in each locality offering this service. At present, at least one pharmacy in each locality offers the SAC service.

Adequate promotion by pharmacies offering this service and signposting of patients with stomas to these pharmacies for enhanced support is recommendable. At present, less than half of pharmacies across the borough offer a hypertension case finding service. However, an additional 38.0% intend to offer the service which will hugely increase coverage. This service is currently available in all localities. The NHS LTP's goal to offer all smokers admitted to hospital an NHS-funded tobacco treatment service and the need for continuity of these smoking cessation programmes on discharge is likely to place an increased demand for smoking cessation support on pharmacies. However, it is anticipated that the current and intended provision of smoking cessation services will be capable of meeting this increase in demand.

Enhanced services

Enhanced services commissioned locally by NHSE in response to the needs of the local population include:

- Extended Care Service
- Specialist Palliative Care Drugs (commissioned jointly with CCG)

Other enhanced services (provided under contract with NHSE&I)

Pharmacies can provide a plethora of enhanced services. At present there is low provision of these services across the borough. However, willingness to provide these services if commissioned is high.

The most frequently provided enhanced services include:

- COVID-19 vaccinations
- Emergency contraceptive service
- Emergency supply services
- Non-emergency contraceptive service
- Home delivery service
- Hypertension
- Medications review service
- Minor ailment scheme
- Needle and syringe exchange service
- Seasonal influenza vaccination service

- Supervised administration service

Locally Commissioned Services

Services may be commissioned at a local level by the CCG and Local Authority Public Health, or indirectly via service providers. These, however fall outside of the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013. However, the PNA should take account of any pharmaceutical services provided to its population (regardless of the commissioning body) which may affect the need for pharmaceutical services in Sandwell.

The following services are commissioned locally by Sandwell and West Birmingham CCG and provided by pharmacy contractors:

- Pharmacy Minor Ailments Scheme
- Specialist Palliative Care Drugs
- COVID-19 Urgent Eyecare Services
- Intravenous Antibiotics Supply Service

The following pharmaceutical services are commissioned by Sandwell MBC Public Health:

- Supervised Consumption of Methadone
- Needle Exchange

Pharmacy Quality Scheme

The Pharmacy Quality Scheme (PQS) forms part of the five-year CPCF for 2019/20–2023/24 and supports the delivery of the NHS Long Term Plan. It rewards community pharmacy contractors that deliver quality criteria in three quality dimensions: clinical effectiveness, patient safety and patient experience.

In response to the COVID-19 pandemic changes had to be made to the PQS 2020/21. The scheme consisted of two parts, the first of which was announced on 13th July 2020. The focus of the Part 1 scheme was to ensure community pharmacy contractors and their teams had put in place all reasonable measures to respond to the COVID-19 pandemic, protecting both themselves and the people using their services.⁹ The

Part 1 scheme consisted of 14 requirements (e.g. display of COVID-19 posters, and completion of a COVID-19 infection control risk assessment) that must be completed in order for a pharmacy to claim a payment and be able to access the Part 2 scheme.

The Part 2 scheme commenced on the 1st October 2020 and was also focused on the response to and recovery from the pandemic. The PQS 2020/21 was developed to incentivise quality improvement in five domains that supported the COVID-19 response.

The five domains were as follows:

- Domain 1 - Infection Prevention & Control and Antimicrobial Stewardship (AMS)
- Domain 2 - Prevention
- Domain 3 - Risk Management
- Domain 4 - Primary Care Network (PCN) – Prevention
- Domain 5 - PCN - Business continuity

The PQS payment was dependent on how many of the domains the pharmacy met, and in which band the pharmacy was placed (based on its total prescription volume in 2019/20).

The PQS 2020/21 declaration data included 78 Sandwell pharmacies, of which 74 pharmacies were still active as of the 9th March 2022.

- Overall, 69 pharmacies (88.5%) achieved the maximum amount of points available to them across all five domains
- 77 pharmacies (98.7%) achieved the maximum points available to them in the domains of Infection Prevention & Control and AMS, Prevention, and Risk Management
- 70 pharmacies (89.7%) achieved the maximum points available to them in the PCN Prevention domain
- 76 pharmacies (97.4%) achieved maximum points available to them in the PCN Business Continuity domain

On 12th August 2021, a new PQS was announced for the remainder of 2021/22. The new scheme incentivises quality improvement in areas that support the

COVID-19 response by including criteria that improve patient safety and health outcomes whilst addressing health inequalities. This scheme officially began on 1st September 2021 and focuses on NHS priorities supporting recovery from COVID-19.

The PQS 2021/22 has 7 domains and they are:

- Domain 1 - Medicines safety and optimisation
- Domain 2 – Respiratory
- Domain 3 – Digital
- Domain 4 - Primary Care Networks
- Domain 5 – Prevention
- Domain 6 - Addressing unwarranted variation in care
- Domain 7 - Healthy living support

The PQS 2021/22 declaration data included 73 Sandwell pharmacies and all 73 were still active at 27th July 2022.

- Overall, 49 pharmacies (67.1%) achieved the maximum amount of points available to them across all seven domains
- 73 pharmacies (100%) achieved the maximum amount of points available to them in the Medicines safety and optimisation domain.
- 72 pharmacies (98.6%) achieved the maximum amount of points available to them in the Respiratory domain.
- 73 pharmacies (100%) achieved the maximum amount of points available to them in the Digital domain.
- 60 pharmacies (82.2%) achieved the maximum amount of points available to them in the Primary Care Networks domain.
- 71 pharmacies (97.3%) achieved the maximum amount of points available to them in the Prevention domain.
- 73 pharmacies (100%) achieved the maximum amount of points available to them in the Addressing unwarranted variation in care domain.
- 60 pharmacies (82.2%) achieved the maximum amount of points available to them in the Healthy living support domain.

Healthy Living Pharmacy

The Healthy Living Pharmacy (HLP) framework is aimed at achieving consistent provision of a broad range of health promotion interventions through community pharmacies to meet local need, improving the health and wellbeing of the local population and helping to reduce health inequalities. In 2020–21 as agreed in the 5-year CPCF, it is now an Essential Service requirement for community pharmacy contractors to become a HLP.

Overall, 56 (78.9%) pharmacies that responded to the questionnaire have achieved HLP status and a further 16.9% are currently working towards HLP status (**Table 32**). There is good availability of pharmacies with HLP status at a locality level. The findings from the 2018 PNA indicate that 65 pharmacies were accredited HLPs. The lower proportion of accredited HLP pharmacies in the 2022 PNA is likely due to the lower questionnaire response rate.

Table 32. Provision of Healthy Living Pharmacy status at locality and ward level

	Base	Healthy Living Pharmacy		
		This pharmacy has achieved HLP status	This pharmacy is working towards HLP status	This pharmacy has no plans to implement HLP status
Bristnall	3	1	2	-
Langley	5	3	2	-
Old Warley	-	-	-	-
Oldbury	4	4	-	-
Oldbury	12	8	4	-
Blackheath	4	4	-	-
Cradley Heath and Old Hill	6	6	-	-
Rowley	-	-	-	-
Tivdale	2	2	-	-
Rowley Regis	12	12	-	-

Abbey	4	3	1	-
Smethwick	2	2	-	-
Soho and Victoria	6	5	-	1
St Pauls	3	2	-	1
Smethwick	15	12	1	2
Great Bridge	5	4	1	-
Princes End	3	-	2	1
Tipton Green	2	1	1	-
Tipton	10	5	4	1
Friar Park	1	1	-	-
Wednesbury North	4	4	-	-
Wednesbury South	3	2	1	-
Wednesbury	8	7	1	-
Charlemont with Grove Vale	3	2	1	-
Great Barr with Yew Tree	1	-	1	-
Greets Green and Lyng	3	3	-	-
Hateley Heath	-	-	-	-
Newton	1	1	-	-
West Bromwich Central	6	6	-	-
West Bromwich	14	12	2	-
Sandwell	71	56	12	3

Impacts of COVID-19

In the 2022 PNA, pharmacy contractors were asked about the impacts of COVID-19 on the accessibility and provision of pharmaceutical services to understand how services have changed in response to COVID-19 and what the impact of this might be on Sandwell residents. Full results by locality are available in **Appendix 6**.

- Overall, 54.9% of pharmacies are offering more services to residents than before the pandemic and only 15.5% of pharmacies have reduced their service availability
- The pandemic has led to a change in how services are delivered with some services moved online or over the phone. 27.1% of responding pharmacies reported that some face-to-face services have been stopped without delivery by another route (**Table 33**)
- Some pharmacies responded to the pandemic by amending their opening hours. However, as of the 31st March 2022 all pharmacies will be required to return to their normal operating hours
- Over half (54.2%) of pharmacies reported that waiting times for medicine dispensing had increased and 49.3% of pharmacies reported that waiting times for other services had also increased
- Most pharmacies (95.8%) reported that patients are relying more on pharmacy services than before the pandemic and that demand for pharmacy services has increased

The above findings highlight how pharmacies have responded to the change in needs and demand due to COVID-19. Some of these changes, such as amended opening hours, have been transient and will be unlikely to impact service provision for the lifespan of this PNA. Some changes, such as delivery of services online or over the phone may impact accessibility to pharmacy services in the future. Should these changes become permanent, it is likely that some residents will find online and telephone options enhance accessibility whereas for others it reduces accessibility. Pharmacy self-reported increased waiting times correlates with the felt increase in demand being placed on pharmacy contractors. It will be important to consider future workforce capacity building and contingency planning to ensure pharmacies are able to continue to meet this increased demand.

Table 33. How COVID-19 has affected the delivery of services by locality

Counts	Total	Locality					
Break %							
Respondents		Oldbury	Rowley Regis	Smethwick	Tipton	Wednesbury	West Bromwich
Base	59	8	12	14	10	6	9
Some of our face-to-face services have moved online	12	1	4	2	3	1	1
	20.3%	12.5%	33.3%	14.3%	30.0%	16.7%	11.1%
Some of our face-to-face services have moved to over the phone	42	7	7	12	5	5	6
	71.2%	87.5%	58.3%	85.7%	50.0%	83.3%	66.7%
Some of our face-to-face services have been stopped (not delivered by another route)	16	1	3	3	3	2	4
	27.1%	12.5%	25.0%	21.4%	30.0%	33.3%	44.4%
For face-to-face services we have stopped we are always able to sign post the patient to another provider offering this service	10	1	3	1	4	1	-
	16.9%	12.5%	25.0%	7.1%	40.0%	16.7%	-

Chapter 5

Public Experiences of Sandwell Pharmacies

The process

The views of Sandwell residents on the accessibility and provision of local pharmacy services were sought through public engagement activities conducted from December 2021 to January 2022. Public opinion was sought via the following channels:

- Patient Participation Groups and community groups via Healthwatch Sandwell
- Promoted via the Healthwatch Sandwell website, Twitter and Facebook accounts
- Sandwell Council and 'Healthy Sandwell' Twitter and Facebook accounts
- Promotion via Sandwell Deaf Community Association
- Sandwell Council Press releases
- Promotion in Sandwell Residents weekly electronic Newsletter and Weekly Staff Roundup
- Promotion and distribution supported by members of Sandwell Council including the Public Health Development Officers, Volunteer Sector Support Team, and Councillors

Enhancing inclusivity

Review of the public responses received for the 2018 PNA highlighted a lack of diversity in responses, with most responses coming from females, adults aged 35–54 years, and White British residents. Discussions with community leaders further emphasised the need to enhance inclusivity so that the responses received are more representative of the Sandwell population. Therefore, in response to community leader feedback, the survey was translated into the four other main languages spoken in Sandwell (Urdu, Bengali, Panjabi, and Polish), and a British Sign Language video was created to support the deaf community. An easy reader version of the online survey was also generated to support residents with visual impairments. Paper copies of the electronic survey were also made available for older residents or those without internet access.

The results

In total, 168 public survey responses were received.

- 73.3% of respondents were female
- Most responses (30.9%) came from the 55–64 years age group; and 35.8% of respondents were aged ≥65 years. Responses were lowest for adults under 35 years (3.0%)
- 90.3% of respondents described themselves as White British, and 7.5% were from BME communities
- 47.6% of respondents were currently in work, 7.8% were full-time parents or carers, and 39.8% were retired
- 66.0% of respondents were married/cohabiting, 17.9% were single, and 16.1% were divorced/widowed
- 84.2% of responses were from adults that identify as heterosexual, and 3.9% of responses were from adults that identify as lesbian, gay or bisexual
- 60.2% of respondents reported having a long-term physical or mental health condition (lasting >12 months), of which the majority reported their condition affected their ability to perform day-to-day activities either a little (44.9%), or a lot (33.7%)
- 99.4% of survey responses were completed in English, and one survey (0.6%) was completed in Bengali

The public survey is available in **Appendix 7** and the full results are available in **Appendix 8**. Here a summary of key findings is presented.

- Overall, 64.0% of respondents were satisfied or very satisfied with their local pharmacy services
- The most frequently reported reasons for choice of pharmacy used were location near home (59.4%), location near local GP surgery (53.9%), and availability of an electronic prescription service (45.5%)
- More than half of respondents travel by car (57.9%) to their local pharmacy, almost a third (32.3%) walk, and 7.9% take public transport
- Almost half (49.1%) of respondents visit their pharmacy monthly, 78.0% visit during normal working hours (weekdays 9am–6pm), 16.5% normally visit during extended

weekday hours (weekdays 6am–9am, and 6pm–11pm), and 5.5% normally visit on a Saturday

- Outside of normal working hours, respondents reported they would find it most useful to be able to access a pharmacy on a Saturday between 9am–6pm, or Sunday 10am–2pm
- Two thirds respondents (66.4%) felt they could find an open pharmacy when needed
- Most respondents (75.3%) felt they could find a pharmacy in a location that suited them
- Less than half of respondents (39.2%) felt they could find a pharmacy open on the evening after 6pm
- Whilst 74.5% of respondents were aware pharmacists can provide information and advice on medicines, only 34.8% were aware that pharmacists can provide lifestyle advice
- Only 27.1% of respondents were aware a pharmacist could sign post them to another health service if needed
- Awareness of the range of services offered by local pharmacies was generally low; more than half of participants were aware of or had previously used the minor ailments service, vaccinations, NHS repeat prescriptions, and disposal of unwanted medicines
- Pharmacy services respondents would most like to see available included: NHS phlebotomy services, cholesterol testing, blood pressure testing and NHS health checks

Impact of COVID-19 on access to pharmacy services

- Overall, 78.2% of respondents felt access to their local pharmacy has not changed
- For 25.9% of respondents, COVID-19 has changed how they collect their medication:
 - 54.8% reported their GP now sends prescriptions electronically to the pharmacy
 - 31.0% use the prescription delivery service, and
 - 21.4% have a friend or family member collect their medication for them

- Overall, 77.9% of respondents felt that changes to pharmacy opening hours during the pandemic did not affect their accessibility
 - 11.7% reported the move of face-to-face services they use to online/telephone which improved access
 - 9.7% felt that reduced opening hours made accessing the pharmacy more difficult
 - 9.4% of respondents have started using pharmacy services which they didn't use before the pandemic
 - 2.4% of respondents reported a service they previously used has been stopped due to COVID-19 (these services were the minor ailments service, NHS Health checks, smoking cessation services, and blood pressure monitoring)
-

It is important to note when interpreting the findings from the residents' survey that whilst there was a focus on increasing inclusivity in survey responses, the demographic characteristics of respondents are not representative of the Sandwell borough and the total number of responses, although over 50% greater than the previous PNA, is still a small sample size.

Whilst most respondents felt they could find an open pharmacy at a location that suits them, the responses suggest a possible demand for more weekend opening hours. Pharmacies provide a whole host of services to support patients, many of which respondents were not aware of. This suggests a need to promote the wider roles of pharmacists in supporting Sandwell residents.

The results show that most respondents did not feel COVID-19 had negatively impacted accessibility to pharmacies or provision of pharmaceutical services. One in ten respondents reporting using pharmaceutical services during the pandemic that they hadn't previously used. This may represent the ongoing and future role of pharmacies in alleviating the pressures in primary care.

Chapter 6

Future Pharmaceutical Service Development

The future

Local pharmaceutical services should be assessed in the context of national and local healthcare strategies which may affect their implementation and delivery. The most relevant national and local policies and strategies which take effect during the lifespan of this PNA include:

- Community Pharmacy Contractual Framework 2019–24
- NHS Long Term Plan (LTP)

The most relevant local strategy to take effect during the lifespan of this PNA is The Sandwell Plan 2020–25 which aims to support the achievement of Sandwell's Vision 2030. Sandwell's Vision 2030 will also guide the new HWBB strategy and development of future joint strategic needs assessments (JSNA's) for which the HWBB are responsible for.

Community Pharmacy Contractual Framework 2019–24¹⁰

The Department of Health and Social Care, NHSE&I, and the Pharmaceutical Services Negotiating Committee have agreed a new Community Pharmacy Contractual Framework. The joint document describes a vision for how community pharmacy will support delivery of the NHS LTP. The deal:

- Commits almost £13 billion to community pharmacy through its contractual framework recognising the contribution that community pharmacies make towards the delivery of the NHS LTP
- Is in line with the GP contract, providing 5-year stability and reassurance to community pharmacy
- Builds upon the reforms started in 2015 with the introduction of the Quality Payments Scheme to move pharmacies towards a much more clinically focused service
- Confirms community pharmacy's future as an integral part of the NHS, delivering clinical services as a full partner in local Primary Care Networks

- Describes new services which will be offered through community pharmacy including the new national NHS Community Pharmacist Consultation Service
- Underlines the critical role of community pharmacy as an agent of improved public health and prevention, embedded in the local community
- Recognises that an expanded service role is dependent on optimising the use of pharmacist capacity, and will maximise the opportunities of automation and developments in information technology
- Continues to prioritise quality in community pharmacy and to promote medicines safety and optimisation
- Underlines the necessity of protecting access to local community pharmacies through a Pharmacy Access Scheme; and
- Commits to reforms to reimbursement arrangements to deliver smoother cash flow, and fairer distribution of medicines margin and better value for money for the NHS

NHS LTP

As medicine advances, health needs change and society develops, the NHS has to continually move forward so that in 10 years time we have a service fit for the future. The NHS LTP is a new plan for the NHS to improve the quality of patient care and health outcomes.¹¹ The plan focuses on building an NHS fit for the future by enabling everyone to get the best start in life, helping communities to live well, and helping people to age well. The NHS LTP covers the following areas:

1. A new service model for the 21st century
2. More NHS action on prevention and health inequalities
3. Further progress on care quality and outcomes
4. NHS staff will get the backing they need
5. Digitally-enabled care to go mainstream across the NHS
6. Taxpayers' investment to be used to maximum effect
7. Next steps

The ways in which local pharmaceutical services can support the implementation of the NHS LTP are shown in **Table 34** below.

Table 34. The role of pharmaceutical services in the implementation of the NHS LTP¹¹

Key areas of action for the NHS LTP

1. A new service model for the 21st century

- Over the next five years, every patient will have the right to online 'digital' GP consultations
- New expanded community health teams will be required under new national standards to provide fast support to people in their own homes as an alternative to hospitalisation
- The LTP sets out action to ensure patients get the care they need, fast, and to relieve pressure on A&Es
- Building on recent gains, in partnership with local councils further action to cut delayed hospital discharges will help free up pressure on hospital beds

The clinical role of community pharmacists will be enhanced, and pharmacists will support the timely discharge of patients from hospital through the Discharge Medicines Service, freeing up bed capacity

2. More NHS action on prevention and health inequalities

- Wider action on prevention will help people stay healthy and also moderate demand on the NHS
- The LTP funds evidence-based NHS prevention programmes, including to cut smoking; to reduce obesity, to limit alcohol-related A&E admissions; and to lower air pollution
- NHSE will base its five-year funding allocations to local areas on more accurate assessment of health inequalities and unmet need and every local area across England will be required to set out specific measurable goals and mechanisms by which they will contribute to narrowing health inequalities over the next five and ten years

Local pharmacies actively promote healthy lifestyle initiatives on NHSE&I's public health priority areas e.g. smoking, obesity, and alcohol, as well as providing opportunistic prescription-linked support

3. Further progress on care quality and outcomes

- The LTP goes further than the NHS Five Year Forward View's focus on cancer, mental health, diabetes, multimorbidity and healthy ageing including dementia. It also extends its focus to children's health, cardiovascular and respiratory conditions, and learning disability and autism, amongst others.
- By 2028 the Plan commits to dramatically improving cancer survival, partly by increasing the proportion of cancers diagnosed early, from a half to three quarters

Local pharmacies often serve as the first point of contact between a patient and the health service, and local pharmacists possess the clinical knowledge to be able to signpost patients to an appropriate service. Pharmacists can therefore support the early detection and

improved survival from serious conditions by signposting patients to the appropriate service perhaps earlier than they would have presented without speaking to a pharmacist

4. NHS staff will get the backing they need

- The LTP sets out action to expand the number of nursing and other undergraduate places, ensuring that well-qualified candidates are not turned away as happens now
- To support current staff, more flexible rostering will become mandatory across all trusts, funding for continuing professional development will increase each year, and action will be taken to support diversity and a culture of respect and fair treatment

Local pharmacies serve as training locations for pharmacy students and newly qualified pharmacists thus ensuring the resilience of the future workforce

5. Digitally-enabled care to go mainstream across the NHS

- Over the next ten years investments in upgrading technology and digitally enabling care will result in an NHS where digital access to services is widespread. Where patients and their carers can better manage their health and condition. Where clinicians can access and interact with patient records and care plans wherever they are, with ready access to decision support and artificial intelligence, and without the administrative hassle of today

100% of pharmacies in Sandwell have access to the Electronic Prescription Service and 97.2% have Summary Care Record Access. Sandwell community pharmacies demonstrate high readiness for digitally enabled care included the continuity of care between primary care and community pharmacy

6. Taxpayers' investment to be used to maximum effect

- In order to deliver for taxpayers, the NHS will continue to drive efficiencies – all of which are then available to local areas to reinvest in frontline care. The Plan lays out major reforms to the NHS' financial architecture, payment systems and incentives

Community pharmacies support the NHS LTP to maximise efficient use of taxpayers' investment through repeat dispensing, most of which is carried out by the Electronic Prescription Service. This increasingly automated process helps ensure that repeat supplies are actually needed thus avoiding wastage

7. Next steps

- Within the current legal framework, the NHS and our partners will be moving to create Integrated Care Systems (ICSs) everywhere by April 2021, building on the progress already made. ICSs bring together local organisations in a pragmatic and practical way to deliver the 'triple integration' of primary and specialist care, physical and mental health services, and health with social care. They will have a key role in working with Local Authorities at 'place' level, and through ICSs, commissioners will make shared decisions with providers on population health, service redesign and LTP implementation

Community pharmacies will form part of the ICS and can support patients during transitions of care such as when discharged from hospital.

Sandwell Vision 2030

Sandwell has a clear vision for what the borough should look and feel like by 2030.¹² In 2030, Sandwell should be a thriving, optimistic and resilient community. A place that people are proud to call home and choose to bring up their families. A place where people feel safe, enjoy good health, feel connected and valued in Sandwell's neighbourhoods and communities. This vision will be achieved through ten ambitions:

1. Sandwell is a community where our families have high aspirations
2. Sandwell is a place where we live healthy lives and live them for longer
3. Our workforce and young people are skilled and talented
4. Our children benefit from the best start in life and high-quality education
5. Our communities are built on mutual respect and taking care of each other
6. We have excellent public transport that connect us to the wider region
7. We have new homes in attractive neighbourhoods to meet housing needs
8. Our distinctive towns are successful centres of community life
9. Sandwell has become a location of choice for industries of the future
10. Sandwell has a national reputation for getting things done

Sandwell pharmacies will play a vital role in achieving ambition 2 'living healthy lives for longer'. Pharmacy teams are easily accessible, clinically knowledgeable and are often the first point of contact between residents and the health service. Pharmacy teams can support lifestyle changes and perform early screening activities to reduce the burden of disease caused by modifiable risk factors.

The Sandwell Plan 2020–25 'Big plans for a Great Place'

This Sandwell Plan 2020–25¹³ is the council's 5-year business plan which is not intended to provide an exhaustive list of everything Sandwell does as a council but sets out those outcomes that are strategically important for delivering Vision 2030. Big

plans for a Great Place sets out six strategic outcomes which will provide the framework for delivery plans:

1. The best start in life for children and young people
2. People live well and age well
3. Strong, resilient communities
4. Quality homes in thriving neighbourhoods
5. A strong and Inclusive Economy
6. A connected and accessible Sandwell

Again, local pharmacies will play a key role in achieving outcome 2, helping 'people live well and age well'. A priority for this outcome is to join up health and social care so that people don't fall through the cracks and don't stay in hospital longer than they need to. Local pharmacies have a key role in supporting patients at points of transition of care such as when discharged from hospital.

Sandwell's HWBB strategy and JSNA's

This year the HWBB is working on a refresh of its Joint Health and Wellbeing Strategy.² The board are thinking about what this could look like and will be asking local people, partners and providers of services to develop and review it with them later in the year. The current priorities set out in the Joint Health and Wellbeing Strategy 2016–20 are:

- To help keep people healthier for longer,
- To help keep people safe and support communities,
- To work together to join up services, and
- To work closely with local people, partners and providers of services

The aim of JSNAs is to improve the health and wellbeing of the local community and reduce inequalities for all ages. The Board is currently working on a refresh of its JSNA which will demonstrate what the current and future health and social care needs of people in Sandwell are. The board are refreshing the needs assessment to reflect the borough Vision for 2030 and its ambitions; focusing on what's strong not what's wrong.

The PNA should take into consideration the local health priorities set out by the HWBB and local health needs as identified in local JSNAs. The new HWBB strategy and

future JSNA's will take effect during the lifespan of this PNA. Therefore, it is recommendable that this PNA is reviewed once the new strategy is in place to ensure local pharmaceutical needs will still be met.

Conclusion

Pharmacies play an integral role in supporting the health needs of Sandwell residents. There are more pharmacies in Sandwell per 10,000 population compared with the England average, with most residents within a 15-minute walking distance of a pharmacy and all residents within a 20-minute travel via public transport to a local pharmacy. There are numerous pharmacies within each locality with extended opening hours covering weekday early mornings and evenings, Saturdays and Sundays. No geographic gaps in service provision have been identified in this PNA.

There is good availability of advanced services across the borough and once pharmacies that are intending to offer services transition into pharmacies offering these services, this will further enhance the accessibility of these services. Pharmacies should be knowledgeable of which advanced services are provided by other pharmacies within the borough in order to sign post patients to service providers when needed.

This PNA has found that the provision of enhanced services such as diabetes screening, blood pressure and cholesterol checks, diabetes management and smoking cessation service is low across the borough, however willingness to provide these services if commissioned is high. Pharmacies have a key front-line role in supporting patients with chronic illness and providing healthy lifestyle advice. Yet the results from the residents' survey indicate that only one third of respondents were aware that pharmacists could provide lifestyle advice. The role of pharmacies in the management of CVD risk factors could be strengthened through the commissioning of related services and by promoting the wider role of pharmacists to residents.

Sandwell has a larger proportion of under 16-year olds compared with the England average and also has a higher rate of teenage conceptions compared with the national average. Only 25 pharmacies responded stating they are commissioned to provide

emergency contraception for free without prescription to under 18-year olds; this included 14 under contract with NHSE&I, 8 under contract with Sandwell MBC, and 3 under contract with Sandwell & West Birmingham CCG. None of these services were in Tipton. However, a further 32 pharmacies said that they would provide this service if commissioned to do so. Whilst emergency contraception can either be purchased from other pharmacies or obtained for free with a prescription for those under 18 years old, the lack of free emergency contraception without prescription for under 18-year olds in all localities highlights a gap in the provision of this service. Ensuring young people are aware of where they can access emergency hormonal contraception for free without prescription and appropriate sign posting of those requesting emergency contraception to their GP to access non-emergency contraception is vital for supporting young women. Future PNAs should consider different channels for engaging with young people to gain their opinions about pharmacy services.

Pharmacy contractors and Sandwell residents were asked about the impacts of COVID-19 on accessibility and provision of pharmaceuticals services. Many pharmacy contractors have responded to the pandemic by offering additional services and by moving some face-to-face services to online or over the phone. Pharmacies reported that patients are relying on pharmacies more than before the pandemic and this is reflected in the reported increased waiting times for dispensing and other services. The need for workforce capacity building should be considered to ensure pharmacies can continue to meet the additional demands placed upon them.

Overall, the results from the residents' survey indicate that most respondents did not feel COVID-19 had negatively impacted accessibility to pharmacies or provision of pharmaceutical services. One in ten respondents reporting using pharmaceutical services during the pandemic that they hadn't previously used. This may represent the ongoing and future role of pharmacies in alleviating the pressures in primary care. A small proportion of respondents reported services they use have been stopped since the pandemic which is in keeping with the pharmacy contractor responses. It is essential that pharmacies that have stopped services are able to sign post patients to another service provider.

Resident responses regarding general pharmacy accessibility and service provision show that whilst most felt they could find an open pharmacy at a location that suits

them, the responses suggest a possible demand for more weekend opening hours. Pharmacies provide a whole host of services to support patients, many of which respondents were not aware of suggesting a need to promote the wider roles of pharmacists in supporting Sandwell residents. It is important to note that these conclusions are drawn from a small sample of Sandwell residents which are not representative of the demographics of Sandwell's population. In particular, young adults, males, and BME communities are underrepresented in the responses. Thus, this report recommends that further targeted engagement of underrepresented groups is undertaken to ensure needs are currently being met.

This PNA concludes that there are sufficient pharmacies serving the Sandwell population with good accessibility via walking or public transport. Whilst there are pharmacies in each locality open on the weekends, the results suggest a possible demand for greater access to pharmacies at the weekends. There is good availability of advanced services across the borough. In general, the wider services offered by pharmacists such as offering lifestyle advice should be promoted to raise awareness of the wider roles of pharmacists in supporting residents' health needs. The results suggest that residents' pharmaceutical needs can be met by the existing network of community pharmacies however further targeted engagement of groups underrepresented in the residents' survey is recommended to ensure needs are being met.

This report makes the following recommendations to strengthen the provision of pharmaceutical services in Sandwell:

- Pharmacies should be knowledgeable of which advanced and enhanced services are offered by pharmacies in neighbouring wards/localities in order to sign post patients to appropriate service providers when needed
- Where a service has been stopped due to COVID-19, it is important that pharmacies can sign post residents to another service provider
- Pharmacies should support young people in accessing emergency contraception by ensuring they are aware of where they can access this service for free without a prescription. Pharmacies should support young people seeking emergency

contraception by signposting them to their GP to discuss non-emergency contraceptive options

- The role of pharmacies in the management of CVD risk factors could be strengthened through the commissioning of related services and by promoting the wider role of pharmacists (e.g. providing lifestyle advice) to residents
- Pharmacy workforce capacity building should be considered in order to meet the additional demands for pharmaceutical services
- Further targeted engagement of groups underrepresented in the residents' survey is recommended to ensure needs are currently being met

Chapter 7

Consultation

A 60-day statutory consultation period was held between the 5th of May to the 8th July 2022 to enable stakeholders to review and comment on the draft PNA. The draft PNA was shared with the following stakeholders:

- Sandwell Local Pharmaceutical Committee
- Sandwell residents
- Neighbouring Local Pharmaceutical Committees of Dudley, Wolverhampton, Walsall, and Birmingham
- Sandwell and West Birmingham Clinical Commissioning Group
- Sandwell pharmacy contractors
- Sandwell Healthwatch and other patient groups
- NHS England
- Neighbouring Health and Wellbeing Boards of Dudley, Wolverhampton, Walsall, and Birmingham

Consultation questions were developed by the steering group to facilitate the receipt of structured feedback.

Upon closure of the consultation period, the comments received were reviewed by the steering group and incorporated into the final PNA prior to publication in October 2022. This version reflects those amendments.

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