

Kent Pharmaceutical Needs Assessment

**NHS Swale Clinical
Commissioning
Group**

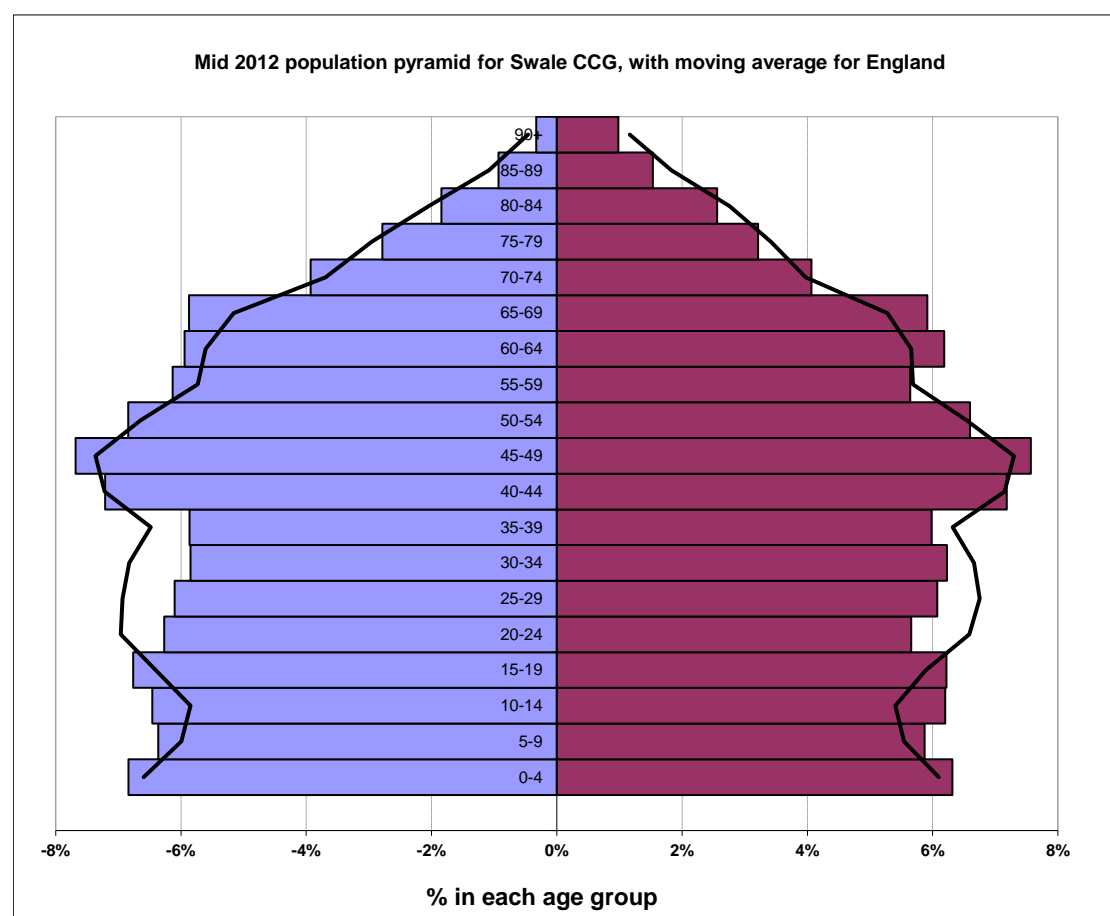
Contents

Introduction	3
Pharmaceutical Services in NHS Swale CCG	5
Healthy Living Pharmacies	11
Housing.....	11
Eastern and Coastal Kent PNA 2011	11
Conclusions and recommendation.....	13
Document Version Control.....	13

Introduction

This document has been written as part of the main Kent Pharmaceutical Needs Assessment (PNA) to allow judgements to be made using local data. This document should be read in conjunction with the main Kent PNA. This CCG area was divided into two separate localities, Sittingbourne, and the Isle of Sheppey for the purposes of this assessment.

Swale Clinical Commissioning Group (Swale CCG) covers patients from 20 practices, with a registered practice population of just over 108,000.



The registered practice population is drawn mainly from Sittingbourne, the Isle of Sheppey and the area east of Faversham within the Swale Borough Council boundary.

It is important to recognise that patients resident in the CCG area cannot be presumed to be registered exclusively with Swale CCG practices. Residents of Iwade, Lower Halstow and Upchurch are as likely to be registered with Medway practices. Similarly large numbers of people resident in Teynham

and Lynsted ward are registered with the Faversham practices (Canterbury & Coastal CCG) reflecting the hinterland of Faversham as a market town.

Detailed maps showing the population density, projected population growth and the ethnicity of Swale CCG residents can be found in the supplementary information for Swale CCG in Appendix A.

2011 Census data around ethnic populations show that 1.03% of the population of Swale are from a black or minority ethnic (BME) group. Data from the 2011 census has provided a better understanding of the populations within Kent, for the first time this included the Gypsy and Traveller communities of which Swale has a higher proportion compared to the England percentage, 0.54% against the England percentage of 0.1%.

Life expectancy from birth in Swale CCG is 79.7 years; the same as Medway CCG and the 2nd lowest of the seven Kent CCGs. This compares to 80.9 years for Kent and Medway.

The majority of deprived areas in Swale are found on the Isle of Sheppey. However, on the main land, one part of Murston is also amongst the 20% most deprived.

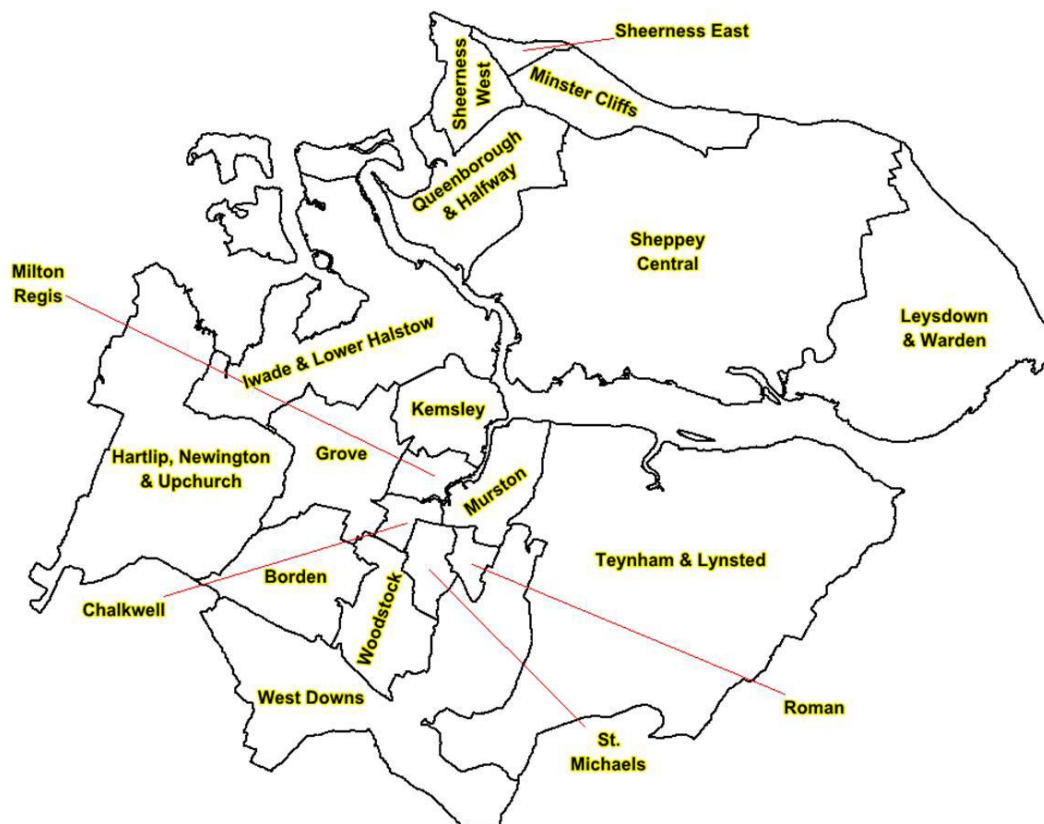
More information is available in the Swale CCG Health Profile 2014-2016 which can be found [at http://www.kmpho.nhs.uk/jsna/](http://www.kmpho.nhs.uk/jsna/)

Practice data¹ shows that out of a practice population of 108,169 there are 13,863 children aged 0-9 living in Swale (12.8%), 19,142 people who are over 65 in Swale (17.7%), 30% of whom are living alone and 2.4% of whom are living in Care homes². These age groups are considered to be the main users of pharmaceutical services.

¹ PCIS practice data June 2014

² ONS Crown Copyright Reserved [from Nomis on 21 August 2014]

Prime electoral wards within Swale CCG area.



Care Homes

Patients who are looked after in a care home setting are often high users of medicines. However because of the nature of their care, they rarely access pharmaceutical services individually, leaving this to be carried out by the care home staff. More recently care home organisations do not use local pharmacies for this service, favouring the large “hub” or “internet” pharmacies which specialise in this type of one-stop service. Therefore there is not considered to be any relationship between the number of care homes and the need for local pharmaceutical services.

Pharmaceutical Services in NHS Swale CCG

There are two ways that patients can access pharmaceutical services within the Swale CCG area. They are through community pharmacies or through a dispensary within a GP practice (dispensing practices). Appliances can be obtained through both of these methods or through a specific appliance contractor. Appliance contractors usually provide a service nationally and there are two based in the Kent area.

Patients can also request to have their prescriptions (especially repeat prescriptions) sent electronically (EPS) to a pharmacy of their choice, such as one close to their work place or near their home. This means that positioning a pharmacy next to a GP practice is no longer as important.

Ratio of number of pharmaceutical service providers (community pharmacies & GP dispensing practices) per 100,000 population (excluding appliance contractors)			
Locality	Number of providers	Practice Population	Ratio/100,000 population
NHS Swale CCG	28	108,169	26
Kent			22
England	-	-	23

Community Pharmacy

There are 24 community pharmacies who are registered on the Kent NHS pharmaceutical list as providing the full range of NHS pharmaceutical services and located within the Swale CCG area.

NHS Swale CCG - Community Pharmacies	
Total number of Community Pharmacies providing NHS pharmaceutical services	24
Number of standard 40 hour pharmacies	22
Number of 100 hour pharmacies	1
Number of mail order/internet pharmacies	1
Number of pharmacies offering electronic prescription service (EPS)	23

A list of all the pharmacies located within Swale CCG can be found in Appendix B.

Standard 40 hour community pharmacies.

These are pharmacies which are registered as providing at least 40 'core' pharmacy hours per week. These hours are usually 8 hours daily, Mon – Fri but are agreed at the time of application to join the register.

Pharmacies cannot change their 'core' hours without prior agreement with NHS England.

Many of these pharmacies also provide supplementary opening hours, often opening slightly later in the evening and on Saturdays and Sundays.

Pharmacies can change their supplementary hours if they so desire, as long as NHS England receives the statutory 3 months' notice.

100 hour pharmacies

These are pharmacies which have to be open for a minimum of 100 hours per week with the hours being agreed with NHS England.

Mail order/internet pharmacies

These are pharmacies which provide pharmaceutical services via mail order or the internet. They are not accessible to the general public. There is one mail order/internet pharmacies based in Swale.

Appliance contractors

Appliance contractors provide appliances only, which are defined in Part IX of the Drug Tariff (e.g. ostomy, colostomy appliances) and these often require tailoring to meet the need of individual patients. There are no appliance contractors located in the Swale area.

A review of all opening times was carried in May 2014 using data provided by NHS England which is available on NHS Choices. It was considered that there is adequate provision of pharmaceutical services through pharmacies and dispensing surgeries for the majority of the day between 8am and 6.30pm. Services between 6am and 8 am and between 6.30pm and 11pm are provided at strategic points across the area. Out of Hours providers of medical services provide access to urgent medical care including urgent medicines between 11pm and 7am.

Subsequent changes to opening times since May have been taken into account and the opening times of all pharmacies along with the additional services that they offer can be found on NHS Choices. NHS England has the responsibility for maintaining NHS Choices.

<http://www.nhs.uk/Service-Search/Pharmacy/LocationSearch/10>

Dispensing practices.

NHS Swale CCG – Dispensing practices	
Total number of GP practices providing pharmaceutical services to their patients	2
Total number of sites(including branches) providing pharmaceutical services to their patients	4

One practice in Upchurch is actually a branch of a Medway practice and both Swale CCG and Medway CCG have asked that it should be considered to be within the Medway area.

A list of all the dispensing doctors located within Swale CCG can be found in Appendix C

Dispensing doctors have rights to provide pharmaceutical services to their patients with the patient's permission. This is mainly for patients in rural (controlled) areas where the most rural of patients would have problem accessing medicines. The surgery has to be registered to provide pharmaceutical services and can only dispense to their own patients, who must be resident in an area which is rural in character, known as a controlled locality, at a distance of more than one mile (1.6km) from a pharmacy's premises. Surgeries must always give these patients the choice of obtaining their medicines through the GP dispensary or being allowed to take their prescription to a community pharmacy of choice.

Patients who live within the 1.6km radius who are unable to access the pharmacy and wish their GP surgery to dispense their medication can, in exceptional circumstances, apply for consideration as a serious difficulty case. All applications for 'serious difficulty' must be made to NHS England

Controlled localities

A 'controlled' locality is an area which is deemed to be rural in character. Until 1 April 2013, PCTs determined whether areas were rural in character, and published maps with any such rural areas (controlled localities) delineated on those maps.

Any areas determined to be controlled localities (or not controlled localities) cannot be considered again for a period of five years. On 1 April 2013, NHS England took over the maps produced by PCTs and became responsible for determinations of controlled localities. An explanation of controlled and not-controlled localities, rurality reviews and definitions of rural and urban can be found in the main Kent PNA document

Maps showing the controlled areas and the 1.6km boundaries around pharmacies in the Swale CCG location, can be found in Appendix A.

The pharmaceutical services which are provided by community pharmacies and by dispensing doctors are laid down in statute in the NHS Pharmaceutical Services Regulations 2013. Pharmaceutical services from community pharmacies comprise of essential, advanced and enhanced services. Explanations of these services can be found in the main Kent Pharmaceutical Needs Assessment. Pharmaceutical services from Dispensing practices do not have to provide all the 'essential' services. They mainly provide

dispensing services and the advanced service of Dispensing review of the Use of Medicines (Drugs).

All Swale pharmacies must provide the Essential services and a map showing which ones provide the advanced services of Medicine Use reviews (MURs) and New Medicines Service (NMS) can be found in Appendix A.

Pharmaceutical services out of hours

The Swale CCG area currently has one 100 hour pharmacy which is located centrally to the area and provides services from early in the morning until late at night Monday to Saturday and is open on a Sunday.

There are also 4 more 100 hour pharmacies, 2 in Faversham and two in Gillingham which are accessible to Swale residents via good road/rail links (M2/A2).

Access to medicines via 100 hour pharmacies is considered to be especially important in areas which are deprived, especially if there is a high number of children aged 0-9 and/or elderly people over 65 who are living alone with no family/carer support.

The Sheppey Hospital Pharmacy which is on the same site as the walk in Centre on Sheppey is open from 8am to 8pm, Monday to Friday, and 9am to 6pm on Saturdays. Tesco Pharmacy in Sheerness is also open 8am to 8pm Monday to Saturday and 10am to 4pm on Sundays.

Access to medicines outside these times, is commissioned from the local out-of-hours medical services provider, who has available essential and urgently needed medicines, as agreed in the *National Out of Hours Formulary* and are supplied where the need for them cannot wait until the 100 hour pharmacy opens.

Walk in centres

Swale CCG has two walk in centres which treat minor injuries and minor ailments. One is located at Sittingbourne Memorial Hospital and the other is located at Sheppey Community Hospital. These services have access to urgent and emergency medical cover from early morning to late evening.

Rota services

NHS England manages a voluntary rota service for days when there are no pharmacies open at all. This is usually Christmas Day and Easter Sunday but may include other Public and Bank holidays if required.

Public Health services provided through pharmacies.

Many community pharmacies are also commissioned by local authorities to provide public health services on a 'needs' basis. These are not classed as pharmaceutical services as they are provided by other healthcare providers as well.

Examples of these are smoking cessation, NHS Healthchecks and sexual health.

For completeness we have included maps showing where these services are available and published them alongside the PNA.

Enhanced services managed by NHS England

Various enhanced services which were commissioned by the former PCTs are currently being reviewed by NHS England. These services include various bespoke services such as warfarin monitoring and access to palliative care drugs. These services are not necessarily pharmacy specific and are therefore may not be considered to be pharmaceutical services. These are not being assessed as part of the PNA until the results of the review are complete.

For completeness we have included maps showing where these services are available and published them alongside the PNA.

CCG services provided through community pharmacies.

These are not necessarily pharmaceutical services and therefore not considered as part of the PNA. However for completeness we are including maps of such services where the information is available.

Currently we have not been informed of any services that Swale CCG commissions through community pharmacies

Non NHS and private services

Pharmacies also provide many other services to the public which are not part of NHS pharmaceutical services and therefore not paid for by the NHS or Local Authority. These can include delivery services, provision of medicines in multi-compartment aids, travel medicines and the sale of over the counter (OTC) medicines. All of these services may attract an additional charge. These services will not be included as part of the PNA.

Healthy Living Pharmacies

Please see the main Kent PNA for an explanation of the concept of Healthy Living Pharmacies. Becoming accredited as a Healthy Living Pharmacy is not mandatory and is not a pharmaceutical service and therefore not considered as part of the PNA.

Currently Swale has 2 community pharmacies who have met the accreditation as a Healthy Living Pharmacy. Please see map in Appendix A for details.

Housing

Like most of Kent, considerable new housing is expected to be built in the Swale area over the next 20 years. The Swale Borough Council local plan suggests this increase could be up to 10,800 in the years 2011-2031, roughly 500 a year. Although the plan currently does not highlight any major building projects in the next 3 years, there is a lot of infilling which could increase health needs. This will be reviewed regularly especially if the house building changes the landscape from rural to urban.

Eastern and Coastal Kent PNA 2011

As part of this assessment, reference was made to the previous PNA carried out in 2011 by Eastern and Coastal Kent Primary Care Trust. It was noted that this assessment stated the following.

Across the whole PCT area.

Rurality. *There are a number of areas in Eastern and Coastal Kent which have not yet been determined as Controlled Localities but where some practices have historic dispensing rights. These determinations are a priority and the Pharmacy Regulations Committee has undertaken to complete these as soon as possible.*

100 Hour Pharmacy Contracts.

Through the consultation many people indicated the value of being able to access pharmaceutical services beyond the normal pharmacy contractual hours of 40 hours per week.

Given the above feedback it is NHS Eastern and Coastal Kent's intention not to allow those pharmacies with 100 hour contracts to reduce them to a 40 hour contract. Additionally, evidence through consultation shows the need for 100hr contract provision on the Isle of Sheppey and in the town of Dover.

And for the Swale area in particular

Pharmacies and dispensing doctors are in the right locations in the locality for patients to access essential services, however they don't appear to quite meet the need of local people in terms of under 18 years conception.

We have additionally identified a lack of 100 hour provision on the Isle of Sheppey

We have looked at these recommendations again and note.

Rurality

The responsibility for reviewing controlled areas now lies with NHS England. We understand that this review has now been carried out.

100 Hour Pharmacy Contracts

The opening of a 100 hour pharmacy in the north of Sittingbourne, and the long opening hours provided by Sheppey Hospital pharmacy and Tesco's Sheerness goes a long way to providing services out of hours.

With the removal of 100 hour pharmacies from the exemptions to meeting the "market entry" rules, it is now unlikely that any application will offer such services voluntarily.

NHS England will need to look at any applications received for this area to ensure that it meets the needs for opening such hours especially early in the morning and late at night.

Under 18 conception rates.

The Sexual Health service, which is now commissioned through Kent Public Health, is currently under review and it is expected that the new service will meet the current needs of the local people.

Conclusions and recommendation

We therefore recommend that for the NHS Swale CCG area.

The current provision of pharmaceutical services is good and provides the pharmaceutical needs of the population on the whole.

The provision of new housing in the Swale area needs to be reviewed regularly.

The provision of pharmaceutical services outside of the standard '40' core hours needs to be maintained especially on the Isle of Sheppey.

Document Version Control

Version	Date	Author(s)	Comments
Draft 1	25/08/14	Cheryl Clennett	1 st draft
Draft 2	27/08/14	PNA Steering group	Minor amendments made after meeting of PNA SG
Draft 3	17/09/14	KCC HWB	Changes after HWB meeting
Draft 4	27/09/14	K&M LAT	Minor changes by K&M LAT
Draft 5	14/10/14	Swale CCG /PNA SG	Amendment to dispensing practice
Draft 6	18/02/15	PNA Steering Group	Changes after consultation
Final Version	20/03/15	PNA steering Group	Final checks prior to publication after approval from HWB