

Leicester Pharmaceutical Needs Assessment 2022

March 2022

CONTENTS

1.	EXECUTIVE SUMMARY	1
1.1	Introduction and background.....	1
1.2	Community Pharmacy Contractual Framework.....	2
1.3	Health Needs in Leicester.....	3
1.4	Location and access to pharmacies.....	3
1.5	Pharmaceutical service provision.....	4
1.6	Projected future needs.....	4
1.7	Consultation.....	4
1.8	Analysis of gaps in service.....	4
1.9	Conclusions and recommendations.....	6
2.	BACKGROUND AND INTRODUCTION.....	8
2.1	Purpose of the Pharmaceutical Needs Assessment (PNA).....	8
2.2	Legislative background.....	8
2.3	Process followed in the development of the PNA.....	10
3.	PHARMACY POLICY.....	11
3.1	The Community Pharmacy Contractual Framework.....	11
3.2	Integration and innovation: working together to improve health and social care for all.....	12
4.	PHARMACEUTICAL SERVICES AND PHARMACY CONTRACTS.....	15
4.1	Types of Service.....	15
	4.1.1 Essential services.....	15
	4.1.2 Advanced services.....	17
	4.1.3 Locally commissioned services.....	19
4.2	The wider role of community pharmacies: non-contracted services.....	20
4.3	Community Pharmacy IT.....	21
4.4	Pharmacy Contracts.....	21
	4.4.1 Types of Pharmacy contracts.....	21
	4.4.2 Local Pharmaceutical Service Scheme	22
	4.4.3 Pharmacy Access Scheme	22

5.	HEALTH NEEDS IN LEICESTER.....	23
5.1	Age Profile.....	23
5.2	Diversity.....	23
5.3	Deprivation.....	24
5.4	Leicester locality area demographics.....	26
5.5	Local Health Needs.....	28
6.	LOCATION AND ACCESS TO COMMUNITY PHARMACIES IN LEICESTER..	37
6.1	Pharmacies do not serve a defined population.....	37
6.2	Location and access to pharmacies.....	38
	6.2.1 Distribution of community pharmacies.....	38
	6.2.2 Walk-times to pharmacies.....	40
	6.2.3 Public transport times to pharmacies.....	42
	6.2.4 Drive-times to pharmacies.....	43
6.3	Pharmacy opening times.....	45
6.4	Accessibility of services.....	46
6.5	Conclusions.....	47
7.	CURRENT PHARMACY SERVICE PROVISION	48
7.1	Essential services.....	48
	7.1.1 Dispensing and repeat dispensing.....	48
7.2	Advanced services.....	50
	7.2.1 New Medicines Service.....	51
	7.2.2 Stoma Appliance Customisation.....	54
	7.2.3 Appliance Use Reviews.....	56
	7.2.4 Community Pharmacist Consultation Service.....	56
	7.2.5 Flu vaccination Service.....	59
	7.2.6 Hepatitis C Testing Service.....	61
	7.2.7 Hypertension Case-Finding Service.....	61
	7.2.8 Smoking Cessation Service.....	61
7.3	Locally Commissioned Services.....	61
	7.3.1 Emergency Hormonal Contraception.....	62
	7.3.2 C-Card Service.....	65
	7.3.3 Substance Misuse: Needle Exchange.....	65
	7.3.4 Substance Misuse: Supervised Methadone Consumption.....	67

7.3.5 Palliative Care.....	70
7.3.6 Child Influenza Vaccinations.....	72
7.4 Impact of Covid-19.....	74
7.5 Conclusion.....	74
8. PROJECTED FUTURE NEEDS.....	76
8.1 Population growth.....	76
8.2 Growth in number of people with long term health conditions.....	76
8.3 Growth in housing.....	77
9. CONSULTATION.....	78
9.1 Pharmacy questionnaire for local professionals.....	78
9.2 Pharmacy questionnaire for public.....	79
9.3 Statutory 60 day consultation.....	80
10. ANALYSIS OF GAPS IN SERVICE.....	81
11. CONCLUSIONS AND RECOMMENDATIONS.....	84
11.1 Regulatory Statements	84
11.2 Recommendations.....	87
GLOSSARY OF TERMS.....	90

Appendix 1: Opening Times for Leicester Pharmacies

Appendix 2: Pharmacy questionnaire for local professionals

Appendix 3: Results of the statutory consultation of the draft PNA

Appendix 4: Equality Statement

List of Tables

Table 1: Essential pharmacy services.....	16
Table 2: Advanced pharmacy services.....	17
Table 3: Locally commissioned services.....	19
Table 4: Demographic summary of the six locality areas of Leicester City.....	28
Table 5: Health and lifestyle profile summary for Leicester City.....	29
Table 6: Percentage of patients registered at GP practices in Leicester diagnosed with long term conditions.....	32
Table 7: Health and lifestyle summary of the six locality areas of Leicester City.....	34
Table 8: Pharmacy types, GP Practices and pharmacies per 10,000 population in Leicester by locality area, 2020/21.....	40
Table 9: Pharmacy opening days by locality area, 2020/21.....	46
Table 10: Prescription items and associated costs, Leicester City CCG, 2020.....	49
Table 11: Advanced service provision in Leicester pharmacies – number of pharmacies providing each advanced service, 2021/22.....	50
Table 12: Provision of CPCS in Leicester pharmacies, 2021/22.....	57
Table 13: Provision of flu vaccinations in Leicester pharmacies, September 2021-March 2022.....	59
Table 14: Provision of Emergency Hormonal Contraception in Leicester pharmacies, 2021/22.....	63
Table 15: Pharmacy needle exchange service transactions by locality area in Leicester (April 2020 – March 2021).....	67
Table 16: Supervised consumption service dispenses by locality area (April 2020 – March 2021).....	70
Table 17: Estimates of numbers of over 65 year olds in Leicester with long standing health conditions, 2020-2040.....	77
Table 18: Previous Housing Supply for Leicester City.....	77

List of Figures

Figure 1: 2020 Leicester population pyramid.....	23
Figure 2: Deprivation in Leicester by lower super output area.....	25
Figure 3: Population by deprivation decile in Leicester City.....	26
Figure 4: Life expectancy at birth (1 year range) for Leicester and England over the period 2001 to 2020.....	31
Figure 5: Healthy life expectancy at birth for Leicester and England over the period 2009-11 to 2018-20.....	31
Figure 6: Pharmacies in and around Leicester City.....	39
Figure 7: Walk times to Pharmacies in Leicester.....	41
Figure 8: Public transport travel times to Pharmacies.....	43
Figure 9: Drive-times to Pharmacies in Leicester.....	44
Figure 10: Pharmacies in Leicester and surrounding area by opening hours.....	45
Figure 11: Number of NMS carried out by pharmacies in 2018/19, 2019/20 and 2021/22.....	52
Figure 12: Pharmacies providing New Medicines Services.....	53
Figure 13: Pharmacies providing Stoma Appliance Customisation.....	55
Figure 14: Pharmacies providing Community Pharmacist Consultation Services....	58
Figure 15: Pharmacies accredited for flu vaccinations in Leicester, 2021/22.....	60
Figure 16: Pharmacies accredited for Emergency Hormonal Contraception in and around Leicester 2021/22	64
Figure 17: Pharmacies accredited for needle exchange services.....	66
Figure 18: Pharmacies accredited for supervised consumption services.....	69
Figure 19: Pharmacies providing Palliative care services.....	71
Figure 20: Pharmacies accredited for Child Influenza Vaccinations.....	73
Figure 21: Leicester population structure 2018 with projections for 2043.....	76

1 Executive Summary

1.1 Introduction and background

'Pharmaceutical' refers to the need for medicines or other health services including prevention and whether this is met by the arrangements with community pharmacies in Leicester.

The purpose of the Pharmaceutical Needs Assessment (PNA) is to:

- identify the pharmaceutical services currently available and assess the need for pharmaceutical services in the future
- inform the planning and commissioning of pharmacy services by identifying which services should be commissioned for local people, within available resources, and where these services should be; and
- inform decision making in response to applications made to NHS England and NHS Improvement by pharmacists and dispensing doctors to provide a new pharmacy. The organisation that will make these decisions is NHS England and NHS Improvement.

The PNA is a statutory document that is used by NHS England and NHS Improvement to agree changes to the commissioning of local pharmaceutical services. The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 set out the legislative basis for developing and updating PNAs and can be found at

<https://www.legislation.gov.uk/uksi/2013/349/contents>¹

The report identifies whether there are any unmet pharmaceutical needs or gaps in service provision and produces recommendations to strengthen service provision.

This PNA has reviewed pharmacy coverage in relation to the population health needs of the people of Leicester City. This has involved looking at the existing services, their locations, the range of services they are providing and the views of the people who are using them. The PNA refers to the services that were provided on the 31st March 2022 where available. Where this is not available, data is provided to 31st March 2021.

The PNA analysis focusses on the services that are currently provided in pharmacies and not those that have been decommissioned since the last PNA.

**Note: The PNA includes services commissioned by Leicester City Clinical Commissioning Group (CCG) during the period to 31st March 2022. It is acknowledged that Leicester, Leicestershire and Rutland (LLR) CCGs will be replaced by LLR Integrated Care Board on 1st July 2022. Any reference to LLR CCGs throughout is referring to LLR Integrated Care Board post 1st July 2022.*

¹ National Health Service. The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. (2013). at http://www.legislation.gov.uk/uksi/2013/349/pdfs/uksi_20130349_en.pdf

Within the scope of this document, the PNA concludes that community based pharmacies are meeting the current needs of residents in Leicester City for essential and advanced services where they are offered.

1.2 Community Pharmacy Contractual Framework

The PNA must relate to all pharmaceutical services provided and assess the following:

- the demography of its area and needs of different localities
- whether there is sufficient choice of pharmaceutical services within its area
- the pharmaceutical services provided by surrounding areas that may affect need within the area
- future pharmaceutical needs of the population

The assessment covers:

Essential services: required in all pharmacies and includes

- Dispensing and repeat dispensing
- Promotion of healthy lifestyles
- Disposal of unwanted medicines
- Signposting advice, treatment or support that the pharmacy cannot provide
- Support for self-care
- Clinical governance
- Discharge medicines service (when a person is discharged from hospital)
- Healthy Living Pharmacies (from 2021)

Advanced services: optional nationally commissioned services. As at March 2022, these include

- New Medicines Service (NMS)
- Appliance Use Review (AUR)
- Community Pharmacist Consultation Service (CPCS)
- Stoma Appliance Customisation (SAC)
- Seasonal influenza vaccination
- Hypertension case-finding service
- Hepatitis C testing service
- Smoking cessation service

** Medicine Use Reviews Service was decommissioned 31st March 2021 and the C-19 Lateral Flow Device Distribution Service and Pandemic Delivery Service were decommissioned 31st March 2022. For more information visit: [Advanced Services : PSNC Main site](#).*

Locally commissioned services: optional locally commissioned services including

- Emergency hormonal contraception (EHC)
- C-Card (Condom provision and Sexual Health advice)
- Needle exchange
- Supervised methadone consumption
- Palliative care
- Child influenza vaccination service

Pharmacies may also choose to provide additional services on a voluntary basis that are of direct benefit to the patient. These include services such as prescription collection and delivery, monitored dosage system, minor ailments and many others.

This PNA has reviewed community pharmacy need and provision for the population of Leicester city as of 31st March 2022 where available (otherwise 31st March 2021). Prison or hospital pharmacies are excluded from the scope of the PNA. The PNA also considers future pharmaceutical provision. It presents an analysis of actual or potential gaps in service and recommendations for improvement.

1.3 Health Needs in Leicester

Leicester is a city characterised by rich diversity, with a younger population than England and around half of its residents from an ethnic group other than White British at the time of the 2011 census. Additionally, it experiences high levels of deprivation with around 35% of its 354,036 residents living in the 20% most deprived areas in the country. Health needs within the city are not evenly distributed, with the worst outcomes often concentrated in the most deprived areas. Life expectancy for men and women in Leicester is significantly lower than the England average.

1.4 Location and access to pharmacies

There are 85 pharmacies in Leicester (March 2022), equivalent to 2.4 pharmacies per 10,000 population (2.1 in England). All Leicester pharmacies are open for at least 40 hours per week, and 8 are open for 100 hours. The majority of 100-hour pharmacies are located in the west and central locality areas of Leicester, with one in the north, one in the east and one in the south; opening times are generally from 7am to 11pm Monday to Saturday, with some opening for reduced hours on Sunday.

There are more pharmacies concentrated in the centre and north of the city, and fewer in the east and north west of the city. Travel time analysis indicates that generally nearest pharmacies can be reached within 15 minutes of walking. There are a few areas of the city where walk times may be more than 15 minutes but these should be accessible by car or public transport within 15 minutes. Leicester residents can also make use of several pharmacies just into Leicestershire; 9 pharmacies within 0.5km and 15 between 0.5 and 1km of the city boundary.

1.5 Pharmaceutical service provision

All pharmacies are required to dispense medicines as part of their essential services contract with NHS England and NHS Improvement. In addition, they may be accredited to provide advanced services or locally commissioned services to provide for the needs of the local population.

Service provision is considered across Leicester by six locality areas. These have been defined by, and are consistent with, those used in the Health and Wellbeing Survey 2018. It is acknowledged that not everyone will choose their nearest pharmacy, however, by providing rates for smaller locality areas this helps to show variation in provision of services for local populations across the city.

1.6 Projected future needs

By 2043, the population of Leicester is predicted to grow by around 37,400 to give a total population of around 391,400. Projections indicate that Leicester will have an increase of 18,600 people aged 65 and over, which represents an increase in the proportion of the population aged 65 and over from 12% in 2018 to 16% in 2043.

With the current provision of 85 pharmacies in Leicester, this would offer a rate of 2.2 pharmacies per 10,000 population. Nationally, there are 2.1 pharmacies per 10,000 population based on the number of pharmacies alone; it does not take into account variation in opening hours and services provided.

1.7 Consultation

There is a statutory requirement for each Health and Wellbeing Board to consult a number of bodies about the contents of the pharmaceutical needs assessment for a minimum of 60 days. The consultation period will take place between July and August 2022. The results will be incorporated into the revised PNA at the completion of the consultation period, before submission to the Health and Wellbeing Board for approval.

1.8 Analysis of gaps in service

Pharmacies and local populations:

As of 31st March 2022, Leicester has 85 pharmacies located across the City, including 9 distance selling pharmacies, one Local Pharmaceutical Service pharmacy and one pharmacy eligible for the Pharmacy Access Scheme.

Overall Leicester has more pharmacies per head of the population than England (2.4 vs 2.1 pharmacies per 10,000 population).

Pharmacies are not evenly distributed throughout the city. There are more pharmacies in the north and centre of the city, with several closely located in Belgrave (around Belgrave Road) and another cluster around Spinney Hills towards Stoneygate. In the west of the city the pharmacies are more widely spread, although there are a number along the Narborough Road area in the West End.

Access and travel times:

Analysis of access and travel times suggests most residents will be able to access their nearest pharmacy within 15 minutes by walking, car or public transport. Travel times by car and public transport will be subject to traffic variations during the day. Residents may have to travel further to reach a pharmacy outside of normal opening hours.

Opening hours:

All Leicester pharmacies are open for at least 40 hours per week; over half (47) are open up to 50 hours per week and Leicester has 8 pharmacies classified as 100 hour pharmacies. The 100 hour pharmacies are located in the west (3 pharmacies), central (2), east (1), north (1) and south (1) locality areas of the city. There is lower provision for extended opening hours in the north west of Leicester, however there are two 100 hour county pharmacies within 1km of the City border towards the north west of the city.

Essential Services:

It is concluded that there is adequate provision for the population of Leicester since essential services are provided by all pharmacies. Some residents may have further to travel where pharmacies are more sparsely distributed and opening hours are shorter (particularly in the north west of Leicester).

Advanced Services:

The majority of pharmacies provide the advanced services Community Pharmacist Consultation Service, Flu Vaccination Service and New Medicines Services. Few pharmacies offer Stoma Appliance Customisation and no pharmacies offer Appliance Use Reviews or Hepatitis C Testing Service.

Locally Commissioned Services:

Locally Commissioned Services are services commissioned by Local Authorities and Clinical Commissioning Groups (CCGs) which can be tailored towards the health needs of the local population. Pharmacies can be particularly effective in providing services to more hard-to-reach groups as they offer a walk-in service and do not require an appointment. They also offer valuable advice and support for people in making lifestyle choices and in managing their own health conditions.

Where data is available, the PNA presents maps showing the location of pharmacies providing each service by the six locality areas across the city. In order to provide an indication of variation across the city, rates are provided per 10,000 population within the locality area. It is recognised however, that residents will not always choose the pharmacy located nearest to them.

1.9 Conclusions and recommendations

This PNA has reviewed the provision of pharmaceutical services as of March 2022 (where available, otherwise at March 2021) and concludes that overall provision is adequate for the population of Leicester. There are differences in local provision of services across the city and it may be that residents in some areas have to travel a little further to access a particular service or out of normal working hours.

The majority of pharmacies are accredited to carry out the advanced services of Community Pharmacist Consultation Service, Flu Vaccination Service and New Medicines Services (NMS).

Community based pharmacies offer a range of locally commissioned services to the local population that can be tailored by commissioners to meet specific local healthcare needs. Pharmacies can provide a valuable service to patients, particularly those more hard-to-reach groups who can take an advantage of a drop-in service at a time more convenient to themselves without the need for an appointment. It may also be more appealing to use a less formal environment within a pharmacy compared with the GP surgery.

Throughout the Covid-19 pandemic, the accessibility and provision of some pharmaceutical services changed. However, it is difficult to predict whether such changes will continue into the future or whether they will revert to pre-pandemic levels within the lifespan of this PNA. Given the potential benefits to patients, it is recommended that pharmacies are encouraged to maintain improved service provision.

Equity of service:

It is recommended that NHS England and NHS Improvement (and where relevant Leicester City Council and Leicester, Leicestershire and Rutland Integrated Care Board) should:

- Keep under review locations and opening times to assess whether access is equitable for all residents.
- Work with pharmacies and Local Pharmaceutical Committee to examine how equity issues can be addressed further
- Review cross-city and county-border service provision to ensure uniformity of access and quality of service
- Work closely with Integrated Care Board and Primary Care Networks to tackle health inequalities and address digital literacy
- Encourage pharmacies to offer discretionary services in relation to local need.

Promotion of health and healthcare management:

It is recommended that NHS England and NHS Improvement (and where relevant Leicester City Council and Leicester, Leicestershire and Rutland Integrated Care Board) should:

- Encourage the implementation of Healthy Living Pharmacy to promote healthier lifestyles through pharmacies so that individuals can gain advice and support in reducing unhealthy behaviours and adopting healthier ones.
- Ensure that the requirement for promotion of healthy lifestyles campaigns through pharmacies (Public Health) is fulfilled
- Consider and encourage the opportunity to include and develop the role of pharmacies in commissioning strategies and through the Integrated Care System - particularly in relation to providing services which deflect work out of primary care general practice.
- Assess levels of uptake of advanced and locally commissioned services and follow-up low or high performers in order to share best practice.
- Keep under review the appropriateness of monitoring and quality visits to pharmacies, in addition to pharmacy self-assessment, in order to provide assurance of effectiveness and to promote service improvement.

Community Pharmacies Policy:

It is recommended that NHS England and NHS Improvement (and where relevant Leicester City Council and Leicester, Leicestershire and Rutland Integrated Care Board) should:

- Review evidence of impact of policy and funding changes on services annually and report any findings to the Health and Wellbeing Board with appropriate advice.

2. Background and Introduction

The Pharmaceutical Needs Assessment (PNA) is a statutory document that reviews the pharmaceutical services provided within an area in relation to the needs of the local population. The PNA is updated every 3 years, however due to Covid-19, an extension has been granted until October 2022. This report presents the fourth PNA for Leicester City and will be published in October 2022 to replace the previous PNA published in 2018.

2.1 Purpose of the PNA

The PNA is the key local tool for understanding the provision of local pharmaceutical services in an area, identifying any gaps in services and assessing future need. It is primarily used by NHS-England and NHS-Improvement, when making decisions on applications to open new pharmacies. If a pharmacist, dispenser of appliances or a GP wants to provide NHS pharmaceutical services, they are required under the NHS (Pharmaceutical Services and Local Pharmaceutical Services) regulations to apply to NHS England and NHS Improvement to be included on a pharmaceutical list. They must prove they are able to meet a pharmaceutical need as set out in the relevant PNA. This is known as the NHS “market entry” system.

‘Pharmaceutical’ refers to the need for medicines or other health services including prevention and whether this is met by the arrangements with community pharmacies in Leicester.

Additionally, Local Authorities and Leicester, Leicestershire and Rutland Integrated Care Board may consider the PNA when commissioning or reviewing a service to meet local health needs and priorities. NHS England and NHS Improvement is the principal body responsible for managing the main contract with community pharmacies.

2.2 Legislative background

The Health and Social Care Act 2012 established Health and Wellbeing Boards (HWBBs). From 1 April 2013, Health and Wellbeing Boards (HWBBs) became responsible for publishing and updating PNAs.

The regulations² require that a series of statements be contained in the PNA. In summary, the regulations require a series of statements of:

- the pharmaceutical services that the Health and Wellbeing Board has identified as services that are necessary to meet the need for pharmaceutical services
- the pharmaceutical services that have been identified as services that are not provided but which the Health and Wellbeing Board is satisfied need to be provided in order to meet a current or future need for a range of pharmaceutical services or a specific pharmaceutical service

² Pharmaceutical Needs Assessments – information pack for local authority health and wellbeing boards, October 2021. Department of Health & Social Care. Available at: <https://www.gov.uk/government/publications/pharmaceutical-needs-assessments-information-pack>

- the pharmaceutical services that the Health and Wellbeing Board has identified as not being necessary to meet the need for pharmaceutical services but have secured improvements or better access
- the pharmaceutical services that have been identified as services that would secure improvements or better access to a range of pharmaceutical services or a specific pharmaceutical services, either now or in the future
- other NHS services that affect the need for pharmaceutical services or a specific pharmaceutical service

Other information to be included or taken into account:

- how the Health and Wellbeing Board has determined the localities in its area
- how it has taken into account the different needs of the different localities and the different needs of those who share a protected characteristic
- a report on the consultation
- a map that identifies the premises at which pharmaceutical services are provided
- information on the demography of the area
- whether there is sufficient choice with regard to obtaining pharmaceutical services
- any different needs of the different localities
- the provision of pharmaceutical services in neighbouring Health and Wellbeing Board areas

Regulation 8 requires each HWBB *must* also consult the following bodies for its area about the contents of the assessment.

- the local pharmaceutical committee,
- the local medical committee,
- pharmacy and dispensing appliance contractors included in the pharmaceutical list for the area of the Health and Wellbeing Board,
- dispensing doctors included in the dispensing doctor list for the area of the Health and Wellbeing board, if any,
- any pharmacy contractor that holds a local pharmaceutical services contract with premises that are in the Health and Wellbeing Board's area,
- Healthwatch, and any other patient, consumer, or community group in the area which the Health and Wellbeing Board believes has an interest in the provision of pharmaceutical services,

- any NHS trust or NHS foundation trust in the Health and Wellbeing Board's area,
- NHS England and NHS Improvement, and
- any neighbouring Health and Wellbeing Board

These bodies must be consulted at least once and for a period of 60 days.

2.3 Process followed in the development of the PNA

The PNA has been developed for the Health and Wellbeing Board in accordance with the NHS regulations¹

As many of the relationships required for the PNA are Leicester, Leicestershire and Rutland (LLR) wide, a PNA Reference group was established to oversee and develop the PNA with representation from NHS England and NHS Improvement, the Leicestershire Pharmaceutical Committee and the Local Professional Network for Pharmacists. The group's terms of reference are attached as Appendix A.

The PNA process consisted of the following three key stages:

- Review of the current provision of pharmaceutical services in Leicester
- Assessment of the need for pharmaceutical services in the local population
- A consultation period to gather feedback from the public and other stakeholders

To gather additional intelligence for the PNA, two surveys have been run; one survey to ask service users for their views on the current pharmaceutical provision and the second to ask pharmaceutical professionals to provide data including the services offered, the opening times and the facilities within the pharmacy.

The PNA will be subject to a 60-day statutory consultation period running in July and August 2022. The findings from these two survey exercises will be incorporated into the main PNA document.

**Note: The PNA includes services commissioned by Leicester City Clinical Commissioning Group (CCG) during the period to 31st March 2022. It is acknowledged that Leicester, Leicestershire and Rutland (LLR) CCGs will be replaced by LLR Integrated Care Board on 1st July 2022. Any reference to LLR CCGs throughout is referring to LLR Integrated Care Board post 1st July 2022.*

3. PHARMACY POLICY

Pharmacies deliver personalised patient care through health professionals with expertise in the use of medicines and promotion of their safe and effective use³. Pharmacists and their teams can improve patient care and reduce health inequalities through:

- personalised pharmaceutical services
 - expanding access and choice
 - more help with medicines
 - reducing inappropriate hospital admissions
 - supporting patients as they move between hospital and the community
 - supporting healthy living and better care
 - improving communications and relationships
 - facilitating personalised care for people with long-term conditions
 - a trusted, convenient first port of call for episodic healthcare advice and treatment

Clinical pharmacists can work directly in general practice as part of the multi-disciplinary team in patient facing roles, clinically assessing and treating patients using their expert knowledge of medicines for specific disease areas. They can be prescribers and work alongside the general practice team, taking responsibility for patients with long term conditions and undertaking clinical medication reviews especially for older people and those in care homes. They can provide specialist expertise in medicines use while helping to address both the public health and social care needs of a patient at the practice(s).

Pharmacists in general practice will provide leadership to ensure all people get the best use out of their medicines. They will help support the further integration of general practice with the wider healthcare teams (including community and hospital pharmacy) to help improve patient care and safety.

3.1 The Community Pharmacy Contractual Framework

The Community Pharmacy Contractual Framework for 2019/20 to 2023/24 was published in 2019⁴ setting out how community pharmacy will support the delivery of the NHS Long Term Plan. The NHS Long Term Plan describes the development of local Primary Care Networks (PCN) with general practices coming together to form networks typically covering 30,000-50,000 patients. PCNs will build on existing primary care services and develop more integrated health and social care services in response to the needs of the patients they serve.

The key elements of the Community Pharmacy development plan include the introduction of pharmaceutical services in response to urgent care, prevention and medicines optimisation and safety.

³ Pharmacy White Paper, *Pharmacy in England – Building on strengths and delivering the Future*, April 2008

⁴ https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/819601/cpcf-2019-to-2024.pdf

- **Urgent Care:**
 - Introduction of the Community Pharmacist Consultation Service with referrals from Urgent Treatment Centres
 - palliative care service pilots
- **Prevention:**
 - Introduction of a Hepatitis C testing service in pharmacies for any patients using needle and syringe programmes
 - Introduction of a pilot for case finding undiagnosed cardiovascular disease
 - Introduction of a pilot for stop smoking referrals from secondary care
 - Introduction of pilots for point of care testing in community pharmacy to support efforts to tackle antimicrobial resistance
 - All pharmacies required to be accredited Level 1 Healthy Living Pharmacies by April 2020
- **Medicines Optimisation and Safety**
 - Phasing out of Medicines Use Reviews
 - Introduction of a medicines reconciliation service as part of a transfer of care around medicine service

3.2 Integration and innovation: working together to improve health and social care for all

In 2021, the government published Integration and innovation: working together to improve health and social care for all⁵, a paper setting out how NHS and local authorities have a duty to collaborate with each other to deliver improved outcomes in health and wellbeing for local people.

Key measures in the white paper include:

- The NHS and local government to establish integrated care systems to plan health and care services
- Focusing on preventative healthcare; moving services out of hospitals and into the community,
- The NHS will only need to tender services when it has the potential to lead to better outcomes for patients
- The Healthcare Safety Investigations Branch to become a statutory body so it can continue to reduce risk and improve safety
- Introduction of new requirements about calorie labelling on food and drink packaging and the advertising of junk food before the 9pm watershed
- A package of measures to deliver on specific needs in the social care sector

5

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/960548/integration-and-innovation-working-together-to-improve-health-and-social-care-for-all-web-version.pdf

Integrated Care Systems (ICSs)

Integrated Care Systems (ICSs) are partnerships of organisations that come together to plan and deliver joined up health and care services to improve the lives of people who live and work in their area⁶. Forty-two ICSs will be established across England on a statutory basis on 1 July 2022. They will bring together systems to support integration and develop a plan to address the systems' health, public health and social care needs through joint place-based working between NHS, local government, community health services and other partners in the voluntary and community sector. ICSs were recommended to have stronger responsibilities for commissioning primary medical, dental, ophthalmology and pharmaceutical services.

The **purpose** of ICSs is to bring partner organisations together to:

- **improve outcomes** in population health and healthcare
- **tackle inequalities** in outcomes, experience and access
- enhance **productivity and value for money**
- help the NHS support broader **social and economic development**.

Collaborating as ICSs will help health and care organisations tackle complex challenges, including:

- improving the health of children and young people
- supporting people to stay well and independent
- acting sooner to help those with preventable conditions
- supporting those with long-term conditions or mental health issues
- caring for those with multiple needs as populations age
- getting the best from collective resources so people get care as quickly as possible.

LLR ICS Purpose, Principles and Priorities

From 1st July 2022, Leicester, Leicestershire and Rutland will be designated as an Integrated Care System (ICS). In the ICS, NHS and other partners such as local authorities and the voluntary and community sector take on greater responsibility for working together and collectively managing resources. They aim to improve the health of residents by preventing illness, tackling inequalities and variation in care.

They do this by joining up care for those with multiple conditions and breaking down current barriers people experience in accessing health and social care holistically. They will also improve the support available for people with lifelong illnesses and help them to lead healthy lives.

⁶ <https://www.kingsfund.org.uk/audio-video/integrated-care-systems-health-and-care-act>

The draft LLR ICS⁷ describes the purpose, principles and priorities and outlines the approach for integration and transformation of services

Covid-19 has further highlighted inequalities for people across LLR. These are significant challenges and can only be addressed by the NHS, local government and ICS working together to tackle the wider determinants of health that often lead to poor health outcomes.

7

<https://cabinet.leicester.gov.uk/documents/s122703/Leicester%20Health%20and%20Wellbeing%20Board%20ICS%20Discussion%20Final%20290721.pdf>

4. Pharmaceutical Services and Pharmacy Contracts

All national NHS pharmaceutical service providers must comply with the contractual framework that was first introduced in April 2005. The national framework is set out below and can be found in greater detail on the Pharmaceutical Services Negotiating Committee (PSNC) website: <http://psnc.org.uk/contract-it/the-pharmacy-contract/>

The contractual framework is made up of three different service types:

- *Essential* services – which must be provided by all contractors - that is, all community pharmacy services nationwide
- *Advanced* services – nationally defined services that can be provided by contractors subject to accreditation requirements
- *Locally commissioned* services – services commissioned locally by Clinical Commissioning Groups, Local Authorities and NHS England and NHS Improvement (Enhanced Services) in response to the needs of the local population.

Quality assurance:

NHS England and NHS Improvement (NHSE&I) regional teams monitor the provision of Essential and Advanced Services and the pharmacy contractors' compliance with the terms of the Community Pharmacy Contractual Framework. Each year, every pharmacy must complete a short questionnaire which will determine whether a pharmacy needs visiting.

The General Pharmaceutical Council carry out inspections in all registered pharmacy premises to ensure that they comply with all legal requirements and regulatory standards. The inspector will examine how the pharmacy operates with the aim of securing and promoting the safe and effective practice of pharmacy services⁸.

All pharmacies are required to conduct an annual community pharmacy patient questionnaire (Patient Satisfaction Questionnaire) which allows patients to provide feedback to community pharmacies on the services they provide⁹.

4.1 Types of service

4.1.1 Essential services

The essential services which **must** be provided by all contractors are briefly described in table 1 below.

⁸ <https://www.pharmacyregulation.org/standards>

⁹ <http://psnc.org.uk/wp-content/uploads/2013/07/cppq2020annex20a.pdf>

Table 1: Essential pharmacy services

Essential Service	Description
Dispensing Medicines and Appliances	The supply of medicines and appliances ordered on NHS prescriptions, together with information and advice, to enable their safe and effective use by patients and carers. Records are kept of all medicines dispensed, significant advice provided, referrals and interventions made.
Repeat Dispensing	<p>At least two thirds of all prescriptions generated in primary care are for patients needing repeat supplies of regular medicines. Under the repeat dispensing service, pharmacy teams will:</p> <ul style="list-style-type: none"> • Dispense repeat prescriptions issued by a GP • Ensure that each repeat supply is required • Seek to ascertain that there is no reason why the patient should be referred back to their GP. <p>The majority of repeat dispensing is now carried out via the Electronic Prescription Services (EPS) and is termed electronic Repeat Dispensing (eRD).</p>
Disposal of unwanted medicines	Pharmacies accept unwanted medicines from individuals for safe disposal.
Discharge Medicines Service (DMS)	The DMS became a new essential service in February 2021. The service aims to reduce the risk of avoidable medication related harm when a person is discharged from hospital. Patients are digitally referred to their pharmacy after discharge from hospital, at which point the pharmacist reviews the referral information and any prescription changes since before the patient was admitted to hospital. The pharmacist then discusses these changes with the patient and/or their carer, checks their understanding of what medicines they should now be taking/using and provides any other relevant advice to support medicine use.
Promotion of healthy lifestyles (Public Health)	Each financial year pharmacies are required to participate in up to six health campaigns at the request of NHS England and NHS Improvement. This involves opportunistic one to one advice on healthy lifestyle topics such as stopping smoking, flu vaccination and increasing physical activity.
Signposting	Where pharmacies cannot provide help, they will refer patients to other healthcare professionals, care providers or other sources of help such as local or national patient support groups.
Support for self-care	Pharmacy staff can provide advice and support to patients to enable them to derive maximum benefit from caring for themselves or their families. The main focus is on self-limiting illness, but also support for people with long term conditions.

Clinical governance	<p>Pharmacies must have a system of clinical governance to support the provision of excellent care. Requirements include:</p> <ul style="list-style-type: none"> • Provision of a practice leaflet for patients • Use of standard operating procedures • Patient safety incidence reporting to the National Reporting and Learning Service (NRLS) • Conducting clinical audits and patient satisfaction surveys, having complaints and whistle-blowing policies • Acting upon drug alerts and product recalls to minimize patient harm • Cleanliness and infection control measures
Healthy Living Pharmacies (HLP)	<p>Pharmacies are commissioned to reduce health inequalities within the local community by delivering high quality health and well-being services, promoting health and providing proactive health advice to customers. There are three levels of service delivery within the HLP framework; promotion, prevention and protection. Healthy Living Pharmacies (HLP) have a health and wellbeing ethos, where everyone in the team works together to proactively engage their customers in health promotion activities through advice on smoking cessation and obesity/healthy weight. They need a health promotion zone in the pharmacy and at least one full-time equivalent health champion, who has qualified for a Royal Society for Public Health (RSPH) level 2 award in understanding health improvement. Pharmacy contractors must ensure that they are compliant with the HLP requirements from 1st January 2021, however the Distance Selling Pharmacy (DSP) website requirements do not have to be complied with until 1st April 2021.</p>

Further information is available via: <http://psnc.org.uk/>

4.1.2 Advanced Services

There are eight nationally commissioned advanced services within the NHS Community Pharmacy Contractual Framework as shown in table 2 below. Community pharmacies can choose to provide any of these listed services following appropriate training and or accreditation by NHS England and NHS Improvement.

Table 2: Advanced pharmacy services

Service	Description
New Medicine Service (NMS)	<ul style="list-style-type: none"> • This service is designed to support patients' understanding of a newly prescribed medicine for a long term condition with the aim of improving medicine adherence. The pharmacist will provide advice and information on the new medicine and how to use it when it is first dispensed. The second stage is a follow up call/meeting in around 2 weeks to discuss how the patient has been getting on with the new medicine. A final consultation around 21-28 days from starting the new medicine discusses any further issues or concerns that may require referral to the

	GP.
Appliance Use Review (AUR)	<p>This service can be carried out by a pharmacist or a specialist nurse in the pharmacy or at the patient's home. AURs should improve the patient's knowledge and use of any 'specified appliance' by</p> <ul style="list-style-type: none"> • establishing the way the patient uses the appliance and the patient's experience of such use • identifying, discussing and assisting in the resolution of poor or ineffective use of the appliance by the patient. • advising the patient on the safe and appropriate storage of the appliance and advising the patient on the safe and proper disposal of the appliances that are used or unwanted.
Community Pharmacist Consultation Service (CPCS)	<p>Since 1st November 2020, general practices and NHS 111 have been able to refer patients for a minor illness consultation via CPCS, once a local referral pathway has been agreed. This service replaces the NHS Urgent Medicine Supply service pilot. This service aims to relieve pressure on the wider NHS by connecting patients with community pharmacy which should be their first port of call as they can deliver a swift, convenient and effective service to meet their needs.</p>
Stoma Appliance Customisation (SAC)	<p>The service involves the customisation of a quantity of more than one stoma appliance, based on the patient's measurements or a template. The aim of the service is to ensure the proper use and comfortable fitting of the stoma appliance and to improve the duration of usage, thereby reducing waste. If the pharmacist is unable to provide the prescribed service, they should either refer the patient to another pharmacy or provide the patient with the contact details of at least two pharmacies or providers that are able to supply the service.</p>
Seasonal Influenza (Flu) Vaccination Service	<p>Community pharmacy has been providing flu vaccinations under a nationally commissioned service since September 2015 to support GP services in increasing vaccination rates. 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 has proved popular with patients seeking vaccinations.</p>
Hepatitis C Testing Service	<p>The Hepatitis C Testing Service commenced on 1st September 2020, focusing on the provision of point of care testing (POCT) for Hepatitis C (Hep C) antibodies for people who inject drugs who haven't yet moved to the point of accepting treatment for their substance use. Where people test positive for Hep C antibodies, they are referred for a confirmatory test and treatment. This service, in the first instance ran until 31st March 2022, but in March 2022, NHSE&I, the Department of Health and Social Care and PSNC agreed that the service should continue to be commissioned until 31st March 2023.</p>

Hypertension Case-Finding Service	Also known as the NHS Blood Pressure Check Service, from 1 st October 2021 pharmacies provide blood pressure testing to those aged over 40 to identify those with high blood pressure. Where clinically indicated, pharmacies offer 24 hour ambulatory blood pressure monitoring (ABPM), the results of which are shared with the patient's GP to inform a potential diagnosis of hypertension.
Smoking Cessation Service	Commissioned as an advanced service from 10 th March 2022, this service enables NHS trusts to refer patients to a community pharmacy of their choice to continue their smoking cessation treatment, including providing medication and support as required, with the aim of creating additional capacity in the smoking cessation pathway.

Medicine Use Reviews service was decommissioned 31st March 2021 and the C-19 Lateral Flow Device Distribution Service and Pandemic Delivery Service were decommissioned 31st March 2022. For more information visit: [Advanced Services : PSNC Main site](#).

4.1.3 Locally commissioned services

In addition to the services listed above, pharmacies can also offer services commissioned by local health commissioning organisations, Clinical Commissioning Groups and Local Authorities to meet the health needs of their local populations. Pharmacies can choose whether to provide these services.

Table 3 lists the current locally commissioned services across Leicester.

Table 3: Locally commissioned pharmacy services as at 31st March 2022

Service	Description
Emergency Hormonal Contraception (EHC)	Some pharmacies are commissioned to provide a free service to women up to 25 years of age following unprotected sexual intercourse to prevent unintended pregnancies. Pharmacies offering this service are required to undertake specific training and maintain a prescribed number of consultations per year.
C-Card Service	Some pharmacies provide a free and confidential sexual health service available to young people. The scheme was originally offered to people aged under 25 years but since removing the age limit, increasing numbers of over 25s are using the scheme. It is a plastic registration card that enables quick and easy access to free condoms. The service also offers information and advice about sexual health and relationships.
Child influenza vaccination service	The children's influenza service is normally administered in schools, however, where children are unable to have this done at school, they can receive the Fluenz/nasal flu vaccine at a local pharmacy providing this service. The purpose of the service is to ensure that patients and their parents have convenient access to the Fluenz/nasal flu vaccine.

Needle exchange	Pharmacies are commissioned to provide intravenous drug users with sterile injecting equipment in order to reduce the transmission of blood borne infections such as hepatitis and HIV.
Supervised consumption	Pharmacies are commissioned to provide registered drug addicts regular monitored doses of an opiate substitute to support them becoming progressively drug free.
Palliative Care	Pharmacies are commissioned to provide patients in the last phase of their lives (and their representatives) with access to palliative care medicines. Pharmacies accredited for this service are trained in the use of palliative care medicines and can provide advice to carers and other healthcare professionals.

4.2 The wider role of community pharmacies: non-contracted services

In addition to the above essential, advanced and locally commissioned services, all of which are commissioned by the NHS or the local authority, pharmacies also provide other significant services directly to their customers on their own account. These services are not commissioned by the CCG or Local Authority and instead are a direct arrangement between the pharmacy and patients. These can be viewed as adding to the convenience, compliance and safety of medicine collection and use.

A questionnaire has been issued to all Leicester pharmacies to collect information on other services offered locally. To date only 19/85 pharmacies have completed the questionnaire. Further information will be provided in the final PNA.

These additional services provided by pharmacies include;

Collection and delivery service (prescriptions)

Monitored dosage system (dosette box)

Extended-spectrum beta-lactamase (ESBL) stock-holding (stockholding of antibiotics used to treat more antibiotic-resistant bacteria)

Contraception

Emergency contraception

Champix

Childhood vaccinations

Travel vaccinations

Other vaccinations

Patient Group Direction Service

Period delay

Salbutamol inhalers

Supply of medicines and/or other appliances to care homes

Travel medication

Weight loss

Services for specific conditions (Chlamydia, Cholesterol, Diabetes, Gonorrhoea, Erectile dysfunction, H. pylori, Hair loss, Hay fever (fexofenadine), HbA1C, Hepatitis, HIV, HPV, Other)

4.3 Community Pharmacy IT

The Electronic Prescription Service (EPS) enables new and repeat prescriptions to be sent electronically from the GP Practice to the patient's nominated pharmacy.

Pharmacies are now able to access an electronic summary care record (SCR) for patients. The NHS Summary Care Record (SCR) is an electronic summary of key clinical information (including medicines, allergies and adverse reactions) about a patient, sourced from the GP record with the patient's consent. SCR was rolled out to pharmacies from March 2016 and helps support safer patient care and treatment.

There are also a number of apps that patients can use for ordering NHS repeat prescriptions and booking appointments.

A web-based system called PharmOutcomes¹⁰ collates information on pharmacy services. Local and national analysis and reporting of PharmOutcomes helps to improve the evidence base for more effective community pharmacy services.

4.4 Pharmacy Contracts

4.4.1 Types of Pharmacy contracts

There are four types of pharmacy contractors:

Standard contract

Healthcare professionals working in pharmacies that are held on a pharmaceutical list.

Appliance contractor

An appliance contractor provides services to people who need appliances such as stoma and incontinence care aids, trusses, hosiery, surgical stockings and dressings. Appliance contractors do not supply drugs. There are no appliance contractors in Leicester.

Dispensing Practices

GP Practices are allowed to dispense medicines and appliances to patients who live in an NHS England and NHS Improvement determined controlled locality (Rural Area) and live more than a mile from a community pharmacy. Patients may choose to receive this service and request to be considered as a dispensing patient by the GP practice. There are no dispensing practices in Leicester.

Distance selling pharmacies

¹⁰ <http://psnc.org.uk/services-commissioning/pharmoutcomes/>

Distance selling pharmacies (eg internet pharmacies) are able to provide the full range of essential, advanced and enhanced services to the population without face-to-face contact. Distance selling pharmacies receive prescriptions electronically or via post, dispense them at the pharmacy and then deliver or arrange to courier to the patient. They must provide essential services to anyone, anywhere in England where requested to do so. They may choose to provide advanced and enhanced services as long as no essential service element of the service is provided to persons present at the premises.

4.4.2 Local Pharmaceutical Service Scheme

This scheme provides pharmacy contractors on the list at 1st September 2016 and are located more than 1 mile from the nearest pharmacy with a guaranteed minimum income where their dispensing volume falls below a defined threshold. The purpose of the scheme is to secure provision in an area where it would not otherwise be viable. Local Pharmaceutical Service contracts are kept under review with regard to pharmacy provision for the local population

4.4.3 Pharmacy Access Scheme

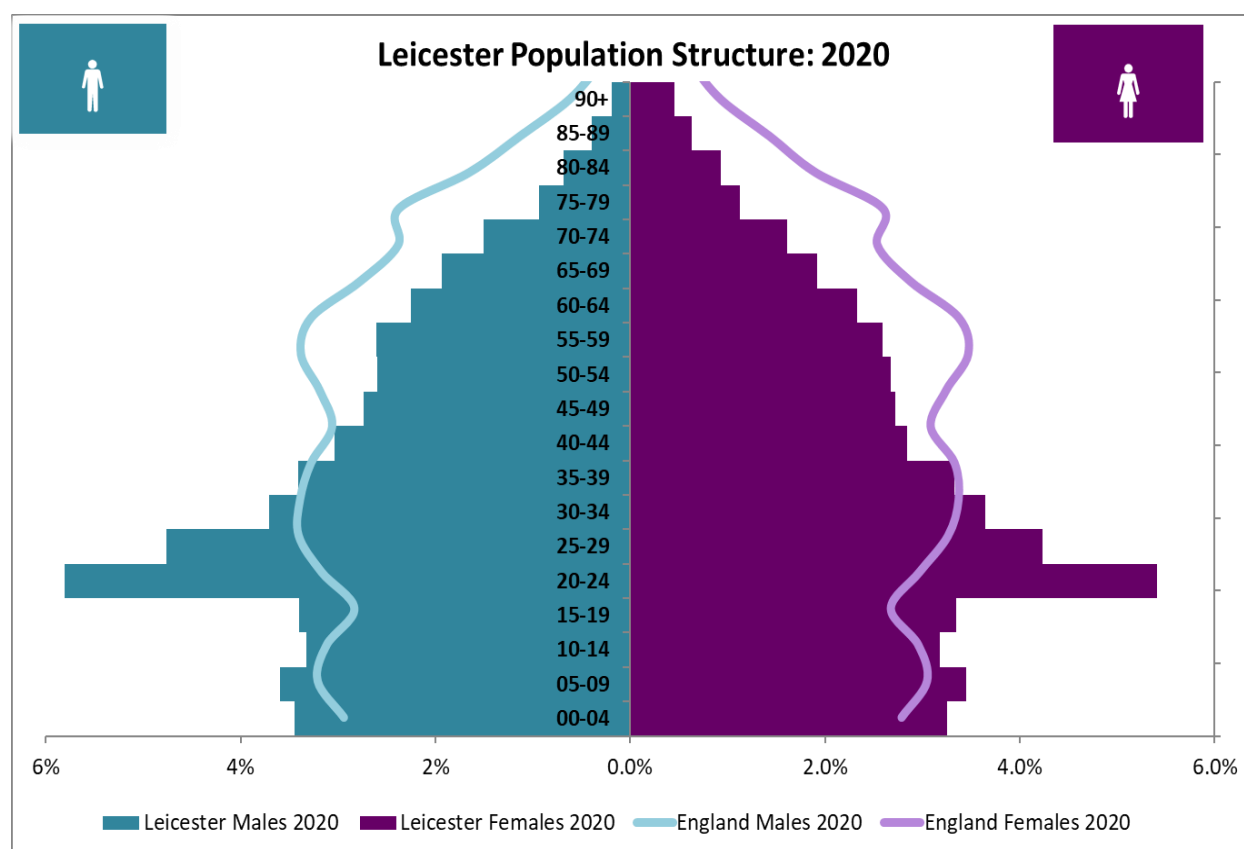
The revised Pharmacy Access Scheme started from January 2022 and supports patient access to isolated, eligible pharmacies. This scheme does not replace the Local Pharmaceutical Service scheme. There are additional eligibility criteria for this scheme which includes pharmacies in very deprived areas (top 20% of the Index of Multiple Deprivation) that are more than 0.8 of a mile from the next nearest pharmacy.

5. Health Needs in Leicester

5.1 Age profile

Leicester is the largest city in the East Midlands, with a population of around 354,000¹¹. As shown by figure 1, Leicester's population is relatively young compared with England; 20% of Leicester's population are aged 20-29 years old (compared with 13% in England), and 12% of the population are aged over 65 (compared with 19% in England). The larger proportion of younger people in Leicester reflects the student population attending Leicester's two universities and migration into the city from outside of the UK.

Figure 1: 2020 Leicester population pyramid



Data: Mid-2020 population estimates, ONS

5.2 Diversity

Leicester is home to a diverse range of faiths and communities. The following diversity data for Leicester is based at the time of the 2011 census. Leicester residents come from over 50 countries, and around a third of Leicester residents were born outside of the UK¹². Almost half of Leicester's residents classify themselves as belonging to an ethnic group that is not White. Leicester has one of the country's largest Asian communities (37% of the population), with 28% of all residents defining themselves as of Indian heritage. At 3.8%, Leicester's African community is a notably larger

¹¹ ONS Mid-year population estimates, 2020

¹² Office for National Statistics, Census 2011

proportion of the population than that for England (1.8%).

Leicester's Black, Minority Ethnic (BME) population is generally younger than the white population and there are fewer elderly people in black and minority ethnic groups.

5.3 Deprivation

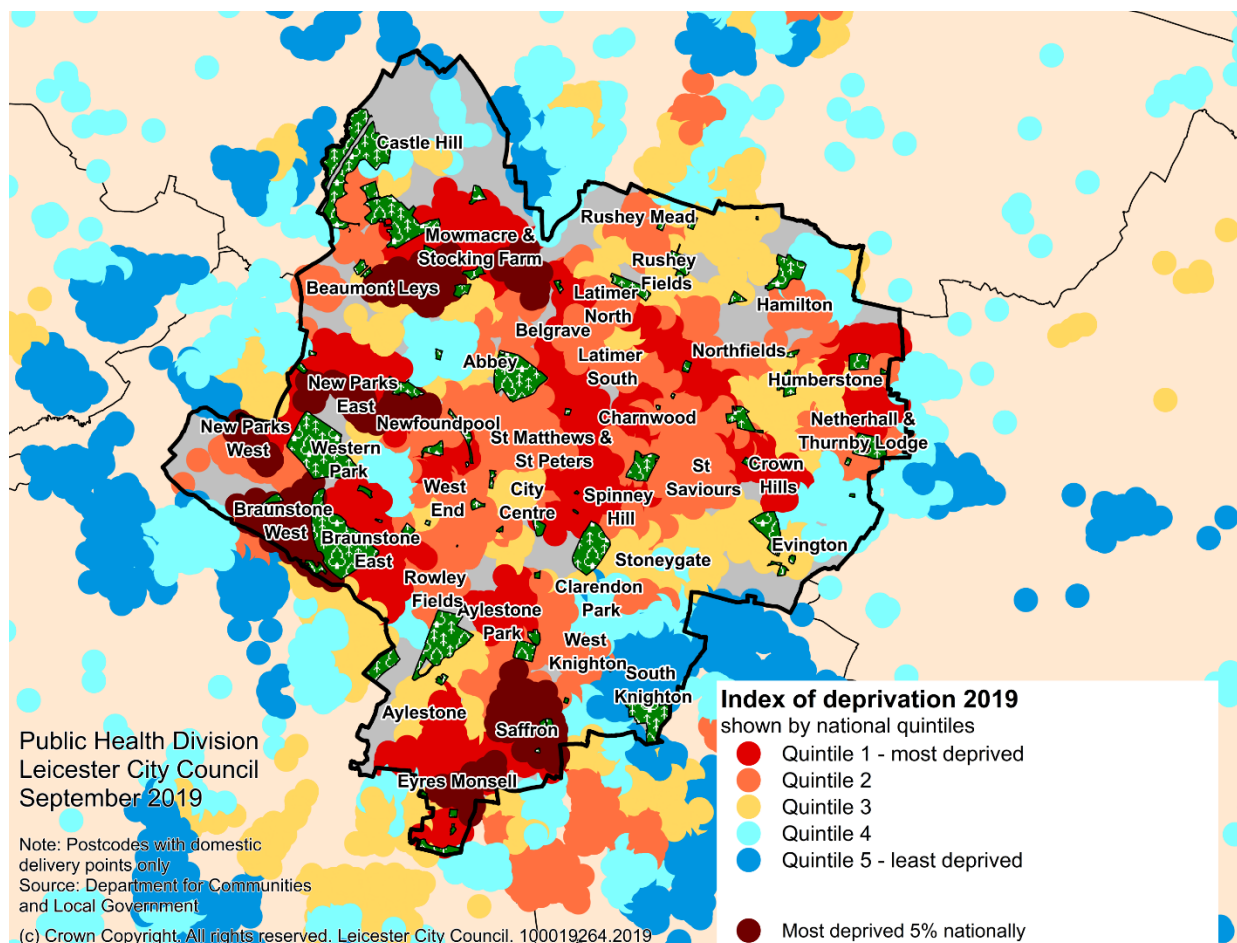
The English indices of deprivation 2019¹³ use separate measures, across 7 domains of deprivation, to calculate the Index of Multiple Deprivation 2019 (IMD 2019). This is an overall measure of multiple deprivation experienced by people living in an area. The seven domains of which the measures cover are; income deprivation, employment deprivation, health deprivation and disability, education, skills and training deprivation, barriers to housing and services, crime, and living environment deprivation.¹⁴ The data is often presented in 'deciles' or 'quintiles' of deprivation. Areas of Leicester which fall into quintile 1 are the most deprived fifth (20%) of areas in England through to those which fall into quintile 5 which are the least deprived fifth (20%) of areas in England. Similarly, areas in decile 1 are the most deprived 10% of neighborhoods nationally through to those in decile 10 which are the least deprived 10% of neighborhoods nationally.

Leicester has a high level of deprivation compared to the country as a whole and is ranked 32nd most deprived out of 317 lower-tier local authority areas. Thirty-Five percent of Leicester's population live in the 20% most deprived areas in England, and a further 38% live in the 20-40% most deprived areas. Only 2% of the Leicester population live in the 20% least deprived areas. Figure 2 shows deprivation in Leicester by Lower Super Output Area (LSOA).

¹³ English indices of deprivation 2019, Ministry of Housing, Communities & Local Government, Gov.UK, [English indices of deprivation 2019 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/government/publications/english-indices-of-deprivation-2019)

¹⁴ The English indices of deprivation 2019 (Technical report), Ministry of Housing, Communities & Local Government, Gov.UK, [English Indices of Deprivation 2019: technical report \(publishing.service.gov.uk\)](https://publishing.service.gov.uk/government/publications/english-indices-of-deprivation-2019-technical-report)

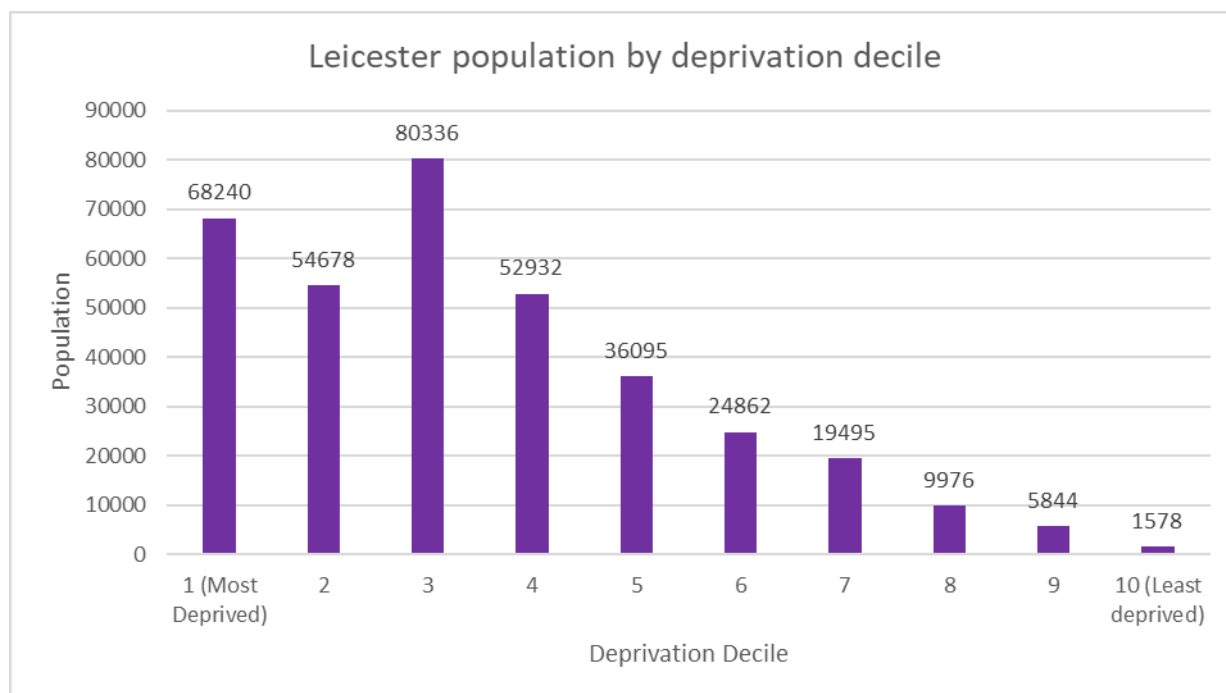
Figure 2: Deprivation in Leicester by lower super output area



Data: Index of multiple deprivation 2019

As shown in figure 3, 19% of Leicester's population (68,240 people) live in the most deprived 10% of areas in England (decile 1). 83% of Leicester's population live in the 50% most deprived areas in England (deciles 1-5). Only 1578 people in Leicester (0.4% of Leicester's population) live in the least deprived 10% of areas in England (decile 10).

Figure 3: Population by deprivation decile in Leicester City



Data: Indices of Deprivation 2019, Mid-2020 population estimates, ONS

5.4 Leicester locality area demographics

For the purposes of this PNA, Leicester City has been divided into smaller areas, these have been defined by, and are consistent with, those used in the Leicester Health and Wellbeing Survey. The Middle Super Output Areas (MSOAs) within the City have been grouped into six locality areas (Central, East, North, North West, South and West Leicester). The demographics of each of the six locality areas in Leicester City have been summarised below and in table 4.

Central:

- MSOAs: St Matthews & Highfields North, Crown Hills, Highfields South, Stoneygate North, Clarendon Park & Stoneygate South, Leicester City South and Leicester City Centre
- Leicester City locality area with the highest proportion of 20-29 year olds (33.1%), significantly higher proportion of 20-29 year olds than Leicester (20.2%) - reflects the student population attending Leicester's two universities in the centre of the City
- Smallest proportion of 65+ year olds (8.5%) of the six locality areas
- Second highest proportion of BAME residents (68.9%) of the city's locality areas

East:

- MSOAs: Hamilton & Humberstone, Colchester Road, North Evington & Rowlatts Hill, Evington and Thurnby Lodge
- Highest proportion of under 19s (29.4%) of Leicester City locality areas and a significantly higher proportion than Leicester as a whole (27.0%)

- Significantly higher proportion of the population aged 65+ (15.1%) compared to Leicester (12.3%)
- Lowest proportion of residents living in the 20% most deprived areas in England (25.3%) compared to the other locality areas in Leicester

North:

- MSOAs: Rushey Mead North, Rushey Mead South, Belgrave North West, Belgrave North East, Belgrave South, Northfields & Merrydale and Spinney Hill Road
- Highest proportion of residents classified as BAME (80.5%) and Asian (71.3%) when compared to other locality areas in Leicester and significantly higher proportions than for Leicester overall (49.5% and 37.1% respectively)
- Whole population lives in the 0-60% most deprived areas in England

North West:

- MSOAs: Beaumont Park, Stocking Farm & Mowmacre, Bradgate Heights & Beaumont Leys, Abbey Park and Newfoundpool
- Significantly higher proportion of the population classify themselves as part of a white ethnic group (67.1%) than in Leicester's population overall (50.5%)
- Significantly higher proportion of the population living in the 20% most deprived areas in England (38.9%) when compared to Leicester City as a whole (34.7%)

South:

- MSOAs: Aylestone North & Saffron Fields, Knighton, Aylestone South, Saffron Lane, Eyres Monsell, West Knighton
- Significantly higher proportion of the population aged 65+ (15.5%) than Leicester City overall (12.3%) and the highest proportion of all of the Leicester locality areas
- Significantly higher proportion of the population classify themselves as white (78.6%) compared to Leicester (50.5%), this is the highest proportion of all of the Leicester locality areas
- Highest proportion of residents living in the 20% least deprived areas in England (12.3%) compared to the other locality areas in Leicester, this value is significantly higher than Leicester (2.1%)

West:

- MSOAs: New Parks & Stokeswood, Dane Hills & Western Park, West End & Westcotes, Braunstone Park West, Braunstone Park East, Rowley Fields & Faircharm, Kirby Frith
- Significantly higher proportion of 20-29 and 30-49 year olds and a significantly lower proportion of 65+ year olds than Leicester
- Significantly higher proportion of residents classified as white (76.4%) than Leicester (50.5%)
- Significantly higher proportion of population living in the 20% (48.4%) and 20-40% (40.0%) most deprived areas in England compared to Leicester as a whole (34.7% and 37.6% respectively) and the locality area in Leicester with the highest proportion of its population living in these quintiles of deprivation

Table 4: Demographic summary of the six locality areas of Leicester City

		Central	East	North	North West	South	West	Leicester City
	Number of MSOAs	7	5	7	5	6	7	37
	ONS Mid-2020 population estimate	83,285	52,218	64,233	47,946	45,476	60,878	354,036
Age profile	% Under 19	24.5%	29.4%	27.2%	28.5%	27.1%	26.8%	27.0%
	% 20-29	33.1%	13.0%	14.3%	16.7%	15.3%	21.4%	20.2%
	% 30-49	22.6%	25.7%	26.5%	28.0%	25.2%	26.0%	25.4%
	% 50-64	11.3%	16.8%	17.5%	15.3%	17.0%	14.7%	15.1%
	% 65+	8.5%	15.1%	14.6%	11.5%	15.5%	11.1%	12.3%
Ethnicity	BAME/Not White	68.9%	53.7%	80.5%	32.9%	21.4%	23.6%	49.5%
	White	31.1%	46.3%	19.5%	67.1%	78.6%	76.4%	50.5%
	Of BAME % Asian	52.8%	41.8%	71.3%	18.2%	12.2%	11.7%	37.1%
IMD 2019 quintile	% in most deprived 20%	26.3%	25.3%	27.9%	38.9%	47.8%	48.4%	34.7%
	% in 20-40% most deprived areas	38.6%	31.2%	53.5%	35.4%	20.1%	40.0%	37.6%
	% in 40-60% most deprived	24.2%	26.1%	18.6%	16.1%	10.2%	4.7%	17.2%
	% in 60-80% most deprived	8.7%	17.4%	0.0%	9.6%	9.6%	6.9%	8.3%
	% in least deprived 20%	2.2%	0.0%	0.0%	0.0%	12.3%	0.0%	2.1%

Significantly lower than Leicester City



















































Significantly higher than Leicester City







Data: Indices of Deprivation 2019, Mid-2020 population estimates, ONS, Census 2011

5.5 Local Health Needs:


Deprivation contributes to poor health outcomes for many residents and overall health in Leicester is generally poorer than nationally. Key health issues for Leicester residents are summarised in table 5 and below:

Table 5: Health and lifestyle profile summary for Leicester City

Topic	Indicator	Time Period	Leicester	England
Overarching indicators	Life expectancy at birth (Male, 1 year range)	2020	75.0 	78.7 
	Life expectancy at birth (Female, 1 year range)	2020	80.4 	82.6 
	Healthy life expectancy at birth (Male)	2018-20	59.6 	63.1 
	Healthy life expectancy at birth (Female)	2018-20	57.5 	63.9 
Wider determinants of health	Children in relative low income families (under 16s)	2019/20	31.4% 	19.1% 
	Violent crime - hospital admissions for violence (including sexual violence) (per 100,000 population)	2018/19-2020/21	39.0 	41.9 
	Homelessness - households owed a duty under the Homelessness Reduction Act (per 1,000 population)	2020/21	19.4 	11.3 
Health improvement	Under 18s conception rate (per 1,000)	2020	11.4 	13.0 
	Obesity in early pregnancy	2018/19	23.8% 	22.1% 
	Smoking in early pregnancy	2018/19	18.2% 	12.8% 
	Smoking status at the time of delivery	2020/21	10.2% 	9.6% 
	Reception: Prevalence of overweight (including obesity)	2019/20	19.4% 	23.0% 
	Year 6: Prevalence of overweight (including obesity)	2019/20	38.4% 	35.2% 
	Emergency Hospital Admissions for Intentional Self-Harm (per 100,000)	2020/21	140.5 	181.2 
	Percentage of adults (aged 18+) classified as overweight or obese	2020/21	60.2% 	63.5% 
	Percentage of physically active adults	2020/21	55.4% 	65.9% 
	Percentage of physically inactive adults	2020/21	33.2% 	23.4% 
	Smoking Prevalence in adults (18+) - current smokers (APS)	2020	12.2% 	12.1% 
	Estimated diabetes diagnosis rate	2018	83.0% 	78.0% 
	Admission episodes for alcohol-related conditions (Narrow): New method (Persons)	2020/21	527.0 	456.0 
	Self-reported wellbeing - people with a high anxiety score	2020/21	27.3% 	24.2% 
Health protection	Population vaccination coverage - Flu (at risk individuals)	2020/21	46.2% 	53.0% * 
	Population vaccination coverage - Flu (aged 65+)	2020/21	76.1% 	80.9% * 
Healthcare and premature mortality	Infant mortality rate (per 1,000)	2018-20	5.8 	3.9 
	Under 75 mortality rate from causes considered preventable (2019 definition) (1 year range) (per 100,000)	2020	195.6 	140.5 
	Under 75 mortality rate from all cardiovascular diseases (1 year range) (per 100,000)	2020	117.9 	73.8 
	Under 75 mortality rate from cancer (1 year range) (per 100,000)	2020	143.9 	125.1 
	Under 75 mortality rate from respiratory disease (1 year range) (per 100,000)	2020	43.1 	29.4 
	Premature mortality in adults with severe mental illness (SMI) (per 100,000)	2018-20	164.4 	103.6 
	Suicide rate (per 100,000)	2018-20	9.8 	10.4 
	Hip fractures in people aged 65 and over (per 100,000)	2020/21	679 	529 
	Excess winter deaths index	Aug 2019 - Jul 2020	17.9% 	17.4% 

	Could not be calculated
	Decreasing & getting better
	Increasing & getting worse
	No significant change
	Decreasing & getting worse
	Increasing & getting better

Recent Trend:

	Significantly worse
	Not significantly different
	Significantly better

Compared to benchmark:

Data: Public Health Outcomes Framework, Fingertips, Office for Health Improvement & Disparities, 2022

Life expectancy

As shown in figure 4, life expectancy¹⁵ at birth in Leicester is significantly lower (worse) than the England average for both males¹⁶ and females¹⁷ and has been since the recording of this indicator began in 2001. In 2020 life expectancy for males in Leicester (75.0 years) is around 3.5 years lower than England (78.7 years), and for females in Leicester (80.4 years) it is around 2 years lower than England (82.6 years). Cardiovascular diseases are the largest contributor to the adverse life expectancy gap between Leicester and England, accounting for 37% of the life expectancy gap in males and 34% in females.¹⁸

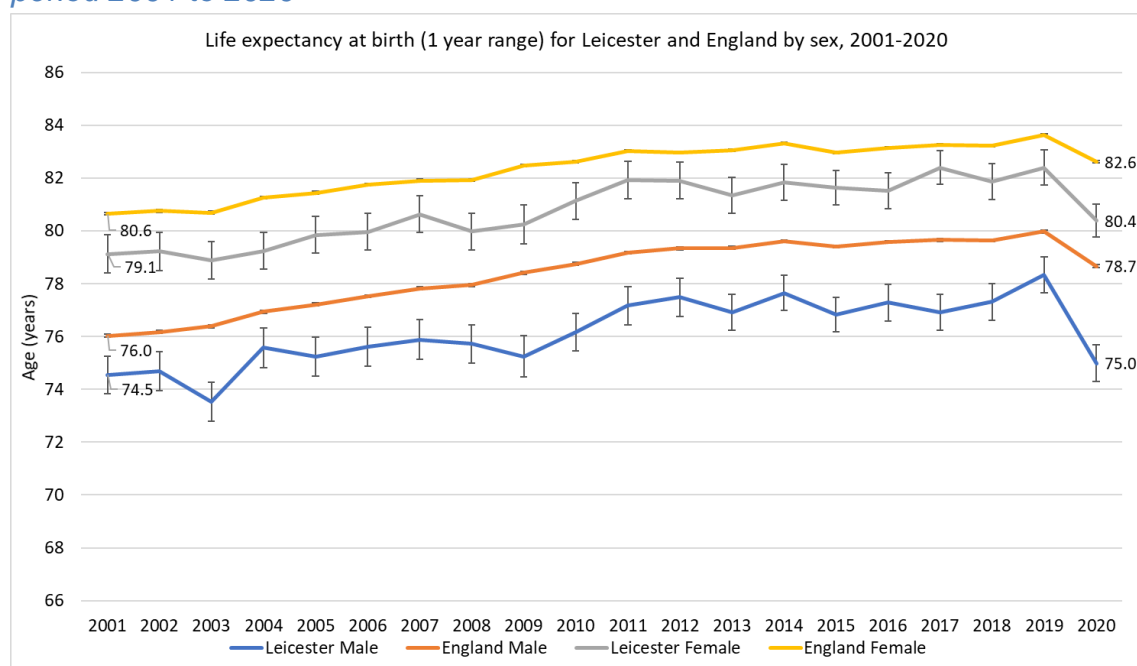
¹⁵ Average life expectancy at birth is widely used as a proxy indicator for the overall health of the population; it estimates how long a newborn child would be expected to live if the current age-specific mortality rates remain constant. However, it does not forecast how long babies born today will actually be expected to survive, as age-specific mortality rates are unlikely to remain constant for an extended length of time.

¹⁶ [Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk/)

¹⁷ [Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk/)

¹⁸ Public Health England, Segment Tool, Breakdown of the life expectancy gap between Leicester as a whole and England as a whole by cause of death, 2015-17, <https://analytics.phe.gov.uk/apps/segment-tool/>

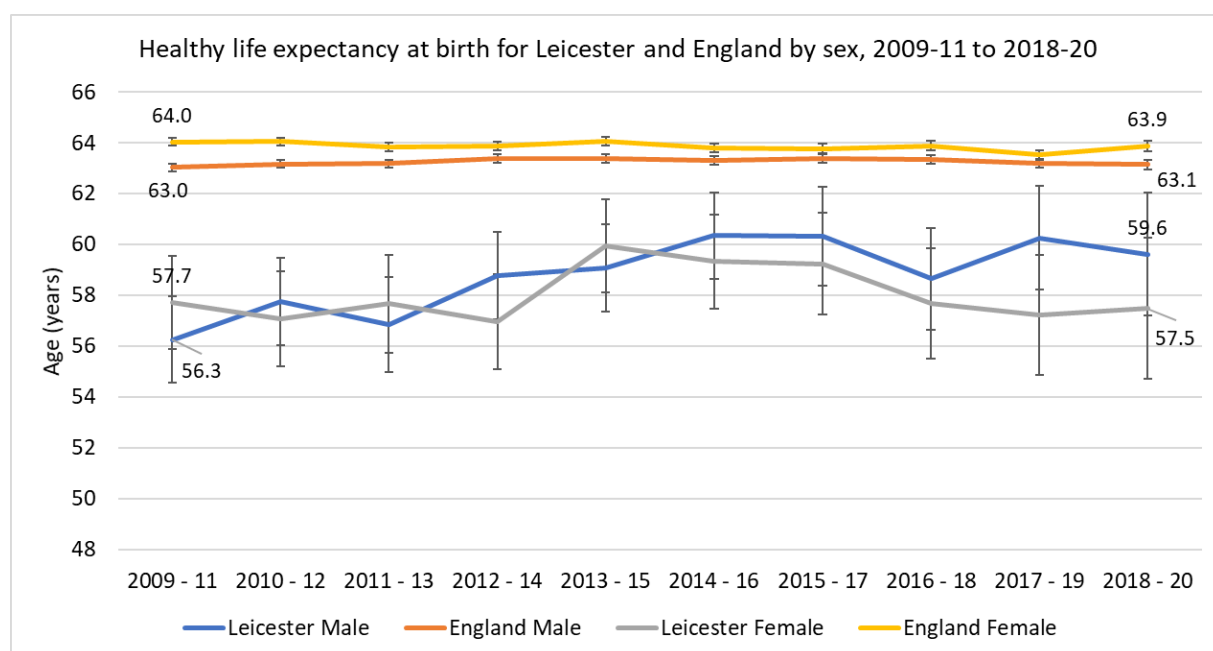
Figure 4: Life expectancy at birth (1 year range) for Leicester and England over the period 2001 to 2020



Data: Fingertips, Office for Health Improvement & Disparities, 2022

As shown by figure 5, Leicester has performed significantly worse than England for healthy life expectancy at birth for both males and females since the recording of the indicators began in 2009-11. In 2018-20, healthy life expectancy at birth for Leicester males was 59.6 years compared to 63.1 years for England. Healthy life expectancy at birth for females in Leicester and England in 2018-20 was 57.5 years and 63.9 years respectively.

Figure 5: Healthy life expectancy at birth for Leicester and England over the period 2009-11 to 2018-20



Data: Fingertips, Office for Health Improvement & Disparities, 2022

Disease prevalence

People in Leicester suffer from a number of long term conditions, as shown in table 6 below. Based on GP registers in Leicester City, the largest recorded prevalence is for cardiovascular diseases including hypertension, Coronary Heart Diseases (CHD), stroke and heart failure. Leicester also has a significantly higher than average percentage of people diagnosed with diabetes (9.6%), mainly in Leicester's South Asian population. The prevalence of people experiencing Mental Health conditions in Leicester (1.1%) is significantly higher than the England average (1.0%). Overall, Leicester has a lower prevalence of cancer and Chronic Kidney Disease (CKD) which may also be related to the diverse ethnicity found in Leicester's residents.

Since the last PNA Leicester has seen an increase in the prevalence of diabetes (0.6% increase), hypertension (increase of 0.4%), all cancers (0.3% increase), heart failure (increase of 0.1%), asthma (0.1% increase) and mental health (0.1% increase). For these diseases the prevalence for England increased by 0.5% for diabetes, 0.1% for hypertension, 0.8% for all cancers, 0.1% for heart failure, 0.5% for asthma and 0.1% for mental health.

Table 6: Percentage of patients registered at GP practices in Leicester diagnosed with long term conditions

		Long term condition	Leicester Register	Leicester Prevalence	England Prevalence
Cardio-vascular	CVD	Hypertension	51,333	12.2%	13.9%
		CHD	10,010	2.4%	3.0%
		Stroke or TIA	5,114	1.2%	1.8%
		Heart Failure	3,531	0.8%	0.9%
High dependency		Diabetes (17+)	32,031	9.6%	7.1%
		All cancers	6,908	1.6%	3.2%
		CKD (18+)	7,685	2.3%	4.0%
Respiratory	Respiratory diseases	Asthma	19,885	5.1%	6.4%
		COPD	5,800	1.4%	1.9%
Mental Health	Mental health	Mental Health	4,429	1.1%	1.0%
		Dementia	2,332	0.6%	0.7%

Significantly below England average

Significantly above England average

Data: Quality Outcomes Framework, 2020/21

Lifestyles

Poor lifestyles have an adverse effect on health outcomes and Leicester shows poorer lifestyles than nationally¹⁹ in terms of

- **Smoking prevalence:** the highest levels are seen in the west of Leicester (25%) where the smoking prevalence is significantly higher than Leicester overall (20%)²⁰
- **Alcohol consumption:** significantly lower percentage never drink over recommended maximum alcohol limit in west (39%) and south (29%) than

¹⁹ Public Health England Health Profiles: <https://fingertips.phe.org.uk/profile/health-profiles>

²⁰ Leicester Health & Wellbeing Survey, 2018. [PowerPoint Presentation \(leicester.gov.uk\)](#)

Leicester City overall (51%)²³

- **Physical activity levels are low;** low percentage of adults achieving at least 150 minutes of physical activity per week (55.4%)²¹
- **Levels of diabetes;** significantly higher diabetes (17+) prevalence in GP practices in the north (14.0%) and east (10.6%) of the city than Leicester City overall (9.6%)²²
- **Levels of obesity;** adults are similar to nationally (Leicester: 60.2%, England: 63.5%), year 6 children are significantly worse (Leicester: 38.4%, England: 35.2%)²³
- **Teenage conceptions:** under 18 conception rates for Leicester (11.4 per 1,000 population) not significantly different to England (13.0 per 1,000 population)²⁴

Leicester Locality Area Health and Lifestyle Breakdown

The health and lifestyle of each of the six locality areas in Leicester City has been summarised below and in table 7.

Central:

- Significantly higher female life expectancy than Leicester City as a whole (Central: 82.8 years, Leicester: 81.7 years)
- Significantly lower prevalence of dementia, hypertension, CHD, stroke, asthma, COPD, diabetes (17+) and cancer than Leicester City
- Significantly lower prevalence of physical activity (53.0%) and poor mental health and wellbeing (14.0%) than Leicester City (58.0% and 17.0% respectively)

East:

- Significantly higher prevalence of dementia, hypertension, CHD, stroke, asthma, COPD, diabetes (17+) and cancer than Leicester City
- Prevalence of physical activity (51.0%) is significantly lower than in Leicester City as a whole (58.0%)

North:

- Highest female life expectancy (83.5 years) across the six locality areas of Leicester and significantly higher value than for Leicester City overall (81.7 years)
- Significantly higher carer prevalence (17.0%) than Leicester City (13.0%)
- Significantly lower prevalence of cancer, COPD and asthma and a significantly higher prevalence of hypertension, CHD and diabetes (17+) than Leicester overall
- Significantly lower prevalence of smoking (14.0%) and physical activity (49.0%)

²¹ Office for Health Improvement & Disparities, Fingertips, 2019/20. [Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk/)

²² Diabetes: QOF prevalence (17+), 2020/21, Fingertips, Office for Health Improvement & Disparities. [Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk/)

²³ Office for Health Improvement & Disparities, Fingertips, 2019/20. [Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk/)

²⁴ Office for Health Improvement & Disparities, Fingertips, 2019. [Public health profiles - OHID \(phe.org.uk\)](https://publichealthprofiles.org.uk/)

compared to Leicester (20.0% and 58.0% respectively)

North West:

- Significantly higher prevalence of hypertension, COPD and cancer and a significantly lower prevalence of diabetes (17+) compared to Leicester
- Significantly lower alcohol prevalence (5.0%) than Leicester (9.0%) but a significantly higher prevalence of poor mental health and wellbeing (North West: 23.0%, Leicester: 17.0%)

South:

- Significantly higher prevalence of dementia, mental health, hypertension, CHD, stroke, asthma, COPD and cancer and a significantly lower prevalence of diabetes (17+) than Leicester
- Significantly higher prevalence of physical activity (69.0%) than Leicester (58.0%)

West:

- Life expectancy at birth for both males (74.8 years) and females (79.2 years) is significantly lower than in Leicester (76.9 and 81.7 years respectively)
- Prevalence of hypertension, stroke, asthma, COPD and cancer is significantly higher than Leicester and the prevalence of diabetes (17+) is significantly lower than Leicester
- Significantly higher prevalence of smoking (25.0%) and physical activity (72.0%) than Leicester (20.0% and 58.0% respectively)

Table 7: Health and lifestyle summary of the six locality areas of Leicester City

		Central	East	North	North West	South	West	Leicester City
Life expectancy at birth (years)	Males	76.9	77.2	77.8	77.6	77.5	74.8	76.9
	Females	82.8	81.7	83.5	81.8	81.5	79.2	81.7
Long term conditions	Dementia prevalence	0.4%	0.9%	0.6%	0.6%	0.8%	0.7%	0.6%
	Mental Health prevalence	1.0%	1.1%	1.0%	1.0%	1.3%	1.1%	1.0%
	Hypertension prevalence	8.4%	13.7%	14.1%	12.7%	13.7%	12.6%	12.1%
	CHD prevalence	1.7%	2.8%	2.8%	2.5%	2.7%	2.4%	2.4%
	Stroke prevalence	0.7%	1.6%	1.2%	1.3%	1.5%	1.3%	1.2%
	Asthma prevalence	4.4%	6.0%	4.6%	5.4%	5.8%	5.7%	5.1%
	COPD prevalence	0.5%	1.7%	0.8%	1.9%	2.3%	2.2%	1.4%
	Diabetes (17+) prevalence	5.8%	8.0%	10.6%	7.0%	6.1%	5.9%	7.4%
	Cancer prevalence	0.9%	2.1%	1.4%	1.9%	2.2%	2.0%	1.6%
Lifestyle	Smoking prevalence	18.0%	16.0%	14.0%	23.0%	24.0%	25.0%	20.0%
	Alcohol prevalence	13.0%	8.0%	7.0%	5.0%	10.0%	12.0%	9.0%
	Physical activity prevalence	53.0%	51.0%	49.0%	57.0%	69.0%	72.0%	58.0%
	Poor mental health and wellbeing prevalence	14.0%	16.0%	17.0%	23.0%	16.0%	17.0%	17.0%
	Carer prevalence	11.0%	14.0%	17.0%	10.0%	15.0%	12.0%	13.0%

Significantly lower than Leicester City

Significantly higher than Leicester City

Data: SystmOne June 2020, Leicester Health and Wellbeing Survey 2018, ONS deaths 2016-2020, ONS mid-year population estimates 2016-2020

More information on health in Leicester and health priorities can be found in:

- **Leicester Joint Strategic Needs Assessment:**

This is a series of briefings on adults and children and young people covering the health and wellbeing of people in Leicester, including data and links to

related information. [Joint Strategic Needs Assessment \(leicester.gov.uk\)](https://leicester.gov.uk/joint-strategic-needs-assessment)

- **Health profiles:** [Public health profiles - OHID \(phe.org.uk\)](https://phe.org.uk/public-health-profiles)
- **Local health information:** <http://www.localhealth.org.uk>
- **Health and Wellbeing Strategy:**

This sets out 5 strategic priorities which will be used to inform yearly operational and commissioning plans:

- Healthy places – to make Leicester the healthiest possible environment in which to live and work
- Healthy lives – to encourage people to make sustainable and healthy lifestyle choices
- Healthy ageing – to enable Leicester's residents to age comfortably and confidently
- Healthy start – to give Leicester's children the best start in life
- Healthy minds – to promote positive mental health within Leicester across the life course

[The Joint Health and Wellbeing Strategy 2019-2024 \(leicester.gov.uk\)](https://leicester.gov.uk/joint-health-and-wellbeing-strategy-2019-2024)

- **Leicester City Clinical Commissioning Group Strategic Priorities:**

The Leicester City Clinical Commissioning group holds the following strategic aims:

- Increase the health outcomes of the Leicester, Leicestershire and Rutland population.
- Reduce health inequalities across the Leicester, Leicestershire and Rutland population.
- Reduce the variation in health outcomes across the Leicester, Leicestershire and Rutland population.
- Deliver a sustainable system financial plan – ensuring funding is distributed to where services are delivered.
- Deliver NHS Constitutional requirements.
- Develop and deliver services with providers that are evidenced based and offer value for money.
- Deliver integrated health and social care.

[Strategies and reports - Leicester City Clinical Commissioning Group Leicester City Clinical Commissioning Group \(leicesterccg.nhs.uk\)](https://leicesterccg.nhs.uk/strategies-and-reports)

From 1st July 2022, Clinical Commissioning Groups will be replaced by Integrated Care Systems.

- **Leicester, Leicestershire and Rutland Integrated Care System (ICS):**

From 1st July 2022 new ICS partnerships were formed, building on the lessons of the earlier systems and achievements of earlier work through sustainability and transformation partnerships. Leicester, Leicestershire and Rutland ICS represents a new partnership between the organisations that meet health and care needs across the area, to coordinate services and to plan in a way that improves population health and reduces inequalities between different groups.

More information on ICSs is available here: [NHS England » What are](https://www.nhs.uk/what-are-ics/)

integrated care systems?

More specific information to the LLR ICS is available here: [Leicester, Leicestershire and Rutland gets go-ahead to become Integrated Care System - Leicester City Clinical Commissioning Group Leicester City Clinical Commissioning Group \(leicestercityccg.nhs.uk\)](#)

6. LOCATION AND ACCESS TO COMMUNITY PHARMACIES IN LEICESTER

Leicester has 85 community pharmacies (as of 31 March 2022) and 57 GP Surgeries (and nine branch surgeries). Leicester has an overall rate of 2.4 community pharmacies per 10,000 population, higher than the England rate of 2.1²⁵. The number of pharmacies has decreased by one since 2017, Leicester has witnessed only a slight increase in population of around 500 from 353,540²⁶ to 354,036²⁷. All Leicester pharmacies are open for at least 40 hours and 8 are open for 100 hours. Of Leicester's 85 pharmacies, 9 are distance selling pharmacies, one is a Local Pharmaceutical Service pharmacy and one pharmacy is eligible for the Pharmacy Access Scheme. There are no dispensing GP Practices in Leicester and no appliance contractors.

Pharmaceutical Needs Assessments do not cover prison pharmacy services, as found in HM Prison Leicester, Welford Road, nor hospital pharmacy services, as found in University Hospitals of Leicester NHS Trust.

6.1 Pharmacies do not serve a defined population

It is important to keep in mind, as this PNA considers the location of, and access to, community pharmacies, that pharmacies do not have a designated service area and customers, patients or the public are free to choose which pharmacy to use. This report considers provision of pharmaceutical services across Leicester city and within 1.5km of the City boundary. These pharmacies are an essential part of the picture of provision for people living in the wider urban area of Leicester who will routinely travel to pharmacies which, depending on where they live, are outside or within the city boundary, as is convenient to them.

This report considers variation in pharmacy provision across the six locality areas (Central, East, North, North West, South and West Leicester) based on the community pharmacies located within these localities and provides rates based on the populations.

This PNA considers access and use of pharmacies on the basis that people will generally use a pharmacy near to their home, but it should be clear that there is no requirement on them to do so and similarly no power for NHS England and NHS Improvement, or any other commissioner, to direct the geographical location of existing pharmacies within Leicester (or anywhere else).

²⁵ <https://www.nhs.uk/statistical-collections/general-pharmaceutical-services-england/general-pharmaceutical-services-england-201516-202021>

²⁶ Office for National Statistics, mid-year population estimates 2017

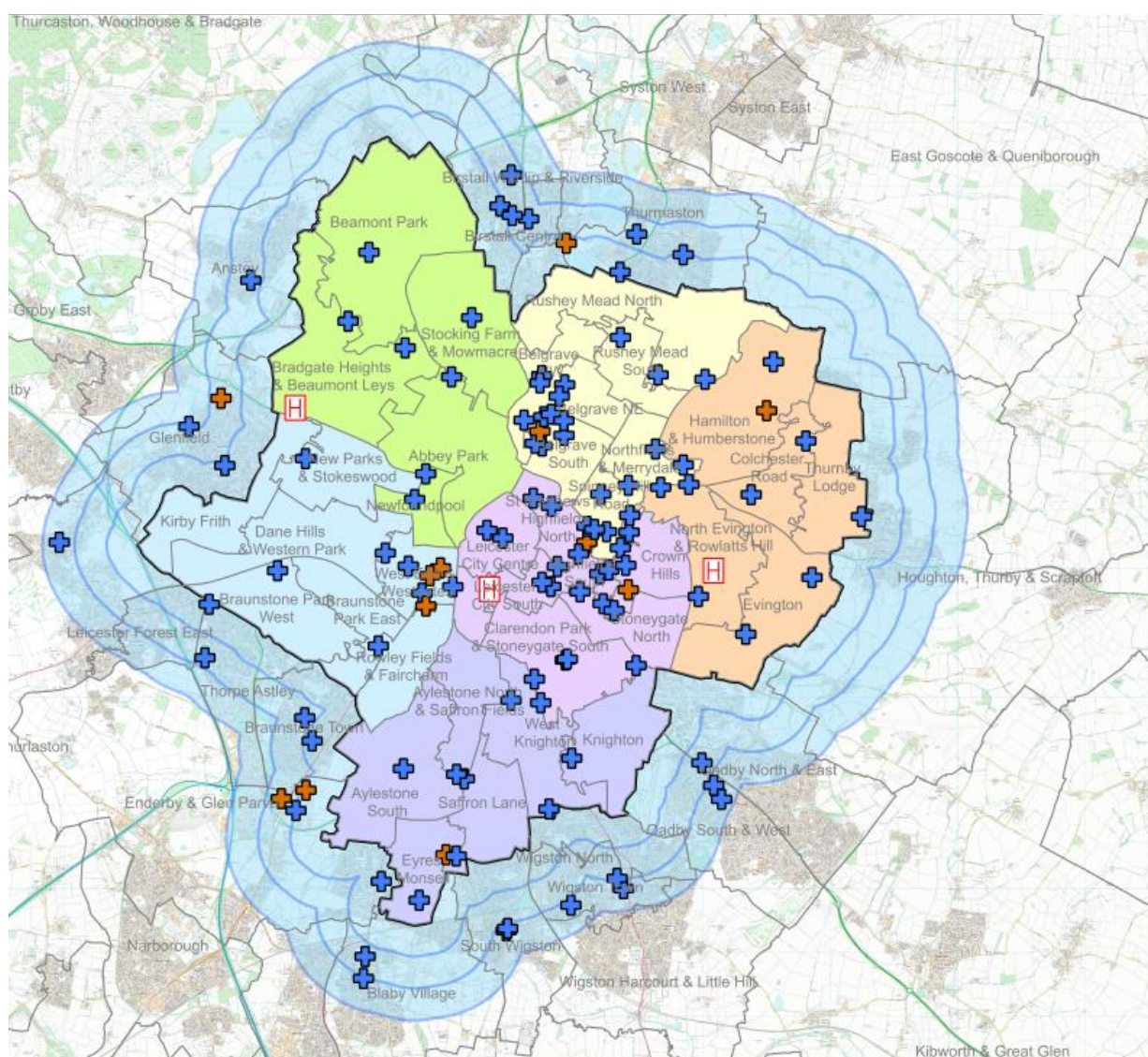
²⁷ Office for National Statistics, mid-year population estimates 2020

6.2 Location and access to pharmacies

6.2.1 Distribution of community pharmacies

Figure 6, below, shows that, in addition to the pharmacies located within the city boundary, there are 9 pharmacies within 0.5 km, a further 15 between 0.5 and 1km and 9 between 1km and 1.5km of the Leicester boundary. These pharmacies are an essential part of the picture of provision for people living in Leicester, particularly on the outskirts of the city who may travel to pharmacies outside of the city boundary. Leicestershire County Council has pointed out that proximity to Leicester City pharmacies reduces the impact of, for example, a lack of 100 hour pharmacies in some areas of the County. The impact of pharmacy service provision in Leicestershire resulting from Leicester's pharmacy service provision levels, should be kept under review, as well as issues of quality and uniformity of access to advanced and community based services.

Figure 6: Pharmacies in and around Leicester City



Pharmacies in Leicester and surrounding area by standard and extended (100 hours) opening hours

Pharmacy opening hours

- + Standard hours (106)
- + 100 hours (12)

Locality

- Central
- East
- North
- North West
- South
- West

H University Hospitals of Leicester

0.5km buffer

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Public Health Division
Leicester City Council
Created: April 2022

Data: NHS England and NHS Improvement Pharmacy data, CDS GP Practice data

Table 8 below shows the location and types of pharmacies by locality area in Leicester.

The highest rates of pharmacies are found in the north and centre of the city. There is at least one 100 hour pharmacy located in each of the locality areas with the exception of the north west of the city. There are internet/distance selling pharmacies in the central, north and south locality areas of the city. The highest number of GP surgeries are found in the centre and north of Leicester.

Table 8: Pharmacy types, GP Practices and pharmacies per 10,000 population in Leicester by locality area, 2020/21

Locality Area	Total No. of Pharmacies	100hr Pharmacies	Internet/Distance Selling Pharmacies	No. GP Surgeries (including branch surgeries)	Pharmacies per 10,000 population
Central	23	2	3	19	2.8
East	9	1	0	8	1.7
North	24	1	4	14	3.7
North West	7	0	0	7	1.5
South	11	1	2	7	2.4
West	11	3	0	11	1.8
Leicester City	85	8	9	66	2.4

Data: NHS England and NHS Improvement, ONS 2020 mid-year population estimates

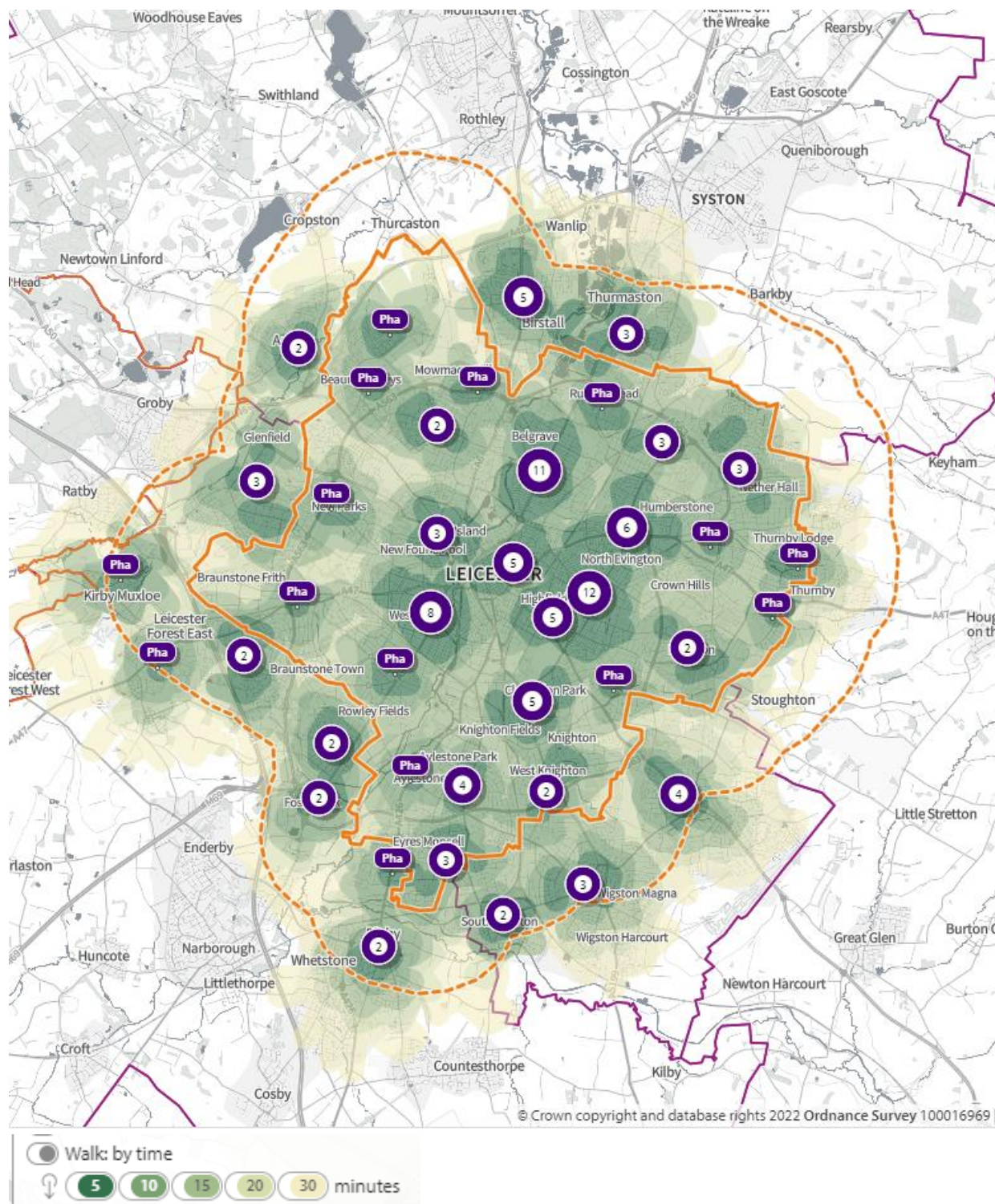
6.2.2 Walk-times to Pharmacies

The map below (figure 7) shows pharmacies accessible within 5 minute walking times.

All Leicester residents can walk to their nearest pharmacy within 20 minutes

- 96% of residents can walk to their nearest pharmacy within 15 minutes
- 86% of residents can walk to their nearest pharmacy within 10 minutes
- 58% of residents can walk to their nearest pharmacy within 5 minutes

Figure 7: Walk times to pharmacies in Leicester



Source: Strategic Health Asset Planning and Evaluation tool: <https://shapeatlas.net/>

There are a few areas of Leicester indicated as being above a 15 minute walk-time from a pharmacy. These are in the west of the city to the north of New Parks and in Braunstone Frith.

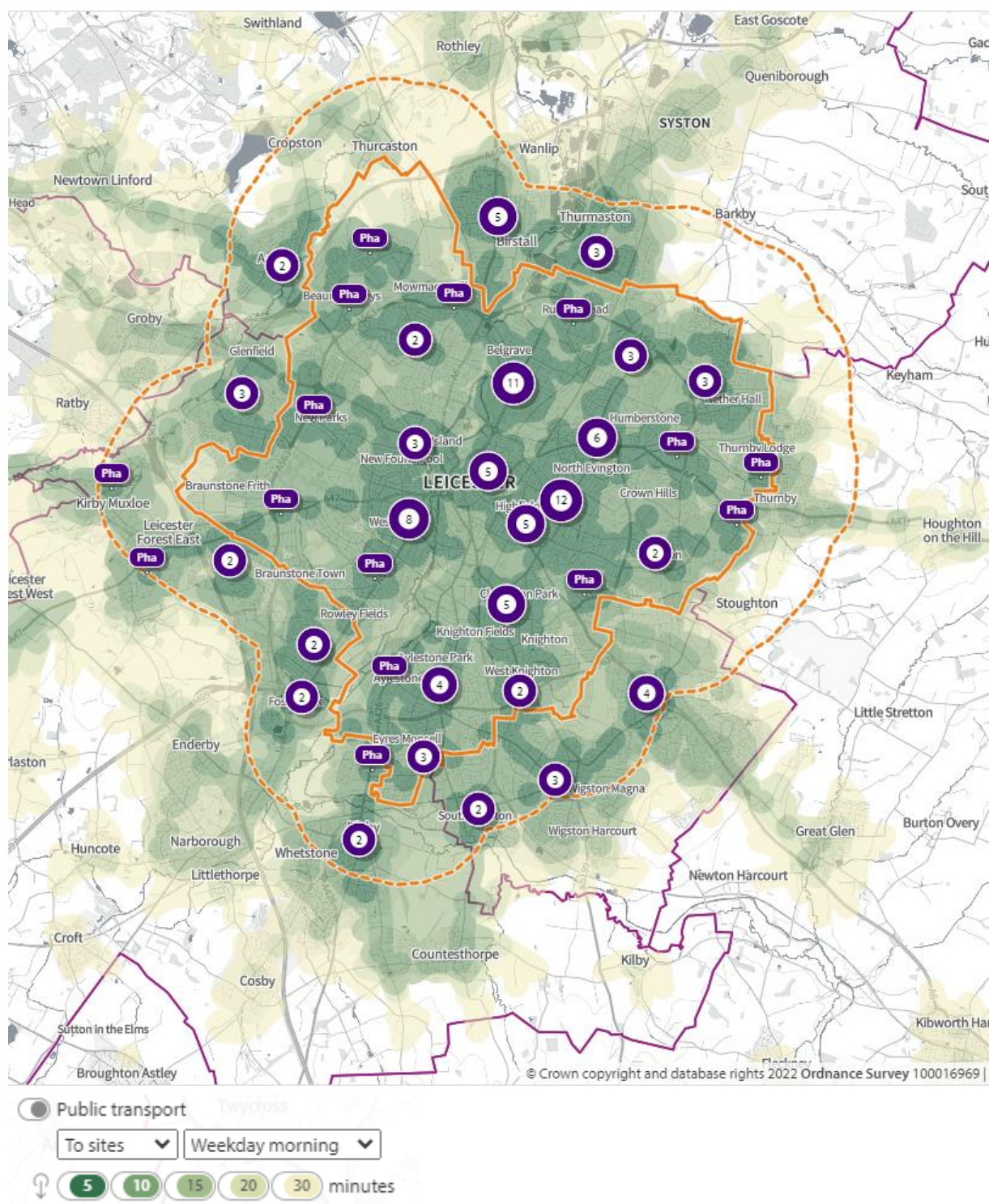
6.2.3 Public transport travel times to pharmacies

The following map (figure 8) shows travel times by public transport to pharmacies, based on travel times on a weekday morning

Based on this map, the proportion of Leicester residents able to reach their nearest pharmacy by public transport:

- all residents can reach a pharmacy within 15 minutes
- 99% of residents can reach a pharmacy within 10 minutes
- 74% can reach a pharmacy within 5 minutes

Figure 8: Public transport travel times to pharmacies



Source: Strategic Health Asset Planning and Evaluation tool: <https://shapeatlas.net/>

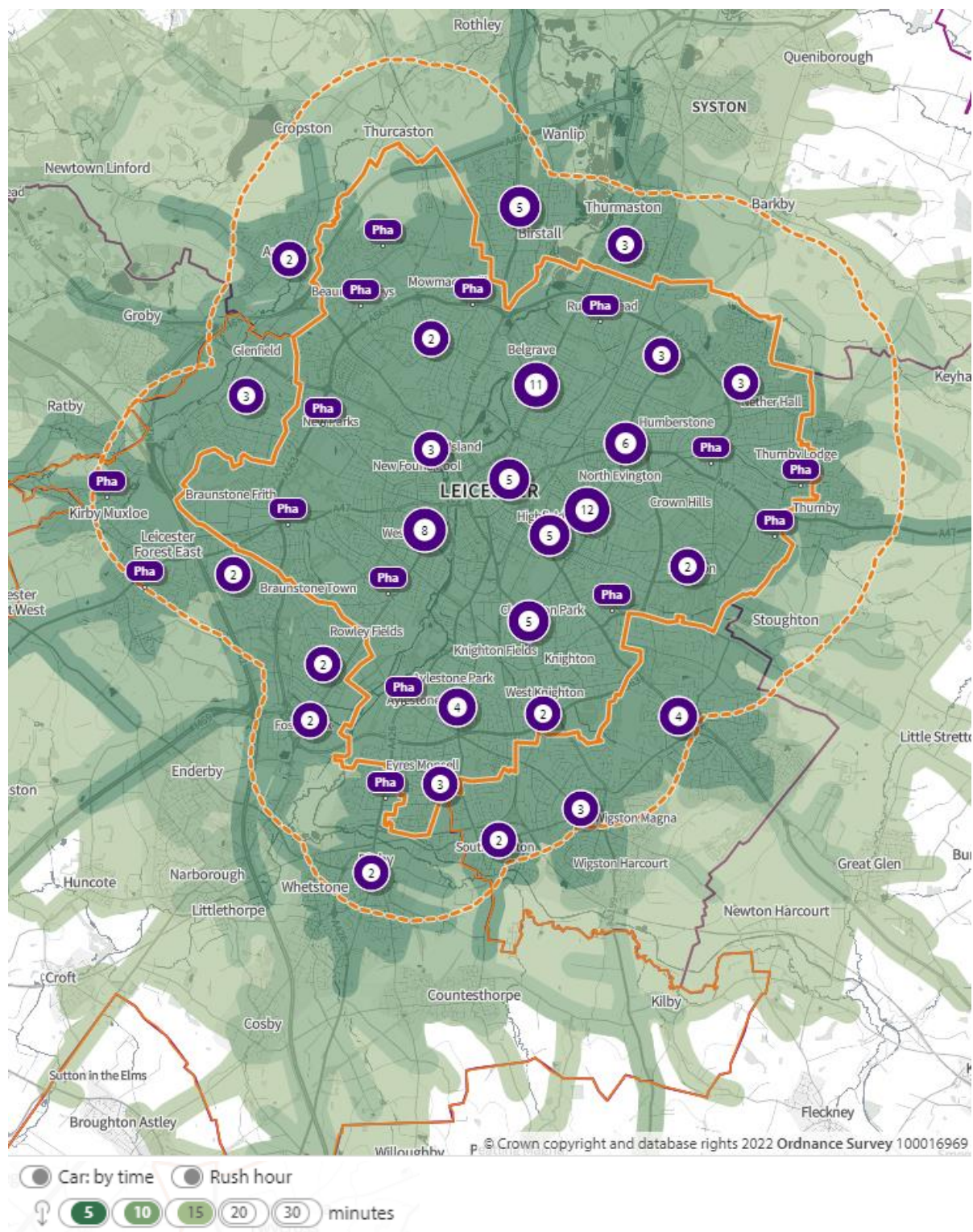
6.2.4 Drive times to Pharmacies

Figure 9 shows that all of Leicester's population can drive to their nearest pharmacy within 15 minutes and 99% can reach their nearest pharmacy within 10 minutes.

However, it should be noted that the percentage of the Leicester population which does

not own a car is significantly higher than the average for England (37% v 26%: Census 2011) and there is considerable variation across the city.

Figure 9: Drive times to pharmacies in Leicester

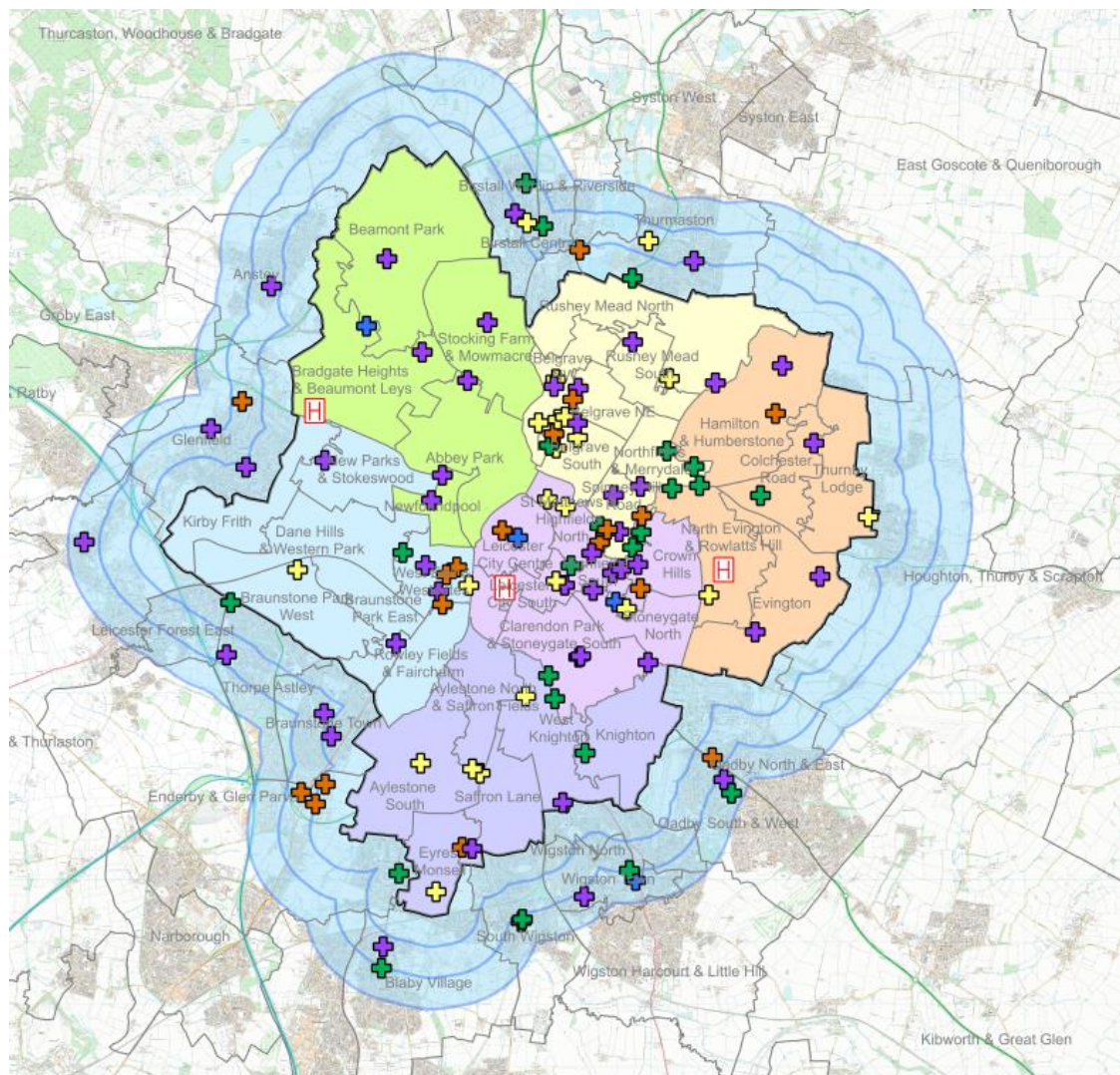


Source: Strategic Health Asset Planning and Evaluation tool: <https://shapeatlas.net/>

6.3 Pharmacy opening times

The map below (figure 10) shows pharmacies in Leicester and surrounding areas, categorised by the number of days pharmacies are open and by standard or extended hours.

Figure 10: Pharmacies in Leicester and surrounding area by opening hours



Opening days for pharmacies in Leicester and surrounding area

Pharmacy opening days

- 7 days (5)
- 7 days late (18)
- Weekdays and Sat (25)
- Weekdays and Sat am (44)
- Weekdays Only (26)

Locality

- Central
- East
- North
- North West
- South
- West

University Hospitals of Leicester

0.5km buffer

Public Health Division
Leicester City Council
Created: April 2022

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As shown in table 9 below:

- Across Leicester's locality areas, pharmacy opening times range from 336 hours to over 1200 hours per week. Areas of North West Leicester have the smallest number of open hours per week.
- The central area of Leicester and areas of North Leicester have the highest number of total weekly open hours (over 1200 open hours per week each).
- Across the city 17.6% (15) of pharmacies are open 7 days a week (including standard and late opening hours).
- 56.5% (48) of pharmacies are open weekdays and at least some time on Saturday (weekdays and sat and weekdays and sat am).
- All locality areas have at least two pharmacies open Saturday am, with only North West Leicester having no pharmacies open Saturday pm.
- Services are more restricted on Sundays.
- 25.8% (22) of pharmacies are open only on weekdays.

Table 9: Pharmacy opening days by locality area, 2020/21

Locality Area	7 days	7 days late	Weekdays and Sat	Weekdays and Sat am	Weekdays Only	Leicester City Total	Of Leicester total - distance selling pharmacies	Weekly total hours open	Population	Hours open per week per 10,000 population
Central	2	3	6	8	4	23	3	1244.9	83285	149.5
East	0	1	2	4	2	9	0	492.3	52218	94.3
North	0	4	5	8	7	24	4	1235.5	64233	192.3
North West	1	0	0	6	0	7	0	335.8	47946	70.0
South	0	1	2	2	6	11	2	550.0	45476	120.9
West	0	3	1	4	3	11	0	696.4	60878	114.4
Leicester City To	3	12	16	32	22	85	9	4554.9	354036	128.7
Distance from Leicester boundary	7 days	7 days late	Weekdays and Sat	Weekdays and Sat am	Weekdays Only	Total within each distance of Leicester boundary				
0.0 - 0.5km	0	2	3	4	0	9				
0.5 - 1.0km	0	4	4	5	2	15				
1.0 - 1.5km	2	0	2	3	2	9				
Total within 1.5km of Leicester	2	6	9	12	4	33				

Data: NHS England and NHS Improvement, ONS 2020 mid-year population estimates

The opening hours of individual pharmacies by locality areas are given in Appendix 1.

6.4 Accessibility of services

Within the pharmacy questionnaire, pharmacies were asked which of the below facilities they have to help people access services. The initial response to this survey has been low and the survey has been extended to gain a fuller response. This section of the PNA will be updated once those results have been obtained.

Access facilities include:

- Automatic door assistance
- Bell at the front door

- Disabled toilet facility
- Hearing loop
- Large print labels/leaflets
- Wheelchair ramp access
- Dementia-friendly space

6.5 Conclusions

This section has described the types and locations of community pharmacies in Leicester. It should be noted that this PNA does not include pharmacy services not open to the general public, that is prison and hospital pharmacy services.

There is currently sufficient provision of pharmacies in Leicester City. Leicester has 85 community pharmacies (as of 31st March 2022) - a rate of 2.4 community pharmacies per 10,000 population which is higher than the average for England, 2.1 pharmacies per 10,000 population.^{28, 29}

Community pharmacies do not serve defined populations or geographical areas. This PNA considers access and use of pharmacies on the basis that people will generally use a pharmacy near to their home, GP surgery or workplace.

Generally, almost everyone in Leicester is able to access a pharmacy by walking, public transport or private car within what can be considered a reasonable time. A distance within 1km, or 20 minute walk, 15 minute public transport journey or 5 minute drive are considered to be reasonable access times and distances to a community pharmacy.

It is evident that there is clustering of pharmacy locations not necessarily related to underlying health need but rather to historical and commercial decisions made over a number of years, or decades. More pharmacies are concentrated in the north central and east central areas of the city with fewer in the west and outer areas of the city.

All pharmacies in the city are open for at least 40 hours and 8 are open for 100 hours. A number of pharmacies open for longer than their contracted hours.

There are nine pharmacies within 0.5 km, a further 15 between 0.5 and 1km and nine between 1km and 1.5km of the Leicester boundary. These pharmacies are an essential part of the picture of provision for people living in Leicester, particularly toward the outskirts of the city.

Further details of the services provided by community pharmacies and their delivery are considered in the next chapter.

²⁸ NHS Business Service Authority. General Pharmaceutical Services in England: 2015-16 to 2020-21. (2021) [General Pharmaceutical Services in England 2015/16 - 2020/21 | NHSBSA](#)

²⁹ ONS mid-year 2020 population estimates

7. Current Pharmacy Service Provision

This section provides information regarding the delivery of essential, advanced and locally commissioned services by pharmacies in Leicester. All pharmacies provide essential services, most provide advanced services and pharmacies can choose which, if any, locally commissioned services they wish to offer.

7.1 Essential Services

Essential services are described in section 4.1.1 and constitute the following:

- Dispensing and repeat dispensing of medicines
- Dispensing appliances
- Repeat prescription
- Clinical governance
- Promotion of healthy lifestyles (Public Health)
- Discharge medicines service
- Disposal of unwanted medicines
- Signposting
- Support for self-care
- Healthy Living Pharmacies (2021)

7.1.1. Dispensing and repeat dispensing

During 2020 the total prescribing costs for Leicester City CCG were over £51,500,000 (see table 10 below). The top three causes for prescriptions were the endocrine system, central nervous system disorders, and cardiovascular diseases. These accounted for more than half of the total cost of prescriptions. Prescribed items are associated with the GP practice of the patient rather than the patient's residence, so it is not possible to show the data by area of residence.

Table 10: Prescription items and associated costs, Leicester City CCG, 2020

Description	Number of Items	Total Cost (£)
Endocrine System	875,095	£10,895,757.65
Central Nervous System	1,178,056	£8,570,168.62
Cardiovascular System	1,991,352	£6,943,342.29
Respiratory System	429,825	£5,262,686.10
Nutrition and Blood	390,049	£4,676,206.04
Gastro-Intestinal System	580,496	£2,721,513.59
Appliances	281,958	£2,645,008.94
Stoma Appliances	37,596	£1,897,800.39
Skin	179,661	£1,473,964.42
Obstetrics,Gynae+Urinary Tract Disorders	140,941	£1,042,268.79
Eye	121,900	£1,034,114.92
Infections	167,647	£893,607.46
Musculoskeletal and Joint Diseases	163,077	£729,417.05
Malignant Disease & Immunosuppression	20,239	£638,006.04
Immunological Products and Vaccines	64,946	£596,815.44
Dressings	17,118	£518,029.25
Ear, Nose and Oropharynx	58,890	£347,217.73
Incontinence Appliances	12,330	£288,499.42
Anaesthesia	10,033	£279,919.26
Other drugs and preparations	5,017	£156,649.15
Grand Total	6,726,226	£51,610,992.55

Data: [OpenPrescribing.net](https://openprescribing.net)

7.2 Advanced Services

Community pharmacies can choose to provide a range of advanced services as long as they meet the requirements set out in the Secretary of State Directions.

There are 8 advanced services: ³⁰

- Appliance Use Review (AUR)
- Community Pharmacist Consultation Service
- Flu Vaccination Service
- Hepatitis C Testing Service
- Hypertension Case-Finding Service
- New Medicine Service (NMS)
- Stoma Appliance Customisation (SAC)
- Smoking Cessation Service (Commissioned as an advanced service from 10th March 2022)

Note: The Medicines Use Review and Prescription Intervention Service (MUR) was decommissioned on 31st March 2021. Covid-19 Lateral Flow Device Distribution Service ran from March 2021 to March 2022 and are excluded from this PNA

Where available, data on the provision of these advanced services in Leicester has been provided in the sections below.

Table 11 shows the provision of advanced services in Leicester pharmacies.

Table 11: Advanced Service Provision in Leicester Pharmacies – Number of pharmacies providing each advanced service, 2021/22

	Total Number of Pharmacies	New Medicine Service (NMS) Activity	Appliance Use Reviews (AUR) Activity	Stoma Customisation (SAC) Activity	Community Pharmacist Consultation Service (CPCS) Activity	Hepatitis C Antibody Testing Service Activity	Seasonal Influenza Vaccination Activity	Covid Vaccination Service Activity
Central	23	20	0	2	18	0	18	2
West	11	11	0	1	11	0	10	2
North	24	20	0	0	19	0	18	4
East	9	9	0	1	9	0	8	2
North West	7	7	0	0	7	0	6	2
South	11	9	0	1	10	0	9	1
Leicester City	85	76	0	5	74	0	69	13
Distance from Leicester boundary	Total Number of Pharmacies	New Medicine Service (NMS) Activity	Appliance Use Reviews (AUR) Activity	Stoma Customisation (SAC) Activity	Community Pharmacist Consultation Service (CPCS) Activity	Hepatitis C Antibody Testing Service Activity	Seasonal Influenza Vaccination Activity	Covid Vaccination Service Activity
0km to 0.5km	10	8	0	0	8	0	6	0
0.5km to 1km	15	15	0	2	11	0	13	1
1km to 1.5km	8	8	0	1	7	0	7	1
Total within 1.5km of Leicester	33	31	0	3	26	0	26	2

Source: NHS England and NHS Improvement and NHS Business Services Authority – Advanced service flu report, June 2022,

³⁰ [Advanced Services : PSNC Main site](#)

7.2.1 New Medicines Service

The New Medicines Service (NMS) is available for people with the conditions below who have been newly prescribed a listed medicine:

- asthma and COPD
- diabetes (Type 2)
- antiplatelet / anticoagulant therapy
- hypertension
- high cholesterol
- osteoporosis
- gout
- glaucoma
- epilepsy
- Parkinson's disease
- urinary incontinence or retention
- heart failure, coronary heart disease, atrial fibrillation or heart attack
- stroke or transient ischaemic attack (TIA)

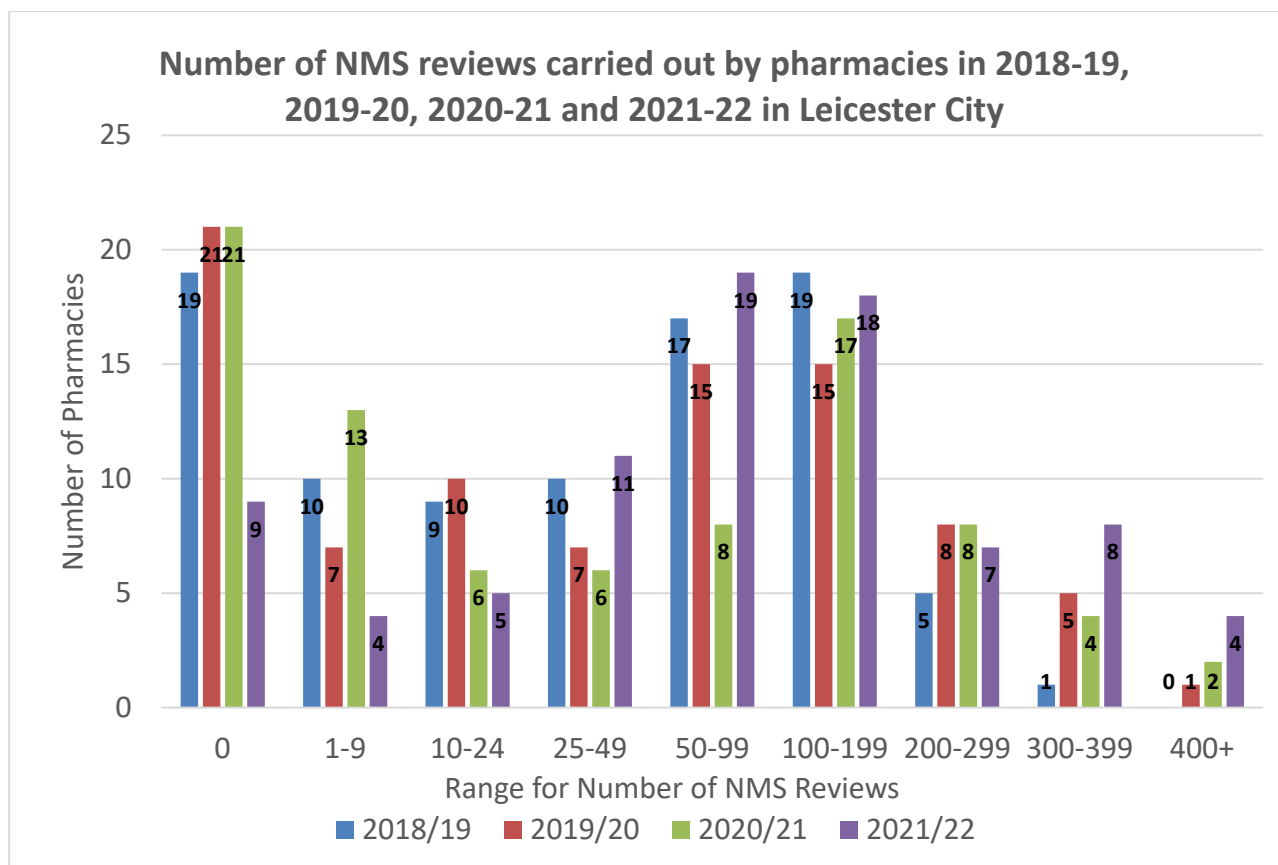
Pharmacists can intervene and provide support and advice to patients managing a long-term condition, making sure patients understand how the medication should be taken, thus improving their self-management of the condition.

Around 10,900 NMS reviews were carried out by 76 pharmacies during 2021/22. This represents 31 NMS per 1,000 population, with the lowest rate in the east of the city and the highest rate in the north of the city (see figure 12).

The number of NMS reviews carried out by any accredited pharmacy in Leicester ranged from 1 to 547 in 2021/22, with most pharmacies carrying out up to 200 reviews.

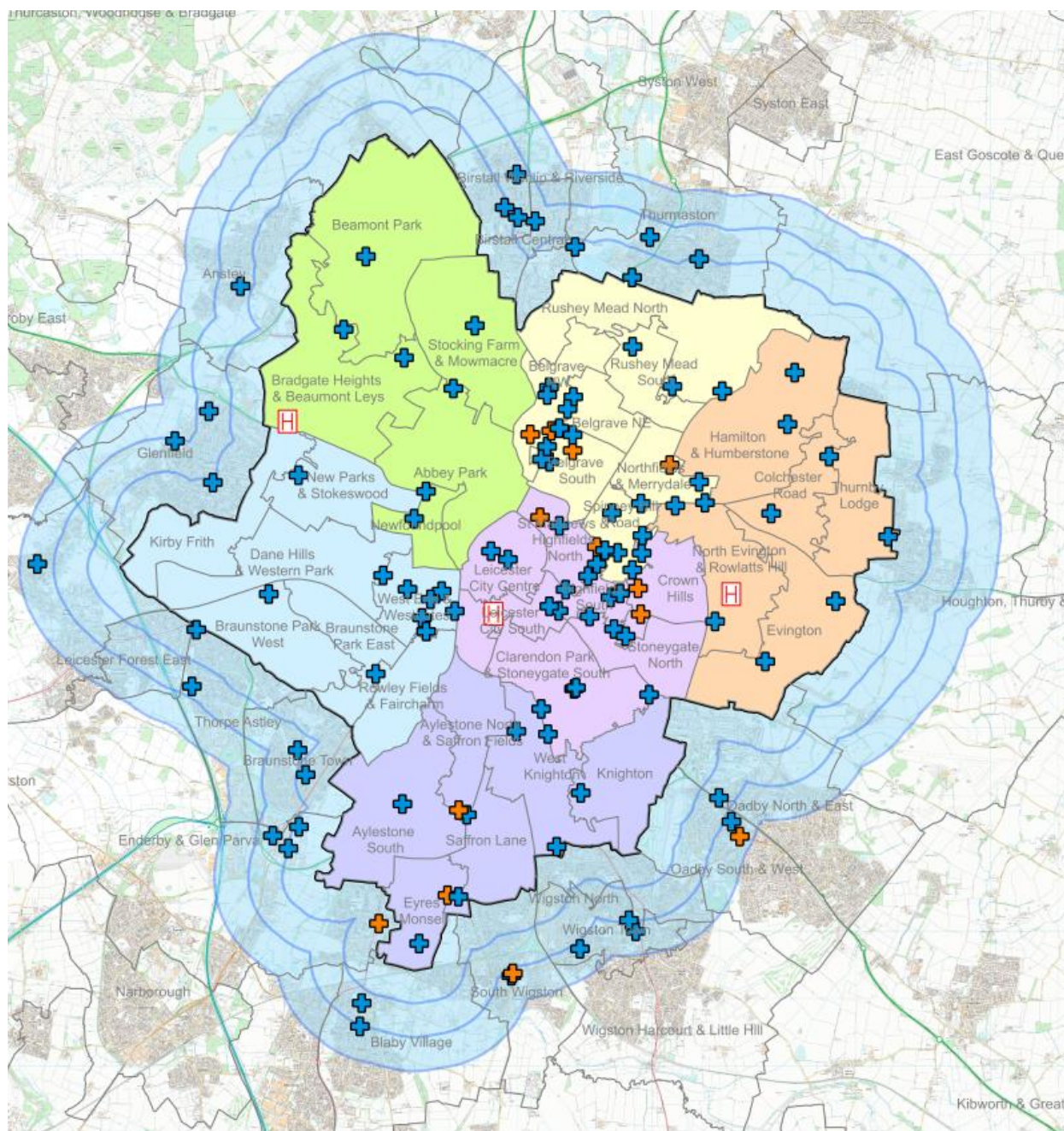
Larger numbers of NMS reviews were carried about by more pharmacies in 2021-22 than in previous years, potentially as a result of the Covid-19 pandemic (see figure 11 below).

Figure 11: Number of NMS carried out by pharmacies in 2018/19, 2019/20, 2020/21 and 2021/22



Data: NHS England and NHS Improvement

Figure 12: Pharmacies providing New Medicines Services



Pharmacies providing New Medicines Services in Leicester and surrounding area

New Medicines Service provision 2022

- + NMS provided (105)
- + NMS not provided (13)

Locality

- Central
- East
- North
- North West
- South
- West

- H University Hospitals of Leicester
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Data: NHS England and NHS Improvement

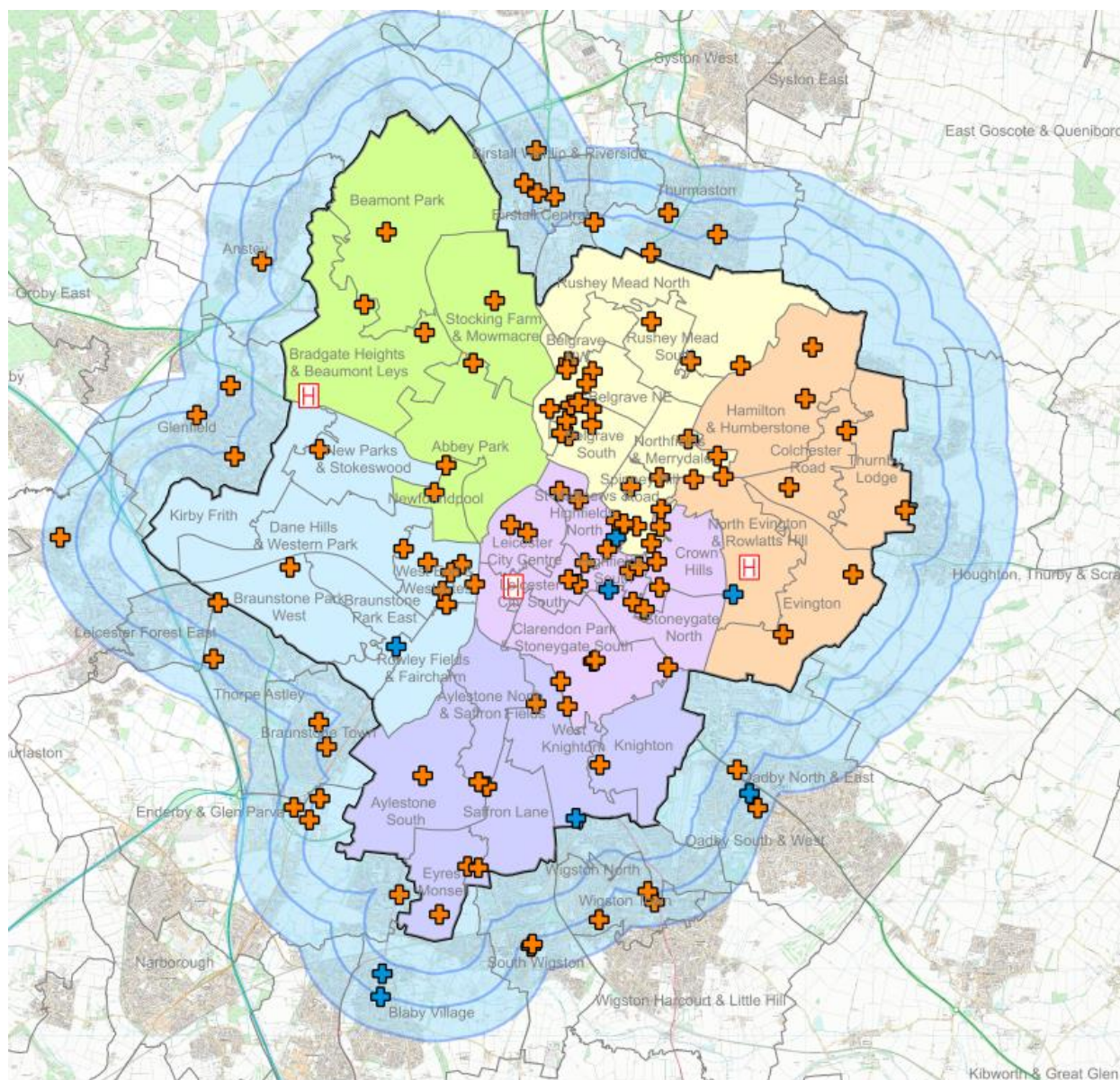
7.2.2 Stoma Appliance Customisation

This service ensures comfortable fitting of the stoma appliance (based on the patient's measurements or a template) and proper use of the appliance to improve patient comfort, the duration of usage and level of waste.

As shown in figure 13, Stoma Appliance Customisation (SAC) was provided at 5 out of 85 (5.9%) pharmacies in Leicester in 2021/22, an increase on the 4.4%, 4.5% and 3.5% of pharmacies providing SAC in 2018/19, 2019/20 and 2020/21 respectively. The percentage of pharmacies providing SAC in Leicester in 2021/22 is lower than the national average of 10.9% of community pharmacies and appliance contractors providing SAC services in 2020/21³¹. The SAC service usually involves delivery to the patient's home and is also available from other providers.

³¹ General Pharmaceutical Services Report, England 2015/16 to 2020/21: [General Pharmaceutical Services in England 2015/16 - 2020/21 | NHSBSA](#)

Figure 13: Pharmacies providing Stoma Appliance Customisation



Pharmacies providing Stoma Appliance Customisation Service in Leicester and surrounding area

Stoma Appliance Customisation Service 2022

- + Stoma Appliance Customisation provided (8)
- + Stoma Appliance Customisation not provided (110)

Locality

- Central
- East
- North
- North West
- South
- West



University Hospitals of Leicester

0.5km buffer

Public Health Division
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Source: NHS England and NHS Improvement

7.2.3 Appliance Use Reviews

Appliance Use Reviews (AURs) can be carried out by a pharmacist or a specialist nurse in the pharmacy or at the patient's home. AURs should improve the patient's knowledge and use of any 'specified appliance'.

The service allows 1 AUR per 1,000 prescriptions. No pharmacies in Leicester are accredited for AURs in 2021/22, with no pharmacies providing this service in Leicester since 2018/19 when one pharmacy provided AUR. Nationally, 0.6% of community pharmacies and appliance contractors provided AUR services in 2020/21³².

7.2.4 Community Pharmacist Consultation Service

The Community Pharmacist Consultation Service (CPCS) launched on 29th October 2019 as an advanced service. This service replaced the NHS Urgent Medicine Supply Advanced Service (NUMSAS) pilots and connects patients who have a minor illness or need an urgent supply of a medicine with a community pharmacy. Since 1st November 2020 general practices, NHS 111, Integrated Urgent Care Clinical Assessment Services and in some cases the 999 service have been able to refer patients for a minor illness consultation via CPCS.³³ The aim is that the CPCS will relieve pressure on the wider NHS by connecting patients with community pharmacy.

As shown in table 12, in 2021/22 over 4,900 community pharmacist consultations were provided through 74 pharmacies in Leicester, a rate of 2.1 pharmacies providing consultations per 10,000 population – the same rate as for 2020/21. 87% of pharmacies in Leicester were providing the community pharmacist consultation service in 2021/22. Leicester witnessed an increase in the number of consultations provided from 2020/21 to 2021/22 with 2047 and 4942 consultations provided across the city respectively.

North Leicester had the highest rate of pharmacies providing the community pharmacist consultation service per 10,000 population in 2021/22 with a rate of 3.0 per 10,000 population, whilst North West Leicester had the lowest rate (1.5 per 10,000 population) (see figure 14).

³² General Pharmaceutical Services in England, 2015/16 to 2020/21 [General Pharmaceutical Services in England 2015/16 - 2020/21 | NHSBSA](#)

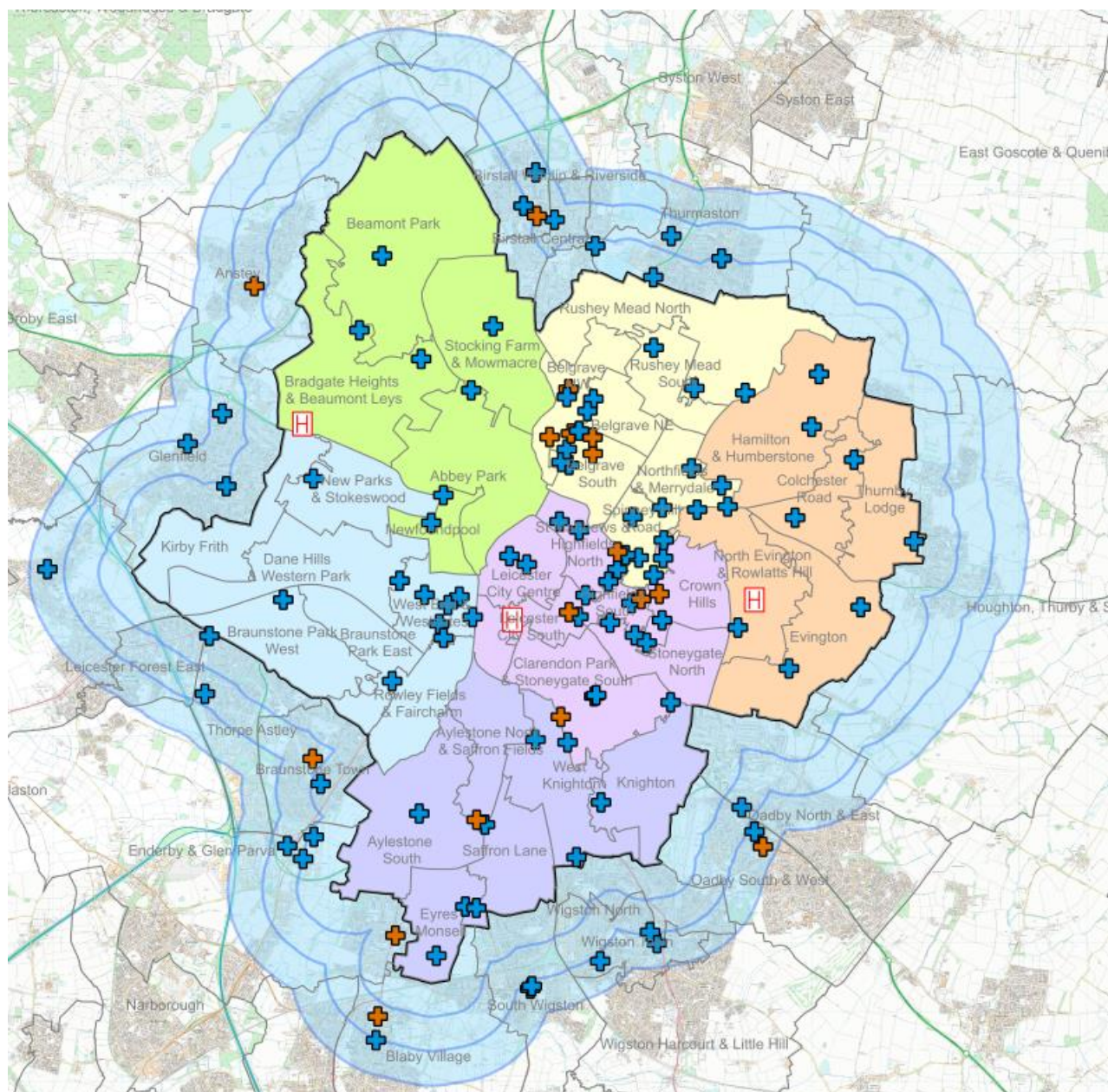
³³ Pharmaceutical Services Negotiating Committee, Community Pharmacist Consultation Service (CPCS) [Community Pharmacist Consultation Service \(CPCS\) : PSNC Main site](#)

Table 12: Provision of CPCS in Leicester pharmacies, 2021/22

Locality Area	Number of pharmacies providing CPCS	Number of consultations provided	Population (2020 MYE)	Pharmacies providing CPCS per 10,000 population
Central	18	879	83285	2.2
East	9	525	52218	1.7
North	19	1560	64233	3.0
North West	7	369	47946	1.5
South	10	290	45476	2.2
West	11	1319	60878	1.8
Leicester City	74	4942	354036	2.1
Distance from Leicester boundary	Number of pharmacies providing CPCS	Number of consultations provided		
0km-0.5km	8	800		
0.5km-1.0km	11	2062		
1.0km-1.5km	7	257		
Total within 1.5km of Leicester	26	3119		

Data: NHS England and NHS Improvement

Figure 14: Pharmacies providing Community Pharmacist Consultation Services



Pharmacies providing Community Pharmacist Consultation Services in Leicester and surrounding area

Community Pharmacist Consultation Service 2022

- + Community Pharmacist Consultations provided (100)
- + Community Pharmacist Consultations not provided (18)

Locality

- Central
- East
- North
- North West
- South
- West

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0.5km buffer

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Data: NHS England and NHS Improvement

7.2.5 Flu vaccination Service

The flu vaccination service runs each year alongside the GP service, aiming to vaccinate all patients who are at risk of developing more serious complications from the virus. These include people aged 65 years and over, pregnant women and those with certain health conditions.

In 2021/22, over 28,120 flu vaccinations were provided through 69 pharmacies in Leicester, a rate of 2.6 pharmacies providing flu vaccinations per 10,000 population 18+ (see table 13). This has increased compared to the 2016/17 data included in the previous version of this document where Leicester City had a rate of 1.7 pharmacies providing flu vaccination services per 10,000 population 18+. 81% of pharmacies in Leicester were providing flu vaccinations in 2021/22 compared to 84.4% of community pharmacies nationally.

Central (2.7 per 10,000 population 18+), South (2.6) and North (3.7) Leicester have the highest rates of pharmacies providing flu vaccinations per 10,000 population 18+, with North West (1.7) Leicester having the lowest rate (see table 13 and figure 15).

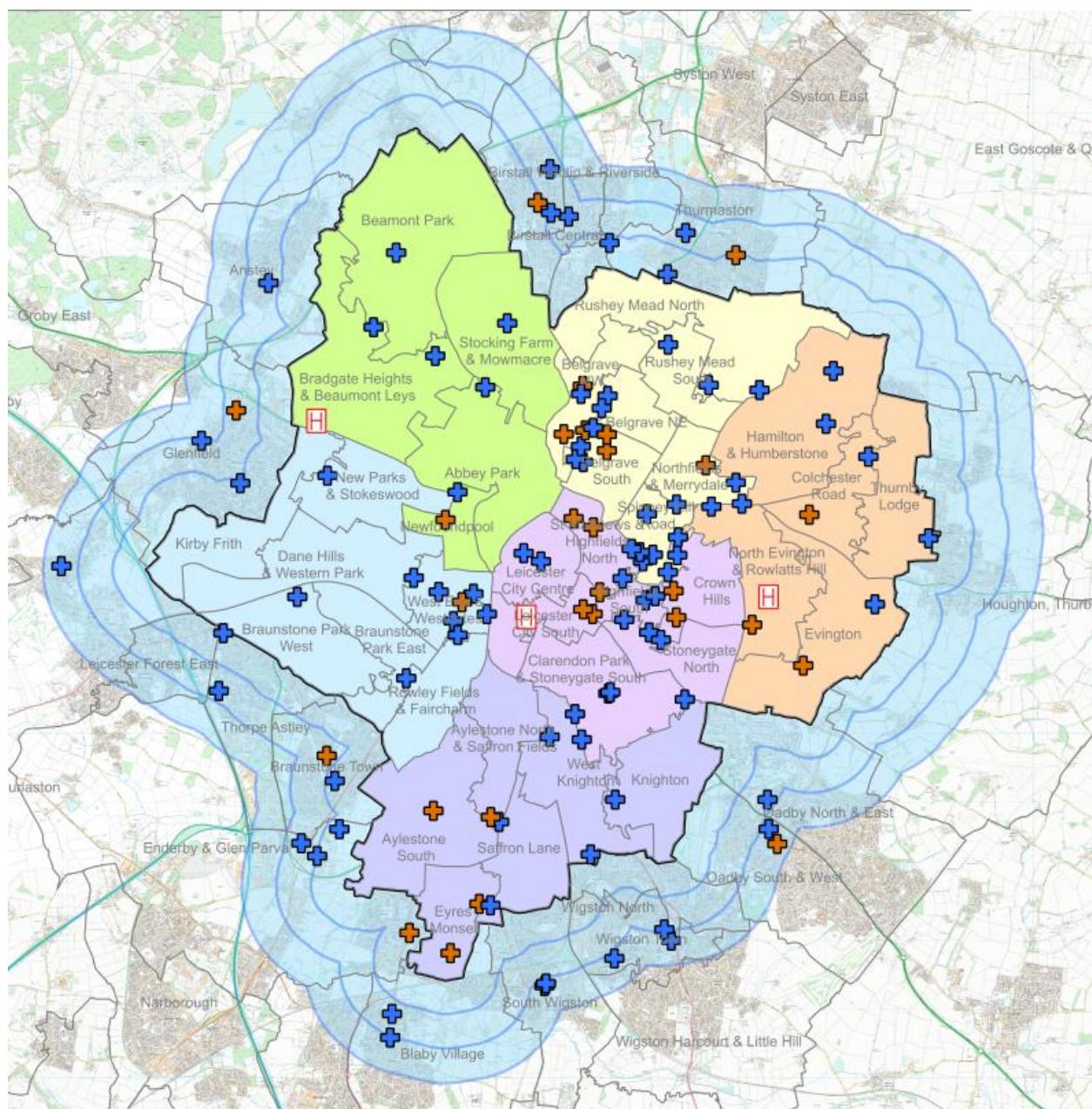
Table 13: Provision of flu vaccinations in Leicester pharmacies, September 2021 – March 2022

Locality Area	Number of pharmacies providing flu vaccinations	Total number of vaccines administered 2021/22	Population (18+) (2020 MYE)	Pharmacies providing flu vaccinations per 10,000 population 18+
Central	18	7445	67010	2.7
East	8	2244	38174	2.1
North	18	9207	48602	3.7
North West	6	3820	35491	1.7
South	9	1668	34452	2.6
West	10	3744	46238	2.2
Leicester City	69	28128	269967	2.6
Distance from Leicester boundary	Number of pharmacies providing flu vaccinations	Total number of vaccines administered 2021/22		
0km-0.5km	6	2294		
0.5km-1.0km	13	9224		
1.0km-1.5km	7	5543		
Total within 1.5km of Leicester	26	17061		

**Note: Submissions are accepted from contractors up to six months after the dispensing month and accredited to the dispensing month. Therefore, historical data on this report may well change.*

Data: NHS Business Services Authority – Advanced service flu report, June 2022, ONS mid-2020 population estimates

Figure 15: Pharmacies accredited for flu vaccinations in Leicester, 2021/22



Pharmacies providing a Seasonal Influenza Vaccination service in Leicester and surrounding area

Seasonal flu vaccinations 2022

- + Seasonal flu vaccinations provided (95)
- + Seasonal flu vaccinations not provided (23)

Locality

- Central
- East
- North
- North West
- South
- West

- H University Hospitals of Leicester
- 0.5km buffer

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Data: NHS Business Services Authority – Advanced service flu report, June 2022, ONS mid-2020 population estimates

7.2.6 Hepatitis C Testing Service

In September 2020 the Community Pharmacy Hepatitis C Antibody Testing Service was added to the Community Pharmacy Contractual Framework. This service focuses on the provision of point of care testing (POCT) for Hepatitis C (Hep C) antibodies in those who inject drugs but are yet to accept treatment for their substance use. When someone tests positive for Hep C antibodies, they are referred for a confirmatory test and treatment, where appropriate. No pharmacies in Leicester provide this service.

7.2.7 Hypertension Case-Finding Service

The Hypertension Case-Finding Service, also known as the NHS Blood Pressure Check Service, was commissioned as an advanced service from 1st October 2021. The service aims to identify people with high blood pressure aged 40 years or older (who have not previously had a diagnosis of hypertension) and refer them to general practice to confirm the diagnosis and for appropriate management of the condition. At the request of a general practice the service undertakes ad hoc clinic and ambulatory blood pressure measurements.

7.2.8 Smoking Cessation Services

The Smoking Cessation service is one in which pharmacies provide one-to-one support and advice to people who want to give up smoking. The service aims to:

- Improve access to and choice of stop smoking services, including access to pharmacological and non-pharmacological stop smoking aids.
- Reduce smoking related illnesses and deaths by helping people to give up smoking.
- Improve the health of the population by reducing exposure to passive smoke.
- Help service users access additional treatment by offering referral to specialist services where appropriate.

The smoking cessation service became an advanced service from March 2022.

7.3 Locally Commissioned Services

These are services commissioned locally from community pharmacies to meet the needs of the population. Locally commissioned community pharmacy services can be contracted via a range of routes and commissioners including local authorities, Clinical Commissioning Groups (CCGs) and local NHS England *and NHS Improvement* teams. Further details of locally commissioned services are available on: [Services and Commissioning : PSNC Main site.](#)

The following locally commissioned services are available across Leicester:

- Emergency Hormonal Contraception (EHC)
- C-Card (Condom provision and Sexual Health advice)
- Needle Exchange Service
- Supervised Consumption Service
- Palliative Care Service
- Child Influenza Vaccination Service

Pharmacies may also choose to provide additional services directly. Details of these services have been sought via a questionnaire issued to all pharmacies in Leicester. Further information will be included in the final PNA.

Where available, data on the provision of locally commissioned services in Leicester has been provided below.

7.3.1 Emergency Hormonal Contraception (EHC)

There are two types of emergency contraception:

(1) The insertion of an intrauterine device up to 5 days after unprotected sexual intercourse. This can only be provided by a trained clinician and is available at GPs and the Integrated Sexual Health Service.

(2) The provision of the oral emergency hormonal contraception pill. You need to take the emergency contraceptive pill within 3 days (Levonelle) or 5 days (ellaOne) of unprotected sex for it to be effective. Both are available from most GPs, the city's Integrated Sexual Health Service (including online), over the counter at most pharmacies (which must be paid for) and as a free scheme for Levonelle for under 25s at community pharmacies commissioned by Leicester City Council.

The aim of the service commissioned from community pharmacists is to reduce unintended pregnancy and improve sexual health through the provision of emergency hormonal contraception (Levonelle) to women under 24 along with advice and information relating to contraception, pregnancy testing sites and local sexual health services.

EHC was provided by 12, 10 and 9 pharmacies in Leicester in 2019/20, 2020/21 and 2021/22 respectively. The number of consultations, levonelle supply and levonelle 2nd dose provided in Leicester City has decreased year on year since 2019/20, this could be the result of the Covid-19 pandemic.

As shown in table 14 below, EHC has not been provided in the south of Leicester in 2019/20, 2020/21 or 2021/22. As shown in figure 16, the area in Leicester with the highest number of pharmacies where EHC was provided in 2021/22 was the city centre, with four pharmacies providing EHC here. The majority (91%, 1905 of 2095) of consultations were provided through city centre pharmacies. It is probable that young

women prefer to access this service in the city centre where there is potentially a greater level of anonymity available.

Two community pharmacies accounted for over three quarters of all EHC consultations in 2021/22:

- Boots Chemist in Highcross (1,401 consultations, 67%)
- Boots Chemist Gallowtree Gate (270 consultations, 13%)

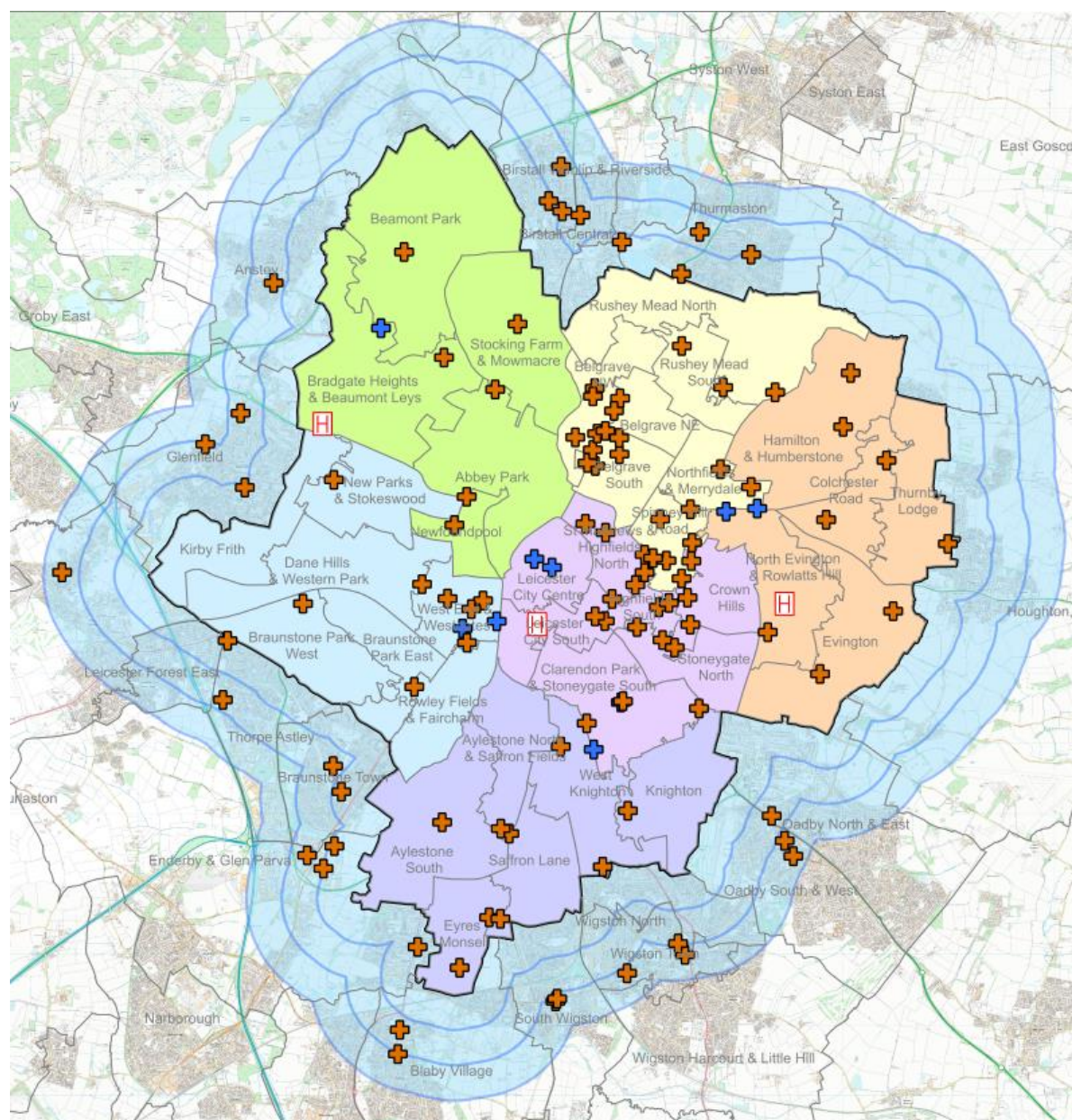
Table 14: Provision of Emergency Hormonal Contraception in Leicester pharmacies, 2021/22

	2019-20			2020-21			2021-22		
	Total Consultations	Total Levonelle Supply	Total Levonelle 2nd dose	Total Consultations	Total Levonelle Supply	Total Levonelle 2nd dose	Total Consultations	Total Levonelle Supply	Total Levonelle 2nd dose
Central	2125	1991	639	1953	1841	596	1905	1792	587
East	41	40	6	55	55	10	20	20	2
North	8	6	0	38	35	2	28	25	3
North West	11	11	0	62	60	22	49	49	15
South	0	0	0	0	0	0	0	0	0
West	677	640	146	152	148	43	93	91	17
Leicester City	2862	2688	791	2260	2139	673	2095	1977	624

Data: Pharm Outcomes

** Note: The number of Leicestershire County pharmacies within 1.5km of the Leicester City boundary which offer EHC will be included in the table and map of this section in the final draft of this PNA document.*

Figure 16: Pharmacies accredited for Emergency Hormonal Contraception in and around Leicester 2021/22



Pharmacies providing an Emergency Hormonal Contraception Service in Leicester and surrounding area



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Data: Pharm Outcomes

7.3.2 C-Card Service

Some pharmacies provide a free and confidential sexual health service available to young people. The scheme was originally offered to people aged under 25 years but since removing the age limit, increasing numbers of over 25s are using the scheme. It is a plastic registration card that enables quick and easy access to free condoms. The service also offers information and advice about sexual health and relationships.

The C-card scheme is available across the city in local access points in schools, colleges, pharmacies and a range of other local services. In Leicester, 22 pharmacies are signed up to deliver the scheme across the city. Training and condom packs are supplied to participating community pharmacies by the Integrated Sexual Health Service.

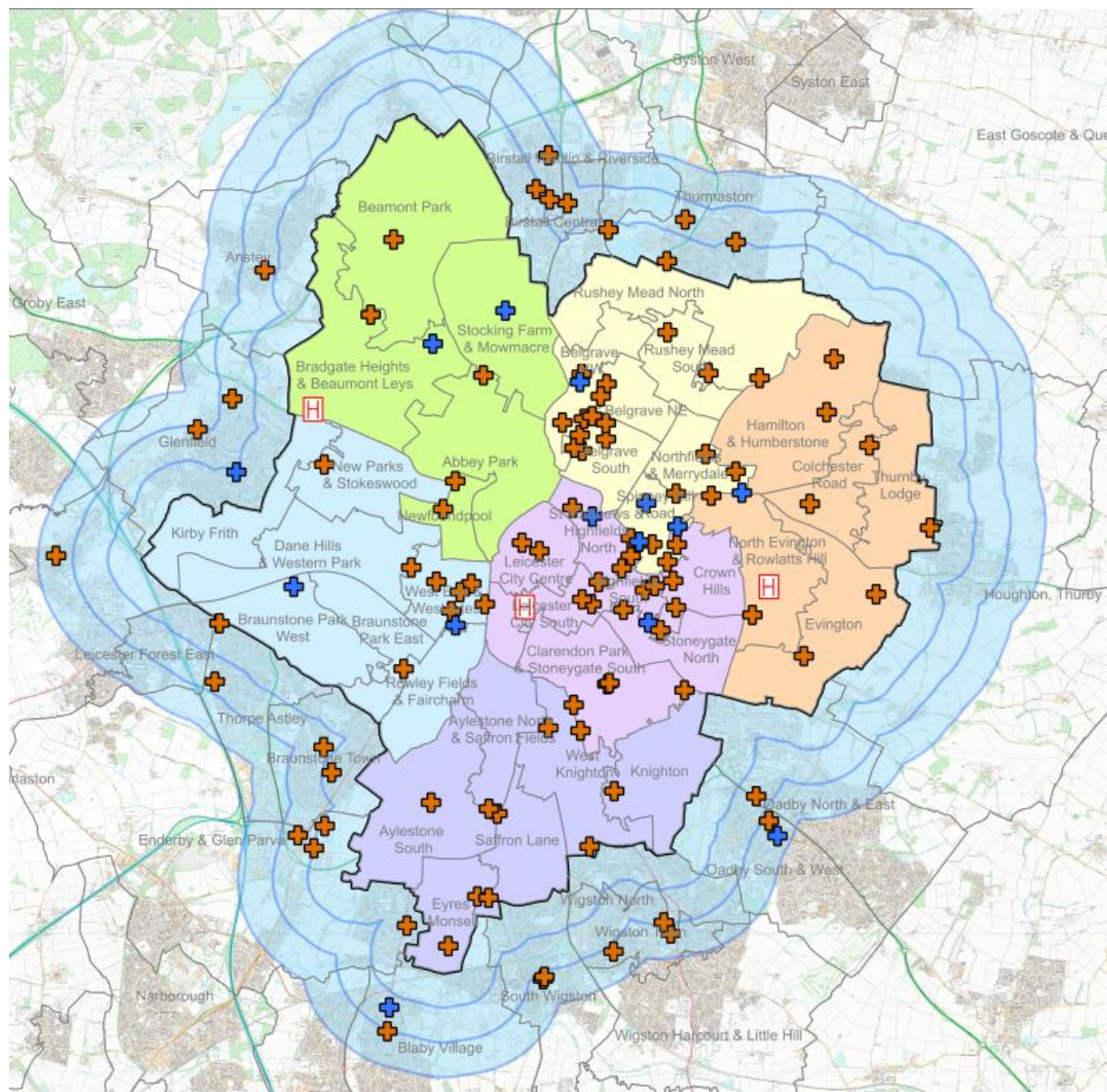
7.3.3 Substance Misuse: Needle Exchange

There are two services commissioned for the management of substance misuse; needle exchange and supervised consumption.

Pharmacy needle exchanges aim to reduce the rate of sharing and other high-risk injecting behaviours by providing sterile injecting equipment and other support, as well as ensuring the safe disposal of used injecting equipment. Pharmacy needle exchange facilities are available to all adult injectors who are using drugs illicitly.

As of 2020/21 needle exchange services are offered at 13 pharmacies across the city and 3 within 1.5km of the boundary, as seen in the map below (figure 17).

Figure 17: Pharmacies accredited for Needle exchange services



Pharmacies providing a Needle Exchange Service in Leicester and surrounding area

Needle Exchange service 2021

- + Needle Exchange service provided (16)
- + Needle Exchange service not provided (102)

Locality

- Central
- East
- North
- North West
- South
- West

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- 0.5km buffer

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Data: Turning Point

Needle exchange services are offered at hubs and pharmacies in Leicester, pharmacy needle exchange services account for 91% of transactions in the city. Table 15 below shows the uptake of needle exchange services in pharmacies during April 2020-March 2021.

As shown in table 15, there were over 13,700 transactions for needle exchange services in pharmacies in Leicester in 2020/21. The highest uptake of the service is in the centre of the city, with over 5,500 transactions here during the 12 month period. The lowest uptake is in the east of the city where there were 0 transactions for the same period.

Table 15: Pharmacy needle exchange service transactions by locality area in Leicester (April 2020 – March 2021)

Locality Area	Number of Pharmacies	Number of transactions
Central	2	5598
East	0	0
North	5	1511
North West	2	1326
South	1	1027
West	3	4293
Leicester Total	13	13755
Distance from Leicester boundary	Number of Pharmacies	Number of transactions
0km to 0.5km	1	1210
0.5km to 1km	1	80
1km to 1.5km	1	7
Total within 1.5km of Leicester	3	1297

Data: Turning Point

7.3.4 Substance Misuse: Supervised Methadone Consumption

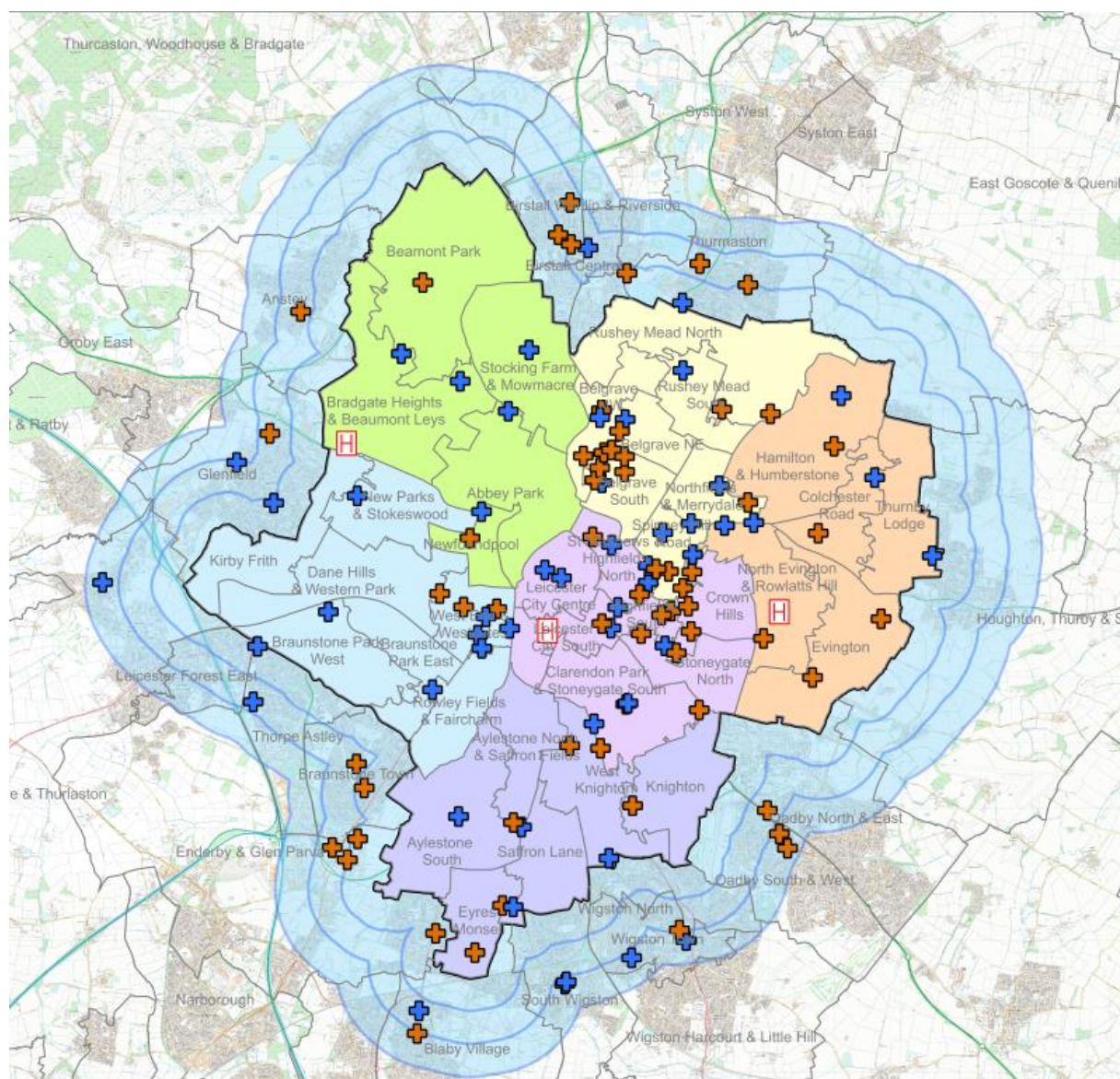
Supervised consumption services are for drug users and aim to ensure compliance with the agreed treatment plan by;

- Dispensing prescribed medication in specified instalments
- Ensuring each supervised dose is correctly administered to the patient for whom it was intended (doses may be dispensed for the patient to take away to cover days when the pharmacy is closed)
- Liaising with the prescriber, named key worker and others directly involved in the care of the patient (where the patient has given written permission)
- Monitoring the patient's response to prescribed treatment; for example if there are signs of overdose, especially at times when doses are changed, during titration of doses, if the patient appears intoxicated or when the patient has missed doses. The pharmacist may if necessary withhold treatment if this is in the interest of patient safety, liaising with the prescriber or named key worker as appropriate
- Improving retention in drug treatment

- To reduce the risk to local communities of:
 - Overuse or underuse of medicines
 - Diversion of prescribed medicines onto the illicit drugs market
 - Accidental exposure to the dispensed medicines

As of 2020/21 supervised consumption services are offered at 43 pharmacies across the city and 13 within 1.5km of the boundary, as seen in the maps below (figure 18)

Figure 18: Pharmacies accredited for Supervised consumption services



Pharmacies providing a Supervised Consumption Service in Leicester and surrounding area

Supervised Consumption Services 2021

- + Supervised Consumption Service provided (56)
- + Supervised Consumption Service not provided (63)

Locality

- Central
- East
- North
- North West
- South
- West

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- 0.5km buffer

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Table 16 below shows the uptake of supervised consumption services during April 2020-March 2021 in Leicester. There were over 58,700 dispenses of the service across pharmacies in the city. The highest uptake of the service is in the centre of the city, with over 28,700 dispenses here during the 12 month period. The lowest uptake is in the east of the city where there were just over 1,600 dispenses within the same time

period. All locality areas of the city are represented by at least four pharmacies offering the supervised consumption service.

Table 16: Supervised consumption service dispenses by locality area (April 2020 –March 2021)

Locality Area	Number of Pharmacies	Number of transactions
Central	10	28712
East	4	1623
North	9	5777
North West	5	7190
South	7	4563
West	8	10881
Leicester Total	43	58746
Distance from Leicester boundary	Number of Pharmacies	Number of transactions
0km to 0.5km	3	2677
0.5km to 1km	4	647
1km to 1.5km	6	612
Total within 1.5km of Leicester	13	3936

Data: Turning Point

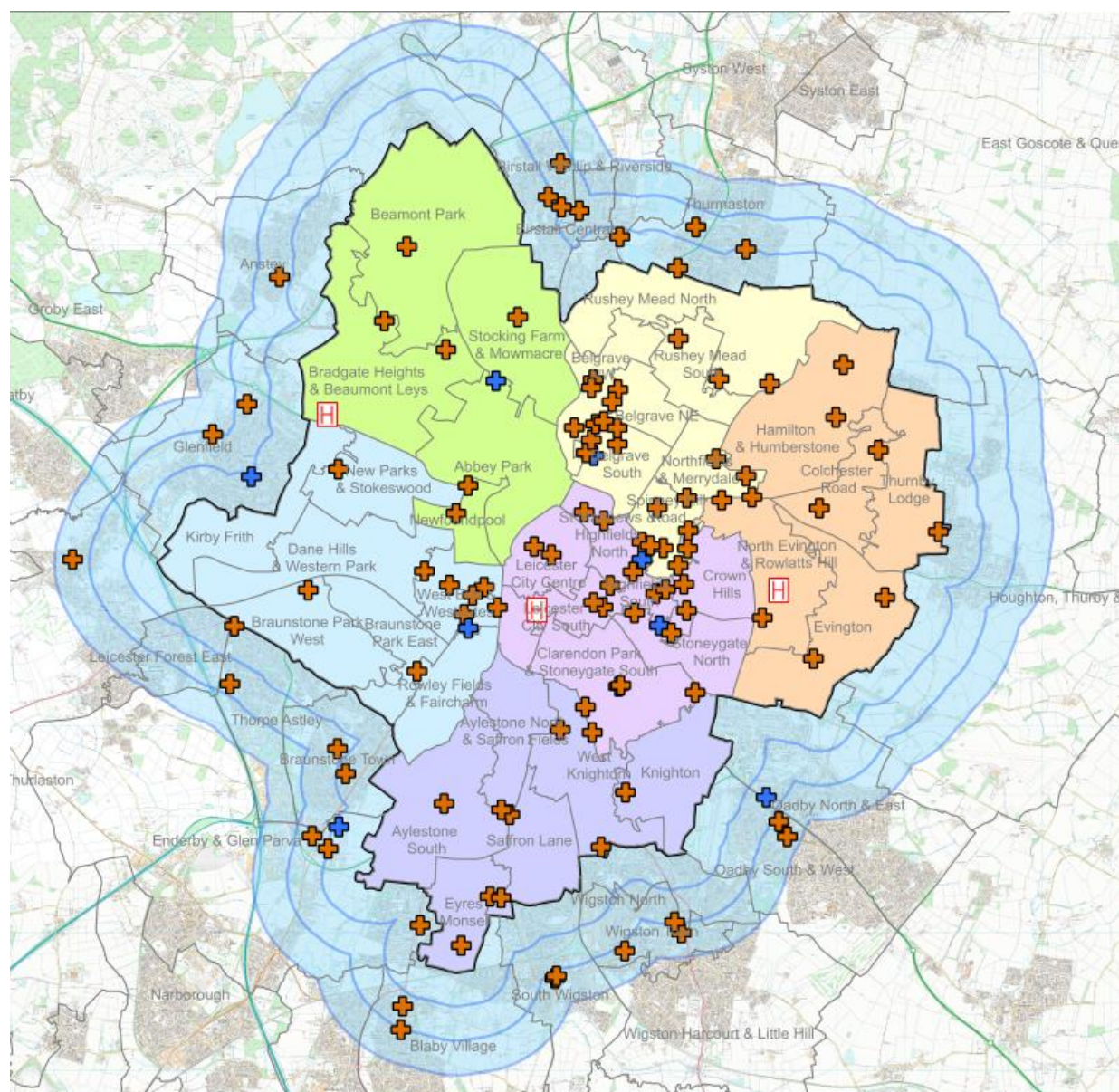
7.3.5 Palliative Care

The demand for palliative care drugs can be urgent and/or unpredictable. Although all pharmacies can be expected to meet the needs of their population with regard to routine supply of palliative care drugs, in some cases treatment needs to be accessed quickly and from a wider range of drugs than may be routinely stocked. A number of the drugs used in palliative care are rarely used in other circumstances and are therefore often not widely available in community pharmacies. The palliative care service ensures there is appropriate access to a range of palliative care drugs in accessible locations particularly in the out of hours period, and when treatment is needed urgently.

Selected pharmacies hold a stock of an agreed range of drugs used in palliative care. The pharmacist will provide information and advice to the user, carer and clinician. They may also refer to specialist centres, support groups or other health and social care professionals where appropriate.

There were five community pharmacies commissioned for the urgent supply of palliative care and specialised medicines in 2020/21 in Leicester City, of which two were in the central locality area and one in each of the north, north west and west locality areas (figure 19). There were three community pharmacies providing palliative care services within 1.0km of the Leicester boundary.

Figure 19: Pharmacies providing Palliative Care Services



Pharmacies providing a Palliative Care Service in Leicester and surrounding area

Palliative Care Services 2022

- + Palliative Care services provided (8)
- + Palliative Care services not provided (110)

Locality

- Central
- East
- North
- North West
- South
- West

- H University Hospitals of Leicester
- 0.5km buffer

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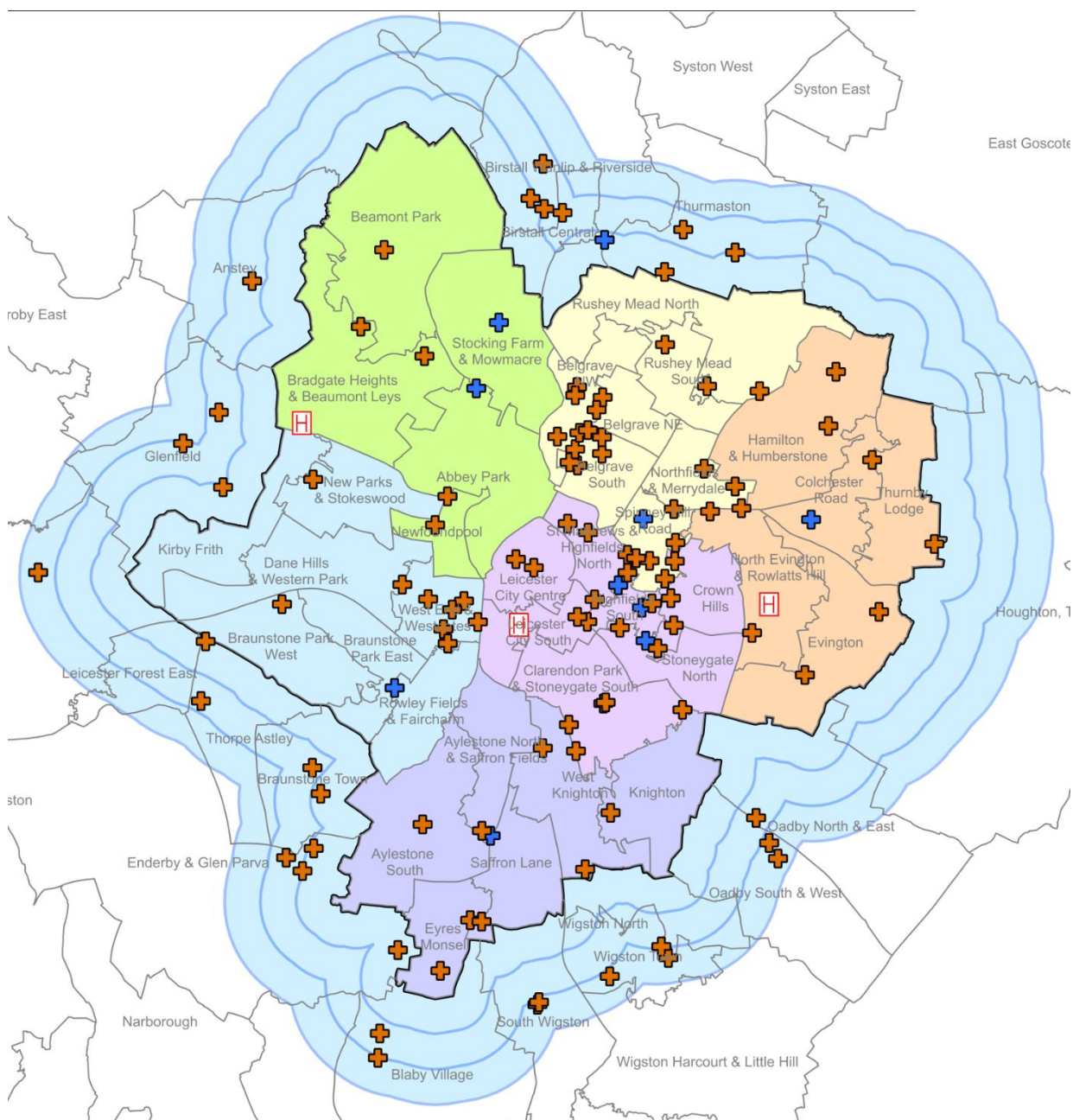
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Data: PSNC

7.3.6 Child Influenza Vaccinations

The children's influenza service is normally administered in schools however where children are unable to have this done at school, they can receive the Fluenz/nasal flu vaccine at a local pharmacy providing this service. Ten pharmacies in Leicester City are eligible to provide child influenz vaccinations (figure 20). There is at least one pharmacy in each of the localities who can provide the service (2 in north west, 4 in central areas and one pharmacy within each of the other locality areas).

Figure 20: Pharmacies accredited for Child Influenza Vaccinations



Pharmacies providing a Child Influenza Vaccination service in Leicester and surrounding area

Child Influenza Service 2022

- + Child Influenza Vaccination provided (10)
- + Child Influenza Vaccination not provided (108)

Locality

- Central
- East
- North
- North West
- South
- West

H University Hospitals of Leicester

0.5km buffer

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7.4 Impact of Covid-19

Throughout the Covid-19 pandemic, accessibility and provision of some pharmaceutical services changed. Following the pandemic, in 2021/22, larger numbers of NMS reviews were carried out by more pharmacies than in previous years, SAC was provided by 5 pharmacies compared to 3 in 2020/21 and 4 in 2018/19 and 2019/20 and there were 4942 community pharmacy consultations provided in Leicester compared to 2047 in 2020/21. Further, in the previous version of this document Leicester City had a rate of 1.7 pharmacies providing flu vaccination services per 10,000 population 18+ compared to a rate of 2.6 pharmacies per 10,000 population 18+ in 2021/22. The number of EHC consultations, levonelle and levonelle 2nd dose provided decreased year on year between 2019/20 and 2021/22. However, it is difficult to predict whether such changes will continue into the future or whether they will revert to pre-pandemic levels within the lifespan of this PNA.

7.5 Conclusion

This section has described the elements of the Community Pharmacy Contractual Framework and provided information on the essential, advanced and locally commissioned services required or offered for delivery by community pharmacies.

Essential services are required as part of the NHS Community Pharmacy Contractual Framework and must be provided by community pharmacies working to this contract. The advanced services are defined in the NHS community pharmacy contractual framework, but pharmacies can choose to provide any of these services following appropriate training and or accreditation. Both types of services are overseen by NHS England and NHS Improvement.

The advanced services Community Pharmacist Consultation Service, Flu Vaccination service and New Medicines Services are provided by the majority of pharmacies. Few pharmacies offer Stoma Appliance Customisation and no pharmacies offer Appliance Use Reviews or Hepatitis C Testing Service.

Locally commissioned services have a more variable uptake by pharmacies and therefore the availability of these services varies across Leicester. For example, EHC is provided in four pharmacies in the central locality area of Leicester compared to no pharmacies in the south of the city.

A number of factors influence the extent to which services are taken up for delivery by pharmacies. These include the need and availability of additional training required for staff, the assessment of the likely extent of take up of services by customers, practicalities such as the availability of facilities, referrals from GPs where these are necessary, and whether the payment provided by the commissioner is sufficient to cover costs.

Take up can also be inhibited by consumer behaviour. For example, 91% of the take up of emergency hormonal contraception (including consultations, levonelle and levonelle 2nd dose) is in busy, more central pharmacies reflecting a likely preference by young

women for a degree of anonymity less likely to be available in neighbourhood pharmacy locations closer to home.

The locally commissioned services provided are not necessarily the same in Leicester as in adjacent areas of the Leicestershire County. Some services are available from county pharmacies and not from Leicester pharmacies, and vice versa.

Pharmacies also provide from their own resources other significant free services directly to their patients. These are not commissioned by NHS England *and NHS Improvement*, Leicester City CCG or the Local Authority and instead are a direct arrangement between the pharmacy and patients. These services include the collection of prescriptions, and in most pharmacies the delivery of medicines, and the mainly free availability of monitored dosage systems. Such services are viewed as adding to the convenience, compliance and safety of medicine collection and use. Some pharmacies also provide blood pressure measurement, educational sessions on self-care and making use of health services.

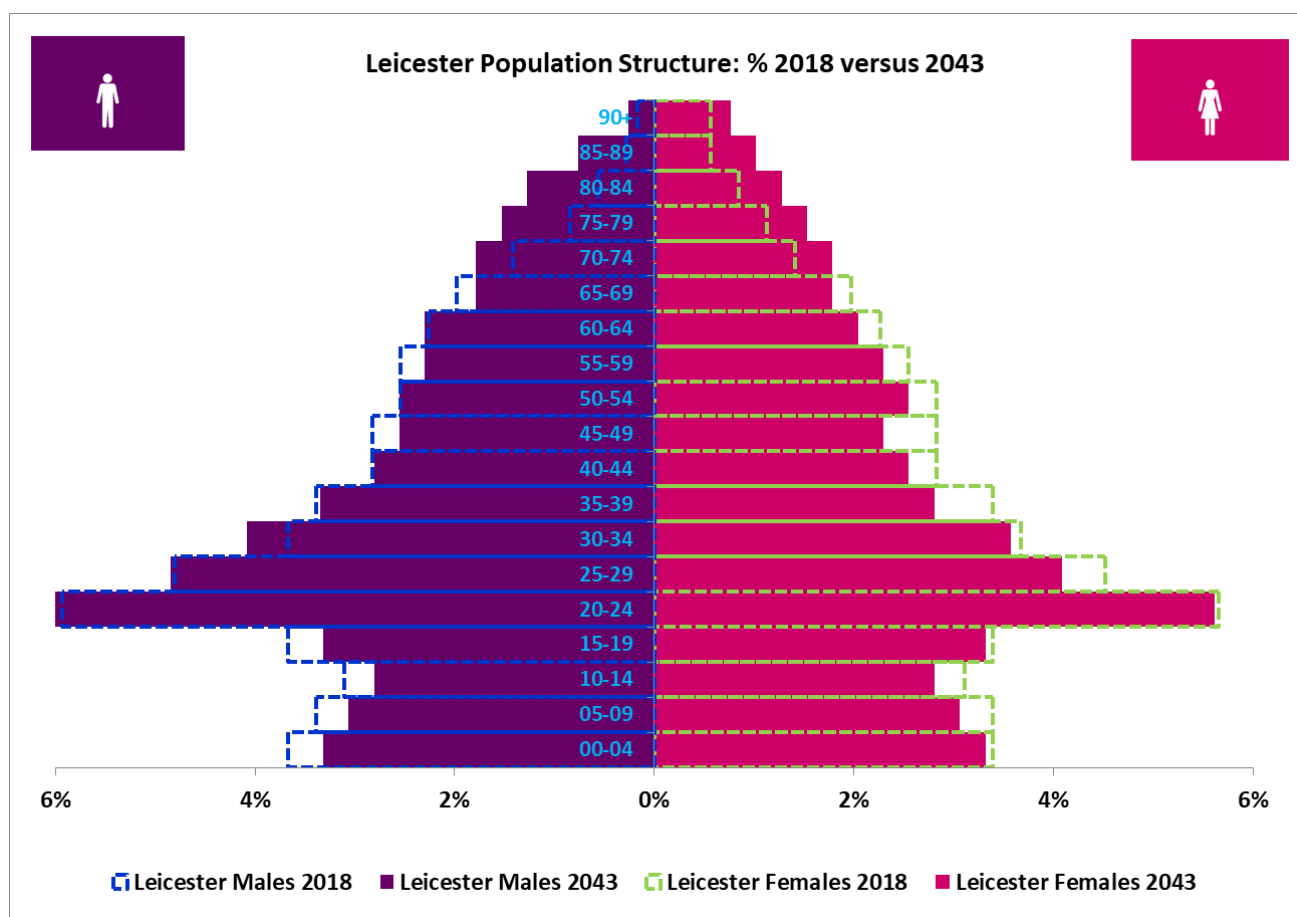
8. Projected future needs

8.1 Population growth

By 2043, the population of Leicester is predicted to grow by around 37,400 to give a total population of around 391,400. Projections indicate that Leicester will have an increase of 18,600 people aged 65 and over, which represents an increase in the proportion of the population aged 65 and over from 12% in 2018 to 16% in 2043.

With the current provision of 85 pharmacies in Leicester, this would offer a rate of 2.2 pharmacies per 10,000 population in 2043. The current rate in Leicester is 2.4, and nationally 2.1 per 10,000 population based on the numbers of pharmacies alone; it does not take into account variation in opening hours and services provided.

Figure 21: Leicester population structure 2018 with projections for 2043



Source: ONS Population Projections - 2018

8.2 Growth in number of people with long term conditions

With these projected increases of over 15,000 in the older population, there will be increases in the numbers with long term health conditions. Table 17 below shows the increases in numbers aged 65 and over, based on the current prevalence of these conditions³⁴.

³⁴ Projecting Older People Population Information system (POPPI, 2020). <http://www.poppi.org.uk/>

Whilst the current number of pharmacies will provide a rate of 2.2 per 10,000 based on population projections, the increase in the population size and number likely to have long term conditions will put additional pressure on pharmacies.

Table 17: Estimates of numbers of over 65 year olds in Leicester with longstanding health conditions, 2020-2040

Long term health condition	% of over 65s (2020)	2020	2025	2030	2035	2040
Moderate or severe hearing impairment	67%	29,625	32,434	36,194	39,859	42,683
Cardiovascular disease	31%	13,841	15,405	17,038	18,437	19,463
BMI of 30 or more	30%	13,384	14,794	16,254	17,380	18,087
Limiting long term illness whose day-to-day activities are limited a lot	29%	12,889	14,267	15,793	17,245	18,369
Limiting long term illness whose day-to-day activities are limited a little	27%	11,715	12,972	14,352	15,392	16,115
Falls	26%	11,638	12,778	14,130	15,417	16,368
Unable to manage at least one activity on their own	18%	7,973	8,711	9,638	10,721	11,610
Bladder problem at least once a week	16%	7,136	7,907	8,722	9,490	10,057
Diabetes	12%	5,490	6,067	6,692	7,169	7,474
Depression	9%	3,772	4,166	4,588	4,919	5,138
Moderate or severe visual impairment	9%	3,770	4,184	4,681	5,118	5,480
Dementia	7%	3,060	3,313	3,708	4,185	4,673
Severe depression	3%	1,187	1,320	1,458	1,582	1,682
Hospital admission as a result of falls	3%	1,365	1,470	1,683	1,891	2,081
Bladder problem less than once a week	3%	1,404	1,544	1,713	1,867	1,984
Longstanding health condition caused by bronchitis and emphysema	2%	743	825	909	978	1,023
Total population 65 and over		44,000	48,500	53,600	57,500	60,100

Data: Projecting Older People Population Information System (POPPI, 2020)

8.3 Growth in housing

The housing plan for Leicester is still underway and the consultation document planned for release around June 2022.

The local housing need study undertaken for Leicester identified a local housing need of 2,464 dwellings per year to accommodate growth in population to 2036 (39,424 homes over the plan period 2020-2036). Unmet need is estimated at around 18,700 over the plan period.

The previous trajectory for housing supply published alongside the draft plan consultation is given below although this will be subject to change. It is anticipated that the commitments (full planning permissions) will come forward in the first five years.

Table 18: Previous Housing Supply for Leicester City

Year	19/20	20/21	21/22	22/23	23/24	24/25	25/26	26/27	27/28	28/29	29/30	30/31	31/32	32/33	33/34	34/35	35/36	Total
Total Supply	1733	1733	1759	1839	1871	1535	1675	1636	1636	1695	877	769	775	752	641	244	192	21362

Source: Leicester City Council, Planning, Development and Transportation

Any further information available in Leicester's Housing Plan showing areas of the city with large residential housing plans will be included in the final draft

9. Consultation

9.1 Pharmacy questionnaire for local professionals:

In addition to the statutory consultation, a questionnaire was circulated to all community pharmacies in Leicester, to gain a better understanding of how they serve the local population.

As of 19th May 2022, 19 (22%) out of 85 pharmacies in Leicester City have responded to the pharmacy contractor questionnaire. The questionnaire is still open for further pharmacies to complete. A summary of current responses is given below. This will be updated in the final draft to show fuller responses.

- Most pharmacies (70%) receive between 1,001 and 10,000 over the counter enquiries per year.
- Pharmacies see an average of 30 consultations (range from 10 to 150 consultations) in the consultation room in an average week.
- All respondents have a closed consultation area on the premises and 9 pharmacies (47%) were willing to undertake consultations in the patient's home/other suitable site.
- Just over half (58%) of pharmacies have wheelchair ramp access, with 47% having large print labels/leaflets and dementia-friendly space and 42% having automatic door assistance. Other accessibility facilities were also provided across the 19 pharmacies, such as a hearing loop (26%), disabled toilet facility (16%) and bell at the front door (11%).
- 78% of respondents to this question use locum pharmacists and 44% use relief pharmacists.
- 41% of respondents agreed that they had experienced recruitment difficulties for the role of community pharmacist, with 31% of respondents not having experienced recruitment difficulties for apprenticeship roles and mixed experiences in the extent of difficulties in recruiting other roles.
- The majority of respondents provide or intend to provide within 12 months, the community pharmacist consultation service (100%), flu vaccination service (100%), hypertension case-finding service (95%), new medicine service (100%), pandemic delivery service (89%) and the stop smoking service (72%).
- Most respondents would be willing to provide NHS England *and* NHS Improvement, CCG and local authority commissioned services, especially with training and/or facilities provided.
- 5 out of 20 non-commissioned services listed are provided by over half of respondents, with the majority of respondents indicating that they would provide the other non-commissioned services if training and/or facilities were provided. This is with the exception of the monitored dosage systems with charge for which 57% of respondents reported that they were not currently willing to provide this service.
- The majority of respondents do not provide non-NHS funded services but most are willing to with training and/or facilities provided.
- 95% of respondents plan to expand their business (58%) or continue operating

to the same level (37%) for the next year. More specifically, 21% plan to expand online pharmacy services in the next year, with 42% reporting 'don't know/not applicable' to this question.

- 95% of respondents report that the amount and location of pharmacies in a three-mile radius of their own pharmacy are 'excellent' or 'good' and 5% report as 'adequate'.
- Views on the range of services provided by pharmacies in a three-mile radius of their own pharmacy are slightly lower with 89% reporting 'excellent' or 'good', 5% reporting 'adequate' and 5% reporting 'poor'.

9.2 Pharmacy questionnaire for public:

A questionnaire was also circulated to the general public to review pharmacy provision in their area.

As of 16th May 2022, 111 respondents reported to be living in the Leicester City local authority had completed the survey. A summary of the responses is given below.

- Most respondents (65%) were very satisfied with the advice they receive about taking their medicines from the pharmacy/chemist, with a further 21% of respondents fairly satisfied.
- Quality of service, location and availability of medication were the most important pharmacy services to respondents whilst prescription collection from their GP practice, physical accessibility and private areas to speak to a pharmacist were also noted as important.
- Eighty-four percent of respondents agreed that their pharmacy provides a good service (62% strongly agree and 22% tend to agree).
- Almost three quarters of respondents agreed that if they wanted to, they could speak to a pharmacist at their pharmacy without being overheard (51% strongly agreed and 21% tend to agree).
- Of those with access needs relating to a physical disability (15% of respondents), 36% reported that these were always met, 50% reported that they were sometimes met, with 14% reporting that their pharmacy never met these physical access needs.
- Of respondents who help an adult family member or friend to use pharmacy services, 42% reported that their pharmacy always meets their needs as a carer and 44% indicated that their pharmacy sometimes meets their needs as a carer.
- Eighty-five percent of respondents were most likely to get their prescription medicine from a pharmacy/chemist's shop, with 99% of these respondents reporting that their usual one is based in Leicester.
- Most respondents usually travel to the pharmacy by walking (56%) or car (driver) (32%) and for the majority of respondents travelling to their usual pharmacy takes less than 15 minutes (86%).
- Responses highlight varied frequency of use of a pharmacy for a health reason from a few times a month (27%), once a month (41%), every two to three months (22%) to once or twice a year (10%).

- The majority of respondents (84%) most commonly use pharmacy services between 9am-6pm on weekdays, with 71% of respondents agreeing (42% strongly agree and 29% tend to agree) that the opening hours for pharmacy services meet their needs.
- When thinking about their usual pharmacy services, 93% of respondents found it easy to find an open pharmacy during the day, 33% found it easy to find an open pharmacy in the evening (after 6pm) and 56% of respondents find it easy to find an open pharmacy at the weekends.
- The majority of respondents were very likely to visit the pharmacy in person to access pharmacy services within the next three years but were not very likely or not at all likely to receive prescriptions by post (69%) or via online home delivery services (55%).

9.3 Statutory 60 day consultation:

There is a statutory requirement for each Health and Wellbeing Board to consult a defined number of bodies about the contents of the pharmaceutical needs assessment for a minimum of 60 days. The consultation will take place during July and August 2022 and full results will be provided in the final PNA.

10. Analysis of gaps in service

As of 31 March 2022, Leicester has 85 pharmacies located across the City, including 9 distance selling pharmacies and one local pharmaceutical service.

Overall Leicester has more pharmacies per head of the population than England (2.4 vs 2.1 pharmacies per 10,000 population).

Pharmacies and local populations:

There are more pharmacies in the north (24) and central (23) locality areas of the city, with several closely located in Belgrave (around Belgrave Road) and another cluster around Spinney Hills towards Stonegate. In the west of the city the pharmacies are more widely spread, although there are a number along the Narborough Road area in the West End.

Using locality area populations, the rate of pharmacies per 10,000 population ranges from 1.5 in the north west of the city to 3.7 in the north of the city. Locality area populations have been used to give a crude indication of the local population, however, it is recognised that some residents may be closer to a pharmacy in a different locality area. But, as explained in the main body of the text above, locality areas provide some way of talking about geographical differences in a situation where pharmacies do not serve defined populations and where locations of pharmacies are, in a large part, historically based. Additionally, the population rates do not consider the number of hours the pharmacies are open, the size of the pharmacy or the number of whole time equivalent staff. Opening hours per week per 10,000 locality area population range from 70.0 in the north west to 192.3 in the north of the city.

Access and travel times:

Access and travel times to pharmacies in Leicester appear to be reasonable based on travel time analysis. Leicester residents should be able to access their nearest pharmacy within a few minutes by car, although this may take longer at peak travel times. All residents will also be able to walk to their nearest pharmacy within 20 minutes, with 96% of residents able to walk to their nearest pharmacy within 15 minutes. It is difficult to show travel times by public transport as these will vary during the time of day and day of the week. However, based on a weekday morning, it shouldn't take more than 15 minutes to reach the nearest pharmacy. Travel analysis has only looked at travel times to a resident's nearest pharmacy and has not considered services offered or opening times. Residents may have to travel further for some services or to reach a pharmacy outside normal opening hours.

Opening hours:

All Leicester pharmacies are open for at least 40 hours per week. Over half (47) are open up to 50 hours per week and Leicester has 8 pharmacies classified as 100 hour pharmacies. With longer opening hours, pharmacies are able to offer more flexible access later in the evenings and on weekends. The 100 hour pharmacies are located in the west (3 pharmacies), central (2), east (1), north (1) and south (1) locality areas of the city. There is lower provision for extended opening hours in the

north west of Leicester, however, there are two 100 hour county pharmacies within 1km of the City border towards the north west of the city.

Essential services:

Essential services are provided by all pharmacies. All Leicester residents have access to a pharmacy within 20 minutes of their home, although some walk-times may be longer. There are fewer pharmacies in the north west of Leicester compared with the north and central areas and opening times are generally shorter, however this does not imply inadequate provision.

Data regarding pharmacies providing a collection and delivery service shows that the vast majority do so, which to some extent may compensate, at least for patients with regular medicines, for there being smaller numbers of pharmacists in certain parts of the city.

Advanced services:

There are eight advanced services which pharmacies may be accredited to offer. These include New Medicines Services, Appliance Use Reviews (AURs), Community Pharmacist Consultation Service, Flu Vaccination Service, Hepatitis C Testing Service, Hypertension Case-Finding Service, Stoma Appliance Customisation (SAC) and more recently the Smoking Cessation Service.

The advanced services Community Pharmacist Consultation Service, Flu Vaccination service and New Medicines Services are provided by the majority of pharmacies. Few pharmacies offer Stoma Appliance Customisation and no pharmacies offer Appliance Use Reviews or Hepatitis C Testing Service.

No pharmacies in Leicester provide the specialised service for AURs. There are providers who deliver directly to patients and order on their behalf.

Locally Commissioned Services:

Locally Commissioned services are services commissioned by Local Authorities and Clinical Commissioning Groups (CCGs) which can be tailored towards the health needs of the local population. Pharmacies can be particularly effective in providing services to more hard-to-reach groups as they offer a walk-in service and do not require an appointment. They also offer valuable advice and support for people in making lifestyle choices and in managing their own health conditions.

The number of pharmacies offering the services below is reported at March 2022 where available.

Emergency Hormonal Contraception:

There has been a reduction in the number of pharmacies providing EHC. At the end of March 2020, 12 pharmacies were offering this service, in March 2021, 10

pharmacies offered EHC and in March 2022, 9 pharmacies offered this service. The majority of uptake is through the city centre pharmacies. Whilst this is an area with a high number of young people, it is also likely that many young people choose to use this service at a more anonymous pharmacy in town rather than one that is close to their home.

C-Card

The C-card scheme is available across the city in local access points in schools, colleges, pharmacies and a range of other local services. In Leicester, 22 pharmacies are signed up to deliver the scheme across the city. Training and condom packs are supplied to participating community pharmacies by the Integrated Sexual Health Service.

Needle exchange:

Needle exchange services were provided by 13 pharmacies in Leicester in 2020/21. In the twelve months from April 2020 to March 2021 over 13,750 transactions were reported. This service is part of a wider scheme in helping individuals to manage and recover from substance misuse. The highest uptake of this service was in the centre of the city, with over 5,500 transactions here during the twelve month period.

Supervised consumption:

Supervised methadone consumption was provided by 43 pharmacies across Leicester in 2020/21. As with needle exchange, this is part of a wider scheme in substance misuse harm reduction and recovery.

Palliative care:

Five pharmacies provided palliative care services in 2020/21. This service enables access to palliative care medicines and advice for patients during the last phase of their life.

Palliative care should be targeted towards areas with high risk population, hospital discharges and those with respiratory problems. A review of the uptake of this service would provide information into how well this service is being used and with an ageing population, the potential for greater demand in the future.

11. Conclusions and Recommendations

This assessment looks at current provision of pharmacy services and concludes that overall provision of essential and advanced pharmacy services is adequate for the population of Leicester. The quality of services is monitored via quality visits to pharmacies and these provide assurance of pharmaceutical services for individual premises.

This PNA has reviewed the location and access to pharmacies for the residents of Leicester as at the end of March 2022. There are differences in local provision of services across the city and it may be that residents in some areas have to travel a little further to access a particular service or out of normal working hours.

It has given information showing which pharmacies provide advanced and locally commissioned services in addition to their essential services as at the end of March 2022, where available, otherwise as at the end of March 2021. This includes services commissioned by NHS England *and NHS Improvement*, the CCG or Leicester City Council. Pharmacies may also choose to provide additional services directly of benefit to patients on a 'voluntary' basis.

Community based services offer a range of locally commissioned services to the local population that can be tailored to meet specific local healthcare needs. The uptake of some of these services has been included to give an idea of numbers, however, data is not available for uptake of services provided directly by pharmacies (ie not commissioned by the NHS, Local Authority or Leicester City Clinical Commissioning Group), so the PNA cannot assess whether the services adequately meet the needs of the population.

Pharmacies can provide a valuable service to patients, particularly those more hard-to-reach groups who can take an advantage of a drop-in service at a time more convenient to themselves without the need for an appointment. It may also be more appealing to use a less formal environment within a pharmacy compared with the GP surgery.

Throughout the Covid-19 pandemic, accessibility and provision of some pharmaceutical services changed. However, it is difficult to predict whether such changes will continue into the future or whether they will revert to pre-pandemic levels within the lifespan of this PNA. Given the potential benefits to patients, it is recommended that pharmacies are encouraged to maintain improved service provision.

11.1 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 Leicester City delivering essential pharmaceutical services. Currently there are 85 pharmacies in Leicester serving a population of 354,036 residents, of which nine are distance selling pharmacies and eight are 100-hour pharmacies. This equates to a rate of 2.4 pharmacies per 10,000 residents (or one pharmacy per 4059 residents) which is greater than the England rate of 2.1 (or one pharmacy per 5056 residents)

This PNA has also considered 33 pharmacies which lie within 1.5 km of the Leicester City boundary as an approximation of pharmacies that are located within an acceptable range of access by foot, public transport or by car. Of these 28 are community pharmacies, 4 are 100 hour pharmacies and 1 is a distance selling pharmacy. Pharmacies located across the city boundary to the North West and West are able to serve residents in these areas where there are fewer pharmacies.

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 Leicester were identified in this PNA. Further detail will be included in the final draft based on the responses to the pharmacy contractor questionnaire of current service and intended service provision and further update from the Housing Plan

It is not currently possible to assess any future need for pharmaceutical services in terms of population growth and additional housing planned by local areas. Leicester's

Housing Plan is hoped to be published for consultation around June 2022 and an update will be included in the final draft.

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*

An array of enhanced services are provided across Leicester and the PNA has considered services provided by pharmacies within 1.5km of the city boundary. Data on additional services provided by community pharmacies has been sought via a pharmacy contractor questionnaire and it is hoped further information can be provided in the final draft.

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*

The majority of pharmacies provide enhanced services to Leicester residents. The contractor questionnaire will provide further information on additional services offered. However, future commissioning of these services 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, Leicester City Clinical Commissioning Group and local NHS England & Improvement were consulted to produce an up to date list of additional pharmaceutical services provided across Leicester city.

Provision of Covid-19 vaccinations in community pharmacies has provided additional locations for patients to access this service. Pharmacy provision of Covid-19 booster vaccinations in Care Homes is under consideration.

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 Leicester city. The localities were selected as the Health and Wellbeing areas as used in the Health and Wellbeing Survey. These are groups of 3-4 middle super output areas and help to show variation across the city. An assessment of population health needs and pharmacy provision within these locality areas has been included in the PNA. A report of the consultation will be included in the final draft.

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 6 (figure 6) 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.

11.2 Recommendations:

Equity of service:

Leicester has a higher rate of pharmacies per 100,000 of population than is found in England overall. However, Leicester's pharmacies are not evenly distributed throughout the city. The reasons for this are historic and commercial. The result is that some areas of the city have clusters of pharmacies while in other areas coverage is more thinly

spread, and, working on the basis that people generally prefer to go to a nearby pharmacy, patients have a greater or lesser degree of choice, depending on where they live in the city. Equity in a service context can be viewed through the lens of access - can people physically get to the service? Take up - are there cultural, language or attitudinal barriers that may deter use? Outcome - do customers get the service they need and feel satisfied with that service?

It is recommended that NHS England *and NHS Improvement* (and where relevant Leicester City Council and Leicester, Leicestershire and Rutland Integrated Care Board) should:

- Keep under review locations and opening times to assess whether access is equitable for all residents.
- Review cross-city and county-border service provision to ensure uniformity of access and quality of service
- Work with pharmacies and Local Pharmaceutical Committee to examine how equity issues can be addressed further. A review of service quality and uptake, including consideration of cultural and equalities needs could provide insight into the effectiveness of these local services.
- Work closely with Integrated Care Board and Primary Care Networks to tackle health inequalities and address digital literacy
- Encourage pharmacies to offer discretionary services in relation to local need.

Promotion of health and healthcare management:

It is recommended that NHS England *and NHS Improvement* (and where relevant Leicester City Council and Leicester, Leicestershire and Rutland Integrated Care Board) should:

- Ensure that the promotion of healthy lifestyles (Public Health) requirement of the essential services contract is fulfilled (see section 4.1.1). While NHS England and NHS Improvement retains responsibility for this area of the pharmacy contract, local campaigns should in future be jointly defined by NHS England and NHS Improvement, Local Authority Public Health and Leicester, Leicestershire and Rutland Integrated Care Board to promote healthier lifestyles through pharmacies so that individuals can gain advice and support in reducing unhealthy behaviours and adopting healthier ones.
- Consider and encourage the opportunity to include and develop the role of pharmacies in commissioning strategies and through the Integrated Care System - particularly in relation to providing services which deflect work out of primary care general practice.
- Assess levels of uptake of advanced and locally commissioned services and follow-up low or high performers in order to share best practice.

- Keep under review the appropriateness of monitoring and quality visits to pharmacies, in addition to pharmacy self- assessment, in order to provide assurance of effectiveness and to promote service improvement.

Implications of Community Pharmacies Policy

It is recommended that NHS England *and NHS Improvement* (and where relevant Leicester City Council and Leicester, Leicestershire and Rutland Integrated Care Board) should:

- Review evidence of impact of policy and funding changes on services annually and report any findings to the Health and Wellbeing Board with appropriate advice.

GLOSSARY OF TERMS

AUR	Appliance Use Review
BME	Black and Minority Ethnic
CBS	Community Based Services
CCG	Clinical Commissioning Group
CHD	Coronary Heart Disease
CKD	Chronic Kidney Disease
COPD	Chronic Obstructive Pulmonary Disease
CVD	Cardiovascular Disease
EHC	Emergency Hormonal Contraception
EPACT	Electronic Prescribing Analysis and Costing
EPS	Electronic Prescription Service
GP	General Practitioner
GPhC	General Pharmaceutical Council
H. Pylori	Helicobacter Pylori
HLP	Healthy Living Pharmacy
HWB	Health and Wellbeing
HWBB	Health and Wellbeing Board
ICB	Integrated Care Board
ICS	Integrated Care System
IMD	Index of Multiple Deprivation
JHWS	Joint Health and Wellbeing Strategy
JSNA	Joint Strategic Needs Assessment
LCC	Leicester City Council
LCCCG	Leicester City Clinical Commissioning Group
LLR	Leicester, Leicestershire and Rutland
LPC	Local Pharmaceutical Committee
LPS	Local Pharmaceutical Services
MDS	Monitored Dosage System
MSOA	Middle Super Output Area
MUR	Medicines Use Review
NHS	National Health Service
NHSE	National Health Service England

NMS	New Medicines Service
NRT	Nicotine Replacement Therapy
ONS	Office for National Statistics
PhAS	Pharmacy Access Scheme
PNA	Pharmaceutical Needs Assessment
PSNC	Pharmaceutical Services Negotiating Committee
POPPI	Projecting Older People Population Information System
RSPH	Royal Society for Public Health
SAC	Stoma Appliance Customisation
SCR	Summary Care Record
STP	Sustainability and Transformation Plans