

Hillingdon Pharmaceutical Needs Assessment 2015

Draft

December 2014

Contents

Exe	cutive Summary	3
1.	Introduction	6
2.	Pharmaceutical Needs Assessment (PNA)	6
3.	Key findings and background information	7
4.	Recommendations	11
5.	Community pharmacy provision within Hillingdon	12
6.	Definition of pharmaceutical services	27
7.	Public health services	28
8.	Pharmaceutical lists and NHS market entry	29
9.	Purpose of the PNA and its content	29
10.	Context for the Pharmaceutical Needs Assessment	30
а	The Joint Strategic Needs Assessment	30
b) Joint Health and Wellbeing Strategy (JHWS)	31
C	Hillingdon Health and Wellbeing Board	31
d		
е) Healthwatch Hillingdon	33
11.	Outcomes frameworks for public health, NHS and social care	34
12.	Pharmaceutical services within the national and local context	35
13.	Hillingdon Pharmaceutical Needs Assessment 2011	36
14.	Process for developing the PNA	37
15.	Stakeholder involvement in the PNA	37
Ack	nowledgements	39
Glo	ssary	40
App	endix 1 - Demography	
App	endix 2 - Epidemiology	
App	endix 3 - Community pharmacy provision	
App	endix 4 – Pharmacy Survey results	
App	endix 5 – Pharmacy Survey	
App	endix 6 - Steering Group Terms of Reference and timeline	

Executive Summary

The Health and Social Care Act 2012 transferred the responsibility for public health to local Councils. This role includes taking the lead on three new interrelated functions:

- 1.Undertaking Pharmaceutical Needs Assessments on behalf of the Health and Wellbeing Board
- 2. Commissioning certain public health services from community pharmacies
- 3. Providing a broader strategic role in supporting the development of community pharmacies with an increased role in public health and health improvement.

This Pharmaceutical Needs Assessment describes the needs related to pharmaceutical services for the population of Hillingdon.

Demographic and Epidemiological Analysis

Information from Hillingdon's Joint Strategic Needs Assessment was reviewed alongside priorities set by the Hillingdon Health and Wellbeing Board in the JHWS. Demographic data for Hillingdon was considered and an epidemiological needs assessment undertaken to ascertain the current health status of the population, past trends and future projections. Distribution of various illnesses and their risk factors is crucial for understanding the health needs in a population. Hillingdon's geography, population diversity are described in Appendix 1 and the epidemiological data are described in Appendix 2.

Analysis of existing services

Pharmaceutical services include essential services, advanced services, and locally commissioned services (known as enhanced services). These include the provision of dispensing services, services to support patients in appropriate use of medicines, advice and support to residents and staff in care homes in connection with drugs and appliances, on demand availability of specialist drugs, and out-of-hours services; and delivery of public health services. Appendix 3 and Appendix 4 describe the location of community pharmacies, types of pharmacies based on opening hours, travel distances and services provided by local pharmacies. This information includes pharmaceutical services provided in Hillingdon. The analysis took into account future changes predicted in the population within localities and the impact of any housing developments.

A survey of the existing 66 pharmacies in Hillingdon along with those in neighbouring areas was completed, with the support of the Local Pharmaceutical Committee. The 100% response rate from those pharmacies in Hillingdon secured a robust and up to date collection of information to support the assessment of need. Appendix 5 shows the survey used.

Maps are included in the PNA identifying the premises at which pharmaceutical services are provided.

Management of the development of the PNA

A Steering Group was set up (Appendix 6) which included representatives from Hillingdon Council, Hillingdon Clinical Commissioning Group, Healthwatch Hillingdon, the Local Pharmaceutical Committee and NHS England Area Team. Other partners consulted include the Local Medical Committee, the Hillingdon Hospital NHS Foundation Trust, CNWL NHS Trust, local community pharmacies, the voluntary sector and neighbouring Health and Wellbeing Boards.

Consultation: The statutory 60-day consultation took place between September 24th 2014 and November 23rd 2014. The draft PNA was available on the Hillingdon Council website during the consultation period.

[DRAFT] Recommendations: subject to the outcomes of the consultation

- 1. To recognise that Pharmaceutical services in Hillingdon are well resourced. This suggests the number of pharmacies is sufficient to manage the need of the population over the next 3-5 years.
 - Pharmacy provision is good across all three localities in Hillingdon. In the pharmacy service survey pharmacists stated their willingness to provide services that may be required in the future.
- 2. Pharmacy services should be promoted to the local population.
 - Many residents may require health advice from a health professional when their GP Practice is closed. The pharmacy could be the first port of call due to the high degree of accessibility to pharmaceutical services across Hillingdon.
- 3. Pharmacies should continue to have an effective health promotion role, targeted to improve the health and wellbeing of Hillingdon residents where needed.
 - This could include local and national public health campaigns (e.g. NHS health checks, the stop smoking service, influenza immunisation and sexual health services) to address key local health and wellbeing needs.
- 4. Encourage pharmacies to increase the delivery of Medicines Use Review Services (MURs).
 - There are many people on GP disease registers some of whom would have more than one condition who would benefit from a frequent review of their prescription medicines.

- 5. Community pharmacists should use the 'Making Every Contact Count' (MECC) approach while dispensing medicines in order to target individuals with public health messages and improve the health of Hillingdon residents.
 - Earlier intervention through targeted health promotion advice by health professionals would aid positive life style changes. Contact with residents through local pharmacies in Hillingdon is a good opportunity to promote health and wellbeing.



1. Introduction

Local government's new role in relation to pharmaceutical services

The Health and Social Care Act 2012 also transferred the responsibility for public health to councils, which has included leading on three new interrelated functions:

- Undertaking pharmaceutical needs assessments on behalf of Hillingdon's Health and Wellbeing Board
- Commissioning certain public health services from community pharmacies
- Providing a broader strategic role in supporting the development of community pharmacies with an increased role in public health and health improvement.

This Pharmaceutical Needs Assessment describes the needs related to pharmaceutical services for the population of Hillingdon. The NHS Act (the "2006" Act), amended by the Health and Social Care Act 2012 established Health and Wellbeing Boards (HWBs) in each local area and transferred responsibility to develop and update Pharmaceutical Needs Assessments (PNAs) from PCTs to HWBs. Responsibility for using PNAs as the basis for determining market entry to a pharmaceutical list transferred from PCTs to NHS England from April 1st 2013. This means that the decisions on whether to open new pharmacies are not made by the HWB. However, the PNA will help in the commissioning of pharmaceutical services in the context of local priorities.

The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013, which set out the legislative basis for developing and updating PNAs and can be found at: http://www.dh.gov.uk/health/2013/02/pharmaceutical-services-regulations/

2. Pharmaceutical Needs Assessment (PNA)

A Pharmaceutical Needs Assessment, as defined in the Regulations, is the statement of the needs for pharmaceutical services which each HWB is required to publish by virtue of section 128A of the 2006 Act(1) (Pharmaceutical Needs Assessments), whether it is the statement of its first assessment or of any revised assessment, is referred to in these Regulations as a Pharmaceutical Needs Assessment. The contents of the PNA as defined by the Regulations are:

- All the pharmaceutical services provided by pharmacies in Hillingdon under arrangements made by the NHS England. These will include dispensing, providing advice on health, medicines reviews and local public health services, such as stop smoking, sexual health and support for drug users
- Other services, such as dispensing by GP surgeries, and services available in neighbouring HWB areas that might affect the need for services in Hillingdon

- Demographics of Hillingdon, Borough wide population in different localities and wards, and their needs
- Identification of gaps that could be met by providing more pharmacy services, or through opening more pharmacies, taking into account likely future needs
- Relevant maps relating to Hillingdon and its pharmacies
- Alignment with other plans for local health and social care, including the Joint Strategic Needs Assessment (JSNA).

The content of this PNA was developed in accordance to regulations 3-9 Schedule 1 of the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013.

The findings and recommendations of the report regarding the potential opportunities for pharmaceutical services to provide support in meeting the health needs of the population of Hillingdon are based upon a comprehensive analysis and review of the data and information that has been considered in the following pages, including:

- demographic review, in particular the current population and population projections, including key groups such as children, older people and those living in deprivation
- epidemiological review, in particular those identified by GPs with diseases and with long term conditions
- community pharmacy locations, including information about 100 hour opening times per week
- pharmaceutical services provided at each location
- local priorities arising from the JSNA and those highlighted in the H&WB strategy 2013-16.

3. Key findings and background information

The London Borough of Hillingdon

Hillingdon is the second largest of London's 32 boroughs covering an area of 42 square miles (11,571 hectares), over half of which is countryside and woodland. Hillingdon has always been a transport hub and home to Heathrow Airport - the world's busiest international airport. It is also the home of RAF Northolt, and shares its borders with Hertfordshire, Buckinghamshire, Surrey, Hounslow, Ealing, and Harrow. Hillingdon has 22 electoral wards within three localities: Ruislip & Northwood in the northern part of the Borough, Uxbridge & West Drayton in the central part of the Borough, and Hayes & Harlington in the southern part of Hillingdon. Ruislip & Northwood consists of eight wards, and Uxbridge & West Drayton and Hayes & Harlington both consist of seven wards.

Hillingdon is traversed by the Grand Union Canal, the M4 motorway, the A40, the A4020 and the Great Western Railway. With all those road networks and three of London's underground lines (Piccadilly, Metropolitan and Central lines) starting and

ending in the Borough, Hillingdon is a major transport hub. The south of the Borough is home to the world's busiest international airport Heathrow, which occupies 1,227 hectares land, and handled 72.3 million passengers in 2013. The arrival of Crossrail in 2018, with new stations at West Drayton and Hayes will open up access to central London even further.

Demography

The population resident in Hillingdon in 2015 is estimated at 295,000 persons. This is split between the three localities of Ruislip & Northwood (32% of the population of the Borough), Uxbridge & West Drayton (33%) and Hayes & Harlington (35%). There are higher numbers of younger people in Hayes and Harlington and higher numbers of older people (60+) in Ruislip and Northwood.

GLA ethnic group projection (2013) estimate that Hillingdon is becoming more diverse with Black and Minority Ethnic (BAME) groups accounting for 45% of the 2015 resident population and white ethnic groups accounting for 55% of the 2015 resident population. This proportion of BAME groups is lower than across London but considerably higher than the England average.

The population increase in Hillingdon over the next 5 years is expected to be 7.2%, around 1.4% per annum which is higher than the rate of both London and England. The main increases in the Borough are expected in the age bands 0-17, 25-39 and 40-64 years. All age groups are expected to see an increase in the proportion of BAME groups between 2015 and 2020, with BAME groups likely to account for 49% of the population by 2020. Most wards in Hillingdon will see a 500-1,000 person increase in their population over the next 5 years. The ward of Uxbridge North is expected to see an increase of 4,500 persons, due to the St Andrews Park development.

The main driver of population growth in Hillingdon over the next 5 years is projected to be natural change (the greater number of births than deaths). 30% of population growth is projected to result from net inward migration. The number of births is expected to increase slightly to 4,900. The number of births is higher in Hayes & Harlington, than in Uxbridge & West Drayton, which in turn is higher than Ruislip & Northwood.

Hillingdon has a mixed socio-economic profile. The 2010 English Index of Deprivation ranks Hillingdon as 138th most deprived out of 326 Local Authority areas in England and 11th least deprived in London. The average deprivation score masks the differences at ward level - the wards in Ruislip & Northwood tend to have the least deprivation while those wards in Hayes & Harlington tend to be more deprived than the Hillingdon average.

Hillingdon is economically prosperous. The Borough has a lower proportion of economically inactive people than London or England. In 2014 Hillingdon the Job Seekers Allowance claimant level was at its lowest level since December 2008 and has dropped 27% over the past 12 months.

9.6% of residents of Hillingdon provide unpaid care to family or friends. The proportion of the working age population (age 16-64 years) receiving carers allowance is highest in the ward of West Drayton (1.6%). The number of carers aged 65+ is highest in Ruislip & Northwood and lowest in Hayes & Harlington.

Car and van ownership in all wards in Hillingdon is higher than the average for London. 37% of working aged residents (age 16-74) use a car or get a lift to work, 25% use public transport, are on foot or use a bicycle.

Epidemiology (diseases and their cause within populations)

In general Hillingdon residents enjoy a higher life expectancy in both males and females than the average for London and England, 79.4 years and 83.5 years respectively. There is some variation by ward and by locality within the Borough – in terms of wards Botwell has the lowest life expectancy in both males (age 77) and females (age 80).

Analysis of numbers on GP registers show some differences in ward and locality disease prevalence generally relating to the age profiles of the areas within the Boroughs.

GP register derived prevalence for coronary heart disease, hypertension, chronic kidney disease, cancer, osteoporosis and depression are highest in Ruislip & Northwood. Register derived prevalence of chronic obstructive pulmonary disease is highest in Uxbridge & West Drayton. The number of people on GP registers for obesity and diabetes in Hillingdon is highest in Hayes & Harlington.

Mortality rates from all causes have been falling in Hillingdon in line with London and England, both for all ages and for those aged under 75 years. Circulatory disease and cancers are the two major causes of death in Hillingdon.

Smoking is identified as a major risk factor for many diseases. In Hillingdon the estimated prevalence of smoking is 17.5% of the population aged over 18 which is close to the London average and lower than the England average. The number of people attempting to quit smoking and the number of people successfully stopping is highest in Hayes & Harlington.

Influenza immunisation in Hillingdon is comparable to England as a whole at 71%, however, this is below the Chief Medical Officer's (CMO) target of 75%. Looking at higher risk groups, coverage is 53% which is higher than England, but still below the CMO target of 60%.

Teenage pregnancy in Hillingdon has decreased year on year recently and is lower than the England average. The rate of conceptions (age <18 years) in the wards of Harefield and Heathrow Villages, however, was double the England rate in 2011 (the latest available comparative data).

Sexually transmitted infections represent an important public health issue in London which has the highest rate of STIs in England. In comparison with other London boroughs however, Hillingdon has a relatively low rate of sexually transmitted infections. Age data shows that younger people experience higher rates of infection and account for higher proportions of treatments.

Drug treatment services in Hillingdon achieve proportionately more successful outcomes in Hillingdon than across London and England.

Around 25% of the drinking population in Hillingdon are assessed as at higher risk or increasing risk. Alcohol specific hospital admission rates for adults in Hillingdon are in line with the England average and lower than in other London Borough, with the exception of among younger drinkers. Hospital admission rates among those aged under 18 are higher than the London average.

Hillingdon will liaise with other boroughs in North West London and NHS England with the aim to agree themes for the six local campaigns which community pharmacies can deliver on an annual basis.

Service Provision (pharmacies)

There are 66 community pharmacies in Hillingdon. The numbers of pharmacies are evenly geographically distributed across Hillingdon with at least 21 per locality. The number of pharmacies per head of population in Hillingdon exceeds the England and London averages.

In Hayes & Harlington provision is just below the England average rate per head of population, however, there are additional 20 or so pharmacies within 1 km, but sited in neighbouring boroughs.

Access to pharmacy services is very good for Hillingdon residents. 99.7% of households in Hillingdon are within a 5 minute drive of a pharmacy.

Of the 66 pharmacies in Hillingdon:

- 28 are provided by large multiple providers, 31 are independent pharmacies and 6 are part of chains of fewer than 5 pharmacies
- 64 provide a Medicines Use Review (MUR) service, helping people to understand and administer their medications appropriately. 19,000 MURs were conducted in 2013/14
- 64 have offered a new medicines service over the last year
- 6 pharmacies (2 in each locality) provide a stoma appliance customisation service.

The Pharmaceutical Needs Assessment survey received a 100% response rate from Hillingdon pharmacies with details of their services provided.

Residents across the Hillingdon localities have access to a range of services from the essential dispensing services to screening and monitoring, vaccination and disease specific services.

Most pharmacies across all three localities would be willing to provide services that they do not yet provide if they were commissioned to do so.

4. Recommendations

On the basis of these findings, the report makes the following recommendations:

- To recognise that Pharmaceutical services in Hillingdon are well resourced. This suggests the number of pharmacies is sufficient to manage the need of the population over the next 3-5 years.
 - Pharmacy provision is good across all three localities in Hillingdon. In the pharmacy service survey pharmacists stated their willingness to provide services that may be required in the future.
- Pharmacy services should be promoted to the local population.
 - Many residents may require health advice from a health professional when their GP Practice is closed. The pharmacy could be the first port of call due to the high degree of accessibility to pharmaceutical services across Hillingdon.
- Pharmacies should continue to have an effective health promotion role, targeted to improve the health and wellbeing of Hillingdon residents where needed.
 - This could include local and national public health campaigns (e.g. NHS health checks, the stop smoking service, influenza immunisation and sexual health services) to address key local health and wellbeing needs.
- Encourage pharmacies to increase the delivery of Medicines Use Review Services (MURs).
 - There are many people on GP disease registers some of whom would have more than one disease who would benefit from a frequent review of their prescription medicines.
- Community pharmacists should use the Making Every Contact Count (MECC) approach while dispensing medicines in order to target individuals with public health messages and improve the health of Hillingdon residents.
 - Earlier intervention through targeted health promotion advice by health professionals would aid positive life style changes. Contact with residents through local pharmacies in Hillingdon is a good opportunity to promote health and wellbeing.

5. Community pharmacy provision within Hillingdon

NHS England North West London Area Team commissions 66 community pharmacies in Hillingdon to provide pharmaceutical services.

Provision of community pharmacies in Hillingdon by ward and locality

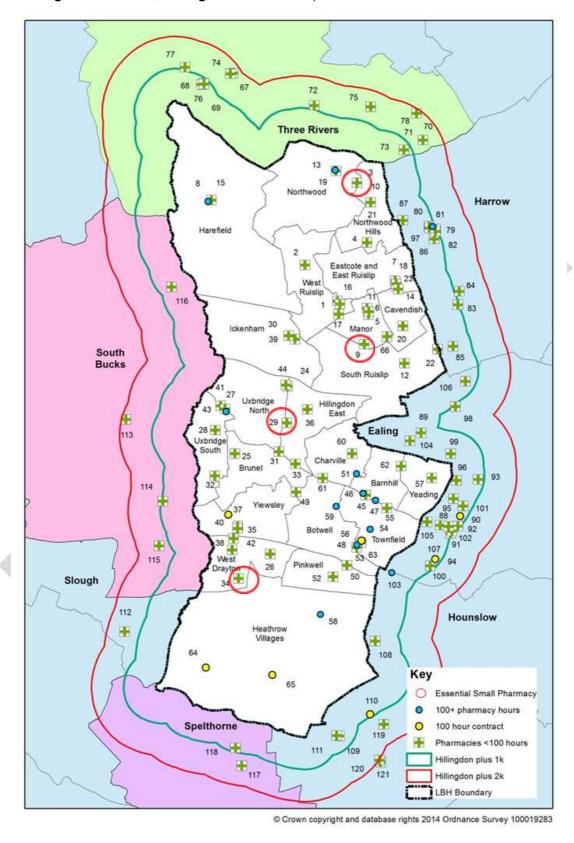
Locality / ward	Population in 2015	Number of pharmacies
	(GLA ward projections, 2013)	
Ruislip & Northwood	Total = 94,140	Total = 24
Cavendish	12,420	
Eastcote & East Ruislip	12,910	
Harefield	7,955	Rate per 100,000
Manor	12,175	population = 25.5
Northwood	11,130	population = 94,140
Northwood Hills	12,340	number of pharmacies = 24
South Ruislip	13,290	
West Ruislip	11,920	
Uxbridge & West Drayton	Total = 99,020	Total = 21
Brunel	15,205	
Hillingdon East	14,035	
Ickenham	11,025	Rate per 100,000
Uxbridge North	13,475	population = 21.2
Uxbridge South	15,500	population = 99,020
West Drayton	15,645	number of pharmacies = 21
Yiewsley	14,135	
Hayes & Harlington	Total = 103,975	Total = 21
Barnhill	14,410	
Botwell	16,370	
Charville	13,550	Rate per 100,000
Heathrow Villages	13,585	population = 20.2
Pinkwell	16,170	population = 103,975 number of pharmacies = 21
Townfield	15,290	Humber of pharmacies – 21
Yeading	14,600	
22 wards	297,135 population	66 pharmacies

Hillingdon rate per 100,000 population = 22.2

(population = 297,135 number of pharmacies = 66)

Access to pharmaceutical services: in Borough and out of Borough

Map: Pharmacies in Hillingdon, and those within 2km of the boundary (Three Rivers, South Bucks, Slough and Spelthorne) and 1km of the boundary (London Boroughs of Harrow, Ealing and Hounslow):



Hillingdon pharmacies:

Key	Pharmacy name	Location
1	Ashworths Pharmacy	Ruislip
2	Bouticare Pharmacy	Ruislip
3	Carter Chemist & Ability O	Northwood
4	Carters Pharmacy	Eastcote
5	Chimsons Ltd	Ruislip Manor
6	Dana Pharmacy	Ruislip Manor
7	Eastcote Pharmacy	Eastcote
8	Harefield Pharmacy	Harefield
9	Nu-Ways Pharmacy O	Ruislip
10	Ross Pharmacy	Northwood
11	Ruislip Manor Pharmacy	Ruislip Manor
12	Sainsbury's Pharmacy	South Ruislip
13	Sharman's Chemist	Northwood
14	Superdrug	Eastcote
15	The Malthouse Pharmacy	Harefield
16	Boots, 67 High Street	Ruislip
17	Boots, Wood Lane Medical Centre	Ruislip
18	Boots	Eastcote
19	Boots	Northwood
20	Boots, Whitby Road	Ruislip
21	Boots	Northwood Hills
22	Boots	South Ruislip
23	Boots	Eastcote
24	Adell Pharmacy	Hillingdon
25	Brunel Pharmacy	Uxbridge
26	Carewell Chemists	West Drayton
27	Flora Fountain Ltd	Uxbridge
28	H A McParland Ltd	Uxbridge
29	Hillingdon Pharmacy O	Hillingdon
30	Hopkins Pharmacy	Ickenham
31	Lawtons Pharmacy	Hillingdon
32	Mango Pharmacy	Cowley
33	Oakleigh Pharmacy	Hillingdon
34	Orchards Pharmacy O	West Drayton

Key	Pharmacy name	Location
35	Phillips Pharmacy/PillBox	Yiewsley
36	Puri Pharmacy	Hillingdon
37	Tesco In-Store Pharmacy •	West Drayton
38	Winchester Pharmacy	West Drayton
39	Winchester Pharmacy	Ickenham
40	Yiewsley Pharmacy	Yiewsley
41	Boots, Intu Shopping Centre	Uxbridge
42	Boots	West Drayton
43	Boots, High Street	Uxbridge
44	Boots	Hillingdon
45	Daya Ltd	Hayes
46	Grosvenor Pharmacy	Hayes
47	H A McParland Ltd	Hayes
48	Hayes Town Pharmacy •	Hayes
49	Joshi Pharmacy	Hayes
50	Kasmani Pharmacy	Hayes
51	Lansbury Pharmacy	Hayes
52	Medics Pharmacy	Hayes
53	Nuchem Pharmacy	Hayes
54	Pickups Chemist	Hayes
55	Sainsbury's Pharmacy	Hayes
56	Superdrug	Hayes
57	Tesco In-Store Pharmacy	Yeading
58	The Village Pharmacy	Harlington
59	Vantage Chemists	Hayes
60	Vantage Pharmacy	Hayes
61	Boots, 1266 Uxbridge Road	Hayes
62	Boots, 236 Yeading Lane	Hayes
63	Boots	Hayes
64	Boots, Terminal 5 •	Heathrow Airport
65	Boots, Terminal 3 •	Heathrow Airport
66	Boots, Waitrose	Ruislip

^{= 100} hour contract= Essential Small Pharmacy (ESP)

Pharmacy opening hours

The national framework for pharmaceutical services requires every pharmacy to open for 40 hours minimum and provide essential services which are necessary services. Maps above show the distribution of pharmacies that are open less than 100 hours per week, those that are contracted to open 100 hours a week and those that have over 100+ pharmacist hours; but these do not necessarily open for 100+ hours.

Also, pharmacies 64 and 65 (Boots) located in Heathrow terminals might not be as accessible to local residents due to parking charges for airport car parks even though these are open for 100+ hours.

Compliance with the Equalities Act

Community pharmacies must make reasonable provision for access by patients who have disabilities. Out of 66 community pharmacists, 65 stated they had wheelchair access and were compliant with the Equalities Act. 30 pharmacies (45%) had patient toilet facilities and 58 (87%) had consultations room / area accessible via wheelchair. 26 pharmacies reported that they provide consultations in patients' homes or other suitable sites for greater accessibility.

Further analysis of responses to the community pharmacy survey is illustrated in Appendix 4.

Out of Borough pharmacies:

Key	Pharmacy name	Location
67	Boots	Rickmansworth
68	Dave Pharmacy	Rickmansworth
69	Delite Chemist	Rickmansworth
70	Esom Chemist	South Oxhey
71	Lex Pharmacy	South Oxhey
72	Loomrose Pharmacy	Moor Park
73	Prestwick Pharmacy	South Oxhey
74	Riverside Pharmacy	Rickmansworth
75	S S Bandher Chemist	South Oxhey
76	The Chief Cornerstone	Rickmansworth
77	Tudor Pharmacy	Rickmansworth
78	Viks Pharmacy	South Oxhey
79	Angie's Chemist	Pinner
80	Carters Chemist	Pinner
81	Gor Pharmacy, Pin Medical Centre	Pinner
82	Gor Pharmacy	Pinner
83	Jade Pharmacy	Harrow
84	Jade Pharmacy	Harrow
85	Kings Pharmacy	South Harrow
86	Sainsbury's Pharmacy	Pinner
87	Tesco Pharmacy	Pinner
88	Alchem Pharmacy	Southall
89	Alpha Chemist	Northolt
90	Anmol Pharmacy	Southall
91	Chana Chemist	Southall
92	Chana Chemist	Southall
93	Chana Chemist	Southall

Key	Pharmacy name	Location
96	Lady Margaret Pharmacy	Southall
97	Boots	Pinner
98	M Gokani Chemist	Northolt
99	Northolt Pharmacy	Northolt
100	Puri Pharmacy	Southall
101	Shah Pharmacy	Southall
102	Sherrys Chemist	Southall
103	Tesco In-Store Pharmacy	Southall
104	Touchwood Pharmacy	Northolt
105	Woodland Pharmacy	Southall
106	Boots	Northolt
107	Boots	Southall
108	Dunns Chemist	Cranford
109	Edwards & Taylor	Bedfont
110	Tesco Pharmacy	Feltham
111	Boots	Bedfont
112	Colnbrook Pharmacy	Colnbrook
113	Jeeves Pharmacy	Iver Heath
114	Lloyds Pharmacy	Iver
115	Saleys Chemist	Iver
116	Boots	Denham
117	Tesco	Stanwell
118	Hermans	Stanwell
119	Boots	Feltham
120	Boots	Feltham
121	Boots	Feltham

Borough pharmacy opening hours

Pharmacy Name	Address	Map Ref	Postcode	Monday - Friday	Saturday	Sunday	
Ruislip & Northwood	Ruislip & Northwood						
Ashworths Pharmacy	64 High Street, Ruislip	1	HA4 7AA	09:00 - 18:00	09:00 - 17:00	Closed	
Bouticare Pharmacy	81 Howletts Lane, Ruislip	2	HA4 7YG	09:00 - 18:00	09:00 - 13:00	Closed	
Carter Chemist & Ability	112-114 High Street, Northwood	3	HA6 1BJ	09:00 - 19:00	09:00 - 13:00	Closed	
Carters Pharmacy	41 Salisbury Road, Eastcote	4	HA5 2NJ	09:00 - 17:00	Closed	Closed	
Chimsons Ltd	29 Victoria Road, Ruislip Manor	5	HA4 9AB	09:00 - 18:30	09:00 - 17:00	Closed	
Dana Pharmacy	100 Victoria Road, Ruislip Manor	6	HA4 0AL	09:00 - 18:00	09:00 - 13:00	Closed	
Eastcote Pharmacy	111 Field End Road, Eastcote	7	HA5 1QG	09:00 - 18:00	09:00 - 17:00	Closed	
Harefield Pharmacy	12e High Street, Harefield	8	UB9 6BU	09:00 - 18:30	09:00 - 13:00	Closed	
Nu-Ways Pharmacy	292 West End Road, Ruislip Gardens	9	HA4 6LS	09:00 - 18:00	09:00 - 14:00	Closed	
Ross Pharmacy	28 Joel Street, Northwood	10	HA6 1PF	09:00 - 18:30	09:00 - 17:30	Closed	
Ruislip Manor Pharmacy	53 Victoria Road, Ruislip Manor	11	HA4 9BH	09:00 - 18:00	09:00 - 17:00	Closed	
Sainsbury's Pharmacy	Sainsbury's Store, 11 Long Drive, South Ruislip	12	HA4 0HQ	08:00 - 22:00	08:00 - 22:00	08:00 - 22:00	
Sharman's Chemist	3 Clive Parade Maxwell Road, Northwood	13	HA6 2QF	09:00 - 19:00	09:00 - 17:30	10:00 - 14:00	
Superdrug	143 Field End Road, Eastcote	14	HA5 1QL	09:00 - 18:30	09:00 - 18:30	Closed	

Pharmacy Name	Address	Map Ref	Postcode	Monday - Friday	Saturday	Sunday
Ruislip & Northwood						
The Malthouse Pharmacy	The Malthouse, Breakspear Road North Harefield	15	UB9 6NF	09:00 - 18:30	09:00 - 13:00	Closed
Boots	67 High Street, Ruislip	16	HA4 8LS	09:00 - 18:00	09:00 - 18:00	11:00 - 17:00
Boots	Wood Lane Medical Centre, 2A Wood Lane, Ruislip	17	HA4 6ER	M, F 08:30-19:00 Tu, W 08:30-20:00 Th 08:30-16:00	08:30 - 13:00	Closed
Boots	123 Field End Road, Eastcote	18	HA5 1QH	09:00 – 19:00	09:00 - 17:30	Closed
Boots	11 Maxwell Road, Northwood	19	HA6 2XY	09:00 - 18:00	09:00 - 18:00	10:00 - 16:00
Boots	212 Whitby Road, Ruislip	20	HA4 9DY	09:00 - 18:00	09:00 - 17:30	Closed
Boots	32 Joel Street, Northwood Hills	21	HA6 1PF	09:00 - 18:30	09:00 - 17:30	Closed
Boots	716 Field End Road, South Ruislip	22	HA4 0QP	09:00 - 19:00	09:00 - 13:00	Closed
Boots	169-171 Field End Road, Eastcote	23	HA5 1QR	09:00 - 18:00	09:00 - 18:00	Closed
Boots	Waitrose, 9 Kingsend, West Ruislip	66	HA4 7DS	08:30 - 20:00	08:30 - 18:00	10:00 - 16:00
Uxbridge & West Dra	yton		7			
Adell Pharmacy	392 Long Lane, Hillingdon	24	UB10 9PG	09:00 - 19:00	09:00 -17:00	Closed
Brunel Pharmacy	Unit 3a Hamilton Centre, Cleveland Rd	25	UB8 3PH	09:00 - 17:30	Closed	Closed
Carewell Chemists	10 Mulberry Parade, West Drayton	26	UB7 9AE	09:00 - 18:00	09:00 - 13:00	Closed
Flora Fountain Ltd	283 High Street, Uxbridge	27	UB8 1LQ	09:00 - 17:30	09:00 - 16:00	Closed

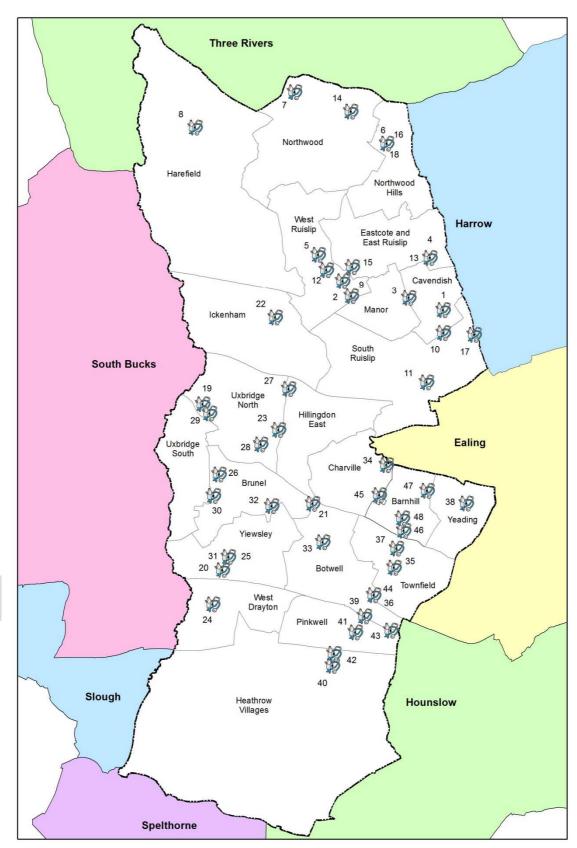
Pharmacy Name	Address	Map Ref	Postcode	Monday - Friday	Saturday	Sunday
Uxbridge & West Dray	ton					
H A McParland Ltd	118/120 Cowley Road, Uxbridge	28	UB8 2LX	08:45 - 18:00	09:00 - 17:30	Closed
Hillingdon Pharmacy	4 Sutton Court Road, Hillingdon	29	UB10 9HP	09:00 - 18:00	Closed	Closed
Hopkins Pharmacy	1 Swakeleys Road, Ickenham	30	UB10 8DF	09:00 - 17:30	09:00 - 16:00	Closed
Lawtons Pharmacy	8-9 Crescent Parade, Uxbridge Road Hillingdon	31	UB10 0LG	09:00 - 21:00	09:00 - 21:00	09:00 - 21:00
Mango Pharmacy	3 The Parade, High Street, Cowley	32	UB8 2EP	09:00 - 18:00	09:00 - 13:00	Closed
Oakleigh Pharmacy	Uxbridge Road, Hillingdon	33	UB10 0LU	09:00 - 18:00	09:00 - 13:00	Closed
Orchards Pharmacy	6 Laurel Lane, West Drayton	34	UB7 7TU	09:00 - 18:00	Closed	Closed
Phillips Pharmacy/Pill Box	84 High Street, Yiewsley	35	UB7 7DS	09:00 - 18:30	09:00 - 18:00	10:00 - 16:00
Puri Pharmacy	165 Ryefield Avenue, Hillingdon	36	UB10 9DA	08:30 - 17:30	08:30 - 17:30	Closed
Tesco Pharmacy	Yiewsley High Street, West Drayton	37	UB7 7SX	07:00 - 23:00	07:00 - 22:00	11:00 - 17:00
Winchester Pharmacy	64 Swan Road, West Drayton	38	UB7 7JZ	09:00 - 18:15	09:00 - 13:00	Closed
Winchester Pharmacy	79 Swakeleys Road, Ickenham	39	UB10 8DQ	09:00 - 18:00	09:00 - 17:00	Closed
Yiewsley Pharmacy	28 High Street, Yiewsley	40	UB7 7DP	08:30 - 18:30	09:00 - 13:00	Closed
Boots	163 High Street, Uxbridge	43	UB8 1JZ	08:00 - 18:30	09:00 - 18:00	10:30 - 17:30
Boots	14/16 Station Road, West Drayton	42	UB7 7BY	09:00 -18:30	09:00 -17:30	Closed
Boots	128 Intu Shopping Centre, Uxbridge	41	UB8 1GA	09:00 -19:00	09:00 - 19:00	11:00 - 17:00

Pharmacy Name	Address	Map Ref	Postcode	Monday - Friday	Saturday	Sunday
Hayes & Harlington	1					1
Boots	380 Long Lane, Hillingdon	44	UB10 9PG	08:30 - 18:30	09:00 - 17:30	Closed
Daya Ltd	750 Uxbridge Road, Hayes	45	UB4 0RU	09:00 - 19:30	09:00 - 18:00	Closed
Grosvenor Pharmacy	788 Uxbridge Road, Hayes	46	UB4 0RS	09:30 - 19:00	09:30 - 18:00	Closed
H A McParland Ltd	522 Uxbridge Road, Hayes	47	UB4 0SA	08:45 - 18:30	09:00 - 14:00	Closed
Hayes Town Pharmacy	11 Coldharbour Lane, Hayes	48	UB3 3EA	08:00 - 23:00	08:00 - 23:00	08:00 - 23:00
Joshi Pharmacy	315 Harlington Road, Hillingdon	49	UB8 3JD	09:00 - 19:00	09:00 - 13:00	Closed
Kasmani Pharmacy	6 Northfield Parade, Station Road Hayes	50	UB3 4JA	09:00 - 19:00	09:00 - 13:00	Closed
Lansbury Pharmacy	102 Lansbury Drive, Hayes	51	UB4 8SE	09:00 - 19:00	09:00 - 13:30	Closed
Medics Pharmacy	11 Dawley Road, Harlington	52	UB3 1LS	09:00 - 18:30	09:00 - 13:00	Closed
Nuchem Pharmacy	24 Coldharbour Lane, Hayes	53	UB3 3EW	09:00 - 19:00	09:00 - 18:00	Closed
Pickups Chemist	20-21 Broadway Parade, Coldharbour Lane, Hayes	54	UB3 3HF	08:30 - 21:00	09:00 - 20:00	10:00 - 18:00
Sainsbury's Pharmacy	Lombardy Retail Park, Coldharbour Lane Hayes	55	UB3 3EX	08:00 - 22:00	08:00 - 22:00	11:00 - 17:00
Superdrug	2-8 Station Road, Hayes	56	UB3 4DA	08:30 - 17:30	09:00 - 17:30	Closed
Tesco Pharmacy	Glencoe Road, Hayes	57	UB4 9SQ	08:00 - 20:00	08:00 - 20:00	10:00 - 16:00
The Village Pharmacy	218 High Street, Harlington	58	UB3 5DS	09:00 - 18:30	09:00 - 17: 30	Closed

Pharmacy Name	Address	Map Ref	Postcode	Monday - Friday	Saturday	Sunday
Vantage Chemists	1 Park Parade, Barra Hall Circus, Hayes	59	UB3 2NU	09:00 - 18:30	09:00 - 14:00	Closed
Vantage Pharmacy	252 Kingshill Avenue, Hayes	60	UB4 8BZ	09:00 - 1800	09:00 - 14:00	Closed
Boots	1266 Uxbridge Road, Hayes	61	UB4 8JF	09:00 - 18:00	09:00 - 17:30	Closed
Boots	236 Yeading Lane, Hayes	62	UB4 9AX	09:00 - 19:00	09:00 - 17:30	Closed
Boots	T5, Unit 24 Departures Level (Check in) Heathrow Airport	64	TW6 2GA	05:30 - 21:30	05:30 - 21:30	05:30 - 21:30
Boots	28-30 Station Road, Hayes	63	UB3 4DD	09:00 - 18:30	09:00 - 17:30	Closed
Boots	T3 Landside, Departures, Heathrow Airport	65	TW6 1QG	05:30 - 21:30	05:30 - 21:30	05:30 - 21:30

Location of general practices (GPs) in Hillingdon

Map: GP surgeries in Hillingdon



© Crown copyright and database rights 2014 Ordnance Survey 100019283

GP surgeries in Hillingdon:

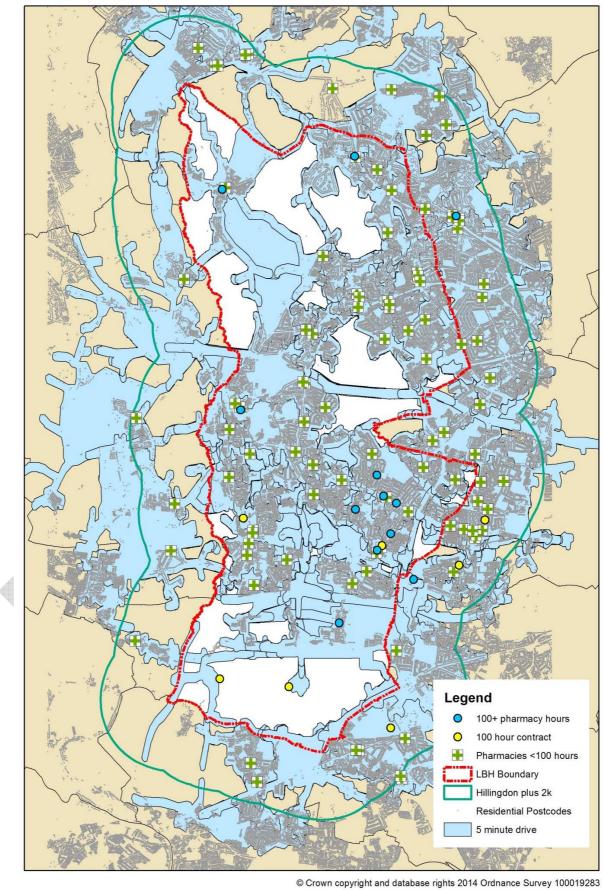
Kov	Practice name
Key	
1	Oxford Drive Medical Centre
2	Wood Lane Medical Centre
3	Cedars Medical Centre
4	The Abbotsbury Practice
5	Dr A Karim's Practice
6	The Evergreen Practice
7	The Mountwood Surgery
8	The Harefield Practice
9	Dr MK Mashru's Practice
10	Dr Solomon Practice
11	Dr MLR Siddiqui's Practice
12	Southcote Clinic
13	Devonshire Lodge
14	Eastbury Surgery
15	St Martin's Medical Centre
16	Acre Surgery
17	Acrefield Surgery
18	Carepoint Practice
19	The Belmont Medical Centre
20	Yiewsley Family Practice
21	Parkview Surgery
22	Wallasey Medical Centre
23	Acorn Medical Centre
24	The Medical Centre
	West and the second state of the second state

Key	Practice name			
25	Otterfield Medical Centre			
26	Brunel Medical Centre			
27	Hillingdon Health Centre			
28	Oakland Medical Centre			
29	Uxbridge Health Centre			
30	Church Road Surgery			
31	The High Street Practice			
32	West London Medical Centre			
33	Kingsway Surgery			
34	Cedar Brook Practice			
35	Kincora Doctor's Surgery			
36	Hayes Town Medical Centre			
37	Townfield Doctors Surgery			
38	Willow Tree Surgery			
39	Hayes Medical Centre			
40	Glendale House Surgery			
41	Bedwell Medical Practice			
42	Heathrow Medical Centre			
43	North Hyde Practice			
44	Orchard Practice			
45	The Pine Medical Centre			
46	The Warren Practice			
47	Yeading Court Surgery			
48	Shakespeare Surgery			

Hospital services

NHS hospital trusts and private hospitals do not provide pharmaceutical services as defined for the purposes of the PNA however, as part of the integrated services for patients being discharged from acute and secondary care into community, liaison between hospital pharmacy and community pharmacies is important for providing seamless discharge of patients.

Map: Access by car. Pharmacies within a 5 minute drive time, by residential postcodes



Geographic Information System (GIS) drive time layers at 1 minute intervals were commissioned; the number of Borough households found to be within and not within the following drive times to pharmacies are:

Drive time	Within drive time:		Outside drive time:	
	Number of households	Percentage	Number of households	Percentage
1 minute	44,831	43.2%	59,038	56.8%
2 minutes	88,031	84.8%	15,838	15.2%
3 minutes	100,787	97%	3,082	3%
4 minutes	103,428	99.6%	441	0.4%
5 minutes	103,596	99.7%	273	0.3%
6 minutes	103,854	100.0%	15	<0.1%

^{*}based on 103,869 households

Driving in light urban traffic and keeping within the posted speed limits, 97% of households are within a 3 minute drive or within a 30 minute walk away from a community pharmacy.

6. Definition of pharmaceutical services

Section 126 of the 2006 Act places an obligation on NHS England to put arrangements in place so that drugs, medicines and listed appliances ordered via NHS prescriptions can be supplied to persons. This section also makes provision for the types of healthcare professionals that are authorised to order drugs, medicines and listed appliances on an NHS prescription.

Therefore, pharmaceutical services in relation to PNAs include:

Essential services: Every community pharmacy providing NHS pharmaceutical services must provide (as set out in their terms of service) the dispensing of medicines, dispensing appliances, repeat dispensing, disposal of unwanted medicines, promotion of healthy lifestyles and signposting and support for self-care.

Advanced services: These are the services that community pharmacy contractors and dispensing appliance contractors can provide subject to accreditation as necessary based on premises, training or notification to the NHS England (NHSE) Area Team – these are Medicines Use Reviews (MURs), the New Medicines Service (NMS) for community pharmacists and Appliance Use Reviews (AURs) and the Stoma Appliance Customisation Service (SACS) for dispensing appliance contractors. At this time a pharmacy may undertake up to 400 MURs per annum if they have informed NHS England of their intention to provide the service. Pharmacy staff may also undertake a limited number of AURs linked to the dispensing of appliances and as many SACS as required.

Locally commissioned services (known as enhanced services): Only NHS England can commission the enhanced services. However, community pharmacy can provide services commissioned by local authorities and CCGs (through NHS England) which mirror enhanced services. Therefore to give a complete picture of the local provision, these need to be considered alongside pharmaceutical service provision.

Enhanced Services - Only those contractors directly commissioned by NHS England can provide these services in line with the PNAs produced by Health and Wellbeing Boards.

The National Health Service Act 2006, The Pharmaceutical Services (Advanced & Enhanced Services) (England) Directions 2013, Part 4 14 (1) - list the enhanced services as:

- Anticoagulant Monitoring Service
- Care Home Service
- Disease Specific Medicines Management Service
- Gluten Free Food Supply Service
- Independent Prescribing Service
- Home Delivery Service
- Language Access Service
- Medication Review Service

- Medicines Assessment and Compliance Support Service (this is more clinical than MURs)
- Minor Ailments Service
- Needle and Syringe Exchange Service
- On Demand Availability of Specialist Drugs Service
- Out of Hours Service
- Patient Group Direction Service (this would include supply of any Prescription Only Medicine via PGD)
- Prescriber Support Service
- Schools Service
- Screening Service
- Stop Smoking Service
- Supervised Administration Service
- Supplementary Prescribing Service.

7. Public health services

Alongside their more traditional role, community pharmacies are increasingly delivering a wide range of locally commissioned services like smoking cessation, emergency hormonal contraception, needle and syringe exchange schemes, influenza immunisations and more. Commissioning of such public health services transferred to local authorities with effect from 1 April 2013. The following Enhanced Services were listed in the Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2012:

- Needle and syringe exchange
- Screening services such as Chlamydia screening
- Stop smoking
- Supervised administration service
- Emergency hormonal contraception services through patient group directions.

Where such services are commissioned by local authorities, they no longer fall within the definition of enhanced services or pharmaceutical services as set out in legislation and therefore should not be referred to as enhanced services.

A recent progress report from the Pharmacy and Public Health Forum outlined why community pharmacies are considered an ideal setting for the provision of public health services:

- Community pharmacies offer easy access, including for people from deprived communities who may not access other conventional NHS services
- Many provide long opening hours
- They are a health resource on high street, in supermarkets, in every shopping centre
- They provide anonymity and confidentiality, where appropriate in a flexible setting within an informal environment

• They have a workforce that tends to reflect the social and ethnic backgrounds of the population they serve, making it easier to provide health promoting interventions.

8. Pharmaceutical lists and NHS market entry

The legislative framework in England is set out in the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (the 2013 regulations). Part 6 of the 2013 regulations provides a framework for ensuring the suitability of contractors who provide pharmaceutical services. Regulations in Part 6 make provisions for NHS England to manage admission, suspension and removal from their lists on fitness grounds. Under the Medicines Act 1968, a registered pharmacists must be in charge of each community pharmacy, which can be owned by a pharmacist sole trader, a limited liability partnership (where all partners are pharmacists) or bodies corporate (where a superintendent pharmacist must be appointed). These are collectively called *pharmacy contractors*.

9. Purpose of the PNA and its content

Based on the Department of Health (DH) guidance, this PNA will serve the following key purposes:

- It will be used by NHS England Area Team to make decisions about applications for opening new pharmacies in Hillingdon and dispensing appliance contractor premises; or applications from current pharmaceutical providers to change their existing regulatory requirements
- Include a statement of the pharmaceutical services that the HWB has identified as services which are provided (within or outside Hillingdon) and are necessary to meet the need for pharmaceutical services in Hillingdon
- A statement of the other (*relevant*) services which are provided, which are not needed, but which have secured improvements or better access to pharmaceutical services in the area;
- A statement of the services that the HWB has identified as not being provided, but which would, if they were to be provided, secure improvements or better access to pharmaceutical services in the area
- A statement of other NHS services provided by a local authority, the NHS Commissioning Board (NHS England), a Clinical Commissioning Group (CCG) or an NHS Trust, which affect the needs for pharmaceutical services
- An explanation of how the assessment has been carried out (including how the consultation was carried out)
- A map of providers of pharmaceutical services and other relevant maps that explain the scope of pharmaceutical services provided in Hillingdon and neighbouring boroughs, which impact on pharmaceutical need in Hillingdon.

The following are included in a pharmaceutical list for the purpose of PNA:

- Pharmacy contractors are healthcare professionals working for themselves or as employees who practice in pharmacy, the field of health sciences focusing on safe and effective medicines use
- Dispensing appliance contractors appliance suppliers are a specific sub-set
 of NHS pharmaceutical contractors who supply, on prescription, appliances
 such as stoma and incontinence aids, dressings, bandages etc.; they cannot
 supply medicines. However, some pharmacy contractors can choose to
 dispense appliances, provide AURs and SACS as part of the essential and
 advanced services
- In addition, there are two other types of pharmaceutical contractor dispensing doctors, who are medical practitioners authorised to provide drugs and appliances in designated rural areas known as controlled localities, and local pharmaceutical services (LPS) contractors who provide a level of pharmaceutical services in some HWB areas. A Local Pharmaceutical Service (LPS) contract allows NHS England to commission community pharmaceutical services tailored to specific local requirements. It provides flexibility to include within a single locally negotiated contract a broader or narrower range of services (including services not traditionally associated with pharmacy) than is possible under national pharmacy arrangements set out in the 2013 Regulations. All LPS contracts must, however, include an element of dispensing.

10. Context for the Pharmaceutical Needs Assessment

This PNA was undertaken in accordance with the requirements set out in Regulations 3-9 Schedule 1 of the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013; and forms the basis for commissioners of pharmaceutical services to consider the current provision and identify gaps in relation to local health needs and local priorities. Detailed analysis of the local health needs including demographic, epidemiological and survey based assessment can be found in Appendices 1 - 3; while local priorities stem from the Joint Strategic Needs Assessment (JSNA) and described in the Joint Health and Wellbeing Strategy (JHWS).

11. Links with other strategies and plans

The PNA draws on and takes into account a range of other relevant plans and strategies prepared by the Council and its strategic partners in order to prevent duplication of work and multiple consultations with health groups, patients and the public. These include:

a) The Joint Strategic Needs Assessment

The Health and Social Care Act 2012 amended the Local Government and Public Involvement in Health Act 2007 to introduce duties and powers for HWBs in relation to JSNAs. The aim of the JSNA is to improve the health and wellbeing of the local

community and reduce inequalities for all ages, identifying those groups where health and care needs are not being met and those which are experiencing comparatively different outcomes. Hillingdon JSNA is a continuous, ongoing and iterative process, which is used to determine what actions Hillingdon Council, the NHS and other partners need to take to meet health and social care needs and to improve health outcomes and address health inequalities. The JSNA pulls together all local needs assessments, strategies, and plans which can be found on https://www.hillingdon.gov.uk/jsna.

The development of PNA is a separate task to that of developing JSNA, as PNAs will inform commissioning decisions by local authorities (public health services from community pharmacies) and by NHS England and clinical commissioning groups (CCGs). Therefore JSNA provides a starting point for the PNA, but once produced it will inform the JSNA as well as the Joint Health and Wellbeing Strategy.

b) Joint Health and Wellbeing Strategy (JHWS)

JHWSs are strategies for meeting the needs identified in JSNAs. As with JSNAs, they are produced by Health and Wellbeing Boards, and are unique to each local area. JHWS set a small number of key strategic priorities for action that will make a real impact on people's lives. JHWSs aim to translate JSNA findings into clear outcomes the board wants to achieve, which will inform local commissioning leading to effective and locally led initiatives that meet those outcomes and address the needs.

Hillingdon JHWS identifies the following priorities which are used to inform commissioning and design local programmes, including commissioning of public health services via local community pharmacies:

- Children engaged in risky behaviour
- Dementia
- Physical activity
- Obesity
- Adult and Child Mental Health
- Type 2 Diabetes
- Increasing Child Population and Maternity Services
- Older People including sight loss
- Dental Health.

c) Hillingdon Health and Wellbeing Board

The Health and Wellbeing Board has a statutory requirement to improve the health and wellbeing of residents. Hillingdon HWB is a multi-agency group. It aims to make Hillingdon a Borough with excellent health, social care and housing, where all residents can enjoy fulfilling and happy lives. The Board provides strategic leadership for health and wellbeing and ensures that plans are in place and action is

taken to achieve this. The Board meets no less than quarterly and is chaired by the Leader of the Council. Statutory members of the HWBB include Hillingdon Council Cabinet members, Chairman of the Hillingdon Clinical Commissioning Group, a representative of Healthwatch Hillingdon, Statutory Directors of Adults Social Care, Children, and Public Health. The main objectives include:

- a) Lead on the duty to assess and publish information about the needs of the local population via the JSNA
- b) Deliver the duty to prepare and publish a Joint Health and Wellbeing Strategy (JHWS) based on the JSNA, to consider Health and Social Care Act flexibilities in developing the strategy and involve local residents and others as appropriate
- c)Promote integrated and partnership working across areas, including through the promotion of joined up commissioning plans across the NHS, social care and public health; and
- d) Support, be involved in and provide opinion on joint commissioning plans and the review of how well the JHWS is meeting needs. This includes providing an opinion on how well the CCG contributes to the delivery of the JHWS.

The HWB receives a performance monitoring report on joint priorities for health and social care on a quarterly basis, highlighting areas of good performance and areas for further action. The current priorities of the board are outlined in the JHWS as above.

d) Hillingdon Clinical Commissioning Group (HCCG) and Community Pharmacy

The CCG recognises that community pharmacists provide comprehensive and valuable services and support to patients, carers and residents. They are trusted as highly qualified professionals whether located in a busy high street or at the heart of a community. GPs provide high quality and cost-effective diagnostic, support, referral and prescribing services. They share a common purpose with community pharmacists in ensuring that patients optimise the use of their medicines.

CCG Pharmaceutical Advisors in the Medicines Management Team support GPs by providing evidence-based information to ensure patients receive safe and effective medicines, improve compliance and reduce wasteful prescribing. They understand the importance of harnessing the expertise and experience of community pharmacy in optimising medicines use and improving patient safety.

There are many areas of joint working between community pharmacists and the CCG Medicines Management Team, such as:

- Attending each organisations' medicines-related committees
- Working jointly on specific projects e.g. promotion of low acquisition cost blood glucose testing strips

 Setting up and implementing a Support with Medicines Use Pathway across the hospital, community, CCG, social care and primary care (GP and community pharmacy) interfaces.

The CCG no longer commissions NHS Pharmaceutical Services as this is the responsibility of NHSE. However the CCG can and does commission local services using the NHS Standard Contract. Currently these include:

- 1.An extended minor ailments service
- 2.An out-of-hours palliative care service
- 3.A sharps bin collection service
- 4.A medicines use pathway across all health and social care interfaces which is managed by LBG alongside the other community pharmacy public health services

The CCG will continue to work closely with local community pharmacists and commission further services to meet the needs of the local population. Further opportunities will arise when community pharmacists take on a wider role in improving medicines optimisation by ensuring patients get the best outcomes from the medicines they are prescribed and as a result of relevant public health initiatives.

e) Healthwatch Hillingdon

Healthwatch Hillingdon was established by the Health and Social Care Act 2012 and replaced Hillingdon Local Involvements Networks (LINk) on April 1st 2013. It is a part of the national network of 152 local Healthwatch organisations led and supported by Healthwatch England. Although it is commissioned by Hillingdon Council, Healthwatch Hillingdon is independent of the NHS and the local Council. As a health watchdog run by and for local people, it aims to help Hillingdon residents get the best out of the health and care services, and give them a voice for influencing and challenging health and care services provision throughout Hillingdon. Healthwatch Hillingdon is a volunteer led organisation with 40 volunteers who contribute as Board members, administrators and as workers who signpost, provide information, engage with residents and speak to commissioners and providers of services about quality improvement based on patient experience. They can also support residents to resolve complaints about NHS treatment or Social Care.

Healthwatch Hillingdon is a statutory member of Hillingdon Health and Wellbeing Board, and a member of HCCG's Governing Body. It is a valued ally of The Hillingdon Hospitals NHS Foundation Trust and other local providers. Healthwatch Hillingdon has built important relationships with the Care Quality Commission, Healthwatch England, VoiceAbility and NHS England. One of the prime examples of their work is being involved with Individual Funding Requests (IFR) and Planned Procedures with a Threshold (PPwT).

11. Outcomes frameworks for public health, NHS and social care

The Department of Health (DH) has produced three outcome frameworks for the NHS, Social Care and for Public Health. The Public Health Outcomes Framework (PHOF) for England 2013-2016 sets the overall vision for health improvement at population level, to improve and protect the nation's health and wellbeing, and improve the health of the poorest fastest.

This vision is underpinned by two outcome measures:

- Outcome 1: Increased healthy life expectancy
- Outcome 2: Reduced differences in life expectancy and healthy life expectancy between communities through greater improvements in more disadvantaged communities.

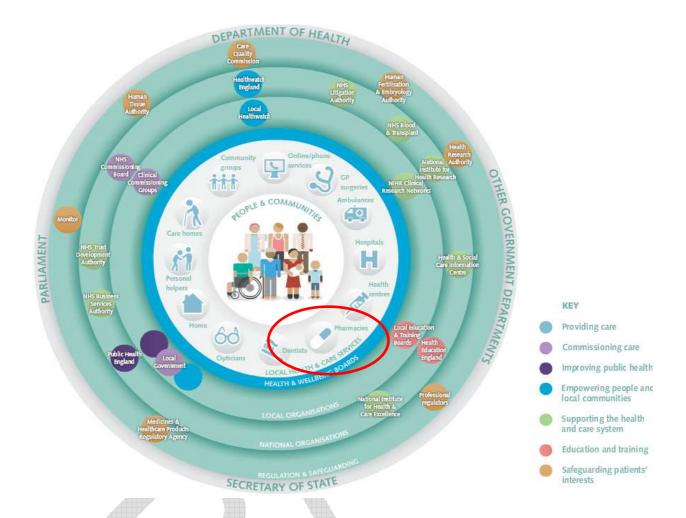
These two measures would work as a package covering both morbidity and mortality, addressing within-area differences and between area differences.

A set of supporting public health indicators that help focus our understanding of how well we are doing year by year nationally and locally on those things that matter most to public health, which we know will help improve the outcomes stated above. These indicators are grouped into four domains:

- improving the wider determinants of health
- health improvement
- health protection
- healthcare public health and preventing premature mortality.

Surveillance of public health data and quarterly monitoring of public health indicators is undertaken by the public health team supported by the performance & intelligence team.

12. Pharmaceutical services within the national and local context



The picture above shows the role community pharmacy has in relation to the other stakeholders such as:

- Residents (the innermost white circle)
- Other local health and care services communities (in the grey ring alongside pharmacies)
- Health and Wellbeing Board (bright blue circle)
- The other local and national organisations in the outer rings.

Over the last two years, the health system has undergone a radical restructuring. NHS allocations for 2013/14 show that local CCGs received £65.6 billion for commissioning hospital care, drugs and treatment for patients, and £1.8 billion was allocated for NHS England's public health responsibilities on behalf of Public Health England, for mainly immunisation, screening and health visiting (which will be transferring to local authorities in 2015).

The responsibility and funding for public health transferred from NHS to local authorities, which means that local authorities commission public health services such as smoking cessation as part of their duty to improve public health. Local authorities received over £2.5 billion from the DH in ring fenced funds in 2013/14, and will receive a similar amount in 2015/16. HWBs have the responsibility for

encouraging integrated working between commissioners of services across health, social care, public health and children's services. This provides an opportunity for HWBs to work closely with health and care providers and local residents to tackle challenges such as smoking, obesity, alcohol and drug misuse and teenage conceptions. Healthwatch Hillingdon also has a role to become an effective voice of the public, to influence commissioning intentions and to hold services to account.

13. Hillingdon Pharmaceutical Needs Assessment 2011

Prior to starting work on this PNA, the previous PNA for Hillingdon (produced by Hillingdon PCT in 2011) was reviewed alongside feedback received from NHS England Area Office for London.

Hillingdon Primary Care Trust (NHS Hillingdon) produced a Pharmaceutical Needs Assessment in 2011, which concluded:

- The distribution and access to essential pharmaceutical services met the needs of the residents
- Advanced services could be further expanded to include directed Medicines
 Use Reviews (MURs) in line with NHS Hillingdon's health priorities, e.g.
 diabetes, dementia and chronic obstructive pulmonary disease (COPD). For
 specific communities, community pharmacists' language skills while
 conducting MURs could improve patients understanding of their medicine use
- A variety of enhanced services at pharmacies across Hillingdon localities were highlighted, with commitment to improve access, equity and quality of the available services alongside any proposed expansion
- The intention to integrate community pharmacies into provider networks to improve services for patients suffering from long term conditions was outlined, specifically information sharing on discharge medication between hospital and community pharmacists
- Recommendations on basic service requirements for any new pharmacy applications, especially in relation to fully functional IT interface, broadband facilities, enhanced services and opening hours
- Commitment to planned transition for pharmaceutical services for any future demands arisen due to regeneration and new developments.

The 2014 PNA has been further developed since the 2011 PNA and is compliant with the requirements of the NHS (Pharmaceutical and Local Pharmaceutical Services regulations) 2013.

14. Process for developing the PNA

An internal working group was set up by the Interim Director of Public Health to start the process for developing the Hillingdon PNA in April 2014. This group devised methodology based on the new legislation and the information pack, and a timeline (Appendix 6) was agreed. A briefing was prepared for HWB to seek approval for the process at its meeting on 22 July 2014. Key steps included:

- a) Agree the dataset required for reviewing epidemiological and demographic need at borough level, and review of the JSNA and JHWS
- b) Agree localities, and having assessed information about population characteristics and health status, assess the needs for pharmaceutical services at locality level, considering ward and super output area level local intelligence where available
- c) Consider the different needs of different localities in Hillingdon, based on population age, disability, gender, pregnancy and maternity rates, race and ethnicity, deprivation, distribution of illness and underlying factors e.g. lifestyle and living conditions (wider determinants), and provision of health services (e.g. hospitals, primary care) and other services
- d) Review and revisit maps for community pharmacies in Hillingdon and in neighbouring areas. Conduct a survey of community pharmacy within Hillingdon and neighbouring areas
- e) Consultation with stakeholders throughout the process, and a statutory 60 day consultation.

15. Stakeholder involvement in the PNA

In order to ensure full involvement of the local stakeholders, the following committees and organisations were invited to comment on the analysis and emerging recommendations:

- Local Pharmaceutical Committee (LPC)
- Local Medical Committee (LMC)
- Representatives from the local Pharmacists (LPS)
- Hillingdon Clinical Commissioning Group (HCCG)
- Healthwatch Hillingdon
- Hillingdon Hospitals Trust
- Other hospital trusts used by Hillingdon residents e.g. Ealing, and North West London Hospitals Trust
- Neighbouring HWBs
- Local Patient, Consumer, and Community Groups
- NHS England Area Office
- Local Voluntary Sector partners

How stakeholders were involved

Hillingdon HWB established a steering group early in the process to establish methodology, structure and design of PNA. The LPC, Hillingdon CCG, Hillingdon LMC and Healthwatch Hillingdon are members of the steering group.

A survey was sent out to all of the 66 community pharmacies in Hillingdon, and to a further 55 community pharmacies identified in the neighbouring boroughs which are within 1km of the Hillingdon boundary on the London side and within 2km of the Hillingdon boundary on the Home Counties sides. Hillingdon Council with the help of the Local Pharmaceutical Committee maintained regular contact with community pharmacists in Hillingdon to achieve a 100% response rate.

The statutory consultation was undertaken from late September to end November 2014 to seek the views of wider stakeholders and members of the public, on whether they agreed with the analysis in this PNA and whether it addressed issues that they considered relevant to the provision of pharmaceutical services.

Should further information (including survey responses from out of Borough pharmacies) become available during the period of consultation then this may be included if helpful.

Response to 60 Day Statutory Consultation

The Consultation was open from 24th September to 23rd November inclusive. Comments from the Consultation have been reviewed and included in the PNA where relevant and appropriate. The full PNA consultation document was placed on the Council website from 24 September for 60 days. The stakeholders were contacted by e-mail which contained the web-link directing them to the consultation document. A reminder of the 60 day consultation was sent out to all stakeholders.

Six pharmacies responded to the Consultation. The main theme of these responses was in connection with the promotion of pharmacy services and their willingness to be commissioned to provide further services. These comments have been addressed in the following recommendations:

- PNA Recommendation 2 Pharmacy services should be promoted to the local population.
- PNA Recommendation 3 Pharmacies should continue to have an effective health promotion role, targeted to improve the health and wellbeing of Hillingdon residents where needed.

Comments from other stakeholders, NHS, LPC and LMC, were received and, as a result the following amendments were made:

- Essential Small Pharmacies are now indicated on the pharmaceutical services map.
- Detailed listing of necessary and relevant services can be found in Appendix 3.

Two members of the public responded to the Consultation. The theme from both of these respondents was regarding the pharmacy provision in Heathrow Villages. The residents voiced concerns regarding the need for more local provision, raising awareness of pharmacies and increasing the services provided by the pharmacy.

The PNA acknowledges in the main report, page 9, that the provision in the Hayes and Harlington locality which includes Heathrow Villages is slightly lower than in the other two localities. The following statement is made:

'In Hayes & Harlington provision is just below the England average rate per head of population, however, there are an additional 20 or so pharmacies within 1 km, but sited in neighbouring boroughs.'

The Chief Executive Officer of Healthwatch Hillingdon attended the Councillor's monthly meeting, on the 15th November, with residents of Harmondsworth, Sipson and Longford. The draft PNA was discussed at this meeting and the following comments have been sent to the Interim Director of Public Health:

- A number of different pharmacies are being accessed by residents both within Hillingdon and in neighbouring boroughs mainly for the use of prescription services.
- Most residents are happy with their current services.
- The majority of residents stated that it would be convenient to have a pharmacy within the villages but many advised they would not change from their current pharmacy.
- Since the pharmacy had closed in the villages, residents have had to make other arrangements for their pharmacy services and have become accustomed to these new arrangements.

The comments raised about the provision of pharmacy services in the Heathrow Villages are therefore satisfactorily addressed by the following recommendations in the PNA:

- PNA Recommendation 1 To recognise that Pharmaceutical services in Hillingdon are well resourced. This suggests the number of pharmacies is sufficient to manage the need of the population over the next 3-5 years.
- PNA Recommendation 2 Pharmacy services should be promoted to the local population.
- **PNA Recommendation 3** Pharmacies should continue to have an effective health promotion role, targeted to improve the health and wellbeing of Hillingdon residents where needed.

PNA Recommendations - Following careful consideration of the consultation findings there is not a need to amend the draft recommendations of the PNA.

Acknowledgements

This Pharmaceutical Needs Assessment has been compiled by the London Borough of Hillingdon (Public Health, Policy and Partnerships, Performance and Intelligence). Hillingdon Council is grateful to the PNA Steering Group and to the Local Pharmaceutical Committee Chairman for their time and expertise in developing this document.

Glossary

AUR - Appliance Use Review

BAME – Black and Minority Ethnic

BNF – British National Formulary

CCG - Clinical Commissioning Group

CMO - Chief Medical Officer

CNWL - Central & North West London

COPD – Chronic Obstructive Pulmonary

Disease

CVD - Cardiovascular Disease

DH – Department of Health

EHC - Emergency Hormonal

Contraception

ESA - Employment Support Allowance

ESP - Essential Small Pharmacy

GLA - Greater London Authority

GIS – Geographical Information System

GP - General Practitioner

H&H - Hayes and Harlington Locality

HCCG - Hillingdon Clinical

Commissioning Group

HSCIC - Health & Social Care

Information Centre

HSSS - Hillingdon Stop Smoking Service

HWB - Health and Wellbeing Board

IFR – Individual Funding Requests

JHWS – Joint Health and Wellbeing

Strategy

JSNA - Joint Strategic Needs

Assessment

LA - Local Authority

LINk - Local Involvement NetworK

LMC - Local Medical Committee

LPC - Local Pharmaceutical Committee

LPS – Local Pharmaceutical Service

LSOA - Lower Super Output Area

MECC - Making Every Contact Count

MUR - Medicines Use Review

NHS - National Health Service

NHSE – National Health Service (NHS)

England

NIC - Net Ingredient Cost

NMS - New Medicines Services

NOMIS - Official Labour Market

Statistics from the ONS

ONS – Office for National Statistics

PCT - Primary Care Trust

PDU - Problematic Drug Users

PGD - Patient Group Direction

PHE - Public Health England

PHOF - Public Health Outcomes

Framework

PNA – Pharmaceutical Needs

Assessment

QOF - Quality Outcomes Framework

PPwT - Planned Procedures with a

Threshold

R&N – Ruislip and Northwood Locality

SACS – Stoma Appliance Customisation

Services

SMR – Standardised Mortality Ratio

STI – Sexually Transmitted Infection

TB - Tuberculosis

U&WD – Uxbridge and West Drayton

Locality