

Informative Material

Producing a vision for the future of community pharmacy in England— Study 3

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Community pharmacies (chemists' shops) are situated in high street locations, in neighbourhood centres and in supermarkets. There are several different types and sizes of community pharmacies, ranging from the large chains with shops on every High Street or in edge of town supermarkets, to smaller individually owned pharmacies in communities, in the suburbs and often in deprived areas or rural settings.



Information about community pharmacy in England

- The number of community pharmacies is above 11,600.
- About 1.6 million people visit a community pharmacy daily.
- About 89% of people can access a community pharmacy within a 20 minute walk.
- Over 90% of pharmacies have a private consultation room.
- Pharmacy is the 3rd largest health profession.



In addition to their traditional dispensing role, community pharmacists have been delivering clinical services to allow better team working with the rest of the NHS.

The NHS Community Pharmacy contract for England and Wales was introduced in 2005 and includes 3 levels of services. Examples can be found under Table 1. Pharmacists must provide Essential services, but they can choose whether they wish to provide Advanced and Enhanced services.

Table 1: Examples of current services provided by community pharmacies

Essential	Advanced	Enhanced
Dispensing	Medicines Use Reviews (MURs)	Stop smoking services
Repeat dispensing	New Medicines Service (NMS)	Sexual health services
Unwanted medicines disposal	Appliance Use Reviews (AURs)	Weight management services
Healthy lifestyle promotion	Stoma Appliance Customisation (SAC)	Minor ailments management
Signposting and self care support	Flu vaccination	NHS Health Checks (aged 40-74 years)
Clinical Governance		Alcohol misuse services



Information about community pharmacy services in England (2017-2018)

- Approximately 90,000 prescription items were dispensed per community pharmacy.
- 3.4 million Medicines Use Reviews were provided by community pharmacies.
- 927,318 New Medicines Services were provided by community pharmacies.
- 1.3 million flu vaccinations were provided by community pharmacies.

Information about current context for community pharmacy services



- **Funding cuts:** The Government announced that it would reduce the total funding for the community pharmacy sector in England by 6% in 2015. Funding levels maintained for 2018/2019 without further reductions.



- **Ageing population:** around 18.2% of the UK population were aged 65 years or over at mid-2017. The percentage is projected to grow to 20.7% by 2027.



- **GP crisis:** Data show that the UK is facing a sustained fall in the number of GPs for the first time since the 1960s.



- **Multiple medications:** Around 24% of adult population report taking 3 or more prescribed medicines.



- **Primary Care Networks:** These are groups of GP practices working with each other and with community, mental health, social care, pharmacy, hospital and voluntary services in local areas covering up to 50,000 patients.



There are many **organisations** that represent community pharmacy. Some of them are:

- Royal Pharmaceutical Society (RPS)
- Pharmaceutical Services Negotiating Committee (PSNC)
- Company Chemists' Association (CCA)
- Association of Independent Multiple Pharmacies (AIMp)
- Pharmacists' Defence Association (PDA)
- National Pharmacy Association (NPA)



For my PhD project I also worked with **health policies**.

Overall, a health policy is a document that helps with making decisions about the future. It explains a plan that will help achieve its goal.

For my research I examined 25 policies from the state (eg. Department of Health and Social Care and NHS England) and from some organisations that represent community pharmacy.



Policy findings include:

- State and pharmacy policies agree on many topics but mostly for the pharmacists' role in providing services for managing long-term conditions such as diabetes.
- Both state and community pharmacy policies agreed that community pharmacists had not been used to the fullest extent.
- Both state and community pharmacy policies recognised the need to use technology more effectively.



For my PhD project I also did some **interviews** and asked for the views of people involved with community pharmacy.

Overall, I discussed with 25 people from NHS England, community pharmacy organisations, other healthcare professionals and community pharmacists working in different regions of England.



Interview findings include:

- The need for better reimbursement of community pharmacists.
- The necessity of healthcare professionals working together in teams.
- The vision of community pharmacy as a high street health hub.
- The need for better communication between community pharmacists and other health care professionals.

Thank you for the time you spent reading the information.

Looking forward to our next group discussion.

References

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