

Gateshead Pharmaceutical Needs Assessment 2025

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Executive Summary

The purpose of this document is twofold:

- To determine if there are sufficient community pharmacies to meet the needs of the population of Gateshead; and
- To determine other services which could be delivered by community pharmacies to meet the identified health needs of the population.

The Health and Social Care Act 2012⁽¹⁾ transferred the responsibility for developing and updating Pharmacy Needs Assessments (PNA) to Health and Wellbeing Boards (HWB). A PNA describes the population's health needs and the pharmaceutical services which exist or could be commissioned to address these. It is also used to identify any gaps in pharmaceutical services which could be filled by new pharmacies. The initial PNA was produced and implemented on 1 April 2015 with the requirement that each HWB must publish a statement of its revised assessment within 3 years of publication.

In Oct 2022, the previous PNA was published, and subsequently in April 2023 and September 2023 supplementary statements were issued by the HWBB in response to changes within the community pharmacy provision across Gateshead.

Pharmaceutical Needs Assessment process

Population health needs across Gateshead were identified in the JSNA; health needs in Gateshead which can be addressed by pharmacies were considered in more detail. This included those needs that can be met through the core pharmacy contract with NHS England for services such as dispensing prescriptions, treatment of minor ailments and medicines advice. Other health needs that can be met through commissioned services, where community pharmacies might be one of a range of providers, were also considered.

The formal consultation on the draft PNA ran from [DATE TBC] for 2025 in line with the guidance on developing PNAs and section 242 of the NHS Act 2006. A summary of the comments received during the consultation, and the Council's response, has been included at Appendix 2 in this final PNA document.

Identified health needs

Gateshead is estimated to have had a population of around 197,700 according to the ONS Mid-Year Population Estimates 2022. The population is forecast to increase by around 10% to 2043. The Gateshead population has a higher proportion of older people in comparison with England as a whole, and it is predicted that the number of people aged 85 years and over will increase by 82% over the next 20 years. In terms of overall deprivation, Gateshead is ranked 47th out of 317 local authorities (where 1 is most deprived). It is particularly disadvantaged in relation to employment and also disadvantaged in relation to income, education, skills and training. Higher than average proportions of children live in poverty.

Across a range of diseases and conditions – chronic obstructive airways disease (COPD), coronary heart disease (CHD), hypertension, diabetes, cancer – Gateshead has above average levels of need, particularly in its most deprived communities.

Current provision

There are 42 pharmacies in Gateshead, located primarily in areas of higher population density with 98% of the population being within 1 mile walking distance of a community pharmacy. Gateshead is well provided for Monday to Friday, 9am to 5pm with more than one pharmacy in most villages and urban areas within

Gateshead, allowing patient choice and capacity to provide enhanced services. There is one former 100-hour pharmacy and three distant selling pharmacies, and one rural general practice provides dispensing services to some of their patients. However, there continues to be varied access to pharmacy services in the evenings and at weekends across the localities. Services currently commissioned from pharmacies in Gateshead include emergency contraception, smoking cessation, needle exchange, supervised consumption of methadone, minor ailments, and specialist palliative care drugs. There is adequate provision of all of these services across Gateshead.

The Health and Wellbeing Board considers that in general the current number of pharmacies and overall number of hours is adequate to meet the needs of people accessing pharmacy services. However, the Health and Wellbeing Board also recognises that the East and West of Gateshead, to be of concern regards provision and accessibility, and therefore will consider the impact of any further changes to pharmaceutical services in this area. There is though, a requirement to review the timings of this provision to ensure that residents and patients can access support when required, especially during the out of hours periods.

Future provision

Gateshead HWB values the contribution that community pharmacy makes to the local health economy through their essential services, advanced services, and locally commissioned services. They are an important part of the medicines optimisation approach that helps patients to improve their outcomes, take their medicines correctly, avoid taking unnecessary medicines, reduce wastage, and improve medicines safety.

The addition of the discharge medicine service to the essential services provided by community pharmacy and the advance services such as the Community Pharmacy Consultation Service, Pharmacy First, New Medicine Service and the Hypertension Case Finding service further enhance the role of community pharmacy as being integral to the support of good medicine practice in the community.

Community Pharmacy services in Gateshead currently provide a wide range of commissioned services and have indicated a continued appetite for further development. Community pharmacies are required to provide support to the public health agenda as part of the essential service provision which will ensure a clear role to continue to support the public health needs and lifestyle challenges for the people of Gateshead.

Gateshead Council's public health team strongly supports the role that community pharmacy plays in promoting health and healthy lifestyle and in delivering evidence-based interventions for stop smoking, sexual health, and drug misuse.

The national vision for community pharmacy is in line with the local strategy and aspirations that community pharmacy has a critical role to play in the Gateshead health system. It is essential that community pharmacy continues to be recognised and supported to support the health needs of the population of Gateshead and that the people of Gateshead are aware of and fully utilise the services available from their Community Pharmacy services.

1. Introduction

The White Paper: Pharmacy in England: Building on Strength ⁽⁶⁾ - Delivering the Future was published by the Department of Health in April 2008 and set out the vision for pharmaceutical services in the future. It identified practical, achievable ways in which pharmacists and their teams could contribute to improving patient care through delivering personalised pharmaceutical services in the future.

These personalised services would be in addition to the services associated with the dispensing and safe use of medicines and as such, need to be commissioned specifically to meet the health needs of the local population. These services cannot be commissioned in isolation and therefore form an integral part of the joint strategic needs assessment and the strategic commissioning plan, focusing on local priorities.

The Health Act 2009⁽⁷⁾ introduced a legal requirement for all primary care organisations (PCOs) to publish an updated pharmaceutical needs assessment (PNA) by 1 February 2011. The Health and Social Care Act 2012 transferred the responsibility for developing and updating PNAs to Health and Wellbeing Boards (HWBs). All HWBs were required to produce a PNA by 1 April 2015 and every subsequent 3 years.

The PNA is a strategic commissioning document and will also be used to identify where there are gaps in pharmaceutical services which could be filled by market entry.

To achieve this dual purpose the HWB needs to know what services are currently provided by pharmacies and whether there is sufficient geographical spread to meet identified health need. Mapping these pharmacy providers with the health needs of the population will identify any gaps in current service provision and define areas where a pharmacy service could be commissioned to meet that need.

From 1 July 2022 all Integrated Care Boards (ICBs) assumed delegated responsibility for primary medical services and some ICBs took on delegated responsibility for one or more pharmaceutical, ophthalmic, and dental functions. However, NHS England still retained overall accountability for the discharge of these delegated functions, under the Health and Care Act 2022. Recent announcements indicate that the architecture of the NHS is likely to undergo significant changes during the lifespan of this Pharmaceutical Needs Assessment (2025-2028) ⁽³⁸⁾. These potential changes include shifts in service delivery models and integration with local healthcare systems. As these developments are subject to ongoing policy discussions and government reviews, the information provided in this document reflects the current position as of the date of publication.

This delegated authority for pharmaceutical services was transferred to North East and North Cumbria (NENC) ICB and reference to the commissioner of the community pharmacy services will be NENC ICB throughout this PNA.

1.1. What is the Pharmaceutical Needs Assessment (PNA)?

A PNA describes the health needs of the population, current pharmaceutical services provision, and any gaps in that provision. It also identifies potential new services to meet health needs and help achieve the objectives of the strategic plan, while taking account of financial constraints.

The PNA will be used to:

- Inform commissioning plans about pharmaceutical services that could be provided by community pharmacists and other providers to meet local need;
- Support commissioning of high-quality pharmaceutical services;
- Ensure that pharmaceutical and medicines optimisation services are commissioned to reflect the health needs and ambitions outlined within the joint strategic needs assessment;

- Facilitate opportunity for pharmacists to make a significant contribution to the health of the population of Gateshead; and
- Ensure that decisions about applications for market entry for pharmaceutical services are based on robust and relevant information.

This is not a stand-alone document and is aligned with the Gateshead Joint Strategic Needs Assessment (JSNA)⁽³⁾. It will be used as a tool to inform future service developments aimed at meeting the objectives of the strategic plan e.g. delivering care in the most appropriate setting, reducing reliance on hospital care, supporting those with long term conditions, promoting wellbeing and preventing ill-health, and improving access to primary care.

1.2. Gateshead PNA 2022 recommendations

The 2022 PNA for Gateshead ⁽²⁾ identified that at the time, there was adequate provision of NHS pharmaceutical services across Gateshead with further recommendations as follows:

- There continues to be adequate provision of NHS pharmaceutical services across most of Gateshead.
- The Health and Wellbeing Board considers that the current number of pharmacies and overall number of hours is adequate to meet the needs of people accessing pharmacy services.
- There continues to be adequate access to community pharmacies during the weekdays and weekends, although this was more limited in the evenings and on Sundays.
- Access to pharmacy in respect of urgent care appears adequate but the HWB board recommended that discussions and review of the pharmacy services out of hours.
- There continued to be a good delivery of Advanced Services by pharmacies in Gateshead.
- There was adequate provision of locally commissioned services and the HWB recommended that there was a need to improve awareness by the NHS England & NHS Improvement (NHSE&I) and local commissioners to encourage engagement.

The Health and Wellbeing Board recognised the contribution that community pharmacy services have made to the Covid Pandemic response.

This report reflects on the progress made regarding the recommendations made in the 2022 PNA, summarised in section 10.

1.2.1 PNA 2022 Supplementary Statements

Two supplementary statements were published by Gateshead HWB following the publication of the PNA in October 2022, in response to significant changes in the community pharmacy provision.

May 2023: in response to the closure of that Lloyds Pharmacy Ltd trading as t/a Lloyds Pharmacy (FMG80) Inside Sainsburys, Eleventh Avenue, Team Valley Trading Estate, Gateshead.

"This change does not create a gap in essential community pharmacy services in the local area".

December 2023 in response to two further closures and removals from the pharmaceutical list for the area of Gateshead HWB board with the effect from the dates listed:

- Boots UK Limited, 479 Durham Road, Low Fell, Gateshead, NE9 5EX
- Boots UK Limited, Unit 4 Booth Street, Felling, Gateshead NE10 9BF.

Reflection on the resulting number of pharmacies per population figures for Gateshead shows that the impact of these recent changes results in further reduction of pharmacy provision and pressure on the system in the East locality of Gateshead that was already lower than other localities in the borough.

"It is therefore the opinion of Gateshead Health and Wellbeing Board that the impact of this collection of changes in the pharmacy provision in the East Locality of the borough creates a gap in pharmaceutical services provision that could be met by a routine application:

- to meet a current or future need for pharmaceutical services, or**
- to secure improvements, or better access, to pharmaceutical services".**

DRAFT

1.3. Market Entry

Community pharmacies and appliance contractors are responsible for dispensing medications, appliances, and medical devices to NHS patients. They are not a direct part of the NHS but provide essential services on behalf of the NHS to the general public.

If a person (a pharmacist, dispenser of appliances or in some areas a GP) wants to provide NHS pharmaceutical services they are required to apply to the NHS to be included on a pharmaceutical list. Pharmaceutical Lists are compiled and held by the ICBs. This is commonly known as the NHS “market entry” system.

Under the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013⁽⁹⁾ a person i.e., a pharmacist, a dispenser of appliances or, in some rural areas, a GP, who wishes to provide NHS pharmaceutical services must apply to the ICB to be included on the relevant pharmaceutical list by proving they are able to meet a pharmaceutical need as set out in the relevant PNA. There are exceptions to this such as applications to provide pharmaceutical services on a distance-selling (i.e., internet or mail order only) basis.

The regulations allow an automatic exemption to the regulatory test for distance selling/internet-based pharmacies provided that they provide:

- The uninterrupted provision of essential services, during the opening hours of the premises, to persons anywhere in England who request those services;
- The safe and effective provision of essential services without face-to-face contact between any person receiving the services, whether on their own or on someone else’s behalf, and the applicant or the applicant’s staff.

There are five types of market entry application that can be made to be included on the Pharmaceutical List. These are:

- To meet a current need identified in the PNA;
- To meet a future need identified in the PNA;
- To improve current access;
- To improve future access;
- To fulfil an unforeseen benefit, where the applicant provides evidence of a need that was not foreseen when the PNA was published.

The Health and Social Care Act 2012⁽¹⁾ transferred the responsibility for producing the PNA to Health and Well Being Boards. NENC ICB will use the PNA to determine applications to open new pharmacies in that local council area.

It is essential that HWBs are keenly aware of pharmacy services needed in the community, together with any gaps or opportunities in service provision so that these can be commissioned to support more effective patient care.

1.4. Pharmacy Services NHS Overview

At the time of writing, NHSBSA data (for 2023/24) suggest that there are 12,009 community pharmacies in England providing accessible healthcare alongside the dispensing of medicines. However, this may be inflated slightly due to technical reasons caused by a large number of ownership changes in recent months.

For a typical pharmacy, NHS income accounts for 85-95% of their total turnover.

Community pharmacies in England provide a range of services including:

- Dispensing and Repeat Dispensing;
- Support for self-care;
- Signposting patients to other healthcare professionals;
- Participation in set public health campaigns (to promote healthy lifestyles);
- Disposal of unwanted medicines.

Key findings of General Pharmaceutical Services in England 2015/16 - 2023/24 indicated that:

- The number of items dispensed by community pharmacies in England between 2022/23 and 2023/24 increased by 3.15% from 1.08 billion to 1.11 billion. Overall, the number of items dispensed is 11.8% higher than the 995 million items dispensed in 2015/16.
- 1.08 billion prescription items were dispensed via the Electronic Prescription Service (EPS) in 2023/24, 96% of all items dispensed in the year by community pharmacies and appliance contractors, a small percentage increase since 2022/23.
- The cost of drugs and appliances reimbursed to community pharmacies and appliance contractors totalled £10 billion in 2023/24, a 5% increase on 2022/23.
- The number of vaccines administered by pharmacies as part of the Flu Vaccination advanced service decreased in 2023/24 after increasing every year since the service began in 2015/16. In 2023/24 there were 3.77 million vaccines administered by 9,169 community pharmacies, at an average of 412 vaccines per pharmacy. This was a decrease of 24.7% on the 5.01 million vaccines administered in 2022/23.
- The New Medicines Service (NMS) has shown sizable increases in activity for the last three financial years. Thirteen additional conditions were added to the specification list in September 2021. The number of NMS claims in 2023/24 increased by 42% from 2022/23.
- Pharmacy First, which was introduced on 1st February 2024, continues to grow with over 750,000 interactions nationally in September 2024 compared with an average of 141,000 per month in the first 3 months.

Over 95% of community pharmacies now have a private consultation room from which they can offer advice to patients and a range of nationally commissioned services such as vaccine administrations and private, personal discussions regarding medicines. Many pharmacies are also commissioned to offer public health services by Local Authorities and the NHS.

Since the PNA 2022 publication, the expansion of advanced services to augment the core essential services provided by community pharmacy provide further opportunity for provision of services. In particular, the Pharmacy First, Hypertension Case Finding and Pharmacy Contraception services broaden the range of accessible services in addition to some of the more established advanced services such as the New Medicine Service and the Flu vaccination service. All of these continue to enhance the role of community pharmacy as being integral to the support of good medicine practice in the community.

1.4.1 Community Pharmacy Contractual Framework

The Department of Health and Social Care (DHSC), NHS England and NHS Improvement, and the Pharmaceutical Services Negotiating Committee (PSNC) have agreed a five-year plan, the Community Pharmacy Contractual Framework (CPCF) ⁽¹¹⁾ which describes a vision for how community pharmacy will support delivery of the NHS Long Term Plan ⁽¹⁶⁾.

In April 2025, an agreement was reached between the Department of Health and Social Care (DHSC), NHS England and Community Pharmacy England (CPE), on the funding arrangements for both the Community Pharmacy Contractual Framework (CPCF)⁽¹¹⁾ for 2024 to 2025 and 2025 to 2026, and Pharmacy First. These new arrangements aim to reflect joint ambition to focus on stabilising medicines supply and pharmacy funding for this core function. This funding also provides an uplift to key clinical service fees, while supporting Pharmacy First to continue to grow and embed at pace. Contractual arrangements post April 2026 have yet to be agreed.

The success of the Pharmacy Quality Scheme (PQS) across the CPCF in 2019-2024 was recognised within the review of the CPCF with a targeted PQS being reinstated from 1st April 2025.

The criterial focus included:

- Being signed up to deliver Pharmacy First pathway and the pharmacy contraception service
- Develop or update a palliative and end of life care action plan
- Referral of patients aged 5 to 15 years who do not have a spacer and all patients using 3 or more short-acting bronchodilators without any corticosteroid inhaler in 6 months
- Pharmacy First – completion of clinical audit and ensure all registered professionals have completed appropriate training.
- Emergency contraception: ensure relevant staff have completed appropriate training
- New medicine service: ensure relevant staff have completed relevant depression training
- Enhanced Disclosure and Barring Service (DBS) checks undertaken for all registered pharmacy professionals within the last 3 years

Section 7 within this PNA describes these clinical services in more detail.

1.4.4. Developments in Community Pharmacy

1.4.4.1. Pharmacy Supervision

The Government has recently undertaken a consultation exercise to gather views on a proposed change to the regulations on pharmacy supervision. The changes, if enacted, would allow greater delegation of tasks in a community pharmacy, allowing the pharmacist to focus more on clinical services and other patient facing activity. This could free up capacity and enable community pharmacists to deliver a wider range of NHS services.

The results of the consultation have not been shared at the time of writing.

1.4.4.2. Hub and Spoke Dispensing

Hub and spoke dispensing occur when a community pharmacy 'spoke' sends prescriptions to another pharmacy 'hub' to be dispensed and is used currently by pharmacy multiples to free up pharmacist time at the spoke and achieve economies of scale at the hub. Legislation permits this provided certain conditions are met, but both parties must be part of the same legal entity.

Following a government consultation in 2022⁽¹²⁾, the government has committed to a change in legislation from the 1st of January 2025. The change allows hub and spoke dispensing across different legal entities. This will allow independent pharmacies to develop similar models, which levels the playing field across the sector.

This change should create and/or preserve capacity for pharmacists to deliver patient facing services.

1.4.4.3. Future of Pharmacy National Developments

Independent prescribing by pharmacists has been available since 2006^(13,14), and in recent years there has been a drive to upskill the current pharmacist workforce, enabling a large number of pharmacists to qualify as independent prescribers. Alongside this, newly registered pharmacists qualifying from 2026 will automatically become independent prescribers following changes made by schools of pharmacy to reflect this significant change to pharmacists' workload.

Despite there being a number of independent prescribing pharmacists working in community pharmacy in England, there are currently no clinical services commissioned nationally by NHS England that enable NHS prescriptions to be issued by independent prescribing pharmacists working in community pharmacy. In 2024, NHS England and ICBs have continued to develop the Community Pharmacy Independent Prescribing Pathfinder Programme, designed to establish a framework for the commissioning of community pharmacy services that incorporate independent prescribing.

Over the next few years, there could be a significant change to the delivery of community pharmacy services, as the skills and capabilities of community pharmacists are utilised to build on clinical services already commissioned as advanced pharmaceutical services, or to add into locally commissioned services.

Healthwatch Survey

Since the last PNA, Healthwatch has undertaken research regarding pharmacy services in England:

- In April 2024, the Healthwatch report "Pharmacy: what people want", explored the current state of pharmacy services and offers actions for healthcare leaders and the wider sector. In particular, the report explored people's experiences of and attitudes towards pharmacy services at the outset of the introduction of the Pharmacy First Advanced Service. Findings of the report included that people valued the accessibility of community pharmacies both in terms of the ease of getting to one and the speed of being seen once there and that people were broadly open to the idea of going to their pharmacy rather than their GP for the conditions defined within the Pharmacy First service. People expressed concerns regarding medicine shortages and the need for improved communication regarding pharmacies closures.
Long term, the report recommended further expansion of Pharmacy First services, with evidence that people would visit their pharmacy for vaccinations and dermatology services and also to further improve IT communication systems across general practice, pharmacies and the primary care system.
- In September 2024, Healthwatch produced a briefing report based on a freedom of information request to all ICBs in England regarding Pharmacy closures identifying that there was considerable variation across the country in the rate of closures. The main reason for temporary pharmacy closures across England is a lack of available staff. Recommendations were that there should be improved notification of pharmacy closures and that there should be national consideration regarding the issues facing pharmacy including workforce, funding, data, and estates.

The full reports are available at:

<https://www.healthwatch.co.uk/report/2024-04-30/pharmacy-what-people-want>

<https://www.healthwatch.co.uk/report/2024-09-26/pharmacy-closures-england>

1.4.5. Working across the North East and North Cumbria

Integrated care systems (ICSs) were set up in 2022 to facilitate joint working across local partners, such as the NHS, councils, voluntary sector organisations and others. Their aim is to improve health and care services

– with a focus on prevention, better outcomes and reducing health inequalities. They achieve this by creating services based on local need.

The 42 ICSs in England are local partnerships that bring health and care organisations together to develop shared plans and joined-up services. ICSs were legally established on 1 July 2022, covering all of England. These arrangements built on partnerships that were already in place across the country.

They aim 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.

Integrated care boards (ICBs) are NHS organisations responsible for planning health services for their local population. There is one ICB in each ICS area. They manage the NHS budget and work with local providers of NHS services, such as hospitals and GP practices, to agree a joint five-year plan which says how the NHS will contribute to the integrated care partnership's integrated care strategy.

The NHS organisations and upper-tier local authorities in each ICS run a joint committee called an integrated care partnership (ICP). This is a broad alliance of partners who all have a role in improving local health, care and wellbeing. They may also include social care providers, the voluntary, community and social enterprise sector and others with a role in improving health and wellbeing for local people such as education, housing, employment or police and fire services.

Each ICP must develop a long-term strategy to improve health and social care services and people's health and wellbeing in the area. They may also take on additional responsibilities, as agreed locally between the members.

The North East and North Cumbria Integrated Care System (NENC ICS) is a partnership of organisations including local councils, voluntary and community services that provide health and care across the region⁽¹⁵⁾. Led by the NHS Integrated Care Board (ICB), the aim is to work collectively, joining up resources and expertise to provide the best health and care for the local communities.

2. Gateshead Pharmaceutical Needs Assessment Process

Section 2 provides a brief overview of the methodology adopted in bringing together the information contained within the PNA.

2.1. PNA Development

As set out within section 1 of this PNA, the legislation that describes the duties of the Health and Wellbeing Board regarding PNAs is the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. As well as describing what each PNA was required to consider when they were first developed and published, these 2013 Regulations also describe how each local PNA must be maintained by the HWB during its life.

The public health team within Gateshead Council oversaw the development of this PNA on behalf of the Gateshead Council Health and Wellbeing Board. In the process of undertaking the PNA, a steering group was established in October 2024. The core membership of the group included representatives from the Gateshead Council public health team and planning policy team, North-East and North Cumbria (NENC) ICB, Gateshead and South Tyneside Local Pharmaceutical Committee, Gateshead Healthwatch. Full membership is set out in Appendix 12.

The steering group agreed the following:

- Terms of reference of the steering group, including the frequency of meetings
- Content of a PNA questionnaire to pharmacists in name of council
- Timeline of the PNA process
- Structure of the PNA document
- Process and questionnaires for engagement and consultation
- Appropriate governance, including declaration of interests, and reporting arrangements

The group was responsible for overseeing the completion of the PNA and ensuring it meets the minimum requirements set out in the regulations.

2.2. Determination of localities

Throughout the PNA reference is made to five localities which are built from ward boundaries. This approach is in line with the data available within the JSNA, although the Health and Wellbeing Board is also mindful that needs can vary between the wards in each locality and at sub-ward level). The five localities are shown in the map below and duplicated in the enlarged map in Appendix 5.

Gateshead Localities

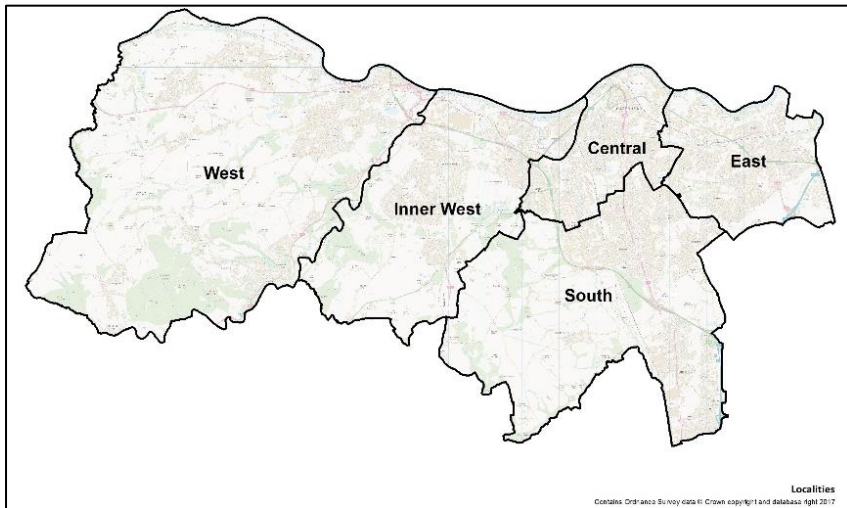


Figure 1: Map illustrating Gateshead's localities.

2.3. Identification of health need

The JSNA³ which incorporates key strategies such as the Health and Wellbeing Strategy as well as thematic specific needs assessments has been reviewed, along with feedback from the public and local professionals, to summarise local health needs relevant to pharmacy services in Gateshead. This summary is set out at Section 3.

2.4. Necessary Pharmacy Services

The 2013 regulations require the health and wellbeing board to include a statement of necessary pharmaceutical services⁽⁴⁾. Necessary services are those pharmaceutical services that are considered key to meet the pharmaceutical needs of the population. They form the baseline level of services that must be provided to ensure adequate access to medicines and related healthcare. The classification helps in decision-making about pharmacy applications, service commissioning, and resource allocation.

For the purpose of this PNA, Gateshead Health and Wellbeing Board has agreed that necessary services are defined as the essential services in the NHS Community Pharmacy Contractual Framework. Essential services are mandatory for community pharmacies and are described in more detail in section 6.

The statement of pharmaceutical needs in section 12.1. is based on this definition of necessary pharmaceutical services.

2.5. Other relevant services

Pharmaceutical services not included as necessary services have been deemed by the HWB as other relevant services. These are pharmaceutical services that the HWB is satisfied are not necessary to meet the need for pharmaceutical services, but their provision contribute to meeting the health and wellbeing needs of the population. The provision of these has secured improvements, or better access, to pharmaceutical services for the population of Gateshead as described in section 7.

The Health and Wellbeing Board has determined that relevant services for the purposes to this PNA are advanced services and enhanced services within the NHS Community Pharmacy Contractual Framework.

The statement of pharmaceutical services in section 12 is based on this definition of other relevant services.

2.6. Other NHS services

The 2013 Regulations then require the PNA to include a statement of the other NHS services that the HWB considers affect the need for pharmaceutical services. Locally commissioned services (either by ICBs or the local authority) are deemed as 'other NHS services' in the PNA (section 8).

Those NHS services that reduce the need for pharmaceutical services, particularly the dispensing service, include:

- hospital pharmacies
- personal administration of items by GP practices
- public health services commissioned by the local authority
- ICB-commissioned pharmacy services (as this reduces the need for such services to be commissioned as national enhanced services)
- flu and Covid-19 vaccination by GP practices.

NHS services that increase the demand for pharmaceutical services include:

- GP out of hours services (where a prescription is issued)
- walk-in centres and minor injury units (where a prescription is issued)
- community nursing prescribing
- dental services.

2.7. Assessment of current pharmaceutical provision

A PNA steering group consisting of Gateshead Council's public health team, Integrated Care Board (ICB) [Newcastle Gateshead representative], Healthwatch and the Local Pharmaceutical Committee was established to oversee the process. For full membership of the group see Appendix 12.

In order to assess the adequacy of provision of pharmaceutical services and other services provided by community pharmacies, the current provision of such services was identified and mapped using the previous PNA as a baseline. This was based on information provided by NENC ICB (previous NHS England and NHS Improvement), and Gateshead Council's public health team and the Local Pharmaceutical Committee.

2.8. Future Provision

This PNA seeks to assess the current and future needs of the area, identifying any gaps in pharmaceutical services. Any such gaps may highlight the need for necessary provision or may require provision in specified future circumstances. In considering the future needs of the area and identifying any gaps in service the PNA has, in accordance with Regulation 9 (1) and (2), had regard to:

- The demography of Gateshead
- Whether there is sufficient choice with regard to obtaining pharmaceutical services within Gateshead
- The different needs of the localities within Gateshead
- The pharmaceutical services provided in the area of any neighbouring Health and Wellbeing Boards
- Any other NHS services provided in or outside of Gateshead
- Likely changes to the demography of Gateshead and/or the risks to the health or well-being of people of Gateshead and/or the number of people in the area who require pharmaceutical services.

The Equality Act 2010 requires that in making this assessment, the needs of different population groups have been considered. This final PNA is in keeping with the Council's Equality Diversity and Inclusion (EDI) Network ⁽³³⁾.

2.9. Stakeholder engagement

The views of the public and community pharmacy providers were gathered in the form of surveys developed by the PNA Steering group regarding community pharmacy services and used to inform the PNA report.

Public Survey regarding local pharmacy services

The views of the public and a range of agencies and groups were gathered in the form of a survey on Pharmacy Services. This was made available between 9th December 2024 and 19th January 2025 through Gateshead City Council's consultation portal with the survey title "How do you use your local pharmacy?". The survey was also made available online through the Council's online consultation portal.

In total, 352 survey responses were received. These have been considered as part of this PNA. Section 11 and Appendix 3 of this document provides a summary of the analysis and outcomes of the public engagement.

Provider engagement

In order to assess the adequacy of provision of pharmaceutical services and other services provided by community pharmacies, the current provision of such services was identified and mapped using the previous PNA as a baseline. Initially this was based on information provided by NENC ICB, Gateshead Council's public health team and Gateshead and South Tyneside LPC.

Further information was then collected using a questionnaire made available to all community pharmacies including distance selling pharmacies. The questionnaire was not sent to appliance contractors. The survey was undertaken between 9th December 2024 and 31st January 2025. All community pharmacy contractors responded in Gateshead, giving a response rate of 100%. A summary of the findings of the survey are described in section 11 with detail within Appendix 4.

2.10. Statutory Consultation

The formal consultation on the draft PNA for Gateshead ran from (DATE TBC) 2025 in line with the guidance on developing PNAs and section 242 of the Health Service Act 2012⁽⁵⁾, which stipulates the need to involve Health and Wellbeing Boards in scrutinising Health Services.

In keeping with the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations (2013)⁽⁹⁾, in addition to the Health and Wellbeing Board members, the following stakeholders were consulted during this time:

- Gateshead and South Tyneside Local Pharmaceutical Committee
- Gateshead Local Medical Committee
- All persons on the pharmaceutical lists and all dispensing doctors list in Gateshead
- NENC ICB (Newcastle- Gateshead)
- Gateshead Healthwatch
- Queen Elizabeth NHS Foundation Trust, and NTW Mental Health NHS Foundation Trust
- Neighbouring HWBs in Newcastle, Durham, Northumberland, South Tyneside, and Sunderland.
- General Practitioners
- General public via the council website and Healthwatch.

Letters were sent to all consultees informing them of the web site address (www.gateshead.gov.uk/consultation) which contained the draft PNA document. "A person is to be treated as served with a draft if that person is notified by the HWB of the address of a website on which the draft is

available and is to remain available (except due to accident or unforeseen circumstances) throughout the minimum 60-day period for making responses to the consultation”.

The consultation sets out to determine:

- Whether the PNA provides a good reflection of the current pharmacy provision in Gateshead
- Whether there are sufficient community pharmacies to meet the needs of the population
- Whether other services could be delivered by community pharmacies.

Section 10 and Appendix 2 summarises the findings of the formal consultation and responses made by the Health and Wellbeing board.

2.11. HWB Recommendations

The PNA 2025 will represent recommendations made by Gateshead HWB, based on the evidence presented within this document.

2.12. PNA Publication

Gateshead HWB will publish the PNA 2025 on 1st October 2025.

3. Identified Health Need

Unless otherwise stated, the information below is a snapshot (as of February 2025) taken from Gateshead's Joint Strategic Needs Assessment (www.gatesheadjsna.org.uk) which contains detailed references to the sources used.

3.1. Population Profile

- Gateshead's population is projected to increase to 216,717 in 2043.
- The population is ageing as seen in the population chart below (Figure 2). From the beginning of the projection period in 2018, it is projected that by 2043 there will be an additional 12,316 people aged 65 or older, an increase of 29%. There will also be a decrease in the number of children and young people aged 0-15 of around 3,529 or 10%. The working age population is now effectively 16-65 as state pension age for men and women is now set at age 66. The working age population is set to decrease by 3,962 or 3% by 2043
- Increased housing provision may bring increasing demand on pharmaceutical services in the future. Table 1 below shows planned future housing developments to 2032 and beyond.³¹

Gateshead Population (2018 vs. 2043)

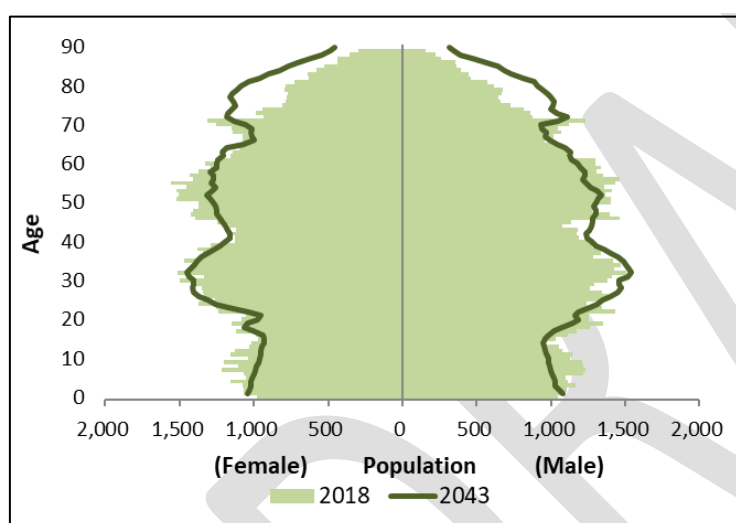


Figure 2: Chart illustrating the Gateshead population in 2018 vs. 2043.

Table 1: Future Housing Developments in Gateshead.

Area	No. of planned new homes (Approx.)
Birtley	12
Blaydon	387
Bridges	2,245
Chopwell and Rowlands Gill	568
Chowdene	22
Crawcrook and Greenside	44
Deckham	139
Dunston and Teams	1,606
Dunston Hill and Whickham East	679
Felling	280
High Fell	217
Lamesley	460
Lobley Hill and Bensham	315
Low Fell	41
Pelaw and Heworth	81
Ryton, Crookhill and Stella	525
Saltwell	84
Wardley and Leam Lane	152
Whickham North	270
Whickham South and Sunniside	64
Windy Nook and Whitehills	3
Winlaton and High Spen	236
Birtley/Lamesley	298
Dunston and Teams/Whickham North	289

3.2. Ethnicity

- It is estimated that around 6.5% (12,660) of the population are from an ethnic group other than White.[1] The non-White population has increased from around 1.6% in 2001, 3.7% in 2011 to 6.5% in 2021. This does not include Gateshead's orthodox Jewish community; around 2,900 people state that their religion is Jewish, although this also includes the non-orthodox Jewish population. The Jewish community themselves estimate their population size to be around 6,000, including a large number of students.

- Gateshead's increasing diversity may have implications in terms of support for different communities. For example, there have been significant increases in residents of African (+949), Arab (+637) and Other Asian (+520) origin, and 4% of the population do not consider English to be their main language.

3.3. Social and Economic Disadvantage

- The Index of Multiple Deprivation (IMD) ⁽²⁶⁾ measures multiple deprivation for each local authority area as a whole and also for smaller Lower Layer Super Output Areas (LSOA) within each local authority. The index is made up of one overall and seven themed Domains or groupings of deprivation indicators including income, employment, health and disability, education skills and training, barriers to housing and services, crime, and the living environment. The current index is IMD 2019.
- Overall, Gateshead is the 47th most deprived local authority in England, out of 317 local authorities. Around 32,700 (16%) people in Gateshead live in one of the 10% most deprived areas of England. Extending that range further, nearly 62,600 (31%) live in the 20% most deprived areas.
- It is also possible to estimate the population living in the different deprivation bands at ward level. There are ten wards containing areas within the 10% most deprived in England. At 82%, Felling ward is estimated to have the highest proportion of its population living in the 10% most deprived areas in England. This is followed by Deckham (60%) and High Fell (53%) wards. Low Fell ward is estimated to have the highest proportion of its population in the 50% least deprived areas in England. 86% of Low Fell's population lives in the 50% least deprived areas. This is followed by Crawcrook and Greenside (84%) and Whickham South and Sunnyside (83%).

Map 1: Index of Multiple Deprivation 2019

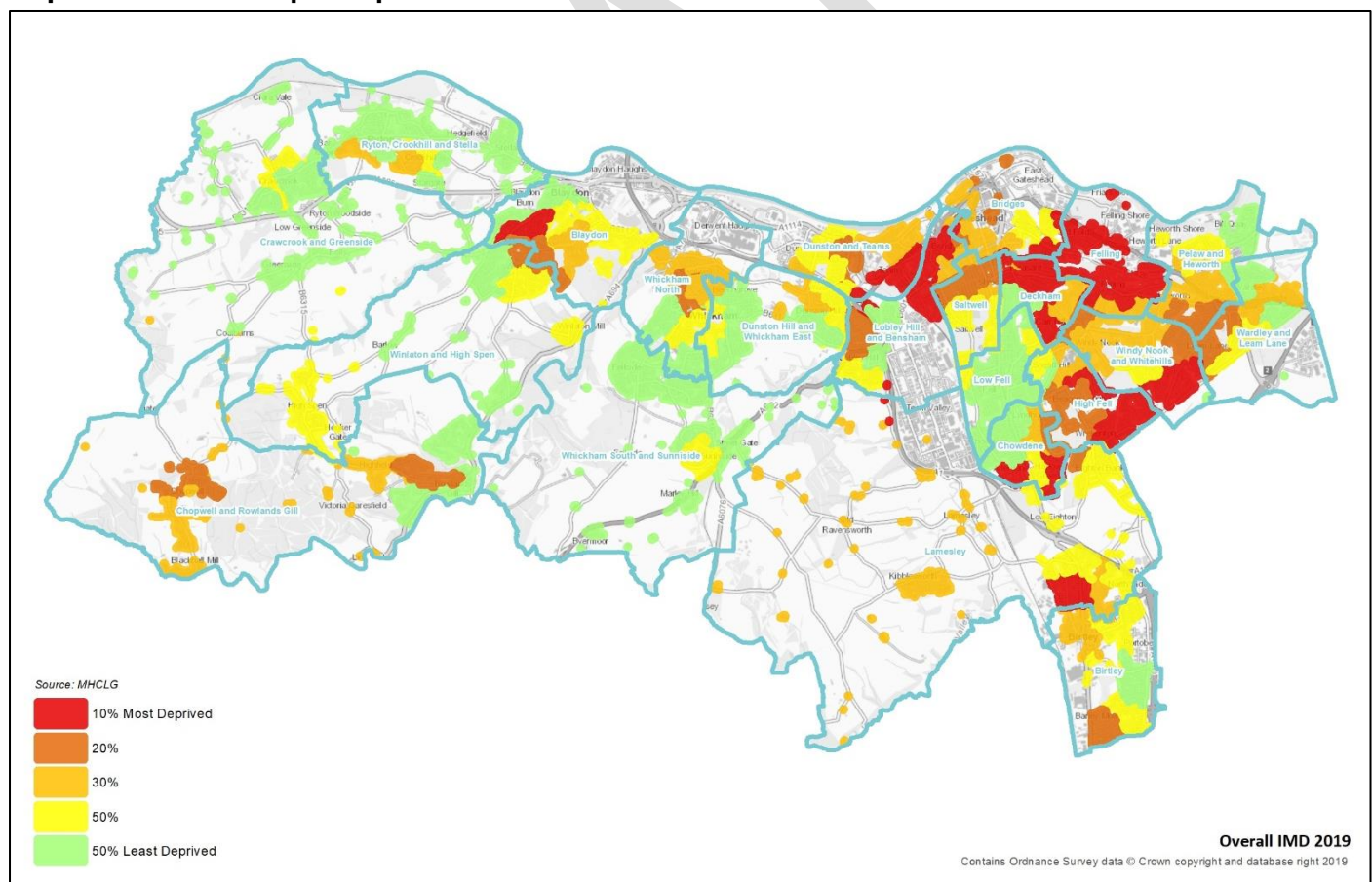


Figure 3: Map of Gateshead to reflect the Index of Multiple Deprivation (IMD 2019) Grading.

3.4. Life Expectancy and Mortality

- Life expectancy in Gateshead is currently 76.7 years for men and 81.4 years for women. This represents a decrease of half a year for men and no change for women since the previous period. Both rates continue to be below the England average. The gap to England currently stands at 2.2 years lower for men and 1.4 years lower for women.
- The biggest cause of deaths that helps to explain why Gateshead has a higher mortality rate than England is external causes (33.5%) for men and cancer (30.9%) for women (External causes include land transport accidents, accidental poisoning, and suicide).
- In Gateshead, life expectancy for men is 10.8 years less in the most deprived compared to the least deprived areas (deciles); for women, the difference is 8.8 years. For both men and women, the gap in life expectancy between people living in the most deprived and the least deprived areas has overall been increasing over time. However, in the latest data point 2018-20, the gap for women actually reduced from 9.6 in the previous period.
- Within Gateshead wards, life expectancy for men living in Dunston & Teams is 9.3 years less than for men living in Whickham South & Sunnyside. Women living in Deckham will live on average 9.7 fewer years than women living in Whickham South and Sunnyside.
- Healthy life expectancy is 57.9 for men and 58.5 for women. Female healthy life expectancy is therefore greater than that for men (although confidence intervals mean no significant conclusions can be drawn at this point). Healthy life expectancy for men in Gateshead is about 5 years less than across England as a whole and for women it is about 5½ years less. Compared to the North East, healthy life expectancy for men and women in Gateshead is about 1 year less than the North East average.

3.5. Health Needs: Long Term Conditions

What services can/do pharmacies offer?

- Blood pressure check
- Discharge medicine service
- Hypertension case finding
- New Medicine Service
- On demand availability of specialist drugs service (palliative care)

There are thousands of people on disease registers in Gateshead. Research by the Kings Fund suggested this was more than 50,000 people, and the number is only increasing. The risk of unplanned hospitalisation increases with increasing numbers of long-term conditions. The percentage of people with some of the key long-term conditions is shown in the table on the right.

Hypertension is the main long-term condition and is a major risk factor for cardiovascular disease. In 2023/24, 17.6% of the population of Gateshead had hypertension, which is higher than the England average of 14.8%. This may be due in part to higher rates of detection of hypertension in Gateshead. Nonetheless, it is estimated that there are a further 8.9% with undiagnosed hypertension, meaning that there are potentially many people not receiving the support they require for hypertension.

Table 2: Prevalence of selected Long-Term Conditions in Gateshead.

	% Long term conditions
Hypertension²	17.6%
Depression¹	15.6%
Diabetes (17+)¹	8.1%
Asthma²	7.6%
Chronic Kidney Disease²	6.2%
Coronary Heart Disease¹	3.7%
Chronic Obstructive Pulmonary Disease²	2.8%
Stroke²	2.5%
Dementia^{2#}	0.8%
Epilepsy (18+)^{2#}	0.9%

¹ 2022/23 ² 2023/24

NewcastleGateshead ICB area

Premature mortality from cardiovascular disease is significantly worse in Gateshead (103 per 100,000 people younger than 75 years of age in 2023, the equivalent of 187 people) than in England overall (77 per 100,000).

Premature mortality for cardiovascular disease has been decreasing in both Gateshead and England since around the millennium, although the rate appears to have levelled out and is variable in recent years. The gap between Gateshead and England has generally narrowed.

Type 2 diabetes is another major risk factor for cardiovascular disease. The prevalence of diagnosed type 2 diabetes in the adult population of Gateshead is increasing, having been as low as 5.8% in 2009/10 but increasing to 8.1% in 2022/23.

The prevalence of diagnosed COPD in Gateshead was 2.8% in 2023/24. This has changed little over recent years and is significantly higher than the England average of 1.9%. It is estimated that 40% of people with COPD in Gateshead are undiagnosed.

The pharmacy public survey (Appendix 3) identified that 14% of respondents accessed a health check, screening or monitoring as part of the pharmacy services, they use and 72% said their pharmacist explained how and why to use new medicine.

3.6. Health Needs: Substance Misuse

3.6.1. Drugs

In the year to April 2024 there were around 975 opiate users, 170 non-opiate users, 230 non-opiate and alcohol users, and 485 alcohol only users in treatment.

Those known to treatment services in Gateshead can be further broken down by the primary substances they use. The top 5 are 47% alcohol, 45% opiate users, 17% cocaine, 16% cannabis, 13% benzodiazepine. These figures do not add to 100% because people may use a combination of substances, which can also increase risk to health.

What services can/do pharmacies offer?

- Needle Exchange
- Supervised Administration of opiate substitutes
- Naloxone supplies
- Hepatitis C testing
- Signposting

The proportion of opiate users in Gateshead that left drug treatment successfully (free of drug[s] dependence) who did not then re-present for treatment within 6 months was 4.0% (38 people) in 2022, which compares with the regional average of 4.0% and the England average of 5.0%.

The proportion of non-opiate users that left drug treatment successfully who did not then re-present within 6 months was 24.7% (72 people) in 2022, compared with 27.1% across the North East and 31.4% for England as a whole.

Between 2020 and 2022 there were 71 deaths directly related to drug misuse. This is a rate of 12.8 per 100,000 people DSR (Directly Standardised Rate), which is more than double the rate in England of 5.2 and significantly higher than the North East average of 9.7. The general trend in deaths from drug misuse is increasing nationally, however the trend of deaths in Gateshead is increasing at a much greater pace (although broad confidence intervals at the local level mean changes need to be interpreted with care).

None of the respondents to the public survey said they use the pharmacy substance misuse services and needle exchange. 9% indicated they would use the service if it was available in their pharmacy.

3.6.2. Alcohol

A local survey conducted in 2016 (Adult Health and Lifestyle Survey) found that 90% of respondents drink alcohol. 34% of respondents were 'binge drinking'. The survey also found that 27% of respondents were what is known as 'increasing or higher risk drinkers', that is they were drinking more than 14 units of alcohol every week.

What services can/do pharmacies offer?

- Brief intervention
- Healthy lifestyle advice
- Signposting to services

Alcohol misuse is a major problem within Gateshead in terms of health, social and economic consequences which affect a wide cross section of the borough at a considerable cost.

The (age-standardised) rate of alcohol-related hospital admissions in Gateshead is 827 per 100,000 population (DSR). This is significantly higher than both the regional average (721) and the England average (494).

There were 105 alcohol related deaths in 2022. This equates to a rate per 100,000 (DSR) of 52.8. The Gateshead rate compares with the England average of 39.7 per 100,000.

Following the same pattern as all alcohol related mortality, mortality from chronic liver disease has remained around the same level in recent years. In 2013-15 the rate was 16.7 deaths per 100,000, a total of 98 deaths. Gateshead remains significantly higher than the England average.

A 2021 Balance North East report it found that only 1 in 3 people were aware of the link between alcohol and cancer.

Pharmacists can contribute to identification and supporting alcohol awareness when discussing healthy lifestyle options as part of discharge medicine service, new medicine services and other patient consultation opportunities.

3.7. Health Needs: Sexual Health

In 2023, Gateshead had the third highest prevalence of diagnosed HIV-infected patients in the North East at 1.58 cases per 1,000 population. The rate in England overall is 2.40. There were 9 new HIV diagnoses in Gateshead in 2023. In Gateshead between 2021 and 2023, 35% of HIV diagnoses were made at a late stage of infection compared to 44% in England.

In 2023, there were 1,265 new Sexually Transmitted Infections (STIs) diagnosed, a rate of 640 per 100,000 residents. This compares with the North East rate of 589 and the England rate of 704.

What services can/do pharmacies offer?

- Condom distribution service
- Emergency hormonal contraception
- Pregnancy testing
- Referral on for further contraception services
- Pharmacy contraception advanced service
- Dual screening service

STIs disproportionately affect young people. When those aged under 25 who are diagnosed with Chlamydia are removed from the overall diagnosis indicator mentioned above, there are just 833 STIs diagnosed, meaning a third (415) of new STIs being diagnosed are cases of chlamydia in people aged under 25.

Chlamydia is the most common STI, especially amongst young people. UK HSA (formerly Public Health England) recommends that local areas should be working towards a Chlamydia diagnosis rate of at least 2,300 per 100,000 in the 15 to 24 age group. The diagnosis rate reflects both coverage and the proportion

testing positive (at all sites, NHS, and non-NHS). In 2022, the chlamydia diagnosis rate for the 15-to-24-year-old age group in Gateshead increased to 1,977 per 100,000 residents. This rate is below the target but is significantly better than the national average of 1,615 and compares well against the regional average of 1,843 per 100,000.

The number of teenage pregnancies in young people aged between 15-17 years of age in 2021 was 64, up from 52 the previous year. The longer-term trend is down, having reduced from a high of 202 in 2000 and there has been a steady decrease since then. The rate per 1,000 in 2021 was 20.6 which is 4.2 percentage points higher than the 2020 rate. This compares with a 1.2 percentage points increase across the North East and a 0.1 percentage points increase across England as a whole. Gateshead's current Under 18s conception rate of 20.6 is above the North East rate of 19.8 and compares with the England rate of 13.1.

Pooled 2019 to 2021 data highlights teenage pregnancy rates within Gateshead at the Middle Layer Super Output Area (MSOA) level. This shows that only E02001692 which covers Mount Pleasant and Deckham East area, and E02001702 which covers the Beacon Lough and Wrekenton area have significantly higher under 18 conception rates (30 and 39 per 1,000 women aged 15 to 17 respectively) than the England median rate (12 per 1,000). No MSOA areas in Gateshead are significantly lower than the England median.

Just 0.3% of respondents to the public survey said that they currently use sexual health services such as chlamydia testing or treatment, condoms, emergency contraception and pregnancy tests. However, 15% said they would use that service if it was available at the pharmacy they use.

3.8. Health Needs: Smoking

Smoking remains the greatest contributor to premature death and disease in Gateshead. In 2017-19, Gateshead's directly age standardised mortality rate for deaths attributable to smoking in 35+ year olds was 276.0 per 100,000 population which is statistically significantly higher than the England rate of 202.0 per 100,000. This means that Gateshead's rate is 37% higher than the England average.

What services can/do pharmacies offer?

- Smoking Cessation
- Nicotine Replacement Therapy
- Active Intervention Smoking Cessation
- Smoking Cessation Advanced Service
- Supporting annual public health campaigns
- Promotion of Health Lifestyle

The biggest killer is lung cancer, which between 2020 and 2022 killed 517 Gateshead people. The trend over the last decade has been downwards, however the recent years have seen the lung cancer death rate level off. Smoking is also a major factor in deaths from many other forms of cancer and circulatory disease.

In Gateshead in 2022, the prevalence of smoking in adults was 11.1%. This is similar to the England average of 12.7%. Indicatively (because of large confidence intervals), the overall direction of travel has been down in recent years.

Smoking prevalence of routine and manual occupation socio-economic groups in Gateshead appears to have decreased (although the decrease is indicative at the moment due to large confidence intervals). In 2021 prevalence was 25.4%, however this reduced to 16.7% in 2022. It compares with the England average of 22.5%. This continues a downward trend in recent years.

At delivery, 10.9% of all women giving birth were known to smoke. This is significantly higher than the England average of 8.8% and compares with the previous year's figure of 11.8%. The overall long-term trend is downwards.

Pharmacists can contribute to the care of those wishing to stop smoking both as part of discussions of lifestyle options when discussing medications and also opportunistically when discussing product options and offering appropriate support where necessary.

0.6% of respondents to the public survey indicated that they currently use the smoking, alcohol, or weight management pharmacy services, but a further 24% indicated they would use these services if they were available at their local pharmacy.

3.9. Health Needs: Healthy Weight

In 2022/23 70.3% of adults in Gateshead have excess weight [Chart - Adult excess weight] according to survey data. This is significantly worse than the England average of 64.0%.

A local survey (Adult Health and Lifestyle Survey) showed variation in excess weight for men. For example, whilst 75% of men aged 35 to 64 and 74% aged 65+ are overweight or obese, this compares with just 40% of those aged under 35. The rate for women aged 35 to 64 is much higher at 58%, but the proportion does not differ in the older age bands for women, at 54% and 58% respectively.

What services can/do pharmacies offer?

- Healthy Lifestyle Advice - offering information, advice and support
- NHS Health Checks
- NHS Weight Management Programme referral
- Hypertension case finding service
- Supporting annual public health campaigns

The local survey also asked about self-perception of weight. Of those who were overweight or obese (based on the measurements they provided), 92% realised they were in that weight zone. In addition, 92% said they would like to lose weight.

Of children attending Gateshead schools, 24.0% of 4–5-year-olds and 37.9% of 10–11-year-olds were classified as overweight or obese (excess weight). At 24.0% the 4–5-year-olds age group was significantly higher than the England average of 21.3%. The 10–11-year-olds age group was similar to the England average of 36.6%. As with the adult population, excess weight in children is more prevalent in areas that are more deprived.

The underlying causes of obesity are complex, but include the ready availability of high calorie food, and a more sedentary lifestyle. Addressing obesity will require action at an individual, environmental and societal level.

Just 0.6% of respondents to the public survey indicated that they currently use the smoking, alcohol, or weight management pharmacy services, but a further 24% indicated they would use these services if they were available at their local pharmacy.

3.10. Health Needs: Vaccinations

In 2022/23, 82.0% of people aged 65 years or older had the seasonal influenza vaccine. This is above the Chief Medical Officers' target of 75% or higher and continues a significant national increase in uptake following the outbreak of the Covid-19 pandemic.

What services can/do pharmacies offer?

- Flu vaccination programme
- Covid vaccination programme

In 2022/23, 52.6% of people younger than 65 years of age considered to be at risk received the flu vaccine. This is a significant decline since the previous year when it was 60.5%. It is no longer above the Chief Medical Officers' target of 55% or higher.

The national flu campaign, implemented primarily via GP practices, targets those most at risk e.g. children and young people, older people (>65 years) and those in clinical risk groups as defined in the national campaign. However, there are many people younger than 65 who are at elevated risk of contracting flu resulting in possible lost working hours and/ or further transmission. As this target group are more likely to be in the working population community pharmacy could help identify these people and offer to vaccinate immediately, without the need to attend the GP surgery. The provision of an influenza vaccine service, commissioned by the ICBs via community pharmacies, therefore is an opportunity to contribute to health protection across the community.

46% of respondents to the public survey indicated that they currently use the pharmacy vaccine administration service which includes flu and Covid-19 amongst others. A further 27% indicated they would use this service if it were available at their local pharmacy.

3.11. Health Needs: Older People

Many of the people whose lives are substantially affected by long-term illness or disability are in their eighties or nineties and have age-related conditions such as osteoarthritis, visual or sensory impairment, or Alzheimer's disease. But there are also older people who are disabled by health problems much earlier in life, for instance people who suffer a severe stroke or early-onset dementia.

Population projections indicate the number of persons in Gateshead aged 65 years and over will increase to 54,766 by 2043 (estimates suggest that currently there are 40,679). The number of people aged 85 and over is projected to increase to 9,757 (estimates suggest that currently there are 5,388). These increasing will create additional demands for social care, housing support and health services. Long term conditions and dementia will be among the biggest challenges faced by health services going forwards.

What services can/do pharmacies offer?

- New medicine service
- Discharge medicine service
- Repeat prescription service
- Suitable adjustments to aid medicine compliance (large print, non-child-proof lids, reminder charts)
- Provision of medicine in compliance aids (Not a commissioned service but may be "suitable adjustment" to meet person's needs)
- Advice to carers and supported living services regarding medicines
- Care home advice and support

As of 31 March 2024, 820 older people were looked after in long term residential or nursing care in Gateshead. This represents 2.0% of those aged 65 plus.

People with dementia require substantial amounts of care. Pharmacists can contribute to the care of those with dementia by reviewing and advising about their medication and helping to ensure that patients remember to take the medicines they require by advising on and supplying appropriate support where necessary. The number of patients with dementia is expected to rise as the number of elderly people in Gateshead increases. According to Projection Older People Population Information (POPPI) data, there were estimated to be 3,002 people aged 65+ with dementia in 2024, and this is expected to rise to 3,882 by 2040.

An ageing population will be associated with more harm as a result of falls. After adjusting for age, the rate of emergency admissions for injuries due to falls in people 65 years of age or older is significantly higher in Gateshead than in England overall. It is predicted that there will be a 20% increase to 13,429 in the number of people aged 65+ affected by falls between 2024 and 2040. It is also predicted that there will be a 28% increase to 1,737 in the number aged 65+ admitted to hospital as a result of falls between 2024 and 2040. Community pharmacists are in an ideal position to review medication which could contribute to dizziness and

falls. As the population ages the proportion of people with a disability is also likely to increase creating additional demands for service provision.

Many of the respondents to the public survey were older people (216 or 63% aged 65+, 64 or 19% aged 55 to 64) which is perhaps a reflection of the demographics described and also that this cohort of people experience higher levels of long-term conditions and so are frequently prescribed medication and access pharmacy services.

3.12. Health Needs: Other

Public Health initiatives

Pharmacists are required to participate in promotion of Public Health initiatives (see section 7.1.1) and provide advice on healthy lifestyles.

Minor Ailments

Pharmacists have access to a considerable range of medicines which they can sell to the public for minor ailments. They are more accessible to the public than their GP as customers do not need to make an appointment to access treatment. Gateshead pharmacies have participated in the Think Pharmacy First service for a number of years which enables people to access a free consultation and either purchase or, if they are eligible, receive free of charge medicines to treat minor ailments. In addition, the Pharmacy First Advanced NHS service enables access to treatment for defined conditions. These services are described in more detail in section 7.

Travel Clinics

Pharmacies have access to medicines and provide advice which may be useful to those travelling abroad, again without the need for an appointment with their GP although a formal consultation appointment with the pharmacist may be recommended for advice regarding travel vaccinations, which is not an NHS or locally commissioned service.

4. The Health System in Gateshead

4.1. General Practices

There are 28 GP practices in Gateshead, some of which have branch surgeries in addition to their base location as seen in Appendix 6. The basic GP contract requires GPs to offer appointments between 8.00am and 6.30pm Monday to Friday. To improve access, GPs have been required to provide more, routine appointments outside of these core hours. Pharmacy opening hours are not always required to mirror these extended surgery hours, as most appointments are pre-booked and the need for immediate provision of medicines is rare.

Clinical pharmacists and pharmacy technicians are well established as part of general practice teams. They are highly qualified experts in medicines and can help people in a range of ways. This includes carrying out structured medication reviews for patients with ongoing health problems and improving patient safety, outcomes, and value through a person-centred approach. All pharmacists and technicians discuss medication changes and issues with community pharmacists as appropriate.

4.1.1. Extended hours

Gateshead Extended Access Service (previously known as Extra Care) provide extended access appointments with local GPs, healthcare assistants and Advanced Nurse Practitioners⁽³⁶⁾. Appointments are available during normal working hours, in the evenings and at weekends over six days a week. This service is currently provided across three site locations in Gateshead: Blaydon Primary Care Centre, The Queen Elizabeth Hospital and The Bede Centre, Felling. Patients can book appointments through their own registered GP practice or by contacting NHS 111 (who will book in appointments where clinically appropriate). The appointments can be made for face to face or as telephone consultations and the patient is given the choice when they would like to book the appointment for and given information on where to attend.

4.1.2. Urgent Treatment Centres

Gateshead urgent and emergency care services are based at the Emergency Care Centre at Queen Elizabeth Hospital (24/7) and Urgent Treatment Centre (UTC) at Blaydon (08.00 – 21:00). The UTC provides treatment for a range of minor illnesses and injuries that require urgent attention and where a patient cannot wait to be seen by their own GP. Patients access the service either by self-presentation or referral from NHS 111. They are run by the Gateshead Health NHS Foundation Trust and are staffed by GP's, nurses. Medicines are either prescribed or supplied from over labelled stock through the use of Patient Group Directions (PGDs).

Patients, following triage may also be streamed to community pharmacies for support.

4.1.3. Out of hours service

Gateshead Doctors Out of Hours Service (GatDoc) have provided GP out-of-hours care to the population of Gateshead since 1994⁽³⁶⁾. GatDoc provides an urgent out-of-hours GP service when GP surgeries in Gateshead are closed. Patients with urgent medical problems access the service by calling NHS111. The service provides telephone contact and access to general practitioners and home visits when required. The service also has arrangements in place to ensure that they can access pharmaceutical advice, even during the out of hours period.

The service utilises the network of community pharmacies with extended hours while they are open. Patients are provided with prescription forms when pharmacies are open or when closed, over-labelled medicines stocked by the GatDoc Out of Hours Service.

4.2. Primary Care Network

A Primary Care Network (PCN) is a group of GP practices working closely together, aligned to other health and social care staff and organisations, providing integrated services to their local population. A PCN covers a patient population, of 30,000 – 50,000 patients, although by approval of the commissioner, this may be lower in rural and remote areas, and higher where it is appropriate.

The vision is to offer a balance between effective and efficient care provision within the local population whilst enabling the delivery of patient-centred care to meet the needs of individuals and the wider community. PCNs provide proactive, coordinated care to their local populations, in different ways to match different people's needs, with a strong focus on prevention and personalised care. This means supporting patients to make informed decisions about their own health and care and connecting them to a wide range of statutory and voluntary services to ensure they can access the care they need first time. Networks also have a greater focus on population health and addressing health inequalities in their local area. PCNs also help ensure that the NHS designs support and services to get the best possible value out of their funding for their local communities.

PCNs have a Clinical Director providing strategic leadership and oversight of service delivery of the PCN and representing the PCN as part of the wider health and social care system.

In Gateshead, the five PCNs are:

- Gateshead East PCN
- Gateshead Outer West PCN
- Gateshead Inner West PCN
- Gateshead Central South PCN
- Birtley, Oxford Terrace & Rawling Rd PCN

Community pharmacy services play a vital role in supporting the services provided by GP practices and the PCNs as reflected by the changes in the essential, advanced, and locally commissioned services as described later in this report.

4.3. Hospital Services

Gateshead Health NHS Foundation Trust, better known as QE Gateshead, provides a range of health services from the main site at the Queen Elizabeth Hospital, and also from, QE Metro Riverside and Bensham Hospital, all within Gateshead. A range of services are also provided from Blaydon Primary Care Centre.

Cumbria Northumberland Tyne & Wear NHS Foundation Trust provides specialist mental health services for the population of Gateshead although there are locations sited in the Gateshead area.

Hospital pharmacies do not provide services under the community pharmacy contractual framework and are therefore outside the scope of the PNA.

4.3.1. Out of Hospital (Community) Services

Gateshead Health and Care system (Gateshead Cares) has been providing NHS community services across the borough by bringing together teams from the NHS, Community Based Care Ltd (whose membership

comprises all Gateshead GPs) and Gateshead Council ⁽³⁷⁾. This partnership enables the entire system to work together more effectively so that all the experts from doctors and nurses to GPs and social workers are working together on better, more responsive care.

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5. Current Provision of Pharmaceutical Services

5.1. Definition of Pharmaceutical Services

NENC ICB is responsible for administering pharmacy services and for maintaining information regarding opening hours for all pharmacies. The requirements for the commissioning of pharmaceutical services are set out in the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013⁽⁹⁾ and the Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2013⁽¹⁸⁾.

Section 7 and 8 describe the current community pharmacy services in Gateshead in more detail.

5.1.1. Core hours

Community pharmacy contractors provide Essential Services as part of the NHS Community Pharmacy Contractual Framework (the 'pharmacy contract'). Most community pharmacies provide a core of 40 hours per week although some pharmacies may be contracted to provide a 100-hour pharmacy service (see 5.1.2), and some may offer less than 40 hours. Core opening hours can only be changed by first applying to NHS England and NHS Improvement and as with all applications, these may be granted or refused.

5.1.2. 100-hour pharmacies

100-hour pharmacies were required to open for at least 100 hours per week until May 2023 when the DHSC introduced a number of changes to the regulations. Amongst those changes was the option for 100-hour pharmacies to reduce their weekly opening hours to no less than 72, subject to various requirements, which included continuation of 7-day provision and late opening on weekdays. The changes were introduced in an effort to maintain the availability of this provision against a backdrop of pharmacy closures. 100-hour pharmacies were seen as particularly vulnerable to closure due to higher operating costs.

These services are referred to as former 100-hour pharmacies in this report.

There is currently one former 100-hour pharmacy within Gateshead, which reduced the opening hours to 72 hours per week (from 9th July 2023), in response to the change in regulations.

5.1.3. Supplementary hours

These are provided on a voluntary basis by the pharmacy contractor often based on patient need and business viability. As such, they are additional to the core hours provided. Supplementary hours can be amended by giving NENC ICB 90 days' notice of the intended change but would not be expected to fall unless there had been prior reduction in demand.

In Gateshead, the majority (36) of community pharmacies provide extended opening with the provision of supplementary hours, including 4 that provide between 51 and 60 hours and 5 that provide services for between 61 – 80 hours per week (detailed in section 6.4).

5.1.4. Directed hours

In order to ensure adequate pharmaceutical provision over bank holidays, ICBs may direct pharmacies in each locality to open for a limited period. This is of particular importance on special bank holidays when all pharmacies (including former 100-hour pharmacies) are closed. If a pharmacy is directed to open it must comply with this instruction.

At the time of writing the PNA, the approach to community pharmacy bank holiday opening is to initially ask providers for expressions of interest and arrangement of subsequent directed hours if deemed necessary to fill any gaps in provision with providers that are in the locality.

5.1.5. Pharmacy Access Scheme

In October 2016, as part of the renewed funding package for community pharmacies in England, the DHSC introduced a Pharmacy Access Scheme (PhAS)⁽¹¹⁾. This was to give patients access to NHS community pharmacy services in areas where there are fewer pharmacies with higher health needs, so that no area need be left without access to NHS community pharmaceutical services.

This scheme was updated from January 2022, with revised criteria, and is based on both the dispensing volume of the pharmacy, and distance from the next nearest pharmacy. Information provided by NENC ICB in December 2024 indicated that three pharmacies in Gateshead were identified as being eligible for the Pharmacy Access Scheme:

- Lobley Hill Pharmacy
- Sunnyside Pharmacy
- Lloyds Pharmacy Greenside, Ryton.

5.1.6. Dispensing Appliance Contractors

Dispensing Appliance Contractors (DAC) specialise in the supply of prescribed appliances such as catheter, stoma and incontinence products and dressings. These items are usually delivered direct to the patient's home. Community pharmacies can also provide this service, in accordance with the pharmaceutical regulations.

Dispensing appliance contractors (DAC) are different to pharmacy contractors because they only dispense prescriptions for appliances and cannot dispense prescriptions for medicines. They tend to operate remotely, receiving prescriptions either via the post or the electronic prescription service, and arranging for dispensed items to be delivered to the patient.

Some patients may choose to have appliances supplied by appliance contractors. Although there are no dispensing appliance contractors located within Gateshead, these products are usually delivered to the patient's home, so distance to the dispenser is not an impediment to service. In addition, some community pharmacies within the Gateshead area do offer specialist support regarding appliances as described later within the report.

5.1.7. Distance Selling Premises Pharmacies

Distance Selling Premises pharmacies are required to deliver the full range of essential services, though the 2013 regulations⁽⁹⁾ do not allow them to provide essential services to people on a face-to-face basis on the premises of the pharmacy. They receive prescriptions either via the electronic prescription service or through

the post, dispense them at the pharmacy and then either deliver them to the patient or arrange for them to be delivered.

They must provide essential services to anyone, anywhere in England, where requested to do so and may choose to provide advanced services, but when doing so must ensure that they do not provide any essential or advanced services whilst the patient is at the pharmacy premises.

As of 31st March 2024, there were 409 Distance Selling Premises in England, based in 115 health and wellbeing board areas ⁽¹²⁾. Not every health and wellbeing board therefore has one in their area, however it is likely that some of their residents will use one.

In the NENC ICB area, in December 2024, there were 21 Distance Selling Premises pharmacies. There has been a number of changes in the DSP provision in Gateshead since the publication of the PNA 2022 including relocation of one service (to a neighbouring location within the same locality), one closure, one change of owner and the opening of a new service. As a result, at the time of producing this PNA, there are three DSPs based in Gateshead.

Concerns have been heard from HWB regarding the impact of DSP on community pharmacies, further analysis of this will need to be carried out.

5.1.8. Dispensing Doctors

NHS legislation provides that in certain rural areas (classified as controlled localities) general practitioners may apply to dispense NHS prescriptions. A reserved location is designated, in a controlled locality, where the total patient population within 1.6 km (one mile) of the proposed location of a new pharmacy is less than 2,750 at the time an application is received. Patients living in these areas have the choice of having their prescriptions dispensed from a pharmacy or from a dispensing GP, if one is available within their practice. Where an application for a new pharmacy is made in a controlled locality, a determination must also be made as to whether the location of the pharmacy is in a reserved location.

In Gateshead Council, there is one dispensing doctor service: Chopwell Primary Healthcare Centre (the location of which can be seen in map 2).

Map 2 shows the settlements listed as controlled areas pinpointed on a map. However, this is not a representation of the boundaries of the controlled localities, just an indication of the areas that might be affected.

Map 2: Gateshead Rural Areas (Controlled Localities)

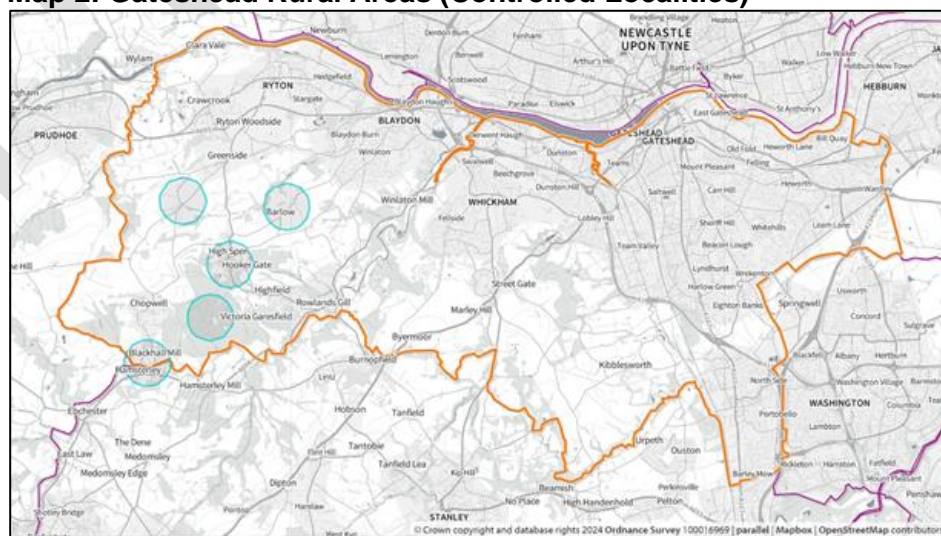


Figure 4: Rural areas in Gateshead (controlled localities).

5.1.9. Out of Area providers of pharmaceutical services

Consideration has been given to pharmaceutical services provided by community pharmacy contractors outside of the Gateshead area that provide dispensing services to the registered population. Out of area providers may include community pharmacies that are in neighbouring HWB areas, in particular those that may be close to the boundaries. In addition, distance selling pharmacies which may be in more distant locations provide an alternative dispensing and delivery service.

Further information regarding dispensing activities and access to pharmacies is in section 6.3 of this report.

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6. Access to Pharmacy Services in Gateshead

6.1. Number and type of pharmacies in Gateshead

NENC ICB is responsible for administering pharmacy services and for maintaining information regarding opening hours for all pharmacies.

A table listing the current pharmacy services and key opening times is attached in appendix 10, and figure 5 shows the location of the community pharmacy provision across Gateshead.

In Gateshead, there are currently 42 community pharmacies services made up of:

- 38 Standard contract (40 hour) pharmacies
- 1 Former 100-hour pharmacy
- 3 Distance Selling Premises pharmacies (DSP)
- No appliance contractors

There is also 1 dispensing doctors' service.

There has been a decrease of four 40-hour pharmacies and one DSP in Gateshead since the PNA 2022 was published and one new DSP has opened in the same period.

The closures in community pharmacy services were as follows:

- Lloyds, inside Sainsburys, Eleventh Avenue, Team Valley Trading Estate: April 2023
- Boots, 479 Durham Road, Low Fell: October 2023
- Boots: Unit 4 Booth Street, Felling: November 2023
- Boots, 16 Front Street, Winlaton: March 2024
- Spinks The Chemist (DSP), 379 Princes Way South, Team Valley: May 2024.

There have also been changes of ownership of 11 community pharmacy services and relocation of 2 existing pharmacy services to alternative locations, generally close to previous sites with little change to service provision.

There have also been a number of pharmacies that have changed, usually reduced, their supplementary hours provision.

In addition, there continues to be one dispensing doctor's service in Chopwell providing services to the more rural locations of the area. This further extends access to dispensing services within the Gateshead Council boundary.

On consideration of the impact of the community pharmacy provision changes since the publication of the PNA in October 2022, Gateshead HWB published two supplementary statements which are described in more detail in section 10.

6.2. Geographical location of pharmacies in Gateshead

Map 3 identifies the current provision of essential pharmaceutical services. Appendix 6 provides further information regarding the location of all pharmacies and GP practices in the Gateshead area.

A full list of the pharmacy services and their opening hours is detailed in Appendix 10.

As seen in table 3, with 42 community pharmacy services in the Gateshead area and a population of 197,700 (based on ONS 2023 mid-year population estimates)⁽²²⁾, the average number of community pharmacies is 21.2 per 100,000 people; this equates to one pharmacy per 4,708 population.

If only the 39 "high street" pharmacies (the pharmacy stores that the public can "walk into" to access all service provision) are considered i.e., excluding distance selling and appliance contractors, the average number of pharmacies in Gateshead re-calculates as 19.7 per 100,000 population or one pharmacy per 5,070 population.

Table 3 demonstrates that Gateshead as a whole is well served by community pharmacies. Although East locality is shown to have less pharmacies per 100,000 population as discussed in section 6, all residents in East locality have access to pharmacy services within 1 mile; and there are neighbouring pharmacies in Central and South Gateshead and South Tyneside.

Map 3: Community pharmacy and dispensing GP in Gateshead

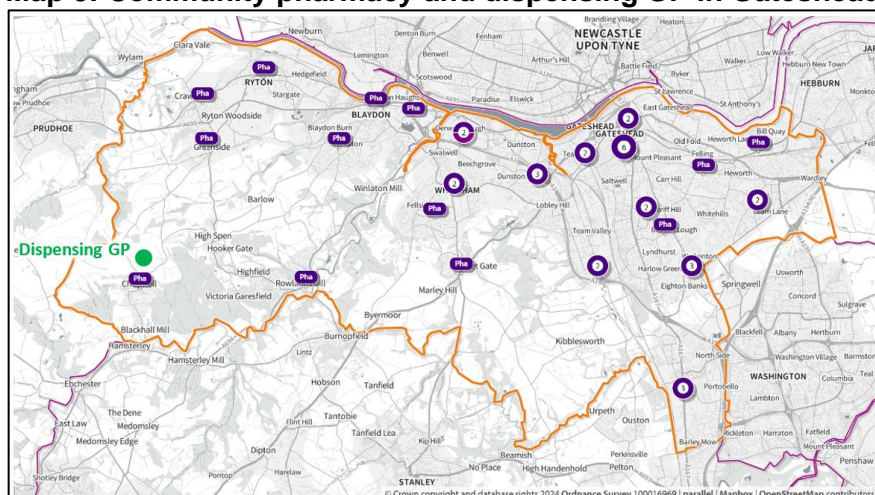


Figure 5: Community Pharmacies and Dispensing GPs in Gateshead.

Table 3: Average number of pharmacies, per 100,000 population, in Gateshead (February 2025).

Locality	No. of pharmacies	Population	Pharmacies per 100,000 population	Persons per pharmacy
Central	11	39,339	28.0	3,576
East	4	34,922	11.5	8,731
Inner West	9	33,183	27.1	3,687
South	10	44,907	22.3	4,491
West	8	45,371	17.6	5,671
Gateshead	42	197,722	21.2	4,708
ENGLAND	12,009	57,106,398	21.0	4,755

Sources: *Mid-Year Population Estimates 2022, Office for National Statistics (ONS)

6.3. Dispensing activity in Gateshead

To assess the average dispensing activity levels of Gateshead community pharmacies, data from the NHS Business Services Authority on prescribing and dispensing activity⁽²³⁾ was mapped to Gateshead localities using pharmacy codes and addresses.

Prescribing and data reports (ePACT2) published by NHS Business Services Authority in October 2024^{ref} indicated that a total of 5,862,975 items were dispensed by Community Pharmacies in the Gateshead HWB area in 2023/24.

Table 4 shows that community pharmacies in Gateshead dispensed on average 139,595 prescription items per provider during 2023/24, compared to an average of 91,958 for England [63].

Table 4: Comparison of the average number of prescription items dispensed per pharmacy in Gateshead and England.

2023/24	No of community pharmacies	Number of prescription items dispensed	Average no. of prescription items dispensed per pharmacy
Gateshead	42	5,862,975	139,595
England	12,009	1,100,000,000	91,598

In Gateshead, the majority (approximately 92%) of the prescriptions issued by Gateshead prescribers are dispensed by community pharmacies or dispensing doctors within Gateshead and approximately 8% are dispensed out of the Gateshead locality.

In addition to this, it is important to note that over the last 3 years, an average of 6.5% of the prescriptions dispensed by community pharmacies within Gateshead are prescribed by GP practices out of the Gateshead area, again demonstrating the cross-boundary activity.

Table 5: Total number of prescriptions (issued by all prescribers in any area), dispensed by pharmacies within the Gateshead HWB area between 2021/22 and 2023/24.

2021/22-2023/24	2021/2022	2022/2023	2023/2024
Number of items dispensed in Gateshead pharmacies	5,623,389	5,706,910	5,862,975

On average, the NHS Business Services Authority report identified that there was a 3% increase in prescription items from 2022/23 to 2023/24. On considering prescribing trends in Gateshead for previous years, there has continued to be a significant higher dispensing activity by pharmacies in Gateshead compared to the average for England. It is also important to note that a 3% increased activity seen in 2023/24 was consistent with the national picture.

The HWB recognises that, as noted in previous PNAs, community pharmacies in Gateshead dispense significantly higher numbers of prescriptions than the national average but that the services are able to meet this current need.

6.4. Pharmacy Opening Hours in Gateshead

NENC ICB is responsible for administering opening hours for all pharmacies in Gateshead. A table showing key opening times is attached in Appendix 10 and the map in Appendix 6 shows the current provision of essential pharmaceutical services within the Gateshead local authority boundary.

Access to community pharmacy across Gateshead is well provided for during core hours as seen in table 6 showing the number of hours provided from all community pharmacy services in Gateshead i.e. from 40 hour, former 100 hour and DSPs.

Excluding the DSPs:

- Most (95%) of the 40-hour pharmacies in Gateshead open for more than the core contract hours with 31 (82%) being open until 6pm on weekday evenings;
- 24 (62%) of the pharmacies (40-hour and former 100-hour providers) in Gateshead are open on Saturdays, of which 10 (26%) remain open on Saturday afternoons;
- 6 (15%) pharmacies (40 and former 100-hour providers) are open on a Sunday, and these tend to be those stores situated in supermarkets or shopping areas.

Table 6: Number of pharmaceutical services available each week.

Number of hours	Number of pharmacies	Percentage of pharmacies
Under 40	0	0%
40	5	12%
41 to 45	16	38%
46 to 50	11	26%
51 to 55	4	10%
56 to 60	0	0%
61 to 80	6	14%
81 to 99	0	0%
100 or more	0	0%
TOTAL	42	100%

Number of hours of pharmaceutical services available each week by locality

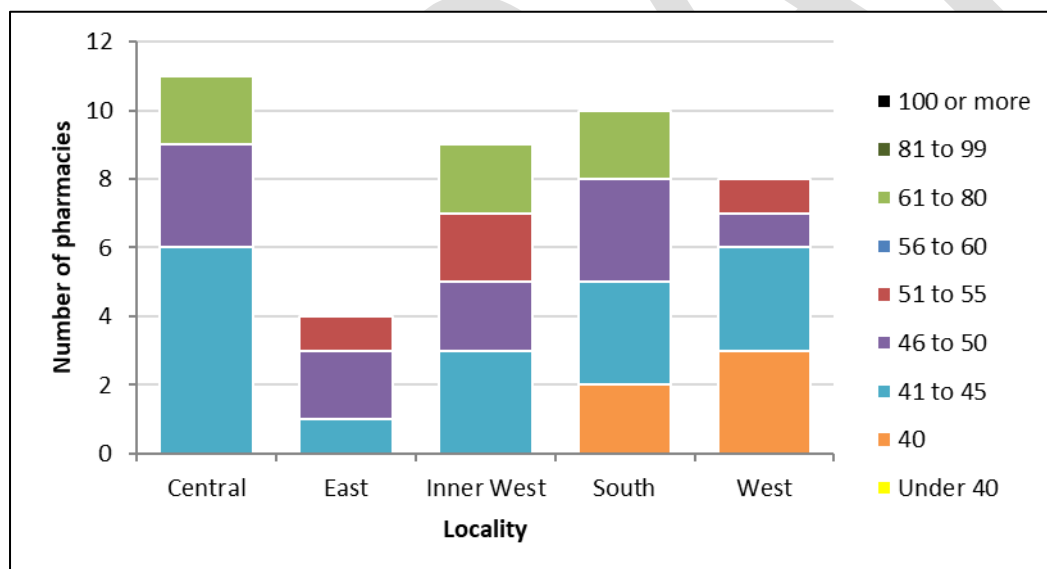


Figure 6: Number of hours of pharmaceutical services available each week by Gateshead locality.

Table 6 illustrates how many Gateshead pharmacies provide supplementary hours (i.e. above 40 hours per week) and figure 6 demonstrates how these are distributed across localities.

Most pharmacies are open for longer than the contracted 40 hours, with 12 pharmacies providing more than 50 hours opening time by providing extended supplementary hours by more than 10 hours per week.

6.4.1. Weekday opening

The charts below show, by locality, the numbers of pharmacies open outside of Monday to Friday 9am to 5pm, pharmacies open during weekday evenings, pharmacies open on Saturdays, and pharmacies open on Sundays. Numbers are for total hours, i.e., including both core and supplementary hours.

The maps also provide an overview of the distribution of these services during weekend evening opening Appendix 8 maps provide a larger visual account of the location and spread of pharmacy service locations across Gateshead.

(If a pharmacy's hours differed on one day of the week from the other four days this difference is ignored on the chart. For example, if a pharmacy is open four days of the week, until 6pm but closes one day at 5pm it is counted on the chart as being open until 6pm. Therefore, if a pharmacy opens one evening per week to mirror a surgery's late opening this is not reflected in these tables.)

Pharmacies open weekday evenings

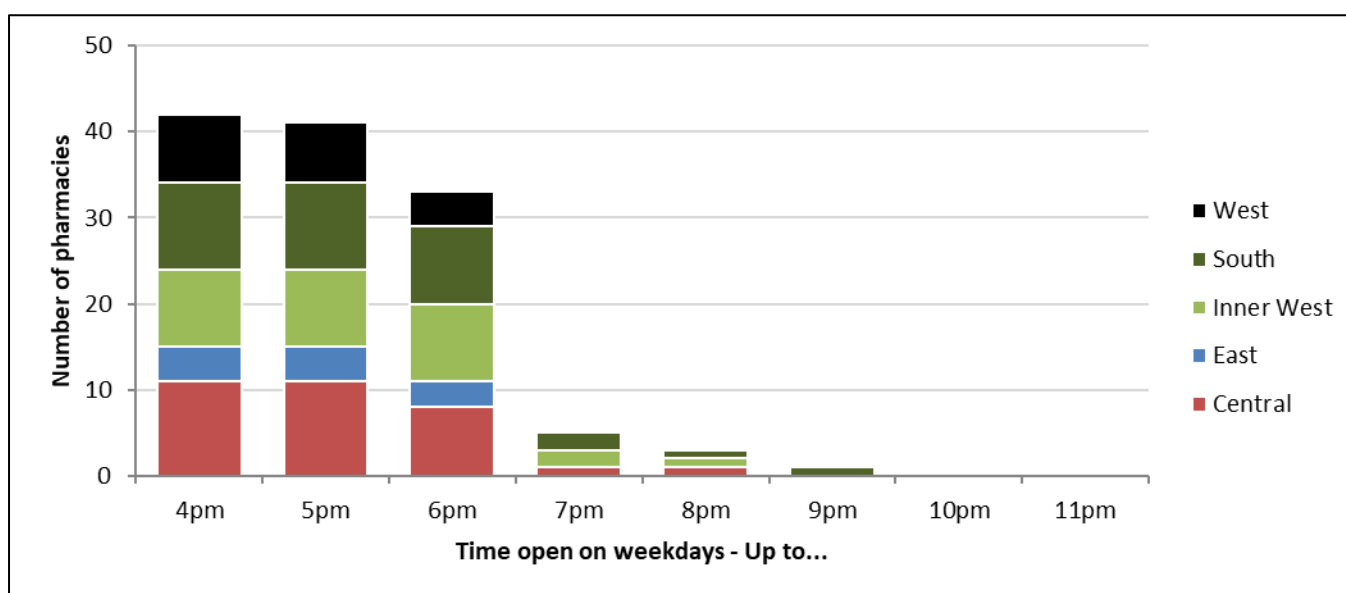


Figure 7: Number of pharmacies open after 4pm on weekdays in Gateshead.

Map 4: Pharmacies open on weekday evenings (Appendix 8a)

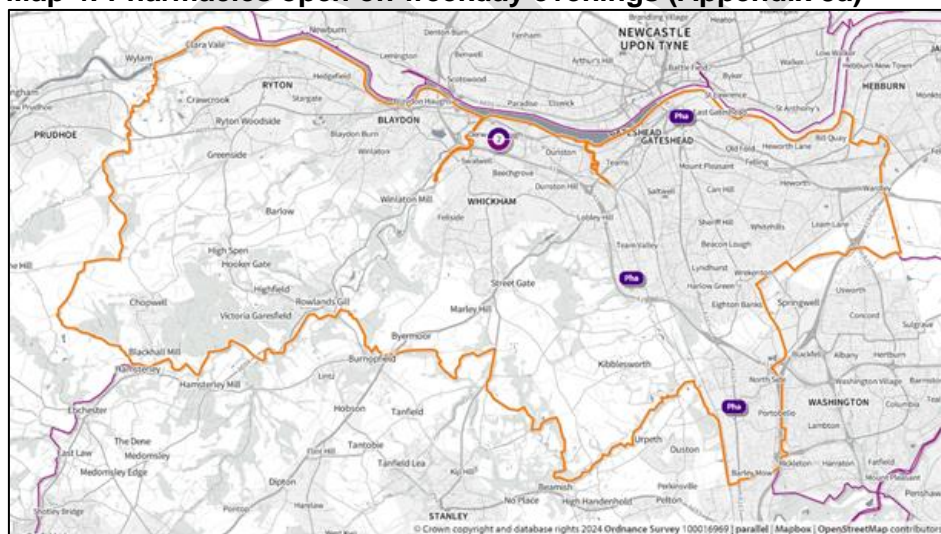


Figure 8: Pharmacies open on weekday evenings (MAP).

6.4.2. Weekend Opening

The maps and charts below provide an overview of the distribution of these services over weekends.

Pharmacies open on Saturday

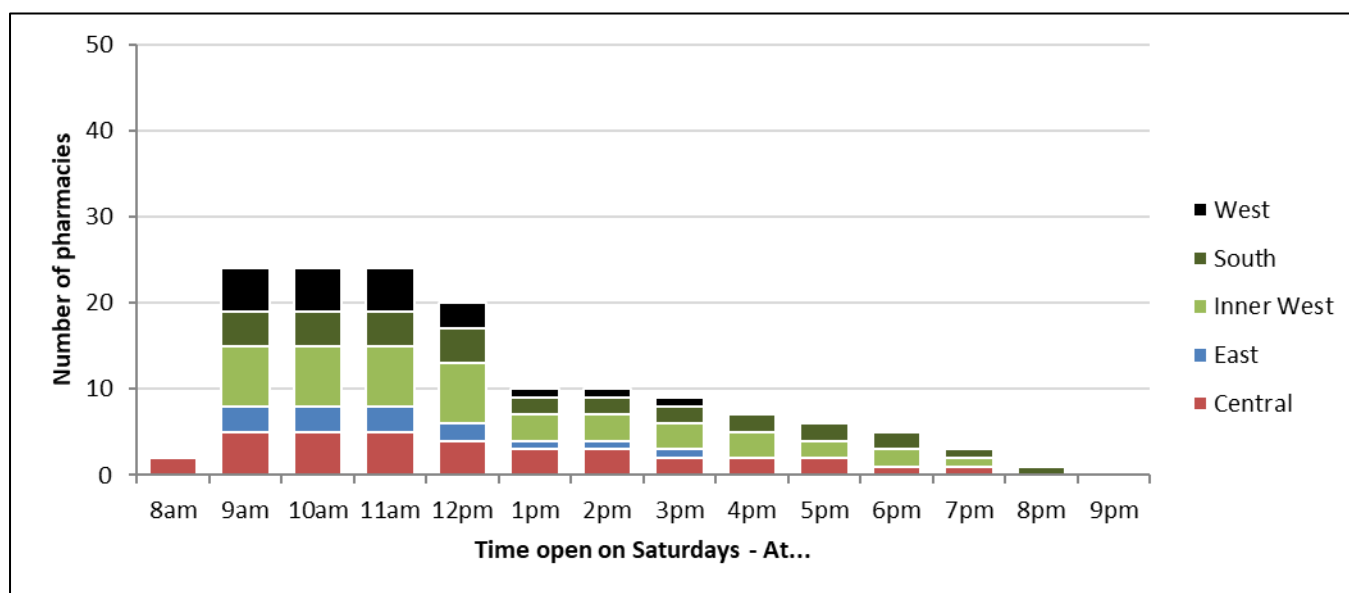


Figure 9: Number of pharmacies open on Saturday in Gateshead, by locality.

Map 5: Pharmacies open on a Saturday (Appendix 8b)

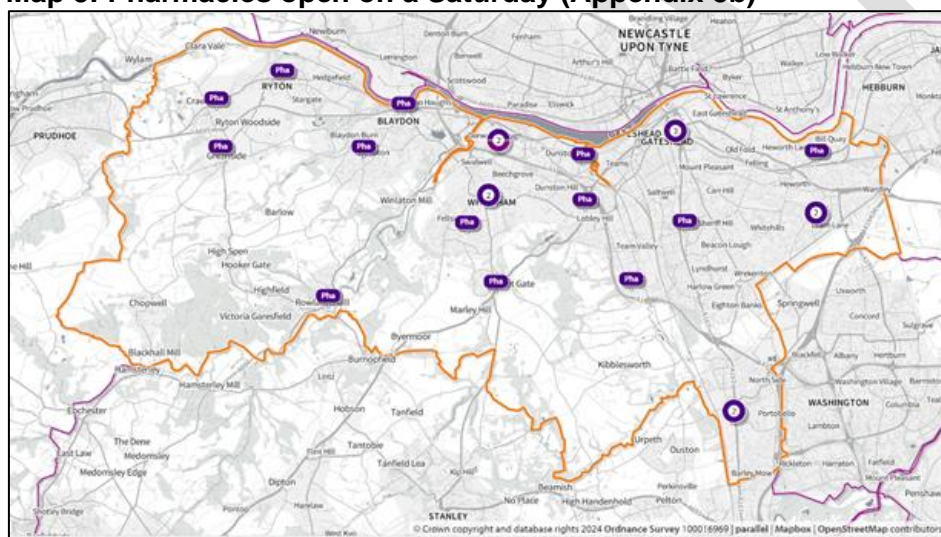


Figure 10: Pharmacies open on Saturday in Gateshead (MAP).

Pharmacies open on Sunday

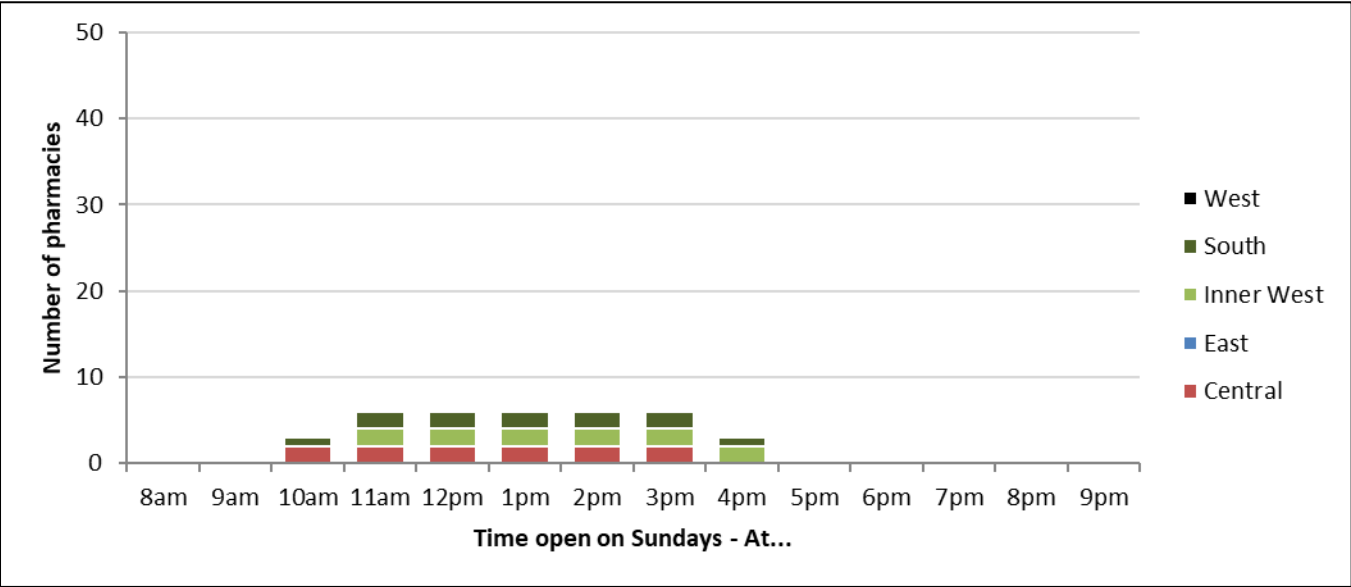


Figure 11: Number of pharmacies open on Sunday in Gateshead, by locality.

There is a good choice of and access to community pharmacy services in Gateshead between Monday and Friday. Services are more limited on Saturdays, but 62% of pharmacies are open on Saturday mornings and 26% are open on Saturday afternoons, allowing working residents to access pharmacy services. Sunday and evening provision across Gateshead is limited and mainly dependant on supermarket pharmacies.

Map 6: Pharmacies open on a Sunday (Appendix 8c)

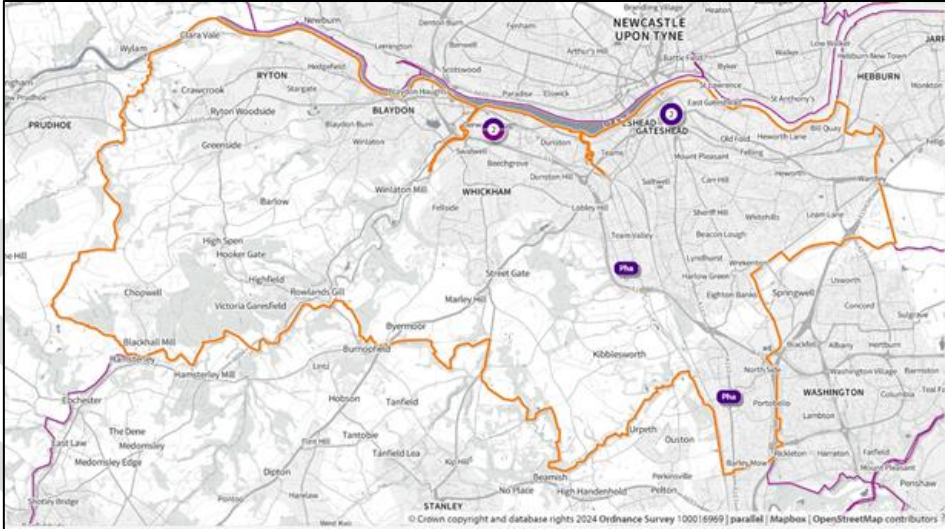


Figure 12: Pharmacies open on Sunday in Gateshead (MAP).

These longer hours of access to pharmacy services are provided by the one former 100-hour pharmacy provider and a number of community pharmacies provide extended hours including 4 community pharmacies that provide services for between 51 - 60 hours per week and 6 that provide services between 61-80 hours per week.

Access to pharmacies that are open for longer during the day and the weekend is greater in the Central, Inner West and South localities of Gateshead with the East and West localities having limited Saturday morning and no Sunday access within the locality.

While there has been a reduction in pharmacy provision in Gateshead since the last PNA, there continues to be adequate access to community pharmacies during the weekdays and weekends although this is reduced in the evenings and on Sundays which limits the ability to access essential services, advanced services such as the Pharmacy First and new medicine service (NMS) and self-care medicines as well as placing more demand on urgent and emergency care services.

There are also pharmacies with extended opening hours in neighbouring areas such as Newcastle and South Tyneside which patients in Gateshead may choose to access.

Our survey showed that 37% of respondents indicated that they would wait until the pharmacy was open with 34% stating that they would go to another store if their normal pharmacy was closed. Only 1% said they rang 111 service and were signposted to another pharmacy, 1% indicated that they would go to hospital and 2% would go to a walk-in centre.

6.4.3. Pharmacy opening during extended GP access and urgent care centres opening hours

Map 7 indicates the location of the pharmacies that provided the longer service provision during weekday evenings in relation to the extended GP and urgent care centres. Maps 5 and 6 on the previous pages indicates the community pharmacy provision that is available on Saturdays and Sundays which would contribute to the access of medicines via the extended GP and urgent care centres in Gateshead.

Map 7: Urgent treatment centres and pharmacies open on weekday evenings

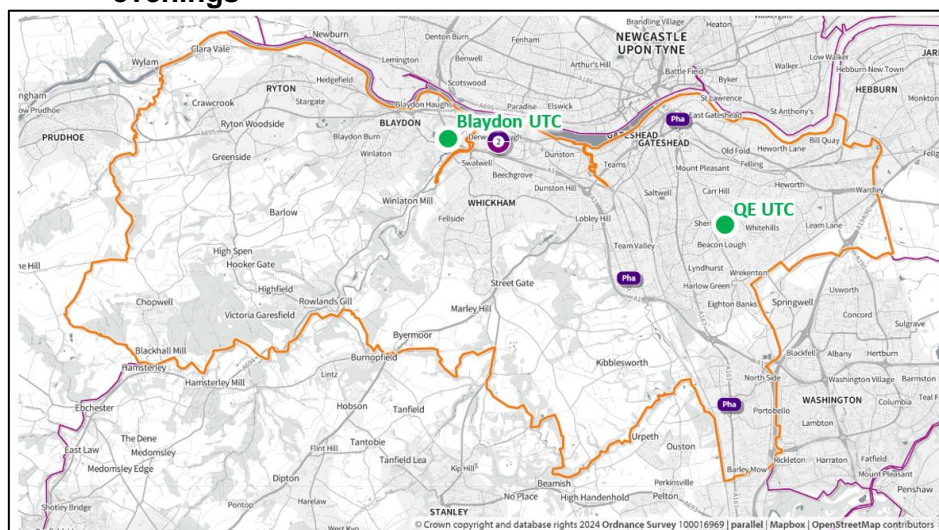


Figure 13: Urgent Treatment Centres and Pharmacies open on weekday evenings in Gateshead (MAP).

6.4.4. Access to pharmacies by foot and by public transport

The following maps 8 and 9 (also available in Appendix 8) demonstrate access to community pharmacies by foot and by public transport in terms of travel time and distance travelled. The denser colour of the maps indicates the proximity of the pharmacy.

In terms of accessibility ⁽²⁵⁾, 98% of the population of Gateshead are within 1 mile walking distance of a pharmacy, with 3,631 people (1.8%) living more than 1 mile walking distance.

Map 8: Population within 1 mile walking distance of pharmacies (Appendix 8d)

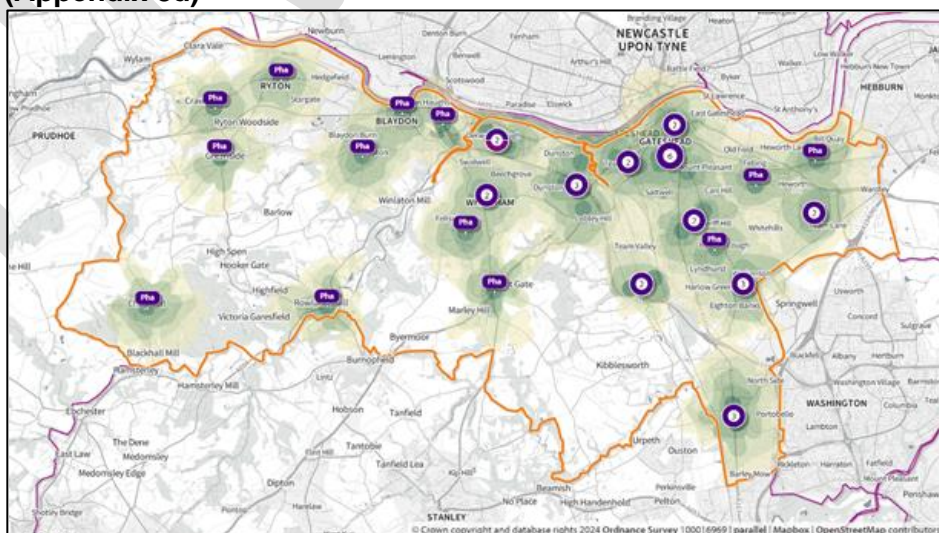


Figure 14: Gateshead population within 1 mile walking distance of a pharmacy (MAP).

Map 9 below indicates the areas where people would be required to walk more than a mile to visit a pharmacy. However, 37% of the population are within 5 minutes walking distance to a nearby pharmacy with 69% being within a 10-minute and 87% within a 15-minute walk.

In addition, in terms of travel on public transport, 48% of the population of Gateshead is within a 4-minute travel time extending to 92% for 8 minutes travel time and 100% people should be able to access a pharmacy within 16 minutes when travelling on public transport see seen in Map 10.

Most respondents to the survey were either regular pharmacy users, 94% of whom indicated that they either always or usually visit the same pharmacy. Half (48%) of respondents usually travel to their pharmacy on foot. Around a third (37%) travel by car or taxi. Relatively few used public transports (5%), the Internet (5%) or the telephone (3%).

In some conflict with the data regarding access to pharmacies, when asked about ease of travelling to their usual choice of pharmacy on foot or by public transport, 19% said it was difficult to get to on foot and 24% said it was difficult on public transport. The majority said it was easy using either method.

6.4.5. Access to pharmacies in areas of increased deprivation in Gateshead

The previous section has shown that the majority of residential addresses in Gateshead are within 1 mile of a pharmacy. Consideration is also given to the more deprived areas of Gateshead, and two areas of access are seen to be more limited, in particular the West locality around High Spen and in the South locality near Kibblesworth. This is demonstrated previously in Map 9.

Access for the population in the West locality is further enhanced when the dispensing doctor service in Rowlands Gill (West locality) is considered although the closure of the other dispensing service, in the High Spen area will have required some people to find alternative dispensing provision.

Although these areas of relatively high deprivation have a more limited pharmacy provision, the broader findings regarding access to services by foot and public transport include these areas and demonstrate there is adequate access to services in terms of travel time for all the population of Gateshead.

6.4.6. Access to pharmacy services out of the Gateshead area

It is important to note that pharmacy services that are out of the Gateshead area may provide additional alternatives for people to access medicines and advice.

Map 9: Population within 1 mile walking distance of pharmacies and the population centres that are outside of that distance (Appendix 8e)

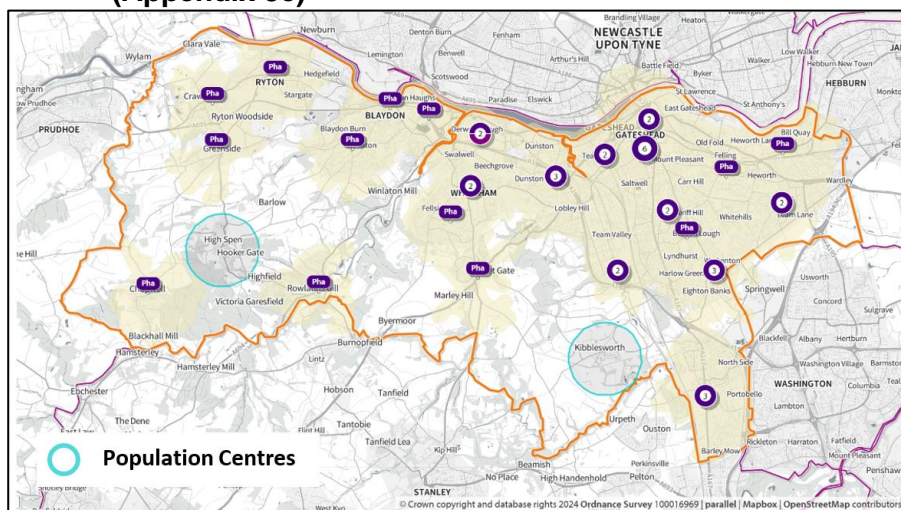


Figure 15: Gateshead population within 1 mile walking distance of a pharmacy, with population centres outside of that distance highlighted in blue.

In particular, there may be pharmacies close to residents who live on or close to the city boundaries. Map 11 (Appendix 7) shows the locations of pharmacy services outside the Gateshead area demonstrating that there is further choice for people to access pharmacy provision across boundaries in the neighbouring areas.

Other options for accessing pharmacy services include choosing to have prescriptions dispensed closer to someone's place of work for convenience or to utilise distance selling pharmacy services.

In addition, some prescriptions may be specialist items which services such as dispensing appliance contractors can supply. This may also be facilitated using out of area provision.

Map 11: Pharmacies in Gateshead and surrounding areas (Appendix 7)

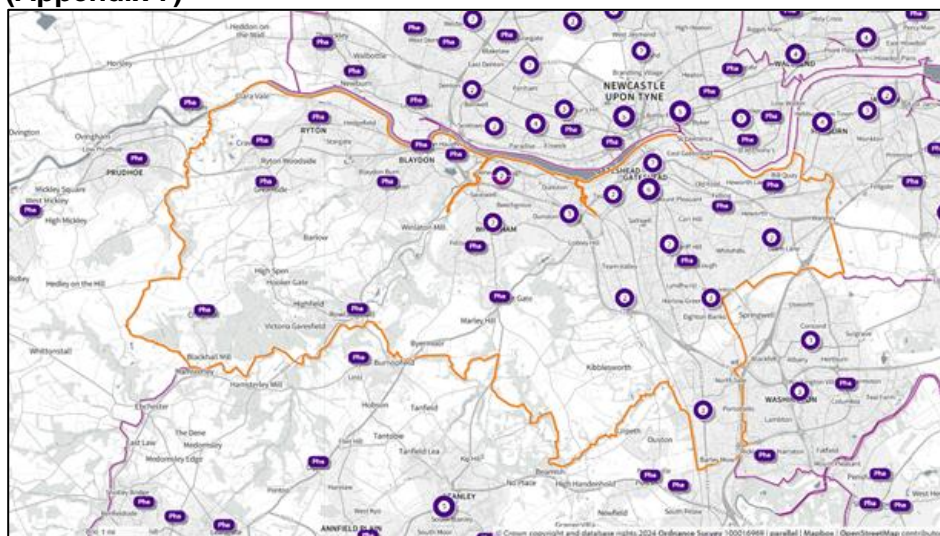


Figure 16: Pharmacies in Gateshead and the surrounding areas (MAP).

6.4.7. Improving access

Medicine delivery services

Dispensed medicine home delivery services improve access to medicines, however, are not part of the NHS essential services.

68% of pharmacies deliver dispensed medicines free of charge with some pharmacies charging for this service. The patient groups that the pharmacies generally provided this service for included those who were housebound, elderly, and vulnerable and those requiring end of life care or urgent medicines.

In some cases, deliveries had to be restricted to these groups due to the limited resources available to provide this service.

Disability access

To comply with the Equality Act 2010⁽²⁶⁾, community pharmacies must make reasonable provision for access by patients who have disabilities. It sets out a framework which requires service providers to ensure they do not discriminate against persons with a disability. A person is regarded as being having a disability if they have a physical or mental impairment which has a substantial adverse effect on that person's ability to carry out day to day activities. If there are obstacles to accessing a service, then the service provider must consider what reasonable adjustments are needed to overcome that obstacle.

Common adjustments in community pharmacies include:

- Easy open containers;
- Large print labels;
- Reminder charts, showing which times of day medicines are to be taken;
- Monitored dosage system (MDS) to improve their adherence to medicines taking.

Most community pharmacies have made arrangements to ensure that those with a disability can access their pharmacy and consultation rooms. As part of the NHSE&I regulations and guidance⁽⁹⁾ almost all pharmacies comply with the need to have a consultation room as specified in order to deliver advanced services.

The requirements for the consultation room are that it is:

- Clearly designated as a room for confidential conversations, for example a sign is attached to the door to the room saying Consultation room;
- Distinct from the general public areas of the pharmacy premises;
- A room where both the person receiving the service and the person providing it can be seated together and communicate confidentially.

Access to support languages

As described in section 3.2, Gateshead has an increasing ethnic diversity including 2% of households where English is not considered the main language. This may have implications in terms of support required for different communities to support access and understanding of their medicines.

NHS England contracts with Language Empire to provide various linguistic services and all pharmacies were contacted in March 2021 by NHS England's public health team about the new arrangements from 1 April 2021 for Interpretation and Translation Services which they are able to access.

24 of the 42 (57%) pharmacies responding to the survey said they were able to converse in languages other than English, with some speaking more than one additional language as demonstrated by the chart below.

Additional languages spoken in some pharmacies:

Language	Number of pharmacies
Arabic	7
Bengali	4
Bulgarian	1
Cantonese	2
Chinese	2
Farsi	1
Hindi	4
Irish	1
Malay	1
Mandarin	2
Polish	2
Punjabi	6
Serbo-Croat	1
Telugu	2
Urdu	10
Yoruba	1

6.5. Key points regarding access to pharmacies in Gateshead

The HWB recognise that community pharmacies in Gateshead across the majority of localities, dispense significantly higher numbers of prescriptions than the national average, however, the current pharmacy provision is found to meet this need.

Although there has been a reduction in pharmacy provision in Gateshead since the last PNA, there continues to be adequate access to community pharmacies during the weekdays and weekends, albeit more limited in the evenings and on Sundays. The East and West localities of Gateshead are less well served both with pharmacy premises and also the range of pharmacy opening hours.

In terms of accessibility, 98% of the population of Gateshead are within 1 mile walking distance of a pharmacy, with 3,631 people (1.8%) living more than 1 mile walking distance which demonstrates that the population of Gateshead has good access, in terms of walking or using public transport to all the pharmacy services across the area.

Although these areas have a more limited pharmacy provision, the findings regarding access to services by foot and public transport include these areas and demonstrate there is adequate access to services in terms of travel time for all the population of Gateshead.

The areas of Gateshead that are within the 30% most deprived areas in the country account for 52% of the areas in Gateshead⁽²⁶⁾. However, the majority of pharmacy services are seen to be located near to or in these areas. From this information, there is adequate access to community pharmacy services across the areas of higher deprivation in Gateshead.

Concerns remain from the previous PNA about the accessibility of pharmacy services outside normal hours, which remains largely unchanged. This is particularly the case in the East and West localities. Access to essential and advanced pharmacy services in the vicinity of the urgent care provision in Gateshead appears adequate, however, better access to these services would be secured by the review of provision on weekday

evenings and weekends. The HWB continue to recommend local discussions with the LPC regarding possible support to evening or weekend opening to ensure patients with minor ailments and/or require medication to be dispensed following consultation with and extended access service, out of hours GP or referral by 111 for emergency medication can access pharmacy support.

DRAFT

7. Pharmaceutical Services

7.1. Pharmacy services overview

The requirements for the commissioning of pharmaceutical services are set out in the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 and the Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2013^(18,19).

NENC ICB commissions pharmaceutical services via the national community pharmacy contractual framework⁽¹¹⁾. Community pharmacies provide three tiers of pharmaceutical service which have been identified in regulations. These are:

- Essential Services: services all community pharmacies are required to provide;
- Advanced Services: services to support patients with safe and effective use of medicines or appliances that all community pharmacies may choose to provide as long as they meet the requirements set out in the directions;
- Enhanced Services: services that can be commissioned locally by the ICBs. Currently, there is just one such service; the Covid-19 vaccination programme.

In addition, a Local Pharmaceutical Service (LPS) contract allows ICBs to commission community pharmaceutical services tailored to meet specific local requirements. It provides flexibility to include a broader or narrower range of services (including services not traditionally associated with pharmacy) than is possible under the national pharmacy contract arrangements. Locally commissioned community pharmacy services can be contracted via a number of different routes and by different commissioners, including local authorities and the ICB.

Gateshead HWB considers the necessary services to be the essential services.

7.1.1. Essential services

The NHS Community Pharmacy Contractual Framework (CPCF or the 'pharmacy contract')⁽¹¹⁾ that all pharmacies, including distance selling pharmacies, are required to provide the essential services.

The essential services are:

- Dispensing of prescriptions,
- Repeat Dispensing, i.e. a process that allows a patient to obtain repeat supplies of their medication or appliances without the need for the prescriber to issue repeat prescriptions each time.
- Disposal of unwanted medicines returned to the pharmacy by someone living at home, in a children's home, or in a residential care home.
- Promotion of healthy lifestyles, which includes providing advice and participating in NHSE health campaigns.
- Signposting people who require advice, treatment, or support that the pharmacy cannot provide to another provider of health or social care services.
- Support for self-care which may include advising on over the counter medicines or changes to the person's lifestyle.
- Healthy Living Pharmacies - aimed at achieving consistent provision of a broad range of health promotion interventions to meet local need, improving the health and wellbeing of the local population, and helping to reduce health inequalities.
- Discharge medicines service. This service was introduced in 2021 and aims to reduce the risk of medication problems when a person is discharged from hospital. The service has been identified by

NHSE's Medicines Safety Improvement Programme to be a significant contributor to the safety of patients at transitions of care, by reducing readmissions to hospital.

- Dispensing of appliances (in the "normal course of business").

Dispensing appliance contractors have a narrower range of services that they must provide:

- Dispensing of prescriptions.
- Dispensing of repeat prescriptions.
- For certain appliances, offer to deliver to the patient and provide access to expert clinical advice.
- Where the contractor cannot provide a particular appliance, signposting or referring a patient to another provider of appliances who can.

Digital Solutions

Under the terms of service, community pharmacies are required to have digital solutions in place to provide connectivity across healthcare settings.

Staff working at the pharmacy can access a patient's NHS Summary Care Record (SCR) via the National Care Records Service (NCRS), and that access is consistent and reliable during the pharmacy's opening hours, in so far as that is within the control of the contractor. Subject to the normal patient consent requirements, those registered professionals should access patients' SCRs whenever providing pharmaceutical services to the extent that they consider, in their clinical judgement, that it is appropriate to do so for example: prescription queries, advising patients on suitable medication, providing emergency supplies.

7.1.2. Advanced Services

In addition to the essential services, the CPCF allows for the provision of 'advanced services'. Community pharmacies can choose to provide any of these services as long as they meet the service requirements including accreditation of the pharmacist providing the service and/or specific requirements to be met regarding premises. They are commissioned by NENC ICB and the specification and payment agreed nationally.

Advanced services currently (2024) include:

- Appliance Use Review (AUR)
- Flu Vaccination Service
- Hypertension Case-Finding Service
- Lateral Flow Device Tests Supply Service
- New Medicine Service
- Pharmacy Contraception Service
- Pharmacy First Service
- Smoking Cessation Service
- Stoma Appliance Customisation Service.

7.1.3. Locally Commissioned Services

Locally commissioned services are not described in the 2013 regulations, but the term is often used to describe those services commissioned from pharmacies by local authorities and ICBs.

In Gateshead, pharmacy services are currently commissioned locally by the Council’s Public Health Team and NENC ICB which are described in more detail in section 8 and maps in Appendix 9.

7.2. Current Provision of Essential Pharmacy Services in Gateshead

Map 12 identifies the current provision of essential pharmaceutical services and will be used to determine any applications for new pharmacy contracts. This map is enlarged in Appendix 6.

Pharmacies in the surrounding areas of Northumberland, Newcastle, North Tyneside, South Tyneside, Sunderland, and County Durham, which may provide services to residents of Gateshead, are shown in the map at Appendix 7. This includes city centre pharmacies some of which open for extended hours.

Map 12: Pharmacies, GP Practices and Branch Surgeries (Appendix 6)

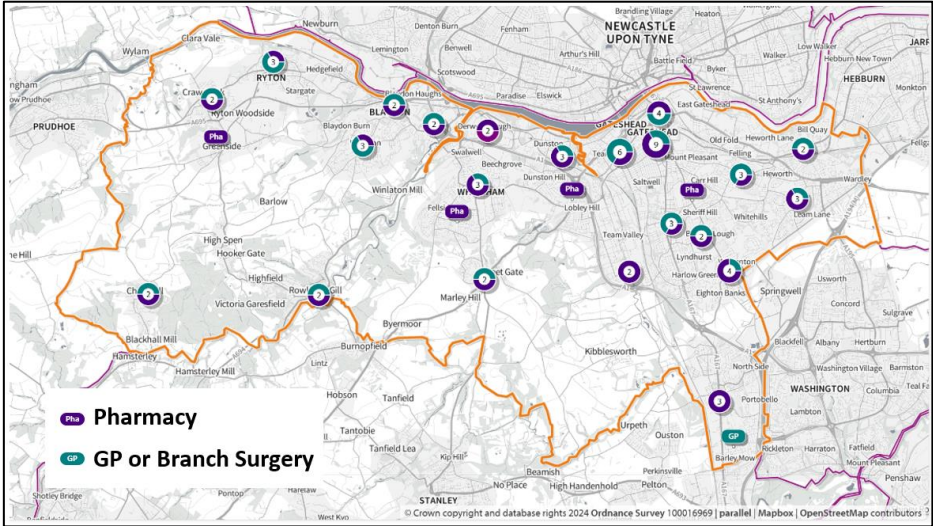


Figure 17: Pharmacies, GP Practices, and Branch Surgeries in Gateshead (MAP).

7.3. Current Provision of Advanced Pharmacy Services in Gateshead

Table 7: Number of pharmacies providing advanced services in Gateshead as of February 2025.

Pharmacy Advanced Service	Number of pharmacies providing this service in Gateshead (NENC ICB February 2025)
Appliance Use Review	6
Flu Vaccination Service	37
Hypertension Case-Finding Service	38
Lateral Flow Device Tests Supply Service	30
New Medicines Service	42
Pharmacy Contraception Service	37
Pharmacy First Service	42
Smoking Cessation Service	17
Stoma Appliance Customisation service	6

There is a good provision of NHS Advanced services by the community pharmacies within the Gateshead Council area, including 2 of the DSPs providing the majority of the services.

Table 8: Distribution of community pharmacies delivering advanced services by Gateshead locality.

Pharmacies in Gateshead localities providing advanced services	Appliance Use Review	Flu Vaccination Service	Hypertension case-finding service*	Lateral Flow Device Tests Supply Service	New Medicines Service	Pharmacy Contraception Service	Pharmacy First Service	Smoking Cessation Service	Stoma Appliance Customisation service
Central (11)	2	9	10	8	11	10	11	1	2
East (4)	0	4	4	3	4	4	4	1	0
Inner West (9)	1	9	9	7	9	9	9	7	1
South (10)	2	8	8	7	10	7	10	5	2
West (8)	1	7	7	5	8	7	8	3	1
Gateshead - number of pharmacies providing advanced services	6	37	38	30	42	37	42	17	6
% of pharmacies providing services	14%	88%	90%	71%	100%	88%	100%	40%	14%

NENC ICB information February 2025

Table 8 shows the distribution of pharmacies across the localities of Gateshead that deliver the Advanced services.

7.3.1. Appliance use review

Appliance use Reviews (AURs) can be carried out by a pharmacist or a specialist nurse in the pharmacy or at the patient's home. Alternatively, where clinically appropriate and with the agreement of the patient, AURs can be provided by telephone or video consultation (in circumstances where the conversation cannot be overheard by others - except by someone whom the patient wants to hear the conversation, for example a carer). AURs should improve the patient's knowledge and use of any specified appliance.

This service is usually provided by the appliance contractors (none based in Gateshead Council area) as a specialism of the services however, 6 of the pharmacies in Gateshead are registered to deliver this service.

7.3.2. Flu Vaccination Service

Community pharmacies have been providing flu vaccinations under a nationally commissioned service since September 2015. Each year from September through to March the NHS runs a seasonal flu vaccination campaign aiming to vaccinate all patients who are at risk of developing more serious complications from the virus. The accessibility of pharmacies, their extended opening hours, and the option to walk in without an appointment have proved popular with patients seeking vaccinations.

Information from NENC ICB (February 2025) indicated that 37 (88%) of the community pharmacies in Gateshead were registered to provide the Flu Vaccination service 2024/25.

7.3.3. Hypertension Case Finding Service (HCFS)

The HCFS was commenced as an Advanced service in October 2021 to support the programme of identification of undiagnosed cardiovascular disease. Previously only being provided by pharmacists and pharmacy technicians, from December 2023, the service was further extended to be provided by suitably trained and competent non-registered pharmacy staff.

The service aims to:

- Identify people with high blood pressure aged 40 years or older (who have previously not had a confirmed diagnosis of hypertension), and to refer them to general practice to confirm diagnosis and for appropriate management.
- At the request of a general practice, undertake ad hoc clinic and ambulatory blood pressure measurements.
- Provide another opportunity to promote healthy behaviours to patients.

This service will be incorporated in the Pharmacy First Advanced service from 1 April 2025.⁽¹¹⁾

Information from NENC ICB (February 2025) indicated that 38 (90%) pharmacies were signed up to deliver the HCFS in Gateshead.

7.3.4. Lateral Flow Device (LFD) Supply Service

The NHS offers COVID-19 treatment to people with COVID-19 who are at risk of becoming seriously ill. To access treatment, eligible patients first need to be able to test themselves by using an LFD test if they develop symptoms suggestive of COVID-19. It is therefore important that they have LFD tests at their home in advance of developing symptoms, so they can promptly undertake a test.

The LFD supply service was introduced in November 2023 to provide eligible patients with access to LFD tests. It replaced a similar service known as 'COVID-19 Lateral Flow Device Distribution Service', or 'Pharmacy Collect'.

If a patient tests positive, they are advised to call their general practice, NHS 111, or hospital specialist as soon as possible. The test result will be used to inform a clinical assessment to determine whether the patient is suitable for, and will benefit from, NICE recommended COVID-19 treatments.

In April 2025, NHSE and DHSE confirmed that the LFD services would continue to be commissioned as an Advanced services through 2025/26.

Information from NENC ICB (February 2025) indicated that 30 (71%) pharmacies were signed up to deliver the LFD Test Service in Gateshead.

7.3.5. New Medicine Service (NMS)

In England, around 15 million people have a long-term condition (LTC), and the optimal use of appropriately prescribed medicines is vital to the management of most LTCs. However, reviews conducted across different disease states and different countries are consistent in estimating that between 30 and 50 per cent of prescribed medicines are not taken as recommended. This represents a failure to translate the technological benefits of new medicines into health gain for individuals. Sub-optimal medicines use can lead to inadequate management of the LTC and a cost to the patient, the NHS and society.

The service provides support to people who are newly prescribed a medicine to manage a long-term condition, which will generally help them to appropriately improve their medication adherence and enhance self-management of the LTC. Specific conditions/medicines are covered by the service.

Information from NENC ICB indicated that in February 2025, 42 (100%) of community pharmacies were signed up to provide NMS in Gateshead.

In response to the customer questionnaire, 57% of respondents stated that they used their pharmacy for advice from their pharmacist e.g., about minor ailments or new medicines.

7.3.6. Pharmacy Contraception Service (PCS)

The service provides an opportunity for community pharmacy to help address health inequalities by providing wider healthcare access in their communities and signposting service users into local sexual health services in line with NICE Guidelines (NG102).

The objectives of the service are to:

- Provide a model for community pharmacy teams to initiate provision of Oral Contraception (OC), and to continue the provision of OC supplies initiated in primary care (including general practice and pharmacies) or sexual health clinics and equivalent. Both initiation and ongoing supply are undertaken using PGDs to support the review and supply process; and
- Establish an integrated pathway between existing services and community pharmacies that provides people with greater choice and access when considering continuing their current form of OC.

The service aims to provide:

- Greater choice from where people can access contraception services; and
- Extra capacity in primary care and sexual health clinics (or equivalent) to support meeting the demand for more complex assessments.

The service involves community pharmacists providing:

- Initiation: where a person wishes to start OC for the first time or needs to restart OC following a pill free break. A person who is being switched to an alternative pill following consultation can also be considered as an initiation; and
- Ongoing supply: where a person has been supplied with OC by a primary care provider, or a sexual health clinic (or equivalent) and a subsequent equivalent supply is needed. Their current supply of OC should still be in use.

The supplies are authorised via a Patient Group Direction (PGD), with appropriate checks, such as the measurement of the patient's blood pressure and body mass index, being undertaken where necessary.

The contractual settlement for 2025/26 includes plans for further changes to PCS service specification including ⁽³⁴⁾:

- Recognition of suitably trained pharmacists and competent pharmacy technicians will be able to provide the service, thereby utilising a greater skill mix and provision of service
- Expanding the list of products available via PGD
- From October 2025, expanding the service to include Emergency Contraception.

Information from NENC ICB (February 2025) indicated that 37 (88%) of community pharmacies were signed up to provide NMS in Gateshead.

Note that Gateshead Council also commissions the supply of emergency contraception and other sexual health services via community pharmacy. This is described in more detail in the local enhanced services section 8.

7.3.7. Pharmacy First Service

The Pharmacy First service, which commenced on 31st January 2024 and replaces the Community Pharmacist Consultation Service (CPCS), involves pharmacists providing advice and NHS-funded treatment, where clinically appropriate, for seven common conditions (age restrictions apply): sinusitis, sore throat, acute otitis media, infected insect bites, impetigo, shingles, and uncomplicated UTI in women. Consultations for these seven clinical pathways can be provided to patients self-presenting to the pharmacy as well as those referred electronically by NHS 111, general practices and others.

The service also incorporates the elements of the CPCS, i.e. minor illness consultations with a pharmacist, and the supply of urgent medicines (and appliances), both following an electronic referral from NHS 111, general practices (urgent supply referrals are not allowed from general practices) and other authorised healthcare providers (i.e. patients are not able to present to the pharmacy without an electronic referral).

The Healthwatch report "Pharmacy What People Want", published in April 2024, identified that people valued the accessibility of community pharmacies, both in terms of the ease of getting to one and the speed of being seen once there and that there were positive signs for the success of Pharmacy First⁽²²⁾. People were already open to the idea of going to a pharmacy rather than a GP for the seven conditions before the service was launched and are open to the idea of seeing a pharmacist rather than a GP more generally. (see further information in section 9 of this report.)

Following the contractual settlement, further changes to the Pharmacy First Service⁽³⁵⁾ included "bundling" requirements such that providers must provide the Hypertension Case Finding Service (HCFS) and Pharmacy Contraception Service (PCS) in order for them to receive Pharmacy First monthly payments (from June 2025).

Information from NENC ICB (February 2025) indicated that 42 (100%) of community pharmacies were signed up to provide the Pharmacy First Service in Gateshead.

The Hypertension Case Finding and the Pharmacy Contraception Service will be part of the Pharmacy First Service from April 2025.

7.3.8. Smoking Cessation Advanced Service

The Smoking Cessation Advanced Service commenced in March 2022 for people referred to community pharmacies by hospital services. This service enables NHS trusts to refer patients discharged from hospital to a community pharmacy of their choice to continue their smoking cessation care pathway, including providing medication and behavioural support as required. It supplements other locally commissioned smoking cessation services, such as the Gateshead Public Health-commissioned "Stop Smoking Service" and the ICB-commissioned "Maternal Smoking E-voucher Dispensing Service", both detailed further in this document.

The contractual settlement for 2025/26⁽³⁴⁾ includes plans for further changes to Smoking Cessation Advanced Service specification including the introduction of PGDs in 2025 to 2026 to enable the provision of varenicline and cytisinicline (citisine).

Information from NENC ICB (February 2025) indicated that 17 (40%) of community pharmacies were signed up to provide the Smoking Cessation Advanced Service in Gateshead.

7.3.9. Stoma Appliance Customisation Service (SAC)

The Stoma Appliance Customisation service is based on modifying stoma appliance(s) to suit the patient's measurements or a template. The aim of the service is to ensure proper use and comfortable fitting of the stoma appliance and to improve the duration of usage, thereby reducing waste.

Information from NENC ICB (February 2025) indicated that 6 (14%) of community pharmacies were signed up to provide the Stoma Appliance Customisation service in Gateshead.

7.4. National Enhanced Services

In December 2021, provisions were made within the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 for a new type of Enhanced service, the National Enhanced Service (NES). Under this type of service, NHSE commissions an Enhanced service that is nationally specified. This requires NHSE to consult with Community Pharmacy England (CPE) on matters relating to the service specification and remuneration for the service.

This differs from a Local Enhanced Service (LES) that is locally developed and designed to meet local health needs, and for which NHSE would consult with Local Pharmaceutical Committees (LPCs). A NES allows the agreement of standard conditions nationally, while still allowing the flexibility for local decisions to commission the service to meet local population needs, as part of a nationally coordinated programme.

At the time of writing, there is one NES that could be commissioned by ICBs, the COVID-19 vaccination programme, however, this service is not commissioned by NENC ICB.

Gateshead HWB considers that for the purpose of this PNA, the necessary services are defined as the essential services in the NHS Community Pharmacy Contractual Framework and the relevant services are the advanced and enhanced services within the framework.

The finding described in this PNA is that there continues to be adequate delivery of Pharmacy Advanced Services across Gateshead. All pharmacies provide the Pharmacy First and NMS services and the majority provide the other advanced services other than provision of support for people requiring Appliances and Stoma care which is more limited but is likely to be a reflection of the required needs of the local community.

8. Gateshead Locally Commissioned Services

Locally commissioned services are not described in the 2013 regulations, but the term is often used to describe those services commissioned from pharmacies by local authorities and the ICB.

In Gateshead, pharmacy services are currently commissioned locally by the Council's Public Health Team and NENC ICB.

8.1. Services Commissioned by NENC ICB

At the time of preparing this PNA, NENC ICB commissioned the following services with Community pharmacy services in Gateshead:

- Think Pharmacy First Minor Ailments Scheme
- Emergency Supply of Palliative Care Medicines
- Antiviral Medicines Stockist
- Maternal Smoking e-voucher Dispensing Service

In addition, Newcastle-Gateshead NENC ICB locally commissions

- Access to medicines for Asylum seekers.

8.1.1. Think Pharmacy First Minor Ailment Scheme

The Think Pharmacy First Minor Ailment Scheme has been in place for a number of years in Gateshead with the vast majority of pharmacies in Gateshead participating. The scheme has been implemented across the NENC ICB/region whereby community pharmacies can offer advice and treatment for many common conditions, under the banner 'Think Pharmacy First'. Not to be confused with the 'Pharmacy First' Advanced service, this scheme covers conditions which would more typically be managed in a pharmacy setting but where the price of the medications provides either a barrier to treatment, or forces patients to access other services such as General Practice or Accident and Emergency. The aim is to therefore improve both equity and access whilst at the same time reduce pressure elsewhere in the system.

The scheme is available through all pharmacies in Gateshead.

In response to the customer questionnaire, more than a third (37%) of the respondents indicated that they use the Think Pharmacy First service with almost a further half of respondents (45%) saying they would likely use the Think Pharmacy First service if it was available.

As this service is available across all pharmacies in Gateshead further public awareness raising may be required to ensure it is fully utilised.

8.1.2. Emergency support of Palliative Care Medicines

The palliative care medicines service aims to provide an integrated service across primary and secondary care in the NENC ICB area, in order to:

- Improve and ensure the availability of palliative care medicines in the NENC ICB area through community pharmacies during normal opening hours.

- Provide relevant healthcare professionals (including other community pharmacists) with contact details of pharmacies in their locality who have committed to stock the full range of palliative care medication as per the palliative care formulary.

In Gateshead, six community pharmacies (including the former 100-hour pharmacy) hold stocks of specialist medicines which may be prescribed for patients at the end of life or for palliative care.

This service ensures that a small number of pharmacies across Gateshead keep a permanent stock of medicines that require access without any delays in dispensing. The agreed list of medicines held in participating pharmacy stores includes palliative care medicines and some less-commonly stocked antibiotics and antivirals and is routinely reviewed every 6 months.

8.1.3. Antiviral Medication Stockist

NENC ICB directly commissions a small number of pharmacies to maintain a stock of antiviral medicine for distribution in the event of a flu pandemic. There is one pharmacy (based in Kingston Park, Newcastle) in the Newcastle-Gateshead NENC ICB locality which hold this emergency stock, and 44 pharmacies in total across the full NENC ICB footprint.

8.1.4. Maternity e-NRT Voucher Service

The NHS Maternity Tobacco Dependency Treatment service delivery model in the North East includes all pregnant women being screened for carbon monoxide at booking, with all women who have a level of 4ppm or above, or those who have stopped in the previous 2 weeks being referred to a specialist trained Tobacco Treatment Advisor within the Maternity service on an 'opt-out' basis. The Maternity Tobacco Treatment Advisors see all women referred and develop a personalised quit plan including medication. The Maternity Tobacco Treatment Advisor will provide structured support on top of existing antenatal care in line with National Centre for Smoking Cessation and Training (NCSCT) standards throughout the maternity care pathway. Quick and simple access to Nicotine Replacement Therapy (NRT) is an essential element of the maternity pathway.

Community pharmacists utilise the online platform e-voucher scheme to receive requests from NHS Maternity Tobacco Treatment Advisors for pregnant women participating in a structured supported quit attempt, as well as providing advice on how to use the medication.

Information from the Pharmacy Services North East (PSNE) indicated that in September 2024, 29 pharmacies in Gateshead were participating in this service.

8.1.5. Access to medicines for Asylum Seekers

Initiated at the time of the PNA 2022, the Gateshead locality of NENC ICB has a service which allows access to free prescriptions for asylum seekers who had not yet received their HC2 certificates (for people with low-income to access full or partial help for healthcare expenses) whereby the CCG meets the cost of the prescription charges rather than the person for whom the medicines are prescribed.

Lobley Hill Pharmacy supports this initiative in Gateshead.

There is adequate provision of the NENC ICB Locality team locally commissioned services across Gateshead.

8.2. Services Commissioned by Gateshead Council Public Health Team

As part of its range of public health interventions Gateshead City Council currently commissions the following services from community pharmacies:

- Substance misuse;
 - Harm Reduction; needle exchange;
 - Supervised consumption of opiate substitutes;
- Sexual Health Services
 - Emergency hormonal contraception
 - Dual Screening and free condom distribution scheme
- Stop Smoking Services
 - Dispensing services for smoking cessation products such as nicotine replacement.

8.2.1. Substance Misuse: Harm Reduction Service (Needle exchange)

Gateshead Public Health Team have commissioned the substance misuse services from 'Change, Grow, Live (CGL)' since November 2018 provided under the local service name of Gateshead Recovery Partnership. This company is responsible for ensuring that there is adequate provision of needle exchange locations. The aim of the substance misuse service is to reduce the harm done to patients by:

- reducing the risks associated with illicit substance misuse and alcohol
- reducing the numbers of people who use illicit substances and alcohol
- promoting the responsible use of alcohol.

The key aim of the needle exchange service is to reduce the transmission of blood borne viruses and other infections caused by sharing injecting equipment, through the provision of access to clean, low dead space needles and syringes. Needle exchange is currently provided by Gateshead Recovery Partnership at Jackson Street in Gateshead town centre as well as by 4 community pharmacies and additional pharmacy is expecting to provide this service in the near future.

In the provider survey 4 of the 32 respondents indicated that they provide the needle exchange service, and a further 9 pharmacies expressed an interest in providing this service if commissioned.

Gateshead Recovery Partnership has employed a Pharmacy Liaison Lead who has been actively engaging with all the community pharmacies involved in the delivery of supervised consumption and encouraging the uptake of the new services detailed below.

8.2.2. Substance Misuse: Supervised consumption of opiate substitutes

Services have been commissioned from community pharmacies to provide a supervised consumption scheme for methadone and buprenorphine for those individuals who have made the decision to reduce their illicit opiate use. Substance misuse services prescribe an opiate substitute, tailoring the dose to the individual's needs. When a pharmacist supervises the patient's consumption of methadone or buprenorphine in the pharmacy, it reduces the risk of the medication being traded on the street or accidentally being taken by children in the home. This also reduces the potential for criminal activity such as exploitation of a vulnerable person. The dispensing and supervision regimes are tailored to a service user's individual need and subject to ongoing review.

42 pharmacies are commissioned in Gateshead to provide supervised consumption services, 36 of whom have been actively supporting clients across localities as shown in table 10 below. Appendix 9c shows the locations of the pharmacies commissioned to provide this service.

The majority of pharmacies provide a daily contact which allows the pharmacy staff to get to know their clients and provides opportunities for health messages to be re-enforced. The staff may also react to other cues about the client's health status, signposting to other relevant services. It is important that pharmacies providing supervised consumption services are linked into the support services offered by the Public Health team, so that the pharmacy receives relevant updates and alerts. It is also important that pharmacies serving larger numbers of clients have sufficient trained staff to serve all customers' health needs. Gateshead Recovery Partnership may also prescribe medication for service users accessing support for alcohol which will also be dispensed from local pharmacy.

New additions to the services provided by the community pharmacies who are commissioned to provide supervised consumption include:

- Wellbeing Check ins
- Naloxone Distribution.

8.2.3. Wellbeing Check ins

Wellbeing Check Ins are an available service that can be provided for any service user of Gateshead Recovery Partnership who is dispensed Methadone or Buprenorphine (whether supervised or not) from a Gateshead pharmacy. This service recognises the valuable face to face contact and relationship the Pharmacy has with service users. This service can be provided at the request of Gateshead Recovery Partnership or initiated by the Pharmacy where a need is identified. Reasons for the wellbeing check in being initiated or requested may include:

- Contacts details check
- Concerns identified by Pharmacy
- Concerns raised by Gateshead Recovery Partnership
- New service user introductions

Information from the wellbeing check in is communicated to Gateshead Recovery Partnership by phone and via secure email so that it can inform their ongoing treatment.

8.2.4. Naloxone Distribution

Pharmacies commissioned to deliver supervised consumption can now also choose to distribute Naloxone. This service is not limited to Gateshead Recovery Partnership service users and is available to all Gateshead residents who may be at risk of opiate overdose, their family or carers, or those who may encounter people who are at risk of overdose.

8.2.5 Alcohol Identification and Brief Advice

Any Gateshead community pharmacy can now choose to deliver alcohol identification and brief advice (IBA) Service. Customers can be asked about their alcohol consumption during interventions such as medication reviews or using opportunities such as the Balance Health Harm campaign and can opt in to an intervention using a two-part AUDIT screening tool. Depending on the AUDIT scores, this will result in a brief intervention for alcohol, or, with consent, a referral to Gateshead Recovery Partnership if more a specialist support need is identified.

Locality	Number of pharmacies providing supervised administration of opiate substitutes service
Central	11
East	4
Inner West	8
South	6
West	7
Total	36

Table 9: Distribution of community pharmacy provision of supervised administration of opiates across Gateshead localities.

There is adequate provision of the supervised consumption of opiate substitutes service across Gateshead where it is needed. In many communities there is a choice of provider.

8.2.3. Sexual Health Services: Emergency Hormonal Contraception (EHC)

To meet public health targets to reduce teenage and unplanned pregnancy, a locally commissioned service was developed to make EHC more readily available. Although EHC is available without prescription the retail cost (around £25) means it is unaffordable for many of the target group, and it is not licensed for women under 16. Pharmacists providing the service undergo extra training and provide treatment against a Patient Group Direction in an attempt to reduce unintended pregnancies and subsequent terminations. Pharmacies can offer this service to those aged 13 years and over without the need for an appointment.

Pathways are in place for an immediate referral to community Sexual Health Services or Primary Care for Emergency Intrauterine Contraception as the first line option in response to Emergency Contraception.

Pharmacists are trained in prioritising and advising of the optimal pathway. There are also pathways that have been developed to support ongoing reliable contraception and processes that have been implemented to enable pharmacists to refer women into specialist contraceptive services for ongoing advice, treatment, and support.

There are 37 community pharmacies in Gateshead contracted to provide this service representing around 88% of the pharmacies in the borough. Between 1st April 2023 to 30th March 2024, 1425, provisions of EHC were dispensed through the scheme.

Appendix 9 demonstrates the distribution of pharmacy provision of EHC across the Gateshead area.

8.2.4. Sexual Health Services: Dual Screening and Condom Scheme

Gateshead Sexual Health service currently delivers clinic based integrated sexual health services from Trinity Square Health centre and Blaydon Health centre. Patients access the service by requesting a triage

phone call and will be allocated a timely appointment slot if required. This service is complemented by online access to a range of postal sample kits and free condoms. Offering dual screen kits as part of an EHC consultation helps support the aims of the National Chlamydia Screening Programme (NCSP), where focus is on reducing the harms from untreated chlamydia infection. The harmful effects of chlamydia occur predominantly in women and other people with a womb or ovaries, so this opportunistic screening enhances the Gateshead offer.

In the preceding 12 months, community based sexual health service partners (colleges, university halls, GPs & Pharmacies), provided 1315 Dual Screens kits to patients. 137/1315 (around 10% of the total) were supplied by community pharmacies.

The Gateshead Sexual Health: Free Condom Scheme was set up in April 2017 following the rebranding of the C-Card scheme following NICE recommendations. This scheme provides free condoms and dual screening kits (this tests for Chlamydia and Gonorrhoea) to all community-based participating services including, 11 community pharmacies in Gateshead, GP practices and other community venues. The condom distribution scheme has been scaled up and refined as a response to the pandemic. The size and scope of the service will be retained, and any community pharmacy interested is encouraged to contact the Sexual Health service for advice and guidance on partnering with the service.

All participating pharmacies have monthly contacts with the outreach team and channels of communication to services in locations such as the west of Gateshead actively encourage participation to mitigate access issues for residents.

There is good provision of sexual health services across Gateshead when the provision of services by community pharmacy contributing the broader access to services along with GP practices and other community venues. Community pharmacies which are open at the weekends, and outside regular service hours during weekdays, are seen to offer a needed service.

8.2.5. Stop smoking services

Gateshead's mainstream stop smoking service operates under a programme management function and is the responsibility of the local authority public health team. With the aim of utilising the broader workforce to deliver services which are sufficiently diverse in both professional skills, geographical location and accessible to all communities. GP Practices, community pharmacies, Gateshead FT QUIT Team and QEF outpatient pharmacy are commissioned to deliver stop smoking services. The QUIT team and outpatient pharmacy of Queen Elizabeth Hospital, provide a large proportion of stop smoking support across Gateshead supporting one in every two quit dates set in 2024.

Telephone support is available across the Borough however, there are significant geographical gaps in face-to-face service provision, which is delivered by GP practice and pharmacy, in particular the west of Gateshead has little or no service provision. Work is underway to increase the number of GP practices and pharmacies who actively deliver stop smoking support as some do not fully deliver the contracted service as they do not have staff trained to do so.

When considered with other providers of stop smoking services, coverage across Gateshead is broadly adequate, although access could be better especially in the west area with increased participation and training of staff within community pharmacies. Extended opening hours are available from some providers to ensure support is available to the working population who may not be able to access other services in normal working hours.

The most recent Health Equity Audit of Gateshead Stop Smoking Service also identified significant underrepresentation of many population groups known to have higher rates of smoking prevalence such as those with serious mental health conditions, substance misuse issues and from routine and manual occupations. The recent addition of two stop smoking coordinators and two stop smoking advisors to plan and deliver specialist interventions, has enabled the delivery of targeted, intensive support to priority groups, identified at a national level.

8.2.6. Health Checks

The NHS Health Check programme aims to improve health and wellbeing of eligible adults aged 40-74 years. The NHS Health Check is a national risk assessment and prevention programme that systematically targets the top seven causes of preventable deaths: high blood pressure, smoking, high cholesterol, obesity, poor diet, physical inactivity, and alcohol consumption. It is designed to spot early signs of stroke, kidney disease, heart disease, type 2 diabetes, and provide information about dementia. A national review of NHS Health Checks was undertaken in 2021 by Public Health England. It found that the Health Check Programme had achieved its aims, reaching 2 in 5 eligible people, including those at higher risk of disease, and delivering better outcomes for attendees. It makes recommendations to ministers on how the programme could go further in preventing non-communicable. One of these recommendations, the introduction of digital NHS Health Checks is currently being piloted in three Local Authority areas. The Public Health team at Gateshead Council commissions NHS Health Checks from GP practices and some pharmacies in the borough. Prior to the pandemic three pharmacies were active regarding NHS Health Checks. One pharmacy has been active since the pandemic, but following changes in ownership, there are currently no pharmacies who are active regarding NHS Health Checks. We are continuing to review our commissioning arrangements for NHS Health Checks.

8.3. Non-Commissioned Services

Community pharmacies provide a range of services which are neither part of the core contract with the NHS, nor commissioned by Local Authority Council or the ICB. These services may not be aligned with the strategic priorities of the ICB or the council but may be fulfilling a customer generated demand for non-NHS services and are often very valuable for certain patient groups e.g. the housebound. However, these services are provided at the discretion of the pharmacy owner and may or may not incur an additional fee.

As these services are not reimbursed by the NHS, the decision to provide the service is often a commercial one, especially when the service increases the pharmacy's overhead costs.

Non-commissioned services identified in the Pharmacist PNA questionnaire included:

- Collection of prescriptions from GP practices
- Delivery of dispensed medicines
- Dispensing of medicines into Monitored Dosage Systems.

It is worth noting that patients are often surprised to find that these are not NHS services.

8.3.1. Collection and delivery services

The majority (97.3 % in 2023/24) of prescriptions in Gateshead are generated electronically and sent directly to the pharmacy rather than being printed and handed to patients, therefore collection of prescriptions by pharmacies has significantly reduced since the PNA 2022 (Prescribing data from NHSBSA ePACT2).

Delivery of medicines is not currently a commissioned service provided by pharmacies. However, 69% of pharmacies responding to the survey indicated that they delivered dispensed medicines free of charge to all patients, 23% indicated that it is free of charge to some patients, and 8% said they charge all patients for this service.

Ten respondents to the survey specifically expressed that they valued their pharmacies' delivery service.

8.3.2. Monitored Dosage Systems

Pharmacies are expected to make suitable arrangements or "reasonable adjustment" for patients who have disabilities which ensure that they can take their medicines as instructed by the doctor in line with the Equality Act 2010. This will sometimes require the use of monitored dose systems (MDS) to help patients take complicated drug regimens these are often seen as weekly or monthly cassettes with medication placed in boxes relating to the day and time of the day that the medicine is to be taken.

Family or carers may ask for medicines to be dispensed in MDS, without any assessment of whether this is the most appropriate way of providing the help that the patient needs to safely take their medicines. This is an ideal opportunity for the pharmacy service to engage with the person or their representative to ascertain the most appropriate delivery system for medicines to suit their needs.

NICE guidance NG67 published in March 2017 recognised the role that pharmacists play in supporting people in the community and recommended that "use of a monitored dosage system should only be when an assessment by a health professional (for example, a pharmacist) has been carried out" ⁽²³⁾.

The majority of pharmacies (90%) responding to the survey provide medicines in MDS. Most said it was free of charge for all patients (79%), and the remainder (21%) said it was free of charge to some patients following assessment. Details of when a charge may be incurred was not included in the survey.

The Health and Wellbeing Board recognises the appetite by community pharmacists in the area for further utilisation of pharmacy services as part of community healthcare provision.

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9. Current and Future pharmacist role

Gateshead HWB values the contribution that community pharmacy makes to the local health economy through their essential services, advanced services, and locally commissioned services. They are an important part of the medicines optimisation approach that helps patients to improve their outcomes, take their medicines correctly, avoid taking unnecessary medicines, reduce wastage, and improve medicines safety.

Since the PNA 2022 publication, the expansion of advanced services to augment the core essential services provided by community pharmacy provide further opportunity for provision of services. In particular, the Pharmacy First, Hypertension Case Finding and Pharmacy Contraception services broaden the range of accessible services in addition to some of the more established advanced services such as the New Medicine Service and the Flu vaccination service. All of these continue to enhance the role of community pharmacy as being integral to the support of good medicine practice in the community.

Gateshead City Council's public health team strongly supports the role that community pharmacy plays in promoting health and healthy lifestyle and in delivering evidence-based interventions for stop smoking, sexual health, and drug misuse.

The national vision for community pharmacy is in line with the local strategy and aspirations that community pharmacy has a critical role to play in Gateshead's health system. It is essential that community pharmacy continues to be recognised and supported to support the health needs of the population of Gateshead and that the people of Gateshead are aware of and fully utilise the services available from their Community Pharmacy services.

The evidence suggests demand on community pharmacy and on community pharmacists and their staff is increasing. The shortage of local pharmacists is acute; evidence suggests there is an increased public demand on pharmacies and their staff, and this has been further exacerbated by the demand for, and recruitment of community pharmacists (and other staff) employed within PCNs and other pharmacy services. It is important to note the pressure that community pharmacies and their staff are under as a result of these two factors. Whilst community pharmacies welcome the introduction of new commissioned services, and have been tenacious, innovative, and agile when launching them, locally, it is important for commissioners to be aware of the huge demands being placed on community pharmacy and the capacity of community pharmacy. ⁽³⁹⁾

10. Reflection on PNA 2022 recommendations

The 2022 PNA concluded that there was adequate provision of pharmacies across Gateshead Monday to Friday 9am to 5pm. Services are more limited on Saturdays and that the pharmacies that opened on Saturday mornings and afternoons were sufficient for working residents to access pharmacy services. Sunday and evening provision across Gateshead was found to be limited and mainly dependant on supermarket pharmacies. Although there had been a reduction in pharmacy provision in Gateshead since the last PNA, there continued to be adequate access to community pharmacies during the weekdays and weekends, although this is more limited in the evenings and on Sundays.

2025 response: The population of Gateshead was found to have increased by less than 1% since the previous PNA. In addition, there has been changes in pharmacy provision across Gateshead, namely four less pharmacies providing service and a reduction in supplementary hours provision the current provision. However, there continue to be adequate access to community pharmacies during the weekdays and weekends although this is reduced in the evenings and on Sundays.

As in the previous PNA (2018), in 2022, the HWB continued to recommend local discussions with the LPC regarding possible support to evening or weekend opening to ensure patients with minor ailments and/or require medication to be dispensed following consultation with and extended access service, out of hours GP or referral by 111 for emergency medication can access pharmacy support.

2025 response: Developments such as the inclusion of the discharge medicines service as an NHS essential service and Pharmacy First being an NHS advanced service that is delivered by all community pharmacies in Gateshead will enable improved access to pharmacy services as an alternative route to healthcare advice for residents. However, these services are only available within existing pharmacy opening hours, which have been reduced since the last PNA. As in previous PNAs, the HWB recommends consideration to discussions and review of the pharmacy services out of hours are recommenced.

The HWB recognised that community pharmacies in Gateshead across the majority of localities, dispense significantly higher numbers of prescriptions than the national average, however these pharmacies are able to meet the current need.

2025 response: The HWB continue to recognise that community pharmacies in Gateshead dispense significantly higher numbers of prescriptions than the national average and are *aware of the possible destabilisation of the system should further pharmacy premises be introduced into the borough.*

There was recognition of the benefit of active participation of the pharmacy services in the locally commissioned services and also that other pharmacies expressed appetite in further provision of services.

2025 response: There continues to be good support by community pharmacies of the local commissioned services, such as specialist drug access services, services for drug users: needle exchange and supervised emergency contraception services and smoking cessation.

11. Stakeholder Engagement and Consultation

11.1. Customer and provider engagement

To inform the PNA process, questionnaires were sent out to customers and community pharmacy providers to gain insight into current pharmacy services.

11.1.1. Customer engagement

A short survey (Appendix 3) was developed to gather information from the public about the pharmacy services they currently use and would use in the future if they were commissioned. Each pharmacy in Gateshead was asked to display the surveys on their counter and encourage customers to complete them from 9 December 2024 to 19 January 2025. The survey was also made available online through the Council's online consultation portal.

Full details of the public survey and the findings are described in Appendix 3.

355 people responded to the survey. There were multiple responses from every ward in Gateshead.

The majority (81%) of respondents were over 55 years old (63% were over 65 years old) and only 6 (2%) were under 34 years old. This may be a reflection that the aging population is more likely to be prescribed medications and therefore visit their community pharmacy.

Most respondents to the survey were either regular pharmacy users, who used a pharmacy monthly or more often (79%) or used a pharmacy at least every three months (15%) with 94% of responding that they either always or usually use the same pharmacy service. The majority (93%) of respondents typically use a local community or high street pharmacy and a small proportion use a supermarket pharmacy (2%) or an online pharmacy (2%).

There were 121 unprompted comments made by respondents. 39 of these comments referred to satisfaction with the good service of the pharmacy they use. 13 comments requested increases to opening days/times, 9 mentioned improvements needed related to privacy of conversations, and a further 9 to stop closing pharmacies or open more. 8 comments were made about improving the availability of medicine and vaccines at pharmacies, including some comments about being able to access medicine without having to make a GP appointment. A further 8 comments suggested a need for better promotion of the services that are available.

Information regarding access and the range of pharmacy services was collected within the survey and the findings reflected within relevant sections in this document.

Given the small number of respondents, and their age profile, we cannot be confident that this survey is representative of the views of the wider population of Gateshead about community pharmacy. Nevertheless, it is the only such intelligence we have about people's views.

11.1.2. Community pharmacy survey

An online survey was made available to all pharmacies in Gateshead, with support from the Local Pharmaceutical Committee. All 42 Gateshead pharmacies responded to the survey and full details of the responses can be found in Appendix 4.

The PNA Steering group agreed not to collect information relating to the NHS essential and advanced service provision or regarding service opening times or facilities as this information is available via the national

service contract via NENC ICB. Therefore, the majority of the survey focussed on the additional services that the pharmacy providers were currently commissioned to deliver.

Regarding access to the pharmacy premises, of the 42 pharmacies that responded, 35 had entranceways that allowed for unaided wheelchair access, with a further 2 planning to address the issue within 12 months. 41 had a consultation room which met NHS England requirements. Most of those rooms (38) had wheelchair access, with 1 further pharmacy planning to make their room accessible within 12 months.

In terms of provision of, or willingness to provide additional advanced or locally commissioned services, only 3 Gateshead pharmacies had stopped providing these services within the last 3 years. 8 pharmacies suggested there were other services they feel could benefit people if they could offer them now. The services suggested including Cholesterol check; Diabetes check; Gluten free service; Hep C vaccinations; Stop smoking PGD; Weight management service; Widen contraception service to include injections.

Almost all (39) pharmacies in Gateshead provide a prescription delivery service. A large number of pharmacies (27) provide prescription deliveries free of charge to all patients. 9 require patients meet certain criteria to qualify for free delivery e.g. being housebound. 3 require all patients to pay for delivery.

11.2. Consultation

12. Conclusions and Recommendations

12.1. Statement of Pharmaceutical Needs Assessment

After considering all the elements of the PNA, Gateshead Health and Wellbeing Board makes the following statements:

- For the purpose of this PNA, Gateshead Health and Wellbeing Board has agreed that necessary services are defined as the essential services in the NHS Community Pharmacy Contractual Framework (see section 2).
- For the purposes of this PNA, Gateshead HWB has determined that relevant services are advanced services and enhanced services within the NHS Community Pharmacy Contractual Framework.
- *Whilst access is considered adequate in all localities, better access to essential services in East and West localities would be secured by further provision on weekday evening after 6pm and by some provision on Sundays. As with previous PNA's, Gateshead HWB request that NENC ICB and LPC seek resolution to improve access during these times, such as consideration of a late opening rota provision in these areas.*
- There are no gaps in respect of securing improvements, or better access, to the other relevant services i.e. advanced or enhanced services been identified in any of the localities.

12.2. Conclusions

There are 42 pharmacies in Gateshead, made up of 38 standard contract (40-hour) pharmacies, one former 100-hour service and 3 distance selling pharmacies, located primarily in areas of higher population density with 98.2% of residential addresses being within 1 mile of a community pharmacy. There is more than one pharmacy in most villages and urban areas within Gateshead, allowing patient choice and access to enhanced services. In addition, there is one rural general practice provides dispensing services to some of their patients.

There has been a reduction of four 40-hour pharmacies since the publication of the PNA 2022. In addition, there have been a number of changes in ownership, in provision of supplementary hours, and in Distance Selling Pharmacies.

Generally, there is adequate provision in 2025 of pharmacies across Gateshead, Monday to Friday, 9am to 5pm. However, as previously identified in PNA 2022 and subsequent supplementary statements, services continue to be more limited in weekday evenings and over weekends. On Saturdays, 62% of pharmacies are open in the mornings and 26% are open on Saturday afternoons, allowing working residents to access pharmacy services. Sunday and evening provision across Gateshead is more limited. Access to pharmacies that are open for longer during the day and the weekend is greater in the Central, Inner West and South localities of Gateshead with the East and West localities having limited Saturday morning and no Sunday access within the locality. As with previous PNA's, Gateshead HWB request that NENC ICB and LPC seek resolution to improve access during these times, such as consideration of a late opening rota provision in these areas.

Concerns remain from the previous PNA 2022 about the accessibility of pharmacy services outside normal hours, which remains largely unchanged. This is particularly the case in the East and West localities. Access to essential and advanced pharmacy services in the vicinity of the urgent care provision in Gateshead appears adequate, however, better access to these services would be secured by the review of provision on weekday evenings and weekends.

Access to pharmacy in respect of urgent care is adequate but the HWB board recommends that this should be monitored in light of pharmacy changes highlighted throughout the 2025 PNA.

The longer hours of access to pharmacy services are provided by the one former 100-hour pharmacy provider and a number of community pharmacies provide extended hours including 4 community pharmacies that provide services for between 51 - 60 hours per week and 6 that provide services between 61-80 hours per week.

The HWB recognise that community pharmacies in Gateshead across the majority of localities, dispense significantly higher numbers of prescriptions than the national average, however evidence suggests within the PNA 2025 these pharmacies are able to meet the current need.

Services currently commissioned from pharmacies in Gateshead include emergency contraception, smoking cessation, needle exchange, supervised consumption of methadone, minor ailments, and specialist palliative care drugs. There is adequate provision of all these services across Gateshead.

Although the more rural areas in the West of Gateshead have a more limited pharmacy provision, the findings regarding access to services by foot and public transport include these areas and demonstrate there is adequate access to services in terms of travel time for the broader population of Gateshead.

The areas of Gateshead that are within the 30% most deprived areas in the country account for 52% of the areas in Gateshead. However, the majority of pharmacy services are seen to be located near to or in these areas. From this information, although there is in general, adequate access to community pharmacy services across the area, the east and west localities of Gateshead are less well served both with pharmacy premises and also the range of pharmacy opening hours.

The finding described in this PNA is that there continues to be an adequate delivery of Pharmacy Advanced Services across Gateshead. All pharmacies provide the Pharmacy First, and NMS services and there is good uptake in the delivery of other services such as the Flu vaccination, hypertension case finding and pharmacy contraception service. Provision of support for people requiring Appliances and Stoma care is more limited in the area but this may reflect the required needs of the local community and access via specialist providers.

There is also adequate provision of the locally commissioned services by the NENC ICB across Gateshead.

Appendices

Appendix 1: Glossary of Abbreviations

AUR	Appliance Use Review
BME	Black or Minority Ethnic group
CHD	Coronary Heart Disease
COPD	Chronic Obstructive Pulmonary Disease
CPCF	Community Pharmacy Contract Framework
CVD	Cardiovascular Disease
DAC	Dispensing Appliance Contractor
DHSC	Department of Health and Social Care
DSR	Directly Standardised Rate
EDI	Equality and Diversity Impact Network
ePACT2	Electronic Prescribing Analysis and Cost Tool
EPS	Electronic Prescription Service
GatDoc	Gateshead Doctors Out of Hours Service
GP	General Practitioner
HC2	Health Care Certificate (full help with health costs)
Hep C	Hepatitis C
HLP	Healthy Living Pharmacies
HWB	Health and Wellbeing Board
ICB	Integrated Care Board
ICS	Integrated Care System
IMD	Index of Multiple Deprivation
JSNA	Joint Strategic Health Needs Assessment
LFD	Lateral Flow Device testing kit
LPC	Local Pharmaceutical Committee
LPS	Local Pharmaceutical Service
LSOA	Lower Layer Super Output Area
LTC	Long Term Conditions
MECC	Make Every Contact Count
MDS	Monitored Dosage System
MUR	Medicines Use Review
NENC ICS	North-East and North Cumbria Integrated Care System
NENC ICB	North-East and North Cumbria Integrated Care Board
NHS	National Health Service
NHS BSA	National Health Service Business Services Authority
NHSE&I	NHS England and NHS Improvements
NICE	National Institute for Health and Care Excellence
NMS	New Medicine Service
NUMSAS	NHS Urgent Medicine Supply
OHID	Office for Health Improvement & Disparities (Previously PHE)
ONS	Office for National Statistics
PCN	Primary Care Network
PCS	Pharmacy Contraception Service
PCO	Primary Care Organisation
PGD	Patient Group Direction
PhAS	Pharmacy Access Scheme
PHE	Public Health England (now replaced by OHID)
PhIF	Pharmacy Integration Fund
PNA	Pharmaceutical Needs Assessment
POCT	Point of Care Testing
POPPI data	Projection Older People Population Information
PQS	Pharmacy Quality Scheme

PSNC	Pharmaceutical Services Negotiating Committee
PWID	People who inject drugs
RAF	Reasonable Adjustment Flag
QE Hospital	Queen Elizabeth Hospital (Gateshead)
SCR	Summary Care Records
STI	Sexually Transmitted Infection
SAC	Stoma Appliance Customisation Service
SMR	Structured Medicine Review
UKHSA	United Kingdom Health Security Agency
UTI	Urinary Tract infection
WAF	Winter Access Funding

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Appendix 2: Consultation on the Draft Pharmaceutical Needs Assessment

[THIS WILL BE COMPLETED POST-CONSULTATION].

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How do you use your local pharmacy?

We'd like your help to improve what is on offer in our local pharmacies by answering a few questions about the way you use them.

Your responses will help us to write a local Pharmaceutical Needs Assessment, which will help to ensure that your local pharmacy provides the services you need both now and in the future.

Once you've answered the questions below just hand it to a member of staff behind the counter. Alternatively, take this form away with you and return it later, or visit www.gateshead.gov.uk/consultationsnew to complete it online. The survey closes on 19th January 2025.

Thank you for your help - **Gateshead Health and Wellbeing Board**



Complete it
online - Scan
the QR Code



How you use pharmacies

1. How often do you use a pharmacy for your health care needs (e.g. for prescriptions, medicines, advice)? At least...?

- ☐ Once a week ☐ Monthly ☐ Every 3 months
☐ Every 6 months ☐ Once a year ☐ Less often ☐ Never

If you answer **Never**, Go to **Q15**

2. Do you always use the same pharmacy?

- ☐ Always
☐ Usually
☐ No

3. Thinking about the pharmacy you use most, what type is it?

- ☐ Local community or High Street
☐ Supermarket
☐ Online
☐ Other

4. How do you usually access it?

- ☐ Car or taxi
☐ On foot
☐ Public transport
☐ Online
☐ Telephone
☐ Other

5. If you visit in person, is it easy or difficult to get there on foot or public transport?

- | | On foot | Public transport |
|------------|--------------------------|--------------------------|
| Easy | <input type="checkbox"/> | <input type="checkbox"/> |
| Difficult | <input type="checkbox"/> | <input type="checkbox"/> |
| Don't know | <input type="checkbox"/> | <input type="checkbox"/> |

6. Do you use any of these pharmacy services?

- ☐ Electronic prescriptions
☐ Medicines delivered to your home
☐ Phone for advice
☐ Virtual consultations e.g. Zoom meetings

7. Have you ever needed something from a pharmacy, but could not access it at the time?

- ☐ Yes, it was closed
☐ Yes, it was too busy
☐ Yes, there were physical access issues e.g. stairs
☐ Yes, for another reason
☐ No

If you answer **No**, Go to **Q10**

8. What did you need?

- ☐ Prescribed medicines
☐ Emergency supply of medicines
☐ Over the counter medicines
☐ Medicine or healthcare advice
☐ Other

9. What did you do when you realised you could not access it?

- ☐ Waited until the pharmacy was open
☐ Contacted the pharmacy by phone, email or their website
☐ Went to another pharmacy
☐ Went to a walk-in centre
☐ Went to a hospital
☐ Rang emergency services / NHS 111 and was referred to a pharmacy
☐ Other

10. When you visit a pharmacy, which services do you use and are there any that you would be likely to use if they were available?

	I use this	Likely to use if available		I use this	Likely to use if available
General pharmacy services e.g. prescriptions, purchasing over the counter medicines	<input type="checkbox"/>	<input type="checkbox"/>	Smoking, alcohol or weight management services	<input type="checkbox"/>	<input type="checkbox"/>
Advice or consultation from pharmacist	<input type="checkbox"/>	<input type="checkbox"/>	Sexual health services e.g. chlamydia testing or treatment, condoms, emergency contraception, pregnancy tests	<input type="checkbox"/>	<input type="checkbox"/>
Think pharmacy first (rapid access to treatment for minor ailments without having to make an appointment to see your GP)	<input type="checkbox"/>	<input type="checkbox"/>	Substance misuse services and needle exchange	<input type="checkbox"/>	<input type="checkbox"/>
Out of hours supplies, emergency supplies or palliative care (in exceptional circumstances)	<input type="checkbox"/>	<input type="checkbox"/>	Health checks, screening or monitoring	<input type="checkbox"/>	<input type="checkbox"/>
			Vaccine administration (Flu, Covid-19 or others)	<input type="checkbox"/>	<input type="checkbox"/>

11. Do you feel comfortable talking to your pharmacist about health problems?

☐ Yes ☐ No ☐ Don't Know

12. When you get a new medicine, does the pharmacist explain how and why you should use it?

☐ Yes ☐ No ☐ Don't Know

13. Has a GP or NHS 111 ever referred you for a pharmacy consultation about a health issue?

- ☐ Yes, I contacted the pharmacy and resolved it
☐ Yes, I contacted the pharmacy, but still had to visit the GP/other healthcare about the issue
☐ Yes, but I didn't contact the pharmacy
☐ No

14. Do you use the NHS app for any of the following pharmacy services?

- ☐ Nominating your usual pharmacy to dispense prescriptions
☐ Ordering prescriptions
☐ Booking a flu/covid vaccine appointment
☐ To see when prescription medicines are ready for collection

15. What do pharmacies most need to improve?

- ☐ Medicine availability ☐ Increase opening times
☐ Product availability ☐ Better waiting times
☐ More staffing ☐ NHS paid for delivery
☐ Communication

16. What else would encourage you to use pharmacy services?

17. Your age?

18. Your postcode?

19. What is your sex?

- ☐ Male
☐ Female

20. Is the gender you identify with the same as your sex registered at birth?

- ☐ Yes
☐ No

If 'No', please tell us your gender identity

21. What is your ethnicity?

☐ White British ☐ White Other ☐ Mixed ☐ Asian ☐ Black ☐ Other

Results of the Public Survey of Pharmacy Customers

When We Consulted

9 December 2024 – 19 January 2025

How We Consulted and Who Responded

A short paper survey was circulated to all Gateshead pharmacies by the Local Pharmaceutical Committee Members on the PNA Steering Group. Pharmacies were asked to display the survey on their counters and encourage customers to complete it. An on-line version of the survey was also built and accessible via the Council's website.

355 people responded to the survey. There were multiple responses from every ward in Gateshead. The spread of responses from each locality is shown in the table.

Locality	Number of people
Central	62
East	40
Inner West	79
South	68
West	64
Postcode incomplete or Not in Gateshead	33

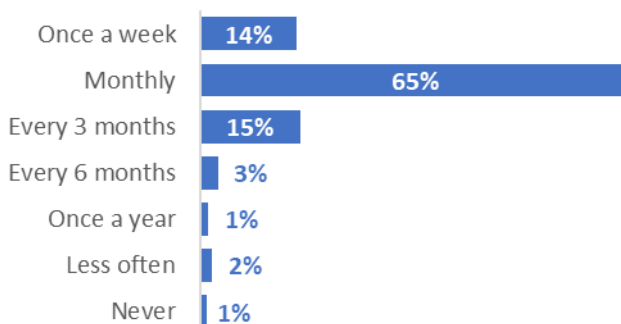
Survey Results

Most respondents to the survey were regular pharmacy users who used a pharmacy either as frequently as once a week (14%) or monthly (65%). The remaining respondents used a pharmacy every 3 months (15%), every 6 months (3%), at least once a year (1%), or less often (2%). A small number of respondents (just under 1%) had never used a pharmacy at all.

94% of respondents either always or usually visit the same pharmacy.

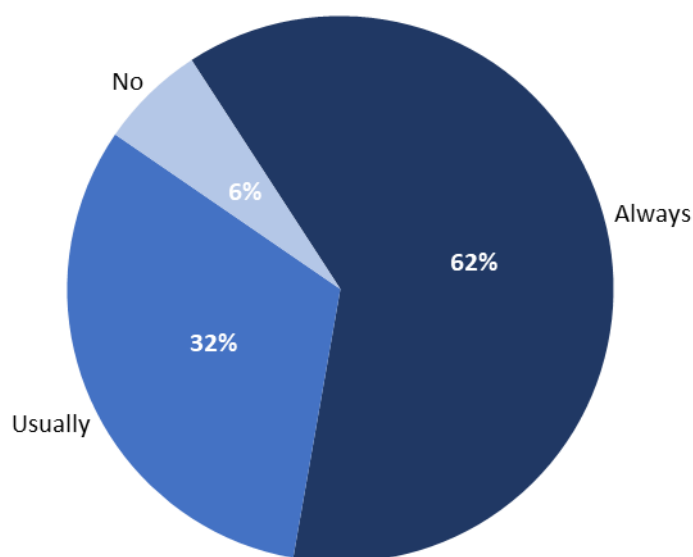
How often do you use a pharmacy for your healthcare needs?

Base = 355

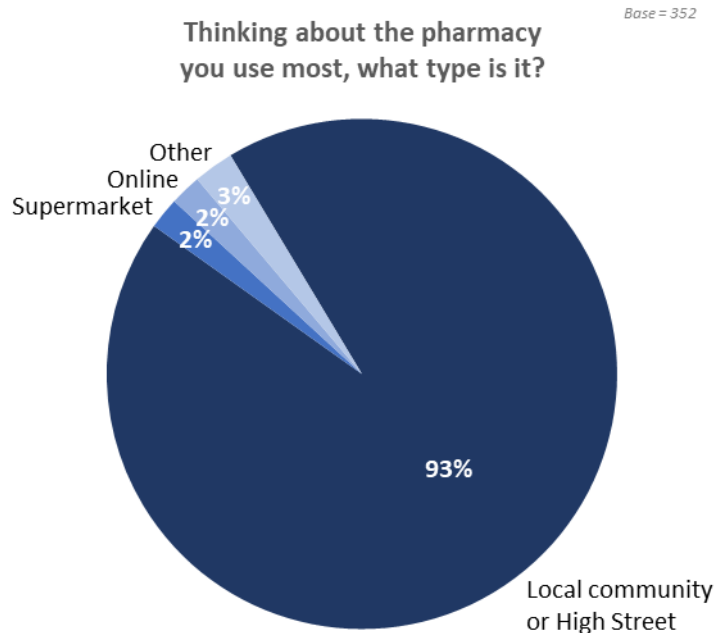


Do you always use the same pharmacy?

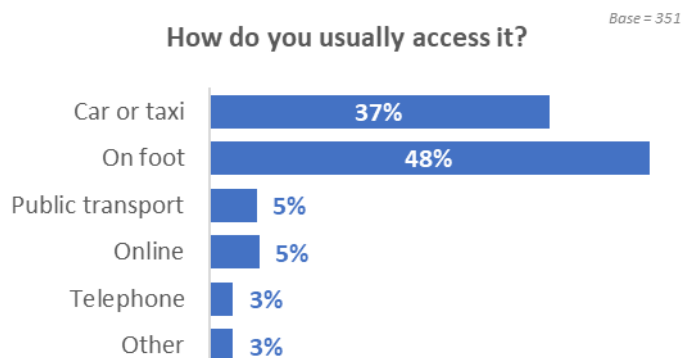
Base = 352



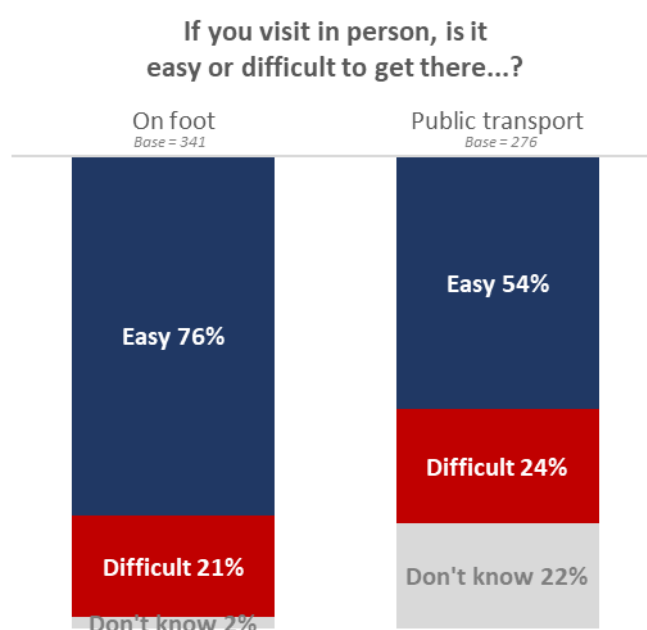
The majority (93%) of respondents typically use a local community or high street pharmacy. A small proportion use a supermarket pharmacy (2%), an online pharmacy (2%) or what they define as some other type of pharmacy (3%).



Half (48%) of respondents usually travel to their pharmacy on foot. More than a third (37%) travel by car or taxi. Relatively few use public transport (5%), the Internet (5%) or the telephone (3%).



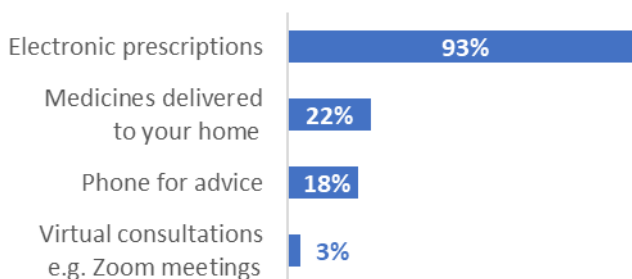
When asked about ease of travelling to their usual choice of pharmacy on foot or by public transport, 21% said it was difficult to get to on foot and 24% said it was difficult on public transport. The majority said it was easy using either method, although a fifth of respondents didn't know how easy or difficult it would be on public transport, perhaps because they would typically use another method such as on foot or by car.



The electronic prescription service is well used by respondents (93%). Around fifth of respondents have medicines delivered to their home (22%), and phone a pharmacist for medical advice (18%). Very few (3%) are using virtual consultations.

Do you use any of these pharmacy services?

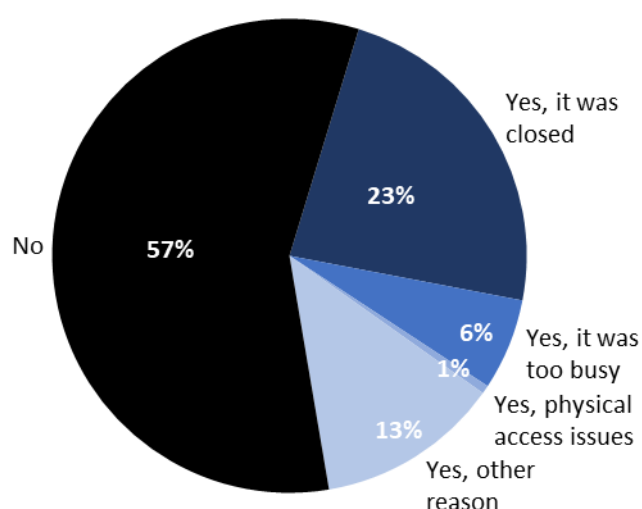
Base = 305



A large proportion (43%) of respondents said they have needed something from a pharmacy in the past but found they couldn't access what they needed. Over half of those respondents had gone at a time when the pharmacy was closed, however some had found that the pharmacy was too busy at the time they called, and quite a number (who said there was 'another reason') found the item they required was not in stock or the prescription they had been given was not yet ready for collection.

Have you ever needed something from a pharmacy, but could not access it at the time?

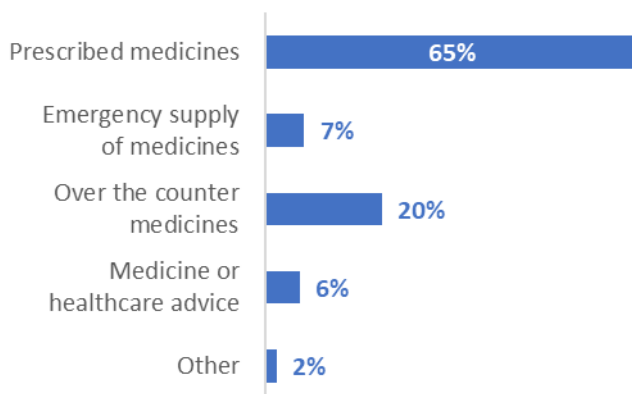
Base = 352



Of 148 respondents who said they had needed something from a pharmacy in the past but found the pharmacy was closed and they could remember what they needed, two thirds of them (65%) had wanted a prescription, a fifth (20%) over the counter medicines, and the remainder wanted an emergency supply of medicines (7%), medicine or healthcare advice (6%), or something else (2%).

What did you need?

Base = 148



Over a third (37%) of respondents, on realising that the pharmacy was closed, waited until it was open. A further third (34%) went to another pharmacy. About a fifth (21%) selected 'Other', with many of these stating they simply returned at another time or had to wait for restock, others went to a GP or supermarket. As shown in the chart, small numbers of respondents contacted the pharmacy in another way, went to a walk-in centre or a hospital, or rang emergency services/NHS 111.

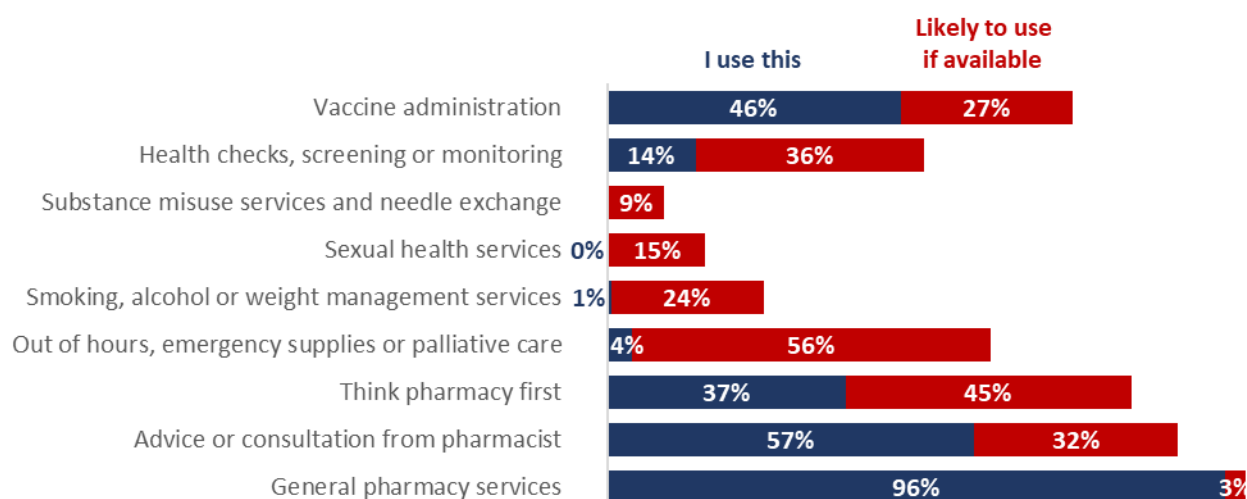


As would be expected, almost all respondents (96%) said they use general pharmacy services such as collecting prescriptions. Over half (57%) said they seek advice or consultation with the pharmacist, almost half (46%) have vaccines administered such as the flu vaccine or Covid-19 vaccine, and over a third (37%) use the Think Pharmacy First service where pharmacists can give advice and medicine unless a condition is serious enough to require referral to a GP.

Of services that people said they would likely use if they were available at their pharmacy, over half (56%) said out of hours, emergency supplies or palliative care, just under half (45%) said Think Pharmacy First, a third (32%) said advice or consultation with a pharmacist, and a quarter (27%) said vaccine administration and (24%) smoking, alcohol or weight management services.

What pharmacy services are used or would likely be used if available?

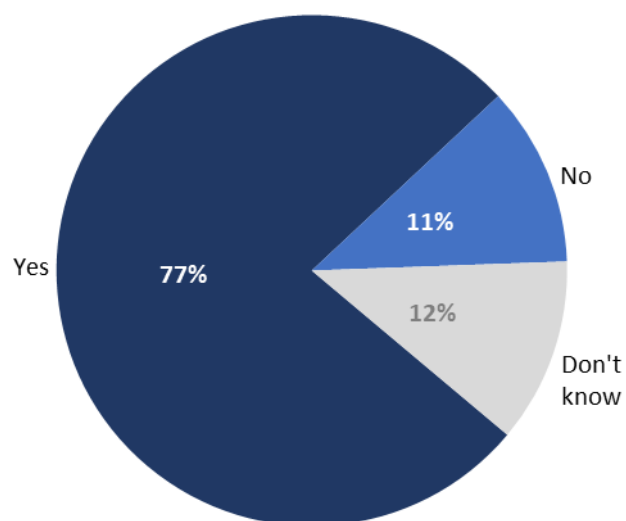
Base = 348



A large proportion of respondents (77%) said they felt comfortable talking to their pharmacist about health problems. A smaller proportion (12%) did not know, and a similar proportion to that (11%) said that they did not feel comfortable talking to their pharmacist about health problems.

Do you feel comfortable talking to your pharmacist about health problems?

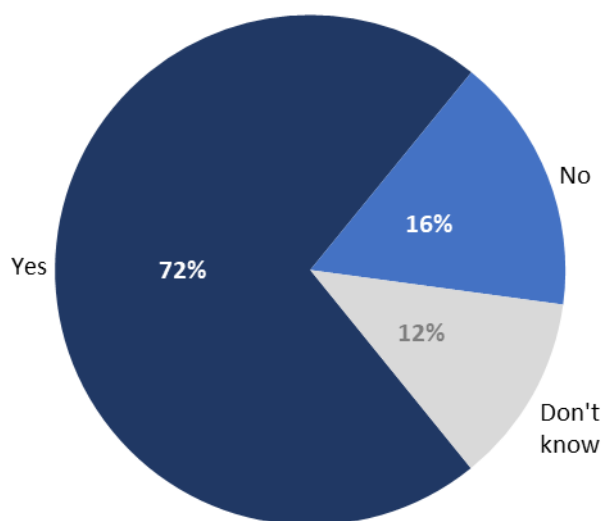
Base = 351



Nearly three quarters of respondents (72%) said their pharmacist explained how and why they should use any new medicine they receive. However, quite a few (16%) said that their pharmacist did not do that.

Does the pharmacist explain how and why you should use new medicine?

Base = 350



The majority of respondents (82%) had never been referred to a pharmacy consultation by a GP or NHS 111. Of those who had been referred, half said their health issue was resolved, but the other half still had to visit their GP or another form of healthcare.

Has a GP or NHS 111 ever referred you for a pharmacy consultation about a health issue?

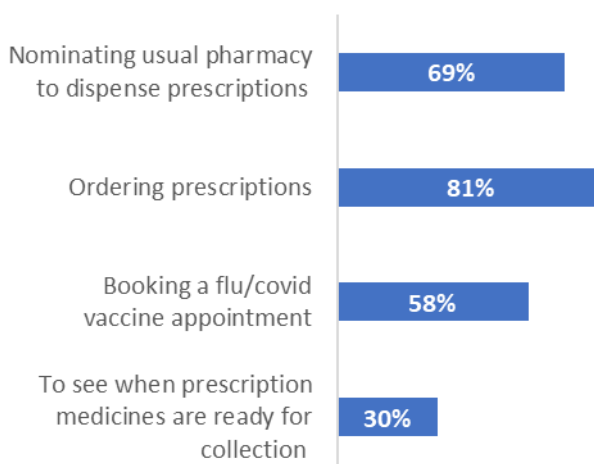
Base = 348



The most popular use of the NHS app was for ordering prescriptions (81%), followed by nominating the usual pharmacy to dispense prescriptions (69%), then booking vaccine appointments (58%), and then much lower usage of the app to see when prescriptions are ready for collection (30%).

Do you use the NHS app for any of the following pharmacy services?

Base = 253



When asked what pharmacies most need to improve, half of respondents (50%) said increase opening times, followed by medicine availability (41%), more staffing (36%) and product availability (28%). Fewer respondents said better waiting times (19%), communication (15%) and NHS paid for delivery (11%).

What do pharmacies most need to improve?

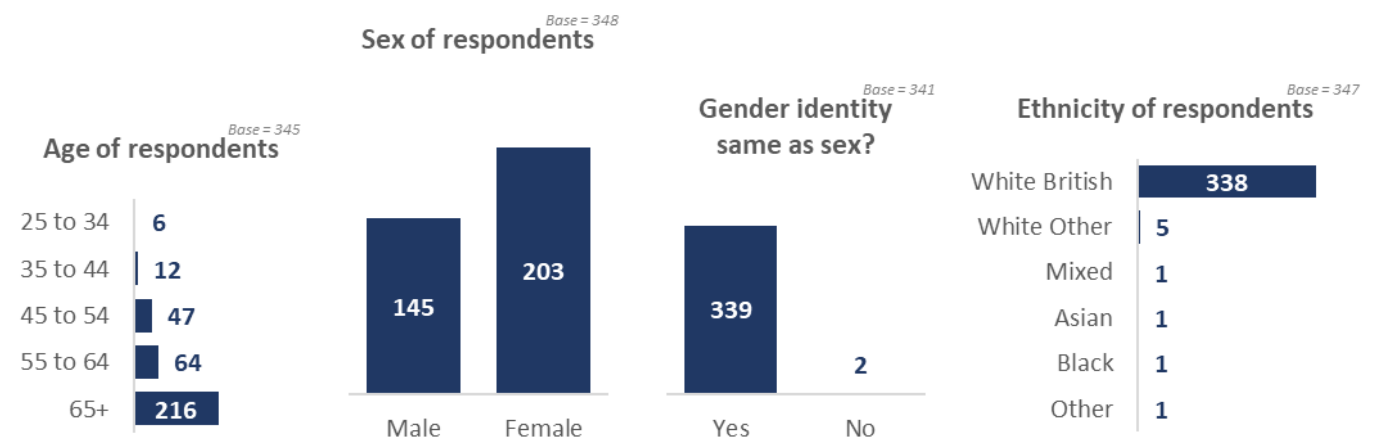
Base = 246



There were 121 additional unprompted comments made by respondents. 39 of these comments made reference to satisfaction with or the good service of the pharmacy they use.

13 comments requested increases to opening days/times, 9 mentioned improvements needed related to privacy of conversations, and a further 9 to stop closing pharmacies or open more. 8 comments were made about improving the availability of medicine and vaccines at pharmacies, including some comments about being able to access medicine without having to make a GP appointment. A further 8 comments suggested a need for better promotion of the services that are available.

Characteristics of Respondents



DRAFT

PNA 2025 Pharmacist Survey

Premises and contact details

Please enter your premises and contact details below...

Contractor code (ODS code)

Name of contractor (i.e. name of individual, partnership or company owning the pharmacy business)

Trading name

Address of contractor pharmacy

	Yes	No	Possibly
Is this pharmacy one which is entitled to Pharmacy Access Scheme payments?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Is this pharmacy a former 100-hour pharmacy?	<input type="checkbox"/>	<input type="checkbox"/>	
Does this pharmacy hold a Local Pharmaceutical Services (LPS) contract? (i.e. it is not the 'standard' Pharmaceutical Services contract)	<input type="checkbox"/>	<input type="checkbox"/>	
Is this pharmacy a Distance Selling Pharmacy? (i.e. it cannot provide Essential Services to persons present at or in the vicinity of the pharmacy)	<input type="checkbox"/>	<input type="checkbox"/>	

Pharmacy premises shared NHSmail account

Pharmacy telephone

Pharmacy website address (please write 'no website' if none exists)

Consent

Please renew our permission to hold the data you provide and use this to contact you if necessary. Consent is for the LPC, Health and Wellbeing Board and Local Authority to access this data for the purposes of updating the Pharmaceutical Needs Assessment and other related documents.

Do you consent to the use of the data you provide?

- ☐ I consent to the use of the data provided to update the Pharmaceutical Needs Assessment and other related documents as described above

Opening Hours Information

Pharmacy opening hours (both Core and Supplementary) are an important part of understanding the access to pharmaceutical services in our area. We will use the information held by the ICB NENC (formerly NHS England) i.e. the statutory Pharmaceutical List, when making our assessment.

IMPORTANT If you think your opening hours on the Pharmaceutical List may be incorrect, then the PHARMACY CONTRACTOR MUST contact the ICB to apply or notify any changes. For convenience, their contact email is nencicb-tv.pharmacyandoptometry@nhs.net.

Access

Q1. Does the pharmacy entrance allow for unaided wheelchair access?

- ☐ Yes ☐ No ☐ No, but plans are in place to address this in the next 12 months

Q2. Does your pharmacy have a consultation room that meets NHS England requirements?

- ☐ Yes
☐ No, the pharmacy is a Distance Selling Pharmacy
☐ No, NHS England have approved our exemption as our premises are too small for a consultation room
☐ Other

Q3. Is your pharmacy consultation room accessible by wheelchair?

- ☐ Yes ☐ No ☐ No, but plans are in place to address this in the next 12 months

Q4. One potential barrier to accessing services at a pharmacy can be language - Do you use a Translation Service to support your patients?

- ☐ Yes
☐ No, I know how to access translation services, but have never needed to use them
☐ No, I don't know how to access translation services

Q5. Are any languages spoken in addition to English by pharmacy staff?

- ☐ Yes
☐ No

Commissioned Services

The PNA considers current service delivery and possible new services that could be developed. We will use information provided by the service commissioner described below for each of these services when making our assessment.

- **Advanced and National Enhanced Services:** The ICB NENC hold data on pharmacies accredited/registered and delivering these services.
- **Locally Commissioned Services - ICB:** The ICB NENC and the LPC hold data on pharmacies accredited/registered and delivering these services.
- **Locally Commissioned Services - Local Authority:** These are services commissioned by either Local Authorities, or by other providers who have been commissioned by the Local Authority.

Q6. Has your pharmacy stopped providing any advanced or locally commissioned / enhanced services within the last 3 years?

- ☐ Yes
☐ No

Q7. Are there any pharmaceutical services you would not be able or willing to provide at the moment, even if suitable training and funding was available?

☐ Yes

☐ No

If 'Yes', please give examples and reasons why you would not provide them:

Q8. Are there any pharmaceutical services you think would offer people improvement or better access to this aspect of pharmaceutical care if it were possible to provide it from your pharmacy now?

☐ Yes

☐ No

If 'Yes', please give examples of the services:

Other Non-Commissioned Services

Delivery services

We know medicine delivery services are not part of the NHS terms of service for dispensing, however we need to understand what the local population may currently have access to.

Q9. Does your pharmacy provide a prescription delivery service?

☐ Yes

☐ No

If 'Yes', do patients pay or is it free of charge?

☐ Free of charge for all patients

☐ Free of charge for some patients (e.g. housebound)

☐ All patients are required to pay for this service

Q10. Does your pharmacy provide a service to provide medication in a monitored dosage system?

☐ Yes

☐ No

If 'Yes', do patients pay or is it free of charge?

☐ Free of charge for all patients on request

☐ Free of charge for some patients following assessment

☐ All patients are required to pay for this service

Independent prescribing services

Q11. Are there pharmacists who work in your pharmacy who have or are currently working towards an Independent Prescribing (IP) qualification?

☐ Yes

☐ No

☐ No, but intend to in the next 12 months

Q12. Is your pharmacy a pilot site for the NHS Community Pharmacy Independent Prescribing Pathfinder Programme?

☐ Yes

☐ No

Current and future demands for pharmaceutical services

Q13. What are the main challenges you face delivering community pharmacy services to meet the needs of your local community?

- ☐ Pressure of keeping an accessible service for the vulnerable
- ☐ Raising awareness regarding what services pharmacies provide
- ☐ Not having sufficient time to talk and listen to patients
- ☐ Meeting the needs of an increasingly diverse population, including language and cultural considerations
- ☐ Managing patient expectations around the role and limitations of pharmacy services
- ☐ Ensuring patient privacy and confidentiality, especially in open-plan environments
- ☐ Ensuring consistent supply of medicines, especially for high-demand or essential medications
- ☐ Addressing the mental health and social support needs of patients while managing pharmacy responsibilities
- ☐ Managing staffing levels to meet patient demand effectively
- ☐ I don't have any concerns
- ☐ Other

Q14. What are the key challenges you see in delivering community pharmacy services as a whole?

- ☐ Expectation that community pharmacy will alleviate all/many of GP practice pressures
- ☐ Maintaining capacity to respond to increased demand
- ☐ Ensuring that the diverse range of services all remain throughout trading hours
- ☐ Unrealistic reimbursement for delivery of additional services
- ☐ Pressures of medicine supply issues
- ☐ Impact of on-line / distance selling pharmacies on reducing foot fall in the high street pharmacies
- ☐ Recruitment pressures
- ☐ Challenges in digital integration with NHS systems
- ☐ Increased administrative workload and regulatory requirements
- ☐ Training and development costs for additional services
- ☐ Inconsistent or delayed payments for NHS services
- ☐ Patient safety concerns due to high workload
- ☐ Local competition and sustainability of brick-and-mortar pharmacies
- ☐ I don't have any concerns at present
- ☐ Other

Q15. Contact details of person completing this form on behalf of the contractor:

Your name	<input type="text"/>
Telephone number	<input type="text"/>
Email address	<input type="text"/>

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Results of Survey of Pharmaceutical Service Providers

When We Consulted

9 December 2024 – 4 February 2025.

How We Consulted and Who Responded

A survey was built on-line using Gateshead Council's Consultation Portal and circulated to all Gateshead pharmacies by the Local Pharmaceutical Committee Members.

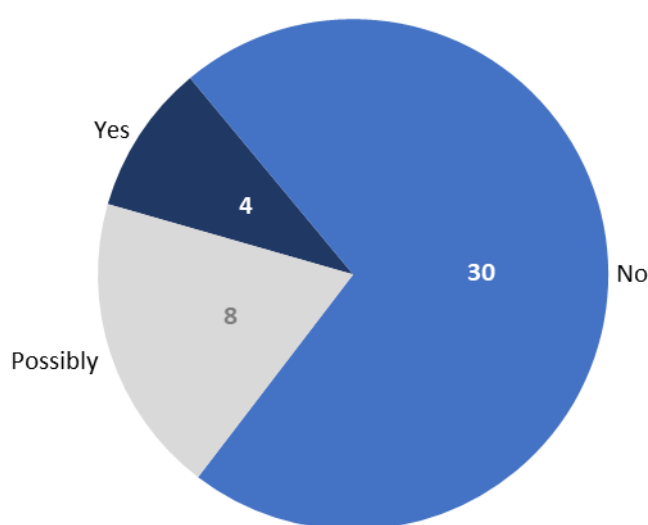
All 42 pharmacies in Gateshead responded to the survey.

Survey Results

Most (30) pharmacies said they are not entitled to pharmacy access scheme payments. Only 4 said they are and 8 said they possibly are. Pharmacy access scheme payments are provided to support patient access in isolated areas. Pharmacies are eligible for the payment if they are more than a mile from the next nearest pharmacy by road and have lower dispensing levels.

Entitled to Pharmacy
Access Scheme payments?

Base = 42

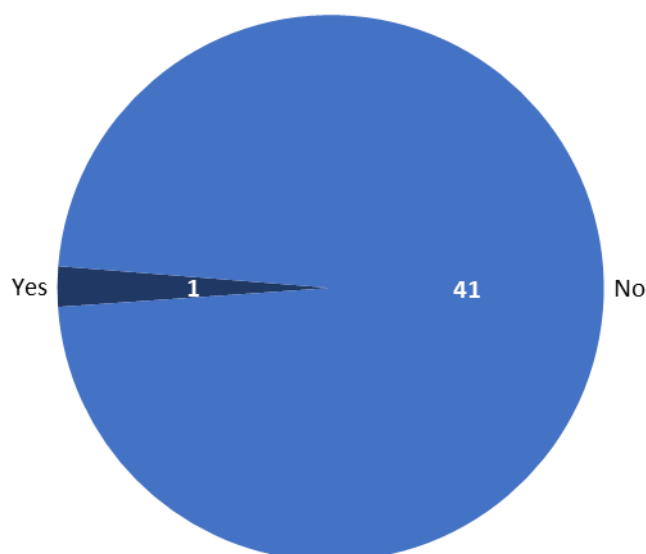


To open a new pharmacy, the proposed pharmacy must be able to show that they are necessary or desirable. The control of entry system based on local PNAs removed the 100-hour exemption and exemptions allowing pharmacies to open automatically if they were situated in out-of-town shopping centres or one-stop primary care centres.

Only one respondent identified themselves as a former 100-hour pharmacy.

Is a former 100 hour pharmacy?

Base = 42

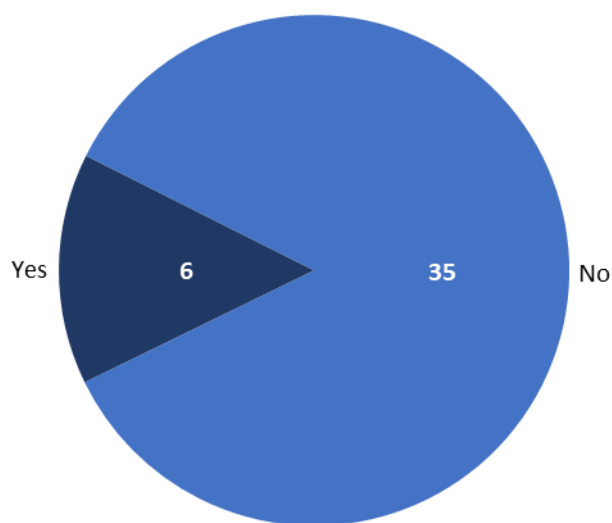


Only 6 of the responding pharmacies said they had a local pharmaceutical services (LPS) contract. LPS contracts are an alternative to the national contractual framework. The aim of the contract is “to demonstrate new ways in which to organise and pay for community pharmacy, to deliver a wider range of services than under the current national contract, enabling local needs to be met more effectively.”

Distance selling pharmacies offer dispensing services over the Internet or by telephone. Delivery is then made by post, carrier or through a branch network. 3 of the responding pharmacies said they were a distance selling pharmacy.

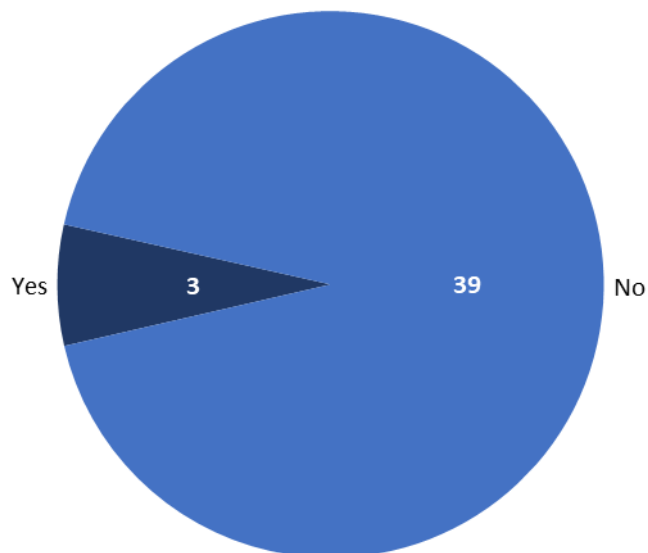
Has a Local Pharmaceutical Services contract?

Base = 41



Is a distance selling pharmacy?

Base = 42



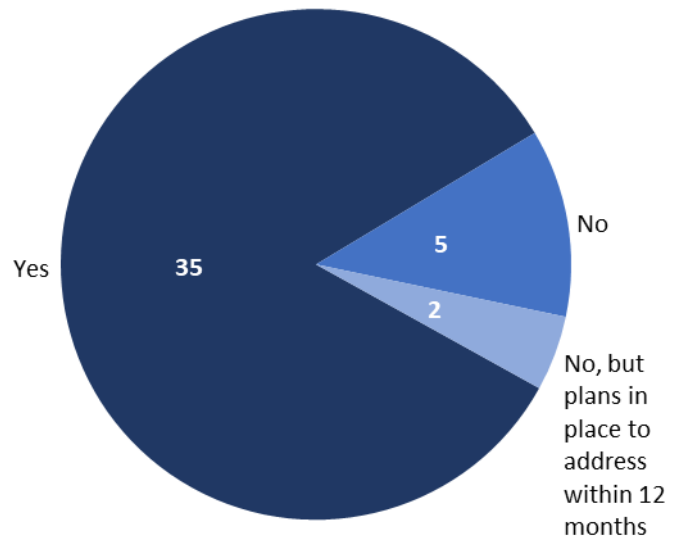
It is important that pharmacy services are accessible to all who need them, when they need them. 35 of Gateshead's pharmacies had entranceways that allowed for unaided wheelchair access. A further 2 planned to address accessibility within the next 12 months.

Consultation rooms are essential if pharmacies are to provide advanced services such as medicine use reviews and many locally commissioned services. Of the 42 pharmacies that responded, 41 had a consultation room. The remaining pharmacy had a 'meeting room' but plan to add handwashing facilities and seek reassessment as a consultation room.

A higher number of pharmacies (38) had wheelchair accessible consultation rooms than currently have entrances that allow for unaided wheelchair access (35) as shown in an earlier chart. A further pharmacy has plans in place to make their consultation room accessible within the next 12 months, meaning only 2 pharmacies do not have wheelchair accessible consultation rooms.

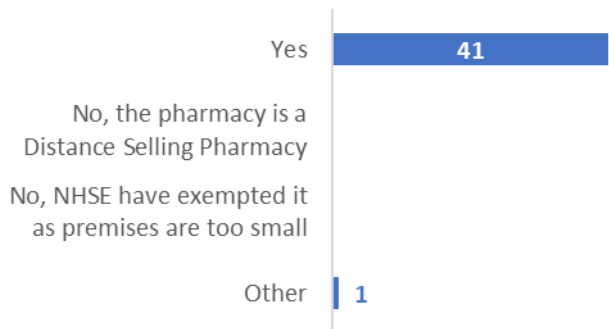
Pharmacy entrance allows for unaided wheelchair access?

Base = 42



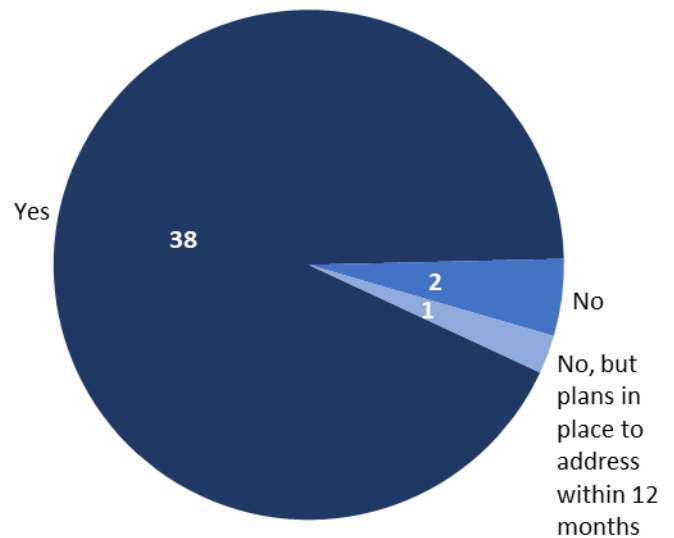
Has a consultation room that meets NHS England requirements?

Base = 42



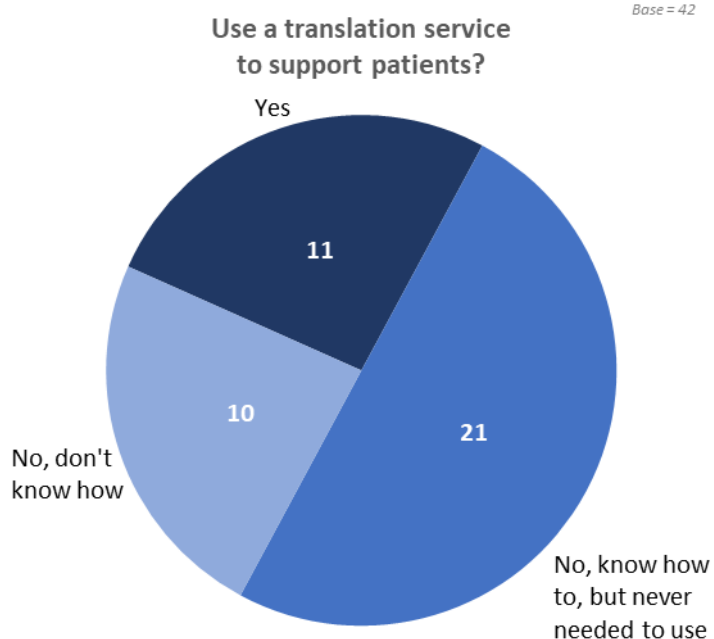
Consultation room accessible by wheelchair?

Base = 41



A translation service may be used to converse with service users face to face, over the telephone or by videoconference, or to translate/transcribe information.

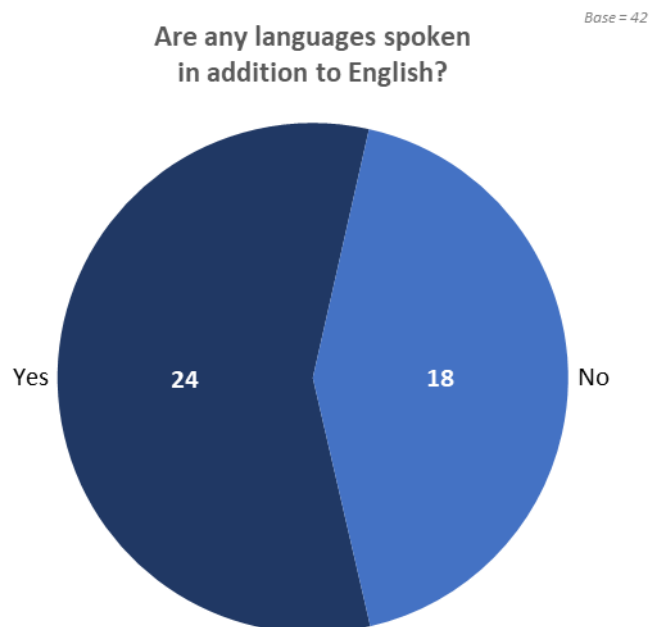
About a quarter (11) of pharmacies had used a translation service. Around half (21) knew how to use the service, but had not needed to do so, but a further quarter (10) didn't know how.



Service users may find it helpful if pharmacy staff are able to converse in additional languages that may be common in the local area. 24 pharmacies in Gateshead indicated that they are able to converse in languages other than English.

Languages mentioned include:

Arabic	7	Malay	1
Bengali	4	Mandarin	2
Bulgarian	1	Polish	2
Cantonese	2	Punjabi	6
Chinese	2	Serbo-Croat	1
Farsi	1	Telugu	2
Hindi	4	Urdu	10
Irish	1	Yoruba	1



Advanced services are services that pharmacies can choose to provide. Amongst other services, they include appliance use review, flu vaccine, new medicine service, and stoma appliance customisation.

Locally commissioned services are contracted via the local authority and the ICB. Examples include alcohol screening and brief intervention, emergency contraception, minor ailments service, and the stop smoking service.

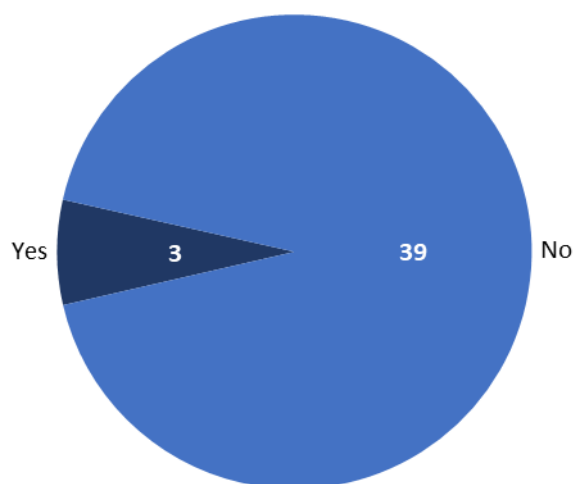
There is currently only one national enhanced service which is the Covid-19 vaccination service.

Only 3 Gateshead pharmacies had stopped providing services within the last 3 years. Of these, 2 pharmacies said they had stopped providing all advanced services.

Only 2 pharmacies said there were services they would not be able or willing to provide at the moment. Both pharmacies stated supervised consumption of medicine e.g. methadone.

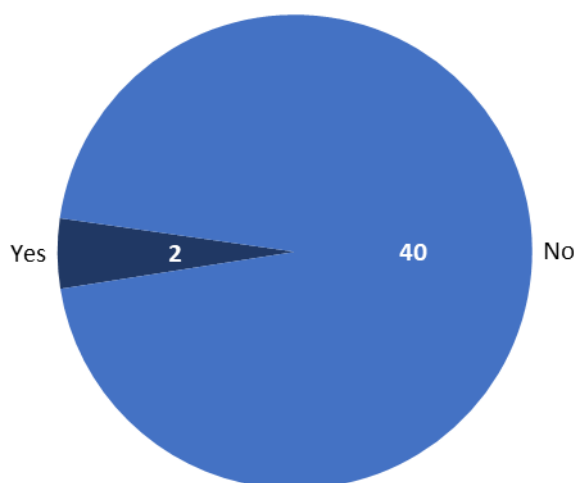
Have stopped providing advanced or locally commissioned / enhanced services within the last 3 years?

Base = 42



Are there pharmaceutical services you would not be able or willing to provide at the moment?

Base = 42



8 of the 42 pharmacies suggested there were other services they feel could benefit people if they could offer them now. The services suggested include:

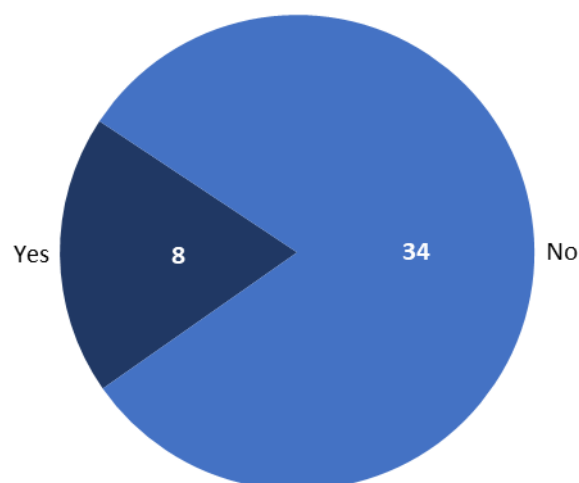
- 1 Cholesterol check
- 1 Diabetes check
- 1 Gluten free service
- 2 Hep C vaccinations
- 2 Stop smoking PGD
- 3 Weight management service
- 1 Widen contraception service to include injection

Almost all (39) pharmacies in Gateshead provide a prescription delivery service.

A large number of pharmacies (27) provide prescription deliveries free of charge to all patients. 9 require patients meet certain criteria to qualify for free delivery e.g. being housebound. 3 require all patients to pay for delivery.

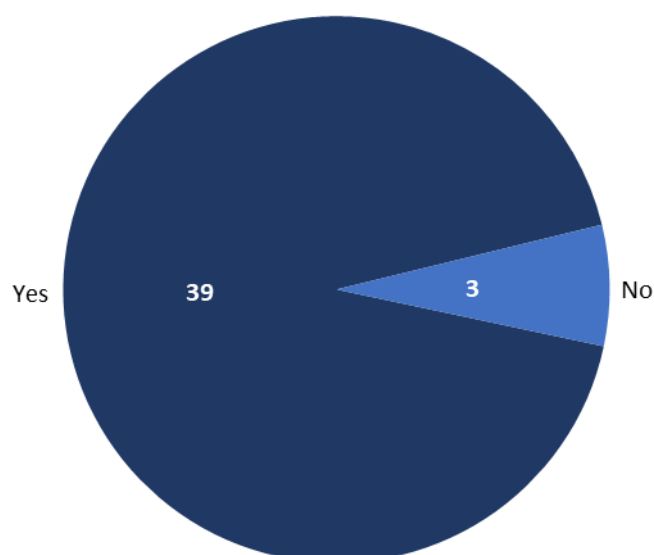
Are there other pharmaceutical services you think would benefit people if you could offer them at the pharmacy now?

Base = 42



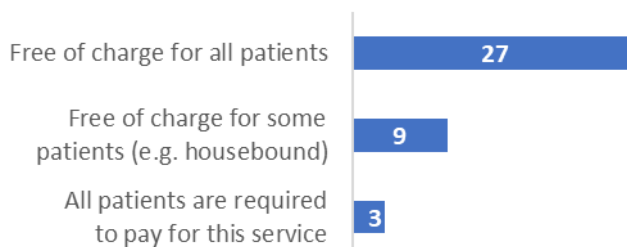
Provide a prescription delivery service?

Base = 42



Do patients pay for delivery?

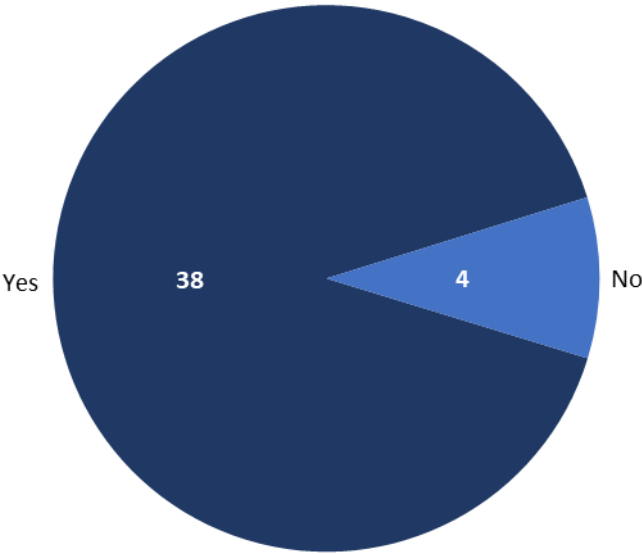
Base = 39



A monitored dosage system is a method of dispensing medication that helps patients to keep track of what medication they need to take and when. Medication is typically provided in a receptacle with compartments for the days of the week. Pharmacists will fill the receptacle with the medicine needed in the relevant order.

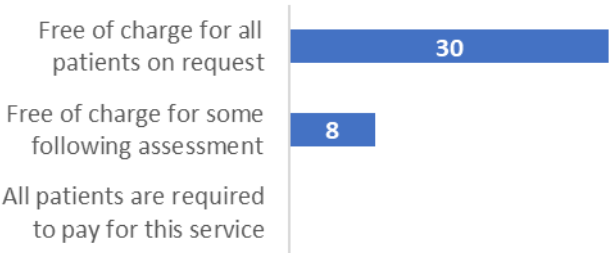
Most (38) pharmacies provide a monitored dosage system service.

Provide monitored dosage system service? Base = 42



Of the 38 pharmacies providing a monitored dosage system service, 30 provide it free of charge to all patients on request. The rest provide it free of charge to those qualifying following assessment.

Do patients pay for monitored dosage system? Base = 38

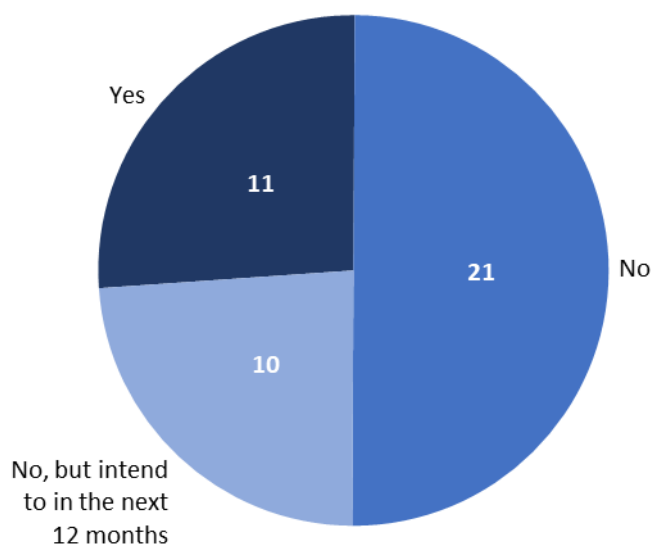


An Independent Prescribing (IP) qualification allows a pharmacist to clinically assess a patient, establish a diagnosis, determine the clinical management required and prescribe where necessary.

Around a quarter (11) of pharmacies have pharmacists with or working towards an IP qualification. A further quarter (10) don't but intend to within the next 12 months. That means that half of pharmacies (21) do not have and do not intend to have pharmacists with an IP qualification.

Have pharmacists with or working towards Independent Prescribing qualification?

Base = 42



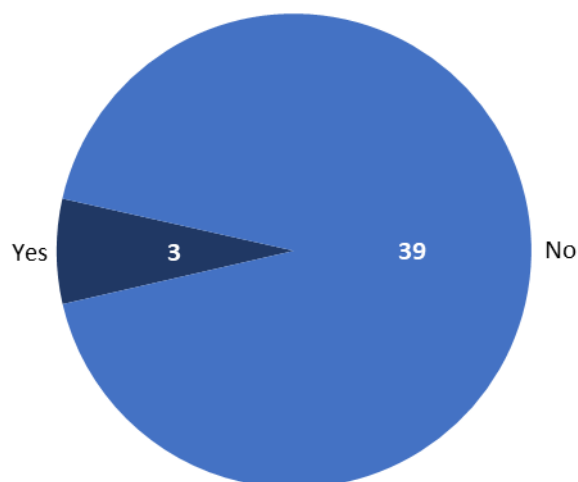
From September 2026, all newly qualified pharmacists will be independent prescribers on the day of their registration.

In advance of this, NHS England are running the Independent Prescribing in Community Pharmacy Pathfinder Programme, enabling community pharmacist prescribers in 'pathfinder' sites to deliver prescribing models as part of integrated primary care clinical services.

3 of Gateshead's pharmacies are pilot sites for the Pathfinder Programme.

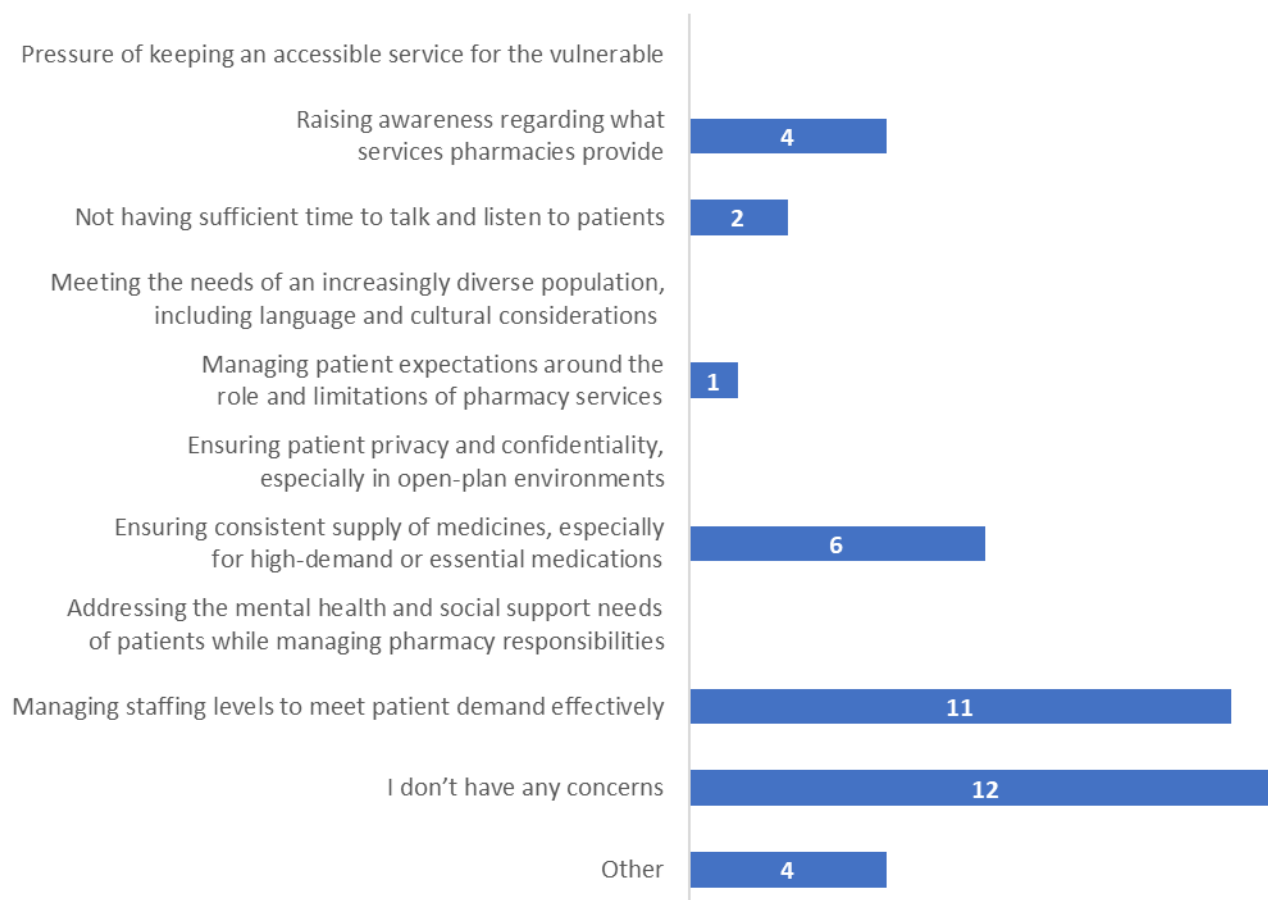
Pharmacy is a pilot site for NHS Community Pharmacy Independent Prescribing Pathfinder Programme?

Base = 42



Main challenge of delivering services to meet the needs of the local community?

Base = 40



The 'Other' challenges of delivering services to meet the needs of the local community included 3 references to underfunding and 1 reference to issues with stock supply.

Key challenge of delivering community pharmacy services as a whole?

Base = 42

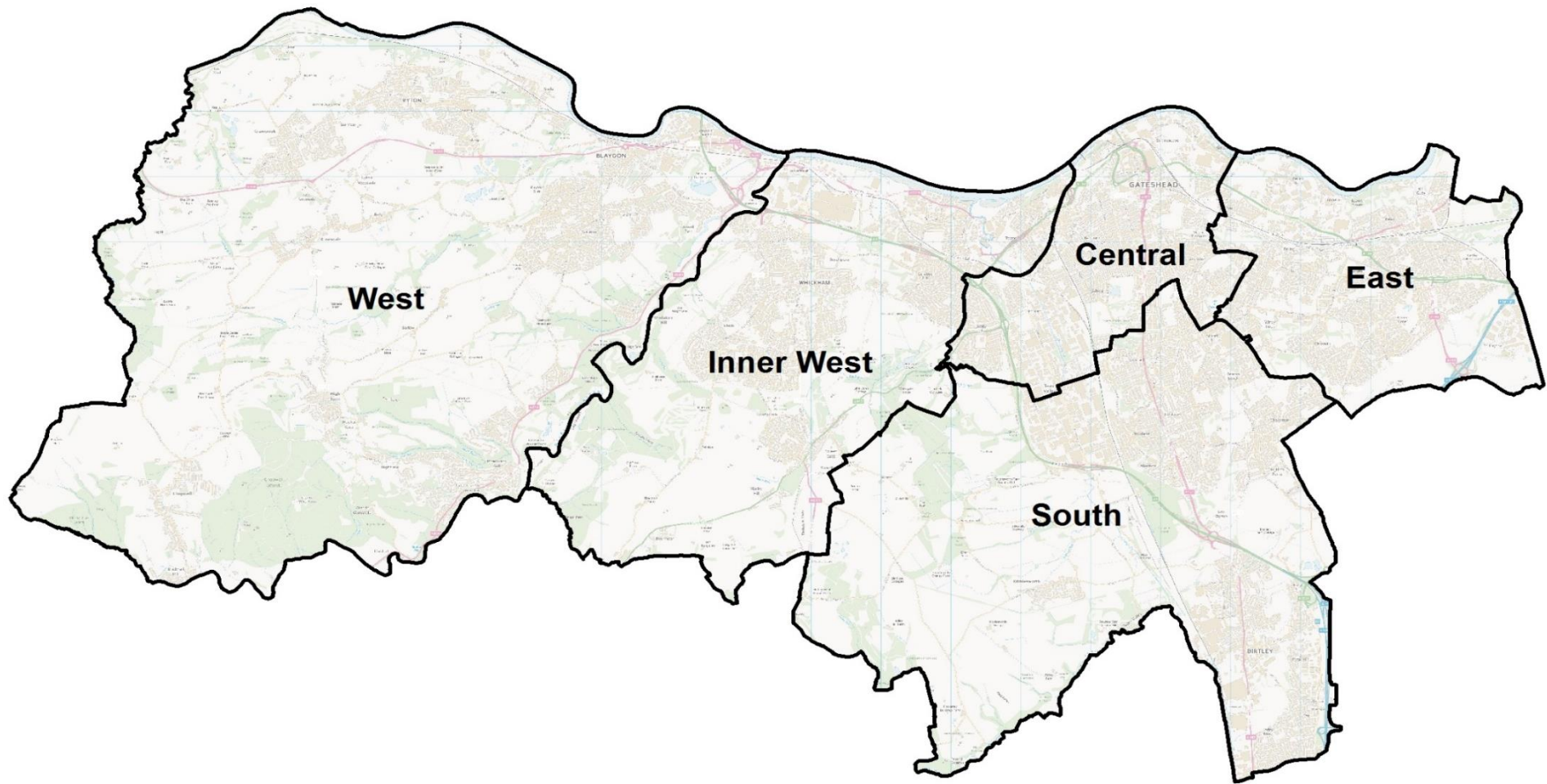


The 'Other' key challenges of delivering community pharmacy services as a whole included 2 references to underfunding, 2 stating that all of the challenges listed are key challenges, 1 stating that ePGD for distance selling pharmacy services would help with accessibility, and 1 stating that the pharmacy contract is outdated.

Appendix 5: Gateshead Wards and Localities

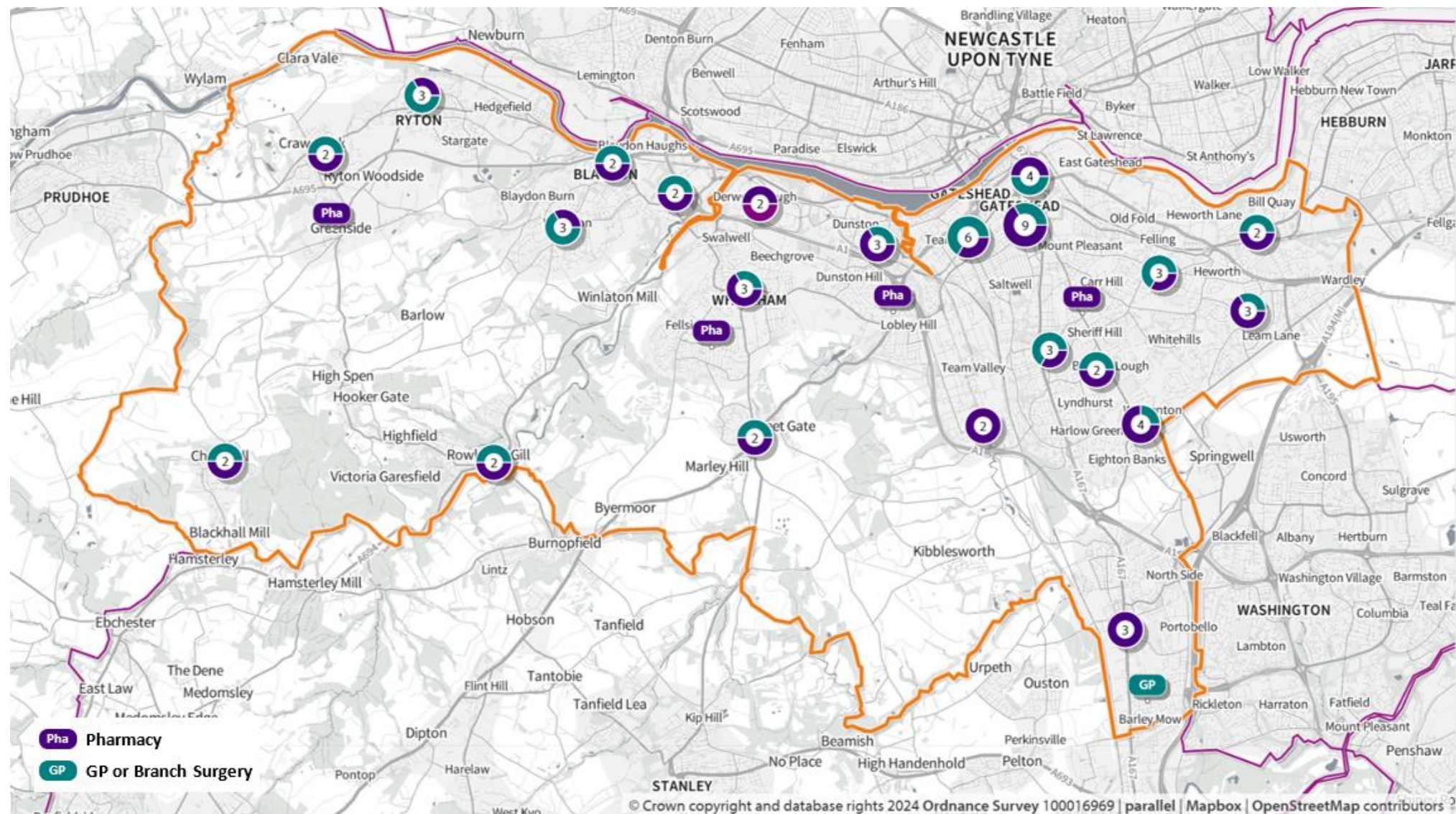
Locality	Ward
Central	Bridges
Central	Deckham
Central	Lobley Hill and Bensham
Central	Saltwell
East	Felling
East	Pelaw and Heworth
East	Wardley and Leam Lane
East	Windy Nook and Whitehills
Inner West	Dunston and Teams
Inner West	Dunston Hill and Whickham East
Inner West	Whickham North
Inner West	Whickham South and Sunnyside
South	Birtley
South	Chowdene
South	High Fell
South	Lamesley
South	Low Fell
West	Blaydon
West	Chopwell and Rowlands Gill
West	Crawcrook and Greenside
West	Ryton, Crookhill and Stella
West	Winlaton and High Spen

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Localities

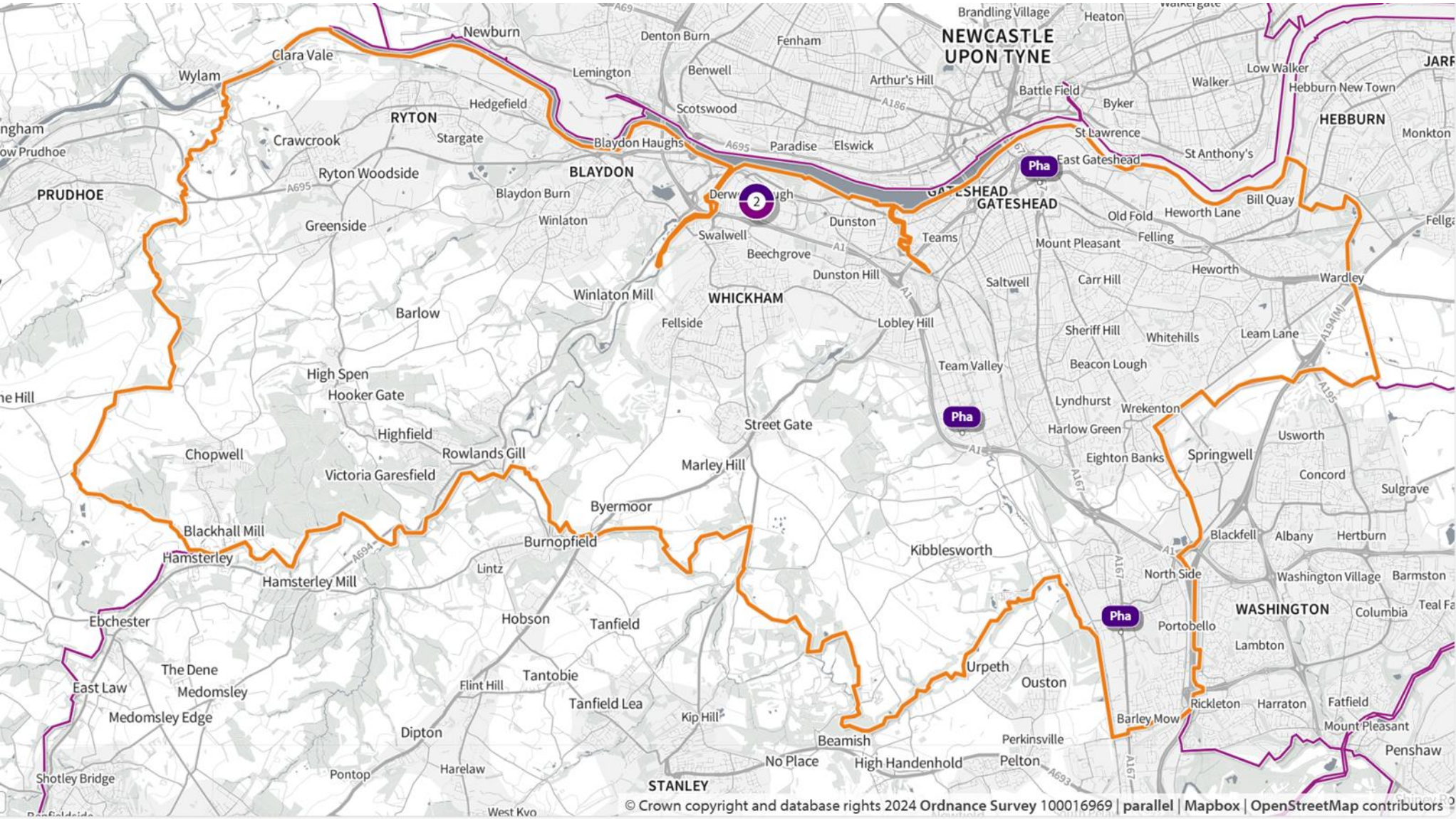
Contains Ordnance Survey data © Crown copyright and database right 2017



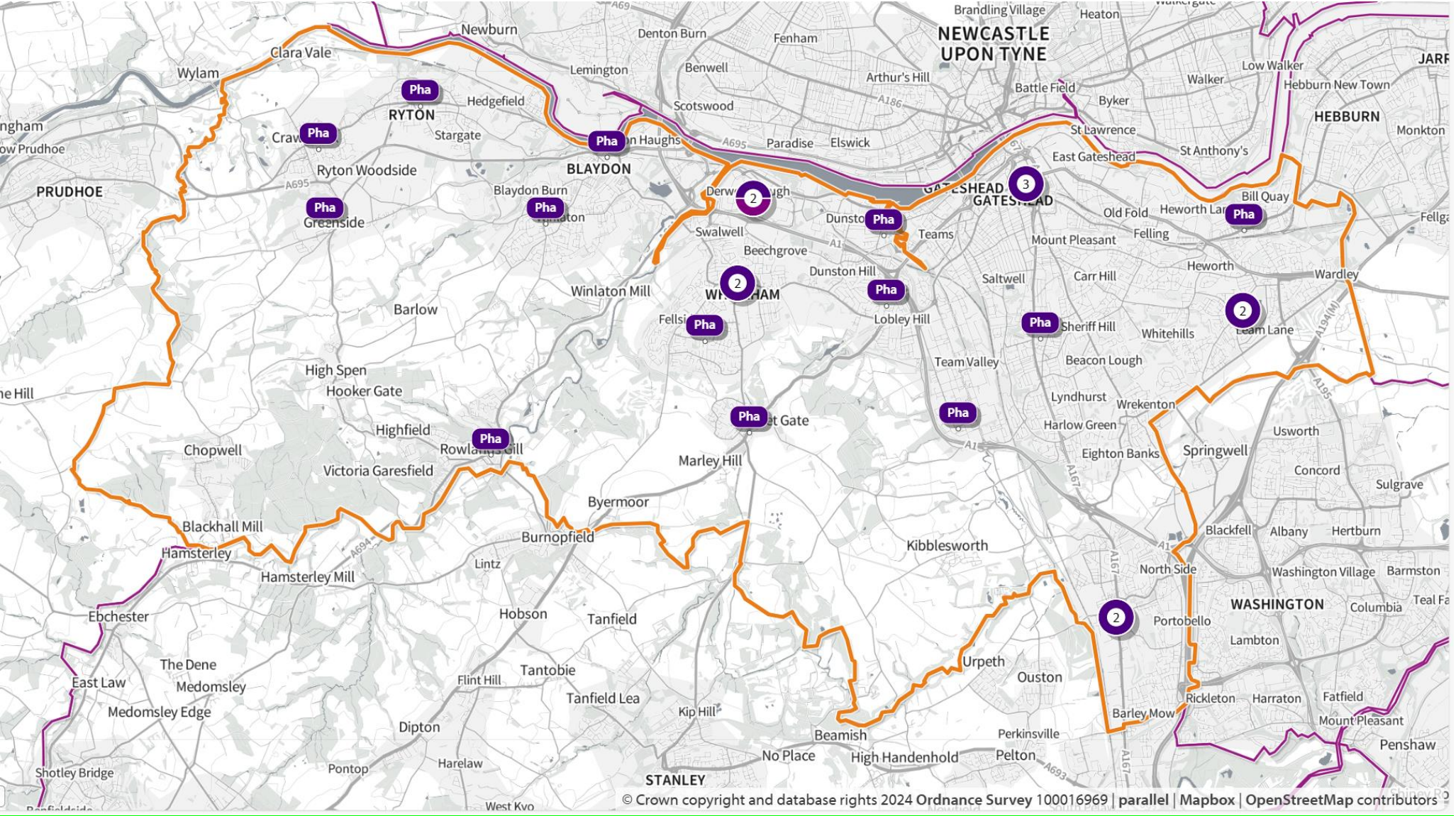
A map snippet showing the location of Phleggy. A purple pin labeled 'Phleggy' is positioned near a road. To the left, a label 'Blackhill' is visible, and a distance of '1 mi' is marked between them. To the right, a label 'Leangate' is visible. The map shows a road network and a large grey 'S' shape overlaid on it.



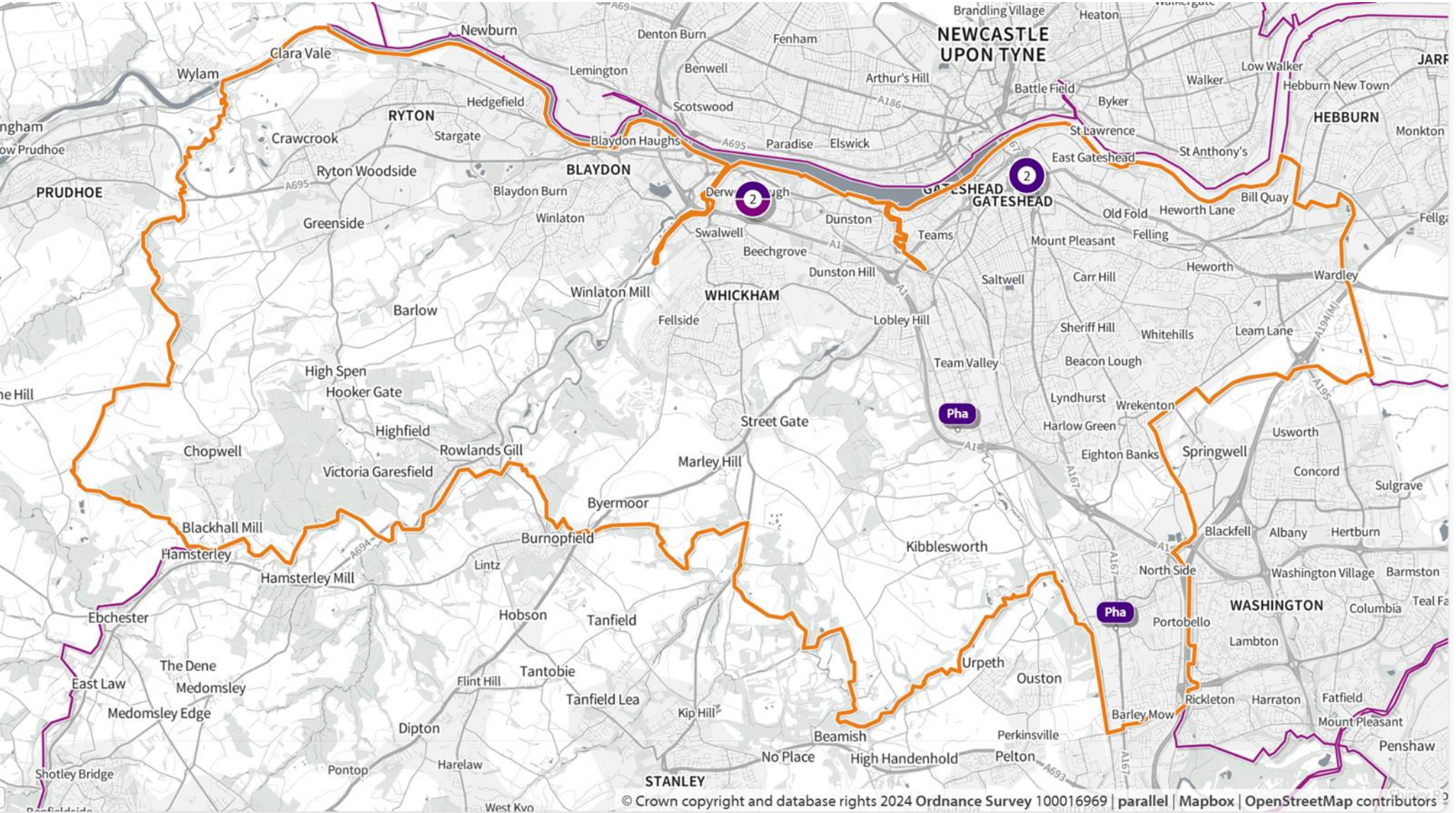
Appendix 8a: Maps of Pharmacy Access - Pharmacies open on weekday evenings

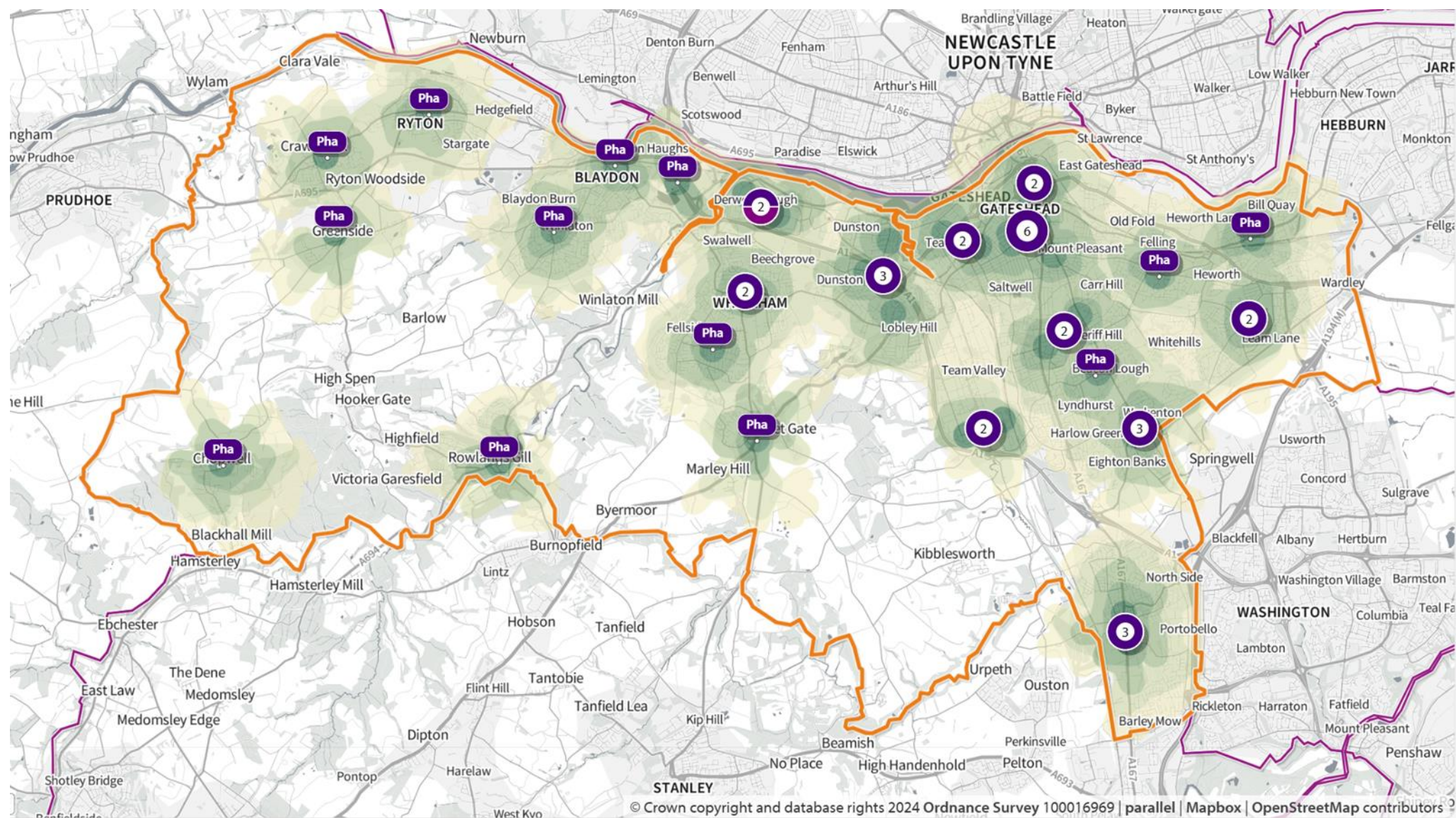


Appendix 8b: Maps of Pharmacy Access - Pharmacies open on a Saturday

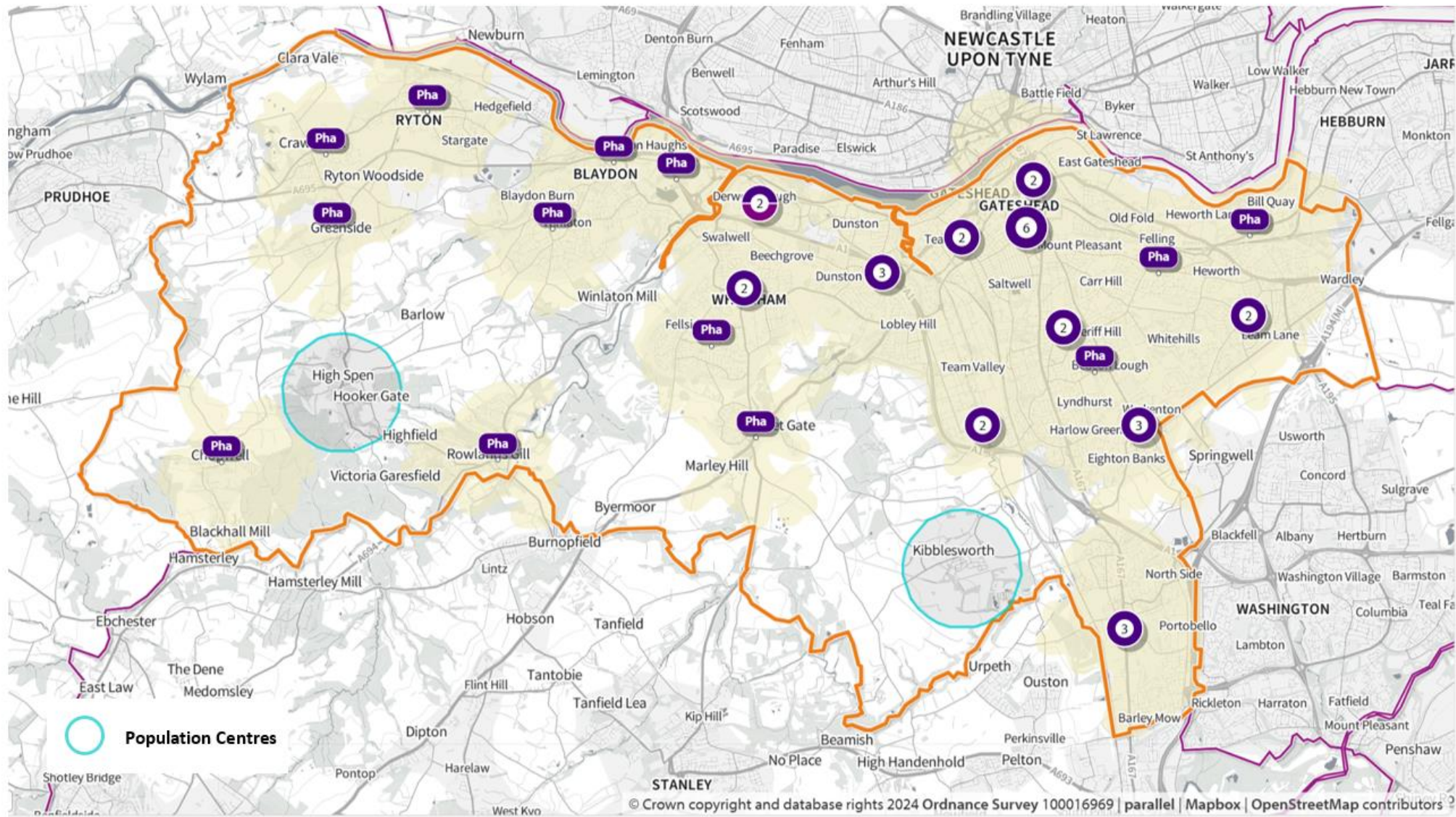


Appendix 8c: Maps of Pharmacy Access - Pharmacies open on a Sunday





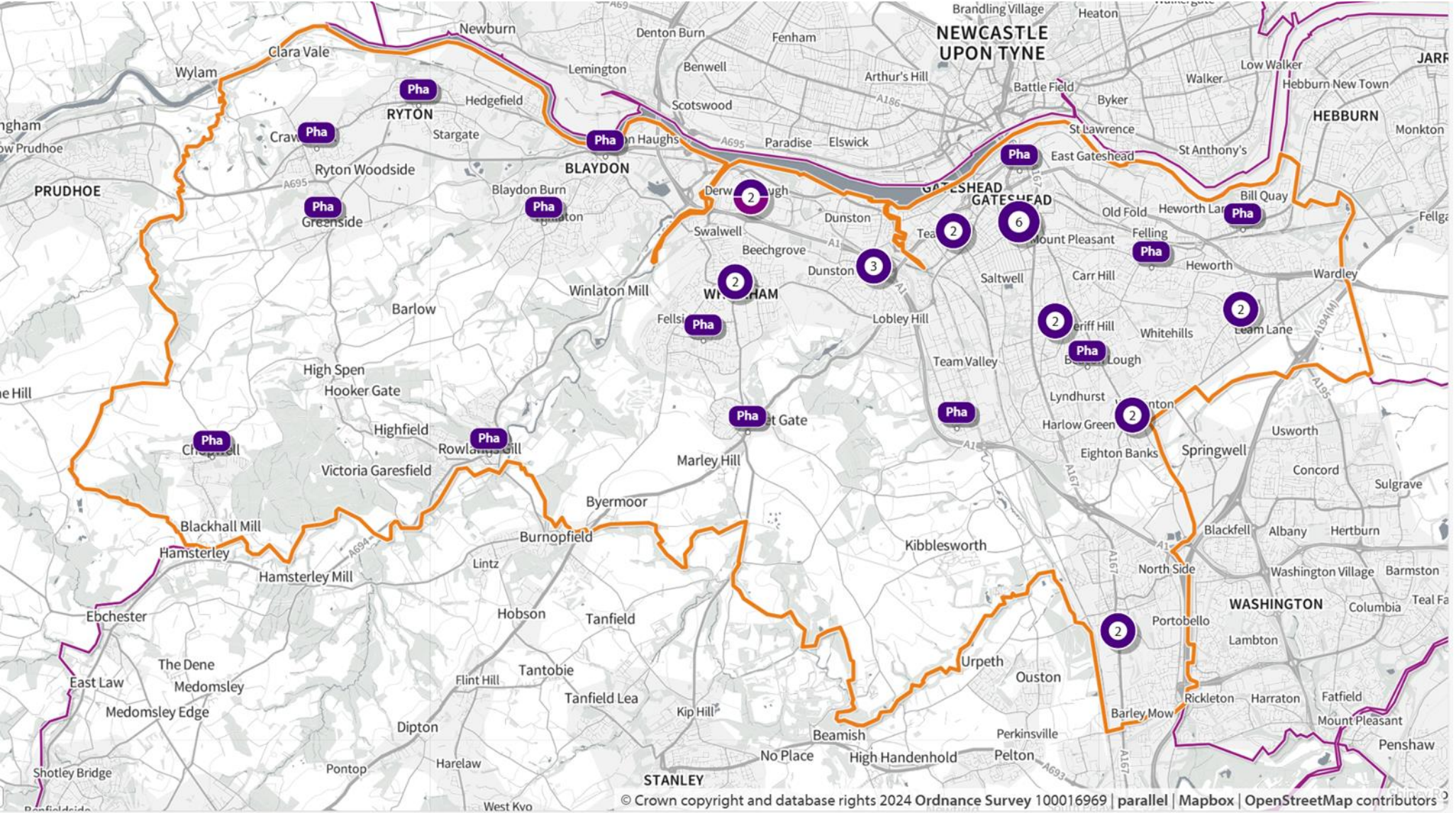
Appendix 8e: Maps of Pharmacy Access - Areas outside of 1 mile walking distance of pharmacies



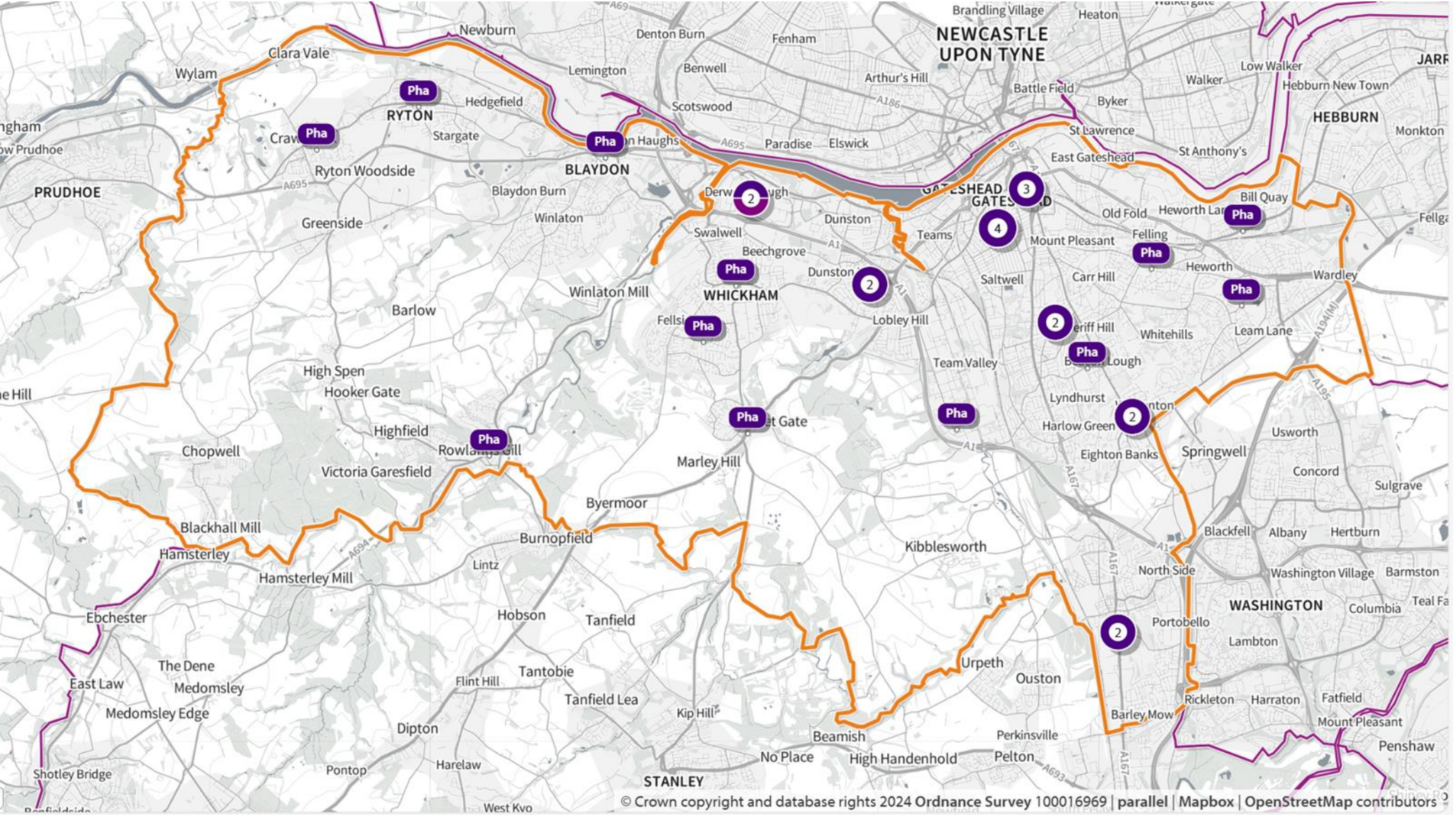
Map of Newcastle upon Tyne showing the Newcastle City Council ward boundaries. The map includes labels for various wards such as Ryton, Blaydon, Gateshead, and Washington. It also shows major roads, rivers, and surrounding areas like Prudhoe and Stanley. The map is overlaid with a grid of ward boundaries, each labeled with a number and the name of the ward.

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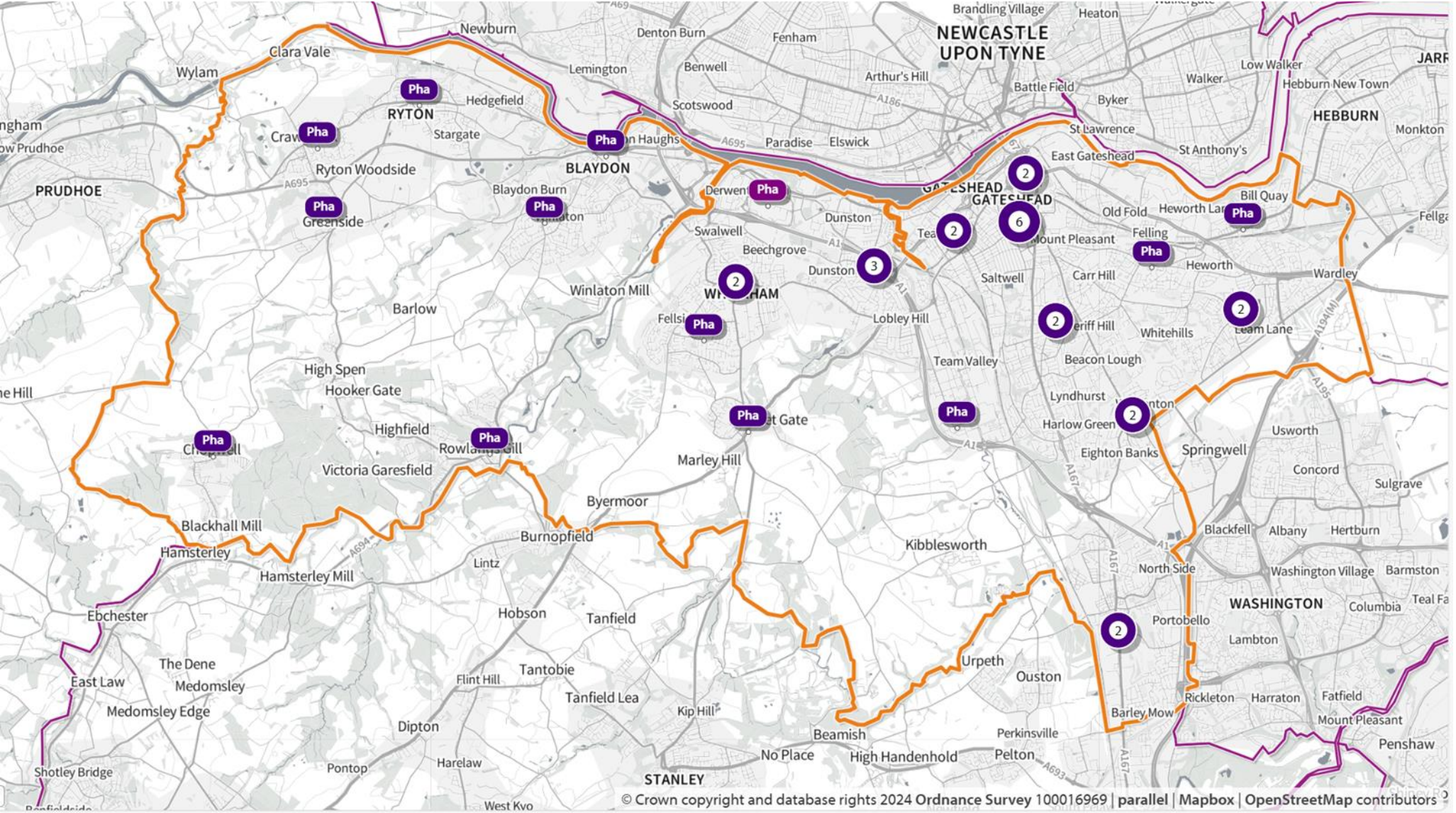
Appendix 9a: Maps of Locally Commissioned Services – Pharmacies providing NRT service



Appendix 9b: Maps of Locally Commissioned Services – Pharmacies providing EHC service



Appendix 9c: Maps of Locally Commissioned Services – Pharmacies providing supervised consumption service



Appendix 10: Pharmacy List, Service Offer, Opening Times and Other Service Provider Summary

All Pharmacies

Total number of pharmacies: 42

FVM83	Asda Stores Limited, Asda Pharmacy, Maple Row, Metrocentre, Gateshead, NE11 9YA (0191 461 9510)
FT005	Avicenna Retail Ltd, Bewick Road Pharmacy, 13 Bewick Road, Gateshead, NE8 4DP (0191 477 4456)
FRG71	Avicenna Retail Ltd, Fewster Square Pharmacy, 11 Fewster Square, Leam Lane Estate, Felling, Gateshead, NE10 8XQ (0191 469 3018)
FPQ41	Avicenna Retail Ltd, Prince Consort Road Pharmacy, The Health Centre, Prince Consort Road, Gateshead, Tyne and Wear, NE8 1NB (0191 477 2280)
FCX29	Beacon View Pharmacy Limited, Beacon View Pharmacy, Beacon View Medical Centre, Beacon Lough Road, Gateshead, NE9 6YS (0191 487 2121)
FVR27	Bestway National Chemists Limited, Well, 14 Beaconsfield Road, Low Fell, Gateshead, NE9 5EU (0191 487 5927)
FWJ68	Bestway National Chemists Limited, Well, 17 The Crescent, Dunston, Gateshead, NE11 9SJ (0191 460 4687)
FC155	Bestway National Chemists Limited, Well, 2-3 St Mary's Green, Whickham, Newcastle upon Tyne, NE16 4DN (0191 488 5296)
FWW14	Bestway National Chemists Limited, Well, 31 Harraton Terrace, Durham Road, Birtley, DH3 2QG (0191 410 3135)
FGH89	Boots UK Limited, Boots UK Limited, 13-15 Ellison Street, Trinity Square, Gateshead, NE8 1BF (0191 477 1306)
FV192	Boots UK Limited, Boots UK Limited, 2 Dean Terrace, Ryton, Tyne and Wear, NE40 3HQ (0191 413 2130)
FYK96	Boots UK Limited, Boots UK Limited, 34 Station Road, Rowlands Gill, Tyne and Wear, NE39 1PZ (01207 544 103)
FMK83	Boots UK Limited, Boots UK Limited, 9-10 The Precinct, Wesley Court, Blaydon, Gateshead, NE21 5BT (0191 414 3194)
FMF20	Boots UK Limited, Boots UK Limited, Felling Health Centre, Stephenson Terrace, Felling, Gateshead, NE10 9QG (0191 438 4300)
FNK51	Boots UK Limited, Boots UK Limited, Unit 9, Team Valley Retail Park, Gateshead, NE11 0BD (0191 491 4348)
FMF10	Boots UK Limited, Boots UK Limited, Units 46-52, Cameron Walk, The Metrocentre, Gateshead, NE11 9YQ (0191 493 2055)
FYN79	Centralchem Limited, 217 Coatsworth Road, Gateshead, NE8 1SR (0191 477 1480)
FV093	Elmfield Trading Limited, Birtley Pharmacy, Harras Bank, 9 Harras Bank, Birtley, Chester-le-Street, DH3 2PE (0191 410 2198)
FEC90	Elmfield Trading Limited, Durham Road Pharmacy, Birtley, 2 Imperial Buildings, Durham Road, Birtley, Chester-le-Street, DH3 1LG (0191 410 2125)
FX287	Fairman Chemists Limited, Fairmans Pharmacy, 5 Brookfield Terrace, Pelaw, Gateshead, NE10 0QU (0191 469 2124)
FE708	G.H. Furness Limited, 13 Derwent Street, Chopwell, Tyne & Wear, NE17 7HU (01207 561 266)
FA148	Gateshead Healthcare Ltd, Gateshead Pharmacy, 105 Prince Consort Road, Gateshead, NE8 1LR (0191 477 5349)

FPX83	Gateshead Pharma Ltd, Healthhub Pharmacy, Wrekenton Health Centre, Springwell Road, Wrekenton, Gateshead, NE9 7AD (0191 487 8733)
FFH36	Gateshead Pharma Ltd, Leam Lane Pharmacy, Former Five Star Batteries, Meresyde, Leam Lane, Gateshead NE10 8PE (0191 469 2410)
FAL58	JSBH Limited, Oakfield Pharmacy, 2 Ravensworth Road, Dunston, Gateshead NE11 9FJ (0191 460 4351)
FW778	JSBH Ltd, Oakfield Pharmacy, 96 Oakfield Road, Whickham, Newcastle upon Tyne, NE16 5QU (0191 488 5640)
FAF46	KA & AO Limited, K & A Pharmacy, 292 Old Durham Road, Gateshead, NE8 4BQ (0191 477 2797)
FG334	Lobley Hill Pharmacy Limited, Lobley Hill Pharmacy, 72 Malvern Gardens, Gateshead, NE11 9LJ (0191 420 0213)
FRG51	LP SD Fifty Two Limited, Lloyds Pharmacy, Rockwood Hill Road, Greenside, Ryton, NE40 4AX (0191 413 2484)
FA439	LP SD Fifty Two Limited, Lloyds Pharmacy, Teams Medical Centre, Watson Street, Teams Estate, Gateshead, NE8 2PQ (0191 460 7497)
FML40	M.D. & A.G. Burdon Ltd, Whickham Pharmacy, The Lodge, Rectory Lane, Whickham, Newcastle, TYNE AND WEAR, NE16 4PD (0191 488 0956)
FJA23	N & B Chemists Limited, 1 Liddell Terrace, Bensham, Gateshead, NE8 1YN (0191 477 6742)
FF188	N & B Chemists Limited, Wrekenton Pharmacy, 1 Springwell Road, Wrekenton, Gateshead, NE9 7JN (0191 487 4258)
FT863	Newcastle Pharma Ltd, Tyne Chem, Unit 4, Perth Court, Eleventh Avenue North, Gateshead, Tyne and Wear, NE11 0NJ (0191 500 3500)
FTK02	Pacific Chem Ltd, PCH Chemist, Unit A1, Derwenthaugh Industrial Estate, Swalwell, NE16 3BQ (0191 916 0040)
FQF00	Parkside Crawcrook Limited, Parkside Pharmacy Crawcrook, Pattinson Drive, Crawcrook, Ryton, NE40 4US (0191 413 2234)
FE358	Pyramid Pharma 7 Limited, Bensham Pharmacy, 181 Coatsworth Road, Gateshead, NE8 1SQ (0191 477 1616)
FAE19	R G Young Pharmacy Ltd, 33 Sheriffs Highway, Old Durham Road, Gateshead, NE9 5PJ (0191 482 6457)
FJE40	R W Wilson Pharmacy Ltd, 50 Front Street, Winlaton, Blaydon on Tyne, NE21 6AD (0191 414 2378)
FK304	Sunniside Healthcare Limited, Sunniside Pharmacy, 9 Dewhurst Terrace, Sunniside, Newcastle upon Tyne, NE16 5LP (0191 488 5638)
FD563	Tesco Stores Limited, Tesco Stores, 1 Trinity Square, Gateshead, Tyne and Wear, NE8 1AG (0191 693 9931)
FRE48	Wrekenton Healthcare Limited, Pills4U Pharmacy, 7 Wrekenton Row, Gateshead, NE9 7JD (0191 487 7007)

Pharmacy Opening Hours

[illegible]

FW778	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	Closed
FAF46	08:30-17:30	08:30-17:30	09:00-17:30	08:30-17:30	08:30-17:30	Closed	Closed
FG334	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-12:00	Closed
FRG51	08:30-16:00	08:30-16:00	08:30-16:00	08:30-16:00	08:30-16:00	09:00-12:00	Closed
FA439	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	Closed	Closed
FML40	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	09:00-17:00	Closed
FF188	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	Closed	Closed
FJA23	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	Closed	Closed
FT863	09:00-13:00 14:00-18:00	09:00-13:00 14:00-18:00	09:00-13:00 14:00-18:00	09:00-13:00 14:00-18:00	09:00-13:00 14:00-18:00	Closed	Closed
FTK02	09:00-17:00	09:00-17:00	09:00-17:00	09:00-17:00	09:00-17:00	Closed	Closed
FQF00	09:00-13:00 14:00-17:30	09:00-13:00 14:00-17:30	09:00-13:00 14:00-17:30	09:00-13:00 14:00-17:30	09:00-13:00 14:00-17:30	09:00-11:30	Closed
FE358	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	Closed
FAE19	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	Closed	Closed
FJE40	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	Closed	Closed
FK304	09:00-12:30 13:30-18:00	09:00-12:30 13:30-18:00	09:00-12:30 13:30-18:00	09:00-12:30 13:30-18:00	09:00-12:30 13:30-18:00	09:00-12:30	Closed
FD563	08:00-20:00	08:00-20:00	08:00-20:00	08:00-20:00	08:00-20:00	08:00-20:00	10:00-16:00
FRE48	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	Closed	Closed

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Appendix 11: Changes to Pharmacy Provision Following Consultation on this PNA

[INFO WILL BE ADDED POST-CONSULTATION].

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Appendix 12: Acknowledgements

The writing group for the PNA, consisting of representatives from Public Health, North Tyneside Council, North Tyneside Clinical Commissioning Group (CCG) and North-East Commissioning Support would like to thank the following for their contribution to the production of the PNA:

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- Commissioning Leads, Gateshead Council;
- Planning Officers, Gateshead Council;
- Newcastle Gateshead Clinical Commissioning Group (CCG);
- Healthwatch Gateshead;
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Steering Group members:

- Edward O Malley Public Health Knowledge & Intelligence Lead, Gateshead Council (Chair)
- Matthew Liddle Senior Corporate Officer, Office of the Chief Executive, Gateshead Council
- Sue White Medicines Optimisation Pharmacist, NECS.
- Seani Cole Public Health Intelligence Analyst, Gateshead Council
- Lily Nesbitt Public Health Data Officer, Gateshead Council
- David Carter Chairman Gateshead & South Tyneside LPC
- Sami Hanna Communications Officer, Gateshead & South Tyneside LPC
- Mark Thomas Chief Pharmacist, Queen Elizabeth Hospital, Gateshead
- Yvonne Probert CEO, Healthwatch Newcastle/Gateshead.

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