

Pharmaceutical Needs Assessments for Hackney and the City of London

DRAFT for consultation

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On behalf of:

Hackney Health & Wellbeing Board

City of London Health & Wellbeing Board

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Abbreviations used in this report

Abbreviation/term	Description
AUR	Appliance Use Review
BBV	Blood borne virus (including hepatitis B, C and HIV)
CHD	Coronary heart disease
COPD	Chronic obstructive pulmonary disease
CHUHSE	City and Hackney Urgent Healthcare Social Enterprise
EHC	Emergency Hormonal Contraception
GUM	Genitourinary medicine
HBV	Hepatitis B virus
HCV	Hepatitis C virus
HSCF	Hackney Health and Social Care Forum
HSCIC	Health and Social Care Information Centre
HWBB	Health and Wellbeing Board
JSNA	Joint Strategic Needs Assessment
LB Hackney	London Borough of Hackney
MAS	Minor Injuries Service
MUR	Medicines Use Review
NMS	New Medicines Service
ONS	Office for National Statistics
PHE	Public Health England
PCT	Primary Care Trust
PGD	Patient Group Direction
PNA	Pharmaceutical Needs Assessment
PUCC	Primary Urgent Care Centre
SAC	Stoma Appliance Customisation
SHLAA	Strategic Housing Land Availability Assessment
TB DOTS	Tuberculosis Directly Observed Treatment, Short-course

1 Executive summary

1.1 Background and methods

This report sets out two pharmaceutical needs assessments: one for City of London Health and Wellbeing Board and one for the Hackney Wellbeing Board. We have followed a joint process for the assessments for pragmatic and historical reasons (section 2.1).

As well as assessing pharmaceutical services, we have also taken the opportunity to conduct an assessment of pharmacy public health services commissioned by the City of London Corporation and London Borough of Hackney, following a similar approach (section 2.2).

We have adopted a range of different methods to produce these assessments, based on a review of local policy and strategy documents, analysis of commissioning and prescribing data, a survey of pharmacy contractors and engagement with patients and the public. The analysis for Hackney has been undertaken on the basis of four localities (Stoke Newington, North East, Homerton and Shoreditch); the City of London has been treated as a single locality for the purposes of this assessment.

The implications of Hackney's and the City's demographic and health profile (see below) have been taken into consideration in our assessment of pharmaceutical services, and have informed our conclusions in relation to public health services. We have also included an assessment of the pharmaceutical and public health needs of different groups who share a common attribute in respect of one of the nine 'protected characteristics' defined by equalities legislation (section 4.3).

Production of the PNA has been overseen by a single governance process, with input from all key local partners (including the Clinical Commissioning Group, Local Pharmaceutical Committee, NHS England and Healthwatch). (section 3.1)

This report is a draft for consultation. The consultation runs from 31 October 2014 to 31 December 2014.

1.2 Summary – Hackney

1.2.1 Demography and health profile

The characteristics of Hackney's population can be summarised as follows (section 4.1).

- The size of the population registered with a GP (272,613) is higher than the estimated resident population (254,459), which is attributed to a mobile population.
- Hackney has a very young population, but the age profile differs slightly across the four localities.
- The GLA's SHLAA population projections (which take future housing growth into account) predict that Hackney's population will grow by 3% over the three years covered by the PNA. Further into the future, Hackney's older (aged 65+) population is predicted to grow disproportionately.

- Hackney is home to a very ethnically diverse population, containing a significant African-Caribbean population as well as sizeable Turkish and Kurdish, eastern European and Charedi orthodox Jewish communities.
- Hackney is the second most deprived local authority in England and there is considerable within-borough variation in neighbourhood deprivation.

The main health-related needs in Hackney, relevant to the PNA, are described below (section 4.2).

- Infant mortality is higher and male life expectancy significantly lower than average.
- Smoking prevalence is amongst the highest in the country.
- Child obesity also remains very high locally.
- Rates of diagnosis of sexually transmitted infections and HIV prevalence both remain high in Hackney.

1.2.2 Summary of our assessment of pharmaceutical services

We have set out below a summary of our assessment of pharmaceutical services in Hackney, in response to the five statements set out in schedule 1 of the regulations.

Schedule 1, para. 1: necessary services – current provision

- We have concluded that essential services, advanced services and locally commissioned services are all necessary to meet a current need for pharmaceutical services in Hackney.
- Section 5.1.1 describes the current provision of pharmaceutical services in Hackney and section 0 presents the geographical distribution of all community pharmacies.
- There are 49 pharmacy contractors in Hackney. There are no distance-selling pharmacies, dispensing appliance contractors or dispensing doctors located within the borough.
- Hackney registered patients also make use of out-of-area pharmacies, for their dispensing needs at least (13% of prescriptions are dispensed elsewhere). (section 0)

Schedule 1, para. 2: necessary services – gaps in provision

- We have concluded that Hackney residents in all four localities have access to a comprehensive network of pharmacy contractors, and that this network is sufficient to meet the current need for pharmaceutical services (including essential, advanced and locally commissioned services) and to meet the needs of our population over the period covered by this PNA (up to 2018).
- There were no responses to the patient/public survey to suggest that the needs of any specific communities are currently not being met, however services must continue to be sensitive to the needs of the diverse ethnic and religious communities within Hackney.

- The pattern of opening hours reflects the expressed demand of patients and the public. The recent and impending termination of two extended hours LPS contracts, due to lack of demand, suggests that there is no need for formal arrangements to secure out-of-hours opening, but we recommend that NHS England keeps this under review. (section 5.1.4)
- There are no DACs in Hackney, nor do any pharmacies provide AUR or SAC services. However, our analysis of dispensing data has revealed that the majority of stoma and incontinence appliances are supplied by out-of-area specialist providers, who will very likely offer AUR and SAC services to their patients. A number of pharmacy contractors have expressed an intention to provide these services within the next 12 months. (section 5.2)
- There is considerable scope to extend access to repeat dispensing services to the benefit of patients. This represents an opportunity for GPs (who must initiate repeat dispensing) and pharmacies to work together to bring the benefits of this service to patients. We recommend that NHS England support the adoption and roll out of repeat dispensing by GP practices. (section 5.1.5)

Schedule 1, para. 3: other relevant services – current provision

- We have concluded that the seasonal flu immunisation service secures better access for our population.
- All other pharmaceutical services described in this report have been assessed as necessary for the provision of adequate services to the population of Hackney.

Schedule 1, para. 4: improvements and better access – gaps in provision

- We have considered population trends, as well as planned housing and related developments, over the period covered by the PNA and how these may impact on the need to secure future improvements or better access to pharmaceutical services.
- We have not identified any need for pharmaceutical services to secure future improvements or better access over the period covered by this PNA.
- The lower than average level of dispensing (section 5.1.5.1) suggests that there is capacity within the system should such a need arise (this assessment will be reviewed in the post consultation report, once 2013-14 benchmarking data has been published).

Schedule 1, para. 5: other services

- Other provision of related services by NHS providers has been considered in our assessment. We have concluded that this provision does not impact on current or potential need for pharmaceutical services.
- There are no plans for the acute trust located in Hackney (Homerton hospital) to make an application to provide NHS pharmaceutical services.
- There are no plans to expand the number of GP practices or NHS dentists.

1.2.3 Summary of our assessment of public health services (section 6)

- Given the continued high rates of smoking in Hackney and the convenience of using pharmacies to get support to quit, we have concluded that the stop smoking service is necessary to meet a current local need. There are no obvious gaps in current provision. (section 6.1)
- The pharmacy weight management service offers the potential to secure better access to weight management services in Hackney, but current provision is patchy and not very well targeted in areas of highest need. Future service commissioning should be in line with the new adult obesity pathway currently under development. (section 6.2)
- We have concluded that supply of Healthy Start vitamins through pharmacies is necessary to meet a current need in Hackney. There is good access across the borough, but we encourage all pharmacies to promote the service widely to improve uptake among all eligible families. (section 6.3)
- Given continued high rates of HIV and sexually transmitted infection locally, we have concluded that the four elements of the pharmacy sexual health service (EHC, condom distribution, *Chlamydia* screening and treatment) are necessary to meet a current need in Hackney. Pharmacy is a popular setting for accessing these services. However, measures should be taken to ensure that current need is being consistently met across all localities. (section 6.4)
- The TB DOTS service has potential to secure better access to services for Hackney patients, but we have concluded that this need may be better met through the local TB service. TB commissioning does not strictly fall within the remit of local authority public health responsibilities. We recommend that local commissioning of DOTS is reviewed by relevant local partners (City and Hackney Public Health, the CCG, PHE and NHS England) following publication of the new national TB strategy in 2015. (section 6.5)
- We have concluded that the supervised consumption service and needle exchange service are both necessary to meet a current need in Hackney. Future commissioning of these public health services should be aligned with the new substance misuse service model currently being developed. (section 6.6 and 6.7)
- The dried blood spot testing service for Hepatitis B, C and HIV targets high risk patients (e.g. substance misuse clients). It has the potential to improve access to BBV screening and significantly improve outcomes by identifying undiagnosed infection. However, current screening activity is significantly below previous levels and the reasons for this need to be better understood. In the medium term, we recommend that City and Hackney Public Health, the CCG, PHE and NHS England consider appropriate commissioning arrangements for this service (like TB DOTS, Hepatitis B and C screening does not strictly come under the commissioning remit of local authorities). (section 6.8)

- We recommend that local health and wellbeing partners explore potential spare capacity in dispensing services across the network to increase availability of public health services.
- Our recommendations for exploiting the opportunities that community pharmacy offer for improving access to public health services are summarised in section 6.8.5

1.3 Summary – City of London

1.3.1 Demography and health profile

The characteristics of the City’s population can be summarised as follows (section 4.1).

- The size of the resident population (7,879) is larger than the population registered with the one GP practice located in the City (6,234); and a significant minority of residents are registered with out-of-area GPs.
- The City has a comparatively large working age and older resident population.
- The most significant residential populations are clustered towards the north (near the Islington border) and the east (near the border with Tower Hamlets).
- The City is also a major location of employment, which significantly increases the daytime population (by a factor of 56).
- The City is home to one of the largest rough sleeper populations in London.
- The GLA’s SHLAA population projections (which take future housing growth into account) predict that the City’s population will grow by 10% (or 845 people) over the three years covered by the PNA.
- The majority (79%) of City residents identify themselves as ‘white’ ethnicity, a quarter of which ‘other white’ (i.e. not British or Irish).
- Levels of deprivation in the City are low in general, except in the east of the borough.

The main health-related needs in the City, relevant to the PNA, are described below (section 4.2).

- The City is home to a comparatively healthy population, but data is not always available due to small numbers.
- Rates of smoking amongst City workers are higher than average; binge drinking is particularly prevalent amongst City populations (resident and daytime worker) compared with other areas.
- The sizeable rough sleeper population poses additional challenges for local health and public health services.

1.3.2 Summary of our assessment of pharmaceutical services

We have set out below a summary of our assessment of pharmaceutical services in the City of London, in response to the five statements set out in schedule 1 of the regulations.

Schedule 1, para. 1: necessary services – current provision

- We have concluded that essential services, advanced services and locally commissioned services are all necessary to meet a current need for pharmaceutical services in the City of London.
- Section 5.1.1 describes the current provision of pharmaceutical services in the City and section 0 presents the geographical distribution of all community pharmacies.
- There are 16 pharmacy contractors in the City. There are no distance-selling pharmacies, dispensing appliance contractors or dispensing doctors located within the Corporation's boundaries.
- City registered patients also make heavy use of out-of-area pharmacies, for their dispensing needs at least (61% of prescriptions are dispensed elsewhere). (section 0)
- A significant number of City residents, in particular those living in the east, are registered with GPs across the border (in Tower Hamlets) and it is reasonable to expect that some of their pharmaceutical needs will be met by pharmacies that serve these GP practices.

Schedule 1, para. 2: necessary services – gaps in provision

- We have concluded that City residents have access to a comprehensive network of pharmacy contractors, and that this network is sufficient to meet the current need for pharmaceutical services (including essential, advanced and locally commissioned services) and to meet the needs of our population over the period covered by this PNA (up to 2018).
- There were no responses to the patient/public survey to suggest that the needs of any specific communities are currently not being met.
- The pattern of opening hours reflects the expressed demand of the resident and workday population (section 5.1.4).
- There are no DACs in the City, nor do any pharmacies provide AUR or SAC services. However, our analysis of dispensing data has revealed that the majority of stoma and incontinence appliances are supplied by out-of-area specialist providers, who will very likely offer AUR and SAC services to their patients. Two pharmacy contractors have expressed an intention to provide each of these services within the next 12 months. (section 5.2)
- There may also be scope to improve access to locally commissioned services for the resident population in the east of the City, but consideration should be given to the extent to which these needs are currently being met by out-of-area pharmacies.
- Locally commissioned services are deliberately offered only to pharmacies serving the two main residential populations in the north and east of the City. Both of these areas are in very close proximity to neighbouring boroughs

(Islington in the north and Tower Hamlets in the east) and there is evidence of significant cross-border dispensing which reflects this, as described above. On this basis, we have concluded that the pharmaceutical needs of the residential population are well served, both by City and out-of-area pharmacies.

- There is considerable scope to extend access to repeat dispensing services to the benefit of patients. This represents an opportunity for GPs (who must initiate repeat dispensing) and pharmacies to work together to bring the benefits of this service to patients. We recommend that NHS England support the adoption and roll out of repeat dispensing by GP practices. (section 5.1.5)

Schedule 1, para. 3: other relevant services – current provision

- We have concluded that the seasonal flu immunisation service secures better access for our population.
- All other pharmaceutical services described in this report have been assessed as necessary for the provision of adequate services to the population of the City of London.

Schedule 1, para. 4: improvements and better access – gaps in provision

- We have considered population trends, as well as planned housing and related developments, over the period covered by the PNA and how these may impact on the need to secure future improvements or better access to pharmaceutical services.
- We have not identified any need for pharmaceutical services to secure future improvements or better access over the period covered by this PNA.
- The lower than average level of dispensing (section 5.1.5.1) suggests that there is capacity within the system should such a need arise (this assessment will be reviewed in the post consultation report, once 2013-14 benchmarking data has been published).

Schedule 1, para. 5: other services

- Other provision of related services by NHS providers has been considered in our assessment. We have concluded that this provision does not impact on current or potential need for pharmaceutical services.
- There are no plans for the acute trust located in the City (Bart's hospital) to make an application to provide NHS pharmaceutical services.
- There are no plans to expand the number of GP practices or NHS dentists. Plans have been approved by NHS England to enable non-residents (including the commuter population) to register with out-of-area GPs, which could have significant implications for the City; the anticipated implementation date for this scheme is January 2015. This will have an unknown impact on future need for pharmaceutical services.

1.3.3 Summary of our assessment of public health services (section 6)

- Given the continued high rates of smoking amongst City workers in particular, and the convenience of using pharmacies to get support to quit, we have concluded that the stop smoking service is necessary to meet a current local need. There are no gaps in current provision. (section 6.1)
- The pharmacy weight management service offers the potential to secure better access to weight management services in the City. Future service commissioning should be aligned with the new integrated adult obesity service planned for implementation in 2015. (section 6.2)
- We have concluded that supply of Healthy Start vitamins through pharmacies is necessary to meet a current need in the City. There is good access to the service in the areas populated by the largest resident communities. (section 6.3)
- We have concluded that the four elements of the pharmacy sexual health service (EHC, condom distribution, *Chlamydia* screening and treatment) are necessary to meet a current need in the City. Measures should be taken to address the gap in service provision to meet the needs of the residential population in the east of the City. (section 6.4)
- We have concluded that the pharmacy TB DOTS service is necessary to meet a current need in the City, particular for the resident population in the east of the borough. However, no pharmacies in or near this neighbourhood are currently delivering this service, but they may be accessing TB services over the border in Tower Hamlets, where many City residents are registered. TB commissioning does not strictly fall within the remit of local authority public health responsibilities. We recommend that local commissioning of DOTS is reviewed by relevant local partners (City and Hackney Public Health, the CCG, PHE and NHS England) following publication of the new national TB strategy in 2015. (6.5)
- We have concluded that the supervised consumption service and needle exchange service are both necessary to meet a current need in the City. Future commissioning of these public health services should be aligned with the City's new substance misuse service model currently being developed. (section 6.6 and 6.7)
- The dried blood spot testing service for Hepatitis B, C and HIV targets high risk patients (e.g. substance misuse clients and those born in high prevalence countries). It has the potential to improve access to BBV screening and significantly improve outcomes by identifying undiagnosed infection. However, there is poor access to the service locally, particularly among the ethnically diverse population in the east of the City (who may be at increased risk of infection), as well as the large overseas-born population of City workers. In the medium term, we recommend that City and Hackney Public Health, the CCG, PHE and NHS England consider appropriate commissioning arrangements for this service (like TB DOTS, Hepatitis B and C screening does not strictly come under the commissioning remit of local authorities). (section 6.8)

- We recommend that consideration be given to extending the coverage of some public health services (e.g. weight management, sexual health) to a larger network of pharmacies to meet the needs of low paid, potentially high risk City workers. This cannot be funded out of the local public health grant, however. We recommend that NHS England considers how this should be funded.
- We recommend that the Corporation considers commissioning cross-border pharmacies (especially in Tower Hamlets, and also Islington) used heavily by City residents to deliver public health services to meet local need.
- We recommend that local health and wellbeing partners explore potential spare capacity in dispensing services across the network to increase availability of public health services.
- Our recommendations for exploiting the opportunities that community pharmacy offer for improving access to public health services are summarised in section 6.8.5.

2 Introduction and context

A pharmaceutical needs assessment (PNA) is an analysis of the need for pharmaceutical services in a local area. It provides a single point of reference for all information about pharmaceutical services in that area.

Since April 2013, NHS England is responsible for commissioning pharmaceutical services. In particular, it is with NHS England that the power lies to decide whether or not to approve an application from a new provider to be included on a pharmaceutical list (this is commonly known as the 'market entry' system). To be successful, any such application must prove that they are able to meet a pharmaceutical need as set out in the relevant PNA.

Clinical Commissioning Groups (CCGs) and local authorities also have powers to locally commission services from pharmacy providers, including public health services. Both London Borough of Hackney (LB Hackney) and the City of London Corporation have used this opportunity to continue to commission a wide range of public health services from community pharmacies. Currently, City and Hackney CCG does not directly commission any local pharmacy services.

2.1 Responsibility for producing the PNA

The Health and Social Care Act 2012 transferred responsibility for developing and updating PNAs to Health and Wellbeing Boards (HWBBs). Health and Wellbeing Boards are required to publish a revised assessment within three years of publication of their first PNA. The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 set out the legislative basis for producing PNAs.¹

Hackney's and the City's HWBBs have a statutory responsibility to produce a revised Pharmaceutical Needs Assessment (PNA) for the local area by 1 April 2015. The last PNA was produced by the former PCT in April 2011. **This version of the report is a draft for consultation.** The final version will be published following the 60 day consultation period and sign off by the two HWBBs.

The PNA is largely data driven and relies on specialist analytical input to produce much of the analysis. This expertise is provided locally by the public health team, which is located within LB Hackney as the larger partner, but shared with the City of London Corporation. This is an historical arrangement from the pre-transition period when City and Hackney had a joint primary care trust (PCT). LB Hackney and the Corporation still share a Director of Public Health, who sits on both the City and Hackney Health and Wellbeing Board.

Moreover, some data relevant to the PNAs is only available for the two areas combined. For these reasons, we have used a single process to develop a joint PNA report on behalf of the two HWBBs, but containing separate assessments for the City and for Hackney for local use.

¹¹ <http://www.dh.gov.uk/health/2013/02/pharmaceutical-services-regulations>

2.2 Defining pharmaceutical services

Pharmaceutical services are provided by community pharmacies (pharmacy contractors), dispensing appliance contractors, dispensing doctors and local pharmaceutical services (LPS) contractors.² There are no dispensing appliance contractors or dispensing GP practices, in either Hackney or the City of London. And the two extended hours LPS contracts previously commissioned will both be terminated by the date of publication of the PNA.

Hospital based pharmacy services are also provided by local secondary care providers, including Homerton University Hospital NHS Foundation Trust ('Homerton hospital') in Hackney and St Bartholomew's (Bart's) Hospital in the City. The PNA makes no assessment of the need for these services. It is worth noting that currently there is no intention for either of these local providers to submit an application to provide NHS pharmaceutical services.

Table 1 defines pharmaceutical services for the purposes of a PNA – i.e. essential services, advanced services and locally commissioned services. We have also included in the PNA an assessment of public health services commissioned from Hackney (City of London) pharmacies by LB Hackney (the City of London Corporation). It should be noted that **applications must relate to pharmaceutical services** only (i.e. essential, advanced and/or locally commissioned) and should not be submitted on the basis of gaps or needs identified for public health services.

Table 1 Description of community pharmacy services covered by the PNA

<i>Service category</i>	<i>Description</i>
Pharmaceutical services:	
Essential services	Services which must be provided by every community pharmacy that provides NHS pharmaceutical services, as set out in their terms of service Services include the dispensing of medicines, promotion of healthy lifestyles, signposting, support for self-care and disposal of unwanted medicines ³
Advanced services	Services that community pharmacy contractors and dispensing appliance contractors can provide, subject to accreditation as necessary Services include Medicines Use Reviews (MURs) and the New Medicines Service for community pharmacists, and Appliance Use Reviews (AURs) and Stoma Customisation Service for dispensing contractors
Locally commissioned services	Commissioned by NHS England or the CCG
Public health services:	Commissioned by LB Hackney or City of London Corporation

²

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/197634/Pharmaceutical_Needs_Assessment_Information_Pack.pdf (accessed 22.10.2014)

³ <http://psnc.org.uk/services-commissioning/essential-services/> (accessed 22.10.2014)

3 Methods used to develop City and Hackney's PNA

This PNA has been developed using a variety of methods, drawing on a range of information sources (section 3.4) and reinforced through consultation with the public, pharmaceutical service providers and other stakeholders. The process has involved:

- a review of relevant strategies, commissioning plans and the joint strategic needs assessment (JSNA) (see appendix A for a list of documents reviewed and a summary of local health and wellbeing priorities)
- a review of commissioning and prescribing data
- a survey of patients and the public (section 3.3 and appendix B)
- a survey of community pharmacy contractors (see appendix C)
- a 60-day public consultation period (commencing on 31 October 2014).

3.1 Governance

The development of the PNA was led by a dedicated task and finish group, chaired by City and Hackney public health team. The task and finish group was chaired by a public health consultation and included data analysts, communications and consultation specialists and an external pharmacy consultant who was involved in the development of the 2011 City and Hackney PNA.

Operational oversight was provided by a 'virtual' steering group, members of which are listed below, who were invited to all task and finish groups and to feed in to the PNA process at every stage of development:

- Head of Medicines Management, City and Hackney CCG
- Chief Executive of the Local Pharmacy Committee (LPC)
- Chair of the Local Medical Committee (LMC)
- Healthwatch Hackney
- Healthwatch City of London
- NHS England local area team representative.

Appendix D lists the members of the task and finish group and the 'virtual' steering group.

Strategic oversight was provided by the two Health and Wellbeing Boards through their PNA sponsor, the Director of Public Health.

3.2 Defining localities for the purpose of the assessment

The PNA regulations require each Health and Wellbeing Board to determine the relevant localities within its area for the purpose of the needs assessment. In the 2011 PNA, a decision was taken to divide Hackney into electoral wards and retain one locality for the City of London. This time, the task and finish group considered that this level of analysis was too small to be able to produce a meaningful assessment in terms of access to pharmaceutical services, so we have reverted to using the four Hackney neighbourhood areas used for local consultation purposes (Stoke Newington, North East, Homerton and Shoreditch). These

areas map well to the pre-2014 ward boundaries on which most of the data available for this year's PNA is based.

Due to the small residential population in the City of London, the City has again been treated as a single locality, but where relevant consideration has been given to the concentration of the resident populations towards the north and east of the Corporation's boundaries (see section 4.1).

People move freely across borders, both within and between local authority boundaries, especially in densely population areas. Many local pharmacies are located on main roads, either in secondary shopping areas or close to transport infrastructure, and many of these main roads form a border between the localities. This means that a number of pharmacies in the City and in Hackney are sited on a border between localities (although fewer than if we were using ward boundaries).

In order to assess the accessibility of pharmaceutical services to the local population in the context of this significant population movement, we have also identified community pharmacies that are in close proximity to each of the localities. This includes pharmacies *within* Hackney and the City borders and, where information is available, we have also provided an assessment of services available from pharmacies in close proximity but in neighbouring boroughs. 'Close proximity' is defined throughout as being located within 0.25 miles, or roughly five minutes' walk of a locality.

Hackney shares a border with six other local authorities:

- Islington (substantial populated border)
- Haringey (populated in parts to the north of Hackney)
- Waltham Forest (substantial, but sparsely populated, border along the Lee Valley)
- Newham (very short border to the east of Hackney)
- Tower Hamlets (substantial border populated in parts to the east of Hackney)
- City of London (very short border to the south of Hackney).

The City of London shares a border with seven local authorities:

- Westminster (short border)
- Camden (very short border)
- Islington (populated border to the north of the City)
- Tower Hamlets (populated border to the east of the City)
- Southwark (Thames border)
- Lambeth (Thames border)
- Hackney (very short border to the north of the City).

We have also examined patterns of cross-border prescriptions dispensing, to assess which out-of-area pharmacies are used most frequently by local residents for this purpose. The assumption being that if people are using these pharmacies for dispensing purposes, they may well use them for other services.

3.3 Patient and public engagement

Our approach to engaging with the public in developing this PNA has been as inclusive as possible.

A short questionnaire was developed by City and Hackney's public health team, in consultation with the task and finish group and members of the virtual steering group. The questionnaire was uploaded to London Borough of Hackney's consultation page, where it was hosted on behalf of the two HWBBs. Paper copies of the questionnaire were also distributed to all pharmacies and GP practices across the City of London and Hackney. The survey was also disseminated via an email link, and in hard copy where requested, through the following partner organisations:

- Healthwatch Hackney
- Healthwatch City of London
- Hackney CVS
- Hackney Health and Social Care Forum (HSCF)
- Age UK East London
- Hackney Homes and other registered social landlords
- Hackney Drug and Alcohol Team
- Hackney Caribbean Elderly Organisation
- Choice in Hackney (advocacy and independent living service for people with disabilities)
- Hackney Chinese Community Services
- Hackney Bereavement Project
- Open Doors (a confidential advice service for sex workers).

We received 836 responses to the survey in total (see appendix B for further details). Ninety five responses were received from people who live or work in the City and 668 from people living or working in Hackney.⁴ This is a significantly larger response than in 2011, when a total of 198 surveys were returned. In addition, we attended a learning disability user forum in Hackney to find out their views and interviewed a representative from Hackney Refugee Forum.

Feedback from the survey and discussions has been incorporated into the report throughout. It should be noted that, in reporting the survey findings, we have sought to only include results that represent an apparent trend in the views of local people in Hackney or the City, rather than describe the opinions of single respondents.

We also reviewed a number of previous consultation reports provided by Healthwatch Hackney and HSCF that contained information about local views of pharmacy-related services. Findings of relevance to the PNA have been included in this report.

⁴ It was not possible to ascertain location of work or residence in the case of 97 respondents; and 24 respondents were counted twice as they stated that they worked in both the City and Hackney (but lived in either one or neither).

3.4 Data and information sources

This report draws on data from a wide range of different sources, as described in Table 2.

Table 2 Data sources for the PNA

<i>Topic</i>	<i>Source</i>
Population data	GLA 2013 Round SHLAA population projections HSCIC, July 2014 (GP registrations) Census 2011 (ethnic group analysis, population density) Index of Multiple Deprivation (IMD2010)
Health needs	City and Hackney Health and Wellbeing Profile: data update 2014 (the JSNA) City worker public health and primary healthcare needs assessment ONS (infant mortality, life expectancy) Clinical Effectiveness Group (locality disease prevalence, smoking prevalence) Quality Outcomes Framework (disease prevalence comparators) Health Survey for England (smoking prevalence) Public Health England (local alcohol profiles for England, sexual and reproductive health profiles, TB incidence, sports participation) National Child Measurement Programme (child obesity) Orthodox Jewish Health Needs Assessment (City and Hackney PCT, 2010) University of Glasgow and Liverpool John Moores University (substance misuse estimates)
Essential services (including pharmaceutical lists and opening hours)	NHS England (pharmaceutical lists, opening hours) HSCIC (comparators)
Advanced services	NHS England HSCIC (comparators)
Locally commissioned services	NHS England
Dispensing	City and Hackney CCG HSCIC (comparators)
Public health services	Sonar (stop smoking service) Webstar Health (all other services)

4 Population demographics and health profile

This chapter summarises the demographic and health characteristics of the local populations of Hackney and the City that are relevant to our assessment of need for pharmaceutical services. It concludes with a summary of our assessment of the needs of different groups defined by one of the nine ‘protected characteristics’ covered by equalities legislation.

4.1 Demography

This section describes local population size, composition and anticipated future trends.

4.1.1 Population estimates

According to GLA estimates for 2014, the resident population of Hackney is 254,459, and the City of London 7,879. There are 272,613 GP registered patients resident in Hackney, which is larger than the resident population. This is thought to be largely due to a mobile population, particularly working age males, who do not ‘de-register’ promptly when they move out of the borough. Estimates of the proportion of the population of Hackney who are not registered with a GP range from 5% to 13% (JSNA 2014). In the City, 6,234 residents are registered with a GP, most of whom (over 80%) are registered with the one practice located in the north of the City, but a significant minority are also registered with practices in Tower Hamlets and Camden.

The distribution of the local populations across the City and Hackney localities are shown in Table 3.

It should also be noted that the City has one of the highest numbers of rough sleepers in London; on average, 20-25 people sleep on the streets of the City of London every night. A total of 366 rough sleepers were known to services in the City in 2010/2011.⁵

Table 3 Number of residents and registered patients in the City of London and Hackney localities

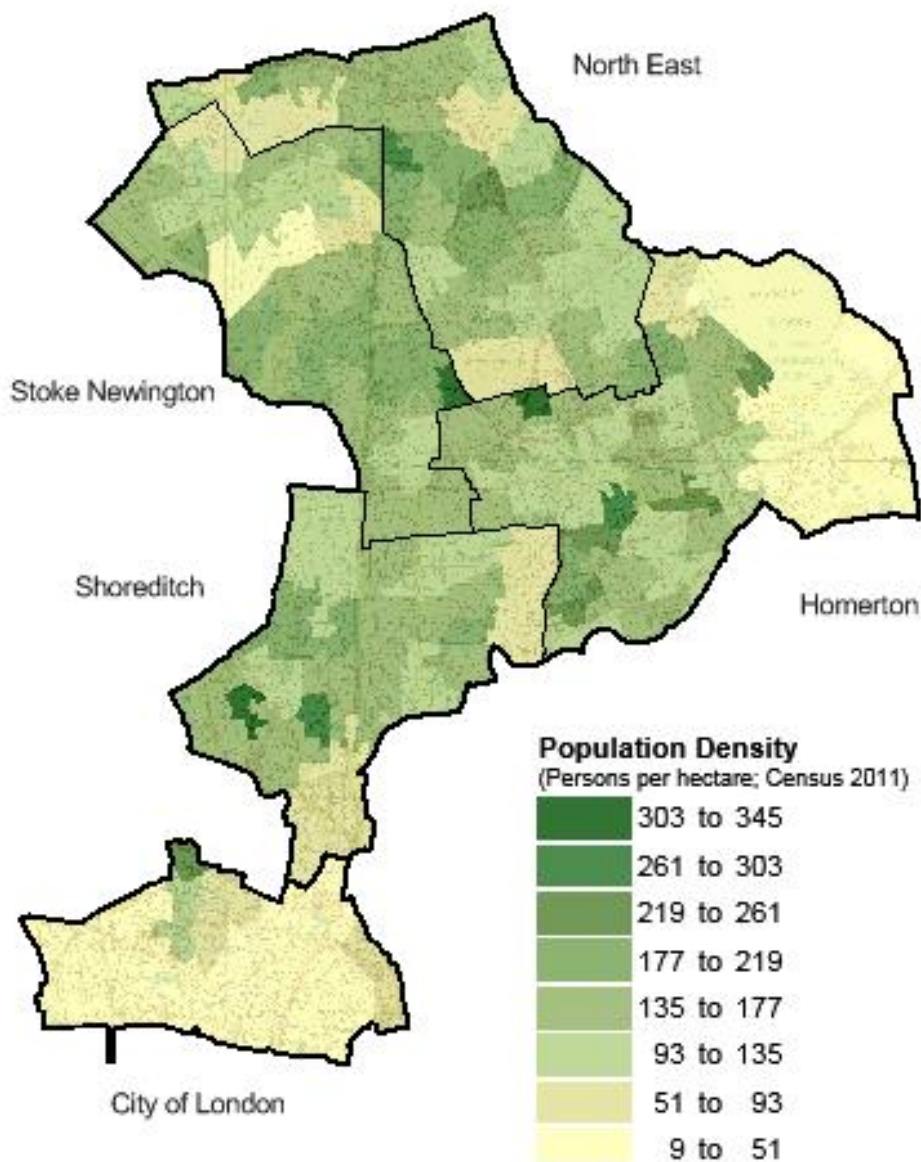
Locality	Residents^a		GP registered^b	
	Population	% (Hackney)	Count	% (Hackney)
City	7,879	--	6,234	--
Homerton	63,074	24.8%	69,797	25.6%
North East	66,939	26.3%	71,036	26.1%
Shoreditch	59,131	23.2%	61,822	22.7%
Stoke Newington	65,315	25.7%	69,958	25.7%

^a GLA 2014; ^b Source: HSCIC July 2014 (based on 2011 LSOA areas with E01033701 divided between 2 Wards)

⁵ <http://www.hackney.gov.uk/Assets/Documents/City-and-Hackney-Health-and-Wellbeing-Profile-2011-12.pdf> (accessed 22/10/2014)

The population density of each of the localities is shown in Figure 1. The map shows some very high localised concentrations of residential population in the centre and towards the south of Hackney and also in the north of the City (near the Barbican estate). The east of the City also contains a small, but important, residential population near the border with Tower Hamlets.

Figure 1 **Population density in Hackney and the City of London (Census 2011)**



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4.1.2 Age Profile

Compared to England, London has a younger population profile, with more 20 to 45 year olds and young children.

Table 4 and Table 5 show the numbers in each age band in the City and each Hackney locality, for males and females separately. The local population age profile is summarised in Figure 2, and further detailed in Figure 3 to Figure 7 for each locality.

Table 4 Number of males by age band in City of London and Hackney locality (GLA 2014)

<i>Age band</i>	<i>City</i>	<i>Homerton</i>	<i>North East</i>	<i>Shoreditch</i>	<i>St Newington</i>
0--4	110	2,454	3,563	1,773	2,530
5--9	97	2,150	2,721	1,492	1,946
10--14	88	1,815	2,252	1,270	1,557
15--19	113	1,882	2,053	1,331	1,552
20--24	315	2,316	2,189	2,594	1,931
25--29	560	3,416	3,564	4,911	4,520
30--34	509	3,707	4,005	4,867	5,097
35--39	353	2,782	2,987	3,235	3,540
40--44	353	2,298	2,266	2,267	2,452
45--49	395	1,991	1,932	1,834	2,080
50--54	354	1,682	1,696	1,399	1,696
55--59	296	1,313	1,344	1,051	1,181
60--64	246	940	1,013	731	916
65--69	214	749	713	645	680
70--74	140	600	574	476	470
75--79	116	460	501	352	426
80--84	60	271	306	227	275
85--89	51	144	147	114	152
90+	17	68	78	52	85

Table 5 **Number of females by age band in City of London and Hackney locality (GLA 2014)**

<i>Age band</i>	<i>City</i>	<i>Homerton</i>	<i>North East</i>	<i>Shoreditch</i>	<i>St Newington</i>
0--4	136	2,357	3,480	1,711	2,401
5--9	100	2,119	2,723	1,462	1,915
10--14	78	1,788	2,241	1,270	1,527
15--19	147	1,864	2,027	1,442	1,523
20--24	342	2,853	2,775	2,920	2,309
25--29	461	4,171	4,048	5,038	4,909
30--34	356	3,830	3,710	4,255	4,722
35--39	290	2,981	2,749	2,687	3,355
40--44	251	2,458	2,148	2,043	2,442
45--49	254	2,224	1,963	1,757	2,127
50--54	226	1,818	1,766	1,346	1,793
55--59	206	1,336	1,379	1,079	1,206
60--64	208	1,054	1,012	818	1,022
65--69	193	840	803	674	834
70--74	135	615	602	506	586
75--79	104	509	482	408	455
80--84	76	376	326	302	341
85--89	62	224	219	202	228
90+	30	125	131	111	145

Figure 2 **Comparison of child, working age, and older populations in the City and Hackney localities (GLA 2014)**

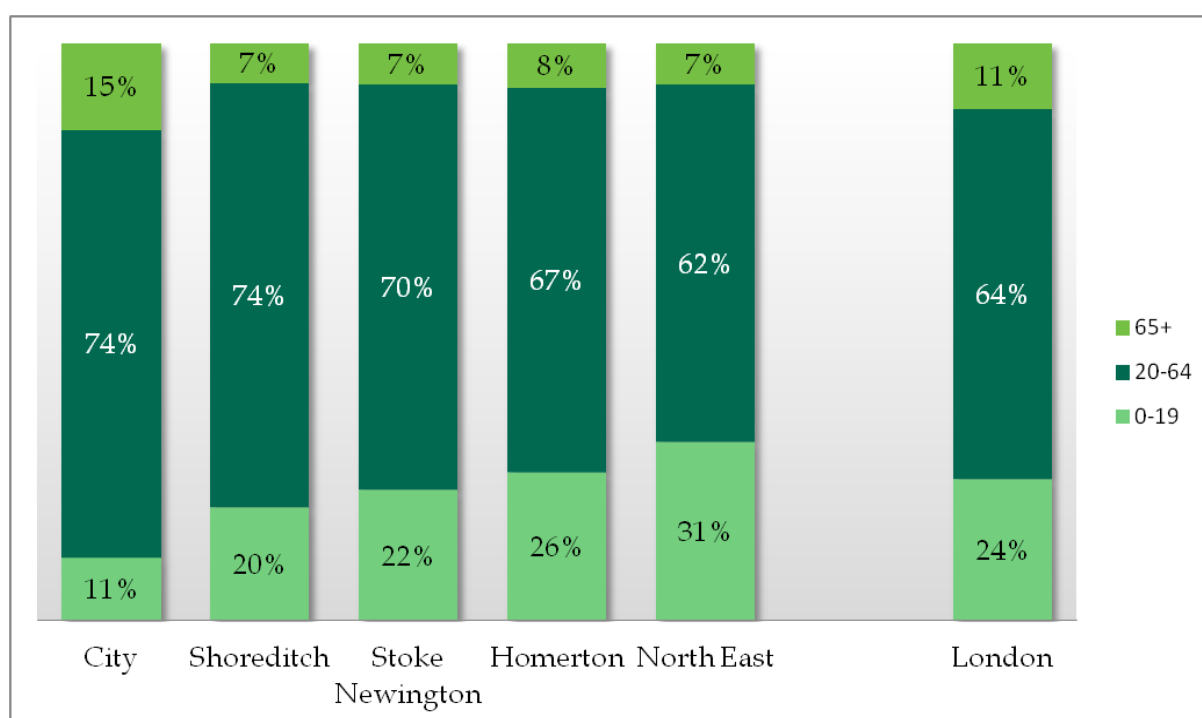


Figure 3 shows that the resident population of the City of London contains a smaller proportion of children compared to London as a whole, and a larger working age and older population (25 to 69 year old males in particular).

Alongside its small resident population, the City of London is a major location of employment. In the 2011 Census, a total of 360,075 people reported a workday location within the City. Most female City workers are in their mid-20s to mid-30s, while most men are in their mid-20s to mid-40s. A total of 61% of City workers are male.

The Homerton locality has a population profile similar to London as a whole, though with a larger proportion of 25 to 34 year olds and relatively lower numbers of older people (Figure 4).

The North East locality contains the largest 0 to 9 population in Hackney, and a slightly higher proportion of 25 to 34 year olds than the London average. There are lower numbers of elderly people (Figure 5).

The Shoreditch locality has a particularly large 25 to 35 population compared to London and the rest of Hackney (Figure 6). There are smaller than average child and older populations resident here.

Stoke Newington locality contains a population profile with high numbers of 25 to 39 year olds compared to London (Figure 7). As with other parts of Hackney, there are relatively lower numbers of older people living in this locality.

Figure 3 Comparison of the resident City of London population with London by age band and gender (GLA 2014)

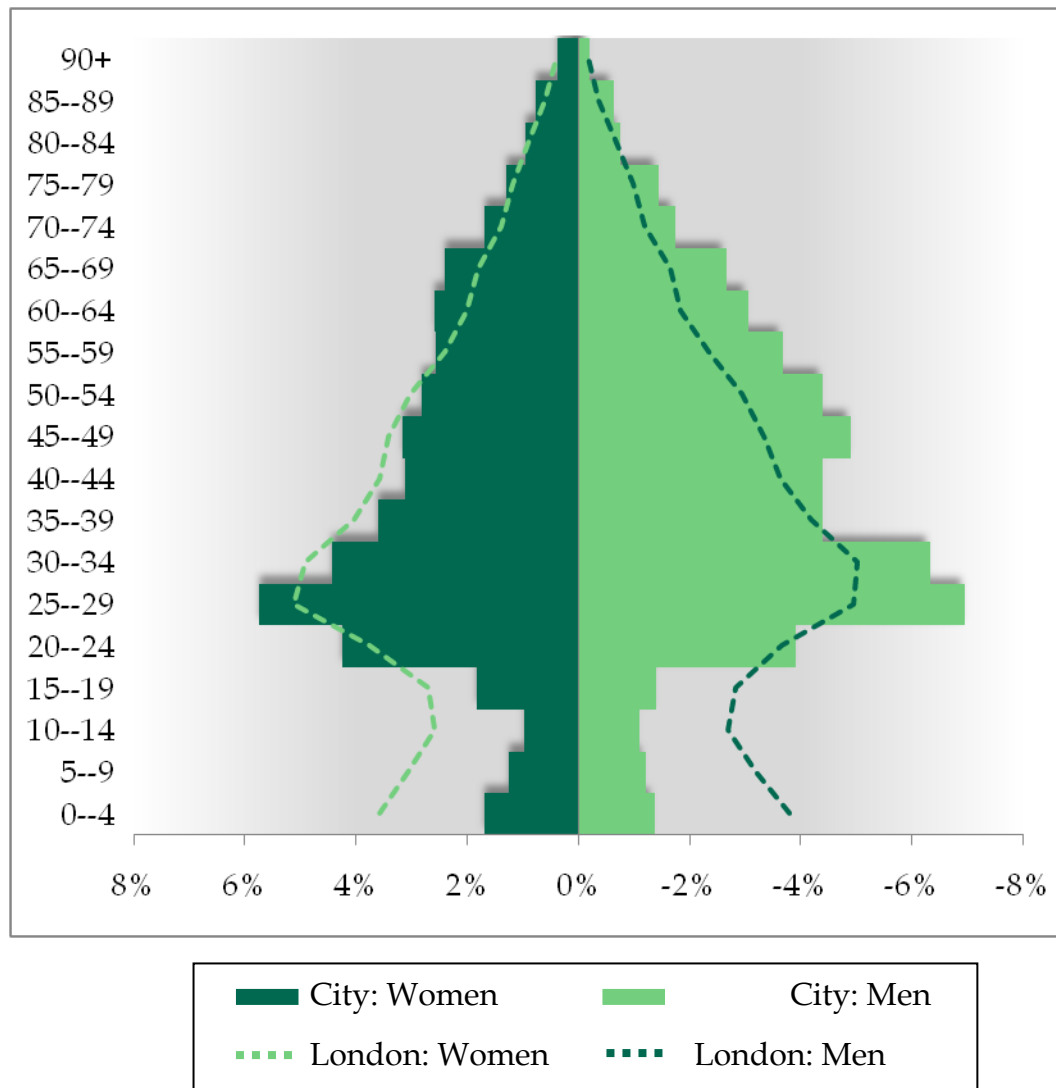


Figure 4 Comparison of the resident Homerton population with London by age band and gender (GLA 2014)

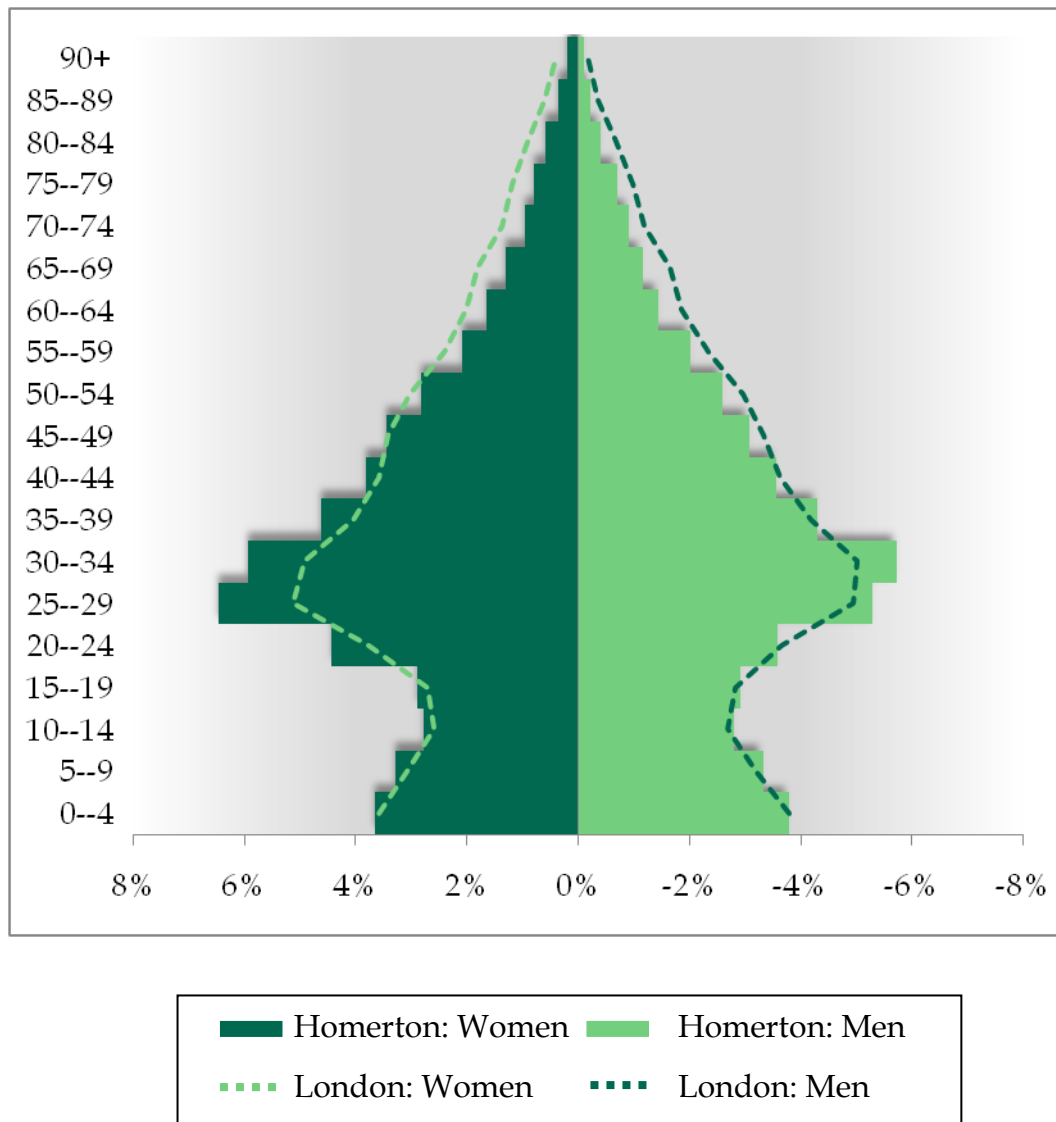


Figure 5 Comparison of the resident North East population with London by age band and gender (GLA 2014)

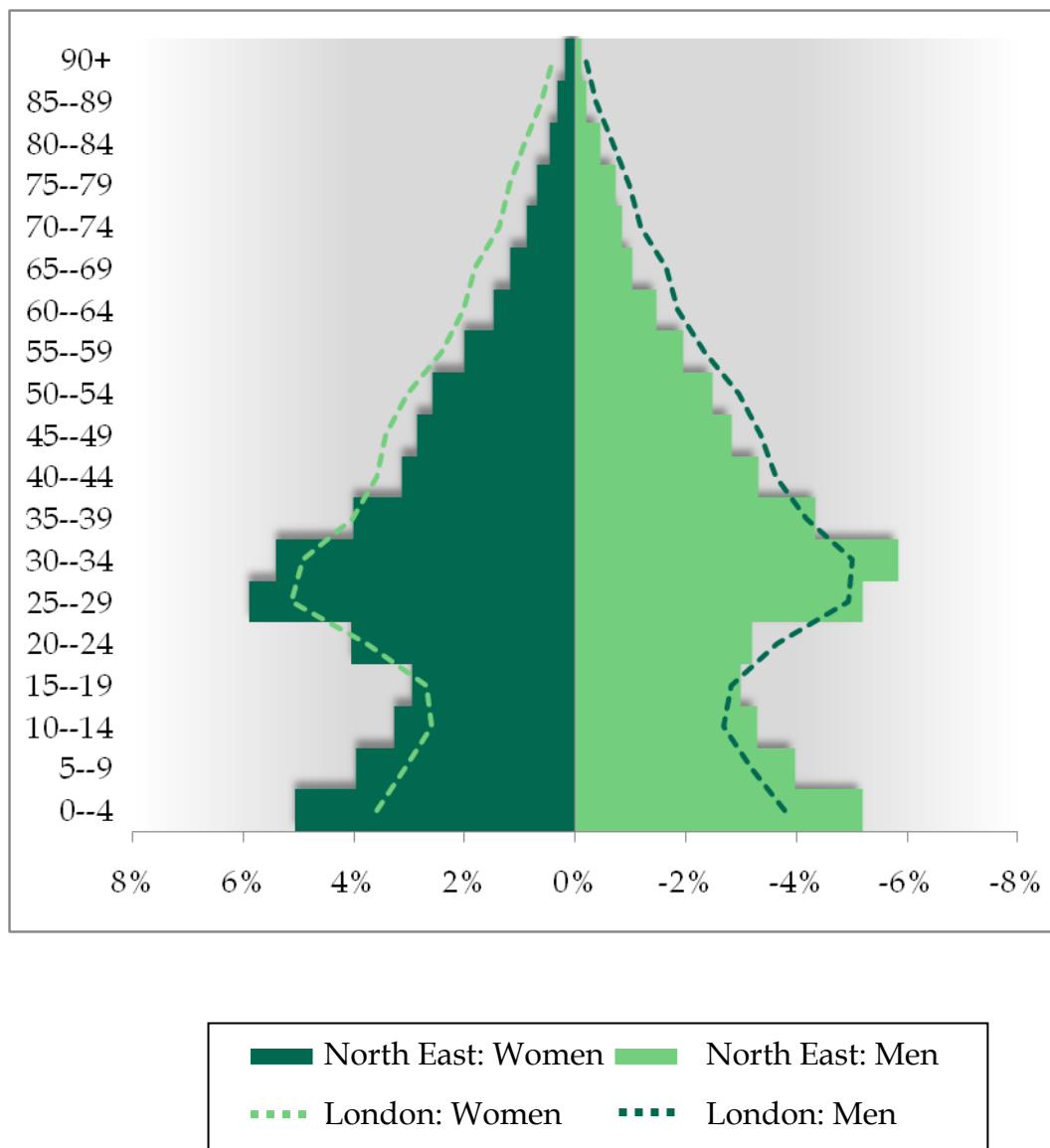


Figure 6 Comparison of the resident Shoreditch population with London by age band and gender (GLA 2014)

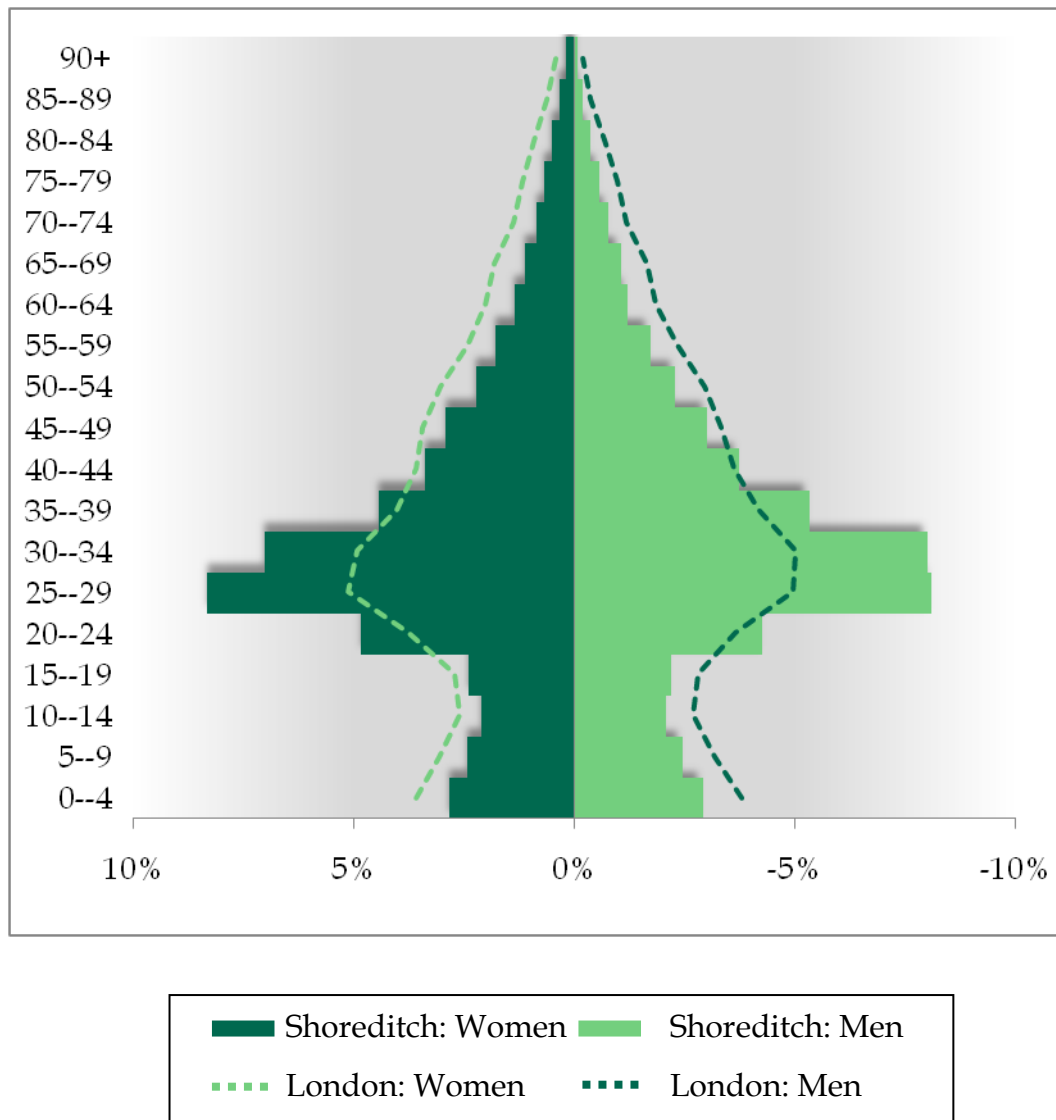
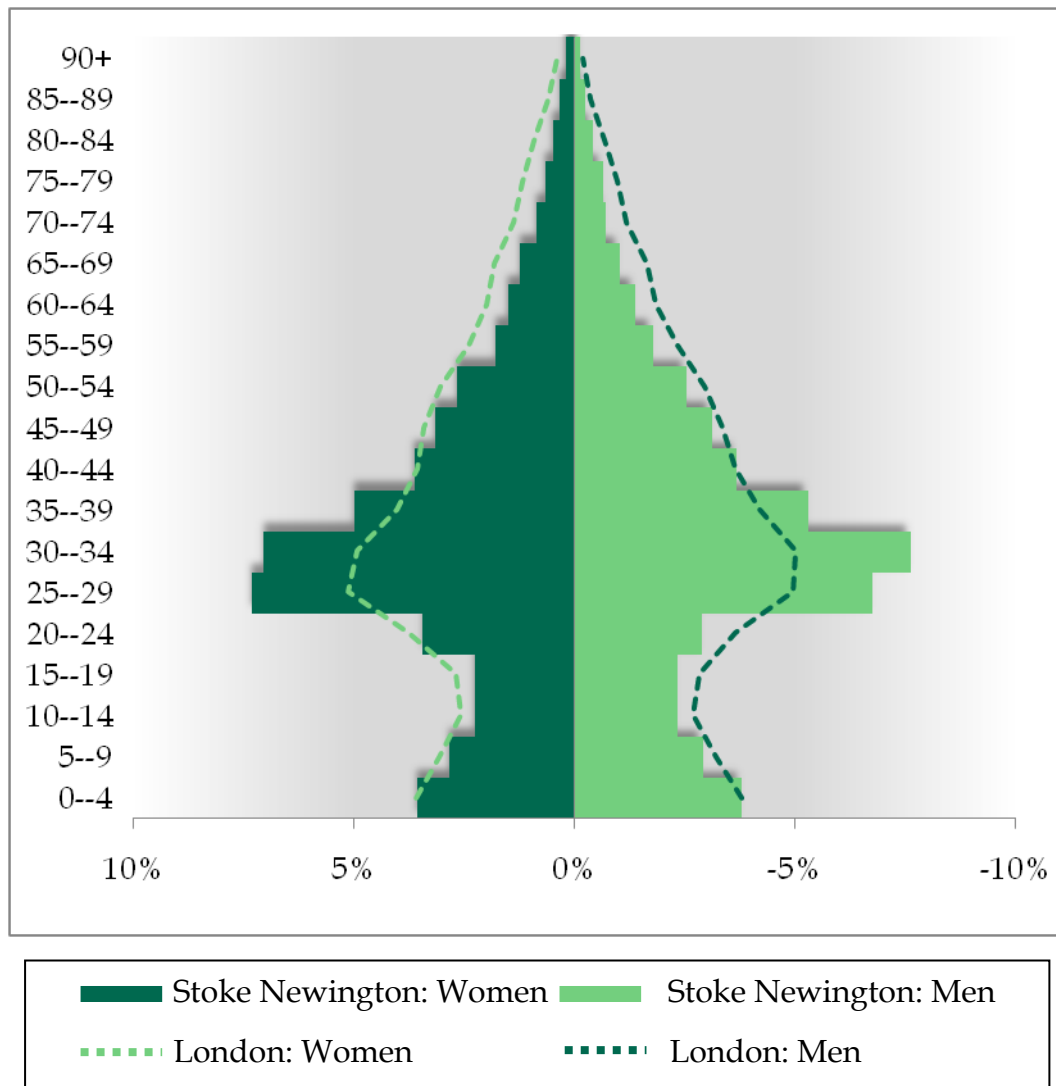


Figure 7 Comparison of the resident Stoke Newington population with London by age band and gender (GLA 2014)



Implications for the PNA

Older people and families with children are heavier users of pharmacy services and areas with these populations are more likely to access services regularly. Most of both the Hackney and City respondents to our patient and public survey said that they had used a pharmacy at least once in the past month (88% in each area) and this proportion increases with age in both areas.

The fact that many City residents are not registered with a GP in the City has implications for our assessment of pharmaceutical services, as many residents may be accessing services from pharmacies close to GP practices in neighbouring boroughs.

City workers tend to be younger than the general adult population, and therefore can be expected to be healthier. However, some data suggest riskier behaviour (e.g. higher rates of problem drinking and smoking), which may affect need for pharmacy services (see section 4.2).

4.1.3 Population Projections

The GLA and the ONS both produce trend-based population projections. In London, an additional key factor in predicting population growth is considered to be housing capacity. The GLA uses information from the 2013 London Strategic Housing Land Availability Assessment (SHLAA),⁶ which take into account future housing growth, to produce a set of SHLAA based population projections. The figures reported here are based on these projections.

Population estimates take account of residents of care homes. We are not aware of any plans to increase current capacity or open any new care homes in either Hackney or the City over the period covered by the PNA (up to 2018).

The projections indicate that the residential population of the City will grow by 41% over the next 20 years, from 7,879 in 2014 to 11,127 in 2034. The residential population of Hackney is expected to grow by 19% over this same period, from 254,459 to 301,961. Within Hackney, population growth varies for each area, as shown in Table 6 and Figure 8, with the largest growth anticipated in Homerton locality.

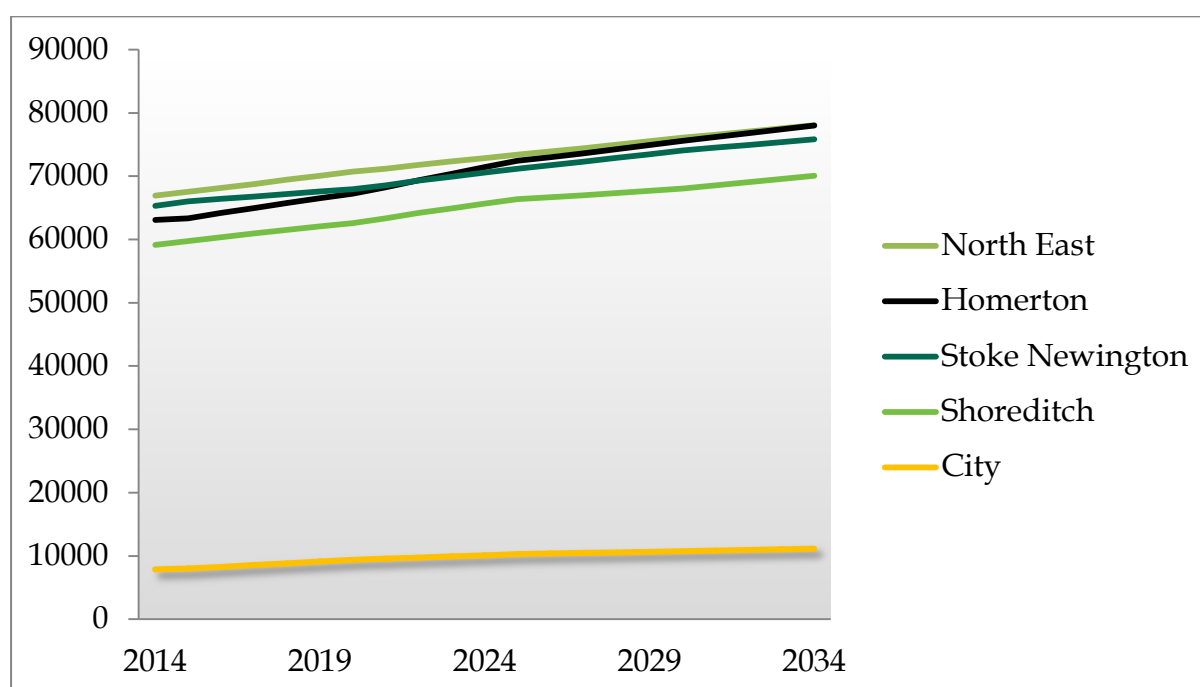
Over the three year period covered by this PNA (2015-2018), the population of the City of London is projected to grow by 10% (or 845 people); the population of Hackney localities is anticipated to grow between 2.8% (North East locality) and 3.8% (Homerton locality).

⁶ The London strategic Housing Land Availability Assessment 2013 - <http://www.london.gov.uk/sites/default/files/FALP%20SHLAA%202013.pdf> (accessed 21.10.2014)

Table 6 Projected population growth in the City and Hackney localities (GLA SHLAA 2013)

Year	City	Homerton	North East	Shoreditch	Stoke Newington
2014	7,879	63,074	66,939	59,131	65,315
2019	9,102	66,519	70,072	62,083	67,584
2024	10,104	71,409	72,849	65,647	70,564
2029	10,656	74,924	75,514	67,664	73,466
2034	11,127	78,000	78,048	70,081	75,832
% growth	41%	24%	17%	19%	16%

Figure 8 Projected population growth in the City and Hackney localities (GLA SHLAA 2013)



Alongside population growth, the population *structure* of the area is expected to change over the next 20 years (Table 7 and Figure 9 to Figure 13).

In each area, only a small overall growth in the number of 0-19 year olds is expected (apart from Shoreditch where a slight decline is projected), with this group expected to decline as a proportion of the growing population.

In all Hackney localities, the population of working age people (20-64 year olds) is expected to grow in line with overall population growth, maintaining a similar proportion of the population. In the City of London, the numbers of working age people is expected to grow, but to decline by 5% as a proportion of the population.

Populations of older people are also expected to grow, in absolute terms and as a share of the population – by 2-3% in the Hackney localities, and by 6% in the City of London.

Table 7 Population projections by age band in the City and Hackney localities (GLA SHLAA 2013)

<i>Locality</i>	<i>Year</i>	<i>0-19</i>	<i>20-64</i>	<i>65+</i>	<i>Total</i>
City of London	2014	848	5,849	1,183	7,879
		11%	74%	15%	
	2019	972	6,687	1,443	9,102
		11%	73%	16%	
	2024	1,081	7,286	1,737	10,104
		11%	72%	17%	
	2029	1,115	7,504	2,037	10,656
		10%	70%	19%	
	2034	1,121	7,653	2,353	11,127
		10%	69%	21%	
Homerton	2014	16,149	41,995	4,930	63,074
		26%	67%	8%	
	2019	16,362	44,856	5,301	66,519
		25%	67%	8%	
	2024	17,255	48,140	6,014	71,409
		24%	67%	8%	
	2029	17,674	50,255	6,995	74,924
		24%	67%	9%	
	2034	17,858	52,116	8,026	78,000
		23%	67%	10%	
North East	2014	20,703	41,404	4,832	66,939
		31%	62%	7%	
	2019	21,445	43,204	5,423	70,072
		31%	62%	8%	
	2024	22,173	44,445	6,231	72,849
		30%	61%	9%	
	2029	22,551	45,723	7,240	75,514
		30%	61%	10%	
	2034	22,622	47,237	8,189	78,048
		29%	61%	10%	
Shoreditch	2014	11,546	43,553	4,032	59,131
		20%	74%	7%	
	2019	11,480	46,265	4,338	62,083
		18%	75%	7%	
	2024	11,674	49,005	4,968	65,647
		18%	75%	8%	
	2029	11,565	50,337	5,762	67,664
		17%	74%	9%	
	2034	11,425	51,931	6,725	70,081
		16%	74%	10%	
Stoke Newington	2014	14,688	45,995	4,632	65,315
		22%	70%	7%	
	2019	14,997	47,566	5,021	67,584
		22%	70%	7%	
	2024	15,462	49,583	5,519	70,564
		22%	70%	8%	
	2029	15,603	51,478	6,385	73,466
		21%	70%	9%	
	2034	15,545	53,007	7,280	75,832
		20%	70%	10%	

Figure 9 Population projections by age band in the City of London (GLA SHLAA 2013)

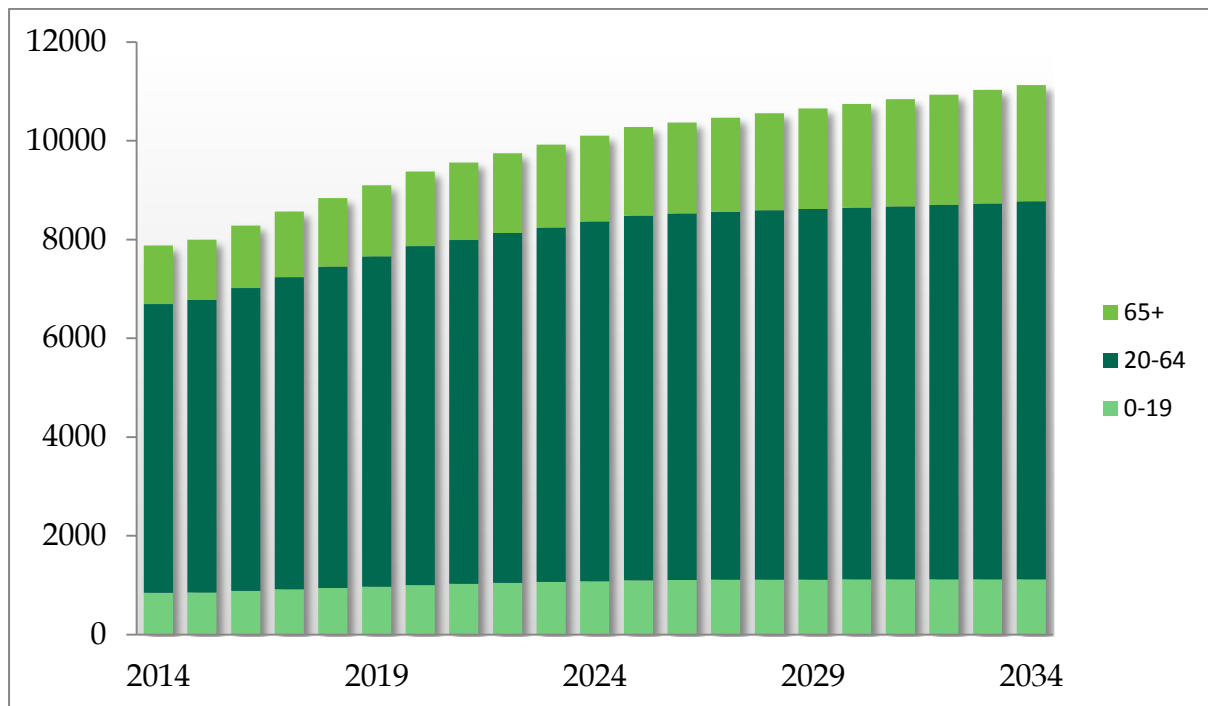


Figure 10 Population projections by age band in Homerton locality (GLA SHLAA 2013)

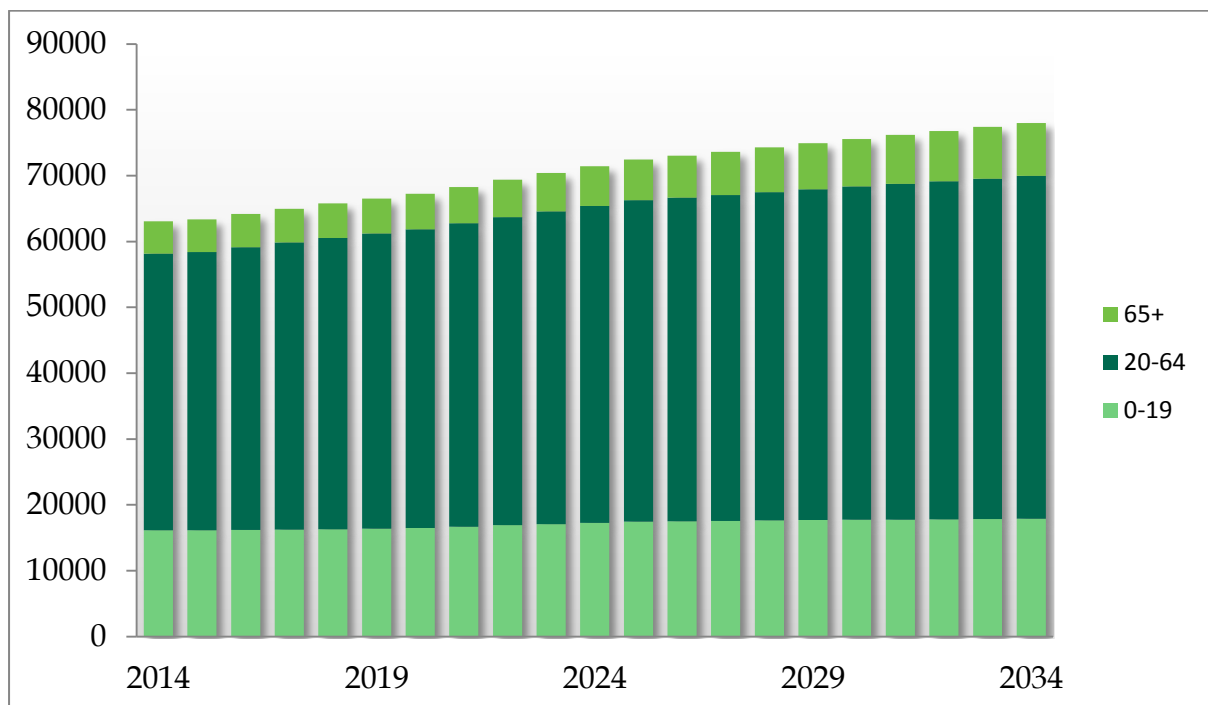


Figure 11 Population projections by age band in North East locality (GLA SHLAA 2013)

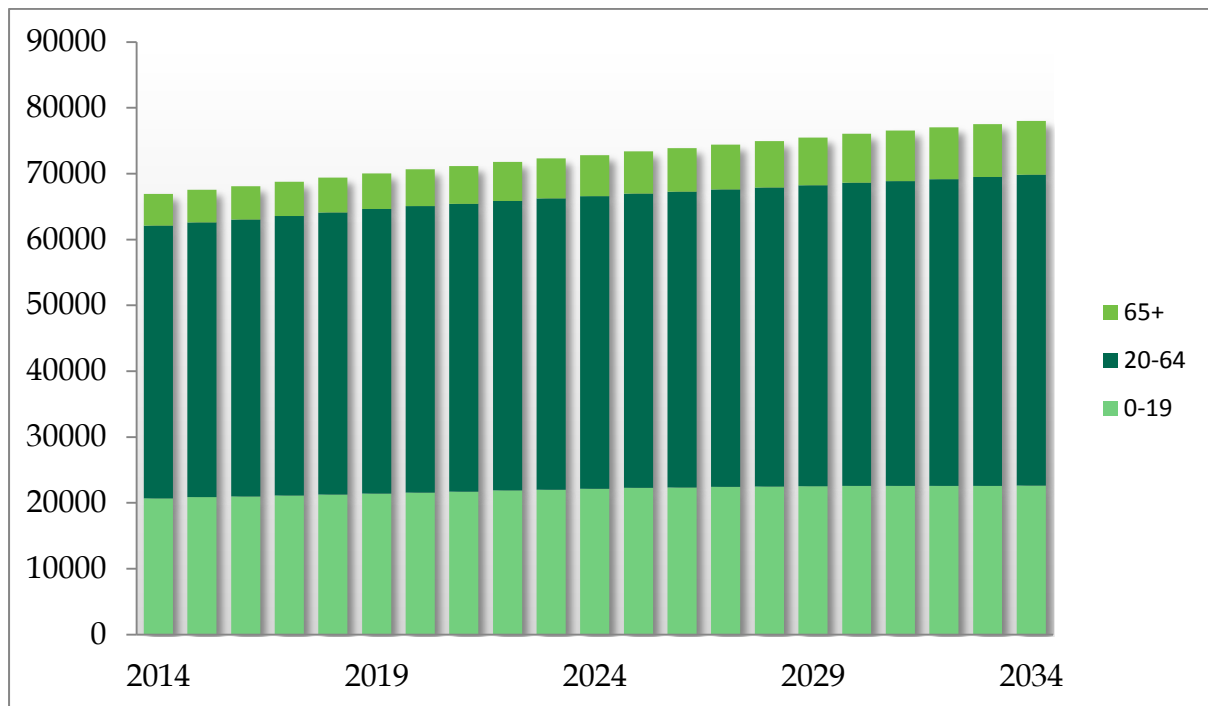


Figure 12 Population projections by age band in Shoreditch locality (GLA SHLAA 2013)

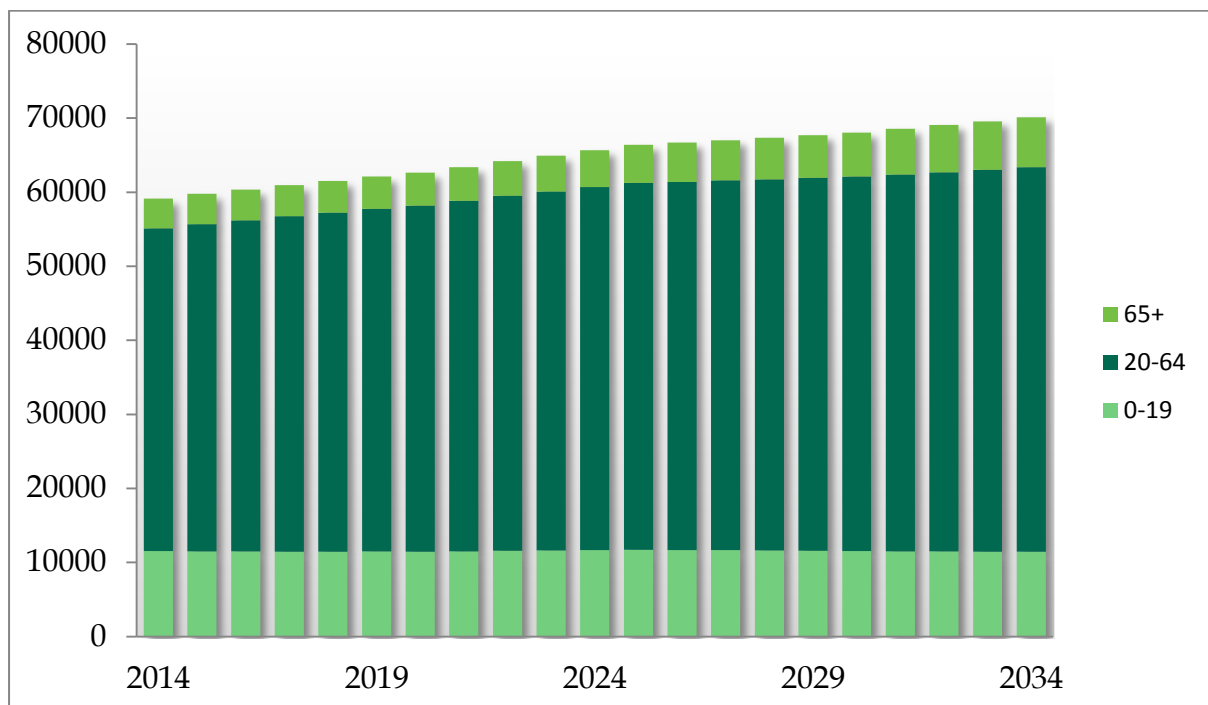
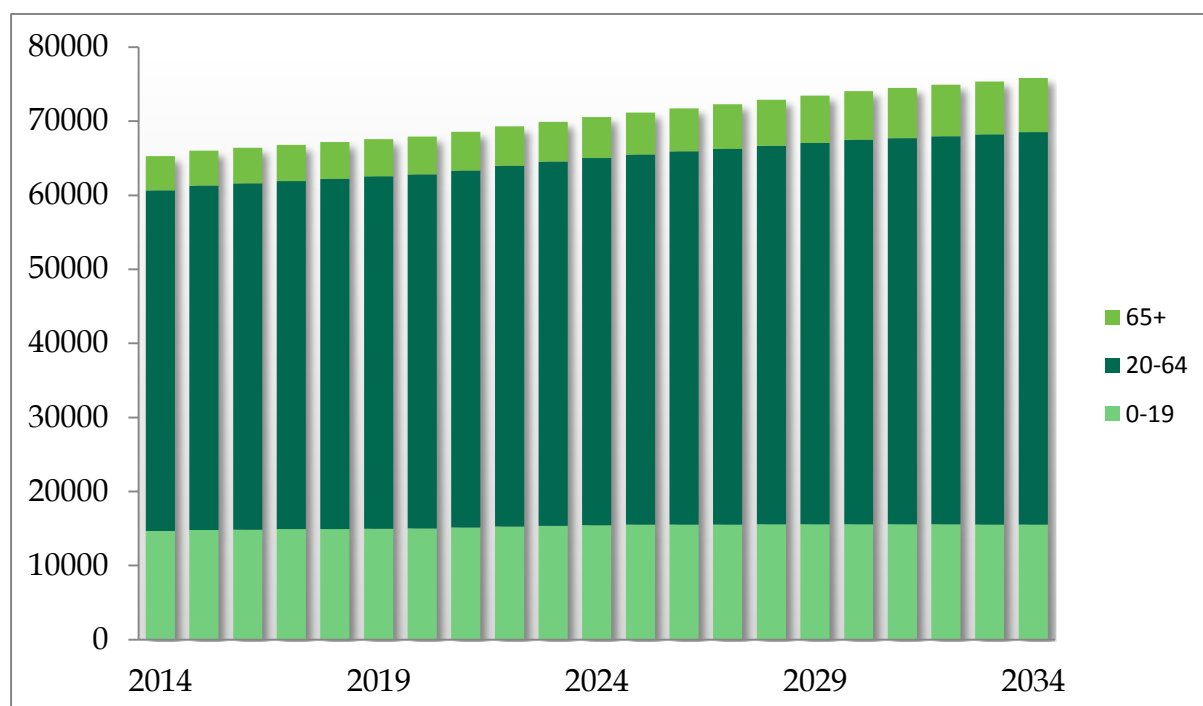


Figure 13 Population projections by age band in Stoke Newington locality (GLA SHLAA 2013)



The SHLAA forms the foundation for the housing targets in the London Plan (the Mayor of London's strategic plan for London) and Local Plans. The London Plan requires Hackney to make sufficient land use provision for a minimum of 1,160 net new additional dwellings per year through to 2018.⁷ Over 20,000 new homes are expected to be built in the borough in the next 15-20 years, with Stoke Newington, Shoreditch and Homerton localities expected to see the biggest growth.⁸

The City's Local Plan contains a target to increase the number of homes by 110 each year (expected to increase to 141 from 2015), which will result in a modest but sustained growth in the number of residents. The Local Plan requires that new housing development should take place within existing residential areas.⁹

The City's economy is projected to grow significantly over the next 10 years, with employment expected to reach 428,000 by 2026. In Hackney, there has been steady business growth in recent years, mostly in the small/start-up sector, but employment is forecast to level off and begin to decline by 2020.

⁷ <http://www.hackney.gov.uk/Assets/Documents/Adopted-LDF-Core-Strategy-final-incchaptimagescov-Dec2010-low-res.pdf> (accessed 21.10.2014)

⁸ *A Profile of Hackney, its People and Place*. LB Hackney Policy Team. May 2013.

⁹ www.cityoflondon.gov.uk/services/environment-and-planning/planning/development-and-population-information/demography-and-housing/Pages/default.aspx (accessed 21.10.2014)

Implications for the PNA

The forecast period described in this section exceeds the scope of the PNA as set out in the regulations, which stipulate that the assessment should be refreshed every three years. However, it is important to note the predicted trend for higher growth locally than in England as a whole.

The resident population in each of the Hackney localities, and the City of London, is expected to grow rapidly over the next 20 years. This is expected to increase demand for services, including community pharmacy services, across the area.

The child population will generally increase more slowly and decline as proportion of the population. The older population is expected to grow most rapidly, particularly in the City of London. Pharmaceutical services will need to reflect the additional needs of these residents in future, including support to an increasingly older population to manage their long-term conditions and live independent lives.

We have concluded that the existing network of pharmacy contractors is sufficient to meet the pharmaceutical needs of the resident population in Hackney over the three year period covered by the PNA.

We have concluded that the existing network of pharmacy contractors is sufficient to meet the pharmaceutical needs of the resident and workday population in the City over the three year period covered by the PNA.

4.1.4 Ethnicity

The population of the City and Hackney in particular is very ethnically diverse, with the 2011 Census showing that just 38% of Hackney's residents identify themselves as white British or Irish. The comparable figure in the City is 60%. A further 16% of Hackney residents and 19% of City residents classify themselves as 'other' white. The total 'white' population in Hackney is 55% and in the City it is 79%.

The ethnic composition of the community varies across Hackney localities, with Homerton and then the North East having the largest non-white British or Irish population. Homerton locality has a particularly large black African and Caribbean community, while the North East contains a significant minority Indian population as well as large 'other white' and 'other' communities (Table 8). The large number of residents classified as 'other white' and 'other' reflects the preponderance of Turkish and Kurdish, eastern European and Charedi orthodox Jewish people living in Hackney in particular. None of these groups are clearly identifiable using the Census categorisations of ethnicity.

The largest population of Charedi orthodox Jews in the UK live in the Stamford Hill area, concentrated in the North East and Stoke Newington localities (with a smaller number living across the border in Haringey). The population is thought to amount to around 15,000 to

20,000 people across the borough.¹⁰ This community contains a particularly large population of younger children.

The City worker population is 79% white (including White British, Irish and 'other' white).

Table 8 Percentage of area populations in different ethnic groups (Census 2011)

<i>Ethnic Group (%)</i>	<i>City of London</i>	<i>Homer-ton</i>	<i>North East</i>	<i>Shore-ditch</i>	<i>Stoke Newing-ton</i>	<i>London</i>	<i>Englan-d /Wales</i>
White							
British	57.5	32.3	33.8	36.3	42.2	44.9	80.5
Irish	2.4	2.0	1.6	2.2	2.6	2.2	0.9
Gypsy/Irish Traveller	0.0	0.3	0.2	0.1	0.1	0.1	0.1
Other White	18.6	12.6	17.8	17.1	17.2	12.6	4.4
Mixed/multiple							
White/Black Caribbean	0.5	2.6	1.9	1.8	1.7	1.5	0.8
White/Black African	0.5	1.4	1.1	1.2	1.0	0.8	0.6
White/Asian	1.5	1.1	1.1	1.3	1.4	1.2	0.3
Other Mixed	1.4	2.1	1.9	2.1	2.0	1.5	0.5
Asian							
Indian	2.9	2.1	5.6	1.8	2.6	6.6	2.5
Pakistani	0.2	0.8	1.0	0.5	0.8	2.7	2.0
Bangladeshi	3.1	2.9	2.7	2.6	1.9	2.7	0.8
Chinese	3.6	1.4	0.9	2.2	1.2	1.5	0.7
Other Asian	2.9	2.9	2.0	3.6	2.6	4.9	1.5
Black							
African	1.3	15.6	10.1	12.2	7.7	7.0	1.8
Caribbean	0.6	10.1	7.8	6.4	6.6	4.2	1.1
Other Black	0.7	5.4	3.6	3.6	3.2	2.1	0.5
Other							
Arab	0.9	0.7	0.5	0.8	0.8	1.3	0.4
Any other	1.2	3.6	6.3	4.1	4.4	2.1	0.6

¹⁰ Orthodox Jewish Health Needs Assessment. City and Hackney PCT 2010.

Implications for the PNA

There is a correlation between health inequalities and the levels of diversity in the population. Some minority ethnic groups are at increased risk of certain diseases and conditions and others are more or less likely to engage in health harming behaviours (e.g. smoking and alcohol consumption). Ethnic diversity is often correlated with levels of local deprivation (see 4.1.5).

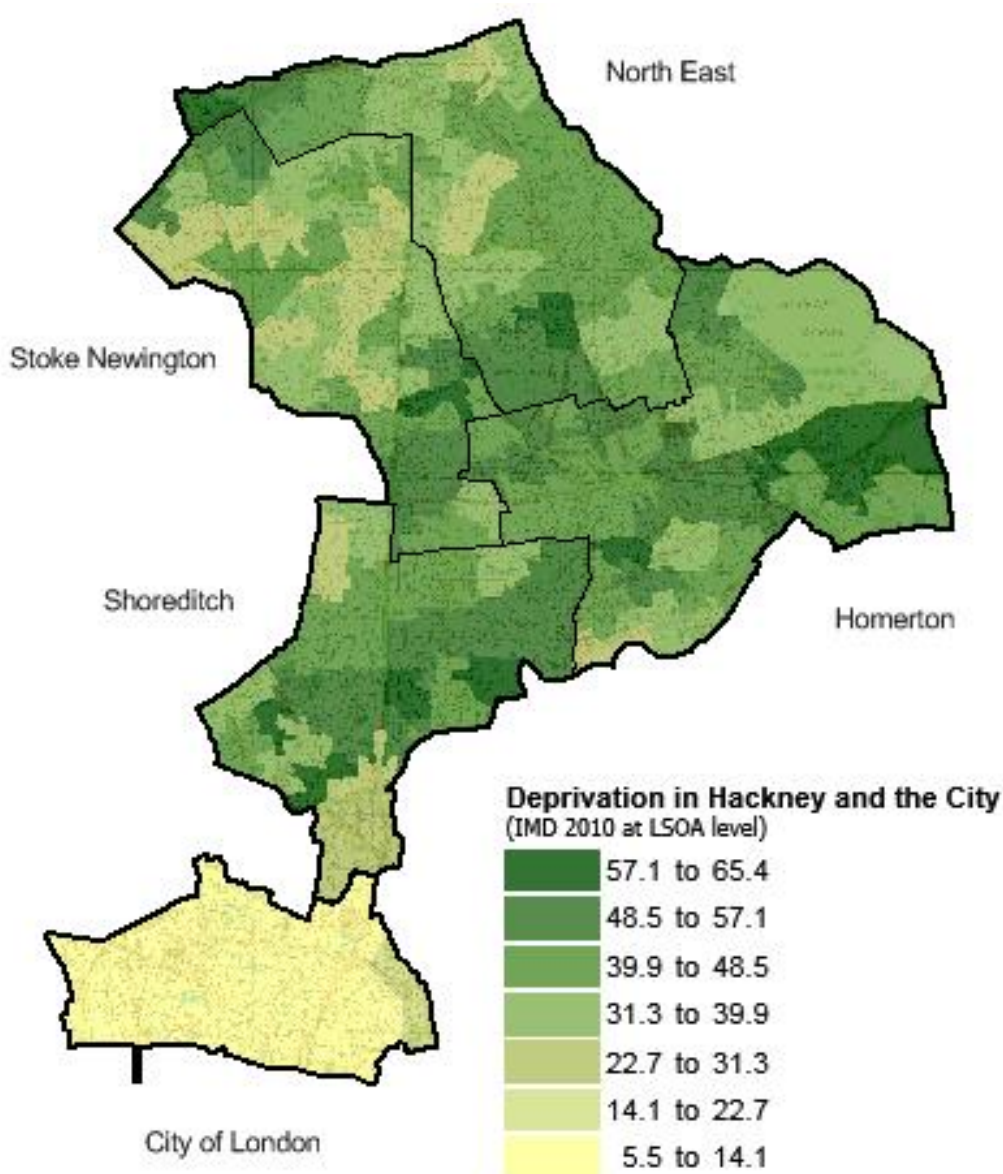
Pharmaceutical services need to reflect the needs of our diverse local population, as well as respond to particular cultural requirements, while also providing a broad range of services to our entire population. There is no evidence from the patient and public survey to suggest that the needs of the diverse local populations of either the City or Hackney are not being currently met. Feedback from the Hackney Refugee forum has highlighted the need for local service provision to reflect the language requirements of new migrants in particular (section 5.1.3.2).

4.1.5 Deprivation

The Index of Multiple Deprivation 2010 (IMD2010) gives a measure of deprivation based on a combined score, incorporating a wide range of indicators across seven domains (income, employment, health/disability, education/skills/training, barriers to housing and services, crime, and living environment). It is calculated at lower super output area (LSOA, a neighbourhood area housing approximately 1,000 to 2,000 people) and is the most widely used measure of deprivation in England.

In the IMD2010, overall Hackney is the second most deprived (rank=2) local authority in England, behind Liverpool. The City of London is ranked 262 out of 326 areas, but there are relatively high levels of deprivation in the area towards the East on the border with Tower Hamlets. Within Hackney, there is considerable variation in neighbourhood deprivation, with all localities contain at least one neighbourhood in the most deprived category (Figure 14).

Figure 14 Neighbourhood deprivation in Hackney and the City of London (IMD 2010).



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Table 9 presents the average IMD2010 scores for the City and the four Hackney localities. The larger the number, the higher the level of average deprivation. The City is the least deprived area overall, with Stoke Newington recording the lowest IMD2010 score in Hackney. Homerton is the most deprived locality overall, followed by Shoreditch.

Table 9 **Average deprivation scores for the City of London and Hackney localities (IMD2010)**

<i>Locality</i>	<i>Average IMD score</i>
Homerton	46.12
Shoreditch	45.90
North East	41.64
Stoke Newington	38.66
City of London	11.15
<i>London</i>	<i>25.24</i>
<i>England</i>	<i>21.67</i>

Implications for the PNA

There is a strong relationship between deprivation, health and disability. People living in poverty are more likely to be in poor health, experience low levels of wellbeing and engage in health harming behaviours (e.g. smoking).

Closing the gap in local health inequalities means focusing efforts on the most deprived in the population, who have the worst health outcomes and are likely to have the highest need for health services, including community pharmacy services.

4.2 Health profile

In this section we describe various aspects of the local population's health relevant to pharmaceutical service provision, including mortality, morbidity and risk factors for poor health.

4.2.1 Infant Mortality

Reducing infant mortality is a national public health priority, and can be an indicator for overall child and maternal health. It is associated with deprivation, and influenced by a range of factors.

In 2012, mortality among children born in Hackney and the City of London was high compared to England, London, and comparator areas (Table 10). Due to small numbers, more localised data is not available.

Table 10 Infant mortality in City and Hackney (ONS 2012)

	<i>Infant mortality rate (per 1,000 live births)</i>	<i>Neonatal mortality rate (per 1,000 live births)</i>	<i>Perinatal mortality rate (per 1,000 live births and stillbirths)</i>
Hackney & City of London	6.5	4.4	10.2
ONS cluster group ^a	4.7	3.2	9.1
London	3.9	2.6	7.7
ENGLAND	4.1	2.9	7.0

^a The 'London Cosmopolitan' group – Brent, City and Hackney, Haringey, Lambeth, Lewisham, Newham, Southwark.

Please note, the comparator areas described here are for the old City and Hackney PCT area, to which this data applies.

Implications for the PNA

Infant mortality is linked to maternal health. Improving maternal health and providing appropriate antenatal care contribute to reducing infant mortality. Early access to antenatal care can also be secured through pharmacy pregnancy testing services linked to antenatal referral for women who are pregnant.

4.2.2 Life Expectancy

Life expectancy in Hackney continues to increase (Figure 15 and Figure 16). Nationally, male life expectancy is consistently lower than for females and this pattern is reflected in Hackney. Compared to London and England, life expectancy is relatively low in Hackney, particularly amongst men. In the City, life expectancy is higher for both men and women.

Figure 15 Life expectancy in males – time trends in Hackney, London, England & Wales (ONS)

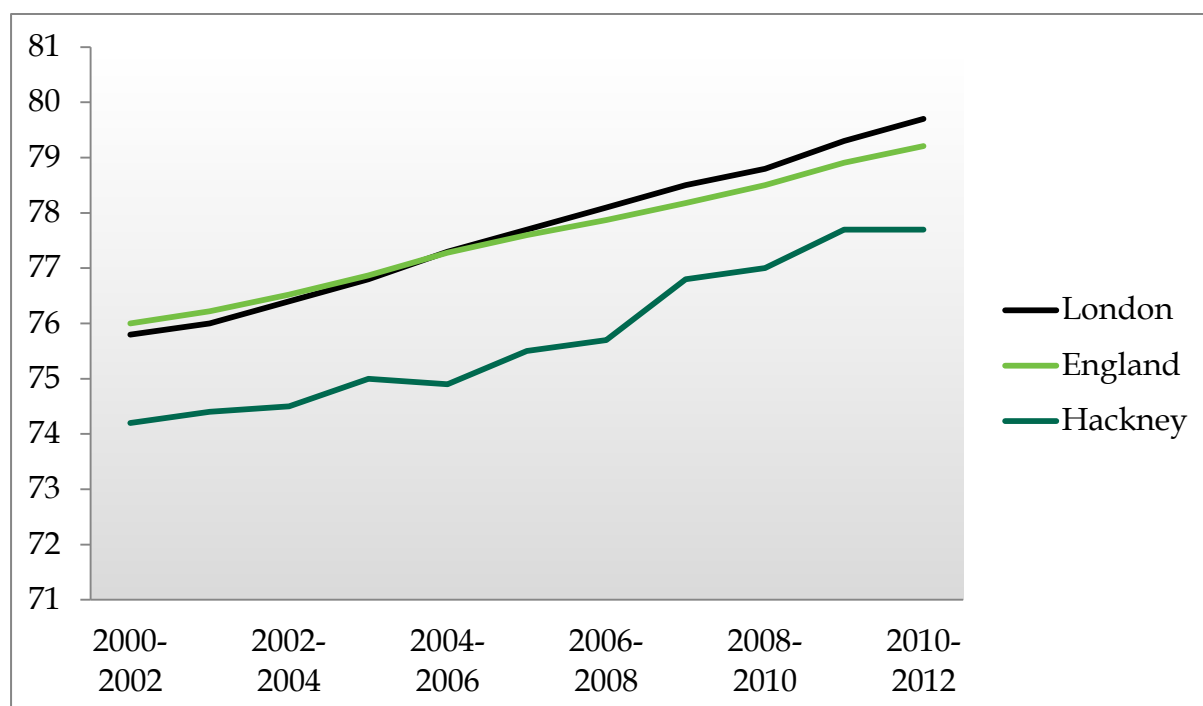
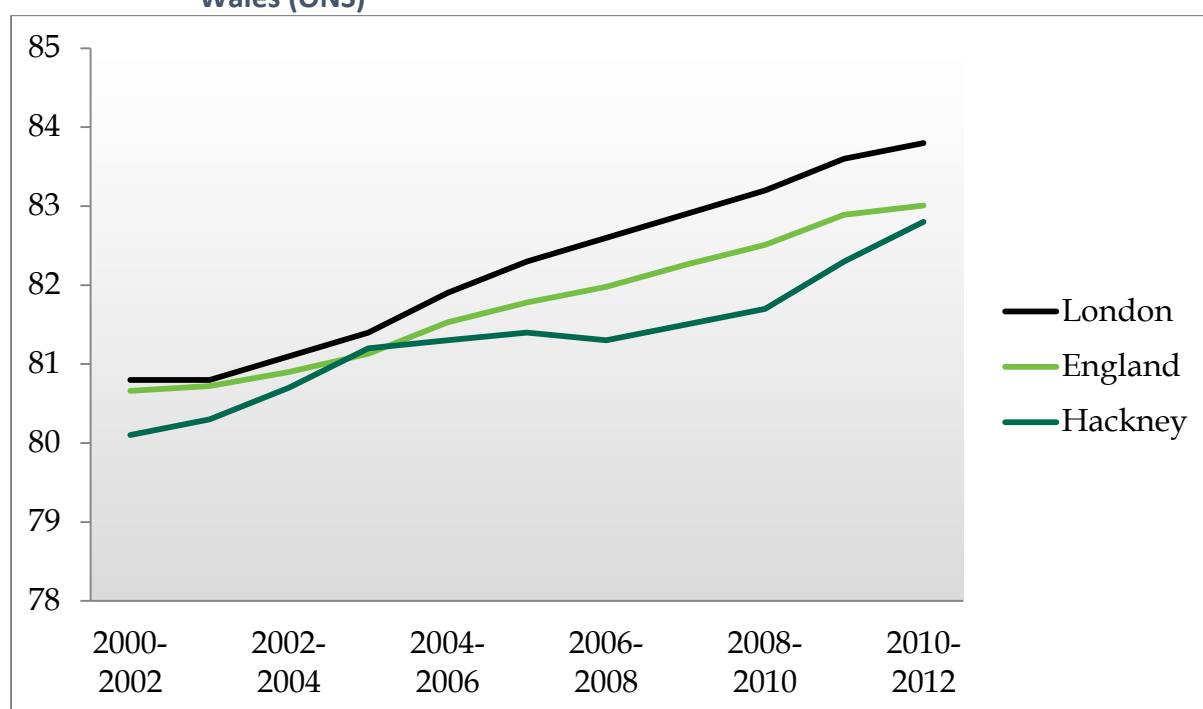


Figure 16 Life expectancy in females – time trends in Hackney, London, England & Wales (ONS)



Between the Hackney localities, and the City of London, there is also variation. The highest life expectancies for men and women are in the City of London. Within Hackney, Homerton and Shoreditch have lower life expectancy (Table 11).

Table 11 Life expectancy at birth in the City of London and Hackney localities (ONS 2008-12)

	<i>Male</i>	<i>Female</i>
Homerton	77.3	82.2
North East	78.3	83.1
Shoreditch	77.0	82.0
Stoke Newington	78.1	82.9
City of London	82.8	86.2
<i>London</i>	<i>79.3</i>	<i>83.5</i>
<i>England and Wales</i>	<i>78.8</i>	<i>82.7</i>

Implications for the PNA

Life expectancy, a measure of current all-cause mortality applied to age bands, is a key national public health indicator.

Examples of pharmacy services which can reduce premature mortality include smoking cessation, healthy living advice, medicines use reviews and long term conditions management.

4.2.3 Disease Prevalence

GP practice registers contain information on prevalence of certain diseases based on data collected from patients. However, this data source may under-represent actual prevalence. We also know that patients recorded on disease registers are more likely to have other important risk factors including smoking, overweight/obesity and co-morbidities.

Table 12 shows variation in some key conditions (coronary heart disease (CHD), chronic obstructive pulmonary disease (COPD), hypertension, and diabetes) across the City and Hackney localities. The City of London has the highest rate of CHD, probably reflecting the older population structure. In Hackney, Homerton has the highest prevalence of all conditions.

GP data shows that all of these conditions are related to different demographic groups in the population. For example:

- *age* - rates of CHD, COPD, hypertension and diabetes are highest in older age groups
- *ethnicity* - CHD is most prevalent in people of South Asian ethnicity and diabetes in South Asian and also Black ethnic groups; the highest rates of COPD are in white communities, and highest rates of hypertension in black communities
- *'care groups'* - CHD, COPD and hypertension are particularly prevalent among the deaf, the blind, and people who are unable to regularly leave the house; diabetes is most prevalent among the blind and those who are unable to regularly leave the house

- *deprivation* - the highest rates of COPD, hypertension and diabetes are found in people who live the most deprived areas.

Table 12 GP recorded prevalence of important conditions by locality (CEG 2013)^a

	<i>CHD</i>	<i>COPD</i>	<i>Hypertension</i>	<i>Diabetes</i>
City of London ^a	2.6%	0.7%	11.5%	3.6%
Homerton ^a	2.2%	1.6%	13.6%	6.3%
North East ^a	2.2%	1.1%	12.9%	6.3%
Shoreditch ^a	1.8%	1.4%	11.2%	5.0%
Stoke Newington ^a	2.1%	1.3%	11.4%	5.2%
London ^b	2.1%	1.1%	11.0%	5.8%
England ^b	3.3%	1.7%	13.7%	6.0%

^a Data excludes patients registered in practices outside City and Hackney, Tower Hamlets, and Newham. It also excludes data from 4 Hackney practices that use a different IT system.

^b QOF data 2012/13

Implications for the PNA

Pharmacy services are an important, but often overlooked, partner in the long-term conditions pathway. One in three people have a long-term condition and most long-term conditions are treated or managed using medicines.

Ensuring that medicines are used safely and effectively improves outcomes and reduces the risk of hospital admission. It is estimated that at least 5% of all admissions to hospital are medicines-related.¹¹

Non-adherence is a significant challenge in managing long-term conditions. The WHO estimates that between one third and one half of all dispensed medication is not taken as intended. This not only denies the patient the benefit of the treatment, but also costs the health system in drugs that are wasted as a result.

Pharmacy has a role in ensuring patients, clinicians and carers can obtain the maximum benefit from medicines while reducing the risks associated with treatment.

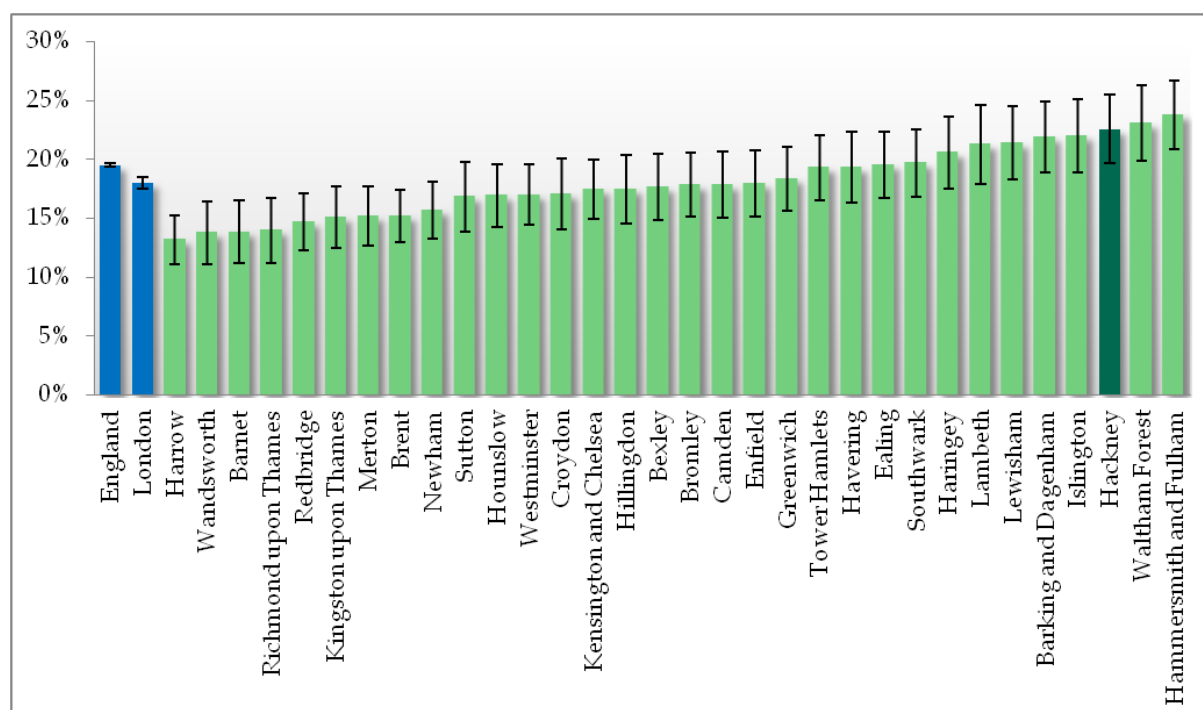
There is also an opportunity to use pharmacies to support case finding of undiagnosed patients, as well as delivering preventative interventions (e.g. smoking cessation and weight management).

¹¹ <http://www.sciencedirect.com/science/article/pii/S1319016413000509>

4.2.4 Smoking

One of the most important preventable risk factors for poor health and premature mortality is smoking. Hackney has one of the highest smoking rates in London at 22.6% (Figure 17).

Figure 17 Smoking prevalence in London Boroughs (HSE 2012)



More local smoking data is available from GP registers. It should be noted that these figures exceed the most recent survey figures so are unlikely to indicate true levels of smoking. On the other hand, it may be that smokers do not always report this to their GP. Nevertheless, GP data does provide a useful source of comparative information on smoking behaviours in different areas and amongst different groups of the population.

Based on the latest GP data, the highest rates of smoking appear to be in Homerton and Shoreditch, while City of London registered patients record the lowest prevalence (Table 13).

Smoking prevalence varies across different demographic groups in the population. The same GP data shows that smoking is more common among men, 25-49 year olds, people who live in more deprived areas, white ethnic groups and people with serious mental illness. Local evidence also indicates higher rates of smoking in the Turkish and Polish communities.

In 2012, a survey of City workers reported that 24.7% of respondents smoked, either regularly or occasionally.¹²

¹² Available from <http://www.cityoflondon.gov.uk/business/economic-research-and-information/research-publications/Pages/the-public-health-and-primary-healthcare-needs-of-city-workers.aspx> (accessed 8.10.14)

Table 13 GP recorded prevalence of smoking by locality (CEG 2013)^a

	<i>Proportion who are current smokers</i>
City ^a	12.1%
Homerton ^a	28.8%
North East ^a	25.3%
Shoreditch ^a	28.4%
Stoke Newington ^a	25.0%
London ^b	18.7%
England ^b	23.4%

^aData excludes patients registered in practices out with City and Hackney, Tower Hamlets, and Newham. It also excludes data from 4 Hackney practices that use a different IT system.

^bQOF data 2012/13

Implications for the PNA

Pharmacies already play an active role in providing support for people who want to quit smoking (see section 6.1). The role of community pharmacy is two-fold; providing access to treatment (including nicotine replacement therapy and Champix) plus advice from pharmacists and staff trained as level 2 stop smoking advisors.

Pharmacy is a unique stop smoking service provider, as they have access to treatment at the point of care. They also provide a 'walk-in' service across extended hours of service.

4.2.5 Alcohol

Estimates of binge drinking prevalence in the population are estimated from the Health Survey for England, and these are used to model estimates at ward level (Table 14).

According to this source, binge drinking, and other risky drinking, is most prevalent in City of London residents. Within Hackney, binge drinking is least prevalent in the North East and Homerton. Data on other drinking behaviours is not easily available at Hackney locality level.

Heavy alcohol consumption and binge drinking is also prevalent in the City's daytime worker population.

Table 14 Estimates of prevalence of drinking behaviours in Hackney and the City

	<i>Binge drinking prevalence</i>	<i>Abstainers</i>	<i>Lower risk drinking (% drinkers)</i>	<i>Drinkers Increasing risk drinking (% drinkers)</i>	<i>Higher risk drinking (% drinkers)</i>
City	25.3%	14.3%	69.4%	21.7%	8.9%
Homerton	12.5%	--	--	--	--
North East	12.0%	--	--	--	--
Shoreditch	14.4%	--	--	--	--
Stoke Newington	14.7%	--	--	--	--
Hackney total	--	24.8%	74.2%	18.0%	7.8%
London	14.3%	22.4%	73.4%	19.7%	6.9%
England	20.0%	16.5%	73.3%	20.0%	6.8%

Source: Modelled estimates from Local Alcohol Profiles for England (LAPE). Drinkers and abstainers apply to 2011. Binge drinkers to 2006-8

Implications for the PNA

Pharmacies have a potential role in providing brief interventions in alcohol use.

4.2.6 Substance misuse

It is difficult to estimate the size of populations of illegal drug users. A model has been developed using data sources such as police and drug treatment service statistics. It is estimated that there are 549 injecting drug users in Hackney and 15 in the City of London (Table 15).

Table 15 Estimated numbers of drug users in Hackney and the City of London (2010/11)

	<i>Hackney</i>	<i>City of London</i>
Opiate and/or crack cocaine use	2,246 (95%CI: 1,907 – 2,570)	46 (95%CI: 25 - 67)
Opiate use	1,792 (95%CI: 1,521 – 2,067)	35 (95%CI: 23 - 52)
Crack cocaine use	1,769 (95%CI: 1,456 – 2,074)	43 (95%CI: 26 - 61)
Injecting drug use	549 (95%CI: 460 - 677)	15 (95%CI: 8 - 23)

Source: University of Glasgow and Liverpool John Moores University

<http://www.nta.nhs.uk/uploads/prevalencestats2009-10fullreport.pdf> (accessed 8.10.14)

Implications for the PNA

Pharmacists play a valuable role in supporting individuals to manage substance misuse, for example, by providing needle exchange services and supervised consumption of opiate substitutes (section 6.6 and 6.7).

4.2.7 Blood-borne viruses (BBVs)

Another model, produced by Public Health England (PHE), estimates that 1,971 Hackney residents and 77 City residents are infected with hepatitis C virus (HCV), most of whom are current or previous injecting drug users. Approximately half of those infected with hepatitis C remain undiagnosed and, therefore, they are not receiving treatment and are at risk of unknowingly spreading the infection.¹³

In 2010-11, 73 cases of hepatitis B were identified in City and Hackney residents via antenatal screening (out of 5,589 women booked at Homerton hospital).

In 2013, the diagnosed HIV prevalence rate in Hackney was 8.1 per 1,000 population aged 15–59 years and 10.9 in the City of London. These are much higher than the average rate for London (5.7) and England (2.1), although figures for the City should be treated with caution as they are based on very small numbers.

In the UK as a whole, PHE estimate that 1 in 2 injecting drug users has contracted HCV, 1 in 6 has hepatitis B and 1 in 100 has HIV. Other risk factors for these BBVs include having unprotected sex and being born in a high risk country (e.g. sub-Saharan Africa, parts of the Middle East and South East Asia).

Implications for the PNA

Pharmacists can play an important role in improving BBV diagnosis rates, and reducing the pool of undiagnosed infection, by targeting high risk patients that they see for other purposes (e.g. supervised consumption or needle exchange) (section 6.8).

4.2.8 Obesity

The National Child Measurement Programme measures all state school children in England at reception and Year 6, providing detailed rates of obesity (Table 16). However, it should be noted that significant proportions of children in Hackney and the City of London do not attend state schools. In particular, this includes Charedi Jewish children in the north of Hackney who usually attend private religious school, as well as children from other families who pay for their children's education.

¹³ Hepatitis C in the UK: 2014 report. Public Health England.
(https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/337115/HCV_in_the_UK_2014_24_July.pdf)

Obesity in children is higher in more deprived localities and among black ethnic communities, common characteristics of Hackney. Child obesity is a significant problem in Hackney and a local priority for health and wellbeing partners (see appendix A).

The adult obesity data reported here comes from GP registers, which are likely to underestimate true prevalence, potentially quite significantly (Table 16). However, the data shows that compared with the rest of London, prevalence of adult obesity is significantly higher in Hackney, especially in Homerton and North East localities.

Table 16 Child and adult obesity in the City of London and Hackney localities

	<i>Child obesity^a</i>		<i>Adult obesity (16+)^{b,c}</i>
	<i>Reception</i>	<i>Year 6</i>	
City	--	--	10.0%
Homerton	15.0%	24.9%	20.5%
North East	12.0%	27.0%	19.3%
Shoreditch	14.0%	26.2%	16.6%
Stoke Newington	11.1%	22.6%	15.2%
London	10.8%	22.4%	9.2%
England	9.3%	18.9%	10.7%

^a National Child Measurement Programme 2012/13. City of London figures are not available due to disclosure control.

^b CEG 2013. Data excludes residents who are registered in practices outside of the City, Hackney, Tower Hamlets or Newham. It also excludes data from four Hackney practices that use a different IT system.

^c QOF data 2012/13

Implications for the PNA

Pharmacies provide advice and support for healthy lifestyles as part of their core contract.

In addition, some pharmacies in the City and Hackney provide a weight management service which includes a risk assessment and motivational interviewing to support people to lose weight (section 6.2).

4.2.9 Teenage Pregnancy

Teenage pregnancy is relatively uncommon. Data for City of London and Hackney localities cannot be published due to small numbers to prevent identification of individuals. Across City and Hackney, teenage pregnancy rates have improved significantly in recent years (Figure 18), and are now only slightly higher than in England and London (Table 17).

The limited neighbourhood level analysis which is available shows that most of Homerton, the southern part of the North East locality and south of Shoreditch all have significantly higher rates of teenage pregnancy.

Figure 18 Teenage pregnancy rates per 1,000 women aged 15-17 – time trend (PHE)

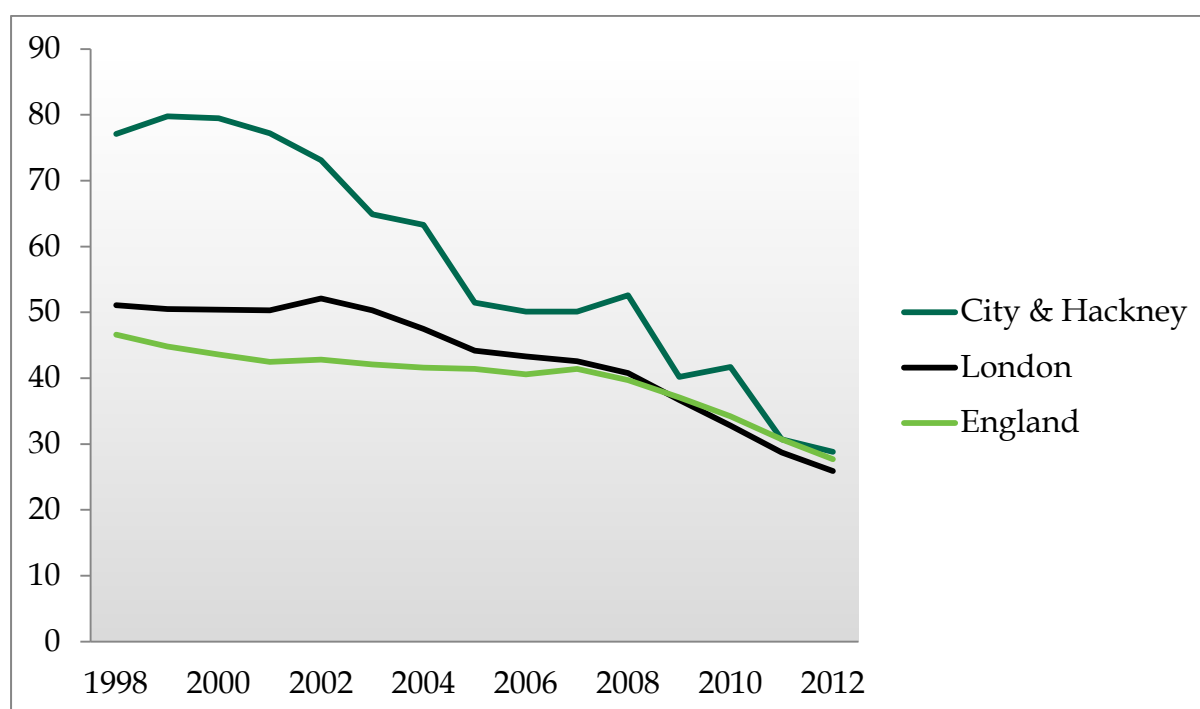


Table 17 Teenage pregnancy rates and numbers (PHE)

	<i>Number of conceptions</i>	<i>Conception rate per 1,000 women aged 15-17</i>
Hackney and City of London	118	28.8
<i>London</i>	<i>3,504</i>	<i>25.9</i>
<i>England</i>	<i>26,157</i>	<i>27.7</i>

Implications for the PNA

Pharmacies in Hackney and the City provide access to Emergency Hormonal Contraception (EHC) through a Patient Group Direction (PGD) for women of all ages and participate in the condom distribution scheme for young people (aged under 25). These contraception services are free of charge. (section 6.4)

Pharmacies are seen as a safe, accessible and non-judgemental provider of contraception services. Some women, particularly younger women, prefer to use town centre pharmacies as these offer a sense of anonymity when compared to 'local' pharmacies.

4.2.10 Sexually transmitted infections (STIs)

The highest rate of STI diagnosis is *Chlamydia* in 15-24 year olds. The rate of diagnosis reflects both the underlying population prevalence and the number of tests performed; a 'high-performing' service can be expected to test a significant proportion of the population at risk of infection.

In Hackney, nearly half of all 15 to 24 year olds were tested for *Chlamydia* in 2013 as part of the National Chlamydia Screening Programme. Almost 9% tested positive, translating to a diagnosis rate of 4,115 cases per 100,000 young people (Table 18). In the City, just 17% of eligible young people were tested and the diagnosis rate was less than 560 per 100,000.

Table 18 *Chlamydia* testing data for 15-24 year olds (PHE 2013)

	<i>Percent of population tested</i>	<i>Percent of tests positive</i>	<i>Diagnosis rate per 100,000</i>
City of London	16.9%	<10%	<560
Hackney	47.2%	8.7%	4,115
London	27.7%	7.9%	2,179
England	24.9%	8.1%	2,016

In general, rates of STI diagnoses are higher in males, in particular in men who have sex with men.

Re-infection with an STI is a marker of persistent risky behaviour. An estimated 13% of women and 18% of men presenting with an acute STI at a Hackney genito-urinary (GUM) clinic during the four-year period from 2009 to 2012 became re-infected with an acute STI within 12 months. This compares with averages in England of 5% and 11% respectively.

Implications for the PNA

Pharmacies are playing an increasing role in offering a range of sexual health services linked to the supply of emergency hormonal contraception, including a *Chlamydia* screening and treatment service (section 6.4). The service is intended to build on community pharmacies' accessibility and availability to provide a route to screening and treatment, particularly for the younger population.

4.2.11 Tuberculosis

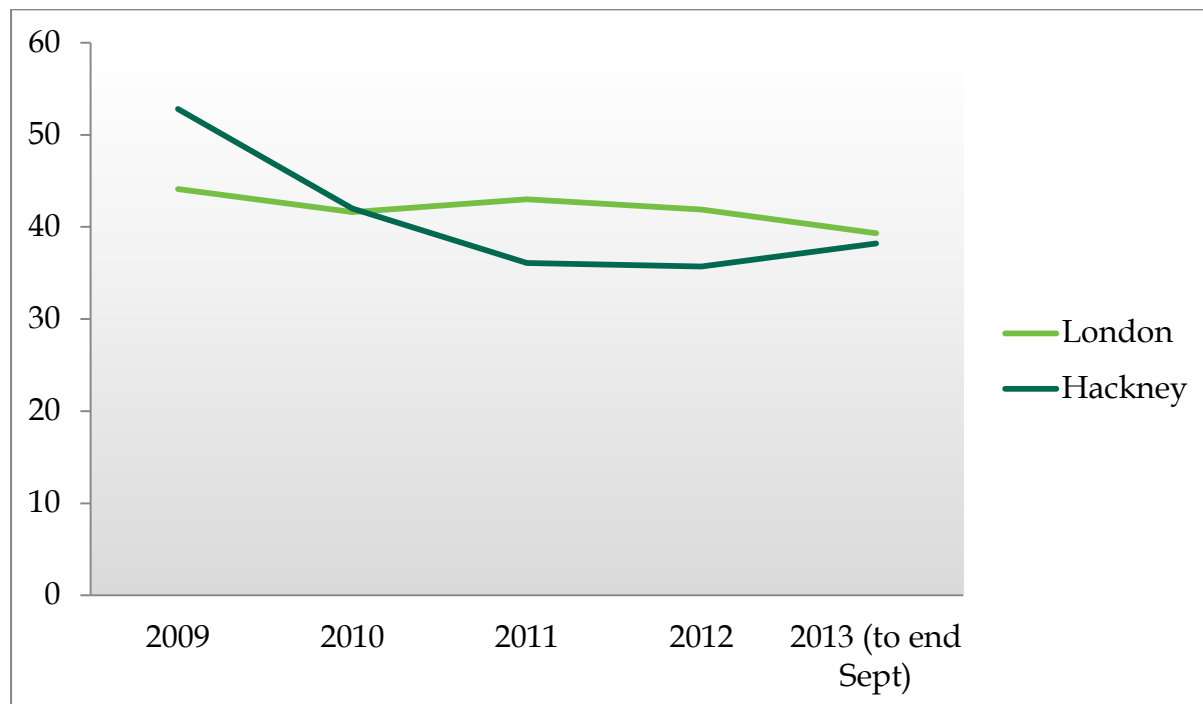
According to PHE, in 2012 there were 88 new cases of TB recorded among Hackney residents, and fewer than five in the City of London. The rate in Hackney is dropping, and is now below the London average (Figure 19).

Implications for the PNA

Adherence to the full treatment regime is essential to preventing the spread of infection.

Pharmacists can play an active role in supervised treatment of TB (DOTS) and potentially also in case finding undiagnosed infection.

Figure 19 Rate of new TB notifications per 100,000 in London and Hackney over time (PHE)



4.3 Different needs of different groups

The PNA regulations require us to consider the different needs of different groups in the local area who share a common attribute in respect of any one of the nine 'protected characteristics' defined by equalities legislation. All pharmacy contractors are required to comply with the provisions of the Equality Act 2010. Table 19 summarises the health needs of these different groups and the implications for the PNA.

Table 19 **Health needs of different equalities groups relevant to our local population**

<i>Protected characteristic</i>	<i>Local health need and implications for the PNA</i>
Age	<p>Section 4.1.2 and 4.1.3 describe the current and projected age profile of the local populations of City and Hackney.</p> <p>The needs of the younger population in both areas are addressed through the minor ailments scheme (see section 5.3.2) and through sexual health services for young people, such as <i>Chlamydia</i> screening and treatment and free condom supply (section 6.4).</p> <p>Both City and Hackney have a small but growing population of older people. Older people are supported to keep well through medicines optimisation support and the flu immunisation service (commissioned by NHS England). There is potential scope to improve access to medicines optimisation support for the older residents living in the east of the City (see section 5.3.1).</p>
Disability	<p>Many pharmacy users will, as a consequence of the impact of disease and illness, be considered disabled.</p> <p>All pharmacy contractors in the City and 38 out of the 46 Hackney pharmacy contractors who responded to our survey reported that they currently have a wheelchair accessible consultation area; and a further three in Hackney say they are planning for this to be in place in the next 12 months, while five have no such plans (see section 5.1.3.1). We would expect all pharmacies to make significant progress towards exceeding the minimum legislative standards in the future.</p> <p>Reassuringly, 93% of the 132 Hackney respondents to our patient/public survey who said they were disabled rated local pharmacy services as excellent or good (70% rated them as excellent); in the City, six out of the nine disabled respondents rated services as excellent and one as good.</p>
Gender	<p>Hackney and the City provide a number of pharmacy services targeted at the specific needs of women (e.g. emergency hormonal contraception). The majority of responses to the patient/public survey were from women (69% in Hackney and 56% in the City); further work may be warranted to better understand the pharmaceutical service needs of local men.</p> <p>There is no evidence from the patient/public survey to suggest that the needs of different gender groups are not currently being met.</p>
Proposed, commenced or completed reassignment of gender	<p>Pharmacies are often part of the care pathway for people who undergo gender reassignment. Their role is typically to ensure that the medicines, which form part of the treatment, are available and provided without impediment. We are not aware of any barriers to treatment through community pharmacies in Hackney or the City. We have not found any additional specific needs that would need to be met through pharmaceutical services for this population group.</p>

Table 19 (cont.) **Health needs of different equalities groups relevant to our local population**

<i>Protected characteristic</i>	<i>Local health need and implications for the PNA</i>
Race	The ethnic diversity of the City and Hackney localities is described in section 4.1.4. Different populations are concentrated in different parts of the local area and City and Hackney public health has been active in developing services which address the needs of these communities (e.g. smoking cessation services targeting the Turkish-Cypriot community).
Religion or belief	<p>The City and Hackney localities have a diverse population with a range of different religious groups represented.</p> <p>We have noted the large orthodox Jewish population concentrated in the north of Hackney (section 4.1.4). The presence of this population has shaped how services are provided from pharmacies in these areas, with many open extended hours on a Sunday to reflect the religious traditions of this population group. Some public health services have not been taken up as readily in these areas in the past, which reflects demand from the population for these services and the insight the pharmacy contractors have into the needs of this population.</p>
Sexual orientation	A pre-requisite for delivering the sexual health pharmacy service (6.4) is that pharmacists have undergone training and awareness-raising on providing services irrespective of sexuality or sexual orientation of clients. We do not consider that there are any unmet needs in obtaining pharmaceutical services in relation to sexual orientation.
Marriage and civil partnership	According to the 2011 Census, 24.4% of Hackney residents and 29.6% of City of London residents were living in a married or civil partnered couple. These are among the lowest rates in England. While living arrangements can affect longer term health, we do not consider that there are particular unmet needs relating to this group which are relevant to pharmacies.
Pregnancy and maternity	<p>According to ONS figures, there were 82 births to City of London residents in 2013, and 4,437 to Hackney residents. Fertility rates are lower than England as a whole, though can be locally very high, particularly among the Charedi Jewish community.</p> <p>Pharmacies in Hackney and the City provide access to EHC; they are also providers of pregnancy testing and pre and post natal support, including dietary supplements. (see 6.3 and 6.4). We do not consider there to be any unmet needs relating to this group which are relevant to pharmaceutical services.</p>

5 Description and assessment of current pharmaceutical service provision

This section describes the current provision of pharmaceutical services from pharmacy contractors. Our analysis covers three service categories (see Table 1, p21):

1. essential services
2. advanced services
3. locally commissioned services

The regulations governing the development of pharmaceutical needs assessments require each HWBB to consider whether services currently provided in the HWBB area are either:

- **necessary** to meet a current need for pharmaceutical services
or
- **secure improvements or better access** to pharmaceutical services, either now or in the future.

HWBBs are also asked to consider whether there are any gaps in the provision in relation to both categories of services.

In reaching their conclusions the HWBBs are expected to explain where other services have affected its assessment, contributed towards meeting a need or have secured improvements or better access to pharmaceutical services, including:

- any dispensing services
- services provided outside its area
- NHS services.

5.1 Essential services

In order to assess the provision of essential services against the needs of Hackney's and the City's population, we have considered the following factors:

- current provision benchmarked against 'similar' areas
- geographical distribution of pharmacies
- accessibility
- opening hours
- provision of dispensing services.

5.1.1 Current provision of essential services

A full schedule of all pharmacy contractors in Hackney and the City of London is provided in appendix E. We have used ONS comparator areas to benchmark the local provision of pharmacy services.¹⁴

¹⁴ <http://www.ons.gov.uk/ons/guide-method/geography/products/area-classifications/ns-area-classifications/index/cluster-summaries/local-authorities/index.html> (accessed 8.10.14)

Hackney

Hackney has 49 pharmacy contractors, or 19.3 per 100,000 resident population. Compared to its ONS comparator areas, Hackney has the lowest number of pharmacies per head of population (Figure 20). These pharmacies each dispensed between 2,164 and 35,574 prescriptions in 2013/14.

Within Hackney, Stoke Newington has the largest number of pharmacies per 100,000 population and Shoreditch has the lowest number (Figure 21).

Figure 20 Hackney pharmacies per 100,000 population: ONS comparator areas (HSCIC, GLA)

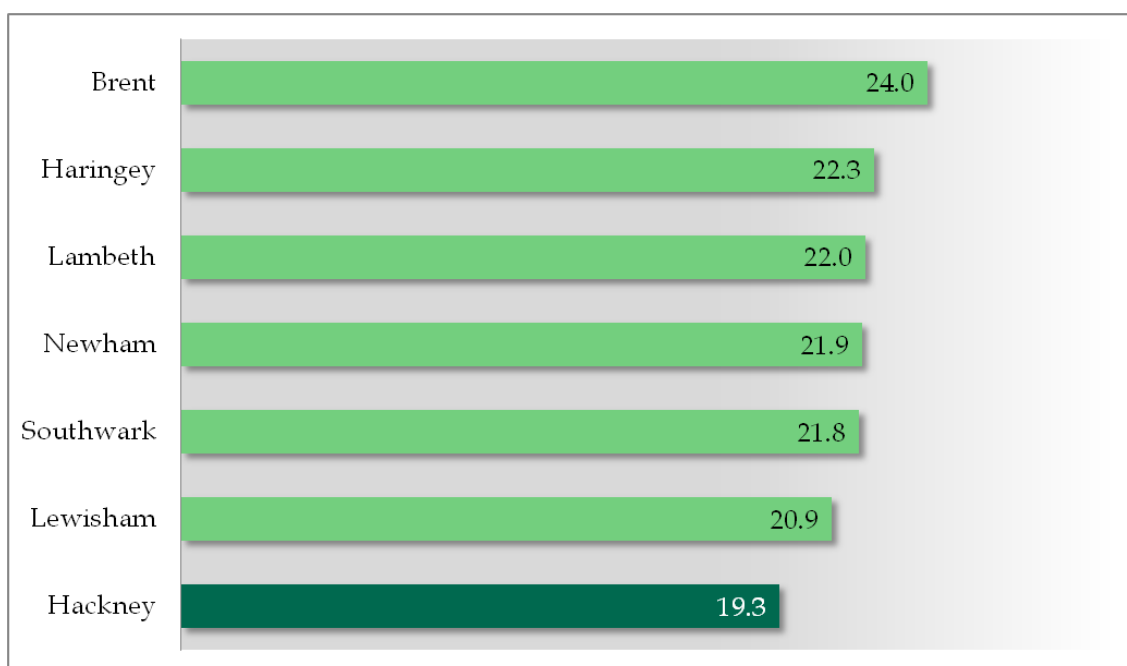
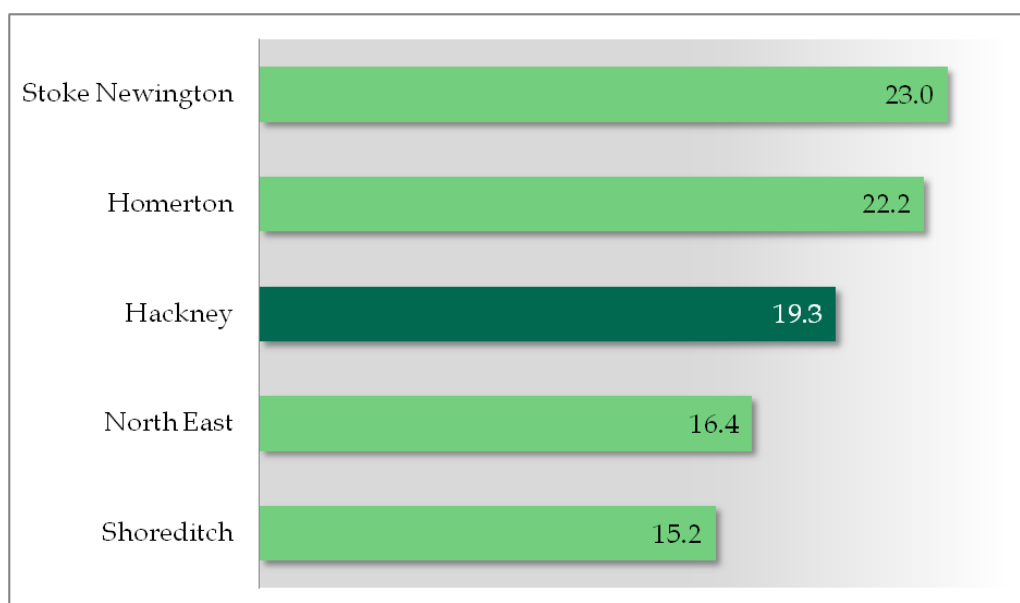


Figure 21 Hackney pharmacies per 100,000 population: comparison by locality (HSCIC, GLA)



City of London

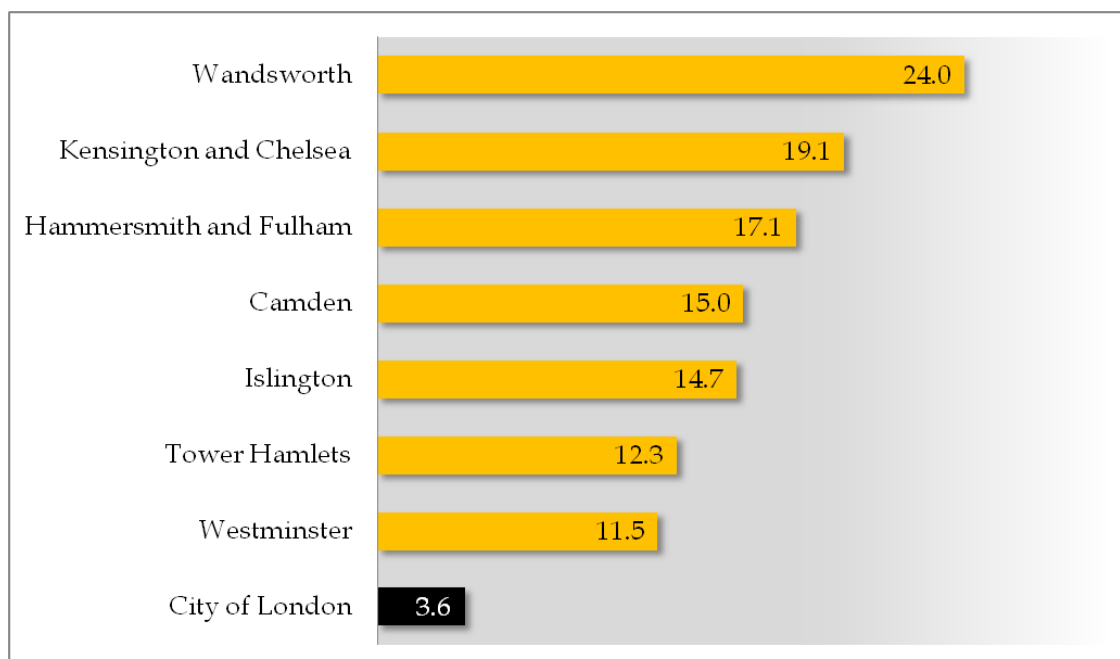
The City of London has 16 pharmacy contractors. This equates to 203.1 per 100,000 resident population and 3.6 per 100,000 workday population (excluding tourists). Compared to its ONS comparator areas, City of London has the *highest* number of pharmacies per head of *resident* population (Figure 22) and the *lowest* number per head of *workday* population (Figure 23). The City of London has by far the largest workday population in relation to its resident population of all its peers – the workday population generates a 56 fold increase in the usually resident population (the nearest increase is experienced in Westminster, with a three-fold increase).¹⁵

Figure 22 City pharmacies per 100,000 resident population: ONS comparator areas (HSCIC, GLA)



¹⁵ <http://www.ons.gov.uk/ons/rel/census/2011-census/workday-population-statistics-for-output-areas-in-england-and-wales--part-1-/rpt-workday-population-of-england-and-wales.html?format=print>

Figure 23 City pharmacies per 100,000 workday population (excluding tourists): ONS comparator areas (HSCIC, GLA)



Use of out of area pharmacies

We have also examined patterns of prescriptions dispensing and identified a number of pharmacies in neighbouring boroughs that are regularly used by patients registered with a City or Hackney GP for this purpose (see section 5.1.5). Out-of-area pharmacies are used particularly heavily by City registered patients.

5.1.1.1 Patient and public views

Ninety-one per cent of Hackney respondents to the patient and public survey, and 96% in the City, rated local pharmacies as excellent. City respondents were more likely to rate services as excellent (64%) than Hackney respondents (58%). Within Hackney, residents of North East and Stoke Newington localities were less like to rate services as ‘excellent’ (around 50% compared with around 70% in Shoreditch and Homerton localities) and more likely to rate them as ‘good’.

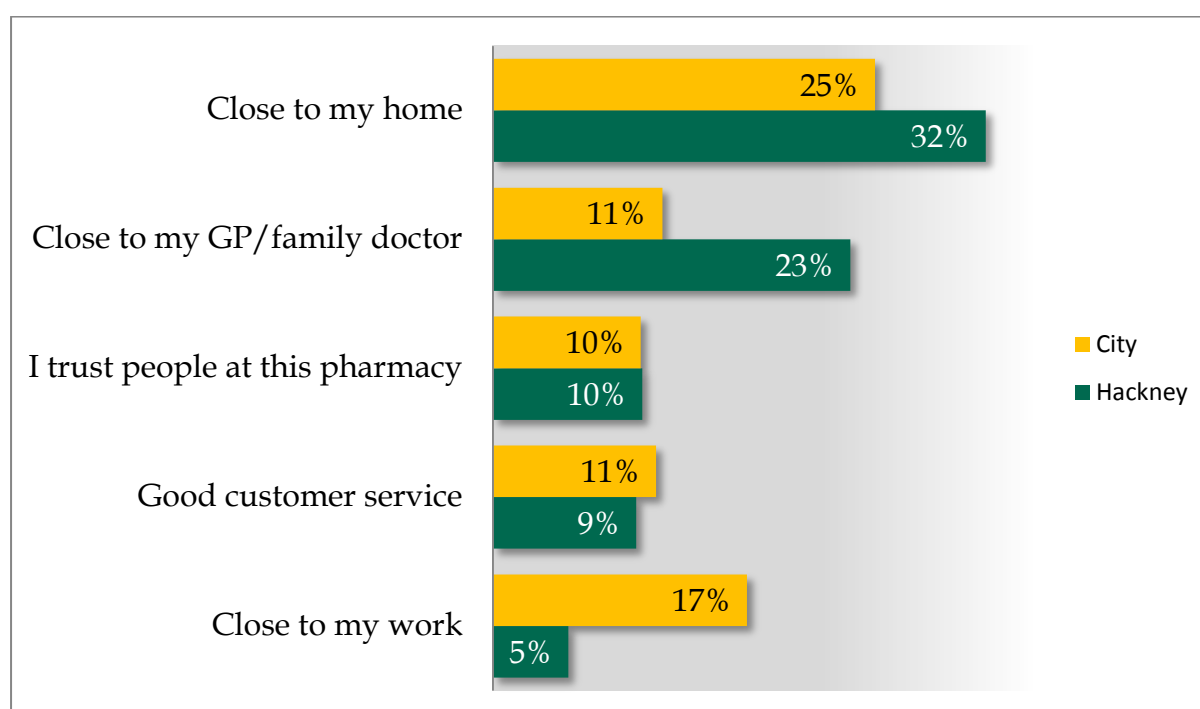
When asked about other services they would like to see available at their pharmacy, no respondents in either the City or Hackney expressed an unmet need for any essential services.

Most people use pharmacies that are close to their home, work or GP practice. High quality service and trust are other important reasons given for using a particular pharmacy (Figure 24). This pattern of responses was broadly similar across the different localities, although City respondents are more likely to use a pharmacy that is close to their work, which relates to the fact that a large number of people commute into the City every day (see section 4.1.2).

The most common pharmacy service used by the local populations of both Hackney and the City is prescription dispensing, followed by purchase of over-the-counter (OTC) medicines. A significant minority also visit for health advice, either for themselves or someone else.

A separate peer research study from 2013, sponsored by Healthwatch Hackney and Hackney CVS, found that one in six young people (13 to 25 years) use a pharmacy as their first point of contact if they are unwell (results based on interviews with 98 young people in Hackney).

Figure 24 **Top five reasons for choosing a particular pharmacy**



5.1.2 Geographical distribution of pharmacies

The distribution of pharmacy contractors across the four Hackney localities and the City is shown in Table 20, Figure 25 and Figure 26 (these maps are also reproduced in appendix F for ease of updating).

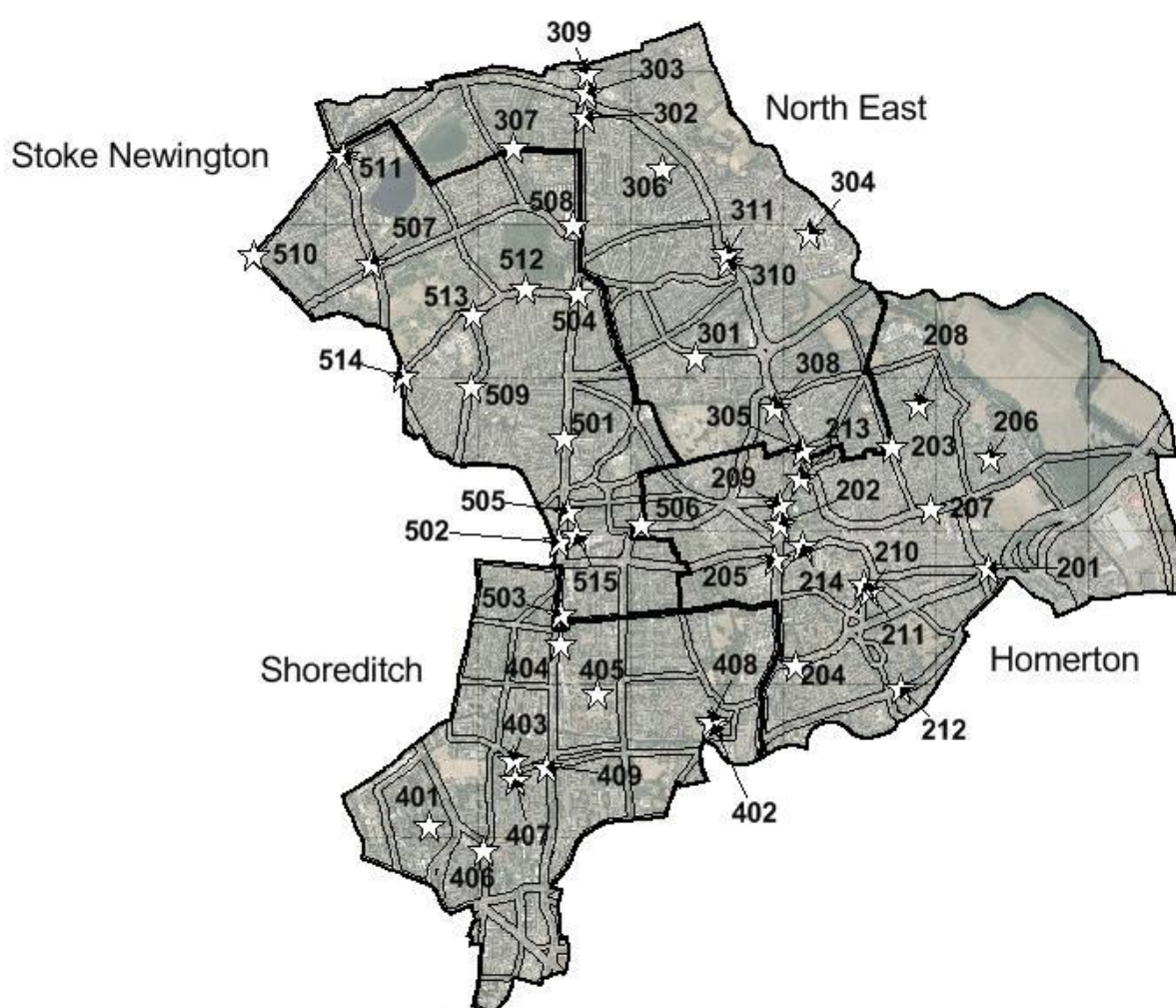
There is a good spatial distribution of community pharmacies across all localities. The area towards the far east of Hackney (in Homerton locality) has a low density of pharmacies because of the large open space of Hackney Marshes being located in this area; similarly, the area towards the north bordering Stoke Newington and North East localities coincides with the location of the West Reservoir, as well as Clissold Park and Abney Park Cemetery.

Table 20

Geographical distribution of community pharmacies by locality

<i>Locality</i>	<i>Number of pharmacies</i>	<i>Pharmacies per square mile</i>
Stoke Newington	15	8.93
North East	11	6.08
Homerton	14	6.13
Shoreditch	9	5.78
City of London	16	14.27

Figure 25 Map of community pharmacies in Hackney



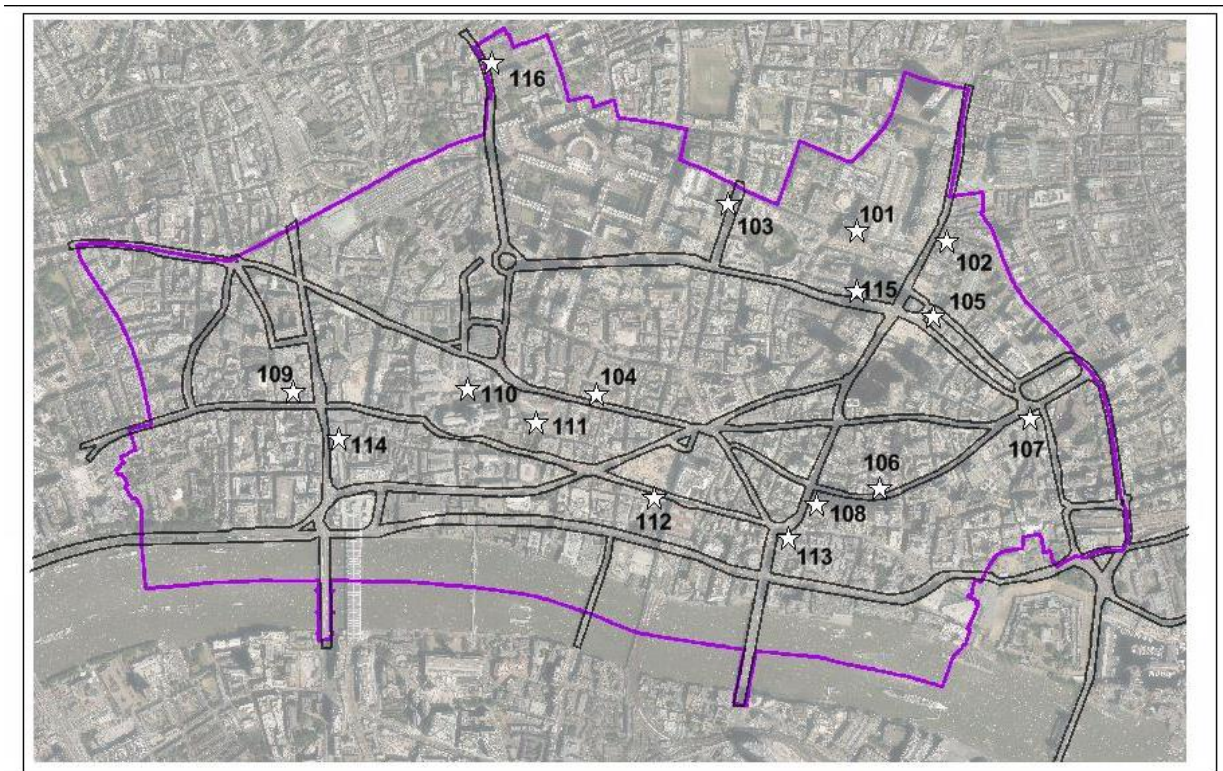
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Note: See appendix E for list of pharmacies associated with each numbered location on the map.

Figure 26 **Map of community pharmacies in the City of London**



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Note: See appendix E for list of pharmacies associated with each numbered location on the map.

In assessing the availability of pharmaceutical services, we have considered not only the number of pharmacies *within* each locality, but also the number within close proximity to the locality, as well as the size of the local population. Table 21 summarises these factors for each locality.

In addition to the six pharmacies located in close proximity to the City border (reported in Table 21), a further 11 pharmacies are located within 0.25 miles of the out-of-area GP practices where City residents are most commonly registered.

Table 21 **Pharmacies accessible to each locality**

Locality	Number pharmacies in the locality	Total number of accessible pharmacies (including pharmacies in close proximity to each locality^a)	Resident population	Accessible pharmacies per 100,000 resident population
Stoke Newington	15	19	65,315	29.1
North East	11	12	66,939	17.9
Homerton	14	15	63,074	23.8
Shoreditch	9	14	59,131	23.7
City of London	16	22	7,879	279.2

^a Pharmacies within 0.25 miles of each locality (within and outside City and Hackney borders)

Table 20 also reveals that there are between six and nine pharmacies per square mile in each Hackney locality and 14.27 per square mile in the City. The City has an unusually dense distribution to meet the demand created by the daily influx of workers during the working week.

Hackney and the City are both well served by public transport, which makes moving in, out and across the areas very easy for our populations. Transport for London estimates that the travel time by public transport from the northernmost pharmacy in Hackney to the southernmost pharmacy is less than a 45 minute journey, and this would involve passing approximately 20 pharmacies along the route. Travel from west to east is estimated to take approximately 37 minutes and would involve passing a similar number of pharmacies. This serves to illustrate that travel access to pharmacies in Hackney is good.

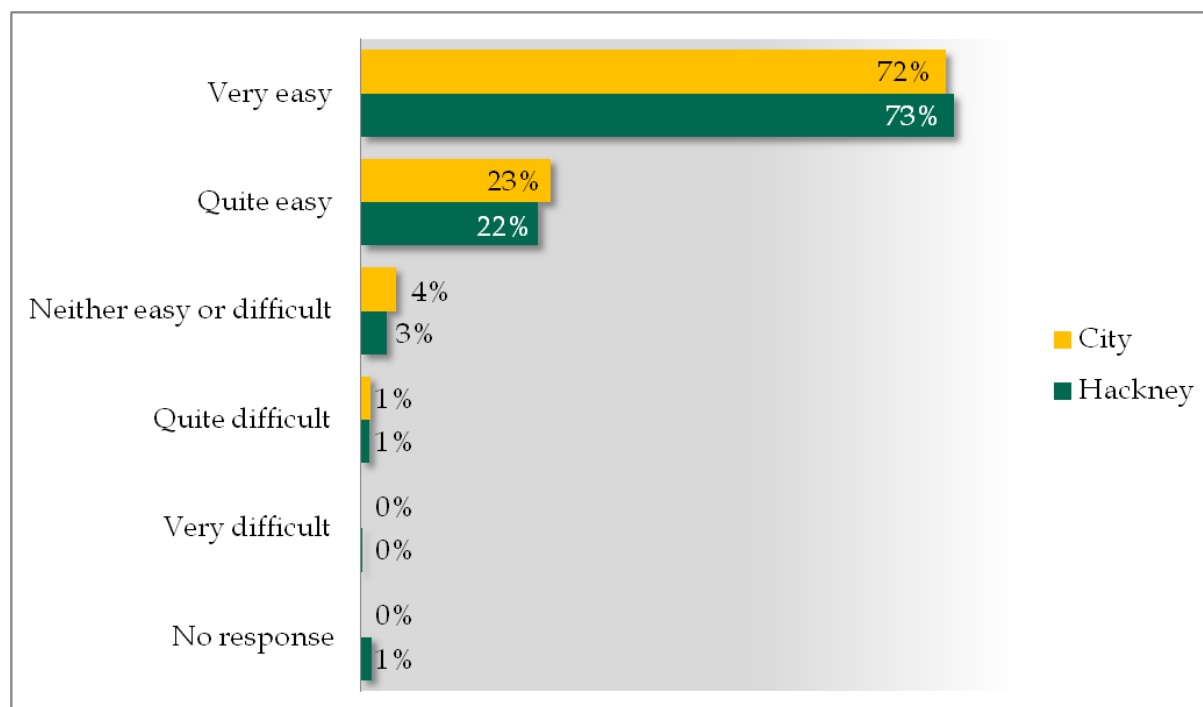
Similarly, in the City public transport time from the northernmost to the southernmost pharmacy is 22 minutes (1.1 miles walking distance), and travel from east to west is approximately 22 minutes (1.3 miles walking distance). Again, this demonstrates that travel access to pharmacies in the City of London is very good.

5.1.2.1 Patient and public views

The majority of people (78%) from Hackney who responded to the patient and public survey say they walk to a pharmacy, rather than taking public transport (8%) or a taxi (<1%), driving (7%) or cycling (5%). For City respondents, travel modes are very similar, with 77% saying they usually walk to a pharmacy, but a larger proportion (14%) say they use public transport.

Over 70% of respondents in both the City and Hackney reported that it is very easy for them to get to their local pharmacy, with a further 20% or more saying it is quite easy. These findings are also broadly consistent across all Hackney localities (Figure 27).

Figure 27 Ease or difficulty in getting to a local pharmacy



5.1.2.2 Choice

For patients, choice is a mechanism to drive up quality of pharmaceutical services and improve patient satisfaction. For the health system as a whole, choice is a mechanism to encourage more appropriate and cost-effective use of resources. In determining whether or not there is reasonable choice across the current network of pharmacy contractors in the City and in Hackney, we have taken a range of factors and principles into account, including:

- the current level of access to NHS pharmaceutical services within both Hackney and City of London, taking into account for each area:
 - the number of pharmacies per 100,000 population
 - the nationally established statistic that '99% of people live within 20 minutes of a pharmacy and 96% within 20 minutes by foot'¹⁶
- the extent to which existing services already offer a choice and the extent to which this may be improved by the availability of either additional providers or facilities
- the extent to which current service provision adequately responds to the changing needs of the community it serves

¹⁶ *Pharmacy in England. Building on the strengths - delivering the future*. Department of Health, 2008. (https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/228858/7341.pdf - accessed 22.10.2014)

- the need for specialist or other services which would improve the provision of, or access to, services for vulnerable people or specific populations (e.g. those with a protected characteristic as described by the Equality Act 2010, see section 4.3).

We have concluded that, in relation to pharmaceutical services:

- there is a choice within the City and within and across Hackney localities
- patients benefit from having a choice of provider for their needs
- there is a balance to be struck between ensuring that there is a reasonable choice and supporting a sustainable network of pharmacies.

Assessment of current provision of pharmacy services - Hackney

- Hackney has the same number of pharmacies located within the borough as in 2011.
- While the number of pharmacies per head of population is below Hackney's ONS comparator areas, residents also have access to other pharmacies on or near the borough border, a number of which are used regularly for prescriptions dispensing. It is probably safe to assume that if these pharmacies are being used regularly for this purpose, they are likely to be accessed for other reasons (e.g. for advice and access to other services).
- Pharmacies are well distributed across the four Hackney localities.

Assessment of current provision of pharmacy services – City of London

- City of London has 16 pharmacies located within the corporation's borders, which is one more than in 2011.
- There is easy access (in terms of travel distance) to additional pharmacies in close proximity to the City's border, as well as to pharmacies in close proximity to out-of-area GP practices registering City residents.

5.1.3 Accessibility of pharmacies

This section examines the accessibility of community pharmacies in the City and Hackney, both from the perspective of disability access and the availability of staff who speak the common languages of the local population who use local pharmacies.

5.1.3.1 Disability access

The pharmacy contractor questionnaire asked whether pharmacies currently or plan to have a consultation area and, if so, whether it is wheelchair accessible. It should be noted that there is no requirement for consultation areas to be wheelchair accessible, but it is a useful measure of how the Equality Act has made an impact on the delivery of services from pharmacies.

All 16 pharmacists in the City and all 46 in Hackney who responded to the pharmacy contractor survey said they currently have a consultation area (see section 7 for more detail). All City pharmacies and 38 out of the 46 responding Hackney pharmacies reported that their consultation area is currently accessible to wheelchair users and three (all in

Hackney) say they will be accessible within 12 months; five Hackney pharmacies have no such plans. We have examined the location of the eight pharmacies which do not currently have consultation areas with disabled access and have concluded that there is good availability of alternative pharmacies within a short distance (less than half a mile) of each of these. We have therefore concluded that there is no gap in this respect within the current network of pharmacy contractors.

Anecdotal feedback from Healthwatch Hackney suggests that some wheelchair users may find it difficult to access pharmacies where there is a step at the entrance or insufficient room to turn a wheelchair around.

Feedback from Hackney's learning disability forum highlighted the need for pharmacists to be sensitive to asking people with learning disabilities for their personal details in public, as they are coached not to share this information with 'strangers'.

5.1.3.2 Languages spoken

Where clinicians and/or support staff can speak other languages that are spoken commonly by the local population, this helps to ensure that services are as accessible as possible to everyone. For example, feedback from the Hackney Refugee Forum representative confirmed that many within the Turkish community use one particular pharmacy in Hackney which has a Turkish-speaking pharmacist; some also travel to another Turkish-speaking pharmacist in Haringey.

Respondents to our pharmacy contractor questionnaire were asked which languages were spoken by their customers and if they or their staff spoke languages other than English (see Table 22 and Table 23). Most Hackney and City localities contain at least one pharmacist where common languages are spoken by their customers. The exceptions are Turkish in the City, Arabic in the North East Hackney locality, Polish in Shoreditch locality and Spanish in Shoreditch and Stoke Newington localities. However, given the good access to alternative pharmacies within close proximity of all localities, we have not identified any gap in service in this regard.

Table 22 Languages spoken - Hackney

<i>Language</i>	<i>No. respondents saying spoken by customers (N=48)</i>	<i>No. respondents saying spoken by staff (N=48)</i>
Turkish	43	20
Gujarati	38	39
Hindi	37	37
Urdu	35	32
Polish	30	6
Bengali	32	17
Arabic	21	12
Spanish	12	2

Source: Pharmacy contractor questionnaire (N=48)

Table 23 Languages spoken – City of London

<i>Language</i>	<i>% respondents saying spoken by customers (N=16)</i>	<i>% respondents saying spoken by staff (N=16)</i>
Bengali	13	13
Arabic	10	11
Polish	10	3
Spanish	9	2
Gujarati	8	12
Hindi	7	8
Urdu	4	2
Turkish	4	0

Source: Pharmacy contractor questionnaire (N=16)

The issue of language was a major potential barrier to access identified by the interviewee from the Hackney Refugee Form, however. The languages reported to be most useful for the local migrant population are Turkish/Kurdish, Cantonese, Vietnamese, French (especially in the Kingsmead area of Hackney), Spanish, Arabic (for the Somali community) and Amharic (for the Ethiopian community). A reluctance to use health services in general was identified amongst some migrant groups, partly due to language and partly due to lack of awareness or confidence in negotiating the system.

Related to language, of the 11 participants of the Learning Disability Forum who gave their views, six of these identified an absence of easy read leaflets in local pharmacies, but only two said they wanted information in easy read format.

5.1.4 Opening hours

A pharmacy's terms of service specifies the hours between which they are required to open. Opening hours of community pharmacies should adapt to the demand of the local population and are influenced by the opening hours of GP practices and other relevant services, as well as the demands of commuters into the area. It is important to understand whether the pattern of opening hours reflects local needs and whether there is adequate 'out-of-hours' provision.

It should be noted that City and Hackney PCT previously went through a procurement process to secure extended pharmacy opening hours in Hackney, including bank holiday opening. Two LPS contracts were awarded as a result. However one was terminated by contractors in early 2014 and the other will come to an end at the end of March 2015, with lack of activity given as the reason in both cases. As the PNA is scheduled for publication on 1 April 2015 (after the termination of the remaining contract), data on LPS extended opening hours has been excluded from this assessment.

Two community pharmacies located in the City of London are open for 100 hours or more each week (none in Hackney). In Hackney, eight pharmacies are open more than 60 hours each week (five in Stoke Newington locality, one in North East and two in Homerton locality).

The opening hours of each pharmacy located in Hackney and the City for each day of the week are presented in diagrammatic form in appendix G.

5.1.4.1 Weekday opening hours

Table 24 shows that just one pharmacy located in Hackney is open at or before 8am Monday to Friday, in Homerton locality. Fifteen out of the 16 pharmacies located in the City are at or before 8am on weekdays.

Five pharmacies located in Hackney close at 8pm or later Monday to Friday (one in Homerton, one in the North East and three in Stoke Newington locality). In the City of London, four pharmacies are open late in the evening (Table 25).

Table 24 **Monday to Friday – City and Hackney pharmacies that are open at or before 8am**

<i>Map reference</i>	<i>Pharmacy name</i>	<i>Locality</i>
214	Tesco Instore Pharmacy	Homerton
101	Boots, Broadgate	City of London
102	Boots, Bishopsgate	City of London
103	Boots, Moorgate	City of London
104	Boots, Cheapside	City of London
105	Boots, Houndsditch	City of London
106	Boots, Fenchurch Street	City of London
107	Boots, Aldgate	City of London
108	Boots, Gracechurch Street	City of London
109	Boots, Fleet Street	City of London
110	Boots, Paternoster Square	City of London
111	Boots, 1 New Change	City of London
112	Boots, Cannon Street	City of London
113	Boots, King William Street	City of London
114	Boots, New Bridge Street	City of London
115	Boots, Wormwood Street	City of London

Table 25 **Monday to Friday – City and Hackney pharmacies closing at 8pm or later**

<i>Map reference</i>	<i>Pharmacy name</i>	<i>Locality</i>
505	Boots, Kingsland High Street	Stoke Newington
506	Dev's Chemist	Stoke Newington
508	Morrisons Pharmacy	Stoke Newington
302	ABC Pharmacy	North East
214	Tesco Instore Pharmacy	Homerton
101	Boots, Broadgate	City of London
102	Boots, Bishopsgate	City of London
103	Boots, Moorgate	City of London
112	Boots, Cannon Street	City of London

5.1.4.2 Weekend opening hours

Thirty-nine pharmacies located in Hackney and five pharmacies in the City of London are open on a Saturday (Table 26).

Eight pharmacies located in Hackney and three pharmacies in the City of London are open on a Sunday (Table 27). Two pharmacies in the Stamford Hill area in the north of Hackney close on a Saturday and open extended hours on a Sunday, which probably reflects the religious traditions of the significant orthodox Jewish population resident in this area.

Table 26 City and Hackney pharmacies open on Saturday

<i>Map reference</i>	<i>Pharmacy name</i>	<i>Locality</i>
501	ABC Pharmacy	Stoke Newington
502	J Edmunds Chemists	Stoke Newington
503	Megtraco	Stoke Newington
504	Benjamin Chemist	Stoke Newington
505	Boots the Chemists	Stoke Newington
506	Dev's Chemist	Stoke Newington
507	Armstrong Dispensing Chemist	Stoke Newington
508	Morrisons Pharmacy	Stoke Newington
509	Allen Pharmacy	Stoke Newington
510	Park Chemist	Stoke Newington
511	Rowlands Pharmacy	Stoke Newington
512	Safedale Ltd	Stoke Newington
515	Superdrug Pharmacy	Stoke Newington
303	Boots the Chemist	North East
304	Cohens Chemist	North East
305	Friends Pharmacy	North East
308	F A Strange	North East
309	Land Chemist	North East
310	Safedale Ltd	North East
201	Bee's Pharmacy	Homerton
202	Boots the Chemist	Homerton
203	Regal Pharmacy	Homerton
204	K Sonigra Chemist	Homerton
205	Carsil (Marijak Pharmacy)	Homerton
207	Silverfields Chemists	Homerton

Table 26 (cont.) City and Hackney pharmacies open on Saturday

<i>Map reference</i>	<i>Pharmacy name</i>	<i>Locality</i>
208	Kalpesh Chemist	Homerton
209	Clockwork Pharmacy	Homerton
210	Clockwork Pharmacy	Homerton
212	Victoria Park Pharmacy	Homerton
213	Safedale Ltd	Homerton
214	Tesco Instore Pharmacy	Homerton
401	Murray's Chemist	Shoreditch
402	Clarks Chemist	Shoreditch
403	Finstead (Hoxton) Ltd	Shoreditch
404	Kingsland Pharmacy	Shoreditch
406	Judd's Pharmacy	Shoreditch
407	Spring Pharmacy	Shoreditch
408	Norlington Chemist Ltd	Shoreditch
409	Unipharm Pharmacy	Shoreditch
101	Boots, Broadgate	City of London
102	Boots, Bishopsgate	City of London
103	Boots, Moorgate	City of London
112	Boots, Cannon Street	City of London
116	Chauhan S Chemist ^a	City of London

^a Also known as Niemans Chemist

Table 27 City and Hackney pharmacies open on Sunday

<i>Map reference</i>	<i>Pharmacy name</i>	<i>Locality</i>
505	Boots, Kingsland High Street	Stoke Newington
508	Morrisons Pharmacy	Stoke Newington
515	Superdrug Pharmacy	Stoke Newington
302	ABC Pharmacy	North East
303	Boots, Stamford Hill	North East
307	Dunsmure Pharmacy	North East
202	Boots, Mare Street	Homerton
214	Tesco Instore Pharmacy	Homerton
101	Boots, Broadgate	City of London
102	Boots, Bishopsgate	City of London
112	Boots, Cannon Street	City of London

Table 28 summarises the total number of pharmacies ‘accessible to’ (i.e. located in or in close proximity to) each locality that are open early morning or late evening during the working week or anytime at the weekend.

Two Hackney localities, Stoke Newington and North East, are not served by any pharmacy that is open at 8am or earlier on weekdays, but access to a pharmacy is available in all localities at 8pm or later Monday to Friday.

There is good access to pharmacies on Saturdays across all localities in Hackney and in the City of London; and at least two pharmacies are open in or in close proximity to each locality on Sundays.

Table 28 **Number of pharmacies open out-of-hours accessible to each locality^a**

<i>Locality</i>	<i>Open at/before 8am (Mon to Fri)</i>	<i>Open until/after than 8pm (Mon to Fri)</i>	<i>Open on Saturday</i>		<i>Open on Sunday</i>
			<i>Until lunchtime</i>	<i>Until 4pm or later</i>	
Stoke Newington	0	4	1	18	6
North East	0	2	5	9	4
Homerton	1	2	3	15	2
Shoreditch	4	4	3	18	4
City of London	19	4	1	8	4

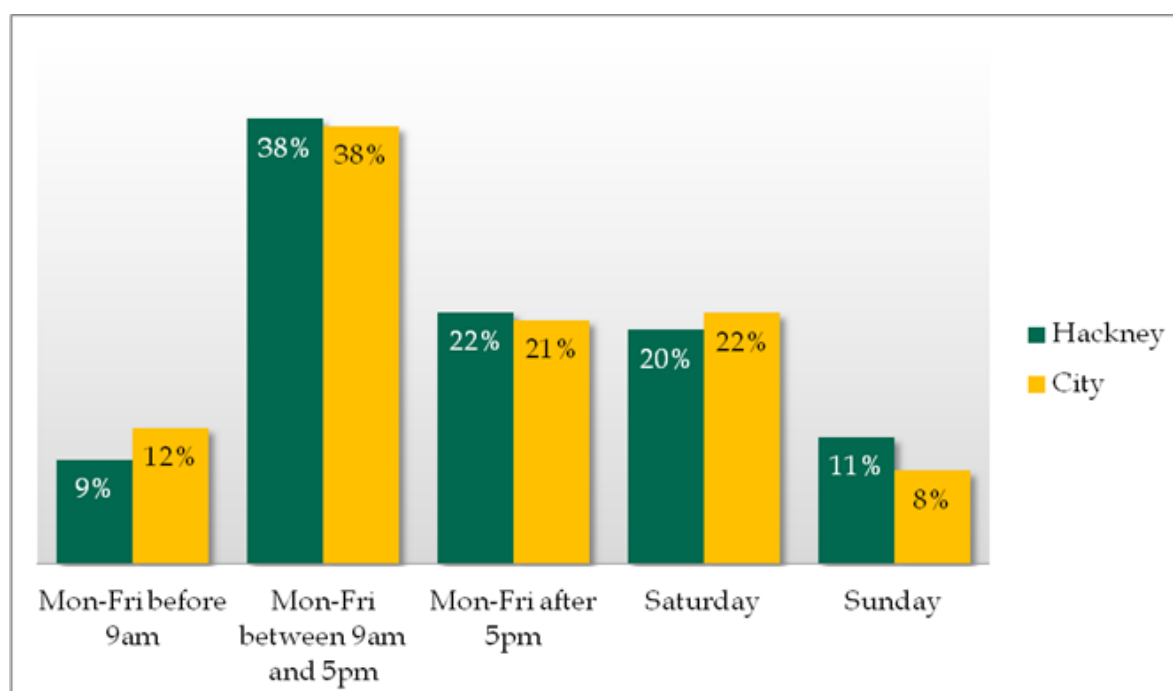
^a Includes pharmacies located within the locality and those located within 0.25 miles of each locality (within and outside Hackney and City borders).

5.1.4.3 Patient and public views

The most convenient pharmacy opening hours reported by survey respondents do not differ significantly between City and Hackney (Figure 28). Daytime working hours are most popular with respondents in both areas, followed by evening and Saturday opening. Saturday opening is convenient across all localities, but Sunday is more popular for those living in Stoke Newington and North East localities, which may be at least partly attributed to the large orthodox Jewish community residing in these areas.

A small minority of survey respondents (seven in Hackney and one in the City) did call for longer opening hours, especially in the evening and at the weekend.

Figure 28 Most convenient opening times as reported by patients and the public



NB: Figures are % of responses not respondents (multiple responses were allowed)

5.1.4.4 Opening hours of other relevant services

In order to assess the need for community pharmacy services created by other local NHS services, we have also examined the opening hours of GP practices, minor injuries clinics and out-of-hours health services in Hackney and the City of London. By comparing these opening hours to current opening hours of community pharmacies, we can determine if current opening hours are adequate to meet local need.

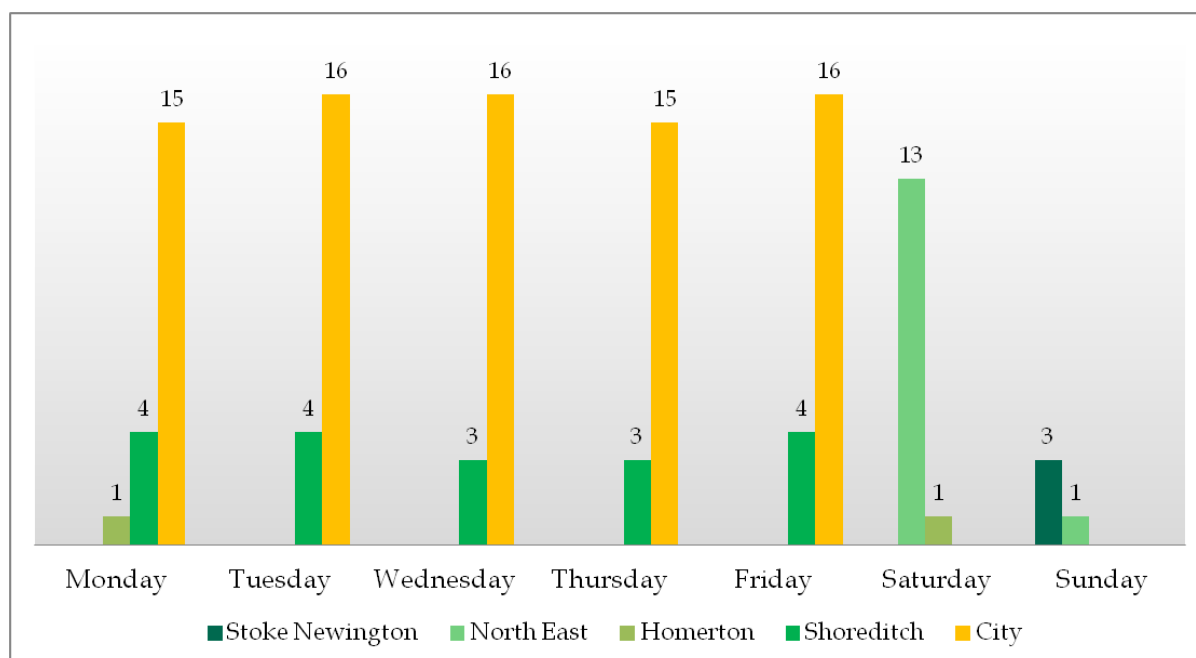
GP opening hours

The charts in appendix G show in graphical form the earliest and latest opening hours of GP practices, together with the opening hours of pharmacies located *within* each of the Hackney localities and in City of London. Figure 29 and Figure 30 show the number of pharmacies *accessible to* (i.e. located within or in close proximity to) each locality that are open before or at the same time as the earliest opening GP practice and until or after the latest closing GP practice. When considering the results, please note that neither the one GP practice located in the City of London nor any of the practices in Shoreditch locality are open on Saturday or Sunday.

Monday to Friday, only Shoreditch locality and the City have accessible pharmacies which are open by the time the earliest GP practice has opened; one pharmacy associated with Homerton is open before the earliest GP practice in this locality on Monday only. None of the out-of-area pharmacies in close proximity to any of the Hackney localities are open before the earliest GP practice during the week. It is worth noting, however, that all Hackney localities are well served by pharmacies that open by 9am Monday to Friday, which should meet the needs of most patients, based on responses to our patient/public survey (Figure 28).

On Saturday, no pharmacies are open in or near Stoke Newington before the earliest opening GP practice, but on Sunday there is good early access to pharmacies in all localities where a GP practice is open. (Figure 29)

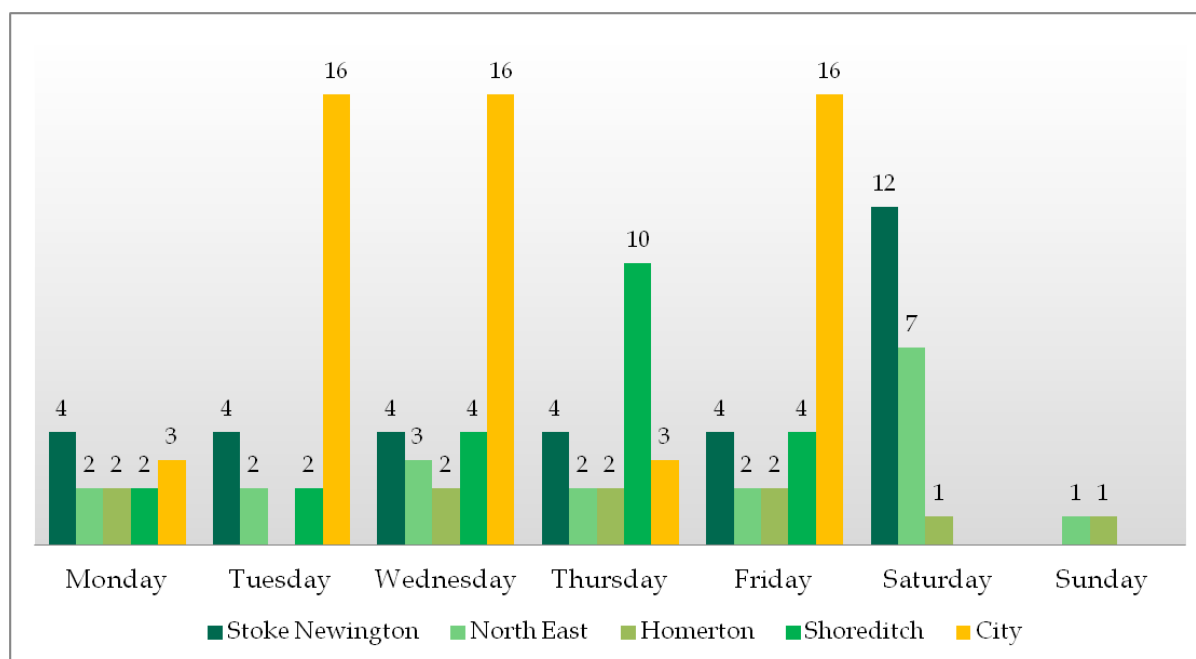
Figure 29 Number of pharmacies accessible to^a each locality open before/at the same time as the earliest opening GP practice



^a Located in the locality, or within 0.25 miles of the locality *within* City and Hackney borders.

On weekdays, all localities have access to at least one pharmacy which is open after the latest GP practice has closed, except in Homerton on Tuesday (Figure 30). On Sunday, no pharmacies are open in Stoke Newington after the latest GP practice has closed.

Figure 30 Number of pharmacies accessible to^a each locality open until/after latest closing GP practice



^a Located in the locality, or within 0.25 miles of the locality *within* City and Hackney borders.

City and Hackney CCG are in the process of implementing an extended hours contract that goes beyond the requirement of the Direct Enhanced Service. The contract is being implemented from October 2014 and is expected to be rolled out across all GP practices by December. The precise impact of this new contract on opening hours, and the implications for pharmaceutical services, will not be known until the contract is fully implemented. We will reflect any impact we have assessed as likely to result in the post-consultation draft of this report.

Minor injuries clinic

There is one minor injuries clinic in the City, based at Bart's Hospital. The clinic is open between 8am and 4pm Monday to Friday. The service is nurse led and no FP10 prescriptions are issued by the service.¹⁷

Out-of-hours services

City and Hackney Urgent Healthcare Social Enterprise (CHUHSE) has been commissioned to provide out-of-hours GP services since December 2013. The CHUHSE service is available from 6.30pm to 8am Monday to Friday and all weekend. Commonly used medicines (e.g. antibiotics, painkillers) are dispensed by GPs in pre-packs as necessary; other medicines are supplied via FP10 prescription.

¹⁷ NHS FP10 secure prescription forms, incorporating serial numbers and anti-counterfeiting features, were introduced in April 1998. FP10 prescriptions are purchased by NHS organisations, including hospital trusts, and are distributed free of charge to medical and non-medical prescribers, NHS dentists and other organisations as required.

The Primary Urgent Care Centre (PUCC) is a walk-in centre based in Homerton hospital. Patients are triaged on arrival to either the PUCC or A&E. PUCC is open all hours *except*:

- 3am to 7am, Monday to Friday
- 3am to 8am, Saturday and Sunday.

If a patient is seen by a nurse practitioner at the PUCC, medicines can be supplied either in pre-packs via PGD or, if not within the range of pre-pack medicines, they can ask a GP to write an FP10 prescription. If a patient is seen by a GP at PUCC, medicines are supplied via pre-packs or FP10 as appropriate.

The vast majority of CHUHSE and PUCC patients are seen on-site at Homerton hospital. Anecdotally, a need has been identified by the services for a pharmacy to be open in Hackney (ideally located near to Homerton hospital) until 10pm or midnight every day. Currently, CHUHSE or PUCC patients are often sent to the nearest late opening pharmacy in Haringey for their prescriptions, which is 3.8 miles away or a minimum 31 minute public transport journey (more at off-peak hours). However, also anecdotally, a previous extended hours LPS contract was signed by a pharmacy in the vicinity of Homerton hospital (map reference 201), but is in the process of being terminated due to cited lack of demand and the use of pre-packed medicines supplied directly to patients in the clinic. We do not have sufficient evidence on this basis to conclude that there is an unmet need for a late night opening pharmacy in this locality.

Paradoc is a 24 hour service, whereby a GP accompanies ambulance call-outs, in order to prevent unnecessary hospital admissions. Medicines are supplied as described for CHUHSE and PUCC – via pre-packs or FP10 prescriptions.

Assessment of opening hours – Hackney

- Apart from early opening in the Stoke Newington and North East localities, there is good access to pharmacies in Hackney at different times of the day/week. The pattern of opening hours reflects the expressed demand of respondents to the patient/public survey.
- The recent termination of the two extended hours LPS contract in Hackney due to lack of demand would suggest that there is no need for formal arrangements to secure out-of-hours opening. However, we recommend that NHS England keeps the current situation under review to ensure that opening hours are adequately integrated with all other primary care and out-of-hours services.

Assessment of opening hours – City of London

- The City is well serviced by out-of-hours pharmacies. In particular, there is good access to pharmacies before 8am, largely reflecting demand from the daytime worker population.

5.1.5 Dispensing services

Dispensing services are provided by 49 pharmacies in Hackney and 16 pharmacies in the City of London. A total of 2,934,282 prescriptions written by Hackney GPs were dispensed in 2013-14. The one GP in the City issued 87,157 prescriptions over this same 12 month period.

It should be noted that information on prescriptions issued by GPs outside of City or Hackney, but where City or Hackney residents are registered, is not available from the partners involved in producing this PNA.

5.1.5.1 Benchmarking dispensing services

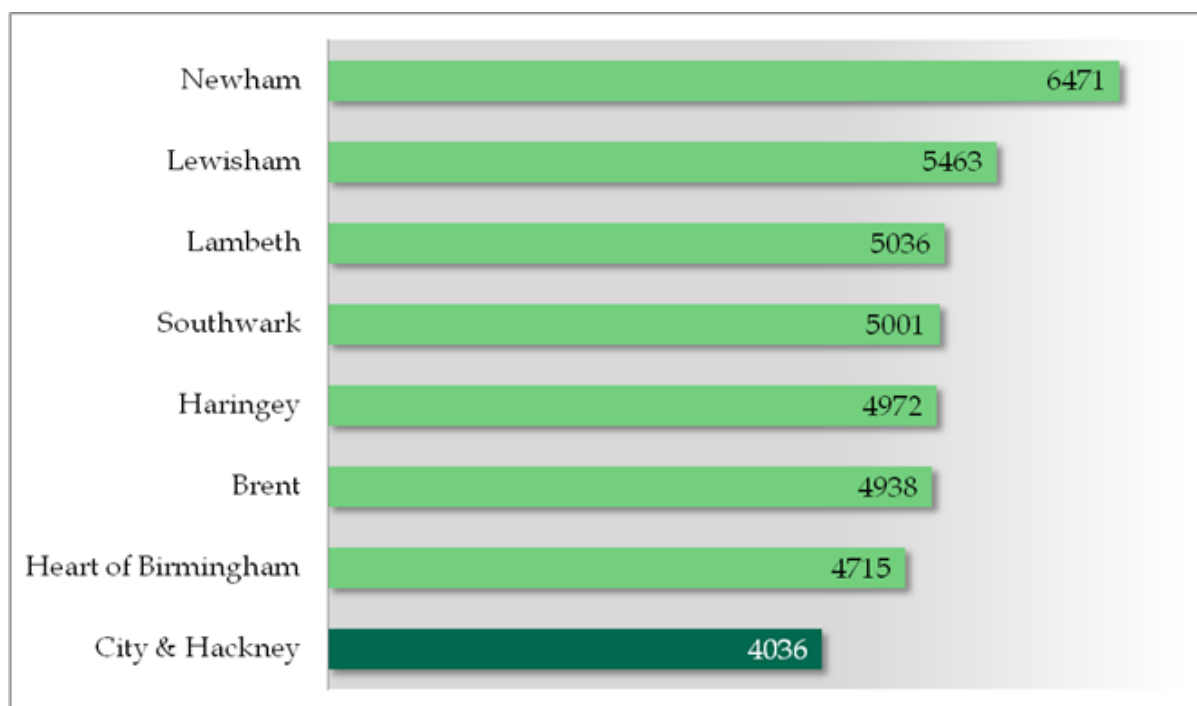
Benchmarking data on dispensing patterns for City and Hackney ONS comparator areas is presented in Figure 31. The latest comparative data is available for 2012-13, but this is not available at a disaggregated level for City and Hackney as it relates to the period when there was a single PCT covering both areas. As such, the ONS comparators are slightly different to those presented for separate City and Hackney analyses elsewhere in this report.

Comparator data for 2013-14 is expected to be published by the Health and Social Care Information Centre (HSCIC) in November 2014 and will be included in disaggregated form in the final PNA report, subject to availability within the timescale for publication.

Figure 31 shows that in 2012-13, pharmacies in City and Hackney combined dispensed on average 4,036 prescription items per month. This is the lowest average number of items dispensed of the ONS peer group of PCTs. It is difficult to determine the specific reasons underlying these trends, but the slightly lower levels of dispensing activity locally may suggest that the current network of pharmacy contractors is sufficient to manage current levels of demand. It may also indicate that pharmacies potentially have capacity to deliver other (non-essential) services.

Our assessment of dispensing services will be reviewed following publication of the 2013-14 data.

Figure 31 Average number of prescription items per pharmacy per month, City and Hackney combined: comparison with ONS peer group 2012-13



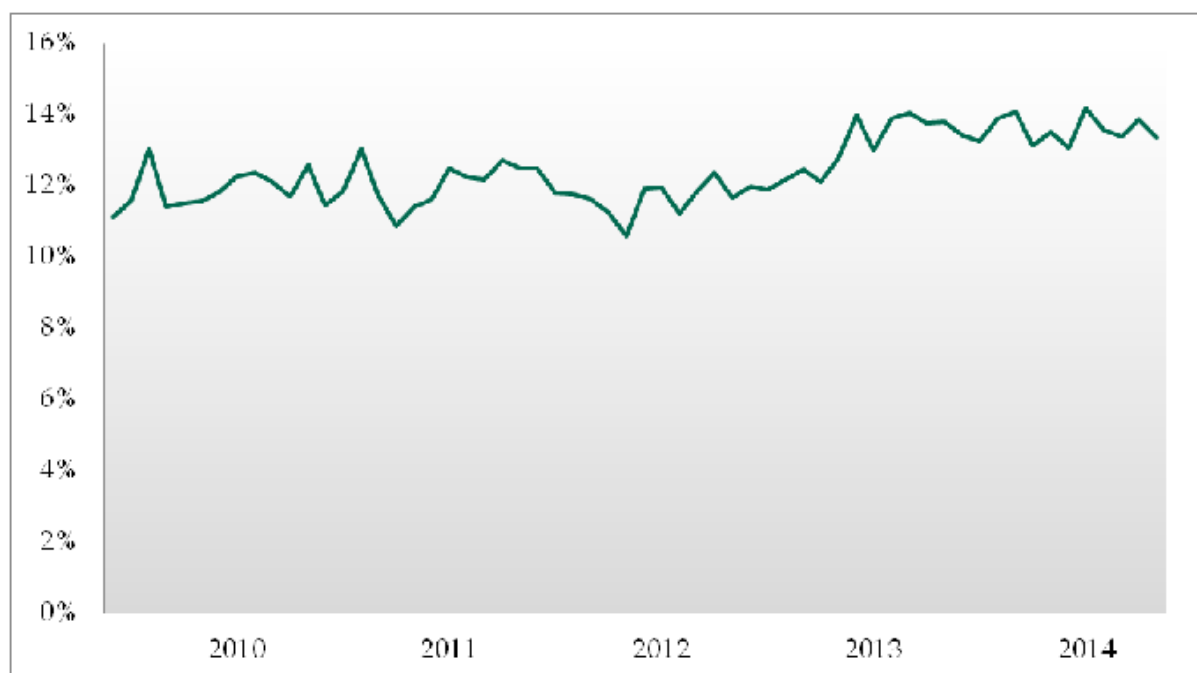
5.1.5.2 Repeat dispensing

Since 2005, repeat dispensing has been an essential service within the NHS contractual framework. Under the service, community pharmacists can dispense regular medicines to suitable patients (according to an agreed protocol), without the direct involvement of the GP surgery on each and every occasion a repeat medicine is required. Despite the obvious benefits that the service can bring to patients and the NHS (at least two thirds of all prescriptions generated in primary care are for patients needing repeat supplies of regular medicines),¹⁸ uptake has been very low.

Figure 32 presents local five year trends for the proportion of prescriptions dispensed via the repeat dispensing service. Data are presented for City and Hackney combined as the CCG is unable to provide figures separately for the two areas. The proportion of prescriptions dispensed via this service remains low, at 13-14%. There is significant scope to increase the number of prescriptions dispensed in this way that would produce real benefits for patients.

¹⁸ <http://psnc.org.uk/services-commissioning/essential-services/repeat-dispensing/>

Figure 32 Trends in prescriptions dispensed via repeat dispensing service (City and Hackney combined)



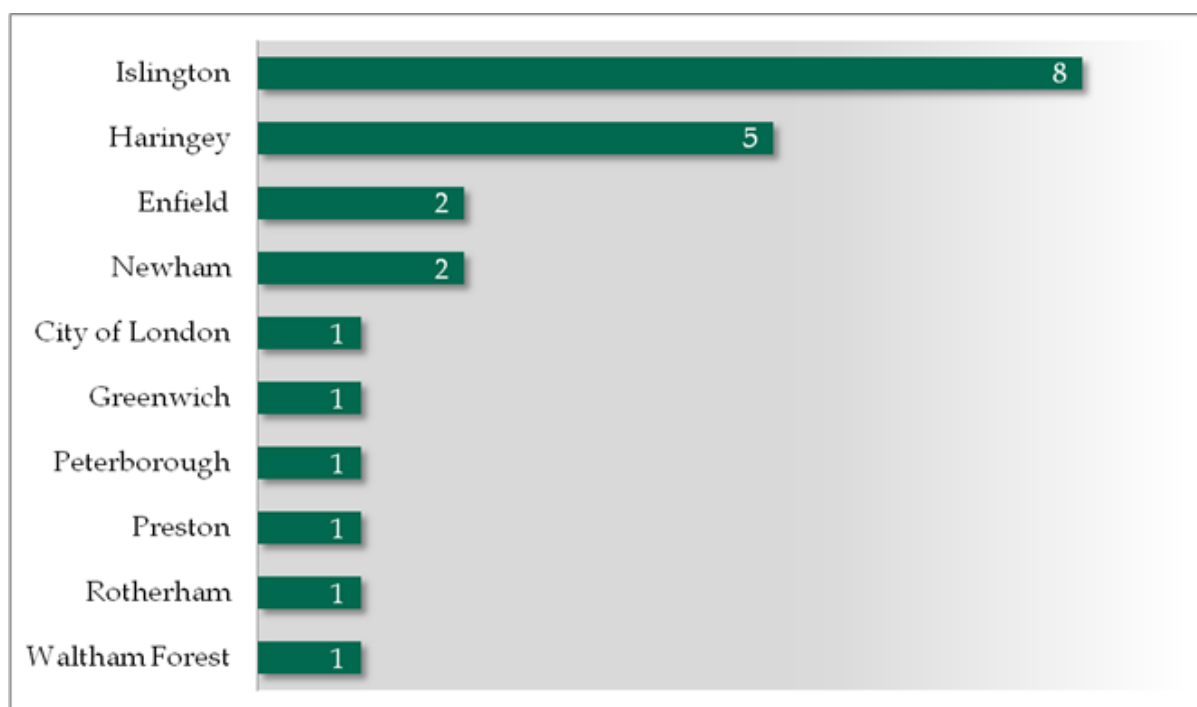
5.1.5.3 Cross-border dispensing

Earlier, we reported that some patients choose to use pharmacies located outside of the area where they are registered with a GP for their dispensing needs. We have identified these pharmacies through an analysis of local dispensing data, supplied by City and Hackney CCG (Figure 33 and Figure 34).

Most prescriptions issued by Hackney GPs (87%) are dispensed by pharmacy contractors within Hackney. Out-of-area dispensing is distributed across a number of different pharmacies; the largest number of out-of-area prescriptions in 2013-14 were dispensed by Leoprime Chemist Ltd in Islington N1 3PB (35,561, or 9% of all cross-border dispensing).

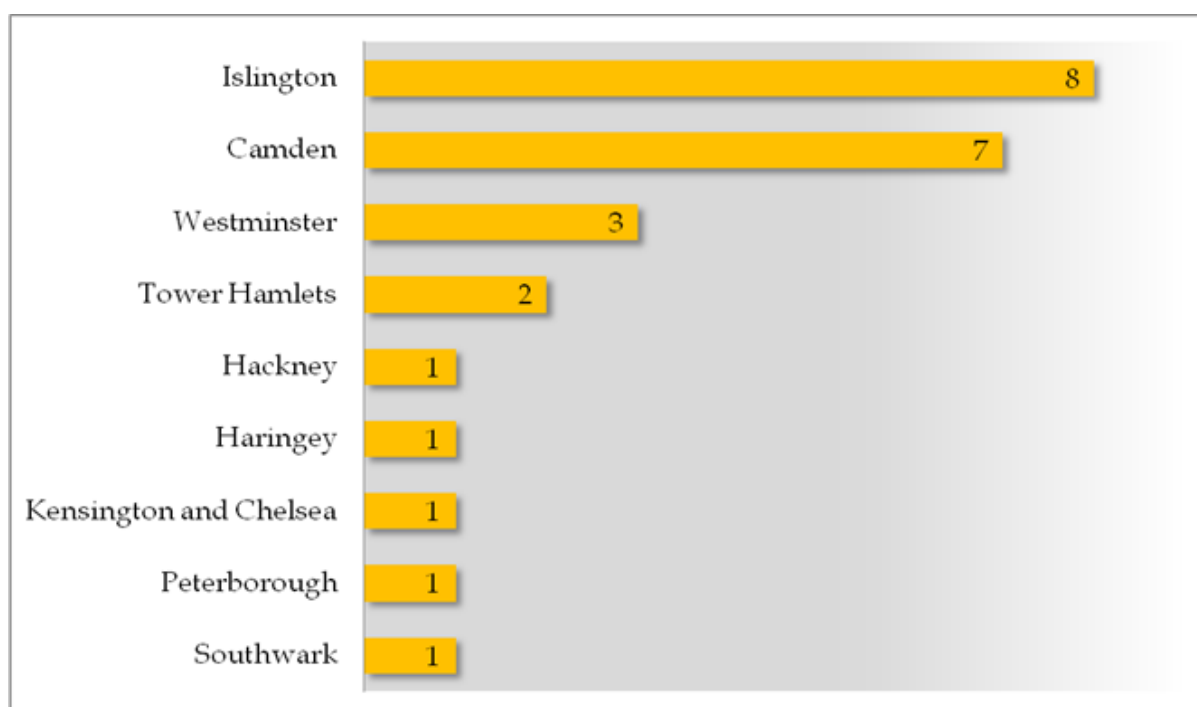
In the City, the majority (61%) of prescriptions are issued by GPs outside the Corporation boundaries. This partly reflects the sizeable population of City residents registered with out-of-area GPs (see section 4.1.1). More than three-quarters (77%) of all cross-border prescriptions in 2013-14 (41,421 in total) were dispensed by Portmans Pharmacy in Islington (EC1Y 8NX) near to the Neaman GP Practice in the north of the City.

Figure 33 **Top 10 out-of-area dispensing pharmacies: Hackney^a**



^a Number of pharmacies in each location shown

Figure 34 **Top out-of-area dispensing pharmacies: City of London^a**



^a Number of pharmacies in each location shown

5.1.5.4 Essential Small Pharmacies Local Pharmaceutical Services Scheme

This scheme provides pharmacy contractors located more than 1km from the nearest pharmacy with a guaranteed minimum income where their dispensing volume falls below a defined threshold. The purpose of the scheme is the secure provision in areas where a pharmacy would otherwise not be viable. This nationally designed and locally managed scheme is expected to come to an end in March 2015.

There are no ESPLPS contracts in either Hackney or the City of London.

5.1.5.5 Appliance and dressings dispensing

Patients receiving prescriptions for surgical appliances (stoma appliances, urology appliances or dressings) may choose to have their prescription dispensed by a dispensing appliance contractor (DAC). DACs are a specialist type of contractor who dispense and advise on the use of appliances. Dispensing appliance contractors have a CCG area in which they are based, but provide services over a wider footprint. Many DACs provide a national service through mail order or a network of stoma nurses. There are no DACs in either Hackney or the City of London.

Any pharmacy may choose to dispense appliances, however. Data from City and Hackney CCG has identified that 43 (out of 49) pharmacies located in Hackney dispense over 80,000 appliances to patients registered with a City or Hackney GP (Table 29).

In the City, 12 (out of 16) pharmacies dispensed just over 1,000 appliances in 2013-14 to City registered patients.

This indicates that our populations have good access to dispensing of appliances and devices within the two areas.

Table 29 Appliance dispensing by pharmacies located in Hackney and City of London 2013-14

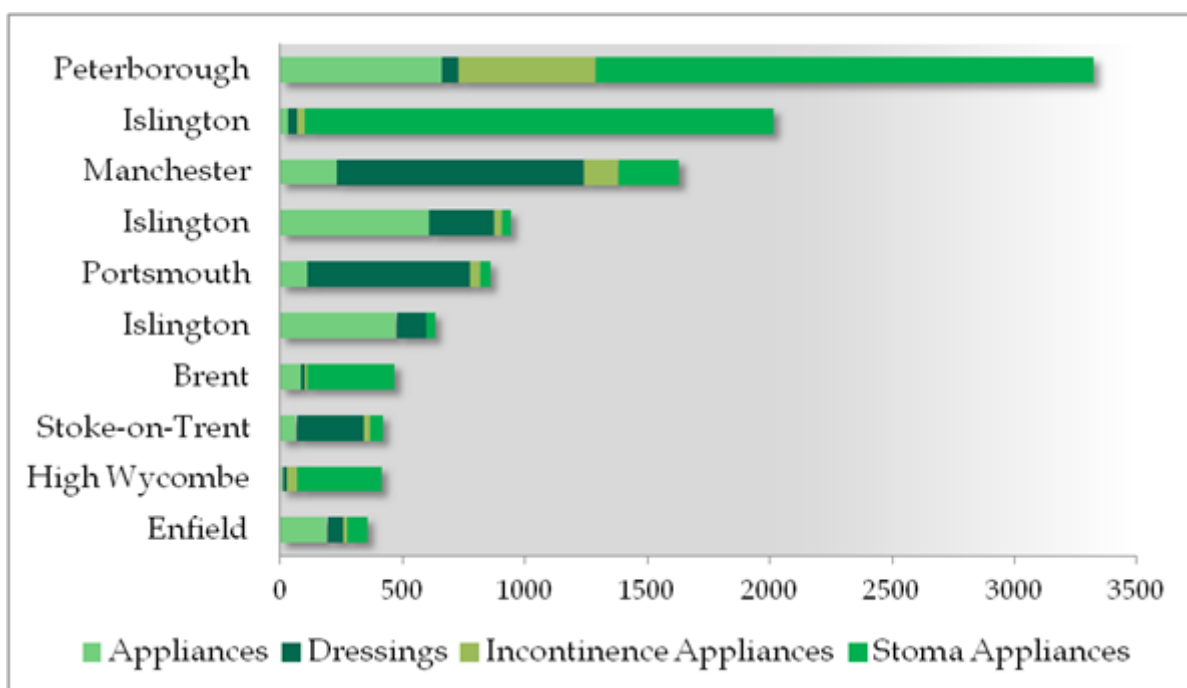
Locality	Number pharmacies dispensing all appliances	Number of appliances dispensed^a			
		<u>Appliances</u>	<u>Dressings</u>	<u>Incontinence appliances</u>	<u>Stoma appliances</u>
Stoke Newington	14	19,675	3,742	322	483
North East	9	15,736	3,519	208	326
Homerton	11	19,239	3,686	218	275
Shoreditch	9	11,552	1,887	202	253
Hackney total	43	66,202	12,834	950	1,337
City of London	12	839	117	59	40

^a includes all appliances and dressings

In addition to appliances dispensed by pharmacies located *within* Hackney or the City, the local population is also served by a number of out-of-area appliance dispensers. In fact, the majority of incontinence appliances (57%) and most stoma appliances (82%) are supplied by out-of-area dispensers.

The location of the top 10 out-of-area appliance dispensers (including DACs), together with a breakdown of the type of appliances dispensed, is described in Figure 35. The biggest dispenser in terms of number of appliances dispensed, is located in Peterborough (3,324 appliances dispensed to City and Hackney registered patients in 2013-14).

Figure 35 Number of appliances dispensed by out-of-area pharmacies (City & Hackney combined) 2013-14^a



^a Location of individual pharmacies shown

Assessment of dispensing services – Hackney

- There is significant scope for increasing the number of prescriptions supplied through the repeat dispensing service, which must be initiated by GPs. We recommend that NHS England support the adoption and roll out of repeat dispensing by GP practices for the benefit of patients.
- Based on the latest dispensing data, there is potentially some capacity in the system for community pharmacies to deliver more non-dispensing services to the local population, but this assessment will need to be reviewed on receipt of 2013-14 benchmarking data.

Assessment of dispensing services – City of London

- There is significant scope for increasing the number of prescriptions supplied through the repeat dispensing service, which must be initiated by GPs. We recommend that NHS England support the adoption and roll out of repeat dispensing by GP practices for the benefit of patients.
- Based on the latest dispensing data, there is potentially capacity in the system for community pharmacies to deliver more non-dispensing services to the local population, but this assessment will need to be reviewed on receipt of 2013-14 benchmarking data.

5.1.6 Conclusions in relation to essential services

Essential services, which include dispensing of NHS prescriptions, are a fundamental service for the public. They are commissioned nationally by NHS England and provide a network of pharmacies through which local populations can obtain prescribed medicines in a safe and reliable manner.

Hackney

We consider that essential services, including dispensing services, are **necessary to meet a current need** for pharmaceutical services in Hackney.

Hackney has a comprehensive network of pharmacies and the number of pharmacies is sufficient for the size of our local population. There are also a number of pharmacies located across the border in neighbouring boroughs that are easily accessible by, and provide essential services to, our population. There is no evidence from the patient/public survey of any unmet need in relation to essential services in Hackney. We have therefore concluded that there are **no current gaps in the network of community pharmacies**.

In light of current levels of demand for access at different times of the day/week (as identified in the patient/public survey) and the termination of the two previous LPS extended hours contracts in Hackney, we have concluded that there is no need for formal arrangements to secure extended, including bank holiday, opening hours.

There is significant scope to extend access to the repeat dispensing service, which would benefit the local population.

Measures should be taken to ensure that pharmaceutical services are accessible to all communities within Hackney, including disabled people and people who do not speak English as their main language.

City of London

We consider that essential services, including dispensing services, are **necessary to meet a current need** for pharmaceutical services in the City of London.

The City has a comprehensive network of pharmacies and the number of pharmacies is sufficient for the size of our local population. There are also a number of pharmacies located across the border in neighbouring boroughs that are easily accessible by, and provide essential services to, our population. There is no evidence from the patient/public survey of any unmet need in relation to essential services in the City. We have therefore concluded that there are **no current gaps in the network of community pharmacies**.

In light of current levels of demand for access at different times of the day/week, as identified in the patient/public survey, we have concluded that there are no gaps in current opening hours across the existing network.

There is significant scope to extend access to the repeat dispensing service, which would benefit the local population.

5.2 Advanced services

Four advanced services, commissioned by NHS England, are available for community pharmacies to provide within the NHS pharmacy contract. These are:

- Appliance Use Review (AUR)
- Medicines Use Review (MUR)
- New Medicines Service (NMS)
- Stoma Appliance Customisation (SAC)

No pharmacies were providing AUR or SAC services in either Hackney or the City in 2013-14. However, seventeen respondents to the pharmacy contractor survey (15 in Hackney and two in the City) stated that they were planning to provide AUR services in the next 12 months (nine Hackney pharmacies claimed to be currently doing so, despite information from NHS England to the contrary for 2013-14); and 14 (12 in Hackney, two in the City) stated that they were planning to provide a SAC service in the next 12 months (again, four pharmacies, all in Hackney, claimed to be currently providing this service, but were not doing so in 2013-14 according to NHS England data).

5.2.1 Medicines Use Review

The MUR service provides structured support for people on high risk or multiple medicines, particularly those with long-term conditions. It aims to improve patients' understanding of their medicines, identify any problems they are experiencing and propose solutions where appropriate, improve adherence and reduce medicines wastage (usually by encouraging the patient to only order the medicines they require). National target groups have been agreed in order to guide the selection of patients to whom the service is offered, as follows:

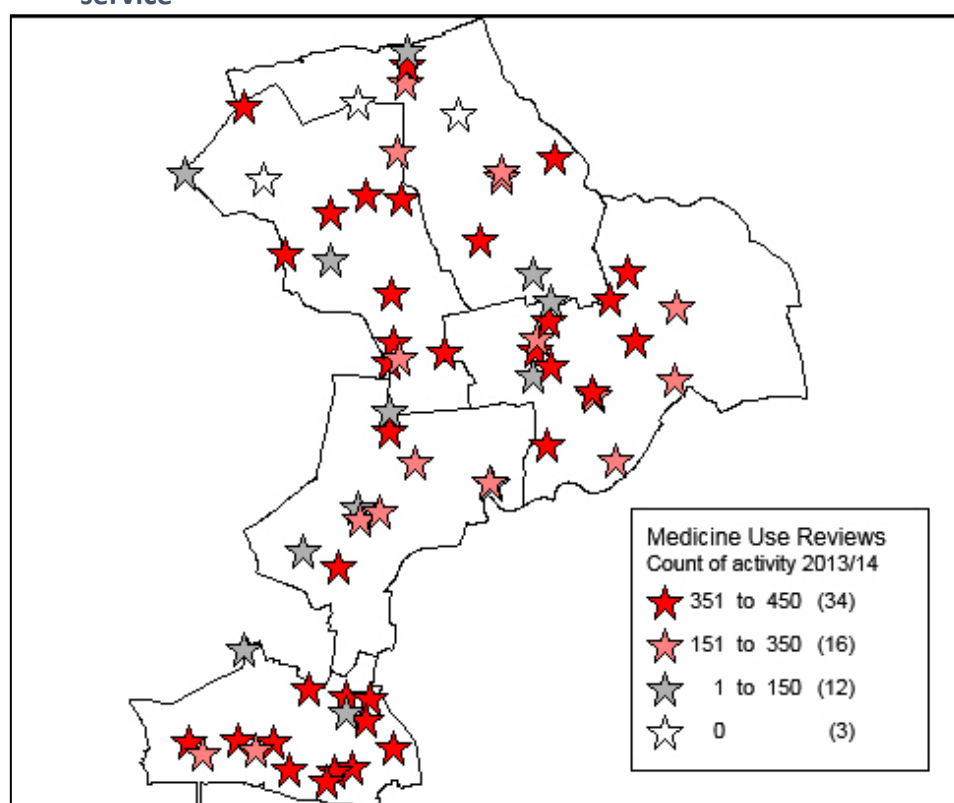
- patients taking high risk medicines
- patients recently discharged from hospital who had changes made to their medicines while they were in hospital
- patients with respiratory disease
- patients at risk of, or diagnosed with, cardiovascular disease and regularly being prescribed at least four medicines.

The geographical location of pharmacies providing the MUR service across Hackney and the City of London is shown in Figure 36. Table 30 provides further detail of pharmacies located in City and Hackney by the level of MUR activity.

A total of 48 (out of 49) pharmacies in Hackney provide the MUR service and access is good across most parts of the borough. While there might appear to be a potential gap in/near the north of Stoke Newington (where two 'zero activity' pharmacies are located), one of these (map reference 507) changed hands during 2013/14 and is now providing MUR services, according to their response to the pharmacy contractor survey.

All pharmacies located in the City provide the MUR service and most have very high levels of activity.

Figure 36 **Geographical distribution of City and Hackney pharmacies providing MUR service**



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Table 30 **Levels of MUR activity in pharmacies located in the City and Hackney 2013-14**

<i>Locality</i>	<i>No. Pharmacies that do not provide</i>	<i>Inactive</i>	<i>Low</i>	<i>Medium</i>	<i>High</i>	<i>Total no. providing service</i>
Stoke Newington	1	0	3	2	9	14
North East	0	2	3	3	3	11
Homerton	0	0	1	5	8	14
Shoreditch	0	0	3	4	2	9
City of London	0	0	2	2	12	16

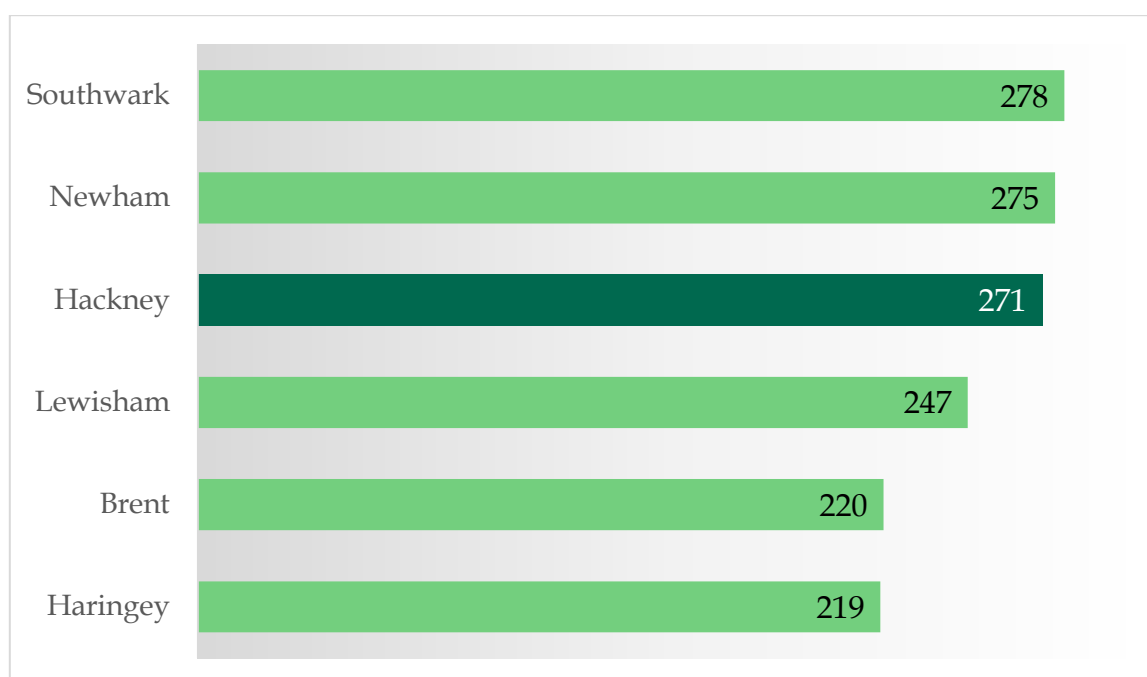
Key: Inactive=signed up, but no activity recorded
 Low=1-150 MURs
 Medium=151-350 MURs
 High=351+ MURs

Data for ONS comparator groups is available for 2012-13 and presented separately for City of London and Hackney (2013-14 data) in Figure 37 and Figure 38. City and Hackney data is reported for 2013-14, as disaggregated data is not available for 2012-13. Comparator data for 2013-14 is expected to be published by the Health and Social Care Information Centre (HSCIC) in November 2014 and will be included in the final PNA report, subject to availability within the timescale for publication. It is worth noting that trends in MUR activity between 2012-13 and 2013-14 show an average 11% increase. If this increase is applied to all our ONS peer areas, this would show Hackney keeping pace with its comparators and City of London continuing to outperform its comparators.

Hackney is one of the 'higher performers' within its peer group in terms of MUR activity per participating pharmacy.

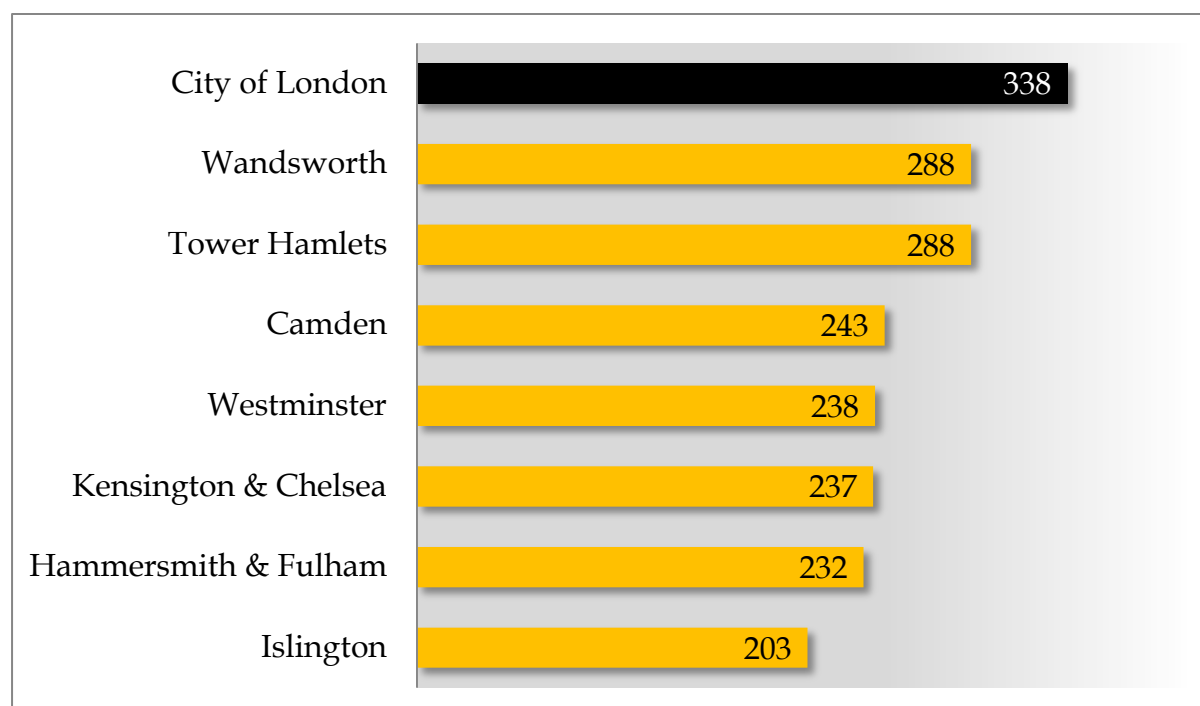
City of London has the highest number of MURs per pharmacy, when compared to its ONS peer group.

Figure 37 **Average MURs per pharmacy, Hackney: comparison with ONS peer group 2012-13**



NB: Data for Hackney is for 2013-14.

Figure 38 **Average MURs per pharmacy, City of London: comparison with ONS peer group 2012-13**



NB: Data for City of London is for 2013-14.

5.2.1.1 Patient and public views

Around one quarter (23%) of survey respondents who live or work in Hackney say they have used the MUR service and a similar proportion (24%) say they would be interested in using this in the future.

Feedback from the Hackney Refugee Forum indicated a need for this service among some migrant communities where there is a tradition for self-medication alongside their prescribed treatment, often sharing medicines with their families and friends. Language and literacy issues were also raised as barriers to correct use of medicines.

Similarly among City respondents, one in five (20%) reported having used the MUR service and a further 28% said they would like to in future.

5.2.2 New Medicines Service (NMS)

The NMS provides support for people with long-term conditions newly prescribed a medicine to help improve medicines adherence; it is currently focused on patients with/on the following conditions/treatments:

- asthma and COPD
- type 2 diabetes
- antiplatelet/anticoagulant therapy
- hypertension.

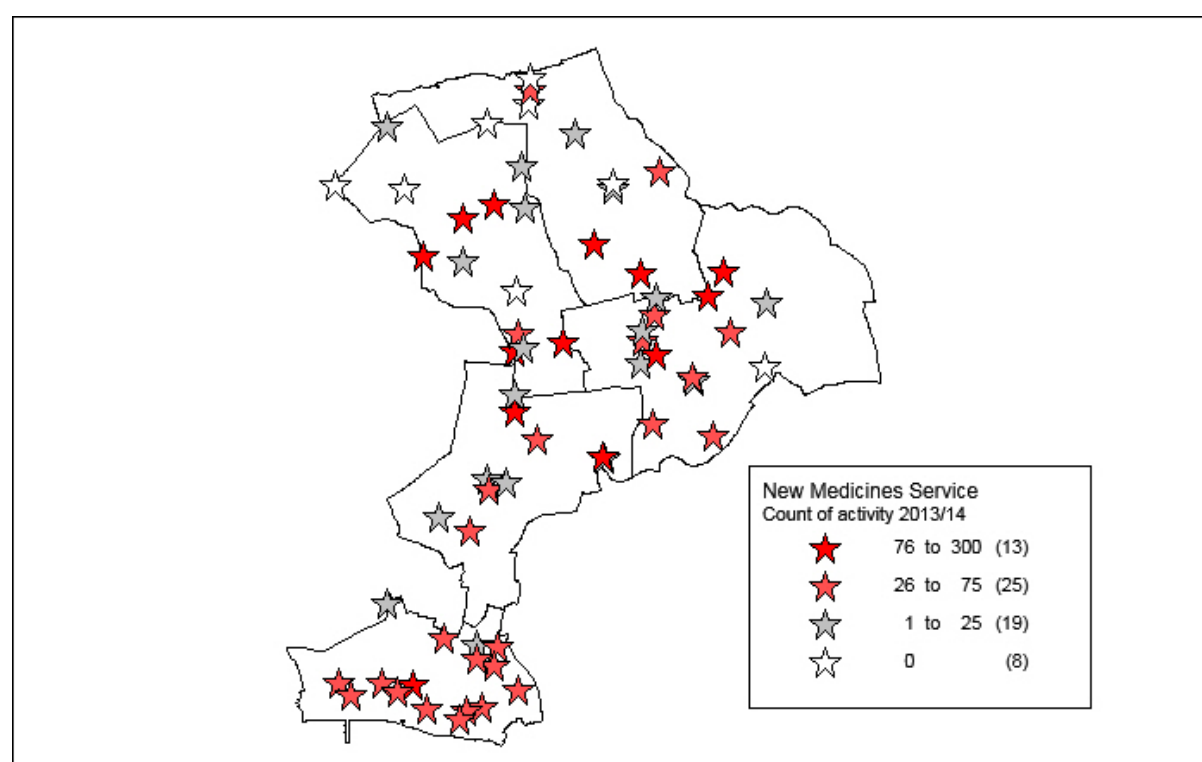
A recent evaluation of the service by the University of Nottingham showed that NMS delivered better patient outcomes for a reduced cost to the NHS.¹⁹

The geographical location of pharmacies providing NMS across Hackney and the City of London is shown in Figure 39. Table 31 provides further detail of pharmacies located in City and Hackney by the level of NMS activity.

Forty-eight (out of 49) pharmacies in Hackney provide the NMS service and there is good access across the borough. Again, one of the three 'zero activity' pharmacies in/near the north of Stoke Newington locality (map reference 507) is now providing this service, according to their response to the pharmacy contractor survey.

All pharmacies located in the City provide the NMS service and were 'active' in 2013-14.

Figure 39 **Geographical distribution of City and Hackney pharmacies providing NMS**



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¹⁹ <http://www.nottingham.ac.uk/~pazmjb/nms/> (accessed 22.10.2014)

Table 31 Levels of NMS activity in pharmacies located in the City and Hackney 2013-14

<i>Locality</i>	<i>No. pharmacies that do not provide</i>	<i>Inactive</i>	<i>Low</i>	<i>Medium</i>	<i>High</i>	<i>Total no. providing service</i>
Stoke Newington	1	2	6	1	5	14
North East	0	4	3	2	2	11
Homerton	0	1	4	6	3	14
Shoreditch	0	0	4	3	2	9
City of London	0	0	2	13	1	15

Key: Inactive=signed up, but no activity recorded

Low=1-25 consultations

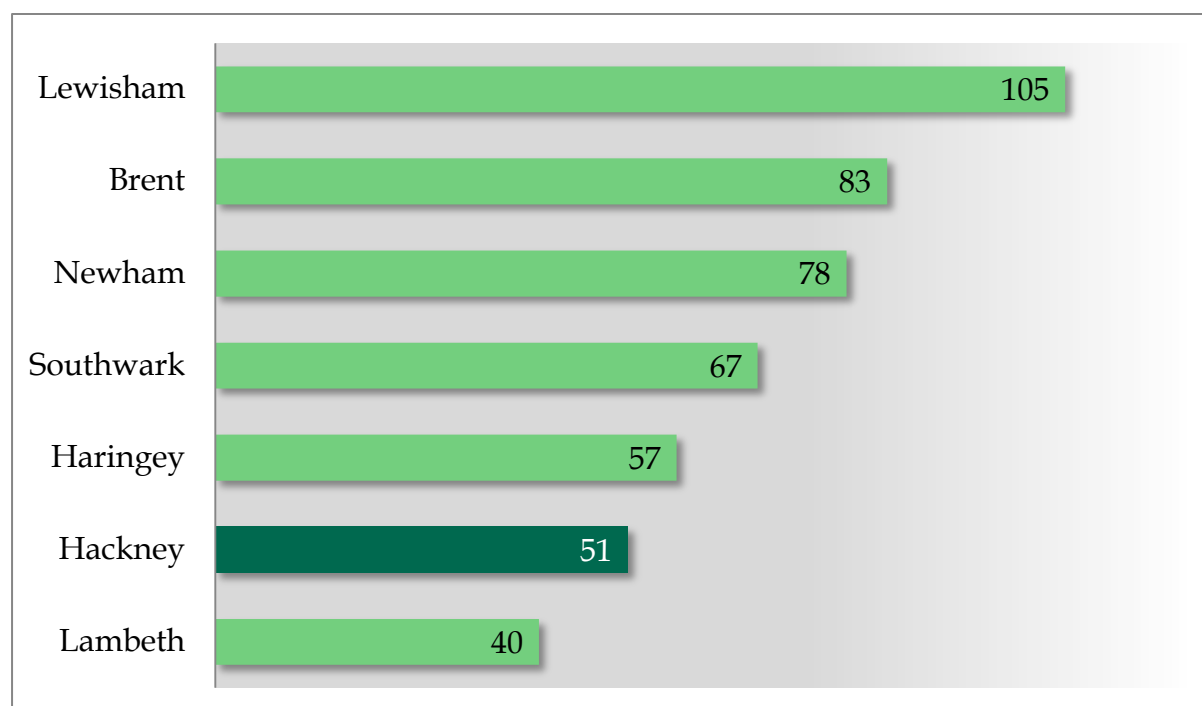
Medium=26-75 consultations

High=76+ consultations

Data for ONS comparator groups is available for 2012-13 and presented separately for City of London and Hackney in Figure 40 and Figure 41. As previously, City and Hackney data is reported for 2013-14, as disaggregated data is not available for 2012-13. Comparator data for 2013-14 is expected to be published by the Health and Social Care Information Centre (HSCIC) in November 2014 and will be included in the final PNA report, subject to availability within the timescale for publication. There is no trend data for NMS activity as it is a new service. It is therefore possible that our assessment of local provision of the service will change following publication of the 2013-14 data. This will be reflected in our response to the consultation comments.

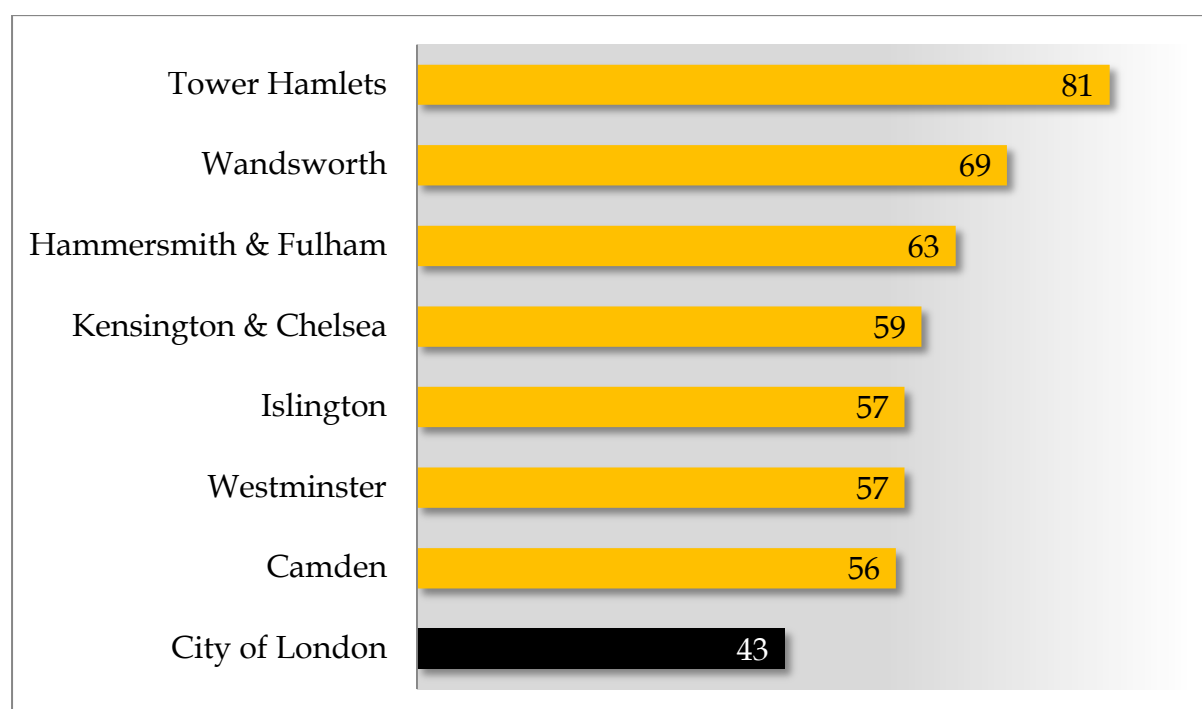
Both City of London and Hackney have relatively low average NMS activity per participating pharmacy, when compared to their peer groups.

Figure 40 **Average NMS per pharmacy, Hackney: comparison with ONS peer group 2012-13**



NB: Data for Hackney is for 2013-14.

Figure 41 **Average NMS per pharmacy, City of London: comparison with ONS peer group 2012-13**



NB: Data for City of London is for 2013-14.

5.2.3 Conclusions in relation to advanced services

The stated purpose of advanced services fits well with City and Hackney CCG's strategic aims, particularly improving outcomes for patients with long-term conditions. Early evidence suggests that NMS and MUR services can offer real benefits in terms of improved adherence, patient education and reduced waste (as described previously, the NMS service has recently been evaluated and showed very positive results).²⁰

While there was no local provision of AUR and SAC services in 2013-14, the majority of stoma and incontinence appliances are supplied by out-of-area dispensers and it is very likely that patients have access to these advanced services via specialist suppliers located elsewhere.

Hackney

We have concluded that the **MUR and NMS services are necessary to meet a current need** to support Hackney patients through education and counselling, and that this need is met by the existing network of pharmacy contractors.

Fifteen Hackney pharmacy contractors who responded to our survey expressed an intention to provide AUR services within the next 12 months; 12 said they intended to provide a SAC service within this timeframe. The need for AUR and SAC services should be kept under review.

City of London

Similarly, we have concluded that **MUR and NMS are necessary to meet a current need** to support City of London patients and that this need is met by the existing network of pharmacy contractors.

Two City pharmacy contractors who responded to our survey expressed an intention to provide a SAC service within the next 12 months; and two stated an intention to provide AUR services. The local need for AUR and SAC services should be kept under review.

5.3 Locally commissioned services

NHS England commissions the following two services from community pharmacists :

- Medicines optimisation support
- Minor Ailments Service (MAS)

These locally commissioned services in the City are primarily aimed at City residents, as they are funded by the CCG. A previous analysis showed that the majority of pharmacies in the City are not used by City residents, so only the two that do serve local residents (map reference 116 and 107) were offered the opportunity to sign up to locally commissioned service contracts.

NHS England also commissions community pharmacists to deliver seasonal flu immunisations. This service is offered to all pharmacies in both Hackney and the City of London.

²⁰ <http://www.nottingham.ac.uk/~pazmjb/nms/> (accessed 22.10.14)

5.3.1 Medicines optimisation service

This service is for patients of all ages who experience difficulties taking their medicines as prescribed and helps to improve compliance and reduce waste. The service aims to improve patient compliance by:

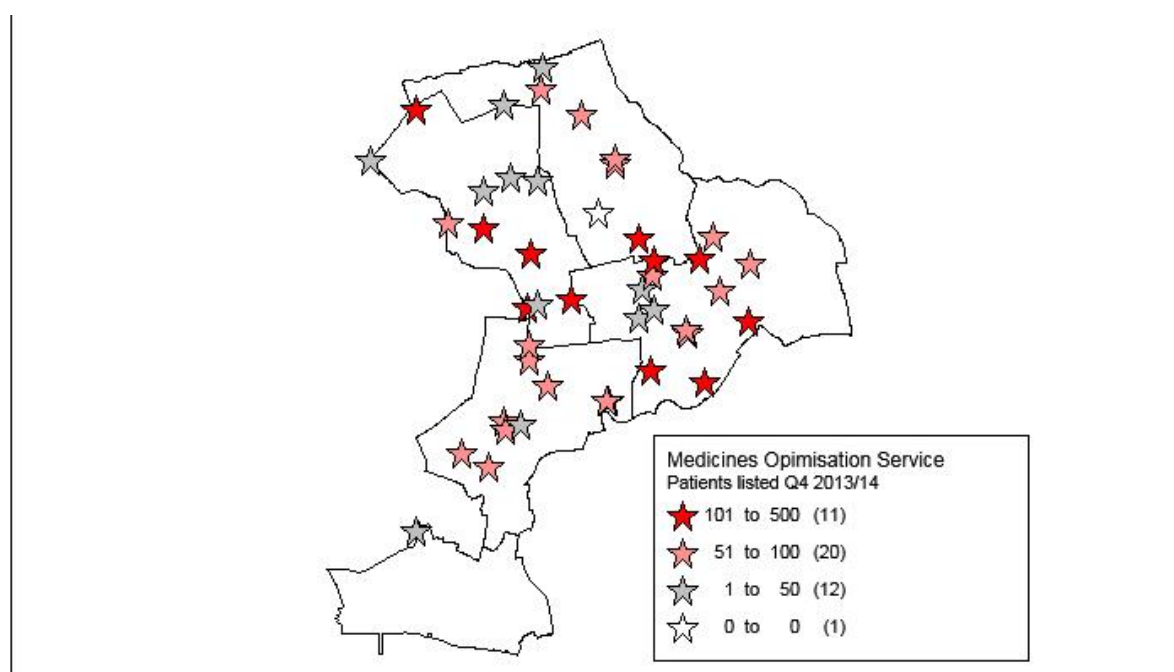
- improving their understanding of their medicines
- simplifying the medicines regimen and ordering process, where possible and appropriate
- identifying practical problems in taking their medicines and, where appropriate, providing compliance aids
- providing advice and support to the patient and/or carer, including referral to other health and social care professionals where appropriate.

The service aims to support independent living and assist patients for whom failure to comply with their prescribed medicines could have serious implications for their health. As such, it is expected that this service will be used most heavily by older, more vulnerable patients. It is intended that all patients receiving assistance through the service have their needs reviewed on a regular basis.

5.3.1.1 Current provision

Figure 42 shows the location of pharmacies providing medicines optimisation support across the City and Hackney localities.

Figure 42 **Geographical distribution of City and Hackney pharmacies providing medicines optimisation support Q4 2013-14**

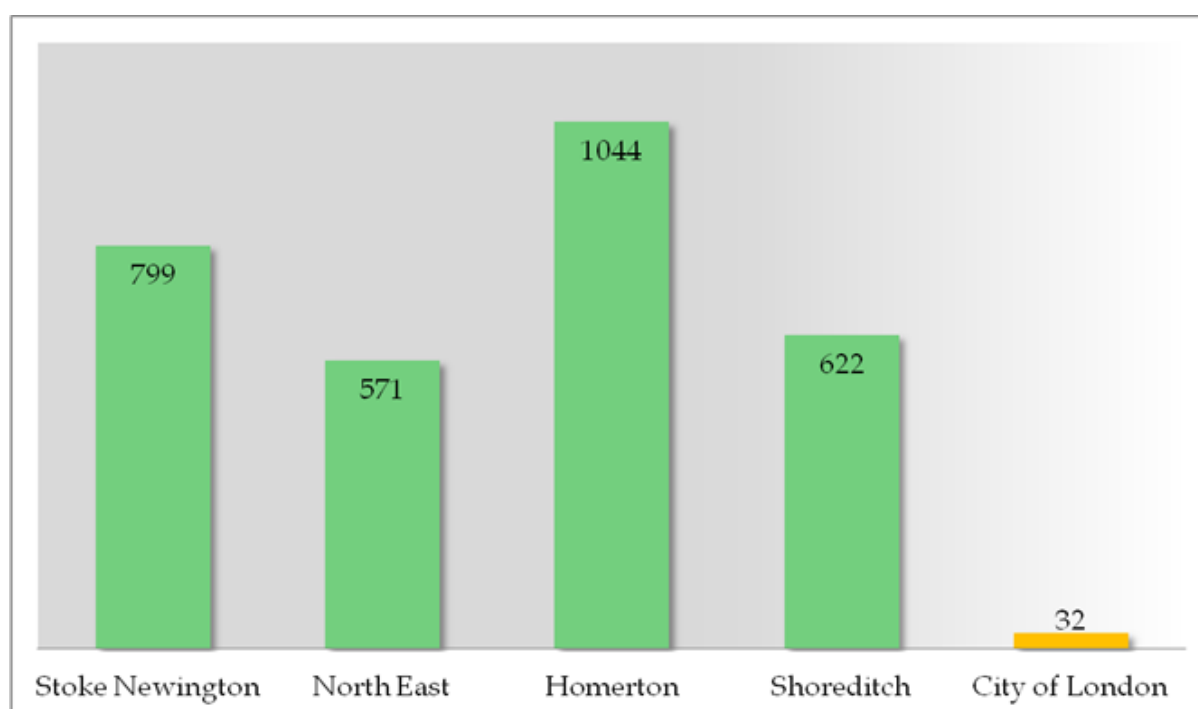


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Forty-three out of the 49 pharmacies in Hackney provided medicines optimisation support in the final quarter of 2013-14, one of which was inactive during this period. There is significant variation between localities in terms of access to the medicines optimisation service through pharmacies located within Hackney (Figure 43 and Table 32); numbers vary from 571 patients (or 8.3 per 1,000 resident population) in the North East to 1,044 (18.6 per 1,000 population) in Homerton locality in quarter 4 2013-14. These patterns do not appear to reflect different levels of need associated with the older age profile of the localities (around 3% of the population in all localities are aged 75+).

The City has an older population (6.5% of the resident population are aged 75+) and so it might be expected that the need for this service would be greater. However, only one of the two City pharmacies offered this contract provided this service in 2013-14, to 32 patients (or 4 per 1,000 resident population).

Figure 43 **Number of patients receiving medicines optimisation support through pharmacies located in City and Hackney Q4 2013-14²¹**



²¹Excludes one significant outlier in Stoke Newington locality

Table 32 Levels of medicines optimisation activity in pharmacies located in the City and Hackney Q4 2013-14

<i>Locality</i>	<i>No. pharmacies not commissioned to provide</i>	<i>Inactive</i>	<i>Low</i>	<i>Medium</i>	<i>High²²</i>	<i>Total commissioned to provide</i>
Stoke Newington	3	0	5	2	4	12
North East	2	1	2	4	2	9
Homerton	1	0	3	6	4	13
Shoreditch	0	0	1	8	0	9
City of London	15	0	1	0	0	1

Key: Inactive=signed up, but no activity recorded
Low=1-50 patients
Medium=51-100 patients
High=101+ patients

5.3.1.2 Patient and public views

Sixteen per cent of Hackney respondents to the survey and 15%) of City respondents said they have received pharmacy support to take their medicines and live an independent life. A further 19% of respondents who live or work in Hackney and 18% of City respondents said they would like to use this service in the future.

5.3.2 Minor Ailments Service (MAS)

The MAS is commissioned to improve access and choice for people with minor ailments, by promoting self-care (including advice and, where appropriate, medicines and/or appliances without the need to visit a GP), operating a referral system from local primary care providers and supplying appropriate medicines at NHS expense. If the patient is exempt from prescription charges, then the treatment is free of charge. The service also aims to increase primary care capacity by reducing GP practice workload relating to minor ailments. As such, the MAS contributes to local efforts to improve access and choice in primary care by providing an alternative consultation with a GP.

Minor ailments schemes are used most commonly by families with children. Hackney in particular has a very young population and is home to a significant number of families with young children (section 4.1.2).

5.3.2.1 Other provision

Patients with a minor illness can choose to attend their GP for an appointment; some practices run nurse-led minor illness clinics for patients with self-limiting illness or minor injury.

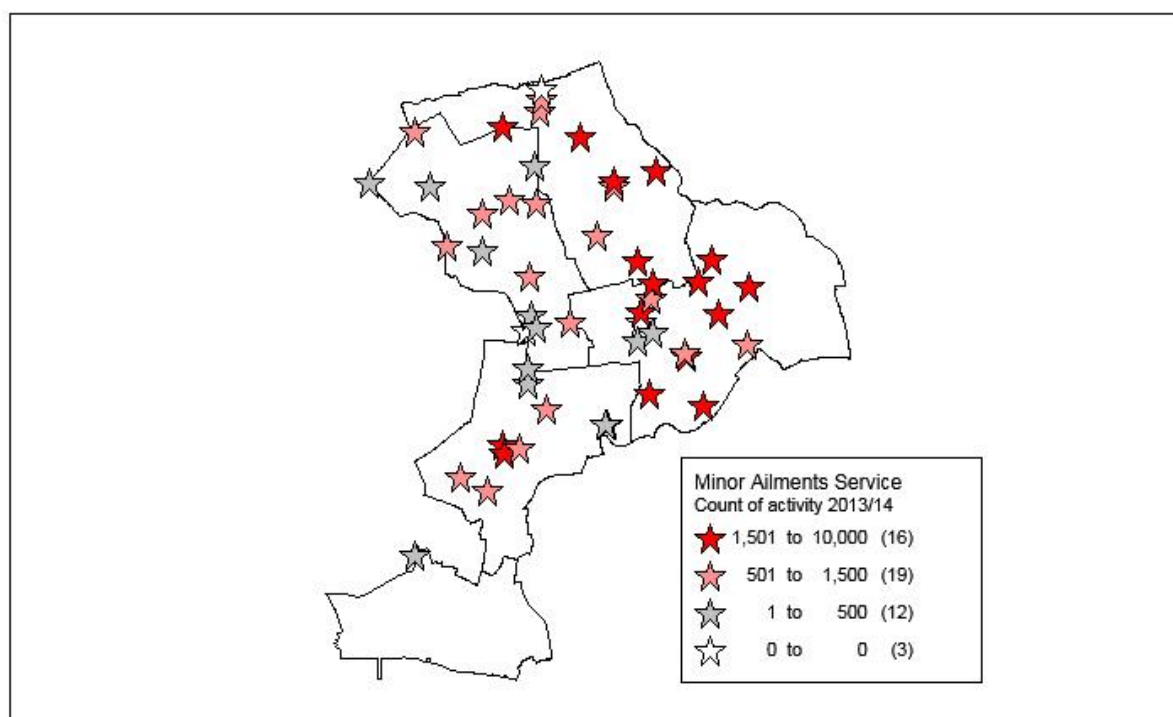
²² Excludes one significant outlier in Stoke Newington locality

Some patients may choose to buy an over-the-counter treatment for their minor illness from the pharmacy. However, the MAS is aimed at patients who do not pay prescription charges and who may not choose, or be able to afford, to buy over-the-counter treatment.

5.3.2.2 *Current provision*

The geographical distribution of pharmacies in the City of London and Hackney providing this service is shown in Figure 44.

Figure 44 **Geographical distribution of City and Hackney pharmacies providing MAS, 2013-14**



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Forty-four (out of 49) Hackney pharmacies provide this service. Once again there is significant variation between localities in terms of levels of activity (Figure 45 and Table 33). Figure 45 shows that in Homerton and the North East localities, there were over 22,000 MAS consultations in 2013-14 (354 and 329 per 1,000 resident population, respectively), while in Shoreditch and Stoke Newington the numbers were much lower (144 and 112 per 1,000 population). Homerton and the North East do contain the largest populations of children and young people (25% and 31% of the population, respectively, are aged 19 or under), however Shoreditch and Stoke Newington also contain significant younger populations (19% and 22%, respectively).

Just one of the two City pharmacies offered this contract provided this service in 2013-14, delivering a total of 12 MAS consultations (or 1.5 per 1,000 resident population).

Figure 45 Number of MAS consultations in City and Hackney pharmacies, 2013-14



Table 33 Levels of MAS activity in pharmacies located in the City and Hackney 2013-14

<i>Locality</i>	<i>No. pharmacies not commissioned to provide</i>	<i>Inactive</i>	<i>Low</i>	<i>Medium</i>	<i>High</i>	<i>Total commissioned to provide</i>
Stoke Newington	3	0	7	7	0	12
North East	1	0	0	4	6	10
Homerton	1	0	2	3	8	13
Shoreditch	0					9
City of London	15	0	1	0	0	1

Key: Inactive=signed up, but no activity recorded
 Low=1-500 consultations
 Medium=501-1,500 consultations
 High=1,501+ consultations

5.3.2.3 Patient and public views

Just over half (53%) of Hackney respondents and a similar proportion (56%) of City respondents to the survey say they have either used, or would like to use, this service. Responses were broadly consistent across all Hackney localities. This indicates a high level of local demand for the pharmacy MAS. Feedback from the Hackney Refugee Forum representative also indicated a need for this service among low income migrant communities.

5.3.3 Seasonal flu vaccination service

The aim of this service is to reduce serious morbidity and mortality from influenza. The service improves access to flu immunisation for residents aged 65 and over, as well as younger residents who are in a clinical risk group (including those with chronic respiratory, heart or kidney disease or neurological conditions; diabetic patients; and people who are immunosuppressed). Other eligible groups include pregnant women, carers, front-line health and care staff and two/three/four year-old children.

5.3.3.1 Other provision

Seasonal flu vaccination is available from all GP practices. Patients may also choose to use a private provider, which may include some pharmacy contractors.

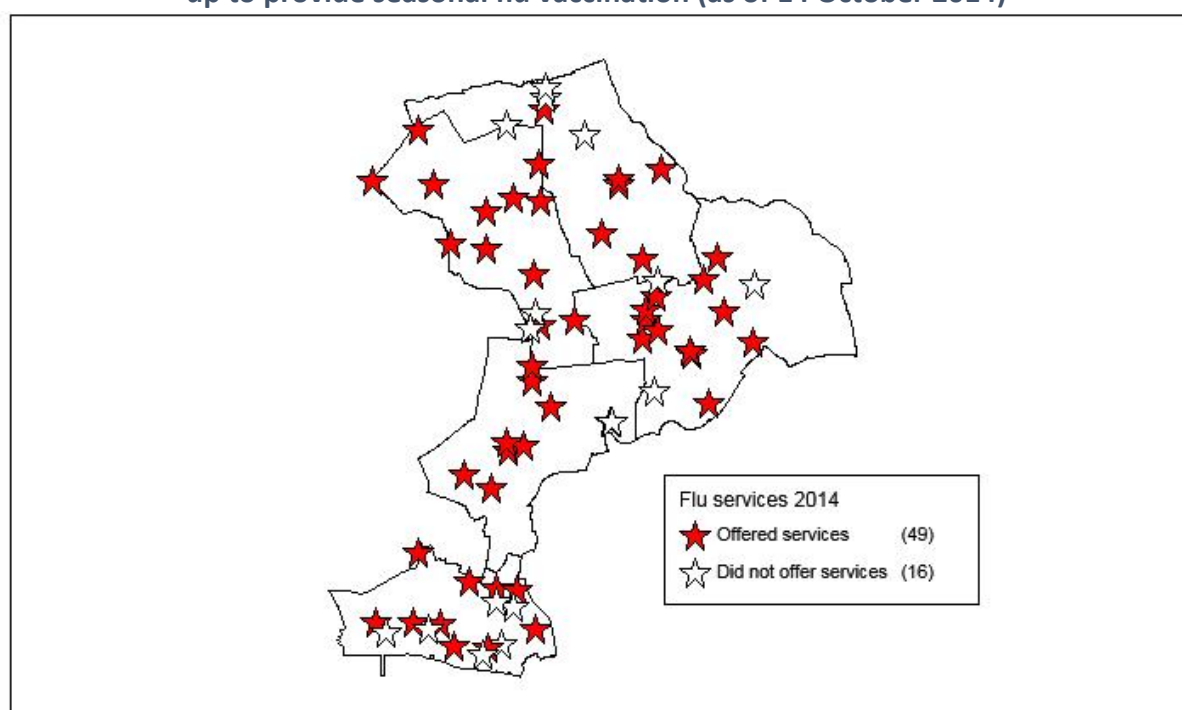
5.3.3.2 Current provision

The geographical distribution of pharmacies in the City of London and Hackney signed up to provide this service in 2014 is shown in Figure 46. Table 34 provides a breakdown by locality as well as comparative data for 2013-14.

Thirty-nine (out of 49) Hackney pharmacies have signed up to provide the flu vaccination service in 2014-15 and there is generally good access across all localities.

In the City, 10 pharmacies are signed up to provide this service.

Figure 46 **Geographical distribution of City and Hackney pharmacies currently signed up to provide seasonal flu vaccination (as of 14 October 2014)**



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Table 34 Pharmacies providing seasonal flu vaccination by locality, 2013 and 2014 comparison

Locality	Signed up 2014-15	Signed up 2013-14
Stoke Newington	13	12
North East	6	7
Homerton	12	10
Shoreditch	8	7
City of London	10	10

5.3.3.3 Patient and public views

Around half (49%) of Hackney respondents and 43% of City respondents to the patient/public survey say they have either used, or would like to use, this service. There is high level of demand across all Hackney localities.

5.3.4 Conclusions in relation to locally commissioned services

The MAS makes good use of pharmacies as an accessible and flexible resource to improve access and choice in primary care. The medicines optimisation service has significant potential to benefit the local population, by supporting people who may otherwise not be able to manage their medicines properly to stay healthy and independent in their own home. Supporting independent living fits well with the priorities of the CCG, LB Hackney and City of London Corporation.

The seasonal flu vaccination service has helped to improve access for vulnerable and hard-to-reach groups. Pharmacies are now an accepted provider of this service to patients.

Hackney

We consider that both **the MAS and medicines optimisation service are necessary to meet a current need** in Hackney. **The seasonal flu immunisation service helps to secure better access** to this service for our eligible population. We have concluded that access to all of these services is good and **current need is met by the current network of pharmacy contractors**.

All pharmacies should be encouraged to optimise uptake of these services amongst their eligible customers.

We recommend that local partners explore further opportunities for using community pharmacies to identify, and support the management of, patients with long-term conditions.

City of London

We consider that both the MAS and medicines optimisation service are **necessary to meet a current need** in the City. **The seasonal flu immunisation service helps to secure better access** to this service for our eligible population. We have concluded that **current need for these services is met by the current network of pharmacy contractors**.

The City has a comparatively small child population, which may affect assessments of need for the MAS. However, the City hosts a comparatively large older resident population, which may indicate a sizeable unmet need for medicines optimisation support among City residents. But, while there is potential scope to improve access to medicines optimisation support in the east of the City, many of these residents are registered with a Tower Hamlets GP and are likely to have their pharmaceutical needs met by pharmacies over the border. In this context, it is worth noting again that the majority of prescriptions issued by City GPs are also dispensed out of area.

Current services are targeted primarily at residents, as they are funded by the CCG, and there may be unmet need for locally commissioned services among non-resident City workers. However, provision of such services could have significant funding implications for the CCG.

Appropriate opportunities to increase the availability of locally commissioned services, to the resident and non-resident City populations, should be explored between NHS England and local health and wellbeing partners. Funding to widen access to the significant non-residential, daytime population will require a regional or national response.

We also recommend that local partners explore further opportunities for using community pharmacies to identify, and support the management of, patients with long-term conditions.

5.4 Summary of our assessment of pharmaceutical services

For the purpose of clarity, we have set out in this section a summary of our assessment of current provision of pharmaceutical services in Hackney and in the City, in response to the five statements set out in schedule 1 of the regulations.

5.4.1 Summary of our assessment of pharmaceutical services: Hackney

Schedule 1, para 1: necessary services – current provision

- We have concluded that essential services, advanced services and locally commissioned services are all necessary to meet a current pharmaceutical need in Hackney.
- Section 5.1.1 describes the current provision of pharmaceutical services in Hackney and section 0 presents the geographical distribution of all community pharmacies.
- There are 49 pharmacy contractors in Hackney. There are no distance-selling pharmacies, dispensing appliance contractors or dispensing doctors located within the borough.
- Hackney registered patients also make use of out-of-area pharmacies, for their dispensing needs at least (13% of prescriptions are dispensed elsewhere).

Schedule 1, para. 2: necessary services – gaps in provision

- We have concluded that Hackney residents in all four localities have access to a comprehensive network of pharmacy contractors, and that this network is sufficient to meet the current need for pharmaceutical services (including essential, advanced and locally commissioned services) and to meet the needs of our population over the period covered by this PNA (up to 2018).
- There were no responses to the patient/public survey to suggest that the needs of any specific communities are currently not being met, however services must continue to be sensitive to the needs of the diverse ethnic and religious communities within Hackney.
- The pattern of opening hours reflects the expressed demand of patients and the public. The recent and impending termination of two extended hours LPS contracts, due to lack of demand, suggests that there is no need for formal arrangements to secure out-of-hours opening, but we recommend that NHS England keeps this under review.
- There are no DACs in Hackney, nor do any pharmacies provide AUR or SAC services. However, our analysis of dispensing data has revealed that the majority of stoma and incontinence appliances are supplied by out-of-area specialist providers, who will very likely offer AUR and SAC services to their patients. A number of pharmacy contractors have expressed an intention to provide these services within the next 12 months.
- There is considerable scope to extend access to repeat dispensing services to the benefit of patients. This represents an opportunity for GPs (who must initiate

repeat dispensing) and pharmacies to work together to bring the benefits of this service to patients. We recommend that NHS England support the adoption and roll out of repeat dispensing by GP practices.

Schedule 1, para. 3: other relevant services – current provision

- We have concluded that the seasonal flu immunisation service secures better access for our population.
- All other pharmaceutical services described in this report have been assessed as necessary for the provision of adequate services to the population of Hackney.

Schedule 1, para. 4: improvements and better access – gaps in provision

- We have considered population trends, as well as planned housing and related developments, over the period covered by the PNA (section 4.1.3) and how these may impact on the need to secure future improvements or better access to pharmaceutical services.
- We have not identified any need for pharmaceutical services to secure future improvements or better access over the period covered by this PNA.
- The lower than average level of dispensing suggests that there is capacity within the system should such a need arise (this assessment will be reviewed in the post consultation report, once 2013-14 benchmarking data has been published).

Schedule 1, para. 5: other services

- Other provision of related services by NHS providers has been considered in our assessment. We have concluded that this provision does not impact on current or potential need for pharmaceutical services.
- There are no plans for the acute trust located in Hackney (Homerton hospital) to make an application to provide NHS pharmaceutical services.
- There are no plans to expand the number of GP practices or NHS dentists in Hackney.

5.4.2 Summary of our assessment of pharmaceutical services: City of London

Schedule 1, para. 1: necessary services – current provision

- We have concluded that essential services, advanced services and locally commissioned services are all necessary to meet a current pharmaceutical need in the City of London.
- Section 5.1.1 describes the current provision of pharmaceutical services in the City and section 0 presents the geographical distribution of all community pharmacies.
- There are 16 pharmacy contractors in the City. There are no distance-selling pharmacies, dispensing appliance contractors or dispensing doctors located within the borough.
- City registered patients also make heavy use of out-of-area pharmacies, for their dispensing needs (at least 61% of prescriptions are dispensed elsewhere).
- A significant number of City residents, in particular those living in the east, are registered with GPs across the border (in Tower Hamlets) and it is reasonable to expect that some of their pharmaceutical needs will be met by pharmacies that serve these GP practices.

Schedule 1, para. 2 : necessary services – gaps in provision

- We have concluded that City residents have access to a comprehensive network of pharmacy contractors, and that this network is sufficient to meet the current need for pharmaceutical services (including essential, advanced and locally commissioned services) and to meet the needs of our population over the period covered by this PNA (up to 2018).
- There were no responses to the patient/public survey to suggest that the needs of any specific communities are currently not being met.
- The pattern of opening hours reflects the expressed demand of the resident and workday population.
- There are no DACs in the City, nor do any pharmacies provide AUR or SAC services. However, our analysis of dispensing data has revealed that the majority of stoma and incontinence appliances are supplied by out-of-area specialist providers, who will very likely offer AUR and SAC services to their patients. Two pharmacy contractors have expressed an intention to provide each of these services within the next 12 months.
- There may also be scope to improve access to locally commissioned services for the resident population in the east of the City, but consideration should be given to the extent to which these needs are currently being met by out-of-area pharmacies.
- Locally commissioned services are deliberately offered only to pharmacies serving the two main residential populations in the north and east of the City. Both of these areas are in very close proximity to neighbouring boroughs

(Islington in the north and Tower Hamlets in the east) and there is evidence of significant cross-border dispensing which reflects this, as described above. On this basis, we have concluded that the pharmaceutical needs of the residential population are well served, both by City and out-of-area pharmacies.

- There is considerable scope to extend access to repeat dispensing services to the benefit of patients. This represents an opportunity for GPs (who must initiate repeat dispensing) and pharmacies to work together to bring the benefits of this service to patients. We recommend that NHS England support the adoption and roll out of repeat dispensing by GP practices.

Schedule 1, para. 3: other relevant services – current provision

- We have concluded that the seasonal flu immunisation service secures better access for our population.
- All other pharmaceutical services described in this report have been assessed as necessary for the provision of adequate services to the population of the City of London.

Schedule 1, para. 4: improvements and better access – gaps in provision

- We have considered population trends, as well as planned housing and related developments, over the period covered by the PNA (section 4.1.3) and how these may impact on the need to secure future improvements or better access to pharmaceutical services.
- We have not identified any need for pharmaceutical services to secure future improvements or better access over the period covered by this PNA.
- The lower than average level of dispensing suggests that there is capacity within the system should such a need arise (this assessment will be reviewed in the post consultation report, once 2013-14 benchmarking data has been published).

Schedule 1, para. 5: other services

- Other provision of related services by NHS providers has been considered in our assessment. We have concluded that this provision does not impact on current or potential need for pharmaceutical services.
- There are no plans for the acute trust located in the City (Bart's hospital) to make an application to provide NHS pharmaceutical services.
- There are no plans to expand the number of GP practices or NHS dentists. Plans have been approved by NHS England to enable non-residents (including the commuter population) to register with out-of-area GPs, which could have significant implications for the City; the anticipated implementation date for this scheme is January 2015. This development will have an unknown impact on future need for pharmaceutical services.

6 Description and assessment of current public health service provision

As described in section 2.2, our PNA includes an assessment of public health services commissioned from pharmacies by LB Hackney and City of London Corporation. In assessing these public health services, we have adopted a structure and approach that is similar to the method used for pharmaceutical services. This includes setting out where we believe there are current and future gaps and identifying areas for improvement. We have also found it helpful to consider whether or not a public health service is necessary to meet a need, or if we believe the service is relevant in that it delivers improvements in access or choice.

There is considerable scope for community pharmacy to support delivery of local public health services, as demonstrated by the Healthy Living Pharmacy pathfinder programme.²³ In recognition of this, London Borough of Hackney and the City of London Corporation commission a wide range of public health services from local community pharmacies. Most services in the City are commissioned by London Borough of Hackney on behalf of the City; the Corporation directly commissions stop smoking services. The needle exchange service in City and Hackney is commissioned via the community drug service, the Lifeline Project (Table 35), as part of an integrated recovery-based service.

Commissioning is generally undertaken to meet local needs. Many of the pharmacies in the City of London do not serve a residential population and so the need for these pharmacies to provide some of these services is limited. The resident population is concentrated in the north and the east of the City (see section 4.1.1). Apart from the stop smoking service, public health services are only commissioned from the two pharmacies located near these residential communities (the exception to this rule is the needle exchange service – see section 6.7).

²³ <http://www.npa.co.uk/Business-Management/Service-Development-Opportunities/Healthy-Living-Pharmacy/>

Table 35 Public health services provided by community pharmacies in City of London and Hackney

Service	Commissioned by
Stop smoking service	London Borough of Hackney City of London Corporation ^a
Weight management service	London Borough of Hackney
Healthy Start vitamins	London Borough of Hackney
Sexual health service	London Borough of Hackney
– EHC	
– Condom distribution	
– Chlamydia screening & treatment	
Supervision of TB treatment (TB DOTS)	London Borough of Hackney
Supervised consumption service	London Borough of Hackney
Hepatitis B, C and HIV dried blood spot testing	London Borough of Hackney
Needle exchange ^b	London Borough of Hackney City of London Corporation

^a The Corporation directly commissions all pharmacies based in the City of London except for the two nearest the larger residential populations (map reference 107 and map reference 116), both of which are commissioned by London Borough of Hackney

^b Commissioned via Lifeline, the community drug service

6.1 Stop smoking service

Pharmacies are an important part of the local network of providers of stop smoking services due their accessibility, opening hours and ability to advise and supply NRT and Champix (via a PGD), as well as providing behavioural support to quit.

The stop smoking service directly addresses a key strategic priority for both the City and Hackney, where high rates of smoking prevalence are observed (see section 4.2.4). Smoking is the most significant preventative cause of premature death and reducing smoking prevalence is one of most effective public health interventions.

6.1.1 Other provision

A comprehensive stop smoking service is commissioned in both the City and in Hackney, enabling those who want to quit to access the service in a number of different ways. In addition to community pharmacies, there are a range of other community drop-in and specialist services, as well as a new GP service that will be operating out of eight ‘hubs’ in Hackney from late 2014.

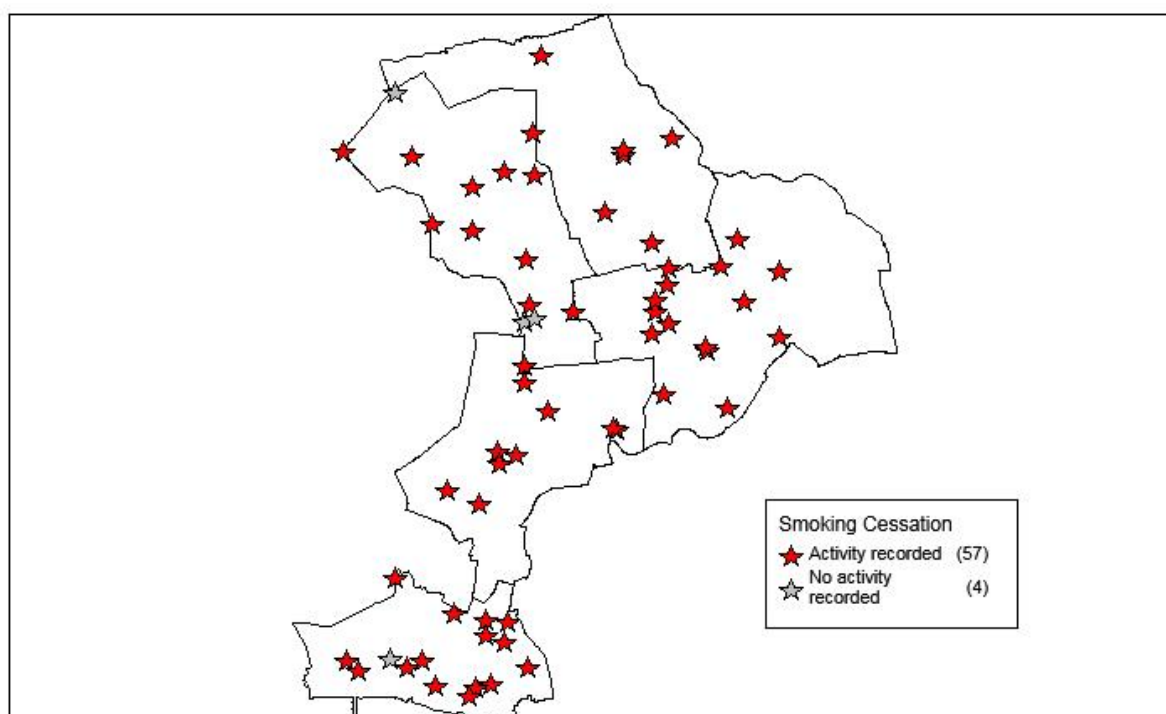
6.1.2 Current provision

The geographical distribution of pharmacies providing stop smoking services is shown in Figure 47. There is good access to this service within the City and the four Hackney localities.

Forty-five (out of 49) pharmacies located in Hackney are signed up to provide stop smoking services. In the first two quarters of 2014-15 (April to September 2014), all but three of these pharmacies were 'active', i.e. they had reported some level of activity in terms of clients supported to quit (Table 36). A further two pharmacies are willing to provide this service.

In the City, all sixteen pharmacies are signed up to deliver stop smoking services. All but one were active between April and September 2014.

Figure 47 **Geographical distribution of pharmacies providing stop smoking service in City and Hackney (April to September 2014)**



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Table 36 Pharmacies currently providing stop smoking service in City and Hackney

Locality	Number signed up to provide	Number 'active'	Number that would like to provide (WTP)
Stoke Newington	15	12	1
North East	7	7	1
Homerton	14	14	0
Shoreditch	9	9	0
City of London	16	15	--

6.1.3 Access to services

In order to assess current services, we have also considered access to pharmacies signed up to provide the stop smoking service in neighbouring localities (Table 37). From this analysis, we have concluded that there is good access to stop smoking services from all localities in both the City and in Hackney.

Table 37 Pharmacy stop smoking services accessible to localities

Locality	Number signed up in locality	Number signed up in close proximity to ^a locality	Total number of accessible pharmacies signed up to provide
Stoke Newington	15	2	17
North East	7	8	15
Homerton	14	5	19
Shoreditch	9	10	19
City of London	16	NA ^b	16

^a Pharmacies within 0.25 miles of each locality (*within* City and Hackney borders)

^b There are no pharmacies in Hackney within 0.25 miles of the City border

6.1.4 Patient views

Sixteen per cent of Hackney survey respondents and 13% of City respondents said that they would like to access pharmacy stop smoking support in future. Thirteen per cent and 8% report already having used in this service in Hackney and the City, respectively. A higher than average proportion of Homerton locality residents who responded to the survey (52%) said they have already accessed smoking services through their pharmacy.

Conclusions in relation to stop smoking service – Hackney

The community pharmacy stop smoking service is an important strand of the council's efforts to reduce smoking prevalence in the resident population. With their ability to supply treatment (NRT and Champix) at point of care as well as behavioural support to quit, pharmacists are a unique provider in the borough.

We have concluded that:

- **this service is necessary to meet a current need** for smoking cessation support in Hackney
- **there are no current gaps** in pharmacy provision, but all pharmacies should be encouraged to promote the service to encourage uptake.

Conclusions in relation to stop smoking service – City of London

The community pharmacy stop smoking service is an important strand of the Corporation's efforts to reduce smoking prevalence in the resident and workday population. With their ability to supply treatment (NRT and Champix) at point of care as well as behavioural support to quit, pharmacists are a unique provider in the area.

We have concluded that:

- **this service is necessary to meet a current need** for smoking cessation support in the City
- **there are no current gaps** in pharmacy provision.

6.2 Weight management service

London Borough of Hackney commissions a patient-centred pharmacy weight management service to improve the health and quality of life of adults who are obese (based on Body Mass Index measurement). The service provides behavioural support as well as interventions to increase physical activity and improve diet and nutrition. Where needed, pharmacological support is also provided through the supply of Orlistat (via a PGD).

The highest rates of obesity in adults across City and Hackney are found in the east and the north east of Hackney. Obesity is much less prevalent in the City than in any of the Hackney localities (see section 4.2.8).

6.2.1 Other provision

A local strategy for addressing overweight and obesity in the City and Hackney has been in place since 2009. This led to the development of obesity pathways for children and adults, and a range of services have been commissioned to support local residents to achieve and maintain a healthy weight (including dietetic support and exercise on referral for adults).

Both the Corporation of London and London Borough of Hackney are undertaking reviews of their local obesity pathways, the outcome of which will inform the future commissioning of all local healthy weight services.

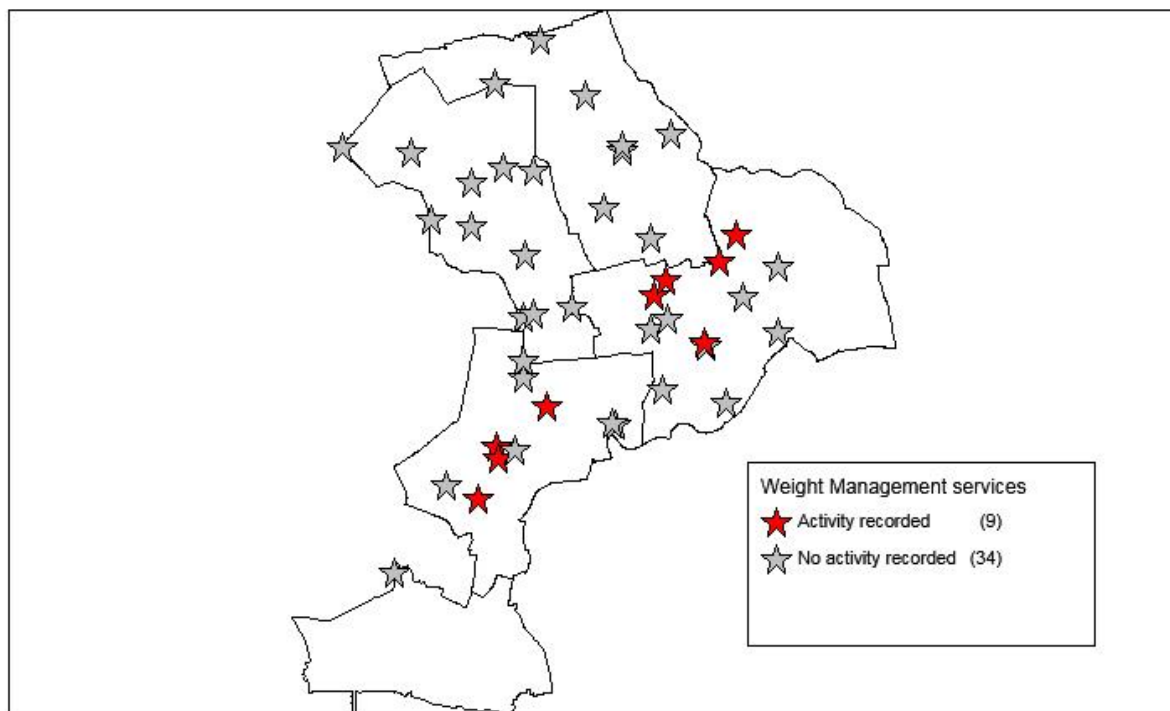
6.2.2 Current provision

The geographical distribution of pharmacies providing the weight management service is shown in Figure 48.

Forty-two (out of 49) pharmacies located in Hackney are currently signed up to provide this service. In the first two quarters of 2014-15, just nine of these pharmacies were 'active' (i.e. they had reported some level of activity in terms of clients supported), in Shoreditch and Homerton locality (Table 38). A further six pharmacies are willing to provide this service.

In the City, one pharmacy in the north (map ref 116) is signed up to deliver the weight management service. However, no activity is recorded under this contract between April and September 2014. A further 11 pharmacies are willing to provide this service.

Figure 48 **Geographical distribution of pharmacies providing weight management service in City and Hackney (April to September 2014)**



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Table 38 Pharmacies currently providing weight management service in City and Hackney

Locality	Number signed up to provide	Number 'active'	WTP
Stoke Newington	12	0	3
North East	8	0	2
Homerton	13	5	1
Shoreditch	9	4	0
City of London	1	0	11

6.2.3 Access to services

We have also considered access to pharmacies signed up to provide the weight management service in neighbouring localities (Table 39). From this analysis, we have concluded that there is good access to the service from all localities in Hackney. However, access is limited to one pharmacy in the City.

Table 39 Pharmacy weight management services accessible to localities

Locality	Number signed up in locality	Number signed up in close proximity to ^a locality	Total number of accessible pharmacies signed up to provide
Stoke Newington	12	2	14
North East	8	6	14
Homerton	13	4	17
Shoreditch	9	5	14
City of London	1	NA ^b	1

^a Pharmacies within 0.25 miles of each locality (*within* City and Hackney borders)

^b There are no pharmacies in Hackney within 0.25 miles of the City border

6.2.4 Patient views

Around one quarter of survey respondents in Hackney (24%) and over a third in the City (34%) have discussed healthy eating or weight issues with a pharmacist.

Almost one third (30%) of Hackney respondents and almost one quarter (22%) of City respondents said that they would like to access weight management support through their pharmacy in future. Just over one in ten respondents across both areas report already

having used in this service. Expressed demand for this service is especially strong in Shoreditch (almost half of residents responding expressed an interest in this service), but less so among residents of Stoke Newington or North East localities (where just over one third said they have or would like to access this service).

Conclusions in relation to weight management service - Hackney

- We have concluded that this service has **potential to secure better access** to weight management services in Hackney. However, **current need is not being met consistently** across the borough, in particular in the north east of the borough, where adult obesity is particularly prevalent.
- Future service commissioning should be aligned with the new adult obesity pathway, which will be implemented during 2015.

Conclusions in relation to weight management service – City of London

- We have concluded that this service has **potential to secure better access** to weight management services in the City.
- We recommend that consideration be given to extending the coverage of the service to a larger number of pharmacies to meet the needs of low paid, potentially high risk City workers. However, the cost of such an expansion could not be met out of the current public health grant.
- Future commissioning of pharmacy weight management services in the City should be aligned with the new integrated adult obesity service that is scheduled to be commissioned in 2015-16.

6.3 Healthy Start vitamins

London Borough of Hackney commissions local pharmacies to supply free Healthy Start vitamins to vulnerable women and children, as well as advice on broad public health issues such as early booking, immunisations, breastfeeding, diet and exercise. The service is part of the local 'Healthy Start for All' scheme, which builds on the national means-tested scheme that offers free vitamin drops (for children), vitamin tablets (for women) and food vouchers for families in receipt of some benefits.

Through pharmacies, Healthy Start vitamins are provided free to all women who are pregnant or have a child up to the age of one, and to all children from birth to their fourth birthday if breastfed or from six months to their fourth birthday if formula fed. Due to locally high levels of relative deprivation, Healthy Start vitamins are available to *all* eligible women and children living locally.

The service is promoted through NHS and local authority services, children's centres and other places used by families with young children.

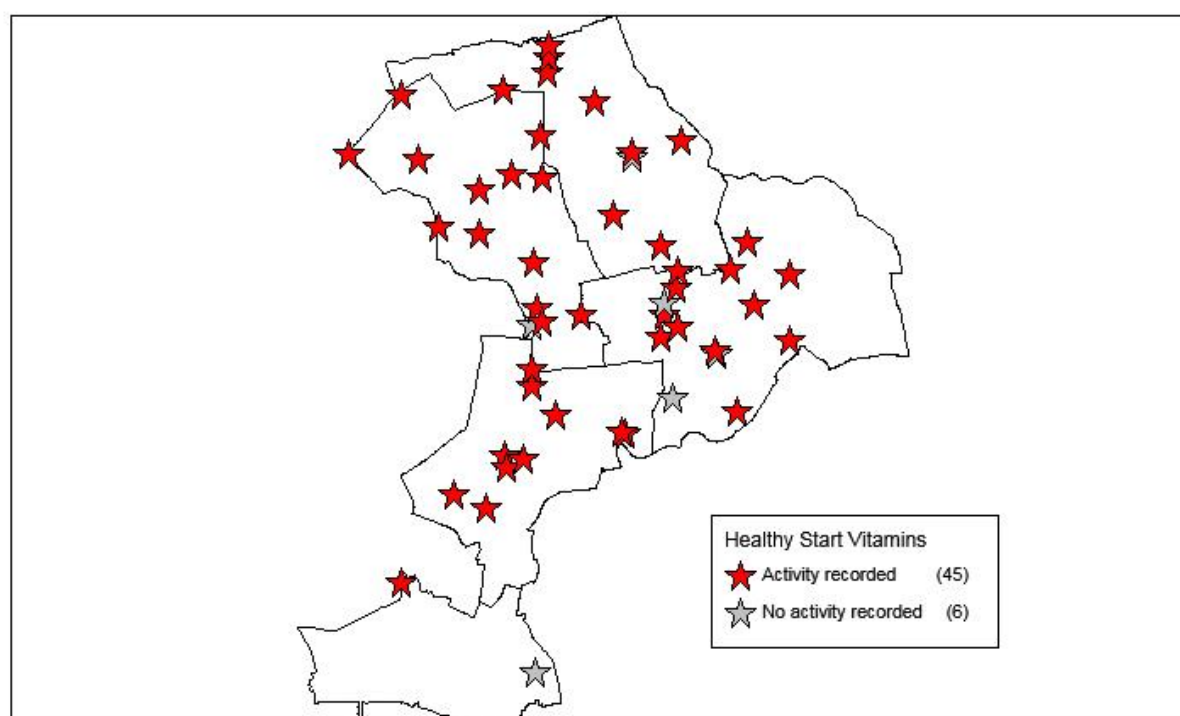
6.3.1 Current provision

The geographical distribution of pharmacies supplying Healthy Start vitamins is shown in Figure 49.

The service is currently provided by all 49 pharmacies located in Hackney. In the first two quarters of 2014-15, 44 of these pharmacies were 'active', i.e. they had reported some level of activity in terms of supplying vitamins to eligible families (Table 40).

The two pharmacies located near the residential population areas of the City (in the north and east) are both signed up to deliver this service, but only one of these supplied any Healthy Start vitamins in the first half of 2014-15.

Figure 49 **Geographical distribution of pharmacies signed supplying Healthy Start vitamins in City and Hackney (April to September 2014)**



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Table 40 Pharmacies currently supplying Healthy Start vitamins in City and Hackney

Locality	Number signed up to provide	Number 'active'
Stoke Newington	15	14
North East	11	10
Homerton	14	11
Shoreditch	9	9
City of London	2	1

6.3.2 Access to services

We have also considered access to pharmacies signed up to supply Healthy Start vitamins in neighbouring localities (Table 41). From this analysis, we have concluded that there is good access to the service from all localities in Hackney, and the two main residential areas of the City.

Table 41 Pharmacy Healthy Start vitamins service accessible to localities

Locality	Number signed up in locality	Number signed up in close proximity to ^a locality	Total number of accessible pharmacies signed up to provide
Stoke Newington	15	4	19
North East	11	8	19
Homerton	14	5	19
Shoreditch	9	6	15
City of London	2	NA ^b	2

^a Pharmacies within 0.25 miles of each locality (*within* City and Hackney borders)

^b There are no pharmacies in Hackney within 0.25 miles of the City border

Conclusions in relation to Healthy Start vitamins - Hackney

We have concluded that this service is **necessary to meet a current need** in Hackney.

There is **good access to the service** across the borough, but all pharmacies should be encouraged to promote the service widely to encourage take up among all eligible families.

Conclusions in relation to Healthy Start vitamins – City of London

We have concluded that this service is **necessary to meet a current need** in the City.

There is **good access to the service** in the areas populated by the largest resident communities. However, the City pharmacy located nearest to the resident population in the east of the borough should be encouraged to actively promote the service to ensure that services are provided to all eligible families housed here.

6.4 Sexual health service

Rates of sexually transmitted infections and HIV remain high across Hackney (see sections 0 and 4.2.7). London Borough of Hackney commissions community pharmacies to provide a range of services to improve the sexual and reproductive health and wellbeing of the local population, with a particular emphasis on young people. Hackney, in particular, has a relatively young population and it is primarily their sexual health needs that are targeted by this service.

There are four elements to the service, namely:

- condom distribution – London C-Card registration service and supply of condoms through this service to sexually active young people (aged under 25 years)
- supply of *Chlamydia* and *gonorrhoea* testing kits for sexually active young people (aged 15 to 24) as part of the national *Chlamydia* screening programme
- *Chlamydia* treatment through the supply of antibiotics (via a PGD), supporting the local *Chlamydia* screening service
- supply of EHC, via a PGD, for women of all ages.

There is good evidence that pharmacies are an effective, acceptable and accessible outlet for sexual health services. The service has made an important contribution to local efforts to reduce rates of teenage conception in Hackney through the supply of condoms and EHC (section 4.2.9).

6.4.1 Other provision

The C-Card scheme ('Come Correct') operates from a number of 'easy access points' (or EAPs) across the City and Hackney. In addition to pharmacies, there are 40 other EAP sites including colleges, clinics and youth centres.

Chlamydia screening is available throughout City and Hackney, including young people's clinics (situated in Homerton and Shoreditch localities), youth clubs, some schools and

colleges, GP practices and sexual health clinics (situated in Homerton and Shoreditch localities and in the City), and all other C-Card EAPs. Young people can also request a testing kit via the 'Checkurself' website.²⁴

In addition to pharmacies and GP practices (where EHC can be obtained on prescription), EHC is also available from young people's clinics and sexual health clinics.

A new condom distribution scheme for the over 25s, the Free Condom Project, is also being piloted locally, in City of London and Hackney. The scheme is aimed at those deemed at higher risk of contracting HIV. This service is being established in response to local need and is being delivered in partnership with the voluntary and community sector.

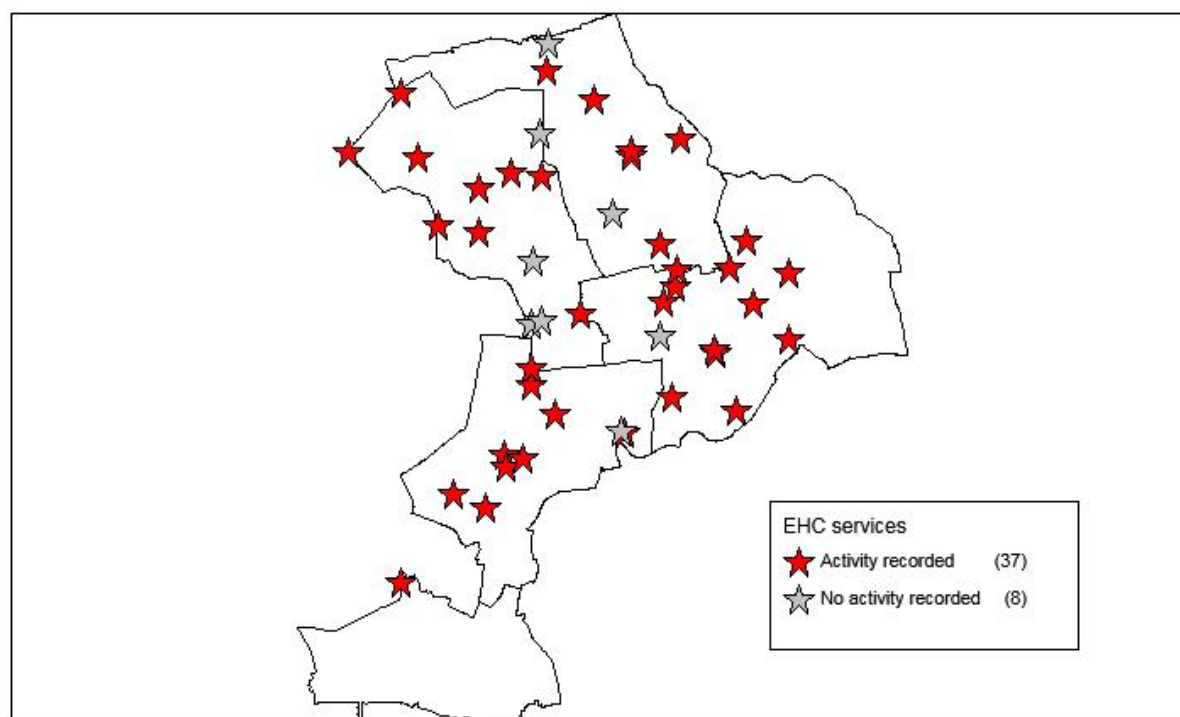
6.4.2 Current provision

The geographical distribution of pharmacies providing sexual health services is shown in Figure 50, Figure 51 and Figure 52.

The service is currently provided by 44 (out of 49) Hackney pharmacies. Eight of these pharmacies recorded no activity under any aspect of this contract in the first two quarters of 2014-15 (April to September 2014) (Table 42, Table 42 and Table 44). A further four pharmacies would be willing to provide at least one component of this service.

One pharmacy located near the large residential population in the north of the City is signed up to deliver this service and reported some activity in the first half of 2014-15. A further 13 pharmacies would be willing to provide at least one component of this service.

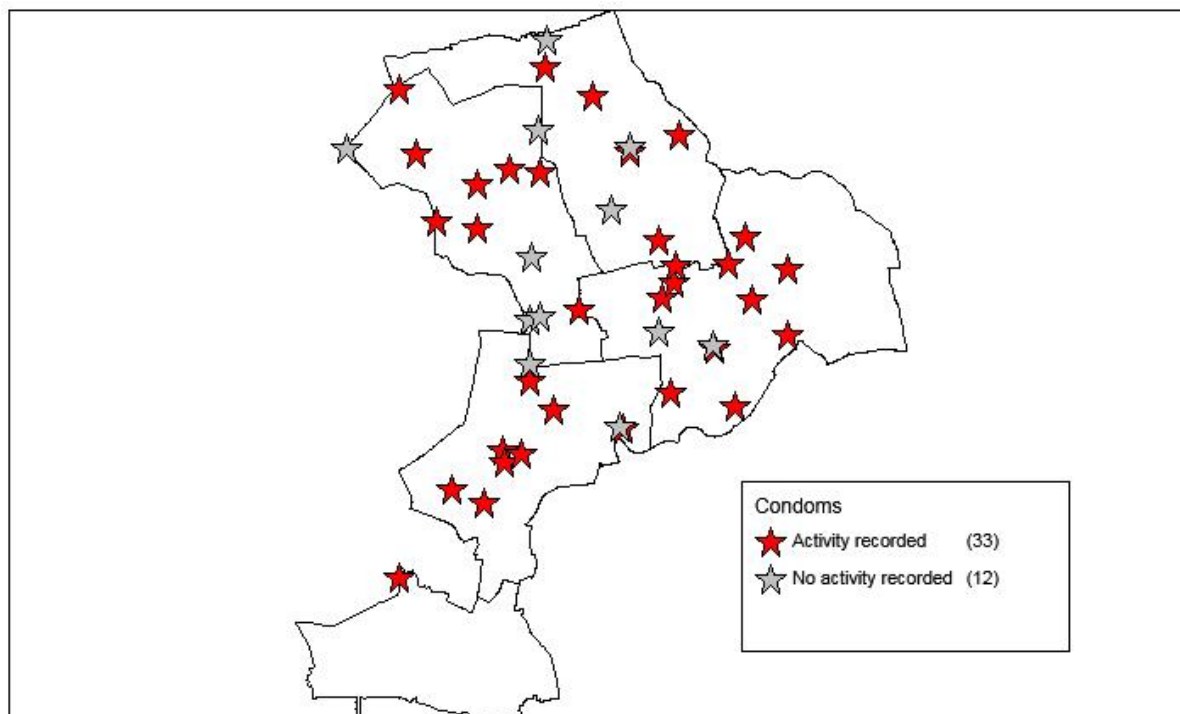
Figure 50 **Geographical distribution of pharmacies providing EHC service in City and Hackney (April to September 2014)**



²⁴ <https://www.checkurself.org.uk/> (accessed 8.10.14)

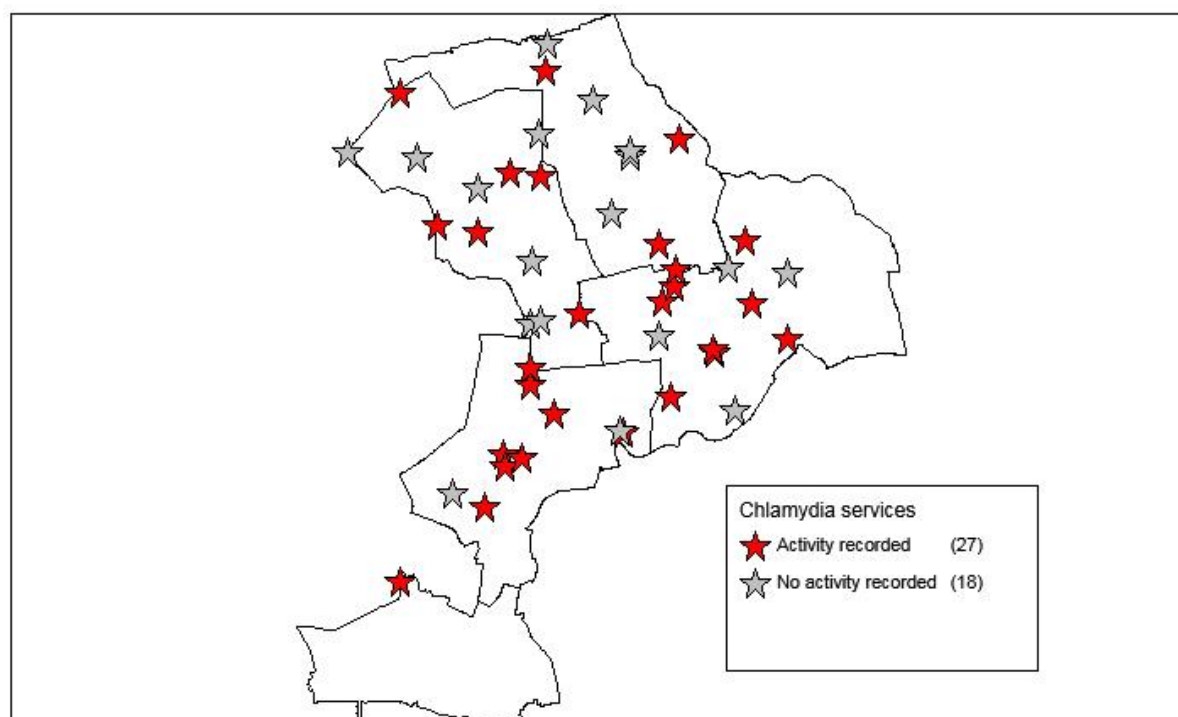
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Figure 51 **Geographical distribution of pharmacies providing condom distribution service in City and Hackney (April to September 2014)**



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Figure 52 **Geographical distribution of pharmacies providing *Chlamydia* screening and treatment service in City and Hackney (April to September 2014)**



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Table 42 **Pharmacies currently providing EHC service in City and Hackney**

Locality	Number signed up to provide	Number 'active'	WTP
Stoke Newington	14	10	1
North East	9	7	0
Homerton	12	11	2
Shoreditch	9	8	0
City of London	1	1	10

Table 43 Pharmacies currently providing condom distribution service in City and Hackney

Locality	Number signed up to provide	Number 'active'	WTP
Stoke Newington	14	8	0
North East	9	6	1
Homerton	12	10	1
Shoreditch	9	8	0
City of London	1	1	13

Table 44 Pharmacies currently providing *Chlamydia* screening and treatment service in City and Hackney

Locality	Number signed up to provide	Number 'active'	WTP
Stoke Newington	14	7	1
North East	9	4	1
Homerton	12	8	0
Shoreditch	9	7	0
City of London	1	1	11

6.4.3 Access to services

We have also considered access to pharmacies signed up to provide the sexual health service in neighbouring localities (Table 45). From this analysis, we have concluded that there is good access to the service from all localities in Hackney. However, access is limited to one pharmacy in the City, serving the resident population in the north.

Table 45 Pharmacy sexual health service accessible to localities

Locality	Number signed up in locality	Number signed up in close proximity to ^a locality	Total number of accessible pharmacies signed up to provide
Stoke Newington	14	2	16
North East	9	8	17
Homerton	12	5	17
Shoreditch	9	5	14
City of London	1	NA ^b	1

^a Pharmacies within 0.25 miles of each locality (*within* City and Hackney borders)

^b There are no pharmacies in Hackney within 0.25 miles of the City border

6.4.4 Patient views

One in five (20%) of survey respondents in Hackney, and a similar proportion in the City (18%) expressed an interest in using the pharmacy *Chlamydia* testing and treatment service in future (3% and 2%, respectively, said they have already used this service). The highest expressed demand for this service was among Shoreditch locality residents (30% said they have either used or would like to use).

There is reasonable local demand for pharmacies to provide EHC and a condom distribution service in Hackney, with 18% and 21% of Hackney respondents saying they would like to use each of these services, respectively, in future (5-7% of respondents say they have accessed these services in the past). Comparable figures for the City are 13% and 28% wishing to access EHC and condom supply, respectively, through a pharmacy (8% and 5%, respectively, have used them in the past).

Seventy-six (11%) of those who live/work in Hackney and nine (9%) from the City report that they have discussed sexual health or contraception issues with a pharmacist. However, the majority of respondents expressing a demand for these services in both the City and Hackney were over the eligible age, for the free condom scheme and Chlamydia screening at least (age 25).

The 2013 Hackney peer research project referred to earlier in this report found that one third of the young people interviewed would go to a pharmacy if they wanted contraceptives (results based on interviews with 98 young people aged under 25).

Conclusions in relation to sexual health service – Hackney

We have concluded that the four elements of the pharmacy sexual health service are **necessary to meet a current need** for pharmaceutical and public health services in Hackney. However, **current need is not being met consistently** across the borough and the reasons for this should be explored by the Public Health team and local pharmacy contractors.

Conclusions in relation to sexual health service – City of London

We have concluded that the four elements of the pharmacy sexual health service are **necessary to meet a current need** for pharmaceutical and public health services in the City. We consider that **there may be is a gap in service provision** to meet the needs of the residential population in the east of the City, but again recognise that this need may be being met by pharmacy services located out-of-area (e.g. over the border in Tower Hamlets).

There may also be an unmet need for pharmacy sexual health services amongst high risk City workers, but an expansion of the service to meet these needs cannot be met through the current public health grant.

6.5 Supervised TB treatment (DOTS)

London Borough of Hackney commissions a service which provides supervised consumption of Tuberculosis (TB) medication in pharmacies. The service is intended to help patients and clinicians to ensure that the full course of treatment for TB is taken. The service is offered to all pharmacies and is dependent on where a patient may wish to collect their medication from.

Addressing TB successfully requires effective screening and diagnostic pathways, supported by treatment pathways to eradicate the infection. Adherence to the full treatment regime is essential to this strategy.

There has been some success locally in reducing the spread of TB infection through DOTS (see section 4.2.11).

6.5.1 Other provision

DOTS is available through the TB outreach service based at Homerton Hospital in Hackney.

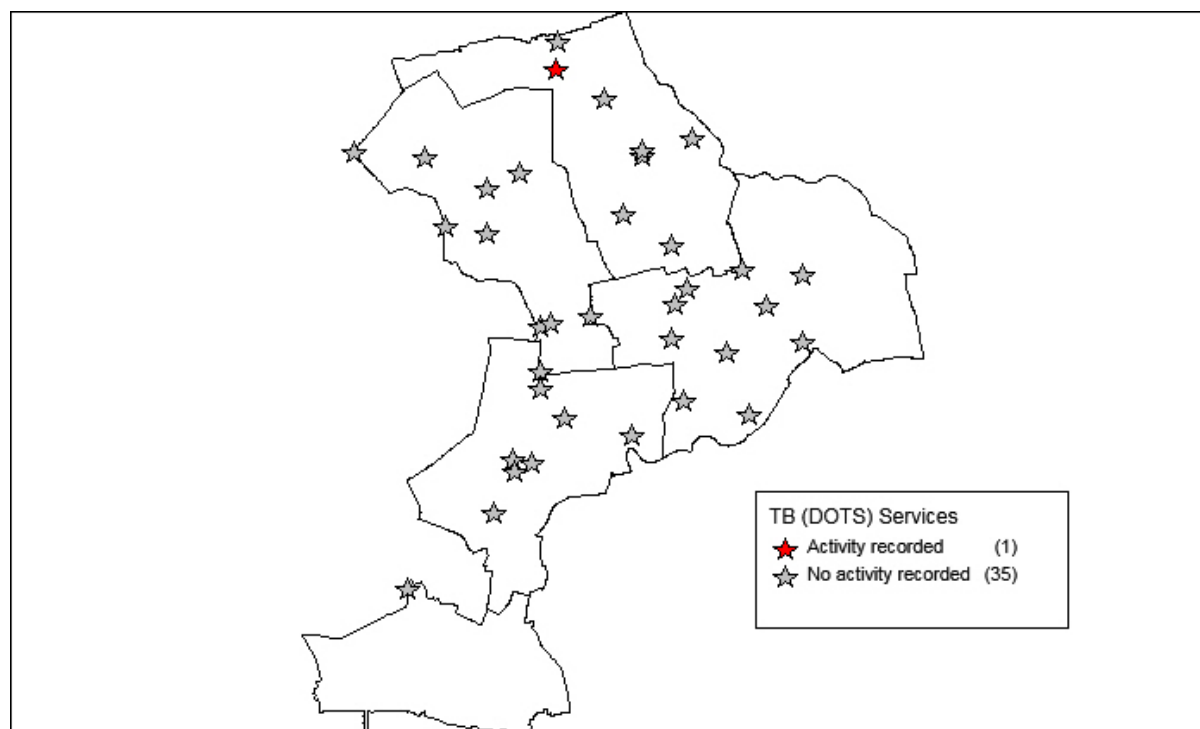
6.5.2 Current provision

The geographical distribution of pharmacies providing the TB DOTS service is shown in Figure 53.

The service is currently provided by 35 (out of 49) pharmacies in Hackney. In the six months to September 2014, only one of these pharmacies in North East locality was 'active', i.e. they had supported TB patients in their treatment through DOTS (Table 46). A further five pharmacies would be willing to provide this service.

In the City, one pharmacy (map reference 116) is signed up to deliver this service, but had not supported any patients in their treatment in the first half of 2014-15. A further nine pharmacies would be willing to provide this service.

Figure 53 **Geographical distribution of pharmacies providing TB DOTS service in City and Hackney (April to September 2014)**



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Table 46 **Pharmacies currently providing TB DOTS service in City and Hackney**

Locality	Number signed up to provide	Number 'active'	WTP
Stoke Newington	10	0	2
North East	8	1	1
Homerton	10	0	1
Shoreditch	7	0	1
City of London	1	0	9

6.5.3 Access to services

We have also considered access to pharmacies signed up to provide the TB DOTS service in neighbouring localities (Table 47). From this analysis, we have concluded that there is

reasonably good access to the service from all localities in Hackney. However, there is no access within the City for the residential population in the east.

Table 47 Pharmacy TB DOTS services accessible to localities

Locality	Number signed up in locality	Number signed up in close proximity to ^a locality	Total number of accessible pharmacies signed up to provide
Stoke Newington	10	2	12
North East	8	4	12
Homerton	10	3	13
Shoreditch	7	5	12
City of London	1	NA ^b	1

^a Pharmacies within 0.25 miles of each locality (*within* City and Hackney borders)

^b There are no pharmacies in Hackney within 0.25 miles of the City border

Conclusions in relation to TB DOTS service - Hackney

- We have concluded that this service has the **potential to secure better access** to TB DOTS, but **current need may be better met through alternative provision**. Hackney has an exemplar TB outreach service at Homerton hospital, which has been very successful in addressing high rates of infection locally.
- The commissioning of TB treatment services does not fall within the remit of local authorities. We recommend that the local authority, PHE and NHS England consider future need, and appropriate commissioning arrangements, for a pharmacy DOTS service following publication of the new national TB strategy in 2015.

Conclusions in relation to TB DOTS service – City of London

- We have concluded that the pharmacy TB DOTS service is **necessary to meet a current need**, particularly in the east of the City and amongst the large rough sleeper population. It ensures that the local population has access to treatment services in an area that is not in close proximity to the Homerton's exemplar TB service.
- **It is possible that current need is not being fully met** by the existing network and we recommend that the pharmacy located nearest to the residential population in the east of the City should be encouraged to sign up to provide this service. However, as elsewhere, we anticipate that many residents here are accessing services in Tower Hamlets (through Bart's Health NHS Trust), where they are registered with a GP.

6.6 Supervised consumption

London Borough of Hackney commissions pharmacies in Hackney and the City to provide a supervised consumption service to support local drug treatment services. While the size of the population in need of this service is small, the impact on the local community is potentially significant if their treatment is not managed effectively, with consequences for the spread of blood borne viruses, health and safety and drug-related crime.

The service provides daily supervised consumption of opiate substitutes to stabilise service users on substitute medication in order to reduce craving and alleviate withdrawal by ensuring that each dose is correctly consumed by the service user it was intended for. Supervised consumption by an appropriate professional provides the best guarantee that a medicine is being taken as directed, and pharmacies are a key partner in this treatment. Regular contact with service users helps the pharmacist to develop supportive relationships and identify any difficulties as they arise. Integrating pharmacists into the treatment pathway helps to improve outcomes for service users.

6.6.1 Other provision

There are no local alternatives to the supervised consumption service available from pharmacies.

The commissioning of drug treatment services are currently under review in both Hackney and the City of London.

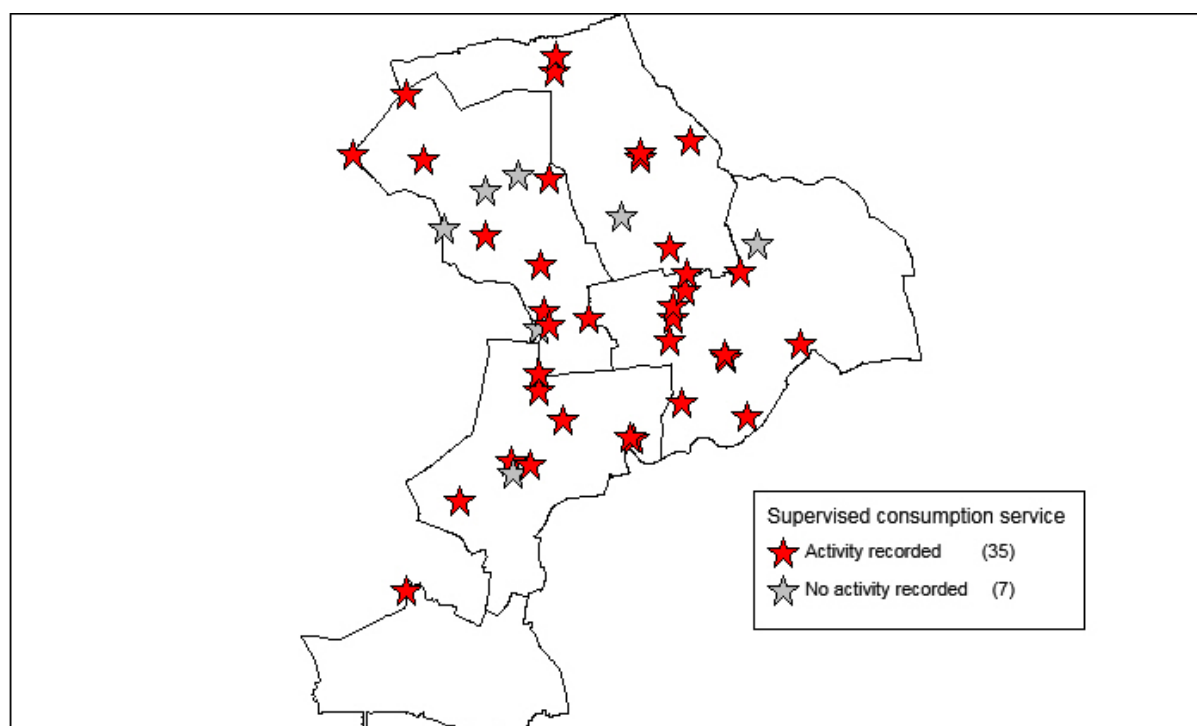
6.6.2 Current provision

The geographical distribution of pharmacies providing the supervised consumption service is shown in Figure 54.

The service is currently provided by 41 pharmacies located in Hackney. In the first two quarters of 2014-15, 34 of these pharmacies were 'active', dispensing 35,871 prescriptions (Table 48). A further one pharmacy would be willing to provide this service.

In the City, one pharmacy is signed up to deliver this service (map reference 116) and was 'active' in the first half of 2014-15. A further 11 pharmacies would be willing to provide this service.

Figure 54 **Geographical distribution of pharmacies providing supervised consumption service in City and Hackney (April to September 2014)**



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Table 48 **Pharmacies currently providing supervised consumption service in City and Hackney**

Locality	Number signed up to provide	Number 'active'	WTP
Stoke Newington	14	10	1
North East	8	7	0
Homerton	11	10	0
Shoreditch	8	7	0
City of London	1	1	11

6.6.3 Access to services

We have also considered access to pharmacies signed up to provide the supervised consumption service in neighbouring localities (Table 49). From this analysis, we have concluded that there is good access to the service from all localities in Hackney. Access is limited to one pharmacy in the City, but we are aware of a similar service being available

from a pharmacy close to the border with Tower Hamlets in the east; this pharmacy serves a GP practice with the largest number of City registered patients from this area. This service is not commissioned by the City of London Corporation or LB Hackney (and is not included in the figures presented in Table 49).

Table 49 Pharmacy supervised consumption services accessible to localities

Locality	Number signed up in locality	Number signed up in close proximity to ^a locality	Total number of accessible pharmacies signed up to provide
Stoke Newington	14	3	17
North East	8	7	15
Homerton	11	5	16
Shoreditch	8	6	14
City of London	1	NA ^b	1

^a Pharmacies within 0.25 miles of each locality (*within* City and Hackney borders). This does not include out-of-area pharmacies (e.g. the Tower Hamlets pharmacy described above)

^b There are no pharmacies in Hackney within 0.25 miles of the City border

6.6.4 Patient and public views

Anecdotal feedback from Healthwatch Hackney suggests that some clients using this service have been expected to take their methadone in public, rather than in a private room as they would prefer. This issue was also raised by one respondent to our patient/public survey.

Conclusions in relation to supervised consumption service - Hackney

- We have concluded that this service is **necessary to meet a current need** for community pharmacy services in Hackney.
- It is important that the privacy of service users is respected at all times to ensure they are not discouraged from using the service.
- The commissioning of substance misuse services is under review in Hackney and all future related pharmacy commissioning should be aligned with the new service model.

Conclusions in relation to supervised consumption service – City of London

- We have concluded that this service is **necessary to meet a current need** for community pharmacy services in the City.
- The commissioning of substance misuse services is under review in the City and all future related pharmacy commissioning should be aligned with the new service model.

6.7 Needle exchange service

A pharmacy needle exchange service is commissioned via the local community drug service, Lifeline. This service aims to ensure that injecting drug users have access to clean injecting equipment, are able to safely dispose of used equipment and have access to advice from pharmacists. The service is also available to people who inject image and performance enhancing drugs.

Pharmacies commissioned to provide this service have been selected on the basis of their location and the associated need in the surrounding community. As with the supervised consumption service (section 6.6), the number of people affected is small, but the impact on the wider community is potentially significant if not properly managed.

6.7.1 Other provision

Lifeline provides a needle exchange service at their drop-in centre at Tudor Grove in Hackney. They provided a service to 354 clients between April and September 2014.

There are no alternative needle exchange services located in the City.

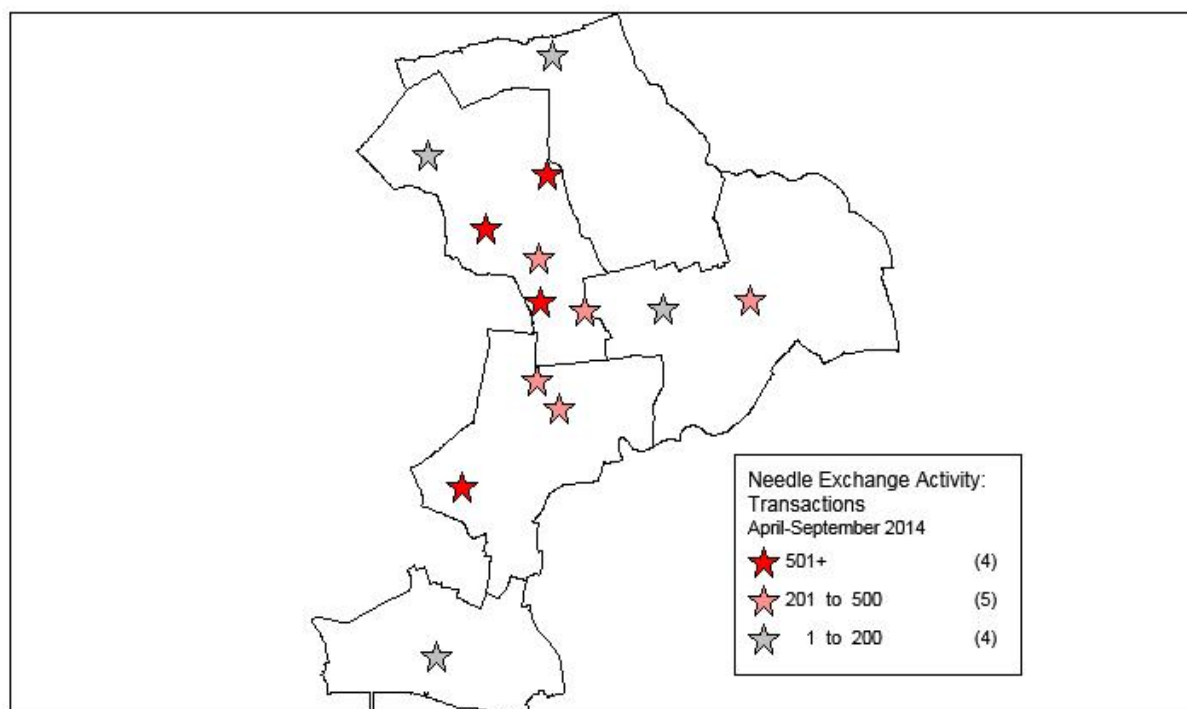
6.7.2 Current provision

Figure 55 shows the distribution of pharmacies across City and Hackney that are providing this service, along with the level of activity in each location.

Twelve pharmacies in Hackney are commissioned to provide a needle exchange service: six in Stoke Newington locality, one in North East locality, three in Shoreditch and two in Homerton. In total, they provided a service to 1,397 clients between April and September 2014.

One pharmacy is commissioned to provide this service in the City (map reference 104) and was 'active' in the six months to September 2014, serving 47 clients.

Figure 55 Geographical distribution of pharmacies providing needle exchange service in City and Hackney



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6.7.3 Patient views

Just over one in 10 respondents (12%) in Hackney (N=78) and seven in the City expressed an interest in using this service in the future. Fourteen Hackney respondents claimed to already have used this service.

Conclusions in relation to needle exchange service – Hackney

- We have concluded that this service is **necessary to meet a current need** for a needle exchange service and that this **need is met by existing services**.
- The commissioning of substance misuse services is under review in Hackney and all future related pharmacy commissioning should be aligned with the new service model.

Conclusions in relation to needle exchange service – City of London

- We have concluded that this service is **necessary to meet a current need** for a needle exchange service and that this **need is met by existing services**.
- The commissioning of substance misuse services is under review in the City and all future related pharmacy commissioning should be aligned with the new service model.

6.8 Hepatitis B, C and HIV testing

A pharmacy dried blood spot testing service for hepatitis B, C and HIV is commissioned by London Borough of Hackney as part of a local diagnosis and treatment pathway. Patients testing positive are referred to the local GUM or Blood-Borne Virus (BBV) service, as appropriate, for prompt treatment.

Rates of HIV in Hackney are amongst the highest in the country; hepatitis B and hepatitis C pose a significant risk to our local population. Injecting drug users and people born in, or travelling from, high risk countries are at much higher risk of infection than other groups (4.2.7).

Improved access to testing helps to increase rates of diagnosis, thus reducing onward transmission and enhancing treatment outcomes for those affected. The pharmacy setting can provide an accessible and convenient place from which testing for these infections can occur.

6.8.1 Other provision

Testing for hepatitis B, C and HIV for high risk individuals is available through Homerton GUM service and drug treatment services, as well as new entrant screening in primary care. HIV testing is also available through sexual health clinics and many GP practices and via a targeted community outreach service in Hackney.

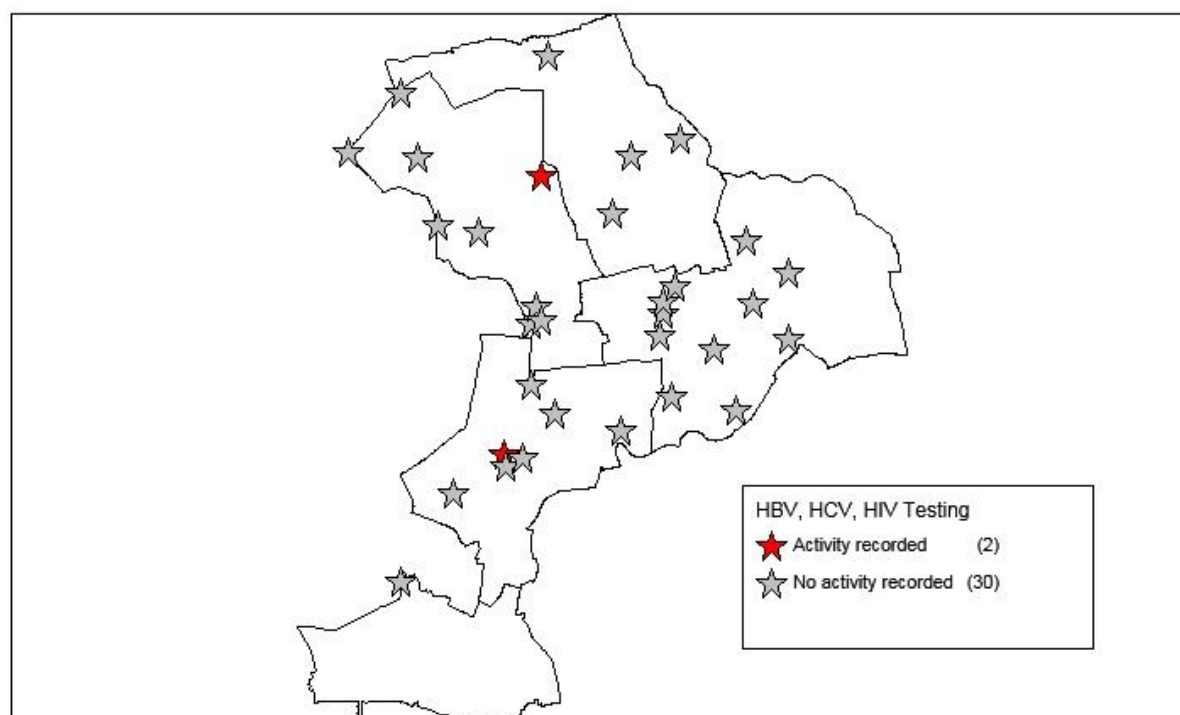
6.8.2 Current provision

The geographical distribution of pharmacies providing this dried blood spot testing service is shown in Figure 56.

The service is currently provided by 31 pharmacies located in Hackney. In the first two quarters of 2014-15 (April to September 2014), three of these pharmacies were 'active', i.e. they had reported some level of testing activity (Table 50). These levels of activity are significantly below previous levels. A further 13 pharmacies are willing to provide this service.

In the City, one pharmacy is signed up to deliver this service (map reference 116), but reported no activity in the first half of 2014-15. A further 13 pharmacies are willing to provide this service.

Figure 56 **Geographical distribution of pharmacies providing dried blood spot testing service in City and Hackney (April to September 2014)**



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Table 50 **Pharmacies currently providing dried blood spot testing service in City and Hackney**

Locality	Number signed up to provide	Number 'active'	WTP
Stoke Newington	9	1	5
North East	4	0	4
Homerton	11	0	2
Shoreditch	7	1	2
City of London	1	0	13

6.8.3 Access to services

We have also considered access to pharmacies signed up to provide the dried blood spot testing service in neighbouring localities (Table 51). From this analysis, we have concluded that there is reasonably good access to the service from all localities in Hackney. However, access is limited to one pharmacy in the City.

Table 51 Pharmacy dried blood spot services accessible to localities

Locality	Number signed up in locality	Number signed up in close proximity to ^a locality	Total number of accessible pharmacies signed up to provide
Stoke Newington	9	2	11
North East	4	5	9
Homerton	11	1	12
Shoreditch	7	5	12
City of London	1	NA ^b	1

^a Pharmacies within 0.25 miles of each locality (*within* City and Hackney borders)

^b There are no pharmacies in Hackney within 0.25 miles of the City border

6.8.4 Patient views

There would appear to be local demand for this service, with one in five (20%) of respondents living or working in Hackney and 17% in the City saying they would like to use it in the future (19 Hackney respondents have used the service in the past). Feedback from the Hackney Refugee Forum representative indicated a need for this service among some migrant communities.

Conclusions in relation to Hep B, C and HIV testing service - Hackney

- We have concluded that this service has the **potential to secure better access** to BBV testing in Hackney. Reasons for, and possible solutions to, the current low levels of activity should be explored by the local public health team and the LPC.
- The commissioning of hepatitis B and C testing does not strictly fall within the remit of local authorities. In the medium term, we recommend that City and Hackney Public Health, the CCG, PHE and NHS England consider future need and appropriate commissioning arrangements for this service.

Conclusions in relation to Hep B, C and HIV testing service – City of London

- We have concluded that this service has the **potential to secure better access** to BBV testing in the City of London. Reasons for, and possible solutions to, the current low levels of activity should be explored by the local public health team and the LPC.
- We recommend that the pharmacy located nearest to the large, ethnically diverse resident population in the east of the City is encouraged to sign up to delivering this service, to meet the needs of the local community who may be at increased risk of infection.
- As large numbers of City workers are born overseas, BBV testing may be beneficial for early detection of infection. This need cannot be met through local public health grant funding. It is recommended that NHS England consider how an expansion of the service to meet the needs of the daytime at risk population could be funded.
- The commissioning of hepatitis B and C testing does not strictly fall within the remit of local authorities. In the medium term, we recommend that City and Hackney Public Health, the CCG, PHE and NHS England consider future need and appropriate commissioning arrangements for this service.

6.8.5 Summary of our assessment of public health services

A summary of our assessment of public health services is provided in Table 52. As many of these services are commissioned by LB Hackney on behalf of the City of London Corporation, we have produced a joint summary assessment.

Table 52 **Summary of our assessment of public health services in City and Hackney**

	<i>Hackney</i>	<i>City of London</i>
Stop smoking service	Necessary to meet current need and there is good access to the service	Necessary to meet current need and there is good access to the service
Weight management service	Potential to secure better access, but access is not consistent	Potential to secure better access, but possible unmet need in the east of the City
Healthy Start vitamins	Necessary to meet current need and access to the service is good	Necessary to meet current need and access to the service is good
Sexual health service (EHC, condom distribution, <i>Chlamydia</i> screening and treatment)	Necessary to meet current need, but access is not consistent	Necessary to meet current need, but possible unmet need in the east of the City
TB DOTS	Potential to secure better access, but alternative provision may be more appropriate	Necessary to meet current need, but possible unmet need especially in the east of the City
Supervised consumption service	Necessary to meet current need and there is good access to the service	Necessary to meet current need and there is reasonable access to the service
Needle exchange	Necessary to meet current need and there is good access to the service	Necessary to meet current need and there is good access to the service
Hep B, C & HIV testing	Potential to secure better access, but current provision is poor	Necessary to meet current need, but potentially significant unmet need in the east of the City

In the period following transition of the public health team from the NHS into the local authority in April 2013, a drop-off in activity has been observed across some pharmacy public health services. This may partly be explained by changes in commissioning support arrangements, although contracts have remained unchanged throughout.

A number of barriers to delivery of these services were identified in the pharmacy contractor survey, with the main difficulties identified as paperwork/record keeping and other pressures of work (e.g. dispensing) (see appendix C).

Based on our assessment of local dispensing activity (section 5.1.5.1), there may be capacity across the existing network to expand the availability of public health services and commissioning opportunities should be explored by LB Hackney and the City of London Corporation to exploit this.

City and Hackney public health team recognises the significant potential that community pharmacy offers to improve access to public health services for the local population. The pharmacy contractor survey demonstrates that there is considerable enthusiasm locally to contribute to this agenda. We recommend that the public health team and the LPC work together in finding solutions to support improved performance across the network to meet local need and reduce variation in activity. Further opportunities should also be explored to improve access to other public health services through pharmacies where a demand has been expressed in the patient/public survey (see appendix B).

Where the PNA has concluded that needs may be better met elsewhere (e.g. TB DOTS in Hackney), this should be explored and commissioning arrangements reviewed.

Cross-border commissioning of public health services should also be considered for residents who are heavy users of out-of-area pharmacies, including those serving GP practices in neighbouring boroughs where a significant number of local residents are registered. This is of particular relevance to the City.

It should be noted that there may be an unmet need for some public health services among the daytime City worker population, but this cannot be met through local public health grant funding. We recommend that PHE and NHS England give consideration to funding options for extending the coverage of relevant public health services to a larger number of pharmacies to meet the needs of the non-resident, high risk City worker population.

7 Consultation areas and IT facilities

Consultation areas enable pharmacists to provide a number of advanced, locally commissioned and public health services.

There is good access to consultation rooms in pharmacies in Hackney and the City. All respondents to the pharmacy contractor survey in both Hackney and City stated that there is a closed room consultation area on the pharmacy premises. Two pharmacies in the City and five in Hackney have more than one consultation area. The vast majority of consultation areas are in a closed room; just one pharmacy in the City and eight in Hackney (five in Homerton locality, one in North East locality and one in Shoreditch locality) do not have a private consultation area.

The characteristics of consultation areas were explored in some depth in the pharmacy contractor questionnaire and responses are summarised in Figure 57 (Hackney) and Figure 58.

Most pharmacies in Hackney and all in the City provide consultation areas that are private and have space to sit three or more people. However, only a small minority have or plan to install an examination couch.

As described earlier in this report (section 5.1.3.1), the majority of Hackney pharmacies (38 out of 46 who responded to the survey) and all City pharmacies claim to have wheelchair accessible consultation areas.

Access to handwashing facilities is good in general in both City and Hackney pharmacies, but access to toilet facilities for patients is limited to 18 premises in Hackney (none in the City).

There is poor access to computer terminals and PMR from City consultation areas.

All pharmacies in the City and all but one responding Hackney pharmacist have a computer with internet access somewhere on the premises, however. All responding pharmacy contractors are PMR Release 2 enabled, but most City pharmacies (N=12) and just under half of Hackney pharmacies (N=21) do not yet have an nhs.net email account.

Figure 57 Current and planned characteristics of consultation areas: Hackney

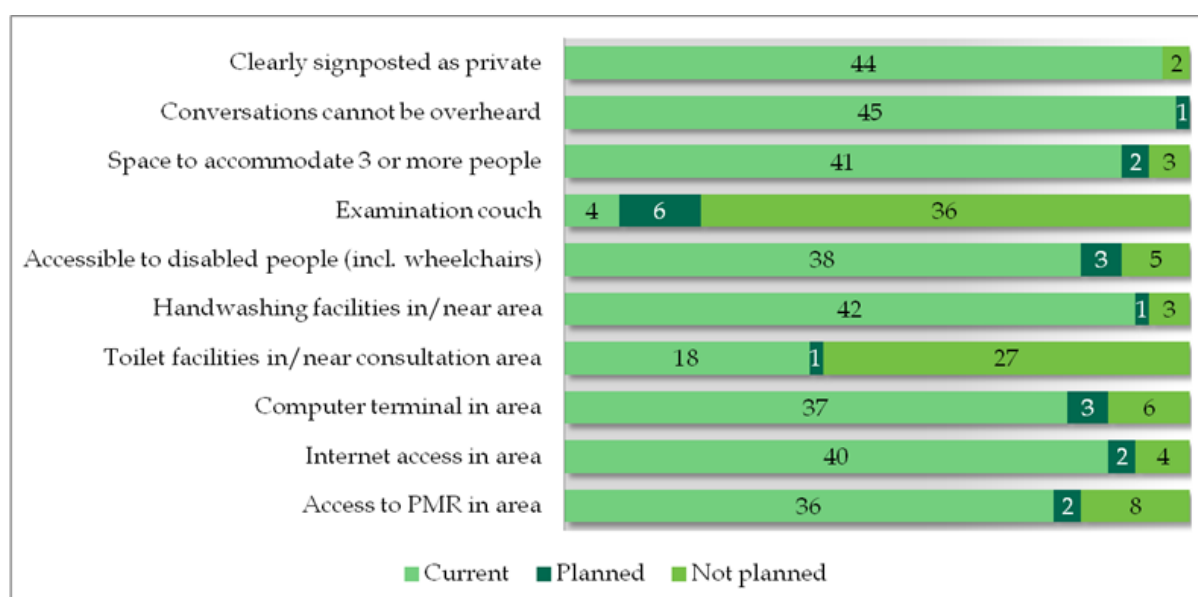
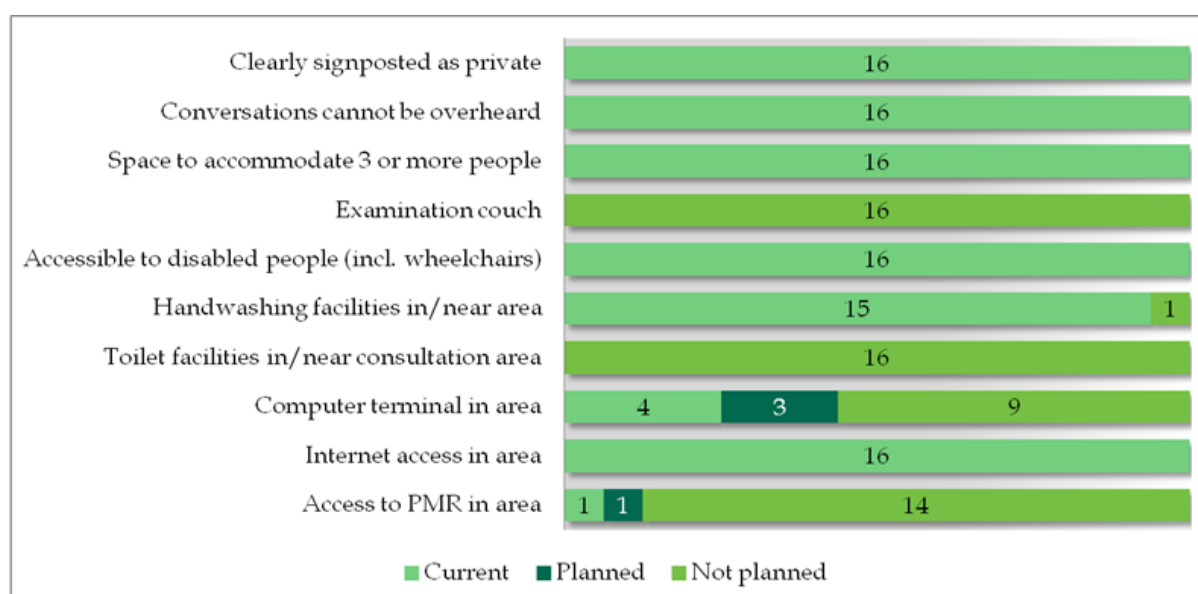


Figure 58 Current and planned characteristics of consultation areas: City of London



Appendices

- A. Local strategy and commissioning documents reviewed for the PNA
- B. Survey of patients and the public
- C. Survey of local pharmacy contractors
- D. Membership of the task and finish group and 'virtual' steering group
- E. List of pharmacy contractors in Hackney and the City of London
- F. Maps of pharmacy contractors in Hackney and the City of London
- G. Opening hours of pharmacy contractors
- H. Report of the consultation on the draft PNA

A. Local strategy and commissioning documents reviewed for the PNA

Local health and wellbeing priorities in the City and in Hackney were identified by reviewing the respective health and wellbeing strategies.

In Hackney, the priorities are:

- early years and childhood obesity
- tobacco control and preventing young people starting smoking
- mental health, with a focus on alleviating anxiety and depression in working age adults
- caring for people with dementia.

Priorities for the City of London are split into those for residents, rough sleepers and City workers, as follows:

- residents - ensuring that all City residents are able to live healthily, and improving access to health services (priorities include mental health, access to jobs and improving air quality)
- rough sleepers - working with health and outreach services (including mental health service providers) to ensure rough sleepers are given the range of support they need
- City workers – meeting the needs of all workers, including the lower paid, to keep them healthy and productive, with a particular focus on prevention.

A number of strategy and policy documents were reviewed to inform the development of this PNA, including:

- London Borough of Hackney Core Strategy 2010-2025
- London Borough of Hackney Corporate Plan 2013/14-2014/15
- Hackney Housing Needs Assessment 2009
- Hackney Housing Strategy 2010-15
- Hackney Safer, Cleaner Communities Strategy
- Hackney Sustainable Community Strategy 2008-2018
- Hackney Carers Strategy 2012-14
- City of London Safer Communities Strategy
- City of London Resident Estimates and Projections²⁵
- City and Hackney CCG strategic plans
- NHS England Mandate 2014-15.

In addition, evidence on local need was obtained from:

- the most recent City and Hackney Health and Wellbeing Profile (the JSNA) - <http://www.hackney.gov.uk/jsna.htm#.VDWW6vldWCM> (accessed 21.10.2014)

²⁵ <http://www.cityoflondon.gov.uk/services/environment-and-planning/planning/development-and-population-information/demography-and-housing/Documents/city-of-london-resident-estimates-and-projections.pdf> (accessed 21.10.1014)

- a report on the public health and primary healthcare needs of City workers, 2010 - <http://www.cityoflondon.gov.uk/business/economic-research-and-information/research-publications/Pages/the-public-health-and-primary-healthcare-needs-of-city-workers.aspx> (accessed 21.10.2014)

B. Survey of patients and the public

- A survey of patients and the public (administered as an online and paper self-completion questionnaire) was carried out in September 2014.
- A total of 836 responses were received. Ninety-five responses were received from people who live or work in the City and 668 from people living or working in Hackney; it was not possible to ascertain location of work or residence in the case of 97 respondents. Twenty-four respondents were counted twice as they stated that they worked in both the City and Hackney (but lived in either one or neither).
- Results for the 'closed'/pre-coded questions, for City and Hackney respondents separately, will be presented in full in the post-consultation report.

C. Survey of local pharmacy contractors

- A survey of pharmacy contractors (administered as an online self-completion questionnaire) was carried out in September 2014.
- A total of 62 responses were received. Three Hackney pharmacies failed to respond. A response was received from all City pharmacies.
- Results for the 'closed'/pre-coded questions are presented below.

Premises Details

Q6 – Is this pharmacy a Distance Selling Pharmacy? (i.e. it cannot provide Essential Services to persons present at the pharmacy)

None of the pharmacies that responded to the survey are distance selling pharmacies.

	City	%	Hackney	%
The pharmacist is available all day during the opening hours	16	100.0	43	93.5
The pharmacist takes a set break	0	0.0	3	6.5

Q13 - What is the gender of your regular pharmacist?

	City	%	Hackney	%
Female	9	56.3	8	17.4
Male	7	43.8	38	82.6

Q14 - How does this pharmacy secure its regular pharmacist cover?

	City	%	Hackney	%
Locum (Different locums from day to day and week to week)	0	0.0	3	6.5
Owner / Manager	0	0.0	14	30.4
Permanent employee	15	93.8	14	30.4
Regular locum (individual working more than 35 hours per week)	1	6.3	11	23.9
Regular locums (group of locums working less than 35 hours per week)	0	0.0	4	8.7

Q15 - How many hours per week on average, if any, does the pharmacy employ more than one pharmacist at one time?

	City	%	Hackney	%
0 hours	2	12.5	17	37.0
1 to 15 hours	1	6.3	7	15.2
16 to 30 hours	1	6.3	6	13.0
31 to 45 hours	9	56.3	3	6.5
46 hours or more	3	18.8	4	8.7
No Answer	0	0.0	9	19.6

Q16 - How many pharmacists practice in the pharmacy in total? (e.g. manager, 2nd pharmacists, regular locums)

Total	City	%	Hackney	%
1	5	31.3	35	76.1
2	9	56.3	4	8.7
3	2	12.5	0	0.0
No Answer	0	0.0	7	15.2

How many <u>part-time</u> pharmacists practice in the pharmacy in total?	City	%	Hackney	%
0	1	6.3	6	13.0
1	7	43.8	7	15.2
2	0	0.0	4	8.7
No Answer	8	50.0	29	63.0

How many <u>regular locum</u> pharmacists practice in the pharmacy in total?	City	%	Hackney	%
0	0	0.0	5	10.9
1	1	6.3	18	39.1
2	0	0.0	5	10.9
3	0	0.0	1	2.2
No Answer	15	93.8	17	37.0

Q17 - How many are accredited to conduct Medicines Use Review?

How many full-time pharmacists are accredited to conduct Medicines Use Review?	City	%	Hackney	%
1	5	31.3	32	69.6
2	9	56.3	5	10.9
3	1	6.3	1	2.2
No Answer	1	6.3	8	17.4

How many part-time pharmacists are accredited to conduct Medicines Use Review?	City	%	Hackney	%
0	1	6.3	3	6.5
1	6	37.5	8	17.4
2	0	0.0	5	10.9
3	1	6.3	0	0.0
No Answer	8	50.0	30	65.2

How many regular locum pharmacists are accredited to conduct Medicines Use Review?	City	%	Hackney	%
0	1	6.3	2	4.3
1	1	6.3	14	30.4
2	0	0.0	3	6.5
3	0	0.0	1	2.2
No Answer	14	87.5	26	56.5

Q20 - If there were the opportunity to specialise in a particular service, area of practice or disease would you be interested? i.e. become a Pharmacist with a Special Interest

	City	%	Hackney	%
Yes	15	93.8	33	71.7
No	0	0.0	6	13.0
Not Answered	1	6.3	7	15.2

Consultation Facilities

Q21 – Is there is a consultation area on the premises?

All pharmacies stated they had a consultation area.

Number of Consultation Areas	City	%	Hackney	%
1	14	87.5	26	56.5
2	2	12.5	5	10.9
3	0	0.0	1	2.2
No Answer	0	0.0	14	30.4
Total	16	100.0	46	100.0

Are any of these consultation areas a closed room?	City	Hackney
Yes	15	38
No Answer	1	8

Q22- Do you have any other type of consultation facilities (e.g. off-site)?

Almost all the pharmacies (60 out of 62) said they did not have any other type of consultation facilities (e.g. off-site).

The two other types of consultation facilities mentioned are 'off-site MURS' (in Stoke Newington) and 'medicine counter' (in North East).

Q23 - Please answer the following questions about the consultation facilities that you have or plan to introduce in your pharmacy. If you tick 'planned' then provide an approximate date.

The consultation area is clearly signposted as private within the pharmacy	City	Hackney
Current	16	44
Not planned	0	2

Conversations in the consultation area cannot be overheard when talking at normal speaking volumes by other patients and staff.	City	Hackney
Current	16	45
Planned	0	1

There is space available in the consultation area to accommodate 3 or more people.	City	Hackney
Current	16	41
Not planned	0	3
Planned	0	2

All pharmacies stated they currently had seating available for patients and staff in the consultation area.

There is an examination couch in the consultation area.	City	Hackney
Current	0	4
Not planned	16	36
Planned	0	6

The consultation area is accessible to disabled people (including wheelchair users).	City	Hackney
Current	16	38
Not planned	0	5
Planned	0	3
Total	16	46

There are handwashing facilities in or near the consultation area.	City	Hackney
Current	15	42
Not planned	1	3
Planned	0	1

There are toilet facilities in or near the consultation area.	City	Hackney
Current	0	18
Not planned	16	27
Planned	0	1

There is a computer terminal in the consultation area.	City	Hackney
Current	4	37
Not planned	9	6
Planned	3	3

There is internet access in the consultation area.	City	Hackney
Current	16	40
Not planned	0	4
Planned	0	2

There is access to the PMR in the consultation area.	City	Hackney
Current	1	36
Not planned	14	8
Planned	1	2

Q24 - Do you currently use your consultation room for other practitioners to run clinics or services from your pharmacy?

	City	Hackney
No	15	44
Yes	1	2

Q25 - Would you be willing to allow other practitioners to use your consultation room to run clinics or services from your pharmacy?

	City	Hackney
No	1	17
Yes	15	29

Languages

Q26 - Which languages, other than English, do your customers speak?

	City	% of City pharmacies	Hackney	% of Hackney pharmacies
Arabic	10	62.5	21	45.7
Bengali	13	81.3	31	67.4
Gujarati	8	50.0	36	78.3
Hindi	7	43.8	35	76.1
Polish	10	62.5	29	63.0
Spanish	9	56.3	11	23.9
Turkish	4	25.0	42	91.3
Urdu	4	25.0	33	71.7

Q27 - Which languages, other than English, are spoken by your staff?

	City	% of City pharmacies	Hackney	% of Hackney pharmacies
Arabic	11	68.8	11	23.9
Bengali	13	81.3	17	37.0
Gujarati	12	75.0	38	82.6
Hindi	8	50.0	36	78.3
Polish	3	18.8	6	13.0
Spanish	2	12.5	2	4.3
Turkish	0	0.0	19	41.3
Urdu	2	12.5	31	67.4

IT Facilities

Q28 - Does your pharmacy have a computer with internet and email access?

	City	%	Hackney	%
Yes	16	100.0	45	97.8
No	0	0.0	1	2.2

If yes, what is your type of internet connection?	City	%	Hackney	%
N3	16	100.0	38	82.6
Other	0	0.0	6	13.0
No Answer	0	0.0	2	4.3

If yes, do you have an NHS.net email account?	City	%	Hackney	%
Yes	4	100.0	23	50.0
No	12	0.0	21	45.7
No Answer	0	0.0	2	4.3

Q29 - In regards to Electronic Prescription Service, is your pharmacy:

	City	%	Hackney	%
Yes	4	100.0	46	100.0
No	12	0.0	0	0.0
No Answer	0	0.0	0	0.0

Relationship with your local GPs**Q30 – How would you rate your relationship with your local/main GP practice(s)?**

	City	%	Hackney	%
Very good	9	56.3	32	69.6
Good	6	37.5	13	28.3
Neither good or poor	1	6.3	1	2.2
Poor	0	0.0	0	0.0
Very Poor	0	0.0	0	0.0

Q32 - In the past four weeks how often have you spoken directly with one of your local GPs?

Over the telephone	City	%	Hackney	%
More often than weekly	12	75.0	28	60.9
Weekly	1	6.3	9	19.6
Once or twice	2	12.5	8	17.4
Never	0	0.0	1	2.2
Don't know	1	6.3	0	0.0

Face to face	City	%	Hackney	%
More often than weekly	0	0.0	3	6.5
Weekly	0	0.0	11	23.9
Once or twice	13	81.3	21	45.7
Never	0	0.0	10	21.7
Don't know	3	18.8	1	2.2

Services

Q33- Does the pharmacy currently or intend to provide the following services?

Medicines Use Review service	City	Hackney
Yes	16	45
No, not intending to provide	0	1

New Medicine Service	City	Hackney
Yes	16	43
Intending to begin within the next 12 months	0	2
No, not intending to provide	0	1

Appliance Use Review service	City	Hackney
Yes	0	9
Intending to begin within the next 12 months	2	15
No, not intending to provide	14	22

Stoma Appliance Customisation service	City	Hackney
Intending to begin within the next 12 months	2	12
No, not intending to provide	14	30
Yes	0	4

Q34 - Which of the following services does the pharmacy currently provide or would be willing to provide?

Supply of Healthy Start vitamins	City	%	Hackney	%
Do you currently provide this service?	2	12.5	44	95.7
Do you think there is a need for this service in your area?	1	6.25	19	41.3
If you do not currently provide this service, would you be willing to provide this service in the future?	14	87.5	2	4.3

Advisory services to children's homes or schools	City	%	Hackney	%
Do you currently provide this service?	0	0.0	1	2.2
Do you think there is a need for this service in your area?	0	0.0	15	32.6
If you do not currently provide this service, would you be willing to provide this service in the future?	16	100.0	31	67.4

Chlamydia testing service	City	%	Hackney	%
Do you currently provide this service?	2	12.5	33	71.7
Do you think there is a need for this service in your area?	1	6.25	20	43.5
If you do not currently provide this service, would you be willing to provide this service in the future?	14	87.5	11	23.9

Chlamydia treatment service	City	%	Hackney	%
Do you currently provide this service?	2	12.5	24	52.2
Do you think there is a need for this service in your area?	1	6.25	20	43.5
If you do not currently provide this service, would you be willing to provide this service in the future?	14	87.5	15	32.6

Condom distribution	City	%	Hackney	%
Do you currently provide this service?	1	6.25	38	82.6
Does the patient pay for this service?	0	0	1	2.2
Do you think there is a need for this service in your area?	1	6.25	18	39.1
If you do not currently provide this service, would you be willing to provide this service in the future?	14	87.5	7	15.2

Needle and syringe exchange	City	%	Hackney	%
Do you currently provide this service?	1	6.25	11	23.9
Do you think there is a need for this service in your area?	1	6.25	19	41.3
If you do not currently provide this service, would you be willing to provide this service in the future?	13	81.25	19	41.3

Supervised consumption of methadone, Subutex or other treatments	City	%	Hackney	%
Do you currently provide this service?	1	6.3	35	76.1
Does the patient pay for this service?	0	0.0	1	2.2
Do you think there is a need for this service in your area?	10	62.5	18	39.1
If you do not currently provide this service, would you be willing to provide this service in the future?	15	93.8	5	10.9

Benzodiazepine withdrawal counselling support	City	%	Hackney	%
Do you currently provide this service?	0	0.0	2	4.3
Do you think there is a need for this service in your area?	0	0.0	20	43.5
If you do not currently provide this service, would you be willing to provide this service in the future?	16	100.0	35	76.1

Specialist health promotion (over and above essential services)	City	%	Hackney	%
Do you currently provide this service?	1	6.3	17	37.0
Does the patient pay for this service?	1	6.3	1	2.2
Do you think there is a need for this service in your area?	2	12.5	18	39.1
If you do not currently provide this service, would you be willing to provide this service in the future?	14	87.5	23	50.0

Weight management e.g. weight monitoring & advice	City	%	Hackney	%
Do you currently provide this service?	1	6.25	18	39.1
Do you think there is a need for this service in your area?	1	6.25	24	52.2
If you do not currently provide this service, would you be willing to provide this service in the future?	14	87.5	24	52.2

CHD risk assessment including measurement of blood pressure & lipids	City	%	Hackney	%
Do you currently provide this service?	0	0.0	5	10.9
Does the patient pay for this service?	0	0.0	1	2.2
Do you think there is a need for this service in your area?	1	6.3	25	54.3
If you do not currently provide this service, would you be willing to provide this service in the future?	15	93.8	34	73.9

Nicotine Replacement Therapy through over the counter sale	City	%	Hackney	%
Do you currently provide this service?	13	81.3	38	82.6
Does the patient pay for this service?	12	75.0	15	32.6
Do you think there is a need for this service in your area?	11	68.8	20	43.5
If you do not currently provide this service, would you be willing to provide this service in the future?	4	25.0	6	13.0

Nicotine Replacement Therapy – local authority commissioned service i.e. free to the patient	City	%	Hackney	%
Do you currently provide this service?	13	81.3	36	78.3
Does the patient pay for this service?	12	75.0	4	8.7
Do you think there is a need for this service in your area?	12	75.0	22	47.8
If you do not currently provide this service, would you be willing to provide this service in the future?	3	18.8	6	13.0

Smoking cessation counselling e.g. Level 2 support	City	%	Hackney	%
Do you currently provide this service?	13	81.3	38	82.6
Does the patient pay for this service?	12	75.0	2	4.3
Do you think there is a need for this service in your area?	12	75.0	20	43.5
If you do not currently provide this service, would you be willing to provide this service in the future?	4	25.0	3	6.5

Medication for smoking cessation under PGD (Champix)	City	%	Hackney	%
Do you currently provide this service?	13	78.1	35	78.1
Does the patient pay for this service?	12	25	4	25
Do you think there is a need for this service in your area?	12	51.6	21	51.6
If you do not currently provide this service, would you be willing to provide this service in the future?	3	14.1	6	14.1

Flu vaccination	City	%	Hackney	%
Do you currently provide this service?	13	81.3	36	78.3
Does the patient pay for this service?	11	68.8	3	6.5
Do you think there is a need for this service in your area?	12	75.0	19	41.3
If you do not currently provide this service, would you be willing to provide this service in the future?	3	18.8	4	8.7

Anti-viral distribution service	City	%	Hackney	%
Do you currently provide this service?	0	0.0	11	23.9
Do you think there is a need for this service in your area?	0	0.0	13	28.3
If you do not currently provide this service, would you be willing to provide this service in the future?	16	100.0	27	58.7

Alcohol screening	City	%	Hackney	%
Do you think there is a need for this service in your area?	0	0.0	18	39.1
If you do not currently provide this service, would you be willing to provide this service in the future?	15	93.8	35	76.1

Emergency Contraception through over the counter sale	City	%	Hackney	%
Do you currently provide this service?	13	81.3	39	84.8
Does the patient pay for this service?	12	75.0	15	32.6
Do you think there is a need for this service in your area?	11	68.8	17	37.0
If you do not currently provide this service, would you be willing to provide this service in the future?	3	18.8	4	8.7

Emergency Hormonal Contraception under PGD – i.e. free of charge to the patient	City	%	Hackney	%
Do you currently provide this service?	3	18.8	36	78.3
Does the patient pay for this service?	2	12.5	0	0.0
Do you think there is a need for this service in your area?	9	56.3	19	41.3
If you do not currently provide this service, would you be willing to provide this service in the future?	13	81.3	6	13.0

Vascular risk assessment service – NHS Health Checks	City	%	Hackney	%
Do you currently provide this service?	0	0.0	1	2.2
Do you think there is a need for this service in your area?	7	43.8	20	43.5
If you do not currently provide this service, would you be willing to provide this service in the future?	16	100.0	39	84.8

Spirometry	City	%	Hackney	%
Do you currently provide this service?	0	0.0	0	0.0
Do you think there is a need for this service in your area?	0	0.0	15	32.6
If you do not currently provide this service, would you be willing to provide this service in the future?	16	100.0	35	76.1

Anticoagulant monitoring e.g. blood test and reporting	City	%	Hackney	%
Do you currently provide this service?	0	0.0	1	2.2
Does the patient pay for this service?	0	0.0	1	2.2
Do you think there is a need for this service in your area?	0	0.0	19	41.3
If you do not currently provide this service, would you be willing to provide this service in the future?	15	93.8	37	80.4

Blood pressure monitoring	City	%	Hackney	%
Do you currently provide this service?	0	0.0	23	50.0
Does the patient pay for this service?	0	0.0	8	17.4
Do you think there is a need for this service in your area?	0	0.0	23	50.0
If you do not currently provide this service, would you be willing to provide this service in the future?	16	100.0	24	52.2

Osteoporosis testing	City	%	Hackney	%
Do you currently provide this service?	0	0.0	1	2.2
Do you think there is a need for this service in your area?	0	0.0	11	23.9
If you do not currently provide this service, would you be willing to provide this service in the future?	16	100.0	35	76.1

Diabetes testing	City	%	Hackney	%
Do you currently provide this service?	1	6.3	9	19.6
Does the patient pay for this service?	0	0.0	6	13.0
Do you think there is a need for this service in your area?	0	0.0	26	56.5
If you do not currently provide this service, would you be willing to provide this service in the future?	15	93.8	34	73.9

Cholesterol testing	City	%	Hackney	%
Do you currently provide this service?	0	0.0	4	8.7
Does the patient pay for this service?	0	0.0	3	6.5
Do you think there is a need for this service in your area?	0	0.0	26	56.5
If you do not currently provide this service, would you be willing to provide this service in the future?	16	100.0	34	73.9

Diabetes monitoring/support e.g. regular tests & reviews	City	%	Hackney	%
Do you currently provide this service?	0	0.0	4	8.7
Does the patient pay for this service?	0	0.0	2	4.3
Do you think there is a need for this service in your area?	0	0.0	22	47.8
If you do not currently provide this service, would you be willing to provide this service in the future?	15	93.8	33	71.7

Supply of MDS to domiciliary patients	City	%	Hackney	%
Do you currently provide this service?	2	12.5	39	84.8
Do you think there is a need for this service in your area?	1	6.3	20	43.5
If you do not currently provide this service, would you be willing to provide this service in the future?	12	75.0	2	4.3

HIV testing	City	%	Hackney	%
Do you currently provide this service?	0	0.0	10	21.7
Do you think there is a need for this service in your area?	0	0.0	14	30.4
If you do not currently provide this service, would you be willing to provide this service in the future?	15	93.8	24	52.2

Hepatitis B/C testing	City	%	Hackney	%
Do you currently provide this service?	0	0.0	12	26.1
Do you think there is a need for this service in your area?	0	0.0	14	30.4
If you do not currently provide this service, would you be willing to provide this service in the future?	15	93.8	25	54.3

TB Treatment (DOT)	City	%	Hackney	%
Do you currently provide this service?	0	0.0	14	30.4
Do you think there is a need for this service in your area?	0	0.0	12	26.1
If you do not currently provide this service, would you be willing to provide this service in the future?	14	87.5	25	54.3

Supply of MDS to care homes	City	%	Hackney	%
Do you currently provide this service?	0	0.0	15	32.6
Do you think there is a need for this service in your area?	0	0.0	16	34.8
If you do not currently provide this service, would you be willing to provide this service in the future?	4	25.0	24	52.2

Minor ailments scheme, i.e. free of charge to the patient	City	%	Hackney	%
Do you currently provide this service?	1	6.3	41	89.1
Does the patient pay for this service?	0	0.0	2	4.3
Do you think there is a need for this service in your area?	8	50.0	24	52.2
If you do not currently provide this service, would you be willing to provide this service in the future?	15	93.8	6	13.0

Out of hours services	City	%	Hackney	%
Do you currently provide this service?	0	0.0	2	4.3
Do you think there is a need for this service in your area?	0	0.0	10	21.7
If you do not currently provide this service, would you be willing to provide this service in the future?	3	18.8	20	43.5

Advisory services to care homes (over and above the Drug Tariff specification)	City	%	Hackney	%
Do you currently provide this service?	0	0.0	3	6.5
Do you think there is a need for this service in your area?	0	0.0	15	32.6
If you do not currently provide this service, would you be willing to provide this service in the future?	14	87.5	25	54.3

Access to end of life medicines out of hours	City	%	Hackney	%
Do you currently provide this service?	0	0.0	5	10.9
Do you think there is a need for this service in your area?	0	0.0	12	26.1
If you do not currently provide this service, would you be willing to provide this service in the future?	3	18.8	19	41.3

Prescription intervention recording and reporting scheme (over and above advanced service)	City	%	Hackney	%
Do you currently provide this service?	4	25.0	19	41.3
Do you think there is a need for this service in your area?	2	12.5	16	34.8
If you do not currently provide this service, would you be willing to provide this service in the future?	12	75.0	21	45.7

Medication review in the pharmacy	City	%	Hackney	%
Do you currently provide this service?	11	68.8	38	82.6
Do you think there is a need for this service in your area?	8	50.0	16	34.8
If you do not currently provide this service, would you be willing to provide this service in the future?	5	31.3	5	10.9

Medication review in the practice	City	%	Hackney	%
Do you currently provide this service?	0	0.0	6	13.0
Do you think there is a need for this service in your area?	0	0.0	10	21.7
If you do not currently provide this service, would you be willing to provide this service in the future?	15	93.8	22	47.8

Medication review in the patient's home	City	%	Hackney	%
Do you currently provide this service?	0	0.0	3	6.5
Do you think there is a need for this service in your area?	0	0.0	21	45.7
If you do not currently provide this service, would you be willing to provide this service in the future?	7	43.8	30	65.2

Sessional prescribing advice to GP practices	City	%	Hackney	%
Do you currently provide this service?	0	0.0	0	0.0
Do you think there is a need for this service in your area?	0	0.0	21	45.7
If you do not currently provide this service, would you be willing to provide this service in the future?	13	81.3	33	71.7

Prescription collection service	City	%	Hackney	%
Do you currently provide this service?	13	81.3	42	91.3
Do you think there is a need for this service in your area?	4	25.0	19	41.3
If you do not currently provide this service, would you be willing to provide this service in the future?	3	18.8	1	2.2

Prescription delivery service	City	%	Hackney	%
Do you currently provide this service?	4	25.0	37	80.4
Do you think there is a need for this service in your area?	0	0.0	17	37.0
If you do not currently provide this service, would you be willing to provide this service in the future?	2	12.5	3	6.5

Truss fitting service	City	%	Hackney	%
Do you currently provide this service?	0	0.0	14	30.4
Do you think there is a need for this service in your area?	0	0.0	9	19.6
If you do not currently provide this service, would you be willing to provide this service in the future?	2	12.5	13	28.3

MRD/Medicines Optimisation Service	City	%	Hackney	%
Do you currently provide this service?	0	0.0	8	17.4
Do you think there is a need for this service in your area?	0	0.0	23	50.0
If you do not currently provide this service, would you be willing to provide this service in the future?	3	18.8	28	60.9

Q35 - Does the pharmacy provide any of the following?

Collection of prescriptions from GP practices	City	%	Hackney	%
Yes	16	100.0	46	100.0
No	0	0.0	0	0.0

Delivery of dispensed medicine	City	%	Hackney	%
Yes - free	4	25.0	40	87.0
Yes – at cost	0	0.0	0	0.0
No	12	75.0	6	13.0

Q36 - The local authority commissions a number of public health services from pharmacies. To what extent do you agree or disagree that the following are barriers to delivering services:

City of London

	Other pressures of work e.g. dispensing	Paperwork and record keeping	Confidence / experience	Supporting materials and resources not available / adequate
Strongly agree	1			
Agree	0	2		2
Neither agree nor disagree	13	14	1	7
Disagree	2			3
Strongly disagree	0		15	4

Hackney

	Other pressures of work e.g. dispensing	Paperwork and record keeping	Confidence / experience	Supporting materials and resources not available / adequate
Strongly agree	11	22	0	0
Agree	21	12	6	14
Neither agree nor disagree	6	6	9	16
Disagree	4	4	17	11
Strongly disagree	4	2	14	5

D. Membership of the task and finish group and ‘virtual’ steering group

Members of the task and finish group

Organisation	Name	Position
Webstar Lane	Gianpiero Celino	Consultant pharmacist
City of London Corporation	Farrah Hart	Health and wellbeing policy development manager
LB Hackney	Katherine Körner	Public health intelligence officer
LB Hackney	Kerry Littleford	Public health practitioner
LB Hackney	Alexander Miller	Public health intelligence manager
LB Hackney	Florence Obina	Consultation manager
LB Hackney	Tara Piasetski	Public health intelligence officer
LB Hackney	Kathryn Scott	Public health strategist (formerly comms manager)
LB Hackney	Jayne Taylor	Consultant in public health (Chair of group)

Members of the ‘virtual’ steering group

Organisation	Name	Position
City and Hackney CCG	Rozalia Enti	Assistant Director Head of Medicines Management
City and Hackney Local Pharmaceutical Committee	Hitesh Patel	Chief Executive
City and Hackney Local Medical Committee	Fiona Sanders	Chair
Healthwatch Hackney	Liz Hughes	Member
Healthwatch City of London	Lynn Strother	Manager
NHS England, London Region	Maria Rodriguez	Senior Primary Care Commissioning Manager

E. List of pharmacy contractors in Hackney and the City of London

Map ref	ODS code	Trading name	Address	Postcode	Locality in	Locality accessible to (within 0.25 miles of)
101	FGG53	Boots the Chemists	11 Octagon Arcade, Broadgate	EC2M 2AB	City	Shoreditch
102	FGC54	Boots the Chemists	200 Bishopsgate	EC2M 4NR	City	Shoreditch
103	FVC98	Boots the Chemists	143 High Street, Moorgate	EC2M 6XQ	City	Shoreditch
104	FTP53	Boots the Chemists	107 Cheapside	EC2V 6DN	City	
105	FXQ43	Boots the Chemists	60 Houndsditch	EC3A 7BE	City	
106	FF501	Boots the Chemists	138 Fenchurch Street	EC3M 6BL	City	
107	FTH22	Boots the Chemists	88 Aldgate High Street	EC3N 1LH	City	
108	FGQ44	Boots the Chemists	60 Gracechurch Street	EC3V 0HR	City	
109	FHK56	Boots the Chemists	120 Fleet Street	EC4A 2BE	City	
110	FXD18	Boots the Chemists	Unit 9, Building 2, Paternoster Sq.	EC4M 7DX	City	
111	FHN79	Boots the Chemists	Unit 21, 1 New Change	EC4M 9AG	City	
112	FDC23	Boots the Chemists	80 Cannon Street	EC4N 6AE	City	
113	FFJ28	Boots the Chemists	52-55 King William Street	EC4R 9AD	City	
114	FVK70	Boots the Chemists	96-97 New Bridge Street	EC4V 6JJ	City	
115	FHX72	Boots the Chemists	1-2 Wormwood Street	EC2M 1RX	City	Shoreditch
116	FD099	Chauhun S Chemist ^a	36 Goswell Road	EC1M 7AA	City	

^a Also known as Niemans Chemist

Table 53 List of pharmacy contractors (cont.)

<i>Map ref</i>	<i>ODS code</i>	<i>Trading name</i>	<i>Address</i>	<i>Postcode</i>	<i>Locality in</i>	<i>Locality accessible to (within 0.25 miles of)</i>
501	FCW59	ABC Pharmacy	75-77 Stoke Newington Road	N16 8AD	Stoke Newington	
502	FR966	J Edmunds Chemist	47 Kingsland High Street	E8 2JS	Stoke Newington	Shoreditch
503	FLQ84	Megtraco	448 Kingsland Road	E8 4AE	Stoke Newington	Shoreditch
504	FRD47	Benjamin Chemist	190 Stoke Newington High Street	N16 7JD	Stoke Newington	North East
505	FJ798	Boots the Chemists	82-84 Kingsland High Street	E8 2NS	Stoke Newington	Shoreditch
506	FR817	Dev's Chemist	103A Dalston Lane	E8 1NH	Stoke Newington	Homerton
507	FLK24	Armstrong Dispensing Chemist	279 Green Lanes	N4 2EX	Stoke Newington	
508	FQP06	Morrisons Pharmacy	47-49 Stamford Hill	N16 5SR	Stoke Newington	North East
509	FXW48	Allen Pharmacy	150 Albion Road	N16 9PA	Stoke Newington	
510	FRN23	Park Chemist	286 Seven Sisters Road	N4 2AA	Stoke Newington	
511	FTE02	Rowlands Pharmacy	5 Marlborough Parade, 274 Green Lanes	N4 2NJ	Stoke Newington	North East
512	FEG25	Safedale Ltd	100 Stoke Newington Church Street	N16 0AP	Stoke Newington	North East
513	FGL56	Safedale Ltd	2-3 Kingsway Parade, Albion Road	N16 0TA	Stoke Newington	

Table 54 **List of pharmacy contractors (cont.)**

Map ref	ODS code	Trading name	Address	Postcode	Locality in	Locality accessible to (within 0.25 miles of)
514	FE884	Safedale Ltd	162 Green Lanes	N16 9DL	Stoke Newington	
515	FLP16	Superdrug Pharmacy	Dalston Shopping Centre, Kingsland High Street	E8 2LX	Stoke Newington	Shoreditch
301	FW281	ABC Pharmacy	14 Keninghall Road	E5 8BY	North East	
302	FTD85	ABC Pharmacy	170-172 Stamford Hill	N16 6RA	North East	St. Newington
303	FVX51	Boots the Chemists	Craven House Corner, 222-224 Stamford Hill	N16 6TT	North East	St. Newington
304	FL456	Cohens Chemist	15A Urban Hive, Theydon Road	E5 9BQ	North East	
305	FEJ54	Friends Pharmacy	46 Lower Clapton Road	E5 0RN	North East	Homerton
306	FH599	D P Mark Chemists	51 Oldhill Street	N16 6LU	North East	
307	FG700	Dunsmure Pharmacy	90 Dunsmure Road	N16 5JY	North East	St. Newington
308	FA049	F A Strange	185 Lower Clapton Road	E5 8EQ	North East	Homerton
309	FGK75	Land Chemist	272 Stamford Hill	N16 6TY	North East	
310	FJM18	Safedale Ltd	97 Upper Clapton Road	E5 9BU	North East	
311	FJT15	Safedale Ltd	142A Upper Clapton Road	E5 9JZ	North East	

Table 55 **List of pharmacy contractors (cont.)**

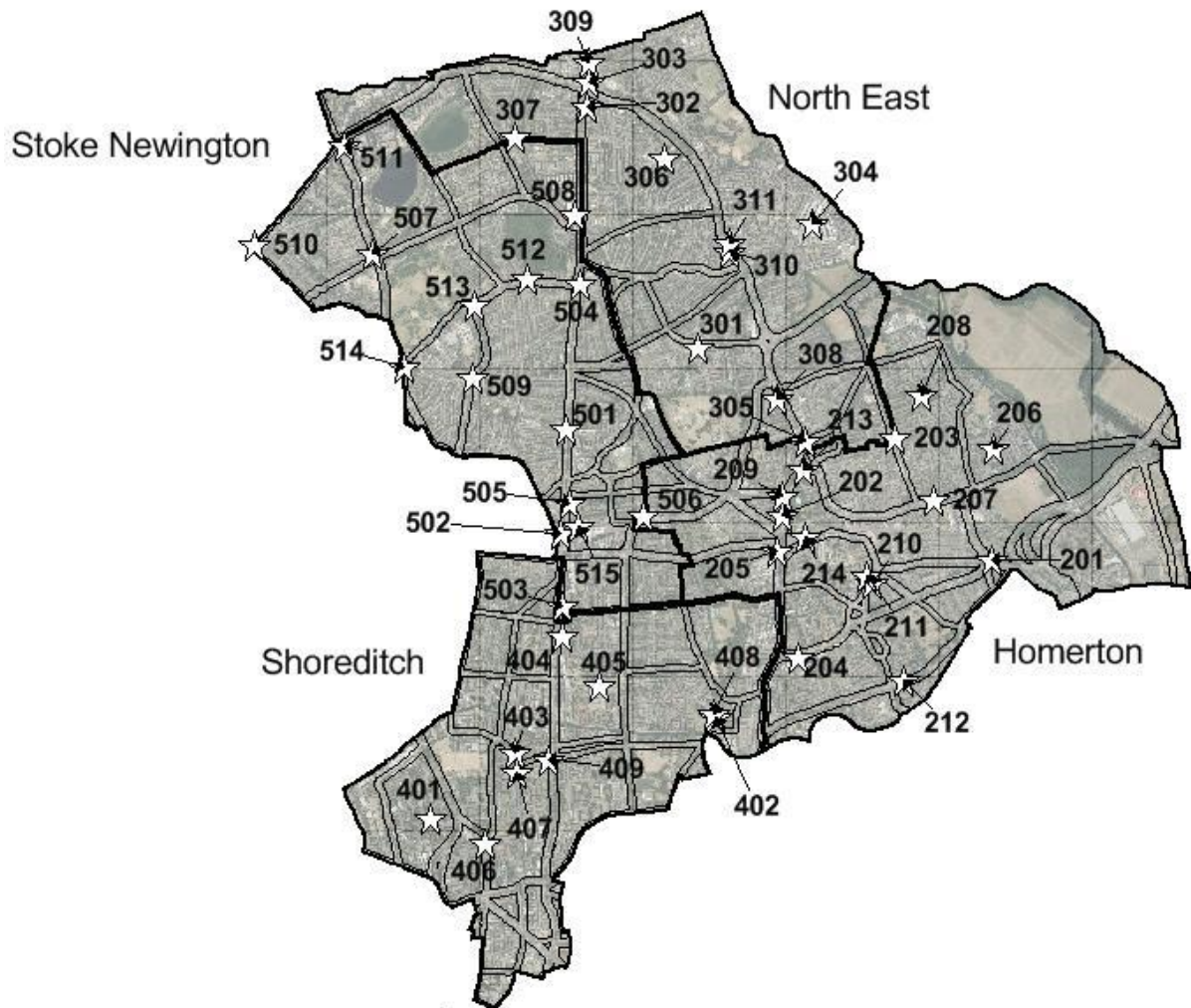
<i>Map ref</i>	<i>ODS code</i>	<i>Trading name</i>	<i>Address</i>	<i>Postcode</i>	<i>Locality in</i>	<i>Locality accessible to (within 0.25 miles of)</i>
201	FV223	Bee's Pharmacy	261 Wick Road	E9 5DG	Homerton	
202	FPQ52	Boots the Chemists	386-388 Mare Street	E8 1HR	Homerton	
203	FVG39	Regal Pharmacy	48-50 Chatsworth Road	E5 0LP	Homerton	North East
204	FG591	K Sonigra Chemist	44 Well Street	E9 7PX	Homerton	Shoreditch
205	FMH45	Carsil (Marijak Pharmacy)	317-319 Mare Street	E8 1EJ	Homerton	Shoreditch
206	FVX01	Silverfields Chemists	5 Kingsmead Way	E9 5QG	Homerton	
207	FDL21	Silverfields Chemists	141 Homerton High Street	E9 6AS	Homerton	
208	FR228	Kalpesh Chemist	199-201 Rushmore Road	E5 0HD	Homerton	North East
209	FM050	Clockwork Pharmacy	398-400 Mare Street	E8 1HP	Homerton	North East
210	FR127	Clockwork Pharmacy	236-238 Well Street	E9 6QT	Homerton	
211	FXG01	Clockwork Pharmacy	239 Well Street	E9 6RG	Homerton	
212	FNX01	Victoria Park Pharmacy	215-217 Victoria Park Road	E9 7HD	Homerton	
213	FJL58	Safedale Ltd	59 Lower Clapton Road	E5 0NS	Homerton	North East
214	FQV62	Tesco Instore Pharmacy	Morning Lane	E9 6ND	Homerton	

Table 56 **List of pharmacy contractors (cont.)**

<i>Map ref</i>	<i>ODS code</i>	<i>Trading name</i>	<i>Address</i>	<i>Postcode</i>	<i>Locality in</i>	<i>Locality accessible to (within 0.25 miles of)</i>
401	FD750	Murray's Chemist	96-98 Murray Grove	N1 7QP	Shoreditch	
402	FAK32	Clarks Chemist	68 Broadway Market	E8 4QJ	Shoreditch	Homerton
403	FNH97	Finstead (Hoxton) Ltd	209 Hoxton Street	N1 5LX	Shoreditch	
404	FH739	Kingsland Pharmacy	406 Kingsland Road	E8 4AA	Shoreditch	St. Newington
405	FQT86	Haggerston Pharmacy	228 Haggerston Road	E8 4HT	Shoreditch	
406	FKE26	Judd's Pharmacy	73 Pitfield Street	N1 6BT	Shoreditch	
407	FE438	Spring Pharmacy	233 Hoxton Street	N1 5LG	Shoreditch	
408	FJ119	Norlington Chemist Ltd	3 Broadway Market	E8 4PH	Shoreditch	Homerton
409	FN141	Unipharm Pharmacy	253 Kingsland Road	E2 8AN	Shoreditch	

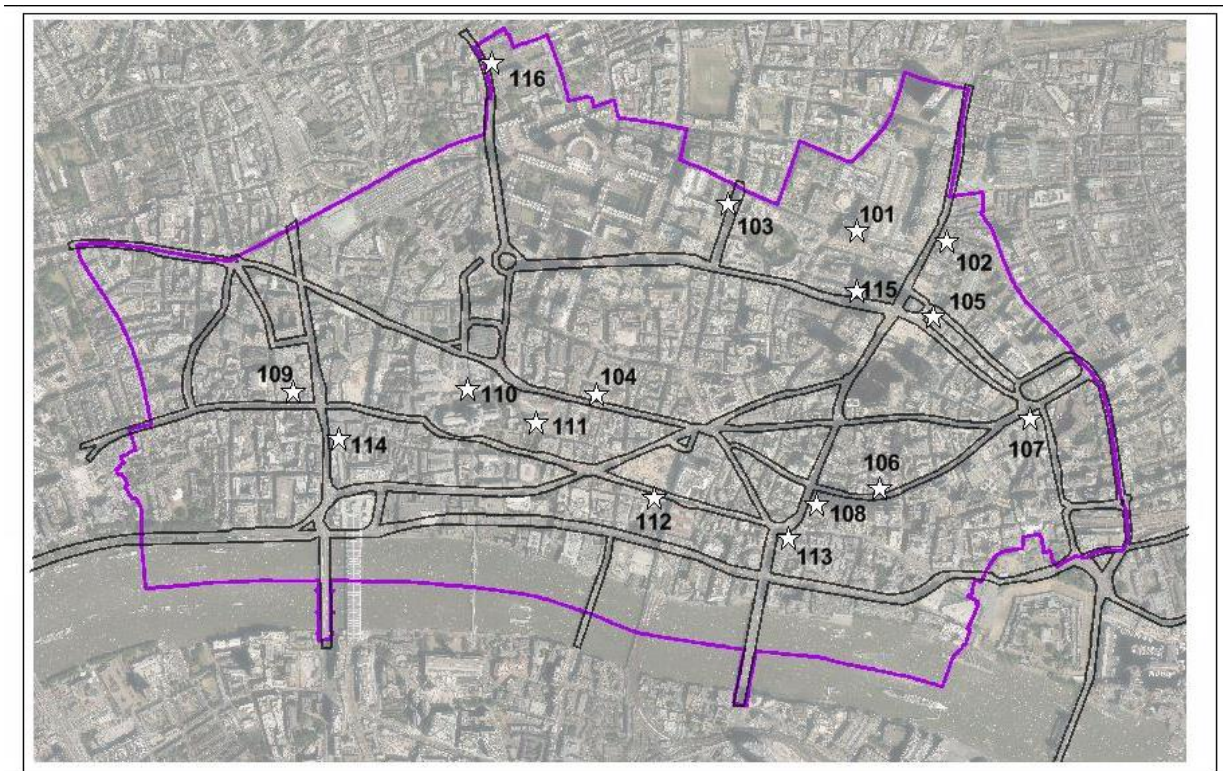
F. Maps of pharmacy contractors

Figure 59 Map of community pharmacies in Hackney



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Figure 60 **Map of community pharmacies in the City of London**



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G. Opening hours of pharmacy contractors

The following pages display the opening hours for each pharmacy in Hackney and the City of London. Each day of the week is displayed on a separate sheet.

The charts show core and supplementary opening hours, based on data provided by NHS England: core hours are marked in solid green; supplementary hours using diagonal stripes. The one remaining extended hours LPS contract will be terminated in March 2015 (before the planned publication date for the PNA) and so these hours have not been included.

For each locality, the earliest and latest daily GP practice opening hours are indicated by two solid vertical lines, in order to easily compare pharmacy and GP opening times. Pharmacies open earlier or later than local GP practices are identified by the opening hours bars overlapping the solid vertical lines.

Monday: Hackney

		05:00	06:00	07:00	08:00	09:00	10:00	11:00	12:00	13:00	14:00	15:00	16:00	17:00	18:00	19:00	20:00	21:00	22:00	23:00	00:00
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Monday: City

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Tuesday: Hackney

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Wednesday: Hackney

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Wednesday: City

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Thursday: Hackney

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