

# Leicester City Council Pharmaceutical Needs Assessment 2018

## Appendix 3: Pharmacy questionnaire for local professionals, 2018

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

There were 37 responses in Leicester out of 86 pharmacies (43%).

The main findings are summarised below, and full responses charted at the end of the document.

### Consultations:

The majority of pharmacies have a consultation area, generally in a closed room that meets the criteria for a medicines use review service. Over 90% of the reported consultation areas are accessible to wheelchair users, around half contain handwashing facilities and access to a toilet.

Of those pharmacies planning a consultation area within the next 12 months, all were planned within a closed room with wheelchair access, and two thirds planned to include handwashing facilities.

The average number of consultations per week in a consultation room were between 0-25 for 60% of pharmacies and between 25-50 consultations for nearly 30%.

No pharmacies had access to an offsite consultation area, but around two thirds were willing to undertake consultations at the patient's home or another suitable site.

Nearly three quarters of pharmacies reported consultation areas adaptable for patients with physical disabilities, two-thirds adaptable for patients with learning disabilities or with mental ill health and over 50% had sensory adaptations.

### Languages:

Eleven languages in addition to English were reported as being spoken in the responding pharmacies across Leicester. Gujarati is the most common (97%), followed by Panjabi (70%) and Urdu (60%).

Additional languages are available for an average of 80% of opening hours for pharmacies with Gujarati-speaking staff, and an average of 70% of opening hours in pharmacies with staff speaking Panjabi and Urdu.

Over 70% of pharmacies reported over 20 visits in the last year by patients not speaking English and the remaining pharmacies had at least 1 visit from a non-English speaking patient. The majority of pharmacies are able to serve patients through staff speaking their language, otherwise staff will ask the patient to re-attend with a friend/family member to interpret, translate on mobile phones/google or use the language service.

#### IT facilities:

All pharmacies use the electronic prescription service, over 90% use summary care records and nearly 70% have a secure nhs.net email.

#### Staffing:

Pharmacies most commonly have Medicines Counter Assistants (average of 3 full time equivalents FTE), Dispensers (average 3 FTE), Community Pharmacists (2 FTE), Accredited Pharmacy Technicians (1 FTE) and Accuracy Checking Technicians (1 FTE).

Locums are used by nearly 70% of pharmacies, who make up an average of 0.8 FTE Medicines Counter Assistants, 0.7 FTE Dispensers, 0.5 FTE Community pharmacists, 0.2 FTE Accredited Pharmacy Technicians and 0.1 FTE Accuracy Checking Technicians. Locums are reported as being used in hard-to-fill vacancies in a quarter of the pharmacies using locums.

#### Service provision:

##### Essential Services:

All pharmacies provide essential services (Clinical governance, dispensing of medicines, dispensing of appliances, disposal of unwanted medicines, repeat dispensing, signposting and support for self-care).

##### Advanced Services:

The majority of pharmacies provide Medicines use Reviews (95%), New Medicines Service (92%) and the flu vaccination service (70%). A quarter provide Appliance Use Reviews and NHS Urgent Medicine Supply Advanced Service (NUMSAS).

##### Other Services:

These are shown as services commissioned by NHS-England, Local Authority and Clinical Commissioning Group (CCG). Additionally there are non-NHS funded services. Detailed responses are provided at the end of the report with main findings below.

##### NHS-England commissioned services:

The most commonly provided services are medication review service (80% of pharmacies), home delivery services (66%) and supervised administration service (63%).

In terms of services pharmacies would be willing to provide, around 30% reported willingness for gluten free food supply, anticoagulant monitoring service and chlamydia screening service.

Local Authority-commissioned services:

Supervised consumption, emergency hormonal contraception and stop smoking services are the most common services offered. Contraceptive services, sexual health screening services, alcohol screening and NHS Health checks are the top services pharmacies would be willing to provide.

CCG-commissioned services:

Minor ailments service is the most common service available, with a willingness to provide palliative care, medicines use review plus and a phlebotomy service.

Non-NHS commissioned services:

Emergency contraception, H.Pylori screening and diabetes services are most widely offered, with a willingness to provide services including hayfever, champix, HbA1C and weight loss among others.

Non-NHS funded services:

The majority of pharmacies provide collection of prescriptions from GP practices, delivery of medicines and blood pressure monitoring. Additional services pharmacies are willing to provide include brief advice on lifestyle, signposting and referrals to lifestyle services.

[Healthy Living Pharmacies:](#)

Nearly 30% of respondents are accredited Healthy Living Pharmacies (HLP), half accredited to level 1 and half to level 2. Half the responding pharmacies reported working towards HLP status.

In terms of qualifications, staff have achieved Royal Society for Public Health (RSPH) HLP levels 1 and 2, Leadership training levels 1-3 and Health Champion training.

[Equality Act 2010:](#)

All pharmacies are compliant with the Equality Act 2010. Over 85% of pharmacies reported provision of monitored dosage systems for patients not covered by the Equality Act 2010.

[Services identified as most important:](#)

Medicines Use Reviews were the services identified as most important by three-quarters of pharmacies, followed by New Medicines Service and dispensing. Other services included home delivery and monitored dosage systems.

### Current provision of pharmaceutical services within the area:

Pharmaceutical service provision within the local area was described as excellent by around 60% of pharmacies for the number of pharmacies and location of pharmacies. For the range of services offered, 40% described as excellent and a further 35% as good; less than 5% regarded the range of services as poor or very poor. Reasons for poor provision included:

- Not enough commissioned services for pharmacies by local or national government
- My pharmacy is 100 hour pharmacy and is not allowed to provide minor ailment service despite high demand in the area and being the only pharmacy who opens 7 days a week and long hours
- EHC service not easily accessible
- Too many pharmacies concentrated in some locations

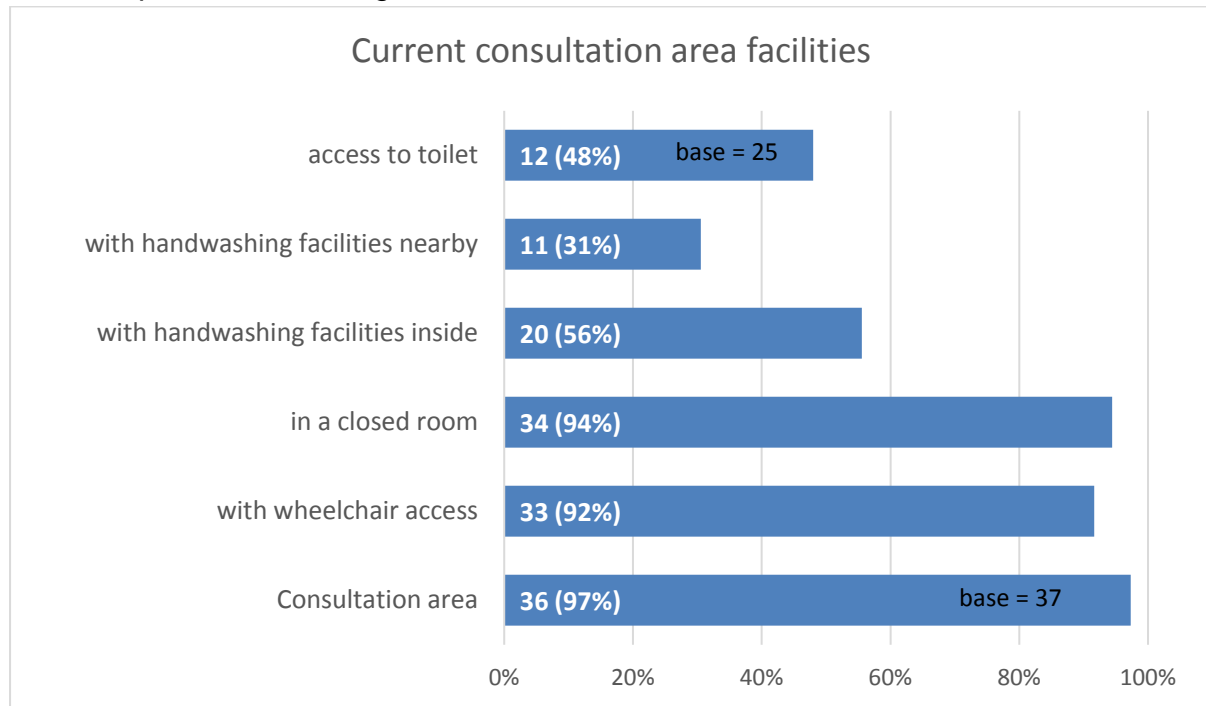
### Survey responses:

There were 37 responses in Leicester out of 86 pharmacies (43%).

Q3. Is there a consultation area on the premises (that meets the criteria for the Medicines Use Review Service)?

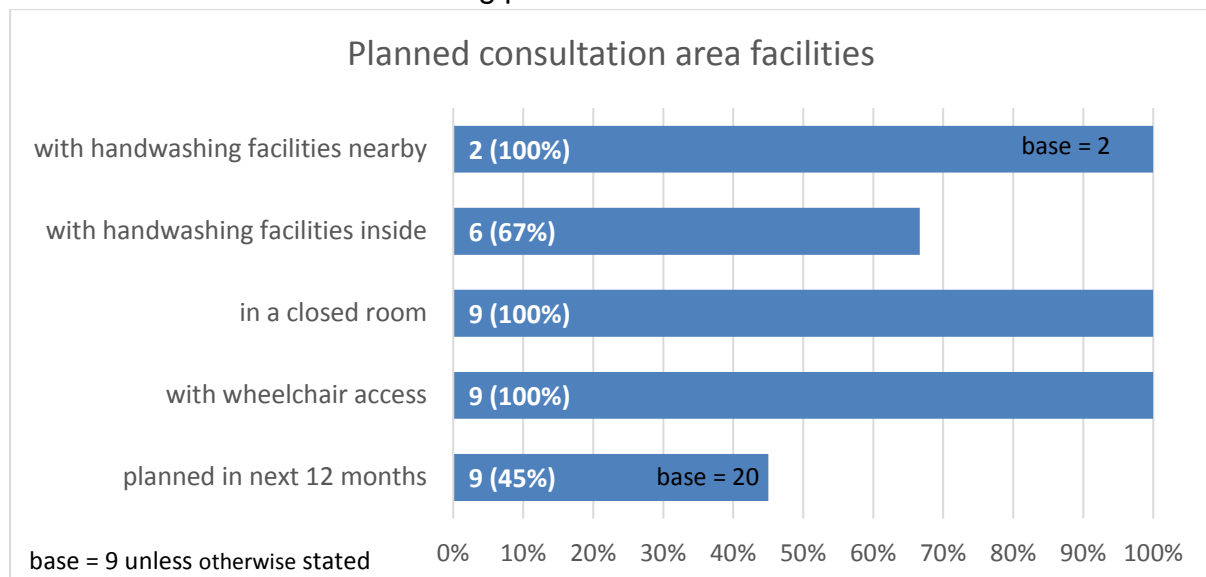
Q4. If there is a consultation area on the premises...

Q10. Do patients attending for consultation have access to toilet facilities?

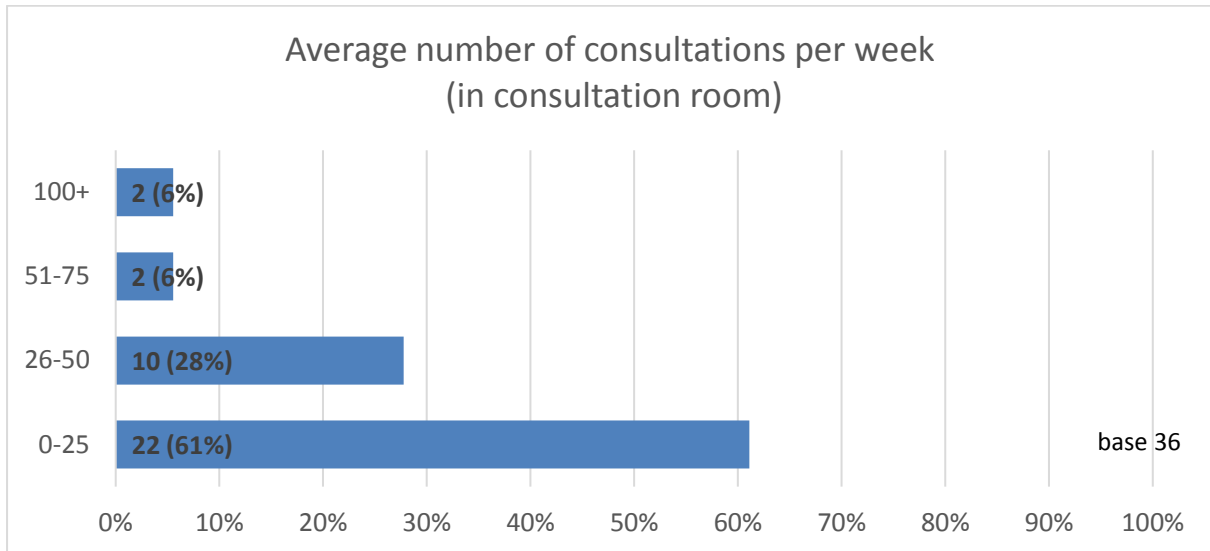


Q5. Are you planning to provide a consultation area within the next 12 months?

Q6. If a consultation area is being planned...

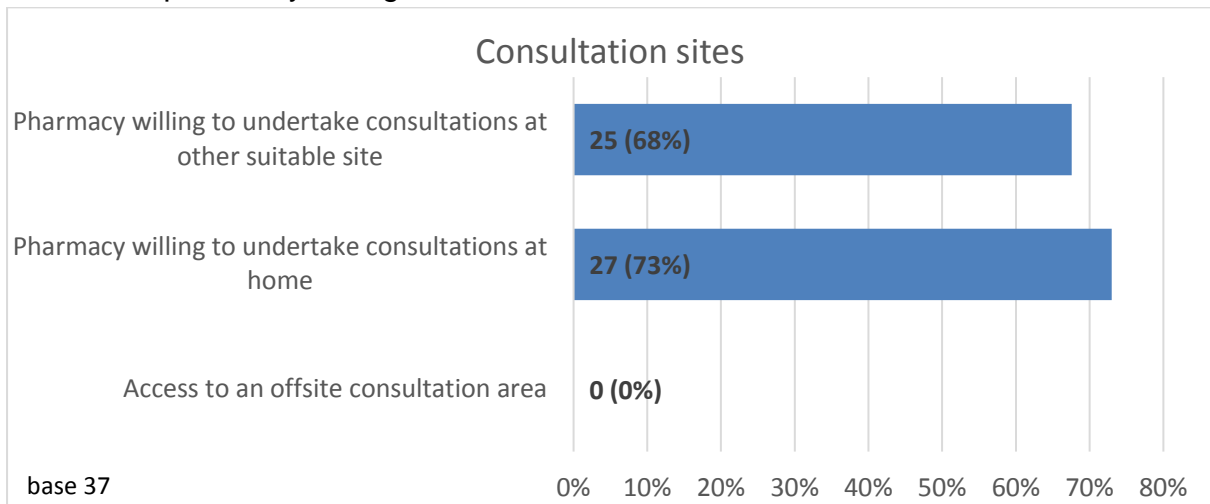


Q7. How many consultations would you see in the consultation room in an average week?

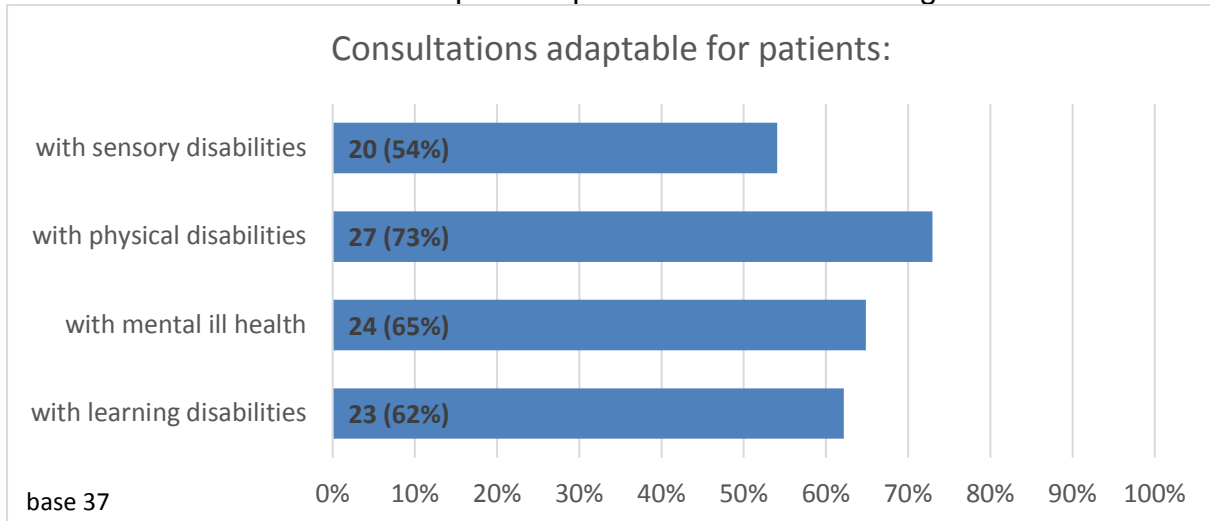


Q8. Does the pharmacy have access to an off-site consultation area (i.e. one which the former Primary Care Trust or Area Team has given consent for use)?

Q9. Is the pharmacy willing to undertake consultations in...?



Q11. Can consultations be adapted for patients with the following disabilities?



Q12. If consultations can be adapted for disabilities, what adaptations do you make?

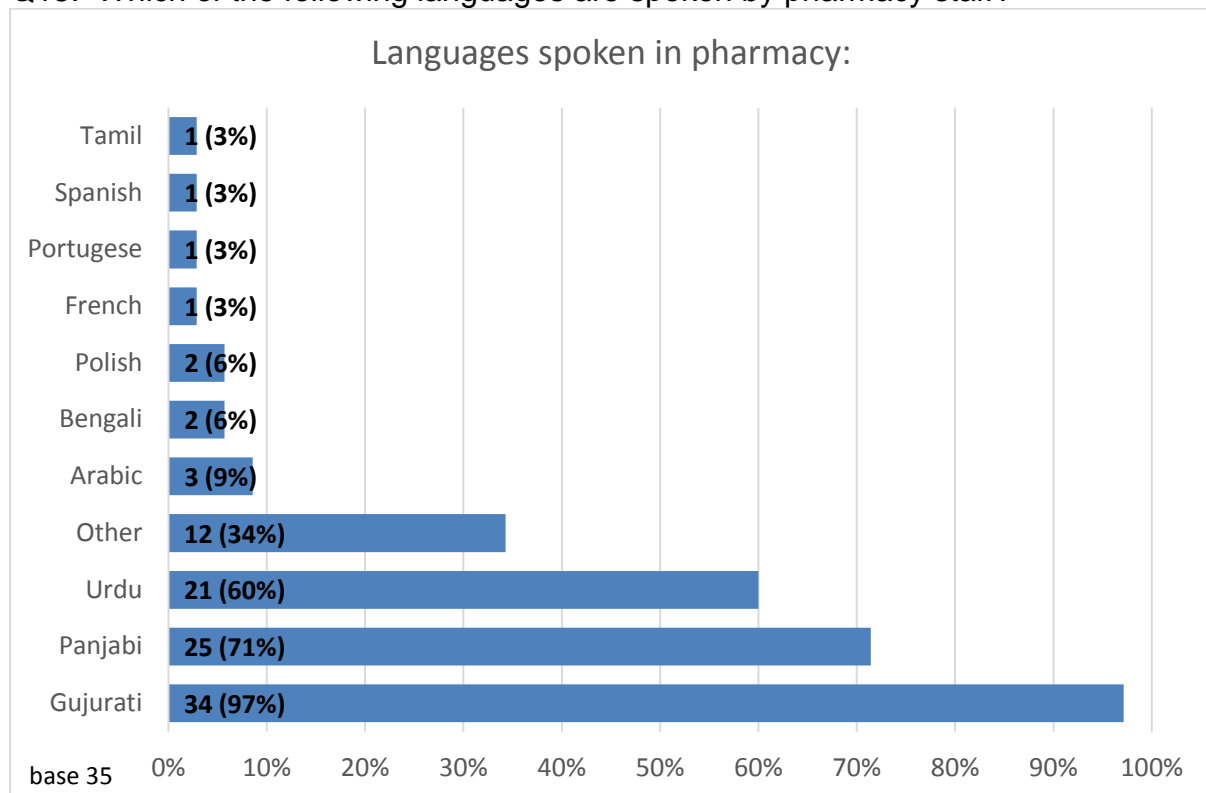
Responses included:

- Accommodate so that a carer or responsible person can be present.
- Brail for blind, sign language for deaf and any necessary adaptation needed for the situation.
- Easy Access to pharmacy and consultation room
- Extra seating, extra supervision if required
- Give more time, be more understanding
- Have the hearing loop microphone in the consultation room. Access for wheelchair users. Chaperone policy up on the wall.
- Head Office will arrange if adaptations needed
- Install a hearing loop
- Mental Health - speak in language they can understand, and repeat information. Also convey spoken and written information to carer. Learning disabilities – speak directly to patient and simple, clear language, using pictures if appropriate. Physical disabilities - wheelchair access, seating available, grab rail for support. Sensory disabilities - use hand gestures and sign language for visually impaired patients. Speak louder, raise pitch of voice for people with hearing impairment.
- None needed so far, but should the need arise we would be willing to make the necessary adaptations
- Not had to make any adaptations to date
- Permanent ramp
- Pharmacist would use discretion and adapt accordingly
- Room can be rearranged to open up floor space, lighting can be adjusted
- Sitting the patient, giving them writing material to help discuss their issue, listening carefully, looking up resources, signposting
- Trained staff, easy access, use of consultation room, one to one or

accompanied interviews, use of internet e.g. we recently had an a lady call with dementia who had been given an inhaler, we showed her and the carer the you tube video and asked her to repeat the action on a placebo inhaler

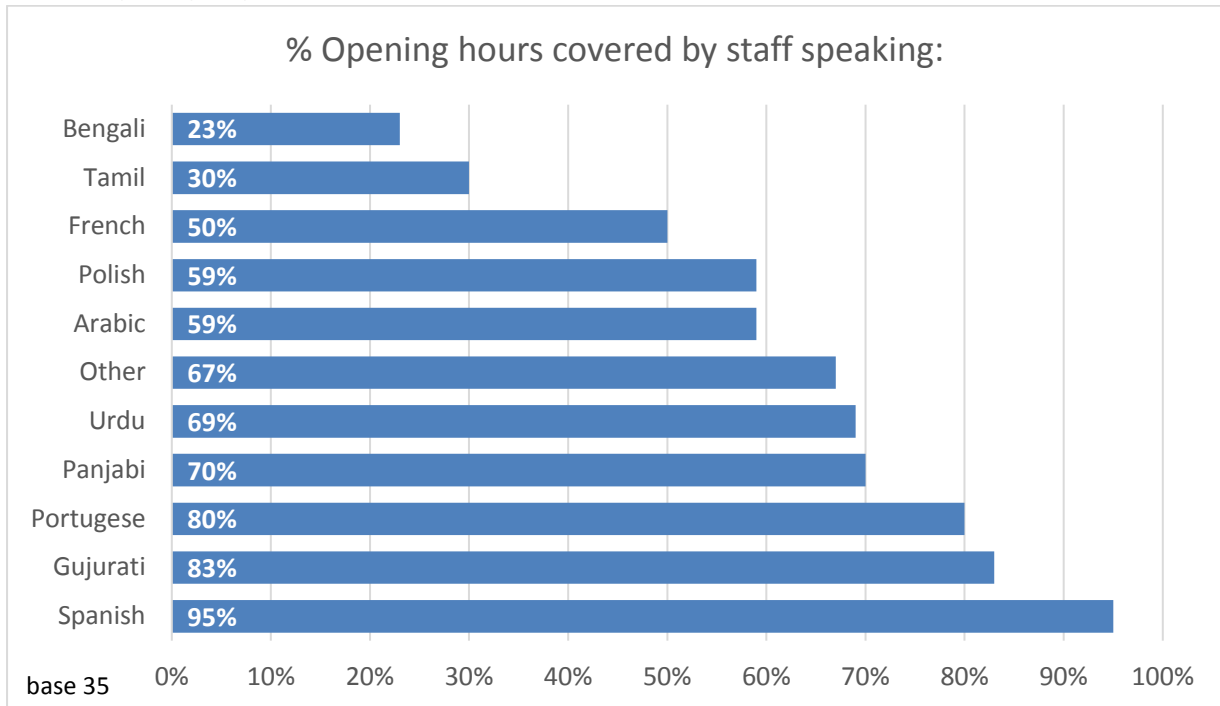
- We had specialist firm to plan and fit the consultation area
- We have a dedicated consultation area. There is sufficient room and access for patients with physical disabilities to enter the room with assistance (eg: wheelchair, crutches, walking aids). The area is in a quiet environment allowing for confidential discussions regarding mental health issues. Although there is a desk in the room, there is enough room for the pharmacist to sit with the patient to help with any hearing difficulties.
- We try to improve access in the pharmacy, adapt language and increase time available for these consultations

Q13. Which of the following languages are spoken by pharmacy staff?

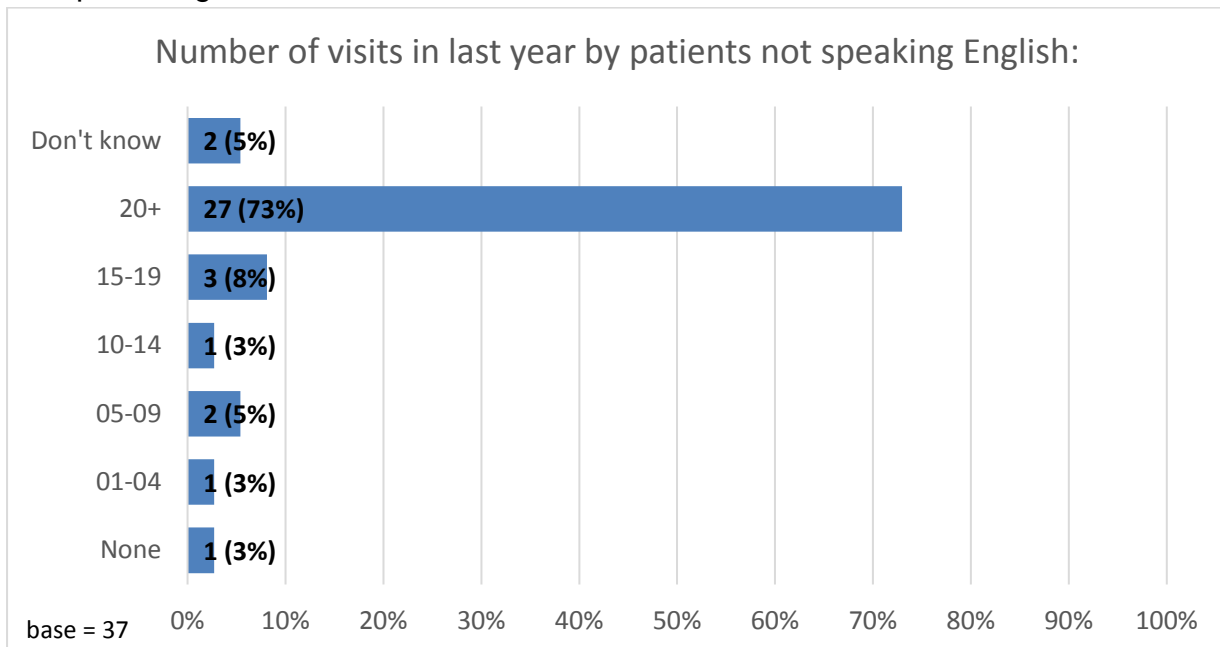




Q14. What percentage of your opening hours is covered by staff who speak the following languages?

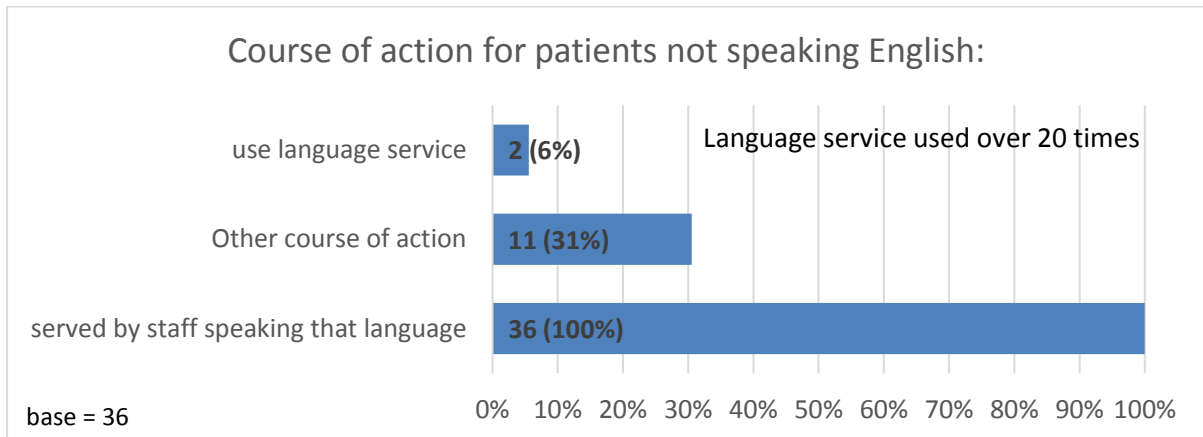


Q16. In the past year, approximately how many visits have been by patients who do not speak English?



Q17. If a patient who is unable to speak English attends the pharmacy, what is the usual course of action?

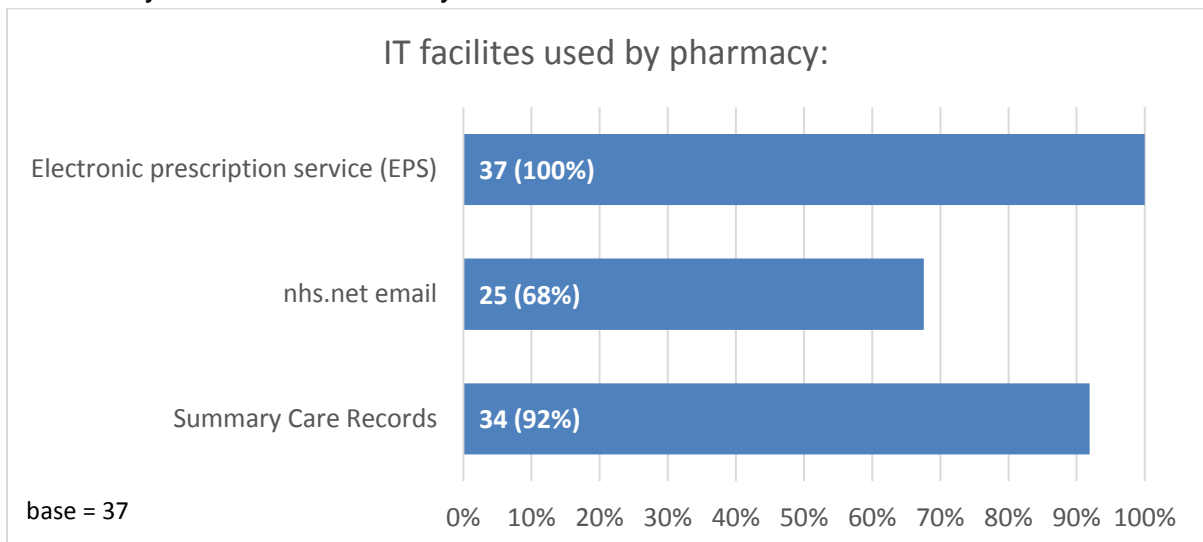
Q18. How many times have you used the language service over the last 12 months?  
Two pharmacies reported using the language service and one pharmacy had used it over 20 times within the last 12 months



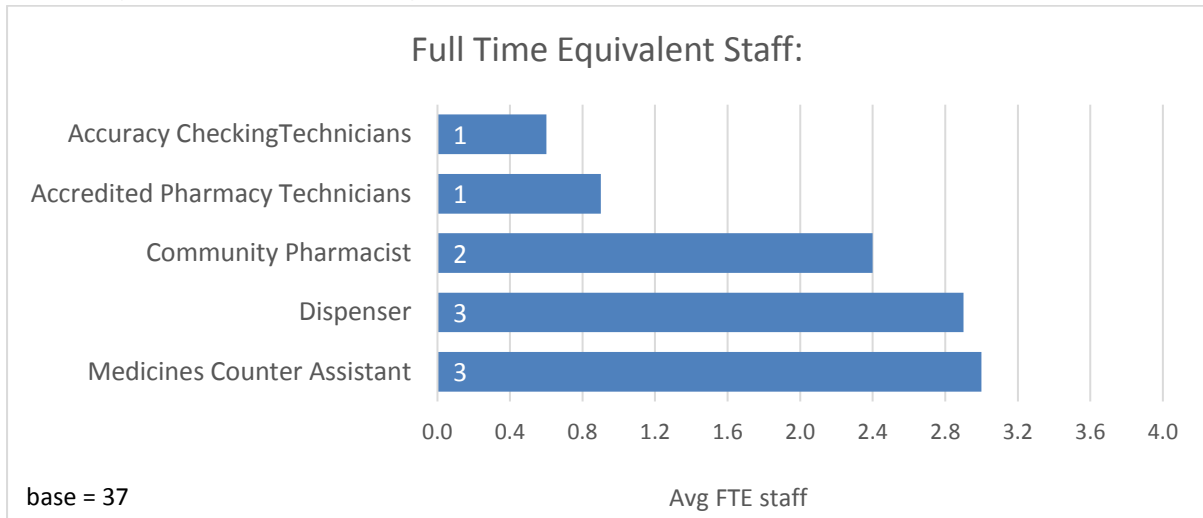
Q19. Which of the following IT facilities does the pharmacy have?

Q20. Do you intend to become enabled for the Electronic Prescription Service in the next 12 months?

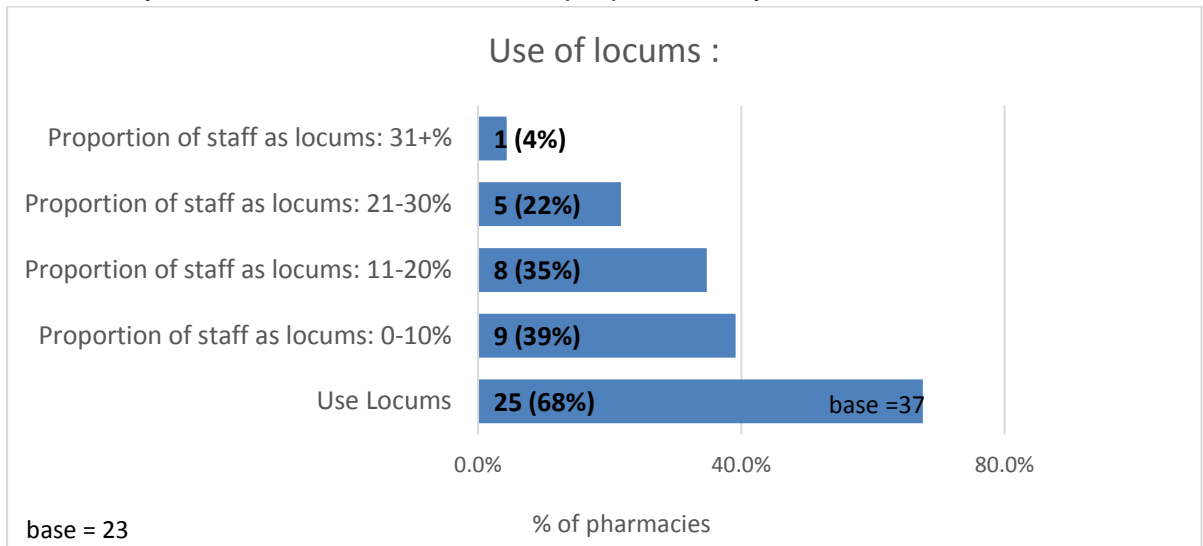
Q21. Do you use the Summary Care Records?



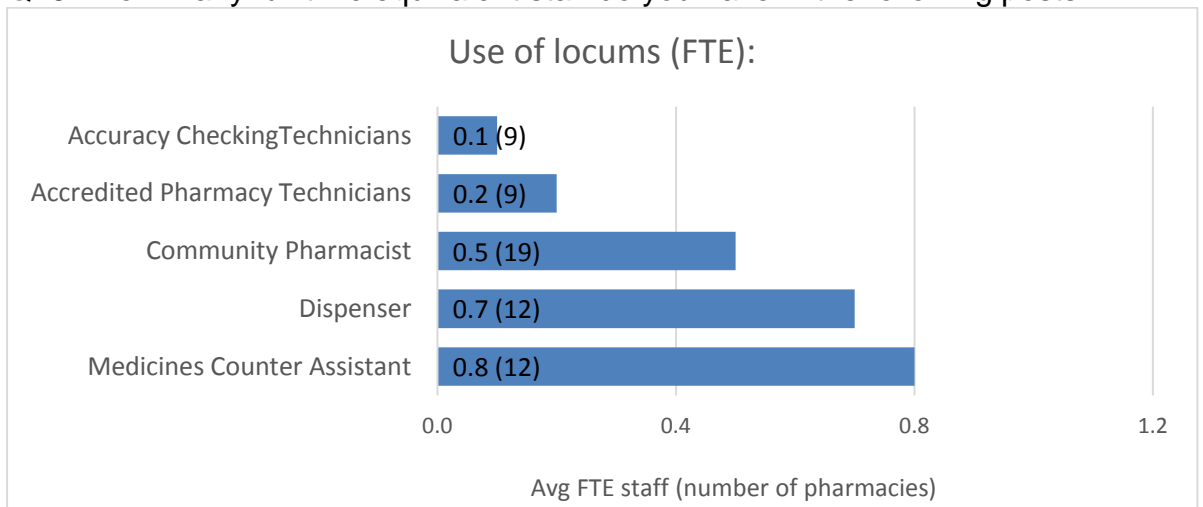
Q22. How many Full Time Equivalent staff (37.5 hours per week) do you have in the following positions (excluding locums)?



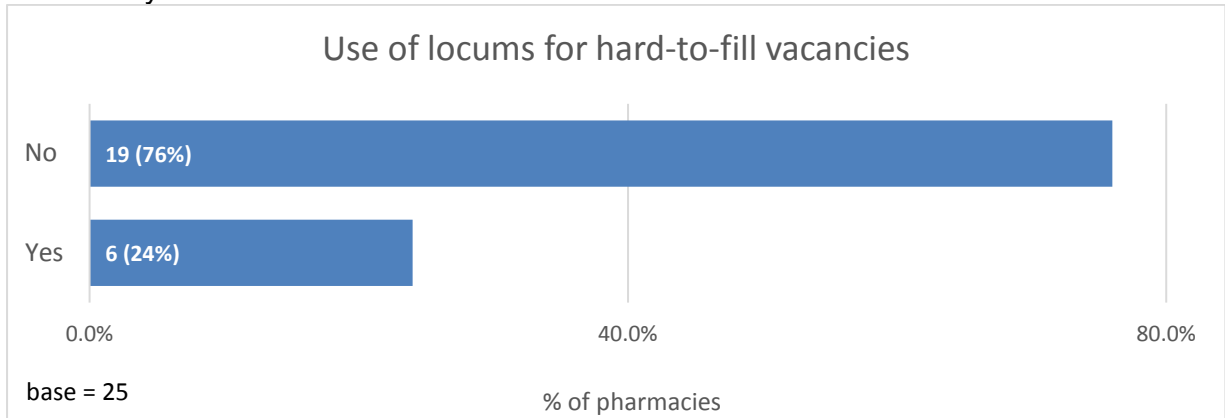
Q24. Do you use locums? Q25. What proportion of your staff are locums?



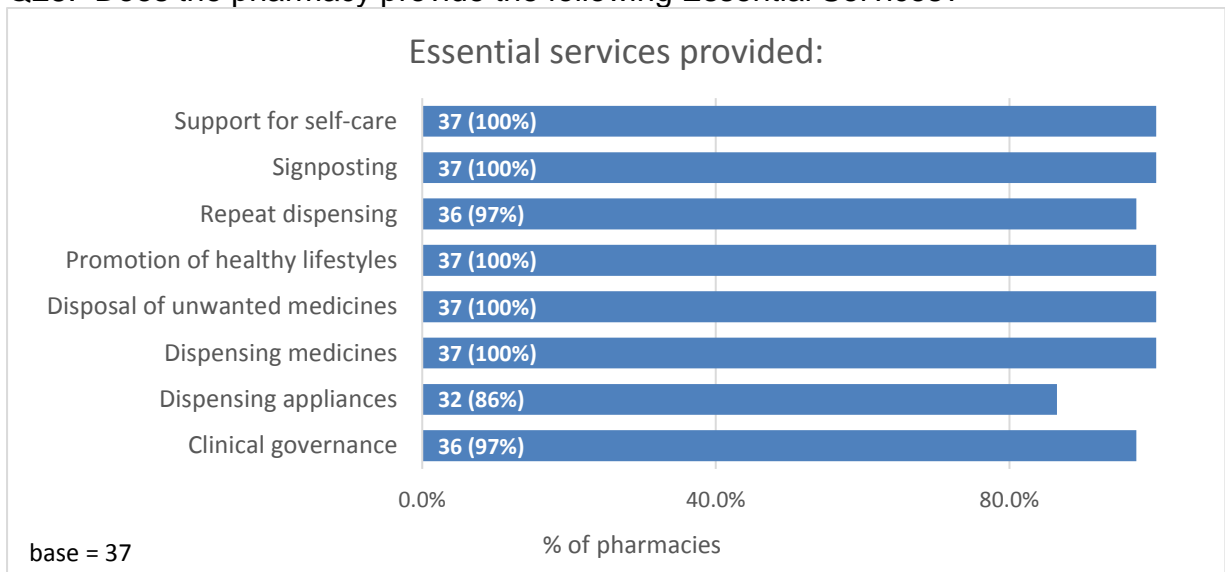
Q26. How many full time equivalent staff do you have in the following posts?



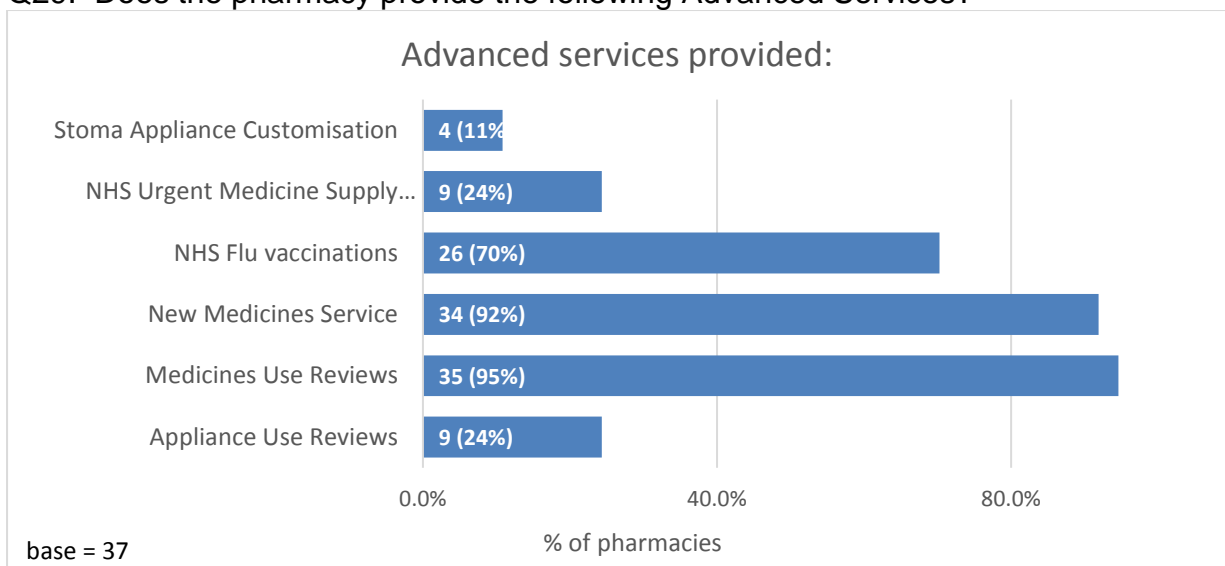
Q27. Do you use locums for hard to fill vacancies?



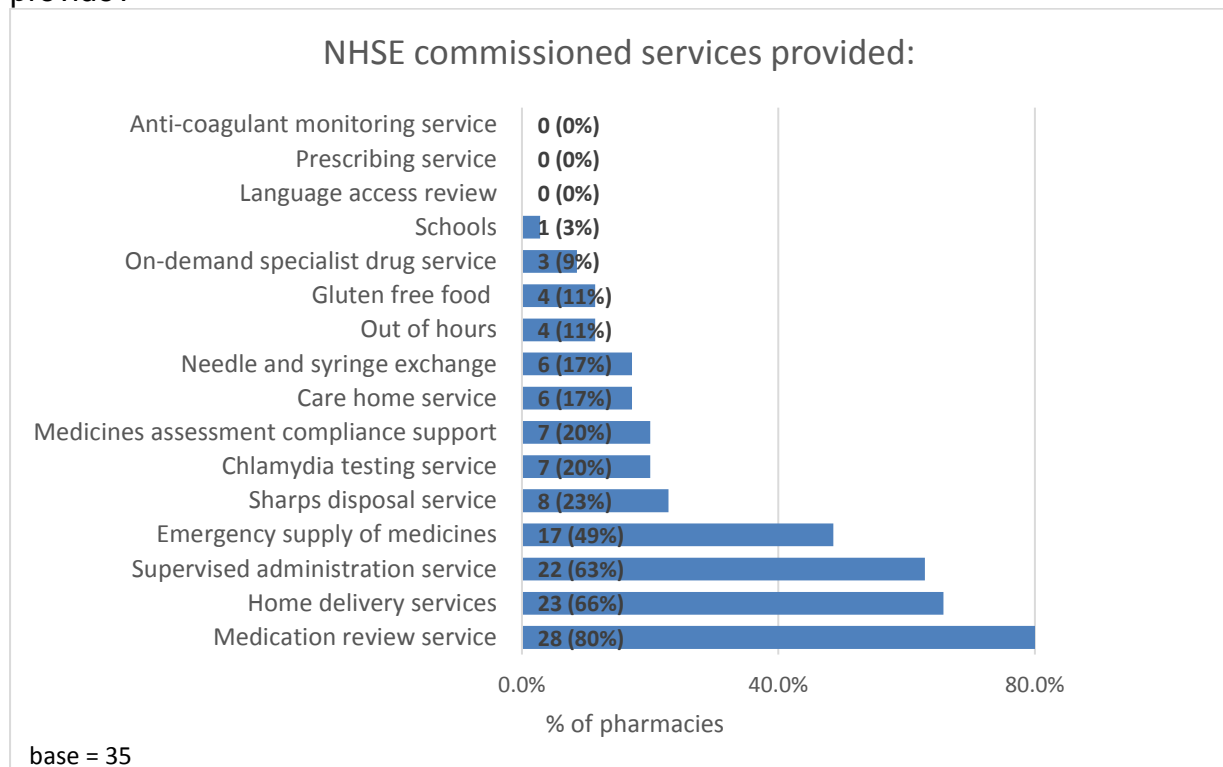
Q28. Does the pharmacy provide the following Essential Services?



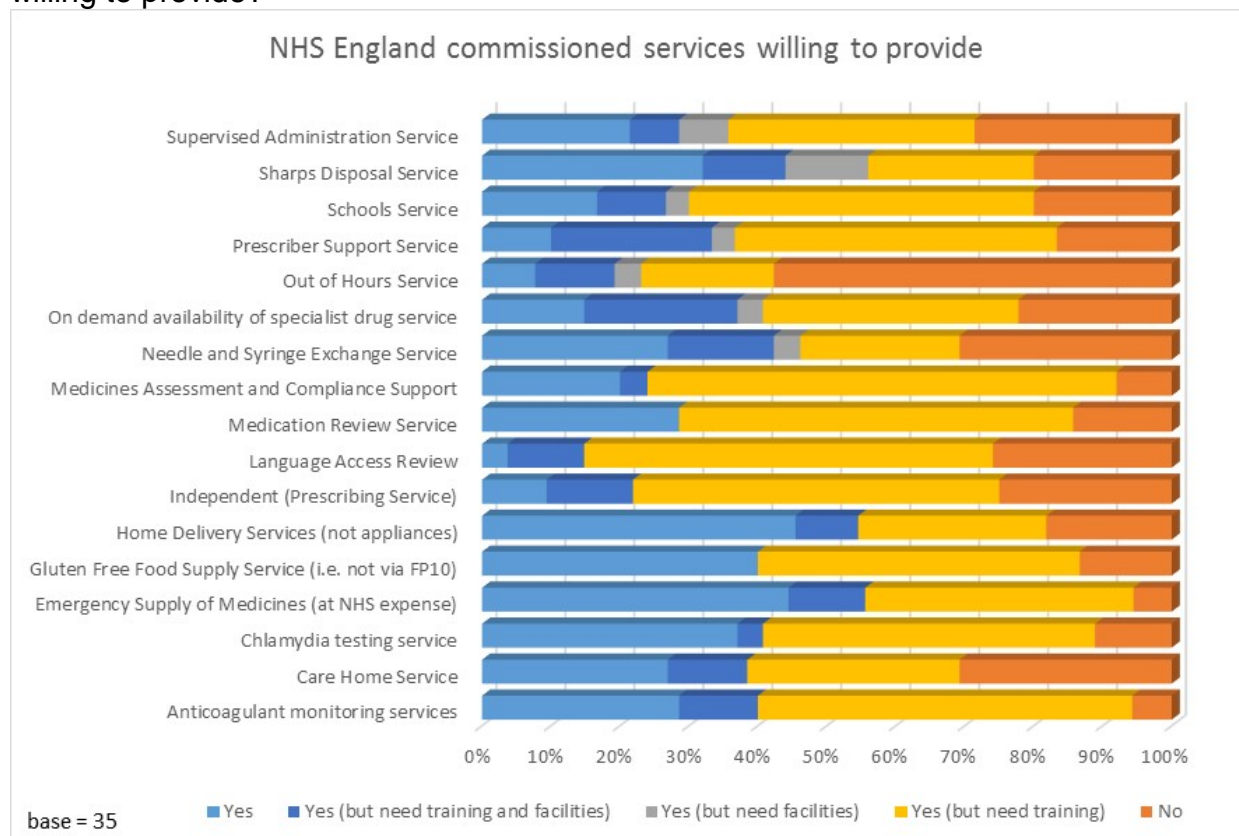
Q29. Does the pharmacy provide the following Advanced Services?



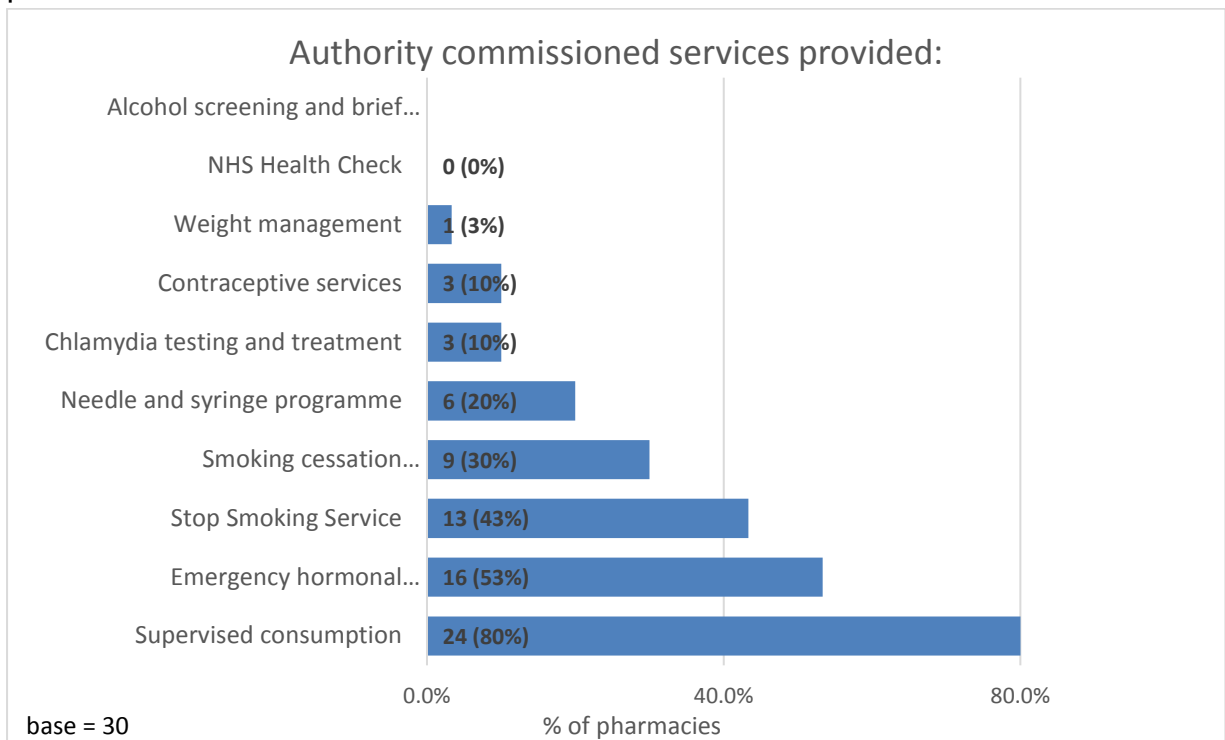
Q30. Which of the following NHS England commissioned services do you currently provide?



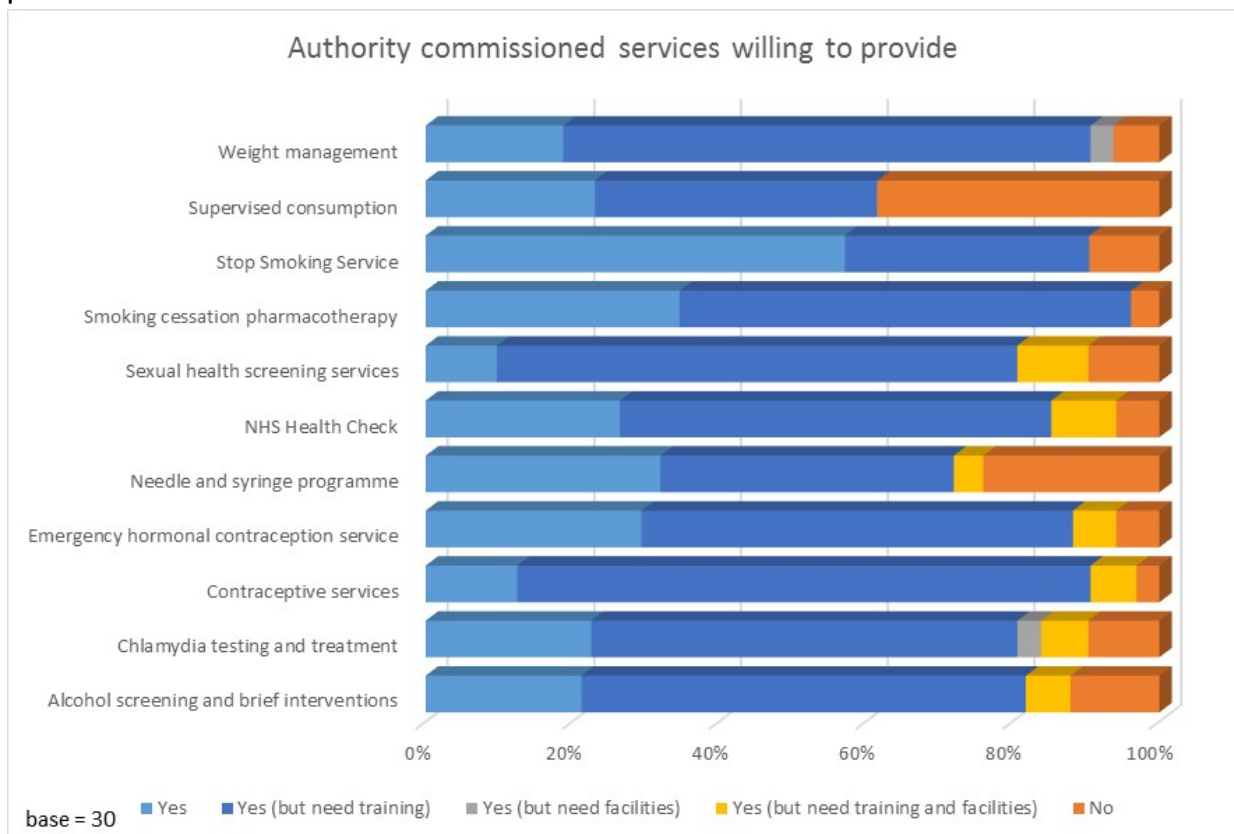
Q31. Which of the following NHS England commissioned service would you be willing to provide?



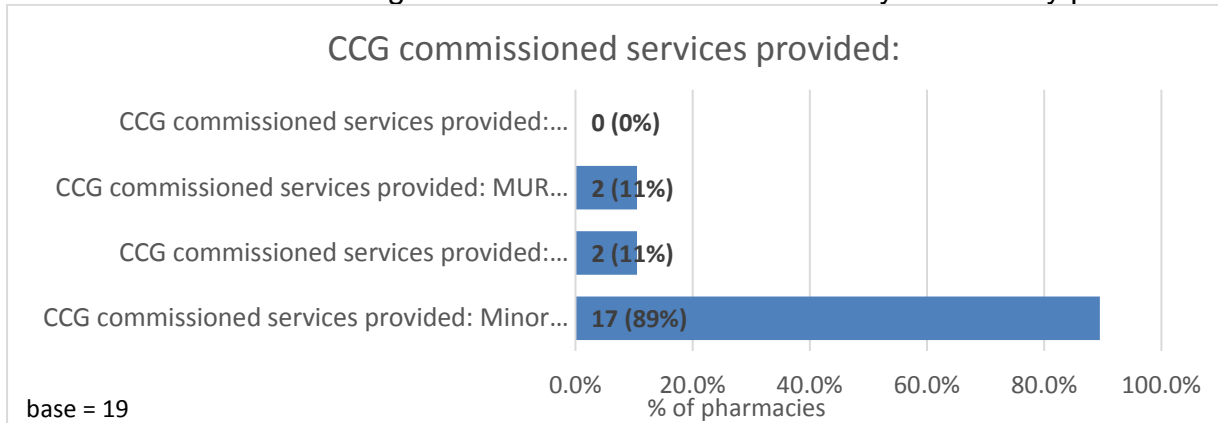
Q32. Which of the following Local Authority commissioned services do you currently provide?



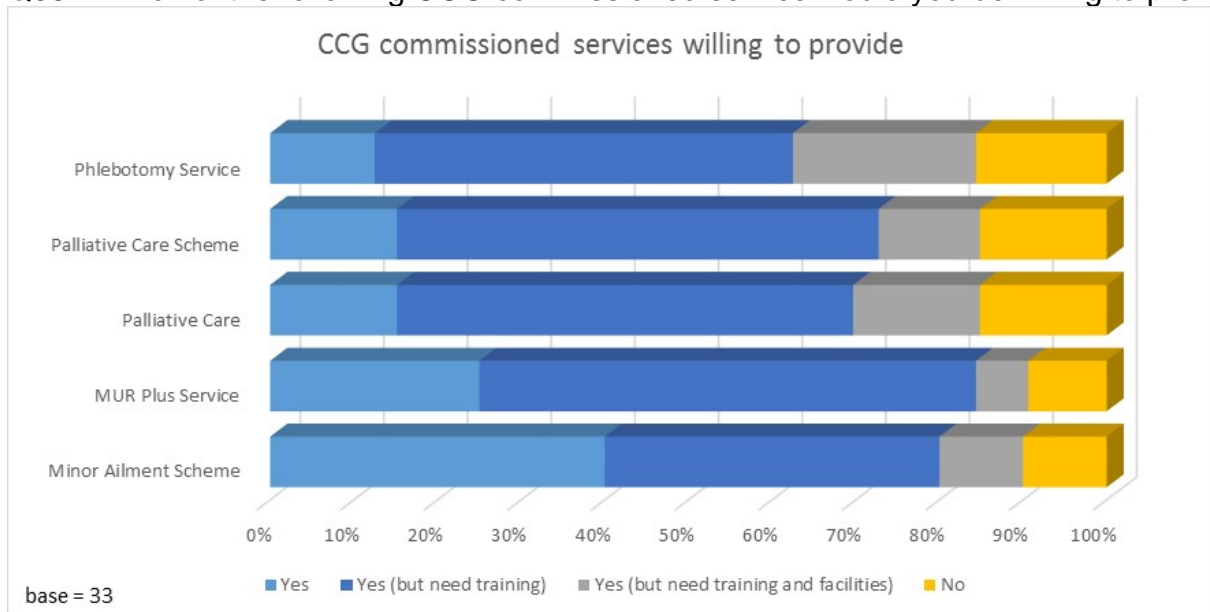
Q33. Which of the following Local Authority commissioned service would you be willing to provide?



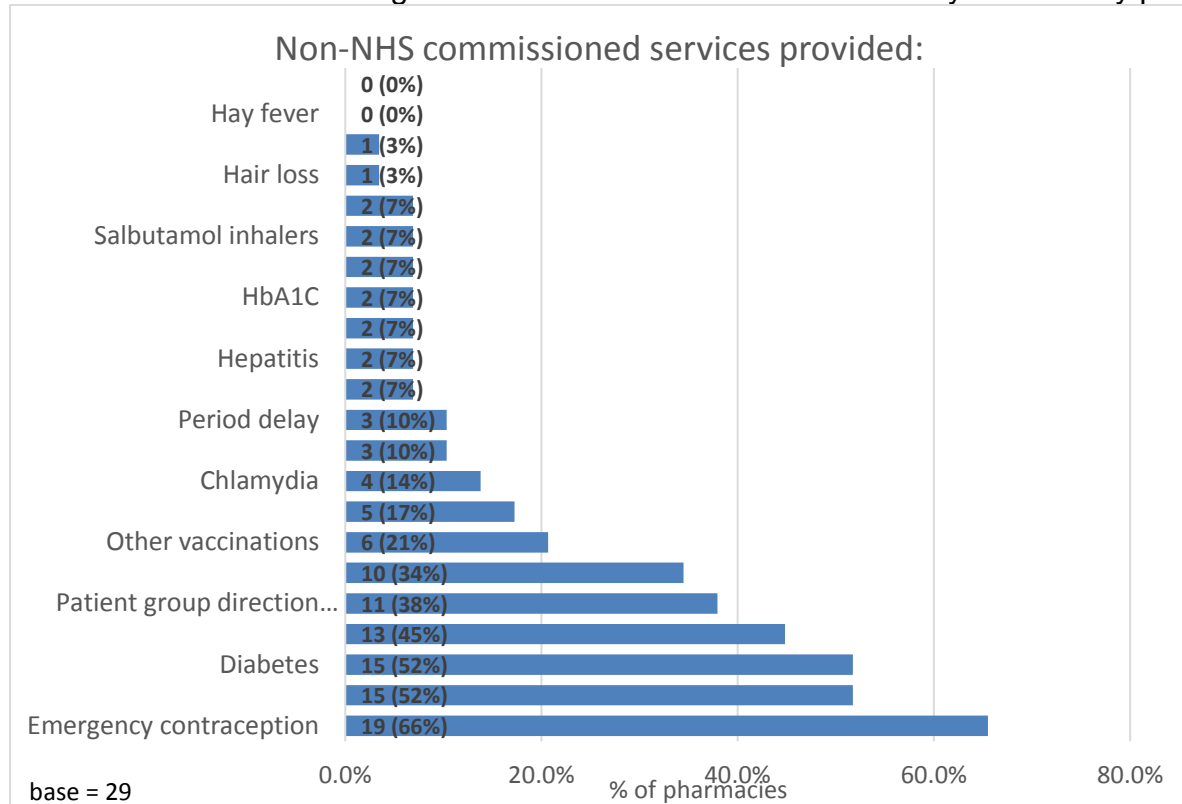
Q34. Which of the following CCG commissioned services do you currently provide?



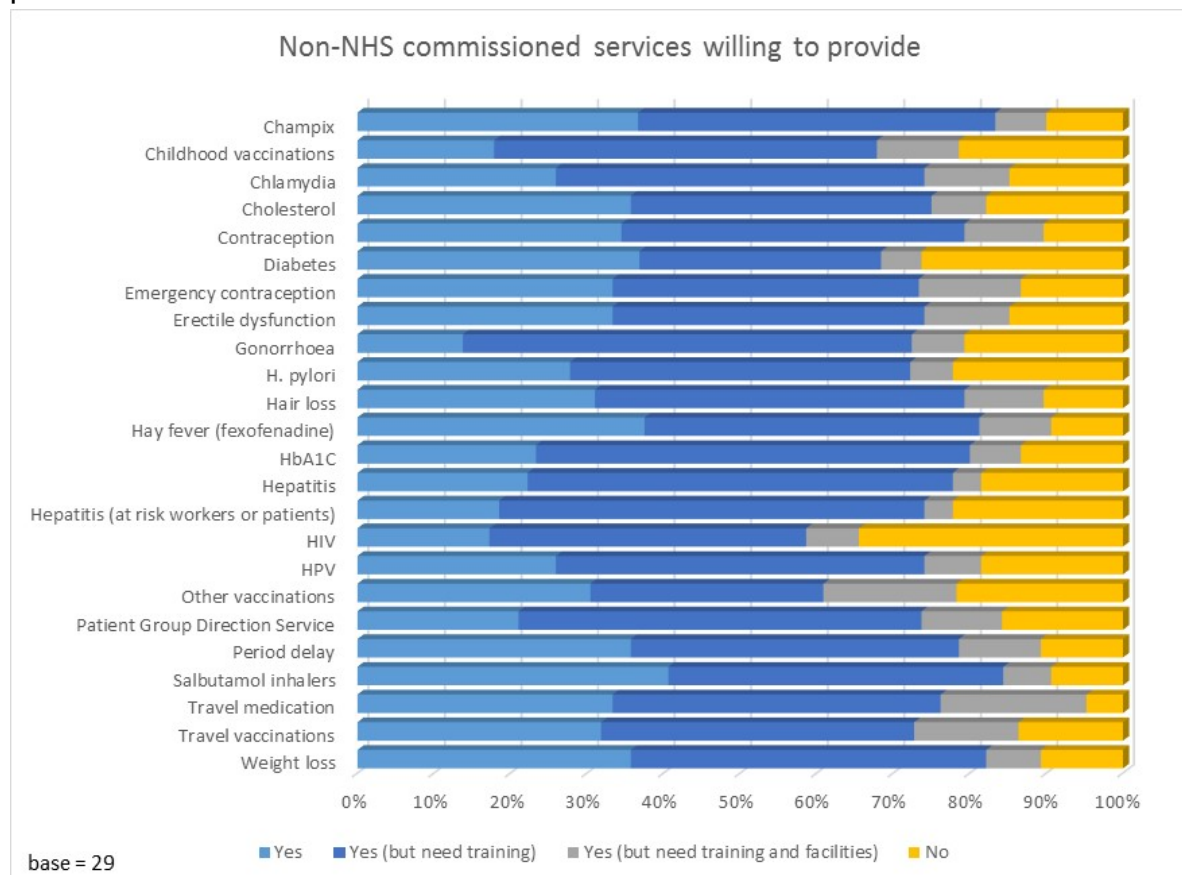
Q35. Which of the following CCG commissioned service would you be willing to provide?



Q36. Which of the following Non-NHS commissioned services do you currently provide?

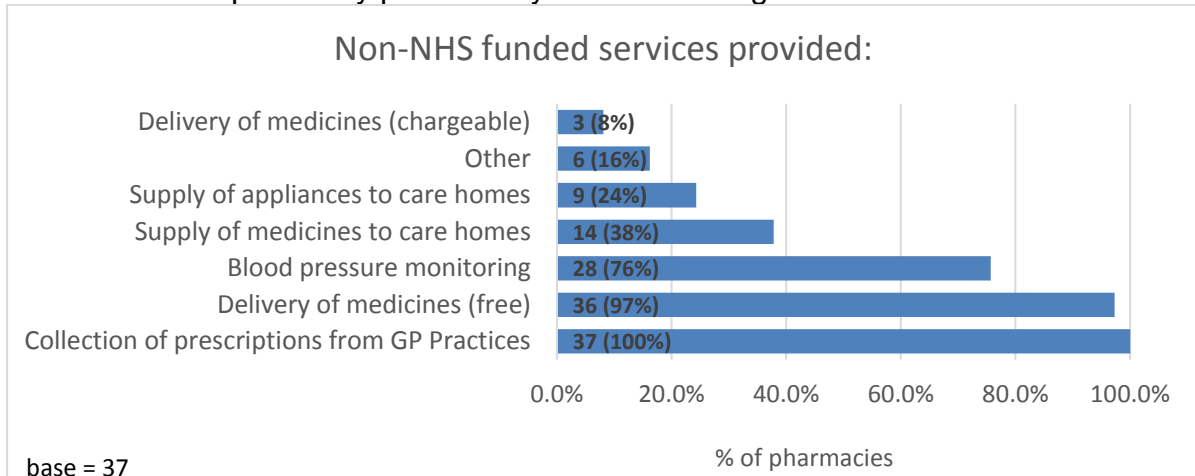


Q37. Which of the following Non-NHS commissioned service would you be willing to provide?



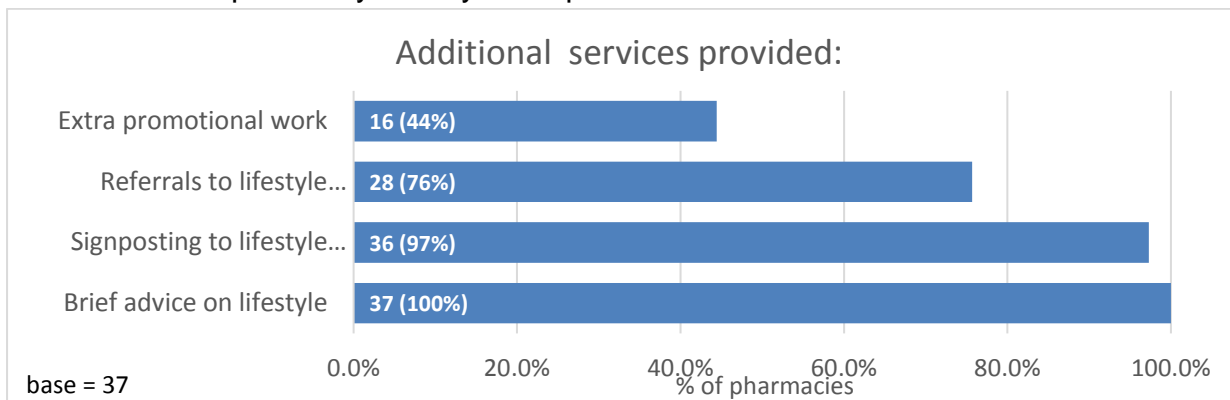


Q38. Does the pharmacy provide any of the following Non-NHS funded services?



Q39. Does the pharmacy provide any of the following...?

Q40. Does the pharmacy do any extra promotional work?

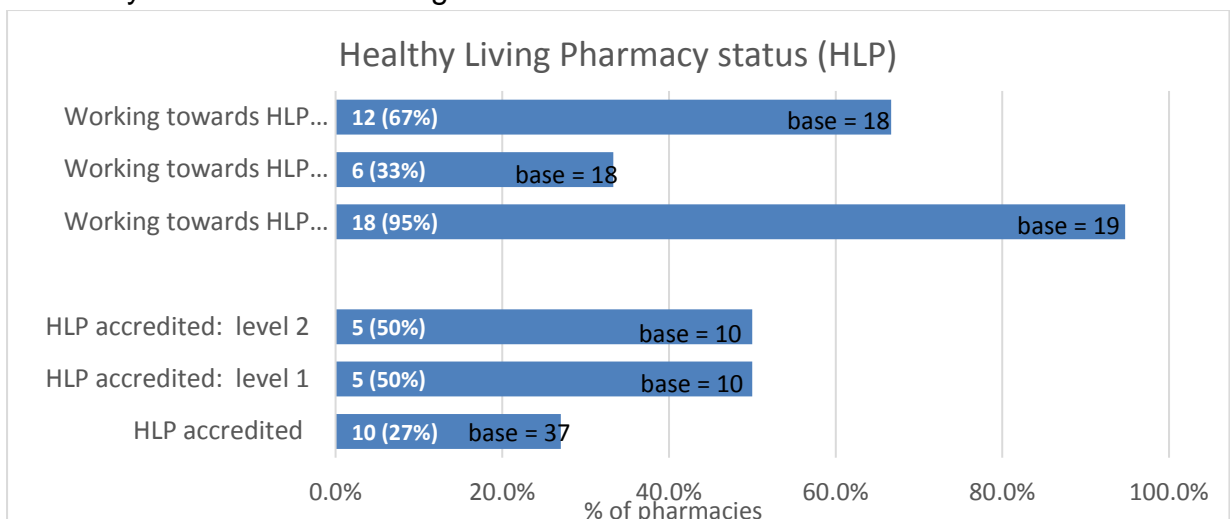


Q41. Do you have Healthy Living Pharmacy (HLP) status?

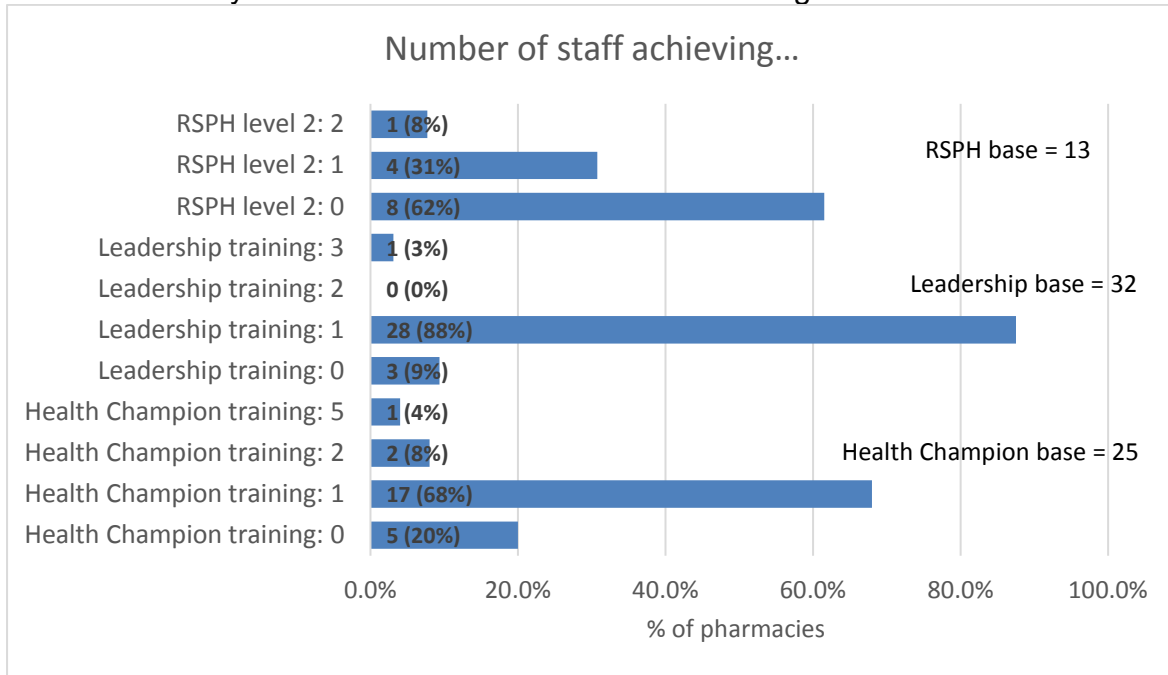
Q42. If the pharmacy has Healthy Living Pharmacy (HLP) status, which level?

Q43. If the pharmacy does not have Healthy Living Pharmacy (HLP) status, is the pharmacy working towards this?

Q44. If the pharmacy is working towards Healthy Living Pharmacy (HLP) status, which level do you intend on attaining?

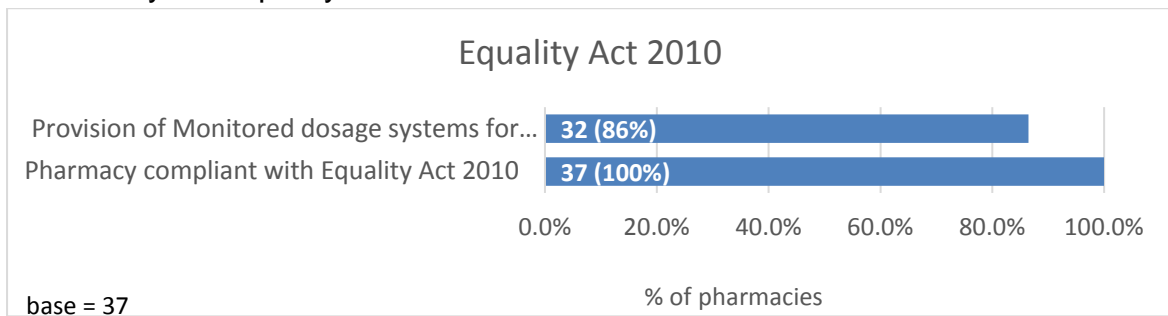


Q45. How many actual staff have achieved the following...?

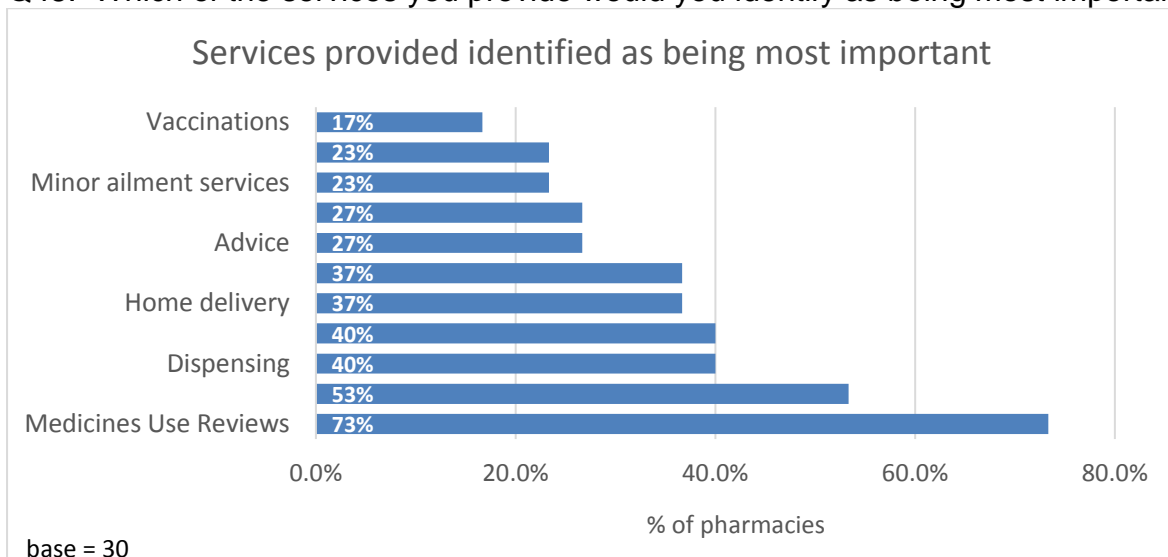


Q46. Is your pharmacy compliant with the Equality Act 2010?

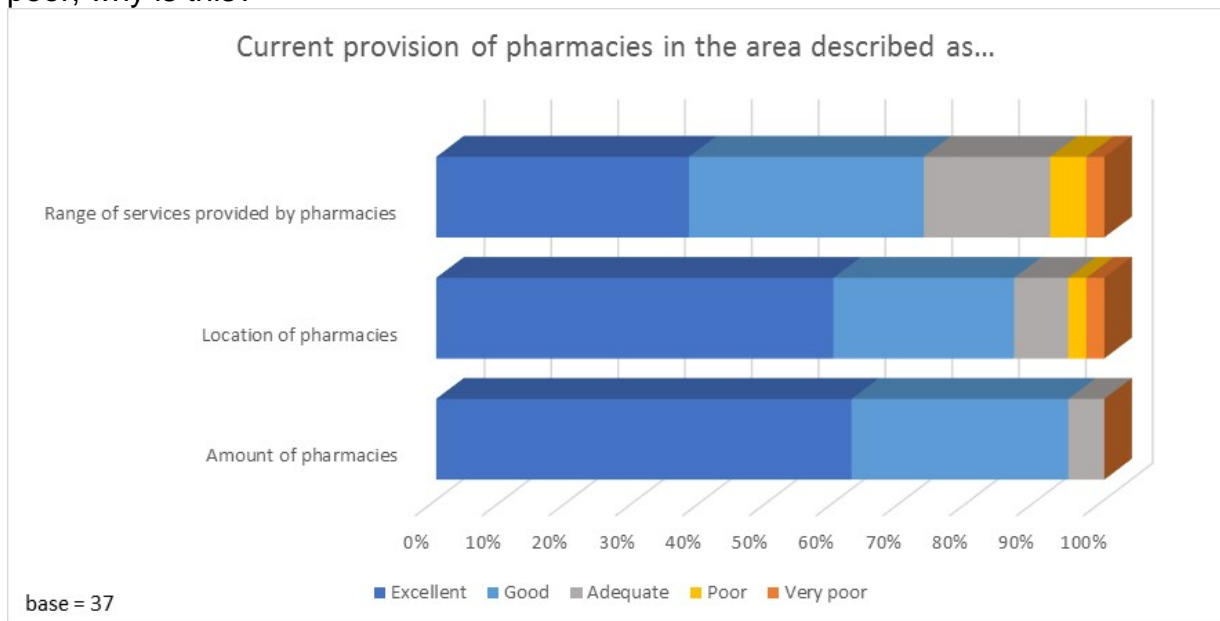
Q47. Does your pharmacy provide Monitored Dosage Systems (MDS) for patients not covered by the Equality Act 2010?



Q48. Which of the services you provide would you identify as being most important?



Q49. How would you describe the current provision of pharmacies in your area? If poor, why is this?



Q50. Is there a need for more pharmacies in your local area?  
All respondents reported No.