

Kent Pharmaceutical Needs Assessment

**Sittingbourne, Isle of Sheppey and
surrounding areas**

co-terminus with Swale CCG

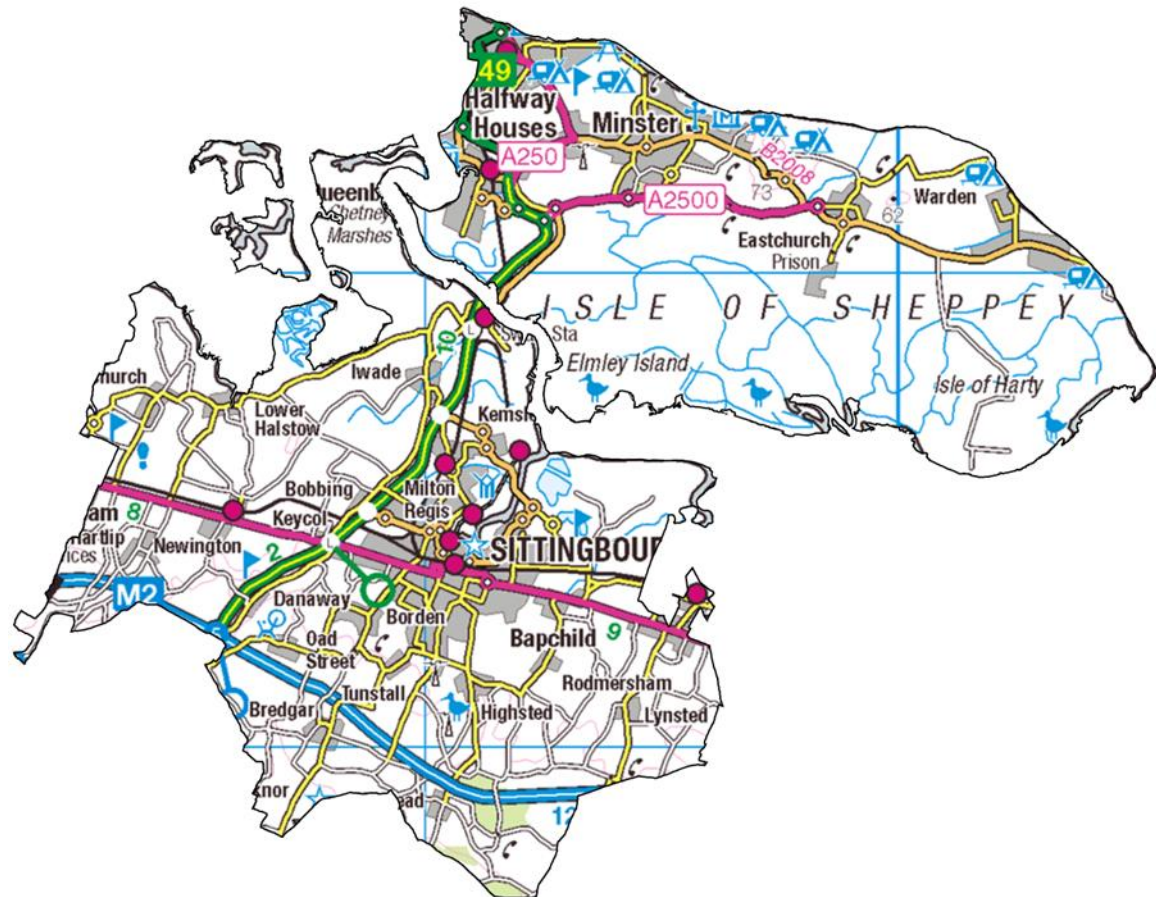
**The accompanying maps etc. in Appendix A
should be viewed alongside this document**

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Introduction

This document has been written as part of the main Kent Pharmaceutical Needs Assessment (PNA) to allow judgements to be made using local data. **This document should be read in conjunction with the main Kent PNA.**



The area considered in this document covers the same area as Swale Clinical Commissioning Group (CCG) and will be referred to as the Swale CCG area. It comprises of two localities, Sittingbourne with its surrounding area and the Isle of Sheppey.

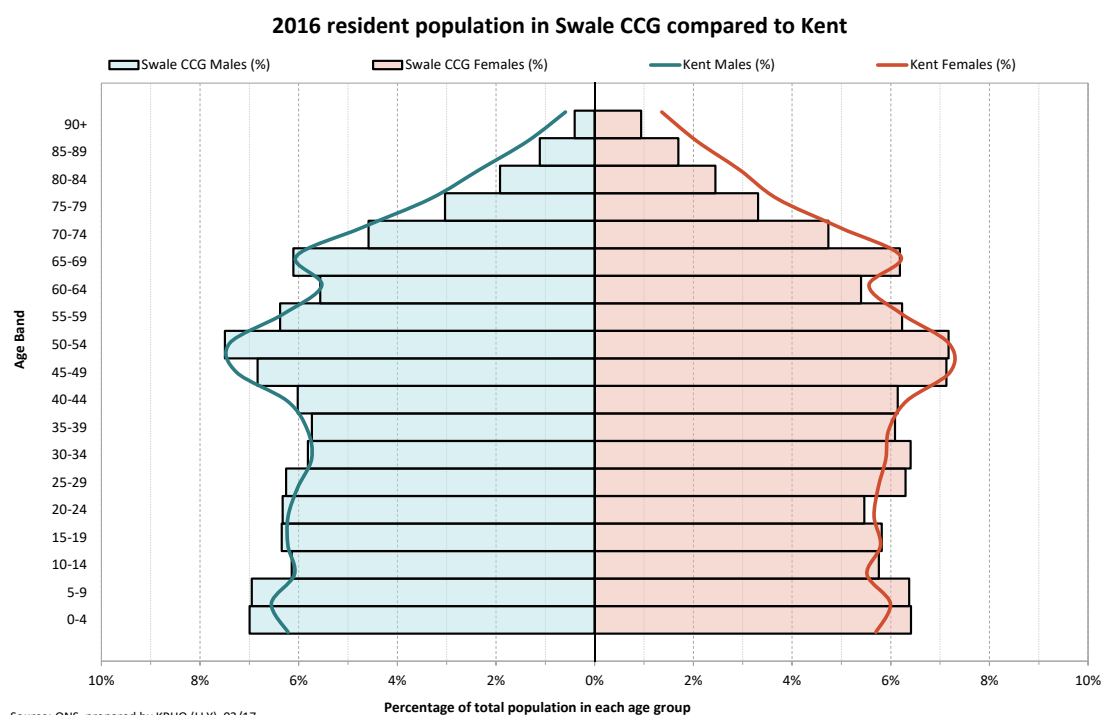
Swale CCG covers patients from 18 practices, with a registered practice population of just under 111,900.

The registered practice population is drawn mainly from Sittingbourne, the Isle of Sheppey and the area east of Faversham.

It is important to recognise that patients resident in the CCG area cannot be presumed to be registered exclusively with Swale CCG practices. Residents of Iwade, Lower Halstow and Upchurch are as likely to be registered with Medway practices. Similarly large numbers of people resident in Teynham

and Lynsted ward are registered with the Faversham practices (Canterbury & Coastal CCG)

Detailed maps showing the population density, projected population growth and the ethnicity of Swale CCG residents can be found in the supplementary information for Swale CCG in Appendix A.



Swale CCG has a smaller proportion of people aged 75 years plus compared to Kent. Swale CCG has a young population (those aged 0 to 9 years) that exceeds the Kent average

Practice data¹ shows that out of a practice population of 111,860 there are 14,606 children aged 0-9 living in Swale (13.1%), 20,262 people who are over 65 in Swale (18.1%). These percentages have increased since the 2015 PNA. These age groups are considered to be the main users of pharmaceutical services.

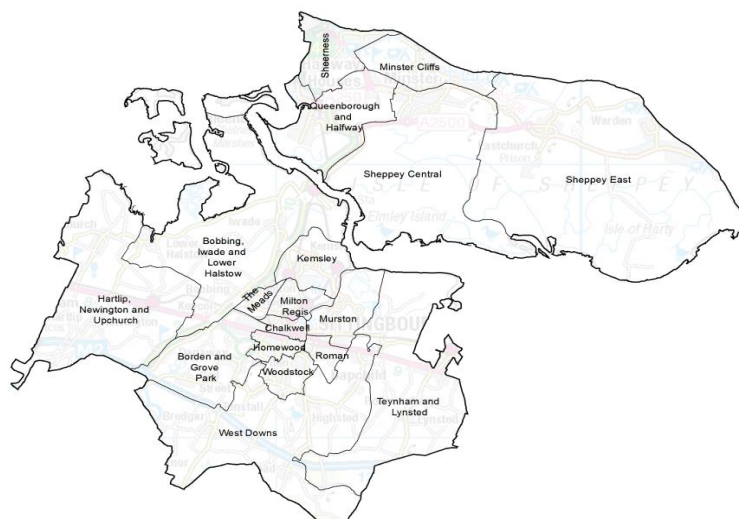
Care Homes

There are a considerable number of care homes in the Swale area. Patients who are looked after in a care home setting are often high users of medicines. However because of the nature of their care, they rarely access pharmaceutical services individually, leaving this to be carried out by the care home staff. More recently care home organisations do not use local pharmacies for this service, favouring the large “hub” or “internet” pharmacies

¹ PCIS practice data June 2017

which specialise in this type of one-stop service. Therefore there is not considered to be any relationship between the number of care homes and the need for local pharmaceutical services.

Prime electoral wards within Swale CCG area.



Mosaic Public Sector definitions

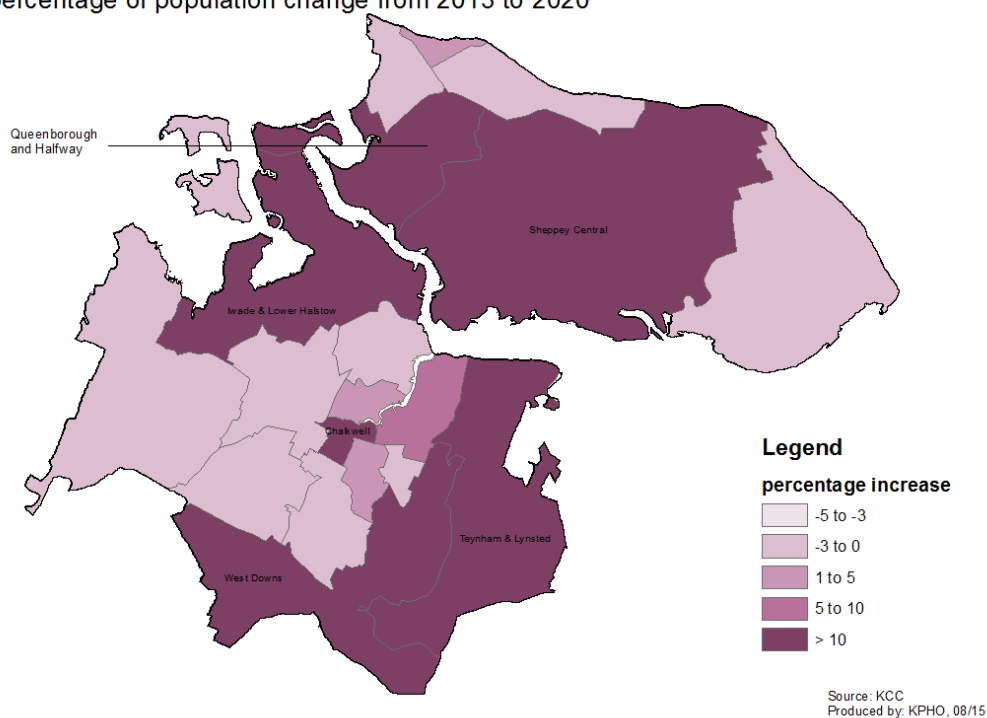
There are two dominant groups in Swale CCG, which account for 39.2% of the population:

- Group H: Aspiring Homemakers - "Younger households settling down in housing priced within their means" accounts for 18.1%
- Group M: Family Basics - "Families with limited resources who have to budget to make ends meet" accounts for 12.1%

Other groups are identified in full in the Swale Health and Social Care Maps.

2011 Census data around ethnic populations show that 1.03% of the population of Swale are from a black or minority ethnic (BME) group. Life expectancy at birth for Swale CCG is estimated to be 80.6 years, lower than the Kent life expectancy of 81.8 years. The ward with the highest life expectancy is Woodstock (85.3), and this is significantly higher than both Kent and Swale. This is 9.7 years more than the lowest life expectancy which is in Sheerness West (75.6).

The percentage of population change from 2013 to 2020



Transport Links

See map on page 3

The main transport link in Swale CCG is the M2 which runs from London down to pass Sittingbourne and Faversham before reaching on to Canterbury and Dover beyond. The A249 also links Sheerness on the Isle of Sheppey through to Sittingbourne and on to the M20.

The main line railway runs from Canterbury, through Faversham then Sittingbourne, where a branch line connects the Isle of Sheppey, and continues through Medway and on into London.

Public transport links are good especially if you are close the main towns, near to the main roads or near the railway lines. Community Transport services are available to residents who are unable to access public transport easily. In an NHS Litigation Authority (now called NHS Resolution) ruling about a case of access and choice of pharmaceutical services, a travel distance of six miles by car or public transport was considered reasonable in rural areas.

The benefits of good transport links to public health are increased access to a range of services including employment, education, health facilities and leisure opportunities both within Swale and further afield.

The downside of having good transport links can be an increase in traffic and congestion. This can lead to increased noise pollution, accidents and higher levels of air pollution such as PM10s that are associated with circulatory and respiratory disease.

More information is available in the KMPHO Health and Social Care Maps - Swale which can be found at

https://www.kpho.org.uk/_data/assets/pdf_file/0014/46130/Overview-Swale-CCG.pdf

Pharmaceutical Services in the area

There are two ways that patients can access pharmaceutical services within the Swale CCG area. They are through community pharmacies or through a dispensary within a GP practice (dispensing practices).

The pharmaceutical services which are provided by community pharmacies and by dispensing doctors are laid down in statute in the [NHS Pharmaceutical Services Regulations 2013](#).

Appliances can be obtained through both of these methods or through a specific appliance contractor. Appliance contractors usually provide a service nationally and there are two based in the Kent area.

Patients can also request to have their prescriptions (especially repeat prescriptions) sent electronically (EPS) to a pharmacy of their choice, such as one close to their work place or near their home. This means that positioning a pharmacy next to a GP practice is no longer as important.

Ratio of number of pharmaceutical service providers (community pharmacies & GP dispensing practices) per 100,000 population (excluding appliance contractors)			
Locality	Number of providers	Practice Population	Ratio/100,000 population
NHS Swale CCG	28	111860	25
Kent			21
England			23

Community Pharmacy

Funding Cuts

From December 1st 2016 the Department of Health (DH) imposed a reduction in the funding for community pharmacy while suggesting that the services provided can be improved. This presents a potential risk of community pharmacies being forced to cut services which are currently provided for free, with consequences for patients and for the local health and social care

economy. The cuts may result in pharmacies serving the same population consolidating and closing down one or more premises and may lead to the closure of essential pharmacies in rural and semi-urban areas where over 90% of their turnover come from essential NHS services. You can find more information about the possible effects of the community funding cuts in the main Kent PNA document.

There are 25 community pharmacies who are registered on the Kent NHS pharmaceutical list as providing the full range of NHS pharmaceutical services and located within the Swale CCG area.

NHS Swale CCG - Community Pharmacies	
Total number of Community Pharmacies providing NHS pharmaceutical services	25
Number of standard 40 hour pharmacies	23
Number of 100 hour pharmacies	1
Number of mail order/internet pharmacies	1
Number of appliance contractors	0
Number of pharmacies offering electronic prescription service (EPS)	25

This is an increase of one standard '40 hour' contract pharmacy in the Leysdown area since the 2015 PNA

A list of all the pharmacies located within Swale CCG can be found in Appendix B.

Pharmaceutical services from community pharmacies comprise of essential, advanced and enhanced services. Explanations of these services can be found in the main overarching Kent Pharmaceutical Needs Assessment. All Swale area pharmacies must provide the **Essential** services. (For a description of essential services please refer to the overarching Kent document)

Maps showing which ones provide the **Advanced** services of
 Medicine Use reviews (MURs),
 New Medicines Service (NMS)
 NHS Flu Vaccination Service
 Appliance Use Reviews (AURs)
 Stoma Customisation
 can be found in Appendix A.

NUMSAS (NHS Urgent Medicine Supply Advanced Service) is currently being rolled out across the South of England by NHS England. Currently all the pharmacies in Swale offer this service. Patients can only access this service by being referred by NHS 111.

Standard 40 hour community pharmacies.

These are pharmacies which are registered as providing at least 40 'core' pharmacy hours per week. These hours are usually 8 hours daily, Mon – Fri but are agreed at the time of application to join the register.

Pharmacies cannot change their 'core' hours without prior agreement with NHS England.

Many of these pharmacies also provide supplementary opening hours, often opening slightly later in the evening and on Saturdays and Sundays.

Pharmacies can change their supplementary hours if they so desire, as long as NHS England receives the statutory 3 months' notice.

100 hour pharmacies

These are pharmacies which have to be open for a minimum of 100 hours per week with the hours being agreed with NHS England.

Mail order/internet pharmacies

These are pharmacies which provide pharmaceutical services via mail order or the internet. They are not accessible to the general public. There is one mail order/internet pharmacies based in Swale.

Appliance contractors

Appliance contractors provide appliances only, which are defined in Part IX of the Drug Tariff (e.g. ostomy, colostomy appliances) and these often require tailoring to meet the need of individual patients. There are no appliance contractors located in the Swale area.

Opening times

A review of all opening times was carried out in October 2017 using data provided by NHS England which is available on NHS Choices.

It was considered that there is good provision of pharmaceutical services through pharmacies and dispensing surgeries for the majority of the day especially in and around the town of Sittingbourne and on the Isle of Sheppey. Services before 8 am (1 pharmacy) and after 6.30pm (6 pharmacies) are adequately provided across the area with many other 100 hour pharmacies close by in Faversham and Gillingham.

Out of Hours providers of medical services provide access to urgent medical care including urgent medicines when there is not a pharmacy open and the need is considered to be urgent. The Out of Hours providers for this area is based both in Sittingbourne and Sheppey Hospitals.

21 pharmacies are open Saturday mornings and 10 pharmacies also provide services on Saturday afternoons.

3 pharmacies also provide services on Sundays in strategic positions across the area.

Subsequent changes to opening times will be identified in supplementary statements which will be published at 3 monthly intervals alongside the PNA and the opening times of all pharmacies along with the additional services that they offer can be found on NHS Choices.

<http://www.nhs.uk/Service-Search/Pharmacy/LocationSearch/10>

Dispensing practices.

NHS Swale CCG – Dispensing practices	
Total number of GP practices providing pharmaceutical services to their patients	1
Total number of sites(including branches) providing pharmaceutical services to their patients	3

A list of all the dispensing doctors located within Swale CCG can be found in Appendix C

This shows a decrease of 1 main dispensing surgery in Teynham since the 2015 PNA, where the whole surgery with all of its branches has closed down. The management of this closure was carried out by Swale CCG. There is another non-dispensing GP surgery and a community pharmacy in Teynham already.

One practice in Upchurch is actually a branch of a Medway practice and both Swale CCG and Medway CCG have asked that it should be considered to be within the Medway area.

Agreement to changes to provision of pharmaceutical services through dispensing surgeries are the responsibility of the local CCG. It has been noted that this information is sometimes not passed onto NHS England and therefore does not appear in the supplementary statements for the PNA. This must be rectified in future PNAs

Provision of pharmaceutical services through dispensing surgeries

Dispensing practices can provide pharmaceutical services to specific patients including the dispensing of medicines and appliances. Many practices have developed these services further depending on the needs of their patients. They can also sign up to the Dispensing Services Quality Scheme (DSQS). This is a voluntary scheme which includes DRUMs–Dispensing Review of Use of Medicines– (which are similar to MURs in pharmacies), many of the essential services, as well as following the same principles of clinical governance.

For a more detailed explanation of the regulations governing the dispensing of pharmaceutical services through a GP surgery please see the overarching Kent document Page 18.

Surgeries must always give these patients the choice of obtaining their medicines through the GP dispensary or being allowed to take their prescription to a community pharmacy of choice. The majority of dispensing surgeries provide dispensing services Monday to Friday during normal surgery opening hours. There are no dispensing services listed as being provided on a Saturday or Sunday from dispensing surgeries in the Swale area.

Pharmaceutical services out of hours

The Swale CCG area currently has one 100 hour pharmacy which is located centrally to the area and provides services from early in the morning until late at night Monday to Saturday and is open on a Sunday.

There are also 4 more 100 hour pharmacies, 2 in Faversham and two in Gillingham which are accessible to Swale residents via good road/rail links (M2/A2).

Access to medicines via 100 hour pharmacies is considered to be especially important in areas which are deprived, especially if there is a high number of children aged 0-9 and/or elderly people over 65 who are living alone with no family/carer support.

The Sheppey Hospital Pharmacy which is on the same site as the Walk in Centre on Sheppey is open from 8am to 8pm, Monday to Friday, and 9am to 6pm on Saturdays. Tesco Pharmacy in Sheerness is also open 8am to 8pm Monday to Saturday and 10am to 4pm on Sundays.

Access to medicines outside these times, is commissioned from the local out-of-hours medical services provider, who has available essential and urgently needed medicines, as agreed in the *National Out of Hours Formulary* and are supplied where the need for them cannot wait until the 100 hour pharmacy opens.

Walk in centres

Swale CCG has two walk in centres which treat minor injuries and minor ailments. One is located at Sittingbourne Memorial Hospital and the other is located at Sheppey Community Hospital. These services have access to urgent and emergency medical cover from early morning to late evening.

Rota services

NHS England manages a rota service for days when there are no pharmacies open at all. This is usually Christmas Day and Easter Sunday but may include other Public and Bank holidays if required.

Enhanced services managed by NHS England

There are no longer any enhanced services managed by NHS England in the Swale area.

Public Health services provided through pharmacies.

Many community pharmacies are also commissioned by local authorities to provide public health services on a 'needs' basis. These are not classed as pharmaceutical services as they are provided by other healthcare providers as well.

Examples of these are smoking cessation, NHS Healthchecks, substance misuse and sexual health.

For completeness we have included maps showing where these services are available and published them alongside the PNA.

CCG services provided through community pharmacies.

These are not necessarily pharmaceutical services and therefore not considered as part of the PNA. However for completeness we are including maps of such services where the information is available.

MDS/MAR charts

Swale CCG commissions one pharmacy to provide both Monitored Dosage Systems (MDS) and/or Medication Administration (MAR) Charts for identified existing patients only. No new patients are accepted onto this scheme

Anticoagulation services

Swale CCG commissions 3 pharmacies to provide an INR monitoring service.

Palliative Care

Swale CCG commissions a palliative care service through 2 of its community pharmacies

Non NHS and private services

Pharmacies also provide many other services to the public which are not part of NHS pharmaceutical services and therefore not paid for by the NHS or Local Authority. These can include **blood pressure testing, blood glucose testing, cholesterol testing, delivery services, provision of medicines in multi-compartment aids, travel medicines and the sale of over the counter (OTC) medicines.** All of these services may attract an additional charge.

These services will not be included as part of the PNA.

Healthy Living Pharmacies

Please see the main Kent PNA for an explanation of the concept of Healthy Living Pharmacies. Becoming accredited as a Healthy Living Pharmacy is not mandatory and is not a pharmaceutical service and therefore not considered as part of the PNA.

Currently Swale has 3 community pharmacies who have met the accreditation as a Healthy Living Pharmacy Level 2.

The rest of the Swale pharmacies are working towards achieving their **HLP Level 1** status through Public Health England. An up-to-date list of Level 1 HLPs can be found [here](#).

Please see map in Appendix A for details.

Housing

Like most of Kent, considerable new housing is expected to be built in the Swale area over the next 20 years. The Planning department at Swale Borough Council were consulted to identify any new developments that have or are due to be built since the 2015 PNA.

The Swale Borough Council local plan suggests this increase could now be 13,192 homes up to the year 2031, roughly 776 a year. Current estimates indicate that some 4,500 new homes will be built within the next five years, although a number of these sites have long lead in times and this estimate is subject to change. There is not expected to be any major housing developments (over 1000 homes in one location) being built within the life time of this PNA although there may a lot of infilling in areas where there is already significant provision of pharmaceutical services. The area NW of Sittingbourne between the A249, Milton and Kemsley is likely to be developed further but there are already 6 pharmacies within this locality so there is unlikely to be any future need. This will be reviewed regularly especially if the house building changes the landscape from rural to urban.

For future information please consult the latest version of the Local Plan which can be found on the relevant district council website.

Kent PNA 2015 – Swale area

As part of this assessment, reference was made to the previous one carried out in 2015. <http://www.kpho.org.uk/health-intelligence/service-provision/pharmacy/pharmaceutical-needs-assessments>

Within that document it was noted that

Rurality

The responsibility for reviewing controlled areas now lies with NHS England. We understand that this review has now been carried out.

100 Hour Pharmacy Contracts

The opening of a 100 hour pharmacy in the north of Sittingbourne, and the long opening hours provided by Sheppey Hospital pharmacy and Tesco's Sheerness goes a long way to providing services out of hours.

With the removal of 100 hour pharmacies from the exemptions to meeting the "market entry" rules, it is now unlikely that any application will offer such services voluntarily.

NHS England will need to look at any applications received for this area to ensure that it meets the needs for opening such hours especially early in the morning and late at night.

Under 18 conception rates.

The Sexual Health service, which is now commissioned through Kent Public Health, is currently under review and it is expected that the new service will meet the current needs of the local people.

Therefore in 2015 it was recommended that in the Swale Area

The current provision of pharmaceutical services is good and provides the pharmaceutical needs of the population on the whole.

The provision of new housing in the Swale area needs to be reviewed regularly.

The provision of pharmaceutical services outside of the standard '40' core hours needs to be maintained especially on the Isle of Sheppey.

Since the 2015 PNA was published, NHS England has granted a standard 40 hour contract for a pharmacy situated in Leysdown, a small village serving holidaymakers at the opposite end of the Isle of Sheppey from Sheerness. This was not identified as a need in the last PNA as this area was considered to be adequately covered by the local dispensing surgeries providing pharmaceutical services at Leysdown, Warden Bay and Eastchurch. This pharmacy has only just recently opened so we await information as to how it is affecting other services within the locality.

Consultation

The consultation ran from 15 November 2017 to 22 January 2018 inclusive. All consultation information was held on the consultation directory on kent.gov.uk with its own weblink: www.kent.gov.uk/pharmaceuticalneeds

The results of the survey and relevant comments can be found within the main Kent overarching folder in Appendices C - F

Conclusions and recommendations Kent PNA 2018 Swale area

Monday to Friday

There is good provision of full pharmaceutical services in and around the towns of Sittingbourne (11 pharmacies) and Sheerness (7 pharmacies) as well as the larger villages such as Iwade, Teynham, Queenborough, Newington and Minster (7 pharmacies). Most of the smaller villages in the area have access to pharmaceutical services through their dispensing surgery.

Saturdays

There is good provision of pharmaceutical services on Saturday mornings in and around the towns of Sittingbourne (9 pharmacies) and Sheerness (5 pharmacies) as well as the larger villages such as Iwade, Teynham, Queenborough, Newington and Minster (7 Pharmacies). On Saturday afternoons there are 10 pharmacies open across the area.

Sundays

On a Sunday there is adequate provision of full pharmaceutical services in 3 pharmacies across the area (1 in Sheerness and 2 in Sittingbourne) There is also access to four '100' hour pharmacies in neighbouring areas, 2 in Faversham and 2 in Gillingham.

Therefore pharmaceutical services are mainly good across the area and we do not need any more providers in the area.

The provision of '100 hour' pharmacies needs to be maintained.

The provision of rural/outlying pharmacies needs to be preserved.

Lack of parking and access for the disabled was a recurring comment by responders to the consultation. Therefore any new contract must also demonstrate that there is adequate parking available for the business and that access for the disabled is available.

Any application must demonstrate that it can improve on the availability of services across the specific area without destabilising the current provision. It

is recommended that if a need is identified, whether foreseen or unforeseen, that the current providers are approached to establish whether they can meet the need, before a completely new contract is considered.

Permission for any applicant to provide extra pharmaceutical services to this area must be carefully considered as to whether it will destabilise the current providers, resulting in closures and less pharmaceutical services being available at crucial times.

The area is changing rapidly and as well as consulting this PNA, the PSRC at NHS England should carry out a rapid review of any area where there is an application, to ensure that the needs of this area have not changed in the lifetime of the PNA. This could include review of rural and urban classification and should be published alongside the PNA in the supplementary statements.

Document Version Control

Version	Date	Author(s)	Comments
Draft 1	Oct 2017	Cheryl Clennett	1 st draft
Draft 2	Oct 2017	KMPHO	Supplementary maps etc. agreed
Draft 3	Oct 2017	PNA Steering Group	Agreed amendments made
Draft 4	Mar 2018	PNA Steering Group	Agreed amendments as a result of the consultation responses
Final Version		PNA steering Group	Final checks prior to publication after approval from HWB