



## **PNA Update Paper to HOSC – 3<sup>rd</sup> November 2010**

### **Background**

All PCTs have a statutory duty to publish their first Pharmaceutical Needs Assessment (PNA) by the 1<sup>st</sup> February 2011; failure to meet this duty could lead to a judicial review. This paper provides information on the West Essex PNA and the action that has been taken in order to deliver a completed PNA within timescale. Due to the high level of risk associated with this duty, the development of the PNA has been added to the NHS West Essex risk register.

### **Statutory Obligation**

The Pharmacy in England White Paper *Pharmacy in England: Building on strengths – delivering the future* (March 2008) highlights the need for each PCT to undertake a robust Pharmaceutical Needs Assessment (PNA). This was underlined further in the Operating Framework for the NHS in England 2009/10 to support a move towards world class commissioning of pharmaceutical services. Under the Health Act 2009, all PCTs are required to develop and publish a PNA and to use that PNA as the basis for determining market entry to NHS pharmaceutical service provision. Although initially an Essex-wide PNA was discussed it was agreed that each PCT would develop their own PNA in order to meet the locality focus and the needs of each area. The Act amended the National Health Service Act 2006 to include provision for regulations to set out the minimum standards for PNAs; these came into force on 24 May 2010.

### **Pharmaceutical Needs Assessment**

The PNA is a key tool in developing pharmaceutical services responsive to local need as outlined in the Joint Strategic Needs Assessment (JSNA). It will also indicate the local strategic direction for pharmaceutical service provision based on PCT commissioning of services against health need rather than response to potential providers' applications to dispense. As part of existing control of entry arrangements, the PCT decides if it is necessary or expedient to approve an application to dispense. The PNA is intended to replace the existing control of entry system. It will also consider the future need for further service development. The PNA must be revised every three years as a minimum standard, but may be updated more frequently than this if there is significant change(s) which would impact on the commissioning needs of the PCT.

For NHS West Essex the aim of our PNA will be to:

- Improve the health status of our local population and reduce inequalities in health

- Enable local people to have a greater influence on services that the PCT commissions
- Engage with the public
- Commission high quality services
- Develop market management

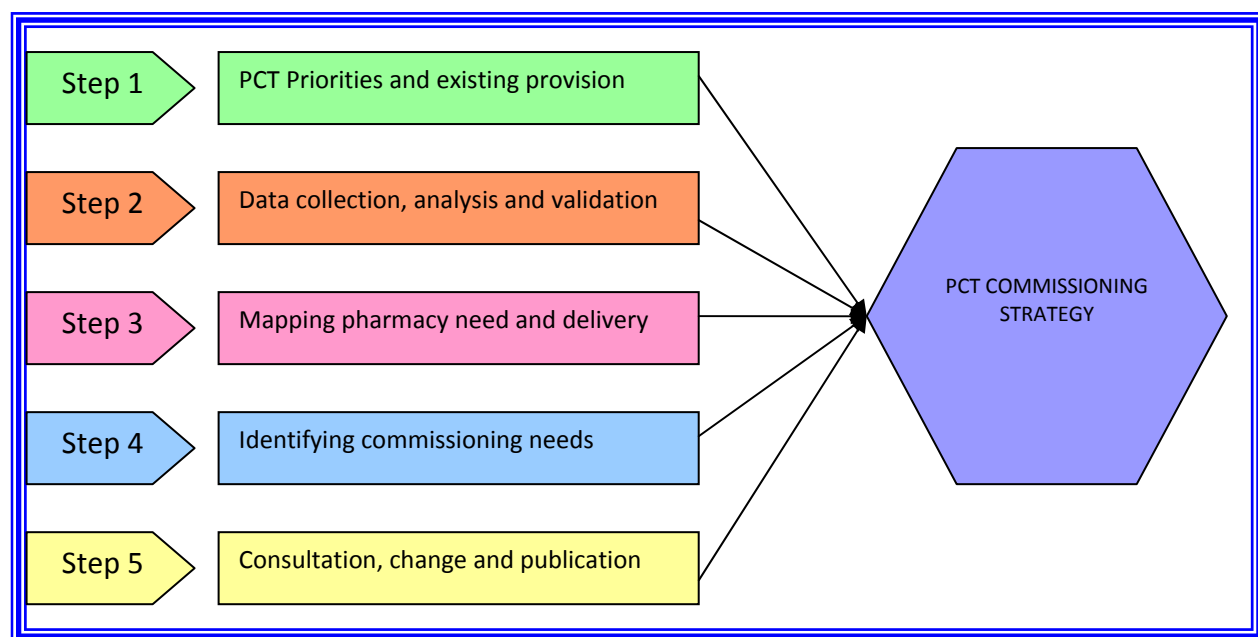
### Project Planning

NHS West Essex has an identified project plan to manage the delivery of the PNA by the publishing deadline of 1<sup>st</sup> February 2011. Our key milestones are:

Key Steps	Timescale
PNA Regulations come into force	1 <sup>st</sup> May 2010
Engagement of Stakeholders	May 2010 – December 2010
First draft of PNA and copy to Stakeholder Board	August 2010
Formal Consultation	October 2010 – December 2011
Analysis of Consultation	October 2010 - January 2011
Amend PNA in light of Consultation	January 2011
Report to Trust Board on Consultation	27 <sup>th</sup> January 2011
PNA signed off by Trust Board	27 <sup>th</sup> January 2011
PNA published	1 <sup>st</sup> February 2011

### Process

The PCT undertook 5 key steps in the process of delivering the PNA (see diagram below). The process is currently at step 5 with the draft document out to public consultation until 31<sup>st</sup> December 2010.



## **Consultation**

The required minimum is that a PNA is available for consultation at least once during its development, for a period of 60 days. For the consultation process, NHS West Essex has identified a large number of stakeholders:

:

- LPC
- LMC
- Existing providers on the PCT pharmaceutical list including appliance contractors
- All other independent contractors
- LINKs and all other patient, consumer or community group with an interest in pharmaceutical provision
- Local Authorities (including Health Overview and Scrutiny Committee)
- Neighbouring PCTs
- Other NHS Trusts

We have also worked with our neighbouring PCTs to consider cross-border commissioning of services that may impact on our PNA.

Following the consultation there is a requirement to report on and publish action taken in response to feedback and for this to be included in the PNA.

## **Conclusion**

NHS West Essex has a robust process for the development of the PNA and is on course to achieve the publication deadline of 1<sup>st</sup> February 2011.

## **Executive Summary**

This document describes the PCT's assessment of the need for pharmaceutical services in West Essex.

The NHS (Pharmaceutical Services and Local Pharmaceutical Services) (Amendment) Regulations 2010 introduced the requirement for Primary Care Trusts to publish a Pharmaceutical Needs Assessment (PNA). The PCT will then use it as the basis for commissioning pharmaceutical services and determining applications from pharmacy contractors and dispensing doctors wishing to provide pharmaceutical services in the area.

There is a statutory requirement to formally publish this PNA by 1<sup>st</sup> February 2011.

### **The Purpose of a Pharmaceutical Needs Assessment (PNA):**

This is the first PNA produced under the new Regulations described above, and its purpose is to:

- Inform and support the commissioning plans for pharmaceutical services in NHS West Essex
- Inform and support the decision making process in relation to market entry of new pharmacies and other providers of pharmaceutical services. The PNA will be used in conjunction with further control of entry regulation which is expected in the autumn of 2010.

The PNA has been prepared at a time of significant change in the NHS. The July 2010 White Paper, "Equity and excellence: liberating the NHS", proposes radical reform of NHS services, including commissioning and is likely to have an impact on how pharmaceutical services are planned and utilised in the future. At the time of producing this document the Government is consulting on its proposals and it is too early to say how they will affect the PNA or pharmaceutical services. While we expect that some aspects of pharmaceutical services will be managed by the proposed NHS Commissioning Board, there is likely to be further opportunity for greater local commissioning through public health and GP consortia in the future.

At the same time the NHS must now reduce costs and find savings, following a period of sustained growth in spending. Consequently, all areas of NHS spending, including pharmaceutical services are being scrutinised to ensure that money being spent is delivering the expected outcomes for patients.

### **How the PNA was Developed**

As part of the preparation of this draft for consultation, the PCT involved contractors, partners and stakeholders via a project board and core group, and obtained the views of members of the public and healthcare professionals via questionnaires. In looking at the health needs of the local population, we considered the Joint Strategic

Needs Assessments produced by the three local authorities in West Essex, the PCT's Annual Public Health Report and other various other public health data available to the PCT.

The data on service provision already held by the PCT was supplemented by questionnaires completed by pharmacy contractors and dispensing doctors.

We have used Middle Super Output Area (MSOAs), a classification used for the publication of statistics, to break down the areas of West Essex, in assessing health needs. Part of the data used in this draft PNA is presented in this way, although most of the discussion of results is discussed by locality – Harlow, Epping Forest and Uttlesford, unless there is significant variation within a locality.

This draft PNA is available for detailed review and comment, and the final version will be ready for publication by 1 February 2011.

## **About West Essex**

NHS West Essex serves a population of 280,000 people across three district councils, Epping Forest, Harlow and Uttlesford. Epping Forest has both urban and rural areas, Harlow is urban, and Uttlesford is largely rural.

- NHS West Essex has a different population structure to that of England as a whole; it has slightly more older people and fewer 15-34 year olds, which may reflect the movement of this group to other areas which are more affordable to live in.
- Educational attainment levels across west Essex are increasing but are variable. The percentage of young people achieving 5+ A\*-C grades at GCSE continued to rise..
- West Essex is not described as a deprived area, however, averages disguise the significant disadvantages experienced by some sections of our population. One locality within West Essex is identified as being in the bottom 40% of deprivation in the country.
- There are large areas of rurality that may impact on access due to public transport limitations.
- Harlow locality has the largest proportion of people classed as unemployed at 12.9%, higher than the Essex average. Unemployment for Epping Forest stands at 9.7%, and Uttlesford 3.4%.
- Harlow has the highest proportion of people claiming benefits with 15.8% which is also the second highest in Essex.
- Around 10% of the Uttlesford and Epping Forest population are unpaid carers, compared with 9% in the Harlow
- The average life expectancy for NHS West Essex was 78.8 years for males and 82.7 years for females in 2006-2008,
- Men in Harlow have the lowest life expectancy across all of the three districts and the lowest across the whole of Essex
- The population is less ethnically diverse than that of England.

## **Local health needs**

The PNA assesses those health needs of the population which could be met by provision of pharmaceutical services. There are variations in health need, according to MSOA and locality, level of deprivation, and variation in disease prevalence. For example teenage conception, drug misuse, smoking, alcohol-related diseases, diabetes, coronary heart disease and COPD is highest in Harlow, whereas there are a greater number of people consuming above the recommended limits of alcohol, a higher prevalence of asthma, and higher levels of hypertension in Uttlesford. Epping Forest has the largest population of gypsies and travellers, a population which has acknowledged health inequalities and lower life expectancy than the average population.

## **Summary Assessment of findings**

There are 48 pharmacies in West Essex providing pharmaceutical services, including three pharmacies in Harlow which open for at least 100 hours per week, and three internet pharmacies. Patients in West Essex are able to access a range of services from their pharmacies in addition to the dispensing of medicines and appliances, including smoking cessation, syringe -needle exchange, substance misuse supervised consumption, and a range of sexual health services.

Dispensing services for the more rural areas of West Essex are provided by dispensing doctors, ten of which are located in Uttlesford, and two of which are located in Ongar (Epping Forest locality).

Ninety percent of the population of West Essex are within a 2km walk (urban areas), or a ten-minute drive (rural areas) of either a pharmacy or dispensing doctor. For those residents who live close to the borders of West Essex, pharmaceutical services are provided by pharmacies in neighbouring PCTs.

The three 100-hour pharmacies in the Harlow area contribute to the extended opening hours available in the area.

In considering the need for reasonable choice, we looked at services available through the pharmacies currently contracted to provide services, plus the various different service providers detailed in the main document.

## **Conclusion**

Having looked at provision of necessary pharmaceutical services across West Essex, in terms of access, location and opening times, we have not identified any unmet need or gaps in provision.

There has been no identified gap in the provision of Additional Services (Medicines Use Review and Appliance Use Review).

We looked at the health needs of the population and mapped them to current provision of services and found that there was a gap in the provision of smoking

cessation services by community pharmacies. Although this service is offered by other providers, the levels of smoking-related disease and mortality in some areas of West Essex suggests a greater need to access these services than is currently available. There is an identified gap in the provision of substance misuse – supervised consumption, and of syringe/needle exchange services in the Stansted area of Uttlesford Locality.

With regard to gaps in future provision, it is not possible at this time to determine if there are any areas of future unmet need for necessary pharmaceutical services as regional development programmes have been stopped, following the election of the new Coalition Government in May 2010.

There is anticipated to be a significant increase in the elderly population of West Essex over the next 15 years, and services will need to be developed in the future to manage the pharmaceutical needs of this population group, including management of long-term conditions, falls management, and assistance in managing medicines at home. Although some of these services are currently provided, there will be a need to increase provision in the future, subject to sufficient funding availability.

## **Regulations**

The PNA has been developed according to Pharmaceutical Services Regulations and in conjunction with the associated guidance produced by the Department of Health. The pharmaceutical regulations and guidance can be found at the following links:

[http://www.legislation.gov.uk/ukxi/2010/914/pdfs/ukxi\\_20100914\\_en.pdf](http://www.legislation.gov.uk/ukxi/2010/914/pdfs/ukxi_20100914_en.pdf)  
[http://www.dh.gov.uk/dr\\_consum\\_dh/groups/dh\\_digitalassets/@dh/@en/@ps/documents/digitalasset/dh\\_114952.pdf](http://www.dh.gov.uk/dr_consum_dh/groups/dh_digitalassets/@dh/@en/@ps/documents/digitalasset/dh_114952.pdf)

**Deadline for comments on the consultation is 31<sup>st</sup> December 2010.**

**If you have any comments please complete the template and return to:**

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# Pharmaceutical Needs Assessment Consultation Draft



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There has been no identified gap in the provision of Additional Services (Medicines Use Review and Appliance Use Review).

We looked at the health needs of the population and mapped them to current provision of services and found that there was a gap in the provision of smoking cessation services by community pharmacies. Although this service is offered by other providers, the levels of smoking-related disease and mortality in some areas of West Essex suggests a greater need to access these services than is currently available. There is an identified gap in the provision of substance misuse – supervised consumption, and of syringe/needle exchange services in the Stansted area of Uttlesford Locality.

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## Regulations

The PNA has been developed according to Pharmaceutical Services Regulations and in conjunction with the associated guidance produced by the Department of Health. The pharmaceutical regulations and guidance can be found at the following links:

[http://www.legislation.gov.uk/ukxi/2010/914/pdfs/ukxi\\_20100914\\_en.pdf](http://www.legislation.gov.uk/ukxi/2010/914/pdfs/ukxi_20100914_en.pdf)  
[http://www.dh.gov.uk/dr\\_consum/dh/groups/dh\\_digitalassets/@dh/@en/@ps/documents/digitalasset/dh\\_114952.pdf](http://www.dh.gov.uk/dr_consum/dh/groups/dh_digitalassets/@dh/@en/@ps/documents/digitalasset/dh_114952.pdf)



## **2. INTRODUCTION**

NHS West Essex (NHS WE) is the local NHS organisation responsible for commissioning and planning health services for people who live in the local authority areas of Epping Forest, Harlow and Uttlesford. This includes responsibility for ensuring that our population can obtain safe, effective and personal pharmaceutical services from a local community pharmacy or dispensing GP.

This document sets out our Pharmaceutical Needs Assessment (PNA) which we have prepared to meet the legal and regulatory requirements set out in the Health Act 2009: Pharmaceutical Needs Assessment<sup>1</sup>, and subsequent amendments to the Act.

### **2.1 Pharmaceutical Needs Assessments (PNA)**

The PNA is a document that assesses current provision and potential need for pharmaceutical services in our area. This assessment is then used to help us to plan pharmaceutical services for our population identifying where we should focus our efforts to commission services, focusing on reducing inequalities in those areas and in those groups of greatest need.

PNAs are not new and previous versions have been issued in West Essex (the last in 2008) to support the Community Pharmacy Contractual Framework which was introduced in 2005. This is the first NHS West Essex PNA that has been developed to meet the specific requirements of the Health Act 2009. The Control of Entry system, introduced in 1986 and reformed in 2005 will no longer manage control of entry and The Health Act 2009 sets out the framework for the new control of entry test which PCTs must implement by 1<sup>st</sup> April 2011.

Each Primary Care Trust established on or before 1st April 2010 must publish its first Pharmaceutical Needs Assessment on or before 1st February 2011.

### **2.2 Context for PNA**

In 2008 the White Paper “Pharmacy in England: Building on strengths – delivering the future” was published. The White Paper set out the Government’s programme for pharmaceutical services and identified ways in which pharmacists and their teams can play a full part in the new NHS by contributing to safe, effective, fairer and more personalised care through the delivery of an increasing range of services.

The Health Act 2009 is the first piece of legislation following these proposals, and requires NHS Primary Care Trusts (PCTs) to develop and publish Pharmaceutical Needs Assessments (PNAs), and to use them as the basis for

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<sup>1</sup> SI 2010 No.914. The National Health Service (Pharmaceutical Services and Local Pharmaceutical Services)(Amendment) Regulations 2010. Available at: [http://www.opsi.gov.uk/si/si2010/ukSI\\_20100914\\_en\\_1](http://www.opsi.gov.uk/si/si2010/ukSI_20100914_en_1)

commissioning pharmaceutical services and determining market entry to NHS pharmaceutical services provision. Currently PCTs consider whether it is necessary or expedient to grant applications for a new pharmacy in order to secure the adequate provision of pharmaceutical services in the neighbourhood. In future when a PCT receives an application, it will have to consider whether it is satisfied that it is necessary to grant the application to meet needs identified in the PNA, or whether granting the application would secure improvements to, or better access to pharmaceutical services having regard to the PNA.

The regulations require PCTs to undertake a consultation on their first PNA for a minimum of sixty days, and list those persons and organisations that must be consulted e.g. the Local Pharmaceutical Committee, Local Medical Committee, LINKs and other patient and public groups. PCTs are also required to define localities around which the PNA will be structured so that the comparative needs of different populations can be taken into account

### **2.3 Joint Strategic Needs Assessments**

Local authorities and PCTs jointly publish Joint Strategic Needs Assessment (JSNAs) which contain a wide range of information on the area including evidence of the health and well being needs of the local population. The Health Bill 2009 requires PCTs to take account of the relevant JSNA(s) when developing their PNA.

The JSNA in Essex identifies current and future health and wellbeing needs, to aid in determining agreed commissioning priorities that will improve health outcomes and reduce inequalities. The first phase of the pan-Essex JSNA was completed in 2008 covering the twelve districts and borough councils and two unitary authorities which make up Essex. The main points from the 2008 JSNA are summarised in the Table 23 in Appendix A.

Since the first phase of the Essex JSNA a rolling refresh work programme for the information in the JSNA has been started as well as additional booster chapters produced on particular topics i.e, Children and Young People and Mental Health. The latest JSNA chapters are available through the Essex Partnership website (<http://www.essexpartnershipportal.org>).

### **2.4 NHS West Essex (Primary Care Trust)**

NHS West Essex currently has a resident population of 279,066 and a registered population of 286,060. This equates to just under 7,000 extra people who are registered with the PCT and not resident in the area.

NHS West Essex<sup>2</sup> covers three local authority areas, Epping Forest, Harlow and Uttlesford plus the extra ward of Steeple Bumpstead in Braintree<sup>3</sup>, and

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<sup>2</sup> Throughout this document NHS West Essex is used to refer to the area served by the PCT, including the ward in Braintree, while West Essex refers to the area covered by the three districts of Epping Forest DC, Harlow DC and Uttlesford DC.

<sup>3</sup> When comparing information at a district level the ward of Bumpstead is not included unless stated.

stretches over an area of approximately 400 square miles. The area we cover stretches from Buckhurst Hill in the south of Essex to Steeple Bumpstead in the north. We are responsible for improving primary care and the health of the local population.

We commission some health services such as district nursing, school nursing and health visitors. We also provide specialist services such as physiotherapy, speech and language therapy, and Macmillan nursing from West Essex Community Health Services (WECHS).

Our three main functions are to:

- work with our local population to improve their health and well being
- purchase a comprehensive and equitable range of high quality, responsive and efficient services within the resources we have available
- provide high quality responsive and efficient services where this gives best value.

We work closely with community health services and value the contribution our network of community hospitals, health centres, GP practices, dentists, optometrists and community pharmacists make, to give the public access to a wide range of services without having to travel to hospital.

West Essex has a mixture of urban and rural areas and although some areas are affluent, there are some areas where income is low and this is reflected in people's health and well being. There is also an increasingly ageing population where life expectancy is above the national average.

Appendix B shows the geographical area covered by NHS West Essex.

#### **2.4.1 Services Currently Commissioned by NHS West Essex**

- Primary care services - GPs, dentistry, ophthalmology, pharmacy
- Therapy services – speech and language, physiotherapy, hydrotherapy, paediatric, occupational
- Four community hospitals comprising:
  - a day hospital for older residents
  - inpatient wards – for older people
  - a community clinic
  - nursing services – district, school and community matrons
  - community services such as dental, podiatry
  - minor surgery.

Across west Essex there are:

- 17 clinics and health centres
- 187 GPs

- 101 dentists
- 96 opticians
- 48 pharmacists (including 3 Internet Pharmacies)

Our services include:

- Physiotherapists
- Occupational therapists
- Speech and language therapists
- Podiatry
- Chiropody
- Community dental services
- Health visitors
- District nurses
- School nurses
- Children's services and child protection
- Health promotion
- Older people's services
- Patient Advice and Liaison Service (PALS)
- Inpatient and outpatient services
- Harlow Walk-in Centre
- Young people's information centres
- Cancer support services
- Rehabilitation services
- Endoscopy
- Nutrition, dietetics and diabetes care

The PCT is committed to being the local leaders of the NHS. This includes:

- Delivering more services locally that meet the needs of local people
- Improving and maintaining patient safety
- Improving access to health and well-being services for all
- Supporting people in living a healthy lifestyle
- Improving the health of the poorest in our communities and marginalised groups
- Improving support to unpaid carers
- Improving the mental health and well-being of people in our communities
- Ensuring that everyone has a positive experience of health and well-being services
- Improve the lives of people with long term conditions
- Ensure that people are well-informed about local services

## 2.5 Pharmaceutical Services

In developing a PNA, the PCT must decide which of the general health needs of its population could be met by the provision of a pharmaceutical service. In line with the NHS (Pharmaceutical Services and Local Pharmaceutical Services) (Amendment) Regulations 2010, this PNA relates to the following pharmaceutical services:

- Essential, advanced and enhanced services provided by community pharmacy and dispensing appliance contractors
- Local Pharmaceutical Services (LPS)
- The dispensing of drugs and appliances by a dispensing doctor (but not other NHS services that the PCT may commission from a dispensing doctor).

## 2.6 Community Pharmacy Contractors

Under the 2005 community pharmacy contractual framework there are three tiers of services: nationally set essential and advanced services, and locally commissioned enhanced services. Included within community pharmacy contractors are Internet Pharmacies. The Royal Pharmaceutical Society of Great Britain defines an internet pharmacy as:

*“A registered pharmacy which offers to sell or supply medicines (or other pharmaceutical products) and/or provides other professional services over the internet, or makes arrangements for the supply of such products or provision of such services over the internet”.*

### 2.6.1 Essential Services

Essential services are provided by all community pharmacies.

- Dispensing
- Repeat Dispensing
- Disposal of medicines
- Promotion of healthy lifestyles
- Support for self-care for patients with minor ailments
- Signposting for patients to other healthcare provision
- Clinical Governance<sup>[1]</sup>

A framework through which NHS organisations are accountable for continually improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence in clinical care will flourish.<sup>[1]</sup>

### 2.6.2 Advanced Services

There are currently three Advanced Services within the NHS community pharmacy contractual framework. Community pharmacies can opt to provide any of these services provided they meet the requirements set out in the Secretary of State Directions. These Directions specify the accreditation

pharmacists must have, and the standards their premises must meet, in order to provide any of the three Advanced Services listed below.

- Medicines use review
- Appliance use review
- Stoma appliance customisation

### 2.6.3 Enhanced Services

The Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2005 lists a range of services that may be commissioned locally by PCTs from community pharmacies in accordance with the needs of their population (Appendix C).

## 2.7 Dispensing doctors

Dispensing doctors can provide dispensing services to those of their patients who live in a rural area more than 1.6 km from a community pharmacy and who have requested to be on the dispensing list. Dispensing doctors providing dispensing services in West Essex at the time of publication of this document are shown in Appendix D.

## 2.8 Dispensing Appliance Contractors (DACs)

The National Health Service (Pharmaceutical Services) (Appliances) (Amendment) Regulations 2009 make provision for essential services and two advanced services. DACs are expected to operate within a similar clinical governance framework to pharmacy contractors.

At the time of publication of this document, there are no Dispensing Appliance Contractors within West Essex

### 2.8.1 Essential services

The following Essential services are required to be provided by all DACs:

- home delivery service
- supply of wipes and disposal bags
- provision of appropriate advice
- dispensing referral
- repeat dispensing
- urgent supply without a prescription

### 2.8.2 Advanced services

Advanced services require the health professional delivering the service to be suitably training and qualified, and unless they are provided at the patient's home, their premises to meet standards that enable them to provide these services in a suitable confidential environment.

- Stoma appliance customisation
- Appliance use reviews

## **2.9 Local Pharmaceutical Service (LPS)**

The LPS Regulations April 2006 enable an alternative framework for awarding contracts for provision of pharmaceutical services. LPS is a tool available to PCTs by which they may contract locally for provision of pharmaceutical and other services, including services not traditionally associated with pharmacy, within a single contract. Given different local priorities and needs, LPS provides PCTs with the flexibility to commission services that address specific local needs as well as general situations not covered by the national community pharmacy contractual framework

At the time of publication of this document, there are no LPS providers contracted within West Essex

## **2.10 Pharmaceutical Development Group**

The aim of this Group is to review the services currently provided by community pharmacy and dispensing doctors and to develop a strategy and model for the future delivery of these services within NHS West Essex. The vision is to:

- better integrate pharmaceutical services into the full range of health services
- make full use of pharmacists' skills
- develop pharmaceutical services to improve health outcomes of the local population
- ensure value for money within the contractual framework
- monitor performance within the contractual framework

## **3. DEVELOPMENT OF THE PNA**

In developing the PNA, the PCT:

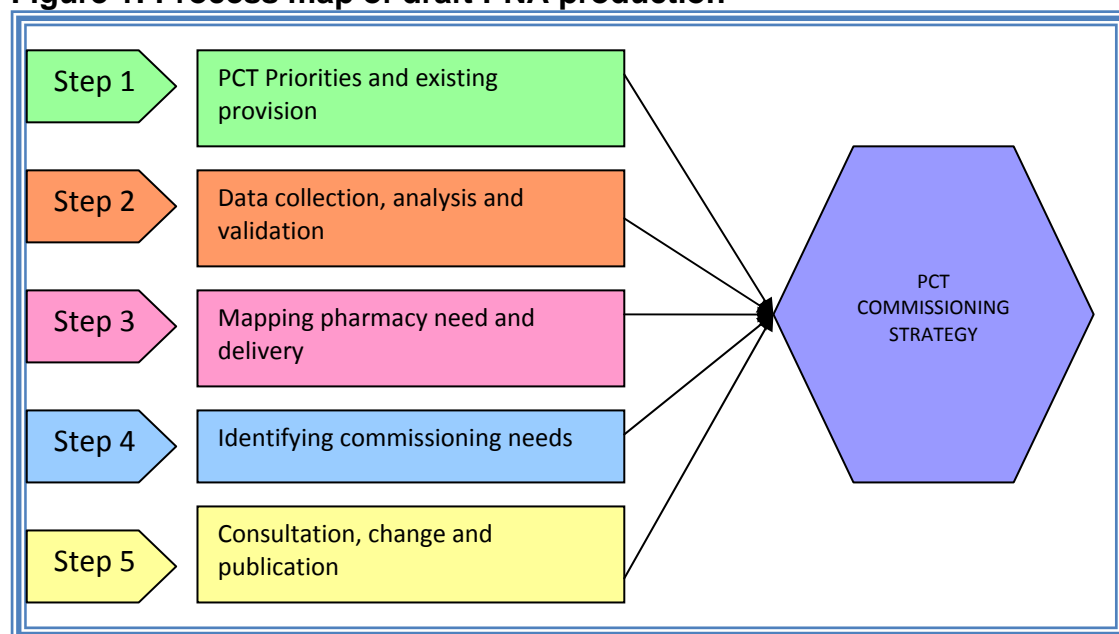
- Identified key people to lead on the process
- Set up a core group to carry out agreed tasks and work streams
- Set up a Stakeholder Consultation and Engagement Board
- Sent out questionnaires to Community Pharmacy Contractors and Dispensing Doctors, Patients and Other Healthcare professionals
- Identified Localities and Middle Layer Super Output Areas (MSOAs) as the defined geographic areas for key health indicators
- Consulted on the Draft PNA

The process chart bellows details the analysis that was undertaken and the data gathering to inform the first draft of the PNA. Public consultation was



then undertaken for 60 days with feedback from this being incorporated in to the published document.

**Figure 1: Process map of draft PNA production**



### 3.1 Data Collection

The following sources were used to collect data on the health and pharmaceutical needs of the local population:

- Local authority / PCT Joint Strategic Needs Assessments
- PCT Public Health Annual Reports
- Health Needs Assessments produced or commissioned by the PCT public health team
- Public health data
- Patient / public questionnaire (Appendix E)
- Community Pharmacy Questionnaire (Appendix F)
- Dispensing doctor / dispensing appliance contractor questionnaire (Appendix G)
- Healthcare professional questionnaire (Appendix H)
- PCT monitoring data
- Commissioning data



## 3.2 Process

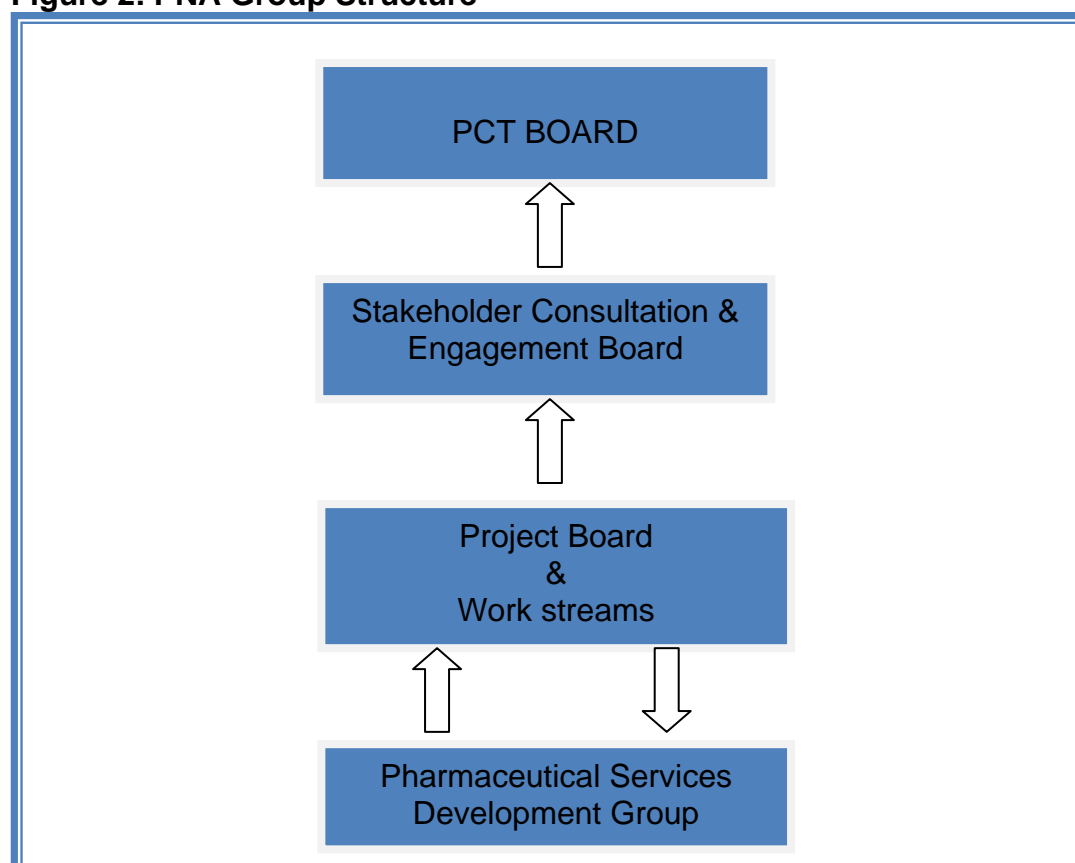
### Key People

The group consists of the core team and a wider membership drawn from:

- None-Executive Director
- Lead Director
- Head of Medicines Management
- Head of Primary Care & Commissioning
- Head of Integrated Governance
- Senior Contracts Manager
- Local Involvement Network (LINKs)
- Public Health
- Finance
- Communications lead
- Local Pharmaceutical Committee (LPC)
- Local community pharmacy input
- Local Medical Committee (LMC).
- Dispensing Doctors

Local circumstances mean that one group member may cover more than one of these roles.

**Figure 2: PNA Group Structure**



- **Stakeholder Consultation & Engagement Board** -This Board was set up to consult on the progress of the PNA and draft work submitted to it. All draft work produced by the Project Board and work streams fed into the board for consultation and discussion on amendment. All work submitted followed the requirements of a PNA as outlined in the document “Pharmacy in England – Building on strengths- delivering the future – Regulations under the Health Act 2006-Pharmaceutical Needs Assessment. Information for Primary Care Trusts”<sup>4</sup>. Feedback received from the stakeholder board was incorporated into the live document where both guidance and the PCT strategy allowed for incorporation.

Progress reports on the project were shared with the PCT Executive Team for the PCT prior to the publishing of the draft PNA for consultation.

- **Core Group** – The core group is closely linked to the PCT’s Pharmaceutical Services Development Group and is tasked with delivering the work streams as directed by the PNA project manager. (e.g. production of maps, information-gathering, analysis of questionnaires, validation of data etc). The core group members are drawn from the Stakeholder Group, according to their relevant expertise.

### 3.3 PCT PNA Roadshow

The PCT held a PNA Roadshow on 8<sup>th</sup> September 2010 which was open to providers of pharmaceutical services and managers in West Essex. The Primary Care leads and Medicines Management team for West Essex were in attendance to discuss the PNA, assist contractors in supplying accurate information via the questionnaire to support the development of the PNA and discuss the process in general.

### 3.4 Public Questionnaire

A questionnaire was developed to find out the views of West Essex residents on the accessibility of community pharmacies and the range of services that they provide.

The questionnaire was not intended to collect information on dispensing doctors; they provide dispensing services to those patients on their dispensing list and although a wide range of other services may be available from the GP practice they are provided under General Medical Services and therefore

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<sup>4</sup> Department of Health. “Pharmacy in England – Building on strengths- delivering the future – Regulations under the Health Act 2006-Pharmaceutical Needs Assessment. Information for Primary Care Trusts. March 2010. Available at [www.dh.gov.uk/publications](http://www.dh.gov.uk/publications)

outside of the scope of this PNA. A separate questionnaire was produced for dispensing doctors.

The questionnaire method was chosen as an expedient way of collecting information on the behaviours and attitudes of the local population. Questionnaires can be circulated to a wide range of organisations across the area for onward distribution to their members; they can be completed at a time to suit the respondent, and are anonymous.

We recognise that there are disadvantages to the use of questionnaires. In order to cover the range of questions that we wanted to ask it was long, and required a certain level of literacy, which will have excluded some respondents. In some settings, where the questionnaire was given out in person, some support was available to complete it. Questionnaires generally have a low response rate and our distribution method of using local organisations meant that we don't know how many individuals received a copy so the response rate is unknown. We also posted the questionnaires to a sample of 500 patients who are registered with practices in the West Essex area. These are limitations to the extent to which the data can be analysed, but the responses do, when used in conjunction with other data, provide a picture of how local pharmaceutical service provision is viewed.

A copy of the questionnaire is included Appendix E.

It was distributed to the following:

- Via LINKS for West Essex
- Media release
- Harlow Walk-in Centre
- St Margaret's Hospital
- Community Groups
- Local community websites
- In community pharmacies
- Through GP surgeries
- Through Dental surgeries
- Through Ophthalmic outlets
- Via the Out of Hours GP service
- Via the PCT website and intranet
- In the NHS West Essex staff newsletter "WE-brief"
- In the monthly external newsletter "WE News"

The consultation process was also highlighted through:

- Twitter (Internet Social Networking Site)
- Patient Information leaflet
- West Essex Community Health Service

### **3.5 Healthcare Professionals Questionnaire**

A copy of the healthcare professionals' questionnaire can be found at Appendix H. This was distributed through the channels below:

- GP surgeries
- Dental surgeries
- Ophthalmic outlets
- Out of Hours GP service
- PCT website and intranet
- WECHS
- In the NHS West Essex staff newsletter (WE-brief)

### **3.6 Dispensing doctors questionnaire**

This was circulated to dispensing doctors only (Appendix G).

### **3.7 Community Pharmacy Questionnaire**

This was based on the Pharmaceutical Services Negotiating Committee (PSNC) template and was agreed with the LPC (Appendix F).

### **3.8 Consultation Process**

The Health Bill 2009, in setting out the requirements for developing Pharmaceutical Needs Assessments (PNA), includes requirements for consultation and lists those who must be consulted at least once during the process of making the assessment, and must be given at least 60 days to make their response.

Each PCT is required to consult the following as part of the consultation process on their draft PNA:

- any Local Pharmaceutical Committee for its area (including one for its area and that of one or more other PCTs);
- any Local Medical Committee for its area (including one for its area and that of one or more other PCTs);
- the persons on its pharmaceutical lists and its dispensing doctors list (if it has one);
- any LPS chemist with whom the PCT has made arrangements for the provision of any local pharmaceutical services;
- any person with whom the PCT has made arrangements for the provision of dispensing services;

- any relevant local involvement network, and any other patient, consumer or community group in its area which in the opinion of the PCT has an interest in the provision of pharmaceutical services in its area;
- any local authority with which the PCT is or has been a partner PCT;
- any NHS trust or NHS foundation trust in its area; and
- any neighbouring PCT.

NHS West Essex undertook extensive consultation with partners and stakeholders as part of the development of the PNA. The consultation included a template to capture comments and feedback. Sixty days were allowed, from the likely date of receipt, for comments to be returned.

## 4. LOCALITIES DEFINITION AND DESCRIPTION

### 4.1 Dividing up the area

The PNA regulations require that the PCT divide the PCT area into localities which are then used as a basis for structuring the assessment. For the purposes of the PNA the Project Board decided that the PNA should use local authority area and middle layer super output areas (MSOAs) where possible.

MSOAs are made up of smaller Super Output Areas (SOAs) which are administrative units of geography which have been established by the Office for National Statistics. SOA boundaries do not change and are designed for the collection and publication of statistics as they provide a consistent basis for tracking changes in the population over time.

The minimum population of an MSOA is 5,000 and the mean is 7,200. There are 37 MSOAs which fall within the boundary of west Essex, and NHS West Essex covers a further half of one MSOA in the Steeple Bumpstead area the other half of which is covered by NHS Mid Essex.

In order to be able to relate pharmaceutical needs and services to the available data, the MSOAs level data has been used as the basis of this PNA where it is necessary to look at a particular area in more detail than at the level of the three local authority areas. Appendix J shows the locations of the MSOAs and local authorities within NHS West Essex.

### 4.2 Demographic data

NHS West Essex currently has a resident population of 279,066 and a registered population of 286,060. This equates to just under 7,000 extra people who are registered with the PCT and not resident in the area. The

current population for NHS West Essex broken down into the three localities of Epping Forest, Harlow and Uttlesford can be seen at Table 1.

NHS West Essex has a different population structure to that of England as a whole; it has slightly more older people and fewer 15-34 year olds, which may reflect the movement of this group to other areas which are more affordable to live in. There are a similar proportion of children aged under 5 and more 5-14 year olds than the national average as indicated in the Figure 6 in Appendix K. Epping Forest has the highest proportion of people aged 65 years and older. Harlow has a slightly higher proportion of under 5s, although proportions of children under 14 years are similar. Uttlesford have fewer younger (15-44 years) adults, and more middle aged adults and 5-14 year olds.

The population structure of NHS West Essex and each of the local authorities can be seen in Appendix K. The number of females is higher for most age groups from 25 years onwards. In the under 25 year old population 48.5% are women compared to the 65+ population where around 57% are women. By the age of 85+ this figure has increased to 68%. These differences are largely due to consistent patterns of longer life expectancy in females.

The population of each of the MSOAs in west Essex can also be seen in Appendix V.

**Table 1: Population of west Essex**

	Resident population (2008 mid-year estimates)		Registered population (as at 1st April 2010)	
	Number	% of total population	Number	% of total population
Epping Forest	123,912	44.40%	114,215	39.90%
Harlow	78,973	28.30%	89,647	31.30%
Uttlesford	73,712	26.40%	82,198	28.70%
NHS West Essex	279,066		286,060	

Source: Resident population Office for National Statistics mid-year 2008 estimates, registered population Essex Contractor Services

The projected populations to 2025 for each of the three west Essex localities can be seen in Appendix L. All three areas are predicted to increase the size of their populations with the Uttlesford locality predicted to have the largest increase overall and in the oldest and youngest age brackets.

### 4.3 Deprivation

Index of Multiple Deprivation (IMD) scores are produced by combining a number of indicators, chosen to cover a range of economic, social and housing issues, into a single deprivation score for each small area in England. This allows each area to be ranked relative to one another according to their level of deprivation. The higher the score, the greater indication of deprivation.

How the districts in west Essex compare to other areas in Essex on IMD score can be seen in Appendix M. Only Harlow has a score higher than the Essex average with 21.4, while Epping Forest has a score of 14.3 and Uttlesford 6.9.

Harlow is ranked 121 out of 354 local authorities (where 1 is the most deprived. This puts Harlow in the bottom 40% most deprived local authorities in England. Uttlesford is ranked 347 out of 354 local authorities making it in the 5% least deprived local authorities in England, while Epping Forest is ranked 229.

On average, west Essex is not very deprived, but averages disguise the significant disadvantage experienced by some sections of our population. The IMD 2007 provides deprivation indices at sub-district level (super output area, SOA). The use of the SOAs means that pockets of deprivation can be targeted more effectively with services and it also highlights the small areas of deprivation that can be masked by being situated in a relatively affluent area. West Essex has some of the most affluent and some of the most deprived areas in the country. Many of the most deprived areas also experience the lowest levels of life expectancy. How deprivation looks at the MSOA level across west Essex can be seen in Figure 8 of Appendix M and Table 28 of Appendix V.

#### 4.4 Life Expectancy

Life expectancy is a measure of overall life chances and is a key measure of health inequalities. Life expectancy has been increasing over the years and data shows that west Essex has better health than the national average in all 3 districts, but there are differences between men and women (Figure 9 in Appendix N).

The average life expectancy for NHS West Essex was 78.8 years for males and 82.7 years for females for 2006-2008, a difference of 3.9 years or 5%. Harlow men have the lowest life expectancy across all of the three districts in west Essex, and the lowest across the whole of Essex. There is a 5.2 year difference in life expectancy between Harlow men and Harlow women with 78 years and 83.2 years respectively. The life expectancy for men in Epping Forest in 2006-2008 was 78.9 years and for women 82.1 years. For the same period the life expectancy for males in Uttlesford was significantly higher than national with 79.5 years. The female life expectancy is 83.7 years, which is also statistically significantly higher than the national average.

**Table 2: Life expectancy in years, 2006-2008, and rank of LA or county (LA n=324, County n=47)**

Locality	Males		Females		Males and female difference in years
	Life expectancy in Years (rank)	96% CI Males	Life expectancy in Years (rank)	96% CI Females	
Epping Forest	78.9 (127)	78.3 - 79.4	82.1 (180)	81.6 - 82.6	3.2
Harlow	78 (194)	77.2 - 78.9	83.2 (87)	82.4 - 83.9	5.2
Uttlesford	79.5 (78)	78.8 - 80.3	83.7 (43)	83 - 84.4	4.2
NHS West Essex	78.8 (41)	78.4 - 79.2	82.7 (42)	82.4 - 83.1	3.9
Essex CC	79 (14)	78.8 - 79.2	82.9 (12)	82.7 - 83	3.9
East of England	78.9 (-)	78.9 - 79	82.8 (-)	82.7 - 82.8	3.9
England	77.93 (-)	77.9 - 77.96	82.02 (-)	82 - 82.05	4.09

Source: Office for National Statistics



Life expectancy at the lower geographical level of MSOA can be seen in Figure 10 in Appendix N. There is some variation between males and females, but for both sexes the area with the lowest life expectancy in west Essex is in the MSOA of Epping Forest 07 which is north east of Waltham Abbey covering the area of Waltham Abbey Paternoster, with 74.6 years for males and 75.7 years for females.

#### 4.5 Ethnicity

The population of west Essex is less ethnically diverse than that of the England average (Table 3). Uttlesford has the largest percentage of its population classified as white British (95.1%). Of the three west Essex local authorities, Epping Forest has the highest proportion of people from black and minority ethnic groups at 8.8%<sup>5</sup>, with Harlow at 8.3% and finally Uttlesford at 4.9%.

The largest ethnic group in Harlow other than White is Chinese with 0.9%, in Epping Forest it is Indian with 1.7% and in Uttlesford it is other ethnic groups with 0.3%.<sup>5</sup> Figure 11 in Appendix O shows Essex concentrations of non-White British population in NHS West Essex by LSOA. The higher concentration of residents from ethnic groups can be seen at the southern end of Epping Forest inside the M25.

The ONS has produced modelled statistics on ethnicity, and Figure 12 in Appendix O shows that districts in Essex have become more diverse since the 2001 Census. The areas closest to London and those containing the largest towns tend to have the highest concentrations of people from minority ethnic groups. Epping Forest and Harlow are two of the areas which have the highest proportion of people from all minority ethnic groups in Essex.

**Table 3: The proportion of the west Essex population from BME groups**

	% of total population from non –white ethnic groups (number)	% of total population from white minority groups (number)	% of total population from Black and minority ethnic groups (number)
Epping Forest	4.90%	3.90%	8.80%
Harlow	5.10%	3.20%	8.30%
Uttlesford	1.80%	3.10%	4.90%
West Essex	4.2% (11,214)	3.5% (9,274)	7.6% (20,488)
England	9.10%	3.90%	13.10%

Source: Office for National Statistics, 2001 Census

<sup>5</sup> Office National Statistics. 2001 Census



#### 4.6 Education

The general level of educational attainment within a population is closely associated with the overall level of health<sup>6</sup>.

Educational attainment levels across west Essex are increasing but are variable. The percentage of young people achieving 5+ A\*-C grades at GCSE continued to rise. In 2008/09 Uttlesford had the highest percentage achieving 5+ A\*-C grades at GCSE with 74.5% whilst Epping Forest had the lowest percentage 69.1%, and Harlow had 69.1%. The percent of the population achieving 5+ A\*-C grades at an MSOA level can be seen in Figure 13 in Appendix P and Table 28 in Appendix V, where it ranges from only 54.4% in Epping Forest 008 to 85.4% in Uttlesford 001. This shows that secondary education in west Essex can be quite variable between and within districts.

#### 4.7 Socioeconomics

The Office for National Statistics produces a classification of employment by occupation. Figure 14 in Appendix Q shows that the majority of all three west Essex local authorities fall within the major group of 1-3 , comprising of occupations such as managers, senior officials and professionals.

#### 4.8 Employment

Table 27 in Appendix R shows the employment and unemployment figures from the annual ONS population survey for 2009/10 compared to 2005/06. Of the three west Essex local Authorities, the Harlow locality has the largest proportion of people classed as unemployed at 12.9%, higher than the Essex average. Unemployment for Epping Forest stands at 9.7%, and Uttlesford 3.4%. All three areas have seen an increase in unemployment from 2005/06 and females appear to experience higher unemployment rates in the west Essex local authorities than males which is different to the national picture. The ethnic minority populations in Epping Forest and Harlow appear to have a lower employment rate than the population as a whole, while in Uttlesford they have a higher employment rate.

Table 4 on the following page looks at key benefit claimants from the working-age client group. In line with the regional picture, the greatest proportion of people on benefits in west Essex are 'out-of-work' related and consists of the groups: job seekers, incapacity benefits, lone parents and others on income related benefits. Harlow has the highest proportion of people claiming benefits with 15.8% which is also the second highest in Essex.

<sup>6</sup> C.f. White et al (1999) Educational attainment, deprivation-affluence and self-reported health in Britain: A cross-sectional study, *Journal of Epidemiology and Community Health* Vol.53 535-541

**Table 4: Percent of the population claiming benefits out of the working age population, February 2010**

	Epping Forest	Harlow	Uttlesford	Essex	East	Great Britain
Total claimants	10.9	15.8	7.3	12	12	15.1
<b>By statistical group</b>						
Job seekers	3	4.9	1.9	3.2	3.2	3.9
ESA and incapacity benefits	4.3	5.8	2.9	5	5	6.7
Lone parents	1.5	2.4	0.7	1.5	1.4	1.8
Carers	0.7	1	0.6	0.9	0.9	1.1
Others on income related benefits	0.4	0.5	0.3	0.4	0.4	0.5
Disabled	0.8	1	0.7	0.8	0.8	1
Bereaved	0.3	0.2	0.2	0.2	0.2	0.2
Key out-of-work benefits†	9.2	13.7	5.8	10.1	10	12.9

† Key out-of-work benefits includes the groups: job seekers, ESA and incapacity benefits, lone parents and others on income related benefits. See the Definitions and Explanations below for details

Note: % is a proportion of resident population of area aged 16-64

Source: DWP benefit claimants - working age client group

## 4.9 Carers

As our residents grow older, levels of impairment and disability will rise. Many people with long-term health problems are already cared for by family members – often a child or partner. There are large numbers of carers living within west Essex, but the vast majority of these are unpaid and many do not receive benefits.

Around 10% of the Uttlesford and Epping Forest population are unpaid carers, compared with 9% in the Harlow. A proportion of these carers will be young people and children in NHS West Essex around 1.2% of carers are under the age of 20<sup>7</sup>. The proportion of unpaid carers in west Essex by MSOA level can be seen in Figure 15 in Appendix S and in Table 28 Appendix V. This shows that there are a number of MSOAs in Epping Forest and a couple in Uttlesford that had a significantly higher number of carers than the NHS West Essex average.

The number of over 65 year olds known to social services in 2008-09 in west Essex can also be seen in Table 5.

**Table 5: Carers in the older people known to social care**

	Older People known to social care during the year	
	Caseload	Rate per 1,000 65+
Epping Forest	2,673	127
Harlow	1,756	149
Uttlesford	1,468	122
PAN Essex	37,881	130

<sup>7</sup> Office for National Statistics, 2001 Census

Source: Caseload, RAP 08-09

The information shown here only account for the carers we know about and not the thousands of other 'hidden' adults, young people and children who are caring for someone.

#### **4.10 Housing**

Conditions in the home and of the neighbourhood can have a big impact on our health and well-being. Poor quality housing is associated with increased levels of limiting long-term illness, respiratory and infectious diseases, accidents, psychological problems, perceived poor general health and even increased mortality. The most important risks appear to be cold, damp and mouldy housing conditions. Cold housing is one of the factors associated with excess winter deaths.

Overcrowding and living in high-rise flats is associated with psychological symptoms including depression. Our Healthier Nation recognises the importance of good housing in reducing stress and its association with other factors such as poverty, pollution, crime and poor access to facilities.

Overcrowding could affect the health and well being of some residents of in west Essex. At the time of the Census (2001) only 0.6% of Uttlesford households had more residents than rooms, a sign of overcrowding, 1% in Epping Forest and in Harlow 2% households which is higher than the national average.

The percentage of Local Authority Dwellings that fall below the 'Decent Homes Standard' varies across west Essex from 1.6% in Uttlesford, 3.6% in Epping Forest and 8.1% in Harlow in 2008.

#### **4.11 Rurality**

The Office for National Statistics defines urban and rural areas by the population size or the proportion of the population within an area. Census Output Areas forming settlements with populations of over 10,000 are urban, while the remainder are defined as one of three rural types: town and fringe, village or hamlet and dispersed, and assign these to either a 'sparse' or 'less sparse' regional setting to give eight classes of Output Areas. The Definition also applies to Super Output Areas and wards, but with a reduced number of settlement types.

The Local Authority (LA) Classification was introduced in 2005 in order to differentiate between rural and urban for those statistics that are only available at LA level. It provides six classifications. Significant local government reorganisation in April 2009 meant that a change to the LA classification methodology was required. For the local authority areas in west Essex Epping Forest is described as Significant Rural, indicating the district has between 26 and 50 percent of its population in rural settlements and large market towns. Harlow as an Other Urban area while Uttlesford as Rural-80 which are

authorities with at least 80% of their population in rural settlements and large market towns. Overall NHS West Essex is described as a Significant Rural area.

The rural/urban classification of the MSOAs in west Essex is shown in Figure 16 of Appendix T, and from this we can see that much of west Essex is rural and we know that the more rural areas of Epping Forest and Uttlesford are among the most deprived in England on the measure of access to services in the IMD 2007.

Under the NHS (Pharmaceutical Services) Regulations 2005 (Revised 2009), PCTs can determine whether a defined area is 'controlled' (i.e. rural) in character or not. Where an area has not had a determination, under current Regulations, the PCT must follow a set procedure, as set out in the Regulations, in determining the area. For the purposes of the Regulations, an area is by definition not rural, until it has been determined as such. West Essex has a number of areas where no determination of rurality has been made (see Figure 17 in Appendix T). It should be noted that these determinations of rurality are not necessarily the same as the Office for National Statistics definition.

#### 4.12 Car Ownership

Appendix U shows the proportion of the households that are not likely to own a car. It shows that in rural areas people are more likely to own to a car than in urban areas.

#### 4.13 Public Transport

Essex has a wide network of commercial and council-run bus routes. The accessibility strategy for Essex highlights that most of the areas in west Essex can access a hospital by public transport in under an hour. In the more rural areas of west Essex access to other services is less favourable with many areas not able to reach them in less than an hour by public transport. Access from rural areas has been highlighted as a priority in the accessibility strategy.

Community-based transport schemes operate across west Essex for those people who have difficulty accessing public transport:

- ❖ Uttlesford Community Travel
- ❖ Harlow Dial-a-ride
- ❖ Epping Forest Community Transport

The schemes have different membership and access requirements but offer an alternative to local residents who may not have access to a car or appropriate means of transport.

#### 4.14 Seasonal Trends

The population in west Essex do not show any distinct seasonal trends. There are no prisons or universities within the area. There are two local colleges in

Harlow and Loughton which can draw in people from the surrounding areas but there are no large changes in the population. The areas in west Essex with a large amount of farming can experience an increase in the number of migrant workers during certain time of the year but there are no figures to suggest how many this might be.

#### **4.15 How the needs of different localities have been taken into account**

As described in section 4.1, this data is usually presented by local authority area or by MSOA and these classifications are used when looking at the health needs of different localities within west Essex.

Appendix V shows the health needs of each MSOA in west Essex by a number of different topic areas compared to NHS West Essex as whole. Many have also been mapped geographically to show the areas of most need. From this analysis we can see that a number of the MSOAs experience poorer health outcomes. Epping Forest 007, 009 and 015 experience significantly worse health outcomes than the NHS West Essex average for a number of areas including life expectancy and a range of causes of deaths.

Some areas are identified in the Annual Report of the Director of Public Health and the JSNA as experiencing inequalities in health and the pharmaceutical services available in those areas are to be considered. Other areas are identified as having health needs by further analysis of health data as described in section 5.

#### **4.16 How the needs of different groups have been taken into account**

The PNA looks at the needs of different patient groups that share one or more of the attributes of age, disability, gender, gender reassignment, race, religion or belief and sexual orientation, and other communities that are identified as having specific pharmaceutical needs through the public questionnaire and other health needs assessments. The aim is for services to be accessible to those who need them, and for no group to be disadvantaged by local pharmaceutical services. For further information on how the needs of different groups are considered see section 5.2

## **5. EQUALITY IMPACT ASSESSMENT**

Equality Impact Assessments are a tool to ensure that equality, social inclusion and community cohesion and access issues can be considered when new policies or proposals which affect the delivery of services are being developed.

NHS West Essex has carried out an Equalities Impact Assessment to ensure that no group of people would be disadvantaged by the content of the PNA, as this will be the new commissioning tool used for determining new pharmacies and pharmaceutical services that the PCT identify for the needs of the population either immediately (necessary), or in the future.

The Impact Assessment findings are that the introduction of the PNA will improve services for patients as the PCT have now identified levels of need in all areas so can target future provision to address that need.

There were no groups identified that would be disadvantaged by the PNA due to the need to assess access to services for specific groups.

## **6. LOCAL HEALTH NEEDS ASSESSMENT**

The term need can be used in differing contexts and should be distinguished from demand and use. Jonathon Bradshaw, Associate Director of The Social Policy Research Unit; University of York, defines four ways in which need is perceived:

- Normative need, based on professional judgement (such as the need for medical treatment).
- Felt need, which comprises individual's perceptions of variations from normal health.
- Expressed need, which can be the vocalisation of need or how people use services.
- Comparative need, based on judgements by professionals as to the relative needs of different groups.

For the purposes of health needs assessment, need is assumed to exist when there is an effective and acceptable intervention, or the potential for health gain. Demand for health care services is the expression of felt need, i.e. the services that people ask for, where as use is determined by service utilisation which can be assessed in various ways including service activity and population activity.

### **6.1 Health needs of Epping Forest, Harlow and Uttlesford**

The Annual Report of the Director of Public Health, JSNA, and national health profiles show that the three local authority areas in west Essex have different health needs. Some of these health needs are highlighted below

#### **Epping Forest**

Epping Forest district is a mixture of rural and urban areas and experiences large inequalities and has varying health needs in different areas. The more rural areas tend to have poorer access to services and the urban areas with high deprivation experience poorer health outcomes and have a large proportion of the population taking part in unhealthy life style behaviour. Particular MSOAs which experience poorer health outcomes are Epping Forest 007, 008 and 015.

#### **Harlow**



Harlow is one of a number of ‘new towns’ built in the 1950’s to provide social housing to people living in London. It is considered to be relatively deprived and in general the population experiences poorer health outcomes and have a large proportion of the population taking part in unhealthy life style behaviour than the other local authorities in west Essex. Particular MSOAs which experience poorer health outcomes are Harlow 007 and 011.

### Uttlesford

Uttlesford is a largely rural area of approximately 250 square miles. Due to the rural nature of the area many parts of the area experience poor access to services. Overall Uttlesford is considered to be quite affluent and compared to the other local authority areas in west Essex has better health outcomes and more people taking part in healthy life style behaviours. There are no MSOAs in Uttlesford that experience significantly worse health outcomes than the NHS West Essex average.

In the following sections we look at a number of areas in NHS West Essex where there are health needs as highlighted by the Annual Report of the Director of Public Health and the JSNA.

#### 6.1.1 Life styles and risk factors

A risk factor is something that increases a person’s chance of developing a disease or sustaining an injury. This section examines some of these lifestyle choices and subsequent health outcomes. Table 6 below draws together factors which have been shown to correlate to poor health outcomes, and key findings are summarised below.

**Alcohol** - Alcohol consumption affects not only the self, but also the family, society and the health services (“passive drinking”). Uttlesford has the highest proportion of adults drinking above recommended levels. Harlow has the highest burden of alcohol-related disease, followed closely by Uttlesford and Epping Forest.

**Table 6: Life styles and risk factors in adults by local LA area in west Essex**

Area	% of adults				Achieving advised level of physical activity	Eating 5 + portions of Fruit and Vegetables a day	Hypertension	
	Drinking alcohol at/below levels	alcohol advised	Smoking	Obese			GP recorded 2008/09	Modelled estimate 2009
Epping Forest	74.9		15.7	14.9	40.6	42.5	13.10%	29.70%
Harlow	80.7		21.4	13.7	40.8	41.5	13.40%	30.20%
Uttlesford	72.6		14.9	10.3	49.9	48.6	13.60%	30.90%
Essex	78.5		19	15.3	44.5	40.1		
East of England	79.4		20	15.5	43.3	39.6		

Source: East of England Lifestyle Survey 2008. [www.erpho.org.uk](http://www.erpho.org.uk)

**Smoking** - The district of Harlow has the highest smoking prevalence and the Uttlesford district the lowest. There is a correlation with smoking prevalence and deprivation. The gap between the most affluent and most deprived in respect of smoking attributable mortality is increasing amongst women. The MSOAs in west Essex which have the highest rates of Smoking-attributable

mortality are in the Harlow and Waltham Abbey areas and is shown in Figure 19 in Appendix W.

**Obesity** - According to the 2008 East of England Lifestyle Survey<sup>8</sup>, 15.3% of males and 11.2% of females in NHS West Essex are obese. This is likely to be an underestimation as it is based on self reported data. Out of the three districts in west Essex, the East of England Lifestyle survey suggests that Epping Forest has the highest prevalence, then Harlow and Uttlesford with the lowest. The increasing prevalence of obesity in west Essex is a threat to long-term health.

**Physical Activity** - Most people in west Essex are not active enough, particularly women and older people. Five of every ten residents in Uttlesford reported being active at the nationally recommended level which was higher than the 4 in every 10 in both Epping Forest and Harlow districts.

**Five a day** – Most people in west Essex do not eat enough fruit and vegetables in a day. Uttlesford has the highest proportion of residents eating 5 portions with 48.6% while Harlow the lowest with 41.5% and in Epping Forest 42.5% ate the recommended level.

**Hypertension** - The estimated prevalence of hypertension in NHS West Essex in 2008 for over-16 year olds was 31.5%, which is just above the national average of 30.3%. Of the three districts in west Essex, Uttlesford had the highest prevalence with 30.6%, Harlow 30.2%, and Epping Forest 29.7%. In all districts the prevalence for men was higher than for females, and in the future, the prevalence is expected to increase for both men and women. It is estimated that only around half of those with hypertension are included on their local practice disease register. Health Survey for England data was used to estimate the prevalence of hypertension rather than primary care data, so the higher prevalence in Uttlesford is not related to identification of people with hypertension in primary care.

### 6.1.2 Long term conditions

Long-term or chronic conditions are those conditions that cannot be cured but can be managed, sometimes over a period of years or decades. It is estimated that 15.4 million people in England live with a long-term condition and that management of long-term conditions accounts for about 70% of the total health and social care budget<sup>9</sup>. Over half of people aged over 60 have at least one long-term condition, and with an ageing population, we are likely to see an increase in the number of people being diagnosed and living with long term conditions. Table 7 in highlights the prevalence of long term conditions in west Essex and key findings are summarised on the following pages.

**Coronary heart disease (CHD)** - One in five men and one in six women will die from CHD. Death rates from CHD are higher in men, manual workers, people from lower socioeconomic groups and people of South Asian origin.

<sup>8</sup> <http://www.erpho.org.uk/viewResource.aspx?id=18641>

<sup>9</sup> Department of Health. Improving the health and well-being of people with long term conditions. London: DH, 2010



Of the three districts in west Essex, Harlow had the highest estimated prevalence of CHD 5.8%, Epping Forest 5.1% and Uttlesford 4.4%. In all districts, men have a higher prevalence than females and in the future the prevalence is expected to increase across the board, faster in men. The higher estimated figures compared to recorded levels suggest that there is a pool of up to 5,500 people with undiagnosed CHD.

**Table 7: Prevalence of estimated and recorded long terms conditions with England Comparator**

Area	Coronary Heart Disease (CHD)		Chronic obstructive pulmonary disease (COPD)		Diabetes		Asthma
	2008-09 GP Practice recorded	2009 modelled estimate	2008-09 GP Practice recorded	2009 modelled estimate	2008-09 GP Practice recorded	2009 modelled estimate	2008-09 GP Practice recorded
Epping Forest	3.20%	5.10%	1.40%	2.60%	4.90%	-	5.10%
Harlow	3.30%	5.80%	1.60%	3.30%	5.40%	-	6.10%
Uttlesford	3.00%	4.40%	1.40%	2.30%	4.30%	-	6.90%
NHS West Essex	3.10%	5.40%	1.40%	3.00%	4.90%	6.90%	5.90%
England	3.50%	5.60%	1.50%	3.60%	5.10%	7.30%	5.90%

Source: GP Practice QoF, [www.ic.nhs.uk](http://www.ic.nhs.uk). Modelled estimates, [www.erpho.org](http://www.erpho.org), APHO diabetes projections [www.apho.org](http://www.apho.org)

**Diabetes** - There are about 11,050 people diagnosed with diabetes in west Essex. The estimated prevalence of diabetes in NHS West Essex is 6.9% which is lower than the national average of 7.3% and similar to the regional average of 7.0%. About one in 4 people with Type 2 diabetes have not been diagnosed. The prevalence of diabetes is expected to increase, particularly with an ageing and increasingly obese population in west Essex. In west Essex, we would expect Type 2 diabetes to be most common in Epping Forest because of the higher proportion of people from Black and Minority Ethnic groups.

**Chronic obstructive pulmonary disease (COPD)** - Of the three districts in west Essex, Harlow had the highest estimated prevalence of COPD. In all districts prevalence in men is higher than women and in the future the prevalence is expected to increase across the board, faster in men.<sup>10</sup> The higher estimated figures compared to the recorded levels, suggest that there is a group of people with COPD that has not been identified, and who are not being managed in primary care.

**Asthma** – There are 16,906 people recorded by general practices as having asthma in NHS West Essex in 2008/09 and of the three localities Uttlesford has the highest rate with 6.9%, the lowest is in Epping Forest with 5.1% and Harlow has 6.1%.

### 6.1.3 Hospital Admissions

By better management of long term conditions, a focus on prevention and carrying out more routine (elective) care in primary care demand for hospital admissions can be reduced.

<sup>10</sup> Erpho. Modelled estimates and projections of COPD for Local Authorities in England (updated Oct 08)

High admission rates may indicate that there are undiagnosed patients who are not known to primary care services and are therefore not being managed via their GP practice.

**Table 8: Hospital data**

	Age Sex Standardised Rates per 1,000 registered population					
	Elective admissions	Hospital admissions	Emergency hospital admissions	A&E Attendances	1st Outpatient Attendances	Follow up Outpatient Attendances
Area						
Epping Forest	141.01	84.52	244.28	285.51	725.23	
Harlow	158.59	94.07	353.61	314.25	753.18	
Uttlesford	140.77	67.9	179.41	266.28	574.73	
NHS West Essex	146.45	82.73	259.9	289	690.74	

Rates for top 10 Specialties - Ear Nose & Throat, General Medicine, General Surgery & Breast Surgery, Gynaecology, Ophthalmology, Paediatrics, Plastic Surgery, T&O (incl Rheumatology), Urology, Other (excl Maternity)

Source: Essex Shared Services

#### 6.1.4 Causes of Mortality

Within west Essex, mortality rates have largely improved steadily over the last ten years. Although the rate of improvement has tended to be faster for males, female mortality rates are, without exception, lower than those for males. Circulatory diseases (including stroke and CHD) remain the most common cause of death at ~34% of the total. Cancer is a close second at ~29%. The pattern of cause of death is similar for both males and females except that males have a higher percent of deaths due to cancer and females a higher percent due to other causes.

Table 29 and Table 30 in Appendix V show the mortality rates for a number of causes by local authority and MSOA. From this we can see that <75 year old Harlow people and males have significantly higher mortality rates than the NHS West average.

Mortality rates in Uttlesford are lower than the other local authority in west Essex for all the causes, genders and age groups shown, accept for all age cancer in males which is higher than Epping Forest but not Harlow.

Mortality at a MSOA level shows large inequalities across west Essex and in particular in Epping Forest. Key MSOAs which show significantly higher rates of mortality for a number of causes, age groups and genders are Epping Forest 007, 008, 009 and 015 and Harlow 007 and 011.

#### 6.1.5 Mosaic Synthetic estimates of health needs

Mosaic data is developed by Experian and is a method of geographic segmentation which classifies households and postcode areas based on the demographics of age, ethnicity, financial data, census data, spatial attributes and attitudinal and psychographic factors. The classifications are then profiled with interpretive and descriptive data including Hospital Episode Statistics

(HES), Health Survey for England data, British Crime Survey data and Target Group Index surveys amongst others. This allows development of propensity models for any household, postcode or area to suffer from a particular condition or require a particular service. The data can also be used to identify the Mosaic types of service users, and then highlight other areas where potential users of that service may be. No local patient data is used.

The figures in Appendix Y show the areas which are likely to have high levels of different health needs for the following:

- light smokers
- heavy smokers
- diabetes
- cardiovascular disease (CVD)
- COPD
- teenage pregnancy

## 6.2 Health needs of certain groups

Certain groups have been identified, generally and through local information including the Annual Report of the Director of Public Health and the JSNA, as having different health needs. These groups are considered below.

### 6.2.1 Older people

The changing demographic profile of west Essex will see more residents reaching retirement whilst there are fewer people in the population to provide services that this population required. More staff or radically different models of service delivery will be needed to meet increasing demands. In addition, as people get older they can become less mobile and many could become isolated and unable to access the services they need. Parts of west Essex – particularly rural areas – already suffer problems of service access and if older people lack access to transport, they are even more excluded from basic services.<sup>11</sup>

Many people are at risk of social exclusion and poverty as they get older with the risk being considerable higher in more deprived areas. This can affect their quality of life and well-being. Many of the people in the older population experiencing exclusion in a number of areas are already suffering from physical or mental health problems.<sup>11</sup>

**Living alone** - An increasing number are predicted to live alone. Table 9 on the following page shows people aged 65 and over living alone, by age and local authority area, projected to 2030. Epping Forest will have the largest population of over 65 living alone than Uttlesford, Harlow has the smallest. This reflects the population size and structure of those areas and how they will change in the future.

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<sup>11</sup> The Social Exclusion of Older People: Evidence from the first wave of the English Longitudinal Study of Ageing (ELSA), 2006

**Table 9: Number of people aged 65 and over living alone, by age and local authority area, projected to 2030<sup>12</sup>**

Population predicted to live alone:		2010	2015	2020	2025	2030
Epping Forest	aged 65-74	2,800	3,270	3,350	3,300	3,800
	aged 75 and over	5,366	5,719	6,418	7,619	8,311
Harlow	aged 65-74	1,480	1,600	1,690	1,820	2,020
	aged 75 and over	3,195	3,290	3,385	3,765	4,084
Uttlesford	aged 65-74	1,760	2,140	2,220	2,240	2,570
	aged 75 and over	3,046	3,460	4,186	5,163	5,787

Figures may not sum due to rounding. Crown copyright 2010.

Source: [www.poppi.org.uk](http://www.poppi.org.uk)

**Influenza immunisation** - In west Essex, the uptake of flu vaccination varies between districts and between individual practices. 2009/10 season flu vaccine uptake is summarised in Table 10 below. Uptake in people in a clinical at risk group is much lower than in over 65s.

**Table 10: Seasonal flu vaccination uptake in west Essex, 2009/10**

	Uptake in over 65s	Uptake in clinical at risk groups*
Range	58% to 84%	34% to 63%
Epping Forest	67%	40%
Harlow	73%	53%
Uttlesford	72%	51%
West Essex	70%	Approx. 47%

\*Based on incomplete data

Source: Immform

**Falls – Dementia** - The prevalence of dementia in the East of England is 0.76%. Prevalence in west Essex is similar between the districts (Epping Forest – 0.83% of the total population, Harlow – 0.76% and Uttlesford – 0.85%). The lower prevalence in Harlow reflects the younger population in this locality. There are about 2,330 on dementia registers in the west Essex, and this is forecast to rise to 3,260 by 2020, assuming the number of patients increases by 40% in line with the Dementia UK estimates.

Table 11 shows the rate of falls in NHS West Essex in the year 2008/09. There were 1,459 hospital admissions for falls in those aged over 65 (3% of the over 65 population is admitted in hospital because of falls every year) and 434 hospital admissions for hip fractures<sup>13</sup>, which are usually due to falls (1% of the over 65 population is admitted in hospital because of hip fractures every year).

<sup>12</sup> Figures are taken from the General Household Survey 2007, table 3.4 Percentage of men and women living alone by age, ONS. The General Household Survey is a continuous survey which has been running since 1971, and is based each year on a sample of the general population resident in private households in Great Britain. Numbers have been calculated by applying percentages of men and women living alone to projected population figures.

<sup>13</sup> Data from ERPHO, Eastern Region Public Health Observatory

NHS West Essex has a statistically significantly higher rate of admissions due to falls as compared to national average as well as East of England rate.

**Dementia** - The prevalence of dementia in the East of England is 0.76%. Prevalence in west Essex is similar between the districts (Epping Forest – 0.83% of the total population, Harlow – 0.76% and Uttlesford – 0.85%).<sup>14</sup> The lower prevalence in Harlow reflects the younger population in this locality. There are about 2,330 on dementia registers in the west Essex, and this is forecast to rise to 3,260 by 2020, assuming the number of patients increases by 40% in line with the Dementia UK estimates.<sup>15</sup>

**Table 11: Admissions due to falls in 2008/9 in people >65 years old**

Area	Directly standardised rates	Upper confidence interval	Lower confidence interval
Epping Forest	2,388	2,203	2,584
Harlow	2,797	2,530	3,085
Uttlesford	2,131	1,903	2,378
NHS West Essex	<b>2,442</b>	<b>2,314</b>	<b>2,576</b>
East of England	1,906	1,881	1,931
England	2,300	2,290	2,309

Source: Erpho Hospital Episode Statistics Extract

## 6.2.2 Children and Young People

Children are particularly vulnerable to social and environmental conditions within their household and wider community. Children from poorer backgrounds suffer higher rates of accidental injury, infections, failure to thrive, general ill health, anaemia, dental caries and teenage pregnancy. In addition, poorer families are less likely to have access to, and make appropriate use of, health services than those from more advantaged circumstances, and they are less likely to benefit from health promotion services and advice.

**Infant feeding** - The proportion of women initiating breastfeeding in west Essex was 72.3% at quarter 4 2009/10 which is similar to the national average of 72.7% and the regional average at 72.2%. The proportion of west Essex women still breastfeeding at 6 - 8 weeks, either partially or fully, was 35.3% at quarter 4 2009/10 which is well below the national average of 45.2% and the regional average at 44.9%. A recent infant feeding equity audit identified differences in the breastfeeding rates between areas in west Essex, with infants from more deprived areas less likely to be breastfed. In Uttlesford, 47.2% of infants were breastfed at 6 - 8 weeks compared with 36.8% in Epping Forest and 32.2% in Harlow.

<sup>14</sup> Erpho. Older People Health Profiles for Epping Forest, Harlow and Uttlesford

<sup>15</sup> Kings College London and London School of Economics. Dementia UK. The Full Report 2007. 2007

**Immunisations** – Within west Essex, there are differences in immunisation uptake between general practices and between districts. Uptake of childhood immunisations is highest in the Harlow district. Children in west Essex have a poorer uptake of MMR immunisation and the pneumococcal booster at 2 years than uptake of other childhood immunisations. This is similar to the regional and national position. There are groups of children known to be at risk of not completing the immunisation schedule. We are considering options for increasing uptake in these groups, including validating Child Health data by checking against practice lists, and offering vaccination in novel settings.

**Accidents and injuries in children** - NHS West Essex has a rate of emergency admissions in children resulting from injuries that is significantly worse than the East of England for 2008/09.

**Childhood obesity** - The prevalence of obesity amongst children attending schools in West Essex is 8.2% for Reception Year (children aged 4 – 5 years) and 15.9% for Year 6 (aged 10 – 11 years), both below the national average. The breakdown by locality can be seen in Table 12. The prevalence of obesity in reception year and year 6 children in Harlow is statistically significantly higher than the Essex average.

**Table 12: Proportion of Reception and Year 6 children measured as overweight or obese by area, 2008/09**

Area	Reception		Year 6	
	Overweight	Obese	Overweight	Obese
Epping Forest	10.10%	7.30%	15.40%	16.20%
Harlow	12.50%	10.50%	14.40%	21.20%
Uttlesford	11.80%	6.60%	13.80%	15.40%
NHS West Essex	11.30%	8.20%	15.00%	15.90%
Essex	12.40%	8.70%	14.60%	17.60%
East of England SHA	13.10%	9.30%	14.20%	16.70%
England	13.00%	9.60%	14.30%	18.30%

Local Authority mapping has been based on school location.

Source: NCMP 2008/09

**Smoking, drugs and alcohol** - In a survey in Essex schools, 47% of 15 year olds had drunk alcohol in the past week, 9% of pupils reported that they smoked regularly and 16% of pupils had taken drugs not prescribed for them by a doctor. Harlow district has a higher rate of young people in structured drug or alcohol treatment than Epping Forest or Uttlesford.

**Teenage conceptions** - Teenage pregnancy brings an increased risk of poor health and social outcomes for mothers and babies. Harlow has historically had a high teenage pregnancy rate in 2006-08, the under 18 conception rate in Harlow was the highest rate in Essex, and fourth highest in the East of England. Staple Tye, Toddbrook, Netteswell and Sumners and Kingsmoor wards in Harlow have particularly high teenage conception rates. The teenage conception rates in Epping Forest and Uttlesford are significantly lower than national rate. At ward level, Waltham Abbey Paternoster in Epping Forest has the third highest under 18 conception rate in the whole of west Essex. The proportion of pregnancies terminated is lower in Harlow than in



other areas in west Essex (Harlow 56%, Epping Forest 77% and Uttlesford 63% under 18 conceptions leading to abortion, 2006-08), but equal to the national rate.

**Table 13: Local under 18 conception rates (per 1000 females aged 15 - 17)**

Area of usual residence	1998-00			2006-08			% change in rate from 98/00 - 06/08
	Number	Rate	% leading to abortion	Number	Rate	% leading to abortion	
Epping Forest	167	29	59	197	27.9	77	-3.70%
Harlow	216	49.3	49	209	46.3	56	-6.10%
Uttlesford	63	15.9	62	87	19.5	69	22.60%
Essex County	2,407	35.4	49	2,514	32.1	55	-9.20%
ENGLAND	119,036	45	44	118,286	40.9	50	-9.10%

Source: Office for National Statistics

### 6.2.3 Disabilities

The Disability Discrimination Act (DDA) defines a disabled person as someone who has a physical or mental impairment that has a substantial and long-term adverse effect on his or her ability to carry out normal day-to-day activities.

The prevalence of disability rises with age. Around 1 in 20 children are disabled, compared to around 1 in 7 working age adults and almost 1 in 2 people over state pension age<sup>16</sup>. Compared with non-disabled people, those with disabilities are:

- more likely to live in poverty<sup>17</sup>
- less likely to have educational qualifications and more likely to be economically inactive<sup>18</sup>
- more likely to experience problems with hate crime or harassment<sup>19</sup>
- more likely to experience problems with housing and with transport (most often identified by disabled people as their biggest challenge)<sup>20 21</sup>

As our population ages, levels of disability will increase sharply. Older people are generally free of prolonged disability until they reach their 70s, after which they may face accelerating disability levels until death, but disability does not only affect older people.

The Learning Disabilities Registers housed by top tier Local Authorities contain current NHS and social care service users and is therefore a more comprehensive estimate of need compared to the number receiving social

<sup>16</sup> Family Resources Survey 2008/09

<sup>17</sup> Households Below Average Income 2008/09

<sup>18</sup> Labour Force Survey, Quarter 2, 2008

<sup>19</sup> British Crime Survey 2008/09

<sup>20</sup> ONS Opinions Survey 2009

<sup>21</sup> Department for Transport's Annual Sample Survey of Bus Operators



care services only. The number and rate of clients with learning disabilities in 2008/9 in the three districts in west Essex is shown in Table 14, as well as the people with a physical or sensory impairment. From this it shows that Harlow has the highest rate for both.

**Table 14: Rate of disabilities per 1,000 aged 18+, 2008-09**

	Learning Disabilities Register (number)	Learning Disabilities Register (rate per 1,000 18-64)	All forms of physical or sensory impairment (number)	All forms of physical or sensory impairment (rate per 1,000 18-64)
Epping Forest	181	2.4	360	4.7
Harlow	163	3.3	386	7.9
Uttlesford	109	2.5	166	3.7
Pan Essex	4134	3.9	6370	6.1

Source: Caseload, RAP 08-09

#### 6.2.4 Gender

Overall females experience better health than males with higher life expectancy and lower mortality rates. The East of England 2008 Life Style survey highlights that for NHS West Essex a higher proportion of males are overweight and obese compared to females, though males are more likely to take part in the recommended level of physical activity. Females were identified as being significantly more likely to drink harmful levels of alcohol (36+ units a week) compared to the regional average but they are still at lower levels than males.

#### 6.2.5 Ethnicity

Although West Essex is less ethnically diverse than the UK average, it none-the-less has a growing ethnic minority community. Studies have shown that people from minority ethnic groups suffer from poorer health compared to White British people. Men born in South Asia are 50% more likely than the general population to have a heart attack or heart disease. Men born in the Caribbean are 50% more likely to die of stroke compared to the general population.<sup>22</sup> South Asian people who live in the UK are also up to six times more likely to have Type 2 diabetes than the White European population.<sup>23</sup>

There are also ethnic differences in mental health. A study of new cases of psychosis showed that Black Africans were seven times more likely to be diagnosed compared to the White British population. In addition, Afro-Caribbean and Black African patients were more than twice as likely to access mental health services through the criminal justice system compared to White

<sup>22</sup> Parliamentary Office of Science and Technology. Postnote: Ethnicity and Health. 2007;276

<sup>23</sup> Hippisley-Cox J et al. Predicting the risk of Type 2 diabetes in England and Wales: prospective derivation and validation of QDScore. BMJ (2009);338:b880

British patients.<sup>24</sup> These differences led to the introduction of the Delivering Race Equality in Mental Health programme in 2005 to tackle health inequalities and improve mental health services for people from Black and Minority Ethnic (BME) communities.<sup>25</sup> An important component of this programme is community engagement.

#### 6.2.6 Religion or belief

Pharmaceutical needs are no different for this group of patients to the rest of the population and can be met by the provision of a core service.

#### 6.2.7 Sexual orientation

Pharmaceutical needs are no different for this group of patients to the rest of the population and can be met by the provision of a core service.

#### 6.2.8 Other groups

The following groups have been identified as having particular access needs:

**Gypsies and Travellers** - West Essex has approximately 23% of all the Gypsies and Travellers population in Essex. Travellers use health services much less often than the rest of the population. Life expectancy is lower for Travellers than for the rest of the population. At the last caravan count (both authorised and unauthorised caravan sites are counted) in January 2010, there were 245 caravans in west Essex.<sup>26</sup> This was 23% of all the caravans identified in Essex. Out of these the majority were in the Epping Forest district (136). Uttlesford had 65 caravans and Harlow had 44 caravans in the same count.

The East of England Gypsies and Travellers lifestyle survey highlights high rates of long-standing illnesses, smoking and obesity but lower rates of hazardous drinking<sup>27</sup>

**Substance misusers** - Substance misuse is more prevalent in the lower socioeconomic classes, and is associated with significant health risks. Harlow has one of the highest rates of adult drug clients receiving structured drug treatment in Essex. Epping Forest district has a rate much lower than Harlow, but higher than Uttlesford.<sup>28</sup>

<sup>24</sup> Fearon P et al. Incidence of Schizophrenia and other psychoses in ethnic minority groups: results from the MRC AESOP study. *Psychological Medicine* 2006;36(11):1541-1550

<sup>25</sup> Department of Health. Delivering Race Equality in Mental Health; An action plan for reform inside and outside services. London: Department of Health, 2005

<sup>26</sup> Gypsy and Traveller site data and statistics. 2010. (Accessed 16<sup>th</sup> Aug 2010, at <http://www.communities.gov.uk/publications/corporate/statistics/caravancountjan2010>).

<sup>27</sup> Ipsos MORI, NHS East of England. Lifestyle survey - Gypsies and Travellers. Draft report. 2009

<sup>28</sup> Drug and alcohol treatment agencies make monthly NDTMS submissions of all structured treatment activity (Tier 3 and 4 interventions as defined by Models of Care) to the National Treatment Agency for Substance Misuse (NTA). As these data submissions are at county level, and no information is available at the LA level, the information & maps above has been based on MUSE substance misuse profiles 2009

**Migrant workers** - Migrant workers suffer from higher mortality rates for some cancers, heart disease and stroke. The number of registered migrant workers has increased by over 50% in recent years.

**Homeless people** - Homeless people often have multiply health conditions and find traditionally health services difficult to engage with. As a result they have a higher premature mortality rate than the general population. Harlow district has the highest rates of homelessness in west Essex.

### 6.3 Reasonable Choice

Choice is just one of the factors to be taken into account when looking at the provision of pharmaceutical services in an area. Not just choice of service providers but choice of where and how to receive treatment / services.

There is a good distribution of 40+ hour community pharmacies across West Essex. Furthermore there are three 100-hour pharmacies located in Harlow. There are also three internet/ mail-order pharmacies located in West Essex. See Appendix DD.

The National Health Service (Pharmaceutical Services) Regulations 2005, regulation 12.2.b states that a Primary Care Trust shall have regard in particular to — whether the recipients of pharmaceutical services already have a reasonable choice with regard to:

- (i) the pharmaceutical services provided in the neighbourhood in which the premises named in the application are located, by persons included in a pharmaceutical list, and*
- (ii) the persons included in a pharmaceutical list from whom such recipients may obtain pharmaceutical services in the neighbourhood in which the premises named in the application are located;*

Even with limited or no choice, provision of pharmaceutical services can be considered adequate.

There may be little or no choice of provider but a choice of services may still be available. Some enhanced services may be available from providers other than a pharmacy for example a GP Practice. There is no requirement for all of the population to have a choice in the sense of more than one pharmacy within a certain distance.

## 7. CURRENT PROVISION

The following section looks at what services are currently provided within West Essex and those that are available to patients just on the borders of the

PCT. It also identifies the services that West Essex and our neighbouring PCTs provide where it is likely that our patient population will attend.

An essential service is a service that is provide as part of the pharmacy contractual framework. All contracted pharmacies have to provide these services.

A commissioned service is a service that the PCT have a contract with some pharmacies to provide and is funded by the PCT.

A non-commissioned service is a service that the pharmacy has chosen to provide but is not funded by the PCT

### Overview

As of September 2010, there are 48 registered community pharmacies in West Essex, which dispensed 3,518,391 prescription items from April 2009 to March 2010. There are also 12 dispensing doctor practices.

- 45 community pharmacies provide 40 core hours of pharmaceutical services per week, and a further 3 community pharmacies in Harlow offer 100 core hours of pharmaceutical services per week.
- All community pharmacies provide necessary/essential services as required by the Community Pharmacy Contractual Framework
- The majority of community pharmacies offer advanced services (Medicines Use Review, Appliance Use Review)
- 3 community pharmacies are Internet Pharmacies

Other providers of pharmaceutical services in West Essex are:

- Saffron Walden Community Hospital
- St Margaret's Community hospital
- West Essex Community Services
- Out-of-hours services (PELC and TEDS)
- NHS Walk-in Centre
- Princess Alexandra NHS Hospital Trust

## 7.1 Findings from the Questionnaires

As part of the information gathering process questionnaires were sent to all pharmacy contractors and dispensing Doctors (see Appendix F, Appendix G and Appendix H). Any information not contained within the summary findings below and Appendix I can be obtained from the PCT if required:

### Premises

- 71% of pharmacies have full disabled access
- 79% of pharmacies have legal parking within 50m of the store and 71% have blue badge parking within 10 metres
- 75% have disabled access to consultation area
- 77% have hand washing facilities available
- 58% have toilets available for patients
- 88% of pharmacies have facilities suitable for the Advanced Service Medicines Use Review (MUR)/Prescription Intervention?

### Information Technology

- 65% of pharmacies have access to the internet and email during business hours
- 65% of pharmacies are ready for NHS.net
- 77% have smart cards issued

### Current services provided

Appendix EE, Appendix FF, Appendix GG and Appendix HH detail all pharmacy provision within the PCT and the opening hours.

### Necessary/Essential Services

All community pharmacies in West Essex currently provide necessary/essential services as required by the Community Pharmacy Contractual Framework (see section 2.8.1)

### Advanced Services

As defined in section 2.8.2

- 85% of pharmacies in West Essex provide Medicines use Reviews (MURs)

### Enhanced Services

Community Pharmacy has an extremely important role to play in meeting the health needs of the West Essex population.

Table 15 details Advanced and Enhanced (Commissioned) services which are currently provided by pharmacies in each locality. The number of pharmacies offering these services is reported in each column

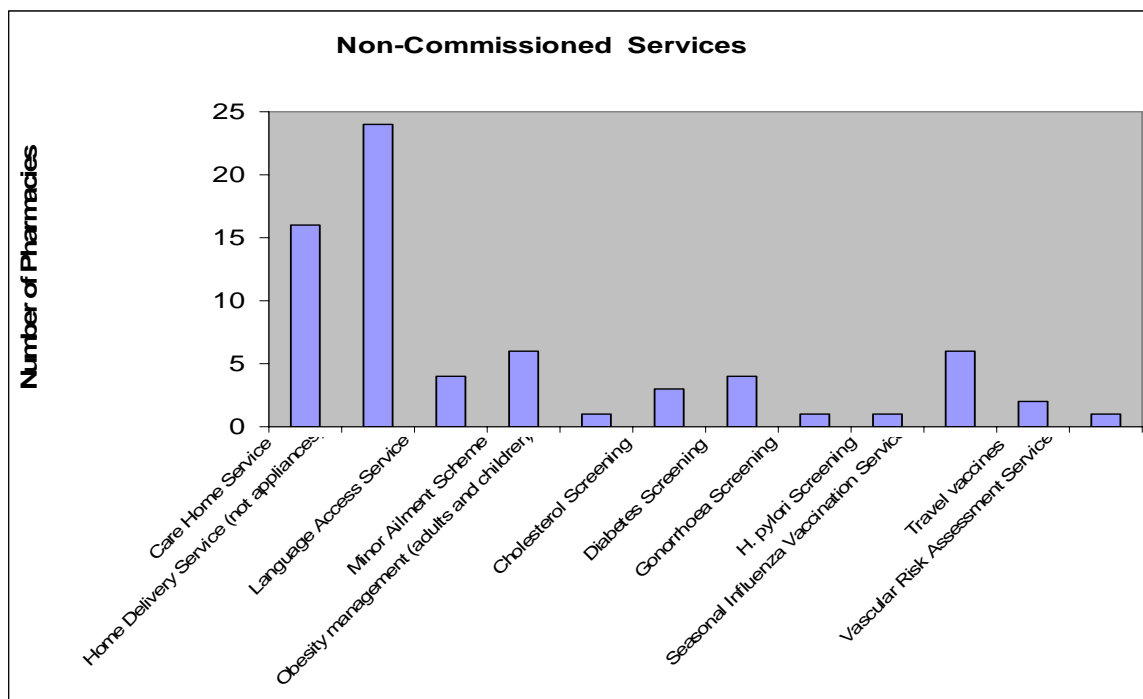
**Table 15: Number of pharmacies providing advanced & enhanced services (by service district) relating to localities**

Health Need and related Pharmacy Service	Epping	Harlow	Uttlesford	Totals
Substance Misuse (Needle exchange)	5	6	2	13
Substance Misuse (Supervised administration)	6	11	3	20
Palliative Care Drug Box Scheme	13	7	0	20
Teenage Pregnancy (EHC via PGD, and C-Card scheme)	8	7	3	18
Sexual Health (Chlamydia-screening and treating)	8	7	3	18
Tobacco Control (Smoking Cessation)	7	3	0	10
Medicines Use Reviews (MURs)	19	16	6	41

## 7.2 Necessary pharmaceutical services – current provision

For the purposes of this PNA the pharmaceutical services considered necessary to meet the pharmaceutical needs of the population are the essential services of the pharmacy contract (see section 2.8.1)

**Figure 3: Non-commissioned services (services provided without local or national commissioning)**



### 7.2.1 Within NHS West Essex

Pharmaceutical services within NHS West Essex are provided by 48 community pharmacies (Appendix EE) and 12 dispensing doctors (Appendix D). West Essex does not have any dispensing appliance contractors. (Patients are able to access these services through mail-order /internet provision, and such contractors usually provide services across the country, regardless of where they are based.) There is also provision available to residents of West Essex from pharmacies in neighbouring PCTs and elsewhere in the country.

### Core and Supplementary Hours

Under the NHS (Pharmaceutical Services) Regulations 2005 (Amended 2009), Pharmacies are required to open to provide pharmaceutical services for 40 core contractual hours per week. (100 core contractual hours for 100-hour pharmacies – see section 6.9 Exempt Applications) A pharmacy contractor may open for additional hours over and above the 40 core hours per week. These extra hours are termed ‘Supplementary Hours’. Under the Regulations, pharmacy contractors must notify PCTs of their core and supplementary hours.

100-hour pharmacies are required to offer pharmaceutical services for a minimum of 100 core opening hours per week

If pharmacy contractors wish to change their core hours either in terms of the days or the times when the premises are open, they must apply to the PCT, who must decide the application within 60 days of its receipt. It can approve the application in full or in part, or it can reject the application.



Pharmacy contractors who wish to change their supplementary opening hours must notify the PCT. However, the PCT has no power to agree or reject the notification since these are not core contractual hours.

### 7.2.2 Current provision of pharmaceutical services – opening hours of pharmacies and dispensing doctors

The GP surgery opening hours, including extended hours currently provided, are listed in Appendix GG, (Dispensing Doctors provide dispensing services to patients during surgery hours)

The pharmacy opening hours are listed in Appendix FF.

### 7.2.3 Areas of deprivation

The following pharmacies are situated in and provide necessary pharmaceutical services to the 20% most deprived MSOAs in west Essex. There are no dispensing doctors providing pharmaceutical services in these MSOAs.

**Table 16: Pharmacies in the 20% most deprived MSOAs in west Essex**

MSOA	Area	Necessary pharmaceutical service provision from:
Epping Forest 007	North Waltham Abbey	Glennon Chemists - 8 Hillhouse
Harlow 002		Boots UK Ltd - 16 The Stow
	The Stow/Mark Hall	National Co-operative Chemists Ltd - 107 The Stow
Harlow 003	Netteswell	Nettewsell Pharmacy - 1 Pypers Hatch
Harlow 004		Addison Healthcare - Ground Floor Wych Elm House
	Little Parndon and Hare Street	Sainsbury Supermarkets Pharmacy - Fifth Avenue allende Avenue
Harlow 007	Town Centre/Toddbrook	Asda Pharmacy - Water Gardens
		Boots UK Ltd - 37 Broad Walk
		National Co-operative Chemists Ltd - 5 Market House
Harlow 008	Potter Street/Harlow Common	Boldaset Ltd t/a Potter Street Pharmacy - 12 Prentice Place
Harlow 010	Staple Tye	Metwest Ltd - 7-8 Staple Tye
Harlow 011	Broadley Common/Sumners and Kingsmoor	Huschem Ltd T/a Medicare Pharmacy, 1 Sumners Hatch, Harlow

### 7.2.4 Facilities for people with a disability

Pharmacies are aware of the Disability Discrimination Act and have made adjustments, where possible, to premises and services to customers who may find access an issue, such as, elderly, infirm or disabled customers, parents with young children etc.

**79%** have car parking facilities for customers within 50 metres.

- 71%** have parking for disabled customers within 10 metres.
- 75%** are within reasonable walking distance of a bus stop.
- 73%** have an entrance accessible by wheelchair users.
- 71%** have a sales floor totally accessible by wheelchair users.
- 35%** of stores have a hearing loop installed.

In addition pharmacies offer other services such as, posters, leaflets and labels in large print. 9 pharmacies have staff that have received specialist disability awareness training and some offer disability assessments to customers. Some pharmacies have installed an assistance bell by their door to alert staff to customers who require support and one pharmacy has a staff member trained in the use of sign language. Pharmacists and their staff speak a range of 24 different languages.

### 7.2.5 Provision from Outside NHS West Essex

In the financial year April 2009 - March 2010, 8.60% of NHS prescriptions issued by prescribers within the West Essex area were dispensed outside of the area. 7.20% were dispensed by pharmacies in neighbouring PCTs, showing that for some West Essex residents a valuable service is available from pharmacies in towns across the PCT border.

0.7% of prescriptions were dispensed by pharmacies in London, which may reflect the fact that people commute to London and find it convenient to get their prescription dispensed near where they work.

<1% of West Essex prescriptions were dispensed in pharmacies in the East of England which could reflect travel for work, shopping and leisure but does include some mail order and internet pharmacies. The remaining 0.5% was dispensed further afield which could reflect travel for work or leisure but also include use of mail order and internet pharmacies. The percentage of prescriptions dispensed by this relatively new type of pharmacy is currently low and the numbers are spread between a range of providers, but this service does offer an alternative for those who are unable to get out or find it convenient to do this sort of transaction on line, and may increase as use of the internet for shopping and other services increases. There are three internet pharmacies on the pharmaceutical list in West Essex.

**Table 17: Dispensing locations for prescription items issued by West Essex prescribers**

Dispensing Location	%
West Essex	91.4
Neighbouring PCTs	7.2
London	0.68
Other East of England	0.24
Elsewhere	0.47

Source: ePACT

Taking prescriptions for appliances separately gives a different picture. Of the prescriptions for incontinence and stoma appliances, 27% are dispensed locally in West Essex. Of those dispensed outside of West Essex, two providers account for 48%, with the remaining 52% divided between over 66 providers (Source: ePACT). This is likely to be down to the nature of the product rather than the availability of local service providers. Some pharmacies have arrangements by which they send off a patient's prescription to a provider who delivers directly to the patient. Patients are likely to prefer this type of product, being bulky and of a sensitive nature, to be delivered to their home rather than collect it with their shopping. Recent changes in the contract for pharmacy appliance providers mean they are now required to offer home delivery for these products if they supply them, but it will take time for any change in the contract to have an effect on supply patterns.

### **7.3 Other Pharmaceutical Services – Current Provision**

In addition to the services considered necessary to meet the pharmaceutical needs of the population, a range of pharmaceutical services is provided within the PCT area and from outside which improve the pharmaceutical service available and provide better access.

#### **7.3.1 Advanced and Enhanced Services within NHS West Essex**

##### **Advanced Services**

There are currently 41 pharmacies offering Medicines Use Reviews (MUR), 4 intending to offer the service within the next twelve months and 3 who do not intend to provide the service. Two of the latter are internet pharmacies; therefore this is not unexpected, as they would not have face-to-face contact with patients, as is required for a MUR.

There are 8 pharmacies currently offering the Appliance Use Review, with a further 20 indicating that they intend to provide the service within the next 12 months. A further 17 do not intend to provide the service.

##### **Enhanced Services**

NHS West Essex commissions the local enhanced services from community pharmacies as shown in Table 18.

**Table 18: Enhanced services commissioned by NHS West Essex**

Service	Description
Stop smoking service	Stop smoking advice and supply of nicotine replacement products provided in conjunction with CECS Stop Smoking service by Level 2 trained advisors (pharmacists and other members of staff)
Level 1 Sexual Health service	A range of services to clients of specified ages (varies according to service) including distribution of Chlamydia test kits treatment of Chlamydia under Patient Group Direction supply of condoms under the C card scheme emergency contraception ('morning after pill')
Access to palliative care medication	Stock holding of a range of drugs likely to be prescribed in emergencies to patients with cancer, to provide easy access for health professionals and carers.
Out-of-hours dispensing service	Service commissioned on Sundays, week day-evenings and bank holidays when no other pharmaceutical service in the locality is available. Pharmacies open for a short period of time in the area to provide access to dispensing and other essential services.
Substance misuse services	Supervised consumption and needle exchange

### Extended Access and Out of Hours

The PCT commissions two out-of-hours providers (OOHs) for patients in West Essex. The OOHs service for the localities of Epping and Harlow is provided by the Partnership of East London Cooperatives (PELC), located at Harlow Walk-in Centre, St Margaret's Hospital, Epping,(at week-ends) and at Whips Cross Hospital. The OOHs service for Uttlesford locality is provided by The Emergency Doctor Service (TEDS) based at Dunmow Clinic, Great Dunmow. TEDS is a PCT service managed in-house whereas PELC is a commissioned service from an outside provider.

Both these service providers keep a stock of medication which they supply to patients where appropriate in line with the Department of Health Guidance 'Securing Proper Access to Medicines in the Out of Hours Period'. Where it is deemed clinically appropriate, patients are given a prescription for dispensing when there is a pharmacy open.

A Palliative Care Drug Box Scheme is in place in Harlow and Epping Forest Localities which involves providing palliative care drugs for a specific patient in advance of there being a need, thus alleviating the difficulty in obtaining certain palliative care drugs out-of-hours. The Patient's need is identified by appropriate healthcare professionals, usually district nurses or members of the palliative care team, and a private prescription is generated for a specific set of drugs which may be needed urgently but may be difficult to access, especially out-of-hours. Pharmacies providing this service dispense the drugs specified on the prescription, in a Palliative Care Drug Box, with specific paperwork. They are reimbursed by the PCT. Nurses working under appropriate PGDs administer the drugs as needed.

At least one pharmacy within each locality is commissioned to open for a short period on key bank holidays when no other pharmaceutical service is available in the area. Pharmacies in the Uttlesford Locality provide this service

under a Rota system, both on bank holidays and on Sundays and weekday evenings.

GP Practices in the Uttlesford Locality offer extended hours, with practices in Great Dunmow between them open until 8pm Monday to Thursday. One of the pharmacies in Great Dunmow is open until 7pm under the Rota system, therefore this leaves one hour without a pharmacy when a GP surgery is open. Both GP practices are dispensing, and therefore are able to offer a dispensing service to their dispensing patients, and to any other patient if there is an urgent need for medicines during this time.

The GP practices in Saffron Walden and Newport are open until 6.30pm. The pharmacies in Saffron Walden provide a Rota Service from 5.30pm until 6.30 pm on weekdays. Both Pharmacies are open on Saturday mornings. The pharmacy in Newport closes at 6.00pm. The GP practice in Newport is a dispensing practice, and may if there is an urgent need, supply non-dispensing patients with medication, or refer the patient to Saffron Walden until 6.30pm.

The GP Practice in Stansted Mountfichet is not a dispensing practice, and is open for extended hours outside of that of the opening hours of the pharmacy in the village. The surgery closes at 6.30 pm and the pharmacy closes at 6.00pm. In addition, the surgery has no half day, but the pharmacy closes for half day at 1.00pm on Wednesdays.

In Harlow Locality, GP extended hours and the Out-of-hours service provided by PELC at the Walk-in Centre are covered by the three one-hundred-hour pharmacies – Adsa at the Water Gardens, Addison Healthcare at Hamstel Road, and Tesco Pharmacy at Church Langley. Other pharmacies in the Locality have increased their hours to cater to the extended hours of their local GP practices.

The three One-Hundred Hour Pharmacies in Harlow Locality (see Appendix DD) provide pharmaceutical services during their core 100 hours to meet the health needs of the local population 'out-of-hours' when other pharmaceutical providers are not open. The PCT has taken these hours of provision into account when assessing the Out-of-hours provision for the area.

### **7.3.2 Outside NHS West Essex**

Residents may access enhanced services at a pharmacy near where they work, in the same way that enhanced services offered by West Essex pharmacies are available to those who live elsewhere. Figure 47 within Appendix HH details this provision.

## **7.4 Other relevant services – current provision**

The "pharmaceutical services" which pharmacy and appliance contractors are expected to deliver are either prescribed in Regulations (the 'essential services') or stipulated in Directions to PCTs (the "additional services"). It

should be noted that core dispensing services includes dispensing not only drugs and medicines but also listed appliances.

There are two alternative sets of providers of “pharmaceutical services”: dispensing doctors and LPS (see sections 2.7 and 2.9)

The range of “pharmaceutical services” that dispensing doctors can provide are limited in two respects: Firstly, dispensing doctors can only provide the services currently covered in their terms of service in the 2005 Regulations (see regulation 60 and Schedule 2). Secondly, those terms of service do not include “prescribed services” or “additional” pharmaceutical services. Dispensing doctors may provide additional services, similar to those provided by General Medical Services contractors, as part of their terms of service as dispensing doctors, but these services are not “additional pharmaceutical services” and so are not “pharmaceutical services”. However, the dispensing services that they provide are “pharmaceutical services” for the purposes of the Act and accordingly for the purposes of Pharmaceutical Needs Assessments.

The following tables list other relevant services provided only by community pharmacy, and by community pharmacy and other providers:

**Table 19: Enhanced services provided only by Community Pharmacy**

Type of Service	Additional Information
Substance Misuse –	Commissioned by CDAT on behalf of PCTs
Syringe –needle exchange	Commissioned by CDAT on behalf of PCTs
Out-of-hours dispensing	Locality variation
Palliative Care emergency	Not yet an enhanced service, but running as a long-term pilot

**Table 20: Enhanced services provided by Community Pharmacy and other providers**

Type of Service	Additional Information
Sexual Health Services	Chlamydia screening and treating (via PGD for Pharmacy) Emergency Hormonal Contraception (Via PGD for Pharmacy) Condom distribution – via C-Card
Stop smoking service	brief intervention and signposting intermediate intervention and supply <input type="checkbox"/> Nicotine Replacement therapies recorded smoking status

## 7.5 Dispensing services which affect the need for necessary pharmaceutical services – Dispensing Doctors

Dispensing doctors can provide dispensing services to those of their patients who live in rural areas more than 1.6 km from a community pharmacy and who have requested to be on the dispensing list. Dispensing services are



available to them during surgery opening hours. Around 30% of all registered patients in West Essex are on their GP's dispensing list.

Dispensing is the only pharmaceutical service available to these patients but the service is invaluable for rural communities with no nearby local community pharmacy. In many rural areas patients are used to travelling to a neighbouring village or town for shopping and other services and are likely to have access to a pharmacy there for other services such as the purchase of over the counter medication and advice on the use of their medicines in addition to the dispensing service that they use locally.

The availability of these GP dispensaries increases access to pharmaceutical services for residents in rural areas and would have a significant impact on the need for pharmaceutical services if the situation were to change (see Appendix D).

## 7.6 Other NHS services which affect the need for necessary pharmaceutical services

Other NHS organisations which are a source of prescriptions and / or referrals to pharmacies for essential services:

- GP prescribers
- Other prescribers – ie Nurse Practitioners, Dental Practitioners, Optometrists
- Community hospitals
- Mental health services(North Essex Partnership Foundation Trust, Cambridge and Peterborough Foundation Trust)
- Hospice
- West Essex Community Health Service
- NHS Walk-in Centre
- Princess Alexandra NHS Hospital Trust, Broomfield Hospital(Mid Essex Hospital Trust), Cambridge University Hospitals Foundation Trust

There are other NHS services which offer pharmaceutical services which overlap with essential services and would increase the need for services to be commissioned from pharmacies if they were withdrawn:

- Saffron Walden Community Hospital
- St Margaret's Community hospital
- West Essex Community Services
- Out of hours services (PELC and TEDS)
- NHS Walk-in Centre
- Harlow One-Stop-Shop
- Princess Alexandra NHS Hospital Trust, Broomfield Hospital (Mid Essex Hospital Trust), Cambridge University Hospitals Foundation Trust
- Mental health services (North Essex Partnership Foundation Trust, Cambridge and Peterborough Foundation Trust)



## 7.7 Other NHS services which affect improvements and better access

- Cardiovascular screening/ vascular health checks
- Sexual health services
  - C Card
  - Chlamydia screening
  - Chlamydia treatment
  - EHC
- Stop smoking service WECS/GP practices
- Alcohol Advice
- West Essex PCT Medicines Management Team
  - Clinical Medication Review
  - Prescribing Support Services
  - 'Specials' Monitoring
  - Care Home Medicines Management Support
- Long-Acting Reversible Contraception (LARC) administration
- Diabetes screening services and monitoring services
- Weight management services

## 7.8 Access to dispensing services

There is no national standard level of access to a pharmacy (or a dispensing doctor for dispensing services). However, consensus amongst local PCTs is that a nominal standard comparison would be, for urban areas, the accessibility within a 2km walk (estimated to be 25 minutes walking time), and for rural areas, the accessibility within a 10-minute drive time during peak hours (This does not include public transport). The Mapping in Appendix BB shows the coverage of pharmacies and Dispensing GPs in West Essex. Currently 90% of the population of West Essex is able to access either a pharmacy or dispensing GP with these timeframes. The remaining 10% are in more rural areas with very small populations. Appendix T shows that rural households are more likely to own a car, however, as explained in section 4.13, public transport for those who don't own a car and live in some rural areas is less favourable. The populations of these areas are generally served by dispensing doctors, so that they can access dispensing services at the same time as general medical services.

## 7.9 Exempt Applications

The NHS (Pharmaceutical Services) Regulations 2005 (amended 2009) include four categories which are exempt from the "necessary and expedient" test. This is the test whereby a PCT assesses whether an application is necessary or expedient for a new pharmacy to dispense NHS prescriptions in order to secure adequate pharmaceutical services in a particular area.

These four exemptions are:

- Pharmacies based in approved retail areas (large retail shopping areas with 15000 square metres or more of leasehold gross floor space away

from town centres – a list of these is held by the Secretary of State and is published on the Department of Health Website)

- Pharmacies that intend to open for at least 100 hours per week
- Consortia establishing new one-stop primary care centres
- Wholly mail-order or internet-based pharmacies

In the case of the first three exemptions shown above (excluding wholly mail - order or internet based) these exemptions may only be granted if the applicant agrees to provide directed services as specified by the PCT [Regulation 13(3)(a)]. Applicants must be prepared to offer specified directed services within three months of opening if requested to do so by the PCT.

West Essex PCT has 5 pharmacies that are classified as exemptions, 3 of which provide 100 hour opening provision. These pharmacies are seen as necessary in delivering services within West Essex as they are able to provide access when others are closed.

Applications made under the Exemptions as under Regulation 13(1)(b) of the NHS (Pharmaceutical Services) Regulations 2005 (i.e those listed above except wholly mail-order or internet pharmacies) are required to provide a full and prescribed range of services appropriate to local needs as determined by the PCT. This means they are currently required to provide essential services and any of the following directed services that NHS West Essex wishes to commission in that area, and any other future service not listed below, for the full one-hundred core hours during which they are open, and from the day they are admitted to the pharmaceutical list

#### **Advanced Services:**

Medicines Use Review and Prescription Intervention Service  
Appliance Use Review

#### **Enhanced Services:**

Minor ailment schemes  
Supervised administration  
Needle and syringe exchange service  
Stop smoking support services  
Supplementary prescribing  
Patient group direction service  
Care home service  
Medicines assessment and compliance support  
Emergency hormonal contraception  
Out of hours services  
Screening services  
Medication review  
Disease specific medicines management  
Participation in C-Card Scheme  
Sexual Health Services  
Palliative Care Emergency Drug Box Scheme

## Vascular Screening

## 7.10 Summary of current provision

Table 21 shows the identified public health need mapped to current provision of services. Areas of identified health need have been mapped to current pharmaceutical service provision, either by existing pharmacies, or other service providers.

**Table 21: Public health need mapped to current service provision in NHS West Essex**

Identified Health Need	Current Service Commissioned to be Provided By community Pharmacy	Service provided by others that address need	Gap between need and Current Pharmaceutical Provision
<b>Ethnic Minority groups</b> There is a specific need to address certain health inequalities in ethnic minority groups, such as higher prevalence of cardiovascular disease, diabetes and hypertension. Language difficulties require language support when accessing health services	Provision of language access services currently by 4 pharmacies 44 pharmacies have staff speaking at least one language other than English	GP surgeries have language access services	No gap identified
<b>Gypsies and Travellers</b> Epping Forest locality has the highest population of gypsies and travellers. This population group have been shown to have significantly poorer health, are less likely to be registered with a GP, and have a significantly lower life expectancy	Provision of a range of pharmaceutical services – access to pharmaceutical services from pharmacies is available in the Nazing area, Roydon, and Waltham Abbey, where the highest number of caravans are sited, as well as good provision in other areas of west essex	GP surgeries, WECS	No gap in provision of pharmaceutical services identified,

**Table 21 continued: Public health need mapped to current service provision in NHS West Essex**

Identified Health Need	Current Service Commissioned to be Provided By community Pharmacy	Service provided by others that address need	Gap between need and Current Pharmaceutical Provision
<b>Alcohol-related illness:</b> The level of alcohol-related disease is highest in Harlow Locality, although Uttlesford has a higher number of people drinking above recommended levels	none	Directed Enhanced Service – provided by 5 GP surgeries in Harlow	Service could be improved by access to information and advice through pharmacies
<b>Smoking-related mortality and morbidity</b> Harlow and Waltham Abbey have the highest levels of smoking-attributable mortality and above the England-average levels of prevalence of COPD	Smoking cessation services form 2 pharmacies in Waltham Abbey (signed up to this year's LES) Harlow has 5 pharmacies providing smoking cessation services (signed up to this year's LES)	GP surgeries, WECS counsellors working in locality	No gap in provision provided all those pharmacies who have indicated they will sign up to provide the Service actually do so.
<b>Teenage Pregnancy</b> Harlow Locality has one of the highest teenage conception rates in England, and Waltham Abbey has one of the highest in the east of England	Sexual Health (Emergency Contraception, Condom-provision through C-Card) LES provided by pharmacies in the areas of high teenage conception rate.	Harlow One-Stop Shop (WECS), GP surgeries	No gap in provision has been identified
<b>Substance Misuse</b> Harlow and Epping Forest Localities have the highest numbers of registered drug mis-users.	Supervised consumption LES and Syringe/needle Exchange LES provided by pharmacies in Harlow, Epping locality and Dunmow and Saffron Walden areas of Uttlesford	CDAAT services commissioned & provided in Harlow by 'Open Road', a Voluntary sector organisation.	There is no provision for substance misusers in the Stansted Area of Uttlesford Locality, and this is an area of unmet need.

**Table 21 continued: Public health need mapped to current service provision in NHS West Essex**

Identified Health Need	Current Service Commissioned to be Provided By community Pharmacy	Service provided by others that address need	Gap between need and Current Pharmaceutical Provision
<b>Coronary Heart Disease</b> Prevalence is greatest in Harlow, with estimated levels higher than the England average, although GP-recorded levels are lower, suggesting a level of under-detection	none	GP management, Health Checks LES provided by GPs, GP Heart Failure LES	Community pharmacy has a role to play in provision of the national Health, although the service is currently provided only through GP services.
<b>Asthma</b> Both Uttlesford and Harlow have higher levels of asthma than the England average. Uttlesford is a largely rural area, with arable farmland. Seasonal asthma can be expected to be high due to the nature of the surrounding countryside, particularly when harvesting begins. Harlow, as an urban area and with highest levels of deprivation, has an asthma prevalence above the England Average, but less than Uttlesford.	none	GP surgeries, Respiratory nurse specialists	Community pharmacy can contribute significantly to the management of asthma through the MUR, giving advice on correct inhaler technique and on lifestyle, and provision of smoking cessation services. Pharmacies across West Essex offer MURs, lifestyle advice and sign posting to other services. No gap in provision identified.
<b>Falls</b> West Essex has a higher number of hospital admissions due to falls than the East of England and England average, with Harlow the highest, followed by Epping.	none	Osteoporosis LES for GPs (poor uptake in Epping)	There is a gap in falls prevention, particularly in Epping locality. Community pharmacies are ideally placed to use MURs to identify patients taking medication likely to increase the risk of fall, especially in the elderly.

## Necessary Services

- All 48 currently contracted community pharmacies are providing all necessary pharmaceutical services as required under the Community Pharmacy Contractual Framework.
- 12 Dispensing Doctors provide dispensing services to the more rural populations of West Essex.

### Advanced Services

- 85% of pharmacies currently provide the Advanced Service of Medicines Use Review. The geographical distribution of pharmacies offering this service is such that there is no current gap in provision.
- The provision of the new Advanced Service of Appliance Use Review is provided by 17% of pharmacies, with a further 42% intending to offer this service within the next 12 months. As this service only began to be commissioned nationally in April 2010, it will require further future analysis to determine if there is adequate provision of this service. Currently only 27% of prescriptions for appliances are dispensed by pharmacies in West Essex (see section 6.2.5), which reflects the low number currently offering the service.

### Enhanced Services

The Enhanced Services commissioned by the PCT are not offered by all pharmacies (see Table 18 section 6.1).

**Table 22: Local Enhance Services compared to need**

Commissioned Service	PROVISION		
	Epping Forest	Harlow	Uttlesford
SUBSTANCE MISUSE – SYRINGE/NEEDLE EXCHANGE	No Unmet need	No unmet need	Possible unmet need in rural areas
SUBSTANCE MISUSE – SUPERVISED CONSUMPTION	No Unmet need	No unmet need	Unmet need in Stansted Mountfitchet area
SMOKING CESSATION	Possible* unmet need	Possible* unmet need	Possible *unmet need
SEXUAL HEALTH SERVICES INCLUDING TEENAGE PREGNANCY	No unmet need	No Unmet Need	No unmet need
PALLIATIVE CARE EMERGENCY DRUG BOX SCHEME	No unmet need	No unmet need	Service currently under review

#### **Substance Misuse and Syringe/ Needle Exchange**

Essex Drugs and Alcohol Team (DAAT) commission Substance Misuse services on behalf of the PCT. They have identified an area of unmet need in the Stansted Mountfitchet area, where there is currently no provision of a substance misuse service.

Harlow Locality has the highest number of registered substance misusers (145) followed by Epping Forest Locality (119), whereas Uttlesford has 32.

There is currently 1 pharmacy in Epping, 3 in Loughton and 1 in Waltham Abbey, 5 in Harlow, 1 in Great Dunmow, and 1 in Saffron Walden that offer the Needle and Syringe Programme Service.

### ***Smoking Cessation Services***

There are high levels of smoking in Harlow Locality, with pockets of high levels in the Waltham Abbey and Loughton areas of Epping Forest Locality and in the Saffron Walden area of Uttlesford. The PCT commissions smoking cessation services from West Essex Community Health Services, but this does not include supply of Nicotine Replacement Therapy, which relies upon GPs to provide NHS prescriptions for patients referred by the service.

\*There are a number of pharmacies in each locality who indicated on the Community Pharmacy Questionnaire that they are currently providing Smoking Cessation Services, but who have not yet signed up to the requirements of the current Smoking Cessation Enhanced Service. If all these pharmacies do sign up to provide the service as indicated, then the pharmaceutical need is met in all areas. Sign-up had not taken place at the time of production of this PNA document

### ***Sexual Health Services***

The highest levels of teenage pregnancy are in Waltham Abbey and Loughton areas of Epping Forest Locality; Harlow Locality; and the Saffron Walden area of Uttlesford Locality.

The PCT commissions a Sexual Health Local Enhanced Service from Community Pharmacies which involves the provision of a 'basket' of services comprising Emergency Hormonal Contraception, Chlamydia Testing and Treatment, and provision of condoms through the C-Card Scheme. This service was recently re-launched due to previous poor uptake, and there are now 14 pharmacies providing the service. Although sexual health services are provided by West Essex Community Health Services (through the Chlamydia Screening Service, GP surgeries offering Sexual Health Services, and the Harlow One Stop Shop, which provides health services, particularly sexual health and contraception services, to young people under the age of 25), the high rate of teenage pregnancy and termination in these areas (see Appendix Y) indicates that there is a need for additional services. There are now several pharmacies in the areas of high teenage pregnancy offering the Sexual Health Services and it is now considered that there is adequate provision of the service across West Essex, where needed.

### ***Palliative Care Emergency Drug Box Scheme***

This service is a rolling Pilot, rather than an Enhanced Service, which is currently commissioned in Epping Forest and Harlow Localities. It is highly valued by those who use it and there is good provision of the service in these localities. The Service was not taken up by pharmacies in Uttlesford, and GPs in Uttlesford felt there was no need for the service in that Locality as there was already good anticipatory provision. However, the palliative care services in



the locality are currently being reviewed by the Uttlesford Practice-Based Commissioning Group and the provision of Palliative Care Drug Boxes is part of that review.

### 7.11 Likely future need

In July 2010, the new Coalition Government produced a White Paper, “Equity and excellence: liberating the NHS”, which proposes radical reform of NHS services, including commissioning. It is difficult to anticipate the effect these changes are likely to have on pharmaceutical services, particularly at local implementation level, therefore they have not been included in this edition of the PNA

In assessing the possible future pharmaceutical needs of the population of West Essex, changes in population, in particular certain groups who have specific healthcare needs (e.g people aged over 65, aged over 85, young children) will need to be taken into account. In addition, any new housing developments, changes to GP services (e.g new surgeries, or relocation of surgeries), new care homes and retail developments.

#### 7.11.1 Changes in Healthcare Provision

The PCT strategy for healthcare in west Essex 2008 to 2012 outlines plans for health provision across west Essex for the next five years. It makes clear the PCTs goals for improving the health of the population, supporting people to look after their own health by preventing illness and promoting healthy lifestyle choices. When people do require medical help, the organisation is committed to ensuring it is responsive and meets their needs. It also commits the PCT to working with partner organisations and the public to improve the health and well-being of the people of west Essex and to achieve maximum value from the money we spend.

An important part of this vision is to make sure that we have the right environment to provide healthcare in the place it is needed. A key estates project for the PCT is the provision of new and improved primary care facilities in Ongar and surrounding district.

#### Ongar War Memorial Medical Centre development

A full business case has been approved by the Trust Board, and the SHA regarding the redevelopment of the existing site. The purpose of the new development is to provide modern health facilities to:

- Address the need to relocate the two existing practices in Ongar (The High Street Surgery and Basons Lane Health Centre)
- Provide new facilities for community services currently provided from Ongar Community Clinic in a number of locations across Ongar.
- Provide additional capacity to meet the population growth for Ongar
- Provide capacity and flexibility to develop models of care that reflect the PCT strategy for healthcare 2008-2012. This includes delivering

more services in a local setting, determined by the health needs of the local community. In turn this will help to tackle access issues within Ongar.

- Provide an opportunity for the development of more integrated models of services between health professionals and other agencies
- Improve the patient environment and experience

The development of a new Primary Care facility on the Ongar War Memorial Hospital site will provide:

- Sufficient capacity to accommodate current primary care and community services, the increase in health provision to address the forecast population growth and sufficient capacity and flexibility to develop new models of care.
- Ease of procurement – this site is already within the ownership of West Essex PCT.
- Deliverability within an acceptable timescale.
- The opportunity to develop a purpose built facility maximising the space available and allowing most efficient use of facilities.
- Good vehicular access

The existing Dispensing Doctor practices in Ongar are to relocate into the new facility, which has a projected opening date of November 2011. One of the dispensing practices has applied for and been granted permission to relocate their dispensing premises into the new building. Consequently there will be no impact on pharmaceutical services.

#### **Stansted Primary Care Centre**

In March 2008 the PCT Board gave approval to establish a new primary care centre in Stansted, providing state of the art health facilities and bringing investment in primary and community facilities in Stansted up to the level of the best in West Essex. The facility will provide for the relocation of the Stansted Practice, providing primary health care to a population of 9,000 patients, an NHS Dentist and community facilities including baby clinics, chiropody, physiotherapy and minor surgery facilities. Working with local stakeholders the PCT is currently in negotiation for the preferred site and expecting to progress to planning application winter 2010 with a new facility planned for early 2012.

There are no other changes in GP services at the time of publication of this

**Care Homes** – Essex County Council have received planning applications for:

- An eight-bed extension to Weald Hall care home, Thornwood, Epping
- A 50-bed care home has been submitted for Nazeing

An 18-bed extension (acquired brain injuries unit) to Ashbrook Court, Waltham Abbey has been granted and built. It is awaiting Care Quality Commission (CQC) inspection and is not yet registered with the CQC.

The impact of these care homes, if approved, is not known. Many care homes contract for pharmaceutical services from pharmacies outside of the West Essex Area and therefore the impact may be minimal. However, the management of requirements for acute pharmaceutical needs (i.e. acute prescriptions) will be likely to be borne by local pharmacies.

### 7.11.2 Housing Development

The East of England Plan previously set housing targets for each district in the East of England for the period 2001-2021, In West Essex these were as follow:

Epping Forest	3500
Uttlesford	8000
Harlow	16000 (the council has assumed a target of 8000 for West Essex)

*The figure for Harlow includes Urban Extensions in Epping Forest and East Hertfordshire Districts – The split will be determined through joint district development plans*

On 6<sup>th</sup> June 2010, the Coalition Government abolished Regional Spatial Strategies (RSS), and with them housing and employment targets therein. Consequently all districts are reviewing whether they maintain the housing targets set above, or set locally determined levels of housing. At this point, it is too soon to say whether West Essex districts will be continuing with the targets above.

Some of the above development has already been completed. For the remainder districts are required to prepare an annual housing trajectory which will need to demonstrate how they meet the required levels of housing. These may comprise sites with outstanding planning permission and other sites without permission but considered 'developable' over the plan period.

Priors Green in Takeley, Uttlesford locality has permitted development for 815 residential units. As at 1<sup>st</sup> April 2009 636 of those were yet to be built. The trajectory of what has been developed in will be available in November 2010.

### 7.11.3 Retail development

There is permitted development for six retail units and a community centre within the Priors Green area of Takeley.

There are no known plans for any other retail development in West Essex.

## **8. CONCLUSIONS**

### **8.1 Gaps in Current Provision**

#### **8.1.1 Necessary Services**

The PCT has previously identified Takeley in Uttlesford Locality as an area in which it would be desirable to offer pharmaceutical services. However this has not been identified as an area with an unmet need. An application to open a pharmacy was previously granted full consent, however the applicant has withdrawn. A new application has been received for preliminary consent to open a pharmacy in this area and has been sent out to affected parties for consultation.

There are currently no other areas of unmet need for necessary pharmaceutical services

#### **8.1.2 Advanced Services**

85% of pharmacies currently provide the Advanced Service of Medicines Use Review. The geographical distribution of pharmacies offering this service is such that there is no current gap in provision.

Although the number of pharmacies providing the advanced service of Appliance Use Review is low, it is not possible to determine at this stage whether provision is adequate as the service has only recently been introduced (April 2010). The majority of prescriptions for appliances are dispensed outside of West Essex, and therefore it would be expected that provision of this service by pharmacies in West Essex will remain lower than that of the Medicines Use Review but does not necessarily mean there is a gap in provision.

#### **8.1.3 Enhanced Services**

There is a need for further provision of smoking cessation services across West Essex by community pharmacies, or another provider. There is also an unmet need for Substance misuse supervised consumption and syringe/needle exchange provision in the Stansted Area of Uttlesford locality.

### **8.2 Necessary Services – future gaps in provision**

At the time of producing this document there are no anticipated gaps in the future provision of necessary pharmaceutical services.

### **8.3 Improvements and better access – future gaps in provision**

Some directed services (Enhanced and Advanced Services) are available only from community pharmacies, but many are also available from a variety of other providers across West Essex. It is acknowledged that the most rural areas of West Essex have less access to services than the majority of the population, however car ownership is higher in these areas and this population travels further to access other non-health services. Many pharmacies also offer a prescription delivery service (although this is not an NHS commissioned service). There is provision of dispensing services by dispensing doctors in the more rural areas where no pharmacy currently exists. Many of these surgeries also provide health services such as smoking cessation as part of their General Medical Services. 90% of the population of West Essex is within either 25 minutes walking distance (urban areas) or 10 minutes drive (rural areas) of either a pharmacy or dispensing doctor.

As the house-building programme associated with the abolished Regional Spatial Strategies has now been suspended (see section 6.11.2), it is now not possible to determine with any clarity what future services may be required.

With a significant increase anticipated in the elderly population of West Essex over the next 15 years, services will need to be developed in the future to manage the needs of this population group, including management of long-term conditions, falls management, and assistance in managing medicines at home. Although some of these services are currently provided, there will be a need to increase provision in the future, subject to sufficient funding availability.

## 9. GLOSSARY

ABBREVIATION	EXPLANATION
BMI	Body Mass Index
BP	Blood Pressure
CHD	Coronary Heart Disease
CKD	Chronic Kidney Disease
COPD	Chronic Obstructive Pulmonary Disease
CPPQ	Community Pharmacy Patient Questionnaire
CVD	Cardio Vascular Disease
EHC	Emergency Hormonal Contraception
EPS	Electronic Prescription Service
GP	General Practitioner
HF	Heart Failure
JSNA	Joint Strategic Needs Assessment
LARC	Long-Acting Reversible Contraception
LES	Local Enhanced Service
LMC	Local Medical Committee
LPC	Local Pharmaceutical Committee
LPS	Local Pharmaceutical Services
LTC	Long Term Condition
LTLI	Long Term Limiting Illness
MDS	Monitored Dosage System
MSOA	Middle Super Output Area
MUR	Medicines Use Review
NRT	Nicotine Replacement Therapy
OOH	Out OF Hours
ONS	Office of National Statistics
PCT	Primary Care Trust
PELC	Partnership of East London Cooperative
PMR	Patient Medication Record
PNA	Pharmacy Needs Assessment
QOF	Quality and Outcomes Framework
RD	Repeat Dispensing
SHA	Strategic Health Authority
TEDS	The Emergency Doctors Service

## 10. APPENDICES

### Appendix A – Summaries from JSNA

The table below summaries the findings from the 2008 Essex JSNA.

**Table 23: Summary of the 2008 Essex JSNA**

	Epping Forest District	Harlow District	Uttlesford District
Demographics	Over the next 15 years there are expected to be increases of at least 27% in the over 65s and of 52% in the over 85s. The proportion of the non-white ethnic groups is lower than the England average at 8.8%.	Over the next 15 years there are expected to be increases of at least 22% in the over 65s and of 120% in the over 85s. The proportion of the non-white ethnic groups is lower than the England average at 8.3%.	Over the next 15 years there are expected to be increases of at least 72% in the over 65s and of 114% in the over 85s. The proportion of the non-white ethnic groups is substantially lower than the England average at 4.9%.
	The population is becoming more diverse over time, partly as a result of the expansion of the European Economic Community. There are also a small number of people from travelling communities in each of the areas. The population will also be affected by Central Government plans for housing development.		
Social and environmental factors	The district has lower levels of social deprivation than most areas although there are some small areas of relative deprivation within the district. The proportion of the workforce with no qualifications is similar to the national average. House prices in Epping Forest are the highest in Essex and are affected by the proximity to London and commuting patterns, but there is a high demand for social housing.	The district has higher levels of social deprivation than many areas and within Harlow there are pockets of more severe deprivation. A relatively high proportion of the workforce has no qualifications and relatively few are well-qualified. House prices in Harlow are lower than the averages for Essex and England, but there is still a relatively high level of homelessness and a high demand for social housing.	The district has very low levels of social deprivation compared to most areas. House prices in Uttlesford are among the highest in Essex and are affected by the proximity to London and commuting patterns. There is a relatively low demand for social housing, with numbers of the housing register being the third lowest in the county. The proportion of the workforce with no qualifications is higher than the national and regional average.
Health and welfare	Life expectancy is below the Essex average but is higher than the national level. Substantial inequalities exist between different areas of Epping Forest. The areas experiencing lower life expectancy are around Waltham Abbey and the eastern rural parts of the district. The proportion of the population with long term conditions such as coronary heart disease and diabetes is similar to Essex as a whole, but the district has lower than average numbers reporting limiting long term illnesses that affect their daily activities.	Life expectancy is below the Essex average but is higher than the national level. Substantial inequalities exist between different areas of Harlow. The areas experiencing lower life expectancy are around South West part of Harlow including Toddbrook, Staple Tye, Great Parndon and Sumners & Kingsmoor. Harlow has a high proportion of people with long term health problems, particularly people with respiratory diseases, and hospital admission rates are high.	Life expectancy in the district is higher than the Essex and national averages. Inequalities exist within the area but many of them still have a higher life expectancy than the rest of Essex. The proportion of the population with long term conditions such as coronary heart disease and diabetes is lower than Essex as a whole, and the district has lower than average numbers reporting limiting long term illnesses that affect their daily activities.
	As in the rest of the country the most common causes of death in the districts are coronary heart disease and cancers.		



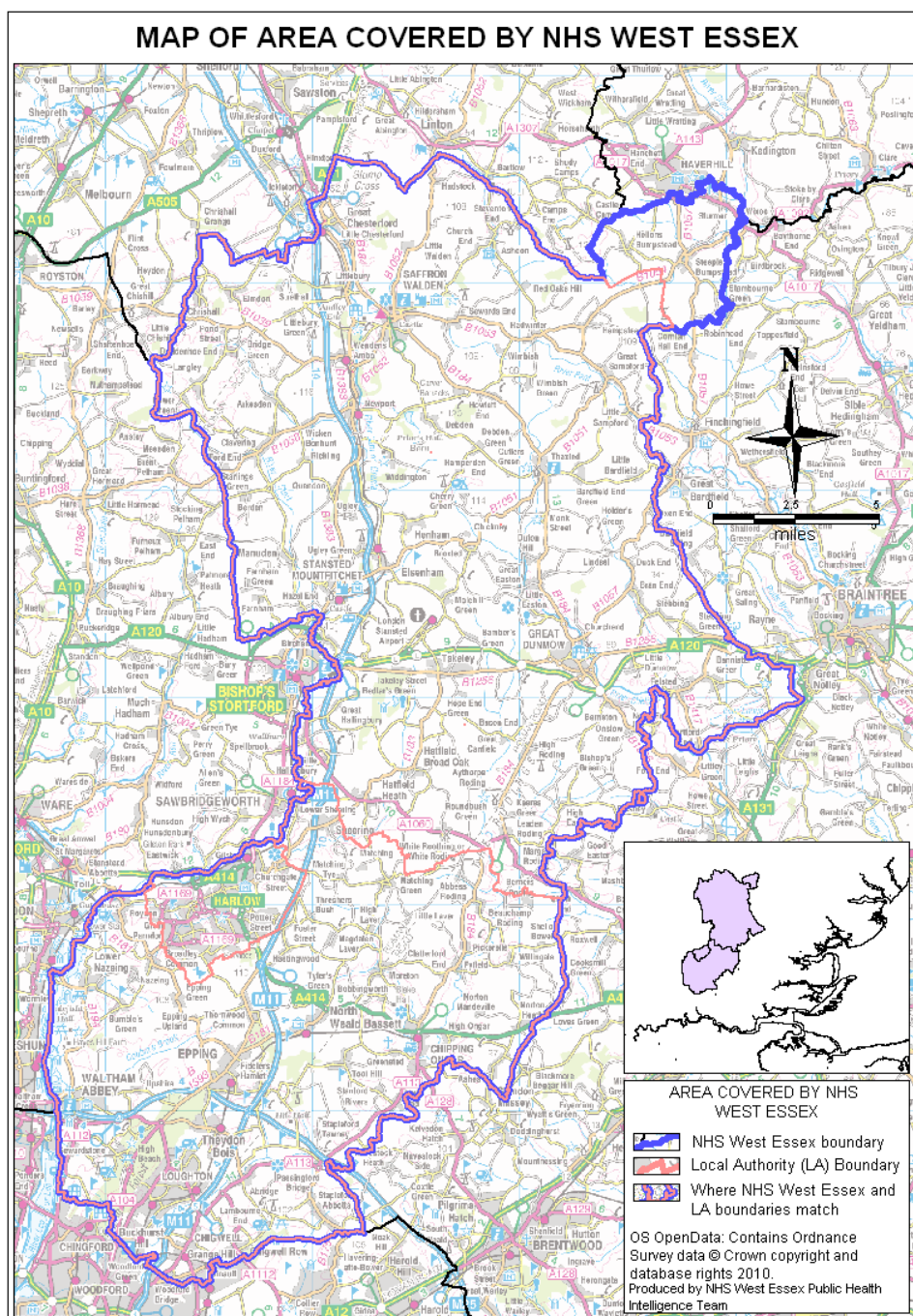
Table 24 continued: Summary of the 2008 Essex JSNA

	Epping Forest District	Harlow District	Uttlesford District
<b>Children and young people</b>	<p>The district has a low MMR immunisation rate and has had a higher than average number of children with measles. Obesity within the young population is a key concern.</p> <p>The teenage conception rate in Epping Forest had been falling over the years but has levelled off recently.</p>	<p>Harlow's MMR immunisation rate is above the Essex average, but below the level recommended by the World Health Organisation. Obesity within the young population is a key concern. The teenage conception rate in Harlow had been falling over the years but in the last couple of years it has increased again.</p>	<p>The district's MMR immunisation rates are similar to the Essex average but lower than the WHO recommended levels. Obesity within the young population is a key concern.</p> <p>The teenage conception rate in Uttlesford has been falling over the years and is the lowest in the county.</p>
	A higher proportion of young people with disabilities are not in employment, education or training. There are significant numbers of children and young people experiencing mental health problems.		
<b>Working adults and older people</b>	<p>Around 130 people per 1,000 population in Epping Forest have a caring responsibility, which is slightly above the Essex average. The district has lower than average numbers claiming disability benefit for mental health reasons. Current use of social services by older people in Epping Forest is lower than the Essex average.</p>	<p>Around 117 people per 1,000 population in Harlow have a caring responsibility, which is lower than the Essex average. Harlow has a higher prevalence of people suffering from mental health problems than the Essex average with a higher than average proportions of the working age population claiming benefit / allowances for a mental or behavioural disorder. Current use of social services by older people in Harlow is lower than the Essex average.</p>	<p>Around 125 people per 1,000 population in Uttlesford have a caring responsibility, which is very slightly below the Essex average. The district has much lower than average numbers claiming disability benefit for mental health reasons. Current use of social services by older people in Uttlesford is higher than the Essex average.</p>
	As a result of the ageing population there is predicted to be an increasing prevalence of certain conditions and disease such as incontinence, respiratory diseases, heart disease and stroke, diabetes, mobility problems and falls.		
<b>People living with disabilities</b>	Epping Forest has lower rates of people with learning disabilities, sensory impairments and physical impairments compared to Essex as a whole.	The district has lower rates of people with learning disabilities and with sensory impairments compared to other areas in Essex, but has higher rates of people with physical impairments.	The district has lower rates of people with learning disabilities, sensory impairments and physical impairments compared to Essex as a whole.

## Appendix B - geographical area covered by NHS West Essex

NHS West Essex covers three local authority areas Epping Forest, Harlow and Uttlesford plus the extra ward of Steeple Bumpstead in Braintree, and stretches over an area of approximately 400 square miles. It borders London, Cambridgeshire and Hertfordshire and has relatively good transport links, with both the M11 and M25 motorways running through the area. Mainline railway networks run south to London and north to Cambridge from Harlow, and the London Underground Central Line runs through Epping Forest district, finishing at Epping. Stansted Airport is situated in Uttlesford District.

Figure 4: Map of the west Essex area



## Appendix C - List of Advanced and Enhanced Pharmaceutical Services by Provider

Locality	Pharmacy	Advance Services		
		Medicines Use Review service	Appliance Use Review service	Stoma Appliance Customisation service
Epping	Boots the Chemists, Debden	✓	✓	x
Epping	Boots the Chemists, Epping	✓	x	x
Epping	Boots the Chemists, Loughton	✓	x	x
Epping	Brook House Pharmacy	x	x	x
Epping	Co-operative Pharmacy, Epping	✓	x	x
Epping	Co-operative Pharmacy, Ongar	✓	x	x
Epping	Co-operative Pharmacy, Loughton	x	x	x
Epping	Dee's Pharmacy	x	x	x
Epping	Easter Pharmacy	✓	x	x
Epping	Elgon Chemists	✓	x	x
Epping	Glennon Chemists	✓	x	x
Epping	Hutchins Pharmacy	✓	x	x
Epping	K G Pharmacy	✓	x	x
Epping	Leach & Burton Pharmacy	✓	x	x
Epping	Lloyds Pharmacy, Epping	✓	✓	✓
Epping	Lloyds Pharmacy, Market Square, Waltham Abbey	✓	✓	✓
Epping	Lloyds Pharmacy, Ongar	✓	✓	✓
Epping	Lloyds Pharmacy, Sun Street, Waltham Abbey	✓	✓	✓
Epping	Morrison's Pharmacy	✓	x	x
Epping	North Weald Chemists	x	x	x
Epping	Oakwood Pharmacy	✓	✓	x
Epping	Safedale Ltd	✓	x	x
Epping	Theydon Bois Pharmacy	✓	x	✓
Epping	Total Medcare Ltd Internet Pharmacy	x	x	x
Harlow	Addison Healthcare	✓	x	x
Harlow	Asda Pharmacy	✓	✓	x
Harlow	Church Langley Pharmacy	✓	x	x
Harlow	Potter Street Pharmacy	✓	✓	✓
Harlow	Boots the Chemists, The Stow, Harlow	✓	x	x
Harlow	Boots the Chemists, Town Centre, Harlow	✓	x	x
Harlow	Boots, Alliance Pharmacy, Bush House, Harlow	✓	x	x
Harlow	Your Local Boots, North House, Harlow	✓	x	x
Harlow	BUPA Home Healthcare Internet Pharmacy	x	x	x
Harlow	BUPA Home Healthcare Internet Pharmacy (Head Office)	x	x	x
Harlow	Medicare Pharmacy	✓	x	x
Harlow	Metwest Ltd	✓	x	x
Harlow	Co-operative Pharmacy, Market House, Harlow	✓	x	x
Harlow	Co-operative Pharmacy, The Stow, Harlow	✓	x	x
Harlow	Netteswell Pharmacy	✓	x	x
Harlow	Ramco Chemist	✓	x	x
Harlow	Sainsbury Supermarkets Pharmacy	✓	x	x
Harlow	Tesco Stores Ltd Instore Pharmacy	✓	x	x
Uttlesford	Boots the Chemists, Saffron Walden	✓	x	x
Uttlesford	Co-operative Pharmacy, Saffron Walden	✓	x	x
Uttlesford	Newport Pharmacy	✓	x	x
Uttlesford	Ropers Pharmacy	✓	x	x
Uttlesford	Thaxted Pharmacy	✓	x	x
Uttlesford	Yogi Pharmacy	✓	x	x

**Appendix D - Dispensing Doctors in NHS West Essex**

Name of Practice	Address	Locality
Angel Lane Surgery	The Surgery, Angel Lane, Great Dunmow, Essex CM6 1AQ	Uttlesford
John Tasker House Surgery	Main Surgery: John Tasker House, 56 New Street, Great Dunmow, Essex CM6 1BH Branch Surgery: The Surgery, Braintree Rd, Felsted, Great Dunmow. Essex CM6 3DL	Uttlesford
Thaxted Surgery	The Surgery, Margaret Street, Thaxted, Essex CM6 2QN	Uttlesford
The Gold Street Surgery	Main Surgery: Gold Street Surgery, Gold Street, Saffron Walden, Essex CB10 1EJ Branch Surgery: School Street Surgery, Great Chesterford, CB10 1NN	Uttlesford
Elsenham Surgery	Elsenham Surgery, Station Road, Elsenham, Bishops Stortford Herts CM22 6LA	Uttlesford
Steeple Bumpstead Surgery	Surgery, Bower Hall Drive, Steeple Bumpstead, Haverhill, Suffolk CB9 7ED	Uttlesford
Rectory Practice	Rectory Practice, 18 Castle Street, Saffron Walden, Essex CB10 1BP	Uttlesford
Borough Lane Surgery	The Surgery, 2 Borough Lane, Saffron Walden, Essex CB11 4AF	Uttlesford
Hatfield Heath Surgery	Main Surgery: The Surgery, Broomfields, Hatfield Heath, Herts CM22 7EH Branch Surgery: Eden Surgery, Cannons Lane, Hatfield Broad Oak, Herts, CM22 7HX	Uttlesford
Newport Surgery	The Surgery, Frambury Lane, Newport, Essex CB11 3PY	Uttlesford
Ongar Health Centre	Bansons Lane, Ongar, Essex, CM5 9AR	Epping Forest
Ongar Surgery	High Street, Ongar, Essex, CM5 9AA	Epping Forest

## Appendix E - Public Questionnaire

### Patient Questionnaire

NHS West Essex is undertaking a Pharmaceutical Needs Assessment (PNA). Part of this process is to engage with members of the public to identify the needs of local people in relation to pharmacy services and whether the need for services is being met. To help us in this process we would be grateful if you would take a few minutes to complete the confidential questionnaire below. It can also be found on our website [www.westessexpct.nhs.uk](http://www.westessexpct.nhs.uk). Where did you obtain this questionnaire?

Online	<input type="checkbox"/>	At an NHS premises (Doctors, Dentist etc)	<input type="checkbox"/>	At a pharmacy	<input type="checkbox"/>	By post	<input type="checkbox"/>	Other (please state) .....
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**1.0 Using Pharmacy Services** – Please tick just **one** box for each question in this section which best matches how you access pharmacy services in West Essex

1.1	Where do you normally go to a pharmacy?	Near my home <input type="checkbox"/>	Near my work <input type="checkbox"/>	Near/at my local GP surgery <input type="checkbox"/>	Whilst shopping <input type="checkbox"/>	Wherever is most convenient at the time <input type="checkbox"/>			
1.2	When do you most commonly use pharmacy services?	Weekdays before 9am <input type="checkbox"/>	Weekdays between 9am and 5pm <input type="checkbox"/>	Weekday evenings 5pm to 8pm <input type="checkbox"/>	Weekdays late night 8pm to 12 midnight <input type="checkbox"/>	Saturday <input type="checkbox"/> Sunday <input type="checkbox"/>			
1.3	When would you prefer to use pharmacy services?	Weekdays before 9am <input type="checkbox"/>	Weekdays between 9am and 5pm <input type="checkbox"/>	Weekday evenings 5pm to 8pm <input type="checkbox"/>	Weekdays late night 8pm to 12 midnight <input type="checkbox"/>	Saturday <input type="checkbox"/> Sunday <input type="checkbox"/>			
1.4	In the last 12 months how often have you visited a pharmacy?	Once a day <input type="checkbox"/>	2/3 times a week <input type="checkbox"/>	Once a week <input type="checkbox"/>	Once a fortnight <input type="checkbox"/>	Monthly <input type="checkbox"/>	6 monthly <input type="checkbox"/>	Yearly <input type="checkbox"/>	Never <input type="checkbox"/>
1.5	How do you normally travel to your pharmacy?	Walk <input type="checkbox"/>		Public transport <input type="checkbox"/>		Drive <input type="checkbox"/>		Other (please specify) <input type="checkbox"/>	
1.6	For what purpose do you normally visit a pharmacy ( <i>please tick</i>	To get a prescription dispensed <input type="checkbox"/>	To buy medicines without a prescription <input type="checkbox"/>	To collect a repeat prescription <input type="checkbox"/>	To buy health and beauty products <input type="checkbox"/>	To buy baby products <input type="checkbox"/>	To get advice about medicines <input type="checkbox"/>		

	<i>all that apply)</i>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
1.7	If you visit the pharmacy for any other service please tell us about it.						

**2.0 Using Pharmacy Services** - Please rate how strongly you agree with the following Statements. Please tick **ONE** box for each statement

	Strongly agree	Agree	Disagree	Strongly disagree
I can usually find an open pharmacy when needed				
I find it easy to find a pharmacy near where I want it				
I find it easy to find a pharmacy open in the evening (ie after 6pm)				
I find it easy to find a pharmacy open at the weekends				
There is a range of useful health services at my usual pharmacy				
My pharmacy offers helpful advice on other NHS services				
My pharmacy offers advice and over the counter medicines for minor ailments.				



**2.0 Your pharmacy services** - *The NHS is constantly developing and improving pharmacies to better reflect the needs of the community. Please consider each of the services below, tick the box if you have used the service in the last 12 months **AND** tick one box to state how strongly you agree each service should be available at your usual pharmacy*

Please tick each service you have used in the last year in a West Essex pharmacy		Please tick one box for each service for how strongly you agree that these services <u>SHOULD</u> be provided by your usual pharmacy			
	Used in the last year?	Strongly agree	Agree	Disagree	Strongly disagree
Over the counter medications for simple conditions such as hay fever, thrush, colds etc without seeing a GP					
Help to stop smoking					
Help with drug or alcohol addiction					
	Used in the last year?	Strongly agree	Agree	Disagree	Strongly disagree
Morning after pill (Emergency Hormonal Contraception)					
Chlamydia screening and/or treatment					
Free condom supply for young people (C-Card)					
Pregnancy testing service					
Medicines Use Reviews – <i>a one-to-one private discussion with your pharmacist about your medication – to ensure you are getting the best from your medication</i>					
Blood pressure monitoring and cholesterol testing					
Diet and exercise – healthy lifestyle advice – signposting to other sources of support					



Weight management					
Ante natal advice/care					
Management and awareness of long term conditions such as Diabetes, asthma etc					
Family planning services					
Prescription collection from surgery					
Prescription delivery service					
Please describe any other services you would like pharmacies to offer					

#### 4.0 About you – we will not be able to identify you from any of the information provided in this questionnaire

Please tell us the first half of your post code so that we can identify pharmacy provision in your area eg CM16. If you do not know your post code please tell us the locality you live in eg Epping Forest

Post Code	OR the locality you live in
<div style="display: flex; justify-content: space-around; align-items: center;"> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 2px;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 2px;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 2px;"></div> <div style="border: 1px solid black; width: 30px; height: 30px; margin: 2px;"></div> </div>	

Are you? (Please tick one box)

White British		White Irish		Other White (please state)		Chinese	
White & Black Caribbean		White & Black African		White & Asian		Indian	
Pakistani		Bangladeshi		Caribbean		African	
Other White background (please state) .....		Any other mixed background (please state) .....		Any other Asian background (please state) .....		Any other Black background (please state) .....	
Any other background (please state)							

Please tick as appropriate

<b>Employed</b>	Full time		Part time		Unemployed	
<b>Student</b>	Full time		Part time			
<b>Other</b>	Retired		Volunteer		Homemaker	
	Carer		Do you consider yourself to have a disability?		Other (please specify) .....	
<b>Are you?</b>	Male		Female		Prefer not to say	

Please indicate your age group

<b>18 – 24 years</b>	<b>25 – 35</b>	<b>36 – 45</b>	<b>46 – 55</b>	<b>56 – 65</b>	<b>66 – 75</b>	<b>76+</b>

Thank you for taking the time to complete this survey. The information we gather from your response will be included in our Pharmacy Needs Assessment which will be published in February 2011.

Please return the completed questionnaire in the pre-paid envelope provided.

**Completed Questionnaires must be returned by 17<sup>th</sup> September 2010.**

## Appendix F - Community Pharmacy Questionnaire



### Community Pharmacy Questionnaire

The first section of the questionnaire (pages 1 - 7) is based on the PSNC template and contractors are asked to complete all questions.

#### Premises Details

Contractor Code (ODS Code)	
Name of contractor (i.e. name of individual, partnership or company owning the pharmacy business)	
Trading Name	
Pharmacy Address	
Pharmacy email address	
Pharmacy telephone	
Pharmacy fax	
Pharmacy web address	
Can we store the above information and use this to contact you?	<input type="checkbox"/> Yes

#### Person completing this form:

Contact name of person completing questionnaire, if questions arise	Contact telephone number

#### Hours of opening

##### Core Hours

Day	Open from	To	Lunchtime
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

### Total Hours

Day	Open from	To	Lunchtime
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

### Consultation facilities

There is a consultation area (meeting the criteria for the Medicines Use Review service) (tick as appropriate)

On premises	None, or	<input type="checkbox"/>
	Available (including wheelchair access), or	<input type="checkbox"/>
	Available (without wheelchair access), or	<input type="checkbox"/>
	Planned within the next 12 months, or	<input type="checkbox"/>
	Other (specify)	
Where there is a consultation area, is it a closed room?		<input type="checkbox"/> yes
Off-site	Have access to off-site consultation area (i.e. one which the PCT has given consent for use)	<input type="checkbox"/> yes
	Willing to undertake consultations in patient's home / other suitable site	<input type="checkbox"/> yes
During consultations are there hand-washing facilities	In the consultation area, or	<input type="checkbox"/>
	Close to the consultation area, or	<input type="checkbox"/>
	None	<input type="checkbox"/>
Patients attending for consultations have access to toilet facilities		<input type="checkbox"/> yes
Languages spoken (in addition to English)		

### IT Facilities

#### Electronic Prescription Service

Release 1 enabled, or	<input type="checkbox"/>
Release 2 enabled, or	<input type="checkbox"/>
Intending to become Release 1 enabled within next 12 months; or	<input type="checkbox"/>
Intending to become Release 2 enabled within next 12 months; or	<input type="checkbox"/>
No plans for EPS at present	<input type="checkbox"/>

Does the pharmacy have the facility to open documents in the following formats:

Microsoft Word	<input type="checkbox"/>
Microsoft Excel	<input type="checkbox"/>
Microsoft Access	<input type="checkbox"/>
PDF	<input type="checkbox"/>

### Services

#### Essential

Does the pharmacy dispense appliances?

Yes – All types, or	<input type="checkbox"/>
Yes, excluding stoma appliances, or	<input type="checkbox"/>
Yes, excluding incontinence appliances, or	<input type="checkbox"/>
Yes, excluding stoma and incontinence appliances, or	<input type="checkbox"/>
Yes, just dressings, or	<input type="checkbox"/>
Other [identify]	
None	<input type="checkbox"/>

#### Advanced services

	Yes	Intending to begin within next 12 months	No - not intending to provide
Medicines Use Review service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Appliance Use Review service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stoma Appliance Customisation service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Enhanced services

	Currently providing	Willing and able to provide if commissioned <sup>29</sup>	Willing to provide if commissioned (need training)	Willing to provide if commissioned (need facilities adjustment)	Not able or willing to provide
Anticoagulant Monitoring Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<sup>29</sup> willingness to provide the Enhanced services if commissioned, is an undertaking to provide the service for agreed remuneration. Normally, this would be as agreed between the PCT and the Local Pharmaceutical Committee, but may be agreed directly between the PCT and the contractor.

	Currently providing	Willing and able to provide if commissioned <sup>29</sup>	Willing to provide if commissioned (need training)	Willing to provide if commissioned (need facilities adjustment)	Not able or willing to provide
Anti-viral Distribution Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Care Home Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlamydia Testing Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chlamydia Treatment Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Disease Specific Medicines Management Service, (tick boxes for following diseases)					
Allergies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Alzheimer's/dementia	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Asthma	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
CHD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
COPD	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Depression	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes type I	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes type II	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Epilepsy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heart Failure	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hypertension	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Parkinson's disease	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state)					
Emergency Hormonal Contraception Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gluten Free Food Supply Service (i.e. not via FP10)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Home Delivery Service (not appliances)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Independent Prescribing Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If currently providing Independent Prescribing Service, what therapeutic areas are covered?					
Language Access Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medication Review Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medicines Assessment and Compliance Support Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Minor Ailment Scheme	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MUR plus Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Needle and Syringe Exchange Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



	Currently providing	Willing and able to provide if commissioned <sup>29</sup>	Willing to provide if commissioned (need training)	Willing to provide if commissioned (need facilities adjustment)	Not able or willing to provide
Obesity management (adults and children)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
On Demand Availability of Specialist Drugs Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Oral Contraceptive Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Out of Hours Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Patient Group Direction Service (name the medicines covered by the Patient Group Direction)					
Phlebotomy Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Prescriber Support Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Schools Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Screening Service					
Alcohol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cholesterol	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Diabetes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Gonorrhoea	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
H. pylori	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HbA1C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hepatitis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HIV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please state)					
Seasonal Influenza Vaccination Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other vaccinations					
Childhood vaccinations	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Hepatitis (at risk workers or patients)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
HPV	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Travel vaccines	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other – (please state)					
Sharps Disposal Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stop Smoking Service,	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supervised Administration Service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Supplementary Prescribing Service (what therapeutic areas are covered?)					
Vascular Risk Assessment Service (NHS Health Check)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Non NHS funded services**

Does the pharmacy provide any of the following?

Collection of prescriptions from surgeries	<input type="checkbox"/>
Delivery of dispensed medicines – Free of charge on request	<input type="checkbox"/>
Delivery of dispensed medicines – Selected patient groups (list criteria)	
Delivery of dispensed medicines – Selected areas (list areas)	
Delivery of dispensed medicines - chargeable	<input type="checkbox"/>

under the contractual framework, some locally commissioned services may be developed into a national service, and will be added to the list of Directed services. Identifying these now may help future proofing, if the Directions are amended

The following questions are based on “Developing Pharmaceutical Needs Assessments Guide 11: Minimum data for PNA”. The additional data will be invaluable in the process of developing the Mid Essex Pharmaceutical Needs Assessment, but completion is optional.

<b>Access for customers</b>	<b>Yes</b>	<b>No</b>
Can customers legally park within 50 metres of your store?		
Can disabled customers (with a ‘blue badge’) park within 10 metres of your store?		
Is there a bus stop within reasonable walking distance of your store?		
Is the entrance to the store suitable for wheel chair access? eg wide doorway, level entrance or ramp, easily opened or automatic door.		
Are all areas of the sales floor accessible by wheelchair?		
Do you have other facilities in your pharmacy aimed at helping people with disabilities access your services? eg hearing loop, information/posters/leaflets in large print, staff trained in disability awareness etc. Please state .....		
Any other comments		

Premises	Yes	No
Are the premises subject to any of the following development constraints?		
Listed building consent		
Within a conservation area		
Limited or no room for expansion		
Other (please specify)		

Information Technology	Yes	No
Is the email address you have given on page 1 accessible to staff during business hours?		
If not, is there an email address that we can use to contact staff during business hours? Please state.....		
Is a smart card available at all times		

Workforce				
Please include below details of all staff working in the pharmacy (please continue on a separate sheet if required)				
Job title	Hours worked per week	Relevant qualifications (eg non-medical prescriber, L2 stop smoking adviser etc)	Any special skills/interests eg additional language spoken	
Is there more than one pharmacist on duty at any time during the week?	How many hours a week does the additional pharmacist(s) work?	Is the additional pharmacist(s) there for a specific reason? (please state) eg support for specific services such as MURs		
Yes    No	..... hours			

Current Service Provision – Supply of Medicines to Care Homes	Yes	No
Does your dispensary supply medicines etc to care homes?		
Please list homes below (if applicable) <i>Continue on a separate sheet if necessary</i>		

Current Service Provision – Other
Are there any other services provided from your dispensary that you would like to be considered in the Pharmaceutical Needs Assessment? List below.

Other information
Is there any other information that you would like us to consider in the Pharmaceutical Needs Assessment? Please add below.

Thank you for taking the time to complete this questionnaire. If you have any queries please contact Claire Glasscock 01992 561666 ext 1462 or by email [claire.glasscock@westessexpct.nhs.uk](mailto:claire.glasscock@westessexpct.nhs.uk).

**Completed Questionnaires must be returned by 17<sup>th</sup> September 2010.**

## Appendix G - Dispensing doctors' questionnaire



**West Essex**

### Dispensing Doctors/ Appliance Contractors Questionnaire

The first section of the questionnaire (pages 1 - 7) is based on the PSNC template and contractors are asked to complete all questions.

#### Premises Details

Contractor Code (ODS Code)	
Name of contractor (i.e. name of individual, partnership or company owning the business)	
Dispensary / appliance contractor address	
email address	
telephone	
fax	
web address	
Can we store the above information and use this to contact you?	<input type="checkbox"/> Yes

#### Person completing this form:

Contact name of person completing questionnaire, if questions arise	Contact telephone number

#### Hours of opening

Day	Open from	To	Lunchtime
Monday			
Tuesday			
Wednesday			
Thursday			
Friday			
Saturday			
Sunday			

### Consultation facilities (appliance contractors only)

There is a consultation area (meeting the criteria for the Appliance Use Review service) (tick as appropriate)

On premises	None, or	<input type="checkbox"/>
	Available (including wheelchair access), or	<input type="checkbox"/>
	Available (without wheelchair access), or	<input type="checkbox"/>
	Planned within the next 12 months, or	<input type="checkbox"/>
	Other (specify)	
Where there is a consultation area, is it a closed room?		<input type="checkbox"/> yes
Off-site	Have access to off-site consultation area (i.e. one which the PCT has given consent for use)	<input type="checkbox"/> yes
	Willing to undertake consultations in patient's home / other suitable site	<input type="checkbox"/> yes
During consultations are there hand-washing facilities	In the consultation area, or	<input type="checkbox"/>
	Close to the consultation area, or	<input type="checkbox"/>
	None	<input type="checkbox"/>
Patients attending for consultations have access to toilet facilities		<input type="checkbox"/> yes
Languages spoken (in addition to English)		

### IT Facilities

Electronic Prescription Service

Release 1 enabled, or	<input type="checkbox"/>
Release 2 enabled, or	<input type="checkbox"/>
Intending to become Release 1 enabled within next 12 months; or	<input type="checkbox"/>
Intending to become Release 2 enabled within next 12 months; or	<input type="checkbox"/>
No plans for EPS at present	<input type="checkbox"/>

### Services

Do you dispense appliances?

Yes – All types, or	<input type="checkbox"/>
Yes, excluding stoma appliances, or	<input type="checkbox"/>
Yes, excluding incontinence appliances, or	<input type="checkbox"/>
Yes, excluding stoma and incontinence appliances, or	<input type="checkbox"/>
Yes, just dressings, or	<input type="checkbox"/>
Other [identify]	
None	<input type="checkbox"/>

#### Advanced services (appliance contractors only)

	Yes	Intending to begin within next 12 months	No - not intending to provide
Appliance Use Review service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stoma Appliance Customisation service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### Enhanced services (dispensing doctors only)

	Yes	Intending to begin within next 12 months	No - not intending to provide
Dispensary Services Quality Scheme	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### **Non NHS funded services**

Does the dispensary / appliance contractor provide any of the following?

Collection of prescriptions from surgeries	<input type="checkbox"/>
Delivery of dispensed medicines – Free of charge on request	<input type="checkbox"/>
Delivery of dispensed medicines – Selected patient groups (list criteria)	
Delivery of dispensed medicines – Selected areas (list areas)	
Delivery of dispensed medicines - chargeable	<input type="checkbox"/>

The following questions are based on "Developing Pharmaceutical Needs Assessments Guide 11: Minimum data for PNA". The additional data will be invaluable in the process of developing the Mid Essex Pharmaceutical Needs Assessment, but completion is optional.

<b>Access for customers</b>	<b>Yes</b>	<b>No</b>
Can customers legally park within 50 metres of your dispensary?		
Can disabled customers (with a 'blue badge') park within 10 metres of your dispensary?		
Is there a bus stop within reasonable walking distance?		
Is the entrance to the store suitable for wheel chair access? eg wide doorway, level entrance or ramp, easily opened or automatic door.		
Are all areas of the sales floor accessible by wheelchair?		
Do you have other facilities in your dispensary aimed at helping people with disabilities access your services? eg hearing loop, information/posters/leaflets in large print, staff trained in disability awareness etc. Please state		



.....		
Any other comments		
<b>Premises</b>	<b>Yes</b>	<b>No</b>
Are the premises subject to any of the following development constraints?		
Listed building consent		
Within a conservation area		
Limited or no room for expansion		
Other (please specify)		

<b>Information Technology</b>	<b>Yes</b>	<b>No</b>
Is the email address you have given on page 1 accessible to staff during business hours?		
If not, is there an email address that we can use to contact staff during business hours? Please state.....		
Is a smart card available at all times		

<b>Workforce</b>			
Please include below details of all staff working in the dispensary (please continue on a separate sheet if required)			
Job title	Hours worked per week	Relevant qualifications (eg non-medical prescriber, L2 stop smoking adviser etc)	Any special skills/interests eg additional language spoken

<b>Current Service Provision – Supply of Medicines to Care Homes</b>	<b>Yes</b>	<b>No</b>
Does your dispensary supply medicines etc to care homes?		
Please list homes below (if applicable) <i>Continue on a separate sheet if necessary</i>		


**Current Service Provision – Other**

Are there any other services provided from your dispensary that you would like to be considered in the Pharmaceutical Needs Assessment? List below.

--

**Other information**

Is there any other information that you would like us to consider in the Pharmaceutical Needs Assessment? Please add below.

--

Thank you for taking the time to complete this questionnaire. If you have any queries please contact Claire Glasscock 01992 561666 ext 1462 or by email [claire.glasscock@westessexpct.nhs.uk](mailto:claire.glasscock@westessexpct.nhs.uk).

**Completed Questionnaires must be returned by 17<sup>th</sup> September 2010.**

## Appendix H - Healthcare Professionals Questionnaire



West Essex

### Questionnaire for Health Professionals

NHS West Essex is undertaking a Pharmaceutical Needs Assessment (PNA). This is a statutory obligation and will inform our future commissioning plans. We are keen to obtain the views of as many individuals as possible including patients, members of the public, stakeholders and health care professionals. To help us in this process we would be grateful if you would take a few minutes to complete the confidential questionnaire below.

**1. In which part of the NHS do you work?** .....

**Are you a?**

General Practitioner		Optician	
Nurse		Dietician	
Consultant/hospital doctor		Chiropodist	
Health visitor		Mental health professional	
Dentist		Therapist ( <i>please state discipline</i> )	
Other (please state)			

**2. Have you ever referred a patient to a service provided by a community pharmacy?**

Yes	go to 2a
No	Go to 2b

2a. Please indicate the service(s)


2b. Would you be happy to refer a patient to a community pharmacy to use a service?

Yes	
No	

**3. These NHS services are currently provided in community pharmacies in West Essex. To which services would you be happy to refer patients? (*please tick*)**

<b>Medicine Use Review</b> – advice on use of medicines		<b>Palliative Care Drug Box Scheme</b>	
<b>Stop smoking</b> advice and supply of NRT products		<b>Sexual health</b> services – chlamydia testing & treatment, EHC etc.	

3a. Please list below any additional services you would like to see provided in community pharmacy. (*See over for a comprehensive list of services*)

---

Thank you for taking the time to complete this questionnaire. If you have any queries please contact Claire Glasscock 01992 561666 ext 1462 or by email [claire.glasscock@westessexpct.nhs.uk](mailto:claire.glasscock@westessexpct.nhs.uk). All returns should be made by email to:

**Completed Questionnaires must be returned by 17<sup>th</sup>**  
**September 2010.**

Medicine Use Review	Appliance Use Review	Stoma appliance customisation service	Anticoagulant monitoring service
Anti-viral distribution service	Care home service	Chlamydia testing	Chlamydia treatment
Disease specific medicines management service eg allergies, asthma, diabetes etc	Emergency hormonal contraception service	Gluten free food supply	Home delivery service
Independent prescribing service	Language access service	Medication review service	Medicines assessment and compliance support service
Minor ailment scheme	MUR plus service	Needle and syringe exchange	Obesity management
On demand availability of specialist drugs	Oral contraceptive service	Out of hours services	Phlebotomy service
Prescriber support service	Schools service	Screening service eg alcohol, diabetes, hepatitis, HIV etc	Seasonal influenza vaccination service
Other vaccinations eg HPV, travel etc	Sharps disposal service	Stop smoking service	Supervise administration service
Vascular risk assessment service (NHS health check)	Collection of prescriptions from surgeries	Delivery of dispensed medicines	

## Appendix I – Results of Questionnaires (abridged)

<b>Patient data collection</b>		
Number of Questionnaires	235	
<b>Travel</b>		
Drive	94	40.0%
Walk	109	46.4%
Weekdays between 9am and 5pm	196	83.4%
<b>Agree/Strongly agree</b>		
I can usually find an open pharmacy when needed	221	94.0%
I find it easy to find a pharmacy near where I want it	212	90.2%
I find it easy to find a pharmacy open in the evening (ie after 6pm)	92	39.1%
I find it easy to find a pharmacy open at the weekends	168	71.5%
There is a range of useful health services at my usual pharmacy	191	81.3%
My pharmacy offers helpful advice on other NHS services	170	72.3%
My pharmacy offers advice and over the counter medicines for minor ailments.	201	85.5%
Retired	96	40.9%
18 – 24	8	3.4%
25 – 35	12	5.1%
36 – 45	36	15.3%
46 – 55	56	23.8%
56 – 65	48	20.4%
66 – 75	44	18.7%
76+	28	11.9%

Number of Returns

7

Number of Dispensing Docs

12

Return rate

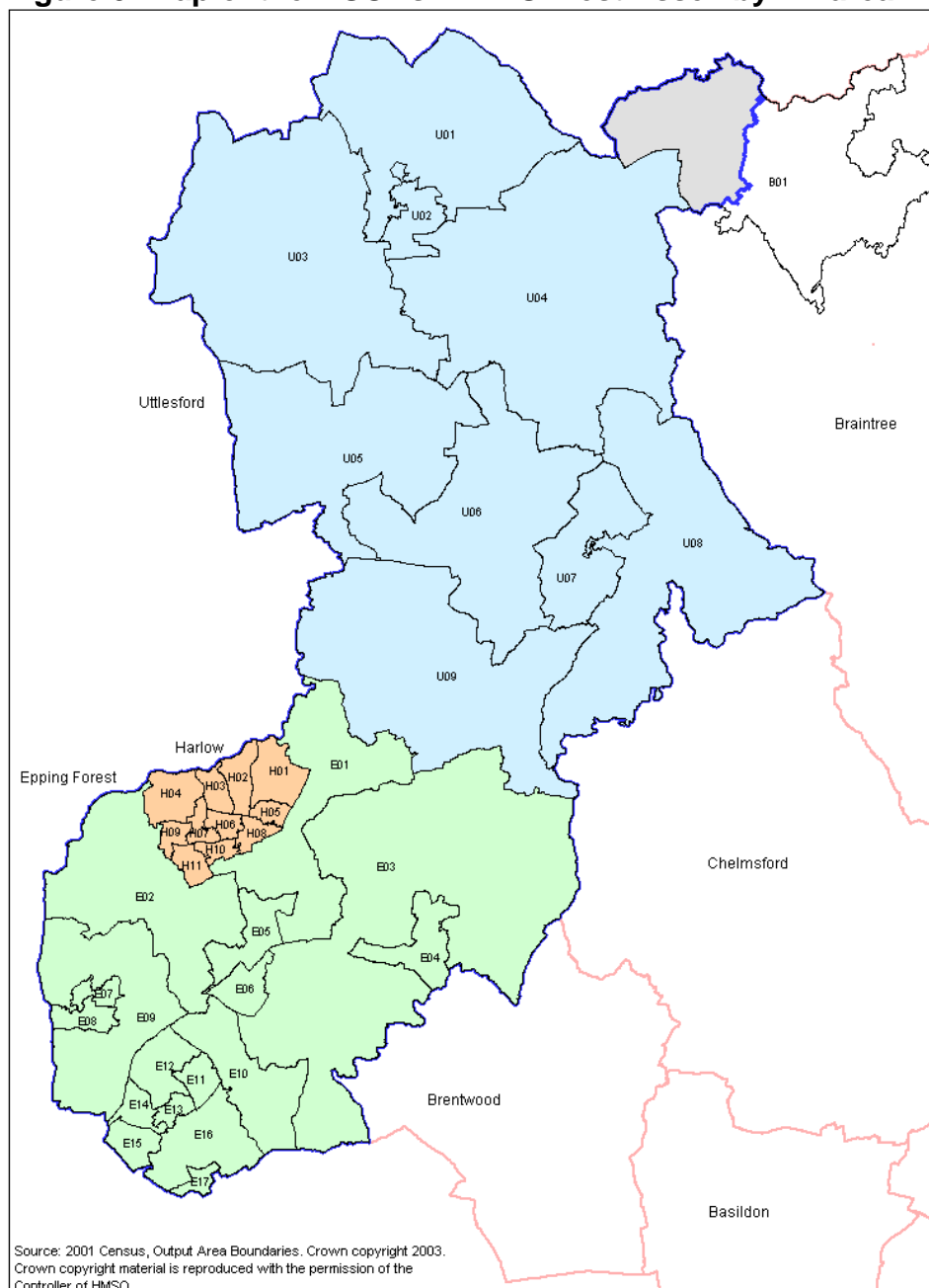
58%

Consultation Facilities		Available (including wheelchair access)	Available (without wheelchair access)	Planned within the next 12 months	Other	None
	On Premises	2	0	0	0	0
		28.6%	0.0%	0.0%	0.0%	0.0%
	Closed Room?	Yes	No			
		6	0			
		85.7%	0.0%			

No plans for EPS at present			
Electronic Prescription Service	5	71.4%	
Yes – All types			
Dispensing Appliances	7	100.0%	
Appliance Use Review service	Yes	No - not intending to provide	
	1	2	
	14.3%	28.6%	
Stoma Appliance Customisation service	Yes	No - not intending to provide	
	1	2	
	14.3%	28.6%	
Yes			
Dispensary Services Quality Scheme	7	100.0%	
Collection of prescriptions from surgeries	Yes	No	N/A
	1	0	3
	14.3%	0.0%	42.9%
Delivery of dispensed medicines, Free of charge on request	Yes	No	
	0	0	1
	0.0%	0.0%	14.3%
Delivery of dispensed medicines, Selected patient groups (list criteria)	Yes	No	
	0	0	1
	0.0%	0.0%	14.3%
Delivery of dispensed medicines, Selected areas (list areas)	Yes	No	
	0	0	1
	0.0%	0.0%	14.3%
Delivery of dispensed medicines - chargeable	Yes	No	
	0	0	1
	0.0%	0.0%	14.3%
Can customers legally park within 50 metres of your store?	Yes	No	
	7	0	
	100.0%	0.0%	
Can disabled customers (with a 'blue badge') park within 10 metres of your store?	Yes	No	
	6	1	
	85.7%	14.3%	
Is there a bus stop within reasonable walking distance of your store?	Yes	No	
	7	0	
	100.0%	0.0%	
Is the entrance to the store suitable for wheel chair access? eg wide doorway, level entrance	Yes	No	
	7	0	
	100.0%	0.0%	
Are all areas of the sales floor accessible by wheelchair?	Yes	No	
	7	0	
	100.0%	0.0%	
Does your dispensary supply medicines etc to care homes?	Yes	No	
	5	2	
	71.4%	28.6%	

## Appendix J - Locations of the MSOAs within west Essex

**Figure 5: Map of the MSOAs in NHS West Essex by LA area**



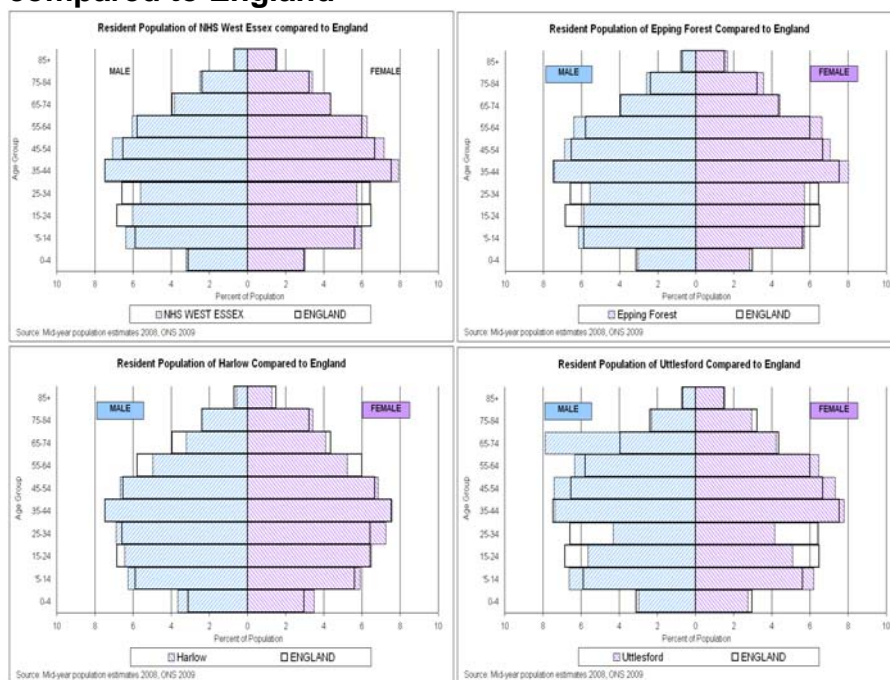
**Table 25: Key to MSOA in NHS West Essex map (Figure 5)**

Key	MSOA Name	MSOA Code	Key	MSOA Name	MSOA Code	Key	MSOA Name	MSOA Code
E01	Epping Forest 001	E02004527	E14	Epping Forest	E02004540	H10	Harlow 010	E02004553
E02	Epping Forest 002	E02004528	E15	Epping Forest	E02004541	H11	Harlow 011	E02004554
E03	Epping Forest 003	E02004529	E16	Epping Forest	E02004542	U01	Uttlesford 001	E02004591
E04	Epping Forest 004	E02004530	E17	Epping Forest	E02004543	U02	Uttlesford 002	E02004592
E05	Epping Forest 005	E02004531	H01	Harlow 001	E02004544	U03	Uttlesford 003	E02004593
E06	Epping Forest 006	E02004532	H02	Harlow 002	E02004545	U04	Uttlesford 004	E02004594
E07	Epping Forest 007	E02004533	H03	Harlow 003	E02004546	U05	Uttlesford 005	E02004595
E08	Epping Forest 008	E02004534	H04	Harlow 004	E02004547	U06	Uttlesford 006	E02004596
E09	Epping Forest 009	E02004535	H05	Harlow 005	E02004548	U07	Uttlesford 007	E02004597
E10	Epping Forest 010	E02004536	H06	Harlow 006	E02004549	U08	Uttlesford 008	E02004598
E11	Epping Forest 011	E02004537	H07	Harlow 007	E02004550	U09	Uttlesford 009	E02004599
E12	Epping Forest 012	E02004538	H08	Harlow 008	E02004551	B01	Braintree 001	E02004446
E13	Epping Forest 013	E02004539	H09	Harlow 009	E02004552			



## Appendix K – Population of NHS West Essex

**Figure 6: Population pyramids of west Essex resident population compared to England**



The number of people by each MSOA can be seen in Table 28 in Appendix X.

## Appendix L – Population projections of NHS West Essex

West Essex was one of a number of ‘growth areas’ identified for regeneration and growth but the recent economic situation has meant that a number of the plans for large housing projects have been put on hold.

ONS data shows that the population of NHS West Essex is projected to grow to over 314,600 people by 2025, a 12.3% increase from 2008.

An ageing population will also be an important demographic trend over coming years. In general, people are living longer and therefore there are increasing numbers and proportions of older people. Population ageing is predicted to occur at a slightly slower rate than that for the East of England, but there are some significant differences in expected population structures between areas. Epping Forest and Uttlesford districts will experience most of the increase in the older population.

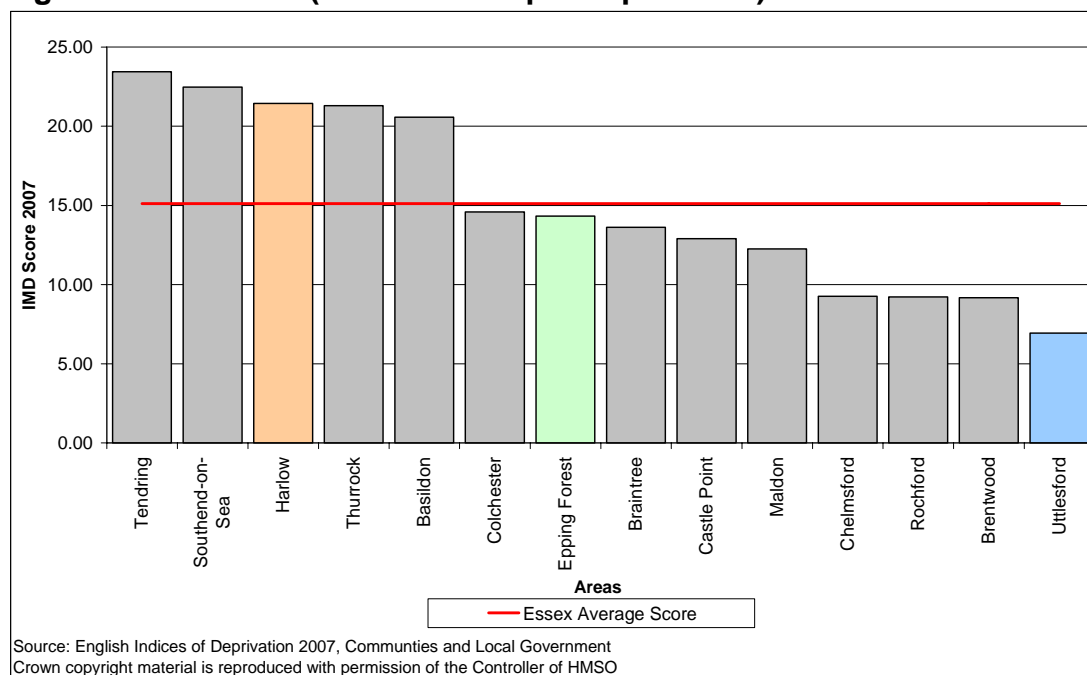
**Table 26: Population changes in west Essex**

Age group	ONS Projections (2008-2025)			
	NHS West Essex	Epping Forest	Harlow	Uttlesford
u5 population	Expected to increase by nearly 7.5%	Expected to increase by 6.9%	Expected to increase by 7%	Expected to increase by 9.1%
5-14 year olds	Expected to increase by around 12.6%	Expected to increase by 8.9%	Expected to increase by 15.5%	Expected to increase by 15.2%
15-64 year olds	Expected to increase by nearly 5.9%	Expected to increase by 4.4%	Expected to increase by 5.9%	Expected to increase by 7.9%
Aged 65+	Expected to increase by 34.6%	Expected to increase by 35.4%	Expected to increase by 23.5%	Expected to increase by 60.3%
Aged 85+	Expected to increase by 45.5%	Expected to increase by 64.5%	Expected to increase by 73.3%	Expected to increase by 100%
Total population	Expected to increase by over 12.3%	Expected to increase by 10.5%	Expected to increase by 9.9%	Expected to increase by 17.4%

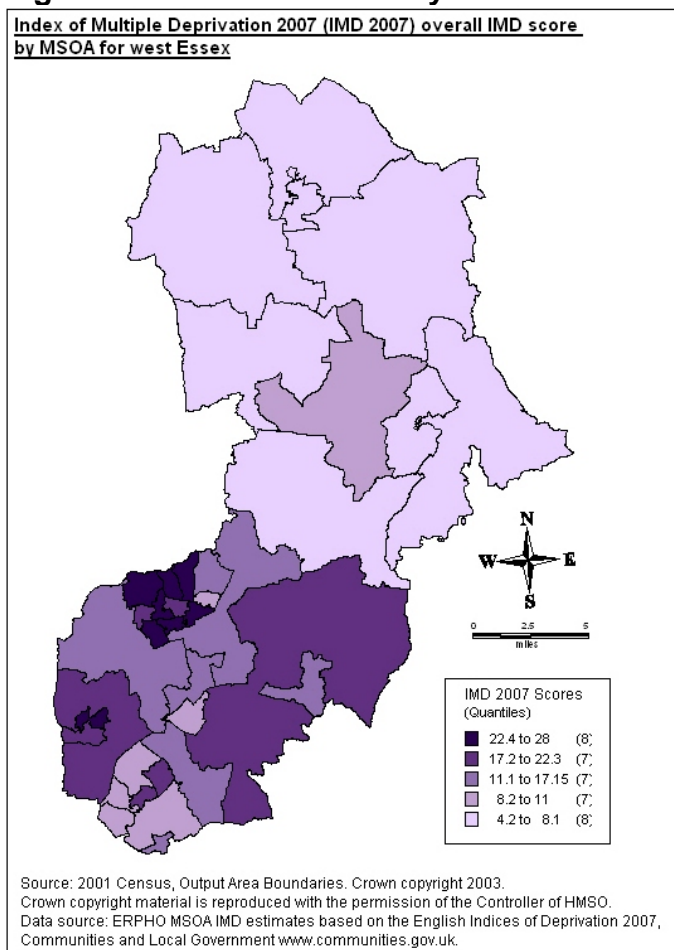
Older women outnumber older men, as premature death rates are greater among men than among women as women tend to live longer than men, and with deaths of men in the World Wars having an impact. It is expected that the over-representation of women in older age groups will decrease in the long-term due to the improvement in death rates among older men. Using the ONS projections, among those aged 85+, it is estimated that the proportion of women will decrease from 66% in 2008 to 59% in 2025.

## Appendix M – Deprivation

**Figure 7: Essex IMD(Index of Multiple Deprivation) 2007 scores**



**Figure 8: IMD 2007 scores by MSOA in west Essex**



## Appendix N – Life Expectancy

Figure 9: Life expectancy in years by district from 1991 to 2008

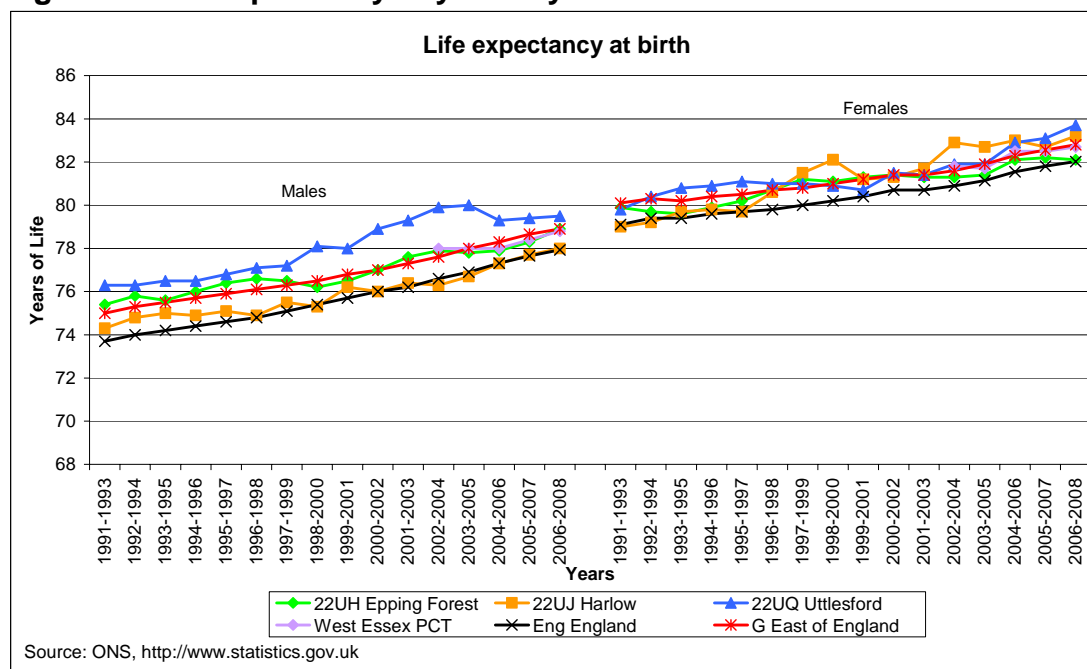
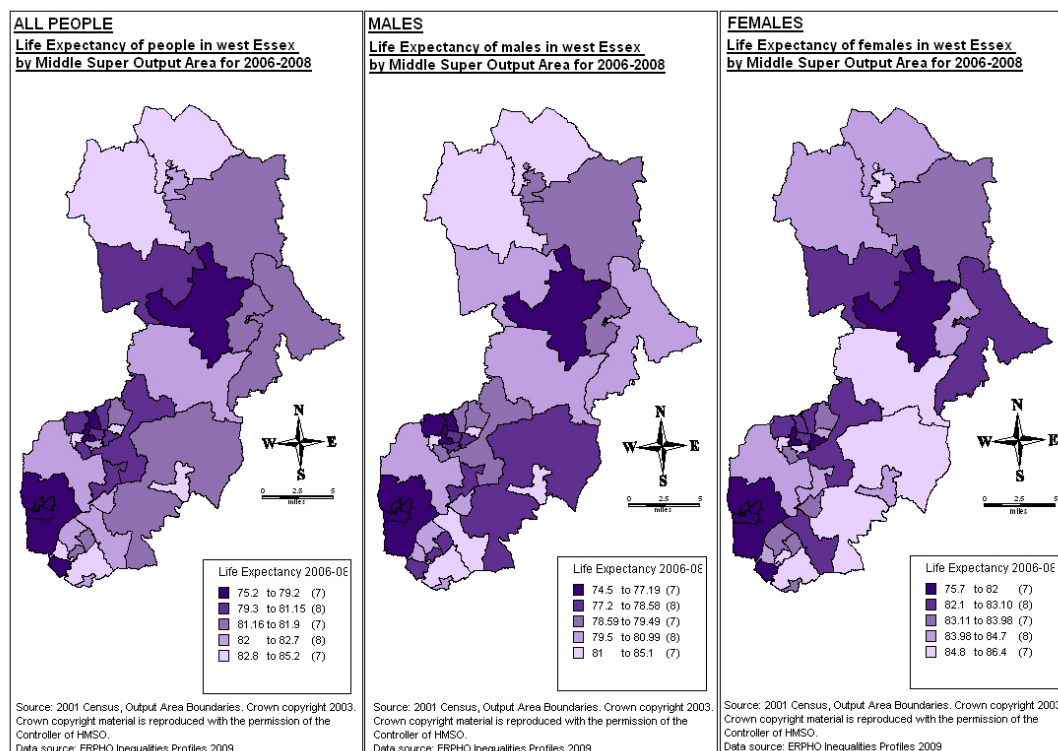
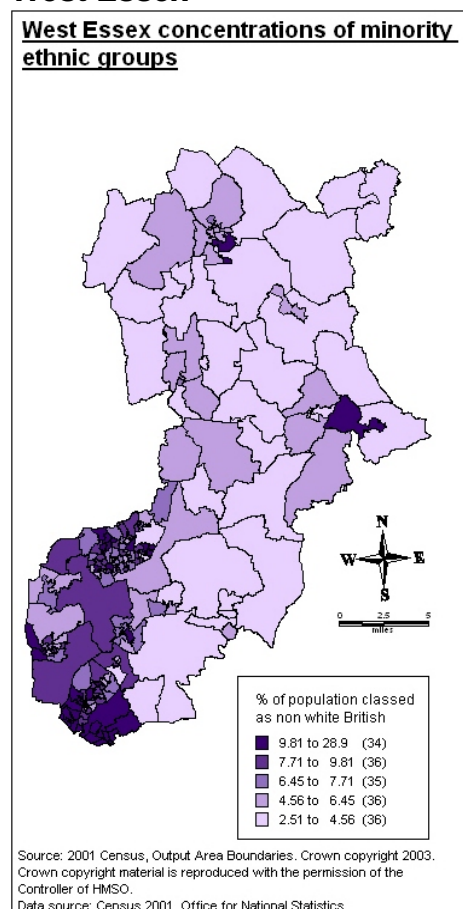


Figure 10: Life expectancy at birth by gender and MSOA for west Essex, 2006-08

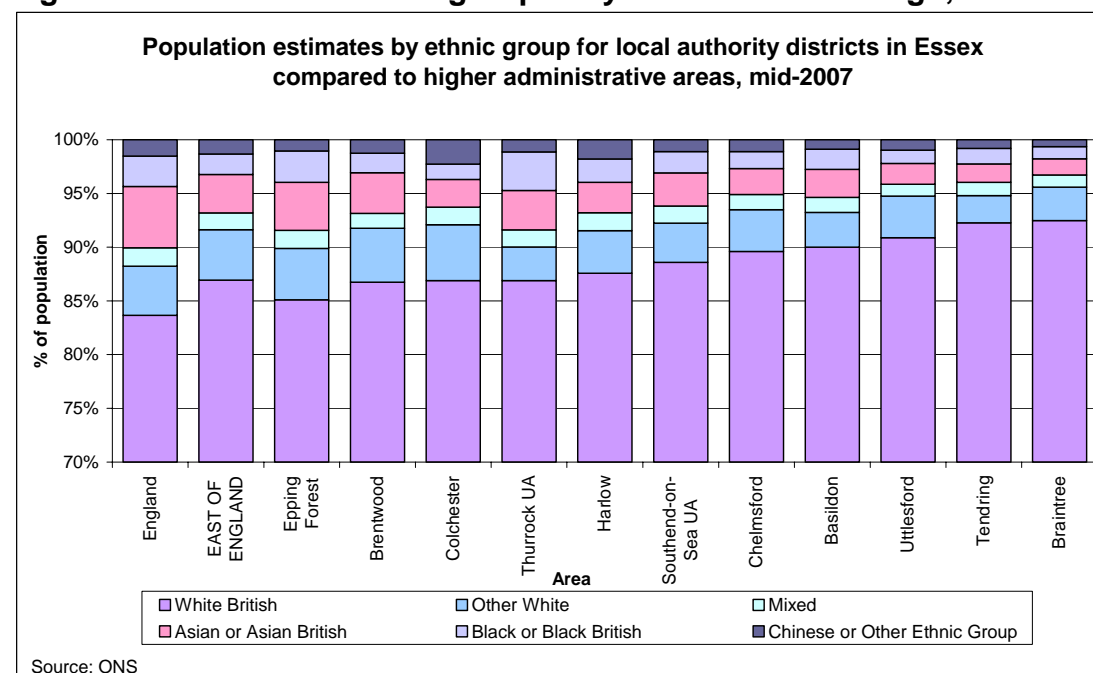


## Appendix O – Black and Minority ethnic groups

**Figure 11: Essex concentrations of non-White British population in NHS West Essex**

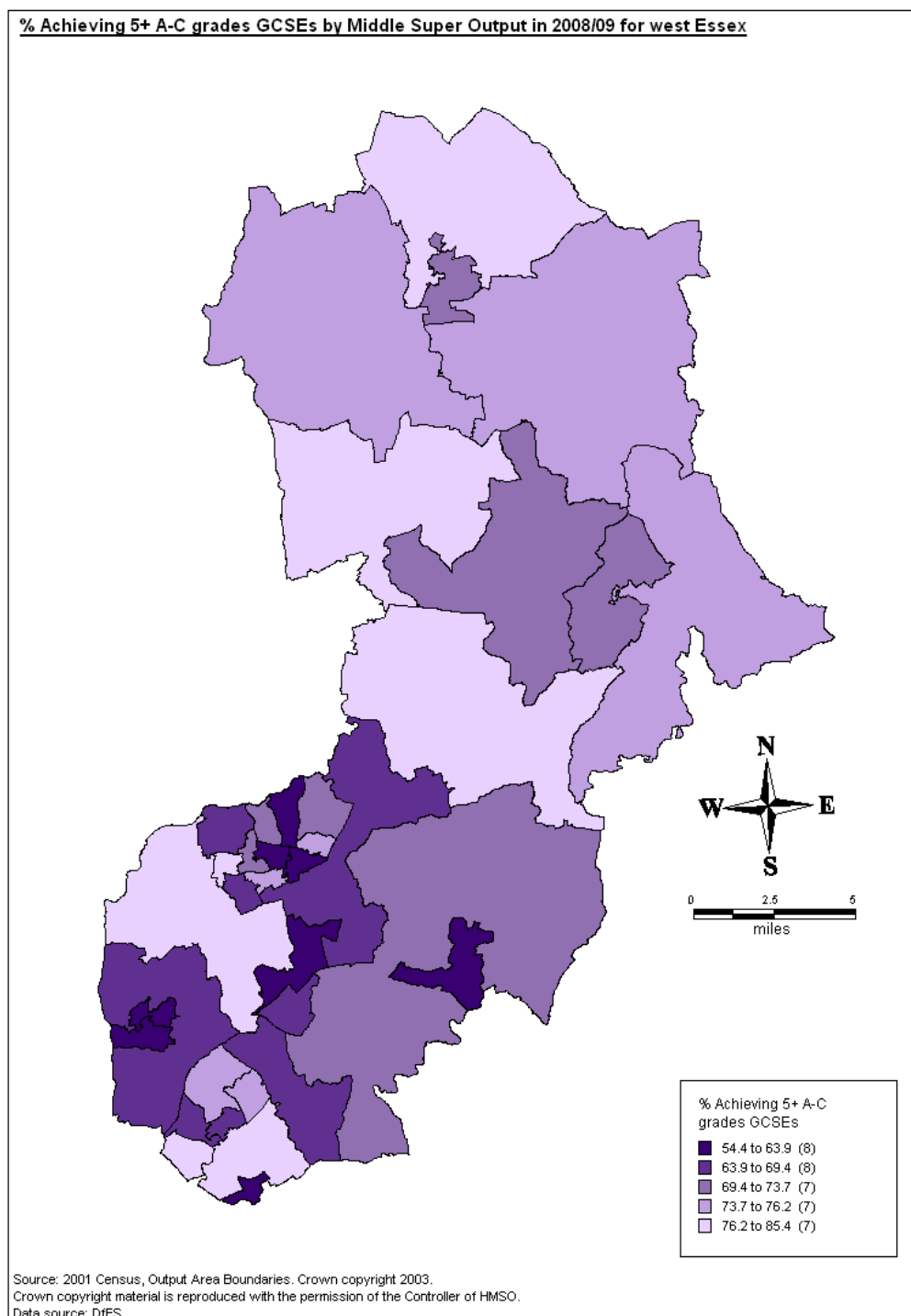


**Figure 12: Essex ethnic groups by district / borough, mid-2007**



## Appendix P – Education

**Figure 13: Percent of the population achieving 5+ A\*-C grades at GCSE by MSOA**



## Appendix Q – Socioeconomics

**Figure 14: Percent of those employed by socio-economic classification (Jan-Dec 2009)**

	Percent of all in employment					
	Epping Forest	Harlow	Uttlesford	Essex	East of England	England
<b>Socio-economic classification 1-3</b>	<b>18.3</b>	<b>13.0</b>	<b>18.5</b>	<b>15.1</b>	<b>15.1</b>	<b>14.8</b>
1 Managers and senior officials	27.7	13.8	24.3	19.5	17.5	16.1
2 Professional occupations	10.3	13.2	15.6	11	13.5	13.7
3 Associate professional & technical	16.9	12	15.5	14.7	14.2	14.8
<b>Socio-economic classification 4-5</b>	<b>12.6</b>	<b>12.1</b>	<b>11.3</b>	<b>11.6</b>	<b>11.1</b>	<b>10.7</b>
4 Administrative & secretarial	13.5	12.3	12.6	11.7	11	11.2
5 Skilled trades occupations	11.6	12	9.9	11.5	11.2	10.3
<b>Socio-economic classification 6-7</b>	<b>4.0</b>	<b>10.0</b>	<b>4.1</b>	<b>8.0</b>	<b>7.4</b>	<b>7.9</b>
6 Personal service occupations	3.9	11	3.6	9	7.9	8.5
7 Sales and customer service occupations	4.1	9.2	4.7	7	7	7.3
<b>Socio-economic classification 8-9</b>	<b>5.6</b>	<b>7.7</b>	<b>6.2</b>	<b>7.6</b>	<b>8.7</b>	<b>8.9</b>
8 Process plant & machine operatives	4.1	8.1	4.1	5.7	6.2	6.6
9 Elementary occupations	7.2	7.2	8.3	9.5	11.3	11.2

Source: Annual Population Survey, ONS



## Appendix R – Employment

**Table 27: Economic and employment statistics by area, gender and comparative years**

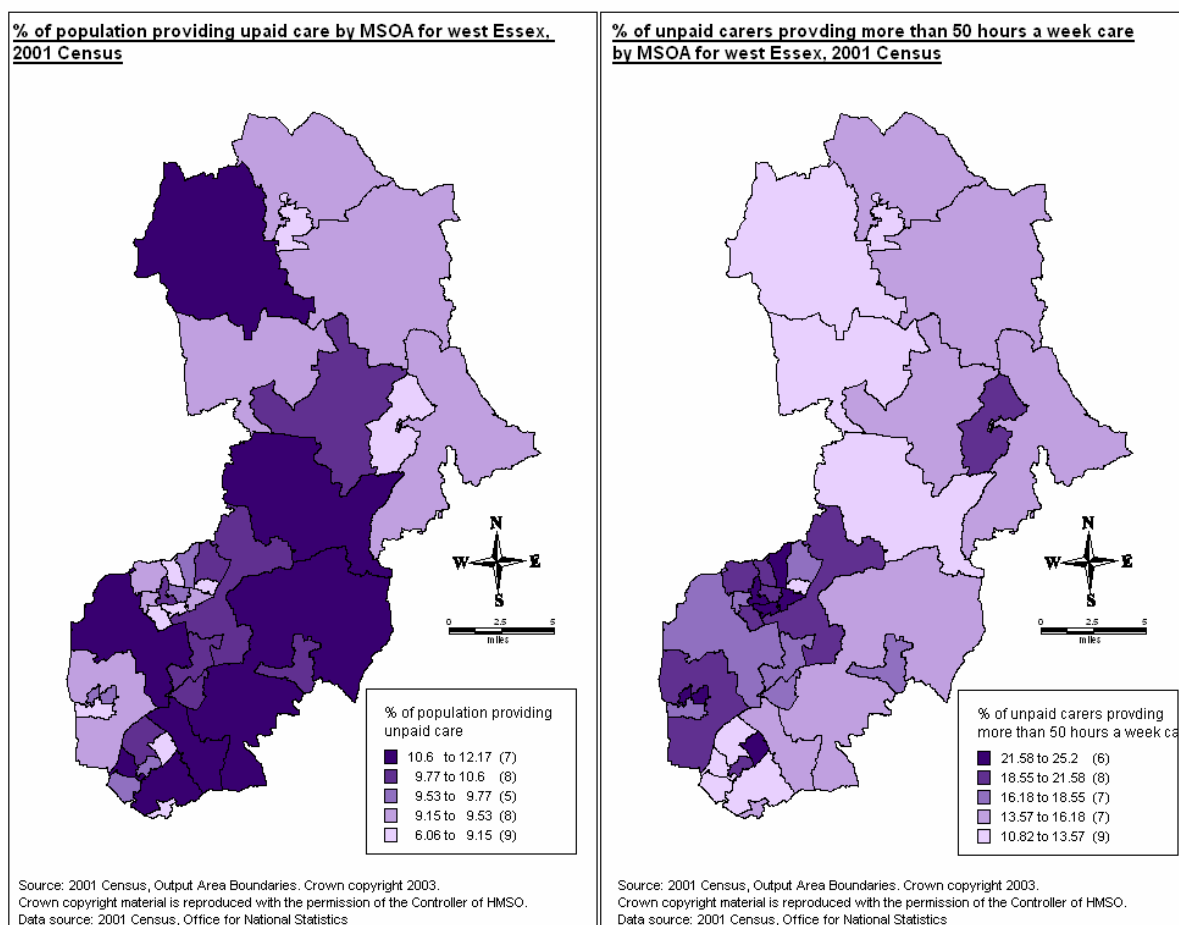
Variable	Gender	Epping Forest		Harlow		Uttlesford		Essex		England	
		Apr 2005-Mar 2006	Apr 2009-Mar 2010	Apr 2005-Mar 2006	Apr 2009-Mar 2010	Apr 2005-Mar 2006	Apr 2009-Mar 2010	Apr 2005-Mar 2006	Apr 2009-Mar 2010	Apr 2005-Mar 2006	Apr 2009-Mar 2010
Economic activity rate - aged 16-64	All people	81.3	76.3	87	82.1	83	81.2	78.9	77.7	76.6	76.6
	Male	92	84	95.2	90.4	83.2	88.7	87.1	85.2	83.4	83
	Female	71.1	68.7	78.9	73.7	82.8	73.3	70.9	70.3	69.8	70.3
Employment rate - aged 16-64	All people	77.9	68.9	79.9	71.5	80.8	78.5	76	72.3	72.7	70.5
	Male	89.1	77.8	86.5	82.8	78.7	85.9	84.1	79.6	78.8	75.6
	Female	67.3	60	73.5	60	82.8	70.6	68.2	65	66.6	65.4
Aged 16-64 employment rate - ethnic minority	All people	74.8	60	42	70.2	0	100	73.2	59.3	58.2	58.2
% aged 16-64 who are employees	All people	70.7	56.1	73.8	64.2	63.7	64.8	64.8	61.4	63.1	60.8
	Males	78	60	76.8	68.3	54.9	68.1	66.2	62.8	65	62.1
	Females	63.9	52.2	70.8	60	72.3	61.1	63.4	60	61.1	59.6
% aged 16-64 who are self employed	All people	7.1	12.8	5.6	7.3	17.1	12.4	11.1	10.6	9.2	9.2
	Males	11.1	17.8	9.7	14.5	23.8	16.3	17.9	16.3	13.4	13.1
	Females	3.4	7.8	!	!	10.4	8.2	4.4	4.8	5.1	5.3
Unemployment rate - aged 16-64	All people	4.2	9.7	8.1	12.9	2.6	3.4	3.6	7	5.1	8
	Male	3.2	7.3	9.1	8.4	5.3	!	3.4	6.6	5.5	9
	Female	5.4	12.6	6.9	18.5	!	!	3.9	7.4	4.6	6.9

! Estimate not available since the group sample size is zero or disclosive (0-2).

Source: Annual Population Survey, ONS

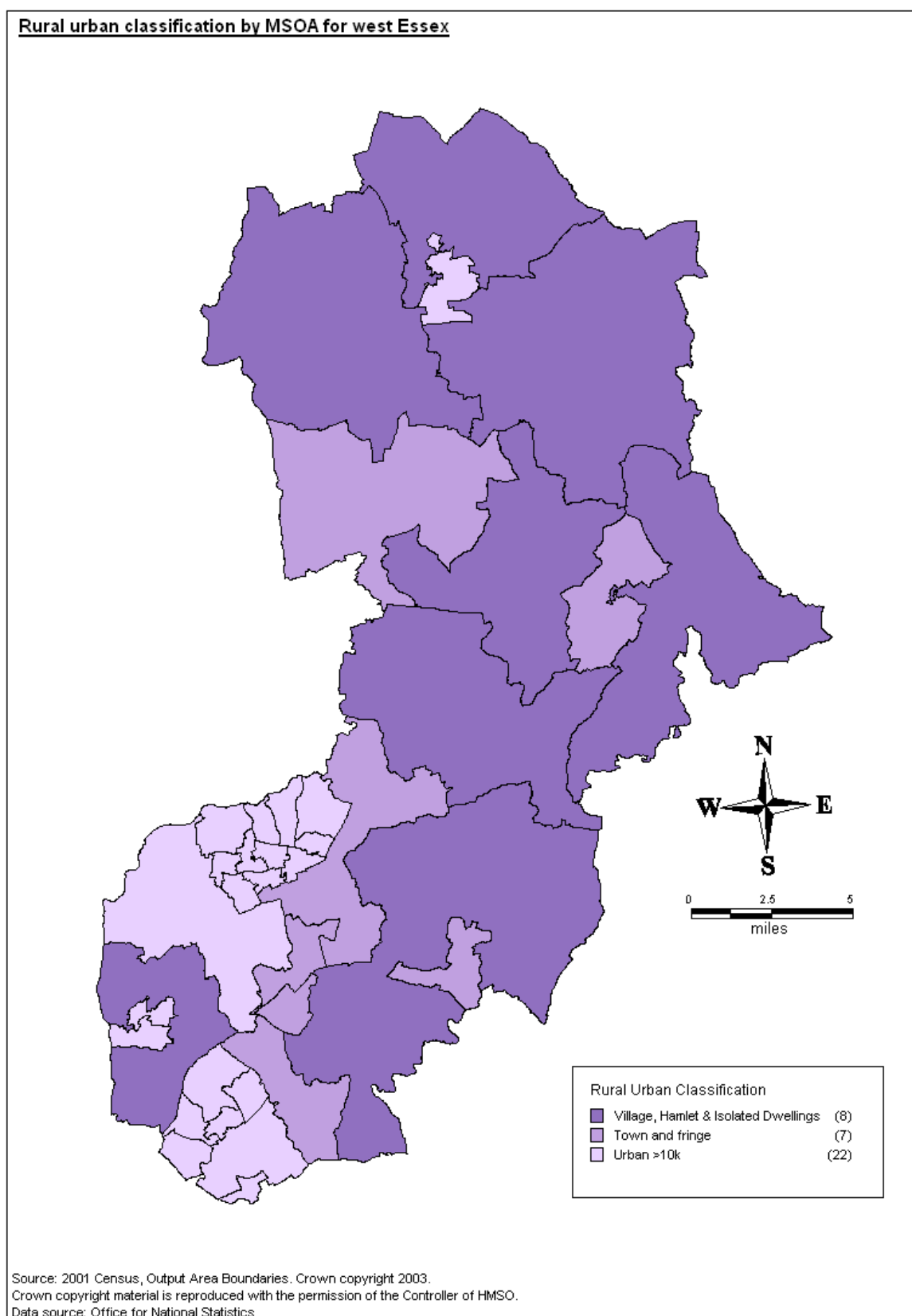
## Appendix S – Carers

**Figure 15: Percent of the population providing any unpaid care and the proportion of carers providing 50 or more hours a week by MSOA.**

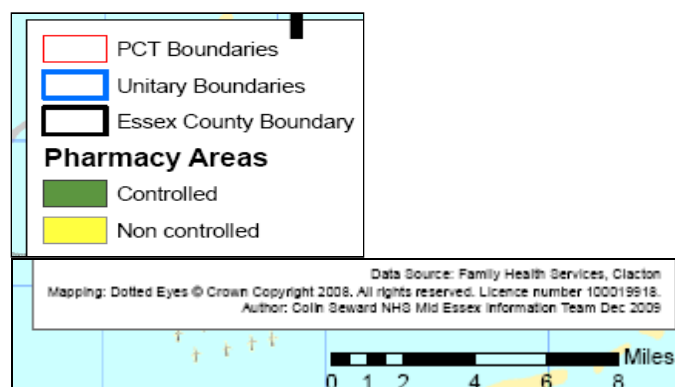
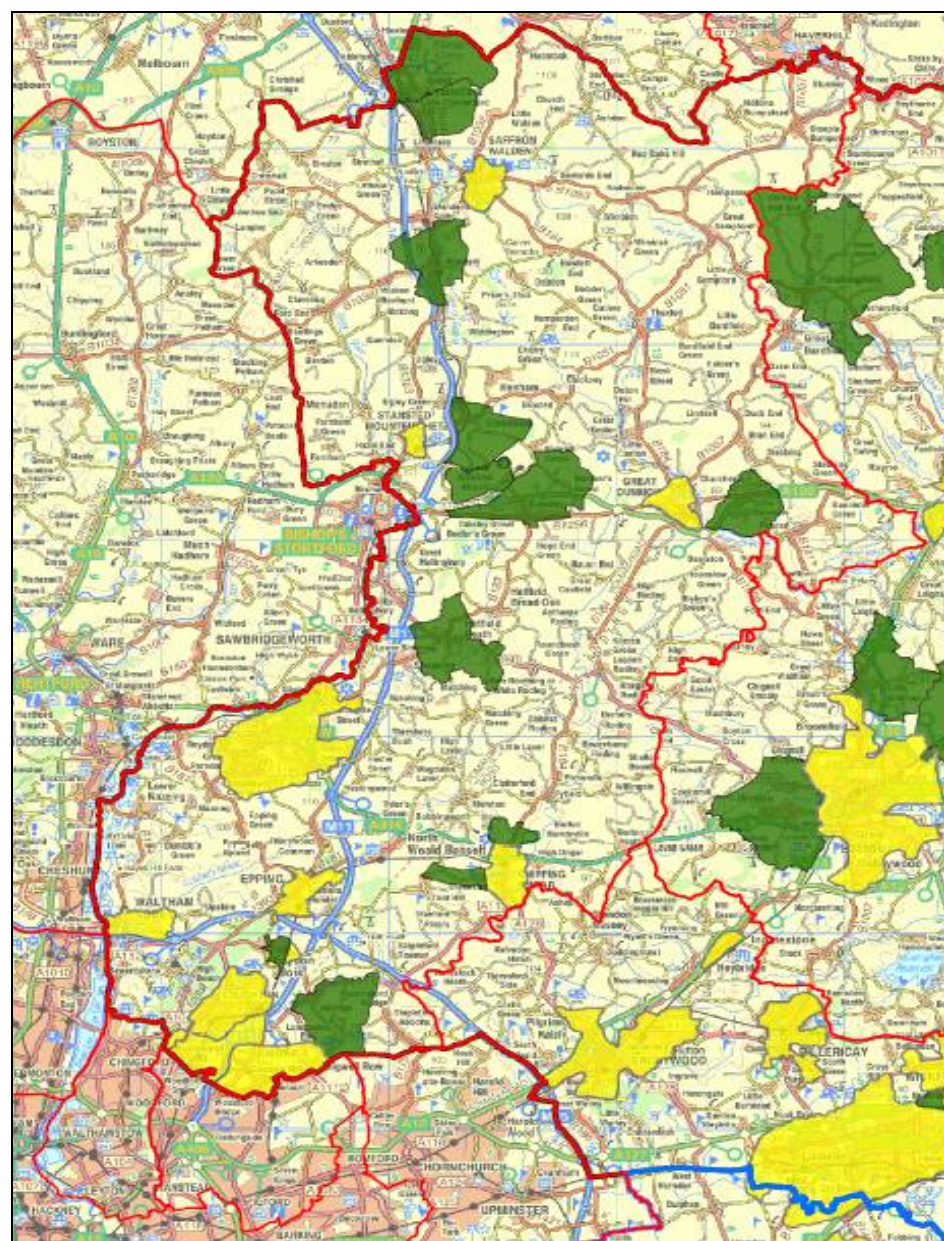


## Appendix T – Rurality

**Figure 16: Rural and urban areas in west Essex by MSOA**

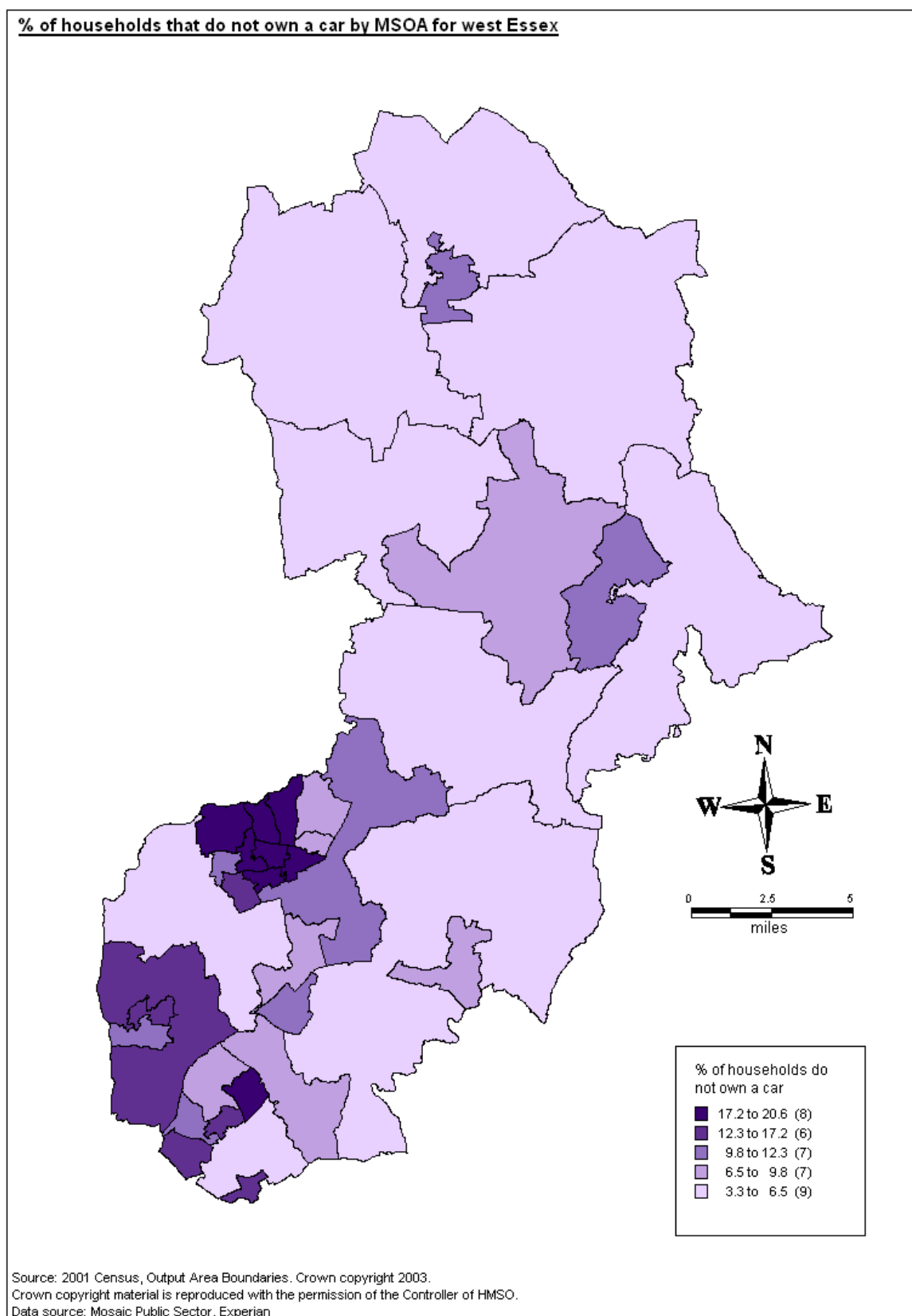


**Figure 17 - Rurality Determinations under Pharmaceutical Regulations 2005**



## Appendix U – Car ownership

**Figure 18: Estimated percent of households that do not own a car**





# Appendix V – MSOA Level information

The tables below show a range of data for each of the MSOAs in NHS West Essex and how it compares to the NHS West Essex average.

**Table 28: MSOA data on population and wider determinants**

Area Name	Population											Wider Determinants			
	Total (number)	0-4 years (%)	5-14 years (%)	15-24 years (%)	25-64 years (%)	65+ (%)	85+ (%)	Males (%)	Females (%)	Non white ethnic groups (%)	All black minority ethnic groups (%)	Population providing unpaid care (%)	Deprivation Score	Deprivation quintile west Essex (5 = most deprived, 1= least deprived)	Achieving 5+ A-C grades GCSEs (%)
NHS West Essex	279,066	6.2	12.3	11.8	53.3	16.2	2.3	48.9	51.1	4.1	7.6	9.6	-	-	70.2
Epping Forest LA	123,912	5.9	11.9	11.6	53.7	17.0	2.5	48.7	51.3	4.9	8.8	10.1	14.3	-	68.1
Epping Forest 001	8,865	6.2	11.1	11.2	55.0	16.4	2.3	50.3	49.7	2.1	5.4	10.3	13.7	3	68.8
Epping Forest 002	8,487	5.2	11.6	10.8	53.9	18.5	2.1	49.9	50.1	2.8	6.9	10.9	11.8	3	79.2
Epping Forest 003	6,613	5.1	12.7	10.7	53.4	18.1	1.3	49.3	50.7	1.5	3.9	12.0	17.3	4	69.6
Epping Forest 004	6,460	6.2	11.4	11.7	50.6	20.1	2.6	48.5	51.5	1.6	4.1	10.3	12.1	3	62.5
Epping Forest 005	6,025	5.1	10.8	9.6	53.5	21.1	4.1	48.4	51.6	3.2	6.6	10.6	12.3	3	63.2
Epping Forest 006	5,943	5.9	9.8	8.6	55.5	20.2	3.1	47.8	52.2	3.3	7.2	9.9	10.9	2	67.9
Epping Forest 007	7,025	5.7	11.6	13.1	53.5	16.1	2.1	47.8	52.2	3.8	7.7	9.7	22.8	5	59.3
Epping Forest 008	8,702	7.6	12.1	11.6	56.3	12.4	1.5	49.1	50.9	4.5	7.9	8.8	18.9	4	54.4
Epping Forest 009	5,203	5.5	10.3	9.3	54.4	20.4	2.6	49.2	50.8	4.2	9.0	9.5	20.2	4	64.1
Epping Forest 010	5,957	4.9	12.4	10.4	51.0	21.3	4.3	48.0	52.0	2.2	5.3	12.2	11.3	3	68.5
Epping Forest 011	8,908	5.9	12.2	14.6	52.3	15.1	3.2	48.2	51.8	3.8	8.1	8.6	21.7	4	73.7
Epping Forest 012	8,392	5.8	12.8	12.3	53.5	15.6	2.5	49.3	50.7	5.2	9.2	10.2	9.0	2	74.2
Epping Forest 013	7,628	6.6	12.7	13.0	51.7	15.9	2.2	47.9	52.1	4.1	7.6	9.7	17.7	4	64.4
Epping Forest 014	5,829	6.0	12.7	11.8	54.2	15.3	2.3	49.2	50.8	6.8	11.5	10.7	9.9	2	63.9
Epping Forest 015	11,082	6.4	11.4	10.6	55.2	16.4	2.6	47.6	52.4	6.5	11.3	9.6	8.2	2	80.6
Epping Forest 016	6,227	4.3	12.0	13.1	54.0	16.7	1.9	49.1	50.9	11.7	16.3	11.5	9.1	2	78.3
Epping Forest 017	6,566	6.2	13.5	13.0	52.8	14.6	1.6	48.7	51.3	16.7	21.6	9.1	17.1	3	59.0
Harlow LA	78,973	7.2	12.2	12.9	52.9	14.9	1.9	48.5	51.5	5.1	8.3	8.9	21.4	-	69.1
Harlow 001	6,366	5.6	10.1	12.5	53.5	18.3	3.0	48.2	51.8	3.0	6.3	9.8	14.3	3	72.9
Harlow 002	6,978	6.3	12.0	13.2	50.1	18.3	4.3	47.9	52.1	5.0	8.3	9.6	24.1	5	62.1
Harlow 003	7,165	6.6	10.9	13.8	51.5	17.2	2.3	48.5	51.5	4.9	8.0	8.8	26.2	5	73.3
Harlow 004	7,462	7.7	12.1	13.5	53.0	13.7	1.3	48.9	51.1	7.6	11.2	9.2	23.8	5	67.0
Harlow 005	9,178	9.6	14.7	9.8	58.7	7.2	0.3	49.7	50.3	6.3	9.9	6.1	8.2	2	74.0
Harlow 006	7,157	7.1	12.5	13.4	48.7	18.3	2.2	47.4	52.6	4.1	7.3	9.5	22.2	4	63.3
Harlow 007	7,325	7.5	11.4	13.3	50.8	17.0	1.9	47.5	52.5	5.3	8.5	9.8	25.5	5	71.4
Harlow 008	7,057	7.0	12.4	12.2	50.2	18.2	2.0	47.6	52.4	4.1	7.0	9.4	23.6	5	58.2
Harlow 009	6,353	6.1	11.0	11.7	57.4	13.8	1.4	48.6	51.4	5.0	7.4	9.2	17.6	4	78.9
Harlow 010	6,794	7.2	13.0	13.6	51.9	14.2	1.1	48.2	51.8	5.0	8.3	8.8	27.7	5	74.3
Harlow 011	7,138	6.9	12.9	14.9	54.5	10.7	1.1	50.9	49.1	5.2	8.0	8.3	24.5	5	69.2
Uttlesford LA	73,712	6.0	13.3	11.1	53.2	16.3	2.3	49.6	50.4	1.8	4.9	9.6	6.9	-	74.5
Uttlesford 001	6,697	6.2	13.9	9.7	53.4	16.8	2.2	48.6	51.4	1.3	4.7	9.3	4.2	1	85.4
Uttlesford 002	11,419	5.8	12.7	11.5	52.4	17.7	3.6	48.2	51.8	3.2	6.9	9.1	7.4	1	69.4
Uttlesford 003	7,807	5.3	14.3	9.8	54.3	16.2	1.6	49.7	50.3	1.0	4.4	11.0	6.6	1	74.5
Uttlesford 004	7,668	6.4	14.5	12.4	51.1	15.6	2.0	51.8	48.2	1.1	3.9	9.5	6.8	1	74.4
Uttlesford 005	10,942	6.1	11.9	10.5	56.1	15.3	1.7	50.1	49.9	1.7	4.7	9.5	4.9	1	76.2
Uttlesford 006	5,914	5.9	12.9	11.4	54.3	15.6	1.5	50.6	49.4	1.6	4.2	9.9	10.8	2	69.7
Uttlesford 007	6,747	6.6	13.9	10.1	53.5	15.9	2.8	48.0	52.0	2.2	5.0	8.5	7.5	1	69.4
Uttlesford 008	9,625	6.1	13.2	13.6	50.9	16.2	2.4	50.1	49.9	1.8	4.8	9.5	8.1	1	75.2
Uttlesford 009	6,893	5.4	13.9	10.5	53.0	17.2	2.3	49.4	50.6	1.8	4.4	10.7	7.5	1	78.2
Braintree 001	6,787	4.9	12.7	10.0	56.5	15.9	1.9	50.0	50.0	1.3	3.4	9.7	11.7		75.9
Period	2008									2001		2007		2008/09	
Source	Mid year estimates ONS									2001 Census ONS		Communities and Local		DfES	

Local authority value compared with the NHS West Essex based on 95% confidence intervals

MSOA value compared with the NHS West Essex based on 95% confidence intervals

Key	
	Significantly worse than average (or just higher when looking at population data)
	Consistent with average
	Significantly better than average (or just lower when looking at population data)
	Traffic light could not be calculated

**Table 29: MSOA data on life expectancy and mortality rates**

Area Name	Life Expectancy			Mortality Rates (DSR per 100,000 population)											
	Persons (years)	Males (years)	Females (years)	All age all cause- persons	All age all cause- males	All age all cause- females	<75 years all cause- persons	<75 years all cause- males	<75 years all cause- females	Circulatory disease all ages - persons	Circulatory disease all ages - males	Circulatory disease all ages - females	Circulatory disease <75 year olds - persons	Circulatory disease <75 year olds - males	Circulatory disease <75 year olds - females
NHS West Essex	80.8	78.7	82.7	548.7	658.6	461.9	258.4	318.9	202.3	177.4	224.8	140.4	64.2	89.7	40.6
Epping Forest LA	-	78.9	82.1	565.3	662.1	487.8	259.8	317.2	206.5	195	242	158	68.42	95.48	43.17
Epping Forest 001	80.6	78.6	82.9	554.3	647.7	456.2	267.9	348.6	183.0	179.6	194.9	161.2	64.9	73.2	56.0
Epping Forest 002	82.4	80.4	84.4	483.0	581.1	396.6	235.5	312.5	160.6	175.5	218.7	134.4	69.7	96.6	40.8
Epping Forest 003	81.7	78.6	85.6	510.5	672.4	361.4	251.5	356.3	150.2	156.4	215.8	105.9	51.0	89.2	15.2
Epping Forest 004	83.4	82.4	84.3	438.3	480.4	403.4	234.4	258.0	209.7	134.7	159.7	114.2	61.4	72.9	49.1
Epping Forest 005	80.8	77.4	84.4	562.9	750.6	419.8	304.5	416.7	205.9	184.0	265.0	126.1	83.2	132.0	43.7
Epping Forest 006	82.1	80.0	84.0	500.6	596.6	424.5	208.4	269.9	148.5	179.2	285.5	110.7	66.2	110.4	24.1
Epping Forest 007	75.2	74.6	75.7	991.2	1067.7	938.1	405.0	440.1	376.4	458.1	508.2	423.9	137.9	164.8	116.2
Epping Forest 008	78.7	76.6	80.7	651.3	836.6	539.1	319.9	388.6	257.3	259.5	375.2	185.1	106.9	138.8	77.1
Epping Forest 009	77.2	75.4	79.3	753.3	849.5	646.6	386.0	494.2	280.4	254.0	368.3	147.0	134.8	219.7	49.0
Epping Forest 010	82.7	82.4	83.0	473.3	505.4	442.2	213.1	244.5	188.5	167.1	188.8	143.5	56.3	85.9	28.7
Epping Forest 011	81.4	78.3	83.9	526.2	688.2	424.6	267.7	318.3	224.9	184.0	250.2	132.5	77.3	110.1	44.8
Epping Forest 012	82.5	81.0	83.9	486.7	553.4	430.6	182.9	213.0	152.2	142.7	163.2	121.2	33.9	45.3	23.0
Epping Forest 013	81.4	78.0	85.9	516.3	725.0	399.4	286.4	346.0	232.1	149.6	236.2	100.2	49.6	83.7	19.5
Epping Forest 014	83.1	80.9	84.7	462.1	565.7	402.2	212.8	215.6	209.5	134.6	157.4	123.7	30.7	21.5	39.0
Epping Forest 015	78.4	77.5	79.2	777.0	835.1	731.3	283.8	327.3	246.5	246.3	270.3	232.1	58.6	67.5	50.7
Epping Forest 016	85.2	85.1	85.1	378.9	365.0	398.6	175.4	180.0	169.0	120.9	100.6	139.4	29.2	32.2	26.5
Epping Forest 017	82.3	80.6	84.0	509.8	607.8	426.1	193.0	272.0	120.8	188.3	223.6	159.4	48.3	89.3	10.6
Harlow LA	-	78.0	83.2	552.8	677.0	455.2	302.4	380.7	234.1	167.8	222.2	128.3	74.8	101.8	51.7
Harlow 001	81.2	78.9	83.3	528.5	631.6	470.5	300.2	309.0	290.6	148.5	186.8	123.5	58.9	57.1	59.4
Harlow 002	81.0	79.4	82.4	544.9	627.8	487.9	287.5	314.1	259.4	186.7	248.9	142.0	78.1	106.0	50.3
Harlow 003	78.9	75.3	82.2	617.4	817.0	465.1	342.9	469.9	236.6	158.5	205.9	126.7	55.7	68.6	45.4
Harlow 004	79.5	76.2	82.6	610.9	785.3	483.5	344.2	431.6	274.8	204.7	327.1	118.2	102.0	149.2	65.7
Harlow 005	83.4	82.2	84.2	441.1	501.6	407.2	207.1	245.8	176.7	144.0	184.0	107.5	39.5	82.3	4.4
Harlow 006	80.2	77.2	83.0	576.9	713.1	465.4	248.9	338.7	169.4	160.0	205.5	137.2	42.0	43.8	41.7
Harlow 007	79.1	77.2	81.1	616.3	696.2	551.7	382.3	418.7	354.5	182.8	184.0	176.5	104.0	104.6	103.5
Harlow 008	80.3	78.5	81.9	570.4	647.0	517.5	334.1	366.0	301.0	158.6	173.1	146.4	70.4	78.4	58.9
Harlow 009	84.1	81.9	86.4	435.7	543.2	346.0	218.4	281.5	160.6	151.7	238.3	92.7	71.2	111.7	34.1
Harlow 010	82.3	78.2	86.0	522.3	689.8	388.9	316.7	491.7	172.1	150.2	212.1	103.7	86.1	143.1	39.7
Harlow 011	80.3	78.7	83.1	594.3	711.0	465.7	379.0	550.7	209.5	164.2	222.0	109.8	109.9	171.2	49.8
Uttlesford LA	-	79.5	83.7	508.4	631.4	413.9	211.9	263.8	161.0	154.4	196.7	119.2	47.5	69.8	25.6
Uttlesford 001	82.9	81.1	84.5	464.8	574.1	381.6	147.1	205.5	94.2	166.0	204.3	133.6	37.4	62.5	15.3
Uttlesford 002	82.3	78.7	85.8	478.6	670.5	357.5	239.6	306.8	175.8	122.7	166.4	96.0	41.1	47.7	33.7
Uttlesford 003	83.0	81.8	84.2	438.2	499.6	390.9	217.6	230.4	204.4	126.9	148.0	104.9	35.1	49.7	20.7
Uttlesford 004	81.4	79.3	83.9	524.9	657.7	405.5	193.0	251.3	127.7	177.3	233.6	126.5	48.4	80.2	14.8
Uttlesford 005	81.1	79.7	82.5	561.9	708.5	462.6	177.5	197.2	160.3	163.7	192.9	138.1	33.0	46.5	19.8
Uttlesford 006	78.9	77.1	80.5	652.4	752.7	584.4	298.1	324.6	280.8	203.6	273.5	149.9	79.4	99.8	65.1
Uttlesford 007	81.6	78.6	84.0	508.4	643.6	415.9	238.3	341.1	158.0	166.4	232.0	123.8	77.5	129.3	35.3
Uttlesford 008	81.2	79.5	83.1	561.2	642.1	481.8	194.7	268.3	114.8	164.7	200.3	134.3	35.9	64.6	5.4
Uttlesford 009	82.6	79.6	85.6	480.6	607.1	372.9	233.9	305.1	164.8	155.8	192.3	116.0	68.8	108.6	31.7
Braintree 001	83.3	80.9	85.9	446.4	540.1	359.9	239.8	290.8	188.7	170.5	230.4	106.3	77.1	130.7	22.4
Period	2006-2008			2006-2008			2006-2008			2006-2008			2006-2008		
Source	erpho inequalities profile			erpho inequalities profile			erpho inequalities profile			erpho inequalities profile			erpho inequalities profile LA data nchod		

Local authority value compared with the NHS West Essex based on 95% confidence intervals

MSOA value compared with the NHS West Essex based on 95% confidence intervals

Key	
	Significantly worse than average (or just higher when looking at population data)
	Consistent with average
	Significantly better than average (or just lower when looking at population data)
	Traffic light could not be calculated



Table 30: MSOA data on mortality rates

Area Name	Mortality Rates (DSR per 100,000 population)												Pharmacies
	Cancer all ages - person	Cancer all ages - males	Cancer all ages - females	Cancer <75 year olds - person	Cancer <75 year olds - males	Cancer <75 year olds - females	Smoking attributable - persons	Smoking attributable - males	Smoking attributable - females	Conditions amenable to healthcare - persons	Conditions amenable to healthcare - males	Conditions amenable to healthcare - females	Number of Pharmacies (excluding internet) within MSOA
<b>NHS West Essex</b>	<b>169.9</b>	<b>204.9</b>	<b>144.5</b>	<b>107.8</b>	<b>121.9</b>	<b>95.2</b>	<b>97.5</b>	<b>138.3</b>	<b>67.2</b>	<b>80.3</b>	<b>93.4</b>	<b>68.4</b>	
<b>Epping Forest LA</b>	<b>168.0</b>	<b>196.1</b>	<b>146.9</b>	<b>106.6</b>	<b>119.1</b>	<b>94.7</b>	-	-	-	-	-	-	
Epping Forest 001	163.2	174.3	151.3	94.4	104.1	84.3	107.9	138.7	82.8	82.4	78.6	86.1	1
Epping Forest 002	155.1	178.0	137.1	93.2	111.0	76.4	74.5	115.0	39.6	52.2	73.1	27.8	2
Epping Forest 003	191.0	258.5	123.8	123.6	164.8	80.4	88.0	144.9	34.8	74.5	93.3	58.6	0
Epping Forest 004	153.6	163.1	142.5	89.7	107.8	72.6	70.7	83.3	56.4	71.1	52.0	89.1	2
Epping Forest 005	185.9	211.4	169.9	129.8	149.1	116.3	95.8	160.9	53.9	103.4	137.1	78.8	3
Epping Forest 006	140.3	87.4	178.9	82.7	45.2	117.0	85.3	103.9	71.3	71.3	91.4	52.4	0
Epping Forest 007	199.4	184.0	214.9	121.9	92.7	148.5	184.9	205.9	170.2	173.8	160.4	188.4	1
Epping Forest 008	183.7	216.9	157.8	114.5	147.6	85.1	128.6	190.7	82.9	103.0	128.5	79.1	0
Epping Forest 009	212.3	213.3	218.3	143.5	147.4	143.1	147.7	188.2	107.8	135.2	184.4	85.7	2
Epping Forest 010	133.6	180.5	101.0	83.8	101.4	69.5	48.9	68.1	37.5	85.0	112.4	58.0	1
Epping Forest 011	145.9	231.8	89.9	79.2	118.4	46.1	115.4	172.4	80.8	75.8	90.4	63.3	3
Epping Forest 012	153.8	163.1	152.5	92.2	83.6	100.1	81.6	102.0	70.8	46.5	51.6	41.5	3
Epping Forest 013	154.0	174.7	147.7	112.3	96.2	125.3	95.0	139.7	65.2	70.3	101.8	41.2	1
Epping Forest 014	179.1	240.9	140.3	123.2	131.2	113.4	51.5	69.3	40.7	56.1	45.7	65.7	1
Epping Forest 015	213.6	315.8	138.4	134.1	192.8	83.0	105.5	168.7	61.4	76.2	85.1	68.6	2
Epping Forest 016	136.7	98.7	169.5	95.3	79.0	109.8	62.9	80.2	50.9	65.4	46.1	83.1	1
Epping Forest 017	155.0	204.5	116.6	114.4	142.1	89.6	77.4	111.9	49.7	60.2	94.6	29.3	0
<b>Harlow LA</b>	<b>179.0</b>	<b>217.2</b>	<b>152.2</b>	<b>119.6</b>	<b>137.2</b>	<b>106.2</b>	-	-	-	-	-	-	
Harlow 001	205.4	230.8	187.7	162.4	173.3	153.3	80.1	113.4	60.2	83.9	80.3	83.9	1
Harlow 002	170.0	174.9	173.9	114.1	92.9	132.1	129.5	167.3	103.5	100.5	77.4	116.1	2
Harlow 003	203.1	287.2	137.6	120.7	161.5	82.2	142.4	184.1	109.3	98.4	108.4	102.2	1
Harlow 004	184.3	242.6	141.5	144.8	193.9	107.9	132.5	193.7	89.2	95.6	140.2	62.3	2
Harlow 005	158.5	146.8	182.5	94.0	69.3	117.2	84.5	98.9	64.3	67.9	79.0	62.5	2
Harlow 006	185.4	236.2	152.4	104.5	115.4	96.5	111.0	155.8	80.4	65.9	72.5	58.0	2
Harlow 007	233.0	228.3	245.9	162.0	139.3	187.9	146.4	217.1	95.3	115.7	132.5	103.5	3
Harlow 008	166.0	184.1	158.8	123.3	117.1	128.1	115.1	131.3	104.5	90.8	93.1	85.8	1
Harlow 009	125.7	159.5	94.8	64.8	78.0	52.3	93.1	140.0	57.5	93.5	131.4	58.8	1
Harlow 010	187.6	268.2	119.8	118.0	199.0	54.2	128.7	194.4	82.7	105.5	154.6	64.5	1
Harlow 011	155.3	217.9	94.3	118.2	179.8	57.1	146.4	237.9	59.4	88.2	122.5	54.3	0
<b>Uttlesford LA</b>	<b>164.4</b>	<b>210.4</b>	<b>131.0</b>	<b>99.3</b>	<b>114.7</b>	<b>84.4</b>	-	-	-	-	-	-	
Uttlesford 001	147.4	179.6	129.1	71.5	81.1	64.5	60.2	87.0	40.3	57.8	87.5	32.7	0
Uttlesford 002	183.1	240.5	143.8	126.0	155.4	98.9	80.1	136.3	44.0	65.6	64.2	67.6	2
Uttlesford 003	158.0	195.8	128.8	94.8	117.8	71.1	79.1	112.4	51.7	45.0	51.4	39.2	1
Uttlesford 004	178.6	242.9	128.6	91.8	102.1	80.5	85.7	119.2	55.1	77.0	84.7	68.6	1
Uttlesford 005	153.7	220.5	115.0	87.5	93.7	81.5	68.2	138.8	26.6	63.9	54.6	74.2	1
Uttlesford 006	113.2	102.2	126.5	90.3	76.8	104.5	116.8	147.2	91.6	108.0	111.8	109.7	0
Uttlesford 007	180.4	224.0	144.8	99.7	140.9	66.1	103.1	170.1	55.8	92.7	144.7	51.2	0
Uttlesford 008	178.2	220.1	138.8	108.7	117.3	96.5	80.6	109.6	61.1	36.1	59.5	10.3	1
Uttlesford 009	164.8	237.5	104.2	110.8	135.5	85.1	66.0	88.4	50.9	86.3	116.9	59.3	1
Braintree 001	147.3	120.3	176.0	103.9	68.0	141.0	66.0	97.0	36.4	85.0	117.6	51.2	0
Period	2006-2008			2006-2008			2006-2008			2006-2008			
Source	erpho inequalities profile			erpho inequalities profile			erpho inequalities profile			erpho inequalities profile			

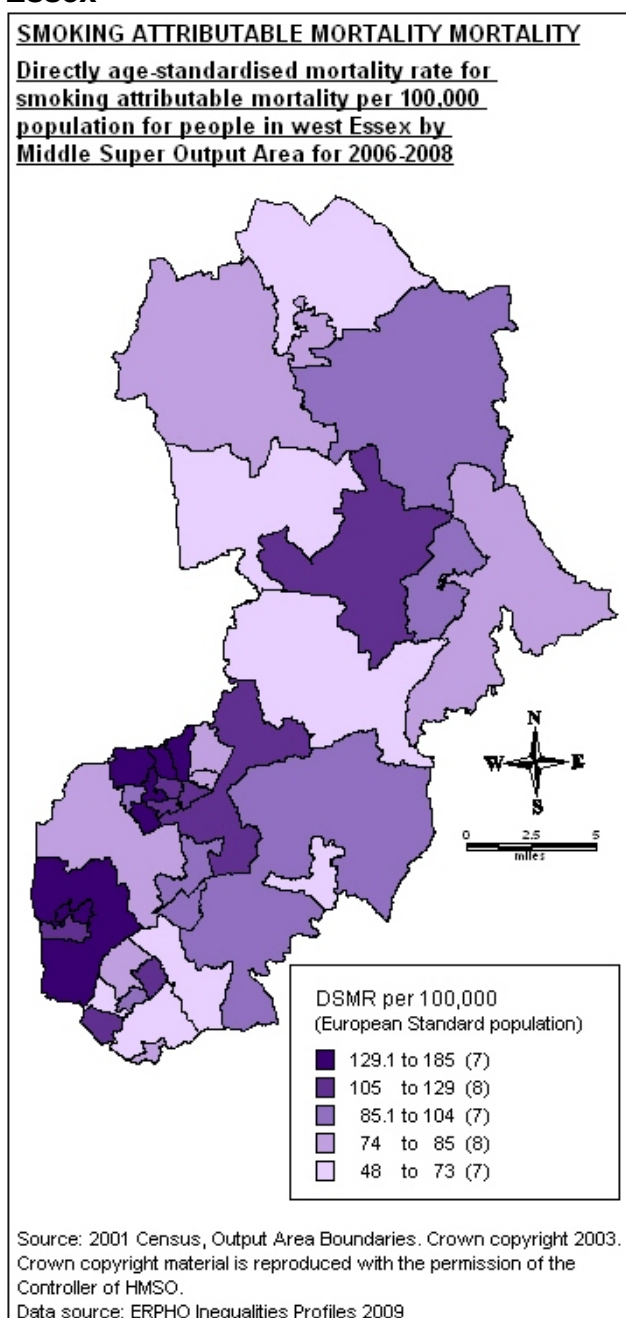
Local authority value compared with the NHS West Essex based on 95% confidence intervals

MSOA value compared with the NHS West Essex based on 95% confidence intervals

Key	
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	Significantly better than average (or just lower when looking at population data)
	Traffic light could not be calculated

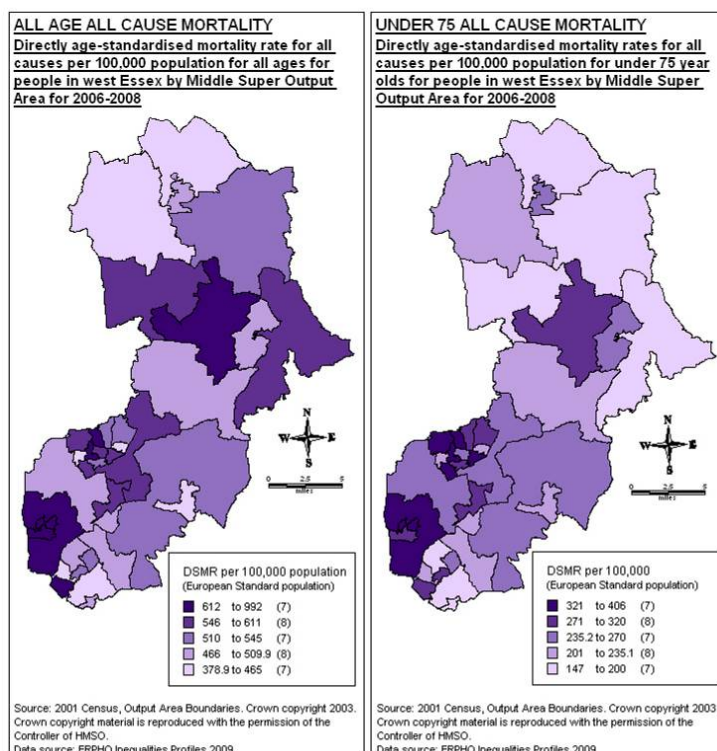
## Appendix W – Smoking-attributable mortality

**Figure 19: Map of smoking-attributable mortality by MSOA for NHS West Essex**

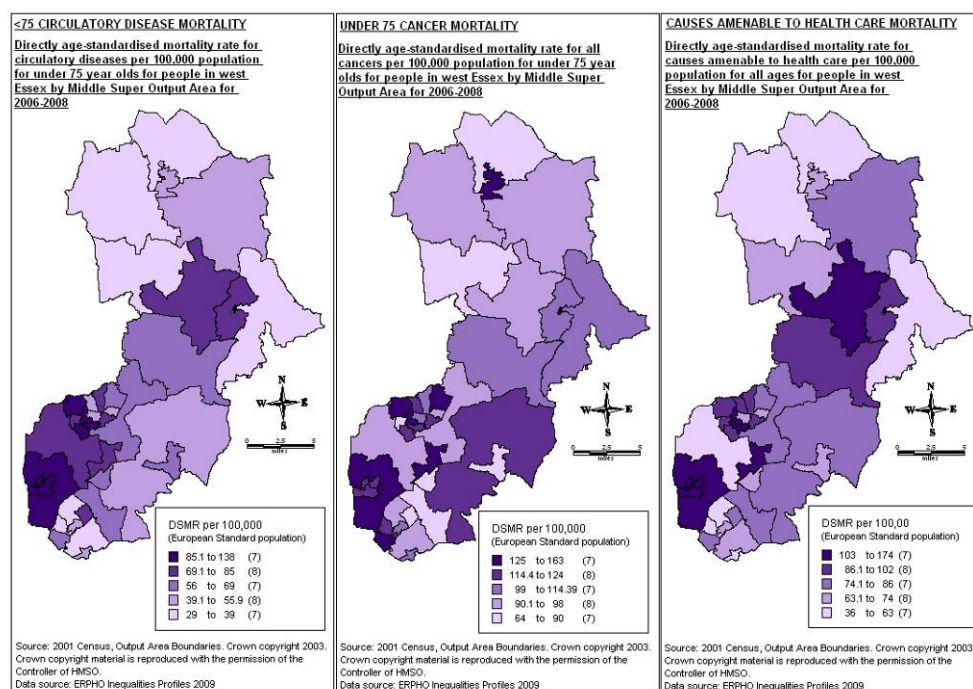


## Appendix X – MSOA mortality maps

**Figure 20: All cause mortality maps by MSOA for NHS West Essex, for all ages and under 75 years**



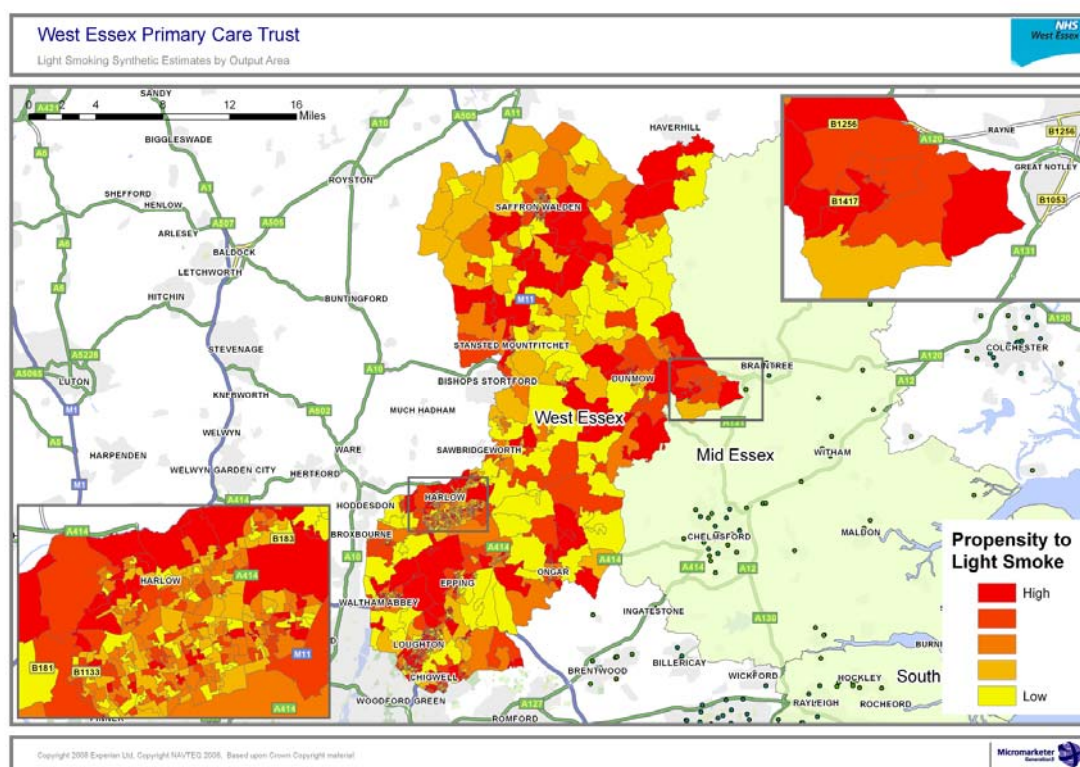
**Figure 21: Mortality maps by MSOA for NHS West Essex, for under 75 years mortality for circulatory diseases, cancer and causes amenable to healthcare all ages**



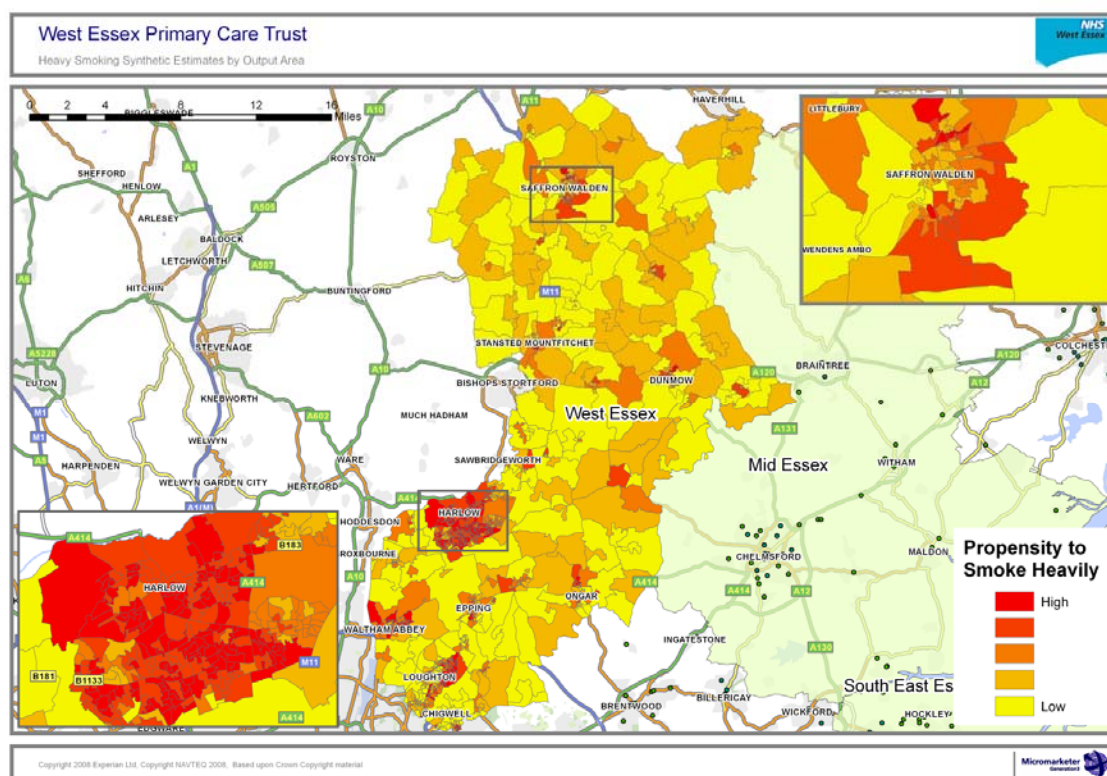


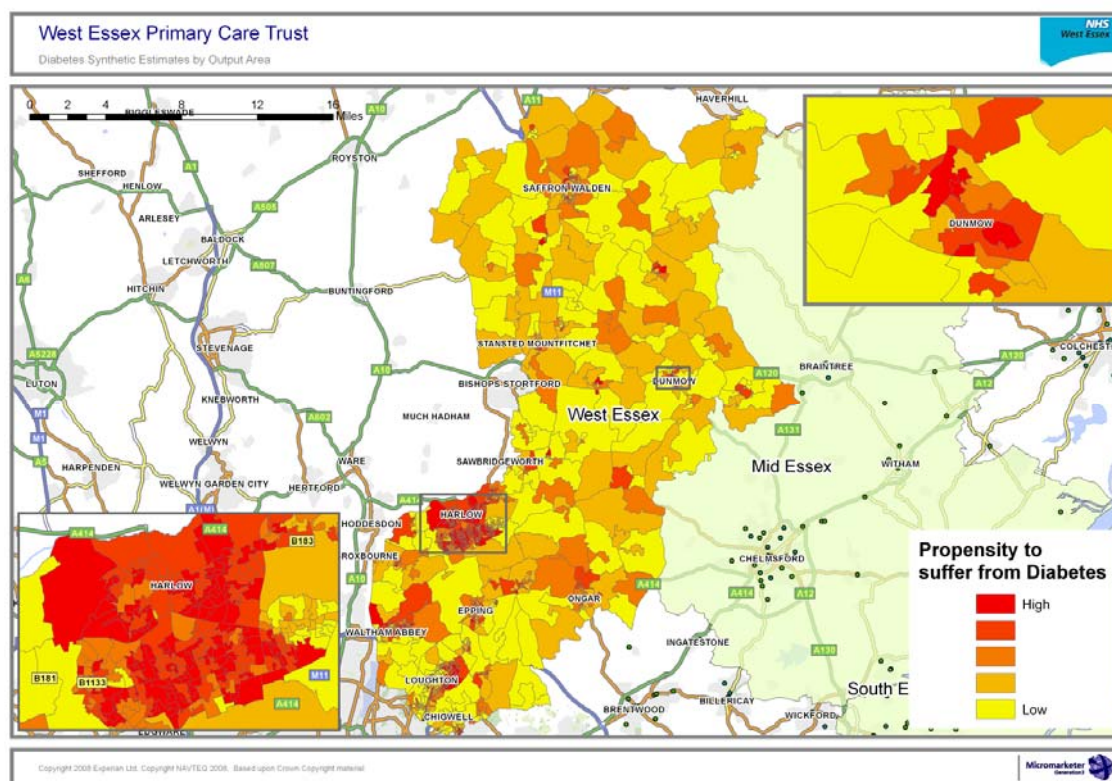
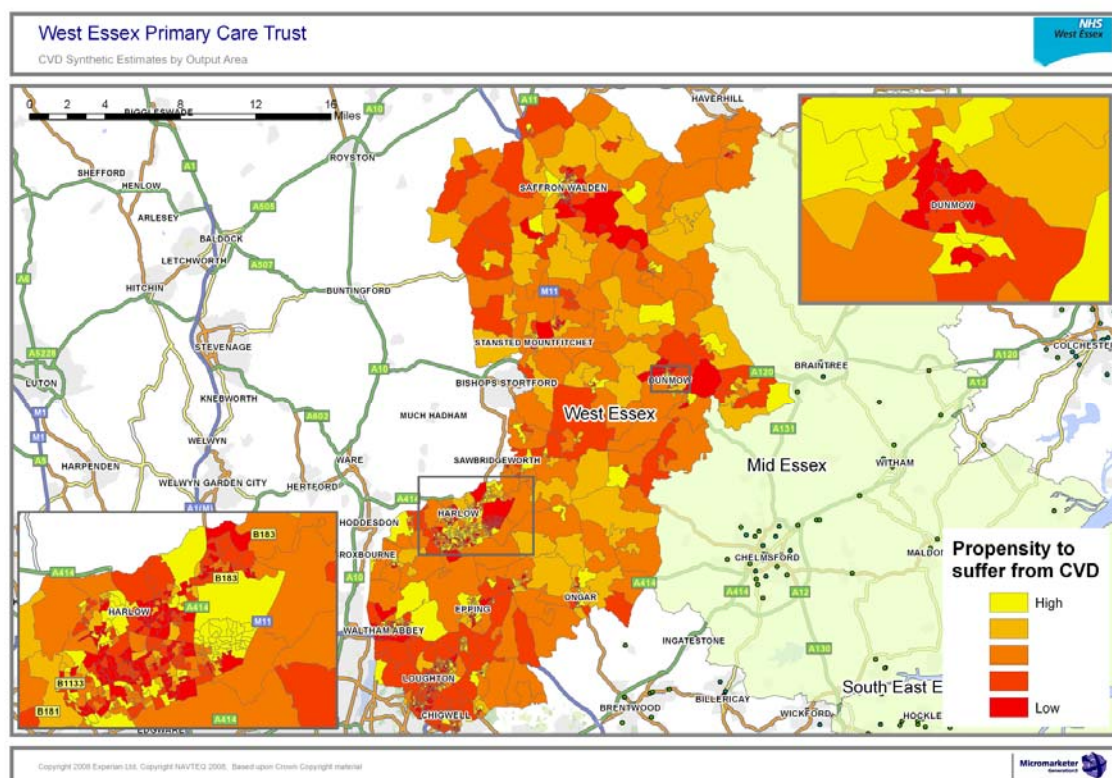
## Appendix Y – Mosaic Synthetic Estimates

**Figure 22 – Estimated market size of light smokers**



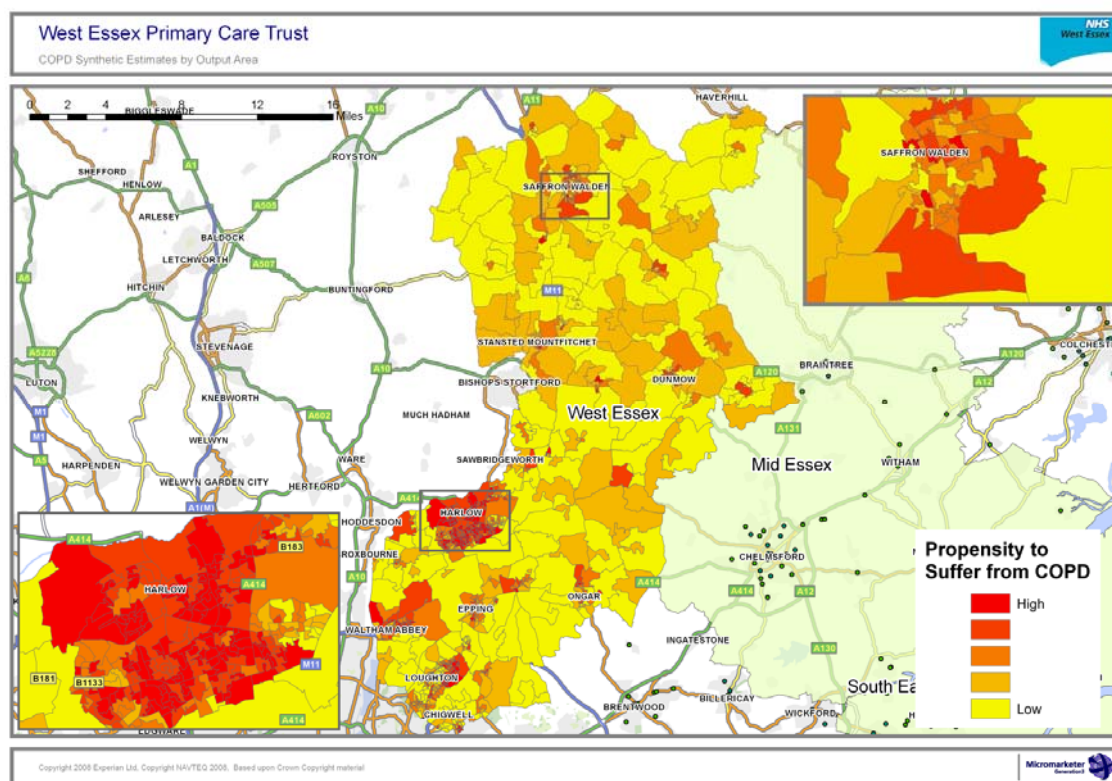
**Figure 23 – Estimated market size of heavy smokers**



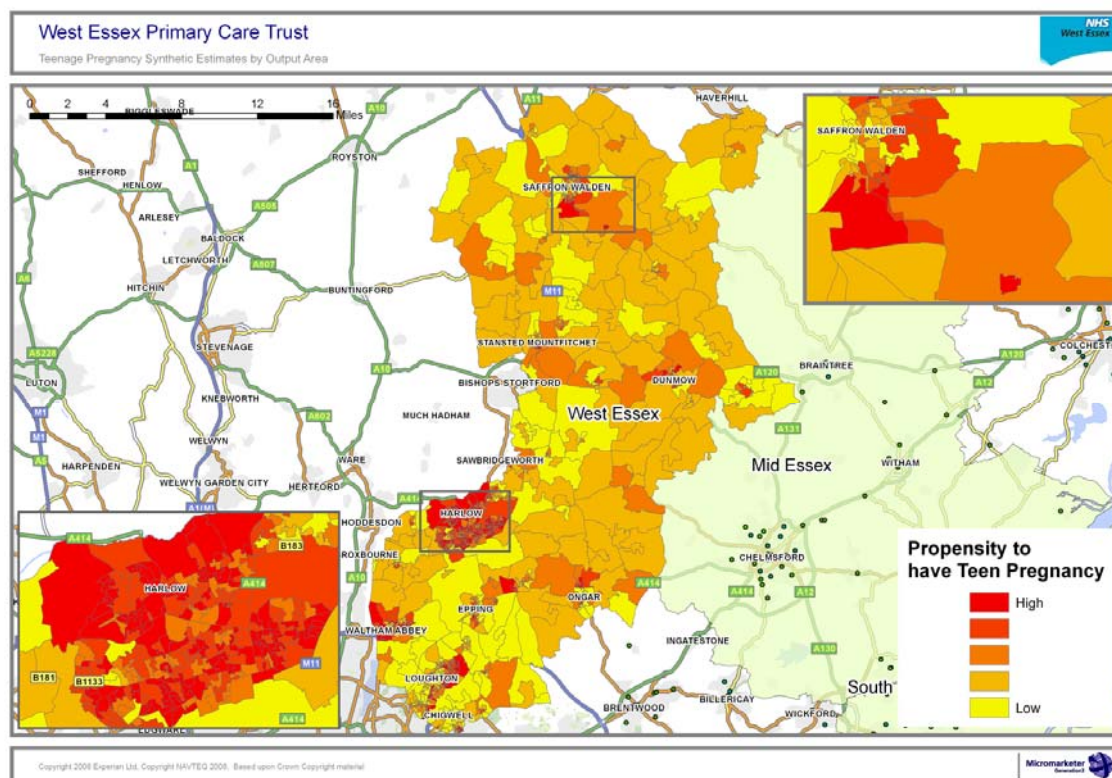
**Figure 24 – Estimated market size of diabetics****Figure 25 – Estimated market size of those with CVD**



**Figure 26 – Estimated market size of those with COPD**



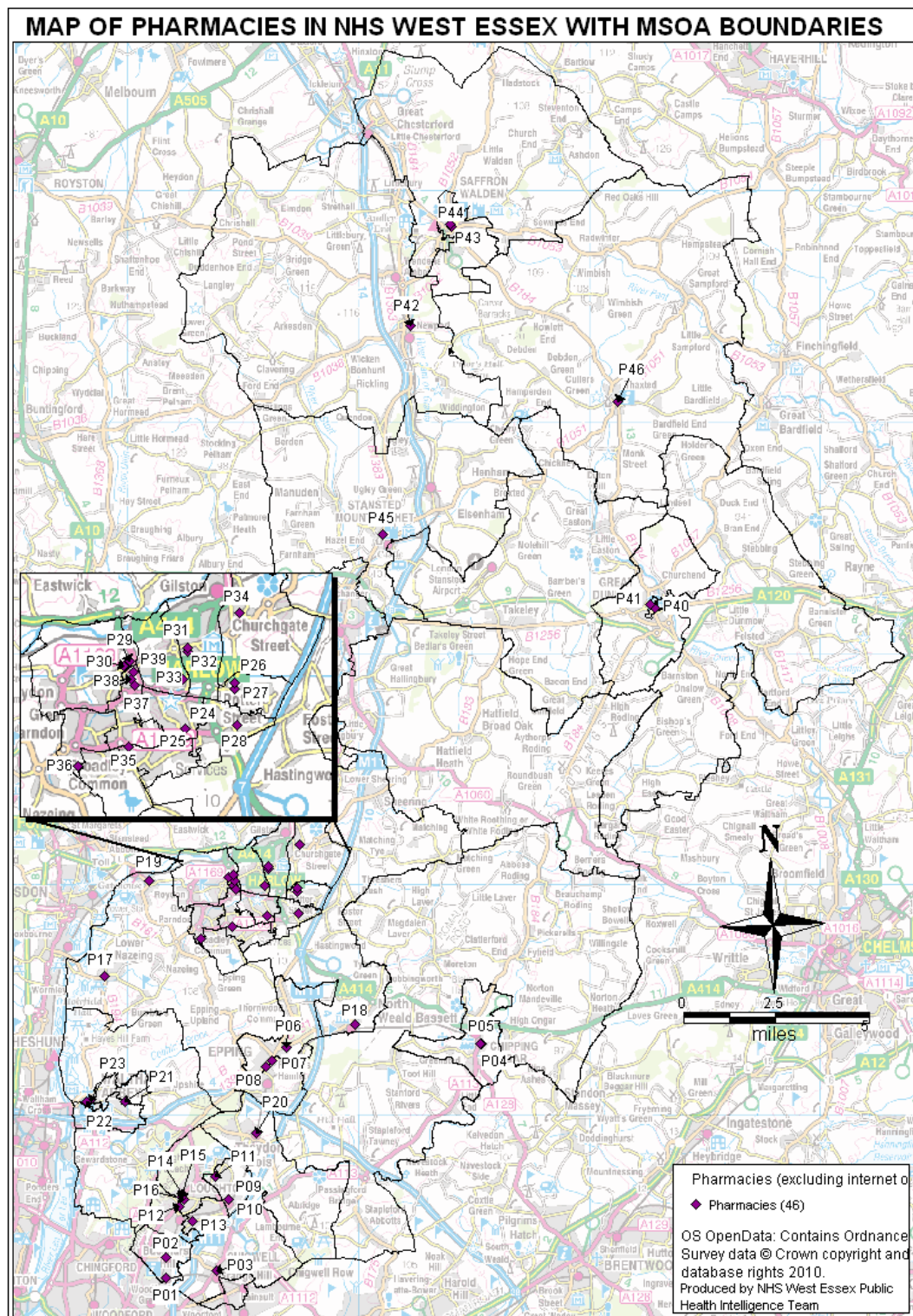
**Figure 27 – Estimated market size of teenage pregnancy**



## Appendix Z – Pharmacies in NHS West Essex

Figure 28 shows pharmacies in NHS West Essex. Please note that due to overlapping, where several pharmacies are located in a small geographical area, not all pharmacies may be visible in this map.

**Figure 28: Map showing pharmacies in NHS West Essex (excluding internet)**





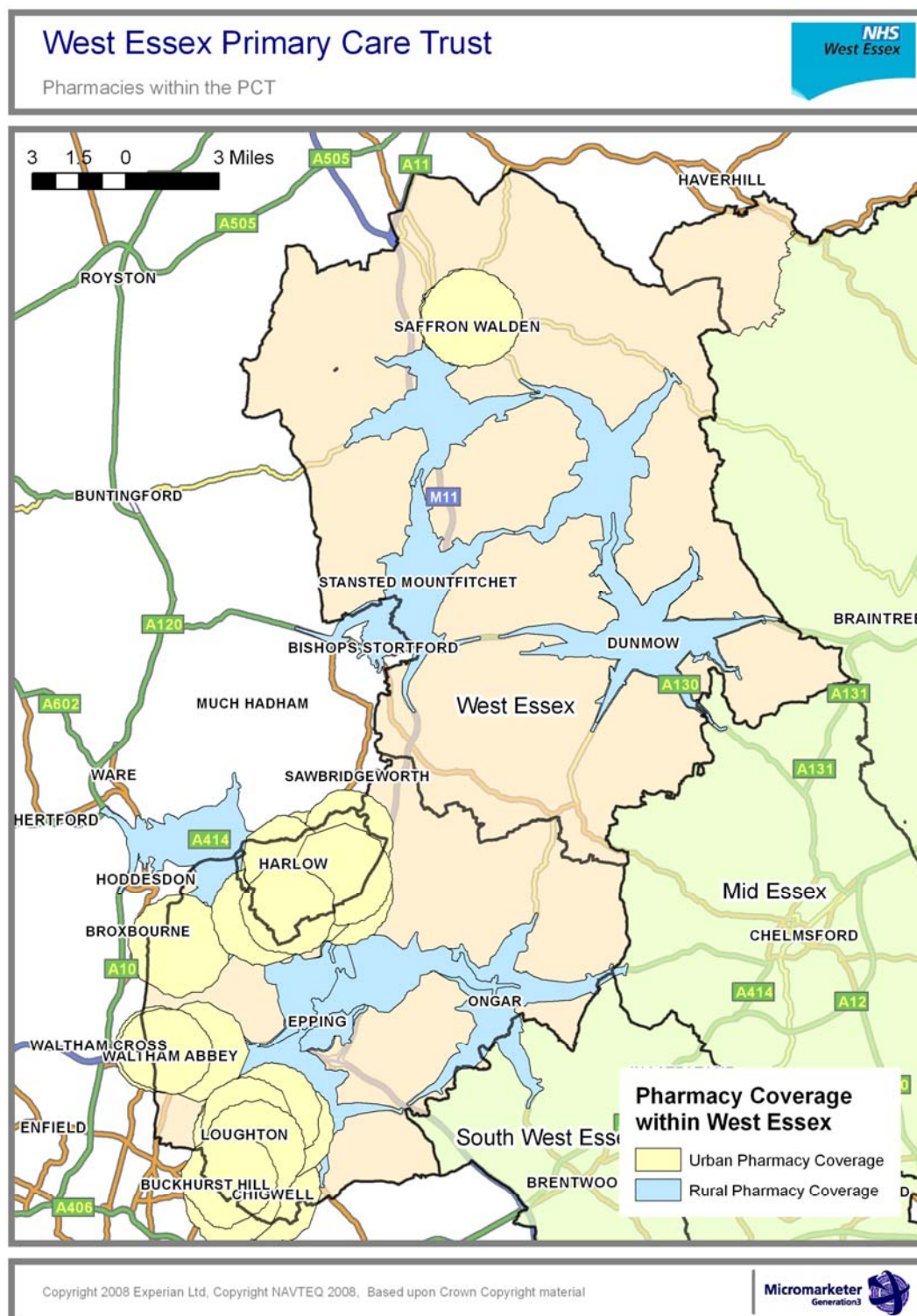
**Figure 29: Key to pharmacy map (Figure 28)**

Key	Name	Address 1	Address 1a	Address 2	Post Code	Locality
P01	Easter Pharmacy	54 Station Way		Buckhurst Hill	IG9 6LL	Epping Forest
P02	Safedale Ltd	26 Queens Road		Buckhurst Hill	IG9 5BU	Epping Forest
P03	Brook House Pharmacy	20 Brook Parade	High Road	Chigwell	IG7 6PF	Epping Forest
P04	Lloyds Pharmacy	205 High Street		Ongar	CM5 9JG	Epping Forest
P05	Co-operative Pharmacy NCC Ltd	200 High Street		Ongar	CM5 9JJ	Epping Forest
P06	Co-operative Pharmacy NCC Ltd	The Limes Medical Centre		Epping	CM16 6TL	Epping Forest
P07	Lloyds Pharmacy	283 High Street		Epping	CM16 4DA	Epping Forest
P08	Boots UK Ltd	223 High Street		Epping	CM16 4BL	Epping Forest
P09	Boots UK Ltd	18 The Broadway		Debden	IG10 3ST	Epping Forest
P10	K G Pharmacy	36 The Broadway		Debden	IG10 3ST	Epping Forest
P11	Leach & Burton Pharmacy	48 Pyrles Lane		Loughton	IG10 2NN	Epping Forest
P12	Hutchins Pharmacy	197 High Road		Loughton	IG10 4LF	Epping Forest
P13	Oakwood Pharmacy	118 Roding Rd		Loughton	IG10 3EJ	Epping Forest
P14	Morrison's Pharmacy	246/250 High Street		Loughton	IG10 1RB	Epping Forest
P15	Co-operative Pharmacy NCC Ltd	Loughton Health Centre	The Drive	Loughton	IG10 1HW	Epping Forest
P16	Boots UK Ltd	230 High Road		Loughton	IG10 1EZ	Epping Forest
P17	Elgon Chemists Ltd	6-8 Nazeingbury Parade		Waltham Abbey	EN9 2JL	Epping Forest
P18	North Weald Chemists	48 High Road		North Weald	CM16 6BU	Epping Forest
P19	Dee's Pharmacy	100 High Street		Roydon	CM19 5EE	Epping Forest
P20	Theydon Bois Pharmacy	10 Forest Drive		Theydon Bois	CM16 7EY	Epping Forest
P21	Glennon Chemists	8 Hillhouse	Ninefields Estate	Waltham Abbey	EN9 3EL	Epping Forest
P22	Lloyds Pharmacy	2 Market Square		Waltham Abbey	EN9 1DL	Epping Forest
P23	Lloyds Pharmacy	10 Sun Street		Waltham Abbey	EN9 1EE	Epping Forest
P24	Boots UK Ltd t/a Your Local Boots	9 North House	Bush Fair	Harlow	CM18 6NS	Harlow
P25	Boots UK Ltd t/a alliance Pharmacy	5 Bush House	Bush Fair	Harlow	CM18 6NS	Harlow
P26	Boldaset Ltd t/a Church Langley Pharmacy	Florence Nightingale HC	Minton Lane	Church Langley, Harlow	CM17 9TG	Harlow
P27	Tesco Stores Ltd Instore Pharmacy	Tesco Superstore	Church Langley Way	Harlow	CM17 9TE	Harlow
P28	Boldaset Ltd t/a Potter Street Pharmacy	12 Prentice Place	Potter Street	Harlow	CM17 9BG	Harlow
P29	Sainsbury Supermarkets Pharmacy	Fifth Avenueallende Avenue		Harlow	CM20 2AG	Harlow
P30	Addison Healthcare	Ground Floor Wych Elm House	Hamstel Road	Harlow	CM20 1QR	Harlow
P31	National Co-operative Chemists Ltd	107 The Stow		Harlow	CM20 3AS	Harlow
P32	Boots UK Ltd	18 The Stow		Harlow	CM20 3AH	Harlow
P33	Nettewsell Pharmacy	1 Pypers Hatch	Maddox Road	Harlow	CM20 3NG	Harlow
P34	Ramco Chemist	43-45 High Street		Old Harlow	CM17 0DN	Harlow
P35	Metwest Ltd	7-8 Staple Tye		Harlow	CM18 7PJ	Harlow
P36	Huschem Ltd t/a Medicare Pharmacy	1 Sumners Hatch	Broadley Road	Harlow	CM19 5RD	Harlow
P37	Asda Pharmacy	Water Gardens	Southgate	Harlow	CM20 1AN	Harlow
P38	Boots UK Ltd	37 Broad Walk		Harlow	CM20 1JA	Harlow
P39	National Co-operative Chemists Ltd	5 Market House	The High	Harlow	CM20 1BL	Harlow
P40	Ropers Pharmacy	3-5 High Street		Great Dunmow	CM6 1AB	Uttlesford
P41	Yogi Pharmacy	7 Market Place		Great Dunmow	CM6 1AX	Uttlesford
P42	Key Pharmaceuticals Ltd t/a Newport Pharmacy	The Brown House	High Street	Newport	CB11 3QY	Uttlesford
P43	Boots UK Ltd	Market Place		Saffron Waldon	CB10 1HR	Uttlesford
P44	Co-operative Pharmacy NCC Ltd	3 The Arches	Hill Street	Saffron Waldon	CB10 1ED	Uttlesford
P45	Boots UK Ltd t/a Your Local boots Pharmacy	Unit 2 The Greens Buildings	4 - 8 Cambridge Road	Stansted Mountfitchet	CM24 8BZ	Uttlesford
P46	Wringtons Ltd t/a Newport Pharmacy	3 Town Street		Thaxted	CM6 2LD	Uttlesford

## Appendix AA – Pharmacies coverage in NHS West Essex

The map shown below is red not final and should not be used to make final judgement of service provision. It has been included to show what information can be presented in the final PNA.

Figure 30: Map showing pharmacy coverage in NHS West Essex



## Appendix BB – Pharmacies and dispensing GP coverage in NHS West Essex

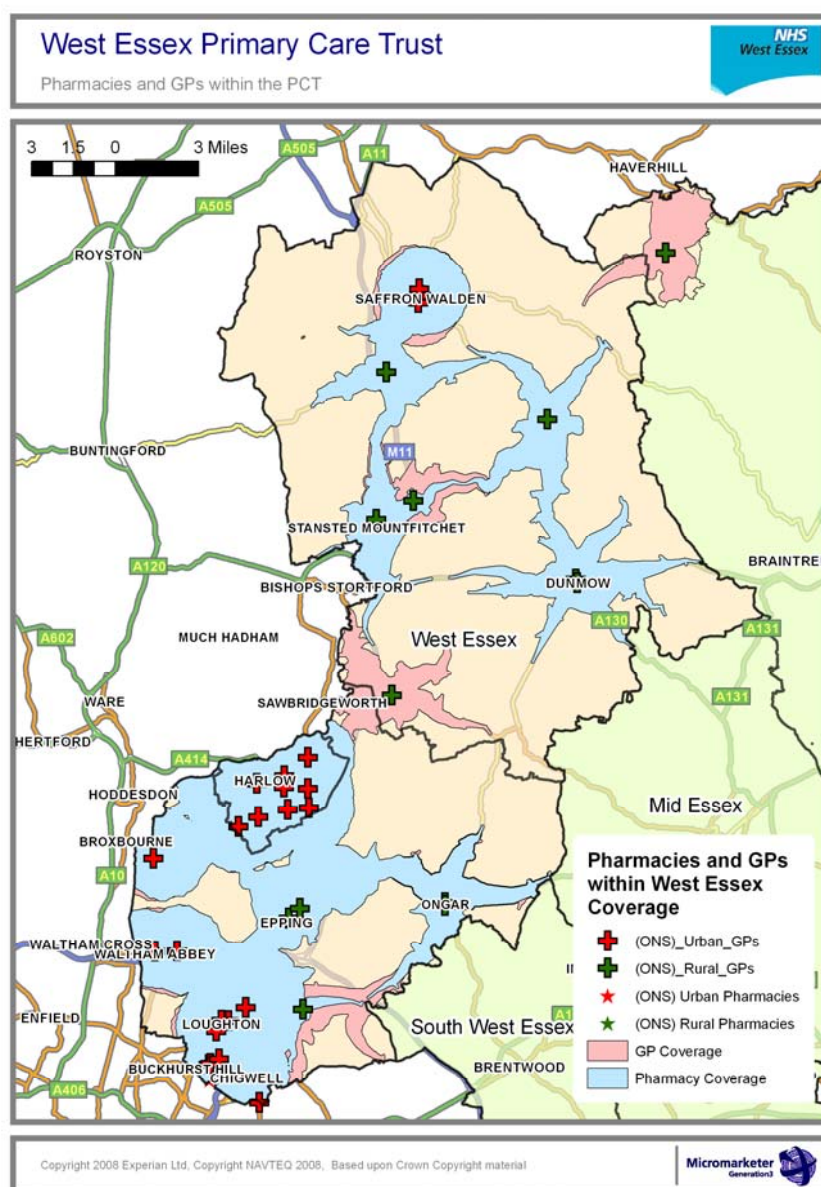
The isochrones (term used to describe the travel time areas) as shown on the map below is derived as follows:

- Urban areas are based on 25 minutes walking at 3mph = 2km
- Rural areas are based on 10 minutes driving time i.e. in a car at peak-times (does not include public transport). The road speeds vary based on recorded average traffic flows

Currently 90% of the population of West Essex is able to access pharmacies and Dispensing GPs within these times

**The map shown below is not final and should not be used to make final judgement of service provision. It has been included to show what information can be presented in the final PNA.**

**Figure 31: Map showing pharmacy and GP coverage in NHS West Essex**

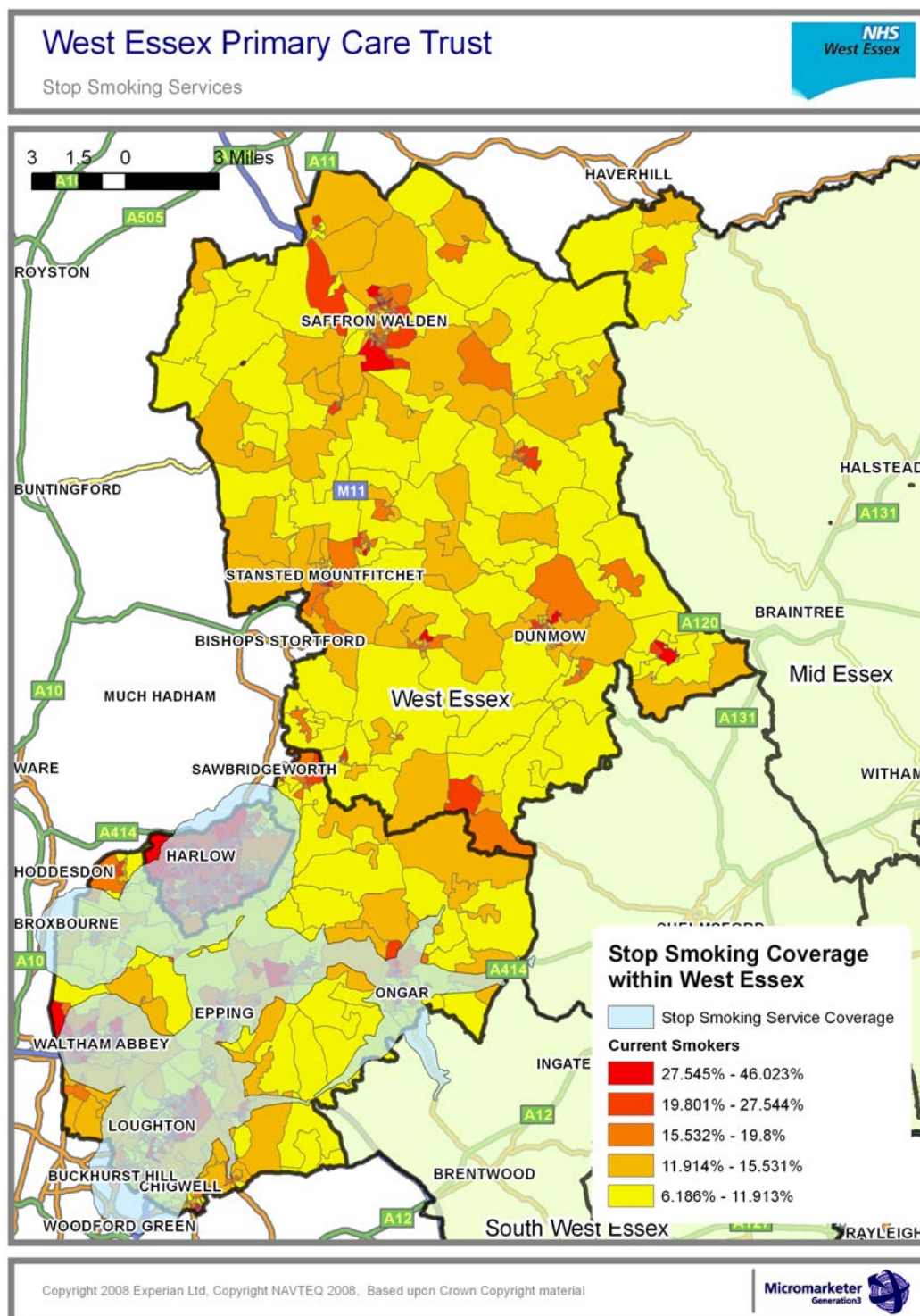


## Appendix CC – Pharmacies service coverage



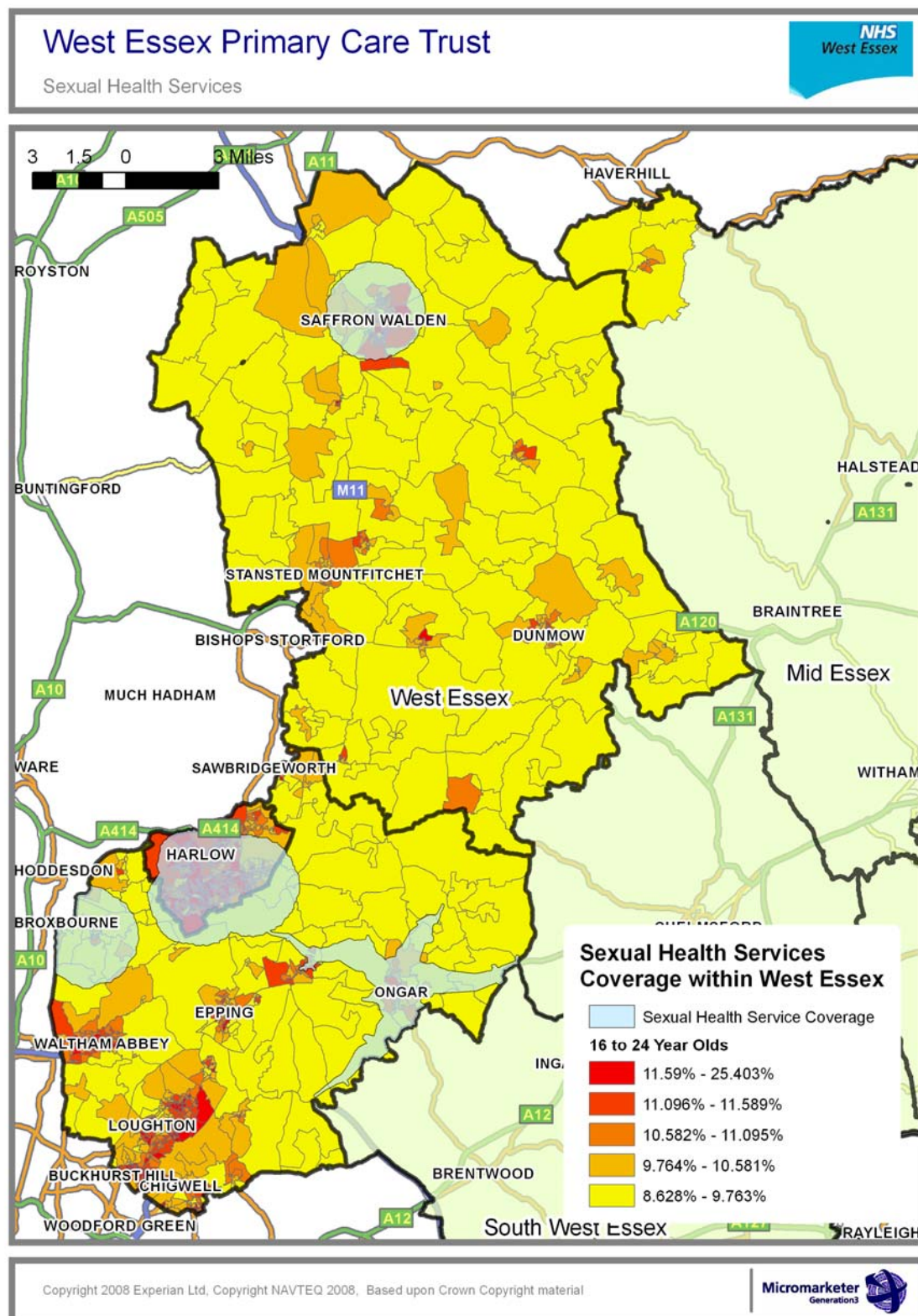
The map shown below is not final and should not be used to make final judgement of service provision as not all pharmacies signed up to the smoking LES are shown. It has been included to show what information can be presented in the final PNA.

**Figure 32: Map showing pharmacy coverage of smoking LES in NHS West Essex**



The map shown below is not final and should not be used to make final judgement of service provision, as not all pharmacies signed up to the sexual health LES are shown. It has been included to show what information can be presented in the final PNA.

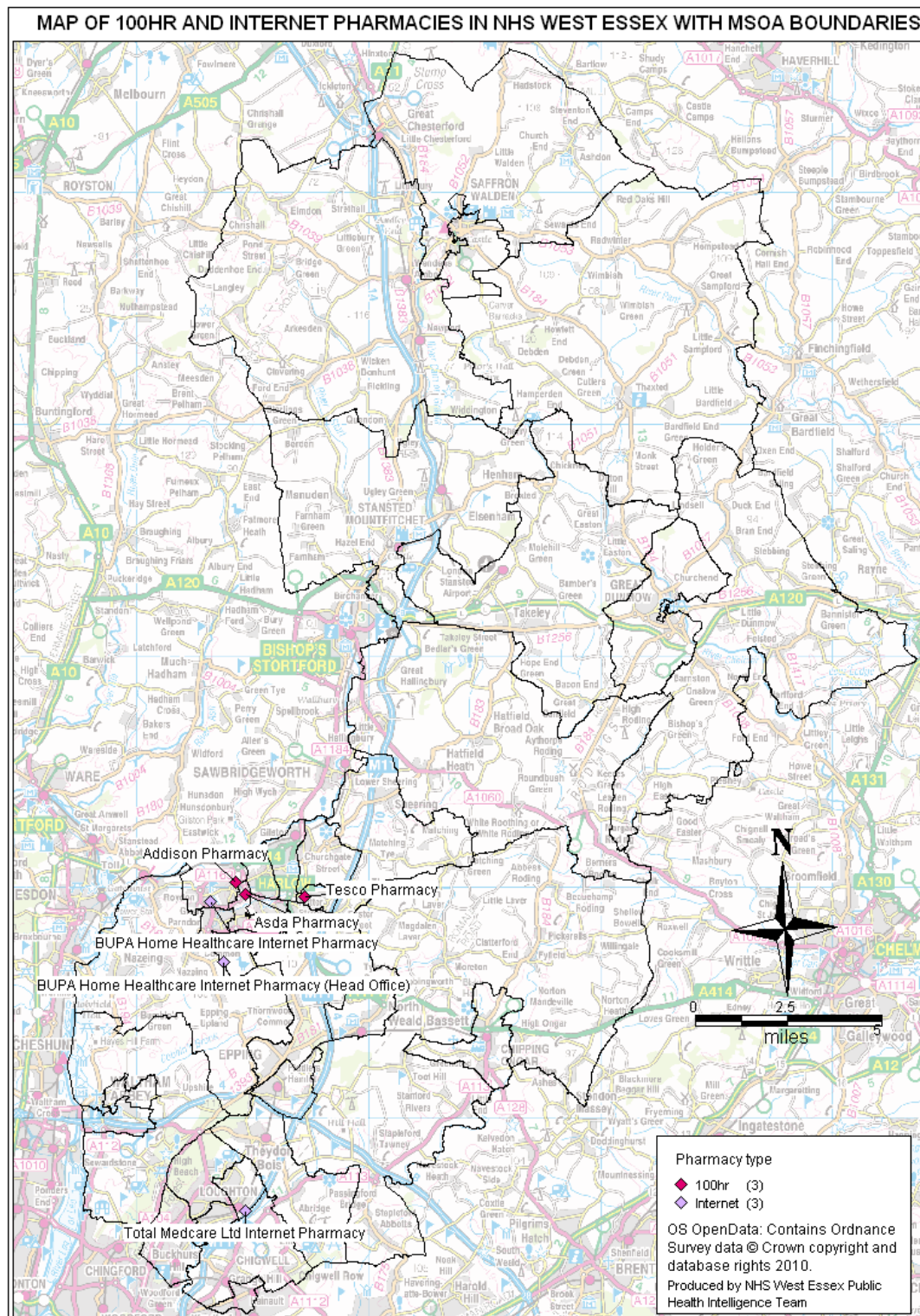
**Figure 33: Map showing pharmacy coverage of sexual health LES in NHS West Essex**





## Appendix DD – Map of 100 hour and Internet Pharmacies

Figure 34: Map of 100 hour and Internet Pharmacies in NHS West Essex



## Appendix EE – Pharmacy Contractor Details in West Essex

**Figure 35: Epping Locality**

Locality	Name	Address	Opening Hours
Epping	Safedale Ltd	26 Queens Road, Buckhurst Hill, Essex, IG9 5BU	Mon - Fri Sat
Epping	Easter Pharmacy	54 Station Way, Buckhurst Hill, Essex, IG9 6LL	Mon - Sat Mon/Tue/Thur/Fri
Epping	Brook House Pharmacy	20 Brook Parade, High Road, Chigwell, Essex, IG7 6PF	Mon - Fri Sat Sun
Epping	Boots UK Ltd	18 The Broadway, Debden, Essex, IG10 3ST	Mon - Sat Mon & Tue Wed - Sat
Epping	K G Dispensing Chemists	36 The Broadway, Debden, Essex, IG10 3ST	Mon - Fri Sat
Epping	Boots UK Ltd	223 High Street, Epping, Essex, CM16 4BL	Mon - Fri Sat
Epping	Lloyds Pharmacy	283 High Street, Epping, Essex, CM16 4DA	Mon - Fri Sat
Epping	Co-op Pharmacy	The Limes Medical Centre, Epping, Essex, CM16 6TL	Mon - Fri
Epping	Co-op Pharmacy	200 High Street, Ongar, Essex, CM5 9JJ	Mon - Fri Sat
Epping	Boots UK Ltd	230 High Road, Loughton, Essex, IG10 1EZ	Mon - Sat Mon - Fri Sat
Epping	Hutchins Pharmacy	197 High Road, Loughton, Essex, IG10 4LF	Mon - Sat Mon/Tue/Wed/Fri Thurs Sat
Epping	Leach & Burton Pharmacy	48 Pyrles Lane, Loughton, Essex, IG10 2NN	Mon - Sat Mon - Fri
Epping	Co-op Pharmacy	Loughton Health Centre, The Drive, Loughton, Essex, IG10 1HW	Mon - Fri
Epping	Oakwood Pharmacy	118 Roding Rd, Loughton, Essex, IG10 3EJ	Mon - Fri Sat
Epping	Wm Morrison Supermarkets	246/250 High Street, Loughton, Essex, IG10 1RB	Mon - Sat Sun
Epping	Lloyds Pharmacy	2 Market Square, Waltham Abbey, Essex, EN9 1DL	Mon - Fri
Epping	Elgon Chemists Ltd	6-8 Nazeingbury Parade, Waltham Abbey, Essex, EN9 2JL	Mon/Tue/Thur/Fri Wed/Sat
Epping	North Weald Chemists	48 High Road, North Weald, Essex, CM16 6BU	Mon - Fri Sat
Epping	Lloyds Pharmacy	205 High Street, Ongar, Essex, CM5 9JG	Mon - Fri Sat
Epping	Theydon Bois Pharmacy	10 Forest Drive, Theydon Bois, Essex, CM16 7EY	Mon - Fri Mon/Tues/Thur/Fri Sat
Epping	Glennon Chemists	8 Hillhouse, Ninefields Estate, Waltham Abbey, Essex, EN9 3EL	Mon - Fri Mon/Tue/Wed/Fri Thur Sat
Epping	Dee's Pharmacy	100 High Street, Roydon, Essex, CM19 5EE	Mon - Fri Sat
Epping	Lloyds Pharmacy	10 Sun Street, Waltham Abbey, Essex, EN9 1EE	Mon - Fri Sat
Epping	Total Medcare Internet/Mail Order	Unit B8 Seedbed Centre, Langston Road, Loughton, Essex, IG10 3TQ	Business hours are : Mon - Fri



**Figure 36: Harlow Locality**

Locality	Name	Address	Opening Hours
Harlow	Sainsbury,s Pharmacy	Fifth Avenueallende Avenue, Harlow, Essex, CM20 2AG	Mon - Fri Mon - Wed Thurs/Fri Sat Sun 08.30 – 13.00 14.00 – 20.00 14.00 – 21.00 08.00 – 20.00 10.00 – 14.00
Harlow	Asda Superstore 100 Hr	Water Gardens, Southgate, Harlow, Essex, CM20 1AN	Monday Tue to Fri Saturday Sunday 08.00 – 23.00 07.00 – 23.00 07.00 – 22.00 11.00 – 17.00
Harlow	Boots UK Ltd	16 The Stow, Harlow, Essex, CM20 3AH	Mon - Fri Sat 09.00 – 17.30 09.00 – 14.00 15.00 – 17.30
Harlow	Boots UK Ltd	37 Broad Walk, Harlow, Essex, CM20 1JA	Mon - Fri Sat Sun 08.30 – 17.30 08.30 – 18.00 10.00 – 16.00
Harlow	Boots UK Ltd Alliance Pharmacy	5 Bush House, Bush Fair, Harlow, Essex, CM18 6NS	Mon - Sat Mon/Tues/Weds/Fri Thurs 09.00 – 13.30 14.00 – 18.00 14.00 – 18.30
Harlow	Boots UK Ltd T/a Your Local Boots Pharmacy	9 North House, Bush Fair, Harlow, Essex, CM18 6NS	Mon/Tue/Wed/Fri Thur Mon/Tue/Fri Wed Sat 09.00 – 12.30 09.00 – 13.00 13.00 – 18.00 13.00 – 18.30 09.00 – 12.30 13.00 – 17.00
Harlow	Boldasset Ltd Potter Street Pharmacy	12 Prentice Place, Potter Street, Harlow, Essex, CM17 9BG	Mon - Fri Sat 09.00 – 18.00 09.00 – 13.00
Harlow	Boldasset Ltd Church Langley Pharmacy	Florence Nightingale HC, Minton Lane, Church Langley, Harlow, Essex, CM17 9TG	Mon - Fri 09.00 – 18.30
Harlow	Metwest Ltd	7-8 Staple Tye, Harlow, Essex, CM18 7PJ	Mon - Fri Sat 09.00 – 18.30 09.00 – 13.00
Harlow	Huschem Ltd. T/A Medicare Pharmacy	1 Sumners Hatch, Broadley Rd. Harlow	Mon - Fri 09.00 – 12.30 13.30 – 18.30
Harlow	Netteswell Pharmacy	1 Pypers Hatch, Maddox Road, Harlow, Essex, CM20 3NG	Mon/Tue/Wed/Fri Thur 09.00 – 13.00 14.00 – 19.00 09.00 – 13.00
Harlow	Ramco Chemist	43-45 High Street, Old Harlow, Essex, CM17 0DN	Mon - Fri Sat 09.00 – 18.30 10.00 – 17.00
Harlow	Co-op Pharmacy	107 The Stow, Harlow, Essex, CM20 3AS	Mon - Fri Sat 09.00 – 19.00 09.00 – 13.00
Harlow	Co-op Pharmacy	5 Market House, The High, Harlow, Essex, CM20 1BL	Mon - Fri Sat 08.45 – 18.00 09.00 – 17.30
Harlow	Tesco	Tesco Superstore, Church Langley Way, Harlow, Essex, CM17 9TE	Mon Tue- Sat Sunday 08.00 – 22.30 06.30 – 22.30 10.00 – 16.00
Harlow	BUPA Home Healthcare (Internet/Mail Order)	Unit 4 Scimitar Park, Roydon Road, Harlow, Essex, CM19 5GU	Mon - Fri 09.00 – 17.30
Harlow	BUPA Home Healthcare (Internet/Mail Order)	Unit 9 Coldharbour, Pinnacles Estate, Lovett Road, Harlow, Essex, CM19 5JL	Mon - Fri Sat 09.00 – 17.00 09.00 – 13.00
Harlow	Addison Healthcare	Ground Floor Wych Elm House, Hamstel Road, Harlow, Essex, CM20 1QR	Mon - Sat Sun 08.00 – 00.00 12.00 – 20.00

**Figure 37: Uttlesford Locality**

Locality	Name	Address	Opening Hours
Uttlesford	Ropers the Chemist Ltd	3-5 High Street, Great Dunmow, Essex, CM6 1AB	Mon - Fri Sat 09.00 – 18.00 09.00 – 17.00
Uttlesford	Yogi Pharmacists Ltd	7 Market Place, Great Dunmow, Essex, CM6 1AX	Mon - Fri Sat 09.00 – 18.00 09.00 – 13.00
Uttlesford	Boots UK Ltd	Market Place, Saffron Walden, Essex, CB10 1HR	Mon - Fri Sat 09.00 – 17.30 09.00 – 17.30
Uttlesford	Co-op Pharmacy	3 The Arches Hill Street, Saffron Waldon, Essex, CB10 1ED	Mon – Sat 09.00 – 13.30 14.30 – 17.30
Uttlesford	Boots UK Ltd T/a Your Local Boots Pharmacy	Unit 2 The Greens Buildings, Stansted Mountfitchet, Essex, CM24 8BZ	Mon - Fri Wed/Sat 09.00 – 13.00 14.00 – 18.00 09.00 – 13.00
Uttlesford	Thaxted Pharmacy	3 Town Street, Thaxted, Essex, CM6 2LD	Mon – Fri Sat 09.00 – 13.00 14.00 – 18.00 09.00 – 13.00
Uttlesford	Key Pharmaceuticals Ltd T/a Newport Pharmacy	The Brown House, High Street, Newport, Essex, CB11 3QY	Mon - Fri Sat 09.00 – 18.00 09.00 – 13.00

### Figure 38: Monday opening hours

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[illegible]

Locality		Pharmacy name	Postcode	Wednesday																																						
				06:30	07:00	07:30	08:00	08:30	09:00	09:30	10:00	10:30	11:00	11:30	12:00	12:30	13:00	13:30	14:00	14:30	15:00	15:30	16:00	16:30	17:00	17:30	18:00	18:30	19:00	19:30	20:00	20:30	21:00	21:30	22:00	22:30	23:00	23:30	00:00			
Epping	Boots UK Ltd, Debden	IG10 3ST																																								
Epping	Boots UK Ltd, Epping	CM16 4BL																																								
Epping	Boots UK Ltd, Loughton	IG10 1EZ																																								
Epping	Brook House Pharmacy	IG7 6PF																																								
Epping	Co-operative Pharmacy NCC Ltd, Epping	CM16 6TL																																								
Epping	Co-operative Pharmacy NCC Ltd, Ongar	CM5 9JJ																																								
Epping	Co-operative Pharmacy NCC Ltd, Loughton	IG10 1HW																																								
Epping	Dee's Pharmacy	CM19 5EE																																								
Epping	Easter Pharmacy	IG9 6LL																																								
Epping	Elgon Chemists Ltd	EN9 2JL																																								
Epping	Glennon Chemists	EN9 3EL																																								
Epping	Hutchins Pharmacy	IG10 4LF																																								
Epping	K G Pharmacy	IG10 3ST																																								
Epping	Leach & Burton Pharmacy	IG10 2NN																																								
Epping	Lloyds Pharmacy, Epping	CM16 4DA																																								
Epping	Lloyds Pharmacy, Waltham Abbey	EN9 1DL																																								
Epping	Lloyds Pharmacy, Ongar	CM5 9JG																																								
Epping	Lloyds Pharmacy, Waltham Abbey	EN9 1EE																																								
Epping	Morrison's Pharmacy	IG10 1RB																																								
Epping	North Weald Chemists	CM16 6BU																																								

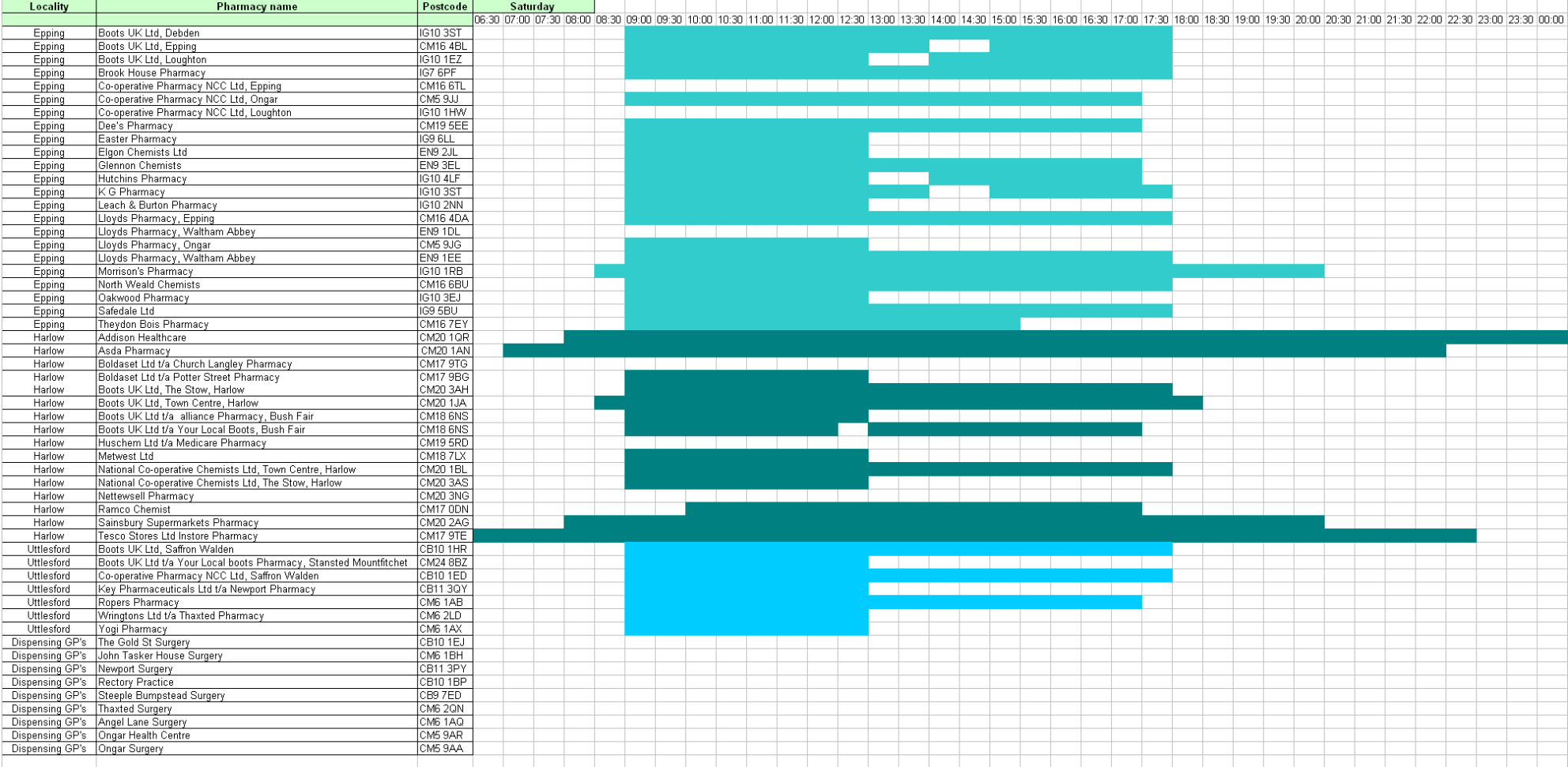
**Figure 41: Thursday opening hours**

Locality	Pharmacy name	Postcode	Thurs																																					
			06:30	07:00	07:30	08:00	08:30	09:00	09:30	10:00	10:30	11:00	11:30	12:00	12:30	13:00	13:30	14:00	14:30	15:00	15:30	16:00	16:30	17:00	17:30	18:00	18:30	19:00	19:30	20:00	20:30	21:00	21:30	22:00	22:30	23:00	23:30	00:00		
Epping	Boots UK Ltd, Debden	IG10 3ST																																						
Epping	Boots UK Ltd, Epping	CM16 4BL																																						
Epping	Boots UK Ltd, Loughton	IG10 1EZ																																						
Epping	Brook House Pharmacy	IG7 6PF																																						
Epping	Co-operative Pharmacy NCC Ltd, Epping	CM16 6TL																																						
Epping	Co-operative Pharmacy NCC Ltd, Ongar	CM5 9JJ																																						
Epping	Co-operative Pharmacy NCC Ltd, Loughton	IG10 1HW																																						
Epping	Dee's Pharmacy	CM19 5EE																																						
Epping	Easter Pharmacy	IG9 6LL																																						
Epping	Elgon Chemists Ltd	EN9 2JL																																						
Epping	Glennon Chemists	EN9 3EL																																						
Epping	Hutchins Pharmacy	IG10 4LF																																						
Epping	K G Pharmacy	IG10 3ST																																						
Epping	Leach & Burton Pharmacy	IG10 2NN																																						
Epping	Lloyds Pharmacy, Epping	CM16 4DA																																						
Epping	Lloyds Pharmacy, Waltham Abbey	EN9 1DL																																						
Epping	Lloyds Pharmacy, Ongar	CM5 9JG																																						
Epping	Lloyds Pharmacy, Waltham Abbey	EN9 1EE																																						
Epping	Morrison's Pharmacy	IG10 1RB																																						
Epping	North Weald Chemists	CM16 6BU																																						
Epping	Oakwood Pharmacy	IG10 3EJ																																						
Epping	Safedale Ltd	IG9 5BU																																						
Epping	Theydon Bois Pharmacy	CM16 7EY																																						
Harlow	Addison Healthcare	CM20 1QR																																						
Harlow	Asda Pharmacy	CM20 1AN																																						
Harlow	Boldaset Ltd t/a Church Langley Pharmacy	CM17 9TG																																						
Harlow	Boldaset Ltd t/a Potter Street Pharmacy	CM17 9BG																																						
Harlow	Boots UK Ltd, The Stow, Harlow	CM20 3AH																																						
Harlow	Boots UK Ltd, Town Centre, Harlow	CM20 1JA																																						
Harlow	Boots UK Ltd t/a alliance Pharmacy, Bush Fair	CM18 6NS																																						

Locality	Pharmacy name	Postcode	Friday				06:30	07:00	07:30	08:00	08:30	09:00	09:30	10:00	10:30	11:00	11:30	12:00	12:30	13:00	13:30	14:00	14:30	15:00	15:30	16:00	16:30	17:00	17:30	18:00	18:30	19:00	19:30	20:00	20:30	21:00	21:30	22:00	22:30	23:00	23:30	00:00			
Epping	Boots UK Ltd, Debden	IG10 3ST																																											
Epping	Boots UK Ltd, Epping	CM16 4BL																																											
Epping	Boots UK Ltd, Loughton	IG10 1EZ																																											
Epping	Brook House Pharmacy	IG7 6PF																																											
Epping	Co-operative Pharmacy NCC Ltd, Epping	CM16 6TL																																											
Epping	Co-operative Pharmacy NCC Ltd, Ongar	CM5 9JJ																																											
Epping	Co-operative Pharmacy NCC Ltd, Loughton	IG10 1HW																																											
Epping	Dee's Pharmacy	CM19 5EE																																											
Epping	Easter Pharmacy	IG9 6LL																																											
Epping	Elgon Chemists Ltd	EN9 2JL																																											
Epping	Glennon Chemists	EN9 3EL																																											
Epping	Hutchins Pharmacy	IG10 4LF																																											
Epping	K G Pharmacy	IG10 3ST																																											
Epping	Leach & Burton Pharmacy	IG10 2NN																																											
Epping	Lloyds Pharmacy, Epping	CM16 4DA																																											
Epping	Lloyds Pharmacy, Waltham Abbey	EN9 1DL																																											
Epping	Lloyds Pharmacy, Ongar	CM5 9JG																																											
Epping	Lloyds Pharmacy, Waltham Abbey	EN9 1EE																																											
Epping	Morrison's Pharmacy	IG10 1RB																																											



### Figure 43: Saturday opening hours



Locality	Pharmacy name	Postcode	Sunday
Epping	Boots UK Ltd, Debden	IG10 3ST	06:30 07:00 07:30 08:00 08:30 09:00 09:30 10:00 10:30 11:00 11:30 12:00 12:30 13:00 13:30 14:00 14:30 15:00 15:30 16:00 16:30 17:00 17:30 18:00 18:30 19:00 19:30 20:00 20:30 21:00 21:30 22:00 22:30 23:00 23:30 00:00
Epping	Boots UK Ltd, Epping	CM16 4BL	
Epping	Boots UK Ltd, Loughton	IG10 1EZ	
Epping	Brook House Pharmacy	IG7 6PF	
Epping	Co-operative Pharmacy NCC Ltd, Epping	CM16 6TL	
Epping	Co-operative Pharmacy NCC Ltd, Ongar	CM5 9JJ	
Epping	Co-operative Pharmacy NCC Ltd, Loughton	IG10 1HW	
Epping	Dee's Pharmacy	CM19 5EE	
Epping	Easter Pharmacy	IG9 6LL	
Epping	Elgon Chemists Ltd	EN9 2JL	
Epping	Glennon Chemists	EN9 3EL	
Epping	Hutchins Pharmacy	IG10 4LF	
Epping	K G Pharmacy	IG10 3ST	
Epping	Leach & Burton Pharmacy	IG10 2NN	
Epping	Lloyds Pharmacy, Epping	CM16 4DA	
Epping	Lloyds Pharmacy, Waltham Abbey	EN9 1DL	
Epping	Lloyds Pharmacy, Ongar	CM5 9JG	
Epping	Lloyds Pharmacy, Waltham Abbey	EN9 1EE	
Epping	Morrison's Pharmacy	IG10 1RB	
Epping	North Weald Chemists	CM16 6BU	
Epping	Oakwood Pharmacy	IG10 3EJ	
Epping	Safedale Ltd	IG9 5BU	
Epping	Theydon Bois Pharmacy	CM16 7EY	
Harlow	Addison Healthcare	CM20 1QR	
Harlow	Asda Pharmacy	CM20 1AN	
Harlow	Boldaset Ltd t/a Church Langley Pharmacy	CM17 9TG	
Harlow	Boldaset Ltd t/a Potter Street Pharmacy	CM17 9BG	
Harlow	Boots UK Ltd, The Stow, Harlow	CM20 3AH	
Harlow	Boots UK Ltd, Town Centre, Harlow	CM20 1JA	
Harlow	Boots UK Ltd t/a alliance Pharmacy, Bush Fair	CM18 6NS	
Harlow	Boots UK Ltd t/a Your Local Boots, Bush Fair	CM18 6NS	
Harlow	Huschem Ltd t/a Medicare Pharmacy	CM19 5RD	
Harlow	Metwest Ltd	CM18 7LX	
Harlow	National Co-operative Chemists Ltd, Town Centre, Harlow	CM20 1BL	
Harlow	National Co-operative Chemists Ltd, The Stow, Harlow	CM20 3AS	
Harlow	Nettewsell Pharmacy	CM20 3NG	
Harlow	Ranco Chemist	CM17 DDN	
Harlow	Sainsbury Supermarkets Pharmacy	CM20 2AG	
Harlow	Tesco Stores Ltd Instore Pharmacy	CM17 9TE	
Uttlesford	Boots UK Ltd, Saffron Walden	CB10 1HR	
Uttlesford	Boots UK Ltd t/a Your Local boots Pharmacy, Stansted Mountfitchet	CM24 8BZ	
Uttlesford	Co-operative Pharmacy NCC Ltd, Saffron Walden	CB10 1ED	
Uttlesford	Key Pharmaceuticals Ltd t/a Newport Pharmacy	CB11 3QY	
Uttlesford	Ropers Pharmacy	CM6 1AB	
Uttlesford	Wringtons Ltd t/a Thaxted Pharmacy	CM6 2LD	
Uttlesford	Yogi Pharmacy	CM6 1AX	
Dispensing GP's	The Gold St Surgery	CB10 1EJ	
Dispensing GP's	John Tasker House Surgery	CM6 1BH	
Dispensing GP's	Newport Surgery	CB11 3PY	
Dispensing GP's	Rectory Practice	CB10 1BP	
Dispensing GP's	Steeple Bumpstead Surgery	CB9 7ED	
Dispensing GP's	Thaxted Surgery	CM6 2QN	
Dispensing GP's	Angel Lane Surgery	CM6 1AQ	
Dispensing GP's	Ongar Health Centre	CM5 9AR	
Dispensing GP's	Ongar Surgery	CM5 9AA	

## Appendix GG – GP opening Hours in West Essex

**Figure 45: Opening hours of GP in NHS West Essex**

Practice	Extended hours	Core hours	Half day
<b>UTTLESFORD LOCALITY</b>			
Angel Lane	Monday - 6.30pm-8pm. Tuesday - 6.30am-8am. Wednesday - 6.30am-8am.	08.00-18.30	No half day
John Tasker House	Monday - 6.30pm-8pm. Thursday 6.30pm-8pm.	08.00-18.30	No half day
Thaxted	Saturday - 8.30am-12pm	08.00-18.30	No half day
Gold St	12pm	08.00-18.30	No half day
Elsenham	Monday 6.30pm-9pm.	08.00-18.30	No half day
Steeple Bumpstead	Saturday 9am-10am	08.00-18.30	No half day
Rectory	Monday 7am-8am 11am	08.00-18.30	No half day
Borough Lane	11am	08.00-18.30	No half day
Hatfield Heath	Saturday 8.30am-12.30pm	08.00-18.30	No half day
Newport	Saturday 8am-12pm	08.00-18.30	No half day
Stansted	12pm	08.00-18.30	No half day
<b>EPPING FOREST LOCALITY</b>			
Abridge	No extended hours	08.00-18.30	Wed 0900-12.00
Chigwell Medical Centre	Monday 6.30pm-7.30pm Tuesday 6.30pm-7.30pm	08.00-18.30	No half day
Forest Practice	Monday-Friday 6.55am-8.00am.	08.00-18.30	No half day
Greenyard (W. Abbey)	Tuesday 6.30-7.30pm	08.00-18.30	No half day
High Rd Loughton	6.30pm-7pm	08.00-18.30	Thursday 08.50-14.00
High St Epping	8pm	08.00-18.30	Wednesday 08.30-12.00
Keyhealth (W Abbey)	Saturday 9am-12.30pm	08.00-18.30	No half day
Kings Medical Centre	No extended hours	08.00-18.30	Wednesday 08.00-13.00
Loughton Health Centre	Saturday 8.30am-11.30am	08.00-18.30	No half day
Market Square	Saturday 9.30am-12.30pm	08.00-18.30	Wednesday 08.30-13.00
Maynard Court	Tuesday 6.30pm-8pm	08.00-18.30	Thursday 08.00-13.00
Nazeing Valley	Tuesday 6.30pm-7.30pm	08.00-18.30	Wednesday 08.00-13.00
Ongar Health centre	8am, 6.30pm - 8pm. Wednesday 7am-8am	08.00-18.30	No half day
Ongar Surgery	Monday 7am-8am	08.00-18.30	Tuesday 08.30-13.00 Friday 08.30-13.00
Palmerston Rd	Tuesday 6.30pm-7.45pm	08.00-18.30	No half day
River Surgery	weeks Thursday	08.00-18.30	Wednesday 08.30-13.00
The Limes	8am, 6.30pm-8pm, Wed 6.30pm-8pm, Thurs 6.30pm-8pm, Fri 7am-8am.	08.00-18.30	No half day
health)		08.00-20.00	No half day
<b>HARLOW LOCALITY</b>			
Addison House Surgery	Saturday 9am-2.15pm	08.00-18.30	No half day
Barbara Castle Health centre	No extended hours	08.00-18.30	No half day
Church Langley Medical Centre	No extended hours	08.00-18.30	No half days
Hamilton Practice	Monday 6.30pm-8.30pm Friday 7.30am-8am	08.00-18.30	No half day
Lister Medical Centre	Monday 7am-8am, 6.30pm-8pm Saturday 8am-11am	08.00-18.30	No half day
Nuffield House Surgery	Saturday 8am-11am	08.00-18.30	No half day
Old Harlow Health Centre	No extended hours	08.00-18.30	No half day
Osler House Medical centre	Saturday 8.30am-11.30am	08.00-18.30	No half day
Ross Practice	Saturday 8am-12.30pm	08.00-18.30	No half day
Sydenham House Health centre	Wednesday 6.30pm-8pm	08.00-18.30	Thursday 09.00-12.30

## Appendix HH – Pharmacy Locally Enhanced Services

**Figure 46: Local Enhanced Services in NHS West Essex pharmacies are currently signed up for**

Locality	Pharmacy name	Postcode	Services				
			Stop Smoking	Sexual Health	Palliative Care	Consumption	Syringe Exchange
Epping	Boots UK Ltd, Debden	IG10 3ST	x	x	x	x	x
Epping	Boots UK Ltd, Epping	CM16 4BL	✓	x	✓	x	x
Epping	Boots UK Ltd, Loughton	IG10 1EZ	✓	✓	x	x	x
Epping	Brook House Pharmacy	IG7 6PF	x	x	✓	x	x
Epping	Co-operative Pharmacy NCC Ltd, Epping	CM16 6TL	x	x	✓	✓	x
Epping	Co-operative Pharmacy NCC Ltd, Ongar	CM5 9JJ	x	x	x	x	x
Epping	Co-operative Pharmacy NCC Ltd, Loughton	IG10 1HW	x	x	x	x	x
Epping	Dee's Pharmacy	CM19 5EE	✓	✓	✓	x	x
Epping	Easter Pharmacy	IG9 6LL	✓	✓	✓	x	x
Epping	Elgon Chemists Ltd	EN9 2JL	✓	✓	✓	x	x
Epping	Glennon Chemists	EN9 3EL	✓	x	✓	✓	x
Epping	Hutchins Pharmacy	IG10 4LF	x	x	x	x	x
Epping	K G Pharmacy	IG10 3ST	x	x	✓	✓	✓
Epping	Leach & Burton Pharmacy	IG10 2NN	x	✓	✓	✓	✓
Epping	Lloyds Pharmacy, Epping	CM16 4DA	x	x	x	x	✓
Epping	Lloyds Pharmacy, Waltham Abbey	EN9 1DL	x	x	x	x	x
Epping	Lloyds Pharmacy, Ongar	CM5 9JG	✓	x	✓	✓	x
Epping	Lloyds Pharmacy, Sun Street Waltham Abbey	EN9 1EE	x	x	x	✓	✓
Epping	Morrison's Pharmacy	IG10 1RB	x	x	x	x	x
Epping	North Weald Chemists	CM16 6BU	x	✓	✓	x	x
Epping	Oakwood Pharmacy	IG10 3EJ	x	x	✓	x	✓
Epping	Safedale Ltd	IG9 5BU	x	✓	x	x	x
Epping	Theydon Bois Pharmacy	CM16 7EY	x	✓	✓	x	x
Harlow	Addison Healthcare	CM20 1QR	✓	✓	x	x	x
Harlow	Asda Pharmacy	CM20 1AN	✓	✓	x	✓	x
Harlow	Boldaset Ltd t/a Church Langley Pharmacy	CM17 9TG	x	x	x	x	x
Harlow	Boldaset Ltd t/a Potter Street Pharmacy	CM17 9BG	✓	✓	✓	✓	✓
Harlow	Boots UK Ltd, The Stow, Harlow	CM20 3AH	✓	x	✓	✓	x
Harlow	Boots UK Ltd, Town Centre, Harlow	CM20 1JA	x	x	x	✓	x
Harlow	Boots UK Ltd t/a alliance Pharmacy, Bush House	CM18 6NS	x	x	x	x	x
Harlow	Boots UK Ltd t/a Your Local Boots, North House	CM18 6NS	x	x	x	✓	✓
Harlow	Huschem Ltd t/a Medicare Pharmacy	CM19 5RD	x	✓	✓	x	x
Harlow	Metwest Ltd	CM18 7LX	x	✓	✓	✓	✓
Harlow	National Co-operative Chemists Ltd, Town Centre	CM20 1BL	x	x	x	✓	x
Harlow	National Co-operative Chemists Ltd, The Stow	CM20 3AS	x	x	✓	✓	✓
Harlow	Nettewell Pharmacy	CM20 3NG	x	✓	✓	✓	✓
Harlow	Ramco Chemist	CM17 0DN	✓	✓	✓	✓	x
Harlow	Sainsbury Supermarkets Pharmacy	CM20 2AG	x	x	x	✓	x
Harlow	Tesco Stores Ltd Instore Pharmacy	CM17 9TE	x	x	x	x	✓
Uttlesford	Boots UK Ltd, Saffron Walden	CB10 1HR	x	✓	x	✓	✓
Uttlesford	Boots UK Ltd t/a Your Local boots Pharmacy, Stansted Mountfitchet	CM24 8BZ	x	x	x	x	x
Uttlesford	Co-operative Pharmacy NCC Ltd, Saffron Walden	CB10 1ED	x	x	x	x	x
Uttlesford	Key Pharmaceuticals Ltd t/a Newport Pharmacy	CB11 3QY	x	x	x	x	x
Uttlesford	Ropers Pharmacy	CM6 1AB	x	✓	x	x	x
Uttlesford	Wrightons Ltd t/a Thaxted Pharmacy	CM6 2LD	x	x	x	✓	x
Uttlesford	Yogi Pharmacy	CM6 1AX	x	✓	x	✓	✓

## Appendix II - Pharmacies that Border West Essex PCT

**Figure 47: Local Enhanced Services that pharmacies bordering NHS West Essex are signed up for**

Pharmacies that border NHS West Essex															
PCT	Pharmacy	Address	Town	Postcode	Stop Smoking Service	Sexual Health	Needle Exchange	Supervised Consumption	Palliative care drug boxes	Rota/Out of Hours	Home Delivery (not appliances)	Medication Review	Minor Ailment Scheme	Not Dispensed	
Suffolk	Clare Pharmacy	Well Lane	Clare	CO10 8NH	✓	✓	x	x	x	✓	x	x	x	x	
Suffolk	Haverhill Pharmacy	Christmas Maltings Surgery, Camps Road	Haverhill	CB9 8HF	x	x	x	x	x	x	x	x	x	x	
Suffolk	Boots	15 High Street	Haverhill	CB9 8AD	✓	x	x	x	x	x	x	x	x	x	
Suffolk	David Holland Pharmacy	Norton Road, Greenfield Way	Haverhill	CB9 8LU	✓	x	x	x	x	x	x	x	x	x	
Suffolk	Co-op	2 Mill Road	Haverhill	CB9 8BD	x	x	x	x	x	x	x	x	x	x	
Suffolk	Sainsbury's	Haycocks Road, Hanchett End	Haverhill	CB9 7YL	x	✓	x	x	x	x	x	x	x	x	
Suffolk	Tesco In Store Pharmacy	Cangle Road	Haverhill	CB9 0BQ	x	x	x	x	x	x	x	x	x	x	
Suffolk	Long Melford Pharmacy	Hall Street, Long Melford	Sudbury	CO10 9JG	x	✓	x	x	x	✓	x	x	x	x	
Suffolk	Moss	7 Poplar Road, Great Cornard	Sudbury	CO10 0LH	x	✓	x	x	x	x	x	x	x	x	
Suffolk	Boots	12-14 Market Hill	Sudbury	CO10 2EA	✓	✓	x	x	x	✓	x	x	x	x	
Suffolk	Long Melford Pharmacy	Hall Street, Long Melford	Sudbury	CO10 9JG	x	✓	x	x	x	x	x	x	x	x	
Suffolk	Parade Pharmacy	6, North Street Parade,	Sudbury	CO10 1GL	x	✓	x	x	x	x	x	x	x	x	
Suffolk	Lloyds	29 North Street	Sudbury	CO10 1RB	x	x	x	x	x	✓	x	x	x	x	
Suffolk	Superdrug	8 North Street	Sudbury	CO10 1RB	✓	x	x	x	x	✓	x	x	x	x	
Suffolk	Tesco In Store Pharmacy	Woodhall Business Park, Springlands Way	Sudbury	CO10 6GY	x	x	x	x	x	✓	x	x	x	x	
Cambs	Boots	High St, Sawston	Cambridge	CB22 3BG	✓	✓	x	✓	x	x	✓	✓	✓	✓	
Cambs	Sawston London Road	Sawston	Cambridge	CB22 3HU	x	✓	✓	x	x	x	✓	x	x	✓	
Cambs	Village Pharmacy	Linton	Cambridge	CB21 4HS	x	✓	✓	✓	✓	✓	x	x	x	✓	
Redbridge	Lloyds Pharmacy			IG7 4DN	x	✓	x	✓	x	x	x	x	✓	x	
Redbridge	Bridge Pharmacy			IG8 8AL	✓	✓	x	x	x	x	x	x	✓	x	
Redbridge	Boots The Chemist			IG7 4DN	x	x	x	x	x	x	x	x	x	x	
Mid Essex	AMG Chemist	70 Coggeshall Road,	Braintree	CM7 9BY	x	x	x	x	x	x	x	x	✓	x	
Mid Essex	Boots	7 George Yard	Braintree	CM7 1RB	✓	x	✓	✓	x	x	x	✓	✓	x	
Mid Essex	Borno Chemists	9 Bank Street	Braintree	CM7 1UG	✓	✓	x	✓	✓	x	x	✓	✓	x	
Mid Essex	Borno Chemists	96 Coggeshall Road	Braintree	CM7 6BY	x	✓	x	x	x	x	x	✓	✓	x	
Mid Essex	Christchurch Pharmacy	Blandford Medical Centre, Mace Avenue,	Braintree	CM7 2AE	x	✓	x	x	✓	x	x	✓	✓	x	
Mid Essex	Lloyds Pharmacy	10 Great Square,	Braintree	CM7 1UA	x	x	x	✓	x	x	x	✓	✓	x	
Mid Essex	Tesco Pharmacy	1 The Square, Notley Green,	Braintree	CM77 8WW	✓	x	x	x	x	x	x	✓	x	x	
Havering - No pharmacies sit on the borders					x	x	x	x	x	x	x	x	x	x	
Herts	Tesco Stores Limited	Bishops Park, Lancaster Way	Bishops Stortford	CM23 4DD	✓	x	x	✓	x	x	x	x	x	x	
Herts	Village Pharmacy	7 Bell Street	Sawbridgeworth	CM21 9AR	✓	x	x	x	x	x	x	x	x	x	
Herts	Douglas Pharmacy	Unit 3 Forelands Place, Bell Street	Sawbridgeworth	CM21 9QD	✓	x	x	x	x	x	x	x	x	x	
Herts	Trinity Pharmacy	87 South Street	Bishops Stortford	CM23 3AL	✓	✓	✓	✓	x	x	x	x	x	x	
Herts	Boots Uk	16-18 Potter Street	Bishops Stortford	CM23 3UL	x	x	x	x	x	x	x	x	x	x	
Herts	Lloydspharmacy	5 Thorley Centre	Bishops Stortford	CM23 4EG	✓	✓	x	x	x	x	x	x	x	x	
Herts	J Williamson Chemist	1 Snowley Parade, Manston Drive	Bishops Stortford	CM23 5EJ	✓	x	x	✓	x	x	x	x	x	x	
Herts	Lloydspharmacy	35 South Street	Bishops Stortford	CM23 3AG	✓	x	x	x	x	x	x	x	x	x	
Herts	Niti Pharmacy	Unit 26 Shopping Pavillion	Waltham Cross	EN8 7BY	✓	x	✓	x	x	x	x	x	x	x	
Herts	Boots Uk	Waltham Cross Shopping Pavilion	Waltham Cross	EN8 7BZ	✓	x	x	✓	x	x	x	x	x	x	
Herts	Coyle D Chemist	147 High Street	Waltham Cross	EN8 7AP	x	x	x	✓	x	x	x	x	x	x	

**Figure 48: Locally Enhanced Services for pharmacies offered by bordering PCTs**

<b>Enhanced Services provided</b>													
<b>PCT</b>	<b>Enhanced Services</b>												
	Smoking Cessation	Sexual Health	Not Dispensed	Specials	Minor Ailments Service	Needle Exchange	Supervised Consumption	Palliative Care Service	Healthy Start Vitamin Supplements	Anti-Coagulation Service	MUR service	Rota	Pharmacy prescription intervention scheme
Cambs	✓	✓	✓	✓	✓	✓	✓	✓	✓	x	x	x	x
Redbridge	✓	✓	x	x	✓	✓	✓	x	x	x	x	x	x
Havering	✓	✓	x	x	x	✓	✓	x	x	✓	✓	x	x
Suffolk	✓	✓	x	x	x	✓	✓	✓	x	x	x	✓	✓
Mid Essex	✓	✓	x	x	✓	✓	✓	✓	x	x	✓	x	x
Herts	✓	✓	x	x	x	✓	✓	x	x	x	x	✓	x



