# Bradford District Health and Wellbeing Board Pharmaceutical Needs Assessment

2018-2021













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The production of the Pharmaceutical Needs Assessment has been overseen by the Pharmaceutical Needs Assessment Steering Group on behalf of the Bradford District Health and Wellbeing Board.

The PNA covers the time period 2018-2021. A revision of the PNA will be published within 3 years of the publication of this document in line with the regulations, or sooner if a substantial change occurs within this time.

It is the responsibility of the Health and Wellbeing Board to decide whether a new assessment is a proportionate response to the change in the availability of services.

**Director of Public Health: Anita Parkin** 

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#### **VALIDITY STATEMENT**

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# **Abbreviations**

Acronym/Word	Definition			
AUR	Appliance Use Review			
CCG Clinical Commissioning Group				
CPWY	Community Pharmacy West Yorkshire			
EC	Emergency Contraception			
EHC	Emergency Hormonal Contraception			
ESA	Employment and Support Allowance			
HWB	Health and Wellbeing Board			
IMD	Indices of Multiple Deprivation			
JSA	Job Seekers Allowance			
JSNA	Joint Strategic Needs Assessment			
LMC	Local Medical Committee			
LPC	Local Pharmaceutical Committee			
	Lower Super Output Area- geographical areas containing a minimum			
LSOA	population of 1,000; the average is 1,500. There are 310 LSOAs within			
	Bradford District.			
MAR Chart	Medication Administration Record Chart			
MUR	Medicine Use Review			
NMS	New Medicine Service			
	NOMIS is a service provided by the Office for National Statistics, ONS,			
	to give you free access to the most detailed and up-to-date UK labour			
NOMIS	market statistics from official sources.			
NUMSAS	NUMSAS is a national time limited pilot of a Community Pharmacy Urgent Medicine Supply Service. Patients who contact NHS 111 to request access to urgently needed medicines or appliances will be referred to a pharmacy which is providing this service. A pharmacist can only supply a prescription only medicine, without a prescription, which the patient has been previously prescribed.			
NX Needle Exchange				
ONS	Office for National Statistics			
PNA	Pharmaceutical Needs Assessment			
PSNC	Pharmaceutical Services Negotiating Committee			
PURM	Pharmacy Urgent Repeat Medicine			
SAC	Stoma Appliance Customisation			

# 1. Executive Summary

A Pharmaceutical Needs Assessment (PNA) is a statement of needs for pharmacy services in a local area. It provides information for commissioners to help ensure that pharmacies across the district are located in the right places, and that pharmacies are commissioned to provide services according to the needs of the local population. The PNA aims to identify any gaps in the current provision and assess whether there will be any gaps in the near future by looking at prospective commissioning intentions, housing developments within the Bradford District and the population demographics.

The PNA is a statutory requirement which came out of the National Health Service (NHS) Regulations 2013, which states that Health and Wellbeing Boards must complete a PNA by the 1<sup>st</sup> April 2015 and are required to produce a revised assessment within 3 years of publication of their first assessment.

The Bradford District HWB has prepared this PNA in accordance with the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013, SI 2013/349 ("the Regulations"), which covers the Bradford District geographical area. This includes Bradford City CCG, Bradford Districts CCG, and the Airedale and Wharfedale communities in Airedale, Wharfedale and Craven CCG.

The statement of need for pharmacy services in the Bradford District has been made based on a range of information sources:

- Public Engagement exercise
- Pharmacy Questionnaire
- Public Health data on health needs
- Details of CCG and Local Authority commissioning plans
- Details of future housing developments
- Demographic trends

#### **Conclusions**

- Having considered likely changes to the number of people requiring pharmaceutical services, the demography of the area, and the health and wellbeing of people in the District, the PNA has not identified any future needs which are not already met by providers currently on the pharmaceutical list.
- Pharmacies appear to be located in areas of greatest need, as determined by population density, deprivation and identified health needs.
- There are no gaps in necessary provision, in accordance with the regulations in an area.
- There are no gaps in provision to suggest more services in the area, would result in better
  access to pharmaceutical services. This is supported by the public engagement exercise in
  which 91% of respondents said that they can get to a pharmacy of their choice when they
  want to
- A range of additional/enhanced services are provided; these appear to be based on population need.
- Population growth is unlikely to influence the need for pharmacy services over the next 3 years to the extent that new services would need to be commissioned.
- There are, however, likely to be changes to GP extended access schemes. There is a good geographical spread of pharmacies operating extending opening hours. These are likely to

be sufficient to cover any extended GP opening hours, and any additional cover is likely to be met by an existing pharmacy contractor currently on the pharmaceutical list. The situation will, however, remain under review by Public Health and the CCG lead for Medicines Management.

# 2. Background

#### 2.1 Purpose of the Bradford District Pharmaceutical Needs Assessment

A Pharmaceutical Needs Assessment (PNA) is a statement of needs for pharmacy services in the local area. It provides information for commissioners to help ensure that pharmacies across the District are located in the right places, and that pharmacies are commissioned to provide services according to the needs of the local population. Under the Health and Social Care Act (2012), all Health and Wellbeing Boards have a statutory duty to produce a PNA every three years, or earlier if there have been significant changes. Bradford District Health and Wellbeing Board published its first PNA in 2015. This is, therefore the second PNA of the Health and Wellbeing Board.

One of the main purposes of the PNA is to support decision making in terms of market entry for NHS England. It can, however, also be used to support local commissioners to identify opportunities to deliver health and wellbeing services and interventions within pharmacy settings. If an individual or organisation wants to provide NHS pharmaceutical services, they are required to apply to the NHS to be included on a pharmaceutical list. Pharmaceutical lists are compiled and held by NHS England. This is commonly known as the NHS "market entry" system. Under the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations ("the 2013 Regulations"), a person who wishes to provide NHS pharmaceutical services must generally apply to NHS England to be included on a relevant list by proving they are able to meet a pharmaceutical need as set out in the relevant PNA.

In addition to the PNA, the Bradford District Health and Wellbeing Board have a statutory duty to publish a Joint Strategic Needs Assessment (JSNA). The JSNA describes the current and future health and care needs of the local population to inform the commissioning of health and care services. The PNA should therefore be considered alongside the Bradford District JSNA, which is accessible via the following link: <a href="http://jsna.bradford.gov.uk">http://jsna.bradford.gov.uk</a>.

#### 2.2 Development of the Bradford District Pharmaceutical Needs Assessment

A Pharmaceutical Needs Assessment Steering Group was established on behalf of the Health and Wellbeing Board to oversee the development of the PNA. The Steering Group convened in October 2017 and included representation from NHS England, Community Pharmacy West Yorkshire (CPWY), Bradford City CCG, Bradford District CCG, Airedale, Wharfedale and Craven CCG, and City of Bradford Metropolitan District Council Public Health. The terms of reference for this group are available in Appendix 1.

In accordance with the Bradford District Health and Wellbeing Board, this PNA covers the Bradford District geographical area. This includes Bradford City CCG, Bradford Districts CCG, and the Airedale and Wharfedale communities in Airedale, Wharfedale and Craven CCG. The Craven element will be included in the North Yorkshire Health and Wellbeing Board PNA.

In producing the 2018-2021 PNA a number of tasks were undertaken:

- We reviewed the previous PNA to understand gaps and amended the methodology accordingly.
- We published a public questionnaire to seek views from the public on their experience of using pharmacies in Bradford District. This was the first time that we had issued a public questionnaire as part of the PNA process. The importance of seeking the views of people in

- the District to identify needs was recognised following feedback on the previous PNA. A copy of the questionnaire and the results can be found in Appendix 2.
- We published a pharmacy questionnaire to map out current provision and to identify intentions for the future. A copy of the questionnaire and the results can be found in Appendix 3.
- Additional information on current service provision was provided by NHS England, Community Pharmacy West Yorkshire, the three Bradford CCGs and local commissioners in Public Health.
- Information on population health was provided by the Bradford Council Public Health Analysis
  Team
- The draft PNA was compiled based on all of the above sources of information.

As required by the regulations set out in the Health Act 2009, the Bradford District Health and Wellbeing Board has a duty to publically consult on the Pharmaceutical Needs Assessment for a minimum period of 60 days. The consultation commenced on 7<sup>th</sup> November 2017 and ended on the 7<sup>th</sup> January 2018.

# 3. Understanding Provision and Scope of Pharmacy Services

#### 3.1 Market Entry by means of Pharmaceutical Needs Assessment

NHS England are responsible for commissioning pharmacies. Market entry is the process by which NHS Pharmacy contracts are considered to be granted for inclusion on, or removed from the pharmaceutical list<sup>1</sup> held by NHS England; applications for new, additional or relocated premises are considered by the NHS England local area team. This is known as the Market Entry Test and the PNA supports with this decision making.

The detail of the basis for applications is covered by the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. This gives the regulatory framework under which applications should be made to NHS England Area Teams and how they should determine those applications. This supersedes the "Control of Entry" test which had previously been the method for determining pharmacy applications.

There have been regulatory changes (5th December 2016) which state that when two pharmacy businesses apply to consolidate from two sites to one single existing site, a new pharmacy would be prevented from 'stepping in' where this does not create a gap in service.

It is important that the PNA document reflects this change and that local Health and Wellbeing Boards are aware of their responsibility to respond to consolidation applications.

#### 3.2 Definition of Pharmaceutical Services

Whilst NHS England is the commissioner of pharmacies, community pharmacies may also be commissioned to provide additional services which are described in table 1. There are three types of pharmaceutical services: Essential; Advanced; and Enhanced. Essential services are services which every community pharmacy providing NHS pharmaceutical services must provide and is set out in their terms of service. Advanced and Enhanced services are additional services which pharmacies may offer but are not obliged to do so; these are often dependant on the needs of the population the pharmacy is serving.

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<sup>&</sup>lt;sup>1</sup> List of pharmacies which have a contact with NHS England through market entry or the previous control of entry

Table 1: Range of services potentially offered by Pharmacies

Service level	Service	Service Description		
Essential	Dispensing Medicines	Supply of medicines or appliances ordered on NHS Prescriptions, advice will be given to the patient on		
	and/or Appliances	medicine being dispensed and how it can interact with other medicines they are currently taking.		
	Repeat Dispensing	The management of repeat medication for up to one year, in partnership with the patient and prescriber.		
		The patient will return to the pharmacy for repeat supplies, without first having to visit the GP surgery.		
	Disposal of unwanted	Acceptance of unwanted medicines for households and individuals via pharmacies.		
	Medicines			
	Promotion of Healthy	The provision of opportunistic one to one advice on healthy lifestyle topics such as, stopping smoking		
	Lifestyles (Public	and weight management. In addition pharmacies are involved in up to six local campaigns a year e.g.;		
	Health)	Stoptober and self-care week		
	Signposting patients to	Pharmacists and staff will refer patients who require further support, advice or treatment that they		
	other Healthcare	cannot provide.		
	providers			
	Support for Self-care	The provision of advice and support by pharmacy staff to enable people to derive maximum benefit from		
		caring for themselves or their families. The main focus is on self-limiting illness, but support for people		
		with long-term conditions is also a feature of the service.		
	Clinical Governance	Pharmacies must have a system of clinical governance to support the provision of excellent care;		
		requirements include: provision of a practice leaflet for patients; use of standard operating procedures;		
		patient safety incident reporting to the National Reporting and Learning Service (NRLS); conducting		
		clinical audits and patient satisfaction surveys; having complaints and whistle-blowing policies; acting		
		upon drug alerts and product recalls to minimise patient harm; and having cleanliness and infection		
		control measures in place.		
Advanced	Medicines Use Review	The pharmacist conducts an adherence focussed medicines review with the patient. The review		
	(MUR) & Prescription	assesses the patient's use of their medicines and attempts to identify and address any problems they		
	Intervention Service	may be experiencing. Where necessary, a referral is made to the patient's GP. The service aims to		
		increase the patient's knowledge of their medication and improve their adherence to the regimen. MURs		
		are conducted in a private consultation area which ensures patient confidentiality.		
	New Medicine Service	This service is designed to improve patients' understanding of a newly prescribed medicine for a long		
	(NMS)	term condition, and help them get the most from the medicine. Research has shown that after 10 days,		
		two thirds of patients prescribed a new medicine reported problems including side effects, difficulties		

		taking the medicine and a need for further information. The NMS has been designed to fill this identigate gap in patient need.				
	Stoma Appliance Customisation Service (SAC)	This service involves the customisation of a quantity of more than one stoma appliance, based on the patient's measurements or a template. The aim of the service is to ensure proper use and comfortable fitting of the stoma appliance and to improve the duration of usage, thereby reducing waste.				
	Appliance Use Review Service (AUR)	This service is similar to the MUR service, but it aims to help patients better understand and use their prescribed appliances (e.g. stoma appliances) rather than their medicines by: establishing the way the patient uses the appliance and the patient's experience of such use; identifying, discussing and assisting in the resolution of poor or ineffective use of the appliance by the patient; and advising the patient on the safe and appropriate storage of the appliance and proper disposal of the appliances that are used or unwanted. The service is conducted in a private consultation area or in the patient's home.				
	Seasonal Influenza Vaccination	Each year from September through to January the NHS runs a seasonal flu vaccination campaign aiming to vaccinate all patients who are at risk of developing more serious complications from the virus. These include people aged 65 years and over, pregnant women and those with certain health conditions.				
	NHS Urgent Medicine Supply Advanced Service (NUMSAS)	NUMSAS is a national time limited pilot of a Community Pharmacy Urgent Medicine Supply Service. Patients who contact NHS 111 to request access to urgently needed medicines or appliances will be referred to a pharmacy which is providing this service. A pharmacist can only supply a prescription only medicine, without a prescription, which the patient has been previously prescribed.				
Enhanced	Minor Ailments Management	An enhanced service for patients who are exempt from prescription charges can present to an accredited community pharmacy to receive advice and an appropriate medicine for a limited range of minor ailments for example coughs and colds.				
	Palliative care services	If a patient is deemed to be coming to the end of their life, a Doctor may prescribe drugs to make them comfortable. Pharmacies commissioned to provide this service stock a locally agreed list of medicines and make a commitment to ensure that the users of the service have prompt access to these medicines, in response to the presentation of an NHS prescription and during the pharmacies contracted opening hours.				
	Care home services	Care Home services are commissioned to provide medicines governance advice from community pharmacies into care homes to assist them in having systems and processes in place to ensure the safe and secure handling of medicines within the care home.				
	Out of hours services	Pharmacies which are open additional hours or 100 hour pharmacies which opened under the formal exemption from the control of entry test.				

	Gluten free food supply	Patients with confirmed diagnosis of gluten enteropathy or dermatitis herpetiformis, who have a		
		written referral from either a GP or dietitian contracted to specified CCGs, can be provided with free		
		gluten free foods that are listed in the current Drug Tariff under this service.		
	Supplementary and	Pharmacist Independent Prescribers are able to prescribe any medicine for any medical condition within		
	independent	their competence.		
	prescribing by			
	pharmacists			
	Medicines assessment	The pharmacy will help support independent living in groups of vulnerable people, or those with special		
	and compliance	needs, who do not fall within the Disability Discrimination Act 1995 criteria. The aim of the programme is		
	support	to support independent living and help people manage their medicines safely and appropriately.		
Local	Substance Misuse	Needle and syringe services; supervised consumption of medicines to treat addiction, e.g. methadone;		
Authority	Services	Hepatitis testing and Hepatitis B and C vaccination; HIV testing; provision of naloxone to drug users for		
Commissioned use in emergency overdose situations.				
Public Health	Sexual Health Services	Emergency hormonal contraception services; condom distribution; pregnancy testing and advice;		
Services		Chlamydia screening and treatment; other sexual health screening, including syphilis, HIV and		
		gonorrhoea; contraception advice and supply (including oral and long acting reversible contraception).		
	Stop Smoking services	Proactive promotion of smoking cessation through to provision of full NHS stop smoking programmes.		
	NHS Health Checks for	Carrying out a full vascular risk assessment and providing advice and support to help reduce the risk of		
	people aged 40-74	heart disease, strokes, diabetes and obesity.		
	Weight management	Promoting healthy eating and physical activity through to provision of weight management services for		
	services	adults who are overweight or obese.		
	Alcohol misuse	Providing proactive brief interventions and advice on alcohol, with referral to specialist services for		
	services	problem drinkers.		
	Pandemic and	Providing continuity of dispensing of essential medicines, provision of antiviral medicines; flu vaccination		
	seasonal Flu services	services.		

#### 3.3 Dispensing GPs and Controlled Localities

A GP may dispense NHS prescriptions for their own patients who live in a controlled locality, and live more than 1.6 km (1 mile in a direct line) from a pharmacy. Controlled localities are defined as areas which are 'rural in character' and were introduced to improve access for rural patients to pharmaceutical services. There are two GP Practices within the Bradford District that are dispensing GPs; these are based in the controlled localities of Addingham and Haworth. New applications by doctors to dispense are not considered if there is a pharmacy within 1.6km of the premises from which the practice wishes to dispense (Regulation 51).

#### 3.4 Distance Selling

Distance selling pharmacies (e.g. internet pharmacies) are pharmacies who do not provide essential services at their premises. A distance selling pharmacist will receive a prescription via post or online and dispense it the next day. A distance selling pharmacist may provide advanced or enhanced services at their premises as long as they do not receive essential service at the same time.

#### 3.5 Dispensing appliance contractors

Dispensing appliance contractors are a specific subset of NHS pharmaceutical contractors who supply on prescription, appliances such as stoma and incontinence aids, dressings, and bandages. They cannot supply medicines. There is one Dispensing Appliance Contractor in the District.

#### 3.6 Healthy living pharmacies

'A Healthy Living Pharmacy (HLP) is one which has been recognised as consistently demonstrating a healthy living ethos and a proactive approach to health and health improvement. The pharmacy must also show that it meets set quality criteria, have appointed one or more qualified Health Champion(s) and has at least one member of the pharmacy team has undergone leadership training. Pharmacies in England that meet these criteria are awarded the HLP quality mark' (National Pharmacy Association).

There has been significant growth in the number of Healthy Living Pharmacies (HLPs) since the last PNA. Currently there are 112 HLPs in the District.

#### 3.7 Community Pharmacy Forward View

The Community Pharmacy Forward View was published by PSNC and Pharmacy Voice with the support of the RPS English Pharmacy Board, in August 2016. It sets out the sectors ambitions to radically enhance and expand the personalised care, support, and wellbeing services, that community pharmacies provide. In the scenarios outlined in the document, pharmacy teams would be fully integrated with other local health and care services, in order to improve quality and access for patients, increase NHS efficiency, and produce better health outcomes for all. The Community Pharmacy Forward View sets out the organisations' shared ambition for the sector, which focuses on three key roles for the community pharmacy of the future:

- 1. As the facilitator of personalised care for people with long-term conditions
- 2. As the trusted, convenient first port of call for episodic healthcare advice and treatment
- 3. As the neighbourhood health and wellbeing hub.

Within the current context for community pharmacy there must be a recognition of the Community Pharmacy Forward View and that this sets out the direction going forward.

# 4. Understanding the population of Bradford District

#### 4.1 Population of Bradford District

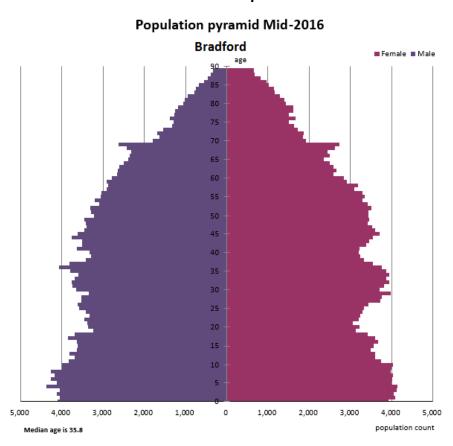
#### 4.1.1 Overall Bradford

The current resident population for Bradford is 534,279. Bradford has a higher than average young population (0-19 year olds) when compared to the overall national picture; this is more evident among the South Asian population. Over the next 10 years (2016-2026), the population of Bradford is projected to increase by 23,200 (+4.3%). This increase is lower than the average for England, where the population is expected to increase by 7.1%. The population projections are based on the 2014 mid-year population estimates from the Office of National Statistics (ONS), which uses a variety of sources to calculate the projections including; national population projections, registration of births and deaths, long term migration data from the International Passenger Survey (IPS), and Asylum seeker data from the home office.

Bradford is a university city which affects the influx (both on a daily and term-time basis) of predominantly young people. The needs of the university population are met by the current pharmaceutical provision.

Consistent with other patterns of health care use, a high proportion of service users for pharmacies would be expected from the younger child population (i.e. parents and families) as well as the older population. The current population of 0-9 year olds in Bradford is 81,852; this is projected to decrease by 3,200 (-4.0%) over the next ten years (2014-2024). The current population of 65 year olds in Bradford is 74,900, which is projected to increase by 16,400 (+21.9%) over the next ten years.

Figure 1: Age structure of the Bradford District Population



The population has a diverse ethnic base with 36% of the Bradford District population from Black and Minority Ethnic groups. 22% of the population of Bradford District are of South Asian origin, which are predominantly people of Pakistani heritage. A further 14% are from other non-white British nationalities.

The average life expectancy for females in Bradford is 81.3; this compares to 77.6 in males. This is lower than the national average of 83.1 and 79.5 respectively. Life expectancy varies across the District with those living in the least deprived areas living on average 9 years longer than those living in the most deprived areas.

Although, like most other parts of the country, life expectancy in Bradford District is increasing, people in Bradford District are living longer in poorer health. The healthy life expectancy for females is 60.5 years, which means on average females are spending 20.8 years of their lives in poor health. For males the average healthy life expectancy is 62.9, which means that on average males in Bradford spend 14.7 years in poor health.

Bradford as a whole is a relatively deprived district which faces unusual challenges relating to deprivation. Bradford is the second most deprived local authority in Yorkshire, with Hull being the most deprived. 34.1% of people in Bradford live in areas which are in the most deprived 10% areas of England.

Severe deprivation affects many different areas; parts of City, Eccleshill, Great Horton, Keighley Central, Little Horton, Manningham, and Tong wards are all amongst the most deprived 10% of areas in England. Some deprived areas have become less so since Indices of Multiple Deprivation (IMD) 2010. This is particularly the case in Tong and Little Horton wards.

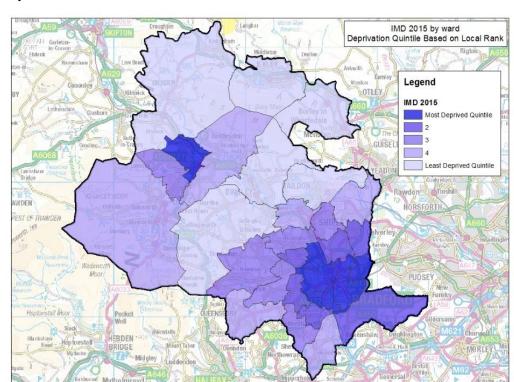


Figure 2: Deprivation in Bradford District

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The rate of teenage conception among those under 18 (per 1,000 females aged 15-17) in Bradford (22.3) is higher than the England average (20.8) but lower than the regional average (24.3). The proportion of under 18 conceptions leading to an abortion in Bradford was 44% in 2015; this is

Public Health Analysis Team, Bradford

lower than the national average of 51.2% but slightly higher than the regional average of 43.4%. The estimated conception rate of those aged 15-17 (conceptions per 1,000 women aged 15 to 17) in 2013-15 was highest in the Eccleshill ward and lowest in Ilkley, with high rates among the wards of Tong, Wyke, and Windhill and Wrose.

Estimated smoking prevalence (18+) in Bradford District is 22.2% (Annual Population Survey 2016); prevalence is higher in the Bradford District than both regional (17.7%) and national (15.5%) averages. Smoking prevalence rates increase among those who are in routine and manual occupations was 35.9%.

The proportion of adults in the Bradford District, estimated to be overweight or obese was 67.9% (Public Health Outcomes Framework, 2013-15); this is higher than the national average (64.8%) but similar to the regional average (67.4%) Excess weight in children aged 10 and 11 in the Bradford District is higher than the national and regional averages at 36.4% compared to 34.2% in England and 34.6% in Yorkshire and the Humber.

#### 4.1.2 Local area profiles

Recognising the variation in health and care needs across the district, area profiles are routinely published by the local authority. The area profiles show the key characteristics of the main localities in the Bradford District. The profiles include a range of demographic information and outline the key health issues pertinent to those local areas. Detailed local area profiles have been provided in Appendix 4. There are five recognised areas in Bradford District, made up of 6 wards in each area (30 wards in total) - see Table 2.

Table 2: list of areas and wards

Area	Ward		
Bradford East	Bolton and Undercliffe		
	Bowling and Barkerend		
	Bradford Moor		
	Eccleshill		
	Idle and Thackley		
	Little Horton		
Bradford South	Great Horton		
	Queensbury		
	Royds		
	Tong		
	Wibsey		
	Wyke		
Bradford West	City		
	Clayton and Fairweather Green		
	Heaton		
	Manningham		
	Thornton and Allerton		
	Toller		

Keighley	Craven
	Ilkley
	Keighley Central
	Keighley East
	Keighley West
	Worth Valley
Shipley	Baildon
	Bingley
	Bingley Rural
	Shipley
	Wharfedale
	Windhill and Wrose

#### 4.2 Health and Care Services in Bradford District.

Table 3 outlines the range of health and care services in the Bradford District. There are 80 general practices, two acute hospital trusts, 68 dental practices and 150 pharmacies, in addition to a number of community services offered from a range of locations across the District.

Table 3: Provision of health care in Bradford<sup>2</sup>

Service Type	Number of services/ Name	Address
General	As at November 2017 there are 80 medical contracts (some practices have more than one site, and	
Practice	some premises house more than one practice). There are two planned closures for April 2018 which	
	will leave 78. There are currently 2 dispensing GP practices in the Bradford District sited at Addingham	
	and Haworth.	
Extended GP	There are currently 2 extended GP access hubs. 1 in Bradford and 1 in Keighley.	<u>Bradford</u>
Access		Picton Medical Centre
	Bradford City CCG and Bradford District CCG	Westbourne Green Healthcare
	From June 2017, Bradford City CCG and Bradford District CCG have been offering extended hours to	Centre
	25% of their registered population, as set out in the GP Forward View. Currently this involves 23	Manningham
	practices and delivers additional hours (6.30pm - 9.30pm) Monday to Friday out of a hub at	Bradford
	Westbourne Green. From the 1st December 2017 this will expand to also include a Saturday and	BD8 8RA
	Sunday offer (which will mean the weekday hours are amended). Appointments with GPs,	
	physiotherapists and Voluntary and Community Sector (VCS) services are available as part of this	<u>Keighley</u>
	offer and include both pre-bookable and on the day appointments.	Farfield Group Practice
		West Lane,
	Airedale, Wharfedale and Craven CCG	Keighley,
	From June 2017, Airedale, Wharfedale and Craven CCG have offered extended access to 40% of the	West Yorkshire,
	registered population. This currently includes Farfield, Holycroft, North Street, Ling House, Kilmeny	BD21 2LD
	and Haworth surgeries; these are all Keighley based practices. The additional hours offered by this	
	hub approach cover 6:30pm – 8pm, and is delivered Monday to Friday.	
	Appointments available currently include:	
	- Face to Face GP	
	- Face to Face Advanced Nurse Practitioner	

<sup>&</sup>lt;sup>2</sup> This is not a comprehensive list of services and locations as some providers operate out of a range of locations, VCS also provide care and support services.

	- Telephone Appointments with Practice Nurses	
	- Telephone Appointments with Pharmacists	
	These are a combination of pre-bookable and on the day appointments.	
Other health	Airedale Hospital NHS Foundation Trust	Airedale Hospital, Skipton
care		Road, Steeton, BD20 6TD.
providers	Bradford Teaching Hospitals NHS Foundation Trust	Bradford Royal Infirmary,
		Duckworth Lane, Bradford
		BD9 6RJ & St Luke's Hospital,
		Little Horton Lane, Bradford,
		BD5 0NA
	Bradford District Care Foundation Trust	New Mill, Victoria Road,
		Saltaire, BD18 3LD
	Eccleshill Independent Sector Treatment Centre	450 Harrogate road, Eccleshill,
		Bradford BD10 0EP
	The Yorkshire Clinic	Bradford Road, Bingley BD16
		1TW
	Westbourne Green Community Health Care Centre	50 Heaton Road Bradford BD8
		8RA
	Westwood Park Diagnostic Treatment Centre	Swift Drive, off Cooper Lane,
		Bradford BD6 3NL
	Yorkshire Eye Hospital	Optegra Yorkshire Eye
		Hospital
		937 Harrogate Road,
		Apperley Bridge,
		Bradford,
		West Yorkshire,
		BD10 0RD

	Locala Sexual Health Services	Howard House
		2nd Floor Howard House,
		Bank Street,
		Bradford,
		BD1 1EE.
	Local Care Direct (GP out of hours)	
Dental	There are 58 dental contracts currently in place, with an additional 3 orthodontic only contracts. The	
Services	district also has an emergency dental service that offers emergency appointments on a daily basis for	
	those not registered with a dentist currently, as well as offering emergency provision at bank holidays	
	and weekends.	
Optometry	There are currently 57 mandatory contracts (shop based) and 36 additional contracts (that allow	
Services	practitioners to undertake sight tests within patient homes) in place as of November 2017.	
Pharmacies	There are currently 150 pharmacies within Bradford District. 14 of these are Distance selling	
	pharmacies, and 31 are 100 hour pharmacies.	

# 5. Community Pharmacy Services in Bradford

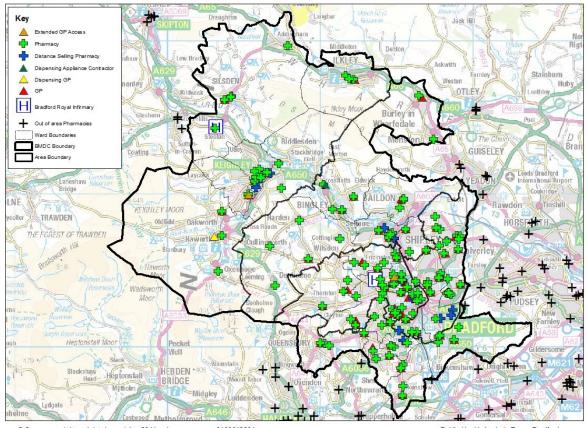
#### **5.1 Current Provision**

There are currently 150 pharmacies within Bradford District, 14 of which are Distance selling and do not provide essential services on their premises. There are 31 100 hour pharmacies. A breakdown of current provision by area is provided in Table 4.

Table 4: Number of Pharmacies per 100,000 population

Area	Number of	Number of	Number of	Pharmacies	Estimated
	Pharmacies	Distance selling	100 hour	per 100,000	Population
	(Excl. distance	Pharmacies	pharmacies	population	Served Per
	selling)				Pharmacy
Bradford East	28	4	6	24	4,177
Bradford South	23	1	5	22	4,522
Bradford West	37	3	11	32	3,150
Keighley	24	4	5	25	4,072
Shipley	24	2	4	25	3,998
Bradford	136	14	31	26	3,906
Yorkshire and	1,275	-	-	24	4,228
Humber					
England	11,688	-	-	21	4,687

Figure 3: Map of premises at which pharmaceutical services are provided in Bradford District



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Public Health Analysis Team, Bradford

### 5.2 Changes in provision since previous PNA

Since the previous PNA was published there have been a number of changes in terms of the advanced and enhanced services provided by local pharmacies. These changes are summarised in Table 5.

**Table 5: Changes in provision** 

Advanced/ Enhanced Service	Number of pharmacies currently providing	Number of pharmacies providing in the previous PNA	Reason for change
MAR Charts	0	46	MAR charts were commissioned by the then Primary Care Trust as an initiative to stop dosette boxes. This was used by very few people and, therefore the documentation ran out.
Palliative Care	11	12	This service is currently in the process of being reviewed and updated across West Yorkshire to ensure there is adequate coverage in each area; there are currently 11 pharmacies across the Bradford District that are providing this service.
Pharmacy First	0	67	Bradford City and Districts CCG decommissioned this service to support the self-care agenda within the CCGs. AWC CCG ceased commissioning this service at the end of March 2018. 19 of the 78 pharmacies which responded to the questionnaire said that they provide this service, with a further 50 stating they are willing to provide if they were commissioned to do so.
Medicine Use Review (MUR)	128	106	
Appliance Use Review (AUR)	14	-	The number of pharmacies providing this service was not specified in the previous PNA. This was because any or all pharmacies can provide this service. Currently, 13 pharmacies are providing this service in Bradford.
Stoma Appliance Customisation (SAC)	97	-	The number of pharmacies providing this service was not specified in the previous PNA. This is because any or all pharmacies can provide this service. There are currently 101 pharmacies providing this service in Bradford.
New Medicine Service (NMS)	127	91	The number of pharmacies who provide this service is not currently recorded. Of the 78 responses to the pharmacy questionnaire 76 are currently providing this

			service and the remaining 2 are intending to provide this service within the next 12 months.
NUMSAS (NHS Urgent Medicine Supply Advanced Service) previously West Yorkshire Pharmacy Urgent Repeat Medicine (PURM) Service.	22	10	The West Yorkshire Urgent Repeat Medicine Service (PURM) was replaced by the Nationally commissioned NHS Urgent Medicine Supply Advanced Service (NUMSAS). This service is a time limited pilot and will be reviewed in early 2018 to determine whether it will be continued to be commissioned.
Stop Smoking Service	21	24	There are currently 21 pharmacies providing stop smoking support in the Bradford District. This is a reduction on the previous 24 pharmacies. If a new pharmacy wishes to provide stop smoking support the decision to commission would be based on 1) areas of need in terms of smoking prevalence; and 2) current access to a quit programme in that area. They would also need to have the capacity to provide a service, and staff would need to undergo the expected training and demonstrate competency.
Emergency Hormonal Contraception (EHC)	0	39	The Community Pharmacy Emergency Contraception service will cease on the 01/04/2018. Emergency contraception is available free of charge from other services including GP practices and Sexual Health Hubs.
EHC Plus (including Chlamydia testing)	0	14	Services including of practices and octual regular rubs.
Needle Exchange	22	43	Community pharmacies provide an important harm reduction intervention, to ensure that high risk individuals are provided with clean injecting equipment, which aims to reduce drug related deaths and blood-borne virus infection. Provision of the Community Pharmacy Needle Exchange programme has recently undergone a review. Pharmacies were invited to submit a bid to provide this service. The successful pharmacies now deliver the service in identified areas of need. There is no process for increasing the number of pharmacies during the lifetime of the needle exchange contract. Any new contract will be advertised following the expiry of the contract and any current or new pharmacy can apply. The current contract expires on 31st July 2018 with an option to extend by 1 year.  In addition to the community pharmacy needle exchange provision there is a

			specialist needle exchange service, which is delivered through the new Substance Misuse Recovery Service in both Bradford and Keighley. This is an enhanced service providing additional harm reduction, interventions, and healthcare assessments, with a view to engaging with individuals and referring them on to structured drug treatment.
Flu immunisation service	102	40	Pharmacies provide a flu vaccination service; this is free of charge to patients who are eligible. Eligibility would depend on whether patients are classed as being in an at risk group, however the service is chargeable to all other patients. This service was previously commissioned locally, and is now nationally commissioned as patients are becoming more aware of the service and more pharmacists are becoming trained. The number of pharmacies providing this service is increasing to meet demand.
Supervised Medication	110	135	There are currently 110 Community Pharmacies across the district providing a supervised medication service. Supervised medication provision is commissioned on the basis of a pharmacy having the facilities and the workforce to provide supervised medication to drug users. The need of this service is based upon the numbers of individuals in structured drug treatment who are issued with a prescription. There is no restriction on pharmacies applying to providing this service, however they would need to meet the criteria set out in the service specification.

# 6. Understanding factors likely to impact on pharmacy provision over the next 3 years

#### 6.1 Future Housing Plans: The Local Plan for the Bradford District

Bradford Council are preparing a new Local Plan which will assess the needs of the population for new homes, jobs, formal and informal green spaces, and services and infrastructure over the period to 2030.

It will provide strategic policies to manage and accommodate change in a sustainable way, encourage the use of brownfield sites, and secure regeneration. It will also identify and allocate land for development as well as identifying and protecting valued open spaces such as playing fields, sports pitches, and allotments.

The Local Plan is being supported by and informed by analysis of service and infrastructure needs in the form of a Local Infrastructure Plan, which has been prepared in consultation with service providers, both within and outside the Council. Once the Local Plan is in place it will allow providers to plan with more certainty and draw down investment where required.

The Local Plan will comprise several documents which are at different stages of completion as follows:

- The Core Strategy, which determines the scale and broad distribution of future development
  across the district, and sets development targets by settlement and sub area. It indicates that
  the district will need to see the provision of 42,100 new homes over the period 2013-30. This
  document does not however identify specific sites. The Core Strategy was adopted by the
  Council on the 18th July 2017.
- A Waste Management Development Plan, which was adopted by the Council on the 17th October 2017;
- Three other plans which will allocate housing development sites, designate greenspace, and identify any sites required for new infrastructure such as roads and schools. These are:
  - The Bradford City Centre Area Action Plan, which will identify land to deliver 3,500 new homes. This plan is nearing completion, and subject to Council approval, could be adopted in early December.
  - The Shipley and Canal Road Corridor Area Action Plan which will identify land to deliver 3,100 new homes. This plan is also nearing completion, and subject to Council approval, could be adopted in early December.
  - The Site Allocations Development Plan, which will identify land for 35,500 new homes.
    This document is in the early stages of preparation and is unlikely to be completed until
    2021. This period will see several stages of consultation and an examination carried out
    by a government appointed Planning Inspector.

Although the sites which will meet the projected needs of the district are yet to be finalised for the majority of the district, the Core Strategy, by setting housing targets for 27 different settlement and sub areas, provides a good indication of the scale and development which is likely to take place over the planned period to 2030.

Given that the sites have yet to be allocated, it is not possible to say at this time how the need for pharmacy services will vary over next three years. This will need to be monitored and assessed as the sites are allocated.

The targets for new housing developments are set out in Table 6 as follows:

**Table 6: Targets for housing developments** 

Regional City of Bradford				
Bradford City Centre	3,500			
Shipley & Canal Rd Corridor	3,100			
Shipley	750			
Bradford North East	4,400			
Bradford South East	6,000			
Bradford South West	5,500			
Bradford North West	4,500			

Airedale				
Keighley	4,500			
Bingley	1,400			
Silsden	1,200			
Steeton with Eastburn	700			
Baildon	350			
Cottingley	200			
East Morton	100			

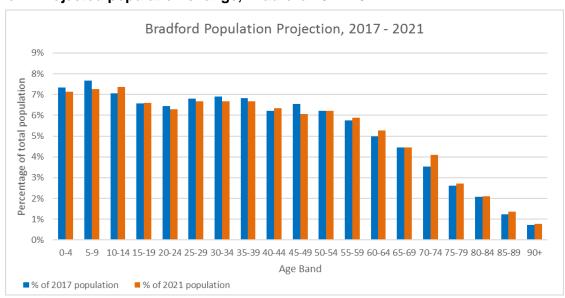
Wharfedale				
llkley	1,000			
Burley in Wharfedale	700			
Menston	600			
Addingham	200			

South Pennine Towns & Villages				
Queensbury	1,000			
Thornton	700			
Cullingworth	350			
Denholme	350			
Harden	100			
Haworth	400			
Oakworth	200			
Oxenhope	100			
Wilsden	200			

#### **6.2 Population Change**

The Bradford population is projected to increase by 1.8% (9,700 people) throughout the life of the PNA. The largest growth is expected among those aged 70 and above, with the largest decrease expected in those aged 45-49.

Figure 4: Projected population change, Bradford 2017-2021



Source: Office of National Statistics

#### Older People

As people get older they begin to experience poorer health. Bradford has a large gap between life expectancy and healthy life expectancy which suggests that people in Bradford are living longer in

poor health. The 2014 population projections indicate that 14.7% of the population in 2017 are aged 65 and over. This is expected to increase to 15.5% by 2021. This growth is a similar rate to that of England and Yorkshire and Humber, however the proportion of those aged 65 and over is less in Bradford with 18.1% in England aged 65 and over in 2017 and 18.5% in Yorkshire and Humber. By 2021 the projections show an expected increase of 6,100 people wo will be aged 65 and over

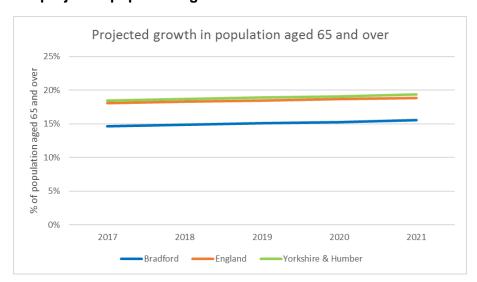


Figure 5: over 65 projected population growth

Despite the predicted growth in the number of people aged over 65, this change is gradual and, therefore unlikely to significantly affect the need for pharmaceutical services over the next three years.

#### 6.3 Extended GP Hours

In addition to the two GP hubs operating extended hours as described in Table 3, the following outlines the future intentions for expanding extended GP provision across the district.

#### Bradford City CCG and Bradford District CCG

From April 2018, this service will expand to cover 50% of our population with 100% coverage from October 2018 and will also be delivered via a hub model. The location of these hubs to be determined – there will possibly be an additional 3 hubs, which will have travel criteria linked to these. Once up to 100% coverage, any patient in Bradford will be able to attend any of the hubs – not necessarily their nearest one, but this will be up to the individual patient to choose.

#### Airedale, Wharfedale and Craven CCG

The CCG are currently developing plans towards increasing coverage to 50% of the Airedale, Wharfedale and Craven population by March 2018 as set out in the requirements of the GP Forward View. The CCG are looking to establish where the remaining hub(s) will be located and any technological options that may support hub working. A consultation with patients and public is to be carried out to obtain views regarding weekend opening, particularly towards which services would be most appropriate for delivery in weekend opening.

A number of pharmacies across the District are open beyond 6pm and/or at weekends. There is a good geographical spread of pharmacies operating extending opening hours, as shown on maps 15,16 and 17 in Appendix 7. These are likely to be sufficient to cover any extended GP opening hours, and any additional cover is likely to be met by an existing pharmacy contractor currently on the pharmaceutical list. The situation will, however, remain under review by Public Health and the CCG lead for Medicines Management.

#### **6.4 NHSE Five Year Forward View**

The main points that have come out of the NHSE Five Year Forward View, that have the potential to impact on pharmaceutical services are:

- Focus more on prevention the role of pharmacists in supporting this and the self-care agenda enabling patients to take more control over their health care.
- Integrate community pharmacy services more fully into the NHS increase the number of clinical pharmacists working within GP practices.
- Helping patients get the right care, at the right time, in the right place, and making more appropriate use of primary care services including pharmacists.

#### 6.5 GP Five Year Forward View

The GP Forward View was published on the 1<sup>st</sup> April 2016 and illustrates the vision for the future of GP services. The key elements include:

- Workforce more clinical pharmacists within the GP Practices as set out in the NHSE five year forward view, with 1,500 more proposed nationally.
- Highlights the underutilisation of pharmacists and pharmacy services nationally, and the need to utilise their skills more.
- Current investment of £31 million to pilot 470 clinical pharmacists in over 700 practices to be supplemented by new central investment of £112 million as well as to extend the programme by one pharmacist per 30,000 population, for all practices that are not in the initial pilot – leading to a further 1,500 pharmacists in general practice by 2020.
- Better data sharing across primary care organisations.
- Introduction of a new Pharmacy integration fund which will have a focus on:
  - Improving care and quality;
  - o Improving health and wellbeing; and
  - Closing the finance and efficiency gap.

#### 6.6 Happy, Healthy and at Home

Happy, Healthy and at Home is the place based plan for the future of health and care in Bradford District and Craven. The plan sets out a vision to create a sustainable health and care economy that supports people to be healthy, well and independent. In doing so it recognises the importance of community, and the association between people and the communities they live in in creating health and wellbeing in neighbourhoods. The model of care conveyed in the plan describes neighbourhood health and care services, which will be tailored to meet the needs of people living in neighbourhoods of around 30-50,000 people. They will be delivered through networks such as primary care home communities, which will support extended access to GPs. Networks will also help neighbourhood services work more seamlessly together with hospitals and social care. Community pharmacies are an important part of the move towards locality working, particularly with the increasing focus on self-care and prevention.

#### 6.7 Funding cuts

The government imposed a two-year funding package on community pharmacy, which included a £113 million reduction in funding nationally in 2016/17. This took funding to £2,687 billion for the year with an additional £95 million reduction in 2017/18, which took funding to £2,592 billion. Over the next three years, the cuts could have a potential impact on the following:

- Reduction in staff
- Reduction in pharmacies through consolidation, or through the pharmacies closing due to not being viable to continue.
- Withdrawal in services e.g. prescription delivery for all
- Reduction in stock holding.

# 7. Analysis of Needs

#### 7.1 Analysis of need by area

The analysis of needs is presented in Table 7. Although the analysis is presented at an area level (five constituency areas in the Bradford District), the analysis has been informed by the district wide JSNA available at: <a href="https://jsna.bradford.gov.uk/">https://jsna.bradford.gov.uk/</a> and ward profiles available at: <a href="https://jsna.bradford.gov.uk/">https://jsna.bradford.gov.uk/</a> and ward profiles available at: <a href="https://jsna.bradford.gov.uk/">https://jsna.bradford.gov.uk/</a> profiles available at:

This section considers all of the information presented in the PNA, describing a range of factors which contribute to a need for pharmacy services now and for the life span of this PNA. This has been used together with the results of the public and pharmacy surveys, and the maps describing current service provision, to make an assessment of need for each local area in the District.

Table 7: Analysis of Needs by area

Bradford East	
Area Profile: Population	<ul> <li>The population of Bradford East (based on 2015 ONS midyear population estimates) was 116,943.</li> <li>The proportion of residents who are non-White British (47%) (2011 Census) is higher than the Bradford average (33%).</li> <li>Population density is considerably higher than the Bradford average at 45.9 people per hectare (Bradford average 14.1).</li> <li>Bradford East has a lower life expectancy for both males (75.9) and females (80.4) when compared to the district average (M 77.6 F 81.3). Within Bradford East life expectancy for males is lowest in Bradford Moor (73.2) and highest in Eccleshill (77.3). For Females rates are lowest in Bowling and Barkerend (78.6) and highest in Eccleshill (83.0).</li> </ul>
Employment and Deprivation	<ul> <li>Bradford East is the most deprived area within the Bradford District, with 59% of the LSOAs within the area in the most deprived decile nationally, compared to 32.6% across all Bradford LSOAs.</li> <li>The proportion of the population living in families that are income-deprived in Bradford East (26.3%) is higher than the Bradford average (20.5%).</li> <li>The proportion of people claiming benefits is higher in this area than the Bradford average. The proportion of those of a pensionable age claiming Pension Credit is 24.9% (Bradford Average 17.5%) and those claiming Employment and Support Allowance (ESA) is 8.1% (Bradford average 7.2%) (NOMIS, Feb 2017).</li> <li>Unemployment in Bradford East is also higher than the Bradford average with 2.3% compared with 1.8% claiming Job Seekers Allowance (JSA) (NOMIS, Sept 2017).</li> </ul>
Health Need (See Appendix 5)	The data within the Area Profile (Appendix 5) indicates that excess weight among 4-5 year olds is higher (20.5%) compared to the Bradford average (19.9%), this is more so among 10-11 year olds with 39.3% compared to 35.7%

Planned Development	respiratory disea Bradford Averag • There is potentia before 2030; the determined. It is	ity fase ge. al fo e loo	is higher in Bradford or up to 42,100 new cation of these home	homes in the area es is to be elopments will result
Necessary Services:	Pharmacies		2 (including 4 Distan	ce Selling
Current provision			narmacies).	
	GP surgeries	20	)	
	GP Extended Hours	0		
Necessary Services:	There are no current gaps in the provision of necessary			
Gaps in provision	services in the area of the Health and Wellbeing Board.			
Other Relevant			Currently	Not Currently
Services: Current			Provide	Providing
provision	Medicine Use Reviews		26 Pharmacies	6 Pharmacies
	New Medicine Service		26 Pharmacies	6 Pharmacies
	Stoma Customisation		20 Pharmacies	12 Pharmacies
	Commissioned Services	S		ned services can be
	found in Appendix 6.			
Relevant Services:	There are no current gaps in the provision of other relevant			
Gaps in provision	services in the area of the Health and Wellbeing Board.			
Improvements and	The PNA has not identified any future needs which could not			
Better Access: gaps in	be met by pharmacies currently on the pharmaceutical list			
provision related to	which would form part of its commissioning intentions.			
•	wnich would form part	· Oi		
Market Entry and Exit Regulations	which would form part	. 01		, intentione.

Bradford South		
Area Profile: Population	year population e The proportion of (2011 Census) is Population densi 21.0 people per h Bradford South ha (77.3) and female average (M 77.6) Within Bradford S Tong (75.0) and h	Bradford South (based on 2015 ONS mid- stimates) was 104,012. residents who are non-White British (21%) lower than the Bradford average (33%). ty is higher than the Bradford average at nectare (Bradford average 14.1). as a similar life expectancy for both males es (80.6) when compared to the district F 81.3). South life expectancy for males is lowest in nighest in Wyke (79.4). For Females rates g and Royds (78.6) and highest in Wyke
Employment and Deprivation	<ul> <li>Bradford South is Bradford District, the most deprived across all Bradfor</li> <li>The proportion of income-deprived the Bradford aver</li> <li>The proportion of than the Bradford pensionable age (Bradford Averagand Support Allow 7.2%) (NOMIS, F</li> <li>Unemployment in</li> </ul>	the population living in families that are in Bradford South (22.9%) is higher than rage (20.5%).  people claiming benefits is slightly higher average. The proportion of those of a claiming Pension Credit is 18.8% e 17.5%) and those claiming Employment wance (ESA) is 8.3% (Bradford Average eb 2017).  Bradford South is the same as the with 1.8% claiming Job Seekers
Health Need	excess weight am compared to the I 10-11 year olds is compared to 35.7  Under 75 mortalit respiratory diseas Bradford average	
Planned Development	before 2030; the determined. It is u	for up to 42,100 new homes in the area location of these homes is to be unlikely that these developments will result e need for services within the life of the
Necessary Services: Current provision	Pharmacies  GP surgeries  GP Extended Hours	24 (Including 1 Distance Selling pharmacy) 10
Noncestry Consisses		gans in the provision of pagessary
Necessary Services: Gaps in provision		gaps in the provision of necessary the Health and Wellbeing Board.

Other Relevant		<b>Currently Provide</b>	Not Currently
Services: Current			Providing
provision	Medicine Use Reviews	22 Pharmacies	2 Pharmacies
	New Medicine Service	22 Pharmacies	2 Pharmacies
	Stoma Customisation	17 Pharmacies	7 Pharmacies
	Commissioned Services	A list of commission	ed services can be
		found in Appendix 6.	
Relevant Services:	There are no current ga	ps in the provision	of other relevant
Gaps in provision	services in the area of th	e Health and Wellbei	ing Board.
Improvements and	The PNA has not identif	ied any future need	s which could not
Better Access: gaps in	be met by pharmacies al	ready currently on tl	he pharmaceutical
provision related to	list which would form pa	rt of its commission	ing intentions.
Market Entry and Exit			
Regulations			

Bradford West		
Area Profile: Population	<ul> <li>The population of Bradford West (based on 2015 ONS mid-year population estimates) was 116,556.</li> <li>The proportion of residents who are non-White British (63%) (2011 Census) is almost double than the Bradford average (33%).</li> <li>Population density is higher than the Bradford average at 38.7 people per hectare (Bradford average 14.1).</li> <li>Bradford West has a lower life expectancy for both males (76.0) and females (79.6) when compared to the district everage (M 77.6 F. 84.3).</li> </ul>	
Employment and	<ul> <li>the district average (M 77.6 F 81.3).</li> <li>Within Bradford West life expectancy for both males and females is lowest in Manningham (M 72.3, F 77.0) and highest in Thornton and Allerton (M 77.7, F 81.6).</li> <li>Bradford West is the 2nd most deprived area within</li> </ul>	
Deprivation	<ul> <li>Bradford West is the 2nd most deprived area within the Bradford District, with 47% of the LSOAs within the area in the most deprived decile nationally, compared to 32.6% across all Bradford LSOAs.</li> <li>The proportion of the population living in families that are income-deprived in Bradford West (25.3%) is higher than the Bradford average (20.5%).</li> <li>The proportion of people claiming benefits is higher than the Bradford average. The proportion of those of a pensionable age claiming Pension Credit is 28.1% (Bradford average 17.5%) and those claiming Employment and Support Allowance (ESA) is 7.8% (Bradford average 7.2%) (NOMIS, Feb 2017).</li> <li>Unemployment in Bradford West is also higher than the Bradford average with 2.4% compared with 1.8% (NOMIS, Sept 2017).</li> </ul>	
Health Need	<ul> <li>The data within the Area Profile (Appendix 5) indicates that excess weight among 10-11 year olds is higher than the Bradford average (39.5%) compared to 35.7% across Bradford.</li> <li>Under 75 mortality from cardiovascular disease and respiratory disease is higher in Bradford West than the Bradford Average.</li> </ul>	
Planned Development	There is potential for up to 42,100 new homes in the area before 2030; the location of these homes is to be determined. It is unlikely that these developments will result in a change to the need for services within the life of the PNA.	
Necessary Services: Current Provision	Pharmacies 40 (including 3 Distance Selling pharmacies)  GP surgeries 28  GP Extended Hours 1	

Necessary Services: Gaps in provision	There are no current gaps in the provision of necessary services in the area of the Health and Wellbeing Board.		
Other Relevant Services:		Currently	Not Currently
Current provision		Provide	Providing
	Medicine Use Reviews	39 Pharmacies	1 Pharmacy
	New Medicine Service	38 Pharmacies	2 Pharmacies
	Stoma Customisation	27 Pharmacies	13 Pharmacies
	Commissioned Services	A list of commissioned	
		services can	be found in
		Appendix 6.	
Relevant Services:	There are no current gaps in the provision of other		
Gaps in provision	relevant services in the area of the Health and Wellbeing		
	Board.		
Improvements and Better	The PNA has not identified any future needs which could		
Access: gaps in provision	not be met by pharmacies already currently on the		
related	pharmaceutical list which would form part of its		
to Market Entry and Exit	commissioning intentions.		
Regulations			

Keighley				
Area Profile: Population	population esti  The proportion (2011 Census)  Population der people per hed  Keighley has a and females (8 (M 77.6 F 81.3)  Within Keighle is lowest in Ke Ilkley for Males	The population of Keighley (based on 2015 ONS mid-year population estimates) was 97,716.  The proportion of residents who are non-White British (16% (2011 Census) is half that of the Bradford average (33%).  Population density is lower than the Bradford average at 5.5 people per hectare (Bradford Average 14.1).  Keighley has a higher life expectancy for both males (78.4) and females (82.1) when compared to the district average (M 77.6 F 81.3).  Within Keighley life expectancy for both males and females is lowest in Keighley Central (M 74.4, F 77.4) and highest in Ilkley for Males (82.9) and Worth Valley and Craven for females (84.0).		
Employment and Deprivation	<ul> <li>Keighley is the District, with 90 deprived decile Bradford LSO/IIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIIII</li></ul>	22nd least deprived area within the Bradford % of the LSOAs within the area in the least e nationally, compared to 4.7% across all As.  1 of the population living in families that are ed in Keighley (14.7%) is lower than the age (20.5%).  1 of people claiming benefits is lower than the		
Health Need	<ul> <li>The data within Keighley has a compared with own challenge area than other</li> <li>Under 75 mort</li> </ul>	<ul> <li>The data within the Area Profile (Appendix 5) indicates that Keighley has a higher proportion of people aged 65+ (19%) compared with the Bradford average (14%), which has its own challenges. Conversely, it is a relatively less deprived area than others in the District.</li> <li>Under 75 mortality from cancer, cardiovascular disease and respiratory disease is lower in Keighley than the Bradford</li> </ul>		
Planned Development	There is poten before 2030; the determined. It	There is potential for up to 42,100 new homes in the area before 2030; the location of these homes is to be determined. It is unlikely that these developments will result in a change to the need for services within the life of the		
Necessary Services: Current provision	Pharmacies  GP surgeries	28 (Including 4 Distance Selling pharmacies)  11		
	GP Extended Hours	1		

Necessary Services: Gaps in provision	There are no current gaps in the provision of necessary services in the area of the Health and Wellbeing Board.			
Other Relevant		Currently Provide	Not Currently	
Services: Current			Providing	
provision	Medicine Use Reviews	22 Pharmacies	6 Pharmacies	
	New Medicine Service	22 Pharmacies	6 Pharmacies	
	Stoma Customisation	16 Pharmacies	10 Pharmacies	
	Commissioned Services	A list of commission	ed services can be	
		found in Appendix 6		
Relevant Services:	There are no current gaps in the provision of other relevant			
Gaps in provision	services in the area of the Health and Wellbeing Board.			
Improvements and	The PNA has not identified any future needs which could not			
Better Access: gaps in	be met by pharmacies already currently on the pharmaceutical			
provision related to	list which would form pa	rt of its commission	ing intentions.	
Market Entry and Exit				
Regulations				

Shipley	
Area Profile: Population	<ul> <li>The population of Shipley (based on 2015 ONS midyear population estimates) was 95,949.</li> <li>The proportion of residents who are non-White British (8%) (2011 Census) is considerably lower than that of the Bradford average (33%).</li> <li>Population density is lower than the Bradford average at 8.2 people per hectare (Bradford average 14.1).</li> <li>Shipley has a higher life expectancy for both males (79.6) and females (83.5) when compared to the district average (M 77.6 F 81.3).</li> <li>Within Shipley life expectancy for both males and females is lowest in the Shipley Ward (M 77.9, F 82.2) and highest in Wharfedale for both males and females (M 84.7, F 85.3).</li> </ul>
Employment and Deprivation	<ul> <li>Shipley is the least deprived area within the Bradford District, with 16.5% of the LSOAs within the area in the least deprived decile nationally, compared to 4.7% across all Bradford LSOAs.</li> <li>The proportion of the population living in families that are income-deprived in Shipley (11.0%) is lower than the Bradford average (20.5%).</li> <li>The proportion of people claiming benefits is lower than the Bradford average. The proportion of those of a pensionable age claiming Pension Credit is 10.3% (Bradford average 17.5%) and those claiming Employment and Support Allowance (ESA) is 5.1% (Bradford average 7.2%) (NOMIS, Feb 2017).</li> <li>Unemployment in Shipley is also lower than the Bradford Average with 1.0% compared with 1.8% (NOMIS, Sept 2017).</li> </ul>
Health Need	<ul> <li>The data within the Area Profile (Appendix 5) indicates that Shipley has a higher proportion of people aged 65+ (20%) compared with the Bradford average (14%), which has its own challenges. Conversely, it is a relatively less deprived area than others in the District.</li> <li>It has a lower than average proportion of children aged both 4 to 5 and 10 to 11 who are overweight or obese. Under 75 mortality from cancer, cardiovascular disease and respiratory disease is lower in Shipley than the Bradford average.</li> </ul>
Planned Development	There is potential for up to 42,100 new homes in the area before 2030; the location of these homes is to be determined. It is unlikely that these developments will result in a change to the need for services within the life of the PNA.

Necessary Services: Current	Pharmacies	26 (Including 2 Dista	ance Selling	
Provision		pharmacies)		
	GP surgeries	11		
	GP Extended Hours	0		
Necessary Services: Gaps in	There are no current of	gaps in the provisio	n of necessary	
provision	services in the area of	the Health and Wel	Ibeing Board.	
Other Relevant Services:		Currently	Not Currently	
Current provision		Provide	Providing	
	Medicine Use Reviews	24 Pharmacies	2 Pharmacies	
	New Medicine Service	24 Pharmacies	2 Pharmacies	
	Stoma Customisation	17 Pharmacies	9 Pharmacies	
	Commissioned Services	A list of commis	sioned services	
		can be found in A	Appendix 6.	
Relevant Services:	There are no current	t gaps in the prov	rision of other	
Gaps in provision	relevant services in	the area of the	e Health and	
	Wellbeing Board.			
Improvements and Better	The PNA has not identified any future needs which			
Access: gaps in provision	could not be met by	pharmacies alread	y currently on	
related to Market Entry and Exit	the pharmaceutical list which would form part of its			
Regulations	commissioning intentions.			

#### 7.2 Public Questionnaire

#### 7.2.1 Purpose of the public engagement exercise

As part of the needs analysis it was recognised that in order to fully understand the population health and care needs that could be met through pharmacy services, a community engagement exercise would need to be carried out. Such an exercise was conducted with the purpose of providing people in the Bradford District with the opportunity to tell us what their experience of community pharmacies is, and to identify any health and care needs that could potentially be met through community pharmacies. An online survey, with the option of providing a paper copy for those who could not access the survey, was developed to maximise the response rate. The survey was promoted through social media and could be accessed via the council website.

A total of 135 responses were received. The greatest number of responses were from individuals aged between 55 and 64; 58% of respondents were female, and 81% were White British. This is not representative of the Bradford District population.

#### 7.2.2 Key findings

The following gives a summary of the key findings; full results can be located in Appendix 2. Respondents were asked to rate how important certain aspects of pharmaceutical service provision were to them. Responses showed that the location of the pharmacy was important to respondents with the majority opting for a pharmacy close to either their home or their GP practice. Almost half of respondents (48%) would prefer to visit a pharmacy on a weekday between 9 and 6pm, with a third wishing to visit on a Saturday. There was less of a preference for visiting a pharmacy before 9 am on a weekday and on a Sunday.

The convenience of being able to pick up items on prescription without going back to the pharmacy, and the pharmacy having the things that the individual needs were the aspects that were considered very important for the majority of respondents. Knowledgeable staff was also

considered very important. Offerings which were considered least important b respondents, were home delivery of medication, and early opening times before 9am.

The majority of respondents use a pharmacy for its primary function – to obtain medication on prescription or over the counter. 48% had used the minor ailments service and a further 33% would use this service if it was available. Respondents were less likely to use nor wished to use the pharmacy for 'support to lose weight' and 'emergency contraception'. However, this in part is likely to reflect the demographics of those who completed the survey.

## 7.3 Pharmacy Questionnaire

#### 7.3.1 Purpose of the pharmacy engagement exercise

The purpose of the questionnaire for pharmacies was to map out the current provision against what commissioners had provided, and to scope out future intentions. Out of a possible 150 responses, 78 pharmacies responded, giving a response rate of 52%. The questionnaire was available online with a paper option available for those who could not access the link. The link was distributed by NHS England and a further follow up email to those who hadn't responded was sent by Community Pharmacy West Yorkshire. Bradford East had the highest response rate of 63% with 20 out of the 32 pharmacies responding to the questionnaire. The lowest response rate was in Bradford South with 42%.

Table 8: Pharmacy survey response rate

Area	Number of responses	Number of pharmacies in the area	Response Rate
Bradford East	20	32	63%
Bradford South	10	24	42%
Bradford West	21	40	53%
Keighley	15	28	54%
Shipley	12	26	46%
Grand Total	78	150	52%

## 7.3.2 Key findings

The following gives a summary of the key findings; the full results can be located in Appendix 3. The main findings from the exercise were, that there is a lot of willingness (78%) from pharmacies to provide additional services including weight management services. 78% of pharmacies had staff members who spoke an additional language to English; the greatest proportion of which, spoke Urdu and Punjabi.

## 8. Conclusions

- The PNA, having regard to likely changes to the number of people requiring pharmaceutical services, the demography of the area, and the health and wellbeing of people in the District, has not identified any future needs which are not already met by providers currently on the pharmaceutical list.
- Pharmacies appear to be located in areas of greatest need, as determined by population density, deprivation and identified health needs.
- There are no gaps in necessary provision, in accordance with the regulations in an area.
- There are no gaps in provision to suggest more services in the area would result in better
  access to pharmaceutical services. This is supported by the public engagement exercise in
  which 91% of respondents said that they can get to a pharmacy of their choice when they
  want to
- A range of additional/enhanced services are provided; these appear to be based on population need.
- Population growth is unlikely to influence the need for pharmacy services over the next 3 years to the extent that new services would need to be commissioned.
- There are, however, likely to be changes to GP extended access schemes. There is a good geographical spread of pharmacies operating extending opening hours. These are likely to be sufficient to cover any extended GP opening hours, and any additional cover is likely to be met by an existing pharmacy contractor currently on the pharmaceutical list. The situation will, however, remain under review by Public Health and the CCG lead for Medicines Management.

## **Appendices**

## 1. Pharmaceutical Needs Assessment (PNA) Steering Group Terms of Reference



# Department of Health & Wellbeing Pharmaceutical Needs Assessment (PNA) Steering Group Terms of Reference

#### Context / Background

If a person wants to provide NHS pharmaceutical services, they are required to apply to the NHS to be included on a pharmaceutical list. Pharmaceutical lists are compiled and held by NHS England. This is commonly known as the NHS "market entry" system.

Under the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations ("the 2013 Regulations"), a person who wishes to provide NHS pharmaceutical services must generally apply to NHS England to be included on a relevant list by proving they are able to meet a pharmaceutical need as set out in the relevant PNA.

The Health and Social Care Act 2012 established Health and Wellbeing Boards (HWBBs). The Act also transferred responsibility to develop and update PNAs from PCTs to HWBBs. Responsibility for using PNAs as the basis for determining market entry to a pharmaceutical list transferred from PCTs to NHS England from 01 April 2013.

The NHS Act 2006 (the "2006" Act), amended by the Health and Social Care Act 2012, sets out the requirements for HWBBs to develop and update PNAs and gives the Department of Health (DH) powers to make Regulations.

#### 128A Pharmaceutical needs assessments

- (1) Each Health and Wellbeing Board must in accordance with regulations:
  - (a) assess needs for pharmaceutical services in its area, and
  - (b) publish a statement of its first assessment and of any revised assessment.
- (2) The regulations must make provision:
  - (a) as to information which must be contained in a statement;
  - (b) as to the extent to which an assessment must take account of likely future needs;
  - (c) specifying the date by which a Health and Wellbeing Board must publish the statement of its first assessment;
  - (d) as to the circumstances in which a Health and Wellbeing Board must make a new assessment.

- (3) The regulations may in particular make provision:
  - (a) as to the pharmaceutical services to which an assessment must relate;
  - (b) requiring a Health and Wellbeing Board to consult specified persons about specified matters when making an assessment;
  - (c) as to the manner in which an assessment is to be made;
  - (d) as to matters to which a Health and Wellbeing Board must have regard when making an assessment.

#### 1. Purpose

The purpose of the Pharmaceutical Needs Assessment Steering Group is to direct and oversee the production of, and consultation on, the Bradford and Airedale Pharmaceutical Needs Assessment (PNA), on behalf of the Health and Wellbeing Board. The PNA must be published by 01 April 2018.

#### 2. Responsibilities

The primary role of the group is to oversee the publication of an evidence based and up to date Pharmaceutical Needs Assessment, building on expertise from across the local healthcare community. Specifically, the Group will

- Coordinate the PNA in line with current legislation and within the required timescales;
- Agree the statement of the need for pharmaceutical services in Bradford and Airedale;
- Agree and oversee the process for assessing the current provision of pharmaceutical services by pharmacies, appliance contractors and dispensing practices within Bradford and Airedale (and neighbouring areas
- Ensure that accurate maps identifying the premises where services are provided are produced;
- Oversee the consultation ensuring that this meets the requirements set out in the Regulations;
- Consider and act upon formal responses received during the formal consultation process, making appropriate amendments to the PNA;
- Develop and approve a consultation report as required by the Regulations and ensure that this is included within the final PNA;
- Submit the final PNA to the Health & Wellbeing Board for approval prior to publication.

## 3. Membership

Membership of the Group shall be:

- Public Health Consultant
- Public Health Analyst
- Local Pharmaceutical Committee representative
- CCG representative(s) with responsibility for primary care and medicines management
- NHS England Pharmacy Contracting representative and managerial representative
- Other representatives as required

A deputy may be used where the named member of the Group is unable to attend.

Other staff members may be invited to attend meetings for the purpose of providing advice and/or clarification to the Group.

## 4. Quoracy

A meeting of the Group shall be regarded as quorate provided that a representative from the local authority, CCG and LPC is present.

## 5. Frequency of Meetings

The Group will meet bi-monthly at a minimum. Wherever possible business will be conducted virtually to facilitate communication and maximise involvement of stakeholders.

The PNA Steering Group will be a time-limited group, established for the purpose of developing the 2018-2021 PNA. The Steering Group will be disbanded when the PNA has been published.

## 6. Accountability

The Group will be accountable to the Health and Wellbeing Board. The Health and Wellbeing Board will sign off the 2018-2021 PNA.

Terms of Reference agreed 18/10/2017

#### 2. Analysis of findings from Public Engagement Questionnaire

#### **Pharmaceutical Needs Assessment- Public Questionnaire**

#### Purpose of the public engagement exercise

As part of the needs analysis it was recognised that in order to fully understand the population health and care needs that could be met through pharmacy services, a community engagement exercise would need to be carried out. Such an exercise was conducted with the purpose of providing people in Bradford District the opportunity to tell us what their experience of community pharmacies is, and to identify any health and care needs that could potentially be met through community pharmacies. An online survey, with the option of providing a paper copy for those who could not access the survey, was developed to maximise the response rate. The survey was promoted through social media and could be accessed via the council website.

135 responses were received. The greatest number of responses was from individuals aged between 55 and 64; 58% of respondents were female, and 81% were White British. This is not representative of the Bradford District population.

## **Key findings**

Respondents were asked to rate how important certain aspects of pharmaceutical service provision were to them. Responses showed that location of the pharmacy was important to respondents with the majority opting for a pharmacy close to either their home or their GP practice. Almost half of respondents (48%) would prefer to visit a pharmacy on a weekday between 9 and 6pm, with a third wishing to visit on a Saturday. There was less of a preference for visiting a pharmacy before 9 am on a weekday and on a Sunday.

The convenience of being able to pick up items on prescription without going back to the pharmacy, and the pharmacy having the things that the individual needs are the aspects which were considered very important for the majority of respondents. Knowledgeable staff was also considered very important. Aspects which were considered least important were home delivery of medication, and early opening times before 9 am.

The majority of respondents use a pharmacy for its primary function – to obtain medication on prescription or over the counter. 48% had used the minor ailments service and a further 33% would use this service if it was available. Respondents were less likely to use nor wished to use the pharmacy for 'support to lose weight' and 'emergency contraception'. However, this in part is likely to reflect the demographics of those who completed the survey.

#### Response rates and coverage

135 responses were received, due to short timescales to collect the information the questionnaire was available to complete online. With the option of providing a paper copy if required. The questionnaire was promoted through the council website and social media including Facebook and twitter

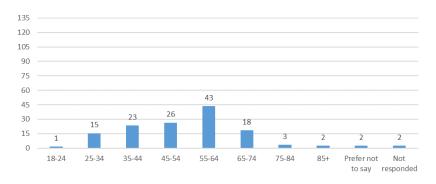
The questionnaire collected the following factual data about the respondents:

- Age
- Disability
- Gender
- Ethnicity

- Religion
- Sexual Orientation
- Marital Status

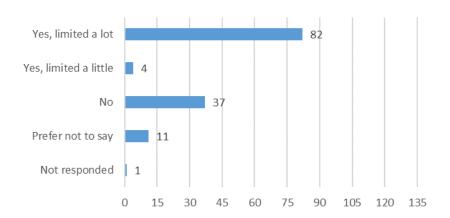
Age

## Please state your age category



## Disability

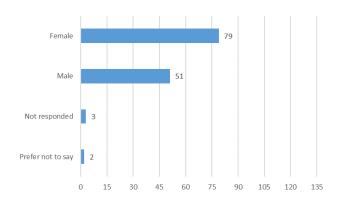
Does your health or disability prevent you from doing things you want to, need to or have to? (Your disability or health issue includes one which has lasted, or is expected to last, at least 12 months, and includes problems relating to old age.)



If Yes, which of the following options best describes you Physical Disability (including mobility difficulties)	Number of responses
Physical Disability (including mobility difficulties)	23
Other substantial and long term condition	16
Other	10
Mental ill Health	9
Visual impairment	3
Prefer not to say	2
Learning disabilities	1
Autism Spectrum Conditions	1
Hearing impairment	1
Deaf BSL user	0
Speech impairment	0
Learning difficulties e.g. Dyslexia	0

#### Gender

## Which of the following options best describes your gender identity?



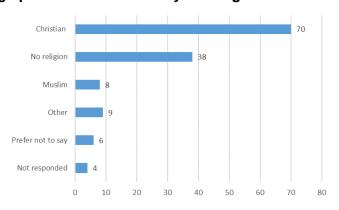
## **Ethnicity**

## Which of the following options best describes your race, ethnic or cultural origin?

81% of respondents identified as 'English/Welsh/Scottish/Northern Irish/British' with a further 6% identifying as 'Pakistani.' the remaining 13% identified as various different ethnicities.

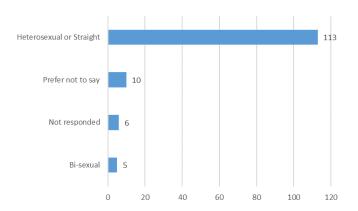
## Religion

## Which of the following options best describes your religion or belief?



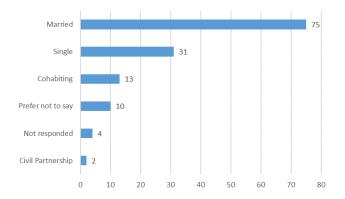
#### Sexual Orientation

## Which of the following options best describes your sexual orientation?



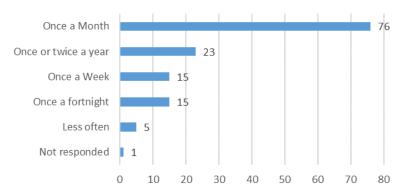
#### Marital Status

## Which of the following options best describes your relationship status?

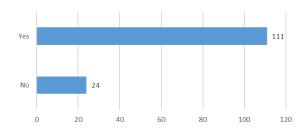


## Responses by question

## How often do you use a Pharmacy?

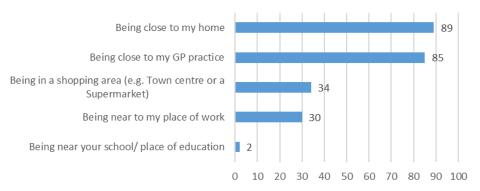


## Do you tend to use the same Pharmacy?



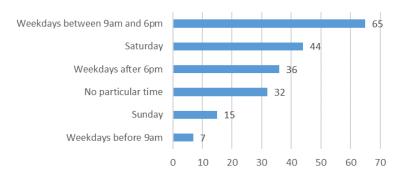
## What is important to you about the location of a Pharmacy?

the majority of respondents would prefer a pharmacy which was either close to their home or their GP practice.

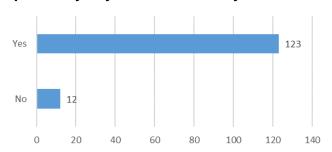


#### When do you prefer to visit a pharmacy?

Almost half of respondents (48%) would prefer to visit a pharmacy on a weekday between 9 and 6, with a third wishing to visit on a Saturday. There was less of a preference for visiting a pharmacy before 9am on a weekday and on a Sunday.



## Are you able to get to a pharmacy of your choice when you need to?



#### If not, why not?

Opening hours are the main reason why people cannot access the pharmacy of their choice when they want to.

If not, why not?
Closes early -
It's closed at weekends
Local chemists are closed out of hours
Long commute means pharmacy is closed near to GP.
Not always one near by
Not open outside 9-5
Pharmacy of my choice shut when I finish work and get home
Restricted Opening Hours
They close at 7 p.m.
Work commitments or closing hours

## In your opinion, how important are the following aspects of pharmacy services?

Convenience of being able to pick up items of prescription without going back to the pharmacy and the pharmacy having the things that the individual needs are the aspects which are considered very important for the majority of respondents, knowledgeable staff is also considered very important. Aspects which were considered least important was home delivery of medication and early opening times before 9am.

In your opinion, how important are the following aspects of pharmacy services?	Very important	Important	Not important	Very Unimportant
Early opening times (before 9am)	43	36	40	7
Late opening times (after 6pm)	64	50	15	4
Location	86	44	2	1
Knowledgeable staff	110	23	0	1
Friendly staff	83	46	1	1
Short waiting times	62	56	13	1
Private areas to speak to the pharmacist	66	46	20	1
The pharmacist taking time to listen to you	89	37	6	1
The pharmacy having the things you need	110	21	0	1
Being able to pick up the items on your prescription without going				
back to your GP surgery	113	14	4	3
Home delivery of your medication	28	26	57	16

## Which of the following pharmacy services have you used, or would you use if they were available?

Which of the following pharmacy services have you	Currently use/ Have	Would use if	Not
used, or would you use if they were available?	use/ nave used	available	responded
Prescription dispensing (e.g. handing in a prescription	aroou	available	Тоброниси
and receiving medication)	128	4	3
Purchasing over-the-counter medicines (e.g.			
paracetamol)	128	2	5
Collection services (e.g. Being able to pick up the items			
on your prescription without going back to your GP			
surgery)	102	22	11
Delivery Service (Where medicines are delivered to your			
home)	42	35	58
Health and medicines advice (e.g. Medicine use reviews			
for long term conditions, inhaler techniques)	75	25	35
Minor Ailment Service/ Pharmacy first	65	44	26
Health Checks (e.g. cholesterol, blood pressure,			
diabetes)	26	56	53
Vaccinations (e.g. flu/ travel vaccinations)	31	43	61
Support to Stop Smoking	13	22	100
Testing for Sexually Transmitted Infections	6	25	104
Emergency contraception	15	20	100
Needle Exchange Service	8	13	114
Support to lose weight	9	35	91
Supervised administration of Opiate substitute medicine			
(e.g. Methadone)	5	16	114

Is there anything else you would like to say about your experience of pharmacy services in your area, or any other service you would like from your Pharmacist that isn't currently being provided? If so, tell us here:

This was an 'open' question which allowed respondents to express themselves freely, rather than to select from a number of options. The responses which were received were coded into themes. Many responses could be categorised into more than one theme. For instance, a comment such as "Found it difficult to get my prescription as it is not always in stock, it was easier when the pharmacist could order the repeat prescription from the doctors then they could ensure it was in stock before I collected it" would be coded as both 'Stock availability' and 'Change in repeat prescriptions'. The following table illustrates the most common themes, in descending order of recurrence.

Theme	Number of occurrences
Praise	19
Stock availability	11
Change in repeat prescriptions	5
Negative experience	4
Replacement drugs/ change in manufacturer	4
EPS praise	3
Minor ailments	3
Opening hours/ accessibility	3

The majority of responses were to highlight a positive experience and to praise the service they receive from their GP. There were concerns over the future of services and the importance of local pharmacies. To reiterate the purpose of the PNA is to ensure that there are adequate services for the population, which includes location of services.

3 respondents praised the EPS service where they can order prescriptions online which are then delivered to the GP. However, there were some concerns that if you did not have access to a computer or a device that enabled you to go online then you would have to call into the GP practice – for those who have a disability or are elderly, this may not be very easy.

The main concerns were around the changes to the repeat prescription service from pharmacies and the lack of availability of stock, which often resulted in them having to return at a later time or being given a different brand than usual, which may have resulted in side effects. Unfortunately, these concerns are not in the scope of the PNA, however responses will be shared with key stakeholders.

## 3. Responses from the Pharmacy Questionnaire

#### **Pharmacy Questionnaire**

#### Purpose of the pharmacy engagement exercise

The purpose of the questionnaire for pharmacies, was to map out the current provision against what commissioners had provided, and to scope out future intentions. The main findings from the exercise were that there is a lot of willingness from pharmacies to provide enhanced services if they were commissioned to do so, in particular Obesity management, which 78% of responses showing a willingness to provide. 78% of pharmacies had staff members who spoke an additional language to English; the greatest proportion of these spoke Urdu and Punjabi.

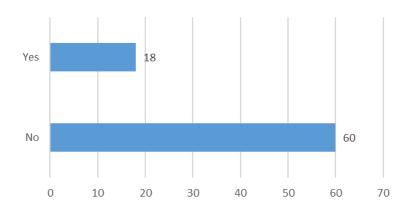
#### Response Rate

Out of a possible 150 responses, 78 pharmacies responded giving a response rate of 52%. The questionnaire was available online with a paper option available for those who could not access the link. The link was distributed by NHS England and a further follow up email to those who hadn't responded was sent by Community Pharmacy West Yorkshire. Bradford East had the greatest response rate of 63%, with 20 out of the 32 pharmacies responding to the questionnaire. The lowest response rate was in Bradford South with 42%.

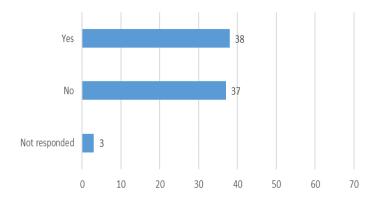
Area	Number of responses	Number of pharmacies in the area	Response Rate
Bradford East	20	32	63%
Bradford South	10	24	42%
Bradford West	21	40	53%
Keighley	15	28	54%
Shipley	12	26	46%
Grand Total	78	150	52%

#### Responses by question

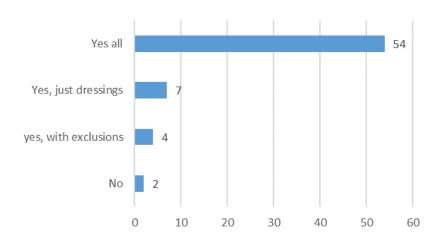
#### Is this a 100-hour Pharmacy?



## Does this pharmacy hold a Local Pharmaceutical Services (LPS) contract?



## Does the Pharmacy dispense Appliances?



## **Core Opening Hours**

The core opening hours were checked against what was recorded on NHS choices and amendments were made where necessary. Opening hours can be found in Appendix 5.

Advanced, Enhanced and Locally Commissioned Services

## Does the Pharmacy Provide the following services?

Advanced Service	Yes	Intending to begin within next 12 months	No - not intending to provide	Not responded
Medicine Use Review service	76	2	0	0
New Medicine Service	76	2	0	0
Appliance Use Review Service	18	11	43	6
Stoma Appliance Customisation service	10	8	52	8
Flu Vaccination Service	63	10	4	1
NHS Urgent Medicine Supply Advanced Service	26	20	29	3

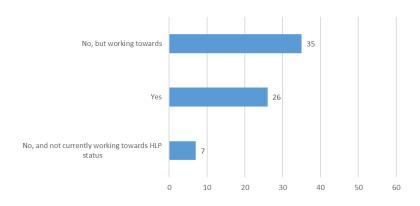
Enhanced Services	Currently providing	Willing to provide if commissioned	Not able or willing to provide	Not responded
Home Delivery Service (not appliances)	61	12	5	0
Supervised administration Service	57	10	10	1
Medicine Review Service	48	25	5	0
Medicines Use Review Plus/ Medicines Optimisation Service	25	47	6	0
Emergency Contraception Service	24	46	8	0
Minor Ailment Scheme/ Pharmacy First	19	50	9	0
Medicines Assessment and Compliance Support Service	14	49	11	4
Stop Smoking Service	14	54	10	0
Care Home Service	12	46	20	0
Needle and Syringe Exchange Service	10	39	29	0
Language Access Service	8	44	23	3
Out of Hours Services	7	33	36	2
On Demand Availability of Specialist Drugs Service	5	45	27	1
Gluten Free Food Supply Service (i.e. not via FP10)	5	53	20	0
NHS Health Checks	5	60	12	1
Chlamydia Testing Service	4	51	22	1
Contraceptive service (not EC)	4	59	15	0
Chlamydia Treatment Service	2	54	22	0
Prescriber Support Service	2	54	20	2
Anticoagulant Monitoring Service	1	55	22	0
Obesity Management (Adults and Children)	1	61	16	0
Phlebotomy Service	0	42	35	1
Independent Prescribing Service	0	54	24	0
Anti- viral Distribution Service	0	55	22	1
Not Dispensed Scheme	0	55	22	1

Disease Specific Medicines Management Service:	Not able or willing to provide	Willing to provide if commissioned	Not responded
Alzheimer's/dementia	9	68	1
Asthma	10	68	0
Allergies	10	67	1
COPD	11	67	0
Diabetes Type 1	12	66	0
Depression	12	65	1
Diabetes Type 2	12	65	1
Hypertension	12	65	1
Epilepsy	14	63	1
Heart Failure	15	62	1
CHD	15	61	2
Parkinson's Disease	13	61	4

Screening and Vaccinations Service:	Currently providing (additional charge to patients)	Currently providing (free of charge)	Willing to provide if commissioned	Not able or willing to provide	Not Responded
Seasonal Influenza					
Vaccination Service	32	24	16	6	0
Travel Vaccinations	18	2	42	15	1
Diabetes	8	16	45	9	0
Cholesterol	7	3	56	12	0
Hepatitis	7	2	47	21	1
Hepatitis (at risk workers or					
patients)	7	2	47	21	1
Childhood Vaccinations	3	2	48	22	3
HPV	2	2	48	22	4
Alcohol	0	2	61	13	2
Gonorrhoea	0	2	55	19	2
HbA1C	0	2	57	17	2
HIV	0	2	53	21	2

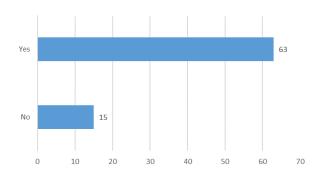
## **Healthy Living Pharmacies (HLP)**

## Has your pharmacy achieved HLP Status?

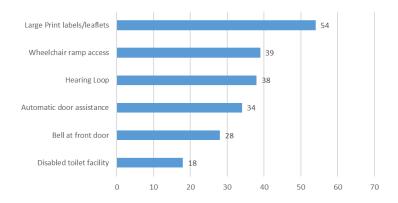


## Accessibility

## Is the entrance to the pharmacy accessible for wheelchair users?

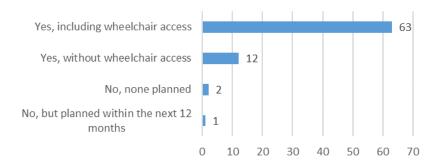


Do you have any of the following facilities in the pharmacy to support people with disabilities?

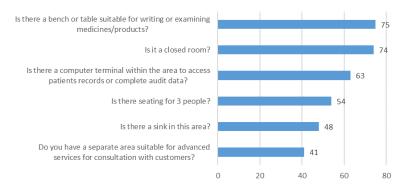


#### **Consultation facilities**

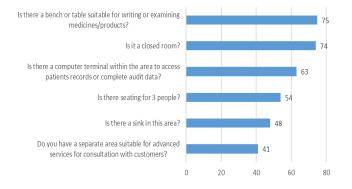
Is there a consultation area (meeting the criteria for the Medicine Use Review service) on the premises?



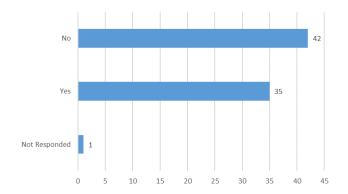
## If Yes:



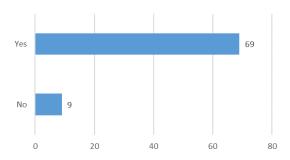
## During consultations are there hand washing facilities?



#### Do patients who are attending for consultations have access to toilet facilities?



#### Are there any staff members who speak an additional language to English?



Those who said that they have staff members who speak an additional language were asked to provide a list of the languages spoken, the main additional languages spoken were Urdu and Punjabi.

#### IT facilities

IT facilities	Yes	No	Not Responded
Do you provide the electronic prescription service 2 (EPS2)?	69	9	0
Do you provide the electronic prescription service (EPS)?	66	1	11
Does your pharmacy have a website?	53	10	15
Does your pharmacy have an up to date NHS			
Choice entry?	68	0	10
Is your pharmacy NHS Summary Care record enabled?	65	4	9

#### Open ended question

Pharmacies were given the opportunity to give any additional information that they didn't feel was captured within the questionnaire. There were 16 responses. Responses highlighted that there is a clear willingness to provide services if they were commissioned to do so, in order to meet the needs of their local community. Concerns were raised over the decommissioning of the Pharmacy First service and the Emergency Hormonal Contraception service in community pharmacies.

#### 4. Area Profiles

## Bradford East Public Health Profile

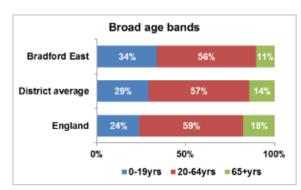
## **Population**

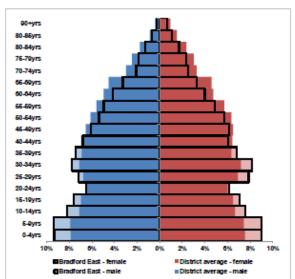
Bradford East has a younger population distribution than Bradford as a whole, particularly in males and females aged between 0-19 years. The population of Bradford East has grown more than the average for Bradford since 2011. Bradford East has the second highest proportion of non-white residents in the district.

116,943 4

Bradford East population, 2015 (+2.5% since 2011) (Bradford District population +1.5% since 2011)

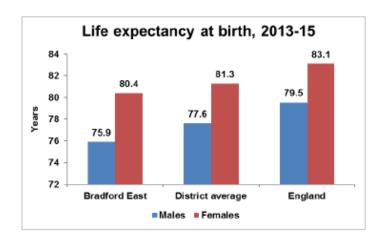
% Bradford East population non-white = 47% (District average = 33%)





## Life expectancy at birth

Bradford East has a lower life expectancy from birth for both males and females when compared to the district average. Life expectancy from birth is on average 1.7 years lower for males and 0.9 years lower for females in Bradford East than the average for Bradford.

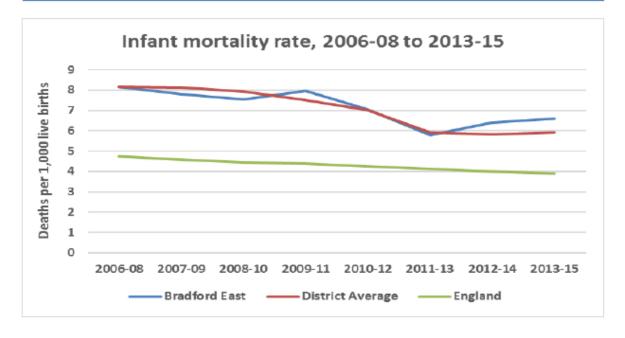


Ward	Males	Females
Bolton and Undercliffe	77.0	81.1
Bowling and Barkerend	74.3	78.6
Bradford Moor	73.2	79.8
Eccleshill	77.3	83.0
Idle and Thackley	76.6	81.3
Little Horton	76.8	79.2

Life expectancy at birth is generally lower than average across all the wards within Bradford East.

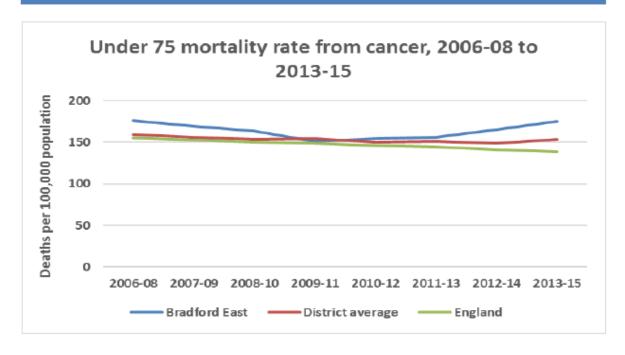
## Infant mortality

Bradford East has the second highest infant mortality rate of the five areas of the district. Between 2013-15 there were 42 infant deaths, with an infant mortality rate of 6.6 deaths per 1,000 live births compared to the district average of 5.9 deaths per 1,000 live births.



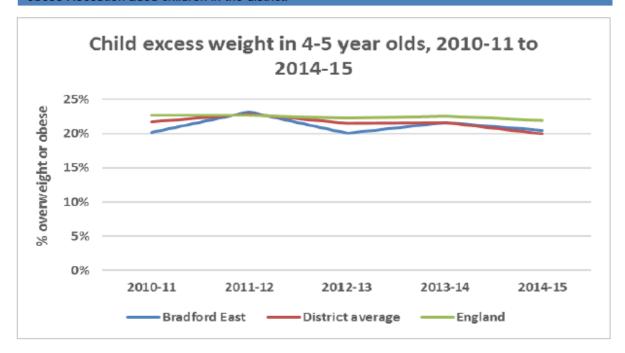
## **Cancer mortality**

On average there are over 100 deaths per year due to cancer in the under 75's in Bradford East. Rates have been rising year on year since 2010-12 and are now the highest in the district.



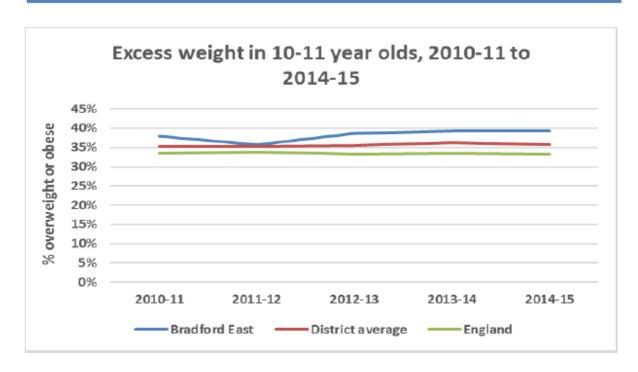
## Child excess weight - 4-5 year olds

Over the last five years, the proportion of Reception aged children who are classified as overweight or obese has varied. In 2014-15 Bradford East had the second highest proportion of overweight or obese Reception aged children in the district.



## Child excess weight – 10-11 year olds

The proportion of Year 6 aged children who are classified as overweight or obese has increased over the last five years. As with Reception aged children, in 2014-15 Bradford East had the second highest proportion of overweight or obese Year 6 children in the district.



## **Bradford East Public Health Outcomes Framework Area Profile**

I-P-4-	W		D-4-	Change over	_	
Indicator	Year	Number	Rate	last year		omparision
1. Infant mortality	2013-15	42	6.6	1	Bradford East Lowest ward in area Highest ward in area District average	
2. Life expectancy at birth - males	2013-15	75.9	,	•	Bradford East Lowest ward in area Highest ward in area District average	75.9 years       73.2 years       77.3 years       77.6 years
3. Life expectancy at birth - females	2013-15	80.4	,	1	Bradford East Lowest ward in area Highest ward in area District average	80.4 years        78.6 years         83.0 years         81.3 years
4. Child excess weight in 4-5 year olds	2014-15	361	20.5%	•	Bradford East Lowest ward in area Highest ward in area District average	
5. Child excess weight in 10- 11 year olds	2014-15	615	39.3%	1	Bradford East Lowest ward in area Highest ward in area District average	39.3% 32.1% 32.1% 35.7%
6. Under 75 mortality rate from cancer	2013-15	340	175.3	1	Bradford East Lowest ward in area Highest ward in area District average	175.3 per 100,000                  159.6 per 100,000                   206.3 per 100,000                  153.8 per 100,000
7. Under 75 mortality rate from cardiovascular diseases	2013-15	242	124.3	1	Bradford East Lowest ward in area Highest ward in area District average	124.3 per 100,000           100.4 per 100,000               175.6 per 100,000           102.7 per 100,000
8. Under 75 mortality rate from respiratory disease	2013-15	134	70.3	•	Bradford East Lowest ward in area Highest ward in area District average	70.3 per 100,000      51.6 per 100,000        114.2 per 100,000      50.9 per 100,000

#### Indicator definitions

- 1. Mortality rate per 1000 live births (age under 1
- year).
  2. The average number of years a person would expect to live based on the average number of years a newborn baby would survive if he or she experienced the age-specific mortality rates for that area and time period throughout his or her life
- 3. As Indicator 2
- 4. % school children in Reception year classified as overweight or obese
- 5. % school children in Year 6 classified as overweight or obese
- 6. Directly age standardised rate per 100,000 population aged under 75
- 7. Directly age standardised rate per 100,000
- population aged under 75

  8. Directly age standardised rate per 100,000 population aged under 75

## Bradford South Public Health Profile

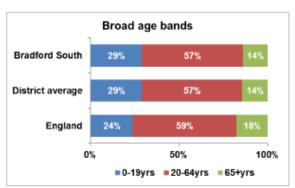
## **Population**

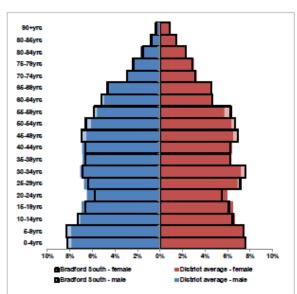
Bradford South generally has a similar population to the average for the district, but has a higher proportion of males and females aged 45-59 years. The population of Bradford South has grown more than the average for Bradford since 2011. Bradford South has the third highest proportion of non-white residents in the district.

## 104,012

Bradford South population, 2015 (+2.3% since 2011) (Bradford District population +1.5% since 2011)

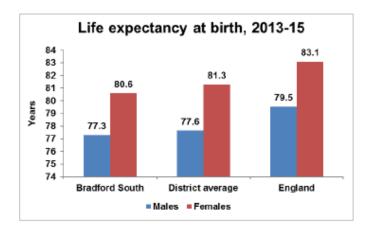
% Bradford South population non-white = 21% (District average = 33%)





## Life expectancy at birth

Bradford South has a lower life expectancy from birth for both males and females when compared to the district average. Life expectancy from birth is on average 0.3 years lower for males and 0.7 years lower for females in Bradford South than the average for Bradford.

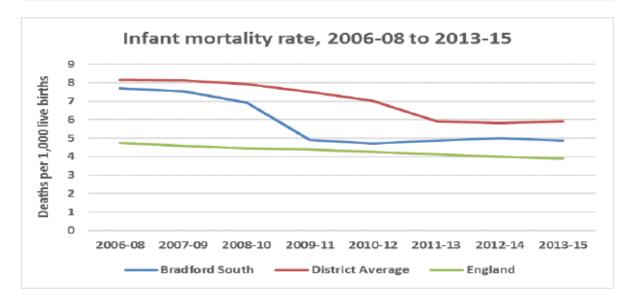


Ward	Males	Females
Great Horton	78.7	82.0
Queensbury	77.1	81.6
Royds	76.2	78.6
Tong	75.0	78.6
Wibsey	79.1	82.1
Wyke	79.4	83.0

Life expectancy at birth is generally lower than average across the wards within Bradford South for females and varied across the wards for males.

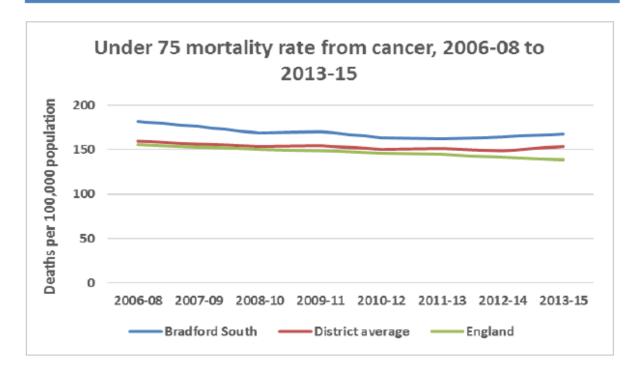
## **Infant mortality**

Although Bradford South now has the third highest infant mortality rate of the five areas of the district, rates fell slightly between 2013 and 2015 and remain below the average for the district but remain higher than the average for England. Between 2013-15 there were 23 infant deaths, with an infant mortality rate of 4.9 deaths per 1,000 live births compared to the district average of 5.9 deaths per 1,000 live births.



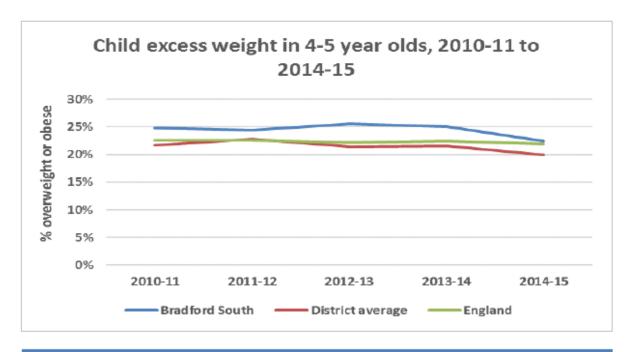
## **Cancer mortality**

On average there are over 120 deaths per year due to cancer in the under 75's in Bradford South. Bradford South continues to have the second highest mortality rate due to cancer of the five areas of the district.



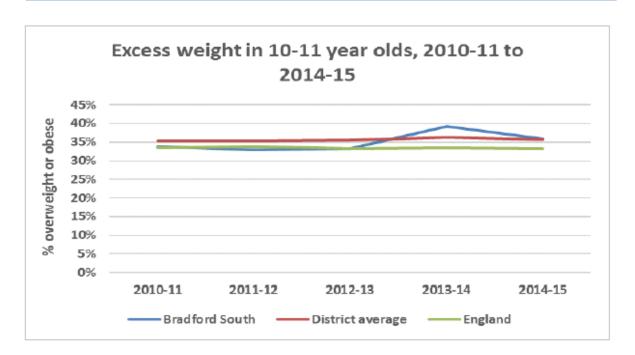
## Child excess weight - 4-5 year olds

Over the last five years, Bradford South has had the highest proportion of overweight or obese Reception aged children in the district.



## Child excess weight – 10-11 year olds

The proportion of Year 6 aged children who are classified as overweight or obese has increased over the last five years. In 2014-15 Bradford South had a similar proportion of overweight or obese Year 6 children to the average for the district.



## Bradford South Public Health Outcomes Framework Area Profile

				Change over		
Indicator	Year	Number	Rate	last year		omparision
1. Infant mortality	2013-15	24	4.9	1	Bradford South Lowest ward in area Highest ward in area District average	IIII 4.9 per 1,000 live births 1 1.6 per 1,000 live births IIIIIIII 8.0 per 1,000 live births IIIII 5.9 per 1,000 live births
2. Life expectancy at birth - males	2013-15	77.3	-	1	Bradford South Lowest ward in area Highest ward in area District average	77.3 years        75.0 years        79.4 years        77.6 years
3. Life expectancy at birth - females	2013-15	80.6	-	1	Bradford South Lowest ward in area Highest ward in area District average	80.6 years         78.6 years          83.0 years          81.3 years
4. Child excess weight in 4-5 year olds	2014-15	270	22.4%	1	Bradford South Lowest ward in area Highest ward in area District average	
5. Child excess weight in 10- 11 year olds	2014-15	408	35.9%	1	Bradford South Lowest ward in area Highest ward in area District average	35.9%   29.6%   41.9%
6. Under 75 mortality rate from cancer	2013-15	363	167.8	1	Bradford South Lowest ward in area Highest ward in area District average	167.8 per 100,000                 148.1 per 100,000                  191.1 per 100,000                 153.8 per 100,000
7. Under 75 mortality rate from cardiovascular diseases	2013-15	245	110.7	1	Bradford South Lowest ward in area Highest ward in area District average	110.7 per 100,000          83.9 per 100,000             145.3 per 100,000           102.7 per 100,000
8. Under 75 mortality rate from respiratory disease	2013-15	123	57.6	-	Bradford South Lowest ward in area Highest ward in area District average	IIII 57.6 per 100,000 II 35.9 per 100,000 IIIIIII 91.9 per 100,000 IIII 50.9 per 100,000

#### Indicator definitions

- Mortality rate per 1000 live births (age under 1 year).
- The average number of years a person would expect to live based on the average number of years a newborn baby would survive if he or she experienced the age-specific mortality rates for that area and time period throughout his or her life
- 3. As Indicator 2
- % school children in Reception year classified as overweight or obese
- % school children in Year 6 classified as overweight obese
- Directly age standardised rate per 100,000 population aged under 75
- Directly age standardised rate per 100,000 population aged under 75
- Directly age standardised rate per 100,000 population aged under 75

## Bradford West Public Health Profile

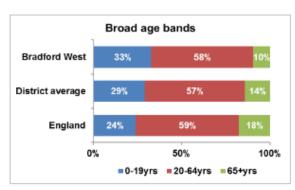
## **Population**

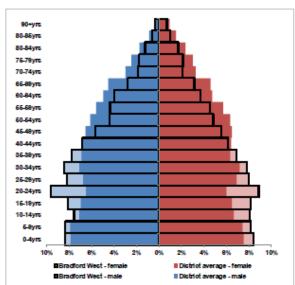
Bradford West has a younger population distribution than Bradford as a whole, particularly in males and females aged 0-39 years. The population of Bradford West has grown slightly above the average for Bradford since 2011. Bradford West has the highest proportion of non-white residents in the district.

## 116,556 👚

Bradford West population, 2015 (+1.3% since 2011) (Bradford District population +1.0% since 2011)

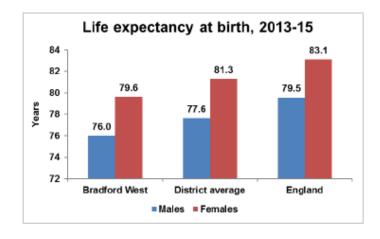
% Bradford West population non-white = 63% (District average = 33%)





## Life expectancy at birth

Bradford West has a lower life expectancy from birth for both males and females when compared to the district average. Life expectancy from birth is on average 1.6 years lower for males and 1.7 years lower for females in Bradford West than the average for Bradford.

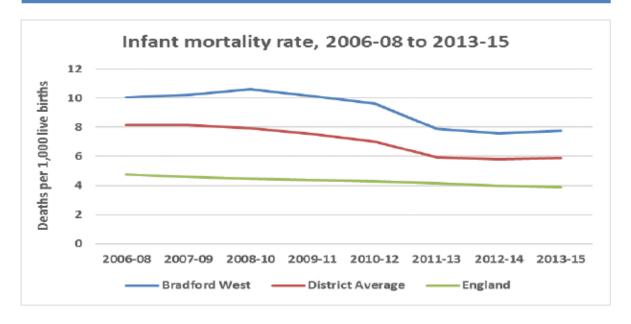


Ward	Males	Females
City	76.2	81.4
Clayton and Fairweather	76.3	78.0
Heaton	76.2	79.6
Manningham	72.3	77.0
Thornton and Allerton	77.7	81.6
Toller	76.1	81.3

Life expectancy at birth is generally lower than average across most wards within Bradford West.

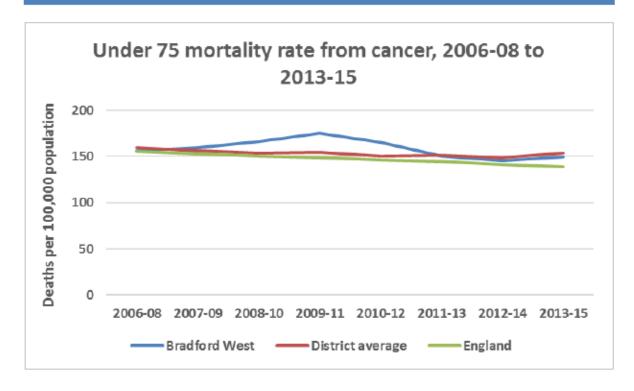
## Infant mortality

Bradford West has the highest infant mortality rate of the five areas of the district. Between 2013-15 there were 48 infant deaths, with an infant mortality rate of 7.8 deaths per 1,000 live births compared to the district average of 5.9 deaths per 1,000 live births.



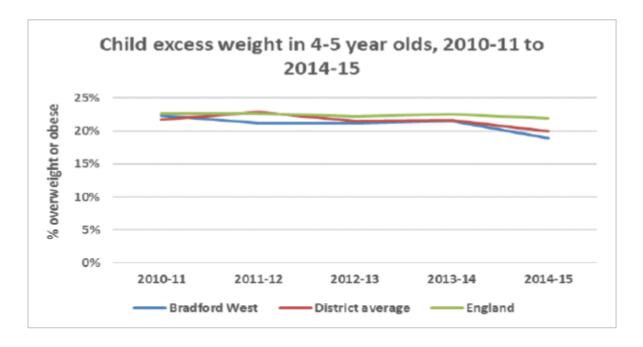
## Cancer mortality

On average there are over 90 deaths per year due to cancer in the under 75's in Bradford West. Mortality rates have risen for the first time since 2009-11 but remain just below the district average.



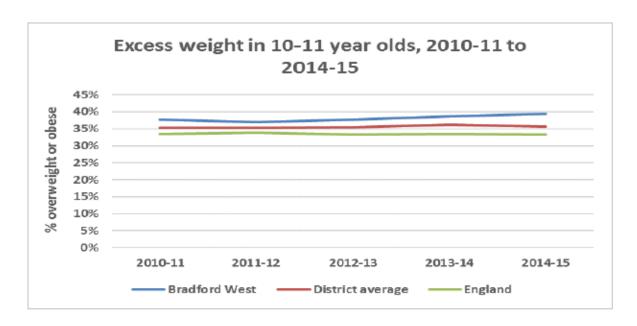
## Child excess weight - 4-5 year olds

Over the last five years, the proportion of Reception aged children who are classified as overweight or obese has generally fallen in Bradford West. In 2014-15 Bradford West had the second lowest proportion of overweight or obese Reception aged children in the district.



## Child excess weight – 10-11 year olds

The proportion of Year 6 aged children who are classified as overweight or obese has increased over the last five years. In 2014-15 Bradford West had the highest proportion of overweight or obese Year 6 children in the district.



## **Bradford West Public Health Outcomes Framework Area Profile**

				Change over		
Indicator	Year	Number	Rate	last year	C	omparision
1. Infant mortality	2013-15	48	7.8	1	Bradford West Lowest ward in area Highest ward in area District average	7.8 per 1,000 live births 1 1.5 per 1,000 live births 111.5 per 1,000 live births 1111111111 11.9 per 1,000 live births 1111 5.9 per 1,000 live births
Life expectancy at birth - males	2013-15	76.0	-	1	Bradford West Lowest ward in area Highest ward in area District average	76.0 years        72.3 years        77.7 years         77.6 years
Life expectancy at birth - females	2013-15	79.6	-	1	Bradford West Lowest ward in area Highest ward in area District average	79.6 years        77.0 years         81.6 years         81.3 years
4. Child excess weight in 4-5 year olds	2014-15	276	18.9%	1	Bradford West Lowest ward in area Highest ward in area District average	18.9% 15.1% 15.1% 11.11.11.11.11.11.11.11.11.11.11.11.11.
5. Child excess weight in 10- 11 year olds	2014-15	590	39.5%		Bradford West Lowest ward in area Highest ward in area District average	39.5% 35.4% 43.5%
6. Under 75 mortality rate from cancer	2013-15	278	149.9		Bradford West Lowest ward in area Highest ward in area District average	149.9 per 100,000            119.6 per 100,000                 189.7 per 100,000                 153.8 per 100,000
7. Under 75 mortality rate from cardiovascular diseases	2013-15	251	142.4	1	Bradford West Lowest ward in area Highest ward in area District average	142.4 per 100,000          103.0 per 100,000            183.3 per 100,000          102.7 per 100,000
8. Under 75 mortality rate from respiratory disease	2013-15	115	70.3	•	Bradford West Lowest ward in area Highest ward in area District average	70.3 per 100,000     39.9 per 100,000            112.8 per 100,000       50.9 per 100,000

#### Indicator definitions

- 1. Mortality rate per 1000 live births (age under 1 year).
- 2. The average number of years a person would expect to live based on the average number of years a newborn baby would survive if he or she experienced the age-specific mortality rates for that area and time period throughout his or her life
- As Indicator 2
   School children in Reception year classified as overweight or obese
- 5. % school children in Year 6 classified as overweight obese
- 6. Directly age standardised rate per 100,000 population aged under 75
- 7. Directly age standardised rate per 100,000 population aged under 75
- 8. Directly age standardised rate per 100,000 population aged under 75

## Keighley Public Health Profile

## **Population**

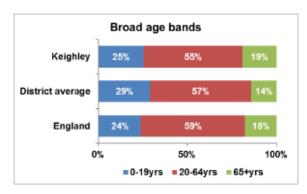
Keighley has an older population distribution than Bradford as a whole, particularly from the age of 45 years and upwards. The population of Keighley has grown below the average for the district since 2011. Keighley has the second lowest proportion of non-white residents in the district.

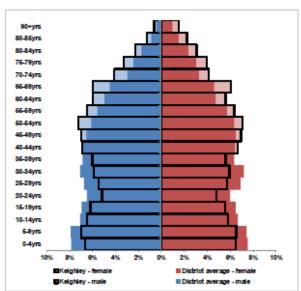
97,716



Keighley population, 2015 (0.6% change since 2011) (Bradford District population +1.0% since 2011)

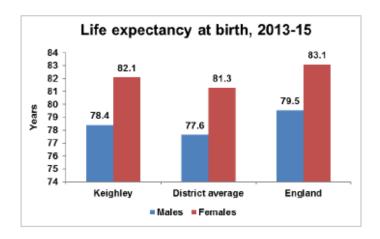
% Keighley population non-white = 16% (District average = 33%)





## Life expectancy at birth

Keighley has a higher life expectancy from birth for both males and females when compared to the district average. Life expectancy from birth is on average 0.8 years higher for both males and females in Keighley than the average for Bradford.

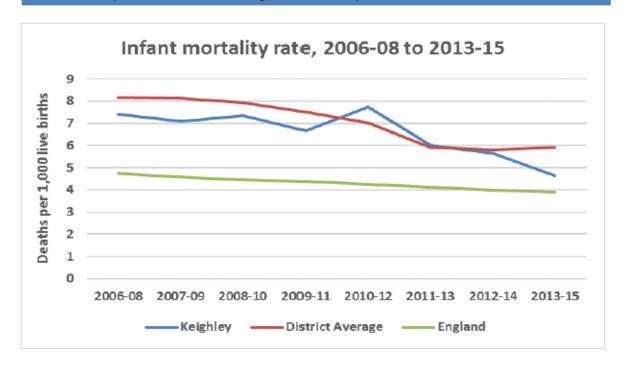


Ward	Males	Females
Craven	78.9	84.0
likley	82.9	83.7
Keighley Central	74.4	77.4
Keighley East	80.5	82.2
Keighley West	76.0	82.1
Worth Valley	80.9	84.0

Life expectancy is higher than average across most wards within Keighley, the exception being Keighley Central

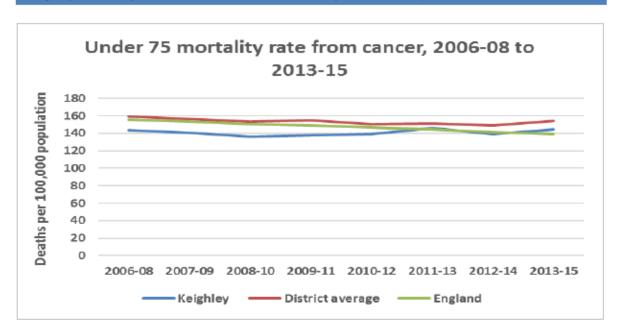
## Infant mortality

Keighley continues to have the second lowest infant mortality rate of the five areas of the district. Between 2013-15 there were 17 infant deaths, with an infant mortality rate of 4.6 deaths per 1,000 live births compared to the district average of 5.9 deaths per 1,000 live births.



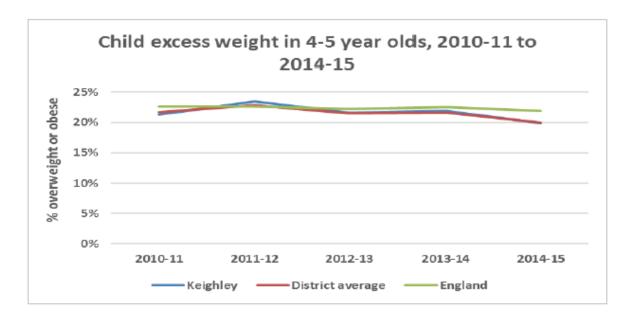
## Cancer mortality

On average there are 120 deaths per year due to cancer in the under 75's in Keighley. Although between 2006 and 2015 the area has on average had the second lowest mortality rate cancer, Keighley is the only area to see an increase in mortality rate over this period.



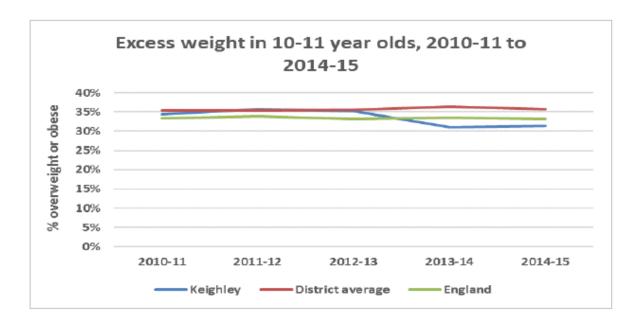
## Child excess weight - 4-5 year olds

Over the last five years, the proportion of Reception aged children who are classified as overweight or obese has remained similar to the district average. In 2014-15 Keighley had the third highest proportion of overweight or obese Reception aged children in the district.



#### Child excess weight - 10-11 year olds

The proportion of Year 6 aged children who are classified as overweight or obese has fallen over the last five years. In 2014-15 Keighley had the second highest lowest of overweight or obese Year 6 children in the district.



## Keighley Public Health Outcomes Framework Area **Profile**

				Change over		
Indicator	Year	Number	Rate	last year	Co	omparision
1. Infant mortality	2013-15	17	4.6	1	Keighley Lowest ward in area Highest ward in area District average	IIII 4.6 per 1,000 live births 0.0 per 1,000 live births IIIIII 6.9 per 1,000 live births IIIII 5.9 per 1,000 live births
Life expectancy at birth - males	2013-15	78.4	-	1	Keighley Lowest ward in area Highest ward in area District average	78.4 years        73.6 years         82.4 years         77.6 years
Life expectancy at birth - females	2013-15	82.1	-	1	Keighley Lowest ward in area Highest ward in area District average	
4. Child excess weight in 4-5 year olds	2014-15	220	19.9%	1	Keighley Lowest ward in area Highest ward in area District average	19.9%                 17.1%                  22.1%
5. Child excess weight in 10- 11 year olds	2014-15	307	31.4%	1	Keighley Lowest ward in area Highest ward in area District average	21.5% 11111111111111111111111111111111111
6. Under 75 mortality rate from cancer	2013-15	362	144.5		Keighley Lowest ward in area Highest ward in area District average	144.5 per 100,000           99.6 per 100,000                 190.1 per 100,000                  153.8 per 100,000
7. Under 75 mortality rate from cardiovascular diseases	2013-15	199	78.7		Keighley Lowest ward in area Highest ward in area District average	78.7 per 100,000      44.3 per 100,000                  154.0 per 100,000              102.7 per 100,000
8. Under 75 mortality rate from respiratory disease	2013-15	98	39.3		Keighley Lowest ward in area Highest ward in area District average	III 39.3 per 100,000 I 11.8 per 100,000 IIIIII 84.2 per 100,000 IIIII 50.9 per 100,000

#### Indicator definitions

- 1. Mortality rate per 1000 live births (age under 1
- 2. The average number of years a person would expect to live based on the average number of years a newborn baby would survive if he or she experienced the age-specific mortality rates for that area and time period throughout his or her life
- 3. As Indicator 2
- 4. % school children in Reception year classified as overweight or obese
- 5. % school children in Year 6 classified as overweight obese
- 6. Directly age standardised rate per 100,000 population aged under 75
- 7. Directly age standardised rate per 100,000
- population aged under 75 8. Directly age standardised rate per 100,000 population aged under 75

# Shipley Public Health Profile

#### **Population**

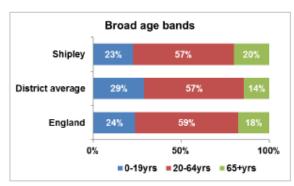
Shipley has an older population distribution than Bradford as a whole, particularly from the age of 40 upwards. The population of Shipley has grown slightly less than the average for the district since 2011. Shipley has the lowest proportion of non-white residents in the district.

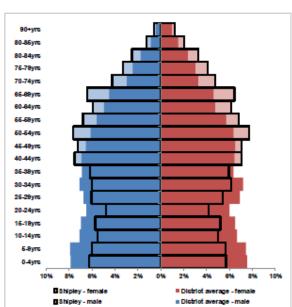
# 95,949



Shipley population, 2015 (+0.9% since 2015) (Bradford District population +1.0% since 2011)

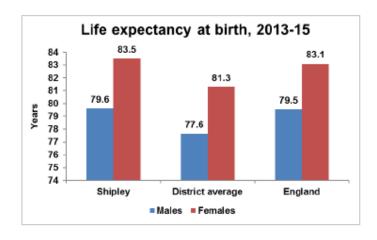
% Shipley population non-white = 8% (District average = 33%)





# Life expectancy at birth

Shipley has a higher life expectancy from birth for both males and females when compared to the district average. Life expectancy from birth is on average 2.0 years higher for males and 2.2 years higher for females in Shipley than the average for Bradford.

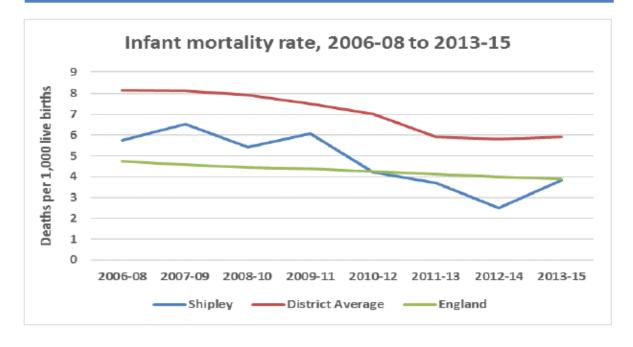


Ward	Males	Females
Baildon	78.4	84.8
Bingley	79.5	83.5
Bingley Rural	80.2	84.0
Shipley	77.9	82.2
Wharfedale	84.7	85.3
Windhill and Wrose	77.9	82.3

Life expectancy at birth is higher than average across all the wards within Shipley.

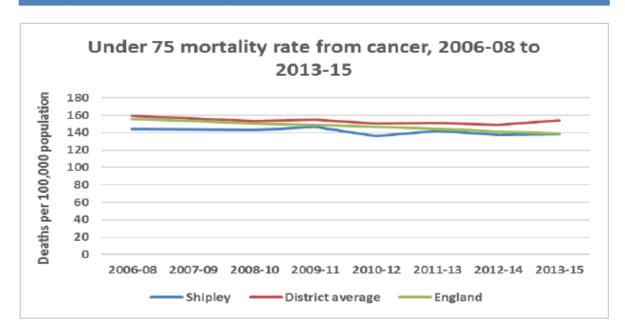
## Infant mortality

Although Shipley has the lowest infant mortality rate of the five areas of the district, rates have increased to close to the average for England. Between 2013-15 there were 12 infant deaths, with an infant mortality rate of 3.8 deaths per 1,000 live births compared to the district average of 5.9 deaths per 1,000 live births and the England average of 3.9 deaths per 1,000 live births.



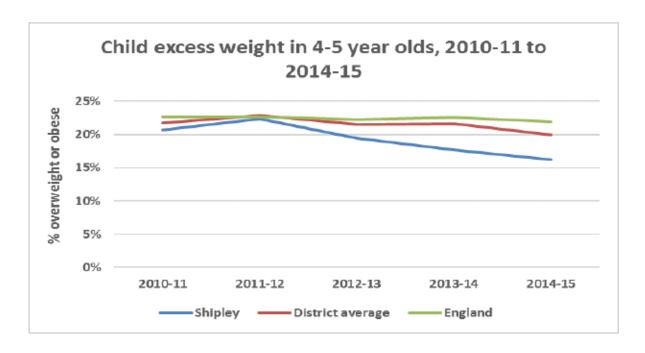
#### Cancer mortality

On average there are nearly 120 deaths per year due to cancer in the under 75's in Shipley. Shipley has had the lowest mortality rate from cancer since 2009-11.



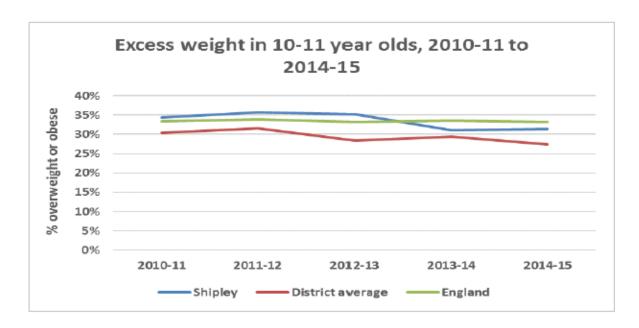
## Child excess weight – 4-5 year olds

Over the last five years, the proportion of Reception aged children who are classified as overweight or obese has generally fallen. In 2014-15 Shipley had the lowest proportion of overweight or obese Reception aged children in the district.



## Child excess weight – 10-11 year olds

The proportion of Year 6 aged children who are classified as overweight or obese has fallen over the last five years. As with Reception aged children, in 2014-15 Shipley had the lowest proportion of overweight or obese Year 6 children in the district.



# **Shipley Public Health Outcomes Framework Area Profile**

Indicator	Year	Number	Rate	Change over last year		omparision
1. Infant mortality	2013-15	12	3.8	1	Shipley Lowest ward in area Highest ward in area District average	III 3.8 per 1,000 live births 0.0 per 1,000 live births IIIIII 7.6 per 1,000 live births IIIII 5.9 per 1,000 live births
Life expectancy at birth - males	2013-15	79.6	-	1	Shipley Lowest ward in area Highest ward in area District average	79.6 years       77.9 years        84.7 years        77.6 years
Life expectancy at birth - females	2013-15	83.5	-	1	Shipley Lowest ward in area Highest ward in area District average	83.5 years           82.2 years          85.3 years          81.3 years
4. Child excess weight in 4-5 year olds	2014-15	170	16.2%	1	Shipley Lowest ward in area Highest ward in area District average	16.2%             12.6%                 19.4%                   19.9%
5. Child excess weight in 10- 11 year olds	2014-15	234	27.3%	1	Shipley Lowest ward in area Highest ward in area District average	27.3%     16.1%   16.1%   40.5%   18.18   40.5%
6. Under 75 mortality rate from cancer	2013-15	359	138.1		Shipley Lowest ward in area Highest ward in area District average	138.1 per 100,000          106.4 per 100,000               165.4 per 100,000                 153.8 per 100,000
7. Under 75 mortality rate from cardiovascular diseases	2013-15	200	78.5	1	Shipley Lowest ward in area Highest ward in area District average	78.5 per 100,000    26.4 per 100,000           108.9 per 100,000           102.7 per 100,000
8. Under 75 mortality rate from respiratory disease	2013-15	86	33.5	1	Shipley Lowest ward in area Highest ward in area District average	III 33.5 per 100,000 5.8 per 100,000 IIIIIIII 94.1 per 100,000 IIIII 50.9 per 100,000

#### Indicator definitions

- 1. Mortality rate per 1000 live births (age under 1
- The average number of years a person would expect to live based on the average number of years a newborn baby would survive if he or she experienced the age-specific mortality rates for that area and time period throughout his or her life
- 3. As Indicator 2
- 4. % school children in Reception year classified as overweight or obese
- 5. % school children in Year 6 classified as overweight obese
- 6. Directly age standardised rate per 100,000 population aged under 75
  7. Directly age standardised rate per 100,000
- population aged under 75
- 8. Directly age standardised rate per 100,000 population aged under 75

# 5. List of pharmacies including opening hours

Pharmacy Name & Address	Organisation Code	Opening Times
1st Pharmacy, Fountain	FNM60	Sunday 12:00-22:00;
Hall, BD1 3RA		Monday 08:00-23:00;
		Tuesday 08:00-23:00;
		Wednesday 08:00-23:00;
		Thursday 08:00-23:00;
		Friday 08:00-23:00;
		Saturday 08:00-23:00
Airedale Pharmacy, 55	FCG80	Monday 09:00-17:00
South Street, BD21 1AD		Tuesday 09:00-17:00
(Distance Selling)		Wednesday 09:00-17:00
		Thursday 09:00-17:00
		Friday 09:00-17:00
Aireworth Chemist 3	FEF17	Monday 09:00-17:30;
Aireworth Road, BD21		Tuesday 09:00-17:30;
4DH		Wednesday 09:00-17:30;
		Thursday 09:00-17:30;
		Friday 09:00-17:30
Asda In Store	FMQ19	Sunday 10:00-16:00;
Pharmacy, Bingley		Monday 08:00-23:00;
Street, BD21 3ER		Tuesday 07:00-23:00;
		Wednesday 07:00-23:00;
		Thursday 07:00-23:00;
		Friday 07:00-23:00;
		Saturday 07:00-22:00
Asda In Store	FRJ55	Sunday 11:00-17:00;
Pharmacy, Cemetery		Monday 08:00-23:00;
Road, BD7 2NB		Tuesday 07:00-23:00;
		Wednesday 07:00-23:00;
		Thursday 07:00-23:00;
		Friday 07:00-23:00;
		Saturday 07:00-22:00
Asda In Store	FWG94	Sunday 10:00-16:00;
Pharmacy, Manor Lane,		Monday 08:00-23:00;
BD18 3RY		Tuesday 07:00-23:00;
		Wednesday 07:00-23:00;
		Thursday 07:00-23:00;
		Friday 07:00-23:00;
		Saturday 07:00-22:00

Asda In Store	FJT97	Sunday 10:00-16:00;
Pharmacy, Rooley Lane,		Monday 08:00-23:00;
BD4 7SR		Tuesday 07:00-23:00;
		Wednesday 07:00-23:00;
		Thursday 07:00-23:00;
		Friday 07:00-23:00;
		Saturday 07:00-22:00
Ashcroft Pharmacy, 1st	FXL19	Monday 09:00-17:00
Floor Suite A, BD1 2AW		Tuesday 09:00-17:00
(Distance Selling)		Wednesday 09:00-17:00
		Thursday 09:00-17:00
		Friday 09:00-17:00
Barkerend Pharmacy,	FQR81	Sunday 10:00-20:00;
Bluebell Building, BD3		Monday 08:00-23:00;
8QH		Tuesday 08:00-23:00;
		Wednesday 08:00-23:00;
		Thursday 08:00-23:00;
		Friday 08:00-23:00;
		Saturday 08:00-23:00
Bierley Pharmacy, The	FF248	Monday 09:00-17:45;
Old School Building,		Tuesday 09:00-17:45;
BD4 6AA		Wednesday 09:00-17:45;
		Thursday 09:00-17:45;
		Friday 09:00-17:45;
		Saturday 09:00-12:00
Bilton Pharmacy, 120	FQT06	Sunday 10:00-14:00;
City Road, BD8 8JT		Monday 07:00-23:00;
, , , , , , , , , , , , , , , , , , , ,		Tuesday 07:00-23:00;
		Wednesday 07:00-23:00;
		Thursday 07:00-23:00;
		Friday 07:00-23:00;
		Saturday 07:00-23:00
Biomed Care Services,	FJC72	
11 Rowan Trade Park,		
BD4 8TQ (Distance		
Selling)		
Boots UK Ltd, 147-149	FQ576	Monday 08:30-18:00;
Main Street, BD16 1AJ		Tuesday 08:30-18:00;
		Wednesday 08:30-18:00;
		Thursday 08:30-18:00;
		Friday 08:30-18:00;
		Saturday 08:30-17:30
Boots UK Ltd, 22-28	FMK44	Sunday 10:30-16:00;
Queensway, BD21 3PY		Monday 08:30-17:30;
,,		Tuesday 08:30-17:30;
		Wednesday 08:30-17:30;
		Thursday 08:30-17:30;
		Friday 08:30-17:30;
		Saturday 08:30-17:30
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Boots UK Ltd, 37 Market	FC686	Monday 08:30-17:30;
Square, BD18 3QJ		Tuesday 08:30-17:30;
		Wednesday 08:30-17:30;
		Thursday 08:30-17:30;
		Friday 08:30-17:30;
		Saturday 08:30-17:30
Boots UK Ltd, 37-39	FCE76	Sunday 11:00-16:00;
Brook Street, LS29 8AG		Monday 08:30-17:30;
·		Tuesday 08:30-17:30;
		Wednesday 08:30-17:30;
		Thursday 08:30-17:30;
		Friday 08:30-17:30;
		Saturday 08:30-17:30
Boots UK Ltd Unit 3	FNV14	Sunday 11:00-17:00;
Forster Square Retail		Monday 08:00-23:59;
Park, BD1 4AG		Tuesday 08:00-23:59;
		Wednesday 08:00-23:59;
		Thursday 08:00-23:59;
		Friday 08:00-23:59;
		Saturday 08:00-22:00
Boots UK Ltd Unit 8,	FD543	Sunday 11:00-17:00;
Charles Street Mall,		Monday 09:00-19:00;
BD1 1US		Tuesday 09:00-19:00;
		Wednesday 09:00-19:00;
		Thursday 09:00-20:00;
		Friday 09:00-19:00;
		Saturday 09:00-19:00
Bradford Delivery	FDR48	Monday 09:00-13:00; Monday 14:00-18:00;
Chemist, 9 Southfield		Tuesday 09:00-13:00; Tuesday 14:00-18:00;
Road, BD5 9EE		Wednesday 09:00-13:00; Wednesday 14:00-18:00;
(Distance Selling)		Thursday 09:00-13:00; Thursday 14:00-18:00;
		Friday 09:00-13:00; Friday 14:00-18:00
Bradford Health	FVC38	Monday 09:00-13:00; Monday 14:00-18:00;
Pharmacy, Unit 20,		Tuesday 09:00-13:00; Tuesday 14:00-18:00;
Holroyd Business		Wednesday 09:00-13:00; Wednesday 14:00-18:00;
Centre, BD5 9BP		Thursday 09:00-13:00; Thursday 14:00-18:00;
		Friday 09:00-13:00; Friday 14:00-18:00
Bradford Pharmacy, 238	FP395	Sunday 08:00-21:30;
Girlington Road, BD8		Monday 08:00-22:30;
9NR		Tuesday 08:00-22:30;
		Wednesday 08:00-22:30;
		Thursday 08:00-22:30;
		Friday 08:00-22:30;
		Saturday 08:00-22:30
Brooklands Pharmacy,	FWG18	Monday 09:00-17:00
21 Sticker Lane, BD4		Tuesday 09:00-17:00
8DP (Distance Selling)		Wednesday 09:00-17:00
		Thursday 09:00-17:00
		Friday 09:00-17:00

Browgate Pharmacy, 5	FDC57	Monday 09:00-13:00; Monday 14:00-18:30;
Browgate, BD17 6BP		Tuesday 09:00-13:00; Tuesday 14:00-18:30;
		Wednesday 09:00-13:00; Wednesday 14:00-18:30;
		Thursday 09:00-13:00; Thursday 14:00-18:30;
		Friday 09:00-13:00; Friday 14:00-18:30;
		Saturday 09:00-12:00
Chemist 2 Patient 195a	FRK15	Monday 10:00-18:00
Lumb Lane, BD8 7SG		Tuesday 10:00-18:00
(Distance Selling)		Wednesday 10:00-18:00
		Thursday 10:00-18:00
		Friday 10:00-18:00
Circle Pharmacy, 90	FPM15	Monday 09:00-17:00
Otley Road, BD18 2BH		Tuesday 09:00-17:00
(Distance Selling)		Wednesday 09:00-17:00
		Thursday 09:00-17:00
		Friday 09:00-17:00
City Road Pharmacy,	FMV73	Monday 09:00-19:00;
100-102 City Road, BD8		Tuesday 09:00-19:00;
8JT		Wednesday 09:00-19:00;
		Thursday 09:00-19:00;
		Friday 09:00-19:00;
		Saturday 09:00-13:00
Cliffe Avenue,	FEX40	Monday 09:00-13:00; Monday 14:00-18:30;
Pharmacy 1 Cliffe		Tuesday 09:00-13:00; Tuesday 14:00-18:30;
Avenue, BD17 6NX		Wednesday 09:00-13:00; Wednesday 14:00-18:30;
		Thursday 09:00-13:00; Thursday 14:00-18:30;
		Friday 09:00-13:00; Friday 14:00-18:30
Cohen's Chemist, 120	FKQ70	Monday 09:00-13:00; Monday 14:00-18:30;
Lumb Lane, BD8 7RS		Tuesday 09:00-13:00; Tuesday 14:00-18:30;
,		Wednesday 09:00-13:00; Wednesday 14:00-18:30;
		Thursday 09:00-13:00; Thursday 14:00-18:30;
		Friday 09:00-13:00; Friday 14:00-18:30
Cohen's Chemist, 123	FV319	Monday 09:00-13:00; Monday 14:00-18:00;
Main Street, LS29 7JN		Tuesday 09:00-13:00; Tuesday 14:00-18:00;
		Wednesday 09:00-13:00; Wednesday 14:00-18:00;
		Thursday 09:00-13:00; Thursday 14:00-18:00;
		Friday 09:00-13:00; Friday 14:00-18:00;
		Saturday 09:00-12:00
Cohen's Chemist, 392a	FX301	Monday 08:30-13:00; Monday 13:00-18:30;
Little Horton Lane, BD5		Tuesday 08:30-13:00; Tuesday 13:00-18:30;
0NX		Wednesday 08:30-13:00; Wednesday 13:00-18:30;
		Thursday 08:30-13:00; Thursday 13:00-18:30;
		Friday 08:30-13:00; Friday 13:00-18:30;
		Saturday 09:00-13:00
Cohen's Chemist,	FK719	Monday 08:30-12:00; Monday 13:00-18:00;
Mayfield Medical		Tuesday 08:30-12:00; Tuesday 13:00-18:00;
Centre, BD14 6NF		Wednesday 08:30-12:00; Wednesday 13:00-18:00;
,		Thursday 08:30-12:00; Thursday 13:00-18:00;
		Friday 08:30-12:00; Friday 13:00-18:00
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Cohen's Chemist, The	FQT13	Monday 08:30-13:00; Monday 13:00-18:00;
Willows Medical Centre,		Tuesday 08:30-13:00; Tuesday 13:00-18:00;
BD13 2GD		Wednesday 08:30-13:00; Wednesday 13:00-18:00;
		Thursday 08:30-13:00; Thursday 13:00-18:00;
		Friday 08:30-13:00; Friday 13:00-18:00
Cottingley Pharmacy, 7	FP078	Monday 09:00-18:00;
The Parade, BD16 1RP	11070	Tuesday 09:00-18:00;
11101 arado, 2210 1141		Wednesday 09:00-18:30;
		Thursday 09:00-18:00;
		Friday 09:00-18:00;
		Saturday 09:00-16:00
Coventry Street,	FL435	Monday 09:00-18:00;
Pharmacy 43 Coventry	1 2 100	Tuesday 09:00-18:00;
Street, BD4 7HX		Wednesday 09:00-18:00;
		Thursday 09:00-18:00;
		Friday 09:00-18:00
Crossflatts Pharmacy,	FFD58	Monday 09:00-18:00;
30 Keighley Road, BD16	11 000	Tuesday 09:00-18:00;
2EZ		Wednesday 09:00-18:00;
		Thursday 09:00-18:00;
		Friday 09:00-18:00;
		Saturday 09:00-12:00
Currie's Chemists	FLT42	Monday 08:45-18:30;
	FL142	· · · · · · · · · · · · · · · · · · ·
(Wyke) Ltd, Unit 2, Asda		Tuesday 08:45-18:30;
Supermarket, BD12 9JQ		Wednesday 08:45-18:30;
		Thursday 08:45-18:30; Friday 08:45-18:30;
		Saturday 09:00-12:00
Dalaguay Dharmagy E	FE\/0.4	-
Dalesway Pharmacy, 5-	FFV94	Sunday 10:00-16:00;
7 Kingsway, BD16 4RP		Monday 07:00-23:00;
		Tuesday 07:00-23:00;
		Wednesday 07:00-23:00;
		Thursday 07:00-23:00;
		Friday 07:00-23:00;
D // 1 DI	E140400	Saturday 07:00-21:00
Dalton Lane Pharmacy,	FWW82	Monday 09:00-17:00
2 Berry Street, BD21		Tuesday 09:00-17:00
4HX (Distance Selling)		Wednesday 09:00-17:00
		Thursday 09:00-17:00
D 1 : 5:	FIA/ETC	Friday 09:00-17:00
Day Lewis Pharmacy,	FWF76	Monday 09:00-12:45; Monday 13:45-18:30;
21 & 23 Mill Hey, BD22		Tuesday 09:00-12:45; Tuesday 13:45-18:30;
8NQ		Wednesday 09:00-12:45; Wednesday 13:45-18:30;
		Thursday 09:00-12:45; Thursday 13:45-18:30;
		Friday 09:00-12:45; Friday 13:45-18:30;
		Saturday 10:00-12:30

Day Night Pharmacy,	FHX24	Sunday 08:00-23:00;
101 Killinghall Road,		Monday 08:00-23:00;
BD3 8AB		Tuesday 08:00-23:00;
		Wednesday 08:00-23:00;
		Thursday 08:00-23:00;
		Friday 08:00-13:15; Friday 14:15-23:00;
		Saturday 08:00-23:00
Delivering Pharmacy	FPN62	Monday 09:00-17:00
Ltd, Unit 2 Carlisle	11102	Tuesday 09:00-17:00
Business Park, BD8		Wednesday 09:00-17:00
8BD (Distance Selling)		Thursday 09:00-17:00
(Biotarios Seimig)		Friday 09:00-17:00
Exel Chemists, 149 New	FC602	Monday 09:00-18:00;
Line, BD10 0BU	1 0002	Tuesday 09:00-18:00;
Line, BB 10 0B0		Wednesday 09:00-18:00;
		Thursday 09:00-18:00;
		Friday 09:00-18:00;
Foodow Dhamasaw 75	FF400	Saturday 09:00-13:00
Fagley Pharmacy, 75	FFA89	Monday 09:00-18:00;
Fagley Road, BD2 3LS		Tuesday 09:00-18:00;
		Wednesday 09:00-18:00;
		Thursday 09:00-18:00;
		Friday 09:00-18:00
Farrow Pharmacy, 175	FG761	Sunday 10:00-18:00;
Otley Road, BD3 0HX		Monday 07:00-23:00;
		Tuesday 07:00-23:00;
		Wednesday 07:00-23:00;
		Thursday 07:00-23:00;
		Friday 07:00-23:00;
		Saturday 08:00-20:00
Felkris Ltd, 516	FGA84	Monday 09:00-18:30;
Huddersfield Road,		Tuesday 09:00-18:30;
BD12 8AD		Wednesday 09:00-18:30;
		Thursday 09:00-18:30;
		Friday 09:00-18:30;
		Saturday 09:00-13:00
Frizinghall Medical	FTJ08	Monday 09:00-13:00; Monday 14:00-18:00;
Centre, Pharmacy 285		Tuesday 09:00-13:00; Tuesday 14:00-18:00;
Bradford Road, BD18		Wednesday 09:00-13:00; Wednesday 14:00-18:00;
3AB		Thursday 09:00-13:00; Thursday 14:00-18:00;
		Friday 09:00-13:00; Friday 14:00-18:00
Frizinghall Pharmacy,	FNH74	Sunday 10:00-20:00;
278 Keighley Road, BD9		Monday 08:00-23:59;
4LH		Tuesday 08:00-23:59;
		Wednesday 08:00-23:59;
		Thursday 08:00-23:59;
		Friday 08:00-23:59;
		Saturday 09:00-19:00

Gibson Pharmacy,	FV487	Monday 08:30-18:00;
Undercliffe Health		Tuesday 08:30-20:00;
Centre, BD2 4RA		Wednesday 08:30-18:00;
,		Thursday 08:30-18:00;
		Friday 08:30-18:00
Girlington Pharmacy,	FWM72	Monday 08:00-19:00;
Girlington Health		Tuesday 08:00-19:00;
Centre, BD8 9NS		Wednesday 08:00-19:00;
		Thursday 08:00-19:00;
		Friday 08:00-19:00;
		Saturday 08:00-12:00
H S Chemist, 16 Carlisle	FA377	Monday 09:00-13:00; Monday 14:00-19:00;
Road, BD8 8AD		Tuesday 09:00-13:00; Tuesday 14:00-19:00;
		Wednesday 09:00-13:00; Wednesday 14:00-19:00;
		Thursday 09:00-13:00; Thursday 14:00-19:00;
		Friday 09:00-13:00; Friday 14:00-19:00;
		Saturday 09:15-13:00
Harden Pharmacy, 2	FTA79	Monday 08:30-18:00;
Wilsden Road, BD16		Tuesday 08:30-18:00;
1JP		Wednesday 08:30-18:00;
		Thursday 08:30-18:00;
		Friday 08:30-13:00; Friday 14:00-18:00;
		Saturday 08:30-12:30
HBS Pharmacy, Silsden	FDW12	Sunday 08:00-21:00;
Health Centre, BD20		Monday 07:30-22:00;
0DG		Tuesday 07:30-22:00;
		Wednesday 07:30-22:00;
		Thursday 07:30-22:00;
		Friday 07:30-22:00;
		Saturday 07:30-22:00
Health-Check	FKJ49	Monday 09:00-13:00; Monday 14:00-18:00;
Pharmacy, 127 Great		Tuesday 09:00-13:00; Tuesday 14:00-18:00;
Horton Road, BD7 1PS		Wednesday 09:00-13:00; Wednesday 14:00-18:00;
		Thursday 09:00-13:00; Thursday 14:00-18:00;
		Friday 09:00-13:00; Friday 14:00-18:00
Healthy Living	FQW91	Monday 09:00-18:00;
Pharmacy, 40 Reevy		Tuesday 09:00-18:00;
Road West, BD6 3LX		Wednesday 09:00-18:00;
		Thursday 09:00-18:00;
		Friday 09:00-18:00
Heaton Pharmacy, 8	FVY82	Monday 09:00-13:00; Monday 14:00-18:00;
Highgate, BD9 4BB		Tuesday 09:00-13:00; Tuesday 14:00-18:00;
		Wednesday 09:00-13:00; Wednesday 14:00-18:00;
		Thursday 09:00-13:00; Thursday 14:00-18:00;
		Friday 09:00-13:00; Friday 14:00-18:00;

Horton Grange Pharmacy, 82-84 Horton Grange Road, BD7 3AQ  Horton Park Pharmacy,	FGM53	Monday 09:00-19:00; Tuesday 09:00-19:00; Wednesday 09:00-19:00; Thursday 09:00-19:00; Friday 09:00-19:00; Saturday 09:00-14:00 Monday 09:00-13:00; Monday 14:00-19:00;
Unit 4 Horton Park Centre, BD7 3EG		Tuesday 09:00-13:00; Tuesday 14:00-19:00; Wednesday 09:00-13:00; Wednesday 14:00-19:00; Thursday 09:00-13:00; Thursday 14:00-19:00; Friday 09:00-13:00; Friday 14:00-19:00; Saturday 09:00-13:00
Hussain Dispensing Chemist, 141 North Street, BD21 3AU	FVR53	Monday 09:00-13:00; Monday 14:45-19:00; Tuesday 09:00-13:00; Tuesday 14:45-19:00; Wednesday 09:00-13:00; Wednesday 14:45-19:00; Thursday 09:00-13:00; Thursday 14:45-19:00; Friday 09:00-13:45; Friday 15:00-19:00
Idle Pharmacy, 7 The Green, BD10 9PT	FFT33	Monday 09:00-17:45; Tuesday 09:00-17:45; Wednesday 09:00-17:45; Thursday 09:00-17:45; Friday 09:00-17:45; Saturday 09:00-12:00
Ilkley Moor Pharmacy, 10 Cowpasture Road, LS29 8SR	FWC53	Sunday 09:00-19:00; Monday 08:00-23:00; Tuesday 08:00-23:00; Wednesday 08:00-23:00; Thursday 08:00-23:00; Friday 08:00-23:00; Saturday 08:00-23:00
J Robertson & Son Ltd, 195 - 197 Otley Road, BD3 0JF	FQJ15	Monday 09:00-18:00; Tuesday 09:00-18:00; Wednesday 09:00-18:00; Thursday 09:00-18:00; Friday 09:00-18:00; Saturday 09:00-14:00
J Robertson & Son Ltd, 5-7 Institute Road, BD2 2HY	FL676	Monday 09:00-13:00; Monday 14:00-18:00; Tuesday 09:00-13:00; Tuesday 14:00-18:00; Wednesday 09:00-13:00; Wednesday 14:00-18:00; Thursday 09:00-13:00; Thursday 14:00-18:00; Friday 09:00-13:00; Friday 14:00-18:00; Saturday 09:00-13:00
J S Langhorne Ltd, 1 Lidget Mill, BD22 7HN	FYE89	Monday 09:00-13:00; Monday 14:00-18:00; Tuesday 09:00-13:00; Tuesday 14:00-18:00; Wednesday 09:00-13:00; Wednesday 14:00-18:00; Thursday 09:00-13:00; Thursday 14:00-18:00; Friday 09:00-13:00; Friday 14:00-18:00

Kamsons Pharmacy,	FVP97	Monday 09:00-19:00;
Newlands Way, BD10		Tuesday 09:00-18:30;
0JE		Wednesday 09:00-18:30;
332		Thursday 09:00-18:30;
		Friday 09:00-18:30;
		Saturday 09:00-13:00
Keighley Health Centre	FDE21	Monday 09:00-18:00;
	I DLZ I	Tuesday 09:00-18:00;
Pharmacy, Oakworth		,
Road, BD21 1SA		Wednesday 09:00-18:00;
		Thursday 09:00-18:00;
K : I ( EII : I	EM 100	Friday 09:00-18:00
Knights Eldwick	FWJ89	Monday 08:30-18:00;
Pharmacy, 194 Swan		Tuesday 08:30-18:00;
Avenue, BD16 3PA		Wednesday 08:30-18:00;
		Thursday 08:30-18:00;
		Friday 08:30-18:00;
		Saturday 09:00-13:00
Lister Pharmacy, 2-4	FJ060	Sunday 11:00-23:00;
Victor Terrace, BD9		Monday 08:00-23:00;
4RQ		Tuesday 08:00-23:00;
		Wednesday 08:00-23:00;
		Thursday 08:00-23:00;
		Friday 08:00-23:00;
		Saturday 09:00-23:00
Lloyds Pharmacy, 1 Fair	FDP67	Monday 08:30-19:00;
Road, BD6 1TP		Tuesday 08:30-19:00;
,		Wednesday 08:30-19:00;
		Thursday 08:30-19:00;
		Friday 08:30-19:00;
		Saturday 09:00-15:00
Lloyds Pharmacy, 2	FXL18	Sunday 12:00-20:00;
Butler Street West, BD3	I XLIO	Monday 08:00-20:00;
OBS		Tuesday 08:00-20:00;
063		Wednesday 08:00-20:00;
		Thursday 08:00-20:00;
		•
		Friday 08:00-20:00;
III I DI	EN 1000	Saturday 10:00-20:00
Lloyds Pharmacy, 20a	FM690	Monday 08:30-18:30;
Bingley Road, BD18		Tuesday 08:30-18:30;
4RS		Wednesday 08:30-18:30;
		Thursday 08:30-18:30;
		Friday 08:30-18:30;
		Saturday 10:00-12:30
Lloyds Pharmacy, 47	FNG63	Monday 08:30-18:15;
Chelmsford Road, BD3		Tuesday 08:30-18:15;
8QN		Wednesday 08:30-18:15;
		Thursday 08:30-18:15;
		Friday 08:30-18:15

Lloyds Pharmacy, 81	FEG68	Sunday 10:00-18:30;
Leylands Lane, BD9		Monday 07:30-23:00;
5PZ		Tuesday 07:30-23:00;
		Wednesday 07:30-23:00;
		Thursday 07:30-23:00;
		Friday 07:30-23:00;
		Saturday 08:00-22:00
Lloyds Pharmacy, 95	FXQ13	Monday 09:00-18:00;
Holmewood Road, BD4		Tuesday 09:00-18:00;
9EJ		Wednesday 09:00-18:00;
		Thursday 09:00-18:00;
		Friday 09:00-18:00;
		Saturday 09:00-13:00
Lloyds Pharmacy,	FFM31	Monday 08:00-18:30;
Allerton Health Centre,		Tuesday 08:00-18:30;
BD15 7WA		Wednesday 08:00-18:30;
		Thursday 08:00-18:30;
		Friday 08:00-18:30
Lloyds Pharmacy,	FXH84	Monday 09:00-18:00;
Allerton Shopping		Tuesday 09:00-18:00;
Centre, BD15 7BN		Wednesday 09:00-18:00;
, , , , , , , , , , , , , , , , , , , ,		Thursday 09:00-18:00;
		Friday 09:00-18:00;
		Saturday 09:00-17:00
Lloyds Pharmacy,	FT439	Monday 08:00-18:30;
Highfield Medical	1 1 100	Tuesday 08:00-18:30;
Centre, BD4 9QA		Wednesday 08:00-18:30;
Contro, DD 1 GQ/1		Thursday 08:00-18:30;
		Friday 08:00-18:30;
		Saturday 09:00-13:00
Lloyds Pharmacy Idle	FH190	Monday 08:30-18:30;
Medical Centre, BD10	111100	Tuesday 08:30-18:30;
8RU		Wednesday 08:30-18:30;
		Thursday 08:30-18:30;
		Friday 08:30-18:30
Lloyds Pharmacy Low	FXR22	Monday 08:00-20:00;
Moor Medical Centre,	T XIXEE	Tuesday 08:00-19:00;
BD12 0TH		Wednesday 08:00-19:00;
		Thursday 08:00-19:00;
		Friday 08:00-19:00
Lloyds Pharmacy	FC412	Monday 08:30-20:30;
Rockwell Lane, BD10	1 0412	Tuesday 08:30-18:00;
9HT		Wednesday 08:30-18:00;
3111		Thursday 08:30-18:00;
		Friday 08:30-18:00
Lloyde Pharmacy	FK152	Monday 07:45-19:00;
Lloyds Pharmacy, Rooley Lane Medical	LV197	Tuesday 07:45-18:15;
Centre, BD4 7SS		Wednesday 07:45-18:15;
Centre, DD4 733		· ·
		Thursday 07:45-18:15;
		Friday 07:45-18:15

LloydsPharmacy	FNL52	Monday 08:00 - 19:30;
Springs Lane Medical		Tuesday 08:00 - 19:30;
Centre, LS29 8TH		Wednesday 08:00 - 19:30;
		Thursday 08:00 - 18:30;
		Friday 08:00 - 18:30;
		Saturday 09:00 - 17:00
Lloyds Pharmacy, The	FEN67	Monday 09:00-20:00;
Ridge Medical Centre,		Tuesday 08:00-20:00;
BD7 3JX		Wednesday 08:00-14:00;
		Thursday 09:00-19:00;
		Friday 08:00-19:00;
		Saturday 09:00-13:00
Lloyds Pharmacy,	FLX03	Sunday 10:00-16:00;
Within Sainsbury's,		Monday 08:00-22:00;
BD21 3RU		Tuesday 08:00-22:00;
		Wednesday 08:00-22:00;
		Thursday 08:00-22:00;
		Friday 08:00-22:00;
		Saturday 08:00-22:00
Lloyds Pharmacy,	FNQ58	Sunday 10:00-16:00;
Within Sainsbury's,		Monday 07:00-23:00;
BD10 0QF		Tuesday 07:00-23:00;
		Wednesday 07:00-23:00;
		Thursday 07:00-23:00;
		Friday 07:00-23:00;
		Saturday 07:00-22:00
Mahmood Ltd, 214	FD814	Monday 09:00-13:00; Monday 14:00-17:30;
Huddersfield Road,		Tuesday 09:00-13:00; Tuesday 14:00-17:30;
BD12 0AD		Wednesday 09:00-13:00; Wednesday 14:00-17:30;
		Thursday 09:00-13:00; Thursday 14:00-17:30;
		Friday 09:00-12:45; Friday 14:45-17:30
Medichem Pharmacy,	FWA39	Sunday 10:00-18:00;
Wibsey & Queensbury		Monday 07:00-23:00;
Medical Centre, BD6		Tuesday 07:00-23:00;
1TD		Wednesday 07:00-23:00;
		Thursday 07:00-23:00;
		Friday 07:00-23:00;
14 III DI	E1/574	Saturday 08:00-20:00
Medihome Pharmacy	FK571	Monday 09:00-13:00; Monday 14:15-18:30;
40-42 Main Road, BD13		Tuesday 09:00-13:00;
4BL		Wednesday 09:00-13:00; Wednesday 14:15-18:30;
		Thursday 09:00-13:00; Thursday 14:15-17:30;
		Friday 09:00-13:00; Friday 14:15-18:30;
Moneton Pharmany 99	FNK59	Saturday 09:00-13:00  Monday 09:00 13:00: Monday 13:00 18:00:
Menston Pharmacy, 88 Main Street, LS29 6HY	LINVOA	Monday 09:00-13:00; Monday 13:00-18:00;
IVIAIII SUEEL, LOZY OFI		Tuesday 09:00-13:00; Tuesday 13:00-18:00; Wednesday 09:00-13:00; Wednesday 13:00-18:00;
		Thursday 09:00-13:00; Thursday 13:00-18:00;
		Friday 09:00-13:00; Friday 13:00-18:00
	]	1 Huay 03.00-13.00, 1 Huay 13.00-10.00

Midnight Pharmacy, 354	FKM28	Sunday 11:00-23:59;
Great Horton Road, BD7		Monday 08:30-23:59;
1QJ		Tuesday 08:30-23:59;
		Wednesday 08:30-23:59;
		Thursday 08:30-23:59;
		Friday 08:30-23:59;
		Saturday 09:00-23:59
Moorside Pharmacy,	FT261	Monday 08:30-20:30;
372 Dudley Hill Road,	1 1201	Tuesday 08:30-18:30;
BD2 3AA		Wednesday 08:30-20:30;
552 07 07		Thursday 08:30-18:30;
		Friday 08:30-18:30;
		Saturday 09:00-12:00
Morrisons Pharmacy,	FDP07	Sunday 10:00-16:00;
Rushton Avenue, BD3		Monday 08:30-20:00;
7HZ		Tuesday 08:30-20:00;
7112		Wednesday 08:30-20:00;
		Thursday 08:30-20:00;
		Friday 08:30-20:00;
		Saturday 08:30-18:00
Morrisons Pharmacy,	FF020	Sunday 10:00-16:00;
Unit 5, Victoria	11020	Monday 08:30-20:00;
Shopping Centre, BD8		Tuesday 08:30-20:00;
9TP		Wednesday 08:30-20:00;
916		Thursday 08:30-22:00;
		Friday 08:30-22:00;
		Saturday 08:30-19:00
My Pharmacy, Direct	FVX33	Monday 09:30-17:30
33a Victoria Road,	FVASS	Tuesday 09:30-17:30
•		Wednesday 09:30-17:30
BD21 1HD (Distance Selling		Thursday 09:30-17:30
Seming		Friday 09:30-17:30
Olive Lete Night	EL DZO	•
Olive Late Night	FLR72	Sunday 13:00-21:00;
Pharmacy 50 Highfield		Monday 07:30-23:00;
Lane, BD21 2EH		Tuesday 07:30-23:00;
		Wednesday 07:30-23:00;
		Thursday 07:30-23:00;
		Friday 07:30-23:00;
Olive Lete Nicola	FF000	Saturday 07:30-22:00
Olive Late Night	FF036	Sunday 12:00-22:00;
Pharmacy, 7 Broomhill		Monday 08:00-23:00;
Avenue, BD21 1ND		Tuesday 08:00-23:00;
		Wednesday 08:00-23:00;
		Thursday 08:00-23:00;
		Friday 08:00-23:00;
		Saturday 08:00-23:00

Oxenhope Pharmacy,	FD157	Monday 09:00-18:00;
•	FD137	Tuesday 09:00-18:00;
36 Station Road, BD22		·
9JJ		Wednesday 09:00-18:00;
		Thursday 09:00-18:00;
		Friday 09:00-18:00;
		Saturday 09:00-12:00
Pharmacy Care, Direct	FEJ81	Monday 09:00-13:00; Monday 13:00-18:00;
48 Gaisby Lane, BD18		Tuesday 09:00-13:00; Tuesday 13:00-18:00;
1AX		Wednesday 09:00-13:00; Wednesday 13:00-18:00;
		Thursday 09:00-13:00; Thursday 13:00-18:00;
		Friday 09:00-13:00; Friday 13:00-18:00
Raj's Chemist, 7 The	FCX96	Monday 09:00-13:00; Monday 14:00-18:00;
Square, BD8 0QB		Tuesday 09:00-13:00; Tuesday 14:00-18:00;
		Wednesday 09:00-13:00; Wednesday 14:00-18:00;
		Thursday 09:00-13:00; Thursday 14:00-18:00;
		Friday 09:00-13:00; Friday 14:00-18:00
Rehman Pharmacy, 238	FG457	Sunday 08:00-23:00;
Whetley Lane, BD8 9DJ		Monday 08:30-22:30;
		Tuesday 08:30-22:30;
		Wednesday 08:30-22:30;
		Thursday 08:30-22:30;
		Friday 08:30-22:30;
		Saturday 08:00-23:00
Rimmington Pharmacy,	FX417	Monday 08:30-18:00;
9 Bridge Street, BD1	FA417	Tuesday 08:30-18:00;
1RX		
IKA		Wednesday 08:30-18:00;
		Thursday 08:30-18:00;
		Friday 08:30-18:00;
	<b>5</b> 144 65	Saturday 09:00-17:00
Rooley Lane Pharmacy,	FWL07	Monday 00:00-18:30; Monday 22:30-23:59;
Inside Rooley Lane		Tuesday 00:00-18:30; Tuesday 22:00-23:59;
Medical Centre, BD4		Wednesday 00:00-18:30; Wednesday 22:00-23:59;
7SS		Thursday 00:00-18:30; Thursday 22:00-23:59;
		Friday 00:00-18:30
Rowlands Pharmacy,	FMF94	Monday 08:30-12:30; Monday 13:30-18:30;
151b Main Street, LS29		Tuesday 08:30-12:30; Tuesday 13:30-18:00;
0LZ		Wednesday 08:30-12:30; Wednesday 13:30-18:00;
		Thursday 08:30-12:30; Thursday 13:30-18:00;
		Friday 08:30-12:30; Friday 13:30-18:00
Rowlands Pharmacy, 26	FJF49	Monday 09:00-12:30; Monday 13:30-18:00;
Station Road, BD14		Tuesday 09:00-12:30; Tuesday 13:30-18:00;
6AN		Wednesday 09:00-12:30; Wednesday 13:30-18:00;
		Thursday 09:00-12:30; Thursday 13:30-18:00;
		Friday 09:00-12:30; Friday 13:30-18:00;
		Saturday 09:00-13:00

Rowlands Pharmacy, FHP68 Monday 08:30-13:00; Monday 14:00-7	18·00·
36a Halifax Road, BD13 Tuesday 08:30-13:00; Tuesday 14:00	-
5DE Wednesday 08:30-13:00; Wednesday	·
Thursday 08:30-13:00; Wednesday 14:0	
Friday 08:30-13:00; Friday 14:00-18:0	JU,
Saturday 09:00-12:30	10.00
Rowlands Pharmacy, 49 FP648 Monday 09:00-13:00; Monday 13:20-	
Kirkgate, BD20 0AQ	· ·
Wednesday 09:00-13:00; Wednesday	<i>,</i> 13:20-18:00;
Thursday 09:00-13:00; Thursday 13:2	20-18:00;
Friday 09:00-13:00; Friday 13:20-18:0	00;
Saturday 09:00-12:30	
Rowlands Pharmacy, FHE30 Monday 09:00-13:00; Monday 13:20-	18:00;
66-68 High Street, BD13 Tuesday 09:00-13:00; Tuesday 13:20	-18:00;
2PA Wednesday 09:00-13:00; Wednesday	
Thursday 09:00-13:00; Thursday 13:2	•
Friday 09:00-13:00; Friday 13:20-18:0	·
Saturday 09:00-13:00	, ,
Rowlands Pharmacy, 76 FNW86 Monday 09:00-13:00; Monday 13:20-	18:00:
Kirkgate, BD20 0PA Tuesday 09:00-13:00; Tuesday 13:20	,
Wednesday 09:00-13:00; Wednesday Wednesday	· ·
	· ·
Thursday 09:00-13:00; Thursday 13:2	
Friday 09:00-13:00; Friday 13:20-18:0	)0;
Saturday 09:00-13:00	
Rowlands Pharmacy, 81   FQ871   Monday 08:30-13:00; Monday 13:20-	
Fair Road, BD6 1TD Tuesday 08:30-13:00; Tuesday 13:20	
Wednesday 08:30-13:00; Wednesday	<i>,</i> 13:20-18:00;
Thursday 08:30-13:00; Thursday 13:2	20-18:00;
Friday 08:30-13:00; Friday 13:20-18:0	00;
Saturday 09:00-13:00	
Rowlands Pharmacy, FNV77 Sunday 10:00-16:00;	
Morrisons Shopping Monday 09:00-20:00;	
Mall, BD10 8EW Tuesday 09:00-20:00;	
Wednesday 09:00-20:00;	
Thursday 09:00-20:00;	
Friday 09:00-20:00;	
Saturday 09:00-20:00	
Rowlands Pharmacy, FLE78 Monday 08:30-13:00; Monday 13:20-	18:30:
Shipley Health Centre, Tuesday 08:30-13:00; Tuesday 13:20	•
	•
BD18 3EG Wednesday 08:30-13:00; Wednesday	•
Thursday 08:30-13:00; Thursday 13:2	· ·
Friday 08:30-13:00; Friday 13:20-18:3	su;
Saturday 09:00-12:00	10.00
Rowlands Pharmacy, St FRL01 Monday 08:30-13:00; Monday 13:20-	•
Andrew's Surgeries, Tuesday 08:30-13:00; Tuesday 13:20	•
BD21 2LD Wednesday 08:30-13:00; Wednesday	· ·
Thursday 08:30-13:00; Thursday 13:2	20-18:30;
Friday 08:30-13:00; Friday 13:20-18:3	30

Rowlands Pharmacy,	FWT08	Monday 08:00-18:00;
The Medical Centre,	1 77 100	Tuesday 08:00-18:00;
BD6 2DD		Wednesday 08:00-18:00;
800 200		Thursday 08:00-18:00;
		·
B	EVA 40.4	Friday 08:00-18:00
Rowlands Pharmacy,	FXM01	Monday 08:30-19:00;
Westbourne Green		Tuesday 08:30-19:00;
Community Health		Wednesday 08:30-19:00;
Centre, BD8 8RA		Thursday 08:30-19:00;
		Friday 08:30-19:00
Rowlands Pharmacy,	FJ294	Monday 09:00-18:00;
Whetley Medical Centre,		Tuesday 09:00-18:00;
BD8 9DW		Wednesday 09:00-18:00;
		Thursday 09:00-18:00;
		Friday 09:00-18:00;
		Saturday 09:00-12:00
Rowlands Pharmacy	FER22	Monday 08:30-13:00; Monday 13:20-18:00;
Wilsden Medical		Tuesday 08:30-13:00; Tuesday 13:20-18:00;
Practice, BD15 0NJ		Wednesday 08:30-13:00; Wednesday 13:20-18:00;
		Thursday 08:30-13:00; Thursday 13:20-18:00;
		Friday 08:30-13:00; Friday 13:20-18:00;
		Saturday 09:00-12:00
Rowlands Pharmacy,	FX840	Monday 08:30-13:00; Monday 13:20-18:30;
Windhill Green Health	1 70-10	Tuesday 08:30-13:00; Tuesday 13:20-18:30;
Centre, BD18 1QB		Wednesday 08:30-13:00; Wednesday 13:20-18:30;
Centre, BD16 1QB		Thursday 08:30-13:00; Wednesday 13:20-18:30;
		Friday 08:30-13:00; Friday 13:20-18:30;
0   0	ED) (05	Saturday 09:00-12:00
Sahara Pharmacy, 46-	FDV85	Sunday 11:30-23:59;
48 Duckworth Lane,		Monday 09:00-23:30;
BD9 5HB		Tuesday 09:00-23:30;
		Wednesday 09:00-23:30;
		Thursday 09:00-23:30;
		Friday 09:00-23:30;
		Saturday 09:00-23:59
Saltaire Pharmacy, 30	FPW77	Sunday 12:00-18:00;
Bingley Road, BD18		Monday 07:00-23:00;
4RS		Tuesday 07:00-23:00;
		Wednesday 07:00-23:00;
		Thursday 07:00-23:00;
		Friday 07:00-23:00;
		Saturday 09:00-23:00
Shakaanaara'a Chamist	E 1700	·
Shakespeare's Chemist,	FJ789	Monday 09:00-19:00;
9 Oak Lane, BD9 4PU		Tuesday 09:00-19:00;
		Wednesday 09:00-19:00;
		Thursday 09:00-19:00;
		Friday 09:00-19:00;
		Saturday 09:00-16:00

Sharief Healthcare Ltd,	FMA86	Monday 09:00-17:00;
1054 Manchester Road,		Tuesday 09:00-17:00;
BD5 8NN		Wednesday 09:00-17:00;
		Thursday 09:00-17:00;
		Friday 09:00-17:00
Siddique Pharmacy, Ltd	FTN20	Sunday 12:00-22:00;
215 Great Horton Road,		Monday 07:00-22:00;
BD7 3BG		Tuesday 07:00-22:00;
		Wednesday 07:00-22:00;
		Thursday 07:00-22:00;
		Friday 07:00-22:00;
		Saturday 07:00-22:00
Steeton Pharmacy, The	FG960	Monday 08:45-13:00; Monday 14:15-18:00;
Health Centre, BD20		Tuesday 08:45-13:00; Tuesday 14:15-18:00;
6NU		Wednesday 08:45-13:00; Wednesday 14:15-18:00;
		Thursday 08:45-13:00; Thursday 14:15-18:00;
		Friday 08:45-13:00; Friday 14:15-18:00
Superdrug Pharmacy,	FAG29	Monday 08:00-18:00;
32-34 Bank Street, BD1		Tuesday 08:00-18:00;
1PR		Wednesday 08:00-18:00;
		Thursday 08:00-18:00;
		Friday 08:00-18:00;
		Saturday 09:00-17:30
Superdrug Pharmacy,	FX712	Monday 09:00 - 17:30;
35-39 Low Street, BD21		Tuesday 09:00 - 17:30;
3PP		Wednesday 09:00 - 17:30;
		Thursday 09:00 - 17:30;
		Friday 09:00 - 17:30;
		Saturday 09:00 - 17:30
Sykes Chemists, 191	FP360	Monday 09:00-13:15; Monday 14:30-18:00;
Long Lee Lane, BD21		Tuesday 09:00-13:15; Tuesday 14:30-18:00;
4UX		Wednesday 09:00-13:00;
		Thursday 09:00-13:15; Thursday 14:30-18:00;
		Friday 09:00-13:15; Friday 14:30-18:00
Tait's Pharmacy, 45	FHX50	Monday 09:00-17:30
Saltaire Road, BD18	111/00	Tuesday 09:00-17:30
3HZ (Distance Selling)		Wednesday 09:00-17:30
or iz (Distance Selling)		Thursday 09:00-17:30
		Friday 09:00-17:30
Tesco In-Store	FQQ50	Sunday 10:00 - 16:00;
Pharmacy, Brighouse	1 4450	Monday 08:00 - 23:00;
Road, BD13 1QD		Tuesday 07:00 - 23:00;
Roau, DD 13 1QD		Wednesday 07:00 - 23:00;
		Thursday 07:00 - 23:00;
		Friday 07:00 - 23:00;
		Saturday 07:00 - 23:00,
		Saturday 07.00 - 22.00

Tesco In-Store	FHW84	Sunday 10:00-16:00;
Pharmacy, Great Horton		Monday 08:00-22:30;
Road, BD7 4EY		Tuesday 06:30-22:30;
		Wednesday 06:30-22:30;
		Thursday 06:30-22:30;
		Friday 06:30-22:30;
		Saturday 06:30-22:00
Tesco In-Store	FM437	Sunday 10:00-16:00;
Pharmacy, Halifax		Monday 08:00-21:00;
Road, BD6 2DW		Tuesday 08:00-21:00;
·		Wednesday 08:00-21:00;
		Thursday 08:00-21:00;
		Friday 08:00-21:00;
		Saturday 08:00-21:00
Tesco In-Store	FE704	Sunday 11:00-17:00;
Pharmacy, Peel Centre,		Monday 08:00-22:30;
BD1 4RB		Tuesday 06:30-22:30;
		Wednesday 06:30-22:30;
		Thursday 06:30-22:30;
		Friday 06:30-22:30;
		Saturday 06:30-22:00
Thackley Pharmacy,	FF071	Monday 09:00-18:00;
566 Leeds Road, BD10		Tuesday 09:00-18:00;
8JH		Wednesday 09:00-18:00;
		Thursday 09:00-18:00;
		Friday 09:00-18:00;
		Saturday 09:00-12:00
The Care Pharmacy,	FRQ71	
Unit 3, Chesterfield		
House, BD4 8SH		
(Distance Selling)		
Well Pharmacy, 47 Scott	FTR43	Monday 08:30-18:30;
Street, BD21 2JH		Tuesday 08:30-18:30;
		Wednesday 08:30-18:30;
		Thursday 08:30-18:30;
		Friday 08:30-18:30
Westcliffe Pharmacy,	FW441	Sunday 10:00-20:00;
Westcliffe Medical		Monday 07:00-22:00;
Centre, BD18 3EE		Tuesday 07:00-22:00;
		Wednesday 07:00-22:00;
		Thursday 07:00-22:00;
		Friday 07:00-22:00;
		Saturday 07:00-22:00
Woodroyd Pharmacy,	FKH04	Monday 08:30-18:15;
The Woodroyd Centre,		Tuesday 08:30-18:15;
BD5 8EL		Wednesday 08:30-18:15;
		Thursday 08:30-18:15;
		Friday 08:30-18:15;
		Saturday 09:00-12:30

Wrose Pharmacy, Wrose Health Centre, BD2 1QG	FEK10	Monday 09:00-13:00; Monday 14:00-18:00; Tuesday 09:00-13:00; Tuesday 14:00-18:00; Wednesday 09:00-13:00; Wednesday 14:00-18:00; Thursday 09:00-13:00; Thursday 14:00-18:00; Friday 09:00-13:00; Friday 14:00-18:00
Your Health Pharmacy, 18a North Street, BD21 3SG (Distance Selling)	FH249	Monday 09:00-17:00; Tuesday 09:00-17:00; Wednesday 09:00-17:00; Thursday 09:00-17:00; Friday 09:00-17:00;
Your Local Boots Pharmacy, 162 Clayton Road, BD7 2RD	FVV73	Monday 09:00-18:30; Tuesday 09:00-18:30; Wednesday 09:00-18:00; Thursday 09:00-18:30; Friday 09:00-18:30; Saturday 09:00-12:30
Your Local Boots Pharmacy, 2 Oakminster House, BD17 6LR	FXX79	Monday 08:30-18:00; Tuesday 08:30-18:00; Wednesday 08:30-18:00; Thursday 08:30-18:00; Friday 08:30-18:00; Saturday 09:00-12:30
Your Local Boots Pharmacy, 202 Haworth Road, BD9 6NJ	FMK77	Monday 08:30-18:00; Tuesday 08:30-18:00; Wednesday 08:30-18:00; Thursday 08:30-18:00; Friday 08:30-18:00; Saturday 09:00-13:00
Your Local Boots Pharmacy, 34 Heights Lane, BD9 6JB	FMM57	Monday 09:00-18:30; Tuesday 09:00-18:30; Wednesday 09:00-18:30; Thursday 09:00-18:30; Friday 09:00-18:30
Your Local Boots Pharmacy, 367 Bowling Old Lane, BD5 7AT	FP055	Monday 09:00-18:00; Tuesday 09:00-18:00; Wednesday 09:00-18:00; Thursday 09:00-18:00; Friday 09:00-18:00
Your Local Boots Pharmacy, 48 Ashbourne Road, BD21 1LA	FW344	Monday 07:00-20:00; Tuesday 08:30-18:15; Wednesday 08:30-18:15; Thursday 08:00-20:00; Friday 08:30-18:15
Your Local Boots Pharmacy, 845 Barkerend Road, BD3 8QJ	FLA63	Monday 09:00-18:15; Tuesday 09:00-18:15; Wednesday 09:00-18:15; Thursday 09:00-18:15; Friday 09:00-18:15; Saturday 09:00-12:00

Your Local Boots Pharmacy, Horton Bank Practice, BD7 4PL	FV788	Monday 08:30-18:15; Tuesday 08:30-18:15; Wednesday 08:30-18:15; Thursday 08:30-18:15; Friday 08:30-18:15;
V 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	EVOCA	Saturday 09:00-12:00
Your Local Boots Pharmacy, Kensington	FX232	Monday 08:00-18:30; Tuesday 08:00-18:30;
Street Health Centre,		Wednesday 08:00-18:30;
BD8 9LB		Thursday 08:00-18:30;
		Friday 08:00-18:30;
		Saturday 09:00-13:00
Your Local Boots	FXT05	Monday 07:00-20:30;
Pharmacy, Kingsway		Tuesday 08:30-18:30;
Health Centre, BD16		Wednesday 08:30-18:30;
4RP		Thursday 08:30-18:30;
		Friday 08:30-18:30
Your Local Boots	FTV45	Monday 08:00-18:30;
Pharmacy, Park Road		Tuesday 08:00-18:30;
Medical Centre, BD5		Wednesday 08:00-18:30;
0SG		Thursday 08:00-18:30;
		Friday 08:00-18:30; Saturday 09:00-12:00
Your Local Boots	FHN56	Monday 08:30-12:00;
Pharmacy, Thornton	1111130	Tuesday 08:30-18:00;
Medical Centre, BD13		Wednesday 08:30-18:00;
3LF		Thursday 08:30-18:00;
		Friday 08:30-18:00;
		Saturday 09:00-12:30
Your Local Boots	FN040	Monday 08:30-17:30;
Pharmacy, Unit 3, New		Tuesday 08:30-17:30;
Line Retail Park, BD10		Wednesday 08:30-17:30;
9AP		Thursday 08:30-17:30;
		Friday 08:30-17:30;
		Saturday 08:30-13:00

# 6. List of Pharmacies and Services provided

See separate Document Appendix 6: List of Pharmacies and Services provided

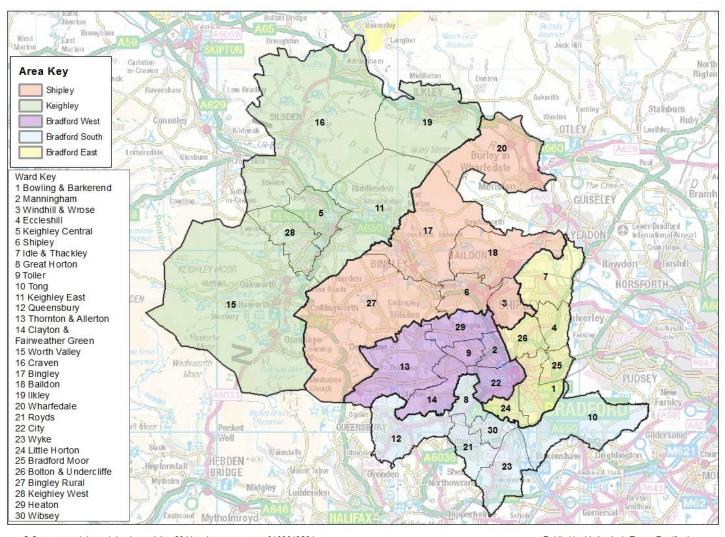
## 7. Maps

A number of maps have been produced showing the location of services within the District. These maps have helped to draw conclusions about whether current services meet the needs of the Bradford District population.

Map Number	Map Title
1	Map of Bradford District, including Area and Ward Boundaries
2	Map of Contractors on the pharmaceutical list within Bradford District, including
	Hospitals and GP practices
3	Map of Pharmacies with 1 mile radius
4	Map of Pharmacies within Bradford East
5	Map of Pharmacies within Bradford South
6	Map of Pharmacies within Bradford West
7	Map of Pharmacies within Keighley
8	Map of Pharmacies within Shipley
9	Map of Pharmacies and Deprivation
10	Map of Pharmacies providing Supervised Medication
11	Map of Pharmacies Providing Needle Exchange
12	Map of Pharmacies Providing Stop Smoking Support and Smoking Prevalence
13	Map of Pharmacies Providing Flu Vaccination
14	Map of Pharmacies providing NUMSAS
15	Map of Pharmacies open for Weekdays after 6pm
16	Map of Pharmacies open Saturdays
17	Map of Pharmacies open Sundays
18	Map of Pharmacies and Population Density
19	Map of Controlled Locality: Addingham
20	Map of Controlled Locality: Howarth

#### Map 1: Map of Bradford District, including boundaries of Areas used for area profiling

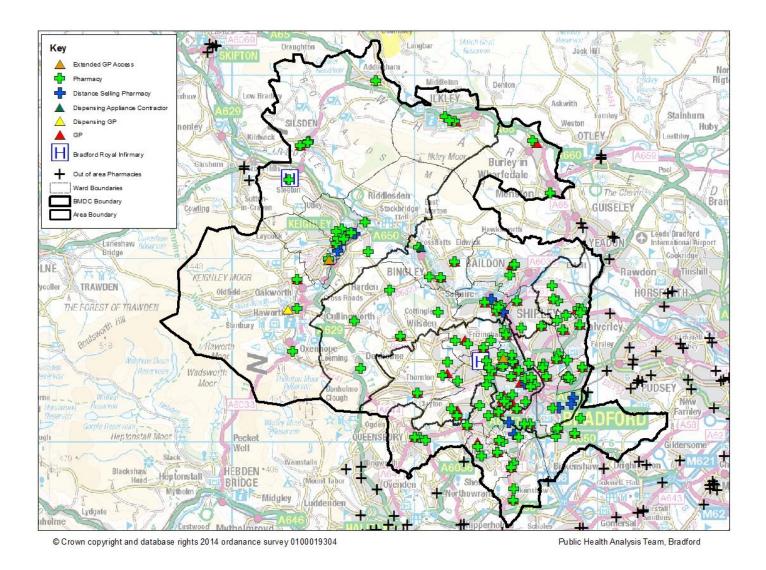
There are five areas in the District Compiled of 30 wards.



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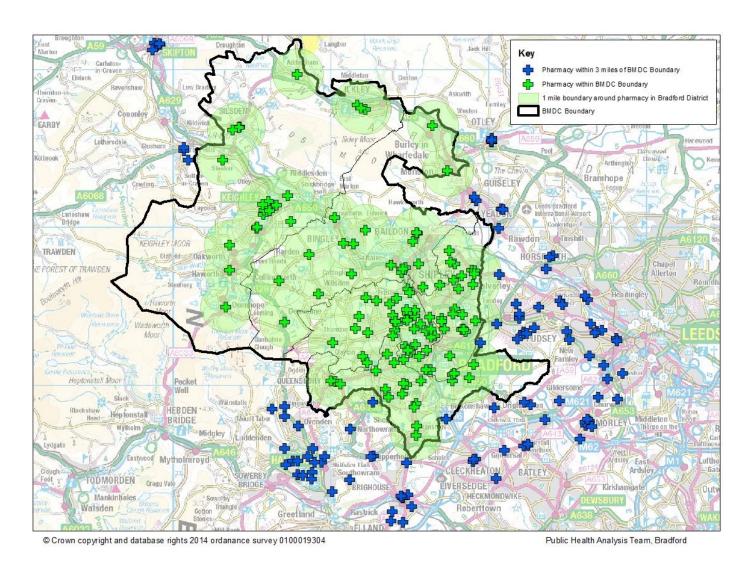
#### Map 2: Map of Contractors on the pharmaceutical list within Bradford District, including Hospitals and GP practices

This map shows that there is a good geographical distribution of pharmacies across the District. The number of pharmacies is greatest in the more densely populated areas of the district.

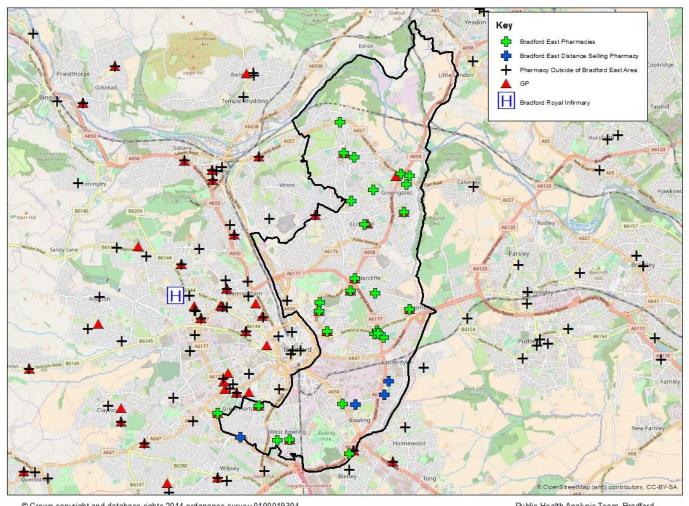


#### Map 3: Map of Pharmacies with 1-mile radius

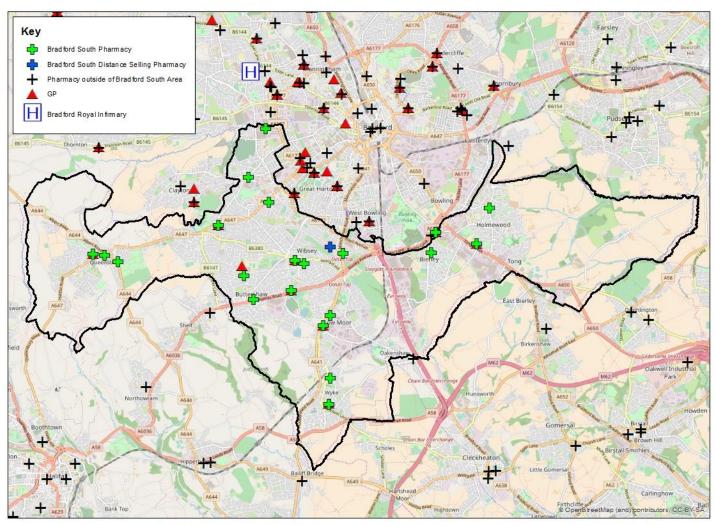
This map shows that almost all of the Bradford District population is within 1 mile of a pharmacy. The only areas where this is not the case are very rural areas in the North West of the District.



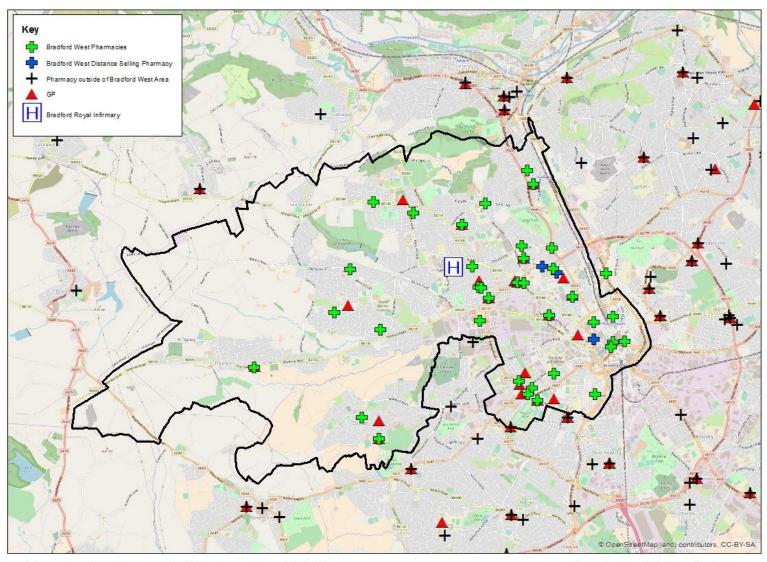
Map 4: Map of pharmacies within Bradford East Area



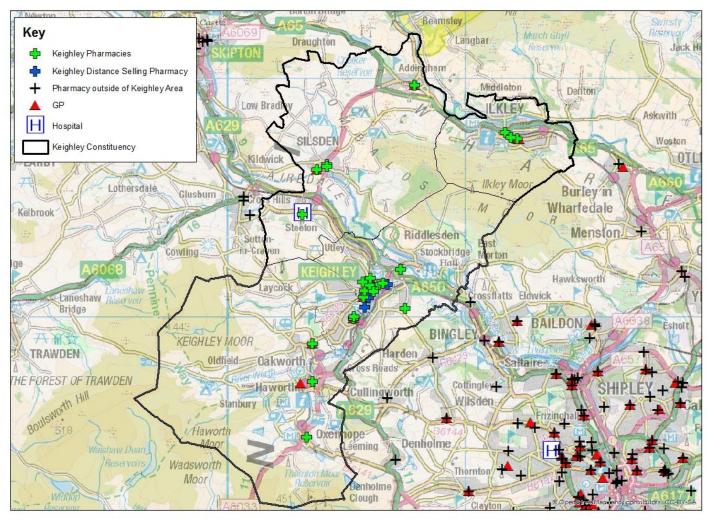
Map 5: Map of Pharmacies within Bradford South Area



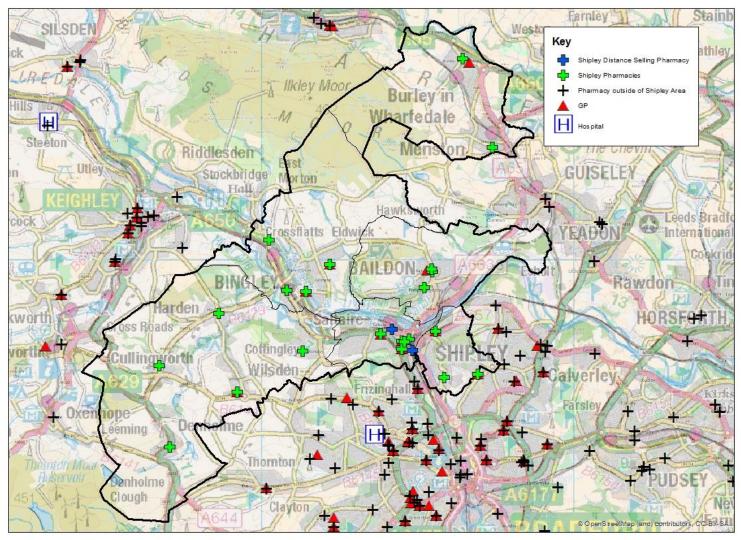
Map 6: Map of Pharmacies within Bradford West Area



Map 7: Map of Pharmacies within Keighley Area

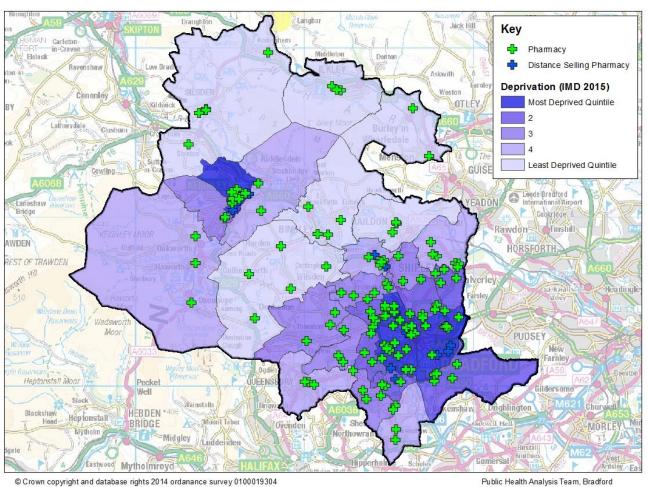


Map 8: Map of Pharmacies within Shipley Area



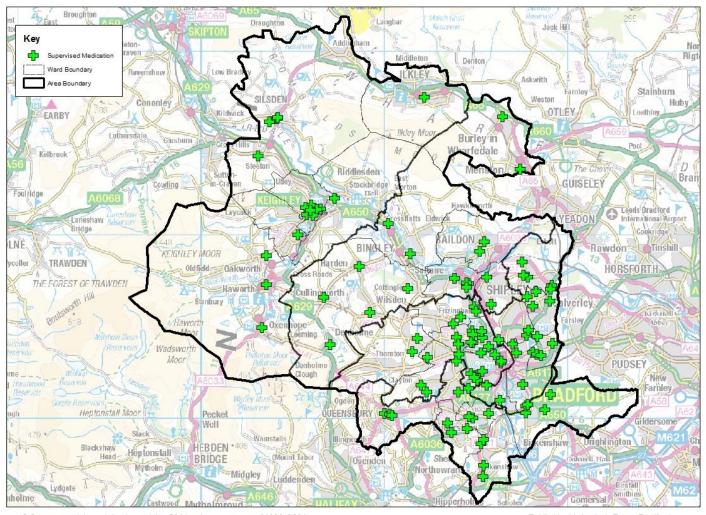
#### **Map 9: Map of Deprivation and Pharmacies**

This map shows that the number of pharmacies is higher in the more deprived parts of the District, consistent with population need.



# Map 10: Map of Pharmacies providing Supervised Medication

This map shows the distribution of pharmacies which provide supervised medication for those who are in structured Drug Treatment. The distribution of services is consistent with areas of high need, as recognised in the substance misuse service review.

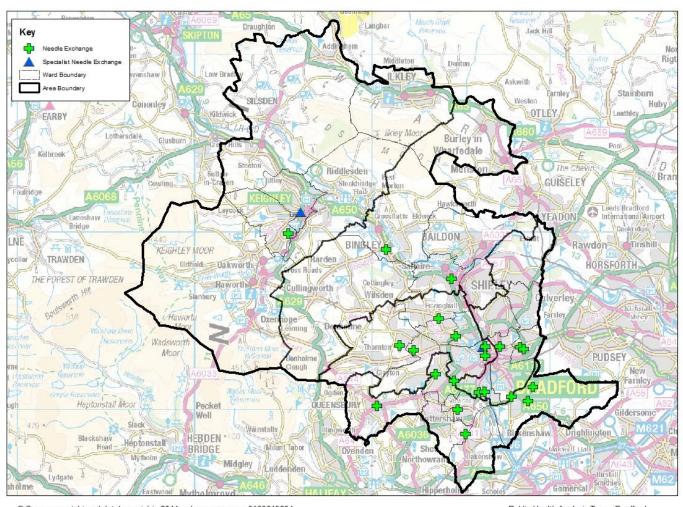


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### Map 11: Map of Pharmacies Providing Needle Exchange

This map shows that there are 22 pharmacies providing Needle Exchange services. Provision is consistent with the need identified in the recent community needle exchange review.

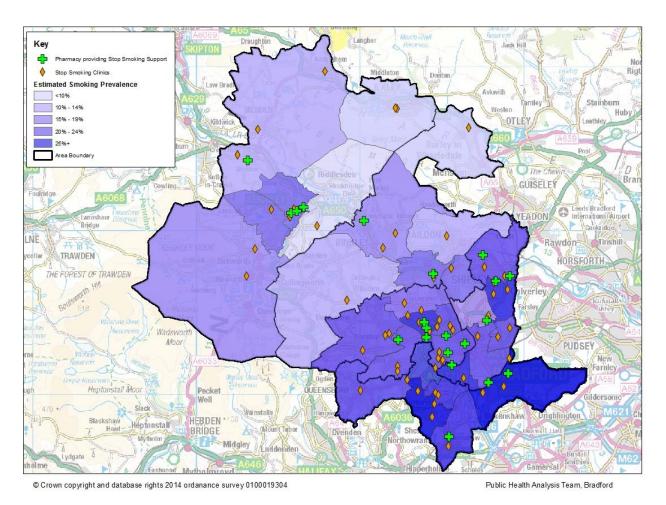


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# Map 12: Map of Pharmacies Providing Stop Smoking Support and Smoking Prevalence

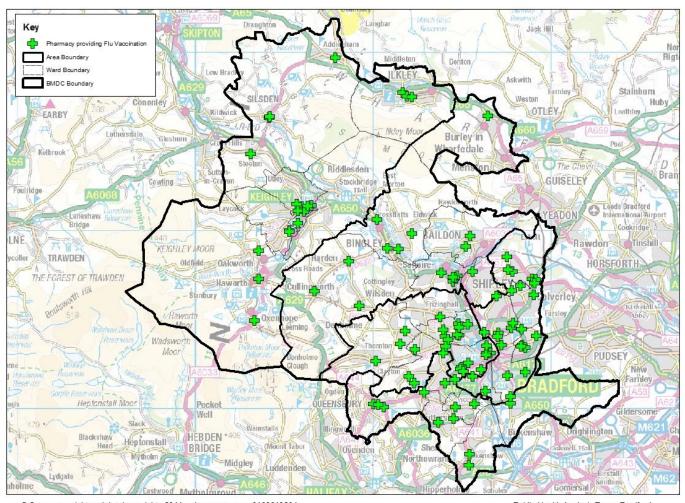
24 pharmacies provide stop smoking support across the District. Provision is consistent with those areas in highest need (as identified by smoking prevalence).



N.B. Smoking Prevalence was calculated using the estimated smoking prevalence at GP practice level, the data was then aggregated to ward and area using postcode of GP practice, and not the postcode of where the patient is resident. Therefore, some caution needs to be used when interpreting the data.

### Map 13: Map of Pharmacies Providing Flu Vaccination

A number of pharmacies offer the seasonal flu vaccine, in addition to the GP provided service. There is a good geographical distribution of locations in which people in the District can access the flu vaccine.

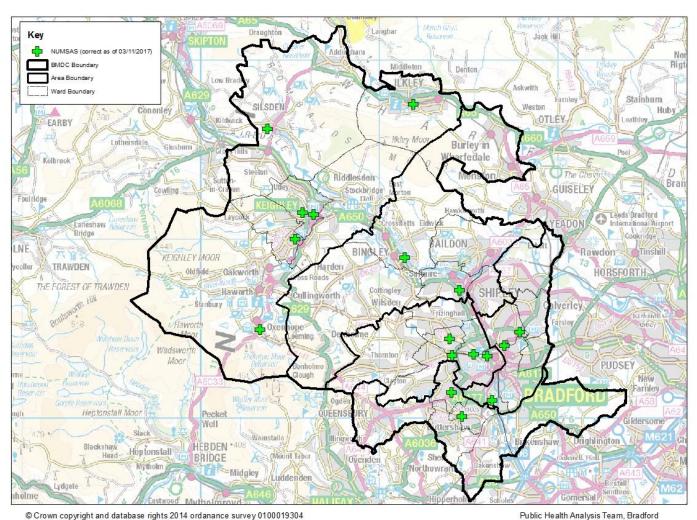


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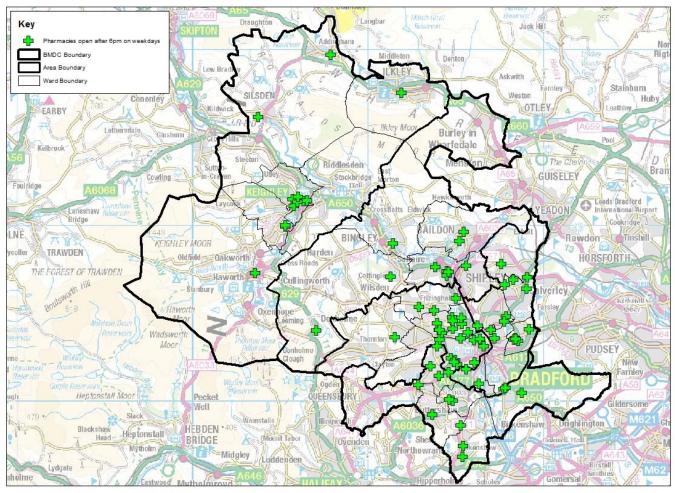
# Map 14: Map of Pharmacies providing NHS Urgent Medicine Supply Advanced Service (NUMSAS)

This map shows that the pharmacies providing the NHS Urgent Medicine Supply Advanced Service.



### Map 15: Map of Pharmacies Open Weekdays after 6pm

There are 81 pharmacies open past 6pm on weekdays. These are largely clustered around the urban areas which are most densely populated. There are fewer pharmacies open beyond 6pm in the more rural areas. Most pharmacies, however, appear to be easily accessible via transport links.

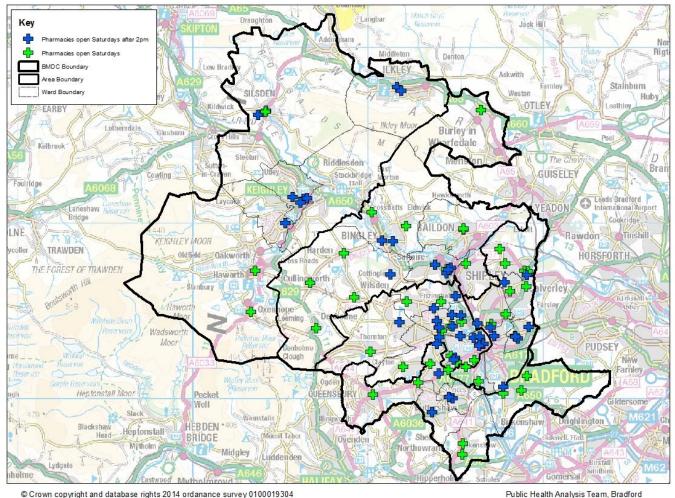


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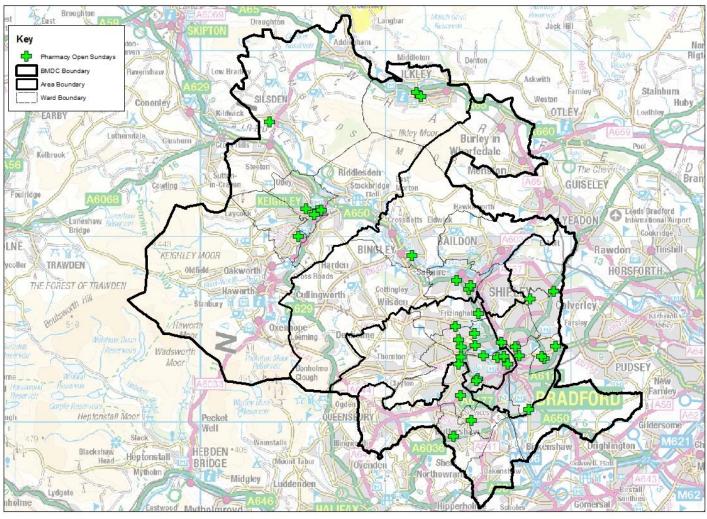
### Map 16: Map of Pharmacies open Saturdays

There are 95 pharmacies open Saturdays, 47 of which are opened past 2pm. These are largely clustered around the urban areas which are most densely populated. There are fewer pharmacies open on a Saturday in the more rural areas. However, most pharmacies appear to be easily accessible via transport links.



# Map 17: Map of Pharmacies open Sundays

This map shows that 38 pharmacies open on Sundays. These are clustered around the main urban centres.

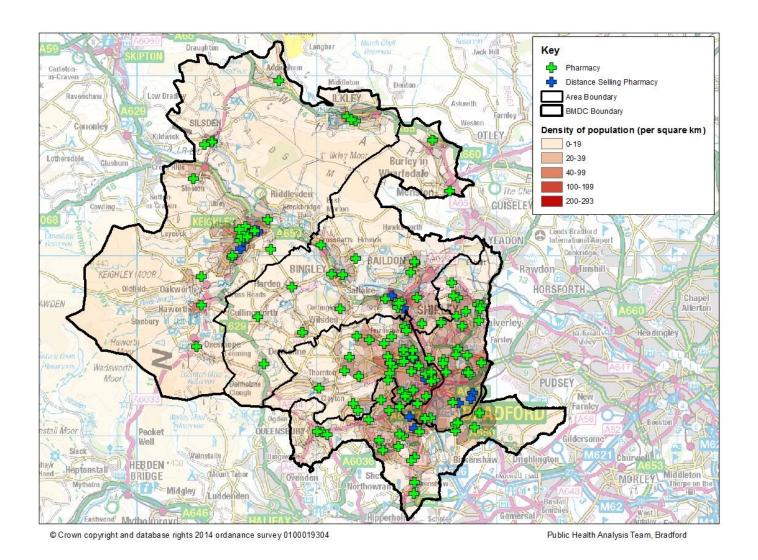


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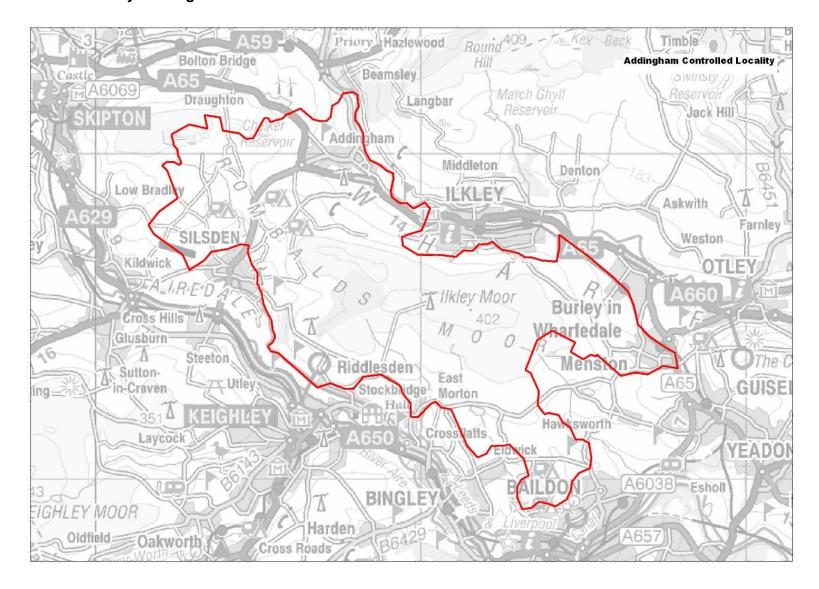
Public Health Analysis Team, Bradford

# Map 18: Map of Pharmacies including Population Density

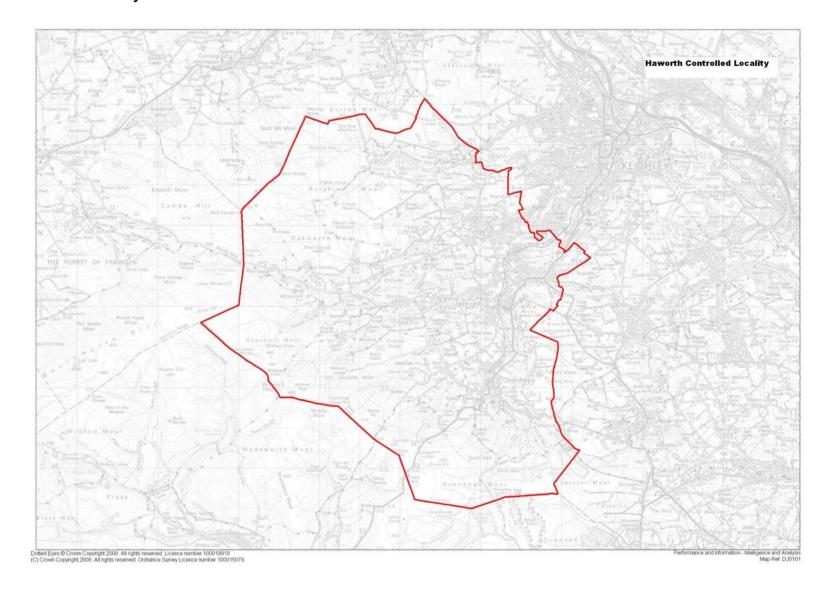
This map shows that the distribution of pharmacies closely corresponds with where people live in the District.



Map 19: Map of Controlled Locality: Addingham



Map 20: Map of Controlled Locality: Howarth



# 8. Data Sources

Population	Mid 2016 population Estimates (LA level)	
	(Mid 2015 for smaller areas) ONS	
Population Density	2011 Census, ONS and ordinance survey,	
	boundary line 2012	
Indices of Deprivation	Department for Communities and Local	
	Government 2015	
Income Deprived Households	PHE Local Health, 2015	
Employment Support Allowance &	Department for Work and Pensions,	
Incapacity Benefits	February 2017	
Unemployment claimant count (Job	Department for Work and Pensions,	
Seekers Allowance + those claiming	September 2017	
Universal Credit who are out of work		
Overweight and Obese Children	National Child Measurement Programme,	
	2010-2015	
Obese Adults	Public Health Outcomes Framework:	
	https://fingertips.phe.org.uk/profile/public-	
	health-outcomes-framework	
Life Expectancy	Primary Care Mortality Database, 2013-15	
Standardised Mortality Ratios	Primary Care Mortality Database, 2006-15	
Infant Mortality	Primary Care Mortality Database, 2006-	
	2015	
Smoking Prevalence	Tobacco Control Profiles:	
	https://fingertips.phe.org.uk/profile/tobacco-	
	<u>control</u>	

### 9. PNA Consultation process, feedback and responses

### **PNA** consultation process

Formal consultation on the draft of the PNA document, as required within the regulations, began on 7<sup>th</sup> November 2017, and continued until the 6<sup>th</sup> Jan 2018. All of the consultees required by the regulations were sent an e-mail with a link to the consultation document, with the option to request a hard document if they preferred.

The comments and responses received from this formal consultation are detailed here, including responses and amendments made to the draft PNA as a result of these comments. Only points of clarification and minor amendments have been made to the draft PNA; no substantive changes to the content have been made, and therefore no further period of consultation has been required.

### What Questions were asked?

Question 1: I am responding to the questionnaire on behalf of:

- A local pharmacist
- A dispensing practice
- A non-dispensing practice
- A Health and Social Care Provider
- A Local Authority
- The Local Medical Committee
- The Local Pharmacy Committee
- A local CCG
- As an elected member/MP
- A voluntary or community sector organisation
- As a member of the public
- Other

Question 2: Do you think that the draft PNA captures all of the relevant information needed to identify gaps in pharmaceutical provision in Bradford District? If no, why not?

Question 3: The Bradford PNA does not identify any gaps in the provision of pharmaceutical services. Do you agree? If not, why not?

Question 4: Do you think that the draft PNA accurately reflects the pharmacy needs of local people in Bradford? If not, why not?

Question 5: Is there any additional information that you feel should be included in the PNA? If yes, what additional information do your think should be included?

Question 6: Please use the box below to add any additional comments you have about the content of the PNA.

## Responses

### (i) Number of responses

21 responses were received in total from a range of stakeholders, detailed in the following table.

Respondent	Number of respondents
Dispensing practice	1
Health & Social Care provider	1
Community pharmacy	15
CCG	1
Local authority	1
Member of public	1
Local Pharmacy committee	1
Local Medical Committee	1

# (ii) Summary of responses

		Response		
Question	Yes	No	Don't know	
Do you think that the draft PNA captures all of the relevant information needed to identify gaps in pharmaceutical provision in the Bradford District?	16	5	0	
The Bradford District PNA does not identify any gaps in the provision of pharmaceutical services. Do you agree?	18	3	0	
Do you think that the draft PNA accurately reflects the pharmacy needs of local people in Bradford District?	13	6	2	
Is there any additional information that you feel should be included in the PNA?	6	13	2	

# (iii) Detailed responses to specific questions

# Do you think that the draft PNA captures all of the relevant information needed to identify gaps in pharmaceutical provision in the Bradford District?

Comment	Response
I do not feel the PNA goes into specific localities	The PNA draws on demographic and other
in enough detail. It does not take into account	information on the health and care needs of
the levels of service patients are receiving.	people in the District. Although this information is summarised in the PNA at an area level, the PNA has been informed by the JSNA and also the ward profiles. A statement has been added to Section 7 to highlight this.
The provision of emergency hormonal contraception services is due to discontinue in March 2018. Not all 25-year-old girls wish to see their GP about emergency hormonal contraception, or attend specialist centres.	This was a budgetary decision taken by CBMDC in 2017. Full details, including mitigation actions and the equality impact assessment are available at <a href="https://www.bradford.gov.uk">www.bradford.gov.uk</a>
It is mainly a stay as we are document without thought for the future, and not particularly linked to the strategic health direction.	Section 3.5 includes a summary of, and link to the Community Pharmacy Forward View. This sets out the sector's ambitions to enhance and expand the personalised care, support and wellbeing services that community pharmacies provide. Section 6 outlines some of the factors likely to impact on pharmacy provision over the next three years, including the Five Year Forward View and the GP Forward View. This section has been amended to include the development of

	communities/localities in the District, including
	primary care homes, and considers the potential
	role of community pharmacy.
Not enough information regarding health	The PNA provides a summary of health and care
services provided in the District.	services in the District. This includes primary
	care, acute trusts, the care trust, GP out of hours,
	dental services, optometry services and
	pharmacies. The PNA recognises that not all
	health, care and support services are listed
	because there are a significant number of
	services across the District. Such services are
	provided by a range of providers in the District,
	including the VCS.
Yes, the PNA contains relevant information	
about the health and pharmaceutical needs of	
the population.	

# The Bradford PNA does not identify any gaps in the provision of pharmaceutical services. Do you agree?

0	D
Comment	Response
Particular areas in Bradford have had growth in	The PNA describes the projected population
population numbers and reduced commissioned	growth over the next three years (which is the life
services. These are not addressed in the PNA.	span of the PNA); this includes future housing
	plans. Whilst there has been some population
	growth since the publication of the last PNA, the
	current community pharmacy network has
	absorbed the demand for services. This is
	supported by the findings from the public
	questionnaire in which 91% of respondents
	stated that they were able to get to a pharmacy
	of their choice when they needed to.
No mention of domiciliary medication use	Domiciliary MURs can be completed by
reviews. Often house bound or care home	community pharmacies if they feel it is
patients are those in most need of a review.	appropriate, after approval via NHS England.
	Bradford City and Districts CCGs commission
	MeSH (Medicines Support at Home). This is a
	medicines optimisation service which reduces
	inappropriate polypharmacy in vulnerable
	people. The service is unique as it is a detailed
	level 3 medication review carried out in the
	person's own home. It addresses intentional and
	unintentional non-adherence, rationalises,
	· · ·
	optimises and provides information on medicines
	for people. As it is performed in a person's own
	home it can also address hoarding, waste and
	supply issues.
Self-care is not working. Most medicines	It is not within the scope of this review to
available over the counter are of dubious value.	comment on the effectiveness of any medicines
	or other products available in pharmacy settings.
	Promoting self-care is a priority in the District.
	There is a District wide Self Care and Prevention
	Programme, which works with a number of
	partners including the VCS, general practice and
	partitions including the voo, general practice and

	community pharmacy.
In some* areas we have found feedback from	The purpose of the PNA is to assess the need for
patients regarding local pharmaceutical services	local pharmaceutical services, rather than make
is that of overwhelming dissatisfaction.	an assessment on the quality of current services.
	Under the provisions of the National Health
	Service (Pharmaceutical and Local
	Pharmaceutical Services) Regulations 2013
	pharmacy contractors are required to have in
	place arrangements for the handling and consideration of complaints. If there are
	consideration of complaints. If there are concerns about individual pharmacies then these
	should be raised with the relevant pharmacy or
	NHS England as the commissioner.
Yes. The draft PNA reflects our view that	Section 6.3 of the PNA has been amended.
Bradford Metropolitan District has an excellent	Section 6.5 of the FNA has been amended.
spread of pharmaceutical services and that	
there are no gaps in the provision of	
pharmaceutical services.	
Friedrick Control	
The draft PNA conclusions make reference to	
changes to extended GP access schemes and	
this may impact on the need for pharmacy	
services, particularly pharmacies opening	
beyond 6pm and at weekends. The PNA should	
make reference to the existing pharmacy	
opening hours, which are mapped and	
demonstrate extensive opening beyond 6pm	
during the week, and over the weekend. We	
suggest that the conclusion should be amended	
to reflect the current extended opening hours,	
and how these are likely to be sufficient to cover	
and extended GP opening hours, that the	
situation will remain under review (with named	
organisations taking the lead for this), and any additional cover is likely to be met by an existing	
pharmacy contractor currently on the	
pharmacy contractor currently on the pharmaceutical list.	
אוומוווומטבטנוטמו ווטנ.	

<sup>\*</sup>Please note that information naming specific pharmacies in the feedback has been suppressed.

# Do you think that the draft PNA accurately reflects the pharmacy needs of local people in Bradford?

Comment	Response
Population growth not taken into account.	The PNA describes the projected population growth over the next three years (which is the life span of the PNA); this includes future housing plans. Whilst there has been some population growth since the publication of the last PNA, the current community pharmacy network has absorbed the demand for services. This is supported by the findings from the public questionnaire in which 91% of respondents stated that they were able to get to a pharmacy of their choice when they needed to.

Minor ailment service. Think that should be re-The commissioning of advanced, additional or introduced based on location of the pharmacy. other services from community pharmacies is a Next to the pharmacy where I work there is a commissioning decision. nursery and a primary school which will be useful. Pharmacies should be able to carry on providing This was a budgetary decision taken by CBMDC emergency hormonal contraceptive services to in 2017. Full details, including mitigation actions 25 and under, as we have now undergone the and the equality impact assessment are available adult and vulnerable training events, and the at www.bradford.gov.uk healthy living pharmacy assessments to give Unnecessary hospital admissions are still a Keeping people well and in their own home is a priority for the health and care system in problem. Bradford District. It is recognised that community pharmacy has an important role as part of the health and care system. This is recognised in section 6 of the PNA. The PNA has considered a range of factors Lack of choice in the area has led to a perceived monopoly that many patients are compelled to related to choice, including geographical access utilise where if they were given a choice they to pharmacies, opening hours, and services probably would not. provided; it has not identified any gaps based on these factors. The regulations recognise that although more than one pharmacy may be owned by the same organisation, that individual pharmacies are separate pharmacy contractors. 'Regulation 18(2)(b)(i) – Members noted that the applicant has not given any evidence that there is not a reasonable choice with regard to obtaining pharmaceutical services in Although the two existing pharmacy contracts are owned by the same organisation, each pharmacy is a separate pharmacy contractor and offers the population a choice in services. pharmacv teams. responsible pharmacist, opening hours, location and style of pharmacy (health centre and high street shop).' Reference: The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 Does not identify any possible needs and does The PNA has examined the needs from the not offer any possible services to meet needs. perspective of the NHS terms of service. The PNA describes some of the opportunities for community pharmacy to provide additional services to enhance the health and wellbeing of people in Bradford District. It is likely that such services will be commissioned from existing pharmacy providers who have expressed a willingness in the Community Pharmacy Network to provide additional services, rather than through the commissioning of new pharmacies. Yes, the draft PNA accurately reflects the needs of the population in Bradford.

# Is there any additional information that you feel should be included in the PNA? If yes, what additional information do you think should be included?

Comment	Response
More integration with GPs and other health	Section 6 of the PNA has been amended to
providers to support public health and self-care.	include the development of communities and
	localities in the District, including primary care homes, and considers the potential role of
	community pharmacy.
More information about depression and mental	The PNA has utilised information from the JSNA
health	on mental health and mental wellbeing. This can
	be accessed here: <a href="https://jsna.bradford.gov.uk/">https://jsna.bradford.gov.uk/</a>
New services to help meet the needs of the	The commissioning of advanced, additional or
population and minor ailments.	other services from community pharmacies is a commissioning decision. The PNA describes
	some of the opportunities for community
	pharmacy to provide additional services to
	enhance the health and wellbeing of people in
	Bradford District. It is likely that such services will
	be commissioned from existing pharmacy
	providers who have expressed willingness in the
	Community Pharmacy Network to provide additional services, rather than through the
	commissioning of new pharmacies.
Regulation 4 outlines that the PNA must contain	Map 2 from the appendix has been included in
the information set out in schedule 1. Schedule	the main body of the report.
1, point 7 in turn outlines that the PNA must	
include a map of provision. It is recommended	
that the map of the premises at which pharmaceutical services are provided is included	
in the body of the PNA.	
Bradford is a university city. As such there will	Section 4.1 of the PNA has been amended to
be an influx (both on a daily and term-time	include a statement about the university
basis) of (mainly young) people. The	population.
requirements of this cohort of population should be noted within the PNA. This need is met by	
the current pharmaceutical provision but this	
should be captured within the PNA.	
There has been a significant growth in the	Section 3 of the PNA has been amended to
number of Healthy Living Pharmacies (HLP)	include a statement about Health Living
over the past 12 months. The body of the PNA	Pharmacies.
should make reference to HLPs. The number of Healthy Living Pharmacies is set to rapidly	
increase by November 2017. The final	
published PNA should include updated figures of	
the number of HLP pharmacies. Currently there	
are 112 HLPs within the district.	
The PNA does not define the type of pharmacy	Section 3 of the PNA has been amended to
(e.g. Distance-selling pharmacy, 100-hour pharmacy, Dispensing Appliance Contractor)	clarify the different types of pharmacy available.
and the restrictions this places upon them. E.g.	
Distance-selling pharmacy is not defined and it	
is therefore not clear that a distance-selling	
pharmacy cannot provide face-to-face essential	
services.	

### Pharmaceutical list

Dispensing appliance contractors (appliance suppliers are a specific sub-set of NHS pharmaceutical contractors who supply, on prescription, appliances such as stoma and incontinence aids, dressings, bandages etc). They cannot supply medicines. There is one Dispensing Appliance Contractor in Bradford and this contractor should be included within the PNA and the relevant maps (marked as a Dispensing Appliance Contractor).

#### Additional comments

#### Comment

The draft PNA mentions the high teenage pregnancy rate in Bradford but YORLMC understands that support for emergency contraception and sexual health funding for under 25s has been withdrawn from pharmacies by the local authority. Ending this service risks a further rise in the teenage pregnancy rate and is an development.

services unwelcome

Certain areas, particularly the outer district areas, have had substantial growth in housing and people living there. These have not been taken into account appropriately. Particularly in areas that are having increased people moving there as affordable houses are being built; these are also paired with the ageing population of that also. When taking all consideration, the current pharmacy provisions of those areas are likely to be inadequate, but this is not mentioned in the PNA. I would like more consideration of these areas for this reason.

As a GP in \*\*\* my colleagues and I have found the following locally:

- 1) Feedback from patients regarding local pharmaceutical services is that of overwhelming dissatisfaction.
- 2) Lack of choice in the area has led to a perceived monopoly that many patients are compelled to utilise where if they were given a choice they probably would
- 3) Over the last 3-5 years, with the number of affordable houses being built in the area, there has been a huge influx of new patients. However, there has been no increase in the pharmacy services available.
- 4) GPs at some\* practices have said that they have raised concerns to NHS

### Response

This was a budgetary decision taken by CBMDC in 2017. Full details, including mitigation actions and the equality impact assessment are available at www.bradford.gov.uk

The PNA describes the projected population growth over the next three years (which is the life span of the PNA); this includes future housing plans. Whilst there has been some population growth since the publication of the last PNA, the current community pharmacy network has absorbed the demand for services. This is supported by the findings from the public questionnaire in which 91% of respondents stated that they were able to get to a pharmacy of their choice when they needed to.

- 1) The purpose of the PNA is to assess the need for local pharmaceutical services, rather than make an assessment on the quality of current services. Under the provisions of the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 pharmacy contractors are required to have in place arrangements for the handling and consideration complaints. If there are concerns about individual pharmacies, then these should be raised with the relevant pharmacy or NHS England as the commissioner.
- 2) The PNA has considered a range of factors related to choice, including geographical access to pharmacies, opening hours, and services provided; it

England due to a number of recent significant events.

has not identified any gaps based on these factors. The regulations recognise that although more than one pharmacy may be owned by the same organisation, that individual pharmacies are separate 'Regulation pharmacy contractors. 18(2)(b)(i) – Members noted that the applicant has not given any evidence that there is not a reasonable choice with regard to obtaining pharmaceutical services in this area. Although the two existing pharmacy contracts are owned by the same organisation, each pharmacy is a separate pharmacy contractor and offers the population a choice in services, pharmacy teams, responsible pharmacist, opening hours, location and style of pharmacy (health centre and high street shop).' Reference: The National Health Service (Pharmaceutical and Pharmaceutical Services) Regulations 2013.

- 3) The PNA describes projected the population growth over the next three years (which is the life span of the PNA); this includes future housing plans. Whilst there has been some population growth since the publication of the last PNA, the current community pharmacy network has absorbed the demand for services. This is supported by the findings from the public questionnaire in which 91% respondents stated that they were able to get to a pharmacy of their choice when they needed to.
- 4) The purpose of the PNA is to assess the need for local pharmaceutical services, rather than make an assessment on the quality of current services. Under the provisions of the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 pharmacy contractors are required to have in place arrangements for the handling and consideration complaints. If there are concerns about individual pharmacies then these should be raised with the relevant pharmacy or NHS England as the commissioner.

Bradford City and Districts CCGs understand the issues in the development of the PNA, but in future would welcome involvement of both strategic and clinical commissioning staff at the earliest opportunity. The CCGs realise that, although the current primary focus of community pharmacy is related to issuing prescriptions, the CCGs will welcome the future involvement of

A PNA Steering Group was established on behalf of the Health and Wellbeing Board to oversee the development of the PNA. The Steering Group included representation from the CCGs.

Section 6 of the PNA has been amended to include the development of communities/localities in the District, including

community pharmacy in the development of the primary care home (PCH) communities and locality hubs, as community pharmacists have a key role in promoting and supporting self-care. As the new PCH communities and locality hubs become established, it will be important to determine where the nearest pharmacies are located and whether thev are appropriately. Given there us a wide coverage of community pharmacies across Bradford, it is not thought to be a problem currently, nor anticipated to become so in the next few years. Related to GPs working at scale and the development of PCH communities, and greater locality hub working, it would be helpful in the future if GPs could change the nomination of a patient to another community pharmacy as a one off to enable ETP to take place.

primary care homes, and considers the potential role of community pharmacy.

Does not identify any further needs or services where services have been withdrawn or lacking. No mention of any new services on offer or that could be offered in the future.

One of the main purposes of the PNA is to support decision making in terms of market entry for NHS England. It can also be used to support local commissioners to identify opportunities to deliver health and wellbeing services and interventions in pharmacy settings. The PNA highlights the Community Pharmacy Forward View which sets out the sector's ambitions to radically enhance and expand personalised care, support, and wellbeing services that community pharmacies provide. The development of any new services is a commissioning decision. The PNA describes some of the opportunities for community pharmacy to provide additional services to enhance the health and wellbeing of people in Bradford District. It is likely that such services will be commissioned from existing pharmacy providers who have expressed willingness in the Community Pharmacy Network to provide additional services, rather than through the commissioning of new pharmacies.

Thank you for our copy of the draft PNA. We acknowledge that a thorough process has been followed in liaising with, and seeking feedback the public, relevant parties, organisations during the production of the PNA, and we confirm that we believe it meets the requirements as set out in the regulations. Access to pharmacies for residents in the District is also improved Keighley neighbouring pharmacies e.g. on map 17 there are additional pharmacies open on a Sunday in Skipton that Bradford residents should be able to access easily. The North Yorkshire draft PNA has concluded that no changes are required to provision in these areas.

The conclusions of the North Yorkshire PNA are important to note. It highlights that there are community pharmacies in the North Yorkshire area that enhance access to community pharmacy services for residents in Bradford District.

Community Pharmacy support the overall

content and sentiment expressed in the draft PNA but have a number of suggestions as to how it could be improved in line with the regulatory requirements.

With reference to "The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013":

# Schedule 1 – Information to be contained in pharmaceutical needs assessments

# Section 2.2. How the assessment was carried out?

Community Pharmacy West Yorkshire are confident that these points have been taken in to account but do not believe this has been explained clearly enough in the draft PNA. The PNA should include an **explanation** of how the assessment was carried out, and in particular; how it has determined what the localities are in its area and the differing needs of these localities and how it has taken in to account the different needs of people who share a protected characteristic.

The draft PNA is not, in our view, explicit enough when explaining the position taken on gaps in provision.

The current conclusion of the PNA states 'There is no evidence from this PNA that there is insufficient pharmacy provision in the Bradford District'. This is a negative statement which does not clearly conclude that there is a reasonable and adequate choice of pharmacies in all areas of Bradford.

We suggest that terminology from the regulations is used to add to the clarity of the document for one of its significant purposes; market entry. The sentiment of the draft PNA could be summarised with the following statements which we would suggest should be added to the final version

- "There are no current gaps in the provision of necessary services in the area of the Health and Wellbeing Board"
- "There are no current gaps in the provision of other relevant services in the area of the Health and Wellbeing Board"
- "The PNA has not identified any future needs which could not be met by pharmacies already currently on the

Section 7 has been amended to include an explanation of how the assessment was carried out.

The terminology used in section 7 to describe the assessment of need has been amended to ensure consistency with the regulations.

pharmaceutical list which would form part of its commissioning intentions."

### Part 2 – Pharmaceutical needs assessment

Regulation 9(1). Community Pharmacy West Yorkshire also believes that all areas of Bradford have a reasonable choice of pharmaceutical services.

Regulation 9(2). We are not aware of any expected significant changes to demography, population size or changes to the health or wellbeing in the area which would mean, within the life of this PNA, that there would be a future need for additional pharmaceutical services for which there is a planned intention to commission. If this is supported by the PNA we would recommend including a statement to the following effect:

 "The PNA, having regard to likely changes to the number of people requiring pharmaceutical services, the demography of the area and the risks to the health and wellbeing of people in the area, has not identified any future needs which are not already met by providers currently on the pharmaceutical list" The terminology used in section 8 to describe the assessment of need has been amended to ensure consistency with the regulations.

### Points of accuracy

### P 12 Table 1 - Services

The term 'Enhanced Services' when used to describe pharmaceutical services only refers to those which are commissioned by NHS England. The only 'enhanced services' commissioned in Bradford is Palliative Care. The other services listed in the 'enhanced services' if commissioned would be likely done so as a locally commissioned service. It would be clearer if the table listed the services currently commissioned (under each type e.g. Enhanced, locally commissioned) and listed separately the potential services that could be commissioned.

Table 1 refers to Enhanced services which could potentially be commissioned locally by NHS England rather than those that are currently commissioned.

### Section 3.3

The paragraph refers to distance-selling GPs. It is assumed that this is a typo and the term dispensing GP should be used.

# Section 5.2 Changes in provision since previous PNA

This section of the draft PNA incorrectly states that 3 pharmacies are providing the Pharmacy First service. No pharmacies in the Bradford

Section 3.3 amended to the term dispensing GP.

Section 5.2 amended to state that no pharmacies will be providing Pharmacy First from April 2018.

District / Bradford City CCG geographies are commissioned to provide the Pharmacy First service. AWC CCG has written to pharmacies within their geography to state that they will no longer commission Pharmacy First and the service will end in March 2018.

### Section 6.6

The draft PNA states: If there are any changes during the next three years that result in a significant change in need of pharmaceutical services, the Health and Wellbeing Board will make a revised assessment or publish a supplementary statement in accordance with the regulations.

Supplementary statements can only be made about the provision of pharmaceutical services. They cannot be used to describe changes in the need for pharmaceutical services. The Health and Wellbeing Board is only required to consider a revised assessment if there is a significant change to the need for pharmaceutical services. This should be clarified in the final version of the PNA.

Introductory statement amended in line with the regulations.

<sup>\*</sup>Please note that information naming specific pharmacies in the feedback has been suppressed

### 10. Additional Resources

- NHS England Five Year Forward View: <a href="https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf">https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf</a>
- GP Five Year Forward View: <a href="https://www.england.nhs.uk/wp-content/uploads/2016/04/gpfv.pdf">https://www.england.nhs.uk/wp-content/uploads/2016/04/gpfv.pdf</a>
- The Pharmacy Integration Fund: <a href="https://psnc.org.uk/the-healthcare-landscape/the-pharmacy-integration-fund-phif/#">https://psnc.org.uk/the-healthcare-landscape/the-pharmacy-integration-fund-phif/#</a>
- The NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013: http://www.legislation.gov.uk/uksi/2013/349/pdfs/uksi\_20130349\_en.pdf
- Pharmacy: A Way Forward for Public Health [online] PSNC and Pharmacy Voice, with the support of the RPS English Pharmacy Board
   <a href="https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/643520/Pharmacy\_a\_way\_forward\_for\_public\_health.pdf">https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/643520/Pharmacy\_a\_way\_forward\_for\_public\_health.pdf</a>