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Executive Summary

Community pharmacies provide a range of services including dispensing medicines, promoting health and wellbeing and early detection of diseases. They can offer long opening hours and are situated in local communities, which means they can be more easily accessible than most other community health services. They are key to connecting local people and communities to healthcare and public health services that they need.

There are 40 community pharmacies located throughout Hammersmith and Fulham. This Pharmaceutical Needs Assessment (PNA) reviews the need for pharmacy services and assesses the current service provision to identify gaps. The PNA is a statutory responsibility of the Health and Wellbeing Board. It is used for informing decisions on applications for new pharmacies, changes in premises and services of existing pharmacies.

This PNA assesses the health and wellbeing needs of the population of Hammersmith & Fulham with respect to pharmacy services. The current pharmacy provision and their services have been examined in detail, including users’ views. Key findings are outlined below.

**Key demographics and health needs**
- Hammersmith & Fulham is a small and densely populated borough with high inequalities in deprivation and life expectancy.
- Nearly half of the population were born abroad and nearly one-third identify as being from BME groups, the highest proportion of who live in the northern wards of College Park and Old Oak and Wormholt and White City.
- Circulatory diseases and cancers are the biggest causes in the differences in life expectancy between the least and most deprived.
- Recorded mental illness, HIV and smoking are high in the borough.
- Childhood vaccination coverage is low.
- Falls and the risk of isolation and loneliness in older residents are high.

**Key findings from user views**
- Community survey respondents stated that they are happy with the pharmacy services they receive in the borough because of their good location, opening times and friendly and knowledgeable staff.
- Respondents mostly use the pharmacies to obtain prescription medications, repeat prescriptions and over the counter medications.
- The top three services respondents would use if provided were health checks, new medicines service or medicine use reviews.
- Suggestions for improvement included reducing waiting times and longer opening times.
Health and Wellbeing Board Statements on Service Provision
The categorisation of these services into those stipulated by the PNA regulations are summarised in the table that follows.

<table>
<thead>
<tr>
<th>Necessary services: current provision (Schedule 1, paragraph 1)</th>
<th>Necessary services: gaps in provision (Schedule 1, paragraph 2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pharmacy provision in Hammersmith and Fulham is sufficient for supplying a necessary pharmaceutical service in the borough.</td>
<td>No gaps in provision of necessary services.</td>
</tr>
</tbody>
</table>

Other relevant services: current provision (Schedule 1, paragraph 3)
- Medicine Use Review service
- New Medicine Service
- Appliance Use Reviews
- Stoma Appliance Customisation Service
- National NHS England Flu Service
- NHS Urgent Medicine Supply Advanced Service

Other services (Schedule 1, paragraph 5)

Commissioned Services:
- NHS Health Checks
- Supervised Administration
- Needle Exchange Services
- Stop Smoking Services
- Emergency Hormonal Contraception

Privately provided services:
- Minor Ailments Scheme
- Out of Hours Palliative Care Service
- Alcohol Misuse Service
- Weight Management Services
- Sexual Health Screening and Treatment
- Care Home Advice service

Improvements and better access (Schedule 1, paragraph 4)

Not commissioned:
- Alcohol Misuse services

Necessary Services
These services are fundamental for patients to obtain prescribed medicines in a safe and reliable manner. All pharmacies are required to deliver and comply with the specifications for all essential services.

The range of options for dispensing NHS prescriptions, facilities within pharmacies, the range of opening hours and the close proximity of pharmacies to local residents are sufficient for supplying a necessary pharmaceutical service with no gaps.
However, there may be opportunities for existing pharmacies, by working collaboratively with commissioners, to align current opening hours to widen provision of early morning, late evening and Sunday opening hours in College Park and Old Oak, Wormholt and White City, Ravenscourt Park, Sands End, Palace Riverside and Parsons Green.

Other Relevant Services
These are services provided which are not necessary to meet the need for pharmaceutical services in the area, but which nonetheless have secured improvements or better access to pharmaceutical services. They include Medicine Use Reviews, New Medicines Service, Appliance Use Reviews, Stoma Appliance Customisation service, NHS Urgent Medicine Supply Advanced Service and NHS England Flu Vaccination Service:
- Most Hammersmith and Fulham residents live close to a pharmacy that provides Medicine Use Review services, New Medicine Services and Flu Vaccinations. Therefore, they are found to be sufficient for supplying a relevant service with no gaps.
- Stoma Customisation Services and Appliance Use Reviews are supplied by pharmacies and other local health services and specialist nurses in the borough, which is sufficient for supplying a relevant service with no gaps.

Other Services
Other services are services that are provided or arranged by a local authority, NHS England or delivered privately to meet the needs of local populations. The Health and Wellbeing board is satisfied that these services are sufficient to secure improvement, or better access to pharmaceutical services, in its area. In Hammersmith and Fulham these are:
- NHS Health Checks
- Supervised Administration
- Needle Exchange Services
- Stop Smoking Services
- Minor Ailments Scheme
- Out of Hours Palliative Care Service
- Emergency Hormonal Contraception
- Weight Management Services
- Sexual Health Screening and Treatment services
- Care Home Advice service

Improvements and Better Access
The Health and Wellbeing Board has identified Alcohol Misuse Service as a service that would, if provided, secure better access to pharmaceutical services of a specific type. This is not a commissioned service and therefore pharmacies would not be able to apply to fulfil this, unless it is commissioned by NHS England as an enhanced service.
Recommendations

**Recommendation 1:** Currently, no Hammersmith and Fulham pharmacies are commissioned to deliver out of hours palliative care drugs. The Health and Wellbeing Board recommends further exploration by relevant stakeholders to identify if there is a current or future need for the provision of this service.

**Recommendation 2:** Hammersmith and Fulham is the 6th worst borough in London for rate of deaths caused by respiratory diseases considered preventable. Consideration should be given as to what further support pharmacies could provide to patients to improve adherence to prescribed inhalers and work more closely with general practice clinicians to improve health outcomes.

**Recommendation 3:** Some areas of the borough do not have an open pharmacy before 9am, after 7pm and/ or on Sundays. The Health and Wellbeing Board recommends that existing pharmacies work collaboratively with commissioners to explore opportunities to widen provision of opening hours, particularly those in and near to the following wards: College Park and Old Oak, Wormholt and White City, Ravenscourt Park, Sands End, Palace Riverside and Parsons Green.

**Recommendation 4:** NHS Pharmacies are contracted to participate in up to six public health campaigns each year. Only one campaign per year has been delivered through pharmacies in recent years. Better co-ordination between NHS England, Public Health England, CCGs and Local Authorities to ensure pharmacies are better utilised to deliver key health promotion messages to the public is recommended.

**Summary**

Hammersmith and Fulham Health and Wellbeing Board is satisfied that the current pharmacy provision is sufficient for supplying a necessary pharmaceutical service for the borough.
Chapter 1 – Introduction

Role of Pharmacies

1.1. Pharmacies provide a range of care responsibilities for patients and the public including dispensing medications, providing basic health checks, healthcare and preventative care and educating patients on the use of prescriptions and over-the-counter medications.

1.2. Community pharmacists and their teams work at the heart of communities and are trusted professionals in supporting individual, family and community health. Community pharmacies are often patients’ and the public’s first point of contact and, for some, their only contact with a healthcare professional. Community pharmacies are not only a valuable health asset, but also an important social asset because often they are the only healthcare facility located in an area of deprivation.

Purpose of the Pharmaceutical Needs Assessment

1.3. The Pharmaceutical Needs Assessment (PNA) identifies the key health needs of the local population and how those needs are being fulfilled, or could be fulfilled, by pharmaceutical services in different parts of the borough. The role of the PNA is twofold:

- to inform local plans for the commissioning of pharmaceutical services and
- to support the ‘market entry’ decision making process (undertaken by NHS England) in relation to applications for new pharmacies or changes of pharmacy premises.

1.4. As outlined in the 2013 regulations, this PNA describes pharmaceutical services in terms of the following summary categories:

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Necessary Services – Current Provision</strong></td>
<td>services currently being provided which are regarded to be “necessary to meet the need for pharmaceutical services in the area”. This includes services provided in the Borough as well as those in neighbouring Boroughs.</td>
</tr>
<tr>
<td><strong>Necessary Services – Gaps in Provision</strong></td>
<td>services <em>not</em> currently being provided which are regarded by the HWB to be necessary &quot;in order to meet a current need for pharmaceutical services&quot;.</td>
</tr>
<tr>
<td><strong>Other Relevant Services – Current Provision</strong></td>
<td>services provided which are not necessary to meet the need for pharmaceutical services in the area, but which nonetheless have &quot;secured improvements or better access to pharmaceutical services&quot;. This includes services provided in the Borough as well as those in neighbouring Boroughs.</td>
</tr>
</tbody>
</table>
| **Improvements and Better Access – Gaps in Provision** | services *not* currently provided, but which the HWB is satisfied would “secure improvements, or better
Other NHS Services: any services provided or arranged by a local authority, NHS England, the CCG, an NHS trust or an NHS foundation trust which affects the need for pharmaceutical services in its area or where future provision would secure improvement, or better access to pharmaceutical services specified type, in its area.

Policy Background Relating to the PNA

1.5. From 2006, NHS Primary Care Trusts (PCT) had a statutory responsibility to assess the pharmaceutical needs for its area and to publish a statement of its assessment and of any revised assessment. This was generally undertaken by public health teams within the PCTs.

1.6. With the abolition of PCTs and the creation of Clinical Commissioning Groups in 2013 Public Health functions were transferred to local authorities. Health and Wellbeing boards were introduced and hosted by local authorities to bring together Public Health, Adult Social Care, Children’s services and Healthwatch.


1.8. The 2018-21 Pharmaceutical Needs Assessment must be produced and published by 1st April 2018. The Health and Wellbeing Board are also required to revise their latest PNA publication if they deem there to be significant changes in pharmaceutical services within the 2018-21 timeframe.

1.9. The PNA must be put out for consultation for a minimum of 60 days prior to its publication. The 2013 Regulations list those persons and organisations that the HWB must consult, which include:

- Any relevant local pharmaceutical committee (LPC) for the HWB area
- Any local medical committee (LMC) for the HWB area
- Any persons on the pharmaceutical lists and any dispensing GP practices in the HWB area
- Any local Healthwatch organisation for the HWB area, and any other patient, consumer and community group, which in the opinion of the HWB has an interest in the provision of pharmaceutical services in its area
- Any NHS Trust or NHS Foundation Trust in the HWB area
- NHS England
- Any neighbouring Health and Wellbeing board.

1.10. The NHS Pharmaceutical Services and Local Pharmaceutical Services Regulations 2013 and the Department of Health Information Pack for Local Authorities and Heath and Wellbeing boards provide guidance as to the requirements that should be contained in the PNA publication and the process to be followed to develop the
publication. The development and publication of this PNA has been carried out in accordance with these Regulations.

1.11. Joint Strategic Needs Assessments are strategic valuation of the health and wellbeing needs of the local population, and this PNA builds on the findings of the JSNA by supporting the commissioning and the development of appropriate, sustainable and effective pharmacy services. For further information on the JSNA please refer to http://www.jsna.info.
Chapter 2 - Local Health and Wellbeing Priorities

2.1 All Health and Wellbeing boards are required to produce a Health and Wellbeing Strategy that sets out how partners will meet local health needs, improve outcomes and reduce health inequalities within the borough.

2.2 The Hammersmith & Fulham Joint Health and Wellbeing Strategy 2016 - 2021 addresses health inequalities, child obesity and mental illness. This will be achieved by improving the health and wellbeing of the people of Hammersmith and Fulham and putting them at the heart of a high quality and sustainable health and social care system.

2.3 The Hammersmith & Fulham Joint Health and Wellbeing Strategy 2016 - 2021 identifies four priorities for the local area:
   1. Supporting good mental health for all
   2. Supporting children, young people and families to have the best possible start
   3. Addressing the rising tide of long-term conditions
   4. Building a sustainable health and social care system that is fit for the future

2.4 Alongside this the Hammersmith and Fulham Health and Wellbeing Board is working with Kensington and Chelsea and Westminster to pool together budgets to support the health and social care services to work together more closely. This budget is called Better Care Fund which aims to support residents in Hammersmith and Fulham by providing people with the right care, in the right place, at the right time, including expansion of care in community setting. This includes:
   1. Helping people self-manage, providing care navigation, working in partnership with the local community and voluntary sector and local faith groups.
   2. Investing in locality-based social work, working alongside GPs and care navigators to prevent reliance on expensive health and social care packages.
   3. Reducing delayed discharges from hospital through strengthening 7-day social care provision.
   4. Integrating NHS and social care systems around the NHS number through a single point of access across health and social care, to ensure those frontline professionals, and ultimately all patients and service users, have access to all of the records and information they need.
   5. Improving outcomes through transforming the quality, consistency and coordination of care across nursing and care homes in Hammersmith and Fulham and improving primary care support to our care homes.
   6. Coordinating dementia support across health and social care ensuring an effective pathway from early diagnosis to end of life care.

2.5 Northwest London Sustainability and Transformation Plans (STP) outline how the Local Authorities and NHS within the sub-region, including Hammersmith and Fulham will work together to radically transform the way they provide health and
social care for the population. Their aim is to provide excellent quality care in the right place and when needed, help people to look after themselves and maximise opportunities to keep the healthy majority healthy. There are five delivery areas the STP will focus:
1. Radically upgrading prevention and wellbeing
2. Eliminating unwarranted variation and improving long-term condition management
3. Achieving better outcomes and experiences for older people
4. Improving outcomes for children and adults with mental health needs
5. Ensuring we have safe, high quality sustainable acute services

2.6 Additionally Northwest London Collaboration of Clinical Commissioning Groups is launching Prescribing Wisely. Prescribing Wisely is a set of recommendations for GPs and other prescribers to reduce the prescribing of medicines that can be purchased without a prescription. This supports patient self-care as well as potentially reducing GP appointments and prescription costs.

2.7 Hammersmith and Fulham CCG and the GP Federation have developed a joint strategy which sets out a shared vision for an integrated health and social care system, with primary care as the foundation for better population health across the borough. The Primary Care Strategy was published in mid-September 2017. The CCG and GP Federation have worked closely together and in consultation with local residents, GP members and other stakeholders.

2.8 The strategy, which builds on the Whole System Integration Care programme, sets out an ambition for achieving a more unified and co-ordinated care system for local residents. This will be achieved in a series of transformational stages:
- Stage 1. Reinvigorating existing General Practice networks to become ‘primary care networks’ which will deliver services at scale for the benefit of local residents
- Stage 2. Bringing primary care networks together into a unified approach to community based care – this will be through the platform of a Multispecialty Community Provider (MCP); a place based model of integrated care which serves the whole population
- Stage 3. Adding hospital-based services to the MCP for a co-ordinated, outcome-based borough-wide approach to all care which we describe as ‘accountable care’

2.9 A Hammersmith and Fulham GP Federation Board and Programme Management Office (PMO) will oversee the operational delivery of the work streams aligned to the strategy, the progress of primary care network configuration will be reviewed with GP members and the CCG and GP Federation will continue to develop partnerships with the Local Authority Adult Social Care, Children’s and Public Health teams to explore opportunities for further integration.

2.10 This PNA has taken these local policies and strategies into consideration when reviewing the pharmaceutical needs.
Chapter 3 - The Pharmaceutical Needs Assessment Process

3.1 This PNA has been developed using a range of information sources to describe and identify population needs and current service provision from the network of community pharmacies (see table 3.1). These include:
- Nationally published data
- Joint Strategic Needs Assessment
- A survey to Hammersmith and Fulham pharmacy providers
- A community questionnaire to the patients and public of Hammersmith and Fulham
- Comments made during the consultation process

Table 3.1 PNA 2018-21 data sources

<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Pharmaceutical Services</td>
<td>Commissioning data held by the NHS England Commissioning data held by London Borough of Hammersmith and Fulham Survey completed by community pharmacy providers Direct phone call with pharmacies to clarify any discrepancies</td>
</tr>
<tr>
<td>Patients and the Public</td>
<td>Community questionnaire</td>
</tr>
</tbody>
</table>

3.2 These data have been combined to describe the Hammersmith and Fulham population, current and future health needs and how pharmaceutical services can be used to support the Health and Wellbeing Board (HWB) to improve the health and wellbeing of our population.

Methodological Considerations

Geographical Coverage

3.3 For the purposes of the PNA the geographical area of Hammersmith & Fulham is presented using these approaches to define localities:
- Electoral wards are used to summarise demographic and health need. Hammersmith and Fulham has 16 in total which are illustrated in Figure 3.1.
- Provision and choice of pharmacies is determined by using a 500 metres radius from the centre of the postcode of a pharmacy. This is considered to be approximately a 10-minute walk from the outer perimeter of the buffer zone created.
3.4 The rationale for using the more detailed “500m-radius” approach was to identify the range of access and service provision in a far more precise fashion than ward averages would allow. For example, where boundaries of wards are main roads, pharmacies on the opposite side of the road would not be counted towards the ward’s provision, thereby giving an inaccurate picture of provision; use of the more detailed 500m-radius approach avoids this. It also allows the PNA to assess the impact of pharmacies in surrounding boroughs that are within 500m of the borough border.

3.5 The 500m-radius approach illustrates where there is at least one pharmacy within 500m and where there is no pharmacy within 500m. The distance of 500m was chosen by the Steering Group as being a reasonable measure to identify variation
and choice. However, whilst highlighting variation, it is not always used to determine gaps in services; in some instances, wider measures are more appropriate (e.g. where there is lower patient demand for services, such as needle exchange and dispensing outside normal working hours). These instances have all been stated in the relevant sections of the report.

**Pharmacy Contractor Survey**

3.6 The contractor survey was sent to the pharmacies within Hammersmith & Fulham and the response rate was 100%. Pharmacies that did not complete the full survey were contacted directly for more information. The results are referred to throughout this document.

**Patient and Public Engagement and Assessment of Protected Characteristics**

3.7 A community pharmacy questionnaire was used to engage with 152 people to understand their use and experience of local pharmacies from September to October 2017. The methods of engagement are outlined in Appendix C. Participants filled in online or paper-based questionnaires. Information obtained from these questionnaires informed the analysis of the use and views of pharmacies by people from the protected characteristics and vulnerable groups.

**Governance and Steering Group**

3.8 A Task and Finish group advised on the development of the PNA. The membership and terms of reference of the steering group is outlined in Appendix A. Its membership included representation from the following groups:

- Hammersmith and Fulham Public Health team
- Clinical Commissioning Group
- Ealing, Hammersmith and Hounslow Local Pharmaceutical Committee (LPC)
- Healthwatch

**Regulatory Consultation Process and Outcomes**

3.9 This PNA was published for public consultation in December 2017 for 60 days. All comments have been considered and incorporated into this final report.

**Additional Considerations Regarding Pharmacy Funding**

3.10 From October 2016 the government has imposed a two-year funding package that will lead to 4% reduction in funding in 2016/17 and a further 3.4% in funding in 2017/18.

3.11 In consideration of these funding cuts the Department of Health introduced the Pharmacy Access Scheme (PhAS) in December 2016 to ensure that access to NHS community pharmaceutical services is protected, particularly in areas where there is higher health needs. Qualifying pharmacies, i.e. those with high dependency and located where pharmacy services are sparse, receive an additional payment that will
protect them from the full effect of the reduction in funding imposed from December 2016.

3.12 The Government has also introduced a Quality Payment Scheme from December 2016 to March 2018. Pharmacies qualify for additional funding if they meet the following four criteria:

- Provision of at least one advanced service
- NHS Choices entry up to date
- Staff able to send and receive NHS email
- On-going utilisation of the Electronic Prescription Service (EPS)
Chapter 4 - Health Needs and Population Changes

4.1 The aim of this chapter is to present an overview of health and wellbeing in Hammersmith and Fulham, particularly the areas likely to impact on needs for community pharmacy services.

4.2 The analysis of health needs and population changes are outlined in three subsections of this chapter: Population Characteristics and Projections; Wider Determinants of Health and Inequalities and Risk Factors for Mortality and Morbidity.

4.3 The highlights of the demographic and health information included here are also covered in the Joint Strategic Needs Assessment (JSNA) for the borough. The JSNA identifies current and future health and social care needs of the borough’s population and analyses whether these needs are being met locally. For the borough’s highlights report please see https://www.jsna.info/online/highlightreports.

4.4 All the maps that follow present the size of population in relation different factors such as population density, languages spoken and premature mortality. They are displayed in gradients, whereby the lower the marker, the lighter the colour. The gradients are illustrated in the legends attached to each map.

Population Characteristics and Projections

4.5 Several data sources have been used to examine the Hammersmith and Fulham population. The main data source is the Office of National Statistics (ONS) 2014 mid-year estimates (used for age, sex, and ethnicity, and for projections of future population size) and Public Health England, which draws its data from a range of sources including surveys, ONS and a range of NHS monitoring data. Analysis was completed in October 2017. Characteristics of the local population have been summarised in Table 4.1.
Table 4.1: Population Characteristics at a Glance

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Value</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Households</td>
<td>83,552</td>
<td>6 (6.42) Live births each day</td>
</tr>
<tr>
<td>Median house price</td>
<td>730,000</td>
<td>3 (2.7) Deaths each day</td>
</tr>
<tr>
<td>Residents</td>
<td>185,300</td>
<td>14,095 Local businesses</td>
</tr>
<tr>
<td>From BAME groups</td>
<td>33.7%</td>
<td>38,041 Annual pay</td>
</tr>
<tr>
<td>Born abroad (2011 Census)</td>
<td>43.2%</td>
<td>4.7% Unemployment rate (JSA)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(London 3.1%)</td>
</tr>
<tr>
<td>Main language not English</td>
<td>22.7%</td>
<td>16.4% Local jobs in Public Sector</td>
</tr>
<tr>
<td>State school pupils whose main language not English</td>
<td>48.9%</td>
<td>Ranked 69th Most deprived borough in England (out of 326) (16th in London)</td>
</tr>
<tr>
<td>Registered with local GPs</td>
<td>179,654</td>
<td>Ranked 40th Income Deprivation Affecting Children Index (out of 326) (17th in London)</td>
</tr>
<tr>
<td>New migrants registered with a GP</td>
<td>8,144</td>
<td>Ranked 25th Highest carbon emissions in London</td>
</tr>
<tr>
<td>Daytime population in an average weekday</td>
<td>230,481</td>
<td>15% Of the borough is green space</td>
</tr>
</tbody>
</table>

4.6 Hammersmith & Fulham is a small and very densely populated borough situated in the centre west of London, bordered by the River Thames on the south and south west side. The borough has three main town centre areas: Shepherd’s Bush, Hammersmith, and Fulham. Population density is highest in Askew and Addison wards (see figure 4.1).

Figure 4.1: Population Density of Hammersmith and Fulham per square kilometre by Ward, mid 2014 estimates.

Source: ONS, 2015

4.7 The Office for National Statistics estimates the Hammersmith and Fulham resident population will be 185,300 people in 2018. Some will be registered with GPs outside
of the borough. There are 179,654 patients registered with Hammersmith & Fulham GPs but not all of these patients will live within the borough.

4.8 13 people per hectare reside in Hammersmith, twice as many as the London at 56.2 people per hectare.

4.9 Hammersmith and Fulham’s population rises to approximately 230,500 during the daytime, this includes residents, employees and visitors.

4.10 The population is characterised by a large proportion of young working age residents, high levels of migration in and out the borough, and ethnic and cultural diversity. Although residents have a higher life expectancy than nationally, there are significant areas of poorer health in the more deprived parts of the borough and therefore large health inequalities.

4.11 There are 83,552 households in Hammersmith & Fulham, with an average household size of 2.2 persons.

Gender and Age Structure

4.12 Hammersmith & Fulham has a similar gender split to the rest of London and elsewhere in United Kingdom, with the percentage of women being 1% greater and the percentage of men 1% lower. This is similar to the rest of London and likely to be because women live longer than men (see Figure 4.2).

Figure 4.2: Proportion of resident population by age-band and gender, Mid- 2014 estimates for Hammersmith & Fulham

Source: ONS 2015

4.13 The age profile in Hammersmith & Fulham is typical of inner city areas, with a very high proportion of young working age adults, and a smaller proportion of older people
and children than London and the rest of the country. This population structure impacts on the types and range of services required in the borough.

Figure 4.3: % of 0-15 Population by Ward, 2015.

Figure 4.4: % of 16-24 Population by Ward, 2015.
4.14 Most of the younger population live in northern deprived wards such as College Park and Old Oak although Fulham Reach has the highest proportion of 16-25 year olds. Palace Riverside has the highest proportion of 65 and older population while 25-64 population are more broadly spread across the borough, mostly concentrated in Shepherd’s Bush Green, Addison and North End wards (Figures 4.3 to 4.6).

4.15 Predictive modelling estimates that there will be nearly 20% increase of residents who are aged 65 and over by 2024 in Hammersmith & Fulham (see table 4.2). This is due to improvements in the life expectancy of the baby-boom generation.

### Increasing elderly population
As the population ages, the demand on health care and dispensing services increases. Accessibility is an important factor for the elderly population.

| Table 4.2 Projected population growth by age group for Hammersmith and Fulham |
|---------------------------------|---------------------------------|
| Age Group                      | 2014          | 2024          |
| 65-74                          | 13,922        | 15,294        |
| 75-84                          | 8,617         | 10,155        |
| 85+                            | 3,370         | 4,767         |
| Total 65+                      | 25,909        | 30,216        |

Source: PHE, 2017, based on ONS 2011 census
Ethnicity and diversity

4.16 43.2% of residents were born abroad and 29% are from an ethnic minority group; this is significantly higher than England overall.

4.17 Ethnicity breakdown shows that Hammersmith and Fulham has a higher proportion of White population than London but lower than England.

Table 4.3 Black and Minority Ethnic population breakdown for Hammersmith and Fulham, London and England and Wales

<table>
<thead>
<tr>
<th>Region</th>
<th>White</th>
<th>Mixed</th>
<th>Asian or Asian British</th>
<th>Black or Black British</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hammersmith and Fulham</td>
<td>68.07%</td>
<td>5.50%</td>
<td>9.12%</td>
<td>11.78%</td>
<td>5.53%</td>
</tr>
<tr>
<td>London</td>
<td>59.79%</td>
<td>4.96%</td>
<td>18.49%</td>
<td>13.32%</td>
<td>3.44%</td>
</tr>
<tr>
<td>England and Wales</td>
<td>85.97%</td>
<td>2.18%</td>
<td>7.51%</td>
<td>3.33%</td>
<td>1.01%</td>
</tr>
</tbody>
</table>

Source: ONS, 2011

4.18 Most of the minority ethnic groups in Hammersmith & Fulham reside in the northern deprived wards (see figure 4.7).

Figure 4.7: Percentage of black and ethnic minority groups by wards in Hammersmith & Fulham, 2015
4.19 Analysis of data on patients registered with GPs suggests there are significant populations from Australia, New Zealand, Western and Eastern Europe, Somalia, Caribbean countries, the Philippines, Iraq and Iran. The most common minority language spoken is French (see table 4.4).

Table 4.4: Proportion of languages spoken in Hammersmith and Fulham

<table>
<thead>
<tr>
<th>Language</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>English</td>
<td>77%</td>
</tr>
<tr>
<td>French</td>
<td>3.1%</td>
</tr>
<tr>
<td>Arabic</td>
<td>1.9%</td>
</tr>
<tr>
<td>Spanish</td>
<td>1.9%</td>
</tr>
<tr>
<td>Polish</td>
<td>1.6%</td>
</tr>
<tr>
<td>Italian</td>
<td>1.4%</td>
</tr>
<tr>
<td>Somali</td>
<td>1.3%</td>
</tr>
<tr>
<td>Portuguese</td>
<td>1.3%</td>
</tr>
<tr>
<td>Persian/ Farsi</td>
<td>0.8%</td>
</tr>
<tr>
<td>Tagalog/ Filipino</td>
<td>0.8%</td>
</tr>
</tbody>
</table>

Source: ONS, 2015

4.20 A high proportion of residents cannot speak English well or at all in the borough, particularly in the northern wards of the borough. 4.9% and 4.2% of residents do not speak English well or at all in Wormholt and White City and College Park and Old Oak respectively (see figure 2.8). Nearly half school children’s first language is not English (48.9%).

Figure 4.8: Percentage of people that cannot speak English well or at all by Ward in Hammersmith and Fulham in 2011
**Pharmacy provision for cultural and language barriers**
Areas where diversity is higher correlate with areas of higher levels of deprivation and poorer health. For example, Ethnic minority communities have higher incidence of long-term conditions such as diabetes and cardiovascular disease.

Cultural and language barriers can create problems for people who wish to engage with healthcare services.

Pharmacies employ staff from diverse backgrounds who may be able to speak multiple languages.

**New Developments and Population Changes**

4.21 There are several proposed large-scale development sites in the borough that may result in significant and concentrated increases in population if completed. All of these are likely to require reconsideration of pharmaceutical requirements if progressed. At present, timescales for development are likely to be longer than the timescale of the 2018-2021 PNA. According to the Greater London authority, there are 20 development schemes proposing 10 or more units either not started or under construction as at October 2018 (see Figure 4.9).

4.22 As of October 2017, seven construction sites have started construction while another 13 have obtained planning permission. Table 4.5 outlines the number of medium or large-scale construction sites that have acquired planning permission.

**Figure 4.9: Number of medium and large-scale housing development sites that have acquired planning permission in Hammersmith and Fulham by ward, from October 2018**
Table 4.5: Construction sites by number of units within each ward in Hammersmith and Fulham

<table>
<thead>
<tr>
<th>Ward</th>
<th>Construction not started</th>
<th>Construction started</th>
<th>All developments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Askew</td>
<td>1</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Avonmore &amp; Brook Green</td>
<td>4</td>
<td></td>
<td>4</td>
</tr>
<tr>
<td>College Park &amp; Old Oak</td>
<td>2</td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>Fulham Broadway</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fulham Reach</td>
<td>3</td>
<td>1</td>
<td>4</td>
</tr>
<tr>
<td>Hammersmith Broadway</td>
<td>1</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>North End</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Palace Riverside</td>
<td>1</td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Parson's Green &amp; Walham</td>
<td></td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Ravenscourt Park</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sands End</td>
<td>3</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>Shepherd's Bush Green Town</td>
<td></td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>13</strong></td>
<td><strong>7</strong></td>
<td><strong>20</strong></td>
</tr>
</tbody>
</table>

4.23 The **population of the borough is expected to increase** by 2.39% by 2021 to 191,152 residents. These figures are based on mid-year population estimates and assumptions such as future fertility, mortality and migration.

4.24 There are currently no other known factors that could affect changes in the patterns of the population of Hammersmith and Fulham.

**Changes in populations**

Sustained population increases and development will increase demand on community pharmacy services, and different population groups will have different needs.
There are no known plans that will impact changes in the patterns of social traffic.

**Wider Determinants of Health and Inequalities**

There is a range of social, economic and environmental factors that impact on an individual's health behaviours, choices, goals and ultimately their health outcomes. These are outlined in *Fair Society, Healthy Lives: The Marmot Review* report and include life expectancy, healthy life expectancy, education, employment and fuel poverty to name a few, which we explore in this chapter.

The **Index of Multiple Deprivation** is a combined measure of deprivation based on a total of 37 separate indicators that encompass the wider determinants of health and reflect the different aspects of deprivation experienced by individuals living in an area. The 37 indicators fall under the following categories: Income Deprivation, Employment Deprivation, Health Deprivation and Disability, Education, Skills and Training Deprivation, Barriers to Housing and services, Living Environment Deprivation and Crime.

Figure 4.10 illustrates the vast differences between the north and south of the borough. The wards with this highest multiple deprivation scores are College Park and Old Oak and Wormholt and White City and Palace Riverside have the lowest scores for multiple deprivation.

**Life Expectancy and Healthy-Life Expectancy**

Life expectancy at birth for males is 79.2 years and 83.9 years for females. These figures are close to the overall life expectancy figures for England.
4.30 There is significant variation in life expectancy across the social gradient in Hammersmith & Fulham. The **Slope Index of Inequality**, which measures the absolute difference in life expectancy between the most and least deprived areas, shows a 8.5 year life expectancy gap for men and a 3.4 year gap for women between those who live in the most deprived areas and the least deprived areas.

4.31 Males residing in Palace Riverside and females in Muster have the highest life expectancy (83.4 and 87.4 respectively). Males residing in College Park and Old Oak have the lowest life expectancy of 75.3 (Figure 4.11 & 4.12).

**Figure 4.11**: Life expectancy at birth of Males by Ward in Hammersmith and Fulham, 2015  
**Figure 4.12**: Life expectancy at birth of Females by Ward in Hammersmith and Fulham in 2015

Source: PHE, 2016

4.32 **Healthy life expectancy at birth** is the average number of years an individual should expect to live in good health considering age-specific mortality rates and prevalence for good health for their area.

4.33 The latest figures (2015) for males residing in Hammersmith and Fulham show a healthy life expectancy of 62.3 and for females, 64.2 years. This is significantly worse than the England average of 63.5 and 64.8 years respectively. These figures indicate that males living in Hammersmith and Fulham could live with ill health for 16 years and females for 19.7 years (see figure 4.13).

**Figure 4.13**: Life expectancy and Healthy life expectancy for Males and Females in Hammersmith and Fulham in 2015
4.34 Hammersmith and Fulham has a low dependency ratio. An estimated 39% of the population are dependants, meaning that they are less likely to be working (for example, children under 16 or those of state pension age or above). This is much lower than England where an estimated 60.7% of people are dependents.

4.35 However, 5.4% of working age population of the borough are long-term unemployed and (based on 2016 figures), this is down from 10.3% in 2013, but significantly worse the England rate at 3.7%.

4.36 Over a quarter of children residing in the borough are from low-income families (25.2%), significantly worse than the overall national figure of 19.9%.

4.37 A higher rate of people live experience fuel poverty; 13.6% of people did not have enough income to afford sufficient fuel in 2014, higher than the national rate of 10.6% and an increase from 10.3% the previous year.

Pharmacy provision within deprived communities
Access to community pharmacy services in the communities where there is high deprivation is important in addressing health inequalities. The PNA will need to take into account whether the services provided by pharmacies are available in our most deprived communities and are sufficient to meet their local populations.
Premature Mortality

4.38 The standardised mortality ratio is a good indicator effect of the prevalence of risk factors, prevalence and severity of disease, and the effectiveness of interventions and treatment. The differences of early mortality rates in different areas can reveal where focus is needed to reduce variation in life expectancy and health inequalities.

4.39 Figure 4.14 presents the standardised mortality ratio for deaths from all causes aged under 75, otherwise known as premature mortality. This measure is used to identify deaths usually considered ‘avoidable’. Premature mortality is higher in the north of the borough, among the more deprived wards.

Figure 4.14 Standardised mortality ratio 2010-2014 by Ward in Hammersmith and Fulham in 2015

Source: PHE, 2016

4.40 Circulatory diseases such as coronary heart disease and stroke is the biggest cause of the differences in life expectancy in males. It accounts for 36.6% of the life expectancy gap between the most deprived quintile and least deprived quintile in the borough. Following that is cancer which accounts for 19.6% of the gap and digestive disease (which includes alcohol related conditions such as chronic liver disease and cirrhosis) which accounts for 11.5% of the gap.

4.41 Cancer accounts for more than half (59.9%) of the life expectancy gap between the most deprived quintiles and least deprived quintiles in females. Figure 4.13 presents the differences in life expectancy by cause between the most deprived and the least deprived quintiles of the borough.
Figure 4.15: Life expectancy gap between the most deprived quintile and the least deprived quintile for Hammersmith and Fulham by broad cause of death, 2012-2014

Source: PHE, 2016

Circulatory Diseases

4.42 The premature mortality rate from cardio-vascular disease considered preventable is a little higher than London and England at 47.7 deaths per 100,000 population. The London and England rates are 46.2 and 46.7 respectively. However rates have been reducing over the years (see Figure 4.15) and this is likely due more timely high quality treatment, effective prescribing, and a reduction in the number of smokers.

Figure 4.15: Under 75 mortality rate per 100,000 from cardiovascular disease for Hammersmith and Fulham, London and England from 2001 to 2015

Source: PHE, 2016
4.43 Within the borough, Fulham Broadway has the highest standardised mortality rate for Circulatory Diseases at 144.1. This is substantially higher than Palace Riverside that has the lowest rate of 63.2 (Figure 4.16).

Figure 4.16: Under 75 mortality rate from circulatory disease by ward in Hammersmith and Fulham, London and England from 2013 to 2015

4.44 Currently 47.5 per 100,000 residents of the borough die prematurely each year from coronary heart disease and 15.5 people per 100,000 die prematurely of a stroke. These rates are relatively similar to national figures.

4.45 The overall prevalence of new cases of all cancers is 1.6% for the Hammersmith and Fulham GP registered patients. This is lower than regional and national figures of 1.7% and 2.4% respectively. This may be a reflection of poor early diagnosis of cancer where chances of survival much poorer in areas of deprivation.

4.46 The premature mortality rate, i.e. under 75 years, is higher than regional and national figures. Currently 145.7 per 100,000 residents of the borough die prematurely each year from cancer, compared with 129.7 for London and 138.8 for England. Improvements in lifestyles, as well as more accessible and high quality care, have resulted in a modest decline in the last decade in the early death rate for cancer (see Figure 4.17).
4.47 Within the borough, North End has the highest standardised mortality rate of 120.1 (see figure 4.18).

4.48 Hammersmith and Fulham CCG have achieved the 7th lowest breast screening coverage and 4th lowest cervical screening coverage in London. Population diversity, migration and high use of private services create a constant challenge to improvement. Survival from breast and lung cancer is higher in the borough than the London average. There are 1-3 deaths a year from cervical cancer in the borough.
Respiratory Disease

4.49 Hammersmith and Fulham is the 6th worst borough in London for rate of deaths caused by respiratory diseases considered preventable. 24 per 100,000 residents die each year from preventable respiratory disease, significantly higher than England at 18.1 people per 100,000.

4.50 The rates of deaths by respiratory disease considered preventable have increased in the last few years.

Figure 4.19: Under 75 mortality rate from respiratory disease for Hammersmith and Fulham, London and England from 2001 to 2015

Source: PHE, 2016

4.51 Chronic Obstructive Pulmonary Disease (COPD) is a highly preventable cause of morbidity and mortality that sits within respiratory diseases. Diagnosis rates for COPD are low in the borough, yet Hammersmith and Fulham has high rates of hospital admissions for COPD. 15.6 patients per 100 COPD diagnosed patients are admitted each year, significantly higher than England at 12.6. Pharmacies can provide more accessible support for patients to improve adherence to medications and respiratory health outcomes.

4.52 23.3 per 100,000 people were diagnosed with tuberculosis (TB) between 2013 and 2015. The rate of TB has been declining in Hammersmith and Fulham in recent years, remaining lower than London in the last decade.
Risk Factors for Mortality and Morbidity

Risk Factors in Adults

4.53 **Smoking** is the leading cause for preventable death in the world. Hammersmith and Fulham has the 4th highest prevalence of smokers in London. 19.6% of adult residents smoke in the borough, this is a significantly higher rate than England.

4.54 The proportion of adults who are overweight or obese is lower than England and ranks the 5th lowest of the London Boroughs. Yet this figure is still high. 51.6% of adults are overweight or obese. **Obesity** is recognised as a major determinant of premature mortality and avoidable ill health. The highest rates of obesity are in College Park and Old Oak and Wormholt and White City where one fifth of adult residents are obese.

4.55 One fifth of adults residing in the borough are considered **physically inactive**, meaning they engage in less than 30 minutes of moderate physical activity per week. People who are physically inactive increase their chances of cardiovascular disease, coronary heart disease and stroke. People who have a physically active lifestyle reduce their risk of obesity, diabetes, osteoporosis and some cancers and improved mental health.

4.56 **Alcohol consumption** contributes to morbidity and mortality from a diverse range of conditions. 47.2 per 100,000 deaths are alcohol-related and Hammersmith & Fulham has the 2nd highest admissions for alcohol-related conditions. 664 people per 100,000 residents were admitted to hospital in 2015/16. Modelled estimates indicate that binge drinking is higher among the more affluent wards of the borough (see figure 4.20).

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Stop Smoking Services
Pharmacies may provide proactive promotion of smoking cessation through to provision of full NHS stop smoking programme.

Weight Management Services
Pharmacies can provide services that can promote healthy eating and physical activity, weight management services for adults, or brief interventions.

Alcohol Misuse Services
Pharmacies may provide Alcohol misuse services that include proactive brief interventions and advice on alcohol with referrals to specialist services for problem drinkers.
4.57 Of those registered with a GP in Hammersmith and Fulham, 1.2% are known to have a **Severe Mental Illness**. This is markedly higher than London (1.03%) and England (0.83%) which is likely due to good identification and reporting by GPs in the borough.

4.58 In a GP patient survey, 5.9% of the GP population in Hammersmith and Fulham reported having a **long-term mental health problem**. This is 6th highest rate in London.

4.59 Currently 998 residents of Hammersmith & Fulham are diagnosed with **HIV**. In 2014-16, 29.3% of cases were diagnosed late, compared to the London average of 33.7%. Late diagnosis carries with it an increased risk of poor health and death and it increases the chances of onward transmission.

4.60 Of those who are tested for **Sexually Transmitted Infections (STIs)**, 4.4% tested positively for an infection (excluding chlamydia) in Hammersmith and Fulham; this is significantly higher than the national rate. Rates of chlamydia detection are slightly better than the national average. Hammersmith and Fulham have the 4th highest rates of Genital Warts diagnosis and the 2nd highest in London for Genital Herpes.

**Medicine adherence**
Medicines are a key component of mental health care and pharmacists have the expertise required to improve adherence to medication support the reduction of inappropriate use of medicines.

**Sexual Health Services**
Pharmacies can provide Sexual health services such as emergency hormonal contraception services; condom distribution; pregnancy testing and advice; chlamydia screening and treatment; other sexual health screening, including syphilis, HIV and gonorrhoea.
diagnosis.

**Risk Factors in Older Adults**

4.61 The proportion of older population is rising and older people are the biggest and costliest users of healthcare. The biggest costs are for those with complex needs, long-term conditions, and functional, sensory or cognitive impairment including dementia.

4.62 **Health-related quality of life** gives an indication of levels of good health, wellbeing and independence. This is measured using a health status score in the over 65s and looks at Mobility, Self-care, Usual activities, Pain / discomfort and Anxiety / depression. In Hammersmith and Fulham the average score is 0.739, slightly higher than the national norm of 0.733.

4.63 **Loneliness and isolation of older people** is a risk factor for ill health and premature mortality. People who are lonely and social-isolated are more likely to need healthcare resources and long-term care. Over a third (37.4%) of Hammersmith and Fulham's older generation (65+) are living alone and are at risk of loneliness and isolation.

4.64 The number of people living with dementia is increasing. Approximately 1200 people are living with dementia in Hammersmith and Fulham, half of whom are over 85 years of age. This is predicted to rise to 1560 by year 2025. This can have an impact on levels of paid and unpaid health and care provision.

4.65 **Falls** are the largest cause of emergency hospital admissions and a major cause of loss of independence, disability or death in older people. Hammersmith and Fulham has the second highest rate of emergency admissions due to falls in the over 65s. 1540 per 100,000 emergency admissions were due to falls in 2015/16, significantly higher than London and England rates.

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**Health Champions and Health Trainers**

The ‘walk-in’ nature of pharmacies mean that they are ideally placed to offer opportunistic screening and brief interventions for better health and wellbeing.

Health Champions and Health Trainers support people to make positive health behaviour changes on topics such as smoking, alcohol, weight management, sexual health, physical activity and mental health.

Healthy Champions and Health Trainers situated within pharmacies can bridge that gap between healthcare and the community and voluntary services that can support it.

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**Dementia Friendly pharmacies**

Pharmacies can be a very important place that people living with dementia need to access. Dementia friendly pharmacies can support people living with dementia to feel confident and empowered to do things that they have always been able to do such as collecting a prescription.
Risk Factors in Children and Young People

4.66 The younger working population are usually considered to be low users of the healthcare system. However, pharmacies may provide enhanced services such as immunisations, minor ailment services and sexual health services which may be more accessible than GPs and secondary care and also reduce the demand on these services.

4.67 Hammersmith and Fulham has the highest percentage in London (16.4%) of 15 year olds with a long-term illness, disability or medical condition diagnosed by a doctor. Young people from the more deprived areas are more likely to report poor health and this can have a significant impact on overall life chances.

4.68 There were 41 under 18 conceptions in the borough in 2015, slightly lower than our regional and national comparators. Teenage mothers nationally are three times as likely to suffer from post-natal depression, are less likely to breastfeed and more likely to smoke.

4.69 Based on the 2015/16 latest GCSE figures pupils in Hammersmith and Fulham are doing well. 60.8% of pupils achieved 5A*-C GCSEs, an improvement from the previous year and significantly better than the national percentage of 57.8%.

4.70 Childhood obesity is on the rise and can have significant impact on health outcomes. A child who is overweight or obese can have increased blood lipids, glucose intolerance, Type 2 diabetes, hypertension, increases in liver enzymes associated with fatty liver, exacerbation of conditions such as asthma and psychological problems such as social isolation, low self-esteem, teasing and bullying.

4.71 One out of every 5 Reception age children (21.3%) and 34.6% of Year 6 children are overweight or obese. These figures, although high, are lower than the regional and national rates.

4.72 Sands End is the ward with the highest rates of overweight and obesity in the borough (see Figure 4.21).
4.73 Dental decay is a highly preventable disease, caused by a high-sugar diet. 92.4% of 3 year olds are free from dental decay. This is significantly better than national figures.

4.74 Vaccinations help prevent serious illness in children, especially potentially severe disease such as meningitis, whooping cough, and tetanus. Yet Hammersmith and Fulham has poorer coverage rates than the rest of England in all childhood vaccinations for which there is data.

4.75 Substance misuse in young people is linked to mental health issues such as depression, disruptive behaviour and suicide. It is also linked to adverse experiences and behaviours such as truancy, exclusion from school, homelessness, time in care and serious or frequent offending. 66.6 per 100,000 hospital admissions for 15-24 year olds in Hammersmith and Fulham (2013/14 to 2015/16) are due to substance misuse; this is lower than England figures.

**Dental Health Promotion**

Due to the frequency of their contact with the public and in promoting health and wellbeing, pharmacists can be effective in raising awareness of oral health.

**Vaccinations**

Due to better flexibility of opening hours and convenient locations, pharmacies can improve uptake of some vaccinations.

**Substance misuse services**

Pharmacies may provide needle and syringe services; supervised consumption of medicines to treat addiction, e.g. methadone; Hepatitis testing and Hepatitis B and C vaccination; HIV testing; provision of naloxone to drug users for use in emergency overdose situations.
Summary of Demographics and Health Needs of Hammersmith and Fulham

Hammersmith and Fulham is a small and very densely populated borough, located in the centre west of London. It is most densely populated in the Askew and Addison wards.

Hammersmith and Fulham has a large proportion of young working age residents and slightly more women than men. It is expected that there will be a large increase of older adults over the next 20 years.

Nearly half of the population was born abroad and nearly one-third identify as being from Black or Minority Ethnic groups, the highest proportion of whom live in northern wards of College Park and Old Oak and Wormholt and White City. 4.9% and 4.2% of residents do not speak English well or at all in College Park and Old Oak and Wormholt and White City respectively.

There are vast differences in deprivation and life expectancy levels. College Park and Old Oak and Wormholt and White City have the highest levels of deprivation and the lowest life expectancy for males, whereas deprivation levels are markedly lower in Palace Riverside. Female life expectancy varies across the borough.

Unemployment, fuel poverty and child poverty is high in the borough.

Circulatory diseases and cancers are the biggest causes in the differences in life expectancy between the most and least deprived. Overall mortality rates for these diseases have been declining in the last five years. Premature mortality is highest in Shepard’s Bush Green.

Although smoking rates are declining through the years, nearly one in five adults in Hammersmith and Fulham smoke, this is significantly higher than national figures. Over half adult residents are overweight or obese and only one-fifth are considered physically active.

Alcohol-related deaths and hospital admissions is very high in Hammersmith and Fulham. Binge drinking is highest in the southern wards of Munster and River Palace.

Rates of excess weight in children are very high although lower than regional and national figures. The coverage of childhood vaccinations is low.

The proportion of adults diagnosed with a mental illness is high in comparison to London and England, this may be a result of successful efforts by GPs to identify mental illness.

Diagnosed HIV is high in Hammersmith and Fulham, nearly one-third of which are diagnosed late. Detection of other STIs is good in comparison to other London boroughs.

Hammersmith and Fulham has the second highest rate of emergency admissions due to falls in the over 65s. One-third of older adults are living alone and are at risk of isolation and loneliness.
Chapter 5 - Patient and Public Engagement and the Protected Characteristics

5.1 This section discusses the results of the patient and public engagement that was carried out from September to October 2017 in Hammersmith and Fulham. We also examine the health needs specific to protected characteristics and vulnerable groups that we have engaged during this process and the implications they may have on the PNA.

5.2 A “protected characteristic” means a characteristic listed in section 149(7) of the Equality Act 2010. There are also certain vulnerable groups that experience a higher risk of poverty and social exclusion than the general population. These groups often face difficulties that can lead to further social exclusion, such as low levels of education and unemployment or underemployment.

5.3 We used a community pharmacy questionnaire to understand resident’s use and experience of local pharmacies. The PNA Task and Finish Group and the communications team of the London Borough of Hammersmith and Fulham approved this questionnaire for use with the local population. This questionnaire is available as Appendix B in this document.

5.4 The engagement plan and methods of dissemination of the survey are referenced in Appendix C. Two pharmacies agreed to host our community researcher to carry out engagement.

Results of the Community Pharmacy Questionnaire

5.5 A total of 152 questionnaires were collected between 23rd Sept 2017 and 2nd February 2018. Twenty of these were collected during the Consultation of this document.

5.6 The main sources of the questionnaires were outreach at community pharmacies Community Champions’ outreach at Addison and World’s End and online surveys.

Use of Pharmacies

5.7 76% of the sample population visit the pharmacy monthly and 16% weekly. People mostly use the pharmacies at weekdays between 12-2pm. Other times were 2pm to 5pm and 9am to 12pm.
5.8 72.4% of the sample population were happy with the overall service they received from the pharmacies. Good location was the main reason for respondents to use a particular pharmacy. Friendly staff, opening times and knowledgeable staff were other reasons people liked the pharmacies they were using.

5.9 Top three pharmacy services used by respondents were obtaining prescription medication, repeat prescriptions and over the counter medication.

5.10 The top three services respondents would use if provided were home delivery and prescription collection service, health checks including blood glucose, cholesterol,
blood pressure and BMI (height and weight), and new medicines service/medicine use reviews. Advice from pharmacists on healthy lifestyles was fourth on the list of services respondents will use if available.

5.11 Very few respondents left feedback in the open text boxes (17). The main suggestions were to reduce waiting times in pharmacies and to have longer opening hours.

Figure 5.3: Word cloud of feedback from respondents on services in pharmacies.

Protected Characteristics

Age

5.12 The current age profile and projections are discussed in the chapter on population statistics.

5.13 Pharmacies provide essential services to all age groups such as dispensing, promotion of healthy lifestyles and signposting patients to other healthcare providers. Pharmacies providing services to vulnerable adults and children are required to be aware of the safeguarding guidance and local safeguarding arrangements.

5.14 The single largest age group in the sample population was the 31-40 year olds (30%) with 41-50 year olds the second largest group (28%). 18% respondents were in the 60+ age group and about 7% were 18-30 year old.
5.15 80% of respondents aged 60+ in our sample are happy with the overall services provided at their pharmacies. Good location and friendly staff are factors important to the sample as a whole and there is no age variation.

5.16 Respondents under the age of 60 are more likely to use healthy lifestyle services at the pharmacy if they are made available.

5.17 Based on the sample that we have surveyed, no gaps in the provision and access of pharmaceutical services have been identified.

**Gender and gender reassignment**

5.18 87 of our respondents were female, 45 men and three preferred not to disclose their gender. Gender reassignment was not captured on the questionnaire (Figure 5.5).

Figure 5.4: Age profile of survey respondents

![Age profile of survey respondents](image)

51 - 60 years 17%
41 - 50 years 28%
31 - 40 years 30%
71 - 80 years 9%
61 - 70 years 9%
18 - 20 years 3%
21 - 30 years 4%

5.15 80% of respondents aged 60+ in our sample are happy with the overall services provided at their pharmacies. Good location and friendly staff are factors important to the sample as a whole and there is no age variation.

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**Gender and gender reassignment**

5.18 87 of our respondents were female, 45 men and three preferred not to disclose their gender. Gender reassignment was not captured on the questionnaire (Figure 5.5).

Figure 5.5: Breakdown survey respondents by Gender

![Breakdown survey respondents by Gender](image)
5.19 75.6% men said they were happy overall with the service being provided by the pharmacy they use; overall happiness with their pharmacy was lower in this sample for women at 57.5%.

5.20 A few female respondents mentioned reduced waiting times and longer opening hours as areas of improvement for pharmacies.

5.21 We found no significant differences in the patterns of use between genders and no gaps in the provision and access of services from pharmacies relevant to gender.

**Ethnicity**

5.22 Out of the 152 respondents, 99 identified as White and 48 respondents identified as belonging to Black and other ethnic minority groups. White English was the single largest ethnic group followed by Asian. When compared to the general population in the borough, there was an over representation of Asians in our sample.

Figure 5.6: Comparison of breakdown of Ethnicity between ONS mid-year estimates and Patient and Public Survey respondents

5.23 The experience and way in which pharmacies were used did not differ significantly. Respondents in the BME groups tend to use the pharmacy more for their spouses, children and parents as compared to those in the White ethnic groups.

5.24 The questionnaire has not identified any gaps in access to the provision of pharmaceutical services for the different ethnic groups.

**Religion and belief**

5.25 Hammersmith and Fulham has a diverse population as noted in previous chapters and multiple religions are practiced within the borough. 56% of the respondents identified as Christian and 23% as Muslim (see Figure 5.6). A small number of participants identified as Hindu and Sikh.
5.26 No differences were noted in the experience and use of the pharmacies based on religion and relief and no gaps have been identified in the provision of services with respect to faith or belief.

Employment Status

5.27 In our sample, 51 respondents work full or part-time, 52 are unemployed, 20 are retired and three are students (see Figure 5.6).

5.28 No significant differences are noted in the use and overall experience of local pharmacies by respondents who are working and those who are unemployed or retired. Therefore no gaps in the provision of pharmacy services were identified.

Figure 5.6: Breakdown of employment status of survey respondents

Disability and Long-Term Conditions

5.29 All pharmacies must comply with the Disability Discrimination Act 1995 (now superseded by the Equality Act 2010). Pharmacy contractors may have assessed the extent to which it would be appropriate to install hearing loops, or provide access ramps wide aisles to allow wheelchair access. Accessible information formats are alternatives to printed information, used by blind and partially sighted people, or others with a print impairment.

5.30 Eighteen respondents said they had a disability, 55 respondents had a long-term condition and 16 identified as having both. The most common long-term conditions reported by respondents were diabetes, blood pressure and asthma; either individually or as co-morbidities.

5.31 Monthly use of pharmacies is higher in the group that identify themselves as having a disability or long-term condition. Other than that, there are no significant differences in how respondents with disability or long-term conditions access or use their
pharmacies and no gaps in the provision of pharmacy services were identified for people with long-term conditions and disabilities.

**Sexual orientation**

5.32 130 respondents identified as heterosexual, two as bisexual and one as homosexual. Due to data protection no comments can be made on the use of pharmacies by people of different sexual orientations. No gaps in the provision of pharmacy services were identified for people with different sexual orientations.

**Marital Status**

5.33 Seventy-four respondents identified themselves as being married and 64 as single. Six respondents said they were co-habiting and three were in a civil partnership.

5.34 Those who identified as single tend to use the pharmacy less after 5pm as compared to those who are married. Other than that, there were no significant differences noted in the use and experience of those who are single and those who are married, co-habiting or in a civil partnership. No gaps in the provision of pharmacy services were identified for this protected characteristic.

**Pregnancy and maternity**

5.35 Our sample had eight respondents who were pregnant or breastfeeding. Qualitative information captured through the questionnaire’s open text boxes did not identify any comments on services relating to feedback or use of these services and no gaps in the provision of pharmacy services were identified for this protected characteristic.

5.36 The patient and public engagement undertaken in Hammersmith and Fulham as part of the PNA 2018-2021 process, shows that the provision of pharmaceutical services is sufficient to meet the current needs of the population.

---

**Summary of the Patient and Public Engagement and the Protected Characteristics**

Patient and public engagement was undertaken to understand how people use their pharmacies, what they use them for and their views of the pharmacy provision. It included an exploration of the health needs specific to protected characteristics and vulnerable groups.

Findings showed that generally people are happy with their local pharmacies because of their good locations and opening times and friendly and knowledgeable staff. Respondents mostly use the pharmacies for obtaining prescription medication, repeat prescriptions and obtaining over the counter medication.

The top three services respondents would use if provided were health checks and new medicines service or medicine use reviews.

Suggestions for improvement included reducing waiting times and providing longer opening hours.

Overall findings show that the pharmacy provision is sufficient for supplying a necessary service with no gaps in the borough.
Chapter 6- Access to Pharmaceutical Essential Services

6.1 All pharmacy contractors must provide Essential services, but they can choose whether they wish to provide Advanced, Enhanced or Locally Commissioned services. All pharmacies are required to deliver and comply with the specifications for all essential services, these are:

- Dispensing
- Repeat dispensing
- Disposal of waste medicines
- Support for self-care
- Public health
- Signposting
- Clinical governance

6.2 This chapter assesses of the adequacy of provision of essential services by considering:

- Distribution and choice
- Geographical distribution of pharmacies, within and outside the borough
- Distribution in relation to health services and transport links
- Opening hours
- Accessibility

Pharmacy Distribution and Choice

6.3 There are currently 40 pharmacies in Hammersmith & Fulham as of October 2017. These have been marked on Figure 6.1, listed in Appendix D.

6.4 My Pharmacy (ODS code FWH06) is listed in the NHS England pharmaceutical list as being part of Kensington & Chelsea though geographically it lies within Hammersmith & Fulham borough. For the purposes of this PNA, it has been considered a Kensington and Chelsea pharmacy.

6.5 Marcus Jones Pharmacy is listed in the NHS England pharmaceutical list as being part of Ealing though geographically it lies within Hammersmith & Fulham borough. For the purposes of this PNA, it has been considered an Ealing pharmacy.

6.6 There are 21 community pharmacies per 100,000 resident population within Hammersmith & Fulham (based on a 2018 population estimate of 186,682). This is just below both the London and England averages which stand at 22 (General Pharmaceutical Services in England 2006/07 to 2015/16).

6.7 The PNA examines the geographical accessibility of pharmaceutical services and has hence used the postcode of the pharmacy to consider which borough the
pharmacy belongs to. Due to use of a 500m radius buffer, the services that these pharmacies provide are still taken account of for the Hammersmith & Fulham PNA.

6.8 There are 18 pharmacies outside the Hammersmith & Fulham located within 500m of its border. These have been included in the pharmacies shown in Figure 6.1 and also in Appendix D.

6.9 The geographical distribution of the pharmacies by electoral ward is shown in Figure 6.1 and Table 6.1. As seen, two wards, Palace Riverside and Ravenscourt, do not have pharmacies located in them.

6.10 As seen on Figure 6.1, a 500m radius buffer has been drawn from the centre of each pharmacy postcode. This shows that most of the borough is within 500m of at least one pharmacy. The small areas not within a 500m radius of a pharmacy are only a short distance further from a pharmacy either within or outside the borough.

6.11 There is one distance selling pharmacy based within Hammersmith & Fulham (Pharmacy On Wheels). There are no dispensing doctors, mail order or internet based pharmacies in the borough.

6.12 No pharmacies in Hammersmith & Fulham have a Local Pharmaceutical Service (LPS) contract with NHS England as of October 2017. Four pharmacies are entitled to Pharmacy Access Scheme payments.

Table 6.1: Distribution of pharmacies by ward

<table>
<thead>
<tr>
<th>Ward</th>
<th>Number of Pharmacies</th>
<th>Ward</th>
<th>Number of Pharmacies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shepherd's Bush Green</td>
<td>11</td>
<td>Parsons Green and Walham</td>
<td>2</td>
</tr>
<tr>
<td>Town</td>
<td>4</td>
<td>Wormholt and White City</td>
<td>2</td>
</tr>
<tr>
<td>Hammersmith Broadway</td>
<td>4</td>
<td>Fulham Broadway</td>
<td>2</td>
</tr>
<tr>
<td>Fulham Reach</td>
<td>3</td>
<td>Munster</td>
<td>2</td>
</tr>
<tr>
<td>Addison</td>
<td>3</td>
<td>North End</td>
<td>2</td>
</tr>
<tr>
<td>College Park and Old Oak</td>
<td>1</td>
<td>Sands End</td>
<td>1</td>
</tr>
<tr>
<td>Askew</td>
<td>2</td>
<td>Avonmore and Brook Green</td>
<td>1</td>
</tr>
</tbody>
</table>

Source: Contractor Survey and NHS England, 2017
Pharmacy Distribution in relation to Primary Care

6.13 NHS Hammersmith and Fulham Clinical Commissioning Group was set up in 2013 in response to the Health and Social Care Act of 2012. It is made up of 29 GP member practices and is responsible for the planning and commissioning of health services for people living in Hammersmith and Fulham or registered with a Hammersmith and Fulham GP practice.
6.14 Its aim is to ensure that the highest quality of care is delivered by organisations who are best qualified to do so for the diverse needs of its patients, carers and public and at the best value for money.

6.15 Figure 6.2 shows that there is a pharmacy within 500 metres of all GP practices in the borough except Hammersmith and Fulham Centres for Health, Hammersmith Hospital site, which is within half a mile of a pharmacy. These are displayed in Figure 6.2.

6.16 There are no known plans for changes in GP practices, including moves or closures in this PNA period. There are also no known firm plans for changes in the number and sources of prescriptions, i.e. primary medical services or the appointment of additional providers of primary medical services in the area.

Figure 6.2. GP practices in Hammersmith & Fulham and 500 metre pharmacy coverage, 2017

Pharmacy distribution in relation to Dentists

6.17 There are 28 dental practices in City of Hammersmith & Fulham area. Figure 6.3 shows that there is a pharmacy within 500 metres of all dentists in the borough.

Figure 6.3. Dentists in Hammersmith & Fulham and 500m pharmacy coverage, 2017

Acute Care, Mental Health Care and Community Health Services

6.18 The main secondary care provider for Hammersmith & Fulham population is Imperial College hospitals (Hammersmith Hospital and Charing Cross Hospital). West London Mental Health NHS Trust provides mental health services.

6.19 Central London Community Healthcare (CLCH) is the NHS community healthcare provider for Hammersmith and Fulham. It provides a range of services including adult community nursing, children and family services, rehabilitation, End of Life care and long-term condition management.

6.20 Parson’s Green walk-in centre (SW6 4UL) is provided by CLCH. It offers treatments for a range of conditions including:

- minor ear, nose and throat problems
- sprains and strains
- wound infections
- minor burns and scalds
- minor head injuries
- skin conditions
- minor respiratory conditions such as cough
- mild abdominal pain or discomfort
- insect and animal bites and stings
- minor eye injuries
- minor injuries to the back, shoulder and chest

6.21 There is one known planned change to NHS services in the area of Hammersmith and Fulham for the period of this PNA. The Prescribing Wisely proposal will reduce the number of prescriptions written by GPs for medicines that can be bought over the counter at pharmacies. It will also reduce automated repeat prescriptions by asking patients to order them when needed.

Transport Networks

6.22 The local population is not bound by electoral ward or borough boundaries when accessing pharmaceutical services. The excellent travel infrastructure available within central London places many more pharmacies, both inside and outside the borough, within convenient access to our local population.

6.23 Altogether there are 15 tube and rail stations in Hammersmith and Fulham, most of which are within 500 metres of a pharmacy (see Figure 6.4), apart from Imperial Wharf, Putney Bridge and Ravenscourt Park which are within one mile of a pharmacy.

Figure 6.4 Transport links and pharmacy coverage

6.24 Six rail and underground stations in the borough are wheelchair accessible; these are Fulham Broadway, Wood Lane, Hammersmith, Shepherd’s Bush, Barons Court and Imperial Wharf. All of these stations, with the exception of Imperial Wharf National Rail Station, are within 500 metres of a pharmacy. These are shown in Figure 6.5.

Figure 6.5 Tube stations that are wheelchair accessible and pharmacy coverage


Parking

6.25 Only four pharmacies have free car parking. Thirty-four have paid car parking nearby. Twenty-nine pharmacies have disabled parking close to the premises. All major A roads are within 500 metres of a pharmacy (see Figure 6.4).

Opening Times

6.26 Pharmacy contracts with NHS England stipulate the core hours during which each pharmacy must remain open. A pharmacy may stay open longer than the stipulated core opening hours, these are called supplementary hours.
6.27 Opening times were obtained from NHS England in August 2017. Additionally, market entry updates to the NHS England pharmaceutical list were reflected on the original list. Opening times were also collected as a part of the pharmacy contractor survey.

6.28 This PNA has used the core and supplementary hours reported by pharmacies from the contractor survey to produce the figures below. For pharmacies that did not respond and for pharmacies in surrounding boroughs, we have used the opening times as held by NHS England on October 2017.

6.29 NHS England has just one 100-hour pharmacies (core) on their list for Hammersmith & Fulham; Boots in Fulham Broadway Retail Centre.

6.30 Eight pharmacies are open before 9am on weekdays within the borough with a further five open in boroughs around Hammersmith & Fulham within 500m outside the border. These are presented in Figure 6.6 and Table 6.2.

**Figure 6.6: Pharmacies that are open before 9am on a weekday**

Source: Contractor Survey and NHS England, 2017
### Table 6.2: Pharmacies open before 9am on weekdays

<table>
<thead>
<tr>
<th>Pharmacy</th>
<th>Address</th>
<th>Ward</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boots UK</td>
<td>Unit 7 Fulham Broadway Retail Centre</td>
<td>Parsons Green and Walham</td>
</tr>
<tr>
<td>Fontain Pharmacy</td>
<td>290 Munster Road</td>
<td>Munster</td>
</tr>
<tr>
<td>Boots UK</td>
<td>5-6 The Broadway, W12 Shopping Centre</td>
<td>Addison</td>
</tr>
<tr>
<td>Lloyds Pharmacy Ltd</td>
<td>Richford Gate Primary Care Centre</td>
<td>Hammersmith Broadway</td>
</tr>
<tr>
<td>Tesco Pharmacy</td>
<td>180 Shepherds Bush Road</td>
<td>Avonmore and Brook Green</td>
</tr>
<tr>
<td>Superdrug Pharmacy</td>
<td>65-69 King Street</td>
<td>Hammersmith Broadway</td>
</tr>
<tr>
<td>Boots UK</td>
<td>41-43 King Street</td>
<td>Hammersmith Broadway</td>
</tr>
<tr>
<td>Boots UK</td>
<td>29-30 Centre West</td>
<td>Hammersmith Broadway</td>
</tr>
</tbody>
</table>

Source: Contractor Survey and NHS England, 2017

6.31 There are seven pharmacies still open after 7pm on weekdays with a further four in other boroughs within 500m of Hammersmith & Fulham (see Figure 6.7 and Table 6.3).

Figure 6.7: Pharmacies that are open after 7pm on weekdays.
Table 6.3: Pharmacies closing after 7pm

<table>
<thead>
<tr>
<th>Pharmacy</th>
<th>Address</th>
<th>Ward</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boots UK</td>
<td>Unit 7 Fulham Broadway Retail Centre</td>
<td>Parsons Green and Walham</td>
</tr>
<tr>
<td>Fontain Pharmacy</td>
<td>290 Munster Road</td>
<td>Munster</td>
</tr>
<tr>
<td>Boots UK</td>
<td>Ariel Way, Westfield London</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Boots UK</td>
<td>5-6 The Broadway, W12 Shopping Centre</td>
<td>Addison</td>
</tr>
<tr>
<td>Tesco Pharmacy</td>
<td>180 Shepherds Bush Road</td>
<td>Avonmore and Brook Green</td>
</tr>
<tr>
<td>Boots UK</td>
<td>41-43 King Street</td>
<td>Hammersmith Broadway</td>
</tr>
<tr>
<td>Boots UK</td>
<td>29-30 Centre West</td>
<td>Hammersmith Broadway</td>
</tr>
</tbody>
</table>

Source: Contractor Survey and NHS England, 2017

6.32 The vast majority of the pharmacies in Hammersmith & Fulham are open on Saturday (38/40). A further 15 outside the borough but within 500m of Hammersmith & Fulham are open on Saturday (Figure 6.8 and Table 6.4).

Figure 6.8 Pharmacies open on Saturday and 500-metre coverage

Source: Contractor Survey and NHS England, 2017
There are nine pharmacies open on a Sunday within the borough with three more open in boroughs around Hammersmith & Fulham within 500m of the border (Figure 6.9, Table 6.5). The range of Sunday opening hours are presented in Figure 6.10.

Figure 6.9: Pharmacies open on a Sunday and their 500 metre coverage

Source: Contractor Survey and NHS England, 2017
Table 6.5: Pharmacies open on Sunday by ward

<table>
<thead>
<tr>
<th>Trading Name</th>
<th>Address</th>
<th>Ward</th>
</tr>
</thead>
<tbody>
<tr>
<td>Boots</td>
<td>Unit 7 Fulham Broadway Retail Centre</td>
<td>Parsons Green and Walham</td>
</tr>
<tr>
<td>Boots</td>
<td>322-324 North End Road</td>
<td>Fulham Broadway</td>
</tr>
<tr>
<td>Fontain Pharmacy</td>
<td>290 Munster Road</td>
<td>Munster</td>
</tr>
<tr>
<td>Boots UK Ltd</td>
<td>Ariel Way, Westfield London</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Pestle And Mortar</td>
<td>388 Uxbridge Road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Boots</td>
<td>5-6 The Broadway, W12 Shopping Centre</td>
<td>Addison</td>
</tr>
<tr>
<td>Tesco Pharmacy</td>
<td>180 Shepherds Bush Road</td>
<td>Avonmore and Brook Green</td>
</tr>
<tr>
<td>Boots</td>
<td>41-43 King Street</td>
<td>Hammersmith Broadway</td>
</tr>
<tr>
<td>Boots Hammersmith Broadway</td>
<td>29-30 Centre West</td>
<td>Hammersmith Broadway</td>
</tr>
</tbody>
</table>

Source: Contractor Survey and NHS England, 2017

6.34 Overall there is good pharmacy coverage across the borough in consideration of proximity to the GP services and current and known future need.

Figure 6.10: Pharmacies open on a Sunday and their range of opening hours.

6.35 Good transport links in the borough make pharmacies that are open during late evenings, early morning and Sundays easily accessible. There is also scope within existing pharmacies in and around College Park and Old Oak, Wormholt and White City, Ravenscourt Park, Sands End, Palace Riverside and Parsons Green to work
collaboratively with commissioners to widen provision of early morning and late evening and Sunday opening hours.

**Appliance Contractors**

6.36 Appliance contractors provide services to people who need appliances such as stoma and incontinence care aids, trusses, hosiery, surgical stockings and dressings. They range from small sole-trader businesses to larger companies. They do not supply drugs. However, pharmacies and dispensing doctors can also supply appliances.

6.37 There are no appliance-only contractors in Hammersmith & Fulham.

6.38 Twenty-four of the pharmacies that responded to the survey supply stoma care aids with three intending to begin within the next 12 months.

6.39 Twenty-six of the pharmacies that responded to the survey supply incontinence aids with three others intending to begin within the next 12 months.

6.40 Thirty-four of the pharmacies that responded to the survey supply dressings with an additional two intending to begin within the next 12 months.

**Communication**

6.41 Pharmacies hire staff from a variety of ethnic backgrounds and who speak a variety of languages. The most common **languages** spoken other than English in Hammersmith & Fulham pharmacies are Gujarati, Hindi and Arabic.

6.42 The top three languages other than English spoken by residents in the borough are French, Arabic and Spanish. All of these are spoken by at least one member of staff from a range of pharmacies across the borough. Table 6.6 lists the most common languages spoken by a member of staff in the pharmacies that responded to the survey.

**Table 6.6: Top 10 languages spoken by a member of staff at the pharmacies in Hammersmith & Fulham**

<table>
<thead>
<tr>
<th>Language</th>
<th>Number of Pharmacies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gujarati</td>
<td>23</td>
</tr>
<tr>
<td>Hindi</td>
<td>18</td>
</tr>
<tr>
<td>Arabic</td>
<td>16</td>
</tr>
<tr>
<td>Urdu</td>
<td>9</td>
</tr>
<tr>
<td>French</td>
<td>8</td>
</tr>
<tr>
<td>Punjabi</td>
<td>7</td>
</tr>
<tr>
<td>Farsi</td>
<td>6</td>
</tr>
<tr>
<td>Spanish</td>
<td>6</td>
</tr>
<tr>
<td>Italian</td>
<td>6</td>
</tr>
<tr>
<td>Polish</td>
<td>5</td>
</tr>
</tbody>
</table>
Consultation Rooms

6.43 Ideally, pharmacies should have consultation areas or rooms with wheelchair access in order to be able to offer a broad range of services.

6.44 Thirty-six of the community pharmacies that responded to the survey reported having a clearly signposted private consulting room. Two pharmacies report having an offsite consulting room/area.

6.45 Thirty-seven of the pharmacies report having consulting rooms that comply with MUR/NMS requirements.

6.46 Thirty-six pharmacies report having hand-washing facilities close to the consultation room. Patients have access to toilet facilities in 11 pharmacies.

Disability Access

6.47 Thirty-two of the pharmacies with a consultation room indicated that they were accessible to wheelchair users and one more planning for such access in the future.

6.48 Accessible information formats are alternatives to printed information, used by blind and partially sighted people, or others with a print impairment. Twenty-nine pharmacies that responded to the survey provide printed information in large print format and 15 provide it in Easy Read format. Only one pharmacy within the borough (Globe Chemist) provides printed information in Braille.

Collection and Delivery of Medication

6.49 Repeat dispensing allows patients to collect their repeat prescriptions from a pharmacy without having to request a new prescription from their GP. The benefits of repeat dispensing include reduction of medicine waste, reduction in GP practice workload, improved predictability of pharmacy workload and greater convenience for patients. Thirty-six of the pharmacies surveys reported that they offer a repeat prescription service.

6.50 Pharmacies in Hammersmith & Fulham further improve access by providing delivery services to the local population. Twenty-three of the pharmacies surveys reported that they deliver dispensed medicines, free of charge on request (see Table 6.7).

Table 6.7: Collection of prescriptions and delivery of medication

<table>
<thead>
<tr>
<th>Type of collection or delivery service</th>
<th>Number of pharmacies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Collection of prescriptions from surgeries</td>
<td>37</td>
</tr>
<tr>
<td>Delivery of dispensed medicines - free of charge on request</td>
<td>23</td>
</tr>
</tbody>
</table>
6.51 All pharmacies provide a **disposal service** of unwanted or unused medicines. No pharmacies are commissioned to provide a sharps disposal service.

**Information Technology**

6.52 IT can improve high quality care by enabling storage accessibility of patient records, electronic prescribing and improve medicines management. Twenty-nine of the pharmacies surveyed reported to have access to an **IT system** within the consultation room and another six more are intending one within the next 12 months. Five of these pharmacies have access to patient records from this IT system.

6.53 Most of the surveyed pharmacies (38/42) are currently **Release 2** enabled.

6.54 Thirty-six pharmacies reported that they have access to **Microsoft Office applications** and 34 pharmacies have access to **NHS.net email**.

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**Summary of necessary services: current provision (Schedule 1, paragraph 1)**

**Necessary services: gaps in provision (Schedule 1, paragraph 2)**

Necessary services are fundamental for patients to obtain prescribed medicines in a safe and reliable manner. All pharmacies are required to deliver and comply with the specifications for all essential services.

Dispensing NHS prescriptions, access (both location and hours of opening) and facilities (including provision of suitable consultation areas and disability access) were considered in the evaluation of essential services for this PNA.

The Hammersmith & Fulham Health and Wellbeing Board believes that the range of opening hours, options for delivery of medications and the close proximity of pharmacies to local residents and transport facilities is **sufficient for supplying a necessary pharmaceutical service in the borough**.

However there are opportunities for existing pharmacies, by working collaboratively with commissioners, to widen current opening hours to widen provision of early morning and late evening and Sunday opening hours in College Park and Old Oak, Wormholt and White City, Ravenscourt Park, Sands End, Palace Riverside and Parsons Green.
Chapter 7- Advanced, Locally Enhanced and Locally Commissioned Services Provided by Pharmacies

Categorisation of Pharmaceutical Services

7.1 Pharmaceutical services in relation to PNAs include:
- **Essential services** which every community pharmacy providing NHS pharmaceutical services must provide and is set out in their terms of service
- **Advanced services** - services community pharmacy contractors and dispensing appliance contractors can provide subject to accreditation as necessary
- **Locally Enhanced Services** - services commissioned locally by NHS England's area teams
- **Other Locally Commissioned Services** - Public Health Services commissioned by the Local Authorities in order to meet the needs of the population.

7.2 The categorisation of these services into those stipulated by the PNA regulations (defined in Chapter 1) for Hammersmith & Fulham are summarised in Table 7.1.
Table 7.1: Summary of categorisation of services into those stipulated by PNA regulations

<table>
<thead>
<tr>
<th>Necessary services: current provision (Schedule 1, paragraph 1)</th>
<th>Necessary services: gaps in provision (Schedule 1, paragraph 2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pharmacy provision in Hammersmith and Fulham is sufficient for supplying a necessary pharmaceutical service in the borough.</td>
<td>No gaps in provision of necessary services.</td>
</tr>
</tbody>
</table>

Other relevant services: current provision (Schedule 1, paragraph 3)

- Medicine Use Review service
- New Medicine Service
- Appliance Use Reviews
- Stoma Appliance Customisation Service
- National NHS England Flu Service
- NHS Urgent Medicine Supply Advanced Service

Other services (Schedule 1, paragraph 5)

<table>
<thead>
<tr>
<th>Commissioned Services:</th>
<th>Privately provided services:</th>
</tr>
</thead>
<tbody>
<tr>
<td>- NHS Health Checks</td>
<td>- Minor Ailments Scheme</td>
</tr>
<tr>
<td>- Supervised Administration</td>
<td>- Out of Hours Palliative Care Service</td>
</tr>
<tr>
<td>- Needle Exchange Services</td>
<td>- Alcohol Misuse Service</td>
</tr>
<tr>
<td>- Stop Smoking Services</td>
<td>- Weight Management Services</td>
</tr>
<tr>
<td>- Emergency Hormonal Contraception</td>
<td>- Sexual Health Screening and Treatment</td>
</tr>
<tr>
<td></td>
<td>- Care Home Advice service</td>
</tr>
</tbody>
</table>

Improvements and better access: gaps in provision (Schedule 1, paragraph 4)

Not commissioned: Alcohol Misuse services

7.3 This chapter outlines the Other Relevant Services, Other Services and Improvements and better access of pharmacy services in Hammersmith & Fulham.

Other Relevant Services: Current Provision (Schedule 1, paragraph 3).

There are six Advanced services within the NHS community pharmacy contractual framework considered relevant. Community pharmacies can choose to provide any of these services as long as they meet the requirements set out in the Secretary of State Directions.
Medicines Use Reviews (MURs)

7.4 The Medicines Use Review and Prescription Intervention Service (MUR) as part of the community pharmacy contractual framework was the first advanced service to be introduced. The purpose of the MUR service is, with the patient’s agreement, to improve their knowledge and use of medicines, through a specific consultation between the pharmacist and the patient. In particular, by:

- establishing the patient’s actual use, understanding and experience of taking medicines
- identifying, discussing and resolving poor or ineffective use of medicines
- identifying side effects and drug interactions that may affect the patient’s compliance with the medicines prescribed for them
- improving clinical and cost effectiveness of medicines prescribed also helping to reduce medicines wastage

7.5 MURs improve adherence with the prescribed regimen, help to manage risks related to poor medicines management and therefore improve patient outcomes and reduce hospital admissions.

7.6 During the financial year 2016/17, thirty-eight pharmacies in the borough were commissioned to provide MURs. Thirty-seven of these pharmacies are operational as of the time of publication and their reach is displayed in Figure 7.1 and listed in Appendix D).

Figure 7.1: Pharmacies that provide MURs in the Hammersmith & Fulham and their 500 metre coverage, October 2017

Source: NHS England, 2017

7.7 Pharmacies who are contracted to deliver MURs can provide up to 400 MURs each year. NHS England provide recorded activity to show which pharmacies are actively
offering the MUR service. The average number of MURs delivered per pharmacy who are actively delivering MURs between April 2016 and April 2017 was 274.5.

### 7.8 Table 7.2 summarizes MURs activity in the financial year 2016/17. It shows that there is a good reach and high delivery of MURs across the borough.

#### Table 7.2: Number of MURs provided, Hammersmith & Fulham pharmacies, 2016/17

<table>
<thead>
<tr>
<th>Ward</th>
<th>Number of Pharmacies</th>
<th>Total Number of MURs provided</th>
<th>Average Number per Pharmacy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addison</td>
<td>3</td>
<td>990</td>
<td>330.0</td>
</tr>
<tr>
<td>Askew</td>
<td>2</td>
<td>318</td>
<td>159.0</td>
</tr>
<tr>
<td>Avonmore and Brook Green</td>
<td>1</td>
<td>400</td>
<td>400.0</td>
</tr>
<tr>
<td>College Park and Old Oak</td>
<td>1</td>
<td>119</td>
<td>119.0</td>
</tr>
<tr>
<td>Fulham Broadway</td>
<td>2</td>
<td>783</td>
<td>391.5</td>
</tr>
<tr>
<td>Fulham Reach</td>
<td>2</td>
<td>461</td>
<td>230.5</td>
</tr>
<tr>
<td>Hammersmith Broadway</td>
<td>3</td>
<td>1100</td>
<td>366.7</td>
</tr>
<tr>
<td>Munster</td>
<td>2</td>
<td>273</td>
<td>136.5</td>
</tr>
<tr>
<td>North End</td>
<td>2</td>
<td>118</td>
<td>59.0</td>
</tr>
<tr>
<td>Parsons Green and Walham</td>
<td>2</td>
<td>732</td>
<td>366.0</td>
</tr>
<tr>
<td>Sands End</td>
<td>1</td>
<td>407</td>
<td>407.0</td>
</tr>
<tr>
<td>Shepherd's Bush Green</td>
<td>11</td>
<td>2853</td>
<td>259.4</td>
</tr>
<tr>
<td>Town</td>
<td>4</td>
<td>1264</td>
<td>316.0</td>
</tr>
<tr>
<td>Wormholt and White City</td>
<td>2</td>
<td>612</td>
<td>306.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>38</strong></td>
<td><strong>10430</strong></td>
<td><strong>274.5</strong></td>
</tr>
</tbody>
</table>

Source: NHS England, 2017

### 7.9 Given the wide distribution of MUR services across the borough the Health and Wellbeing Board are satisfied that there is sufficient for supplying a relevant service with no gaps.

#### New Medicines Services (NMS)

### 7.10 The New Medicine Service (NMS) supports patients with long-term conditions, who are taking a newly prescribed medicine, to help improve medicines adherence. The service is focused on the following patient groups and conditions:

- asthma and chronic obstructive pulmonary disease (COPD)
- type 2 diabetes
- antiplatelet/anticoagulant therapy
- hypertension

### 7.11 This service is designed to improve patients’ understanding of a newly prescribed medicine for their long-term condition, and help them get the most from the medicine.

### 7.12 New Medicines Service can only be provided by pharmacies only and is conducted in a private consultation area to ensure patient confidentiality.
7.13 During the financial year 2016/17, 31 pharmacies in the borough provided NMSs. Thirty of these pharmacies are operational as of the time of publication and their reach is displayed in Figure 7.2 and listed in Appendix D).

**Figure 7.2: Pharmacies that provide NMS in Hammersmith & Fulham and their 500 metre coverage, October 2017**

![Figure 7.2: Pharmacies that provide NMS in Hammersmith & Fulham and their 500 metre coverage, October 2017](source: NHS England, 2017)

7.14 Table 7.3 below summaries NMS activity in the financial year 2016/17. It shows a good reach of NMS across the borough with capacity within pharmacies to deliver more.

**Table 7.3: Number of NMS provided, Hammersmith & Fulham pharmacies, 2016/17**

<table>
<thead>
<tr>
<th>Ward</th>
<th>Number of Pharmacies</th>
<th>Total Number of NMS provided</th>
<th>Average Number per Pharmacy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addison</td>
<td>3</td>
<td>247</td>
<td>82.3</td>
</tr>
<tr>
<td>Askew</td>
<td>1</td>
<td>28</td>
<td>28.0</td>
</tr>
<tr>
<td>Avonmore and Brook Green</td>
<td>1</td>
<td>141</td>
<td>141.0</td>
</tr>
<tr>
<td>Fulham Broadway</td>
<td>2</td>
<td>90</td>
<td>45.0</td>
</tr>
<tr>
<td>Fulham Reach</td>
<td>2</td>
<td>41</td>
<td>20.5</td>
</tr>
<tr>
<td>Hammersmith Broadway</td>
<td>3</td>
<td>282</td>
<td>94.0</td>
</tr>
<tr>
<td>Munster</td>
<td>2</td>
<td>16</td>
<td>8.0</td>
</tr>
<tr>
<td>North End</td>
<td>1</td>
<td>3</td>
<td>3.0</td>
</tr>
<tr>
<td>Parsons Green and Walham</td>
<td>1</td>
<td>74</td>
<td>74.0</td>
</tr>
<tr>
<td>Sands End</td>
<td>1</td>
<td>231</td>
<td>231.0</td>
</tr>
<tr>
<td>Shepherd's Bush Green</td>
<td>8</td>
<td>726</td>
<td>90.8</td>
</tr>
<tr>
<td>Town</td>
<td>4</td>
<td>407</td>
<td>101.8</td>
</tr>
<tr>
<td>Wormholt and White City</td>
<td>2</td>
<td>104</td>
<td>52.0</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>31</strong></td>
<td><strong>2390</strong></td>
<td><strong>77.1</strong></td>
</tr>
</tbody>
</table>
7.15 NMS are supplied widely across the borough, therefore the Health and Wellbeing Board are satisfied that this is sufficient for supplying a relevant service with no gaps.

**Appliance Use Reviews (AURs)**

7.16 Appliance Use Review (AUR) is another advanced service that community pharmacy and appliance contractors can choose to provide so long as they fulfil certain criteria.

7.17 AURs can be carried out by, a pharmacist or a specialist nurse either at the contractor's premises or at the patient's home. AURs help patients to better understand and use their prescribed appliances 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
- Advising the patient on the safe and appropriate storage of the appliance
- Advising the patient on the safe and proper disposal of the appliances that are used or unwanted

7.18 Only one Hammersmith and Fulham pharmacy is commissioned to deliver AUR: Lloyds Pharmacy at Richford Gate Primary Care Centre (Hammersmith Broadway ward).

7.19 There are no appliance only contractors in Hammersmith & Fulham.

7.20 Given the flexibility of how this service can be delivered, and the low volume of use, the Health and Wellbeing board are satisfied that the AUR service is sufficient for supplying a relevant service with no gaps.

**Stoma Appliance Customisation Service (SAC)**

7.21 The SAC 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.

7.22 Only Lloyds Pharmacy in Richford Gate Primary Care Centre in Hammersmith Broadway ward is commissioned to deliver SAC in the borough.

7.23 Residents can access the SAC service either from non-pharmacy providers within the Borough (e.g. community health services) or from dispensing appliance contractors outside of the Borough. Therefore the provision of SACs through pharmacies is sufficient to meet the current and future needs of this borough.

**National NHS England Flu Service**
7.24 Flu vaccination by injection, commonly known as the “flu jab” is available every year on the NHS to protect certain groups who are at risk of developing potentially serious complications, such as:

- anyone over the age of 65
- pregnant women
- children and adults with an underlying health condition (particularly long-term heart or respiratory disease)
- children and adults with weakened immune systems

7.25 GPs currently provide the majority of flu vaccinations and pharmacies can help improve access to this service given their convenient locations, extended opening hours and walk-in service. The National Advanced Flu Service is an advanced service commissioned by NHS England to maximise the uptake of the flu vaccine by those who are ‘at-risk’ due to ill-health or long terms condition.

7.26 In addition to the Advanced Flu Service the NHS England London Region commissions the London Pharmacy Vaccination Service (2017/18). It covers other vaccines in addition to flu and can be provided by any pharmacy in London. It provides a vaccination service where there may otherwise be gaps and is offered to a wider patient group.

7.27 Twenty seven pharmacies in the borough provide flu vaccines (Figure 7.3 and Table 7.4).

Figure 7.3: Pharmacies that provide Flu Vaccinations in Hammersmith & Fulham and their 500 metre coverage, October 2017

Source: NHS England, 2017
Table 7.4: Pharmacies that provide Flu Vaccinations in Hammersmith & Fulham by ward, October 2017

<table>
<thead>
<tr>
<th>Ward</th>
<th>Number of Pharmacies</th>
<th>Ward</th>
<th>Number of Pharmacies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shepherd's Bush Green</td>
<td>8</td>
<td>Askew</td>
<td>1</td>
</tr>
<tr>
<td>Town</td>
<td>4</td>
<td>Sands End</td>
<td>1</td>
</tr>
<tr>
<td>Hammersmith Broadway</td>
<td>3</td>
<td>Avonmore and Brook Green</td>
<td>1</td>
</tr>
<tr>
<td>Addison</td>
<td>2</td>
<td>Parsons Green and Walham</td>
<td>1</td>
</tr>
<tr>
<td>Fulham Reach</td>
<td>2</td>
<td>College Park and Old Oak</td>
<td>1</td>
</tr>
<tr>
<td>Fulham Broadway</td>
<td>2</td>
<td>North End</td>
<td>1</td>
</tr>
<tr>
<td>Wormholt and White City</td>
<td>1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: NHS England, 2017

7.28 As shown in Figure 7.3 and Table 7.4 the pharmacy provision of flu vaccination is easily accessible throughout the borough. The Health and Wellbeing Board believes that the current provision of flu vaccinations is sufficient for supplying a relevant service with no gaps.

NHS Urgent Medicines Supply Advanced Service

7.29 This is a pilot service that was set up to relieve the pressure on urgent and emergency care services by shifting the demand from GP out-of-hours providers to community pharmacy. It enables appropriate urgent access to medicines or appliances through community pharmacies. Patients who contact NHS 111 can access this service.

7.30 NHS England list four pharmacies in Hammersmith & Fulham to provide an NHS Urgent Medicines Supply Advanced service. These are listed in Table 7.5 below.

Table 7.5: Pharmacies that provide NHS Medicines Supply Advanced Service in Hammersmith & Fulham by ward, October 2017

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Ward</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bush Pharmacy</td>
<td>334 Uxbridge Road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Fulham Pharmacy</td>
<td>608 Fulham Road</td>
<td>Town</td>
</tr>
<tr>
<td>Green Light Pharmacy</td>
<td>228-230A Uxbridge Road</td>
<td>Shepherd’s Bush Green</td>
</tr>
<tr>
<td>Lime Grove Pharmacy</td>
<td>66 Goldhawk Road</td>
<td>Shepherd’s Bush Green</td>
</tr>
</tbody>
</table>

Source: NHS England, 2017

7.31 The Health and Wellbeing Board believes that this is sufficient for supplying a relevant service with no gaps.
Summary of Other Relevant Services: current provision (schedule 1, paragraph 3).

Community pharmacies can choose to provide any or all of the four Other Relevant Services within the NHS community pharmacy contractual framework, as long as they meet the requirements set out in the Secretary of State Directions. The advanced services are:

- Medicine Use Review service (MURs)
- New Medicine Service (NMS)
- Stoma Customisation Service (SACs)
- Appliance Use Reviews (AURs)
- Flu Vaccinations
- NHS Urgent Medicines Supply Advanced Service

The number and proximity of pharmacies locally means the vast majority of residents in the borough live close to a pharmacy that provides Medicine Use Review services, New Medicine Services and Flu Vaccination. The Health and Wellbeing Board believes that the current provision of Medicine Use Review services, New Medicine Services, Flu Vaccination and NHS Urgent Medicines Supply Advanced Services is sufficient for supplying a relevant service with no gaps.

Both the Stoma Customisation Service and Appliance Use Reviews are supplied by pharmacies community health services and specialist nurses. In considering the low volume of use of this service the Health and Wellbeing Board are satisfied that the Stoma Customisation Service and Appliance Use Review service is sufficient for supplying a relevant service with no gaps.

Other Services: Current Provision (schedule 1, paragraph 5).

7.32 Certain enhanced services are commissioned by NHS England Regulations 2013. The responsibilities for commissioning some of the locally enhanced services under the previous regulations now sits within public health and are commissioned by Local Authorities.

7.33 The following section outlines the enhanced services currently commissioned by NHS England and Public Health and explores their relevance to the local population and their current and future commissioning. Other services provided privately by pharmacies are also explored.
Public Health Commissioned Services

NHS Health Checks

7.34 Screening services within pharmacies can bring a range of benefits including identifying patients at risk of developing a specific disease or condition and providing advice, screening and signposting or referrals.

7.35 NHS Health Checks is a screening programme set up to identify the risk of vascular disease in the population early and then to help people reduce or avoid it. Generally NHS Health Checks take place as part of general practice services, yet pharmacies are also well placed to play a key role.

7.36 Two pharmacies in provide NHS Health Checks in the borough (see Table 7.6).

<table>
<thead>
<tr>
<th>Pharmacy</th>
<th>Address</th>
<th>Ward</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bush Pharmacy</td>
<td>334 Uxbridge Road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Healthside Pharmacy</td>
<td>90 Shepherds Bush Road</td>
<td>Addison</td>
</tr>
</tbody>
</table>

Source: LBHF commissioning data, 2017

7.37 Most of the GPs in Hammersmith & Fulham are commissioned to provide NHS Health Checks and currently pharmacies perform health checks across the borough. The Health and Wellbeing Board identifies the level of this service to be sufficient, with no gaps.

Supervised Administration Service

7.38 Pharmacists providing a Supervised Administration Service supervise the consumption of medicines at the point of dispensing in a pharmacy. It ensures that the correct dosage has been administered properly and provides a confidential, non-judgmental approach for patients who need support to manage their medicines.

7.39 The London borough of Hammersmith & Fulham commission 14 pharmacies to provide a Supervised Administration Service (shown in Figure 7.4 and Table 7.7).

7.40 In considering reach of this service across the borough and within areas of high deprivation, therefore the Health and Wellbeing Board identifies the level of this service to be sufficient, with no gaps.
Figure 7.4: Pharmacies that provide Supervised Administration in Hammersmith & Fulham and their 500 metre coverage, October 2017

Table 7.7: Locations of Pharmacies that provide Supervised Administration in Hammersmith & Fulham by ward, October 2017

<table>
<thead>
<tr>
<th>Hammersmith &amp; Fulham Ward</th>
<th>Number of Pharmacies</th>
<th>Hammersmith &amp; Fulham Ward</th>
<th>Number of Pharmacies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shepherd's Bush Green</td>
<td>6</td>
<td>Parsons Green and Walham</td>
<td>1</td>
</tr>
<tr>
<td>Town</td>
<td>2</td>
<td>Askew</td>
<td>1</td>
</tr>
<tr>
<td>Hammersmith Broadway</td>
<td>2</td>
<td>Addison</td>
<td>1</td>
</tr>
<tr>
<td>Fulham Broadway</td>
<td>1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: LBHF commissioning data, 2017

Needle and Syringe Exchange

7.41 Good access to Needle and Syringe Exchange supports safer use of drugs by injecting drug users by reducing the transmission of viruses and other infections caused by needles and syringes, such as HIV and Hepatitis B and C.

7.42 A Needle and Syringe Exchange Service provides sterile needles, syringes and associated materials to drug misusers and disposes of used needles, syringes and associated materials. Additionally, the service offers advice to drug misusers and where appropriate makes referrals to other health care professionals or a specialist drug treatment centre.
7.43 The London Borough of Hammersmith and Fulham commission 11 pharmacies to provide a Needle and Syringe Exchange Service (Table 7.8).

Table 7.8: Pharmacies that provide a Needle and Syringe Exchange service in Hammersmith & Fulham, October 2017

<table>
<thead>
<tr>
<th>Trading Name</th>
<th>Address</th>
<th>Ward</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faro Pharmacy</td>
<td>16 Swanscombe Road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Boots</td>
<td>29-30 Centre West</td>
<td>Hammersmith Broadway</td>
</tr>
<tr>
<td>Boots</td>
<td>322-324 North End Road</td>
<td>Fulham Broadway</td>
</tr>
<tr>
<td>Fontain Pharmacy</td>
<td>290 Munster Road</td>
<td>Munster</td>
</tr>
<tr>
<td>Fulham Pharmacy Ltd</td>
<td>608 Fulham road</td>
<td>Town</td>
</tr>
<tr>
<td>Green Light pharmacy</td>
<td>228-230 Uxbridge Road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Healthside Pharmacy</td>
<td>90 Shepherds Bush Road</td>
<td>Addison</td>
</tr>
<tr>
<td>Palace Pharmacy</td>
<td>331 Fulham Palace Road</td>
<td>Munster</td>
</tr>
<tr>
<td>Sophia Chemists</td>
<td>67 Blythe Road</td>
<td>Addison</td>
</tr>
<tr>
<td>Superdrug Pharmacy</td>
<td>92-94 Uxbridge Road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Windwood Chemist</td>
<td>96 Askew Road</td>
<td>Askew</td>
</tr>
</tbody>
</table>

Source: LBHF Commissioning Data, 2017

Figure 7.5: Pharmacies that provide Needle & Syringe Exchange services in Hammersmith & Fulham and their 500m coverage, October 2017

Source: LBHF Commissioning Data, 2017
7.44 Given the specialist nature and low volumes of service use compared to normal dispensing, the Health and Wellbeing Board identifies the level of these services to be sufficient, with no gaps.

Stop Smoking Service

7.45 Smoking is the single biggest preventable cause of death and inequalities and levels of smoking are high in Hammersmith & Fulham. Securing good access to stop smoking services increases the opportunity for the population to benefit from improvements in health including reduced risk of cancers, circulatory diseases and respiratory diseases.

7.46 A stop smoking service within a pharmacy can provide advice and support to patients wishing to give up smoking and where appropriate supply nicotine replacement therapies.

7.47 Twenty-six pharmacies are commissioned by the borough to provide Stop Smoking Services. These are shown in Figure 7.6 and Table 7.9.

Figure 7.6: Pharmacies that provide Stop Smoking services in Hammersmith & Fulham and their 500m coverage, October 2017

7.48 In considering the wide reach of Stop Smoking Services on offer, the Health and Wellbeing Board identifies the Service provided in local pharmacies as sufficient for supplying a service with no gaps.
Table 7.9: Locations of Pharmacy providing Stop Smoking services in Hammersmith & Fulham by ward, October 2017

<table>
<thead>
<tr>
<th>Hammersmith &amp; Fulham Ward</th>
<th>Number of Pharmacies</th>
<th>Hammersmith &amp; Fulham Ward</th>
<th>Number of Pharmacies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shepherd's Bush Green</td>
<td>9</td>
<td>College Park and Old Oak</td>
<td>1</td>
</tr>
<tr>
<td>Town</td>
<td>2</td>
<td>Wormholt and White City</td>
<td>1</td>
</tr>
<tr>
<td>Hammersmith Broadway</td>
<td>2</td>
<td>Munster</td>
<td>1</td>
</tr>
<tr>
<td>North End</td>
<td>2</td>
<td>Fulham Reach</td>
<td>1</td>
</tr>
<tr>
<td>Addison</td>
<td>2</td>
<td>Avonmore and Brook Green</td>
<td>1</td>
</tr>
<tr>
<td>Parsons Green and Walham</td>
<td>2</td>
<td>Sands End</td>
<td>1</td>
</tr>
<tr>
<td>Fulham Broadway</td>
<td>1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: LBHF Commissioning Data, 2017

Emergency Hormonal Contraception

7.49 The Emergency Hormonal Contraception (EHC) service aims to reduce unintended pregnancies. Pharmacies that provide EHC can provide signposting to mainstream contraception services and provide information in risks associated with sexually transmitted infections.

7.50 Five pharmacies provide a commissioned EHC service. These are outlined in Table 7.10.

Table 7.10: Locations of pharmacies that provide EHC in 72-hour period by ward, October 2017

<table>
<thead>
<tr>
<th>Ward</th>
<th>Number of Pharmacies</th>
<th>Ward</th>
</tr>
</thead>
<tbody>
<tr>
<td>Caregrange Pharmacy</td>
<td>9 Goldhawk Road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Fulham Pharmacy Ltd</td>
<td>608 Fulham road</td>
<td>Town</td>
</tr>
<tr>
<td>Lime Grove Pharmacy</td>
<td>66 Goldhawk Road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Green Light pharmacy</td>
<td>228-230 Uxbridge Road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Sophia Chemists</td>
<td>67 Blythe Road</td>
<td>Addison</td>
</tr>
</tbody>
</table>

Source: LBHF Commissioning Data, 2017

7.51 Health and Wellbeing Board is satisfied that the EHC provided in local pharmacies is sufficient for supplying a service with no gaps.

Privately Provided Pharmacies

Minor Ailment Scheme

7.52 The Minor Ailment Scheme offers free advice and treatment for minor, self-limiting conditions such as mild skin conditions, coughs and colds and aches and pains. This service helps to relieve pressure from GPs and Secondary Care.
7.53 No pharmacies have been commissioned by NHS England to provide the scheme in Hammersmith and Fulham. Four pharmacies state in the contractor survey that they provide it privately.

7.54 The North West London Collaboration of CCGs Prescribing Wisely initiative encourages the public to use community pharmacies for advice and help with common self-limiting ailments and to purchase any over the counter medicines they need. In considering these factors, the Health and Wellbeing Board are satisfied that there are no need for the provision of the Minor Ailment Scheme.

**Out of Hours Palliative Care Drugs**

7.55 In line with providing care closer to home, it is essential that there is good access to drugs used in the palliative environment for those patients choosing to die at home. Pharmacology management and support can support improvements to patients’ quality of life while reducing costs and use of unnecessary medications.

7.56 Out of hours palliative care is a locally enhanced service that supports this. NHS England commissions no pharmacies in Hammersmith and Fulham to offer the service.

7.57 The Health and Wellbeing Board therefore identifies the provision of Out of Hours Palliative Care Service is sufficient for supplying a necessary service. However further exploration by relevant stakeholders is needed to identify if there is a need for out of hours palliative care drugs.

**Alcohol Misuse Service**

7.58 The Alcohol Misuse Service can provide brief interventions to identify and higher risk and increasing risk drinkers and provide support to motivate individuals to modify their drinking patterns.

7.59 Although alcohol-related hospital admissions and binge drinking rates are lower in Hammersmith & Fulham than nationally, binge drinking widespread across the borough and highest in Munster and River Palace.

7.60 No pharmacies in Hammersmith & Fulham provide alcohol misuse and screening services although 35 pharmacies reported they would be willing to provide the service if commissioned.

7.61 The Health and Wellbeing Board considers the Alcohol Misuse Services as a service that pharmacies would provide better access to if locally commissioned.

**Weight Management Services**

7.62 Obesity in the borough is low in comparison to national figures, however rates are increasing. This likely to have significant impact on healthy-life expectancies and future health costs. Weight management services, particularly for children would expand the health promotion role of pharmacies.
7.63 The contractor survey identified eight pharmacies that provide weight management services (see Table 7.11) and 28 more willing to provide this service if commissioned.

Table 7.11: Pharmacies that provide Weight Management in Hammersmith & Fulham, 2017

<table>
<thead>
<tr>
<th>Pharmacy</th>
<th>Address</th>
<th>Ward</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day Lewis Pharmacy</td>
<td>117-121 Wandsworth Bridge Road</td>
<td>Sands End</td>
</tr>
<tr>
<td>Hamlins Pharmacy</td>
<td>73 Bloemfontein Rd</td>
<td>Wormholt and White City</td>
</tr>
<tr>
<td>Bush Pharmacy</td>
<td>334 Uxbridge Road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Pestle And Mortar Pharmacy</td>
<td>59 South Africa Road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Pharmacy On Wheels</td>
<td>86 Goldhawk Road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Babylon Health Ltd Pharmacy</td>
<td>57 Uxbridge road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Caregrange Pharmacy</td>
<td>9 Goldhawk Road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Healthside Pharmacy</td>
<td>90 Shepherds Bush Road</td>
<td>Addison</td>
</tr>
</tbody>
</table>

Source: Contractor Survey, 2017

7.64 Health and Wellbeing Board is satisfied that the Weight Management Service provided in local pharmacies is sufficient for supplying a service with no gaps.

Sexual Health Screening and Treatment

7.65 Pharmacies can be commissioned to provide services such as condom distribution; pregnancy testing and advice, Chlamydia screening and treatment and other sexual health screening, including syphilis, HIV and gonorrhoea. Currently these services are provided by GPs, GUM Clinics and Secondary Care Centres.

7.66 Three pharmacies in the borough offer spot HIV testing (see Table 7.12 below). All of these pharmacies provide the service privately. Twenty-seven other pharmacies are willing to provide the service if commissioned to do so.

Table 7.12: Pharmacies that provide spot HIV testing in Hammersmith & Fulham, October 2017

<table>
<thead>
<tr>
<th>Trading Name</th>
<th>Address</th>
<th>Ward</th>
</tr>
</thead>
<tbody>
<tr>
<td>Superdrug Pharmacy</td>
<td>92-94 Uxbridge Road</td>
<td>Shepherd’s Bush Green</td>
</tr>
<tr>
<td>North End Pharmacy</td>
<td>100A North End Road</td>
<td>North End</td>
</tr>
<tr>
<td>Superdrug Pharmacy</td>
<td>65-69 King Street</td>
<td>Hammersmith Broadway</td>
</tr>
</tbody>
</table>

Source: Contractor Survey, 2017

7.67 Within Hammersmith & Fulham there is extensive provision to provide Sexually Transmitted Infections screening and treatment within Local Authority commissioned services. Additionally Hammersmith & Fulham City Council is commissioning e-services that will provide remote chlamydia treatment within pharmacies from April 2018. Therefore the Health and Wellbeing board are satisfied that Sexual Health Screening and Treatment services as sufficient with no gaps.
The Care Home Advice Service

7.68 The Care Home Advice Service involves providing advice and support to the staff and management within the care home on medicines management, to ensure the proper and effective ordering, storage and administration of drugs and appliances and proper record keeping. This is essential as residents in care homes are often on a large number of medicines that often require additional support with compliance.

7.69 The Care Home Advice Service includes advice on medicines management, best practice guidelines and staff training and signposting.

7.70 Eight pharmacies responded indicated that they privately provide Care Home Advice services (outlined in Table 7.13) and another 23 would be willing to provide advice to care homes if commissioned to do so. No pharmacies have been commissioned to deliver this service.

Table 7.13: Pharmacies that provide Care Home Advice Service in Hammersmith & Fulham, October 2017

<table>
<thead>
<tr>
<th>Pharmacy</th>
<th>Address</th>
<th>Ward</th>
</tr>
</thead>
<tbody>
<tr>
<td>Day Lewis Pharmacy</td>
<td>117-121 Wandsworth Bridge road</td>
<td>Sands End</td>
</tr>
<tr>
<td>Hamlins Pharmacy</td>
<td>73 Bloemfontein Rd</td>
<td>Wormholt and White City</td>
</tr>
<tr>
<td>Lime Grove Pharmacy</td>
<td>66 Goldhawk Road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Superdrug Pharmacy</td>
<td>92-94 Uxbridge Road</td>
<td>Shepherd's Bush Green</td>
</tr>
<tr>
<td>Healthside Pharmacy</td>
<td>90 Shepherds Bush Road</td>
<td>Addison</td>
</tr>
<tr>
<td>Superdrug Pharmacy</td>
<td>65-69 King Street</td>
<td>Hammersmith Broadway</td>
</tr>
<tr>
<td>Boots</td>
<td>41-43 King Street</td>
<td>Hammersmith Broadway</td>
</tr>
<tr>
<td>My Pharmacy ltd</td>
<td>10 North Pole Road</td>
<td>College Park and Old Oak</td>
</tr>
</tbody>
</table>

Source: NHS England and Contractor Survey, 2017

7.71 The PNA did not identify any needs for the provision of commissioned Care Home Advice Service in the borough. Therefore Health and Wellbeing Board identifies the current private provision of the Care Home Advice Service to be sufficient for supplying a necessary service with no gap.

Improvements and Better Access: Gaps in Provision (Schedule 1, paragraph 4)

7.72 There are no gaps in services which the Health and Wellbeing Board considers could, if provided, secure improvements, or better access to pharmaceutical services of a specific type.

7.73 The Health and Wellbeing Board have identified Alcohol Misuse Service as a service that would, if they were provided, may secure improvements, or better access to pharmaceutical services of a specific type. This is not a commissioned service and therefore pharmacies would not be able to apply to fulfil this, unless it is commissioned by NHS England as an enhanced service.
Summary of Other (Locally Enhanced) Services: current provision (schedule 1, paragraph 5) and Improvements and better access: gaps in provision (Schedule 1, paragraph 4)

The following section defines the enhanced services commissioned and delivered in response to local health and wellbeing needs. It includes Public Health commissioned services. The following services are sufficient in providing a relevant services with no gaps:

<table>
<thead>
<tr>
<th>Public Health Commissioned Services:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• NHS Health Checks</td>
</tr>
<tr>
<td>• Supervised Administration</td>
</tr>
<tr>
<td>• Needle Exchange Services</td>
</tr>
<tr>
<td>• Stop Smoking Services</td>
</tr>
<tr>
<td>• Emergency Hormonal Contraception</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Privately provided services:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Minor Ailments Scheme</td>
</tr>
<tr>
<td>• Out of Hours Palliative Care Service</td>
</tr>
<tr>
<td>• Alcohol Misuse Service</td>
</tr>
<tr>
<td>• Weight Management Services</td>
</tr>
<tr>
<td>• Sexual Health Screening and Treatment</td>
</tr>
<tr>
<td>• Care Home Advice service</td>
</tr>
</tbody>
</table>

The Health and Wellbeing Board have identified three services that would, if they were provided, may secure improvements, or better access to pharmaceutical services of a specific type. These are:

<table>
<thead>
<tr>
<th>Not commissioned</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Alcohol Misuse services</td>
</tr>
</tbody>
</table>

Other Skills and Services Identified in the Pharmacy Contractor Survey

Utilisation of Clinical Skills in the Pharmacy

7.74 Twenty-four of the pharmacies reported that that the clinical skills in their pharmacies were “totally utilised”, 13 respondents felt they were “partly utilised” with only one feeling that they were not utilised at all

Pharmacists with a Special Interest

7.75 Three of the pharmacies surveyed have pharmacists with special interests.
**Health Champions**

7.76 Health Champions are people who, with training and support, voluntarily bring their ability to relate to people and their own life experience to transform health and wellbeing in their communities.

7.77 Eighteen of the pharmacies in Hammersmith & Fulham that responded stated that they have a health champion.

**Health Trainers**

7.78 Health trainers help people to develop healthier behaviour and lifestyles in their own local communities using behaviour change conversations. They offer practical support to change their behaviour to achieve their own choices and goals.

7.79 Five of the pharmacies in Hammersmith & Fulham that responded stated that they have a health trainer.

**Dementia Friendly Environment**

7.80 Dementia Friendly environments offer additional support and understanding to people who have Dementia. To achieve Dementia Friendly Status pharmacy staff attend brief training on what it's like to live with dementia and make changes to their pharmacy environment so that it is more welcoming to some who suffers from dementia.

7.81 Thirty-three of the pharmacies in the reported being a dementia friendly environment.