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City of Westminster

Role of Pharmacies in the Community

Westminster Health and Wellbeing Board

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Westminster Health and Wellbeing Board



Food for thought

Professor John Newton, Chief Knowledge Officer at PHE:

*“Community Pharmacy has great potential as a setting for people to stop and think about their health, and to get advice and support from someone they trust. Many pharmacy teams are already playing a significant role in promoting and improving people’s health in their local communities. **We need to understand how delivery of public health services in local pharmacies could contribute to improving health outcomes and reducing health inequalities in those communities.**”*

What do pharmacies offer?

Easy accessibility for those who cannot or do not wish to access other conventional NHS services

Long opening hours and convenience

A health resource on the high streets and supermarkets

Anonymity, where appropriate

Flexible setting within an informal environment

Local businesses well connected to their local communities

Staff tend to reflect the social and ethnic backgrounds of the populations they serve

Case Study: The 'Healthy Living Pharmacies' Pilot



A '**Healthy Living Pharmacy**' (HLP) builds on existing pharmacy services with provision of locally commissioned enhanced services. The principle categories of service delivery are based around **promotion, prevention and protection**.

DH launched the first six HLP in Portsmouth in June 2010. There are now over 800 HLPs in the United Kingdom with 3,000 Health Champions working within these HLPs.

The pilot

What was it?

An approach which **uses community pharmacies as a hub model for health services**, including:

- Advice on healthy lifestyle issues supported by health champions
- Medicine usage.
- Six public health campaigns per year.
- Locally commissioned services - stop smoking, alcohol, sexual health, NHS Health

Check

Why pharmacies?

1.8 million people visit a pharmacy each day.

Range of provider models: in communities, on the high street, in supermarkets, in shopping centres, in health centres and online.

Accessibility in terms of **location and long opening hours**. No need to build or identify new space. **Captive client base** and community identity

High level of training, including **clinical training**.

Healthy Living Pharmacies

Views of people

21% of people wouldn't have done anything if they hadn't accessed a service or support in the Healthy Living Pharmacy

Almost **100% of people were comfortable** being supported in the pharmacy and thought they were treated well

98% would recommend the service to others

What did it achieve?

29% increase in chlamydia screening (Stoke on Trent)

12% increase in 4 week smoking quit rate (Blackburn)

242% increase in alcohol advice given between a normal pharmacy and a Healthy Living Pharmacy

Outcomes improved in 26 of 33 evaluations

PHE Evidence¹ on the pharmacy contribution to public health

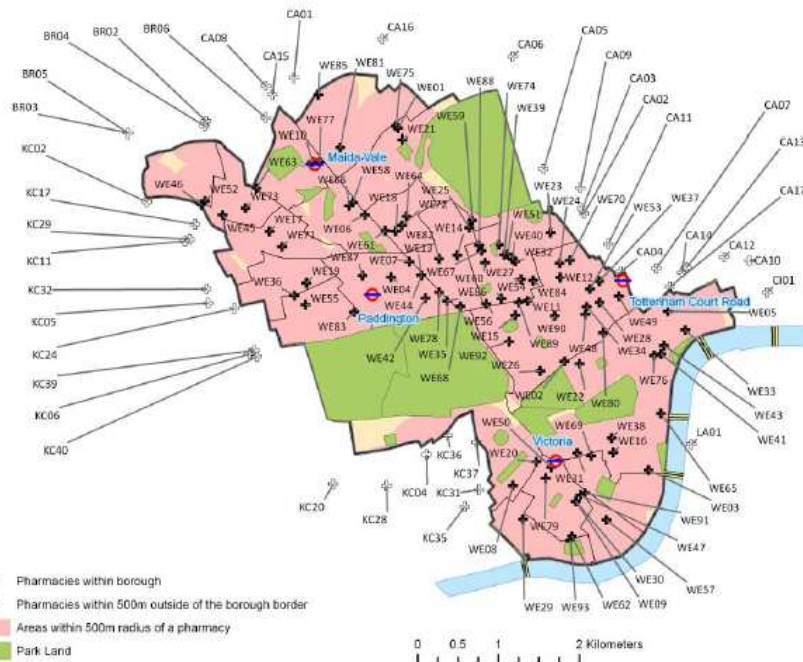
Service	Evidence of success
Stop Smoking Services	Very positive <i>55% quit rate (49% UK average and 42% GP av.)</i>
Emergency hormonal contraception (EHC)	Positive Evidence to suggest highly rated services
Healthy eating	Promise, but positive Insufficient evidence
Drug and alcohol misuse	Promise, but positive Insufficient evidence
Infection control and prevention	Promise, but positive Insufficient evidence
Chronic disease management & prevention	Very positive Good empirical evidence to suggest improved prevention in patients.

¹ Public Health England (2013) *Consolidating and developing the evidence base and research for community pharmacy's contribution to public health: a progress report from Task Group 3 of the Pharmacy and Public Health Forum*

The Westminster Context

68 out of 93 community pharmacies in Westminster (73%) are interested in becoming an accredited Healthy Living Pharmacy

At least 52 pharmacies in Westminster provide Medicine Usage Reviews and at least 46 pharmacies provide a New Medicines Services



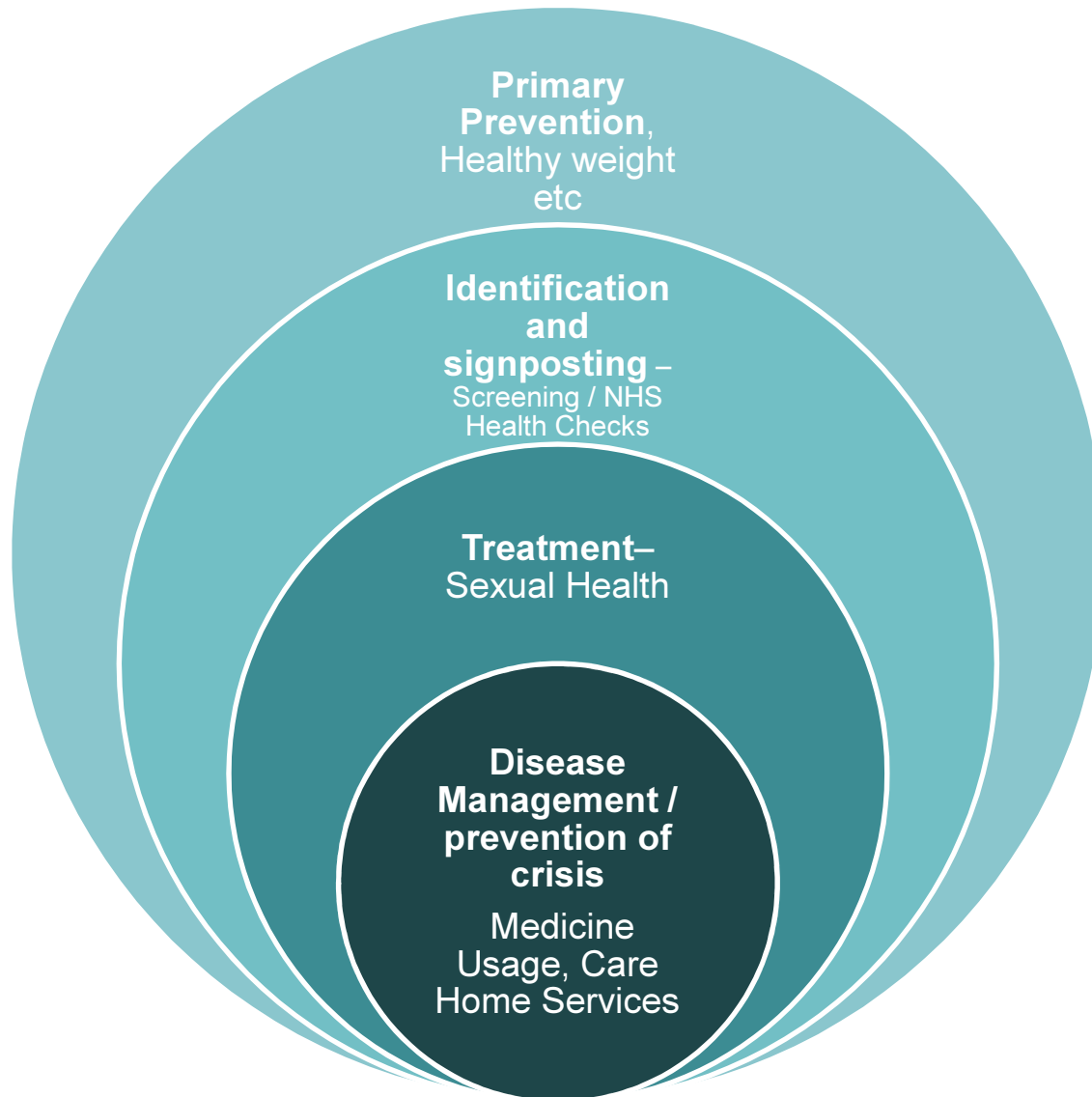
Areas where pharmacies may be currently underused as identified in the PNA:

- Care Home Service
- Medicines Assessment and Compliance Support Services
- Only one pharmacy reported having a health champion
- Only 4 pharmacies reported having a health trainer
- Screening and Immunisation services
- Public Health behaviour change services (stop smoking, healthy weight etc.)
- Sexual Health services

Locally Commissioned Services

Service	Type	Commissioner	No. Pharmacies
<i>Flu Vaccinations</i>	Locally Enhanced Service	NHS England	44
<i>Minor Ailment Scheme</i>	Locally Enhanced Service	NHS England	9
NHS Health Checks (Screening Service)	Other Locally Commissioned Service	Public Health	8
<i>Supervised Administration Service (Methadone etc)</i>	Other Locally Commissioned Service	Public Health	30
<i>Needle and Syringe Exchange Service</i>	Other Locally Commissioned Service	Public Health	12
<i>Stop Smoking Service</i>	Other Locally Commissioned Service	Public Health	67

What role do we want pharmacies to play in our health economy?



Are we maximising our community pharmacy resource in Westminster?

Do we consider the role that community pharmacy could play when designing and commissioning services?

Are we engaging effectively with community pharmacies in relation to our integration and whole systems work or our public health strategy?

Could an increased role for community pharmacies potentially reduce demand for:

- GPs
- Acute Services
- Adult Social Care
- Public Health services
- Children Services

Should we be considering the role that communities pharmacies could play in the wider determinants of health , i.e. housing, employment, managing debt, social isolation etc.

Developing a system-wide approach to community pharmacy

Does the Health and Wellbeing Board want to develop a system-wide approach to community pharmacy. If so:

- What questions should this work aim to answer?
- What should be out of scope for this work?

- Which Health and Wellbeing Board member should be the accountable lead for the work?
- When would it be best to deliver this work to inform future commissioning

- Should the PNA reference group we re-shaped to support the development of the approach?
- What other organisations need to be involved – Local Pharmaceutical Committee; GPs; Providers etc.?

Westminster policy and scrutiny committee may be keen to work with the Health and Wellbeing Board on this work by building an evidence base of how community pharmacies can go beyond Healthy Living Pharmacies to increase their role in tackling the wider determinants of health