



**WIRRAL
INTELLIGENCE
SERVICE**

Wirral Pharmaceutical Needs Assessment 2022-2025

**Wirral Health and Wellbeing Board
and Wirral Council**

September 2022

Version Control

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<p>Developed by:</p> <ul style="list-style-type: none"> • John Highton, JSNA Lead, Wirral Intelligence Service, Wirral Council • Hannah Cotgrave, Public Health & Commissioning Analyst, Wirral Intelligence Service, Wirral Council • Elspeth Anwar, Public Health Consultant, Wirral Council • Nathalia Cano Pereira, Senior Health Protection Practitioner, Public Health, Wirral Council • Jackie Jasper, Primary Care Manager, NHS England and NHS Improvement – North • Adam Irvine, Chief Executive Officer, Community Pharmacy Cheshire & Wirral • Alison Williams, Business Support Officer, Community Pharmacy Cheshire & Wirral • Micha Woodworth, Project Manager, Healthwatch Wirral • Kate Menear (News & Content Officer) and Sally Clark (Internal Communications) Wirral Council • Louise McNee, Communications and Engagement Manager, NHS Wirral Clinical Commissioning Group • Matt Gilmore, Business Intelligence Manager, Wirral Clinical Commissioning Group • Simon Pearce, Senior Information Analyst, Wirral Clinical Commissioning Group • ...and Karen Shrimpton, Chelsea Dalton and Tessa Woodhouse (Public Health, Wirral Council) for their support of the PNA Development Group

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ADDENDUM

Changes have occurred at the following pharmacies during the writing of this Pharmaceutical Needs Assessment (PNA) though within the parameters of the review they are not deemed to materially changed the content or outcome of this PNA.

Pharmacy name	Change	When	Stage
Teehey Lane Pharmacy	change of ownership	14/02/2022	Completed
Higher Bebington Pharmacy	change of ownership	February 2022	In process of change*
Somerville Pharmacy	change of ownership	February 2022	In process of change*
Whetstone Lane Pharmacy	change of ownership	December 2021	In process of change*

*Pharmacies have usually 3 months to notify NHSE of commencement of change, but this can be extended by agreement

Changes have occurred at the following pharmacies during the writing of this Pharmaceutical Needs Assessment (PNA) though within the parameters of the review they are not deemed to materially changed the content or outcome of this PNA but could lead to reduced access.

Pharmacy name	Change	When	Stage
Higher Bebington Pharmacy	Relocation	September 2022	In process of change*

*Pharmacies have usually 3 months to notify NHSE of commencement of change but this can be extended by agreement

Executive Summary

The requirement to produce a Pharmaceutical Needs Assessment (PNA) is a statutory responsibility of the local Health and Wellbeing Board by virtue of the *National Health Service (NHS) Pharmaceutical and local Pharmaceutical services Regulations 2013*, which came into force on 1st April 2013. The regulations outline the process which NHS England (formerly known as the NHS Commissioning Board) must comply with in dealing with applications for new pharmacies or changes to existing pharmacies. This process relies on the PNA which must be robust and fit for purpose.

In Wirral, the Health and Wellbeing Board has devolved the authority to develop its PNA to the Director of Public Health and other lead officers across partner organisations. Data sources include the local Joint Strategic Needs Assessment (JSNA), census data, local approach to health and wellbeing, Pharmacy Contractors' survey and a Residents survey. The surveys informed the first draft of the PNA which then went out for a formal (minimum 60 days) consultation.

The PNA presents a picture of community pharmacies, reviews services currently provided and considers how these could be utilised further. Community pharmacies can support the health and wellbeing of the population of Wirral in partnership with other community services and GPs. Services can be directed towards addressing health inequalities and supporting self-care in areas of greatest need.

Key Findings

- Wirral is served by 83 community pharmacies
- there is currently one pharmacy for every 3,907 Wirral residents, which compares extremely favourably to the national average of one pharmacy for every 5,040 residents
- Wirral has a rate of 25.6 pharmacies per 100,000 population compared to a national figure of 19.8 pharmacies per 100,000 residents
- Wirral, at almost 26 pharmacies per 100,000 population, has a similar ratio of pharmacies to comparable Health Partnerships (Integrated Care Systems/Boards) including Healthier Lancashire and South Cumbria at 25 per 100,000, Greater Manchester Partnership at 24 per 100,000, and Cheshire and Merseyside STP at 25 per 100,000. Whilst being better than both North-West and England at 25 and 21 per 100,000, respectively.
- Wirral residents have adequate access to 'out of hours' pharmacy services through the provision of '100-hour contracts' and 'extended hour' contracts and there is reasonable weekend coverage for residents of all four constituencies. Wallasey has the least pharmacies delivering extended or 100-hour contracts.
- Locally Commissioned Services are delivered equitably throughout the borough with all local constituencies having access to a range of services such as supervised consumption, alcohol and smoking interventions, emergency hormonal contraception and others. There are currently no needle/syringe exchange facilities at any pharmacy in the Wirral South Constituency.

- geographical mapping of locally commissioned services show that more services are delivered in the most densely populated areas of the borough, and we must continue to deliver in line with any population growth and deprivation
- although there are extensive and developing plans for regeneration of Birkenhead and areas in close proximity to the east coast of the borough, any potential increase in population is likely to be over an extended period (up to 2037) and not within the lifetime of this PNA, but changes and impacts should be monitored in future iterations
- 849 members of the public responded to the public consultation, giving their feedback on local community pharmacy services. Responses were overwhelmingly positive. Small numbers raised concerns over specific operational issues, such as opening times, but there were no significant service gaps identified
- All 83 local pharmacies responded to the community pharmacy survey (conducted as part of the needs assessment process). Again, this reinforced the wide range of services offered.
- a total of 51 *responses* were received during the formal consultation period (*April 2022– June 2022*)
- in Wirral there are 23 pharmacies co-located with GP surgeries, making the transition and relationships between GP and pharmacy staff more seamless
- considering the above information, the Health and Wellbeing Board is satisfied that there is no gap in provision of pharmaceutical services in Wirral

****Since the development of this PNA, the collation of all data sources and public engagement process on draft PNA 2022-2025, there has been a change request by a Wirral Pharmacy Contractor that is being considered by NHSE Contracts Committee through Primary Care Support as a relocation of pharmacy services.***

If we assume that this request, which has been submitted on the basis of a reported change in the profile of pharmacy site access, is successful and enacted then it will result in reduced access to pharmacy services after 8.00pm on weekdays and at weekends up to 10.00pm in Wirral South. In terms of the potential effect being seen across Wirral, then this reduction in opening hours would result in the closest available provision on Sundays after 4.00pm being with only Lloyds Pharmacy at Arrowe Park Hospital and Well Chester - Fountains Medical Centre as the nearest available venues for Wirral residents to access if pharmaceutical services were needed.

Contents

Executive Summary	4
Contents	6
Part 1: Purpose, process, and explanation of pharmaceutical services	10
Introduction and purpose	10
<i>Background</i>	10
<i>Update on delayed process for producing a new Pharmaceutical Needs Assessment</i>	11
<i>Subsequent adaptations to services provided by community pharmacy during COVID-19 pandemic</i>	11
<i>Requirements of the PNA</i>	12
<i>Statements from pharmaceutical regulations (2013)</i>	13
<i>Scope of the PNA</i>	17
Methodology and process followed in developing the PNA	19
<i>Pharmaceutical Needs Assessment consultation</i>	20
<i>Surveys and Online content</i>	21
<i>Pharmaceutical Needs Assessment review process</i>	21
<i>How to use this Pharmaceutical Needs Assessment</i>	22
National pharmaceutical services contract overview	23
<i>Funding of community pharmacy</i>	23
<i>Quality Payment</i>	23
<i>Essential services</i>	24
<i>Advanced services</i>	26
<i>Enhanced services</i>	28
<i>Locally Commissioned Services (LCS)</i>	29
<i>Funding and monitoring of the pharmacy contract</i>	29
Part 2: Wirral's Resident Population and its Health Needs	32
Health Needs in Wirral	32
<i>Introduction</i>	32
<i>National Context: Local Delivery</i>	32
<i>Integrated Care Systems</i>	32
<i>Wirral: Local and related strategy and policy context</i>	32
<i>Wirral Health & Wellbeing Board (HWBB)</i>	33
<i>Integrated Care Boards and impact upon Wirral (February 2022)</i>	34
<i>Potential Implications for pharmaceutical need</i>	36
<i>Population and Health Profile</i>	37
<i>Population Structure and Projections</i>	39
<i>Deprivation and Socio-economic factors</i>	44
<i>Households and Assets</i>	46
<i>Births & Fertility</i>	54
<i>Life Expectancy</i>	55
<i>Mortality</i>	56
<i>Health in Wirral - Key issues of concern</i>	58
<i>Populations with Protected characteristics</i>	69

Part 3: Meeting the pharmaceutical need	79
Overview of pharmaceutical service provision.....	79
<i>Community Pharmacy provision and contractors</i>	<i>79</i>
Current provision of services.....	82
<i>Current provision of services.....</i>	<i>82</i>
<i>Comparing Pharmacy distribution within North-West Health Systems</i>	<i>82</i>
<i>Geographic Provision.....</i>	<i>83</i>
<i>Distribution of pharmacies</i>	<i>83</i>
<i>Supplementary statements and pharmacy consolidations (2018-2021).....</i>	<i>86</i>
<i>Pharmacy Opening Hours.....</i>	<i>87</i>
<i>Co-located Pharmacy and GP surgery and/or Medical/Health Centre</i>	<i>90</i>
<i>Walk and drive time maps.....</i>	<i>91</i>
<i>Opening times.....</i>	<i>97</i>
<i>Cross Border Pharmacy provision.....</i>	<i>99</i>
<i>Prescription Services - Collection and Delivery.....</i>	<i>99</i>
<i>Monitored Dosage Systems</i>	<i>100</i>
<i>Out of hours provision</i>	<i>100</i>
<i>Conclusion</i>	<i>101</i>
Wirral Residents' Pharmacy Survey 2022.....	102
<i>Public Consultation for Wirral PNA 2022 - 2025.....</i>	<i>102</i>
Headline demographics.....	102
Key findings.....	103
Satisfaction with Pharmacy Services.....	106
Meeting pharmaceutical need	110
<i>Advanced Services</i>	<i>110</i>
<i>Enhanced services.....</i>	<i>112</i>
<i>Locally Commissioned Services.....</i>	<i>113</i>
<i>Overall summary and conclusions</i>	<i>116</i>
<i>Meeting the pharmaceutical need</i>	<i>117</i>
Part 4: Pharmaceutical Needs Assessment - Appendices	120
Appendix One: Wirral Pharmacy Contractors (Map plus Legend and addresses)	120
Appendix Two: Public and Pharmacy Contractors Survey – blank questionnaires... ..	125
Appendix Three: Public Survey on Wirral Pharmacy services – responses	126
<i>Wirral Residents Survey on Pharmacy Services 2021 - Results.....</i>	<i>126</i>
<i>Demographic Headlines for Residents Survey on Pharmacy Services</i>	<i>126</i>
Appendix Four: Pharmacy Contractors survey – responses	130
<i>Wirral Pharmacy Contractors Survey 2021 - Results</i>	<i>130</i>
Appendix Five: Indices of Multiple Deprivation (IMD) (2019).....	143
Appendix Six: Maps of Wirral in relation to this PNA.....	144
(i) <i>Wirral Constituencies and Wards – 2017.....</i>	<i>144</i>
(ii) <i>Wirral Pharmacies outlets – by Population Density – 2022</i>	<i>145</i>
(iii) <i>Wirral Pharmacies – by Constituency – 2022.....</i>	<i>146</i>
(iv) <i>Wirral Pharmacies – Contract opening hours – 2022.....</i>	<i>147</i>

(v) Wirral Pharmacies – Pharmacy & GP/Health Centre co-locations.....	148
(vi) Wirral Pharmacies – Pharmacy & GP/Health Centre all locations.....	149
(iix) Wirral Pharmacies – Delivery Service coverage Map.....	150
Appendix Seven: Pharmacy site opening/closing times by Constituency (Monday to Sunday)	151
<i>Birkenhead Constituency</i>	<i>151</i>
<i>Wallasey Constituency.....</i>	<i>152</i>
<i>Wirral South Constituency.....</i>	<i>153</i>
<i>Wirral West Constituency.....</i>	<i>154</i>
Appendix Eight: Maps for drive, walk, public transport and cycling times to Wirral pharmacies.....	156
<i>Walking</i>	<i>156</i>
<i>Car</i>	<i>158</i>
<i>Public Transport.....</i>	<i>159</i>
<i>Cycling</i>	<i>162</i>
Appendix Nine: Heat Map - Pharmacy opening and closing times across 7 days and by constituency	163
<i>Wirral.....</i>	<i>163</i>
<i>Birkenhead.....</i>	<i>163</i>
<i>Wallasey.....</i>	<i>164</i>
<i>Wirral South</i>	<i>164</i>
<i>Wirral West.....</i>	<i>165</i>
Appendix Ten: Pharmacy service provision by constituency	166
<i>Essential Services and Advanced Services</i>	<i>166</i>
<i>Commissioned Services.....</i>	<i>170</i>
<i>Urgent Care.....</i>	<i>174</i>
<i>Public Health</i>	<i>178</i>
Appendix Eleven: Formal Consultation on Wirral PNA 2022 - 2025.....	182
<i>Report on Consultation (April 2022 - June 2022)</i>	<i>182</i>
Appendix Twelve: Sources for Part 2: Key Issues	183

Pharmaceutical Needs Assessment

Part 1

Purpose, process, and explanation of pharmaceutical services

Part 1: Purpose, process, and explanation of pharmaceutical services

Introduction and purpose

The effective commissioning of accessible primary care services is central to improving quality and implementing a vision for health and healthcare. Community pharmacy is one of the most accessible healthcare settings. Nationally, 99% of the population can get to a pharmacy within 20 minutes by car. 96% of people living in the most deprived areas have access to a pharmacy either through walking or via public transport ([Todd et al, 2014](#))

The Pharmaceutical Needs Assessment (PNA) presents a picture of community pharmacies and other providers of pharmaceutical services, reviewing services currently provided and how these could be utilised further. Community pharmacies can support the health and well-being of the population of Wirral in partnership with other community services and GP practices. Services can be directed towards addressing health inequalities and supporting self-care in areas of greatest need.

A mapping of service provision and identifying gaps in demand are essential to afford commissioners with the market intelligence they need to take forward appropriate and cost-effective commissioning of services.

Background

In April 2008, the White Paper [Pharmacy in England: Building on Strengths – Delivering the Future](#), was published. This sets out the Government’s programme for a 21st century pharmaceutical service and identifying ways in which pharmacists and their teams could contribute to improving patient care through delivering personalised pharmaceutical services in the coming years.

The [Health Act 2009](#) outlined the process of market entry onto a “Pharmaceutical List” by means of PNA and provided information to Primary Care Trusts (PCTs) for their production. It amended the [National Health Service Act 2006](#) to include provisions for regulations to set out the minimum standards for PNAs. The regulations came into force on 24th May 2010 and required PCTs to:

- develop and publish PNAs by 1st February 2011 and
- use PNAs as the basis for determining market entry for NHS pharmaceutical services provision

Following the abolition of PCTs, this statutory responsibility passed to Health and Wellbeing Boards by virtue of the [National Health Service \(NHS\) Pharmaceutical and Local Pharmaceutical Services Regulations 2013](#), which came into force on 1st April 2013. These regulations also outline the process that the NHS England (formerly known as the NHS Commissioning Board) must comply with in dealing with applications for new pharmacies or changes to existing pharmacies.

The [Health and Social Care Act 2012](#) further describes the duty of “commissioners”, in accordance with regulations, to arrange for the adequate provision and commissioning of pharmaceutical services for their population.

The PNA is thus a key tool for NHS England and local commissioners to support the decision-making process for pharmacy applications, change of services or relocations by current pharmacies. Furthermore, it is used to ensure that commissioning intentions for services that could be delivered via community pharmacies, in addition to other providers, are incorporated into local planning cycles. Local commissioning priorities need to be driven by the Joint Strategic Needs Assessment (JSNA) of which the PNA is a key component ([Wirral Intelligence Service website – home of Wirral JSNA](#)).

Pharmacy has much more to offer than the safe and effective dispensing of medicines. It is increasingly expanding its provision of additional clinical services, becoming a persuasive force in improving the health and wellbeing of individuals and communities, and reducing health inequalities. These developments are underpinned by the Pharmacy Quality Scheme (PQS) which forms part of the Community Pharmacy Contractual Framework (CPCF). PQS is designed to support delivery of the NHS England (NHSE) Long Term Plan and reward community pharmacies that deliver quality criteria in three quality dimensions:

- Clinical Effectiveness
- Patient Safety
- Patient Experience

Update on delayed process for producing a new Pharmaceutical Needs Assessment

Pharmaceutical Needs Assessments were due to be renewed and published by Local Authority Health and Wellbeing Boards in April 2022. Due to ongoing and continued pressures across all sectors in response to the COVID-19 pandemic, the requirement to publish renewed Pharmaceutical Needs Assessments was suspended until before 1st October 2022. Local Authority Health and Well Being Boards (HWBBs) retained the ability to issue supplementary statements to respond to local changes and pharmaceutical needs during this time. The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 will be updated to reflect this change in due course.

Subsequent adaptations to services provided by community pharmacy during COVID-19 pandemic

While many businesses and healthcare settings were forced to close, community pharmacies remained open throughout the COVID-19 pandemic. They had to observe the social distance guidance appropriate at the time which led to queues outside the pharmacies as most are small venues, with limited space inside, so fewer customers were able to enter the pharmacy at a time.

Only on occasions, and for safety related reasons due to overwhelming workload pressures, the pharmacy worked behind closed doors for a few hours each day in order to concentrate on dispensing prescriptions and managing stock.

Before the pandemic many services, commissioned by Wirral Council e.g., morning after pill, or pharmacy services provided by Wirral Clinical Commissioning Group (CCG) e.g., minor ailments service, were carried out face to face in the pharmacy consultation room. This was not appropriate during the pandemic. However, working with all commissioners then arrangements were developed at speed to enable these consultations to take place over the phone to ensure patients could still access such services.

Many community pharmacies have always offered a delivery service, which was a business decision and not a contractual requirement. Demand for delivery of medicines increased hugely, especially at the beginning of the pandemic, as many patients were told to shield and lately due to having to self-isolate.

In April 2020, the Pandemic Delivery Service (PDS) became a contractual requirement of community pharmacies. The cohort of patients who can use PDS has changed over the pandemic and at the time of producing this Pharmaceutical Needs Assessment (PNA) is used for patients who are self-isolating due to a positive COVID test. It has been commissioned up to 31st March 2022.

However, until more recently, support for the delivery medicines and other products on behalf of community pharmacies, was helped by the army of volunteers who came forward at a challenging time of need for all Wirral residents. This was further supplemented by the local partnership of Healthy Wirral and Wirral University Hospital Trust. In order to reduce public queuing and inadvertent contact during the pandemic, they provided a coordinated system through a dedicated phone number, for pharmacies to have all items to patients and clients delivered on their behalf.

Community pharmacies also supported in the provision of lateral flow tests, distributing these to patients either via a code from the government website or on a walk-in basis and encouraging reporting of the results back to the NHS.

The pandemic has shown that community pharmacy has been resilient and adaptable.

Being located in the heart of communities, many deprived, the pharmacies have been essential and valuable to patients, supporting patients in their own communities.

Requirements of the PNA

The content of the PNA is set out by the [Pharmaceutical and Local Pharmaceutical Services Regulations 2013](#). It must adhere to Schedule 1 detailed below:

- a statement of the pharmaceutical services provided that are necessary to meet needs in the area (see [Statement One: Necessary services: Current provision](#))
- a statement of the pharmaceutical services that have been identified by the HWBB that are needed in the area, and are not provided (gaps in provision) (see [Statement two: Necessary services: Gaps in provision](#))
- a statement of the other services which are provided, which are not needed, but which have secured improvements or better access to pharmaceutical services in the area (see [Statement three: Other relevant services: Current provision](#))
- a statement of the services that the HWBB has identified as not being provided, but which would, if they were to be provided, secure improvements or better access to pharmaceutical services in the area (see [Statement Four: Improvements and better access: Gaps in provision](#))
- a statement of other NHS services provided by the Local Authority (LA), the NHS Commissioning Board (NHSCB), the local Clinical Commissioning Group (CCG) or an NHS Trust or NHS Foundation Trust, which affect the needs for pharmaceutical services (see [Statement five: Other NHS services](#))

- an explanation of how the assessment has been carried out (including how the consultation was carried out) (see [Statement Six: How the assessment was carried out](#))
- a map of providers of pharmaceutical services (see [Additionally: Map provision](#))

Statements from pharmaceutical regulations (2013)

Regulatory Statements

The [National Health Service \(NHS\) Pharmaceutical and local Pharmaceutical services Regulations \(2013\)](#) set out the legislative basis for developing and updating PNAs,

Schedule 1 of these regulations it sets out the minimum information to be contained in the Pharmaceutical Needs Assessment.

Detailed below are the six statements included in Schedule 1 and the necessity for a local PNA map of service providers.

Statement One: Necessary services: Current provision

Provide a statement of the pharmaceutical services that the Health and Wellbeing Board (HWBB) has identified as services that are provided:

- a) in the area of the HWB and which are necessary to meet the need for pharmaceutical services in its area; and
- b) outside the area of the HWB but which nevertheless contribute towards meeting the need for pharmaceutical services in its area (if the HWB has identified such services)

Community pharmacy services for Wirral are provided across a range of reasonable geographical locations, with good accessibility and sufficient provision throughout the borough. Wirral has 83 pharmacies, which serve a population estimated at 324,336 (total residents), who provide a comprehensive service with a full range of Essential Services and some Advanced services. This equates to approximately one pharmacy for every 3,907.7 residents (England average is 5,040.6 residents per pharmacy).

Consequently, the population is well served by pharmacy services and is above the England average. In addition to this, Wirral pharmacies do not dispense many more prescriptions e.g., 7,597 per month in 2020/2021 compared to 7,283 for England, when compared to data from North-West Health Systems ([Sustainability and Transformation Plans/Network - STPs](#) that are becoming [Integrated Care Systems \(ICS\)](#)) suggesting that the community pharmacy network is not overstretched and as the pharmacy contractors survey suggests, there is potential to absorb additional work in response to any changes to our population.

Wirral residents will also access pharmacy services, work and leisure in both Cheshire West and Chester Local Authority area and Liverpool Local Authority area. Services are considered sufficient for the population's needs.

Statement two: Necessary services: Gaps in provision

Provide a statement of the pharmaceutical services that the HWB has identified (if it has) as services that are not provided in the area of the Health and Wellbeing Board (HWBB) but which the HWBB is satisfied:

- a) need to be provided (whether or not they are located in the area of the HWBB) in order to meet a current need for pharmaceutical services, or pharmaceutical services of a specified type, in its area
- b) will, in specified future circumstances, need to be provided (whether or not they are located in the area of the HWBB) in order to meet a future need for pharmaceutical services, or pharmaceutical services of a specified type, in its area

The need for specific community pharmacy services will be regularly reviewed in line with the make-up of the local population. As identified, there is no known lack of capacity within the network to absorb additional work in terms of 'essential services' but this would need to be monitored over future years to ensure it remains stable.

The Strategic Housing Land Availability Assessment (SHLAA) and the Wirral Strategic Housing Market Assessment (SHMA) and Birkenhead Regeneration Plan have been considered to determine any major housing re-developments and other developments within the lifetime of this PNA that may impact significantly changes to the local population numbers and there are none deemed significant in the lifetime of this PNA, though this should be monitored.

The need for 'emergency prescriptions' will almost always be centred on patients using 'out of hours services' which for our borough is currently covered by GP Out of Hours (via NHS 111) and [Walk-In Centres](#) at Victoria Central Hospital, Arrowe Park Hospital and Eastham Clinic. These sites also provide both walk-in-services and bookable appointments. Further walk in and bookable appointments are available at the Minor Injury and Illness Service at Birkenhead Medical Building. There is pharmacy provision available on-site or close to these sites with a range of extended hours or 100-hour contract pharmacies available to access nearby, or across the borough.

Certain geographical differences have been noted. Wallasey for example, has the least number of available extended hour pharmacy providing extended opening hours until 10pm (Monday to Saturday), with two being available. This is compared to its constituency neighbours with Birkenhead having three, Wirral South with four and 6 within Wirral West open longer.

There is adequate geographic coverage, a good ratio of pharmacy numbers to resident population and opening hours that cover seven-days a week, and when considering the information in this PNA, the Health and Wellbeing Board is satisfied that there is no gap in provision of pharmaceutical services in Wirral.

Statement three: Other relevant services: Current provision

Provide a statement of the pharmaceutical services that the Health and Wellbeing Board (HWBB) has identified (if it has) as services that are provided:

- a) in the area of the HWBB and which, although they are not necessary to meet the need for pharmaceutical services in its area, nevertheless have secured improvements, or better access to pharmaceutical services in its area
- b) outside the area of the HWBB and which, although they do not contribute towards meeting the need for pharmaceutical services in its area, nevertheless have secured improvements, or better access, to pharmaceutical services in its area
- c) in or outside the area of the HWBB and, whilst not being services of the types described in sub-paragraph (A) or (B), or paragraph one, of the 2013 regulations, they nevertheless affect the assessment by the HWBB of the need for pharmaceutical services in its area

Wirral has well defined borders between Eastham and Ellesmere Port, Heswall and Neston and the River Mersey, which is a geographical 'barrier' between Wirral and Liverpool.

Members of the Wirral population will cross these borders for leisure and work purposes and also to access pharmacy services if it is more convenient for them and not due to there being a lack of service in Wirral.

NHS England (NHSE) out of hour's bank holiday rota looks at services across boundaries to ensure geographical coverage.

Statement four: Improvements and better access: Gaps in provision

Provide a statement of the pharmaceutical services that the Health and Wellbeing Board (HWBB) has identified (if it has) as services that are not provided in the area of the HWBB but which the HWBB is satisfied:

- a) would, if they were provided (whether or not they were located in the area of the HWBB), secure improvements, or better access to pharmaceutical services, or pharmaceutical services of a specific type, in its area
- b) would, if in specified future circumstances they were provided (whether or not they were located in the area of the HWBB), secure future improvements, or better access, to pharmaceutical services, or pharmaceutical services of a specified type, in its area

There is a need to be mindful that community pharmacy services should strive to support the changes that face the NHS England and across the health economy with the new local Integrated Care Systems (ICS) commencing July 2022. As commissioning intentions change or evolve and they should aspire to reduce the pressures on other patient facing services such as GP's and Accident & Emergency. However, in the current financial climate there is limited capacity to deliver additional services within static or reducing budgets.

There should also be recognition and understanding of the context related to a number of national, regional and local strategies and policies from which opportunities may arise in their delivery such as [Cheshire & Merseyside Health and Care Partnership: Improving Health and Wellbeing in Cheshire and Merseyside Strategy 2021-2025](#), [The NHS Long Term Plan 21 August \(2019\)](#), [Core20PLUS5 – An approach to reducing health inequalities \(2021\)](#) and both [Healthy Wirral Plan](#) and [Wirral Plan: 2021 – 2026](#) that seek to transform how health and wellbeing services are delivered and designed in Wirral, putting residents at the heart of services.

Statement five: Other NHS services

Provide a statement of any NHS services provided or arranged by the Wirral Health and Wellbeing Board (HWBB), NHS England, Wirral CCG, any NHS trusts, or any NHS foundation trust to which the HWBB has had regard in its assessment, which affect:

- a) the need for pharmaceutical services, or pharmaceutical services of a specified type, in its area or
- b) whether further provision of pharmaceutical services in its area would secure improvements, or better access to pharmaceutical services, or pharmaceutical services of a specific type in its area

This assessment has not identified the need for any specific service development at this point in time. Any potential quality improvements identified as part of the consultation were operational in nature and as such are for consideration within the individual pharmacies (and outside the remit of the PNA).

Statement Six: How the assessment was carried out

Provide an explanation of how the assessment has been carried out, in particular:

- a) how it has determined what are the localities in its area
- b) how it has considered (where applicable)
 - the different needs of different localities in its area, and
 - the different needs of people in its area who share a protected characteristic and
- c) a report on the consultation that it has undertaken

Wirral has clearly defined borders between Eastham and Ellesmere Port, Heswall and Neston and has the natural barrier of the River Mersey between Liverpool and Wirral.

The advantage of Wirral having one Local Authority (LA) and at the time of writing one Clinical Commissioning Group (CCG) up to April 2022 (Integrated Care Boards as Cheshire and Merseyside Health Care Partnership) means that mapping and consultation can be managed and applied without any caveats. As the statutory responsibility of the PNA falls within the remit of Wirral Health and Wellbeing Board (HWBB) then analysis and mapping were carried out at constituency and ward level considering the different needs of people, including protected characteristics, across different areas of the borough.

As such the PNA has taken into the account Wirral Intelligence Service and Wirral Joint Strategic Needs Assessment content and so will inform commissioning decisions across Wirral Partnership, Wirral Council and NHS England (NHSE). Within Part 3 of this PNA it goes into specific detail on how the public and pharmacy consultation processes were undertaken with Appendix 12 presenting the consultation process and outcomes for the final PNA.

Additionally: Map provision

Provide maps that identify the premises at which pharmaceutical services are provided in the area of the HWBB.

A map with a legend of current Wirral pharmacy contractors, their addresses and contact details are available in [Appendix One](#).

Other maps and related content associated to pharmacies can be found in [Appendix Five](#), [Appendix Six](#) and [Appendix Eight](#).

The overall map is an essential part of the PNA and will be maintained and available on the [PNA page of the Wirral Intelligence Service website](#) at all times.

There is a robust system for responding to community pharmacy contracts changes notified to the locality via [Primary Care Support England \(PCSE\)](#) and this provides regular updates of any changes in location, opening hours and closures of all the pharmacies in our area.

Scope of the PNA

The scope of the assessment of need must address the following principles:

- the safe and efficient supply of medicines, including any additional (non-NHS commissioned) services provided by pharmacies such as:
 - support for housebound patients and older people
 - people with learning difficulties
 - medication administration support such as monitored dosage systems (MDS)
- pharmaceutical care that supports safe and effective use of medicines
- pharmaceutical care that provides quality healthcare and public health information and advice to all members of the population
- high quality pharmacy premises that increase capacity and improve access to primary care services and medicine
- enhanced services which increase access, choice, and support for self-care
- locally commissioned services (e.g., by Clinical Commissioning Groups or Local Authorities) which have the potential to reduce avoidable hospital admissions and GP appointments are not strictly speaking part of the Regulations although they are described in this PNA for completeness
- high quality pharmaceutical support to prescribers for clinical and cost-effective use of resources

Supplementary statements and pharmacy consolidations

From 1st April 2016 [amendments to the 2013 Regulations came into effect](#) that meant from 5th December 2016 NHS pharmacy businesses are able to apply to consolidate the services provided on two or more sites onto a single site. Applications to consolidate will be dealt with as “excepted applications” under the 2013 Regulations, which means they will not be assessed against the Pharmaceutical Needs Assessment.

Instead, consolidation applications will follow a simpler procedure, the key to which is whether or not a gap in pharmaceutical service provision would be created by the consolidation. Some provision is also made in respect of continuity of services.

So, if NHS England (NHSE) commissions enhanced services from the contract sited at the closing premises, then the applicant is required to give an undertaking to continue to provide those services following consolidation.

These changes to pharmacy contract conditions also highlight the enhanced need for a robust local response to requests for pharmacy contract consolidations by Wirral Health & Wellbeing Board (HWBB). The opinion of the HWBB on whether a gap in pharmaceutical service provision would be created by the consolidation must be given when the application is notified locally, and representations sought.

Where the local HWBB envisage a potential detrimental impact on the local population, or not, then NHSE will consider this local knowledge in their decision-making process.

If NHS England (NHSE) is satisfied that the consolidation would create a gap in pharmaceutical services provision, it must refuse the application. The provider requesting the consolidation has the right to challenge NHSE decisions at appeal.

If NHSE grants the application, it must then refuse any further “unforeseen benefits applications” seeking inclusion in the pharmaceutical list, if the applicant is seeking to rely on the consolidation as a reason for saying there is now a gap in provision, at least until the next revision of the PNA.

If the application is granted and pharmacy premises are removed from the relevant pharmaceutical list, this means that the HWBB does not consider that a gap in service provision is created. As a consequence, it must publish a supplementary statement presented alongside its PNA so recording its view. ([Please see Part Three, Supplementary statements and pharmacy consolidations \(2018-2021\)](#) for consolidations and closures between 2018 - 2022 also [view previous supplementary statements and completed consolidations](#)).

New Pharmaceutical Needs Assessments (PNA)

When the pharmaceutical needs assessment is then to be revised, Health and Wellbeing Board (HWBB), will need to consider again where there are any current geographical gaps in the location of premises.

The HWBB will be aware that the consolidation did not previously create a gap and a supplementary statement was published at the time to this effect. Unless there have been other changes in the locality to have created a need for an additional pharmacy or the provision of a pharmaceutical service or services certain times, then there continues to be no gap.

For the consolidations completed in Wirral since April 2018 please go to section [Supplementary statements and pharmacy consolidations \(2018-2021\)](#) in Part Three of this document.

For background information and previous changes and updates then please see [Pharmaceutical Regulation Changes 2016](#) and [Wirral Health & Wellbeing Board papers – Pharmacy Consolidations – July 2017](#)

Methodology and process followed in developing the PNA

Key principles of the PNA, as highlighted in **Figure 1** below, are that it:

- Is an iterative process involving patients, the public and key stakeholders
- Is a developing, live document under continuous review
- Continues to focus on identifying health needs which can be supported by pharmaceutical services and makes recommendations for the commissioning of those services
- Is developed by a multidisciplinary PNA working group

Figure 1: Pictorial view of completing a Pharmaceutical Needs Assessment



Source: Wirral Intelligence Service 2017

Development of the Wirral's Pharmaceutical Needs Assessment (PNA) has been initiated and overseen by Director of Public Health, on behalf of Wirral Health & Wellbeing Board (HWBB), with support in its development from a multi-professional group, Pharmaceutical Needs Assessment Development Sub-Group.

The content of the document is closely linked to the local Wirral Intelligence Service evidence base including Wirral JSNA and Public Health content and has been produced by means of a structured analysis and distillation of a variety of data sources.

Practically, the step-by-step process involves:

- identification of health and pharmaceutical needs
- deciding how these needs are being met currently
- identifying any gaps
- taking into account the views of professionals, partner organisations and public

The following data sources were used for the production of this PNA:

- Wirral Intelligence Service web content
- Wirral Joint Strategic Needs Assessment
- Annual Public Health Report
- Census and other local and national data sources
- Health and Wellbeing Strategy
- Wirral Pharmacy Contractors' survey
- Wirral Residents' Pharmacy survey
- NHS England Local Area Team data
- NHS Business Services Authority data

Residents, service users and pharmacy contractor responses informed the first draft of the PNA which in turn went out to a full, formal public consultation (minimum 60 days). The Public and Pharmacy Contractor survey questionnaires can be found in [Appendix 2](#).

Pharmaceutical Needs Assessment consultation

The draft Pharmaceutical Needs Assessment (PNA) was issued for formal (minimum 60-days) consultation between April and June 2022.

According to pharmaceutical regulations the draft document must be distributed to:

- Clinical Commissioning Groups (CCG) (for this PNA 2022-2025 ICB/ICS added)
- Community pharmacies
- Dispensing Doctors (if situated within Wirral boundary - currently none)
- Healthwatch
- Local NHS trusts that included local Hospital Trusts, Mental Health Trusts and Community Health Service providers
- Local Pharmaceutical Committee (LPC)
- Local Pharmaceutical Services (LPS) (no current contracts for Wirral)
- Local Medical Committee (LMC)
- Local Pharmaceutical Network (LPN)
- Neighbouring Health and Wellbeing Boards
- NHS England (NHSE)

The draft PNA was also distributed to:

- GPs and other Primary Care staff
- Adult Social Services
- Neighbouring Local Authorities

- Public Health staff

Patients and Public

- Older People's Parliament
- Voluntary Sector Groups
- Community Sector Groups
- Faith Sector Groups

Other Methods

- Press releases to range of local media including Wirral View
- Council Website
- Council Engagement Contacts via email distribution
- Local Pharmaceutical Committee website and bulletin

Surveys and Online content

On 5th April 2022 full documentation was published online with regard to the review of the draft PNA 2022-2025 and this included an online survey facility to help partners and residents leave feedback on the content in the draft PNA. Hard copies of the PNA were available at four venues, across four constituencies, where people could also review the draft PNA and, if they wished, feedback via EasyRead, paper survey or online responses. The survey ran until 5.00pm on Friday 10th June 2022, or 66 days.

A report on the consultation process for this 2022 – 2025 PNA, with a summary of responses, is contained in [Appendix Eleven](#).

Pharmaceutical Needs Assessment review process

Once published, the PNA will be under constant review for any changes which might dictate a new or diminished pharmaceutical need. Examples of such changes could include:

- new pharmacy contracts
- pharmacy closures
- changes to pharmacy locations or opening hours
- new data from the JSNA
- significant housing developments
- changes in workforce due to movement of local businesses/employers
- local intelligence and significant issues relating to pharmacy enhanced service provision
- appliance provision changes

The PNA will be updated through the publishing of supplementary statements when amendments or additions are required in order to keep the PNA up to date but are not considered significant enough for a complete revision of the document.

The delegated sub-group of Wirral Health & Wellbeing Board will assess any changes, additions, or amendments to assess the significance of any revision on the PNA to provide a view as to whether a full rewrite or a supplementary statement is appropriate. The PNA must have a complete review every 3 years. Successful applications for 'consolidations and mergers' as part of the revised pharmacy regulations would also necessitate the development of a supplementary statement.

How to use this Pharmaceutical Needs Assessment

The PNA should be utilised as a service development tool in conjunction with the JSNA and the strategic plans from local commissioners. Mapping out current services and gaining a sense of future service needs will pinpoint the areas where the development of local pharmaceutical services may be necessary.

The PNA can be used by patients, current service providers, future service providers and commissioners alike in the following ways:

- maps and tables detailing specific services - patients can see clearly where they can access a particular service
- current service providers - will be better able to understand the unmet needs of patients in their area and take steps to address this need
- future service providers - will be able to tailor their applications to be added to the pharmaceutical list to make sure that they provide the services most needed by the local community
- commissioners - will be able to move away from the 'one-size fits all' approach to make sure that pharmaceutical services are delivered in a targeted way
- NHS England (NHSE) - will be in a better position to judge new applications to join the pharmaceutical list to make sure that patients receive quality services and adequate access without plurality of supply

National pharmaceutical services contract overview

Funding of community pharmacy

This comes from several sources:

- NHS Community Pharmacy contractors are paid for services they provide under the Community Pharmacy Contractual Framework according to a set of fees and allowances agreed between the Department of Health and Pharmaceutical Services Negotiating Committee. These are published in the Drug Tariff which is hosted on the [NHS Business Services Authority Website](#) each month, published 3 working days before the 1st of each month.. The Community Pharmacy Contractual Framework was updated in 2019, to a [5-year settlement](#).
- Local commissioners - additional incomes comes from providing services commissioned locally by CCGs such as minor ailments services, Local Authorities such as substance misuse services, smoking cessation and from other service commissioners
- sale of goods and service over the counter
- private healthcare services, such as vaccination

For most pharmacies between 85-95% of their funding comes from their NHS contract. The [Department of Health and Social Care](#) announced reductions in the funding of pharmacies, as part of the 2019-2024 settlement, but concerns remain, expressed by [Pharmaceutical Services Negotiating Committee](#), Community Pharmacy Cheshire and Wirral and others, that any reduction could impact on the viability of some providers.

In order to mitigate the risk of pharmacy closures the [Pharmacy Access Scheme \(PhAS\)](#) has been developed and a new scheme commences in January 2022. In order to mitigate the risk of pharmacy closures in areas where there are no other providers present, the Pharmacy Access Scheme (PhAS) has been developed to support isolated, eligible pharmacies, and a new scheme commenced in January 2022. Eligibility for PhAS continues to be based both on the dispensing volume of the pharmacy, and distance from the next nearest pharmacy. Contractors do not need to apply to the scheme to be eligible and at the time of writing a provisional list of pharmacies has been published and a review process is underway should contractors wish to dispute the accuracy of the distance calculation or on the basis of a physical feature anomaly. For eligible pharmacies, PhAS payments are dependent on registration with NHSBSA to provide the Community Pharmacist Consultation Service (CPCS).

As part of the review of the Pharmacy Contractual Framework the [Department of Health and Social Care](#) wants to reward high quality and so have introduced [The Pharmacy Quality Scheme](#). This allocates fees upon delivery of certain quality criteria.

Quality Payment

Once a community pharmacy contractor has achieved all of the eight quality criteria (that can be changed for specific requirements) then a payment can be claimed. This is usually done at two points during the year currently; April and November. All national NHS pharmaceutical service providers must comply with the contractual framework that was first introduced in April 2005. The national framework is set out below and can be found in greater detail on the [Pharmaceutical Services Negotiating Committee \(PSNC\) website](#).

Provision of Pharmaceutical Services

The pharmaceutical services contract consists of three different levels:

- a) Essential services
- b) Advanced services
- c) Enhanced services

There is also the opportunity for 'locally commissioned services' outside of these NHS contract opportunities.

Essential services

Consist of the following and must be offered by all pharmacy contractors.

Dispensing

This covers the supply of medicines or appliances and advice to the patient about the medicines being dispensed and possible interactions with other medicines. The Electronic Prescription Service (EPS) has been implemented as part of the dispensing service. Prescription linked interventions can be identified during the dispensing process.

Repeat dispensing

This covers the management of repeat medication for up to one year, in partnership with the patient and prescriber. This service is aimed at patients with long term conditions who have a stable medication routine and hence may require fewer visits to discuss any health issues with their GP or nurse. The patient will return to the pharmacy for repeat supplies, without first having to visit the GP surgery. Before each supply, the pharmacy will ascertain the patient's need for a repeat supply of a particular medicine. The pharmacist will communicate all significant issues to the prescriber with suggestions on medication changes as appropriate.

Repeat dispensing as noted above and repeat prescription ordering are two different aspects. Since 2016 the CCG has advocated Patient Led Repeat Ordering of prescriptions. This involves patients ordering their repeat prescriptions directly from their GP practice rather than a community pharmacy. Patients, who are deemed excluded, by GPs and/or pharmacists, continue to be able to order from their pharmacy. EPS is not affected therefore prescriptions continue to be sent electronically to a patient's chosen pharmacy.

Disposal of unwanted medicines

Pharmacies act as collection points for patient-returned unwanted medicines from households, individuals and residents of any childrens homes. Private arrangements must be adopted for waste returned from nursing homes.

Promotion of healthy lifestyles (Public Health)

The [Healthy Living Pharmacy \(HLP\)](#) framework is aimed at achieving consistent provision of a broad range of health promotion interventions through community pharmacies to meet local need, improving the health and wellbeing of the local population and helping to reduce health inequalities.

This might include opportunistic advice provided on healthy lifestyle topics such as smoking cessation, weight management etc. to certain patient groups who present prescriptions for dispensing. Also, involvement in local public health campaigns throughout the year, as directed by NHS England (NHSE).

HLP became an Essential Service requirement in 2020/21. As such, community pharmacy contractors were required to become compliant with the HLP requirements from 1st January 2021, and the Distance Selling Pharmacy (DSP) website requirements were mandatory from 1st April 2021. This was agreed in the five-year [Community Pharmacy Contractual Framework \(CPCF\)](#) and reflects the priority attached to public health and prevention work.

Signposting patients to other care providers

Pharmacists and their staff will refer patients to other healthcare professions or care providers when appropriate with Healthy Living Pharmacies (HLP) having had additional training to support this function.

Support for self-care

This is the provision of advice and support by pharmacy staff to enable patients to derive maximum benefit from caring for themselves or their families. Pharmacies will help to manage minor ailments and common conditions, by the provision of advice and where appropriate, the sale of medicines, including dealing with referrals from NHS Direct/NHS 111. Records will be kept where the pharmacist considers it relevant to the care of the patient.

Discharge Medicines Service (DMS)

Discharge Medicines Service (DMS) became a new essential service within the Community Pharmacy Contractual Framework (CPCF) on 15th February 2021.

This service, which all pharmacy contractors have to provide, was originally trailed in the 5-year CPCF agreement, with a formal announcement regarding the service made by the Secretary of State for Health and Social Care in February 2020.

From 15th February 2021, NHS Trusts were able to refer patients who would benefit from extra guidance around new prescribed medicines for provision of the DMS at their community pharmacy. The service has been identified by NHS England and NHS Improvement's (NHSE&I) Medicines Safety Improvement Programme to be a significant contributor to the safety of patients at transitions of care, by reducing readmissions to hospital.

Clinical governance

It should be noted that clinical governance is not an essential service. Instead, it is a framework that underpins the provision of all pharmaceutical services. Therefore, Pharmacists must ensure the following processes are in place:

- standard operating procedures
- patient safety incident reporting
- demonstrating evidence of pharmacist continuing professional development
- complaints procedure
- compliance with health and safety legislation
- compliance with the Disability Discrimination Act
- significant event analysis
- commitment to staff training, management, and appraisals
- patient satisfaction surveys

Further information on the essential services requirements can be found in [Schedule 4 of the 2013 regulations](#).

Advanced services

These are the advanced services within the NHS community pharmacy contract:

- Community Pharmacist Consultation Service (CPCS)
- Appliance Use Review (AUR)
- Stoma Appliance Customisation (SAC).
- New Medicine Service (NMS)
- Community Pharmacy NHS Seasonal Influenza Vaccination programme
- COVID-19 Lateral Flow Device Distribution Service (ended on 24th February 2022)
- Hypertension Case Finding Service
- Stop Smoking Advanced Service (commences 10th March 2022)

Community pharmacies can opt to provide any of these services if they meet the necessary requirements.

Community Pharmacist Consultation Service (CPCS)

The NHS Community Pharmacist Consultation Service launched on 29th October 2019 as an Advanced Service. Since 1st November 2020, general practices have been able to refer patients for a minor illness consultation via CPCS.

The service, which replaced the NHS Urgent Medicine Supply Advanced Service ([NUMSAS](#)) and Digital Minor Illness Referral Service ([DMIRS](#)) pilots, connects patients who have a minor illness or need an urgent supply of a medicine with a community pharmacy.

Referrals from general practices is for minor illness, with the service also taking referrals to community pharmacy from NHS 111 (and NHS 111 online for requests for urgent supply of medicine or appliances), Integrated Urgent Care Clinical Assessment Services and in some cases, patients referred via the 999 service.

The CPCS aims to relieve pressure on the wider NHS by connecting patients with community pharmacy, which should be their first port of call and can deliver a swift, convenient and effective service to meet their needs. Since the CPCS was launched, an average of 10,500 patients per week are being referred for a consultation with a pharmacist following a call to NHS 111; these are patients who might otherwise have gone to see a GP.

The CPCS provides the opportunity for community pharmacy to play a bigger role than ever within the urgent care system.

[Provision of this advanced services – see Part 3 of this PNA](#)

Appliance Use Review (AUR)

AUR is the second Advanced Service and was introduced into the NHS community pharmacy contract on 1st April 2010. This service can be provided by either a community pharmacy or appliance contractors and can be carried out by a pharmacist or a specialist nurse either at the contractor's premises or at the patient's home.

The service has a national service specification, but was initially established locally between PCT, now local Clinical Commissioning Group, and their pharmacy contractors.

A fee is payable to all community pharmacy and appliance contractors for each AUR they have carried out. There is a different fee depending on whether the AUR was carried out in the patient's home or on the contractor's premises. The maximum number of AURs for which a contractor is eligible to be paid for under this service is no more 1/35th of the aggregate number of specified appliances dispensed by the contractor during the financial year.

AURs should improve the patient's knowledge and use of any specified appliance 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

[Provision of this advanced services – see Part 3 of this PNA](#)

Stoma Appliance Customisation (SAC)

This is the third Advanced Service in the NHS community pharmacy contract and was also introduced on 1st April 2010. The 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. This service can be provided by either pharmacy or appliance contractors.

[Provision of this advanced services – see Part 3 of this PNA](#)

New Medicines Service (NMS)

The NMS was introduced in the NHS community pharmacy contract on 1st October 2011. This service can be provided by pharmacies only. The NMS was originally implemented as a time-limited service but is now an ongoing service within the Community Pharmacy Contract.

The NMS is focused on a set of conditions. If a patient is newly prescribed a medicine for one of these conditions, they will be eligible to receive the service ([see latest contract details on PSNC site](#)).

[Provision of this advanced services – see Part 3 of this PNA](#)

Community Pharmacy NHS Seasonal Influenza Vaccination programme

As part of the community pharmacy funding settlement community pharmacies in England are now able to offer a seasonal influenza (flu) vaccination service for patients in at-risk adults as deemed appropriate according to latest Joint Committee on Vaccination and Immunisation guidance ([JCVI guidance](#)).

Immunisation is one of the most successful and cost-effective health protection interventions and is a cornerstone of public health. High immunisation rates are key to preventing the spread of infectious disease, complications and possible early death among individuals and protecting the population's health. For most healthy people, influenza is an unpleasant but usually self-limiting disease.

However, those with underlying disease are at particular risk of severe illness if they catch it. The aim of the seasonal influenza vaccination programme is to protect adults who are most at risk of serious illness or death should they develop influenza, by offering protection against the most prevalent strains of influenza virus.

[Provision of this advanced services – see Part 3 of this PNA](#)

Hypertension Case Finding Service

In 2020, NHS England and NHS Improvement (NHSE&I) commenced a pilot involving pharmacies offering blood pressure checks to people aged 40-years and over. In some pharmacies within the pilot, where the patient's initial blood pressure reading was elevated, they would be offered 24-hour [ambulatory blood pressure monitoring \(ABPM\)](#), which is the gold-standard for diagnosis of hypertension.

Following the initial findings of the pilot, the Department of Health and Social Care (DHSC) and NHSE&I proposed the commissioning of a new Hypertension case-finding service as an Advanced Service.

[Provision of this advanced services – see Part 3 of this PNA](#)

COVID-19 Lateral Flow Device Distribution Service (ended on 24th February 2022 as part of Government review of COVID-19 Restrictions)

This service, which pharmacy contractors can choose to provide, as long as they meet the necessary requirements, aims to improve access to COVID-19 testing by making lateral flow device (LFD) test kits readily available at community pharmacies for asymptomatic people, to identify COVID-positive cases in the community and break the chain of transmission.

[Provision of this advanced services – see Part 3 of this PNA](#)

Stop Smoking Advanced Service

The 5-year Community Pharmacy Contractual Framework (CPCF) agreement reached in July 2019 included the proposal that stop smoking support for those beginning a programme of smoking cessation in secondary care and referred for completion in community pharmacy should be piloted. This service enables NHS trusts to refer patients discharged from hospital to a community pharmacy of their choice to continue their smoking cessation care pathway, including providing medication and behavioural support as required, in line with the NHS England (NHSE) Long Term Plan care model for tobacco addiction.

[Provision of this advanced services – see Part 3 of this PNA](#)

Enhanced services

These are those services commissioned, developed, and negotiated locally based on the needs of the local population. NHS England (NHSE) commissions Enhanced Services, either directly or on behalf of other organisations such as local authority public health teams or Clinical Commissioning Groups (CCG). The PNA will inform the future commissioning need for these services.

The term local enhanced services can only be used to describe services commissioned by NHSE.

NHSE currently commission an Enhanced Service for the area of Cheshire and Merseyside which contracts four pharmacies to stock, hold, and supply against prescription, antivirals for at risk patients on the occasion of an identified flu outbreak including (though not exclusive to) residents of care and residential homes.

[Provision of enhanced services – see Part 3 of this PNA](#)

Locally Commissioned Services (LCS)

However, under the current regulations, “locally commissioned services” (also known as ‘Other NHS Services’ within guidance and legislation) may still be developed and negotiated based on the needs of the local population. These services can be commissioned from a pharmacy by the Local Authority, Clinical Commissioning Group (CCG) or another commissioner. Examples of such services include emergency hormonal contraception, needle exchange, observed consumption and minor ailments.

It is possible for neighbouring organisations, Health and Wellbeing Boards or CCGs, to commission similar services from pharmacies at differing remuneration rates or using different service specifications / patient group directions. This is because financial/commissioning arrangements for services are based on local negotiation and are dependent on available resources as well as local need.

This does, however, lead to duplication of effort for commissioning staff and difficulties for locum pharmacists working across HWB /CCG boundaries. Wherever possible commissioners are advised to work together to eliminate such anomalies and provide continuity of patient care across local boundaries. [Service specifications for each locally commissioned and enhanced service can be found on the Community Pharmacy Cheshire and Wirral website.](#)

[Provision of locally commissioned services – see Part 3 of this PNA](#)

Funding and monitoring of the pharmacy contract

The essential and advanced services of the community pharmacy contract are funded from a national ‘Pharmacy Global Sum’ agreed between the Pharmaceutical Services Negotiating Committee and the Treasury. This is divided up and devolved to NHSE as a cash-limited budget which is then used to reimburse pharmaceutical service activity as per the Drug Tariff (<https://www.nhsbsa.nhs.uk/pharmacies-gp-practices-and-appliance-contractors/drug-tariff>). Funding for locally commissioned services must be identified and negotiated locally from the commissioners’ own budgets.

Community pharmacy contract monitoring

NHS England (NHSE) requires all pharmaceutical service providers to meet the high standards expected by patients and the public. NHSE local offices have the responsibility for monitoring the provision of Essential and Advanced services. Arrangements for monitoring locally commissioned services may be set out in local contracts or Service Level Agreements.

NHS England (NHSE) local offices use the Community Pharmacy Assurance Framework (CPAF) to monitor pharmacy contractors’ compliance with the terms of the Community Pharmacy Contractual Framework (CPCF).

Community Pharmacy Assurance Framework (CPAF)

The [Community Pharmacy Assurance Framework](#) was developed by NHS Primary Care Commissioning as a toolkit to assist Primary Care Trusts in assessing compliance and quality under the Community Pharmacy Contractual Framework (CPCF).

The community pharmacy contract assurance process follows a structured sequence of events including:

- A rolling programme of pre-arranged visits to pharmacies for observation of processes and procedures and a detailed interview with the pharmacist in charge and support staff
- Self-assessment declarations
- Scrutiny of payment submission processes
- Scrutiny of internal processes for confidential data management
- Recommendations for service development or improvement
- Structured action plan with set timescales for completion

In addition to the structured process outlined above, NHSE will also take account of the findings from the annual community pharmacy patient questionnaire that is undertaken by the pharmacy contractor as well as any patient complaints relevant to pharmacy services.

In cases where the professional standards of an individual pharmacist are found to fall below the expected level, NHSE will work with the relevant professional regulatory body such as the General Pharmaceutical Council to ensure appropriate steps are taken to protect the public.

Pharmaceutical Needs Assessment

Part 2

Resident Population, Health Needs and Wellbeing

Part 2: Wirral's Resident Population and its Health Needs

Health Needs in Wirral

Introduction

The section starts by considering the key drivers for population health in the borough and ongoing relationship to community pharmacy delivery. The majority of the information contained in the section aims to provide a description of the Wirral population in terms of demographic structure and key features. It sets out to summarise the main areas of concern regarding the health of residents alongside an overview of the evidence where community pharmacy can contribute to the public health agenda.

National Context: Local Delivery

Integrated Care Systems

From July 2022, Clinical Commissioning Groups will be replaced by the local integrated care boards (ICB), within sub-regional integrated care system (ICS), and that this ICB will be able to take on delegated responsibility for pharmaceutical services, and from April 2023 NHS England and NHS Improvement expects all integrated care boards to have done so.

An [Integrated Care System \(ICS\)](#) brings together the NHS organisations, councils, and wider partners in a defined geographical area to deliver more joined up approaches to improving health and care outcomes. There are 42 ICSs in England, including Cheshire and Merseyside, which is one of the largest in the country. It is now expected that from July 2022, the Cheshire and Merseyside ICS (also known as [Cheshire & Merseyside Health and Care Partnership](#)) will have legal status and will include a statutory Integrated Care Partnership (ICP), and a new NHS body called the Integrated Care Board (ICB).

Health and Wellbeing Boards are therefore aware that some services that are commissioned from pharmacies by Clinical Commissioning Groups (and are therefore other NHS services) will move to the integrated care boards and will fall under the governance of the wider Integrated Care System. The implications for Wirral residents and pharmacy provision will be developed in the coming months. Although undoubtedly there will be changes over time, in the first instance, it is expected that existing commissioned services and contracts will transfer to the new local ICB/ICS during 2022.

Wirral: Local and related strategy and policy context

There is a need to be mindful that community pharmacy services should strive to support the changes that face the NHS in the context of a number of national, regional, and local drivers.

These include:

- [Cheshire & Merseyside Health and Care Partnership: Improving Health and Wellbeing in Cheshire and Merseyside Strategy 2021-2025](#) has its vision, as described in its [ICS strategy](#), that is for everyone in Cheshire and Merseyside to have a great start in life, and get the support they need to stay healthy and live longer.
- [The NHS Long Term Plan 21 August \(2019\)](#) was developed in partnership with those who

know the NHS best – frontline health and care staff, patients and their families and other experts.

- [Core20PLUS5 – An approach to reducing health inequalities \(2021\)](#) is a national NHS England and NHS Improvement approach to support the reduction of health inequalities at both national and system level. The approach defines a target population cohort – the ‘Core20PLUS’ – and identifies ‘5’ focus clinical areas requiring accelerated improvement.
- [Healthy Wirral Plan](#) - Healthy Wirral is a partnership plan with the aim of transforming how health and wellbeing services are delivered and designed in Wirral, putting residents at the heart of services.
- [Wirral Plan: 2021 – 2026](#) sets out five key themes which the Council and partners are working to deliver by 2026.
- [Wirral Plan 2021 – 2026 – Delivery Plans](#) in order to meet the identified needs in the new Wirral Plan then a series of theme delivery plans are published to describe how the outcomes will be achieved.
- [Embracing optimism - Living with COVID-19: Annual Report of the Director of Public Health for Wirral \(2020-2021\)](#) - The public health annual report (PHAR) identifies key health issues and reports on progress so that the local needs of the population can be better served. The report focuses on how Wirral responded to the COVID-19 pandemic alongside the existence of persistent health inequalities, and their impacts, upon our residents across the borough.
- **Local Plan 2020 – 2037** - The Council will have prepared a [new Local Plan for the period 2020 to 2037](#) that will be submitted to Government Planning Inspectorate in Summer 2022. The Plan will set out how the Council will meet the Borough’s housing and development needs, and will include policies to tackle climate change, and protect our natural and built environmental assets. The Local Plan’s strategic policies will align with the objectives and aims of the Wirral Plan refresh and will have at its heart the comprehensive regeneration of Birkenhead.

Wirral Health & Wellbeing Board (HWBB)

The Board has oversight of the delivery of both the [Wirral Plan 2021- 2026](#) and the [Healthy Wirral Plan](#) in achieving improved health and wellbeing outcomes for Wirral residents. There is currently in development the latest Wirral Health & Wellbeing Board Strategy (2022) which will embed the themes of Wirral’s most recent [Annual Public Health Report \(2021\)](#). The key themes and intentions of the new strategy are not yet published but will be important to the overall direction and delivery of local health services in the coming years. Below are the key components of those two delivery plans.

Wirral Plan 2021-2026

A [Wirral Plan, published in September 2021](#), is a key policy document that articulates the ambition and key deliverables for the organisation, while focusing on five key themes:

- A thriving and inclusive economy, creating jobs and opportunities for all.
- Safe and pleasant communities that our residents are proud of.
- A clean-energy, sustainable borough, leading the way in tackling the environment

crisis, protecting biodiversity & supporting active travel networks that work for all.

- Active and healthy lives for all, with the right care, at the right time to enable residents to live longer and healthier lives.
- Brighter futures for all regardless of their background.

Figure 2 outlines some of the detail behind those pledges.

Figure 2: Wirral Plan 2021-2026 'on a page'

WIRRAL PLAN 2021 – 2026				
EQUITY FOR PEOPLE AND PLACE				
To create equity for people and place and opportunities for all to secure best possible future for our residents, communities and businesses.				
Brighter Futures	Inclusive Economy	Sustainable Environment	Safe & Pleasant Communities	Active & Healthy Lives
AIMS				
<ul style="list-style-type: none"> • Break the cycle of poor outcomes. • Reduce educational attainment inequalities. • Raise the aspirations of all our children and young people. 	<ul style="list-style-type: none"> • Deliver regeneration, transport and growth ambitions. • Create Community Wealth/Social Value. • Create jobs and support local businesses. • Develop quality, affordable and sustainable homes. • Prevent and relieve homelessness 	<ul style="list-style-type: none"> • Respond to the Climate Change emergency. • Protect our cherished local environment. • Improve street cleanliness. • Support active travel networks. 	<ul style="list-style-type: none"> • Work with partner agencies to reduce crime and tackle anti-social behaviour. • Tackle rough sleeping and homelessness. • Deliver everyday neighbourhood services to the best possible standard. 	<ul style="list-style-type: none"> • Work with partner agencies to improve mental wellbeing. • Encourage active living. • Support people to live independently. • Deliver public health services and actions to improve wider determinants of health. • Tackle health inequalities.
DELIVERABLES				
<ul style="list-style-type: none"> • Develop a prevention programme. • Deliver the Transformational Partnership Accommodation Strategy. • Build the 'early help and intervention' offer. • Deliver the School Asset and Sufficiency Strategy. • Deliver the SEND Strategy. 	<ul style="list-style-type: none"> • Deliver the Local Plan. • Deliver the Economic Strategy 2026. • Deliver the Birkenhead 2040 Framework. • Deliver regeneration enabling strategies. • Deliver transport strategies and regen/active travel projects. • Deliver the Community Wealth Building Strategy. • Deliver the Homelessness Strategy 	<ul style="list-style-type: none"> • Deliver the Climate Emergency Action Plan and Cool Wirral 2 Strategy. • Progress the major LED replacement scheme. • Implementation of major capital infrastructure investment which supports Wirral Highways and Infrastructure. • Deliver the Cycling and Walking Programme. 	<ul style="list-style-type: none"> • Deliver the DRIVE programme. • Begin design of new Neighbourhoods model • Deliver the new libraries model and strategy. • Deliver new Sports and Physical Activities Strategy. • Deliver the Community Safety Strategy. • Ensure Culture and Learning is embedded in the heart of communities. 	<ul style="list-style-type: none"> • Lead the strategic and operational Outbreak Management Plan. • Launch the Health Inequalities Strategy. • Develop a new leisure offer. • Develop a new adult social care model. • Deliver against the Prevention programme.
PERFORMANCE MEASURES				
<ul style="list-style-type: none"> • Increase in children making expected progress educationally. • A closing gap in educational achievement. • Increase in children ready for school. • Decrease in rate of looked after children in Wirral. • Children in Need rate per 10,000 0-17 population. • Increased success of the early intervention family programme. 	<ul style="list-style-type: none"> • Value of investments secured • Hectares of Brownfield Land remediated/regenerated. • Number of jobs created and safeguarded. • Claimant Count (reduction) • Business Count (increase) • No. of affordable homes delivered. • Reduction in those living in temporary accommodation. 	<ul style="list-style-type: none"> • Increased recycling • Reduce the overall collected general waste (non-recycling) per household • Increase energy efficiency in Council owned buildings • Increase in the number of trees planted and wildflower verges in Wirral • Increase the number of people cycling 	<ul style="list-style-type: none"> • Decrease in anti-social behaviour • Reduction in the number of crimes reported to the police • Reduce first time entrants into the Youth Justice System • Reduce the incidents of repeat domestic abuse reporting. • Increased library usage. 	<ul style="list-style-type: none"> • More people are supported to remain independent in their own homes. • Care, health and support services are joined up and responsive. • Fewer admissions to hospital or long term care. • Number of home adaptations completed. • Proportion of residents living in suitable housing. • Increase in people using Council leisure facilities.
CROSS-CUTTING STRATEGIES AND STRATEGIC PROGRAMMES				
<ol style="list-style-type: none"> 1. Wirral Local Plan 2020 – 2037 2. Health Inequalities Strategy 3. Healthy Wirral Plan 4. Prevention Programme 5. Community Wealth Building Strategy 	<ol style="list-style-type: none"> 6. Economic Strategy 7. Affordable Housing Plan 8. Homelessness Strategy and Rough Sleeping Plan 9. Active Travel Strategy 10. Neighbourhoods Model 	<ol style="list-style-type: none"> 11. Climate Emergency Plan 12. Digital Strategy 13. Community Safety Strategy 		

Source: Wirral Plan (2021) as [published on Wirral Intelligence Service website](#) (also see Delivery Plans)

Integrated Care Boards and impact upon Wirral (February 2022)

Partners across Wirral have a long history of working effectively together to agree and deliver shared outcomes. The Integrated Care System and the developmental Wirral Place Based Partnership sets out to be inclusive, bringing together commissioners, providers and colleagues from Social Care, Health and Voluntary Sectors. Wirral's Place Based Partnership will build on the Boroughs Health and Wellbeing Strategy by developing the partnership strategy/priorities and associated outcomes for health and care across Wirral.

At the time of producing this PNA, the Health and Care Bill was still at Report stage

in the House of Commons and has not yet been formally approved. The statutory instruments establishing each Integrated Care System cannot be made formally until the Bill has been enacted. However, system partners are charged to preparations for the expected new arrangements, and any implications for pharmaceutical needs of the population, to commence in July 2022. For more information read [Integrated Care System - Update \(February 2022\)](#) as submitted to Wirral Health and Wellbeing Board.

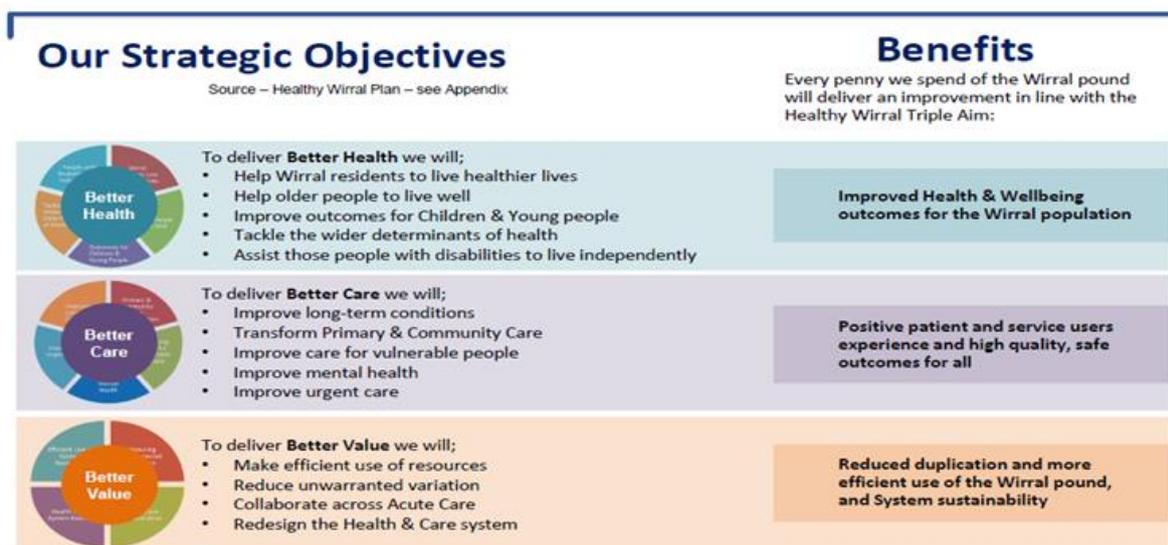
Health and Social Care

The Healthy Wirral Partnership, as driven by the Healthy Wirral Plan, and a key plank of the Wirral Plan, has to date provided a leadership role for the health and social care system. Although there will be changes due to the approaching Integrated Care Boards/Systems the intent and approach will continue to put the health and wellbeing of residents at the centre of all service provision and delivery as the transfer to the new local ICB/ICS gathers pace during 2022.

Healthy Wirral

The aim is to enable all people in Wirral to live longer and healthier lives by taking simple steps of their own to improve their health and wellbeing. By achieving this together we can provide the very best health and social care services when people really need them, as close to home as possible.

The Healthy Wirral Partnership is committed to working together to ensure that every penny we spend of the Wirral pound will deliver an improvement in line with the Healthy Wirral Triple Aim:



Closer integration of health and social care commissioning has been a prevalent and continuous theme of policy since the inception of the NHS. The Care Act 2014 reinforced and introduced a national commitment for closer health and social care integration with a commitment to the wellbeing of the individual. More recently ‘Accountable Care’ has been highlighted as a key theme in NHS England (NHSE) ‘Next steps on the NHS Five Year Forward View’ (NHS England, 2017).

The *Healthy Wirral* programme was established to provide a whole health and social care

sector response to the significant system wide pressures in Wirral by creating a public sector led Place Based Care System, focused on people and not organisations, working within a single set of resources by 2020.

Potential Implications for pharmaceutical need

There will be numerous ways that community pharmacies could, and do, contribute to the objectives in the Wirral Plan and Healthy Wirral Plan. They may encompass:

- giving medicines management advice to support young children and their families (Brighter Futures and Better Health)
- advising on the safety and storage of medicines in the home (Active and healthy lives and Better Care)
- supporting NHS, social care, and other agencies during any safeguarding issues (Brighter Futures and Better Care)
- support people to adopt healthy lifestyles through advice, signposting and medicines management (Wirral residents live healthier lives and Better Health)
- provision of needle exchange and supervised consumption for selected clients (Active and healthy lives and Better Care)
- supporting patients and carers on all aspects of medicines management (Active and healthy lives and Better Care)
- signposting and advice to support public health and other agencies in tackling the wider determinants of health such as reducing fuel poverty and optimising personal finance issues (Active and healthy lives and safe and pleasant communities and Better Health)
- raising awareness/reducing stigma around mental health, promoting five ways to wellbeing and accessibility to community-based interventions through pharmacy public health programs and signposting (Active and healthy lives and Better Care)
- supporting people with the management of their medicines prescribed for mental health disorders (Active and healthy lives and Better Care)
- support older people to be independent in their own homes through medicines use review (Older people live well and Better Health)
- support carers through effective medicines management and signposting where appropriate (Active and healthy lives and Better Care)
- work with carers and other agencies to optimise medicines management for older people living at home (Active and healthy lives and Better Health)

Population and Health Profile

Introduction

Wirral is as diverse as it is distinctive. It is a place of disparities. Some of the most affluent wards sit side by side with some of the most deprived wards. There are significant inequalities in income and life expectancy depending on your Wirral postcode. Below is an overview of many key headlines, when compared to England, which affect Wirral residents.

Wirral – The Place

- A Peninsula of 15 miles long and 7 miles wide, bounded by the River Dee to the west, River Mersey to the east, and the Irish Sea to the north
- Transformational regeneration of Wirral Waters and Birkenhead underway, creating sustainable waterfront neighbourhoods and urban parks on the [LeftBank of the Mersey](#)
- 50 miles of rural walking routes, cycle areas and beaches and 24 miles of coastline, featuring the longest prom in Britain and five nature reserves
- Some of the best parks and green spaces in the country – [boasting 30 Green Flags](#) and the world's first publicly-funded park in Birkenhead
- A prime leisure destination with 14 golf courses, award-winning boutique hotels and destination dining, including Michelin starred restaurant Fraiche
- Untapped built, industrial, maritime, and social heritage that is internationally significant. Including the development of a Maritime Knowledge Hub to support innovation in the sector
- Current estimated population of 323,235 makes it one of the largest metropolitan boroughs in England, set to grow by nearly 3% by 2040
- Compared to Liverpool City Region partners, and England as a whole, the borough also has a diverse make up in terms of age, with a relatively higher older population and a low proportion of people in their twenties and thirties
- Wirral is the twelfth largest metropolitan council in England in terms of population. It is also the second largest local authority in Liverpool's City Region and bigger than many cities such as Newcastle, Derby, Leicester, and Nottingham. Were Wirral in the East Midlands, it would be the largest metropolitan council in that region

Wirral – The Area

- Wirral has a population of over 320,000 people. The population grew by 2.4 percent or by 7,500 households between 2001 and 2011. By 2030, the population is expected to increase to around 329,600
- Over 7,400 businesses providing employment for 111,000 people

- As of June 2021, economic activity rates in Wirral are currently below the national average at 77.3% compared to 79.3% of the working age population of Great Britain; being economically active means someone is employed or is seeking employment
- Gross weekly pay in Wirral (full time workers in 2021) is £523.60 compared to £575.80 in the North-West and £612.80 in England
- As of November 2021, youth unemployment in Wirral (8%) is currently higher than the England average (6%), although working-age unemployment claimants in Wirral are at similar level to England
- In Wirral 23,000 people are employed in jobs related to human health and social work activities. This is 22.5% of the jobs available in Wirral, nationally in Great Britain 13.1% of people are employed in this sector and in the North-West 14.2%

Wirral – The Inequalities

- The inequalities in life expectancy at birth sees both male and female residents continuing to compare poorly against the England average, with a large gap in life expectancy between wards in the east and west of Wirral
- This gap widened for both men and women between 2017-19 and 2018-20 from 11.2 to 11.9 years for women, and 10.7 to 12.6 years for men reflecting the large inequalities in the borough
- In further trying to understand the challenges of our borough's inequalities, the 2019 Indices of Deprivation saw Wirral ranked the 77th most deprived authority (of 317 authorities) in England
- The report found that just over 35% of the Wirral population (around 115,500 people) are suggested to live in areas classified as being in the most deprived 20% of areas in England, with over 83,000 of those residents living in the 10% most deprived

Population Structure and Projections

Sources for this Part 2 section of the Pharmaceutical Needs Assessment are in [Appendix 12](#).

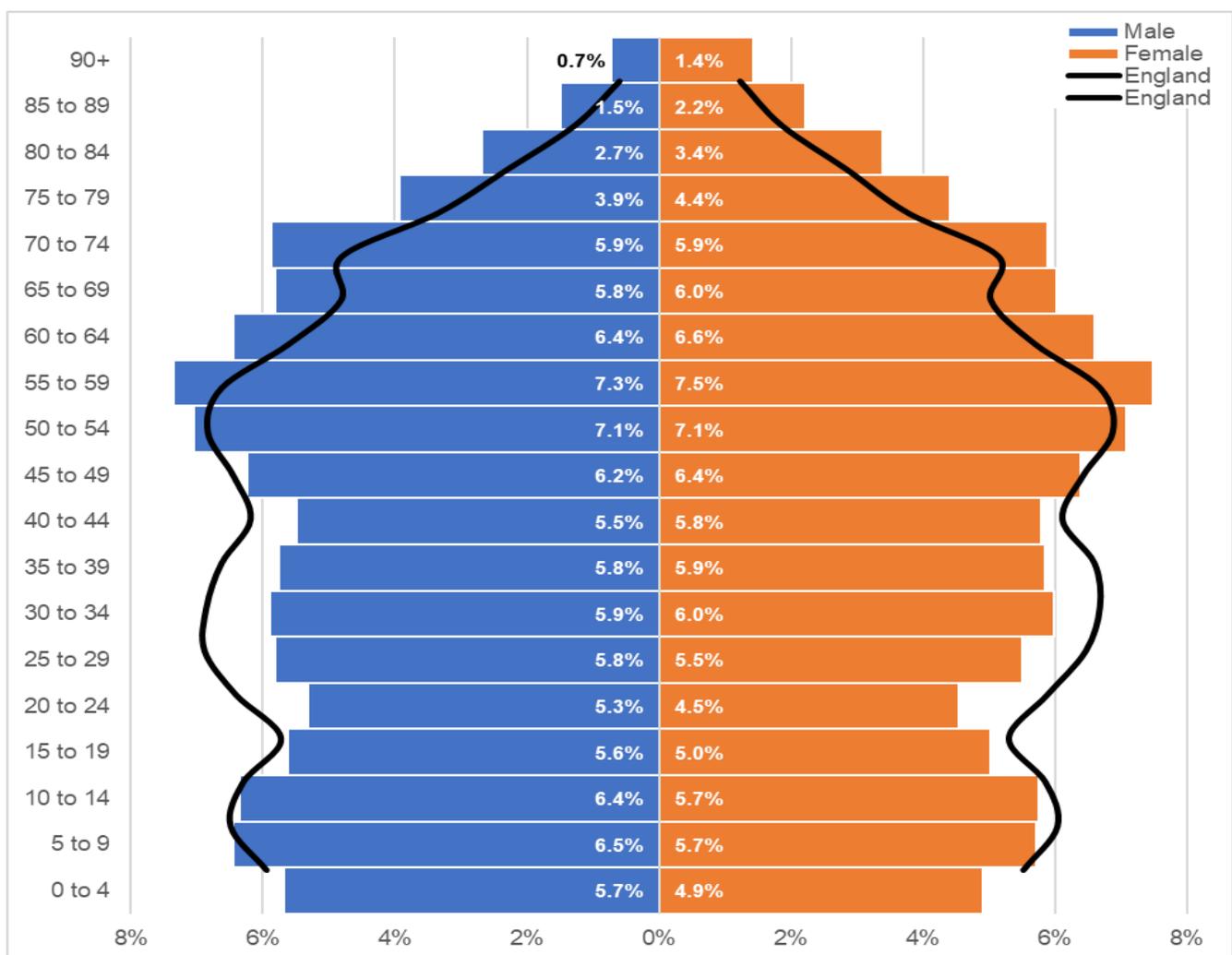
Estimated Resident Population

The data used in **Figure 3** are estimates produced by the Office for National Statistics, based on births, deaths, and net migration in previous years. Estimates for mid-2020 estimate that there are 324,336 people living in Wirral: 52% being female and 48% male.

As **Figure 3** shows, Wirral has a different age structure for both males and females when compared to England. Wirral has a higher proportion of residents aged 45-64 years. When looking at the population in terms of gender, there is a higher proportion of female residents in those aged 20+ years (52.4% female vs 47.6% male). However, in those aged <20 years, the opposite appears to be true; 51.4% male vs 48.6% female).

More details about the young population of Wirral are included in the [Children & Young People: Population and Demographics](#) report on the Wirral Intelligence Service website.

Figure 3: Proportion of total population by sex and age, Wirral, and England, 2020



Source: [ONS 2020 Mid-Year Estimates, 2021](#)

Note: Census 2021 results are not expected to be available until mid-2022 at the earliest and so could not be included in this assessment

GP Registered Population

There are more people recorded on GP registers compared to the mid-year estimates provided by ONS; the total registered population was 339,342 as at January 2022 (**Table 1**). This is due to several reasons, for example GP registers may contain people who live outside Wirral. This discrepancy in the two population datasets is not unique to Wirral and is a pattern that is reflected across England and Wales.

Table 1: GP registered population by sex and age, January 2022

5 Year Age Band	Female		Male		Persons	
	(n)	(%)	(n)	(%)	(n)	(%)
0-4	7,757	4.5%	8,236	4.9%	15,993	4.7%
5-9	9,275	5.4%	9,922	5.9%	19,197	5.7%
10-14	9,841	5.7%	10,334	6.2%	20,175	5.9%
15-19	8,783	5.1%	9,442	5.6%	18,225	5.4%
20-24	8,286	4.8%	8,628	5.1%	16,914	5.0%
25-29	9,706	5.7%	9,956	5.9%	19,662	5.8%
30-34	11,156	6.5%	11,278	6.7%	22,434	6.6%
35-39	10,906	6.4%	10,731	6.4%	21,637	6.4%
40-44	10,100	5.9%	10,196	6.1%	20,296	6.0%
45-49	10,373	6.0%	10,160	6.1%	20,533	6.1%
50-54	12,039	7.0%	12,026	7.2%	24,065	7.1%
55-59	12,639	7.4%	12,270	7.3%	24,909	7.3%
60-64	11,368	6.6%	11,413	6.8%	22,781	6.7%
65-69	10,050	5.9%	9,532	5.7%	19,582	5.8%
70-74	9,856	5.7%	9,163	5.5%	19,019	5.6%
75-79	7,795	4.5%	6,777	4.0%	14,572	4.3%
80-84	5,598	3.3%	4,179	2.5%	9,777	2.9%
85-89	3,663	2.1%	2,403	1.4%	6,066	1.8%
90-94	1,802	1.1%	913	0.5%	2,715	0.8%
95+	588	0.3%	202	0.1%	790	0.2%
ALL	171,581	100%	167,761	100%	339,342	100.0%

Source: [NHS Digital \(2022\)](#)

Although the two main estimates of population differ slightly, overall trends are the same. For example, both Figure 3 (ONS estimated population) and Table 1 show that Wirral has an older population; more than 54% of Wirral's population are aged 40 years and over.

Table 1 also shows that there are a greater number of older females in Wirral; with around 39,000 females aged 65 years and over, compared to 33,000 males of the same age. This is even more pronounced in residents aged 85 years and over; 6,053 females compared to 3,518 males (or a difference of 72%). These figures show that Wirral has an ageing population, which is further evidenced in Table 2 (population projections).

Population Estimates by Wirral ward

Table 2 shows the estimated Wirral population by ward and age bracket in mid-2020. The estimates, produced by the Office for National Statistics, are originally based on figures collected from Census 2011 and are not guaranteed to be completely accurate at this level of detail, but do provide an indication of which wards are more and less populated by different age groups.

Table 2: Estimated Wirral population by ward and age bracket, mid-2020

Ward	Total Population	Under 15	15 - 44	45 - 64	65 - 84	85+
Bebington	15,701	2,803	5,008	4,491	2,922	477
Bidston and St James	15,935	3,617	6,155	3,886	2,050	227
Birkenhead and Tranmere	16,718	3,697	7,010	4,157	1,639	215
Bromborough	15,928	2,887	5,830	4,341	2,501	369
Clatterbridge	14,215	2,080	4,049	3,906	3,683	497
Claughton	14,427	2,198	4,766	4,185	2,785	493
Eastham	14,143	2,412	4,473	3,908	2,897	453
Greasby, Frankby and Irby	13,777	2,030	3,702	4,092	3,394	559
Heswall	13,208	1,846	3,142	3,851	3,682	687
Hoylake and Meols	13,326	2,064	3,851	3,951	2,805	655
Leasowe and Moreton East	14,825	3,023	5,187	3,934	2,397	284
Liscard	16,120	2,968	5,852	4,364	2,567	369
Moreton West and Saughall Massie	13,968	2,170	4,521	3,991	2,924	362
New Brighton	15,067	2,310	5,157	4,430	2,722	448
Oxton	14,003	2,095	4,696	3,927	2,904	381
Pensby and Thingwall	13,053	1,997	3,656	3,704	3,207	489
Prenton	14,645	2,576	4,828	4,256	2,577	408
Rock Ferry	14,484	3,008	5,650	3,643	1,921	262
Seacombe	15,549	3,507	6,220	3,773	1,829	220
Upton	16,737	3,223	5,605	4,354	2,957	598
Wallasey	14,665	2,269	4,467	4,504	2,876	549
West Kirby and Thurstaston	12,741	2,044	3,349	3,778	3,045	525
Birkenhead	90,212	17,191	33,105	24,054	13,876	1,986
Wallasey	90,194	16,247	31,404	24,996	15,315	2,232
Wirral South	73,195	12,028	22,502	20,497	15,685	2,483
Wirral West	69,634	11,358	20,163	19,879	15,408	2,826
Wirral	323,235	56,824	107,174	89,426	60,284	9,527

Source: [ONS 2020 Ward Level Mid-Year Population Estimates](#) (2021)

Note: Census 2021 results are not expected to be available until mid-2022 at the earliest and so could not be included in this assessment

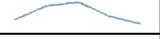
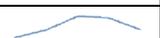
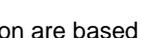
- Wards with the highest number of residents were Birkenhead & Tranmere, Upton and Liscard
- Wards with the highest proportion of children were Birkenhead & Tranmere, Bidston & St James and Seacombe
- Wards with the highest proportion of those aged 65-84 were Heswall, Greasby, Frankby & Irby and Clatterbridge
- Wards with the highest proportion of those aged 85+ were Heswall, Upton and Hoylake & Meols

- The two most deprived Constituencies (Birkenhead and Wallasey) had the highest number of younger people (aged under 15) and the lowest numbers of the very oldest old (aged 85+); in the two least deprived Constituencies (Wirral South and Wirral West), the opposite was true

Resident Population Projections

According to estimates produced by ONS, Wirral's overall population is projected to increase by 2.7% between 2017 and 2035, from around 325,000 to 335,000; however, there are several significant changes within that increase (**Table 3**).

Table 3: Resident population projections and percentage change, Wirral, 2021-2040

Age Band	2021	2025	2030	2035	2040	Change 2021-2040	
0-4	16,924	16,344	16,186	16,322	16,895	-0.2%	
5-9	19,599	18,031	17,060	16,917	17,077	-12.9%	
10-14	19,802	20,177	18,558	17,591	17,456	-11.8%	
15-19	17,306	18,664	19,188	17,647	16,813	-2.8%	
20-24	15,010	13,997	15,506	16,175	15,147	0.9%	
25-29	17,870	17,175	16,014	17,847	18,634	4.3%	
30-34	19,455	18,977	17,771	16,649	18,592	-4.4%	
35-39	19,144	20,185	19,981	18,716	17,583	-8.2%	
40-44	18,470	19,664	20,940	20,790	19,491	5.5%	
45-49	19,735	18,666	20,146	21,415	21,311	8.0%	
50-54	23,144	20,874	19,047	20,587	21,856	-5.6%	
55-59	24,198	23,288	21,086	19,332	20,922	-13.5%	
60-64	22,054	24,146	23,292	21,166	19,486	-11.6%	
65-69	19,114	20,682	23,533	22,805	20,800	8.8%	
70-74	19,396	18,055	19,552	22,335	21,759	12.2%	
75-79	14,167	16,962	16,135	17,618	20,250	42.9%	
80-84	9,914	10,998	13,766	13,250	14,671	48.0%	
85-89	6,195	6,666	7,522	9,548	9,371	51.3%	
90+	3,681	3,866	4,325	5,014	6,401	73.9%	
All ages	325,177	327,415	329,608	331,724	334,513	2.9%	

Source: [ONS 2018-based Population Projections](#) (2021)

Note: The projections are trend based, which mean assumptions for future levels of births, deaths and migration are based on observed levels. Projections are presented in thousands and have been rounded to the nearest hundred.

As **Tables 2 and Table 3** (GP and Population Estimates) suggest, Wirral has an ageing population that is also of an older profile overall than England. **Table 3** also highlights that the population aged 65+ is due to grow substantially between 2021 and 2040; most notable is the increase in those aged 90 years and over, which is expected to steadily rise by an estimated 73.9%. In comparison, the biggest decrease can be seen between the ages of 55-59 years, showing an overall decrease of 13.5%. When comparing wider age bands, it should be noted that those aged 65+ years (typically not working) will increase by 28.7%, whereas the working age (20-64 years in this example) will decrease by 3.4%. It should be noted that these projections were calculated before the recent Census (2021) and before any impact of COVID-19 could be included.

Ethnicity

The latest ONS data on ethnicity is still currently that from the Census 2011; data from the recent Census in 2021 will not be available until around Spring 2022. **Table 4** shows that Wirral had a small ethnic minority population (in comparison with England overall); 95.0% of the population were classified as White British (**Table 4**).

Table 4: Resident population by ethnicity, Wirral, 2011

Ethnic Group	Number	%
White	310,156	97.0
English/Welsh/Scottish/Northern Irish/British	303,682	95.0
Irish	2,667	0.8
Gypsy or Irish Traveller	77	0.0
Other White	3,730	1.2
Mixed/multiple ethnic groups	3,286	1.0
White and Black Caribbean	964	0.3
White and Black African	558	0.2
White and Asian	949	0.3
Other Mixed	815	0.3
Asian/Asian British	5,116	1.6
Indian	1,344	0.4
Pakistani	226	0.1
Bangladeshi	851	0.3
Chinese	1,653	0.5
Other Asian	1,042	0.3
Black/African/Caribbean/Black British	695	0.2
African	389	0.1
Caribbean	189	0.1
Other Black	117	0.0
Other ethnic group	530	0.2
Arab	208	0.1
Any other ethnic group	322	0.1
Total	319,783	100.0

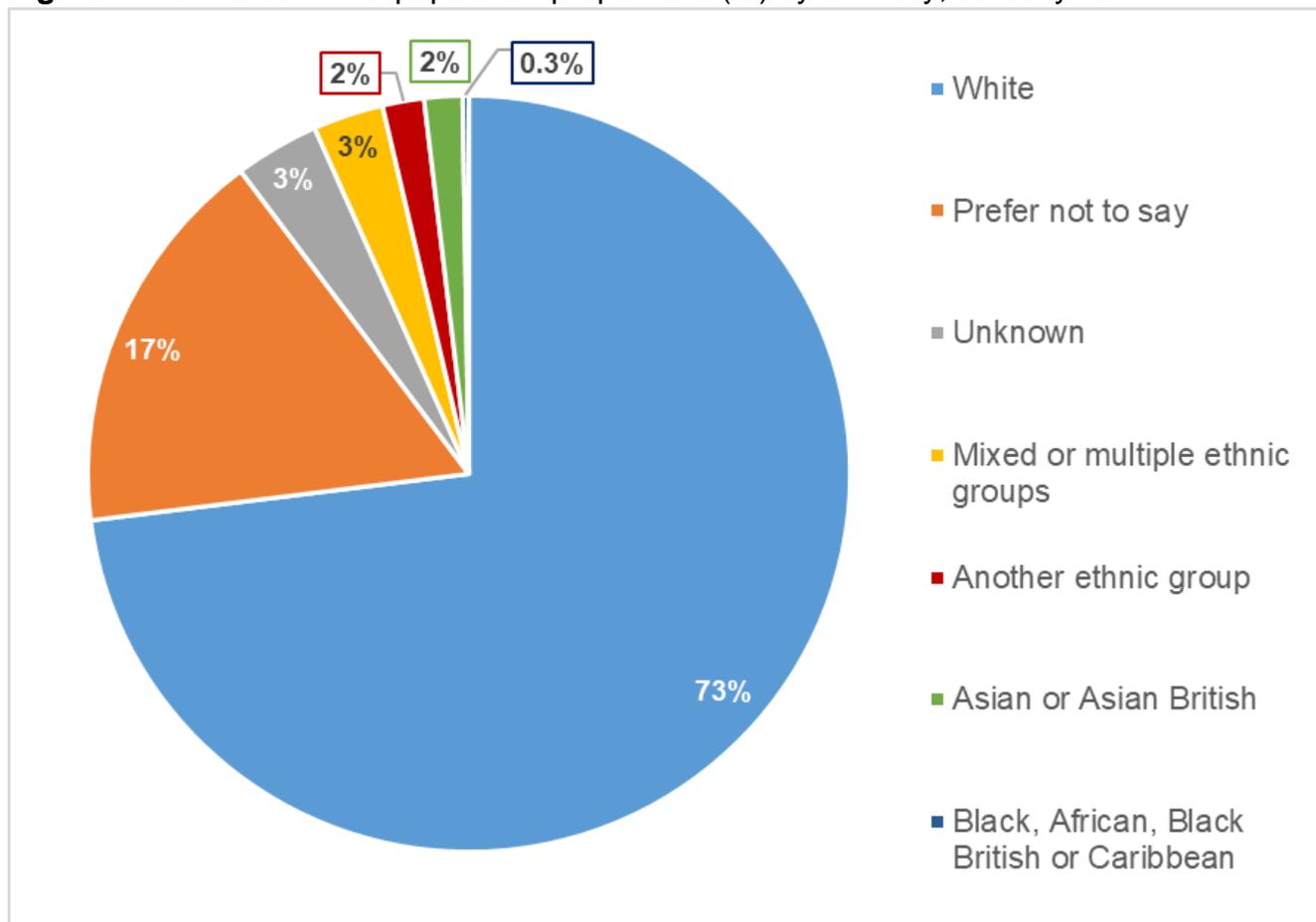
Source: [Census 2011 \(ONS\), 2021](#)

Note: Census 2021 results are not expected to be available until mid-2022 at the earliest and so could not be included in this assessment

Due to the inequalities highlighted by the COVID-19 pandemic, work has been undertaken across the public sector to improve the recording of data, specifically ethnicity data. Across Cheshire & Merseyside, the [CIPHA](#) (*Combined Intelligence for Population Health Action, or CIPHA, is a population health management platform*) was established to facilitate access to data in response to the pandemic, which includes ethnicity data from GP practices across the Cheshire and Merseyside area.

However, despite being more recent, the quality is poor with around 20% of the Wirral population without an ethnicity recorded, as reflected in **Figure 4**.

Figure 4: Estimated Wirral population proportions (%) by ethnicity, January 2022



Source: Population Health Dashboard (restricted), CIPHA, 2022

However, this data does continue to highlight Wirral has a small ethnic minority population, an estimated to 6.6% of the population were classified as Black, Asian, and Minority Ethnic (Figure 4). The [school census data](#) for Wirral from January 2021 recorded that around 7% of all school pupils were from Black, Asian and Minority Ethnic groups.

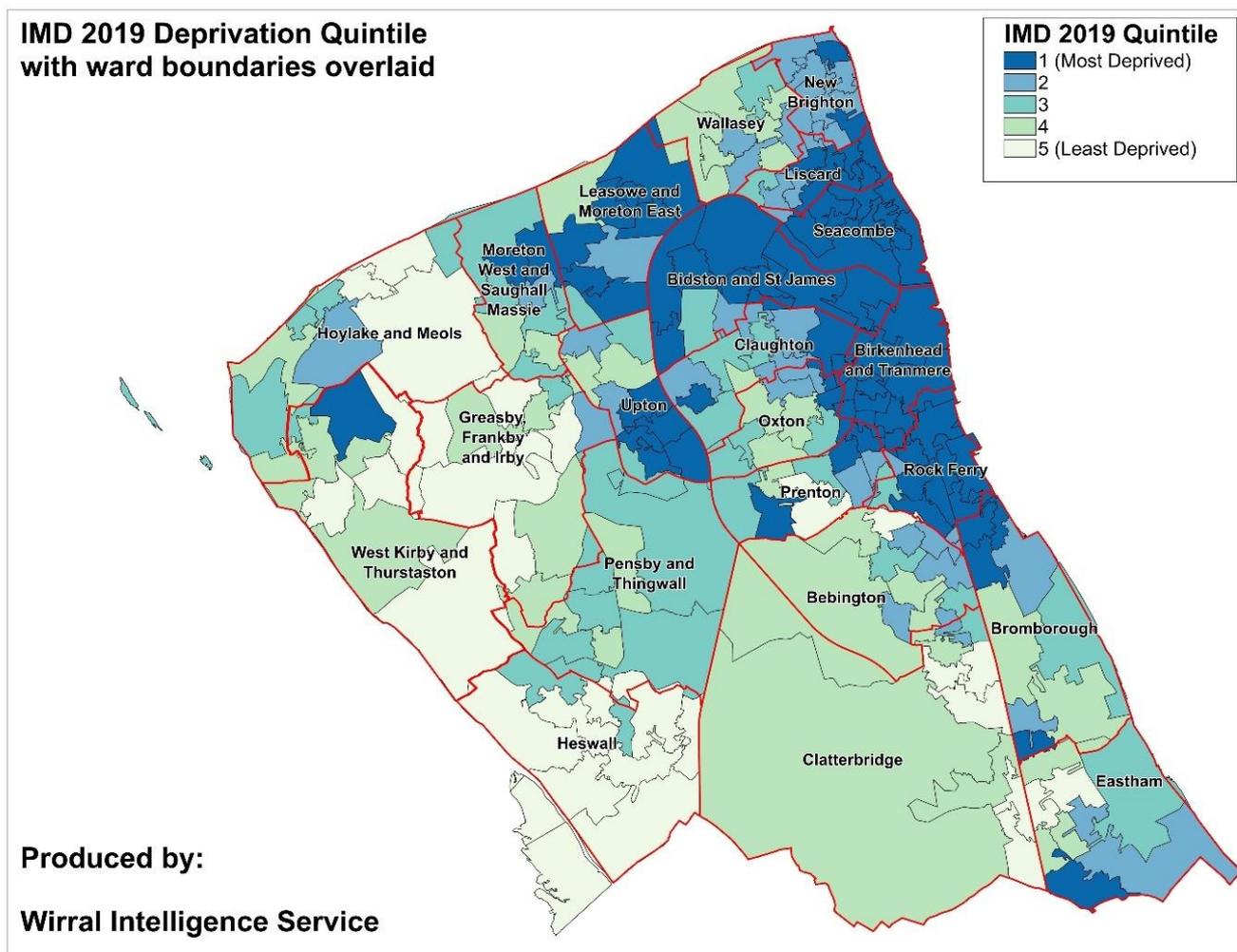
Deprivation and Socio-economic factors

Index of Multiple Deprivation (2019)

The Indices of Multiple Deprivation was most recently calculated for England in 2019 and there is no timescale for publication of an update (at the time of writing). Within Wirral, there are 206 Lower Super Output Areas (LSOAs) that each have their own IMD score and national ranking.

The most deprived LSOA in Wirral lies within the Bidston and St James ward (ranked 19th most deprived LSOA in England) compared to Wirral's least deprived LSOA in Heswall (ranked 32,747th of 32,844 in England). Fifteen of Wirral's LSOAs are classed as being the 1% most deprived areas in England.

Map 1: Index of Multiple Deprivation 2019, by Wirral LSOA



Source: [Wirral intelligence Service](#) (2021)

Note: A larger version of this map is available in [Appendix Five](#)

In 2019, Wirral was ranked the 77th most deprived authority (of 317 authorities) in England (1 the being most deprived, 317 the least deprived). Although the increase in rank appears to indicate Wirral has become less deprived because it is no longer in the 20% most deprived local authorities as it was previously (Wirral ranked 66 in the previous IMD in 2015 and 60 in the 2010 IMD), this is not necessarily the case. In fact, the overall number of Wirral Lower Super Output Areas (LSOAs) in the most deprived 20% of areas in England has increased to 72 in the 2019 Index of Multiple Deprivation (IMD), from 62 in 2015 (an increase of 10 LSOAs). It may mean for example, that other areas have just become relatively more deprived than Wirral.

Just over 35% of the Wirral population (around 115,500 people) now live in areas classified as being in the most deprived 20% of areas in England. This has increased since the last Index of Multiple Deprivation (IMD) in 2015, when 32% of the Wirral population were classed as living in deprivation. **Map 1** shows that these areas are concentrated on the east side of the Wirral. The less deprived areas tend to be located on the west side of Wirral, barring some small pockets of higher deprivation in Hoylake & Meols and West Kirby & Thurstaston wards.

Income Deprivation Affecting Children Index (IDACI)

The IDACI 2019 shows that there are 30 Wirral LSOAs classed as being in the 10% most deprived nationally. The greatest levels of child deprivation are found in Egremont Central, Lower Tranmere and Bidston & St James East areas.

Income Deprivation Affecting Older People Index (IDAOPI)

The IDAOPI 2019 shows that there are 36 Wirral LSOAs classed as being in the 10% most deprived nationally. The areas most affected by deprivation of older people are in Leasowe Central, Woodchurch Leisure Centre and Lingham Park East.

For more detail, please go to the [Indices of Multiple Deprivation \(2019\) report](#).

Households and Assets

Households and Assets Housing Development

The Borough's housing land supply with planning permission as of April 2021 stood at 3,747 dwellings. The latest published [Strategic Housing Land Availability Assessment for Wirral \(SHLAA, 2019\)](#) identified potential for an additional 833 units to be delivered within the next five years on sites currently without planning permission and an allowance for windfalls and conversions that could support an additional 750 units over the next five years.

The SHLAA for April 2021 is due to be published alongside the final Draft of the Wirral Local Plan during early 2022. The Draft Local Plan is expected to identify a requirement for up to 13,360 new homes to be provided in Wirral between April 2021 and March 2037, to deliver approximately 835 net new dwellings each year over the Plan period.

The Draft Plan will seek to deliver the Council's preferred option of urban intensification (Option 1A) that would lead to most of this new development being focused within the existing urban areas to the east of the M53 Motorway, from New Brighton to Eastham.

Over 50% of the new dwellings are planned to be provided in and around Birkenhead, with over 10% in Wallasey and 15% in Bromborough. Approximately 20% are planned to be delivered in the settlements to the west of the Motorway. The proposals will be subject to examination by a Planning Inspector appointed by the Secretary of State to be held during 2022 before they can be adopted.

Draft Wirral Strategic Housing Market Assessment (SHMA 2020)

The Draft Wirral Strategic Housing Market Assessment (SHMA 2020) [\(report\)](#) identifies the type and mix of housing which the local population is likely to need, to inform the final proposals in the Local Plan. It highlights an affordable housing need of up to 30% of new housing development, subject to viability, of which 60% should be for rent. The SHMA 2020 also identifies a significant projected growth in the number of older person households in Wirral, by 20% or 12,764 by 2035, of which 75% would want to stay in their own home.

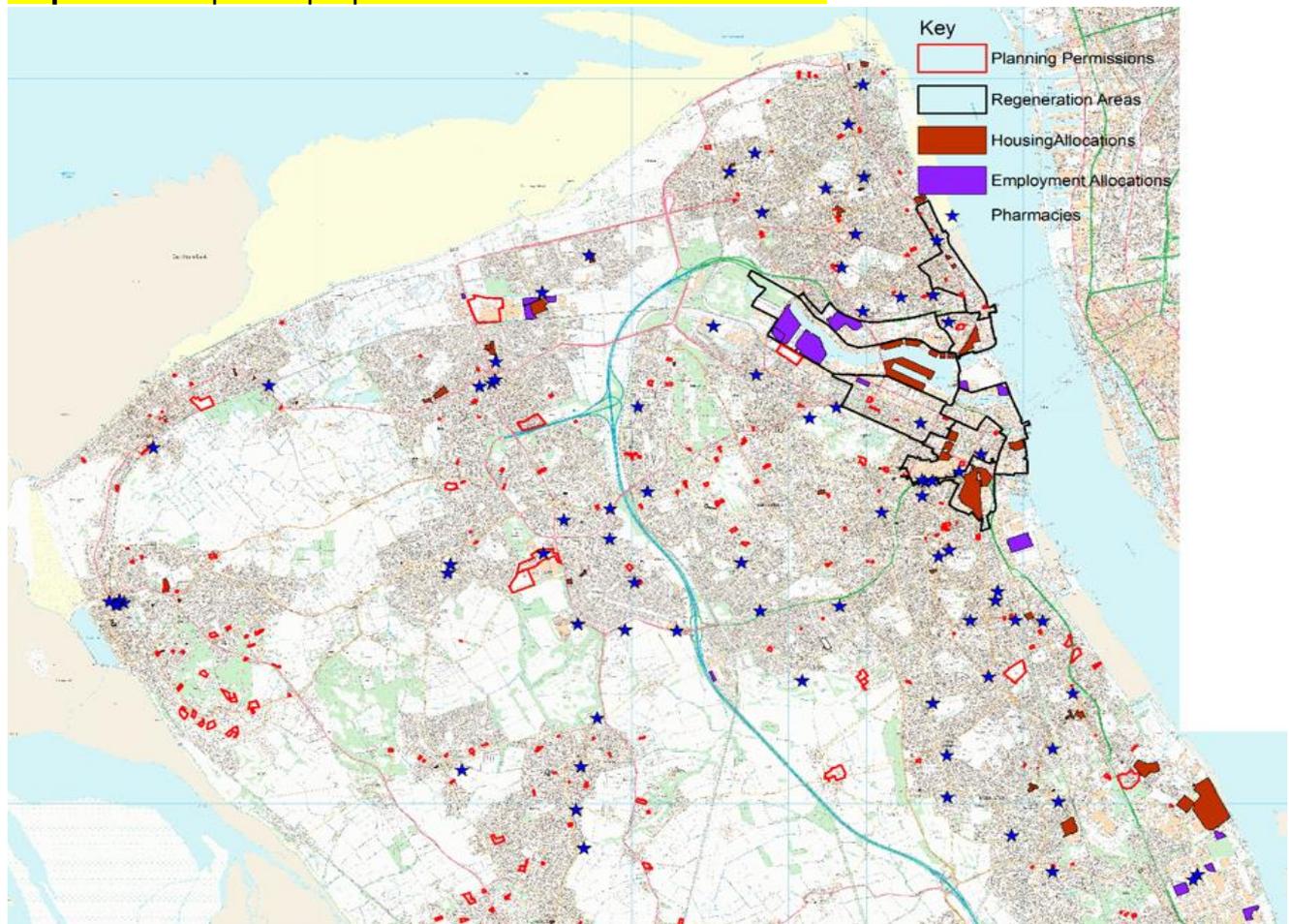
There is a particular need for additional extra care and retirement housing (2,779 units) and residential care accommodation (1,330 units) over the Plan period and a need for properties that can be adapted to suit their occupant, for the 20% of existing residents who have an illness or disability. A 2021 update will also be made available alongside the Draft Wirral Local Plan in early 2022.

The interactive map at [https://www.wirral.gov.uk/planning-and-building/local-plans-and-planning-policy/wirral-new-local-plan/local-plan/issues-and-planning-policy/wirral-new-local-plan/new-local-plan](https://www.wirral.gov.uk/planning-and-building/local-plans-and-planning-policy/wirral-new-local-plan/local-plan/issues-and-planning-policy/wirral-new-local-plan/local-plan/issues-and-planning-policy/wirral-new-local-plan/new-local-plan) shows the housing developments that were being considered as part of the Issues and Options consultation on the content of the emerging Local Plan in January 2020.

The accompanying documentation, including lists of potential sites can also be viewed on the Council's website at <https://www.wirral.gov.uk/planning-and-building/local-plans-and-planning-policy/wirral-new-local-plan/new-local-plan>. Revised proposals will not be available until the final Draft of the Local Plan is approved for publication in 2022.

The map below (**Map 2**) below outlines those current **housing proposals** across Wirral. There are several housing developments but none, as we believe, that would constitute an impact on this PNA **within** its three-year lifespan.

Map 2: Development proposals and location of Pharmacies



Source: Produced by Wirral Council, Economic and Housing Growth Team (2022)

Extra Care Housing Developments

In February 2022, a report to Wirral Councils Adult Social Care and Health Committee outlined the [approach to the development of Extra Care Housing the Borough](#) in the coming years. The report suggests that 725 new units of Extra Care Housing and sheltered housing should be developed by 2026. This will involve identifying sites and targeting future schemes

to meet particular needs in specific locations. This is more than the SHMA suggests but is an increase that reflects a reducing dependence on residential care settings.

This increase is not expected to see new residents arrive in the Borough but more movement of current population to new facilities. Though their placement will be important to know and understand so that any future potential pharmaceutical need can be considered.

Primary Care Estates Developments

There are currently 48 GP Practices in Wirral, altogether 56 premises (some practices occupying premises on more than one site). This is 14 practices with Owner Occupiers, 27 practices rented from private landlords (35 premises), 5 premises rented from NHS Trust and 2 practices with NHS Property Services.

In order to facilitate the continued improvement of the primary care estates the Clinical Commissioning Group (CCG) with the support of NHS England, allocate improvement grant (IG) funding to Practices annually. All Wirral Practices can apply for this funding to support the premises development, refurbishment or relocation of premises. In 2021-22 four practices were funded/supported to improve the existing premises.

In 2022/23 there are a number of options currently at scoping stage. They include:

- CCG is currently reviewing 5 development proposals seeking support for expanding the existing space to provide additional services.
- One Wirral Practice currently considering re-location to a new building development in Birkenhead Constituency area, the anticipated completion timeline of this move is by mid-2023.
- There is a merger proposal too, received recently from two practices in the Wallasey Constituency area.

From July 2022, the Cheshire and Merseyside ICS (also known as [Cheshire & Merseyside Health and Care Partnership](#)) will have legal status and will include a statutory Integrated Care Partnership (ICP), and a new NHS body called the Integrated Care Board (ICB). transition arrangements to [Cheshire & Merseyside Health Care Partnership](#) (new ICS organisation from July 2022). The transition arrangements are being put in place but it is not envisaged that these local plans for improving and developing facilities will be affected. Based upon the information above it is not envisaged that pharmaceutical services will be impacted negatively but the process will be kept under review.

Regeneration Projects in Wirral: Implications for Health Services

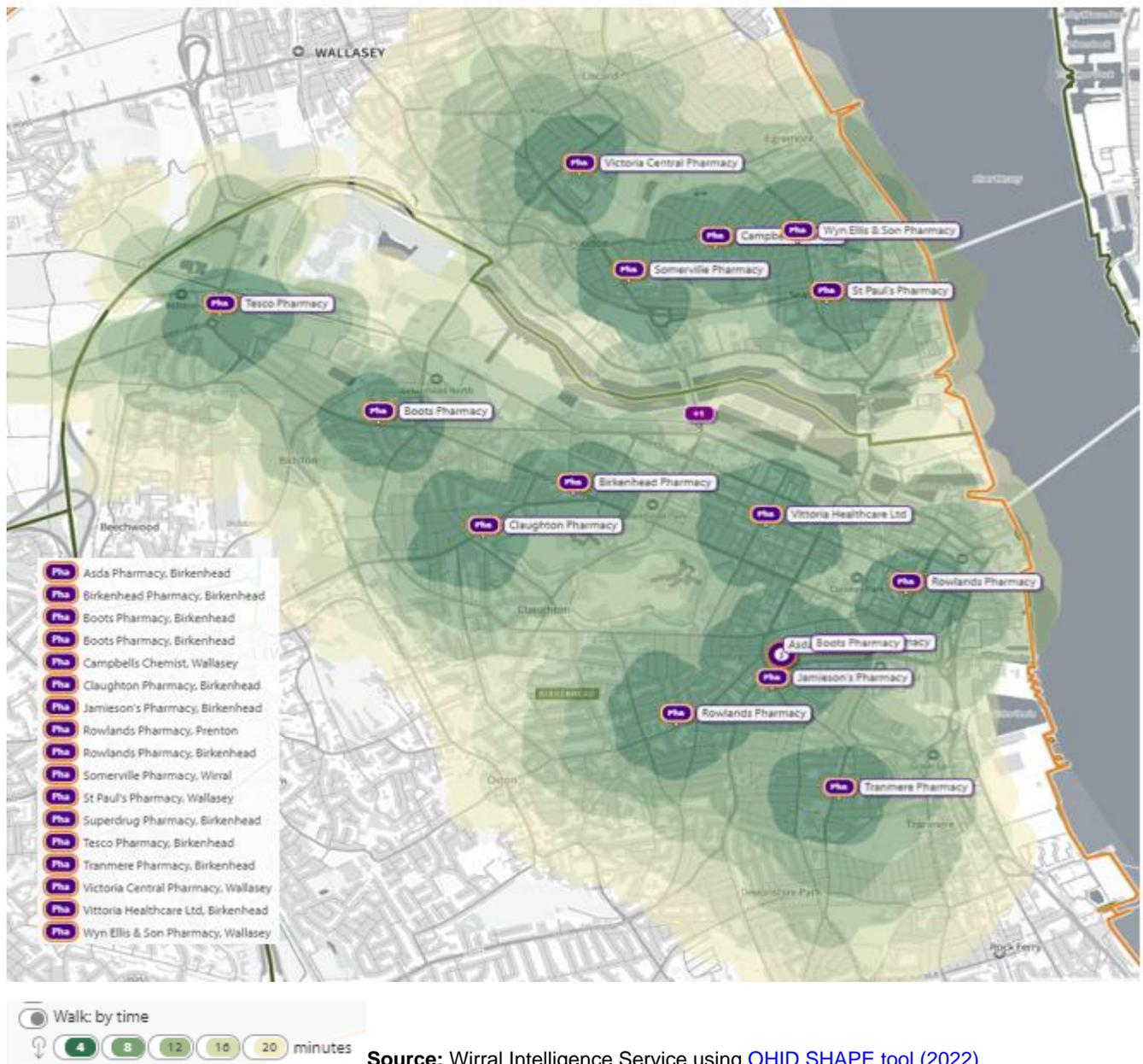
The main area for housing development as part of the Birkenhead Regeneration Masterplan (2021 -2040) is within the area highlighted in the **Map 2** above.

This immediate area covers Birkenhead area near to Hamilton Square up to the M56 slip-road in Poulton, Wallasey, across to New Brighton and south again to Cammell Lairds Shipbuilders. Work by Wirral Council, Economic and Housing Growth Team looked to establish which GP Practices and other Health venues might be affected as a result of the Birkenhead Regeneration Masterplan.

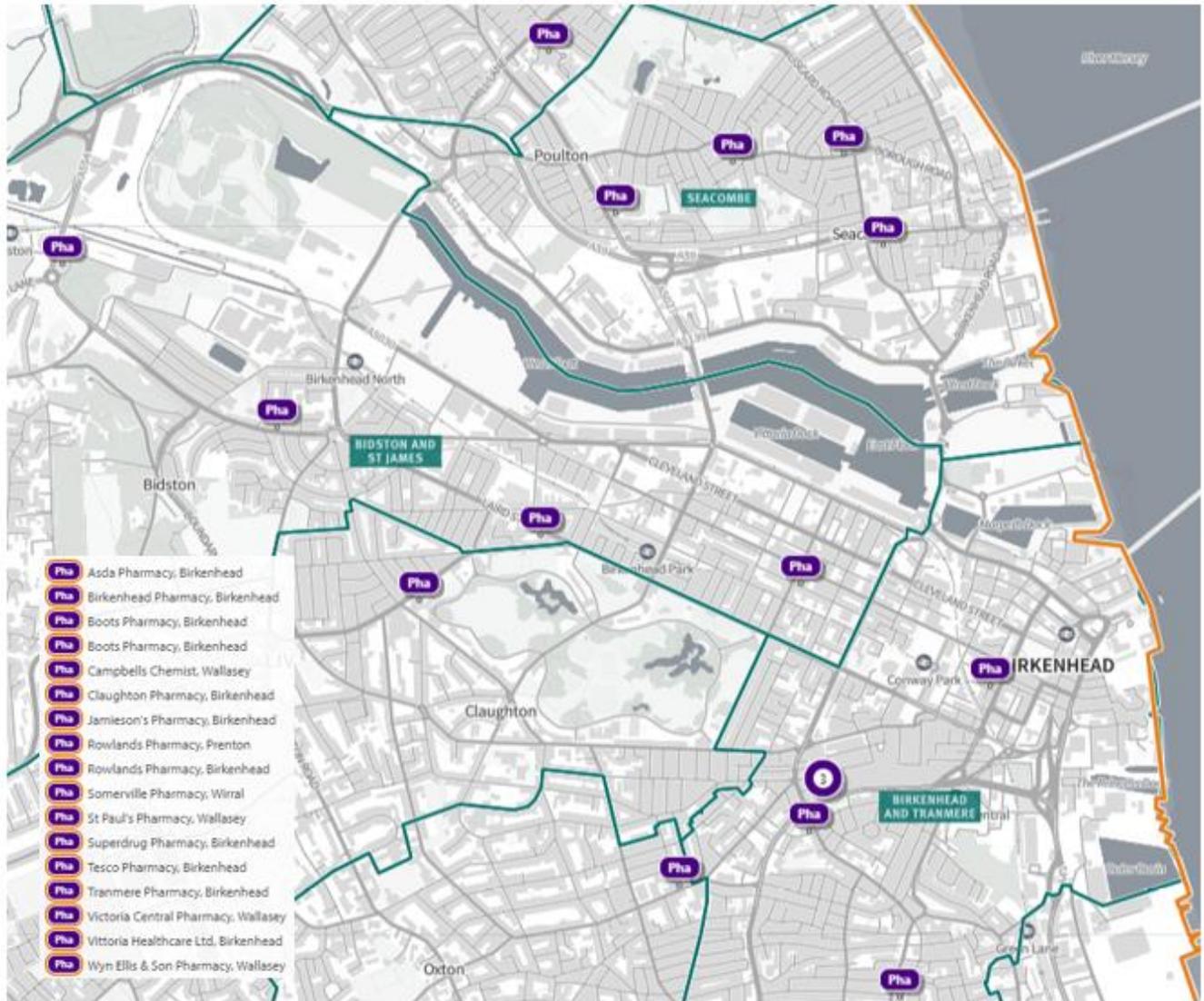
The detailed analysis, as part of the development of the draft Local Plan, was undertaken to understand potential impacts of increased resident numbers in those new development areas. This work identified two GP Practices that might see the potential for more new residents that might seek to use their services than other local practices when also considering their current practice numbers. The detailed analysis led them to determine that Vittoria Medical Practice and Hamilton Medical Practices could see increased footfall as a result.

Vittoria Medical Practice and Hamilton Medical Practice are situated on **Map 3** and **Map 4** below, with pharmacies both within the GP Practice or close by, and with a number of other pharmacy sites also either within a short car journey, accessible on foot, by bicycle and/or by public transport. **Map 3** suggests within 20 minutes walking time then there are seventeen pharmacies that would serve the resident population. **Map 4** also shows that the regeneration area is well-served with pharmacy outlets providing a range of pharmaceutical services.

Map 3: Pharmacy availability within Birkenhead Regeneration area (2022)



Map 4: Birkenhead Regeneration Area, proximity of pharmacies to central development area (2022)

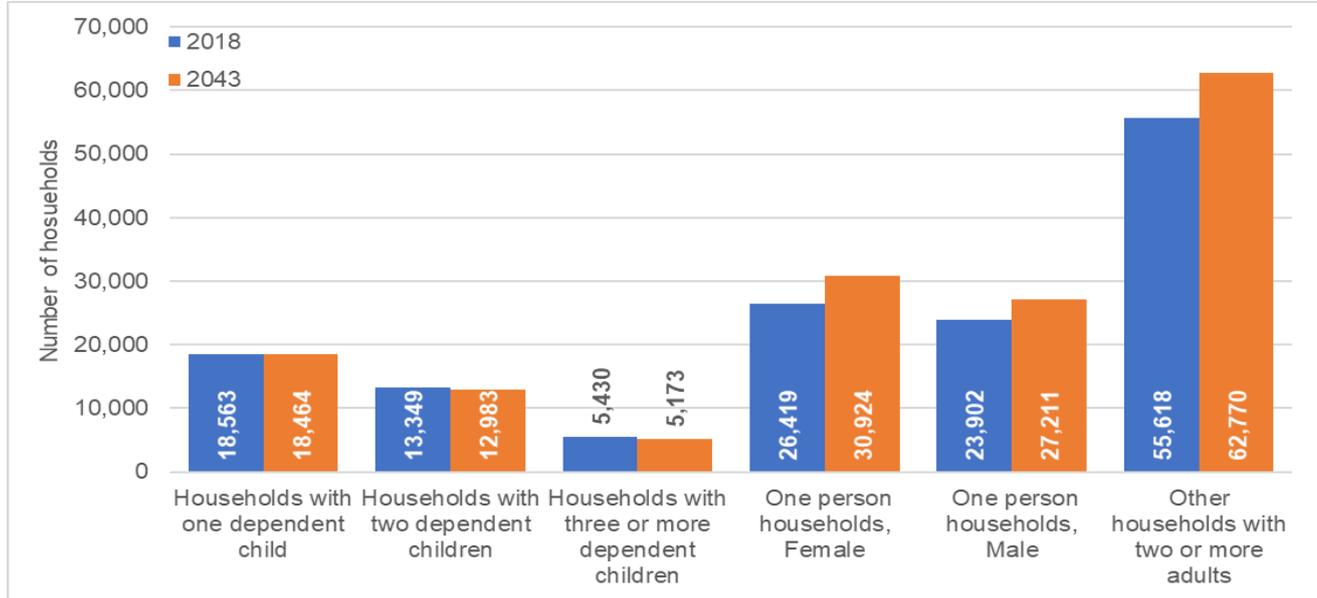


Source: Wirral Intelligence Service using [OHID SHAPE tool \(2022\)](#)

Household Characteristics

In 2018, it was estimated that there were around 143,300 households in Wirral (**Figure 5**) with 35.1% of these households being single occupancy (those 'One Person' households); this increases slightly in 2043 to 36.9%.

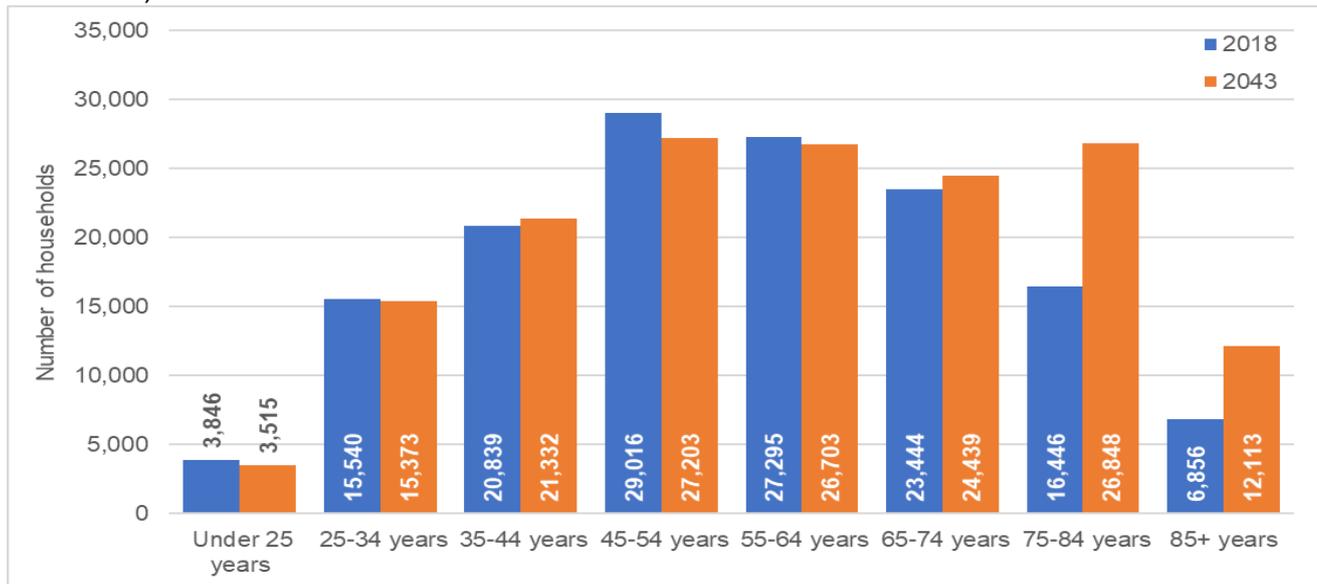
Figure 5: Households in Wirral by household type, 2018 and increase to 2043



Source: 2018-based live tables, [Live tables on household projections](#), Department for Communities and Local Government (2020)

The total number of households in Wirral is projected to increase by around 15,000 between 2018 and 2043. However, in contrast to this, households with 1+ dependent children are projected to decrease from 37,342 to 36,620 between the same years (2018 and 2043) as **Figure 6** shows.

Figure 6: Household in Wirral by age of household representative, 2018 and 2043 (projected estimates)



Source: 2018-based live tables, [Live tables on household projections](#), Department for Communities and Local Government (2020)

As **Figure 6** shows, the estimates suggest that the number of households aged 75-84 years are projected to see the largest increase in numbers between 2018 and 2043 (10,402 households). However, it is households where the representative is 85+ years that is estimated to see the largest proportional increase (76.7%).

Car Status

Wirral residents are equally as likely to have access to a car or van as their counterparts in the Liverpool City Region as seen in **Table 5**; 72% having access to 1+ vehicle compared to the LCR average of 67.8%.

Table 5: Car status – Liverpool City Region – Census 2011

Local Authority	% with access to 1+ vehicle
St. Helen's	73.3%
Halton	73.0%
Wirral	72.0%
Sefton	71.5%
Knowsley	62.9%
Liverpool	53.9%
Liverpool City Region	67.8%
England & Wales	74.4%

Source: Census 2011, via [RAC foundation](#)

Note: Census 2021 results are not expected to be available until mid-2022 at the earliest and so could not be included in this assessment

When looking at access to vehicles within Wirral (**Table 6** below) there is a stark contrast in vehicle access at both Ward and Constituency level.

Those wards classed as being more deprived have lower access, e.g., 55.6% of households who live in Birkenhead & Tranmere (the most deprived ward) do not have access to a car or van, compared to much lower proportions in the less deprived wards, such as Heswall (10.0%) and Clatterbridge (11.2%).

Table 6: Households without access to a car/van by Wirral Ward, 2011

Area	Wirral Constituencies	Households	No cars or vans in household	Percentage of households without a car or van (%)
Birkenhead and Tranmere	Birkenhead	7,747	4,309	55.6%
Bidston and St James	Birkenhead	6,889	3,488	50.6%
Rock Ferry	Birkenhead	6,465	3,010	46.6%
Seacombe	Wallasey	6,871	3,156	45.9%
Liscard	Wallasey	6,891	2,420	35.1%
Upton	Wirral West	7,127	2,283	32.0%
Leasowe and Moreton East	Wallasey	6,390	2,021	31.6%
New Brighton	Wallasey	6,784	2,115	31.2%
Bromborough	Wirral South	6,690	1,927	28.8%
Claughton	Birkenhead	6,285	1,719	27.4%
Prenton	Birkenhead	6,051	1,510	25.0%
Oxton	Birkenhead	6,592	1,458	22.1%
Bebington	Wirral South	6,645	1,439	21.7%
Eastham	Wirral South	5,955	1,199	20.1%
Moreton West & Saughall Massie	Wallasey	6,176	1,243	20.1%
Wallasey	Wallasey	6,313	1,226	19.4%
Hoylake and Meols	Wirral West	5,713	1,034	18.1%
West Kirby and Thurstaston	Wirral West	5,486	910	16.6%
Pensby and Thingwall	Wirral West	5,803	962	16.6%
Greasby, Frankby and Irby	Wirral West	5,978	721	12.1%
Clatterbridge	Wirral South	5,924	662	11.2%
Heswall	Wirral South	5,808	579	10.0%
Birkenhead Constituency		40,029	15,494	38.7%
Wallasey Constituency		39,425	12,181	30.9%
Wirral South Constituency		31,022	5,806	18.7%
Wirral West Constituency		30,107	5,910	19.6%
Wirral		140,583	39,391	28.0%

Source: [NOMIS](#), 2021

Note: Census 2021 results are not expected to be available until mid-2022 at the earliest and so could not be included in this assessment

Births & Fertility

There were 2,958 live births in Wirral in 2020 (the latest year for which data is available) (**Table 7** below). This follows a decline from the mid-2010s and is, in fact, the lowest number of births since Wirral was formed as a Metropolitan Borough in 1974.

Table 7: Trend in birth and fertility rates, Wirral, and England, 2000 to 2020

Year	Number of Live Births	Live Birth Rate	Wirral GFR*	England GFR*
2000	3,438	10.9	53.0	55.9
2001	3,308	10.5	53.8	54.8
2002	3,270	10.4	53.3	54.7
2003	3,503	11.2	57.3	56.7
2004	3,521	11.2	57.9	58.0
2005	3,591	11.5	59.4	58.0
2006	3,575	11.5	59.8	59.7
2007	3,688	11.9	62.3	61.3
2008	3,787	12.2	65.0	62.8
2009	3,645	11.8	64.1	62.6
2010	3,771	12.2	67.3	64.1
2011	3,802	11.9	65.0	64.2
2012	3,816	11.9	66.0	64.9
2013	3,560	11.1	62.3	62.4
2014	3,536	11.0	62.7	62.2
2015	3,563	11.1	63.9	62.5
2016	3,434	10.7	62.6	62.5
2017	3,366	10.4	61.7	61.2
2018	3,242	10.0	60.2	59.7
2019	3,150	9.7	57.9	57.7
2020	2,958	9.1	54.1	55.3

Source: [Wirral Compendium of Statistics](#) (2021) and <https://www.nomisweb.co.uk> (2021)

Note: GFR is general fertility rate that is calculated using the number of births against the population of women aged 15-44 years. Live Birth Rate is calculated using the number of births against the whole population

As **Table 8** below shows, the estimated number of births over the next five years (2021-2025) is projected to decrease by around 57 per year (or 1.8% less in 2025 when compared to 2021).

Table 8: Projected number of annual births, Wirral, 2021-2025

Year	2021	2022	2023	2024	2025
Number of births	3,216	3,181	3,166	3,165	3,159

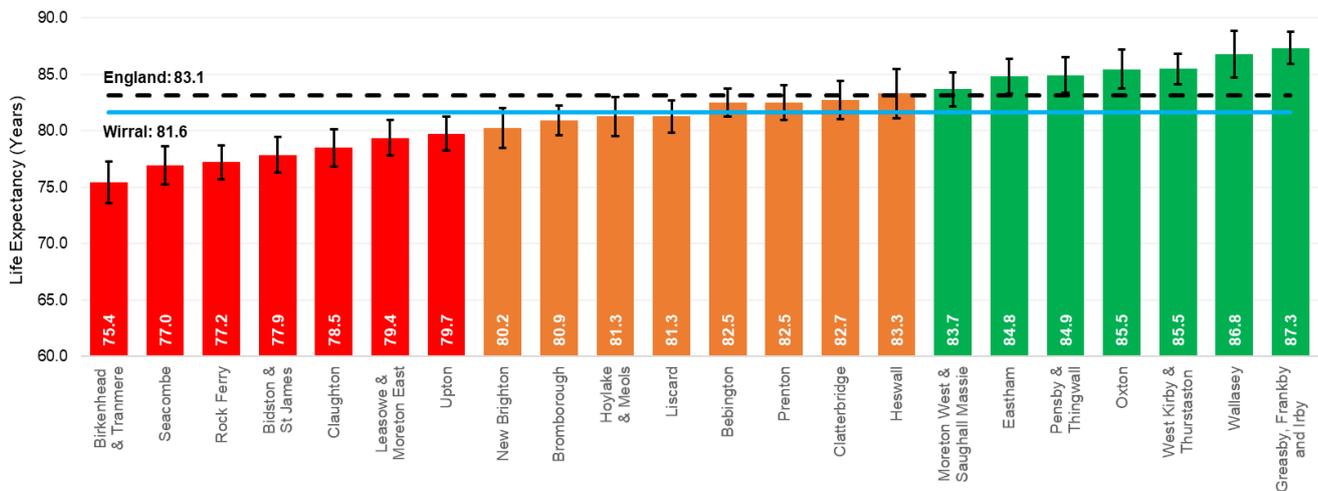
Source: [ONS 2018-based subnational population projections](#) (2021)

Life Expectancy

In 2018-20, life expectancy at birth figures for Wirral were 81.6 years (female) and 77.8 years (male); this was 1.5 years and 1.6 years lower than England life expectancy, respectively. Life expectancy at birth in Wirral has been stable over the last 10 years for both, males, and female, with minor fluctuations seen on occasion. However, the latest period, 2018-20, shows a more marked decrease for both males and females; this can be somewhat explained by the Covid-19 pandemic that has caused more deaths than expected throughout the world.

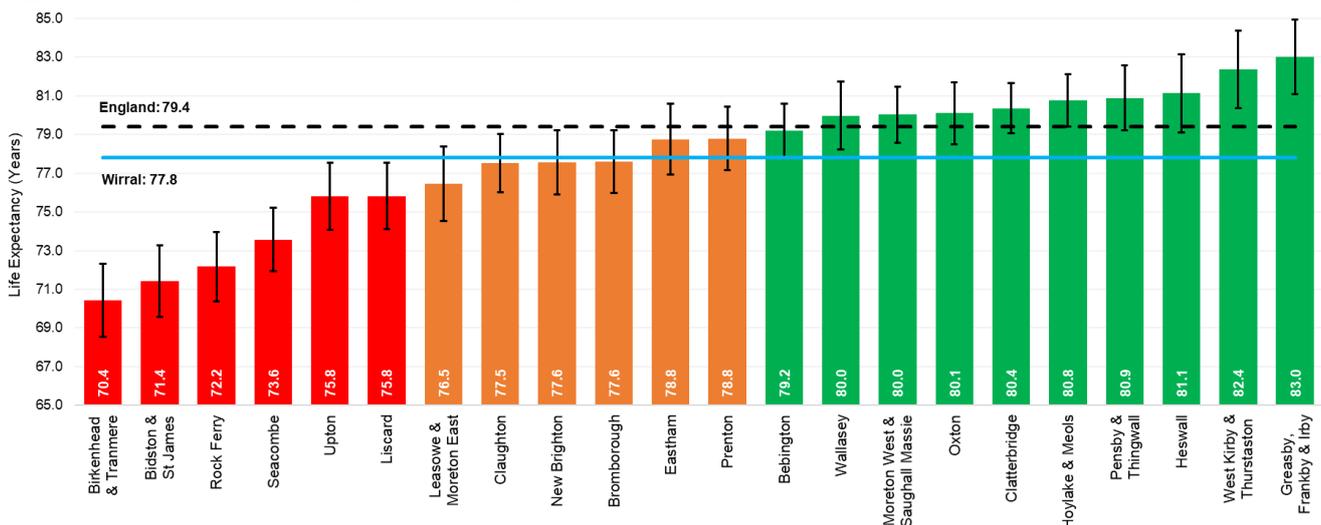
As **Figure 7** shows, there is wide variation in life expectancy between Wirral wards for females; Greasby, Frankby and Irby ward has a life expectancy of 87.3 years, which is almost 12 years longer than that in Birkenhead & Tranmere ward (75.4 years).

Figure 7: Life Expectancy at Birth, by Wirral ward, 2018-20 (Females)



Source: [Wirral Intelligence Service](#) (2022)

Figure 8: Life Expectancy at Birth, by Wirral ward, 2018-20 (Males)



Source: [Wirral Intelligence Service](#) (2022)

Similarly, **Figure 8** shows there is wide variation between Wirral wards for males also; Greasby, Frankby & Irby ward has a life expectancy of 83.0 years, which is over 12 years longer than the ward with the shortest life expectancy, Birkenhead & Tranmere (70.4 years).

In addition to inequalities at ward level, it is also apparent that there is variation between the life expectancies of females compared to males; females have a longer life expectancy in all Wirral wards. A male born today in Birkenhead & Tranmere can expect to live 70.4 years compared to a female born today in Greasby, Upton and Irby who is expected to live for 87.3 years; almost 17 years difference.

Mortality

As **Table 9** shows the ward with the highest directly standard rate (DSR) for mortality in 2017-19 was Rock Ferry (1,568.7 per 100,000). In contrast, Greasby, Frankby & Irby ward had the lowest DSR (718.8 per 100,000).

Table 9: Mortality from all causes by area, 2017-19

Ward	Number of Deaths	DSR per 100,000
Rock Ferry	536	1,568.7
Bidston and St James	510	1,456.1
Seacombe	466	1,443.5
Cloughton	727	1,375.7
Birkenhead and Tranmere	426	1,311.9
Upton	713	1,220.4
Liscard	527	1,162.0
Bromborough	514	1,140.1
New Brighton	564	1,122.1
Leasowe and Moreton East	443	1,104.7
Bebington	562	1,044.9
Hoylake and Meols	624	978.1
Clatterbridge	600	969.4
Prenton	438	920.3
Moreton West and Saughall Massie	431	920.1
Eastham	461	895.9
Oxton	421	894.1
Pensby and Thingwall	454	792.0
Heswall	559	791.0
West Kirby and Thurstaston	420	748.3
Wallasey	414	741.7
Greasby, Frankby and Irby	435	718.8
Wirral	11,245	1,036.5

Source: [Wirral Compendium of Statistics \(2021\)](#)

Note: DSR is Directly Standard Rate that applies age specific rates so that different areas are comparable

The largest cause of death in Wirral residents aged under 75 years during 2017-19 was cancer, with a DSR of 144.7 (1,380 deaths). Cancer also caused the highest number of deaths in all ages (3,066) for the same period (also [see Cancer section below](#)). However, when comparing the causes of death in Wirral to those seen in England, respiratory disease, mainly chronic obstructive pulmonary disease (COPD) and pneumonia, was the leading cause.

Comparisons with England can be made by calculating standardised mortality ratios (SMRs). The 2017-19 SMR for respiratory deaths in England is 100 and for Wirral it was 127.4 over the same period, meaning that Wirral has a mortality rate 27.4% higher than the England average.

Full tables showing mortality by cause in Wirral, along with full definitions and sources, are in each addition of the [Wirral Compendium of Statistics](#).

Health in Wirral - Key issues of concern

References for this section of the Pharmaceutical Needs Assessment are in [Appendix 12](#)

Wider Determinants of Health

- Nearly 1 in 5 children in Wirral live in relative poverty. This varies substantially by ward; 30.1% in Birkenhead & Tranmere compared to 4.7% in Heswall¹
- 15 Lower Super Output Areas (LSOAs) are in the most deprived 1% in England²
- A higher rate of hospital admissions for violent crime than the national average³
- There is more than a 10-year difference in life expectancy between Wirral wards for both males and females⁴:
 - Females: 75.4 years in Birkenhead & Tranmere compared to 87.3 in Greasby, Frankby & Irby
 - Males: 70.4 years in Birkenhead & Tranmere compared to 83.0 in Greasby Frankby & Irby
- Wirral has the second largest inequality in England for healthy life expectancy at birth for males and the third largest for females³. Health life expectancy is years spent in excellent or good health
- Wirral has a slightly higher proportion of families who are in fuel poverty compared to England; 13.9% compared to 13.4% respectively (2019)⁵
- The proportion of children living in income deprived families varies in Wirral, from 45.9% in Bidston & St James to 4.1% in Heswall; the overall for Wirral and England are 21.8% and 17.5% respectively (See **Table 10**)⁶

Table 10: Percentage of children living in income deprived families, 2019

Ward	Proportion living in income deprived families	Ward Rank
Bidston and St James	45.9%	1
Birkenhead and Tranmere	41.7%	2
Seacombe	41.6%	3
Rock Ferry	41.5%	4
Leasowe and Moreton East	29.8%	5
Upton	25.9%	6
Liscard	25.2%	7
New Brighton	20.3%	8
Bromborough	20.0%	9
Cloughton	19.9%	10
Moreton West and Saughall Massie	17.8%	11
Prenton	13.8%	12
Oxton	12.9%	13
Bebington	11.5%	14
Eastham	11.5%	15
Wallasey	9.6%	16
Pensby and Thingwall	8.6%	17
West Kirby and Thurstaston	6.2%	18
Greasby, Frankby and Irby	5.8%	19
Hoylake and Meols	5.7%	20
Clatterbridge	5.6%	21
Heswall	4.1%	22
Wirral	21.8%	-
England	17.5%	-

Source: [Children & Young People: Population and Demographics, Wirral Intelligence Service](#) (2021)

Children

- Wirral typically exceeds uptake targets for child immunisations, however, in recent years key childhood vaccinations have seen reductions in uptake, meaning that levels are falling beneath the 95% target to ensure herd immunity for certain communicable diseases⁷ (See **Table 9**)
- The rate of children in care in Wirral was 120 per 10,000 in 2020; this is nearly double the national rate of 67 per 10,000⁷
- Mental health admissions in those aged under 18 have significantly increased over the last 8 reported years; the gap between Wirral and England is at its widest in 2019/20 (214.8 per 100,000 residents for Wirral vs 89.5 for England)⁷
- Historically, Wirral had a higher proportion of children achieving a good level of development at the end of reception year, than that seen nationally. However, in recent years (2015/16 to 2018/19), Wirral's proportion plateaued and has started to decrease in contrast to England's continuing increases. This means that Wirral is now significantly lower than England in terms of this indicator⁷

Table 9: Early childhood immunisations for Wirral, North-West & England, 2020/21

Immunisation	Age	Wirral	England
Hexavalent (6-in-1)*	1 years	94.2%	92.0%
Hexavalent (6-in-1)*	2 years	95.1%	93.8%
Hib/MenC booster	2 years	92.7%	89.8%
PCV booster	2 years	92.9%	90.1%
MMR (1 dose)	2 years	92.9%	90.3%
MMR (1 dose)	5 years	97.4%	94.3%
MMR (2 doses)	5 years	92.3%	86.6%

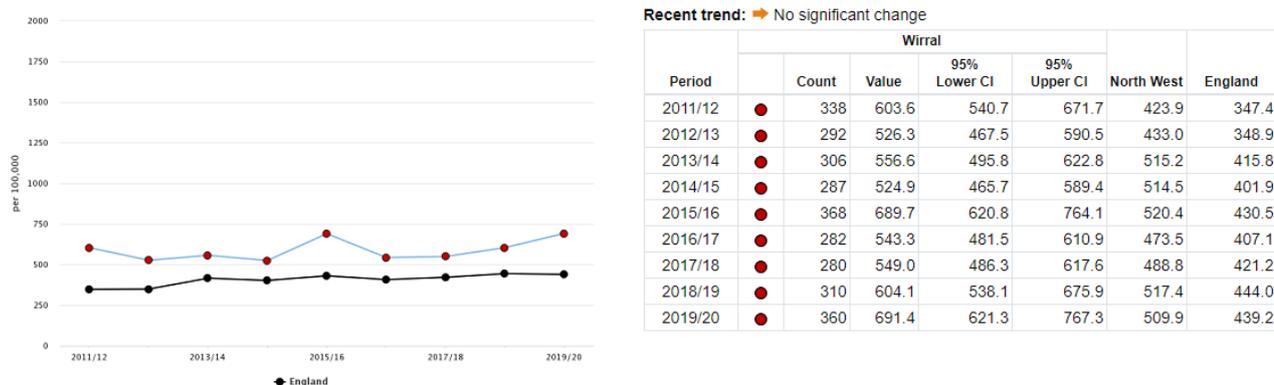
Source: [OHID - Ad-Hoc Child Immunisations Profile](#) (2021)

Note: Hexavalent (6-in-1) vaccinates against Diphtheria, Hepatitis B, Haemophilus Influenza B, Polio, Tetanus, Pertussis (Whooping Cough). This was formerly the pentavalent (5-in-1) before Hepatitis B was added in 2017

Young People

- Wirral's rate of hospital admissions for deliberate self-harm in those aged 10-24 years has always exceeded that seen nationally. However, Wirral's rate has increased over the last few years, and in 2019/20 culminated in the largest gap between Wirral and England since 2015/16 (**Figure 9**)
 - 2015/16 – 689.7 vs 430.5 respectively⁷
 - 2019/20 – 691.4 vs 439.2 respectively⁷
- This trend is also seen in hospital admissions due to substance misuse (15-24 years) with current rates (2019/20) for Wirral and England being 188.0 and 84.7 respectively⁷
- The detection rate of Chlamydia has decreased in young people (15-24 years), meaning it is now worse than England for the first time since records began; 1,256 per 100,000 compared to 1,408 per 100,000 respectively (2020). The pandemic may have had some impact on this, however the initial decrease in performance could be seen in 2019⁷

Figure 9: Trend in hospital admissions as a result of self-harm (10-24 years), Wirral, North-West (table only) & England, 2011/12 to 2019/20

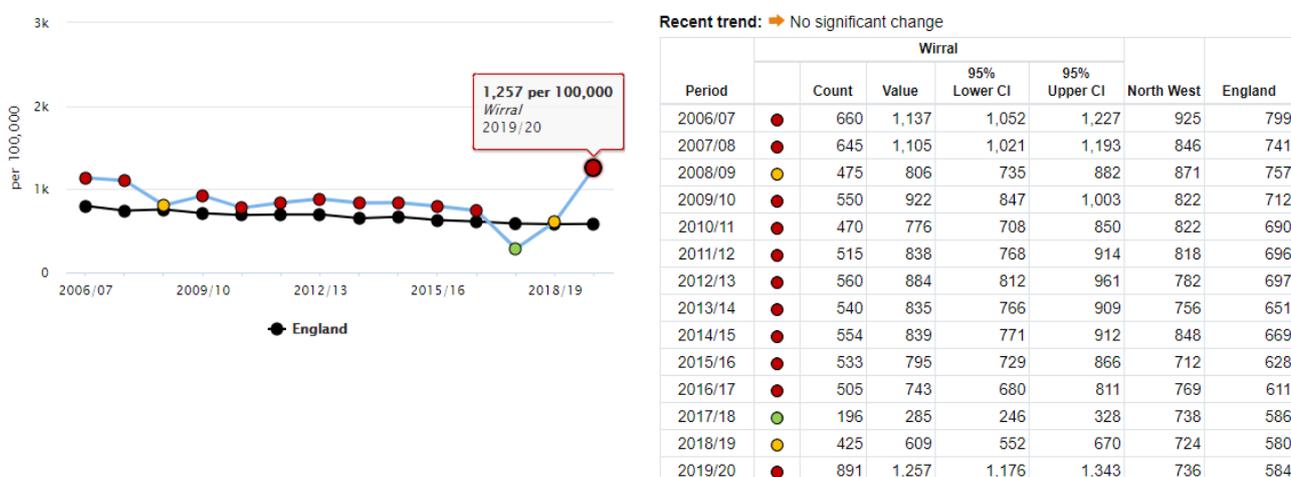


Source: [OHID - Child and Maternal Health](#) (2021)

Older People

- As discussed earlier in this section, the older population (65+) in Wirral is estimated to increase by approximately 28,800 (or 28.7%) by 2040, with those aged 90+ projected to increase by around 2,700 (or 73.9%) during the same period⁸
- It is estimated that around 38,000 people aged 65+ in Wirral have a Limiting Long-Term Illness in 2021. This is projected to increase to 41,000 (or 7.6%) and by 2025 over 50,000 by 2040 (a further increase of 23.2%)⁹
- As at 2019/20, around 51.5% of social care service users aged 65+ years in Wirral report they do not have as much social contact as they would like¹⁰
- Following a substantial increase in 2019/20, the proportion of older people permanently admitted into nursing care in Wirral is significantly higher compared to both the North-West and England (see **Figure 10**)¹⁰
- The rate of emergency admissions related to falls in those aged 65+ years decreased annually between 2016/17 and 2019/20. Despite this improvement, local admission rates are still significantly higher than England¹⁰

Figure 10: Trend in permanent admissions to residential and nursing care homes per 100,000 aged 65+, Wirral, North-West (table only) & England, 2006/07 to 2019/20



Source: [OHID - Productive Healthy Ageing Profile](#) (2021)

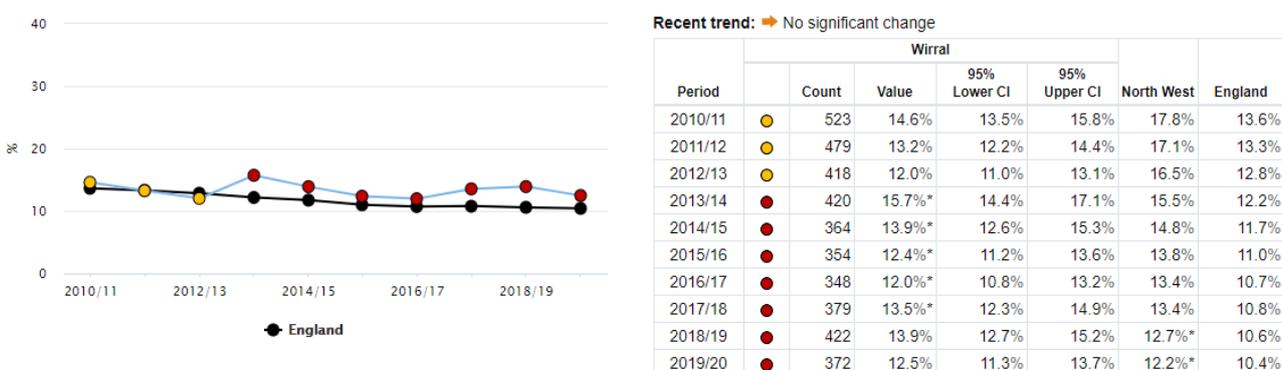
Polypharmacy

- Polypharmacy is a term used to describe patients on unique medicines and can be both, appropriate and problematic. Even when appropriate to treat multi-morbidities, patients are at an increased risk of falls due to the greater potential of experiencing side effects caused by the number of unique drugs being taken and/or the interaction between them¹¹
- In October 2021, the average number of unique medicines per patient* is 3.9. This average fluctuates tremendously when looking at different age bands; those aged 0-17 years having an average of 1.6 unique medicines compared to 5.6 in those aged 85+ years¹²
- An increased number of medications leads to the potential of more side effects and/or interactions. In October 2021, 7% of Wirral patients* were prescribed 10 or more unique medications. Again, this fluctuates greatly when looking at different age bands; 0.1% of those aged 0-17 years were prescribed 10+ medications, compared to 13% in those aged 85+ years¹²
 - *Patient(s): These figures relate to people registered with a Wirral GP practice and who were prescribed at least one medication in October 2021

Smoking

- Smoking status at time of delivery in Wirral has fluctuated since 2010/11 between 12.0% in 2012/13 and 15.7% in 2013/14; current figures show that in 2019/20 it was 12.5%; a decrease on 2018/19 but still higher than England (10.4%) (**Figure 11**)¹³
- It is estimated that around 10.7% of the Wirral population aged 18+ are current smokers; this has fallen by around 8% since 2015 estimates (18.9%)¹³
- Local estimates produced at Wirral ward level suggest that there are still substantial inequalities between wards seemingly linked to deprivation
 - For example, in Birkenhead & Tranmere, smoking prevalence is as high as 22.1%, compared to less deprived wards, such as Greasby, Frankby & Irby where smoking prevalence is 9.3%¹⁴
- Around 460 people die each year in Wirral from smoking related deaths (based on 2017-19 total of 1,386). This gives a rate of 214.6 per 100,000 people aged 35+ years, which, despite decreasing at a faster rate than seen nationally, remains significantly higher than England (202.2)¹³

Figure 11: Trend in smoking status at time of delivery, Wirral, North-West (table only) & England, 2006/07 to 2019/20

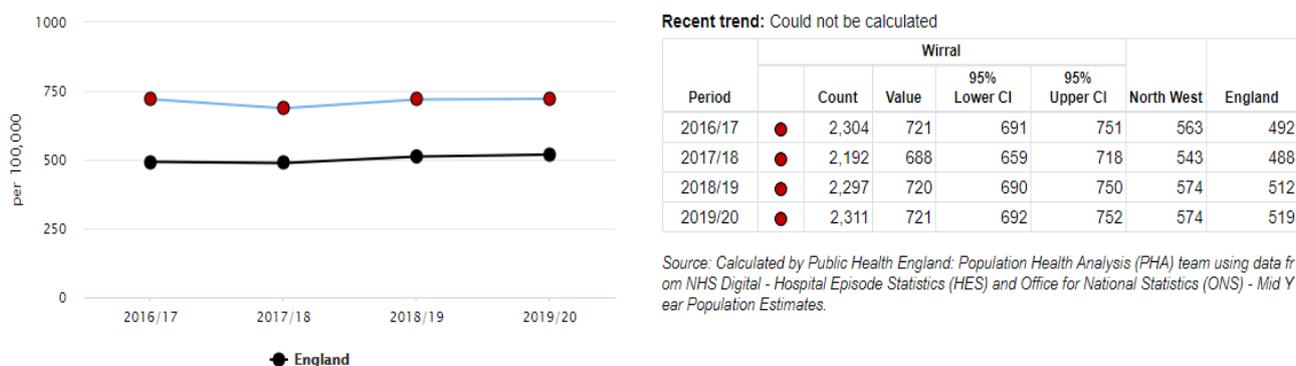


Source: [OHID - Local Tobacco Control Profiles](#) (2021)

Alcohol

- The number of adults in substance misuse services for alcohol only in 2020/21 was 802 in Wirral; 49.6% of these did not re-present within 6 months of completion compared to 35.9% in England¹⁵
- The rate of alcohol-related hospital admissions (where the main reason for admission was alcohol related) in 2019/20 was 721 per 100,000 in Wirral, compared to 519 in England (**Figure 12**)¹⁵
 - For the same period, the rate for Wirral males was 1,045 and for females was 432 (both rates greater than that seen in their England counterparts)¹⁵
- The directly standardised rate alcohol-related mortality in Wirral for 2019 was 47.5 per 100,000 compared to 35.7 in England¹⁵
 - For Wirral males this was 72.7 compared to the rate for females of 26.0 (both rates greater than that seen in their England counterparts)¹⁵

Figure 12: Trend in alcohol related hospital admissions (Narrow*), Wirral, North-West (table only) & England, 2016/17 to 2019/20



Source: [OHID - Local Alcohol Profiles for England](#), 2021

Note: The narrow methodology only includes those admissions where the main reason for admission was alcohol related

Drugs

- Between September 2020 and August 2021, there were 1,532 drug crime offences recorded by Merseyside Police; this equates to a rate of 4.7 drug crimes per 1,000 residents in Wirral in comparison to an England rate of 2.8¹⁶
- Reports from the National Drug Treatment Monitoring Service (NDTMS) for 2020/21 show there were 1,645 opiate users receiving treatment in Wirral's drug and alcohol treat services; 4.8% of these did not re-present within 6 months of completion compared to 4.7% in England¹⁷
- NDTMS also reports that there were 553 non-opiate users in treatment during the same period; 49.6% of these did not re-present within 6 months of completion compared to 33.6% in England¹⁷
- The latest available hospital admission data (2019/20) shows that Wirral had an overall drug-related admission rate of 80 per 100,000 population compared 31 in England¹⁸
 - For the same period, this rate was 81 for males and for females it was 79 (both rates higher than that seen in their England counterparts)¹⁸
- The age-standardised rate (see note for **Table 12**) for deaths due to drug misuse in Wirral is twice as high as that seen for England in 2018-20; 10.1 vs 5.0 respectively¹⁹

Table 12: Drug-related indicators, Wirral and England, multiple periods

Indicator	Period	Wirral	England
Drug crimes per 1,000 residents	Sep-20 to Aug-21	4.7	2.8
Successful completion of treatment (opiate users)	2020/21	4.8%	4.7%
Successful completion of treatment (non-opiate users)	2020/21	49.6%	33.6%
Drug-related hospital admissions per 100,000	2019/20	80	31
Age standardised drug-related mortality rate	2018-20	10.1	5.0

Source: Various - see above in-text references and [Appendix 12](#)

Note: Age-standardised mortality rates (ASMRs) allow for differences in the age structure of populations and therefore allow valid comparisons to be made between geographic areas, over time and between sexes

Immunisations

- Wirral's mortality rate from communicable disease (including flu) between 2017-2019 was 11.6 per 100,000 in comparison to 9.4 in England²⁰
 - For COVID-19 specific data, please see section below
- Since 2018/19 all early childhood immunisations in Wirral, such as the 6-in-1 and MMR vaccines, have experienced a steady decline and most are now under the 95% herd immunity target²¹
 - Further details of all vaccination can be found in the [Complete Routine Immunisation Schedule](#)
- School aged immunisations (mainly the HPV vaccine for females 12-13 years) have been impacted by the closure of schools during the COVID-19 pandemic. Prior to this however, uptake of the HPV vaccine was typically above that seen nationally²¹
- In contrast, the COVID-19 pandemic has seen a large increase in the uptake of the flu vaccine. Between 2019/20 and 2020/21 uptake increased for²¹:
 - those aged 2-3 years from 42.4% to 57.3%
 - at risk individuals from 48.4% to 56.5%
 - those aged 65+ years from 75.2% to 82.9%
- Vaccinations in pregnancy (flu and pertussis) remain consistent but require much improvement^{22,23}

Screening

- Screening of eligible pregnant women for communicable diseases by Wirral University Teaching Hospital NHS Foundation Trust (WUTHNFT) stood at 99.8% for HIV, Hepatitis B and Syphilis for 2020/21; this also matches uptake in England overall²⁵
- Wirral coverage of newborn bloodspot and hearing screening as well as physical examination stood at 97.0%, 99.0% and 97.5% respectively for 2019/21
 - England uptake stood at 97.0%, 98.6% and 97.0%²⁵
- Uptake of diabetic eye screening (a digital screening event where images are captured) stood at 58.2% in Wirral for 2020/21 compared to 67.7% in England²⁶
- Bowel screening uptake is currently 61.8% (2019/20); this is an increase on previous time periods and is now above the 60% optimal performance standard. However, this still leaves Wirral uptake lower than England overall (65.8%) and in the lowest performing 25% of local authorities in England (51.4% to 64.3%)²⁴
- Uptake for both breast and cervical cancer screening in 2019/20 fell short of the optimal performance standards (73.1% and 74.1% respectively vs 80.0% - the optimal performance standard)²⁴
 - cervical screening also fell short of the efficiency performance standard of 75.0% for the same period; this is also true when looking at the two age cohorts separately (25-49 and 50-64 years; 74.3% and 73.6% respectively)²⁴

Cancer

- In 2019, there were 2,292 cancerous tumours diagnosed in Wirral giving an age standardised incidence rate of 649.2 compared to 845.2 in England²⁷
- Prevalence of cancer in Wirral continues to increase with current figures (2019) stating that 4.0% of Wirral residents are currently living with cancer^{24,28}
 - Reasons for the continued increase are unclear but it should be noted that prevalence is made up of both cancer incidence and cancer survival
- The rate of cancers diagnosed as the result of an emergency in Wirral continues to decrease, however is still greater than that seen nationally; 100 per 100,000 compared to 85 in 2019/20²⁴
- In Wirral, the most common cancer(s) newly diagnosed in Wirral were breast cancer (for females) and prostate cancer for males; 174.1 and 177.9 per 100,000 respectively²⁷ (see **Table 13**)
 - As breast cancer can be detected in both males and females, this also has the highest rate for all Wirral residents with a 2019 rate of 93.4²⁷
- In 2017-19, the overall cancer mortality rate in Wirral was 280.2 per 100,000 compared to 260.0 in England²⁷
 - female cancer mortality in Wirral was 237.4 per 100,000 compared to 338.5 for males (both higher than their England counterparts)²⁷

Table 13: Incidence of the most common cancers by gender, Wirral CCG, 2019

Cancer Type	Female		Male	
	Number	ASR	Number	ASR
Breast	322	174.1	*	*
Prostate	-	-	291	177.9
Cancer of the Trachea, Bronchus and Lung	171	86.9	126	78.2
Colorectal	105	54.3	153	94.8
Oesophageal	19	9.8	29	47.0
Skin	56	30.2	37	37.0
Uterine	54	29.2	-	-
Stomach	*	*	17	27.0
Ovarian (including other unspecified parts of female genital organs)	50	26.8	-	-
Liver	39	24.1	*	9.0
Pancreatic	36	18.8	18	18.0
Non-Hodgkin's Lymphoma	34	17.7	37	22.9
Bladder	23	11.9	38	23.8
Leukaemia	21	10.8	40	25.0
Cervical	16	10.4	-	-
Kidney (not including Renal Pelvis)	19	9.8	45	28.0
Bone Marrow	12	6.1	22	13.5
All Cancers (excluding Non-Melanoma Skin Cancer)	1,108	585.6	1,184	733.4

Source: [CancerData](#) (2021)

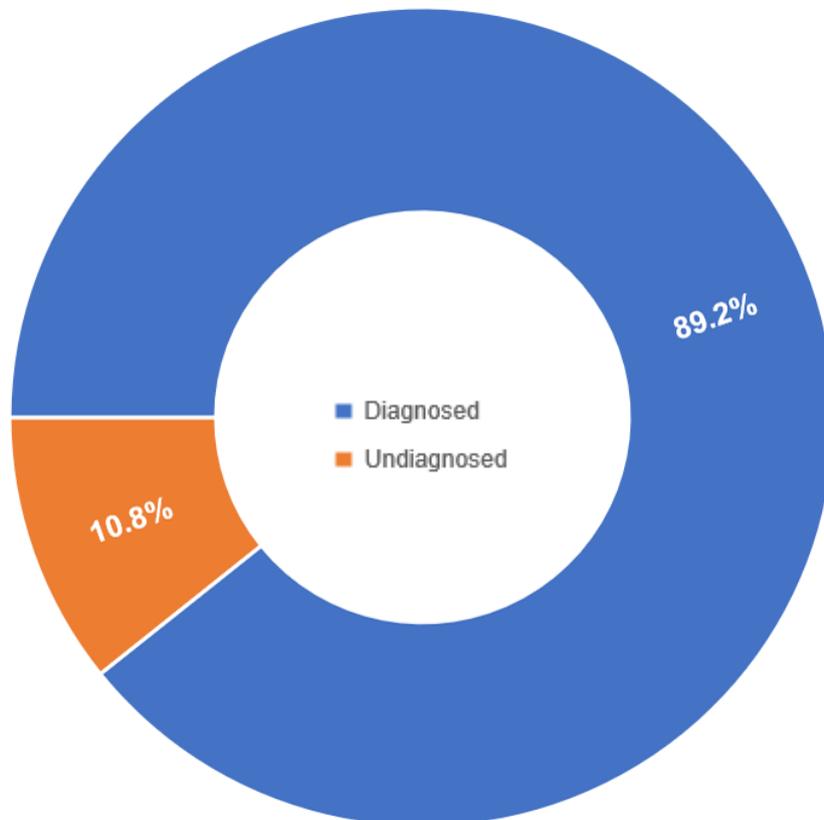
Cardiovascular Disease

- In 2020/21, the prevalence of recorded coronary heart disease (CHD) in Wirral stands at 3.8% (12,993 people); this is higher than the national prevalence (3.1%)²⁸
- For the same period, the prevalence of hypertension in Wirral stood at 16.1% (54,457), also higher than England (13.9%)²⁸
- However, estimates suggest there could be a further 22,333 undiagnosed hypertensive people in Wirral²⁹
- 2.3% of the Wirral population had experienced a stroke or TIA (Transient Ischaemic Attack) as at 2020/21 compared to 1.8% nationally²⁸
- Estimates for 2021 suggest that there are around 23,006 people aged 65+ years in Wirral with cardiovascular disease. This is projected to increase to 30,265 by 2040; an increase of 7,259 or 31.6%⁹

Diabetes

- In 2020/21, the Quality Outcomes Framework (QOF) register shows that the number of people in Wirral aged 17+ years who are diagnosed with diabetes (all types) is 20,242 (or 7.4% of the population aged 17+)²⁸; this is slightly higher than the England rate of 7.1% of people aged 17+ years²⁸
- Estimates suggest Wirral's diabetes prevalence is actually 8.9% which equates to 24,466 patients; an additional 2,442 people who are undiagnosed^{9,30} (See **Figure 13**)
 - This means that 89.2% of Wirral's diabetic population are diagnosed, with 10.2% (or 1 in 10 diabetics) are not yet diagnosed^{9,30}

Figure 13: Estimated proportion of Wirral's diabetic population (aged 17+) by diagnosis status, 2021



Source: [POPPI](#) and [PANSI](#) (2021)

Mental Health

- The Quality and Outcomes Framework (QOF) shows that recorded (lifetime) prevalence of depression is 19.4% in those aged 18+ years in Wirral (2020/21), which is higher than the national average of 12.3%²⁸
- Estimates suggests that those aged 65+ diagnosed with depression is around 6,200, projected to increase to approximately 8,000 by 2040; an increase of about 1,800 (or around 30%)⁹
- Estimates suggests that there are approximately 49,000 people in Wirral diagnosed with certain mental health disorders, which is projected to decrease to around 47,300 by 2040: a decrease of 1,700 (or 3.5%)^{9,30}
 - This estimate includes common mental disorders such as anxiety, depression, as well as other conditions such as borderline personality disorder, antisocial personality disorder and psychotic disorders
- QOF (2020/21) figures suggest that around 1.1% of Wirral's population (aged 18+) are diagnosed with an SMI (severe mental illness, inclusive of schizophrenia, bipolar affective disorder, and other psychoses)²⁸

Dementia

- The number of people recorded on GP Quality Outcomes Framework registers (QOF) as having dementia was 2,842 in 2020/21³¹
- The current dementia diagnosis rate for those aged 65+ years in Wirral is 59.8%, suggesting that 41.2% of older people (or approximately 1,800 older people) have dementia but are not officially diagnosed; this has decreased from the original figure of 72.8% in 2017³¹
- The rate of dementia-related emergency admissions in Wirral for 2019/20 (in those aged 65+ years) was 3,267 per 100,000, lower than England's rate of 3,517¹¹

Sexual & Reproductive Health

- Wirral historically had a high chlamydia detection rate; however, data from the last two years (2019 and 2020) showed a rapid decline. The detection rate in Wirral for 2018 was 3,472 per 100,000 people aged 15-24 years, compared to 1,990 in 2019 and 1,256 (the latter can be explained, in part, by the COVID-19 pandemic)³¹
 - Wirral also typically screened a higher proportion of 15–24-year-olds for chlamydia than England until the decline in recent years; with a peak of 35.3% in 2016, the proportion screened in 2019 and 2020 was 19.2% and 13.3% respectively (although again, the latter can be explained, in part, by the COVID-19 pandemic)³¹
- HIV testing coverage in Wirral is substantially lower than England (47.3% vs 64.8%), but Wirral has a similar late diagnosis figure (43.2% vs 43.1%)³¹
- Following a period of decline from 2010 onwards, the teenage conception (under 18s) in Wirral, reached its lowest in 2017 (since source data began in 1998). The two following years, however, saw small increases; 20.5 per 1,000 females aged 15-17 years (2017), 20.6 (2018) and 22.0 (2019)^{31,32}
 - The abortion rate for those aged under 18 years, was 8.8 per 1,000 females aged 15-17 years compared to 6.7 in England in 2020³¹
- The overall abortion rate in Wirral peaked in 2020 (since source records commenced) at 24.4 per 1,000 females aged 15-44 years in 2020; this was substantially higher than the England rate of 18.9 (2020)³¹

- The total prescribed Long-Acting Reversible Contraception (LARC) excluding injections rate in Wirral had seen an increase taking it higher than the national rate in 2019 (55.3 vs 50.8 per 1,000 females aged 15-44 years), however 2020 figures show that Wirral's rate declined more than the national rate (31.7 vs 34.6)³¹
 - Although the decline can, in part, be explained by the COVID-19 pandemic, the reason this was steeper in Wirral compared to England is less clear

Table 14: Sexual & Reproductive Health Indicators, Wirral & England

Indicator	Period	Wirral	England	Rate
Chlamydia detection rate	2020	1,256	1,408	per 100,000 aged 15-24
Chlamydia proportion screened	2020	13.3%	14.3%	%
HIV testing coverage	2019	47.3%	64.8%	%
HIV late diagnosis	2017-19	43.2%	43.1%	%
Under 18 conception rate	2019	22.0	15.7	per 1,000 females aged <18
Under 18 abortion rate	2020	8.8	6.7	per 1,000 females aged <18
Total abortion rate	2020	24.4	18.9	per 1,000 females aged 15-44
Total prescribed LARC (exc. Injections) rate	2020	31.7	34.6	per 1,000 females aged 15-44

Source: [PHE Fingertips Profiles, Ad-Hoc Sexual Health Indicators Profile](#) (2021)

Hospital Admissions

- Wirral's 2019/20 rate of emergency admissions for acute conditions that should not usually require hospital admissions is substantially higher than that seen nationally; 1,947.7 for Wirral compared to nationally 1,406.3 per 100,000 residents³³
 - Source records, beginning in 2003/04, show that this higher local rate has been the case historically³³.

Palliative Care

- The proportion of people recorded as requiring palliative/supportive care in Wirral continued to increase between 2018 and 2021; the latest three periods' figures being 0.72% (2018/19)³⁴ 0.76% (2019/20)³⁴ and 0.78% (2020/21)³⁴

Weight Management

- Excess weight is a risk factor currently linked to over 30 co-morbidities, such as cardiovascular disease, diabetes, and some cancers. In Wirral, levels of obesity continue to increase in both children and adults and were higher than the national rates in 2019/20³ as seen in **Table 15**

Table 15: Obesity prevalence by cohort, Wirral, North-West, England (2019/20)

Indicator	Wirral	North West	England
Excess weight in Reception aged children	24.4%	26.7%	23.0%
Excess weight in Year 6 aged children	35.3%	36.2%	35.2%
Excess weight in adults	69.3%	-	62.8%

Source: [Public Health Outcomes Framework](#) (2021)

Note: Adult obesity figures are not available for North-West. Excess weight includes obese and overweight

Antimicrobial Resistance (AMR)

- Antibiotic prescribing rates in Wirral were higher than the national average (in June 2020 and June 2021); England's 12 month rolling rate has decreased from 0.92 to 0.72 items per STAR-PU* compared to Wirral's reduction from 1.04 to 0.90; though this hides strong fluctuations on a month-by-month basis³⁵

** STAR-PU - Specific Therapeutic group Age-sex Related Prescribing Unit (a value reflective of age and sex of a population that allows valid comparison between populations with differing levels of need for medications)*

- Similarly, the proportion of broad-spectrum antibiotic items prescribed in Wirral was substantially higher than the national rate; as of June 2021, Wirral's proportion was 12.6% compared to 10.0% nationally; however, it should be noted that figures for both, Wirral, and England, have increased since June 2020 when the proportions were 10.5% and 8.6% respectively³⁵

Chronic Kidney Disease (CKD)

- Chronic kidney disease is related to cardiovascular disease (it typically occurs alongside diabetes mellitus and hypertension) and is when the kidneys do not work as well as they should. If left untreated, it can worsen over time
- The prevalence of CKD in Wirral remained stable at 5.0-5.1% between 2017/18 and 2020/21 (and as far back as 2012/13)^{36,28}
- CKD in England was 4.0% in 2020/21³⁶

Chronic Obstructive Pulmonary Disease (COPD)

- In 2019/20, emergency admissions for COPD in Wirral decreased to their lowest rate since 2010/11 but, despite closing the gap, Wirral remained significantly higher than England; 507 compared to 415 per 100,000 aged 35+ years¹⁰
- Prevalence of COPD in Wirral continues to increase slightly each year; in 2009/10 the prevalence was 2.2% and was 2.7 in 2020/21^{37,28}
 - this remained higher than national prevalence of 1.9% in 2020/21²⁸

Disability

- The number of adults in Wirral estimated to have some degree of hearing loss in 2021 was 6,949, with this figure projected to increase to 9,361 by 2040; an increase of 2,412 or 34.7%^{9,30}
- The number of adults in Wirral estimated to have severe hearing loss in 2021 was 64,555, with this figure projected to increase to 78,128 by 2040; an increase of 13,573 or 21.0%^{9,30}
- The number of adults in Wirral estimated to have a serious visual impairment in 2021 was 6,492, with this figure projected to increase to 8,805 by 2040; an increase of 2,313 or 35.6%^{9,30}
 - The number of those aged 65+ years with a registerable eye condition was estimated to be 2,176 in 2021, with this figure projected to increase to 3,251; an increase of 1,075 or 49.4%^{9,30}
- The number of adults in Wirral estimated to have a mobility impairment in 2021 was 24,455, with this figure projected to increase to 28,695 by 2040; an increase of 4,240 or 17.3%^{9,30}
- The number of adults in Wirral estimated to have a learning disability in 2021 was 5,999 with this figure projected to increase to 6,341 by 2040; an increase of 342 or 5.7%^{9,30}

COVID-19

- Wirral's first COVID-19 case was identified on 1st March 2020
- As of 31st December 2021, there have been over 62,000 cases in Wirral
- In addition to cases, ONS also report that Wirral had, as of 24th December 2021, recorded 1,087 COVID-related deaths
- Since the COVID-19 vaccination programme commenced in late 2020, 83.8% of the Wirral residents eligible have received 1 dose and 78.2% have had both doses
- More information around the COVID-19 epidemic, both locally and nationally can be found on the following websites:
 - [Risk & Outcomes of COVID-19 in Wirral: Update to June 2021](#)
 - **Error! Hyperlink reference not valid.**
 - [COVID-19 - Wirral Intelligence Service](#)
 - [UK Summary | Coronavirus \(COVID-19\) in the UK \(data.gov.uk\)](#)

Sources for this Part 2 section of the Pharmaceutical Needs Assessment are in [Appendix 12](#).

Populations with Protected characteristics

There is widespread evidence to demonstrate that some communities, such as people from minority ethnic groups and people from lesbian, gay, bisexual and transgender (LGBT) communities can experience worse health outcomes. Other groups, such as refugees and asylum seekers, disabled people and people experiencing homelessness, may face barriers to accessing health and social care services as well as support services to move into good employment; this can have an impact on their health and wellbeing.

Under the [Equality Act 2010](#) there are nine 'Protected Characteristic' groups. The numbers and main health issues facing each are detailed in this section. Whilst some of these groups are referred to in other parts of the pharmaceutical needs assessment, this section focusses on their particular health issue.

Protected Characteristic: Age

Table 16: Population and proportion by broad age band, Wirral, 2020

Age	Population (number / %)
Under 18 years	67,431 (20.8% of population)
18-64 years	185,616 (57.2% of population)
65-84 years	61,707 (19.0% of population)
85+ years	9,582 (3.0% of population)
Total population	324,336

Source: [Mid-2020 population estimates, ONS](#) (2021)

Note: [See more information in Population Structure and Projections](#)

Health Issues

Health issues can be greater amongst the very young and the very old.

For children:

- It is estimated that around 1 in 6 children aged 5-16 years have a mental health problem ([The Children's Society \(childrenssociety.org.uk\)](https://www.childrenssociety.org.uk), 2021)
- Breast feeding is well evidenced to provide health benefits for both mother and baby and to promote attachment, however young mothers are among the groups least likely to breast feed (UNICEF)
- Although the prevalence of smoking in children is decreasing, the almost two-fifths of adults who have ever smoked regularly started before the age of 16 ([Action on Smoking and Health \(ASH\)](#), 2019)
- Eight out of 10 obese teenagers go on to become obese adults ([Simmonds et al \(2016\)](#))
- Nationally, a young person is diagnosed with a Sexually Transmitted Infection (STI) every 4 minutes ([Gov.uk \(2018\)](#))
- As well as increasing financial costs to supporting agencies, alcohol misuse in families can harm children in the short term and later in life, with evidence suggesting patterns of behaviour such as substance misuse, domestic abuse and unemployment ([Gov.uk \(2021\)](#))
- [More information on the health issues that affect children locally in this document](#)

For older people (65+):

- Between 1990 and 2017, alcohol as an impact for disability adjusted life years (DALYs) worsened from 61st to 18th highest risk factor for those aged 70+ years and from 14th to 6th in those aged 50-69 years. (Institute of Health Metrics, 2020 via [Rao et al \(2021\)](#))
- They are less likely to take drugs, although older people currently in treatment for substances misuse are more likely to be opiate dependent and therefore may require longer and more complex treatment ([NHS Digital \(2018\)](#))
- A high proportion of people aged 65+ live alone and this percentage increases with age. This can lead to loneliness and social isolation, which are both risk factors for all-cause morbidity and mortality ([Fakoya et al \(2020\)](#))
- The proportion of the population with long-term conditions increases with age and is projected to increase with future cohorts of older people ([Kingston et al \(2018\)](#))
- Older people living with frailty are at a much higher risk of admissions to care homes and/or hospital, having a disability and death. It is estimated that around half of those aged 65+ years live with frailty; 35% mild, 12% moderate and 3% severe ([AgeUk.org.uk \(2019\)](#))
- Older people are more at risk from COVID-19 with rates of hospitalisation and mortality increasing exponentially with age ([Wirral Intelligence Service \(2021\)](#))
- Polypharmacy: Older people are more likely to be prescribed multiple medications putting them at increased risk of side effects and other health impacts ([Wirral Intelligence Service \(2015\)](#))
- [More information on the health issues that affect older people locally in this document](#)

Protected Characteristic: Sex

Table 17: Population and proportion by sex, Wirral, 2020

Sex	Population (number / %)
Female	167,221 (51.6%)
Male	157,115 (48.4%)

Source: [Mid-2020 population estimates, ONS](#) (2021)

Note: [See more information in Population Structure and Projections](#)

Health Issues

- Overall life expectancy, healthy life expectancy and life expectancy at 65 are lower for Wirral residents than the England average
 - See [Life Expectancy section](#) for more detail
- Men tend to use health services less than women and present later with diseases than women do. [Consumer research \(2009\) by the Department of Health and Social Care](#) (DHSC) into the use of pharmacies showed men aged 16 to 55 to be ‘avoiders’ i.e., they actively avoid going to pharmacies, feel uncomfortable in the pharmacy environment as it currently stands due to perceptions of the environment as feminised/for older people/lacking privacy and of customer service being indiscreet
- Parliamentary research undertaken in 2021 states that in many countries across the globe, men are likelier to face greater health risks but that this trend is not seen in the UK. It has been identified that the UK has the 12th largest female health gap globally
 - Women are more likely to experience a common mental health disorder ([DHSC \(2018\)](#))
 - Men with dementia are more likely to receive better medical treatment than women with dementia ([University College London \(2016\)](#))
 - Less is known about conditions that only affect women, e.g. it can take, on average, 7-8 years and 10+ GP appointments for a women to receive a diagnosis of endometriosis ([DHSC \(2021\)](#))
- Victims of domestic violence are at high risk of serious injury or death. The majority of victims are female; more than 80 women a year lose their lives to domestic homicide ([HM Government \(2020\)](#))
- Females in Wirral were more likely to test positive for COVID-19 than males; though this could be due to higher testing in females compared to male. However, males in Wirral had a higher rate of COVID-19 related deaths ([Wirral Intelligence Service \(2021\)](#))

Protected Characteristic: Disability

The definition of disability is consistent with the core definition of disability under the [Equality Act 2010](#). A person is considered to have a disability if they have a long-standing illness, disability or impairment which causes substantial difficulty with day-to-day activities. Some people classified as disabled and having rights under the [Equality Act 2010](#) are not captured by this definition, that is people with a long-standing illness or disability which is not currently affecting their day-to-day activities.

Wirral population

The [2011 Census](#) indicates 72,204 people in Wirral have a disability or long-term health condition that affects their day-to-day activities; this constituted 22.6% of Wirral’s population, higher than the North-West (19.8%) and England (17.2%).

The 2020/21 GP register showed there were 2,366 people with learning disability known to their general practice. This is a prevalence rate of 0.70%, compared to 0.56% in Cheshire & Merseyside, 0.57% NW and 0.53% England.

Data from the 2021 [GP Patient Survey](#) suggested that 60% of Wirral patients aged 16+ years had a long-term physical or mental health condition. Of those, 26% said it affected their daily life a lot, 39% said it affected them a little and 35% said it did not affect ability to carry out their day-to-day activities at all. This is based on a representative sample of Wirral patients aged 16+ years.

Health Issues

- There is a strong relationship between physical and mental ill health; being physically disabled can increase a person's chances of poor mental health
- People with a disability can have co-morbidity of disabling conditions
- People with learning disabilities are living longer and as a result, the number of older people with a learning disability is increasing. Despite the fact that people with learning disabilities are 58 times more likely to die before the age of 50 than the rest of the population, life expectancy for people with learning disabilities has increased over the last 70 years. Older people with a learning disability need more to remain active and healthy for as long as possible.
- Despite this, data from NHS Digital suggests people with learning disabilities still have a 4-5 times higher mortality rate than those without LD
- Recent data from [Office for Health Inequality & Disparities \(OHID, formerly PHE, 2018\)](#) suggests those with severe mental illness (SMI) have 3.7 times higher premature (under age 75 years) mortality rates compared to those without SMI; this is driven by higher mortality from liver disease, cardiovascular disease, cancers and respiratory disease.
- Another feature is lower physical health screening uptake rates amongst people with SMI; this includes screening for cancer ([OHID \(2018\)](#))
- Research by [Mencap](#) found that people with a learning disability are more likely to have worse health and are more likely to experience a number of health conditions
- Research has also suggested that people with a learning disability who contract COVID-19 are five times more likely to be hospitalised and eight times more likely to die ([BMJ \(2021\)](#)).

Protected Characteristic: Pregnancy and maternity

Wirral population

See [Births & Fertility](#) section

Health Issues

There are many common health problems that are associated with pregnancy. Some of the more common ones are:

- | | | |
|---|---------------------------------|--|
| • Backache | • Constipation | • Cramp |
| • Deep vein thrombosis | • Faintness | • Headaches |
| • High blood pressure and pre-eclampsia | • Incontinence | • Indigestion and heartburn |
| • Itching | • Leaking nipples | • Morning sickness and nausea |
| • Nosebleeds | • Urinating a lot | • Pelvic pain |
| • Piles (haemorrhoids) | • Skin and hair changes | • Sleeplessness |
| • Stretch marks | • Swollen ankles, feet, fingers | • Varicose veins |
| • Tiredness | • Vaginal discharge or bleeding | • Swollen and sore gums, which may bleed and increased susceptibility to tooth decay |

Recent research ([UKOSS, 2021](#)) has also indicated that pregnant women who are unvaccinated are more at risk of adverse impacts from COVID-19. Those hospitalised during the 'Delta' wave of cases being at greater risk of requiring respiratory support, of developing and of being admitted to the ICU.

Protected Characteristic: Race

Wirral population

See [Population Structure and Projections](#)

Health issues

Historic research shows that people from Black, Asian, and Minority Ethnic groups experience inequalities in health outcomes

- Ethnic differences in health are most marked in conditions such as Chronic Kidney Disease, Coronary Heart Disease, Diabetes and Hypertension ([LeDeR \(2019\)](#))
- Black and minority ethnic populations may face discrimination resulting from structural racism, which can reinforce inequalities through agencies such as housing or criminal justice and lead to negative impacts on people's lives ([The King's Fund \(2021\)](#))

With the COVID-19 pandemic highlighting this disparity between white and BAME populations, more research has been undertaken, including that by [The King's Fund](#).

This [report](#) also states that people from these communities experience inequalities in access to healthcare but that this picture is complex owing to the variation between and within different ethnic groups.

COVID-19 and BAME communities

The initial link between BAME communities and increased risk of COVID-19 was clear by July 2020. The resulting [report](#) by UKSHA (formerly PHE) states that BAME communities had higher diagnosis and mortality rates when compared to white communities. A plethora of research undertaken since this report confirms that this pattern has continued throughout the pandemic, for example, those funded by [UK Research & Innovation](#).

Traveller and gypsy communities

Travellers are a group considered to face some of the highest levels of health deprivation, with significantly lower life expectancy, higher infant mortality, and higher maternal mortality alongside mental health issues, substance misuse and diabetes. These issues are representative of various lifestyle factors alongside issues of poor education, lack of integration with mainstream support services and a lack of trust in such institutions.

Refugees and asylum seekers

Asylum seekers are one of the most vulnerable groups within society, with often complex health and social care needs. Within this group certain individuals who are more vulnerable still, including pregnant women, unaccompanied children, and people with significant mental ill health.

Whilst many asylum seekers arrive in relatively good physical health, some asylum seekers can have increased health needs relative to other migrants due to the situation they have left behind their journey to the UK and the impact of arriving in a new country without a support network.

Irregular or undocumented migrants, such as those who have failed to leave the UK once their asylum claim has been refused, or those who have been illegally trafficked, also have significant health needs and are largely hidden from health services. Some asylum seekers will have been subjected to torture, as well as witnessing the consequences of societal breakdown of their home country – with consequences for their mental health. Culturally, mental illness may not be expressed or may manifest as physical complaints. Stigma may also be attached to mental ill-health.

Furthermore, Western psychological concepts are not universally applicable to asylum seekers. Mental health problems such as depression and anxiety are common, but post-traumatic stress disorder is greatly underestimated and underdiagnosed and may be contested by healthcare professionals. Children are particularly neglected in this area.

Protected Characteristic: Religion and belief

Wirral population

Data from the [2011 Census \(Wirral Compendium of Statistics \(2021\)\)](#) for Wirral residents showed:

- Christian 70.4%
- Buddhist 0.3%
- Hindu 0.2%
- Jewish 0.1%
- Muslim 0.6%
- Sikh 0.1%
- Other religion 0.3%
- No religion 21.3%
- Religion not stated 6.8%

Health Issues

- Possible link with 'honour-based violence' which is a type of domestic violence which can occur in those communities where the honour concept is linked to the expected behaviours of families and individuals
- Female genital mutilation is related to cultural, religious, and social factors within families and communities although there is no direct link to any religion or faith. It is a practice that can result in serious health and psycho-sexual issues for affected women
- There is a possibility of hate crime related to religion and belief

Protected Characteristic: Sexual orientation

Wirral population

Data provided by Office for National Statistics suggests that the LGBTQ+ (lesbian, gay, bisexual, transgender, queer/questioning, and others) population aged 16+ years in Wirral is around 8,343 ([Children and Young People: Population and Demographics, 2021](#)).

The [GP Patient Survey for England](#) includes a question relating to sexual orientation. The survey suggested around 93% of Wirral CCG patients defined themselves as being heterosexual / straight, while 4% stated their sexual orientation as being either Gay/Lesbian (2%) or Bisexual (1%) or Other (1%); 3% preferred not to disclose their sexual orientation. In terms of Wirral's population aged 16+ years, 4% is around 10,500 people.

Health Issues

Attitudes toward the community may have an impact on some of their key health concerns around sexual and particularly mental health. A [Stonewall survey](#) found:

- Half of LGBT people (52%) said they have experienced depression in the last year
- One in eight LGBT people aged 18-24 (13%) said they have attempted to take their own life in the last year
- Almost half of trans people (46%) have thought about taking their own life in the last year, 31% of LGB people who are not trans said the same

- 41% of non-binary people said they harmed themselves in the last year compared to 20% of LGBT women and 12% of GBT men
- One in six LGBT people (16%) said they drank alcohol almost every day over the last year
- One in eight LGBT people aged 18-24 (13%) took drugs at least once a month
- One in eight LGBT people (13%) have experienced some form of unequal treatment from healthcare staff because they are LGBT
- Almost one in four LGBT people (23%) have witnessed discriminatory or negative remarks against LGBT people by healthcare staff. In the last year alone, 6% of LGBT people – including 20% of trans people – have witnessed these remarks
- One in twenty LGBT people (5%) have been pressured to access services to question or change their sexual orientation when accessing healthcare services.
- One in five LGBT people (19%) are not out to any healthcare professional about their sexual orientation when seeking general medical care. This number rises to 40% of bisexual men and 29% of bisexual women
- One in seven LGBT people (14%) have avoided treatment for fear of discrimination because they are LGBT

Protected Characteristic: Gender re-assignment

Wirral population

Currently there are no standard national sources of transgender statistics, nor is there standard data on the use of health services or referrals to gender identity clinics. However, [GIRES](#) (Gender Identity Research and Education Society) estimate that 0.6-1% of the population may experience gender dysphoria.

In the 2021 GP Patient Survey, 99% said their gender identity was the same as the sex they were registered at birth, less than 1% answered that their current gender identity was not the same at birth. In terms of the Wirral population aged 16+ years, 1% is approximately 2,600 people.

Health Issues

Research from [Stonewall](#) shows:

- Drugs and alcohol are processed by the liver, as are cross-sex hormones. Heavy use of alcohol and/or drugs whilst taking hormones may increase the risk of liver toxicity and liver damage
- Alcohol, drugs and tobacco and the use of hormone therapy can all increase cardiovascular risk. Taken together, they can also increase the risk already posed by hormone therapy
- Smoking can affect oestrogen levels, increasing the risk of osteoporosis and reducing the feminising effects of oestrogen medication
- Many transgender people struggle with body image and as a result can be reluctant to engage in physical activity
- Whether being transgender, non-binary or non-gender and any discomfort, a person may feel with their body, with the mismatch between their gender identity and the sex originally registered on their birth certificate, their place in society, or with their family and social relationships but it is not a mental illness. Gender dysphoria is the medical

term used to describe this discomfort. Transgender people are likely to suffer from mental ill health as a reaction to the discomfort they feel.

This is primarily driven by a sense of difference and not being accepted by society. If a transgender person wishes to transition and live in the gender role they identify with, they may also worry about damaging their relationships, losing their job, being a victim of hate crime and being discriminated against. The fear of such prejudice and discrimination, which can be real or imagined, can cause significant psychological distress.

Protected Characteristic: Marital status

Wirral Population

Data from the 2011 Census for Wirral showed:

- Single (never married or never registered a same-sex civil partnership): 33.9%
- Married: 44.6%
- In a registered same-sex civil partnership: 0.2%
- Separated (but still legally married or still legally in a same-sex civil partnership): 2.4%
- Divorced or formerly in a same-sex civil partnership which is now legally dissolved: 10.3%
- Widowed or surviving partner from a same-sex civil partnership: 8.5%

Health Issues

There is a vast amount of research into the correlation between marital status and health, many stating the benefits of relationships. However, research also suggests that people who cohabit (likely to be those who are married or in a civil partnership) are more likely to 'share' lifestyle factors, such as diet, smoking status and similar stresses. This can, of course, be beneficial if shared lifestyle factors include behaviours such as a healthy diet and exercise.

However, this can equally relate to poor habits such as smoking, excessive drinking and a poor diet. This, in turn, can lead to 'shared' health-related conditions, such as being overweight, hypertension and depression ([Jun et al, 2020](#)).

Pharmaceutical Needs Assessment

Part 3

Meeting the Pharmaceutical Need Summary and Conclusions

Part 3: Meeting the pharmaceutical need

Overview of pharmaceutical service provision

Community Pharmacy provision and contractors

These can be individuals who independently own one or two pharmacies, larger independent chains or multi-national companies who may own many hundreds of pharmacies UK wide. Every pharmacy has to have a qualified pharmacist available throughout all of its contractual hours, to ensure services are available to patients.

In general, pharmacy services are provided to patients free of charge, without an appointment, on a “walk-in” basis apart from prescriptions which are levied. Some prescriptions are exempt and where a patient pays for a prescription, then pharmacies collect the fees on behalf of NHS England (NHSE). Some private services including private prescriptions would incur patient charges as they are outside of the standard NHS contract. Pharmacists dispense medicines and appliances as requested by “prescribers” via both NHS and private prescriptions.

Essential services and dispensing doctors

Essential services include:

- dispensing medicines and appliances
- repeat dispensing
- public health promotion of healthy lifestyles
- disposal of unwanted medicines
- signposting
- support for self-care
- discharge medicines service and
- clinical governance

Distance Selling Pharmacies

In Wirral there are currently no distance selling/ internet pharmacies, however Wirral residents can access any distance selling pharmacy. At present (February 2022) there are no applications with NHSE for such a service to be based on Wirral.

Dispensing Doctors/Practices

These services consist of dispensing for those patients on their “dispensing list” who live in more remote rural areas. There are strict regulations which stipulate when and to whom doctors can dispense. Wirral does not currently have any dispensing Doctors/Practices.

Appliance Contractors

Appliance Contractors cannot supply medicines but are able to supply appliance products such as dressings, stoma bags, catheters etc. Currently Wirral does not have an appliance contractor physically located within its area, but patients can access services from appliance contractors registered in other areas. Patients request a prescription from the GP for the appliances they require, and this can be automatically sent to the appliance contractor and the goods delivered to the patient. Alternatively, patients have the choice of taking the prescription to their community pharmacy to have the appliances supplied.

Local Pharmaceutical Services (LPS)

NHS England and NHS Improvement does not hold signed contracts with the majority of pharmacies. Instead, pharmacies provide services under a contractual framework and the terms of service are set out in the 2013 regulations. The one exception to this rule is local pharmaceutical services. A local pharmaceutical services contract allows NHS England and NHS Improvement to commission services that are tailored to meet specific local requirements. It provides flexibility to include within a locally negotiated contract a broader or narrower range of services (including services not traditionally associated with pharmacy) than is possible under national pharmacy arrangements set out in the 2013 regulations. The contract must, however, include an element of dispensing.

There are currently no LPS contracts in Wirral Please note that the term local pharmaceutical services have a specific meaning in the 2013 regulations. It must not be used to describe pharmaceutical services that are provided locally ([see sections 2.10 and 2.14 of recent national guidance](#)).

Acute Hospital Pharmacy Services

There is one Acute Hospital Trust within Wirral's catchment area, namely [Wirral University Teaching Hospital NHS Foundation Trust](#).

The next nearest providers are [Countess of Chester Hospital NHS Foundation Trust](#) and [Royal Liverpool and Broadgreen University Hospitals NHS Trust](#). Hospital Trusts have their own [Pharmacy Departments](#) whose main responsibility is to dispense medications for use on the hospital wards for in patients and during the Outpatient clinics.

The Clatterbridge Cancer Centre NHS Foundation Trust (CCC)

Specialist cancer care and any associated services are provided to patients from all over the UK and overseas, as well as the catchment areas of Merseyside, Cheshire, North Wales, the Isle of Man and parts of Lancashire, by [Clatterbridge Cancer Centre NHS Foundation Trust \(CCC\)](#).

At the Clatterbridge site, PharmaC, a dispensing pharmacy, provide services across the site and are able to dispense private prescriptions, provide Service Level Agreements with CCC to supply CCC patients with specialist cancer dispensing services and can also be commissioned to deliver locally commissioned services such as smoking cessation. NHS England does not contract them to deliver NHS pharmacy services.

Mental Health Pharmacy Services

The population of Wirral is served by the [Cheshire and Wirral Partnership NHS Foundation Trust](#) providing mental health services, learning disability services and substance misuse services across Cheshire and Wirral. They employ pharmacists to provide clinical advice within their specialist areas and they also commission a "dispensing service" from an approved provider of services in order to dispense the necessary medications for their patients at the various clinics across the borough. This is a private arrangement between the Trust and provider and not part of the NHS Pharmaceutical Services.

GP Out of Hours Services, Walk-In Centres and Minor Injury and Illness Services

[Wirral Community Health and Care NHS Foundation Trust](#) currently provide an out of hours service that offers telephone advice, home visits when deemed clinically necessary and face-to-face consultations at three sites across Wirral (Victoria Central Hospital, Arrowe Park and Eastham Clinic). These sites also provide both walk in services and bookable appointments. Further walk in and bookable appointments are available at the Minor Injury and Illness Service at Birkenhead Medical Building.

During normal pharmacy opening hours, patients attending these sites who subsequently require a medicine to be dispensed are provided with a prescription to take to a local Community Pharmacy. Then during late evenings and weekends, where pharmacy services may be more limited, patients are provided (where necessary) with pre-packaged short courses of medication directly.

The GP Out of Hours service operates a limited formulary that provides medications needed for immediate, acute use e.g., courses of antibiotics or short-term pain relief.

Bordering Services/Neighbouring Providers

The population of Wirral can access services from pharmaceutical providers not located within the Local Authority's own boundary. When officers are assessing pharmacy contract applications or making commissioning decisions then the accessibility of services close to the borders should be considered.

For further information on such services please refer to the relevant neighbouring Health and Wellbeing Boards Pharmaceutical Needs Assessment.

Quality Standards for Pharmaceutical Service Providers

NHS England (NHSE) requires all pharmaceutical service providers to meet the high standards expected by patients and the public. NHSE local offices have responsibility for monitoring the provision of Essential and Advanced Services. Arrangements for monitoring locally commissioned services may be set out in local contracts or Service Level Agreements. NHS England's local offices use the Community Pharmacy Assurance Framework (CPAF) to monitor pharmacy contractors' compliance with the terms of the community pharmacy contractual framework (CPCF).

Community Pharmacy Assurance Framework (CPAF)

The Community Pharmacy Assurance Framework was developed by NHS Primary Care Commissioning as a toolkit to assist Primary Care Trusts in assessing compliance and quality under the Community Pharmacy Contractual Framework (CPCF).

The community pharmacy contract assurance process follows a structured sequence of events including:

- A rolling programme of pre-arranged visits to pharmacies for observation of processes and procedures and a detailed interview with the pharmacist in charge and support staff
- Self-assessment declarations
- Scrutiny of payment submission processes
- Scrutiny of internal processes for confidential data management
- Recommendations for service development or improvement
- Structured action plan with set timescales for completion
- In addition to the structured process outlined above, NHSE will also take account of the findings from the annual community pharmacy patient questionnaire that is undertaken by the pharmacy contractor as well as any patient complaints relevant to pharmacy services.

In cases where the professional standards of an individual pharmacist are found to fall below the expected level, NHSE will work with the relevant professional regulatory body such as the General Pharmaceutical Council to ensure appropriate steps are taken to protect the public.

Current provision of services

Current provision of services

This section describes the current provision of pharmaceutical services to the population of Wirral using a variety of data sources to benchmark our services against external comparators and internally across constituencies. The data and benchmarking presented here is drawn from the following sources:

- NHS Digital <https://digital.nhs.uk/>
- NHS Business Services Authority <https://www.nhsbsa.nhs.uk/>
- Wirral Council through Wirral intelligence Service and Public Health <https://www.wirralintelligenceservice.org/>
- Wirral Clinical Commissioning Group
- Community Pharmacy and Resident Survey in 2021

Comparing Pharmacy distribution within North-West Health Systems

The location of pharmacies is influenced by the population density, the proximity to GP practices, to the location of primary and secondary shopping areas and major transport routes.

There are two benchmarking measures that we can use to assess the distribution of pharmacies at a locality level in order to understand the relative access for our population, these are:

- pharmacies in relation to population size
- average prescription volumes

The combination of these two measures provides a basis for assessing the adequacy of distribution of pharmacies. As **Table 18** shows that Wirral has comparable numbers of pharmacies per 100,000 populations to other health systems in the North-West. This supports the assessment that Wirral has sufficient service overall coverage. The average number of prescription items per pharmacy is also a useful measure of demand and distribution. Wirral pharmacies dispense similar prescriptions to other pharmacies in the North-West. This suggests that pharmacy providers across Wirral do not have capacity issues plus reflecting upon the pharmacy contractor survey, there is willingness and capacity to absorb additional work as our population changes. The combination of these two measures also provides a basis for assessing the adequacy of distribution of pharmacies within Wirral.

Table 18: Wirral Pharmacy data and other regional Health Partnerships, 2020/21

Area	Number of Community Pharmacies	Pharmacies per 100,000 residents	% Independent Contractors	Average monthly items per pharmacy	Average NMS* per pharmacy	Average MUR** per pharmacy
Wirral	84	26	35.2%	7,597	84	85
Healthier Lancashire & South Cumbria STP	426	25	35.2%	7,133	107	81
Greater Manchester HSC Partnership STP	699	24	38.3%	7,169	115	80
Cheshire & Merseyside STP	626	25	32.7%	7,408	95	79
North West	1,751	25	35.6%	7,246	106	80
England	11,636	21	40.4%	7,283	98	80

Source: [General Pharmaceutical Services in England 2015/16 - 2020/21 | NHSBSA](#) and Wirral Intelligence Service (2022)

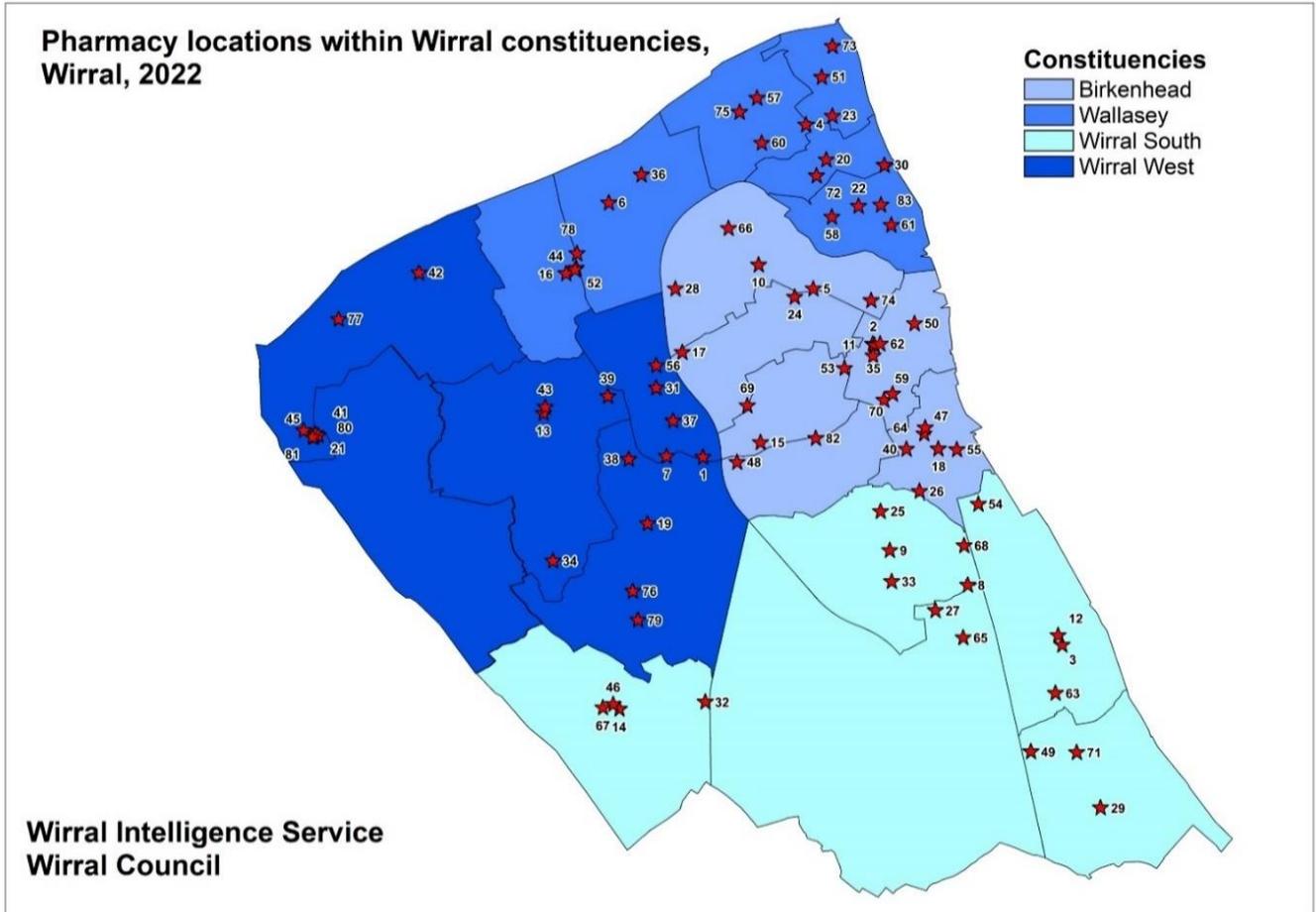
Note: *New Medicine Service, **Medicine Use Review - now decommissioned and replaced New Medicine Service
Multiple sources used to provide this data due to changes in data availability, further details on request. Data used in the table is for the period April 2020 to March 2021. Sustainability and Transformation Partnership (STPs) will become Health & Care Partnerships (HCPs) during 2022.

Geographic Provision

Constituency Provision

For the purposes of this PNA the pharmacies are being considered at Wirral Constituency level. Wirral's wards are split into four constituency boundaries, below.

Map 5: Distribution of Community Pharmacies by Wirral Constituency, 2022



Source: Wirral Intelligence Service (2022)

Note: For all pharmacy maps see [Appendix One for key/Legend to pharmacy names](#), [Appendix Six](#) and [Appendix Nine for opening times](#).

Distribution of pharmacies

As **Map 5** presents, there are 83 pharmacies operating across Wirral by a mixture of independent and multiple pharmacy owners and include a total of fifteen * outlets/contractors providing 'up to' or 'at 100 hours' pharmacies. They are spread as follows:

- **25 Pharmacies in Birkenhead** with 3 providing extended hours or 100 hours contracts*
- **20 Pharmacies in Wallasey**, with 2 providing extended hours or 100 hours contracts*
- **18 Pharmacies in Wirral South**, with 4 providing extended hours or 100 hours contracts*
- **20 Pharmacies in Wirral West**, with 6 providing extended hours or 100 hours contracts*

Table 19 provides those Wirral Wards found within each of the four constituencies with pharmacy characteristics that have in turn been compared across each area.

Table 19: Pharmacy Characteristics across Wirral Constituencies 2020-2021

Constituency	Ward	Pharmacies	Population (area)	Population / pharmacy	Pharmacy / 100,000 residents	Average items dispensed / month for residents (2020/21)	Items / resident per month (2020/21)
Birkenhead	Bidston & St James	25	90,704	3,628.2	27.6	184,380	2.0
	Birkenhead & Tranmere						
	Cloughton						
	Oxton						
	Prenton						
	Rock Ferry						
Wallasey	Leasowe & Moreton East	20	90,559	4,528.0	22.1	151,715	1.7
	Liscard						
	Moreton West & Saughall						
	Massie						
	New Brighton						
	Seacombe						
Wallasey							
Wirral South	Bebington	18	73,403	4,077.9	24.5	156,295	2.1
	Bromborough						
	Clatterbridge						
	Eastham						
	Heswall						
Wirral West	Greasby Frankby & Irby	20	69,670	3,483.5	28.7	124,850	1.8
	Hoylake & Meols						
	Pensby & Thingwall						
	Upton						
	West Kirby & Thurstaston						
Wirral		83	324,336	3,907.7	25.6	617,239	1.9
England		11,219	56,550,138	5,040.6	19.8	92,999,762	1.6

Source: Wirral Intelligence Service (2022) using [NHSBSA \(2021\)](#)

Note: Data for this table is for the period November 2020 to October 2021

Overview

As seen in **Table 19** above, Wirral has 83 Pharmacies supporting a population of 324,336 (total estimated resident population) which equates to approximately one pharmacy for every 3,908 residents. The average pharmacy per population numbers for England is 5,041 population per pharmacy.

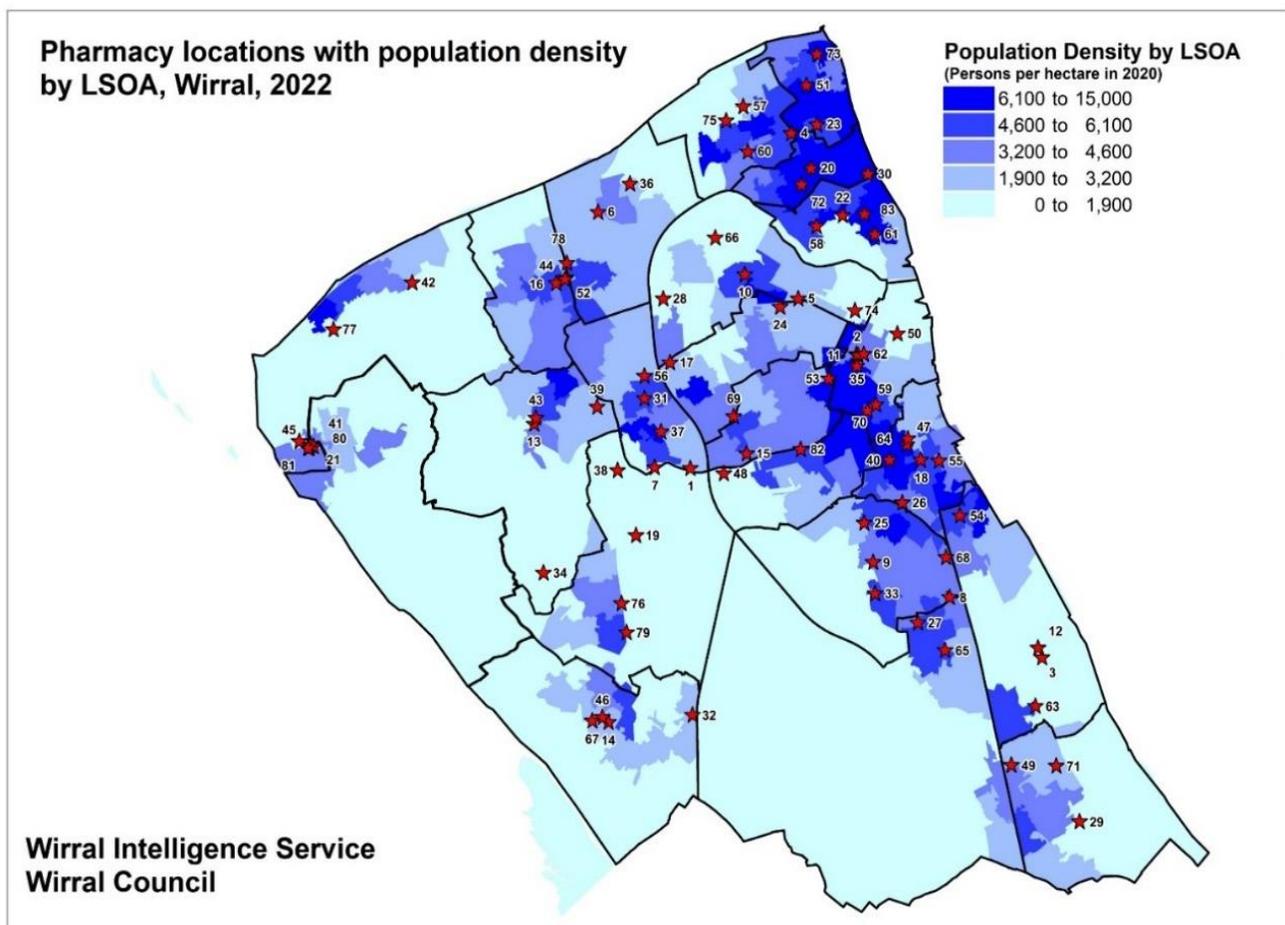
In terms of coverage across the borough when compared to England, all four constituencies are considerably better than the England average for pharmacies per population. As previously stated, England average is 5,041 people per pharmacy.

The closest to this figure, yet still considerably better than England, is Wallasey at 4,528 people per pharmacy with Birkenhead even lower (which is better) at 3,628 residents per pharmacy, Wirral South at 4,077, Wirral West at 3,483. Wirral's overall average at 3,908 residents per pharmacy.

Equally when looking at number of pharmacies per 100,000 people, as a standard comparative approach, and comparing again against England, then all four constituencies are very well served. England overall has 19.8 pharmacies per 100,000 residents and Wirral overall improves on this figure with 25.6 per 100,000 people and this is then seen at constituency level with Birkenhead at 27.6, Wallasey at 22.1, Wirral South 24.5 and Wirral West at 28.7 and all higher/better than the England average.

Map 6 below presents the geographic coverage of the pharmacy provision for Wirral. As the map highlights the pharmacy contractor venues are situated in the main in areas of high population density.

Map 6: Distribution of all 83 community pharmacies in Wirral against population density



Source: Wirral Intelligence Service (2022)

Note: For all pharmacy maps see [Appendix One for key/Legend to pharmacy names](#), [Appendix Six](#) and [Appendix Nine for opening times](#).

Considering the information in this section it presents a picture that the area meets existing and known future needs of the resident Wirral population for pharmacy provision through a combination of actual number of pharmacies (compared to England by population served and per 100,000 population) with the geographical coverage of pharmacies being concentrated in areas most densely populated.

This considered alongside equitable average number of prescription items per pharmacy, dispensing similar prescriptions than other pharmacies in the North-West and expressed interest of capacity from Wirral Pharmacy contractors (survey results have 72% with available capacity and 26% with capacity with minor changes), suggests that in Wirral there is no lack of capacity in our community pharmacy network to absorb additional work if, or as, the population changes.

Supplementary statements and pharmacy consolidations (2018-2021)

Since 2016 pharmacy businesses have been able to apply to consolidate the services provided on two or more sites onto a single site. If the application is granted and pharmacy premises are removed from the relevant pharmaceutical list, this means that the HWBB does not consider that a gap in service provision is created. Consequently, and since legislation changed, Wirral Health and Wellbeing Board (HWBB) has published supplementary statements presented alongside the PNA recording the view that no gap is created. **Table 20** below details each of the consolidations and site closures that have been deemed no gap and a supplementary statement previously published since 2018.

Table 20: Wirral Pharmacy consolidations/closures since 2018 to date

URN	Pharmacy (Closed)	Pharmacy (Consolidated site or closure)	Constituency	When
43	Rowlands, 53 Christchurch, Oxton	(Consolidation) Rowlands, Balls Road, Birkenhead	Birkenhead	Sept 2018
55	The Hub (Thingwall Pharmacy)	(Closure)	Wirral West	Feb 2020
59	Boots Pharmacy*, 506 Pensby Road	(Closure and relocation)	Wirral West	Feb 2020
66	Boots Pharmacy, 23 Arrowe Park Road	(Closure)	Wirral West	June 2020
67	Boots, Liscard Village	(Consolidation) Boots, Liscard Way	Wallasey	May 2020
68	Rowlands, Princes Pavement	(Closure)	Birkenhead	July 2020
69	Boots, The Rake, Bromborough	(Closure)	Wirral South	July 2020
70 (c)	The Hub (St Catherines Pharmacy)	(Closure)	Birkenhead	March 2021
70 (d)	Rowlands**, Greenway Road	(Closure and relocation)	Birkenhead	March 2021
79	Upton Road Pharmacy, Upton Road, Claughton	(Closure)	Birkenhead	April 2021
80	Rowlands, Bebington Rd, New Ferry	(Consolidation) Rowlands, Parkfield Medical Centre, New Ferry	Wirral South	July 2021

Source: [Wirral Intelligence Service website](#) (2021)

Note: * Boots began providing pharmaceutical services at Warren Medical Centre on site of former Thingwall Pharmacy (59)

** Rowlands began providing pharmaceutical services at St Catherines Pharmacy on site of former The Hub @ St. Catherines Pharmacy (70(d))

URN - relates to Completed Supplementary Statements undertaken between March 2018 to date at

<https://www.wirralintelligenceservice.org/jsna/wirral-pharmaceutical-needs-assessment/>

As part of this process to produce this new revised Pharmaceutical Needs Assessment, then the HWBB has considered again the potential for any current geographical gaps in the location of premises related to the previous agreed consolidations and closures.

The HWBB are aware that the previous consolidations did not previously create a gap and supplementary statements were published at the time to this effect.

Given the work to produce this report and gathering of local evidence and information then it is considered that there have not been other changes in the locality to alter this view and it continues to be that there are no gaps in terms of previous completed consolidations for Wirral Health and Wellbeing Board.

Pharmacy Opening Hours

A pharmacy normally has 40 core contractual hours (or 100 for those that have opened under the former exemption from the control of entry test), which cannot be amended without the consent of NHS England (NHSE), together with supplementary hours, which are all the additional opening hours, and which can be amended by the pharmacy subject to giving three months' notice (or less if NHSE consents).

A pharmacy may also have more than 40 core hours where it has made an application based on that higher number, and NHSE has agreed that application, and in this case, the pharmacy cannot amend these hours without the consent of NHSE.

There is also a provision which allows a pharmacy to apply to open for less than 40 hours, but if NHSE does grant such an application, it can specify which opening hours the pharmacy must open.

In terms of the type of Community Pharmacies in Wirral there are:

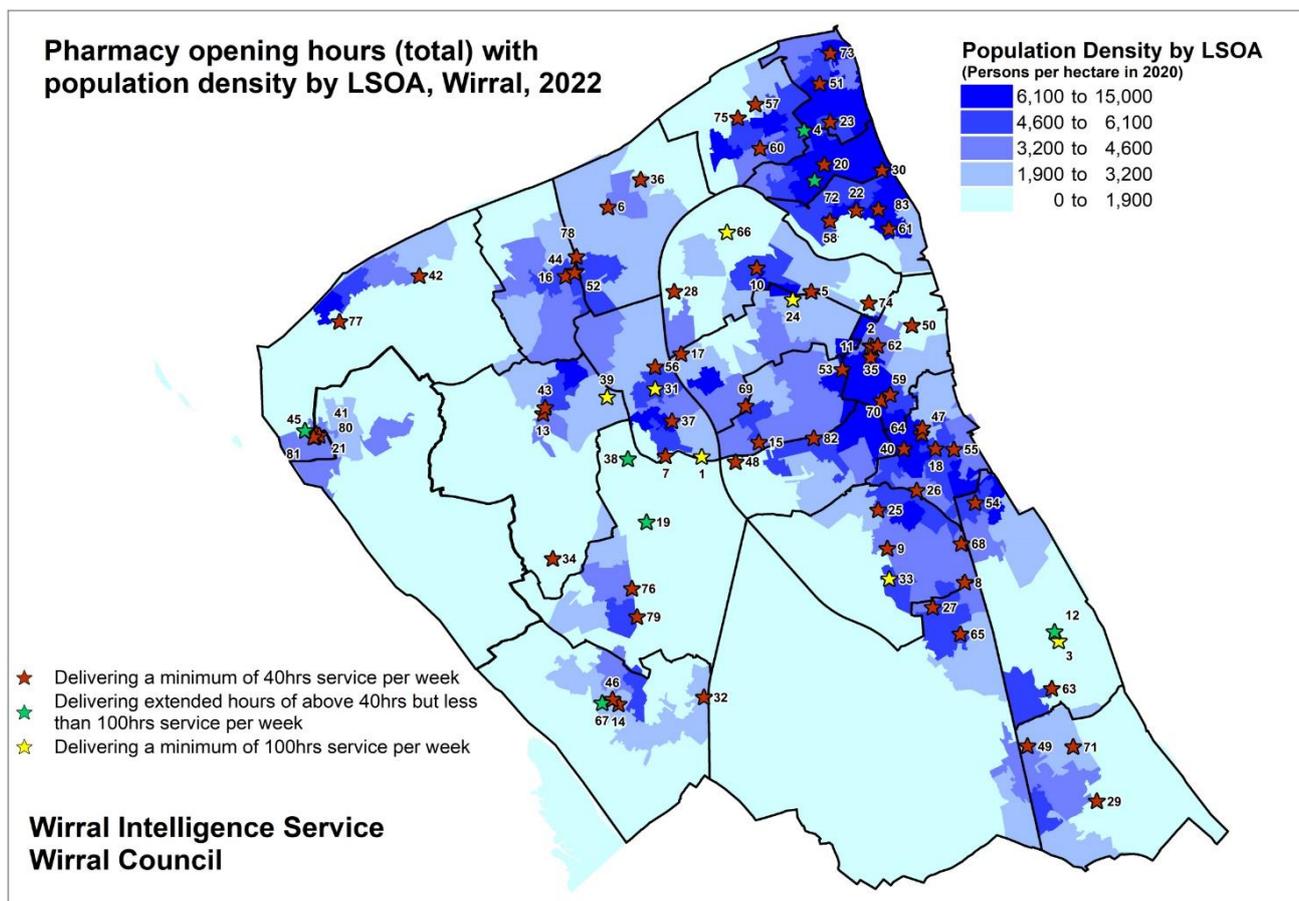
- 83 (100.0%) - delivering a minimum of 40 hours service per week

Of the 83 we have:

- 68 (81.9%) – delivering between 40-hour and 56.5-hour opening hours
- 7 (8.4%) - delivering extended hours up to a 100-hours per week
- 8 (9.6%) - delivering a minimum of 100 hours service per week
- 0 (0.0%) - currently providing services via the internet as “distance selling”

In **Map 7** below it presents the distribution of these various contract hours across Wirral.

Map 7: Pharmacy opening hours (total) with population density by Lower Super Output Area (LSOA), Wirral, 2022



Source: Wirral Intelligence Service (2022)

Note - Pharmacies by population demographics

The population density figures used in the map were sourced from Office for National Statistics publication “Lower Super Output Area Population Density (National Statistics)” published in September 2021. For all pharmacy maps see [Appendix One for key/Legend to pharmacy names](#), [Appendix Six](#) and [Appendix Nine for opening times](#).

In **Table 21** below presents the split on contract hours for 40-hour contracts, extended hours and minimum 100-hour contracts by constituency.

Table 21: Pharmacy Contract hours by Wirral Constituencies, 2021

Constituency	40-hour		Extended Hours*		100-hour contracts	
	Number	%	Number	%	Number	%
Birkenhead	22	32.3	0	0.0	3	37.5
Wallasey	18	26.5	2	28.6	0	0.0
Wirral South	14	20.6	2	28.6	2	25.0
Wirral West	14	20.6	3	42.8	3	37.5
Total	68	100.0	7	100.0	8	100.0

Source: Wirral Intelligence Service (2022)

* Definition of extended hours is not published - in consultation with CPCW and NHSE it was agreed that extended hours would be where a pharmacy was open beyond normal day, or after 7pm and their total hours in excess of 60 per week

This **Table 21** (above) shows that 8 of 83 pharmacies (10.8%) are providing 100 hours (or more) of opening hours each week, with a further 7 pharmacies providing extended hours contracts (above 60 hours), meaning 15 of 83 Wirral Pharmacies (over 18%) have greater than 60 hours of opening. Also, there are approximately 61 pharmacies providing more than minimum 40-hours contractual opening times.

This often extends beyond a general 9am to 5pm daytime service, into the early evening and for some opening Saturdays and/or Sundays* ([See Appendix Nine](#) for opening/closing and total opening hours).

Opening hours of community pharmacies adapt to the demands of the local population and are generally influenced by the opening hours of GP services.

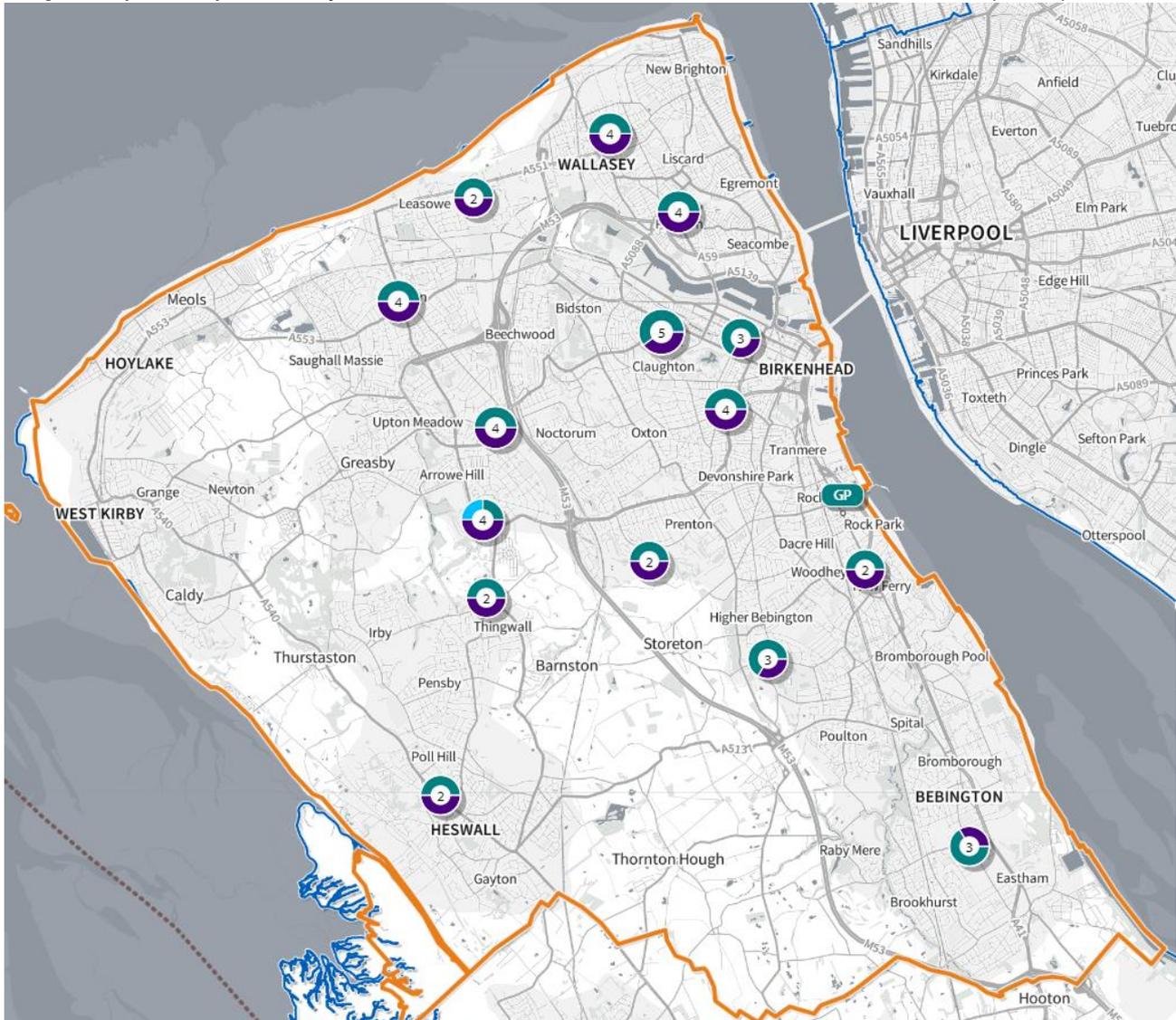
The mapping exercise, seen in **Map 7** and **Table 21** above, was completed by comparing pharmacies delivering a minimum of 40-hour contracts, those delivering extended hours up to 100 hours and those delivering a minimum of 100-hour contracts and then overlaid against population density.

From that analysis it was concluded that pharmacy opening hours across Wirral are satisfactory. There is wide access throughout the week and sufficient coverage in the evening, and generally at weekends. This is through pharmacies located in supermarkets and those working to 100-hour contracts or to extended hours contracts. This situation will be kept under review.

Co-located Pharmacy and GP surgery and/or Medical/Health Centre

Wirral has 23 pharmacies situated in 26 GP practices or related sites as shown in **Map 8** below.

Map 8: Specific pharmacy and GP/Health Centre co-locations across Wirral (2022)



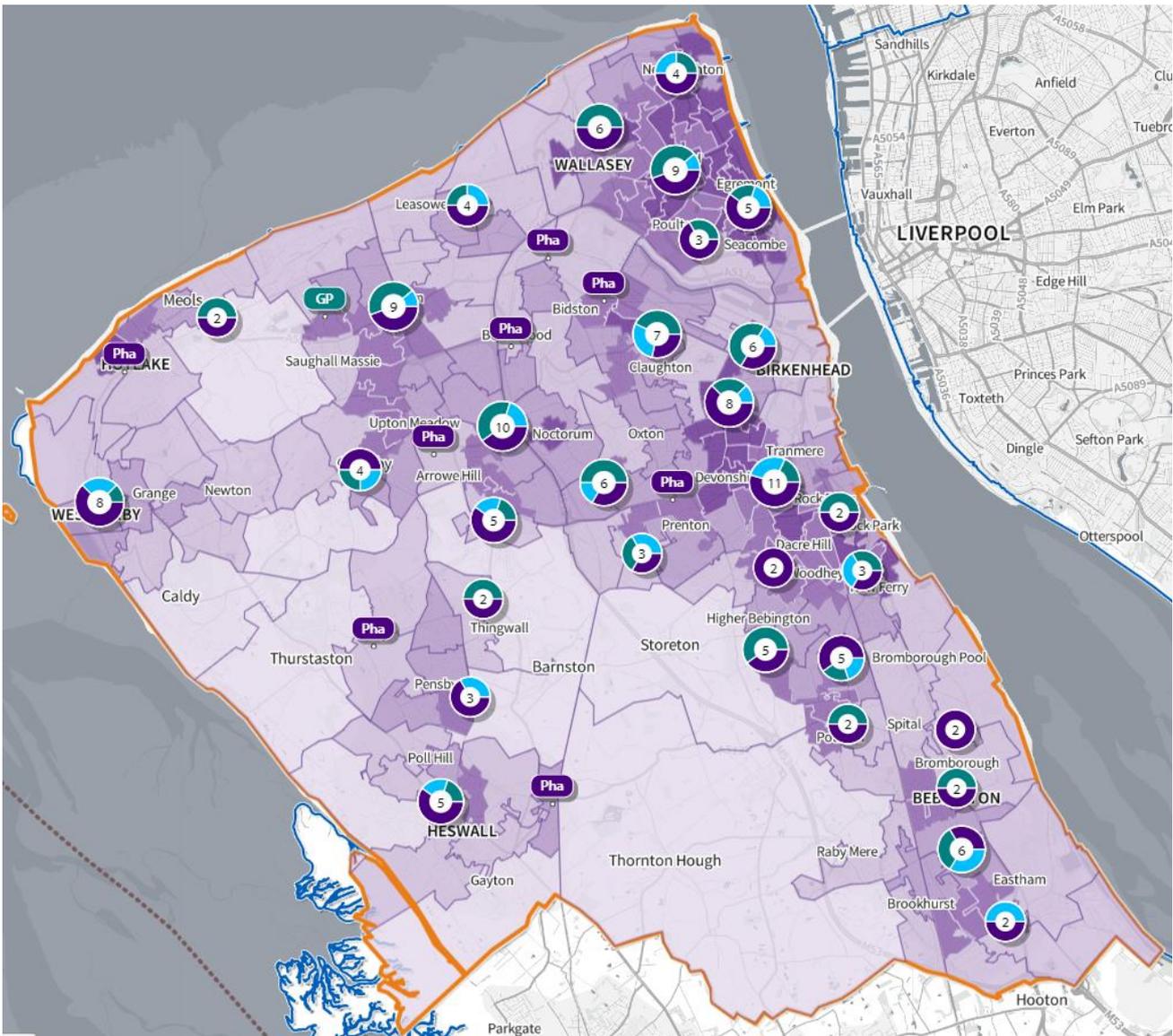
Source: Wirral Intelligence Service using [OHID SHAPE tool \(2022\)](#) with all Maps in [Appendix Six](#)

Note: The number and type of venue are described within the circle - with GP Surgeries (GP) green, Pharmacies (pha) as purple and Health Centres (HC) in blue. Map shading present population density - darker colours are where more people live. [This is a list of pharmacies, GP Practices and Health Care Centres related to this map](#)

The number and coverage across high density population areas is considered a benefit to those residents wishing to access pharmacy services close to their GP Practice.

It should be noted many other pharmacies are close to a GP Practice or other Health Clinic or Medical Centre as can be seen in **Map 9** below. These were not considered in terms of actual one-site co-location but never-the-less provide access close to those facilities.

Map 9: All GP Practices, Health sites and Pharmacy locations for Wirral (2022)



Source: Wirral Intelligence Service using [SHAPE Atlas 2022](#) with all Maps in [Appendix Six](#)

Note: The number and type of venue are described within the circle - with GP Surgeries (GP) green, Pharmacies (pha) as purple and Health Centres (HC) in blue. Map shading present population density - darker colours are where more people live. [This is a list of pharmacies, GP Practices and Health Care Centres related to this map](#)

Walk and drive time maps

In order to demonstrate accessibility, it is helpful to produce some local maps using pharmacy locations for drive and walk times which demonstrate travel accessibility for the local population. Although the drive maps are based upon SHAPE Atlas content the methodology we have applied is considered in light of information produced by [Office of Fair Trading \(OFT\) in their report 'Evaluating Office of Fair Trading Work' \(2010\)](#). Here they sought to understand how customers accessed their pharmacies, by data on the impact of the 'control of entry' regulations, plus a wide range of other information sources including published statistics, specially constructed datasets, bespoke surveys, and interviews with stakeholders. The OFT report cites other work which shows that the most frequent mode of transport to pharmacies when collecting prescriptions was on foot (41%) and by car (50%).

The average travel time when journeying by car was 8.4 min. In addition, 90% of pharmacy visits were completed by people who had travelled up to two miles.

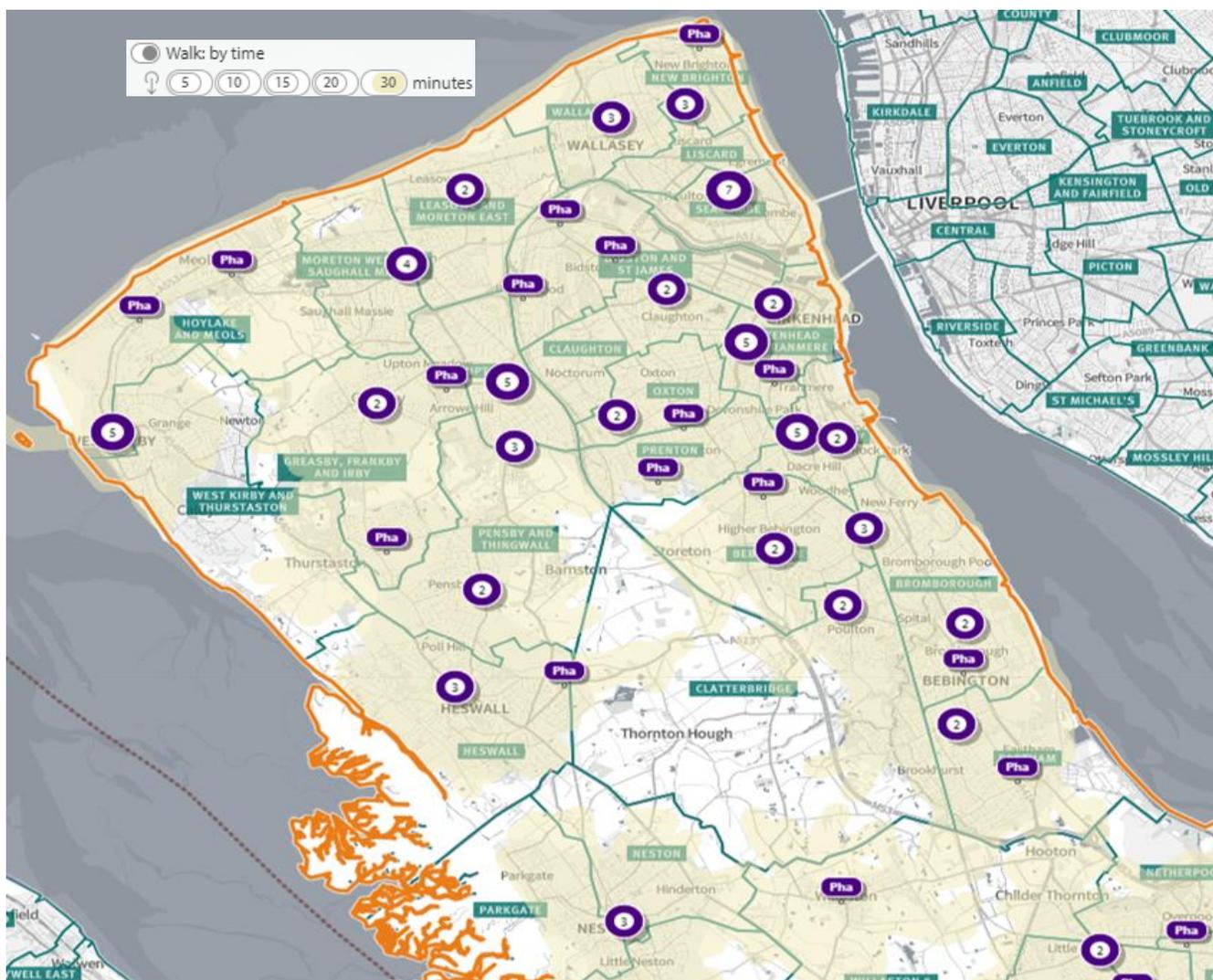
Taking all this information into account, it was considered this to be a reasonable approach when seeking to assess travel accessibility for residents to pharmacy premises when linked to identifying any pharmaceutical need. The approach for the walk, drive, public transport and cycling maps is below.

Application of walk, drive, public transport and cycling times

Walk time (30 minutes) map

Map 10 has been produced using the PNA Dashboard on the SHAPE atlas website facilitated by Public Health England. The website allows travel time to be calculated from residential areas to selected settings so in this case Wirral pharmacies.

Map 10: Walk times (considered as 30 minutes' walk from nearest Pharmacy - Estimated to be one mile walking distance), Wirral, 2022



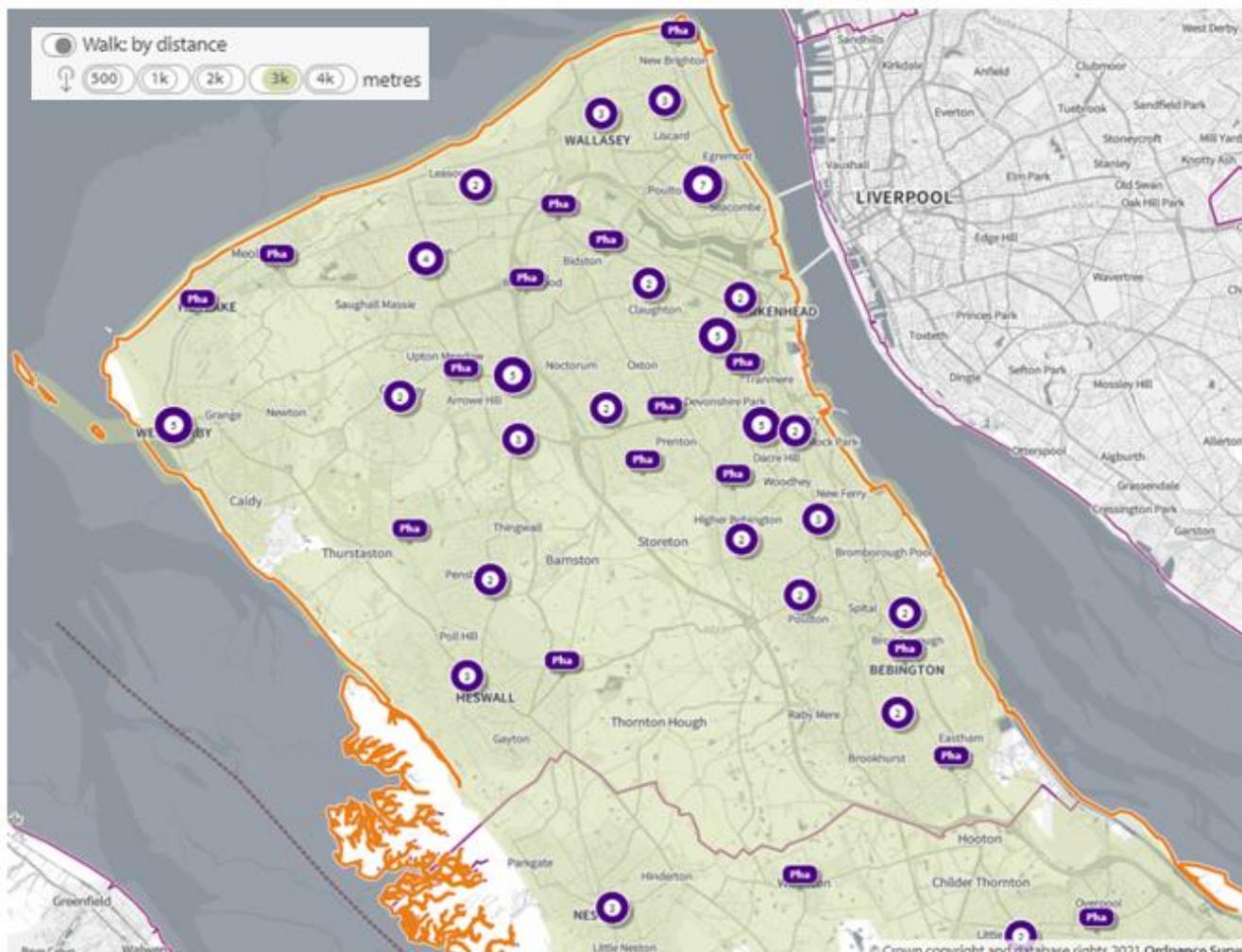
Source: Wirral Intelligence Service using [SHAPE Atlas 2022](#) with all Maps in [Appendix Six](#) and [Appendix Eight](#)
Note: Distances are calculated using the Lower Super Output Area Population Weighted Centroid (PWC) – PWCs are central points within an LSOA relating to where the residential population is located. Walking by time assumes walking speed of 5km/hour (3.1 miles/hour) and by distance uses lengths of paths and roads with pedestrian access. For more information, please refer to [SHAPE's online resource](#).

As can be seen in **Map 10**, with the estimated 30 minutes or 1-mile walking distance to pharmacies, suggests that access to pharmacies is reasonable with pharmacies being positioned in places of highest population density.

Walk Distance (3000m) map

Map 11 has been produced using the PNA Dashboard on the SHAPE atlas website facilitated by Public Health England. The website allows distance to be calculated from residential areas to selected settings so in this case Wirral pharmacies.

Map 11: Walk times to nearest Pharmacy - as 3000 metres or 1.8 miles, Wirral, 2022



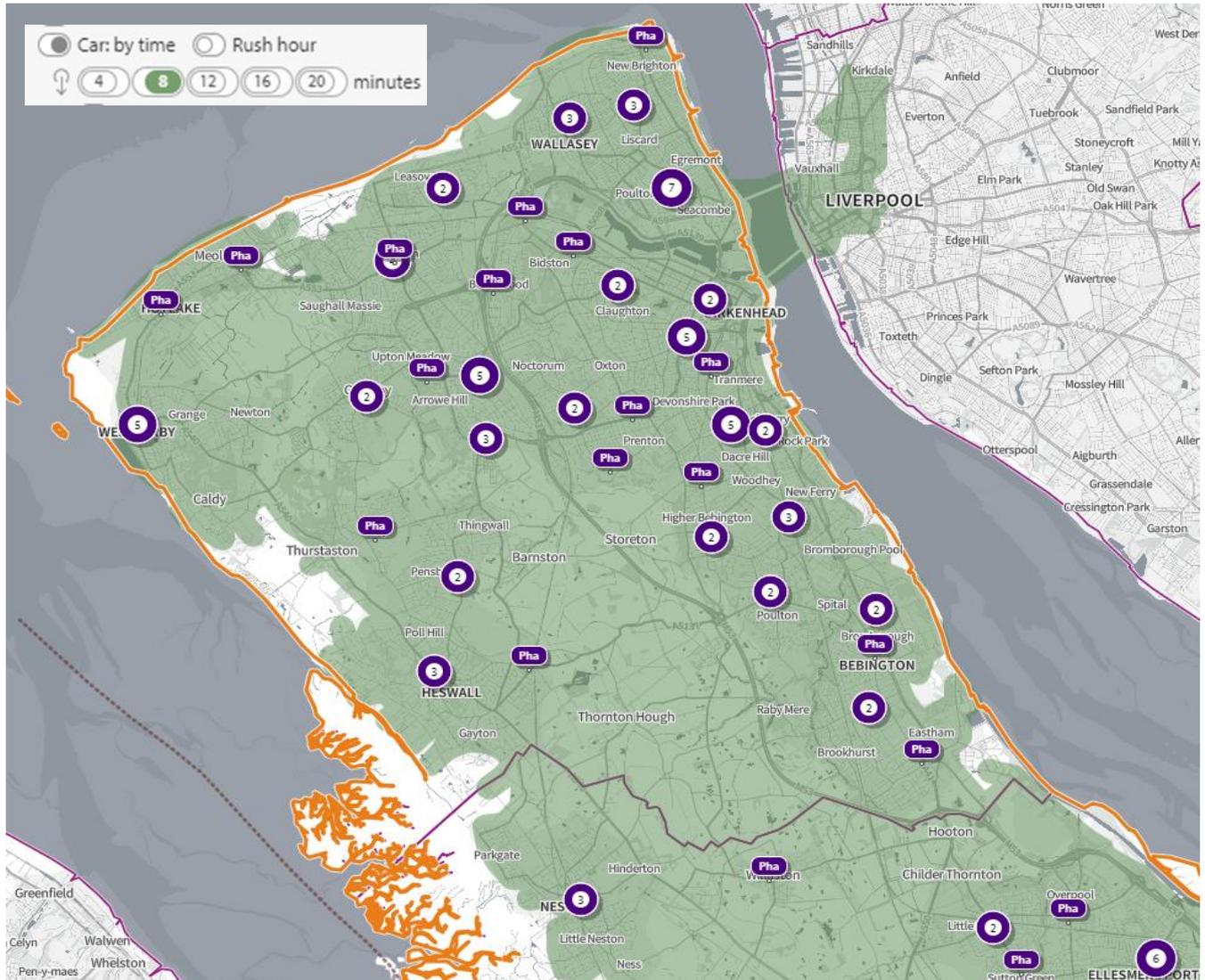
Source: Wirral Intelligence Service using [SHAPE Atlas 2022](#) with all Maps in [Appendix Six](#) and [Appendix Eight](#)
Note: Distances are calculated using the Lower Super Output Area Population Weighted Centroid (PWC) – PWCs are central points within an LSOA relating to where the residential population is located. Walking by time assumes walking speed of 5km/hour (3.1 miles/hour) and by distance uses lengths of paths and roads with pedestrian access. For more information, please refer to [SHAPE's online resource](#).

As can be seen by **Map 11** above, with the estimated walk distance of 3000 metres or 1.8 miles distance ([within OFT estimations](#)) to pharmacies, it suggests that access is reasonable with all pharmacies being accessible within this parameter as being positioned in places of highest population density and coverage. This also highlights that Wirral residents can access pharmacy services into bordering local authority areas as Cheshire West and Chester and Liverpool (City Centre).

Car Time (8 minutes) map

Map 12 has been produced using the PNA Dashboard on the SHAPE atlas website facilitated by Public Health England. The website allows travel time to be calculated from residential areas to selected settings so in this case Wirral pharmacies.

Map 12: Drive Times (between 8- and 9-minutes travel time from any pharmacy), Wirral, 2022



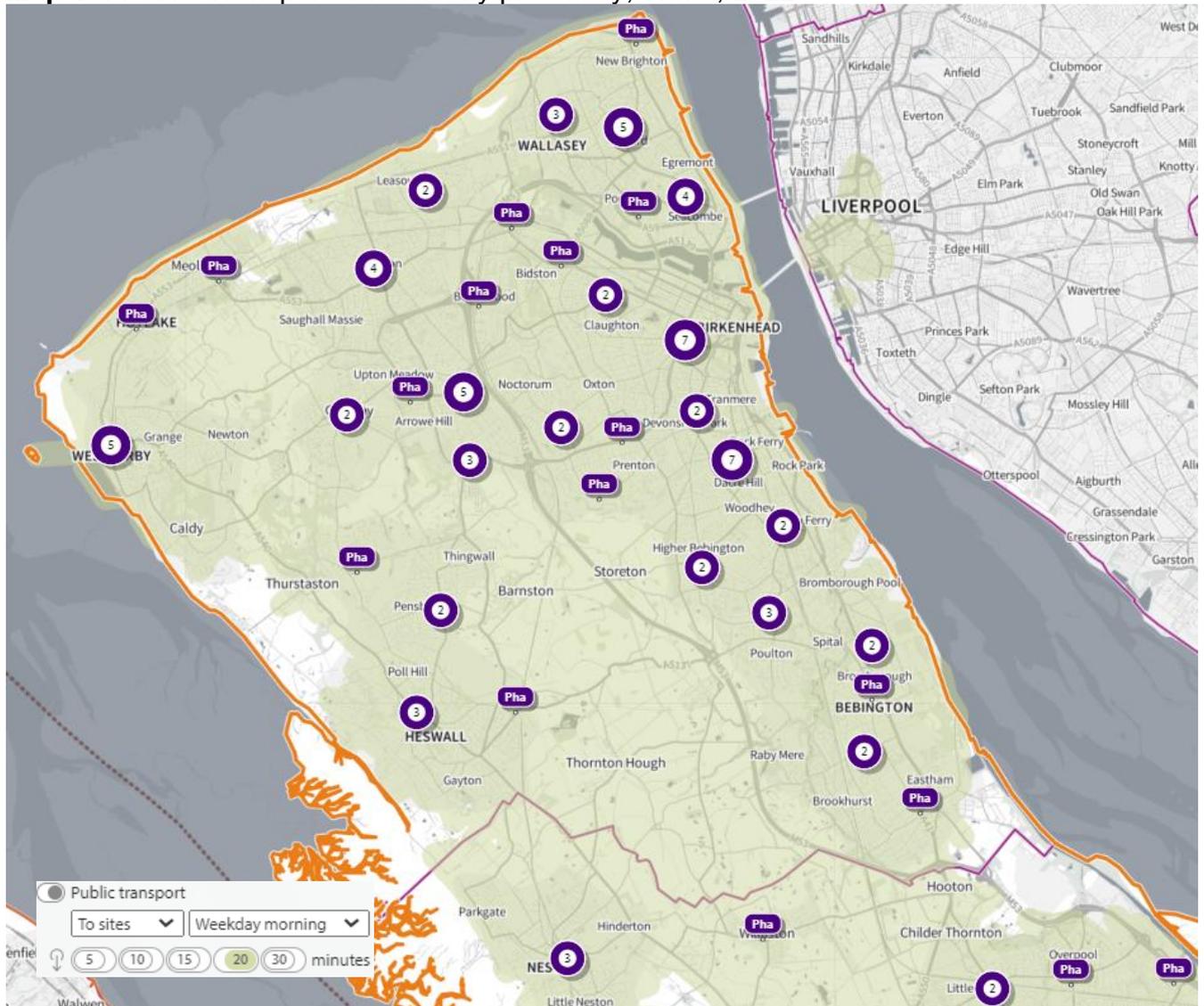
Source: Wirral Intelligence Service using [SHAPE Atlas 2022](#) with all Maps in [Appendix Six](#) and [Appendix Eight](#)
Note: Distances are calculated based on travel distance between 8 and 9 minutes, with normal road speed whilst taking into account junctions, crossing and traffic lights. This map also uses the Lower Super Output Area Weighted Centroid (PWC) as the starting point for distance travelled. For more information, please refer to [SHAPE's online resource](#).

As can be seen by **Map 12**, the estimated 8-to-9-minute drive time ([within OFT estimations](#)) to pharmacies, suggests that access is reasonable with all pharmacies being accessible within this parameter as being positioned in places of highest population density and coverage. This also highlights that Wirral residents can access pharmacy services into bordering local authority areas as Cheshire West and Chester and Liverpool (City Centre).

Public Transport

SHAPE tool methodology suggests that there are no published prescriptive minimum levels of access to pharmacy sites using public transport as the preferred mode. However, it is included in this PNA to demonstrate the level of access using buses. **Map 13** has been produced using the PNA Dashboard on the SHAPE atlas website facilitated by Public Health England. The website allows travel time to be calculated from residential areas to selected settings so in this case Wirral pharmacies.

Map 13: Public Transport times to any pharmacy, Wirral, 2022



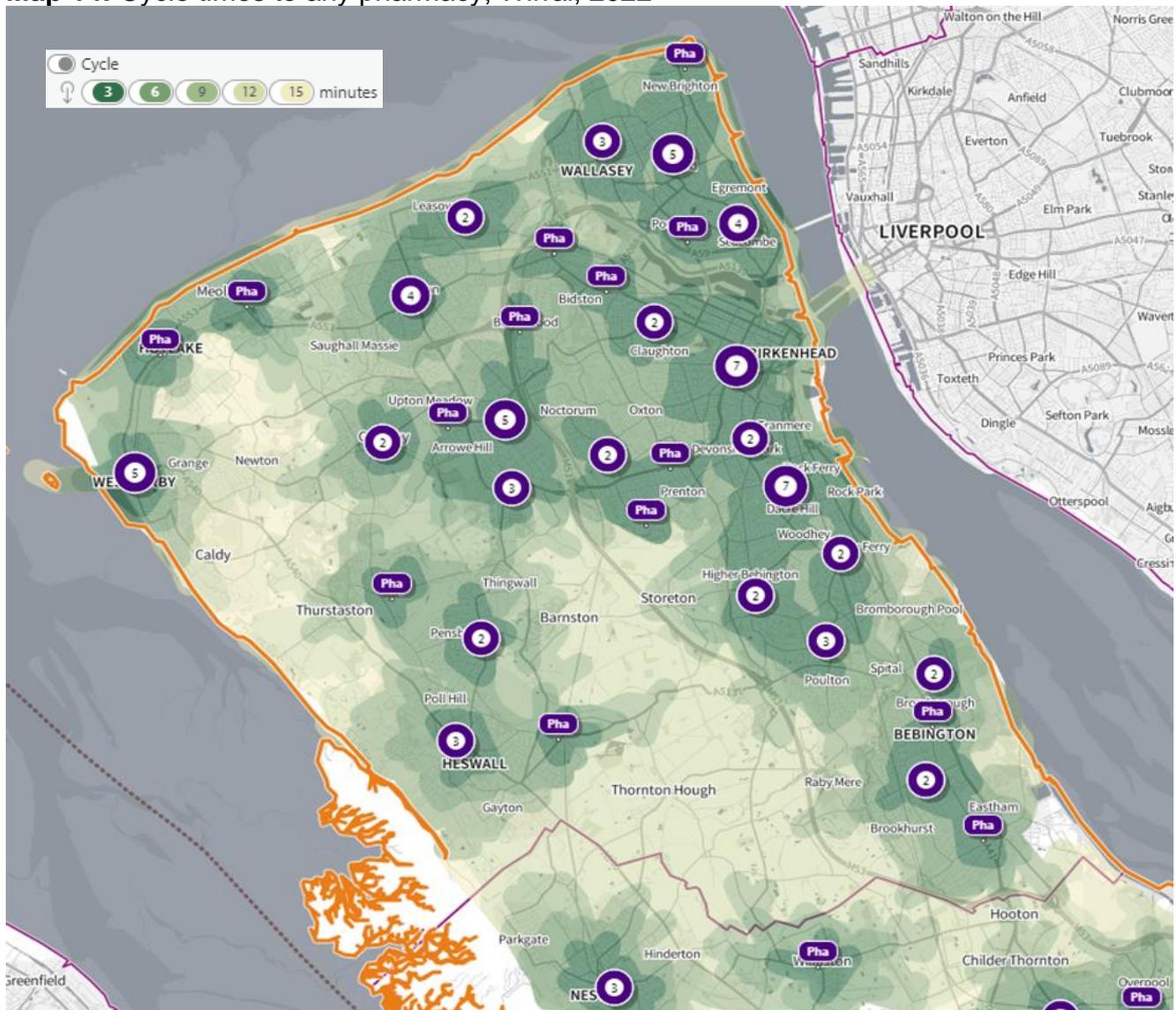
Source: Wirral Intelligence Service using [SHAPE Atlas 2022](#) with all Maps in [Appendix Six](#) and [Appendix Eight](#)

Map 13 above suggests that all venues can be reached by public transport within 20 minutes (including cross-border venues). Other maps in [Appendix Six](#) that highlight public transport for weekday afternoon and evening also suggest all areas of Wirral can access a pharmacy within 20 minutes.

Cycling

SHAPE tool methodology suggests that there are no published prescriptive minimum levels of access to pharmacy sites by bicycle. However, it is included to demonstrate level of access using buses. **Map 14** has been produced using the PNA Dashboard on the SHAPE atlas website facilitated by Public Health England. The website allows travel time to be calculated from residential areas to selected settings so in this case Wirral pharmacies.

Map 14: Cycle times to any pharmacy, Wirral, 2022



Source: Wirral Intelligence Service using [SHAPE Atlas 2022](#) with all Maps in [Appendix Six](#) and [Appendix Eight](#)

Note: Cycle: assumes cycling speed of 15km/hour (9.3 miles/hour) or 1 mile in 6.5 minutes. For more information, please refer to [SHAPE's online resource](#).

Map 14 above suggests that all pharmacy venues can be reached through cycling between 12 and 15 minutes (including cross-border venues). This could be considered a reasonable length of time and distance to cycle if that was the preferred option.

Maps 10, 11, 12, 13 and 14 highlight the localities and areas that are within a 30-minute walking time of a pharmacy, areas within 3,000 metres walking time of a pharmacy, areas within an 8-to-9-minute driving time of a pharmacy and public transport within 20 minutes and cycling within 15 minutes.

This shows that the overriding majority of the population has access to a pharmacy either by walking, driving, public transport or cycling. The unshaded patches within the map represent areas where there is no access to a pharmacy within the groups and their specified travel times and these are very few.

It must be emphasised that the areas with no access to a pharmacy within the specified driving or walking times (white areas on maps) are not populated areas of Wirral and are almost all parks and open spaces.

Wirral residents do not have travel accessibility issues gaining access to a local pharmacy. This conclusion is also supported by available provision of services from cross-border pharmacies.

Opening times

In order to understand pharmacy contractor opening hours and coverage throughout the day and across the week then a series of tables ([Appendix Nine](#)) were produced that describe the opening hours and number of pharmacies open throughout each week between Monday and Sunday. This is by Constituency as Birkenhead, Wallasey, Wirral South, and Wirral West.

The tables highlight the hours of each day of the week and by each hour of the day with the number of pharmacies recorded, through the Pharmacy Contractors survey and NHS England and NHS Improvement's (NHSE&I) data ([Appendix Four](#)), as being open. They highlight the following:

Overview

- from Monday to Friday, all 83 pharmacies are open between 9.00am to 5.00pm with a slight dip between the hours of 1.00pm to 2.00pm
- cover is also available throughout the week at the extreme hours from 6.00am and up to 10:30pm
- across Wirral on Saturday, almost 80% of the pharmacies are open in the morning and almost 55% of those open remain so into the afternoon until 5.00pm*
- Sundays sees less pharmacies being open, with 13 open at least between 10.00 – 4.00pm*
- On Sundays, beyond 4.00pm, cover continues via 100-hour pharmacies across Wirral*

Birkenhead

- availability starts at 7.00am on Mondays and from 6.00am on Tuesday to Saturday
- all 25 pharmacies are open for business between 9.00am and 5.30/6.00pm with a slight dip at lunchtime (20/25 remaining open - Monday to Friday)
- availability continues after 6.00pm and up to 10.30pm, Monday to Friday
- 20 of 25 pharmacies are open between 9.00am and 12.00pm on Saturdays with availability continuing up to 10.30pm
- On Sunday, there are 3 pharmacies available between 10.00am and 4.00pm with 1 pharmacy open until 4.30pm.

Wallasey

- availability starts at 8.00am from Monday to Saturday
- all 20 pharmacies are open for business between 9.00am and 5.30/6.00pm with a slight drop at lunchtime (15/20 remaining open - Monday to Friday)
- availability continues after 5.30/6.00pm and up to 10.00pm, Monday to Saturday
- 12 of 20 pharmacies are open between 9.00am and 1.00pm on Saturdays with availability up to 10.00pm
- on Sunday there is availability of one pharmacy between 10.00am and 4.00pm

Wirral South

- availability starts at 8.00am on Mondays and from 7.00am on Tuesday to Saturday
- all 18 pharmacies are open for business between 9.00am and 5.30/6.00pm with a slight drop at lunchtime (13/18 remaining open - Monday to Friday)
- availability continues after 5.30/6.00pm and up to 11.00pm, Monday to Friday and 10:30pm Saturday and Sunday*
- 17 of 18 pharmacies are open between 9.00am and 12.00pm on Saturdays with availability up to 10.30pm*
- on Sunday, there are up to 4 pharmacies available between 10.00am and 4.00pm, and 1 pharmacy open until 10:30pm*

Wirral West

- availability starts at 6.30am on Monday and 6.00am Tuesday to Saturday
- all 20 pharmacies are open for business between 9.00am and 5.30/6.00pm with a slight drop at lunchtime (17/20 remaining open - Monday to Friday)
- availability continues after 5.30/6.00pm and up to 11.00pm, Monday to Friday and 10.00pm on Saturday
- 17 of 20 pharmacies are open between 9.00am and 12.00pm on Saturdays with availability up to 10.00pm
- on Sunday, between 10.00am and 4.00pm there are 5 Pharmacies open with one pharmacy available up 10.00pm

In considering the current available opening across the borough it is generally deemed adequate coverage and will serve the current and expected future pharmaceutical needs of Wirral residents. There are areas of Wirral that on Sundays, past 4.30pm, that require travel to available pharmacy venues if support is required*.

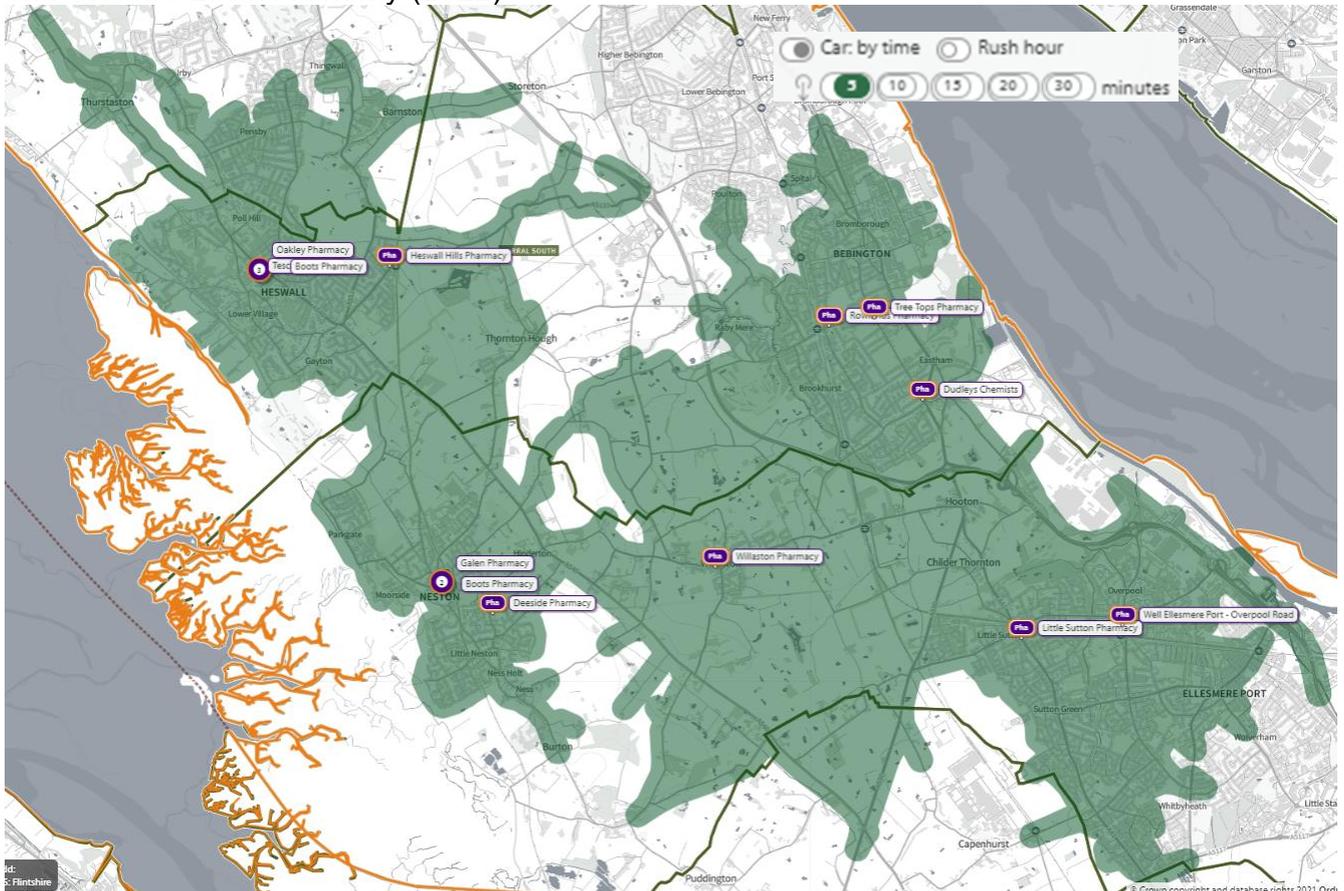
****Since the development of this PNA, the collation of all data sources and public engagement process on draft PNA 2022-2025, there has been a change requested by a Wirral Pharmacy Contractor that is in the process of being considered by NHSE Contracts Committee.***

If we assume that this request is successful then it will result in reduced access to pharmacy services after 8.00pm on weekdays and at weekends up to 10.00pm in Wirral South. In terms of potential effect being seen across Wirral, then this reduction in opening hours would result in the closest available provision on Sundays after 4.00pm being with only Lloyds Pharmacy at Arrowe Park Hospital and Well Chester - Fountains Medical Centre as the nearest available venues for Wirral residents to access if pharmaceutical services were needed.

Cross Border Pharmacy provision

Wirral residents are also served by cross border pharmacies in Neston, Willaston, Liverpool and Ellesmere Port (see **Map 15** and [Appendix Eight](#) for maps highlighting coverage).

Map 15: Accessible pharmacy venues for Wirral residents close to border with Cheshire West and Chester Local Authority (2022)



Source: Wirral Intelligence Service using [SHAPE Atlas 2022](#) with all Maps in [Appendix Six](#) and [Appendix Eight](#)

Map 15 above suggests those residents closer to the border with Cheshire West and Chester have additional access to pharmacy sites in that area.

In terms of pharmacy usage outside of Wirral there were, between November 2020 to October 2021, over 23,000 prescriptions for Wirral residents were redeemed at Cheshire West and Chester pharmacies, with over 16,000 of those being at pharmacies closest to the Wirral in Neston, Willaston and Ellesmere Port. There were just over 10,000 prescriptions from Wirral residents placed at Liverpool pharmacies. After that, most redeemed prescriptions were for online pharmacy or appliance contractors, which can be from any area of England.

Prescription Services - Collection and Delivery

The survey suggests that 69 of 83 pharmacies collect prescriptions from surgeries. Then there are 61 of 83 that deliver dispensed medicines free of charge with the remaining 22 of the 83 having this as a chargeable service. This is an on-request service and is subject to change as it is an individual business decision by contractors. These collection and delivery services do improve access to medicines for a wide range of people.

With 43.3% of public survey respondents saying that the pharmacy they use deliver prescriptions to their home address, 6.9% said their pharmacy did not deliver but almost 50% (49.8%) were either not aware of the service or had never used it.

Monitored Dosage Systems

A monitored dosage system (MDS), usually in the form of a box or a blister pack divided into days of the week, is a medication storage device designed to simplify the administration of solid oral dose medication. As such they are one way of overcoming unintentional non-adherence to medication. Prime candidates for MDS are patients at risk of confusing their medication, including where their ability to manage their medication is affected by disability or their living arrangements or who have multiple medication.

If patients have significantly impaired mental self-care abilities, MDS dispensing is likely to be of little help to them. However filling MDS is a time-consuming process. The 28-day packs may increase the likelihood of confusion and mistakes by patients when presented with four separate MDS packs at a time. Any changes to the patient's prescription within the 28 days may result in substantial waste. There is the possibility that increases in dispensing errors may result from the required repackaging of medicines.

- 58 out of 83 community pharmacies provide MDS free of charge
- 16 out of 83 community pharmacies provide MDS at a charge
- 31 out of 83 community pharmacies provide MDS free only to patients who have a disability (as defined by the Disability Discrimination Act)

The predicted rise in the number of people with dementia, due to the ageing population, may increase the number of people needing support from their pharmacy under the Equality Act.

Where the patient has a formal carer, that carer may be commissioned to support the patient to manage their medicines by requesting and collecting prescriptions and prompting and assisting administration. This is a separate arrangement from the obligations placed upon a community pharmacy to make reasonable adjustments under the Equality Act 2010 which is wholly and rightly focused on the patient; typically the carer would need to be trained on prompting from original packs and bottles of medicines as there is no automatic requirement for the medicines to be dispensed into monitored dosage systems (MDS) ([Read PSNC briefing](#)).

Out of hours provision

Throughout the localities, various GP collaboratives provide an out of hours service which is intended for emergency use. GP practices are contracted to provide services between 8.00am and 6.30pm, Monday to Friday, excluding bank and public holidays. If a prescription is required, there will be a need for a pharmaceutical service. It is expected the demand for this will be small. NHS England (NHSE) has the ability to commission extended hours of opening from existing contractors via an enhanced service or by directing rota services (in accordance with NHS Regulations) should gaps in service provision be identified. Where any gaps are identified for example on bank holidays, provision is ensured via rota arrangements in line with NHSE policy.

NHSE have worked closely with the Clinical Commissioning Groups and the Local Pharmaceutical Committee to ensure that, when rotas are directed, they provide cover in a manner which is informed by patients' usage of the out of hours service and which gives cover across both the geography of the area and at varying times of the day.

Conclusion

Taking into account the:

- geographical location, distribution, and number of pharmacies
- the availability of services throughout the week
- drive and walk distances
- opening times
- the availability of cross-border pharmacy provision
- out of hours provision

Considering the above information, the Health and Wellbeing Board is satisfied that there is no gap in provision of pharmaceutical services in Wirral.

This remains under review and the option of conducting a repeat needs assessment is still open in the future, should there be a perceived change in demand,

Wirral Residents' Pharmacy Survey 2022

Public Consultation for Wirral PNA 2022 - 2025

In November 2021, Wirral residents were asked for their views of in relation to their use and experience of Wirral's Community Pharmacy venues and services. The survey ran throughout the month of November 2021 as an electronic online survey, shared far and wide across Wirral partners and communities and as EasyRead and paper versions to improve access. A total of 849 responses were received during this period.

Headline demographics

- The 2021 survey was completed by 72% female respondents and 25% for males, which is very different to the 2017 Public Survey at 55% females and 44% males
- The age-group who completed most surveys (209 or 27%) were 55–64-year-olds with 65-74 age band second highest with 25% (or 195 people) completing the survey. 37% (n~285) of respondents were aged below the age of 55 years
- in fact, those people aged over 35 accounted for more than 92% of all responses to the survey which is very similar to 2017 result. This may be reflective of the age demographic of people who use pharmacies more often and/or linked to health problems associated with age. If further insight is required for the younger population, then a more specific survey would be required to target this group
- of those people who answered the survey question on ethnicity (760 of 849), almost all were from a white background, predominantly White British and White English with over 98% in these groups and with other White Ethnic Groups. Overall, those who had left their ethnicity unrecorded was 10.5%, or 89 people of the total of 849 respondents, not reporting this information
- the known ethnicity status for Wirral, as per Census 2011 (still awaiting results of 2021 Census) and last Wirral JSNA updates suggests that this survey response is an under representation of local Black, Asian and Minority Ethnic resident views

The results of the public survey will be shared with NHS England and local Pharmacy Contractor leads in order to use the content to improve local services and delivery.

Key findings

The key findings from the survey are as follows:

The vast majority of respondents, almost 82%, had either picked up their own prescription or for someone else (Table 22 below).

Table 22: Key factors affecting residents' choice of pharmacy (Question 2)

Why did you visit the pharmacy?		
Answer Choices	Percentage	Number
To collect a prescription for yourself	65.2%	552
To collect a prescription for someone else	16.9%	143
Other (please specify)	8.5%	72
To get advice from the pharmacist	5.6%	47
To buy other medications I cannot buy elsewhere	3.9%	33
Total	100.0%	847

Source: Wirral Residents: PNA Survey 2021

Notes: Survey was conducted in November 2021 with 849 responses received with 2 people who skipped this question. Only one answer option to this question was possible. Other included a significant number (xx) picking their own medication, or for another, COVID-19 related or for an influenza jab

See answers to all Public Survey Questions in [Appendix Three](#)..

The majority of respondents, or almost 89%, used a pharmacy within that month, with only 11% having last used the pharmacy over three months ago or even longer (Table 23 below).

Table 23: Key factors affecting residents' choice of pharmacy (Question 3)

When did you last use a pharmacy to get a prescription, buy medicines or to get advice?		
Answer Choices	Percentage	Number
In the last week	41.2%	350
In the last month	25.0%	212
In the last two weeks	22.5%	191
In the last three months	5.7%	48
Not in the last six months	3.5%	30
In the last six months	2.1%	18
Total	100.0%	849

Source: Wirral Residents: PNA Survey 2021

Notes: Survey was conducted in November 2021 with 849 responses received. Only one answer to this question was possible. See answers to all Public Survey Questions in [Appendix Three](#)..

Of the 895 responses received to the question as to how they got to their pharmacy, 45.9% accessed the pharmacy on foot, with 44.9% accessing it via car (Table 24)

Table 24: Key factors affecting residents' choice of pharmacy (Question 4)

How did you get to the pharmacy?		
Answer Choices	Percentage	Number
Walking	45.92%	411
Car	44.92%	402
Other (please specify)	4.02%	36
Public transport	2.68%	24
Taxi	1.01%	9
Bicycle	0.67%	6
Mobility transport	0.56%	5
Motorbike	0.22%	2
Total	100.0%	895

Source: Wirral Residents: PNA Survey 2021

Notes: Survey was conducted in November 2021 with 895 responses received from 849 people as multiple answers to this question were possible. Other included friends' car, electric scooter and most mentioned items were delivered. See all answers and Public Survey Questions in [Appendix Two](#) and [Appendix Three](#).

Factors influencing respondent's pharmacy choice

Almost 57% of respondents suggested that 'Close to home' (34.1%) and 'Close to GP practice' (22.6%) were the most important factors in determining which pharmacy they access, as seen in **Table 25** below. Surprisingly, distance to public transport does not appear to rate as important (4.0%) for most respondents though ease of parking (16.4%) and links to other shopping outlets (11.8%) do.

Table 25: Key factors affecting residents' choice of pharmacy (Question 5)

Thinking about the location of the pharmacy, which of the following are the most important to you?		
Answer Choices	Percentage	Number
It is close to my home	34.14%	594
It is close to my doctor's surgery	22.64%	394
It is easy to park nearby	16.38%	285
It is close to other shops I use	11.84%	206
It is near to the bus stop / train station	3.97%	69
It is close to/in my local supermarket	3.91%	68
It is close to where I work	2.64%	46
Other (please specify)	2.47%	43
None of these	1.21%	21
It is close to my children's school or nursery	0.80%	14
Total	100.0%	1740

Source: Wirral Residents: PNA Survey 2021

Notes: Survey was conducted in November 2021 with 1,740 responses received from 849 people as multiple answers to this question were possible. Other included good opening hours, friendly staff, medication availability and parking. See all answers and Public Survey Questions in [Appendix Two](#) and [Appendix Three](#).

Almost 97% of survey respondents felt it was 'quite' or 'very' easy to get to their usual Pharmacy venue (Table 26 below).

Table 26: Key factors affecting residents' choice of pharmacy (Question 6)

How easy is to get to your usual pharmacy?		
Answer Choices	Percentage	Number
Very easy	67.73%	575
Quite easy	28.86%	245
Quite difficult	2.00%	17
Very difficult	1.41%	12
Total	100.0%	849

Source: Wirral Residents: PNA Survey 2021

Notes: Survey was conducted in November 2021 with 849 responses received. Only one answer to this question was possible. See all answers and Public Survey Questions in [Appendix Two](#) and [Appendix Three](#).

In terms of accessible pharmacy venues for parking, there were 82% of respondents (309 of 377) who had mobility issues that felt they could park nearby with 16% feeling their access to car parking had compromised their access to the venue (Table 27 below).

Table 27: Key factors affecting residents' choice of pharmacy (Question 7)

If you have a condition that affects your mobility, are you able to park close enough to your pharmacy?		
Ease of access to Pharmacy (Mobility issues)	Percentage	Number
Can Park close enough to pharmacy	81.96%	309
Cannot Park close enough to pharmacy	16.18%	61
Don't know	1.86%	7
Total respondents to Question 7		377
Not applicable		465
Total	100.00%	842

Source: Wirral Residents: PNA Survey 2021

Notes: Survey was conducted in November 2021 with 849 responses received with 7 people who skipped this question. Only one answer to this question was possible. See all answers and Public Survey Questions in [Appendix Two](#) and [Appendix Three](#).

Although over 43% of respondents had received their medication by delivery from the pharmacy, the vast majority, almost 50%, were not aware of the availability of this delivery service from the pharmacy (Table 28).

Table 28: Key factors affecting residents' choice of pharmacy (Question 8)

Does your pharmacy deliver medication to your home if you are unable to collect it yourself?		
Answer Choices	Percentage	Number
Yes	43.30%	365
No	6.88%	58
Don't Know/ I have never used this service	49.82%	420
Total	100.0%	843

Source: Wirral Residents: PNA Survey 2021

Notes: Survey was conducted in November 2021 with 849 responses received with 6 people who skipped this question. Only one answer to this question was possible. See all answers and Public Survey Questions in [Appendix Two](#) and [Appendix Three](#).

Satisfaction with Pharmacy Services

The main findings were:

- **85.3% of respondents had not experienced a problem accessing a pharmacy service** for buying or obtaining dispensed medicines or to get advice recently (**view Question 9**)
- those who did have a problem were in the main (80.8% or 122 responses) seeking prescription medicines (**view Question 10**)
- examples of the 113 issues people noted that they had encountered (**view Question 11**) when trying to find a pharmacy included:

- medicines not in stock at pharmacy or was unavailable when it was required (51%)
- not open when needed facility (29%)

The number of reported issues has doubled since 2017 survey at a time when the survey numbers have reduced. The issues being experienced were during COVID-19 and a range of stock availability issues and reductions in opening hours. Even though there were a number of mitigating circumstances there should be greater awareness and action in relation to the issues raised.

- **over 81.4% of respondents were satisfied with pharmacy opening hours** with just over 19% or 152, experiencing issues. This is a 11% reduction in satisfaction level since [2017 PNA Survey](#). These included (**view Question 12**)
 - closed at weekend (48.7%)
 - opening hours too short (25.0%)
 - close too early (11.8%)
 - closed at lunchtime (7.9%)
 - open earlier (0.7%)

Some people felt opening hours did not always reflect their circumstances or meet needs

- The number of residents who were **satisfied with services received from their pharmacy during the pandemic (view Question 13) was at 87.7% (722 of 823 of those answered)**, with some of the issues of those 12.3% (or 101 responses) who felt otherwise including:
 - Failing to provide service on time with all medication (29.7% or 30 responses)
 - Unhappy queuing with others in a pandemic (19.8% or 20 responses)
 - Lack of empathy from pharmacy staff (9.9% or 10 responses)
- **Question 14** asks people had they needed to use their usual/nearest pharmacy when it was closed and of the 244 (31%) of respondents who had needed access when it was not open the responses covered (**view Questions 14, 15, 16 and 17**)
 - this was needed between Monday and Friday by 35% (or 89 responses)
 - on Saturdays by 33% (86), Sunday by 16% (41) and 3.5% (9) on a bank holiday
 - in the afternoon by 27% (69), morning by 22% (55), lunchtime 21% (54) and evening (after 7pm) 20% (50) respectively
 - with over 56% either waiting until the chosen pharmacy opened or almost 30% using another pharmacy
 - it should be noted that 244 people suggested they needed to use a pharmacy out of hours, yet 574 answered Q17 (*What did you do when your pharmacy was closed?*) - so the survey layout might have not helped the individual to provide the most appropriate answers for this question or the issue might be of greater significance than realised
 - overall, of the people that needed to access a pharmacy outside usual opening hours, then it suggests that they did not see opening hours always reflecting their circumstances or always meeting their needs and this should be explored further

- of the respondents who were accessing the pharmacy for a prescription (82%) (**view Question 18**)
 - **almost 61% were informed how long their prescription would take to prepare** and just **under 9% felt this was an unreasonable amount of time to wait** (**view Questions 19 and 20**)
 - **with 82% then receiving all the medicines they were expecting** (view Q21) but for those who did not get all their medicines, almost 16% or 117 people, the primary reason offered was that the pharmacy did not have that medicine available (50%) (**view Question 22**)
- if delays in receiving medicines were encountered by respondents, **in just 44% of cases, the medicines were received that same day or the next day** (**view Question 23**) but in 56% cases it was between 2-7 days, over a week or never received
- when respondents were asked **if they have needed to use a hospital pharmacy** (e.g., as an outpatient or on discharge following a stay in hospital) and **would like to have the option to have the prescription dispensed at their local pharmacy then over 56% would like this option**, not quite 3% never having to use a hospital pharmacy and only 11% not wishing to use such a facility (**view Question 24**)
- the **opportunity for health-related consultation with the pharmacist was taken up by almost 37% of respondents** (287) (**view Question 25**) and this was predominantly for medicines (47%) or advice about a minor ailment (37%) (**view Question 26**) with a substantial number also receiving a flu or COVID-19 jab
- **just 39% (or 117) of these consultations were undertaken in a separate room**, the rest happening at the counter (39%), in the dispensary or quiet part of the shop (12%) or over the telephone (7%) (**view Question 27**)
- of the 294 respondents who rated their **pharmacy consultation then almost 78% felt the privacy offered for this consultation was good to excellent** with 9% feeling they were 'Fair' and 37 people, or just over 12.5% of respondents feeling the privacy aspect was poor or very poor (**view Question 28**)
- respondents (or 785) rated their **satisfaction with the range of pharmacy services at almost 66%** with almost 29% feeling more services could be provided (5% did not know) (**view Question 29**)
- those completing the survey were asked which (if any) of a list of optional services they thought might be available locally through pharmacies. **Table 29** below outlines their responses (**view Question 30**)

Table 29: Key factors affecting residents' choice of pharmacy (Question 30)

Which if any of the services below do you think should be available locally through pharmacies?							
Answers	Yes	Yes	No	No	Not Sure	Not Sure	Total
Provision of the "Flu" vaccinations	89.2%	678	6.5%	49	4.3%	33	760
To get treatment of a minor illness such as a cold instead of my doctor (free of charge if you don't pay for prescriptions)	87.6%	676	7.4%	57	5.1%	39	772
Review of new medicines with advice on when it is best to take them, what they are for and side-effects to expect	86.9%	654	8.2%	62	4.9%	37	753
Advice on stopping smoking and/or treatment	79.5%	586	9.0%	66	11.5%	85	737
Other immunisations	80.9%	585	9.7%	70	9.4%	68	723
Advice on contraception and the supply of the "morning after pill" free of charge	78.5%	581	10.5%	78	11.0%	81	740
Weight management services and advice on diet/exercise for weight management	66.2%	494	18.5%	138	15.3%	114	746
Screening for other conditions	58.3%	443	21.7%	165	20.0%	152	760
Advice and treatment for alcohol misuse	43.0%	316	32.4%	238	24.6%	181	735
Advice and treatment for drug misuse	42.2%	310	34.2%	251	23.6%	173	734
Total answered: Q30							782

Source: Wirral Residents: PNA Survey 2021

Notes: Survey was conducted in November 2021 with 782 of 849 providing responses to Q30 with 67 people who skipped this question. Only one answer per line was possible for this question. See all answers and Public Survey Questions in [Appendix Two](#) and [Appendix Three](#).

- respondents were asked what they particularly valued as a service from the pharmacy, with 348 responses/suggestions recorded (view Q31). The headlines were:
 - range of advice from pharmacy staff
 - friendly, helpful, and experienced staff
 - delivering of medicines
 - accessibility, proximity, and convenience to home, work and for medications
- those services people thought could be provided by local pharmacies (view Q32) were:
 - provision of prescribing by pharmacist for minor ailments and antibiotics
 - extending opening hours (evening and weekends)
 - wish not to overburden pharmacists with new work but keep quality of current delivery
 - widen communication routes for current range of services/options
 - many people had no improvements to suggest or where happy with current offer

The full survey results can be viewed in [Appendix Three](#).

Meeting pharmaceutical need

Advanced Services

For a fuller description of Advanced Services, the reader is referred to Part 1 of this PNA.

For the range of services provided by pharmacies across the constituencies (as recorded in the Pharmacy Contractors survey) please see [Appendix Four](#) (*Note: this data was accurate when collected in Summer 2021 - figures may not match to more recent data*).

Community Pharmacist Consultation Service (CPCS)

The NHS Community Pharmacist Consultation Service launched on 29th October 2019 as an Advanced Service. Since 1st November 2020, general practices have been able to refer patients for a minor illness consultation via CPCS.

The CPCS offer is currently delivered in 79 of 83 Wirral pharmacies (95.2%) with 1 more contractor intending to begin this service within the next 12 months. It is delivered across Wirral by 24 pharmacies in Birkenhead, 18 pharmacies in Wallasey, 18 pharmacies in Wirral South, and 19 pharmacies in Wirral West. This service, therefore, is considered adequate to meet the pharmaceutical needs of the population.

The service, which replaced the NHS Urgent Medicine Supply Advanced Service ([NUMSAS](#)) and Digital Minor Illness Referral Service ([DMIRS](#)) pilots, connects patients who have a minor illness or need an urgent supply of a medicine with a community pharmacy.

Appliance Use Review (AUR)

This is a highly specialised service, and it is not surprising that it is only delivered in 13 Wirral pharmacies (15.7%). It is delivered across Wirral by 6 pharmacies in Birkenhead, 3 pharmacies in Wallasey, 1 pharmacy in Wirral South and 3 pharmacies in Wirral West. This service, therefore, is considered adequate to meet the pharmaceutical needs of the population.

Stoma Appliance Customisation (SAC) service

This is another specialised service and is delivered by 14 out of 83 Wirral pharmacies (16.9%). There are at least two pharmacies providing this service in each of the four localities. The number of patients requiring the service is quite small and therefore current provision is considered adequate to meet the pharmaceutical needs of the population.

New Medicines Service (NMS)

In Wirral, 82 of 83 pharmacies (almost 99%) are delivering the NMS with just one pharmacy not wishing to provide this service.

It is suggested that NMS could have a similar role as former MURs, and more recent CPCS contract in managing long term conditions (LTCs) and this provision is to be encouraged. In all cases the optimal use of appropriately prescribed medicines is vital to the self-management of most LTCs.

Any failure to translate the technological benefits of new medicines into health gain for individuals can lead to inadequate management of the LTCs and a cost to the patient, the NHS and society. However, current service delivery is considered adequate to meet the pharmaceutical needs of the population.

Community Pharmacy NHS Seasonal flu vaccination

As part of the community pharmacy funding settlement community pharmacies in England are now able to offer a seasonal influenza (flu) vaccination service for patients in at-risk groups.

The service can be provided for adults by any community pharmacy in England that fully meets the requirements for provision of the service and has notified NHS England (NHSE) of their intention to begin providing the service by completing a notification form on the [NHS BSA](#) website.

The Pharmacy Contractor Survey 2021 reported that 78 Wirral pharmacies, or 94% coverage, across all four constituencies are able to deliver this service which improves access to this vaccine, and this is considered adequate to meet the pharmaceutical needs of the population.

COVID-19 Lateral Flow Device Distribution Service

This service was being reviewed in the Winter/Spring of 2021/2022 in order to reflect developments in NHS Test and Trace policy and any alterations to COVID-19 restrictions. It has allowed pharmacy contractors to provide, on meeting the necessary requirements, improved access to COVID-19 testing by making lateral flow device (LFD) test kits readily available at community pharmacies for asymptomatic people, to identify COVID-positive cases in the community and break the chain of transmission.

At time of writing, and following Government announcement of 21st February 2022, this service ended on 24th February 2022 as part of Government review of COVID-19 Restrictions.

Hypertension Case Finding Service

In 2020, NHS England and NHS Improvement (NHSE&I) commenced a pilot involving pharmacies offering blood pressure checks to people 40 years and over. In some pharmacies within the pilot, where the patient's initial blood pressure reading was elevated, they would be offered 24-hour ambulatory blood pressure monitoring (ABPM), which is the gold-standard for diagnosis of hypertension.

Following the initial findings of the pilot, the Department of Health and Social Care (DHSC) and NHSE&I proposed the commissioning of a new Hypertension case-finding service, as an Advanced Service, in the Year 3 negotiations.

At time of writing, 53 of 83 Wirral pharmacies provided this service.

Stop Smoking Advanced Service (due to commence in 2022)

This service will be commissioned from 10th March 2022 with providers starting when they are ready to deliver the service. More details can be found at [Smoking Cessation Service \(SCS\): PSNC Main site](#). The service will enable NHS trusts to refer patients discharged from hospital to a community pharmacy of their choice to continue their smoking cessation care pathway, including providing medication and behavioral support as required, in line with the NHS England (NHSE) Long Term Plan care model for tobacco addiction.

Hepatitis C Antibody Testing Service

The Hepatitis C Antibody Testing Advanced service is part of NHS England and NHS Improvement's national programme to eliminate Hep C virus by 2025, five years earlier than the World Health Organisation goal. The service uses community pharmacies to target Persons Who Inject Drugs (PWIDs) for testing, as they are the healthcare venue most likely to be visited by that group of people.

The Community Pharmacy Hepatitis C Antibody Testing Service was added to the Community Pharmacy Contractual Framework (CPCF) in 2020, commencing on 1st September. The introduction of this new Advanced Service was originally trailed in the 5-year CPCF agreement, but its planned introduction in April 2020 was delayed by five months because of the COVID-19 pandemic. The overall aim of the service is to increase levels of testing for HCV amongst PWIDs who are not engaged in community drug and alcohol treatment services to: increase the number of diagnoses of HCV infection; permit effective interventions to lessen the burden of illness to the individual; decrease long-term costs of treatment; and decrease onward transmission of HCV.

As the national Hepatitis C Programme is an elimination exercise, the service will be time limited. In the first instance ran until 31st March 2022, but in March 2022, NHS England and NHS Improvement, the Department of Health and Social Care and PSNC agreed that the service should continue to be commissioned until 31st March 2023. Whilst any pharmacy that meets the service requirements can provide the service, but it will be of most interest to contractors that provide a locally commissioned needle and syringe programme service, with a sufficient number of clients, to make the investment in provision of the service worthwhile.

As of June 2022, 2 Wirral community pharmacies were contracted to provide the Hepatitis C Antibody Testing Service.

Enhanced services

For a fuller description of enhanced services, the reader is referred to Part 1 of this PNA.

Antiviral Stock Holding Service

The Antiviral Stock Holding Service in Community Pharmacy is commissioned as an Enhanced Service by NHS England (NHSE) (Cheshire and Merseyside).

This arrangement means that four community pharmacies hold a defined stock holding of antivirals which can be accessed during flu season for (but not exclusively for) care home outbreaks of influenza.

The four are pharmacies participating:

- Lloyds Pharmacy at Arrowe Park Hospital (Wirral)
- Appleton Village Pharmacy, Widnes (Halton)
- Stockton Health Pharmacy (Warrington)
- Well Pharmacy at Fountains Health Centre (Cheshire West & Chester)

The stock is accessed via the locally agreed commissioning process for prescribing arrangements to provide prescriptions for affected patients or residents in the case of an influenza outbreak.

The pharmacy dispenses against these prescriptions and will arrange (where required) to have the stock delivered or couriered to the care home.

Medication should be administered within 48 hours of a confirmed outbreak and as such this courier arrangement is to facilitate supply should the care home have difficulty in accessing the pharmacy. The pharmacies are available 365 days a year and their opening hours are published as part of the NHS England (NHSE) rota arrangements.

Outside of bank holidays or weekends the care homes normal dispensing pharmacy may easily be able to furnish such prescriptions within the defined timescales. As such this arrangement is designed to support the periods where access to the care homes pharmacy may be more difficult e.g. bank holidays or weekends. The Antiviral Stock Holding Service is commissioned as an Enhanced Service (by NHSE up until transition arrangements to the [Cheshire & Merseyside Health Care Partnership](#) as the new ICS organisation from July 2022).

Locally Commissioned Services

For the range of services provided by pharmacies across the constituencies (as recorded in the Pharmacy Contractors Survey 2021) please see [Appendix Ten](#).

Minor ailments service

Minor ailments are conditions which although troublesome to the patient can safely be treated at home under the supervision of a pharmacist. These schemes are advantageous because the patient has almost immediate access to treatment and qualified supervision with the added benefit that GP consultations are reduced.

Currently 74 of the 83 pharmacies across the borough are contracted to provide the Minor Ailments Scheme (also known 'Think Pharmacy') for patients to access any contracted pharmacy without an appointment for advice and treatment (contracted by NHS England (NHSE) up until transition arrangements to the [Cheshire & Merseyside Health Care Partnership](#) as new ICS organisation from July 2022).

The consultations are free, regardless of whether the pharmacist provides any treatment. Treatment is free of charge for people who get free prescriptions and no more than the prescription charge for people who do not. Treatments are available for eye infections, oral thrush in babies and breastfeeding mothers, migraine, uncomplicated urinary tract infections (UTIs) in women, thrush, and impetigo. By having such provision, it suggests that pharmaceutical need is adequately catered for.

These minor ailments schemes illustrate how community pharmacies can contribute to the self-care agenda. Although these services are not essential, they have secured an improvement in service delivery and access. Irrespective of these schemes, community pharmacies can also supply a huge range of other over-the-counter medicines and are always available to assist their customers in providing advice on self-care and self-medication. Pharmacies can also be accessed during evenings and at weekends which is a real benefit to patients accessing the service.

[See services listed by Wirral Health and Wellbeing Board on Community Pharmacy Cheshire and Wirral website.](#)

Community Pharmacy Intravenous Antibiotic Stockholding Service

The [Antimicrobial Stock Holding Service in Community Pharmacy](#) is commissioned as an Enhanced Service (contracted by NHSE up until transition arrangements to the [Cheshire & Merseyside Health Care Partnership](#) as new ICS organisation from July 2022).

This arrangement means that three community pharmacies hold a defined stock of antimicrobials for treatment initiated within the community which can be accessed 7 days per week.

The three pharmacies participating:

- Lloyds Arrowe Park Hospital (Wirral)
- Asda Bromborough (Wirral)
- Asda Liscard (Wirral)

The stock is accessed via the locally agreed commissioning process for prescribing arrangements (contracted by Wirral Clinical Commissioning Group (CCG) up to 31st March 2022 or transition date of new ICS organisation from July 2022) to provide prescriptions for affected patients or residents as required. The pharmacy dispenses against these prescriptions and will arrange (where required) to have the stock delivered or couriered to the care home.

[See services listed by Wirral Health and Wellbeing Board on Community Pharmacy Cheshire and Wirral website.](#)

Palliative Care Scheme

The Palliative Care Scheme service was commissioned by NHS Wirral CCG up to March 2022 with transition arrangements to [Cheshire & Merseyside Health Care Partnership](#) (new ICS organisation) from July 2022). This contract seeks to improve access across Wirral for patients and healthcare professionals to palliative care medicines when they are required within normal pharmacy opening hours, guaranteeing the continuous availability of emergency palliative care stock. Currently there are 12 contracted providers of this service across Wirral, some of which provide extended opening hours, suggesting that pharmaceutical need is adequately catered for.

[See services listed by Wirral Health and Wellbeing Board on Community Pharmacy Cheshire and Wirral website.](#)

Emergency Hormonal Contraception (EHC)

This service was commissioned by Wirral Community Foundation Trust Commissioned up to March 2022 with transition arrangements to [Cheshire & Merseyside Health Care Partnership](#) (new ICS organisation from July 2022).

This service is provided free of charge by a team of accredited pharmacists at a range of pharmacies across Wirral (in 70 pharmacies as at 07/12/21). More information can be found on the [Sexual Health Wirral](#) website. As individual pharmacists are accredited rather than pharmacies, this service cannot be guaranteed in any one pharmacy at any one particular time. However, all pharmacies can still sell Emergency Hormonal Contraception (EHC) over the counter (in line with the product license).

In Wirral, the pharmacies which provide EHC are reasonably distributed across the four constituencies, and this suggests that the pharmaceutical need is adequately catered for.

[See services listed by Wirral Health and Wellbeing Board on Community Pharmacy Cheshire and Wirral website.](#)

Needle - Syringe Exchange schemes (CGL Commissioned Services)

This service aims to assist clients to remain healthy until they are ready to cease injecting and achieve a drug-free life with appropriate support. It also aims to reduce the rate of blood-borne infections and drug related deaths among service users by:

- reducing the amount of sharing and other high risk injecting behaviours
- providing sterile injecting equipment and other support
- promoting safer injecting practices
- providing and reinforcing harm reduction messages including safe sex advice and advice on overdose preventions (e.g. risks of poly-drug use and alcohol use)
- improving the health of local communities by preventing the spread of blood borne infection and ensuring the safe disposal of used injecting equipment

Clearly, the problem of clients who engage in risky behaviour through potential misuse of needles is significant and represents an important pharmaceutical need. Latest data suggests that for Wirral, there are 14 pharmacies which provide a needle exchange service across the borough, 6 in Birkenhead, 5 in Wallasey, 3 in Wirral West but none in Wirral South (see [Appendix Ten](#))

[See services listed by Wirral Health and Wellbeing Board on Community Pharmacy Cheshire and Wirral website.](#)

Supervised consumption (CGL Commissioned Services)

This service provides supervised consumption of prescribed opiate maintenance treatment (methadone or buprenorphine) at the point of dispensing in the pharmacy. This ensures that the dose has been administered to the patient. Clients are also given support and advice including referral to primary care specialist centres where appropriate. There are 77 contracted pharmacies that provide this supervised consumption/administration service across the four constituencies. This suggests that the pharmaceutical need is being adequately catered for.

[See services listed by Wirral Health and Wellbeing Board on Community Pharmacy Cheshire and Wirral website.](#)

Alcohol Identification and Brief Advice Support and Guidance (CGL, Wirral Ways to Recovery (WWTR), Commissioned Services)

Pharmacies are contracted to deliver alcohol identification and brief advice through the identification, initial screening, and completion of the AUDIT questionnaire onto referral to Wirral Ways to Recovery (WWTR) (for specialist alcohol treatment). Latest data suggests Wirral has 20 pharmacies undertaking this work across all four constituencies suggesting that the pharmaceutical need is adequately catered for.

[See services listed by Wirral Health and Wellbeing Board on Community Pharmacy Cheshire and Wirral website.](#)

Smoking Cessation Services (ABL Health Commissioned Services)

This contract provides an innovative, evidence-based, specialised support service that demonstrates insight and knowledge of local communities and residents to provide specialist stop smoking service and respond appropriately to local need. The service has an e-cigarette friendly approach. The core function of this service is to assist people who are ready to quit smoking through behavioural change and access to pharmacological support. Achievement of this will be measured by four week quits, 12 week quits and follow up at 6 and 12 months. Pharmacies are able to refer customers into this specialised service but are not contracted to deliver.

The service is accessible to all population groups and targets those who smoke heavily or who find it most difficult to stop.

[See services listed by Wirral Health and Wellbeing Board on Community Pharmacy Cheshire and Wirral website.](#)

Sharps waste collection service (Wirral Council Waste & Environment Service)

Pharmacy contractors accept sharps for disposal (other than needle and syringe exchange), from all patients in an approved and sealed sharps container. Wirral had 78 pharmacies providing this service in 2020/21 across the four constituencies suggesting that the pharmaceutical need is adequately catered for.

[See services listed by Wirral Health and Wellbeing Board on Community Pharmacy Cheshire and Wirral website.](#)

Overall summary and conclusions

Health, pharmaceutical needs and strategic drivers

- the review of Wirral's resident population and its health needs has demonstrated the increasing proportion of older people in the borough when compared to England
- although the population looks set to increase slightly over coming years, from 325,200 to 334,500 (or 2.9%) between 2021 and 2040, estimates also suggest by 2025, within life of this PNA, that Wirral's population may only rise to 327,400 by 2025, with numbers expected to rise the most in those aged over 65 years, from 72,467 and to 93,252
- by 2040 it could be possible that over one-quarter, or almost 28% of Wirral residents, will be aged above 65 compared to around one-fifth (22%) over 65 in 2021, this increase will be gradual and slight by 2025
- considering population numbers, and the expected slow increase to 2040, alongside expected housing and regeneration development numbers, there are no foreseen increases in the local population because of major developments
- due to a range of factors such as co-morbidities and long-term conditions older people can use more medicines than a younger population and as such community pharmacies could experience an ever-increasing workload in terms of dispensing and support for self-care

- the population forecast also suggests static growth in the number of children (aged 0-19 years) between now and 2025
- the 2,958 live births in Wirral in 2020 (the latest year for which data is available), provides the lowest number of births since Wirral was formed as a Metropolitan Borough in 1974, with a forecast expecting this reducing trend to continue
- although mortality rates have decreased in recent years in Wirral, they are still above average for both, cardiovascular and respiratory disease
- with cancers and cardiovascular disease the largest causes of avoidable deaths for the borough
- the health of those most disadvantaged remains a key issue for the borough with
 - female life expectancy almost 12 years lower in Birkenhead and Tranmere ward compared to Greasby, Frankby and Irby ward
 - and almost 13 years different for males between those same two wards
 - with a male in Birkenhead & Tranmere ward (70.4) seeing potentially 17 years lower life expectancy than a female in Greasby, Upton and Irby ward (87.3)
- the geographic spread of pharmacy contractors across the borough provides necessary support and access to the range of needs and issues faced by residents
- Wirral residents have similar lifestyle issues as in the rest of the country such as a higher prevalence of obesity or overweight and smoking and alcohol consumption. Community pharmacies have a key role in helping to tackle these and other issues such as substance misuse and sexual health.
- The priorities for the Health and Wellbeing Board and other key organisations and partnerships have been outlined in part two of this document. Pharmaceutical need related to these overarching aims could include support for medicines management of many Wirral residents and their diverse needs.
- There are a number of regeneration, housing and estate improvements being considered across the borough. These should continue to be considered in terms of their potential and actual impacts on current and future pharmaceutical services and needs
- From our public survey, residents felt there were some improvements could be explored to the local pharmaceutical and related services including the potential for the provision of prescribing by a pharmacist for minor ailments and antibiotics, extending opening hours (evening and weekends) and widening communication routes for current range of services/options. These aspects should be explored in more detail in the life of this PNA.

Meeting the pharmaceutical need

- parts 1 to 3 of this PNA suggest that Wirral has adequate geographical coverage of pharmacies, a high number of pharmacies per head of population and full week coverage in terms of opening hours across multiple contracted hours pharmacies

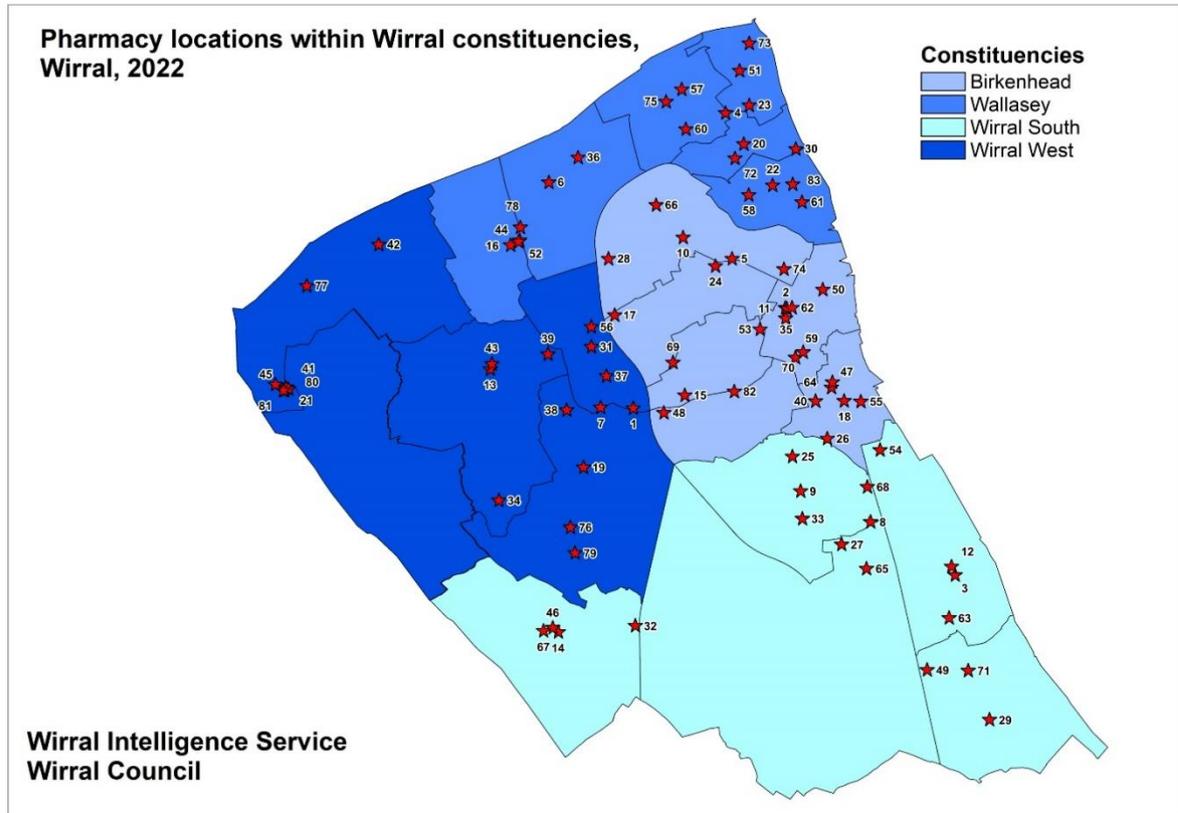
- there is a broad range of advanced and locally commissioned services provided in addition to essential services
- future developments in Wirral, for example, in terms of regeneration, extra care housing and primary care estates, should be monitored and changes considered in terms of any impact on future local pharmaceutical needs
- finally, it is recommended that health and care commissioners take into account the accessibility, quality, and potential for community pharmacy service development when commissioning services. It is also suggested that commissioners may wish to consider the opportunity to engage with pharmacy contractors in relation to services not traditionally thought of as pharmaceutical but potentially could be effectively delivered from pharmacies

Pharmaceutical Needs Assessment

Part 4 Appendices

Part 4: Pharmaceutical Needs Assessment - Appendices

Appendix One: Wirral Pharmacy Contractors (Map plus Legend and addresses)



URN	Pharmacy Trading Name	Pharmacy Address
1	Asda Pharmacy (Arrowe Park)	Woodchurch Road, Upton, Wirral, CH49 5PD
2	Asda Pharmacy (Birkenhead)	22 Grange Road, Birkenhead, CH41 6EB
3	Asda Pharmacy (Bromborough)	Welton Road, Croft Business Park, Bromborough, Wirral, CH62 3QP
4	Asda Pharmacy (Liscard)	Seaview Road, Liscard, Wallasey, CH45 4NZ
5	Birkenhead Pharmacy	31 Laird Street, Birkenhead, Wirral, CH41 8DB
6	Blackheath Pharmacy	113 Reeds Lane, Leasowe, Wirral, CH46 1QT
7	Boots (Arrowe Park)	Commonfield Road Surgery, 156 Commonfield Road, Wirral, CH49 7LP
8	Boots (Bebington Church Road)	21 Church Road, Lower Bebington, Wirral, CH63 7PG
9	Boots (Bebington Teehey Lane)*	118 Teehey Lane, Higher Bebington, Wirral, CH63 8QT
10	Boots (Bidston)	30 Hoylake Road, Bidston, Birkenhead, CH41 7BX
11	Boots (Birkenhead)	215 Grange Road, Birkenhead, CH41 2PH,
12	Boots (Bromborough)	Welton Road, Bromborough, Wirral, CH62 3PN
13	Boots (Greasby)	148 Greasby Road, Greasby, Wirral, CH49 3NQ
14	Boots (Heswall)	218-220 Telegraph Road, Heswall, Wirral, CH60 0AL
15	Boots (Holmlands)	8-10 Holmlands Drive, Prenton, Birkenhead, CH43 0TX
16	Boots (Moreton)	254 Hoylake Road, Moreton, CH46 6AF
17	Boots (Noctorum)	395 Upton Road, Prenton, Birkenhead, CH43 9SE
18	Boots (Rock Ferry)	206 Bedford Road, Rock Ferry, Birkenhead, CH42 2AT
19	Boots (Thingwall)	The Warrens Medical Centre, Arrowe Park Road, Thingwall, Wirral, CH49 5PL
20	Boots (Wallasey)	36 Liscard Way, Wallasey, CH44 5TP
21	Boots (West Kirby)	11-13 The Crescent, West Kirby, CH48 4HL
22	Campbells Chemist	175 Poulton Road, Wallasey, Wirral, CH44 9DG
23	Carringtons Pharmacy	128 Rake Lane, Wallasey, CH45 5DL

* Boots (Teehey Lane) to be known as Teehey Lane Pharmacy (Logic Healthcare)

URN	Pharmacy Trading Name	Pharmacy Address
24	Cloughton Pharmacy	161 Park Road North, Cloughton, Birkenhead, CH41 0DD
25	Cohens Pharmacy	4 Broadway, Higher Bebington, Wirral, CH63 5NH
26	Dale Pharmacy	218 Bebington Road, Rock Ferry, Wirral, CH42 4QF
27	Day Lewis (Bebington)	14-16 Cross Lane, Bebbington, Cheshire, CH63 3AL
28	Day Lewis (Birkenhead)	41 Fender Way, Beechwood, Birkenhead, CH43 7ZJ
29	Dudleys Chemist	1194 New Chester Road, Eastham, Wirral, CH62 9AE
30	Egremont Pharmacy	9A King Street, Wallasey, CH44 8AT
31	Heatherlands Pharmacy	396 New Hey Road, Upton, Wirral, CH49 9DA
32	Heswall Hills Pharmacy	119 Brimstage Road, Heswall, Wirral, CH60 1XF
33	Higher Bebington Pharmacy	The Medical Centre, Brackenwood Road, Bebington, Wirral, CH63 2LR
34	Irby Pharmacy	39 Thingwall Road, Irby, Wirral, CH61 3UE
35	Jamiesons Pharmacy	44 Whetstone Lane, Birkenhead, CH41 2TF
36	Leasowe Pharmacy	Leasowe Primary Care Centre, Hudson Road, Leasowe, Wirral, CH46 2QQ
37	Lees Pharmacy	98 Hoole Road, Wood Church, Birkenhead, Wirral, CH49 8EG
38	Lloyds Pharmacy (Arrowe Park)	Arrowe Park Hospital, Arrowe Park Road, Upton, Wirral, CH49 5PE
39	Lloyds Pharmacy (Upton Sainsburys)	Sainsburys Superstore, Upton-By-Pass, Upton, CH49 6QG
40	Lloyds Pharmacy (Victoria Health Centre)	Formerly Victoria Park Health Centre, Bedford Avenue, Rock Ferry, Birkenhead, CH42 4QJ
41	Lloyds Pharmacy (West Kirby)	35 Grange Road, West Kirby, Wirral, CH48 4DZ
42	Manor Pharmacy	13 Station Approach, Meols, Wirral, CH47 8XA
43	McKeevers Chemist	Greasby Health Centre, 424 Frankby Road, Greasby, Wirral, CH49 3PH
44	Moreton Pharmacy	205-207 Hoylake Road, Moreton, Wirral, CH46 0SJ
45	Morrisons Pharmacy	Morrisons Store, Dee Lane, West Kirby, Wirral, CH48 0QA
46	Oakley Pharmacy	270 Telegraph Road, Heswall, Wirral, CH60 7SG

URN	Pharmacy Trading Name	Pharmacy Address
47	Old Chester Road Pharmacy	296 Old Chester Road, Rock Ferry, Wirral, CH42 3XD
48	Prenton Dell Pharmacy	Villa Medical Centre, Roman Road, Prenton, Wirral, CH43 3DB
49	Rowlands Pharmacy (Bromborough)	154 Allport Road, Bromborough, Wirral, CH62 6BB
50	Rowlands Pharmacy (Chanins)	73 Market Street, Birkenhead, CH41 6AN
51	Rowlands Pharmacy (Field Road)	Field Road Health Centre, Field Road, Wallasey, CH45 5BG
52	Rowlands Pharmacy (Moreton)	2A Chadwick Street, Moreton, Wirral, CH46 7TE
53	Rowlands Pharmacy (Oxton Balls Road)	40 Balls Road, Birkenhead, Prenton, CH43 5RE
54	Rowlands Pharmacy (Parkfield)	Parkfield Medical Centre, Sefton Road, New Ferry, Wirral, CH62 5HS
55	Rowlands Pharmacy (Rock Ferry)	Riverside Health Centre, 525 New Chester Road, Rock Ferry, Birkenhead, CH42 2AG
56	Rowlands Pharmacy (Upton)	Upton Group Practice, 32 Ford Road, Upton, Wirral, CH49 0TF
57	Rowlands Pharmacy (Wallasey Village)	62 Grove Road, Wallasey, CH45 3HW
58	Somerville Pharmacy	Somerville Medical Centre, 71 Gorsey Lane, Wallasey, Wirral, CH44 4SP
59	St Catherines Pharmacy	St Catherines Community Hospital, Church Road, Birkenhead, CH42 0LQ
60	St Hilary's Pharmacy	Broadway, Wallasey, Wirral, CH45 3NA
61	St Pauls Pharmacy	75-77 St Paul's Road, Wallasey, CH44 7AL
62	Superdrug Pharmacy	203-205 Grange Road, Birkenhead, CH41 2PF
63	Swettenham Chemists (Bromborough)	18 Allport Lane, Bromborough, Wirral, CH62 7HP
64	Swettenham Chemists (Rock Ferry)	249 Old Chester Road, Birkenhead, CH42 3TD
65	Temple Pharmacy	3 Lancelyn Court Precinct, Spital, Bebington, Wirral, CH63 9JP
66	Tesco Pharmacy (Bidston)	Tesco Store, Bidston Moss Extra, Bidston Link Road, Birkenhead, CH43 7AA
67	Tesco Pharmacy (Heswall)	Tesco Stores, Telegraph Road, Heswall, Wirral, CH60 7SL
68	The Pharmacy Bebington	176 Bebington Road, Bebington, Wirral, CH63 7PD
69	Townfield Pharmacy	Townfield Health Centre, Townfield Close, Birkenhead, CH43 9JW

URN	Pharmacy Trading Name	Pharmacy Address
70	Tranmere Pharmacy	4 Tranmere Court, Tranmere, Birkenhead, CH42 5AB
71	Tree Tops Pharmacy	Tree Tops Primary Health Care Centre, 49 Bridle Rd, Bromborough, Wirral, CH62 6EE
72	Victoria Central Pharmacy	Victoria Central Primary Care Centre, Mill Lane, Wallasey, CH44 5UF
73	Victoria Pharmacy	100 Victoria Road, New Brighton, Wallasey, CH45 2JF
74	Vittoria Healthcare	134 St. Anne Street, Birkenhead, CH41 3SJ
75	Wallasey Village Pharmacy	271 Wallasey Village, Wallasey, Wirral, CH45 3LR
76	Weinronk Pharmacy	411-413 Pensby Road, Pensby, Wirral, CH61 9PF
77	Well Pharmacy (Hoylake)	40 Market Street, Hoylake, Wirral, CH47 2AF
78	Well Pharmacy (Moreton)	Pasture Road Health Centre, Pasture Road, Moreton, Wirral, CH46 8SA
79	Well Pharmacy (Pensby)	309 Pensby Road, Pensby, CH61 9ND
80	Welsh's Pharmacy	40 Grange Road, West Kirby, Wirral, CH48 4EF
81	Wilson's Chemist	17 The Crescent, West Kirby, Wirral, CH48 4HW
82	Woodchurch Road Pharmacy	379 Woodchurch Road, Prenton, Birkenhead, CH42 8PE
83	Wyn Ellis & Son Pharmacy	32 Poulton Road, Wallasey, CH44 9DQ

Appendix Two: Public and Pharmacy Contractors Survey – blank questionnaires

Link to - Public Survey

- [blank questionnaire](#) or <https://www.wirralintelligenceservice.org/media/3565/pna-pharmacy-questionnaire-2021-final-28-10-21-with-return-address.pdf>

Link to - Pharmacy Contractors Survey

- [blank questionnaire](#) or <https://www.wirralintelligenceservice.org/media/3534/pna-survey-pharmoutcomes.pdf>

Appendix Three: Public Survey on Wirral Pharmacy services – responses

Wirral Residents Survey on Pharmacy Services 2021 - [Results](#)

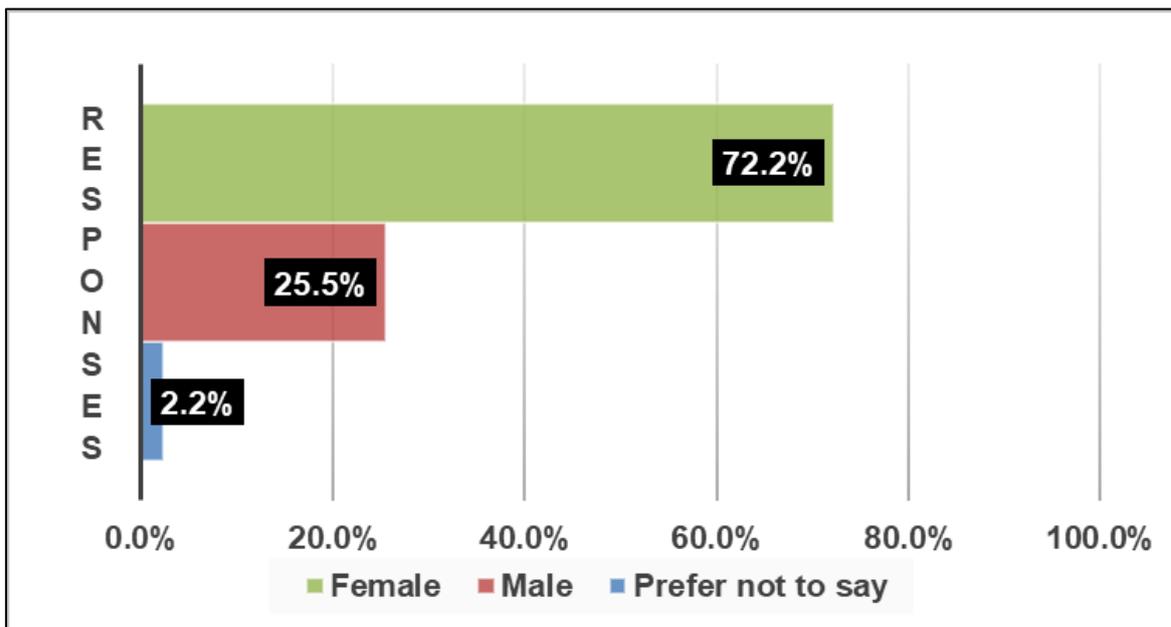
Or got to: <https://www.wirralintelligenceservice.org/media/3567/wirral-intelligence-service-pna-public-survey-questions-march-2022-v2.pdf>

Demographic Headlines for Residents Survey on Pharmacy Services

Demographics

As can be seen in **Figure A** below the split between males and females completing the survey was 72.2% female and 25.5% male. This is very different from the previous two surveys. In 2017 it was 55.1% female respondents and 44.9% for males which was similar to the 2013 Public Survey at 52.6% females and 47.4% males.

Figure A: Gender profile of respondents to Wirral Pharmacy Survey 2021



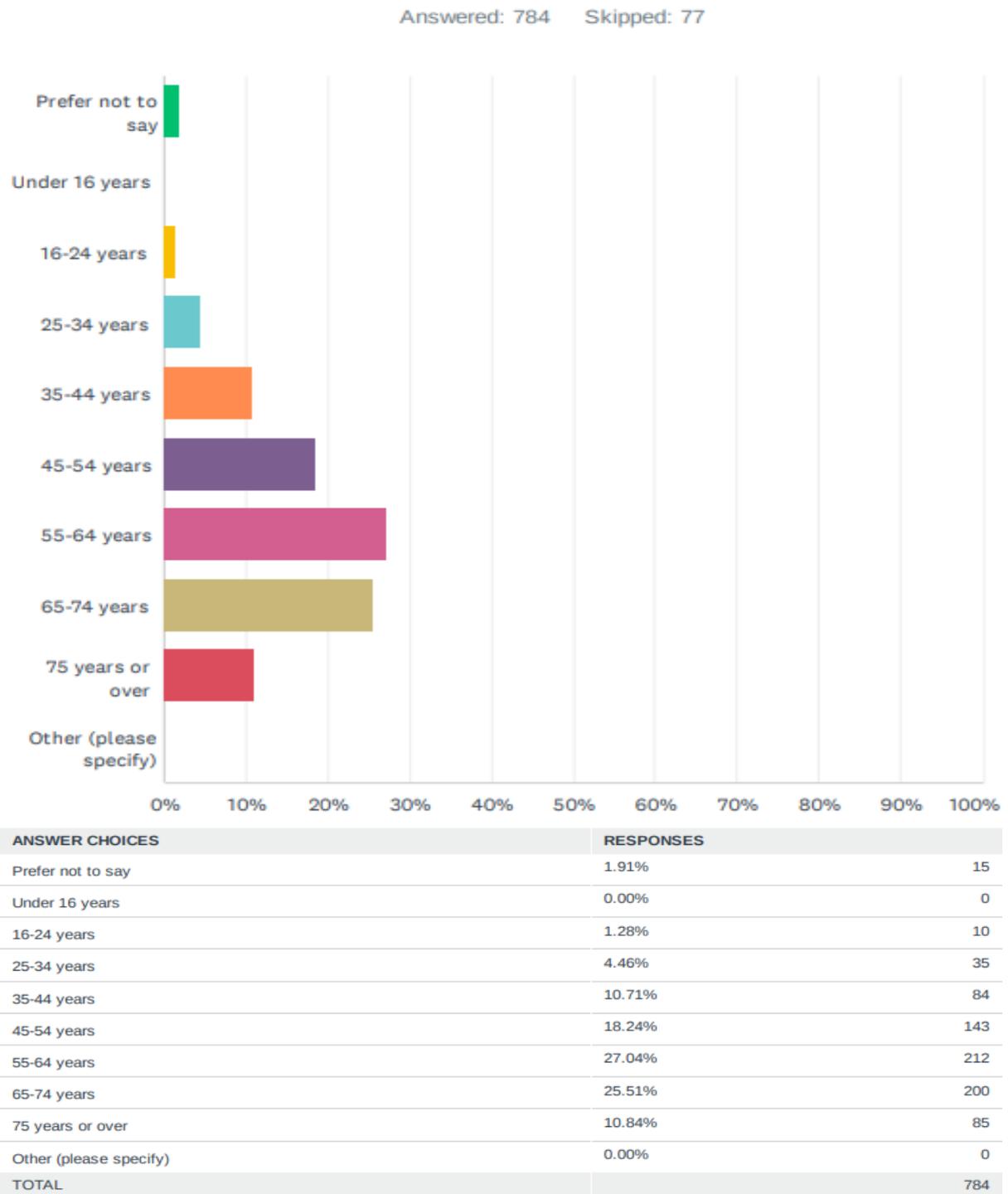
Source: Wirral Residents: PNA Survey 2021

Notes: Survey was conducted in November 2021 with 849 responses received. 80 respondents skipped this question. See all answers and Public Survey Questions in [Appendix Two](#) and [Appendix Three](#).

In 2017 the majority of respondents were aged over 60 with almost two-thirds of all respondents (64.5%) in this age group. In **Figure B** below, the 2021 results suggest that this had dropped to 36% of respondents being aged over 65. With 2021 results seeing those people aged over 35 accounting for over 92% of all responses to the survey.

This may be reflective of the age demographic of people who use pharmacies more often and/or linked to health problems associated with age. If further insight is required for the younger population, then a more specific survey would be required to target this group.

Figure B: Age profile of respondents to Wirral Pharmacy Survey 2021



Source: Wirral Residents: PNA Survey 2021

Notes: Survey was conducted in November 2021 with 849 responses received. 77 respondents skipped this question. See all answers and Public Survey Questions in [Appendix Two](#) and [Appendix Three](#).

In **Table A** below this reflects the ethnicity of those people who completed the survey. The vast majority were from a white background, predominantly White British and White English with 91.3% in these groups with other White Ethnic Groups accounting for 7.2%. The next largest group numerically were those who had skipped the question with 89 (10.5%) withholding this information. Only 1.4%, or 11 respondents, identified outside of these White/White Other groups.

The known ethnicity status for Wirral, as per Census 2011 and recent Wirral JSNA updates suggests that this survey response is an under representation of local Black, Asian and Minority ethnic resident views.

Table A: Ethnicity profile of respondents to Wirral Pharmacy Survey 2021

Ethnicity: Do you identify yourself as:		
Answer Choices	Percentage	Number
White - British	60.0%	456
White - English	31.3%	238
White - Irish	3.9%	30
White - Other	2.1%	16
White - Welsh	1.2%	9
Other recorded*	1.4%	11
	100.0%	760
Other - skipped question		89
Total		849

Source: Wirral Residents: PNA Survey 2021

Notes: Survey was conducted in November 2021 with 849 responses received with 89 respondents skipping this question. Percentages are rounded so totals may not always achieve 100.

*Other recorded ethnicity was less than 5 for each of the following groups so are not published but they included White - Scottish, Asian - Indian, Asian - Other Background, Black - British, Black - Caribbean, Chinese, Other Chinese background, Mixed Ethnic Background - Asian & White, Asian - Bangladeshi, Asian - Pakistani, Black - African, Black - Other Background, Mixed Ethnic Background - Black African & White, Mixed Ethnic Background - Caribbean & White, Mixed Ethnic Background - Other, and White - Gypsy / Traveller
See all answers and Public Survey Questions in [Appendix Two](#) and [Appendix Three](#).

In **Table B** highlights the number of respondents who recorded themselves as disabled (as defined by the Equality Act 2010). There were 181 people, or 23.5% of those people who answered this question identified with a disability. These disabilities are also recorded in Table D. Those disabilities most recorded where physical (27.9%), with long term illness (27.3%) and mental health (14.4%).

Table B: Disability profile of respondents to Wirral Pharmacy Survey 2021

Are you disabled*?		
*Disability is defined in the Equality Act 2010 as 'a physical or mental impairment that has a substantial and long-term (12 months or more) adverse effect on your ability to carry out normal day-to-day activities'.		
Answer Choices	Percentage	Numbers
Yes	23.5%	181
If yes, is your disability related to: (please tick all that apply)		
Answer Choices	Percentage	Numbers
Physical	27.9%	89
Long term illness	27.3%	87
Mental health	14.4%	46
Deaf/hard of hearing	12.2%	39
Other (please specify)*	5.6%	18
<i>Prefer not to say</i>	4.7%	15
Learning	4.7%	15
Visual	3.1%	10
Total Answers		319

Source: Wirral Residents: PNA Survey 2021

Notes: Survey was conducted in November 2021 with 849 responses received with 77 respondents skipping question 36 (Are you disabled*?) and 645 skipping question 37 (type of disability). Of those 205 answering Q36, they gave 319 answers. Percentages are rounded so totals may not always achieve 100. *Other includes self-reported as Asthma/Hay fever, Musculoskeletal/ Chronic pain, related to stroke, dietary, disabled relative, cancer, cerebral palsy, diabetic, mobility, Epilepsy, Thyroid, age-related, problems walking, autism and related to brain haemorrhage. See all answers and Public Survey Questions in [Appendix Two](#) and [Appendix Three](#)

Appendix Four: Pharmacy Contractors survey – responses

Wirral Pharmacy Contractors Survey 2021 - Results

The questionnaire was a slightly modified version of the one produced by the Pharmaceutical Services Negotiation Committee (PSNC) dated January 2017 (version five). It was amended centrally accommodating comments from public health intelligence analysts from across Cheshire and Merseyside and members of the Local Pharmaceutical Committee (LPC) and NHS England (NHSE).

The final version was presented to pharmacy contractors in an electronic version only on the PharmOutcomes platform. PharmOutcomes is an online database which is available in all pharmacies in Cheshire West and Chester. The questionnaire was “live” at the beginning of June 2021 and eventually closed in September 2021. Non-responders were encouraged to complete the questionnaire by colleagues from the LPC throughout this period.

Through ongoing contact with pharmacy contractors, a response rate of one hundred percent (100%) was achieved. Data from PharmOutcomes were initially downloaded into a single Excel spreadsheet (CSV format) and analysed for further interpretation.

In addition to the data for the 83 community pharmacies presented in this section, the questionnaire also provided details such as each pharmacy’s opening/closing hours. This information is presented elsewhere in the PNA.

These are the questions posed in the pharmacy contractor survey 2021.

Question: Is there a consultation area? (2021 PharmOutcomes Survey)

Consultation Facilities - Enclosed	Yes	Percentage of all Pharmacy Premises (%)
Available (including wheelchair access) on premises	69	83.1%
Available (without wheelchair access) on premises	13	15.7%
Other: current cons room is due to be relocated and updated	1	1.2%
Total Wirral Pharmacies	83	100.0%

Source: Wirral PNA PharmOutcomes Survey 2021

Note: Figures in table above were collated in November 2021 so may not match later data on current provision. The options in the table reflect those chosen by pharmacies. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Question: Is the consultation area enclosed? (2021 PharmOutcomes Survey)

Consultation Facilities - Enclosed	Yes	Percentage of all Pharmacy Premises (%)
Consultation Facilities Enclosed	80	96.4%
Consultation Facilities Not Enclosed	3	3.6%
No Consultation Facilities	0	0.0%
Total Wirral Pharmacies	83	100.0%

Source: Wirral PNA PharmOutcomes Survey 2021

Note: Figures in table above were collated in November 2021 so may not match later data on current provision. The options in the table reflect those chosen by pharmacies. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Question: Number of consultation areas (2021 PharmOutcomes Survey)

Consultation Facilities - Number	Yes	Percentage of all Pharmacy Premises (%)
Consultation Area x1	77	92.8%
Consultation Area x2	6	7.2%
No Consultation Facilities	0	0.0%
Total Wirral Pharmacies	83	100.0%

Source: Wirral PNA PharmOutcomes Survey 2021

Note: Figures in table above were collated in November 2021 so may not match later data on current provision. The options in the table reflect those chosen by pharmacies. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Question: Consultations off site (2021 PharmOutcomes Survey)

Consultation - Off-site	Yes	Percentage of all Pharmacy Premises (%)
None apply	58	69.9%
Off-site consultation room approved by NHS	25	30.1%
Willing to undertake consultations in patients home/other suitable site	0	0.0%
Other	0	0.0%
Total Wirral Pharmacies	83	100.0%

Source: Wirral PNA PharmOutcomes Survey 2021

Note: Figures in table above were collated in November 2021 so may not match later data on current provision. The options in the table reflect those chosen by pharmacies. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Question: Hand Washing and Toilet Facilities (2021 PharmOutcomes Survey)

Hand washing and Toilet Facilities	Yes
Hand washing in consultation area	52
None	22
Have access to toilet facilities	15
Hand washing facilities close to consultation area	9

Source: Wirral PNA PharmOutcomes Survey 2021

Note: Figures in table above were collated in November 2021 so may not match later data on current provision. Responses total more than 83 given Respondents could tick more than one box on the survey question. The options in the table reflect those chosen by pharmacies. Also note it is not a contractual obligation to provide these facilities public facing at the time of survey. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Key Findings

- There are 69 of 83 pharmacies (83.1%) with available consultation areas are wheelchair accessible and all but one pharmacy currently has a consultation area
- Considering all 83 premises, then there are 80 (96.4%), that have at least one consultation area enclosed
- All 83 pharmacies have at least one consultation area to meet customers, with 6 venues having 2 consultation areas
- Over 30% (25 pharmacy outlets) are willing to conduct off site reviews when approved by NHS.
- There are no hand washing or toilet facilities in 22 pharmacy premises

Question: Essential Services (Appliances) that pharmacy dispenses (2021 PharmOutcomes survey)

Dispensed Appliances	Yes	Percentage of all Pharmacy Premises (%)
Stoma appliances & Dressings & Incontinence appliances	55	66.3%
None (of these items are dispensed)	17	20.5%
Dressings	6	7.2%
Incontinence & Dressings	4	4.8%
Stoma appliances only	1	1.2%
Incontinence appliances only	0	0.0%
Stoma appliances & Dressings	0	0.0%
Stoma appliances & Incontinence appliances	0	0.0%
Total Wirral Pharmacies	83	100.0%

Source: Wirral PNA PharmOutcomes Survey 2021

Note: Figures in table above were collated in November 2021 so may not match later data on current provision. The options in the table reflect those chosen by pharmacies. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Key Findings

- 65 of the 83 pharmacies dispense dressings (only or as well as other essential services), both stoma only and incontinence appliances only are available in far fewer venues
- Where essential services are provided (55 of 83 pharmacies) are offer all three appliances to the public

Question: Advanced Services provided by pharmacy (2021 PharmOutcomes Survey)

Services	Currently Providing	Percentage of providers (%)	Soon*	Percentage of providers (%)	No**	Percentage of providers (%)	Total
New Medicine Service	82	98.8%	0	0.0%	1	1.2%	83
Appliance Use Review Service	13	15.7%	0	0.0%	70	84.3%	83
Stoma Appliance Customisation Service	14	16.9%	1	1.2%	68	81.9%	83
NHS Flu Vaccination Service	78	94.0%	2	2.4%	3	3.6%	83
NHS Community Pharmacist Consultation Service	79	95.2%	1	1.2%	3	3.6%	83

Source: Wirral PNA PharmOutcomes Survey 2021

Notes:

* Soon - intending to provide within the next 12 months

** No – Not intending to provide

Figures in table above were collated in November 2021 so may not match later data on current provision. The options in the table reflect those chosen by pharmacies.

See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Key Findings

- Advanced Services are those services which are commissioned nationally under the NHS Community Pharmacy Contractual Framework (CPCF)
- over 95% deliver NHS Community Pharmacist Consultation Service (CPCS) and over 98% deliver the New Medicine Service (NMS)
- both CPCS and NMS useful for people with long-term conditions to help improve their understanding and adherence to their medication, are thus useful tools to promote self-care and help manage long term conditions and reduce pressure on other Primary care services
- it is encouraging to note that over 94% of pharmacies (no.78) participate in the national NHS flu vaccination scheme
- There are 13 pharmacies (15.7%) delivering appliance use reviews and 14 (16.9%) providing stoma appliance customisation

Commissioned Services provided by pharmacy (2021 PharmOutcomes Survey)

Service	Currently Providing NHS scheme [^]	%	Willing and able [*]	%	Currently providing private scheme ^{^^}	%	Not willing or able ^{**}	%	Total
Sharps Disposal Service	65	78.3%	16	19.3%	0	0.0%	2	2.4%	83
Home Delivery Service (not appliances)	31	36.0%	22	26.5%	24	28.9%	9	10.8%	86
Gluten Free Food Supply	13	15.5%	48	57.8%	1	1.2%	22	26.5%	84
Care Home Service	13	15.3%	38	45.8%	0	0.0%	34	41.0%	85
Language Access Service	5	6.0%	48	57.8%	0	0.0%	30	36.1%	83
Anticoagulant Monitoring	0	0.0%	60	72.3%	0	0.0%	23	27.7%	83
Anti-viral Distribution	0	0.0%	62	74.7%	0	0.0%	21	25.3%	83
Schools Service	0	0.0%	57	68.7%	1	1.2%	25	30.1%	83

Source: Wirral PNA PharmOutcomes Survey 2021

Notes: Some pharmacies picked multiple options; this is why in some cases the totals are greater than the overall number of pharmacies

[^] CP – Currently providing NHS funded service

^{^^} PP – Currently providing company led/private service

^{*} WA - Willing and able to provide if commissioned

^{**} NW - Not willing or able to provide service

Figures in table above were collated in November 2021 so may not match later data on current provision. The options in the table reflect those chosen by pharmacies.

Gluten Free Food Supply is part of standard pharmacy contract (not a formal NHS Contracted Service) and as such a prescription should be honoured at any pharmacy if presented – above question relates to additional services by choice

Sharps Disposal Service – in 2019/20 there were 78 Pharmacies who claimed payment for this service
See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Key Findings

- for most of these services, pharmacies are either 'willing and able' to provide (if commissioned) or are providing them already
- sharps disposal is commissioned by Local Authority, Waste and Environment Services
- however, none of the other services listed in the above table are actually commissioned by an NHS body which suggests there is some confusion regarding services which are being commissioned

Urgent Care provided by pharmacy (2021 PharmOutcomes Survey)

Service	Currently Providing NHS scheme [^]	%	Willing and able [*]	%	Currently providing private scheme ^{^^}	%	Not willing or able ^{**}	%	Total
Minor Ailments Scheme	68	81.9%	11	13.3%	0	0.0%	4	4.8%	83
Palliative Care scheme	12	14.3%	53	63.9%	2	2.4%	17	20.5%	84
On Demand Availability of Specialist Drugs Service	3	3.6%	50	60.2%	0	0.0%	30	36.1%	83
Emergency Supply Service (Dressings)	0	0.0%	62	74.7%	2	2.4%	20	24.1%	84
Out of Hours Services	0	0.0%	51	61.4%	1	1.2%	32	38.6%	84

Source: Wirral PNA PharmOutcomes Survey 2021

Notes: Some pharmacies picked multiple options; this is why in some cases the totals are greater than the overall number of pharmacies.

For [^] ^{^^} ^{**} please see notes for Commissioned Services above

Figures in table above were collated in November 2021 so may not match later data on current provision.

The options in the table reflect those chosen by pharmacies though in some cases where there are known numbers of commissioned services then these have been used for accuracy.

Minor Ailments Scheme – 68 of 83 identified as providing, 73 are commissioned by Wirral CCG

Palliative Care Scheme – 18 of 83 identified in survey as providing, 12 are commissioned by Wirral CCG

See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

On Demand Availability of Specialist Drugs is commissioned by Wirral CCG, currently with 3 pharmacies contracted to provide this service

Key Findings

- Minor Ailments Scheme is commissioned for 73 of 83 pharmacy providers and discussed elsewhere in this PNA
- There are 12 pharmacies providing a contracted Palliative Care scheme
- 3 pharmacies currently provide access to the antibiotic stockholding service in community pharmacy and is commissioned as a local service currently provided through NHS Wirral CCG ([see ICS update](#))
- A similar yet different but enhanced service, antiviral stockholding and supply, provided by NHS England (NHSE) across Cheshire and Merseyside, is discussed elsewhere in the PNA

Disease Specific Medicines Management Service provided by pharmacy (2021 PharmOutcomes Survey)

Service	Currently Providing NHS scheme [^]	%	Willing and able [*]	%	Currently providing private scheme ^{^^}	%	Not willing or able ^{**}	%	Total
Allergies	0	0.0%	67	80.7%	0	0.0%	16	19.3%	83
Alzheimer's - Dementia	0	0.0%	68	81.9%	0	0.0%	15	18.1%	83
Asthma	0	0.0%	73	88.0%	0	0.0%	10	12.0%	83
Chronic Obstructive Pulmonary Disease (COPD)	0	0.0%	70	84.3%	0	0.0%	13	15.7%	83
Coronary Heart Disease (CHD)	0	0.0%	69	83.1%	0	0.0%	14	16.9%	83
Chronic Kidney Disease (CKD)	0	0.0%	65	78.3%	0	0.0%	18	21.7%	83
Depression	0	0.0%	69	83.1%	0	0.0%	14	16.9%	83
Diabetes type I	0	0.0%	70	84.3%	0	0.0%	13	15.7%	83
Diabetes type II	0	0.0%	70	84.3%	0	0.0%	13	15.7%	83
Epilepsy	0	0.0%	68	81.9%	0	0.0%	15	18.1%	83
Heart Failure	0	0.0%	67	80.7%	0	0.0%	16	19.3%	83
Hypertension	0	0.0%	72	86.7%	0	0.0%	11	13.3%	83
Parkinson's Disease	0	0.0%	67	80.7%	0	0.0%	16	19.3%	83

Source: Wirral PNA PharmOutcomes Survey 2021

Notes: For ^{^^} ^{*} ^{**} please see notes for Commissioned Services above.

Figures in table above were collated in November 2021 so may not match later data on current provision.

The options in the table reflect those chosen by pharmacies. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Key Findings

- no disease specific medicines management services are currently provided although there is strong support from providers to provide them if the funding was available for such type of commissioned development in the future

Public Health Services provided by pharmacy (2021 PharmOutcomes Survey)

Service	Currently Providing NHS scheme ^A	%	Willing and able*	%	Currently providing private scheme ^{AA}	%	Not willing or able ^{**}	%	Total
Emergency Hormonal Contraception Service	55	64.0%	20	23.3%	8	9.3%	3	3.5%	86
Quickstart Contraception	0	0.0%	66	76.7%	5	5.8%	13	15.1%	84
Contraception Service	0	0.0%	65	75.6%	6	7.0%	12	14.0%	83
Chlamydia Testing	0	0.0%	60	69.8%	1	1.2%	22	25.6%	83
Chlamydia Treatment Service	0	0.0%	63	73.3%	1	1.2%	19	22.1%	83
Contraception Injection Service	0	0.0%	56	65.1%	0	0.0%	27	31.4%	83
Needle and Syringe Exchange Service	14	16.9%	49	57.0%	0	0.0%	20	23.3%	83
Obesity Management (adults and children)	0	0.0%	68	79.1%	2	2.3%	14	16.3%	84
NRT Voucher Dispensing Service	0	0.0%	75	87.2%	0	0.0%	8	9.3%	83
Smoking Cessation Counselling Service	0	0.0%	70	81.4%	1	1.2%	13	15.1%	84
Supervised Administration	66	79.5%	13	15.1%	0	0.0%	4	4.7%	83
Varenicline (Champix) PGD Service	0	0.0%	69	80.2%	2	2.3%	12	14.0%	83

Source: Wirral PNA PharmOutcomes Survey 2021

Notes: For ^{^ ^ ^} ^{**} please see notes for Commissioned Services above.

Figures in table above were collated in November 2021 so may not match later data on current provision.

The options in the table reflect those chosen by pharmacies. Some pharmacies picked multiple options; this is why in some cases the totals are greater than the overall number of pharmacies.

Emergency Hormonal Contraception is a locally commissioned service, with 70 contracted pharmacies (as at 07/12/21)

Needle and Syringe exchange is a locally commissioned service with CGL, with 16 contracted pharmacies

Supervised Administration is a locally commissioned service with CGL, with 77 currently contracted pharmacies

QuickStart Contraception is currently not a commissioned service

Wirral Stop Smoking Service does not commission a NRT voucher dispensing scheme with pharmacies. Also, there is no locally commissioned Smoking Cessation counselling service.

See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Public Health Services provided by pharmacy (2021 PharmOutcomes Survey)

If you provide supervised consumption/administration service, is this undertaken in a separate private room?

	Yes	%	No	%	At patient request	%	N/A	%	Total
In Private	60	72.3%	0	0.0%	11	13.3%	12	14.5%	83

Source: Wirral PNA PharmOutcomes Survey 2021

Notes: Figures in table above were collated in November 2021 so may not match later data on current provision.

The options in the table reflect those chosen by pharmacies. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Key Findings

- Emergency Hormonal Contraception (EHC) is delivered in over 64% of pharmacies (55 of 83 as self-reported), with many more willing to provide if commissioned (almost 33%) willing to provide or already providing a private scheme. The Sexual Health website has (as at 07/12/21) 70 recorded providers.

- For supervised consumption/administration (i.e., of methadone) 77 pharmacies are contracted to provide this service. Of those self-reporting (66 see table above) that they provide this service (via survey) then 57 providers are able to provide this in a separate private room.
- There are 14 pharmacies (17%) self-reporting that they provide a needle and syringe exchange service with 49 further venues willing to provide this service if commissioned (so just over 75% of current pharmacies). There are 16 pharmacies contracted to provide a needle and syringe exchange service.

Medicines Optimisation provided by pharmacy (2021 PharmOutcomes Survey)

Service	Currently Providing NHS scheme [^]	%	Willing and able [*]	%	Currently providing private scheme ^{^^}	%	Not willing or able ^{**}	%	Total
Domiciliary Medicine Administration Records (MAR)	19	22.9%	39	47.0%	16	19.3%	12	14.5%	86
Medicines Assessment and Compliance Support Service	8	9.6%	52	62.7%	11	13.3%	14	16.9%	85
Independent Prescribing Service	0	0.0%	45	54.2%	3	3.6%	35	42.2%	83
Supplementary Prescribing	0	0.0%	47	56.6%	0	0.0%	36	43.4%	83
Not Dispensed Scheme	0	0.0%	65	78.3%	0	0.0%	18	21.7%	83

Source: Wirral PNA PharmOutcomes Survey 2021

Notes: For [^] ^{^^} ^{*} ^{**} please see notes for Commissioned Services above

Figures in table above were collated in November 2021 so may not match later data on current provision.

The options in the table reflect those chosen by pharmacies. Some pharmacies picked multiple options; this is why in some cases the totals are greater than the overall number of pharmacies. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Key Findings

- no screening services are being delivered via NHS or local contract, although there is strong support to provide them if they were commissioned subject to adequate training

Question: Collection and Delivery Services - Provided by Pharmacy (2021 PharmOutcomes Survey)

Collection and Delivery services	Yes	Percentage of all Pharmacy (%)	No	Percentage of all Pharmacy (%)	Total
Collection of prescriptions from surgeries*	69	83.1%	14	16.9%	83
Delivery of dispensed medicines - Free of charge on request	61	73.5%	22	26.5%	83
Delivery of dispensed medicines - Chargeable	22	26.5%	61	73.5%	83

Source: Wirral PNA PharmOutcomes Survey 2021

Notes: For ^^^ ** please see notes for Commissioned Services above

Figures in table above were collated in November 2021 so may not match later data on current provision.

The options in the table reflect those chosen by pharmacies. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Collection and Delivery services	Yes	Percentage of all Pharmacy (%)	No	Percentage of all Pharmacy (%)	Total
Monitored/Community Dosage Systems - Free of charge on request if not covered by Equality Act (DDA)	58	69.9%	25	30.1%	83
Monitored/Community Dosage Systems - chargeable if not covered by Equality Act (DDA)	16	19.3%	67	80.7%	83
Monitored/Community Dosage Systems - Not provided unless covered by Equality Act (DDA)	31	37.3%	52	62.7%	83

Source: Wirral PNA PharmOutcomes Survey 2021

Notes: Figures in table above were collated in November 2021 so may not match later data on current provision.

The options in the table reflect those chosen by pharmacies. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Key Findings

- Over 80% of Wirral Pharmacies (69 of 83) collect prescriptions from surgeries and almost 74% (61 of 83) deliver dispensed medicines free of charge if requested. However, this is not part of their contractual obligations, and it is an individual business decision by contractors. They may choose to charge for this service. The number of pharmacies charging for delivery has increased to 22 since last survey in 2017 (from 9)
- The coverage of this delivery service offer can be seen in Appendix Six () that highlights good population coverage close to and within areas of older populations and greater deprivation
- Also, 74 of 83 pharmacies (almost 90%) provide either free of charge monitored dosage systems (i.e., “blister” packs) on request or chargeable if not covered by Equality Act

Accessibility provided by pharmacy (2021 PharmOutcomes Survey)

Accessibility to Pharmacy services	Yes	Percentage of all Pharmacy (%)	No	Percentage of all Pharmacy (%)	Total
Can customers park within 50 metres of Pharmacy	82	98.8%	1	1.2%	83
Disabled Parking Designated for pharmacy customers	56	67.5%	27	32.5%	83
Entrance to Pharmacy is Wheelchair Accessible unaided	72	86.7%	11	13.3%	83
All areas of Pharmacy Floor are Wheelchair Accessible	79	95.2%	4	4.8%	83

Source: Wirral PNA PharmOutcomes Survey 2021

Notes: Figures in table above were collated in November 2021 so may not match later data on current provision. The options in the table reflect those chosen by pharmacies. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Accessibility provided by pharmacy (2021 PharmOutcomes Survey)

Accessibility to Pharmacy services	Within 100M	100M to 500M	500M to 1000M	1000M+	No Bus Stop No Train Station	Total
Proximity to nearest Train Station/Bus Stop	61	19	2	1	0	83
	73.5%	22.9%	2.4%	1.2%	0.0%	100%

Source: Wirral PNA PharmOutcomes Survey 2021

Notes: Figures in table above were collated in November 2021 so may not match later data on current provision. The options in the table reflect those chosen by pharmacies. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Accessibility provided by pharmacy - Other facilities in the pharmacy aimed at supporting disabled people to access Pharmacy (2021 PharmOutcomes Survey)

What are the other facilities in the pharmacy aimed at supporting disabled people access Pharmacy?	Yes	Percentage of all Pharmacy Premises (%)
Large print labels	66	79.5%
Hearing loop	40	48.2%
Automatic door assistance	41	49.4%
Large print leaflets	34	41.0%
Bell at front door	31	37.3%
Wheelchair ramp access	29	34.9%
Toilet facilities accessible by wheelchair users	14	16.9%
Sign language	4	4.8%

Source: Wirral PNA PharmOutcomes Survey 2021

Notes: Figures in table above were collated in November 2021 so may not match later data on current provision. The options in the table reflect those chosen by pharmacies. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Key Findings

- accessibility to the pharmacies is generally very good and has improved since the last survey in 2017
- wheelchair access is very good inside the premises with over 95% of pharmacies having all areas of the pharmacy floor as wheelchair accessible
- the parking and/or access to public transport is very good with over 96% of premises within 500 metres of a bus or train stop
- there are pharmacies using a variety of other measures to support customers with ability issues

Accessibility support provided by pharmacy - English not as a first language (2021 PharmOutcomes Survey)

Are Pharmacies able to offer support to people whose first language is not English?	Yes	No
Yes	33	39.8%
No	50	60.2%

Source: Wirral PNA PharmOutcomes Survey 2021

Notes: Figures in table above were collated in November 2021 so may not match later data on current provision. The options in the table reflect those chosen by pharmacies. The support offered by pharmacies could be via Language Line, interpreter or onsite additional languages being spoken. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Accessibility support provided by pharmacy - English not as a first language (2021 PharmOutcomes Survey)

How are Pharmacies able to provide support to those people whose first language is not English?	Yes	No
Access Interpreter/language line	22	61
Other languages spoken within local pharmacy - reported by 24 Pharmacies*		
Spanish, Chinese, Arabic, Cantonese, Italian, Mandarin, Urdu, Punjabi, French, Gujarati, Malay, Hindi, Bengali, Welsh, Yoruba, Polish, Kurdish, Persian, German, Russian, Tamil, Somalian, Romanian, and Turkish (*note - not ALL languages are spoken in ALL premises)		

Source: Wirral PNA PharmOutcomes Survey 2021

Notes: Figures in table above were collated in November 2021 so may not match later data on current provision. The options in the table reflect those chosen by pharmacies and given NHSE commission Language Line for Pharmacies this is likely to be an underestimation. There were other Pharmacies able to offer support with alternate languages spoken on site rather than only access to language line or an interpreter. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Accessibility support provided by pharmacy - speak to a person of the same sex (2021 PharmOutcomes Survey)

Are you able to provide advice and support if the customer wishes to speak to a person of the same sex?	Yes	No
By arrangement	36	43.4%
Yes, all the time	35	42.2%
No	12	14.5%
Total	83	100.0%

Source: Wirral PNA PharmOutcomes Survey 2021

Notes: Figures in table above were collated in November 2021 so may not match later data on current provision. The options in the table reflect those chosen by pharmacies. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Accessibility support provided by pharmacy – Access related to pharmaceutical need for any of the following groups (2021 PharmOutcomes Survey)

Are Pharmacies aware of any gaps in access or pharmaceutical need for any of the following groups relating to...	Yes	Percentage of all Pharmacy Premises (%)	Comments
Age	7	8.4%	None
Disability*	8	9.6%	* Small step into shop making it difficult for wheelchair users
Gender	8	9.6%	None
People with/about to have gender reassignment	5	6.0%	None
Marriage and civil partnership	5	6.0%	None
Pregnancy and maternity	6	7.2%	None
Race	5	6.0%	None
Religion or belief	5	6.0%	None
Sexual orientation	4	4.8%	None
Other	0	0.0%	None
If yes to any of the above please state why	None - other than that stated for individual protected characteristic area - disability		

Source: Wirral PNA PharmOutcomes Survey 2021

Notes: Figures in table above were collated in November 2021 so may not match later data on current provision. The options in the table reflect those chosen by pharmacies. Although some pharmacies recorded Yes in the survey the vast majority offered no explanation as to why they felt there was an issue. Only 1* issue was recorded. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Question: General - Pharmacy – anything else you would like to say which you think may be useful for PNA (2021 PharmOutcomes Survey)

If you have anything else you would like to tell us that you think would be useful in the formulation of the PNA?	Yes	No
See below	4	79
Other Information		
* We would like to receive more information on how to offer any of the service above that We currently do not offer. * We have currently been taken over by a new company and services /opening times may change * If there was increased demand for pharmaceutical services We have sufficient premises capacity already and would just need to employ more staff to deal with the excess work. * Willing to undertake any training necessary to be able to provide commissioned services i.e. prescribing courses		

Source: Wirral PNA PharmOutcomes Survey 2021

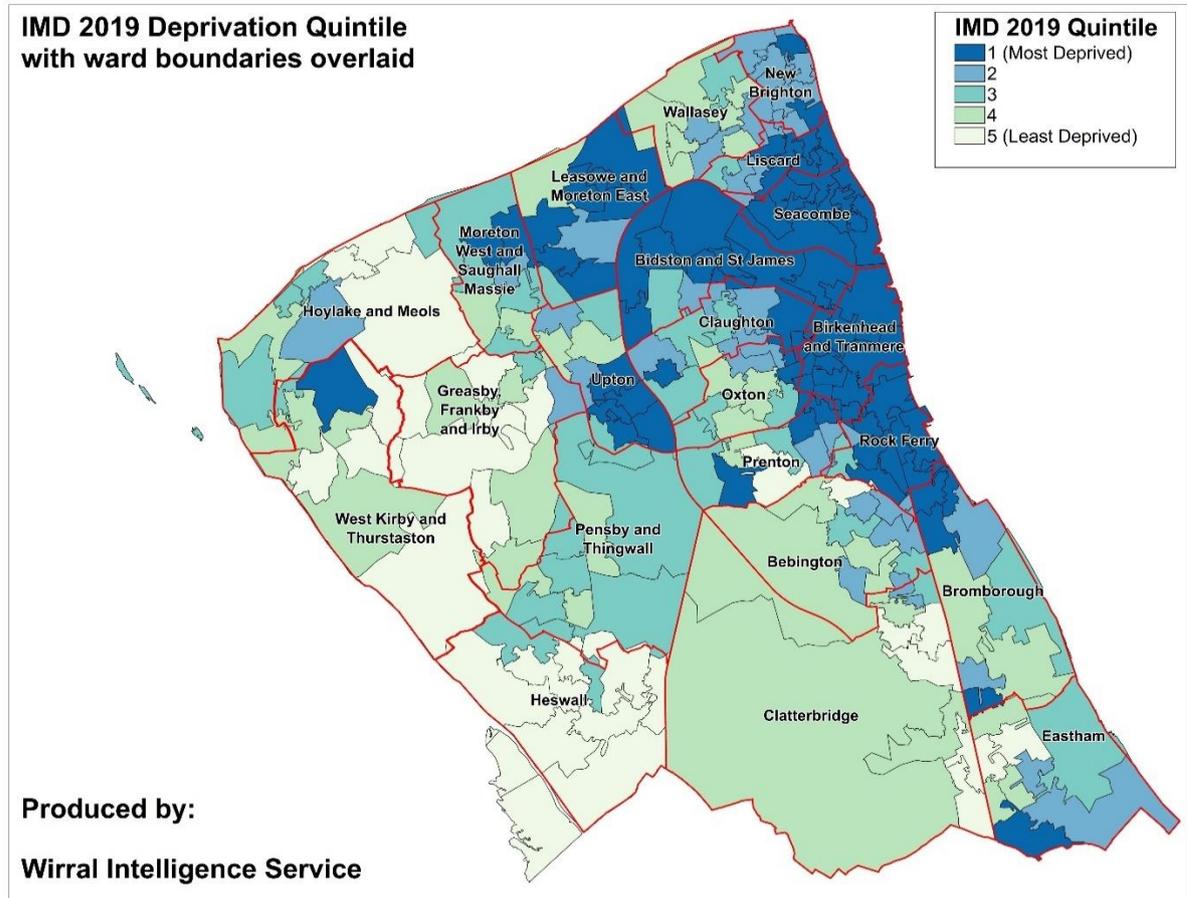
Notes: Figures in table above were collated in November 2021 so may not match later data on current provision. The options in the table reflect those chosen by pharmacies. See all answers and Pharmacy Contractors Survey questions in [Appendix Two](#) and [Appendix Four](#).

Key Findings

- With 33 of 83 (or almost 40%) of Pharmacies being able to help customers whose first language is not English and that is through access to Language Line, an interpreter, or staff on the premises
- In over 85% (71 of 83) of Pharmacies there can be a same sex person to serve you either by arrangement or all the time
- There would appear to be very few, if any significant, gaps in pharmaceutical need for vulnerable groups by way of the stated protected characteristics

Appendix Five: Indices of Multiple Deprivation (IMD) (2019)

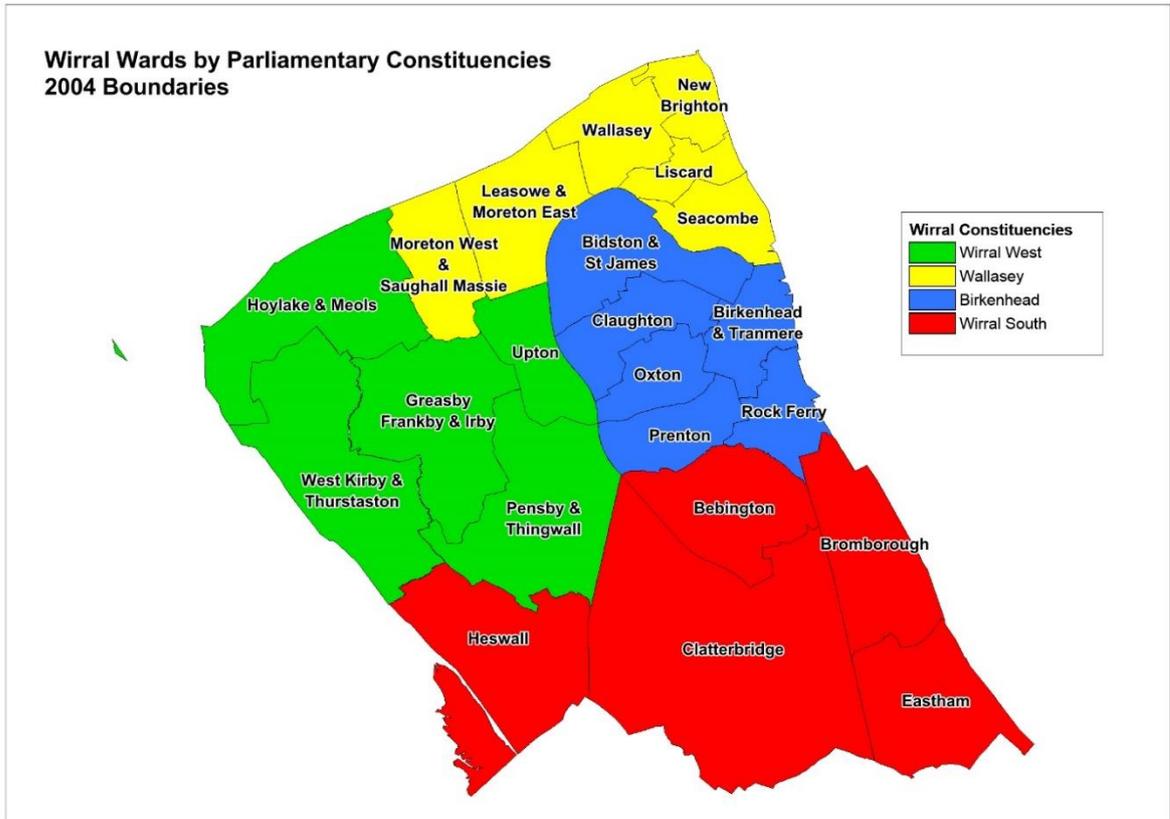
IMD presented at Wirral Lower Super Output Area



Source: [Wirral intelligence Service](#) (2022)

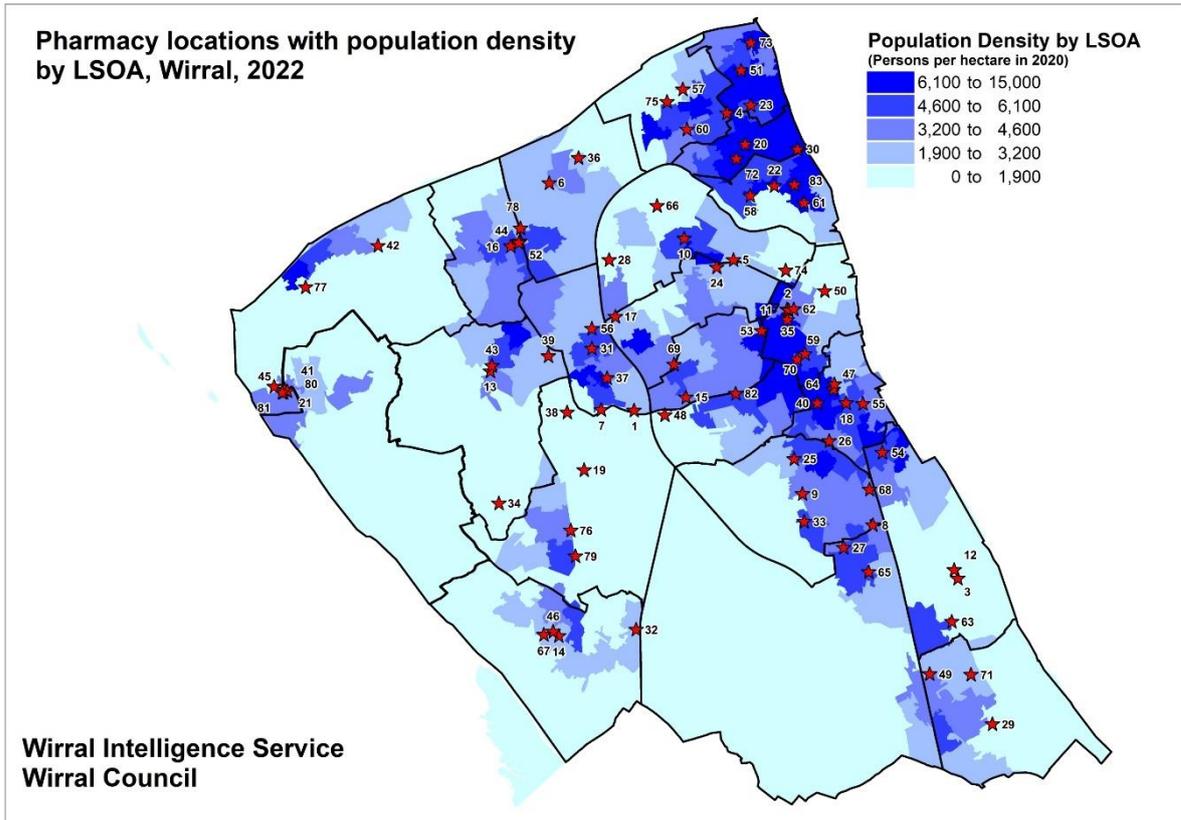
Appendix Six: Maps of Wirral in relation to this PNA

(i) Wirral Constituencies and Wards – 2017



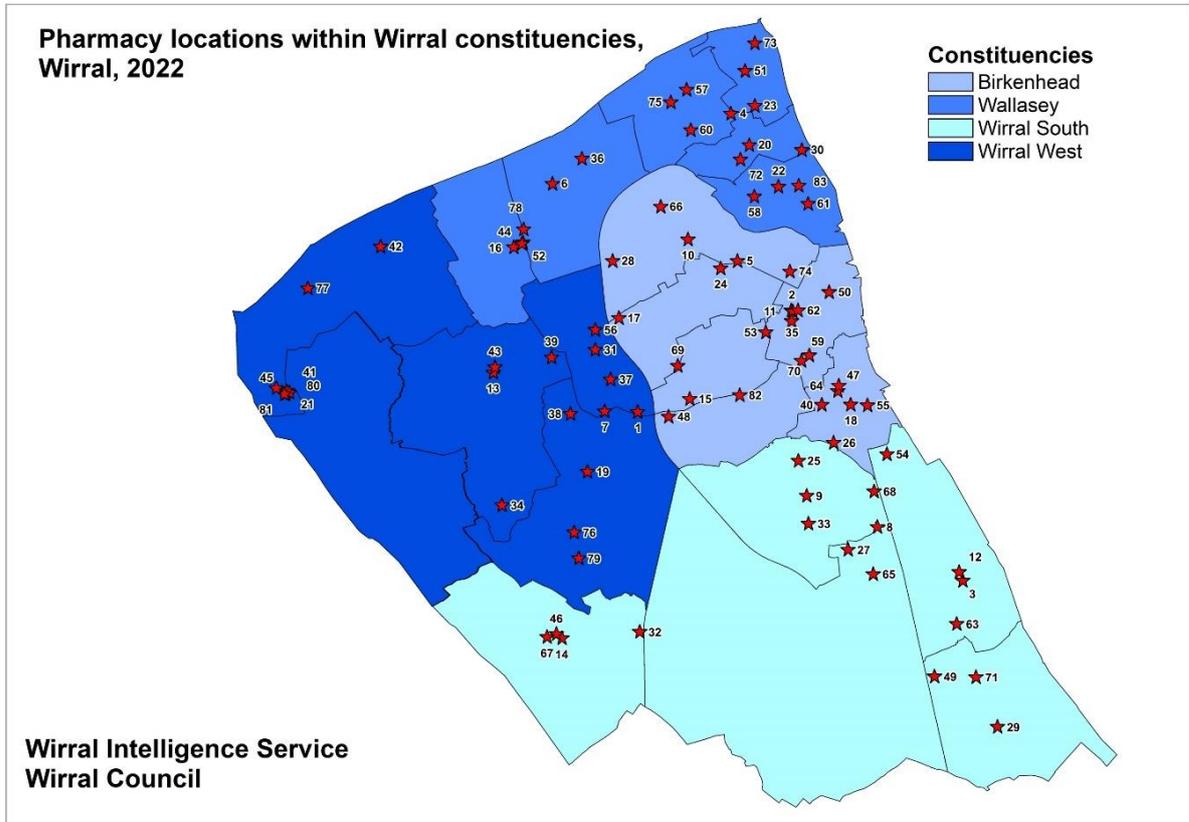
Source: Wirral intelligence Service (2022)

(ii) Wirral Pharmacies outlets – by Population Density – 2022



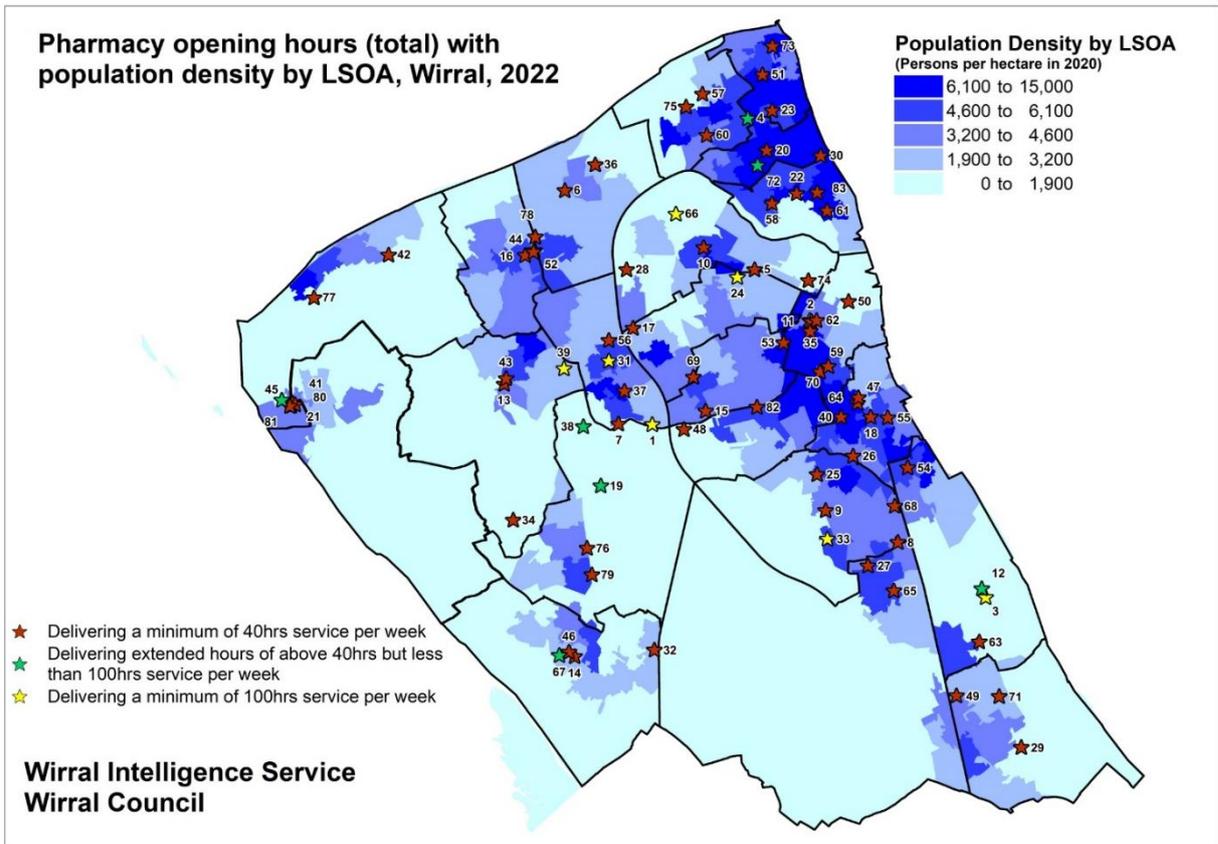
Source: Wirral intelligence Service (2022)

(iii) Wirral Pharmacies – by Constituency – 2022



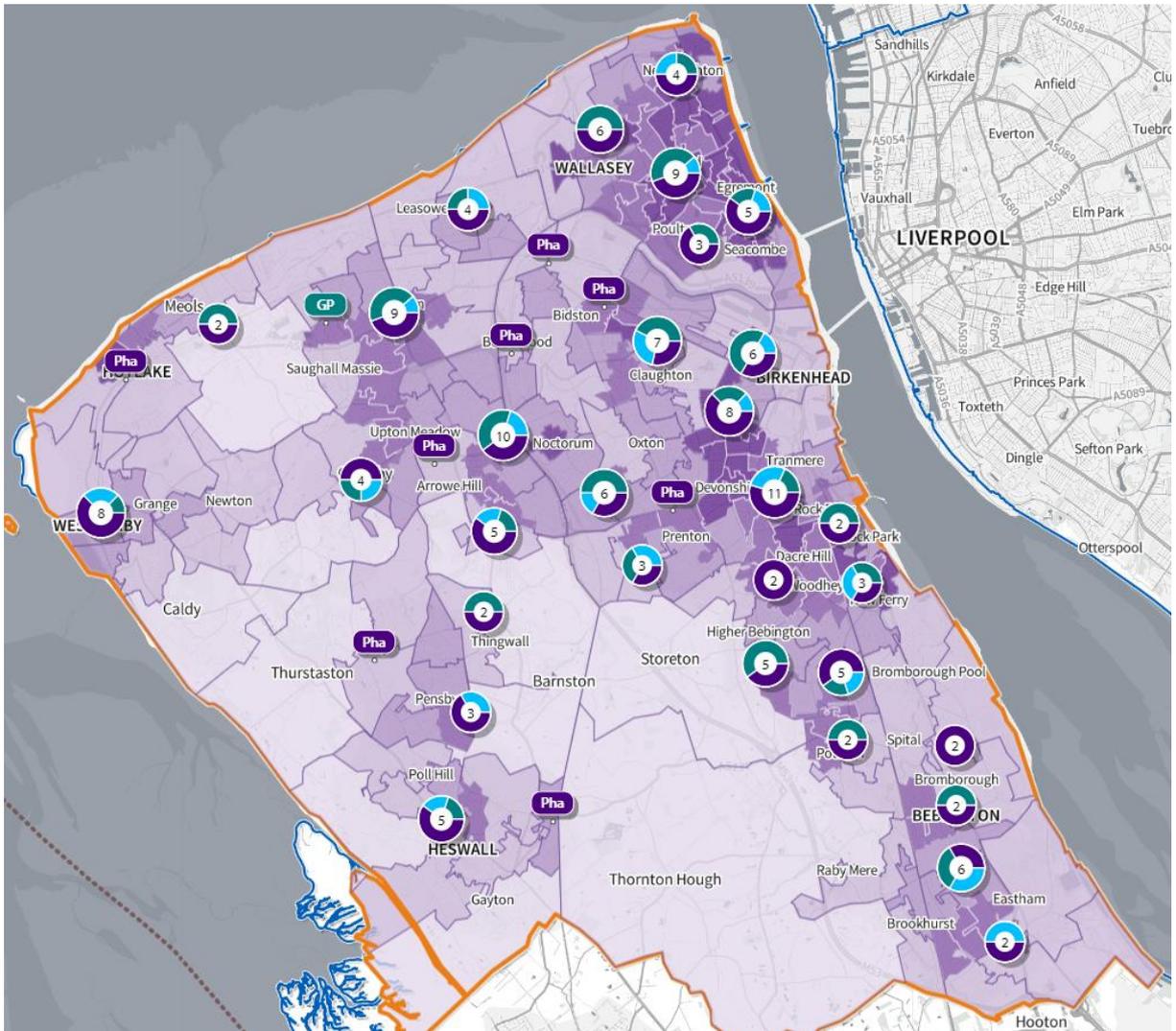
Source: Wirral intelligence Service (2022)

(iv) Wirral Pharmacies – Contract opening hours – 2022



Source: Wirral intelligence Service (2022)

(vi) Wirral Pharmacies – Pharmacy & GP/Health Centre all locations

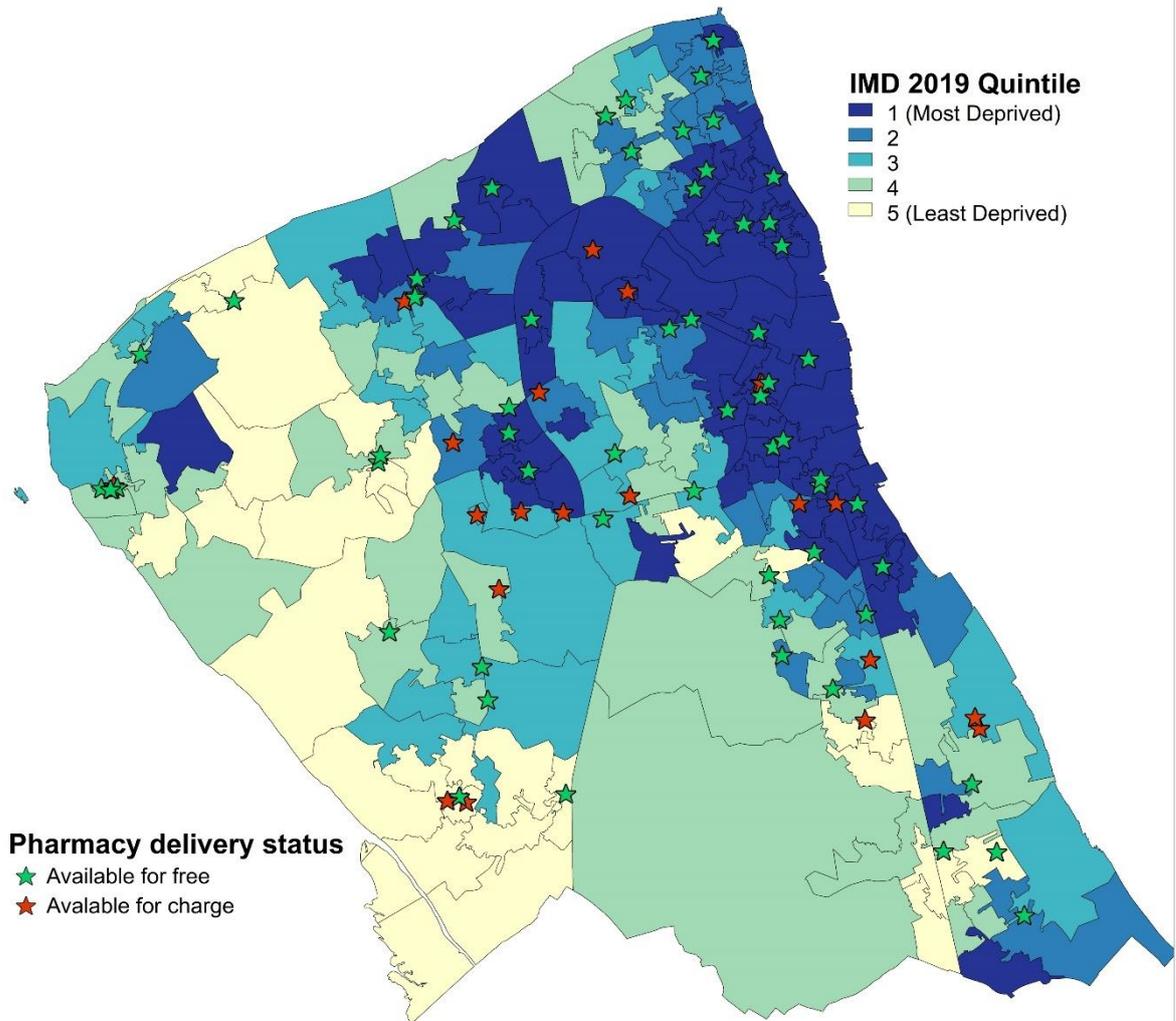


Source: Wirral Intelligence Service using [OHID SHAPE tool \(2022\)](#)

[This is a list of pharmacies, GP Practices and Health Care Centres related to this map](#)

(iix) Wirral Pharmacies – Delivery Service coverage Map

**Pharmacies by delivery status
with IMD 2019 Deprivation Quintile
by LSOA**



Produced by:

Wirral Intelligence Service

Appendix Seven: Pharmacy site opening/closing times by Constituency (Monday to Sunday)

Birkenhead Constituency

URN	Pharmacy ODS Code	Pharmacy Trading Name	Pharmacy Opening Hours Monday	Pharmacy Opening Hours Tuesday	Pharmacy Opening Hours Wednesday	Pharmacy Opening Hours Thursday	Pharmacy Opening Hours Friday	Pharmacy Opening Hours Saturday	Pharmacy Opening Hours Sunday	Weekly Total Hours
2	FC549	Asda Pharmacy (Birkenhead)	07:00-22:00	06:00-22:00	06:00-22:00	06:00-22:00	06:00-22:00	06:00-22:00	10:30-16:30	101.0
5	FKJ03	Birkenhead Pharmacy	09:00-19:00	09:00-19:00	09:00-19:00	09:00-19:00	09:00-18:00	09:00-13:00	CLOSED	53.0
10	FMR00	Boots (Bidston)	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-15:00	CLOSED	53.5
11	FC368	Boots (Birkenhead)	08:30-17:30	08:30-17:30	08:30-17:30	08:30-17:30	08:30-17:30	08:30-17:30	CLOSED	54.0
15	FXX14	Boots (Holmlands)	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-13:00	CLOSED	51.5
17	FL617	Boots (Noctorum)	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-17:00	CLOSED	53.0
18	FK272	Boots (Rock Ferry)	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-17:00	CLOSED	53.0
24	FHV83	Cloughton Pharmacy	07:00-22:30	07:00-22:30	07:00-22:30	07:00-22:30	07:00-22:30	07:00-22:30	09:00-16:00	100.0
26	FC593	Dale Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED	49.0
28	FDQ38	Day Lewis (Birkenhead)	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	CLOSED	CLOSED	42.5
35	FEP75	Jamiesons Pharmacy	08:45-13:00,14:00-18:00	08:45-13:00,14:00-18:00	08:45-13:00,14:00-18:00	08:45-13:00,14:00-18:00	08:45-13:00,14:00-18:00	CLOSED	CLOSED	41.3
40	FE351	Lloyds Pharmacy (Victoria Health Centre)	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-12:30	CLOSED	51.5
47	FKF28	Old Chester Road Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-12:30	CLOSED	48.5
48	FG595	Prenton Dell Pharmacy	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	CLOSED	CLOSED	50.0
50	FX032	Rowlands Pharmacy (Chanins)	09:00-13:20,13:40-17:30	09:00-13:20,13:40-17:30	09:00-13:20,13:40-17:30	09:00-13:20,13:40-17:30	09:00-13:20,13:40-17:30	09:00-13:00	CLOSED	44.8
53	FL331	Rowlands Pharmacy (Oxton Balls Road)	08:00-18:30	08:00-18:30	08:00-18:30	08:00-18:30	08:00-18:30	08:00-12:00	CLOSED	56.5
55	FT638	Rowlands Pharmacy (Rock Ferry)	09:00-13:00,14:00-18:30	09:00-13:00,14:00-18:30	09:00-13:00,14:00-18:30	09:00-13:00,14:00-18:30	09:00-13:00,14:00-18:30	09:00-12:00	CLOSED	45.5
59	FA847	St Catherines Pharmacy	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00	CLOSED	44.0
62	FFP67	Superdrug Pharmacy	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	CLOSED	51.0
64	FQ535	Swettenham Chemists (Rock Ferry)	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	CLOSED	CLOSED	40.0
66	FFJ15	Tesco Pharmacy (Bidston)	08:00-22:30	06:30-22:30	06:30-22:30	06:30-22:30	06:30-22:30	06:30-22:00	10:00-16:00	100.0
69	FLX37	Townfield Pharmacy	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00	CLOSED	44.0
70	FNM03	Tranmere Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED	49.0
74	FQQ27	Vittoria Pharmacy	09:00-13:00,13:30-18:15	09:00-13:00,13:30-18:15	09:00-13:00,13:30-18:15	09:00-13:00,13:30-18:15	09:00-13:00,13:30-18:15	CLOSED	CLOSED	43.8
82	FDR78	Woodchurch Road Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-17:00	CLOSED	53.0

Wallasey Constituency

URN	Pharmacy ODS Code	Pharmacy Trading Name	Pharmacy Opening Hours Monday	Pharmacy Opening Hours Tuesday	Pharmacy Opening Hours Wednesday	Pharmacy Opening Hours Thursday	Pharmacy Opening Hours Friday	Pharmacy Opening Hours Saturday	Pharmacy Opening Hours Sunday	Weekly Total Hours
4	FF922	Asda Pharmacy (Liscard)	08:00-22:00	08:00-22:00	08:00-22:00	08:00-22:00	08:00-22:00	08:00-22:00	10:00-16:00	90.0
6	FJ202	Blackheath Pharmacy	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	CLOSED	CLOSED	42.5
16	FLP52	Boots (Moreton)	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	CLOSED	51.0
20	FYV68	Boots (Wallasey)	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	CLOSED	51.0
22	FCW66	Campbells Chemist	09:00-13:00,14:15-18:00	09:00-13:00,14:15-18:00	09:00-13:00,14:15-18:00	09:00-13:00,14:15-18:00	09:00-13:00,14:15-18:00	09:00-13:00	CLOSED	42.8
23	FE310	Carringtons Pharmacy	08:30-17:30	08:30-17:30	08:30-17:30	08:30-17:30	08:30-17:30	CLOSED	CLOSED	45.0
30	FWC29	Egremont Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	CLOSED	CLOSED	45.0
36	FR600	Leasowe Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	CLOSED	CLOSED	45.0
44	FJF23	Moreton Pharmacy	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	09:00-17:30	CLOSED	56.0
51	FNC84	Rowlands Pharmacy (Field Road)	08:45-13:20,13:40-18:00	08:45-13:20,13:40-18:00	08:45-13:20,13:40-18:00	08:45-13:20,13:40-18:00	08:45-13:20,13:40-18:00	CLOSED	CLOSED	44.6
52	FME16	Rowlands Pharmacy (Moreton)	09:00-13:30,13:50-18:00	09:00-13:30,13:50-18:00	09:00-13:30,13:50-18:00	09:00-13:30,13:50-18:00	09:00-13:30,13:50-18:00	09:00-13:00	CLOSED	47.3
57	FDA14	Rowlands Pharmacy (Wallasey Village)	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00	CLOSED	44.0
58	FNN81	Somerville Pharmacy	08:45-13:00,14:00-18:00	08:45-13:00,14:00-18:00	08:45-13:00,14:00-18:00	08:45-13:00,14:00-18:00	08:45-13:00,14:00-18:00	CLOSED	CLOSED	41.3
60	FTM81	St Hilary's Pharmacy	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	CLOSED	CLOSED	47.5
61	FHQ81	St Pauls Pharmacy	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-17:30	CLOSED	47.5
72	FNE27	Victoria Central Pharmacy	08:30-19:00	08:30-19:00	08:30-19:00	08:30-19:00	08:30-19:00	08:30-17:30	CLOSED	61.5
73	FCC27	Victoria Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-17:30	CLOSED	53.5
75	FKE51	Wallasey Village Pharmacy	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	09:00-13:00	CLOSED	46.5
78	FG244	Well Pharmacy (Moreton)	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	CLOSED	CLOSED	47.5
83	FWD11	Wyn Ellis & Son Pharmacy	09:00-13:00,14:15-18:00	09:00-13:00,14:15-18:00	09:00-13:00,14:15-18:00	09:00-13:00,14:15-18:00	09:00-13:00,14:15-18:00	09:00-13:00	CLOSED	42.8

Wirral South Constituency

URN	Pharmacy ODS Code	Pharmacy Trading Name	Pharmacy Opening Hours Monday	Pharmacy Opening Hours Tuesday	Pharmacy Opening Hours Wednesday	Pharmacy Opening Hours Thursday	Pharmacy Opening Hours Friday	Pharmacy Opening Hours Saturday	Pharmacy Opening Hours Sunday	Weekly Total Hours
3	FT036	Asda Pharmacy (Bromborough)	08:00-23:00	07:00-23:00	07:00-23:00	07:00-23:00	07:00-23:00	07:00-22:00	10:00-16:00	100.0
8	FY215	Boots (Bebington Church Road)	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-17:00	CLOSED	53.0
9	FG049	Boots (Bebington Teehey Lane)	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-17:00	CLOSED	53.0
12	FC972	Boots (Bromborough)	08:00-20:00	08:00-20:00	08:00-20:00	08:00-20:00	08:00-20:00	08:00-18:30	10:00-16:00	76.5
14	FV122	Boots (Heswall)	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	CLOSED	51.0
25	FQ635	Cohens Pharmacy	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	CLOSED	CLOSED	40.0
27	FKE81	Day Lewis (Bebington)	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-17:00	CLOSED	53.0
29	FNR55	Dudleys Chemist	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-13:00	CLOSED	46.5
32	FA057	Heswall Hills Pharmacy	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00	CLOSED	44.0
33	FM405	Higher Bebington Pharmacy	08:00-22:30	08:00-22:30	08:00-22:30	08:00-22:30	08:00-22:30	08:00-22:30	09:30-22:30	101.5
46	FXW85	Oakley Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-17:30	CLOSED	53.5
49	FMP28	Rowlands Pharmacy (Bromborough)	09:00-13:00,14:00-17:30	09:00-13:00,14:00-17:30	09:00-13:00,14:00-17:30	09:00-13:00,14:00-17:30	09:00-13:00,14:00-17:30	09:00-12:00	CLOSED	40.5
54	FVD93	Rowlands Pharmacy (Parkfield)	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-12:00	CLOSED	43.0
63	FC329	Swettenham Chemists (Bromborough)	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED	49.0
65	FM813	Temple Pharmacy	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00	CLOSED	44.0
67	FDL01	Tesco Pharmacy (Heswall)	08:30-20:00	08:30-20:00	08:30-20:00	08:30-20:00	08:30-20:00	08:00-20:00	10:00-16:00	75.5
68	FLW57	The Pharmacy Bebington	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	09:00-12:00	CLOSED	50.5
71	FDF46	Tree Tops Pharmacy	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	08:30-12:30	CLOSED	54.0

Wirral West Constituency

URN	Pharmacy ODS Code	Pharmacy Trading Name	Pharmacy Opening Hours Monday	Pharmacy Opening Hours Tuesday	Pharmacy Opening Hours Wednesday	Pharmacy Opening Hours Thursday	Pharmacy Opening Hours Friday	Pharmacy Opening Hours Saturday	Pharmacy Opening Hours Sunday	Weekly Total Hours
1	FJH46	Asda Pharmacy (Arrowe Park)	07:00-22:00	06:00-22:00	06:00-22:00	06:00-22:00	06:00-22:00	06:00-21:00	10:00-16:00	100.0
7	FN923	Boots (Arrowe Park)	08:30-13:00,14:00-18:30	08:30-13:00,14:00-18:30	08:30-13:00,14:00-18:30	08:30-13:00,14:00-18:30	08:30-13:00,14:00-18:30	CLOSED	CLOSED	45.0
13	FM378	Boots (Greasby)	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-17:30	CLOSED	56.0
19	FQT68	Boots (Thingwall)	07:30-19:00	08:00-19:00	07:30-19:00	08:00-19:00	08:00-19:00	09:00-17:00	CLOSED	64.0
21	FJV77	Boots (West Kirby)	08:30-17:30	08:30-17:30	08:30-17:30	08:30-17:30	08:30-17:30	09:00-17:30	CLOSED	53.5
31	FDL69	Heatherlands Pharmacy	06:30-22:30	06:30-22:30	06:30-22:30	06:30-22:30	06:30-22:30	07:30-21:30	10:00-16:00	100.0
34	FCN12	Irby Pharmacy	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	09:00-13:00	CLOSED	46.5
37	FV230	Lees Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED	49.0
38	FWP65	Lloyds Pharmacy (Arrowe Park)	08:30-22:00	08:30-22:00	08:30-22:00	08:30-22:00	08:30-22:00	09:00-22:00	09:00-22:00	93.5
39	FW404	Lloyds Pharmacy (Upton Sainsburys)	07:00-23:00	07:00-23:00	07:00-23:00	07:00-23:00	07:00-23:00	07:00-22:00	10:00-16:00	101.0
41	FJC28	Lloyds Pharmacy (West Kirby)	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	09:00-17:00	CLOSED	55.5
42	FXE80	Manor Pharmacy	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	09:00-13:00,13:30-18:00	09:00-13:00,13:30-16:00	CLOSED	49.0
43	FXE59	McKeevers Chemist	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED	49.0
45	FTG19	Morrisons Pharmacy	09:00-20:00	09:00-20:00	09:00-20:00	09:00-20:00	09:00-20:00	09:00-19:00	10:00-16:00	71.0
56	FY543	Rowlands Pharmacy (Upton)	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-13:00,14:00-18:00	09:00-12:00	CLOSED	43.0
76	FWA62	Weinronk Pharmacy	09:00-13:00,14:15-18:00	09:00-13:00,14:15-18:00	09:00-13:00,14:15-18:00	09:00-13:00,14:15-18:00	09:00-18:00	09:00-13:00	CLOSED	44.0
77	FNT31	Well Pharmacy (Hoylake)	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-13:00	CLOSED	46.5
79	FPM20	Well Pharmacy (Pensby)	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	CLOSED	CLOSED	45.0
80	FF615	Welsh's Pharmacy	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	CLOSED	CLOSED	45.0
81	FMK56	Wilson's Chemist	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:00	CLOSED	50.5

Key:

 **Unique reference number (URN)** that carries through all PNA 2022-25 content

 These pharmacies are operating on a **100 HOURS+ CONTRACT** (8 pharmacies across Wirral)

 These pharmacies are operating on an **EXTENDED HOURS** contract of between 60 and up to 100 hours* (7 pharmacies across Wirral)

 These pharmacies are **co-located with GP Practices, Surgeries and Health Centres** (*The numbers of co-locations are Birkenhead (8), Wallasey (7), Wirral South (4) and Wirral West (5) with total as 24*)

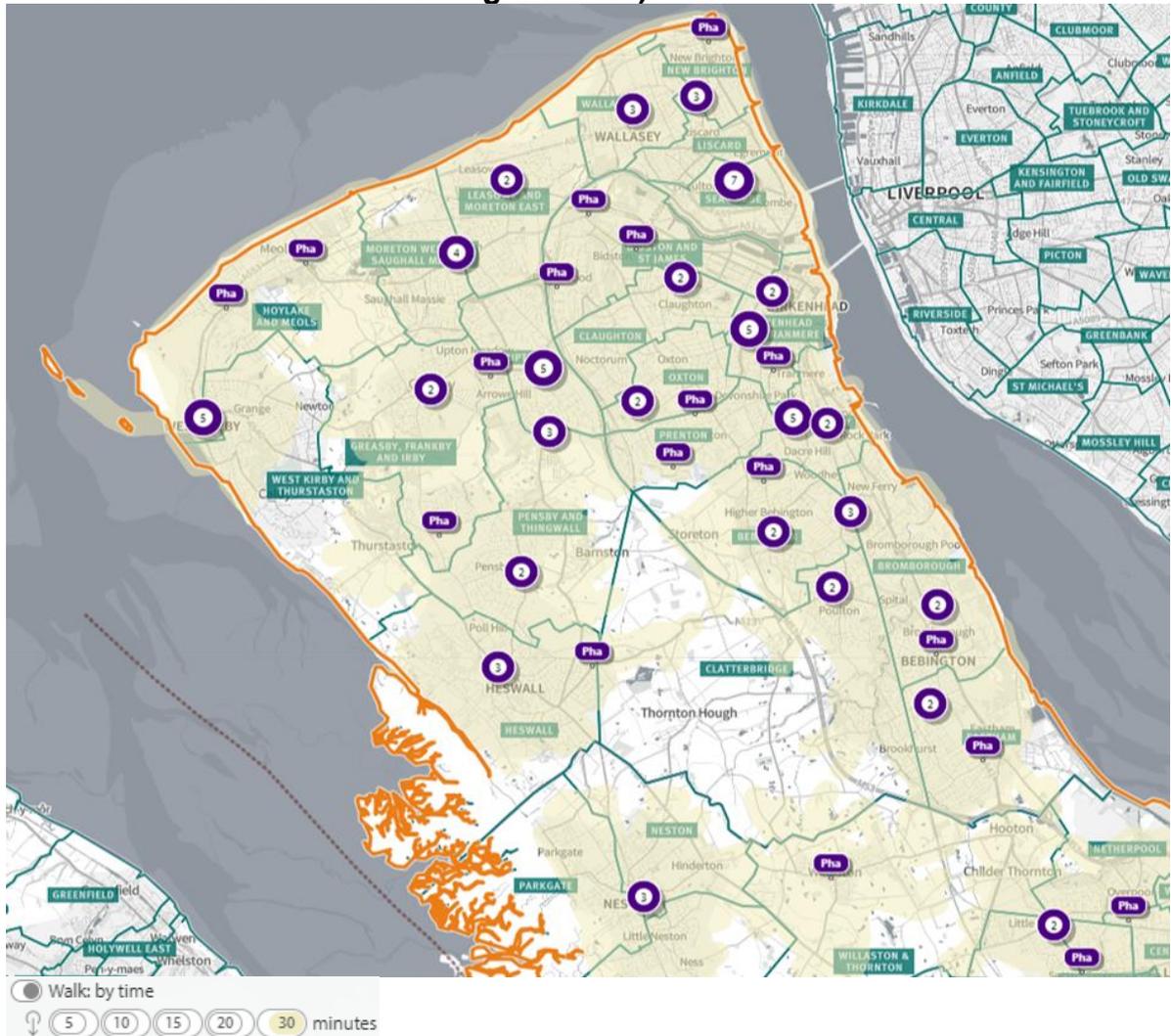
(Note: other pharmacies are within very close proximity of a number of GP premises but were excluded for this purpose as they were not co-located in the same building).

(Note: Please use Pharmacy Legend in [Appendix One](#) that corresponds to numbering in these four Constituency opening hours tables)

Appendix Eight: Maps for drive, walk, public transport and cycling times to Wirral pharmacies

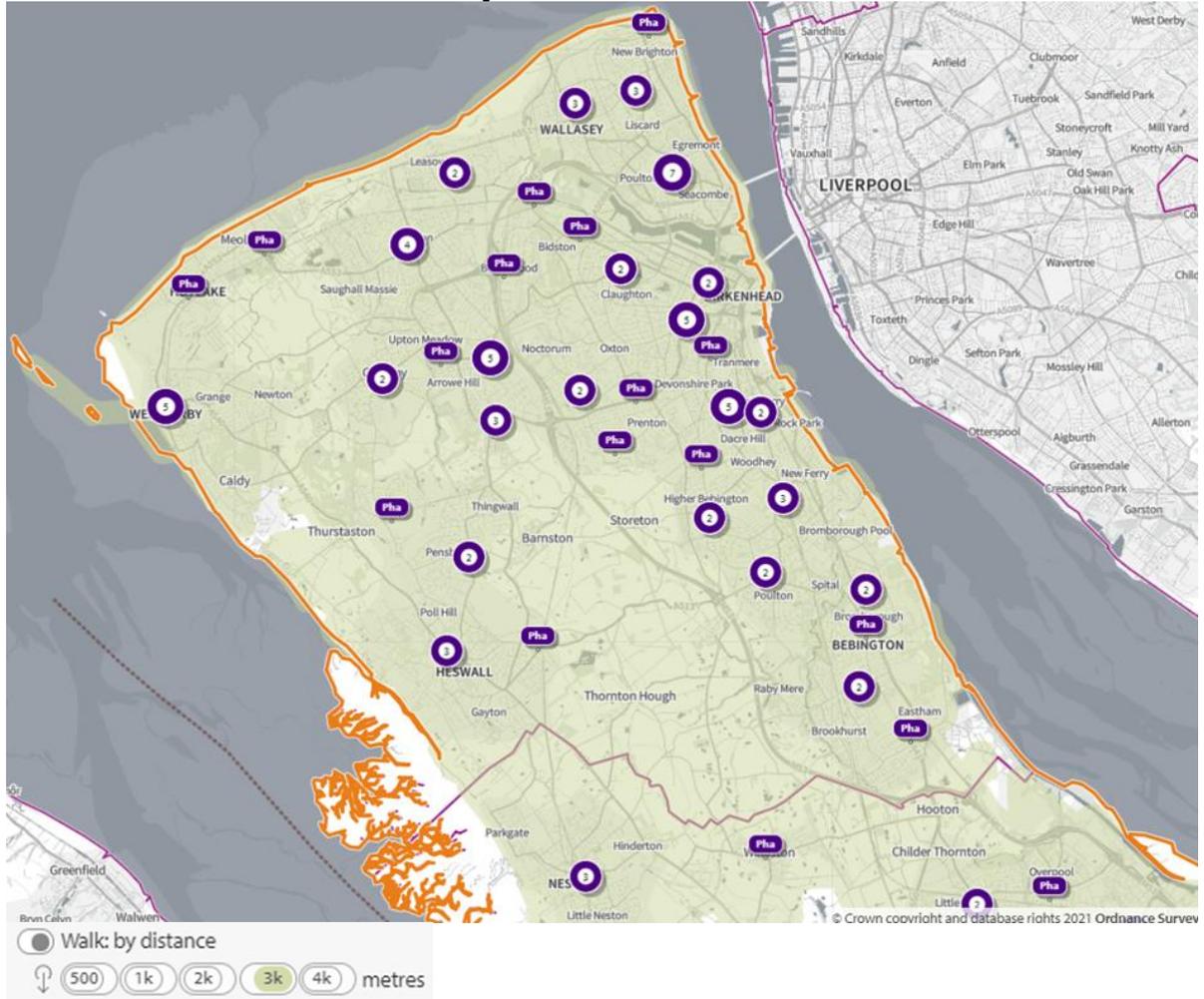
Walking

Walk times (considered as 30 minutes' walk from nearest Pharmacy - Estimated to be one mile walking distance)



Source: Wirral Intelligence Service using [SHAPE Atlas 2022](#)

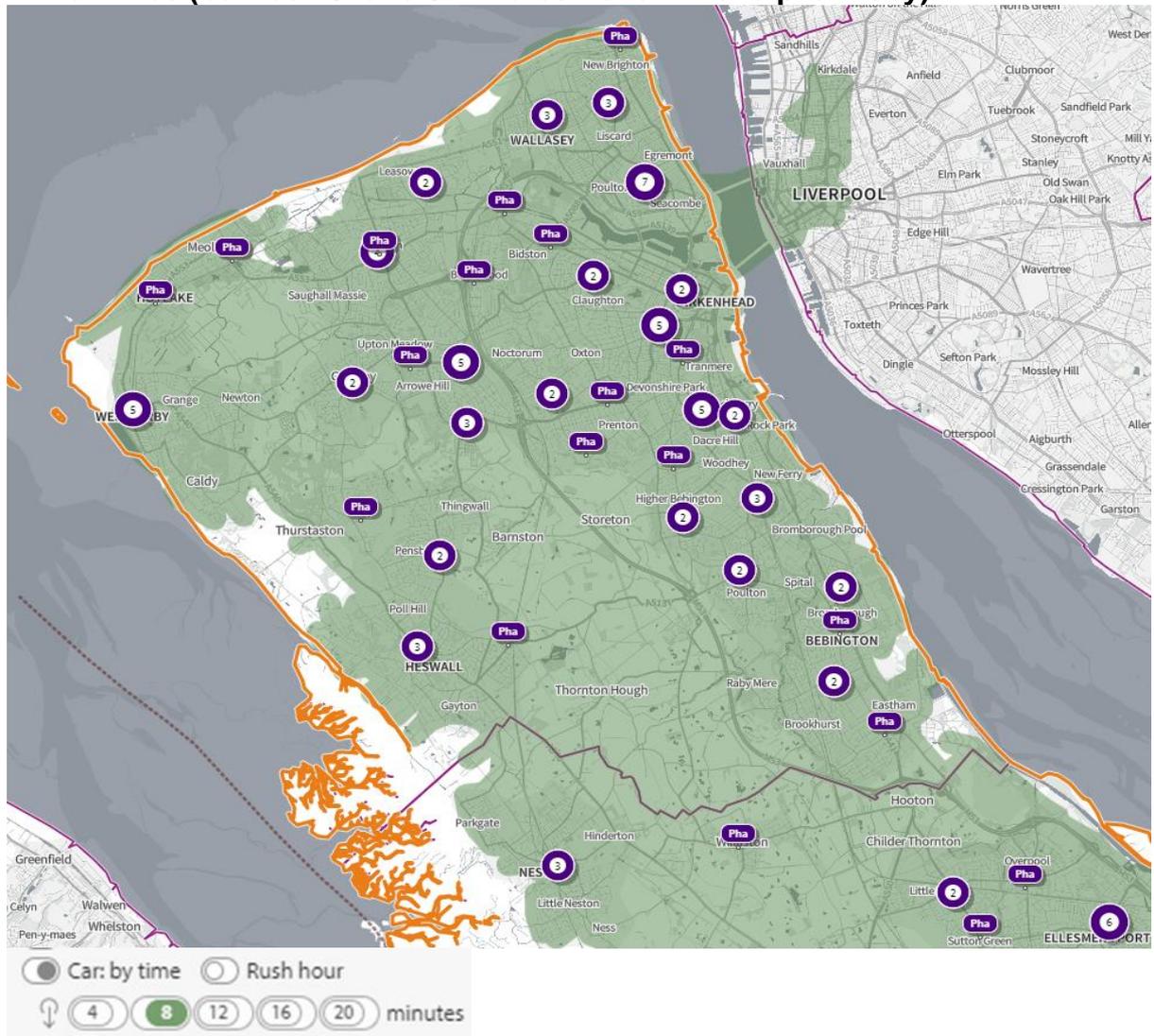
Walk times to nearest Pharmacy - as 3000 metres or 1.8 miles



Source: Wirral Intelligence Service using [SHAPE Atlas 2022](#)

Car

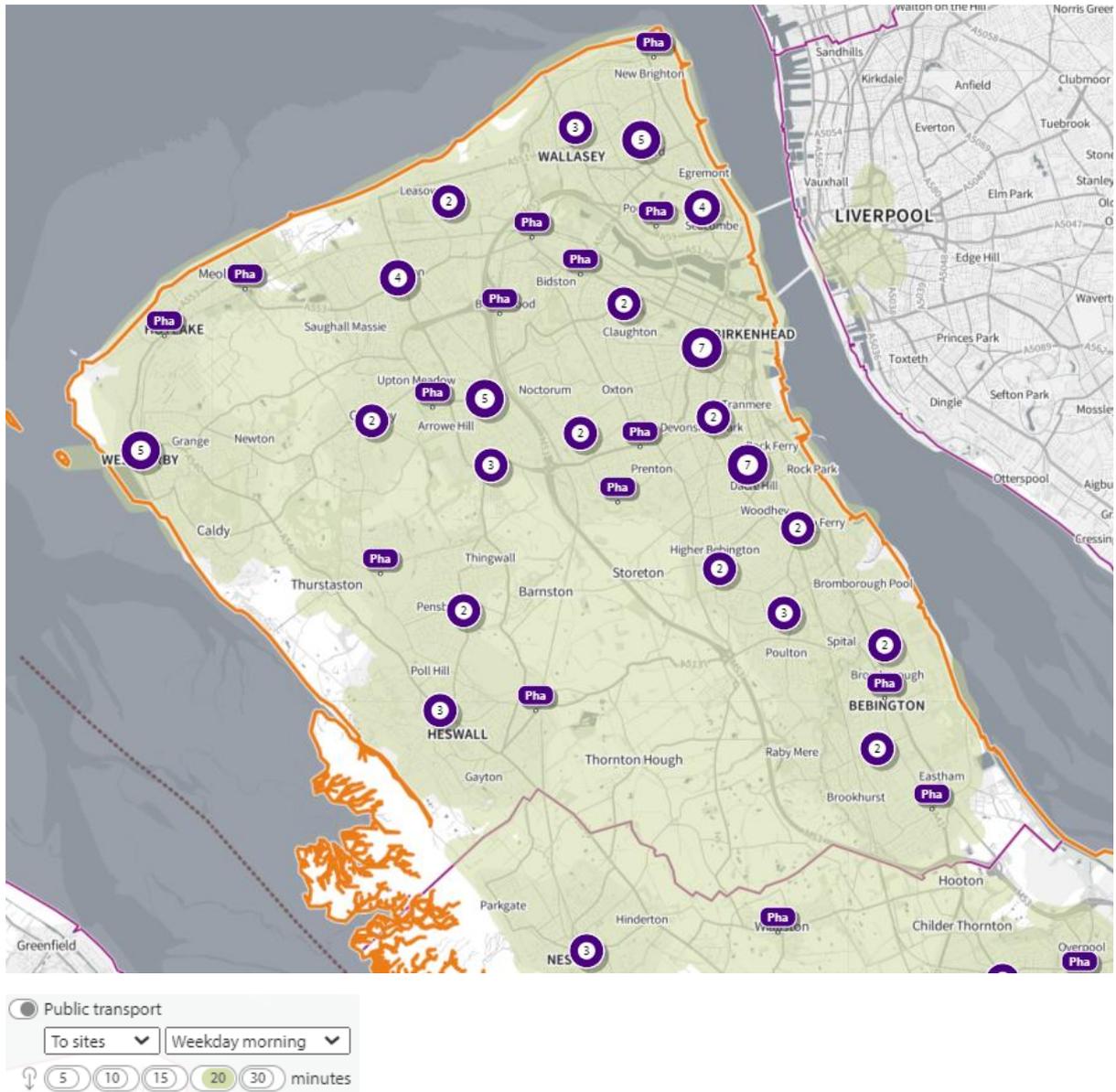
Drive Times (between 8- and 9-minutes travel time to pharmacy)



Source: Wirral Intelligence Service using [SHAPE Atlas 2022](#)

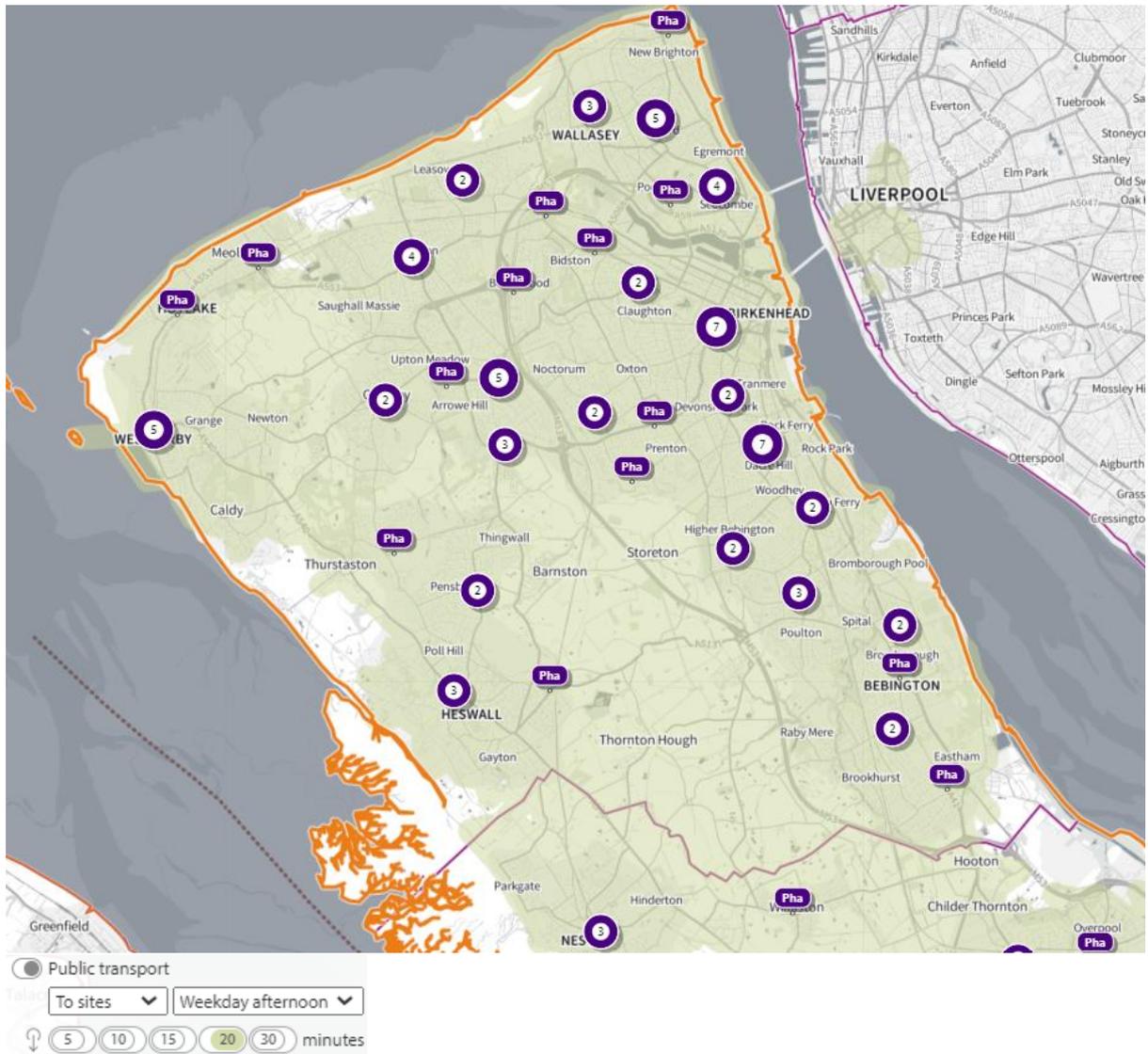
Public Transport

Public Transport - Weekday Morning



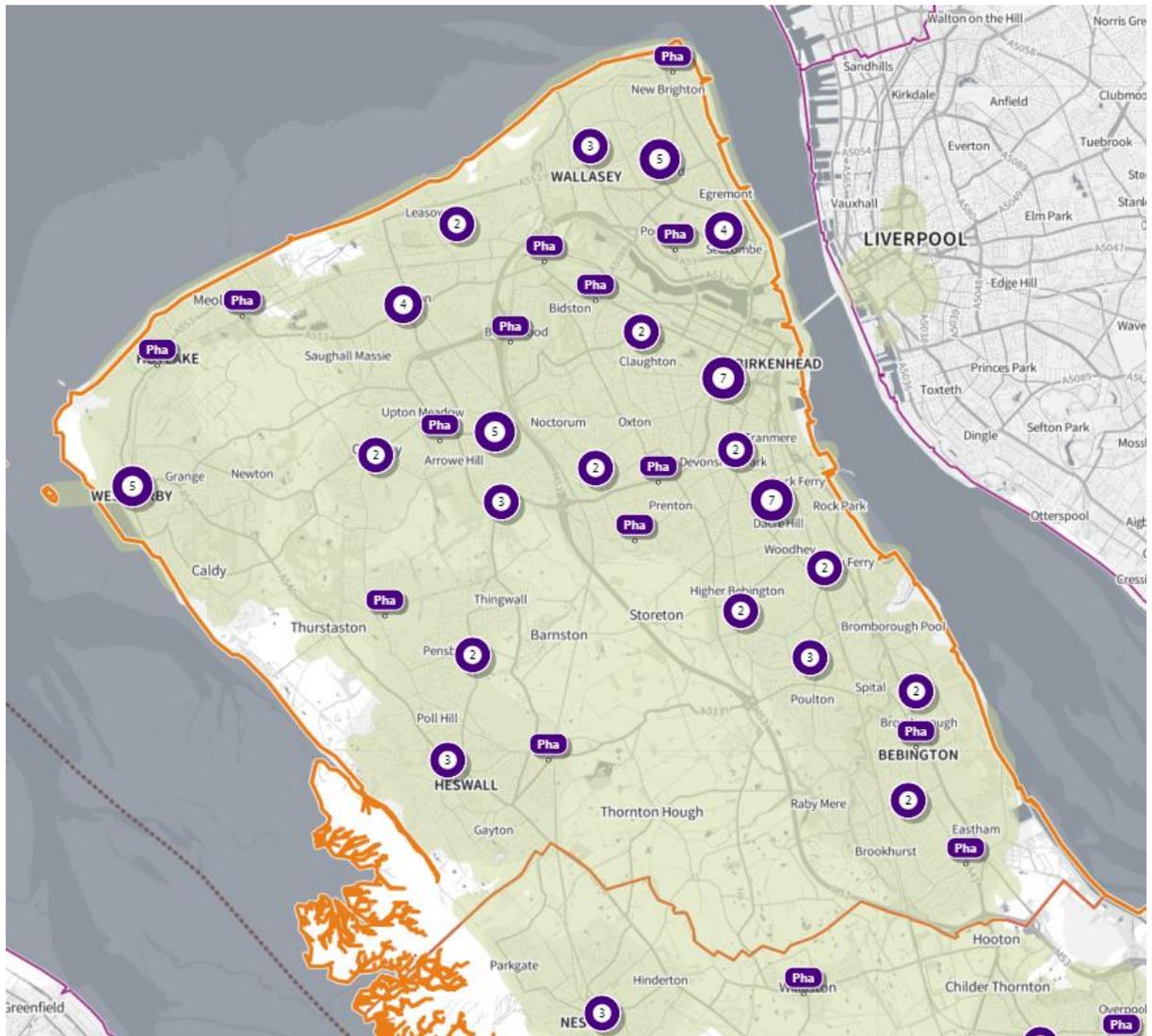
Source: Wirral Intelligence Service using [SHAPE Atlas 2022](#)

Public Transport - Weekday Afternoon



Source: Wirral Intelligence Service using [SHAPE Atlas 2022](#)

Public Transport - Weekday Evening



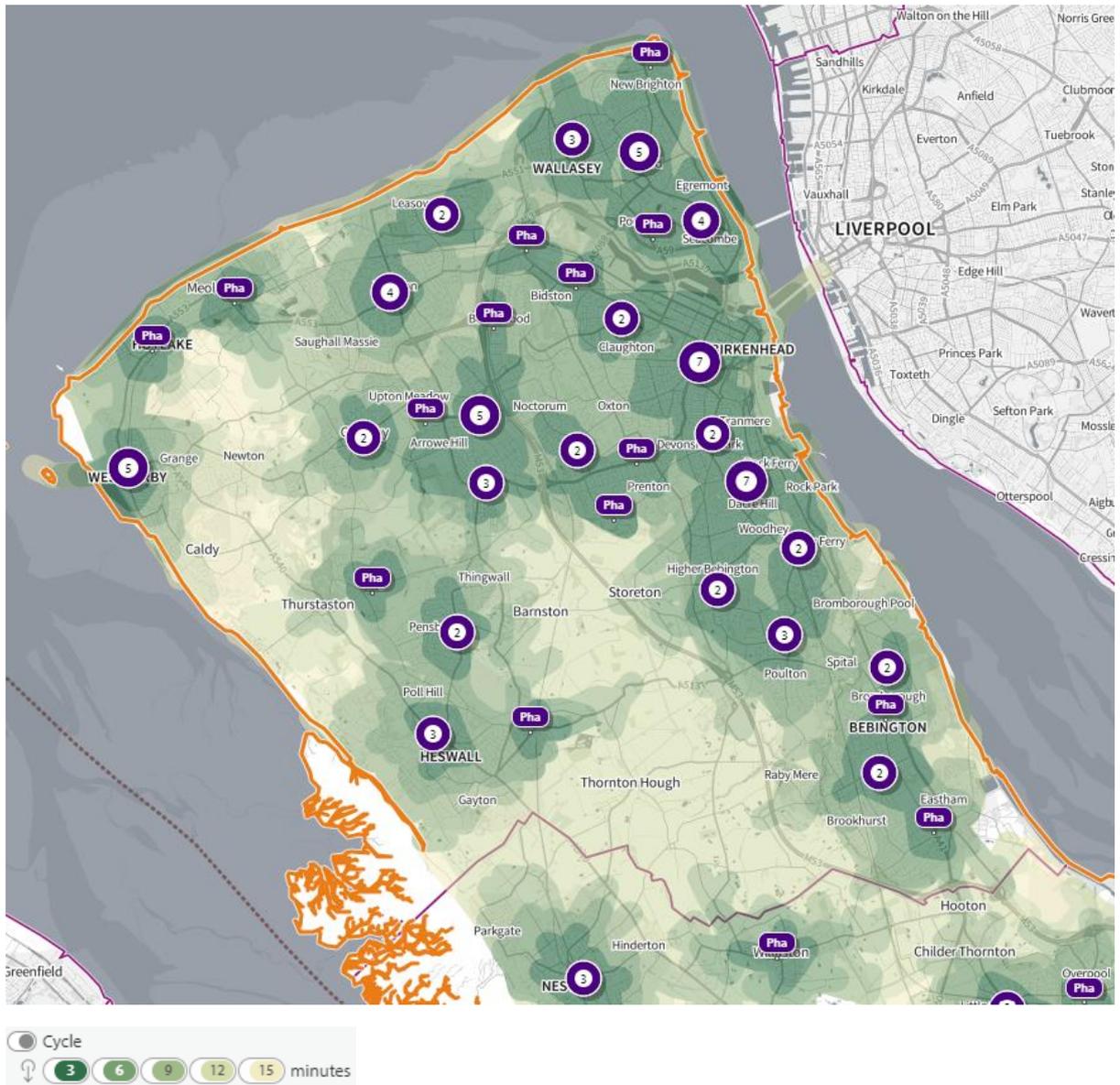
● Public transport

To sites Weekday evening

5 10 15 20 30 minutes

Source: Wirral Intelligence Service using [SHAPE Atlas 2022](#)

Cycling



Source: Wirral Intelligence Service using [SHAPE Atlas 2022](#)

Appendix Nine: Heat Map - Pharmacy opening and closing times across 7 days and by constituency

Wirral

Hours	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
06:00	1	4	4	4	4	2	0
07:00	6	7	8	7	7	7	0
08:00	28	28	28	28	28	16	0
09:00	83	83	83	83	83	66	3
10:00	83	83	83	83	83	66	13
11:00	83	83	83	83	83	66	13
12:00	83	83	83	83	83	58	13
13:00	65	65	65	65	66	35	13
14:00	83	83	83	83	83	36	13
15:00	83	83	83	83	83	35	13
16:00	83	83	83	83	83	34	3
17:00	83	83	83	83	83	25	2
18:00	24	24	24	24	24	13	2
19:00	13	13	13	13	13	11	2
20:00	10	10	10	10	10	10	2
21:00	10	10	10	10	10	9	2
22:00	6	6	6	6	6	2	1
23:00	0	0	0	0	0	0	0

Source: Wirral Intelligence Service (2022)

Note: Some pharmacies are not closed for a full during the lunch period (1-2pm) and have therefore not been classed as closed at this time in the above table.

Birkenhead

Hour	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
06:00	0	2	2	2	2	1	0
07:00	2	3	3	3	3	3	0
08:00	8	8	8	8	8	6	0
09:00	25	25	25	25	25	20	1
10:00	25	25	25	25	25	20	3
11:00	25	25	25	25	25	20	3
12:00	25	25	25	25	25	17	3
13:00	20	20	20	20	20	9	3
14:00	25	25	25	25	25	9	3
15:00	25	25	25	25	25	8	3
16:00	25	25	25	25	25	8	1
17:00	25	25	25	25	25	5	0
18:00	10	10	10	10	10	3	0
19:00	3	3	3	3	3	3	0
20:00	3	3	3	3	3	3	0
21:00	3	3	3	3	3	3	0
22:00	2	2	2	2	2	1	0
23:00	0	0	0	0	0	0	0

Source: Wirral Intelligence Service (2022)

Note: Some pharmacies are not closed for a full during the lunch period (1-2pm) and have therefore not been classed as closed at this time in the above table.

Wallasey

Hour	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
06:00	0	0	0	0	0	0	0
07:00	0	0	0	0	0	0	0
08:00	6	6	6	6	6	2	0
09:00	20	20	20	20	20	12	0
10:00	20	20	20	20	20	12	1
11:00	20	20	20	20	20	12	1
12:00	20	20	20	20	20	12	1
13:00	15	15	15	15	15	6	1
14:00	20	20	20	20	20	7	1
15:00	20	20	20	20	20	7	1
16:00	20	20	20	20	20	7	0
17:00	20	20	20	20	20	7	0
18:00	2	2	2	2	2	1	0
19:00	1	1	1	1	1	1	0
20:00	1	1	1	1	1	1	0
21:00	1	1	1	1	1	1	0
22:00	0	0	0	0	0	0	0
23:00	0	0	0	0	0	0	0

Source: Wirral Intelligence Service (2022)

Note: Some pharmacies are not closed for a full during the lunch period (1-2pm) and have therefore not been classed as closed at this time in the above table.

Wirral South

Hour	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
06:00	0	0	0	0	0	0	0
07:00	0	1	1	1	1	1	0
08:00	6	6	6	6	6	5	0
09:00	18	18	18	18	18	17	1
10:00	18	18	18	18	18	17	4
11:00	18	18	18	18	18	17	4
12:00	18	18	18	18	18	13	4
13:00	13	13	13	13	13	9	4
14:00	18	18	18	18	18	9	4
15:00	18	18	18	18	18	9	4
16:00	18	18	18	18	18	9	1
17:00	18	18	18	18	18	6	1
18:00	4	4	4	4	4	4	1
19:00	4	4	4	4	4	3	1
20:00	2	2	2	2	2	2	1
21:00	2	2	2	2	2	2	1
22:00	2	2	2	2	2	1	1
23:00	0	0	0	0	0	0	0

Source: Wirral Intelligence Service (2022)

Note: Some pharmacies are not closed for a full during the lunch period (1-2pm) and have therefore not been classed as closed at this time in the above table.

Wirral West

Hour	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
06:00	1	2	2	2	2	1	0
07:00	4	3	4	3	3	3	0
08:00	8	8	8	8	8	3	0
09:00	20	20	20	20	20	17	1
10:00	20	20	20	20	20	17	5
11:00	20	20	20	20	20	17	5
12:00	20	20	20	20	20	16	5
13:00	17	17	17	17	18	11	5
14:00	20	20	20	20	20	11	5
15:00	20	20	20	20	20	11	5
16:00	20	20	20	20	20	10	1
17:00	20	20	20	20	20	7	1
18:00	8	8	8	8	8	5	1
19:00	5	5	5	5	5	4	1
20:00	4	4	4	4	4	4	1
21:00	4	4	4	4	4	3	1
22:00	2	2	2	2	2	0	0
23:00	0	0	0	0	0	0	0

Source: Wirral Intelligence Service (2022)

Note: Some pharmacies are not closed for a full during the lunch period (1-2pm) and have therefore not been classed as closed at this time in the above table.

Appendix Ten: Pharmacy service provision by constituency

Essential Services and Advanced Services

Birkenhead: Essential Services and Advanced Services

URN	Trading Name (T/A)	Dis.Appl.	NMS	AUR	Stoma Cus	NHS Flu	CPCS
2	Asda (Birkenhead)	All	Yes	Yes	No	Yes	Yes
5	Birkenhead Pharmacy	All	Yes	No	No	Yes	Yes
10	Boots (Bidston)	All	Yes	No	No	Yes	Yes
11	Boots (Birkenhead)	All	Yes	No	No	Yes	Yes
15	Boots (Holmlands)	All	Yes	No	No	Yes	Yes
17	Boots (Noctorum)	None	Yes	No	No	Yes	Yes
18	Boots (Rock Ferry)	All	Yes	No	No	Yes	Yes
24	Cloughton Pharmacy	All	Yes	No	No	Yes	Yes
26	Dale Pharmacy	None	Yes	No	No	Yes	Yes
28	Day Lewis (Birkenhead)	None	Yes	No	No	Yes	Yes
35	Jamieson's Pharmacy	None	No	No	No	No	No
39	Lloyds Pharmacy (Rock Ferry)	All	Yes	No	No	Yes	Yes
47	Old Chester Pharmacy	All	Yes	Yes	Yes	Yes	Yes
48	Prenton Dell Pharmacy	All	Yes	No	No	No	Yes
50	Rowlands Pharmacy (Central Birkenhead)	None	Yes	No	No	Yes	Yes
54	Rowlands Pharmacy (Oxton)	All	Yes	No	No	Yes	Yes
55	Rowlands Pharmacy (Rock Ferry)	None	Yes	No	No	Yes	Yes
59	St Catherines Pharmacy	(A)	Yes	No	No	Yes	Yes
62	Superdrug Pharmacy (Birkenhead)	None	Yes	Yes	No	Yes	Yes
64	Swettenham Chemists (Rock Ferry)	All	Yes	No	Yes	Yes	Yes
66	Tesco Instore Pharmacy (Birkenhead)	(B) and (C)	Yes	No	No	Yes	Yes
69	Townfield Pharmacy	All	Yes	Yes	Yes	Yes	Yes
70	Tranmere Pharmacy	All	Yes	Yes	No	Yes	Yes
74	Vittoria Pharmacy	None	Yes	Yes	Yes	Yes	Yes
82	Woodchurch Pharmacy	All	Yes	No	No	Yes	Yes

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Key:

Essential Services

Dis.Appl. (Dispensing Appliances) (A) Stoma appliances, (B) Incontinence appliances, (C) Dressings

Advanced Services

NMS - New Medicine Service

AUR - Appliance Use Review Service

Stoma Cus - Stoma Appliance Customisation Service **NHS Flu** - NHS Flu Vaccination Service

CPCS - NHS Community Pharmacist Consultation Service

Wallasey: Essential Services and Advanced Services

URN	Trading Name (T/A)	Dis.Appl.	NMS	AUR	Stoma Cus	NHS Flu	CPCS
4	Asda (Liscard)	None	Yes	No	No	Yes	Yes
6	Blackheath Pharmacy	All	Yes	No	No	No	Yes
16	Boots (Moreton)	None	Yes	No	No	Yes	Yes
20	Boots (Wallasey)	None	Yes	No	No	Yes	Yes
22	Campbells Chemist	All	Yes	No	No	Yes	Soon
23	Carringtons Pharmacy	All	Yes	No	No	Yes	Yes
30	Egremont Pharmacy	All	Yes	Yes	Yes	Yes	Yes
36	Leasowe Pharmacy	All	Yes	Yes	Yes	Yes	Yes
44	Moreton Pharmacy	All	Yes	No	Yes	Yes	Yes
51	Rowlands Pharmacy (Moreton)	All	Yes	No	No	Yes	Yes
52	Rowlands Pharmacy (New Brighton)	None	Yes	No	No	Yes	No
57	Rowlands Pharmacy (Wallasey Village)	(C)	Yes	No	No	Yes	Yes
58	Somerville Pharmacy	All	Yes	No	No	Soon	Yes
60	St Hilarys Pharmacy	All	Yes	No	No	Yes	Yes
61	St Paul's Pharmacy	All	Yes	No	No	Yes	Yes
72	Victoria Central Pharmacy	(C)	Yes	No	No	Soon	Yes
73	Victoria Pharmacy	All	Yes	Yes	No	Yes	Yes
75	Wallasey Village Pharmacy	All	Yes	No	No	Yes	Yes
78	Well (Moreton)	(B)	Yes	No	No	Yes	Yes
83	Wyn Ellis and Son Pharmacy	All	Yes	No	No	Yes	Yes

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Key:

Essential Services

Dis.Appl. (Dispensing Appliances) (A) Stoma appliances, (B) Incontinence appliances, (C) Dressings

Advanced Services

NMS - New Medicine Service

AUR - Appliance Use Review Service

Stoma Cus - Stoma Appliance Customisation Service

NHS Flu - NHS Flu Vaccination Service

CPCS - NHS Community Pharmacist Consultation Service

Wirral South: Essential Services and Advanced Services

URN	Trading Name (T/A)	Dis.Appl.	NMS	AUR	Stoma Cus	NHS Flu	CPCS
3	Asda (Bromborough)	All	Yes	No	No	Yes	Yes
8	Boots (Bebington Church Road)	All	Yes	No	No	Yes	Yes
9	Boots (Bebington Teehey Lane)	All	Yes	No	No	Yes	Yes
12	Boots (Bromborough)	All	Yes	No	Yes	Yes	Yes
14	Boots (Heswall)	All	Yes	No	No	Yes	Yes
25	Cohens Pharmacy	All	Yes	No	No	Yes	Yes
27	Day Lewis (Bebington)	(C)	Yes	No	No	Yes	Yes
29	Dudleys Chemist	All	Yes	No	No	Yes	Yes
32	Heswall Hills Pharmacy	All	Yes	No	No	Yes	Yes
33	Higher Bebington Pharmacy	All	Yes	No	No	Yes	Yes
46	Oakley Pharmacy	All	Yes	Yes	Yes	Yes	Yes
49	Rowlands Pharmacy (Bromborough)	(C)	Yes	No	No	Yes	Yes
53	Rowlands Pharmacy (New Ferry)	None	Yes	No	No	Yes	Yes
63	Swettenham Chemists (Bromborough)	All	Yes	No	Yes	Yes	Yes
65	Temple Pharmacy	All	Yes	No	No	Yes	Yes
67	Tesco Instore Pharmacy (Heswall)	(C)	Yes	No	No	Yes	Yes
68	The Pharmacy Bebington	All	Yes	No	No	Yes	Yes
71	Tree Tops Pharmacy	All	Yes	No	No	Yes	Yes

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Key:

Essential Services

Dis.Appl. (Dispensing Appliances) (A) Stoma appliances, (B) Incontinence appliances, (C) Dressings

Advanced Services

NMS - New Medicine Service

AUR - Appliance Use Review Service

Stoma Cus - Stoma Appliance Customisation Service

NHS Flu - NHS Flu Vaccination Service

CPCS - NHS Community Pharmacist Consultation Service

Wirral West: Essential Services and Advanced Services

URN	Trading Name (T/A)	Dis.Appl.	NMS	AUR	Stoma Cus	NHS Flu	CPCS
1	Asda (Arrowe Park)	All	Yes	No	No	Yes	Yes
7	Boots (Arrowe Park)	None	Yes	No	No	Yes	Yes
13	Boots (Greasby)	None	Yes	No	No	Yes	Yes
19	Boots (Thingwall)	None	Yes	No	No	Yes	No
21	Boots (West Kirby)	All	Yes	No	No	Yes	Yes
31	Heatherlands Pharmacy	All	Yes	Yes	Yes	Yes	Yes
34	Irby Pharmacy	All	Yes	No	No	Yes	Yes
37	Lees Pharmacy Ltd	All	Yes	Yes	Yes	Yes	Yes
38	Lloyds Pharmacy (Arrowe Park)	All	Yes	No	No	Yes	Yes
40	Lloyds Pharmacy (Upton)	All	Yes	No	No	Yes	Yes
41	Lloyds Pharmacy (West Kirby)	All	Yes	No	No	Yes	Yes
42	Manor Pharmacy	All	Yes	No	No	Yes	Yes
43	McKeevers	None	Yes	No	Soon	Yes	Yes
45	Morrisons Pharmacy (West Kirby)	(C)	Yes	No	No	Yes	Yes
56	Rowlands Pharmacy (Upton)	All	Yes	No	No	Yes	Yes
76	Weinronk Pharmacy	All	Yes	No	No	Yes	Yes
77	Well (Hoylake)	(B) and (C)	Yes	No	No	Yes	Yes
79	Well (Pensby)	(B) and (C)	Yes	No	No	Yes	Yes
80	Welsh's Chemist	All	Yes	No	Yes	Yes	Yes
81	Wilson's Chemist	All	Yes	Yes	Yes	Yes	Yes

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Key:

Essential Services

Dis.Appl. (Dispensing Appliances) (A) Stoma appliances, (B) Incontinence appliances, (C) Dressings

Advanced Services

NMS - New Medicine Service

AUR - Appliance Use Review Service

Stoma Cus - Stoma Appliance Customisation Service

NHS Flu - NHS Flu Vaccination Service

CPCS - NHS Community Pharmacist Consultation Service

Commissioned Services

Birkenhead: Commissioned Services

URN	Trading Name (T/A)	Ant coag	Anti Vir	Car Hom Ser	GF support	Hom Del Ser	Lan Ace Ser	Sech Ser	Sha Dis Ser
2	Asda (Birkenhead)								CP
5	Birkenhead Pharmacy			CP		CP			CP
10	Boots (Bidston)					CP			
11	Boots (Birkenhead)			CP		CP			CP
15	Boots (Holmlands)								CP
17	Boots (Noctorum)								
18	Boots (Rock Ferry)								CP
24	Cloughton Pharmacy								CP
26	Dale Pharmacy								CP
28	Day Lewis (Birkenhead)					CP			CP
35	Jamieson's Pharmacy								
39	Lloyds Pharmacy (Rock Ferry)								CP
47	Old Chester Pharmacy				CP	CP			CP
48	Prenton Dell Pharmacy								CP
50	Rowlands Pharmacy (Central Birkenhead)								CP
54	Rowlands Pharmacy (Oxton)					CP			CP
55	Rowlands Pharmacy (Rock Ferry)								CP
59	St Catherines Pharmacy			CP					
62	Superdrug Pharmacy (Birkenhead)				CP	CP			CP
64	Swettenham Chemists (Rock Ferry)								
66	Tesco Instore Pharmacy (Birkenhead)								CP
69	Townfield Pharmacy			CP	CP	CP			
70	Tranmere Pharmacy								CP
74	Vittoria Pharmacy					CP			
82	Woodchurch Pharmacy			CP	CP				

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Key: Commissioned Services

- Ant coag - Anticoagulant Monitoring Service
- Anti Vir - Anti-viral Distribution Service
- Car Hom Ser - Care Home Service
- GF support - Gluten Free Food Supply Service
- Hom Del Ser - Home Delivery Service (not appliances)
- Lan Acc Ser - Language Access Service
- Sch Service - Schools Service
- Sha Dis Ser - Sharps Disposal Service
- CP - currently provide as a commissioned service

Wallasey: Commissioned Services

URN	Trading Name (T/A)	Ant coag	Anti Vir	Car Hom Ser	GF support	Hom Del Ser	Lan Acc Ser	Sch Ser	Sha Dis Ser
4	Asda (Liscard)				CP				CP
6	Blackheath Pharmacy					CP			CP
16	Boots (Moreton)								CP
20	Boots (Wallasey)					CP			CP
22	Campbells Chemist								
23	Carringtons Pharmacy								CP
30	Egremont Pharmacy			CP	CP	CP			CP
36	Leasowe Pharmacy								CP
44	Moreton Pharmacy			CP	CP		CP		
51	Rowlands Pharmacy (Moreton)			CP	CP	CP			CP
52	Rowlands Pharmacy (New Brighton)								CP
57	Rowlands Pharmacy (Wallasey Village)					CP			CP
58	Somerville Pharmacy			CP	CP	CP			CP
60	St Hilarys Pharmacy			CP					CP
61	St Paul's Pharmacy								
72	Victoria Central Pharmacy					CP			CP
73	Victoria Pharmacy								CP
75	Wallasey Village Pharmacy					CP			CP
78	Well (Moreton)					CP			
83	Wyn Ellis and Son Pharmacy								CP

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Key: Commissioned Services

- Ant coag** - Anticoagulant Monitoring Service
- Anti Vir** - Anti-viral Distribution Service
- Care Home Service** - Care Home Service
- GF support** - Gluten Free Food Supply Service
- Hom Del Ser** - Home Delivery Service (not appliances)
- Lan Acc Ser** - Language Access Service
- Sch Service** - Schools Service
- Sha Dis Ser** - Sharps Disposal Service

CP - currently provide as a commissioned service

Wirral South: Commissioned Services

URN	Trading Name (T/A)	Ant coag	Anti Vir	Car Hom Ser	GF support	Hom Del Ser	Lan Acc Ser	Sch Ser	Sha Dis Ser
3	Asda (Bromborough)								
8	Boots (Bebington Church Road)					CP			CP
9	Boots (Bebington Teehey Lane)					CP			CP
12	Boots (Bromborough)								CP
14	Boots (Heswall)								CP
25	Cohens Pharmacy					CP			CP
27	Day Lewis (Bebington)								
29	Dudleys Chemist				CP	CP			CP
32	Heswall Hills Pharmacy								CP
33	Higher Bebington Pharmacy								CP
46	Oakley Pharmacy			CP	CP	CP	CP		CP
49	Rowlands Pharmacy (Bromborough)								CP
54	Rowlands Pharmacy (Oxton)					CP			CP
63	Swettenham Chemists (Bromborough)								CP
65	Temple Pharmacy								CP
67	Tesco Instore Pharmacy (Heswall)								CP
68	The Pharmacy Bebington								CP
71	Tree Tops Pharmacy					CP			CP

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Key: Commissioned Services

- Ant coag - Anticoagulant Monitoring Service
- Anti Vir - Anti-viral Distribution Service
- Car Hom Ser - Care Home Service
- GF support - Gluten Free Food Supply Service
- Hom Del Ser - Home Delivery Service (not appliances)
- Lan Acc Ser - Language Access Service
- Sch Service - Schools Service
- Sha Dis Ser - Sharps Disposal Service

CP - currently provide as a commissioned service

Wirral West: Commissioned Services

URN	Trading Name (T/A)	Ant coag	Anti Vir	Care Home Service	GF support	Home Delivery Service	Lan Acc Ser	Sch Service	Sha Dis Ser
1	Asda (Arrowe Park)								CP
7	Boots (Arrowe Park)								
13	Boots (Greasby)								CP
19	Boots (Thingwall)								CP
21	Boots (West Kirby)								CP
31	Heatherlands Pharmacy			CP					
34	Irby Pharmacy				CP	CP			CP
37	Lees Pharmacy Ltd								
38	Lloyds Pharmacy (Arrowe Park)								CP
40	Lloyds Pharmacy (Upton)								CP
41	Lloyds Pharmacy (West Kirby)								CP
42	Manor Pharmacy					CP	CP		CP
43	McKeevers Chemist					CP			CP
45	Morrisons Pharmacy (West Kirby)								CP
56	Rowlands Pharmacy (Upton)					CP			CP
76	Weinronk Pharmacy								CP
77	Well (Hoylake)					CP			CP
79	Well (Pensby)					CP			CP
80	Welsh's Chemist			CP	CP		CP		
81	Wilson's Chemist					CP	CP		CP

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Key: Commissioned Services

- Ant coag - Anticoagulant Monitoring Service
- Anti Vir - Anti-viral Distribution Service
- Car Hom Ser - Care Home Service
- GF support - Gluten Free Food Supply Service
- Hom Del Ser - Home Delivery Service (not appliances)
- Lan Acc Ser - Language Access Service
- Sch Service - Schools Service
- Sha Dis Ser - Sharps Disposal Service
- CP - currently provide as a commissioned service

Urgent Care

Birkenhead: Urgent Care

URN	Trading Name (T/A)	Min Ail	Out of hours	On Demand	Palliative	Dre
2	Asda (Birkenhead)	CP				
5	Birkenhead Pharmacy	CP				
10	Boots (Bidston)	CP				
11	Boots (Birkenhead)					
15	Boots (Holmlands)	CP				
17	Boots (Noctorum)	CP				
18	Boots (Rock Ferry)	CP			CP	
24	Cloughton Pharmacy	CP			CP	
26	Dale Pharmacy	CP				
28	Day Lewis (Birkenhead)					
35	Jamieson's Pharmacy					
39	Lloyds Pharmacy (Rock Ferry)	CP				
47	Old Chester Pharmacy	CP				
48	Prenton Dell Pharmacy					
50	Rowlands Pharmacy (Central Birkenhead)	CP				
54	Rowlands Pharmacy (Oxton)	CP				
55	Rowlands Pharmacy (Rock Ferry)	CP				
59	St Catherines Pharmacy					
62	Superdrug Pharmacy (Birkenhead)	CP				
64	Swettenham Chemists (Rock Ferry)	CP				
66	Tesco Instore Pharmacy (Birkenhead)	CP			CP	
69	Townfield Pharmacy	CP			CP	
70	Tranmere Pharmacy	CP				
74	Vittoria Pharmacy	CP				
82	Woodchurch Pharmacy	CP				

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Key: Urgent Care

Min Ail - Minor Ailments Scheme

Out of hours - Out of Hours Services

On Demand - On Demand Availability of Specialist Drugs Service

Palliative - Palliative Care scheme

Dre - Dressings

CP - currently provide as a commissioned service

Wallasey: Urgent Care

URN	Trading Name (T/A)	Min Ail	Out of hours	On Demand	Palliative	Dre
4	Asda (Liscard)	CP		CP		
6	Blackheath Pharmacy	CP				
16	Boots (Moreton)	CP				
20	Boots (Wallasey)	CP				
22	Campbells Chemist					
23	Carringtons Pharmacy	CP				
30	Egremont Pharmacy	CP				
36	Leasowe Pharmacy	CP				
44	Moreton Pharmacy	CP				
51	Rowlands Pharmacy (Moreton)	CP				
52	Rowlands Pharmacy (New Brighton)					
57	Rowlands Pharmacy (Wallasey Village)	CP				
58	Somerville Pharmacy					
60	St Hilarys Pharmacy	CP				
61	St Paul's Pharmacy	CP				
72	Victoria Central Pharmacy	CP			CP	
73	Victoria Pharmacy	CP				
75	Wallasey Village Pharmacy	CP				
78	Well (Moreton)	CP				
83	Wyn Ellis and Son Pharmacy	CP				

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Key: Urgent Care

Min Ail - Minor Ailments Scheme

Out of hours - Out of Hours Services

On Demand - On Demand Availability of Specialist Drugs Service

Palliative - Palliative Care scheme

Dre - Dressings

CP - currently provide as a commissioned service

Wirral South: Urgent Care

URN	Trading Name (T/A)	Min Ail	Out of hours	On Demand	Palliative	Dre
3	Asda (Bromborough)	CP		CP		
8	Boots (Bebington Church Road)	CP				
9	Boots (Bebington Teehey Lane)					
12	Boots (Bromborough)	CP			CP	
14	Boots (Heswall)	CP				
25	Cohens Pharmacy					
27	Day Lewis (Bebington)	CP				
29	Dudleys Chemist	CP				
32	Heswall Hills Pharmacy	CP				
33	Higher Bebington Pharmacy	CP			CP	
46	Oakley Pharmacy	CP				
49	Rowlands Pharmacy (Bromborough)	CP				
53	Rowlands Pharmacy (New Ferry)					
63	Swettenham Chemists (Bromborough)	CP				
65	Temple Pharmacy	CP				
67	Tesco Instore Pharmacy (Heswall)	CP			CP	
68	The Pharmacy Bebington	CP				
71	Tree Tops Pharmacy	CP			CP	

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Key: Urgent Care

Min Ail - Minor Ailments Scheme

Out of hours - Out of Hours Services

On Demand - On Demand Availability of Specialist Drugs Service

Palliative - Palliative Care scheme

Dre - Dressings

CP - currently provide as a commissioned service

Wirral West: Urgent Care

URN	Trading Name (T/A)	Min Ail	Out of hours	On Demand	Palliative	Dre
1	Asda (Arrowe Park)	CP				
7	Boots (Arrowe Park)	CP				
13	Boots (Greasby)	CP				
19	Boots (Thingwall)	CP				
21	Boots (West Kirby)	CP				
31	Heatherlands Pharmacy					
34	Irby Pharmacy					
37	Lees Pharmacy Ltd					
38	Lloyds Pharmacy (Arrowe Park)	CP		CP	CP	
40	Lloyds Pharmacy (Upton)					
41	Lloyds Pharmacy (West Kirby)	CP				
42	Manor Pharmacy	CP			CP	
43	McKeevers Chemist					
45	Morrisons Pharmacy (West Kirby)	CP				
56	Rowlands Pharmacy (Upton)	CP				
76	Weinronk Pharmacy	CP				
77	Well (Hoylake)	CP				
79	Well (Pensby)	CP				
80	Welsh's Chemist	CP				
81	Wilson's Chemist	CP			CP	

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Key: Urgent Care

Min Ail - Minor Ailments Scheme

Out of hours - Out of Hours Services

On Demand - On Demand Availability of Specialist Drugs Service

Palliative - Palliative Care scheme

Dre - Dressings

CP - currently provide as a commissioned service

Public Health

Birkenhead: Public Health

URN	Trading Name (T/A)	EHC	NSP	Sup Admin
2	Asda (Birkenhead)	CP		CP
5	Birkenhead Pharmacy	CP		CP
10	Boots (Bidston)	CP	CP	CP
11	Boots (Birkenhead)	CP		CP
15	Boots (Holmlands)	CP		CP
17	Boots (Noctorum)	CP		
18	Boots (Rock Ferry)	CP	CP	CP
24	Claughton Pharmacy	CP	CP	CP
26	Dale Pharmacy	CP		CP
28	Day Lewis (Birkenhead)			CP
35	Jamieson's Pharmacy			
39	Lloyds Pharmacy (Rock Ferry)	CP		CP
47	Old Chester Pharmacy	CP	CP	CP
48	Prenton Dell Pharmacy			CP
50	Rowlands Pharmacy (Central Birkenhead)	CP	CP	CP
54	Rowlands Pharmacy (Oxton)	CP		CP
55	Rowlands Pharmacy (Rock Ferry)			CP
59	St Catherines Pharmacy	CP	CP	CP
62	Superdrug Pharmacy (Birkenhead)			CP
64	Swettenham Chemists (Rock Ferry)	CP		CP
66	Tesco Instore Pharmacy (Birkenhead)	CP		CP
69	Townfield Pharmacy			CP
70	Tranmere Pharmacy	CP		CP
74	Vittoria Pharmacy			CP
82	Woodchurch Pharmacy	CP		CP

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Please note: The three services currently commissioned are Emergency Hormonal Contraception Service, Needle and Syringe Exchange Service and Supervised Administration.

ABL provide Smoking Cessation services in Wirral - can receive referrals from Pharmacy to that service
Other service providers can offer services not being commissioned from pharmacy providers

CP - currently provide as a commissioned service

Wallasey: Public Health

URN	Trading Name (T/A)	EHC	NSP	Sup Admin
4	Asda (Liscard)	CP		CP
6	Blackheath Pharmacy			CP
16	Boots (Moreton)	CP		CP
20	Boots (Wallasey)	CP		CP
22	Campbells Chemist			
23	Carringtons Pharmacy			
30	Egremont Pharmacy	CP	CP	CP
36	Leasowe Pharmacy	CP		CP
44	Moreton Pharmacy			CP
51	Rowlands Pharmacy (Moreton)	CP	CP	CP
52	Rowlands Pharmacy (New Brighton)	CP		CP
57	Rowlands Pharmacy (Wallasey Village)			
58	Somerville Pharmacy			CP
60	St Hilarys Pharmacy	CP		CP
61	St Paul's Pharmacy	CP	CP	CP
72	Victoria Central Pharmacy	CP		CP
73	Victoria Pharmacy	CP	CP	CP
75	Wallasey Village Pharmacy	CP		CP
78	Well (Moreton)			
83	Wyn Ellis and Son Pharmacy	CP	CP	CP

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Please note: The three services currently commissioned are Emergency Hormonal Contraception Service, Needle and Syringe Exchange Service and Supervised Administration.

CP - currently provide as a commissioned service

Wirral South: Public Health

URN	Trading Name (T/A)	EHC	Sup Admin
3	Asda (Bromborough)	CP	
8	Boots (Bebington Church Road)	CP	CP
9	Boots (Bebington Teehey Lane)	CP	CP
12	Boots (Bromborough)	CP	CP
14	Boots (Heswall)	CP	CP
25	Cohens Pharmacy		CP
27	Day Lewis (Bebington)	CP	
29	Dudleys Chemist	CP	
32	Heswall Hills Pharmacy	CP	
33	Higher Bebington Pharmacy	CP	CP
46	Oakley Pharmacy		CP
49	Rowlands Pharmacy (Bromborough)	CP	
53	Rowlands Pharmacy (New Ferry)		CP
63	Swettenham Chemists (Bromborough)	CP	CP
65	Temple Pharmacy		
67	Tesco Instore Pharmacy (Heswall)	CP	CP
68	The Pharmacy Bebington	CP	CP
71	Tree Tops Pharmacy	CP	CP

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Please note: The two services currently commissioned in Wirral South are Emergency Hormonal Contraception Service and Service and Supervised Administration.

CP - currently provide as a commissioned service

Wirral West: Public Health

URN	Trading Name (T/A)	EHC	NSP	Sup Admin
1	Asda (Arrowe Park)	CP		CP
7	Boots (Arrowe Park)			CP
13	Boots (Greasby)			CP
19	Boots (Thingwall)	CP		CP
21	Boots (West Kirby)	CP		CP
31	Heatherlands Pharmacy			CP
34	Irby Pharmacy			
37	Lees Pharmacy Ltd			
38	Lloyds Pharmacy (Arrowe Park)	CP	CP	CP
40	Lloyds Pharmacy (Upton)	CP		
41	Lloyds Pharmacy (West Kirby)	CP		CP
42	Manor Pharmacy			CP
43	McKeevers			CP
45	Morrisons Pharmacy (West Kirby)			
56	Rowlands Pharmacy (Upton)			
76	Weinronk Pharmacy	CP		CP
77	Well (Hoylake)	CP	CP	CP
79	Well (Pensby)	CP	CP	CP
80	Welsh's Chemist	CP		CP
81	Wilson's Chemist			CP

Source: Wirral Intelligence Services (2022) based upon self-reported data from community pharmacy contractors between June and September 2021 - later data may not correspond with this original content.

Please note: The three services currently commissioned are Emergency Hormonal Contraception Service, Needle and Syringe Exchange Service and Supervised Administration.

CP - currently provide as a commissioned service

Key: Public Health section above

- EHC**- Emergency Hormonal Contraception Service
- Quickstart** - Quickstart Contraception
- Contra Serv** - Contraception Service
- Chlam Test** - Chlamydia Testing
- Chlam Treat** - Chlamydia Treatment Service
- Con Inj Ser** - Contraception Injection Service
- NSP** - Needle and Syringe Exchange Service
- Obesity** - Obesity Management (adults and children)
- NRT Vouch** - NRT Voucher Dispensing Service
- Smoke Cess Coun** - Smoking Cessation Counselling Service
- Varen PGD** - Varenicline (Champix) PGD Service
- Sup Admin** - Supervised Administration

For details of each pharmacy contractor please see legend of providers in [Appendix One](#)

Appendix Eleven: Formal Consultation on Wirral PNA 2022 - 2025

Report on Consultation (April 2022 - June 2022)

- [Wirral Pharmaceutical Needs Assessment 2022 – 2025 - Statutory Consultation Report](#)
- Or use link <https://www.wirralintelligenceservice.org/media/3637/final-wirral-hwbb-pna-appendix-11-consultation-report-for-september-2022-v4-accchkd.pdf>
- [Wirral Pharmaceutical Needs Assessment 2022 – 2025 - EasyRead version of Statutory Consultation Report](#)
- or use link <https://www.wirralintelligenceservice.org/media/3638/final-wirral-pharmaceutical-needs-assessment-easyread-post-consultation-report-july-22-acc-chkd.pdf>

Appendix Twelve: Sources for Part 2: Key Issues

1. [Children in low income families: local area statistics](#)
2. [Frequently Asked Questions "Indices of Multiple Deprivation 2019", Dept for Communities & Local Government](#)
3. [Public Health Outcomes Framework - Data - OHID \(phe.org.uk\)](#)
4. [Life Expectancy - Wirral Intelligence Service](#)
5. [Sub-regional fuel poverty data 2021, GOV.UK \(www.gov.uk\)](#)
6. [Children & Young People: Population and Demographics, Wirral Intelligence Service, 2021](#)
7. [Child and Maternal Health - Data - OHID \(phe.org.uk\)](#)
8. [Subnational population projections for England - Office for National Statistics](#)
9. [Projecting Older People Population Information System \(poppi.org.uk\)](#)
(Requires sign up)
10. [Productive Healthy Ageing Profile - Data - OHID \(phe.org.uk\)](#)
11. [Older People - Wirral Intelligence Service](#)
12. ePact2, NHS Business Services Authority (restricted) (NHSBSA)
Copyright [2022] This information is licenced under the terms of the [Open Government Licence](#).
13. Local Tobacco Control Profiles - Data - OHID (phe.org.uk)
14. [Wirral Local Insight \(communityinsight.org\)](#)
15. [Local Alcohol Profiles for England - Data - OHID \(phe.org.uk\)](#)
16. [Performance | Police.uk \(www.police.uk\)](#)
17. [NDTMS - National Drug Treatment Monitoring System](#) (Partially restricted)
18. [Statistics on Drug Misuse, England 2020 - NHS Digital](#)
19. [Deaths related to drug poisoning in England and Wales Statistical bulletins - Office for National Statistics \(ons.gov.uk\)](#)
20. [Mortality Profile - Data - OHID \(phe.org.uk\)](#)

21. [Wirral Child Immunisations Profiles \(ad hoc\) - OHID \(phe.org.uk\)](#)
22. [Seasonal flu vaccine uptake in GP patients: monthly data, 2019 to 2020 - GOV.UK \(www.gov.uk\)](#)
23. [Pertussis immunisation in pregnancy: vaccine coverage \(England\) - GOV.UK \(www.gov.uk\)](#)
24. [Cancer Services - Data - OHID \(phe.org.uk\)](#)
25. [Antenatal & Newborn NHS screening programmes: KPI reports 2020 to 2021, GOV.UK \(www.gov.uk\)](#)
26. [Young People & Adults' NHS screening programmes: KPI reports 2020 to 2021, GOV.UK \(www.gov.uk\)](#)
27. [CancerData \(www.cancerdata.nhs.uk\)](#)
28. [Quality and Outcomes Framework, NHS Digital](#)
29. [Hypertension prevalence estimates for local populations, GOV.UK \(www.gov.uk\)](#)
30. [Projecting Adult Needs and Service Information System \(pansi.org.uk\)](#)
(Requires sign up)
31. [Dementia Profile - OHID \(phe.org.uk\)](#)
32. [Sexual and Reproductive Health Profiles - Data - OHID \(phe.org.uk\)](#)
33. [Conceptions in England and Wales - Office for National Statistics](#)
34. [NHS Outcomes Framework \(NHS OF\) - NHS Digital](#)
35. [Palliative and End of Life Care Profiles - Data - OHID \(phe.org.uk\)](#)
36. [AMR local indicators - Data - OHID \(phe.org.uk\)](#)
37. [Local Authority Health Profiles - Data - OHID \(phe.org.uk\)](#)
38. [National General Practice Profiles - Data - OHID \(phe.org.uk\)](#)