



Policy and Scrutiny Committee for Health and Social Care – 4 September 2023

Community Pharmacy Briefing

Introduction

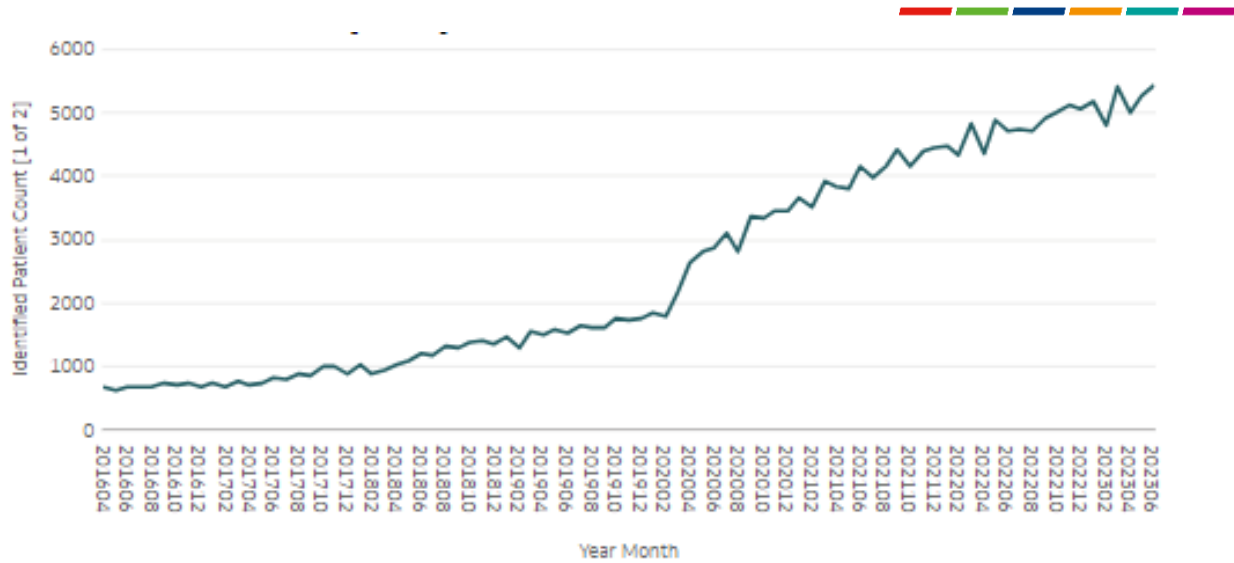
1. Community pharmacy nationally is currently undergoing an evolution in the services they provide and how the general population obtains the variety of medications that they require. Nationally the introduction of Community Pharmacy Consultation Service, Discharge Medicines Service and the recently announced pathfinder sites to pilot prescribing from community pharmacies are all changes in the Community Pharmacy service provision moving towards a more clinical focused approach. This is in addition to the now established distance selling (online pharmacies) that provide patients with greater access to clinical services and variety in access for prescription medicines.

Isle of Wight Community Pharmacy

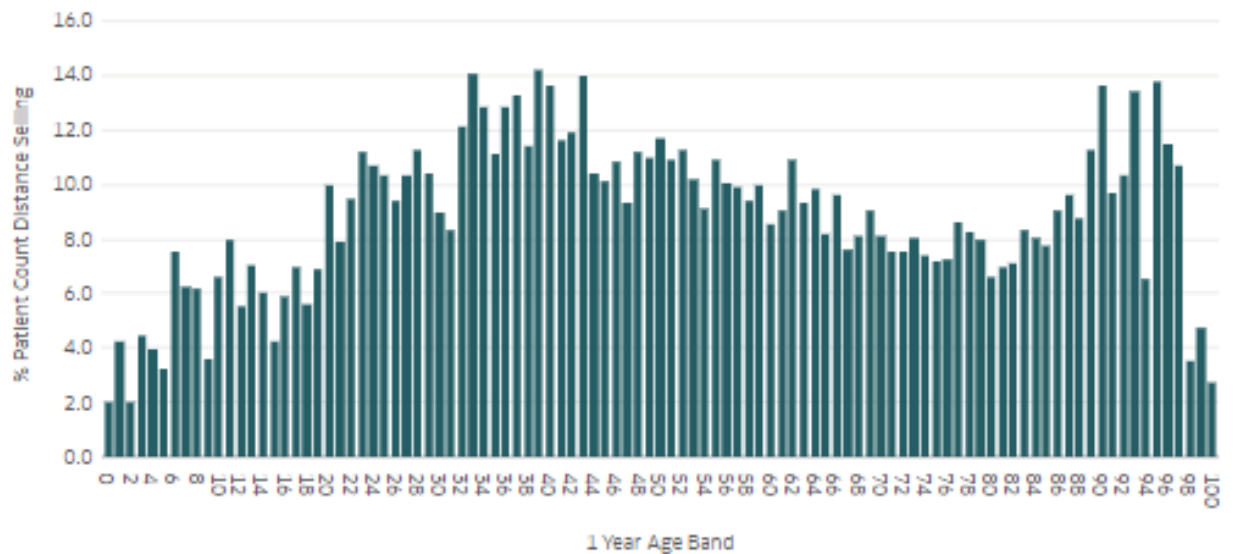
2. The Isle of Wight currently has 28 pharmacies providing “High Street” community pharmacy providing services for the population. While the high street pharmacy is a well-known and trusted part of many communities this is changing with patients increasingly choosing to obtain their prescription medications via a different route.

Distance Selling

3. Increasingly, since their advent, patients are moving to an online provision for prescriptions. It is expected that this is for repeat prescriptions where clinical intervention is relatively low and the patient is happy to have regular supply via the post.
4. Analysis of prescriptions dispensed for Isle of Wight patients showed an increase in use of online pharmacies. This replicates the national trend and is seen by many patients to be the most efficient way of accessing their regular medications. For the last 3 months dispensing data that is available, 9.1% of IOW patients used an online pharmacy for at least one prescription.
5. While a jump can be seen at the same time as the pandemic hit, below, there is clearly a trend for patients to obtain their prescriptions online which has increased since the pandemic. This will reduce high street pharmacy footfall and subsequent income.



- It is of note that the age groups of the Isle of Wight's population using online are not perhaps as would be initially expected. It is proposed that the second peak on the chart below, in the age range 88 to 96, corresponds to an age range where other family members are perhaps looking after relative's prescription medication and to the use of online pharmacies by Care Homes.



- With the two charts above it can be seen that prescription footfall is increasingly transferring to an online supply route. It is widely quoted that repeat prescriptions account for approximately 80% of all prescription items. As such these items are not often seen by patients as needing input from a pharmacist and hence only require the supply role.

Out of hours

- The recent announcement of the closure of the only 100 hour (late night) pharmacy on the IOW has resulted in late night prescriptions no longer being available. Recent analysis of the referrals from 111 show that 39 patients were directed to attend a pharmacy within a time period that required the 100 hour pharmacy to be open. This

period for this analysis was June 22 – May 23. Of those patients requiring a pharmacy to be open “out of hours” 32 were for repeat prescriptions. This is likely to be due to forgotten ordering or medication left behind when travelling. So the out of hours patient demand from 111 looks to be very small. The ICB is looking to access other data to further the analysis.

9. There are two options to replace this lost access assuming a provider is unwilling to take on a contract.
10. Firstly, the ICB could direct pharmacies across the island to take on a rota to cover the lost hours. This is estimated to cost in the region of £190k to £280k depending upon whether a 2 or 3 hour rota is required. Given the national workforce issues that are acute on the island it cannot be assumed that any extended hours rota can be staffed.
11. Secondly, with additional data from the out of hours services as requested we can build a picture of which medicines are frequently required, these could then be provided by Portsmouth Hospital manufacturing and ward distribution to the out of hours providers in prepacks. They can then supply directly to the patient without the need for a pharmacy.
12. As the closure of a pharmacy does not release any funds, only activity to other pharmacies, this would need additional funding. This new funding would need to be found from other healthcare budgets. It is of note that the closure of the 100 hour pharmacy was at the end of a long period of decline in prescription numbers. It is proposed that this is a result in reduced footfall from online service both grocery and pharmacy. As such the prescription activity may be
13. Increasingly the national direction of travel is for community pharmacies to provide more clinically focussed services as seen in the Community Pharmacy Consultation Service, Discharge Medicines Service and the new initiatives for prescribing to be carried out in community pharmacy.

Workforce

14. In 2016 there was only one pharmacist working and prescribing within a GP practice. There are now four pharmacists working and prescribing in GP practices. While not large numbers in themselves it does put a pressure on community pharmacy recruitment and retention. Three pharmacists would be able to run two pharmacies with supporting staff. As such this move to GP practices has potentially added to the 164 unplanned closures last year. While the number of unplanned closures has reduced with 16 in the last 4 months this does demonstrate the fragility in the pharmacy workforce as it applies to the Isle of Wight.

Conclusion

15. With the gradual evolution of patients to an online supply of their prescriptions the reduction in funds to local high street pharmacies will inevitably reduce. The result in



this is seen as one of the drivers to the reduction in high street pharmacies. Most notably with the recent Lloyds reduction in investment in community pharmacies and the recent announcement of Boots to close 300 of their pharmacies. We are yet to be given notice of which Boots pharmacies are to close.

16. In addition, the challenges to the pharmacy workforce from other sectors of healthcare will result in reduced workforce available to high street pharmacies. This is particularly notable on the Isle of Wight where healthcare professional recruitment and retention can be challenging.
17. Community pharmacies can only survive in the high street while it is financially viable for them to do so and as such if patient have their prescriptions dispensed elsewhere then that funding for community pharmacy will leave the island. As there are no establishment payments if a pharmacy closes the ICB receive not see a reduction in spend after the closure of a pharmacy and as such does not release fund to commission service from a pharmacy to support financial viability.
18. A detailed strategic review of all community pharmacy services provided to HIOW patients will need to be undertaken to identify how and where it is best to provide services for the population going forward. Given the changes in how patients access medicines and medicines advice it is likely that online pharmacy services will play a large part of this.

Jo Tomkinson, Primary Care Transformation Lead
Hampshire and Isle of Wight Integrated Care Board