

Pharmacy Services

**How well are pharmacy services
working for local people?**





Introduction

Healthwatch Rochdale is the local independent health and social care champion for the Rochdale borough who listen to local people's experiences of using health and social care services and we use those experiences to help improve services locally & nationally.

Pharmacy services are now playing a larger role in looking after people's health and following a discussion at Healthwatch Rochdale's Advisory Group we want to hear people's experience of using these services in Heywood, Middleton, Rochdale & Pennines.

A survey was carried out which ran from Wednesday 9th September until Monday 7th November 2022. The survey had a total of 131 responses & quotes from this survey will be shared within this report.

Key Findings

Medication

The majority of people use the pharmacy to pick up a prescription for themselves or on behalf of someone else. Main issues included medication being out of stock or prescriptions not being ready on time.



NHS Minor Ailment Scheme

Only a small amount of people had used the Minor Ailment Scheme in the last twelve months and the majority of people had never heard of the scheme.

Quality of service

Most people were happy with the service they were receiving from the pharmacy and with the quality of pharmacist and staff members.





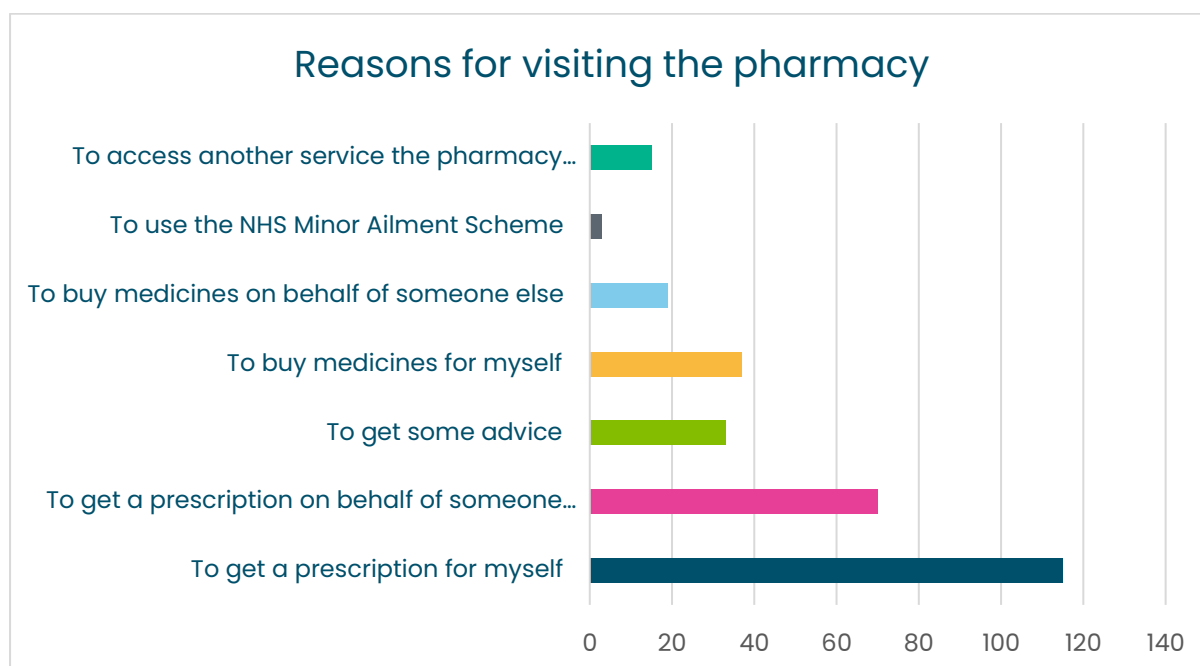
Our findings

Reasons to visit the pharmacy

Most people visited the pharmacy to pick up a prescription with **88%** picking up a prescription for themselves & **53%** picking up a prescription on behalf of someone else.

The second most popular reason was to buy medicine with **28%** using the pharmacy to buy medicine for themselves & **14%** buying medicine on behalf of someone else.

25% went to get advice and **2%** used the pharmacy to use the NHS Minor Ailment Scheme. Other reasons for using the pharmacy were to get a flu vaccination.





Medication

Of those who used the pharmacy to collect a prescription 35% reported issues with their medication. The majority of issues were regarding items being out of stock and prescriptions not being ready on time. People also spoke about items of medication missing from their prescription and waiting times to collect once in the pharmacy.



“Prescription not ready to collect. Items unavailable. Wrong item dispensed. Wrong quantity dispensed”.

“Often not all in stock have had to make return visits”.

“Not all medication available. Text message sent to say to pick prescriptions up and then not complete on arrival”.

“Sometimes my tablets aren't in stock, and they have to order them in which means a delay in when they are available to collect”.





NHS Minor Ailment Scheme

18% of people said they were referred to the pharmacy from another service 69% being referred by their GP, 6% had been referred by NHS 111 & 14% by the hospital.

The majority of people we spoke with had never heard of the NHS Minor Ailment Scheme with 71% saying they had never heard of the scheme. Only 12% had used the scheme within the last twelve months and 21% saying their local pharmacy offered the service.

As the majority of people we spoke with had never heard of the Minor Ailment Scheme it maybe that some people who are eligible for the scheme cannot access the service due to lack of awareness.

Private Consultation Room

74% said the pharmacy they use has a private consultation room. Some had used this room and felt it was a private space, others stated the room was used for storage or they hadn't been able to use.



"Very useful when I've needed to, as privacy is important there"

"Have used and service confidential and safe space to use"



“Asked to use it to see someone on over two occasions and was fobbed off”

Quality of Staff

The majority of respondents rated the service they received from their pharmacist & pharmacy staff as excellent or good. However, some people told us that they were unhappy with long waiting times and that the pharmacy was short staffed.



“Long queues and most times one person on counter dealing with prescriptions. Called today waited 20minutes to get my tablets. Staff trying best but need more on counter”

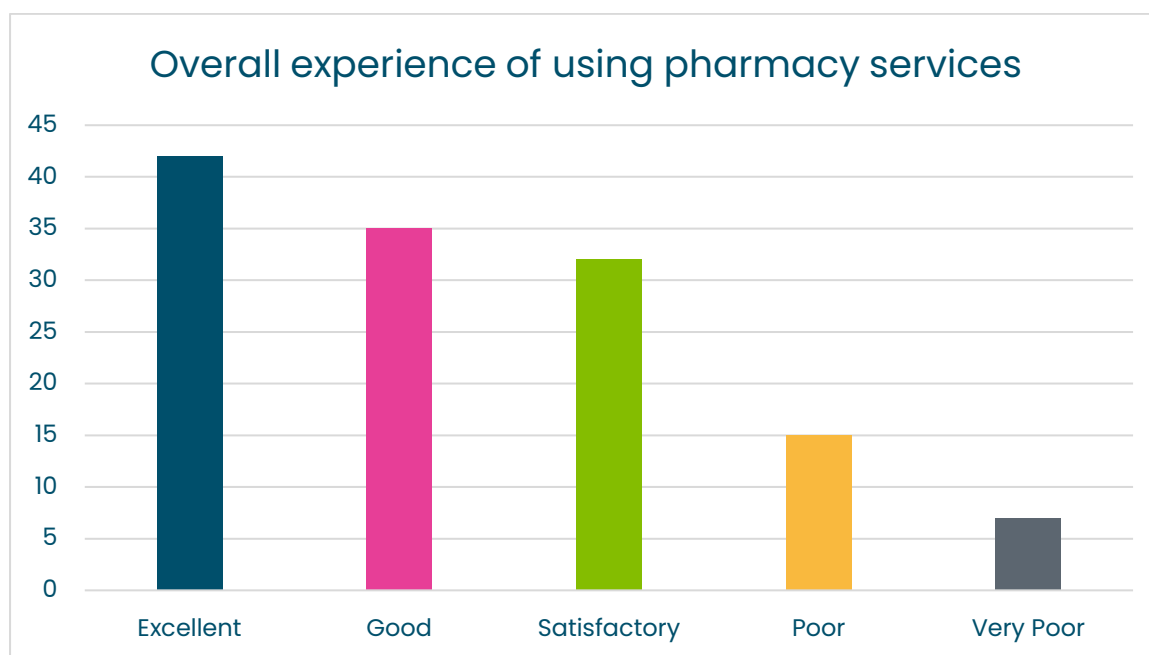
“Understaffed so don't always have the time they need”.

“Always approx. half hours wait every time I pick up a prescription”



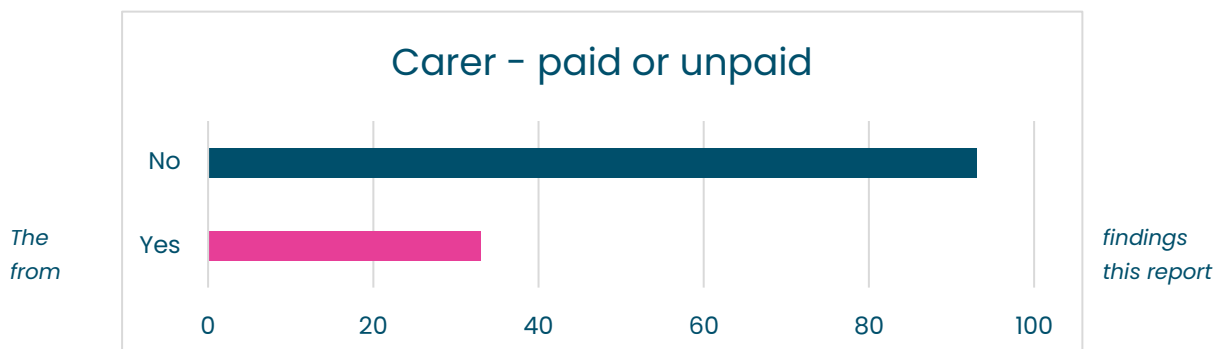
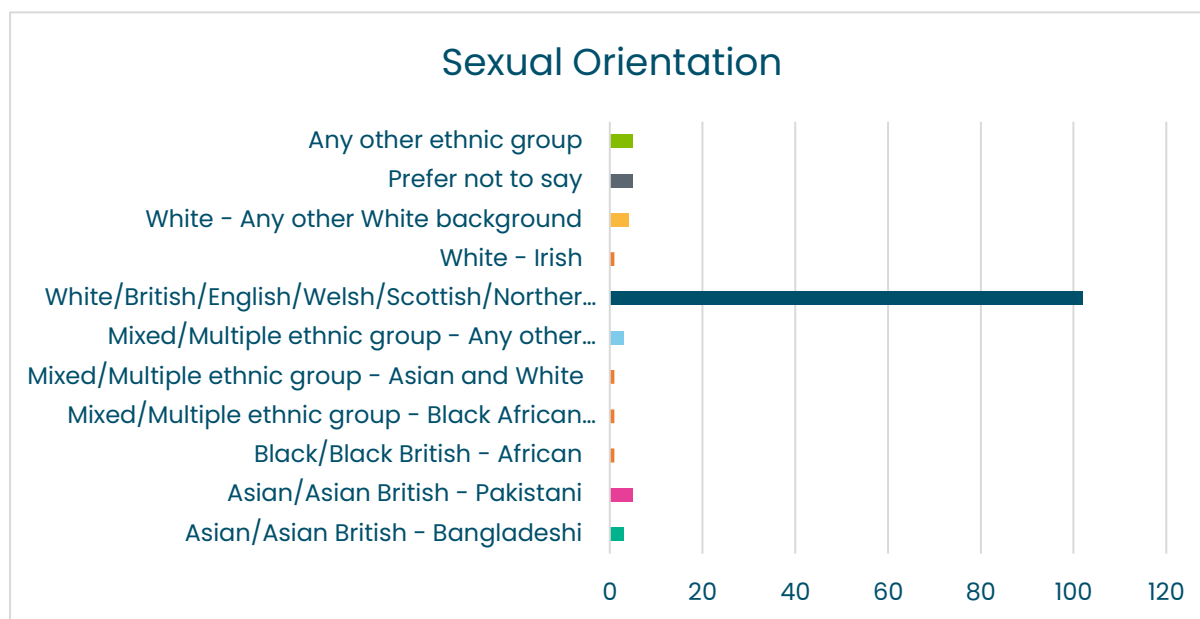
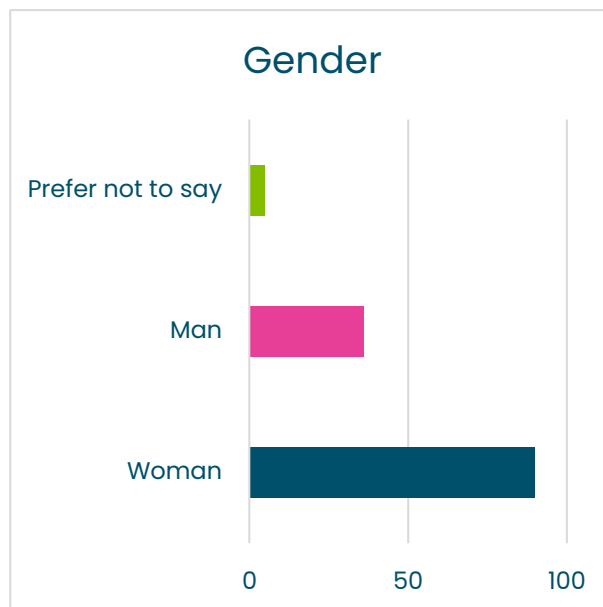
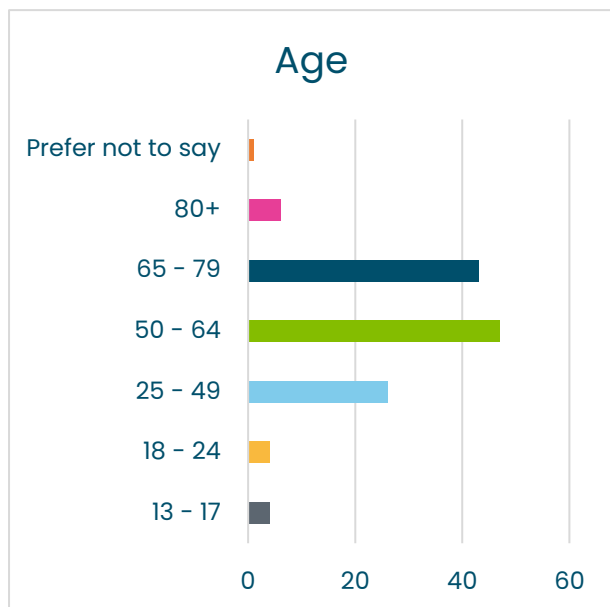
Overall experience of using pharmacy services

Overall people said they were happy with the service they received from their local pharmacy with 32% rating the service as excellent and 27% rating it as good. However, 12% rated the service as poor and 5% rated it as very poor.





Who spoke to us



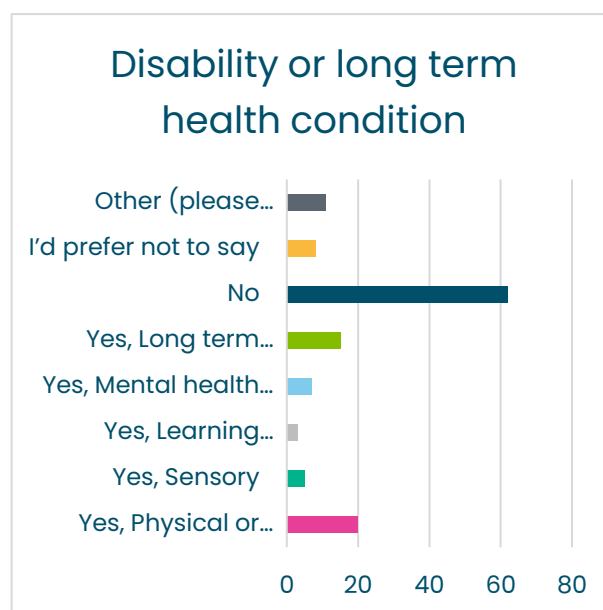
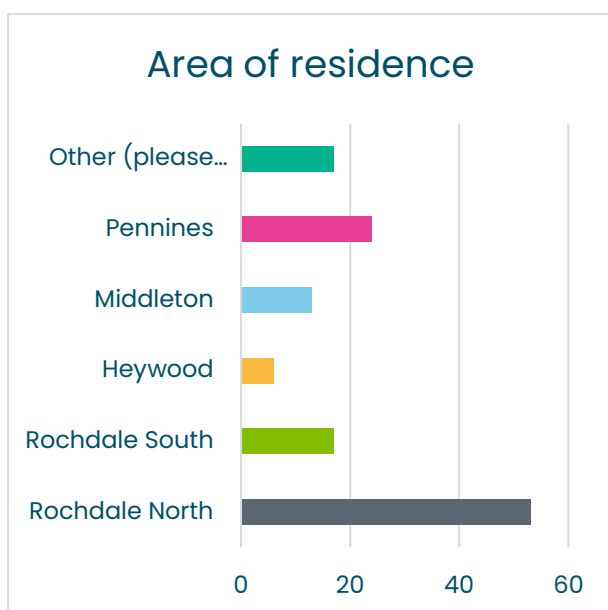
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have been shared with NHS England and Rochdale Borough Council to support the recent Pharmaceutical Needs Assessments Via Rochdale's Health & Wellbeing Board.

Recommendations

Findings from this survey show that overall people are happy with the service they receive from their pharmacy and their staff. Our findings show that a sizeable number of people we spoke to had never heard of the NHS Minor Ailment Scheme and were unaware if this service was offered at their pharmacy.

- **Recommendation** – For pharmacies who provide the NHS Minor Ailment Scheme to advertise they provide the service though a leaflet or flyer available on counters, windows or on noticeboards.

Next steps – Healthwatch Rochdale will complete a mystery shopper exercise on all the pharmacy's that are sign up to deliver the minor ailments scheme to ensure this



is well advertised within the individual pharmacies across the borough.

The biggest issue people reported when collecting prescriptions was medication being out of stock. It is unclear if these are repeat prescriptions or prescriptions that have just been issued.

- **Recommendation** – For patients to be updated of the timeframe on when a repeat prescription will be ready upon request.
- **Recommendation** – For pharmacies to inform patients how long it will take for medication to be in stock & signpost patients to other pharmacies if medication needed that day.

Next Steps – Healthwatch Rochdale will be writing to all local pharmacies to inform them of our work and findings and asking them to ensure better information sharing with patients is considered. This will be reviewed and followed up but a future quick-fire survey on Pharmacy's in 6 months times to track any improvements to our findings and also reach deeper grass root communities.

- **Recommendation** – For local pharmacies and GPS to work closely together. Local primary care colleagues to attend and be accountable at PLACE level through the HMR Primary Care Commissioning Committee.



Response

NHS GM (HMR) response to Healthwatch Rochdale Survey findings: Pharmacy Survey, how well are pharmacy services working for local people?

(Survey undertaken Wednesday 9th September until Monday 7th November 2022).

Healthwatch Finding 1.

The Minor Ailment Scheme (MAS).

Healthwatch found that a sizeable number of people in Heywood Middleton and Rochdale had never heard of the NHS Minor Ailment Scheme and were unaware if this service was offered at their pharmacy.

Healthwatch recommendation 1: *For pharmacies who provide the NHS Minor Ailment Scheme to advertise they provide the service through a leaflet or flyer available on counters, windows or on noticeboards.*

NHS GM (HMR) response to recommendation 1: We agree with this recommendation. **Please see below for context and actions underway.**

The Minor Ailment Scheme is a locally commissioned service, funded through NHS GM localities. Much work was undertaken (prior to COVID) to align the MAS service specification across Greater Manchester, and to align the eligibility criteria to reflect national guidance on selfcare i.e. products are only available on the GM scheme for those who meet the financial criteria for free prescriptions. HMR adopted the GM scheme. Despite work done to harmonise arrangements the provision is still not consistent across GM, with only 8 of the 10 localities currently live with the scheme. Salford, Tameside and Stockport localities have adopted the scheme but with a wider access criterion compared to the other localities – i.e., anyone who is eligible for a free prescription in these localities can access the



scheme, even if they are not considered financially vulnerable. Due to this variation in access across Greater Manchester, advertising the scheme has not been possible at a GM level.

Since the MAS was reviewed, there have been considerable changes to how people access services, and to the community pharmacy contract and funding model. Community pharmacies are under sustained and significant pressures. In many cases, these pressures have led to pharmacies closing their doors.

Although the demand and pressure has been rapidly increasing, community pharmacy is still the right place to support patients with minor illness. Recognising the current climate, we are undertaking an exercise (in collaboration with the GM Local Pharmaceutical Committee) to confirm which contracted pharmacies intend to continue delivering the MAS in HMR (and across GM). This will also provide the opportunity to seek feedback from contractors regarding any obstacles they experience.

For pharmacies in HMR that have confirmed that they are delivering the MAS, further work will be undertaken to support them with appropriate publicity materials and messaging. We will ensure a list of Pharmacies who have agreed delivery is available to the public and general practice.

In the longer term, NHS GM continues to have the ambition of harmonising the MAS scheme, to ensure equitable access with a single contract form and agreed eligibility.

Healthwatch Finding 2.

Prescriptions not being ready on time and out of stock medication. Health watch found that of those who used the pharmacy to collect a prescription 35% reported issues with their medication. Most issues were regarding items being out of stock and prescriptions not being ready on time. People also spoke about items of medication missing from their prescription and waiting times to collect once in the pharmacy.

Healthwatch recommendation 2: *For patients to be updated of the timeframe on when a repeat prescription will be ready upon request.*



NHS GM (HMR) response to recommendation 2: We partly agree with this recommendation. We believe that this needs to be joint messaging from community pharmacy and General Practice. The practice operational procedures for authorising prescriptions will impact on the timeframe for them to be sent to the pharmacy and total turnaround times for collection.

Healthwatch recommendation 3: *For pharmacies to inform patients how long it will take for medication to be in stock & signpost patients to other pharmacies if medication needed that day.*

NHS GM (HMR) response to recommendation 3: We agree with this recommendation whilst recognising that information on stock shortages is constantly changing and anticipated timescales may change.

Healthwatch recommendation 4: *For local pharmacies and GPs to work closely together. Local primary care colleagues to attend and be accountable at PLACE level through the HMR Primary Care Commissioning Committee (PCCC).*

NHS GM (HMR) response to recommendation 4: We partly agree with this recommendation. We do not believe that it is possible to hold community pharmacy or primary care accountable for stock shortages. We do agree that both parties need to work closely together and that there should be a level of oversight and accountability at place level.

Please see below for context and actions under way for recommendations 2, 3 and 4

Primary care including community pharmacy has experienced a significant rise in demand. This rise in demand has partly been driven by ill health and illness as a result of COVID-19, unmet health needs as a consequence of the pandemic and the backlog of elective care procedures.

In addition, community pharmacy teams are increasingly reporting that they are struggling to source certain medicines. This is a national problem and not unique to HMR or Greater Manchester. In some cases availability is an issue; in others medicines are available but only at significantly inflated prices.



It can be difficult for pharmacies to provide specific timescales regarding stock availability as the distribution and supply chain is complex. Sometimes national information on shortages from manufacturers, does not reflect the stock holding with the wholesalers and distributors. Therefore, pharmacy teams are having to spend a lot of time sourcing medicines, sometimes having to contact up to seven or eight wholesalers to find a particular medicine. In GM, pharmacy contractors have estimated an additional 2.5 hours a day being spent locating stock and dealing with issues relating to prescriptions. Similarly, GP practices are having to spend a significant amount of time reviewing patients and adjusting medications where stock cannot be obtained.

Unfortunately, this can lead to delays for patients who need the affected medicines.

To mitigate these issues a task and finish group was convened by the GM ICS to create a set of principles which could support the management of capacity and demand in Community Pharmacy and General Practice.

The document makes recommendations on managing patient expectations, improving communication between primary care and pharmacies, allowing sufficient time to process prescriptions, reducing urgent requests, and encouraging patient led ordering. The final document 'Primary Care demand – Supporting General Practice and Community Pharmacy' can be accessed via [here](#).

The GM Community Pharmacy Provider Board have presented the risks and severity of the pressures to GM ICS leaders. It has been agreed to set up a GM task and finish group to support implementation of the recommendations in the coming months.

HMR will work to implement the recommendations locally and report progress to place based HMR PCCC.

Place based HMR PCCC has a nominated community pharmacy rep and deputy as members of the committee. Work underway across GM ICB central team and place based PCCC committees to determine the best way that primary care colleagues who lead on contract management and support functions for pharmacy can support the place-based committees.



It is acknowledged that the existing community pressures are a significant problem and there is ongoing engagement with Parliamentarians and Ministers to raise the critical issues with community pharmacy pressures, which the GMLPC are linked to and supportive of. There has also been house of commons hearing regarding stock and supply issues W/C 10th July.

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