

How is your Pharmacy working for you?

August 2026



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Front cover: [Pharmacist Photos | Free download](#)

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About us

Healthwatch Somerset is your local health and social care champion. We make sure NHS leaders and other decision makers hear your voice and use your feedback to improve health and social care.

We are and impartial. We also offer information and advice to help you get the support you need. As an independent Statutory Body, we have the power to make sure that NHS leaders and other decision independent makers listen to your feedback and use it to improve standards of care. This report is an example of how your views are shared.



Healthwatch Somerset is part of a network of over 150 local Healthwatch across the country. We cover the unitary local authority area of Somerset Council.

Background

We undertook a project to find out what people know and think about Pharmacy First. Pharmacy First lets you get advice and treatment for seven common health problems from your local pharmacy. This means you may not need to see a GP first.

We spoke to people in our communities; many told us it is getting harder to get their medicines. Some said their local pharmacy has closed. Others said they have to wait a long time. This matches what Healthwatch England found in its 2024 report: [Pharmacy: what people want | Healthwatch](#).

From March 2025 to October 2025, we asked people across Somerset about pharmacy services. We did this by speaking to people in person and by using a survey.



Think pharmacy first

Sore throat? Your pharmacist can now provide treatment or some prescription medicine, if needed, for seven common conditions, without you seeing a GP.

Subject to age eligibility, including 5 years and over for sore throat prescription medicine. Service available at majority of pharmacies.

What we did

As part of this project, we launched a public survey to gather views from people across Somerset.

- We received 218 online responses to our pharmacy survey.
- We spoke to 182 during visits to carers groups, libraries, health fairs, family days, talking cafes, and pharmacies.

We have listened to individuals about:

- How they currently use pharmacy services
- The challenges faced with prescription waiting times
- If they have heard of Pharmacy First
- How comfortable they feel accessing support from pharmacists for various health concerns

The Pharmacy survey questions are listed in Appendix 1.

This work has helped us to identify barriers, concerns, and misunderstandings around the service, especially among those who may not usually engage with pharmacies beyond prescriptions.

Key Findings

The findings show that 43.75% of people had a very good experience getting help from their pharmacist for the seven Pharmacy First conditions

. However, challenges remain around:

- 65.57 % were unaware of the term Pharmacy First, although most knew they could seek advice and treatment for the seven minor conditions at their pharmacy.
- 95.03% used a community pharmacy, and a further 65.09% used a pharmacy attached to a GP surgery, or inside a hospital.
- Privacy at point of consultation; 76.1% reported that they have consulted a pharmacist for advice about a medical issue; however, 45.24% said they felt uncomfortable speaking in front of others.

Addressing these areas could significantly improve patient experience and confidence in pharmacy services.

Voices from our communities

We received 221 responses from 19 postcode districts across Somerset. Appendix 2.

People who took part in the survey are aged between 18 – 80+.

Of the 221 respondents, 218 provided their age group and 3 did not answer the question.

Age Groups	Number of people	Percentage
18 – 24	2	0.92%
25-49	55	25.23%
50-64	54	24.77%
65-79	73	33.49%
80+	34	15.60%

Gender	Percentage		Ethnicity	Percentages
Women	78.60%		White British/Northern Irish/Scottish/Wales	91.79%
Men	20.47%		Any other white	2.42%
Other	0.94%			

Further breakdown in Appendix 2.

Pharmacies: Helping you get the care you need

NHS England (NHSE) and the Department of Health and Social Care (DHSC) announced plans in May 2023 to improve access to primary care by enabling patients to receive prescriptions directly from their community pharmacist, without the need for a GP appointment. This aims to free up GP time for patients with more complex conditions that cannot be addressed by a pharmacist.¹

The difference between primary care and secondary care

For further information please follow the link: [The healthcare ecosystem - NHS England Digital](#)

Primary Care	Secondary Care
General Practice (GP)	Planned/elective care
Dental care	Urgent/emergency care
Eye care	Mental health care
Community pharmacy	

Community pharmacies will provide a more convenient and accessible way to receive healthcare, with many offering private consultation rooms, to ensure patients can discuss medical concerns in confidence.

Pharmacists undertake five years of training in the safe use of medicines and the management of minor illnesses, making them well-equipped to provide health and wellbeing advice to support people to stay well.



Pharmacists are also trained to identify red flag symptoms – warning signs of potential serious conditions and can refer patients promptly to other healthcare providers where appropriate.

Link provides further information on trainee placements in the Southwest. [NHS England – South West » South West Foundation Trainee Pharmacist Placements](#)

¹ <https://www.england.nhs.uk/primary-care/pharmacy/>

Pharmacy services

Awareness of Pharmacy First

Responses reflected a mix of positive experiences, areas of confusion, and ongoing challenges, particularly around access, privacy, and awareness of available services.

Engagement identified:

- Limited public awareness about the range of services provided by community pharmacies.
- Many respondents were unaware of age-related eligibility criteria for conditions treated under pharmacy-led services.

This lack of clarity led to frustration for some individuals who attended pharmacies expecting support that could not be provided due to eligibility restrictions. These experiences, in some cases, negatively affected trust in the wider healthcare system.

Awareness of the Pharmacy First service remains low:

- 65.37% said they had never heard of Pharmacy First.
- 34.91% said they were aware of the service and knew they could receive advice from a pharmacist.

Those who are aware of Pharmacy First spoke positively.



A good idea I hope more people will use it



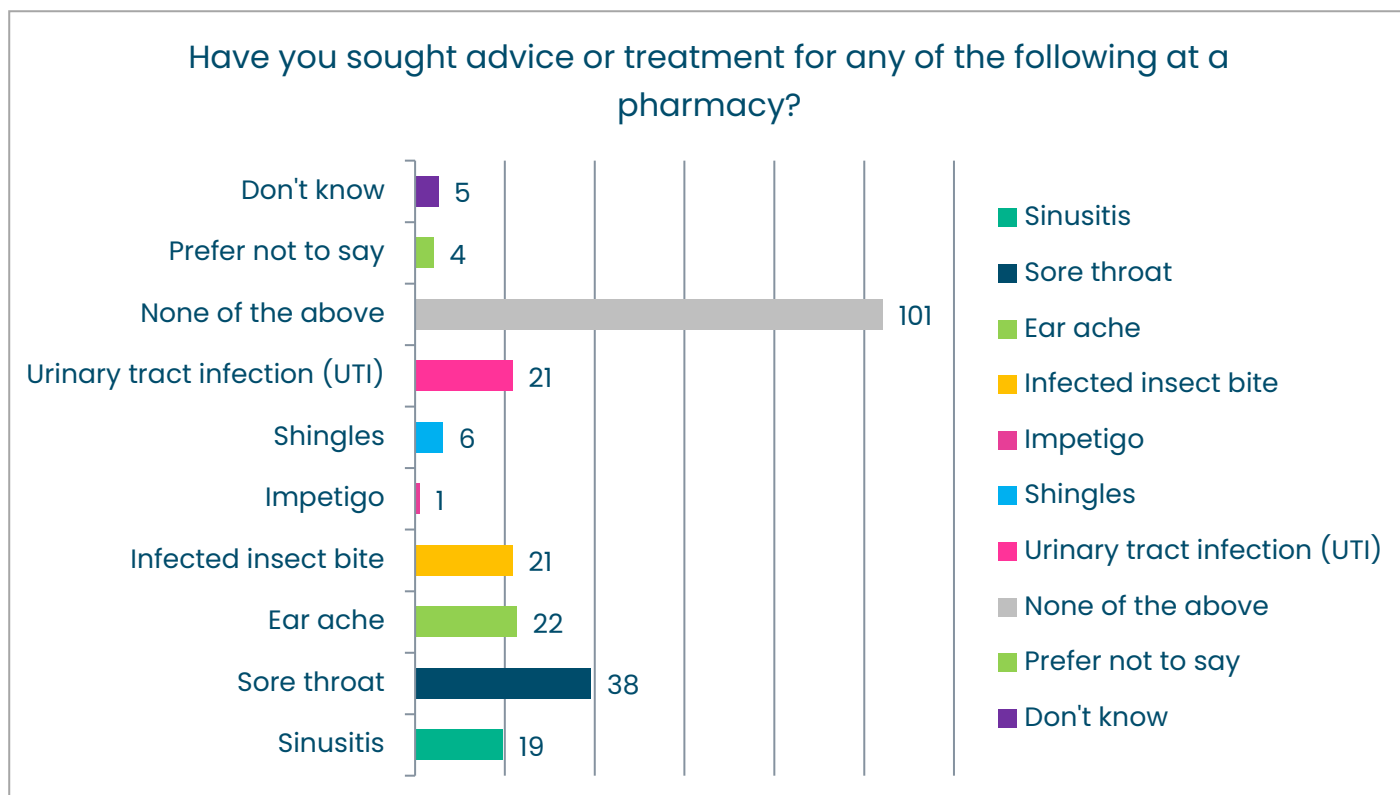
The first line of information about looking after yourself



It provides medical advice for minor conditions and ailments, with a referral to a GP if the pharmacist couldn't help

Some people had more than one health problem and asked for help for each one.

Pharmacy First offers advice to patients. It is designed to improve access to timely care for common conditions, reduce pressure on GP services, and make better use of pharmacists' clinical skills. Through Pharmacy First, patients can be assessed, treated, or referred, helping them receive care closer to home in a more convenient way.



Awareness of age limits in Pharmacy First treatments

We heard that some people were unaware of the age limits that determine which conditions through Pharmacy First can treat.



I went to the pharmacist for management of my UTI, but the pharmacist was unable to help because of my age. I felt very frustrated and I don't really have trust in the system

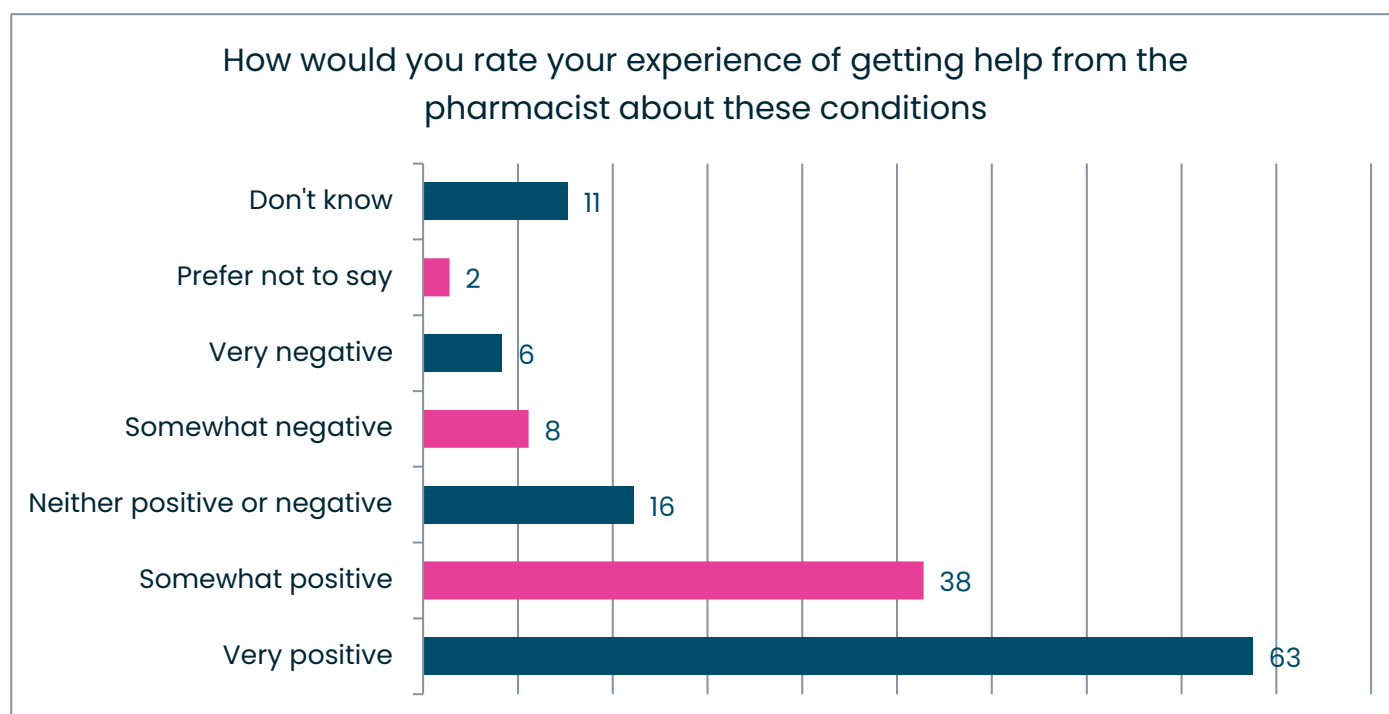
Respondents seeking advice from a pharmacist with 10.8 % for UTIs. This figure may indicate barriers that some people have difficulty accessing a GP, leading people to rely on pharmacies. Poorly managed UTIs may reflect repeat infections, suggesting gaps in prevention advice and follow-up care. Clear advice on hydration, hygiene, symptom recognition, and when to seek, further care may help prevent recurrence. Which could be displayed at GP surgeries.

Another respondent reported a similar experience, stating they were told that pharmacists could only treat children for ear infections.

These experiences highlight a lack of public awareness around eligibility criteria for Pharmacy First and other pharmacy-led services, which can lead to frustration and reduced trust.

Pharmacy First can assist with 7 minor conditions	
Uncomplicated UTI's	Ages 16 - 64
Earache	Ages 1 -17
Impetigo	Ages 1+
Sinusitis	Ages 12+
Infected insect bites	Ages 12+
Shingles	Ages 18+
Sore throat	Ages 5+

Overall, most people had a good experience using Pharmacy First for the seven conditions.



144 people responded to this question.

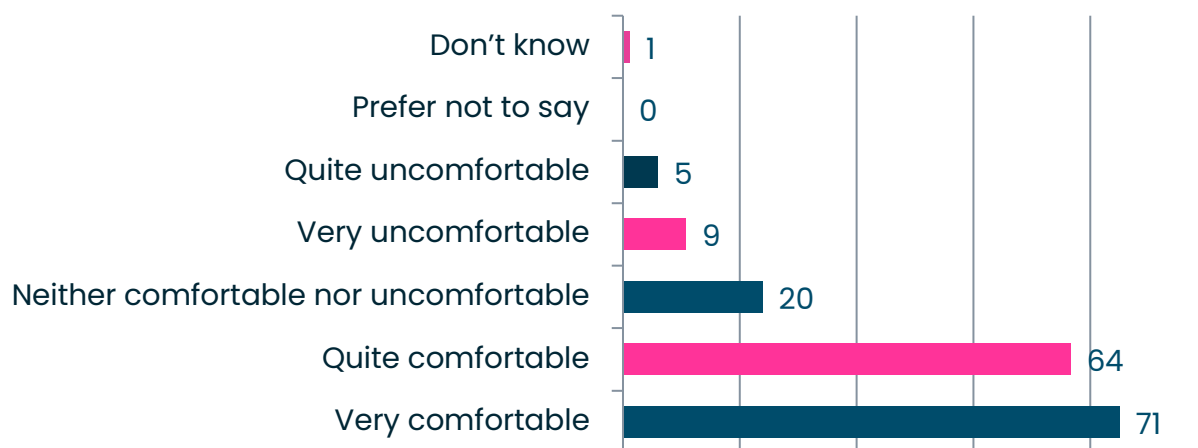
- 4 in 10 people said their experience was very positive.
- 4 in 100 said it was very negative.

This indicates that people are mostly happy with the service.

Experiences of pharmacy care

Feedback highlighted that pharmacies are widely valued for their accessibility and the personal qualities of pharmacy staff. 71 people said they were very comfortable discussing their health concerns with their local pharmacist in person, reinforcing the importance of community-based provision.

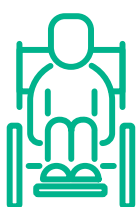
How did you feel discussing health issues with a pharmacist at a pharmacy?



Our survey indicates that community pharmacies are a commonly used source for advice.

Many respondents described pharmacists as caring, approachable, supportive, and kind, and praised the speed and confidentiality of advice received. Carers groups spoke positively about relationships with local pharmacists and the support they provide.

Travel challenges for prescription fulfilment: Carers group speaks out



A carers group in Wincanton praised their local pharmacist, describing them as caring. However, when the pharmacy next to the GP practice cannot fill a prescription, carers said they travel to Shepton Mallet, which is 12 miles away. This is easier for people who have their own transport, but it can be hard for people who rely on public transport.

Since the interview with the group, the opening of Wincanton Pharmacy-Medicine Clinic has been warmly welcomed as a much-needed addition to the town centre, improving access to prescriptions and medication advice, support for minor illnesses and consultation facilities.

The group noted that those who have mobility issues, have difficulty with uneven pavements or where there is no seating at bus stops. Limited step-free access, buses not having ramps. For breakdown see Appendix 5.



Getting to the pharmacy can be hard. Bus stops are often far away. Some buses are not step-free, and wheelchair space is limited. Missed connections can mean long waits.

Further improvements ensuring dropped curbs, level surfaces, and a bus stop near to pharmacies would support those with mobility issues. Whilst expanding pharmacy delivery services and community outreach for those unable to travel.

Bus services are available, with journey times ranging from approximately 1 hour and 40 minutes to over three hours. The journey would need careful planning, particularly to coordinate return journeys.

The group expressed concern about the [planned development of 600 new houses](#) that have received planning approval and the additional pressure this is likely to place on the local pharmacy.



The pharmacy operates the same hours as the GP practice, with no later or emergency opening, out-of-hours medication, requiring travelling to another town. Local supermarkets do not have in-store pharmacies, which further restricts options.

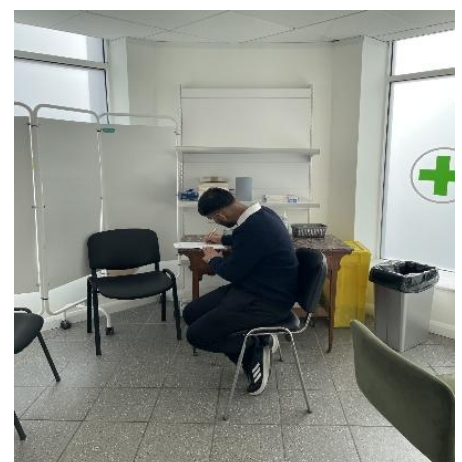
Privacy challenges

Privacy emerged as an important issue for respondents:

- With 19 people stating they do not like speaking in front of other people in the pharmacy, finding it embarrassing or uncomfortable.
- Respondents noted that this would not usually happen when speaking directly to a GP, although it was also acknowledged that the GP reception area can present similar privacy challenges when patients are asked to explain why they need an appointment.
- A further eight people responded that they did not feel confident receiving advice from someone who is not a doctor.

Issues relating to privacy were also highlighted. Over a third of respondents (35.71%) reported that there was no private space available to speak with a pharmacist. While respondents acknowledged that similar issues could arise in GP reception areas, privacy remains an important consideration for pharmacy-based consultations.

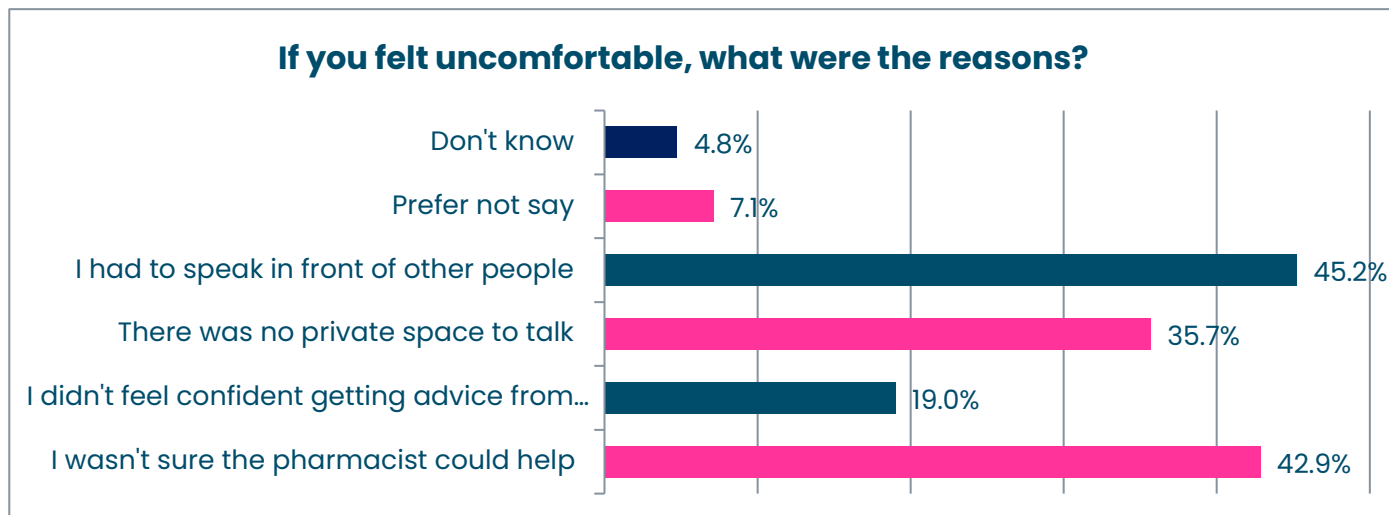
When conversations take place in front of others, patients may withhold important details, ask fewer questions, or avoid seeking advice altogether, which can affect the safety and quality of care they receive.



Alcombe Pharmacy consultation room with manager

Having a confidential space in a pharmacy is essential so patients can speak openly and honestly about their health without fear of being overheard or judged.

Privacy helps build trust between patients and pharmacists, supports dignity and respect, and ensures that sensitive health concerns can be discussed sensitively and accurately, with appropriate emphasis on confidentiality.



Prescription management

Out of 210 people, 178 people said they felt confident managing their repeat prescriptions. This includes tasks like re-ordering, cancelling and collecting their medicines.

- Medication errors: Individuals who lack confidence may be more likely to misunderstand dosage instructions, timing, or potential side effects.
- Uncertainty: Leading to missed doses, incorrect use, or stopping medication prematurely.
- Reduced engagement: People who are not confident may avoid asking questions.
- Increased reliance on carers or services: Those lacking confidence may need additional support from carers, pharmacists, or GP services.
- Health inequalities: Lower confidence is often associated with factors such as age, disability, language barriers, or low health literacy, potentially widening disparities in outcomes.

Even with a high confidence level, the minority who are not confident represent an important group that may benefit from targeted support, clear communication, and emergency care.

Prescription waiting times frustrations

We asked if respondents were able to get their prescription/medicines, after being told what their illness or condition was:

- 74.41% reported that they could.
- 17.6% said they were only able to do so partially.

However, some frustration was expressed about waiting times for newly diagnosed medical conditions and repeat prescriptions:

- Some respondents reported waiting over a week for prescriptions to be ready.
- Whilst 53.76% said they typically waited between 3–7 days, which they felt was acceptable.

When prescriptions were not available on the same day:

- 66.41% returned to the same pharmacy later in the day.
- 25.78% went to a different pharmacy.
- 8.59% reported having to visit multiple pharmacies.

Out of 128 people who answered, 33 said they had to go to more than one pharmacy to get their prescription/medicines. Often requiring repeat visits or travel.

Disposal of unused medication

When asked how unused medication is disposed of:

- 71.43% said they returned it to a pharmacy
- 18.82% said they kept unused medication at home 'just in case', which presents patient safety risk, particularly if expiry dates are not checked.
- 6.91% said they disposed of unused medication in household waste.



It is important to note that once medication has left the pharmacy, it cannot be reused and must be destroyed.

This led to concerns about waste, with one respondent expressing frustration about the volume of medicines discarded, and another questioning whether unused medications could be donated, for example, to support humanitarian efforts in Ukraine. Medicines cannot be redistributed

There is generally a good awareness of safe disposal practices, as most respondents return unused medication to pharmacies.

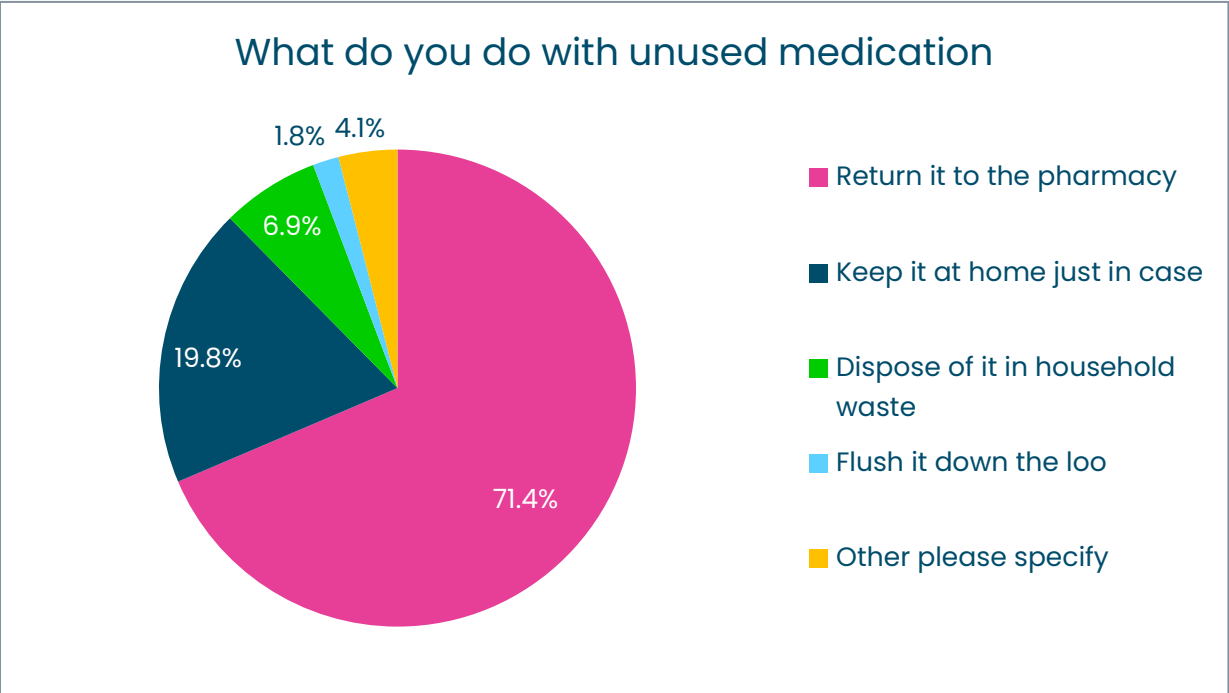
However, a proportion of individuals retaining medication for future use raises potential safety concerns, including inappropriate self-medication, use of expired medications.

Disposal of medicines in household waste, although reported by a small group, presents environmental and public health risks. The comments regarding waste donation highlight a lack of public understanding about regulatory and safety constraints around medication reuse, indicating a need for clearer public information on disposal processes and the reasons medicines cannot be redistributed.

A few people commented that there is a lack of information at their pharmacy about safe of unused medication.

Why can't we send all unused medication to the Ukraine?

I hate wastage involved with unused meds



Patient safety and pharmacy practice in Minehead

We received feedback from residents in Minehead concerning local pharmacy services. Three residents reported issues with one pharmacy's opening and closing time's describing, them as inconsistent and not always aligned with the information published on the pharmacy's website. They also highlighted problems with medication availability, noting that prescriptions were not always in stock and that there were delays in obtaining medications.

Additionally, feedback (May 2025) was received from parents of children with Special Educational Needs and Disabilities (SEND). They reported significant difficulties in obtaining ADHD medication, with lengthy waiting periods that were causing stress and anxiety for families. One family member we spoke with reported the following.



When I went to collect my son's ADHD medication, from (Alcombe Pharmacy, Minehead) I had been waiting for over a week, I was informed that the pharmacy could not fill the prescription because they were still waiting for delivery of ADHD medication.

In contrast, other residents provided positive feedback regarding Dunster and Porlock pharmacies, reporting that these services were efficient, reliable in medication delivery and consistent with their advertised opening and closing times.

Cancelling prescriptions

- 59.24% of respondents said they had not had their repeat prescriptions cancelled by their GP's, clearly indicating an ongoing need for their medication.
- 30.33% reported that they had their prescriptions cancelled through their GP.

Online pharmacies

- 72% said they had not used online pharmacies, preferring to visit their local pharmacy in person

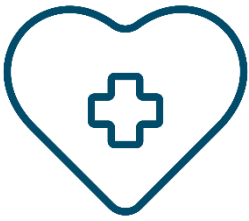
Putting the spotlight on community pharmacies in Somerset

We gathered feedback from a wide range of communities from people across the county through surveys, community engagement and conversations to understand experiences of community pharmacy services.

Restoring community pharmacy in Glastonbury

A BBC report confirmed that two previous pharmacies, Tesco and Boots, closed in 2023. [New Glastonbury pharmacy to open after campaign - BBC News](#)

The loss of these services highlighted a clear need for a local pharmacy to support the community.

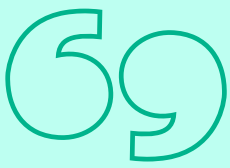


We spoke with a community pharmacy manager in Glastonbury, which has been operating since August 2024.

The pharmacy operated by Magna Health Promotions, posts up-to-date content on their website. And is open seven days a week – opening hours from 9:00a.m. – 7:00p.m Mon- Fri with shorter opening times at the weekend. [Glastonbury Pharmacy | Magna Health Pharmacy Group](#)



We have received positive feedback from residents, who report feeling confident approaching pharmacy staff.



I consistently receive my prescriptions promptly and I appreciate the text message notifications to tell me when my medication is ready to collect. If I submit my prescription on a Friday, it is usually ready by Monday or Tuesday, I feel well cared for by the pharmacy team.

The pharmacy manager explained that the pharmacy aims to expand its services to introduce a needle exchange service. They are seeking approval from key decision makers including the Integrated Care Board (ICB) and commissioners.

This service would provide confidential support to individuals aged 18 and over.

The pharmacy manager (pictured) described a problem-solving approach to patient care, with staff seeking to address concerns wherever possible and making timely referrals to local GP practices when medical input is needed. The importance of treating patients with respect and maintaining a friendly, approachable environment was also emphasised.

In relation to staffing, the Glastonbury pharmacy is supported by a wider network of local branches, enabling additional staff to be deployed during busier periods. The organisation operates 14 branches across North Somerset, Somerset and parts of Bristol.





The pharmacy clearly advertises the seven conditions for which it can provide advice and treatment. The premises were observed to be well stocked, clean, and well organised, with a spacious consultation room available to support private and confidential discussions.

What we heard at Creech St Michael Pharmacy

During a recent visit to Creech Pharmacy, discussions with staff highlighted several operational developments and ongoing challenges. The pharmacy has recently implemented a new digital system designed to reduce workload and improve efficiency by sending text message notifications to patients when their prescriptions are ready for collection.

Because more people need more medicine now, the pharmacy has hired extra staff. The number of prescriptions they fill has gone up to approximately 8,000 to 10,000 items. New housing developments in Creech St Michael, outlined in the [Neighbourhood Development Plan \(2018 – 2038\)](#), shows clear population growth.

Despite these improvements, one of the most significant challenges reported by staff is difficulty obtaining stock. Ongoing shortages from suppliers have made it increasingly problematic to maintain consistent availability of medicines.

Shortages in stock can be attributed to:

- Supply chain shortages from pharmaceutical suppliers
- Increased demand due to higher prescription volumes
- Limited availability of certain medicines at wholesaler level
- Delays in restocking caused by distribution and manufacturing issues

Efficient care and patient relationships at Alcombe pharmacy

We met with Pharmacy Manager Raj Patel (pictured), to discuss service provision and operational processes. The pharmacy operates a text notification system to inform patients when their prescriptions are ready for collection. The manager advised that at least 50% of prescriptions are ready for collection within one day, although larger prescriptions (for example, those containing 10 or more items) may take longer to dispense.



The pharmacy works with 16 suppliers and reported no significant issues obtaining medications.

The Manager emphasised the importance of maintaining strong relationships between pharmacy staff and patients, noting that this is central to delivering effective and responsive care. The premises are spacious, light and well-organised, with fully stocked shelves and three consultation rooms. Staff were approachable, professional, and welcoming.

Alcombe pharmacy is fully engaged in delivering Pharmacy First services.

Community welcomes new pharmacy in Wellington

We visited the newly opened NHS Somerset/Allied Pharmacy in Wellington, which has been highly anticipated by residents.

Prior to this opening, Wellington was served by only two pharmacies, Boots and Superdrug; despite a growing local population. Feedback previously gathered from residents indicated long waiting times for prescriptions and increasing frustration with limited pharmacy capacity in the town.



During the visit, we spoke with the pharmacist and pharmacy staff about how the new service plans to support residents and improve access to pharmacy services.

The pharmacist explained that rebuilding trust with the local community is a key priority. Since opening, staff have been actively engaging with residents and local businesses on the high street, as well as distributing leaflets to raise awareness of the new pharmacy and the services it offers.

Currently, the pharmacy employs two pharmacists and two dispensers. Staffing levels will be reviewed in line with workload, with the possibility of recruiting additional staff if demand increases.

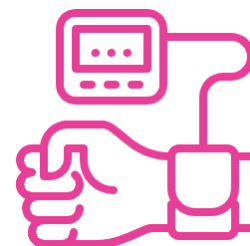
Improving access to pharmacy services

When asked how the pharmacy intends to ensure that patients who have struggled to access pharmacy services over the past year can use the new pharmacy effectively, the pharmacist explained that they have engaged with the local MP to share information about the pharmacy and its services. They have also communicated with other pharmacies in the town to help support coordinated provision.

The pharmacy's operational aim is to dispense prescriptions within 24 hours of them being received, helping to reduce waiting times experienced by residents previously.

The pharmacy confirmed that it will support patients with long-term conditions by offering services such as:

- Blood pressure checks, including screening for hypertension
- Pharmacy First services, allowing patients to access treatment and advice for common conditions without needing to see a GP first



The pharmacy also plans to promote available services through social media to ensure residents are aware of the support available.

Future serviced development

The pharmacy shared several areas for potential future development:

- Care home services: The pharmacy is not currently providing medication services to care homes but is considering this for the future. If introduced, a dedicated staff member would likely be assigned to manage this area.
- Medication supply: To maintain reliable access to medicines, the pharmacy is not restricted to a single supplier and can source stock from other Allied pharmacies or alternative suppliers if needed.
- Prescription delivery: The pharmacy would like to introduce a delivery service in the future, although this will require further investigation due to funding and cost considerations.

Supporting primary care and reducing GP pressure



The pharmacy highlighted that it intends to help reduce pressure on local GP practices by providing accessible services within the pharmacy setting. This includes offering contraception services, including emergency contraception (morning-after pills), as well as other services available through the Pharmacy First programme.

Think pharmacy first

Service available at majority of pharmacies.

Porlock Pharmacy offers a vital local service

We received consistent positive feedback during our outreach events last year regarding Porlock Pharmacy.

Porlock is a small village with a close-knit community, and the pharmacy plays an important role within it.

During our recent visit (Feb 26), we observed the friendliness of the staff and approachability, staff were highly engaging and happy to talk to us.



Manager Mr Ahmad Visram (pictured) explained that there is a strong emphasis on building trust and supportive relationships with patients and customers.

The pharmacy maintains excellent working relationships with the local GP practice, supporting effective communication and continuity of care for patients. The manager went on to share that an increase in funding would significantly support continued development of the service.

Additional financial investment would enable the pharmacy to expand capacity, enhance service provision, and better meet the growing needs of the local community.

The pharmacy operates an efficient text notification system to inform patients when prescriptions are ready for collection, typically within three days. For acute prescriptions, such as antibiotics, same-day dispensing is usually provided.

In addition to dispensing services, the pharmacy offers blood pressure checks and actively participates in the Pharmacy First scheme. Supporting management of eligible conditions.

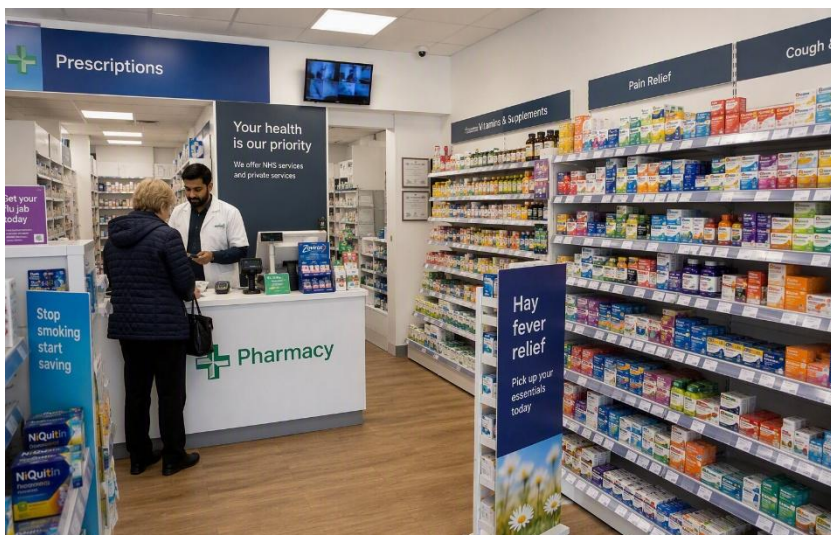


Image of the inside of a pharmacy, generated using artificial intelligence.

The premises are well stocked, clean and well organised, and include a private consultation room to ensure confidentiality and comfort for patients, while maintaining the pharmacy's commitment to high-quality community-focused care.

Recommendations

❖ **Improve public awareness of pharmacy services**

- Increase clear, simple communication about Pharmacy First, including what conditions can be treated and age eligibility.

❖ **Be clear about age limits and eligibility**

- Clearly display information where appropriate in pharmacies explaining who can be treated for which conditions.
- Ensure consistent messaging so people do not feel confused or dismissed when seeking help.

❖ **Strengthen privacy at pharmacies**

- Promote the use of private consultation rooms wherever possible.
- Make people aware that they can ask for a private conversation.
- Explore small environment changes (signage, staff prompts) to reduce embarrassment and discomfort.

❖ **Address prescription waiting times**

- Improve communication with patients when prescriptions are delayed.
- Provide clearer expectations around waiting times to reduce frustrations.
- Support pharmacies under pressure through system-level solutions.

❖ **Improve information on medication disposal**

- Provide clearer guidance in pharmacies about how to safely dispose of unused medicines.
- Address concerns that medication cannot be reused.

❖ **Build confidence and trust**

- Continue to highlight the professional training and expertise of pharmacies.
- Support public understanding of when pharmacists are the right first point of contact and when referral to a GP is needed.
- By improving communication, privacy and awareness of services, there is a clear opportunity to strengthen public confidence and ensure people can make the best use of pharmacy care.

❖ **Recruitment pathways**

- Strengthen recruitment pathways – develop targeted recruitment campaigns, including apprenticeships, return-to-work practice routes, and partnerships with colleges and universities to build a sustainable workforce.

❖ **Career progression**

- Career development and progression provide clear opportunities for training, upskilling, and career advancement.
- Promote recognition initiatives and improve communication to ensure staff feel valued for their role in delivering frontline healthcare.

❖ **Wellbeing initiatives**

- Improve wellbeing, invest in mental health support, and manage workloads to reduce burnout.

Next steps

We will undertake follow-up visits to the pharmacies previously engaged to review any updates to services and continue strengthening collaborative relationships.

We will maintain ongoing public engagement over the next 12 months to gather further insight into people's experiences and perceptions of local pharmacy services. This will ensure that emerging themes and feedback continue to inform future reporting and service development.

Thank you

We would like to extend our thanks to everyone who took the time to share their valuable experiences throughout this project, as well as to the organisations that supported our work.

We are particularly grateful to the pharmacists who engaged with us and provided insightful contributions regarding their services, which have been instrumental in informing this report.

Stakeholder responses

Healthwatch Somerset Advisory Board



We welcome the publication of the Pharmacy report and would like to recognise the considerable effort that has gone into gathering and presenting the experiences of people across Somerset. The report reflects extensive engagement with local communities through surveys, outreach visits and conversations with residents, carers and pharmacy teams, ensuring that a wide range of voices have been heard.

It is particularly encouraging to see the positive feedback about the professionalism, kindness and accessibility of pharmacy staff across Somerset. The report highlights that many residents value the support they receive from their local pharmacist and feel comfortable seeking advice and treatment closer to home.

We also applaud the work undertaken to visit pharmacies, speak directly with staff and showcase examples of innovation, community engagement and service development across the county. The examples from Glastonbury, Creech St Michael, Alcombe, Wellington and Porlock demonstrate the commitment of pharmacy teams to improving patient care, adapting to local needs and supporting wider primary care services.

The report provides a balanced and constructive assessment of the challenges facing pharmacy services, including awareness of Pharmacy First, medicine supply issues, privacy concerns and prescription waiting times.

Statement from Mayor of Wellington, Janet Lloyd



Having been made aware of the issues of shortages of pharmacies in Wellington from complaints by residents direct to Healthwatch Somerset, the local press and lobbying by the local MP, Healthwatch Somerset followed up the issues raised regarding delays in obtaining prescriptions and the long queues at the two remaining facilities.

Healthwatch Somerset staff visited the town and the two existing pharmacies but also by this time, a third pharmacy had opened and were visited and interviewed by Healthwatch staff to establish the service being offered which included quick response times for customers.

We were and are very grateful for Healthwatch Somerset's prompt response to the issues that residents had regarding obtaining their prescriptions in a timely manner.

Appendices

Appendix 1: Pharmacy survey questions

1. When did you last use a community pharmacy? (e.g. on a high street or supermarket)?
2. When did you last use a pharmacy located inside or attached to a health service (e.g. at a GP surgery or in a hospital)?
3. In the last year, what were the reasons you visited a pharmacy?
4. Have you ever asked a pharmacist for advice about a medical issue or health concern?
5. How did you feel discussing health issues with a pharmacist at a pharmacy?
6. If you felt uncomfortable, what were the reasons?
7. Have you ever cancelled a prescription because you no longer needed the medication?
8. Are you aware that you can cancel your prescription through your pharmacist?
9. What do you do with unused medication?
10. Would you be interested in more information about how to cancel your prescription and/or safely dispose of medications?
11. Do you feel confident managing your repeat prescriptions (ordering, cancelling, collecting)?
12. Have you ever collected a prescription you later realised you do not need?
13. Were you able to get your prescription the last time you visited a pharmacy?
14. If you couldn't get all your prescription, what did you do next?
15. How long did it take before you got your prescription?
16. Have you heard of NHS Pharmacy First?
17. How would you describe what Pharmacy First offers?
18. The Pharmacy First service now allows trained pharmacists to treat a range of common conditions. Have you sought advice or treatment for any of the following at a pharmacy? (Select all that apply)
19. Why did you choose to use an online pharmacy?
20. How would you rate your experience of getting help from the pharmacist about these conditions (Please skip if this doesn't apply)
21. Have you ever used an online pharmacy?
22. Do you give your consent to have your comments published?

Appendix 2: Demographics

Town	Postcode	Town	Postcode	Town	Postcode
Taunton area	TA1-TA2-TA3-TA4	Crewkerne	TA18	Minehead	TA24
Bridgwater area	TA5-TA6-TA7	Ilminster	TA19	Frome	BA11
Burnham on Sea	TA8	Chard	TA20	Yeovil	BA21
Martock	TA13	Wellington	TA21	Stogursey	BA24
Montacute	TA15	Dulverton	TA22	-	—

202 people gave part of their postcodes, 19 skipped answering. Overall responses 221.

Ethnicity	Percentage		Ethnicity	Percentage
Bangladeshi	0.48%		Asian and white	0.97%
Any other Asian/British background	0.48%		Black Caribbean and white	0.48%
African	1.45%		White British/Northern Irish/Scottish/Welsh	91.79%
Caribbean	0.48%		Irish	0.48%
Any other black/black British	0.48%		Any other white	2.42%
			Prefer not to say	2.42%

Reference 207 answered, 14 skipped.

Gender identified with:	Percentages		Ages (mixed)	Percentages
Woman	78.60%		25-49	25.33%
Men	20.47%		50-64	24.77%
Intersex	0.47%		65-79	33.49%
Prefer not to say	0.47%		80+	15.60%

Do you have a disability	Percentage		Do you have a disability	Percentage
No	65.05%		Yes, long term condition	12.14%
Yes, physical-mobility impairment	19.42%		Prefer not to say	2.91%
Yes, sensory impairment	1.46%		Yes, other	1.46%
Yes, learning disability or difficulties	2.43%			
Yes, mental health condition	7.28%			

Religion	Percentage		Religion	Percentage
No religion	35.15%		Sikh	0.50%
Buddhist	0.50%		Prefer not to say	3.47%
Christian	59.90%			
Jewish	0.50%			

Appendix 3: Local research to national reports highlight further challenges

Medication shortages

A report by the Lords Committee also highlights the shortages of medicines and the risks involved for patients.

[Lords Committee looks at Medicines security: Prediction and prevention of medicine supply - Committees - UK Parliament](#)

In October 2025, The Pharmaceutical Journal published a report addressing these financial disparities, noting that pharmacies may receive higher payments per consultation compared to GPs. The report further stated that leaders of the British Medical Association have questioned whether Pharmacy First scheme undermines the role of doctors. Concerns were raised that GPs are being encouraged to direct patients to emergency departments (ED) rather than pharmacies.

Critics of the scheme argue that it may weaken both the medical profession and NHS England by encouraging patients to be treated by less highly trained professionals, potentially lowering expectations in care. In contrast, Henry Gregg, Chief Executive of the National Pharmacy Association, has publicly defended the Pharmacy First scheme, describing it as successful and well-received by patients. He emphasised that the scheme plays an important role in improving access to local healthcare services and supporting community-based care.

[Pharmacy organisations 'shocked' by call to 'sabotage' Pharmacy First, as BMA leaders says it 'undermines doctors' – The Pharmaceutical Journal](#)

Public trust in pharmacists

The All-Party Pharmacy group (APPG) produced a report in 2023.

[APPG+on+Pharmacy_Future+of+Community+Pharmacy+Report_November+2025.pdf](#)

'The Future of Pharmacy' found that nearly 60% of people aged 16 – 24 and 80% of people 65 and above visited a pharmacy within three months prior to the report's publication. These high levels of use demonstrate that the public trust and prefer pharmacy – based care. A Healthwatch poll of over 7,000 adults shows that people are comfortable using pharmacies for consultations instead of seeing a GP, for conditions covered by Pharmacy First.

[Patients praise pharmacy services, but medicine shortages persist](#)

Pharmacy staff morale

A report by Community Pharmacy England published in 2025, [Pharmacy-Pressures-Survey-2025_Staffing-and-morale-report-Final.pdf](#) reported on workforce staffing and morale, based on feedback from more than 4,300 pharmacy owners. The findings point to significant pressure within the community pharmacy sector, particularly around staffing capacity. A substantial proportion of staff reported negative impacts on their mental health and wellbeing, while over half of pharmacy owners indicated ongoing difficulties in recruiting permanent staff.

The report also identified operational impacts including longer waiting times for patients and a reduced ability for pharmacies to provide services and professional advice, raising concerns about service quality and sustainability.

Difficulties recruiting and retaining permanent staff place ongoing strain on pharmacy teams. Reduced staffing levels lead to delays, negatively affecting the patient experience and access to timely care. Persistent staffing issues threaten the long-term viability of community pharmacy services. An increased workload and time pressures may heighten the risk of errors.

How community pharmacies are funded

Pharmacy funding is complicated but mainly comes from two sources: fees are paid for the services pharmacies provide, and a regulated margin (difference between cost and selling price) they are allowed to obtain by purchasing medicines at competitive prices.

- 90% of community pharmacies incomes comes from the NHS, funding must cover staffing, premises and day-to-day expenses.

At the end of March 2025, new funding was agreed between Department of Health and Social Care (DHSC). Further details are available via link: [Funding - Community Pharmacy England](#)

Website links in this report

Page 2	https://www.healthwatch.co.uk/report/2024-04-30/pharmacy-what-people-want
Page 5	https://digital.nhs.uk/developer/guides-and-documentation/introduction-to-healthcare-technology/the-healthcare-ecosystem
Page 5	https://www.england.nhs.uk/south/info-professional/pharm-info/pharmacy-recruitment/sw-foundation-trainee-pharmacist-placements/
Page 6	https://www.england.nhs.uk/primary-care/pharmacy/pharmacy-services/pharmacy-first/
Page 10	https://ssdc.somerset.gov.uk/civica/Resource/Civica/Handler.ashx/Doc/pagestream?cd=inline&pdf=true&docno=13243198
Page 14	https://www.bbc.co.uk/news/articles/cy68d6v6d0zo
Page 15	https://magnapharmacy.co.uk/glastonbury-pharmacy
Page 16	https://www.creechstmichaelparishcouncil.gov.uk/wp-content/uploads/sites/117/2025/09/NDP-FINAL-1.pdf
Page 25	https://committees.parliament.uk/committee/430/public-services-committee/news/208874/lords-committee-looks-at-medicines-security-prediction-and-prevention-of-medicine-supply/
Page 26	https://pharmaceutical-journal.com/article/news/pharmacy-organisations-shocked-by-call-to-sabotage-pharmacy-first-as-bma-leaders-says-it-undermines-doctors
Page 26	https://static1.squarespace.com/static/5d91e828ed9a60047a7bd8f0/t/691dfde2d440c2321f54140f/1763573218316/APPG+on+Pharmacy_Future+of+Community+Pharmacy+Report_November+2025.pdf
Page 26	https://cpe.org.uk/wp-content/uploads/2025/11/Pharmacy-Pressures-Survey-2025_Staffing-and-morale-report-Final.pdf
Page 27	https://cpe.org.uk/learn-more-about-community-pharmacy/funding/

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