



Pharmacy First

February 2025

healthwatch
Southend

Introduction

Healthwatch Southend continues to hear that local people are having problems making appointments in general practice. As part of the national approach to improving access to general practice, community pharmacists are paid for diagnosing and treating 7 conditions. The scheme is known as Pharmacy First and was launched in April 2024.

We wanted to see whether this was making any difference.

We know from other surveys that local people seem to value their community pharmacies (see pages 43-48), which ought to help with people's confidence in seeing a pharmacist rather than a GP.



It's very hard to get a doctors appointment

It very handy to go to your local chemist

I think Im lucky to a have pharmacist who so professional and caring

Pharmacists have a fund of medical knowledge which until now hasn't been available. Pharmacy first is about the only good thing that recent governments have enacted.



Methodology

We developed a survey for local residents to find out:

- Whether and how they had heard about Pharmacy First?
- If they had used the scheme, were they happy with it?
- Which of the 7 conditions they would be prepared to see a pharmacist for and what concerns they would have, if any?

We had both an online survey, and hard copies which we took to local events, with prepaid envelopes for people to return to us. We received 121 surveys back. Not all questions were answered by all respondents, so the number of answers across the slides which follow will not match; some questions might have more than one answer.

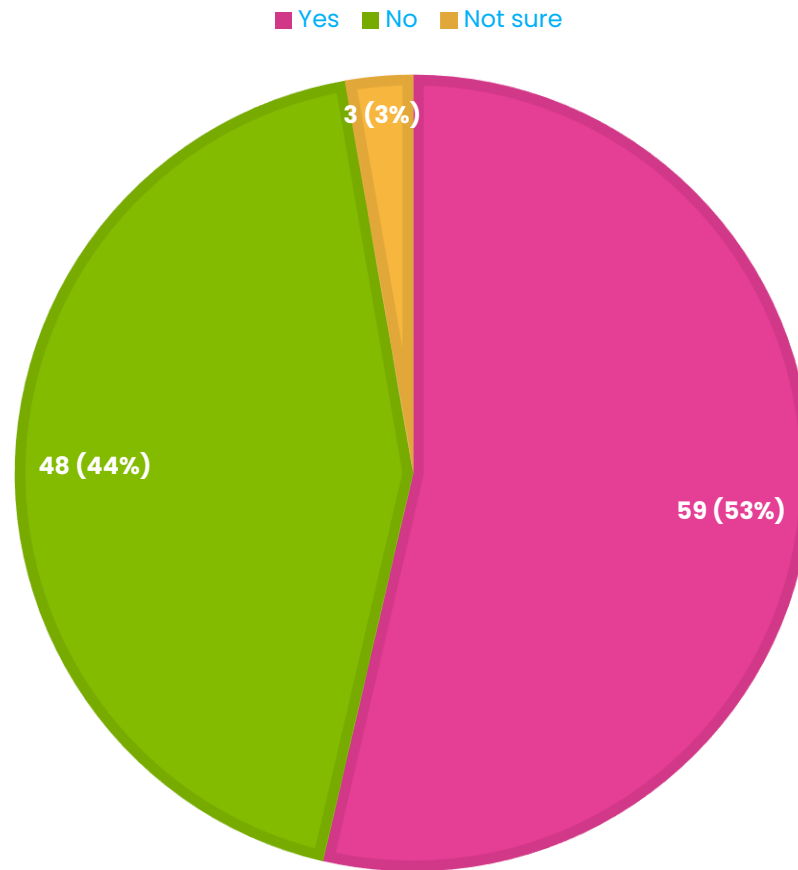
As well as using our website and social media, we used the SAVS newsletter and staff networks in the two local trusts to promote our research.

Findings

- Just over half of the people who responded had heard of Pharmacy First, most of them seeing information in community pharmacies or through word of mouth
- Only about 40% of respondents had used Pharmacy First. Their experiences were positive and would be happy to recommend the service to others
- When asked which of the 7 conditions people would be happy to use Pharmacy First for, shingles and uncomplicated urinary tract infections received less support.
- Overall, some concerns related to a pharmacist missing something more serious or still having to make an appointment with a GP after seeing a pharmacist

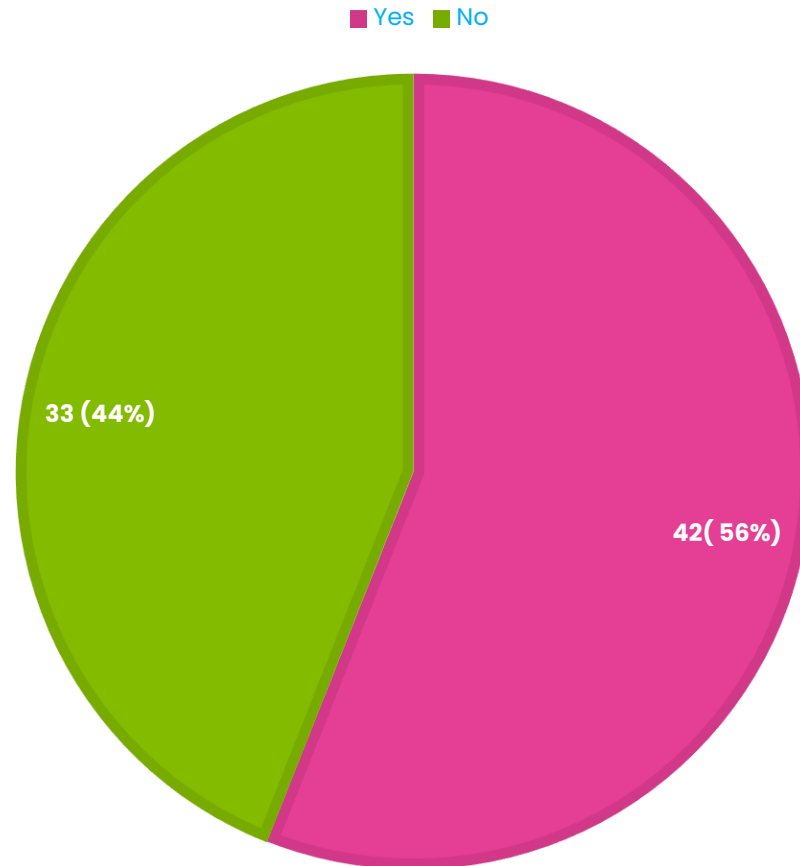
Have you heard of Pharmacy First?

N=110

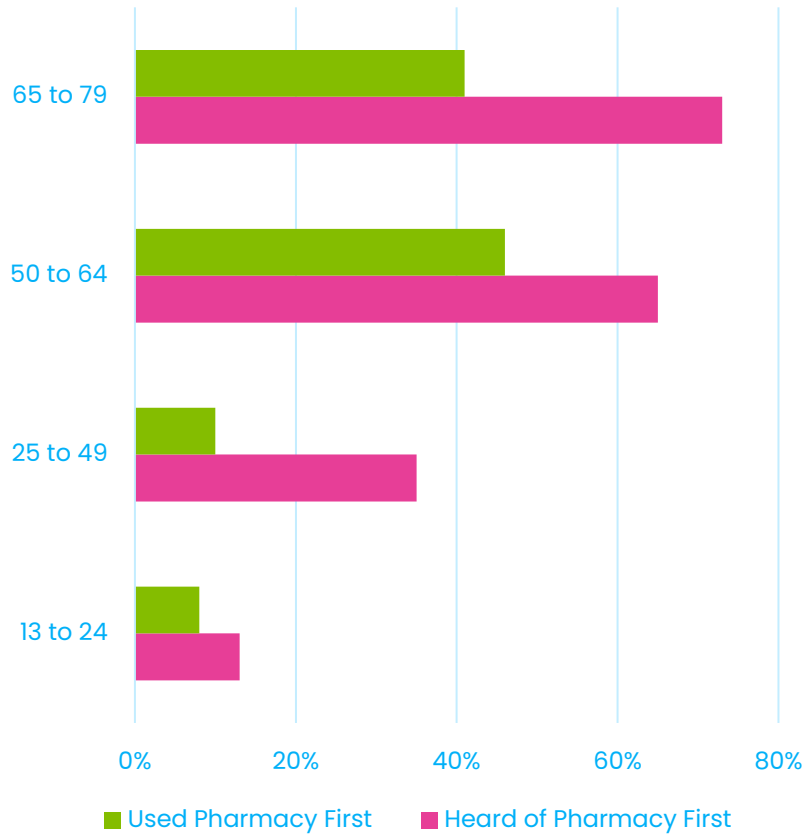


Have you used Pharmacy First?

N=75



Awareness

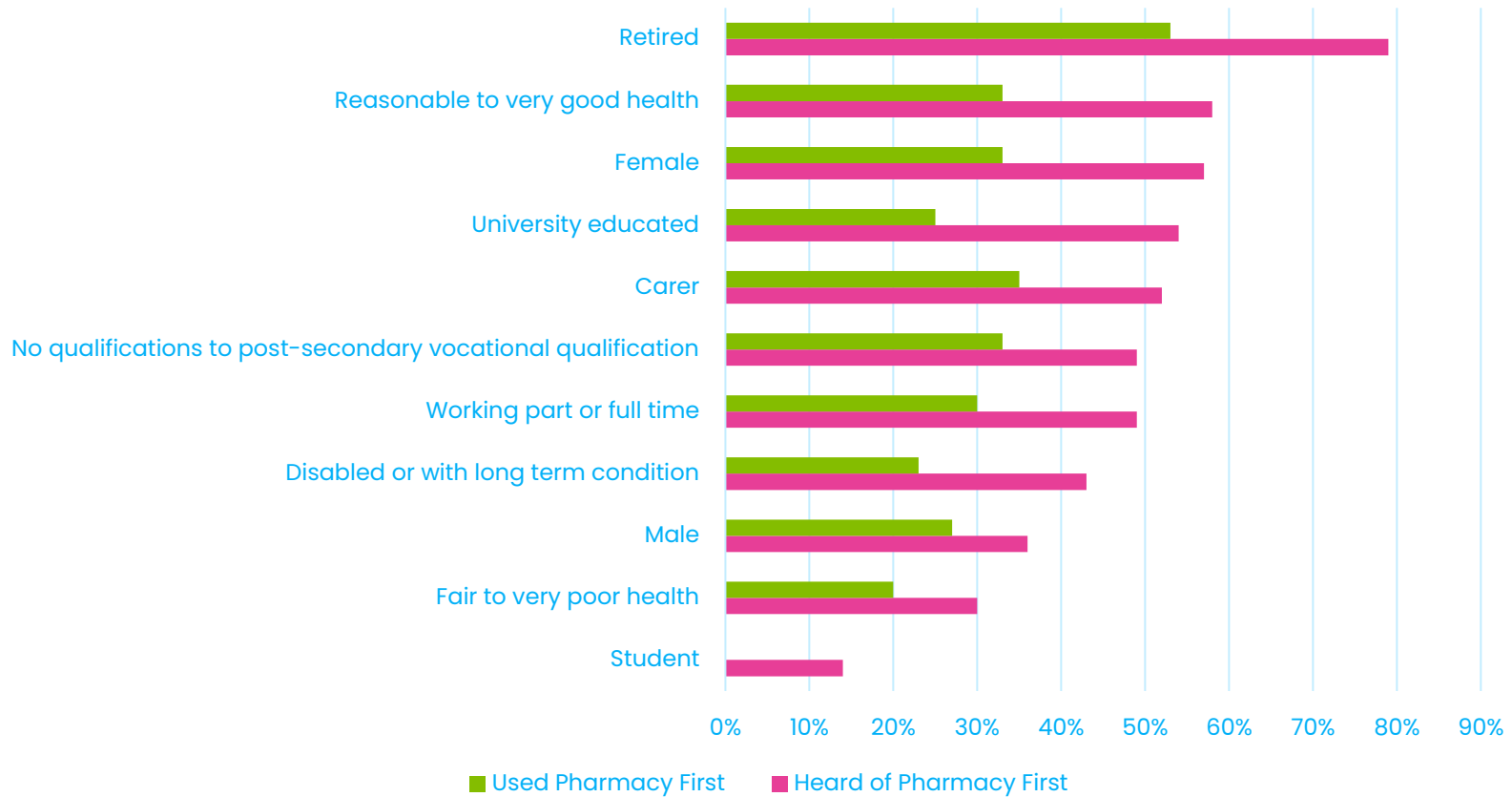


This slide (and the one which follows) look at which groups have heard of, and/or used the service.

The charts need to be used carefully as some of the numbers are small – only 15 respondents were aged 13-24, for example.

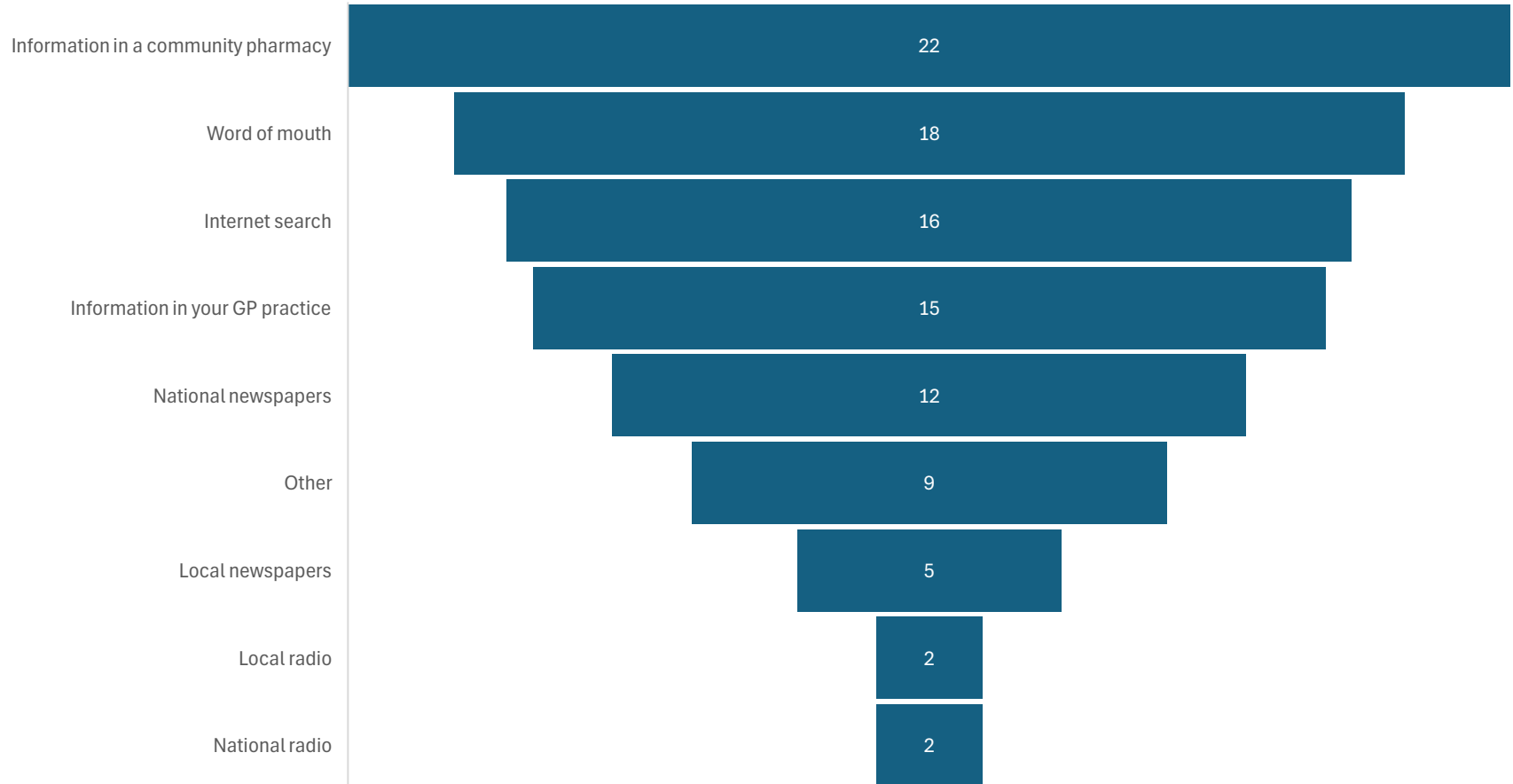
They may help in designing further advertising campaigns.

Awareness (2)



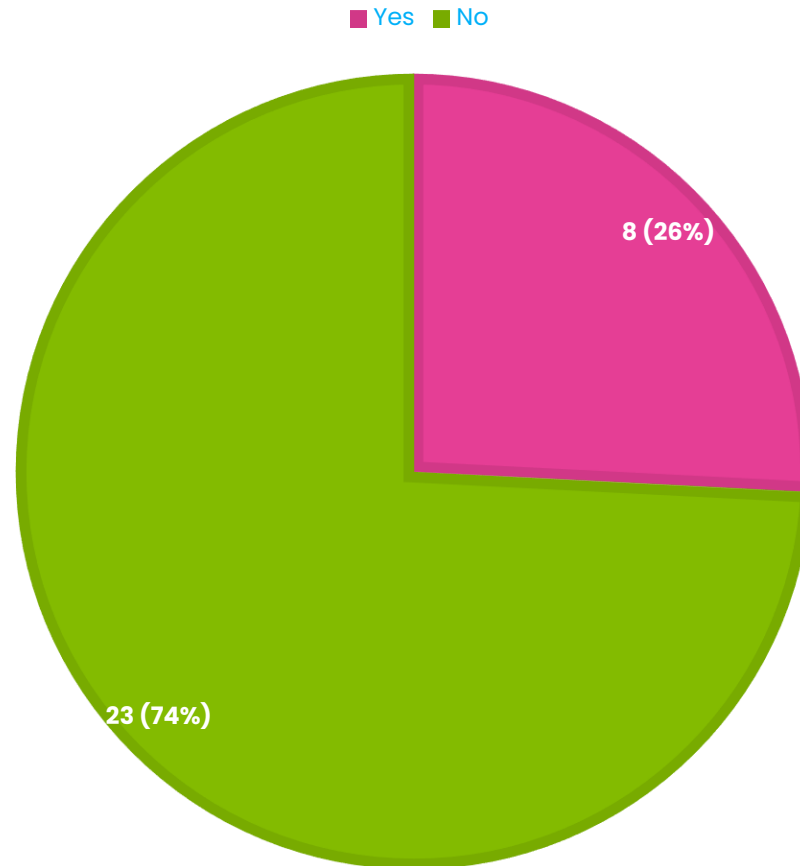
Where did you hear about Pharmacy First?

N=101



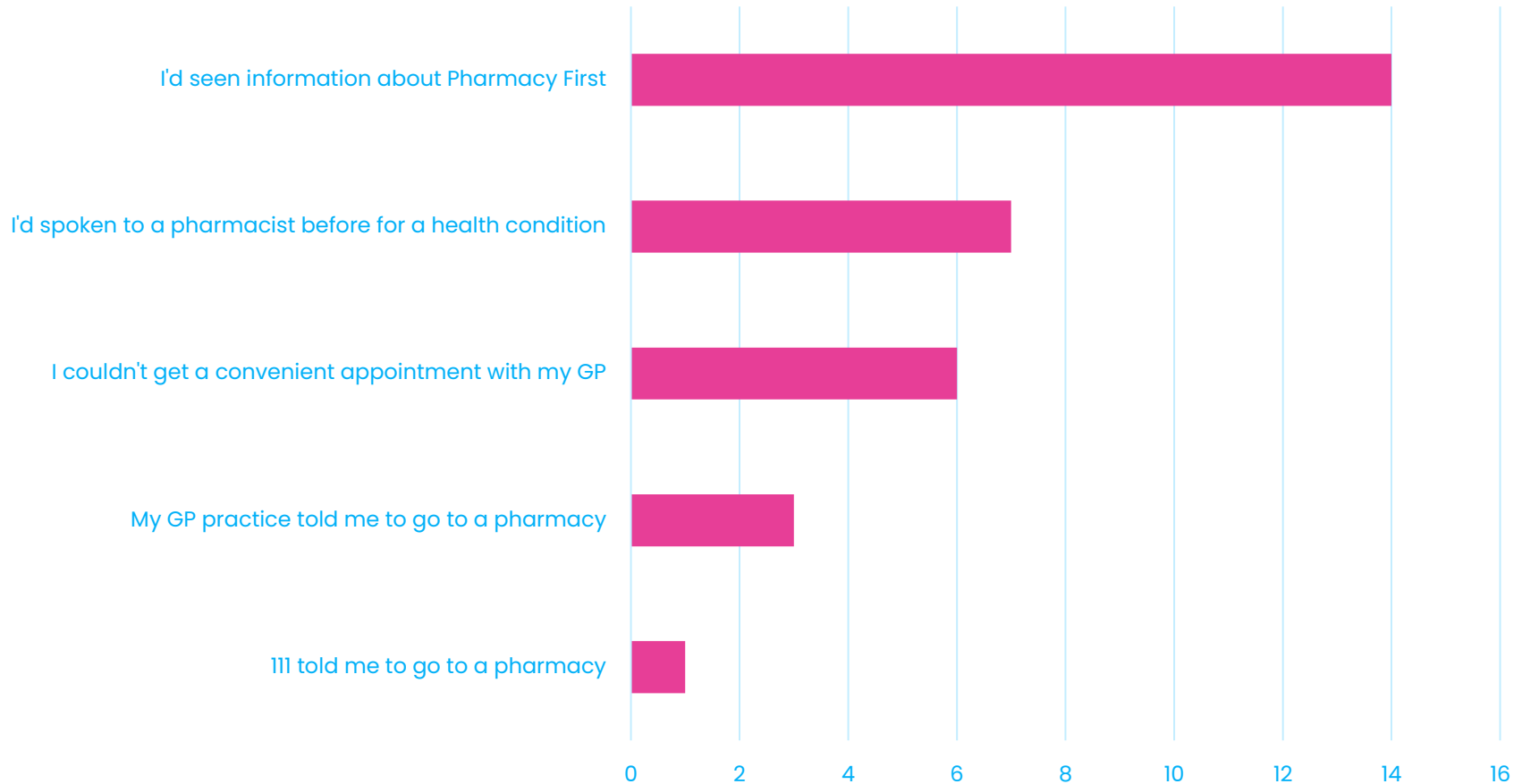
As you have used Pharmacy First, did you try to make an appointment with your GP first?

N=31



Why did you choose Pharmacy First?

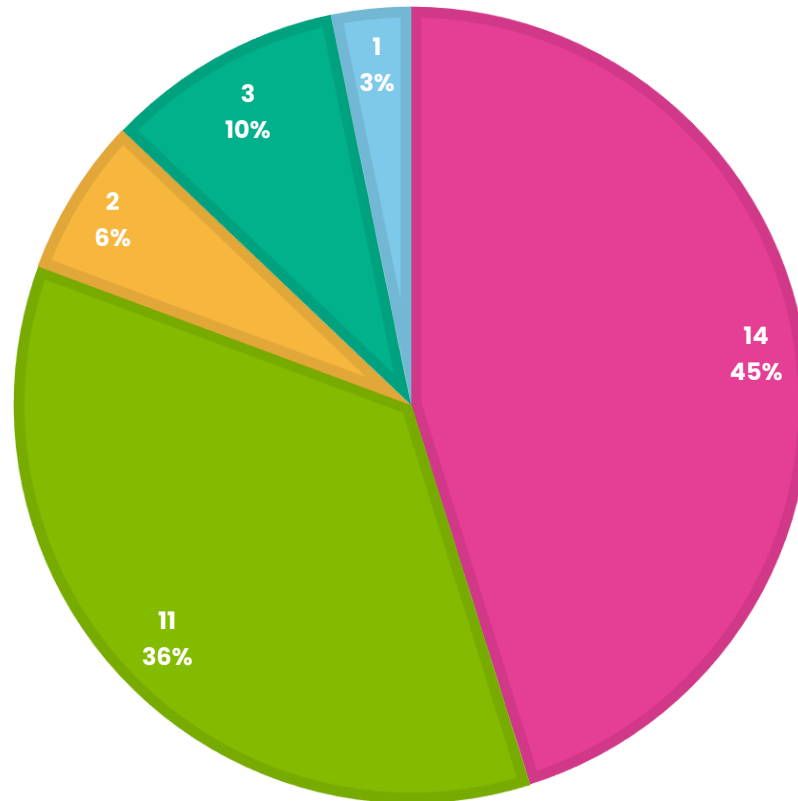
N=31



How long did you wait to be seen?

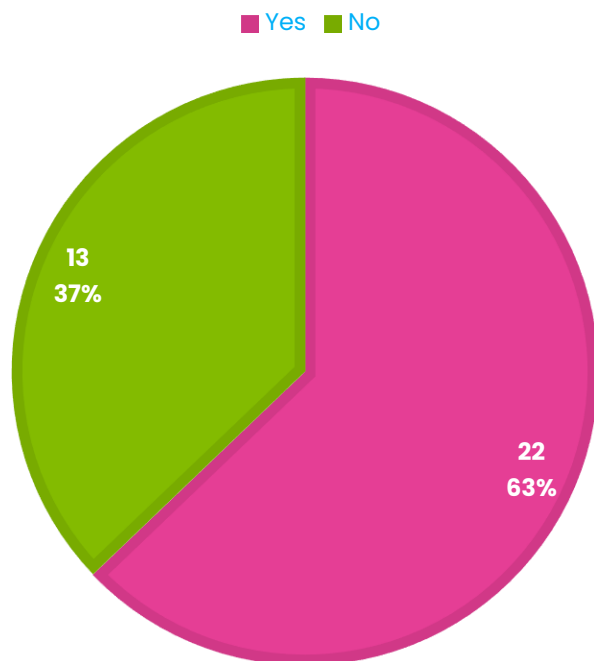
N=31

■ Under 5 minutes ■ 5-15 minutes ■ 15-30 minutes ■ More than 30 minutes ■ Can't remember

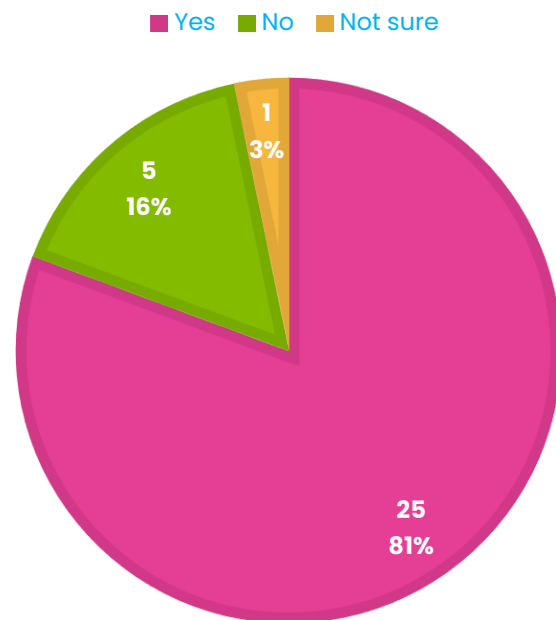


Your experience

Were you seen in a confidential area? N=35

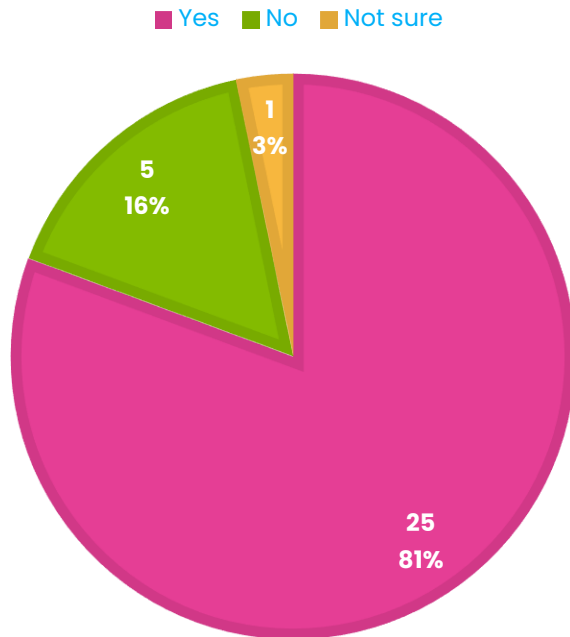


Did you feel confident about the diagnosis and treatment suggested by the community pharmacist? N=31

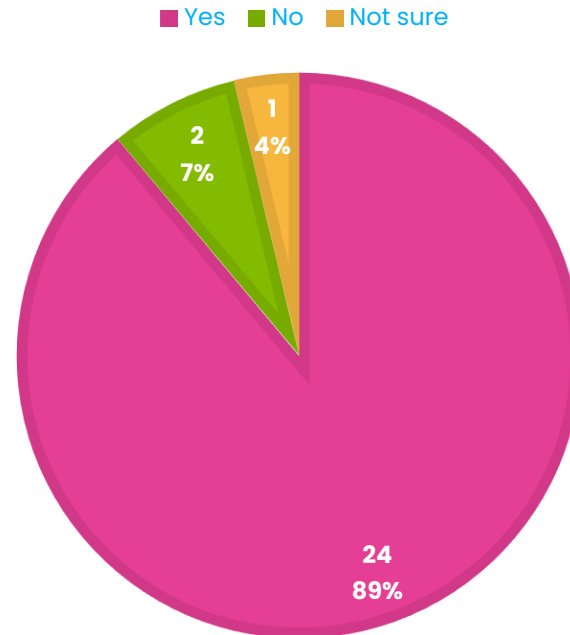


Your experience

Did the consultation with the community pharmacist meet your needs? N=31



Did the community pharmacist involve you in decisions about your treatment? N=27



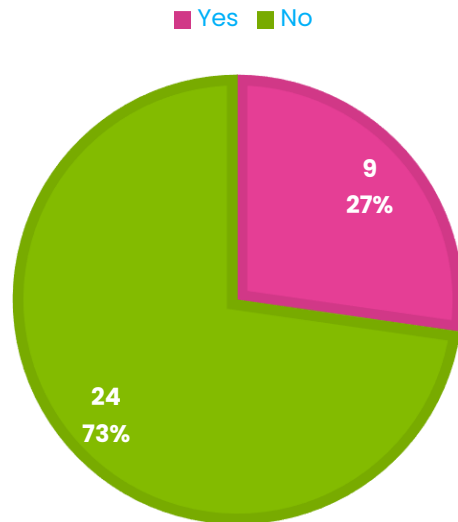
A large, stylized pink outline of the number 6 is positioned in the top left corner of the slide.

“They told me to get an urgent GP appointment when it was after 6.30pm, and then told me to go to A&E. I instead visited a supermarket and spoke with a pharmacist there who listened, provided appropriate advice and sold me treatment that reduced the inflammation and reaction within an hour.”

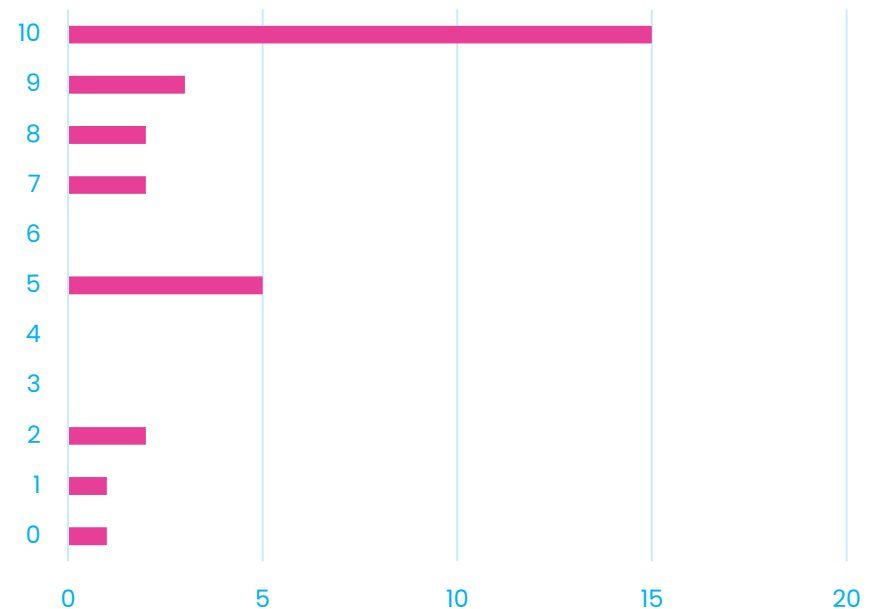
A large, stylized dark blue outline of the number 9 is positioned in the bottom right corner of the slide.

Your experience

Did the community pharmacist ask you to go to your GP or another NHS service because they couldn't help you? N=33

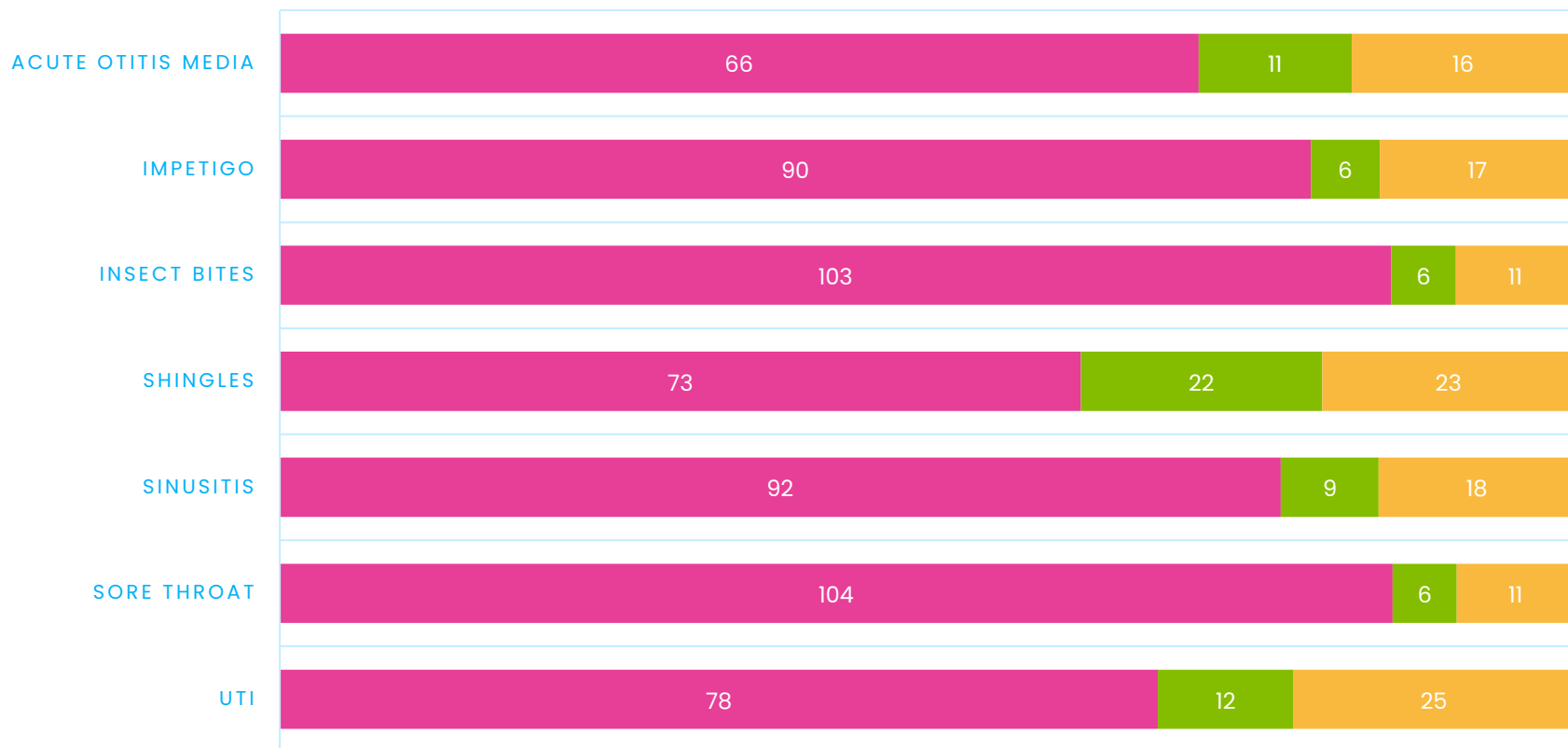



Where "10" is very likely to recommend and "0" is very unlikely to recommend to a friend, how would you rate Pharmacy First? N=31




In future, would you be happy to see a community pharmacist for:

■ Yes ■ No ■ Not sure





I wouldn't recognise symptoms of impetigo, glue ear or sinusitis. I would try to see GP first for shingles especially on the face. I would prefer to take a young child eg a visiting grandchild to a GP.



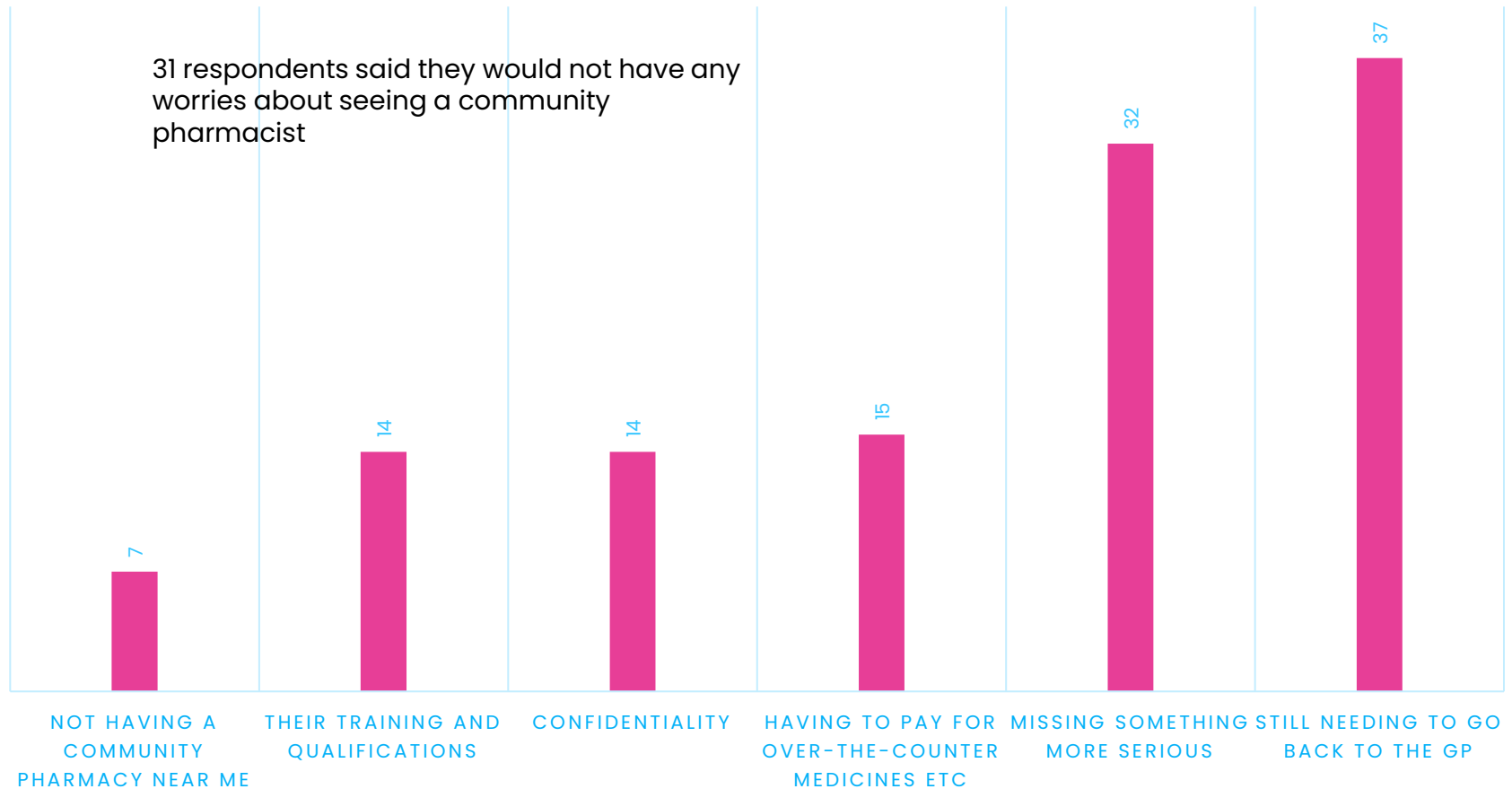
A large, stylized pink outline of the number 6, positioned in the top left corner of the slide.


“These conditions require self diagnosis - not everyone can decide for example whether a UTI is complicated or not”

“You cannot state any of these conditions as a diagnosis until they have been properly assessed. Pharmacists should not be used to assess undifferentiated patients; this is a dangerous substitution of doctors for less appropriately trained professionals”


A large, stylized dark blue outline of the number 9, positioned in the bottom right corner of the slide.


Would anything worry you about seeing a community pharmacist?






“Course of antibiotics did not work. Tried to contact GP for appt as advised by pharmacist after initial consultation. GP practice tried to again send me to a pharmacist. I ended up in hospital.”





“I'd be concerned that it would be a wasted trip again - the pharmacist I spoke with was clearly risk averse and did not want to take the responsibility of recommending a course of treatment.”



Conclusion

There is much opportunity to deliver care closer to the patient by using community pharmacists, alongside other clinicians in primary care.

Our survey suggests that patients are largely comfortable with this concept, although there are some concerns about some of the conditions included and the safety of the service.

Our report has been shared with Healthwatch England, who are conducting some national engagement to inform the future of community pharmacy services.

We will also aim to get feedback from local community pharmacists and general practitioners to complement this report.

Recommendations

Healthwatch Southend **recommends** that:

Awareness

- The ICB must do more to raise awareness of Pharmacy First, taking account of the communication needs of diverse communities in Southend, and using a variety of channels and partners
- This should aim to help people understand symptoms rather than using clinical diagnoses such as “impetigo”
- The ICB should actively use information from community pharmacists and GPs about who is not using Pharmacy First to inform marketing campaigns

How will we know progress has been made?

- More residents will be aware of the availability of Pharmacy First; this will include people from diverse backgrounds
- The language used in posters and campaigns will be more accessible
- A broader range of residents will be aware of, and have used Pharmacy First

We will test using a range of methods, including observation and re-running the survey.

Recommendations

Healthwatch Southend **recommends** that:

Patient safety

- Pharmacists and the ICB should develop and use messages to reassure patients/family members about the training given to community pharmacists, as well as how risks/concerns are identified and managed
- This should include providers of NHS 111 services and GP teams, where a patient is triaged to Pharmacy First
- Particular attention should be given to shingles and uncomplicated UTIs


How will we know progress has been made?

- More residents will be using Pharmacy First
- Fewer residents will tell us about concerns about the safety and acceptability of using Pharmacy First


We will test using a range of methods, including observation and re-running the survey.

Next steps

1. Regulation 44 of The NHS Bodies and Local Authorities (Partnership Arrangements, Care Trusts, Public Health and Local Healthwatch) Regulations 2012 requires the ICB within 20 working days to
 - a) acknowledge receipt; and
 - b) provide an explanation to Healthwatch Southend of any action the ICB intends to take in respect of the report or recommendation, or an explanation of why the ICB does not intend to take any action in respect of that report or recommendation.
2. Healthwatch Southend will revisit the recommendations in this report during 2026/27 to understand what actions have taken place



“I was delighted to read about Pharmacy First as I have had occasional bouts of Sinusitis, which is extremely painful. The Pharmacist confirmed my diagnosis and prescribed antibiotic.”





Who answered
our
Survey?

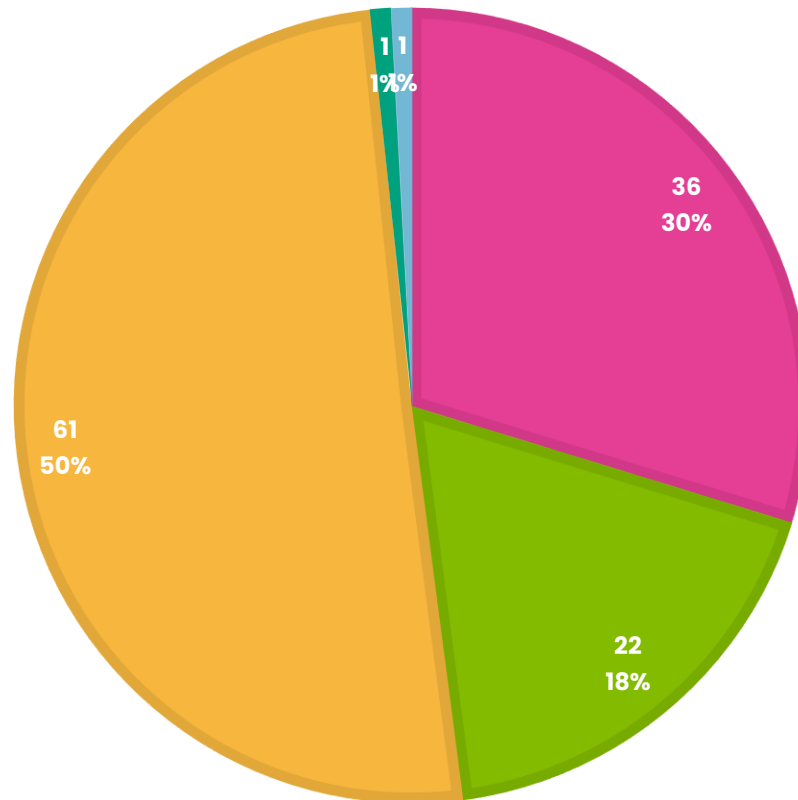
Why do we collect information about respondents?

We ask a number of questions about who responds to our surveys. None of these have to be answered and all are treated in confidence.

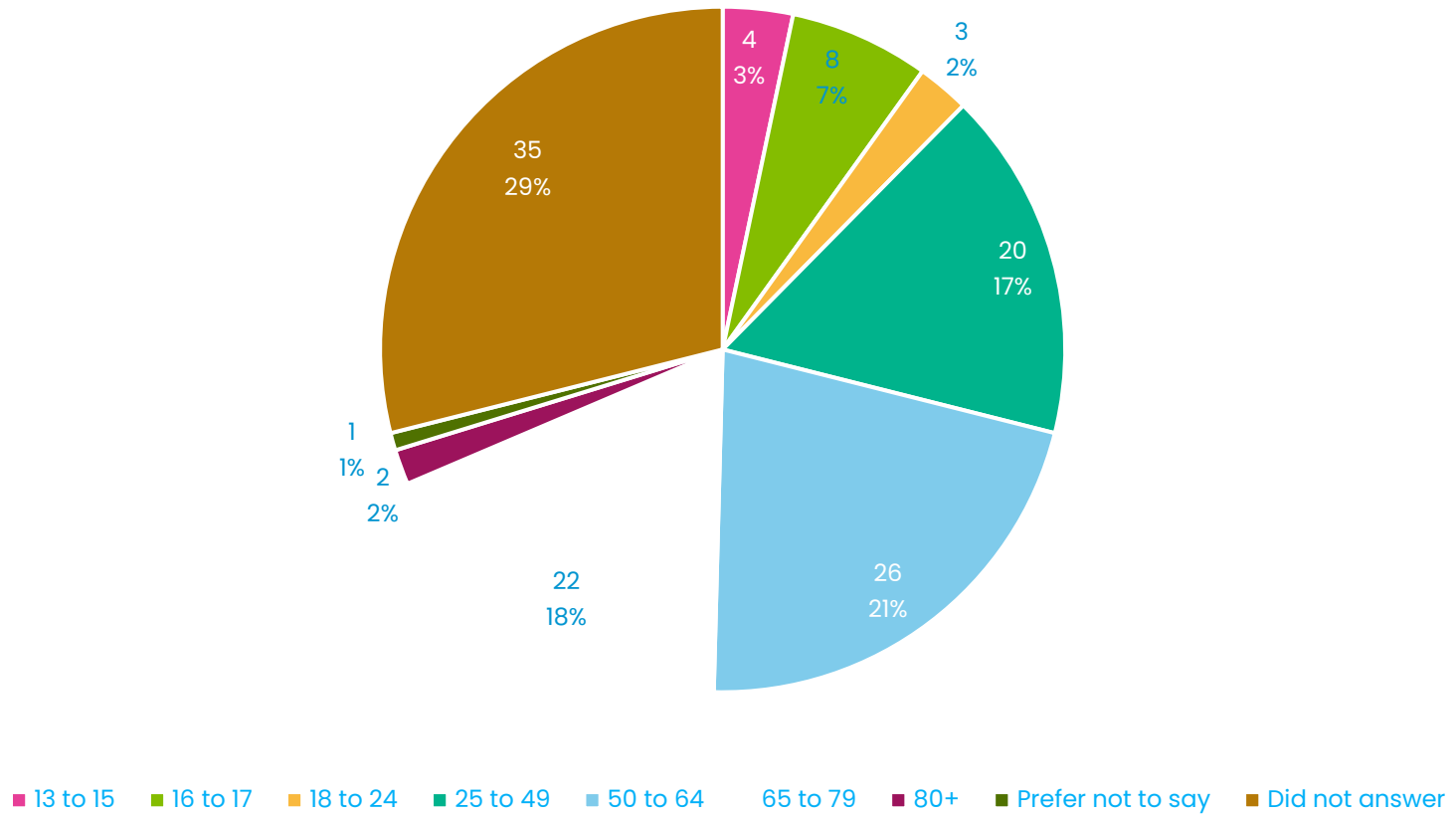
We know that people from different backgrounds often have differing experiences of health and care services, so this helps us understand whether this is the case in Southend. We want to make sure we hear from a broad range of people across Southend.

What is your gender?

■ Did not answer ■ Man ■ Woman ■ Prefer not to say ■ Non-binary



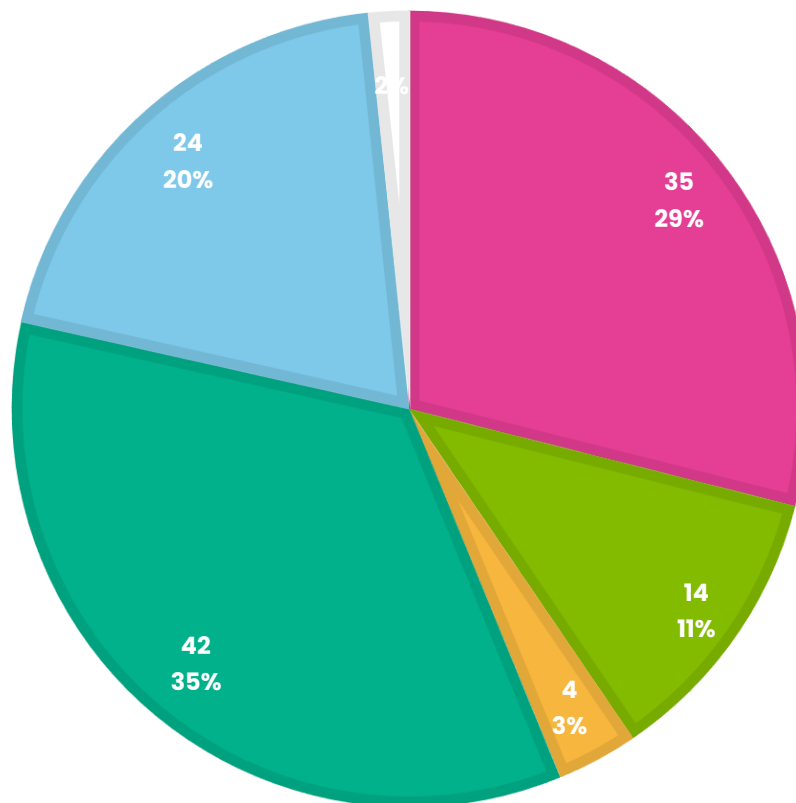
How old are you?



How would you describe your current state of your health?

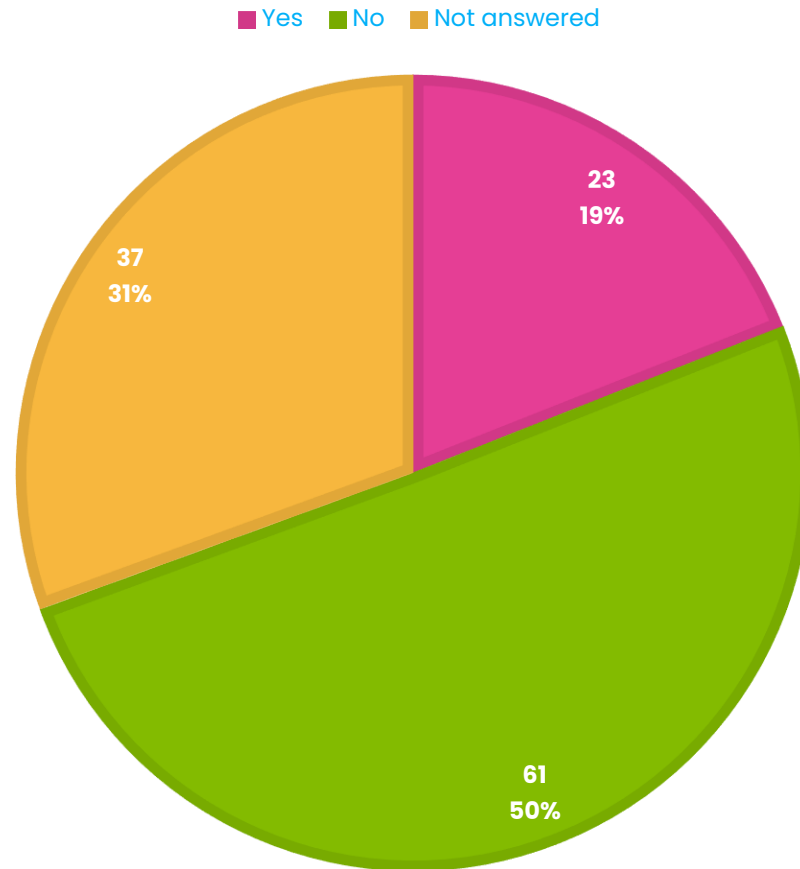
N=121

■ Not answered ■ Fair ■ Quite poor ■ Reasonably good ■ Very good ■ Very poor



Do you consider yourself to be a carer?

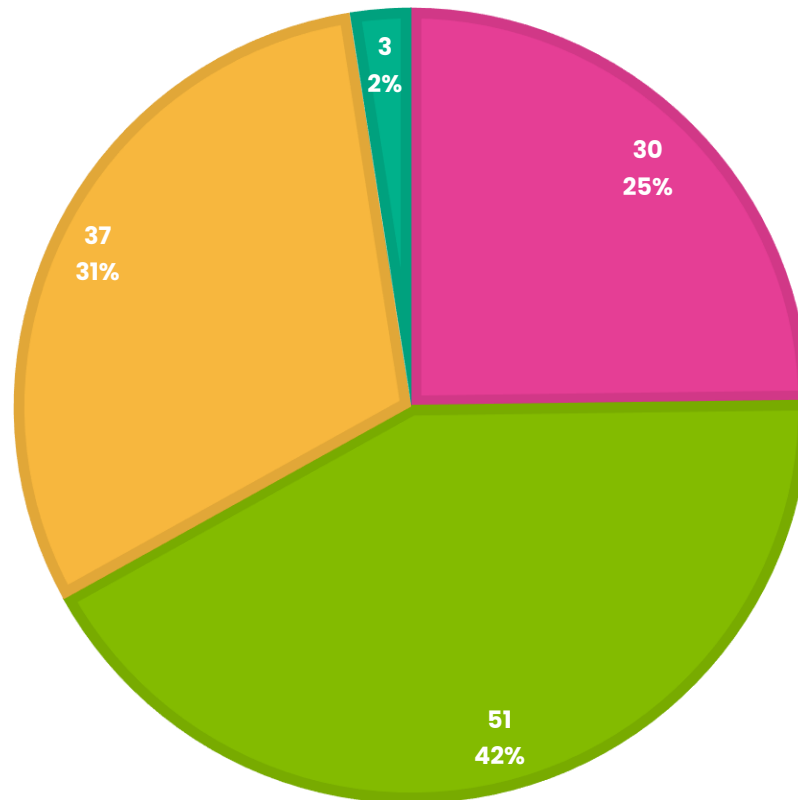
N=121



Do you have a disability or long term health condition?

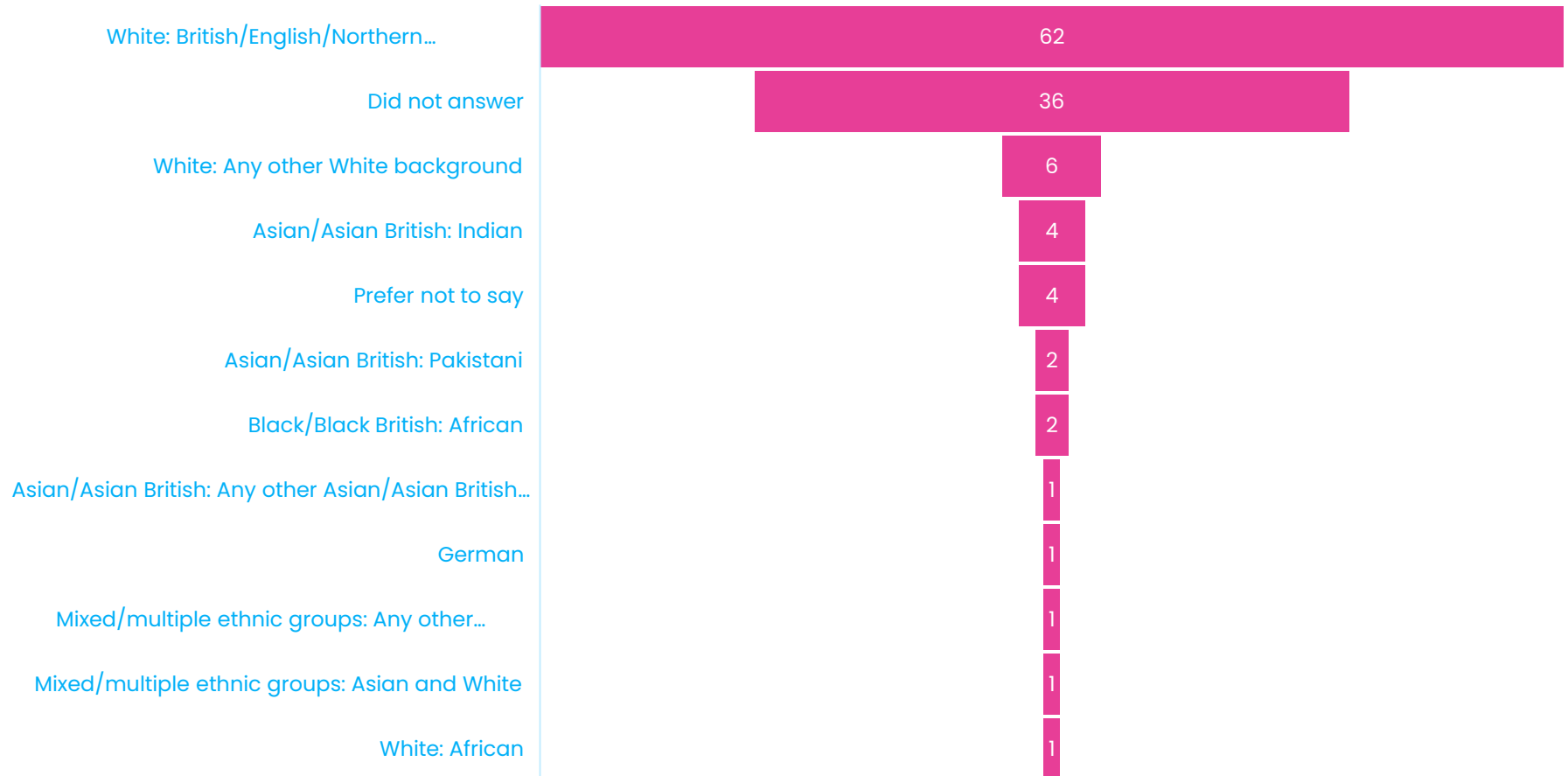
N=121

■ Yes ■ No ■ Did not answer ■ Prefer not to say



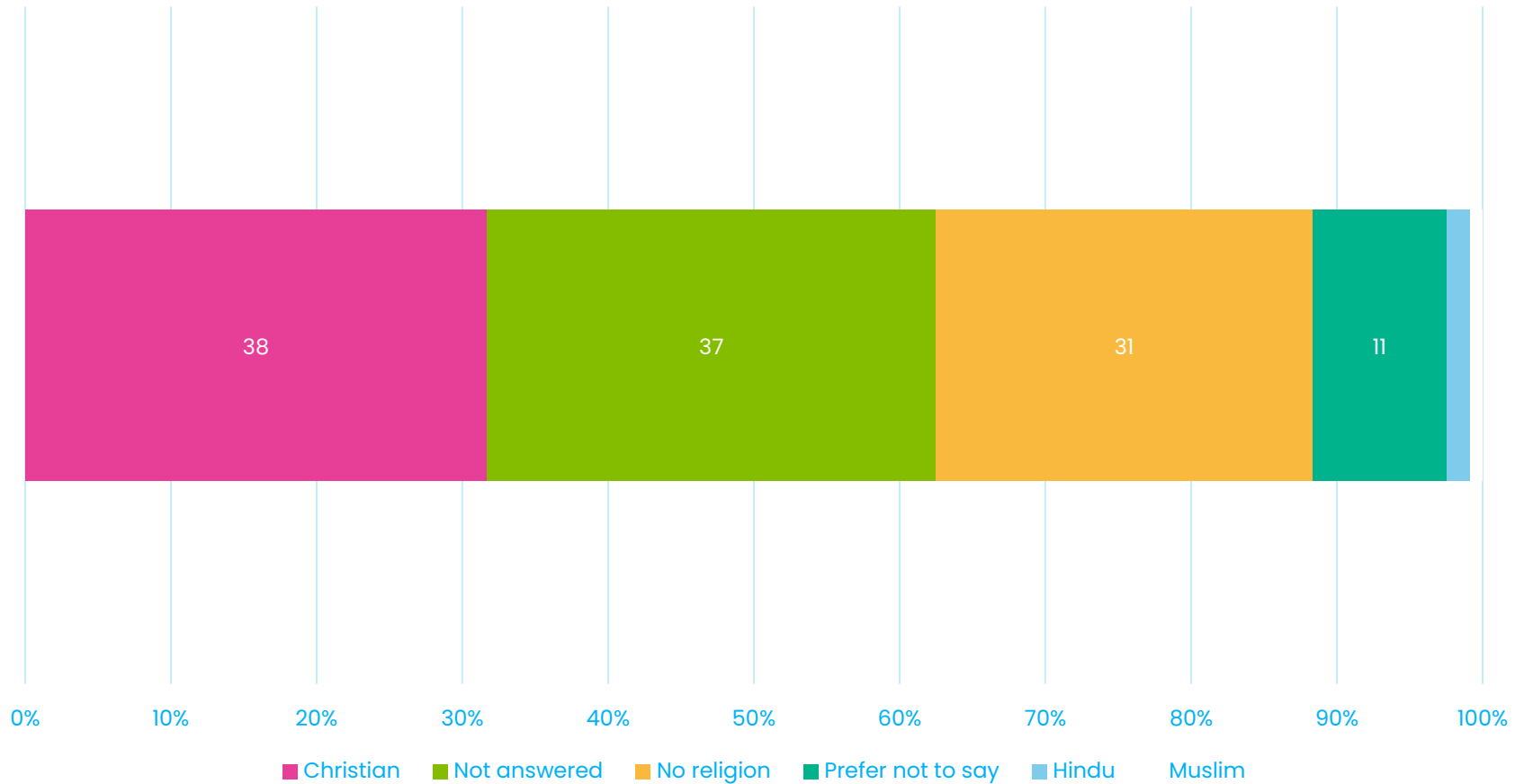
How would you describe your ethnicity?

N=121



What is your religion?

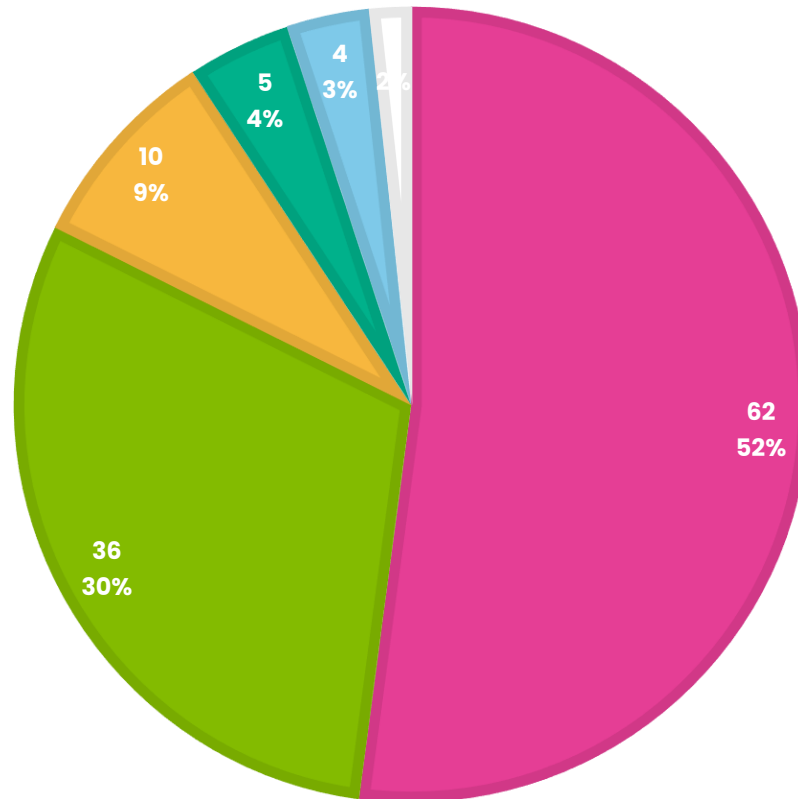
N=120. 1 respondent asked why this was relevant



Which sexual orientation do you identify with?

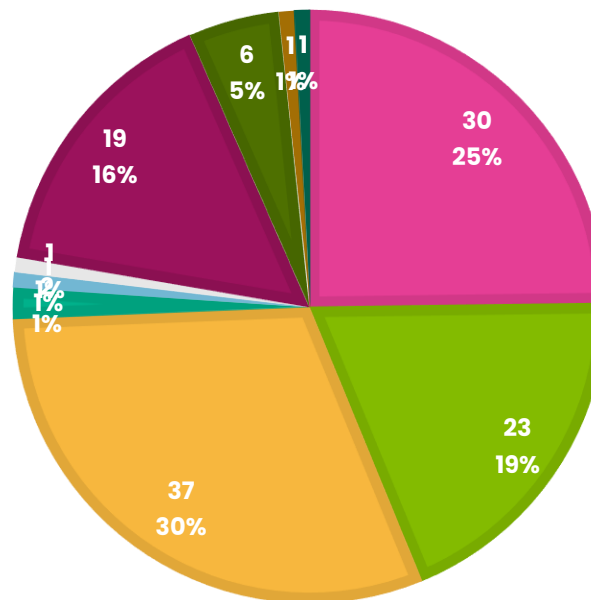
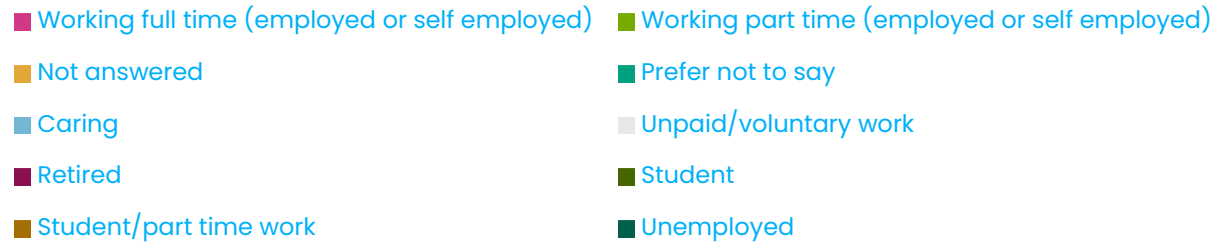
N=121

■ Heterosexual/straight ■ Not answered ■ Prefer not to say ■ Bisexual ■ Asexual ■ Gay man



What is your employment situation?

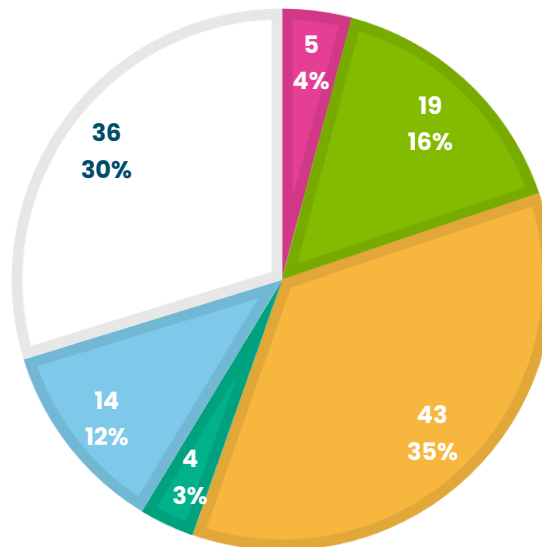
N=121



How would you describe your financial situation?

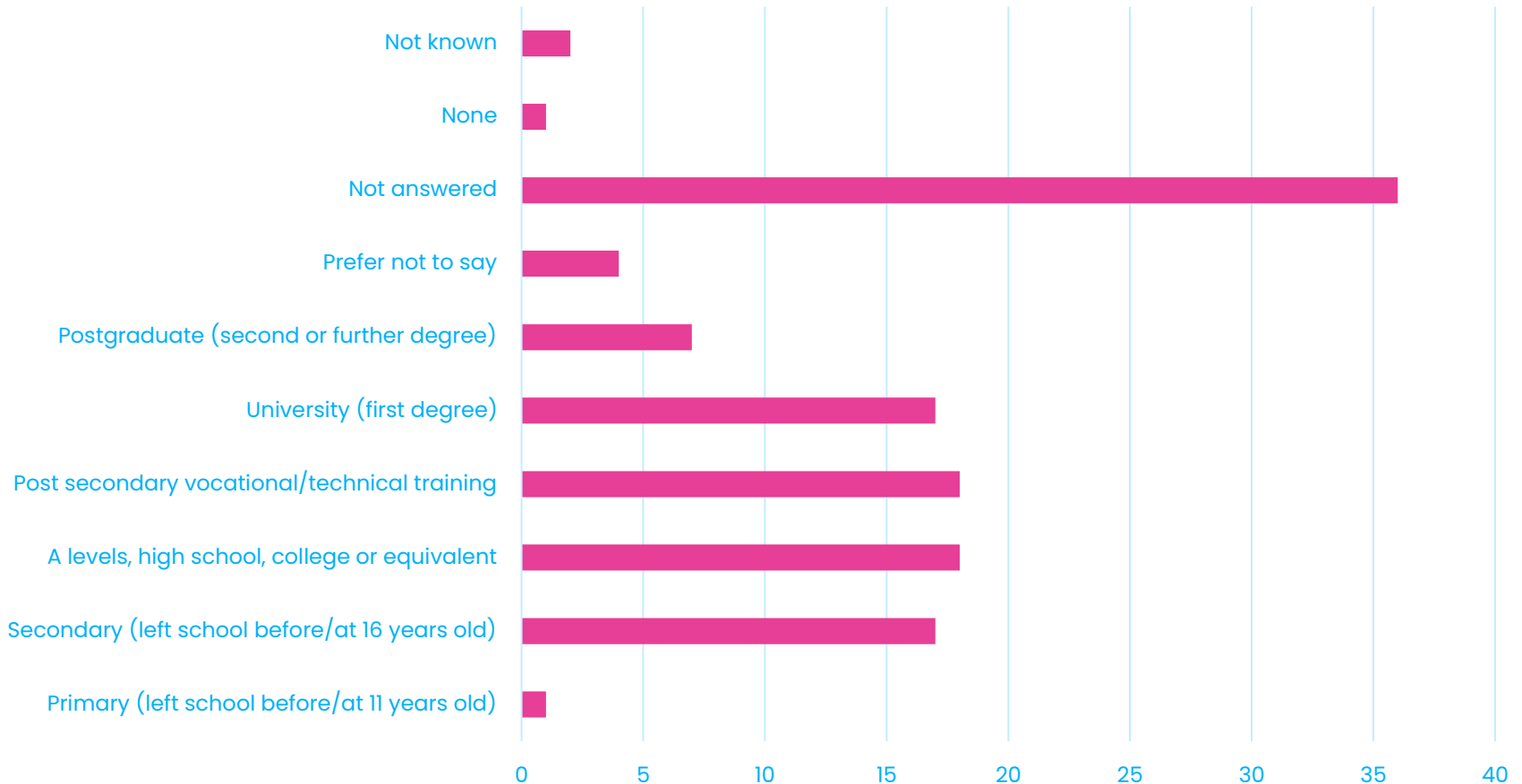
N=121

- Really struggling (I don't have enough money for living expenses and sometimes run out of money)
- Just getting by (I have just enough money for living expenses and little else)
- Quite comfortable (I have enough money for living expenses, and a LITTLE spare to save or spend on extras)
- Very comfortable (I have more than enough money for living expenses, and a LOT spare to save or spend on extras)
- Prefer not to say
- Not answered



What is the highest educational level you have achieved?

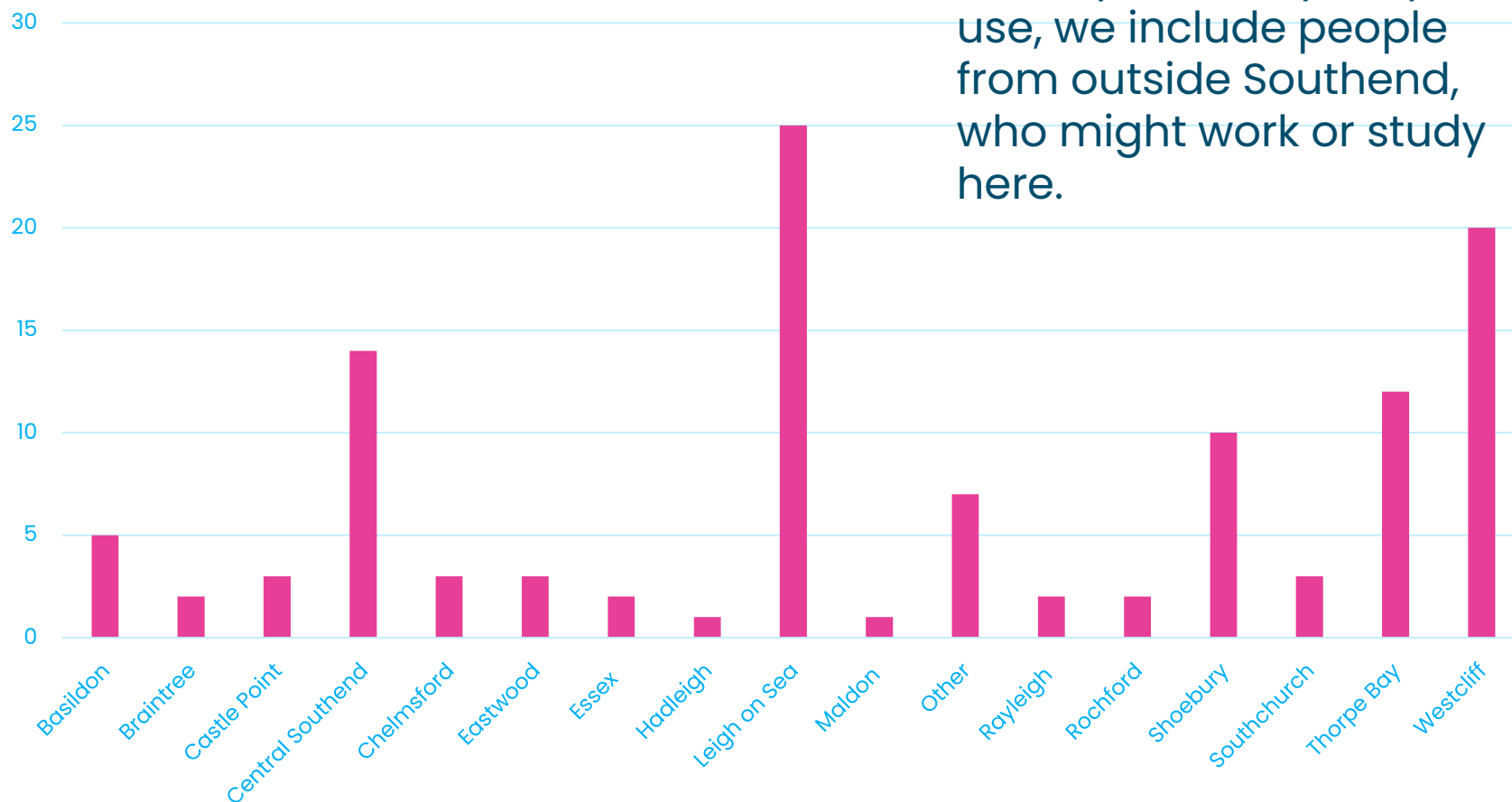
N=121



Where do you live?

N=115

As patients can choose which pharmacy they use, we include people from outside Southend, who might work or study here.



Appendices



GP Patient Survey 2024

The national GP Patient Survey contains three questions which give a sense of local residents' views of community pharmacy.

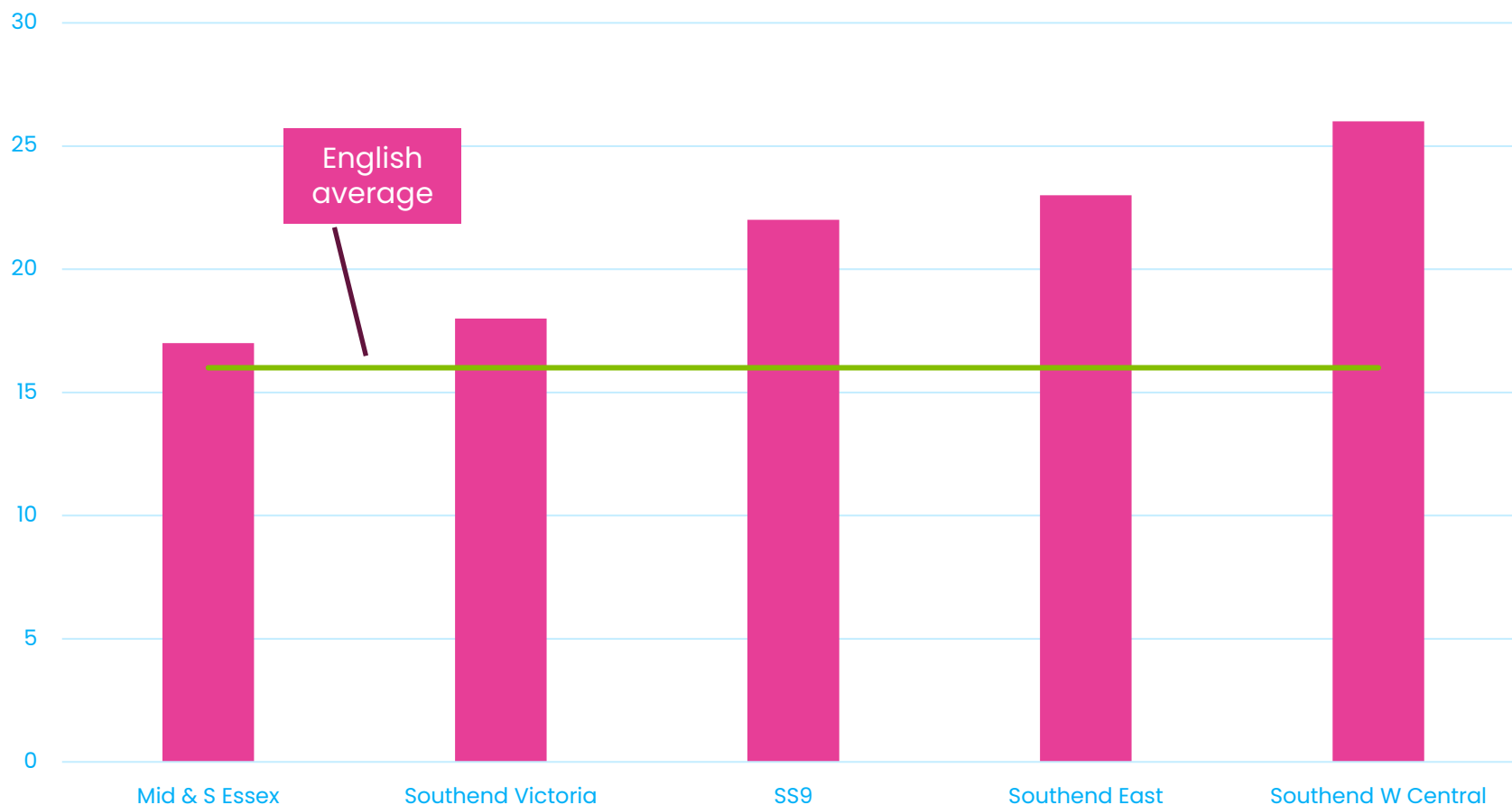
The slides which follow show results for our primary care networks (the groupings of GP practices) in Southend. The Survey asks

- where people go when their GP practice is closed
- which services they used at a community pharmacy – we have included those residents who looked for advice, eg on a prescription medicine, a health issue or other health services
- their overall experience of using a community pharmacy for those services

The Council's Public Health Directorate also published a Pharmaceutical Needs Assessment, which also has details of residents' views on community pharmacies. Both results suggest that Southend residents are comfortable in getting help and advice from a community pharmacy.

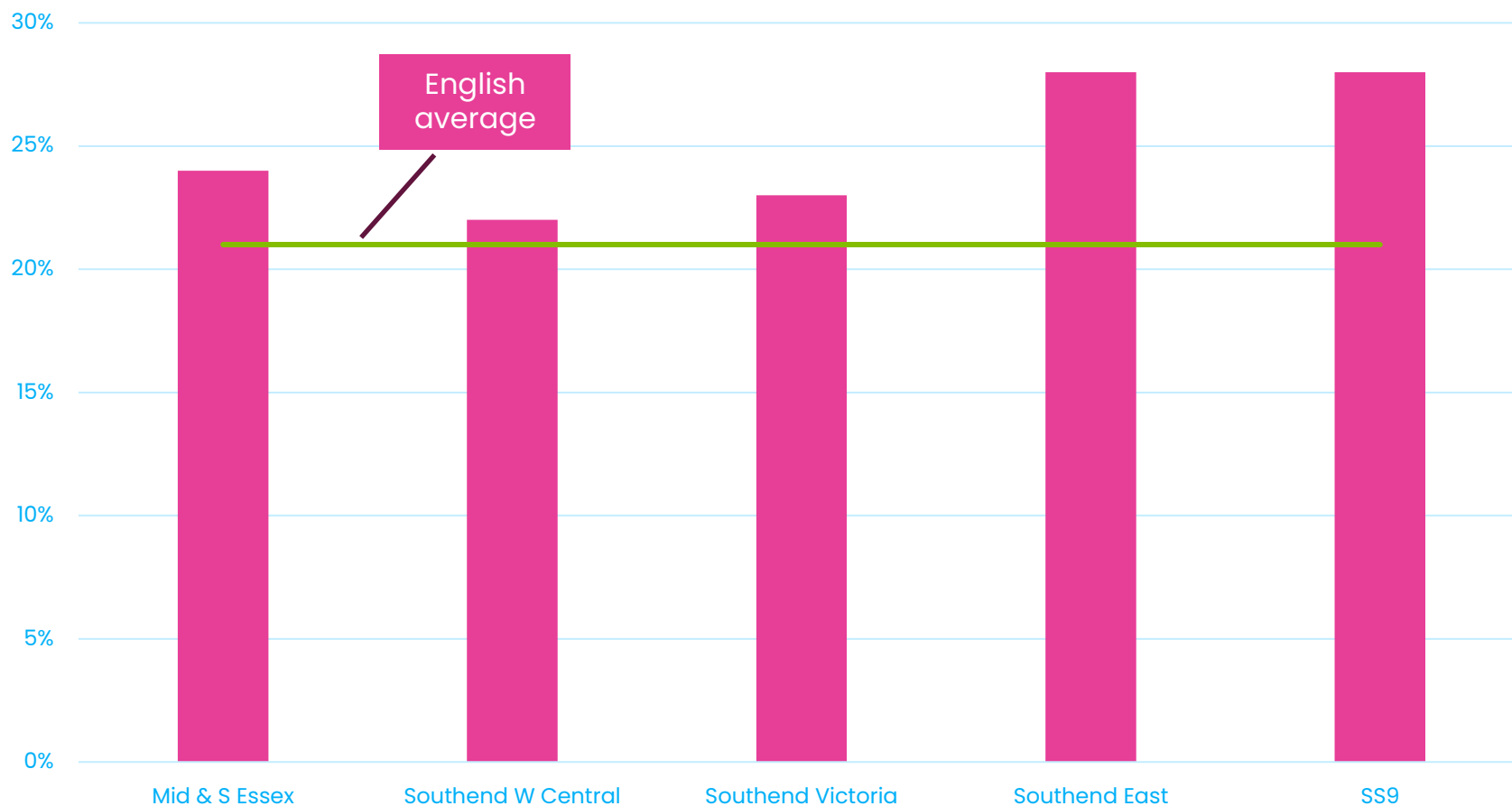
GP Patient Survey 2024

Percentage of respondents by PCN using community pharmacy when GP practice is closed



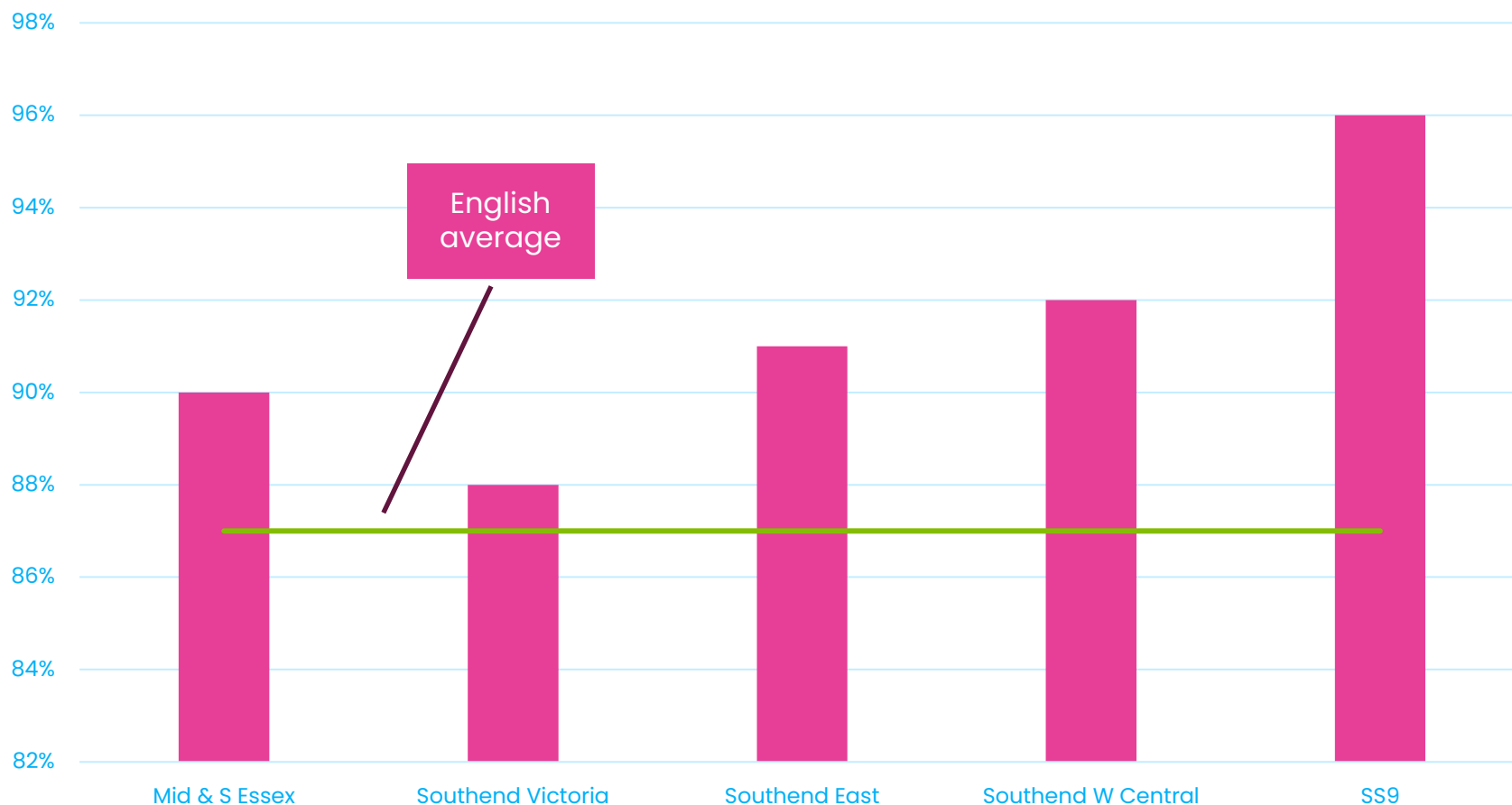
GP Patient Survey 2024

Respondents by PCN who used a community pharmacy to get advice



GP Patient Survey 2024

Percentage of respondents by PCN saying their experience of community pharmacy is “very good” or “good”



Pharmaceutical Needs Assessment 2022

The City Council is required to prepare a Pharmaceutical Needs Assessment, to inform the planning and funding of community pharmacy services. This was last published in 2022*. It included a questionnaire for local residents. A few messages came out of this:

- 64% of people rated their regular pharmacy as excellent, with 66% scoring it 9 or 10 out of 10 for meeting their needs
- 93% could reach a community pharmacy within 15 minutes; most walked from home
- For others, parking close to the pharmacy was an issue
- 90% felt their regular pharmacy was open at the most convenient time for them

*<https://www.smartsouthend.org/content/28332ff7f03a47928078a4ee9c417b9b/about>

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