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5 Stakeholder Engagement

5.1 General stakeholder engagement

5.1.1 Introduction
Pharmacies are an important asset within local communities offering several NHS services. Public health was transferred to local government under the Health and Social Care Act 2012. Therefore, since 2013, local authorities have been responsible to implement the government’s strategies for improving the health of their local populations.

5.1.2 Why public engagement and consultation is important?
PHAST was commissioned by Barking & Dagenham council to develop its current PNA and consult and engage with stakeholders. Public involvement in commissioning enables residents to voice their views, needs and wishes, and to contribute to plans, proposals, and decisions about the services available in their local communities.

The National Health Service Act 2006 (as amended by the Health and Social Care Act 2012), CCGs and NHS England have duties to involve the public in commissioning (under sections 14Z2 and 13Q respectively). The local authorities also have a duty to consult and involve residents in planning and commissioning.

5.2 Outline methodology of stakeholder engagement

5.2.1 Aims
The aims of the consultation and engagement are:

1. To encourage constructive feedback from key professional stakeholders and communities throughout the PNA process. This includes ensuring good stakeholder engagement during the statutory PNA formal consultation, which lasts for a minimum period of 60 days.

2. To ensure a wide range of key public stakeholders offer opinions and views on what is contained within in the draft PNA.

5.2.2 Process
To meet Aim 1 above, PHAST set up a stakeholder advisory group for the PNA to give advice from the start of the process. The Terms of Reference for the PNA stakeholder advisory board is given in Appendix I – Terms of Reference.

The advisory group identified two separate processes which were needed to satisfy Aim 2 as follows:

- A statutory consultation on the draft PNA as set out in the PNA regulations.
- A wider engagement with local communities and residents to get their views on the services offered by local pharmacies and their experiences of using the pharmacies.
Please see Appendix H – for details regarding the statutory consultation.

5.3 Pharmacy survey

The LBBD Pharmacy Contractor Survey was conducted to inform the PNA. The survey was developed and refined to ensure the Public Health lead as well as the LPC lead were all in agreement with its content. It covered the full range of topic areas relating to the development of community pharmacies. The online survey was hosted and managed by the Local Pharmaceutical Committee (LPC) team.

All LBBD pharmacies were invited to take part by way of an invitation letter, which was emailed by the LPC to each pharmacy. The survey was open between the 11 August – 29 September 2017 and during this period weekly email reminders were sent out to those who had not responded. The closing date was then extended by three weeks to optimise the response rates.

At the time of survey, there were 38 pharmacies in LBBD. All 38 pharmacies completed the survey, giving the overall response rate of 100%.

Findings were as follows:

- There are 38 pharmacies in Barking & Dagenham (10 pharmacies from the East locality, 14 pharmacies from the North locality and 14 pharmacies from the West locality). All 38 pharmacies completed the survey, giving the overall response rate of 100%.

- The majority of pharmacists have a bus stop within a two-minute walking distance of their pharmacy (36/38). Only one pharmacy (East locality) is more than a five-minute walk from the nearest bus stop.

- The majority of pharmacies have disabled parking available within ten metres of the pharmacy, have unaided wheelchair access at the entrance and have all areas of the pharmacy floor wheelchair accessible.

- Just under half of the pharmacies have automatic door assistance for disabled customers (15/38) and over half have large print labels and leaflets to support customers with visual problems. A minority of pharmacies have additional facilities to help disabled customers such as bell at the front door, disabled toilet access, hearing loop, wheelchair ramp, handrails and internet pharmacy.

- Some of the pharmacies have constraints on developing their premises just under a third have limited room for expansion (11/38), three have listed building status and over half are rented buildings (21/38).

- Just under half of the pharmacies have toilets that patients can access for screening (16/38).

- The majority of pharmacies have a consultation room on-site with wheelchair access (32/38).

- The majority of pharmacies have good facilities within their consultation areas including seating for three or more people, a bench and table, a computer terminal and more than half have a sink within the consultation area (21/38). About a
quarter have a separate area/room for advanced services for consultations with customers (10/38).

- Less than half of the pharmacies have two or more pharmacists on duty at any time during the week.
- Half of the pharmacies involve a second pharmacist for reasons such as additional dispensary support, relieving pharmacists for administration work, supporting medication reviews and covering shift handovers/lunch breaks.
- A large number of pharmacies have pharmacists who have special interests in specific health areas such as flu vaccinations, long-term conditions, mobility, nutrition or healthy living.
- A large number of pharmacies have regular pharmacists who speak more than one language. The most common additional languages spoken are Asian languages such as Punjabi, Urdu, Gujarati and Hindi. Only five pharmacies did not have a regular pharmacist who spoke more than one language.
- In terms of dispensing appliances, more than three quarters of pharmacies dispense all types of appliances (28/38). Only three pharmacists do not dispense any appliances.
- In terms of offering advanced services, all but one of the pharmacies provide the New Medicines Service and all pharmacies provide Medicines Use Review.
- In terms of providing enhanced services, the majority of pharmacists provide EHC (27/38), home delivery service (30/38), Medication Review Service (34/38), Minor Ailments Scheme (31/38), flu vaccination service (36/38), stop smoking service (27/38), and supervised administration service (28/38). Just under half supply medical assessment and compliance support (16/38) and the NHS Health Check programme (16/38).
- Pharmacists were asked whether they would be willing to provide some of the enhanced services in the future. Although currently only four pharmacies provide anticoagulant monitoring service, a further 20 pharmacists would be willing to provide this in future. Similarly, currently only eight pharmacists provide oral contraceptive services but 23 would be willing to provide the service. Other services that a large number of pharmacists stated they would be willing to provide include Medicines Assessment and Compliance Support, NHS Health Check programme, out of hours service, prescriber support service, schools service, childhood vaccinations, HPV screening and sharps disposal service.
- In terms of locally commissioned services that pharmacists currently provide, the majority of pharmacies provide the Minor Ailment Scheme (30/38), EHC (25/38), stop smoking service (26/38) and supervised administration of opioid substitution treatment (27/38).
- Additional non-NHS funded services provided by pharmacies included all but one pharmacy providing collection of prescriptions from surgeries (37/38), and the majority offer delivery of dispensed medicines free of charge on request (34/38).
• The majority of pharmacies provide blood pressure diagnostic services (29/38) and weight recording (22/38). Just under half of the pharmacies provide height recording (14/38), body mass index (BMI) calculation (15/38) and carbon monoxide readings (15/38). A small number of pharmacies offer other services such as pregnancy tests (5/38), blood glucose (10/38) and cholesterol (7/38) readings.

• The majority of pharmacies are prepared to provide additional services if they were commissioned to do so. These include brief interventions such as health coaching, disease specific medicines, independent describing service, medicines assessment, supplementary prescribing, vascular risk assessment and weight management. Approximately half the pharmacies are willing to provide alcohol screening, expanded incontinent service, gluten free food supply service, phlebotomy service and structured self-care support service.

• Almost all the pharmacies in Barking & Dagenham have good quality computer equipment that includes internet access, NHS Summary Care Records and printing facilities. Software includes dispensary software, electronic prescription service and all are Release 2 enabled.

For a detailed review of the survey responses please see Appendix K – Pharmacy survey.

5.4 Pharmacy users’ views - Community Pharmacy Patient Questionnaire (CPPQ) highlights

The final question in the survey asked the pharmacies the following –

“All pharmacies are required to conduct an annual Community Pharmacy Patient Questionnaire (CPPQ).

Using the results from your most recent CPPQ please identify the five most frequent requests from patients as either improvements or additions to your services.”

For a summary of the key findings from the pharmacies CPPQ results in borough please see the word clouds on the following pages. The larger texts describe the most frequently made comments by the pharmacy users.
Figure 1 How pharmacies could improve

Feedback from pharmacy users - How pharmacies could improve

**Waiting Area**
- Environment
  - air conditioning
  - larger waiting area
  - improved environment
  - new carpet
  - tidier shelves
  - improve cleanliness and tidiness
  - wider range of leaflets
  - more posters advertising services

**Access**
- disabled access
- better ramp into shop, as there's a slight ledge that buggies and wheelchairs get caught on
- change door to automatic for disabled or mothers with prams bigger area
- power assisted door

**Seating**
- more seating
- chairs to sit down
- improve seating arrangements
- chairs are too old

**Facilities**
- toilet available for patients
- sign-posting private areas such as consultation room

**Waiting times**
- reduce waiting times
- faster service
- more efficient service
- time for prescription ordering from surgeries to be reduced
- another till (less queues)
- queuing system more defined

**Stock**
- stock a wider range of CTC products
- larger range of products
- consider additional product requests
- having in stock the medicines/appliances the patients need
- more toilets for nearby nursing home residents
- stock baby products
- provide free baby milks
- stock request for branded products instead of generic e.g. Ventolin inhaler instead of Salbutamol
- stock specific brand requests, not just generic items
- wider range of general sale items on offer to be available more frequently

**Services**
- Family planning/
  - oral contraception service
- pregnancy testing on site
- free pregnancy tests
- free sexual health tests
- chlamydia testing

**Delivery**
- start delivery service
delivery times to be more specific
- longer delivery time periods

**Minor ailments**
- the formulary on the minor ailment scheme needs to be revised
- Minor ailment scheme as the health centre is considered within another borough
- a lot of patients asking for minor ailments

**Smoking cessation**
- advice on stop smoking
- free stop smoking service
- offer a stop smoking service

**Prescriptions**
- automatic prescription request
- disposing of medicines you no longer need
- medicine optimisation
- ordering of prescriptions
- reduce owing for prescriptions
- remind patients when medication is ready for collection
- re-order repeat scripts
- start independent prescriber service

**Lifestyle**
- advice on physical exercise
- health checks
- healthy eating
- more health screening
- provide weight advice
- weight management service
- advice on healthy eating
- advice on leading a healthy lifestyle

**Staff**
- accessibility of pharmacist
- improve staff qualifications and skills
- more staffing/more than one person serving at the counter

**Vaccinations**
- more vaccinations
- travel vaccination
- provide free flu vaccination
- provision of other vaccinations

**Testing**
- cholesterol checks
- blood sugar tests
- diabetes tests

**Disposal**
- disposal of sharps/needles
- complete travel health advice
- gluten free food service
- incontinence service
- supervised consumption service
Figure 2 What pharmacies are doing well

Feedback from pharmacy users

What pharmacies are doing well

Brilliant service and staff, can't fault them
I've always been treated and given good advice when I've visited this pharmacy
No mistakes on ordering items

I have used this pharmacy for years and the service is always excellent and quick

I don't think it needs improving

Very friendly staff
Comfort and convenience of waiting area

No complaint - excellent service

Friendly counter staff, excellent service

Perfect - no other words I can say

Good pharmacy, lovely people
They always help me more than my own GP

Keep up the good work
Even if busy, staff are always there for help and advice

They all do a great job
Figure 3 How pharmacies could improve

Feedback from pharmacy users

How pharmacies could improve

- Having in stock the medicines/appliances patients need
- Weight management
- Minor Ailment Scheme
- Pregnancy testing
- ORAL CONTRACEPTION SERVICE
  - More seating
  - Reduce waiting times
  - Have somewhere available where you can speak without being overheard
  - Chlamydia testing
  - Time for prescription ordering from surgeries to be reduced
  - Offer stop smoking service
- Advice on leading a healthy lifestyle
  - More vaccinations
  - Remind patients when medicine is ready for collection
5.5 Residents Survey

The Resident Survey was held during the formal consultation process that was conducted between 25th October 2017 and 5th January 2018. The design of the resident survey was approved by the PNA steering group and made available in accessible formats to optimise responses from those people living in Barking and Dagenham with protected characteristics that were related to ability to read and complete surveys. Survey Monkey was used to collect responses. Details about the resident survey results are described below. The Survey Monkey questionnaires are provided in Figure 18 and Figure 19 respectively. Figure 20 shows the easy read version of the resident survey.

The analyses of the residents’ survey results are shown in Appendix C. Overall 51 residents completed the survey. Just over 80% were white British and 70% were female, the age range was well represented between 25 years and 65+. Just over 70% were heterosexual. Just over 30% stated they had a disability of these respondents with a disability, nearly 80% had a physical disability just over 30% had a sensory impairment 15% had learning disabilities and 8% preferred not to say. About 48% were Christian a few were Hindu and Muslim and 40% said they had no religion.

They show that the majority of respondents are satisfied with: pharmacy opening hours and availability of a private space the pharmacist: medicines reviews; less than half of the respondents considered pharmacists promoted a healthy lifestyle or signposted them to other services.

When asked what pharmacies in the borough could do better over 60% requested longer opening hours around 30% wanted more information about the medication and other health information around 20% of private room discussion the pharmacist to be more accessible.

The written comments about how pharmacies could improve the services in Barking & Dagenham are very similar to those in figure 15 which is an infogram developed from patients’ comments.