

Pharmacy services in Coventry: what is important to local people

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Summary Report

About this piece of work

Healthwatch is the champion for users of health and social care in Coventry. We work to ensure that patient, service user, carer and public views and experiences are heard.

Concerns raised by patients about primary care services and context around seeking to find solutions for how primary care service could better deliver for the local population and meet demand led the Healthwatch Steering Group to add this piece of work to the 2016-17 Healthwatch Coventry work programme. Our aims were to:

- Understand how and why people use local pharmacy
- Consider what makes good quality pharmacy services
- Enable the views of local people to influence the way forward for pharmacy services in Coventry including ideas for how pharmacy can further support GP services

Method and response

We used a self completion survey, guided interview survey and discussion and focus groups to gather the views of a total of 703 local people between October 2016 and February 2017.

The survey was distributed widely by local pharmacies and through the extended Healthwatch networks of organisation contacts including many voluntary sector organisations.

We received 610 survey responses and held 5 focus and discussion groups with a total of 93 participants.

57.9 % of the survey sample were female and 50% of respondents were aged 65 or over. We expected that older age groups would be reflected more as frequent users of pharmacies are more likely to be older and have long term health conditions

76% of the respondents to this survey were White British; 5% were Indian and 4 % were Black African or Caribbean. At least 85 of our focus group participants were from Asian or other BME communities.

63% of respondents said they had a long term health condition and 20% considered themselves to be disabled.

A high proportion of survey respondents used a local pharmacy either more than once a month or every month.

Key findings

A) Choosing a pharmacy to use

- 85% of respondents replied that they tend to use the same local pharmacy all the time.
- Respondents valued the local nature of pharmacy services with two of the three top reasons for choosing to use a particular pharmacy linked locally in relationship to home or GP practice.
- The most common reasons for using a pharmacy were for repeat prescription and one off prescription, followed by advice about medication.
- There was some confusion about methods of re-ordering repeat prescriptions and the greatest proportion of respondents used electronic prescriptions.

B) Finding out about pharmacy services:

- We found that 16-44 year olds were more likely to search the Internet for information on NHS pharmacy services and those aged over 44 were more likely to go to their usual pharmacy for information. White British people were more likely to go to their usual pharmacy for information on services.
- We found it difficult to find comprehensive and up to date online information about which pharmacies provide which additional NHS services in a usable format, although some information for specific services such as blood tests (Phlebotomy) had recently been updated and had a user friendly interface.

C) Quality of services:

- Survey respondents identified factors linked to efficient and effective dispensing as the most important. Availability of the pharmacist to give advice and to talk to patients were the next most important factors; followed by services being available without an appointment.
- Confidential space and opening in evenings and weekends were viewed as less important. This may be because of the age range of our sample, as 50% were aged over 65 and therefore more likely to be available during the working day to go to a pharmacy.

- Those aged under 65 rated the importance of weekend and evening open hours higher (with for example 65% of those aged 35 - 44 rating this as very important, compared with the survey overall total of 34%). People from other ethnic groups valued pharmacies being open at evenings and weekends more than White British and White Irish people in the survey sample.
- 50% of respondents thought it was very important that staff knew them. Survey respondents aged over 45 thought it was more important that pharmacy staff knew them. Asian Indian respondents valued staff knowing them slightly more than the total for the survey overall.
- Relationship or familiarity with customers/patients was mentioned 44 times as a quality factor in the survey and was seen as a very important factor by participants in our discussion and focus groups. BME focus group participants indicated that their relationship with their pharmacist meant they were more likely to use their local pharmacy than try to see their GP.
- The factors most frequently mentioned as markers of quality service related to the interpersonal skills of staff and pharmacists (friendly, helpful and approachable staff), plus confidence in their abilities by their being knowledgeable.
- Focus/discussion group conversations identified similar quality factors to the survey, providing more detail about people's thinking regarding this. Areas identified included:
 - good communication;
 - efficiency (especially related to dispensing services);
 - flexibility (to help);
 - relationship (with customers);
 - local location;
 - effective communication - speaking community languages
 - accessibility (physical and opening hours)
- The pharmacist or staff being able to give advice and answer questions and provide information was also seen as important. There was a linked point about staff being available/having time to do this.

D) Information regarding medication:

- Of the 466 respondents who said they had an ongoing repeat prescription a high number were confident they knew what their medication was for and how to take it. Fewer said they were aware of potential side effects and the least said they understood how different medication they took affected each other

- 220 respondents said they had been prescribed new medication within the previous 6 months, and of these 88 said they had received enough information about their new medication and 23 said they had not. The remainder did not answer this question.

E) Prescription Ordering Direct (POD):

- The majority of users of POD reported that they got their medication in time and correctly, 5 people reported issues
- Issues highlighted through comments related to opening hours; information provision in and suitability for those with hearing and/or memory impairment

E) Developing pharmacy role:

- The 81.4 % of respondents thought more healthy lifestyle and health and wellbeing advice would be 'very useful' or 'useful'.
- 58.6% of people said that they would be prepared to use pharmacy more.

Conclusions

Our survey findings provide insight into how a sample of 703 people who largely use pharmacy services frequently use services and their views on quality factors.

Within the comments made there was much praise for and value placed on local pharmacy.

It was striking that 85% said they used the same pharmacy all the time. The local nature of pharmacies was very important and reflected in decision making about which pharmacy to use with respondents displaying local loyalties.

Relationships with a pharmacy, the pharmacist and staff were important for a significant number of people, and more so the older people were. Mental health service users and older BME people in our focus groups valued this element of relationship highly.

However people also valued quick and timely services; younger people valued long opening hours, and access without needing an appointment was a high priority for many. We received 18 specific comments about a need for longer opening hours in pharmacy. Therefore, there is a tension between a more personal service and the level of access that people want.

Quality factors identified focused on the customer service and interpersonal skills of staff, with friendly, helpful staff being seen as very important. Providing advice

and answering questions was also important to people, along with staff having time to do this.

There was both confusion about methods and direct calls for better information to help people to understand the different methods for repeat prescription ordering.

There is more work to do to support patients' understanding of medication side effects and medication interactions.

We received mixed feedback regarding the Prescription Ordering Direct service (POD) showing that respondents said they were largely getting their medication on time and correctly and providing positive comments about efficiency and convenience, medication review reminders and effectiveness. However, there were negative comments regarding issues with the POD opening hours not being long enough or convenient; the suitability of the service for some patients (those with memory issues and hearing issues); lack of personal choice and expectations about timing. Therefore, there are clear issues for the managers of POD to look into and address.

A significant issue is that people are not necessarily aware of all the services that are already available via different pharmacies. It was clear from our sample that repeat dispensing was the main service being used at pharmacies and there was some confusion about the other services which were already available with people listing them as things they would like pharmacies to provide, for example talking to discussion/focus group participants highlighted that some were not aware of Blood Taking (Phlebotomy) services at local pharmacies, even though these services have been provided in this way for a considerable number of years. This was likely to be because this was not provided at the pharmacy they used.

Therefore, current methods of communication and information provision are not especially effective. We found that people relied a lot on getting information about pharmacy services from the pharmacy they used regularly and this could be an issue in terms of effective information provision; will pharmacies that do not provide specific services have up to date information about where that service can be found and will this information be passed on to the customer/patient?

Information from GP practices also featured highly and GP practices could do a lot to direct people to appropriate services but we wonder about the quality and of information available about pharmacy services and if knowledge extends beyond the pharmacies in the very local area.

It can be difficult to find online information about the services which are available in some pharmacies and that this is not necessarily geared towards a public audience. There is no one portal to find out what services are provided where and some information was not in the public domain in a collated way.

The paper survey identified a willingness in 58% of respondents to consider using their pharmacy rather than their GP. Some people found it hard to consider what further development of the role of community pharmacies might involve and this seemed to be because their understanding of pharmacy was based on dispensing

services and the retail element. This was exhibited in some of our focus group discussions and in answers to our paper survey. Our focus group with older BME women identified evidence of people from this group using pharmacy rather than seeking to visit their GP.

Therefore there is scope to continue to develop the role of pharmacy into a broader role to support the health and wellbeing of local people. However this needs to be done and promoted in a way which is understandable to the public and in a joined up way. The current individual funding arrangements for various schemes to develop pharmacy services is in danger of leading to a fragmented approach to provision and a local strategy is needed.

Recommendations

Healthwatch Coventry makes the following recommendations for the development of pharmacy services:

1. Public Health Coventry and Coventry and Rugby CCG to work together (and link with the Local Pharmaceutical Committee) to develop an action plan for the promotion of pharmacy services; this should include
 - better online information including exploring options for an information portal website (here existing examples of the Family Information Services Directory¹ and Coventry and Warwickshire Living Well with Dementia portal provide useful learning about web portals)
 - better signposting information ensuring lists of pharmacies and their different services are available in GP surgeries, in pharmacies and in other places where people are/go (not just NHS settings)
 - developing Easy Read information as per the NHS Information Standard
2. Commissioners of pharmacy services, the Local Pharmaceutical Committee, Public Health Coventry to consider how soft patient/customer relationship quality factors can be promoted and further supported within local pharmacy including considering a quality award/mark scheme or a sign up to quality charter scheme.
3. Local pharmacies to ensure that patients/service users receive full and accurate information about electronic prescriptions and other methods of organising repeat prescriptions to ensure patients are able to make choices about the method they wish to use
4. The Coventry and Warwickshire Sustainability and Transformation Plan Board to consider the findings of this report and ensure that pharmacy features strongly within an STP work stream regarding primary care and that this work stream is developed as a priority.

¹ <https://cid.coventry.gov.uk/kb5/coventry/directory/family.page?familychannel=0>

5. The Coventry and Warwickshire STP Board should ensure that pharmacy is seen as a key enabler within 'out of hospital' and 'proactive and preventative' work programmes capitalising on the range of services and willingness of 58% of service users in our survey to use pharmacy more.
6. Public Health Coventry to ensure that the findings of this piece of work are used in conjunction with the pharmaceutical needs assessment as a basis for future planning around pharmacy provision/locations - especially important is the value placed on local services by pharmacy users.
7. The management of POD at CRCCG to ensure that issues highlighted in section 5.2.7 are addressed:
 - Opening hours for phone calls to POD
 - Information provision to users of the service and those who become users of the service in the future
 - Ensuring that both current and future users of POD who have hearing impairment/issues and/or memory issues are able to use an alternative means of re-ordering medication via their pharmacy or GP practice as POD is not appropriate for them
8. The implementation of the 'Healthy Living Pharmacies' initiative by individual local pharmacies should be enabled and have the full support of Public Health Coventry, the Local Pharmacy Committee and primary care commissioners.
9. Coventry Health and Wellbeing Board to ensure pharmacy services are reflected in the local Health and Wellbeing Strategy, commissioning intentions and NHS Sustainability and Transformation Plans.

Responses

The responses we have received to our recommendations can be found on page 50.

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Full Report



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1. Introduction

Healthwatch is the champion for users of health and social care in Coventry. We give local people a voice - making sure that patient, service user, carer and public views and experiences are heard.

We are independent of NHS and care services and decide our own programme of work. We have a statutory role and legal powers including the right to request information and to get a response to our reports and recommendations.

We work to influence the planning and delivery of NHS and social care services based on what local people tell us.

2. Why we undertook this work

Primary care is a very important element of NHS services and is frequently the subject of national policy initiatives because of their central function in the health system. However, often the focus is on GP services rather than the broader range of services including pharmacy.

Between 2014 and 2015 Healthwatch Coventry sat on a primary care subgroup of the Coventry Health and Wellbeing Board, which scoped many of the issues regarding GP services locally. In April 2016 this group was re-formed into a primary care strategy group led by Coventry and Rugby Clinical Commissioning Group (CRCCG) with the role of supporting implementation of the CRCCG Primary Care Strategy. The role of and potential future role of community pharmacy was highlighted through this group.

Also in 2015/16 the Department of Health held a consultation on the future funding and role of local pharmacy, which led to changes/cuts to the funding available and pilots around involving pharmacists more within GP services.

In July 2015 at the Healthwatch Coventry annual meeting a group discussion exercise about local pharmacy produced positive and negative feedback and highlighted a lack of awareness of what services are available from local pharmacies.

In 2015 Coventry and Rugby CCG created the Prescription Ordering Direct service. Local GP practices signed up to this and then their patients used this phone service to re-order medication. Healthwatch Coventry received a number of comments and concerns from patients about how this service operated. Concerns were also being raised by local pharmacists.

The concerns raised by patients and the context around seeking to find solutions for how primary care service could better deliver for the local population and

meet demand led the Healthwatch Steering Group to add this piece of work to the 2016-17 Healthwatch Coventry work programme.

Healthwatch Coventry undertook to gather qualitative information about what is important to local people, when they are using pharmacy services and what local people would like to be available through pharmacies in the future.

3. Aims

Our aims in undertaking this work were to:

- Understand how and why people use local pharmacy
- Consider what makes good quality pharmacy services
- Enable the views of local people to influence the way forward for pharmacy services in Coventry including ideas for how pharmacy can further support GP services

4. Methodology

Healthwatch Coventry undertakes qualitative research to gather evidence about what local people think and want from local services.

We used a self completion survey, guided interview survey and discussion/focus groups.

4.1 Preliminary visit to four pharmacies

The Local Pharmaceutical Network brokered four Healthwatch visits to different local pharmacies so that we could better understand how pharmacies run and the issues for pharmacists and staff. Visits were undertaken between 19 -25 August 2016 by Healthwatch staff and volunteers, to:

1. Bannerbrook Pharmacy, Tile Hill
2. Boots Pharmacy - The Precinct, City Centre - a large pharmacy service
3. Styvechale Pharmacy, Styvechale
4. Dhaliwal Pharmacy, Foleshill - was the smallest of the 4 pharmacies. It is part of the M W Phillips group which has 8 branches in Coventry (and 40 in the country)

The purpose of these visits was to better understand the different services on offer and to talk to pharmacists and staff about how they work and any issues that they have identified.

4.2 Paper and electronic survey

A self completion survey was developed following our fact finding visits to local pharmacy and after reviewing the survey used as part of the most recent Local Pharmaceutical Needs Assessment as we wanted to ensure our focus was different. The local Pharmaceutical Committee also proved input into the questions used.

The survey was available both as a paper survey with Freepost return envelope and online via Survey Monkey. The survey was open between 31 October 2016 and 12 January 2017 to allow enough time for the survey to be distributed to the majority of the 91 local pharmacies and to be distributed widely via other means to local people.

We worked with the Local Pharmaceutical Committee to get support for local pharmacies in Coventry to give out copies of the paper survey to their patients/customers. Healthwatch delivered supplies of the paper survey to 82 local pharmacies along with supporting information about the project. This personal contact also enabled us to further explain the piece of work.

The paper survey was also distributed by Healthwatch contacts/networks such as:

- A link worker with the Romany Community based at Coventry Law Centre
- Via libraries at Rhyme time - surveys were given to Central Library to distribute to all libraries via the internal library post along with an explanation about the project. The Libraries, Advice, and Health Information Development Officer made contact with individual libraries to remind them about the surveys.
- To parents of pupils at Baginton Fields School (Maintained Broad Spectrum Special School for Secondary aged students) all received a paper survey
- The Highlife Centre(providing advice and support to African communities) distributed surveys
- Via Age UK Coventry's Information and Advice South Asian Services
- Centre users and groups meeting at the St Peters Hillfields including CEMAP group meetings, Exercise Group, Kairos, Outreach GP service, Diabetes group
- Over 300 paper surveys distributed at Walk in Centre every Wednesday whilst the survey was open,
- The Coventry Carers Centre
- Bangladeshi Women's Group
- Alzheimer's Society
- Law centre reception
- Mencap
- Stroke Association
- Osteoporosis Society

In total 3500 paper surveys were distributed and we had a high response rate of 14.4%.

The Survey Monkey survey was promoted widely through the Healthwatch network and by a range of other organisations through newsletters and other communication channels eg:

- Via Healthwatch Voluntary Sector members and community connectors
- To employees at Coventry City council
- Via the four voluntary organisations delivering Healthwatch Coventry services for the Here2Help Voluntary Sector Consortium
- Coventry Older Voices
- Through the Healthwatch Coventry Contact Points at the City of Coventry Health Centre
- City College, Tile Hill Wood School and Cardinal Wiseman School
- Via the Coventry Women's Voices network
- AGE UK Coventry website
- Resource Centre for the Blind - a framework for supporting people to use the online survey was developed to help people to complete the online survey

4.3 Guided survey

A guided interview version of the survey was developed to enable Healthwatch volunteers to have conversations with people who would find it difficult to fill in a self completion survey.

The questions on this survey were slightly different to those on the self completion survey.

- 13 surveys were carried out with service users at Gilbert Richards Day Centre during sessions on 3, 5 and 6 January by Healthwatch volunteers
- 3 separate Cook and Eat Well Group Sessions were attended by volunteers to undertake guided surveys:
 1. Koco Community Centre 13 December
 2. Groundwork West Midlands 7 December
 3. Cherubs Play group, Meredith Road Baptist Church 7 December

The question used in our survey can be found at appendix 1.

4.4 Focus groups/discussion at groups

We organised discussion /focus groups in order to provide balance to our sample as we recognised that the majority of the paper surveys would be given to those who regularly use local pharmacy meaning that an older age cohort was likely.

The self completion nature of the survey would also prevent those with little written English from taking part.

5 were held involving 93 people:

- December 2016 - we attended an existing group of older BME women in Foleshill and held discussion sessions and gave out questionnaires. 40 BME women aged 55+ who had a range of physical health issues took part.
- January 2017 - focus group with 10 BME Younger women in Hillfields who mostly visited pharmacies as they had young children. Mixed group of different backgrounds recruited via CEMAP i.e. Nigerian, Somalian, Ugandan.
- January 2017 - discussion at an existing carers group of 35 women meeting at Saint Peters Centre; all from Asian community aged 50+.
- February 2017 - focus group at mental health service user group, 6 people involved in Coventry AIMHS.
- Parents of disabled young people a focus group was held and 2 parents of children and Baginton Fields School attended.

The focus group prompts can be found at appendix 2

5. Findings

5.1 Details of respondents

5.1.1 Sample

In total 610 survey responses were received:

- 504 paper surveys
- 81 Survey Monkey responses
- 25 Guided surveys

93 people took part in our discussions and focus group sessions.

5.1.2 Gender and age of respondents

57.9 % of the survey sample were female, 33% male and 9% did not answer this question. One respondent said they were transgender.

50% of respondents were aged 65 or over.

Therefore, the sample is skewed towards women and older age groups. We expected that older age groups would be reflected more due to the survey distribution method, with a lot of surveys being given out via pharmacies. Frequent users of pharmacies are more likely to be older and have long term health conditions.

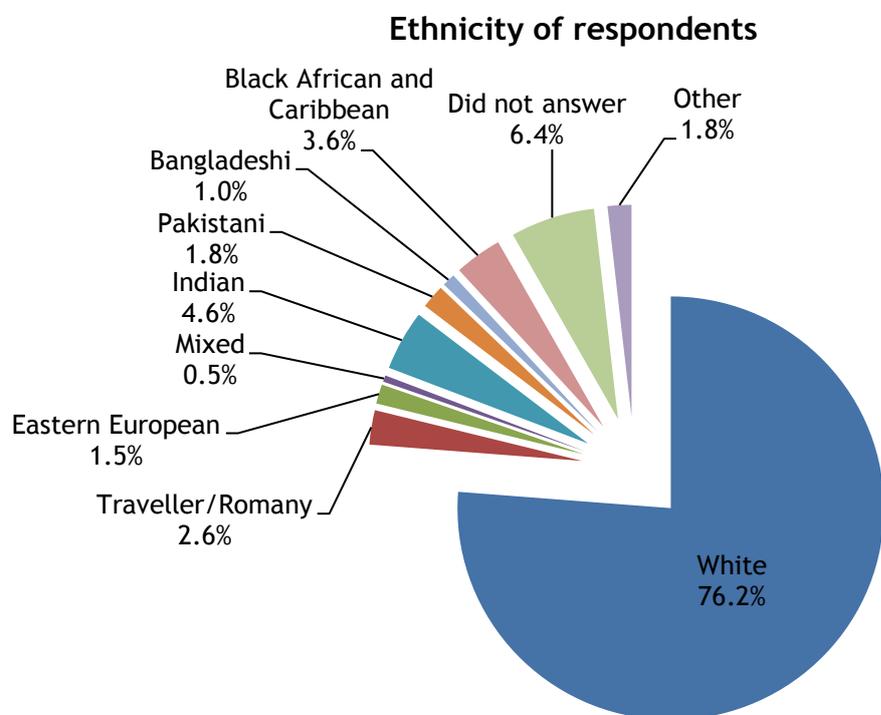
Table(i) age groups of respondents

Age	Count	%
Under 16	3	0.5%
16-24	24	3.9%
25-34	31	5.1%
35-44	37	6.1%
45-54	68	11.1%
55-64	107	17.5%
65+	305	50.0%
Did not answer	35	5.7%
Total	610	100%²

² NB percentages given may not add up to 100% due to rounding

5.1.3 Ethnicity of respondents

76% of the respondents to this survey were White British; 5% were Indian and 4 % were Black African or Caribbean. At least 85 of our focus group participants were from Asian or other BME communities.



5.1.4 Long term conditions and disability

We asked if people had a long term health condition and/or considered themselves to be disabled. 382, 63% of respondents said they had a long term health condition and 123, 20% considered themselves to be disabled.

Table (ii) No. of respondents considering themselves disabled

Disability	Total	%
Yes	123	20%
No	422	69%
Did Not answer	65	11%
TOTAL	610	100%

Table (iii) No. of respondents with a long term health condition

Long term health condition	Total	%
Yes	382	63%
No	159	26%
Did Not answer	69	11%
TOTAL	610	100%

5.2 Survey findings

5.2.1 Which pharmacies people used and why

A) Choosing which pharmacy to use

Respondents were asked to select options for why they chose to use their regular pharmacy. They could select more than one option and there was also space for respondents to add other reasons.

The 3 top reasons given were that a pharmacy was: close to their home; or close to their GP practice; and had a good level of customer service. Convenient opening hours were also considered important.

Considerations about the NHS services provided were lower down the ranking of reasons given.

As 50% of our sample was aged over 65 this may account for the lower ranking for a pharmacy being close to places of work.

We looked at the results for this question by ethnicity and whilst there was a slightly higher preference for speaking a particular language there was no statistical significance or identifiable variation in why people selected a pharmacy to use.

18 of White British and 6 white Irish respondents felt that staff speaking a particular language was important to them, the reason for this is unclear, although there were one or two comments about a need for pharmacists to speak English.

Other reasons for selecting a pharmacy included comments about the quality of staff, availability of medication delivery services to home, and praise for the overall quality of service at a pharmacy.

Table (iv) reasons for using a pharmacy

Reasons selected	Count	% of total number of preferences	Rank of importance
It is close to where I live	1292	21.0%	1
Good level of customer service	1064	17.3%	2
It is close to my GP practice	906	14.8%	3
Opening hours are convenient	705	11.5%	4
Good access by car	589	9.6%	5
It is near to where I shop	474	7.7%	6
Specific services provided	447	7.3%	7
Good access by bus	355	5.8%	8
It is close to where I work	119	1.9%	9
Staff speak a particular language	118	1.9%	10
Other (please say)	56	1.1%	11
	6125	100.0% ³	

³ NB percentages given may not add up to 100% due to rounding

We gave respondents the opportunity to give other reasons why they chose to use this pharmacy and the answers given fall into the following categories:

Table (v) other reasons given

Reason	Count
Praise for staff	10
Prescription collection and delivery	6
Praise for quality of service	5
Blood test	3
Always used	3
Other	3
Known at pharmacy	2
Diabetic care	1
Near to relative	1
TOTAL	34

B) Frequency of use

We gathered information about how often people used local pharmacies through the paper and survey monkey survey, and found that for our survey sample, a high proportion used a local pharmacy either more than once a month or every month. This fits with the data we collected about the number of respondents who receive repeat prescriptions for medication, which usually follow a 28 day cycle for ordering and collection/delivery.

Table (vi): frequency of pharmacy use

How often	Count total	%
More than one a month	239	41%
Once a month	208	36%
Every 2-3 months	57	10%
Every 4-6 months	31	5%
Less often than any of these	24	4%
Not sure	14	2%
Did not answer	12	2%
Total	585	100%

Information was gathered differently through the guided survey, however it is possible to see that the majority of these respondents had a high level of use of pharmacy and other NHS services.

c) Do you tend to use the same pharmacy all the time?

85% of respondents replied that they tend to use the same local pharmacy all the time; 15% said they used other pharmacies. A list of the pharmacies respondents said they used can be found at appendix 3. Our survey reached users of almost all pharmacies in Coventry.

Reasons given for using different pharmacies or more than one pharmacy included:

Table (vii): reasons for using other pharmacies

Reason	No.
For blood testing service (Phlebotomy)	7
Near where I live	7
Convenience	5
Use if medication not in stock	4
Has longer opening hours	4
Use when shopping	4
Use for repeat prescription	4
Near my GP	3
Near where I work	2
Range of choice	2
Good service/efficient	2
Always used	1
Flu Jabs	1

D) Why did you visit pharmacy today or the last time you visited one?

The most common reasons for using a pharmacy were for repeat prescription and one off prescription, followed by advice about medication.

Table (vii) purpose of pharmacy visit

Reason	Count	% of number of reasons given	Rank
Repeat prescription	479	57.8%	1
One off prescription	107	12.9%	2
For advice about medication	97	11.7%	3
For advice about a health matter	52	6.3%	4
Blood taking	41	4.9%	5
For a free flu vaccination	23	2.8%	6
For information about other NHS services	13	1.6%	7
Free NHS help with stopping smoking	9	1.1%	8
Other (please say)	8	1.0%	9
Total number of options picked	829	100.0%	

Other reasons given by respondents were: to buy over the counter items; 2 said for flu jab, to collect an up to date list of my medication and Chronic obstructive pulmonary disease (COPD) advice.

5.2.2 Quality factors

We asked respondents to say what was important to them when using a local pharmacy in order to begin to understand what practical, service and quality factors influence decisions about which pharmacies to use.

The results show the factors linked to efficient and effective dispensing were considered the most important. Availability of the pharmacist to give advice and to talk to patients were the next most important factors; followed by services being

available without an appointment. 50% of respondents thought it was very important that staff knew them.

Confidential space and opening in evenings and weekends were viewed as less important. This may be because of the age range of our sample, as 50% were aged over 65 and therefore more likely to be available during the working day to go to a pharmacy.

Table (viii) Ranking of factors important to respondents

	Very important	Fairly important	Not very important	Not important	Did not answer	Rank of positive answers
Prescription is dispensed quickly	67%	27%	1%	0%	4%	1
Good stock levels of medication	74%	17%	1%	5%	16%	2
The pharmacist is available for questions/advice	65%	25%	4%	0%	6%	3
Pharmacy staff have time to talk to you	54%	28%	9%	2%	7%	4
Services are available without an appointment	45%	30%	11%	4%	11%	5
Pharmacy staff know who you are	50%	23%	16%	5%	6%	6
Confidential space	48%	24%	14%	4%	11%	7
Open in evenings and weekends	34%	28%	17%	5%	16%	8

Through the guided survey we probed further by asking the question *What else is important to you for good quality pharmacy service*. Respondents' answers showed they valued:

- Being able to talk to staff (5)
- Delivery services (4)
- Friendly staff (2)
- Blood tests and fu jabs available (1)
- Postal service (1)
- Prescriptions ready in timely way (1)
- Consultation available at any time (1)
- Regular medication checks (1)

We analysed the findings by ethnicity and age group in order to see if views on quality factors varied and found that:

- Those aged under 65 rated the importance of weekend and evening open hours higher (with for example 65% of those aged 35 - 44 rating this as very important, compared with the survey overall total of 34%)

- People from other ethnic groups valued pharmacies being open at evenings and weekends more than White British and White Irish people in the sample.
- Asian Indian respondents valued staff knowing them slightly more than the total for the survey overall (63% saying very important). White Irish respondents also saw this as more important
- Those aged over 45 thought it was more important that pharmacy staff knew them
- 25-34 and 45-54 year olds, and Asian respondents thought that confidential space was more important.

5.2.3 Lifestyle role

We wanted to understand if local people saw and valued a role for pharmacists in helping people to adopt healthy lifestyles.

We asked how useful it would be if pharmacies in Coventry gave more healthy lifestyle and health and wellbeing advice e.g. about diet, exercise etc. The 81.4 % of respondents thought this would be ‘very useful’ or ‘useful’.

Table(ix) Usefulness of healthy lifestyle and health and wellbeing services

Rating	Count	% of total count
Very useful	230	38.7%
Useful	254	42.7%
Not useful	76	12.8%
Not useful at all	14	2.4%
Did not answer	21	3.5%
TOTAL	595	100.0%⁴

5.2.4 Could pharmacies do more?

We wanted to understand the appetite for using pharmacies more rather than going to GP services and therefore asked: *If you could get more NHS services at a pharmacy rather than going to a GP practice, would you prefer this?* 58.6% of people said that they would be prepared to use pharmacy more.

Table (x): prepared to use pharmacy more instead of GP?

	Total	%
Yes	343	58.6%
No	201	34.4%
Don't know	15	2.6%
Did not answer	26	4.4%
TOTAL	585	100.0%

We consulted with the Local Pharmaceutical Committee to present a number of additional options for what local pharmacies might provide; this was difficult to do as some pharmacies are already piloting extra services and it was difficult to

⁴ NB percentages given may not add up to 100% due to rounding

explain the nuances of how this range of services varied from what people already received.

We used the following options:

- Minor illness and minor injury advice, support and treatment (e.g. dressings/stitches)
- More support for long term conditions etc
- Clinical annual medication reviews
- Blood tests such as Warfarin dosing checks
- Other vaccinations

Respondents could select as many as they wished.

Table (xi): Kinds of extra services you would like pharmacies to provide

Service type	Count	% of total count	Rank
Minor illness and minor injury advice, support and treatment (e.g. dressings/stitches)	255	23.7%	1
More support for long term conditions e.g. diabetes, asthma, blood pressure	240	22.3%	2
Blood tests such as Warfarin dosing checks	200	18.6%	3
Clinical annual Medication Reviews	191	17.8%	4
Other vaccinations	160	14.9%	5
Did not answer	22	2.0%	6
Other (please say)	8	0.7%	7
TOTAL OF COUNT	1076	100.0%	

There was an issue with this question in the Survey Monkey survey, meaning that respondents' could not select multiple options, but only one. Therefore, this data has been excluded.

Other suggestions collected included:

- Holiday vaccinations
- Prescribing
- Support for osteoporosis
- Cholesterol testing
- General health reviews
- Help for depression
- Support for diabetes and blood pressure

Suggestions also included a number of services already provided by pharmacies, indicating that participants did not know that these services were available:

- Blood taking
- Flu vaccine

- Be able to check on drug interactions and side effects
- Advice on side effects of prescribed medication, how to take them, what to do if any queries about medication

5.2.5 Finding out about NHS services that pharmacies provide

From our preliminary research we were struck by the number of NHS services which may be available at individual pharmacies. Whilst all pharmacies provide a core range of NHS services, some provide more services under national programmes and some provide locally specific programmes/services which are commissioned (paid for) by local organisations.

We wondered how members of the public identified which pharmacies did what and where they looked for information about the services available from local pharmacies.

We asked how respondents found out or would find out about the services on offer from local pharmacies. Respondents could provide more than one answer. The most common methods used were to go to their usual pharmacy (39.5% of respondents) to ask about services or to seek information from their GP practice (18.4 % of respondents). There was low use of the NHS Choices website.

We found that 16-44 year olds were more likely to search the Internet for information on pharmacy services and those aged over 44 were more likely to go to their usual pharmacy for information. White British people were more likely to go to their usual pharmacy for information on services.

In preparation for the survey Healthwatch staff looked for information about which pharmacies in Coventry provided what services using the Internet. They found it hard to obtain comprehensive information or to be assured that lists found were up to date.

We found a list of pharmacies providing Blood Taking services but this was dated a few years ago it was unclear if it was up to date. In February 2017 information about blood taking services was updated and an interactive map was added to this page of Coventry and Rugby Clinical Commissioning Group's website⁵. This is a positive step and shows what can be done to make information user friendly.

Healthwatch tried to make contact with NHS England, the Public Health Team at Coventry City Council and Coventry and Rugby Clinical Commissioning Group (which has a medicines management team and runs Prescription Ordering Direct to obtain up to date information about which pharmacies provide what services. This proved difficult and we did not obtain list of pharmacies providing some of the services eg New Medicines Review Service.

We also searched the Internet to look for information. Whilst many pharmacies or pharmacy groups have their own websites it is not workable to look at individual

⁵ <http://www.uhcw.nhs.uk/for-patients-and-visitors/blood-tests-x-rays> Accessed 16/3/17

pharmacy websites in order to find the locations of different services in Coventry, and members of the public are unlikely to do this. Therefore, collated information on web portals is very important.

Information about sexual health services provided via pharmacies, funded by Public Health in Coventry, can be found on the Coventry City council website. However, we experienced some issues when looking for this information.

We searched using a search engine using different terms and found two separate pages listing details of pharmacies providing services. These pages were not linked together and presented the information in different ways⁶.

The Sexual Health services page provided links to lists of 'ASC' Pharmacies (those that provide emergency hormonal contraception) and a link to a list of 38 pharmacies. Here there was some out of date information about emergency contraception pharmacies - a list of for Christmas New Year 2016-17. There was also information about 9 pharmacies which do HIV testing listed. Links to www.besavvy.org.uk/service-providers/c-card were broken meaning the map and location information is not available.

Comments from respondents about finding information:

- *I tend to go to Boots because they come up on Google. I'm sure there are others around, I just don't ever find out about them. Get a good Google presence.*
- *Contraceptive advice could be improved by being delivered at more pharmacies...council information on this is outdated*
- *There is not enough information about*
- *There should be video screening pharmacy windows giving key information about pharmacy services and where to find specific services*

Table (xii): method of finding out about NHS pharmacy services

	Count	%	Rank
Go to my usual pharmacy	390	39.5%	1
Information from GP practice	182	18.4%	2
Search the Internet	121	12.3%	3
Go to any pharmacy	100	10.1%	4
From friends/family	80	8.1%	5
The NHS Choices website	65	6.6%	6
Did not answer	26	2.6%	7
Other	17	1.7%	8
Don't Know	6	0.6%	9
TOTAL	987	100.0%	

⁶ Search term 'public health' found page:
http://www.coventry.gov.uk/directory/63/health_and_wellbeing_services

Search term 'sexual health services Coventry' found:
http://www.coventry.gov.uk/info/171/sexual_health/1785/sexual_health/3

Other distinct options provided by respondents were:

- Sometimes leaflets through the post
- Phone pharmacies and ask
- By chance
- Information on their windows
- I have family who are health care professionals

5.2.6 Repeat prescription services

A) Number receiving repeat medication

We gathered views and feedback on this service in recognition of the volume of this work that local pharmacies do and that for many people this will be their main experience of using a pharmacy service.

Of our sample 76% of respondents had an ongoing repeat prescription:

Table (xiii) Do you have an ongoing repeat prescription for medication?

	count	%
Yes	466	76.4%
No	125	20.5%
Did not answer	19	3.1%
TOTAL	610	100.0%

To help verify responses to the questions about how well people understood their medication we asked how many medications those who said they had repeat prescriptions had on repeat prescription. The answers were interesting in terms of the amount of medication some people reported they took, with 20 people taking between 11 and 13 medications and 15 people took over 14 medications:

Table (xiv): How many medicines do you take?

Number	Count	% of Total
1-3	183	34.5%
4-6	159	30.0%
7-10	82	15.5%
11-13	20	3.8%
14-16	11	2.1%
17-19	1	0.2%
20 or more	2	0.4%
Did not answer	58	10.9%
Other response	14	2.6%
TOTAL	530	100.0%

Other answers given: 6+; 15+; *Quite a lot*; and *Several* (3).

B) Method of ordering repeat medication

The greatest proportion of people used electronic prescriptions, whereby there is no paper prescription script and the prescription goes electronically from GP to pharmacy.

Table (xv): How is medication ordered?

Method used	Total of those with repeat prescriptions	%	RANK
Electronic prescription	299	54.7%	1
Take in paper prescription to pharmacy myself	82	15.0%	2
Pharmacy collects paper prescription	82	15.0%	2
Phone Prescription Ordering Direct (POD)	62	11.3%	4
Other (please say)	20	3.7%	5
Don't know	2	0.4%	6
	547*	100.0% ⁷	

* 37 respondents described more than one method of ordering repeat medication. For example:

- Electronic prescription and pharmacy collects paper prescription
- Take in paper prescription to pharmacy myself and Electronic prescription
- Take in paper prescription to pharmacy myself and Pharmacy collects paper prescription
- Pharmacy collects paper prescription and Phone POD
- Electronic prescription and Phone POD

Whilst some of these combinations are possible for example using POD and electronic prescriptions, others seem to show some confusion. For example electronic prescription and take paper prescription to pharmacy myself - the electronic system means there is no paper prescription script produced to be taken to the pharmacy.

C) How informed do you feel about your medication?

Because pharmacists play an increasing role in helping people to understand their medication, including a local trial of new medication usage reviews, we asked people to rate how informed they felt about their repeat medication:

- What your medicine is for
- How to take it
- Any side effects for medication
- If or how medications affect each other

Of the 466 respondents who said they had an ongoing repeat prescriptions a high number were confident they knew what their medication was for and how to take

⁷ NB percentages given may not add up to 100% due to rounding

it. Fewer said they were aware of potential side effects and the least said they understood how different medication they took affected each other.

Table (xvi) confidence in knowledge of use of medication

	What your medicine is for	How to take it	Side effects of medication	How medications affect each other
Totally	72.6%	77.9%	44.8%	31.5%
Very much	21.1%	14.8%	26.9%	22.3%
Not very much	2.6%	0.7%	14.2%	24.2%
Not at all	0.4%	0.4%	7.1%	11.6%
Did not answer	3.4%	6.2%	7.1%	9.6%
N/A	0.0%	0.0%	0.0%	0.8%
TOTAL	100%	100%	100%	100% ⁸

As some pharmacies are taking part in a scheme to support and review new medication with patients we asked if people had been prescribed any new medication in the previous 6 months and if they had had enough information about this.

220 respondents said they had been prescribed new medication within the previous 6 months, and of these 88 said they had received enough information about their new medication and 23 said they had not. The remainder did not answer this question.

Comments about this were:

- *Yes from the GP, but the pharmacy would have given it*
- *Just told the new medication replaces the one I used to take*
- *If I have a query I only have to ask them*
- *My doctor is the only one that gives me new medication ... yes pharmacist can help with info*
- *Just from the enclosed leaflet. Eye drops say each eye 4 times a day NHS only give me a quarter of what I need*
- *From specialist nurse and doctor*
- *GP provided information*
- *It is easy to use, very friendly and helpful. Great to be able to email*
- *Told to take one tablet daily*

What information would be helpful?

- *Just clarification of what it does/or will do*
- *How important to watch for side effects & advise to see GP*
- *A quick note would have been useful*
- *If they interact with all my other medication*
- *Side effects*

⁸ NB percentages given may not add up to 100% due to rounding

- *That some drugs can make you ill rather than having to try and read answers or look on internet*
- *Hospital stay - changes to some medicines and stopping others*

5.2.7 Prescription Ordering Direct

In the paper/survey monkey survey we asked if respondents had used the Prescription Ordering Direct (POD) service to re-order their medication and 92 said they had used this service.

POD is a service run by Coventry and Rugby CCG for GP practices which sign up to the service. Patients from these practices can then phone POD to re-order their repeat medication rather than pharmacies doing this on patients' behalf or patients using other methods. GP Practices should continue to offer a choice of prescription re-ordering methods for patients.

51 of these identified their GP practice as being one of the 10 GP practice on the list of practices signed up to POD in Coventry, which Healthwatch had at the time the survey was devised, see table (xvii) below.

A further 25 respondents said they were registered with other GP practices, and used the POD service. It seems likely, therefore that some of these respondents were not in reality using the POD service, but were perhaps confusing this with other arrangements which are in place for ordering of repeat prescriptions by phone either via local pharmacies or some GP practices. This additional list of GP practices can be found in appendix 4.

Table(xvii): GP practice patients are registered with:

GP Practices signed up to POD	No. of survey respondents with these practices
Gosford Green Surgery	0
Jubilee Health Centre	7
Limbrick Wood Surgery	4
Mansfield Medical Centre	13
Priory Gate Surgery	6
Stoney Stanton Medical Centre	4
Walsgrave Health Centre	6
Willenhall Primary Care Centre 1	3
Willenhall Oak Medical Centre	3
Wood End Health Centre	5
TOTAL	51

We asked people who said they used POD to say if they received their repeat medication in a timely way i.e. before their previous medication had run out and if they got the correct items of medication.

The majority reported that they got their medication in time and correctly, 5 people reported issues; the results were:

Table (xviii) Medication ready before you ran out?

Response	Total	%
Yes always	63	68.5%
Yes mostly	24	26.1%
No not usually	4	4.3%
No never	0	0.0%
Did not answer	1	1.1%
TOTAL	92	100.0%

Table (xix) Received correct items of medication?

Response	Total	%
Yes always	67	72.8%
Yes mostly	17	18.5%
No not usually	1	1.1%
No never	0	0.0%
Did not answer	7	7.6%
TOTAL	92	100.0%

We asked for comments about what works well about POD and what does not work well and received the following comments which we have grouped into categories:

A) Positive comments

Efficiency and convenience:

- *Efficient - delivery on time*
- *Speed and Quality Service*
- *Saves time (x2)*
- *It enables the patient to order from home*
- *Saves a special trip to order prescription*
- *Easier and quicker less stressful*
- *Easy contact by phone, always accessible, reliable*
- *Very easy and quick service*
- *The speed and convenience*
- *Ring up a few days before needed and it is always ready to collect at pharmacy within two days*
- *Saves time in general and unnecessary trips to GP with chronic illness*
- *No need to visit GP*
- *It's convenient for me*
- *Easy to use*
- *Being able to order by phone*
- *Expediency*
- *I can order it before I run out. Staff are excellent.*
- *Saves going to see doctor every month and is usually ready when you get to chemist*
- *It saves time having to visit the GP just to renew a prescription; and more so, it allows our GPs more time to attend to other patients.*

- *POD service - saves contacting the GP which have busy phone lines taking up receptionists time*

Helps with medication reviews:

- *They normally tell me in advance if the order needs to be reviewed by the doctor*
- *Easy. One phone call and they remind me if I need to see the GP.*

Other:

- *Strange concept to start with but you get used to it. Better now they have extended their opening hours. Its fine as long as you remember to phone the POD in time*
- *Trouble free*
- *The phone conversation is clear - they are helpful*
- *Reliability*
- *Always ready on arrival, excellent service*
- *Everything works now that it is up and running. Very friendly telephone operators I can order early if going away etc.*
- *Only order medication I need that month so no waste or keeping extra medication*
- *They are very good, when you give your details they get it right.*
- *My experience is they get it right*
- *All good at this time*

B) Negative comments

Hours of operation:

- *Limited opening hours*
- *Opening times are short, could be longer*
- *The timing - It should open a bit longer as people who phone on behalf of patients are not always able to phone during the current opening hours*
- *Needs to be open for more hours throughout the day*
- *They need longer opening hours*
- *The phone is not always good, sometimes more than one phone call is needed to get through to the operator*
- *The long wait on the phone*
- *Do not like the way of ordering, can't always get through when I want to.*
- *It doesn't [work well] as you have to order at a specific time and frustrating that chemist is not able to do this for you*

Remembering to call:

- *Don't always remember to phone on time which puts my medication behind. I would prefer to be texted when its ready*
- *If you forgot to phone in time I don't know if they do an express service for the odd occasion you forget to order in time*

- *Chemist is unable to order for you. You have to remember to do it yourself. But difficult when memory is not so good*
- *Prefer to keep job in-house at GP Surgery. Was easier to have the chemist order items on time. I find it harder to remember when 28 day cycle of medication is up. Better when ordered monthly then can remember the same date*
- *Cost me money to phone up, only to be told I have phoned too early. Plus you have to remember to phone up. Boots free repeat service was a lot better*

Hearing issues:

- *Costs time on answer phone. No choice of service. Finding it hard for them to understand. I cannot hear what's being said. Have to rely on someone else to do the ordering. Can't see it saving the NHS money*
- *It now costs me to order prescription - lack of staff to answer the phone - cost more to NHS. No choice, I was told I had to use this service. No good for old people who are hard of hearing. An utter waste of time and money*
- *I don't think it works well for people with hearing problems or people with mental facilities which are a bit wobbly.*
- *Difficulty in hearing because of my hearing*

Transfer from previous means of re-ordering medication:

- *Prefer to order online and preferred the old system where just electronically sent to pharmacy. Remembering to phone is an issue.*
- *I had no choice about using POD. System changed without reference to me*
- *Just seems to be a middle man which is not necessary. Electronic working just as well from GP to pharmacy*
- *First time ordered whilst giving personal details, they cut the phone then had to go through them again. Waited 5 minutes on hold*
- *Don't like using this [POD]. Was happier when chemist ordered and picked up prescription*

Timeliness:

- *Some items can be sent direct but some items have to go on separate prescription and picked up from surgery*
- *48 hour delay before being able to collect*
- *Lengthy wait - sometimes 3 days, you have to plan ahead*
- *Occasionally computers fail and cause delay*
- *I got told off by one person because I was requesting repeat medications more than five days to the date I would run out of tablets but I was going on holiday and would have run out before I returned. She let me have the prescription when I explained but she did make me feel like I was a naughty school girl*
- *Cannot always get through straight away on the phone although don't find this very often and not too much of a problem.*

Other concerns/things that do not work well:

- *Fails when drugs are altered or if you take controlled drugs*
- *I tend to get a month of medication. I have to take thyroxin so a 6 month prescription would be better and reduce the need for additional resource. It is not like I will get better and I know I need to go to the doctor if I am not well.*
- *Sometimes they send the wrong medication*
- *When medication changed not always on repeat so have to check with GP practice to be added for repeat.*
- *It has only ever gone wrong once and that was the fault of the surgery*
- *Don't get items correctly*
- *Sometimes the surgery will have got the prescription wrong which means more phone calls. I have had medicines included that I do not take*
- *Sometimes they order the amount required by the patient but when it gets to the chemist it goes down. This has happened to my prescription but was ok for my husband*

7.2.8 Comments about pharmacy services

A) What are good quality pharmacy services like?

We gathered comments about what participants thought made good quality pharmacy services and received over 828 individual comments to various questions. We have categorised these as follows and ordered them by frequency:

Category	Count
friendly staff	145
helpful staff	101
knowledgeable	99
efficient and effective dispensing	69
give advice and answer questions/pharmacist available to answer questions/ time to answer questions	61
know their customers	44
medication in stock	31
approachable staff	28
provide information (re medication and other matters)	20
confidential service	19
good customer service	17
delivery service	16
blood testing service	15
good communication	14
good liaison with GP	11
local	11
person centred	11
quick service	11
reliable	10

Category	Count
continuity of staff	9
opening hours convenient	9
listening	8
staff availability	8
accurate	7
clean and tidy premises	7
range of services available	6
open evenings and weekends	6
accessible (physical)	5
flu jabs available	5
medication reviews	5
understanding/caring	5
sufficient waiting space/seats	4
car parking available	3
can phone them	2
explain medication	2
look out for any compatibility issues between medications	2
near GP	2
non judgemental	3
up to date information	3
diversity of staff	1
experienced	1
good organisation	1
sorts out issues	1
speak English	1
speak my language	1
useful website	1

The factors most frequently mentioned as markers of quality service related to the interpersonal skills of staff and pharmacists (friendly, helpful and approachable staff), plus confidence in their abilities by their being knowledgeable.

Another strand of quality markers is around the effectiveness of dispensing where respondents valued stock levels (to prevent delay), speed and accuracy.

The pharmacist or staff being able to give advice and answer questions and provide information was seen as important. There was a separate but linked point about staff being available/having time to do this.

Some kind of relationship or familiarity with customers/patients was mentioned 44 times as a quality factor.

Providing some specific services such as home delivery, blood taking and flu jabs was also important.

We have included a selection of comments below:

Pharmacist and staff:

- *The pharmacist speaks to all of his customers, doesn't stay in back of shop. So this means they know us by name. Makes a big difference*
- *I feel confident in going to same pharmacy as I know the pharmacist. Can talk to him about any medication matters or health matters.*
- *Staff are helpful and pleasant, serve you with a smile on their face*
- *Pharmacist and staff who show and interest and know when I have something changed or new with my medicines*
- *Good service, politeness, friendly staff, nothing is too much trouble for them. They also do flu jabs and blood tests. It is convenient just a walk away*
- *Helpfulness of staff and their willingness to liaise with adjoining doctors surgery if there is a query*
- *Welcoming staff who know me and know what they are talking about; staff ready to answer questions; prompt efficient service*

Convenience:

- *They know who you are; prepared to spend time to answer questions; advance warning your repeat prescription is coming to an end; offer services such as blood tests*
- *The personal touch and being able to discuss any problem that may arise as well as the convenience*
- *Getting order correct and delivery in full and on time; being kept informed about order*
- *A pharmacist who can give accurate advice who is local and knows the family situation really helps.*

Confidentiality:

- *Confidentiality - being able to talk about prescriptions and medicines*
- *There's a private consultation room. There's space for people to wait. Staff keep all conversations private*
- *It needs to be quick and discreet (e.g. I don't want them to shout out I'm getting a contraceptive pill). Good to be able to go and ask about small scale problems*
- *I do not like it when the pharmacist talks about me, my medication & personal matters while other people are in the very small shop. I think this*

is rude & intrusive. If they want to talk to you they should ask if you'd like to and if yes offer an appointment to use the cubicle.

- *The only criticism is lack of privacy to discuss anything private*

Dispensing:

- *Having medication available when I need it (i.e not having to wait for it to be ordered) Friendly, knowledgeable staff*
- *...willing to help with any thing that concerns you over your medication. It was my pharmacy who explained why I should take my iron tablets and thyroxins at different times from my other tablets*
- *They checked at intervals how I took my medication and gave advice about it (this impressed me as my GP had not called me in) Also explained GPs change in medication*
- *You get your medicines in time before you run out. If not in stock you can get them from another pharmacy*
- *That they explain fully the medication prescribed and dosage. Where inhalers are involved, as in my case, they check from time to time they are being used correctly. They are able to recommend products for minor conditions where it is unnecessary to waste time at GP etc*
- *... a well stocked pharmacy. I find it annoying when the medication prescribed by my doctor is always out of stock, and I am asked to come back another day.*
- *Highly knowledgeable and qualified staff who take trouble where necessary to meet requirements often above and beyond what is actually the basic necessity. The friendliness and courtesy and willingness to check ingredients in medications and good liaison with GP on one occasion to find a suitable antibiotic gel*
- *Great that when put on new Blood Pressure medication that the pharmacist called to ensure managing any side effects*

Services available:

- *Good blood test services saves hours compared to going elsewhere*

Promoting/developing the role:

- *A pharmacy service should have accessible opening times. This may help reduce people using A&E / walk in services when they don't need too. I think people would be more confident to use if they understood the amount of training they have to do to obtain/keep qualification. I also like how pharmacy staff explain things to you in a simple way*

- *Smaller local pharmacies are often better placed to become familiar with local residents than many GPs. A trained pharmacist can often recognise a regular customer's clinical needs and be the first point of contact when deciding if further help is needed*

Other:

- *Very handy, attached to Medical Centre. Helpful and friendly staff. Pharmacist ready to advise at all times. Have a delivery service if required*
- *The pharmacy is very necessary and I am very advanced in years and registered blind*
- *Convenient location, staff have knowledge of their customers, friendly and helpful environment, professional advice and help available at any time from the pharmacist, immediate attention*
- *I am visually impaired and really appreciate an awareness of my health needs and a sensitive personal approach to the service provided*
- *Good communication & knowledge. Non judgemental. Being treated as an individual (personal touch) Approachable & friendly. Stock availability. Local*
- *Easily accessed i.e. Local. Personal attention when I have any questions about a prescription or a health concern. A level of expertise and personal skills that allows me to only use a doctor when I need to*
- *They never rush you. They check prescriptions regularly to make sure you are taking the correct ones for your illness. They are approachable.*

B) Further comments

There were 52 calls for action/service development - 18 related to calling for longer opening hours; 5 supporting development of breadth of local pharmacy services, eg:

- *Pharmacists are an essential part of the health system and with the lack of GP appointments, it would be great if pharmacists were given more scope to support patients*
- *Modern GP practices are getting overwhelmed by demands from our longer living population, very often for treatment for minor conditions that could easily be dealt with at a pharmacy*

21 comments about things people were not happy with related to their use of pharmacy covering topics such as medication not being in stock; calls to improve patient information and information about electronic prescriptions; concerns about continuity of staff; more support with medication identification and use and long waiting times, for example:

- *There was no information about changing from paper prescriptions to electronic. I had to learn by trial and error. I have also suffered a lot from the pharmacy saying one thing and the surgery saying another and you can't get the truth. Also being given stuff I haven't ordered*

5.3 Focus group findings

We held 5 discussion and focus groups to gather input from different communities, service users and in total 93 people participated.

5.4.1 Mental Health Service Users

A) What does quality 'look like' in a Pharmacy, what makes a good experience?

The following factors were identified:

Good communication

- Sensitive
- Empathetic
- Understand you
- Confidential

Efficient

- A speedy experience
- Have your medicines ready for you when they say it will be ready
- Not to have to wait a long time
- Can go back later to collect if you want to

Provide Information

- Services available
- Health matters

Flexible

- Don't have to wait for medicines, can collect later
- If your medicines are not in stock, they get them speedily
- Will direct you to another pharmacy if they can't provide your medicines, or even fax your script to the other pharmacy
- Can give you an emergency supply of medicines if you have forgotten to get your repeat script
- Have long opening hours including Saturday

Relationship

- Not having to tell your story again and again
- Not feeling judged because of your mental health issues
- They know you

B) Do you always use the same pharmacy and why is this?

Most used the same pharmacy and initially described the reason as 'convenience'. The pharmacy was either next to the GP, near their home or on the school run. This was very important to one person with children who did not have a car

On further discussion participants talked about 'the relationship' and feeling understood and not judged and this was even more important for them because they had mental health issues.

One person said that when they were well and at work would use various pharmacies as was always on the go. Now having mental health issues and using anti psychotic medications amongst others they wanted to be able to use a pharmacy where they feel understood and not judged.

C) Things that have not worked so well

There was discussion of pharmacist's attitudes: pharmacists sometimes ask stock questions which can come across as unnecessary e.g.

A person who has an on-going eye condition who was having a particularly bad flare up which made his eyes swollen and very red uses over the counter medicines to manage it went to a pharmacy and asked for a particular over the counter drug in eye drop form (and stressed not ointment). The Counter Assistant looked at the person and quite abruptly said "And what's it for"? Clearly from the state of the person's eyes it was obvious he had an eye condition. The person also felt that this was a very personal question and could potentially been embarrassing. He felt that he should have been offered a private space if it was essential to ask this question and that the question could have been asked in a different way.

A person who has mental health issues and high levels of anxiety went to their pharmacy when they hadn't been in for a few months and was told by the Pharmacist that they needed to go the Walk in Centre for a blood test. The person became highly anxious about the thought of a blood test and this prevented them from going into the pharmacy.

D) How do you find out about what services a community pharmacy can offer?

Some comments were:

- *I don't really know what services pharmacy can offer, I just get my prescription from there.*
- *I don't know unless they tell me, only use it to get my prescription and to buy stuff*

- *I always read the leaflets on the stand to find out, there's lots of information*
- *I don't know where the leaflets are in my pharmacy*
- *I found out from a TV ad that pharmacies deliver to your door*
- *They have seasonal leaflets like for the flu jab*

One person said that a really good service she used for her parent who was elderly was the 'blister pack' service. The person who always read the leaflets in pharmacy said she was unaware of this service. But also felt that they would benefit greatly from this as they took numerous different medicines 4 times a day.

5.4.2 Baginton Fields School

A) Quality of pharmacy services

We spoke to two parents and both were happy with their current pharmacy services and one commented:

- *I don't think a Pharmacist would have enough experience to advise on my son's health*

Quality factors identified as important were:

- Regular faces for staff
- Not having long waits
- To have all of the medications ready at the same time, collect in one visit
- *It is important to have a local pharmacy for people that don't drive, I have seen one close already*
- *That they can provide you with your child's medication at a regular time*

B) Information about Pharmacy services

- *I use the Pharmacy nearest my home, I do not drive...but it is good, I am happy.*
- *The pharmacist tells me what they help me with, my GP talks to me as well.*

C) Pharmacies developing other services

Participants did not have a clear understanding of what pharmacies could offer other than the prescription/dispensing services and retail.

As they have disabled children with complex health needs they would always go to their GP as they 'knew their histories'. They wouldn't feel confident in using a pharmacist.

4.2.3 Older BME women

A) Quality of pharmacy services

The following factors were identified as markers of quality:

Helpful services:

- Dropping of medication at home was seen as a very good service particularly for those who were disabled and older and found it difficult to collect
- Most agreed that the staff were very helpful and well mannered and had time to offer help and assistance. If an item was not in stock they would let them know when it would be available
- One person stated that the fact that they got their medicines reviewed every 6 months from the pharmacist was an exceptional service as GPs did not have time to do this. This made her feel really confident about the overall healthcare she was receiving.
- To be able to get blood tests and blood pressure done without much waiting time as compared to Walk in Centre.
- Having the opportunity to consult with them if they did not want to go through the difficult task of making an appointment with their GP on more minor matters.

Relationship:

- Pharmacist had the time to help people understand their medication and possible side effects and help them understand how manage side effects
- Pharmacist explaining dosages and how to take medicine was seen as important to those who were unable to read English, particularly when people were on several medications
- Most stated they had a good relationship with their local pharmacist who was better than GP surgery as they were mostly always pleasant, well mannered and had the time to talk to them.

Efficiency:

- Prescriptions being on time was seen as very important
- Having the prescribed medication available instead of having to wait

Location:

- Very important that is nearby especially for the elderly and disabled
- Having the pharmacy near the GP practise

Communication:

- Speaking in different community languages was seen as important by participants

Opening hours:

- Some stated that the hours of local pharmacies are sometimes more accessible than other services

C) Things which could be improved:

Local pharmacies do not all offer a consistent service. A discussion took place where people shared what their pharmacists offered and people felt it was unfair as everyone should have the same services.

Other factors identified were:

- Not always having the medicine available, have to wait which was seen as not an efficient service
- Not giving a good explanation about why brand of medicine has been changed, particularly for patients who have mental health issues as this made them anxious that the medication would be different and not have the same impact
- Delay in repeat prescriptions
- They are not always accessible to wheelchair users, the bigger pharmacies tend to have automatic opening doors
- Would be better if they could get diabetes check done to give peace of mind
- Most people stated that the communication between GP and pharmacies was not that good - some stated that they overheard conversations between staff where pharmacists would feel unsatisfied by details on the prescriptions that the doctors had given etc
- Hard to know who has made the mistake when leaving out tablets so need a better way

4.2.4 Younger mothers from BME community

A) Quality of pharmacy services

Services provided:

- The advice that they give in relation to how to relieve certain symptoms
- Blood Pressure service is really useful especially when you cannot get an appointment and you are really worried
- How they can show you how to use certain medication i.e. use of inhaler, the pharmacist showed the customer how to use her inhaler as she never had used one before
- Can get blood tests, which makes service really good

Communication:

- More accessible due to fact that they speak different community languages
- Pharmacist speaks 2 community languages

Efficiency:

- Prescriptions are on time most of the time
- Repeat prescriptions on time

Relationship:

- It was nice to see the same staff and build a relationship. For example my daughter is now 10 years old and one member of staff has known her since she was born and this makes a real difference
- Most people stated that the pharmacists were really helpful and considerate, they did not rush or make you feel that you were not important.

Opening hours:

- Opening hours at local pharmacy are really good
- You can use the pharmacy while you are doing the school run

B) Finding out about local pharmacy services

The following methods were discussed:

- Posters on the pharmacy
- Via GP surgery
- Family, friends, people at work
- Pharmacy leaflets
- Walk in Centre
- In the school playground parents talk about this

How do you decide which local pharmacy to use?

- Use the one that is most closest to your home
- Use pharmacies that are on the way to work or school run
- Daughter works in city centre so uses the Boots branch during her lunch break
- Use the one where I used to live

C) Pharmacy supporting GP practices

Participants identified the following:

- When young children are ill often to help with cold symptoms
- Allergies that suddenly show up, show to pharmacist and they normally help to reduce the symptom
- For pain relief i.e. headaches, period pains, just use of the counter products
- To measure blood pressure and diabetes
- For general advice about using medication that has been prescribed

D) Liaison between Pharmacy and GP

- Better communication would make sure that less mistakes are made when it comes to prescriptions.
- Pharmacists should be able to check what medication the patient has been receiving from GP records to see whether medication has changed.

- The GP practice should be within the pharmacy so that they can talk to each other and make less mistakes and make sure correct medication is prescribed.
- When pharmacist is trying to ring the surgery to check something, it is always engaged.
- Our GP and pharmacist works really well as when I had a problem I did not even have to go to the surgery, the doctor just rang the pharmacist and my medicine was ready to pick up in 30 minutes, this was really good service.

4.2.5 Older Carers Group

A) Quality of pharmacy services

Relationship:

- Able to see the same pharmacist is important as they know your history
- Pharmacist knows you and your family over the years which gives you confidence
- Good relationship with carers and asking about the patients health and how they were getting on
- All staff are polite and caring, not just the pharmacist
- Able to talk to pharmacist as they are more friendly and seem more concerned

Location:

- Some have wheelchair access which helps carers
- Having the pharmacy within walking distance and by other local shops

Communication:

- Pharmacist can speak different languages
- Had a private room for consultation to discuss any medical issues

Services provided:

- Can pop in any time without an appointment if you need advice, particularly in winter
- Generally good at dispensing medicine and if not available tend to get it quite quickly
- Know a lot about vaccinations if going abroad, very helpful advice
- Pharmacy gave me the confidence to go back to the GP and ask more questions about my symptoms to ensure I had correct medication.
- Told me about a good diet to follow to lose weight which was part of why I was suffering with my medical condition

Problems with pharmacies you have come across:

- On a few occasions do not have medicine in stock
- No service for blood tests and diabetes test, some do but a lot do not

- The fact that they read out the name and ask you your address is not confidential and this system should change as do not want everyone to know where you live.
- Had nowhere to sit and wait for people who cannot stand for long or have difficulty breathing. There should be space for this.
- Pharmacy is too small and selling too many items which are nothing to do with health
- Not all are accessible to wheelchair users

B) Finding out about local pharmacy services

- GP surgery
- Colleagues at work
- At the pharmacist and doctors surgery there are leaflets
- Internet
- Bill boards

C) Have you used a pharmacy rather than GP

- Most stated no, but 2 had used to get general advice about side effects of medication and 2 People had used the pharmacist rather than the GP nurse to find out about vaccinations
- 3 stated they had used pharmacy around allergic reactions and pain relief when they could not get an appointment
- Gave me really good advice about my asthma and how to manage it which GP has not shared with me.
- Some people asked advice about side effects about medication which they were good at answering as GPs did not have the time.
- Told me about my rights to a GP service locally
- Discussed side effects of medicine which GPs do not always have time to do

D) Ways community pharmacy could work more closely with GPs

- They should share records of medications that people are on if they do not have access to this as it would help them be aware of when they needed a review
- Pharmacist and GP staff should be able to communicate with each other quickly by using a direct number as number is often engaged when Pharmacist is trying to clarify something that has been prescribed etc

9. Conclusions

In total Healthwatch gathered the views of 703 people through surveys and discussion and focus groups. Linking with local community pharmacies enabled our paper survey to be distributed widely. The outreach activity Healthwatch undertook and our connections with voluntary and community sector groups enabled the views of different sections of the community to be gathered.

Our survey findings provide insight into how a sample of people, who largely use pharmacy services frequently, use services and their views on quality factors.

Within the comments made there was much praise for and value placed on local pharmacy. It was striking that 85% said they used the same pharmacy all the time.

The local nature of pharmacies was very important and reflected in decision making about which pharmacy to use being based around location in relation to home and GP practice for many. Good customer service was also important.

Relationships with a pharmacy, the pharmacist and staff were important for a significant number of people, and more so the older people were. Mental health service users and older BME people in our focus groups valued this element of relationship highly. There was evidence that BME focus group participants choose to use their local pharmacy rather than GP service because they valued the relationship with the pharmacist and community languages spoken.

However people also valued quick and timely services; younger people valued long opening hours, and access without needing an appointment was a high priority for many. We received 18 specific comments about a need for longer opening hours in pharmacy in Coventry. Therefore, there is a tension between a more personal services and the level of access that people want.

Quality factors related to pharmacy focused on the customer service and interpersonal skills of staff, with friendly, helpful staff being very important. Providing advice and answering questions was also seen important to people, along with staff having time to do this.

We identified that people are not necessarily aware of all the services that are already available via different pharmacies. It was clear from our sample that repeat dispensing was the main service being used at pharmacies and there was some confusion about the other services which were already available with people listing them as things they would like pharmacies to provide. For example talking to discussion/focus group participants highlighted that some were not aware of Blood Taking (phlebotomy) services at local pharmacies, even though these services have been provided in this way for a considerable number of years. This was likely to be because this was not provided at the pharmacy they used.

The lack of understanding of current pharmacy services we identified suggests that current methods of communication and information provision are not especially effective. We found that people relied a lot on getting information about

pharmacy services from the pharmacy they used regularly and this could be an issue in terms of effective information provision; will pharmacies that do not provide a specific service have up to date information about where that service can be found and will this information be passed onto the customer/patient?

Information from GP practices also featured highly and GP practice could do a lot to direct people to appropriate services but we wonder about the quality of information available about pharmacy services and if knowledge extends beyond the pharmacies in the very local area.

It can be difficult to find online information about the services which are available in some pharmacies and that this is not necessarily geared towards a public audience. There is not one portal to find out what services are provided where and some information was not in the public domain in a collated way and this should be addressed by different agencies which commission element of pharmacy service working together to create an accessible public facing online information route.

The pharmacy dispensing role featured in quality factors people saw as important in terms of quick dispensing and good stock levels of medication. We identified a need for better information to help people to understand the different methods for repeat prescription ordering and more work to do around understanding of medication side effects and medication interactions.

We received mixed feedback regarding the Prescription Ordering Direct service (POD) showing that respondents said they were largely getting their medication on time and correctly and providing positive comments about efficiency and convenience, medication review reminders and effectiveness. However, there were quite a lot of negative comments regarding issues with the POD opening hours not being long enough or convenient; the suitability of the service for some patients (those with memory issues and hearing issues); lack of personal choice and expectations about timing. Therefore, there are issues for the managers of POD to look into and address.

The paper survey identified a willingness in 58% of respondents to consider using their pharmacy rather than their GP. Some people found it hard to consider what further development of the role of community pharmacies might involve and this seemed to be because their understanding of pharmacy was based on dispensing services and the retail element. This was exhibited in some of our focus group discussions and in answers to our paper survey. However, our focus group with older BME women identified evidence of people from this group using pharmacy rather than seeking to visit their GP.

Therefore there is scope to continue to develop the role of pharmacy into a broader role to support the health and wellbeing of local people. However this needs to be done and promoted in a way which is understandable to the public and in a joined up way. The current individual funding arrangements for various schemes to develop pharmacy services is in danger of leading to a fragmented approach to provision and a local strategy is needed.

10. Recommendations

Healthwatch Coventry makes the following 9 recommendations to different organisations involved in the planning and delivery of pharmacy/primary care services, joined up health and care services and improving wellbeing for people in Coventry:

- 10.1 Public Health Coventry and Coventry and Rugby CCG to work together (and link with the Local Pharmaceutical Committee) to develop an action plan for the promotion of pharmacy services; this should include
 - better online information including exploring options for an information portal website (here existing examples of the Family Information Services Directory⁹ and Coventry and Warwickshire Living Well with Dementia portal provide useful learning about web portals)
 - better signposting information ensuring lists of pharmacies and their different services are available in GP surgeries, in pharmacies and in other places where people are/go (not just NHS settings)
 - developing Easy Read information as per the NHS Information Standard
- 10.2 Commissioners of pharmacy services, the Local Pharmaceutical Committee, Public Health Coventry to consider how soft patient/customer relationship quality factors can be promoted and further supported within local pharmacy including considering a quality award/mark scheme or a sign up to quality charter scheme.
- 10.3 Local pharmacies to ensure that patients/service users receive full and accurate information about electronic prescriptions and other methods of organising repeat prescriptions to ensure patients are able to make choices about the method they wish to use
- 10.4 The Coventry and Warwickshire Sustainability and Transformation Plan Board to consider the findings of this report and ensure that pharmacy features strongly within an STP work stream regarding primary care and that this work stream is developed as a priority.
- 10.5 The Coventry and Warwickshire STP Board should ensure that pharmacy is seen as a key enabler within 'out of hospital' and 'proactive and preventative' work programmes capitalising on the range of services and willingness of 58% of service users in our survey to use pharmacy more.
- 10.6 Public Health Coventry to ensure that the findings of this piece of work are used in conjunction with the pharmaceutical needs assessment as a basis for future planning around pharmacy provision/locations - especially important is the value placed on local services by pharmacy users.

⁹ <https://cid.coventry.gov.uk/kb5/coventry/directory/family.page?familychannel=0>

- 10.7 The management of POD at CRCCG to ensure that issues highlighted in section 5.2.7 are addressed:
- Opening hours for phone calls to POD
 - Information provision to users of the service and those who become users of the service in the future
 - Ensuring that both current and future users of POD who have hearing impairment/issues and/or memory issues are able to use an alternative means of re-ordering medication via their pharmacy or GP practice as POD is not appropriate for them
- 10.8 The implementation of the ‘Healthy Living Pharmacies’ initiative by individual local pharmacies should be enabled and have the full support of Public Health Coventry, the Local Pharmacy Committee and primary care commissioners.
- 10.9 Coventry Health and Wellbeing Board to ensure pharmacy services are reflected in the local Health and Wellbeing Strategy, commissioning intentions and NHS Sustainability and Transformation Plans.

11. Acknowledgements

Thank you to all the pharmacists who helped to distribute out survey and to the LPC for their support with this piece of work.

Thanks also to Healthwatch volunteers, members and all other organisations which helped to promote and distribute our survey or facilitated discussions.

12. Responses

Healthwatch Coventry will be seeking responses from a range of local organisations to our recommendations and details of these Responses will be published.

CRCCG Response

8th May 2017

John Mason
Healthwatch Coventry Chair
Healthwatch Coventry
29 Warwick Road
Coventry
CV1 2ES
SENT VIA EMAIL 08.05.2017

Dear John

Thank you for sending on your comprehensive Report on Pharmacy Services in Coventry, March 2017. We have considered the Report and your recommendations at our Clinical Development Group and I am pleased to advise you of our action in respect of the CCG.

Recommendation 1.

Our Communications team will work with Public Health Coventry to develop a list of actions on which we will collaborate, and will be pleased to report back to you once this is completed.

Recommendation 7.

It is important to be clear that the NHS Prescribing Ordering Service, is a service provided to GPs rather than a pharmaceutical service. The service supports patients to take control of their own prescription ordering requirements and to order what they need at that time. Patients that use NHS POD to order their repeat prescription will still use their nominated pharmacy to have their prescriptions dispensed and it will not replace any of the current relationships that patients have.

Patients still have a choice of how to order their repeat prescription but make this request themselves to ensure that they are only ordering what is required at that time. The options for accessing the POD are; telephoning the service direct; ordering at the GP practice using the repeat prescription request slip; or ordering online.

Opening hours.

The telephone service has been extended and the opening hours from November 2016 are from 8am to 5pm Monday to Friday. However in a recent patient satisfaction survey the service found that not all patients are aware of the new hours, and this aligns with your findings. Lisa Scullen, the POD service manager advises me that the call handlers have been, and continue to, inform patients of the opening hours but, we will ask them to keep the effectiveness of this communications under review and to improve awareness.

The service have produced updated information leaflets and posters which I am sure Lisa would welcome any further comments you may have on how these might be made more effective.

Ensuring equality of access hearing impairment and memory loss.

In respect of ensuring that both current and future users of POD who have hearing impairment issues and memory issues are able to use an alternative means of re-ordering medication via their pharmacy or GP practice as POD is not appropriate for them. Lisa advises me that the alternative methods of accessing the service support these needs, however I will ask her to undertake or forward the latest equality impact assessment, to ensure the service can meet these needs.

Recommendation 8.

We are exploring how we might best work with the healthy living pharmacies scheme and will update you as we gain more momentum on this.

As a final note, may I take the opportunity to thank all of the Healthwatch members involved in talking to local people and gathering their views, as well as those involved in collating such a comprehensive report. This is a very helpful collation of the “lens” through which local people view this aspect of primary care.

Yours sincerely

Andrea Green
Chief Officer

Coventry LPC Response to Healthwatch Coventry - Pharmacy Services in Coventry

We were delighted to support the project with visits to some of the pharmacies and facilitating the handing out of questionnaires. We welcome the report, which is well researched with a good sample size and providing useful insights from patients in Coventry. The findings are interesting and consistent with national findings.

Community Pharmacists are the most accessible healthcare professionals, 1.6 Million people visit a community pharmacy in England every day, with 89% of people living within a 20 - minute walk of a community pharmacy. The average pharmacy has 137 health related visits a day and dispenses 87,000 prescription items a year. The average community pharmacy already regularly sees and provides advice to: 250 diabetics, 389 asthmatics, 463 carers, 805 older people, 1,317 patients with mental health conditions and 1,416 patients who have been discharged from hospital. (data taken from PSNC Briefings May 2017- references available on request)

We look forward to working with Healthwatch and other partners on the recommendations.

The Findings

The results supported the loyalty that patients show to their chosen local community pharmacy, with 85% using the same pharmacy all the time and demonstrated the value that they put on customer service, being known to the teams and given good advice.

We note that it can be challenging to find the information as to which services are provided where and that some people were unaware of the kind of services that pharmacies can provide currently or in the future. This is a key area for the LPC

over the coming year to address this issue and support patients with information, which is updated and easily accessible.

We also note that some patients found the process for ordering their prescriptions confusing. This may be due to the variety of mechanisms in Coventry, with the advent of POD and other local schemes.

We will work with Healthwatch, pharmacies and surgeries to try and make this clearer. We also note that people may find more information useful around side effects and new medicines from pharmacists.

Healthy lifestyle advice and the option to develop new services through pharmacies to give more choice and convenience were also valued by people in the survey. This is a key area for the LPC to support and build on this and link in with the emerging Healthy Living Pharmacy Programme in Coventry.

POD - we also note the mixed response and the LPC is actively working with the CCG to pilot Electronic repeat dispensing, through POD which will reduce the number of calls that need to be made to POD and smooth the process for a significant number of patients if rolled out. It will also reduce the burden on the call centre.

Recommendations

The LPC will work with the suggested NHS bodies (CCG, Public Health, Health & Wellbeing Board) to build on the recommendations to better utilise the skills and increase the access to healthcare through community pharmacy which is supported by close to 60% of the respondents. They want to see more services through their local community pharmacy, which nearly 80% of them visit at least once a month, where they will be able to access healthcare provided by professionals whom they know and trust.

We will also work across the commissioners to develop an improved directory for services within pharmacies and make this accessible along with supporting the promotion of community pharmacy with Coventry.

We understand the importance of friendly, professional services alongside good advice and quality markers. We are supporting the Health Living Pharmacy Programme and see this as a mechanism to support the quality stamp for community pharmacy. We will be working with public health to further develop this and link into long term condition support in the future as well as healthy living advice.

The report will support us in our ambitions to encourage the STP to incorporate community pharmacy into several of the work streams. We see this as an important opportunity to shape the future healthcare pathways for Coventry.

We would also see the report being a useful appendix to the PNA which will need to be developed for 2018.

In summary, we welcome all the recommendations and look forward to working on all of them during the next 12 months and beyond.

On and behalf of Coventry LPC
Fiona Lowe M.R.Pharm.S.
Chief Operating Officer
Coventry LPC

Public Health response

Response to 1 - Public Health Coventry will work with key partners, including CRCCG, the LPC and Healthwatch to produce a revised PNA capturing up to date information on local pharmacy services to guide future promotion of services.

Response to 2 - Suggestions around quality promotion and award schemes can be explored through the PNA process.

Response 4 and 5 - It is our intention to use the PNA revision process to explore how the role of community pharmacies can be supported and developed, providing recommendations to inform the Sustainability and Transformation Plan Programme Board.

Response to 3 - The findings from this report will inform the production of the revised PNA. Healthwatch will be invited to participate in our project steering group and given an opportunity to discuss their findings in more detail.

Response to 8 - Public Health Coventry support the implementation of Healthy Living Pharmacies and are working with the LPC to enable local delivery. Healthy Living Pharmacies will be included in the PNA scope.

PNA = Pharmaceutical needs Assessment

Appendix 1: Self completion survey

Healthwatch works to give local people a say in NHS services. We are gathering feedback on pharmacy (chemist) services in Coventry. Healthwatch is independent from pharmacy and other NHS services.

In this survey we are interested in the services which are funded by the NHS and therefore are sometimes free for local people to use (if they meet certain criteria) and also NHS prescription services.

1. What is the name of pharmacy you used today or use most often?

2. What road this pharmacy is on?

3. Why do you choose to use this local pharmacy?

Tick all that apply

- It is close to where I live
- It is close to my GP practice
- It is close to where I work
- It is near to where I shop
- Good access by car
- Good access by bus
- Because the opening hours are convenient
- Because of the good level of customer service
- Because a specific service is provided
- Because staff speak a particular language

<input type="checkbox"/>

Other (please say)

4. How often have you visited **any** local pharmacy in the last year for prescription or NHS free services?

More than once a month	<input type="checkbox"/>	Every 4-6 months	<input type="checkbox"/>
Once a month	<input type="checkbox"/>	Less often than any of these	<input type="checkbox"/>
Every 2-3 months	<input type="checkbox"/>	Not sure	<input type="checkbox"/>

5. Do you tend to use the same pharmacy all the time?

Yes No

If **no** which other pharmacies do you use and why?

Pharmacy name	Reason for use

6. Why did you visit the pharmacy today or the last time you visited a pharmacy?

Please Tick all that apply

One off prescription	<input type="checkbox"/>	For information about other NHS services	<input type="checkbox"/>
Repeat prescription	<input type="checkbox"/>	Blood taking	<input type="checkbox"/>
For advice about medication	<input type="checkbox"/>	Free NHS help with stopping smoking	<input type="checkbox"/>
For advice about a health matter	<input type="checkbox"/>	For a NHS free flu vaccination	<input type="checkbox"/>

For another NHS service please say

7. How important is it to you that...?

Very important Fairly important Not very important Not important

Your prescription is dispensed quickly	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The pharmacist is available for questions/advice	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pharmacy staff know who you are	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pharmacy staff have time to talk to you	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
A pharmacy has good stock levels of medication	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Pharmacy is open in the evenings and at weekends	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
There is somewhere to speak confidentially with staff	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Services are available without an appointment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Staff are trained in Dementia and disability awareness	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

8. How useful would it be for you if pharmacies in Coventry gave more healthy lifestyle and health and wellbeing advice e.g. about diet, exercise etc

Very useful Useful Not useful Not useful at all

9. If you could get more NHS services at a pharmacy rather than going to a GP practice, would you prefer this?

Yes I would prefer to use a pharmacy No I'd prefer to go to my GP surgery

If **YES**, what sort of things would you like to be provided in pharmacies?

Minor illness and minor injury advice, support and treatment (e.g. dressings/stitches)	<input type="checkbox"/>
More support for long term conditions e.g. diabetes, asthma, blood pressure etc	<input type="checkbox"/>
Clinical annual medication reviews	<input type="checkbox"/>
Blood tests such as Warfarin dosing checks	<input type="checkbox"/>
Other vaccinations	<input type="checkbox"/>

Other (please say)

10. How do you find out what NHS services you could use at local pharmacies?

Please Tick all that apply

Search the Internet	<input type="checkbox"/>	Go to my usual pharmacy	<input type="checkbox"/>
The NHS Choices website	<input type="checkbox"/>	Go to any pharmacy	<input type="checkbox"/>
Information from GP practice	<input type="checkbox"/>	From friends/family	<input type="checkbox"/>

Other (please say)

Part 2: About prescription services

11. Do you have an ongoing, repeat prescription for medication?

Yes If **yes** please answer questions 12-16 No If **no** go to part 3

12. How many medications have you been prescribed to take on an ongoing/repeat basis

13. How is your repeat prescription ordered?

Please tick one

- Take in paper prescription to the pharmacy myself
- Electronic prescription (goes to pharmacy from GP by computer not by paper)
- Pharmacy collects your paper prescription from GP surgery
- You phone Prescription Ordering Direct (remember to answer section 4 about POD)
- Don't know

<input type="checkbox"/>

Other (please say)

14. How much do you think you understand...	Totally	Very much	Not very much	Not at all
What your medicine is for?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
How to take it?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Any side effects from your medication?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
If or how your different medications affect each other?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

15. Have you been prescribed any new medication in the last 6 months?

Yes No Don't know

16. Did you feel you had enough information about this new medication from the pharmacist?

Yes No N/A

If no what information would have been helpful?

Part 3: Your comments about local pharmacy

17. What do you think makes a good quality pharmacy service that you feel confident in and want to use?

18. Any other comments about pharmacies in Coventry (e.g. what works well or what could be improved)

Part 4 About Prescription Ordering Direct (POD)

19. Have you used the Prescription Order Direct phone service (this is available to patients of some Coventry GP practices)?

Yes If **yes** please answer questions 20-24 No If **no** go to part 5

20. What is the name of your GP practice?

- | | | | |
|--------------------------|--------------------------|--|--------------------------|
| Gosford Green Surgery | <input type="checkbox"/> | Stoney Stanton Medical Centre | <input type="checkbox"/> |
| Jubilee Health Centre | <input type="checkbox"/> | Walsgrave Health Centre | <input type="checkbox"/> |
| Limbrick Wood Surgery | <input type="checkbox"/> | Willenhall Primary Care Centre 1 (Dr Hogg & Dr Sharma) | <input type="checkbox"/> |
| Mansfield Medical Centre | <input type="checkbox"/> | Willenhall Oak Medical Centre | <input type="checkbox"/> |
| Priory Gate Surgery | <input type="checkbox"/> | Wood End Health Centre | <input type="checkbox"/> |

Other (please say)

- | | Yes
always | Yes
mostly | No not
usually | No
never |
|---|-----------------------|-----------------------|-----------------------|-----------------------|
| 21. Is your medication ready in time before you run out? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 22. Do you get the correct items of medication? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |
| 23. What works well about Prescription Ordering Direct? | | | | |
| 24. What does not work well about Prescription Ordering Direct? | | | | |

Part 5: About you (so that we can give details of our survey sample)

What ethnic group would you say you are from?

White		Asian or Asian British	
British	<input type="checkbox"/>	Indian	<input type="checkbox"/>
Irish	<input type="checkbox"/>	Pakistani	<input type="checkbox"/>
Traveller/Romany	<input type="checkbox"/>	Bangladeshi	<input type="checkbox"/>
Eastern European	<input type="checkbox"/>	Other Asian (please say)	<input type="checkbox"/>
Other White (please say)	<input type="checkbox"/>		
<input type="checkbox"/>		Black or Black British	
Mixed		Caribbean	<input type="checkbox"/>
White and Black Caribbean	<input type="checkbox"/>	African	<input type="checkbox"/>
White and Black African	<input type="checkbox"/>	Other Black (please say)	<input type="checkbox"/>
White and Asian	<input type="checkbox"/>		
Other Mixed (please say)	<input type="checkbox"/>	Chinese or other ethnic group	
<input type="checkbox"/>		Chinese	<input type="checkbox"/>
		Other ethnic group (please say)	<input type="checkbox"/>
		<input type="checkbox"/>	

Your Gender Male Female Transgender

Please indicate your age

Under 16 16-24 25-34 35-44 45-54 55-64 65+

Do you consider yourself to be disabled? Yes No

Do you have a long term health condition? Yes No

Thank you for taking the time to complete our survey - we really appreciate it.

Confidentiality

The information we are gathering from this survey will be used by Healthwatch Coventry. The information you provide will be used anonymously. Personal contact details will be treated as confidential and will not be passed on to third parties without your consent. In all cases if you choose to share your personal contact details these will be detached from the information you have shared in the questionnaire.

Appendix 2: Focus group prompts

Aim of focus groups:

- To find out more about the value people place on local pharmacies - how and why they use them, and what is a good quality service
- How people find out about the services available from community pharmacies
- If people use pharmacies instead of their GP practice or other NHS services and what scope they see for pharmacies to support GP practices more

Introduction

Community pharmacies provide NHS medication services) prescriptions and advice about medication use) and a range of NHS services that are free to use either for everyone or for certain groups of people.

For example: Blood taking; support with diabetes medication; sexual health services

Not all pharmacies do the same range of NHS services.

Ice breaker

Ask everyone when they last visited a pharmacy; when they last visited their GP practice, the Walk in Centre and A&E.

Focus Group questions

The select most relevant questions for the group from the following (usually 3-4 overarching questions for a focus group)

A) Quality of pharmacy services

- What makes a good quality pharmacy service (Prompts: staff, access, opening hours, location, services, confidentiality, language skills etc)
- What do you like about pharmacies and the things they provide to you (keep the focus on NHS services rather than retail elements)
- Any problems with pharmacy that you have come across?

b) Information about pharmacy services

- How do you find out about the things which pharmacies can help with?
- How do you decide which local pharmacy to use?

C) Pharmacy supporting GP practices

- Does your pharmacy provide things you can't get from other NHS services and why? (opportunity to explore value different communities place on pharmacy services as a community based service)
- Have you used a pharmacy rather than to your GP, the walk In Centre or A&E? Why?
- In what ways might community pharmacy work more closely with GP practices?

Appendix 3: Response numbers by pharmacy

Name of pharmacy	No. of respondents
Acorn Remembrance Road	7
Allesley Pharmacy 134 Birmingham Road	2
Asda London Road Abbey Park	1
Asda Walsgrave Brade Drive	4
B J Chemist Gulson Road	1
Bannerbrook Pharmacy 5-7 Gramercy Park	6
Biraj Pharmacy 445-447 Foleshill Road	41
Boots 248 Hipswell Highway	4
Boots 25 Farren Road	5
Boots 585 Stoney Stanton Road	2
Boots Ball Hill 191 Walsgrave Road	8
Boots Binley Warwickshire Shopping Park	3
Boots Cannon Park Lynchgate Road	3
Boots Central Six Central Six	9
Boots Cross Cheaping, City Centre	1
Boots Daventry Road Daventry Road	4
Boots Earlsdon Earlsdon Street	13
Boots Ernsford Grange Quorn Way	3
Boots Jardine Crescent Jardine Crescent	1
Boots Jubilee Crescent Jubilee Crescent	1
Boots Lower Precinct Lower Precinct, City Centre	11
Boots Moseley Avenue	2
Boots Oasis Centre Quinton Park	7
Broomfield Pharmacy Broomfield Road, Spon End	10
Chemycare Beake Avenue	29
Chemycare Broad Park Road	1
Chemycare Park Road	21
Chemycare Ringwood Highway	21
Clay Lane Pharmacy Clay Lane	5
Dhaliwal 373 Green Lane	11
Dhaliwal Chemist 110 Brandon Road	6
Foleshill Pharmacy 579A Foleshill Road	12
Forum Pharmacy/Walsgrave pharmacy 304 Walsgrave Road	11
Gables Pharmacy 268 Holbrook Lane	2
Heath Pharmacy 36 Heath Crescent	9
Hillfields Pharmacy King William Street	2
Holbrook Pharmacy 75-77 Wheelwright Lane	4
Humber Pharmacy Humber Road	4
Imperiun Pharmacy 1 Wheelwright Lane	1
JP Goes Holyhead Road	7
Kara's 13 Acorn Street	7
Kara's 55 Binley Road	13
KK Mistry Station Avenue Tile Hill	23
LH Wills Ltd 14 Parkville Highway	1

Name of pharmacy	No. of respondents
Lloyds Bell Green Riley Square	3
Lloyds City of Coventry Health Centre Stoney Stanton Road	5
Lloyds Earlsdon Earlsdon Street	15
Lloyds Jubilee Crescent Jubilee Crescent	2
Lloyds Kenpass Highway 48 Kenpas Highway	3
Lloyds Moseley Avenue	4
Lloyds Roseberry Avenue	1
Lloyds Sainsbury's Austin Drive	2
Lloyds Sainsbury's Fletchamstead Highway	4
Lloyds Tile Hill 343 Tile Hill Lane	1
Lloyds Whitaker Road	15
Lloyds Willenhall 102 Remembrance Road	6
Lloyds Wyken Torcross Avenue	5
Longford Chemist Longford Road	17
M Hussain Ltd 1A Harnall Lane	1
Medicare Chace Avenue	15
Monarch Pharmacy Prior Deram Walk, Canley	6
Monarch Pharmacy Radford 318 Radford Road	2
Morrison's Holyhead Road	8
Mount Nod Sutherland Avenue	38
MW Phillips/Abel Chemist 471 Stoney Stanton Road	2
Norton Hill Norton Hill Drive	1
Roskells Pharmacy Allesley Old Road	3
Rowlands Pharmacy 1 Henley Road	4
S&G Pharmacy Bromleigh Drive	18
Shire Pharmacy Keresley Green Medical Centre Bennetts Road South	9
Simple Pharmac Stoneleigh Avenue	1
Spires 245 Walsgrave Road	5
Stoney Stanton Pharmacy 631-633 Stoney Stanton Road	2
Styvechale Pharmacy Baginton Road	22
Superdrug Hertford Street	4
Superdrug Smithford Way	1
Tesco Arena Longford Road	2
Tesco Clifford Bridge Road	5
Tesco Crosspoint Olivier Way	4
Vantage Chemist Gosford Street	1
Well Pharmacy Norman Place Road	9
Wellbeing Pharmacy Tile Hill Lane	6
Wigston Pharmacy Wigston Road	3
Windmill Road Pharmacy 2-8 Longford Road	1
Wood End 67 Deedmore Road	2
Wyken Pharmacy 13/17 Brixham Drive	4

Pharmacies we did not receive any response about	
Boots Arena Park	Dhaliwal Chemist 17 Station Street
Rotherham Road Pharmacy Rotherham Road	SK Pharmacy 279 Harnall Lane East
MW Phillips University of Warwick	Dhaliwal Chemist 2 Queens Mary's Road

Appendix 4: Other GP practices of respondents stating use of POD

Name of GP practice	Count
Moseley Avenue Surgery	1
Springfield Medical Practice	3
George Eliot Medical Centre	1
Broomfield Road Medical Centre	2
Kenyon Medical Centre	1
Phoenix Family Care	3
Woodway Medical Centre	1
Park House, St Georges Road	2
The Forum Health Centre	1
Mansfield Medical Centre	1
Broad Street Surgery	1
Kensington Road Surgery	3
Dr Zakey, Willenhall Primary Care Centre 2	1
Morris Avenue Surgery, Dr Kashote	1
Woodway Medical Centre	1
Forrest Medical Centre	3
Windmill Surgery, Longford Primary Care Centre	1
Dr Sani & Partners, Hillfields Health Centre 1	1
Park Leys Medical Practice	1
Woodside Medical Centre and Westwood Medical Centre	1
The Crossley Practice	1
The Gables Medicentre	3
Holbrooks Health Team	1
	35

Appendix 5: Findings from fact finding visits

Healthwatch visited four local pharmacies of different sizes which offered different ranges of services. Visits were undertaken between 19 -25 August 2016 by Healthwatch staff and volunteers, to:

1. Bannerbrook Pharmacy, Tile Hill
2. Boots Pharmacy - The Precinct, City Centre - a large pharmacy service
3. Styvechale Pharmacy, Styvechale
4. Dhaliwal Pharmacy, Foleshill - was the smallest of the 4 pharmacies. It is part of the M W Phillips group which has 8 branches in Coventry (and 40 in the country)

We gathered the following information about specific NHS services:

Blood Taking (Phlebotomy)

3 of the 4 pharmacies we visited ran a phlebotomy service which they said was popular but staff reported it was not well funded. Pharmacists reported the fee paid did not cover the costs of running the services. Two staff per pharmacy are trained, funded by the NHS any further staff are trained at the pharmacy's expense.

Sexual Health services

Boots Pharmacy in the precinct had an average of 100 customers receiving a sexual health service in store between April and August 2016. They believe this is due to the high population of students in Coventry as the service is more popular during term time.

Emergency hormonal contraception is free for 16 - 25 year olds and pharmacies claim £15 per consultation and between £6-15 per drug provided depending which pill they use.

The "C Card"¹⁰ is also accessed by anyone over 13 to access free condoms from various venues around Coventry. Pharmacies provide young people with a free "C Card".

Medication Use Reviews (MUR)

This service enables pharmacies to meet with customers to establish how they are getting on with their regular medication such as, are they:

- taking it at the right time to get the best out of it
- experiencing any problems such as side effects
- actually taking the medication they are being prescribed - keeps a check on whether they no longer require it so that they are not dispensing medication which is not required and resulting in wastage/stock piling.
- taking the right combinations of medication - make sure they will work together
- taking the correct dosage.

Pharmacies are paid to perform a maximum of 400 of these reviews with customers per year. The NHS pays up to £28 per review. However, some pharmacies are finding that they do in excess of 400 and others are reportedly using the 400 as a target figure rather than a maximum figure.

This service also enables pharmacies to link with other NHS services such as the stop smoking service, flu vaccinations and their own private services.

¹⁰ <http://www.besavvy.org.uk/service-providers/c-card>

New Medication Service (NMS)

Boots told us that they also run a NMS (New Medication Service) for high risk patients/customers such as those with a heart condition, high blood pressure, taking anti-coagulants and chronic Asthma. 7 - 14 days after they start a new medication they contact the customer by telephone and review them. If they identify that they are experiencing side effects or need help they refer them back to the GP.

Stop Smoking Service

3 of the 4 pharmacies we visited deliver this service which is funded by Healthy Living Services (NHS). This service is advertised in store, promoted via 'Stoptober' and lung cancer awareness week.

Boots told us that staff are trained by NHS (Healthy Living Services) and the most successful pharmacies get invited to attend award evenings.

We were told that the pharmacy claims NHS funding for each 12 week programme. They claim £85 per customer who signs up and reaches 4 weeks. The staff assess whether the customer has reduced or given up smoking by testing their carbon monoxide levels. If their reading is below 7 this shows that they have given up cigarettes and the pharmacy claims a further £30 in vouchers per customer who successfully stops smoking.

Other funded services:

- **Pregnancy testing**
Pharmacy can claim £10.34 per pregnancy test they do. This is a walk in service and test strips are provided by Public Health England. Pharmacies record the advice given anonymously.
- **HIV testing**
Boots told us this is a new service only offered in Coventry due to evidence that there was a high volume of people in the area who tested positive for HIV. This is a finger prick test and pharmacies claim £10 per test. So far the service has proved popular with 18 tests being done in August. The service is promoted by Coventry City Council but the pharmacy felt it could be promoted more.
- **Drug User Supervision**
Boots told us that they work together with the Recovery Partnership to deliver this service. Boots have a hatch and private space where customers can take their Methadone. Staff and the customer have to sign to say they have received and taken their Methadone, which is given as liquid or tablets. The pharmacy claims £2.50 per liquid dispensed and £2.75 for tablets.

They also run a free needle exchange. Boots can get Sharps boxes supplied and customers can also go to the Recovery Partnership for this service. They told us that they claim £2 (approx) per pack of clean needles.

Appendix 6: Pharmacies providing specific services

Below are the lists of pharmacies proving particular service which we have obtained from the Internet (CRCCG or Pubic Health Coventry) or NHS England. We have done some cross referencing with our list of pharmacies in Coventry and have identified some inconsistencies in terms of pharmacy names and addresses.

Blood Taking

1	Mount Nod Pharmacy, 126 Sutherland Avenue	16	Wyken Pharmacy, 13/17 Brixham Drive
2	Bannerbrook Pharmacy, 5-7 Gramercy Park	17	M Hussain Chemists Ltd, 1A Harnall Lane East
3	Allesley Pharmacy, 134 Birmingham Road	18	Monarch Pharmacy, 42 Prior Deram Walk
4	Asda Pharmacy, Brade Drive	19	Ringwood Pharmacy 200 Wigston Road
5	Boots, 49 The Precinct	20	Goes Pharmacy, 475 Holyhead Road
6	Boots, 94 Moseley Avenue	21	Monarch Pharmacy, 318 Radford Road
7	Lloyds Pharmacy, 19 Earlsdon Street	22	your local Boots Pharmacy, 25 Farren Road
8	Lloyds Pharmacy, 48 Kenpas Highway	23	Forum Pharmacy, 304 Walsgrave Road
9	Imperiun Pharmacy, 1 Wheelwright Lane	24	Styvechale Pharmacy, 84 Baginton Road
10	S & G Pharmacy, 16 Bromleigh Drive	25	Longford Chemist, Longford Road
11	Clay Lane Pharmacy, Upper Stoke Health Centre	26	B J Chemist, 197/199 Gulson Road
12	Hillfields Pharmacy, 88-89 King William Street	27	your local Boots Pharmacy, 10 Quorn Way
13	Humber Pharmacy, 9 Humber Road	28	Lloyds Pharmacy, 343 Tile Hill Lane
14	Superdrug Pharmacy, 21/23 Market Way	29	Vantage Chemist, 130 Far Gosford Street
15	Superdrug Pharmacy, 30/31 Hertford Street	30	your local Boots Pharmacy, 116 Jardine Crescent
16	Wyken Pharmacy, 13/17 Brixham Drive		
17	M Hussain Chemists Ltd, 1A Harnall Lane East		
18	Monarch Pharmacy, 42 Prior Deram Walk		
19	Ringwood Pharmacy 200 Wigston Road		
20	Goes Pharmacy, 475 Holyhead Road		
21	Monarch Pharmacy, 318 Radford Road		

Stop Smoking Service

1	Mount Nod Pharmacy, 126 Sutherland Avenue	33	Imperiun Pharmacy, 1 Wheelwright Lane
2	Bannerbrook Pharmacy, 5-7 Gramercy Park	34	Hillfields Pharmacy, 88-89 King William Street
3	Wood End Pharmacy, 67 Deedmore Road	35	Superdrug Pharmacy, 21/23 Market Way
4	Allesley Pharmacy, 134 Birmingham Road	36	Superdrug Pharmacy, 30/31 Hertford Street
5	Asda Pharmacy, Asda Shopping Centre	37	Tesco Pharmacy, Tesco Store
6	Asda Pharmacy, Abbey Park	38	Tesco Pharmacy, Tesco Store
7	Well Pharmacy, Norman Place Road	39	Tesco Pharmacy, Tesco Store, Cov Arena Extra
8	Boots, 49 The Precinct	40	Wyken Pharmacy, 13/17 Brixham Drive
9	Boots, Cannon Park Centre	41	Medi-Care Pharmacy, 15a Chace Avenue
10	Boots, 3-5 Cross Cheaping	42	M Hussain Chemists Ltd, 1A Harnall Lane East
11	Boots, Unit 7, Central Six Retail Park	43	Monarch Pharmacy, 42 Prior Deram Walk
12	Boots, Unit 2, Warwickshire Shopping Park	44	Ringwood Pharmacy, 200 Wigston Road
13	Boots, Arena Park	45	KK Mistry Pharmacy, 34 Station Avenue
14	Boots, 191/193 Walsgrave Road	46	Goes Pharmacy, 475 Holyhead Road
15	Boots, 94 Moseley Avenue	47	your local Boots Pharmacy, 585 Stoney Stanton Rd
16	Boots, 163 Daventry Road	48	your local Boots Pharmacy, 51 Quinton Park
17	Chemycare Chemist, 471 Beake Avenue	49	your local Boots Pharmacy, 91 Jubilee Crescent
18	Acorn Chemist, Co-op Ltd	50	Monarch Pharmacy, 318 Radford Road
19	Rotherham Road Pharmacy, 102 Rotherham Road	51	your local Boots Pharmacy, 25 Farren Road
20	Lloyds Pharmacy Ltd, 330 Fletchamstead Highway	52	Styvechale Pharmacy, 84 Baginton Road

21	Lloyds Pharmacy Ltd, Austin Drive	53	Holbrook Pharmacy, 75-77 Wheelwright Lane
22	Lloyds Pharmacy, City of Coventry Health Centre	54	B J Chemist, 197/199 Gulson Road
23	Lloyds Pharmacy, 9 Riley Square	55	Norton Hill Pharmacy, 10 Norton Hill Drive
24	Lloyds Pharmacy, 19 Earlsdon Street	56	Morrisons Pharmacy, Holyhead Road
25	Lloyds Pharmacy, Allesley Park Medical Centre	57	Rowlands Pharmacy, 1 Henley Road
26	Lloyds Pharmacy, 100 Moseley Avenue	58	your local Boots Pharmacy, 10 Quorn Way
27	Lloyds Pharmacy, 102 Remembrance Road	59	your local Boots Pharmacy, 248 Hipswell Highway
28	Lloyds Pharmacy, 47/49 Riley Square	60	Lloyds Pharmacy, 343 Tile Hill Lane
29	Lloyds Pharmacy, 48 Kenpas Highway	61	Vantage Chemist, 130 Far Gosford Street
30	Lloyds Pharmacy, 55/58 Jubilee Crescent	62	your local Boots Pharmacy, 58 Earlsdon Street
31	Lloyds Pharmacy, 43 Torcross Avenue	63	your local Boots Pharmacy, 116 Jardine Crescent
32	MW Phillips Chemists, University of Warwick Campus		

'C Card'

1	Broomfield Pharmacy, Broomfield Park	21	Monarch Pharmacy, 42 Prior Deram Walk
2	Chemycare Chemist, 19 Ringwood Highway	22	Ringwood Pharmacy, 200 Wigston Road
3	Chemycare Chemist, 471 Beake Avenue	23	your local Boots Pharmacy, 585 Stoney Stanton Rd
4	Acorn Chemist, Co-op Ltd	24	your local Boots Pharmacy, 91 Jubilee Crescent
5	Windmill Late Night Pharmacy, 2-8 Longford Rd	25	Gables Pharmacy, 268 Holbrook Lane
6	Lloyds Pharmacy, City of Coventry Health Centre	26	Monarch Pharmacy, 318 Radford Road
7	Lloyds Pharmacy, 9 Riley Square	27	your local Boots Pharmacy, 25 Farren Road
8	Lloyds Pharmacy, 19 Earlsdon Street	28	Forum Pharmacy, 304 Walsgrave Road
9	Lloyds Pharmacy, Whitaker Road	29	Longford Chemist, Longford Road
10	Lloyds Pharmacy, 102 Remembrance Road	30	B J Chemist, 197/199 Gulson Road
11	Lloyds Pharmacy, 47/49 Riley Square	31	Norton Hill Pharmacy, 10 Norton Hill Drive
12	Lloyds Pharmacy, 48 Kenpas Highway	32	Morrison's Pharmacy, Holyhead Road
13	Lloyds Pharmacy, 55/58 Jubilee Crescent	33	Rowlands Pharmacy, 1 Henley Road
14	Lloyds Pharmacy, 43 Torcross Avenue	34	your local Boots Pharmacy, 10 Quorn Way
15	Imperiun Pharmacy, 1 Wheelwright Lane	35	your local Boots Pharmacy, 248 Hipswell Highway
16	Clay Lane Pharmacy, Upper Stoke Health Centre	36	Lloyds Pharmacy, 343 Tile Hill Lane
17	Hillfields Pharmacy, 88-89 King William Street	37	Vantage Chemist, 130 Far Gosford Street
18	Superdrug Pharmacy, 21/23 Market Way	38	your local Boots Pharmacy, 58 Earlsdon Street
19	Superdrug Pharmacy, 30/31 Hertford Street	39	your local Boots Pharmacy, 116 Jardine Crescent
20	Tesco Pharmacy, Cross Point Business Park		

HIV Testing

1	Boots, 49 The Precinct	6	your local Boots Pharmacy, 585 Stoney Stanton Rd
2	Boots, 3-5 Cross Cheaping	7	your local Boots Pharmacy, 10 Quorn Way
3	Boots, Unit 7, Central Six Retail Park	8	Vantage Chemist, 130 Far Gosford Street
4	Superdrug Pharmacy, 21/23 Market Way	9	your local Boots Pharmacy, 116 Jardine Crescent
5	Superdrug Pharmacy, 30/31 Hertford Street		

Minor Ailment Service

Community Pharmacy based services to treat minor ailments, were introduced locally across the UK more than ten years ago to reduce the burden of minor ailments on higher cost settings such as general practice and the A&E departments. These schemes cover a defined set of minor ailments to defined sets of populations. Both of these criteria will vary in different parts of England as they are designed to meet local need.

The service is commissioned predominantly by local Clinical Commissioning Groups (CCGs). The Minor Ailment Service is not commissioned in Coventry.

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