



# Pharmaceutical Needs Assessment (PNA) 2025

**SHROPSHIRE** 



#### **Version Control**

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Draft 1	4/4/2025	Public Health Shropshire – document shared with PNA steering group
Draft 2	30/5/2025	Public Health Shropshire – updated with comments from steering group
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PNA Steering Group: The following organisations had key and strategic input to the production of this draft report: Shropshire Council, Community Pharmacy Shropshire (LPC), Healthwatch Shropshire and Shropshire Telford and Wrekin ICB

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This document is an update to the 2022 Shropshire PNA document. Any necessary supplementary statements will be published with the PNA on the Shropshire Council website.

# **Executive Summary**

#### Introduction

The production and publication of a Pharmaceutical Needs Assessment (PNA) became a statutory requirement in the Health Act 2009. Following the abolition of Primary Care Trusts (PCT) in 2013 this statutory responsibility was passed to Health and Wellbeing Boards (HWBB) by virtue of the National Health Service (NHS) Pharmaceutical and Local Pharmaceutical Services (Amended) Regulations 2013, which came into force on 1st April 2013. The requirement is to publish a PNA at least every 3 years; there have been four previous PNAs in 2011, 2015, 2018 and 2022 (deadline was extended due to the impact of COVID-19). This PNA is due to be published by 1st October 2025

The PNA should highlight the needs for pharmaceutical services in the area, current provision of services, identify gaps and unmet needs and in consultation with stakeholders make recommendations on future developments that are required. The PNA will be used by organisations including Integrated Care Boards (ICB) and the Local Authority (LA) to plan and commission future services.

The PNA is a key document used by local area teams to make decisions on new applications for pharmacies and change of services or relocations by current pharmacies and is also used by commissioners reviewing the health needs within their area and to identify if any services can be commissioned through community pharmacies.

Pharmacies play an important role in the health system, not just the dispensing of medicines, but now providing additional clinical services, and as they are one of the first points off contact, they can improve people's health and wellbeing and also reducing health inequalities. There are more pharmacies in Shropshire than there are GP practices, and they are more accessible, including for those who might otherwise not access health services.

Shropshire HWBB considers community pharmacies to be a key public health resource and recognises that they offer potential opportunities to commission health improvement initiatives and work closely with partners to promote health and wellbeing.

Before publishing the PNA, there is a statutory requirement to hold a 60-day public consultation, and this period was from 27<sup>th</sup> June 2025 until 26<sup>th</sup> August 2025. The purpose of the consultation is to identify the views of the statutory consultees, other stakeholders and members of the public on whether the PNA addresses the necessary and important issues. This final report was presented and approved at the Shropshire Health and Wellbeing Board on 18<sup>th</sup> September 2025.

#### **Local Context**

This PNA Covers the Shropshire Local Authority area; it together with Telford and Wrekin Council both form the geography which that is coterminous with NHS Shropshire, Telford and Wrekin Integrated Care Board (ICB).

# Key demographic messages for Shropshire

- Shropshire is a diverse, large, predominately rural inland county with a wide range of land use, economic activities, employment and social conditions
- Shropshire's population was increasing more slowly than England between 2000 and 2020 (using ONS population estimates) but increase more sharply between 2020 and 2022. Much of the Shropshire population growth has been due to migration.
- Shropshire has a relatively high concentration of people in the older age groups. In 2023, 54.2% (52.7% in 2020) of the County's residents were aged 45 or over, 26.2% were aged 65 and above, and 3.6% were aged 85 and above, when compared to England this was 44%, 18.7% and 2.5% respectively (ONS 2024 Estimates).
- Shropshire, like many parts of the country, has an ageing population, with the median population age now 48.5 compared to 40.5 in England.
- Lower-Level Super Output areas in Harlescott, Monkmoor and Ludlow East wards are the three LSOAs with the highest deprivation levels within Shropshire. All three fall within the top 10% of most deprived LSOA areas within England. Looking at whole wards, the three most deprived wards within Shropshire are Monkmoor, Harlescott and Castlefields & Ditherington, (ONS 2019)

• 42.6% of Shropshire's population is classified as being 'Urban' and 57.4% as 'rural and has an overall population density of just over 101 persons per square kilometre, compared to 433 in England. Population density is particularly sparse in the South West of the county (39 persons per square kilometre).

# Access to pharmaceutical services

- There are currently 43 community pharmacies and 17 dispensing GP practices in Shropshire. located throughout the county in towns, market towns and larger villages. Most community pharmacies are close to GP practices providing choice and convenience for patients.
- Approximately 91% of residents are within a 10-minute car journey of a community pharmacy or dispensing GP practice. However, there are greater challenges for those without access to cars, with only 48% of the population within 10 minutes of one using public transport on a weekday morning.
- As much of Shropshire is very rural, many localities are supported by GP practices that dispense to
  patients that are outside of a 1.6km radius of a community pharmacy. Dispensary opening hours
  usually reflect the opening times of the practice. Dispensing doctors offer a dispensing service to help
  fulfil the pharmaceutical needs of the patients in these areas but don't offer the full range of pharmacy
  services that community pharmacies offer, that help reduce pressure on GP appointments.
- Most pharmacies opening times generally mirror those of the GP practices, however while most pharmacies open for at least some of the day on a Saturday, there are only 2 pharmacies that open after 6pm on a Saturday and there are only 6 pharmacies open at all on a Sunday in Shropshire, and only 4 pharmacies that open past 6pm on a weekday. There are no 24-hour pharmacies in Shropshire.
- There appears to be reasonable access to some services commissioned by Public Health in Shropshire, such as emergency hormonal contraception, however, some of these services do not operate at all pharmacies, and for some pharmacies that offer those services, activity is very low.
- In addition to these pharmacies and dispensing GP practices in Shropshire there are also 54 community pharmacies in other local authorities in England and 7 in Wales that are within 5 kilometres of Shropshire's borders which could offer pharmacy services to Shropshire residents. Several of these pharmacies are open past 6pm on a weekday, (mostly in Telford and Wrekin), most are open on a Saturday and 8 of them are open on a Sunday (7 in Telford and Wrekin and 1 in Cheshire).

# Current pharmaceutical provision

- The distribution of pharmacies per head-of-population, with or without dispensing GP practices, is of a lower ratio than the national average.
- Compared to the 15 other local authorities that are deemed comparable to Shropshire, Shropshire's ratio of patients per pharmacy is the second highest (only lower than central Bedfordshire) based on their most recent PNAs, although when dispensing GP practices are included in this comparison, Shropshire is the sixth highest. Shropshire has a significantly higher proportion of dispensing GP practices than the rest of England due to its rurality, and while they provide a vital pharmaceutical supply function for patients unable to access a community pharmacy, they are unable to offer the enhanced and advanced services community pharmacies can, which is a gap for Shropshire residents.
- The number of pharmacies has reduced by 4 since the previous PNA and therefore the ratio has increased. The locations of the pharmacies that closed were 1 in Shrewsbury town centre, 1 in Shrewsbury Meole Brace retail park, 1 in Church Stretton and 1 in Ludlow.
- In 2024/25, there were over 6.5 million items prescribed by Shropshire GP practices, and nearly 300,000 (4.5%) were dispensed at distance selling pharmacies, with the highest percentage of items prescribed that were dispensed at distance selling pharmacies being from Station Drive in Ludlow, with 16% of all items (34,107). No data is currently available for previous years, but this could have an impact on community pharmacies or be an impact of one pharmacy in Ludlow closing in this time period. It may be necessary to assess whether the increased use of distance selling pharmacies is reflected of patient choice or due to an unmet need for additional community pharmacy provision
- There is only one 100-hour pharmacy in Shropshire, as opposed to three in the previous PNA, this
  pharmacy is in Oswestry.
- Some advanced and locally commissioned pharmacy services are only provided by a small number of pharmacies, if at all. While pharmacies will dispense some appliances in some circumstances in

their usual business, no pharmacy in Shropshire is actually signed up to the 'dispensing appliances' service although this service is available by a national contractor in Telford and Wrekin.

# Gaps in pharmaceutical provision

- Weekend and night access There isn't pharmacy provision in Shropshire for 24 hours 7 day a week and there is limited provision on Sundays, particularly in the South of the county. There is also limited provision after 6pm on weekdays and Saturdays, although where necessary the supply of medicines could be made by out of hours teams. While there are several pharmacies that are open later on weekdays and Saturday nights and on Sundays in Telford and Wrekin primarily, this does not seem to be the case in pharmacies close to the south of Shropshire or in Wales.
- Threats to viability of community pharmacies Research commissioned by NHS England showed
  that large amounts of community pharmacies were loss making and whilst changes to community
  pharmacy funding have helped with this, there is still a shortfall and pharmacies are still closing. The
  effects of losing a community pharmacy in a rural area would be greater particularly if there are no
  other community pharmacies nearby to deliver the slack, while dispensing GP practices and
  distance selling pharmacies could absorb supply work, they would not be able to deliver the full
  pharmacy services.

# Opportunities for future development

- Visibility of services The resident survey highlighted that there were several services that community pharmacies provide, but the respondents didn't necessarily know that the pharmacy provided them. Likewise, there are some services that the pharmacies offer but activity was very low. Some of the services offered are quite new and have not benefitted as expected from the lack of referrals in many places. However, there may need to be a more detailed review as to whether there are specific gaps in provision.
- Increase in pharmacies signing up for services The contractor survey highlighted a willingness for those contractors to provide more services if they were commissioned, if they were not always providing them or were intending to provide them.
   Further investigation and consideration may become necessary to evaluate if there is enough pharmacy provision given the projected growth of the population in future as growth between 2022 and 2032 is expected to be 7.89% 26,268 people, although as this would be spread across the whole county this might mitigate the impact.

### Recommendations

- 1. Raise the visibility of the new services offered by pharmacies to increase awareness and usage.
- 2. Consider the impact of healthcare transformation The recently published 10-year health plan outlines community pharmacies key role in the management of long-term conditions, prevention, and deeper integration into neighbourhood care teams. As such, there will be a period of transformation within the pharmaceutical provision, primary care and neighbourhood health and it might be necessary for an interim review of services if necessary

More detailed discussion of these recommendations can be found in the main body of this assessment <u>here.</u>

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# Introduction and Background

From April 2013, health and wellbeing boards became responsible for producing Pharmaceutical Needs Assessments (PNA) and it is a statutory requirement for health and wellbeing boards (HWBB) to develop and update PNAs and produce one every three years. At the same time responsibility for using PNAs became the basis for determining market entry to a pharmaceutical list.

Under the 2013 regulations anyone who wishes to provide pharmaceutical services must apply through a formal application process to NHS England and NHS Improvement and demonstrate they are able to meet a need or provide better access to pharmaceutical services as set out in the PNA. A copy of this form in contained in Appendix 1.

The PNA should highlight the needs for pharmaceutical services in the area, current provision of services and any future services that are required. The PNA will be used by organisations including Integrated Care Boards (ICB) and the Local Authority (LA) to plan and commission future services. It will also be used by ICBs to identify whether new pharmacies are needed when applications are made.

There have been four previous PNAs published in Shropshire in 2011, 2015, 2018 and 2022. Before publishing the PNA, there is a statutory requirement to hold a 60-day public consultation, and this period was from the \* until the \* 2025, with the final PNA due to be published by 1st October 2025. This document has been prepared by Shropshire's HWBB in accordance with the NHS Pharmaceutical and Local Pharmaceutical Services Regulations 2013 and replaces the PNA previous published in 2022.

The purpose of a Pharmaceutical Needs Assessment (PNA) is to:

- · Assess the pharmaceutical needs for its area
- Publish a statement of its assessment

# The Health and Wellbeing Board and PNA

NHS Pharmaceutical services are defined and governed by the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. The Shropshire Health and Wellbeing Board have a statutory responsibility to publish and keep an up-to-date statement of pharmaceutical need for the local area, which is known as the Pharmaceutical Needs Assessment (PNA). The PNA will enable services to be commissioned to address local priorities and meet locally identified needs.

ICBs will be the organisation responsible for deciding whether new pharmacies can open and they will refer to the PNA when making these decisions. As these decisions may be challenged legally it is important that the PNA complies with regulations and are kept up to date. In order to meet these obligations, the Shropshire PNA will be up-dated every three years. The PNA will also be updated with supplementary statements indicating significant changes in health needs and provision before the three years.

The PNA will determine what is required at a local level which will help commissioners, NHS England, the Local Authority and ICBs, with their commissioning plans. It will provide a focus on the public health role of community pharmacies, the dispensing services and the wider services they can offer to the community

#### **Local Priorities**

## Joint Strategic Needs Assessment and Health and Wellbeing Strategy

Joint Strategic Needs Assessments (JSNAs) establishes the current and future health and wellbeing needs of a population and have been a statutory responsibility since 2007. They are developed in order to provide a single picture of health needs in the local area that identifies local priorities and can support and improve partnerships and strategic planning. The priorities in the Shropshire Health and Wellbeing Strategy are based upon the information from the JSNA. The preparation of a PNA should consider the work of the JSNA.

The scope of the assessment

The PNA will include the following information:

- Current services provided by local pharmacies, including dispensing, public health services and medicines reviews.
- Information about other pharmaceutical services, such as dispensing GP's

- Services in neighbouring Health & Wellbeing Boards areas that may have an impact on needs in Shropshire
- Identifying gaps in provision in Shropshire where additional services may be required

Information from the PNA will address the following principles:

- Pharmaceutical care that supports safe and effective use of medicines
- Pharmaceutical care that provides quality healthcare and public health information and advice to all members of the population
- High quality pharmacy premises that improve access and capacity to primary care services and medicines
- High quality pharmacy premises and standards of services that support key public health priorities
- Locally commissioned enhanced pharmaceutical services that have the potential to reduce avoidable hospital admissions and reduce bed-days
- · High quality pharmaceutical support to prescribers for clinical and cost-effective use of resource

# Process followed for updating the PNA

In order to up-date the previous PNA partners were involved to gather information and engage with the community and stakeholders, this included representatives from:

- The Local Pharmaceutical Committee (LPC)
- NHS England
- NHS Shropshire, Telford and Wrekin, Integrated Care Board
- Public Health
- Healthwatch
- Local Medical Committee

The aim of working with partners was to ensure that the PNA fulfilled all of the requirements outlined in the scope of the assessment above.

#### **PNA Steering Group**

A PNA Steering group was established that included members from the above organisations. The steering group was involved in the production of the PNA and worked together to design the questionnaires, ensure that relevant activity data was available, identify local needs and support the consultation. The terms of reference for the PNA steering group are available in Appendix 2.

#### Overview of actions

Supporting information was collated using various data sources, for example, ONS and Public Health Statistics, as well as dispensing data from NHS Business Services Authority.

A patient survey was designed by members of the steering group and was undertaken supported by Health Watch Shropshire to gather resident's views and experience of using local pharmacies (Appendix 4).

All community pharmacies were contacted and asked to complete a questionnaire designed by members of the steering group in order to capture and update information (Appendix 5).

# Services provided across the border by other Local Authorities

Shropshire Council has nine other neighbouring Local Authorities (LA) and two Welsh Health Boards and some of their pharmacies are close to the Shropshire border. As patients can have their prescriptions dispensed at a pharmacy of their choice, it is often more convenient for them to receive pharmaceutical services (including dispensing) from pharmacies in other LA / Health Board areas. This public consultation document includes the locations and therefore possible impact of services that other LAs' pharmacies, near to our border, provide.

# Consultation on pharmaceutical needs assessments

Regulation 8 of the National Health Service (Pharmaceutical and Local Pharmaceutical Services)
Regulations 2013 requires the HWBB to consult a specified range of organisations on a draft of the PNA, and they must be given a minimum period of 60 days to submit their response. Those organisations are:

- a) Any Local Pharmaceutical Committee for its area (including any Local Pharmaceutical Committee for part of its area or for its area and that of all or part of the area of one or more other HWBBs)
- b) Any Local Medical Committee for its area (including any Local Medical Committee for part of its area or for its area and that of all or part of the area of one or more other HWBBs)
- c) Any pharmacy and dispensing appliance contractor included in the pharmaceutical lists for its area
  - d) Any dispensing doctors included in the dispensing doctors list for its area
  - e) Any pharmacy contactor that holds a local pharmaceutical services contract with premises that are in the health and wellbeing board's area
  - f) Any Local Healthwatch organisation for its area, and any other patient, consumer or community group in its area which in the opinion of HWBB has an interest in the provision of pharmaceutical services in its area
  - g) Any NHS trust or NHS foundation trust in its area
  - h) Any neighbouring HWBB

A formal consultation on the draft PNA was held between the 27<sup>th</sup> June 2025 until 26<sup>th</sup> August 2025, where stakeholders and the public were asked to comment on the assessment and the assumptions that it is making.

# Statutory Consultation Response

In total 39 responses were received from stakeholders through the consultation portal where the draft assessment was hosted, and additionally there were substantive separate responses from the Local Pharmaceutical Committee and the ICB, which are included separately in full.

- 35 of the 39 responses (90%) were from members of the public, which included repondents who said they were an employee of the NHS, a member of a local town or parish council, a carer and a member of a local, additionally one respondent who said they were an employee of another organisation and a local pharmacist competed this survey.
- 19 of the 39 respondents were female (49%).
- The largest age group were 60-69 year olds (31% of responses). 70-79 were the next highest group (28%) and 50-59 (18%).
- 15 of the 39 responses were from residents living in the South West Family Hub area. The North East (13%) were the next highest group, followed by Central East (10%) and South East (10%).
- 23% of respondents said they are read the full document, 67% said they had partially read it.
- 82% of respondents agreed that the purpose of the PNA had been explained, 5% disagreed.
- 56% felt that the draft document was a good reflection of the needs of the population, with 16% disagreeing.
- Most respoindents agreed that the assessment is a good reflection of current pharmaceutical provision in Shropshire (74%), although five respondents (13%) disagreed.
- The majority felt that the draft document effectively identifies issues with accessing the pharmaceutical service provision in Shropshire (72%).
- Over two thirds of respondents (69%) felt the draft document effectively identifies geographical issues with pharmaceutical service provision in Shropshire, 8% disagreed.
- Three quarters of respondents agreed that the draft document effectively identifies the range of pharmaceutical services that are provided in Shropshire. Of those that agreed, three respondents commented on the essential services provided by pharmacies in the South of the county that would otherwise mean problems getting to see a pharmacist due to transportation issues. Another respondent clarified some issues that were wrong in the report. Of the 10 respondents that did not agree, there were 8 comments received, which expressed significant concern over the loss of a local pharmacy in Church Stretton, citing increased overload, long wait times, and poor organization at the remaining pharmacy. There is a strong call for reinstating the closed pharmacy and introducing a 24-hour service to meet the growing needs from new housing developments. Criticism is also directed at the lengthy

- prescription turnaround times and inadequate consideration of patient numbers and cross-county pharmacy services in the assessment document.
- When respondents were asked whether there were any gaps in the draft or things that weren't covered effectively, sixteen (41%) said no, 11 (28%) said yes and the same number said they didn't know. Of the comments received for this question, several topics were mentioned:
  - **Concerns about pharmacy services in rural areas**: focus on delays, accessibility, and resource shortages. The need for improved service timing, local 24-hour availability, and better accommodation of demographic changes is emphasized.
  - **Delays in medication delivery:** There is a significant wait time, often around 7 to 10 days, between ordering medications and receiving them, which is considered unacceptable in places like Ludlow **Pharmacy resource shortages:** Shortages of pharmacists and the loss of pharmacies, such as in Church Stretton, have led to overloaded remaining services and long queues, affecting timely prescription processing
  - Rural accessibility challenges: Rural areas face unique issues due to inadequate public transport, necessitating delivery services and consideration of patient travel distances to pharmacies

    Demographic and service changes: Population shifts, including new families and ethnic diversity, along with new housing developments, increase demand for pharmacy services and highlight the need for 24-hour provision and coordination with neighbouring counties' services
- 54% of respondents didn't know if there were other pharmaceutical services that could be provided by pharmacies in the future to local people in Shropshire that have not been highlighted in this document, but 21% said there were, and another 21% said there weren't. Of those who said yes, home deliveries, B12 injections, housebound vaccinations, and health checks were mentioned, while there was a mention of 24-hour pharmacy service, UTI support beyond those aged 64, increased signposting, more services from GP surgeries.
- Several additional comments were received, including particular issues at a pharmacy in the South of the county; the fact that some pharmacies in the south being closed at a weekend without information being displayed as to where pharmacies were open instead; more being done by pharmacies to take pressure of GPs; more consideration on actual demand and pressures on pharmacies; and organisational change to pool health resources.

Response from Community Pharmacy Shropshire



Community Pharmacy Shropshire is the operating name of Shropshire LPC.

Shropshire Health & Wellbeing Board c/o Feedback and Insight Team Shropshire Council Abbey Foregate Shrewsbury SY2 6ND

Dear Sir/Madam.

Re: Shropshire Pharmaceutical Needs Assessment (PNA) 2025

2 Redfern Rise, Haughton Stafford ST18 9NU Tel. 07870 214487 email peter.prokopa@nhs.net

Peter Prokopa - Chief Officer

Thursday 21st August 2025

Community Pharmacy Shropshire is the operating name of Shropshire Local Pharmaceutical Committee, the body recognised under NHS Act 2006 as being representative of community pharmacy contractors in the geographical area of Shropshire, Telford & Wrekin ICB, is a statutory consultee in the development of the PNA in Shropshire HWBB area and a key stakeholder member of the PNA steering group.

As our full committee does not meet until after the consultation on the draft PNA closes, members have had the opportunity to feed into our response by email, and this response has been shared with members for final input prior to submission.

Following review of the draft Shropshire Pharmaceutical Needs Assessment (PNA) 2025, the document broadly meets the statutory requirements under the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. However, to ensure the PNA is both legally defensible and responsive to local health needs, some areas could be strengthened. This response aims to highlight these areas and provide suggestions for doing so.

#### Geographical spread:

While the draft demonstrates that most residents can access a pharmacy or dispensing GP by car within 10 minutes, there remain access concerns for those without private transport, especially in rural and deprived areas. The reliance on dispensing GPs does not fully substitute for the wider service offer of community pharmacies. The final PNA should more explicitly consider these inequalities and how they may be mitigated through service promotion or development; for example, the PNA as drafted includes reference to the inclusion of services such as Pharmacy First, Hypertension Case Finding and Pharmacy Contraception services under the definition of "necessary services". In rural areas, dispensing practices have been less willing to engage in referring patients to these services, for fear of losing income from dispensing activity associated with providing the services themselves. The ICB has been active in trying to increase referrals to the services from all GP practices, including those in rural areas, but more could perhaps be done to reassure dispensing practices about the benefit to patients in improving access to healthcare for patients alongside the fact that pharmacy contractors will not being encouraging patients on the dispensing lists to have prescriptions dispensed in their pharmacy. We note that in some internal work done as part of the ICB's process in encouraging GP practices to increase referrals to the above services, a significant proportion of dispensing list patients (we understand over 40%) actually reside closer to a community pharmacy than they do to their GP.

The PNA highlights the limited evening and weekend provision, with very few pharmacies open past 6pm and only six open on Sundays. This may be seen as a material access gap, particularly when compared to major urban benchmarks; however, the final PNA should consider an expanded description of relevant services provided across borders, and how these support provision of

pharmaceutical services to residents and patients within Shropshire, outside of GP practice opening hours. For example, the draft PNA mentions the provision of pharmaceutical services across the borders with neighbouring HWBB areas of Telford & Wrekin and Worcestershire (plus Wales, Staffordshire and Cheshire) but fails to note that some of these may contribute to the provision of pharmaceutical services at these times; CP Shropshire suggests that the HWBB considers including details of these within the final PNA. Furthermore, little consideration has been made about what demand is for pharmaceutical services in the evenings and weekends, and how these needs are met by other services, such as provision of medicines by OOH GP services and other urgent and emergency care sites where necessary. Finally, the PNA should consider whether this level of access is sufficient for the population and, if not, whether targeted commissioning through extended hours schemes is warranted.

#### Service provision:

While most essential services are covered, the active provision of advanced services though fairly comprehensive, is perhaps not as wide; however, we would draw attention to the most recent figures from NHS BSA on the provision of advanced services (dated 15th/18th August) which state that the % of pharmacy contractors registered to provide the key advanced services in Shropshire is as follows:

 New Medicine Service:
 43/43 100%

 Pharmacy First:
 43/43 100%

 Hypertension Case Finding:
 42/43 97.7%

 Pharmacy Contraception Service:
 42/43 97.7%

The provision of flu and Covid vaccination services changes annually, so it is more difficult to reflect on the level of engagement at this time, however historically there has been a good level of engagement in recent years.

The picture of provision of locally commissioned services is different, and whilst some of these are unevenly available and awareness among residents is low, provision of services such as EHC and supervision of doses of opioid substitution therapy appears to be met in the areas where demand is highest. Engagement with EHC may have been limited by one large chain not wishing to engage with the public health services contract for the service; however, EHC provision will also be included as an essential part of the Pharmacy Contraception Service nationally from the autumn of 2025, so reduced provision under the local service may be much less significant.

The provision of some of the locally commissioned services being low may not reflect a true picture; for example, only three Independent Prescriber Pathfinder Programme sites were allowed under the programme. Additionally, the Palliative ("Just in Case") Medicines service and Antivirals service provide only very limited funding so levels of engagement by community pharmacy contractors is relatively low. There is already work ongoing to review these services which we expect to conclude over the autumn of 2025 with an increased and improved geographical spread of contractors providing. The contractor survey shows willingness to provide additional services if commissioned. The final PNA should therefore recommend more active commissioning in any areas of unmet need, particularly with reference to locally identified health and care priorities.

The public survey also identified a lack of awareness of services provided by their community pharmacy, which was listed alongside information on gaps in services; whilst CP Shropshire recognises that there is work to do in terms of raising patient and public awareness of the services already offered, this is not an indication that there is a gap in provision of services, and we recommend that this is reflected within the final document.

#### Other factors:

CP Shropshire notes comments on page 5 regarding the potential impact of population growth on effective provision of pharmaceutical services in the future. Whilst we acknowledge the projected figures in 2032, the PNA's focus is for the three years 2025–28, and no evidence has been presented which suggests that there is insufficient provision to meet the needs of the population of Shropshire over this period.

#### Typographical or accuracy comments:

- Pages 3 & 16 add consultation dates
- Page 4 space to be added in "has reduced by 4since..."
- Page 103 has data for Healthy Start Vitamin supplies been obtained?
- Page 129 Enhanced services Flu vaccination is cited as an Enanced Service, however is an Advanced service.

#### Conclusion

CP Shropshire agrees with the overall conclusion of the PNA on page 138 that there are sufficient numbers and a good choice of pharmacy contractors to meet Shropshire's pharmaceutical needs. It is also identified in this section that there is a proportion of public and patients who would like to access pharmaceutical services beyond traditional opening hours, ie in the evenings, overnight and at weekends. Whilst CP Shropshire acknowledges that there will always be a wish from a section of the population for the availability of pharmaceutical services at these times, no evidence has been presented to suggest that the reduced availability of services in the evenings and weekends indicates that there is a gap in provision of services; we are unaware of any 24/7 pharmacy operating in the West Midlands, even in the largest conurbations. This suggests that the demand for services is extremely low and is met by provision of immediately necessary medicines by OOH GP services and other urgent and emergency care centres; provision of health advice is maintained by services such as NHSIII (telephone and online). CP Shropshire recommends that this be more robustly acknowledged by the PNA and not identified as a gap in services.

Point 3 in the PNA's conclusion on page 139 does not actually refer to gaps in the provision of services, but is more aimed at increasing the knowledge of the population around how broader community service provision (especially with respect to locally commissioned services) may lead to improved access to services as a whole; again, CP Shropshire believes that these points should be reflected not as a gap in services, but as an ambition that improved patient awareness of commissioned services might be a facilitator for improved patient outcomes more generally.

Point 4 suggests that more pharmacy contractors be encouraged to provide more services; it is acknowledged that for some services (eg sexual health or substance misuse) not all contractors are registered or actively providing, however this will often reflect the type of neighbourhood in which they operate – the PNA identifies Shropshire as a largely rural, ageing population, so contractors are more likely to engage in sexual health service provision where there is a local need based on the demographic. In addition, the development in commissioning of national services (as previously mentioned with EHC) will also support improved provision for some services.

Finally, it appears from the body of the document, and from the summary, that the conclusion is that there is no gap or need identified in the PNA, currently or in the lifetime of the document, which could only be met by the granting of an application to meet that need; if that is the intention, then this should be clearly stated.

Yours sincerely,

Peter Prokopa MRPharmS (Chief Officer)





Shropshire Health & Wellbeing Board c/o Feedback and Insight Team Shropshire Council Abbey Foregate Shrewsbury SY2 6ND

Dear Sir/Madam,

Re: Shropshire Pharmaceutical Needs Assessment (PNA) 2005 consultation response

Shropshire, Telford and Wrekin Integrated Care Board (ICB) welcomes the opportunity to comment on the draft Shropshire Pharmaceutical Needs Assessment. As of 1 April 2023, NHSE delegated the commissioning of primary pharmacy, optometry, and dental (POD) services to Integrated Care Boards. Shropshire, Telford and Wrekin ICB holds this delegated responsibility for Shropshire Place and is a key stakeholder in the PNA steering group.

We broadly agree with the draft PNA but believe that further consideration is needed in some areas to ensure the document fully reflects local need and provides a resilient basis for future service delivery.

#### Dispensing Practices and Community Pharmacy Provision

Shropshire has a significantly higher proportion of dispensing GP practices than the rest of England due to its predominately rural geography. Dispensing practices provide a vital pharmaceutical supply function for patients who are unable to access a traditional community pharmacy. However, when considering the range of pharmacy services offered within modern community pharmacy, it is important to note that Enhanced and Advanced pharmacy services cannot be offered by dispensing practices.

While the draft PNA does outline the ratio of patients to pharmacy for both 'Community Pharmacies' and 'Community Pharmacies + Dispensing Practices', the ICB feels the evaluation within the draft PNA does not fully take this into account for the recommendation of 'Sufficient numbers and good choice of pharmacy contractors to meet Shropshire's Pharmaceutical needs'. As a specific example, there are concerns over the gap in the ratio of patients to community pharmacy (where full range of services can be offered) in Shropshire vs England and other comparable LA's. The data within the draft PNA indicates there is currently a gap of 811 patients per pharmacy for comparable LA's and 2,510 patients per pharmacy for England, this gap is set to rise 3,390 patients per pharmacy for England by 2032. If comparison with other areas is being used as a benchmark of sufficient numbers of pharmacies, significant gaps like those outline above should be more fully addressed in the final PNA.

#### Distance Selling Pharmacies (DSPs)

It is noted within the data that there is an increased usage of Distance Selling Pharmacies (DSPs) in some locations across Shropshire. Like dispensing practices, DSPs play









vital role in the supply of pharmaceutical care to patients who are unable to access traditional community pharmacies or want to access pharmaceutical services in an alternate manner for convenience. However, DSPs are not permitted to provide essential pharmacy services (such as dispensing) to patients in person, meaning that it can often be extremely challenging to provide the supply of pharmaceutical products to patients urgently when necessary. In addition, recent changes to the national pharmacy contract means DSPs are no longer able to offer any NHS Advanced or Enhanced pharmacy services face to face.

While some patients will opt to have their non-urgent prescriptions supplied by a DSP for reasons of convenience, there will still be a need to access traditional pharmacy services for acute and/or face to face requirements. The ICB feels that areas with high DSP use should be assessed to understand whether this is reflective of patient choice for convenience, or if this is symptomatic of unmet local need for additional community pharmacy provision.

#### Opening Hours and Access to Services

The ICB agrees with the findings that there may be geographical challenges with accessing community pharmacy services on evenings and weekends, with some limited provision centralised around urban centres. However, the ICB feels that the current generic recommendation to review opening hours only encourages a review of opening hours for existing community pharmacy contractors. The current network of community pharmacies have a set of core hours they must be open, and a set of supplementary hours that they open for on a voluntary basis. As independent private contractors, community pharmacies assess whether it is commercially advantageous to open for additional hours before increasing their supplementary hours. While some pharmacies do open for supplementary hours, many are now opting to reduce these hours due to financial challenges within the sector. The ICB feels that a review of opening hours for existing community pharmacies would be unlikely to see existing contractors increasing their supplementary hours to close this gap. If specific gaps are noted, this should be explicitly reflected in the PNA, this may give opportunity for new pharmacy contractors to apply to enter to market to meet this specific need.

In a similar way, the ICB agrees that certain community pharmacy clinical services are not delivered uniformly across the county. While sometimes this may be appropriate based on local need, it is believed there are some services that would benefit from wider provision, such as the NHS Smoking Cessation Service, and locally commissioned services such as substance misuse and sexual health services. However, the current recommendation related to this topic is not specific enough to inform meaningful action following publication in the PNA. The ICB believes where specific gaps exist, they should be explicitly noted in the recommendation.

## Fragility of the Community Pharmacy Network

The ICB broadly agrees with current provision outlined within the draft PNA. However, it is felt that the document does not adequately consider the fragility of the national community pharmacy network within its evaluation of whether the current provision is appropriate. As outlined in the NHS England commissioned independent economic analysis of NHS pharmaceutical services in England, it was found 47% were not profitable in their last year. While recent changes to community pharmacy funding go some way to addressing this, it is estimated there is still a significant national funding









shortfall of across the network - this is evidenced by an average of 8 pharmacies closing per week in England.

Whilst this is a national issue related to community pharmacy funding, and outside the scope of a PNA, it is important that the fragility of the sector is considered when making recommendations. For rural areas like Shropshire, the risks associated with pharmacy closures are greater. Currently, Shropshire has several areas where single pharmacies are covering large geographies, if these single pharmacies fail it has a large impact on the rest of the system. Other providers such as dispensing GP practices and DSPs may be expected to absorb some of the additional supply work should a rural pharmacy close. but they will not be able to deliver the full range of pharmacy services. When evaluating appropriate levels of provision, an appropriate amount of flex should be built into the desired final state to ensure there is capacity to absorb any unexpected closures around a geographical area. The ICB recommends that the fragility of the community pharmacy network is considered when making recommendations within the PNA.

#### Future Direction of Pharmacy Services

The draft PNA clearly outlines the purpose, aims and scope of the PNA, and the ICB welcomes the Shropshire LA assessment of pharmaceutical provision and need. While it is appropriate to consider current scope and availability of community pharmacy services within the PNA, the ICB feels that it is also important to consider the future direction of community pharmacy, primary care, and neighbourhood health when outlining pharmaceutical needs over the next 3 years.

Healthcare in general, but primary care and neighbourhood health in particular, is undergoing a period of significant transformation, with community pharmacy recognised as a key delivery partner. The recently published 10-year health plan outlines community pharmacies key role in the management of long-term conditions, prevention, and deeper integration into neighbourhood care teams. As the PNA will be used to support contracting decisions for the next 3 years, the ICB would like to ensure that there is sufficient flexibility within the findings to ensure that it can support the needs of the local population as we move through this rapidly changing landscape. The ICB feels that it would be appropriate to acknowledge this period of transformation within the PNA and make a commitment to undertake an interim review of need should it be warranted.

#### Conclusion

The ICB supports the overall direction of the draft PNA but believes that these issues should be considered in the final version to ensure provision is equitable, sustainable. and responsive to the needs of Shropshire's population.

We would be happy to provide further information or to contribute to subsequent reviews of need as required.

Yours sincerely,

ffer

James Milner, Head of Pharmacy Integration and Workforce

NHS Shropshire, Telford and Wrekin

# Health Needs Analysis

#### Introduction

Overall, the health and wellbeing of people in Shropshire is predominately good and life expectancy at birth for males in Shropshire at 80.2 years, which is higher than for England (79.1 years), and for females it is 84.0 years for Shropshire versus 83.1 years for England. (OHID 2021-23 data). However, as more of us live longer, we want to ensure that we can maintain good health, and quality of life, for longer - adding life to years as well as years to life.

Most people in Shropshire can expect to live a long life, have a good education, earn a decent wage and live in good accommodation. There are exceptions though, and health inequalities do exist meaning that some of us do not have the same life chances. This may be done due to where we live or other factors such as having a physical or learning disability. Other factors that can affect our health and wellbeing are the lifestyle choices we make such as smoking, drinking alcohol and not being physically active.

The Shropshire Health and Well-being Strategy (HWBBS) identifies key challenges that affect the health and wellbeing of the whole population. It uses evidence presented in the Joint Strategic Needs Assessment (JSNA) to determine priority areas that need to be addressed in order to improve the health of the population.

Shropshire Health and Wellbeing Board has developed a long-term vision for the local population to be healthy and fulfilled. The following priorities for the strategy have been identified:

- Joined up working
- · Improving population health
- · Working with and building strong and vibrant communities
- Reducing inequalities

#### Joint Health and Wellbeing Strategy for 2022-2027

Key focus: These are specific areas of health and being need in Shropshire which have been identified through careful analysis of data – the Joint Strategic Needs Assessment (JSNA)

#### Key area of focus

#### Workforce

During COVID many people lost their job or had to take lower paid and less stable employment. We will work to make Shropshire workplaces fair, happy and healthy places for people to work in and promote wellbeing for all, no matter where they are employed.

This includes promotion of a a fair living wage, and opportunities to progress.

## Mental Health

The 5-year Mental Health Strategy for Shropshire and Telford & Wrekin will guide our ambitions over the next five years. This strategy has a 'life course' approach from pregnancy to childhood to older age. We also want to reduce stigma, normalise mental wellbeing and consider the needs of those providing unpaid care for someone with mental illness.

#### Children and Young People (CYP)

Children and Young People (CYP)
COVID has had a huge impact on many families, and particular focus will be CYP mental health and wellbeing.
This includes children with SEND, the transition stage from child to adult, and support for parents. In addition, plans to create a Trauma Informed workforce will be implemented. Trauma has a life course effect, and although under the CYP header, all age is included. We will also continue to monitor child development at 2.5 years.

# Healthy weight and physical activity

physical activity
Our ambition is to reduce levels of obesity
in Shropshire across all ages. This priority
will be linked to drugs and alcohol,
smoking and mental health, through
preventative work around Musculoskeletal
(MSK) conditions, respiratory health,
Cardio-Vascular Disease (CVD), and cancer
risk; food insecurity and reasons around
obesity will all be included.

#### Evidence of need in Shropshire

COVID-19 has had a measured impact on mental health and general wellbeing. <u>Rates of in-work poverty</u> <u>have increased</u> and Shropshire is a low wage economy.

Shropshire often loses young people due to lack of opportunity to progress, or lack of employment sector/industry which they wish to enter.

#### The Healthwatch Shropshire

The Healthwatch Shropshire May 2020 survey of 568 people, 64% reported a slight or significant impact on mental health. There are an estimated 4,000 children with a mental health disorder in Shropshire. Mental Health Services have noticed a around a 30% increase in children's mental health services activity. Data is showing excess under 75's mortality rate adults with severe mental illness. All this is a concern for Shropshire.

HOW DOES IT IMPACT THE LIVES OF YOUNG PEOPLE? BEIs impact a child's development, their reletionships with others, and increase the risk of engoing in health-harming behaviours, and experiencing power mental and physical health extraores in oddshipsoid. Compared with people with no BEIs, these with 4- BEIs are. To the property of the propert

Nationally and locally, there is growing concern regarding eating disorders in young people along with self-reported suicidal thoughts and self-harm.

64.6% of adults in Shropshire are classed as overweight or obese. Health risks associated with excess weight include: <u>type 2 diabetes;</u> <u>coronary heart disease;</u> some types of cancer, such as <u>breast cancer</u> and bowel cancer, such as breast cancer and self-esteem.

#### What will enable this?

Across all sectors (Health, Local Authority, Business, VCS) senior leadership commitment, embedment in policies and training plans to enable:

- raining plans to enable:

  Promotion of a fair living wage to reduce in-work poverty and promote better health Adoption of 'Thrive at Work' West Midlands across all sectors. A workplace commitment that promotes employee health and wellbeing. Needs of Small & Medium Enterprises (SME)s will be considered.

  Make Every Contact Count (MECC) training to build an informed workforce on preventative health choices.

The 5-year Mental Health Strategy for Shropshire and Telford & Wrekin will guide our ambitions over the next five years. This includes the Community Mental Health Transformation programme which will help improve access, deliver better outcomes and experiences for people outcomes and experiences for people through a more integrated and a holistic care model. A key element is increasing physical health checks for people with erious Mental Illness

As a system, create a trauma informed workforce through training and implementation. This will help professionals, volunteers and communities better identify and support people who have suffered from trauma and build a trauma informed workforce. We will continue to receive and scrutinise reports to the Board for the 0-25 Emotional Health and Wellbeing service provision for CYP. Mental Health work will be led by the Mental Health work will be led by the 5-year strategy above. Social Prescribing will remain a HWBB priority, and a pilot for CYP in south-west Shropshire is rolling out.

This work, including actions, will be driven by the Shropshire Healthy Weight Strategy, currently in development. This will also include the effect of food insecurity and build on work being undertaken currently into the causes and links to the CYP priority above. Promotion of e.g. NHS on line 12-week weight loss plan, Couch to 5k running plan and referral to and uptake of NHS. Health Check, National Diabetes Prevention Programme and Social Prescribing development will continue. Exercise costs will also be considered.

Analysis of the data within the Shropshire Joint Strategic Needs Assessment have identified key areas of focus regarding health and care in the area. These key areas of focus for Shropshire, as outlines in the **Shropshire Joint** Health and Wellbeing Strategy, are summarised in the framework

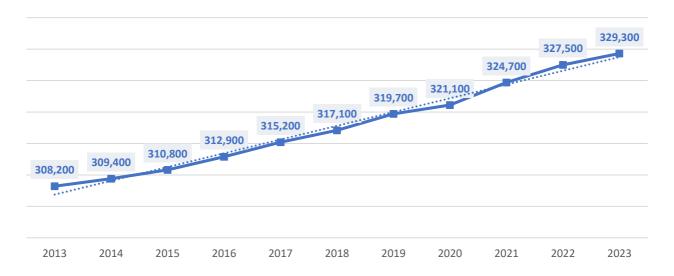
The Shropshire JSNA highlights key health and social care issues that can have an impact upon the population of Shropshire.

# Demography

# Key Demographic Messages for Shropshire:

- Shropshire is a diverse, large, predominately rural inland county with a wide range of land use, economic activities, employment and social conditions.
- The total population in Shropshire stood at 329,300 in 2023 having risen by an average of 0.7% per annum over the last decade.
- 328,393 people are registered at GP practices in Shropshire as of 1<sup>st</sup> February 2025 not all of these people will live in Shropshire, whilst there will be some Shropshire residents that are registered at GP practices in other local authorities.

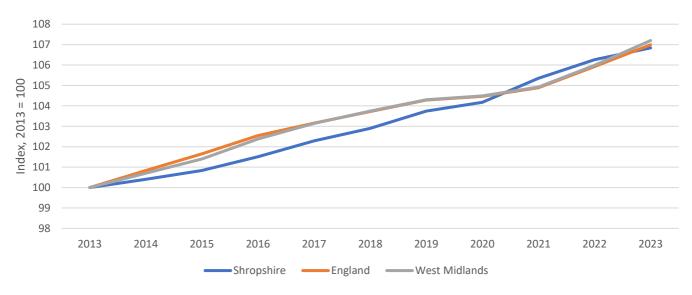
Figure 1: Shropshire Population, 2013-2023



Source: ONS Mid-Year estimates 2023

• Shropshire's population has been increasing at a slightly slower rate (6.8%) than England (7.2%) between 2013 and 2023 (ONS mid-year population estimates). Growth in the Shropshire population is fuelled by migration.

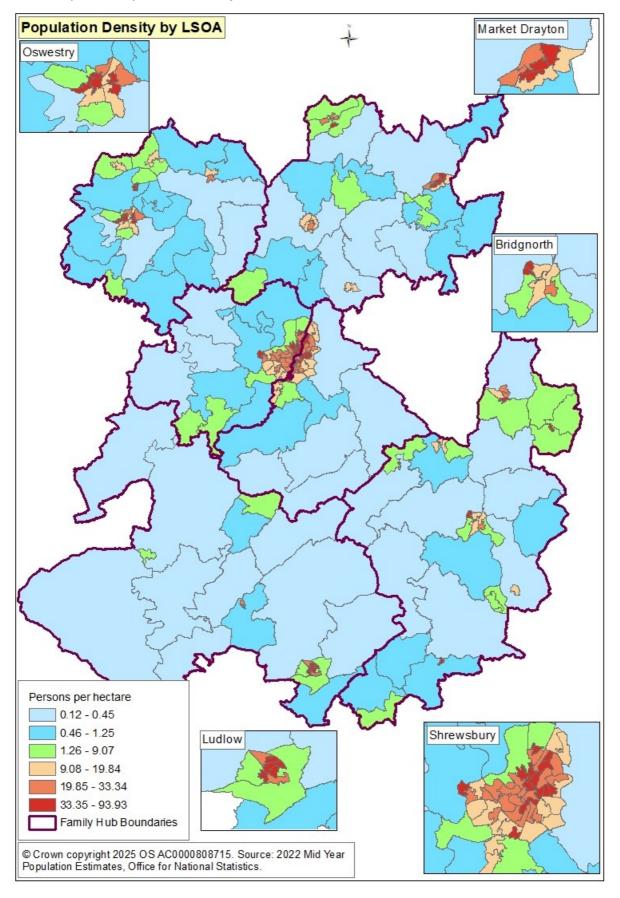
Figure 2: Population Growth, 2013-2023



Source: ONS Mid-Year estimates 2023

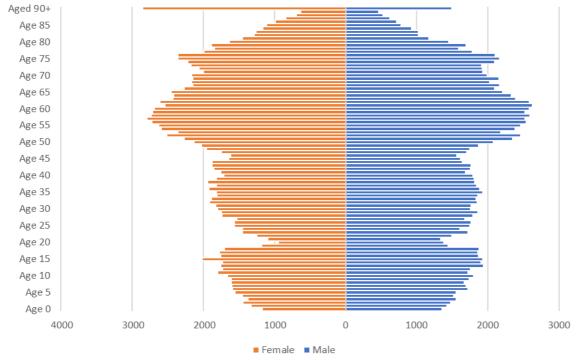
• Shropshire is the second largest inland local authority behind Wiltshire, covering 319,730 hectares and is sparsely populated, with just over one person per hectare (4.3 persons per hectare in England). 97.5% of Shropshire's land mass is rural – the 2.5% of land mass that is classified as urban accommodates approximately 43% of the population (Rural Urban Classification 2011).

Figure 3: Shropshire Population Density



- Shropshire has a relatively high concentration of people in the older age groups. In 2023, 54.2% of the County's residents were aged 45 or over, compared to only 44.0% nationally (ONS 2023 Midyear Estimates).
- 26.2% were aged 65 and above (18.7% in England), while 3.6% were 85+ (2.5% in England)
- The median age of the population in Shropshire is 48.5 compared with 40.5 in England.

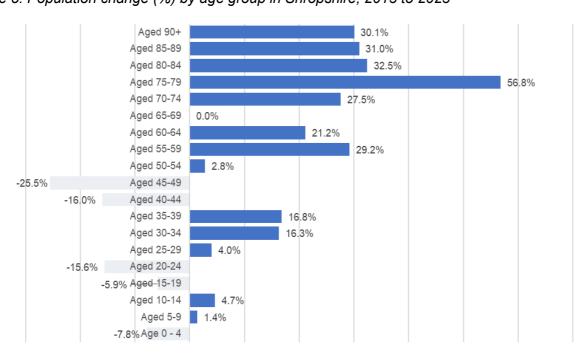
Figure 4: Shropshire Population Pyramid



Source: ONS Mid-Year estimates 2023

- Shropshire, like many parts of the country, has an ageing population. The 65+ population has risen by 25.3% since 2013, while the 85+ population has grown by 30.6%.
- In contrast, the 40-49 age band has declined, and there has also been a reduction in the number of people aged 0-4 and 15-24.

Figure 5: Population change (%) by age group in Shropshire, 2013 to 2023



- There are significantly lower proportions of older people living in poverty in Shropshire. In 2019 3% of Shropshire's population aged over 60 lived in areas within the most deprived 20% of areas within England.
- The population projections for local authorities were last released in 2020, new ones are expected to be released in 2025
- The number of people living in Shropshire is expected to rise by 26,268 between 2022 and 2032, a rise of 7.89%.
- The highest increases in population are expected to be in the older age groups, with the percentage of 65+ expected to increase by 28.99% and the percentage aged 85+ by 51.47%.

Figure 6: Population growth in Shropshire (2022 – 2032)

Popul		Projection	Change 2022 - 2032	% Change 2022-2032	
AGE GROUP	2022	2032	Change 2022 - 2032	// Change 2022-2032	
0-4	14,592	14,755	163	1.12%	
5-9	16,767	16,123	-643	-3.84%	
10-14	18,675	17,767	-908	-4.86%	
15-19	17,266	18,781	1,515	8.77%	
20-24	13,439	14,896	1,457	10.84%	
25-29	16,227	15,023	-1,204	-7.42%	
30-34	18,247	15,978	-2,270	-12.44%	
35-39	18,518	19,110	592	3.20%	
40-44	18,412	21,626	3,214	17.46%	
45-49	19,148	21,806	2,659	13.88%	
50-54	24,642	21,834	-2,807	-11.39%	
55-59	26,859	22,791	-4,067	-15.14%	
60-64	24,806	28,651	3,846	15.50%	
65-69	22,007	30,005	7,998	36.34%	
70-74	21,482	25,693	4,211	19.60%	
75-79	18,742	20,277	1,534	8.19%	
80-84	11,780	16,954	5,174	43.92%	
85-89	7,131	11,446	4,315	60.52%	
90+	4,148	5,638	1,490	35.92%	
All ages	332,884	359,152	26,268	7.89%	

Source: 2020 ONS Population Projections for Local Authorities

# **Ethnicity**

In 2021 96.7% of the population classed themselves as White compared to 81% in England and 81.7% in the West Midland. The number of people from a black and minority ethnic group in Shropshire County has increased from 6,255 (2.0%) in 2011 to 10,731 (3.2%) in 2021 but remains significantly lower than the national average of 19.0%.

Figure 7: Ethnic Populations, 2021 Census

Ethnic Group	Shropshire (%)	England (%)	West Midlands (%)
Asian, Asian British or % Asian Welsh	1.3	9.6	13.3
Black, Black British, Black Welsh, Caribbean or African	0.3	4.2	4.5
Mixed or Multiple ethnic groups	1.2	3	3
Other ethnic group	0.4	2.2	2.1
White	96.7	81	77

Figure 8: Ethnic Sub-Groups, 2021 Census

Ethnic Sub-Group 2021	Shropshire		England		West Midlands	
	Number	%	Number	%	Number	%
Total: All usual residents	323,607	100	56,490,048	100	5,950,757	100
Asian, Asian British or Asian Welsh: Bangladeshi	237	0.1	629,567	1.1	77,518	1.3
Asian, Asian British or Asian Welsh: Chinese	909	0.3	431,165	0.8	33,301	0.6
Asian, Asian British or Asian Welsh: Indian	1,614	0.5	1,843,248	3.3	276,030	4.6
Asian, Asian British or Asian Welsh: Pakistani	443	0.1	1,570,285	2.8	319,165	5.4
Asian, Asian British or Asian Welsh: Other Asian	1,121	0.3	952,127	1.7	88,250	1.5
Black, Black British, Black Welsh, Caribbean or African: African	576	0.2	1,468,474	2.6	146,089	2.5
Black, Black British, Black Welsh, Caribbean or African: Caribbean	300	0.1	619,419	1.1	90,192	1.5
Black, Black British, Black Welsh, Caribbean or African: Other Black	241	0.1	293,831	0.5	32,738	0.6
Mixed or Multiple ethnic groups: White and Asian	1,259	0.4	474,190	0.8	46,478	0.8
Mixed or Multiple ethnic groups: White and Black African	400	0.1	241,528	0.4	16,011	0.3
Mixed or Multiple ethnic groups: White and Black Caribbean	1,126	0.3	499,310	0.9	81,193	1.4
Mixed or Multiple ethnic groups: Other Mixed or Multiple ethnic groups	1,076	0.3	454,350	0.8	34,542	0.6
Other ethnic group: Arab	386	0.1	320,203	0.6	31,790	0.5
Other ethnic group: Any other ethnic group	1,043	0.3	908,950	1.6	92,436	1.6

Source: Census 2021 Topic Summaries: Table TS030, TS031 and TS075, Office for National Statistics (ONS)

Generally, the age profile of people belonging to the minority ethnic groups is younger than the white population and, unlike national trends; the local ethnic population is not concentrated within deprived areas but distributed evenly throughout the County.

#### Deprivation

Key Socio-Economic Messages for Shropshire County

- Overall Shropshire County is a relatively affluent area. In England there are 32,485 'super output areas' (LSOA) of these only 9 LSOAs in Shropshire fall within the most deprived fifth of SOAs in England, (ONS).
- Shropshire is a diverse, large, predominantly rural, inland County, situated in the West Midlands.
  Overall Shropshire is a rural county with around 66% of the population living in areas classified
  as rural. Around 34% of the population resides in areas classed as being urban. Much of the
  South-West of Shropshire is classified as being sparsely populated.
- Shrewsbury is home to around a third of the population and is a key employment, shopping and cultural centre for Shropshire, as well as being a popular destination for tourists and visitors. The county's economy is based mainly on agriculture, tourism, food industries, healthcare and other public services. The profile of Shropshire County, its history, geography and population distribution makes delivering services effectively and efficiently more difficult.
- Shropshire covers 1,235 square miles and there are no areas in Shropshire that are considered major or minor conurbations.

#### The Index of Multiple Deprivation

The Index of Multiple Deprivation (IMD) 2019 is an index calculated from 39 indicators measuring deprivation in its broadest sense. The overall IMD 2019 score combines scores from seven areas (called domains), which are weighted as follows:

- Income (22.5%)
- Employment (22.5%)
- Health and disability (13.5%)
- Education, skills and training (13.5%)
- Barriers to housing and services (9.3%)
- Crime (9.3%)
- Living environment (9.3%)

Overall, in 2019, Shropshire LA was a relatively affluent area and was ranked as the 192<sup>nd</sup> most deprived County out of all 316 Local Authorities in England. The IMD is based on sub-electoral ward areas called Lower-level Super Output Areas (LSOAs), which were devised in the 2011 Census. Each LSOA is allocated an IMD score, which is weighted based on its population. There were 32,845 LSOAs in England; of these only 9 in Shropshire County fell within the most deprived fifth of all LSOAs in England. These LSOAs were located within the electoral wards of Market Drayton West, Oswestry South, Oswestry West, in North Shropshire; Castlefields and Ditherington, Harlescott, Meole, Monkmoor and Sundorne in Shrewsbury and Ludlow East in South Shropshire.

To get a more meaningful local picture, each LSOA in Shropshire LA was ranked from 1 (most deprived in Shropshire) to 194 (least deprived in Shropshire). Shropshire LSOAs were then divided into local deprivation quintiles which are used for profiling and monitoring of health and social inequalities in Shropshire County (1 representing the most deprived fifth of local areas and 5 the least).

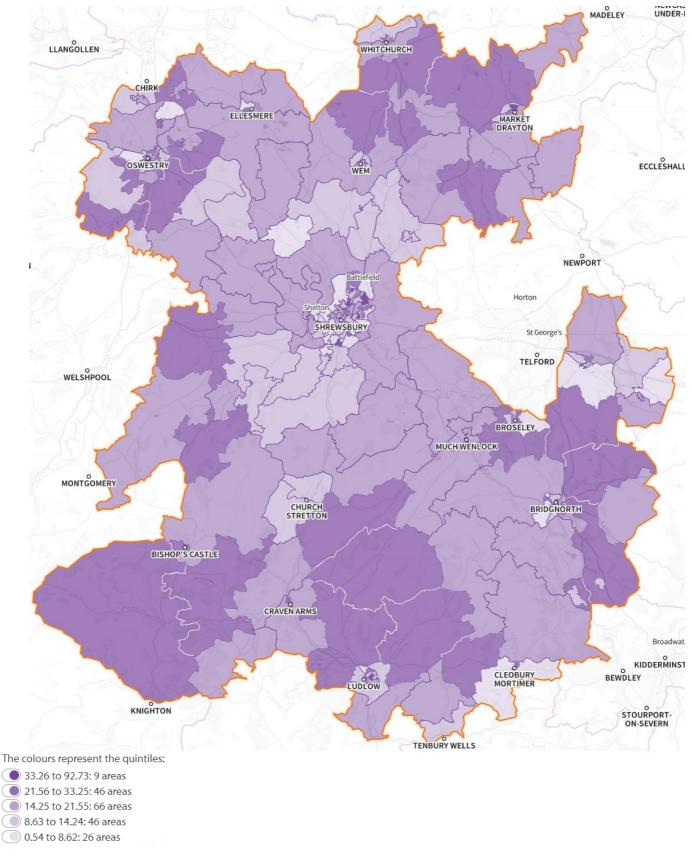
Figure 9 shows a breakdown of Shropshire's population by national decile, with 1 being the most deprived and 10 the least deprived. Just 4.5% of Shropshire's population live in the two most deprived deciles.

Figure 9: Shropshire 2022 population by IMD Decile

IMD National Decile	2022 Population	2022 Population %
1 - most deprived	3,022	0.9%
2	11,769	3.6%
3	9,323	2.9%
4	59,283	18.1%
5	63,820	19.5%
6	52,887	16.2%
7	42,987	13.1%
8	37,049	11.3%
9	29,719	9.1%
10 - least deprived	17,072	5.2%
Grand Total	326,931	100.0%

Figure 10 shows the most deprived areas in Shropshire – the deeper the purple, the greater the deprivation. Deprivation tends to be situated around the major urban settlements in Shropshire (for example, include Shrewsbury, Oswestry, Market Drayton, Ellesmere, Ludlow, Wem) but there are significant areas of deprivation in the County's less densely populated rural areas.

Figure 10: Index of Multiple Deprivation in Shropshire

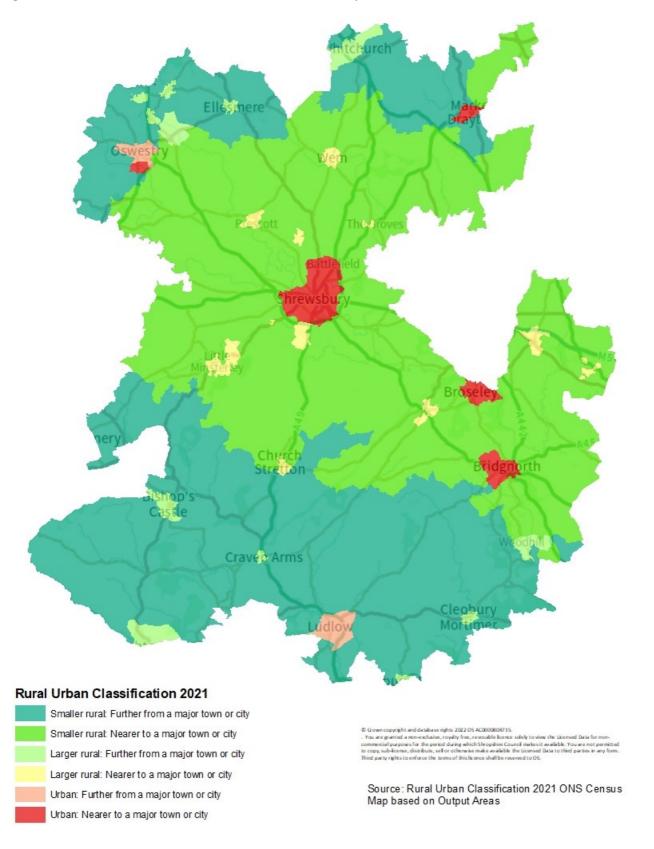


Index of Multiple Deprivation 2019, Ministry of Housing, Communities and Local Government Crown copyright and database rights 2024 Ordnance Survey 100016969

# Rural and Urban Classification in Shropshire

The Rural/Urban classification was introduced in 2004 and defines the rurality of very small geographies. The classification has since been updated in 2011 and again in 2021 to account for the changes in the population identified in the 2011 and 2021 Censuses. The most recently updated classification identifies six settlement types at Census Output Area geographies with "nearer to a major town or city" and "further from a major town or city" replacing the "sparsity" classification that was used in 2011. The main urban areas in Shropshire are Shrewsbury, Market Drayton, Broseley, Bridgnorth, Oswestry and Ludlow.

Figure 11: Rural and Urban Classification 2021 in Shropshire



The majority of the population in Shropshire live in rural locations, at 57.39% of the total. Of the 42.61% of the population that live in urban areas, most live in "Urban: Nearer to a major town or city". More Shropshire residents live in the most rural areas ("Smaller Rural") than in the more densely populated rural areas ("Larger Rural"), and 60% of all those living rurally are classed as living "nearer to a major town or city".

Figure 12: Breakdown of Shropshire Population based on Rural Urban Classification

Rural Urban Classification	% of Population
Urban: Nearer to a major town or city	33.90%
Urban: Further from a major town or city	8.71%
Total Urban	42.61%
Larger Rural: Nearer to a major town or city	11.55%
Larger Rural: Further from a major town or city	10.69%
Smaller Rural: Nearer to a major town or city	22.94%
Smaller Rural: Further from a major town or city	12.21%
Total Rural	57.39%

Source: Rural Urban Classification 2021

Note: Major town or city defined as a built-up area with at least 75,000 usual residents

"Nearer to a major town or city" – residents of an Output Area can access within 30 minutes of travel by road "Further from a major town or city" – residents of an Output Area cannot access within 30 minutes of travel by road

The RUC 2021 classifies local authorities according to eight classifications:

- Urban: Majority nearer to a major town or city
- Urban: Majority further from a major town or city
- Intermediate urban: Majority nearer to a major town or city
- Intermediate urban: Majority further from a major town or city
- Intermediate rural: Majority nearer to a major town or city
- Intermediate rural: Majority further from a major town or city
- Majority rural: Majority nearer to a major town or city
- Majority rural: Majority further from a major town or city

Shropshire is classified as "Majority rural: Majority nearer to a major town or city".

# **Housing Commitments**

The table below sets out a summary of recent housing developments as well as the number of sites with planning permission, allocations and proposed allocations in each market town in Shropshire. There is projected to be a significant number of new houses built in the near future and therefore there is likely to be an increase in population in these areas of new development.

Figure 13: Housing Commitments and Completions in Shrewsbury, the Market Towns and Key Centres

	Settlement	Completions (2006/07 – 2023/24)	Sites with Planning Permission or Prior Approval (at the 31st March 2024)	Allocations without planning permission (at 31 <sup>st</sup> March 2024)	Proposed Allocations without planning permission (at 31 <sup>st</sup> March 2024)	
Strategic Centre	Shrewsbury	6,968	1,811	361	2,410	
S	Bridgnorth	843	616	0	1,050	
entre	Ludlow	770	582	0	30	
oal C	Market Drayton	823	328	0	435	
Principal Centres	Oswestry	1,131	895	260	240	
	Whitchurch	726	803	0	450	
	Albrighton	216	83	110	180	
	Bishop's Castle	128	24	40	0	
	Broseley	276	53	20	0	
	Church Stretton	241	64	0	0	
tres	Cleobury Mortimer	339	25	125	0	
Key Centres	Craven Arms	140	34	325	0	
Key	Ellesmere	533	172	250	0	
	Highley	240	17	0	100	
	Much Wenlock	166	14	0	120	
	Shifnal	1,693	16	0	230	
	Wem	486	160	0	210	
		16,132	5,730	1,505	5,477	

<sup>\*</sup>The completions in each of the settlements includes exception development which contributes to the housing requirement for the settlement. Please Note: The figures provided are net.

Source: Shropshire Council – Five Year Housing Land Supply Statement (2024), Published 13<sup>th</sup> February 2025

#### Overview of Health Needs

The following section is an overview of health and wellbeing in Shropshire looking at both outcomes and wider determinants. It pulls together a range of measures, with the purpose of prompting discussions about local challenges and successes around health and wellbeing across the lifespan. The Public Health Outcomes Framework shows how each local authority has been doing for a number of health indicators compared to other authorities and England.

Shropshire's profile is shown in:

- overarching indicators is shown in Figure 14,
- for wider determinants of health in Figure 15,
- for health improvement in Figure 16,
- for health protection in Figure 17,
- for healthcare and premature mortality in Figure 18,
- for supporting information in Figure 19.

Figure 14: Shropshire Profile for Public Health Outcomes Framework: Overarching Indicators

Indicator		Shropshire			West England Midlands		England			
		Recent Trend	Count	Value	Value	Value	Worst	Range	Best	
A01a - Healthy life expectancy at birth (Male) New data	2021 - 23	-	-	64.7	60.3	61.5	51.8		69.7	
A01a - Healthy life expectancy at birth (Female) New data	2021 - 23	-	-	64.8	60.0	61.9	52.6	0	70.8	
A01b - Life expectancy at birth (Male, 3 year range) New data	2021 - 23	-	-	80.2	78.4	79.1	73.1	0	82.5	
A01b - Life expectancy at birth (Female, 3 year range) New data	2021 - 23	-	-	84.0	82.5	83.1	78.9		86.5	
A01b - Life expectancy at birth (Male, 1 year range) New data	2023	-	-	80.5	78.6	79.3	73.4		82.7	
A01b - Life expectancy at birth (Female, 1 year range) New data	2023	-	-	84.0	82.6	83.2	78.2		86.8	
A01c - Disability free life expectancy at birth (Male)	2018 - 20	-	-	64.7	61.6	62.4	52.7		68.9	
A01c - Disability free life expectancy at birth (Female)	2018 - 20	-	-	66.7	59.9	60.9	51.5	0	68.8	
A02a - Inequality in life expectancy at birth (Male) New data	2021 - 23	-	-	5.2*	10.5*	10.5*	17.2	0	3.6	
A02a - Inequality in life expectancy at birth (Female) New data	2021 - 23	-	-	3.2*	8.5*	8.3*	14.9	0	1.3	
A02b - Inequality in healthy life expectancy at birth ENGLAND (Male)	2018 - 20	-	-	-	-	18.6	-	Insufficient number of values for a spine chart	-	
A02b - Inequality in healthy life expectancy at birth ENGLAND (Female	2018 - 20	-	-	-	-	19.3	-	Insufficient number of values for a spine chart	-	
A02c - Inequality in healthy life expectancy at birth LA (Male)	2009 - 13	-	-	4.3	-	-	-	-	-	
A02c - Inequality in healthy life expectancy at birth LA (Female)	2009 - 13	-	-	2.8		-	-		-	
Overarching indicators at age 65										
A01a - Healthy life expectancy at 65 (Male) New data	2021 - 23	-	-	11.3	9.6	10.1	6.9	0	13.4	
A01a - Healthy life expectancy at 65 (Female) Newdata	2021 - 23	-	-	12.2	10.6	11.2	7.8		14.9	
A01b - Life expectancy at 65 (Male, 3 year range) New data	2021 - 23	-	-	19.5	18.4	18.7	16.1	0	20.5	
A01b - Life expectancy at 65 (Female, 3 year range) New data	2021 - 23	-	-	21.8	20.9	21.1	18.7		23.2	
A01b - Life expectancy at 65 (Male, 1 year range) New data	2023	-	-	19.8	18.6	18.8	16.3	0	20.8	
A01b - Life expectancy at 65 (Female, 1 year range) New data	2023	-	-	21.9	21.0	21.3	19.0		23.9	
A01c - Disability-free life expectancy at 65 (Male)	2018 - 20	-	-	11.0	9.4	9.8	6.2	0	14.6	
A01c - Disability-free life expectancy at 65 (Female)	2018 - 20	-	-	11.7	9.2	9.9	6.4		15.5	
A02a - Inequality in life expectancy at 65 (Male) New data	2021 - 23	-	-	2.1*	5.7*	5.6*	9.7	0	1.5	
A02a - Inequality in life expectancy at 65 (Female) New data	2021 - 23	-	-	1.7*	5.0*	5.0*	9.7	0	0.5	

Figure 15: Shropshire Profile for Public Health Outcomes Framework: Wider Determinants of Health

Indicator		8hropshire			West	England		England	
		Recent	Count	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest
B01b - Children in absolute low income families (under 16s)	2022/23		7,464	14.4%	21.7%	15.6%	35.7%		4.2%
B01b - Children in relative low income families (under 16s)	2022/23		9,786	18.9%	28.4%	19.8%	42.2%		5.2%
B02a - School readiness: percentage of children achieving a good level of development at the end of Reception Review first	2023/24	-	1,908	68.0%	66.2%	67.7%	59.6%	· ·	77.1%
B02a - School Readiness: percentage of children with free school meal status achieving a good level of development at the end of Reception	2023/24	-	168	47.1%	53.9%	51.5%	29.4%	91	66.8%
B02b - School readiness: percentage of children achieving the expected level in the phonics screening check in Year 1 (New Zero)	2023/24		2,287	78.4%	79.8%	80.2%	74.0%		88.0%
B02b - School readiness: percentage of children with free school meal status achieving the expected level in the phonics screening check in Year 1 Revides	2023/24	+	301	65.3%	70.6%	68.1%	54.5%	0	82.3%
B02c - School readness: percentage of children achieving at least the expected level in communication and language skills at the end of Reception	2023/24	-	2,289	81.5%	77.3%	79.3%	70.3%		89.4%
B02d - School readiness: percentage of children achieving at least the expected level of development in communication and language and literacy skills at the end of Reception New data	2023/24	-	1,961	69.9%	67.5%	69.2%	60.7%	D	79.4%
B03 - Pupil absence New face	2023/24		899,464	7.1%	7.3%	7.1%	8.6%	<b>•</b>	5.6%
B04 - First time entrants to the youth justice system	2023		15	53.4	127.4	143.4	340.0		42.0
B05 - 16 to 17 year olds not in education, employment or training (NEET) or whose activity is not known from this	2023/24		363	6.3%	6.1%	5.4%	22.0%	•	0.9%
B05a - Adults with a learning disability who live in stable and appropriate accommodation (NAMERICA)	2023/24	*	619	87.3%	77.2%	81.6%	48.8%		97.4%
B06b - Adults in contact with secondary mental health services who live in stable and appropriate accommodation	2020/21	-		71.0%	48.0%	58.0%	5.0%		86.0%
B07 - People in prison who have a mental illness or a significant mental illness	2018/19	-				7.35%	-	Insufficient number of values for a spine chart	
B08a - Gap in the employment rate between those with a physical or mental long term health condition (aged 16 to 64) and the overall employment rate	2022/23	-	-	10.4	9.9	10.4	20.1	<b>•</b>	1.0
B08a - The percentage of the population with a physical or mental long term health condition in employment (aged 16 to 64)	2022/23	-	-	66.9%	63.7%	65.3%	43.4%		87.3%
B08b - Gap in the employment rate between those who are in receipt of long term support for a learning disability (aged 18 to 64) and the overall employment rate	2022/23	-	-	70.1	70.4	70.9	84.2		50.6
BOSb - The percentage of the population who are in receipt of long term support for a learning disability that are in paid employment (aged 18 to 64)	2022/23	*	50	7.2%	3.2%	4.8%	0.4%		21.1%
B88c - Gap in the employment rate for those who are in contact with secondary mental health services (aged 18 to 69) and on the Care Plan Approach, and the overall employment rate	2020/21	-		67.4	66.7	66.1	76.0	q	47.7
B08c - The percentage of the population who are in contact with secondary mental health services and on the Care Plan Approach, that are in paid employment (aged 18 to 69)	2020/21	-	60	9.0%	7.0%	9.0%	1.0%		29.0%
B08d - Percentage of people in employment	2023/24	-	146,800	80.7%	75.0%	75.7%	61.6%		87.6%
B09a - Sickness absence: the percentage of employees who had at least one day off in the previous week **Territor**	2021 - 23	-		2.6%	2.0%	2.2%	4.5%		0.3%
B09b - Sickness absence: the percentage of working days lost due to sickness absence ***********************************	2021 - 23	-	-	1.0%	1.2%	1.2%	2.7%		0.1%
B10 - Killed and seriously injured (KSI) casualties on England's roads	2023	*	147	68.8	68.9°	91.9			21.9
B11 - Domestic abuse related incidents and crimes New 2013  B12a - Violent crime - hospital admissions for violence (including sexual violence)	2023/24	-	•	23.8*	30.9	27.1	9.9	0	43.2
Keer data	23/24	-	165	18.8	40.6				12.0
B12b - Violent crime - violence offences per 1,000 population New data  B12c - Violent crime - sexual offences per 1,000 population New data	2023/24	1	7,143 710	21.8	36.5°	32.7			69.8
B13a - Reoffending levels: percentage of offenders who reoffend New data	2023/24	-	210			26.2%			40.2%
B13b - Reoffending levels: average number of reoffences per reoffender New data	2022/23		846		3.98				6.20
B13c - First time offenders	2022		310					•	349
B14a - The rate of complaints about noise New data	2023/24		818	2.5*			68.1	D	0.7
B14b - The percentage of the population exposed to road, rail and air transport noise of 65dB(A) or more, during the daytime New dea	2021	-	9,190	2.8%*	3.2%*	4.3%	19.0%		0.9%
B14c - The percentage of the population exposed to road, rail and air transport noise of 55 dB(A) or more during the night-time. New data	2021	-	21,610	6.6%*	7.2%*	8.4%	27.8%	I O	1.5%
B15a - Homelessness: households owed a duty under the Homelessness Reduction Act New 4xx	2023/24		1,515	10.1	12.6	13.4	30.6		3.6
B15c - Homelessness: households in temporary accommodation New Acco	2023/24	-	243	1.6	2.9	4.6	51.9		0.2
B16 - Utilisation of outdoor space for exercise or health reasons	Mar 2015 - Feb 2016	-		16.5%	17.7%	17.9%	5.1%	q	36.9%
B17 - Fuel poverty (low income, low energy efficiency methodology)	2022	-	27,262	18.9%	19.6%	13.1%	24.7%		6.0%
B18a - Social Isolation: percentage of adult social care users who have as much social contact as they would like (18+ yrs) New data	2023/24	*	1,540	43.4%	46.2%	45.6%	33.9%	0	55.3%
B18b - Social Isolation; percentage of adult carers who have as much social contact as they would like (18+ yrs) New days	2023/24	-	45	20.9%	32.2%	30.0%	15.4%	•	47,4%
B19 - Loneliness: Percentage of adults who feel lonely often or always New date	2021/22 - 22/23	-		4.8%	7.2%	6.8%	11.9%		4.0%
Indicators to be replaced with new data sources or definitions:									
1.01i - Children in low income families (all dependent children under 20)	2016	*	6,775	12.0%	20.2%	17.0%	32.5%		6.3%

Figure 16: Shropshire Profile for Public Health Outcomes Framework: Health Improvement

		8	hropshire			England		England	
Indicator	Period		Count		Midlands Value	Value	Worst	Range	Best/
C01 - Total prescribed LARC excluding injections rate / 1,000 (New data)	2023	Trend	2,900	57.6	36.7	43.5	10.3		Highes 72.
C02a - Under 18s conception rate / 1,000	2021		65	12.5	15.2	13.1	31.5		1.
C02b - Under 16s conception rate / 1,000	2021	-	14	2.7	2.4	2.1	7.0	0	0.
C03a - Obesity in early pregnancy (previous method)	2018/19	-	-	24.1%	25.4%	22.1%	30.5%		6.81
C03a - Obesity in early pregnancy 🛕	2023/24	-	-	•	28.7%	26.2%	-	Insufficient number of values for a spine chart	-
C03c - Smoking in early pregnancy (previous method)	2018/19	-	-	14.2%	14.5%	12.8%	29.1%		2.13
C03c - Smoking in early pregnancy   C05c - Smoking in early pregnancy	2023/24	-	420 50	18.4%	13.0%	13.6%	5.0%	Insufficient number of values for a spine chart	4.01
C04 - Low birth weight of term babies C05a - Baby's first feed breastmilk	2022	-	1,720	2.1%	69.7%	71.9%			94.31
C05b - Breastfeeding prevalence at 6 to 8 weeks - current method	2023/24	-	1,076			52.7%*	-	Insufficient number of values for a spine chart	
C06 - Smoking status at time of delivery	2023/24		231	9.9%	7.8%	7.4%	17.5%	•	2.81
C07 - Proportion of New Birth Visits (NBVs) completed within 14 days	2023/24		1,925	79.2%	82.5%	83.0%*	18.9%		99.01
C08a - Child development: percentage of children achieving a good level of development at 2 to 2 and a half years	2023/24	-	1,096	65.7%*	76.5%	80.4%*	22.8%		95.43
COBb - Child development: percentage of children achieving the expected level in communication skills at 2 to 2 and a half years	2023/24	+	1,295	77.6%*	83.7%	86.6%*	24.7%		96.01
C08c - Child development: percentage of children achieving the expected level in	2023/24		1,455	87.2%*	89.6%	91.2%*	66.7%	• 1	1001
personal social skills at 2 to 2 and a half years  C09a - Reception prevalence of overweight (including obesity)	2023/24		580	23.6%	23.4%	22.1%	29.7%		15.21
C09b - Year 6 prevalence of overweight (including obesity)	2023/24		890	34.0%	38.4%	35.8%	45.5%		25.51
C10 - Percentage of physically active children and young people New data	2023/24	-	-	49.5%	47.1%	47.8%	34.5%	0	62.13
C11a - Hospital admissions caused by unintentional and deliberate injuries in children (aged 0 to 14 years) New data	2023/24		330	68.5	73.2	72.7	149.0	þ	29.
(aged 0 to 4 years)  Residue  (aged 0 to 4 years)  Residue	2023/24		140	99.4	92.7	93.2	252.2		37.
C11b - Hospital admissions caused by unintentional and deliberate injuries in young people (aged 15 to 24 years)  New Acc.	2023/24		230	73.9	89.4	88.6	253.0		39.
C12 - Percentage of looked after children whose emotional wellbeing is a cause for concern. New day.	2023/24	-	85	43.0%	40.0%	41.0%	61.0%		14.01
C14b - Emergency Hospital Admissions for Intentional Self-Harm New days	2023/24		220	70.2	107.8	117.0	342.5	0	36.
C15 - Percentage of adults meeting the '5-a-day' fruit and vegetable consumption recommendations (new method) (New san	2023/24	-	-	37.1%	28.7%	31.3%	18.8%		46.71
C15 - Proportion of the population meeting the recommended '5 a day' on a 'usual day' (adults) (old method)	2019/20	-	-	62.2%	52.6%	55.4%	41.4%	0	65.81
(C16 - Overweight (including obesity) prevalence in adults, (using adjusted self- reported height and weight) (New Self-	2023/24	-		65.3%	67.1%	64.5%	77.2%		42.61
C17a - Percentage of physically active adults New data	2023/24	-		73.7%	64.1%	67.4%	48.9%		80.61
C17b - Percentage of physically inactive adults (New 45th	2023/24	-	-	17.5%	24.9%	22.0%	36.6%		10.81
C18 - Smoking Prevalence in adults (aged 18 and over) - current smokers (APS)	2023	-	-	11.4%	12.0%	11.6%	22.3%	o o	4.69
C19a - Successful completion of drug treatment: opiate users	2023	-	42	7.4%	4.7%	5.1%	1.6%		13.01
C19b - Successful completion of drug treatment: non opiate users	2023	•	96	24.3%	29.1%	29.5%	16.1%		56.21
C19c - Successful completion of alcohol treatment	2023	*	223	33.2%	34.3%	34.2%	16.8%	9	60.91
C19d - Deaths from drug misuse Newdoo.  C20 - Adults with substance misuse treatment need who successfully engage in	2021 - 23	-	29	3.1	5.6	5.5	20.5	0	1.
community based structured treatment following release from prison  C21 - Admission episodes for alcohol-related conditions (Narrow) (Persons)	2023/24	+	25	49.0%	51.6%	53.3%	0.0%		96.71
New data	2023/24	*	1,986	535	607	504	890		24
C21 - Admission episodes for alcohol-related conditions (Narrow) (Male) New data	2023/24	*	1,266	698	810	686	1,190		33
C21 - Admission episodes for alcohol-related conditions (Narrow) (Female) New data	2023/24	*	720	387	422	340	654		14
C22 - Estimated diabetes diagnosis rate C23 - Percentage of cancers diagnosed at stages 1 and 2	2018	-	866	71.4%	86.3% 54.7%	78.0%			97.51
C24a - Cancer screening coverage: breast cancer New data	2024	-	33,443		69.1%*				80.71
C24b - Cancer screening coverage: cervical cancer (aged 25 to 49 years old)	2024		32,575	73.4%	65.2%*	66.1%*			77.31
C24c - Cancer screening coverage: cervical cancer (aged 50 to 64 years old)	2024	+	25,946	77.1%	73.7%*	74.3%*	55.3%	<b>1</b> 0	78.81
C24d - Cancer screening coverage: bowel cancer New 6413	2024		51,128	75.9%	70.2%*	71.8%*	52.4%		79.31
C24e - Abdominal Aortic Aneurysm Screening Coverage New data	2023/24		2,051	88.9%	81.9%*	81.9%*	61.2%		90.5%
C24m - Newborn Hearing Screening: Coverage New data	2023/24		2,164	99.0%	99.2%*	99.0%*	92.2%	<u> </u>	99.91
C24n - Newborn and Infant Physical Examination Screening Coverage New data	2023/24	-	2,125	96.4%	96.8%*	96.1%*	86.6%	(C)	98.61
C26a - Cumulative percentage of the eligible population aged 40 to 74 offered an NHS Health Check	23/24	-	44,406	45.0%	73.7%	69.1%	4.2%		1001
C25b - Cumulative percentage of the eligible population aged 40 to 74 offered an NHS Health Check who received an NHS Health Check	2019/20 -	-	17,405	39.2%	35.1%	40.6%	15.8%		100.01
C26c - Cumulative percentage of the eligible population aged 40 to 74 who received an NHS Health check	2019/20 - 23/24	-	17,405	17.6%	25.9%	28.1%	3.2%		80.41
C27 - Percentage reporting a long-term Musculoskeletal (MSK) problem	2023	-	-	21.1%	20.5%	18.4%			10.01
C28a - Self reported wellbeing: people with a low satisfaction score	2022/23	-	-	3.7%	5.2%	5.6%	12.5%		1.91
C28b - Self reported wellbeing: people with a low worthwhile score	2022/23	-	-	2.4%	4.2%	4.4%	9.8%	0	1.69
C28c - Self reported wellbeing: people with a low happiness score  C28d - Self reported wellbeing: people with a high anxiety score	2022/23	-		7.5%	8.5% 22.9%	8.9% 23.3%			3.51
C29 - Emergency hospital admissions due to falls in people aged 65 and over	2023/24		1,205	1,344	1,998	1,984	3,311		1,33
C29 - Emergency hospital admissions due to falls in people aged 65 to 79 New data	2023/24		450	702	973	955	1,806		62
C29 - Emergency hospital admissions due to falls in people aged 80 plus Newdoo	2023/24		755	3.203	4.969	4.969	8.322	0	3.19

Figure 17: Shropshire Profile for Public Health Outcomes Framework: Health Protection

		8	Bhropshir	re	West Midlands	England		England	
Indicator	Period	Recent Trend	Count	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest
D01 - Fraction of mortality attributable to particulate air pollution (new method)	2023	-		3.9%	5.1%	5.2%	3.4%	0	6.9%
D02a - Chiamydia detection rate per 100,000 aged 15 to 24 (Female)  2,400 2,400 to 3,250 23,250	2023	-	240	1,637	1,547	1,962	984		4,777
D02a - Chiamydia detection rate per 100,000 aged 15 to 24 (Male)	2023	-	112	667	746	1,042	478	0	2,657
D02a - Chlamydia detection rate per 100,000 aged 15 to 24 (Persons)	2023	-	359	1,142	1,195	1,546	803		3,379
D02b - New STI diagnoses (excluding chiamydia aged under 25) per 100,000	2023	-	707	216	350	520	3,304		177
D03a - Population vaccination coverage BCG: areas offering universal BCG only	2021/22	-	129	•			-	-	-
D03b - Population vaccination coverage: Hepatitis B (1 year old)	2023/24	-	0	-		•		-	-
D03c - Population vaccination coverage: Dtap IPV Hib HepB (1 year old)  490% 90% to 95% 295%	2023/24	*	2,451	94.6%	91.0%	91.2%	63.6%		97.0%
D03d - Population vaccination coverage: MenB (1 year)  <90% 90% to 95% a95%	2023/24	+	2,447	94.5%	89.7%	90.6%	63.2%		96.8%
D03e - Population vaccination coverage: Rotavirus (Rota) (1 year)  <90% 90% to 95% 295%	2023/24	+	2,406	92.9%	88.0%	88.5%	59.1%		95.1%
D031 - Population vaccination coverage: PCV	2023/24	+	2,486	96.0%	92.5%	93.2%	70.4%	O	97.9%
D03g - Population vaccination coverage: Hepatitis B (2 years old)	2023/24	-	4	100%				-	-
D03h - Population vaccination coverage: Dtap IPV Hib HepB (2 years old)	2023/24		2,696	95.7%	92.7%	92.4%	72.4%	<b>I</b> O	97.8%
D03i - Population vaccination coverage: MenB booster (2 years)	2023/24	_	2 505	92.5%	86.3%	87.3%	63.6W		96.0%
<90% 90% to 95% 295% D03] - Population vaccination coverage: MMR for one dose (2 years old)		,	2,605						
<90% 90% to 95% 25% D03k - Population vaccination coverage: PCV booster	2023/24	+	2,634	93.5%	88.2%	88.9%	67.7%		96.3%
<90% 90% to 95% 295%	2023/24	+	2,626	93.3%	87.3%	88.2%	66.8%	Ö	95.7%
D03I - Population vaccination coverage: Flu (2 to 3 years old)  40% to 65% 265%	2023/24		2,120	50.9%	40.1%*	44.4%	22.0%	0	63.4%
D03m - Population vaccination coverage: Hib and MenC booster (2 years old)  490% 90% to 95% 295%	2023/24	+	2,625	93.2%	87.8%	88.6%	64.2%		96.2%
D04a - Population vaccination coverage: DTaP and IPV booster (5 years)	2023/24	+	2,663	88.7%	82.0%	82.7%	60.0%		94.6%
D04b - Population vaccination coverage: MMR for one dose (5 years old)	2023/24	+	2,866	95.5%	91.9%	91.9%	78.2%	0	97.1%
D04c - Population vaccination coverage: MMR for two doses (5 years old)	2023/24		2,681	89.3%	83.1%	83.9%	60.8%		94.5%
S0% 90% to 95% 295%  D04d - Population vaccination coverage: Flu (primary school aged children)	2023		15,411	71.8%	52.8%*	55.1%	24.3%		81.2%
Compared to the control of the co	2.02.0	•	10,511	71.00	22.0.10	22.11	24.07.0		
13 year old) (Female) Newdata <80% 80% to 90% 290%	2023/24	*	1,427	79.1%	70.8%	72.9%	32.9%		89.2%
D04e - Population vaccination coverage: HPV vaccination coverage for one dose (12 to 13 year old) (Male) New data	2023/24	+	1,274	71.5%	66.0%	67.7%	27.4%		85.2%
DB4f - Population vaccination coverage: HPV vaccination coverage for two doses (13 to 14 years old) (Female)	2022/23		1,178	68.5%	62.9%	62.9%	0.0%		90.7%
20% 80% to 90% 290% D04f - Population vaccination coverage: HPV vaccination coverage for two doses (13 to 14 years old) (Male)			4 400						
<80% 80% to 90% 290%	2022/23	-	1,102	57.4%	57.0%	56.1%	0.0%	•	87.4%
D04g - Population vaccination coverage: Meningococcal ACWY conjugate vaccine (MenACWY) (14 to 15 years)   West data    <80% 80% to 90%   290%	2023/24	٠	2,393	65.4%	71.9%	73.0%	31.9%	•	97.7%
D05 - Population vaccination coverage: Flu (at risk individuals)  <55% 255%	2023/24	+	20,005	45.7%	40.2%*	41.4%	25.8%		51.2%
D06a - Population vaccination coverage: Flu (aged 65 and over)	2023/24	+	61,360	80.0%	76.8%*	77.8%	56.0%		85.3%
D06b - Population vaccination coverage: PPV  -65% 65% to 75% 275%	2022/23	٠	58,485	72.4%	71.3%	71.8%	52.5%	Þ	80.3%
D06c - Population vaccination coverage: Shingles vaccination coverage (71 years)  -50% 50% to 60% 260%	2022/23		1,851	49.0%	45.9%	48.3%	26.3%	•	64.2%
D07 - HIV late diagnosis in people first diagnosed with HIV in the UK	2021 -	-	6	50.0%	44.6%	43.5%	100%		9.1%
25% to 50% 25% to 50% 250%  D08a - Proportion of drug sensitive TB notifications who had completed a full course of treatment by 12 months (Newstan	2022	_	7	100%	84.0%	82.8%	15.4%		100%
<50% 60% to 90% 290%		_	_ ′	100%	G#7076	u£.0%	100 70		100%
D08b - TB incidence (three year average) New data	2021 -	-	18	1.8	9.3	8.0	40.7		0.7
D09 - NHS organisations with a board approved sustainable development management plan	2015/16	*	4	66.7%	55.8%	66.2%	25.0%	O O	100%
D10 - Adjusted antibiotic prescribing in primary care by the NHS s mean England prescribing 2013/14 > mean England prescribing 2013/14	2023	-	188,389	0.94	0.93	0.88	1.18		0.46

Figure 18: Shropshire Profile for Public Health Outcomes Framework: Healthcare and premature mortality

		hropshir	Te .	West	England		England	England	
Indicator	Period		Count		Midlands Value		Worst	Range	Best
		Trend	Count	. value	Value	value	Worst	Range	2001
E01 - Infant mortality rate New data	2021 - 23	-	27	3.5	5.9	4.1	8.4		1.
E02 - Percentage of 5 year olds with experience of visually obvious dental decay New data	2023/24	-		17.9%	21.9%	22.4%	43.4%		11.43
E03 - Under 75 mortality rate from causes considered preventable (1 year range)	2023	-	457	135.9	162.8	153.0	335.6		91.
E03 - Under 75 mortality rate from causes considered preventable (3 year range)	2021 - 23	-	1,379	136.2	176.8	163.7	323.1		93.
E04a - Under 75 mortality rate from cardiovascular disease (1 year range)	2023	-	230	66.8	87.1	77.4	136.2		45.
E04a - Under 75 mortality rate from cardiovascular disease (3 year range)	2021 - 23	-	735	70.1	84.8	77.1	134.5		47.
E04b - Under 75 mortality rate from cardiovascular disease considered preventable	2021 - 23	-	292	27.6	34.3	30.5	54.7		18.
E05a - Under 75 mortality rate from cancer (1 year range)	2023	-	402	113.5	126.3	120.8	182.1		81.
E05a - Under 75 mortality rate from cancer (3 year range)	2021 - 23	-	1,166	109.7	126.6	121.6	180.9		83.
E05b - Under 75 mortality rate from cancer considered preventable	2021 - 23	-	442	41.3	51.7	49.5	91.9		28.
E06a - Under 75 mortality rate from liver disease (1 year range)	2023	-	65	19.3	23.9	21.9	43.5		8.
E06a - Under 75 mortality rate from liver disease (3 year range)	2021 - 23	-	184	18.4	23.8	21.5	46.2		10.
E06b - Under 75 mortality rate from liver disease considered preventable	2021 - 23	-	170	17.1	21.6	19.2	42.5		9.
E07a - Under 75 mortality rate from respiratory disease (1 year range)	2023	-	79	21.6	37.0	33.7	82.4		13.
E07a - Under 75 mortality rate from respiratory disease (3 year range)	2021 - 23	-	219	20.0	34.0	30.3	73.8		12.
E07b - Under 75 mortality rate from respiratory disease considered preventable	2021 - 23	-	119	10.7	19.8	18.0	44.2		6.
E08 - Mortality rate from a range of specified communicable diseases, including influenza	2021 - 23	-	109	8.5	13.9	13.0	25.5		7.
E09a - Premature mortality in adults with severe mental illness (SMI)	2021 - 23	-	730	92.8	115.1	110.8	232.5		55.
E09b - Excess under 75 mortality rate in adults with severe mental illness (SMI)	2021 - 23	-	-	436.0%	328.5%	383.7%	644.7%	•	158.69
E10 - Suicide rate New data	2021 - 23	-	110	12.8	10.7	10.7	19.6	<u> </u>	4.
E11 - Emergency readmissions within 30 days of discharge from hospital	2023/24	-	4,655	13.5%	15.2%	14.8%	20.6%		10.81
E12a - Preventable sight loss: age related macular degeneration (AMD)	2023/24		69	80.1	108.5*	105.1	227.2		36.
E12b - Preventable sight loss: glaucoma New data	2023/24	-	35	17.9	15.71	14.3	31.9	<u> </u>	4.
E12c - Preventable sight loss: diabetic eye disease New data	2023/24	-	8	2.7	2.9*	3.0	12.7		1.
E12d - Preventable sight loss: sight loss certifications New data	2023/24	-	152	46.2	45.41	43.5	92.5		9.
E13 - Hip fractures in people aged 65 and over New data	2023/24	-	425	469	581	547	849		36
E13 - Hip fractures in people aged 65 to 79 New data	2023/24	-	130	197.3	259.1	237.8	375.0	0	140.
E13 - Hip fractures in people aged 80 and over Newdots	2023/24	-	295	1,258	1,513	1,444	2,224		91
E14 - Winter mortality index	Aug 2021 - Jul 2022	-	100	7.7%	8.8%	8.1%	30.1%	O	-6.8
E14 - Winter mortality index (age 85 plus)	Aug 2021 - Jul 2022	-	70	13.6%	12.4%	11.3%	49.3%	d	-11.3
E15 - Estimated dementia diagnosis rate (aged 65 and older) > 66.7% (significantly) similar to 66.7% < 66.7% (significantly)	2024	-	3,474	60.9	62.1	64.8	51.3		90.

Figure 19: Shropshire Profile for Public Health Outcomes Framework: Supporting information

			hropshir		West Midlands	England		England	
Indicator	Period	Recent Trend	Count	Value	Value	Value	Worst/ Lowest	Range	Bect/ Highest
Deprivation score (IMD 2019)	2019	-		17.2	25.3	21.7	45.0		5.8
Deprivation score (IMD 2015)	2015	-	-	16.7	-	21.8	42.0		5.7
Supporting information - % population aged under 18 New data	2023		59,393	18.0%	21.8%	20.8%	14.3%		28.9%
Supporting information - % population aged 65+ New data	2023	+	86,166	26.2%	18.9%	18.7%	5.8%	0	30.4%
Percentage of population from an ethnic minority background. New data	2021	-	21,691	6.7%	28.2%	26.5%	3.5%		85.2%

Shropshire has a total population of 329,260 residents, according to the 2023 mid-year population estimates. As of 1<sup>st</sup> February 2025, 328,393 people are registered at the 37 GP practices within Shropshire. 18.0% of the population are aged under 18 (England is 20.8%), and 26.2% of the population are aged 65 or over (England is 18.7%). 1.8% of the population are from a black or minority ethnic (BME) population (England is 13.6%). In the 2021 census, 6.7% of the population described themselves as non-white UK (i.e., not white British, English, Northern Irish, Scottish, or Welsh), compared to 26.5% for England as a whole. In Shropshire, 1,737 people (0.6% of the population) report that they cannot speak English well or at all, compared to 1.9% in England.

The Indices of Deprivation (IMD) combine a range of economic, social and housing indicators to provide a measure of relative deprivation, i.e., they measure the position of areas against each other within different domains. A rank of 1 indicates highest deprivation. Shropshire is ranked 174 out of 317 lower tier local Authorities in England on overall deprivation and is ranked 193 on income deprivation.

18.1% of pupils (7,222) attending nursery, primary, secondary, alternative provision and special schools in Shropshire are eligible for free school meals. This compares to 27.9% of pupils in the West Midlands region

and 23.8% of pupils for England as a whole.

The average attainment 8 score in Shropshire in 2022/23 was 44.3 compared to 46.2 for England and 44.8 for the West Midlands region - attainment 8 is the mean average scores for pupils at the end of key stage 4 from all maintained secondary schools, academies and free schools and this is obtained across 8 qualifications (double weighted maths, an English element, three from any science subjects, computer science, history, geography or languages, and the three from other subjects, including English language or literature (if not counted in the English slot), further GCSE qualifications (including EBacc subjects) or any other technical awards from the DfE approved list. For children in care, the average attainment 8 score for Shropshire in 2022/23 was 19.0, while in England overall this was 19.4 and 21.1 in the West Midlands region. In Shropshire in 2022/23, 7.9% of 16- to 17-year-olds were not in education, employment or training (NEET) or whose activities is not known, compared to 5.2% in England. The median gross weekly wage for employees living in Shropshire is £524.40. This compares with an England wage of £565.70. 14.4% of children. In 2023/24, 80.7% of working age people (16-64) in Shropshire are unemployed, compared with 75.7% for England overall.

The life expectancy at birth in Shropshire is 80.2 years for males and 84.0 years for females, based on 2021-23 data. This compares with 79.1 years for males and 83.1 years for females for England overall. At the last Census (2021) 5.1% (16,445 residents) in Shropshire reported their health as poor or very poor, compared to 5.2% in England, and 18.5% (59,990) reported being disabled under the equality act which impacted on their day-to-day activities a little or a lot, compared to 17.3% in England. People in Shropshire can expect a healthy life expectancy of 64.7 years for males and 64.8 years for females (2021-23 data), which compares to 61.5 years for males and 61.9 years for females in England. The under 75 mortality rate for deaths from all causes is 305.1 in 2023, for comparison, this was 367.9 in the West Midlands region and 341.6 for England.

According to the active lives adult survey, 66.1% of adults in Shropshire self-reported being obese or overweight in 2022/23, compared to 64% for England and 70.9% of adults in Shropshire report that they are physically active (do at least 150 moderate intense minutes of physical activity per week in bouts of 10 minutes or more in the previous 28 days), compared to 67.1% in England. Between 2019/20 and 2023/24, 45% of the eligible population aged 40-74 in Shropshire were offered an NHS Health Check, and 39.2% received one. This compares to 69.1% and 40.6% respectively for England overall. In 2023/24 23.6% of children aged 4-5 years and 34% of children aged 10-11 whose weight was recorded were reported as obese or overweight. This compares with 22.1% of children aged 4-5 years and 35.8% of children aged 10-11 for England as a whole.

#### Lifestyle Risk Factors

Lifestyle risk factors to health are lifestyle behaviours that adversely affect health, for example, smoking, lack of physical activity, etc. These behaviours are important as many of them lead to developing long term conditions and non-communicable diseases, for example smoking can cause lung cancer. Therefore, disease can be prevented by tackling poor lifestyle behaviours. Lifestyle risk factors are of a concern to the health of the population in Shropshire as they are affected by health inequalities, for example, more smokers in more deprived areas and fewer people are physically active in older age groups.

- Current smoking prevalence in adults 18+ in Shropshire is 11.4% and is similar to the England average of 11.3%, (OHID 2023 data).
- Smoking in early pregnancy in Shropshire is higher than the England average, 18.4% compared to 13.6%, and likewise smoking at the time of delivery is also higher than England, 9.9% compared to 7.4% (OHID 2023/24 data).
- In 2022/23 it was estimated that 66.1% of adults in Shropshire are either overweight or obese, which is slightly below the England figure of 64%.
- In 2022/23, just under a fifth of adults (19.1%) are classed as physically inactive in Shropshire, lower than the England figures of 22.6%. By contrast 70.9% are considered physically active, compared to 67.1% in England.
- In 2023/24 Shropshire had a significantly higher rate of admissions for alcohol-related conditions with 535 per 100,000 people compared to 504 for England. Admission episodes for males were similar to England (698 per 100,000 compared to 686 in England), however the rate for females in Shropshire was significantly higher than England (387 compared to 340).
- In 2023, in Shropshire 33.2% of alcohol users left structured alcohol treatment who then did not re-present to treatment within 6 months, compared to 34.2% in England.

- In 2023, Shropshire has a significantly higher percentage of successful completion of drug treatment among opiate users than England (7.4% compared with 5.1%) but was significantly lower for non-opiate users (24.3% compared to 29.5%).
- The proportion of clients entering drug treatment identified as having a mental health treatment need, who were receiving treatment for their mental health was 66.1% in Shropshire in 22/23 compared to 74.8% in England
- The proportion of clients entering alcohol treatment identified as having a mental health treatment need, who were receiving treatment for their mental health was 68.0% in Shropshire in 22/23 compared to 83.7% in England

### Long-term Conditions

Long term conditions are defined as health problems that require on-going management over a period of years or decades. This can include non-communicable diseases such as cardio-vascular disease (CVD), some communicable disease such as HIV, some mental health disorders such as depression and some on-going impairment such as blindness. Long term conditions are conditions that cannot, at present, be cured, but can be controlled by medication and other therapies.

Many long-term conditions and non-communicable disease are the result of lifestyle risk factors and changing demographics. Increases in the ageing population, increases in obesity and other lifestyle risk factors and possible increases in health inequalities will all lead to an increase in the prevalence of long-term conditions. This can lead to pressure on current service provision. Long term conditions therefore are a significant area of concern in Shropshire. In the 2024 survey of GP patients, 63.8% of respondents from NHS Shropshire, Telford and Wrekin Integrated Care Board stated they had a physical or mental health conditions or illness lasting 12 months or more, compared to 60.6% in England.

### Teenage conception rates

Studies have shown that teenage pregnancy is associated with poorer outcomes for both young parents and their children, such as those mothers being less likely to finish their education, are more likely to bring up their child alone and in poverty and have a higher risk of poor mental health than older mothers. Infant mortality rates for babies born to teenage mothers are around 60% higher than for babies born to older mothers. The children of teenage mothers have an increased risk of living in poverty and poor-quality housing and are more likely to have accidents and behavioural problems.

In 2021 in Shropshire the under-18 conception rate per 1,000 females aged 15-17 was 12.5 (65 conceptions) is slightly lower than the national figure of 13.1 for England. The under 16 conception rate per 1,000 females aged 13-15 for Shropshire of 2.7 (14 conceptions) is slightly above the England figure of 2.1.

#### Mental Health

The Public Health Outcomes Framework (PHOF) includes several measures of general well-being in the population based upon responses in the annual population survey of 2022/23. Respondents were asked to score themselves on a scale of 0 to 10, against several statements.

- 3.7% of people in Shropshire reported a low score for how satisfied they are with their life nowadays, significantly lower than England 5.6%.
- 2.4% of people in Shropshire reported a low worthwhile score for how worthwhile the things they do in their life are, significantly lower than England 4.4%
- 7.5% of people in Shropshire reported a low score for how happy they felt yesterday, lower but not significantly so than England 8.9%
- 18.8% of people in Shropshire reported a high score for how anxious they felt yesterday, significantly lower than England 23.3%.

#### Maternal and Infant Health

- A significantly lower proportion of children in Shropshire live in absolute low-income families (14.4%) compared to the national average (15.6%). (OHID 2022/23), although this figure has been increasing.
- A significantly lower proportion of children in Shropshire live in relative low-income families (18.9%) compared to the national average (19.8%). (OHID 2022/23), although this figure has been increasing.
- Chlamydia detection rates among 15- to 24-year-olds attending sexual health services are noticeably lower in Shropshire (1,142 per 100,000) compared to England (1,546 per 100,000).
- Immunisation is one of the most important mechanisms for protecting individuals and the community from serious diseases. In Shropshire, vaccination coverage exceeds national uptake and also 90% for 8 out of the 12 primary immunisations metrics detailed on the child and maternal health OHID profile. MMR for two doses in 5-year-olds (89.3%) was higher than England uptake figure (83.9%), but short of the 90% target. However, Shropshire's uptake for HPV vaccination coverage for one dose in 12- to 13-year-olds (67.4%) was short of England (71.3%), as was Meningococcal ACWY conjugate vaccine (MenACWY) in 14- to 15-year-olds (65.4% compared to 73%).
- In 2023/24 23.6% of reception and 34.0% of year 6 pupils were classed as either overweight or obese. Both measures are statistically similar to the England score at 22.1% and 35.8% respectively.

The following charts show a range of measures of health and wellbeing in more depth comparing Shropshire to either England or the average across all English authorities for a number of topics:

- · Healthy life expectancy
- Older people's health and wellbeing
- Causes of death and ill health
- Healthy living
- Children's health and wellbeing

### Healthy life expectancy in Shropshire

Life expectancy at birth is the average number of years that a person can be expected to live from birth, assuming that age-specific mortality levels remain constant. Healthy life expectancy is an estimate of expected years of life spent in good health. It has value in the assessment of healthy ageing, health improvement monitoring and health and social care need. There are important socio-demographic differences in healthy life expectancy. People from more deprived populations are more likely to live shorter lives, as well as live a greater proportion of their life in poor health.

Figure 20: Life expectancy at birth for males and females (from 2011-13 to 2021-23) for Shropshire & England

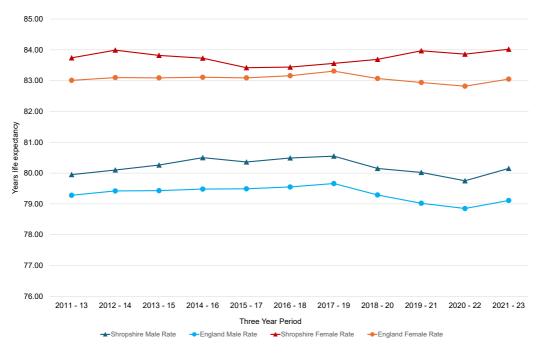


Figure 21: Healthy life expectancy at birth for males and females (from 2011-13 to 2021-23) for Shropshire & England

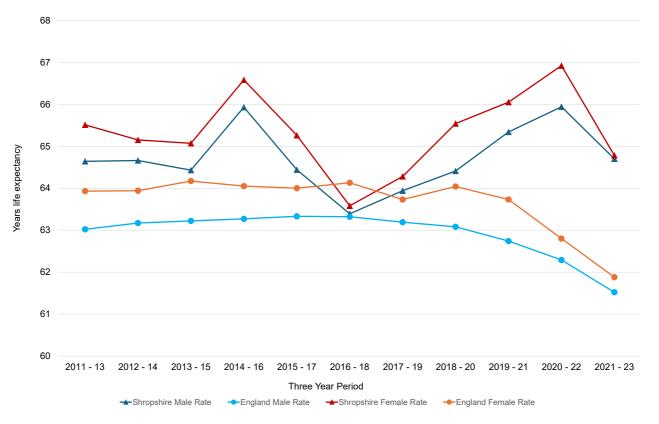


Figure 22: % of people by 'how is your health in general?' (Census 2021) for Shropshire & England

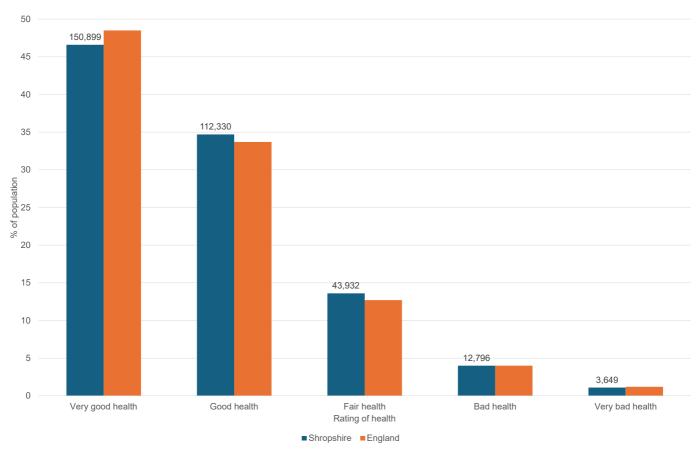
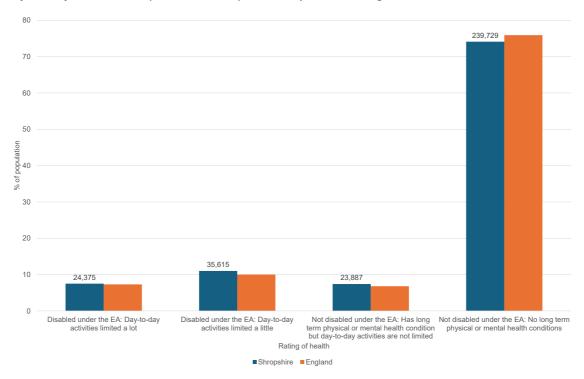


Figure 23: % of people by 'do you have any physical or mental health conditions or illnesses lasting or expected to last 12 months or more, and if yes, do any of your conditions or illnesses reduce your ability to carry out day to day activities?' (Census 2021) for Shropshire & England



### Older people in Shropshire

The growing population of older people is one of the greatest challenges facing health and social care. As the population ages, the health and wellbeing of older people and the provision of services to meet their needs becomes increasingly important. This section explores the relative health and wellbeing of older people in your area.

The Income Deprivation Affecting Older People Index (IDAOPI) is based on the percentage of the population aged 60 and over who receive income support, income based job seekers allowance, pension credit or child tax credit claimants aged 60 and over, and their partners (if also aged 60 or over). A rank of 1 indicates highest deprivation.

Figure 24: IMD Income Deprivation Affecting Older People Index (IDAOPI) - Rank for all single tier and county authorities 2019 for Shropshire (quantiles of All English single tier and county councils)



Disability free life expectancy is an estimate of expected years of life spent without a limiting long-standing illness or disability. It is calculated using self-reports of activity limiting illness, and is therefore a measure of functional health status, which has relevance for fitness for work and independent living.

Figure 25: Disability-free life expectancy at age 65 - male (2018-20) & Disability-free life expectancy at age 65 - female (2018-20) for Shropshire

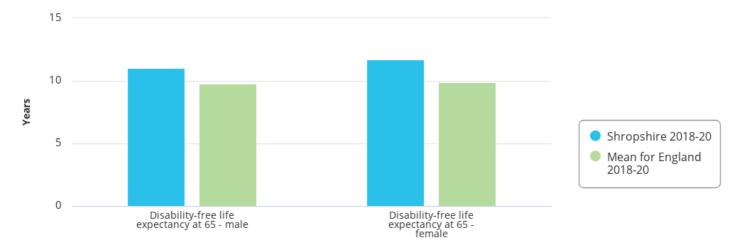


Figure 26: Percentage of households with older people living alone (2021 census) in Shropshire and England

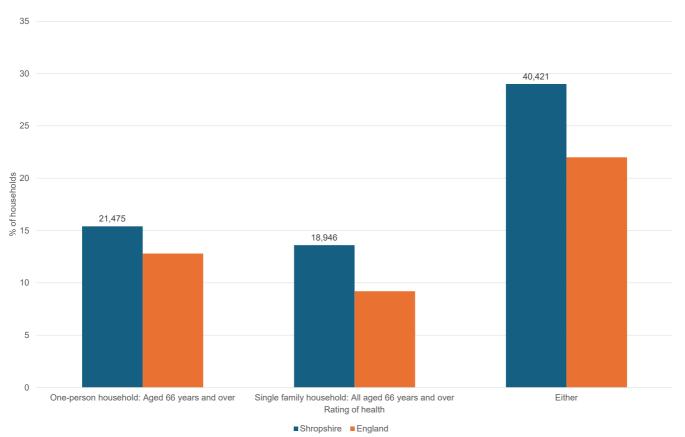
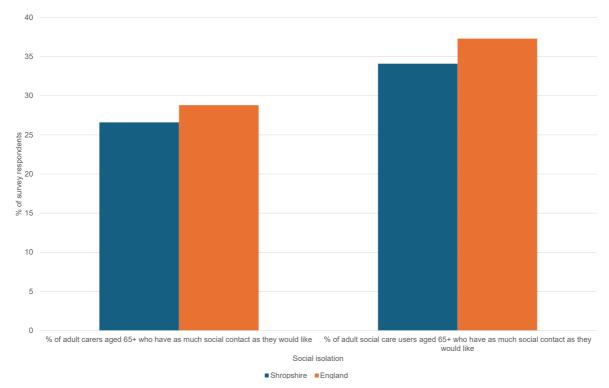
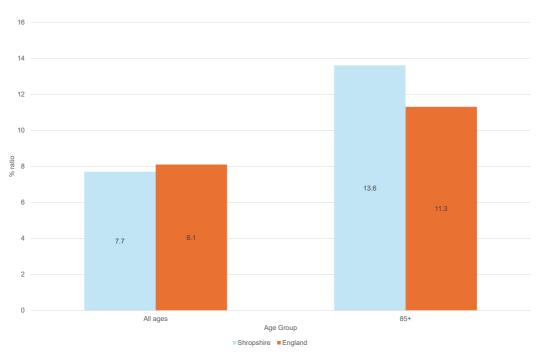


Figure 27: Adult Carers Survey and Adult Social Care Survey - Proportion of people aged 65+ who reported that they had as much social contact as they would like (2021/22) for Shropshire and England



The Excess Winter Deaths Index (EWD Index) is the excess winter deaths measured as the ratio of extra deaths from all causes that occur in the winter months compared with the expected number of deaths, based on the average of the number of non-winter deaths. It is calculated as the number of excess winter deaths divided by the average non-winter deaths, expressed as a percentage. The number of excess winter deaths depends on the temperature and the level of disease in the population as well as other factors, such as how well-equipped people are to cope with the drop in temperature. Most excess winter deaths are due to circulatory and respiratory diseases, and the majority occur amongst the elderly population. Shropshire's overall figures for show 7.7% excess deaths, which is statistically similar to England's 8.1%. When it comes to the people aged 85+, Shropshire's figure of 13.6% is above England's 11.3%, but this is still statistically similar.

Figure 28: Excess winter deaths index all ages and 85+ % (August 2021 to July 2022) for Shropshire and England



## Causes of death and ill health in Shropshire

Premature mortality (early death) is a major public health concern. Mortality and premature mortality (deaths under the age of 75) rates are often used as an indicator of population health. The charts below provide a comparison between Shropshire and England of mortality, premature mortality and causes considered to be preventable (deaths could have mainly been avoided through effective public health and primary prevention intervention) through some of the most common causes of death.

Figure 29: Mortality rates for all ages (directly age standardised rate per 100,000) (2021-2023) from a range of conditions, for Shropshire and England

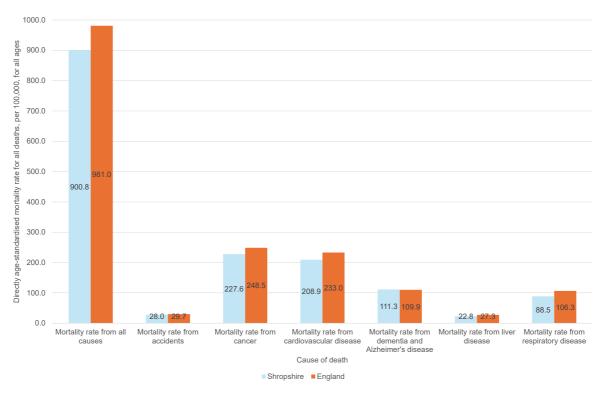


Figure 30: Premature mortality rates (directly age standardised rate per 100,000) (2021-2023) from a range of conditions, for Shropshire and England

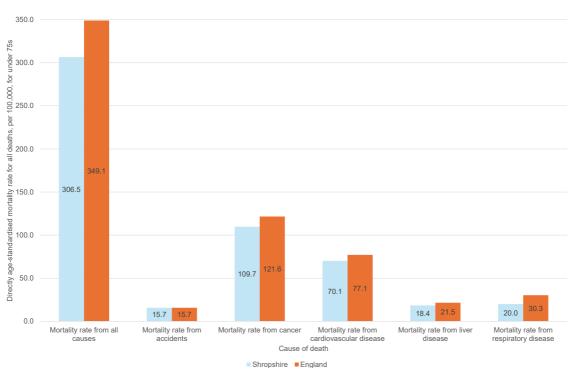


Figure 31: Premature mortality rates from causes considered to be preventable (directly age standardised rate per 100,000) (2021-2023) from a range of conditions, for Shropshire and England

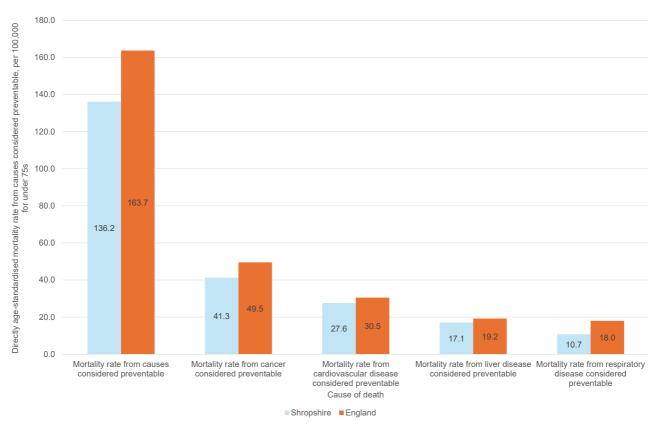


Figure 32: Trends in Premature mortality rate for Shropshire

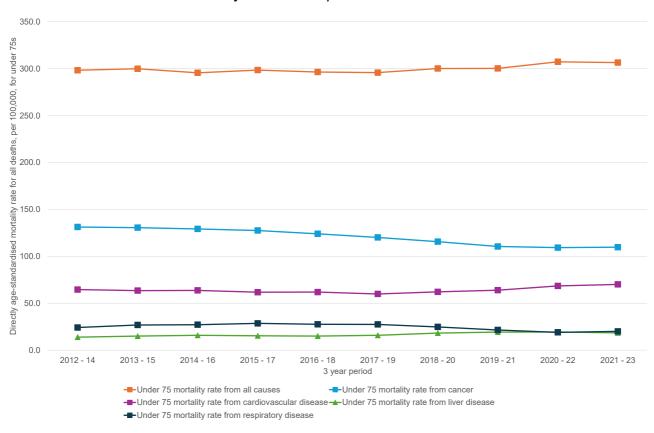
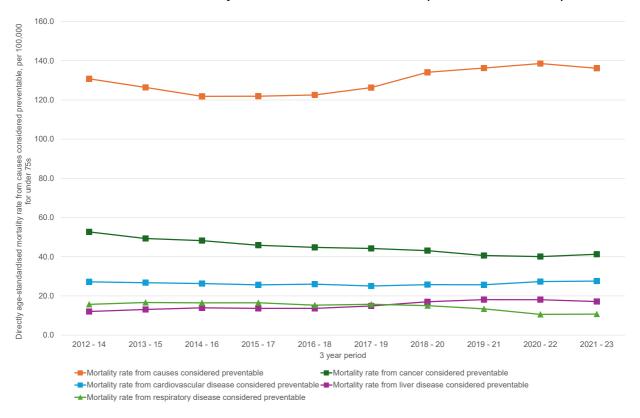


Figure 33: Trends in Premature mortality rate from causes considered preventable for Shropshire



## **Healthy Living**

Lifestyle and behaviour choices are important factors in influencing health. Unhealthy diets and physical inactivity are major risk factors for excess weight and obesity, and a number of serious health conditions including diabetes, cardiovascular disease and certain cancers.

Figure 34: Trends in percentage of people aged 17 years and over with diabetes as recorded on practice disease registers in Shropshire and England

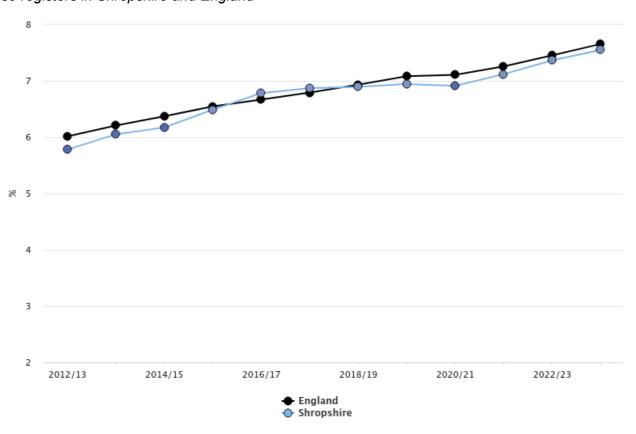


Figure 35: Trends in the percentage of adults (aged 18+) classified as overweight or obese & Percentage of adults (aged 18+) classified as obese, self-reported for Shropshire & England

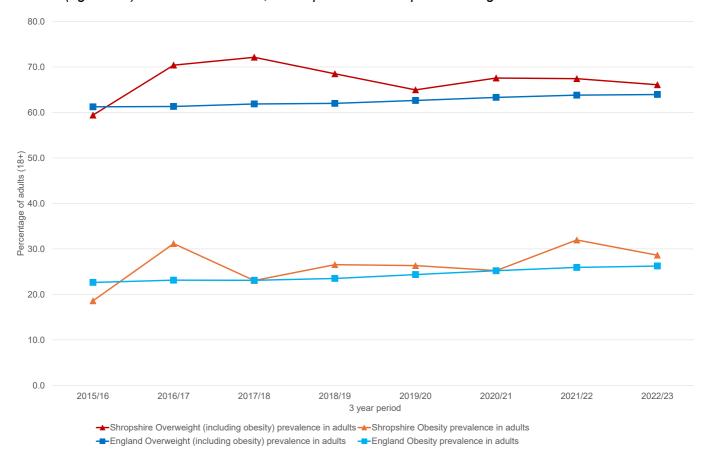


Figure 36: Number of fast-food outlets per 100,000 (2024) for All English single tier and county councils

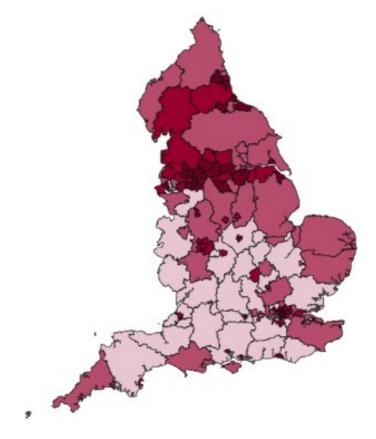


Figure 37: Number of fast-food outlets per 100,000 (2024) for Shropshire and West Midlands local authorities

Area ▲ ▼	Recent Trend	Count ▲▼	Value ▲ ▼		95% Lower Cl	95% Upper Cl
England	-	66,891	115.9	H	115.1	116.8
West Midlands region (statistical)	-	6,896	113.3	Н	110.7	116.0
Stoke-on-Trent	-	375	142.5	<u> </u>	128.4	157.7
Sandwell	-	473	136.1	<u> </u>	124.1	148.9
Birmingham	-	1,586	136.0	<b>⊢</b>	129.4	142.9
Walsall	-	389	134.7	<del>                                     </del>	121.7	148.8
Dudley	-	438	134.1	<del> </del>	121.8	147.2
Wolverhampton	-	360	132.1	<del></del>	118.8	146.5
Coventry	-	449	124.5	<del></del>	113.2	136.5
Telford and Wrekin	-	190	99.0	<b>—</b>	85.4	114.1
Worcestershire	-	603	98.2	-	90.5	106.3
Staffordshire	-	879	97.8	H	91.5	104.5
Warwickshire	-	565	91.5	-	84.1	99.3
Shropshire	-	283	86.0	<b>⊢</b>	76.2	96.6
Solihull	-	175	80.0		68.6	92.8
Herefordshire	_	131	69.0	-	57.7	81.9

Source: OHID, based on Food Standards Agency data

## Children's health in Shropshire

The Income Deprivation Affecting Children Index (IDACI) is based on the percentage of children aged 0-15 living in families that are income deprived - i.e., in receipt of income support, income based jobseeker's allowance or pension credit, or those not in receipt of these benefits but in receipt of Child Tax Credit with an equivalised income (excluding housing benefits) below 60% of the national median before housing costs. A rank of 1 indicates highest deprivation.

Figure 38: IMD Income Deprivation Affecting Children Index (IDACI) - Rank for all single tier and county authorities (2019) for Shropshire (quantiles of All English single tier and county councils)

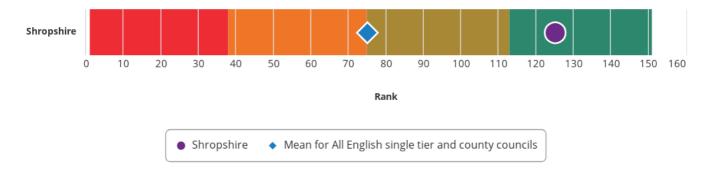


Figure 39: Percentage of babies of low birthweight in Shropshire, West Midlands region and England, 2022

Area	Recent Trend	Count	Value		95% Lower Cl	95% Upper CI
England	→	40,762	7.2	H	7.2	7.3
West Midlands region (statistical)	<b>4</b>	4,915	7.8	H	7.6	8.0
Birmingham	<b>→</b>	1,396	9.6	$\vdash$	9.2	10.1
Sandwell	<b>→</b>	391	9.0		8.2	9.9
Walsall	+	292	8.4		7.5	9.3
Coventry		302	7.7	<u> </u>	6.9	8.6
Wolverhampton	→	254	7.7	<del></del>	6.8	8.6
Dudley	→	264	7.7	<del></del>	6.8	8.6
Solihull	<b>→</b>	141	7.1	<del></del>	6.1	8.4
Worcestershire	<b>+</b>	368	6.9	<del></del>	6.2	7.6
Herefordshire	→	104	6.9	<u> </u>	5.7	8.2
Stoke-on-Trent	<b>+</b>	203	6.8	<u> </u>	6.0	7.8
Staffordshire	<b>→</b>	537	6.8	<del>-</del>	6.2	7.3
Telford and Wrekin	<b>→</b>	131	6.6	<u> </u>	5.6	7.8
Warwickshire	<b>→</b>	367	6.5	<del></del>	5.8	7.1
Shropshire	→	165	6.4	<del></del>	5.5	7.4

Figure 40: National Child Measurement Programme, by BMI category, in Reception Year and Year 6 in 2023/24, in Shropshire and England

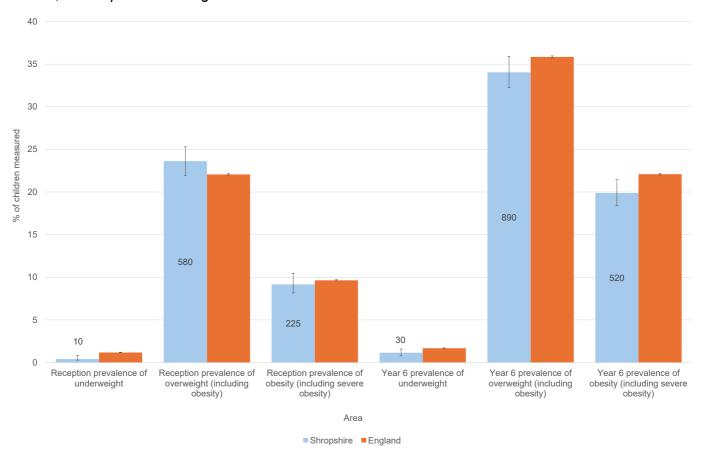
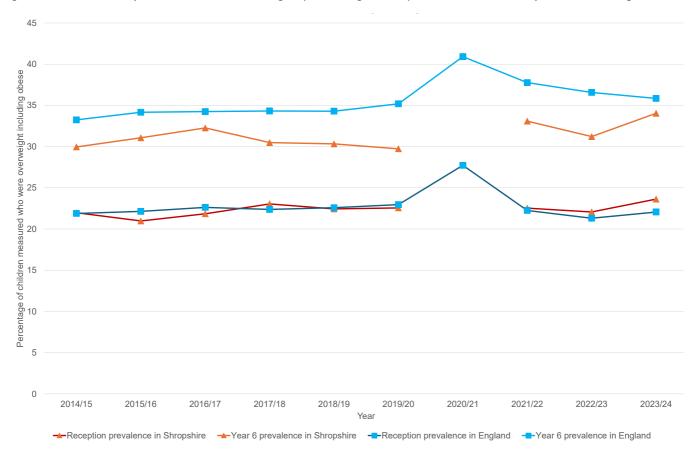


Figure 41: Trends in prevalence of overweight (including obese) in children in Shropshire and England



Children are defined as having a good level of development at the end of the early years foundation stage (EYFS) if they are at the expected level for the 12 early learning goals (ELGs) within the 5 areas of learning

relating to: communication and language; personal, social and emotional development; physical development; literacy; and mathematics. This is a key measure of early years development across a wide range of developmental areas. Children from poorer backgrounds are more at risk of poorer development and the evidence shows that differences by social background emerge early in life.

Figure 42: Percentage of all children achieving a good level of development at the end of reception, (2023/24) for Shropshire, West Midlands and England

Area ▲ ▼	Recent Trend	Count ▲▼	Value ▲▼	95% Lower CI	95% Upper Cl
England	-	411,626	67.7	67.6	67.8
West Midlands region (statistical)	_	45,586	66.2	65.9	66.6
Herefordshire	_	1,247	71.0	<b>⊢</b> 68.8	73.0
Solihull	-	1,861	70.5	H 68.8	72.2
Staffordshire	-	6,324	69.9	₩ 69.0	70.9
Telford and Wrekin	-	1,536	69.0	H 67.1	70.9
Warwickshire	-	4,503	68.2	H 67.1	69.3
Shropshire	-	1,908	68.0	H 66.2	69.7
Worcestershire	-	4,114	67.6	H 66.4	68.8
Walsall	-	2,477	65.7	H 64.2	67.2
Birmingham	-	9,491	65.0	64.2	65.7
Stoke-on-Trent	-	2,027	63.9	H 62.2	65.6
Coventry	-	2,841	63.3	H 61.9	64.7
Dudley	_	2,261	62.9	H 61.3	64.4
Wolverhampton	-	2,187	62.8	H 61.1	64.3
Sandwell	_	2,809	61.8	H 60.4	63.2

Source: Department for Education

Figure 43: Trends in percentage of primary and secondary school enrolments classed as persistent absentees (defined as missing 10% or more of possible sessions in Shropshire & England

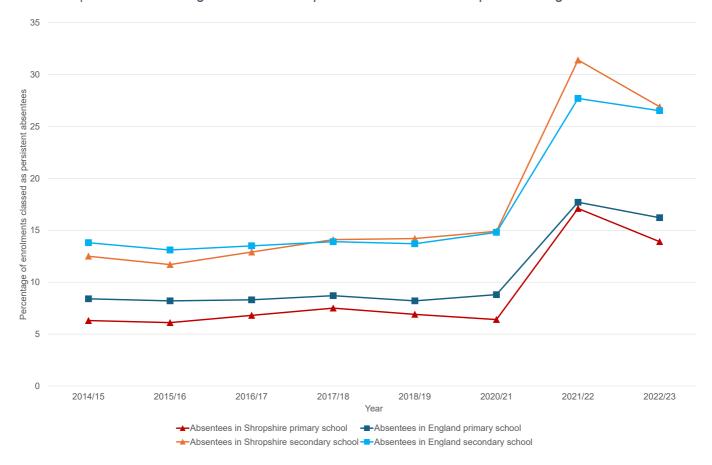


Figure 44: Percentage of 16- to 17-year-olds who are not in education, employment or training (NEET) (2022/23) for Shropshire, West Midlands and England

Area ▲ ▼	Recent Trend	Count ▲▼	Value ▲ ▼		95% Lower Cl	95% Upper Cl
England	<b>+</b>	64,880	5.2		5.2	5.3
West Midlands region (statistical)		7,250	5.2	Н	5.1	5.3
Stoke-on-Trent	<b>†</b>	677	10.9	<b>—</b>	10.1	11.7
Shropshire	<b>→</b>	468	7.9	<b>⊢</b>	7.2	8.6
Dudley	<b>†</b>	571	7.4	H	6.9	8.0
Worcestershire	<b>†</b>	837	6.5	H	6.1	7.0
Birmingham	+	1,922	6.0	H	5.7	6.2
Staffordshire	<b>†</b>	913	5.0	H	4.7	5.4
Solihull	→	254	4.9	<del></del>	4.3	5.5
Herefordshire	+	160	4.3		3.7	5.0
Coventry	+	286	3.5	H	3.2	4.0
Walsall	+	252	3.4	H	3.0	3.8
Warwickshire	→	395	3.3	H	3.0	3.6
Telford and Wrekin	<b>+</b>	137	3.1	H	2.7	3.7
Wolverhampton	<b>+</b>	202	3.1	H	2.7	3.6
Sandwell		181	1.9	ł	1.7	2.2

Source: Department for Education

Figure 45: Trends in under 18s conception rate per 1,000 in Shropshire. Source: Child and Maternal Health Profile, Fingertips, OHID

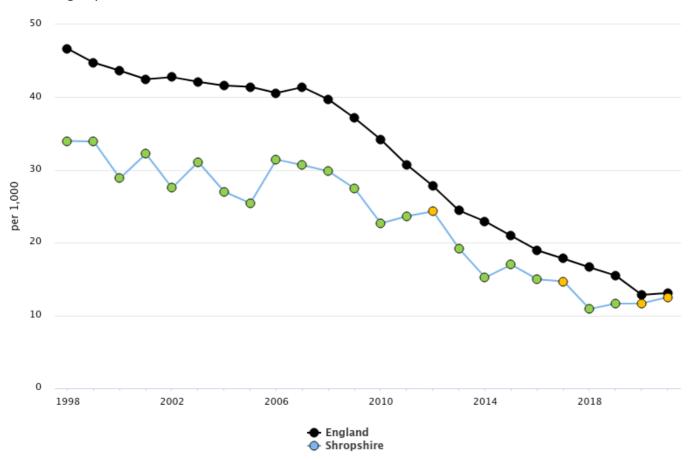
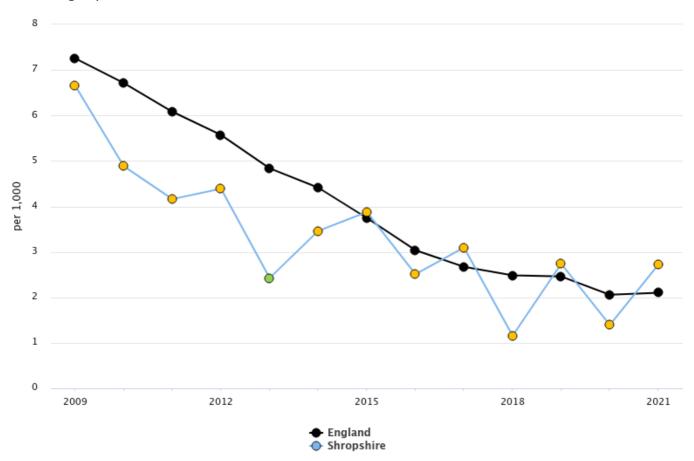


Figure 46: Trends in under 16s conception rate per 1,000 in Shropshire. Source: Child and Maternal Health Profile, Fingertips, OHID



# Localities for the purposes of the PNA: Family hub areas

As part of the pharmaceutical needs assessment a geography needs to be defined in order to split that area into localities. As Shropshire is a very large unitary authority, that contains a large amount of super output areas and electoral wards, an alternative geography was required, one that wouldn't be so small that information can be gathered and would mean this document becomes too large and unwieldy but would allow the variations between areas of the county to be identified.

For this reason, Family Hub Areas have been used which are used by both the local authority and health providers. These are based upon lower level super output areas, but there are 6 family hub areas in total. Figure 47 shows a map of these areas.

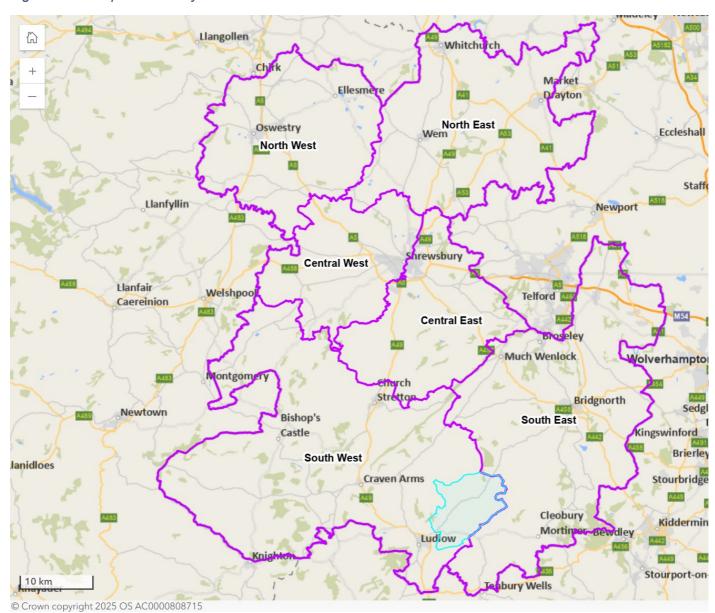


Figure 47: Shropshire Family Hub Areas

Figure 48 shows some of the key population data for each of the family hub areas, as well as Shropshire as a whole. The family hub areas split the largest settlement in Shropshire, Shrewsbury into half between Central East and Central West, and as a result the South East family hub area has the highest population figure. When looking at the age breakdowns, the South West family hub area stands out as having the lowest percentage of its population that are aged under 16 years old (13.3%) and the lowest percentage that are of working age (53.5%), whilst the highest percentage that are 65 or over (33.1%). At the same time the South West family hub area has the by far the lowest persons per square kilometre (38.87) and has the highest deprivation score (19.49)

Figure 48: Key Statistics of Shropshire Family Hub Areas based on 2021 Census

	North East	North West	Central East	Central West	South East	South West	Shropshire
All people	58,366	51,791	50,334	59,342	67,568	36,237	323,606
All females	29,012	26,581	25,615	30,264	33,841	18,640	163,923
All males	29,354	25,210	24,719	29,078	33,727	17,597	159,683
Population aged under 16	9,562	8,408	8,316	10,111	10,069	4,813	51,362
Population aged 16 to 64	34,817	30,539	30,417	35,789	39,217	19,401	190,157
Population aged 65+	13,991	12,846	11,584	13,409	18,230	11,979	82,088
	North	North	Central	Central	South	South	
% population	East	West	East	West	East	West	Shropshire
All females	49.7%	51.3%	50.9%	51.0%	50.1%	51.5%	50.7%
All males	50.3%	48.7%	49.1%	49.0%	50.0%	48.6%	49.3%
Population aged under 16	16.4%	16.2%	16.5%	17.0%	14.9%	13.3%	15.9%
Population aged 16 to 64	59.7%	59.0%	60.4%	60.3%	58.0%	53.5%	58.8%
Population aged 65+	24.0%	24.8%	23.0%	22.6%	27.0%	33.1%	25.4%
Population density persons per square km	109.37	128.96	153.98	215.99	92.78	38.87	101.21
IMD 2019 score	18.1	18.13	16.58	15.54	15.4	19.49	17.15

Figure 49 shows some of the key health statistics for each of the family hub areas, as well as Shropshire as a whole. The South West family hub area stands out as having the lowest percentage of its population that said they were not disabled under the equality act that had no long term physical or mental health conditions (72.1%), and the lowest percentage of people that said they were in very good health (72.1%).

Figure 49: Key Health statistics of Shropshire Family Hub Areas based on 2021 Census

	North East	North West	Central East	Central West	South East	South West	Shropshire
Disabled under the Equality Act: Day-to-day activities limited a lot	4,432 (7.6%)	3,997 (7.7%)	3,810 (7.6%)	4,170 (7.0%)	4,985 (7.4%)	2,961 (8.2%)	24,375 (7.5%)
Disabled under the Equality Act: Day-to-day activities limited a little	6,352 (10.9%)	5,849 (11.3%)	5,663 (11.3%)	6,073 (10.2%)	7,346 (10.9%)	4,332 (12.0%)	35,615 (11.0%)
Not disabled under the Equality Act: Has long term physical or mental health condition but dayto-day activities are not limited	4,148	3,593	3,854	4,478	4,982	2,834	23,887
	(7.1%)	(6.9%)	(7.7%)	(7.6%)	(7.4%)	(7.8%)	(7.4%)
Not disabled under the Equality Act: No long term physical or mental health conditions	43,419	38,336	37,002	44,621	50,242	26,112	239,729
	(74.4%)	(74.0%)	(73.5%)	(75.2%)	(74.4%)	(72.1%)	(74.1%)
Very good health	27,000	24,220	23,362	29,126	31,486	15,704	150,899
	(46.3%)	(46.8%)	(46.4%)	(49.1%)	(46.6%)	(43.3%)	(46.6%)
Good health	20,425	17,845	17,548	19,992	23,366	13,147	112,330
	(35.0%)	(34.4%)	(34.9%)	(33.7%)	(34.6%)	(36.3%)	(34.7%)
Bad health	2,366	2,059	2,008	2,196	2,661	1,498	12,796
	(4.1%)	(4.0%)	(4.0%)	(3.7%)	(3.9%)	(4.1%)	(4.0%)
Very bad health	654	560	553	626	845	434	3,649
	(1.1%)	(1.1%)	(1.1%)	(1.1%)	(1.3%)	(1.2%)	(1.1%)

Figure 50 shows where the people with a disability (disabled with day-to-day activities limited a lot or a little) live in Shropshire by the percentage of people with the darker areas being those areas with a higher number of people. Figure 51 does likewise for the people who said they were in bad health or very bad health.

Figure 50: Percentage of People with a Disability (disabled with day-to-day activities limited a lot or a little) by Lower Super Output Area, 2021 Census

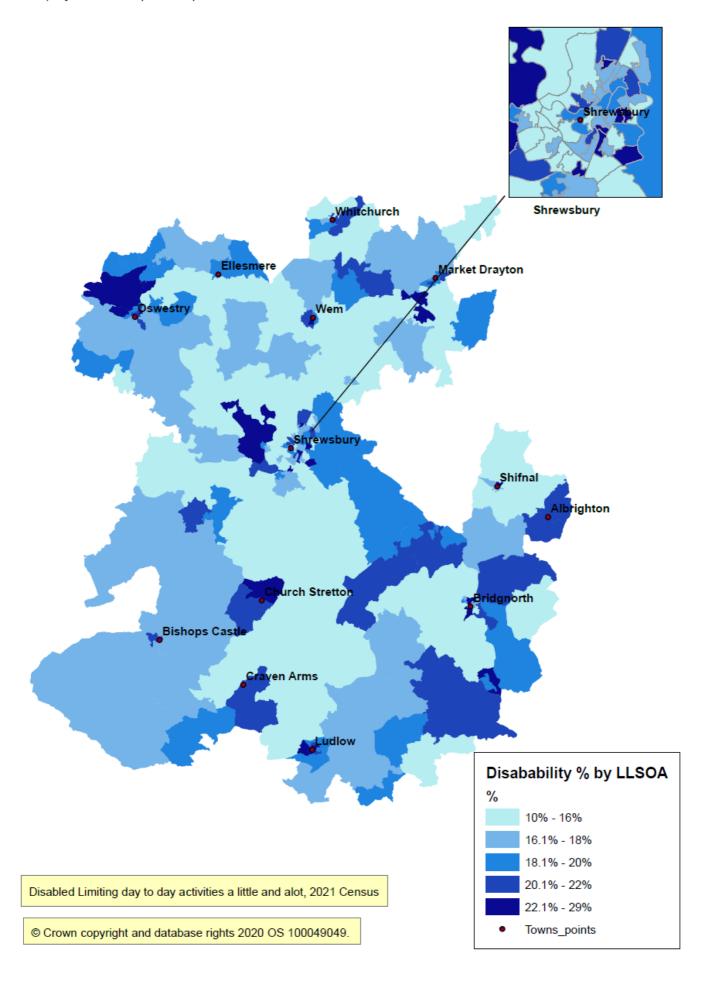
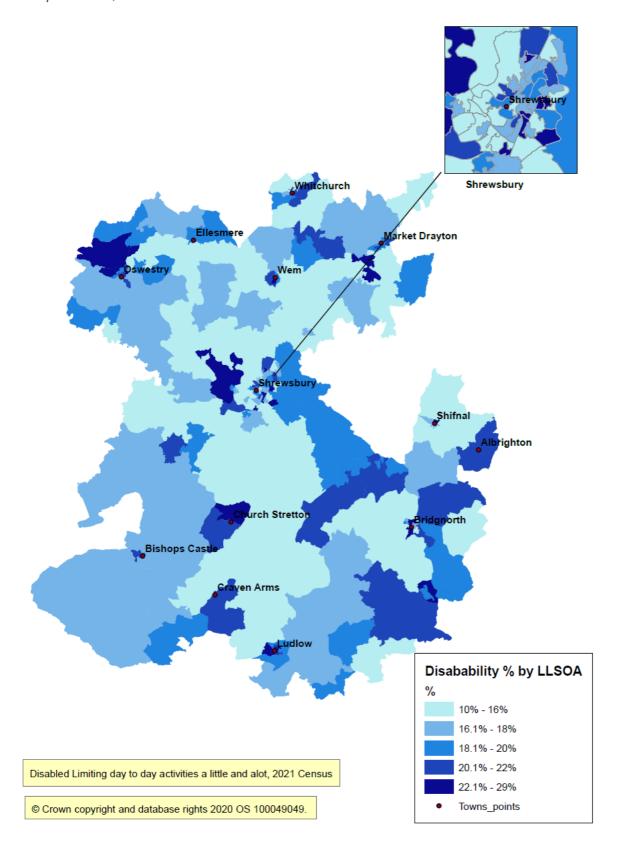


Figure 51: Percentage of People in Poor Health (bad and very bad health combined) by Lower Super Output Areas, 2021 Census



## **Current Pharmaceutical Provision**

Pharmaceutical services in Shropshire are provided by the following:

- · Community pharmacy contractors, including distance selling pharmacies
- Dispensing appliance contractors
- · Dispensing GP practices

The NHS Pharmaceutical Services and Local Pharmaceutical Services Regulations (2013 Regulations) also provides the legal framework that govern the services that pharmaceutical providers can provide. Although dispensing practices provide a wide range of services for their patients, for the purpose of the PNA, only the prescription dispensing services are considered within the regulation and PNA.

There are three levels of pharmaceutical services that community pharmacies can provide:

- Essential services services all pharmacies are required to provide
- Advanced services a range of services that pharmacies can choose to offer, providing Secretary of State Directions are met
- Enhanced services services that can be commissioned locally by Shropshire and Telford and Wrekin ICB

Pharmacies can also provide locally commissioned services which are commissioned by local commissioners such as Shropshire Council and Shropshire, Telford and Wrekin ICB. This section describes the current provision of these services within Shropshire.

As of February 2025, there are 43 pharmaceutical service providers in Shropshire and 35 operating in Telford and Wrekin. There is also one is distance-selling pharmacy operating in Telford and Wrekin, with an additional application for another in Telford and Wrekin too. There are no dispensing appliance contractors in Shropshire (these specialise in appliance devices, including customisation), although there is one in Telford and Wrekin. There are also 17 GP dispensing practices spread throughout Shropshire.

<i>=:</i>					
Figure 52:	Number	of nharm	acies and	d dispensi	ing practices

	Operating in Shropshire	Operating in Telford and Wrekin	Operating across Shropshire and Telford and Wrekin ICB		
Community Pharmacies	43	35	78		
Distance Selling Pharmacies	0	1 (+1 application in process)	1 (+1 application in process)		
Appliance Contractors	0	1	1		
GP Dispensing practices	17	2	19		

One STW ICS GP Dispensing Practice operates two branches which are both dispensing sites, (making 20 STW ICS Dispensing Practice sites).

There are 37 GP practices in Shropshire, of which 17 GP Practices can dispense, although several practices have a main surgery and a branch surgery and don't have a dispensary at both. Dispensing doctors are GP practices who are allowed to both prescribe and dispense prescription only medicines to patients that are outside of a 1.6km radius of a community pharmacy, from within their surgeries. GPs are only allowed to become dispensing practices in specific circumstances. The Health Needs Analysis section shows some of the challenges in Shropshire such as its population sparsity and rurality in parts of the county. These 17 GP dispensing practices have 118,186 patients registered at them as of 1st February 2025, although not all of these patients will be outside of 1.6km of a community pharmacy and therefore ineligible for dispensing practice services. Dispensary opening hours usually reflect the opening times of the practice. The GP Out-of-hours service in Shropshire is currently provided by Shropdoc and can supply medicines in emergency circumstances, but do not routinely dispense medication.

Figure 53 shows the various secondary care providers in Shropshire and nearby. The Shrewsbury and Telford Hospital (SATH) NHS Trust is the only acute trust in Shropshire, which is based on two sites, one in Shrewsbury (Royal Shrewsbury Hospital) and one in Telford (Princess Royal Hospital). There is also the Robert Jones and Agnes Hunt Orthopaedic Hospital NHS Foundation Trust based near Oswestry. Mental health services are provided by Midland Partnership University NHS

Foundation Trust and community services from Shropshire Community Health NHS Trust. There is an urgent care centre at both the Royal Shrewsbury Hospital and at the Princess Royal Hospital. There are three community hospitals open in Shropshire which are sited at Ludlow, Whitchurch and Bridgnorth, additionally just over the southern border there is also the Tenbury Community Hospital, which is run by Worcestershire Health and Care NHS Trust. There are four Minor Injury Units (MIU) one at each of the community hospitals and another at Oswestry health centre. There is also the Severn Fields Health Village (Hub) in North Shrewsbury which is run by the Midlands Partnership University NHS Foundation Trust. Pharmacy provision from hospitals falls outside this PNA.

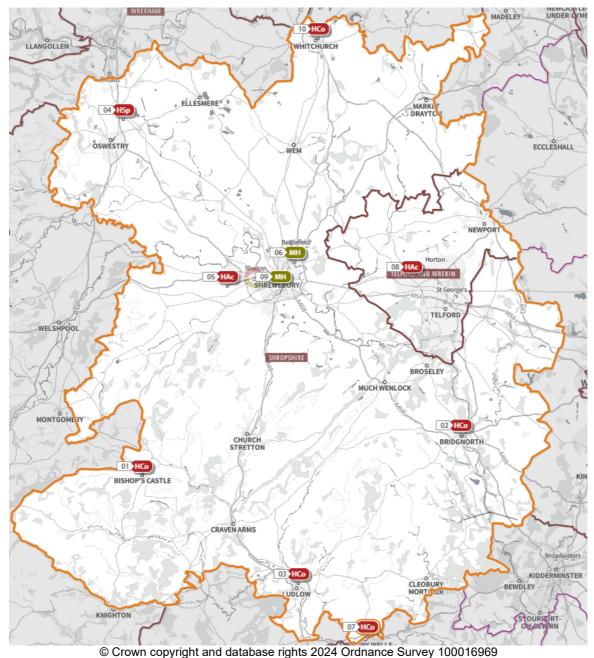


Figure 53: Secondary Care Providers in Shropshire and Telford and Wrekin

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Figure 54: Key for secondary provider map

Map ID	Name	Map ID	Name
1	Bishop's Castle Community Hospital	6	Severn Fields Health Village
2	Bridgnorth Hospital	7	Tenbury Community Hospital
3	Ludlow Hospital	8	The Princess Royal Hospital
4	Robert Jones & Agnes Hunt Orthopaedic Hospital	9	The Redwoods Centre
5	Royal Shrewsbury Hospital	10	Whitchurch Hospital

The following maps show the locations of community pharmacies and dispensing practices in Shropshire and Telford and Wrekin – Full details of pharmacy addresses and opening hours are in Appendix 6

Figure 55: Community Pharmacies in Shropshire and Telford and Wrekin

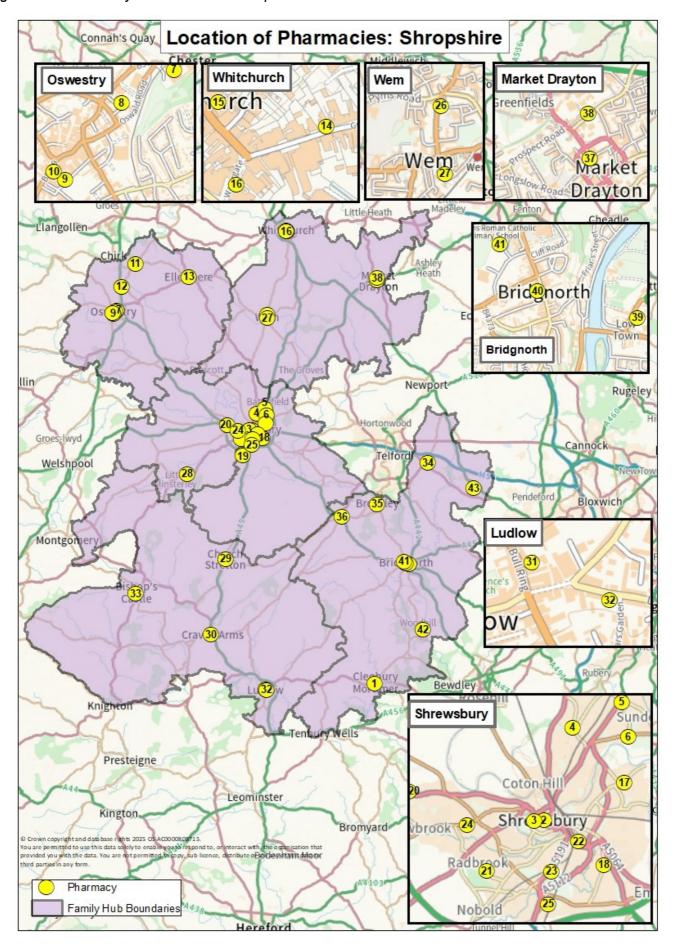


Figure 56: Key for pharmacy maps

Map ID	Name	Weekday Hours	Saturday Hours	Sunday Hours
-		-		_
2	Cleobury Pharmacy Boots, Pride Hill, Shrewsbury	08:30-18:00 08:30-17:30	09:00-13:00 08:30-17:30	CLOSED 10:30-16:30
	Lunts Pharmacy, Barker	08.30-17.30		
3	Street Shrewsbury	09:00-18:00	09:00-13:00	CLOSED
4	Well Pharmacy, Mount Pleasant, Shrewsbury	09:00-18:00 Mon-Thu, 08:30-18:00 Fri	09:00-13:00	CLOSED
5	Tesco Pharmacy, Battlefield, Shrewsbury	09:00-21:00	09:00-21:00	10:00-16:00
6	MSN & Lunts Pharmacy, Severn Fields, Shrewsbury	09:00-13:00,13:20-18:00	09:00-12:00	CLOSED
7	Cambrian Pharmacy, Cambrian Medical Centre, Oswestry	07:00-23:00	08:00-18:00	08:00-18:00
8	Day Lewis Pharmacy, Oswald Road, Oswestry	08:30-18:00	08:30-12:00	CLOSED
9	Day Lewis Pharmacy. English Walls, Oswestry	09:00-17:30	09:00-12:00	CLOSED
10	Boots, Oswestry	09:30-18:00	09:00-17:00	10:00-15:00
11	St Martins Pharmacy	09:00-17:30	09:00-11:30	CLOSED
12	Day Lewis Pharmacy, Gobowen	09:00-13:00,14:00-18:00	CLOSED	CLOSED
13	Ellesmere Pharmacy	09:00-13:00,13:20-17:30	09:00-12:00	CLOSED
14	Green End Pharmacy, Whitchurch	08:45-17:30	08:45-17:00	CLOSED
15	Rowlands Pharmacy, Whitchurch	09:00-13:00,13:20-17:30	09:00-12:00	CLOSED
16	Boots, Whitchurch	09:00-17:00	09:00-17:30	CLOSED
17	Conway Pharmacy, Telford Estate, Shrewsbury	09:00-18:00	09:00-13:00	CLOSED
18	Rowlands Pharmacy, Sutton Road, Shrewsbury	09:00-13:00,13:20-17:30	09:00-12:00	CLOSED
19	Rowlands Pharmacy, Bayston Hill	09:00-13:00,14:00-17:30	09:00-12:00	CLOSED
20	Bicton Heath Pharmacy, Shrewsbury	09:00-13:00,14:00-18:00	09:00-13:00	CLOSED
21	Radbrook Green Pharmacy, Shrewsbury	09:00-18:00	09:00-13:00	CLOSED
22	Asda Pharmacy, Shrewsbury	09:00-20:00	09:00-20:00	10:00-16:00
23	Lunts Pharmacy, Hereford Road, Shrewsbury	09:00-18:00	09:00-12:00	CLOSED
24	Boots, Mytton Oak, Shrewsbury	09:00-18:00 Mon-Thu, 08:30-18:00 Fri	09:00-13:00	CLOSED
25	Boots, Meole Brace, Shrewsbury	09:00-17:30	09:00-16:30	10:00-16:00
26	Rowlands Pharmacy, Wem Medical Practice	09:00-13:00,13:20-17:30	09:00-12:00	CLOSED
27	Rowlands Pharmacy, Wem	09:00-17:00 Mon, 09:00-12:40,13:00-17:30 Tue - Fri	09:00-12:00	CLOSED
28	Pontesbury Pharmacy	09:00-13:00,14:00-18:00 Mon, Wed, Thu, Fri, 09:00-13:00,14:00-17:30 Tue	09:00-13:00	CLOSED
29	MSN & Lunts Pharmacy, Church Stretton	09:00-17:30	09:00-13:00	CLOSED
30	Lunts Pharmacy, Craven Arms	09:00-17:30	09:00-13:00	CLOSED
31	Boots, Ludlow	09:00-17:30	09:00-17:30	CLOSED
32	Lunts Pharmacy, Ludlow	09:00-18:30	09:00-17:30	CLOSED
33	Bishops Castle Pharmacy	09:00-17:30	09:00-13:00	CLOSED
34	Boots, Shifnal	09:00-18:00	09:00-16:30	CLOSED

35	Rowlands Pharmacy. Broseley	09:00-13:00,14:00-17:30	09:00-12:00	CLOSED
36	Wenlock Pharmacy. Much Wenlock	09:00-18:00	09:00-13:00	CLOSED
37	Boots, Market Drayton	09:00-17:30	10:00-17:00	CLOSED
38	Peak Pharmacy, Market Drayton Medical Centre	08:30-18:00	08:45-13:00	CLOSED
39	Bridgnorth Pharmacy	09:00-18:00	09:00-13:00	CLOSED
40	Boots, Bridgnorth	09:00-14:00,14:30-17:30	09:00-14:00, 14:30-17:30	CLOSED
41	Peak Pharmacy, Bridgnorth	09:00-18:00	09:00-13:00	CLOSED
42	Highley Pharmacy	09:00-18:00	09:00-13:00	CLOSED
43	Rhodes TC Chemist, Albrighton	09:00-18:00 Mon-Thu, 08:30-18:00 Fri	09:00-16:00	CLOSED

Figure 57: Dispensing General Medical Practices in Shropshire and Telford and Wrekin

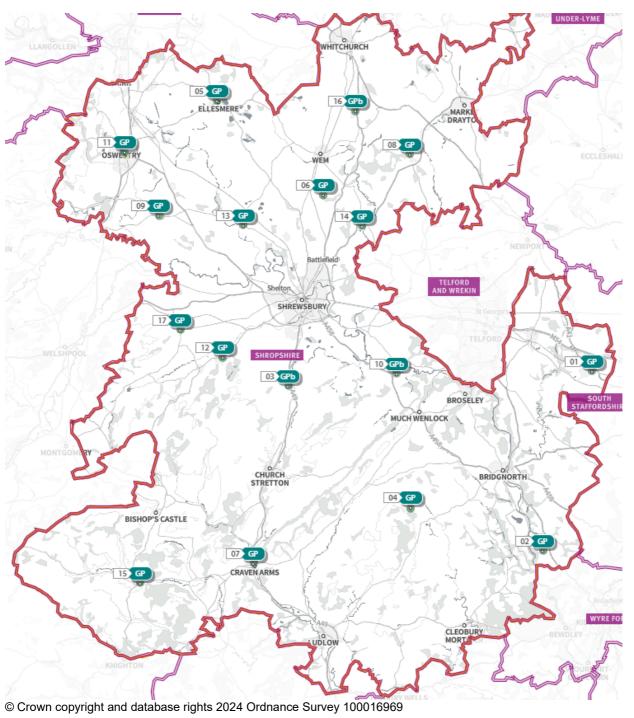


Figure 58: Key of Dispensing GP Practices and deprivation score

Map index	Name	Address of dispensary	Opening Hours	Registered Practice population	IMD Score of dispensary
1	Albrighton Medical Practice	Shaw Lane, Albrighton, WV7 3DT	Monday-Friday 08:30- 18:00	8,485	4.70
2	Alveley Medical Practice	Village Road, Alverley WV15 6NG	Monday, Tuesday, Thursday & Friday 08.30- 12.30; 14:00-18:00	2,335	22.23
3	Beeches Medical Practice	The Maitlands, Dorrington, SY5 7LD	Monday-Friday 08:30- 13:00	7,113	12.03
4	Brown Clee Medical Centre	Station Road, Ditton Priors, WV16 6SS	Monday-Friday 08:00- 13:00; 14:00-17:30	3,890	19.38
5	Churchmere Medical Group	Trimpley Street, Ellesmere, SY12 0DB	Monday-Friday 08:00- 18:00	20,849	7.51
6	Clive Medical Practice	High Street, Clive, SY4 5PS	Monday-Friday 08.30- 13:00; 14:00-18:00	4,677	10.46
7	Craven Arms Medical Practice	20 Shrewsbury Road, Craven Arms, SY7 9PY	Monday-Thursday 08:30- 13:00; 14:00-18:00	4,015	30.82
8	Hodnet Medical Practice	Drayton Road, Hodnet, TF9 3NF	Monday, Tuesday, Wednesday & Friday 08:30-13:00; 14:00-18:00 2pm - 6pm	3,944	23.74
9	Knockin Medical Centre	Knockin, Oswestry, SY10 8HL	Monday-Friday 08:30- 13.00; 14.00-18.00	4,141	16.66
10	Much Wenlock & Cressage Medical Practice	Clifton Lodge, Sheinton Road, Cressage, SY5 6DH	Monday-Thursday 08.30- 12.30; 14.00-18.00	8,552	21.28
11	Plas Ffynnon Medical Centre	Middleton Road, Oswestry, SY11 2RB	Monday-Friday 08:30- 18:00	9,571	11.01
12	Pontesbury & Worthen Medical Practice	Hall Bank, Pontesbury, SY5 0RF	1. Monday- Friday 08:45- 13:00; 14:00-18:30 Pontesbury	10,504	10.13
13	Prescott Surgery	Baschurch, SY4 2DR	Monday-Friday 08:30- 18:00	7,718	7.01
14	Shawbury Medical Practice	Poynton Road, Shawbury, SY4 4JS	Monday, Tuesday, Thursday & Friday 08:30- 18:00	4,488	12.62
15	The Meadows Medical Practice	The Surgery, Turnpike Meadow, Clun, SY7 8HZ	Monday to Friday 08:30- 13:00; 14:00-18:00	2,921	22.24
16	Wem and Prees Medical Practice	Whitchurch Road, Prees, SY13 2DG	Monday-Friday 08:30- 13:00; 14:00-18:00	12,260	25.41
17	Westbury Medical Centre	Vennington Road, Westbury, SY5 9QX	Monday-Friday 08:00- 18:00	2,723	24.49

Figure 59: Pharmacies per head of population in Shropshire 2025 vs 2025 in England

	Registered population	Number of pharmacies	Ratio of patients per pharmacy
England (Pharmacies only)	61,573,603	12,009	1:5,127
England (Pharmacies + Dispensing GP Practices)	61,573,603	12,931	1:4,761
Shropshire (Pharmacies only)	328,393	43	1:7,637
Shropshire (Pharmacies + Dispensing GP Practices)	328,393	43 + 17	1:5,473

Source: GP Patient Registered Population, Business Services Authority, General Pharmaceutical Services – England October 2024, Dispensing practice names and address – Feb 2025,

When comparing the ratio of pharmacies between England and Shropshire one can see a significant difference; there are 5,127 people per pharmacy in England compared to 7,637 in Shropshire – nearly a third lower. However, when adding in dispensing practices the ratios are closer. This dependence on dispensing practices is characteristic of largely rural areas with dispersed populations, which is particularly true for Shropshire, however, dispensing GP practices do not offer the full range of services that community pharmacies do and in order to access some of those services, individuals would need to make an appointment which would then increase pressure on GP practices.

When comparing figures in 2022 to 2025 (Figure 60) one can see there has been a slight increase in the ratio of patients per pharmacy in both Shropshire, due to a growth in the population and four less pharmacies in 2025. The locations of the pharmacies that closed were 1 in Shrewsbury town centre, 1 in Shrewsbury Meole Brace retail park, 1 in Church Stretton and 1 in Ludlow. Figure 61 shows a comparison between England and Shropshire for the ratio of pharmacies per head of population for 2022, 2025 and shows a rise for both areas too, this is likely a consequent of a combination of demographic change and financial pressures with a change to the viability of pharmacies leading to a reduction in overall supply - the pressures are likely to increase in 2028 (the next time a PNA will be due) and 2032 (10 years further from the previous PNA), due to a rise in the in the population, unless there are additional pharmacies opened.

Figure 62 compares the pharmacies per head of population for Shropshire against its nearest neighbours as defined by CIPFA from the most recent PNAs available from those areas and this shows that Shropshire has the second highest ratio of community pharmacies of these areas, behind only Central Bedfordshire but when dispensing GP practices are included, Shropshire's ratio is the sixth highest. Shropshire has a significantly higher proportion of dispensing GP practices than the rest of England due to rurality, and while they provide a vital pharmaceutical supply function for patients unable to access a community pharmacy, they are unable to offer the enhanced and advanced services community pharmacies can, which is a gap for Shropshire residents. However, income from dispensing medications is vital for the future viability of some of these smaller rural practices and their closure would cause a disparity in access to healthcare.

Figure 60: Number of Pharmacies and Pharmacies per head of population in Shropshire 2022 and 2025

	Number of pharmacies in 2022	Ratio of patients per pharmacy 2022	Number of pharmacies in 2025	Ratio of patients per pharmacy 2025
Shropshire (Pharmacies only)	47	1:6,829	43	1:7,637
Shropshire (Pharmacies + Dispensing GP Practices)	47+ 17	1:4,863	43 + 17	1:5,473

Figure 61: Pharmacies per head of population in Shropshire and England 2022 and 2025, and future based on population predictions

	Ratio of patients per pharmacy 2022	Ratio of patients per pharmacy 2025	Ratio of patients per pharmacy 2028	Ratio of patients per pharmacy 2032
England (Pharmacies only)	1:4,870	1:5,127	1:4,892	1:4,962
England (Pharmacies + Dispensing GP Practices)	1:4,462	1:4,761	1:4,543	1:4,608
Shropshire (Pharmacies only)	1:6,829	1:7,637	1:8,130	1:8,352
Shropshire (Pharmacies + Dispensing GP Practices)	1:4,863	1:5,473	1:5,826	1:5,985

Figure 62: Pharmacies per head of population in Shropshire and CIPFA Nearest Neighbour Areas, from most recent PNAs

Local Authority	Population	Number of pharmacies	Patients per pharmacy	Dispensing GP practices	Patients per pharmacy+ dispensing GP practice	Year of PNA
Bath and North East Somerset	196,357	36	5,454	5	4,789	2022
Central Bedfordshire	301,501	38	7,934	10	6,281	2025
Cheshire East	386,667	78	4,957	6	4,603	2022
Cheshire West and Chester	343,823	76	4,523	5	4,244	2022
Cornwall	575,525	98	5,872	36	4,294	2022
Dorset	779,900	142	5,492	16	4,936	2022
East Riding of Yorkshire	341,173	60	5,686	0	5,686	2022
Herefordshire	193,615	27	7,170	10	5,232	2022
North Somerset	571,600	91	6,281	23	5,014	2025
Northumberland	324,362	67	4,841	12	4,105	2025
Shropshire	328,393	43	7,637	17	5,473	2022
Solihull	217487	44	4,942	0	4,942	2022
South Gloucestershire	295,896	47	6,295	2	6,038	2022
Stockport;	294,200	63	4,669	0	4,669	2022
Warrington	223,723	39	5,736	1	5,593	2025
Wiltshire	504,070	67	7,523	18	5,930	2022

Figure 63 shows he comparison of pharmacy provision across the 6 different family hub areas for community pharmacies and community pharmacies and dispensing GP practices. The registered population figure for the family hubs is from a slightly different time period, hence why the total of them will not add up to the Shropshire figure. This shows that the ratio of patients per community pharmacy is highest in the North East area and is above the figure for Shropshire, but the North East has 5 dispensing GP practices so when they are taken into account the ratio drops to the lowest and is under the figure for Shropshire.

Figure 63: Number of Pharmacies and Pharmacies per head of population by Family Hub Areas in Shropshire 2025

Family Hub Area	Registered population	Pharmacies only	Ratio of patients per pharmacy	Pharmacies + Dispensing GP Practices	Ratio of patients per pharmacy	Dispensing practices
North East	58,366	7	8,338	12	4,864	5
North West	51,791	7	7,399	10	5,179	3
Central East	50,334	7	7,191	9	5,593	2
Central West	59,342	8	7,418	10	5,934	2
South East	67,568	9	7,508	12	5,631	3
South West	36,237	5	7,247	7	5,177	2
Shropshire	328,393	43	7,637	60	5,473	17

Shropshire is surrounded by several other counties who each have their own community pharmacies who may provide services to Shropshire residents. Telford and Wrekin local authority is on the eastern border, and most health providers serve both Shropshire and Telford and Wrekin local authorities. To the North of Shropshire there is Cheshire, to the East there is Staffordshire, to the South is Herefordshire and Worcestershire and to the West is Wales. To identify those community pharmacies near the border of Shropshire, a 5km 'buffer' was drawn around it, encompassing Telford and Wrekin and this is shown in Figure 64, together with the index in Figure 65 which shows those pharmacies opening times. Pharmacies in Wales are not shown on the map as the SHAPE tool only includes England. Full details of pharmacy addresses and opening hours are in Appendix 6.

Figure 64: Community Pharmacies in Telford and Wrekin and within 5km of Shropshire

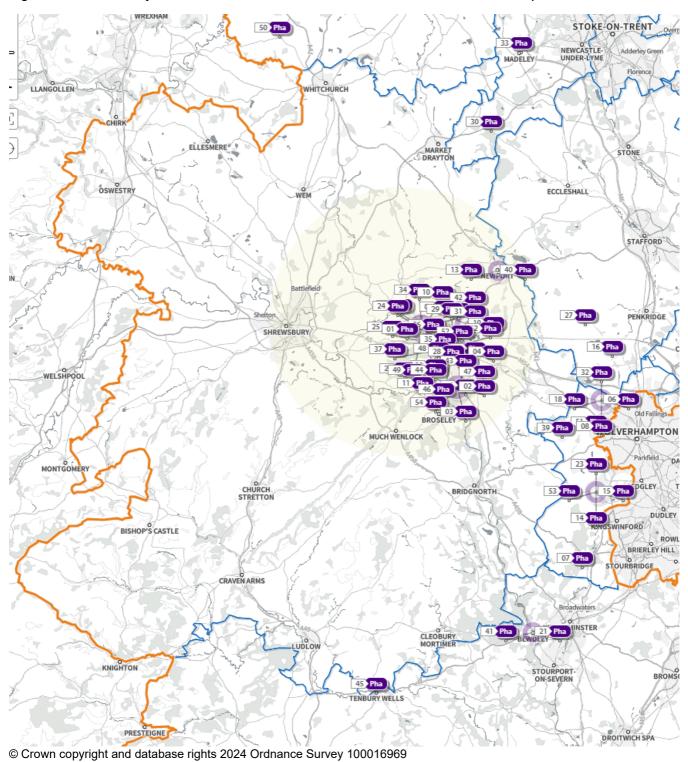


Figure 65: Key for pharmacy maps

Map ID Name **Weekday Hours Saturday Hours Sunday Hours** Admaston Pharmacy 1 09:00-13:00,14:00-18:00 **CLOSED CLOSED** Online Anstice Pharmacy, 2 09:00-18:00 09:00-17:00 **CLOSED** Madeley 3 **Aqueduct Pharmacy** 09:00-18:00 09:00-13:00 **CLOSED** 09:00-Asda Pharmacy, 09:00-12:30,13:00-16:30,17:00-4 12:30,13:00-10:00-16:00 21:00 Mallinsgate 16:30,17:00-21:00 09:00-09:00-12:30,13:00-16:30,17:00-Asda Pharmacy, 5 11:00-17:00 12:30,13:00-**Donnington Wood** 21:00 16:30,17:00-21:00

6	Bilbrook Pharmacy	09:00-18:00	CLOSED	CLOSED
7	Bills Pharmacy, Kinver	09:00-13:00,14:00-18:00	09:00-13:00	CLOSED
8	Birches Bridge Pharmacy, Codsall	09:00-18:00	09:00-13:00	CLOSED
9	Boots, Shawbirch	09:00-18:00	09:00-17:00	CLOSED
10	Boots, Wellington	09:00-17:30	09:00-17:30	CLOSED
11	Boots, Telford Forge	09:00-17:30	09:00-15:00	CLOSED
12	Boots, Telford Town	09:00-17:30	09:00-17:30	10:30-16:30
13	Boots, Newport	09:00-18:00	09:00-17:30	CLOSED
14	Boots, Womborne	09:00-12:00,13:00-18:30 Mon, Tue, Thu, Fri 09:00-12:00,13:00-17:30 Wed	09:00- 12:00,13:00-17:00	CLOSED
15	Boots, Womborne	09:00-13:00,14:00-18:00	09:00- 13:00,14:00-17:30	CLOSED
16	Brewood Pharmacy	09:00-18:00	09:00-12:00	CLOSED
17	Chapel Lane Pharmacy, Wellington	09:00-18:00	CLOSED	CLOSED
18	Codsall Pharmacy	08:30-18:30	09:00-17:30	CLOSED
19	Donnington Pharmacy	08:00-21:00	08:00-21:00	09:00-20:00
20	Hadley Pharmacy	09:00-13:00,13:20-17:30	09:00-12:00	CLOSED
21	Healthpoint Pharmacy, Bewdley	09:00-18:00	09:00-17:30	CLOSED
22	Hollinswood Pharmacy	08:30-13:00,13:20-18:00	09:00-12:00	CLOSED
23	I-Meds Pharmacy, Swindon	09:00-17:00	CLOSED	CLOSED
24	Jhoots Pharmacy, Oakengates	09:00-18:00	09:00-13:15	CLOSED
25	Kitchings Chemist, Oakengates	08:30-17:30	08:30-14:30	CLOSED
26	Lawley Pharmacy	08:45-20:00 Mon, Tue, Fri 08:45-19:30 Wed, Thu	09:30-12:30	CLOSED
27	Leabank House Pharmacy, Wheaton Aston	08:30-18:30 Mon 08:30-16:00 Tue - Fri	CLOSED	CLOSED
28	Leegomery Chemist	09:00-13:00,14:00-18:00	CLOSED	CLOSED
29	Lloyds Pharmacy, Dawley	08:30-18:00	08:30-13:00	CLOSED
30	Loggerheads Pharmacy	09:00-18:00	CLOSED	CLOSED
31	Malinslee Pharmacy	09:00-13:00,14:00-18:00	CLOSED	CLOSED
32	Medking Pharmacy, Codsall	09:00-13:00,13:30-17:30	CLOSED	CLOSED
33	Millers Pharmacy, Middle Madeley	09:00-13:00,14:00-18:00 Mon 09:00-18:00 Tue - Fri	09:00-13:00	CLOSED
34	Morrisons Pharmacy, Wellington	09:00-19:00	09:00-17:00	10:00-16:00
35	Muxton Pharmacy	08:45-18:00 Mon - Thu 08:45-12:45,13:45-18:00 Fri	09:00-13:00	CLOSED
36	Nucare, Hortonwood	09:00-17:30	CLOSED	CLOSED
37	Oakengates Pharmacy	08:30-18:00	CLOSED	CLOSED
38	Parade Pharmacy, Donnington	09:00-17:30	09:00-14:00	CLOSED
39	Pattingham Pharmacy	09:00-13:00,14:00-18:00	09:00-12:00	CLOSED
40	Peak Pharmacy, Newport	09:00-17:30	09:00-13:00	CLOSED
41	Peak Pharmacy, Bewdley	08:30-18:15	09:00-17:00	CLOSED
42	Priorslee Pharmacy	09:00-18:00	CLOSED	CLOSED
43	Rowlands Pharmacy, Sutton Hill	09:00-12:45,13:45-18:00	CLOSED	CLOSED

44	Rowlands Pharmacy, Stirchley	09:00-13:00,13:20-18:00	09:00-12:00	CLOSED
45	Rowlands Pharmacy, Tenbury Wells	09:00-13:00,13:20-18:00	09:00-13:00	CLOSED
46	Shire Pharmacy, Trench	09:00-18:00	CLOSED	CLOSED
47	Superdrug Pharmacy, Telford	09:00-17:30	09:00-17:30	CLOSED
48	Tesco Instore Pharmacy, Wellington	08:00-20:00	08:00-20:00	10:00-16:00
49	Top Pharmacy, Hadley	09:00-13:00,14:00-18:00	CLOSED	CLOSED
50	Well, Malpas	09:00-18:30 Mon, Tues, Thu, Fri 09:00-17:30 Wed	09:00-13:00	11:30-12:30
51	Well, Perton	08:30-19:00	09:00-17:00	CLOSED
52	Wellington Pharmacy	09:00-13:00,14:00-21:00	15:00-21:00	09:00-20:00
53	Wombourne Pharmacy	09:00-18:00	09:00-12:00	CLOSED
54	Woodside Pharmacy	08:30-18:00	09:00-12:00	CLOSED
Pharmaci	es in Wales (not on Map)			
NA	Boots, Knighton	09:00 - 13:00, 14:00-17:30	09:00 - 13:00, 14:00-17:30	CLOSED
NA	Rowlands, Overton on Dee	09:00 - 13:00, 14:00-18:00	CLOSED	CLOSED
NA	Rowlands, Cefn Mawr	09:00 - 13:00, 14:00-18:00	CLOSED	CLOSED
NA	Alexanders Pharmacies, Acrefair Wrexham	09:00 - 13:00, 14:00-18:00	CLOSED	CLOSED
NA	Rowlands, Chirk	08:30 - 13:00, 13:20-18:30	09:00 - 13:00	CLOSED
NA	Rowlands, Ruabon	08:30 - 13:00, 14:00-18:30	09:00 - 13:00	CLOSED
NA	Rowlands, Welshpool	09:00 - 13:00, 13:20-18:00	09:00 - 13:00, 13:20-17:30	CLOSED
NA	Boots, Welshpool	09:00 - 13:15, 14:15-17:30	09:00 - 13:15, 14:15-17:00	CLOSED

Appendix 3 contains a number of maps showing the location of community pharmacies by several relevant measures including:

- Index of multiple deprivation 2019, Figure 186
- Rural urban classification 2021, Figure 187
- Employment density by lower level super output area from ONS business register of employment survey, Figure 188
- Median household income, CACI paycheck data 2024, Figure 189
- Percentage of each lower level super output area stating they have a disability, ONS Census, 2021,
   Figure 190
- Percentage of each lower level super output area stating they provide unpaid care, ONS Census,
   2021, Figure 191
- Percentage of each lower level super output area stating they are in poor health, ONS Census,
   2021, Figure 192
- Number of people in each lower level super output area aged 0-4 years old from the 2022 mid-year population estimates, Figure 193
- Number of people in each lower level super output area aged 5-15 years old from the 2022 midyear population estimates, Figure 194

- Number of people in each lower level super output area aged 16-64 years old from the 2022 midyear population estimates, Figure 195
- Number of people in each lower level super output area aged 65+ years old from the 2022 mid-year population estimates, Figure 196
- Number of people in each lower level super output area aged 85+ years old from the 2022 mid-year population estimates, Figure 197

# Access to pharmaceutical services

## Geographical access

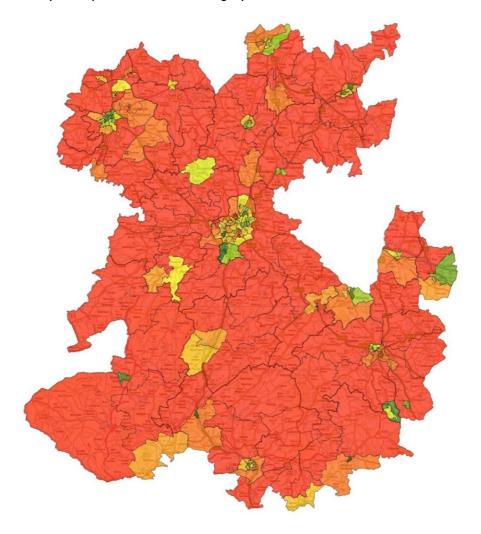
According to both the survey of residents conducted as part of this PNA and a survey run by Healthwatch into pharmacies, most people indicated that they used a pharmacy closest to their home or their work. This section details access to pharmacies.

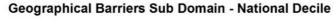
The map below gives a high-level overview of 'geographical barriers', which relate to the physical proximity of local services for citizens living in Shropshire. They compare the mean road distance for people living in Shropshire's neighbourhood to the closest:

- Post office
- Primary school
- General store or supermarket
- GP surgery

Those areas in the deepest red are in the 1<sup>st</sup> decile, meaning they are amongst the most deprived in terms of access in whole of England.

Figure 66: Indices of Multiple Deprivation 2019; Geographical Barriers Sub-Domain







Source: Ministry for Housing, Communities and Local Government 2019

According to the Census 2021 in Shropshire there is a high proportion of households (86.2%) that own at least one car, partly a reflection of the dispersed nature of the population in the county. Whilst this means that some citizens are still able to access services from access-deprived areas there are significant numbers of in the County for whom access to dispensing services is limited. Figure 67 shows a map of the county and the areas of it that do not own a car or van, with the very darkest areas being those areas with the highest percentage of people without this method of transport – fortunately most of these dark areas are in the main settlements, but there are some high areas in some more rural parts of the county. That public transport is limited in many of the rural parts of the county, particularly in the south compounds this issue, as shown in Figure 68 and a few subsequent pages examining travel times.

Figure 67: Percentage of residents who do not own one car or van and location of pharmacies

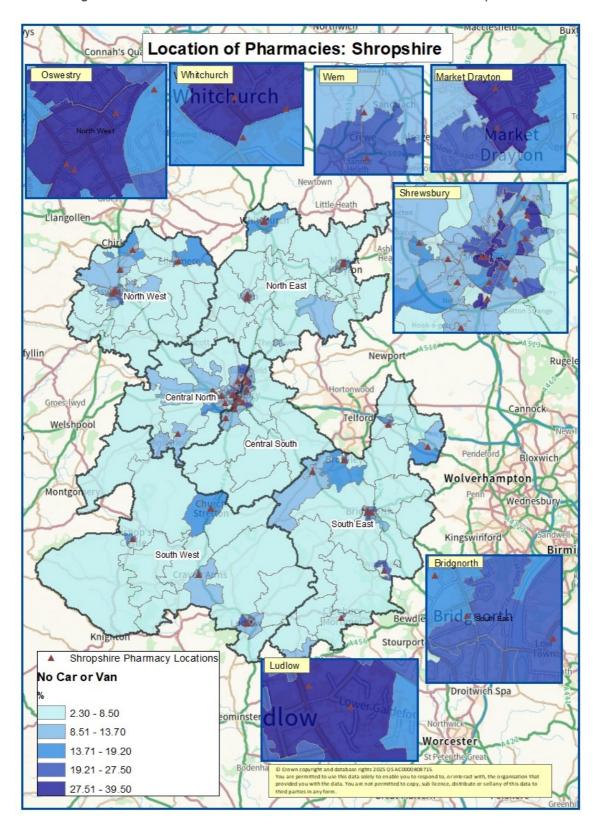


Figure 68: Shropshire Bus Routes, 2024

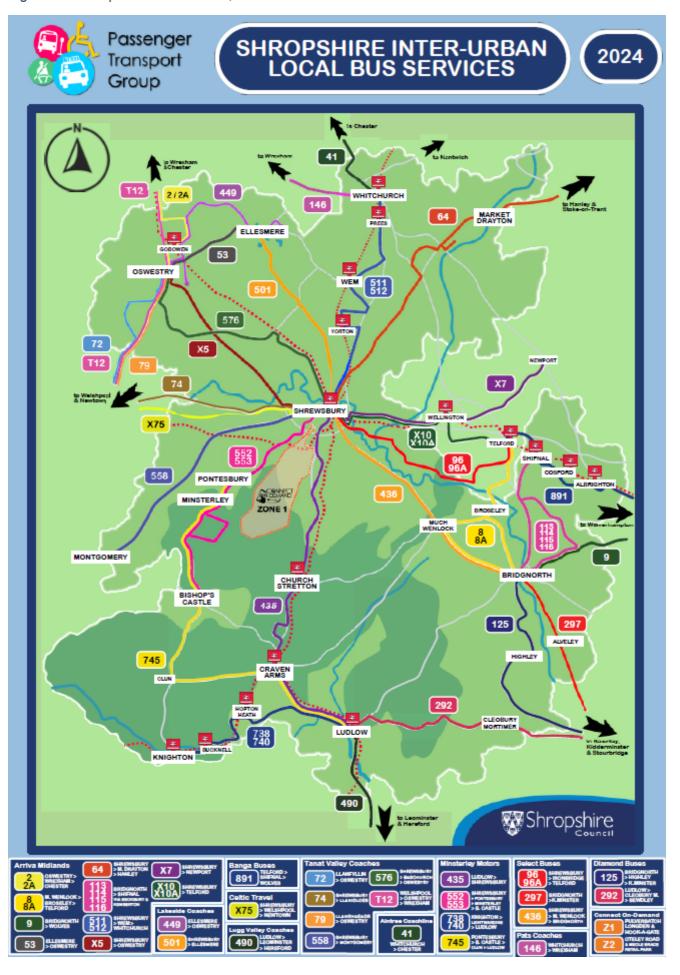


Figure 69 shows a map of Shropshire's community pharmacies and dispensing GP practices, with a number of circles around each which indicate miles radius – the darkest circles are a 2-mile radius, the lightest circles a 10-mile radius. This shows that everywhere in Shropshire is within 10 miles of one of these pharmacies and nearly all within 8 miles.

Figure 69: 2 mile to 10-mile distance radius from each Shropshire community pharmacy and dispensing GP practice

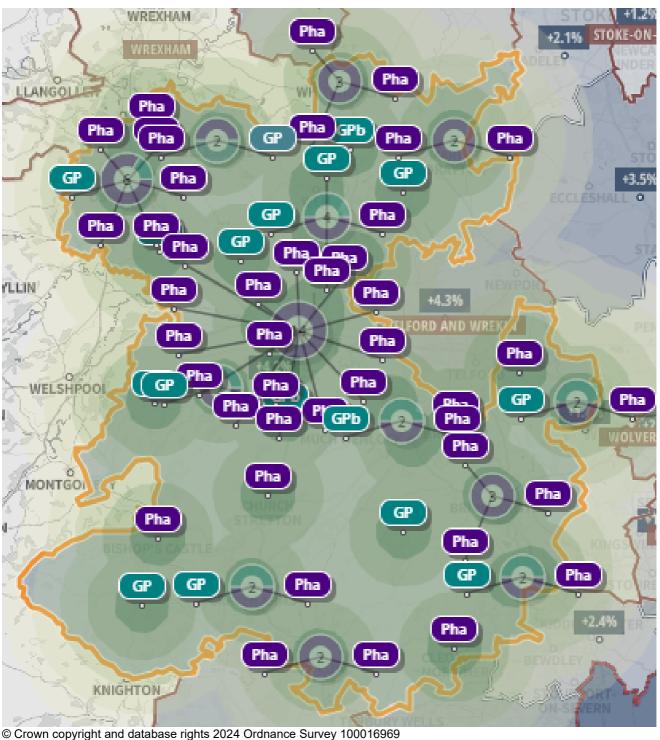




Figure 70 shows this same map, but with the circles set to a 2 mile and 4-mile radius from each pharmacy, which shows a few areas of Shropshire that are not within 4 miles of a pharmacy, but these are some of the more sparsely populations areas.

Figure 70: 2 mile to 4-mile distance radius from each Shropshire community pharmacy and dispensing GP practice

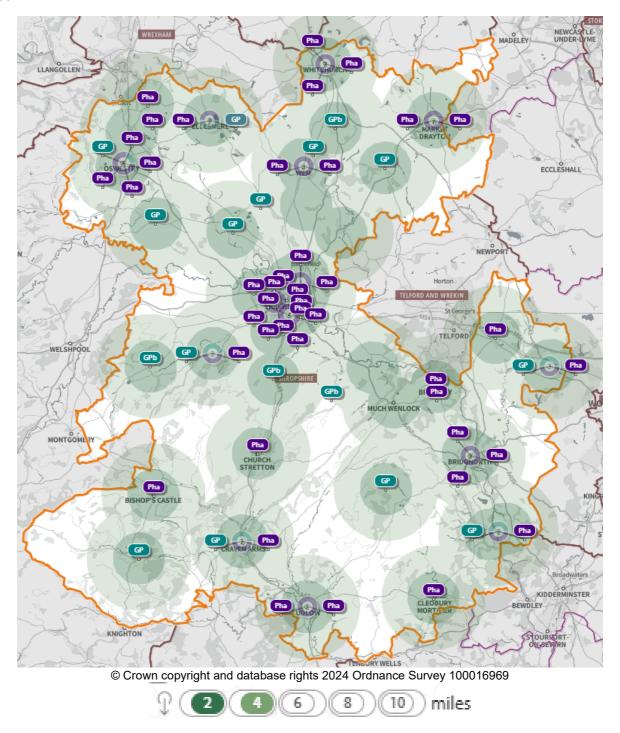


Figure 71 shows how many residents are able to get to community pharmacies or dispensing practices at different time thresholds via different methods of transport. For example, 201,418 (61.5%) citizens in Shropshire are within 15 minutes' walk of one and 323,382 (98.7%) are within a 15-minute drive, or 316,410 (96.6%) at rush hour, however, only 209,915 (64.1%) are within 15 minutes using public transport, and it is 241,584 (73.8%) within 30 minutes.

Figure 71: Shropshire residents within 15 minutes of a pharmacy or dispensing practice by different methods of transportation

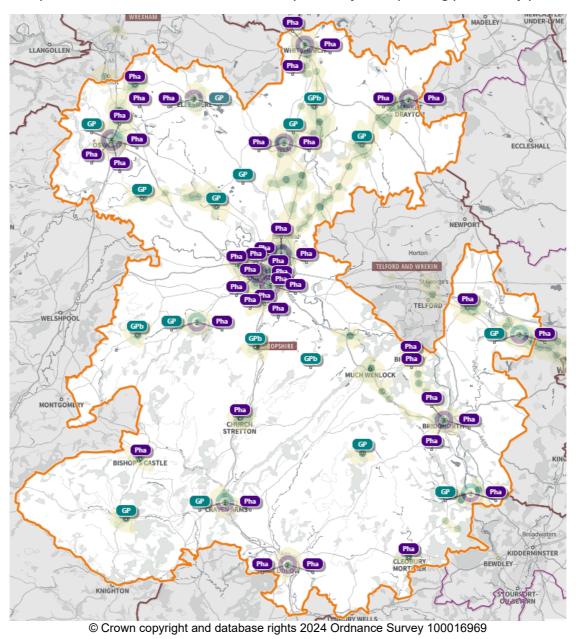
Transport	Travel Time	Shropshire residents able to access	Shropshire residents unable to access	Percentage of Shropshire residents able to access
	5 minutes	86,256	241,223	26.3%
Walk	10 minutes	149,438	178,041	45.6%
	15 minutes	201,418	126,061	61.5%

Transport	Travel Time	Shropshire residents able to	Shropshire residents unable to	Percentage of Shropshire residents
		access	access	able to access
	5 minutes	246,628	80,851	75.3%
Car	10 minutes	299,686	27,793	91.5%
	15 minutes	323,382	4,097	98.7%
	5 minutes	240,341	87,138	73.4%
Car at rush hour	10 minutes	295,051	32,428	90.1%
	15 minutes	316,410	11,069	96.6%
Dublic Transport	5 minutes	88,280	239,199	27.0%
Public Transport	10 minutes	156,745	170,734	47.9%
(weekday morning)	15 minutes	209,915	117,564	64.1%
morning)	30 minutes	241,584	85,895	73.8%

Source: Analysis based upon SHAPE data 2025

Figure 72 shows a map of Shropshire's community pharmacies and dispensing GP practices, with a number of circles around each which indicate the time on public transport to get to them – the darkest circles are a 5-minute journey, and the lighter yellow circles are a 30-minute journey, and this shows the lack of public transport in the south particularly.

Figure 72: Shropshire residents within 30 minutes of a pharmacy or dispensing practice by public transport



10 (15) (20) (30) minutes

Figure 73 shows which areas in green are accessible in 10 minutes by car, while those areas outside this are in white.

- Some areas on the western border of the county may be served by provision in Wales, for which
  data is not yet available to integrate into this analysis. For example, the area in the west of the map
  will be served by provision from Welshpool.
- There are areas in the North East and Central East part of the county which appear excluded but are within 10 minutes journey of Telford and Wrekin's pharmacies.
- As observed in previous iterations, the most excluded areas tend to be grouped in south and southwest Shropshire, which are the most sparsely population part of the county.

Figure 73: Map of neighbourhoods able to get too a community pharmacy or dispensing GP practice within 10 minutes by car

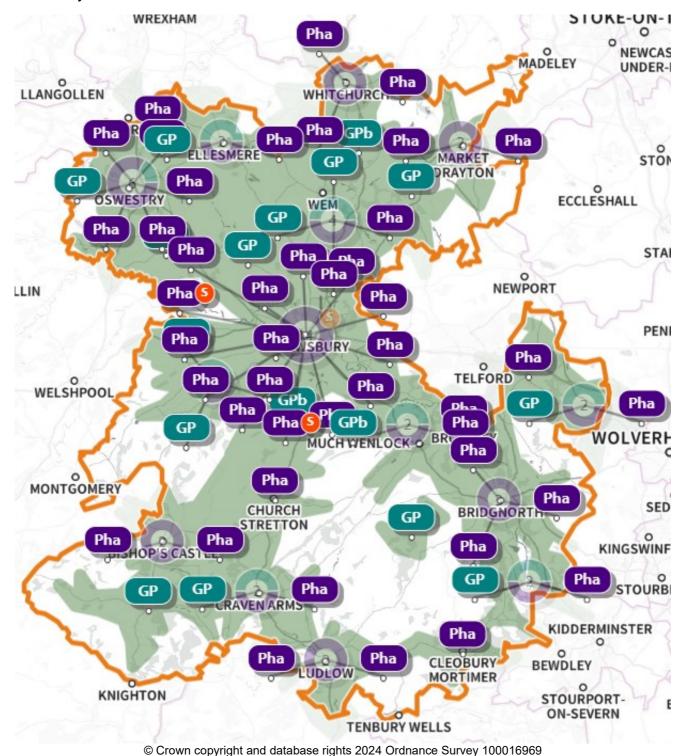


Figure 74 shows a map of Shropshire's community pharmacies, with a number of circles around each which indicate miles radius – the darkest circles are a 2-mile radius, the lightest circles a 10-mile radius. This shows that everywhere in Shropshire is within 10 miles of one of these pharmacies and nearly all within 8 miles.

Figure 74: 2 mile to 10-mile distance radius from each Shropshire community pharmacy

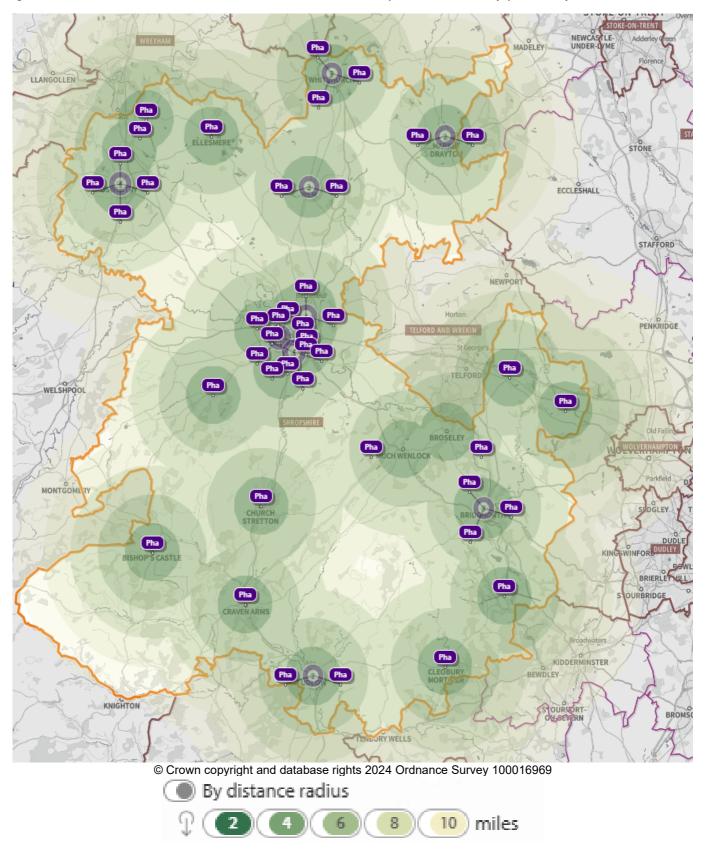


Figure 75 shows this same map, but with the circles set to a 2 mile and 4-mile radius from each pharmacy, which shows a few areas of Shropshire that are not within 4 miles of a pharmacy, but these are some of the more sparsely populations areas.

Figure 75: 2 mile to 4-mile distance radius from each Shropshire community pharmacy

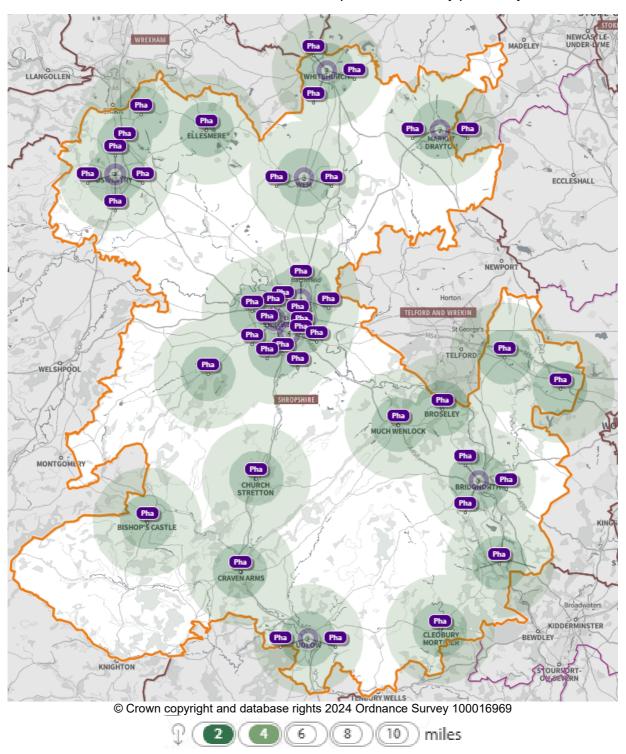


Figure 76 shows how many residents are able to get to a community pharmacy at different time thresholds via different methods of transport. 186,296 (56.9%) residents in Shropshire are within 15 minutes' walk of a community pharmacy, 314,704 (96.1%) are within a 15-minute drive, or 308,809 (94.3%) at rush hour, however using public transport on a weekday morning would see 194,030 (59.2%) able to get to a pharmacy in 15 minutes and in 30 minutes it would be 239,631 (73.2%).

Figure 76: Shropshire residents within 15 minutes of a community pharmacy by different methods of transportation

Transport	Travel Time	Shropshire residents able to access	Shropshire residents not able to access	Percentage of Shropshire residents able to access
	5 minutes	80,761	246,718	24.7%
Walk	10 minutes	138,637	188,842	42.3%
	15 minutes	186,296	141,183	56.9%

Transport	Travel Time	Shropshire residents able	Shropshire residents not able to	Percentage of Shropshire residents
		to access	access	able to access
	5 minutes	221,888	105,591	67.8%
Car	10 minutes	285,158	42,321	87.1%
	15 minutes	314,704	12,775	96.1%
Car at rush	5 minutes	216,304	111,175	66.1%
hour	10 minutes	267,925	59,554	81.8%
Hour	15 minutes	308,809	18,670	94.3%
Public	5 minutes	78,452	249,027	24.0%
Transport	10 minutes	144,646	182,833	44.2%
(weekday	15 minutes	194,030	133,449	59.2%
morning)	30 minutes	239,631	87,848	73.2%

Figure 77 shows a map of Shropshire's community pharmacies, with circles around each to indicate the time on public transport to get to them – the darkest circles are a 5-minute journey, and the lighter yellow circles are a 30-minute journey, and this shows the lack of public transport in the south particularly.

Figure 77: Shropshire residents within 30 minutes of a community pharmacy by public transport

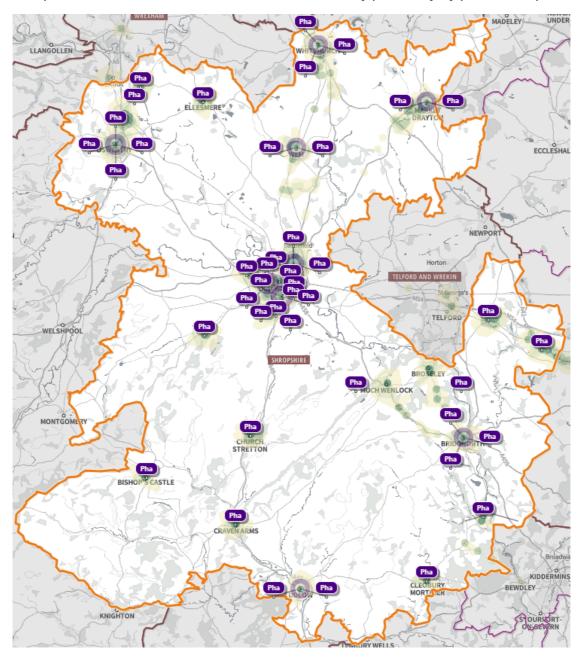


Figure 78 shows which areas (in green) are able to access community pharmacies in 10 minutes by car, while those areas outside this are in white.

- Some areas on the western border of the county may be served by provision in Wales, for which data is not yet available to integrate into this analysis. For example, the area in the west of the map will be served by provision from Welshpool.
- There are areas in the North East and Central East part of the county which appear excluded but are within 10 minutes journey of Telford and Wrekin's pharmacies.
- As observed in previous iterations, the most excluded areas tend to be grouped in south and southwest Shropshire, which are the most sparsely population part of the county.

Figure 78: Map of neighbourhoods able to get too a community pharmacy within 10 minutes by car

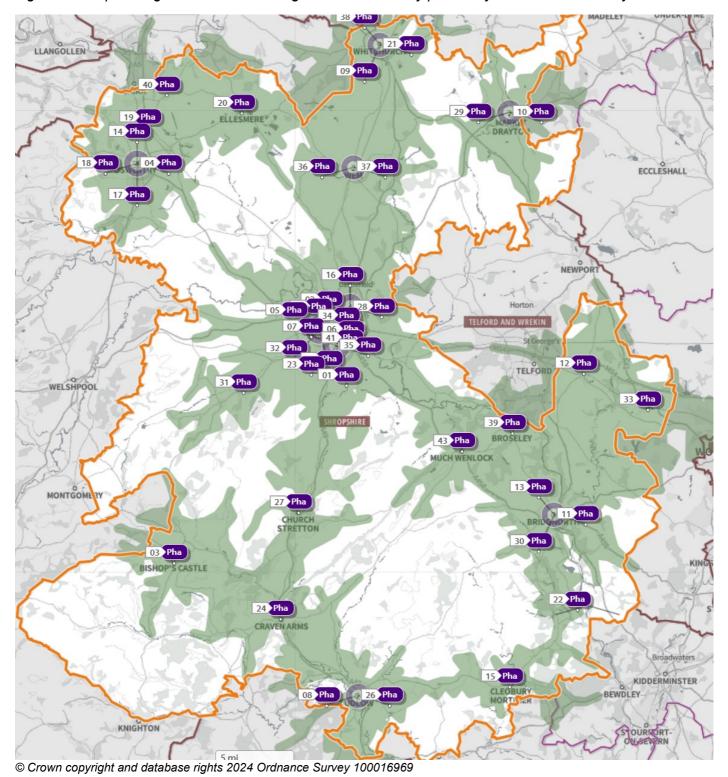
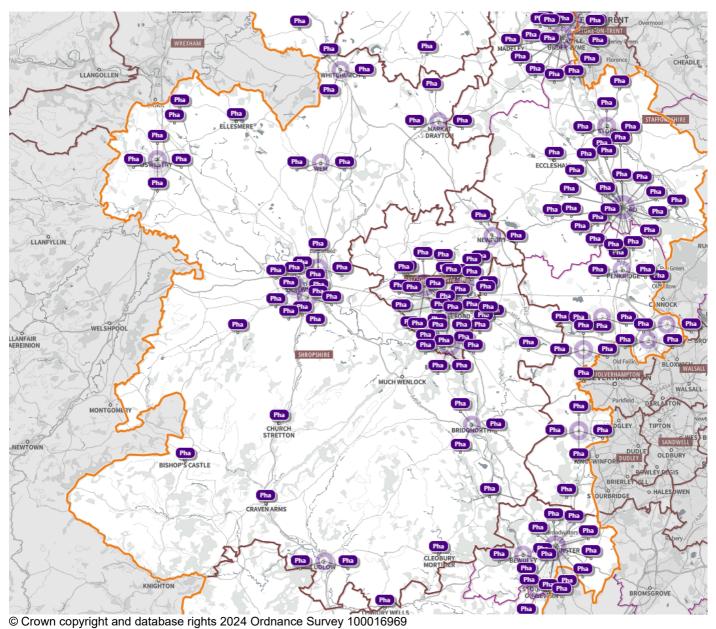


Figure 79 shows the community pharmacies that are close to Shropshire's borders that are in other neighbouring areas. In the North East of the county, there are a few pharmacies within short distance of Whitchurch and Market Drayton, 31 community pharmacies in Telford and Wrekin, and some in Stafford and South Staffordshire on the east, while in the South East there are 2 pharmacies in Bewdley and 10 more around Kidderminster, while on the southern border there is a pharmacy in Tenbury Wells. In addition, there are 8 pharmacies in Wales within 5km of Shropshire's border (although the SHAPE atlas does not include Welsh data). In the North West of Shropshire there are pharmacies around the Wrexham area, including Chirk and close to the West and South West border there are 2 pharmacies in Welshpool, according to NHS 111 Wales. Pharmacies within 5 kilometres of Shropshire's border are shown earlier in this document in Figure 64 and Figure 65.

Figure 79: Community Pharmacies in Shropshire and neighbouring areas close to border



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# Community Pharmacy Contractual Framework and Services

All Shropshire pharmacies have an NHS Pharmaceutical Services Contract with ICB Shopshire and Telford and Wrekin. The contract consists of four different levels of services:

- Essential services
- Advanced services
- Enhanced services
- · Locally commissioned services.

#### **Essential Services**

These are services which pharmacies on the NHS pharmaceutical list must provide as part of the NHS Community Pharmacy Contractual Framework, also known as the 'pharmacy contract'. These nine are:

- Discharged medicines service
- Dispensing appliances
- Dispensing medicines
- · Repeat dispensing and electronic repeat dispensing
- · Disposal of unwanted medicines
- Healthy Living Pharmacies
- Public Health (promotion of healthy lifestyles)
- Signposting
- Support for self-care

There are also clinical governance requirements on pharmacies as part of the contract.

## Discharge Medicines Service

The Discharge Medicines Service (DMS) became a new Essential service within the Community Pharmacy Contractual Framework (CPCF) on 15th February 2021.

This service, which all pharmacy contractors have to provide, was originally trialled in the 5-year CPCF agreement, with a formal announcement regarding the service made by the Secretary of State for Health and Social Care in February 2020.

From 15th February 2021, NHS Trusts were able to refer patients who would benefit from extra guidance around prescribed medicines for provision of the DMS at their pharmacy. The service has been identified by NHS England's Medicines Safety Improvement Programme to be a significant contributor to the safety of patients at transitions of care, by reducing readmissions to hospital. Discharge from hospital is associated with an increased risk of avoidable medication related harm and NICE Guidelines include recommendations that medicine related communication systems should be in place when patient move from one care setting to another, and that a medicines reconciliation process should be in place for all patients discharged from a hospital or another care setting back into primary care and this should happen within a week of discharge. Research has shown that 79% of patients were prescribed at least one medication after discharge from hospital, but new prescriptions can sometimes cause side-effects or negatively interact with existing medication and further research has shown that people over 65 are less likely to be readmitted to hospital if they are given help with their medication after discharge, and further research has shown that patients who see their community pharmacist after they have been in hospital are less likely to be readmitted and will experience a shorter stay if they are.

#### Dispensing appliances

Pharmacists may choose to regularly dispense, or they may dispense such prescriptions infrequently, or they may have taken a decision not to dispense them at all. Any pharmacy owner choosing to dispense appliances have to comply with requirements specified in the NHS Community Pharmacy Contractual Framework.

There are no appliance contractors within Shropshire, however NuCare is based in Hortonwood in Telford, postcode TF1 7ES, and supports patients with a complete range of incontinence, ostomy, wound care, compression therapy and medical device services and product. Data for NuCare is shown, but it is a

national provider, so the activity data shown may include prescriptions for other areas rather than just across the ICB.

Figure 80: Appliance contractor data in Shropshire, Telford and Wrekin ICB, December 23 to November 24

Provider	Number of forms	Number of forms for Electronic Prescription Service	Number of Items processed via Electronic Prescription Service
NuCare, Units C5 and C6, Hortonwood 10, Telford, TF1 7ES	80,411	32,754	53,147

## Dispensing medicines

The service description from the NHS Community Pharmacy Contractual Framework reads that 'the supply of medicines and appliances on NHS prescriptions, together with information and advice, to enable safe and effective use by patients and carers, and maintenance of appropriate records.

Orders for medicines and appliances are dispensed for patients on demand promptly. Records are kept of all medicines dispensed and significant advice provided, referrals and interventions made. Advice is given to the patient about the medicines being dispensed, how to use them, how to store them and how any unwanted medicines should be returned to the pharmacy.

During a whole year 8,325,929 items were dispensed by community pharmacies in the Shropshire, Telford and Wrekin ICB, with 4,971,668 of these from Shropshire community pharmacies - an average of 414,000 items a month (December 2023 to November 2024 dispensing data NHS Business services authority). However, these figures exclude dispensing GP practices activity and those medicines that were sent via distance selling pharmacies located outside of Shropshire. Another caveat is that Shropshire residents could be ordering medications from pharmacies outside of Shropshire and likewise residents from other areas could be using Shropshire pharmacies for their prescriptions.

The amount of dispensed medication could be influenced by a number of factors including:

- The size of the population
- The age structure of the population, notably the proportion of the those aged 60 and over, who
  generally receive more prescriptions than the young
- Improvements in diagnosis, leading to earlier recognition of conditions and earlier treatment with medicines
- Development of new medicines for conditions with limited treatment options
- Development of more medicines to treat common conditions
- Increased prevalence of some long-term conditions, for example, diabetes
- Shifts in prescribing practice in response to national policy, and new guidance and evidence
- Increased prescribing for prevention or reducing risk of serious events, for example use of lipidlowering drugs to reduce risk of stroke or heart attack

Figure 81: Items dispensed per month in Shropshire Community Pharmacies December 23 to November 24



The dispensing data shows that the number of items dispensed from pharmacies in the North West family hub area was the highest at over a million, which equates to by far the highest ratio of items per pharmacy, and also the highest ration of items per head of population. The lowest number of items was from pharmacies in the South West family hub area, although this area has the lowest number of pharmacies and the lowest population.

Figure 82: Items dispensed in Shropshire Community Pharmacies, December 23 to November 24 by Family Hub Area

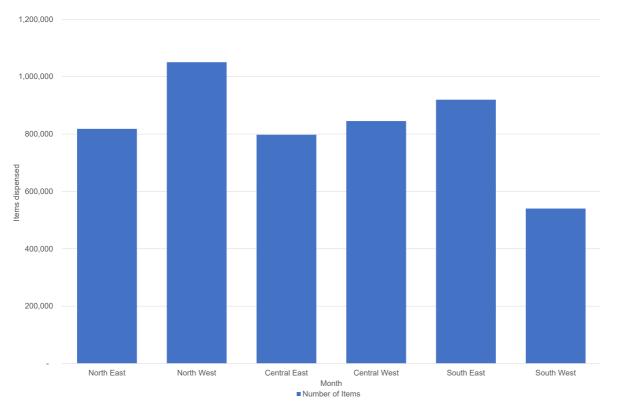


Figure 83: Items dispensed in Shropshire Community Pharmacies December 23 to November 24 by Family Hub Area per pharmacy and per head of population

	Number of items	Number of	Items per		Items per head
Area	dispensed	pharmacies in area	pharmacy	Population	of population
North East	818,201	7	116,886	58,366	14.02
North West	1,050,590	7	150,084	51,791	20.29
Central East	797,561	7	113,937	50,334	15.85
Central West	845,176	8	105,647	59,342	14.24
South East	919,802	9	102,200	67,568	13.61
South West	540,338	5	108,068	36,237	14.91
Shropshire	4,971,668	43	115,620	323,606	15.36

The Electronic Prescription Service (EPS) allows prescriptions to be sent direct to pharmacies and appliance contractors through IT systems used in GP surgeries. This means that patients do not have to collect a paper repeat prescription from the GP practice but can go straight to the nominated pharmacy or dispensing appliance contractor to pick up their medicines or medical appliances. Patients have to nominate a particular community pharmacy or appliance contractor such that the electronic prescription can be sent to them securely, but this nomination can be changed at any time if a patient consents to do so.

Prescriptions for acute items such as antibiotics can also be sent electronically if it is practical to do so. Eventually EPS will remove the need for most paper prescriptions, and in the most recent year's data for Shropshire pharmacies 86.5% of forms received and 88% of items were via EPS.

Figure 84: Forms and items dispensed in total and by Electronic Prescription Service (EPS) in Shropshire Community Pharmacies 2024

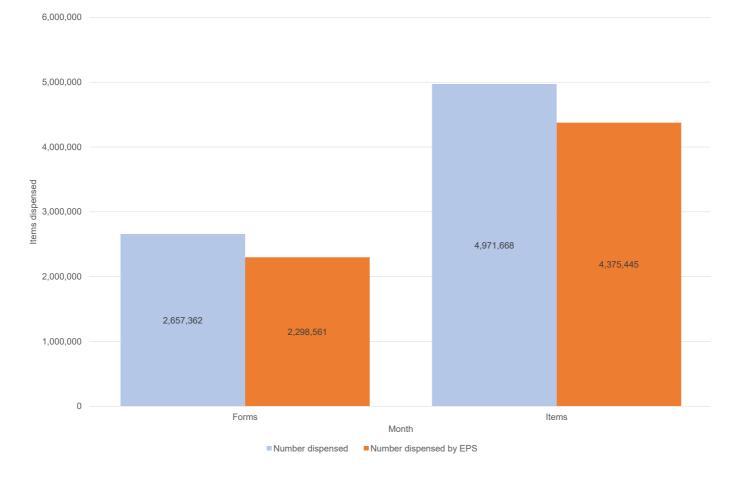
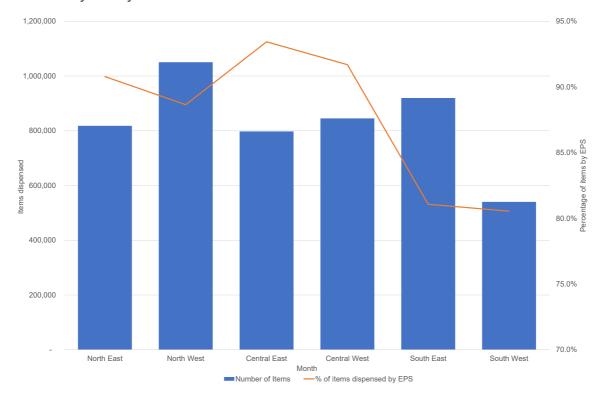


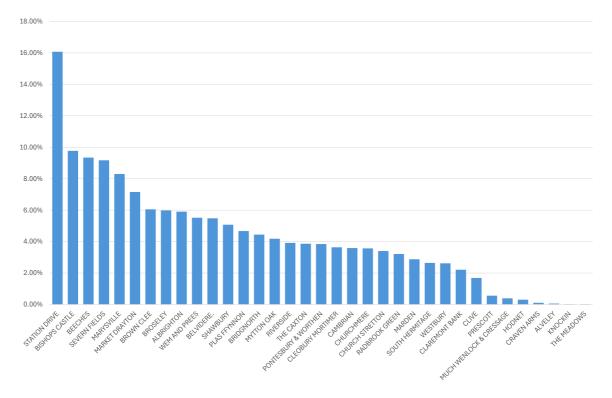
Figure 85: Items dispensed in total and by Electronic Prescription Service (EPS) in Shropshire Community Pharmacies 2024 by Family Hub Area



#### Distance Selling Pharmacies

The data previous shown was community pharmacy data, however prescriptions can also be sent from distance selling pharmacies. In 2024/25 6,554,890 items were prescribed from Shropshire GP practices, 297,763 (4.54%) of these were dispensed from distance selling pharmacies, with the percentages higher in some practices, notably Station Drive in Ludlow (16.07%), this is shown in Figure 86. At present we don't have further data to look at previous year, or how Shropshire's figures compare to other areas, however a pharmacy closed in Ludlow in this time period.

Figure 86: Percentage of items prescribed by GP practices that were dispensed by distance selling pharmacies 2024/25



### Repeat Dispensing and electronic repeat dispensing (eRD)

At least two thirds of all prescriptions in primary care are for patients needing repeat supplies of regular medicines. Using this service allows repeat supplies of NHS prescriptions without the GP practice needing to issue a prescription each time and saves time for the GP practice and the patient.

The eRD allows the prescriber to authorise a prescription for a specified number of issues and each issue contains the same prescribed items and allows a batch of repeat prescription issues for use for up to 12 months. The prescription issues are then made available electronically for dispensing at the specified interval by the patient's nominated pharmacy. Before each supply the pharmacy will ascertain the patient's need for a repeat supply of a particular medicine. It is a great way for the GP practice to stay in control of prescription items and the service specification states that pharmacies must ask if anything has changed since the previous items were issued and do they need everything on the script today. It is suitable for stable patients on regular medication and pharmacies can help identify suitable patients.

### Disposal of unwanted medicines

Community pharmacy owners are obliged to accept back unwanted medicines from patients, although this does not include sharps. The medicines are then safely disposed of, and NHS England arrange for a waste contractor to collect the medicines from pharmacies at regular intervals. The pharmacy owner must, if required by the local NHS contract management team or the waste contractor, sort them into solids (including ampoules and vials), liquids and aerosols; the waste contractor will be able to advise on whether this is necessary. Additional segregation is also required under the Hazardous Waste Regulations.

### Healthy living pharmacies

The Healthy Living Pharmacy (HLP) framework is aimed at achieving consistent provision of a broad range of health promotion interventions through community pharmacies to meet local need, improving the health and wellbeing of the local population and helping to reduce health inequalities. HLPs have cemented the idea that every interaction in the pharmacy and the community is an opportunity for a health promoting intervention, for example, people walking into a HLP are twice as likely to set a quit date for smoking and then quit than if they walked into a non-HLP.

Community pharmacy contractors were required to become an HLP in 2020/21 as agreed in the five-year CPCF; this reflects the priority attached to public health and prevention work.

#### Promotion of healthy lifestyles (public health)

Every financial year pharmacies are required to participate in up to four health campaigns – two national campaigns and two ICB campaigns - so this will involve displaying and distributing leaflets provided by NHS England such as the campaign in 2022/23 on weight management which lasted most of January 2023. Other campaigns could include promotion of flu vaccination uptake or advice on increasing physical activity. Pharmacies will also get involved in a number of local campaigns every year as directed by NHS England.

When requested to do so by NHS England, each pharmacy may have to provide some information such as the number of people who were given information about this campaign, so that the impact of the campaign can be evaluated and developed in the future.

#### Signposting patients to other healthcare providers

NHS England will provide pharmacies with lists of sources of care and support in the area and pharmacists and staff will be expected to help people who ask for assistance by directing them to the most appropriate source when it can't be provided by the pharmacy. This may involve referring patients to other healthcare professionals or care providers, or other sources of help such as local or national patient support groups. A

written referral note may be provided if appropriate, and where the patient is known to the pharmacy staff, a record of this referral may be made on the patient's pharmacy record if this is clinically significant.

### Support for self-care

Pharmacies will help manage minor ailments and common conditions, by the provision of advice and where appropriate, the sale of medicines, including dealing with referrals from NHS 111. Records will be kept where the pharmacist considers it relevant to the care of the patient.

The provision of advice and support by pharmacy staff to enable people to derive maximum benefit from caring for themselves or their families. The main focus is on self-limiting illness, but support for people with long-term conditions is also a feature of the service.

### Clinical governance

While not part of the essential services offered by pharmacies, as set out in the NHS pharmaceutical and local pharmaceutical services regulations 2013, clinical governance forms part of the terms of service and the pharmacies must have a system of clinical governance to support the provision of excellent care. Requirements set out in the CPCF include:

- The pharmacy should notify its patients of the NHS services provided by the contractor
- The pharmacy should undertake a patient satisfaction survey annually that is then reviewed and action taken to improve performance
- Medicines owed to patients or out of stock should be monitored, and patients should be given a
  written note detailing what medicine is owed and how much and when it is expected to be available
- Having complaints and whistle-blowing procedures that are reviewed and acted upon
- The pharmacy should co-operate with local patient and public involvement visits and take action
- The pharmacy should co-operate with the PCO and other appropriate external bodies on monitoring and auditing of pharmacy services
- The pharmacy should act on the disability discrimination act to make 'reasonable adjustments' to the physical features of the premises
- Should participate in clinical audit, including practice based and a PCO multidisciplinary audit
- Use of standard operating procedures
- · Patient safety incident reporting to the National Reporting and Learning Service
- Acting upon drug alerts and product recalls to minimise patient harm
- Have cleanliness and infection control measures in place

## Advanced pharmacy services

There are nine advanced services within the NHS Community Pharmacy Contractual Framework (CPCF). Community pharmacies can choose to provide any of these services commissioned by NHS England as long as they meet the requirements set out in the Secretary of State Directions. The nine advanced services are:

- Appliance Use Review (AUR)
- Flu Vaccination Service
- Hypertension Case-Finding Service
- Lateral Flow Device (LFD) service
- New Medicine Service (NMS)
- Pharmacy Contraception Service (PCS)
- Pharmacy First service
- Smoking Cessation Service (SCS)
- Stoma Appliance Customisation (SAC)

Appendix 7 shows a summary of each Shropshire pharmacy the advanced services they provide.

## Appliance Use Review (AUR)

AURs can be carried out by a pharmacist or a specialist nurse in the pharmacy or at the patient's home, or if required be provided by telephone or video consultation, in circumstances where there is privacy. AURs should improve the patient's knowledge and by looking at the way the patient uses the appliance and their experience of it and then identifying ineffective use and discussing improvements as well as advising the patient on the safe and appropriate storage and disposal of used or unwanted appliances

In the pharmacy data obtained between December 2023 and November 2024 no pharmacies in the Shropshire, Telford and Wrekin ICB had any AURs at either the premises or in user's home.

#### Flu Vaccination Service

Community pharmacies have been providing flu vaccinations under a nationally commissioned service since September 2015. Each year the NHS runs a seasonal flu vaccination campaign between September and March aiming to vaccinate all patients at risk of developing more serious complications from the virus. People seeking vaccinations have found pharmacies useful due to their accessibility, extended opening hours and ability to walk in without an appointment.

Influenza and other respiratory viruses can add significant pressures to the NHS and vaccination can help health and social care systems manage winter pressures by helping to reduce demand for GP consultations and hospitalisations. For most healthy people, influenza is usually a self- limiting disease. However, children, older people, pregnant women and those with certain long-term conditions are at increased risk of severe illness if they catch it. The vaccination provides protection against the most prevalent strains of the virus.

In the pharmacy data obtained between December 2023 and November 2024, the vast majority of pharmacies had influenza administered fees and in total there were 47,436 across Shropshire, Telford and Wrekin ICB, with 27,916 (59%) in Shropshire pharmacies, nearly 75% of these were in October.

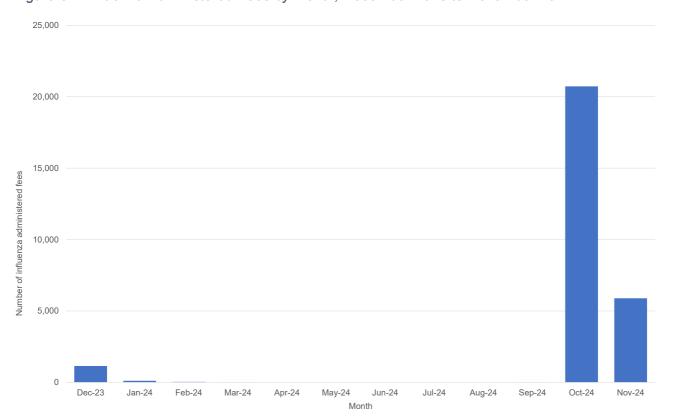


Figure 87: Influenza Administered Fees by Month, December 2023 to November 2024

■ Number of Influenza Administered Fees

The pharmacies from the Central West and Central East family hub areas had the highest number of influenza administered fees, accounting for 30% and 28% of the Shropshire total respectively, these two had the highest number per pharmacy and also per head of population.

Figure 88 : Influenza Administered Fees by Month, December 2023 to November 2024, by Family Hub Area

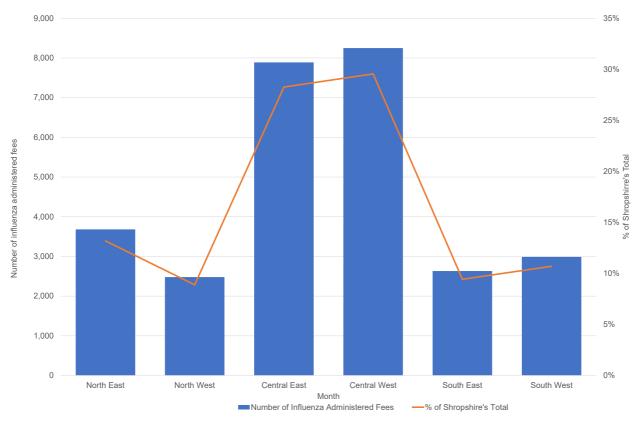


Figure 89: Influenza administered fees at Shropshire Community Pharmacies December 23 to November 24 by Family Hub Area per pharmacy and per head of population

Area	Number of Influenza Administered Fees	Number of pharmacies	Influenza administered fees per pharmacy	Population	Influenza administered fees per head of population
North East	3,681	7	526	58,366	0.06
North West	2,479	7	354	51,791	0.05
Central East	7,888	7	1,127	50,334	0.16
Central West	8,249	8	1,031	59,342	0.14
South East	2,632	9	292	67,568	0.04
South West	2,987	5	597	36,237	0.08
Shropshire	27,916	43	649	323,606	0.09

### Hypertension case-finding service

Hypertension case-finding was commissioned as an Advanced service from 1st October 2021. In public facing communications, the service is described as the NHS Blood Pressure Check Service.

The 5-year Community Pharmacy Contractual Framework (CPCF) agreement reached in July 2019 included a plan to pilot case finding for undiagnosed cardiovascular disease. Hypertension is the biggest risk factor for CVD and is one of the top five risk factors for all premature death and disability in England. An estimated 5.5 million people have undiagnosed hypertension across the country. CVD is a key driver of health inequalities, accounting for around 25% of the life expectancy gap between rich and poor populations in England. Those in the most deprived 10% of the population are almost twice as likely to die as a result of CVD than those in the least deprived 10% of the population.

Pharmacy owners opting to provide the service must undertake both stages of it, where clinically required - the first is identifying people at risk of hypertension and offering them a blood pressure measurement (a 'clinic check'), and the second stage, where clinically indicated, is offering ambulatory blood pressure monitoring (ABPM). The blood pressure test results will then be shared with the patient's GP practice to inform a potential diagnosis of hypertension.

The service is aimed at those who are 40 or over who do not have a current diagnosis of hypertension, although those under the age of 40 who request it as they have a family history of hypertension maybe provided the service at the pharmacy staff's discretion.

Within Shropshire 40 of the 43 community pharmacies have signed up to the service as of 16<sup>th</sup> January 2025, the exceptions being Cambrian Pharmacy in Oswestry, Wenlock Pharmacy in Much Wenlock and Rhodes TC Chemist in Albrighton, although it is likely that all pharmacies will be signed up to this service and pharmacies will receive monthly threshold payments from June 2025. After the draft was sent out for consultation, in July 2025, 42 community pharmacies were offering this service, with Rhodes TC chemist not.

Between December 23 and November 24, 8,613 blood pressure checks were carried in Shropshire's community pharmacies, which was 44.4% of the ICB's total, of these 8,613, 242 (2.8%) had ABPM.

Figure 90: Hypertension case-finding service, across Shropshire, Telford and Wrekin ICB in Community Pharmacy between December 23 to November 24

	Number of Clinic Blood Pressure checks	% of all blood pressure checks in ICB	Number of Community Pharmacy ABPM	% of all ABPM in ICB	% of blood pressure checks having ABPM
Shropshire	8,613	44.4%	242	46.7%	2.8%
Telford and Wrekin	10,792	55.6%	276	53.3%	2.6%
Shropshire, Telford & Wrekin ICB	19,405	100.0%	518	100.0%	2.7%

Figure 91 shows a breakdown of the hypertension advanced service across the family hub areas, this shows that the pharmacies from the North West area had 6.2% of blood pressure checks that also had ABPM, compared to 0.4% in the South West. More blood pressure checks were carried out in the Central West area, and despite it having more pharmacies than the other areas, this had a higher rate of blood pressure checks per pharmacy and also a higher number of blood checks per head of population

Figure 91: Hypertension case-finding service at Shropshire Community Pharmacies, December 23 to November 24 by Family Hub Area per pharmacy and per head of population

Area	Number of Clinic Blood Pressure checks	Number of Community Pharmacy ABPMs	% of blood pressure checks having ABPM	% of Shropshire's Blood Pressure Checks	Number of pharmacies signed up	Blood Pressure Checks per signed up pharmacy	Blood Pressure Checks per head of population
North East	1,188	56	4.7%	13.8%	7	170	0.02
North West	923	57	6.2%	10.7%	6	154	0.02
Central East	965	25	2.6%	11.2%	7	138	0.02
Central West	2,878	60	2.1%	33.4%	8	360	0.05
South East	1,258	38	3.0%	14.6%	7	180	0.02
South West	1,401	6	0.4%	16.3%	5	280	0.04
Shropshire	8,613	242	2.8%	100.0%	40	215	0.03

#### Lateral Flow Device (LFD) service

The Lateral flow device tests supply service for patients potentially eligible for COVID-19 treatments (LFD service) was commissioned as an Advanced service from 6th November 2023. In March 2024 it was announced that the service would continue to be commissioned in 2024/25 and that additional patient groups became eligible to access the service.

Eligible patients include those people aged 85 and over, or whom have end-stage heart failure, or who are on the organ transplant waiting list.

In Shropshire, 38 of the community pharmacies are signed up to this service as of 16<sup>th</sup> January 2025. Between December 23 and November 24, there were 874 lateral flow device (LFD) test supply service fees across Shropshire's pharmacies, which was just 23% of all in the ICB. Of these, the highest number came from the South West area, which was the area with the highest number per pharmacy that was signed up.

Figure 92: Lateral Flow Device (LFD) Test Supply Service Fees at Shropshire Community Pharmacies December 23 to November 24 by Family Hub Area per pharmacy

Area	Number of LFD Test Supply Service Fees	% of Shropshire's Total	Number of pharmacies signed up	LFD test supply service fees per pharmacy
North East	110	12.6%	7	15.7
North West	30	3.4%	5	6.0
Central East	43	4.9%	6	7.2
Central West	210	24.0%	8	26.3
South East	204	23.3%	7	29.1
South West	277	31.7%	5	55.4
Shropshire	874	100.0%	38	23.0

### New Medicine Service (NMS)

This service provides support for people with long-term conditions newly prescribed a medicine to help improve medicines adherence; it is focused on specific patient groups and conditions. This service was introduced as reviews conducted across different disease states and different countries are consistent in estimating that between 30 and 50% of prescribed medicines are not taken as recommended.

Patients who have been newly prescribed a medicine for a long term condition will be offered the choice to use the NMS, and if they do, the patient and pharmacy will agree to meet a week or two later, where they will assess the patient's adherence to the medicine and identify any problems or support needed, and then there will be another meeting a few weeks later to further assess adherence and identify issues. The aim of the service is to improve adherence which will lead to better health outcomes, improve patient understanding and decision making about their treatment, reduce medicine wastage and reduce any issues from adverse effects of the medication.

Between December 23 and November 24, 37,152 new medicine service (NMS) interventions were declared, with 19,613 (52.8%) in Shropshire's community pharmacies. Of these, there was a pretty even split between the pharmacies from each family hub area although the North West had the highest number, and the highest rate per pharmacy and highest rate per head of population.

Figure 93: New Medicine Service (NMS) activity at Shropshire Community Pharmacies December 23 to November 24 by Family Hub Area per pharmacy

Area	Number of NMS interventions declared	% of Shropshire's Total	Number of pharmacies signed up	NMS interventions declared per pharmacy	Population	NMS interventions declared per head of population
North East	2,630	13.4%	7	375.7	58,366	0.05
North West	3,986	20.3%	7	569.4	51,791	0.08
Central East	3,299	16.8%	7	471.3	50,334	0.07
Central West	3,619	18.5%	8	452.4	59,342	0.06
South East	3,445	17.6%	9	382.8	67,568	0.05
South West	2,634	13.4%	5	526.8	36,237	0.07
Shropshire	19,613	100.0%	43	456.1	323,606	0.06

### Pharmacy Contraception Service (PCS)

The PCS commenced on 24th April 2023, allowing the on-going supply of oral contraception (OC) from community pharmacies. From 1st December 2023, the service expanded to include both initiation and ongoing supply of OC.

- **Initiation**: where a person wishes to start OC for the first time or needs to restart OC following a pill free break. A person who is being switched to an alternative pill following consultation can also be considered as an initiation: and
- Ongoing supply: where a person has been supplied with OC by a primary care provider, or a sexual health clinic (or equivalent) and a subsequent equivalent supply is needed. Their current supply of OC should still be in use

The service provides another opportunity for pharmacy owners to help address health inequalities by providing wider healthcare access in their communities and signposting service users into local sexual health services. The service aims to provide greater choice from where people can access contraception services and provide extra capacity in primary care and sexual health clinics to support meeting more complex needs. However, as this is a new service offered by pharmacies, it is expected that activity will rise by the time of the next PNA, and the service is also going to be expanded this year to include emergency contraception in addition to initiation and ongoing supply of regular contraception which ties in with the data for the local authority commissioned emergency hormonal contraception service.

In Shropshire, 40 of the community pharmacies are signed up to this service as of 16<sup>th</sup> January 2025 – the only exceptions being St Martins Pharmacy, Conway Pharmacy and Wenlock Pharmacy. After the draft was sent out for consultation, in July 2025, this was now 42 community pharmacies, with only St Martin's pharmacy not offering the service. Between December 23 and November 24, Shropshire had 834 community pharmacy contraceptive ongoing consultations, which was 56.9% of the ICB's total. Shropshire also had 109 community pharmacy contraceptive initiation consultations, which was 47% of the ICB's total.

Figure 94: Pharmacy Oral Contraception Consultations at Shropshire Community Pharmacies December 23 to November 24 by Family Hub Area per pharmacy

	No. of OC Ongoing	No. of Initiation	% of Shropshire's OCs	% of Shropshire's Initiations	Number of pharmacies signed up	OC per signed up pharmacy	Initiations per signed up pharmacy
North East	360	39	43.2%	35.8%	7	51.4	5.6
North West	199	19	23.9%	17.4%	6	33.2	3.2
Central East	10	1	1.2%	0.9%	6	1.7	0.2
Central West	147	37	17.6%	33.9%	8	18.4	4.6
South East	98	11	11.8%	10.1%	8	12.3	1.4
South West	20	2	2.4%	1.8%	5	4.0	0.4
Shropshire	834	109	100.0%	100.0%	40	20.9	2.7

### Pharmacy First service

The Pharmacy First service, which commenced on 31st January 2024, is a crucial first step in recognising and properly funding the enormous amount of healthcare advice that community pharmacies provide to the public every day and in establishing and funding community pharmacy as the first port of call for healthcare advice. This advanced service involves pharmacists providing advice and NHS funded treatment where appropriate for seven common conditions which are:

- Sinusitis (12 years and over)
- Sore throat (5 years and over)
- Acute otitis media (1 to 17 years)
- Infected insect bite (1 year and over)
- Impetigo (1 year and over)
- Shingles (18 years and over)

### Uncomplicated UTI (Women 16 to 64 years)

Consultations for these seven clinical pathways can be provided to patients presenting to the pharmacy as well as those referred electronically by NHS 111, general practices and others. The service also covers minor illness consultations with a pharmacist and the supply of urgent medicines (and appliances) if the conditions are met

Between February 24 and November 24, Shropshire had 14,701 consultations for any of the conditions under pharmacy first, which was 37.3% of the ICB's total, which is perhaps a lower percentage than would be expected given Shropshire has a larger population than Telford and Wrekin, so perhaps there are issues accessing this service. More consultations came from the central east family hub area (24.9%) than any other, and this had a higher number per pharmacy and per head of population.

Figure 95: Any Pharmacy First Consultations at Shropshire Community Pharmacies December 23 to November 24 by Month

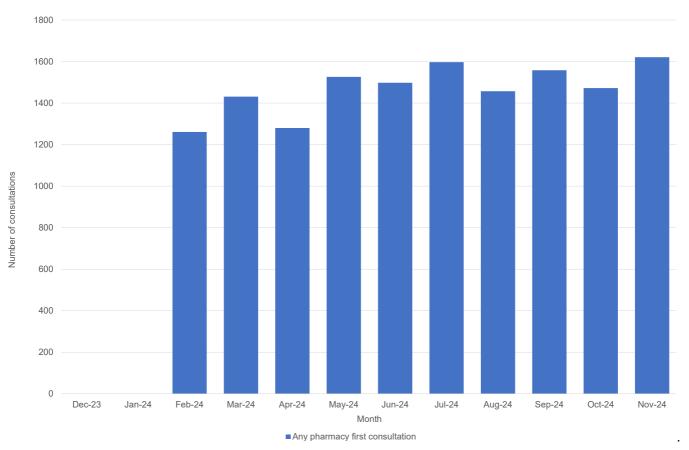


Figure 96: Any Pharmacy First Consultations at Shropshire Community Pharmacies February 24 to November 24 by Family Hub Area per pharmacy

Area	Any pharmacy first consultation	% of Shropshire's consultations	Number of pharmacies signed up	Any pharmacy first per pharmacy	Population	Any pharmacy first per head of population
North East	1,544	10.5%	7	220.6	58,366	0.03
North West	2,658	18.1%	7	379.7	51,791	0.05
Central East	3,655	24.9%	7	522.1	50,334	0.07
Central West	3,163	21.5%	8	395.4	59,342	0.05
South East	2,582	17.6%	9	286.9	67,568	0.04
South West	1,099	7.5%	5	219.8	36,237	0.03
Shropshire	14,701	100.0%	43	341.9	323,606	0.05

Figure 97: Pharmacy First Consultations at Shropshire Community Pharmacies December 23 to November 24 by Condition

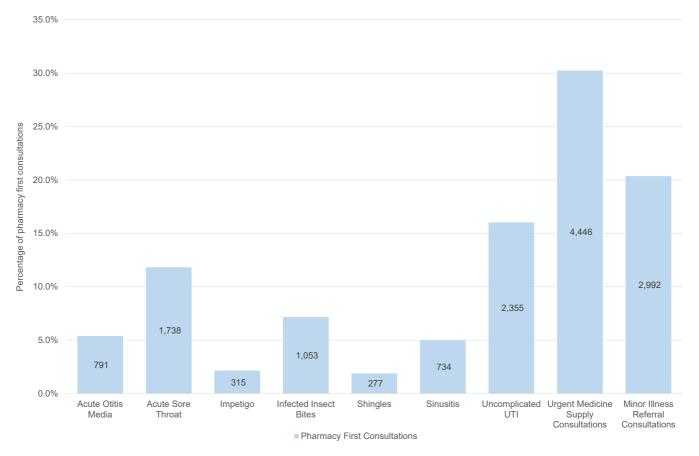


Figure 98: Pharmacy First Consultations at Shropshire Community Pharmacies February 24 to November 24 by Type of Consultation and by Family Hub Area per pharmacy

Pharmacy First Consultations	North East	North West	Central East	Central West	South East	South West	Shropshire
Acute Otitis Media	73	182	154	181	116	85	791
Acute Sore Throat	151	443	363	339	252	190	1,738
Impetigo	45	47	69	71	54	29	315
Infected Insect Bites	125	104	282	283	177	82	1,053
Shingles	34	49	52	61	51	30	277
Sinusitis	87	131	118	195	120	83	734
Uncomplicated UTI	288	439	572	546	324	186	2,355
Urgent Medicine Supply Consultations	421	568	1,257	929	967	304	4,446
Minor Illness Referral Consultations	320	695	788	558	521	110	2,992
Any pharmacy first consultation	1,544	2,658	3,655	3,163	2,582	1,099	14,701

### **Smoking Cessation Service**

Smoking Cessation Service (SCS) which was commissioned as an Advanced service from 10th March 2022. In July 2019, PSNC, NHS England and the Department of Health and Social Care (DHSC) agreed a five-year deal for community pharmacies, which included piloting a service to take stop smoking referrals from secondary care and then if successful, in Year 3 (2021/22) to commission such a service nationally.

Between December 23 and November 24, Shropshire had 47 smoking cessation which was 44.8% of the ICB's total. Of the 47 that took place in Shropshire, 20 (42.6%) were at South East family hub pharmacies and 18 (38.3%) at Central West ones. Nicotine replacement therapies (NRT) have recently been commissioned through the pharmacies as part of the local authority's smoking cessation programme, which is separate to the advanced service smoking cessation service.

### Stoma Appliance Customisation (SAC) Service

Stoma Appliance Customisation (SAC) is the third Advanced Service to be introduced into the English Community Pharmacy Contractual Framework (CPCF). This service involves the customisation of a quantity of more than one stoma appliance, based on the patient's measurements or a template. The aim of the service is to ensure proper use and comfortable fitting of the stoma appliance and to improve the duration of usage, thereby reducing waste. Between December 23 and November 24, Shropshire had 79 stoma customisation fees which was 67.5% of the ICB's total. Of the 79 carried out in Shropshire, 47 (59.5%) were at North East family hub pharmacies and 29 (36.7%) at Central East ones.

## Locally commissioned (enhanced) services

Local commissioners (for example, Shropshire Council or Shropshire, Telford and Wrekin ICB) can commission additional services through service level agreements. These services are commissioned to reflect the needs of the area. Services that are commissioned in Shropshire are shown in Figure 99

Figure 99: Summary of provision of locally commissioned services in Shropshire (2025)

Locally commissioned service	Commissioner	Number of Pharmacies providing	Percentage of pharmacies providing (%)
Supervised consumption	Local Authority	31	72.1%
Needle and Syringe Exchange	Local Authority	26	60.5%
Sexual Health Services: Issue of treatment for Chlamydia	Local Authority	26	60.5%
Sexual Health Services: Issue of Chlamydia/Gonorrhoea Smartkits	Local Authority	26	60.5%
Condom Distribution Scheme	Local Authority	26	60.5%
Emergency Hormonal Contraception	Local Authority	27	62.8%
Covid vaccinations	National	21	48.8%
Influenza anti-viral	ICB	1	2.3%
IP pathfinder	ICB	3	7.0%
End of life	ICB	9	20.9%

In addition, there were two pilots that are no longer operating at present:

#### Joint Pain in Pharmacy (JPiP)

This involved the undertaking of free training and delivering support to patients for self-management of joint pain. This community pharmacy service offers specific healthy lives interventions to patients aged 45 years and over who have joint pain affecting the hands, hips, knees or feet. The aims of the service are to help prevent worsening health for people with long-term health conditions affecting the joints, and to reduce the number and intensity of costly interventions in urgent planned or specialist care.

### Community Pharmacy AF Screening (Telford & Wrekin and Shropshire Areas)

This was a pilot scheme to screen for atrial fibrillation in patients who are registered with a GP practice in either Telford or Shropshire, targeting those most at risk, i.e., anyone aged 65 and over with:

- coronary heart disease (angina, previous myocardial infarction, coronary artery bypass graft/stent)
- diabetes
- hypertension
- heart failure
- stroke/transient ischemic attack
- peripheral arterial disease

At present this project is paused and under review, due to funding of the machines required.

## Local Authority Public Health Commissioned Services

The Local Authority currently commissions the following enhanced services across Shropshire

- Supervised consumption
- Needle and syringe exchange schemes
- Sexual Health Services: Issue of treatment for Chlamydia
- Sexual Health Services: Issue of Chlamydia/Gonorrhoea Smartkits
- Condom Distribution Scheme
- Emergency Hormonal Contraception
- Healthy start vitamins

## Supervised consumption

This service requires an accredited pharmacist to supervise the consumption of prescribed medicines at the point of dispensing. The Pharmacist offers a client focused non-judgmental, confidential service, providing support and advice to the patient, including referral to primary care or specialist centres where appropriate. Supervision of medicines includes methadone and other medicines used for the management of opiate dependence. Community pharmacists link in with existing local networks for substance misuse services where necessary.

31 pharmacies in Shropshire are currently signed up for the observed consumption service. A list of the active providers is shown in Figure 103

#### Registrations

For the year 2023/24, there were 127 registrations of clients for the observed consumption from 33 different pharmacies in Shropshire. Figure 100 shows a breakdown of client registrations by area.

Figure 100: Observed Consumption Registrations, 2023/24 by Family Hub Area

North East	North West	Central East	Central West	South East	South West	Shropshire
20	27	21	31	17	11	127

Source: PharmOutcomes, 01 April 2023 to 31 March 2024,

#### Activity Data

A total of 2,283 provisions out by 37 pharmacies across Shropshire for the period 01 April 2023 to 31 March 2024. Figure 101 shows a breakdown of the provisions by the family hub area of the pharmacy, and Figure 102 shows a breakdown of them by month.

Figure 101 shows the location of the pharmacies offering this service.

Figure 101: Observed Consumption Provisions, 2023/24 by Family Hub Area

North East	North West	Central East	Central West	South East	South West	Shropshire
163	405	301	752	369	293	2,283

Source: PharmOutcomes, 01 April 2023 to 31 March 2024,

Figure 102: Observed Consumption Provisions, 2023/24 by Month

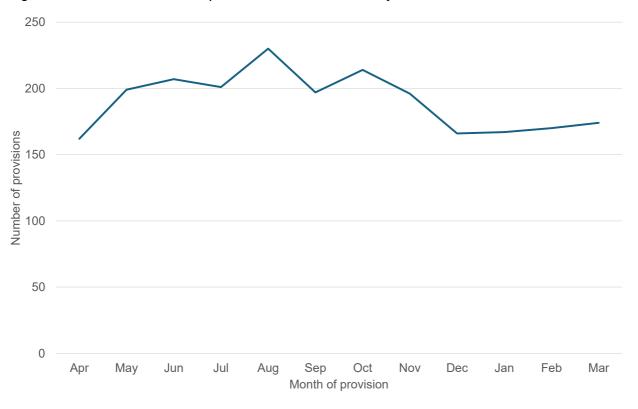


Figure 103: Pharmacies offering Observed Consumption Programme

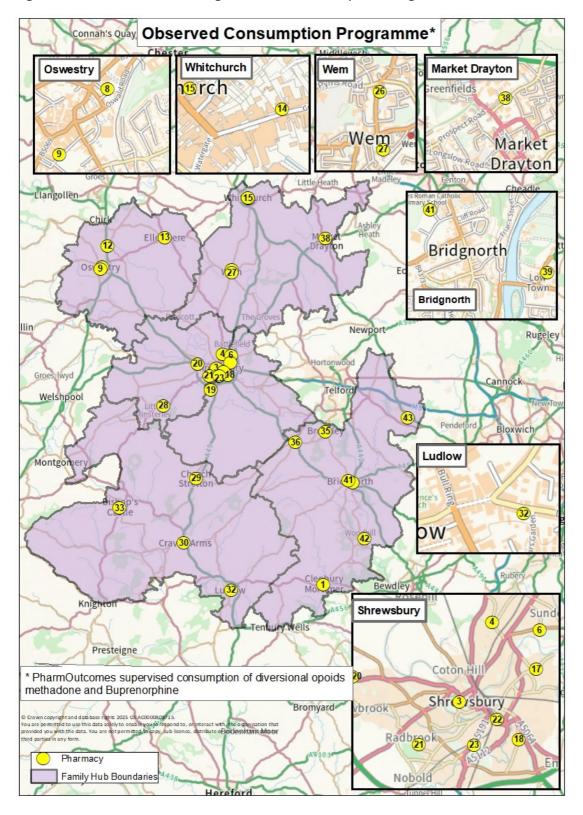


Figure 104: Key for pharmacies offering Observed Consumption Programme

Map ID	Name	Address
1	Cleobury Pharmacy	Off Vaughan Road, Cleobury Mortimer, DY14 8DB
3	Lunts Pharmacy	The Tannery, Barker Street, Shrewsbury, SY1 1QJ
4	Well Pharmacy	101 Mount Pleasant Road, Shrewsbury, SY1 3EL
6	MSN & Lunts Pharmacy	Severn Fields Health Centre, Sundorne Road, Shrewsbury, SY1 4RQ
8	Day Lewis Pharmacy	Oswald Road, Oswestry, SY11 1RD
9	Day Lewis Pharmacy	14 English Walls, Oswestry, SY11 2PA

Map ID	Name	Address
12	Day Lewis Pharmacy	The Former Ticket Office, The Cross, Gobowen, SY11 3JS
13	Ellesmere Pharmacy	5 Cross Street, Ellesmere, SY12 0AW
14	Green End Pharmacy	11-13 Green End, Whitchurch, SY13 1AD
15	Rowlands Pharmacy	11 High Street, Whitchurch, SY13 1AX
17	Conway Pharmacy	238 Monkmoor Road, Telford Estate, Shrewsbury, SY2 5SR
18	Rowlands Pharmacy	Marden Medical Practice, 25 Sutton Road, Shrewsbury, SY2 6DL
19	Rowlands Pharmacy	7 Lansdowne Road, Bayston Hill, Shrewsbury, SY3 0HT
20	Bicton Heath Pharmacy	Bicton Heath Shopping Centre, Welshpool Road, Shrewsbury, SY3 5AD
21	Radbrook Green Pharmacy	Bank Farm Road, Radbrook, Shrewsbury, SY3 6DU
22	Asda Pharmacy	Old Potts Way, Shrewsbury, SY3 7ET
23	Lunts Pharmacy	1-3 Hereford Road, Shrewsbury, SY3 7QT
26	Rowlands Pharmacy	Wem And Prees Medical Practice, New Street, Wem, SY4 5AF
27	Rowlands Pharmacy	Unit 1, Morris Ctrl Shop Parade, Wem, SY4 5NY
28	Pontesbury Pharmacy	Main Road, Pontesbury, SY5 0RR
29	MSN & Lunts Pharmacy	40 Sandford Avenue, Church Stretton, SY6 6BH
30	Lunts Pharmacy	Drovers' House, Auction Yard, Craven Arms, SY7 9BZ
32	Lunts Pharmacy	116-119 Lower Galderford, Ludlow, SY8 1RU
33	Bishops Castle Pharmacy	The Pharmacy, Church Street, Bishops Castle, SY9 5AE
35	Rowlands Pharmacy	80 High Street, Broseley, TF12 5ET
36	Wenlock Pharmacy	14 High Street, Much Wenlock, TF13 6AA
38	Peak Pharmacy	Medical Centre, Maer Lane, Market Drayton, TF9 3AL
39	Bridgnorth Pharmacy	2 Mill Street, Bridgnorth, WV15 5AL
41	Peak Pharmacy	Northgate Health Centre, Northgate, Bridgnorth, WV16 4EN
42	Highley Pharmacy	Beulah House, High Street, Highley, WV16 6LP
43	Rhodes TC Chemist	77 High Street, Albrighton, Wolverhampton, WV7 3JA

#### Needle Exchange

The following is a summary of the activity data for the pharmacies-based needle exchange programme in Shropshire and covers the year between the dates 01 April 2023 and 31 March 2024.

Beginning from 01 October 2016 activity data has been collected using PharmOutcomes which is a web-based reporting platform for community pharmacies. 26 pharmacies in Shropshire are currently signed up to provide Needle Exchange Packs to injecting drug users. A list of the active providers is shown in Figure 106.

#### Registrations

In order to receive the different packs containing needles and other injecting drug paraphernalia, clients are asked to first register at a pharmacy. They are then given a card which they can present at any pharmacy in Shropshire which participates in the needle exchange programme and receive further packs. The idea is that a client only has to register once. For the year 2023/24, there were 127 registrations of clients to receive Needle Exchange Packs from 13 different pharmacies in Shropshire. Figure 105 shows a breakdown of client registrations by family hub area.

Figure 105: Needle Exchange Registrations, 2023/24 by Family Hub Area

North East	North West	Central East	Central West	South East	South West	Shropshire
32	26	<5	52	5	8	127

Source: PharmOutcomes, 01 April 2023 to 31 March 2024,

#### Activity Data

A total of 1,919 needle exchange packs were given out by 16 pharmacies across Shropshire for the period 01 April 2023 to 31 March 2024. Figure 106 shows a breakdown of the provisions by the family

hub area of the pharmacy, and Figure 105 shows a breakdown of them by month and shows there has been a downward trend through the year.

Figure 106: Needle Exchange Provisions, 2023/24 by Family Hub Area

North East	North West	Central East	Central West	South East	South West	Shropshire
544	673	11	526	113	52	1,919

Source: PharmOutcomes, 01 April 2023 to 31 March 2024,

Figure 107: Needle Exchange Provisions, 2023/24 by Month

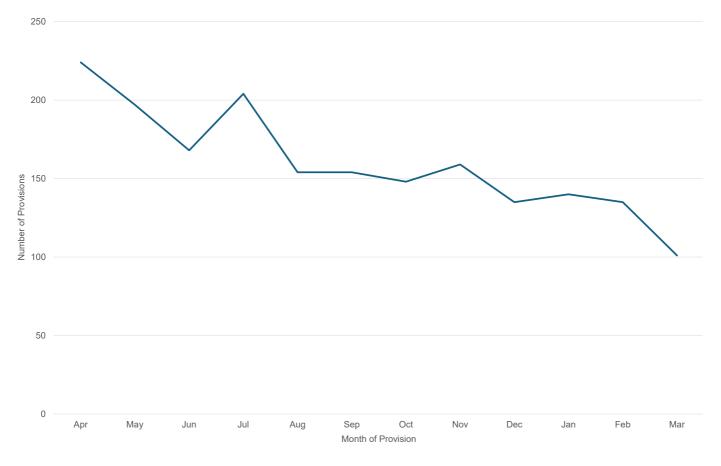


Figure 108: Pharmacies offering Needle Exchange Service

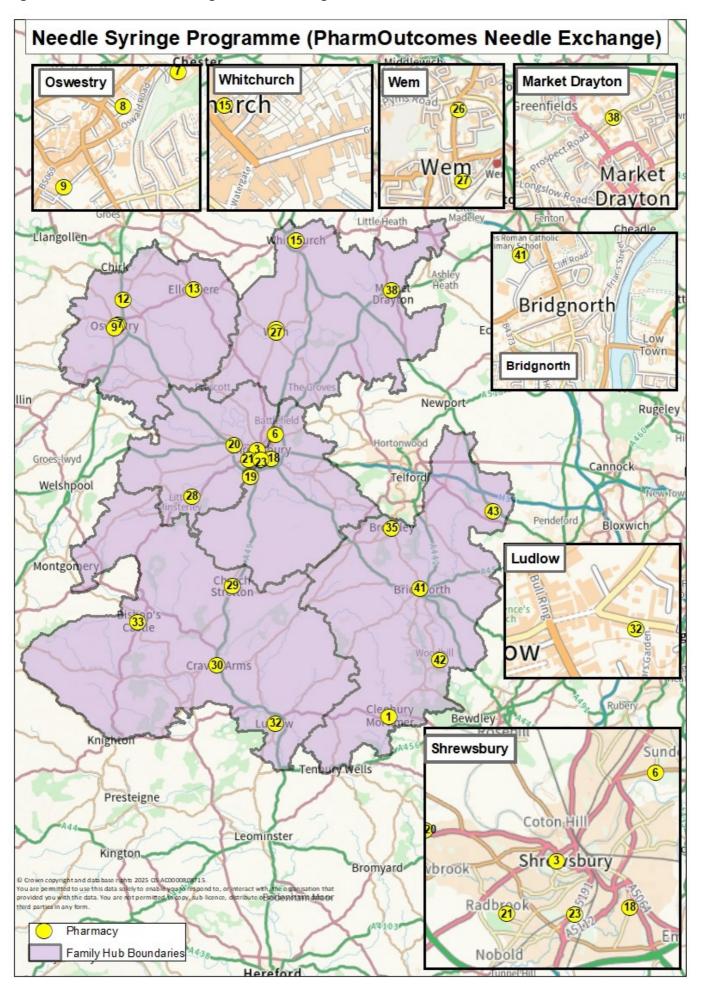


Figure 109: Key for pharmacies offering Needle Exchange service

Map ID	Name	Address
1	Cleobury Pharmacy	Off Vaughan Road, Cleobury Mortimer, DY14 8DB
3	Lunts Pharmacy	The Tannery, Barker Street, Shrewsbury, SY1 1QJ
6	MSN & Lunts Pharmacy	Severn Fields Health Centre, Sundorne Road, Shrewsbury, SY1 4RQ
7	Cambrian Pharmacy	Cambrian Medical Centre, Thomas Savin Road, Oswestry, SY11 1GA
8	Day Lewis Pharmacy	Oswald Road, Oswestry, SY11 1RD
s9	Day Lewis Pharmacy	14 English Walls, Oswestry, SY11 2PA
12	Day Lewis Pharmacy	The Former Ticket Office, The Cross, Gobowen, SY11 3JS
13	Ellesmere Pharmacy	5 Cross Street, Ellesmere, SY12 0AW
15	Rowlands Pharmacy	11 High Street, Whitchurch, SY13 1AX
18	Rowlands Pharmacy	Marden Medical Practice, 25 Sutton Road, Shrewsbury, SY2 6DL
19	Rowlands Pharmacy	7 Lansdowne Road, Bayston Hill, Shrewsbury, SY3 0HT
20	Bicton Heath Pharmacy	Bicton Heath Shopping Centre, Welshpool Road, Shrewsbury, SY3 5AD
21	Radbrook Green Pharmacy	Bank Farm Road, Radbrook, Shrewsbury, SY3 6DU
23	Lunts Pharmacy	1-3 Hereford Road, Shrewsbury, SY3 7QT
26	Rowlands Pharmacy	Wem And Prees Medical Practice, New Street, Wem, SY4 5AF
27	Rowlands Pharmacy	Unit 1, Morris Ctrl Shop Parade, Wem, SY4 5NY
28	Pontesbury Pharmacy	Main Road, Pontesbury, SY5 0RR
29	MSN & Lunts Pharmacy	40 Sandford Avenue, Church Stretton, SY6 6BH
30	Lunts Pharmacy	Drovers' House, Auction Yard, Craven Arms, SY7 9BZ
32	Lunts Pharmacy	116-119 Lower Galderford, Ludlow, SY8 1RU
33	Bishops Castle Pharmacy	The Pharmacy, Church Street, Bishops Castle, SY9 5AE
35	Rowlands Pharmacy	80 High Street, Broseley, TF12 5ET
38	Peak Pharmacy	Medical Centre, Maer Lane, Market Drayton, TF9 3AL
41	Peak Pharmacy	Northgate Health Centre, Northgate, Bridgnorth, WV16 4EN
42	Highley Pharmacy	Beulah House, High Street, Highley, WV16 6LP
43	Rhodes TC Chemist	77 High Street, Albrighton, Wolverhampton, WV7 3JA

Sexual Health Services: Issue of treatment for Chlamydia

Many Chlamydia cases go undiagnosed as Chlamydia is often asymptomatic. The National Chlamydia Screening Programme (NCSP) was set up to control and prevent the spread of chlamydia, targeting the higher risk group of young people aged under 25 who are sexually active.

The numbers of people accessing this service from pharmacies are very low, between 1<sup>st</sup> April 2023 and February 2025, just under 2 full financial years, there were less than 5 people who accessed this service from just 2 pharmacies, however, Figure 110 details a few indicators for chlamydia detection rates per 100,000 aged 15-24 by gender which shows there were 359 cases detected in 2023

Figure 110: Chlamydia detection rate per 100,000 aged 15-24 by gender, Public Health Outcomes Framework

	Period		thropshi	10	West Midlands	England		England	
Indicator		Recent Trend	Count	Value	Value	Value	Worst/ Lowest	Range	Best/ Highest
D01 - Fraction of mortality attributable to particulate air pollution (new method)  New doc.	2023	-	-	3.9%	5.1%	5.2%	3.4%	0	6.9%
D02a - Chiamydia detection rate per 100,000 aged 15 to 24 (Female)  <2,400	2023	-	240	1,637	1,547	1,962	984		4,777
D02a - Chlamydia detection rate per 100,000 aged 15 to 24 (Male)	2023	-	112	667	746	1,042	478		2,657
D02a - Chlamydia detection rate per 100,000 aged 15 to 24 (Persons)	2023	-	359	1,142	1,195	1,546	803		3,379

Although just two pharmacies had interactions recorded for treatment of Chlamydia, many more pharmacies are registered for this service (Figure 111), perhaps, indicating a need to promote this service with the residents and patients within Shropshire.

Figure 111: Pharmacies offering Chlamydia Treatment Service

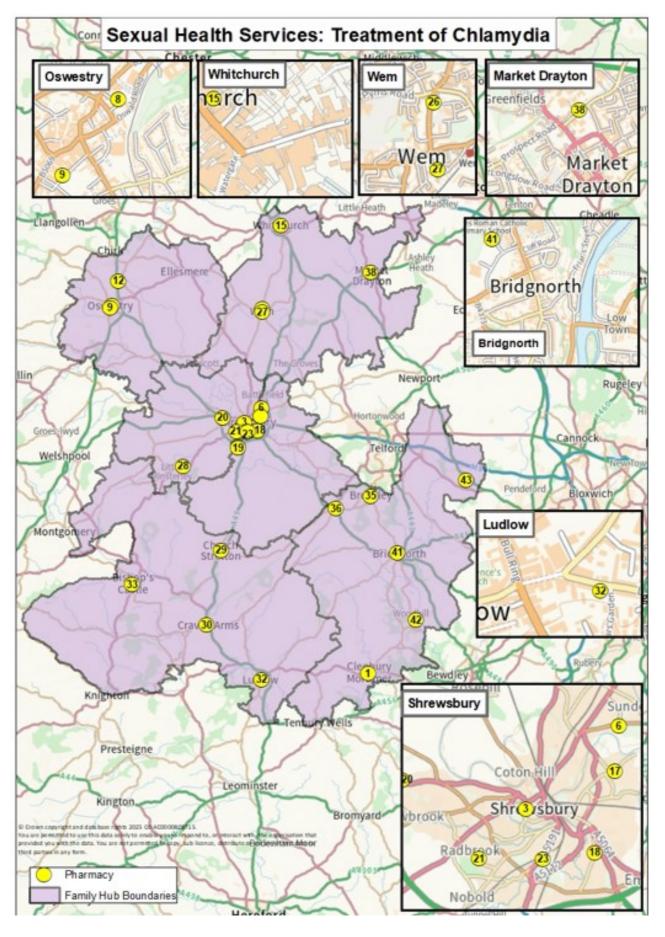


Figure 112: Key for pharmacies offering Chlamydia service

Мар		
ID	Name	Address
1	Cleobury Pharmacy	Off Vaughan Road, Cleobury Mortimer, DY14 8DB
3	Lunts Pharmacy	The Tannery, Barker Street, Shrewsbury, SY1 1QJ
6	MSN & Lunts Pharmacy	Severn Fields Health Centre, Sundorne Road, Shrewsbury, SY1 4RQ
8	Day Lewis Pharmacy	Oswald Road, Oswestry, SY11 1RD
9	Day Lewis Pharmacy	14 English Walls, Oswestry, SY11 2PA
12	Day Lewis Pharmacy	The Former Ticket Office, The Cross, Gobowen, SY11 3JS
15	Rowlands Pharmacy	11 High Street, Whitchurch, SY13 1AX
17	Conway Pharmacy	238 Monkmoor Road, Telford Estate, Shrewsbury, SY2 5SR
18	Rowlands Pharmacy	Marden Medical Practice, 25 Sutton Road, Shrewsbury, SY2 6DL
19	Rowlands Pharmacy	7 Lansdowne Road, Bayston Hill, Shrewsbury, SY3 0HT
20	Bicton Heath Pharmacy	Bicton Heath Shopping Centre, Welshpool Road, Shrewsbury, SY3 5AD
21	Radbrook Green Pharmacy	Bank Farm Road, Radbrook, Shrewsbury, SY3 6DU
23	Lunts Pharmacy	1-3 Hereford Road, Shrewsbury, SY3 7QT
26	Rowlands Pharmacy	Wem And Prees Medical Practice, New Street, Wem, SY4 5AF
27	Rowlands Pharmacy	Unit 1, Morris Ctrl Shop Parade, Wem, SY4 5NY
28	Pontesbury Pharmacy	Main Road, Pontesbury, SY5 0RR
29	MSN & Lunts Pharmacy	40 Sandford Avenue, Church Stretton, SY6 6BH
30	Lunts Pharmacy	Drovers' House, Auction Yard, Craven Arms, SY7 9BZ
32	Lunts Pharmacy	116-119 Lower Galderford, Ludlow, SY8 1RU
33	Bishops Castle Pharmacy	The Pharmacy, Church Street, Bishops Castle, SY9 5AE
35	Rowlands Pharmacy	80 High Street, Broseley, TF12 5ET
36	Wenlock Pharmacy	14 High Street, Much Wenlock, TF13 6AA
38	Peak Pharmacy	Medical Centre, Maer Lane, Market Drayton, TF9 3AL
41	Peak Pharmacy	Northgate Health Centre, Northgate, Bridgnorth, WV16 4EN
42	Highley Pharmacy	Beulah House, High Street, Highley, WV16 6LP
43	Rhodes TC Chemist	77 High Street, Albrighton, Wolverhampton, WV7 3JA

## Sexual Health Services: Issue of Chlamydia/Gonorrhoea Smartkits

Chlamydia and Gonorrhoea cause avoidable sexual and reproductive ill-health. The Chlamydia/ Gonorrhoea Screening Smartkit services provides a unisex kit for 16–24-year-olds. Which offers either a swab or urine collection and also includes a condom for the user. The kits can be tracked and monitored in terms of who's issued the kit to patients and those kits subsequently returned.

There were only 26 smartkits issued between 2020 and 2024, with the vast majority these (15) being to pharmacies in the North East family hub area, specifically Peak Pharmacy in Market Drayton, besides this one there were 6 other pharmacies that issued these kits.

Figure 113: Chlamydia/Gonorrhoea Smartkits Issued 2020 to 2024 by Family Hub Area

North East	North West	Central East	<b>Central West</b>	South East	South West	Shropshire
15	<5	7	72	<5	<5	26

Source: PharmOutcomes, 01 January 2020 to 31 December 2024,

Although seven pharmacies issued the Chlamydia/Gonorrhoea Smartkit, many more pharmacies are registered for this service, see Figure 112, perhaps, indicating a need to promote this service with the residents and patients within Shropshire, although it is likely that this has reduced due to the expansion of the online STI screening that is available.

Figure 114: Pharmacies offering Chlamydia/Gonorrhoea Smartkits

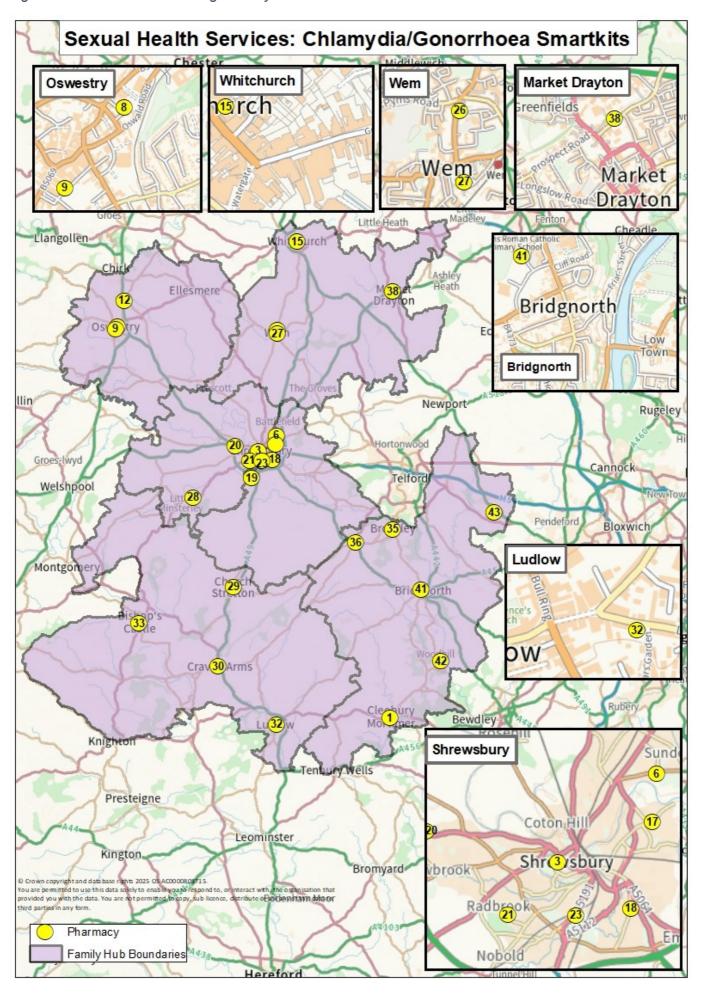


Figure 115: Key for pharmacies offering Chlamydia service

Map ID	Name	Address
1	Cleobury Pharmacy	Off Vaughan Road, Cleobury Mortimer, DY14 8DB
3	Lunts Pharmacy	The Tannery, Barker Street, Shrewsbury, SY1 1QJ
6	MSN & Lunts Pharmacy	Severn Fields Health Centre, Sundorne Road, Shrewsbury, SY1 4RQ
8	Day Lewis Pharmacy	Oswald Road, Oswestry, SY11 1RD
9	Day Lewis Pharmacy	14 English Walls, Oswestry, SY11 2PA
12	Day Lewis Pharmacy	The Former Ticket Office, The Cross, Gobowen, SY11 3JS
15	Rowlands Pharmacy	11 High Street, Whitchurch, SY13 1AX
17	Conway Pharmacy	238 Monkmoor Road, Telford Estate, Shrewsbury, SY2 5SR
18	Rowlands Pharmacy	Marden Medical Practice, 25 Sutton Road, Shrewsbury, SY2 6DL
19	Rowlands Pharmacy	7 Lansdowne Road, Bayston Hill, Shrewsbury, SY3 0HT
20	Bicton Heath Pharmacy	Bicton Heath Shopping Centre, Welshpool Road, Shrewsbury, SY3 5AD
21	Radbrook Green Pharmacy	Bank Farm Road, Radbrook, Shrewsbury, SY3 6DU
23	Lunts Pharmacy	1-3 Hereford Road, Shrewsbury, SY3 7QT
26	Rowlands Pharmacy	Wem And Prees Medical Practice, New Street, Wem, SY4 5AF
27	Rowlands Pharmacy	Unit 1, Morris Ctrl Shop Parade, Wem, SY4 5NY
28	Pontesbury Pharmacy	Main Road, Pontesbury, SY5 0RR
29	MSN & Lunts Pharmacy	40 Sandford Avenue, Church Stretton, SY6 6BH
30	Lunts Pharmacy	Drovers' House, Auction Yard, Craven Arms, SY7 9BZ
32	Lunts Pharmacy	116-119 Lower Galderford, Ludlow, SY8 1RU
33	Bishops Castle Pharmacy	The Pharmacy, Church Street, Bishops Castle, SY9 5AE
35	Rowlands Pharmacy	80 High Street, Broseley, TF12 5ET
36	Wenlock Pharmacy	14 High Street, Much Wenlock, TF13 6AA
38	Peak Pharmacy	Medical Centre, Maer Lane, Market Drayton, TF9 3AL
41	Peak Pharmacy	Northgate Health Centre, Northgate, Bridgnorth, WV16 4EN
42	Highley Pharmacy	Beulah House, High Street, Highley, WV16 6LP
43	Rhodes TC Chemist	77 High Street, Albrighton, Wolverhampton, WV7 3JA

### Condom Distribution Scheme

The Shropshire Condom Distribution Scheme (CDS) offers free condoms to young people from age 13 to 19, and in some services up to 25 years. To obtain a C (Condom) card, young people access a health or other trained professional, who following a short sexual health consultation, who will then issue them with an age-related card with an expiry date. Under 16's are assessed under Fraser Guidelines and safeguarding is an integral part of the registration process for all. C-card holders can then obtain free condoms from a variety of places including GP Practices, pharmacies or their place of education if the scheme is offered on site. Once the card expires, the young person needs to re-access a health or other trained professional to have it re-validated.

Pharmacies are an integral and essential part of the operation of CDS, and participate in either one of or both ways:

- **Distribution outlet** 26 pharmacies located over Shropshire are part of the Distribution outlets. This means a young person aged 24 and under, who has signed up for a C-card, can collect a bag of pre-packed condoms relating to the star rating on their card. This is an over-the-counter transaction.
- Provision of a C-card with Emergency Hormonal Contraception (EHC) Accredited
  pharmacists offer free registration and distribution of condoms in the local Condom Distribution
  Scheme (CDS) to women accessing Emergency Contraception aged up to 25 years. This is
  ensuring instant access to free contraception following an episode of unprotected sex.

Data on the CDS was extracted from PharmOutcomes between 2020 and 2024 and showed only 95 interactions and that interactions were falling, with less in recent years than during the years of covid lockdowns. The vast majority of these interactions, 72 (76%) were at pharmacies in the Central West family

hub area that incorporates Shrewsbury Town centre, with the majority (51) at the Rhodes pharmacy, Claremont Hill – which has now closed. In total 13 pharmacies had interactions for CDS, but there are more pharmacies are registered for this service, see Figure 116. Perhaps, indicating a need to promote this service with the residents and patients within Shropshire

Figure 116: CDS Interactions in Shropshire Pharmacies by Year, 2020 to 2024

	2020	2021	2022	2023	2024	Total
CDS interactions	31	18	19	16	11	95

Figure 117: CDS Interactions in Shropshire Pharmacies by Family Hub Area, 2020 to 2024

North East	North West	Central East	Central West	South East	South West
14	<5	7	72	<5	<5

Figure 118: Pharmacies offering Condom Distribution Service

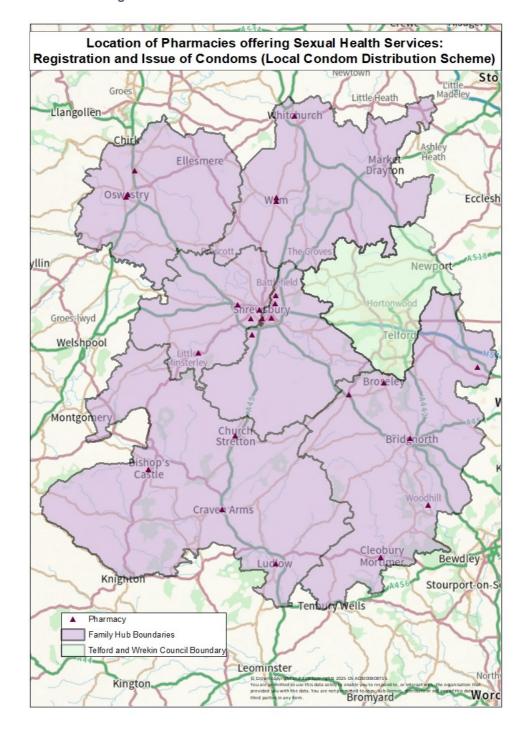


Figure 119: Key for pharmacies offering Condom Distribution Service

Map ID	Name	Address
1	Cleobury Pharmacy	Off Vaughan Road, Cleobury Mortimer, DY14 8DB
3	Lunts Pharmacy	The Tannery, Barker Street, Shrewsbury, SY1 1QJ
6	MSN & Lunts Pharmacy	Severn Fields Health Centre, Sundorne Road, Shrewsbury, SY1 4RQ
8	Day Lewis Pharmacy	Oswald Road, Oswestry, SY11 1RD
9	Day Lewis Pharmacy	14 English Walls, Oswestry, SY11 2PA
12	Day Lewis Pharmacy	The Former Ticket Office, The Cross, Gobowen, SY11 3JS
15	Rowlands Pharmacy	11 High Street, Whitchurch, SY13 1AX
17	Conway Pharmacy	238 Monkmoor Road, Telford Estate, Shrewsbury, SY2 5SR
18	Rowlands Pharmacy	Marden Medical Practice, 25 Sutton Road, Shrewsbury, SY2 6DL
19	Rowlands Pharmacy	7 Lansdowne Road, Bayston Hill, Shrewsbury, SY3 0HT
20	Bicton Heath Pharmacy	Bicton Heath Shopping Centre, Welshpool Road, Shrewsbury, SY3 5AD
21	Radbrook Green Pharmacy	Bank Farm Road, Radbrook, Shrewsbury, SY3 6DU
23	Lunts Pharmacy	1-3 Hereford Road, Shrewsbury, SY3 7QT
26	Rowlands Pharmacy	Wem And Prees Medical Practice, New Street, Wem, SY4 5AF
27	Rowlands Pharmacy	Unit 1, Morris Ctrl Shop Parade, Wem, SY4 5NY
28	Pontesbury Pharmacy	Main Road, Pontesbury, SY5 0RR
29	MSN & Lunts Pharmacy	40 Sandford Avenue, Church Stretton, SY6 6BH
30	Lunts Pharmacy	Drovers' House, Auction Yard, Craven Arms, SY7 9BZ
32	Lunts Pharmacy	116-119 Lower Galderford, Ludlow, SY8 1RU
33	Bishops Castle Pharmacy	The Pharmacy, Church Street, Bishops Castle, SY9 5AE
35	Rowlands Pharmacy	80 High Street, Broseley, TF12 5ET
36	Wenlock Pharmacy	14 High Street, Much Wenlock, TF13 6AA
38	Peak Pharmacy	Medical Centre, Maer Lane, Market Drayton, TF9 3AL
41	Peak Pharmacy	Northgate Health Centre, Northgate, Bridgnorth, WV16 4EN
42	Highley Pharmacy	Beulah House, High Street, Highley, WV16 6LP
43	Rhodes TC Chemist	77 High Street, Albrighton, Wolverhampton, WV7 3JA

# **Emergency Hormonal Contraception**

Emergency Hormonal Contraception (EHC) is provided by accredited community pharmacists, free of charge and without prescription, under a 'patient group direction'. The service is available to young women up to the age of 25 years.

In 2021, Shropshire had a lower under 18 conception rates (12.5 per 1,000 women aged 15-17), than England (13.1 per 1,000 women aged 15-17).

Between 2023/24 and 2024/25, there were 918 emergency hormonal conceptions cases at Shropshire pharmacies, and these were in each of the family hub areas, see Figure 118, although the majority of these were at pharmacies in the Central West family hub area - 435 (47%). In total 25 pharmacies had distributed EHC in this period, although there are more pharmacies that are registered for this service, see Figure 122 and Figure 123 (which also shows how the activity for each of these pharmacies in this period).

Figure 120: EHC Interactions in Shropshire Pharmacies by Family Hub Area, 2023/24 to 2024/25

North I	East	North West	Central East	Central West	South East	South West
106		104	144	435	88	41

Figure 121: EHC Interactions in Shropshire Pharmacies by Month, 2023/24 to 2024/25

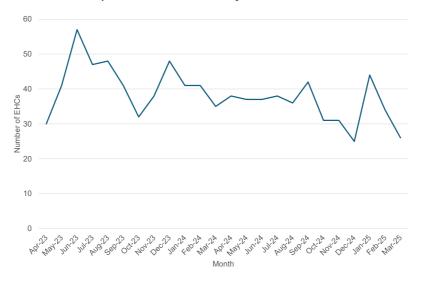


Figure 122: Pharmacies offering Emergency Hormonal Contraception Service

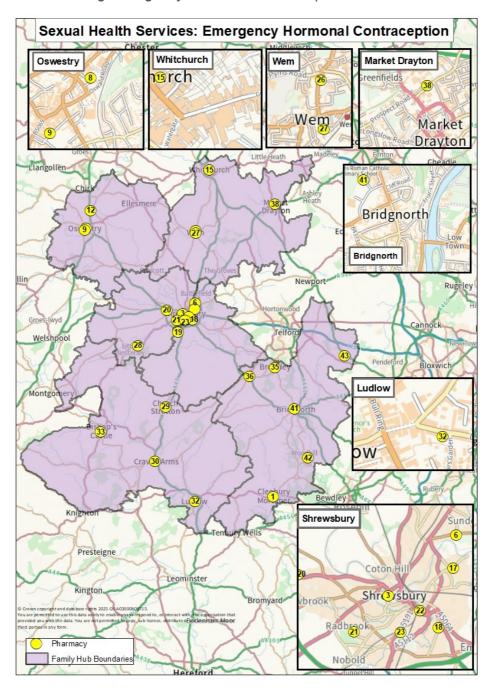


Figure 123: Key for pharmacies offering Emergency Hormonal Contraception Service

Map ID	Name	Address	Number in 23/24 – 24/25
1	Cleobury Pharmacy	Off Vaughan Road, Cleobury Mortimer, DY14 8DB	20
3	Lunts Pharmacy	The Tannery, Barker Street, Shrewsbury, SY1 1QJ	187
6	MSN & Lunts Pharmacy	Severn Fields Health Centre, Sundorne, Shrewsbury, SY1 4RQ	<5
8	Day Lewis Pharmacy	Oswald Road, Oswestry, SY11 1RD	7
9	Day Lewis Pharmacy	14 English Walls, Oswestry, SY11 2PA	96
12	Day Lewis Pharmacy	The Former Ticket Office, The Cross, Gobowen, SY11 3JS	<5
15	Rowlands Pharmacy	11 High Street, Whitchurch, SY13 1AX	<5
17	Conway Pharmacy	238 Monkmoor Road, Telford Estate, Shrewsbury, SY2 5SR	56
18	Rowlands Pharmacy	Marden Medical Practice, 25 Sutton Road, Shrewsbury, SY2 6DL	9
19	Rowlands Pharmacy	7 Lansdowne Road, Bayston Hill, Shrewsbury, SY3 0HT	12
20	Bicton Heath Pharmacy	Bicton Heath Shopping Centre, Welshpool Road, Shrewsbury, SY3 5AD	39
21	Radbrook Green Pharmacy	Bank Farm Road, Radbrook, Shrewsbury, SY3 6DU	49
22	Asda Pharmacy	Old Potts Way, Shrewsbury, SY3 7ET	8
23	Lunts Pharmacy	1-3 Hereford Road, Shrewsbury, SY3 7QT	59
26	Rowlands Pharmacy	Wem And Prees Medical Practice, New Street, Wem, SY4 5AF	23
27	Rowlands Pharmacy	Unit 1, Morris Ctrl Shop Parade, Wem, SY4 5NY	
28	Pontesbury Pharmacy	Main Road, Pontesbury, SY5 0RR	36
29	MSN & Lunts Pharmacy	40 Sandford Avenue, Church Stretton, SY6 6BH	<5
30	Lunts Pharmacy	Drovers' House, Auction Yard, Craven Arms, SY7 9BZ	19
32	Lunts Pharmacy	116-119 Lower Galderford, Ludlow, SY8 1RU	6
33	Bishops Castle Pharmacy	The Pharmacy, Church Street, Bishops Castle, SY9 5AE	<5
35	Rowlands Pharmacy	80 High Street, Broseley, TF12 5ET	<5
36	Wenlock Pharmacy	14 High Street, Much Wenlock, TF13 6AA	30
38	Peak Pharmacy	Medical Centre, Maer Lane, Market Drayton, TF9 3AL	83
41	Peak Pharmacy	Northgate Health Centre, Northgate, Bridgnorth, WV16 4EN	12
42	Highley Pharmacy	Beulah House, High Street, Highley, WV16 6LP	26
43	Rhodes TC Chemist	77 High Street, Albrighton, Wolverhampton, WV7 3JA	<5

### **Healthy Start Vitamins**

Healthy Start is a UK-wide government scheme to improve the health of low-income pregnant women and families receiving benefits and tax credits. Women who are at least 10 weeks pregnant or if you have a child under four years old qualify for Healthy Start if the family is receiving a qualifying benefit. Women also qualify during the whole of their pregnancy if they are under-18 when they apply, even if they are not in receipt of the above benefits or tax credits. If eligible, you'll be sent a healthy start card which is loaded with money on it that can be used in some UK shops to buy milk, vegetables, pulses and infant formula milk and also healthy start vitamins for pregnancy and vitamin drops for babies and young children. Every eight weeks, women get sent vitamin coupons, which they can swap for Healthy Start vitamins in their local area. The coupons are either for Healthy Start women's tablets or Healthy Start children's drops. Young children and babies may not get enough vitamin A and D even if they're eating well. If you're pregnant or breastfeeding, you may not get enough vitamin C, vitamin D or folic acid. At present, the only pharmacy that stocks healthy start vitamins is Boots on Pride Hill in Shrewsbury, although they are available through midwifery and health visitors, it has not been possible to get the number distributed at this time. While there is a distribution list of potential pharmacies that might have the vitamins, there have been no orders received by the community trust since 2024 and it was very minimal then and in 2023 despite our attempts to encourage ordering. Access to vitamins will likely improve significantly when they become available in open access clinics, which is close to happening. The main reason pharmacies do not stock healthy start vitamins compared to previously is due to the low uptake and stock going out of date. This is a widely reported issue across the country which requires a national solution.

# **NHS England Commissioned Services**

### **Covid Vaccinations**

Figure 124: Pharmacies offering Covid Vaccinations

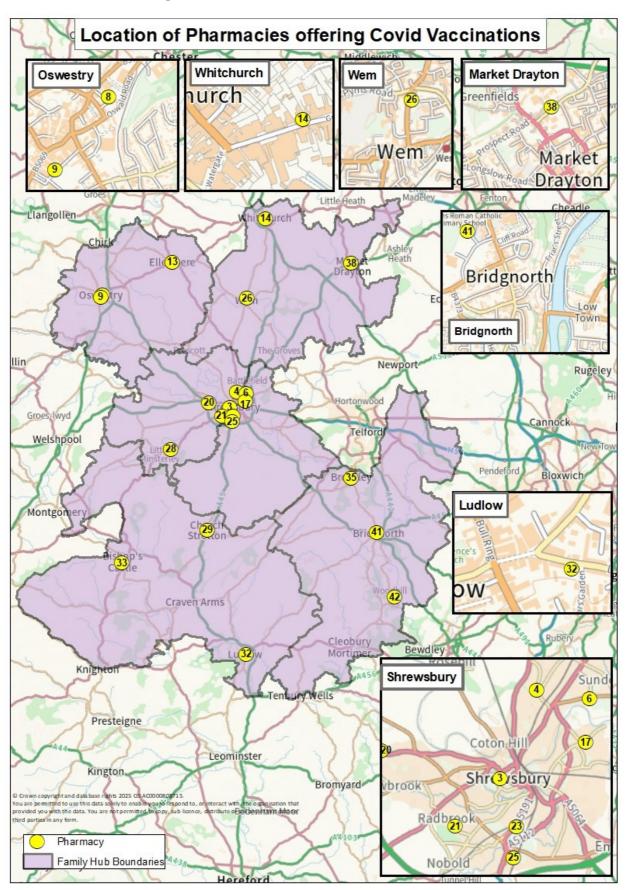


Figure 125: Key for pharmacies offering Covid Vaccinations

Мар		
ID	Name	Address
3	Lunts Pharmacy	The Tannery, Barker Street, Shrewsbury, SY1 1QJ
4	Well Pharmacy	101 Mount Pleasant Road, Shrewsbury, SY1 3EL
6	MSN & Lunts Pharmacy	Severn Fields Health Centre, Sundorne Road, Shrewsbury, SY1 4RQ
8	Day Lewis Pharmacy	Oswald Road, Oswestry, SY11 1RD
9	Day Lewis Pharmacy	14 English Walls, Oswestry, SY11 2PA
13	Ellesmere Pharmacy	5 Cross Street, Ellesmere, SY12 0AW
14	Green End Pharmacy	11-13 Green End, Whitchurch, SY13 1AD
17	Conway Pharmacy	238 Monkmoor Road, Telford Estate, Shrewsbury, SY2 5SR
20	Bicton Heath Pharmacy	Bicton Heath Shopping Centre, Welshpool Road, Shrewsbury, SY3 5AD
21	Radbrook Green Pharmacy	Bank Farm Road, Radbrook, Shrewsbury, SY3 6DU
23	Lunts Pharmacy	1-3 Hereford Road, Shrewsbury, SY3 7QT
25	Boots	Meole Brace Retail Park, Hereford Road, Shrewsbury, SY3 9NB
26	Rowlands Pharmacy	Wem And Prees Medical Practice, New Street, Wem, SY4 5AF
28	Pontesbury Pharmacy	Main Road, Pontesbury, SY5 0RR
29	MSN & Lunts Pharmacy	40 Sandford Avenue, Church Stretton, SY6 6BH
32	Lunts Pharmacy	116-119 Lower Galderford, Ludlow, SY8 1RU
33	Bishops Castle Pharmacy	The Pharmacy, Church Street, Bishops Castle, SY9 5AE
35	Rowlands Pharmacy	80 High Street, Broseley, TF12 5ET
38	Peak Pharmacy	Medical Centre, Maer Lane, Market Drayton, TF9 3AL
41	Peak Pharmacy	Northgate Health Centre, Northgate, Bridgnorth, WV16 4EN
42	Highley Pharmacy	Beulah House, High Street, Highley, WV16 6LP

### **ICB** Commissioned

### Influenza Anti-Viral

Only 1 pharmacy offers this service in Shropshire, which is Asda Pharmacy on Old Potts Way, Shrewsbury. 2 more pharmacies in Telford and Wrekin also offer the service.

# **IP** Pathfinder

This is a testbed national programme designed to inform future commissioning policies, as prescribing services in community pharmacy is the future national direction for the community pharmacy sector. Once the pathfinder programme concludes later this year, we will need to start considering provision across the area as at present we have only got 3 slots in Shropshire and Telford and Wrekin.

Figure 126: Community Pharmacies in Shropshire offering IP Pathfinder Service

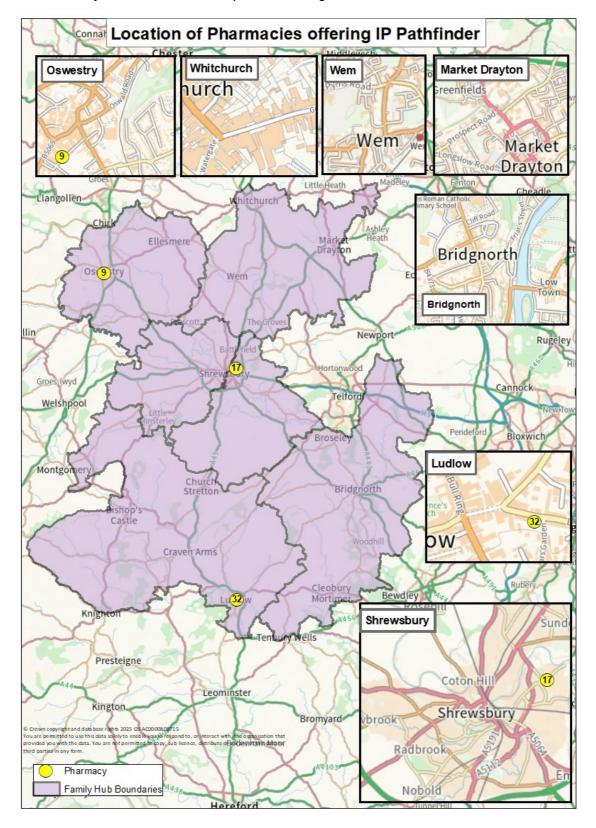


Figure 127: Key for pharmacy maps

Map ID	Name	Address
9	Day Lewis Pharmacy	14 English Walls, Oswestry, SY11 2PA
17	Conway Pharmacy	238 Monkmoor Road, Telford Estate, Shrewsbury, SY2 5SR
32	Lunts Pharmacy	116-119 Lower Galderford, Ludlow, SY8 1RU

### End of life

This service is currently contracted until the end of March 2025 however the intention is to continue it, but the commissioning framework used is still to be decided. Some pharmacies that offered the service have said that they will not be continuing past March.

Figure 128: Community Pharmacies in Shropshire offering End of Life Service

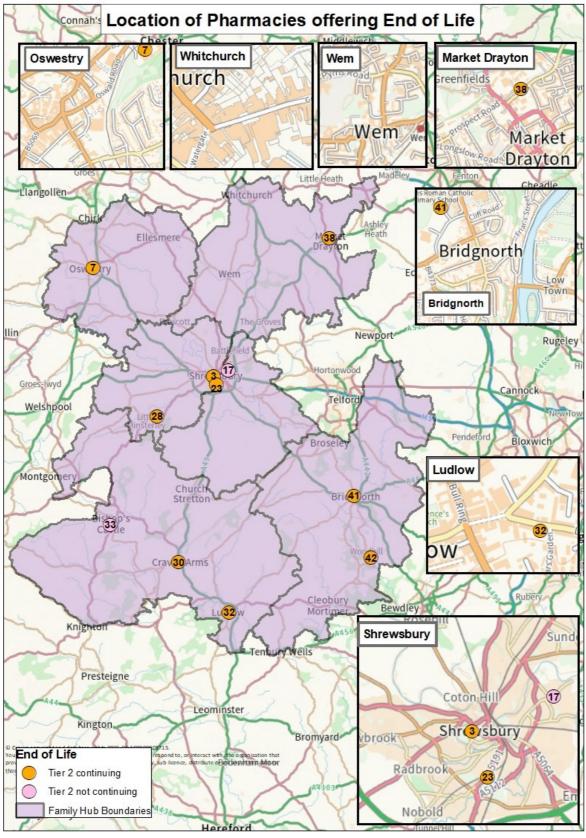


Figure 129: Key for pharmacy maps

Мар		
ID	Name	Address
3	Lunts Pharmacy	The Tannery, Barker Street, Shrewsbury, SY1 1QJ
7	Cambrian Pharmacy	Cambrian Medical Centre, Thomas Savin Road, Oswestry, SY11 1GA
17	Conway Pharmacy	238 Monkmoor Road, Telford Estate, Shrewsbury, SY2 5SR
23	Lunts Pharmacy	1-3 Hereford Road, Shrewsbury, SY3 7QT
28	Pontesbury Pharmacy	Main Road, Pontesbury, SY5 0RR
30	Lunts Pharmacy	Drovers' House, Auction Yard, Craven Arms, SY7 9BZ
32	Lunts Pharmacy	116-119 Lower Galderford, Ludlow, SY8 1RU
33	Bishops Castle Pharmacy	The Pharmacy, Church Street, Bishops Castle, SY9 5AE
38	Peak Pharmacy	Medical Centre, Maer Lane, Market Drayton, TF9 3AL
41	Peak Pharmacy	Northgate Health Centre, Northgate, Bridgnorth, WV16 4EN
42	Highley Pharmacy	Beulah House, High Street, Highley, WV16 6LP

### Patient Group Direction Service (PGD)

Patient Group Directions (PGDs) provide a legal framework that allows some medicines to be supplied and/or administered by named, authorised, registered health professionals, to a pre-defined group of patients needing preventative treatment e.g. vaccinations or treatment for a condition without the need for a prescription e.g. minor injury units.

PGDs may be appropriate when medicine use follows a predictable pattern, such as for patients attending for contraception, or where patients seek unscheduled care, such as for a minor ailment in a community pharmacy or walk-in centre.

Supplying and /or administering medicines under PGDs should be reserved for situations in which this offers an advantage for patient care, without compromising patient safety.

### Provision of Pharmaceutical services to Care Homes

Shropshire has a significant number of care homes (114), for adults and there are also a considerable number of children's homes, with many children are placed in these homes from outside of the county.

Care homes access support, advice and guidance from Shropshire, Telford and Wrekin ICB, as well as the community pharmacy Shropshire network. Community pharmacies also give advice, supply medicines, remove waste medicines and provide compliance aids to care homes in Shropshire, however there is no formal contractual agreement, and what they provide is down to the individual pharmacy contractor. There are also more care homes than there are community pharmacies and dispensing practices combined, so inevitably there are some areas of Shropshire where provision could potentially be an issue.

Figure 130: Location of care homes in Shropshire

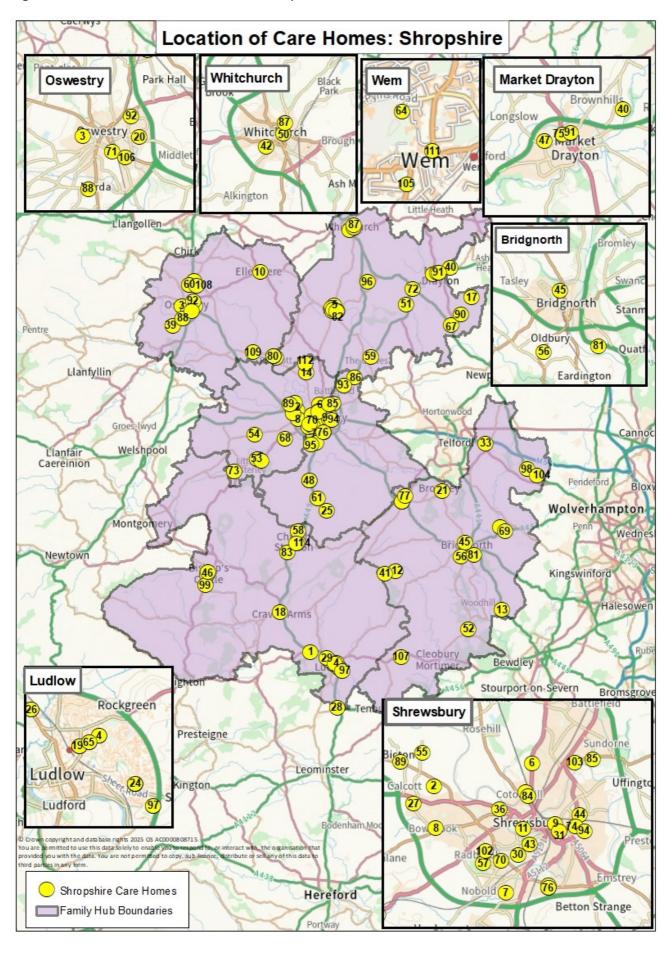


Figure 131: Key to Location of care homes in Shropshire Map

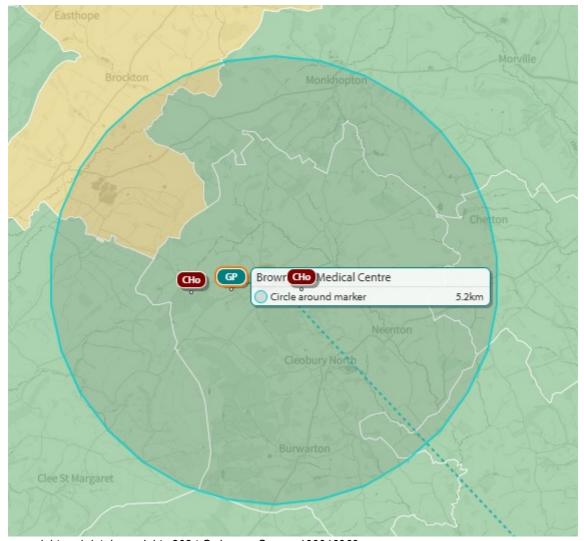
Мар			Мар		
ID	Name	Postcode	ID	Name	Postcode
1	Onny Cottage	SY8 2JU	58	Stretton Hall Nursing Home	SY6 6HG
2	The Uplands at Oxon	SY3 8GA	59	River Meadows Nursing Home	SY4 4EL
3	High Lea House	SY11 1SY	60	Hengoed Park	SY10 7EE
4	Hendra House Residential Home	SY8 1HH	61	Church View	SY5 7PP
5	Landona House	SY4 5QP	62	Limetrees	SY2 6GY
6	Normanton Retirement Home	SY1 2RJ	63	Oxbow Manor	SY2 6QH
7	Maesbrook Nursing Home	SY3 9HQ	64	Bowens Field	SY4 5AP
8	Bowbrook House	SY3 5BS	65	Alexandra House	SY8 1QT
9	Hartlands Residential Home	SY2 5AD	66	The Vicarage Nursing Home	SY3 0EA
				Hinstock Manor Residential Home	
10	Ellesmere House	SY12 0HB	67	Limited	TF9 2TE
	Swan Hill House Residential				
11	Home	SY1 1NQ	68	Weir Road	SY5 8LA
	Arden Grange Nursing &				
12	Residential Care Home	WV16 6SQ	69	Hilton Brook House	WV15 5PE
	Bower Grange Residential Care				
13	Home	WV15 6JA	70	The Ferns Residential Home	SY3 9ED
14	The Crescent	SY4 3PQ	71	Bluebell View	SY11 2HU
15	The Wheatlands	SY4 2DW	72	Shropshire Respite Centre	TF9 3PX
16	Hall Bank Mews	SY5 0RF	73	Hillcrest Manor Nursing Home	SY5 0DL
	Cheswardine Hall Nursing &				<b>.</b>
17	Residential Home	TF9 2RJ	74	Portland House Nursing Home	SY2 5LS
18	Sunnydale	SY7 9PY	75	Bradbury Court	TF9 3FR
19	Glenview	SY8 1QS	76	Oxbow Manor	SY2 6QH
				Lady Forester Community Nursing	
20	Llysfield Nursing Home Limited	SY11 2LJ	77	Home	TF13 6NB
	Lady Forester Residential & Day				
21	Care Centre	TF12 5DB	78	The Old Vicarage	SY4 2EF
	Vision Homes Association - 1A	0) (0, 170			0)// 0==
22	Toll Gate Road	SY8 1TQ	79	Briery Lodge	SY4 2EF
	Vision Homes Association - 1B	0) (0, 470			0)// 0==
23	Toll Gate Road	SY8 1TQ	80	The Coach House	SY4 2EF
- 4	Vision Homes Association - 1C	0) (0, 470	0.4		140.445.000
24	Toll Gate Road	SY8 1TQ	81	Danesford Grange Care Home	WV15 6QD
25	Blackhurst Care Home	SY5 7QJ	82	The Orchard	SY4 5JD
20	Four Divers Nursing House	CVO 4DW	02	Caradoc House Residential Care	CVC CDD
26	Four Rivers Nursing Home	SY8 1DW	83	Home	SY6 6RB
27	Ideal Home	SY3 5DH	84	Oakdene Care Providers	SY1 2LN
00	Woofferton Residential Care	0)/0 441	0.5	Mantagaratilana	0)/4 4D0
28	Home	SY8 4AL	85	Montgomery House	SY1 4RQ
29	Churchill House Care Home	SY8 1EL	86	Greenfields	SY4 4BY
30	Abbey Care Direct Limited	SY3 7HW	87	Bradbury Lodge	SY13 1NT
24	Halv Crass Care Harris a Limited	CVO CAD	00	Woodland Residential Care Home	CV40 ONV
31	Holy Cross Care Homes Limited	SY2 6AP	88	Limited	SY10 9NX
22	Bradeney House Nursing & Care	\\\\/4E ENIT	90	Mayfield House	6V2 0F0
32	Home	WV15 5NT	89	Mayfield House	SY3 8EQ
22	Netherwood Residential Care	TE44 0D0	00	The New Pern	TEO ON A
33	Home Ottley House	TF11 8DG	90	The New Barn	TF9 2NA
34	Ottley House	SY1 2PA	91	Maer Lane	TF9 3AL
35	Field House	SY6 7AA	92	Windsor Road	SY11 2UB
36	The Mount & Severn View	SY3 8PP	93	Jubilee Villa Care Home Ltd	SY4 4BU
37	Wheatlands	TF13 6AT	94	Elms House	SY2 5PE
38	Darwin Place	TF13 6AT	95	Shaftesbury York House	SY3 0PZ
39	Brooke House Residential Home	SY10 9AS	96	Elmhurst Nursing Home	SY13 2EN
40	Tunstall Hall Care Centre	TF9 4AA	97	Hagley Place	SY8 1LS
41	Ditton Priors Care Centre	WV16 6TW	98	The Old Rectory Care Home	WV7 3EP
42	Greenfields Care Home	SY13 1SG	99	The Pines Residential Home	SY9 5JY
43	Briarfields	SY3 7JN	100	High Trees Residential Home	SY9 5DA
44	Barleyfields House	SY2 5JJ	101	Cliffdale Rest Home	SY5 0QD
45	Innage Grange	WV16 4HN	102	38 Torrin Drive	SY3 6AW

Мар			Мар		
ID .	Name	Postcode	ID .	Name	Postcode
46	Stone House	SY9 5AJ	103	Welwyn	SY1 4RT
47	Woodcroft	TF9 3UB	104	The Cedars	WV7 3JH
	Consensus Support Services				
48	Limited - Shrewsbury	SY5 7JW	105	Walford Lodge	SY4 5ED
49	Old Vicarage Nursing Home	SY11 3JS	106	New Fairholme	SY11 2RT
50	Weston House Residential Home	SY13 1AJ	107	Doddington Lodge	DY14 0HJ
51	Beech House Nursing Home	TF9 3NB	108	Meadowbrook Care Home	SY10 7HD
52	Park House Nursing Home	DY12 3BB	109	Kynaston Farm	SY4 1JT
53	Railway Cottage	SY5 0QY	110	High Ridges	SY5 7JW
54	Yockleton Grange Residential	SY5 9PQ			
	Home		111	Roseville House	SY4 5AB
55	Isle Court Nursing Home	SY3 8DY	112	Merrington Grange	SY4 3QJ
56	Oldbury Grange Nursing Home	WV16 5LW	113	Highbury House	SY4 5BA
57	Radbrook Nursing Home	SY3 6AL	114	The Sandford Nursing Home	SY6 7BG

## Areas of potential focus for care home provision

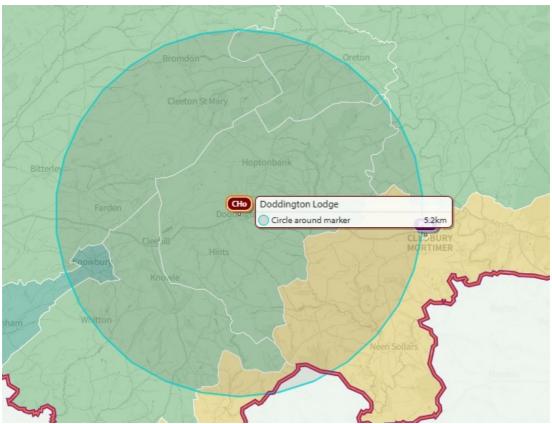
The next three maps show some potential issues if there was ever a problem with the pharmacy, as there are over 5 kilometres between a care home and a pharmacy or dispensing practice, or in the last map, where there is only one pharmacy for over 5 kilometres in close proximity to three care homes.

Figure 132: Brown Clee Medical Centre, Arden Grange Nursing & Residential Care Home and Ditton Priors Care Centre. Only have close access to a dispensing practice



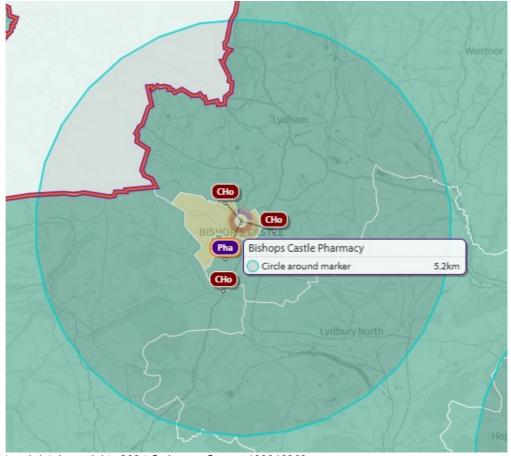
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Figure 133: Doddington Lodge. Significant distance to nearest pharmacies in Cleobury Mortimer.



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Figure 134: Bishop's Castle Pharmacy – only pharmacy or dispensing practice in over 5km of 3 homes



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# Resident Pharmacy Questionnaire

Shropshire Council, Telford and Wrekin Council and Shropshire Healthwatch invited patients to participate in a short on-line questionnaire. This ran from 11<sup>th</sup> February 2025 to 28<sup>th</sup> February 2025. The questionnaire was aimed to inform about community pharmacy services in Shropshire in order to find out about patients' experiences and forms an integral part of the Pharmaceutical Needs Assessment for 2025. A copy of the questionnaire is contained within Appendix 4.

In total 405 questionnaires were completed, with 259 (64%) of these stating that they lived in Shropshire and the results of these 259 Shropshire residents are broken down below.

## Respondents background

The respondent sample was slightly skewed towards women with 65% of responses – the 2021 census had 50.7% of Shropshire's population as female - and while there was representation across all age groups, a majority came from older age groups with just 8.5% from people aged under 45, compared to the 28% of this age in the census. Likewise, the vast majority were from people who identified themselves as White British, although this percentage is similar to the census. There were more people who completed this survey who lived within the North West family hub area than any other and less responses came from people who lived in the two most deprived deprivation quintiles – who are likely to be those most likely to need and/or use pharmacy and health services in general - and this was less representative than the overall population. These factors may cause some bias within the survey.

The charts below show the characteristics of the Shropshire residents who completed this survey.



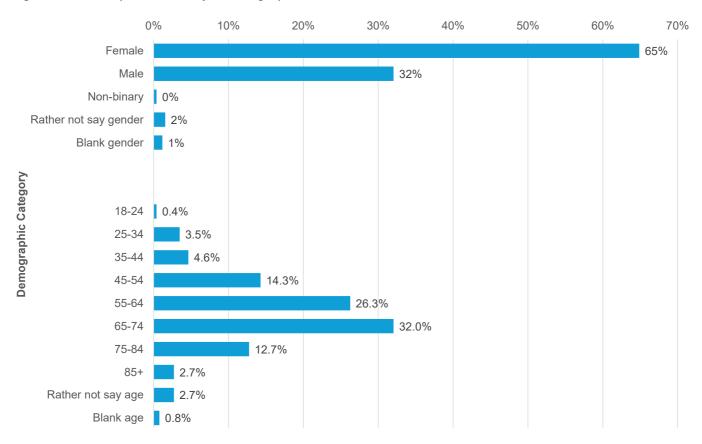


Figure 136: Shropshire Survey, Further Characteristics

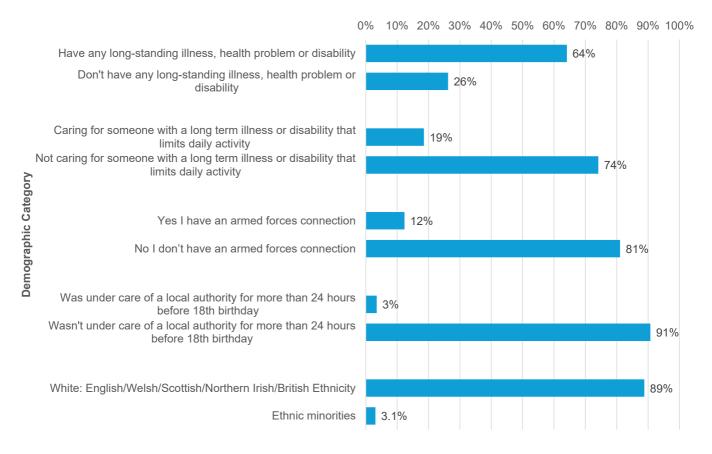


Figure 137: Shropshire Survey, where the respondents lived

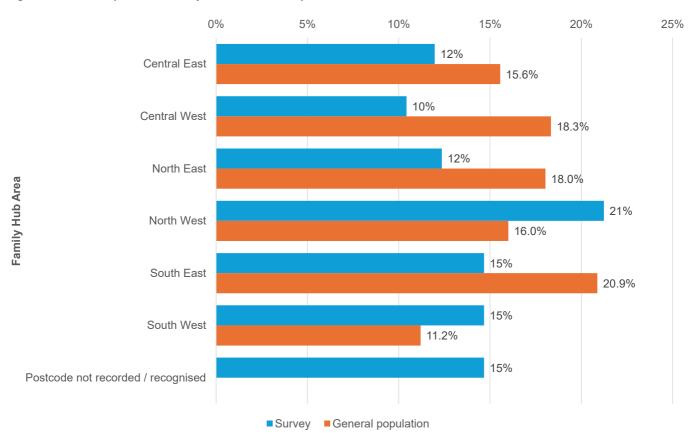
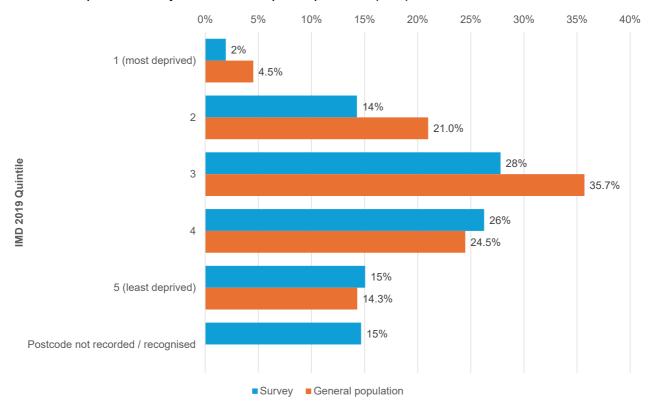


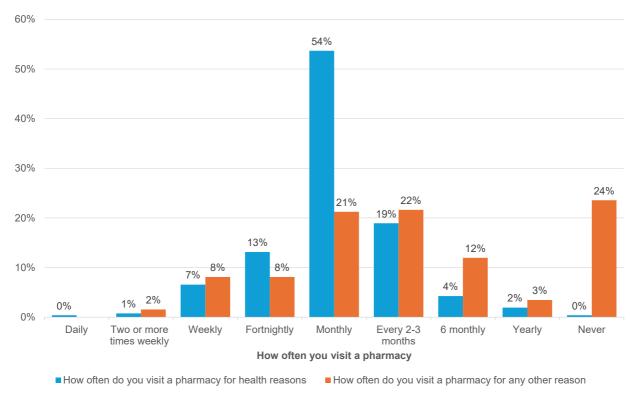
Figure 138: Shropshire Survey, Index of Multiple Deprivation (IMD) 2019, Quintile



# When do you visit a pharmacy?

Over half of respondents said they visited a pharmacy monthly for health reasons, with nearly a fifth saying it was every 2-3 months, while 8% said they visited weekly or more frequently. When it came to visiting for non-health reasons 24% said they never visited and 58% said they visited monthly or longer. Of the 18% who said they visited more frequently than monthly, none of those said their usual pharmacy was a supermarket.

Figure 139: Shropshire Survey, how often do you visit a pharmacy for health reasons (health advice, prescriptions or over the counter medicines) or other reason (e.g. shopping, toiletries, baby products)



When people state what time, they usually used pharmacy services, 86% said this was weekdays between 9am and 6pm, 3% said weekdays between 6pm and 11pm, and 2% said weekdays between 6am and 9am, while 8% said Saturday and just 1 person said Sunday. Appendix 5 lists the full opening hours of the pharmacies in Shropshire. Figure 138 shows that of survey respondents 49% would want to visit a pharmacy between 9am and 1pm on a Saturday and 42% said Saturday afternoon, while 41% said Sunday 10am to 2pm. The existing opening times would mean that there are limited pharmacies opening at these selections, with just 2 pharmacies opening past 6pm on a Saturday - Asda in Shrewsbury until 8pm and Tesco in Shrewsbury till 9pm, and just 6 opening on a Sunday at all (Asda in Shrewsbury, Boots on Pride Hill in Shrewsbury, Boots in Meole Brace in Shrewsbury, Boots in Oswestry, Tesco in Shrewsbury and Cambrian Pharmacy in Oswestry). Cambrian Pharmacy in Oswestry is the only pharmacy in Shropshire than is open past 9pm on weekdays – until 11pm. No pharmacy in Shropshire is open 24 hours.

Figure 140: Shropshire Survey, Other than normal opening hours (Weekdays 9am-6pm), what other times would you find it most useful to visit a pharmacy?

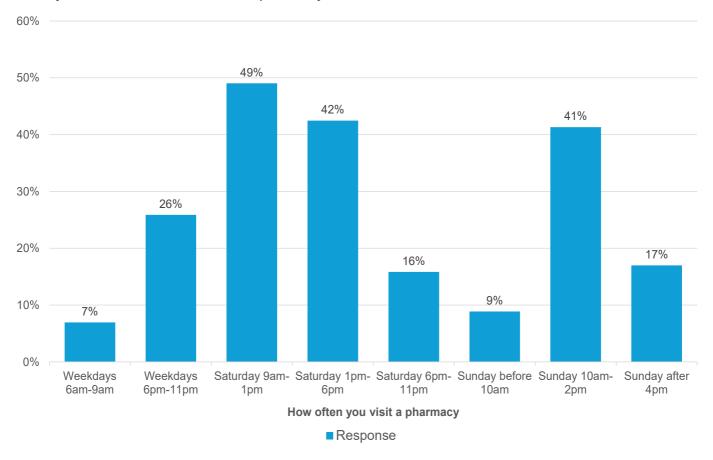


Figure 141 shows the results when respondents were asked to agree with a number of statements about pharmacy services (graph has excluded those that didn't answer). The vast majority said that they could find a pharmacy open when they needed (61%) versus those that disagreed (19%). Again, the vast majority of people agreed that they could access a pharmacy near where they wanted it (68%) versus those that disagreed (14%). Half of respondents agreed that they were able to find a pharmacy that was open at lunchtime with under a quarter (23%) disagreeing with this – although when looking at pharmacy opening hours, 11 of the 42 pharmacies close for a period on weekdays.

Respondents were less agreeable when it came to being easily able to find a pharmacy open at weekends (31%) against those that disagreed to some extent (41%) – again while most pharmacies are open on a Saturday, a lot of these are only open in the morning, and only 6 pharmacies open on a Sunday. Only 11% of people said they could easily find a pharmacy in the evening, against 64% who disagreed – again there are limited pharmacies open late at night

45% 39% 39% 40% 34% 34% 35% 30% 29% 30% 24% 25% 22%22%### 22% 20% 20% 17% 15% 15% 15% 15% 15% 13% 11% 9% 10% 8% 5% 4% 3% Open when needed Near where I want it Open after 6pm / evening Open at lunchtime Open at weekends I can easily find a pharmacy

Figure 141: Please rate how you agree or disagree with the following, "I can easily find a pharmacy"

# About your regular pharmacy

Of the Shropshire residents who filled in this survey, 96% of them said that the pharmacy they used most regularly was in Shropshire and 3% said Telford and Wrekin – 57 different pharmacies were named as the respondents usual pharmacy, with MSN & Lunts pharmacy in Church Stretton having the highest number (15), Radbrook Green Pharmacy (11), Ellesmere Pharmacy (10) and Boots, Ludlow (10) in double figures. The highest reason given for using the pharmacy named was due to it being close to their home (65%), with 47% stating it being at or near the local GP surgery. Only 18% said it was due to having on-site parking, 10% due to being near work, 3% getting there via public transport and 1% due to being near their child's school. 62% of respondents said they usually travelled to this pharmacy by car, 32% said they walked, 2% cycled, while another 2% said they didn't actually go to the pharmacy, they delivered to them.

■ Neither agree nor disagree

Strongly agree

Agree

Reason	Percentage
It is near my home	65%
It is near or at my local GP surgery	47%
It stocks the medicines that I need	37%
It is easy to get to whilst shopping	34%
It operates the Electronic Prescription Service	32%
It has the services I require	27%
It has opening hours that suit me	26%
It has on-site parking	18%
It is near my work	10%
I can get there using public transport	3%
It is near my child's school	1%

Figure 143 shows some more statements that people were asked to agree or disagree with about their usual pharmacy – over 70% of respondents strongly agreed, or agreed with the six of the seven statements, with 10% or less disagreeing to some extent with five of them, and 15% or less disagreeing to some extent that 'my pharmacy usually has the medicines I need in stock'. On the remaining statement, 'my pharmacy makes changes to help people with disabilities e.g. large print labels', 42% of people said this wasn't applicable to them and 36% said they neither agreed or disagreed with the statement, which left 17% agreeing with it to some extent and just 2% disagreeing.

■ Strongly disagree

∓ Disagree

Figure 143: About your regular pharmacy, how do you agree or disagree with the following statements."

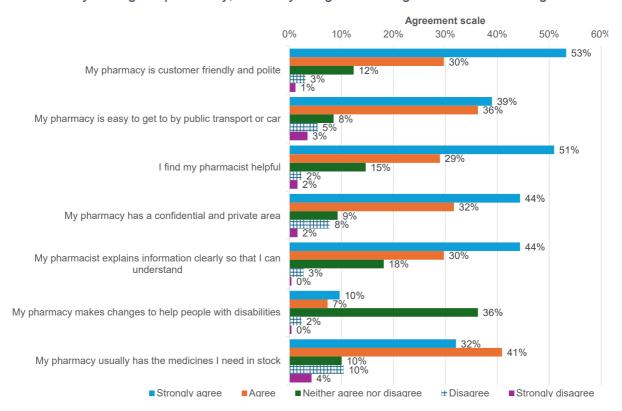


Figure 144 asked respondents to state what things their regular pharmacy had. Of these, the majority of people said that their pharmacy had a seating area, an electronic prescription service, wheelchair accessibility and information and advice on medicines. There were however, pretty sizeable number of responses that weren't sure whether their pharmacy had these things or not, including the majority of respondents when asked about stocks of living aids to support independent living (69%), hearing aid loop (86%), prescription deliver service (55%) and information and advice on healthy lifestyles (58%) – in some cases it maybe because these things weren't necessarily needed by the respondents, however, in other cases perhaps those people could be utilising those services if they knew about them.

Figure 144: Does your regular pharmacy have any of the following?

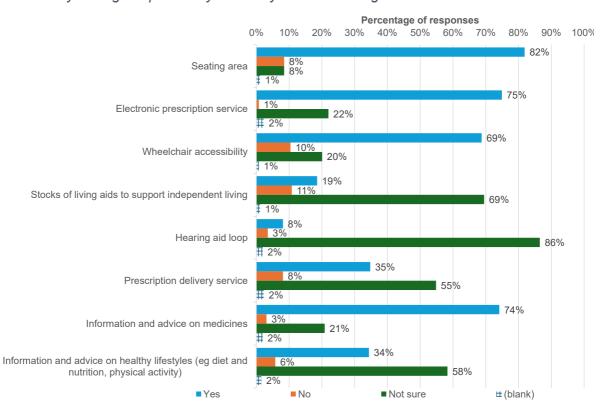


Figure 145 shows a list of services and respondents were asked to say whether they had used them, or were aware of them, or were not aware of them or would like to see them available. Awareness was higher with some of the services that were more of the traditional ones, such as NHS repeat prescription service, disposal of unwanted medicines, vaccinations, minor ailments service. However, there are some services where over 75% of respondents did not know about the service, such as alcohol use awareness and treatment services (83%) and terminal illness support (80%). NHS Phlebotomy service was the service that had the highest percentage of people that would like to see it available (20%). Not all of these services will be necessarily available at all pharmacies, which might explain the high number of people not aware of services.

Figure 145: Thinking about your regular pharmacy: Which of the following services are you aware of, have used or would like to see available?

	I	I am		l would	
	have	aware	I am not	like to see	
Services	used	of	aware of	available	(blank)
NHS repeat prescription services	43%	45%	8%	2%	2%
Disposal of unwanted medicines	32%	32%	23%	7%	6%
Vaccinations	31%	36%	19%	9%	4%
Minor Ailments Service	20%	34%	29%	12%	5%
Blood pressure monitoring	7%	43%	33%	12%	5%
Medicines Use Reviews	5%	12%	65%	9%	9%
New Medicines Service	5%	12%	66%	6%	10%
NHS Healthchecks	3%	29%	47%	14%	7%
Terminal illness support	2%	2%	80%	8%	8%
NHS Phlebotomy Services	2%	3%	68%	20%	7%
Weight management services	1%	8%	73%	9%	9%
Cholesterol testing	1%	12%	63%	16%	7%
Needle and syringe exchange scheme	1%	12%	72%	6%	10%
NHS Screening Services	1%	15%	63%	13%	7%
Smoking Cessation Services	1%	20%	67%	4%	8%
Anti-coagulation monitoring	0%	3%	80%	8%	8%
Language Access Services	0%	3%	83%	3%	11%
Alcohol use awareness and treatment services	0%	4%	83%	5%	8%
Support of free healthy start vitamins	0%	5%	75%	10%	10%
Condom distribution (free supply to teenagers)	0%	5%	76%	10%	9%
Mental health support	0%	5%	77%	10%	8%
Incontinence support	0%	8%	77%	7%	8%
Supervised consumption of medicines	0%	10%	78%	3%	8%
Pregnancy testing	0%	12%	73%	5%	10%
Substance misuse service (methadone supply, needle					
provision)	0%	12%	75%	3%	9%
Advice on healthy lifestyles	0%	16%	65%	8%	11%
Emergency hormonal contraception	0%	22%	64%	5%	8%

There were a few additional services that were mentioned that people used:

- Contraceptive pill
- Dossett box supplies
- Ear cleaning and syringing
- Flu vaccination
- Hearing tests
- Podiatry services
- Home delivery (although one person stated their pharmacy was stopping this)
- Pharmacy first, including for people aged over 64
- Online ordering
- SMS when prescription is ready
- Travel advice and products

There were also a number of other services things that respondents would like to see at their pharmacy:

- A Pharmacist to GP Liaison Service
- A podiatrist, vetted by the pharmacy, who does home visits.

- Advice for child matters, rather than health visitors
- Antibiotics for chest infections
- Blood tests to save GP visits
- Emergency prescriptions
- Hearing tests
- Medicine delivery service
- Memory tests
- Notification about when the home delivery is going to come rather than having to wait in Shorter wait for prescriptions to come
- Regular blood and heart checks
- Urgent medication delivery and support for those with no family support / homeless who are post-hospital
- Vaccinations
- Vitamin B12 Injections
- Weekend service

18% of respondents said that they had been directed to a different pharmacy for something not provided by their regular pharmacy. Of the people who gave a reason for this, the most common reason was due to an item not being in stock, or there being an issue with a regular or repeat prescription or a smaller number who stated vaccinations, other than this there were mentions of medicine disposal, smoking cessation and the purchase of over-the-counter items.

# Prescription delivery service

93% of respondents said they have a pharmacy where their prescription is sent to by their GP, and just 15% (38 people) stated they had ever used a prescription delivery service as opposed to 83% who hadn't. Of the people who had used one, the following were the reasons:

Figure 146: Why did you use a prescription delivery service?

I was unable to leave home	50%
I could not get to a pharmacy during their opening times	16%
Waits for prescriptions	8%
Convenient	8%
Stock available	8%
Heavy medicines supply	3%
Other {Q20.a}	8%

Of the 38 respondents, 82% strongly agreed or agreed that the prescription delivery system was important to them.

Figure 147: How much do you agree or disagree that the Prescription Delivery Service is important to you?

Strongly agree	61%
Agree	21%
Neither agree nor disagree	8%
Disagree	3%
Strongly disagree	8%

## **Pharmacy First**

27% of respondents stated that they had used the pharmacy first service for advice and or treatment for a minor illness or one of the seven common health conditions. Of these, 83% said they accessed the service by walk in, 13% said it was through NHS111, 8% said through the GP and 3% said out of hours service. Of these 71 people, the health condition is shown in Figure 146 – several people said they had used the service for more than one condition. A minor illness was the top reason for using the service (eye

infections, chest infections and cold and flu were mentioned), with ear infection, sore throat and infected insect bite higher up too.

Figure 148: What did you use Pharmacy First for?

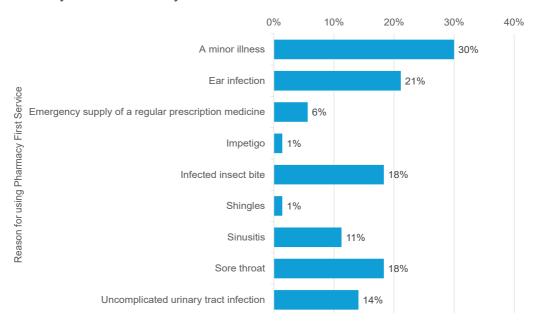


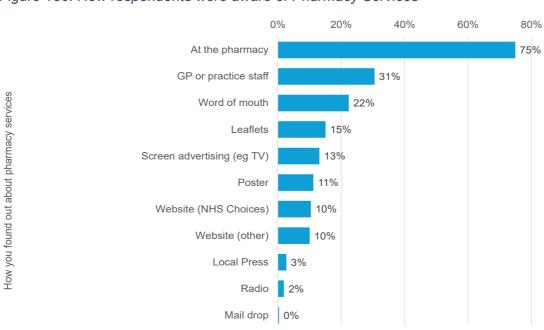
Figure 149: What was the outcome of the Pharmacy First consultation?

Advice only (no medication)	24%
A prescription only medication	27%
An over-the-counter medication	41%
Referral to a pharmacy service	1%
Urgent referral to GP/out-of-hours service	8%
Other	3%
Advice only (no medication)	24%

### Overall

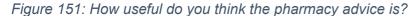
Respondents were asked if they were aware that pharmacies can help to direct to other services for health and only 34% were aware of this.

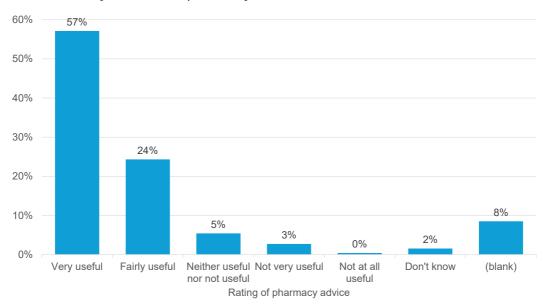
Figure 150: How respondents were aware of Pharmacy Services



### How useful was the pharmacy advice

The pharmacy advice given was rated as very or fairly useful (81%), with just 3% saying it was not useful.





Where the respondents rated the pharmacy advice as neither useful nor not useful, not very useful or not at all useful, the comments were looked at, Figure 152, shows the keywords that came up and Figure 153 shows the main theme of the comment and Figure 154 shows a selection of those comments.

Figure 152: Keyword where pharmacy advice wasn't useful



Figure 153: Main theme of comment where pharmacy advice wasn't useful

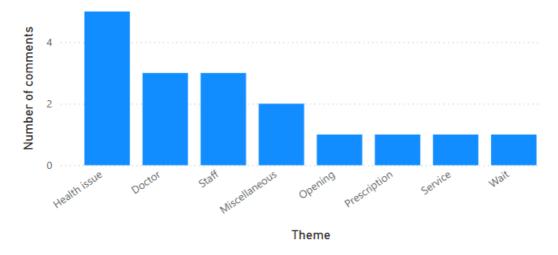


Figure 154: Sample of comments about why the pharmacy advice was not useful

"It's a GP pharmacy which is convenient for meds pick up. However I strongly think pharmacy first services should be more available. Crucially more available to older people. Older people need support so badly and GP waits and merry go around of e consult and waits for help or appointments is excruciating exhausting. Older people get a very raw deal"

"your local pharmacy is very important because they are there when you need them not just for prescriptions, you phone the doctors you cant see a doctor for two weeks, you go the pharmacy they will see you ASAP and give you the advise you need and prescribe you with the medicine or cream you need if they can"

"Usually only 1 person is medically qualfied, and they are usually busy dispensing, remaing staff are either shop assistants or making up prescriptions for approval."

Where the respondents rated the pharmacy advice as very useful or useful, the comments were looked at, Figure 155 shows the keywords that came up and Figure 156 shows the main theme of the comment and Figure 157 shows a selection of those comments.

Figure 155: Keywords where the pharmacy advice was Very useful or Useful



Figure 156: Main theme of comment where pharmacy advice was very useful or useful

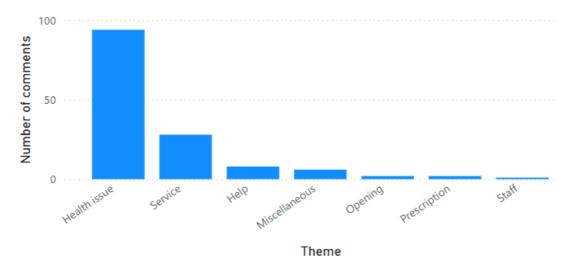


Figure 157: Sample of comments about why the pharmacy advice was very useful or useful

"Because they can cut down the GP waiting times. More often then not they are open when the GP isn't and good at a pinch for some things. I do feel like more could be offered at a pharmacy as a health hub with vitamin and diet advice."

"Follow a similar qualification as doctors but know more about how the drug can react with your body, very knowledgeable"

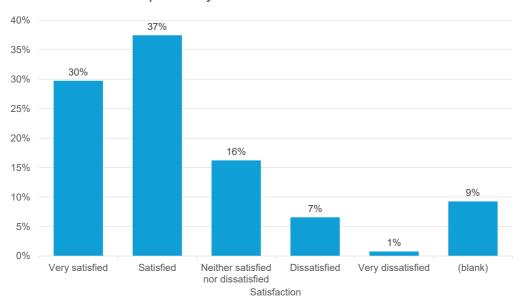
"I am housebound and cannot walk . It is vital"

"I have asked advice from the pharmacist several times now and on all occasions the pharmacist has taken me to a confidential space, listened and advised. They have been very professional and I felt very happy with their advice."

"Many minor ailments can be treated by a pharmacist. They have a broad knowledge of medication which can be purchased from the pharmacy for various ailments, from skin rashes to appropriate analgesia for various symptoms. Pharmacists can advise on the safety of purchased medication to be taken with prescribed medication. They can also advise the use of lotions and skin creams for rashes. They can provide a supportive role to young mothers advising them on suitable medication for babies and toddlers."

### Overall satisfaction with pharmacy services

Figure 158: Overall satisfaction with pharmacy services



Where the respondents rated their satisfaction with pharmacy services as neither satisfied, or dissatisfied or very dissatisfied, the comments were looked at, Figure 159 shows the keywords that came up and Figure 160 shows the main theme of the comment and Figure 161 shows a selection of those comments.

Figure 159: Keyword where not satisfied with pharmacy services



Figure 160: Main theme of comment where not satisfied with pharmacy services

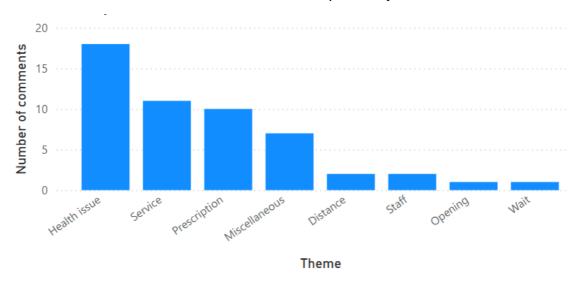


Figure 161: Sample of comments about why not satisfied with the pharmacy services

"As with all services they are under so much pressure even a repeat prescription for regular medication is taking 3 weeks to process"

"I appreciate the opening hours but when you have a little one who is poorly and have a prescription you have to find 24 hour miles away"

"I think they could do more, but lack of space and staff limits this. Opening hours could be longer so collection is possible before or after work"

"often don't have the medication available and I'm asked to call back in a day or so, then sometimes it's still not there or I have to wait half an hour for it to be dispensed. As I've already ordered it and tried to collet it I think that it's reasonable to expect it should be packed up and ready for me when I go back."

"There should be 24 hour pharmacies available across Shropshire. More ill patients are being cared for in the community. Very often the terminally ill patients require a change of medication and if there are no pharmacies open there needs are not catered for and could be left in pain. Many of the people who have no dentists can also be advised by pharmacists on pain relief some pharmacists can I believe prescribe antibiotics. This would relieve pressures on the A/ E department's"

Where the respondents said they were very satisfied or satisfied with pharmacy services, the comments were looked at, Figure 162 shows the keywords that came up and Figure 163 shows the main theme of the comment and Figure 164 shows a selection of those comments.

Figure 162: Keywords where very satisfied or satisfied with pharmacy services



Figure 163: Main theme of comment where very satisfied or satisfied with pharmacy services

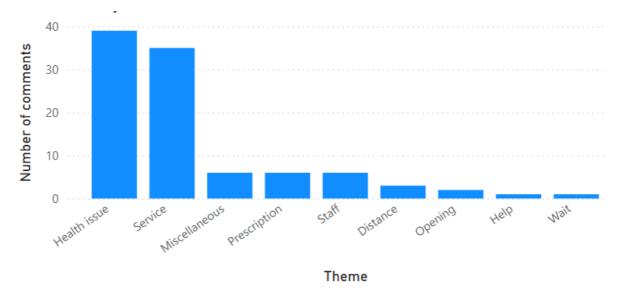


Figure 164: Sample of comments about why very satisfied or satisfied with pharmacy services

"From the pharmacy I use and the others I know of they all provide the best service they can under all the pressure they are put on, and they still manage to have a smile on their faces."

"My pharmacy is next to the doctors . I like the friendly staff and the can do attitude. They work closely with the doctors. They also have a useful range of products and medicines."

"I am happy to order my repeat prescription online and pick it up on a weekday as I work weekends. Its frustrating that prescriptions cannot be dispensed without a pharmacist on site when they have been late or off sick despite medicines already being prepared and bagged up, its only ever the assistants that hand them over anyway."

"I am fortunate to have access to a Pharmacy in my GP practice, with short waiting times, and most important to me, ease of access and readily available parking provision."

"Seamless service from repeat prescription request on the NHS app through to SMS message when pre is ready."

# Are there any further comments you would like to make about your local pharmacy services?

There were nearly a hundred free-text comments received about pharmacy services. Figure 165 shows a word cloud of the keywords that were made – the bigger the word, the more often it appeared. Figure 166 shows a summary of the main sentiment of the comment made, although sometimes in lengthier comments there were positive points made about pharmacy services – such as good service from staff - as well as negative things within the same comment – such as wait for prescription. Figure 167 shows the main theme of what the comment was about, and the 'miscellaneous' theme is for those comments that didn't fit into one of those other themes, although again, people touched on more than one theme in a lot of their comments. Figure 168 shows a few of the comments made to provide some more context.

Figure 165: Word cloud of Further comments



Figure 166: Main sentiment of the comment

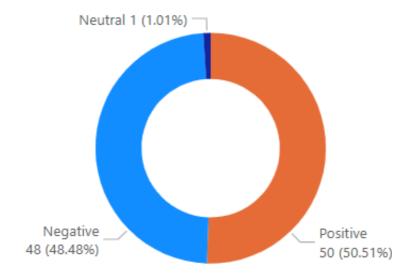
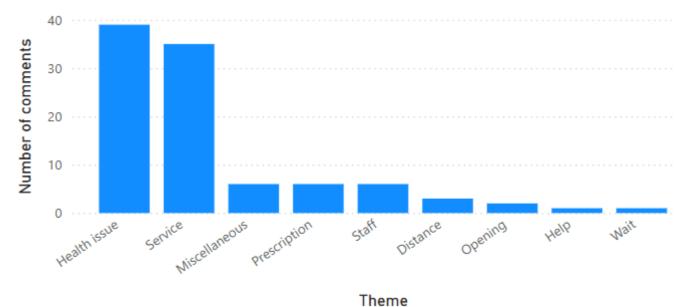


Figure 167: Main theme of the comment



## Figure 168: Random sample of comments

"Think pharmacies have been expected to take on too many services. It is reassuring to use the same pharmacy when it is on a regular basis, assisting in the continuity of care with prescriptions and advice."

"My pharmacist is great. What is also not covered in this survey is do you think the staff at your pharmacists are paid enough? The answer is a strong NO. I have seen tiny Saturday staff, and put upon shop staff who in that pharmacist deal with people who are aggressive, threatening, and vile behaviour with a smile, pleasantness and professional manner, which they definitely deserve more recognition for than what they currently get. I worked in a "rough" pub for ten years and even with my hardened eyes the clientele I see using my pharmacists, and other pharmacists around the town is scary. They need more staff and better protection, not the risk of cuts"

"Bishops Castle is rural and isolated - my pharmacy is extremely important, not just for me but the whole town and surrounding area. It is 12 miles to the next nearest service."

"Pharmacy have stopped opening on Saturday which is inconvenient and close at lunchtime which is again inconvenient but I understand they can't give out certain medication if the pharmacist is at lunch."

"Have enough staff if your thinking of introducing more options, as there is currently insufficient staff which is evidenced by long cues and medicines not being ready"

"I did try getting my contraceptive pill direct from the pharmacy, but only 1 pharmacist was able to do this so getting an appointment was difficult, so I've gone back to GP. However they are too busy to see me so just get the prescriptions without any blood pressure checks etc. A more efficient service at the pharmacy would be a good solution."

"I have a Pharmacist who is actively invested in my wellbeing. She knows my name and I know hers. She never fails to take the time to, sincerely, talk to me about how I am and she always reassures me that I can approach her; for any medical reason."

"I find it very convenient to get vaccinations at a local pharmacy."

"I would like to see more staff, this would enable other services (such as Pharmacy First) to become more freely available (less of a waiting time), without taking current staff away from there day to day job role. I would like to see more private consultation rooms, as sometimes I have had to wait to have a private conversation, as there is only one where I collect my prescription from (I have been told that the room is used for many services and can already be in use)."

"We need more local late night pharmacies as I know people with children or elderly who have to travel for prescriptions not helpful when we have pharmacies locally but no funding to help assist opening on rota through night"

# Healthwatch Survey

### Who are Healthwatch?

Healthwatch Shropshire are a free independent organisation that work on behalf of Shropshire residents to improve health and social care. They want to hear from people that have used services, whether it is a good or bad experience and then feedback to NHS leaders and other decision makers to improve the experience.

## Survey

Separate to the survey of Shropshire residents in this PNA, Healthwatch Shropshire conducted a survey of patients to ask them about their awareness of enhanced services and their experience of using pharmacy services if they used them for any reason since February 2024 - Pharmacy First services began to be provided by all community pharmacies in Shropshire from early 2024.

Healthwatch published the results of this survey on 27<sup>th</sup> March 2025 – link: <a href="https://www.healthwatchshropshire.co.uk/report/2025-03-27/shropshire-pharmacy-services-and-consultations">https://www.healthwatchshropshire.co.uk/report/2025-03-27/shropshire-pharmacy-services-and-consultations</a>

- 75 people completed the survey, with 59% of respondents aged 50 or more (33% left their age blank), and 54% being female, 12% male.
- 40% of respondents said they were aware of the 'think which service' information campaign
- There was different awareness of different 'enhanced services', the flu vaccination service was the service with fewest people unaware of it (2%), followed by blood pressure checks (9%), pharmacy first (13%) and community pharmacist consultation service (16%). (Note, in the Healthwatch survey the flu vaccination service is listed an enhanced service but it is actually an advanced service).
- 2 of 18 people spoken to expressed reservations about contacting pharmacies for medical advice or treatment because of a perceived conflict of interest over paying.
- 45 people shared their experiences of using the pharmacy services since February 2024, 44% used a pharmacy closest to their home for this and 11% convenient to their work.
- Of the people who rated the service received at the pharmacy, 62% rated it very good or good, 38% said it was very poor or poor.
- 24 people said they needed to discuss their condition or medical needs at the counter, 29% said they were very comfortable with this and half of them said they were comfortable with this.
- 18 people were offered a consultation with a pharmacist, 72% of them were very comfortable with the privacy during the consultation, with 11% saying they were uncomfortable
- 12 of the 18 people who had a consultation were given a medication or treatment and 10 of these said that it was effective.
- 28 people shared more detail about their experiences.
  - o 11 commented on the quality of the service, with the majority being positive, although there were a few that were negative.
  - Five people commented that waiting times for prescriptions to be dispensed seemed to be longer than they were expecting or were told.
  - A few people also commented that there was a lack of staff capacity and that having consultations negatively affected waiting times.
  - 4 people commented that the pharmacy staff were under a lot more pressure and had too much workload

### Healthwatch Recommendations

The report came up with four recommendations:

- 1. Consider the suggestions for improvement from the public (above), in particular what can be done to reduce delays in dispensing medication and increasing access to GP appointments.
- 2. Speak to Pharmacists about their experiences of delivering the Pharmacy First service, in particular any issues around staffing capacity and what they think would help them to provide this service in a more seamless way that builds public confidence.
- 3. Consider how the Pharmacy First service can be promoted more effectively to different parts of our population, e.g. young people aged 16+ and those with limited access or experience of using technology. Where possible involve these groups in developing your approach through co-production.
- 4. Ensure there is correct and consistent messaging from GP practice staff and 111 about the Pharmacy First service and how to access it.

# Response from NHS Shropshire, Telford and Wrekin

In response to this, we would like to provide an update on the steps we plan to take in relation to each of the recommendations.

### 1. Reducing delays in dispensing medication and improving access to GP appointments

We recognise the frustration caused by delays in medication dispensing and difficulties accessing GP appointments. The feedback highlights significant challenges related to increased pressure on pharmacy services, with concerns around capacity, funding, and workforce shortages. These issues are compounded by the growing demands of additional workloads. To address these concerns, we are actively exploring ways to streamline process through enhancing integration and supporting workforce development to build capacity in primary care.

# 2. Engaging with pharmacy teams on the Pharmacy First service to overcome issues and build confidence with the public

We are committed to supporting pharmacy teams who play a crucial role in the delivery of these services. Feedback from pharmacy professionals highlighted challenges around staffing capacity, with many reporting increased pressure due to additional workloads.

We will engage directly with colleagues to better understand their experiences with the Pharmacy First service, especially around staffing challenges. By gathering their insights, we aim to identify potential improvements to ensure that the service can be delivered efficiently. Our goal is to remove barriers that prevent pharmacy teams from providing a seamless service, ultimately building greater public confidence in the offer.

# 3. Promoting the Pharmacy First service more effectively to different parts of the population

We acknowledge the importance of tailoring communication to different population groups. Despite the positive awareness of Pharmacy First and other services like blood pressure checks and flu vaccines, there remains a knowledge gap around specific conditions covered by the service. We have noted a particularly low awareness of the service among younger demographics, who may not consider pharmacy as their first port of call. We will therefore be working with community leaders, youth organisations, and other relevant stakeholders to design promotional materials that resonate with these groups.

# 4. Ensuring consistent messaging from GP practices and NHS 111 services about Pharmacy First and how to access it

To ensure clarity and consistency, we are working closely with GP practice staff, the NHS 111 service, Community Pharmacy Shropshire, and regional colleagues, to reinforce accurate messaging about Pharmacy First. The feedback revealed concerns over communication, including

confusion around which conditions are covered by the service. We are therefore implementing training and communication plans to ensure all staff provide consistent, clear information to the public about how to access this service. We are also focused on addressing concerns about consultation privacy and comfort, with investments already being made to improve these spaces.

We appreciate the opportunity to address these issues and are committed to working collaboratively with Healthwatch Shropshire, and all stakeholders, to ensure our services meet the needs of the public in the most effective and accessible way possible.

# **Shropshire Community Pharmacy Contractor Questionnaires**

The PNA Pharmacy Questionnaire was devised in consultation with members of the steering group and the same questionnaire was used for Telford and Wrekin's PNA too. The questionnaire had several different categories: premises and contact details; opening/closing times; consultation facilities; Services, advanced services, commissioned services, non-commissioned services, screening services and disease specific medicine management service. A copy of the questionnaire is contained in Appendix 5

The survey was hosted on the 'Snap XMP' online website hosted by Telford and Wrekin Council, and then all pharmacies were sent the link to fill in the survey, which was open for responses between 11<sup>th</sup> February 2025 and 22<sup>nd</sup> March 2025. A number of email reminders were also sent out to increase the number completing the survey. In total, surveys were received from 28 pharmacy contractors within Shropshire, which is 65% of the pharmacies operating in Shropshire (43). The pharmacies who completed the survey are shown in Figure 169 and a breakdown of the family hub area they are in Figure 170.

Figure 169: Pharmacies who completed the PNA Contractor Survey

Contractor Name	Concat Addresses & Postcode
Bicton Heath Pharmacy	Bicton Heath Shopping Ctr, Welshpool Road, Shrewsbury, sy3 5ad
Bishops Castle Pharmacy	The Pharmacy, Church Street, Bishops Castle, sy9 5ae
Boots	7 Cheapside, Shifnal, Shropshire, tf11 8bn
Cambrian Pharmacy	Cambrian Medical Centre, Thomas Savin Road, Oswestry, sy11 1ga
Cleobury Pharmacy	Cleobury Pharmacy, off Vaughan Road, Cleobury Mortimer, dy14 8db
Conway Pharmacy	238 Monkmoor Road, Telford est Shopping Ctre, Shrewsbury, sy2 5sr
Day Lewis Pharmacy	Oswald Road, Oswestry, sy11 1rd
Ellesmere Pharmacy	5 cross Street, Ellesmere, sy12 0aw
Green End Pharmacy	11-13 Green end, Whitchurch, sy13 1ad
Highley Pharmacy	Beulah House, High Street, Highley, wv16 6lp
Lunts Lharmacy	1-3 Hereford Road, Shrewsbury, sy3 7qt
Lunts Pharmacy	The Tannery, Barker Street, Shrewsbury, sy1 1qj
Lunts Pharmacy	Drovers' House, Auction Yard, Craven Arms, sy7 9bz
Lunts Pharmacy	116-119 Lower Galderford, Ludlow, sy8 1ru
MSN & Lunts Pharmacy	Severn Fields Health ctr, Sundorne Road, Shrewsbury, sy1 4rq
MSN & Lunts Pharmacy	40 Sandford Avenue, Church Stretton, sy6 6bh
Peak Pharmacy	Medical Centre, Maer Lane, Market Drayton, tf9 3al
Peak Pharmacy	Northgate Health Centre, Northgate, Bridgnorth, wv16 4en
Pontesbury Pharmacy	Main Road, Pontesbury, sy5 0rr
Radbrook Green Pharmacy	Bank Farm Road, Radbrook, Shrewsbury, sy3 6du
Rhodes TC Chemist	77 High Street, Albrighton, Wolverhampton, wv7 3ja
Rowlands Pharmacy	11 High Street, Whitchurch, sy13 1ax
Rowlands Pharmacy	7 Lansdowne Road, Bayston Hill, Shrewsbury, sy3 0ht
Rowlands Pharmacy	Wem and Prees Medical Practice, New Street, Wem, sy4 5af
Rowlands Pharmacy	80 High Street, Broseley, tf12 5et
St Martins Pharmacy	Stans Superstore, Overton Road, St Martins, Oswestry, sy11 3ay
Well Pharmacy	101 Mount Pleasant Road, Shrewsbury, sy1 3el
Wenlock Pharmacy	14 High Street, Much Wenlock, tf13 6aa

Figure 170: Pharmacies who completed the PNA Contractor Survey by Family Hub Area

Family Hub Area of Pharmacy	Total
North East	4
North West	4
Central East	4
Central West	5
South East	7
South West	4

#### **Access**

Figure 171 shows the response to questions about access to the pharmacy for customers. All pharmacies said there was parking available close to the pharmacy, with 93% saying it was free. The vast majority of

pharmacies had wheelchair access to each part of the building, with just 3 having no wheelchair access to certain parts - Rowlands pharmacy in Broseley and Greenend pharmacy not having access via the entrance (unaided), while the same Rowlands as well as Wenlock Pharmacy not having wheelchair access to the consultation room or all areas. All pharmacies besides Greenend pharmacy had the ability to produce large print dispensing labels and patient information leaflets. 57% of pharmacies had dedicated disabled parking, 54% had an automatic door and just 36% (10 pharmacies) had a hearing loop and 21% (6 pharmacies) had a disabled toilet.

Figure 171: Access to the pharmacy

Does the pharmacy have wheelchair access to:	Yes	No
The entrance (unaided)	93%	7%
The Consultation room	93%	7%
All areas	89%	11%
Does the pharmacy have the following:	Yes	No
Disabled toilet	21%	79%
Automatic door	54%	46%
Hearing loop	36%	64%
The facility to produce large print dispensing labels and patient information leaflets	96%	4%
Dedicated disabled parking	57%	43%

# Languages – within pharmacies

The Shropshire Community Pharmacy Questionnaire asked what languages other than English, that members of the pharmacy team were able to speak. Seven of the pharmacies did not indicate any additional language was spoken, but 57% (16) said they had someone who could speak Urdu and 54% (15) said they had someone who could speak Panjabi.

Figure 172: Additional languages spoken by pharmacy team

Languages spoken by pharmacy team	Percentage of pharmacies
Urdu	57%
Panjabi	54%
Spanish	7%
Akan	4%
Gujarati	4%
Irish	4%
German	4%
Arabic	4%

93% (26) of the pharmacies said the pharmacy has adopted the NHS Accessible Information Standard, and of the 2 that hadn't, 1 said they were intending to adopt it.

# Information Technology

The pharmacies in Shropshire had some gaps when it comes to information technology, with 89% (25) having a text messaging service to let patients know there prescription is ready to be picked up, but only 57% (16) having the facilities for a video consultation and just half having the ability to have an online consultation, which are things that could save time for patients.

Figure 173: Information Technology facilities available in pharmacy

The pharmacy has:	Percentage of pharmacies
Online consultation	50%
Video consultation	57%
Text message to patient that prescription is ready	89%

### **Consultation Facilities**

Pharmacies were asked whether there is a consultation room available (i.e. it is clearly designated as a room for confidential conversations, distinct from the general public areas of the pharmacy premises; and is a room where both the person receiving the service and the person providing it can be seated together and communicate confidentially) including or without wheelchair access, and how many rooms they had. 93% of pharmacies said they had a consultation room available that had wheelchair access, with 7% (2 pharmacies) saying had one without wheelchair access – both of these had 1 room available, and one pharmacy (Wenlock Pharmacy) said they were planning to increase their consultation rooms. Of the pharmacies with wheelchair access, 50% said they had consultation room available and 19% said they had 2 consultations rooms. All pharmacies said their consultation room was a closed one, with 86%% saying there were hand-washing facilities available either in the consultation room or close to it, but only 14% of pharmacies said patients had access to toilet facilities.

Figure 174: Consultation Rooms available in pharmacy

	Wheelchair access	Without wheelchair access
The pharmacy has a consultation room with:	93% (26)	7% (2)
1 room available	50% (13)	100% (2)
2 room available	19% (5)	
Room available not specified	31% (8)	

Figure 175: Consultation Room facilities available in pharmacy

The pharmacy has:	Percentage of pharmacies
The consultation room a closed room	100%
There are hand-washing facilities in the consultation room	71%
There are hand-washing facilities close to the consultation room	14%
There are not hand-washing facilities	14%
Patients have access to toilet facilities	14%

### Services

The majority of pharmacies offered appliances, with only 1 pharmacy not offering any of the listed appliances and all others offering stoma appliances and dressings, 93% offering incontinence appliances and 89% offering made to measure hosiery, and 75% offering made to measure trusses. Of those that offered hosiery and trusses, the majority would do the measuring and fitting of those.

Figure 176: Appliances dispensed by pharmacies

Which of these appliances does the pharmacy dispense	Yes
Stoma appliances	96%
Incontinence appliances	93%
Dressings	96%
None	4%
Made to measure hosiery	89%
If dispense hosiery – Undertake measuring and fitting of them	72%
Made to measure trusses	75%
If dispense trusses - Undertake measuring and fitting of them	76%

<sup>&</sup>quot;All above & We supply all appliances prescribable on an NHS prescription and a range that can be bought over the counter"

### **Advanced Services**

The pharmacies in Shropshire were asked about which advanced services they provided. All pharmacies said they provided pharmacy first, 96% provided they new medicine service, 89% said they provided the hypertension case-finding service, with 7% saying they were intending to provide it in the next 12 months. The smoking cessation service was only provided in 46% of pharmacies, although 32% said they were intending to provide it soon, and although stoma appliance customisation was only provided in 21% (6

pharmacies), 54% said they were intending to provide it soon. The appliance use review service had the lowest providing, with the highest number not intending to provide the service.

Figure 177: Advanced services available in pharmacy

Does the pharmacy provide these services?	Yes	Intending to begin within the next 12 months	No - not intending to provide	Blank
Appliance use review	7%	57%	32%	4%
Hypertension case-finding service	89%	7%	0%	4%
Lateral flow device service	86%	4%	4%	7%
New medicine service	96%	0%	0%	4%
Pharmacy contraception service	79%	18%	0%	4%
Pharmacy First service	100%	0%	0%	0%
Smoking cessation service	46%	32%	14%	7%
Stoma appliance customisation	21%	54%	18%	7%

#### Other services

The pharmacies in Shropshire were asked about other services, they might possibly already provide or be interested in providing. For the most of services where they were not already provided, the majority of pharmacies said they would be willing to provide them.

Figure 178: What other services are offered in Shropshire Pharmacies

	Already provide this	Intending to	Willing to provide if	Not willing	
Other Services	service	provide	commissioned	to provide	Blank
Anti-coagulant monitoring service	7%	4%	82%	4%	4%
Anti-viral distribution service	4%	4%	86%	4%	4%
Care home service	18%	4%	57%	18%	4%
Chlamydia testing and treatment service	11%	4%	75%	7%	4%
Condom distribution scheme	68%	0%	21%	7%	4%
Distribution of naloxone	4%	4%	79%	11%	4%
Early start vitamins	0%	4%	89%	4%	4%
Emergency contraception service	68%	11%	18%	0%	4%
Gluten free food supply service (ie. Not via FP10)	4%	4%	75%	14%	4%
Home delivery service (not appliances)	86%	0%	14%	0%	0%
Independent prescribing service	0%	18%	64%	14%	4%
Language access service	4%	11%	71%	7%	7%
Medication review service	18%	4%	71%	4%	4%
Medicines assessment and compliance support service	21%	4%	68%	4%	4%
Medicines optimisation service	14%	4%	75%	4%	4%
Minor ailment scheme	11%	4%	82%	0%	4%
Needs and syringe exchange service	54%	4%	29%	11%	4%
NHS health check	4%	4%	89%	0%	4%
Not dispensed scheme	4%	4%	89%	0%	4%
Obesity management	11%	7%	79%	0%	4%
On demand availability of specialist drugs service	7%	7%	79%	4%	4%
Out of hours service	11%	4%	64%	18%	4%
Phlebotomy service	0%	4%	71%	21%	4%
Prescriber support service	4%	4%	75%	14%	4%
Schools service	0%	4%	79%	14%	4%
Sharps disposal service	0%	4%	86%	7%	4%
Supervised administration service	93%	0%	7%	0%	0%
Vascular risk assessment service	0%	4%	86%	7%	4%

Pharmacies were also asked if there were any clinical areas they would be willing to provide a service for

Figure 179: Which clinical area would you provide an independent prescribing service?

Independent prescribing service	Total
An extension of the pharmacy first	18%
Minor ailment scheme	18%
Any	7%
Areas that are commissioned	7%
Consultation room	4%
Diabetes	4%
Infection	4%
"We will be providing independent prescribing as an IP Pathfinder site. clinical areas: Minor	
ailments, Contraception, Women's health and CVD"	4%

Figure 180 shows the pharmacies provision of specific disease management services, few were already providing, intending to provide these, but the majority would be willing if commissioned. Figure 181 shows the screening services offered and again the vast majority of pharmacies were not offering any – besides atrial fibrillation (36%) - but they would be willing to if commissioned and the same is true for vaccination services, see Figure 182, although those for were already provided for covid (64%) and seasonal influenza (79%).

Figure 180: Disease specific management services offered

Disease specific medicines services	Already provide this	Intending to provide	Not willing to provide	Willing to provide if commissioned	Blank
Allergies	11%	4%	4%	75%	7%
Alzheimer's/ dementia	11%	0%	4%	79%	7%
Asthma	11%	0%	4%	75%	11%
CHD	11%	0%	4%	79%	7%
COPD	11%	0%	4%	79%	7%
Depression	7%	4%	4%	79%	7%
Diabetes type 1	11%	0%	4%	79%	7%
Diabetes type 2	11%	0%	4%	79%	7%
Epilepsy	11%	0%	4%	79%	7%
Heart failure	11%	0%	4%	79%	7%
Hypertension	18%	0%	4%	71%	7%
Palliative care service	18%	0%	0%	75%	7%
Parkinson's disease	11%	0%	4%	79%	7%

Figure 181: Screening services offered

Screening services	Already provide this	Intending to provide	Not willing to provide	Willing to provide if commissioned	Blank
Alcohol	4%	4%	4%	82%	7%
Atrial fibrillation	36%	7%	4%	46%	7%
Cholesterol	0%	7%	4%	82%	7%
Diabetes	0%	7%	4%	82%	7%
Gonorrhoea	0%	7%	7%	79%	7%
H. pylori	0%	7%	4%	82%	7%
HbA1C	0%	7%	4%	82%	7%
Hepatitis	0%	7%	7%	79%	7%
HIV	0%	7%	7%	79%	7%

Figure 182: Screening services offered

Screening services	Already provide this	Intending to provide	Not willing to provide	Willing to provide if commissioned	Blank
Childhood vaccinations	0%	4%	21%	68%	7%
Covid-19 vaccinations	64%	7%	4%	18%	7%
Hepatitis (at risk					
workers or patient					
vaccination)	0%	7%	7%	75%	11%
Routine vaccinations	0%	7%	11%	75%	7%

Seasonal influenza					
vaccination service	79%	4%	4%	11%	4%
Travel vaccinations	0%	18%	4%	71%	7%

#### Non-Commissioned Services

No pharmacy said they charged for collecting prescriptions from the GP practice and 89% said they would collect it without charge on request. 54% of pharmacies said they would deliver to all patients, and of the 13 who stated they did not deliver to all patients, 77% said they would deliver to selected patient groups – those specified were elderly, disabled, housebound, end of life, vulnerable ones or one requiring urgent medication, or at staff discretion – while 62% of them said they would do to selected local areas. Of all pharmacies, 71% said they would deliver for free on request, with just 7% saying they would charge.

Figure 183: Non-commissioned services offered by the pharmacies

Services	Yes	No	Blank
Collection of prescription from GP practice with charge	0%	89%	11%
Collection of prescription from GP practice with free of charge on request	89%	7%	4%
We deliver dispensed medicines to all patients	54%	43%	4%
If not delivered to all patients, to selected patient groups (out of 13)	77%	23%	0%
If not delivered to all patients, to selected areas (out of 13)	62%	31%	8%
Delivery of dispensed medicines – free of charge on request	71%	21%	7%
Delivery of dispensed medicines – with charge	7%	86%	7%
Monitored dosage systems	89%	7%	4%

25 pharmacies (89%) said they had monitored dosage systems, with 80% of these stating the provided for those in need free of charge, while another 12% said they would provide for everyone free of charge, and only 4% saying they would provide for those in need with a charge.

#### Prescription ordering

Figure 184: Prescription ordering methods

	Yes	No
Offer prescription ordering	64%	36%
If offered, can order via telephone	100%	
If offered, can order via email	83%	
If offered, can order via front desk	78%	

Figure 185: Use of apps for prescription ordering

	Yes	No
Support patients in the use of apps	86%	14%
If yes, support via NHS app	88%	
If yes, support via In house app	61%	

#### Need for other locally commissioned service

68% of pharmacies said there was a need for a locally commissioned service in their area, of these, by far the most mentioned thing was an extension to the minor ailment scheme (11 responses), with a couple of mentions of extending the pharmacy first service. In addition, more detailed comments are below:

<sup>&</sup>quot;Chest Infections, Ear infections for adults"

<sup>&</sup>quot;Conjunctivitis in children under 2 years, ear infections in adults, infected eczema, non-dispensed scheme RSV, pneumonia and shingles vaccine. Full minor ailments scheme"

<sup>&</sup>quot;Emergency contraception service (eg Levonelle, EllaOne)"

<sup>&</sup>quot;NHS funded MDS packs post pharmacist assessment"

<sup>&</sup>quot;You need to resolve the funding in pharmacy. It is atrocious!!!!"

## Gaps in pharmaceutical services in Shropshire

1. Overall, there are sufficient numbers and a good choice of pharmacy contractors to meet Shropshire's pharmaceutical needs.

Shropshire has 43 community pharmacies and there are 17 GP practices that can dispense to patients registered with their practice. The rate of community pharmacies per head of population is 1:7,637 which is notably higher than the national average of 1:5,127. However, when comparing the rate of pharmacies and dispensing practices combined, Shropshire has a rate of 1:5,473 compared to 1:4,761 for England. This shows the particularly important role dispensing practices play in provision across the county. Generally, there is good geographical coverage of pharmaceutical services across Shropshire and the majority of residents can access them easily. However, the number of community pharmacies has decreased from 47 at the time of the previous PNA, and the ratio of pharmacies per head of population has increased from 1:6,829 to 1:7,637. Pharmacies that shut since the previous PNA were located in Shrewsbury town centre, Meole Brace retail park in Shrewsbury, Church Stretton and Ludlow, although in each case there is another pharmacy close by. Shropshire has a significantly higher proportion of dispensing GP practices than the rest of England due to its rurality, and while they provide a vital pharmaceutical supply function for patients unable to access a community pharmacy, they are unable to offer the pharmacy enhanced and advanced services community pharmacies can which were bought in to help reduce pressure of GP appointments, which reduces choice for Shropshire residents. However, some of the smaller rural GP practices only continue to exist because they are able to continue to dispense medications to their patents.

In terms of opening hours, there is just one '100 hour' pharmacy across Shropshire, which is in Oswestry (North West Family Hub Area), which means those residents having access to a community pharmacy for at least 100 hours during the week. Most residents have good access to a pharmacy during weekdays and Saturday mornings. However, there appears to be less provision and choice on Sundays, with only 6 pharmacies open then, and none of these in the North East, South East or South West family hub areas. Regulatory changes from the department of health and social care (DHSC) that took effect on 31st July 2023 meant that former '100 hour' pharmacies could reduce their total weekly hours to no less than 72 hours, subject to various requirements. The regulatory change was introduced by DHSC to help relieve current pressures on 100-hour pharmacies and seeks to ensure patient access to NHS pharmacy services over their extended opening hours, although these changes were opposed by the Pharmaceutical Services Negotiating Committee (PSNC).

In addition to these pharmacies and dispensing GP practices in Shropshire there are also 54 community pharmacies in other local authorities in England and 7 in Wales that are within 5 kilometres of Shropshire's borders which could offer pharmacy services to Shropshire residents. Several of these pharmacies are open past 6pm on a weekday, (mostly in Telford and Wrekin), most are open on a Saturday and 8 of them are open on a Sunday (7 in Telford and Wrekin and 1 in Cheshire).

The data has shown there has been an increased use of distance selling pharmacies (DSPs) in some locations. Like dispensing practices, DSPs play a vital role in the supply of pharmaceutical care to patients who are unable to access traditional community pharmacies or want to access pharmaceutical services in an alternate manner for convenience. However, DSPs are not permitted to provide essential pharmacy services (such as dispensing) to patients in person, meaning that it can often be extremely challenging to provide the supply of pharmaceutical products to patients urgently when necessary. In addition, recent changes to the national pharmacy contract means DSPs are no longer able to offer any NHS Advanced or Enhanced pharmacy services face to face. While some patients will opt to have their non-urgent prescriptions supplied by a DSP for reasons of convenience, there will still be a need to access traditional pharmacy services for acute and/or face to face requirements. It may be necessary to assess this and to understand whether this is reflective of patient choice for convenience, or if this is symptomatic of unmet local need for additional community pharmacy provision

#### 2. Review the opening times of pharmacies on weekends and at night.

As stated, there is limited provision on Sundays, particularly in the south of the county, with only 6 pharmacies open at all then and this lack of opening which was also bought up in the resident survey –

41% of respondents stated a Sunday 10-2pm slot would be useful for them to be able to visit a pharmacy, 17% said Sundays after 4pm and 9% said Sundays before 10am.

Night opening was also mentioned in the resident survey – 26% of respondents said they would like to be able to visit on weekdays 6pm-11pm, but at present there is a limited number of pharmacies that open past 6pm, with one open until 6.30pm (Ludlow, South West family hub area), one open till 8pm (Shrewsbury, Central East family hub area), one open till 9pm (Shrewsbury, Central East family hub area) and another open till 11pm (Oswestry, North West family hub area)

Saturdays were also mentioned with 49% saying they would like to visit 9am-1pm, 42% saying they would like to visit 1pm-6pm and 16% saying they would like to visit 6pm-11pm, and while all but 1 pharmacy is open on a Saturday, most of these are open until 12pm or 1pm and only 2 pharmacies opening past 6pm on a Saturday, both in Shrewsbury, until 8pm and 9pm. While there are several pharmacies that are open later on weekdays and Saturday nights and on Sundays in Telford and Wrekin primarily, this does not seem to be the case in pharmacies close to the south of Shropshire or in Wales.

There are no pharmacies in Shropshire that are open 24 hours a day.

There were a number of comments about the difficulties people had in being able to access pharmacies on Sundays or at night that, with particular mentions of the effect this had on the elderly, children and those in acute pain.

It should be noted that in both the resident and contractor survey there were comments about the pharmacies being expected to do more and fill take the pressure off general practice and there were also mentions of funding and staff pay.

#### 3. Consider the fragility of the pharmacy network

As outlined in the NHS England commissioned independent economic analysis of NHS pharmaceutical services in England, it was found that 97-99% of community pharmacies were delivering NHS pharmacy services at a loss and 47% were not profitable in their last year. While recent changes to community pharmacy funding go some way to addressing this, it is estimated there is still a national funding shortfall of £1.8billion across the national network - this is evidenced by an average of 8 pharmacies closing per week in England. Whilst this is a national issue related to community pharmacy funding, and outside the scope of a PNA, it is important that the fragility of the sector is considered when making recommendations. For rural areas like Shropshire, the risks associated with pharmacy closures are greater. Currently, Shropshire has several areas where single pharmacies are covering very large geographies, if these single pharmacies fail and close it has a large impact on the rest of the system as there are no other local pharmacies to take on this work. Other providers such as dispensing GP practices and DSPs may be expected to absorb some of the additional supply work should a rural pharmacy close, but they will not be able to deliver the full range of pharmacy services. On the other hand, some of the smaller rural GP practices only continue to exist because they are able to continue to dispense medications and any closures would result in additional disparities of access to healthcare. Community pharmacies, DSPs and dispensing GPs exist in a delicate ecosystem and are all reliant on a finite amount of funding to remain viable. When evaluating appropriate levels of provision, an appropriate amount of flex should be built into the desired final state to ensure there is capacity to absorb any unexpected closures around a geographical area.

## Opportunities for future development

## 1. Explore options for improving communications around provision of services delivered in community pharmacy

There is a need to raise awareness, signposting and improve the availability of online information to promote the services currently available. There are also opportunities for both the HWBB and within the Integrated Care System to capitalise on the capacity within the range of services offered from community pharmacies and for future service development.

Although responses to the patient survey were generally positive about the role pharmacies fulfil and overall satisfaction was good, the survey did highlight a number of areas where there needed to be better communications about the specific services that community pharmacies provide, and which pharmacies have signed up to provide these services, for instance, 66% of respondents said they were not aware of

the 'New Medicines Service', 23% said they were not aware of the 'Disposal of unwanted medicines' service, 73% said they were not aware of 'weight management services', 77% said they were not aware of 'mental health support' service and 29% said they were not aware of 'Minor Ailments' service. However, it could that some of these services not available at their usual pharmacy, which is why they weren't aware of it and while some of the services people are not aware of might be for specific circumstances or focused at particular age groups, other services are more universal. While there may be some gaps in services provided uniformly across the county, there may need to be a more detailed review as to whether there are specific gaps in provision that need to be addressed and if so, these may need to be the basis of a supplementary statement.

The residents survey had a lot of positive comments about pharmacies, and how it was easier to see a pharmacist for advice than it was to see a GP, so it is a shame that there might be so many people that could be utilising this advice more.

Furthermore, there is an overarching commitment to identify ways in which health care can increasingly be delivered outside hospital and traditional health care settings. As demand for health and social care services is rising due to demographic changes, it is important that more can be done to improve the health and wellbeing of the population in communities. Community Pharmacies are well placed to deliver services in local communities and therefore have a profound impact on the health of our population over coming years.

#### 2. Increase the number of pharmacies providing specific services

There are a number of services that pharmacies can opt to do, but at present many are not signed up to. For example, emergency hormonal contraception is a service that 27 of the 43 pharmacies are signed up to, and in the last 2 years there were 918 cases at Shropshire pharmacies. 26 of the 43 pharmacies are signed up for the needle exchange service, with nearly 2,000 packs given out across 16 pharmacies in the 23/24.

28 of the 43 pharmacies completed the contractor survey, and within this, there were a lot of services that contractors said they would be willing to provide if they were commissioned, if they were not already providing that service or were intending to provide, so there seems to be an appetite for increasing the number of services that pharmacies could provide.

#### 3. Consider the impact of healthcare transformation

The recently published 10-year health plan outlines community pharmacies key role in the management of long-term conditions, prevention, and deeper integration into neighbourhood care teams. As such, there will be a period of transformation within the pharmaceutical provision, primary care and neighbourhood health and it might be necessary for an interim review of services if necessary.

## Appendix 1 Overview of Contract Applications and Market Entry

#### **Pharmacy Contract Applications**

NHS England is responsible for local provision of pharmaceutical services and maintaining pharmaceutical lists. Applications, once received into NHS England via Primary Care Services England (PCSE) website are reviewed by the Pharmacy Regulations Committee based in the Regional Team on a monthly basis.

In respect of the area of each Health and Well Being Board (HWBB), the NHS England's representative PCSE must prepare, maintain and publish 2 lists of persons other than medical or dental practitioners, who provide pharmaceutical services in that area.

Those lists (which are pharmaceutical lists) are:

- a) a list of persons who undertake to provide pharmaceutical services in particular by way of the provision of drugs; and
- b) a list of persons who undertake to provide pharmaceutical services only by way of the provision of appliances.

#### Those lists must include:

- a) the address of the premises in the area of the HWBB at which the listed person has undertaken to provide pharmaceutical services ("the listed chemist premises");
- b) the days on which and times at which, at those premises, the listed person is to provide those services during the core opening hours and any supplementary opening hours of the premises.

In respect of the area of each HWBB the NHSCB must:

- a) prepare, maintain and publish an "EPS list" of all the NHS chemists situated in that area who participate in the Electronic Prescription Service; and
- b) include on its EPS list the address of any premises at which the Electronic Prescription Service is provided

Any applications for new or additional pharmacy premises and any relocation of services are made to NHS Commissioning Board.

The pharmaceutical services to which each PNA relates are all the pharmaceutical services that may be provided under arrangements with NHSCB for:

- a) the provision of pharmaceutical services (including directed services) by a person on a pharmaceutical list;
- b) the provision of local pharmaceutical services under an LPS scheme (but not LP services which are not local pharmaceutical services); or
- c) the dispensing of drugs and appliances by a person on a dispensing doctors list (but not other NHS services that may be provided under arrangements made by the NHSCB with a dispensing doctor).

#### Market Entry Regulations

Applications for inclusion in a pharmaceutical list are now considered by NHS England (through their Regional Teams) and the 'market entry test' is now an assessment against the pharmaceutical needs

assessment produced by the local authority's Health and Wellbeing Board. The exemptions introduced in 2005 have been removed (other than the exception for distance selling pharmacies) and 'neighbourhoods' are no longer relevant for relocations.

Local Pharmaceutical Committees (LPCs) and the Pharmaceutical Services Negotiating Committee (PSNC) are both recognised as representing pharmacy contractors on NHS matters, and these matters are largely set out in the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. More than half of those regulations are taken up with market entry.

#### Relocations

The 'Relocations which do not result in significant change' application was bought in under The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013, to replace the Minor Relocation application of the 2005 regulations. The new regulations judge applications based on whether the relocation would affect the patient groups which use the pharmacy, and whether the relocation would result in a significant change to the arrangement for pharmaceutical services, rather than whether the relocation would be above or below 500m, or in the same neighbourhood.

The Regional Team must endeavour to determine the application as soon as is practicable, however this must be within four months from the date on which the complete application is received. There is a further thirty-day appeal period before the pharmacy can relocate, and the pharmacy must relocate within six months of being granted (subject to a possible 3-month extension).

Relocations which do not result in significant change are a notifiable application, meaning that all applications are circulated to the LPC and contractors likely to be affected if the application were to be granted, and they are allowed 45 days in which to make representations. This differs for some relocations processed under the 2005 Regulations in that those which were relocating less than 500m would be determined without consultation, and within 30 days. All relocations now are subject to the statutory consultation period.

Relocations that do not cause significant change are not judged against a Pharmaceutical Needs Assessment (PNA).

#### Pharmaceutical Needs Assessments

The PNA is produced by the local authority's Health and Wellbeing Board (HWBB) at least every four years. Until April 2015, the PNA produced by the former PCT may be used until the HWBB has produced its own. Between versions of the PNA a supplementary statement may be issued to record changes in the provision of pharmaceutical services (for example, the opening or closure of a pharmacy) but a supplementary statement cannot be used to record changes to the needs for pharmaceutical services.

The PNA will identify the pharmaceutical services that are needed, those that are provided, and hence those which are needed but not currently provided. It will also identify pharmaceutical services which are not needed, but which, if they were to be provided, would bring about improvements in or better access to pharmaceutical services. Again, such services that are provided are identified in the PNA. The PNA will also include details of other NHS services commissioned in the area which have an impact on the need to commission pharmaceutical services.

#### **Applications**

An applicant must submit an application form, a fee, and if they are not already on a pharmaceutical list, their fitness to practise declarations.

It is always for the applicant to decide if and when to make an application – there is a fee associated with each application, and once an application has been made, this will enter the public domain and other interested parties may consider making applications in the same area. This is via the PCSE Website <a href="https://pcse.england.nhs.uk/services/market-entry/">https://pcse.england.nhs.uk/services/market-entry/</a>

#### **Fees**

Applications must be accompanied by a fee in most cases – see the Pharmaceutical Services (Fees for Applications) Directions 2013. An exception exists allowing the Regional Team to waive the fee where it has invited the applicant to make that application.

The Regional team is required by the regulations to consider, before it seeks representations from interested parties, whether it would be beneficial to consider other applications alongside the application. This could arise for example if an application appeared to be meeting part of the needs identified in the PNA, where the Regional Team thinks that opening the opportunity to apply to others, in the light of that first application, may stimulate a more comprehensive offering. For this reason, applications must be as strong as possible, as the Regional Team is not obliged to accept an application on a first past the post principle.

If the Regional Team does decide to defer an application to invite other applications, it must do so for no longer than 6 months. The application is put on hold pending other applications.

The Regional Team may also defer an application if there are other applications in the pipeline, or if there are relevant appeals in process.

#### **Timescales**

If the application is a notifiable application (the meaning of which is set out in paragraph 18 of that schedule) including all routine applications as well as relocations, distance selling applications and relocations combined with change of ownership, then NHS England must endeavour to determine the application as soon as is practicable, and unless there is deferral of the application (see above) must determine it within 4 months of the date on which it had received all the information it required to determine the application.

For the applications which are not 'notifiable' such as change of ownership, NHS England must determine the application within 30 days of receiving all the information it needed. These limits can be extended is there is 'good cause' for delay.

#### **Exemptions / Exceptions**

The change in the market entry test to refer to the PNA means that it is no longer necessary to have exemptions to the test for the large out of town retail developments, the one stop primary medical centres, or the pharmacies undertaking to provide pharmaceutical services for at least 100 hours per week. These exemptions therefore cannot be used by an applicant (although existing pharmacies and those granted under the exemption continue).

There were misunderstandings about whether a 100-hour pharmacy would be able to apply to reduce its hours. The regulations have made it clear that such pharmacies cannot apply to reduce their hours.

The exemption for distance selling pharmacies continues. The reason this exception (as it is now called) is required, is because a true internet or mail order pharmacy, servicing a population spread throughout the country, cannot argue a strong enough case for meeting needs set out in a local PNA, nor could it be said to bring about a significant benefit under an unforeseen benefits application. New conditions have been introduced in regulation 64, which requires the pharmacy to be able to provide essential services safely, without face-to-face contact at the premises, and must ensure that persons anywhere in England are able to access the essential services.

There have been several applications refused by NHS England, and some of these have been the subject of appeals to the NHS Litigation Authority's Family Health Services Appeals Unit. In several cases, the applicant had failed to satisfy the Regional Team or the Appeals Unit, that they would be able to provide all the essential services without face-to-face contact at the pharmacy. In some cases, SOPs had not been provided, and in others, the SOPs had not been sufficient to satisfy the Regional Team or the Appeals Unit. It is likely that over time, the new requirements will be tested further, both at the Appeals Unit and in the High Court. Applicants and affected contractors wishing to make representations on applications may find it helpful to examine similar cases that have been considered by the Appeals Unit, and of course, legal advice may be needed to establish the latest position as to how the exemption requirements should be interpreted.

#### Making representations on applications

A pharmacy contractor that in the opinion of the Regional Team is likely to be affected by an application if it were to be granted will be notified if the application is a 'notifiable' application.

If invited to make representations, they will be considered only if they are substantial (for example, they contain a reasonable attempt to describe the reasons why the application should be granted or refused). There will be a right of appeal in most cases, but only if the pharmacy contractor made a reasonable attempt to express the grounds for opposing the application.

When invited to make representations, or when given a right to appeal it is essential to comply with timescales as late submissions will not be permitted.

Rurality, controlled localities and the provision of pharmaceutical services by doctors

#### Controlled localities

GP dispensing may be required where a pharmacy service would not be viable due to the nature or size of the population. GPs may dispense for their patients who have requested them to do so, if permission has been granted by NHS England (previously this permission was granted by the PCT). Generally, in order for permission to be granted the patients who ask their GP to dispense must be resident in a 'controlled locality' for which the GP has dispensing rights (i.e., an area which is rural in character which the GP has appropriate permission to dispense) and live at least 1.6km from an existing pharmacy.

If a new pharmacy wishes to open in a controlled locality, then there are additional tests that the applicant must satisfy, so as not to prejudice any dispensing by doctors being undertaken for patients in that area.

Similarly, if a GP is asked to dispense by their patients' resident in a controlled locality, NHS England must undertake a test to ensure that there is no prejudice to any local pharmacies.

NHS England is responsible for ensuring maps are available which show the areas which have been determined in the past to be controlled localities, and these will remain controlled localities unless and until a new determination finds that they no longer satisfy the requirements of being rural in character.

It is the responsibility of NHS England to publish a map defining controlled locality areas for Shropshire; the last review was undertaken in 2010.

#### Reserved location

Where an application for a new pharmacy is made in a controlled locality, a determination must also be made as to whether the location of the pharmacy is in a 'reserved location'.

A reserved location is an area within a controlled locality where the total of all patient lists for the area within a radius of 1.6km (1 mile) of the proposed premises or location is fewer than 2750. The effect of determining a reserved location is that the pharmacy application is not required to satisfy the prejudice test (but the market entry test still applies) in order to be entered onto the pharmaceutical list. However, a reserved location pharmacy is not afforded the so called 'one mile rule' and patients in a controlled locality both within one mile of the pharmacy and beyond have the right to choose whether to have their medicines dispensed at a pharmacy or GP surgery. Should the population reach or exceed 2750 the pharmacy if already open can apply to NHS England for a re-determination of reserved location status. If this status is removed then, subject to the prejudice test, the normal one-mile rule would apply (i.e., the doctors lose dispensing rights within a mile of the pharmacy).

#### Registration of dispensing doctor premises

NHS England (through the Regional Teams) keep a list of dispensing doctors (regulation 46(1)) and a list of premises from which those doctors are authorised to dispense (regulation 46(2)(a)). The list also includes the area in relation to which the GP has been granted outline consent (regulation 46(2) (b).

#### New applications to dispense by GPs

New applications to dispense by GPs (outline consent and premises approval) are not permitted or considered if there is a pharmacy within 1.6km of the premises from which the practice wishes to start dispensing.

#### Relocations

Dispensing practices can relocate their premises if the granting of the application would not result in a significant change to the arrangements that are in place for the provision of pharmaceutical services (or local pharmaceutical services).

Further applications for relocation may be considered by NHS England only after 12 months has elapsed since the dispensing practice commenced providing services from the new premises.

#### Practice amalgamations

The amalgamation of a dispensing practice with a non-dispensing practice will trigger a new application for outline consent to dispense, and application for premises approval.

## Regulatory Changes in June 2025 - DSPs, Opening Hours



June 2025

# Briefing 013/25: Regulatory Changes in June 2025 – DSPs, Opening Hours, etc.

The Department of Health and Social Care (DHSC) laid new regulations in June 2025, which include important regulatory changes to the community pharmacy sector, including those on distance selling premises (DSP) pharmacies and core opening hours.

The <u>amendment regulations</u> made changes to the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (the PLPS regulations), which were agreed in the 2024/25 and 2025/26 negotiations between the Department of Health and Social Care (DHSC), NHS England (NHSE), and Community Pharmacy England.

#### Overview

In this briefing, we cover:

- DSP changes;
- Core opening hours changes; and
- Other regulatory changes announced in June 2025.

Details of the regulatory changes agreed in the settlement on the CPCF for 2024/25 and 2025/26, including FAQs, are available on our website.

## DSP changes

#### DSP market entry exemption closing

From 23 June 2025, no new applications for DSP pharmacies can be accepted/are permitted under the PLPS regulations. Similar to the previous 100-hour pharmacy exemption, the DSP route to establish a new pharmacy will now be closed.

Any new DSP applications submitted on or before 22 June 2025 will be determined in accordance with the current market entry test, i.e. the test that was in effect on and before 22 June 2025.







DSP pharmacies already on a pharmaceutical list will continue to be on the list and be able to continue to deliver pharmaceutical services in accordance with their Terms of Service in the PLPS regulations (which are also changing – see below). DSP pharmacy owners will continue to be able to apply to relocate or change the ownership of the pharmacy.

#### DSPs to deliver Directed Services remotely

From 1 October 2025, with one exception, DSP pharmacies will no longer be permitted to deliver Directed services (Advanced, National Enhanced, and Enhanced services) in person, onsite at the distance selling premises (i.e., no longer permitted to provide Directed services onsite, face-to-face with a patient).

Where a service specification allows, DSP pharmacies will continue to be permitted to provide:

- remote consultations (from the distance selling premises) or
- off-site delivery of a Directed service face-to-face with a patient (i.e. not on the distance selling premises) with ICB approval, if required.

The one exception to this is that DSP pharmacies may continue to deliver the COVID-19 and Influenza vaccination services onsite, face-to-face, at the distance selling premises, until 31 March 2026. This is to ensure adequate provision of these services for winter 2025/26 and to protect those who have already placed orders for their vaccination stock.

We have created an <u>FAQs page</u>, which addresses some key DSP related questions of the regulatory changes.

## Core Opening Hours

Pharmacy owners who want to change their core contractual hours (core opening hours) must apply to the ICB.

#### Existing application route

The existing application route is defined in para 24(1) of Schedule 4 of the PLPS regulations, which applies to applications to reduce the total number of core opening hours, or to rearrange the existing number.

This route is a 2-part regulatory test, which is:







- for the relevant days/times. (e.g. the proposed core opening hours and the existing core opening hours and other relevant hours – if Saturday afternoon is quiet with few patients, as well as showing another time in the week better meets the needs of patients, you may need to show that some of the small number of patients in the afternoon could have come in the morning).
- The distance from the applicant's pharmacy to nearby pharmacies, including any
   100 (72) hour pharmacies, or other pharmacies, their opening days and times,
   the services they offer, and how patients can travel to them.
- Evidence of the economic viability of the current opening hours, which can be considered alongside evidence of patient demand for the pharmacy's services during these hours (the Pharmacy Manual will be amended to state this or something similar).
- Other evidence relevant to the regulatory test.

Note: for an application under the new application route to be granted, people accustomed to using the pharmacy must be likely to benefit from the changes because, overall, they are more likely to access pharmacy services at the premises during the proposed hours than during the existing hours. An application could be about moving a set number of core hours or a broader change to core opening hours.

It is understood that in due course, NHSE will revise its application form for changing core opening hours.

We have provided an <u>information page</u>, which addresses some key information relating to the changes to opening hours applications as part of the CPCF settlement.

### Other regulatory changes

The amendment regulations make two other relevant changes:

First, provision for the central supply of Flu vaccinations for children to pharmacies from national stocks, without purchase by the pharmacy (and with zero or nominal reimbursement). Provision for central supply was introduced for COVID-19 vaccines (and antivirals) and now applies to other vaccines including the MMR, RSV, and Pertussis vaccines. Flu vaccinations for children will join this list. Central supply of these vaccines enables community







- First, whether the proposed changes to core opening hours maintain as necessary the
  existing level of service provision and, if not,
- Second, whether they will maintain a sustainable level of adequate provision in circumstances where this is unnecessary or unrealistically achievable.

This application route considers the needs of people in the area, and the opening hours and provision of pharmacy services by the applicant's pharmacy and other pharmacies in the area.

#### New application route

The new application route is defined in para 26(2ZB) of Schedule 4 of the PLPS regulations, which applies to applications to rearrange the existing number of core opening hours (the total number of weekly hours must remain the same).

This route has a single regulatory test, which states that NHSE (in practice, the ICB) must:

"... seek to ensure that the people who are accustomed to accessing pharmaceutical services at the pharmacy premises are likely to benefit from the changes because, overall, they would be more likely to access those services at those premises during the proposed core opening hours than during the existing core opening hours."

This application route considers the needs of people who are accustomed to accessing pharmacy services at the applicant's pharmacy, and the opening hours and provision of pharmacy services by the applicant's pharmacy.

#### What to include with applications

With both the new and existing application routes, pharmacy owner applicants will need to:

- Specify which application route applies, otherwise, the application will be invalid.
- Provide the ICB with such information as may reasonably be requested (i.e., provide all relevant information when the application is made).
- Consider what evidence is relevant to their application, and depending on the application route, this could include, for example:
  - Any changes to local GP practice hours and the opening hours of nearby pharmacies.
  - Information about the demand for and use of the pharmacy's services patient surveys, levels of use – for prescriptions/requests for advice/OTC medicines sales







pharmacies to play a vital role in future public health vaccination programmes, according to local patient needs. (The change is made to Reg 91A of the PLPS regulations).

Second, a change to the 'Charges Regulations' to enable the automatic cancellation and refund of a pre-payment certificate to a person who becomes entitled to a maternity or medical exemption certificate.

#### Further information

After reading this briefing information and resources on our website, if you have further queries or require more information, please contact the <u>Regulations Team</u>.



## Appendix 2: PNA Steering Group Terms of Reference

#### Background

To provide pharmaceutical services, providers (most commonly community pharmacists but also dispensing appliance contractors and GPs in rural areas) are required to apply to be included on a pharmaceutical list. For their inclusion to be approved they are required to demonstrate that the services they wish to provide meet an identified need in the Pharmaceutical Needs Assessment (PNA) for the area. From April 2013 the Health and Social Care Act 2012 transferred responsibility for developing and updating PNAs from the former primary care trusts (PCTs) to Health and Wellbeing Boards. At the same time the responsibility for using PNAs as the basis for determining market entry to the pharmaceutical list transferred from PCTs to NHS England.

The Health and Wellbeing Board (HWBB) has the legal responsibility for producing a PNA every three years. A revised PNA for Shropshire needs to be published by 1 October 2025.

The purpose of the PNA Steering Group is to develop the revised PNA on behalf of the HWBB. The PNA Steering Group will set the timetable for the development of the PNA, agree the format and content, oversee the statutory consultation exercise, and ensure the PNA complies with statutory requirements.

#### Purpose and Aims of the PNA Steering Group

- Coordinate the update of the Pharmaceutical Needs Assessment (PNA) in line with current legislation
- ensure the published PNA complies with all the statutory requirements set out in the appropriate Regulations
- oversee and drive the formal process to review the PNA for Shropshire and Telford and Wrekin, including the 60-day statutory consultation exercise
- To advise and develop structures and processes to support the preparation of a comprehensive, well researched, well considered and robust pharmaceutical needs assessment, building on expertise from across the local healthcare community.
- To agree the statement of the needs for pharmaceutical services
- To agree and oversee the process for assessing the current provision of pharmaceutical services by pharmacies, appliance contractors and dispensing practices within Shropshire, Telford and Wrekin (and neighbouring areas where appropriate)
- To ensure that accurate maps identifying the premises where services are provided are produced
- To develop a framework for subsequent assessments and supplementary statements
- To take into account any further legislation that may impact on the PNA.
- promote integration and linkages with other key strategies and plans including the Lincolnshire Joint Strategic Needs Assessment (JSNA), the Joint Health and Wellbeing Strategy (JHWS) for Lincolnshire and Lincolnshire's Integrated Care Partnership Strategy
- establish arrangements to regularly review the PNA following publication, including issuing subsequent supplementary statements in response to any significant changes

#### **Key functions**

- to oversee the PNA process
- to approve the framework for the PNA
- to approve the project plan and timeline, and drive delivery to ensure key milestones are met
- to ensure the development of the PNA meets all statutory requirements
- to determine the localities which will be used for the basis of the assessment
- to undertake an assessment of the pharmaceutical needs of the population including:
  - o mapping current pharmaceutical service provision in Shropshire, Telford and Wrekin
  - o reviewing of opening hours and location of services
  - o using the JSNA and other profile data to review the health needs of the population
  - analysing current and projected population changes in conjunction with existing patterns of service provision
  - identifying any gaps in service provision and proposed solutions on how gaps can be addressed
  - o consideration of future needs, including housing growth, and its impact on the development of services in terms of essential, advanced, and enhanced service provision
- to produce a draft PNA for consultation

- to ensure active engagement arrangements are in place
- to oversee the consultation exercise ensuring that it meets the requirements set out in the Regulations
- to consider and act upon formal responses received during the formal consultation process, amending the PNA document as appropriate
- to ensure the Health and Wellbeing Board is updated on progress and that the final PNA is signed off by the Board by 1 October 2025

#### Membership

Name	Role/Title	Organisation
<b>Core Members</b>		
James Milner	Head of Pharmacy Integration and Workforce	NHS Shropshire, Telford and Wrekin ICB
Peter Prokopa	Chief Officer	Community Pharmacy Shropshire (LPC)
Helen Onions	Director of Public Health	Public Health, Telford & Wrekin Council
Helen Potter	Insight Manager	Public Health, Telford & Wrekin Council
Damion Clayton	Senior Research & Intelligence Officer	Public Health, Telford & Wrekin Council
Anne Marie Speke	Head of Service Healthy Population	Public Health, Shropshire Council
Damilola Agbato	Public Health Principal	Public Health, Shropshire Council
Jessica Edwards	Public Health Intelligence Manager	Public Health, Shropshire Council
Mark Trenfield	Senior Public Health Intelligence Analyst	Public Health, Shropshire Council
Rachel Robinson	Executive Director of Health, Wellbeing and Prevention	Public Health Shropshire Council
Simon Fogell	Chief Executive, Healthwatch	Healthwatch Telford and Wrekin
Jan Suckling	Lead Engagement Officer	Healthwatch Telford and Wrekin
Lynn Cawley	Chief Officer, Healthwatch	Healthwatch Shropshire
Julian Povey	LMC Lead	Local medical committee
Damien Thompson	LMC Lead	Local medical committee
Non-core members		
Neil Evans	Commissioning Development Manager	Shropshire Council
Tony Mercer	Senior Public Health Commissioner	Telford & Wrekin Council

The group will be administered and chaired by the Commissioner/Lead or person writing the needs assessment.

#### **Reporting and Governance Arrangements**

PNA progress updates will be reported, as required, to the following:

- Mark Trenfield/Jess Edwards will report to the Health & Wellbeing Board & Strategic Commissioning Group
- James Milner will report to the ICB Governance Board
- Peter Prokopa will report to the Local Pharmaceutical Committee

## **Frequency of Meetings / Communications**

- > The group will meet as deemed necessary. Wherever possible email will be used to communicate ongoing PNA development
- Through the development phases the Public health Intelligence Analyst and Public Health Manager coordinate the PNA development.

## Appendix 3: Community Pharmacies locations with relevant population layers

Figure 186: Community Pharmacies and Index of Multiple Deprivation 2019

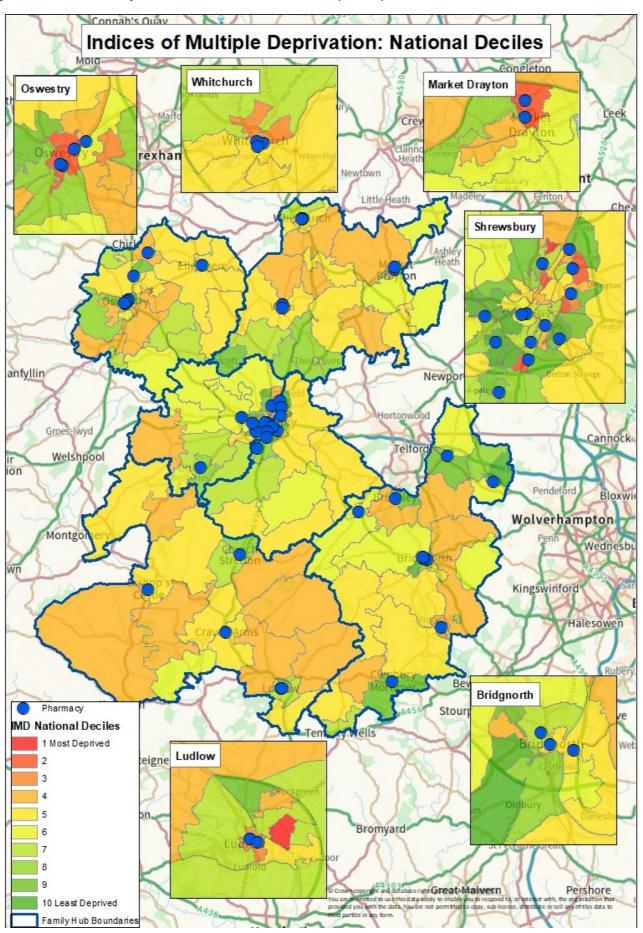


Figure 187: Community Pharmacies and Rural Urban Classification 2021

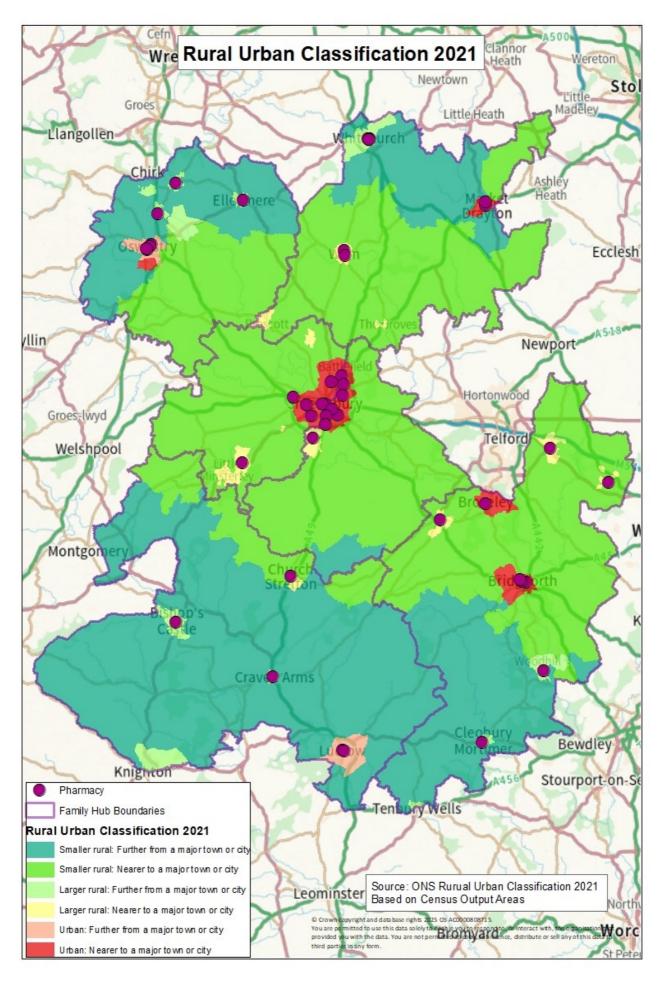


Figure 188: Community Pharmacies and Employment Density by lower level super output area, ONS Business Register of Employment Survey 2023

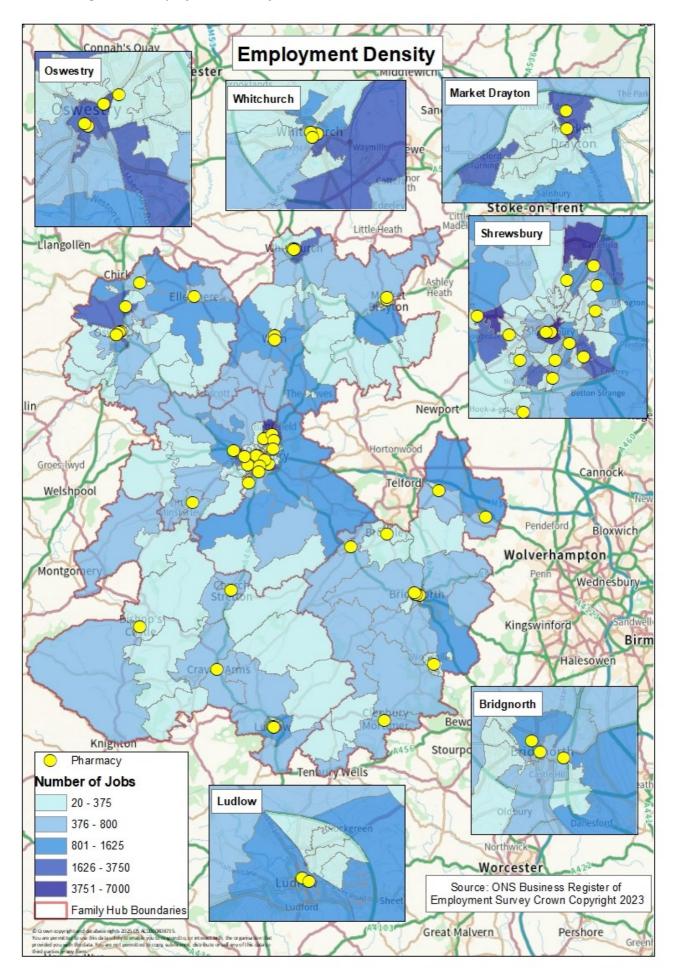


Figure 189: Community Pharmacies and Median Household Income by lower level super output area, CACI Paycheck data, 2024

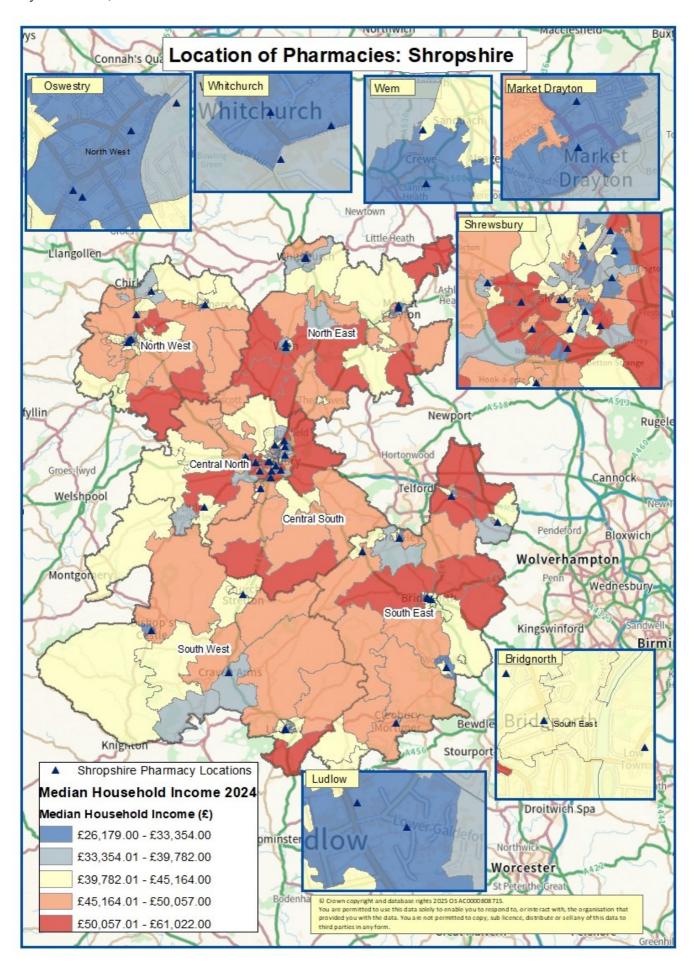


Figure 190: Community Pharmacies and Percentage of Residents with a Disability (disabled with day-to-day activities limited a lot or a little) by lower level super output area, ONS Census 2021

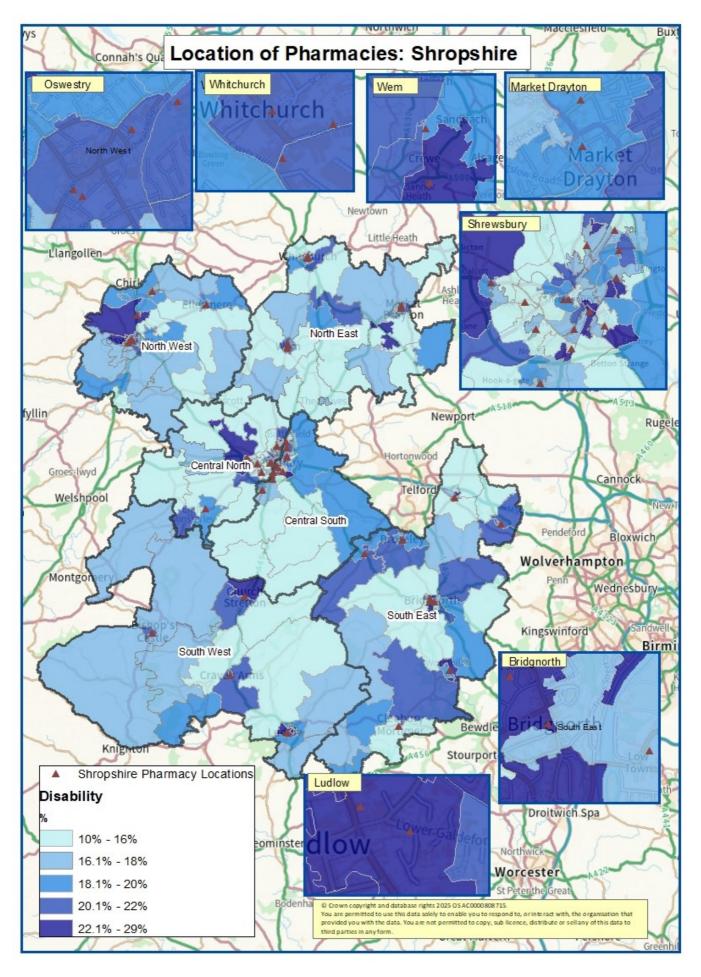


Figure 191: Community Pharmacies and Percentage of Residents Providing Unpaid Care by lower level super output area, ONS Census 2021

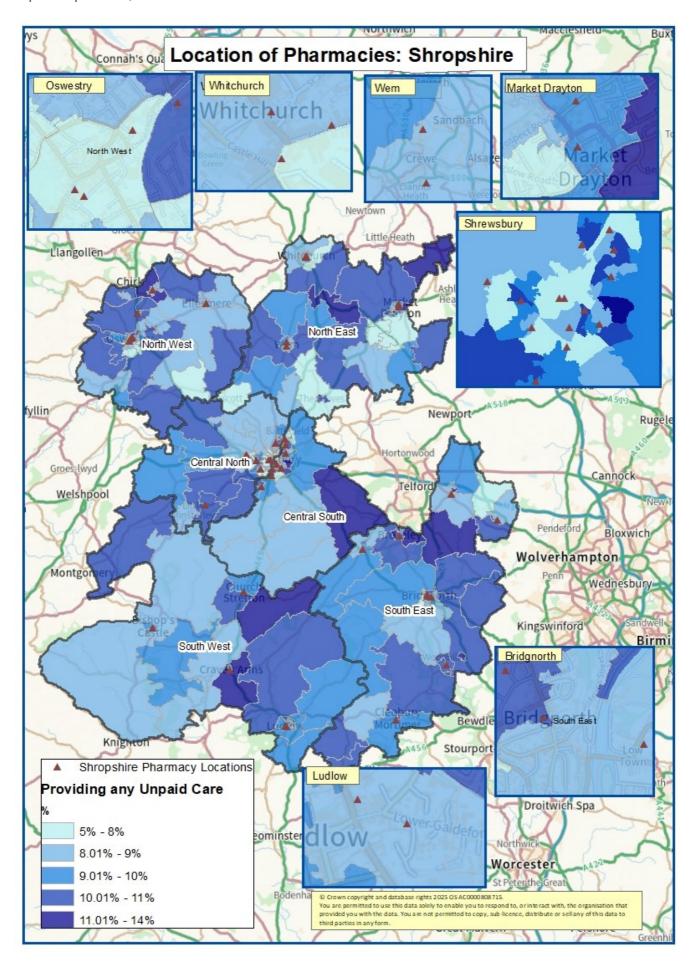


Figure 192: Community Pharmacies and Percentage of Residents who said they were in poor health by lower level super output area, ONS Census 2021

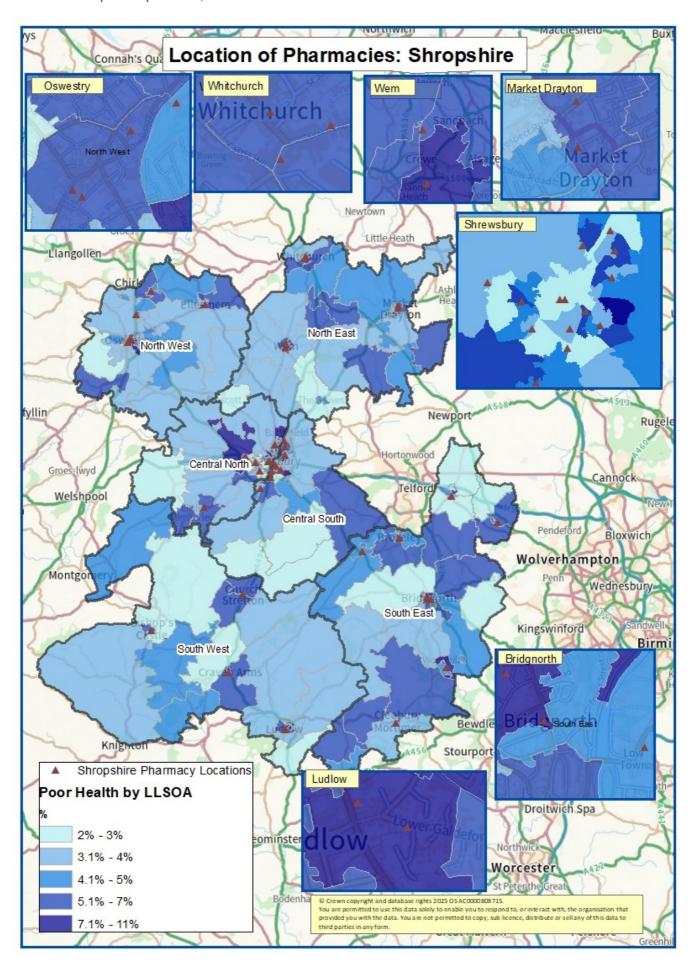


Figure 193: Shropshire 0–4-year-old population by lower level super output area from the 2022 mid-year population estimates

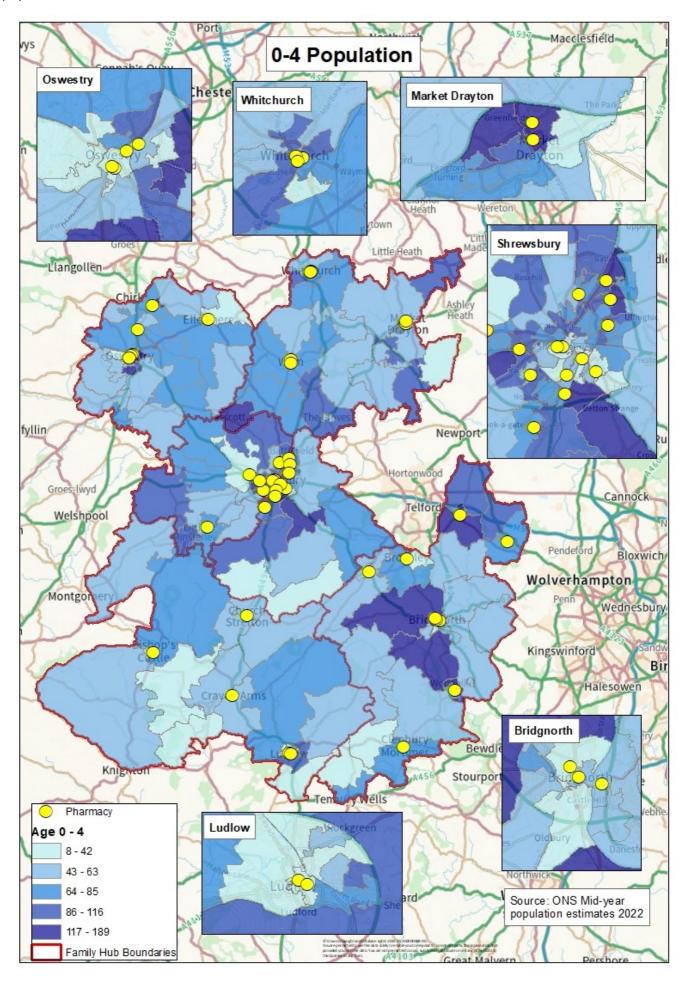


Figure 194: Shropshire 5–15-year-old population by lower level super output area from the 2022 mid-year population estimates

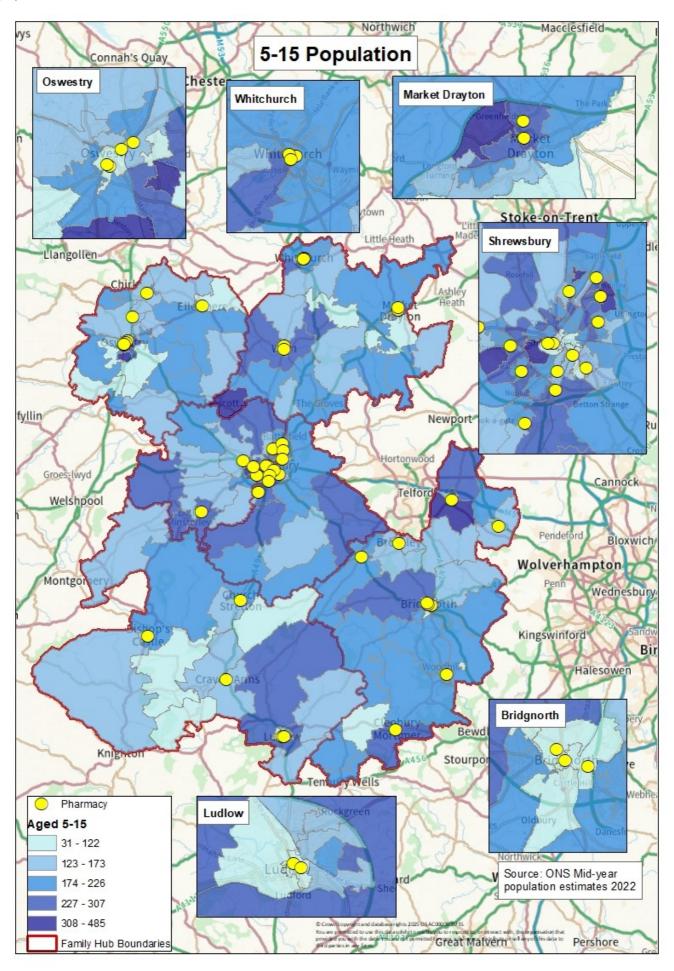


Figure 195: Shropshire 16–64-year-old population by lower level super output area from the 2022 mid-year population estimates

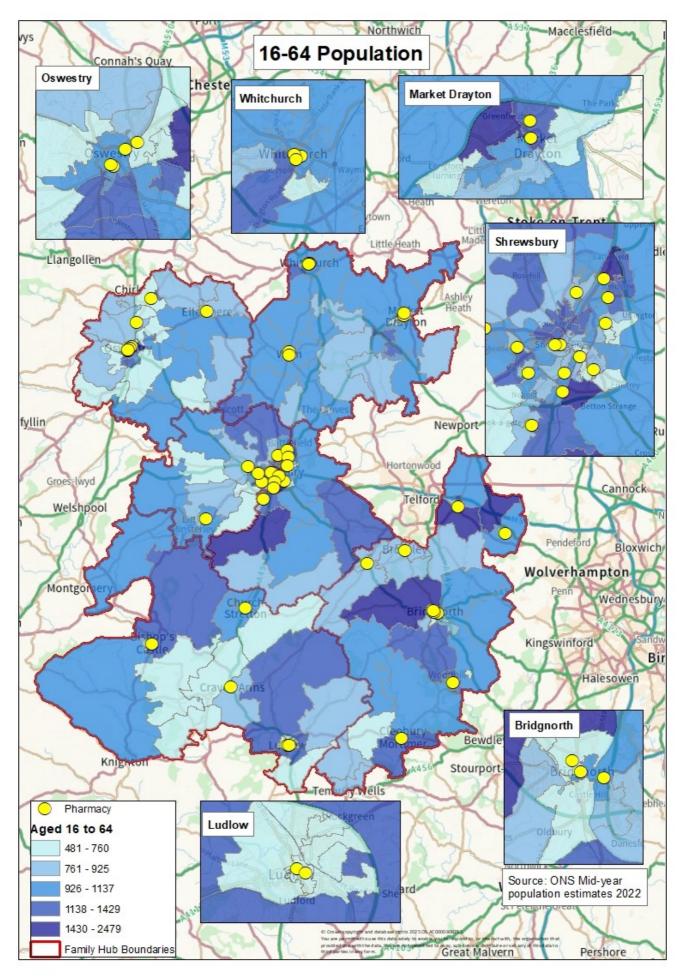


Figure 196: Shropshire 65+ population by lower level super output area from the 2022 mid-year population estimates

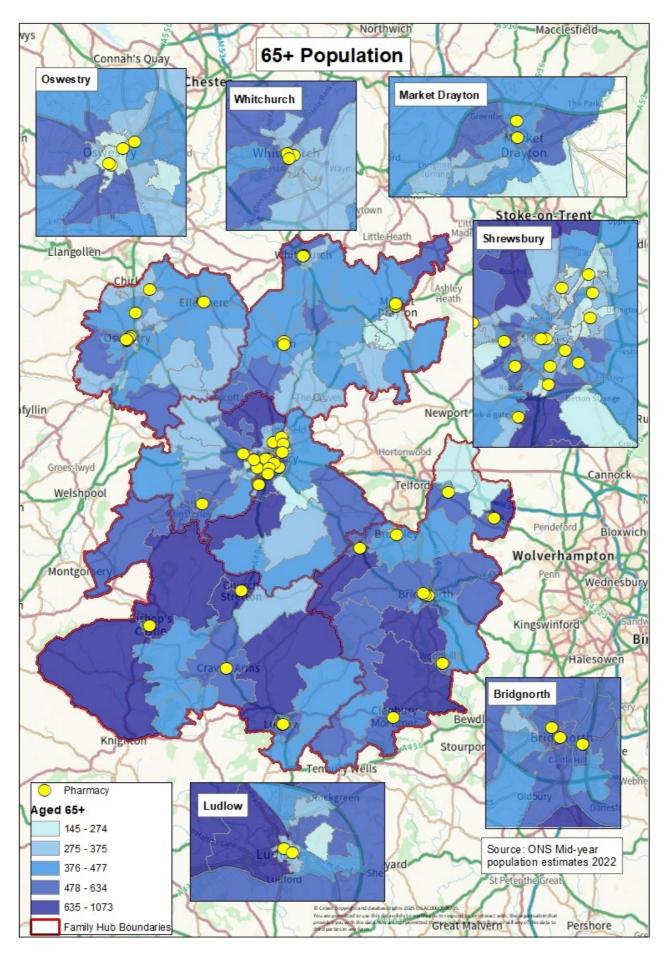
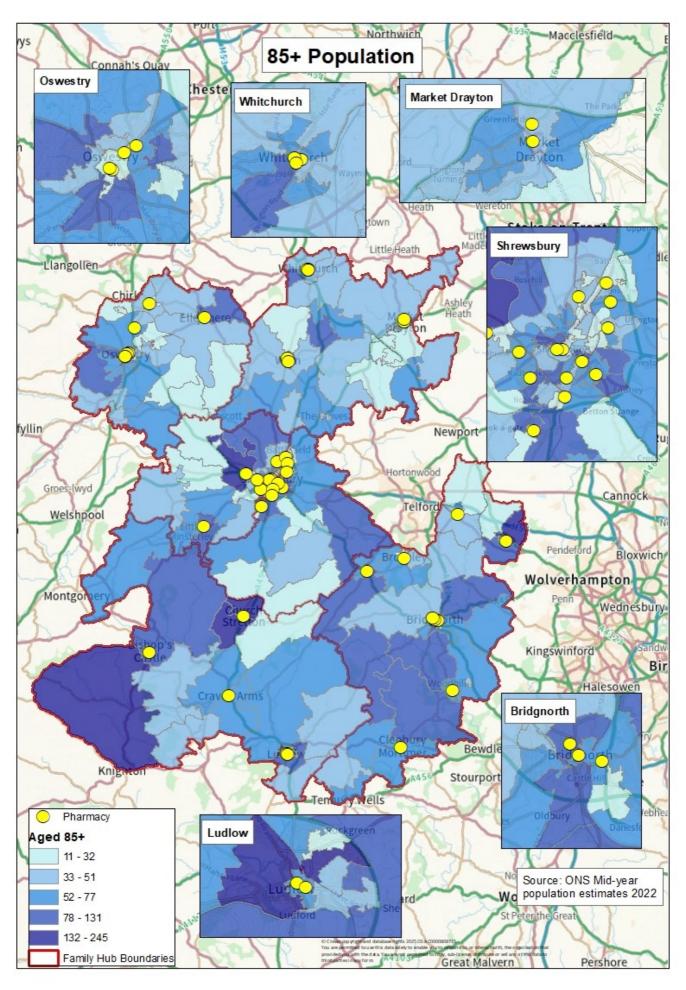


Figure 197: Shropshire 85+ population by lower level super output area from the 2022 mid-year population estimates



## Appendix 4: Community Pharmacy Resident Questionnaire

Your views on community pharmacy (chemist) services in Shropshire, Telford and Wrekin

#### Introduction

This survey is about the service you receive from community pharmacies or local chemists in your area.

Some people refer to pharmacies as 'the chemist', but in this survey we will just refer to them as pharmacies.

Shropshire Council and Telford & Wrekin Council are collecting your personal data for the purposes of statistical analysis related to the topics in this survey.

All of your answers will remain confidential and you will not be identified in any way in the reporting and use of this survey unless you tell us something that we are required by law to disclose.

For further details of the Councils privacy arrangements please view the privacy pages on the Councils websites www.telford.gov.uk/terms and www.shropshire.gov.uk/privacy (links open in a new tab).

1.	Which local authority area do you live in?
	Shropshire
	Telford & Wrekin
	Somewhere else
11	
Use	of pharmacies
2.	How often do you visit a pharmacy for health reasons (health advice, prescriptions or over the counter medicines)?
	Two or more times weekly Weekly
	Fortnightly
	Monthly
	Every 2-3 months 6 monthly
	Yearly
	Never
3.	How often do you visit a pharmacy for any other reason (e.g. shopping, toiletries, baby products)?
	Daily
	Two or more times weekly
	Weekly
	Fortnightly
	☐ Monthly Every 2-3 months
	6 monthly
	Yearly
	Never
4.	At what time of day to you normally use pharmacy services?
	Weekdays 6am-9am
	Weekdays 9am-6pm
	Weekdays 6pm-11pm
	Saturday
	Sunday
5.	Other than normal opening hours (Weekdays 9am-6pm), what other times would you find it most useful to visit a pharmacy? (Please select all that apply)
	Weekdays 6am-9am
	Weekdays 6pm-11pm
	Saturday 9am-1pm
	Saturday 1pm-6pm
	Saturday 6pm-11pm
	Sunday before 10am
	Sunday 10am-2pm
	Sunday after 4pm

Please rate now strongly you	agree o	ı disagree		iollowing	stateme	ents.
	Strongly		Neither agree nor		Strongly	Not
I can easily find an open pharmacy	agree	Agree	disagree	Disagree	disagree	applicable
when needed		Ш		Ш		Ш
I can easily find a pharmacy near where I want it						
I can easily find a pharmacy open in the evening (i.e after 6pm)						
I can easily find a pharmacy open at						
weekends I can easily find a pharmacy open at						
lunchtime						
ut your regular pharmacy	,					
at your regular priarmae;	,					
Which local authority area is	the phar	macy loca	ated in th	at you us	e most re	egularly?
Shropshire						
Telford & Wrekin						
Somewhere else						
Which pharmacy do you use mo	ost regula	arly?				
Albrighton Medical Practice	_					
Alveley Medical Practice						
Asda Pharmacy, Shrewsbury	15 :					egularly?
Bicton Heath Pharmacy, Welshp						
Bishops Castle Pharmacy, Churc Boots, Bridgnorth	ii Sireet					
Boots, Hereford Road Shrewsbu	ry					
Boots, Ludlow	•					
Boots, Market Drayton						
Boots, Mytton Oak Road Shrews	bury					
Boots, Oswestry						
Boots, Pride Hill Shrewsbury Boots, Shifnal						
Boots, Whitchurch						
Bridgnorth Pharmacy,						
Brown Clee Medical Practice						
Cambrian Pharmacy, Oswestry						
Churchmere Medical Group (Elle		dical Centre	)			
Cleobury Pharmacy, Cleaobury N	Vortimer					
Clive Medical Practice Conway Pharmacy, Shrewsbury						
Craven Arms Medical Practice						
Day Lewis Pharmacy, English W	alls Oswes	stry				
Day Lewis Pharmacy, Gobowen		-				
Day Lewis Pharmacy, Oswald Ro	oad Oswes	stry				
Ellesmere Pharmacy						
Green End Pharmacy, Whitchurd	ch					
Highley Pharmacy Hodnet Medical Centre						
Knockin Medical Centre						
Lunts Pharmacy, Barker Street S	Shrewsbun	/				
Lunts Pharmacy, Craven Arms		•				
Lunts Pharmacy, Hereford Road	Shrewsbu	ıry				
Lunts Pharmacy, Ludlow						
MSN & Lunts Pharmacy, Church						
MSN & Lunts Pharmacy, Shrews	-	_				
Much Wenlock & Cressage Medi	icai Practio	e				
Peak Pharmacy, Bridgnorth  Peak Pharmacy, Market Drayton						
Plas Ffynnon Medical Centre, Os						
Pontesbury & Worthen Medical F	-					
Pontesbury Pharmacy						
Prescott Surgery, Baschurch						
Padhrook Green Pharmacy						

	Rhodes TC Chemist, Albrighton
	Rowlands Pharmacy, Bayston Hill
	Rowlands Pharmacy, Broseley
	Rowlands Pharmacy, Shrewsbury
	Rowlands Pharmacy, Wem
	Rowlands Pharmacy, Wem & Prees Medical Practice
	Rowlands Pharmacy, Whitchurch
	Shawbury Medical Practice
	St Martins Pharmacy
	Tesco Pharmacy, Shrewsbury
	The Beeches Medical Practice Dorrington Surgery
	The Meadows Medical Practice, Craven Arms
	Well, Shrewsbury
	Wenlock Pharmacy, Much Wenlock
	Westbury Medical Practice
9.	Which pharmacy do you use most regularly?
	Anstice Pharmacy, Madeley
	Aqueduct Pharmacy
	Asda Pharmacy, Donnington Wood
	Asda Pharmacy, Telford Town Centre
	Boots, Newport
	Boots, Shawbirch
	Boots, Telford Forge Retail Park
	Boots, Telford Town Centre
	Boots, Wellington
	Chapel Lane Pharmacy, Wellington
	Donnington Pharmacy
	Hadley Pharmacy
	High Street Pharmacy, Newport
	Hollinswood Pharmacy
	☐ Ironbridge Pharmacy
	Jhoots Pharmacy, Oakengates
	Kitchings Chemist, Oakengates
	Lawley Pharmacy
	Leegomery Chemist
	Lloyds Pharmacy, Dawley
	Malinslee Pharmacy
	Morrisons Pharmacy, Wellington
	Muxton Pharmacy
	Nucare, Hortonwood
	Oakengates Pharmacy
	Parade Pharmacy, Donnington
	Peak Pharmacy, Newport
	Priorslee Pharmacy
	Rowlands Pharmacy, Stirchley
	Rowlands Pharmacy, Sutton Hill
	Shire Pharmacy, Trench
	Superdrug Pharmacy, Telford Town Centre
	Tesco Instore Pharmacy, Wrekin Retail Park
	Top Pharmacy, Hadley
	Wellington Pharmacy
	Wellington Road Surgery, Newport
	Woodside Pharmacy

10.	Why do you normally use this pharmacy? (please select all that apply)									
	It is near my home									
	It is near my work									
	It is near or at my local GP surgery									
	It is easy to get to whilst shopping									
	It has on-site parking									
	It has the services I require									
	It stocks the medicines that I need									
	It has opening hours that suit me									
	It operates the Electronic Prescription Service									
	It is near my child's school									
	I can get there using public transport									
11.	How do you normally travel to your regular pharmacy?									
	Car Public Transport									
	Cycle									
	☐ Taxi									
	☐ Walk									
	I don't go to my regular pharm	acv as th	ev deliver	to me						
	reality regular priarity	acy as ar	cy donvoi	to me						
12.	Thinking about your regular pharmacy, how strongly do you agree or disagree with the following statements.									
				Neither						
		Strongly agree	Agree	agree nor disagree	Disagree	Strongly disagree	Not applicable			
	My pharmacy is customer friendly					$\Box$				
	and polite  My pharmacy is easy to get to by							-		
	public transport or car									
	I find my pharmacist helpful									
	My pharmacy has a confidential and private area									
	My pharmacist explains information clearly so that I can understand									
	My pharmacy makes changes to help people with disabilities e.g. large print labels									
	My pharmacy usually has the									
	medicines I need in stock									
13.	Does your regular pharmacy	have a	ny of the	e followin	a?					
	Does your regular priarriacy	navec	Yes	o ionomi	No No		Not sure			
	Seating area		Tes		No		Not sure			
	Electronic prescription service									
	Wheelchair accessibility									
	Stocks of living aids to support		<u> </u>							
	independent living									
	Hearing aid loop									
	Prescription delivery service									
	Information and advice on medicines	;	$\overline{\sqcap}$				$\overline{\Box}$			
	Information and advice on healthy									
	lifestyles (eg diet and nutrition,									
	physical activity)									

Thinking about your regular pharmacy: Which of the following services are aware of, have used or would like to see available?				es are you
•	I am aware of	I have used	I am not aware of	I would like to se available
Minor Ailments Service				
Vaccinations				
NHS Healthchecks				
NHS Screening Services				
Smoking Cessation Services				
Emergency hormonal contraception				
Pregnancy testing				
Blood pressure monitoring				
Cholesterol testing				
NHS repeat prescription services				
Terminal illness support				
Alcohol use awareness and treatment services				
Incontinence support		П	П	
Weight management services				
Mental health support	$\overline{\Box}$			
NHS Phlebotomy Services				
Anti-coagulation monitoring				
Medicines Use Reviews				
New Medicines Service				
Disposal of unwanted medicines				
Needle and syringe exchange scheme				
Supervised consumption of medicines				
Language Access Services				
Substance misuse service (methadone supply, needle provision)				
Support of free healthy start vitamins				
Advice on healthy lifestyles				
Condom distribution (free supply to teenagers)				
Are there any other services	available fro	om your pharm	nacy not listed	that you use'
Are there any other services provide?	not listed th	at you would li	ike to see your	pharmacy
Have you been directed to a regular pharmacy?	different pha	armacy for a se	ervice not provi	ided by your
∐ No				

### 18. Do you have a pharmacy where your prescription is directly sent to by your GP? No Don't know 19. Have you ever used a Prescription Delivery Service? (Prescribed medicines delivered from your pharmacy to your door). Yes No Not sure 20. Why did you use a prescription delivery service? I was unable to leave home I could not get to a pharmacy during their opening times I don't have a pharmacy near me Other 21. How much do you agree or disagree that the Prescription Delivery Service is important to you? Strongly Neither agree Strongly Agree nor disagree Disagree disagree agree How much do you agree or disagree that the Prescription D... Pharmacy First Have you ever used Pharmacy First? This is a service that allows patients to get 22. advice and/or treatment from a community pharmacist for a minor illness or seven common health conditions (Sinusitis; sore throat; ear infection; infected insect bite; Impetigo; Shingles; uncomplicated urinary tract infection) and the emergency supply of a regular prescription medicine Yes No 23. What did you use Pharmacy First for? (please select all that apply) Sinusitis Sore throat Ear infection Infected insect bite Impetigo Singles Uncomplicated urinary tract infection Emergency supply of a regular prescription medicine Minor illness

Prescriptions

24.	How did you access the service? (please select all that apply)
	Walk-in
	NHS 111
	Out of hours service
	999 services
	☐ GP
	Other urgent and emergency care provider
25.	What was the outcome of the Pharmacy First consultation?
	Advice only (no medication)
	A prescription only medication
	An over-the-counter medication
	Referral to a pharmacy service
	Urgent referral to GP/out-of-hours service
	Other
	Outer
26.	Are you aware that pharmacies can help to direct you to other services for health?
	e.g. patient support groups like Diabetes UK
	Yes
	□ No
	Not sure
27.	How have you found out about the services offered by your pharmacy? (please select all that apply)
	At the pharmacy
	Website (NHS Choices)
	Website (other)
	Poster
	Radio
	Screen advertising (TV, or moving screens in GP surgeries or post offices)
	GP or practice staff
	Leaflets
	Word of mouth
	Local Press
	Mail drop

is?			,	in the da	noc or a	pharm
Which of these statements describ how useful you think t	Very useful	Fairly useful	Neither useful nor not useful	Not very useful	Not at all useful	Don't k
Why do you think this? <i>left</i>	characters	s remai	nıng			
Overall, how satisfied are y	ou with pha	rmacy	senvices ir	Shronel	nire Telfa	ord and
Wrekin?	ou with pha	ппасу :	SCI VICES II	Sillopsi	iiie, ieiic	ли апс
			Nei satisfi	ed nor		Very
Overall, how satisfied are you with	Very satisfied	l Satisf	ied dissat	isfied Dis	satisfied	dissatisf
pharmacy services in				_		
Why do you think this? Ieft	characters	s remai	ning			
Are there any further comm	nents vou v	ould like	e to make	about vo	ur local r	harm
services? <i>left characters</i>		ould lik	c to make	about yo	our local p	Juan

### About you

The information you provide will be used for statistical analysis related to this questionnaire. You can find out more about how we hold and process data by visiting www.telford.gov.uk/terms and www.shropshire.gov.uk/privacy (links open in a new window).

33.	What is your postcode?
34.	Are you?  Male Female Non-binary Rather not say
35.	What was your age on your last birthday?  Under 16  16-17  18-24  25-34  35-44  45-54  55-64  65-74  75-84  85+  Rather not say
36.	Do you have any long-standing illness, health problem or disability?  Yes Rather not say
37.	Are you caring for someone who has a long-standing illness or disability that limits their daily activities?  Yes No Rather not say
38.	Do you have an armed forces connection e.g. currently serving, a reservist, veteran or dependent of a current or former member of the UK armed forces?  Yes No Rather not say
39.	Have you been under the care of a local authority for more than 24 hours before your 18th birthday?  Yes  Rather not say

40.	What is your ethnicity?				
	White: English/Welsh/Scottish/Northern Irish/British				
	White: Irish				
	White: Gypsy or Traveller				
	White: Polish				
	White: Any other				
	Mixed/multiple ethnic group: White and Black Caribbean				
	Mixed/multiple ethnic group: White and Black African				
	Mixed/multiple ethnic group: White and Asian				
	Mixed/multiple ethnic group: Any other				
	Asian/Asian British: Indian				
	Asian/Asian British: Pakistani				
	Asian/Asian British: Bangladeshi				
	Asian/Asian British: Any other				
	Black/African/Caribbean/Black British: African				
	Black/African/Caribbean/Black British: Caribbean				
	Black/African/Caribbean/Black British: Any other				
	Other ethnic group: Arab				
	Other ethnic group: Chinese				
	Other ethnic group: Any other				
	Rather not say				

## Thank you

Thank you for completing the survey. Please select the 'submit' button below to forward your response to us.

## Appendix 5: Community Pharmacy Contractor Survey

## Shropshire, Telford and Wrekin Pharmaceutical Needs Assessment Contractor Questionnaire

#### Introduction

The Pharmaceutical Needs Assessment (PNA) is a crucial part of the market entry system, and supports commissioning decisions based on patient needs, it is important that Health and Wellbeing Boards (HWBs) prepare PNAs to national comparable standards.

Shropshire Council and Telford & Wrekin Council have been working with NHS colleagues to start the process of publishing the next PNAs; part of this work is the Contractor Survey, which identifies many services provided by contractors, facilities etc along with what sort of services contractors might be willing to provide in the future, should they be commissioned.

We would apprieciate it if you could take the time to complete the following survey as the fullest picture of what is currently being provided at pharmacies will help generate a complete, accurate and effective PNA.

Contractor Code
Contractor Name
Contractor trading name (if different from above)
Address of contractor pharmacy
Name of person completing this questionnaire
Contact email
Contact telephone number

1.	Telford & Wrekin Council will share your email information with the Shropshire, Telford and Wrekin ICB and Community Pharmacy, Shropshire. Are you happy for us to do so?				
	Yes No				
Acc	ess				
2.	Is parking available close to the pharma Yes No	acy?			
3.	Is this parking free? Yes No				
4.	Does the pharmacy have wheelchair ac	cess to the following?	No		
	The entrance (unaided)				
	Consultation room				
	All areas				
5.	Does the pharmacy have the following?	Yes	No		
	Disabled foliet				
	Automatic door				
	Hearing loop				
	The facility to produce large print dispensing labels and patient information leaflets				
	Dedicated disabled parking				
	uages and communication				
6.	Please indicate which of the following la your pharmacy team are able to speak f patients. (select all that apply)				
	Polish				
	Romanian				
	Bulgarian				
	Panjabi				
	Urdu				
	Akan				
	Lithuanian				
	Other				

7.	Has the pharmacy adopted the NHS Accessible Information Standard?				
	Yes				
	∐ No				
8.	Is the pharmacy intending to adopt the NI	HS Accessible Information	Standard?		
	Yes				
	□ No				
Infor	mation Technology				
9.	Does the pharmacy have the following?		No.		
	Online consultation	Yes	No		
	Video consultation				
	Text message to patient that prescription is ready				
Cons	sultation facilities				
10.	Is there a consultation room (that is clearly designated as a room for confidential conversations, distinct from the general public areas of the pharmacy premises; and is a room where both the person receiving the service and the person providing it can be seated together and communicate confidentially). (select all that apply)				
	Yes - (including wheelchair access)	ournideridally). (Select all t	пас арргу)		
	Yes - (without wheelchair access)				
	Yes - planning to increase				
	No - distance selling pharmacy				
11.	Is the consultation area a closed room?				
	Yes				
	∐ No				
12.	During consultations, are there hand-wash	ning facilities?			
	Yes - in the consultation room				
	Yes - close to the consultation room				
	∐ No				
13.	Do patients attending for consultations have	ve access to toilet facilities'	?		
-	Yes				
	□ No				

## Services

14.	Which of the following appliances does the pharmacy dispense? (select all that apply)				
	Stoma appliances				
	Incontinence appliances				
	Dressings				
	Made to measure hosiery - Do you unde	ertake measuring and	fitting?		
	Made to measure trusses - Do you unde	ertake measuring and	fitting?		
	None				
	Other				
15.	- Do you undertake measuring and fittir	ng?			
	☐ Yes				
	□ No				
	NO				
16.	- Do you undertake measuring and fittir	ng?			
	☐ Yes				
	□ No				
Adv:	anced services				
17.	Does the pharmacy provide the following	ng services?			
	Vec	Intending to be the next 12 r	gin within No - not intending to		
	Appliance use review	lile next 121	nonths provide		
	Hypertension case-finding service		— H		
	Lateral flow device service		——————————————————————————————————————		
	New medicine service	H	— H		
	Pharmacy contraception service	<u>_</u>			
	Pharmacy First service	<u></u>			
	Smoking cessation service	H	H		
	Stoma appliance customisation	H	H		

18. Which of the following other services does the pharmacy provide, or is wi provide?				willing to			
	Aiready provide this service	intending to provide	Willing to provide if commissioned	Not willing to provide			
Anti-coagulant monitoring service							
Anti-viral distribution service							
Care home service							
Chiyamydia testing and treatment service							
Condom distribution scheme							
Distribution of naloxone							
Early start vitamins							
Emergency contraception service							
Gluten free food supply service (le. Not via FP10)							
Home delivery service (not appliances)							
Independent prescribing service							
Language access service							
Medication review service							
Medicines assessment and compilance support service							
Medicines optimisation service							
Minor aliment scheme							
Needs and syringe exchange service	œ 🔲						
NHS health check							
Not dispensed scheme							
Obesity management							
On demand availability of specialist drugs service							
Out of hours service							
Phiebotomy service							
Prescriber support service							
Schools service							
Sharps disposal service							
Supervised administration service							
Vascular risk assessment service							
In which clinical area do you	In which clinical area do you provide an independent prescribing service?						
In which clinical area would	l you provide a	n independer	nt prescribing se	ervice?			

19.	Which of the following disease specific medicines services does the pharmacy provide, or is willing to provide?				
		Already provide this service	intending to provide	Willing to provide If commissioned	Not willing to provide
	Allergles				
	Alzheimers/dementia				
	Asthma				
	CHD				
	COPD				
	Depresssion				
	Diabetes type 1				
	Diabetes type 2				
	Epilepsy				
	Heart fallure				
	Hypertension				
	Palliative care service				
	Parkinson's disease				
20.	Which of the following scree provide?	Already provide	intending to	Willing to provide	Not willing to
	Alcohol				
	Atrial fibrillation				
	Cholesterol				
	Diabetes				
	Gonorrhoea				
	H. pylori				
	HbA1C		一百		一百
	Hepatitis		一百	一百	
	HIV	Π			
21.	Which of the following vacci to provide?	nation services  Already provide this service	does the ph intending to provide	narmacy provide Willing to provide If commissioned	e, or is willing  Not willing to provide
	Childhood vaccinations				
	Covid-19 vaccinations				
	Hepatitis (at risk workers or patient vaccination)				
	Routine vaccinations				
	Seasonal Influenza vaccination service				
	Travel vaccinations				

22.	Does the pharmacy provide any of the following non-commissioned services?				
		Yes	No		
	Collection of prescriptions from GP practices – with charge				
	Collection of prescription from GP practices – free of charge on request			_	
	We deliver dispensed medicines to	П	П		
	all patients  Delivery of dispensed medicines – selected patient groups			_	
	Delivery of dispensed medicines – selected areas			_	
	Delivery of dispensed medicines – free of charge on request			_	
	Delivery of dispensed medicines – with charge		П	_	
	Monitored dosage systems			_	
				7	
				1	
				_	
23.	How are monitored dosage systems pro	ovided?			
	Provided for everyone free of charge				
	Provide for everyone with charge				
	Provide for those in need only free of char	_			
	Provide for those in need only with charge	•			
24.	Do you offer prescription ordering?				
	Yes				
	No				
25.	How is this done? (select all that apply)				
	via telephone				
	via email				
	via front desk				
26.	Do you support patients in the use of ap	ops for prescription ordering	2		
	Yes	, , , , , , , , , , , , , , , , , , ,	,-		
	□ No				
27	Facultish ann(a)2				
27.	For which app(s)?				
	NHS app				
	In house app				
28.	Is there a particular need for a locally co	mmissioned service in your	area?		
	Yes				
	□ No				

Thank you

Thank you for completing the survey. Please select the 'submit' button below to forward your response to us.

# Appendix 6: Pharmacy opening hours

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
ASDA PHARMACY OLD POTTS WAY SHREWSBURY SHROPSHIRE SY3 7ET	09:00-20:00	09:00-20:00	09:00-20:00	09:00-20:00	09:00-20:00	09:00-20:00	10:00-16:00	72.00
BICTON HEATH PHARMACY BICTON HEATH SHOPPING CTR WELSHPOOL ROAD SHREWSBURY SHROPSHIRE SY3 5AD	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00	CLOSED	44.00
BISHOPS CASTLE PHARMACY THE PHARMACY CHURCH STREET BISHOPS CASTLE SHROPSHIRE SY9 5AE	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-13:00	CLOSED	46.50
BOOTS 7-9 PRIDE HILL SHREWSBURY SHROPSHIRE SY1 1DD	08:30-17:30	08:30-17:30	08:30-17:30	08:30-17:30	08:30-17:30	08:30-17:30	10:30-16:30	60.00
BOOTS 5-7 CHURCH STREET OSWESTRY SHROPSHIRE SY11 2SU	09:30-18:00	09:30-18:00	09:30-18:00	09:30-18:00	09:30-18:00	09:00-17:00	10:00-15:00	55.50
BOOTS 10-14 WATERGATE STREET WHITCHURCH SHROPSHIRE SY13 1DW	09:00-17:00	09:00-17:00	09:00-17:00	09:00-17:00	09:00-17:00	09:00-17:30	CLOSED	48.50
BOOTS 37 MYTTON OAK ROAD SHREWSBURY SHROPSHIRE SY3 8UG	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	08:30-18:00	09:00-13:00	CLOSED	49.50

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
BOOTS MEOLE BRACE RETAIL PARK HEREFORD ROAD SHREWSBURY SHROPSHIRE SY3 9NB	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-16:30	10:00-16:00	56.00
BOOTS 34 BULL RING LUDLOW SHROPSHIRE SY8 1AA	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	CLOSED	51.00
BOOTS 7 CHEAPSIDE SHIFNAL SHROPSHIRE TF11 8BN	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-16:30	CLOSED	52.50
BOOTS 48-50 CHESHIRE STREET MARKET DRAYTON SHROPSHIRE TF9 1PR	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	10:00-17:00	CLOSED	49.50
BOOTS 30-31 HIGH STREET BRIDGNORTH SHROPSHIRE WV16 4DB	09:00-14:00, 14:30-17:30	09:00-14:00, 14:30-17:30	09:00-14:00, 14:30-17:30	09:00-14:00, 14:30-17:30	09:00-14:00, 14:30-17:30	09:00-14:00, 14:30-17:30	CLOSED	48.00
BRIDGNORTH PHARMACY 2 MILL STREET BRIDGNORTH SHROPSHIRE WV15 5AL	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED	49.00
CAMBRIAN PHARMACY CAMBRIAN MEDICAL CENTRE THOMAS SAVIN ROAD OSWESTRY SHROPSHIRE SY11 1GA	07:00-23:00	07:00-23:00	07:00-23:00	07:00-23:00	07:00-23:00	08:00-18:00	08:00-18:00	100.00

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
CLEOBURY PHARMACY CLEOBURY PHARMACY OFF VAUGHAN ROAD CLEOBURY MORTIMER WORCESTERSHIRE DY14 8DB	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	09:00-13:00	CLOSED	51.50
CONWAY PHARMACY 238 MONKMOOR ROAD TELFORD EST SHOPPING CTRE SHREWSBURY SHROPSHIRE SY2 5SR	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED	49.00
DAY LEWIS PHARMACY OSWALD ROAD OSWESTRY SHROPSHIRE SY11 1RD	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-12:00	CLOSED	51.00
DAY LEWIS PHARMACY 14 ENGLISH WALLS OSWESTRY SHROPSHIRE SY11 2PA	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-12:00	CLOSED	45.50
DAY LEWIS PHARMACY THE FORMER TICKET OFFICE THE CROSS GOBOWEN SHROPSHIRE SY11 3JS	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	CLOSED	CLOSED	40.00
ELLESMERE PHARMACY 5 CROSS STREET ELLESMERE SHROPSHIRE SY12 0AW	09:00-13:00, 13:20-17:30	09:00-13:00, 13:20-17:30	09:00-13:00, 13:20-17:30	09:00-13:00, 13:20-17:30	09:00-13:00, 13:20-17:30	09:00-12:00	CLOSED	43.83
GREEN END PHARMACY 11-13 GREEN END WHITCHURCH SHROPSHIRE SY13 1AD	08:45-17:30	08:45-17:30	08:45-17:30	08:45-17:30	08:45-17:30	08:45-17:00	CLOSED	52.00

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
HIGHLEY PHARMACY BEULAH HOUSE HIGH STREET HIGHLEY SHROPSHIRE WV16 6LP	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED	49.00
LUNTS PHARMACIES 1-3 HEREFORD ROAD SHREWSBURY SHROPSHIRE SY3 7QT	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-12:00	CLOSED	48.00
LUNTS PHARMACY THE TANNERY BARKER STREET SHREWSBURY SY1 1QJ	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED	49.00
LUNTS PHARMACY DROVERS' HOUSE AUCTION YARD CRAVEN ARMS SHROPSHIRE SY7 9BZ	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-13:00	CLOSED	46.50
LUNTS PHARMACY 116-119 LOWER GALDERFORD LUDLOW SHROPSHIRE SY8 1RU	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-17:30	CLOSED	56.00
MSN & LUNTS PHARMACY SEVERN FIELDS HEALTH CTR SUNDORNE ROAD SHREWSBURY SHROPSHIRE SY1 4RQ	09:00- 13:00,13:20- 18:00	09:00- 13:00,13:20- 18:00	09:00- 13:00,13:20- 18:00	09:00- 13:00,13:20- 18:00	09:00- 13:00,13:20- 18:00	09:00-12:00	CLOSED	46.33
MSN & LUNTS PHARMACY 40 SANDFORD AVENUE CHURCH STRETTON SHROPSHIRE SY6 6BH	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-13:00	CLOSED	46.50

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
PEAK PHARMACY NORTHGATE HEALTH CENTRE NORTHGATE BRIDGNORTH SHROPSHIRE WV16 4EN	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED	49.00
PEAK PHARMACY MEDICAL CENTRE MAER LANE MARKET DRAYTON SHROPSHIRE TF9 3AL	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:45-13:00	CLOSED	51.75
PONTESBURY PHARMACY MAIN ROAD PONTESBURY SHREWSBURY SY5 0RR	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-17:30	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00, 14:00-18:00	09:00-13:00	CLOSED	43.50
RADBROOK GREEN PHARMACY BANK FARM ROAD RADBROOK SHREWSBURY SY3 6DU	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED	49.00
RHODES TC CHEMIST 77 HIGH STREET ALBRIGHTON WOLVERHAMPTON WV7 3JA	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	08:30-18:00	09:00-16:00	CLOSED	52.50
ROWLANDS PHARMACY 11 HIGH STREET WHITCHURCH SHROPSHIRE SY13 1AX	09:00-13:00, 13:20-17:30	09:00-13:00, 13:20-17:30	09:00-13:00, 13:20-17:30	09:00-13:00, 13:20-17:30	09:00-13:00, 13:20-17:30	09:00-12:00	CLOSED	43.83
ROWLANDS PHARMACY MARSDEN MEDICAL PRACTICE 25 SUTTON ROAD SHREWSBURY SHROPSHIRE SY2 6DL	09:00-13:00, 13:20-17:30	09:00-13:00, 13:20-17:30	09:00-13:00, 13:20-17:30	09:00- 13:00,13:20- 17:30	09:00-13:00, 13:20-17:30	09:00-12:00	CLOSED	43.83

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
ROWLANDS PHARMACY 7 LANSDOWNE ROAD BAYSTON HILL SHREWSBURY SY3 0HT	09:00-13:00, 14:00-17:30	09:00-13:00, 14:00-17:30	09:00-13:00, 14:00-17:30	09:00-13:00, 14:00-17:30	09:00-13:00, 14:00-17:30	09:00-12:00	CLOSED	40.50
ROWLANDS PHARMACY WEM AND PREES MED PRAC NEW STREET WEM SHROPSHIRE SY4 5AF	09:00-13:00, 13:20-17:30	09:00-13:00, 13:20-17:30	09:00-13:00, 13:20-17:30	09:00-13:00, 13:20-17:30	09:00-13:00, 13:20-17:30	09:00-12:00	CLOSED	43.83
ROWLANDS PHARMACY UNIT 1 MORRIS CTRL SHOP PARADE WEM SHROPSHIRE SY4 5NY	09:00-17:00	09:00-12:40, 13:00-17:30	09:00-12:40, 13:00-17:30	09:00-12:40, 13:00-17:30	09:00-12:40, 13:00-17:30	09:00-12:00	CLOSED	43.67
ROWLANDS PHARMACY 80 HIGH STREET BROSELEY SHROPSHIRE TF12 5ET	09:00-13:00, 14:00-17:30	09:00-13:00, 14:00-17:30	09:00-13:00, 14:00-17:30	09:00-13:00, 14:00-17:30	09:00-13:00, 14:00-17:30	09:00-12:00	CLOSED	40.50
ST MARTINS PHARMACY STANS SUPERSTORE OVERTON RD, ST MARTINS OSWESTRY SHROPSHIRE SY11 3AY	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-11:30	CLOSED	45.00
TESCO PHARMACY CATTLE MARKET BATTLEFIELD ROAD SHREWSBURY SY1 4HA	09:00-21:00	09:00-21:00	09:00-21:00	09:00-21:00	09:00-21:00	09:00-21:00	10:00-16:00	78.00
WELL PHARMACY 101 MOUNT PLEASANT ROAD SHREWSBURY SHROPSHIRE SY1 3EL	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	08:30-18:00	09:00-13:00	CLOSED	49.50

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
WENLOCK PHARMACY 14 HIGH STREET MUCH WENLOCK SHROPSHIRE TF13 6AA	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED	49.00

Pharmacies within 5km of Shropshire in other areas in England

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
ADMASTON PHARMACY ONLINE UNIT 4 SUTTON ROAD ADMASTON TELFORD SHROPSHIRE TF5 0AY	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	CLOSED	CLOSED	40.0
ANSTICE PHARMACY 7 ANSTICE SQUARE MADELEY TELFORD SHROPSHIRE TF7 5BD	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-17:00	CLOSED	53.0
AQUEDUCT PHARMACY MAJESTIC WAY AQUEDUCT TELFORD SHROPSHIRE TF4 3RB	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED	49.0
ASDA PHARMACY MALINSGATE TELFORD SHROPSHIRE TF3 4HZ	09:00- 12:30,13:00- 16:30,17:00- 21:00	09:00- 12:30,13:00- 16:30,17:00- 21:00	09:00- 12:30,13:00- 16:30,17:00- 21:00	09:00- 12:30,13:00- 16:30,17:00- 21:00	09:00- 12:30,13:00- 16:30,17:00- 21:00	09:00- 12:30,13:00- 16:30,17:00- 21:00	10:00-16:00	72.0
ASDA PHARMACY ST GEORGES ROAD DONNINGTON WOOD TELFORD SHROPSHIRE TF2 7RX	09:00- 12:30,13:00- 16:30,17:00- 21:00	09:00- 12:30,13:00- 16:30,17:00- 21:00	09:00- 12:30,13:00- 16:30,17:00- 21:00	09:00- 12:30,13:00- 16:30,17:00- 21:00	09:00- 12:30,13:00- 16:30,17:00- 21:00	09:00- 12:30,13:00- 16:30,17:00- 21:00	11:00-17:00	72.0

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
BILBROOK PHARMACY  8 BILBROOK ROAD  BILBROOK  CODSALL  WOLVERHAMPTON  WV8 1EZ	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	CLOSED	CLOSED	45.0
BILLS PHARMACY 29 HIGH STREET KINVER STOURBRIDGE WEST MIDLANDS DY7 6HF	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00-13:00	CLOSED	44.0
BIRCHES BRIDGE PHARMACY 86 WOLVERHAMPTON ROAD CODSALL WOLVERHAMPTON WV8 1PE	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:00	CLOSED	49.0
BOOTS 2-3 ACORN WAY SHAWBIRCH TELFORD SHROPSHIRE TF5 0LW	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-17:00	CLOSED	53.0
BOOTS 21-25 NEW STREET WELLINGTON TELFORD SHROPSHIRE TF1 1LU	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	CLOSED	51.0
BOOTS UNITS 14A & B TELFORD FORGE RETAIL PARK TELFORD SHROPSHIRE TF3 4AG	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-15:00	CLOSED	48.5
BOOTS 4-10 SHERWOOD STREET TELFORD TOWN CENTRE TELFORD SHROPSHIRE TF3 4AU	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	10:30-16:30	57.0

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
BOOTS 52 HIGH STREET NEWPORT SHROPSHIRE TF10 7AQ	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-17:30	CLOSED	53.5
BOOTS 5&6 GIGGETTY LANE WOMBOURNE WOLVERHAMPTON WV5 0AW	09:00- 12:00,13:00- 18:30	09:00- 12:00,13:00- 18:30	09:00- 12:00,13:00- 17:30	09:00- 12:00,13:00- 18:30	09:00- 12:00,13:00- 18:30	09:00- 12:00,13:00- 17:00	CLOSED	48.5
BOOTS HIGH STREET WOMBOURNE WOLVERHAMPTON WV5 9DP	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 17:30	CLOSED	47.5
BREWOOD PHARMACY BROADGATE HOUSE 6 MARKET PLACE BREWOOD STAFFORD ST19 9BS	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-12:00	CLOSED	48.0
CHAPEL LANE PHARMACY CHAPEL LANE WELLINGTON TELFORD SHROPSHIRE TF1 1SS	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	CLOSED	CLOSED	45.0
CODSALL PHARMACY IRVINE HOUSE 9-11 CHURCH ROAD CODSALL WOLVERHAMPTON WV8 1EA	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	09:00-17:30	CLOSED	58.5
DONNINGTON PHARMACY DONNINGTON MED PRACTICE WREKIN DRIVE DONNINGTON TELFORD SHROPSHIRE TF2 8EA	08:00-21:00	08:00-21:00	08:00-21:00	08:00-21:00	08:00-21:00	08:00-21:00	09:00-20:00	89.0

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
HADLEY PHARMACY UNIT 6 THE STIRLING CENTRE HIGH STREET TELFORD SHROPSHIRE TF1 5GQ	09:00- 13:00,13:20- 17:30	09:00- 13:00,13:20- 17:30	09:00- 13:00,13:20- 17:30	09:00- 13:00,13:20- 17:30	09:00- 13:00,13:20- 17:30	09:00-12:00	CLOSED	43.8
HEALTHPOINT PHARMACY 66 LOAD STREET BEWDLEY WORCESTERSHIRE DY12 2AW	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-17:30	CLOSED	53.5
HOLLINSWOOD PHARMACY NEW UNIT 4 DOWNEMEAD HOLLINSWOOD TELFORD SHROPSHIRE TF3 2EW	08:30- 13:00,13:20- 18:00	08:30- 13:00,13:20- 18:00	08:30- 13:00,13:20- 18:00	08:30- 13:00,13:20- 18:00	08:30- 13:00,13:20- 18:00	09:00-12:00	CLOSED	48.8
I-MEDS PHARMACY KARTAR FARM NEW ROAD SWINDON STAFFORDSHIRE DY3 4PP	09:00-17:00	09:00-17:00	09:00-17:00	09:00-17:00	09:00-17:00	CLOSED	CLOSED	40.0
JHOOTS PHARMACY 32 MARKET STREET OAKENGATES TELFORD SHROPSHIRE TF2 6ED	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-13:15	CLOSED	49.3
KITCHINGS CHEMIST 23-25 LIMES WALK OAKENGATES TELFORD SHROPSHIRE TF2 6EP	08:30-17:30	08:30-17:30	08:30-17:30	08:30-17:30	08:30-17:30	08:30-14:30	CLOSED	51.0
LAWLEY PHARMACY FARRIERS GREEN LAWLEY TELFORD TF4 2LL	08:45-20:00	08:45-20:00	08:45-19:30	08:45-19:30	08:45-20:00	09:30-12:30	CLOSED	58.3

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
LEABANK HOUSE PHARMACY LEABANK HOUSE THE COBBLES WHEATON ASTON STAFFORD ST19 9NB	08:30-18:30	08:30-16:00	08:30-16:00	08:30-16:00	08:30-16:00	CLOSED	CLOSED	40.0
LEEGOMERY CHEMIST LEEGOMERY LOCAL CENTRE LEEGOMERY TELFORD SHROPSHIRE TF1 6XQ	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	CLOSED	CLOSED	40.0
LLOYDSPHARMACY DAWLEY MEDICAL CENTRE KING STREET DAWLEY TELFORD SHROPSHIRE TF4 2AA	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-13:00	CLOSED	52.0
LOGGERHEADS PHARMACY 9 ECCLESHALL ROAD LOGGERHEADS MARKET DRAYTON SHROPSHIRE TF9 4NX	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	CLOSED	CLOSED	45.0
MALINSLEE PHARMACY MALINSLEE MEDICAL CENTRE CHURCH ROAD TELFORD SHROPSHIRE TF3 2JZ	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	CLOSED	CLOSED	40.0
MEDKING PHARMACY UNIT 2 OAKTREE HOUSE OAKTREE RISE CODSALL WV8 1DT	09:00- 13:00,13:30- 17:30	09:00- 13:00,13:30- 17:30	09:00- 13:00,13:30- 17:30	09:00- 13:00,13:30- 17:30	09:00- 13:00,13:30- 17:30	CLOSED	CLOSED	40.0
MILLERS PHARMACY NEWCASTLE ROAD MIDDLE MADELEY CREWE CW3 9JP	09:00- 13:00,14:00- 18:00	09:00-18:00	09:00-18:00	09:00-13:00	09:00-18:00	09:00-13:00	CLOSED	43.0

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
MORRISONS PHARMACY SPRINGHILL WELLINGTON TELFORD SHROPSHIRE TF1 1RP	09:00-19:00	09:00-19:00	09:00-19:00	09:00-19:00	09:00-19:00	09:00-17:00	10:00-16:00	64.0
MUXTON PHARMACY 9C FIELDHOUSE DRIVE MUXTON TELFORD SHROPSHIRE TF2 8JQ	08:45-18:00	08:45-18:00	08:45-18:00	08:45-18:00	08:45- 12:45,13:45- 18:00	09:00-13:00	CLOSED	49.3
NUCARE UNITS C5 AND C6 HORTONWOOD 10 TELFORD SHROPSHIRE TF1 7ES	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	CLOSED	CLOSED	42.5
OAKENGATES PHARMACY THE SURGERY LION STREET OAKENGATES TELFORD SHROPSHIRE TF2 6AQ	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	CLOSED	CLOSED	47.5
PARADE PHARMACY 6 THE PARADE DONNINGTON TELFORD SHROPSHIRE TF2 8EB	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-14:00	CLOSED	47.5
PATTINGHAM PHARMACY  1 MEADOW VIEW  HIGH STREET  PATTINGHAMWOLVERHAMPTON  WV6 7BD	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00-12:00	CLOSED	43.0
PEAK PHARMACY 76 UPPER BAR NEWPORT SHROPSHIRE TF10 7AW	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-13:00	CLOSED	46.5

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
PEAK PHARMACY BEWDLEY MEDICAL CENTRE DOG LANE BEWDLEY WORCESTERSHIRE DY12 2EF	08:30-18:15	08:30-18:15	08:30-18:15	08:30-18:15	08:30-18:15	09:00-17:00	CLOSED	56.8
PRIORSLEE PHARMACY THE BARN PRIORSLEE FARM LOCAL CENTRE TELFORD SHROPSHIRE TF2 9NR	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	CLOSED	CLOSED	45.0
ROWLANDS PHARMACY MAYTHORNE CLOSE SUTTON HILL TELFORD SHROPSHIRE TF7 4DH	09:00- 12:45,13:45- 18:00	09:00- 12:45,13:45- 18:00	09:00- 12:45,13:45- 18:00	09:00- 12:45,13:45- 18:00	09:00- 12:45,13:45- 18:00	CLOSED	CLOSED	40.0
ROWLANDS PHARMACY STIRCHLEY HEALTH CENTRE SANDINO ROAD TELFORD SHROPSHIRE TF3 1FB	09:00- 13:00,13:20- 18:00	09:00- 13:00,13:20- 18:00	09:00- 13:00,13:20- 18:00	09:00- 13:00,13:20- 18:00	09:00- 13:00,13:20- 18:00	09:00-12:00	CLOSED	46.3
ROWLANDS PHARMACY 7-9 TEME STREET TENBURY WELLS WORCESTERSHIRE WR15 8BB	09:00- 13:00,13:20- 18:00	09:00- 13:00,13:20- 18:00	09:00- 13:00,13:20- 18:00	09:00- 13:00,13:20- 18:00	09:00- 13:00,13:20- 18:00	09:00-13:00	CLOSED	47.3
SHIRE PHARMACY UNIT 3 THE SHOPS TEAGUES CRESCENT TRENCH TELFORD SHROPSHIRE TF2 6RX	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	CLOSED	CLOSED	45.0
SUPERDRUG PHARMACY 12-13 DEAN STREET TELFORD SHROPSHIRE TF3 4BT	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	CLOSED	51.0

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
TESCO INSTORE PHARMACY THE RETAIL PARK ARLESTON WELLINGTON SHROPSHIRE TF1 2DE	08:00-20:00	08:00-20:00	08:00-20:00	08:00-20:00	08:00-20:00	08:00-20:00	10:00-16:00	78.0
TOP PHARMACY HIGHFIELD CLINIC HADLEY TELFORD TF1 5NX	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	09:00- 13:00,14:00- 18:00	CLOSED	CLOSED	40.0
WELL 1 THE CROSS CHURCH STREET MALPAS CHESHIRE SY14 8NU	09:00-18:30	09:00-18:30	09:00-17:30	09:00-18:30	09:00-18:30	09:00-13:00	11:30-12:30	51.5
WELL 2-3 ANDERS SQUARE PERTON WOLVERHAMPTON WV6 7QH	08:30-19:00	08:30-19:00	08:30-19:00	08:30-19:00	08:30-19:00	09:00-17:00	CLOSED	60.5
WELLINGTON PHARMACY WELLINGTON M/P CHAPEL LANE WELLINGTON SHROPSHIRE TF1 1PZ	09:00- 13:00,14:00- 21:00	09:00- 13:00,14:00- 21:00	09:00- 13:00,14:00- 21:00	09:00- 13:00,14:00- 21:00	09:00- 13:00,14:00- 21:00	15:00-21:00	09:00-20:00	72.0
WOMBOURNE PHARMACY 45A PLANKS LANE WOMBOURNE WOLVERHAMPTON WV5 8DX	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-12:00	CLOSED	48.0
WOODSIDE PHARMACY PARK LANE CENTRE WOODSIDE TELFORD SHROPSHIRE TF7 5QZ	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	09:00-12:00	CLOSED	50.5

Pharmacies within 5km of Shropshire in other areas in Wales

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY	WEEKLY HOURS OPEN
BOOTS 5 WYLCWM PLACE KNIGHTON LD7 1AA	09:00 - 13:00, 14:00- 17:30	09:00 - 13:00, 14:00-17:30	09:00 - 13:00, 14:00-17:30	09:00 - 13:00, 14:00-17:30	09:00 - 13:00, 14:00-17:30	09:00 - 13:00, 14:00-17:30	CLOSED	45.00
ROWLANDS THE SURGERY 15 HIGH STREET OVERTON ON DEE WREXHAM LL13 0DT	09:00 - 13:00, 14:00- 18:00	09:00 - 13:00, 14:00-18:00	09:00 - 13:00, 14:00-18:00	09:00 - 13:00, 14:00-18:00	09:00 - 13:00, 14:00-18:00	CLOSED	CLOSED	40.00
ROWLANDS MEDICAL HALL CRANE STREET CEFN MAWR WREXHAM LL14 3AD	09:00 - 13:00, 14:00- 18:00	09:00 - 13:00, 14:00-18:00	09:00 - 13:00, 14:00-18:00	09:00 - 13:00, 14:00-18:00	09:00 - 13:00, 14:00-18:00	CLOSED	CLOSED	40.00
52 PERIS PLAS MADOC ACREFAIR r WREXHAM LL14 3LF	09:00 - 13:00, 14:00- 18:00	09:00 - 13:00, 14:00-18:00	09:00 - 13:00, 14:00-18:00	09:00 - 13:00, 14:00-18:00	09:00 - 13:00, 14:00-18:00	CLOSED	CLOSED	40.00
ROWLANDS CASTLE HEALTH CENTRE COLLIERY ROAD CHIRK LL14 5DH	08:30 - 13:00, 13:20- 18:30	08:30 - 13:00, 13:20-18:30	08:30 - 13:00, 13:20-18:30	08:30 - 13:00, 13:20-18:30	08:30 - 13:00, 13:20-18:30	09:00 - 13:00	CLOSED	52.00
ROWLANDS 3 NEW HIGH STREET RUABON WREXHAM LL14 6NH	08:30 - 13:00, 14:00- 18:30	08:30 - 13:00, 14:00-18:30	08:30 - 13:00, 14:00-18:30	08:30 - 13:00, 14:00-18:30	08:30 - 13:00, 14:00-18:30	09:00 - 13:00	CLOSED	49.00
ROWLANDS UNIT B 20 CHURCH STREET WELSHPOOL SY21 7QQ	09:00 - 13:00, 13:20- 18:00	09:00 - 13:00, 13:20-18:00	09:00 - 13:00, 13:20-18:00	09:00 - 13:00, 13:20-18:00	09:00 - 13:00, 13:20-18:00	09:00 - 13:00, 13:20-17:30	CLOSED	50.00
BOOTS 16 BROAD STREET WELSHPOOL SY21 7SD	09:00 - 13:15, 14:15- 17:30	09:00 - 13:15, 14:15-17:30	09:00 - 13:15, 14:15-17:30	09:00 - 13:15, 14:15-17:30	09:00 - 13:15, 14:15-17:30	09:00 - 13:15, 14:15-17:00	CLOSED	44.50

# Appendix 7: Pharmacy Advanced Services Offered

NAME AND ADDRESS	Appliance Use Review (AUR)	Flu Vaccination Service	Hypertension Case-Finding Service	Lateral Flow Device Service (LFD)	New Medicines Service (NMS)	Pharmacy Contraception Service (PCS)	Pharmacy First service	Smoking Cessation Service (SCS)	Stoma Customisation (STOMA) Activity
ASDA PHARMACY OLD POTTS WAY SHREWSBURY SHROPSHIRE SY3 7ET	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
BICTON HEATH PHARMACY BICTON HEATH SHOPPING CTR WELSHPOOL ROAD SHREWSBURY SHROPSHIRE SY3 5AD	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE
BISHOPS CASTLE PHARMACY THE PHARMACY CHURCH STREET BISHOPS CASTLE SHROPSHIRE SY9 5AE	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
BOOTS 7-9 PRIDE HILL SHREWSBURY SHROPSHIRE SY1 1DD	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
BOOTS 5-7 CHURCH STREET OSWESTRY SHROPSHIRE SY11 2SU	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
BOOTS 10-14 WATERGATE STREET WHITCHURCH SHROPSHIRE SY13 1DW	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE

NAME AND ADDRESS	Appliance Use Review (AUR)	Flu Vaccination Service	Hypertension Case-Finding Service	Lateral Flow Device Service (LFD)	New Medicines Service (NMS)	Pharmacy Contraception Service (PCS)	Pharmacy First service	Smoking Cessation Service (SCS)	Stoma Customisation (STOMA) Activity
BOOTS 37 MYTTON OAK ROAD SHREWSBURY SHROPSHIRE SY3 8UG	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
BOOTS MEOLE BRACE RETAIL PARK HEREFORD ROAD SHREWSBURY SHROPSHIRE SY3 9NB	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
BOOTS 34 BULL RING LUDLOW SHROPSHIRE SY8 1AA	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
BOOTS 7 CHEAPSIDE SHIFNAL SHROPSHIRE TF11 8BN	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
BOOTS 48-50 CHESHIRE STREET MARKET DRAYTON SHROPSHIRE TF9 1PR	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
BOOTS 30-31 HIGH STREET BRIDGNORTH SHROPSHIRE WV16 4DB	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
BRIDGNORTH PHARMACY 2 MILL STREET BRIDGNORTH SHROPSHIRE WV15 5AL	NO SERVICE	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE

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NAME AND ADDRESS	Appliance Use Review (AUR)	Flu Vaccination Service	Hypertension Case-Finding Service	Lateral Flow Device Service (LFD)	New Medicines Service (NMS)	Pharmacy Contraception Service (PCS)	Pharmacy First service	Smoking Cessation Service (SCS)	Stoma Customisation (STOMA) Activity
CAMBRIAN PHARMACY CAMBRIAN MEDICAL CENTRE THOMAS SAVIN ROAD OSWESTRY SHROPSHIRE SY11 1GA	NO SERVICE	NO SERVICE	SERVICE OFFERED HERE AS OF JULY 2025	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
CLEOBURY PHARMACY CLEOBURY PHARMACY OFF VAUGHAN ROAD CLEOBURY MORTIMER WORCESTERSHIRE DY14 8DB	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE
CONWAY PHARMACY 238 MONKMOOR ROAD TELFORD EST SHOPPING CTRE SHREWSBURY SHROPSHIRE SY2 5SR	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE AS OF JULY 2025	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
DAY LEWIS PHARMACY OSWALD ROAD OSWESTRY SHROPSHIRE SY11 1RD	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
DAY LEWIS PHARMACY 14 ENGLISH WALLS OSWESTRY SHROPSHIRE SY11 2PA	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE
DAY LEWIS PHARMACY THE FORMER TICKET OFFICE THE CROSS GOBOWEN SHROPSHIRE SY11 3JS	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
ELLESMERE PHARMACY 5 CROSS STREET ELLESMERE SHROPSHIRE SY12 0AW	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE

NAME AND ADDRESS	Appliance Use Review (AUR)	Flu Vaccination Service	Hypertension Case-Finding Service	Lateral Flow Device Service (LFD)	New Medicines Service (NMS)	Pharmacy Contraception Service (PCS)	Pharmacy First service	Smoking Cessation Service (SCS)	Stoma Customisation (STOMA) Activity
GREEN END PHARMACY 11-13 GREEN END WHITCHURCH SHROPSHIRE SY13 1AD	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
HIGHLEY PHARMACY BEULAH HOUSE HIGH STREET HIGHLEY SHROPSHIRE WV16 6LP	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE
LUNTS PHARMACIES 1-3 HEREFORD ROAD SHREWSBURY SHROPSHIRE SY3 7QT	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE
LUNTS PHARMACY THE TANNERY BARKER STREET SHREWSBURY SY1 1QJ	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE
LUNTS PHARMACY DROVERS' HOUSE AUCTION YARD CRAVEN ARMS SHROPSHIRE SY7 9BZ	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE
LUNTS PHARMACY 116-119 LOWER GALDERFORD LUDLOW SHROPSHIRE SY8 1RU	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE
MSN & LUNTS PHARMACY SEVERN FIELDS HEALTH CTR SUNDORNE ROAD SHREWSBURY SHROPSHIRE SY1 4RQ	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE

NAME AND ADDRESS	Appliance Use Review (AUR)	Flu Vaccination Service	Hypertension Case-Finding Service	Lateral Flow Device Service (LFD)	New Medicines Service (NMS)	Pharmacy Contraception Service (PCS)	Pharmacy First service	Smoking Cessation Service (SCS)	Stoma Customisation (STOMA) Activity
MSN & LUNTS PHARMACY 40 SANDFORD AVENUE CHURCH STRETTON SHROPSHIRE SY6 6BH	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE
PEAK PHARMACY NORTHGATE HEALTH CENTRE NORTHGATE BRIDGNORTH SHROPSHIRE WV16 4EN	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
PEAK PHARMACY MEDICAL CENTRE MAER LANE MARKET DRAYTON SHROPSHIRE TF9 3AL	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
PONTESBURY PHARMACY MAIN ROAD PONTESBURY SHREWSBURY SY5 0RR	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE
RADBROOK GREEN PHARMACY BANK FARM ROAD RADBROOK SHREWSBURY SY3 6DU	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
RHODES TC CHEMIST 77 HIGH STREET ALBRIGHTON WOLVERHAMPTON WV7 3JA	NO SERVICE	NO SERVICE	NO SERVICE	NO SERVICE	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
ROWLANDS PHARMACY 11 HIGH STREET WHITCHURCH SHROPSHIRE SY13 1AX	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	SERVICE OFFERED HERE

NAME AND ADDRESS	Appliance Use Review (AUR)	Flu Vaccination Service	Hypertension Case-Finding Service	Lateral Flow Device Service (LFD)	New Medicines Service (NMS)	Pharmacy Contraception Service (PCS)	Pharmacy First service	Smoking Cessation Service (SCS)	Stoma Customisation (STOMA) Activity
ROWLANDS PHARMACY MARDEN MEDICAL PRACTICE 25 SUTTON ROAD SHREWSBURY SHROPSHIRE SY2 6DL	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	SERVICE OFFERED HERE
ROWLANDS PHARMACY 7 LANSDOWNE ROAD BAYSTON HILL SHREWSBURY SY3 0HT	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE
ROWLANDS PHARMACY WEM AND PREES MED PRAC NEW STREET WEM SHROPSHIRE SY4 5AF	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	SERVICE OFFERED HERE
ROWLANDS PHARMACY UNIT 1 MORRIS CTRL SHOP PARADE WEM SHROPSHIRE SY4 5NY	NO SERVICE	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	SERVICE OFFERED HERE
ROWLANDS PHARMACY 80 HIGH STREET BROSELEY SHROPSHIRE TF12 5ET	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
ST MARTINS PHARMACY STANS SUPERSTORE OVERTON RD,ST MARTINS OSWESTRY SHROPSHIRE SY11 3AY	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	SERVICE OFFERED HERE	NO SERVICE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
TESCO PHARMACY CATTLE MARKET BATTLEFIELD ROAD SHREWSBURY SY1 4HA	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE

NAME AND ADDRESS	Appliance Use Review (AUR)	Flu Vaccination Service	Hypertension Case-Finding Service	Lateral Flow Device Service (LFD)	New Medicines Service (NMS)	Pharmacy Contraception Service (PCS)	Pharmacy First service	Smoking Cessation Service (SCS)	Stoma Customisation (STOMA) Activity
WELL PHARMACY 101 MOUNT PLEASANT ROAD SHREWSBURY SHROPSHIRE SY1 3EL	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	SERVICE OFFERED HERE	NO SERVICE	NO SERVICE
WENLOCK PHARMACY 14 HIGH STREET MUCH WENLOCK SHROPSHIRE TF13 6AA	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE AS OF JULY 2025	NO SERVICE	SERVICE OFFERED HERE	SERVICE OFFERED HERE AS OF JULY 2025	SERVICE OFFERED HERE	NO SERVICE	SERVICE OFFERED HERE

NAME AND ADDRESS	Needle and Syringe Exchange	Supervised consumption	Sexual Health Services: Issue of treatment for Chlamydia	Sexual Health Services: Issue of Chlamydia/ Gonorrhoea Smartkits	Condom Distribution Scheme	Emerg Hormonal Contraception	Covid vaccinations	Flu anti- viral	IP path- finder	End of life
ASDA PHARMACY OLD POTTS WAY SHREWSBURY SHROPSHIRE SY3 7ET	NO	YES	NO	NO	NO	YES	NO	NO	YES	NO
BICTON HEATH PHARMACY BICTON HEATH SHOPPING CTR WELSHPOOL ROAD SHREWSBURY SHROPSHIRE SY3 5AD	YES	YES	YES	YES	YES	YES	YES	NO	NO	NO
BISHOPS CASTLE PHARMACY THE PHARMACY CHURCH STREET BISHOPS CASTLE SHROPSHIRE SY9 5AE	YES	YES	YES	YES	YES	YES	YES	NO	NO	Tier 2 not contin uing
BOOTS 7-9 PRIDE HILL SHREWSBURY SHROPSHIRE SY1 1DD	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO
BOOTS 5-7 CHURCH STREET OSWESTRY SHROPSHIRE SY11 2SU	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO
BOOTS 10-14 WATERGATE STREET WHITCHURCH SHROPSHIRE SY13 1DW	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO

NAME AND ADDRESS	Needle and Syringe Exchange	Supervised consumption	Sexual Health Services: Issue of treatment for Chlamydia	Sexual Health Services: Issue of Chlamydia/ Gonorrhoea Smartkits	Condom Distribution Scheme	Emerg Hormonal Contraception	Covid vaccinations	Flu anti- viral	IP path- finder	End of life
BOOTS 37 MYTTON OAK ROAD SHREWSBURY SHROPSHIRE SY3 8UG	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO
BOOTS MEOLE BRACE RETAIL PARK HEREFORD ROAD SHREWSBURY SHROPSHIRE SY3 9NB	NO	NO	NO	NO	NO	NO	YES	NO	NO	NO
BOOTS 34 BULL RING LUDLOW SHROPSHIRE SY8 1AA	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO
BOOTS 7 CHEAPSIDE SHIFNAL SHROPSHIRE TF11 8BN	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO
BOOTS 48-50 CHESHIRE STREET MARKET DRAYTON SHROPSHIRE TF9 1PR	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO
BOOTS 30-31 HIGH STREET BRIDGNORTH SHROPSHIRE WV16 4DB	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO
BRIDGNORTH PHARMACY 2 MILL STREET BRIDGNORTH SHROPSHIRE WV15 5AL	NO	NO	NO	NO	NO	YES	NO	NO	NO	NO

NAME AND ADDRESS	Needle and Syringe Exchange	Supervised consumption	Sexual Health Services: Issue of treatment for Chlamydia	Sexual Health Services: Issue of Chlamydia/ Gonorrhoea Smartkits	Condom Distribution Scheme	Emerg Hormonal Contraception	Covid vaccinations	Flu anti- viral	IP path- finder	End of life
CAMBRIAN PHARMACY CAMBRIAN MEDICAL CENTRE THOMAS SAVIN ROAD OSWESTRY SHROPSHIRE SY11 1GA	NO	NO	NO	NO	YES	NO	NO	NO	NO	Tier 2 contin uing
CLEOBURY PHARMACY CLEOBURY PHARMACY OFF VAUGHAN ROAD CLEOBURY MORTIMER WORCESTERSHIRE DY14 8DB	YES	YES	YES	YES	YES	YES	NO	NO	NO	NO
CONWAY PHARMACY 238 MONKMOOR ROAD TELFORD EST SHOPPING CTRE SHREWSBURY SHROPSHIRE SY2 5SR	YES	YES	YES	YES	NO	YES	YES	YES	NO	Tier 2 not contin uing
DAY LEWIS PHARMACY OSWALD ROAD OSWESTRY SHROPSHIRE SY11 1RD	YES	YES	YES	YES	YES	YES	YES	NO	NO	NO
DAY LEWIS PHARMACY 14 ENGLISH WALLS OSWESTRY SHROPSHIRE SY11 2PA	YES	YES	YES	YES	YES	YES	YES	YES	NO	NO
DAY LEWIS PHARMACY THE FORMER TICKET OFFICE THE CROSS GOBOWEN SHROPSHIRE SY11 3JS	YES	YES	YES	YES	YES	YES	NO	NO	NO	NO

NAME AND ADDRESS	Needle and Syringe Exchange	Supervised consumption	Sexual Health Services: Issue of treatment for Chlamydia	Sexual Health Services: Issue of Chlamydia/ Gonorrhoea Smartkits	Condom Distribution Scheme	Emerg Hormonal Contraception	Covid vaccinations	Flu anti- viral	IP path- finder	End of life
ELLESMERE PHARMACY 5 CROSS STREET ELLESMERE SHROPSHIRE SY12 0AW	NO	NO	NO	NO	YES	YES	YES	NO	NO	NO
GREEN END PHARMACY 11-13 GREEN END WHITCHURCH SHROPSHIRE SY13 1AD	NO	NO	NO	NO	NO	YES	YES	NO	NO	NO
HIGHLEY PHARMACY BEULAH HOUSE HIGH STREET HIGHLEY SHROPSHIRE WV16 6LP	YES	YES	YES	YES	YES	YES	YES	NO	NO	Tier 2 contin uing
LUNTS PHARMACIES 1-3 HEREFORD ROAD SHREWSBURY SHROPSHIRE SY3 7QT	YES	YES	YES	YES	YES	YES	YES	NO	NO	Tier 2 contin uing
LUNTS PHARMACY THE TANNERY BARKER STREET SHREWSBURY SY1 1QJ	YES	YES	YES	YES	YES	YES	YES	NO	NO	Tier 2 contin uing
LUNTS PHARMACY DROVERS' HOUSE AUCTION YARD CRAVEN ARMS SHROPSHIRE SY7 9BZ	YES	YES	YES	YES	YES	YES	NO	NO	NO	Tier 2 contin uing
LUNTS PHARMACY 116-119 LOWER GALDERFORD LUDLOW SHROPSHIRE SY8 1RU	YES	YES	YES	YES	YES	YES	YES	YES	NO	Tier 2 contin uing

NAME AND ADDRESS	Needle and Syringe Exchange	Supervised consumption	Sexual Health Services: Issue of treatment for Chlamydia	Sexual Health Services: Issue of Chlamydia/ Gonorrhoea Smartkits	Condom Distribution Scheme	Emerg Hormonal Contraception	Covid vaccinations	Flu anti- viral	IP path- finder	End of life
MSN & LUNTS PHARMACY SEVERN FIELDS HEALTH CTR SUNDORNE ROAD SHREWSBURY SHROPSHIRE SY1 4RQ	YES	YES	YES	YES	YES	YES	YES	NO	NO	NO
MSN & LUNTS PHARMACY 40 SANDFORD AVENUE CHURCH STRETTON SHROPSHIRE SY6 6BH	YES	YES	YES	YES	YES	YES	YES	NO	NO	NO
PEAK PHARMACY NORTHGATE HEALTH CENTRE NORTHGATE BRIDGNORTH SHROPSHIRE WV16 4EN	YES	YES	YES	YES	YES	YES	YES	NO	NO	Tier 2 contin uing
PEAK PHARMACY MEDICAL CENTRE MAER LANE MARKET DRAYTON SHROPSHIRE TF9 3AL	YES	YES	YES	YES	YES	YES	YES	NO	NO	Tier 2 contin uing
PONTESBURY PHARMACY MAIN ROAD PONTESBURY SHREWSBURY SY5 0RR	YES	YES	YES	YES	YES	YES	YES	NO	NO	Tier 2 contin uing
RADBROOK GREEN PHARMACY BANK FARM ROAD RADBROOK SHREWSBURY SY3 6DU	YES	YES	YES	YES	YES	YES	YES	NO	NO	NO

NAME AND ADDRESS	Needle and Syringe Exchange	Supervised consumption	Sexual Health Services: Issue of treatment for Chlamydia	Sexual Health Services: Issue of Chlamydia/ Gonorrhoea Smartkits	Condom Distribution Scheme	Emerg Hormonal Contraception	Covid vaccinations	Flu anti- viral	IP path- finder	End of life
RHODES TC CHEMIST 77 HIGH STREET ALBRIGHTON WOLVERHAMPTON WV7 3JA	YES	YES	YES	YES	YES	YES	NO	NO	NO	NO
ROWLANDS PHARMACY 11 HIGH STREET WHITCHURCH SHROPSHIRE SY13 1AX	YES	YES	YES	YES	YES	YES	NO	NO	NO	NO
ROWLANDS PHARMACY MARDEN MEDICAL PRACTICE 25 SUTTON ROAD SHREWSBURY SHROPSHIRE SY2 6DL	YES	YES	YES	YES	YES	YES	NO	NO	NO	NO
ROWLANDS PHARMACY 7 LANSDOWNE ROAD BAYSTON HILL SHREWSBURY SY3 0HT	YES	YES	YES	YES	YES	YES	NO	NO	NO	NO
ROWLANDS PHARMACY WEM AND PREES MED PRAC NEW STREET WEM SHROPSHIRE SY4 5AF	YES	YES	YES	YES	YES	YES	YES	NO	NO	NO
ROWLANDS PHARMACY UNIT 1 MORRIS CTRL SHOP PARADE WEM SHROPSHIRE SY4 5NY	YES	YES	YES	YES	YES	YES	NO	NO	NO	NO
ROWLANDS PHARMACY 80 HIGH STREET BROSELEY SHROPSHIRE TF12 5ET	YES	YES	YES	YES	YES	YES	YES	NO	NO	NO

NAME AND ADDRESS	Needle and Syringe Exchange	Supervised consumption	Sexual Health Services: Issue of treatment for Chlamydia	Sexual Health Services: Issue of Chlamydia/ Gonorrhoea Smartkits	Condom Distribution Scheme	Emerg Hormonal Contraception	Covid vaccinations	Flu anti- viral	IP path- finder	End of life
ST MARTINS PHARMACY STANS SUPERSTORE OVERTON RD,ST MARTINS OSWESTRY SHROPSHIRE SY11 3AY	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO
TESCO PHARMACY CATTLE MARKET BATTLEFIELD ROAD SHREWSBURY SY1 4HA	NO	NO	NO	NO	NO	NO	NO	NO	NO	NO
WELL PHARMACY 101 MOUNT PLEASANT ROAD SHREWSBURY SHROPSHIRE SY1 3EL	NO	NO	NO	NO	NO	YES	YES	NO	NO	NO
WENLOCK PHARMACY 14 HIGH STREET MUCH WENLOCK SHROPSHIRE TF13 6AA	YES	YES	YES	YES	NO	YES	NO	NO	NO	NO

# Appendix 8: Dispensing GP practices opening hours

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
ALBRIGHTON MEDICAL PRACTICE SHAW LANE ALBRIGHTON WOLVERHAMPTON WV7 3DT	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	CLOSED	CLOSED
ALVELEY MEDICAL PRACTICE VILLAGE ROAD ALVERLEY BRIDGNORTH SHROPSHIRE WV15 6NG	08:30-12:30 14:00–18:00	08:30-12:30 14:00–18:00	08:30-12:30	08:30-12:30 14:00–18:00	08:30-12:30 14:00–18:00	CLOSED	CLOSED
THE BEECHES MEDICAL PRACTICE DORRINTON SURGERY THE MAITLANDS DORRINGTON, SHREWSBURY SY5 7LD	08:30-13:00	08:30-13:00	08:30-13:00 14:00–18:00	08:30-13:00	08:30-13:00	CLOSED	CLOSED
BROWN CLEE MEDICAL PRACTICE STATION ROAD DITTON PRIORS BRIDGNORTH SHROPSHIRE WV16 6SS	08:00-13:00 14:00-17:30	08:00-13:00 14:00-17:30	08:00-13:00 14:00-17:30	08:00-13:00 14:00-17:30	08:00-13:00 14:00-17:30	CLOSED	CLOSED
CHURCHMERE MEDICAL GROUP ELLESMERE MEDICAL CENTRE TRIMPLEY STREET ELLESMERE SHROPSHIRE SY12 0DB	08:00–18:00	08:00–18:00	08:00–18:00	08:00–18:00	08:00–18:00	CLOSED	CLOSED
CLIVE MEDICAL PRACTICE HIGH STREET CLIVE SHREWSBURY SY4 5PS	08:00-13:00 14:00-18:00	08:00-13:00 14:00-18:00	08:00-13:00 14:00-18:00	08:00-13:00 14:00-18:00	08:00-13:00 14:00-18:00	CLOSED	CLOSED
CRAVEN ARMS MEDICAL PRACTICE 20 SHREWSBURY ROAD CRAVEN ARMS SHROPSHIRE SY7 9PY	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	CLOSED	CLOSED

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
HODNET MEDICAL CENTRE DRAYTON ROAD HODNET MARKET DRAYTON TF9 3NF	08:30 - 18:00	08:30 - 18:00	08:30 - 18:00	08:30 - 18:00	08:30 - 18:00	CLOSED	CLOSED
KNOCKIN MEDICAL CENTRE  KNOCKIN  OSWESTRY  SHROPSHIRE  SY10 8HL	08:30-13:00 14:00-18:00	08:30-13:00 14:00-18:00	08:30-13:00 14:00-18:00	08:30-13:00 14:00-18:00	08:30-13:00 14:00-18:00	CLOSED	CLOSED
MUCH WENLOCK & CRESSAGE MEDICAL PRACTICE CLIFTON LODGE SHEINTON ROAD CRESSAGE SY5 6DH	08:30-12:30 14:00–18:00	08:30-12:30 14:00–18:00	08:30-12:30 14:00–18:00	08:30-12:30 14:00–18:00	08:30-12:30	CLOSED	CLOSED
PLAS FFYNNON MEDICAL CENTRE MIDDLETON ROAD OSWESTRY SHROPSHIRE SY11 2RB	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	CLOSED	CLOSED
PONTESBURY & WORTHEN MEDICAL PRACTICE HALL BANK PONTESBURY SHREWSBURY SHROPSHIRE SY5 0RF	08:45-13:00 14:00-18:30	08:45-13:00 14:00-18:30	08:45-13:00 14:00-18:30	08:45-13:00 14:00-18:30	08:45-13:00 14:00-18:30	CLOSED	CLOSED
PRESCOTT SURGERY BASCHURCH SHREWSBURY SHROPSHIRE SY4 2DR	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	CLOSED	CLOSED
SHAWBURY MEDICAL PRACTICE POYNTON ROAD SHAWBURY SHREWSBURY SHROPSHIRE SY4 4JS	08:30-12:30 13:30 – 18:00	08:30-12:30 13:30 – 18:00	08:30-12:30	08:30-12:30 13:30 – 18:00	08:30-12:30 13:30 – 18:00	CLOSED	CLOSED

NAME AND ADDRESS	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	SUNDAY
THE MEADOWS MEDICAL PRACTICE THE SURGERY TURNPIKE MEADOW CLUN SY7 8HZ	08:30-13:00 14:00-18:00	08:30-13:00 14:00-18:00	08:30-13:00 14:00-18:00	08:30-13:00 14:00-18:00	08:30-13:00 14:00-18:00	CLOSED	CLOSED
WEM AND PREES MEDICAL PRACTICE WHITCHURCH ROAD, PREES, SHROPSHIRE SY13 2DG	08:30-13:00 14:00-18:00	08:30-13:00 14:00-18:00	08:30-13:00 14:00-18:00	08:30-13:00 14:00-18:00	08:30-13:00 14:00-18:00	CLOSED	CLOSED
WESTBURY MEDICAL PRACTICE WESTBURY MEDICAL CENTRE, VENNINGTON ROAD, SHREWSBURY, SHROPSHIRE SY5 9QX	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	CLOSED	CLOSED