

**Cheshire West and Chester
Pharmaceutical Needs Assessment
2025-2028**

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Key findings

The provision of pharmacy services within Cheshire West and Chester, in terms of location, opening hours and advanced and enhanced services provided, is considered adequate to meet the needs of the population. As such, this PNA has not identified a current need for new NHS pharmaceutical service providers in Cheshire West and Chester at the point this PNA was produced (January 2025).

- The Pharmaceutical Needs Assessment (PNA) aims to identify the pharmaceutical needs of people living in Cheshire West and Chester (CW&C). The requirement to produce a Pharmaceutical Needs Assessment (PNA) is a statutory responsibility of the local Health and Wellbeing Board. The scope of the PNA is local pharmaceutical services which are NHS funded.
- Traditionally the main functioning of pharmacies was the dispensing of medicines, and this is still a central function, but pharmacies are a rich resource with a highly skilled workforce who more than ever are contributing to the health and wellbeing of their local population through a range of services including the advanced 'Pharmacy First Service'.
- In the borough of CW&C there are 68 community pharmacies and one distance selling pharmacy¹. Pharmacy provision at January 2025 is considered sufficient to meet the needs of the population:
 - CW&C has a slightly higher pharmacy-to-population ratio than the England average. There is adequate geographical coverage of pharmacies, with dispensing support from five dispensing doctors and cross-border pharmacies.
 - At January 2025, all residents are within a 15-minute drive of a pharmacy, even in rush hour. There is good access via public transport with over 90% of residents within a 30-minute commute. Access is more limited for walking to a pharmacy – 84% of residents are within a 20-minute walk. The majority of those that are not, live in rural areas.
 - Chronic conditions, obesity and premature mortality are higher for residents in the most deprived areas of the borough and these areas in particular dictate a need for the full range of pharmaceutical services. All residents living in the most deprived areas of the borough are within a 15-minute walk or commute to a pharmacy.
 - Opening hours of pharmacies are considered sufficient at January 2025, but if further amendments to evening and weekend opening take place, the impact on residents should be reviewed.
- We are mindful of recent pharmacy closures that have taken place both nationally and locally. For CW&C, this includes eight community pharmacy closures since the production of the 2022-25 PNA. Other changes during this time have included an increase in average dispensing volume,

¹ A Distance Selling Pharmacy is a type of pharmacy that works exclusively at a distance from patients. are online pharmacies, This includes mail order and internet pharmacies that remotely manage patient's medicine logistics and distribution remotely.

and new housing developments focussed in Chester. It must be acknowledged that pharmacies are under pressure, and the impact of further pharmacy closures during the lifespan of this PNA will need to be reviewed, particularly in community partnership areas with already lower pharmacy-to-population ratios than the CW&C average. This includes Chester East, Winsford, Rural, Chester Central and Ellesmere Port.

- A broad range of advanced and locally commissioned services are provided in addition to essential services:
 - At January 2025 there is good coverage of all advanced services across the borough. This excludes Appliance Use Reviews (AUR) and Stoma appliance customisation (SAC) services which are both specialist services. This is not considered a gap as appliances can be accessed from contractors located in Cheshire and Merseyside, supporting both patient confidentiality and delivery of large items.
 - There is at least one pharmacy in each community partnership area providing the COVID-19 vaccination enhanced service for eligible populations. This is in addition to other COVID-19 vaccination services such as the Living Well Bus.
 - Although outside of the scope of the PNA, locally commissioned services have been reviewed. The PNA has demonstrated potential service need and access improvements for pharmacy supervised consumption, needle exchange, and sharps return services, which will be reviewed by commissioners. Cheshire and Merseyside ICB are also reviewing options to harmonise and improve equity of access to the urgent palliative care medicines services across all areas of Cheshire and Merseyside.
- The CW&C pharmacy survey (November 2024) highlighted that residents value having a pharmacy nearby, but also highlighted medicine unavailability, long waiting times for prescription collection, and long wait times in the pharmacies. This reflects the challenges that pharmacies are facing with increasing demand, medicine shortages and financial pressures.

The number of residents accessing community pharmacies is growing:

- There will be large housing developments during the lifetime of this 2025-2028 PNA in Ellesmere Port and Northwich community partnerships. It is anticipated that capacity within existing services should be able to support the overall pharmaceutical needs of future populations, and pharmacies in these community partnerships have sufficient opening times and availability of services.
- Population estimates show there is a greater proportion of older people in CW&C than the England average. As older people generally take more medicines than the younger population, community pharmacies will experience a greater workload in terms of dispensing and support for self-care. Furthermore, this workload is likely to increase, as population forecasts suggest that the proportion of people aged 65 and over is expected to rise by 22% by 2033 to an estimated 96,000.
- Overall health status within CW&C is generally good with residents expected to spend a higher proportion of their lives in good health than the England average. However, CW&C has a higher prevalence of patients with a long-term condition or disease than the England

average including cancer, coronary heart disease, stroke, heart failure, atrial fibrillation, COPD, hypertension, rheumatoid arthritis and osteoporosis. These numbers are expected to rise with our ageing population.

1. Introduction and purpose

1.1 Objectives of the PNA

The Pharmaceutical Needs Assessment (PNA) aims to identify the pharmaceutical needs of people living in Cheshire West and Chester (CW&C).

The main objectives for this project are to:

1. Describe the main health issues in CW&C
2. Describe existing NHS funded pharmaceutical services
3. Provide information for NHS England (NHSE) contracts committee when considering pharmacy applications
4. Make recommendations to commissioners based on findings of the PNA

1.2 Background

The Health Act 2009 instructed NHS Primary Care Trusts (PCTs) to publish an assessment of needs for pharmaceutical services in its area. This assessment formed the basis for determining market entry onto a 'Pharmaceutical List' i.e., reviewing pharmacy applications to ensure adequate pharmaceutical provision to meet needs within their area. The Health and Social Care Act 2012 transferred the production of PNAs to Health and Wellbeing Boards. At the same time the responsibility for using these PNAs as the basis to determine market entry transferred to NHS England under the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013.

1.3 Purpose

The effective commissioning of accessible primary care services is central to improving quality and implementing the vision for health and healthcare. Community pharmacy is one of the most accessible healthcare settings. Nationally 99% of the population, including those living in the most deprived areas, can get to a pharmacy within 20 minutes by car. 96% of people living in the most deprived areas have access to a pharmacy either through walking or via public transport¹.

The main purpose of the PNA is to enable NHS England to assess applications to open new premises from a pharmacy or dispensing appliance contractor against any geographical gaps identified within the PNA. The PNA should also identify whether there is a need for an additional NHS funded service(s), or whether improvements or better access to existing NHS funded services are required.

Although a PNA is primarily a document to enable NHS England to make application decisions, a robust PNA used in conjunction with the Joint Strategic Needs Assessment (JSNA) should aid commissioners within the Local Authority and Integrated Care Board (ICB) to target services from pharmacies to areas of most need.

The PNA presents a picture of community pharmacies and other providers of pharmaceutical services, reviewing services currently provided and how these could be utilised further. Community pharmacies can support the health and wellbeing of the population of Cheshire West and Chester (CW&C) in partnership with other community services and GP practices. Services can be directed

towards addressing health inequalities and supporting self-care in areas of greatest need. Mapping of service provision and identifying gaps in demand are essential to afford commissioners with the market intelligence they need to take forward appropriate and cost-effective commissioning of services.

2. Scope of the PNA

2.1 Process undertaken to develop the PNA

2.1.1 PNA steering group

Cheshire West and Chester's Health and Wellbeing Board has a statutory responsibility to publish an up-to-date statement of pharmaceutical needs every three years. A revised pharmaceutical needs assessment is required to be published by October 2025. The Health and Wellbeing Board has devolved the authority to develop Cheshire West and Chester's PNA to the Director of Public Health.

Development was overseen by a multi-professional steering group which included:

- Consultant in Public Health
- Insight and Intelligence Portfolio Manager (LA)
- Intelligence Analyst (LA)
- Head of Medicines Strategy and Optimisation (ICB)
- Local Pharmaceutical Committee (LPC)
- Local Medical Committee GP representation (LMC)
- Pharmaceutical Local Professional Network (LPN)
- Healthwatch representative

Additional support for producing the PNA was received from:

- Prescribing Analysts Team (NHSBSA)
- Public Health Analysts (LA)
- Demographic Analyst (LA)

2.1.2 Patient and Public Involvement

a) Pharmacy Survey

During November 2024, we asked the people of CW&C for their experiences of using pharmacy services. Responses can be seen in appendix three. We wanted to know this because we want to:

- Make sure that pharmacies provide services people need and use
- Know what services we can improve
- Let pharmacies know what patients think of the services they provide
- Work with patients and pharmacies to improve services.

There were 590 responses to the survey.

b) 60 day consultation

A formal 60-day consultation is required for the development of the PNA. This took place 7 May 2025 until 13 July 2025. The consultation was distributed widely electronically, promoted via social media, made available online, and paper copies were available in libraries and on request. There were 54 responses to the consultation.

2.1.3 PNA review process

The PNA will be reviewed as an integrated part of the annual commissioning cycle as well as when any changes to the pharmacy contractor list occurs. This action will be overseen by Cheshire West and Chester's Health and Well Being Board. The task is delegated to the Public Health Team and the multi-professional steering group who have developed the PNA.

Examples of changes that might dictate a new or diminished pharmaceutical need are:

- New pharmacy contracts
- Pharmacy closures
- Changes to pharmacy locations
- Pharmacy opening hours
- Local intelligence and significant issues relating to pharmacy enhanced service provision
- Appliance provision changes
- Significant changes in health need, housing developments or primary care service developments that may impact either complimentary or adversely on pharmacy-based services
- Significant changes in workforce due to movement of local businesses/employers

Typically, this would be in the form of issuing a Supplementary Statement, unless the changes were significant enough that a new PNA was warranted and did not form a disproportionate response to the level of change identified. The PNA has to have a complete review every 3 years.

Successful applications for 'consolidations and mergers' as part of the revised pharmacy regulations may also necessitate the development of a supplementary statement.

2.2 How to use the PNA

The PNA should be used as a service development tool in conjunction with the JSNA and the strategic plans from local commissioners. Mapping out current services and gaining a sense of future service needs will pinpoint the areas where the development of local pharmaceutical services may be necessary.

The PNA can be used by patients, current service providers, future service providers and commissioners alike in the following ways:

- Maps and tables detailing specific services – though these are at a point in time
- Current service providers - will be better able to understand the unmet needs of patients in their area and take steps to address this need.
- Future service providers - will be able to tailor their applications to be added to the pharmaceutical list to make sure that they provide the services most needed by the local community.
- Commissioners - will be able to move away from the 'one-size fits all approach' to make sure that pharmaceutical services are delivered in a targeted way.
- NHS England - will be in a better position to judge new applications to join the pharmaceutical list to make sure that patients receive quality services and adequate access without plurality of supply.

Appendix one is a glossary explaining the abbreviations used throughout this report.

2.3 Localities used for considering pharmaceutical services

The PNA is for the Cheshire West and Chester LA boundary. Community partnerships have been used to present data at a smaller geographical level where possible and are a common geography used by both the local authority and ICB. There were nine community partnerships that made up CW&C during the PNA development, aligned to the nine Primary Care Networks (PCNs). The three Chester community partnerships have subsequently merged into one, totalling seven community partnerships. However, we have used the nine areas to illustrate local differences within the new Chester community partnership. In some instances, GP data has been collated by PCNs. PCNs are groups of GP practices who have chosen to work together with other health and care professionals to plan and provide services locally. Future PNAs will reflect the revised community partnership geographies.

2.4 Services in scope

The scope of the PNA is covered by the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 with services detailed under regulation 3. The regulation states that only local pharmaceutical services which are NHS funded are to be included in the PNA. This includes essential services, national enhanced services and advanced services which are described in detail in chapter 3.

However, we have also chosen to review locally commissioned services which are commissioned by the local authority and NHS Cheshire and Merseyside Integrated Care Board (ICB).

3. National Pharmaceutical Services Contract

All national NHS pharmaceutical service providers must comply with the contractual framework that was introduced in April 2005. The national framework is set out below and can be found in greater detail on the Community Pharmacy England website:

<https://cpe.org.uk/quality-and-regulations/the-pharmacy-contract/>

The pharmaceutical services contract consists of three different levels:

- Essential services
- National enhanced services: Covid-19 vaccination
- Advanced services

NHS Cheshire and Merseyside Integrated Care Board (ICB) is responsible for planning NHS Services for the population, including community pharmacy services. NHS England has delegated the responsibility for commissioning Essential and Advanced Services to the ICB. The ICB also discharges some functions through sub-ICB Place-based Partnerships to design and deliver services according to local need. These are also locally commissioned pharmacy services contracted via the ICB and Cheshire West and Chester Council. Only essential and advanced services need to be reviewed as part of the PNA but commissioned services will also be reviewed.

3.1 Essential services

There are nine essential services offered by all pharmacy owners as part of the NHS Community Pharmacy Contractual Framework (CPCF) also known as the 'pharmacy contract'.

3.1.1 Discharge Medicines Service (DMS)

NHS Trusts can refer patients who would benefit from extra guidance around prescribed medicines for provision of the discharge medicine service to their community 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.

3.1.2 Dispensing appliances

Pharmacists may regularly dispense appliances in the course of their business, or they may dispense such prescriptions infrequently, or they may have taken a decision not to dispense them at all. Whilst the Terms of Service requires a pharmacist to dispense any (non-Part XVIII A listed) medicine "with reasonable promptness", for appliances the obligation to dispense arises only if the pharmacist supplies such products "in the normal course of business"².

3.1.3 Dispensing medicines

Supply of medicines, advice given to the patient about the medicines being dispensed and advice about possible interactions with other medicines. Also, the recording of all medicines dispensed, significant advice provided, referrals and interventions made using a Patient Medication Record.

3.1.4 Disposal of unwanted medicines

Community pharmacy owners are obliged to accept back unwanted medicines from patients. The local NHS contract management team will make arrangements 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.

3.1.5 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.

3.1.6 Public health (promotion of healthy lifestyles)

Each financial year (1st April to 31st March), pharmacies are required to participate in up to six health campaigns at the request of NHS England. This generally involves the display and distribution of leaflets provided by NHS England. In addition, pharmacies are required to undertake prescription-linked interventions on major areas of public health concern, such as encouraging smoking cessation.

3.1.7 Repeat dispensing and electronic repeat dispensing

At least two thirds of all prescriptions generated in primary care are for patients needing repeat supplies of regular medicines. Patients using the service obtain repeat supplies of NHS prescriptions without the need for their GP practice to issue a prescription each time a supply is required.

Under the repeat dispensing service pharmacy teams will:

- Dispense repeat dispensing prescriptions issued by a general practice;
- Ensure that each repeat supply is required; and
- Seek to ascertain that there is no reason why the patient should be referred back to their general practice.

Originally this service was carried out using paper prescriptions, but as the Electronic Prescription Service (EPS) has developed, the majority of repeat dispensing is now carried out via EPS release 2 and is termed electronic Repeat Dispensing (eRD).

3.1.8 Signposting

NHS England will provide pharmacies with lists of sources of care and support in the area. Pharmacies will be expected to help people who ask for assistance by directing them to the most appropriate source of help.

3.1.9 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.

3.2 Advanced services

There are currently nine advanced services within the NHS Community Pharmacy Contractual Framework (CPCF), also known as the 'pharmacy contract'. Pharmacy owners can choose to provide any of these services if they meet the requirements set out in the Secretary of State Directions.

3.1.10 Appliance use reviews (AURs) and Stoma appliance customisation (SAC) services

Appliance Use Reviews (AUR) and Stoma appliance customisation (SAC) services are both specialist services. Locally, community health services provide specialist advice to patients on appliances and stoma products. Pharmacies then dispense prescriptions generated by the services. These services are usually accessed remotely from Cheshire and Merseyside appliance contractors, with delivery to the patient's home.

3.1.11 Flu Vaccination Service

Each year from the autumn through to March, the NHS runs a seasonal flu vaccination campaign aiming to vaccinate all patients who are at risk of developing more serious complications from the virus. At November 2024, 60 pharmacies were providing a flu vaccination service in CW&C.

3.1.12 Hypertension Case-Finding Service

This service aims to identify people at risk of hypertension (usually those aged 40 and over) and offer them a blood pressure measurement. Where clinically indicated, ambulatory blood pressure monitoring is offered and the test results shared with the patients GP practice to inform a potential diagnosis of hypertension. At July 2024, 65 pharmacies in CW&C are registered to provide a hypertension case finding service

3.1.13 Lateral Flow Device (LFD) Service

This is a walk-in service where patients or their representatives can collect one box of 5 LFD tests from a participating community pharmacy on confirmation that the patient is part of the potentially eligible for COVID-19 treatments cohort. All pharmacies in CW&C are registered to provide this service.

3.2.5 New Medicine Service (NMS)

Providing support for people with long-term conditions newly prescribed a medicine to help improve medicines adherence and enhance self-management of the long-term condition. All pharmacies in CW&C are registered to provide this service.

3.2.6 Pharmacy Contraception Service

At a patients request, pharmacies can initiate oral contraception or restart oral contraception following a pill free break. A person who is being switched to an alternative pill following consultation can also be considered as an initiation. The pharmacy can also provide an on-going supply of oral contraception to those originally supplied oral contraception by a primary care provider or sexual health clinic (or equivalent). There are 53 pharmacies registered to provide contraception services in CW&C.

3.2.7 Pharmacy First

The advanced service involves pharmacists providing advice and NHS-funded treatment, where clinically appropriate, for seven common conditions (age restrictions apply): Sinusitis, sore throat, acute otitis media, infected insect bite, impetigo, shingles and uncomplicated UTI. 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. At July 2024, 67 pharmacies are registered to provide this service in CW&C.

3.2.8 Smoking Cessation Service

All people admitted to hospital who smoke are offered NHS-funded tobacco dependency treatment services. This service enables NHS trusts to undertake a transfer of care on patient discharge, referring patients (where they consent) to a community pharmacy of their choice to continue their smoking cessation treatment, including providing medication and support as required. The ambition is for referral from NHS trusts to community pharmacy to create additional capacity in the smoking cessation pathway.

At July 2024, 65 pharmacies in CW&C are registered to provide a smoking cessation service.

3.3 Enhanced Services

Are those commissioned, developed and negotiated locally based on the needs of the local population. Enhanced services are commissioned by NHSE either directly or on behalf of other organisations such as local authority public health teams or Integrated Care Boards. The PNA will inform the future commissioning need for these services. The term ‘enhanced services’ can only be used to describe services commissioned by NHSE.

There is currently one enhanced service, COVID-19 vaccinations. This is available for patients aged 75 years and over, residents in a care home for older adults, and individuals aged 6 months and over who are immunosuppressed. At August 2024, there were 29 community pharmacies providing COVID-19 vaccinations.

3.4 Locally commissioned services

Under the current regulations, “locally commissioned services” may still be developed and negotiated based on the needs of the local population. These services can be commissioned from a pharmacy by the local authority public health teams (LAPHT), NHS Cheshire and Merseyside Integrated Care Board (ICB) and NHS trusts. Both community NHS trusts and secondary care NHS trusts (hospital trusts) may commission services from community pharmacists. A full list of which pharmacy is commissioned to provide which service is included in appendix two table A2-4.

It is possible for neighbouring organisations to commission similar services from pharmacies at differing remuneration rates or using different service specifications/patient group directions. This is because financial/commissioning arrangements for services are based on local negotiation and are dependent on available resources as well as local need. This does, however, lead to duplication of effort for commissioning staff and difficulties for locum pharmacists working across Health and Wellbeing Board /ICB boundaries. Wherever possible commissioners are advised to work together to eliminate such anomalies and provide continuity of patient care across local boundaries.

The continuity of local service provision is often difficult for contractors to achieve as individual pharmacists/locums who are accredited to provide these services may move around, thus gaps in service can appear, especially if training isn’t available for new staff. This should be addressed by both the contractors and commissioners but may result in some of the information in this document relating to local service provision being subject to change. The Declaration of Competence (DoC) system helps with this. DoC is a self-assessment framework that allows pharmacy professionals to declare their competence to deliver a public health service. A structured series of steps needs to be

worked through to ensure that they have the appropriate skills, knowledge and behaviours to deliver high quality, consistent services.

3.4.1 Emergency Hormonal Contraception (EHC)

This service is for the provision of free Emergency Hormonal Contraception (EHC) to all females that require the service. The aims of the service are to:

- Improve access to emergency contraception, safer sex and sexual health advice.
- Reduce the number of unintended pregnancies in the client group by use of EHC.
- Refer all clients accessing this service into mainstream contraceptive services for ongoing contraceptive needs.
- Increase the knowledge of risks associated with sexually transmitted infections (STIs).
- Refer clients at risk of STIs to an appropriate service.
- Increase knowledge, especially among young people, of the availability of EHC from the community pharmacy setting.

At December 2024 there are 39 pharmacies registered to provide this service in CW&C.

3.4.2 Substance Misuse – Supervised Consumption

A resident can use this service if they are prescribed methadone by the commissioned drug and alcohol treatment service and they require this to be taken under supervised conditions. At December 2024, there were 20 pharmacies in CW&C commissioned by the local authority to provide this service.

3.4.3 Substance Misuse – Needle Exchange

CW&C residents can collect a bag of mixed sterile needles if they don't already receive them from the LA commissioned drug and alcohol treatment service. At December 2024 there were five pharmacies in CW&C commissioned by the local authority to provide this service.

3.4.4 Sharps Return Service

Patients with a prescription can collect a sharps bin, a specifically designed box with a lid, from a pharmacist who is commissioned for a sharps return service. Once full, the box can be returned to the pharmacist for safe disposal. At December 2024, there were 11 pharmacies commissioned to provide this service.

3.4.5 Urgent Palliative Care Medicines Service

Cheshire West Place commissions the Urgent Palliative Care Medicines Service from pharmacies in Cheshire West to ensure that residents have access to a defined list of medicines if needed urgently at end of life. Each pharmacy providing the service provides a quarterly assurance report stating that they have the palliative care formulary list of medicines in stock in anticipation of receiving prescriptions to dispense at short notice. This stock holding is retained in addition to the stock held at appropriate levels for the usual dispensing service of the pharmacy. The service is currently available from nine pharmacies in CW&C.

There is work ongoing to review the local commissioning arrangements for community pharmacy to provide a greater consistency of service delivery across the whole ICB geography for services such as urgent access to medicines.

Table 1: Summary of advanced, enhanced and locally commissioned services available in CW&C pharmacies

Type of service	Service name	Number of pharmacies providing the service	Is provision of this service adequate in CW&C?
Advanced Service	Appliance Use Reviews (AUR)	0	Yes as this is a specialist service accessed remotely
	Hypertension Case Finding Service	65	Yes
	Lateral Flow Device Service	68	Yes
	New Medicines Service	68	Yes
	Flu Vaccination Programme	60	Yes
	Contraception Services	53	Yes
	Pharmacy First Service	67	Yes
	Smoking Cessation Service	65	Yes
	Stoma Appliance Customisation Service	0	Yes as this is a specialist service accessed remotely
Enhanced Service	COVID-19 Vaccination Service	29	Yes, provision in each community partnership plus roving bus
Locally commissioned NHS	Urgent Palliative Care Medicines Service	9	Yes, this is a specialist service and at Jan 2023 is being reviewed for Cheshire & Merseyside
Locally commissioned Public Health	Emergency Hormonal Contraception	39	Yes, provision in each community partnership
	Substance misuse – Needle exchange	5	No, identified as an area of potential service need and access improvement and is being reviewed
	Substance misuse service – Supervised consumption	20	No, identified as an area of potential service need and access improvement and is being reviewed
Locally commissioned Council Waste Management	Sharps Return Service	11	No, identified as an area of potential service need and access improvement and is being reviewed

Source: Cheshire & Merseyside ICB, Community Pharmacy England; Cheshire West and Chester Public Health Team

3.5 Funding the Pharmacy Contract

The essential and advanced services of the community pharmacy contract are funded from a national 'Pharmacy Global Sum' agreed between the PSNC and the Treasury. This is divided up and devolved to NHS England as a cash-limited budget which is then used to reimburse pharmaceutical service activity as per the Drug Tariff. Funding for locally commissioned services is identified and negotiated from commissioners' own budgets.

3.6 Quality Standards for Pharmaceutical Service Providers: Community Pharmacy Assurance Framework

The ICB area team requires all pharmaceutical service providers to meet the high standards expected by patients and the public. All pharmacies providing NHS services are included within a programme of assurance framework monitoring visits. The delivery of any locally commissioned services is scrutinised by the commissioner of each of the services under separate arrangements. As stated within the NHS review 2008, high quality care should be as safe and effective as possible, with patients treated with compassion, dignity and respect³. This statement is as meaningful to pharmacies as to other NHS service providers and is the principle that the ICB team adopts when carrying out the Community Pharmacy Assurance Framework Monitoring visits for essential and advanced services.

The Community Pharmacy Assurance Framework process follows a structured sequence of events including:

- Self-assessment declarations.
- A rolling programme of pre-arranged visits to pharmacies for observation of processes and procedures and a detailed interview with the pharmacist in charge and support staff.
- Scrutiny of internal processes for confidential data management.
- Recommendations for service development or improvement.
- Structured action plan with set timescales for completion.

In addition to the structured process outlined above, the ICB team will also take into account findings from the annual community pharmacy patient questionnaire that is undertaken by the pharmacy contractor as well as any patient complaints relevant to pharmacy services. In cases where the professional standards of an individual pharmacist is found to fall below the expected level, the ICB team will work with the relevant professional regulatory body, such as the General Pharmaceutical Council, to ensure appropriate steps are taken to protect the public.

4. Overview of current providers of Pharmaceutical Services

4.1 Community Pharmacy Contractors

Community pharmacy contractors can be individuals who independently own one or two pharmacies, or large multinational companies e.g., Boots, Well etc. who may own many hundreds of pharmacies UK wide.

At January 2025, CW&C had 68 community pharmacy contractors, plus one distance selling 'internet' pharmacy. Every pharmacy premise must have a qualified pharmacist available throughout all of its contractual hours, to ensure services are available to patients. In general pharmacy services are provided free of charge, without an appointment, on a "walk-in" basis. Pharmacists dispense medicines and appliances as requested by "prescribers" via both NHS and private prescriptions.

Full details of community pharmacies operating in Cheshire West and Chester can be seen in appendix two table A2-1 and A2-2.

4.2 Dispensing Doctors

Dispensing Doctors services consist mainly of dispensing for those patients on their dispensing list who live in more remote rural areas. There are strict regulations which stipulate when and to whom doctors can dispense. There are five dispensing doctors within the borough. Cheshire West PCN includes one dispensing doctor who is physically located in Cheshire East Local Authority area, equating to a total of six dispensing doctors in Cheshire West and Chester. Appendix two table A2-5 shows dispensing doctors located in CW&C borough.

4.3 Appliance Contractor

Appliance Contractors cannot supply medicines but are able to supply product such as dressings, stoma bags, catheters etc. There is one appliance contractor located in Chester.

4.4 Local Pharmaceutical Services (LPS)

This is an option that allows commissioners to contract locally for the provision of pharmaceutical and other services, including services not traditionally associated with pharmacy, within a single contract. Given different local priorities, LPS provides 22 commissioners with the flexibility to commission services that address specific local needs which may include services not covered by the community pharmacy contractual framework. There are currently no LPS contracts in CW&C.

4.5 Acute Hospital Pharmacy Services

Hospital Trusts have pharmacy departments whose main responsibility is to dispense medications for use on the hospital wards for in-patients and during the out-patient clinics. There are two main acute hospital trusts within CW&C:

- The Countess of Chester Hospital NHS Foundation Trust manages two hospitals in CW&C. The Countess of Chester Hospital is the main hospital and is located in Chester, and

Ellesmere Port Hospital is a rehabilitation unit (there is no Accident and Emergency Department) based in Ellesmere Port.

- Mid Cheshire Hospital NHS Foundation Trust (MCHT) manages three facilities. Two are in CW&C, Elmhurst Intermediate Care Centre which is a rehabilitation unit located in Winsford, and Victoria Infirmary in Northwich. The main hospital for MCHT is located in Crewe in Cheshire East Local Authority but will be the nearest hospital for some CW&C residents.

4.6 Mental Health Pharmacy Services

The population of CW&C is served by Cheshire and Wirral Partnership NHS Foundation Trust (CWP). The Trust provides mental health, learning disability and Starting Well services in CW&C. The Trust employs pharmacists to provide clinical advice within their specialist areas and they also commission a dispensing service from a community pharmacy in order to dispense the necessary medications for their patients. The CWP Pharmacy Team have a unique system which also informs local pharmacies if extra care or counselling is required for prescribed medicines such as some antipsychotics or antidepressants.

4.7 Urgent Care Centres

There is one urgent care centre in CW&C located at the Countess of Chester Hospital. The centre can see patients for urgent injuries or illnesses if they have a booking or referral and will provide access to any medication deemed necessary as a result.

4.8 Bordering Services/ Neighbouring Providers

The population of Cheshire West and Chester can access services from pharmaceutical providers not located within the Local Authority's own boundary. This includes Cheshire East, Wirral, Halton, Warrington, Shropshire, Wrexham and Flintshire. When hearing pharmacy contract applications or making local service commissioning decisions, the accessibility of services close to the borders will need to be considered. A map can be seen on page 33.

5. Accessibility of Pharmaceutical Provision

5.1 Pharmacy locations

Section four above describes pharmacy provision in CW&C. Table 2 below summarises community dispensing premises which fall within the Cheshire West and Chester Local Authority boundary.

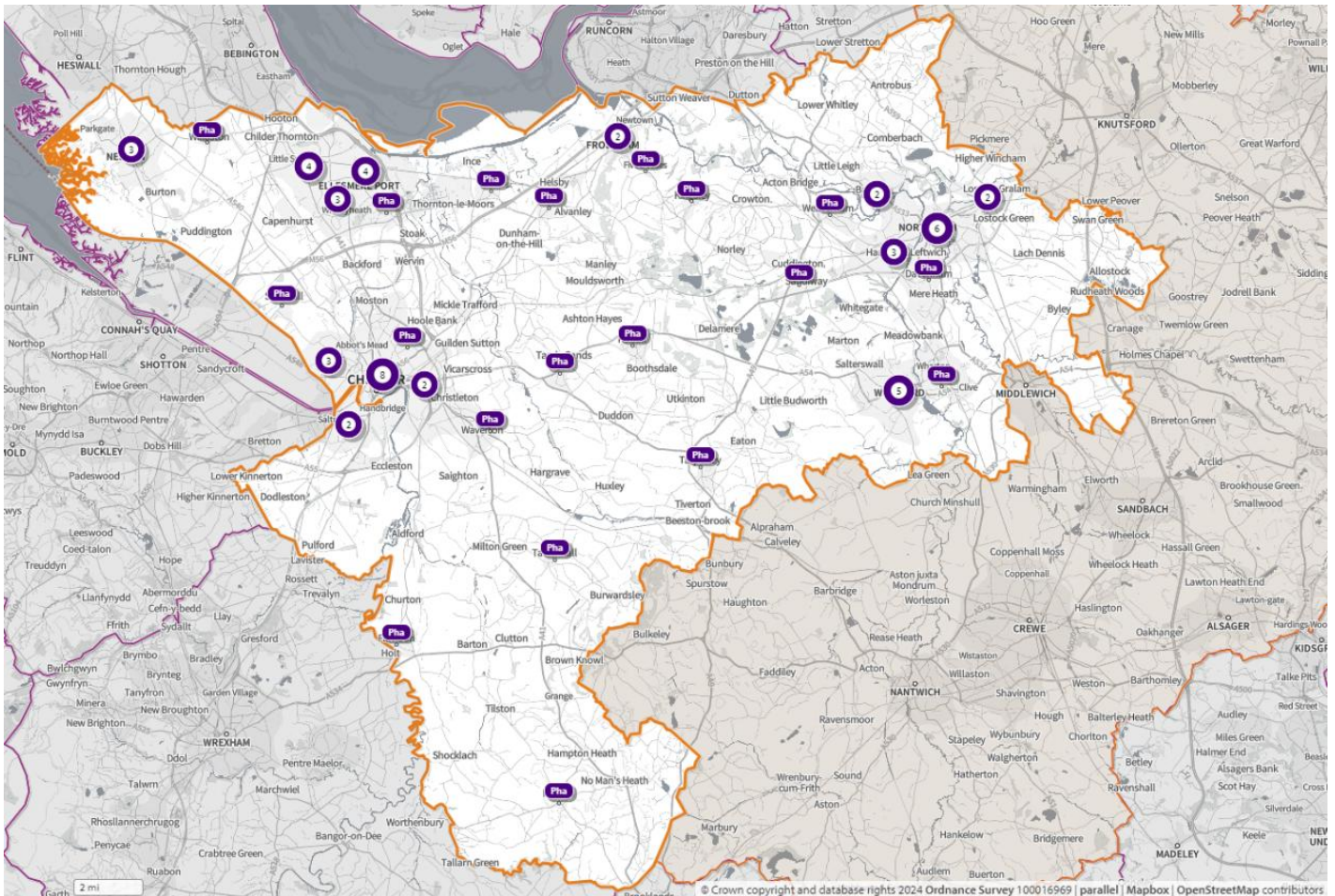
Table 2: Community dispensing premises located in CW&C January 2025

Community Partnership	Community pharmacies	Distance selling pharmacy	Dispensing appliance contractors	Dispensing GP practices
Chester Central	6			
Chester East	5			
Chester South	7	1	1	
Ellesmere Port	12			
Helsby & Frodsham	5			1
Neston & Willaston	4			
Northwich	16			
Rural	7			4
Winsford	6			
Cheshire West & Chester	68	1	1	5

Source: NHS Business Services Authority, Dispensing Contractors Data

At January 2025, there were 68 community pharmacies in CW&C. Map 1 shows the location of these pharmacies, and a full list is included in appendix 2 table A2-1.

Map 1: Location of community pharmacies in CW&C



Source: SHAPE

Appendix 2 table A2-1 includes a list of pharmacies and which community partnership they are in.

Nationally there are a total of 10,611 community pharmacies for a population of 57,690,300 equating to an average of approximately one pharmacy for every 5,437 members of the population (number of pharmacies reported in Consolidated Pharmaceutical List, Q1 2024/25). CW&C has one pharmacy for every 5,290 people (based on ONS Mid-year 2023 population estimate of 365,061 resident population), meaning CW&C has a slightly larger number of pharmacies in relation to the size of its population (18.9 per 100,000) when compared to the England average (18.4 per 100,000). This is based on total pharmacies (69), both 'high street' and distance-selling as it was not possible to separate the distance-selling pharmacies from the national list.

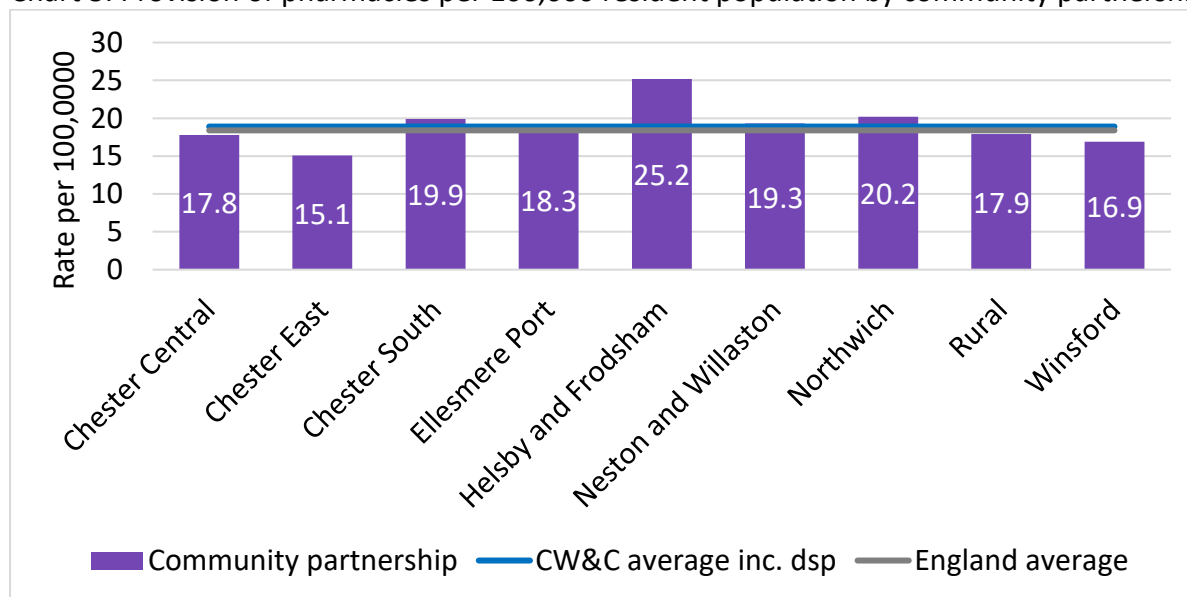
This provision ranges across the borough when analysed in terms of pharmacies per 100,000 population at community partnership level (see chart 1 and table 3).

Table 3: Provision of pharmacies by community partnership at January 2025

Community Partnership	Community pharmacies	Resident population	Population served per pharmacy	Pharmacies per 100,000 population
Chester Central	6	33,740	5,623	17.8
Chester East	5	33,167	6,633	15.1
Chester South	7	35,147	5,021	19.9
	8 with dsp		4,393	22.7
Ellesmere Port	12	65,497	5,458	18.3
Helsby and Frodsham	5	19,821	3,964	25.2
Neston and Willaston	4	20,646	5,162	19.3
Northwich	16	79,095	4,943	20.2
Rural	7	39,053	5,579	17.9
Winsford	6	35,528	5,921	16.9
CW&C	68	365,061	5,369	18.6
	69 with dsp	365,061	5,290	18.9
England	10,611	57,690,300	5,437	18.4

Note: DSP is distance-selling pharmacy. CW&C has one located in Chester South community partnership. England figures include DSPs.

Chart 3: Provision of pharmacies per 100,000 resident population by community partnership



Note: The CW&C average includes one distance-selling pharmacy to enable comparison with the England average which includes all dsp's. Community partnership provision does not include the dsp to demonstrate the availability of community pharmacies for residents.

The community partnerships containing the highest concentration of pharmacies are Northwich (15 pharmacies) and Ellesmere Port (12 pharmacies). These have the highest resident population.

Helsby and Frodsham community partnership has the highest provision of pharmacies per 100,000 resident population (25.2 per 100,000) followed by Northwich (20.2 per 100,000). The high rate in Helsby and Frodsham reflects its smaller population. Helsby and Frodsham also has a dispensing doctor located in the community partnership. Chester East community partnership has the lowest provision of pharmacies per 100,000 population (15.1 per 100,000) followed by Winsford community partnership (16.9 per 100,000).

There are five community partnerships with a lower provision of pharmacy per 100,000 population than the England average – Chester East, Winsford, Rural, Chester Central and Ellesmere Port.

5.2 Changes in provision since the 2022 published PNA

Since the publishing of the previous PNA, CW&C has eight less pharmacies operating (at January 2025). Closures have taken place in the following community partnerships:

- Chester Central has had two pharmacies close
- Chester East has had one pharmacy close
- Ellesmere Port has had three pharmacies close
- Northwich has had two pharmacies close

Table 4: Changes in the number of community pharmacies

Community partnership	Pharmacies at Jan 2022	Pharmacies at Jan 2025	Movement
Chester Central	8	6	-2
Chester East	6	5	-1
Chester South	7	7	No change
Ellesmere Port	15	12	-3
Helsby and Frodsham	5	5	No change
Neston and Willaston	4	4	No change
Northwich	18	16	-2
Rural	7	7	No change
Winsford	6	6	No change
CW&C	76	68	-8

Note: This does not include distance-selling pharmacies

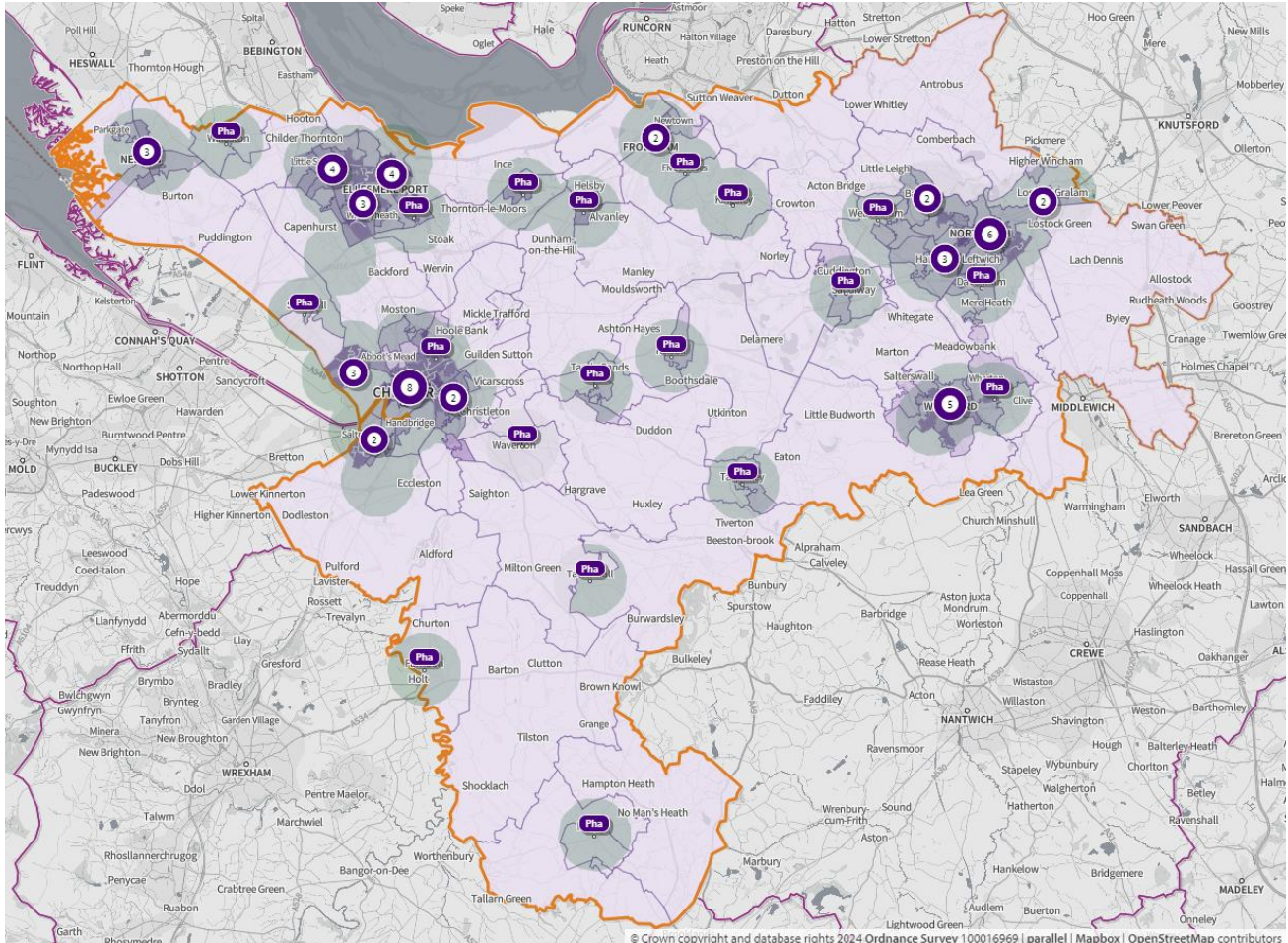
If we compare to the PNA published in 2018, CW&C has lost a total of 11 pharmacies across the borough, the majority of these are from Chester Central (5 closures) and Ellesmere Port (4 closures) community partnerships.

5.3 Pharmacy provision by population density

We have used the Strategic Health Asset Planning and Evaluation (SHAPE) Atlas tool, which is an online, interactive, data mapping, analysis and insight resource to help explore and understand pharmacy provision and access in the borough. SHAPE is used by the Department of Health and Social Care to support the strategic planning of services and assets across the public sector. However, at the time of analysis (January 2025), SHAPE is using 2022 midyear population estimates, with the CW&C population as 361,696.

If we overlay population density to the map, we can see that in all areas of high population density (taken as greater than 4388 people/km²) there is pharmacy provision within a one-mile distance radius (see map 2 below).

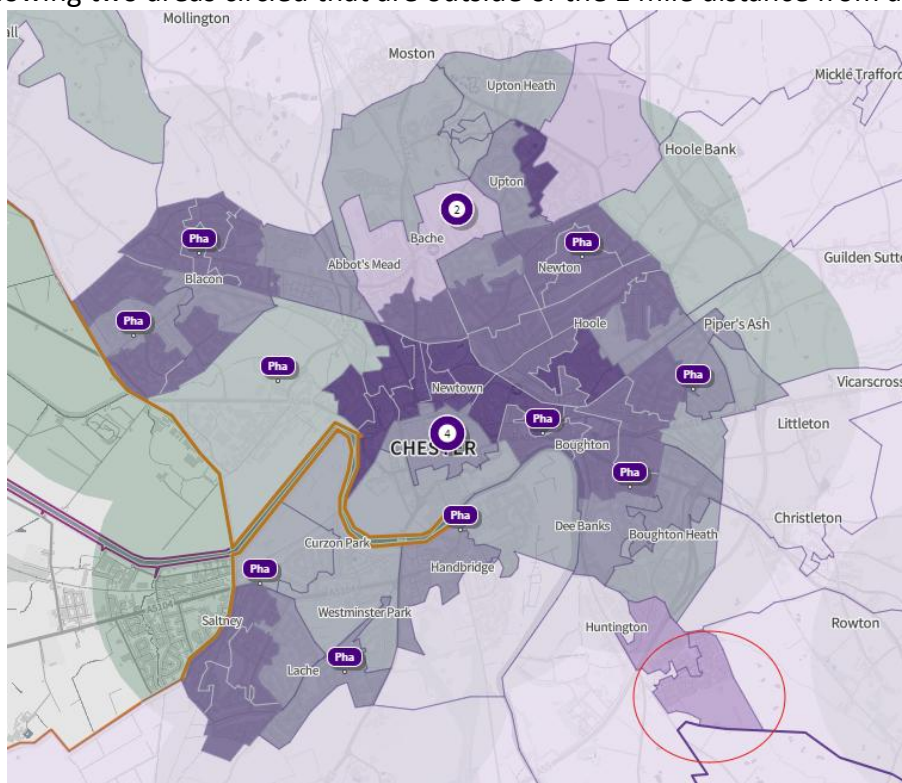
Map 2: Location of community pharmacies overlaid with population density and one mile distance radius



Source: SHAPE

Looking at the next level down, areas with an estimated population density between 2,628 to 4,388 people/km², all except two areas are within a one-mile distance radius. The two areas that fall outside of this distance are within the Christleton and Huntington ward, which is in Chester East community partnership. However, both of these areas are within a 15 minute drive time to a pharmacy even in rush hour. These areas are circled in red on the zoomed in map 3.

Map 3: Map showing two areas circled that are outside of the 1 mile distance from a pharmacy

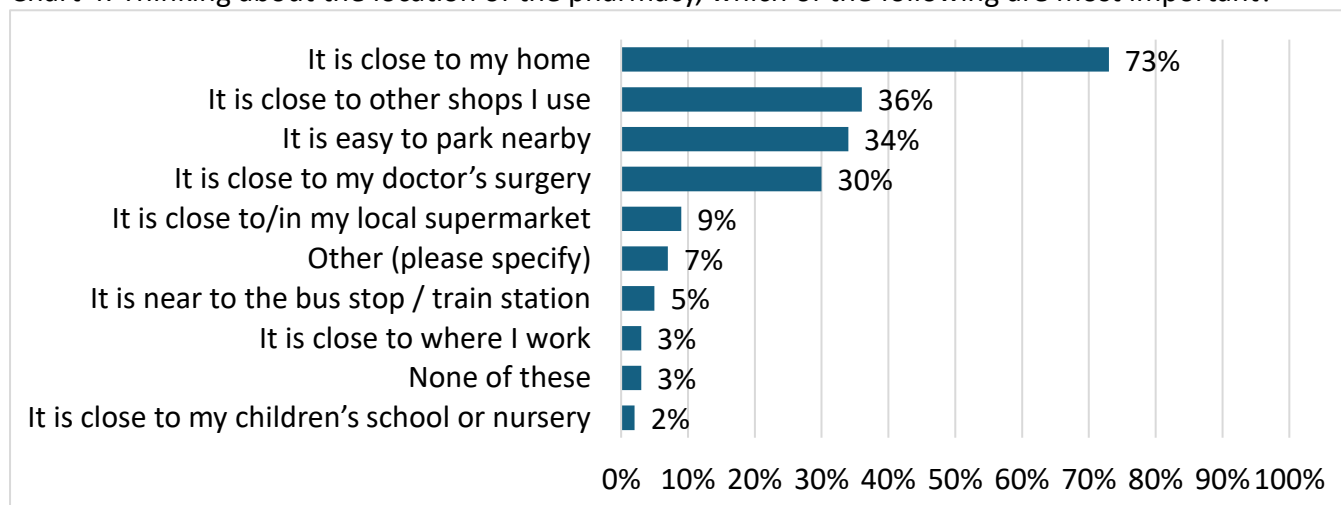


Source: SHAPE

5.4 Drive and walk time to pharmacies

The distance radius to a pharmacy may not reflect the actual distance needed to travel, as this is dependent on roads and footpaths. In the public survey of community pharmacy services, undertaken in November 2024, 73% of respondents stated the most important reason for choosing their regular pharmacy was that it was close to their home, 36% said that it was close to other shops they use and 34% said that it is easy to park nearby.

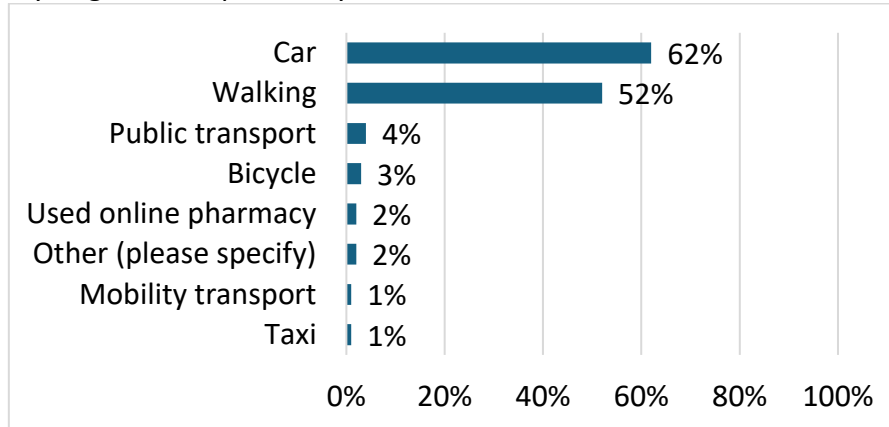
Chart 4: Thinking about the location of the pharmacy, which of the following are most important?



Source: Patient Survey of Community Pharmacy Services, November 2024. Responses to the patient survey are detailed in appendix 3.

Respondents to the community pharmacy services survey were also asked how they got to the pharmacy - 60% said they used a car and 52% walked. Only a small number of respondents used other forms of transport.

Chart 5: How did you get to the pharmacy?

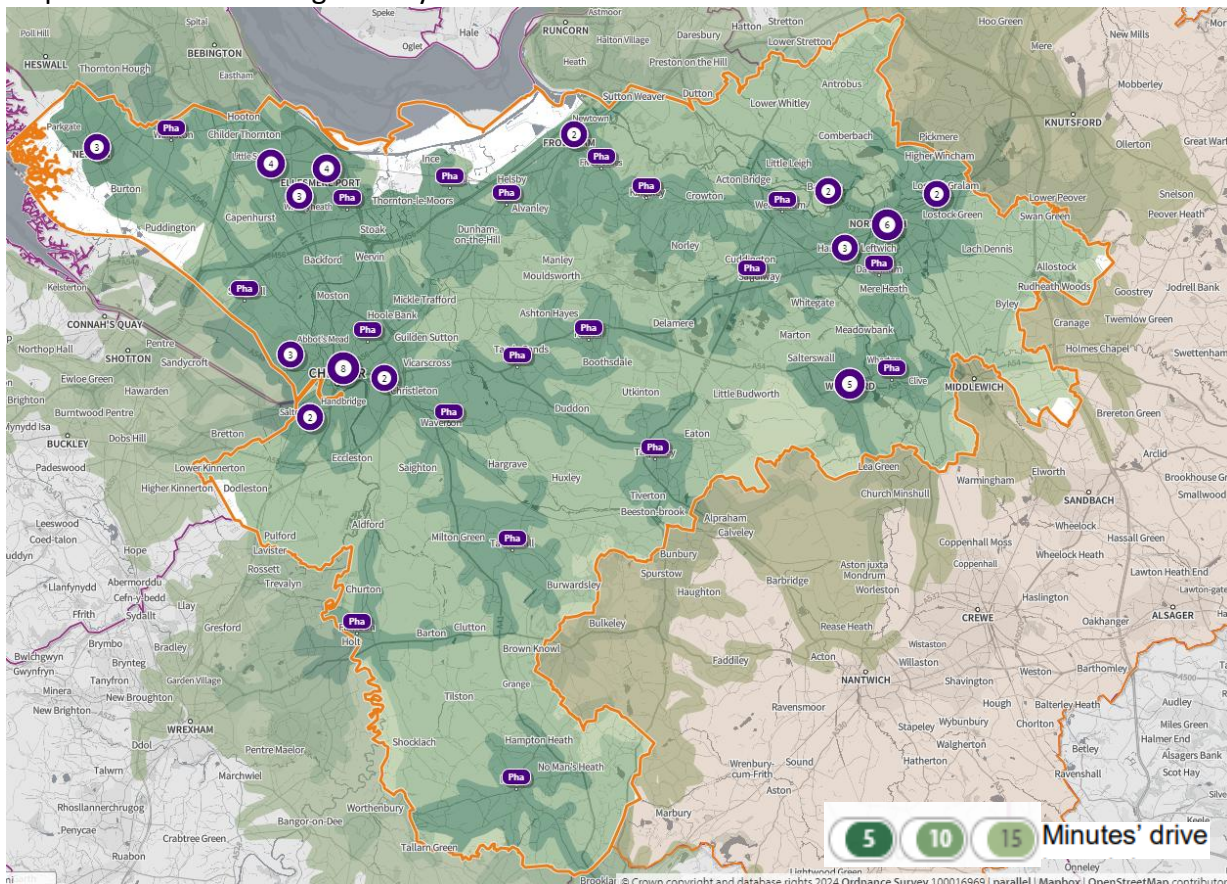


Source: Patient Survey of Community Pharmacy Services, November 2024

5.4.1 Drive time to a pharmacy

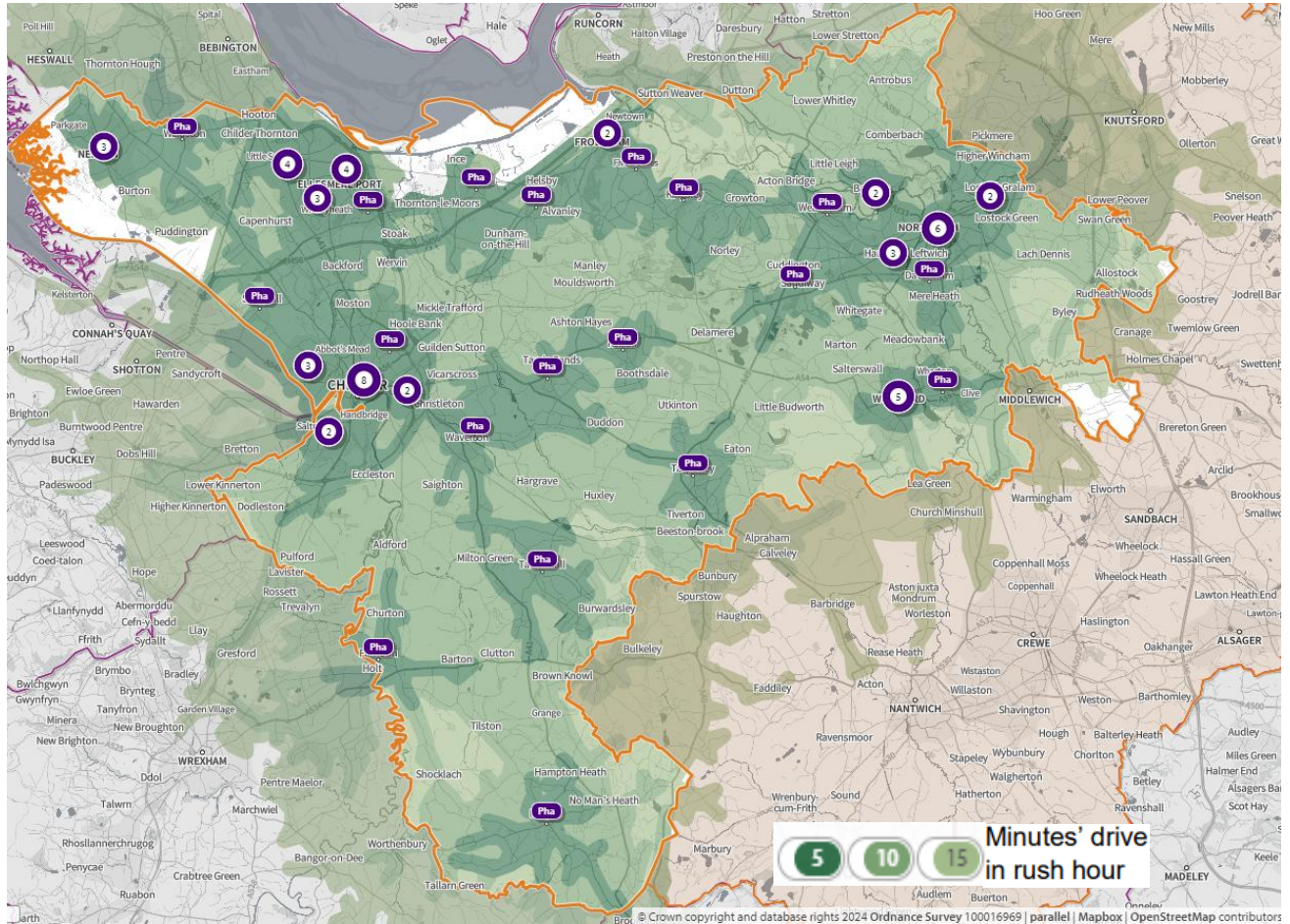
Mapping drive times during the day and during rush hour, demonstrates that no location in CW&C is more than a 15-minute drive from a pharmacy (see map 4), including in rush hour (map 5).

Map 4: Drive time during the day



Source: SHAPE

Map 5: Drive time during the day in rush hour



Source: SHAPE

Table 5: Drive time to a pharmacy

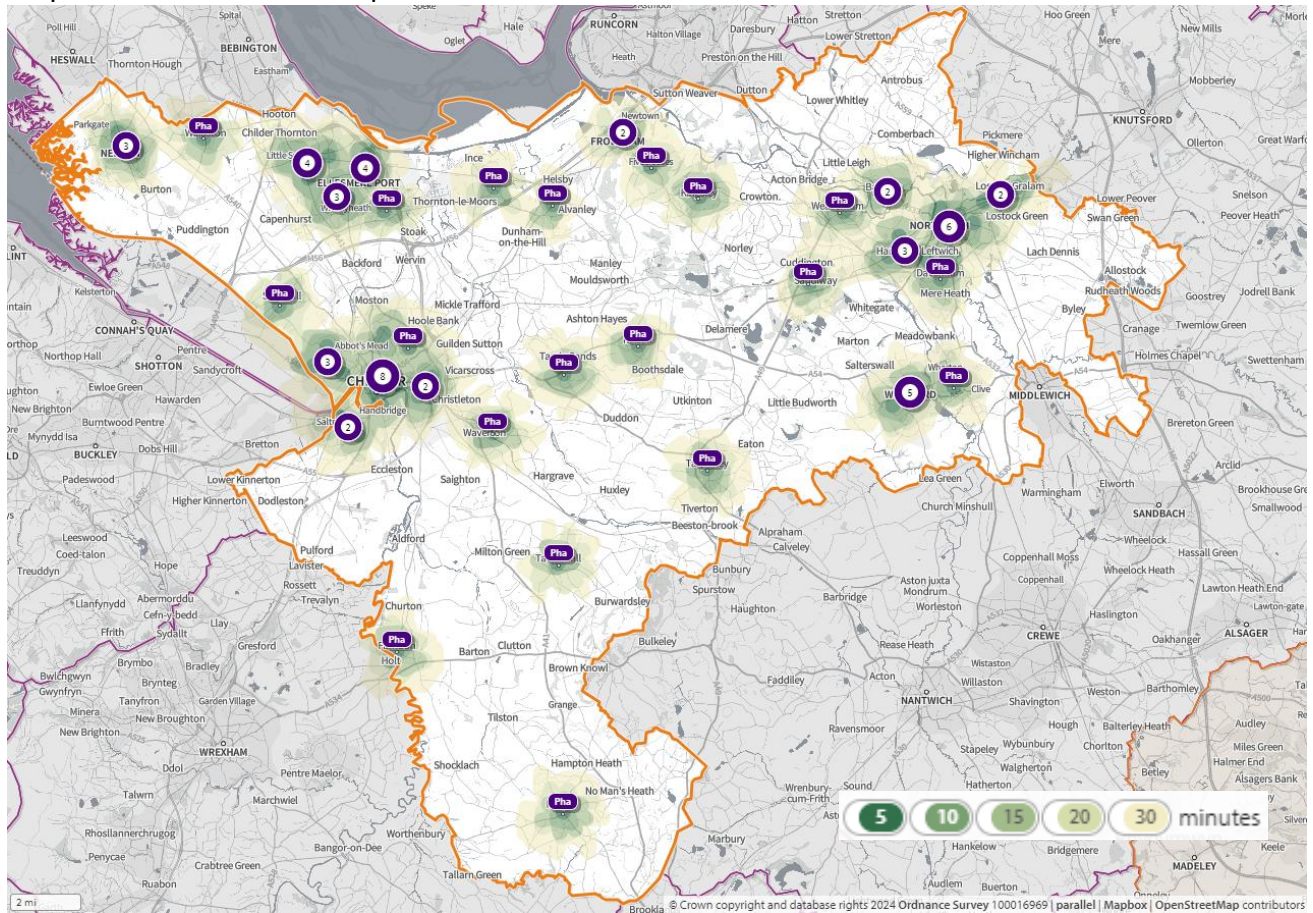
Minutes drive	Included population	% of population included	Excluded population	% of population excluded
5	336,823	93.1%	24,871	6.9%
10	360,240	99.6%	1,454	0.4%
15	361,696	100%	0	0%

Source: SHAPE

5.4.2 Average walk time to a pharmacy

For those who need to or choose to walk, accessibility to a pharmacy is more limited. Approximately 84% of residents live within a 20-minute average walk of their local pharmacy (around 303,600 people). Of those who don't, which is around 58,100 residents, 61% live in rural areas (around 35,700 residents) and 27% live in a city or town (around 15,700 people). Map 6 shows walking time to CW&C community pharmacies.

Map 6: Walk time to CW&C pharmacies



Source: SHAPE

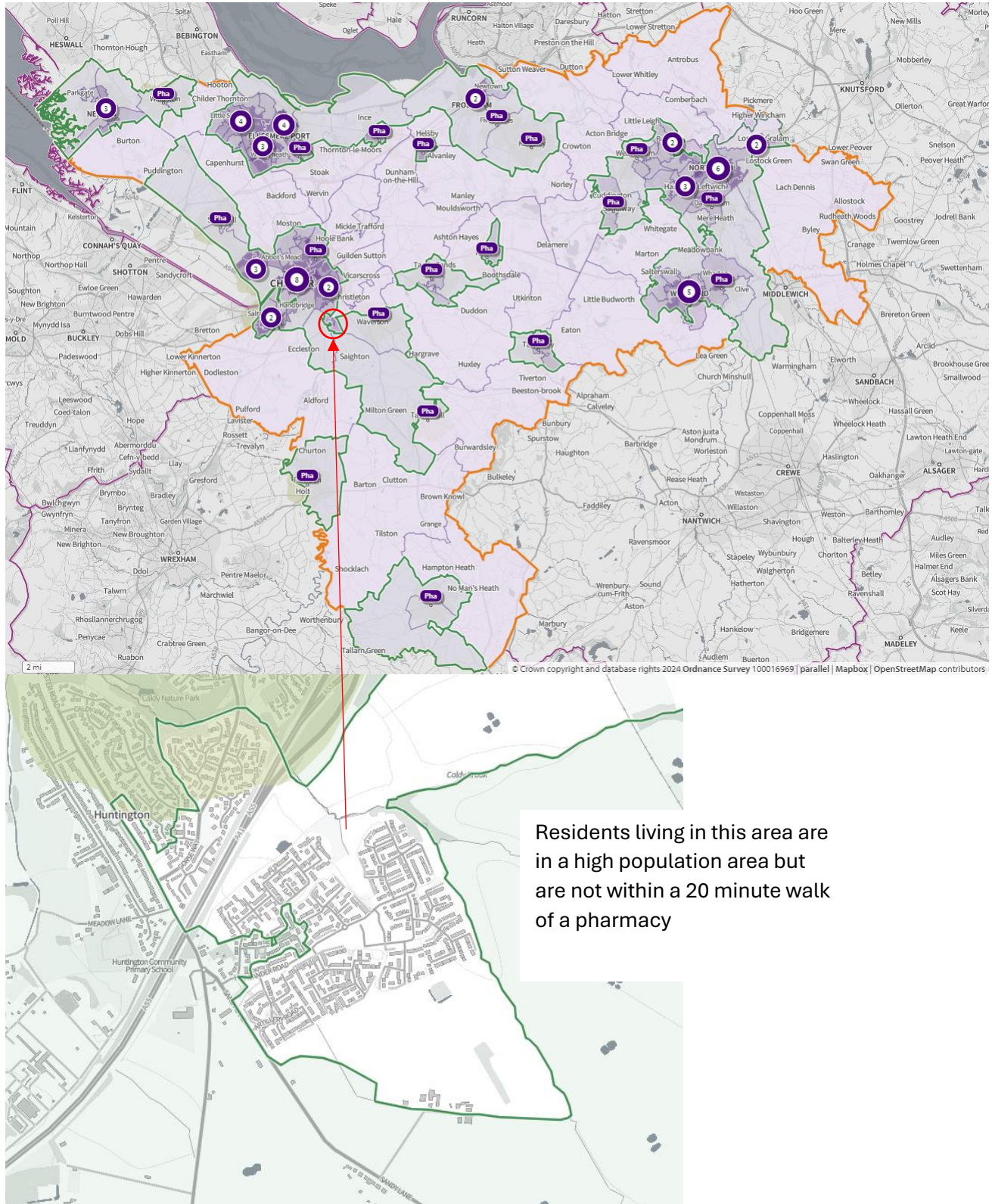
Table 6: Population within an average 30 minutes' walk time to a pharmacy

Minutes walk	Included population	% of population included	Excluded population	% of population excluded
5	124,884	35%	236,810	65%
10	213,460	59%	148,234	41%
15	274,253	76%	87,441	24%
20	303,577	84%	58,117	16%
30	323,082	89%	38,612	11%

Source: SHAPE

Map 7 shows areas that are within a 20 minute walk of a pharmacy (marked out in green) overlaid with population density. This shows that in almost all high population density areas, there is a pharmacy within an average 20 minute walk. The exception to this is the area highlighted previously in Christleton and Huntington ward marked with a red circle.

Map 7: Average walk time of 20 minutes overlaid with population density



Source: SHAPE

5.4.3 Public transport to a pharmacy

Those unable to walk and do not have access to a car, may be able to use public transport. In the public survey, 1 in 20 (5%) of respondents used public transport to get to their pharmacy. In the

contractor survey completed with pharmacies in September 2024, 23 pharmacies said that they were within 100 metres of a bus stop or train stop, 28 were between 100m to 500m, and three were between 500 to 1000 metres. 15 did not answer the question.

The SHAPE tool allows us to map travel times to local pharmacies using buses, trams and rail coverage. This tells us that:

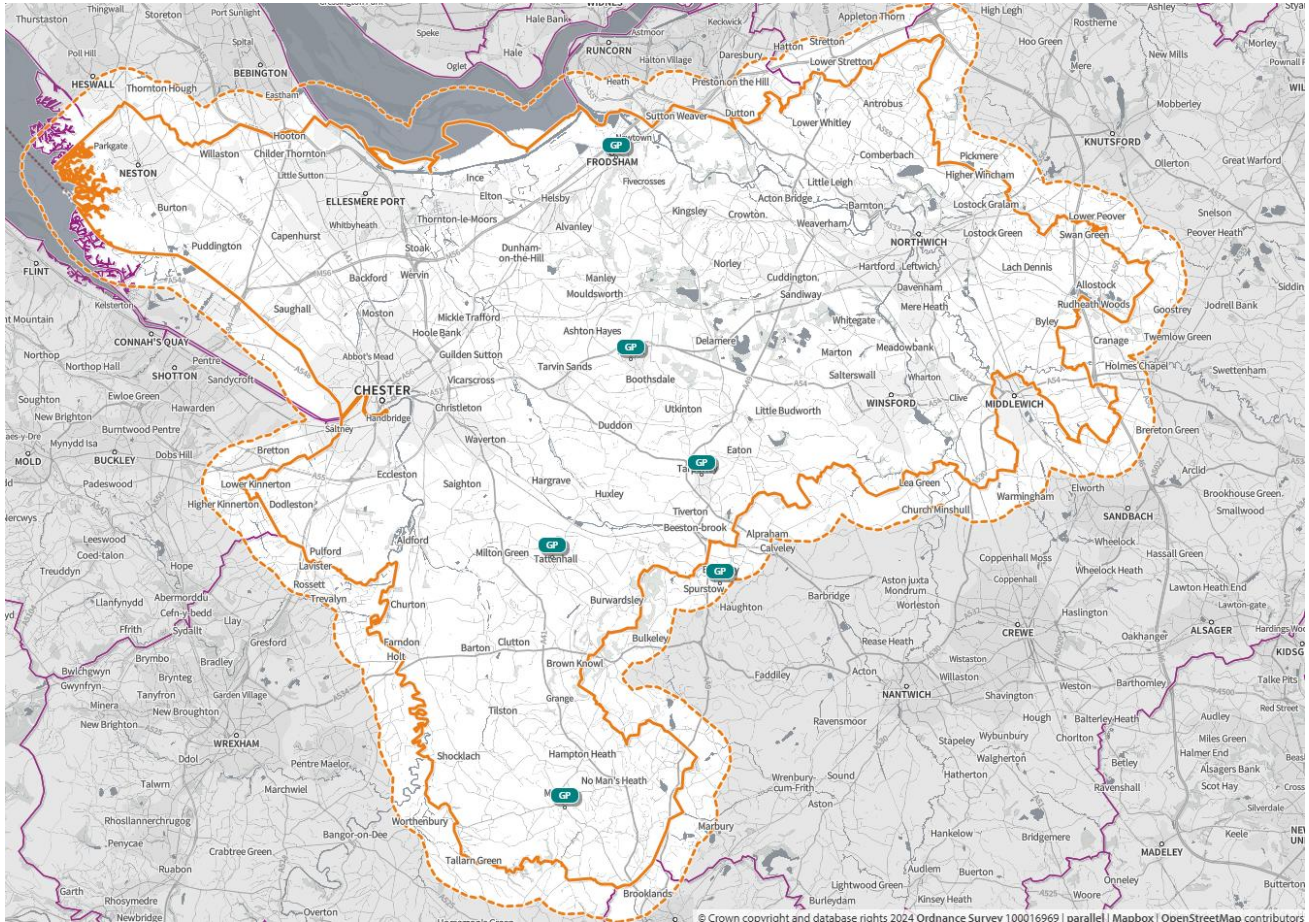
- If travelling during a weekday morning:
 - 93% of residents are within a 30-minute commute to a pharmacy using public transport, which represents approximately 336,000 residents. Whilst 87% are within a 20-minute commute, relating to approximately 316,000 residents.
 - Notably, 7% of residents (approximately 25,600), are not within a 30-minute commute. Of these residents 85% live in a rural area.
- If travelling on public transport during a weekday afternoon:
 - 97% of residents are within a 30 minute commute to a pharmacy, equating to approximately 351,529 residents.
 - 3% of residents (approximately 10,100) are not within a 30-minute commute on public transport.

5.4.4 Dispensing doctors

Dispensing doctors are allowed to dispense medicines they prescribe to their patients. They cannot dispense medicines they have not prescribed or to residents that are not their patient. CW&C has five dispensing doctors located in the borough to support pharmaceutical need. In addition, there is a dispensing doctor located in Cheshire East which has been allocated to a Cheshire West and Chester Primary Care Network (PCN) and is used by a number of CW&C residents.

Taking these six dispensing doctors into account makes very little difference to the number of residents located within a 20-minute walk, equating to less than 100 residents. However, they will support demands on pharmacies and ensure sufficient coverage of services. Map 8 shows the location of dispensing doctors in CW&C, which includes a Cheshire East dispensing practice.

Map 8: Dispensing doctors in CW&C Primary Care Network

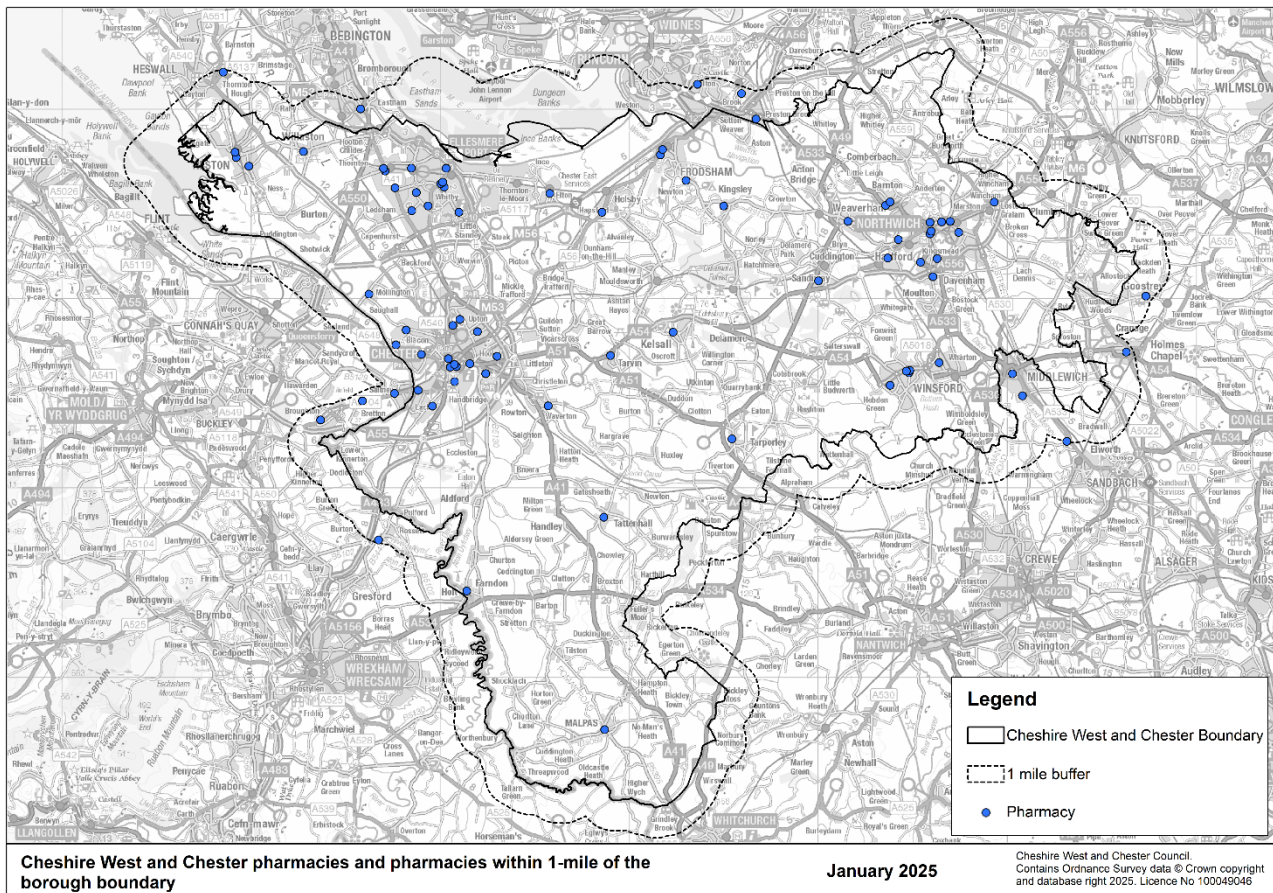


Source: SHAPE. Note: Appendix two table A2-5 shows dispensing doctors

5.4.5 Neighbouring community pharmacies

Residents may live closer to a pharmacy located out of borough in a neighbouring authority. CW&C borders Cheshire East, Shropshire, Wirral, Halton and Warrington, as well as North Wales. Map 9 shows location of pharmacies in CW&C and within a 1-mile radius of the LA boundary.

Map 9: Community pharmacies in CW&C and within a 1 mile radius of the border

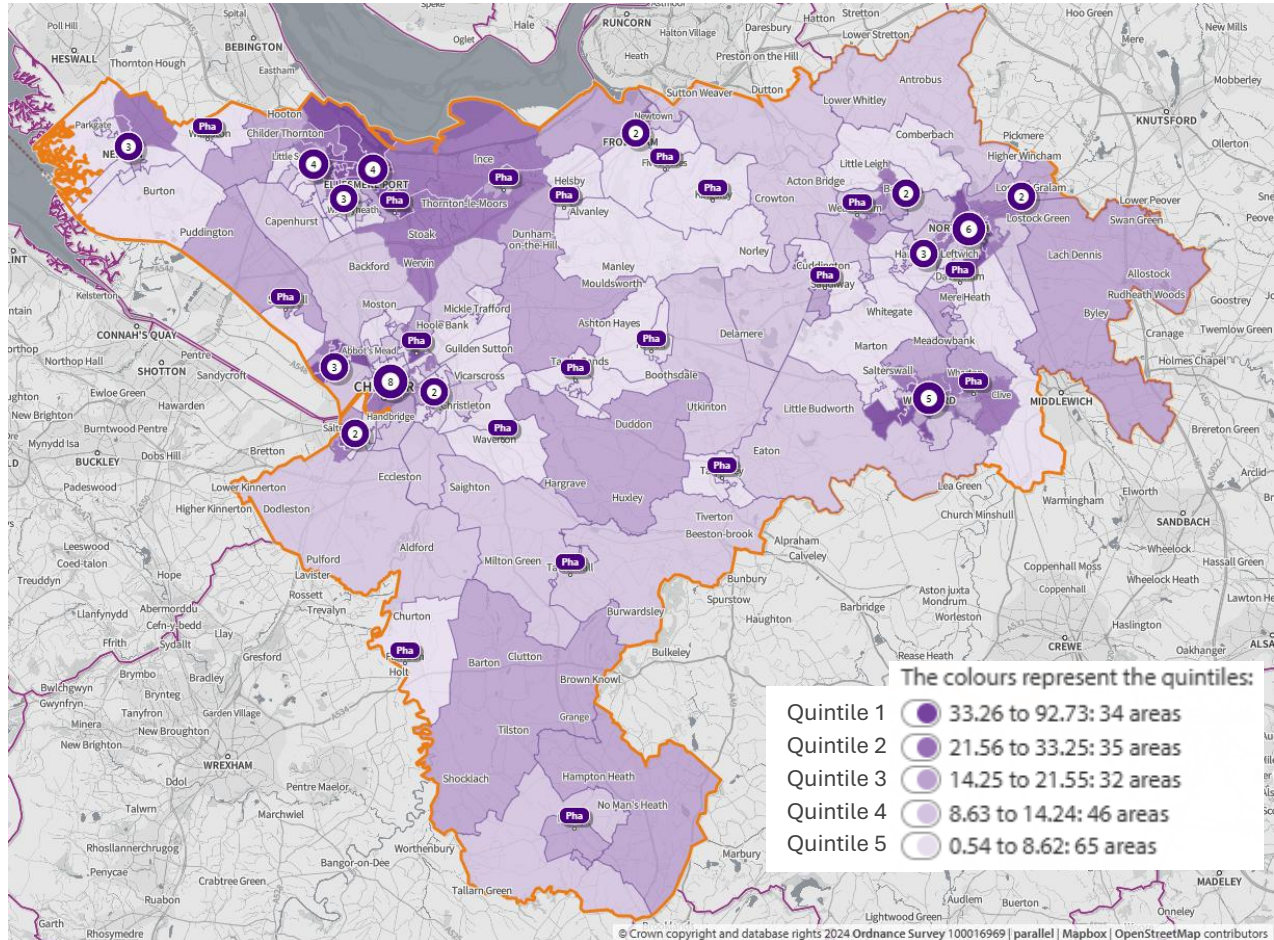


5.5 Pharmacy locations by Index of Multiple Deprivation (IMD)

The 2019 Government Office for Science paper 'Inequalities in Mobility and Access in the UK Transport System'⁴ identifies that the lowest income households have higher levels of non-car ownership. Low income households have a higher concentration of female heads of house, children and young people, older people, ethnic minority groups and those living with a disability that experience poorer health and greater inequalities.

In CW&C, residents living in the top 20% most deprived neighbourhoods in England, are within a 15-minute walk of a pharmacy. For those who prefer to use public transport they are within a 15-minute commute. Map 10 shows the location of pharmacies overlayed with the Index of Multiple Deprivation (IMD) 2019. The colours represent quintiles, with the darkest colour representing the 20% most deprived neighbourhoods in the borough and the lightest the 20% least deprived neighbourhoods.

Map 10: Pharmacy locations overlayed with the Index of Multiple Deprivation quintiles



Source: SHAPE

Table 7: Walk time to a pharmacy up to 30 minutes: Population excluded by IMD decile

Residents who cannot get to a pharmacy in...					
	5 minutes	10 minutes	15 minutes	20 minutes	30 minutes
Total excluded population (approx.)	233,464	146,606	87,441	58,117	38,612
% in IMD decile 1	7.5%	7.6%	0%	0%	0%
% in IMD decile 2	5%	4.3%	0%	0%	0%
% in IMD decile 3	8.8%	6.6%	3.4%	2.2%	0%
% in IMD decile 4	6.1%	4.3%	3.6%	0%	0%
% in IMD decile 5	3.2%	1.4%	2.3%	3.5%	5.2%
% in IMD decile 6	9.4%	11.8%	15.6%	16.9%	21.2%
% in IMD decile 7	15.1%	19.6%	28.9%	31.2%	28.0%
% in IMD decile 8	13.7%	11.9%	13.2%	17.3%	17.7%
% in IMD decile 9	15.8%	17.8%	21.8%	18.1%	14.6%
% in IMD decile 10	15.4%	14.8%	11.2%	10.9%	12.8%

Source: SHAPE

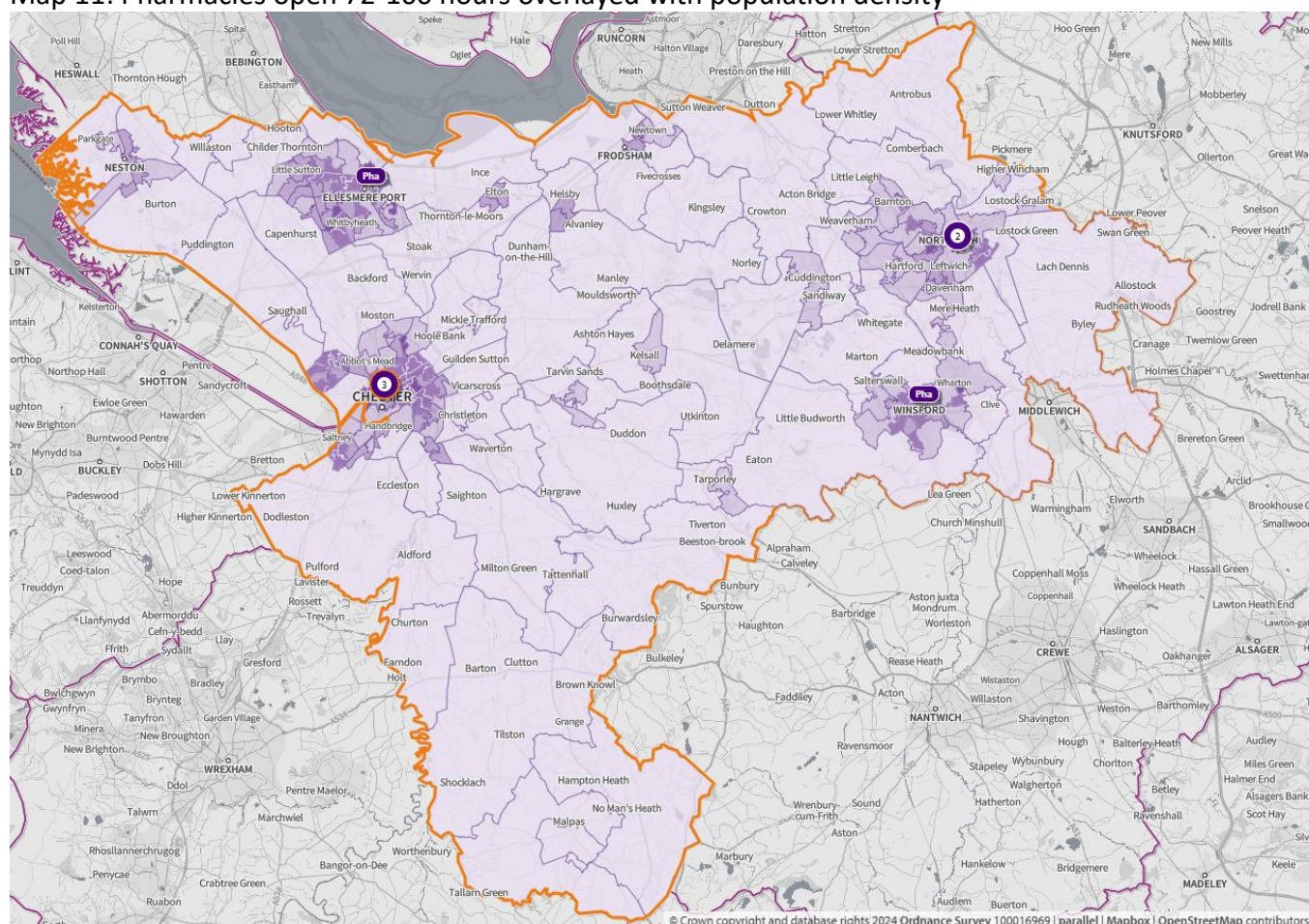
5.6 Pharmacy opening hours

Pharmacy opening hours are part of pharmacies' Terms of Service for providing NHS pharmaceutical services. Most pharmacies must open for 40 core contractual hours per week but they are free to set their own hours of opening. Some pharmacies must open between 72-100 core contractual hours. These were previously called 100 hour pharmacies but regulatory changes introduced in 2023 allows pharmacies to reduce the 100 core opening hours by a maximum of 28 hours, to 72 hours, with restrictions on reducing evening and weekend opening.

5.6.1 Pharmacies open 72-100 hours

There are seven pharmacies open between 72 and 100 hours per week. All of these are located in urban areas with high population density. All but two are in supermarkets. Map 11 shows pharmacies open 72-100 hours overlaid with population density.

Map 11: Pharmacies open 72-100 hours overlaid with population density



Source: SHAPE

5.6.2 Regular opening hours weekdays and weekends

Opening hours of each pharmacy are outlined in appendix two table A2-2 and taken from NHSBSA Consolidated Pharmaceutical List 2024-25 quarter one. Four changes to pharmacy times were made following the 60 day consultation from contractor feedback. These were verified using the NHS 'Find a Pharmacy' webpage [Find a pharmacy - NHS](https://www.nhs.uk/find-a-pharmacy/).

a) Weekdays

On weekdays, most pharmacies operate between 9am-5/6pm with just over a third closing during lunch. Fewer pharmacies are open outside of these core hours:

- Five pharmacies open early, one at 7am and four at 8am
- 20 open at 8:30am or 8:45am
- 41 pharmacies open at 9am and open at 9:30am
- 21 close at lunch time for 30-60 minutes
- 50 pharmacies close between 5 and 6pm
- 11 pharmacies close between 6:30/6:45pm
- One pharmacy close at 7pm, three close at 8pm, two close at 9pm and one closes at 10:30pm

Opening hours vary by community partnership, with Chester South having no pharmacies open before 9am or after 6pm. Neston and Willaston, also does not have a pharmacy open after 6pm, and pharmacies are closed by 6:30pm in Helsby and Frodsham and Rural community partnerships.

b) Saturdays

58 pharmacies are open on a Saturday but they offer limited opening hours:

- The majority of pharmacies open at 9am (51 pharmacies) with 6 opening between 8 and 8:30am and one opening at 7am
- Most pharmacies (38) are open for half a day between 3 and 4.5 hours
- 11 pharmacies are open for a full day 6.5-9.5 hours
- 8 are open for 10 or more hours

All community partnerships have pharmacies open on a Saturday, and all but Rural have at least one pharmacy open all day. There is less coverage later than 5pm on a Saturday, particularly in Chester South, Helsby and Frodsham, Neston and Willaston and Rural community partnerships.

c) Sundays

There are 11 pharmacies that are open on a Sunday with limited opening hours:

- Five pharmacies open at 10 to 10:30am and five open 11 to 11:30am. One pharmacy opens at 12 midday for the afternoon
- The majority of these (8), close between 4 and 5pm
- Two pharmacies are open later, one until 7pm and one until 9pm.
- There is a pharmacy open for one hour between 11:30am and 12:30pm

Neston and Willaston, Chester South and Helsby and Frodsham community partnerships do not have a pharmacy open on a Sunday. Rural community partnership has a pharmacy open for 1 hour.

Table 8: Opening hours of pharmacies outside of 'normal working hours' by community partnership

Community partnership	Number of pharmacies	Weekday opening before 8:30am	Weekday opening after 6pm	Saturday opening	Sunday opening
Chester Central	6	2 (from 8am)	2 (1 until 6:30pm, 1 until 7pm)	5 (4 all day)	3
Chester East	5	1 (from 8am)	1 (until 8pm)	3 (1 all day)	1
Chester South	7	0	0	4 (2 all day)	0
Ellesmere Port	12	0	4 (2 until 6:30pm, 1 until 8pm, 1 until 9pm)	12 (4 all day)	2
Helsby and Frodsham	5	0	1 (until 6:30pm)	4 (1 all day)	0
Neston and Willaston	4	0	0	3 (2 all day)	0
Northwich	16	2 (1 at 7am, 1 at 8am)	5 (1 until 6:30, 2 until 6:45pm, 1 until 8pm, 1 until 22:30pm)	14 (3 all day)	2
Rural	7	0	3 (until 6:30pm)	7 (none all day)	1 (open for 1 hour)
Winsford	6	0	3 (2 until 6:30pm, 1 until 9pm)	6 (2 all day)	2

Source: NHSBSA, Consolidated Pharmaceutical List, 2024-25, Quarter 1 ; and NHS 'Find a Pharmacy' [Find a pharmacy - NHS](#)

It should be noted that there are pharmacies with evening and Sunday opening in bordering community partnerships accessible to residents in Chester South community partnership, including Morrisons in Upton; Tesco, Boots and Well in Chester; and Asda in Ellesmere Port. Residents of Neston and Willaston are in close proximity to pharmacies with evening and Sunday opening in the neighbouring local authority Wirral which includes Tesco in Heswall and Asda in Bromborough. Equally residents of Helsby and Frodsham can access Asda in Runcorn, which has seven-day pharmacy opening times.

Table 9: Opening hours of pharmacies on a weekday (Tuesday taken as an average day)

Are you open at the following times?	Number of pharmacies	% of pharmacies
7am	1	2%
8am	5	7%
9am	66	97%
10am	68	100%
11am	68	100%
12pm	68	100%
12:30pm	62	91%
1pm	53	78%
1:30pm	55	81%
2pm	68	100%
3pm	68	100%
4pm	68	100%
5pm	66	97%
6pm	18	26%
7pm	6	9%
8pm	3	4%
9pm	1	2%
10pm	1	2%

Source: NHSBSA, Consolidated Pharmaceutical List, 2024-45, Quarter 1 ; and NHS 'Find a Pharmacy' [Find a pharmacy - NHS](#)

Table 10: Opening hours of pharmacies on a Saturday

Are you open at the following times?	Number of pharmacies	% of pharmacies
7am	1	2%
8am	5	7%
9am	58	85%
10am	58	85%
11am	58	85%
12pm	51	75%
12:30pm	47	69%
1pm	19	28%
1:30pm	19	28%
2pm	19	28%
3pm	19	28%
4pm	17	25%
5pm	11	16%
6pm	8	12%
7pm	6	9%
8pm	4	6%
9pm	1	2%
10pm	1	2%

Source: NHSBSA, Consolidated Pharmaceutical List, 2024-45, Quarter 1 ; and NHS 'Find a Pharmacy' [Find a pharmacy - NHS](#)

Table 11: Opening hours of pharmacies on a Sunday

Are you open at the following times?	Number of pharmacies	% of pharmacies
7am	0	0%
8am	0	0%
9am	0	0%
10am	4	6%
11am	9	13%
12pm	11	16%
12:30pm	10	15%
1pm	10	15%
1:30pm	10	15%
2pm	10	15%
3pm	10	15%
4pm	6	9%
5pm	2	3%
6pm	2	3%
7pm	1	2%
8pm	1	2%
9pm	0	0%
10pm	0	0%

Source: NHSBSA, Consolidated Pharmaceutical List, 2024-45, Quarter 1 ; and NHS 'Find a Pharmacy' [Find a pharmacy - NHS](#)

Nearly three-quarters (72%) of respondents to the public survey (November 2024) reported they were satisfied with the opening hours of their pharmacy. However, of those not satisfied, the most common reasons were that there is no later closing, they are not open at the weekend (or a Saturday or a Sunday) and for some pharmacies that are open on weekends, they have shorter opening hours. There were also comments about pharmacies being closed over lunch time. Issues with opening hours particularly created difficulties for those working full-time. The analysis of opening hours has been undertaken at community partnership level, however there will be residents who are unable to travel around community partnership to find a pharmacy if their local pharmacy is not open. Just under half of pharmacies (32) offer a delivery service. However, this will not usually be same day delivery and 11 pharmacies charge for this service, with a further seven pharmacies considering charging and two thinking about stopping the service.

5.6.3 Bank holiday and public holiday opening

The ICB is required to ensure that the population within any given Health and Wellbeing Board area is able to access pharmaceutical services on every day of the year. Under the terms of their contract, pharmacies and dispensing appliance contractors are not required to open on bank holidays or Easter Sunday. In order to provide adequate provision, contractors must confirm to ICB their opening hour intentions for each of the days. Where a gap in provision is identified, ICB will then direct a contractor to open part or all of the day.

5.7 Access and facilities for people with a disability and/or mobility problems

The majority of pharmacies are wheelchair accessible and have nearby parking. The results from the Pharmacy Contractor Survey 2024 for questions about accessibility for customers with a disability are outlined in the table below. Please note that 15 pharmacies did not respond to the survey.

Table 12: Facilities and reasonable adjustments to support customers with a disability offered by pharmacy

Facilities	Number of pharmacies
Wheelchair access on pharmacy floor	51
Parking within 50 metres	50
Wheelchair entrance access	44
Designated disabled parking	35
MAR charts	30
Large print labels	27
Tablet cutter/crusher	22
Hearing loop	20
Non click-lock caps	20
Multicompartment compliance aids (blister packs)	20
Magnifying glass	18
Eye drop aid	18
Wheelchair ramp access	17
Automatic door assistance	16
Reminder charts	16
Easy inhaler device	16
Large print leaflets	15
Bell at front door	11
Large print shelf-edge labels	9
Blister popping device	8
Toilet facilities accessible by wheelchair	5
Sign language	1
Audio labels	1
Lid gripping device	1

Source: Contractor Survey 2024

In the 2024 public pharmacy survey, 21% of respondents (124 residents) said that they had a disability, health condition and/or other access needs that could affect how easily they can access their chosen pharmacy. Of these respondents, 10% (13 respondents) said they could not access their chosen pharmacy. For those with mobility issues, 13% (17 respondents) are unable to park their vehicle close enough to their pharmacy.

5.8 Access for clients whose first language is not English

All Cheshire West and Chester pharmacies will have access to Language Line, a telephone interpreting service that helps individuals who don't share a common language speak to each other. See section 8.9 page 88, populations with protected characteristics for information on health needs of residents based on ethnic group and religion.

5.9 Reasonable adjustments

Community pharmacies are required to support patients in taking dispensed medications, by making reasonable adjustments for patients with identified needs as per the Equality Act 2010.

The requirement of the community pharmacy is to ensure that an appropriate assessment is undertaken of the patient to establish their needs and ascertain what type of reasonable adjustment would be required. There is no exhaustive list of what a reasonable adjustment could be, and community pharmacies are not required to simply provide a multi-compartment compliance aid (MCCA).

Community pharmacies are encouraged to work collaboratively with prescribers, other health professionals and social care to support patient needs. However, community pharmacies are not required to dispense medications into MCCAs because it has been directed by another health professional or social care. Health professionals and social care should highlight patients who may require support with medicines to enable the community pharmacy to carry out an assessment to determine appropriate medicines support.

5.10 Pharmacy consultation arrangements

All pharmacies must have at least one consultation room on site where pharmacists can have confidential discussions with patients in a private quiet space.

Most pharmacies have handwashing facilities either in the consultation area itself (43 of responding pharmacies), or close to the consultation area (11 pharmacies). Notably, four pharmacies that responded do not have handwashing facilities available. Few pharmacies offer patients access to a toilet, with only 13 responding pharmacies having this facility.

6. Meeting Pharmaceutical Need

6.1 Dispensing

6.1.1 Dispensing by Cheshire West and Chester community pharmacies

During 2023/24 a total of 7,057,502 GP prescription items were dispensed in the 69 CW&C community pharmacies and one that closed in December 2024 (total of 70 pharmacies). This is an average of 8,402 items per pharmacy per month which is higher than the England average of 7,564 items.

Table 13: Dispensing in Cheshire West and Chester and England

Locality	Number of community pharmacies	Number of GP practice dispensed items	Average dispensing per month
Cheshire West and Chester	70	7,057,502	8,402
England	12,009	1,090,082,977	7,564

Source: NHS Business Services Authority, Dispensing Pharmacy Northwest GP Items by financial year

Note: 1) This data includes distance selling pharmacies that provide advanced services but do not offer face to face dispensing services. 2) Average dispensed per pharmacy is a crude calculation based on dividing the number of GP practice prescription items dispensed by the number of pharmacies.

6.1.2 Changes in dispensing by community pharmacies

Over the last five years there has been an increase in the number of GP practice items dispensed by community pharmacies in CW&C and nationally. The number of items dispensed increased by 43% from 4,933,440 in 2019/20 to 7,057,502 in 2023/24.

Table 14: Dispensing trend for Cheshire West and Chester and England

	2019/20	2020/21	2021/22	2022/23	2023/24
Number of items dispensed by CW&C community pharmacies	4,933,440	5,158,696	5,630,763	6,206,759	7,057,502
Number of items dispensed by community pharmacies in England	1,015,432,313	999,727,834	1,023,594,176	1,057,981,117	1,090,082,977

Source: NHS Business Services Authority, Dispensing Pharmacy Northwest GP Items by financial year

Note: This data includes distance selling pharmacy Speeds Healthcare which is located in Cheshire West and Chester. It does not provide face to face dispensing but has been included to match figures in table. Speeds dispensed 29,345 GP prescription items in 2023/24 and in previous years dispensed between 15,000-25,000 items.

6.1.3 Dispensing by community pharmacies by community partnership

In 2023/24, the greatest number of GP prescribed items dispensed were in community partnerships with the highest number of pharmacies, Northwich and Ellesmere Port. Pharmacies in Winsford, and Neston and Willaston were busiest with dispensing, with the highest number of items per month per pharmacy. Neston and Willaston has the lowest number of community pharmacies.

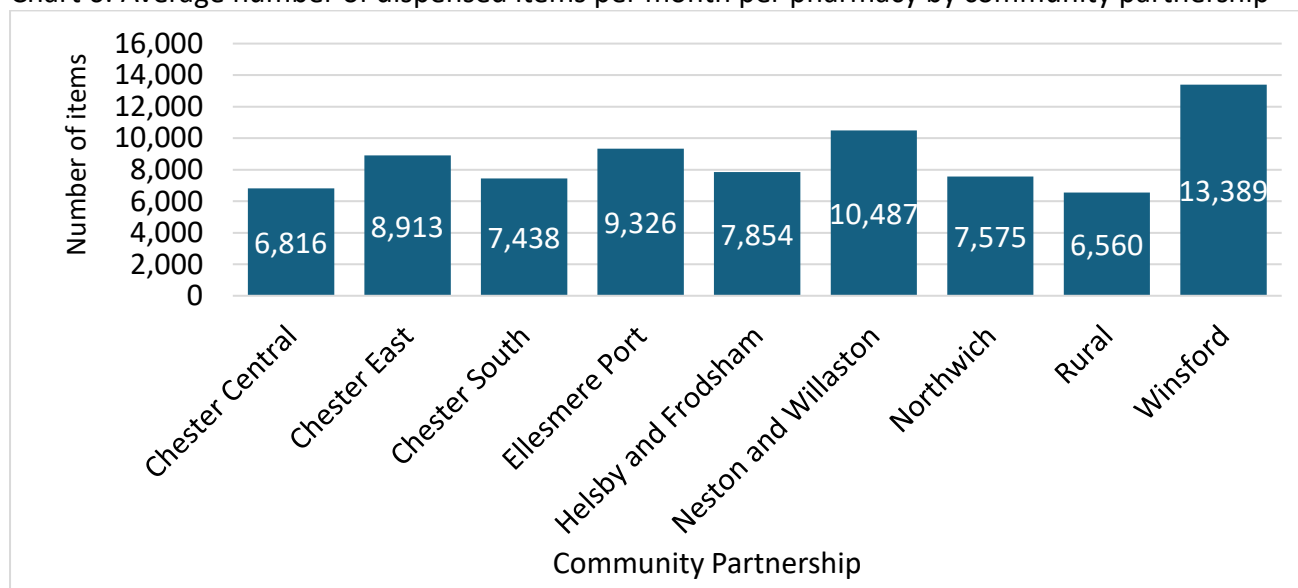
Table 15: Pharmacy dispensing by community partnership

Community partnerships	Number of items dispensed by pharmacies	Number of pharmacies	Average number of items dispensed per month	Average number of dispensed items per month per pharmacy
Chester Central	490,723	6	40,894	6,816
Chester East	534,804	5	44,567	8,913
Chester South	624,751	7	52,063	7,438
Ellesmere Port	1,342,882	12	111,907	9,326
Helsby and Frodsham	471,252	5	39,271	7,854
Neston and Willaston	503,351	4	41,946	10,487
Northwich	1,545,364	17	128,780	7,575
Rural	551,006	7	45,917	6,560
Winsford	964,024	6	80,335	13,389

Source: Cheshire and Merseyside Prescribing Data, accessed September 2024, NHS Business Services Authority

Note: 1) Analysis by care community does not include distance selling pharmacy Speeds as it is not a face to face dispenser. 2) Average dispensed per pharmacy is a crude calculation based on dividing the number of GP practice prescription items dispensed by the number of pharmacies. This has not taken into account how many months the pharmacies have been open.

Chart 6: Average number of dispensed items per month per pharmacy by community partnership



Source: Cheshire and Merseyside Prescribing Data, accessed September 2024, NHS Business Services Authority

Since the production of the 2022/25 PNA there has been a reduction in the number of pharmacies in CW&C, which has contributed to a rise in dispensing per pharmacy. Comparing 2023/24 dispensing data to 2020/21 shows that pharmacies have experienced an increase in the number of GP prescription items they are dispensing per month. This is most notable in Winsford, Chester East and Chester South community partnerships with over an average of 2,000 extra items dispensed per month per pharmacy.

Table 17: Changes in pharmacy provision from previous PNA

Community partnership	Number of pharmacies Sept 24	Average number of dispensed items per month per pharmacy Sept 24	Number of pharmacies at Jan 2022	Difference in number of pharmacies +/-	Average number of dispensed items per month per pharmacy Jan 2022	Difference +/-
Chester Central	6	6,816	8	-2	6,545	+271
Chester East	5	8,913	6	-1	6,558	+2,355
Chester South	7	7,438	7	0	5,351	+2,087
Ellesmere Port	12	9,326	16	-4	7,507	+1,819
Helsby and Frodsham	5	7,854	5	0	6,396	+1,458
Neston and Willaston	4	10,487	4	0	9,258	+1,229
Northwich	17	7,575	18	-1	7,147	+428
Rural	7	6,560	7	0	5,771	+789
Winsford	6	13,389	6	0	10,971	+2,418

Source: Cheshire and Merseyside Prescribing Data, accessed September 2024, NHS Business Services Authority; Cheshire West and Chester Pharmaceutical Needs Assessment 2022-2025

Note: Analysis by care community does not include distance selling pharmacy Speeds as it is not a face-to-face dispenser

6.1.4 Who in CW&C dispenses items prescribed in CW&C besides pharmacy?

During 2023/24, a total of 8,428,451 items were prescribed in Cheshire West. Of these, 8,413,132 items were prescribed by GP practices (99.8% of prescriptions) and a further 15,319 were prescribed by other healthcare providers (0.18% of prescriptions).

Overall, 7,648,830 items were dispensed within CW&C (91%). Of these 7,250,415 items were dispensed by a pharmacy; equating to 86% of all items prescribed in CW&C. Dispensing doctors support pharmacies with the dispensing of prescription items which accounts for 4% of items dispensed in CW&C.

Table 18: Dispensing by other healthcare providers other than pharmacy

CW&C prescriptions dispensed by	Number dispensed within CW&C	% dispensed within CW&C
English pharmacy	7,250,415	95%
Dispensing doctor	283,262	4%
English Personal Administration	113,491	1%
English appliance contractor	1,662	0%
Total	7,648,830	

Source: NHS Business Services Authority

Note: 1) The data includes items dispensed at pharmacies that closed at some point in the year

2) English pharmacy includes Speeds Healthcare which is distance selling only and does not dispense face to face. It dispensed 4,869 (0.06%) items in the above numbers dispensed.

6.1.5 Dispenser type by where item was prescribed

Rural community partnership has the lowest proportion of items dispensed by a pharmacy. This is because it has the highest number of dispensing doctors. Helsby and Frodsham community partnership also has a higher number of items dispensed by a dispensing doctor than other community partnerships in Cheshire West.

Table 19: Type of dispenser by community partnership

Where item prescribed by community partnership	Dispensed by a pharmacy		Dispensed by a dispensing doctor		Dispensed by personal administration		Dispensed by an appliance contractor	
Chester Central	629128	98%	0	0%	10881	2%	218	0%
Chester East	551488	98%	0	0%	11186	2%	225	0%
Chester South	563816	97%	0	0%	17587	3%	245	0%
Ellesmere Port	1494238	98%	0	0%	29123	2%	471	0%
Helsby and Frodsham	482440	86%	78113	14%	2896	1%	204	0%
Neston & Willaston	467530	99%	0	0%	6785	1%	104	0%
Northwich	1619876	99%	0	0%	23432	1%	4	0%
Rural	534681	72%	205127	28%	2050	0%	190	0%
Winsford	879872	99%	0	0%	9551	1%	1	0%
Total	7223069	95%	283240	4%	113491	1%	1662	0%

Source: NHS Business Services Authority

Note: Chester South includes Speeds Healthcare which is distance selling only and does not dispense face to face. It dispensed 4,869 (0.06%) items in the above numbers dispensed.

6.1.6 Where are CW&C GP prescriptions being dispensed besides CW&C?

The majority of items prescribed are dispensed within Cheshire West and Chester borough. However, 123,982 and 109,100 items were dispensed in Cheshire East and North Wales respectively, which both border with CW&C. Notably in Cheshire East, the majority of items (105,285; 85%) were dispensed by a dispensing doctor rather than a pharmacy (this is Bunbury Practice which is actually in a Cheshire West PCN). The table below shows CW&C prescribed items, which were dispensed by other places in Cheshire and Merseyside, Shropshire and North Wales.

Table 20: Dispensing place of CW&C prescriptions

Place	Number dispensed	% dispensed
Cheshire West and Chester	7,533,677	91%
Cheshire East	123,982	1.5%
North Wales	109,100	1.3%
Wirral	62,840	0.8%
Halton	19,271	0.2%
Liverpool	18,788	0.2%
Shropshire	12,744	0.2%
Warrington	7,829	0.1%
Sefton	4,667	0.1%
Knowsley	1,150	0%
St Helens	372	0%
Other place	2,912	0%

Source: NHS Business Services Authority

Note: The data excludes appliance contractors and personal administration. It includes pharmacies that closed at some point in the year.

For all community partnerships, the majority of items prescribed were dispensed in CW&C. However, there are some differences across the borough. The proximity of Chester South community partnership to the Welsh border means that 12% of items are dispensed in North Wales. Notably 7% of items prescribed in Chester Central community partnership are dispensed in Cheshire and Merseyside with a further 3% in North Wales. Similarly, 5% of items prescribed in Neston and Willaston are dispensed in Cheshire and Merseyside.

Table 21: Dispensing place of CW&C prescriptions by community partnership

Community partnership prescribed in	Dispensed in CW&C	Dispensed in Cheshire East	Dispensed in Cheshire & Mersey	Dispensed in Shropshire	Dispensed in North Wales
Chester Central	89%	0%	7%	0%	3%
Chester East	99%	0%	0%	0%	0%
Chester South	87%	0%	0%	0%	12%
Ellesmere Port	99%	0%	1%	0%	0%
Helsby and Frodsham	97%	0%	2%	0%	0%
Neston and Willaston	95%	0%	5%	0%	0%
Northwich	99%	0%	0%	0%	0%
Rural	97%	0%	0%	2%	1%
Winsford	99%	1%	0%	0%	0%

Source: NHS Business Services Authority

Note: Cheshire & Merseyside does not include Cheshire West and Chester or Cheshire East as, these have been analysed and individually shown in their own columns.

6.2 Medicines shortages

Since 2021 there have been reports of increasing supply problems affecting medicines. Recent media coverage has highlighted shortages of medicines used to treat diabetes, attention deficit

hyperactivity disorder (ADHD) and epilepsy, as well as hormone replacement therapy (HRT) and others. A House of Commons Library research briefing⁵ provides information on the causes and consequences of medicines shortages in the UK and internationally, and the UK Government's approach to address supply problems.

6.2.1 Causes and consequences of medicines shortages

Supply chains for medicines are long and complex and shortages can be caused by multiple factors⁶. These include manufacturing or distribution problems and increased demand for medicines. Commentators have also drawn attention to the effects of wider geopolitical factors, including the conflict in Ukraine, the COVID-19 pandemic and Brexit⁷.

This is not just a UK issue, with what is happening in the UK needing to be seen within the context of global problems with supply chains and the availability of key ingredients. A report by the Nuffield Trust found that the past two years have seen constantly elevated medicines shortages, in a "new normal" of frequent disruption to crucial products⁸.

Pharmacists and patient organisations have drawn attention to the impact of medicines shortages on patients, who may struggle to access medicines and sometimes have to switch to alternative drugs⁷. Community Pharmacy England, which represents community pharmacies, has also reported that medicines supply and pricing issues are "severe" financial pressures on pharmacy staff and businesses⁹.

6.2.2 Government response to medicines shortages

The government has described medicines shortages as "an ongoing issue that the Department [of Health and Social Care] has been managing for many years"¹⁰. The Department of Health and Social Care and NHS England have published guidance on the management of medicines supply and shortages, which outlines the processes followed and options available to the government to address supply disruption¹¹. These include:

- Issuing serious shortage protocols, which enable pharmacists to provide specific alternatives to scarce medicines¹².
- Taking regulatory action to approve new medicines or, in exceptional circumstances, extend medicine expiry dates¹³.
- Restricting medicines exports¹⁴.
- Offering pharmacies price concessions, to help pharmacies to cover the cost of NHS prescriptions¹⁵.

6.2.3 Potential reforms to manage medicines shortages

Organisations representing pharmacists have called for reforms to the systems used to manage medicines shortages. Community Pharmacy England has called for "a strategic Government review of medicine supply and pricing" that focuses on supply chain functioning⁹. Appeals for reform centre on calls for pharmacists to be able to amend prescriptions to provide alternatives to patients when medicines are out of stock¹⁶, and on changes to current medicines pricing systems⁹.

This has led the Cheshire & Merseyside ICB to issue its own Medicines Shortage Statement: Guidance¹⁷ during periods of sustained medicines shortages in April 2024 in which they stated:

“Medicines supply shortages can have significant negative impacts on patients, community pharmacies, general practice, and the wider NHS. It is imperative that all stakeholders work together in the best interest of the patient.

Where a local shortage of a formulary medicine has been identified, prescribers may need to consider alternatives for the duration of the shortage taking into consideration safety and cost effectiveness. For national shortages, see national guidance where applicable. Formulary alternatives should be considered first, however there may be circumstances where prescribing of non-formulary medicines is the most appropriate option following the key principles outlined below. It is recommended that healthcare professionals register for free with the Specialist Pharmacy Service (SPS) Medicines Supply Tool and subscribe to SPS email notifications to obtain details of medicines supply shortages, further information on alternatives and when shortages have resolved.

Key principles

- Effective communication between healthcare professionals in all sectors is paramount – Specialists should communicate the rationale for any non-formulary recommendations and state whether the formulary choice medication can be reinstated once the supply issue has resolved.
- Primary care clinicians should seek specialist advice where appropriate.
- Prescribers in all sectors should seek guidance from their local Medicines Optimisation/Medicines Management teams as required.
- Patient safety is paramount, and patients must be kept informed of any changes to their medication and the potential differences with an alternative medication.
- When choosing an alternative medicine, prescribers should always consider the cost-effectiveness of any non-formulary choice.
- Any prescribing of alternative medicines due to a shortage should only be for the duration of the shortage and it is the prescriber’s responsibility to ensure that patients are prescribed the most appropriate and cost-effective medicine once the supply issue has resolved”.

The impact of these issues was one of the most commonly mentioned in the 2024 public pharmacy survey.

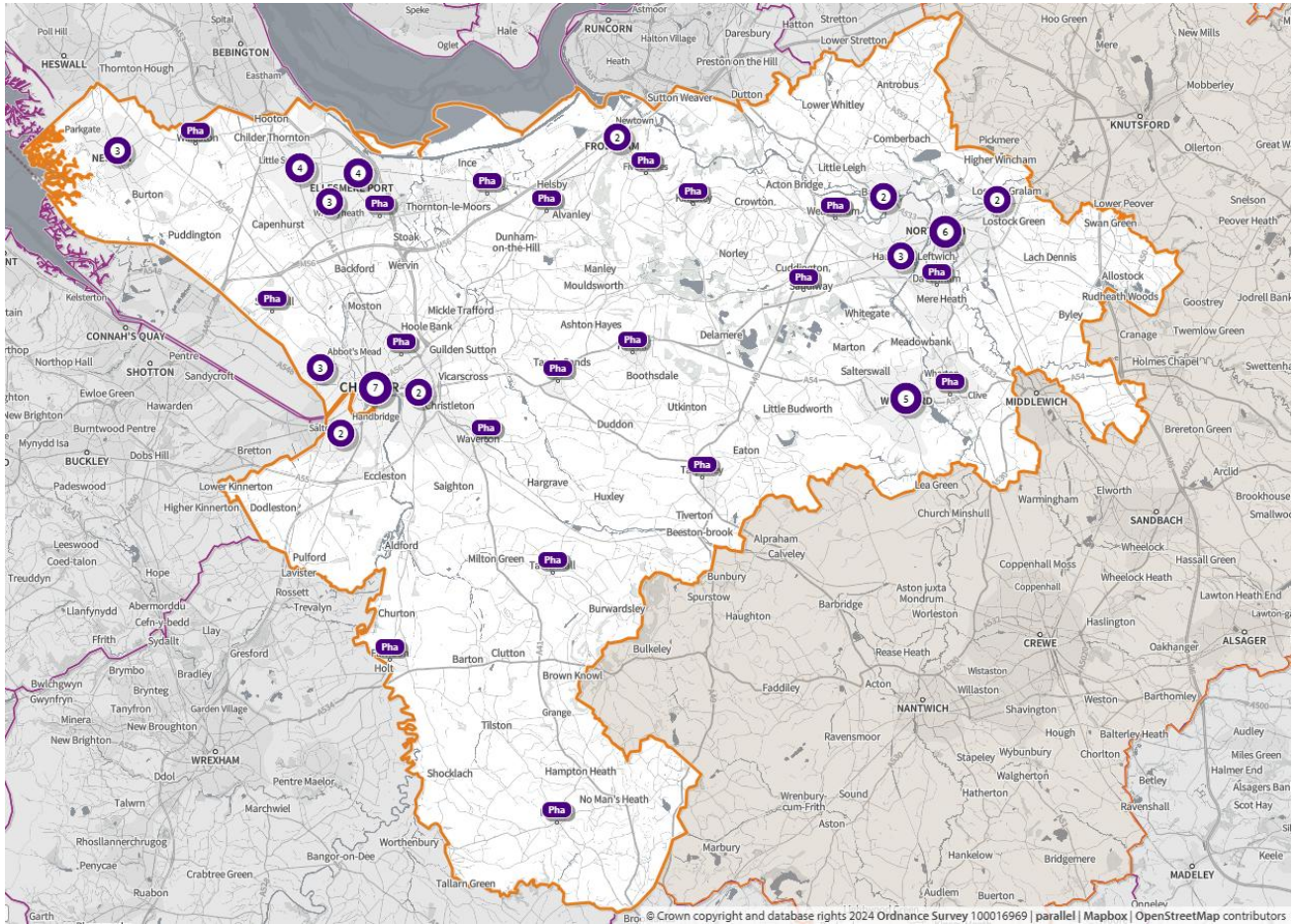
6.3 Mapping of Advanced Services

6.3.1 Pharmacy First

The Pharmacy First service commenced on 31st January 2024. This involves pharmacists providing advice and NHS-funded treatment where appropriate, for seven common conditions: Sinusitis, sore throat, acute otitis media, infected insect bite, impetigo, shingles, and uncomplicated UTI. Age restrictions do apply. 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. There is good coverage of Pharmacy First across Cheshire West and Chester.

At July 2024, 67 pharmacies are registered to provide this service in CW&C.

Map 12: Pharmacies registered to provide Pharmacy First in CW&C



Source: SHAPE. Note: See appendix 3 table A2-3 for pharmacies that are registered to provide Hypertension case finding service

6.3.2 New medicines service

At April 2024, all pharmacies are registered to provide a new medicine service in CW&C. The service provides support to people who are newly prescribed a medicine to manage a long-term condition (LTC), which will generally help them to appropriately improve their medication adherence and enhance self-management of the LTC. Specific conditions/medicines are covered by the service:

- Asthma and COPD
- Diabetes (Type 2)
- Hypertension
- Hypercholesterolaemia
- Osteoporosis
- Gout
- Glaucoma
- Epilepsy
- Parkinson's disease
- Urinary incontinence/retention
- Heart failure
- Acute coronary syndromes
- Atrial fibrillation
- Coronary heart disease
- Stroke / transient ischemic attack
- Long term risks of venous thromboembolism/embolism

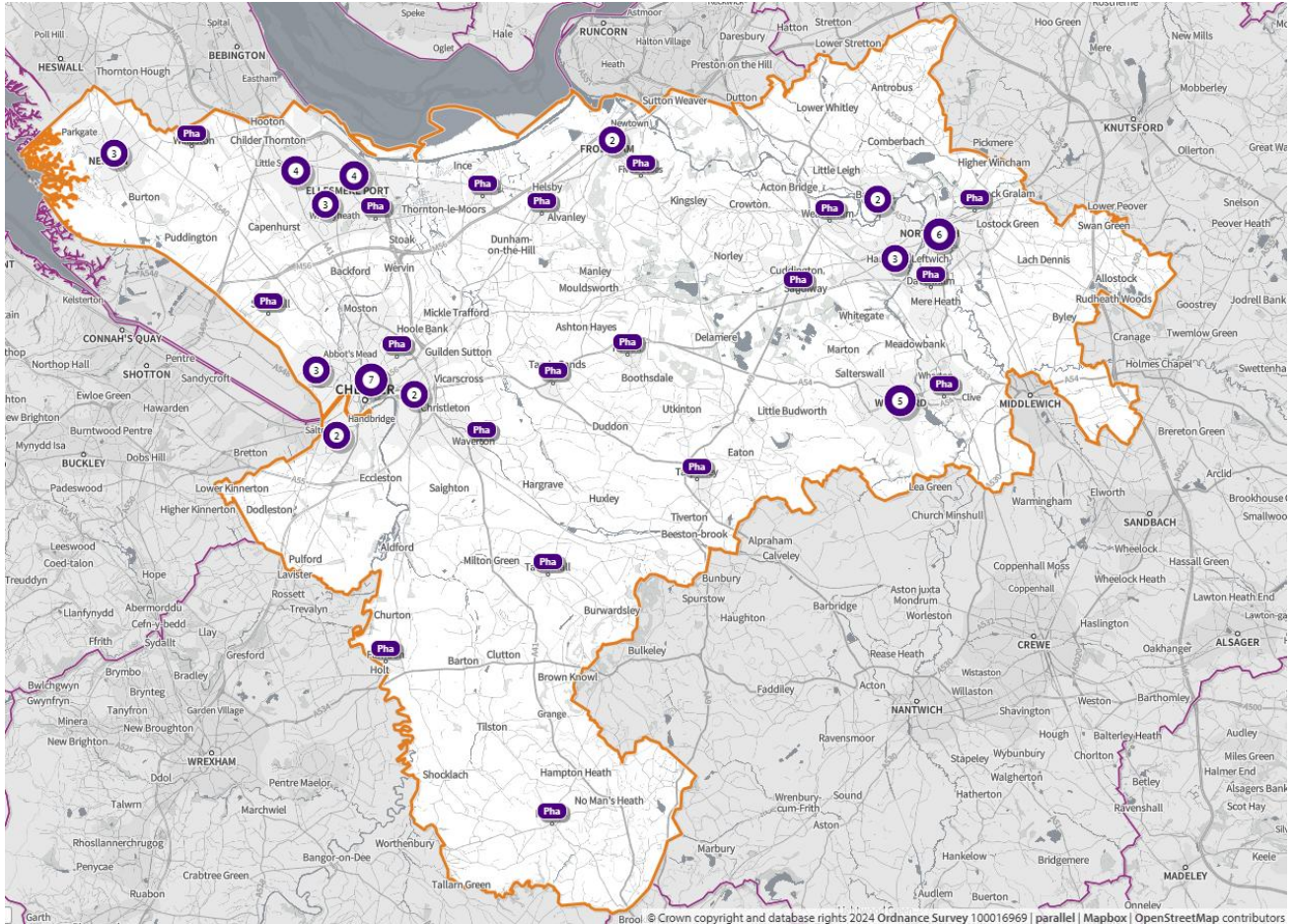
6.3.3 Hypertension case finding service

This is commonly called the NHS Blood Pressure Check service. The service is primarily offered to those aged 40 or over and identifies those at risk of hypertension and offers them a blood pressure measurement. Where clinically indicated a 24-hour ambulatory blood pressure monitoring is then

offered. The blood pressure test results will then be shared with the patient's GP to inform a potential diagnosis of hypertension

At July 2024, 65 pharmacies in CW&C are registered to provide a hypertension case finding service.

Map 13: Pharmacies registered to provide a hypertension case finding service in CW&C



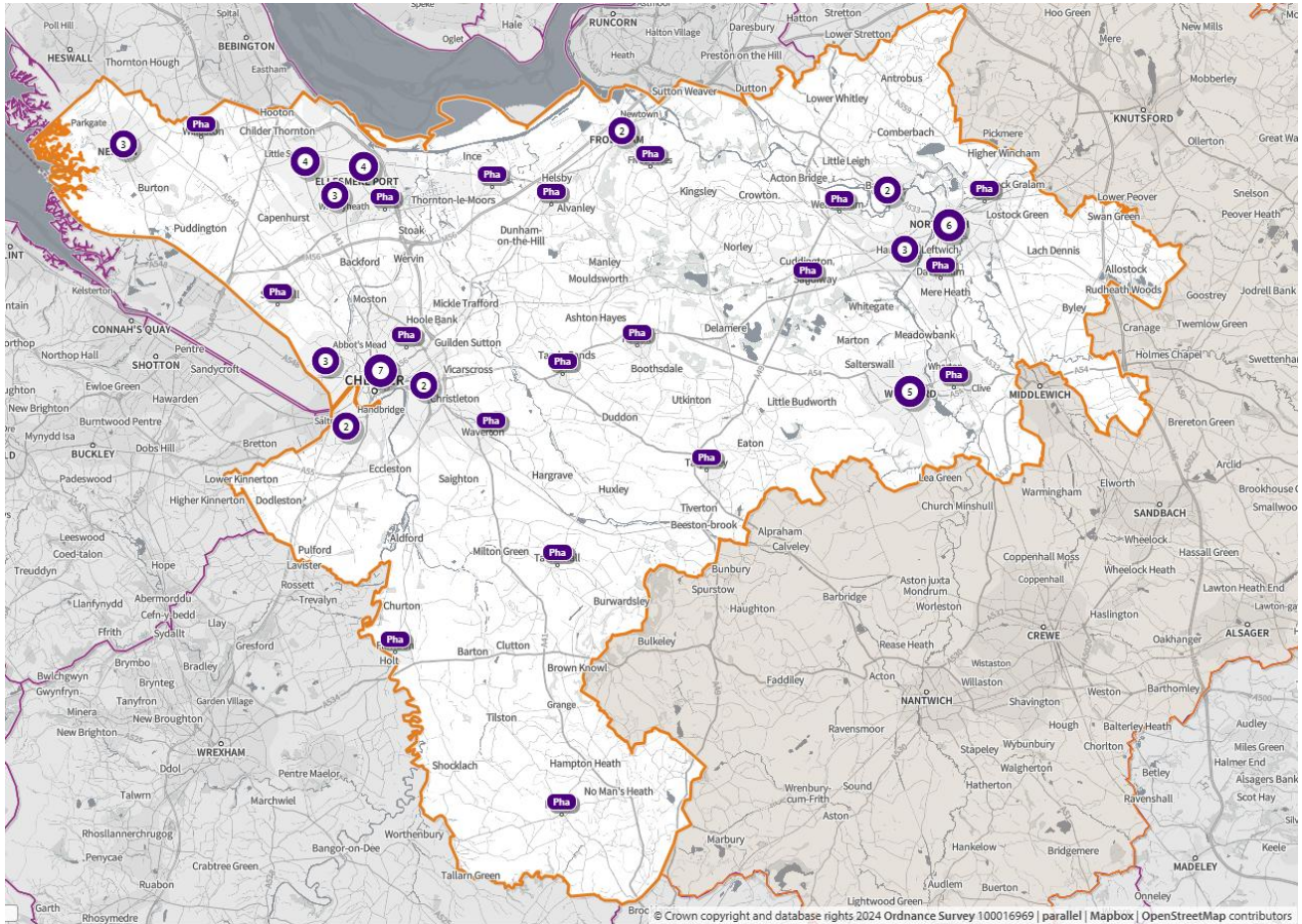
Source: Cheshire & Merseyside ICB. Note: See appendix 3 table A2-3 for pharmacies that are registered to provide Hypertension case finding service

6.3.4 Smoking cessation

All people admitted to hospital who smoke are offered NHS-funded tobacco dependency treatment services. This service enables NHS trusts to undertake a transfer of care on patient discharge, referring patients (where they consent) to a community pharmacy of their choice to continue their smoking cessation treatment, including providing medication and support as required. The referral from NHS trusts to community pharmacy creates additional capacity in the smoking cessation pathway.

At July 2024, 65 pharmacies in CW&C are registered to provide a smoking cessation service.

Map 14: Pharmacies registered to provide smoking cessation in CW&C



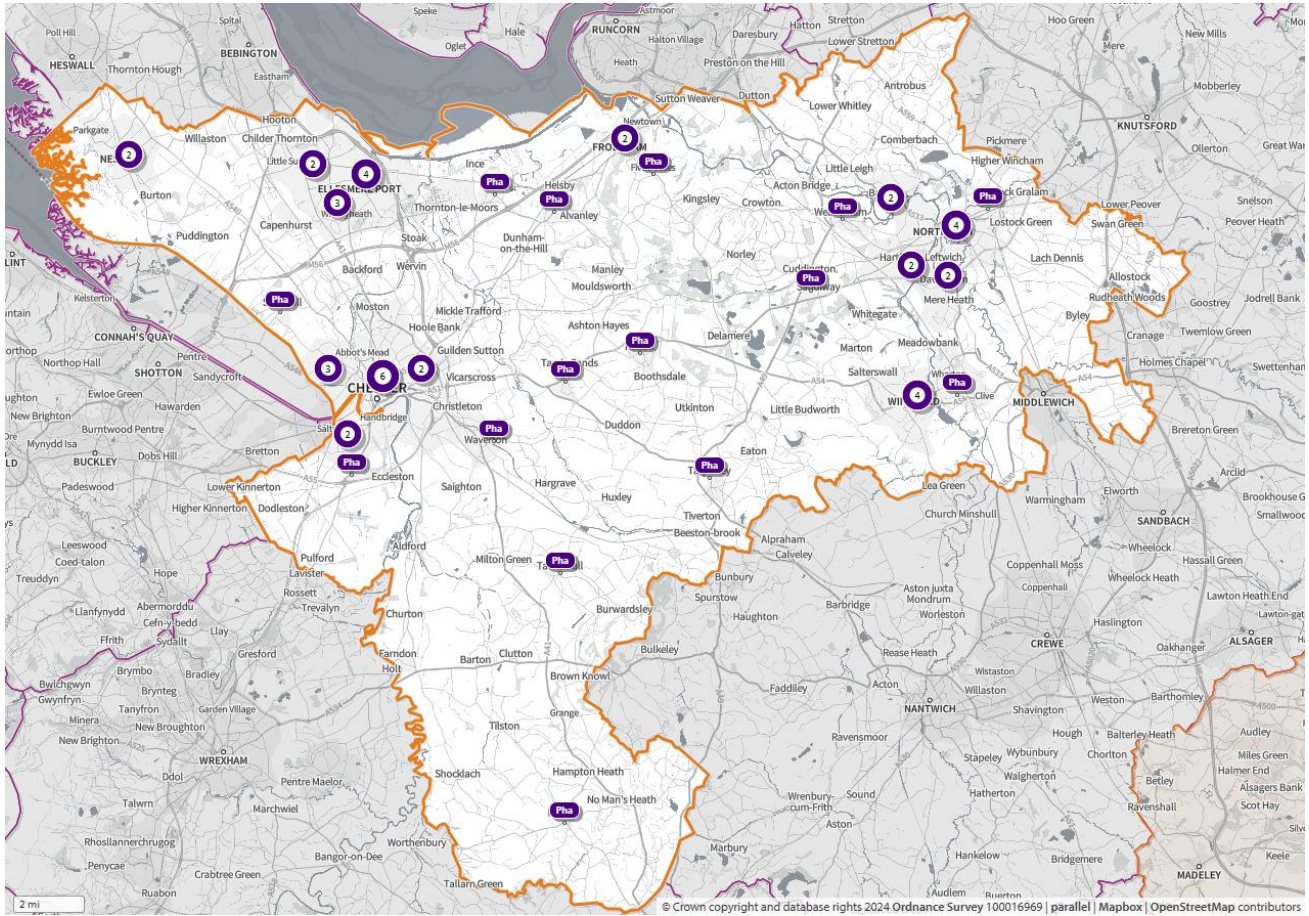
Source: Cheshire & Merseyside ICB. Note: See appendix 3 table A2-3 for pharmacies that are registered to provide smoking cessation

6.3.5 Contraception service

The pharmacy contraception service started in April 2023. The service includes both initiation and on-going supply of oral contraception including clinical checks and annual reviews. Individuals can access the service through self-referral, referral by their GP, sexual health clinic, or other NHS service provider, or identified as clinically suitable by the pharmacist and accepting the offer of service.

There are 53 pharmacies registered to provide contraception services in CW&C. There is good coverage with more than one pharmacy registered in each community partnership.

Map 15: Pharmacies registered to provide a contraception service in CW&C



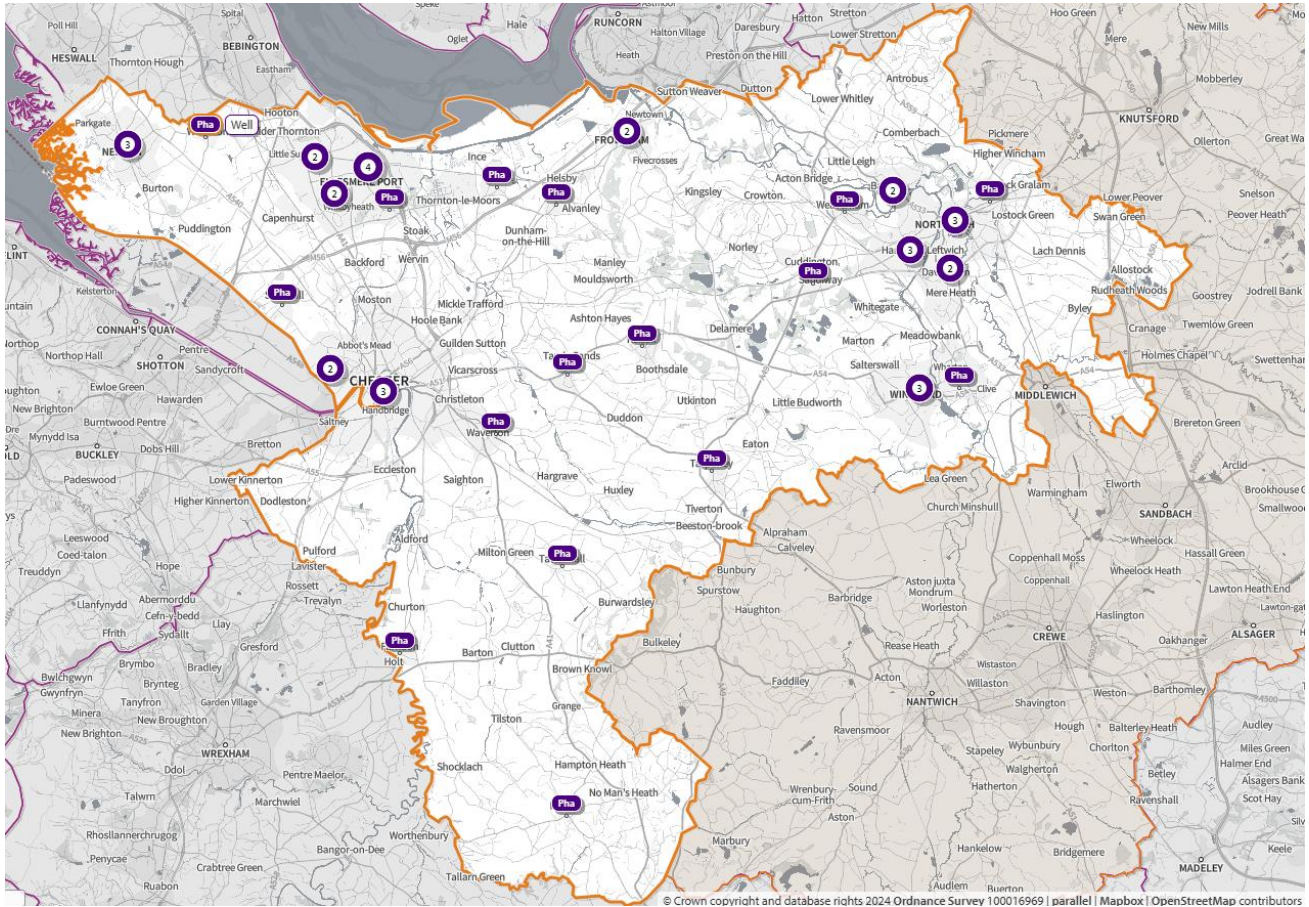
Source: Cheshire & Merseyside ICB. Note: See appendix 3 table A2-3 for pharmacies that are registered to provide contraception service

6.3.6 Flu vaccination

Community pharmacies in England can offer a seasonal influenza (flu) vaccination service for adults in at-risk groups. Immunisation is one of the most successful and cost-effective health protection interventions and is a cornerstone of public health. High immunisation rates are key to preventing the spread of infectious disease, complications and possible early death among individuals and protecting the population's health.

At November 2024, 60 pharmacies were providing a flu vaccination service. All community partnerships have more than one pharmacy providing this service.

Map 16: Pharmacies providing flu vaccination in CW&C



Source: Community Pharmacy England Note: See appendix 3 table A2-3 for pharmacies that are registered to provide flu vaccination

6.3.7 Lateral flow device (LFD) service

This is a walk-in service where patients can collect one box of 5 LFD tests from a participating community pharmacy on confirmation that the patient is potentially at risk of getting seriously ill from COVID-19 and is therefore eligible for COVID-19 treatments. All community pharmacies in CW&C are registered to provide a lateral flow device service (source Cheshire and Merseyside ICB).

6.3.8 Appliance use reviews (AURs) and Stoma appliance customisation (SAC) services

Appliance Use Reviews (AUR) and Stoma appliance customisation (SAC) services are both specialist services. Locally, community health services provide specialist advice to patients on appliances and stoma products. Pharmacies then dispense prescriptions generated by the services. Activity data rather than 'registered to provide' is available for these services, and data from NHSBSA shows no activity at CW&C pharmacies at August 2024. However, these services are usually accessed remotely from Cheshire and Merseyside appliance contractors, with delivery to the patient's home.

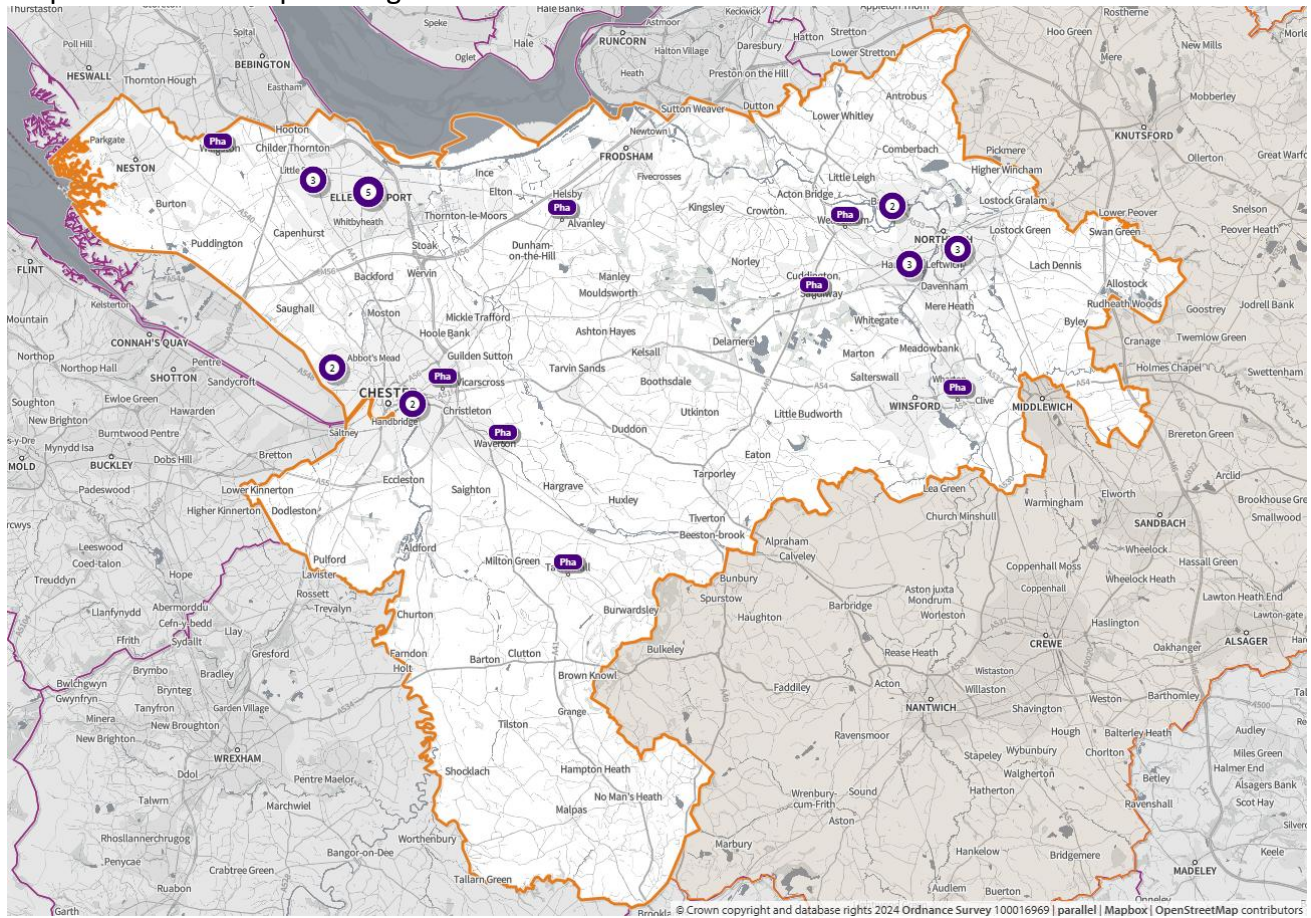
6.4 Mapping of enhanced services

6.4.1 COVID-19 vaccinations

At January 2025 there is just one enhanced service, the COVID-19 vaccination programme. This is available for patients aged 75 years and over, residents in a care home for older adults, and individuals aged 6 months and over who are immunosuppressed.

At August 2024, there were 29 community pharmacies providing COVID-19 vaccinations. There is at least one pharmacy in each community partnership providing this service. As map 17 illustrates, this service is not provided by pharmacies for residents of Malpas within Rural community partnership. However, there may be other COVID-19 vaccination service provision such as the Living Well Bus.

Map 17: Pharmacies providing COVID-19 vaccination in CW&C



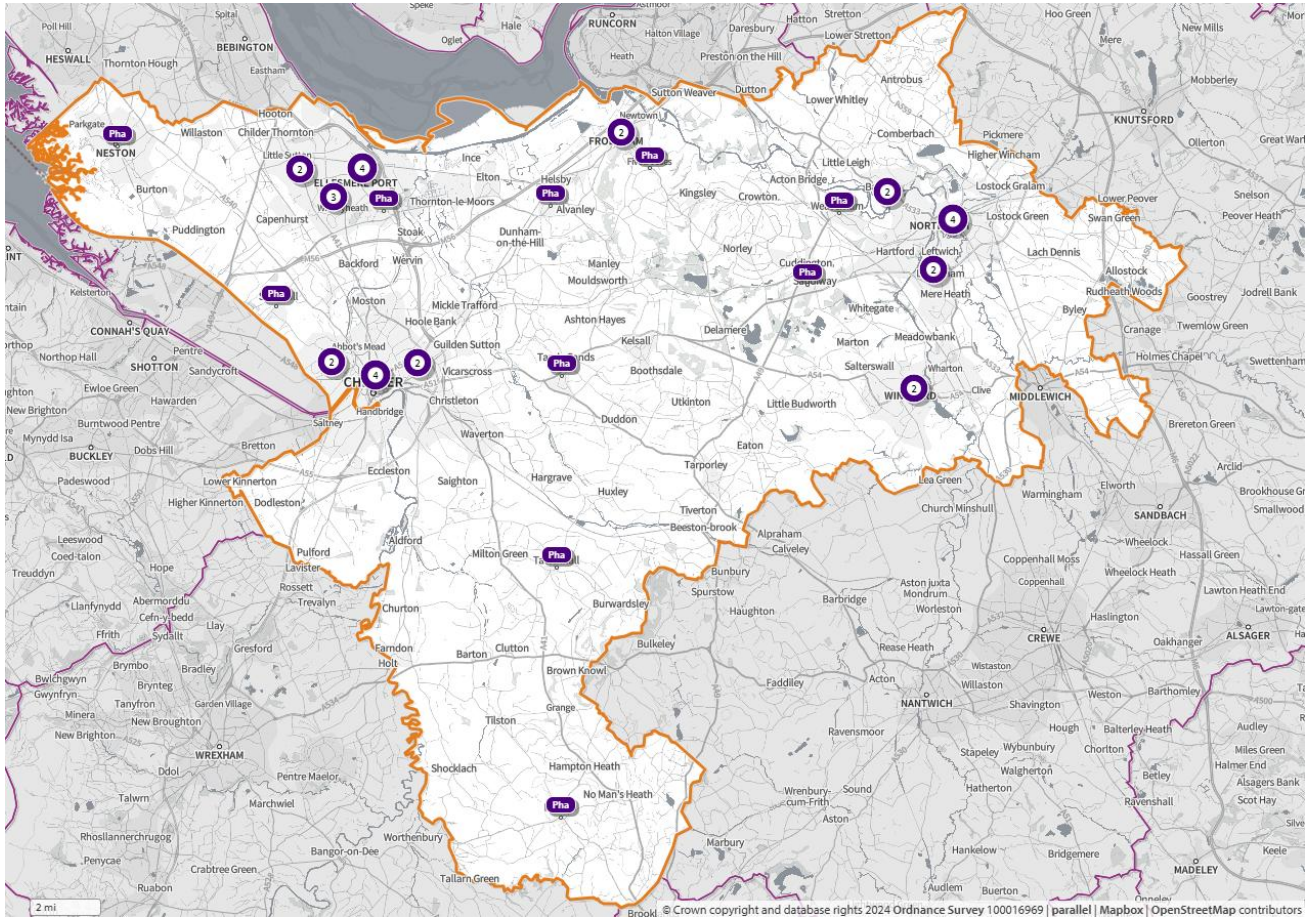
Source: Community Pharmacy England. Note: See appendix 3 table A2-3 for pharmacies that are registered to provide COVID-19 vaccination

6.5 Mapping of commissioned services

6.5.1 Emergency hormonal contraception

This service is for the provision of free Emergency Hormonal Contraception (EHC) to females requiring it. At December 2024, there are 39 pharmacies commissioned by the local authority to provide this service. There is provision in each community partnership.

Map 18: Pharmacies providing emergency hormonal contraception in CW&C



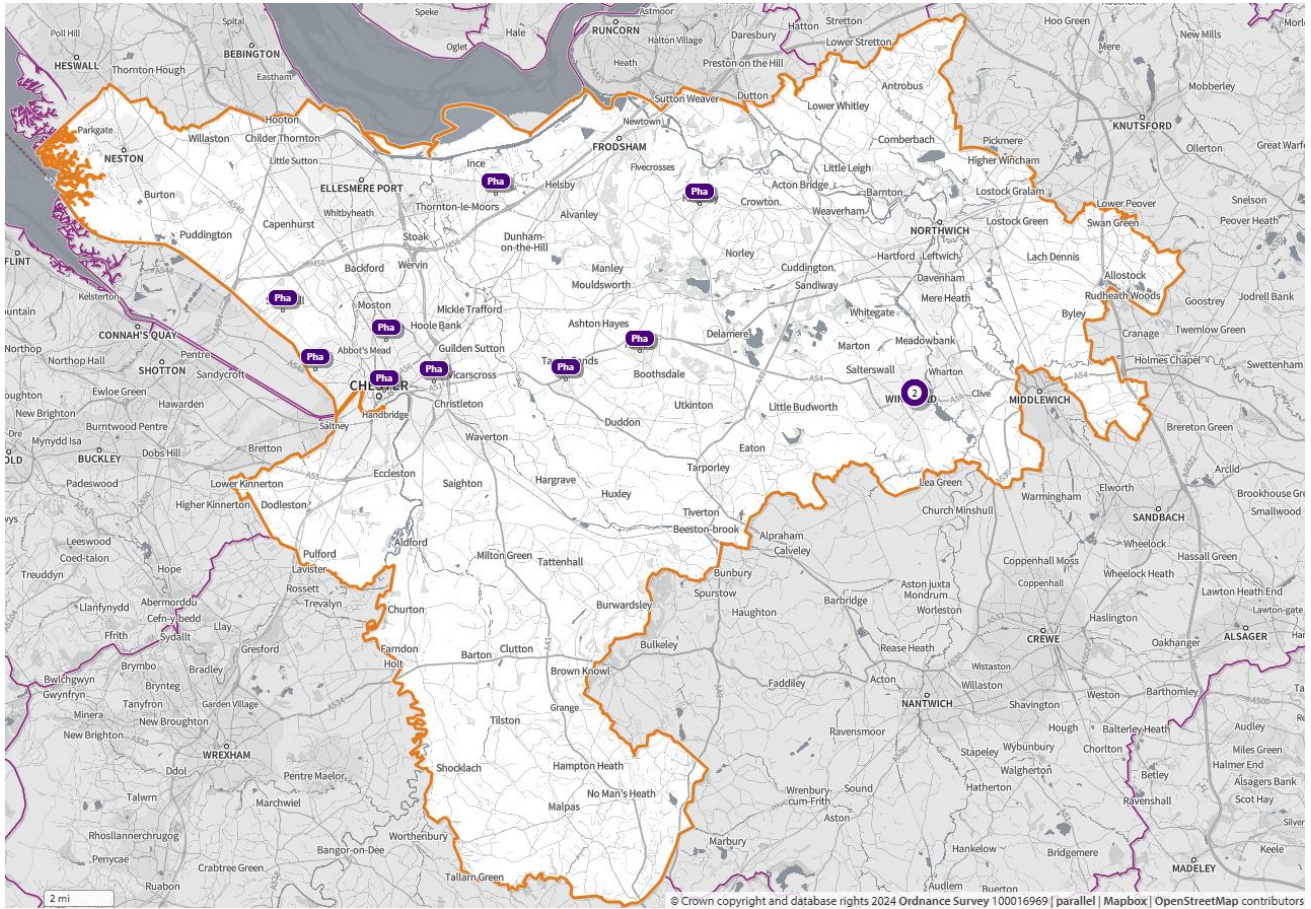
Source: Cheshire West and Chester Council Public Health Team. Community Pharmacy England. Note: See appendix 3 table A2-3 for pharmacies that are registered to provide emergency hormonal contraception.

6.5.2 Sharps return service

Patients with a prescription can collect a sharps bin, a specifically designed box with a lid, from a pharmacist who is commissioned for a sharp's disposal service. Once full, the box can be return to the pharmacist for safe disposal.

At December 2024, there were 11 pharmacies commissioned to provide this service. As map 19 illustrates, this service is currently not provided by community pharmacies operating in Ellesmere Port, Neston and Willaston and Northwich community partnerships. There is also limited provision for residents of Farndon, Malpas, and Tattenhall within Rural Community Partnership. This demonstrates a need to review service need and pharmacy provision of a sharps return service in these areas.

Map 19: Pharmacies providing sharps return service in CW&C



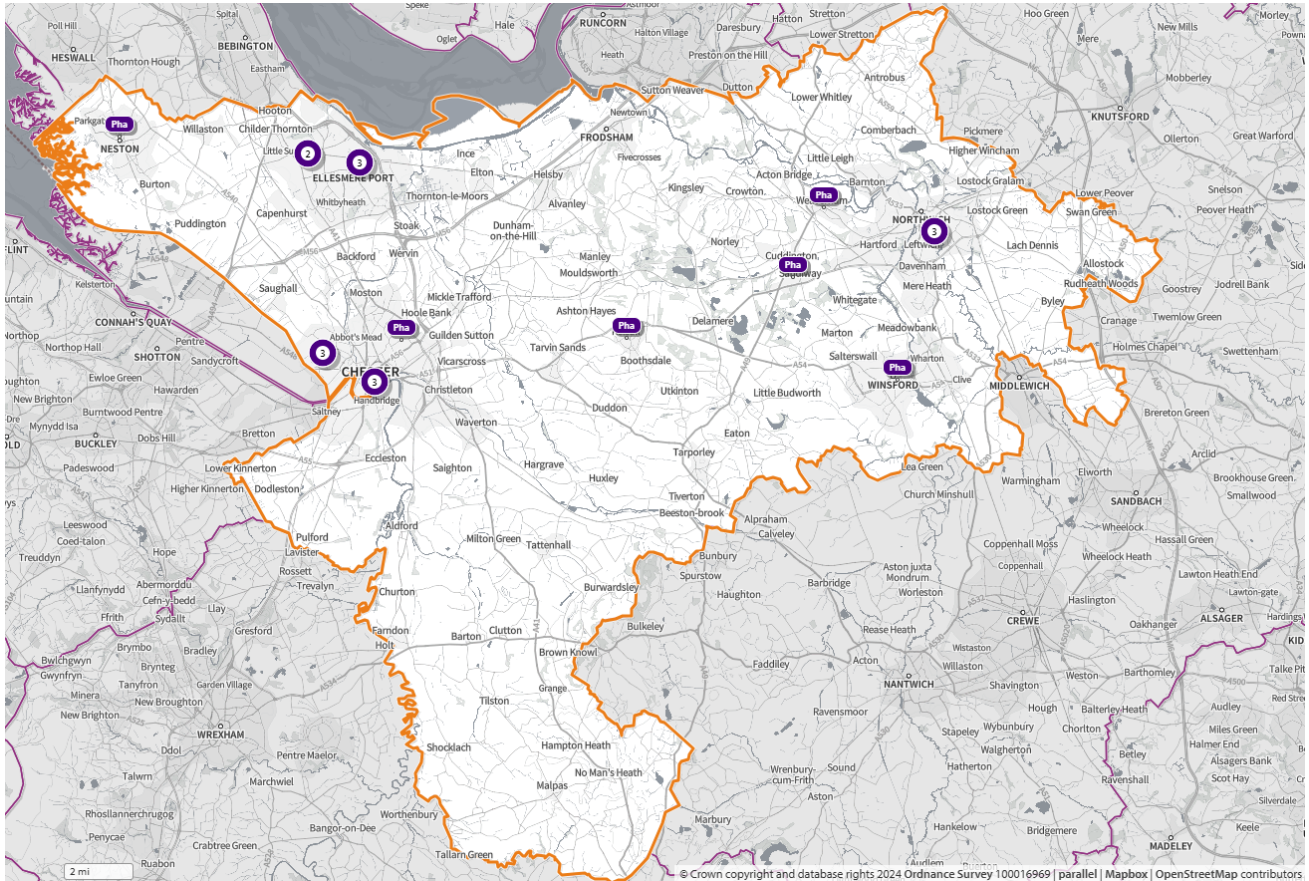
Source: Cheshire West and Chester Council Public Health Team. Community Pharmacy England. Note: See appendix 3 table A2-3 for pharmacies that are registered to provide a sharps return service.

6.5.3 Substance misuse – supervised consumption

A resident can use this service if they are prescribed methadone by the commissioned drug and alcohol treatment service and they require this to be taken under supervised conditions.

20 pharmacies in CW&C are commissioned by the local authority to provide this service. As map 20 illustrates, this service is provided by a smaller number of community pharmacies operating within Rural community partnership, with potential service need and improved access identified for residents in Farndon, Malpas and Tarporley.

Map 20: Pharmacies providing supervised consumption in CW&C



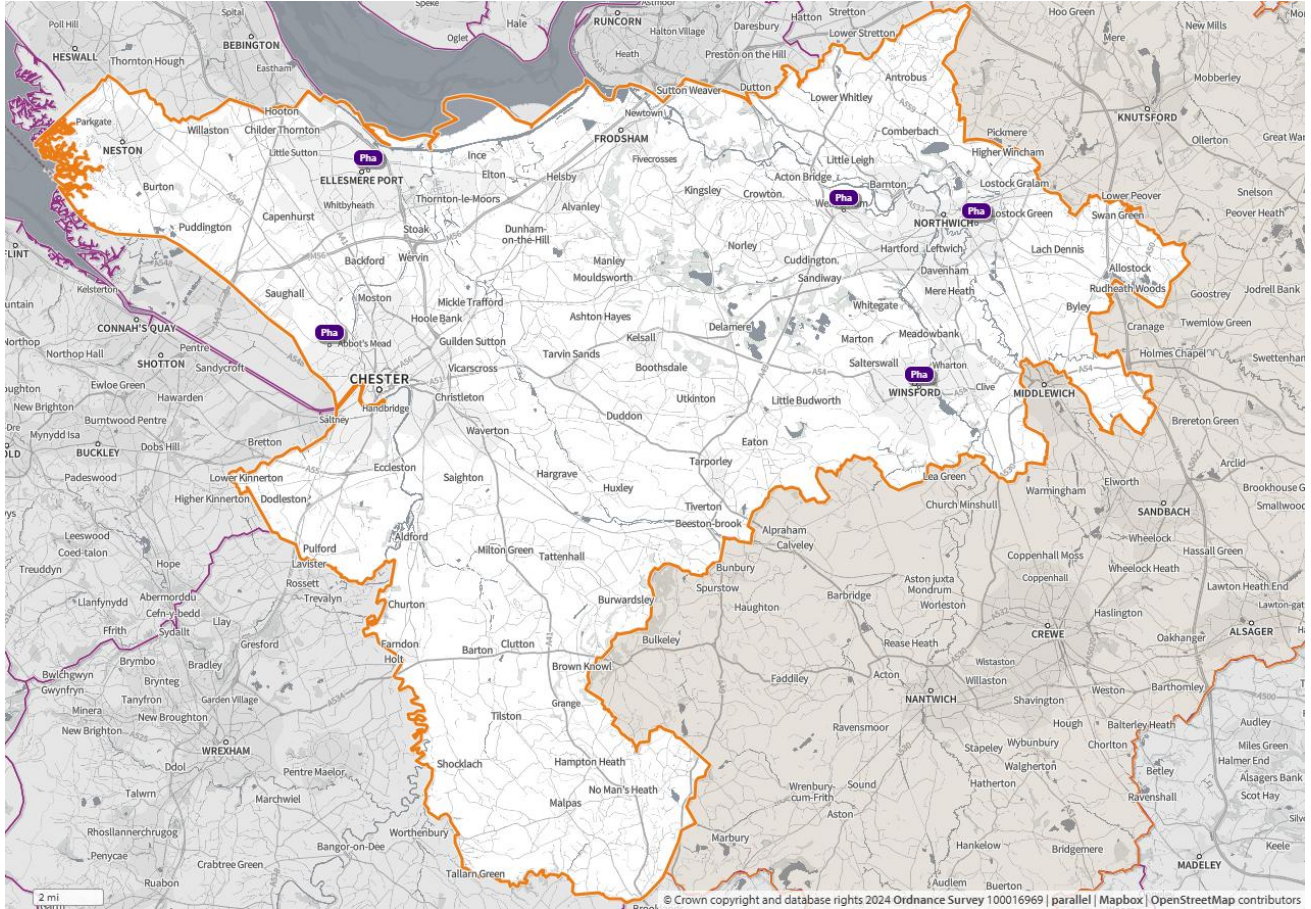
Source: Cheshire West and Chester Council Public Health Team. Community Pharmacy England. Note: See appendix 3 table A2-3 for pharmacies that are registered to provide supervised consumption.

6.5.4 Substance misuse – needle exchange

CW&C residents can collect a bag of mixed sterile needles if they don't already receive them from the Local Authority commissioned drug and alcohol treatment service.

There are five pharmacies in CW&C that are commissioned by the drug and alcohol treatment service to provide this service. As map 21 illustrates, this service is currently not provided by community pharmacies operating within Chester East, Helsby and Frodsham, Neston and Willaston, and Rural community partnerships. This identifies potential service need and improved access to the pharmacy needle exchange service for residents within these geographical areas.

Map 21: Pharmacies providing needle exchange in CW&C



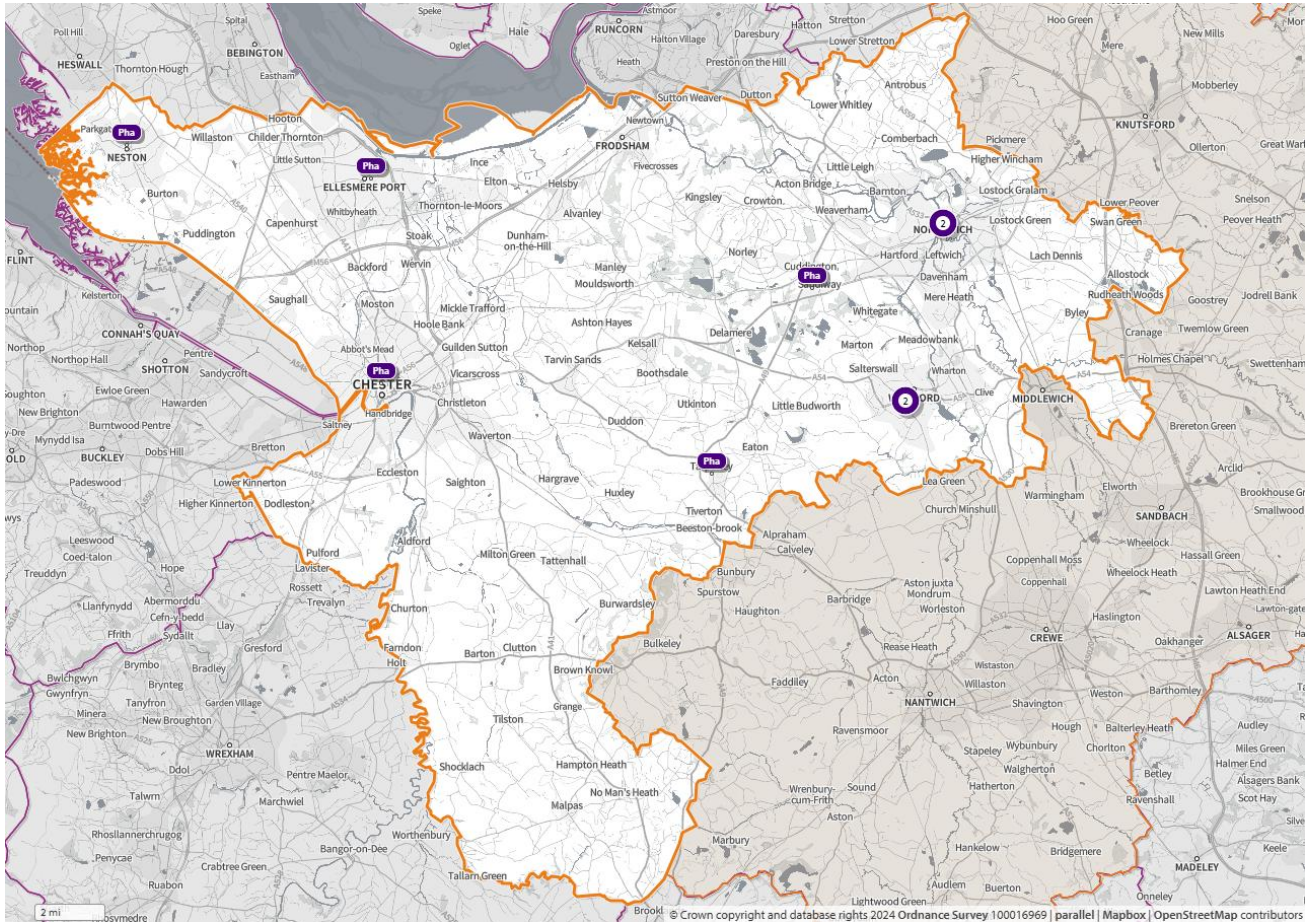
Source: Cheshire West and Chester Council Public Health Team. Community Pharmacy England. Note: See appendix 3 table A2-3 for pharmacies that are registered to provide needle exchange.

6.5.5 Urgent palliative care medicines service

This service ensures residents have access to a defined list of medicines if needed urgently at the end of life.

This is commissioned by the ICB from nine pharmacies in CW&C. The ICB are looking to harmonise access to this service across all areas of Cheshire and Merseyside to improve equity of access.

Map 21: Pharmacies providing a urgent palliative care medicines service in CW&C



Source: Cheshire West Medicines Management Team. Community Pharmacy England. Note: See appendix 3 table A2-3 for pharmacies that are registered to provide urgent palliative care medicines service.

6.6 Prescription delivery services

Although community pharmacies are not contracted to do so, 36 pharmacies offered a home delivery service (Contractor Survey 2024). Of these, 24 offered the service free of charge and 12 charged a fee. Seven pharmacies that currently provide the service free of charge are considering charging all patients for it or just new patients. A couple are considering stopping the delivery service all together. 15 pharmacies did not respond to the contractor survey question about delivery and their provision is unknown.

7. Public satisfaction with community pharmacy services

During November 2024, as part of the PNA process residents were asked their views on their local or usual pharmacy. The survey was online, and a paper version was provided on request. There were 590 responses. This section provides a summary of the results which can be seen in full in appendix three page 135.

7.1 Pharmacy usage

47% of respondents (275) had used a pharmacy in the last week and a further 26% in the last two weeks (155 respondents). 19% had visited in the last month, 5% in the last three months, 1% in the last six months, and 1% longer than six months ago.

At their last visit to a pharmacy:

- Most respondents visited to collect a prescription for themselves (80%; 473 respondents).
- 32% (190 respondents) collected a prescription for someone else.
- 26% (152 respondents) visited to buy other non-prescription medications.
- 24% (143 respondents) visited to get advice from the pharmacist.
- 11% (66 respondents) were accessing a pharmacy service.
- 6% were returning unused/ expired medications.
- 5% (35 respondents) visited for some other reason - most commonly their flu or covid vaccination.
- 4% (26 respondents) were visiting as they were unable to get a GP appointment.
- 3% (19 respondents) were referred to the pharmacy by a GP Practice or other service such as NHS 111.

83% (492 respondents) had a prescription dispensed the last time they used a pharmacy:

- 73% of these respondents (361) received all the medicines that they needed on that occasion without waiting.
- 26% (128 respondents) did not received all the medicines that they needed.
- Over half of those who had to wait for the prescription to be prepared (57%; 75 respondents) were told how long they would have to wait.
- 41% (54 respondents) were not told, but the majority of these (32%; 42 respondents) would have liked to have been told.

For those respondents whose medicines were not available on that visit:

- 12% (16 respondents) got them later the same day.
- 21% (29 respondents) got them the next day.
- 42% (55 respondents) had to wait two or more days to obtain the rest of their medicines.
- 18% (23 respondents) waited more than a week.
- 7% (9 respondents) never got them.
- 63% (83 respondents) said that it was not a reasonable period of time to wait.
- In 83% of cases (for 107 respondents), the reason for not getting all of the medicines was the pharmacy did not have the medicine in stock.

45% of respondents (263) had recently had a consultation with their pharmacist:

- 44% of these respondents (115) had the consultation at the pharmacy counter, 39% (103 respondents) in a separate room, 13% (33 respondents) in the dispensary or a quiet part of the shop, and 4% (11 respondents) over the telephone.
- 74% of respondents (195) rated the level of privacy as either 'excellent', 'very good' or 'good'. However, 13% (34 respondents) rated the level of privacy as 'poor' or 'very poor'.
- 53% (139 respondents) wanted advice about a minor illness or health problem, 27% (71 respondents) wanted advice about medicine, 6% (16 respondents) had blood pressure monitoring and 2% (4 respondents) wanted contraception services. A further 8% (21 respondents) attended for another reason, most commonly for flu or covid vaccinations. A small number of respondents (4%; 11) were referred to another service.

7.2 Access to a local pharmacy

78% of respondents said that it is 'very easy' or 'quite easy' to get to a pharmacy, (55%/322 respondents very easy and 23%/134 quite easy). 10% said that it was 'quite difficult' or 'very difficult' (8%/48 respondents quite difficult and 2%/12 very difficult). The remainder (13%;74 respondents) said that it was neither easy nor difficult.

For respondents who said that it is difficult to get to a pharmacy, the most common reasons cited were:

- The pharmacy is too far away, so either not walkable or a long walk.
- The local pharmacy has closed down resulting in further to travel and the closest pharmacies have become very busy due to the closure.
- A health condition or disability makes it difficult.

7.2.1 Travel and location of pharmacy

69% of respondents (404) could get to the pharmacy in 10 minutes or less. For 28% (164 respondents), the journey was 5 minutes or less. For 14% of respondents (78) the journey took more than 15 minutes.

Respondents were asked how they get to their usual pharmacy:

- Using a car is the most common method of getting to the pharmacy (60%; 354 respondents). This is followed by walking (52%; 309 respondents).
- Other methods include public transport (4%; 21 respondents), bicycle (3%; 16 respondents), mobility transport (1%; 6 respondents) and taxi (1%; 4 respondents). A small number (2%; 14 respondents) said they use another method of travel. This was most commonly that they had their prescription delivered or somebody else went to the pharmacy on their behalf.
- 2% (11 respondents) reported that they use an online pharmacy.

Respondents were asked, regarding location of the pharmacy, what is most important to you:

- 73% (432 respondents) said that it was most important that the pharmacy was close to their home.
- Around a third of respondents said it is important that 'it is close to other shops I use', 'it is easy to park nearby' and 'it is close to my doctor's surgery' (214, 203 and 176 respectively).

- Less than 10% of respondents said that it was important that 'it is close to my local supermarket', 'that it is near to the bus stop/ train station', 'it is close to where I work' or 'it is close to my children's school or nursery'.
- 7% (39 respondents) cited 'other' reasons. Comments highlighted that it is more important that a good service is provided, that they deliver, that it is an efficient and reliable service, and that they are open later and on the weekend. Some respondents said that their local pharmacy had closed which has meant they have to travel further.

7.2.2. Satisfaction with opening hours

In regard to opening hours:

- 72% (453 respondents) were 'very satisfied' or 'somewhat satisfied' with the opening hours of their pharmacy. 16% (91 respondents) were 'dissatisfied' or 'very dissatisfied', whilst 13% (76 respondents) were neither satisfied nor dissatisfied.
- The main reason for being satisfied with the pharmacy opening hours is provision of longer opening hours including a later closing, and opening on a weekend, especially all day on a Saturday.
- The main reasons for dissatisfaction with opening times is that there is no later closing, they are not open at the weekend (or a Saturday or a Sunday) and for some pharmacies that are open on weekends, they have shorter opening hours. There were also comments about pharmacies being closed over lunch time.
- 30% of respondents (176) could recall a time when they had a problem finding a pharmacy that was open to get a medicine dispensed, to get advice, or to buy medicines over the counter. 69% of these (138 respondents) had needed to get medicine on a prescription, 21% (42 respondents) needed to buy medicine from the pharmacy, and 10% (20 respondents) needed to get advice from the pharmacy.
- 45% of respondents (263) recently had needed to use their pharmacy when it was closed. For most of these respondents (223), this had happened once or twice. Of these respondents, 46% (121) said it was on a weekend (most commonly a Saturday), 37% (96) said it was a weekday and 2% (4) said it was a bank holiday. Most often it was a lunchtime between 12pm-2pm (25% of cases; 67 respondents) or evening after 5pm (24% of cases; 64 respondents). 19% (49 respondents) reported it was the afternoon and 17% (45 respondents) said it was the morning.
- Respondents that had found the pharmacy closed were most likely to wait until the pharmacy was open (52%; 135 respondents) or go to another pharmacy (41%; 106 respondents).

64% of respondents (378) either did not know if their pharmacy delivered medication to their home if they are unable to collect it or had not used the service. 22% (129 respondents) said that their pharmacy did deliver, and a further 2% (12 respondents) said they did deliver but there is a charge. 12% (71 respondents), said their pharmacy does not deliver medication.

7.2.3 Access to a pharmacy for those with disabilities and access needs

Having a disability, health condition or other access needs could affect the ease of getting to a pharmacy:

- 124 respondents (21%) have a disability, health condition or other access needs that could affect how easily they access their chosen pharmacy.
- 13 respondents said they are unable to access their chosen pharmacy.

- 17 respondents with mobility issues reported they are unable to park their vehicle close enough to the pharmacy and 11 said they are unable to access their chosen pharmacy.

7.3 Pharmacy services

58% of respondents (345) were satisfied with the range of services provided at the pharmacy. Whereas, 28% (168) wished pharmacies could provide more services.

7.3.1 Importance of products and services

Respondents reported the following were important in terms of products and services:

- 'Knowledgeable staff' and 'having the things I need' were rated as most important (97% and 96% respectively), followed by 'friendly staff' (93%).
- 'Opening times' and 'waiting times' were also considered important (85% and 81% respectively). 77% of respondents also rated 'privacy when speaking to the pharmacist' as important, 73% the 'range of services offered', 72% the 'range of products available' and 67% 'collection of prescriptions from my doctors'.
- Of least importance was 'delivery of medicines to my home' (19% of respondents reported this was important) and 'cost of products' (46% said this was important).

Respondents were asked if there was anything else that has influenced their choice of pharmacy. In summary the top five key factors that influenced choice of pharmacy are:

- Pharmacy closures – residents had to use a less preferable pharmacy as the local one had closed down.
- Medication availability – respondents reported issues with medication being in stock, this is often linked to the next factor.
- Turnaround of prescriptions – respondents report having to wait up to or over a week for prescriptions to be ready to collect. Upon collection some items are unavailable, which requires a further visit if and when it becomes obtainable.
- Location – many respondents use their pharmacy as it is the closest to their home. However, some respondents choose to use a pharmacy further away or online for better customer service, medication availability and shorter waiting times.
- Customer service – friendliness and helpfulness of staff is valued.

7.3.2 Satisfaction with products and services

75% of respondents (437) were either very satisfied or fairly satisfied overall with their pharmacy (46% very and 29% fairly):

- Respondents were most satisfied with 'friendly staff' (81% very or fairly satisfied), and 'knowledgeable staff' (75% very or fairly satisfied).
- 63% of respondents were satisfied with both waiting times and opening times.
- 61% were satisfied with the 'range of services offered'. In regard to products, 69% were satisfied with 'having the things I need', 60% the 'range of products available' and 46% the 'cost of products'.
- 59% were satisfied with 'privacy when speaking to the pharmacist' and 55% with 'collection of prescriptions from my doctors'.
- When looking at dissatisfaction rather than satisfaction, residents were most dissatisfied with waiting times (22% fairly or very dissatisfied) and opening times (21% fairly or very dissatisfied).

Respondents were asked if there is anything else that has influenced their level of satisfaction with pharmacy. The top factors reported are:

- Staff being friendly, helpful and providing good customer service.
- The pharmacy being in a convenient, close proximity location.
- Availability of medication.
- Waiting time for prescriptions to be ready.
- Collection of all prescription medicines at the same time (note: a number of respondents said that when they go to collect their prescriptions some items are unavailable and they have to make return visits).
- Queues and long waits at the pharmacy.
- Pharmacy closures.
- Opening hours.

7.4 Experience of local pharmacy and their services over the last 12 months

Respondents were asked to describe their experience of their local pharmacy and pharmacy services over the last 12 months. In summary:

- The most frequent comments were about pharmacy staff being friendly, helpful and knowledgeable.
- There were also a number of comments about pharmacy staff providing a good, efficient and/or reliable service.
- However, there were an equal number of comments about poor service. Some respondents also found pharmacy staff to be unhelpful and unfriendly.
- Pharmacies being too busy was an issue, with long queues and wait times. Occasionally when the pharmacy was busy respondents had been asked to come back another time.
- Respondents had experienced medication shortages, with medicines being unavailable upon collection of prescriptions, requiring an additional visit to the pharmacy.
- Respondents reported long wait times for prescriptions to be ready for collection, and sometimes they required multiple visits.
- Opening hours were commented on a number of times, with some being happy with longer opening hours and weekend opening, whilst others wanting longer opening hours and weekend opening at their usual pharmacy.
- Some respondents commented on the closure of their local pharmacy and its impact on their ease of getting to a pharmacy, and the busyness of surrounding pharmacies.

7.4 Pharmacy comments received by Healthwatch Cheshire

Healthwatch Cheshire has compiled and analysed comments received about community pharmacies by residents across Cheshire East and Cheshire West and Chester. Findings are for the whole of Cheshire for the period April 2023 to October 2024 and have not been analysed by local authority.

Many users of pharmacies reported excellent customer service, accessibility of health advice, and efficient prescription management at local pharmacies. Many people appreciated timely medication delivery, personalised care, and assistance with health concerns. Pharmacists showed professionalism and went the extra mile to ensure patients received the right care in a timely manner.

However, several key challenges facing local pharmacies were highlighted. Medicine shortages and prescription delays were among the most common issues, with many people experiencing long waits or systemic difficulties getting the medications they need. These delays were often linked to poor coordination between pharmacies and GP practices, particularly compounded by the wider national concern of medicine shortages. Additionally, overcrowded pharmacies and a lack of professional support were frequently mentioned. Many people felt that they were not receiving useful advice from pharmacy staff, which added to their frustration. In some areas, the availability of pharmacies was also limited, particularly in rural locations, where temporary closures or staff shortages were making access to services more difficult. These challenges reflect the findings of the Pharmacy Survey 2024.

8. Population and health profile of Cheshire West and Chester

8.1 Overview

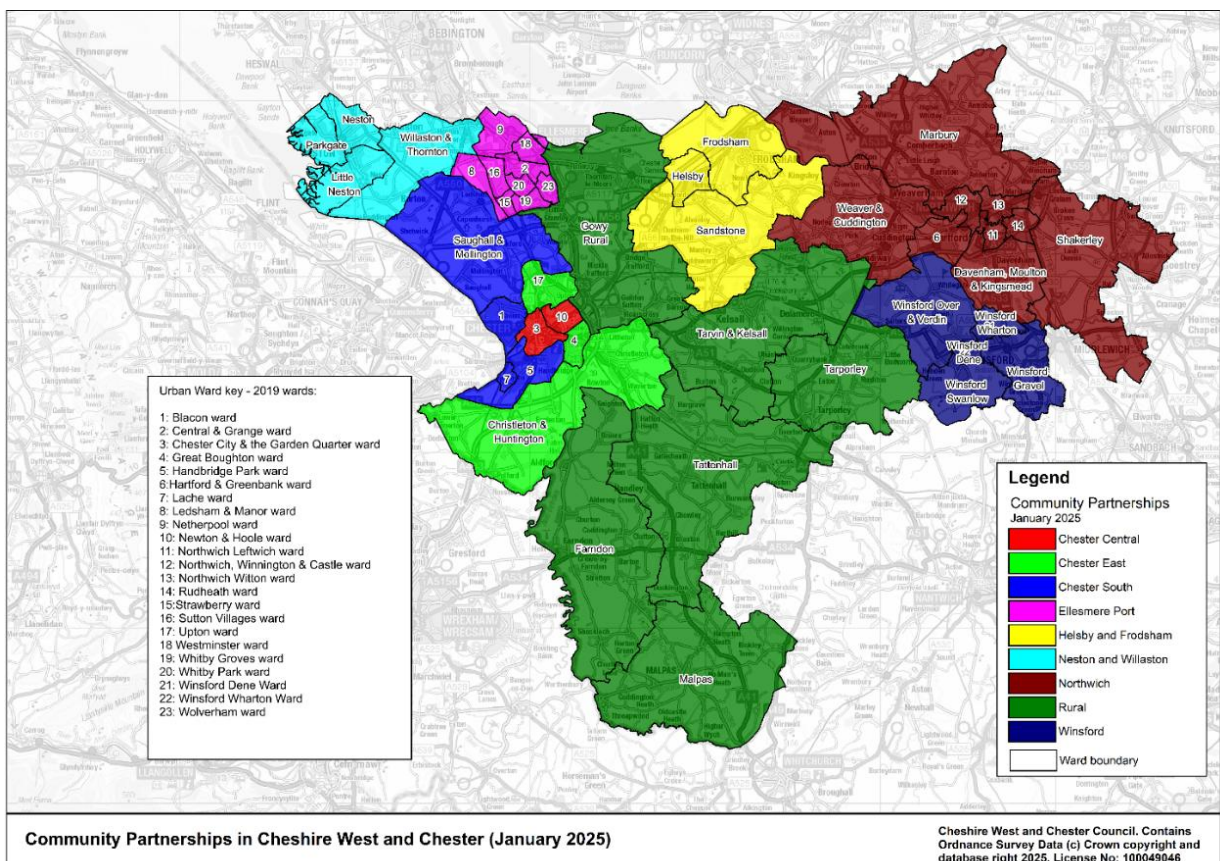
The borough of Cheshire West and Chester covers approximately 350 square miles and is the fourth largest unitary authority in the Northwest. The area is characterised by attractive countryside, varied landscapes and diverse settlements. This includes the historic City of Chester, industrial towns, market towns and rural hamlets. Over 365,000 people live in the borough, and over a quarter live in rural areas. The population is expected to increase over the next twenty years, particularly in older age groups.

Map 22: Location of Cheshire West and Chester



The borough is made up of nine community partnerships and 45 wards.

Map 23: Cheshire West and Chester wards and community partnerships used in PNA



8.2 Population structure and projections

8.2.1 Resident population

An estimated 365,100 people live in Cheshire West, with just over a quarter living in rural areas (ONS Mid-year 2023 population estimates). In CW&C, 51% of the population are female and 49% are male. As table 22 highlights, CW&C has an older population than the England average.

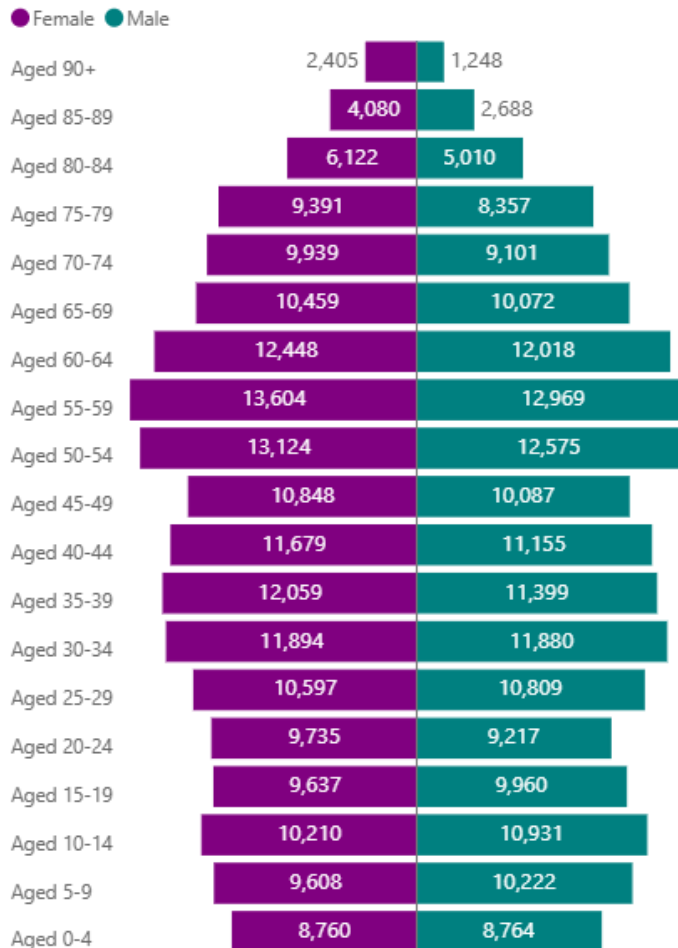
Table 22: Population estimates

Age group	CW&C count	CW&C %	England %
0-15	62,766	17.2%	18.5%
16-64	223,423	61.3%	62.8%
65+	78,872	21.5%	18.8%
85+	10,421	2.9%	2.5%
All ages	365,061	100.0%	100.0%

Source: Population estimate mid-2023, Office for National Statistics

Chart 7: Cheshire West and Chester population proportion by 5-year age band

Population by age group and gender



Source: Population estimate mid-2023, Office for National Statistics

Table 23: Population figures for Cheshire West and Chester (Residents)

Age	Estimated number	Proportion of the population
0-4	17,524	4.8%
5-9	19,830	5.4%
10-14	21,141	5.8%
15-19	19,597	5.4%
20-29	40,358	11%
30-39	47,232	12.9%
40-49	43,769	12.0%
50-59	52,272	14.3%
60-69	44,997	12.3%
70-79	36,788	10.1%
80 plus	21,553	5.9%
Total	365,061	

Source: Population estimate mid-2023, Office for National Statistics

According to the 2021 Census, there are 8.8% residents from ethnic minority communities in CW&C, which is far less than the 26.5% England average. Polish is the most frequently spoken non-English language.

8.2.2 GP registered population

There were approximately 389,000 patients registered on GP practice registers in CW&C (2024 National General Practice Profiles). One reason this is higher than the resident population is that the registered population includes people who live outside of the borough.

8.2.3 Resident population forecasts

The population in CW&C is forecast to increase by 8% to 393,500 by 2033. Older age groups will see the biggest increase, with the number of residents aged 65 plus expected to increase by 22%. It is predicted that there will be more than 100,000 local people aged 65 and over by 2033.

Table 24: Population forecasts by age group

Age	2023	2033	Change 2023-33	% change
0-15	62,800	61,600	-1,200	-2%
16-64	223,400	235,800	12,400	6%
65+	78,900	96,100	17,300	22%
85+	10,400	15,600	6,200	50%
Total	365,100	393,500	28,500	8%

Source: Interim forecasts (2023 to 2033), Insight and Intelligence Team, Cheshire West and Chester Council

The ageing population will increase pressures on NHS and social care as this age group makes up a disproportionately large percentage of GP consultations, hospital admissions and social services. This is likely to have an impact on prescribing levels and therefore pharmacy workload, assuming current prescribing patterns persist. Increasing numbers of older people will also lead to increasing numbers residing in care homes. Care homes may develop relationships with pharmacies for dispensing and other services.

8.3 Housing developments

CW&C's Local Plan requires at least 22,000 net dwellings to be delivered between 2010 and 2030, an annual average of 1,100 net dwellings per year. Up to 2024, 20,566 were completed, which leaves the remaining Local Plan housing requirement (2024-2030) at 1,434 units. The five-year requirement 2024-2029 is 1,255 (251 per year average) net dwellings. During the planning process developers are asked how they are going to support the provision of all essential services including primary healthcare.

The total housing supply (2024 to 2030) is 7,490 (commitments, development plan sites and small sites allowance as at 1 April 2024). This is above the five-year requirement figure in the Local Plan.

The largest developments will be seen in Northwich and Ellesmere Port community partnerships.

Table 25: Forecast number of new housing (average per annum to 2030)

Community partnerships	Average number of new housing per annum
Chester Central	90
Chester East	40
Chester South	130
Ellesmere Port	200
Frodsham, Helsby and Elton	60
Neston and Willaston	40
Northwich	220
Rural	50
Winsford	140

Source: Cheshire West and Chester Planning Data (Housing Land Monitor) 2023-24, Cheshire West and Chester Council

The government has made plans to deliver 1.5 million new homes over five years to tackle the housing shortage. The updated National Planning Policy Framework published in December 2024¹⁸ includes a standard method housing need figure of 1,914 net additional homes per annum for Cheshire West and Chester. This figure will be reflected in the updated Local Plan for Cheshire West and Chester.

There are 16 pharmacies in Northwich and 12 pharmacies in Ellesmere Port. In the Contractor survey, pharmacies were asked if they would have sufficient capacity within their existing premises and staffing levels to manage an increase in demand in their area. In Northwich 13 pharmacies answered this question, of which 10 reported they do have capacity to deal with any increase in demand. Eight pharmacies answered the question in Ellesmere Port of which seven said they could deal with an increase in demand.

Table 26: Contractor survey 2024 results for dealing with increased demand

Community partnership	Number of pharmacies who can deal with increased demand	Number of pharmacies who can deal with increased demand if adjustments are made	Number of pharmacies who cannot deal with increased demand	Number of pharmacies who did not respond
Chester Central	4	1	0	1
Chester East	2	1	0	2
Chester South	2	1	2	3
Ellesmere Port	7	1	2	4
Frodsham and Helsby	2	0	0	1
Neston and Willaston	3	1	0	0
Northwich	10	2	1	3
Rural	6	1	0	0
Winsford	3	2	0	1

Source: Pharmacy Contractor Survey 2024

Of the pharmacies in Ellesmere Port and Northwich there are good opening times meaning good availability of services. Most pharmacies in these two areas are open on a Saturday and there is more than one pharmacy open later than 5:30pm on a weekday. There is also coverage of services on a Sunday with more than one pharmacy open.

8.4 Deprivation

Whilst Cheshire West is an affluent borough the overall picture masks stark gaps between areas of prosperity and deprivation:

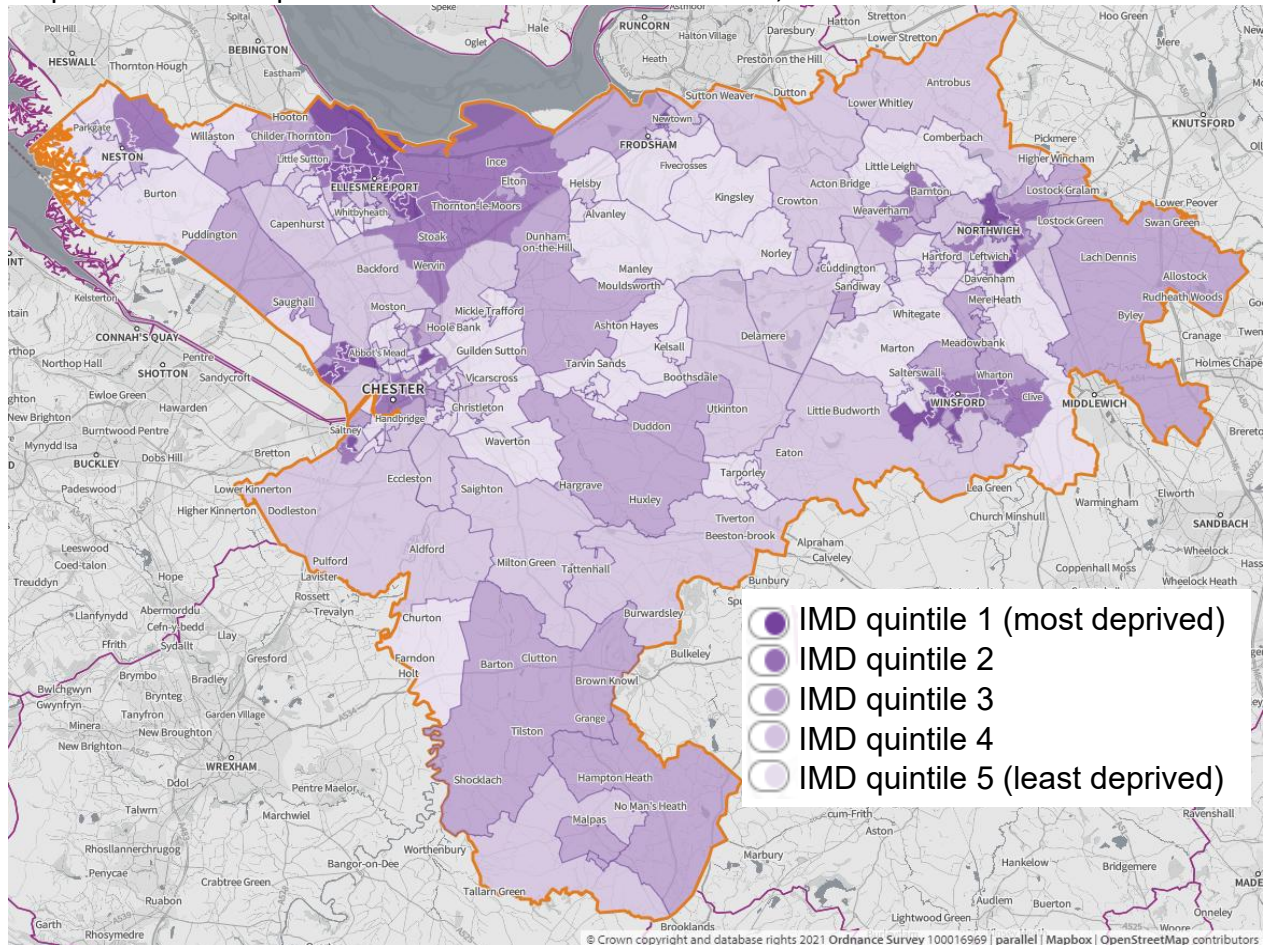
- There are approximately 18,147 households (11.4%) in CW&C in fuel poverty (2022 data)¹⁹
- Approximately 10,796 children live in low-income families which equates to 17.3% of the families in CW&C compared to 20.1% in the UK (2022/23 data). There were seven wards where more than a quarter of children live in low-income families. Low-income families are those claiming child and household benefit with an income less than 60% of the UK median household income (relative measure before housing costs)²⁰.
- In 2023/24, 23,126 food parcels were distributed in CW&C from 38 distribution centres²¹
- The median local household income is £35,100 per year but 21.8% of local households have an annual income of less than £21,900 (income below 60% of UK median household income)²²
- 19.8% of pupils are eligible for free school meals. This has steadily increased over the last five years²³.

The English Indices of Deprivation 2019 (IMD 2019) are the government's official measure of deprivation. The IMD is constructed by combining seven domains, each of which relates to a major social or economic deprivation. The scores for each domain are combined into a single deprivation

score for each small area in England allowing each area to be ranked relative to one another according to their level of deprivation.

CW&C is ranked 183rd most deprived out of 317 local authorities in England (where 1 is most deprived and 317 the least deprived). There are pockets of deprivation across the borough with 26,700 local people living in 16 small neighbourhoods ranked in the 10% most deprived neighbourhoods in England. Two of these 16 neighbourhoods rank in the 2% most deprived areas in England. These neighbourhoods are in Lache and Winsford. The highest levels of deprivation are found in the urban areas, primarily within the City of Chester and the towns of Ellesmere Port, Northwich and Winsford. Map 24 shows the levels of deprivation across the borough by lower super output area (LSOA).

Map 24: Levels of deprivation in Cheshire West and Chester, IMD 2019



Source: SHAPE

In Cheshire West and Chester's most deprived areas (those areas amongst the 20% most deprived areas in England), more neighbourhoods and residents are affected by health deprivation and disability than any other type of deprivation; 55 neighbourhoods with a population of 85,964. In these neighbourhoods, quality of life may be impaired through poor physical and mental health, and there is increased risk of premature death.

8.5 Life expectancy

For the three-year period 2021-2023 the estimated life expectancy at birth for CW&C was similar to the England average for men and significantly better for women; male 79.4 years (England 79.1 years) and female 83.5 years (England 83.1 years) (Office for Health Improvement and Disparities (OHID) fingertips life expectancy at birth 2021-2023).

The increased number of deaths in 2020, during the COVID-19 pandemic, impacted life expectancy estimates. In line with national trends, life expectancy for men has decreased since 2017/19.

Healthy life expectancy (HLE) estimates have reduced for both males and females since 2017-19. In the 2021-2023 period, the majority of local areas in England and in Wales had lower HLE at birth than before the COVID-19 pandemic in 2017-2019. In CW&C, between 2017-19 and 2021-23, male HLE at birth fell by 5.2 years, whilst for females it fell by 5.1 years. However, the reductions are not statistically significant. In 2021-23, healthy life expectancy in CW&C was similar to England for both males and females. Males in CW&C could expect to spend 62 years of their lives in good health (England 61.5); for females, it was 63 years (England 61.9)

Health inequalities have persisted with significantly lower life expectancy in our more deprived areas. The inequality gap between men living in the most and least deprived areas of CW&C has reduced but remains wider than for women (9.8 years vs 7.8 years). The inequality gap has also reduced for women (OHID fingertips Inequality in life expectancy at birth 2018-2020).

Life expectancy is impacted by rises and falls in causes of mortality and inequality in mortality rates which will be further explored in the next section.

8.6 Under 75 mortality

Premature mortality rates (deaths under 75 years) from major disease groups (cancer, circulatory diseases, respiratory disease and liver disease) are measured by the Office for Health Improvement and Disparities within the Public Health Outcomes Framework (PHOF).

In 2023, 1,171 people in CW&C died under the age of 75: 713 males and 458 females. The under 75 mortality rate for people in CW&C was 342.3 per 100,000. This is higher than the previous year when the rate was 319.8 per 100,000 but is similar to the average England rate of 341.6 per 100,000.

Premature mortality rates for men are significantly higher than rates for women. Cancer and cardiovascular diseases were the biggest killers of people aged under 75 in CW&C, accounting for 39% and 22% of premature deaths respectively. CW&C had similar under 75 mortality rates from major disease groups to the England average except for liver disease (1 year measure) which was significantly better than England.

There had been an increase in early deaths (under 75) for cancer, cardiovascular disease and respiratory disease since 2020-2022 with both males and females seeing an increase in premature mortality rates.

Cancer deaths:

- Accounted for 1,327 deaths during 2021-23, a rate of 119.9 per 100,000 under 75 population. This is an increase from 2020-2022 (115.4 per 100,000) but is statistically similar to the England rate of 121.6 per 100,000.
- Mortality rates from cancer are higher for males than females (135.5 per 100,000 compared to 105.2 per 100,000). Both saw an increase in rate between 2020-22 and 2021-23.

Deaths from cardiovascular disease:

- Cardiovascular disease includes coronary heart disease, heart failure, stroke and vascular dementia.
- The mortality rate from cardiovascular disease for males has been increasing over the last decade and is currently 107.8 per 100,000 compared to 43.8 per 100,000 for females.
- Rates are lower but statistically similar to the England average (CW&C 74.9 per 100,000 compared to 77.1 per 100,000 England average).
- There had been a decrease in under 75 mortality from stroke which was 13.7 per 100,000 in 2021-23, and is higher but significantly similar to the England average of 12.7 per 100,000.

Deaths from respiratory disease:

- The World Health Organization defines respiratory disease as diseases of the airways and other structures of the lung. The most common diseases and conditions include asthma, Chronic Obstructive Pulmonary Disease (COPD), lung cancer, lung infection (Pneumonia) and collapse of part or all of the lung (pneumothorax or atelectasis).
- Deaths from respiratory disease have increased since 2020-22.
- The rate in CW&C in 2021-23 was 31.2 per 100,000 which is higher but statistically similar to the England average (30.3 per 100,000).
- Respiratory disease mortality rate is higher for males than females (32.8 per 100,000 compared to 29.6 per 100,000), with both seeing an increase in rate.

Deaths from liver disease:

- The rate of mortality due to liver disease in under 75s has decreased to 20.5 per 100,000 during 2021-23 compared to 22.6 per 100,000 in 2020-22.
- The 3 year rate is similar to the England average (21.5 per 100,000). However the 1 year rate for 2023 is significantly better than the England average (16.3 per 100,000 compared to 21.9 per 100,000 for England).
- Both males and females have seen a decline in mortality rates.

According to OHID, a death is considered preventable if ‘... in the light of the understanding of the determinants of health at the time of death, all or most deaths from the underlying cause (subject to age limits if appropriate) could mainly be avoided through effective public health and primary prevention interventions.’

In CW&C during 2023 there were 495 deaths of under 75s that were considered preventable, equating to a rate of 145.1 per 100,000 population. The rate of preventable mortality has increased slightly from the 2022 rate of 142.4 per 100,000. The rate is lower than the England average of 153 per 100,000 but not significantly so. The preventable death rate is twice as high for males at 203.9 per 100,00 compared to 106.2 per 100,000 for females though both have seen an increase. Cardiovascular disease considered preventable has steadily been increasing over the last five data

periods (since 2017-19). Preventable cancer and preventable respiratory disease saw increases from 2020-22.

Our behaviours regarding smoking, physical activity, diet, alcohol and drug consumption, have the biggest impact on preventable mortality as these contribute to the development of long-term conditions and disease.

8.7 Long-term conditions and chronic disease

Long-term conditions or chronic diseases are conditions for which there is currently no cure that are managed with drugs and other treatment. Lowering the prevalence of long-term conditions will reduce premature mortality and increase the number of years lived in good health. Many of these are linked to our behaviours (see section 8.8 page 75).

In the 2024 GP patient survey, two-thirds (62.7%) of patients reported they have a long-standing health condition, equating to approximately 4,200 patients. This is slightly higher than the national average of 60.6%. Ellesmere Port, Winsford and Chester East Primary Care Networks (PCNs) reported a higher percentage of long-standing health conditions, compared with the CW&C average (66.6%, 65.2% and 65.1% respectively).

The NHS Quality and Outcomes Framework (QOF) includes data on disease prevalence by GP practice, taken from GP registers. Using this tool, we can understand how common certain conditions are in CW&C and compare it against the national average.

Based on QOF data 2023/24, the top five chronic conditions in Cheshire West are:

1. Hypertension
2. Asthma
3. Obesity
4. Diabetes
5. Depression

A number of these conditions are risk factors for disease, including the top condition hypertension, which is a risk factor for heart attack, stroke, kidney disease and some forms of dementia.

8.7.1 Physical conditions

The 2023/24 QOF data shows that CW&C has a higher prevalence of patients with a long-term condition or disease than the national average for:

- Cancer (4.8% CW&C vs 3.6% England)
- Coronary heart disease (3.5% CW&C vs 3.0% England)
- Stroke (2.1% CW&C vs 1.9% England)
- Heart failure (1.4% CW&C vs 1.1% England)
- Atrial fibrillation (2.9% CW&C vs 2.2% England)
- Chronic obstructive pulmonary disease (COPD) (2.1% vs 1.9%)
- Hypertension (16.4% CW&C vs 14.8% England)
- Rheumatoid arthritis (1.1% CW&C vs 0.8% England)
- Osteoporosis aged 50+ (1.3% vs 1.1% England)

CW&C has a lower prevalence compared to England of:

- Diabetes mellitus (7.4% CW&C vs 7.7% England)
- Chronic kidney disorder by disease (CKD) (4.3% CW&C vs 4.4% England)

In the GP patient survey 2023, 19.4% of patients reported a long-term musculoskeletal condition (MSK) such as back and/or neck pain. This is similar to the England average of 18.4%. According to the Office for Health Improvement and Disparities (OHID), back and neck pain are the top reason for years lived with disability and MSK is known to impact severely on quality of life.

8.7.2 Mental health

Prevalence of depression has steadily increased over the last 10 years. 2022/23 QOF data shows that CW&C has a higher recorded prevalence of patients aged 18+ with depression than the national average (14.5% compared to 13.2%). Estimates from Cheshire and Merseyside ICB (taken from the Business Intelligence Portal BIP at January 2025), suggest there are around 74,000 patients in CW&C with depression, a rate of 188.9 per 1,000 patients. Estimates also indicate there are 96,600 patients with anxiety, a rate of 247.51 per 1,000. Winsford, Cheshire Central and Chester South PCNs have the highest rates of patients with anxiety and depression.

Prevalence of patients with severe mental illness (SMI), which includes schizophrenia, bipolar affective disorder and other psychoses is 0.91%, similar to the England average of 0.96% (QOF 2023/2024). This equates to approximately 3,500 registered patients. This population is at risk of higher rates of smoking, obesity, diabetes, COPD and cardiovascular disease. In CW&C the rate of premature mortality in adults with severe mental illness is 97.7 per 100,000 compared to the national average of 110.8 per 10,000. The rate has been steadily increasing since 2017-19, although it did fall slightly between 2020-22 and 2021-23. The CW&C rate has been consistently better than the England average.

Children and young people of school age who have an identified social, emotional and/or mental health need, are defined as having special educational needs (SEN). In CW&C the proportion of school pupils with SEN for identified social, emotional, and mental health needs has been increasing following the England trend. In 2022/23, 3.4% of pupils (approx. 1,700 pupils) had social, emotional, and mental health needs. This is similar to the England average of 3.3% and an increase from the 2021/22 prevalence of 2.9%.

Data taken at January 2025 from the Business Intelligence Portal (BIP) produced by Cheshire and Merseyside ICB, indicates there are approximately 3,700 patients on the dementia register aged 65+ in CW&C, equating to a prevalence of 4.3%. There are approximately 110 patients aged under 65, a prevalence of 0.04%. There are an estimated 4,000 undiagnosed cases of dementia.

8.8 Healthy behaviours

Unhealthy behaviours play a key role in developing a long-term condition. Making positive changes to our lifestyle can reduce the risk of developing a long-term condition, thereby lowering premature mortality and increasing life-expectancy and quality of life.

Unhealthy behaviours include physical inactivity and poor diet leading to obesity, smoking, high alcohol consumption, drug use and poor sexual health. In addition, attending services such as

cancer screening will help to ensure early diagnosis, which is associated with better health outcomes.

Data from PHOF and QOF indicate that the biggest challenge in CW&C is overweight and obesity which has been increasing, and for adults is significantly worse than the England average. Obesity is a leading cause of premature death and mortality, associated with a wide range of diseases including cardiovascular disease, type II diabetes, and some cancers.

8.8.1 Weight management and physical activity

The percentage of adults who are overweight or obese has been increasing over the last three years in CW&C. An estimated 68.3% of adults aged 18+ are classified as overweight or obese (2022/23) which is significantly higher than the England average of 64% and is an increase from the previous year (65.4%) (PHOF).

The percentage of patients on GP disease registers aged 18 and over classed as obese is 14.1% which is higher than the England average of 12.8% (QOF 2023/24).

Regular physical activity is associated with reduced risk of obesity. It is recommended that adults undertake a minimum of 150 minutes of moderate physical activity per week, or 75 minutes of vigorous physical activity per week, or a combination of the two. The percentage of physically active adults in CW&C increased in 2022/23 to 72.4% (PHOF). This is significantly better than the England average of 67.1%.

It is also recommended that the population consume five portions of fruit and vegetables a day. Estimates suggest that almost a third of residents aged 16 plus (31.6%) meet the daily requirement, the same as the England average (31%) (PHOF).

Children who are a healthy weight and are active and understand nutrition, are more likely to become healthy adults. Children are weighed in school in reception year (aged 4-5) and Year 6 (aged 10-11). 2023/24 data showed an increase in reception aged children (4-5 year olds) who are overweight or obese to 23.1%. This is higher, but statistically similar to the England average of 22.1%. For children in year six (aged 10-11) the proportion of children overweight or obese decreased to 33.9%, this is significantly better than the England average of 35.8%.

8.8.2 Smoking

Tobacco smoking is the most important cause of preventable ill health, disability, and premature mortality in the UK, linked to the development of more than 100 health conditions including cancer, COPD and heart disease. Smoking prevalence has been decreasing nationally and locally. Smoking prevalence for adults aged 18 and over increased in 2023 to 10.5% from 8.9% the previous year. This is similar to the England average of 11.6% (PHOF, Annual Population Survey). Smoking is more prevalent for those working in routine and manual occupations. In 2023 there was an increase from 19.6% to 29.9% of adults working in these occupations who are smokers.

GP patient survey data indicated that 11.3% of patients aged 15 and over were current smokers in 2022/23 which is also an increase from 2021/22 (10.2%) but is significantly better than the England average of 13.6%. This data demonstrated that smoking is higher for those with a long-term mental

health condition, 21.8% in CW&C in 2022/23. Aggregated data suggests that there are higher rates of smoking in Ellesmere Port (16.3%), Chester South (14.7%) and Chester Central (13.4%) PCNs.

8.8.3 Substance misuse

Alcohol consumption is a contributing factor to deaths from a diverse range of conditions including cancer, heart disease, stroke and liver disease (OHID). There is limited data available locally on alcohol misuse prevalence in the borough. In 2015-18, nearly a third (30.4%) of our adult population were drinking at unsafe alcohol levels, defined as more than 14 units a week, which was significantly higher than the England average of 22.8% (OHID). Hospital admission episodes for alcohol-related conditions are also reported in the PHOF. The rate of admissions for alcohol related conditions increased both locally and nationally during 2023/24. The rate of admissions was 472 per 100,000 in CW&C which is significantly better than the England average of 504 per 100,000.

According to OHID, drug misuse is a significant cause of premature mortality in the UK with drug use ranked third highest cause of death in the 15-49 age group. In CW&C deaths from drug misuse were steadily increasing but the rate dropped during the period 2020-22 and at 2021-23 is 5.2 per 100,000, which is similar to the England average of 5.5 per 100,000. There were 54 deaths from drug misuse in CW&C during 2021-2023.

8.8.4 Sexual health

Good sexual health includes practicing protected sex to remain free from sexually transmitted infections (STIs) and attending regular check-ups to ensure any STIs are quickly diagnosed and treated. There are STIs that need to be managed long term such as HIV, hepatitis B and hepatitis C.

Over the last five years CW&C has consistently had a lower prevalence of new STI diagnoses than the England average (PHOF). In 2023 there were 569 per 100,000 new STI diagnoses, a reduction from the 2022 rate of 610 per 100,000, and lower than the England average of 704 per 100,000.

The rate of long-acting reversible contraception (LARC) such as implants and intra-uterine system (IUS) or the intrauterine device (IUD), prescribed by the GP and Sexual and Reproductive Health Service is included in the PHOF as is a proxy measure for wider access to the range of potential contraceptive methods. Prescribed LARC (excluding injections) in CW&C has consistently been higher than the England average. In 2022 the local rate was 50 per 1,000 females aged 15-44 compared to a national average of 44.1 per 1,000.

Human Immunodeficiency Virus (HIV) is a long-term condition that can be managed with medication. The 2023 diagnosed HIV prevalence rate for those aged 15 to 59 in CW&C is 1.34 per 1,000 which is significantly better than the England average of 2.4. This rate had been increasing over the last five years but has decreased since 2022 when the rate was 1.35 per 1,000. The rate of new HIV diagnoses increased to 6.8 per 100,000 in 2023 from 3.3 per 100,000 in 2022. It is significantly lower than the England average of 10.4 per 100,000.

A HIV key strategic priority is to decrease HIV diagnoses made at a late stage of HIV infection (OHID) with a benchmarking goal set at 25% or lower. Late diagnosis is the most important predictor of morbidity and mortality among those with HIV infection. The proportion of late HIV diagnosis in CW&C reduced from 50% in 2020-2022 to 38.9% in 2021-23.

HIV testing is integral to the treatment and management of HIV infection. HIV testing coverage refers to the number of persons tested for HIV out of those people considered eligible for a HIV test when attending specialist sexual health services. CW&C has been consistently worse than the England average for HIV testing coverage although there has been an increase in the testing rate in CW&C over the last three years. In 2023 the rate of testing was 1,790.7 per 100,000 compared to an England average of 2,770.7 per 100,000.

8.8.5 Cancer Screening

The PHOF contains data for breast, cervical and bowel screening. Screening supports early detection of cancer and saves thousands of lives each year (OHID).

Taken from the most recent PHOF data:

- Females aged 50 to 71 are eligible for breast cancer screening every three years. Historically, CW&C has had a significantly higher proportion of eligible females having breast cancer screening than the England average. The rate of breast cancer screening since 2021 has remained lower than before the COVID-19 pandemic although has started to increase. In 2024, 74.5% of eligible females attended breast cancer screening, which is significantly higher than the England average of 69.9%.
- Females aged 25 to 49 are eligible for cervical cancer screening every 3.5 years, and females aged 50 to 64 every 5.5 years.
 - In CW&C the proportion of eligible females aged 25 to 49 attending for cervical cancer screening has been consistently above the England average. In 2024, 72.9% of eligible females had cervical cancer screening which is significantly better than England (66.1%).
 - In CW&C the proportion of eligible females aged 50 to 64 attending for cervical cancer screen has also been consistently above the England average since 2015. In 2024, 76.4% of eligible females had cervical cancer screening which is significantly better than England (74.3%).
- All adults aged 54 to 74 are eligible for bowel cancer screening every two years. The rate of screening has been increasing in CW&C and has been consistently better than the England rate. In 2024, 74.2% of eligible adults had bowel cancer screening which is significantly better than the England average of 71.8%.

8.9 Populations with protected characteristics

There is widespread evidence to demonstrate that some populations, such as those from an ethnic minority group, those with a disability, people who identify as transgender, and people who identify as a sexual orientation other than heterosexual, can experience poorer health outcomes. There is a complex interplay of factors affecting health inequality for minority groups including, but not exclusive of, discrimination, low take-up of services, differences in culture and lifestyle, poverty, and negative and distressing experiences.

The Equality Act 2010 is the legal framework to protect the rights of individuals from unfair treatment and promotes a fair and more equal society. The Act includes 'public duty', the duty to promote equal treatment in the delivery of public services to all. Pharmacies must adhere to this public duty in the provision of goods and services.

There are nine protected characteristics defined in the Equality Act 2010. This means it is against the law to discriminate against someone because of:

- Age
- Disability
- Gender reassignment
- Marriage and civil partnership
- Pregnancy and maternity
- Race
- Religion or belief
- Sex
- Sexual orientation

Some of the main health issues facing each of the above groups will be summarised in this section. Whilst some of these groups are referred to in other parts of this PNA, this section focuses on their health issues.

8.9.1 Age

Age related health issues tend to be greater amongst the very young and the very old. For this reason, we will focus on children aged under 18 and older people aged 65 plus.

a) Health issues affecting children and young people

Health issues facing children and young people include:

- Neonatal e.g. premature birth, low birth weight, neonatal jaundice.
- Common childhood illness e.g. earache, cough and cold symptoms etc.
- Lifestyle related e.g. overweight, poor sexual health, substance misuse.
- Mental health.
- Unintentional injury e.g. accidents, poisoning.
- Long-term conditions or disability.
- Poor health as a result of neglect and abuse e.g. malnutrition, intentional injury.

At birth, babies might face a neonatal problem which can be life-threatening, particularly infections, but most often these are treatable. This can include treatment required following birth trauma for example intracranial haemorrhage, poor health as a result of low birth weight and/or premature birth such as respiratory disease, neonatal jaundice, anaemia, and congenital infections such as rubella, syphilis, and herpes.

Common childhood illnesses can usually be treated at home and advice can be sought from a pharmacist, GP or health visitor. Common childhood illnesses include:

- | | |
|------------------|---------------------------|
| • Chickenpox | • Colic |
| • Common cold | • Cough |
| • Croup | • Diarrhoea and vomiting |
| • Earache | • Measles |
| • Mumps | • Meningitis |
| • Skin rashes | • Sore throat |
| • Whooping cough | • Urinary tract infection |

Some childhood illnesses are vaccine preventable such as measles, and vaccine uptake should be encouraged.

Children and young people's lifestyle can have an impact on their physical health and wellbeing. Being physically healthy includes having nutritious food, being a healthy weight, engaging in movement and activity, having access to the outdoors, practicing healthy sexual relationships, and not smoking, vaping or using substances such as alcohol and drugs. Poor physical health can lead to ill-health, including mental ill-health. Risky behaviours such as substance use can lead to other risky behaviours such as unprotected sex. Being a healthy child is linked to being a healthy adult. Obesity, for both children and adults is a key priority in CW&C.

In 2023, a survey conducted by NHS England found that one in five children and young people aged 8-25 have a probable mental health condition²⁴. Common mental health conditions include depression, anxiety, conduct disorder, eating disorders, self-harm, attention deficit hyperactivity disorder and post-traumatic stress disorders. Some children may also experience psychotic disorders such as schizophrenia and personality disorders. Mental ill-health can impact on the way children learn, behave, participate, handle their emotions, and their physical health. Rates of mental health disorders rise with age between the ages of 5 to 19. For those aged 17 to 25, rates are twice as high for young women than young men. Statistics show that mental health conditions in children and young people are common, but some groups are more at risk of developing poor mental health. These include:

- Those living in lower income households
- Those who have faced adversity and trauma
- Children who are bullied
- Children who are bullies
- Young people who do not identify as heterosexual or cisgender
- Children whose parents are living with a mental health problem

C) Health issues affecting older people

Health issues affecting older people are usually caused by ageing, with the onset of long-term medical conditions and disability. CW&C has an ageing population and will need to support a greater number of older people with their health, healthcare and social care needs. Those living in the most deprived areas are also more likely to experience poorer health at an earlier age and have a lower life expectancy than those living in the least deprived areas.

The most common medical conditions²⁵ affecting older people include:

- | | |
|--------------------------|----------------------------|
| • Arthritis | • Diabetes |
| • Depression and anxiety | • Hearing loss |
| • Eye health | • Influenza (flu) |
| • High blood pressure | • Osteoporosis |
| • Urinary incontinence | • Shingles |
| • Bowel problems | • Urinary tract infections |
| • Dementia | • COVID-19 |

Although a number of conditions are treatable if detected early enough, some conditions are progressive, can cause problems with mobility, and have a negative impact on quality of life.

Falls are a particular concern as they are the leading cause of emergency hospital admissions for older people. A fall can have a serious impact on long-term health and care needs. Falls are more common in older people who have osteoporosis and arthritis.

Mental health issues in older people are also common but are not part of getting older. As people get older they are more likely to experience painful events or changes in their lives such as retirement, bereavement, becoming a carer, or needing to be cared for. This can lead to depression and anxiety.

8.9.2 Disability

a) Population

The Census 2021 indicated that 65,897 residents were classed as disabled under the Equality Act, equating to approximately 18.5% of the CW&C population. A further 27,628 residents were not disabled under the Equality Act but had a long term physical or mental condition, representing 7.7% of the population. Both measures are higher than the England average.

If 18.5% is applied to CW&C's population estimate mid-2023 (ONS), the number of people classed as disabled under the Equality Act increases to approximately 67,500.

Table 27: Residents with a long-term health problem or disability (Census 2021)

	Cheshire West and Chester		England and Wales
	Number	%	%
Disabled under the Equality Act	65,897	18.5%	17.3%
Day-to-day activities limited a lot	27,571	7.7%	7.3%
Day-to-day activities limited a little	38,326	10.7%	10.0%
Not disabled under the Equality Act	291,253	81.5%	82.7%
Has long term physical or mental condition but day-to-day activities are not limited	27,628	7.7%	6.8%
No long term physical or mental condition	263,625	73.8%	75.9%

Source: Census 2021, Office for National Statistics

Calculation of local learning disability (LD) prevalence rates in CW&C as part of the Cheshire West and Chester Learning Disability JSNA 2020, indicates that 1.87% of the population will have a learning disability. This is a rate of 18.6 per 1,000 residents. When applying this to the population estimate mid-2023 (ONS) for CW&C, this is approximately 5,600 adults aged 16 plus with an LD within the borough. Of adults with an LD, an estimated 1,300 will have an LD classed as severe.

National General Practice Profiles show that there were approximately 2,100 patients with a learning disability recorded on GP LD registers in CW&C in 2023/24.

b) Health needs of residents with a disability or long-term condition

People with disabilities are at greater risk of poor health and wellbeing. They are also more likely to face barriers to accessing health services and will have needs specific to their disability or condition.

There are a wide range of disabilities including physical, learning, mental health, and long-term conditions. The Equality Act 2010 defined a disability as ‘... a physical or mental impairment that has a ‘substantial’ and ‘long-term’ negative effect on your ability to do normal daily activities’. A health condition is classed as a disability if it meets the definition of the Equality Act, this includes cancer and HIV.

There are a wide number of conditions and disabilities, which make it difficult to summarise health needs of this population. In some instances, people with a long-term condition or disability may be receiving treatment, physical therapy and/or medication, and may have poor health due to pain, fatigue and sickness. For other disabilities there may be no physical ill-health as a result of the disability or condition itself although they may face barriers to participation and discrimination.

Health needs associated with disability and long-term conditions vary widely but there are key messages that can be highlighted:

- There are often co-occurring physical conditions and/or co-occurring mental disorders (comorbidity).
- People with disability were disproportionately affected during the COVID-19 pandemic. Those with a disability or poor health are strongly encouraged to have their COVID-19 and Flu vaccinations.
- People with disability encounter a range of barriers including:
 - Attitudinal, such as discrimination, stigma, and exclusion from having their say etc.
 - Physical barriers, such as lack of accessible transport, services located too far away, unwillingness to provide reasonable adjustments etc.
 - Communication, such as not being provided with an easy read, hearing loop availability, individuals not having an understanding about disabilities etc.
 - Financial, such as being unable to afford the cost of travelling to a service or any costs of treatment not covered on NHS etc.
- There is a relationship between physical and mental ill health. Having a physical disability can increase a person’s chances of poor mental health.
- Those with a disability, particularly those with a learning disability or mental health problem, are more likely to make poor lifestyle choices which lead to poorer health and risk of developing further conditions. This includes being obese, being inactive, and unhealthy eating habits.
- Data from OHID indicates those living with severe mental illness (SMI) have 2-3 times higher premature (under age 75 years) mortality rates compared to those without SMI. This is driven by higher mortality from cardiovascular disease, cancers and respiratory disease. Another feature is lower cancer screening uptake rates amongst people with SMI.
- People with learning disabilities are living longer and as a result, the number of older people with a learning disability is increasing. However, the age at death of people with learning disabilities remains up to 20 years younger than that of the general population²⁶. Older people with a learning disability must remain active and healthy for as long as possible.

8.9.3 Pregnancy and maternity

a) Population

The following data for CW&C has been taken from OHID Child and Maternal Health Fingertips Profile (accessed January 2025):

- The fertility rate has been decreasing in CW&C over the last ten years. The fertility rate in 2022 for females aged 15 to 44 years was 50.2 per 1,000 which is similar to the England average of 51.9 per 1,000 (ONS).
- The 2021 conception rate for females aged under 18 was 13.2 per 1,000 which is similar to the England average of 13.1 per 1,000. This equates to 76 conceptions. In 2021 over half (55.3%) of under 18's conception led to abortion.
- In 2022/23, 0.5% of deliveries were to females aged under 18.
- During 2023/24, 7.2% of pregnant women were smoking at the time of delivery. This is similar to the England average of 7.4% but an improvement from 2022/23 when the prevalence was 9.4%.
- NICE recommends antenatal booking by 10 weeks of pregnancy²⁷. In CW&C, 70% of pregnant women had their booking appointment with a midwife within 10 completed weeks of their pregnancy. This is statistically better than the England average of 63.5%.
- In 2023/24, 65.2% of babies born had breastmilk as their first feed. This is significantly lower than the England average of 71.9%.

b) Health needs commonly associated with pregnancy and maternity

There are many common health problems that are associated with pregnancy. Some of the more common ones are:

- | | | |
|------------------------|---------------------------------|--------------------------------|
| • Backache | • Constipation | • Cramp |
| • Deep vein thrombosis | • Faintness | • Headaches |
| • High blood pressure | • Incontinence | • Indigestion/ heartburn |
| • Pre-eclampsia | • Leaking nipples | • Nausea |
| • Nosebleeds | • Urinating a lot | • Pelvic pain |
| • Haemorrhoids | • Skin and hair changes | • Varicose veins |
| • Tiredness | • Vaginal discharge or bleeding | • Swollen and/or bleeding gums |

Maternal obesity is a risk to both mother and child. Pregnant women should eat healthily and undertake moderate exercise. Fatigue and pregnancy related health problems such as nausea, tiredness and backache may reduce willingness and motivation to eat and exercise well. In addition to eating healthily, pregnant women need vitamins and nutrients such as folate and vitamin D.

Some vaccines including the flu vaccine, Respiratory Syncytial Virus (RSV) vaccine, and COVID-19 vaccine are recommended during pregnancy to protect the health of the mother and baby. During pregnancy a women's immune system is weakened which means they are less able to fight off infections, more likely to have complications, and more likely to be admitted to hospital. Whooping cough is a very serious infection for babies and pregnant women are encouraged to have a whooping cough vaccine.

There are some females who will have more health needs during their pregnancy:

- Young females aged under 20 are more likely to experience poor health during their pregnancy due to a number of factors, including being less likely to access antenatal services

early on in their pregnancy, and being more likely to make poor lifestyle choices during their pregnancy. OHID states that children born to teenage mothers have 60% higher rates of infant mortality and are at increased risk of low birthweight which impacts on the child's long-term health. Teenage mothers are three times more likely to experience post-natal depression and poor mental health for up to three years after the birth. Teenage parents and their children are at increased risk of living in poverty.

- Females who experience drug and alcohol use, are homeless, are refugees, or whose first language is not English are less likely to access antenatal services.
- Females aged over 35 are more likely to experience poor health during their pregnancy including high blood pressure, gestational diabetes, premature birth and other complications.
- Females expecting more than one baby are at risk of complications and will need additional scans and monitoring.
- Females with addictions such as smoking, drug and alcohol use will need extra support to quit the unhealthy behaviour.

8.9.4 Sexual orientation

The Equality Act 2010 states that a person must not be discriminated against because of their sexual orientation. There are many sexual identities beyond heterosexual, gay and bisexual, which are those most commonly referred to. However, for the purpose of this report all sexual identities other than heterosexual will be referred to as LGB+ (note in this section we are not including the 'T' for Transgender, as this is not a sexual orientation. Transgender will be discussed in a separate section). LGBT+ has however been used in part b health needs, as the studies referenced do not separate out findings for each population.

a) Population

The 2021 Census included a voluntary question for those residents aged 16 years and over about their sexual orientation. In total 277,632 residents in CW&C answered the question. Around 269,300 (91% of the CW&C population) identified as straight or heterosexual. Around 8,300 (2.8%) identified as LGB+ (Gay or Lesbian, Bisexual, or Other sexual orientation). The remaining 17,700 residents (6%) did not answer the question. There has always been difficulty estimating the size of the LGB+ population due to some people being unable or unwilling to disclose it.

b) Health needs of LGB+

Cheshire West and Chester's LGBT+ Mental Health JSNA (2018) has also been used for this PNA when considering the needs of the LGB+ population.

LGB+ people experience the same health issues as their heterosexual counterparts. They do not experience any health problems because of their sexual orientation, but they do experience health inequalities because of discrimination, exclusion and abuse, or the fear and expectation of these negative experiences. Despite many positive changes in LGB+ equality, many LGB+ people still face significant barriers to leading healthy and happy lives.

Those who identify as LGB+ face some of the following health inequalities:

- Higher rates of poor mental health, including depression, anxiety, eating disorders, self-harm and suicide than their heterosexual counterparts
- Lifestyle issues including drug and alcohol use

- For females, poor uptake of cervical screening
- Experience of domestic abuse from a family member or partner
- Encountering challenges when accessing healthcare services

A study by YouGov for Stonewall²⁸ has found evidence that half of LGBT+ people have experienced depression, and three in five have suffered from anxiety. 13% aged 18-24 said they have attempted to take their own life in the last year, and 31% of LGB+ people who are cisgender have thought about taking their own life. The findings show that poor mental health is higher among LGBT+ people who are young, from ethnic minority communities, disabled, from a socio-economically deprived background, or have experienced a hate crime. LGBT+ people are more likely to misuse substances. The study found that one in ten LGBT+ people had experienced some form of addiction in the last year. One in six (16%) said they drank alcohol almost every day, and frequency of alcohol consumption increased with age, with a third of LGBT+ people aged 65+ saying they drank every day. For drug use, young people were most affected, with 13% aged 18-24 using drugs at least once a month.

The Stonewall report (2018)²⁸ also highlighted evidence that discrimination, hostility and unfair treatment in healthcare services are still commonplace. They found that one in eight LGBT+ people (13%) have experienced some form of unequal treatment from healthcare staff because they are LGBT+. Almost one in four (23%) have witnessed discriminatory or negative remarks against LGBT+ people by healthcare staff and one in seven LGBT+ people (14%) have avoided treatment for fear of discrimination because of their sexual orientation. Respondents to the survey also highlighted inappropriate curiosity from healthcare staff, outing in front of other staff and/or patients without their consent, blaming their sexual orientation for their health condition, and pressure to access services to change or suppress their sexual orientation. Poor experiences of health services can lead to people delaying treatment and in turn lead to worse health outcomes.

Age UK²⁹ found that many older LGBT+ people have experienced a lifetime of persecution and prejudice, which means they are more likely to have anxiety and depression. They also reported that older LGB+ people fear that they would experience abuse, and would not be able to be themselves, if they need to stay in residential care or receive care in their own home. There is also fear about dementia and whether their identity will be neglected. Concerns about care are a barrier to seeking the help they need. Carers are less likely to seek support if they are in a same-sex relationship, even if they are struggling to cope.

8.9.5 Gender reassignment (including Transgender issues)

a) Population

In 2016 a Women and Equalities Committee report³⁰ made over 30 recommendations calling for government action to ensure full equality for trans people. One of the report's recommendations was that the use of the terms 'gender reassignment' and 'transsexual' in the Equality Act 2010 are outdated and misleading. Trans or transgender is an umbrella term to describe people whose gender is not the same as, or does not sit comfortably with, the sex they were assigned at birth. Trans people may describe themselves using a variety of terms including (but not limited to) Transgender, Transsexual, Gender-fluid, Non-binary, Gender variant, Crossdresser, Genderqueer. For the purposes of the PNA, we will use the term trans and summarise some of the health needs of this population.

Estimating the size of the Trans population is difficult. The 2021 Census included a voluntary question for those residents aged 16 years and over about their gender identity, however there is relatively high levels of uncertainty in the estimates and whether they are an over or underestimate. In total 295,356 CW&C residents answered the question. Around 280,800 (95% of the CW&C population) gender identity was the same as the sex registered at birth. Around 1,000 (0.3%) identified as Trans (Trans woman, Trans man, non-binary, gender identity different from sex registered at birth but no specific identity given, all other gender identities). The remaining 13,500 residents (4.6%) did not answer the question.

c) Health needs of the trans population

Cheshire West and Chester's LGBT+ Mental Health JSNA (2018) has also been used when considering the needs of the transgender population. Transgender people have the same health care needs as cisgender people (when an individual's gender identity matches the sex they were assigned at birth), but there are also specific health care needs and concerns, particularly if they wish to transition medically, as well as health inequalities that they face. Often the needs of the trans population are combined with the needs of the LGB+ population. Although there are shared inequalities, LGB+ refers to sexual identity, whereas trans refers to gender identity.

Trans equality has been slower to progress than LGB+ equality and has in recent years become a focal point for the media and politicians looking to restrict the rights of transgender people. This has led to an increased level of transphobia in the UK.

The health needs of those who identify as transgender include:

- Gender dysphoria (a condition where a person experiences discomfort or distress because there's a mismatch between their biological sex and gender identity).
- Needs around medically transitioning including the process, medications and surgery.
- High rates of poor mental health, including depression, anxiety, eating disorders, self-harm and suicide than their cisgender counterparts.
- Lifestyle issues including drug and alcohol use and inactivity.
- Experience of domestic abuse from a family member or partner.
- Challenges when accessing healthcare services.

The 2021 GP Patient Survey³¹ found that trans people are:

- Three times more likely than the general population to be living with dementia or to have a learning disability.
- Twice as likely as the general population to be experiencing mental health difficulties.
- Six times more likely than the general population to be autistic.
- More likely than the general population to experience neurological conditions, stroke, diabetes, kidney or liver problems and blindness.
- More likely to be aged 16-34 and living in more deprived parts of the country.

Trans adults report no differences in access to primary care but do prefer to be able to see the same GP for each appointment. They also report more negative experiences of interpersonal communication, such as involvement in decision-making over treatment, and poorer confidence or trust. Those with mental health needs were less likely to have their needs recognised and understood, and fewer trans adult said that their needs were met than the general population³¹.

Healthwatch³² found that trans people encounter issues when using NHS services due to negative attitudes and lack of knowledge or understanding from some healthcare professionals. Some individuals had to help educate their GP, providing up-to-date and correct information so that they could get the help they needed. There were also issues with health staff not using trans people's preferred or correct name or pronouns in written and verbal communication. These distressing and negative experiences can deter trans people from using health services because of fear of discrimination and prejudice, resulting in poorer health outcomes. Poor administration procedures around flagging that someone has transitioned on health records can also have other negative effects such as not being called for appropriate screening.

The Stonewall 'LGBT in Britain: Health Report' (2018)²⁸ evidenced higher levels of depression, anxiety, self harm, suicide, attempted suicide, and addiction experienced by the LGBT+ community due to abuse and discrimination, both experienced and feared. In addition, some trans people may experience gender dysphoria, a recognised medical condition, where a person experiences discomfort or distress because there is a mismatch between their biological sex and gender identity.

For those who wish to transition, mental health can be worsened by the process of transitioning from the sex assigned to at birth, to the gender identified as. This is because of difficulties accessing support and treatment, issues around NHS funding, being unable to be seen by a specialist in a timely fashion, being denied treatment or surgery, and experiences of transphobia including negative attitudes of health professionals. The process to commence treatment can take one to three years. In addition, as the individual can be refused treatment on the grounds of poor mental health, it is unlikely that an individual will seek support for their mental health during this time.

As well as the impacts on mental health that have already been discussed, hormone therapy and/or surgery creates big changes in the body and has added risks. This includes blood clots, gallstones, weight gain, diabetes, elevated liver enzymes and mood swings, as well as higher risk for cardiovascular problems such as stroke and heart attack. Surgery also has risk of complications. Lifestyle factors are also an issue. Evidence by Stonewall²⁸ indicated that the LGBT+ community are more likely to drink alcohol excessively and take illicit drugs. There is added risk if they mixed these substances with any hormone treatment. In addition, trans people are less likely to undertake physical activity due to issues around body image and access to gyms, sports and leisure facilities.

8.9.6 Sex

a) Population

Population figures for sex are based on the definition of biological sex as two categories, male and female, assigned at birth based on reproductive functions.

In CW&C there are:

- 186,599 females (51.2% of the population)
- 178,462 males (48.8% of the population)

ONS Population Estimates Mid-2023

b) Health needs related to biological sex

Your sex is less likely to have less of an impact on your health than other factors such as age, income, disability, if you belong to a minority group, and where you live. However, there are differences between males and females in their health needs.

Health issues based on sex include:

- There is inequality in life expectancy with females living longer than males. There is also more internal variation in life expectancy between males living in the least and most deprived neighbours compared to females.
- In CW&C, under 75 mortality rates for cardiovascular disease in particular (especially Stroke) are worse for males than females, as are mortality rates for cancer and respiratory disease.
- Nationally, older females are more likely to die from dementia and Alzheimer's Disease than men. Though age is the main risk factor for dementia, and women tend to live longer, there is research ongoing to look at the links between declining levels of Oestrogen following menopause in women and damage to the brain caused by Alzheimer's which could lead to more HRT being prescribed³³.
- Females have a higher prevalence of diagnosed common mental disorders than males. However, women are more likely to seek help from a healthcare professionals and it is possible male mental health problems are therefore more likely to be undiagnosed and treated. Suicide is more common in men.
- All forms of substance use are more common in males although in terms of alcohol disorders, the gap between men and women is less marked in older age, and binge drinking has been a problem among young females.
- Victims of domestic abuse are at a higher risk of serious injury and death. The majority of adult victims are female.
- Females have specific health needs relating to pregnancy, motherhood and menopause, as well as female only cancers. Males also have needs around male only cancers. Both genders have a need for cancer screening.
- Males are less likely to access healthcare or to access it in a timely fashion. There is a complex interplay between sex and other identities, such as being a gay male, or a female from an ethnic minority background. It must also be remembered that although biological sex is often referred to as binary (only two sexes), gender is more complex and a summary of the needs of the transgender population can be seen on page 85.

8.9.7 Race

a) Population

In the 2021 Census, 91.2% of the population in CW&C identified as 'White British'. 8.8% identified as an ethnic group other than this, compared to 26.5% of the England population. The largest population group after 'White British' is 'Other White' making up 3.2% of the population. These residents are a diverse collection of people with different countries of birth, languages and religions and includes, but is not exclusive of, white persons from Europe, United States, South Africa and Australia.

Table 28: Ethnic Group of usual residents, Census 2021

Ethnic Group	Proportion of the CW&C population
White	95.3%
English/Welsh/Scottish/Northern Irish/British	91.2%
Irish	0.7%
Gypsy or Irish Traveller	0.1%
Roma	0.1%
Other White	3.2%
Mixed/multiple ethnic groups	1.5%
White and Black Caribbean	0.3%
White and Black African	0.3%
White and Asian	0.5%
Other Mixed	0.3%
Asian/Asian British	2%
Indian	0.2%
Pakistani	0.2%
Bangladeshi	0.2%
Chinese	0.4%
Other Asian	0.6%
Black/African/Caribbean/Black British	0.6%
African	0.4%
Caribbean	0.1%
Other Black	0.1%
Other ethnic group	0.6%
Arab	0.2%
Any other ethnic group	0.4%

The 2021 Census indicated in CW&C approximately 4.1% of households had at least one person in the household whose first language is not English. There are 1.9% of households where no people living in the household had English as their main language, and 0.5% of households where a child aged 3 to 15 years has English as their main language but no adults.

b) Health needs associated with a person's race

For the purposes of this report individuals from ethnic minority groups have been grouped together. However, there are many different ethnic populations residing in CW&C, each with similarities and differences in their health needs.

Health patterns differ significantly between ethnic minority groups and the white British population; and between different minority groups, reflecting the diversity of demographic, socioeconomic, behavioural, cultural and other characteristics between ethnic groups³⁴. Although ethnic minority groups broadly experience the same range of illnesses and diseases as others, there is a tendency of some within ethnic minority groups to report worse health than the general population and evidence of increased prevalence of some specific life-threatening illnesses.

The King's Fund (2021)³⁵ highlighted that unpicking the cause of ethnic health inequalities is difficult and that available evidence suggests a complex interplay of deprivation, environmental,

physiological, health-related behaviours, and the ‘healthy-migrant effect’ (people who choose to migrate have better health than the population they have left behind but their own health often worsens in the new host country). Ethnic minority groups are disproportionately affected by socio-economic deprivation, a key determinant of health status in all communities. In addition, those from an ethnic minority background are less likely to access healthcare and seek support due to a number of reasons including experiences of discrimination and prejudice, language barriers, and cultural differences.

Examples of national data showing significant differences in the health between groups³⁴:

- People from the Gypsy or Irish Traveller, Bangladeshi and Pakistani communities have the poorest health outcomes across a range of indicators.
- Rates of infant and maternal mortality, cardiovascular disease (CVD) and diabetes are higher among Black and South Asian groups.
- Mortality from cancer, and dementia and Alzheimer’s disease, is highest among white groups.
- The COVID-19 pandemic had a disproportionate impact on ethnic minority communities, who have experienced higher infection and mortality rates than the white population.

Experiences of hate crime, discrimination and prejudice, including structural racism, can also lead to poor mental health. Fear of these experiences can lead to low uptake of health services and poorer health outcomes.

Traveller, Roma and Gypsy communities are a group considered to face some of the highest levels of health deprivation, with significantly lower life expectancy, higher infant mortality, and higher maternal mortality alongside mental health issues, drug and alcohol use and diabetes. These issues are representative of various lifestyle factors alongside issues of poor education, lack of integration with mainstream support services and a lack of trust in such institutions.

Asylum seekers are one of the most vulnerable groups within society, with often complex health and social care needs. Within this group are individuals more vulnerable still, including pregnant women, unaccompanied children, and people with significant mental ill health. Whilst many asylum seekers arrive in relatively good physical health some asylum seekers can have increased health needs relative to other migrants due to the situation they have left behind them, their journey to the UK and the impact of arriving in a new country without a support network.

Irregular or undocumented migrants such as those who have failed to leave the UK once their asylum claim has been refused, or those who have been illegally trafficked, also have significant health needs and are largely hidden from health services. Some asylum seekers will have been subjected to torture, as well as witnessing the consequences of societal breakdown of their home country – with consequences for their mental health. Culturally, mental illness may not be expressed or may manifest as physical complaints. Stigma may also be attached to mental ill-health. Furthermore, western psychological concepts are not universally applicable to asylum seekers. Mental health problems such as depression and anxiety are common, but post-traumatic stress disorder is greatly underestimated and underdiagnosed and may be contested by healthcare professionals. Children are particularly neglected in this area.

8.9.8 Religion and belief

a) Population

In the 2021 Census, 57% of CW&C residents stated they have a religion and 38% stated they have no religion. Of those who had a religion, the majority identified as 'Christian' (96%), followed by 'Muslim' (1.7%).

Table 29: Religion of usual residents, Census 2021

Religion	Proportion of the CW&C population
Religious	56.7%
Christian	96.1%
Buddhist	0.5%
Hindu	0.8%
Jewish	0.1%
Muslim	1.7%
Sikh	0.1%
Other	0.6%
No religion	37.8%
Not answered the question	5.5%

b) Health needs associated with religion and belief

The impact of religion and belief on health includes perceptions of health, illness and death; beliefs about causes of disease; approaches to health promotion; how illness and pain are experienced and expressed; where patients seek help; and the types of treatment patients prefer³⁶. In addition, religious people can face discrimination and prejudice when accessing services including Islamophobia and antisemitism. Discrimination also includes indirect discrimination, for example not making alternative arrangements and offering flexibility, e.g. being able to see a doctor of the same-sex. These reasons may result in people being less willing to access healthcare. However, research has suggested that attention to the religious needs of patients and service users can positively contribute to their wellbeing for example reduce their length of stay in hospital³⁷.

The Office for National Statistics analysed a range of health outcomes of people of different identities in England and Wales³⁸. Key findings include:

- Those who identified with no religion were significantly less likely to be satisfied with their health than those who identified as Christian, Hindu or Jewish.
- Prevalence of long-standing impairment, illness or disability was significantly lower among those who identified as Sikh compared with several other religious groups.
- Smoking prevalence was significantly higher among those who identified with no religion than several other religious groups.
- Those who identified as Jewish, Christian or with no religion reported a greater mean level of physical functioning than those who identified as Muslim.
- Those who identified as Sikh, Hindu or Christian reported a significantly greater mean level of mental functioning than those with no religion.
- Those who identified as Sikh were significantly less likely than several other religious groups to be in probable mental ill-health.

The Department of Health also reports that:

- The Muslim community has the poorest reported health followed by the Sikh population.
- For the Muslim, Sikh and Hindu communities, females are more likely to report ill health.
- Religious views on the beginning of life can influence attitudes towards reproductive medicine, abortion, contraception, and neonatal care.
- View on dying, death and the afterlife can influence attitudes towards pain relief for terminally ill people, means of determining the moment of death, brain death, organ donation and care for the corpse.
- The inclusion of relatives/ family is particularly relevant in some religious communities, where high emphasis may be placed on familial bonds, traditions and responsibilities.
- Religious and other beliefs can impact on the type of treatment and drugs used for example the prohibition of eating in Judaism and Islam means that porcine or alcohol-based drugs might be forbidden. Similarly, the use of bovine-based drugs or cattle-derived cartilage transplants would have belief implications for Hindu communities.
- Communities may have different views on mental illnesses for example some evangelical Christians suggest depression might be caused by demonic interference in people's lives.
- People may wish to use alternative therapies and medicines.
- Other issues related to religion include: gender issues for example same-sex wards and treatment by members of the opposite sex, spiritual practices such as prayer and ablution facilities, the impact of fasting on long-term conditions and breastfeeding.

Religious belief is closely connected to ethnic group and the impacts of race on health are discussed on page 88.

Other health concerns that are influenced by religion include gay conversion, honour-based violence and female genital mutilation.

8.9.9 Marriage and civil partnership

a) Population

In England marriage and civil partnership can either be between a man and a woman, or partners of the same sex. The Census 2021 indicated that 39% of the CW&C population aged 16 and over were married and 0.1% were in a civil partnership.

Table 30: Marital and civil partnership status of CW&C residents

Marital and civil partnership status	Proportion of the CW&C population
Single (never married or never registered a same-sex civil partnership)	28.9%
Married	38.6%
In a civil partnership	0.1%
Separated (but still legally married or still legally in a civil partnership)	1.6%
Divorced or formerly in a same-sex civil partnership which is now legally dissolved	7.9%
Widowed or surviving partner from a same-sex civil partnership	5.6%

Source: Census 2021

b) Health needs related to marriage and civil partnership

Marriage and civil partnership are a protected characteristic under the Equality Act 2010 meaning a person cannot be treated differently because they are married or in a civil partnership. There are fewer health issues associated with marriage and civil partnership than other protected characteristics.

There are no health issues arising because a person is married or in a civil partnership, their health needs are the same as those who are not married. However, there may be health issues that are linked to them being married or in a civil partnership, that are linked to other characteristics. For example, a same-sex married couple may experience discrimination, impacting on their mental health but this is related to their sexual orientation. Also, a married woman in some cultures and religions may be expected to be dependent on her husband who would make decisions about her health and wellbeing on her behalf including sexual and reproductive health and ability to access healthcare.

8.9.10 Protected characteristics and pharmacies

The above sections describe some of the key health issues affecting populations with protected characteristics. Understanding these health issues can help services be tailored and targeted to those with specific needs and ensuring pharmacy is inclusive.

Community pharmacies are required to support patients in taking dispensed medications, by making reasonable adjustments for patients with identified needs as per the Equality Act 2010.

The requirement of the community pharmacy is to ensure that an appropriate assessment is undertaken of the patient to establish their needs and ascertain what type of reasonable adjustment would be required. There is no exhaustive list of what a reasonable adjustment could be and community pharmacies are not required to simply provide a multi-compartment compliance aid (MCCA).

Community pharmacies are encouraged to work collaboratively with prescribers, other health professionals and social care to support patient needs. However, community pharmacies are not required to dispense medications into MCCAs because it has been directed by another health professional or social care. Health professionals and social care should highlight patients who may require support with medicines to enable the community pharmacy to carry out an assessment to determine appropriate medicines support.

Reasonable adjustments for patients might include the use of reminder charts, large print labels, provision of information sheets, a wheelchair ramp and use of Language Line.

The National Pharmacy Association³⁹ also urged pharmacies across England to join in with a new national plan for inclusive pharmacy practice. The plan sets out actions for pharmacy leaders and their teams to consider including developing their understanding of the benefits of diverse teams, and culturally competent healthcare service delivery. Pharmacies can develop and embed inclusive pharmacy professional practice into everyday care for patients and members of the public, to support the prevention of ill-health and address health inequalities within our diverse communities³⁹.

Pharmacies are located close to people's homes and workplaces giving them the unique opportunity as a local health asset to really impact on local people's health and wellbeing. Many underserved groups may be more likely to go to a community pharmacy than a GP or another primary care service as it is a less formal environment. Pharmacies therefore should be welcoming and accessible environments and a first port of call for minor health needs. By making inclusive changes, pharmacies can help improve outcomes, address health inequalities, and increase customer satisfaction across different population groups.

The Equality Authority explains that pharmacies must ensure that:

- Customers do not experience discrimination, harassment or victimisation on any of the nine grounds covered by equality legislation.
- Adjustments are made to take account of the practical implications of customer diversity across the nine grounds with particular focus on making reasonable accommodation for customers with disabilities.
- There is a proactive approach to promoting equality for customers from across the nine grounds.

NICE guidelines⁴⁰ recommends that pharmacies address health inequalities by working with other agencies to identify underserved groups. This can help to tailor health and wellbeing interventions to suit individual needs and preferences and maximise impact.

The Pharmacy Contractor Survey 2024, asked pharmacies if, to the best of their knowledge, there were any gaps in access or pharmaceutical needs for any of the protected characteristics. For all of the protected characteristics the majority of pharmacies said they were unaware of any gaps. However, it must be considered that being unaware of a gap does not mean that a gap does not exist, especially as the individual who completed the survey may not belong to the protected characteristic group they are commenting on.

The survey highlighted that:

- Only nine pharmacies who responded to the survey were able to provide advice and support if a customer wishes to speak to a person of the same sex.
- There were 10 pharmacies who responded to the survey who do not have a wheelchair accessible entrance and 2 pharmacies who do not have a wheelchair accessible floor.
- 36 pharmacies that responded to the survey had disabled parking.

9. Cheshire West Priorities

9.1 Cheshire and Merseyside Integrated Care Board (ICB)

NHS Cheshire and Merseyside ICB is responsible for planning NHS services for our population which include GP practices, pharmacies, NHS dentists, NHS opticians and hospitals. It serves a population of over 2.7m people across nine Places - Cheshire West, Cheshire East, Halton, Knowsley, Liverpool, Sefton, St Helens, Warrington and Wirral.

Figure: Cheshire and Merseyside ICB nine Places



9.2 Cheshire West Place Plan 2019-2026

The Place Plan represents the shared vision for Cheshire West to maximise quality of life and opportunity for our residents. It is also the borough's statutory Health and Wellbeing Strategy. The plan has ten priorities for Cheshire West:

- Addressing climate change
- Reducing inequalities
- Improving public mental health and wellbeing
- Promoting wellbeing and self-care
- Prevention and early detection
- Integrating our health and care services
- Making it easier to navigate health, social care, and community-based services
- Anticipating the future needs of our population
- Keeping people safe
- Ensuring we make the best use of our people and financial resources – spending the 'Cheshire pound' wisely and well, whilst improving service quality

9.3 Pharmacy activity supporting local priorities

In England there are an estimated 1.2 million visits to a pharmacy every day for health-related issues, and these provide a valuable opportunity to support behaviour change through making every one of these contacts count. Making healthy choices such as quitting smoking, improving diet and nutrition, increasing physical activity, losing weight and reducing alcohol consumption could make a significant contribution to reducing the risk of developing disease, improving health outcomes for those with long-term conditions, reducing premature death and improving mental wellbeing. Pharmacies are ideally placed to encourage and support people to make these healthy choices as they are a comprehensive, trusted resource in all geographical areas of the borough.

Pharmacies contribute to Cheshire West's Place Plan priorities by:	Place Plan priorities contributing to:
Helping to improve the health of the population and reduce inequalities through the dispensing of medicines, providing formal consultations and informal advice, supporting self-care, medicines management advice including a new Medicine Service, and the promotion of healthy lifestyles.	<ul style="list-style-type: none"> • Addressing climate change • Reducing inequalities • Improving public mental health and wellbeing • Promoting wellbeing and self-care • Prevention and early detection • Anticipating the future needs of our population • Keeping people safe
All pharmacies adopt the framework of Healthy Living Pharmacy which is the consistent provision of a broad range of health improvement interventions to help increase the health and wellbeing of the local population and reduce health inequalities. One to one advice is provided on healthy lifestyle topics such as smoking cessation, weight management etc. This is opportunistic to patient groups who present prescriptions for dispensing.	<ul style="list-style-type: none"> • Reducing inequalities • Improving public mental health and wellbeing • Promoting wellbeing and self-care • Prevention and early detection • Anticipating the future needs of our population • Keeping people safe
Pharmacies are required to participate in up to six public health campaigns each calendar year by promoting public health messages to users. The topics for these campaigns are selected by NHS England	<ul style="list-style-type: none"> • Reducing inequalities • Improving public mental health and wellbeing • Promoting wellbeing and self-care • Prevention and early detection • Anticipating the future needs of our population • Keeping people safe

	<ul style="list-style-type: none"> • Making it easier to navigate health, social care, and community-based services • Ensuring we make the best use of our people and financial resources
The Pharmacy First Service has enabled community pharmacy to play a bigger role than ever within the urgent care system. It has given pharmacists the opportunity to use their clinical skills and knowledge to help patients manage minor conditions. The public are encouraged to visit the pharmacy as their 'first port of call' with minor ailments and conditions. This service, together with the range of over-the-counter products and advice available in all pharmacies, contributes to improving patient self-care and management, as well as supporting the reduction of attendances at emergency departments and GP surgeries.	<p>(All priorities)</p> <ul style="list-style-type: none"> • Addressing climate change • Reducing inequalities • Improving public mental health and wellbeing • Promoting wellbeing and self-care • Prevention and early detection • Anticipating the future needs of our population • Keeping people safe • Making it easier to navigate health, social care, and community-based services • Integrating our health and care services • Ensuring we make the best use of our people and financial resources
Supporting climate change and sustainability through encouraging self-care and healthy living, repeat prescription ordering processes to reduce waste, support proper disposal of unwanted medicines, and promotion and support for lower carbon options (e.g. supporting patients to use dry powder inhalers and to return metered dose inhalers for environmentally safe destruction). Medicines and the associated supply chain contribute around 25% of the overall NHS carbon footprint, and community pharmacies are in a unique position to support patients to take their medicines as intended, while avoiding over-ordering and stockpiling.	<ul style="list-style-type: none"> • Addressing climate change • Reducing inequalities • Improving public mental health and wellbeing • Promoting wellbeing and self-care • Prevention and early detection • Anticipating the future needs of our population • Keeping people safe • Ensuring we make the best use of our people and financial resources
Helping people to navigate the system by signposting to services not offered by the pharmacy.	<ul style="list-style-type: none"> • Reducing inequalities • Improving public mental health and wellbeing • Promoting wellbeing and self-care • Prevention and early detection • Keeping people safe

	<ul style="list-style-type: none"> • Making it easier to navigate health, social care, and community-based services • Integrating our health and care services • Ensuring we make the best use of our people and financial resources
<p>The Discharge Medicine Service is an essential pharmacy service. NHS Trusts can refer patients who would benefit from extra guidance around prescribed medicines for provision of the discharge medicine service to their community 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.</p>	<ul style="list-style-type: none"> • Reducing inequalities • Improving public mental health and wellbeing • Promoting wellbeing and self-care • Prevention and early detection • Anticipating the future needs of our population • Keeping people safe • Integrating our health and care services • Ensuring we make the best use of our people and financial resources
<p>Research has shown that the New Medicines Service demonstrates increased patient medicine adherence compared with normal practice, translating into increased health gain at reduced overall cost (NHS England). Through the New Medicine Service, community pharmacists provide support to patients and carers, helping them manage newly prescribed medicines for a long-term condition, and supporting shared decisions about their care. This service also provides an opportunity to promote healthy lifestyle changes, reduce medicine waste, or other non-pharmacological interventions to enhance wellbeing in people with long term conditions.</p>	<ul style="list-style-type: none"> • Addressing climate change • Reducing inequalities • Improving public mental health and wellbeing • Promoting wellbeing and self-care • Prevention and early detection • Anticipating the future needs of our population • Keeping people safe • Ensuring we make the best use of our people and financial resources
<p>Immunisation is one of the most successful and cost-effective health protection interventions and is a cornerstone of public health. Pharmacies provide the influenza vaccination programme and the COVID-19 and RSV vaccines are available at selected pharmacies. High immunisation rates are key to protecting the population's health, preventing the spread of infectious disease, complications and possible early death among individuals.</p>	<ul style="list-style-type: none"> • Reducing inequalities • Improving public mental health and wellbeing • Promoting wellbeing and self-care • Prevention and early detection • Anticipating the future needs of our population • Keeping people safe

	<ul style="list-style-type: none"> • Ensuring we make the best use of our people and financial resources
<p>Hypertension or high blood pressure, is a key risk factor for cardiovascular disease (CVD), which includes coronary heart disease, heart failure, stroke, and vascular dementia and kidney disease. CVD is also a key driver of health inequalities accounting for around 25% of the life expectancy gap between the rich and poor populations in England. Residents of the most deprived areas in England are 30% more likely to have high blood pressure compared to those in the least deprived areas. The Hypertension case finding service offered in pharmacies increases the detection of undiagnosed hypertension within the local population and positively impacts health inequalities by targeting people who do not routinely access their GP or use other NHS services.</p>	<ul style="list-style-type: none"> • Reducing inequalities • Improving public mental health and wellbeing • Promoting wellbeing and self-care • Prevention and early detection • Anticipating the future needs of our population • Keeping people safe • Ensuring we make the best use of our people and financial resources

10. Conclusions

10.1 Health, pharmaceutical needs and strategic drivers

Population estimates have demonstrated there is a greater proportion of older people in Cheshire West and Chester than in England. Because older people generally take more medicines than a younger population, community pharmacies will experience a greater workload in terms of dispensing and support for self-care. Furthermore, this workload is expected to increase as population forecasts suggest that the proportion of people aged 65 and over is expected to rise by 22% by 2033 to an estimated 96,000.

The largest housing developments for the lifetime of this 2025-2028 PNA will be in Ellesmere Port and Northwich. It is anticipated that capacity within existing services should be able to support the overall pharmaceutical needs of future populations and pharmacies in these community partnerships have sufficient opening times and availability of services.

Overall health status within Cheshire West and Chester is generally good with residents expected to spend a higher proportion of their lives in good health than the England average. The most common chronic conditions are hypertension, asthma and obesity. Hypertension and obesity are risk factors for disease including heart attack, stroke, kidney disease and dementia. CW&C has a higher prevalence of patients with a long-term condition or disease than the England average including cancer, coronary heart disease, stroke, heart failure, atrial fibrillation, COPD, hypertension, rheumatoid arthritis and osteoporosis.

The mortality rates in the under 75s is statistically similar to the England averages for overall premature mortality, cancers, circulatory disease, respiratory disease and liver disease. However, under 75 deaths have been increasing including for respiratory disease, cancer, and cardiovascular disease. Premature mortality rates for men are significantly higher than rates for women.

CW&C residents have similar lifestyle issues as in the rest of the country. The greatest issue is overweight and obesity which has steadily been increasing and is significantly higher than the England average. Obesity is a risk factor for CW&C's most common condition, hypertension, which is itself a risk factor for cancer, cardiovascular disease and circulatory disease. Community pharmacies have a key role in helping to tackle these.

Obesity, chronic conditions, and premature mortality are higher for residents residing in the most deprived areas of the borough and these areas in particular dictate a need for the full range of pharmaceutical services.

The priorities for Cheshire West Place Plan have been set out on page 95. Pharmaceutical services play a key role in achieving these priorities, offering easy access and a less formal environment to tackle ill health, foster self-care and healthy lifestyle, support sustainability, and reduce health inequalities.

There are differences in the population demography, together with discrete areas of deprivation and rural living which will all require their own emphasis on pharmaceutical need.

10.2 Meeting the pharmaceutical need in CW&C

The previous sections have demonstrated overall access in terms of location and access to services continues to be adequate to meet the needs of the population of CW&C. CW&C has a higher pharmacy-to-population ratio than the England average.

High population density areas in CW&C have pharmacy provision within a one-mile distance radius. All residents are within a 15-minute drive to a pharmacy, even in rush hour. There is good access via public transport with over 90% of residents within a 30-minute commute. Access is more limited for walking to a pharmacy - 84% of residents are within a 20-minute walk. The majority of those that are not live in rural areas. Residents who reside in the most deprived neighbourhoods are within a 15-minute walk or commute to a pharmacy.

Opening hours are considered sufficient but commissioners of community pharmacy are encouraged to use the findings of this most recent PNA to encourage flexibility around opening hours of existing pharmaceutical providers, and if further amendments to evening and weekend opening take place, review the impact with consideration of extending opening hours as a locally commissioned enhanced service (at which there will be a remuneration to the pharmacy). The need for 'emergency prescriptions' will almost always be centred on patients using out of hours services. CW&C is currently covered by GP Out of Hours (via NHS 111) and the Urgent Care Centre at the Countess of Chester Hospital.

We are mindful of recent pharmacy closures that have taken place both nationally and locally since the 2022-25 PNA was published which are detailed in the data through this PNA. For CW&C, this includes eight community pharmacy closures across the borough. Other changes include an increase in average dispensing volume, and new housing developments focussed in Chester. It must be acknowledged that pharmacies are under pressure, and further closures will need consideration, particularly in some areas of the borough where the pharmacy-to-population level is lower.

Residents' pharmaceutical needs are also supported by the five dispensing doctors in the borough located in Rural areas, and cross-border pharmacies.

In general, a broad range of advanced and locally commissioned services are provided in addition to essential services. The Pharmacy First service has particularly unlocked the potential of community pharmacy to be a major player in primary care, utilising the expertise of pharmacists in a formal and structured way. Given that hypertension is the number one chronic illness in CW&C and cardiovascular disease is the second biggest killer, the Hypertension Case-Finding Service could help to tackle these issues, especially in the most deprived areas where these conditions are most prevalent. Healthy Living Pharmacy is also in place alongside this service, encouraging people to adopt a healthy lifestyle and therefore reducing the number of people who are at risk of hypertension in the first place.

There is good coverage of all advanced services across the borough and community partnerships. This excludes Appliance Use Reviews (AUR) and Stoma appliance customisation (SAC) services which are both specialist services. Appliances can be accessed from contractors located in Cheshire and Merseyside. This supports both patient confidentiality and delivery of large items. There is at least one pharmacy in each community partnership providing the COVID-19 vaccination service for

eligible populations. This is in addition to other COVID-19 vaccination services such as the Living Well Bus.

The PNA has demonstrated potential service need and improved access to the pharmacy supervised consumption and needle exchange services, which will be reviewed by commissioners. A review of the population need and access to the community pharmacy sharps return service has also been identified as a future service improvement area for residents within Ellesmere Port, Neston and Willaston, Northwich and some areas of Rural Community Partnerships. Cheshire and Merseyside ICB are also reviewing options to harmonise and improve equity of access to the urgent palliative care medicines services across all areas which will support access for residents within Chester East, Helsby and Frodsham, and Rural community partnerships.

Traditionally the main functioning of pharmacies was the dispensing of medicines, and this is still a central function but it is clear that pharmacies are a rich resource with a highly skilled workforce who more than ever are contributing to the health and wellbeing of their local population through a range of services. Residents continue to utilise their pharmacy as a first port of call and it is essential that community pharmacies are protected and continued to be at the forefront of health and wellbeing. The public survey highlighted how much residents value having a pharmacy nearby but also highlighted the demands that pharmacies are facing with increasing demand and financial pressure. There are rising levels of pharmacy closures, medicine shortages, and respondents reporting long waiting times for prescriptions to be ready for collection and wait times in the pharmacies.

In conclusion, there is no current need for new pharmacies in CW&C for the lifespan of this PNA but it must be acknowledged that pharmacies are under pressure and further closures will need consideration, particularly in some areas of the borough where the pharmacy-to-population level is lower.

10.3 Required statements from pharmaceutical regulations

The National Health Service (NHS) Pharmaceutical and Local Pharmaceutical Services Regulations (2013) set out the legislative basis for developing and updating PNA. Of these regulations it sets out the minimum information to be contained in the PNA. Detailed below are the six statements included in schedule 1 and the necessity for a local PNA map of service providers.

10.3.1 Statement One: Necessary services: Current provision

Provide a statement of the pharmaceutical services that the Health and Wellbeing Board (HWB) has identified as services that are provided:

- a) in the area of the HWB and which are necessary to meet the need for pharmaceutical services in its area; and
- b) outside the area of the HWB but which nevertheless contribute towards meeting the need for pharmaceutical services in its area (if the HWB has identified such services).

This PNA has shown that the 68 community pharmacies in CW&C provide adequate coverage of services in terms of geographical location, accessibility through walk and drive times and convenient opening times throughout the week and at weekends. This coverage is supplemented by suitably

commissioned rotas, dispensing doctors, distance-selling pharmacies, and pharmacies in neighbouring LA's. All pharmacies provide essential services with a range of advanced, enhanced and commissioned services, which are considered necessary and collectively provide sufficient cover across CW&C. These services are thought adequate, taking into account such factors as the local demography and deprivation patterns.

CW&C has a larger number of pharmacies in relation to the size of its population (18.9 per 100,000) when compared to England average (18.4 per 100,000). However, CW&Cs average number of prescription items per month per 1,000 population is higher than the England average.

CW&C residents will also access dispensing doctors of which there are five in the borough, and pharmacy services in the neighbouring boroughs Cheshire East, Wirral, Warrington, Halton and Shropshire, as well as North Wales. Services are considered sufficient for the population's needs.

10.3.2 Statement two: Necessary services: Gaps in provision

Provide a statement of the pharmaceutical services that the HWB has identified (if it has) as services that are not provided in the area of the HWB but which the HWB is satisfied:

- a) need to be provided (whether or not they are located in the area of the HWB) in order to meet a current need for pharmaceutical services, or pharmaceutical services of a specified type, in its area.
- b) will, in specified future circumstances, need to be provided (whether or not they are located in the area of the HWB) in order to meet a future need for pharmaceutical services, or pharmaceutical services of a specified type, in its area.

Current provision across CW&C as a whole is adequate. No gaps in the provision of essential pharmaceutical services have been identified in this PNA. There are on-going housing developments planned over the lifetime of this PNA, predominantly in Northwich and Ellesmere Port which have higher and similar pharmacy-to-population ratios to the CW&C average, respectively.

Some geographical differences in provision have been highlighted through this PNA. In keeping with the national picture, services are predominantly situated in more densely populated areas of the borough where opening hours after 6pm are more available, as is weekend opening. The lowest rates of pharmacy-to-population ratios are seen in Chester East and Winsford community partnerships. Neston and Willaston and Chester South community partnerships have no pharmacies open after 6pm and do not have a pharmacy open on a Sunday. Helsby and Frodsham also does not have a pharmacy open on a Sunday and Rural community partnership has one open for just one hour. However, coverage across CW&C is sufficient with residents in these community partnerships able to access pharmacies within a reasonable distance in bordering community partnerships and neighbouring LAs. The need for 'emergency prescriptions' will almost always be centred on patients using out of hours services. CW&C is currently covered by GP Out of Hours (via NHS 111) and the Urgent Care Centre at the Countess of Chester Hospital.

Respondents to the public survey commonly commented that it is not always easy to access pharmacy services in the evening, i.e. after 6pm, and weekends. ICB commissioning can direct existing pharmacies to open for additional hours such as extending existing opening hours as a locally commissioned Enhanced Service if required.

Community Pharmacy England⁴¹ notes that:

“if the needs of people in the area are not met, and no pharmacies are able or willing to participate in an out of hours Enhanced service, an ICB has the power to issue a direction requiring the pharmacy to open, but must if doing so ensure the pharmacy receives reasonable remuneration. The process of issuing such a direction begins with discussions with the Local Pharmaceutical Committee (LPC) and the affected pharmacies must be contacted by the ICB and the proposals outlined so that the pharmacy owner can make representations. There are rights of appeal against ICBs decisions to issue such directions, and the direction would be valid only if the statutory procedure is followed.”

10.3.3 Statement three: Other relevant services: Current provision

Provide a statement of the pharmaceutical services that the HWB has identified (if it has) as services that are provided:

- a) in the area of the HWB and which, although they are not necessary to meet the need for pharmaceutical services in its area, nevertheless have secured improvements, or better access to pharmaceutical services in its area.
- b) outside the area of the HWB and which, although they do not contribute towards meeting the need for pharmaceutical services in its area, nevertheless have secured improvements, or better access, to pharmaceutical services in its area.
- c) in or outside the area of the HWB and, whilst not being services of the types described in subparagraph (A) or (B), or paragraph one, of the 2013 regulations, they nevertheless affect the assessment by the HWB of the need for pharmaceutical services in its area.

CW&C has five dispensing doctors in rural areas who can dispense medicines to their patients. These doctors support the large amount of non-pharmacy dispensing in CW&C. There are strict regulations which stipulate when and to whom doctors can dispense.

CW&C has geographical borders with North Wales, Cheshire East, Shropshire, Warrington, Wirral and Halton. Members of the CW&C population will cross these borders for leisure and work purposes and also access pharmacy services if it is more convenient for them, and not necessarily due to there being sufficient service in CW&C.

The bank holiday rota coordinates services across boundaries to ensure geographical coverage.

In addition to essential services, there is adequate access to the full range of advanced and enhanced services, and locally commissioned public health and sub-integrated care board services to meet local need.

10.3.4 Statement Four: Improvements and better access: Gaps in provision

Provide a statement of the pharmaceutical services that the HWB has identified (if it has) as services that are not provided in the area of the HWB but which the HWB is satisfied:

- a) would, if they were provided (whether or not they were located in the area of the HWB), secure improvements, or better access to pharmaceutical services, or pharmaceutical services of a specific type, in its area.

b) would, if in specified future circumstances they were provided (whether or not they were located in the area of the HWB), secure future improvements, or better access, to pharmaceutical services, or pharmaceutical services of a specified type, in its area.

Based on the information available at the time of developing this PNA, no gaps have been identified in essential, advanced or enhanced services that if provided either now or in the future would secure improvements, or better access, to pharmaceutical services. A review of service need and access to commissioned substance misuse services (needle exchange and supervised consumption) and Sharps Return are being progressed. There is no provision for appliance use reviews (AUR) and stoma appliance customisation service in CW&C. This is provided in bordering localities and undertaken remotely to support patient confidentiality.

All residents are within a 15-minute drive to a pharmacy, and the majority a 30 minute commute on public transport or 20 minute walk.

The most common concerns in the public survey were medicine shortages, waiting times to collect a prescription, and waiting times in the pharmacies. Comments also highlighted that it is not always easy to access pharmacy services in the evening, i.e. after 6pm, and weekends. As well as changes to existing contractor hours, opportunities could also be explored around increasing the use of technology to support timely prescribing where practicable and safe to do so.

It is important that community pharmacy services can continue to support the changes that face the NHS as commissioning intentions change or evolve to reduce the pressures on other patient facing services such as GPs and Accident & Emergency. However, in the current financial climate there is limited capacity to deliver additional services within static or reducing budgets. There should also be recognition and understanding of the context related to a number of national, regional and local strategies and policies from which opportunities may arise in their delivery such as the NHS 10 year Plan and locally the Cheshire West Place Plan.

The skills and expertise of community pharmacists could be further utilised in the provision of locally commissioned services aimed at improving population health. Assessment of future plans for housing developments within CW&C has highlighted increasing populations in Northwich and Ellesmere Port. It is envisaged that capacity within existing services will be able to absorb the increased demand anticipated over the lifespan of this PNA. Any identified change in the situation may be addressed by the ICB commissioning or directing existing pharmacies to open for additional hours under an Enhanced Service without the need for a new community pharmacy.

10.3.5 Statement five: Other NHS services

Provide a statement of any NHS services provided or arranged by the CW&C HWB, NHS England, Cheshire & Merseyside Integrated Care Board (ICB), any NHS trusts or any NHS foundation trust to which the HWB has had regard in its assessment, which affect:

- a) the need for pharmaceutical services, or pharmaceutical services of a specified type, in its area or
- b) whether further provision of pharmaceutical services in its area would secure improvements, or better access to pharmaceutical services, or pharmaceutical services of a specific type in its area.

Based on the information available at the time of developing this PNA, no gaps in respect of securing improvements, or better access, to other NHS services either now or in specified future circumstances have been identified.

10.3.6 Statement Six: How the assessment was carried out

Provide an explanation of how the assessment has been carried out, in particular:

- a) how it has determined what are the localities in its area.
- b) how it has taken into account (where applicable)
 - the different needs of different localities in its area, and
 - the different needs of people in its area who share a protected characteristic and
- c) a report on the consultation that it has undertaken.

This assessment has been performed using health needs information obtained from Cheshire West and Chester's Joint Strategic Needs Assessment and Office for Health Improvement and Disparities (OHID) Public Health Profiles 2025, <https://fingertips.phe.org.uk>, Crown copyright 2025.

In addition, prescribing and dispensing data was provided by the Cheshire and Merseyside ICB. This was supplemented with results from a questionnaire on pharmacy services sent to all community pharmacy contractors in the county. All data were considered by the PNA working group which comprised representatives from the Local Pharmaceutical Committee, Local Medical Committee, Cheshire West and Chester Council's Public Health team, Cheshire West and Chester Council's Insight and Intelligence Team, HealthWatch, and Cheshire and Merseyside ICB under the direction of the Director of Public Health. Decisions were taken according to consensus and the main drafts were scrutinised by the Health and Wellbeing Board.

This PNA has described the pharmaceutical needs and service delivery in terms of the Cheshire West and Chester community partnerships where possible. These were chosen because of the wealth of intelligence available and it being a shared geography by the LA and ICB. It was also considered sensible to use the same boundaries which the Council and ICB use for their planning and development. The differences in CW&C regarding health status, age-sex breakdown and deprivation scores together with other information on protected characteristics from the Equality Act 2010 were highlighted to tease out the implications for pharmaceutical need. The Pharmacy Contractor survey specifically asked if the respondents were aware of any issues related to protected characteristics.

10.3.7 Map of provision

A map that identifies the premises at which pharmaceutical services are provided in the area of the HWB.

A map of pharmacies can be seen on page 23, and a list of the 68 pharmacy premises by community partnership is given in appendix two table A2-1

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12. Appendix 1: Glossary

Abbreviation	Meaning
A&E	Accident and Emergency
ABPM	Ambulatory blood pressure monitoring
AUR	Appliance Use Review
BAME	Black, Asian, or other minority ethnic group
BMI	Body mass index
C&M	Cheshire and Merseyside
CIC	Community Interest Company
COPD	Chronic obstructive pulmonary disease
CPCF	Community Pharmacy Contractual Framework
CPCS	Community Pharmacist Consultation Service
CSU	Commissioning Support Unit
CVD	Cardiovascular disease
CW&C	Cheshire West and Chester
CWP	Cheshire and Wirral Partnership NHS Foundation Trust
DMS	Discharge Medicines Service
DoC	Declaration of confidence
EHC	Emergency Hormonal Contraception
GP	General Practitioner
HIV	Human Immunodeficiency Virus
HLP	Healthy Living Pharmacy
HWB	Health and Wellbeing Board
ICB	Integrated Care Board
ICS	Integrated Care System
IMD	Index of Multiple Deprivation
IUD	Intrauterine device
IUS	Intra-urine system
JSNA	Joint Strategic Needs Assessment
LA	Local Authority
LAPHT	Local authority public health team
LARC	Long-acting reversible contraception
LD	Learning disability
LFD	Lateral Flow Device
LGB	Lesbian, gay, bisexual
LGBT+	Lesbian, gay, bisexual, transgender, and other non-heterosexual and/or non cis gender identities
LMC	Local Medical Committee
LPC	Local Pharmaceutical Committee
LPN	Local Professional Network
LPS	Local pharmaceutical services

MDS	Monitored Dosage System
MSK	Musculoskeletal condition
NHS	National Health Service
NHS BSA	NHS Business Services Authority
NHSE	NHS England
NHSI	NHS Improvement
NICE	National Institute for Health and Care Excellence
NMS	New Medicine Service
OHID	Office for Health Improvement and Disparities
ONS	Office for National Statistics
PCN	Primary Care Network
PCT	Primary Care Trusts
PHOF	Public Health Outcomes Framework
PNA	Pharmaceutical Needs Assessment
POCT	Point of care testing
PQS	Pharmacy Quality Scheme
PSNC	Pharmaceutical Services Negotiating Committee
QOF	Quality and Outcomes Framework
SAC	Stoma appliance customisation
SEN	Special educational needs
SMI	Severe mental illness
STI	Sexually transmitted infection
Trans	Transgender
WHO	World Health Organisation

13. Appendix 2: Community pharmacies and dispensing doctors in Cheshire West and Chester

The following tables were correct at January 2025. However, for the most up-to-date information on pharmacies in your location, the reader is advised to consult the NHS choices website.

<https://www.nhs.uk/Service-Search/Pharmacy/LocationSearch/10>

Table A2-1 Community pharmacies by community partnership

Care community	Code	Pharmacy name	Postcode
Chester Central	FCC37	Boots Pharmacy	CH2 3BD
Chester Central	FFY48	Boughton Pharmacy	CH2 3DP
Chester Central	FJX71	Well Pharmacy	CH1 4DS
Chester Central	FPP41	Swettenhams Chemists	CH2 2LJ
Chester Central	FT378	Boots Pharmacy	CH1 1NA
Chester Central	FXP75	Tesco Pharmacy	CH1 3JS
Chester Central	FY420	Superdrug Pharmacy	CH1 2HA
Chester East	FAJ98	Vicars Cross Pharmacy	CH3 5LB
Chester East	FTT01	Well Upton-By-Chester	CH2 1HD
Chester East	FVP67	Heath Lane Pharmacy	CH3 5ST
Chester East	FWN30	Morrisons Pharmacy	CH2 1BT
Chester East	FX021	The Village Pharmacy	CH3 7NX
Chester South	FFF88	Garrett Pharmacy	CH1 5PN
Chester South	FFP49	Saughall Pharmacy Limited	CH1 6EP
Chester South	FK874	Swettenham Chemists	CH1 5HN
Chester South	FLL40	Westminster Park Pharmacy	CH4 7QD
Chester South	FLM30	Owen's Chemist	CH4 8BJ
Chester South	FX525	Boots	CH1 4QG
Chester South	FY785	Handbridge Pharmacy	CH4 7JE
Ellesmere Port	FC728	Ellesmere Pharmacy	CH65 0AW
Ellesmere Port	FNJ85	Great Sutton Pharmacy	CH66 3PB
Ellesmere Port	FE729	Well Ellesmere Port	CH65 7AN
Ellesmere Port	FNQ71	Hope Farm Pharmacy	CH66 2WW
Ellesmere Port	FGJ24	Boots Pharmacy	CH65 9HD
Ellesmere Port	FJ138	Lloyds Pharmacy	CH65 6TG
Ellesmere Port	FJR60	Sutton Pharmacy	CH66 3RF
Ellesmere Port	FLF82	Little Sutton Pharmacy	CH66 3RQ
Ellesmere Port	FLV02	Asda Pharmacy	CH65 0BZ
Ellesmere Port	FN526	Well Ellesmere Port	CH66 1JN
Ellesmere Port	FPD14	Well Pharmacy	CH65 2ER
Ellesmere Port	FAQ36	Harrison Healthcare	CH65 0DB
Helsby & Frodsham	FH107	Fearns Pharmacy	WA6 0DP
Helsby & Frodsham	FJ085	Boots Pharmacy	WA6 6RX
Helsby & Frodsham	FT868	Boots Pharmacy	WA6 7DN
Helsby & Frodsham	FVW35	Frodsham Pharmacy	WA6 6SJ
Helsby & Frodsham	FVW60	Holland Pharmacy	WA6 8EF
Neston & Willaston	FCT37	Willaston Pharmacy	CH64 2TL
Neston & Willaston	FL138	Deeside Pharmacy	CH64 4BN
Neston & Willaston	FLF70	Boots Pharmacy	CH64 9TZ

Neston & Willaston	FPN41	Galen Pharmacy	CH64 3RA
Northwich	FVQ95	Weaverham Pharmacy	CW8 3EU
Northwich	FD765	Hartford Pharmacy	CW8 1QL
Northwich	FPC77	Rudheath Pharmacy	CW9 7DA
Northwich	FG268	Well Pharmacy	CW9 5HN
Northwich	FJ922	Rowlands Pharmacy	CW8 2NT
Northwich	FKF96	Tesco Pharmacy	CW9 5LY
Northwich	FLN85	Eastfield Pharmacy	CW9 7QB
Northwich	FQD81	Barnton Pharmacy	CW8 4EY
Northwich	FRW59	Danebridge Pharmacy	CW9 5HQ
Northwich	FVG71	Well Pharmacy	CW8 4LF
Northwich	FVL43	Boots Pharmacy	CW9 5DH
Northwich	FX561	Well Pharmacy	CW9 8UW
Northwich	FXR69	Hoggs Chemist	CW8 4AZ
Northwich	FXV57	Leftwich Pharmacy	CW9 8BQ
Northwich	FY463	Well Pharmacy	CW9 5QY
Northwich	FYQ20	Well Pharmacy	CW9 8NE
Rural	FA875	Well Tattenhall	CH3 9PX
Rural	FAX82	Holmes Pharmacy	CW6 0RZ
Rural	FC441	Elton Pharmacy	CH2 4LU
Rural	FCX15	Ian Littler Pharmacy	CH3 8EE
Rural	FF812	Well Malpas	SY14 8NU
Rural	FHP16	Rowlands Pharmacy	CW6 0AB
Rural	FM057	Farndon Pharmacy	CH3 6PT
Winsford	FE685	Boots Pharmacy	CW7 1BA
Winsford	FJA52	Well Wharton	CW7 3GY
Winsford	FK364	Asda Pharmacy	CW7 1BD
Winsford	FP677	Ponda's Chemists	CW7 1QS
Winsford	FQJ12	Ponda's Chemists	CW7 1BA
Winsford	FQN76	Well Pharmacy	CW7 1AT

Table A2-2 Community pharmacies opening hours correct at 28 July 2025

Pharmacy	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Chester Central community partnership							
Boughton Pharmacy Hoole Lane Chester CH2 3DP 01244 316358	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	CLOSED	CLOSED
Well Pharmacy Fountains Health Delamere Street Chester CH1 4DS 01244 398685	08:00-18:30	08:00-18:30	08:00-18:30	08:00-18:30	08:00-18:30	08:00-21:00	10:00-21:00
Swettenhams Chemists 95 Kingsway Chester CH2 2LJ 01244 327023	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	CLOSED
Boots Pharmacy 47-55 Foregate Street Chester CH1 1NA 01244 328421	08:30-18:00	08:30-18:00	08:30-18:00	08:30-19:00	08:30-18:00	08:30-18:30	11:00-17:00
Tesco Pharmacy 40-42 Frodsham Street Chester CH1 3JS 01244 702027	08:00-19:00	08:00-19:00	08:00-19:00	08:00-19:00	08:00-19:00	08:00-19:00	11:00-17:00
Superdrug Pharmacy 32-34 Northgate Street Chester CH1 2HA 01244 325488	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	09:00-13:00, 13:30-17:30	CLOSED
Chester East community partnership							
Vicars Cross Pharmacy 58 Green Lane Vicars Cross Chester CH3 5LB 01244 341412	09:00-13:00, 14:15-18:00	09:00-13:00, 14:15-18:00	09:00-13:00, 14:15-18:00	09:00-13:00, 14:15-18:00	09:00-13:00, 14:15-18:00	09:00-13:00	CLOSED
Well Upton Upton Village Surgery Wealstone Lane Upton Chester CH2 1HD 01244 390379	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	CLOSED	CLOSED
Heath Lane Pharmacy Health Lane Chester CH3 5ST 01244 321269	08:45-18:00	08:45-18:00	08:45-18:00	08:45-18:00	08:45-18:00	CLOSED	CLOSED
Morrisons Pharmacy Mill Lane Upton Bache CH2 1BT 01244 381215	08:00-20:00	08:00-20:00	08:00-20:00	08:00-20:00	08:00-20:00	08:00-20:00	11:00-17:00
The Village Pharmacy 12 The Parade	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

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Guy Lane Waverton Chester CH3 7NX 01244 336677							
Chester South community partnership							
Garrett Pharmacy 3-4 Carlton Shopping Centre Western Avenue Blacon Chester CH1 5PN 01244 390818	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	09:00-17:30	CLOSED	CLOSED
Evermore Pharmacy Plainsfield Church Road Saughall Chester CH1 6EP 01244 881765	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
Swettenham Chemists 4 The Parade Blacon Chester CH1 5HN 01244 390047	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
Westminster Park Pharmacy 7 Castle Croft Road Chester CH4 7QD 01244 677000	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
Owen's Chemist 20A Chester Street Saltney Chester CH4 8BJ 01244 680410	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	CLOSED	CLOSED
Boots Unit 1B Greyhound Retail Park Chester CH1 4QG 01244 370857	09:00-17:00	09:00-17:00	09:00-17:00	09:00-17:00	09:00-17:00	09:00-17:00	CLOSED
Handbridge Pharmacy 9 Handbridge Chester CH4 7JE 01244 683454	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
Ellesmere Port community partnership							
Ellesmere Pharmacy 7b Rivington Road Ellesmere Port CH65 0AW 0151 3554487	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	08:30-18:00	09:00-17:30	CLOSED
Great Sutton Pharmacy 66-68 Old Chester Road Great Sutton Ellesmere Port CH66 3PB 0151 3392577	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	09:00-17:00	CLOSED

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Well Ellesmere Port 54-56 Loxdale Drive Great Sutton Ellesmere Port CH65 7AN 0151 3554004	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
Hope Farm Pharmacy Hope Farm Medical Centre Hope Farm Road Great Sutton CH66 2WW 0151 3565035	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	CLOSED
Boots Pharmacy Cheshire Oaks Outlet Village 31 Coliseum Way Ellesmere port CH65 9HD 0151 3564055	09:00-20:00	09:00-20:00	09:00-20:00	09:00-20:00	09:00-20:00	09:00-17:00	11:00-16:00
Lloyds Pharmacy 114 Chester Road Whitby Ellesmere Port CH65 6TG 0151 3552876	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	09:00-13:00	CLOSED
Sutton Pharmacy 335 Chester Road Little Sutton Ellesmere Port CH66 3RF 0151 3393123	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
Little Sutton Pharmacy 381 Chester Road Little Sutton Ellesmere Port CH66 3RQ 0151 3393382	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
Asda Pharmacy Grange Road Ellesmere Port CH65 0BZ 0151 3486110	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	10:30-16:30
Well Ellesmere Port 20a Overpool Road Ellesmere Port CH66 1JN 0151 3560617	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
Well Pharmacy 10 Church Parade Ellesmere Port CH65 2ER 0151 3568505	08:30-17:30	08:30-17:30	08:30-17:30	08:30-17:30	08:30-17:30	09:00-13:00	CLOSED
Harrison Healthcare 2 York Road Ellesmere Port CH65 0DB 0151 3553081	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	09:00-12:40, 13:00-17:30	09:00-13:00	CLOSED
Helsby and Frodsham community partnership							
Fearns Pharmacy Britannia Gardens Helsby	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-12:30	CLOSED

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Frodsham WA6 0DP 0128 722226							
Boots Pharmacy 2 Princeway Frodsham WA6 6RX 01928 733821	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	09:00-12:00	CLOSED
Boots Pharmacy 7 Church Street Frodsham WA6 7DN 01928 733236	08:45-17:45	08:45-17:45	08:45-17:45	08:45-17:45	08:45-17:45	09:00-17:00	CLOSED
Frodsham Pharmacy 59 Kingsley Road Frodsham WA6 6SJ 01928 620112	08:30-12:30, 13:00-17:00	08:30-12:30, 13:00-17:00	08:30-12:30, 13:00-17:00	08:30-12:30, 13:00-17:00	08:30-12:30, 13:00-17:00	CLOSED	CLOSED
Holland Pharmacy Hollow Lane Frodsham WA6 8EF 01928 788559	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
Neston and Willaston community partnership							
Well Willaston Neston Road Willaston CH64 2TL 0151 3275110	09:00-13:00, 13:30-18:00	09:00-13:00, 13:30-18:00	09:00-13:00, 13:30-18:00	09:00-13:00, 13:30-18:00	09:00-13:00, 13:30-18:00	09:00-13:00	CLOSED
Deeside Pharmacy Mellock Lane Little Neston Neston CH64 4BN 0151 3361837	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	09:00-13:00, 14:00-18:00	CLOSED	CLOSED
Boots Pharmacy 17 High Street Neston CH64 9TZ 0151 3361837	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
Galen Pharmacy 12 Liverpool Road Neston CH64 3RA 0151 3362650	09:00-18:00	09:00-18:00	08:30-18:00	09:00-18:00	08:45-18:00	09:00-17:00	CLOSED
Northwich community partnership							
Weaverham Pharmacy 7-9 Northwich Road Weaverham Northwich CW8 3EU 01606 853385	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	09:00-18:00	CLOSED	CLOSED
Hartford Pharmacy 299 Chester Road Northwich CW8 1QL 01606 74261	09:00-13:30, 13:50-17:30	09:00-13:30, 13:50-17:30	09:00-13:30, 13:50-17:30	09:00-13:30, 13:50-17:30	09:00-13:30, 13:50-17:30	09:00-13:30	CLOSED
Rudheath Pharmacy 66 Middlewich Road Rudheath Northwich CW9 7DA	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-13:00	CLOSED

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01606 535133							
Well Pharmacy Drillfield Road Northwich CW9 5HN 01606 43986	08:30-18:45	08:30-18:45	08:30-18:45	08:30-18:45	08:30-18:45	09:00-13:00	CLOSED
Rowlands Pharmacy 16 Fir Lane Sandiway Northwich CW8 2NT 01606 882449	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
Tesco Pharmacy Manchester Road Northwich CW9 5LY 0191 6934599	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
Eastfield Pharmacy 469 Manchester Road Lostock Gralam Northwich CW9 7QB 01606 45485	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
Barnton Pharmacy 76 Runcorn Road Barnton Northwich CW8 4EY 01606 74671	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
Danebridge Pharmacy 31 London Road Northwich CW9 5HQ 01606 42001	07:00-22:30	07:00-22:30	07:00-22:30	07:00-22:30	07:00-22:30	07:00-22:30	12:00-19:00
Well Pharmacy Broadway Lydyett Lane Barnton Northwich CW8 4LF 01606 783178	08:45-18:00	08:45-18:00	08:45-18:00	08:45-18:00	08:45-18:00	09:00-13:00	CLOSED
Boots Pharmacy 39-45 Witton Street Northwich CW9 5DH 01606 42187	09:30-17:30	09:30-17:30	09:30-17:30	09:30-17:30	09:30-17:30	09:00-16:00	CLOSED
Well Pharmacy 3A Kingsmead Regency Way Northwich CW9 8UW 01606 42663	08:30-18:45	08:30-18:45	08:30-18:45	08:30-18:45	08:30-18:45	09:00-13:00	CLOSED
Hoggs Chemist Firdale Medical Centre Firdale Road Northwich CW8 4AZ 01606 77485	08:30-12:30, 13:30-18:00	08:30-12:30, 13:30-18:00	08:30-12:30, 13:30-18:00	08:30-12:30, 13:30-18:00	08:30-12:30, 13:30-18:00	CLOSED	CLOSED
Leftwich Pharmacy 65 Clifton Drive Leftwich Northwich	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

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CW9 8BQ 01606 46467							
Well Pharmacy Unit 1 Cock o'Witton Witton Street Northwich CW9 5QY 01606 331552	08:30-17:30	08:30-17:30	08:30-17:00	08:30-17:30	08:30-17:30	08:30-13:00	CLOSED
Well Pharmacy 1-3 Church Street Davenham Northwich CW9 8NE 01606 49587	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
Rural community partnership							
Well Tattenhall High Street Tattenhall Chester CH3 9PX 01829 771294	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-18:30	09:00-13:00	CLOSED
Holmes Pharmacy Chester Road Kelsall Tarporley CW6 0RZ 01829 751354	09:00-13:00, 14:15-18:00	09:00-13:00, 14:15-18:00	09:00-13:00, 14:15-18:00	09:00-13:00, 14:15-18:00	09:00-13:00, 14:15-18:00	09:00-12:30	CLOSED
Elton Pharmacy The Shopping Centre 6 Ince Lane Elton Chester CH2 4LU 01928 725726	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
Ian Littler Pharmacy 28-30 High Street Tarvin Chester CH3 8EE 01829 741880	09:00-13:00, 14:15-18:30	09:00-13:00, 14:15-17:30	09:00-13:00, 14:15-17:30	09:00-13:00, 14:15-17:30	09:00-13:00, 14:15-18:30	09:00-13:00	CLOSED
Well Malpas 1 The Cross Malpas SY14 8NU 01948 860346	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
Rowlands Pharmacy 77 High Street Tarporley CW6 0AB 01829 733201	09:00-13:20, 13:40-17:30	09:00-13:20, 13:40-17:30	09:00-13:20, 13:40-17:30	09:00-13:20, 13:40-17:30	09:00-13:20, 13:40-17:30	09:00-12:00	CLOSED
Farndon Pharmacy High Street Farndon CH3 6PT 01829 270364	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
Winsford community partnership							
Boots Pharmacy 5-7 Dingle Lane Winsford CW7 1BA 01606 593661	09:30-17:30	09:30-17:30	09:30-17:30	09:30-17:30	09:30-17:30	09:00-17:30	10:00-16:00

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Well Wharton Crook Lane Wharton Winsford CW7 3GY 01606 593803	08:45-18:30	08:45-18:30	08:45-18:30	08:45-18:30	08:45-18:30	09:00-13:00	CLOSED
Asda Pharmacy The Drumber Winsford CW7 1BD 01606 596410	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
Ponda's Chemists 7 Cheviot Square Winsford CW7 1QS 01606 593312	09:00-12:30, 14:00-18:00	09:00-12:30, 14:00-18:00	09:00-12:30, 14:00-18:00	09:00-12:30, 14:00-18:00	09:00-12:30, 14:00-18:00	09:00-13:00	CLOSED
Ponda's Chemists 2 Dingle Walk Winsford CW7 1BA 01606 558321	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	CLOSED
Well Pharmacy 2a Dene Drive Winsford CW7 1AT 01625 525353	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	08:30-18:30	09:00-13:00	CLOSED

Source: NHSBSA, Consolidated Pharmaceutical List, 2024-25, Quarter 1

Table A2-3 Community pharmacies providing advanced and enhanced services. Correct at November 2024.

Pharmacy	Smoking cessation	Hypertension case finding service	Pharmacy First	Contraception service	Lateral flow	New medicines service	Flu vaccination	COVID-19 vaccination
Chester Central community partnership								
Boughton Pharmacy Hoole Lane Chester CH2 3DP 01244 316358	Yes	Yes	Yes	No	Yes	Yes	No	No
Well Pharmacy Fountains Health Delamere Street Chester CH1 4DS 01244 398685	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Swettenhams Chemists 95 Kingsway Chester CH2 2LJ 01244 327023	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Boots Pharmacy 47-55 Foregate Street Chester CH1 1NA 01244 328421	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Tesco Pharmacy 40-42 Frodsham Street Chester CH1 3JS 01244 702027	Yes	Yes	Yes	No	Yes	Yes	Yes	No
Superdrug Pharmacy 32-34 Northgate Street Chester CH1 2HA 01244 325488	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Chester East community partnership								
Vicars Cross Pharmacy 58 Green Lane Vicars Cross Chester CH3 5LB 01244 341412	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Well Upton Upton Village Surgery Wealstone Lane Upton Chester CH2 1HD 01244 390379	Yes	Yes	No	Yes	Yes	Yes	No	No
Heath Lane Pharmacy Health Lane Chester CH3 5ST 01244 321269	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes
Morrisons Pharmacy Mill Lane Upton Bache CH2 1BT 01244 381215	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No

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The Village Pharmacy 12 The Parade Guy Lane Waverton Chester CH3 7NX 01244 336677	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Chester South community partnership								
Garrett Pharmacy 3-4 Carlton Shopping Centre Western Avenue Blacon Chester CH1 5PN 01244 390818	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Evermore Pharmacy Plainsfield Church Road Saughall Chester CH1 6EP 01244 881765	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Swettenham Chemists 4 The Parade Blacon Chester CH1 5HN 01244 390047	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Westminster Park Pharmacy 7 Castle Croft Road Chester CH4 7QD 01244 677000	Yes	Yes	Yes	Yes	Yes	Yes	No	No
Owen's Chemist 20A Chester Street Saltney Chester CH4 8BJ 01244 680410	Yes	Yes	Yes	Yes	Yes	Yes	No	No
Boots Unit 1B Greyhound Retail Park Chester CH1 4QG 01244 370857	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Handbridge Pharmacy 9 Handbridge Chester CH4 7JE 01244 683454	No	No	Yes	No	Yes	Yes	Yes	No
Ellesmere Port community partnership								
Ellesmere Pharmacy 7b Rivington Road Ellesmere Port CH65 0AW 0151 3554487	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Great Sutton Pharmacy 66-68 Old Chester Road Great Sutton Ellesmere Port	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes

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CH66 3PB 0151 3392577								
Well Ellesmere Port 54-56 Loxdale Drive Great Sutton Ellesmere Port CH65 7AN 0151 3554004	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Hope Farm Pharmacy Hope Farm Medical Centre Hope Farm Road Great Sutton CH66 2WW 0151 3565035	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Boots Pharmacy Cheshire Oaks Outlet Village 31 Coliseum Way Ellesmere port CH65 9HD 0151 3564055	Yes	Yes	Yes	No	Yes	Yes	Yes	No
Lloyds Pharmacy 114 Chester Road Whitby Ellesmere Port CH65 6TG 0151 3552876	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Sutton Pharmacy 335 Chester Road Little Sutton Ellesmere Port CH66 3RF 0151 3393123	Yes	Yes	Yes	No	Yes	Yes	No	Yes
Little Sutton Pharmacy 381 Chester Road Little Sutton Ellesmere Port CH66 3RQ 0151 3393382	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Asda Pharmacy Grange Road Ellesmere Port CH65 0BZ 0151 3486110	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Well Ellesmere Port 20a Overpool Road Ellesmere Port CH66 1JN 0151 3560617	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Well Pharmacy 10 Church Parade Ellesmere Port CH65 2ER 0151 3568505	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Harrison Healthcare 2 York Road Ellesmere Port CH65 0DB 0151 3553081	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Helsby and Frodsham community partnership								
Fearns Pharmacy	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

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Britannia Gardens Helsby Frodsham WA6 0DP 0128 722226								
Boots Pharmacy 2 Princeway Frodsham WA6 6RX 01928 733821	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Boots Pharmacy 7 Church Street Frodsham WA6 7DN 01928 733236	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Frodsham Pharmacy 59 Kingsley Road Frodsham WA6 6SJ 01928 620112	Yes	Yes	Yes	Yes	Yes	Yes	No	No
Holland Pharmacy Hollow Lane Frodsham WA6 8EF 01928 788559	No	No	Yes	No	Yes	Yes	No	No
Neston and Willaston community partnership								
Well Willaston Neston Road Willaston CH64 2TL 0151 3275110	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes
Deeside Pharmacy Mellock Lane Little Neston Neston CH64 4BN 0151 3361837	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Boots Pharmacy 17 High Street Neston CH64 9TZ 0151 3361837	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Galen Pharmacy 12 Liverpool Road Neston CH64 3RA 0151 3362650	Yes	Yes	Yes	No	Yes	Yes	Yes	No
Northwich community partnership								
Weaverham Pharmacy 7-9 Northwich Road Weaverham Northwich CW8 3EU 01606 853385	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Hartford Pharmacy 299 Chester Road Northwich CW8 1QL 01606 74261	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Rudheath Pharmacy 66 Middlewich Road Rudheath	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

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Northwich CW9 7DA 01606 535133								
Well Pharmacy Drillfield Road Northwich CW9 5HN 01606 43986	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Rowlands Pharmacy 16 Fir Lane Sandiway Northwich CW8 2NT 01606 882449	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Tesco Pharmacy Manchester Road Northwich CW9 5LY 0191 6934599	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Eastfield Pharmacy 469 Manchester Road Lostock Gralam Northwich CW9 7QB 01606 45485	No	No	Yes	No	Yes	Yes	Yes	No
Barnton Pharmacy 76 Runcorn Road Barnton Northwich CW8 4EY 01606 74671	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Danebridge Pharmacy 31 London Road Northwich CW9 5HQ 01606 42001	Yes	Yes	Yes	No	Yes	Yes	Yes	No
Well Pharmacy Broadway Lydyett Lane Barnton Northwich CW8 4LF 01606 783178	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Boots Pharmacy 39-45 Witton Street Northwich CW9 5DH 01606 42187	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Well Pharmacy 3A Kingsmead Regency Way Northwich CW9 8UW 01606 42663	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Hoggs Chemist Firdale Medical Centre Firdale Road Northwich CW8 4AZ 01606 77485	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes
Leftwich Pharmacy 65 Clifton Drive	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

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Leftwich Northwich CW9 8BQ 01606 46467								
Well Pharmacy Unit 1 Cock o'Witton Witton Street Northwich CW9 5QY 01606 331552	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Well Pharmacy 1-3 Church Street Davenham Northwich CW9 8NE 01606 49587	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Rural community partnership								
Well Tattenhall High Street Tattenhall Chester CH3 9PX 01829 771294	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Holmes Pharmacy Chester Road Kelsall Tarporley CW6 0RZ 01829 751354	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Elton Pharmacy The Shopping Centre 6 Ince Lane Elton Chester CH2 4LU 01928 725726	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Ian Littler Pharmacy 28-30 High Street Tarvin Chester CH3 8EE 01829 741880	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Well Malpas 1 The Cross Malpas SY14 8NU 01948 860346	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Rowlands Pharmacy 77 High Street Tarporley CW6 0AB 01829 733201	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Farndon Pharmacy High Street Farndon CH3 6PT 01829 270364	Yes	Yes	Yes	No	Yes	Yes	Yes	No
Winsford community partnership								
Boots Pharmacy 5-7 Dingle Lane Winsford	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No

CW7 1BA 01606 593661								
Well Wharton Crook Lane Wharton Winsford CW7 3GY 01606 593803	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Asda Pharmacy The Drummer Winsford CW7 1BD 01606 596410	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Ponda's Chemists 7 Cheviot Square Winsford CW7 1QS 01606 593312	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No
Ponda's Chemists 2 Dingle Walk Winsford CW7 1BA 01606 558321	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes
Well Pharmacy 2a Dene Drive Winsford CW7 1AT 01625 525353	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No

Table A2-4 Community pharmacies providing commissioned services. Correct at 1 January 2025.

Pharmacy	Emergency Hormonal Contraception	Supervised consumption	Needle exchange	Sharps return	Urgent palliative care medicine
Chester central community partnership					
Boughton Pharmacy Hoole Lane Chester CH2 3DP 01244 316358	No	No	No	No	No
Well Pharmacy Fountains Health Delamere Street Chester CH1 4DS 01244 398685	Yes	Yes	No	No	Yes
Swettenhams Chemists 95 Kingsway Chester CH2 2LJ 01244 327023	No	Yes	No	No	No
Boots Pharmacy 47-55 Foregate Street Chester CH1 1NA 01244 328421	Yes	Yes	No	No	No
Tesco Pharmacy 40-42 Frodsham Street Chester	No	No	No	Yes	No

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CH1 3JS 01244 702027					
Superdrug Pharmacy 32-34 Northgate Street Chester CH1 2HA 01244 325488	Yes	No	No	No	No
Chester East community partnership					
Vicars Cross Pharmacy 58 Green Lane Vicars Cross Chester CH3 5LB 01244 341412	Yes	No	No	Yes	No
Well Upton Upton Village Surgery Wealstone Lane Upton Chester CH2 1HD 01244 390379	No	No	No	Yes	No
Heath Lane Pharmacy Health Lane Chester CH3 5ST 01244 321269	No	No	No	No	No
Morrisons Pharmacy Mill Lane Upton Bache CH2 1BT 01244 381215	Yes	No	No	No	No
The Village Pharmacy 12 The Parade Guy Lane Waverton Chester CH3 7NX 01244 336677	No	No	No	No	No
Chester South community partnership					
Garrett Pharmacy 3-4 Carlton Shopping Centre Western Avenue Blacon Chester CH1 5PN 01244 390818	No	Yes	No	Yes	No
Evermore Pharmacy Plainsfield Church Road Saughall Chester CH1 6EP 01244 881765	Yes	No	No	Yes	No
Swettenham Chemists 4 The Parade Blacon Chester CH1 5HN 01244 390047	Yes	Yes	Yes	No	No
Westminster Park Pharmacy 7 Castle Croft Road	No	No	No	No	No

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Chester CH4 7QD 01244 677000					
Owen's Chemist 20A Chester Street Saltney Chester CH4 8BJ 01244 680410	No	No	No	No	No
Boots Unit 1B Greyhound Retail Park Chester CH1 4QG 01244 370857	Yes	Yes	No	No	No
Handbridge Pharmacy 9 Handbridge Chester CH4 7JE 01244 683454	No	No	No	No	No
Ellesmere Port community partnership					
Ellesmere Pharmacy 7b Rivington Road Ellesmere Port CH65 0AW 0151 3554487	No	No	No	No	No
Great Sutton Pharmacy 66-68 Old Chester Road Great Sutton Ellesmere Port CH66 3PB 0151 3392577	No	No	No	No	No
Well Ellesmere Port 54-56 Loxdale Drive Great Sutton Ellesmere Port CH65 7AN 0151 3554004	Yes	No	No	No	No
Hope Farm Pharmacy Hope Farm Medical Centre Hope Farm Road Great Sutton CH66 2WW 0151 3565035	Yes	No	No	No	No
Boots Pharmacy Cheshire Oaks Outlet Village 31 Coliseum Way Ellesmere port CH65 9HD 0151 3564055	Yes	No	No	No	No
Lloyds Pharmacy 114 Chester Road Whitby Ellesmere Port CH65 6TG 0151 3552876	Yes	No	No	No	No
Sutton Pharmacy 335 Chester Road Little Sutton Ellesmere Port CH66 3RF 0151 3393123	No	No	No	No	No

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Little Sutton Pharmacy 381 Chester Road Little Sutton Ellesmere Port CH66 3RQ 0151 3393382	Yes	Yes	No	No	No
Asda Pharmacy Grange Road Ellesmere Port CH65 0BZ 0151 3486110	Yes	No	No	No	Yes
Well Ellesmere Port 20a Overpool Road Ellesmere Port CH66 1JN 0151 3560617	No	Yes	No	No	No
Well Pharmacy 10 Church Parade Ellesmere Port CH65 2ER 0151 3568505	Yes	Yes	No	No	No
Harrison Healthcare 2 York Road Ellesmere Port CH65 0DB 0151 3553081	Yes	Yes	Yes	No	No
Helsby and Frodsham community partnership					
Fearn's Pharmacy Britannia Gardens Helsby Frodsham WA6 0DP 0128 722226	Yes	No	No	No	No
Boots Pharmacy 2 Princeway Frodsham WA6 6RX 01928 733821	Yes	No	No	No	No
Boots Pharmacy 7 Church Street Frodsham WA6 7DN 01928 733236	Yes	No	No	No	No
Frodsham Pharmacy 59 Kingsley Road Frodsham WA6 6SJ 01928 620112	Yes	No	No	No	No
Holland Pharmacy Hollow Lane Frodsham WA6 8EF 01928 788559	No	No	No	Yes	No
Neston and Willaston community partnership					
Well Willaston Neston Road Willaston CH64 2TL 0151 3275110	No	No	No	No	No
Deeside Pharmacy Mellock Lane Little Neston	No	No	No	No	No

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Neston CH64 4BN 0151 3361837					
Boots Pharmacy 17 High Street Neston CH64 9TZ 0151 3361837	Yes	No	No	No	No
Galen Pharmacy 12 Liverpool Road Neston CH64 3RA 0151 3362650	No	Yes	No	No	Yes
Northwich community partnership					
Weaverham Pharmacy 7-9 Northwich Road Weaverham Northwich CW8 3EU 01606 853385	Yes	Yes	Yes	No	No
Hartford Pharmacy 299 Chester Road Northwich CW8 1QL 01606 74261	No	No	No	No	No
Rudheath Pharmacy 66 Middlewich Road Rudheath Northwich CW9 7DA 01606 535133	Yes	Yes	Yes	No	No
Well Pharmacy Drillfield Road Northwich CW9 5HN 01606 43986	Yes	No	No	No	Yes
Rowlands Pharmacy 16 Fir Lane Sandiway Northwich CW8 2NT 01606 882449	Yes	Yes	No	No	Yes
Tesco Pharmacy Manchester Road Northwich CW9 5LY 0191 6934599	Yes	No	No	No	No
Eastfield Pharmacy 469 Manchester Road Lostock Gralam Northwich CW9 7QB 01606 45485	No	No	No	No	No
Barnton Pharmacy 76 Runcorn Road Barnton Northwich CW8 4EY 01606 74671	Yes	No	No	No	No
Danebridge Pharmacy 31 London Road Northwich	No	Yes	No	No	No

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CW9 5HQ 01606 42001					
Well Pharmacy Broadway Lydyett Lane Barnton Northwich CW8 4LF 01606 783178	Yes	No	No	No	No
Boots Pharmacy 39-45 Witton Street Northwich CW9 5DH 01606 42187	Yes	No	No	No	Yes
Well Pharmacy 3A Kingsmead Regency Way Northwich CW9 8UW 01606 42663	Yes	No	No	No	No
Hoggs Chemist Firdale Medical Centre Firdale Road Northwich CW8 4AZ 01606 77485	No	No	No	No	No
Leftwich Pharmacy 65 Clifton Drive Leftwich Northwich CW9 8BQ 01606 46467	No	Yes	No	No	No
Well Pharmacy Unit 1 Cock o'Witton Witton Street Northwich CW9 5QY 01606 331552	No	No	No	No	No
Well Pharmacy 1-3 Church Street Davenham Northwich CW9 8NE 01606 49587	Yes	No	No	No	No
Rural community partnership					
Well Tattenhall High Street Tattenhall Chester CH3 9PX 01829 771294	Yes	No	No	No	No
Holmes Pharmacy Chester Road Kelsall Tarpoley CW6 0RZ 01829 751354	No	Yes	No	Yes	No
Elton Pharmacy The Shopping Centre 6 Ince Lane Elton	No	No	No	Yes	No

Cheshire West and Chester Pharmaceutical Needs Assessment 2025-2028

Chester CH2 4LU 01928 725726					
Ian Littler Pharmacy 28-30 High Street Tarvin Chester CH3 8EE 01829 741880	Yes	No	No	Yes	No
Well Malpas 1 The Cross Malpas SY14 8NU 01948 860346	No	No	No	No	No
Rowlands Pharmacy 77 High Street Tarpoley CW6 0AB 01829 733201	No	No	No	No	Yes
Farndon Pharmacy High Street Farndon CH3 6PT 01829 270364	No	No	No	No	No
Winsford community partnership					
Boots Pharmacy 5-7 Dingle Lane Winsford CW7 1BA 01606 593661	Yes	No	No	No	No
Well Wharton Crook Lane Wharton Winsford CW7 3GY 01606 593803	No	No	No	No	No
Asda Pharmacy The Drummer Winsford CW7 1BD 01606 596410	Yes	No	No	No	No
Ponda's Chemists 7 Cheviot Square Winsford CW7 1QS 01606 593312	No	No	No	No	Yes
Ponda's Chemists 2 Dingle Walk Winsford CW7 1BA 01606 558321	Yes	Yes	Yes	Yes	No
Well Pharmacy 2a Dene Drive Winsford CW7 1AT 01625 525353	Yes	No	No	Yes	Yes

Table A2-5 Dispensing doctors in Cheshire West and Chester borough. Correct at 1 January 2025

Practice name	Address	Telephone number
Laurel Bank Surgery	Old Hall Malpas SY14 8PS	01948 860205
Kelsall Medical Centre	7 Green Hill Road Kelsall Tarporley CW6 0SN	01829 751252
Princeway Health Centre	2 Princeway Frodsham WA6 6RX	01928 733249
The Village Surgery	Ravensholme Lane Tattenhall CH3 9RE	01829 771588
Tarporley Health Centre	Park Road Tarporley CW6 0BE	01829 733456

14. Appendix 3: Patient survey of community pharmacy, November 2024, Results

There were 590 responses to the survey from Cheshire West and Chester residents.

1. Why did you visit the pharmacy?

Reason	%	Count
To collect a prescription for yourself	80%	473
To collect a prescription for someone else	32%	190
To get advice from the pharmacist	24%	143
To buy other non-prescription medications	26%	152
To access a pharmacy service	11%	66
To return unused/expired medications	6%	35
Unable to get a GP appointment	4%	26
Referred by GP practice or other such as NHS111	3%	19
Other (please specify)	5%	29

Base: 590

For those who said 'other' please specify:

- Vaccination x 22 (Flu vaccination x 11, COVID-19 vaccination x 6, unspecified x 5)
- To trade in a sharps bin
- To drop off a prescription request
- Purchase gifts and cards

2. When did you last use a pharmacy?

Visited...	%	Count
In the last week	47%	275
In the last two weeks	26%	155
In the last month	19%	115
In the last three months	5%	31
In the last six months	1%	6
Longer than six months	1%	8

Base:590

3. How did you usually get to the pharmacy?

Transport method	%	Count
Car	60%	354
Walking	52%	309
Other (please specify)	2%	14
Public transport	4%	21
Bicycle	3%	16
Taxi	1%	4
Mobility transport	1%	6
Used online pharmacy	2%	11

Base:590

For those who said 'other' please specify:

- Somebody else goes for them x4
- Delivered x7
- Telephone advice x2
- Patient access to doctor for prescriptions

4. How long does the journey to your pharmacy usually take?

Transport method	%	Count
5 minutes or less	28%	164
6 to 10 minutes	41%	240
11 to 15 minutes	15%	88
16 to 20 minutes	8%	46
21 to 25 minutes	3%	20
26 to 30 minutes	2%	12
31 minutes or longer	1%	7
Not applicable (usually delivery)	2%	13

Base: 590

5. Thinking about the location of the pharmacy, which of the following are the most important to you?

What is most important for a pharmacy?	%	Count
It is close to my home	73%	432
It is easy to park nearby	34%	203
It is close to my doctor's surgery	30%	176
It is close to other shops I use	36%	214
It is close to/in my local supermarket	9%	55
Other (please specify)	7%	39
None of these	3%	17
It is near to the bus stop / train station	5%	29
It is close to where I work	3%	20
It is close to my children's school or nursery	2%	11

Base: 590

For those who said 'other' please specify:

- Good service is preferable to location x14
- There is no local pharmacy x7
- Deliver x5
- Efficient/ reliable x5
- Late opening/weekend x5
- Has medication available x3
- Cheap
- Medication dispensed in a blister pack
- Advice provided over the phone

- Familiar
- Use online pharmacy as better service

6. How easy is to get to your usual pharmacy?

Getting to the pharmacy	%	Count
Very easy	55%	322
Quite easy	23%	134
Neither easy or difficult	13%	74
Quite difficult	8%	48
Very difficult	2%	12

Base:590

7. If you answered quite or very difficult, please tell us why:

- Too far away/ long walk/ not walkable x24
- Local walkable pharmacy closed down x21
- Health condition or disability x12
- Parking issues / no parking x5
- Usually requires more than one visit (not got all prescription or too busy) x4
- Opening hours / coordinating with working hours is difficult x4
- No bus / no frequent bus x3
- Need to arrange a lift x2
- Carer x2
- Need to get a bus x2
- Traffic issues x2
- Take a long time to answer the phones
- Delivery systems of local pharmacies full
- Is out of the way not where usually go
- Difficult to get to in bad weather
- Do not always have access to a car
- Prefer not to drive

8. Do you have a disability, a health condition and/or other access needs that could affect how easily you access your chosen pharmacy?

Do you have a disability, a health condition and/or other access needs that could affect how easily you access your chosen pharmacy?	%	Count
Yes	21%	124
No	77%	457
Don't know	2%	9

Base:590

9. If you have a disability, a health condition and/or other access needs, can you access your chosen pharmacy?

If you have a disability, a health condition and/or other access needs, can you access your chosen pharmacy?	%	Count
Yes	86%	114
No	10%	13
Don't know	5%	6

Base: 133

10. If you have mobility issues, are you able to park your vehicle close enough to your pharmacy?

If you have mobility issues, are you able to park your vehicle close enough to your pharmacy?	%	Count
Yes	57%	76
No	13%	17
Don't know	3%	4
Not applicable	27%	36

Base:133

11. If you have mobility issues, are you able to access your chosen pharmacy?

If you have mobility issues, are you able to access your chosen pharmacy?	%	Count
Yes		88
No		11
Don't know		3
Not applicable		31

Base:133

12. Does your pharmacy deliver medication to your home if you are unable to collect it yourself?

Does your pharmacy deliver medication to your home if you are unable to collect it yourself?	%	Count
Don't Know/ I have never used this service	64%	378
Yes – free of charge	22%	129
No	12%	71
Yes – with a delivery charge	2%	12

Base:590

13. Can you remember a recent time when you had any problems finding a pharmacy that was open to get a medicine dispensed, to get advice or to buy medicines over the counter?

Can you remember a recent time when you had any problems finding a pharmacy that was open to get a medicine dispensed, to get advice or to buy medicines over the counter?	%	Count
No	64%	380
Yes	30%	176
Not sure	6%	34

Base:590

14. If yes, what did you need to do?

Reason for needing a pharmacy	%	Count
To get medicine(s) on a prescription	69%	138
To buy medicine(s) from the pharmacy	21%	42
To get advice at the pharmacy	10%	20

Base: 200

15. How satisfied are you with the opening hours of your pharmacy?

Satisfied with opening hours	%	Count
Very satisfied	42%	245
Somewhat satisfied	30%	178
Neither satisfied nor dissatisfied	13%	76
Dissatisfied	13%	74
Very dissatisfied	3%	17

Base:590

16. What is the reason for your answer

In summary, the main reason for being satisfied with opening hours is that the pharmacy has longer opening hours including a later closing, and is open on a weekend, especially all day on a Saturday.

The main reasons for dissatisfaction with opening times is that there is no later closing time, they are not open at the weekend (or a Saturday or a Sunday) and for some pharmacies that are open on weekends, they have shorter opening hours. There were also comments about pharmacies being closed over lunch time.

17. How many times recently have you needed to use your usual pharmacy when it was closed?

How many times have you need to use the pharmacy when it was closed?	%	Count
I haven't needed to use the pharmacy when it was closed	55%	327
Once or twice	38%	223
Three or four times	5%	29
Five or more times	2%	11

Base:590

18. What day of the week was it?

What day of the week did you visit the pharmacy and it was closed?	%	Count
Monday to Friday	37%	96
Saturday	34%	90
Can't remember	16%	42
Sunday	12%	31
Bank Holiday	2%	4

Base:263

19. What time of the day was it?

What time of day did you visit the pharmacy and it was closed?	%	Count
Morning	17%	45
Afternoon	19%	49
Lunch-time (between 12pm and 2pm)	25%	67
Evening (after 5pm)	24%	64
Can't Remember	14%	38

Base:263

20. What did you do when your pharmacy was closed?

What did you do when your pharmacy was closed?	%	Count
Waited until the pharmacy was open	52%	135
Went to another pharmacy	41%	106
Other (please specify)	2%	5
Called NHS 111	3%	9
Went to a hospital	1%	3
Went to a Walk in Centre	1%	2

Base:260

If you selected other, please specify.

- Nothing
- Ordered from online pharmacy with next day delivery
- Brought from supermarket
- Brought paracetamol from the shop

21. Did you get a prescription dispensed the last time you used a pharmacy?

Did you get a prescription dispensed the last time you used a pharmacy?	%	Count
Yes	83%	492
No	16%	95
Can't Remember	1%	3

Base:590

22. Did you get all the medicines that you needed on that occasion without waiting?

Did you get all the medicines that you needed on that occasion without waiting?	%	Count
Yes	73%	361
No	26%	128
Can't Remember	1%	3

Base:492

23. If you had to wait when picking up your prescribed medication, did the staff at the pharmacy tell you how long you would have to wait for your prescription to be prepared?

Did the staff tell you how long you would have to wait for the prescription to be prepared?	%	Count
Yes	57%	75
No, but I would have liked to have been told	32%	42
No, but I did not mind	9%	12
Can't remember	2%	3

Base: 132

24. If not all your medicines were available on that visit, how long did you have to wait to get the rest of your medicines?

If not all your medicines were available on that visit, how long did you have to wait to get the rest of your medicines	%	Count
Later the same day	12%	16
More than a week	18%	23
Never got it	7%	9
The next day	21%	28
Two or more days	42%	55

Base:131

25. Was this a reasonable period of time?

Was this a reasonable period of time?	%	Count
Yes	31%	41
No	63%	83
Not applicable	5%	7

Base:131

26. What was the main reason for not getting all your medicines on this occasion?

Reason for not getting all medicines	%	Count
The pharmacy did not have the medicine in stock to dispense to me		107
My prescription had not arrived at the pharmacy		5
My GP had not prescribed something I wanted		6
Other		10

Base: 129

Other:

- Pharmacy was too busy x4
- Did not order it x2
- They forgot to give me a fridge item
- The prescription was waiting to be signed off by pharmacist
- Pharmacy couldn't find the prescription
- Item was missed off prescription

27. Have you had a consultation with the pharmacist recently or asked their advice?

Have you had a consultation with the pharmacist?	%	Count
Yes	45%	263
No	54%	320
Can't remember	1%	7

Base: 590

28. What advice were you given?

What advice were you given?	%	Count
Advice about a minor illness or health problem	53%	139
Medicine advice	27%	71
Referred to other service	4%	11
Blood pressure monitoring	6%	16
Lifestyle advice	0%	1
Contraception services	2%	4
Other	8%	21

Base: 263

If you selected other, please specify:

- Flu vaccine x10
- Covid vaccine x3
- Vaccinations x2
- No advice given x2
- Travel vaccinations
- Confirming need for medication
- Failed hospital discharge
- Discussion about need to improve service for dispensing meds that are lifelong and common, spending life managing meds every 2 weeks ringing and visiting to request dispatch

29. Where did you have your consultation with the pharmacist?

Where did the consultation take place?	%	Count
In a separate room	39%	103
At the pharmacy counter	44%	115
In the dispensary or a quiet part of the shop	13%	33
Over the telephone	4%	11

Base: 263

30. How do you rate the level of privacy you have in the consultation with the pharmacist?

Privacy during consultation	%	Count
Excellent	36%	95
Very good	22%	58
Good	16%	42
Fair	13%	34
Poor	9%	24
Very poor	4%	10

Base: 263

31. How do you feel about the range of services available at the pharmacy??

Where did the consultation take place?	%	Count
I wish pharmacies could provide more services for me	28%	168
I am satisfied with the range of services pharmacies provide	58%	345
Don't know	13%	77

Base: 590

32. Can you please tell us, what is important to you when choosing a pharmacy in terms of products and services?

Services	Important		Neither important nor unimportant		Unimportant		Don't know/ Not applicable	
	%	Count	%	Count	%	Count	%	Count
Delivery of medicines to my home	19%	112	32%	191	23%	137	25%	150
Knowledgeable staff	97%	572	3%	15	0%	2	0%	1
Having the things I need	96%	565	4%	22	0%	1	0%	2
Cost of products at pharmacy	46%	272	32%	188	13%	78	9%	52
Privacy when speaking to the pharmacist	77%	452	17%	103	3%	16	3%	19
Collection of prescriptions from my doctors	67%	397	14%	80	7%	41	12%	72
Range of services offered	73%	432	18%	108	4%	26	4%	24
Range of products available	72%	425	21%	126	5%	29	2%	10
Friendly staff	93%	549	6%	38	0%	1	0%	2
Waiting times	81%	475	16%	96	2%	13	1%	6
Opening times	85%	504	13%	77	1%	6	1%	3

Base: 590

33. Please tell anything else that has influenced your choice of pharmacy?

In summary the top five key factors that influenced choice of pharmacy are:

- Pharmacy closures – residents have to use a less preferable pharmacy as their local one has closed down
- Medication availability – respondents report issues with medication being in stock, this is often linked to the next factor
- Turnaround of prescriptions – respondents report having to wait up to/over a week for prescriptions to be ready to collect. Upon collection some items are unavailable which requires a further visit when they become available
- Location – many respondents use their pharmacy as it is the closest to their home. However, some respondents choose to use a pharmacy further away or online for better customer service, medication availability and shorter waiting times
- Customer service – friendliness and helpfulness of staff is valued

34. Can you please tell us, how satisfied you are with the services and products offered by your regular pharmacy?

	Very satisfied	Fairly satisfied	Neither satisfied nor dissatisfied	Fairly dissatisfied	Very dissatisfied	Don't know/ NA
Overall satisfaction	46% 270	29% 167	11% 62	8% 44	6% 35	1% 8
Delivery of medicines to my home	11% 67	2% 14	7% 39	1% 4	2% 14	76% 447
Knowledgeable staff	52% 301	25% 145	13% 74	4% 23	2% 9	5% 30
Having the things I need	37% 217	32% 183	14% 83	6% 37	8% 48	2% 13
Cost of products at pharmacy	15% 86	31% 182	26% 149	5% 27	3% 17	21% 119
Privacy when speaking to the pharmacist	35% 202	24% 138	15% 88	7% 40	4% 24	16% 91
Collection of prescriptions from my doctors	39% 226	16% 95	10% 60	4% 25	4% 24	26% 154
Range of services offered	34% 195	27% 158	21% 122	4% 23	2% 14	12% 69
Range of products available	30% 173	30% 174	20% 117	8% 45	4% 22	9% 54
Friendly staff	56% 326	25% 149	8% 49	4% 21	5% 27	2% 13
Waiting times	36% 210	27% 158	12% 68	12% 69	10% 61	3% 17
Opening times	36% 212	27% 161	14% 80	15% 85	6% 35	2% 13

Base: 580-586

35. Please tell us anything else that has influenced your overall satisfaction.

In summary the top factors that have influenced level of satisfaction with pharmacy are:

- Staff being friendly, helpful, and providing good customer service
- The pharmacy being in a convenient location, in walking distance of home
- Availability of medication
- Waiting time for prescriptions to be ready
- Collection of all prescription medicines at the same time (note: a number of respondents said that when they go to collection their prescriptions some items are unavailable, and they have to make return visits)
- Queues and long waits at the pharmacy
- Pharmacy closures
- Opening hours

36. How would you describe your experience of your local pharmacy and their services over the last 12 months?

In summary:

- The most frequent comments were about pharmacy staff being friendly, helpful and knowledgeable.
- There were also a number of comments about pharmacy staff providing a good, efficient and/or reliable service.
- However there were an equal number of comments about poor service. Some respondents also found pharmacy staff to be unhelpful and unfriendly.
- Pharmacies being too busy were an issue, with long queues and wait times. Occasionally when the pharmacy was busy respondents had been asked to come back another time.
- Respondents had experienced medication shortages, with medicines being unavailable upon collection of prescriptions, requiring an additional visit to the pharmacy.
- Respondents reported long wait times for prescriptions to be ready for collection, and sometimes they required multiple visits.
- Opening hours were commented on a number of times, with some being happy with longer opening hours and weekend opening, and others wanting longer opening hours and weekend opening at their usual pharmacy.
- Some respondents commented on the closure of their local pharmacy and its impact on their ease of getting to a pharmacy, and the impact on increasing how busy surrounding pharmacies became.

36. Are you....

Sex	%	Count
Male	22%	128
Female	76%	445
Non-binary	1%	3
Prefer not to say	2%	12

Base: 588

37. Age

Age	%	Count
16 to 20 years	0%	2
21 to 30 years	3%	20
31 to 40 years	9%	55
41 to 50 years	13%	77
51 to 60 years	4%	142
61 to 69 years	27%	157
70 years or over	21%	124
Prefer not to say	2%	11

Base: 588

38. Are you a carer?

Are you a carer	%	Count
Yes	18%	107
No	82%	474

Base: 581

39. Do you have any of the following...

Type of disability	%	Count
Deaf/hard of hearing	14.6%	9
Learning	1.6%	1
Long term illness	50%	31
Mental health	9.7%	6
Physical	42.0%	26
Visual	1.6%	1
Other	11.3%	7
Prefer not to say	12.9%	8

Base: 89

40. If you have ticked any of the boxes above, or you have cancer, diabetes, or HIV this would be classed as 'disability' under the legislation. Do you consider yourself to be 'disabled'?

Do you consider yourself to be disabled	%	Count
Yes	20%	92
No	70%	324
Don't know	3%	15
Prefer not to say	7%	33

Base:464

41. Do you identify yourself as:

Ethnic group	%	Count
White British	95.8%	207
White other	2.8%	6
Mixed ethnic background – Black African and White	0.5%	1
Other Chinese background	0.5%	1
Other Asian background	0.5%	1

Note: There were other options but none were selected

Base: 216

42. Do you have a religion or belief?

Religion or belief	%	Count
Yes	56.3%	117
No	31.3%	65
Prefer not to say	12.5%	26

Base: 208

43. If yes, please select one of the options

Religion or belief	%	Count
Christian	90.1%	110
Buddhist	0.8%	1
Muslim	0.8%	1
Other	7.4%	9

Base:121

44. If other please specify:

- Spiritualist x4
- Catholic x2
- Wiccan
- Quaker

45. How would you describe your sexual orientation?

Sexual orientation	%	Count
Heterosexual or straight	88%	184
Gay or lesbian	1.9%	4
Bisexual	1.9%	4
Other	0%	0
Prefer not to say	8.1%	17

Base: 209

46. Do you live in the gender you were given at birth?

Do you live in the gender you were given at birth	%	Count
Yes	96.6%	201
No	0.5%	1
Prefer not to say	2.9%	6

Base: 208

Full comments

Question 16. What is the reason for your satisfaction with opening hours answer
6 day a week service 9-5:30
A bit longer on a Saturday would be useful
Although very busy
As it is linked to the Surgery it is closed on Saturday & Sunday - however, that is my choice and I can always find another chemist at the weekend.
Because the [pharmacy name] is exceptional.
Being retired, the opening hours suit me but Saturday is a half day so might make it harder for some
Boots late night pharmacist available for advice
Close at 12 on a Saturday
Close pretty early and closed for lunch
Closed all weekend

Closed at lunch and no late night
Closed at lunchtime
Closed at lunchtime
Closed at weekend
Closed for an hour during my lunch break is not helpful
Closed on a Saturday
Closed on a Saturday.
closed on Saturday
Closed on Saturday. Ridiculous.
Closed Saturday all day
Closes at lunch time now for an hour and on Saturdays
Closes at lunchtime
Closes early (ish). It would be better if it had user friendly hours of business.
Closes for lunch
Closes for lunch and doesn't open on Saturdays.
Closes on a Saturday afternoon and at lunch time.
Closes over lunch and Saturday afternoon
Closes Saturday at noon
Closest local pharmacy only opens Monday to Friday 9 to 6 and closes for lunch for an hour, they don't open weekends. Due to opening hours restrictions I now use a pharmacy further away that opens later and at weekends.
Convenient daytime hours
Co-ordinating working hrs of myself, GP and pharmacy means I have to go out of my area
Could be open later
Could do with being open until 6pm and no lunch hour
Currently closed
Currently, As a Type 1 Diabetic since October 1975 I sometimes realise that have not placed a timely prescription request , however, a "loan" occurs so that I do not run out
Difficult to collect prescriptions when pharmacy is only open during my working hours.
Do not open in the evenings or on a Sunday so I have to take time off work to visit
Do not open on Saturdays
Does not open weekends
Doesn't mirror the GP surgery times
Doesn't open on Saturday due to staffing issues.
Don't know why they have to close for an hour at lunch time.
Don't close for lunch.
Don't know what they are.
Due to my working hours and carers responsibilities, going later at night is sometimes my only option. I sometimes attend after the pharmacy is closed
Except Saturday
Fantastic chemist
For someone that works long working hours closing around 6pm doesn't help me during the week. This means that I am limited to using the pharmacy on a Saturday morning.
Great opening times
Great service.
Great to be open but not so great if the service is substandard

Had a severe eye infection- told GP could handle it- needed chloromphenical eye drops (a simple & commonly used item, as I am also an RGN) none in stock at both pharmacies.
Half day closing on a Saturday can be an issue
Hardly any pharmacies stay open late and therefore the only ones that do have long queue.
[Name of pharmacy] I used for years, not anymore staff are quite obnoxious, the meds I needed which I have had from there before they wouldn't even order for me, even though I ordered from there for at least 2 years
Hours good but sometimes late opening as not had a pharmacist
I am retired and live locally so the hours of opening are very satisfactory for me
I can tailor my visit around the times they close.
I can time my visit when I have a hairdresser appointment or need that little extra from local supermarket
I changed pharmacy recently from an independent pharmacy (which used to deliver my husband's prescriptions free of charge but recently imposed a £5 delivery charge) to Tesco's in store pharmacy which means I can access a pharmacy when I go food shopping - the hours of opening are much improved too.
I don't have a nominated local pharmacy as my medication is delivered to my door by Pharmacy2u. Opening times aren't relevant
I don't know what the opening hours are. My prescription gets sent directly to them and I get a text message when it is ready for collection.
I don't know what the opening hours are.
I don't normally visit in person
I don't often use the pharmacy but with the flexibility of my job I can make time to go within the pharmacies opening hours
I don't really know what the opening hours are of the supermarket pharmacy I now have to use.
I expect it to be open 9-5 weekdays and Saturday mornings which it is
I have never needed anything out of hours
I have not experienced any emergencies recently, when I needed to access pharmacy services out of hours.
I have stopped using this pharmacy
I miss the Saturday morning opening they used to have. Gave a bit more flexibility on rx prescriptions to be collected of there was a problem either supply or an issue in it coming across from the GP.
I often need to contact pharmacies for medication advice due to my job role - finding available pharmacies out of hours to give advice can be horrendous as alot of pharmacies will not give medication advice if the person does not get prescriptions from that particular pharmacy - with so few open late or on weekends/bank holidays its rare to be able to phone up a persons actual pharmacy
I spend a lot of time in Portugal and people's attitudes to pharmacy's are so different. The people in the village go to the pharmacy and then if needed go to the doctor or hospital.
I start work at 8am but the Pharmacy doesn't open until 9am
I think an out of hours service within the general area would be an improvement. The 24 hour chemist on duty can be a long drive
I think they should be open weekends if they are to support the NHS more.
I understand the need to close for lunch for the busy staff but my previous pharmacy was open all day.
I use Pharmacy2U for my prescription medication
I very rarely need urgent medication so ordinary opening hours are fine
I would like it open later in the evening maybe once or twice a week so I can collect my medication as I work office hours.
I would like to see pharmacies open later, because it can be difficult for some people to get to.
I would prefer it if the pharmacy was open all day on a Saturday rather than just the morning ... I work full time so Saturday is my only chance to visit

I've stopped using it.
In supermarket
It closed down
It closes at lunchtime which can be awkward
It closes for lunch, which I don't always remember - but not a serious issue
It closes too early at 12 noon on Saturdays
It closes too early on a Saturday - at 11am.
It has closed down
It has excellent opening times.
It has never been closed when I have needed it.
It is closed for over an hour at lunchtime which is when I usually need to collect my prescription
It isn't open on a Saturday.
It shuts for lunch which means I can't go during my lunch break and it isn't open late so I can't go after work.
It works with the GP Surgery
It would be good if it opened on a Saturday
It would be helpful if they were open more in the evenings
It would be nice if they opened for longer over the weekend
It's always open, e.g. when I have an appointment at the surgery so is convenient to get my prescription filled at the same time.
It's not good for working people. When I come back from work it's already closed. I can go there only Saturday if I'm not required at work
It's not open early or late but is open weekends.
It's ok but could stay open longer than 12 on a Saturday, the only day some have time to go
It's open 9-5
It's open but never has the medication. Had to ring round many pharmacies and queue for an hour.
It's open for a couple of hours after work, which makes it much easier to visit
It's open until 8pm. Later would be better but 8pm is ok.
It's open until after I finish work, but it does shut for lunch which is a bit inconvenient
It's usually open the same hours as the supermarket
It's annoying if I go at lunchtime and the pharmacist isn't there, but it's ok as long as I remember!
It's attached to the GP surgery. So it doesn't open on Saturdays.
it's closed at lunchtime for a long period, when working people would be able to visit
Its easy to access and fast delivery and fits through my letterbox
It's in a supermarket
Its in a supermarket but does not open supermarket hours
I've only ever been there in the daytime when it suits me.
Lack of evening and weekend opening
Later on a Saturday
Later opening times would be helpful
Local pharmacy is so busy it now closes for an hour at lunchtime to give staff a break, which is understandable but can be frustrating.
Longer opening times on a Saturday would be helpful when working full time.
Lunch break the pharmacy is closed.

My GP has an inhouse pharmacy which remains open until 6.30 when I have finished work. If I require advise at on a weekend I attend the pharmacy in my village and I also purchase other medical non-prescription items from village pharmacy.
My local one closes at 1 pm on Saturday
My local pharmacy closes at 6pm and I work until 6pm but I can usually manage to go on my day off or Saturday am before 12.30
My local pharmacy is an asset to the community and very busy. They are open regularly but take a well deserved break at lunch time.
My local pharmacy is open 6 days a week and provides an invaluable service to the local community
Needs to be open all day on a weekend
Never had a problem
Never had a problem with it not being open
No evening service and close midday on Saturday which usually means they close the door at 11.50 so they can serve the people in the long queue and prevent others from joining.
No issues experienced
No problems so far
No weekend opening
No weekend opening hours
Normal hours
Normally the dispensary isn't there for 9am. They often do not have a what I have been issued by the doctor
Not applicable because local Hoole pharmacy now closed
Not had any problems
Not open at weekend
Not open at weekends
Not open at weekends.
Not open evenings and Sundays
Not open late
Not open late enough. Previous pharmacy was inside a supermarket & opening times were far better
Not open long enough
Not open long enough - only open in the middle of the working day.
Not open on a Saturday
Not open on a Saturday!!!!
Not open on Saturday
Not open on Saturdays
Not open on Saturdays or Sundays
Not open Saturday afternoon or Sunday. No out of hours service.
Not open Saturday mornings anymore.
Not open until 5pm on a Saturday
Not open weekends
Not sure what the hours are
Often no pharmacist do give drugs out. Closes for lunch
Often no-one serving at the counter means very long waits
Only open half day Saturday and no late night. Difficult when working
Only opens until lunchtime Saturdays
Open 6 days

Open 6 days a week so very convenient
Open 9-6 1 hour for lunch
Open 9am until late
Open at hours I shop
Open at weekends
Open early evening and sat am
Open from early morning to early evening.
Open late so I can pop in on my way home. I don't just mean open until 6pm, I mean open until 8pm so I can go when there aren't queues (or lots of sick people)
Open long hours.
open normal hours including Saturday but do close for lunch
Open office hours which is not good if working yourself
open till 6.30pm
Open until 6 and open Sat am
Open until 6pm and Sat morning
Open until 8pm Monday to Saturday and open on Sunday also
Open until 8pm most evenings and also open both Saturday and Sunday
Open working hours and close lunch. Difficult to get prescription except for Saturday morning
Opening times are amazing
Opens until late in the evening which is handy after working all day.
Originally open till 10pm now reduced quite a lot since been took over
Our local pharmacy are open late two nights (I think) each week
Our pharmacy is closed on a Saturday
[Pharmacy name] - very good opening hours.
Pharmacies are under-staffed so staff are doing to much and this means longer queues and waiting times. Not great when you are feeling ill.
Pharmacies have reduced opening hours due to lack of funding despite what the media tell people. [Pharmacy name] used to be open from 7am until 10pm thats now reduced. Can't blame the pharmacy they don't get paid enough to deliver services!
Pharmacies should be open late as people are sick at every time of day.
Pharmacy is open from 8.30 to 6.00 Monday to Friday and until 1.00 on Saturday.
Prescriptions not available over lunch time
Problem is not with opening hours but with the fact when asked to telephone there is rarely an answer and causes several phone calls
Realistically, could do with it being open 7 days a week (including Bank Holidays)
Reasonable opening hours
Reduced their hours post Covid and close for parts of the day
Satisfied with week hours but weekend hours are not sufficient
Shopping centre is only open in the daytime. I am able to access the Pharmacy on my lunchtime. I also only work part time so have time to go on different days if need to.
Should be available on Sundays for emergencies
Should be minimum 12 hours per day with a staff change after 6 hours
Should be open till late
Should be open more
Also the pharmacist is half an hour late everyday so sometimes I will call to the pharmacist after taking my child to school but I can't go in because they refuse to open until the pharmacist arrives

Shut early and not open certain days
Shut over lunch & Saturday afternoon
Shuts early on a Saturday (1pm) and closed all day Sunday
Since it's the only one I work to their hours; a more local service would be better.
Sometimes closes bit before their lunch opens bit after
Sometimes doses for lunch. Hard to get through on phone
Sometimes not open if no locum pharmacist available
Sometimes the staff aren't very helpful
Sporadic opening hours in vicars cross and Hoole pharmacy recently closed
Sundays would be good
Superb service and all staff are very helpful
That it is no longer local so the independent pharmacy I use is not particularly convenient and the supermarket pharmacy (longer opening hours) needs a trip into town.
The local one in England is not open on weekends or past 5pm. Not suitable for workers.
The opening times are the same as my work hours plus I need a car to get to the pharmacy
The Pharmacy I used is only open during core working hours (9-5) which is difficult for me to access as I am also at work during those times. It used to be open longer, which is the primary reason why I chose this pharmacy when I was changing after I moved house, but the hours changed so now it is more difficult to pick up prescriptions, and I have to plan and co-ordinate my life now around being able to collect my medication when it comes time for a repeat (every month).
The pharmacy is no longer open on Saturday.
The pharmacy is open 6 days a week. It closes at lunch time.
The pharmacy is open at times convenient for me
The pharmacy is open until 9pm on most days which is ideal.
The pharmacy closes too early and is well over subscribed. It is always hugely busy and they take ages to fulfil the prescriptions sometimes taking a week.
Their hours are 9a.m - 5p.m., very often not open on time at 9 a.m. Saturday 9 a.m. - 12 noon results in long queues
There is little choice as its Boots in Chester and its open shop hours
There is no pharmacy close by
They always seem to be open
They are closed at lunchtimes through the week for an hour, and close early on a Saturday. The only time I can get to the pharmacy is during my lunchtime break at work, or on a Saturday in and around clubs that my children attend.
In addition, if the pharmacy is open, the pharmacists isn't always there.
They are closed for over an hour for lunch
They are open at convenient times for me.
They are open every weekday
They are open usual daytime hours, so I plan the journey accordingly
They are open when I need them
They close at 1pm for an hour and shut at 5pm
They close at lunchtime
They close at lunchtime on a Saturday
They close between 1 and 2 which is when it is most convenient for me to visit, I have to arrange my working day around their opening hours when I need my prescription
They close for lunch 1-2
They close for lunch

They close for lunch and it is always when I get there
They close for lunch and I've been caught out after quite a long cycle ride
They close for lunch causing ques when reopens
they close for lunch which is difficult for me as I work and would pop there in my lunchtime. They are also closed on Saturdays
They don't open at weekends but my medication is delivered on Friday so if there is an urgent problem I can't contact them
They don't open on a Saturday
They don't open on Saturday
They have always been open when I have visited.
They have reduced their opening hours (used to be late night) and closed another pharmacy near by so it is always busy
They have shorter opening hours on the weekend. It would be helpful if they were open on the weekend or at least a short day on a Sunday as well as Saturday.
They often close pharmacy for prescriptions when pharmacists on lunch, which you don't know in advance
They often close randomly and not at lunch time, you turn up on say a Saturday with a sign to say closed today due to staffing. Happens regularly.
They open early & close late & are open Saturday mornings
They open early and close at 6pm.
They used to be open on a Sunday but since covid that has changed
They're not open all day
They're open during the day. If I need one with late opening I drive into town - this has happened when GP was late requesting prescription
Unable to access outside work hours as it's too far away from my home and work
Used to be open at weekends & later in evenings.
Usual shopping hours
Very busy a lot of the time and not available at weekends.
Very dependable and keeps us updated on opening hours and any disruptions to service e.g. power cuts/it system down
Very helpful Pharmacist who has given me advice in the past
very local so easy to visit when open
We have alternatives near by
We have become 'used' to retailers being open longer and even on Saturday, but realise that staffing a pharmacy can be problematic.
We haven't got a local pharmacy.
We lost Lloyds Sainsburys recently so no longer have a late night , Sunday pharmacy ,Saturday afternoon pharmacy close by.
We no longer have a community pharmacy and auxiliary services have long waiting list due to being over capacity.
We used to have a fantastic pharmacy nearby that was great for all the local community. Unfortunately this closed for some licence reasons which was a huge loss to the community and a real shame. Now we have to drive to a pharmacy which is further away and not as good as the one we had previously. The drive makes it more difficult and congests the roads
When the new pharmacy opened at [Pharmacy name] it was 7 days a week and open late. Once it had put the other nearby pharmacy out of business its hours have repeatedly decreased. It is often very busy.
Why do they close for lunch, need 2 pharmacists to deal with the black log of medication scrips.
Wish it was open later.

Wish they opened on a Saturday
Work local one - pharmacist is often not available
Would like one late night , perhaps until 7pm.
Would prefer longer weekend opening

Q33. Please tell anything else that has influenced your choice of pharmacy?
1. Location ideally close to my home or my GP surgery. 2 The cost of items. 3 Having my medication available or within 24 hours 4. Opening hours ideally work in a group so one is open late at night 1 day a week and weekend opening between them. 5 Much more services it should be the 1st stop and if they cant deal with it they can get an immediate GP/ A&E appointment
2 minute walk from my house
A lot of pharmacies take up to 2 weeks from when they receive the prescription from the doctors to then having it ready for pick up. Totally unacceptable.
All staff are very helpful and friendly
All the others local to us have shut. As a result there are always long queues.
All the staff are so friendly & go the extra mile to help you!
All the staff's willingness to help.
Always friendly, knowledgeable and efficient
Always support local businesses
Am fortunate not to need medicines but there was a time before Covid when we were encouraged to seek a pharmacist's advice rather than bother a GP.
Am very unhappy with my local pharmacy as HUGE queues and waiting time. Often not got meds in so have to come again. Also, when giving name and address for them to type in.....they always say what the medication is! As if you want the whole queue of people knowing that. They also only make up meds when you come to collect.
So, I have changed to a different pharmacy who download all the prescriptions each morning and are all ready packaged up for me.
An understanding of my medical conditions and the availability of medication
Another local pharmacy always has a long queue and never makes up the script on receipt so it's never available when you arrive
Another pharmacy is closer but has a poor reputation. Another one is much bigger but gives awful service. My choice is a slightly smaller but well stocked pharmacy which is getting more and more popular in the light of the 2 above comments!
Approachable and friendly
As I mentioned in my answer to the previous question - the opening hours were what initially influenced my decision to use this pharmacy, as it was open outside of my working hours so could pick up my medications on the way home from work. This is no longer possible.
As my local pharmacy is now closed my options are a walk a bus drive or a taxi As I am 75 it very much depends on weather eg if icy don't wish to go out Having a local pharmacy within a short walk from home meant everything to me as an elderly person
Availability of medication supply
[Pharmacy name] pharmacy staff are friendly, approachable and recognise me which is important
Bad experiences with two previous pharmacies, with medication out of stock, not ready when promised and long queuing times. Current pharmacy is slightly better but still fails at times to have prescriptions ready.
Because the well pharmacy close to me is dirty and you can never get your prescription on time

Because they are an independent pharmacy, they are never out of stock of an item, they go above and beyond to make sure everything is OK, they deliver my medication free of charge saving me time and money.
Been going to the pharmacy for sometime just wish they'd deliver
Been with my local pharmacy for years, but had to change to online as i had so many issues with being able to get my medications, GP sent but pharmacy cant locate/not ready/out of stock/come back in a week for a repeat dispensing which resulted in A&E visit with exacerbation due to no inhaler. I could no longer rely on them, always too busy, long waiting queues, staff don't seem to care or be bothered. So 've switched to an online pharmacy which i said 'd never do, but i have had no issues what so ever, my meds arrive on time, if there's an issue im told ASAP, always kept informed by them at every step.
Being local as I am 70+ yrs old. Cannot walk to other pharmacies and buses are not suitable due to bus times - would take far too long. My local community has had a pharmacy for over 150yrs until it was closed in January. It was well used and needed by all age groups. Especially as the Government are trying to get pharmacies take the burden from GPS. If Hoole does not get a pharmacy I would have to go to the Dr more often.
Better service and medication availability better than the 2 I previously used
Cannot think of anything else
Car park, friendly pharmacist and staff
Caring staff but they are under a lot of strain
Clean and tidy pharmacy, privacy at the counter, ability to deliver or order quickly the medicine.
Close parking, open after 6pm do can call in after work and weekend opening
close proximity to home and convenience of not having to queue too long which is an issue following the closure of [Pharmacy name]
Close to home
close to home
Close to home
Close to home and other shops
Close to home, although short staffed at times and not always able to prescribe medication when due
Close to home.
close to my home
Close to my home. It provides a range of services including vaccinations. They do their best to get any medications prescribed when other pharmacies haven't had them in stock.
Closed the local Boots, which was near home and in our local shopping street. We and our family regularly used it and it was convenient for advice as well as picking up prescriptions. It is greatly missed and needs reopening.
Closest to home.
Closest to my home now our local pharmacy has been closed
Closure of other local pharmacies
Convenience
Convenient
Convenient location
Correct dispensing. [Pharmacy name] near my Doctors made errors in dispensing, both with my husband's prescription and my own. I was given a wrong drug but the Pharmacist concerned when approached was exceptionally rude and took no responsibility whatsoever. In another pharmacy in town staff were just rude.
Currently the [Pharmacy name] never fulfils my prescription first time after 5 days and it's taking 2-3 days to get rest of the order due to not having stock, yet I have the same meds every month for 8 years.

Service has dramatically reduced. Previous owners were excellent for my list of prescription meds with 2 days fully provided.
customer service
Desperation- struggled during pregnancy, suffering with HG and desperately needed medications, only to find it hard to actually obtain the necessary medication!
Didn't have a choice as such, closure of previous pharmacy meant moving to current one
Dispensing error Not having stock for common drugs. Behavior of staff. Adding nomination without permission.
Distance and when open
Distance from home
Distance from home with parking as I have to drive now that my local pharmacy has closed
Due to closure of my local pharmacy I have had to go to one where I need to drive and the one I use now has parking
Ease of getting there and knowledgeable staff
Excellent pharmacy with excellent and competent staff, including the pharmacist. They collect from my usual (and almost useless) GP and deliver to my home - wonderful and free of charge. A complete change since it was taken over from the previous Lloyds system that gradually deteriorated, with no regular pharmacist, until it became almost useless.
Excellent service, more readily available than my GP
Excellent staff, professional and friendly.
Extra services like ear wax cleaning
Extremely efficient and lovely personable staff. Very very rarely do they not have my medication in stock and on the odd occasion it has happened I have only had to wait a matter of days.
Extremely helpful at all times
[Pharmacy name] has an excellent reputation. They care about their service to patients. Their knowledge is excellent. The best pharmacist ever. We moved here from a large town where the pharmacy was much less efficient.
Flu vaccinations are a useful service
Forced to use a [Pharmacy name] as local pharmacy on Faulkner St Hoole closed and ICB rejected the application to reopen twice now - I am a pharmacist and have a personal insight into this
Free parking, opening times and ease of access
Friendly & convenient location
Friendly helpful staff
Friendly knowledgeable staff Confidence
Friendly staff and adjacent to GP surgery. Very efficient service.
Friendly, independent, family run pharmacy close to my home
Good service and when available free delivery service especially for older people with health conditions
Handy for home, but endless queueing and failure to meet agreed deadlines has caused me to move to an online delivery service. So far this has been faultless.
Handy for walking distance from home. Helpful staff.
[Pharmacy name] are excellent helpful and informative all pharmacists should be like this.
Have always used them as our local pharmacy. Knowledgeable and helpful staff and very friendly

Have text messaging when prescription is ready
Having my medicines available.
Hoole desperately needs a local pharmacy back
[Pharmacy name] pharmacy in Ellesmere Port needs a complete change in hours and training of most staff
I am forced into driving to a pharmacy and driving my husband to a pharmacy. I would much rather walk and my husband would much rather be able to get there by himself.
I am thinking of changing due to opening hours; prescription isn't made until you visit and if they haven't got it wait another week. Most times medicine unavailable but is at other chemists
I am with pharmacy 2 u they are great so wanted to give feedback
I can get my repeat prescription sent there from my gp
I changed from online pharmacy to local pharmacy as I was having difficulty getting medication in time - some of which are life saving drugs. Local pharmacy is brilliant
I changed pharmacies when I moved house, but the new one takes much longer to process prescriptions. My previous pharmacy did it in a day, this one takes a week.
I changed to pharmacy2u as wait times for prescriptions ordered were in excess of a week? Only use the pharmacy behind my house when have to get a immediate prescription as attached but not affiliated to doctors. They closed 1 pharmacy and reduced the hours of the other so always big queue and long wait times.
I choose to use an independent pharmacy, they give me better, faster service than my local group pharmacies
I chose [Pharmacy name] over [Pharmacy name] due to wait times and service. In [Pharmacy name] I was previously waiting around 20 minutes to be served and often had supply issues for my prescription. In [Pharmacy name] I am only ever waiting maximum 5 minutes.
I chose my usual pharmacy as they deliver to my home. I might use a different pharmacy for an urgent prescription.
I chose the [Pharmacy name] as the previous [Pharmacy name] was always friendly and helpful. This one is too, just further away.
I did not have a choice of pharmacy because the one I used regularly was closed
I didn't have a choice, my nearest one closed.
I don't have a choice. It's the only pharmacy in the area.
I had no "choice", it's the only pharmacy available within five miles
I had several months of a really bad service from my local pharmacy when needing repeat prescriptions. Process was ridiculous - never ready even when they had the prescription for several days - wouldn't dispense it until you were physically in the shop. Even then I was constantly asked to call back. Ridiculous! Also displeased to see owner tell member of staff they could not have holiday or a pay rise in public in front of a long queue.
I had to move as my local pharmacy closed. Chose a new one because of easy parking and can pick up other shopping
I have a rare medical condition & have to have a lot of medicines to stay alive so I need good service from my pharmacy
I have completed the survey as if I still use my local pharmacy as my nominated pharmacy. However, due to terrible customer service, and a seeming inability to think forward, I have now nominated [Pharmacy name] as my pharmacy. Not only do I receive timely notification of any items that are out of stock, but I get my medication delivered free of charge in pouches for the different times of day.
I have decided not to use my local pharmacy as they are not reliable
I have had a wonderful service from the pharmacy that is next-door to my GP surgery. They work together as a joined up service.

I have limited choice as the one I used and could walk to has closed down. Very annoying as there is no easy one to get to now if you live in this area. It was a very busy useful pharmacy for the locals
I have to go to a different pharmacy as my usual one closed down
I have to have my tablets ordered as they don't keep them in stock.
I have to travel to an alternate to my local one due to poor service and knowledge
I have to use the village pharmacy or we could lose this valuable resource especially as the doctors branch surgery with pharmacy has closed
I mostly get prescriptions delivered by a online pharmacy, this cuts out stress and waiting times.
I moved pharmacy because [Pharmacy name] service was terrible.
I need a pharmacy in my local area. Sadly, [Pharmacy name] has shut down. It's a great shame to the whole community. I work within the NHS within therapy community services and see patients within this area. It's such a shame that they have no access to a local pharmacy anymore. In Hoole - it was close enough to walk to - but further afield they have to get a taxi as unable to rely on public transport. A lot of my patients rely on those personable relationships and interactions at the pharmacy staff and pharmacist. It contributes to patient centred-ness and their health and well-being goals. Both physical and psychological. I have also seen many hospital admissions as a lot of things whereby patients would have gone to a pharmacy - they now attend A&E which is extra strains on an already strained service. As I also live in this local area, I do often require pharmacy services which I have to travel far out to access.
I Now use the dispensary in the doctors as the local pharmacy is rubbish it never has my tablets in then 1set comes in not the other or they can't get them but the pharmacy in the doctors can.
I now use the pharmacy in kelsall after having an awful experience at the pharmacy in tarvin
I only continue to use this pharmacy because it is close to home. Everything else about it is unsatisfactory: under resourced, stressed resources, absence of products, inadequate opening hours.
I receive excellent service from my pharmacy. They will order repeat medication and text you when it is ready for collection
I recently started getting my prescription sent to a different pharmacy as my original choice was no longer meeting my needs
I travel to the pharmacy I use to ensure it stays open. They are helpful and are open late in the evening. My closest pharmacies don't therefore I don't support them
I use a variety of pharmacies depending on the circumstance, my location and the time.
I use an independent pharmacy to avoid the impersonal service provided by the big chains.
I use online pharmacy as I need the delivery and the waiting time to get prescription dispense is usually quicker than ordered repeat from the local pharmacy
I use the pharmacy as it's in the village I live however the service is shocking never have anything in stock and have to take my prescription to another pharmacy
I use the pharmacy because they collect my repeat prescription from the GP but they never have stock of prescriptions on the day- emergency antibiotics from my GP for my child. There's a mass shortage of clarithromycin liquid for children, it's like gold dust! This means I travel the county when my child needs it... really stressful.
I used a wide variety of pharmacies to get advice for service users over their medication - we have had to call as far out as London on occasion as we have not had a local pharmacy be able to give us advice as the person we were calling with the medication advice for was not a client of the pharmacies so they have refused to give advice - it is so hard as a carer in the community to be able to get advice from a pharmacy when we need it late at night - weekends - bank holidays etc
I used the [pharmacy name] regularly until it closed. Now I have to walk into town to [pharmacy name] as the pharmacy attached to my GP, [pharmacy name] is very poorly stocked
I used to use the local pharmacy in which was very convenient and near the other shops. Now I have to drive to the other side of chester which is not convenient

I used to walk to Hoole however now have to drive to collect as the pharmacy sadly closed
I was passed by [pharmacy name] to [pharmacy name] in Ellesmere Port. They frequently did not deliver medication on time, were very difficult to contact by phone and it was difficult for me to physically get too them. I tried to change pharmacies, however others did not do blister packs or weren't taking on new customers who required blister packs. I have disabilities making it impossible to manage without them. I eventually found [pharmacy name]
I wasn't able to get my flu jab at my pharmacy and have had to book one in Chester city centre which didn't have availability until December (I booked in early October)
I wish my pharmacy could be better and faster with my medication so I am not left waiting in pain for over an hour. I am unable to switch to a different pharmacy as they are all too far away for me to get to and it's unfair for my partner to go and fetch my medication for me every time. I also wish that the council would focus on the conditions of the roads and pavements to and from my house to the pharmacy in Asda as the conditions are making my disability worse and cars keep parking over the drop curbs closest to my house causing me to have to go along the road or cross at an unsafe place.
I work in Hoole, Chester. My local pharmacy although excellent is closed when I go to work, closed when I get home. Having a pharmacy in Hoole would enable me to get advice, purchase products etc rather than waiting to a Saturday
I work in pharmacy so use the branch I work in. Even for me and my colleagues it is difficult to get doctor appointments and the pharmacy staff are under massive pressure to provide more services though their employers do not increase staff numbers to accommodate the work increase.
I've left that pharmacy as the pharmacist was regularly late or absent.
If they stock generic products which are less expensive than branded products. Waiting times / queues Cleanliness
In the same building as my GP Surgery, they are firmly entrenched in the Surgery team.
Independent business. Unfailingly kind, patient and knowledgeable.
It is a local family run pharmacy. They have always helped me with advice when needed.
It is attached to the doctors' surgery and whilst not close to home, I visit a supermarket/fitness centre nearby. If either me or my husband were really ill, the location would be a problem
It is conveniently situated, the staff are very friendly
It is easy to walk to. If it was not then there is no way I would use it. It is useless
It is local to me. Next Nearest is a 10 minute drive away
It is near my mum whose prescription I have to collect. It would be much more convenient near me as I could choose when to collect it easier.
It is one of the nearest following the closure of the one within walking distance.
It is our local pharmacy and the staff are exceptionally good and friendly people
It is the best pharmacy around
It is the closest one to my home after the one in Hoole closed, so it is clearly struggling with the amount of new people using it. I used to use the one in Sainsbury's but that closed too. The one in my doctors surgery is always very busy and you have to wait for half an hour or more to be served.
It is the closest to me. The pharmacists are knowledgeable and very nice and courteous. I can get all the items I need there. There used to be a chemist fairly close but it closed this year and did not have a good range of goods. Parking is easy and there is a grocery shop near too.
It is the most convenient one to use since the pharmacy close to my home was closed
It is the nearest one to me that I can easily get to in my working week.
It is the nearest to my home (also near local surgery as well)
It is the nearest one to my home and the only one nearby
It is there for the community

It is walking distance, but parking (including disabled) is also available.
It suits my needs and requirements
It was next to our doctor's surgery.
It was the nearest one with parking.
It's handy because it's in the supermarket I use but it's not a pleasant experience.
It's local and accessible when need it
It's my nearest, not much choice locally
It's the closest to my home.
It's the nearest one I can drive to.
It's the nearest to the [pharmacy name] which was sadly closed January 24. The new pharmacy I use can not cope with all the new customers due the closure since Jan 24
It's the only one and it's crap.
It's the only one near my home there is no choice unless you drive to another village
It's the only one within a reasonable walking distance
It's (Chester city centre) the only one left since [pharmacy name] were allowed to buy out the local pharmacy in Hoole and close it down.
It's close to my home
Its convenience and the fact that prescriptions are sent there by the doctor's surgery.
It's in the same building as my GP practice.
It's local and prescriptions sent using NHS app and GP straight through to pharmacy
It's local in the village. But opening hours are a joke and days open. Need better opening hours for a village our size. Not everyone has a car a public transport is a joke. Big improvements needed
It's local to where I live.
It's next door to doctors
It's the closest to me and I've always been happy with the service.
its the most local
It's the nearest to home. But for some services e.g. covid booster I have to travel. Sometimes they don't have the inhalers I need and I have to walk the prescription elsewhere
Its the nearest. End of.
It's the only one in the village!
I've used the same pharmacy for 22 years except for no more than 5 occasions for my prescriptions.
Knowledgeable pharmacists and friendly staff
Lack of choice basically because so many pharmacies have closed !!
Lack of choice, pharmacies are now few and far between
Last pharmacy I use to use for over 15 years was taken over and I never got good prescription service after that, kept having to go back to them for missing items, them not liaising with doctors enough over prescription. Current pharmacy has been good well organised, and only a few issues with prescription etc.
Length of queue when picking up the prescription. Ability to have direct electronic prescription request from the doctors. Two pharmacies within walking distance have closed down, nearest alternative regularly has queues of over 20 minutes, then to be told they don't have the medication in stock. I now only have to queue 10 minutes!!
Length of time between prescription seen them doc to when it would be available
Length of time online prescription takes to be come available
Link with the GP is the only reason.
Listening staff, always greet you kindly, advice when needed, always apology if you have to wait. Our pharmacy has many customers so a wait could happen. They definitely go the extra mile

Local
Local
Local , good service generally
Local and very efficient
Local Boots closed so no choice but to go to another. [pharmacy name] were overwhelmed at first but now providing a good service but don't open on Saturday, not helpful as regularly go to Waitrose next door on a Saturday. Please get another Pharmacy to open on Faulkner street. This would also be a lot nearer to my GP.
Local community asset.
Local pharmacy closed down so now have to use one in supermarket
Local pharmacy closed Nov 2023 now have to go into city centre
Local pharmacy closed, desperately needed, new pharmacy willing to open but local authority say isn't needed. Pharmacy in [pharmacy name] been there for years, other localish pharmacy cannot cope with extra volume of patients/prescriptions
Local pharmacy permanently closed/ shutdown
Local supermarket makes you wait a week to process a prescription so order online. Time frame is due to pharmacies in the area closing
Local to me
Local to me.
Locality
Locality , Lack of choice
Locality, staff.
Location
Location
Location - being close to where I live
Location in my village centre
Location is convenient.
Location to my home
Macy that has stock or what is needed
More convenient location based within supermarket. My previous independent pharmacy imposed a £5 delivery charge for a vulnerable NHS CHC funded patient requiring 24/7 supervision at home - this was unacceptable to me.
My choice of pharmacy is limited and requires a long walk or car drive. I would prefer to have pharmacy in Hoole that is within a 2 minute walk from my home
My GP surgery chose which pharmacy to send my prescription to. I have no reason to change as it is convenient for me.
My local chemist in hoole chester has closed so I have to walk into Chester .
My local pharmacy closed and I wish it would reopen as it provided a valuable community service, not just for my prescriptions but for lots of other people including elderly. There is no other choice in walking distance.
I now use the pharmacy in local supermarket which is fine but obviously over stretched.
My local pharmacy had closed and there is no other pharmacy nearby. I now have to drive to other suburbs to find one.
My local pharmacy is awful. The waiting times are very long and the staff are in no rush to serve. Too busy chatting
My old pharmacy in Hoole unfortunately closed, so I went for the next nearest
My pharmacist knows his customers individually and always goes above and beyond to help.

My pharmacy also provides Covid and flu vaccinations.
My pharmacy is in-house at G.P. so can collect medication after consultation and I complete repeat prescriptions on-line and then collect them when I receive a text from the pharmacy. There is plenty of parking. I also visit village pharmacy for none-prescription items and/or health related advice.
My pharmacy is local but not near my home so a walking distance or local bus so have them delivered. They are also not open at the weekend. Due to bus service not being frequent one bus an hour it's difficult without transport so convenient having my prescription delivered. I can access a further pharmacy out of my area but again that's not clear and means travelling on local bus even further away.
My pharmacy is not my choice, I would like one closer to my home. We've had one for decades 5 mins walk away and now it's gone. Please bring one back to Hoole.
My pharmacy was so busy that I did switch to a smaller one further away during the pandemic - when we were all standing in the cold. But they were understaffed, poorly organised and less able to get things, so I switched back. I have learnt to pick times to go, or to go early enough that I can return to pick up the filled prescription.
My prescription come in and they don't check if in Stockport until I go to collect so I always have to go back for something.
My preferred pharmacy closed. I had been using it for decades. So I had to find a new pharmacy. It would be good if a pharmacy returns there.
Near home and next to GP
Near to home
Nearby and efficient
Nearest one to my home closed and this is now the closest.
Nearest pharmacy
Nearest Pharmacy had closed so this is the next nearest Pharmacy
Nearest to home.
Nearest.
Need local pharmacy Faulkner street in Hoole!! Please grant license!!
Needs to be within walking distance for local community
Next door to my Doctors surgery
Nice staff who build relationships with people
No choice. It is the nearest one.
No choice. It's the nearest which is still a 20 minute walk. Not what I call local.
No local or accessible pharmacy had a simple product.
No other local that do blister packs
No pharmacy available in my villagers
Nope
not chosen by me, my doctor sends my prescription here
Not got a choice, that's where the Gp sends our prescriptions
Not much actual choice, in the practical sense, all the others being some distance further away.
Not much choice as loads of them have closed down by me
Nothing at all. Only that it was run professionally until it was taken over. Now its always a bad experience. I have to return two, three, four and once five times to get my script as there is always an item missing or asked to be call back later only to be told the item is still not in.
On line facility
On occasions this year my medication has been unavailable due to shortages. The Pharmacist at my local pharmacy has been excellent in trying and successfully obtaining my medication eventually.

Online delivery is far better. Most pharmacists and their assistants seem to do their best to ignore you for as long as possible whilst appearing to look busy.
Only one in the village. Would go elsewhere if I could.
Only one near me. The closest one closed
Only one within walking range since very local one closed .
Only Pharmacy that I can get to so no choice but to use them
Only pharmacy in village. Several miles to other pharmacies.
Opening hours mainly.
Opening hours, availability of medication, waiting times
opening hours, friendly staff, don't have to wait long to be served etc.
Opening times
Order prescription via nhs app Pharmacy pick it up from doctors (they collect from several doctors in the area twice a week) It's ready when I need it Great service
Other family members go there so I can get lifts
Our local pharmacy in Hoole is closed
Our local pharmacy in Hoole, Chester, closed down which removed vital services from our local community. We would greatly benefit from another locum pharmacist or pharmacy taking the space which is still sitting vacant.
Our local pharmacy is excellent. All the staff are incredibly helpful and have been able to answer my prescription queries quickly.
Parking
Parking availability
Parking due to closure of local pharmacy meaning I need to drive
Partner recently moved due to his prescription regularly not being in stock
Past experience
People who can't drive don't get a choice of pharmacy, they have to use the nearest one. And as pharmacies are commercial premises, there's no control over whether or not these close. If the council wants people to rely more on pharmacies, they have to build in a longer term, more reliable structure that isn't only based on whether the company is making enough money in that location.
Perhaps I'm not the right person to complete this survey as I now use the Pharmacy to You service. This is because I have found them very slow when administering my prescription; don't always have the prescribed medication in/or enough of it, which means I have to go back; and staff often appear preoccupied and very slow to serve customers, or even acknowledged them.
[pharmacy name] are useless [pharmacy name] are useless [pharmacy name] never had stock
[pharmacy name] is brilliant but further away from me. However, I go there because the staff are great and willing to help / go the extra mile for you to get you what you need. I am very sensitive to different brands of Levothyroxine due to the different fillers used. The nearest pharmacy to me is [pharmacy name] which I no longer use. They were always out of stock, inflexible, often the pharmacist was late to arrive in a morning on numerous occasions when I went to collect my prescription and there would be a queue waiting for the pharmacist to arrive and they are very inflexible and unhelpful
Pharmacy is closest to my home
Pharmacy near where I live

Picking up the phone once in a blue moon would help. Always have to physically go, just to request my prescription, which then again needs picking up later or next day and in 2 weeks it starts again. I'm a busy person and this is a nightmare. Give me 1 year worth of meds so i can manage my life.
Pretty pathetic alternatives
Professional and friendly staff. My village pharmacy is unprofessional and rude (in particular the pharmacist)
Proximity
proximity and accessibility without driving
Proximity to home for access, good service and knowledgeable staff.
Proximity to my home
Proximity. The next nearest pharmacy is not walking distance and is overwhelmed with new customers from the closed local pharmacy, so I am going further afield, and even that is very busy, with often long queues.
Range of services Pharmacies should get funding direct from the government not the NHS
Recently changed to [pharmacy name] from [pharmacy name] as [pharmacy name] long waits and often out of medicine needed
Reliability, prescriptions are delivered on time. They order them for me from GP and bring them. Only bugbear is that all prescriptions don't come together as they are not able to request them from GO until due. This means I get 8 different packets, sometimes 2days running! Sorting this could save NHS millions!
Reliable experienced staff, independent, very friendly
Reliable, but it's too far away. I want a reliable pharmacy much closer to home, like we used to have.
Repeat prescriptions always ready on time without having to wait or return
Routinely stocks the medications I require without having to order them and wait 24/48hrs
Since Hoole pharmacy closed I have no choice but to walk at least 30 mins. This is not what I want. I want to have a pharmacy in Hoole
Smart survey is not compatible with screen reader software and is difficult to complete without an advocate. If you wish to be inclusive and not discriminate against disabled people then you need to find a better platform such as SurveyMonkey.
Sometimes when collecting prescriptions, they will shout across the shop in front of other customers, often with people you know, they ask "what's it for? Also to confirm your name and address. I don't always want strangers or neighbours to know what my prescriptions are for. Humiliating.
Staff are always friendly and helpful
Staff are brilliant and our first port of call before the doctors
Staff are very helpful and friendly
Staff friendly and knowledgeable and they have a private room. They are a small shop with a limited stock but will order in other medications on request.
Staff friendly and knowledgeable.
Staff that become familiar with you and can give advice based on knowledge of your current medications etc
[pharmacy name] has not had someone regular for a very long time and they often turn up late and then they have to order the medication which takes 2-3 days
The chemist near me are absolutely shocking!!! Never got anything I need the customer service is awful the wait times for a prescription are awful
The choice is influenced by convenience. We don't have a convenient pharmacy nor that the Hoole pharmacy has closed so now I will go to a pharmacy in another locality or in town.

The friendliness of staff Having the items available when picking up prescription. How long I have to wait in pharmacy for pre ordered prescriptions.
The lack of any other pharmacies
The level of service is important. I changed from [pharmacy name] to [pharmacy name] s as communication with Boots was difficult.
The local pharmacists are just fabulous , helpful , knowledgeable and caring . All staff are helpful and know their regular customers . I always use this one as need to keep it open
The nearest since the one in Hoole closed down. It has parking which I need because I have to drive there. The one in Hoole I could walk to.
The old pharmacy never had script ready. When I got script it has been issued 5 days before. Told it would be 45 min wait as busy after 5 days from issue.
The one local to my home closed, so I chose the one nearest that I could use public transport to get to
The only pharmacy in my area has closed, meaning I now need to walk or (if more urgent) drive to the next closest one.
The only pharmacy locally, as a more local pharmacy has recently closed down.
The pharmacist and his staff are very knowledgeable and helpful and have been tenacious and successful in tracking down medications that have been in short supply
The pharmacist at the [pharmacy name], is absolutely excellent.
The pharmacist at Waverton is exceptional
The pharmacy are amazingly efficient and friendly.
The pharmacy based at my doctor's surgery closed -which was a real shame -the one I now use is the most convenient.
The Pharmacy didn't have own brand hayfever relief preps, so I would be more likely to go to a supermarket next time
The pharmacy I go to is very close to where I live, also when I need to get my flu jab I can go there instead of going to my GP surgery where you can be waiting in long line, with other people who could have a virus that you could catch.
The pharmacy I have used for many years has closed. It always opened a little later than other pharmacies. I work full time so this was convenient for me. I now have to travel further which means I have to use transport to get there.
The pharmacy I use is in my village and provides an excellent service. They work hard to source items that are sometimes out of stock which is essential for my diabetes management
The pharmacy I use is very helpful and go out of their way to help if they can and understand my questions
The pharmacy is good but I miss having one in my neighbourhood. Ours closed , now I have to drive to the new pharmacy .
The pharmacy is in the local supermarket, important for people of my age and with health and mobility issues that having to go out to collect prescription that the trip is not wasted.
The staff are all lovely very approachable know your name and treat you like a human being.
The staff are very friendly and helpful. The pharmacist is excellent and makes you feel very comfortable and confident in what they're doing.
The staff are very helpful and although they are very busy so the queue for service can be long I am willing to wait. When I chose this pharmacy I didn't know it closed on Saturday afternoons!
There is always a long wait for dispensing. Especially [pharmacy name] Never seems enough staff on duty

There is no longer a pharmacy in Hoole so I have had to move to a pharmacy further from my home. The services at this pharmacy are minimal and their stock isn't great.
There is only one chemist/pharmacy in our village, our G.P. practice does not dispense medicines so we do not have a choice.
They are at the end of my road but they now never have anything in so I'm moving to one further away that I need to drive to which is frustrating. [pharmacy name] has gone downhill as it used to be great
They provide vaccination services
This and previous pharmacies used there are phases when they just cannot get the prescription, sometimes touch and go to get them at all
Town centre location
Until recently they would put in the repeat prescription request and have it delivered to the pharmacy for collection. I have been told this week that they have stopped this service.
Used them years ago then went into Chester, however after becoming disabled went back to local , omg why did I ever leave ,staff are amazing , friendly , funny and nothing is to much trouble there is always a queue but if you ring before you go they usually have your prescription ready for you
Used to have option of another pharmacy. Since it closed the remaining one near to me is often very busy and doesn't always have product in.
Used to using [pharmacy name] - they closed their smaller (excellent branch) in Hoole so I decided to go to their main site in the city. Mainly use them for their excellent online service.
Usually go to the one by the Dr surgery or the one on the way home from Dr surgery
Very close to my home so I am able to visit this pharmacy without using transport.
Very efficient. Sending text when prescription ready to collect.
Very few left open so not a lot choice. So few pharmacies now that the waiting time from the pharmacy receiving prescription from doctors to notifying you that it is ready can be up to 2 weeks which in my opinion is far to long and well exceeds the published times. This makes planning for chronic ailments difficult
Very friendly and helpful service
Very friendly pharmacist and his staff are lovely
Very knowledgeable and polite. Have a great range of goods. Fully trust them and more important than ever when GP appointments are ever harder to come by.
Very knowledgeable and understanding pharmacist
Very pleasant and helpful staff
Was directed there under contraception service
We used to have a fantastic pharmacy nearby on Faulkner street, Hoole that was great for all the local community. Unfortunately this closed for some licence reasons which was a huge loss to the community and a real shame. Now we have to drive to a pharmacy which is further away and not as good as the one we had previously.
When my pharmacy closed I just went to the one I could get to
When there is a problem my pharmacy deals with it & are reliable!
within reasonable walking distance
You get a personal, friendly service.
The Pharmacy is a great asset to our community.

Q35. Please tell us anything else that has influenced your overall satisfaction.

A good community feel.

Able to have Flu and COVID jabs there which was convenient.

All good
All OK so far - may be impacted by current strike actions
Always having to give my name, medication request and address within hearing of other customers. Staff always ask if I rang up first to check my prescription was ready. Hate this question, my condition makes me barely function. I fight everyday to just do my job, if I had any energy left over at all I really would like to spend it on housework rather than calling the pharmacy to tell them I may or may not actually have the energy to get there to pick up a prescription.
Always helpful and efficient
Apart from the Parking, it had good recommendations! Also I think it's an independent pharmacy
As above - appalling service at the time I stopped using it
As above not having the things in when I go in same day/ 3 days/ a week after prescription arrives
As above. Other pharmacies have been dreadful
As already stated we have had to wait up to 2 weeks for the pharmacy to get our prescription ready for pick up. Cannot wait this long for repeat prescription medication. Completely unacceptable.
As staff we strive hard to give good customer service but pharmacy companies now prioritise profit over customer service. They do not invest sufficient staff hours to cover the range of services successfully and customer care suffers
At my former local pharmacy I was able to buy hydrogen peroxide, this new pharmacy never has it in stock
Availability of a pharmacist. A couple of times in the last 3 months, the pharmacy has been closed on weekdays because no qualified pharmacist was available to dispense medicines or give advice.
Because our local pharmacy closed the new pharmacy is always busy and you have to queue and wait. Also have to drive to it
Because they are independent and don't answer to the major chains and are not money orientated, they just show genuine care for it's patients.
Being available in a convenient location (supermarket), improved opening hours compared to my previous pharmacy and friendly, knowledgeable and interested staff (my husband has very complex health needs and some items are prescribed off label which starts a friendly enquiry which I appreciate)
Biggest issue for me is getting Drs to listen Not getting stuff from the Pharmacy
Can take a long time from prescription being ready at doctors to be ready at the pharmacy
Concern that as I get older local pharmacy even more important
Convenient to where I live.
Convenient. And have medicines available.previous pharmacy did not complete full order due to lack of medicines.
currently closed
Customer service
Customer service is very poor
Decision not to grant licence for new pharmacist on hoole high street to replace boots was terrible and to the detriment of many local tax paying residents
Despite my prescription being ordered via NHS app to be sent direct to pharmacy and me waiting usually at least 3 days from when Dr has approved it when I get to [pharmacy name] it is absolutely never ready and I always get asked if I can return the next day which is annoying and then sometimes it's still not ready and I'm asked to wait ! Regularly they don't have all of the medications I need and then I have to go back again to collect owed prescription items! The pharmacy is massively understaffed! There's always a huge queue of 6/8/10 people and then when you get to the front after waiting ages you're told sorry it's not ready ! They always ask oh have you had a text and never had one yet ever! They only have one person serving which is ridiculous given the constant queue - They close for lunch and close early - after 5:30pm you struggle to find a pharmacy open ! My grandson 19 months needed medication after a GP

appointment at 4:45pm and every chemist in Chester was either closed or didn't have the medication in stock - in the end after going to several and then phoning around we ended up having to drive to a pharmacy in Ellesmere Port !
Deterioration of services locally with the closure of our nearest pharmacy. We can work around this but it has significantly impacted on others
Dissatisfied with having to wait a minimum of 7 days to obtain a repeat prescription. After receiving a repeat prescription from our surgery it is sent away to a centralized facility who then sends the medications back to the chemist/pharmacy !!
Distance from home
Don't often use the pharmacy
Due to being unable to get access to my doctor, they have been invaluable in providing interim care and help with minor problems. They've provided help when needed, which doctors don't do because they have put so many barriers in place to see them.
Easy to walk to from home.
Reputation
Excellent customer service, every attempt made to secure correct and timely medication.
Excellent pharmacist. Goes out of his way to assist people eg vaccinations
Friendly service
Friendly staff
From what I see abroad that frees up GP surgeries so I tried it and was very happy and if there was some sort of incentive I expect more people would go to the pharmacy first
Frustration as appear to be disorganised at times, and a call to say an item is unavailable would be helpful
Frustration that can only get four weeks at a time, and that have to phone up (often taking ages to get through) to order repeat prescriptions, surely there could be online ordering?
General willingness to help when you can see how busy they are
Have always found the staff very helpful and have at times gone above and beyond what you might expect
Having the stock there and also someone who knows the system
Having to return back to pharmacy days later as prescribed items not in stock
Having to travel
Helpful, lots of staff
Helpfulness of all the staff.
[pharmacy name] is a joke ride staff one in particular thinks she owns it no hi just have u had a text no well it's not ready then even though I've been waiting over a week for medicines I need !!!
Huge queues, limited opening times. Staff are constantly under pressure with huge influx of patients after hoole pharmacy closed so services aren't efficient
I am not satisfied overall
I can lock my bike to the rail outside.
I can order my repeat medication on the NHS app on a Wednesday and it is delivered on the Friday
I cannot fault them, always helpful and friendly. They sort us out with minimal fuss
I don't have to wait in a queue for my prescription to be handed over. It is sent directly to the pharmacy and I can collect it at my convenience when it is ready.

I don't find the staff at my community pharmacy to be approachable, and on occasion I have found them to be very rude.
I dread having to get my medication but I am not able to go to a different pharmacy as they are just too far and the pavements and drop curbs are too unstable for me to get there in my wheelchair.
I have had to visit other pharmacies when away from the area; this has made me appreciate, how good mine is. I am truly grateful to them.
I have now recently moved due to rude staff with a bolshy attitude. They stopped my delivery as I was out but they never give me a day for delivery and the medication I have is unsafe for me to walk home at 84 years of age carrying.
I often buy other things when I'm collecting my medication. [pharmacy name] has a good range of products.
I order my repeat prescription using NHS app, it is sent from my gp to the pharmacy who text me . This system works really well and suits my lifestyle
I see quite a lot of other patients when I used to go to [pharmacy name] have the same issue as I did, there seems to be a constant bad feeling, long queue's some of the time the pharmacist isn't even there to give advice, people to get told to come back, just imagine if a member had to get 2 buses or transport, only to be told come back.
I take lifelong meds and need to get my prescriptions regularly.
I transferred my regular medication pres to this pharmacy as the previous one often failed to complete the prescription.
I use to have 30mg of meds but they supplied in 10s/20s to make up the 30 and was told I had to pay for 2 prescriptions... I had to come off the meds due to being unable to afford them even though they was wrong. Their decision was also supported by my GP receptionist who was also wrong So I've suffered for many months instead of being able to weaned myself off due to their lack of knowledge One excuse was he was a Welsh pharmacist but I thought it was free there so still should of been 2 charges for one item
I was given a prescription that wasn't suitable for me, so my GP prescribed something else and even though I hadn't collected half the original prescription I still had to pay for the new one. And give the original medication back. Seemed a little unfair and was a costly mistake for me.
I would not go anywhere else very helpful always do their best to help and offer advice. Parking nearby I'm actually dissatisfied current with wait times and having to go back 2-3 times for the rest of the order. Meds are cheap makes and don't work as well or tablet size has increased as a result so hard to swallow.
If advice from pharmacist often a room, but when collecting, too many questions publically about what your medication is for.
In the year plus that the [pharmacy name] has been under new owners I have never had a complete prescription filled. Every prescription needs two visits at least to get all the medicines
It can take some time before regular prescriptions are ready for collection, sometimes up to a week.
It has changed hands and it is now useless
It is always very busy in the pharmacy as the one in hoole closed
It is the only one in the geographical area
It would be good to have a local pharmacy open to replace the one that was closed this year
It's local, doesn't require transport. It's there for the community I live in
Just want a local pharmacy.
Knowing they are convenient and reliable.
Knowledge of pharmacist
Knowledge of staff

Lack of availability/shortages and the time taken from receipt of prescription to actually getting the medication.
Lack of pharmacist when I needed to pick up medication so staff were not allowed to give out prescriptions.
Like most pharmacies, they are overwhelmed with work. So often there is a long queue, and sometimes they have run out of the medication I require. We need more pharmacies!
Listening staff, always friendly and polite and apologetic if you have to wait. As 2 other local pharmacies have shut, there may well be a wait for which is understandable
Local friendly staff Very knowledgeable
Locality.
Location and Parking
Location of the pharmacy
Long waiting times and never answer the phone as pharmacy staff are overstretched trying to provide too many services to patients. I live very close to the England/Wales border so have an English GP and use a Welsh pharmacy so have to wait a minimum of one week for a paper prescription to be issued and the pharmacy to collect as the healthcare systems are not integrated. Availability of sharps bins and ability to return when full.
Long waiting times, being asked to come back to collect prescription and when do its still not ready, not having items in stock and have to return multiple times, not enough staff
LOW WAITS AND FRIENDLY KNOWLEDGABLE STAFF PRESCRIPTION READY TO PICK UP
Made to feel very welcome every time.
Many occasions prescription medicines not available. Told to return anything from 2 days to a week later. Not satisfactory when some medications are life threatening!
Medications not being available. My GP send the prescription electronically but the pharmacy doesn't have it (various things usually aren't in stock) so I have to wait days. If it's antibiotics/penicillin then it's needed straight away and because the prescription was sent electronically I can't take it elsewhere. So I now ask the GP to print it so I can physically take it in case it's not stocked so I can go elsewhere... it's such a faff!!!
Medicine not always in stock or have to wait
Medicines never in stock
Medicines unavailable when having left it a week as instructed to do only to find still out of stock - have on several occasions had to purchase via internet
my "new" pharmacy is part of a smaller chain and as such more in tune with local needs
My chemist collection is quicker than my previous chemist they turn around in 3 days old pharmacy was 7 days
My local pharmacy has closed this is the problem
My local pharmacy is regularly out of stock and will tell you to come back a few days later and your not guaranteed thus will be in stock then. My partner recently moved pharmacy as we had to call 111 for an emergency prescription as they did but have stock of his regular prescription for over a week and he had run out. Constantly told they have a problem with suppliers
My need to trust that my medications will arrive when I need them
My new pharmacy provides good service but they are struggling due to the closure of my local pharmacy this leads to big queues and having to wait for medication, we need another local pharmacy
My normal pharmacy closed - it was normally very busy and I had to wait. Now the queues at the next nearest pharmacy are even longer. We need the old pharmacy to reopen.

My pharmacy has a real problem understanding GDPR, and the staff are very indiscreet, asking or shouting out your personal information
My positive feedback is for [pharmacy name] and not my local pharmacy [pharmacy name] which is very poor and I would answer very differently if I were basing my answer of their service but I no longer use them but I am willing to put up with travelling the further distance to [pharmacy name] due to the brilliant service. I just wished there were longer opening hours on the weekend
My regular monthly prescription is sent through direct from my doctors in Frodsham and is easy to collect. The service is very efficient.
[pharmacy name] is unprofessional and rude (in particular the pharmacist)
National shortage of some medicines
Near to home - walking distance Friendly staff & ring when prescription is ready
Need to have more staff on duty and some prescription items are put of stock or waiting for them to arrive. Need to reorder prescription week plus in advance.
Never had any issues with them, used them for years
No chloromphenical eye drops for sore, painful, green discharging eyes. Tried the two local ones on the rare occasion i could get away from my business.
No local pharmacy in Hoole, Chester. The community here need one, especially those who don't have access to a car.
No need to make appointment to get advice from Pharmacist. Pharmacist and staff always helpful.
No pharmacist available to cover break times. Often the products are there but can't be released due to lack of pharmacist
Not close enough and does not provide services for me to get flu jab
Not enough add on services
Nothing else
Nothing else to add
Nothing is too much trouble for this pharmacy.
Nothing really. I go there because I have to. They don't sell much that invites me in to buy extras like Milton or wipes, or to browse for gifts, baby items etc;
Now that the GPs use EPS and I get a text message from the pharmacy, ordering and collecting prescriptions is easy
Often short staffed or locums who don't know things, it really is very hard to get prescriptions when I need them, and I'm often supplied with unconventional forms, and having to come back for instalments of one prescription; my current prescription for two months supply as taken four visits over three weeks to get parts of the prescription and I'm still ten tablets short.
Often, my husband's prescribed medication is not in stock so I have to make sure I order well in advance. On one occasion, I realised I had not reordered and needed a prescription by the next day. Because the medication was not in stock, we had to go to another pharmacy. Had my husband been unable to drive, this would have been a problem. Otherwise, generally satisfied.
Only giving half of the prescription. So you end up paying full price twice. To expensive.
Opening hours are important as I work full-time. It is handy to be able to seek advice over a weekend for minor ailments which could turn out to be more serious if left unattended until Monday. If the pharmacy wasn't in the village it would entail a much longer journey to a supermarket. My nearest large supermarket is about 8-miles away but they closed the pharmacy a number of years ago. It is also useful to be able to have vaccinations at local village pharmacy.
Opening hours are too short, and it would be great if pharmacies could prescribe antibiotic cream for infected insect bites and the like.

Opening hours of pharmacies need to be better in general. They often have empty shelves on the shop floor. They have a room to discuss private matters, however at my previous pharmacy, you could hear the conversation through it when you were more than likely waiting for a prescription.
opening hours,
Order repeat scripts from doctors but have to build in additional time for the pharmacy to obtain medications and if its processed by the GP on a Friday then you are looking at lengthier wait.
Part of our village community
People are great. Access times are not good
Pharmacies have built consulting rooms often leaving little space for queuing clients. It has been annoying when products are not available even from the supplier. Staff in some other pharmacies have been much more helpful dealing with such issues. My pharmacy has many staff working, but only one serving customers - even when things are really busy. This can be really frustrating one person's problem prescription holds everyone up. This is poor customer service - but it doesn't seem to bother the pharmacy.
Pharmacies work extremely hard they just aren't funded properly They do alot of services for free and then expected to do extra.
Pharmacist and staff always listen to you and are very understanding
Pharmacist is good. Staff are friendly. Doing their best and it shows.
Pharmacist offers good advice re medication availability
Pharmacy at local supermarket closed recently. Queues at Boots can be very long. I think the two are connected.
Pharmacy very commonly does not have all items dispensed and ready. I have waited long periods of time for my own medications/they have sent it elsewhere because they have no idea when they would have my medication ready. I sometimes collect for other people in my house and they have waited a month for some medications.
Poor friendliness, helpfulness, and politeness of staff is a big issue. Pharmacy staff can be very rude.
Quite often things aren't in stock HRT and antibiotics for whooping cough in particular. Wait time for collection is outrageous. Staff are overworked and therefore can come across as unfriendly.
Really need a pharmacy in hoole to take pressure off the [pharmacy name]
Recent experience for myself, my partner and my daughter who lives locally. They have nothing in stock and say come back, you go back and still not there. Given up
Regular pharmacist who knows me and my requirements. I don't have to give my back story every time I go.
See previous - only had branded preps which are more costly
See previous answer.
Service provided is excellent.
Shame they now close for lunch
Since Boots closed in Hoole I and very dissatisfied. We need our pharmacy back.
Since meds dispensed off sore it takes almost a week to get meds
Some of my local pharmacies have closed and I feel that the remaining pharmacies are struggling to cope with demand.

<p>Some of the staff can be abrupt and a bit rude.</p> <p>I have had to call and chase up prescriptions which should be at the pharmacy and then have been told they are not there. This happened yesterday. Called the doctors who confirmed the prescription has been sent so have to re- ring the pharmacy and tell them that they do have the prescription. This is frustrating and time consuming.</p> <p>My last but one visit the pharmacy didn't have both medications I needed so had to go to a different pharmacy. Luckily there was one literally round the corner and got the other half of the prescription.</p> <p>I went the other day, during the day and the pharmacy was randomly closed. I didn't go all the way up to the window so didn't see if there was a sign up but could see from a distance that it was shut. Had to go back the next day as that's where the prescription had been sent from the GP.</p>
<p>Some staff are extremely rude</p> <p>Having to wait for over 45 mins to collect prescription due to pharmacist being on lunch</p> <p>Extremely busy, needing to wait outside in rain at times.</p> <p>Often having to go back to collect as they are so busy.</p>
Staff at [pharmacy name] are amazing!!!! Prescriptions always ready.
Staff can be rude at times almost as if your interrupting them
Staff though extremely busy are polite and very helpful
Staff usually overworked and have too much to do. Staff on counter are friendly but not all pharmacist are so pleasant, maybe due to their workload being so great
Staff willing to assist with products i may need and tell me of alternatives
Stayed and sorted an issue with an urgent prescription
Superb pharmacy!!!
Text message service is really good & very helpful
The closeness to my home. I could access it with ease. Other chemists are too far away and are inaccessible at my age.
The pharmacy I use now is small, limited and very busy. I would not use services such as private consultations because they are too busy and small.
[pharmacy name] is not serving its local community like the previous owners did..
The pharmacy is so busy there's always a queue and can take 30 minutes to find out they don't have your prescription ready. It's very difficult.
The pharmacy itself is great, however the closure of our local one has proven difficult and inconvenient for ourselves and the community to access required medication.
The place is diabolical never have I came away from the chemist satisfied
The reason for not being fully satisfied is the length of time they take to dispense a prescription. It takes nearly a week from requesting a repeat prescription and the time it can be ready at the pharmacy. Also it is very frustrating that cannot have more than a months supply of my regular medication that I need to take for the rest of my life. It cannot be cost effective for pharmacy staff having to make up my prescription every month.
The staff are always friendly and helpful at my local pharmacy, and other than the opening times which I have mentioned before, am very satisfied with the service given there.
The staff are rushed off their feet. There is sometimes a big queue. They are too busy to text when a prescription is ready
The staff are very abrupt. My prescription is never ready despite allowing a week or more from request at the doctors until collection. The staff never answer the phone it always rings out or is picked up and put straight down and then appears to be left off the hook.
The staff are very knowledgeable and helpful

<p>The staff in [pharmacy name] are unfriendly and rude at times. On multiple occasions despite leaving the 5 working days they require for a repeat prescription before collecting items are not available and I have to return multiple times to collect them.</p> <p>The opening hours are very restricted so I have to leave work early to get there before they close. They do not open at weekends.</p> <p>I have waited over an hour for a prescription that my GP sent straight and the person who took my name and details at reception had not actioned it. I then had to wait another 30 minutes for the item which is unacceptable service.</p>
<p>The staff is not knowledgeable. Very often they don't provide relevant advice. I don't feel confident asking for minor treatment.</p> <p>They have no sense of privacy shouting my address or asking me to shout it while they are far behind the counter. I don't want everybody to know where I live.</p> <p>Very often the advice is given at the counter with people standing close behind me. I don't want them to know about my conditions</p>
<p>The staff seem overworked so the service is sometimes very slow. Also the pharmacy is very small for the number of customers that use it.</p>
<p>The staff without exception are so amazingly helpful in every way. So pleasant and patient with anyone who has a problem.</p>
<p>The survey was filled in based in my local pharmacy if I have to use but because of the wait times and unavailable items I changed to pharmacy2u which is much better.</p>
<p>The time to dispense repeat prescriptions once received, can take ages as they're fulfilled at a separate site. Can't book flu vaccinations reliably. Wholesaler ties mean they sometimes can't get medication even though there's no UK shortage.</p>
<p>There are 7000 older people in Newton & Hoole many of whom have LTCs. We need a pharmacist.</p>
<p>There are always long queues</p>
<p>There aren't enough local pharmacies, so queues are too long</p>
<p>There is a pharmacy next to my GP surgery - but too far to go unless visiting the surgery. There is nothing within walking distance</p>
<p>There is always a queue whatever time of the day you visit, often meaning you leave without collecting what you went in for.</p>
<p>They are very busy and it is a least a week wait for medicine. Don't even try to ring them.</p>
<p>They can't always get the medication I need because I am allergic to some brands of a drug I take because I had cancer so have to get that from another pharmacy and have gone without it because they couldn't get it. My cancer can come back so this drug is very important and there's only one brand I can take due to bad reaction to other brands</p>
<p>They do nothing beyond a basic service and do not achieve a decent level of that!</p>
<p>They don't process your prescription unless you go in to ask for it. Even if you wait 2 days they won't have done it. Then they never have the medication and have to order it so you always end up having to go twice.</p>
<p>They never pick up the phone and have no system for waiting on line. The phone just cuts off. And they don't take feedback on this. Totally understaffed I guess. Which is ridiculous knowing how easily they could get more efficient by actually having prescriptions ready automatically. Can't be hard but GPs and commissioners are much to blame. They force pharmacies to dispatch 1 month at the time, even for life long non toxic medicines. It wastes so much resource and frustrates the life out of me</p>
<p>They now do routine flu and covid jabs.</p>
<p>They obviously cannot cope with the volume of prescriptions now Faulkner St pharmacy has closed. Never have prescription ready, or don't have meds available causing me to regularly return a few days later. Can take up to 10 days to get from ordering prescriptions from GP to getting dispensed.</p>

Tried to seek advice for my children as advised by GP receptionist on several occasions however after waiting considerable times the pharmacist then advises they can't help due to the age of my child.
Useful parking in supermarket
Very easy to get to, close to my home
Very little to buy at the pharmacy you have to go to the supermarket isle and make your own decision
Waiting times for queuing, prescriptions and being able to speak to someone on the phone
We changed mums prescription over to [pharmacy name] from [pharmacy name] as mum had 10 different medicines to take and they never had them in but [pharmacy name] always had and they delivered to mum in [pharmacy name] mum couldn't use the dispenser in the doctors as she lived within 2 miles of the surgery
We don't have one in Hoole to comment on.
We had a local pharmacy in Hoole which for all its shortcomings was convenient
We need a pharmacy back on Faulkner street.
We used to have a good sized pharmacy, but this was shut in favour of a small kiosk at the doctor's. It does not have the range of goods.
When my late husband was ill, the pharmacist spent time with him in a private room and kindly disposed of unused medication later. He was very kind to me.
When there has been issues with my prescription they try to offer a solution especially if I have got too low on my medicine. I have witnessed them do the same for other customers. Last pharmacy let me down when I was low on prescription, they had failed to see that gp had not automatically sent over repeat prescription and didn't offer any emergency tablets whilst the issue was resolved, ended up having to go through 111 service and paying a lot for just a few days tablets to tide me over.
Wherever possible we should all use small businesses. My pharmacy has a strong & loyal client-base comprising local residents.
Whether prescription items are in stock
With [pharmacy name] they said they wouldn't be able to get my Creon for months. I had to ring around to try to source a supply and would often get just a few days supply. With Evermore they find my Creon for me which is a great relief.
With the increase in footfall since the Hoole pharmacy closed there is always a queue but the staff continue to be helpful, discrete, and knowledgeable even under pressure.
Wonderful and understanding pharmacist
You can't buy over the counter necessities like plasters cough medicine ect , very small choice of products on offer and there are no opening times displayed at all so recently attending the pharmacy they were closed for a lunch break for one hour and we had wasted the journey. We waited 3 weeks for our eye drops after running out and they did not have them available. No concern shown and no contact of when they would/had arrived. I attended the pharmacy 5 times and called 50 times with no answer at all. I asked why they didn't pick up the phone and they said they were busy which was not the case in our [pharmacy name]. The contents in the contents of the bag because numbers were wrong and parts were missing.

Q36. How would you describe your experience of your local pharmacy and their services over the last 12 months? Please explain in the box below.

A keenness to provide a service under difficult financial constraints due to the current contract arrangements which put a severe strain on the economics of managing a pharmacy business, affecting what drugs they can dispense or sell. If the market price of a drug is more than NHS pay the pharmacy then matters will continue to deteriorate.

A local pharmacy would be better as it would offer a more personalised service

Absolutely appalling compared to previous owners. Huge queues, long waiting times and prescriptions never filled completely. Always requires two visit minimum to get all your medicines.
Absolutely brilliant
Absolutely fantastic & faultless
Absolutely fantastic at [pharmacy name] in kingsway
Absolutely shocking, every prescription I have been in with, they do not have it in stock and have to travel to at least 2-4 other chemists before I can get hold of it (all different prescriptions). Had to buy one of the prescriptions [pharmacy name] supposedly couldn't get it in (I have a prescription exemption).
Abysmal.
After text message to say prescription is ready, it never is when I get there and I still have to wait. They constantly open packets and then tell me that they do not have enough of my medicine and give me a note to call back for the one's that they owe me. This happens every time and not good at all.
Again exceptional.
Already stated above in Q35.
Already stated can't fault the local pharmacy I use. Very friendly and helpful
Although I am satisfied with the pharmacy that I use, I am frustrated that I now have to use my car as the pharmacy within walking distance of my home has closed. I am frequently delayed in traffic congestion and the opening hours of the pharmacy can make it difficult for me to co-ordinate with my working hours
Always deliver my meds on time and complete, very good service
Always friendly helpful service
Always have my sons prescription ready to collect. I was able to get my flu and covid jab there this year which was more convenient for me.
Always helpful
Always helpful and friendly.
Always helpful, very convenient and staff friendly
Always respected Pharmacy advice because I know they have several years training They are a useful port of call if I want advice or input
Always very helpful. Never had any problems
Always willing to help with flu and Covid vaccinations. Very well organised with a flu jab offered when I went for my Covid jab.
Always willing to offer advice & perfectly satisfied with their assistance & advice
Amazing
Answered above
Apart from queues which sometimes is the case, it's usually OK.
Appalling
To many customers needing to use their service. Reduced opening hours to what were. One particular rude staff member
As above. They are mad busy!
As mentioned in the last answer, the service is one of the best I have experienced. Always so pleasant and helpful. Ten out of ten from me,
As my local pharmacy a small boots store was closed down I'm having to travel 15-20 minute drive to collect my prescription
As needed - excellent and efficient.

Atrocious - mistake after mistake - several serious - even gave me some one else's medication on one occasion - !!!!!
Average
Average but need longer opening hours
Awful
Awful
Awful and getting worse at each visit
Awful, the local pharmacy does not meet the needs of the local community, it is only accessible if you don't work full time, if you work full time you have to leave work early to pick up prescriptions which is not always an option. The staff are rude. They often don't have items Long waits for dispensing ie over an hour for 1 item
Awful. It feels like an your are an inconvenience to the staff just because you want to collect your prescription. I always leave wondering what the issues are in the pharmacy that cause such a poor unfriendly inefficient service. Are all [pharmacy name] pharmacies like this?
Awful
Awful. No privacy and very long queues. Only make up prescription when you come to collect. Often not all meds available.....if they made up meds when prescription received , missing meds . could be ordered in !! Very, very poor. I have changed to much better one
Bad as it closed
Bad. Poor service, unavailable items, lengthy queues. Close too early and there are not enough other options to go anywhere else. There should be more 24 hour chemists available. Might make sense to have those at the hospital?
Basically ok, but they are very busy and I have to plan my repeat prescription ordering because they ask for a weeks notice.
Been really good. Could do with not closing for lunch as they have a lot of staff
Better now but have been awful as cover / Locum was hit and miss New pharmacist there now, she is great Just hours are restricted
[pharmacy name] was always excellent and local to home, shopping etc. Nearest local pharmacy is 20 min walk away.
Both my in-house pharmacy and village one are very good. However, the in-house one struggles to recruit and is very short staffed, the queues can be very long and it is stressful for the pharmacy staff. Both in-house pharmacy and [pharmacy name] are often unable to source certain drugs. This means you have to ring around all local pharmacies until you find one that can fulfil your prescription and then drive over there.
Brilliant service, very helpful
Brilliant!
Brilliant, I cannot fault them.
Can take a long time from prescription being ready at doctors to be ready at the pharmacy
[pharmacy name] are Welcoming Understanding Helpful And go out of there way to help get any problems solved

Clean, friendly staff, although it takes one week to obtain medication I fully understand and plan accordingly
Closing randomly and not giving full prescriptions so extra cost on customers.
Current one has been ok so far Previous Pharmacy were dreadful. Missed items, untidy/dirty shop, closed when they should be open, cancelling flu jab appts with no warning or apology. Used to have a pharmacy in Sainsburys which was great but they got rid of it.
Decision not to grant licence for new pharmacist on hoole high street to replace boots was terrible and to the detriment of many local tax paying residents
Diabolical
Dire. Empty shelves as medicines not available. Waiting times to collect prescriptions. Very poor service.
Disappointed that Hoole pharmacy closed and they wont let a new pharmacist take over
Disappointed that our local pharmacy has recently closed down, and an application for a new pharmacy has been rejected
Disappointed to see local pharmacy in Hoole shut. Have had to make other arrangements as a result
Disappointing that my local pharmacy in Hoole had closed. I'm lucky that I live on the outskirts of have another nearby but others more central to Hoole don't.
Disappointing. On multiple occasions, my prescription hasn't been received and it's a back and forth between myself and my GPs (if it's open!) Paper prescriptions should not be a thing anymore (Manchester uses the NHS spine e-prescriptions) and there's no flexibility around collection from different pharmacies because of this. The opening hours are ridiculous. The local pharmacies on the English side of Saltney are shut on weekends and evenings. The staff aren't terribly friendly - always seem harassed by having more than one person getting a prescription at a time. It's just very inefficient. Services provided are poor. Contraception especially should be solely done by the pharmacy.
Disgraceful due to Saturday situation
Don't have required items. Wait time far too long - insufficient dispensing and counter staff
Easy and pleasant experience
Everything I've ordered always ready for me upon collection.
Excellent
Excellent
Excellent
Excellent
Excellent
Excellent
EXCELLENT
Excellent
Excellent
Excellent
Excellent
Excellent
Excellent
Excellent
Excellent
Excellent
Excellent
Excellent
Excellent
Excellent and prompt service by knowledgeable and helpful staff

Excellent as usual
Excellent friendly service
Excellent in all areas
excellent on the whole. Saturday morning opening could be helpful.
Excellent ordering and collecting and dispensing my repeat prescription request.
Excellent prescriptions always on time and delivered by very nice agent
Excellent service
Excellent service
Excellent service
Excellent service always dealt with promptly by friendly knowledgeable staff
Excellent service friendly knowledgeable staff.
Excellent service from Kingsley pharmacy
Excellent service with known pharmacists and staff who know you and greet you by name. They are all very helpful despite having extra workloads due to the closure of the next nearest pharmacy. Pharmacies provide a crucial role in a community.
Excellent service. Staff friendly and knowledgeable. Good opening hours. Somewhere private to discuss matter.
Excellent since it became independent with new owner early this year.
Excellent text me when to collect my prescription!
Excellent [pharmacy name]
Excellent!
Excellent!
Excellent, always been given good advice and/or appropriate medicine
Excellent, always friendly and really kind with children. Very patient and always aim to support.
Excellent, friendly and welcoming
Excellent, friendly helpful, available
Excellent, they always do their best to help, are always friendly and professional. Can't ask for better. A real asset to Elton.
Excellent.
Excellent.
Excellent. I have also received covid and flu vaccinations there.
Excellent. Knowledgeable and polite. Always happy to help and trustworthy. Have everything I need.
Excellent. Good communication. Knowledgeable staff and every effort made to obtain medication.
Excellent. If when my meds have been changed and I have had any problems, they have automatically liaised with the surgery and sorted it out for me. They go above and beyond.
Excellent. Staff are knowledgeable and the pharmacist was thorough when checking my 2 year old for ear infection
Excellent. They deliver all our prescriptions promptly and for free and are always helpful.
Excellent: they are efficient, accurate, helpful and have good staff levels and well organized
Exceptional.
exceptionally good service from a small [pharmacy name]
Exemplary service , helpful friendly staff.. always offer advice for myself and granddaughters
Experience has been generally good, no major complaints
Fabulous service at [pharmacy name]
Dreadful service at [pharmacy name] and will never use them again

Fairly poor, every time visit to collect repeat prescriptively are never ready to collect despite over 7 days Since Gp authorised, leading to multiple visits and delays. Tablets never in stock despite on repeat and likely to remain on them for life?
Fairly satisfied, if I was having to drive a car to collect it would be difficult to find parking on the high street. And many villagers have complained recently of the wait times for regular prescriptions and sometimes prescriptions not being entirely fulfilled (missing meds).
Fearn's are exceptional. They are the model for all pharmacists.
Feel they have a very difficult task, are extremely busy and cramped into a small space in the supermarket. It is clear from the signs and information on display that they get lots of 'grief' from customers. they are close to the hospital and out of hours GP- but why people cant use the hospital pharmacy to collect emergency prescriptions is a mystery!!
Find always nice staff
Fine.
For the last two years [pharmacy name] has been a shambles. They don't dispense prescriptions until you visit and most times they do not have the required medicine in and have to order it so you end up visiting the pharmacy on several occasions. After two years since [pharmacy name] took over it has been a total disaster. Several neighbours have moved chemists. It really needs looking into.
Friendly and efficient offer helpful, advice and vaccination
Friendly and experienced, happy to help
Friendly and helpful. Answered queries well. Quick to provide medicines.
Friendly staff, able to quickly and accurately advise me and my family members.
Frustrating. Love the opening times and being able to go when it's empty but fed up of being told I'll still have to wait at least 30mins for my prescription to be made up (when there is no one else there). It's often ready in less than 15mins so why make me feel bad.
Generally ok but many users sometimes leading to waiting times which can be 20+ mins also this gives rise to increases exposure to other customers transmitting colds covid etc etc etc
Generally acceptable
Generally good as they let you know by text when prescriptions are ready the majority of the time. I like the fact that they have own brand medications which are cheaper. I have been witness to some people becoming frustrated and angry with staff for various reasons but nothing ever escalated. Staff are able to manage customers and de-escalate situations. Usually the pharmacy is open at the times advertised and they are well staffed. Staff acknowledge you fairly quickly and don't leave you waiting around.
Generally very good. I have had medication problems, but that's not the pharmacy's fault.
Generally very good. Staff are approachable and friendly and very knowledgeable. Only issue has been when it is unable to open during normal hours because of the unavailability of a qualified pharmacist, as above. There is an occasional wait to be served or to speak to someone and prices are higher for some standard OTC medications, but the convenience of having the pharmacy within walking distance goes some way to offset this (no parking/ transport costs).
Generally very good. They are always busy and sometimes this can cause queues.
Good
Good
GOOD
Good
Good

Good
Good
Good
Good
Good
Good - very helpful when needed
Good but as above they are always busy
Good but have had issues of medication not being in stock and a wait. Some items have been unavailable (national issues).
Good but I would prefer to use one nearer to home
Good but often short staffed
Good in the main. It's not their fault they're under staffed.
Good on the days that I could fit the hrs right to access
Good overall but sometimes preparing a new prescription can take longer than it should due to poor supply
Good overall service, could be better opening times
Good pharmacy but need a more local one
Good service , friendly staff
Good, have received helpful advice on numerous occasions. usually not too long a wait for prescription which is helped by there text messaging service, wish this option was used at another chemist I use for someone else
Good. Pharmacy provides services I need in an easily accessible location. Makes getting vaccinations etc easy.
Good. The service has improved over the past 3 months. Staffing seems better and more organised
Good. There has been medication stock outs which was alarming for myself. My pharmacist was very helpful and managed to secure my medication eventually. This must be stressful for the staff unable to obtain the medications when there are stock outs as well as patients.
Great
Great
Great communication, knowledge a day pleasant staff x
Great fit advice? Prescriptions and vaccinations
Great service, friendly staff and very helpful.
Great service, have my flu jab at chemist, ask advice, collect prescriptions and opening hours are very important to me and they text me when prescription is ready.
Great, completely satisfied
Great, just wish opening hours were longer.
Had to wait for medication several times, called back three times, waited a week, Also had a urine infection, the doctor prescribed three different antibiotics before the chemist could provide, due to not being in stock. Ten days before I started treatment
[pharmacy name] are excellent helpful and informative all pharmacists should be like this.
Has improved immensely was awful for a while.
Have had to wait depending on time of day. Also sometimes cannot give out repeat prescription if pharmacist is not on premises even though meds have been dispensed. This has necessitated returning and having to wait again.
Haven't been in
Haven't used for over 12 months due to not being able to collect prescription at later times.
haven't been able to access any services

Helpful but often don't have what you need in stock.
Helpful, but sometimes I gave to queue a long time. The text service telling me when a prescription is ready is good.
Helpful, knowledgeable, friendly, medication always ready for repeats and short wait time for any extra prescriptions
Helpful. Often have no stock of prescribed medication
Highly satisfied. Best in chester
[pharmacy name] is a great facility with a very knowledgeable Pharmacist.
[pharmacy name] needs a complete review of hours staffing and staff training
[pharmacy name] is good but the waiting times and queues to collect prescriptions can be over 10 minutes. There used to be two Pharmacies but one closed. One Pharmacy is not enough for the size of the estate.
I am dissatisfied with my local pharmacy and now travel across town to pick up my prescriptions
I am extremely satisfied with my local pharmacy. They are knowledgeable and efficient as well as being friendly to the customers.
I don't like having to explain the medication I have gone in for and my address in front of every customer in the shop. They can be quite dismissive when they are not able to get my child's medication and I leave feeling frustrated. It's rarely an enjoyable experience.
I don't use my closest pharmacy due to poor stock and service, I use a pharmacy 3 miles away to get what I need
i dont use my local pharmacy even though its 2 mins away as i cant rely on them
I feel sorry for pharmacy staff they are doing their best with added responsibility of pharmacy first...
I had to change from my local pharmacy because you closed my local pharmacy. The new one is too far away
I have been extremely unwell and used my pharmacy every week. [pharmacy name] pharmacy is fab.
I have been very happy with the service that I have received from my local pharmacy over the last 12 months because of all of the above.
I have changed pharmacies as the one nearest my Drs surgery was really poor. Queues out of the door, losing medication
I have had to go back and forth to my GP to get my tablets on repeat so they have them in stock otherwise I have to wait a long time to get them
I have had very good very professional service
I have never had a problem, always helpful and friendly staff to welcome you and give advice if needed
I have no local experience since it was closed down; the local pharmacy was excellent, the city centre boots is rather more a supermarket with a pharmacy attached.
I have only been with my current pharmacy for 4 months. Until this weekend I have been very satisfied with them, although I am partly responsible I should have asked for the Creon sooner. My previous experience with [pharmacy name], being left without medication, being unable to contact them, having to source my own medications and the wasteful excess of medications they wouldn't stop delivering was a stressful nightmare. They are currently still charging me £10 per month for blister packs but haven't supplied them for 5 months. I've tried to cancel payment but apparently it has to be done by them.
I haven't got a local pharmacy.
I like my pharmacy it is very good at trying to get meds for me sometimes I have to wait a while to be served but I think that due to been short of staff
I no longer have a local pharmacy and have to go into town. I regularly used the pharmacy in my local shopping area but this was closed some time ago. I would greatly appreciate the option of being able to go to a local pharmacy again.

I no longer have a local pharmacy in Hoole I have to go into the city by bus
I preferred having the one within walking distance but the service is better and quicker for my repeat prescriptions. I would prefer a text to say it's been processed as I have made a pointless journey only to find prescription not ready
I receive text messages promptly when my medication is ready to collect. I have had no problems at my pharmacist therefore I have no complaints as they currently are doing a good job for me.
I stopped using this pharmacy after a bad experience when one of the staff members was criticising me (very loudly that I could hear) over having a medicine prescribed to my daughter that I could buy over the counter. At the time money was tight and I could not afford to do this the entire pharmacy heard her and I was so embarrassed
I use an online service to order repeat prescriptions which are then sent to the pharmacy. I allow sufficient time from ordering to collection to ensure that the prescription has been fulfilled. This reduces the waiting time on pickup.
I use it to collect medication ordered online from doctor. I usually allow 2-3 days. Also to purchase non-prescription products.
I would not say the [pharmacy name] is local! It was much more convenient to go to the pharmacy in Hoole. I know alot of older people, people with mobility issues and people with young children who find it much more difficult to access a Pharmacy now.
I'm not keen on pharmacy offering blood pressure tests, fitting monitor etc as it wasn't done properly and had to go to GP. Pharmacy gets paid for each reading they do and for each monitor they fit as well as medication
I'm very disappointed that the pharmacy within walking distance has closed - especially since permission has been refused for another company who want to provide the service
I've accessed help and advice on four occasions in relation to a dog bite and a cough and it's been spot on.
I've found online services much better for my needs
I've used our local pharmacy several times for medical advice and he is so knowledgeable and friendly and goes out of his way to help.
It does what it says on the sign
It has been horrendous because the community pharmacy has been closed and not replaced. The ICB are concerned with costs and not customers and do nothing about prioritising services for those with a genuine disability and identified need. Consequently vulnerable people either go without medications or have to go to extreme lengths in order to get them often at physical, mental and financial cost to themselves.
It has declined considerably, always queues and waiting times have increased. They are always out of stock of medications, not just mine but of lots of other customers also
It has my prescription ready when I need it , I would not describe it as a local pharmacy as I have to make a 30 minute walk (I'm a mostly fit and healthy 43 year old).
It does not carry hydrogen peroxide / menthol crystals like my 'local' pharmacy did before it was closed
It is a bit hit and miss. Sometimes it takes a while for my medication to come and sometimes they can't get it at all.
It is a friendly efficient pharmacy and they are very helpful
It is busy and always queues, the one in hoole has closed so my partner can't walk and collect on his way to work.
It is okay. You have to always queue to collect your prescription.
It is our local pharmacy in Helsby and they have always been brilliant. Good opening hours, knowledgeable staff, helpful pharmacists, flu & covid injections available. They serve the local community to the highest standards.

It is the worst it has ever been, it was bought recently and the service suffered as a result of the change which reflects badly on the new owners. Shelves were 1/2 empty and whereas before prescriptions were made up and ready for you all of sudden you had to go in and wait.
It looks as though the pharmacy is in the process of closing down
It went from an OK pharmacy to drowning since Hoole pharmacy closed
It would be helpful if there was a local pharmacy open late at night. Recently we have had to travel 10+ miles to obtain urgent medication due to all local pharmacies being closed
It's fine, it's just too far away as they closed ours and have refused the people that want to open a new one,
It's like walking into a prison. Nobody is in attendance when you walk through the door [pharmacy name]. It looks like a clinic for cosmetics because it is / they do not want the pharmacy. They do cosmetic procedures in rooms at the pharmacy and the manager has shown his desire to make profits off his cosmetic services by decorating the outside and inside of the pharmacy like a modern beauty clinic / uninviting and certainly not somewhere for elderly or children, Hence they do not have opening times displayed or the word pharmacy anywhere inside or outside. There are also expensive cosmetic treatments displayed on shelves and on the desk which is off putting and unusual to local customers. This is not a local community pharmacy because the owners are from liverpool and want to get rid of the pharmacy. Finally they were packing the contents of the customers bags as they came in so we had to wait and queue outside whilst each person had their pills etc made there and then and not prepared earlier.
It's not my LOCAL pharmacy. That one closed - I'd like another to replace it.
It's ok because there is no other choice near enough. It's not the best as they give misinformation and don't explain what they are doing with your data. I do feel they are loosing my trust as they just want to make money.
It's okay, though pharmacist has never acknowledged me even though I visit at least twice a month for regularly scripts for 3 family members
It's been mostly good apart from delays caused between GP approval and dispensing by their dispensing hub. Disappointing not to be able to book vaccinations there.
It's closed
It's fair to be honest, although it could improve.
It's not a great experience as it's difficult for me personally due to forced location changes
It's not local and it has limited supplies. I had to wait weeks for some prescriptions. They, like many pharmacies, are far too stretched to offer the services the NHS keep advertising.
It's very busy since the other one closed. Sometimes difficult to get to ask questions or advice as you don't want to hold others up.
I've had occasion to consult my local pharmacy on a number of worrying issues. I've found them informative and clear in helping me and so reassuring. So very grateful.
Lack of clarity about batch prescriptions , could be advertised more . But overall please with the prescription service .
Listened, given advice, been v helpful over a problem, pharmacist on duty will always come out if you need them so long as you will wait.
Local one awful, rude staff and never have the medication, the one I use wonderful
Local opening times are limited for those that work full time. There does not appear to be any advice or consultation service and I don't think they have extended services
Long queues are a pain, but there is nowhere else to go
Long waits, not made up when you've left it couple days after approval, pharmacist regularly not arriving til mid morning as commuting (leave home earlier!)

Losing the Hoole pharmacy has impacted my experience. Parking at my new pharmacy is charged so I tend to walk but this takes much longer than previously. I have two small children. The products I use are often out of stock so I have to go elsewhere. My son's medication is rarely available there. The other things to purchase are such a small selection.
Love the Pharmacy I use. Staff very friendly caring and knowledgeable. Would not go anywhere else
Medication is available , but counter staff are NOT discrete at ALL.
Mixed, can be long wait times, medication not available, poor communication
Mixed.
mostly good apart from twice when they have failed to give me my complete prescription despite texting that it was ready for collection
Mostly good experience, but odd time when stock was not available it was annoying having to make an extra journey to collect on another day.
Mostly positive but this is a local, one man pharmacy who is incredibly busy most of the time but is always there to help in as many ways he can or will refer on
My current pharmacy for my regular medication has been excellent.
My experience has been very positive and I feel they provide a personal service to regular customers to ensure they can fulfil prescriptions
My local pharmacy has done its best to provide my regular prescription medication. I would suffer if it closed & I had to go elsewhere. I would have to ask someone to go there for me.
My local pharmacy in Hoole has closed
My local pharmacy is ok but I feel as they are the only pharmacy in my village they have no competition if they had they might up their game
My local pharmacy staff have I feel struggled. The electronic prescriptions now go to a " hub" not directly to them. This has resulted in an 8 day wait for monthly prescriptions. I have seen and heard customers being quite rude to the staff because their prescriptions aren't ready. It's not the staff's fault but they bear the brunt of this, not the "owners" I love the friendly staff there and hopefully they are shown appreciation by the owners but I don't think they are.
My pharmacy is brilliant now it's no longer [pharmacy name] Prescription is always ready to be collected.
My pharmacy is not local, I walk to Boots in town
My prescription is ordered online through the NHS app, sent through to pharmacist and suitable day for delivery to me arranged. All very quick and within a few days
Need more staff and more stock of prescription items. Pharmacy could do with refresh and shelf stock looks a bit run down
Never had a problem, easy to use and the staff are always pleasant and helpful
Never had an issue with the service.
No issues at all, very helpful pharmacist & his staff
No problem in last 12 months. Occasionally they haven't had one of my medications, but they always get it in the end.
No problems
Non existent. Local pharmacy in the shopping area has closed down
Not as good as a nearer pharmacy that closed eg. Notifying me when my prescription is ready to collect.
Not as good as it was No text to say your prescriptions ready so sometimes having to return
Not as good when Boots was on Faulkner street. We need a more local pharmacy, which is close to GP and is open on Saturday, although that is not as important if is closer to home.
Not bad, but they are very limited. Not a replacement for even a nurses visit, never mind a GP.
Not enough pharmacies, too long to wait

Not enough staff to service the queue with pharmacy staff in the back seemingly not doing an awful lot.
Not great. The staff are very nice but it doesn't help with the very bad quality of care received. Very long waits for prescriptions, they don't offer any vaccination services eg COVID or Flu jabs.
Not happy. Regularly have to go back for an item which was out of stock. Waiting time to collect medication. As always seem to be short staffed.
Not helpful , they tell you one thing the surgery tells you another - who do you believe
Not very friendly, always busy, don't have the medications in you need for prescriptions, opening hours aren't suitable for people who work unless you can wait til a Saturday morning and spent ages in there with everyone else. Also tends to be lots of rubbish piled up by the door, dirty floors, and smells strongly of disinfectant.
Nothing to complain about - usually fine
Obviously under pressure. The move to not ordering stock until get a prescription for common drugs is the biggest issue for me. Having worked in pharmacy for 35 years cannot see the logic in it.
Occasionally my wife's prescription hasn't been complete and I have had to return, sometime twice.
Occasionally there has been a delay in the prescription being sent over from the surgery (I order online) but, in the main, it's ok and I generally get a text to tell me it's ready.
Offer excellent advice and can avoid people going to GP or even A&E. It could become a first point of call for support with a health issue if they are open more.
OK
Ok
Ok when delivered my prescription if I do have any issues I will telephone them.
OK, apart from queues, and repeat prescriptions not available for seven days.
Ok, sometimes very busy, very small range of non prescription products
on the whole not too bad but there is nearly always quite a wait for prescription to be filled and wait time when collecting unless you have phoned previously
On the whole pretty good except for trying to get antibiotics prescribed as I nearly wasn't given them as I didn't meet the criteria The criteria were a list of questions on a computer It was obvious I had a severe throat infection I changed my answer to one question and got the antibiotics!!
Only used in last couple of months since changing from Asda who were not good
Opened late as no staff to work till only locum. Staff working in back on go in back and don't comeback out is frustrating. Why when it is a item I have every month do they not have it in stock?
Order prescription online wait to go and collect, not made up when u go to collect. Queue to be told then queue to wait for prescription to be made up there are parking charges and it is so frustrating and a waste of my time ordering ahead online. This isn't working ordering online you still end up spending as much time waiting as if you went and handed a paper prescription in by hand.
Other than collecting my prescription I have not had any need to use the pharmacy so I can't comment.
Our local pharmacy is closed we need new owners to be granted a licence
Our local pharmacy in hoole has closed. This means I have to travel further to a pharmacy. Hoole really needs a local pharmacy, a lot of people relied on it
Our local pharmacy in Hoole was closed down and had to look for a new pharmacy we really need one back in Hoole
Our local pharmacy[pharmacy name] is first class, we are so fortunate to have them.

Overall good service for me, I get a repeat prescription every few months. I have witnessed lots of elderly people who clearly struggle to get to the pharmacy not get their full prescription and be told to come back into the shop a few days later. So the pharmacy do struggle with the doctors surgery not providing a consistent service to patients and this has a knock on effect to the pharmacy. Something needs to be done to improve this for elderly people locally.
Pharmacist staff are leaving in droves those remaining do their best but it is not enough for all customers
[pharmacy name] excellent but have to access by car as not local. [pharmacy name] adequate and convenient if combined with a trip into town on foot/car/bus
Pharmacy waiting times have increased as pharmacy staff are trying to provide even more services and patients can't access NHS GP or Dentist
Pleasant and efficient.
Pleasing
Poor
Poor
Poor
Poor Always have to order basic medication One prescription end up going back multiple times Always disorganised
Poor at best - they have picked up a huge extra amount of people needing a pharmacy due to the Boots in Hoole closing and frankly just can't cope ! The shop is not really big enough and they are totally understaffed!
Poor customer service, friendliness of staff
Poor due to lack of pharmacists
Poor patient experience - long queues, lack of stock
Poor service re prescriptions but good otherwise.
Poor, we need our local pharmacy back in Hoole which is convenient for local people to get medical advice and prescriptions
Poor. Always multiple visits and queues.
Poor. Poor friendliness, helpfulness, and politeness of staff is a big issue. Pharmacy staff can be very rude.
Poor. Was great but now very very poor due to temps
Pretty good but could do better with add on services
Pretty good- see above
Pretty good, it's been changeable with a higher staff turnover but the core staff are still there giving excellent service and continuing to build of fab knowledge and patient relationships.
Pretty poor. I allow a week from requesting prescription online with my gp until I go to the chemist. Then I have to wait for prescription to be made up or even told they need to order it. The staff complain they are being told to do 6000 more items whilst cutting their hours.
Prompt service, friendly approachable always have my prescription ready and medications always available. Offered advice about health issues and signposted. Offered vaccinations. Happy staff means happy customers only downfall is they don't open on a weekend but they do need time off.
Quite good could do with pharmacist offering more diagnosis
Quite good given the strain they are under

Quite poor. Long waiting time for medication, no privacy, often mistakes, issues with notifications about the medication ready to collect
Rude staff. After 8 years of at least monthly visits, with a friendly and polite demeanour on my part, there was no recognition of me being a regular customer. When I asked if the controlled drug could be made up and ready with the rest of my prescription, and pointing out that when I had to use [pharmacy name] to get it once - where it was ready and waiting for me - the pharmacist told me; "Well. You had better go to [pharmacy name], then". I have also been left waiting at the counter, on more than one occasion, whilst members of staff had continued chatting with their friends or district nurses on matters that were not related to their work.
Satisfactory
Satisfactory but I'm fortunate to not have to use it often
Satisfactory when needed which has only been on a couple of occasions
Satisfactory, I was able to get my flu jab at my normal one but not my covid jab, lunch time closures can be difficult to work around during the working week
See above box
See above.
See answer to q33
Service has deteriorated. Staff have an increased workload and it's taking much longer to get medication.
Service has dropped massively, wait times are days and further wait for those not in stock so taking 2-3 trips each month. Meds are cheaper makes and large tablet size making it difficult to swallow and they don't work as well somehow. Pharmacy randomly closed when they have staff problems. No problem with the actual staff, but they aren't very efficient and doubling their own workload for meds not available. Wait times are exceptionally long.
Service has gone downhill. Now have to wait 7 days for a prescription, always very busy when queuing and they don't answer the phone.
Service very good, but I have to travel as no pharmacy available in my village
Shocking it used to be a community chemist now it is a hub of rude staff no regular pharmacist and they choose to open and close when they feel like. They discuss all your details on the shop floor and have very little other over the counter medicines in.
Shocking! They are rude never answer the phone never have anything in just to be see your talking 20 min wait then another 20 or more for prescription to be made up that's if they have it
Short waiting time outside of peak hours but could be closer to home and don't offer flu jabs
Since moving from [pharmacy name] Boots which I could manage my prescriptions on the app, they have shown me how to use the nhs app to order my prescriptions, they have explained how to book appointments and they have chased up problems with my GPs management of repeat prescriptions. But prior to that I was extremely happy with the service of the boots pharmacy in Hoole and I would rather not have to walk so far/arrange for a lift to [pharmacy name].
Since my local pharmacy closed down I use a variety of pharmacies depending on the service needed. I miss the convenience of my local pharmacy however no problem with services offered at the others.
Since the closure of a couple of local pharmacy my current one has become extremely busy. There now are often long queues and waiting times.
Slow and it's always a longer wait than they say
Slow service , always a wait . Poor opening hours
So many people use it as one in Hoole shut so waiting time to get prescription is delayed
Staff and facilities good but feel smaller local facility would provide a more personalised service
Staff are generally polite and helpful and the Pharmacist has rung a couple of times to check how my husband was getting on with his medication. I think they could do with larger premises though as it is often busy and stock is piled around

Staff don't know what they are doing, they talk to other people whilst serving you
Super friendly staff Very helpful and make you feel welcome Pleasure to go in their chemist
Supportive, understanding, and explain issues clearly
Supportive, well organised good electronic link to G.P. practice for prescriptions
Terrible they need to sort out their supplier as regularly do not have stock and can wait up to a week to get regular prescription
Terrible, they always get it wrong
Terrible, waiting time for medicine 30 minutes when the prescription was sent 4 days in advance is too long. No privacy as well
The items I have on repeat prescription are never in stock or only partially in stock and every time I have to go back in 3 days to get my prescription fulfilled. It's very frustrating indeed as I work full-time.
The local pharmacy I use is by far the best I have met. They are helpful and quickly and easily accommodate changes Drs make without blame or grumpiness.
The old pharmacy in Hoole was great. Very convenient and especially so for the elderly/less abled in our community. It was a great service and is very much missed. We need a replacement service.
The one in the doctors surgery fantastic [pharmacy name] SHOCKING very bad I've got friends and family that now use [pharmacy name] as at [pharmacy name] 9 times out of ten they don't have or can't get that make so it's back to the doctors for another prescription with a make they can get I couldn't get my naproxen so I asked for co-codamol they had none there is nothing on the shelf's it's shockingly bad
The pharmacy has had to cope with a huge increase in customers since the pharmacy in the next district closed , so bringing 2 communities customers into one small local pharmacy ; resulting in loss of individual & community knowledge.
The pharmacy I now use (and have to drive to) is good but obviously overburdened. I don't generally use Pharmacy First but the local closure in Hoole has impacted negatively on the workload at the Park Medical Centre. The decision by the ICB not to admit a new local pharmacist to the premises in Hoole seems perverse, without and consideration and attracted very substantial local opposition. This is in part the fault of the last, flawed, needs assessment produced by CWAC
The pharmacy is very busy and can get quite a long time to collect prescription from Drs surgery
The products available in the pharmacy have depleted, the length of queues increased and waiting times for medications have increased considerably (fairly common meds). If you work full time then the pharmacy is only open on a Saturday morning until 12 do you will have to bite the bullet and wait in the queue. If you are unfortunate enough to see the GP on after 5pm then it is extremely unlikely you will be able to obtain medication (shuts at 5.30pm) and will need to drive a minimum of 10-12 miles round trip to obtain
The staff at my local pharmacy work really hard and are kind, patient and professional when dealing with customers. My prescriptions always arrive in due time and are complete when I come to collect them, meaning I do not have to make any return trips for outstanding items.
The staff have always been pleasant helpful. There have sometimes been delays in having all the drugs prescribed available. It would help if my pharmacy was open on a Saturday afternoon and if there was an out-of-hours service available anywhere in Chester.
[pharmacy name] offers an excellent service with friendly, helpful staff. It was good that I was able to have vaccinations there too, much more convenient and environmentally friendly than having to go to Tarvin or Tarporley!
[pharmacy name] is excellent. A real asset to the community
There aren't enough local pharmacies, so queues are too long
They are always helpful and knowledgeable, I just wish they opened at the weekend
They are excellent

They are just super busy it doesn't affect me always pick up my prescriptions fine just worry about the staff they seem very overworked but still friendly
They are very helpful and always go the extra mile
They do their best and is a good service if you go at the right time of day. Would be better to have a pharmacy back in Hoole.
They don't process your prescription unless you go in to ask for it. Even if you wait 2 days they won't have done it. Then they never have the medication and have to order it so you always end up having to go twice.
They don't seem to know what they are doing, are incredibly disorganised, often limited supplies, very long waits
They go the extra mile
They have always been very helpful to me
They have been busiest in my opinion and waiting times have longer than ever
They have been very efficient and were helpful when there was a national shortage of one of my medications.
They have never turned me away. They will offer advice if they cannot physically help.
They have withdrawn free delivery even for vulnerable and elderly, very disappointing for this group that needs this care.
They just never have anything in stock!
They need to do blood pressure test and urine dip tests and flu jabs or have the knowledge to know what chemist's that do should they not offer the above services
They often have a problem finding my medication which has been dispensed and checked. A more organised system of storing medications to be collected should be used to avoid confusion and delays in being served.
They simply can't cope with the overspill from boots Hoole closure in January 24
They supply the items for my prescriptions, usually without any problem. The staff are usually able to sort out any problems with supply or delivery quite quickly.
They used to have a text service to tell you your prescription was ready but they've stopped it which is very inconvenient and feels like a step backwards.
Time consuming once I manage to find that they are open, and even then the staff are stressed.
Tolerable. Its knowing there will often be a long queue and a crowded waiting room, and after queuing for 15 minutes you will be told you will have to come back. Pharmacies are about the only shops where you can enter and be unacknowledged and ignored for ages. There seems little incentive for good customer service, and constant offers of jabs and health checks, when they can hardly manage to fill prescriptions, adds to the frustration.
Trouble getting advice needed - pharmacies should be able to give general medication advice over the phone to all not just those that get prescriptions from them
Unfriendly, long wait times, inconvenient opening hours
Unprofessional and rude (in particular the pharmacist) - have changed to another pharmacy recently
Unreliable
Until it closed it was an excellent facility in the community and has been well used and needed for over 150yrs. It's ludicrous that the person wanting to take it over was refused stating it was not needed. Hoole is a large community and a chemist is more than needed when pharmacists are expected to take over some GP services for all age groups.
Use pharmacy in Boots near where I live. Friendly and helpful staff, opening hours are good as they are also open on a Saturday. Usually have most things I need in stock and I've used pharmacy a few times rather than going to GP and managed to sort my minor issues,
Variable, sometimes good, sometimes poor.
Vary satisfactory. Quick service & pleasant staff

Very busy. Long queues every time.
Very disappointed that my local pharmacy closed but happy that I have another close by - which I have to drive to.
Very easy to access, knowledgeable staff
Very efficient friendly service
Very friendly & helpful. Longer waits for prescription due to two pharmacy closures locally
Very friendly and efficient. Recently had both Covid and flu vaccinations.
Very Friendly staff, happy to provide advice when needed
Very frustrating. A new system is needed. Can be waiting for 30 minutes and then told it's not in!
Very good
Very good
Very good
Very good - we need more out of hours availability though
Very good and staff always pleasant and helpful
Very good but disappointing that previous pharmacy was shutdown
Very good indeed
Very good service.
Very good staff always helpful if I have a problem Will make special delivery of my disabled husbands prescription
Very good very help
Very good, staff helpful, always tell you when they will have prescriptions if they don't have it in. Wait times are never long
Very good, though sometimes feel that service could be a little quicker. Pharmacist is excellent.
Very good. Staff are friendly & efficient.
Very happy with the service
VERY HELPFUL
Very helpful and knowledgeable. I use him so frequently that he knows me now which in a small community means a lot
Very helpful and swift service
Very helpful including information about setting up the NHS app on my phone
Very helpful Pharmacist explained what each of the tablets was for Plenty of time for customers
Very helpful, no complaints at all
Very often long queues to collect prescriptions. Received a text yesterday (4/11/24) to say prescription ready to collect, went at 10.45 a.m. today (5/11/24) to collect only to be told they can not dispense prescriptions as there was no pharmacist and not sure what time there would be one !!
Very pleasant & friendly
Very pleased with the staff very polite and helpful, went for my yearly flu jab, what I would like to see is more information about the chemist sending out text message for people that have repeat prescriptions, and any other help that may be given.
Very reliable, friendly, efficient. Excellent advice, and definitely the best place to have inoculations.
Very rude staff especially the pharmacist
Very satisfied. Very efficient.
Very up and down. Meds usually arrive late leaving me without

Very very poor
Very good
Waiting time for prescription is taking over a week
Waiting times have increased considerably. It is clear to see the staff in most pharmacies I visit are overwhelmed. There is often not enough space which adds to the chaos. I think the staff do incredibly well to remain positive under the circumstances. Staff training for counter staff is nowhere near as good as it once was, they are not as knowledgeable but put under increasing pressures and are being asked more due to the change in the local services and GPS not being accessible.
I often feel sorry for the teams while waiting.
Was poor but now much better
We only have one pharmacy in the village. All our medicines.
We used to have a fantastic pharmacy nearby on Faulkner street, Hoole that was great for all the local community. Unfortunately this closed for some licence reasons which was a huge loss to the community and a real shame. Now we have to drive to a pharmacy which is further away and not as good as the one we had previously.
Well its not really local or convenient, and they, like others in the area, are overworked and overwhelmed.
Well under par
When getting non regular medication been OK but regular is a nightmare. Always big waits.
When it was there amazing
When we had a pharmacy it was great. You now have to get to a pharmacy by driving or taking a bus which is not frequent
Works well
Would like pharmacy to open earlier on a Saturday. Our pharmacy looks like it needs a good clean!
Yes it's OK haven't always got my full prescription in but it's ok

15. Appendix 4: Responses to the PNA 60-day consultation

15.1 About the consultation

A formal 60-day consultation is required for the development of the PNA. This took place from 7 May 2025 until 13 July 2025. The consultation was distributed widely using an online form and paper copies available in libraries and on request. The consultation was promoted through a Members Briefing, emails to stakeholders and social media posts.

Completed responses to the consultation survey were received from 54 respondents. Of those that disclosed their information:

- There were 52 members of the public, the remaining chose not to answer the question.
- There were 27 females and 21 males. Two respondents selected 'prefer not to say' and one preferred to use their own term. Of these respondents, 46 told us the gender they selected in the consultation is the gender they were born into. There was one respondent for whom it was not, and two who selected 'prefer not to say'.
- There were 21 respondents aged 75+, 15 were aged 65-74, 10 were aged 55-64, 5 were aged 45-54 and 1 was aged 35-44. There were no responses from persons aged under 35.
- There were 22 respondents who have a long-term illness, health issue or disability that limits their daily activities or the work they can do. All of these respondents (22) had a long standing illness or health condition. There were six respondents with a physical impairment, three with a mental health issue, two with a learning disability or difficulty, and two with a hearing impairment.
- All respondents that answered the question on ethnic group were white. There were 46 who were White British, one who was White Irish, and one of another white background which was not disclosed. There were two respondents who said they 'prefer not to say'.
- There were 45 respondents who told us they identify as Heterosexual/Straight and one who identifies as Gay or Lesbian. Three selected 'prefer not to say'.
- There were 32 respondents who described their religious belief/faith as Christian and one who described it as Muslim. There were 14 respondents who said they do not have a religious belief or faith and three respondents selected 'prefer not to say'.

For each question, the total number of responses for each answer is given. The free text comments are listed together with a commentary and response.

15.2 Consultation results and response

Q1. Has the purpose of the Pharmaceutical Needs Assessment (PNA) been explained clearly within chapter 1 of the draft PNA document?

- Yes = 46
- No = 0
- Not sure = 7

There was one free text comment:

Comment	Response
I would like to know what the best areas achieve and benchmark them to see if this is adequate	The purpose of the PNA is to assess whether community pharmacy provision is adequate for the local population not to benchmark our area against other geographies that will have other needs.

Q2. Does chapter 2 clearly set out the scope of the PNA?

- Yes = 47
- No = 0
- Not sure = 6

There were no free text comments.

Q3. Does the information in chapters 4 and 5 clearly outline current pharmacy provision in Cheshire West and Chester?

- Yes = 44
- No = 3
- Not sure = 7

There were three free text comments:

Comment	Response
Hoole is lacking a pharmacy. Sustainability therefore not met in Hoole for large resident population.	Hoole is located in Chester Central community partnership with 6 pharmacies, which is considered adequate. A detailed map of Chester pharmacies including Hoole can be seen on page 27.
It is unclear whether the document is intended to cover both pay-for-yourself services that support the NHS and also NHS services, or just NHS services. Pay-for-yourself over the counter services are also important since the NHS no longer covers e.g. antihistamines, covid vaccinations for under 65s? 75s? flu vaccines for under 65s, inhaler checks, etc. In the case of privately funded covid vaccines there is no local provision for example. Pharmacy services also seem to be replacing GP services in some cases. They are also taking longer and longer to fill prescriptions given the 'hub and spoke' model that has been adopted - can add several days to prescription fulfilment in rural areas.	The scope of the PNA is covered by The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 with services detailed under regulation 3. The scope is local pharmaceutical services which are NHS funded. A section will be added in to the PNA to emphasise this. We are aware there are private pharmaceutical services but these remain out of the scope of the PNA.

You should list the pharmacies and their exact locations	A list of pharmacies and their address is available in appendix 2 table A2-2 on page 115.
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Q4. Does the information presented in chapters 3 and 6 provide a reasonable description of the services which are provided by pharmacies in Cheshire West and Chester?

- Yes = 44
- No = 1
- Not sure = 7

There were two free text comments:

Comment	Response
There are larger pharmacies that can provide more services and smaller pharmacies that can't. The data in the PNA provides an average, which means that the reader loses visibility and understanding. I would like to see this data further delineated based on, for instance, the number of staff at each pharmacy correlated with the services provided. We should be able to see that a small pharmacy (such as Handbridge) can't provide the same range of services as a large pharmacy (such as Boots in Chester). Boots provides covid and flu shots, while these are not provided at Handbridge. The 'distance to a service' measurement should take into account the differences between the larger pharmacies and the smaller ones.	All pharmacies provide essential services. Advanced and enhanced services and where they are provided is set out in table A2-3 on page 122. The PNA looks at the service offer for a community partnership and you may need to go to one pharmacy for your essential services and another for an advanced service dependent on your needs.
See above - It is unclear whether the document is intended to cover both pay-for-yourself services that support the NHS and also NHS services, or just NHS services. Pay-for-yourself over the counter services are also important since the NHS no longer covers e.g. antihistamines, covid vaccinations for under 65s? 75s? flu vaccines for under 65s, inhaler checks, etc. In the case of privately funded covid vaccines there is no local provision for example. Pharmacy services also seem to be replacing GP services in some cases. They are also taking longer and longer to fill prescriptions given the 'hub and spoke' model that has been adopted - can add several days to prescription fulfilment in rural areas.	This has been responded to in question 3.

Q5. Are you aware of any NHS commissioned (NHS England or Cheshire and Merseyside Integrated Care Board) pharmaceutical services currently provided which have not been included within the PNA?

- Yes = 1
- No = 42
- Not sure = 9

There is one free text comment:

Comment	Response
I do not have a comprehensive list to answer yes. Is there one?	We are aware of the essential, advanced and enhanced services and these can be seen in table 1 on page 18.

Q6. Do you think the pharmaceutical needs of the population have been accurately reflected in the PNA?

- Yes = 27
- No = 11
- Not sure = 15

There were 13 free text comments:

Comment	Response
If you work, which I do, the easiest time to visit a pharmacy is during lunch time. I visited 3 in Cheshire West and Chester - Upton village pharmacy, which didn't have the cream I needed, Green Lane pharmacy was closed between 1 and 2.15pm and Kingsway pharmacy was closed between 1 and 2pm. This is very inconvenient for people who work and have a lunch break during that time. I eventually find a pharmacy in Helsby which was open between 9am and 6pm which had the cream, so I was able to call on my way home.	We have assessed opening times at a community partnership footprint to ensure adequate opening times. We acknowledge medicine shortages that are being experienced at a national level in section 6.2 on page 47 although medicine shortages are not within the scope of the PNA.
The Government want car usage lessened, therefore to say everyone is within a 15 minute car journey to a pharmacy goes against Government recommendations. Also within 30 minute public transport access. This does not take into account how often buses run- may be once every 3hrs or once a day. How do you access this in 30 minutes and return home! The elderly and disabled have less chance of access by public transport due to health concerns. Also may not have own transport. Also many elderly do not have access to "online" services and not have the confidence to use these, therefore they are being discriminated against due to their age. In my community the pharmacy was closed as owned by a big corporate Company that shut dozens of smaller pharmacies. Someone was willing to take the pharmacy on but the local Council/ Health Board refused stating it was not required. We had had a Pharmacy for over 150yrs! The area has numerous elderly and infirm who now have great difficulty in accessing a pharmacy. The pharmacies available are under huge pressure due to the extra workload at a time when pharmacies are supposed to be supporting Doctors. This is absolutely ludicrous, decided	It is travel time rather than frequency of buses that we are asked to assess using the Strategic Health Asset Planning and Evaluation (SHAPE) Atlas tool which is also routinely used by other areas. The tool allows comparison across geographical boundaries. This is the recommendation of DHSC Guidance .

by pen pushers who have no knowledge of the local area or population.	
As I understand the funding of pharmacies, they are not being reimbursed the full cost from the NHS of the medicines that they provide, much less a slight profit for the pharmacies. This means that the pharmacies in general and the smaller pharmacies in particular are cash strapped and can not take on additional services. When their clientele grows they can't hire more staff to manage the increased workload. The PNA should address the issue of adequate funding and reimbursement for the pharmacies.	The scope of the PNA is covered by The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 and regulations set out in DHSC Guidance . Funding is not within scope.
As I am not a heavy user of pharmacies and do not have multiple long-term health conditions I am not qualified to answer this.	Noted
I think pharmacies are understaffed to provide all the required services. With increased prescription volumes and only one pharmacist per branch able to check prescriptions, monitored dosage systems, pharmacists and their staff do not have time to give health advice, and do enhanced services. Hence the dissatisfaction of customers on waiting times.	Running a pharmacy is a complex business which conflates many issues including staffing, workload management and demand responses. As part of the contractor survey we have asked pharmacies if they have capacity to deal with current demand and expansion of this demand. Results can be seen on page 71.
Needs not met in Hoole	Hoole is located in Chester Central community partnership with 6 pharmacies, which is considered adequate. A detailed map of Chester pharmacies including Hoole can be seen on page 27.
Access is overestimated as a 20 minute walk to a pharmacy is not possible for elderly with arthritis etc & the patient also has to walk back home as well as queuing for 20mins ie 60 minutes walking or on one's feet. This is impossible also public transport may seem available but the routes to a pharmacy are not there.	Whilst we appreciate there is a range of travel time, it is average travel time rather than frequency of buses that we are asked to assess using the Strategic Health Asset Planning and Evaluation (SHAPE) Atlas tool which is also used by other areas. The tool allows comparison across geographical boundaries. This is the recommendation of DHSC Guidance .
It's very difficult to quantify - Chester is growing all the time	Noted
This has not considered the considerable reduction in pharmacy provision over many years. The provision is getting by on goodwill and the grace of god it seems. Also population uplift has not been considered adequately.	We have asked community pharmacists if they can cope with increased demand, see page 71,

	and we have looked at population forecasts on page 69.
It seems that pharmacy provision is deemed by the PNA to be adequate for my area but experience has shown that pharmacies seem to be slightly overwhelmed by the numbers of (mainly over 65s as mentioned for this area) requiring help and assistance.	Whilst the area isn't specified, we have asked pharmacies in the nine community partnerships in the contractor survey whether they could cope with current and increased demand and this has been incorporated into the PNA on page 71.
It seems to imply that no more pharmacies are needed. I disagree. The community of Hoole, Chester is very much lacking a pharmacy	Hoole is located in Chester Central community partnership, with 6 pharmacies, which is considered adequate. A detailed map of Chester pharmacies including Hoole can be seen on page 27.
The burden of providing care seems to be increasingly placed on individuals locating suitable pharmacies and advice - there is now an overlap between NHS and privately funded pharmaceutical care that is not reflected in the document.	The scope of the PNA is covered by The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 with services detailed under regulation 3. The scope is local pharmaceutical services which are NHS funded. A section will be added in to the PNA to emphasise this. We are aware there are private pharmaceutical services but these remain out of the scope of the PNA.
No because each pharmacy helps the community in different ways and the help each pharmacy does should be standard IE you should be able to get help for earache in every pharmacy not just some.	Essential services are provided in all pharmacies. The pharmacy service dealing with earache is the Pharmacy First advanced service which 67 pharmacies are registered to provide in CW&C.

Q7. Do you agree with the key findings about pharmaceutical services in Cheshire West and Chester?

- Yes = 28
- No = 12
- Not sure = 12

There were 15 free text comments:

Comment	Response
Please see above comments - If you work, which I do, the easiest time to visit a pharmacy is during lunch time. I visited 3 in Cheshire West and Chester - Upton village pharmacy, which didn't have the cream I needed, Green Lane pharmacy was closed between 1 and 2.15pm and Kingsway pharmacy was closed between 1 and 2pm. This is very inconvenient for people who work and have a lunch break during that time. I eventually find a pharmacy in Helsby which was open between 9am and 6pm which had the cream, so I was able to call on my way home.	Response has been made in question 6.
See reply above - The Government want car usage lessened, therefore to say everyone is within a 15minute car journey to a pharmacy goes against Government recommendations. Also within 30 minute public transport access. This does not take into account how often buses run- may be once every 3hrs or once a day. How do you access this in 30 minutes and return home! The elderly and disabled have less chance of access by public transport due to health concerns. Also may not have own transport. Also many elderly do not have access to "online" services and not have the confidence to use these, therefore they are being discriminated against due to their age. In my community the pharmacy was closed as owned by a big corporate Company that shut dozens of smaller pharmacies. Someone was willing to take the pharmacy on but the local Council/ Health Board refused stating it was not required. We had had a Pharmacy for over 150yrs! The area has numerous elderly and infirm who now have great difficulty in accessing a pharmacy. The pharmacies available are under huge pressure due to the extra workload at a time when pharmacies are supposed to be supporting Doctors. This is absolutely ludicrous, decided by pen pushers who have no knowledge of the local area or population.	Response has been made in question 6.
More emphasis on the online services available for routine medicines to be posted to residents, this will help manage demand at the local pharmacies	There are roughly 400 distance selling pharmacies in England and these provide an equal service to residents across England. It is for them to market their services appropriately.
There isn't anything in the PNA concerning cyber defence of the IT systems used by the pharmacies. Nor does it address the inadequate IT infrastructure itself, along with the associated lack of connectivity to other pharmacies, surgeries, hospitals and other health facilities. As an example, the Handbridge pharmacy was unable to provide a prescription due to a particular cream not being produced	Pharmacies are private contractors that choose and fund their own IT systems. Pharmacies are required to undertake the data security and protection toolkit . This is outside the scope of the PNA.

any longer. They were unable to access other pharmacies to see if they had the cream in stock, and told us that we needed to go check with other pharmacies ourselves. None of the other local pharmacies had the cream either, but the surgery insisted that 'someone would have it'. It's the 21st century, we should have an integrated and/or interoperable IT infrastructure that shows the prescribing doctor that the medicine is no longer available so that they don't waste everyone's time.	
Pharmacies are under huge pressure from an increased workload, both by the tasks they now undertake and because of the difficulties getting GP or hospital care. Large new housing developments do not include pharmacies, thus putting extra pressure on existing services.	During the planning process developers are asked to say how they are going to support the provision of all essential services including primary healthcare. A sentence has now been added to the PNA to state this on page 70. Needs will be kept under review and consideration will be given to supplementary statements if necessary.
I think there needs to be additional focus staff training, including customer service, customer empathy, and customer retention - a lack of all three of which has caused me to utilise online pharmacies over community pharmacies. I have found staff - including the pharmacists - to be rude and dismissive, which makes me feel distressed and leaving me to feel that I am unable to approach them for anything other than the dispensing of my prescribed medication. The rise of online pharmacies necessitates brick-wall pharmacies improve their offer, otherwise more people will turn their backs on them - making such businesses find themselves in a financially compromised position, leading to an increase in closures and, by extension, less access for the vulnerable.	Customer service is not within the scope of the PNA but is important for any business. Therefore we have passed your comments on to the Local Pharmaceutical Committee for dissemination.
Hoole sustainability not met for such a large resident population	Hoole is located in Chester Central community partnership with 6 pharmacies, which is considered adequate. A detailed map of Chester pharmacies including Hoole can be seen on page 27.
I can't really speak for the whole CWAC I only use pharmacies which are close to my own address	Noted
There does not appear to be any contingency plans to support rural areas who lose their pharmacist through retirement or for other reasons.	The terms of the NHS contract leave staffing as a contractual matter with the contractor to address. All pharmacies are

	required to have business continuity plans to enable them to offer NHS services. Needs will be kept under review and consideration will be given to supplementary statements if necessary.
We need a pharmacy in Huntington	Huntington is located in Chester East community partnership with 5 pharmacies, which is considered adequate at this time. A map of community pharmacies can be seen on page 23.
This has not considered the considerable reduction in pharmacy provision over many years. The provision is getting by on goodwill and the grace of god it seems. Also population uplift has not been considered adequately	We have noted the reduction in pharmacies on page 44 and population uplift is considered on page 69.
See above answer - It seems that pharmacy provision is deemed by the PNA to be adequate for my area but experience has shown that pharmacies seem to be slightly overwhelmed by the numbers of (mainly over 65s as mentioned for this area) requiring help and assistance.	Response has been made in question 6.
Despite the ONS making it very clear that the findings of the 2021 Census on trans people are unreliable your document seems to not have heard of this and uses findings uncritically https://www.ons.gov.uk/peoplepopulationandcommunity/culturalidentity/genderidentity/articles/qualityofcensus2021genderidentitydata/2023-11-13 It also cites a 2018 Stonewall report - Stonewall are a pressure group and not a research institution. Suggest someone who is up to date on more recent research reviews this section. It does a disservice to gender questioning as well as gender non-conforming people if discredited sources are used	We have amended the section to highlight the uncertainties in the estimates on gender identity. Data and evidence gathered for this section of the PNA was to understand and demonstrate some of the issues and health needs facing those with protected characteristics. Notably this hasn't impacted the conclusions of the PNA. We have changed the word research to evidence in section 8.9.4 and section 8.9.5.
Don't believe that there is enough pharmacies in my area as you can go into a pharmacy and queue and be in there a hour because you can't go to other pharmacy as I explained not every pharmacy does the same things	All pharmacies provide essential services. Advanced and enhanced services and where they are provided is set out in table A2-3 on page 122. The PNA looks at the service offer for a community partnership and you may need to go to one pharmacy for your essential services and another for

	an advanced service dependent on your needs.
Places like Hoole, Chester need a pharmacy !	Hoole is located in Chester Central community partnership with 6 pharmacies, which is considered adequate. A detailed map of Chester pharmacies including Hoole can be seen on page 27.

Q8. Has the draft PNA provided enough information to inform future pharmaceutical services provision?

- Yes = 27
- No = 11
- Not sure = 14

There were 9 free text comments:

Comment	Response
Despite your "findings" There are insufficient pharmacies to fully cope with the increasing demand due to larger population, age, illness, infirmity, access. Also see reply to Q6 - again applies here.	Response has been made in question 6.
More exploration of potential use of Apps, and online methods to help meet demand for routine medications. this in turn will help reduce waiting times at pharmacies and help with Carbon reduction targets as fewer journeys will be made.	Thank you for your comment. These are set out in the NHS Digital Transformation plan. We thoroughly encourage use of the NHS app to its fullest degree.
See above answer - It seems that pharmacy provision is deemed by the PNA to be adequate for my area but experience has shown that pharmacies seem to be slightly overwhelmed by the numbers of (mainly over 65s as mentioned for this area) requiring help and assistance.	Response has been made in question 6.
Thorough	Noted
More information should be given on staffing and hours of the community pharmacies, such as Saturday opening.	We have included opening times in table A2-2 on page 115. NHS.UK must keep their opening times up to date at https://www.nhs.uk/service-search/pharmacy/find-a-pharmacy . Staffing is a contractual consideration.
See my response to question 8 - I think there needs to be additional focus staff training, including customer service, customer empathy, and customer retention - a lack of all three of which has caused me to utilise online pharmacies	Customer service is not within the scope of the PNA but is important for any business. Therefore we have passed your

over community pharmacies. I have found staff - including the pharmacists - to be rude and dismissive, which makes me feel distressed and leaving me to feel that I am unable to approach them for anything other than the dispensing of my prescribed medication. The rise of online pharmacies necessitates brick-wall pharmacies improve their offer, otherwise more people will turn their backs on them - making such businesses find themselves in a financially compromised position, leading to an increase in closures and, by extension, less access for the vulnerable.	comments on to the Local Pharmaceutical Committee for dissemination.
In my area there is a huge amount of new build properties going on. Are the existing facilities deemed “adequate” for us living here now or are the existing facilities being asked to “absorb” them. These new build estates don’t seem to have any social, commercial or healthcare services included in their planning locally. In Great Sutton there is a new medical centre being built so is this the facility that will provide any pharmacy provision for existing residents plus at least 2,000 + new home residents locally? Local residents are talking about this constantly between themselves.	We have asked community pharmacists if they can cope with increased demand, see page 71, and we have looked at population forecasts on page 69. Future housing developments have been discussed on page 70. Needs will be kept under review and consideration will be given to supplementary statements if necessary.
Save our pharmacies we need them it doesn't say that they will be saved	The PNA has assessed that the provision of pharmacies is adequate at this snapshot in time. This will be reviewed going forward.
While broadly representative, I think that we have been particularly badly served by the pharmacies in Saltney and Westminster Park Chester. Although I wish to support my local pharmacy by using it, I gave up after my 6 successive visits had failed to produce the full amounts of the 4 prescribed medications I needed. These are common medications for diabetes, on repeat prescription, and should not have been so difficult to supply. I now make the trip to Boots in town, and have had no problems since.	Customer service is not within the scope of the PNA but is important for any business therefore we have passed your comments on to the Local Pharmaceutical Committee for dissemination.

Q9. Community pharmacies & dispensing appliance contractors only. Please can you review the information in appendix 2 including address, contact number, opening hours and service provision, for accuracy?

There were 2 free text comments:

Comment	Response
Please double check opening hours for Boots Greyhound RP as changed in recent months - Boots Neston - please double check opening hours. - Boots Northwich - please check opening hours - Boots Winsford - please check lunchtime hours.	Thank you the opening times this will be checked and updated in the PNA.

Needs more pharmacies	Whilst we do not know which area you have referred to, we have assessed the number of pharmacies against the community partnership model and deemed it to be adequate at this point in time.
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Q10. Do you agree with the six required statements included in the PNA?

- Yes = 32
- No = 5
- Not sure = 13

There were three free text comments:

Comment	Response
See comments in box 6 - If you work, which I do, the easiest time to visit a pharmacy is during lunch time. I visited 3 in Cheshire West and Chester - Upton village pharmacy, which didn't have the cream I needed, Green Lane pharmacy was closed between 1 and 2.15pm and Kingsway pharmacy was closed between 1 and 2pm. This is very inconvenient for people who work and have a lunch break during that time. I eventually find a pharmacy in Heslby which was open between 9am and 6pm which had the cream, so I was able to call on my way home.	Response has been made in question 6. Medicine shortages are not within the scope of the PNA, however medicine shortages have been addressed in section 6.2 on page 47.
All the above replies answer Q 10	Noted
Re Statement Four, see 6 above. As an example, the Handbridge pharmacy does not provide services such as covid and flu shots. Residents of Handbridge would need to walk to Boots in Chester to get these shots. Are the distances listed in Statement Four correct in such cases? Re Statement Five, same issue concerning times to access services due to non availability at smaller pharmacies. None of the Required statements address cyber defence and provisions to ensure that resident's data cannot be stolen by cyber criminals. There have been many cases quite recently where client data has been accessed by the criminals. Additional and comprehensive protection against cyber attacks should be added as an additional requirement.	Response has been made in question 6.

Q11. Do you have any other comments you wish to make about the draft PNA?

There were 16 free text comments:

Comment	Response
It is written by people who's only interest is to save money at all cost. They have no actual thought for the community	The reason the Health and Wellbeing Board is responsible

who's lives are blighted by their decisions. Again mainly the disabled, infirm, and elderly. One day everyone of you will be old, and will rue the decisions made today. Remember these words as never a more true statement - "yesterday I was your age, tomorrow your mine". You think you have forever, that old age is a lifetime away - let me tell you, it isn't!	for the PNA is because they are not financially responsible for community pharmacies. This ensures an objective view.
Comprehensive, detailed and thorough	Thank you
Long waiting times, shortages of medication and overworked pharmacy staff combine to put unreasonable pressure on the pharmacy service. Although provision in CWaC may be satisfactory overall, some areas are under-provisioned due to customer numbers and lack of public transport.	We have assessed the number of pharmacies against the community partnership model and deemed it to be adequate at this point in time.
No	Noted
For far to long the population needs have not reflected the REALITY of needs. People from any part of the country can use Chester medical service and put a strain on our funds. EVERY time any patient visits a pharmacy health centre or hospital the NHS number should be taken and ALL costs cross paid by their regional area. If a person does not have a NHS number they should be offered insurance paid for by their government if they do not have the funds. If people have ANY treatments abroad tummy tucks teeth etc and it goes wrong they have to pay for the treatment via insurance not the normal NHS bill.	Noted we have passed this your comments on to the ICB.
Needs to be further investigation as to where pharmacies are needed	The methodology used can be seen in section in two. The scope of the PNA is covered by The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013
Pharmacies are closing more frequently or are reducing their hours quite drastically so remaining pharmacies seem overloaded with work. This results in having to wait approx 6 days to collect meds as well as 2-3 days for a GP to process the script TOO LONG. It also means that consulting a pharmacist is difficult and I don't think consulting a counter assistant is conducive to good health. The populace are being encouraged to use Pharmacy First but is it available if pharmacists too busy.	Customer service is not within the scope of the PNA but is important for any business. Therefore we have passed your comments on to the Local Pharmaceutical Committee for dissemination.
I live on Glan Aber Park and am lucky that there is a pharmacy at Westminster Park, one at Hough Green and one in Morrisons. All within easy reach for a walk, though Morrisons is a bit further I find, that when I go to any of these three pharmacies, there is always a substantial queue. Arguably that's down to the individual pharmacy management, for staffing and training But is it also a	There are developments within the NHS app where patients will be able to see if their prescription is complete. This is a developing area of technology within the NHS app.

<p>symptom of a lack of pharmacy outlets ? They NEVER answer the phone - none of them - when you want to simply check they have your prescription and that they have stock of the medication to fulfil it But you can never get through So it's a journey to the pharmacy, to almost invariably find, that the items prescribed have to be ordered in So a wasted journey and then the need for a second visit So many of us these days are using the NHS app to re-order repeat prescriptions The medications are in the App, the named pharmacy is in the App, it surely needs some joined-up thinking to have that pharmacy, pre-order repeat medicines, ready for the prescription fulfilment That then would go a long way to settle the irritation of the pharmacy not having the medicine</p>	<p>Customer service is not within the scope of the PNA but is important for any business. Therefore we have passed your comments on to the Local Pharmaceutical Committee for dissemination.</p>
<p>As the demographic of Cheshire West and Chester is an aging population and is expected to continue growing and becoming more dependant on pharmacy services. Would it be possible to include an estimate of the projected increased pharmacy workload and that sufficient provision will be available.</p>	<p>We have triangulated the forecasted growth in population, increase in dispensing and ability for pharmacies to cope with the increased demand.</p>
<p>No</p>	<p>Noted</p>
<p>Adequate consideration of the loss of provision and a more reasonable uplift in population should be considered as well as changing demographics. An aging population will require more provision to maintain the provision is short sighted. Better to increase at a sustainable rate rather than jump when the provision is deemed inadequate</p>	<p>We have triangulated the forecasted growth in population, increase in dispensing and ability for pharmacies to cope with the increased demand.</p>
<p>The years quoted 2025-2028 for the forthcoming survey results. With the latest very local new build properties in the 2:000+ are these current figures or forecasted figures? Growth of the local population during these years will increase, will the provision of pharmacy services grow with it and be budgeted for?</p>	<p>We have used the most up to date figures that we have available to us.</p>
<p>A summary running to sixteen pages is far too long!</p>	<p>Thank you for your comments. As a result of your comments a shorter summary with the key findings will be published on the webpage as html which will be accessible.</p>
<p>This document is so lengthy and convoluted it almost appears to be designed to deter naturally interested people from engaging. I believe you need help in designing a much briefer and simplified version if you truly want the general populous to take CWCC seriously.</p>	<p>Thank you for your comments. As a result of your comments a shorter summary with the key findings will be published on the webpage as html which will be accessible.</p>
<p>It feels like you are saying some areas have too many pharmacies - is this why Hoole, Chester was not allowed a replacement when Boots pharmacy closed ??</p>	<p>Hoole is located in Chester Central community partnership with 6 pharmacies, which is</p>

	considered adequate. A detailed map of Chester pharmacies including Hoole can be seen on page 27. We have confirmed that there is adequate provision of pharmacies rather than too many.
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15.3 Actions to be taken as a result of the consultation

	Action	Location
Action 1	Add the following section to the PNA: 2.4 Services in scope The scope of the PNA is covered by the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 with services detailed under regulation 3. The regulation states that only local pharmaceutical services which are NHS funded are to be included in the PNA. This includes essential services, national enhanced services and advanced services which are described in detail in chapter 3. However, we have also chosen to review locally commissioned services which are commissioned by the local authority and NHS Cheshire and Merseyside Integrated Care Board (ICB).	Added to page 12 on the PNA main document as a new section
Action 2	Make reference to services in scope of the PNA in the key findings and purpose section: The scope is local pharmaceutical services which are NHS funded	Added to page 5 and page 8 of the PNA main document
	Add the following sentence: During the planning process developers are asked how they are going to support the provision of all essential services including primary healthcare	Added to page 70 of the PNA main document
Action 3	Amendment to paragraph on gender identity population estimates made: Estimating the size of the Trans population is difficult. The 2021 Census included a voluntary question for those residents aged 16 years and over about their gender identity, however there is relatively high levels of uncertainty in the estimates and whether they are an over or underestimate.	Amendment to page 87
Action 4	Amendment to wording on evidence collected by charities including Stonewall: Amendment of word 'research' to 'evidence'	Amendment to sections 8.9.4 and 8.9.5 of the PNA main report.
Action 5	Add in the inclusion of Kelsall Medical Centre and update PNA sections accordingly	Amendments to: Page 5

		<p>Section 4.2 page 20 Table 5.1 page 22 Page 32 Map on page 33 Page 102 Page 104</p> <p>Table A2-5 on page 135</p>
Action 6	Review and update opening hours	<p>Amendment to: Page 36 to 40 Page 104 Table A2-2 on page 115</p>