



Bolton Council

**PHARMACEUTICAL
NEEDS ASSESSMENT:
APPENDIX 5**

2018/21

PHARMACY CONTRACTOR SURVEY TEMPLATE

**Bolton
Council**



Bolton LPC

NHS Bolton

Date: 11 May 2017

Public Health
Department of People Services
1st Floor
Bolton Town Hall
BL1 1SA

www.bolton.gov.uk

Dear Colleague

PNA: Pharmaceutical services contractor survey

Bolton's Health & Wellbeing Board (HWB) is responsible for the production of the local Pharmaceutical Needs Assessment (PNA). The PNA looks at the current and future needs for pharmaceutical services in Bolton and identifies any potential gaps to service delivery. It is a key document which is used by NHS England to inform its decisions on applications for new or changes to existing pharmaceutical services. It is also used to make commissioning decisions on new services to be provided by community pharmacies.

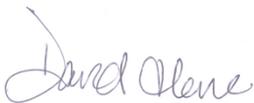
Liaising with the Local Pharmaceutical Committee (LPC), Bolton Council's Public Health Department is conducting this survey to capture information about local pharmaceutical services. As a pharmaceutical service contractor, we value your input on how services are accessed and whether they meet the current and future needs of the local population. This information will be used to inform the PNA. It will help us identify any potential gaps to service delivery and help us plan for the future.

Please complete this survey via PharmOutcomes by **31st July 2017**.

If you require further information or assistance, please contact:

Louise Gatley, Chief Officer, Bolton Local Pharmaceutical Committee, louise.gatley@nhs.net

Yours sincerely



David Herne
Director of Public Health

Director of Public Health **David Herne**



Service Design

- [Browse Service Library](#)
- [View service accreditations](#)
- [Edit Service Design](#)
- [Preview Claim for this service](#)

Provision Reports Preview

 [Basic Provision Record \(Sample\)](#)

Service Support

Pharmacy Questionnaire-PNA

Please complete this questionnaire **ONCE** only to report the facilities and services offered by your pharmacy.

In the event of any query arising regarding this questionnaire please contact your LPC for advice on local arrangements regarding the PNA process

For technical support on the use of this data capture set please contact Pinnacle Support via the "Help" tab

Pharmaceutical Needs Assessment Pharmacy Questionnaire 2017 (Preview)

Date of completion

Trading Name

Post Code

Is this a Distance Selling Pharmacy? Yes No
(i.e. it cannot provide Essential Services to persons present at the pharmacy)

Pharmacy email address
If no email write no email

Pharmacy telephone

Pharmacy fax

Pharmacy website address
If no website write no website

The purpose of this questionnaire is to gather information in order for local Health and Wellbeing Boards to update their Pharmaceutical Needs Assessment (PNA). Please complete this questionnaire **ONCE** only to report the facilities and services offered by your pharmacy.

Can we store the above information, share with the LPC, and use this to contact you?

Consent to store Yes No

Contact Details

Contact details of person completing questionnaire, if questions arise

Name

Phone Number

Email Address

Contact details for head office (if different/appropriate)

Name

Phone Number

Email Address

Opening Hours

Opening Days

- Monday
 Tuesday
 Wednesday
 Thursday
 Friday
 Saturday
 Sunday

Opening hour questions appear, based on days selected.

Please complete your opening hours

Lunchtime Closure

Days closed for Lunch

- Not closed for lunch
- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday
- Sunday

Lunchtime closure questions appear, based on days selected.

If your pharmacy closes for lunch, please indicate the times below.
Please leave blank if you stay open for lunch

Consultation Facilities

Consultation areas should meet the standard set out in the contractual framework to offer advanced services

Is there a consultation area?

- Available (including wheelchair access) on the premises
- Available (without wheelchair access) on premises
- Planned within next 12 months
- No consultation room available
- Other

If Other please specify

Where there is a consultation area

Is this enclosed? Yes No N/A

N/A if no consultation room

How many enclosed consultation rooms do you have?

Number of Consultation Rooms

- 1
- 2
- 3
- 4+

Please tell us about arrangements made to provide services offsite

Off-site arrangements

- Off-site consultation room approved by NHS
- Willing to undertake consultations in patients home/ other suitable site
- None apply
- Other

If Other please specify

Hand washing and toilet facilities

What facilities are available to patients during consultations?

Facilities available

- Handwashing in consultation area
- Hand washing facilities close to consultation area
- Have access to toilet facilities
- None

Tick all that apply

Information Technology

Is the pharmacy FPS* R2 enabled?

- Is the pharmacy EPS R2 enabled?**
- Yes, EPS R2 enabled
 - Planning to become EPS R2 enabled in the next 12 months
 - No current plans to provide EPS R2
- EPS R2: Electronic Prescription Service Release 2

Registered for NHS mail

- Yes
 - No
- Please answer 'Yes' if registered but address not yet received

NHS Summary Care Record enabled

- Yes
- Working towards enablement
- No plans to be enabled

Up to date NHS Choice entry

- Yes
- No

Essential Services (appliances)

In this section, please give details of the essential services your pharmacy provides.

Does the pharmacy dispense the following

- Stoma appliances
- Incontinence appliances
- Dressings
- None
- Other

Please tick all that apply

Advanced Services

Please give details of the Advanced Services provided by your pharmacy.

Please tick the box that applies for each service.

Yes - Currently providing

Soon - Intending to begin within the next 12 months

No - Not intending to provide

Medicines Use Review Service Yes Soon No

New Medicine Service Yes Soon No

Appliance Use Review Service Yes Soon No

Stoma Appliance Customisation Service Yes Soon No

NHS Flu Vaccination Service Yes Soon No

NHS Urgent Medicine Supply Advanced Service Yes Soon No

Commissioned Services

Use this section to record which local services you currently deliver or would like to deliver at your pharmacy. These can be Enhanced Services, commissioned by the NHS England Area Team, Public Health

Services commissioned by a Local Authority or CCG services.

Please tick the box that applies for each service.

CP - Currently providing NHS funded service

WA - Willing and able to provide if commissioned

PP - Currently providing company led/private service

NW - Not willing or able to provide service

Anticoagulant Monitoring Service CP WA PP NW

Anti-viral Distribution Service CP WA PP NW

Care Home Service CP WA PP NW

Gluten Free Food Supply Service CP WA PP NW
(i.e. not supply on FP10)

Home Delivery Service (not appliances) CP WA PP NW
(not appliances)

Language Access Service CP WA PP NW

Schools Service CP WA PP NW

Sharps Disposal Service CP WA PP NW
(N.B. NOT needle exchange)

Urgent Care

CP - Currently providing NHS funded service

WA - Willing and able to provide if commissioned

PP - Currently providing company led/private service

NW - Not willing or able to provide service

Minor Ailments Scheme CP WA PP NW
First e.g. Care at the Chemist/Think Pharmacy/Pharmacy

Emergency Supply Service CP WA PP NW

Out of Hours Services CP WA PP NW

On Demand Availability of Specialist Drugs Service CP WA PP NW
(e.g. IV antibiotics {OPAT})

Palliative Care scheme CP WA PP NW

Disease Specific Medicines Management Service

CP - Currently providing NHS funded service

WA - Willing and able to provide if commissioned

PP - Currently providing company led/private service

NW - Not willing or able to provide service

Allergies CP WA PP NW

Alzheimer's/dementia CP WA PP NW

Asthma CP WA PP NW

CHD CP WA PP NW

COPD CP WA PP NW

Depression CP WA PP NW

Diabetes type I CP WA PP NW

Diabetes type II CP WA PP NW

Epilepsy CP WA PP NW

Heart Failure CP WA PP NW

Hypertension CP WA PP NW

Parkinson's Disease CP WA PP NW

Other (please state -
including funding source)

Public Health Services

CP - Currently providing NHS funded service

WA - Willing and able to provide if commissioned

PP - Currently providing company led/private service

NW - Not willing or able to provide service

**Emergency Hormonal
Contraception Service** CP WA PP NW

Quickstart Contraception CP WA PP NW

Contraception Service CP WA PP NW
(not an EHC service)

Chlamydia Testing CP WA PP NW

**Chlamydia Treatment
Service** CP WA PP NW

**Needle and Syringe
Exchange Service** CP WA PP NW

**Obesity Management
(adults and children)** CP WA PP NW

**NRT Voucher Dispensing
Service** CP WA PP NW

**Smoking Cessation
Counselling Service** CP WA PP NW

**Varenicline (Champix)
PGD Service** CP WA PP NW

**Supervised
Administration** CP WA PP NW
Of methadone, buprenorphine etc.

If you provide supervised administration service, is this done in a separate private room?

In Private

- Yes
 No
 At patient request
 N/A

If service not provided select N/A

Medicines Optimisation

CP - Currently providing NHS funded service

WA - Willing and able to provide if commissioned
PP - Currently providing company led/private service
NW - Not willing or able to provide service

MUR Plus/Medicines Optimisation Service CP WA PP NW

Therapeutic areas covered
(if providing)

Domiciliary Medicine Administration Records (MAR) CP WA PP NW

Locally Commissioned Domiciliary MUR Service CP WA PP NW
Commissioned in Warrington

Medicines Assessment and Compliance Support Service CP WA PP NW

Independent Prescribing Service CP WA PP NW

Therapeutic areas covered
(if providing)

Supplementary Prescribing CP WA PP NW

Which therapy area

Not Dispensed Scheme CP WA PP NW

Prescriber Support Service CP WA PP NW

Screening Service

CP - Currently providing NHS funded service
WA - Willing and able to provide if commissioned
PP - Currently providing company led/private service
NW - Not willing or able to provide service

Alcohol CP WA PP NW

Atrial Fibrillation CP WA PP NW

Cholesterol CP WA PP NW

Diabetes CP WA PP NW

Gonorrhoea CP WA PP NW

H. pylori CP WA PP NW

HbA1C CP WA PP NW

Hepatitis CP WA PP NW

HIV CP WA PP NW

Hypertension CP WA PP NW

Phlebotomy Service CP WA PP NW

Vascular Risk Assessment Service CP WA PP NW
NHS Healthchecks

Other Screening (please state - including funding source)

Vaccinations

CP - Currently providing NHS funded service

WA - Willing and able to provide if commissioned

PP - Currently providing company led/private service

NW - Not willing or able to provide service

Seasonal Influenza Vaccination Service (not NHS Service) CP WA PP NW

Childhood Vaccinations CP WA PP NW

HPV CP WA PP NW

Hepatitis B CP WA PP NW
(at risk workers or patients)

Travel Vaccines CP WA PP NW

Other (please state - including funding source)

Healthy Living Pharmacy

Is this a Healthy Living Pharmacy

- Yes
- Currently working towards HLP status
- The pharmacy is not currently working toward HLP status but would be interested in becoming a HLP in the future
- The pharmacy is not currently interested in becoming a HLP

Collection and Delivery services

Does the pharmacy provide any of the following?

Collection of prescriptions from surgeries Yes No

Delivery of dispensed medicines - Free of charge on request Yes No

Delivery of dispensed medicines - Chargeable Yes No

Monitored/Community Dosage Systems - Free of charge on request if not covered by Equality Act (DDA) Yes No

Monitored/Community Dosage Systems - chargeable if not covered by Equality Act (DDA) Yes No

Monitored/Community Dosage Systems - Not Yes No

Accessibility

Can customers legally park within 50 metres of the pharmacy?

Parking

- Yes
- No

How far is the nearest bus stop/train station?

Train Station/Bus Stop

- Within 100M
- 100M to 500M
- 500M to 1000M
- 1000M+
- No Bus Stop/Train Station

Do pharmacy customers have access to designated disabled parking?

Disabled Parking

- Yes
- No

Is the entrance to the pharmacy suitable for wheelchair access unaided?

Wheelchair Access (Entrance)

- Yes
- No

Are all areas of the pharmacy floor accessible by wheelchair?

Wheelchair Access (Floor)

- Yes
- No

Do you have any other facilities in the pharmacy aimed at supporting disabled people access your service?

Facilities

- Automatic door assistance
- Bell at front door
- Toilet facilities accessible by wheelchair users
- Hearing loop
- Sign language
- Large print labels
- Large print leaflets
- Wheelchair ramp access
- Other

Please tick all that apply

Are you able to offer support to people whose first language is not English?

Non-English Support

- Yes
- No

If so how?

Interpreter/Language Line

- Yes
- No

Can staff at pharmacy speak languages other than English Please list all languages spoken

Are you able to provide advice and support if a customer wishes to speak to a person of the same sex?

Same Sex

- All of the time
- By arrangement
- No

Are you aware of any gaps in access or pharmaceutical need for any of the following groups, relating to their:

Age

- Yes
- No

Disability

- Yes
- No

Gender

- Yes
- No

People with/about to have gender reassignment

- Yes
- No

Marriage and civil partnership

- Yes
- No

Pregnancy and maternity

- Yes
- No

Race

- Yes
- No

Religion or belief

- Yes
- No

Sexual orientation

- Yes
- No

Other - please specify

If yes to any of the above,
please state why

Almost done

If you have anything else you would like to tell us that you think would be useful in the formulation of the PNA, please include it here:

Other

