

WOKINGHAM BOROUGH

PHARMACEUTICAL NEEDS ASSESSMENT 2022-2025

DRAFT FOR CONSULTATION



**WOKINGHAM
BOROUGH COUNCIL**



Executive summary

Introduction

Each Health and Wellbeing Board (HWB) has a statutory responsibility to publish and keep up to date a statement of needs for pharmaceutical services for their population. This is called the Pharmaceutical Needs Assessment (PNA). The purpose of the PNA is to:

- inform local plans for the commissioning of specific and specialised pharmaceutical services
- to support the decision-making process for applications for new pharmacies or changes of pharmacy premises undertaken by NHS England

It assesses whether the current provision of pharmacies and the commissioned services they provide meet the needs of the Wokingham residents and whether there are any gaps, either now or within the lifetime of this document, 1st October 2022 to 30th September 2025. It assesses current and future provision with respect to:

- Necessary Services, i.e., current accessibility of pharmacies and their provision of Essential Services
- Other Relevant Service and Other Services including Advanced pharmacy services and other NHS services. These are services commissioned by NHS England, Wokingham Borough Council, or Berkshire West CCG.

Essential services are offered by all pharmacy contractors as part of the NHS Community Pharmacy Contractual Framework.

Advanced services are NHS England commissioned services that community pharmacy contractors and dispensing appliance contractors can provide subject to accreditation as necessary.

Other NHS services are those services that are provided as part of the health service. They include services that are provided or arranged by a local authority, NHS England and NHS Improvement, a clinical commissioning group, an NHS trust or an NHS foundation trust.

Methodology

It is a statutory responsibility of all Health and Wellbeing Boards to produce and maintain a PNA for their area.¹ The next PNA is required to be published by 1st October 2022.² Healthy Dialogues were commissioned by the Berkshire East Public Health Hub on behalf of the six local authorities in Berkshire to undertake this process.

In December 2021, a steering group of key stakeholders was established to oversee the development of the PNA with overall responsibility of ensuring it met the statutory regulations. The process included:

- a review of the current and future demographics and health needs of Wokingham population determined on a locality basis
- a survey of Wokingham patients and the public on their use and expectations of pharmacy services
- a survey of Wokingham pharmacy contractors to determine their capacity to fulfil any identified current or future needs
- an assessment of the commissioned essential, advanced, and enhanced pharmacy services provided in Wokingham

This PNA consultation draft will be published for a 60-day formal consultation between the period of 10th June 2022 to 9th August 2022. The final PNA report will be taken to the Wokingham Health and Wellbeing Board for sign-off before publication on 1st October 2022.

Findings

Key demographics of Wokingham

Wokingham is a densely populated and mostly urban unitary authority in Berkshire. It has an estimated 173,945 people living in in the borough (ONS, mid-2020 population estimates), this figure is expected to increase by 2.4% in the lifetime of this PNA (ONS, 2018 population projections). The population increases are likely due to the number of housing developments underway in Finchampstead South Ward, Shinfield South ward, Shinfield North ward, and

¹ NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013.

² Department of Health & Social Care (October 2021) Pharmaceutical needs assessments: information pack for local authority health and wellbeing boards.

Emmbrook wards which will lead to 3,451 new dwellings between 2021 and 2026 (Wokingham Borough Council, Annual Monitoring Report, 2018).

While overall the ethnic diversity in Wokingham is low, Reading University does bring diverse and young population to the borough. There is also a significant Gypsy, Roma, and Traveller community living within the borough.

Key health needs of Wokingham

On the whole, life expectancy in and healthy life expectancy are high and reported health-risk behaviours such as smoking, drug misuse, harmful drinking and physical inactivity are low in the Wokingham population in comparison to regional and national comparators. The prevalence of chronic and common health conditions such as circulatory diseases, cancer, respiratory diseases and digestive diseases are also low in comparison to regional and national figures.

However, the estimated levels of depression in the borough in 2021 are higher than regional and national estimates, particularly in Lower Earley South, Lower Earley North, and Shinfield (House of Commons Library, 2022). STI testing rates including chlamydia screening amongst young people is lower than average and HIV is more often diagnosed at a late stage.

Patient and public engagement

A community survey was disseminated across Wokingham and the rest of Berkshire. 249 people responded to tell us how they use their pharmacy and to contribute their views on specific 'necessary' pharmacy services.

Overall, participants were happy with the services their pharmacy provided. The most stated reasons people used their chosen pharmacy were proximity and happiness with the service they received. Most stated they prefer to use their pharmacies during weekdays and during normal working hours.

There were no substantial differences between groups in terms of their use, reasons for their chosen pharmacy and expectations in their local pharmacy provision.

Accessibility pharmacy services and of essential services

Accessibility has been determined by using a 1-mile radius from the centre of the postcode of each pharmacy. This is approximately a 20-minute walk from the outer perimeter of the buffer zone created. In addition, 20 minutes travel time by car is considered accessible.

There are 21 community pharmacies located within Wokingham. There are a further 22 community pharmacies located within a mile of Wokingham's border.

Overall, there is good pharmacy coverage to provide essential services across the borough both inside working hours and outside normal working hours.

Advanced Pharmacy Services

It is concluded that there is currently sufficient provision for the following advanced services to meet the likely needs of residents in Wokingham:

- New medicine service
- Community pharmacy seasonal influenza vaccination
- Community pharmacist consultation service
- Hypertension case-finding service
- Appliance use reviews
- Stoma Appliance Customisation service

At the time of data collection for this PNA, no data was available on the following newly commissioned service:

- Stop-smoking service in pharmacies for patients who started their stop-smoking journey in hospital

Other NHS pharmacy services

It is concluded that there is currently sufficient provision for the following other NHS services to meet the likely needs of residents in Wokingham:

- Needle exchange and supervised consumption
- Sexual health services
- Tailored dispensing services

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CONSULTATION DRAFT

Chapter 1 - Introduction

What is a Pharmaceutical Needs Assessment?

- 1.1 A PNA is the statement of the needs of pharmaceutical services of the population in a specific area. It sets out a statement of the pharmaceutical services which are currently provided, together with when and where these are available to a given population. This PNA describes the needs of the population of Wokingham.
- 1.2 Local pharmacies play a pivotal role in providing quality healthcare in local communities for individuals, families and carers. They not only provide prescriptions but can also be patients' and the public's first point of contact and, for some, their only contact with a healthcare professional.³
- 1.3 The provision of NHS Pharmaceutical Services is a controlled market. Any pharmacist, dispensing appliance contractor or dispensing doctor who wishes to provide NHS Pharmaceutical Services, must apply to NHS England to be on the Pharmaceutical List.
- 1.4 The Pharmaceutical Needs Assessment identifies the local population needs for pharmacy services and how those needs are being fulfilled, or could be fulfilled, by pharmaceutical services in different parts of the borough. The purpose of the PNA is to:
- Support the 'market entry' decision making process (undertaken by NHS England) in relation to applications for new pharmacies or changes of pharmacy premises.
 - Inform commissioning of enhanced services from pharmacies by NHS England, and the commissioning of services from pharmacies by the local authority and other local commissioners, for example Clinical Commissioning Groups (CCGs).
- 1.5 This document can also be used to:
- Assist the Health and Wellbeing Board (HWB) to work with providers to target services to the areas where they are needed and limit duplication of services in areas where provision is adequate.

³ PHE (2017). Pharmacy: A Way Forward for Public Health. Opportunities for action through pharmacy for public health.

- Inform interested parties of the pharmaceutical needs in the borough and enable work on planning, developing and delivery of pharmaceutical services for the population.

Legislative background

- 1.6 From 2006, NHS Primary Care Trusts had a statutory responsibility to assess the pharmaceutical needs for their area and publish a statement of their first assessment and of any revised assessment.
- 1.7 With the abolition of Primary Care Trusts and the creation of Clinical Commissioning Groups in 2013, Public Health functions were transferred to local authorities. Health and Wellbeing Boards were introduced and hosted by local authorities to bring together Commissioners of Health Services (CCGs), Public Health, Adult Social Care, Children's services and Healthwatch.
- 1.8 The Health and Social Care Act of 2012 gave a responsibility to Health and Wellbeing Boards for developing and updating Joint Strategic Needs Assessments and Pharmaceutical Needs Assessments.
- 1.9 This PNA covers the period between 1st October 2022 and 30th September 2025. It must be produced and published by 1st October 2022. The Health and Wellbeing Board are also required to revise the PNA publication if they deem there to be significant changes in pharmaceutical services before 30th September 2025.
- 1.10 The NHS Pharmaceutical Services and Local Pharmaceutical Services Regulations 2013 and the Department of Health Information Pack for Local Authorities and Health and Wellbeing Boards⁴ provide guidance on the requirements that should be contained in the PNA publication and the process to be followed to develop the publication. The development and publication of this PNA has been carried out in accordance with these Regulations and associated guidance.

⁴ Department of Health and Social Care (October 2021). [Pharmaceutical needs assessments: information pack](#).

Minimum requirements of the PNA

1.11 As outlined in the 2013 regulations, the PNA must include a map showing the premises where pharmaceutical services are provided and an explanation of how the assessment was made.

This includes:

- How different needs of different localities have been taken into account
- How needs of those with protected characteristics have been taken into account
- Whether further provision of pharmaceutical services would secure improvements or better access to pharmaceutical services
- A report on the 60-day consultation of the draft PNA.

1.12 The PNA must also include a statement of the following:

- **Necessary Services – Current Provision:** services currently being provided which are regarded to be “necessary to meet the need for pharmaceutical services in the area”. This includes services provided in the borough as well as those in neighbouring boroughs.
- **Necessary Services – Gaps in Provision:** services not currently being provided which are regarded by the HWB to be necessary “in order to meet a current need for pharmaceutical services”.
- **Other Relevant Services – Current Provision:** services provided which are not necessary to meet the need for pharmaceutical services in the area, but which nonetheless have “secured improvements or better access to pharmaceutical services”.
- **Improvements and Better Access – Gaps in Provision:** services *not* currently provided, but which the HWB considers would “secure improvements, or better access to pharmaceutical services” if provided.
- **Other Services:** any services provided or arranged by the local authority, NHS England, the CCG, an NHS trust or an NHS foundation trust which affects the need for pharmaceutical services in its area or where future provision would secure improvement, or better access to pharmaceutical services specified type, in its area.

1.13 A draft PNA must be put out for consultation for a minimum of 60 days prior to its publication. The 2013 Regulations list those persons and organisations that the HWB must consult, which include:

- Any relevant local pharmaceutical committee (LPC) for the HWB area
- Any local medical committee (LMC) for the HWB area
- Any persons on the pharmaceutical lists and any dispensing GP practices in the HWB area
- Any local Healthwatch organisation for the HWB area, and any other patient, consumer and community group, which in the opinion of the HWB has an interest in the provision of pharmaceutical services in its area
- Any NHS Trust or NHS Foundation Trust in the HWB area
- NHS England
- Any neighbouring Health and Wellbeing board.

Circumstances under which the PNA is to be revised or updated

- 1.14** It is important that the PNA reflects changes that affect the need for pharmaceutical services in Wokingham. For this reason, the PNA will be updated every three years.
- 1.15** If the HWB becomes aware of a significant change to the local area and/or its demography, the PNA may be required to be updated sooner. The HWB will make a decision to revise the PNA if required. Not all changes in a population or an area will result in a change to the need for pharmaceutical services. If the HWB becomes aware of a minor change that means a review of pharmaceutical services is required, the HWB will issue supplementary statements to update the PNA.

Chapter 2 - Strategic context

- 2.1 This section summarises key policies, strategies and reports which contribute to our understanding of the strategic context for England's community pharmacy services at a national level and at a local level. Since PNAs were last updated in 2018, there have been significant changes to the wider health and social care landscape and to society. This includes but is not limited to the publication of the NHS Long Term Plan, the introduction of the Community Pharmacy Contractual Framework, a greater focus on integrated care, and the significant impact of the COVID-19 pandemic.

National context

Integration and Innovation. Department of Health and Social Care's legislative proposals for a Health and Care Bill⁵:

- 2.2 In recent years, the health and social care system has adapted and evolved to face a variety of challenges. With the population growing in size, people living longer, but also suffering from more long-term health conditions, and challenges from the COVID-19 pandemic, there is a greater need for the health and social care system to work together to provide high quality care. This paper sets out the legislative proposals for the Health and Care Bill which capture the learnings from the pandemic.
- **Working together to integrate care:** The NHS and local authorities will be given a duty to collaborate and work with each other. Measures will be brought forward to bring about Integrated Care Systems (ICSs) which will be comprised of an ICS Health and Care partnership, and an ICS NHS Body. The ICS NHS Body will be responsible for the day to day running of the ICS, whilst the ICS Health and Care Partnership will bring together systems to support integration and development which plan to address the systems health, public health and social care needs. A key responsibility for these

⁵ Department of Health & Social Care. Policy paper: Integration and innovation: working together to improve health and social care for all (updated February 2021). Available at: <https://www.gov.uk/government/publications/working-together-to-improve-health-and-social-care-for-all/integration-and-innovation-working-together-to-improve-health-and-social-care-for-all-html-version#executive-summary>

systems will be to support place-based working i.e. working amongst NHS, local government, community health, voluntary and charity services. The ICS will align geographically to a local authority boundary, and the Better Care Fund plan (BCF) will provide a tool for agreeing priorities.

- **Reducing bureaucracy:** The legislation will aim to remove barriers that prevent people from working together, and put pragmatism at the heart of the system. The NHS should be free to make decisions without the involvement of the Competition and Markets Authority (CMA). With a more flexible approach, the NHS and local authorities will be able to meet the current future health and care challenges by avoiding bureaucracy.
- **Improving accountability and enhancing public confidence:** The public largely see the NHS as a single organisation, and the same should happen at a national level. By bringing together NHS England, and NHS Improvement together, organisations will come together to provide unified leadership. These measures will support the Secretary of State to Mandate structured decisions, and enable the NHS to be supported by the government. With any significant service changes, these measures will ensure a greater accountability with the power for ministers to determine service reconfigurations earlier in the process.

2.3 The NHS Long Term Plan (2019)⁶

As health needs change, society develops, and medicine advances, the NHS needs to ensure that it is continually moving forward to meet these demands. **The NHS Long Term Plan (2019)** (NHS LTP) introduces a new service model for the 21st century and includes action on preventative healthcare and reducing health inequalities, progress on care quality and outcomes, exploring workforce planning, developing digitally-enabled care, and driving value for money. It sets out 13 key areas for improving and enhancing our health service over the next 10 years. These areas include:

1. Ageing well
2. Cancer
3. Cardiovascular disease
4. Digital transformation
5. Learning disabilities & autism

⁶ NHS. *The NHS Long Term Plan* (2019). <https://www.longtermplan.nhs.uk/>

6. Mental Health
7. Personalised care
8. Prevention
9. Primary care
10. Respiratory disease
11. Starting well
12. Stroke
13. Workforce

- 2.4** Pharmacies will play an essential role in delivering the NHS LTP. £4.5 billion of new investment will fund expanded community multidisciplinary teams aligned with the new primary care networks (PCNs). These teams will work together to provide the best care for patients and will include pharmacists, district nurses, allied health professionals, GPs, dementia workers, and community geriatricians. Furthermore, the NHS LTP stipulates that as part of the workforce implementation plan, and with the goal of improving efficiency within community health, along with an increase in the number of GPs, the range of other roles will also increase, including community and clinical pharmacists, and pharmacy technicians.
- 2.5** Research indicates that around 10% of elderly patients end up in hospital due to preventable medicine related issues and up to 50% of patients do not take their medication as intended. PCN funding will therefore be put towards expanding the number of clinical pharmacists working within general practices and care homes, and the NHS will work with the government to ensure greater use and acknowledgement of community pharmacists' skills and better utilisation of opportunities for patient engagement. As part of preventative healthcare and reducing health inequalities, community pharmacists will support patients to take their medicines as intended, reduce waste, and promote self-care.
- 2.6** Within PCNs, community pharmacists will play a crucial role in supporting people with high-risk conditions such as atrial fibrillation and cardiovascular disease. The NHS will support community pharmacists to case-find, e.g., hypertension case-finding. Pharmacists within PCNs will undertake a range of medicine reviews, including educating patients on the correct use of inhalers, and supporting patients to reduce the use of short acting bronchodilator inhalers and to switch to clinically appropriate, smart inhalers.
- 2.7** In order to provide the most efficient service, and as part of developing digitally-enabled care, more people will have access to digital options. The NHS app will enable patients to manage

their own health needs and be directed to appropriate services, including being prescribed medication that can be collected from their nearest pharmacy.

2.8 Health and Wellbeing Boards are required to produce Health and Wellbeing Strategies to set out how partners will meet local health needs, improve outcomes and reduce health inequalities within the borough.

2.9 Since the 2010 Marmot review, there have been important developments about the evidence around social determinants of health and the implementation of interventions and policies to address them. **Health Equity in England: Marmot review 10 years on**⁷, summarises the developments in particular areas that have an increase importance for equity. These include:

- Giving every child the best start in life by increasing funding in earlier life and ensuring that adequate funding is available in higher deprived areas.
- Improve the availability and quality of early years' services.
- Enable children, adults and young people to maximise their capabilities by investing in preventative services to reduce school exclusions.
- Restore per-pupil funding for secondary schools and in particular in 6th form and further education.
- Reduce in-work poverty by increasing national minimum wage.
- Increase number of post-school apprenticeships and support in-work training.
- Put health equity and well-being at the heart of local, regional and national economic planning.
- Invest in the development of economic, social and cultural resources in the most deprived communities

2.10 The objectives outlined in the Marmot review are intended to ensure that the healthy life expectancy gap between the least deprived and most deprived are reduced, and to ensure that all residents have accessibility to good health and educational services. More specific to health, community pharmacists are uniquely placed at the heart of communities to support patients to provide the public a range of public health interventions, weight management services, smoking cessation services and vaccination services. At present the role of

⁷ Health Equity in London: The Marmot Review 10 years on. Executive summary (2020): https://www.health.org.uk/sites/default/files/2020-03/Health%20Equity%20in%20England_The%20Marmot%20Review%2010%20Years%20On_executive%20summary_web.pdf

community pharmacies provide a pivotal role in promoting healthier lifestyle information and disease prevention.

Public Health England⁸ (PHE) Strategy 2020-2025⁹

- 2.11** The Office for Health Improvement and Disparities (OHID), formerly known as Public Health England (PHE), works to protect and improve the nation's health and reduce health inequalities by aiming to keep the public safe, work to prevent poor health, narrow down the health gap and support a strong economy. Guided by these aims, OHID have pledged to promote a healthier nation by tacking action on working to reduce preventable risk factors for ill health and working to reduce tobacco consumptions, obesity and the harmful use of drugs and alcohol. There will also be a focus on improving the health within early childhood to provide the best foundations of good health and prevent ill health in later adulthood. By strengthening the health protection system, there will be reduced pressures on responding to major incidents or pandemics. Additionally, strengthening public health systems will mean utilising technology to advice interventions, improve data, and strengthen the approach to disease surveillance. By working with partners locally, nationally, and globally the aim will be to help focus on reducing health inequalities.
- 2.12** Community pharmacies have an important role in driving and supporting these objectives as they provide the public with services around healthy weight and weight management, smoking cessation, and can provide information and advice around healthy start for children and families.

Community Pharmacy Contractual Framework (CPCF) 2019/20-2023/24¹⁰

- 2.13** This is an agreement between the Department of Health and Social Care (DHSC), NHSE&I and the Pharmaceutical Services Negotiating Committee (PSNC) which describes a vision for how community pharmacy will support delivery of the NHS Long Term Plan. The CPCF highlights and develops the role of pharmacies in urgent care, common illnesses, and prevention. It aims to “develop and implement the new range of services that we are seeking

⁸ NB: As of October 2021, PHE ceased to exist. Responsibilities formally undertaken by PHE are now the responsibility of OHID, UKHSA and NHS England.

⁹ [Public Health England Strategy 2020-2025 \(2019\)](#).

¹⁰ [Community Pharmacy Contractual Framework \(2019\)](#).

to deliver in community pharmacy”, making greater use of Community Pharmacists’ clinical skills and opportunities to engage patients. The deal:

- Through its contractual framework, commits almost £13 billion to community pharmacy, with a commitment to spend £2.592 billion over 5 years.
- Prioritises quality - The Pharmacy Quality Scheme (PQS) is designed to reward pharmacies for delivering quality criteria in: clinical effectiveness, patient safety and patient experience.
- Confirms community pharmacy’s future as an integral part of the NHS, delivering clinical services as a full partner in local primary care network (PCNs).
- Underlines the necessity of protecting access to local community pharmacies through a Pharmacy Access Scheme.
- Includes new services such as the NHS Community Pharmacist Consultation Service (CPCS), which connects patients who have a minor illness with a community pharmacy, taking pressure off GP services and hospitals by ensuring patients turn to pharmacies first for low-acuity conditions and support with their general health.
- Continues to promote medicines safety and optimisation, and the critical role of community pharmacy as an agent of improved public health and prevention, embedded in the local community.
- Through the Healthy Living Pharmacy (HLP) framework, requires community pharmacies to have trained health champions in place to deliver interventions such as smoking cessation and weight management, provide wellbeing and self-care advice, and signpost people to other relevant services.

Pharmacy Integration Fund (PhIF)¹¹

2.14 The PhIF and PCN Testbed programme will be used to test a range of additional prevention and detection services, which, if found to be effective and best delivered by a community pharmacy, could (with appropriate training) be mainstreamed within the CPCF over the course of the settlement period. Workstreams supported by the PhIF Programme include:

- GP referral pathway to the NHS CPCS.
- Hypertension Case-Finding Pilot - A model for detecting undiagnosed cardiovascular disease (CVD) in community pharmacy and referral to treatment within PCNs. Since October 2021 this has become an advanced pharmacy service.

¹¹ [NHS Pharmacy Integration Programme](#).

- Smoking Cessation Transfer of Care Pilot – hospital inpatients (including antenatal patients) will be able to continue their stop smoking journey within community pharmacy upon discharge. Since March 2022 this has also become an advanced pharmacy service, now known as the Smoking Cessation Service.
- Exploring the routine monitoring and supply of contraception (including some long-acting reversible contraceptives) in community pharmacy.
- Palliative Care and end of life medicines supply service building on the experience of the COVID-19 pandemic.
- Structured medication reviews in PCNs for people with a learning disability, autism, or both, linked with the STOMP programme.
- Workforce development for pharmacy professionals in collaboration with Health Education England (HEE), e.g., medicines optimisation in care homes; primary care pharmacy educational pathway; leadership; integrated urgent care; independent prescribing; enhanced clinical examination skills.

Local context

Annual Public Health Report 2020: Berkshire¹²

2.15 This report summaries and sets out plans to address the issues faced by the COVID-19 pandemic and inequalities, both locally and nationally. The reports highlight the inequalities that have been exacerbated by the pandemic. Across all age groups, disruption to services caused by lockdown is likely to have had immediate, medium-term, and long-term impacts. The report also highlighted areas of concern for the residents of Berkshire:

- **Employment:** Employment is a key determinant of health, but the pandemic resulted in many losing jobs, or entering the furlough scheme. Around 137900 people entered the furlough scheme across Berkshire, of which the highest areas were Slough, and the Royal Borough of Windsor & Maidenhead. This may have reflected the proportion of residents working within transport and hospitality, especially within the vicinity of London Heathrow.
- **Children and Young People:** Emerging evidence suggests that children and young people were hardest affected by social distancing and lockdown measures. Young people were more likely to lose jobs and reported higher levels of loneliness.

¹² Annual public health report (2020):https://www.berkshirepublichealth.co.uk/wp-content/uploads/2021/02/Public_Health_Annual_Report_2020_FINAL_Accessible_Version_2.pdf

Nationwide, there was a reduction in the uptake of MMR vaccinations for babies, and limited access to early years settings. Around 30% of parents did not feel that their children continued to learn in home settings, and lockdown impacted children's wellbeing. Children's visit to health services significantly reduced which meant less opportunities for health or safeguarding interventions. There are large numbers of vulnerable children and young people across Berkshire. For example, 12,680 children were eligible for school meals; 11,400 were living in over-crowded housing; 34,000 children were living in households with a parent with substance use, mental health issues or domestic violence; and over 3,000 young people were not in education or employment.

- **Safeguarding:** The COVID-19 lockdown and restrictions created factors that made some forms of abuse difficult to see and safeguard against. Some individuals may be at a higher risk due to their vulnerabilities, and certain forms of abuse such as honour-based violence or FGM are more common in particular communities. Nationally, within the first 3 weeks of lockdown, 14 women and 2 children were killed in suspected domestic abuse incidents. Within Berkshire, between 2018/2019, 35,000 children aged under 18 were exposed to mental health issues, and/or, domestic abuse within their households. There were 11 domestic homicides within the Thames Valley, and approximately 11,000 domestic abuse crimes reported to the Police within Berkshire, with an additional 6,000 reported for vulnerable adults.
- **Mental Health:** Prior to the COVID-19 pandemic, there were stark inequalities in mental health outcomes. We have seen these inequalities widen as a direct, and indirect result of the pandemic. Several groups are at an increased risk of mental health problems as a consequence of the pandemic, such as frontline workers, bereaved families, those who had COVID-19, those who lost their jobs or were furloughed, and people who had to self-isolate or shield.
- **Environmental Impact:** Transport disruptions during the pandemic resulted in a 17% fall in CO2 emissions, which provided evidence that pollution levels are responsive to policy. This is important to note because pollution levels are correlated with lower life expectancy and health conditions, and those on lower incomes are more likely to be living in condensed populations where noise and air pollution may be higher, with already existing health conditions. Data from 2016 shows that Reading and Slough have the poorest air quality. Certain strategies can be used to reduce CO2 levels and improve air quality such as public awareness around clean air, promoting public transport and improving infrastructure for cycling and walking.

Berkshire West Integrated Care System (ICS)¹³

2.16 In June 2017, Berkshire West had been recognised by NHS England (NHSE) as an ICS exemplar area covering 528,000 residents of Reading, Wokingham and Berkshire West. This forms as one of the 10 ICS across England.

The Berkshire ICS partnership consists of:

- Berkshire West Clinical Commissioning Group (CCG)
- Royal Berkshire Hospital Foundation Trust
- Berkshire Healthcare Foundation Trust – a community mental health foundation trust
- GP services within Berkshire West which will group together to form 4 neighbourhood alliances.

2.17 The Berkshire West ICS also works closely with the South Central Ambulance Trust, West Berkshire, Wokingham and Reading local authorities to achieve integrations between health and social care departments.

There are four key objectives of the Berkshire West ICS:

1. To improve the outcomes in population health
2. Tackle inequalities in health outcomes, experience and patient access
3. To enhance the productivity and value for money.
4. To help the NHS support broader social and economic development

Berkshire West Health and Wellbeing Strategy 2021-2030¹⁴

2.18 Health and Wellbeing Boards are required to produce Health and Wellbeing Strategies to set out how partners will meet local health needs, improve outcomes, and reduce health inequalities within the boroughs. Reading, West Berkshire and Wokingham Health and Wellbeing boards (HWBs) bring together local leaders from health and social care along with

¹³Berkshire West Integrated Care System. <https://www.berkshirewestccg.nhs.uk/about-us/how-we-work-with-others/bob-integrated-care-system-ics/>

¹⁴ Berkshire West Health & Wellbeing Strategy (2021-2030). https://www.westberks.gov.uk/media/51940/Berkshire-West-Health-and-Wellbeing-Strategy-2021-2030-Dec-2021/pdf/Berkshire_West_Health_and_Wellbeing_Strategy_2021_2030_Dec_20211.pdf?m=637770609397100000

the voluntary and community sector to improve the health and wellbeing needs of their local residents.

2.19 Whilst closing the health inequalities and recovery from COVID-19, the Berkshire West Health and Wellbeing Strategy 2021-2030 establishes five key priorities to enable all residents living in Reading, West Berkshire and Wokingham to live happier, healthier lives.

- **Reduce the differences in health between different groups of people:** Many people within the area experience health inequalities, including economically disadvantaged, isolated young people, refugees, asylum seekers people with disabilities, or those who may find it harder to communicate. Those who experience health inequalities may often be those who are at higher risk of poorer health outcomes. This priority aims to bridge that gap by encouraging closer working relationships between statutory bodies and the voluntary community sector, including working closely with ethnically diverse community leaders and the voluntary sector, unpaid carers, and self-help groups. The report highlights areas to ensure fairer access and support for those with most need by targeted health education, promoting digital inclusion in a way that empowers communities to take ownership of their own health.
- **Support individuals at high risk of bad health outcomes to live healthy lives:** Supporting people to live healthier lives is a priority across Reading, West Berkshire and Wokingham. Specific groups of people face a higher risk of bad health outcomes such as those with dementia, rough sleepers, unpaid carers, people who have experienced domestic abuse, people with learning disabilities. This priority will aim to raise awareness around dementia, support unpaid carers and allow them for a break from caring responsibilities, reduce the number of rough sleepers, promote awareness around domestic abuse and support victims, support people with learning disabilities, and increase the visibility and signpost people at risk of poorer health outcomes to access appropriate services.
- **Help children and families in early years:** The first 1001 days (pregnancy until the child is 2) are critical ages for development. This priority will aim to explore more integrated approaches to improve wellbeing through children centres, midwifery, health visiting, nursing, and will ensure that early year's staff will be training in trauma informed practice and care. Clear guidelines will also be published on how to access financial help and tackle stigma where it occurs.

- **Promote good mental health and wellbeing for all children and young people:** Mental health problems are the leading cause of disability in children and young people and can have long lasting effects. The priority will aim to adopt universal approaches for interventions and prevent the risk of poor mental health. The board will support a Whole School Approach to Mental Health which will embed wellbeing as a priority across the school environment, and will aim for early identification or at risk of developing a mental health condition so that children and young people can build on self-confidence and change behaviours.
- **Promote good mental health and wellbeing for all adults:** Adult mental health can have a ripple effect on their family and can affect their functioning in the role as parents or employees. The board will work with local communities and voluntary sector to re-build mental resilience, and tackle stigma. The board will aim to improve the access to support for mental health crises and develop alternative models which offer sustainable solutions such as peer-mentoring. By working with relevant professionals, there will also be plans to increase social prescribing to signpost and connect people to local services and organisations.

Berkshire West Integrated Care Partnership: Cancer Framework 2019-2024¹⁵

- 2.20** A Berkshire West Framework was developed in November 2016 to deliver the strategic priorities outlined in “Achieving World-Class Cancer Outcomes: A strategy for England”. The NHS Long Term plan also sets out ambitions and commitments to improve cancer outcomes and services over the next 10 years.
- 2.21** The framework has been jointly produced by Berkshire West Integrated Care Partnership (ICP) Cancer Steering Group, to improve outcomes for people affected by cancer within the region. The framework outlines local strategic objectives taking into account the local needs of Berkshire West patients:
- Promote healthy lifestyle choices to reduce cases of preventable cancers.
 - Deliver all nine cancer waiting time standards and ensure a faster access to treatment and shorter patient journey.
 - Increase the number of cancers diagnosed at stages 1 & 2 and improve 1 year survival rate by improving access to diagnostics.

¹⁵ Berkshire West Integrated Care Partnership: Cancer Framework (2019-2024).
<https://www.berkshirewestccg.nhs.uk/media/4493/berkshire-west-icp-cancer-framework-2019-2024-v16.pdf>

- Increase the uptake of Bowel, Breast and Cervical cancer screening, especially targeting screening inequalities and seldom health communities.
- Implement Vague Symptoms Pathway and Rapid Diagnostic Centre (RDC) at RBFT.
- Ensure all newly diagnosed cancer patients have access to appropriate personalised support as part of the recovery package.
- Ensure that RBFT have protocols in place for follow up of Breast, Prostate and Colorectal patients for systems for remote monitoring.
- Increase the number of patients supported to die in their place of choice.

2.22 Community pharmacies are well placed to support some of these local strategies, particularly when it comes to the health needs of the population. They provided frontline services during the COVID-19 pandemic, and continue to provide healthcare advice, and medication advice to the public. To meet the ambitions outlined by local strategies, community pharmacies can play an integral role in reducing health inequalities through targeting prevention early and helping to tackle obesity and high blood pressure.

Chapter 3 - The development of the PNA

- 3.1** The Wokingham Borough Council Health and Wellbeing Board (HWB) commissioned delivery of its PNA with Healthy Dialogues through a competitive tender process. The governance of the production of this PNA was managed by the PNA steering group and the Berkshire East Public Health Hub. The choices decisions in the production of this PNA have been delegated by the HWB to the steering group.
- 3.2** This PNA has been developed using a range of information sources to describe and identify population needs and current service provision from the network of community pharmacies (see Table 3.1). This includes:
- Nationally published data
 - The Wokingham Borough Joint Strategic Needs Assessment
 - Local policies and strategies such as the Joint Health and Wellbeing Strategy
 - A survey to Wokingham Borough pharmacy contractors
 - A survey to the patients and public of Wokingham
 - Local Authority and Buckinghamshire, Oxfordshire and Berkshire West (BOB) CCG commissioners

Table 3.1 PNA 2022-25 data sources

Health need and priorities	<ul style="list-style-type: none"> • National benchmarking ward and borough-level data from Office for Health Improvement and Disparities¹⁶ • Wokingham Borough Joint Strategic Needs Assessment¹⁷ • A range of GLA demographic data sets • Synthesis from a range of national datasets and statistics
Current Pharmaceutical Services	<ul style="list-style-type: none"> • Commissioning data held by the NHS England • Commissioning data held by Wokingham Borough Council • Commissioning data held by BOB CCG • Questionnaire to community pharmacy providers
Patients and the Public	<ul style="list-style-type: none"> • Patient and public survey

¹⁶Office for Health Improvement and Disparities (2022) Public Health Profiles: <https://fingertips.phe.org.uk/>

¹⁷Wokingham JSNA (2022). <https://jsna.wokingham.gov.uk/>

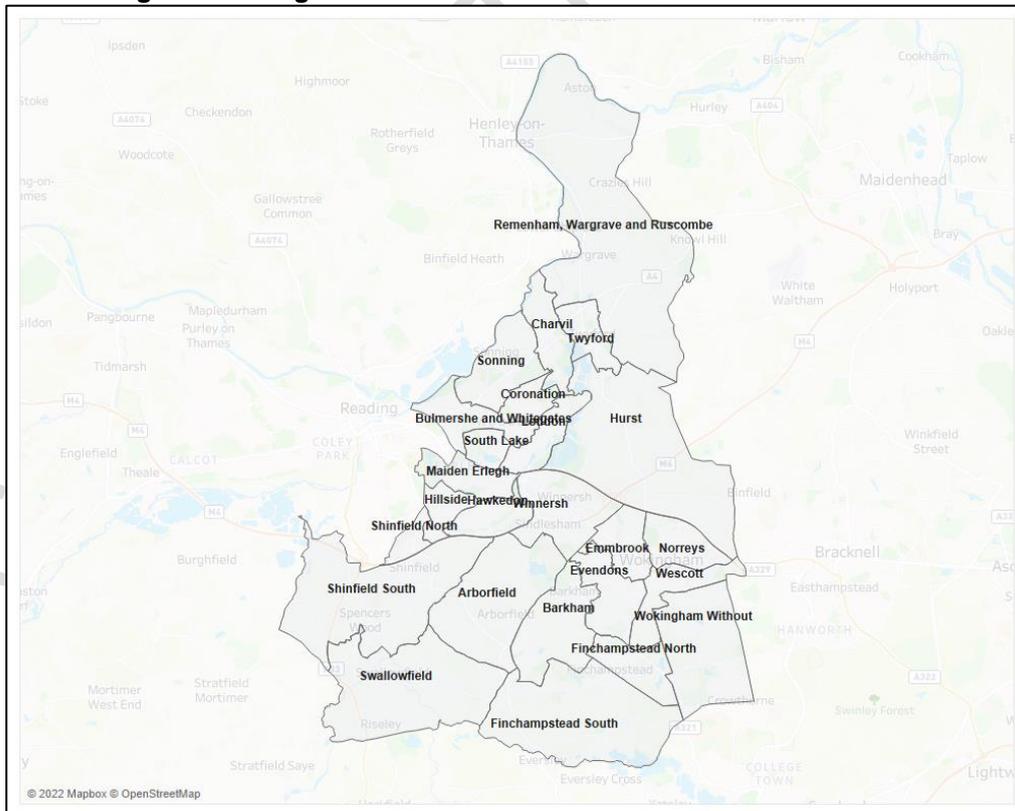
- 3.3 These data have been combined to describe the Wokingham Borough population, current and future health needs and how pharmaceutical services can be used to support the Health and Wellbeing Board (HWB) to improve the health and wellbeing of our population.
- 3.4 This PNA will be published for the minimum 60-day statutory consultation from 10th June to 9th August 2022. All comments will have been considered and incorporated into the final PNA final report.

Methodological considerations

Geographical Coverage

- 3.5 PNA regulations require that the HWB divides its area into localities as a basis for structuring the assessment. A ward-based structure was used as it is in-line with available population health needs data and enables us to identify differences at ward level with respect to demography, health needs or service provision commissioned by Wokingham Borough Council and NHS Commissioners. There are 25 wards in Wokingham, these are illustrated in Figure 3.1.

Figure 3.1: Wokingham Borough Council Electoral Wards



- 3.6** In this PNA, provision and choice of pharmacies has been determined by using a 1-mile radius from the centre of the postcode of each pharmacy. This is approximately a 20-minute walk from the outer perimeter of the buffer zone created.
- 3.7** This radius represents an area that is considered to have adequate pharmacy coverage. The coverage distance is a standard often used in PNAs covering urban areas and was chosen by the PNA Steering Group as being a reasonable measure to identify variation and choice in Wokingham (for example, see Figure 7.2). The 1-mile and travel time coverage was also explored in terms of deprivation and population density.
- 3.8** In addition, 20 minutes travel time by car is considered accessible.
- 3.9** Where areas of no coverage are identified, other factors are taken into consideration to establish if there is a need. Factors include population density, whether the areas are populated (e.g., Green Belt areas), travel time by public transport, and GP dispensing practices. These instances have all been stated in the relevant sections of the report.

Patient and public survey

- 3.10** Patient and public engagement in the form of a survey was undertaken to understand how people use their pharmacies, what they use them for and their views of the pharmacy provision.
- 3.11** Working with Healthwatch, communications teams and Community Engagement Leads a public and patient engagement plan was developed, identifying key user groups (including seldom heard groups) and how best to engage them for the survey.
- 3.12** There were 249 responses to the Wokingham survey, their views were explored, including detailed analysis of responses from Protected Characteristics populations. Responses from the survey were used to understand how current pharmaceutical services meets the needs of the Wokingham population and whether there were any different needs for people who share a protected characteristic in Wokingham. The findings from the survey are presented in Chapter 6 of this PNA.

Pharmacy contractor survey

- 3.13** The contractor survey was sent all 21 community pharmacies within Wokingham Borough and 12 pharmacies responded. The results from this survey are referred to throughout this document.

Governance and Steering Group

3.14 The development of the PNA was advised by a Steering group whose membership included representation from:

- Berkshire East Public Health Team
- Frimley Health and Care, Medicines Optimisation
- Buckinghamshire, Oxfordshire and Berkshire West (BOB), Integrated Care System (ICS), Medicines Optimisation
- Pharmacy Thames Valley, the Local Pharmaceutical Committee
- NHS England and NHS Improvement – South East Region
- Healthwatch teams in Berkshire
- A patient representative

3.15 The membership and Terms of Reference of the Steering Group is described in Appendix A.

Regulatory consultation process and outcomes

3.16 The PNA for 2022-25 will be published for statutory consultation on 10th June 2022 for 60 days and will also be open on the council website for public comment. All comments will be considered and incorporated into the final report to be published by 1st October 2022.

Chapter 4 - Demographics

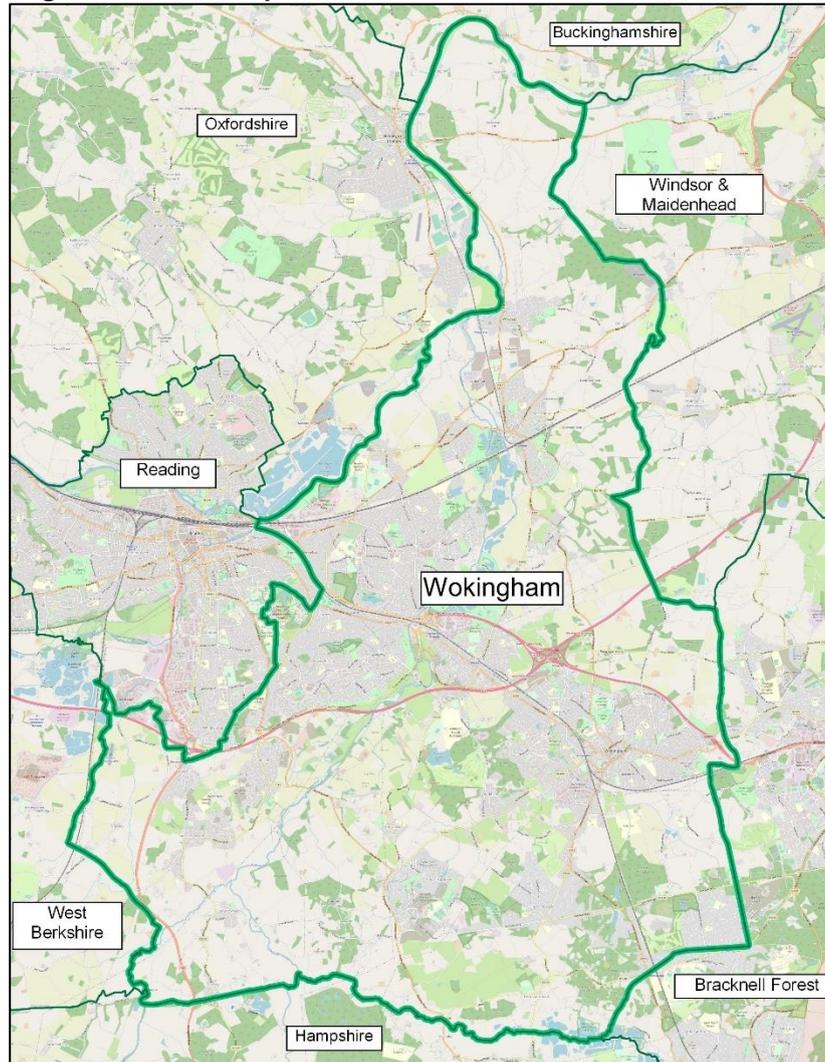
- 4.1 This chapter presents an overview of population demographics of the Wokingham Borough, particularly the areas likely to impact on needs for community pharmacy services. It includes an overview of the area of Wokingham, its population demographics and projected population. Using most recent available census data, it also identifies key factors that impact on inequalities.
- 4.2 The analysis of health needs and population changes are outlined in four sub-sections of this chapter. These are:
1. Local area profile
 2. Demography
 3. Population projections
 4. Inequalities

Wokingham local area profile

Location

- 4.3 Wokingham is a unitary authority in Berkshire, South East England, at the heart of the Thames Valley and lies 33 miles west of London. It sits between the larger towns of Reading and Bracknell, and the town is a constituent part of the Reading/Wokingham Urban Area. Wokingham is a market town which has been developed over the past 80 years.
- 4.4 The authority covers an area of some 179 square kilometres (17,908 hectares) and is centred on the market town of Wokingham. The main settlement in the borough is Earley, with Wokingham being the second largest settlement.
- 4.5 The area has easy access to the national motorway network via the A329 (M) which connects Wokingham to Reading and the rest of the motorway network at junction 10 of the M4. Wokingham is 30 minutes by road from Heathrow Airport and 60 minutes by road from Gatwick Airport. It also has good rail links to Reading and Central London. Neighbours of the borough include as Bracknell Forest, Windsor and Maidenhead, Reading, Oxfordshire, Buckinghamshire, West Berkshire and Hampshire.
- 4.6 Figure 4.1 provides a context map showing the main settlements in the borough, main transport routes, and the location of the borough in relation to other local authorities.

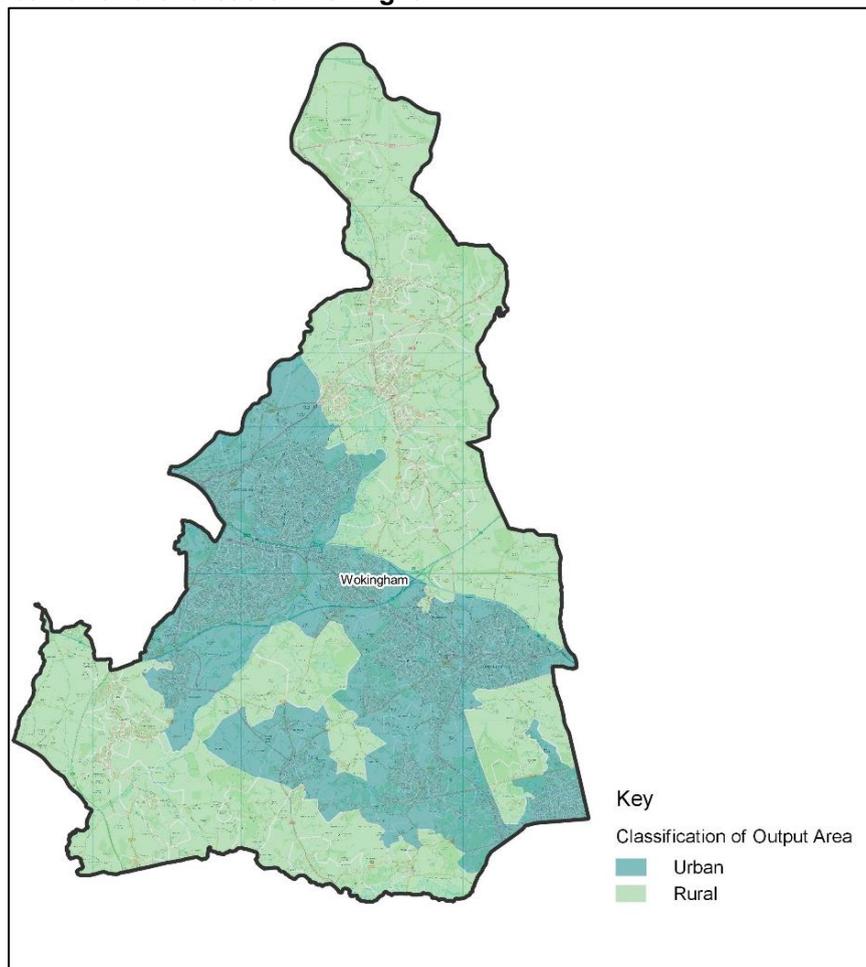
Figure 4.1: Wokingham Context Map



4.7 According to the 2011 census Urban-Rural Classification¹⁸, 82% of the borough's population live in urban city and town areas, 10% live in rural fringe areas and 8% of the borough's population live in rural areas (villages, hamlets and isolated dwellings) and rural fringe areas.

¹⁸ Department for Environment, Food & Rural Affairs (Defra), [2011 Urban Rural Classification](#) (2013)

Figure 4.2: Urban and rural areas of Wokingham



Geodemographic classification

4.8 The 2011 Output Area Classification¹⁹ enables us to explore the rural-urban divide in more detail by providing a geodemographic classification of output areas (an Output Area covers approximately 100 households). It classifies output areas using a broad range of variables such as age, rurality, housing stock, ethnic group, working status etc. There are eight broad supergroups in the classification these are presented for West Berkshire in Figure 4.3.

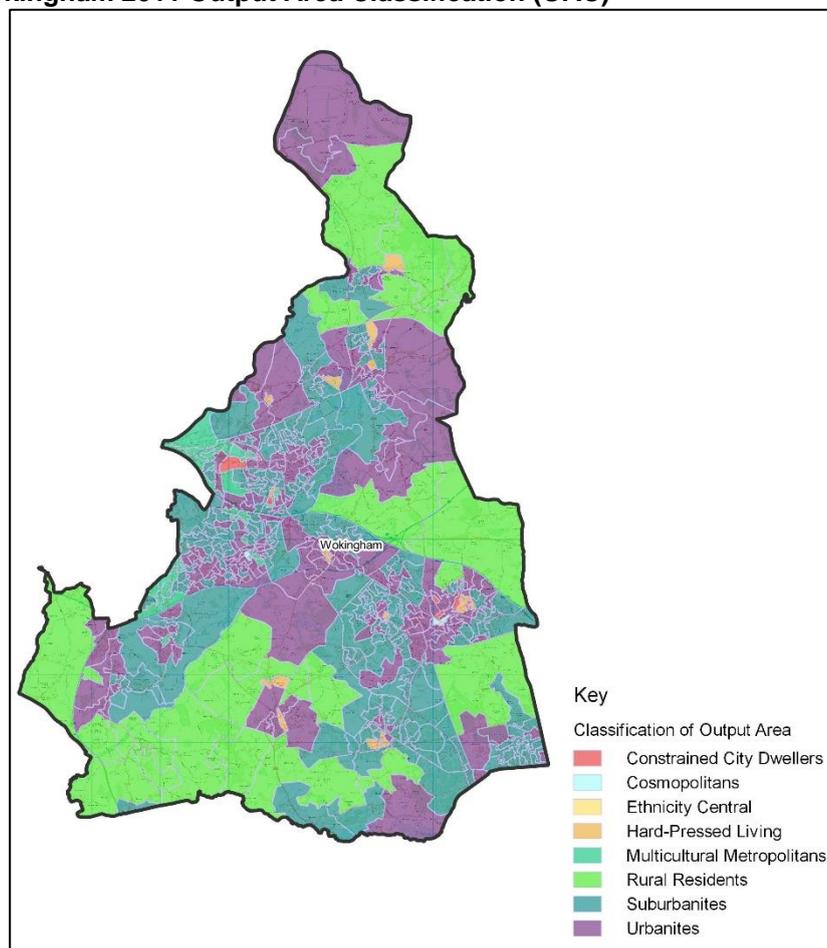
4.9 According to the geodemographic classification of Wokingham:

- 38% of the population live in areas classified as 'urban'
- 46% of the population live in areas classified as 'suburban'
- 4% of the population live in areas classified as 'rural'.
- 3% of the population live in areas classified as 'hard pressed living'

¹⁹ ONS, 2011 residential-based area classifications, 2011

- 1% of the population live in areas classified as ‘constrained city dwellers’
- Less than 1% of the borough’s population live in areas where there are high concentrations of ethnic groups (‘ethnicity central’ cluster)

Figure 4.3: Wokingham 2011 Output Area Classification (OAC)



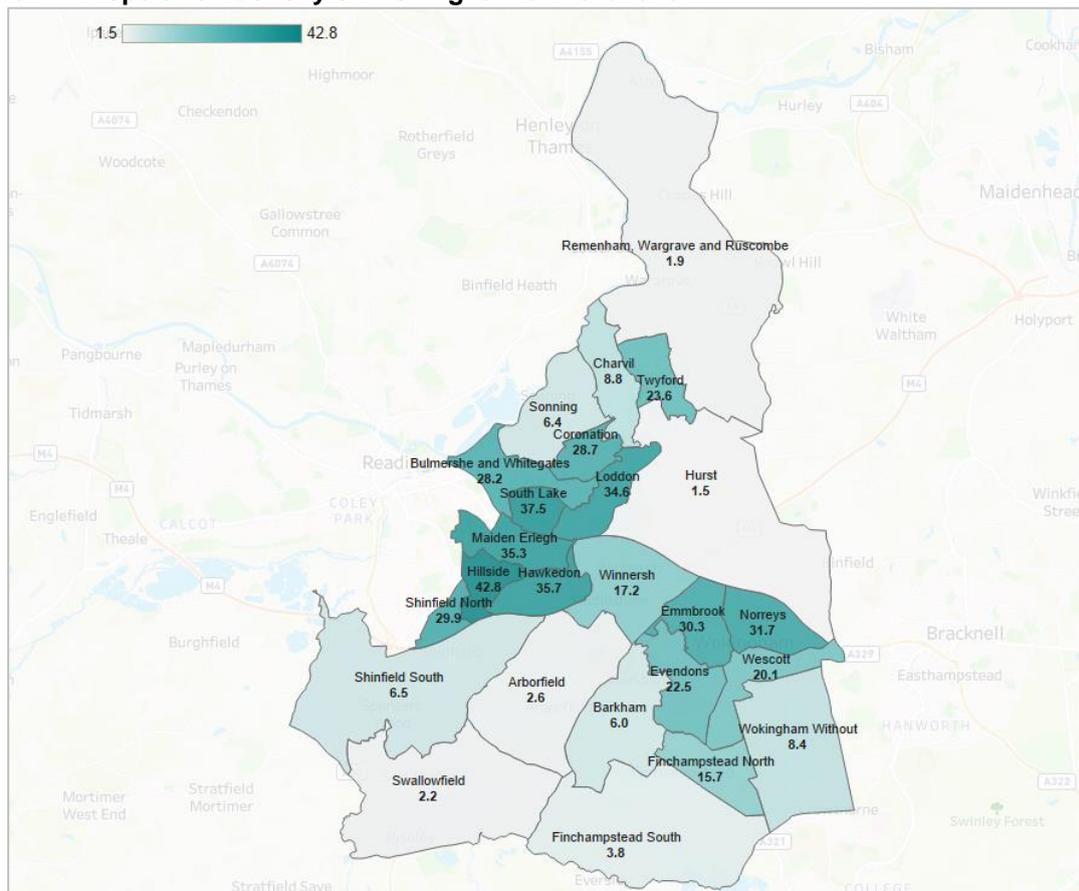
Demography

Population size and density

4.10 The population density of Wokingham is high. With a population of 173,945 the current population density is 9.7 persons per hectare (Mid-Year Population Estimates, 2020). This is double the figure of 4.8 persons per hectare for the South East region, and 4.3 persons per hectare for England as a whole.

4.11 Figure 4.4 presents population density of the borough at ward level. The highest population density is within Hillside ward, followed by South Lake, Hawkedon and Maiden Erlegh wards. The wards with lowest population density are generally located in the rural areas of the borough largely towards the North of the Borough; with Hurst ward having the lowest population density.

Figure 4.4: Population density of Wokingham at ward level

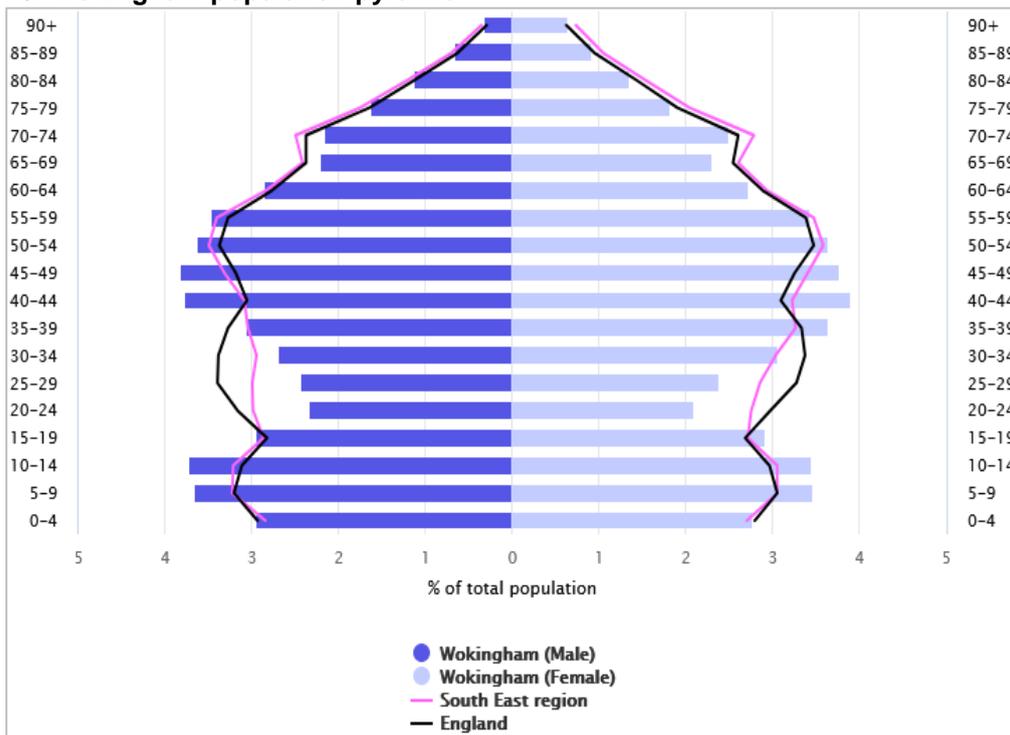


Source: ONS mid-2020 population estimates

Population age

- 4.12 The population has a median age of 41.6 years, which is slightly older than the median age for England (40.2 years), but broadly comparable to 41.9 years for the South East region.
- 4.13 21 % of the borough’s population are aged 0-15 years, 61% are of working age aged 16-64 years and 18% are aged over 65. The population pyramid in Figure 4.5 compares the proportion of males and females by five-year age bands with the line over the bars giving the equivalent percentages for England (Mid-Year Population Estimates, 2020).

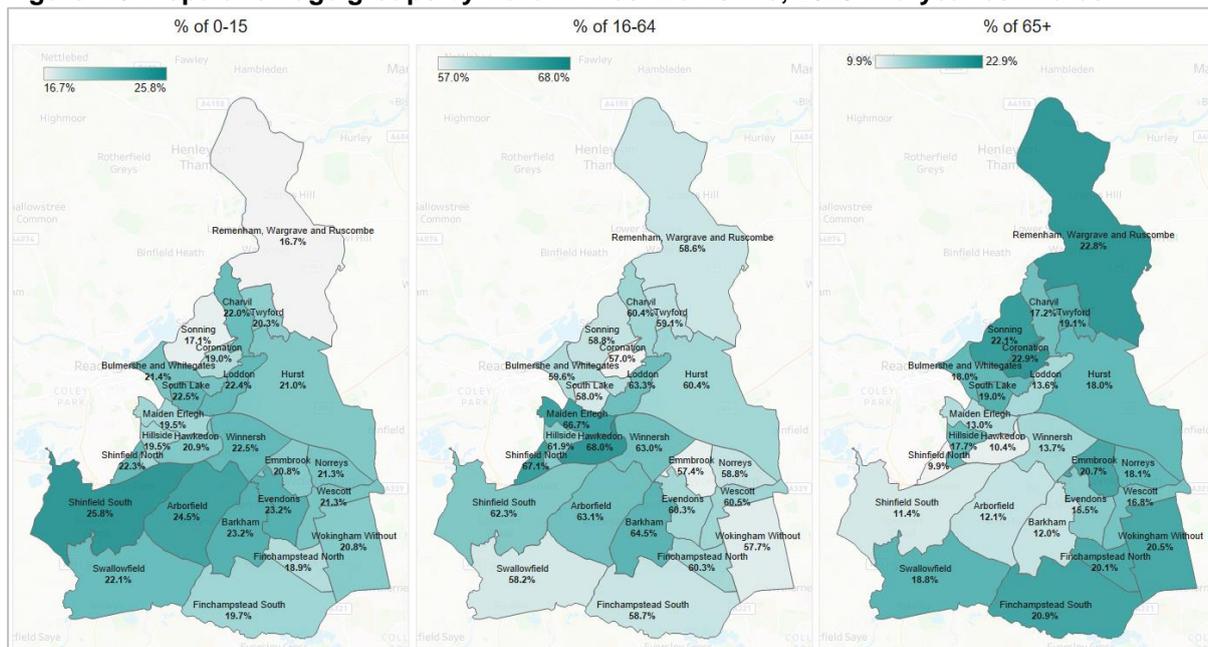
Figure 4.5: Wokingham population pyramid



Source: OHID, Public Health Outcomes Framework - ONS, Mid-Year Estimates, 2020

- 4.14 The age profile for the local authority is similar to the national picture across many of the age groups. The largest difference is the greater proportion of people in their 40's and 50's in Wokingham and a greater proportion of children aged 5 to 14 years old. There is also a smaller proportion of people aged 20 to 35 living in Wokingham when compared to England and South East England. Although the current older age population in Wokingham is proportionally similar to that of England, the fact that there is a large population aged in the 40's and 50's in Wokingham would indicate that we can expect Wokingham's population to age fairly quickly in the next 10 to 20 years.
- 4.15 Shinfield South and Arborfield are the wards with the largest proportion of the population who are aged 0 to 15, while Coronation and Remenham, Wargrave & Ruscombe are the wards with the greatest proportion of those aged over 65 (Figure 4.6).

Figure 4.6: Population age groups by ward in West Berkshire, 2020 mid-year estimates



Source: ONS Mid-Year Estimates, 2020

Ethnicity and diversity

- 4.16 Cultural and language barriers can create inequalities in access to healthcare which can negatively affect the quality of care a patient receives and reduce patient safety and patients' satisfaction with the care they receive²⁰. However, pharmacy staff often reflect the social and ethnic backgrounds of the community they serve, making them approachable to those who may not choose to access other healthcare services.
- 4.17 NICE Guidance²¹ recommends that community pharmacists take into consideration how a patient's personal factors may impact on the service they receive. Personal factors would include, but not limited to, gender, identity, ethnicity, faith, culture or any disability. It also recommends that community pharmacists make use of any language skills staff members may have.
- 4.18 Based on data from the 2011 Census, Wokingham has a small ethnic minority make-up (Table 4.1). At the time of the 2011 census 88.4% of the population was 'White', which includes 'White British' as well as Irish and gypsy/traveller. Of those, 5% of the population was 'White Irish and White gypsy or Irish traveller'. 11.6% of the population was Black, Asian and Minority

²⁰ Al Shamsi, H., Almutairi, A. G., Al Mashrafi, S., & Al Kalbani, T. (2020). Implications of Language Barriers for Healthcare: A Systematic Review. *Oman medical journal*, 35(2), e122. <https://doi.org/10.5001/omj.2020.40>

²¹ NICE Guidance (2018), *Community Pharmacies, Promoting Health and Wellbeing (NG102)*

Ethnic, including 7.4% Asian/Asian British and 2.1% Mixed/multiple ethnic groups. Wokingham has a significant Gypsy Roma, Traveller population which is not fully reflected in the Census data. There were 256 caravans counted on authorised and unauthorised sites within Wokingham Borough during July 2021 (Department for Levelling Up, Housing and Communities, 2021) and 49 pupils in Wokingham schools were recorded to have a Gypsy, Roma, Traveller ethnic background during the January 2021 School Census (Department for Education, 2021)

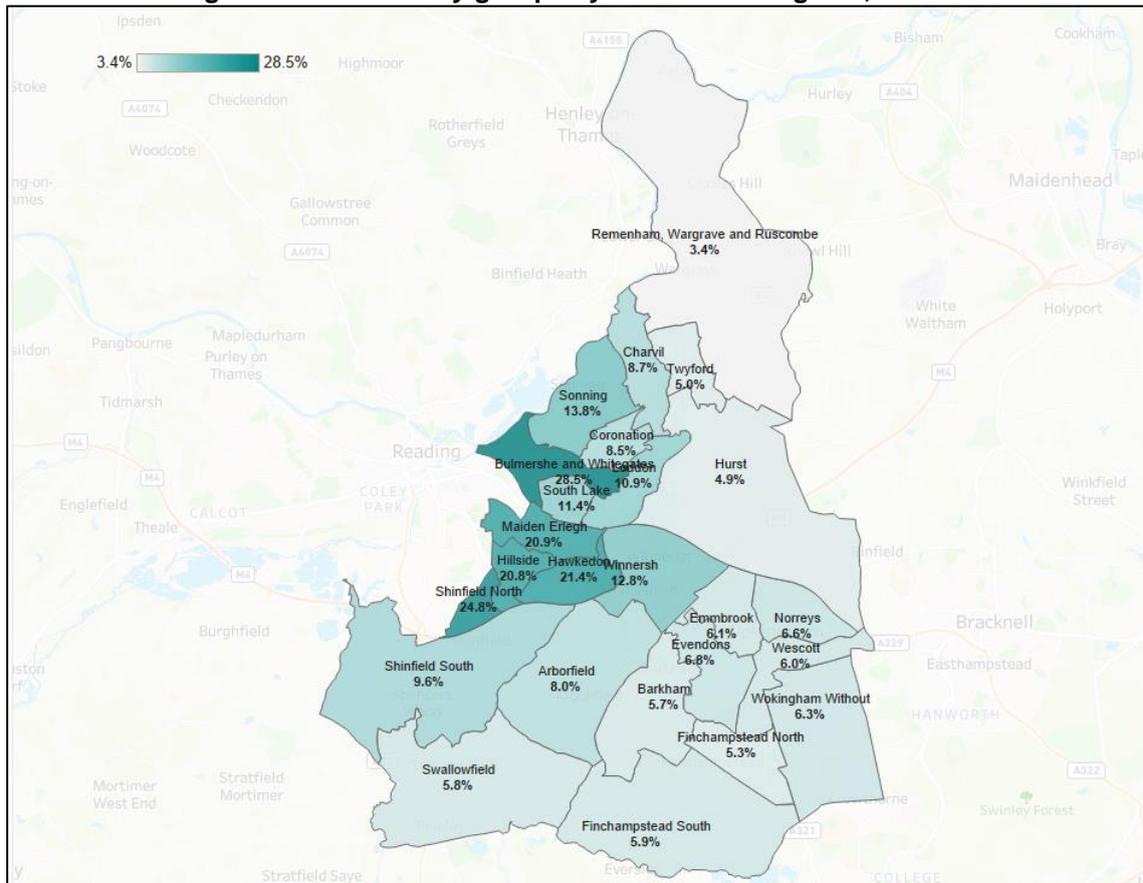
Table 4.1: Ethnicity of the population

White	Mixed/multiple ethnic groups	Asian/Asian British	Black/African/Caribbean/Black British	Other ethnic group
136,525 (88.4%)	3,182 (2.1%)	11,438 (7.4%)	2,093 (1.4%)	1,142 (0.7%)
England: 85.4% South East: 90.7%	England: 2.3% South East: 1.9%	England: 7.8% South East: 5.2%	England: 3.5% South East: 1.6%	England: 1.0% South East: 0.6%

Source: 2011 census

- 4.19** Figure 4.7 presents the ethnicity breakdown of the borough by ward, showing the proportion of the population from Black, Asian and Minority Ethnic groups. The map shows that the wards which have the highest proportions of residents from Black, Asian and Minority Ethnic groups are Bulmershe and Whitegates ward (28.5%) and Shinfield North (24.8%) the wards with the lowest proportions of residents from Black, Asian and Minority Ethnic groups are Remenham, Wargrave & Ruscombe (3.4%) and Hurst (4.9%) wards.

Figure 4.7: Percentage of ethnic minority groups by ward in Wokingham, 2011



Source: ONS, 2011 Census

4.20 The main campus of the University of Reading is located in Bulmershe and Whitegates ward. Some students attending the University of Reading also live in Shinfield, and this may, in part, account for their being a higher proportion of residents from Black, Asian and Minority Ethnic groups within these wards.

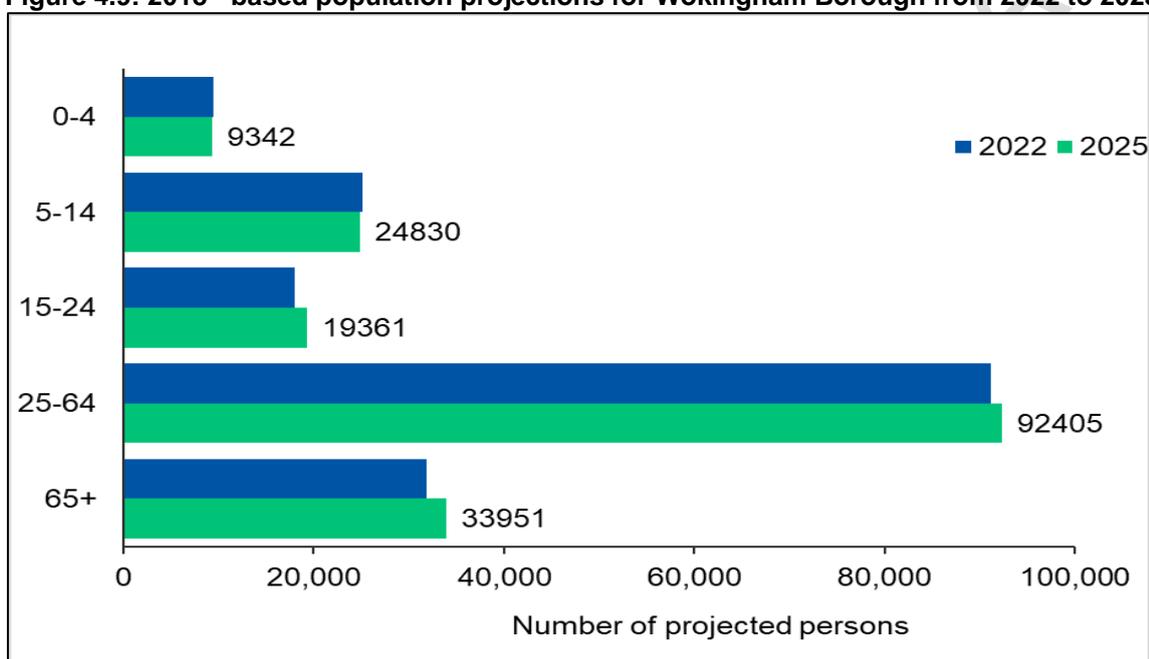
Language

4.21 Based on data from the 2011 Census, 93.6% of households speak English as a main language in Wokingham. Table 4.2 below shows the language breakdown of households, identifying the number of households in Wokingham with one or more members who cannot speak English.

Population and projections

- 4.24** Several major expansion projects around the town are planned over the next decade, including a major redevelopment of the town centre, new north and south relief roads and at the former military base at nearby Arborfield Garrison.
- 4.25** The ONS 2018 subnational population projections indicate that the population of Wokingham will increase by 4,183 persons (2.4%) to 179,888 from 2022 to 2025. Figure 4.9 below shows the increases/decreases in population for Wokingham borough for key age groups for the years for the years 2022-2025 (the lifetime of this PNA).

Figure 4.9: 2018 - based population projections for Wokingham Borough from 2022 to 2025



Source: ONS: 2018 Population Projections - Local Authorities - SNPPZ1, published March 2020.

- 4.26** The majority of the population increase expected in the 15-24 and over 65 age groups. The population aged 15-24 years is expected to increase in Wokingham from 2022 to 2025 by 7.3%, the comparable figures for South East England and England are 3.7% and 3.3% respectively. The population aged over 65 years is expected to increase in Wokingham from 2022 to 2025 by 6.4%, the figure for South East England is 5.5% and the figure for England is 5.6%.

Future residential development and housing requirements in the borough

- 4.27** A number of major housing developments are underway in Wokingham. The Annual Monitoring Report from the authority²² anticipates that 3,451 dwellings are expected to be completed over the period 2021-2026 (Table 4.3). Figure 4.10 shows the strategic development locations in the borough where greater than 20 dwellings are expected to be completed over the period 2021-2026.

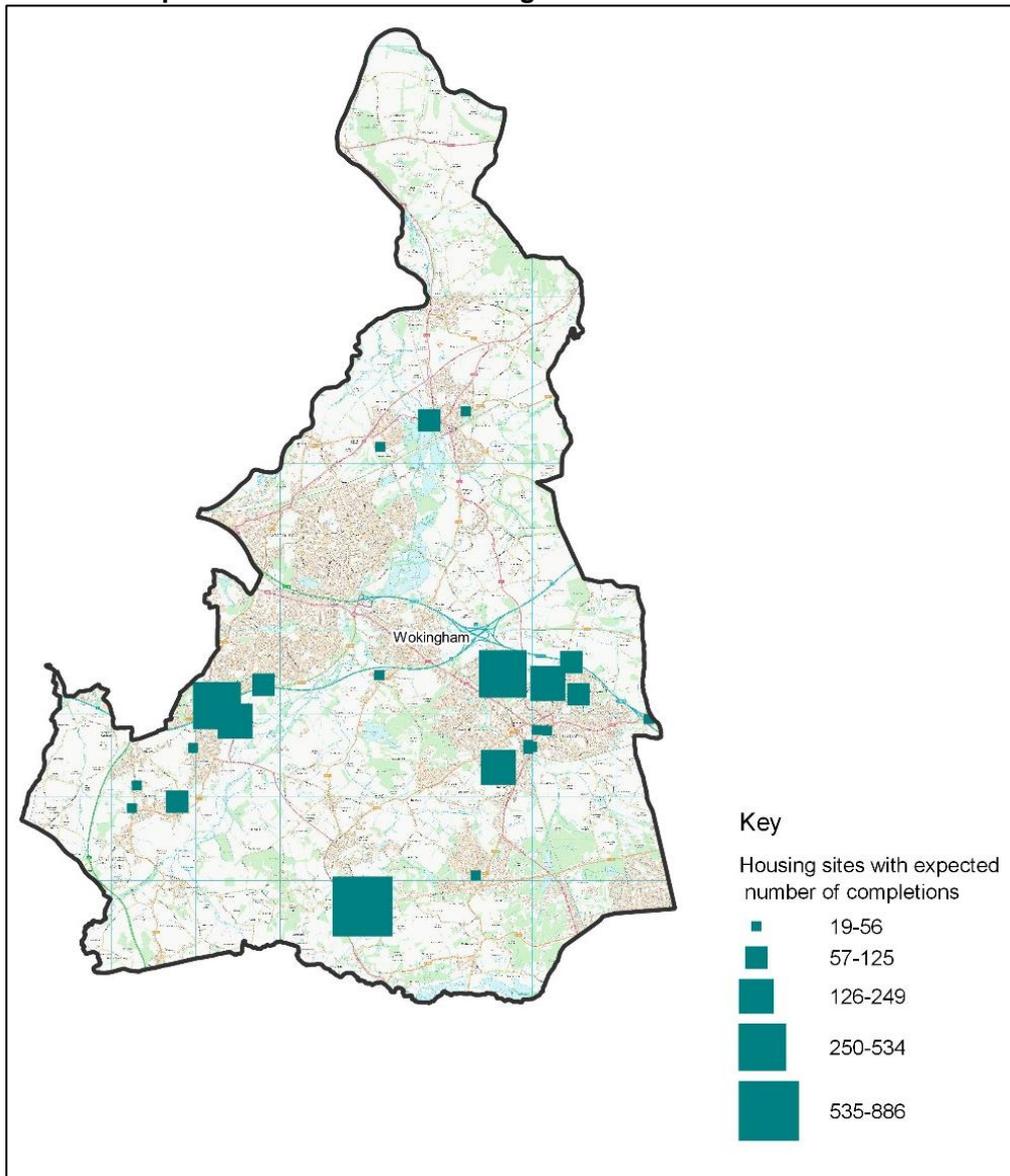
Table 4.3. Number of planned new dwellings by ward in Wokingham, 2021-2026

Ward	Number of planned new dwellings
Charvil Ward	25
Emmbrook Ward	379
Evendons Ward	211
Finchampstead South Ward	932
Hawkedon Ward	76
Hurst Ward	99
Norreys Ward	251
Remenham, Wargrave and Ruscombe Ward	40
Shinfield North Ward	534
Shinfield South Ward	509
Twyford Ward	107
Wescott Ward	252
Winnersh Ward	36
Total	3,451

Source: Wokingham Borough Council, Authority Monitoring Report, 2021

²² Wokingham Borough Council, Authority Monitoring Report, 01/04/2018 - 31/03/2020

Figure 4.10: Location of major residential housing development sites expected to be completed over the period 2021 – 2025 in Wokingham



Source: Wokingham Borough Council, Authority Monitoring Report, 01/04/2018 - 31/03/2020

4.28 The largest new dwelling developments are Arborfield Garrison with 886 new dwellings planned, West of Shinfield with 534 new dwellings planned and Matthewsgreen Farm in North Wokingham with 360 new dwellings planned.

Numbers of visitors (both home and overseas) to the borough

4.29 Wokingham receives a relatively low number of visits in comparison to its neighbouring boroughs. Based on 2016-18 data it receives an average of 2.12 million Tourism Day Visits

(TDVs) a year. This compares to around 4.9 million TDVs for nearby Reading, and 0.94 million TDVs for nearby Slough (GBDVS, 2022)²³.

Inequalities

Deprivation

- 4.30** Reducing the differences in health between different groups of people is a priority area for the Berkshire West Health and Wellbeing Strategy.²⁴ Fair Society, Healthy Lives: (The Marmot Review)²⁵ and later the Marmot Review 10 Years On²⁶ describe the range of social, economic and environmental factors that impact on an individual's health behaviours, choices, goals and ultimately health outcomes. They include factors such as deprivation, education, employment and fuel poverty.
- 4.31** The Index of Multiple Deprivation (IMD)²⁷ is a well-established combined measure of deprivation based on a total of 37 separate indicators that encompass the wider determinants of health and reflect the different aspects of deprivation experienced by individuals living in an area. The 37 indicators fall under the following domains: Income Deprivation, Employment Deprivation, Health Deprivation and Disability, Education, Skills and Training Deprivation, Barriers to Housing and services, Living Environment Deprivation and Crime.
- 4.32** Access to community pharmacy services in communities where there is high deprivation is important in addressing health inequalities. IMD deciles enable a comparison of deprivation in neighbourhoods across England. A decile of one, for instance, means, that the neighbourhood is among the most deprived 10% of neighbourhoods in England (out of a total of 32,844 neighbourhoods in England).
- 4.33** A Local Authority Summary of each index is compiled, which gives an average score and average rank for each Upper and Lower Tier Local Authority in England. Wokingham is the least deprived Upper Tier local authority in England.

²³ VisitEngland, VisitScotland, Visit Wales, [The Great Britain Day Visitor Annual Report, 2021](#).

²⁴ [Berkshire West Health & Wellbeing Strategy \(2021-2030\)](#).

²⁵ [Fair Society Healthy Lives \(The Marmot Review\)](#)

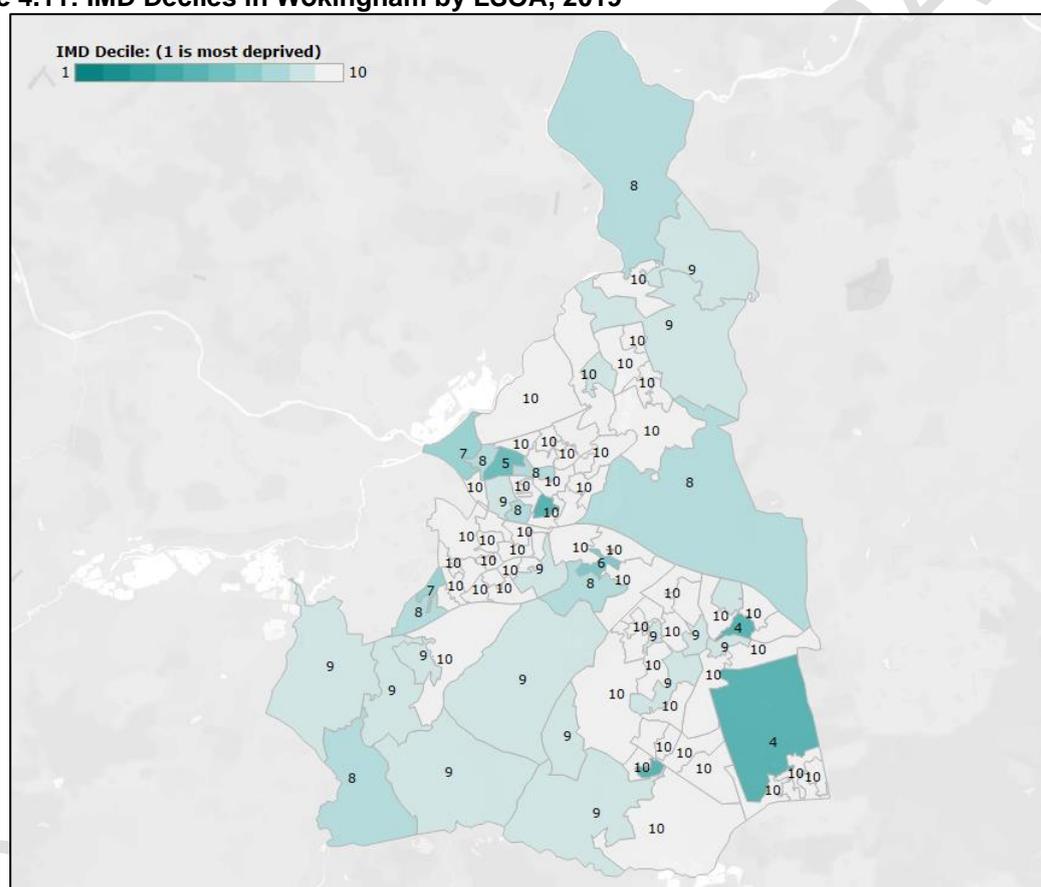
²⁶ [Marmot Review 10 Years On \(February 2020\)](#):

²⁷ Ministry of Housing, Communities and Local Government, English Indices of Deprivation, 2019

4.34 Wokingham has 99 neighbourhoods (LSOAs). The borough’s overall average IMD decile figure is 9.3 compared to the national figure of 5.5. This means there is far less deprivation in Wokingham than in England as a whole. In fact, it is one of the most affluent areas in England.

4.35 As seen in Figure 4.11, majority (66/90) of neighbourhoods in Wokingham are in the highest National decile of the IMD (deprivation decile of 10) meaning that they sit in the least deprived 10% of all neighbourhoods in England. Three neighbourhoods in the South East of the borough are in the 30% to 40% most deprived neighbourhoods nationally (situated in Norreys, Finchampstead South and Wokingham Without wards). Another neighbourhood in Woodley (Loddon ward) is also in the 30% to 40% most deprived neighbourhoods nationally.

Figure 4.11: IMD Deciles in Wokingham by LSOA, 2019



Source: Ministry of Housing, Communities & Local Government, 2019

Homelessness

4.36 The rate of homelessness in Wokingham is low. Between 1st July and 30th September 2021, 42 households in Wokingham were identified as statutory homeless with a further 36 threatened with homelessness within 56 days. This means that they are unintentionally homeless, or threatened with homelessness, and in priority need, with the local authority accepting a duty to prevent their homelessness (prevention duty) or help them secure

alternative accommodation (relief duty). This equates to a total rate of 1.16 per 1,000 households owed and relief or prevention duty in Wokingham between 1st July and 30th September²⁸ The rate of homelessness in Wokingham is significantly lower than the England rate of 2.86 and the South East rate of 2.31 per 1,000 households.

- 4.37** On 30th September 2021, 36 households were living in temporary accommodation provided under homelessness legislation in Wokingham. This was a rate of 0.53 per 1,000 households, which was significantly lower than the England figure of 4.06 per 1,000 households and South East England (2.82 per 1,000 households) (Department for Levelling up, Housing & Communities, Statutory Homelessness, 2022).
- 4.38** Pharmacists can play a role in helping improve the health and wellbeing of people who are homeless. Pharmacies are an accessible service that are often located in areas of high deprivation and need. They can help people who are homeless with support in areas such as medicines management and can provide signposting to other health and wellbeing services. 'Underserved' communities, such as those who are homeless or sleeping rough, people who misuse drugs or alcohol may be more likely to go to a community pharmacy than a GP or another primary care service²⁹.

Access to services and facilities

- 4.39** Data giving the location of areas within 15 mins travel time by public transport to main centres of population has been obtained from the Place-based carbon calculator website (<https://www.carbon.place/>).³⁰ It shows that over 90% of the Wokingham population within 15 minutes travel time by public transport of major centres of population, and the travel time contours can be seen in Figure 4.12 below.

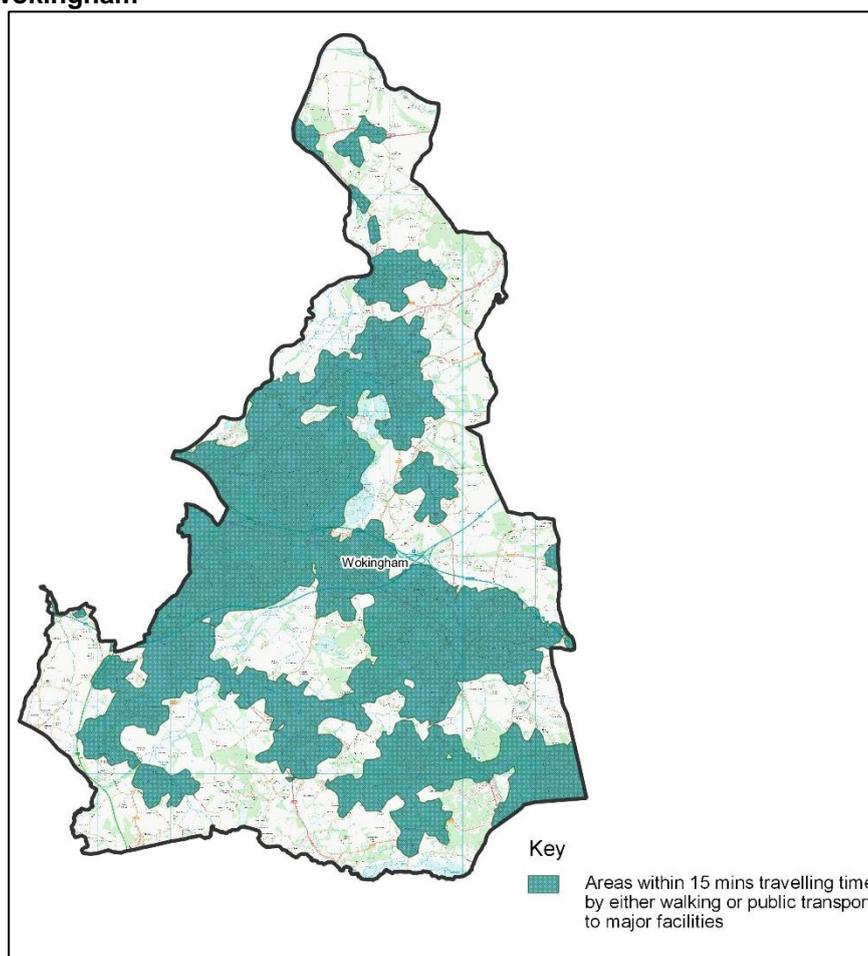
²⁸ Department for Levelling up, Housing & Communities, Statutory Homelessness, detailed Local Authority tables, July-September 2021, published January 2022

²⁹ NICE guidance (2018) Community pharmacies: promoting health and wellbeing [NG102].

<https://www.nice.org.uk/guidance/ng102>

³⁰ CREDS, [Place-based Carbon Calculator, July 2021](#)

Figure 4.12: Areas within 15 mins travelling time by either walking or public transport to major facilities in Wokingham



Source: Place-based carbon calculator website, 2022

Groups with specific needs

Students

- 4.40** The main campus of Reading University lies within Wokingham borough. The university is home to 22,480 students from 175 countries around the world and. 36% of students are from Black, Asian and Minority Ethnic backgrounds, and 12% have declared a disability.
- 4.41** As discussed under the relevant sections above, this may explain why some wards in Wokingham Borough such as Bulmershe and Whitegates ward and Shinfield North ward have

a younger population and also have high proportions of residents from black, Asian and minority ethnic backgrounds living in the area³¹.

4.42

Summary of population demographics

Wokingham is a densely populated and affluent urban unitary authority in Berkshire. However, there will still be masked pockets of deprivation with Wokingham Without and Norreys Wards identified as having high levels of deprivation according to the IMD.

Based on the 2011 Census, ethnic diversity is fairly low in the borough with approximately 12% of people are from Black, Asian and Minority Ethnic communities. Although at a ward level, larger proportions of Black, Asian and Minority Ethnic populations reside in Bulmershe and Whitegates ward which is likely to be driven, in part, by the student population living in this area.

There is a significant number of people from Gypsy, Roma, and Traveller communities living within the borough.

A number of new housing developments are underway and may bring additional residents to the area. In total the population is expected to grow by 2.4% with this growth highest in the 65 plus population and in the population aged 15 to 24.

³¹ University of Reading, At a Glance, 2020

Chapter 5 – Population health needs

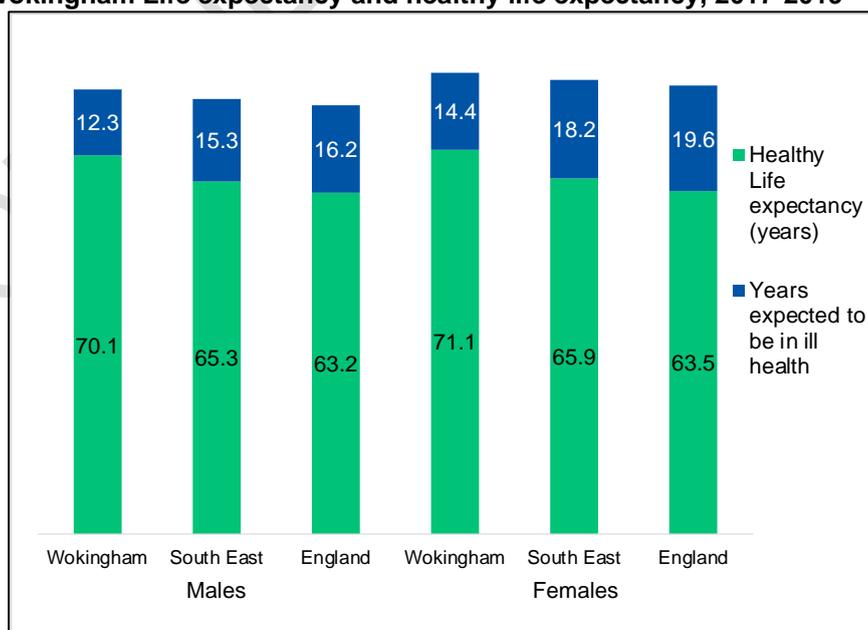
5.1 This chapter presents an overview of health and wellbeing in Wokingham, particularly the areas likely to impact on needs for community pharmacy services. It looks at life expectancy and healthy life expectancy in Wokingham and includes an exploration of health and behaviours and major health conditions.

Life expectancy and healthy life expectancy

5.2 Life expectancy is a statistical measure of how long a person is expected to live. Healthy life expectancy at birth is the average number of years an individual should expect to live in good health considering age-specific mortality rates and prevalence for good health for their area.

5.3 The total life expectancy for men in Wokingham is 82.4 and for women it is 85.5 years (2018-20 data). These are significantly higher than life expectancy figures for England as a whole as well as than the figures for the South East region. Healthy life expectancy for men living in Wokingham is 70.1 years and is slightly higher for women living in Wokingham at 71.1 years. Again, both of these figures are higher than the averages for the South East region and England. Figure 5.1 shows levels of life expectancy and healthy life expectancy in numbers of years for both men and women, for Wokingham, South East England and England as a whole (2017-19 data). This shows that, although women have more years of life expectancy in good health, they also live more years, on average in poor health compared to men.

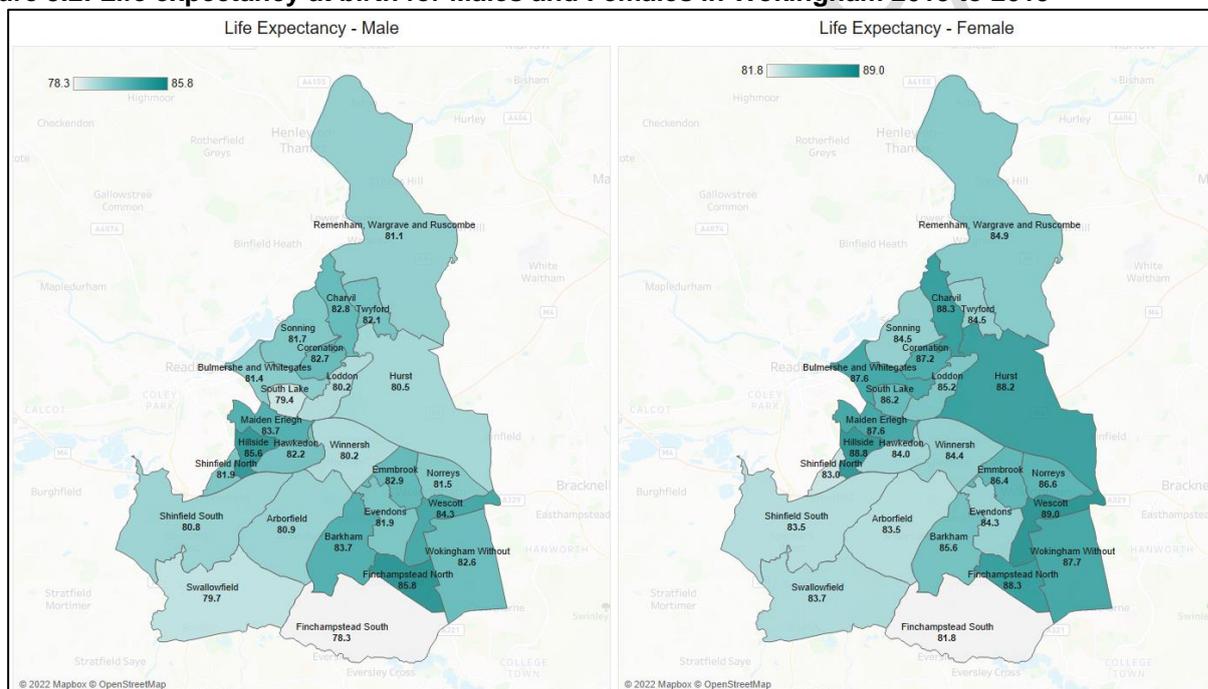
Figure 5.1: Wokingham Life expectancy and healthy life expectancy, 2017-2019



Source: OHID, Public Health Outcomes Framework, 2022

- 5.4** Despite Wokingham being one of the least deprived local authorities in England, there are still inequalities in life expectancy within the borough. Men living in the most deprived parts of the borough are expected to live 6.1 years less than those living in least deprived areas. This compares to 7.9 years for South East England and 9.7 years for England as a whole. The gap for women is lower at 4.5 years, compared to 6.0 years for South East England and 7.9 years for England as a whole. These figures are derived from the 2018-2020 slope index of inequality for life expectancy in years (OHID, Public Health Profiles, 2022).
- 5.5** At ward level, life expectancy is lowest in Finchampstead South for both males and females. Conversely, Finchampstead North residents have the highest life expectancy for males, at 85.8, with Wescott the equivalent for females, at 89.0 (figure 5.2).

Figure 5.2: Life expectancy at birth for Males and Females in Wokingham 2015 to 2019



Source: OHID, Local Authority Health Profiles, 2022

- 5.6** The life expectancy gap between Wokingham’s most and least deprived areas is attributable to different causes of death for men and women, and these issues are explored in the section below on long term health conditions.

Our Health and Behaviours

- 5.7** Lifestyle and the personal choices that people make can significantly impact on their health. Behavioural patterns contribute to approximately 40% of premature deaths in England, which is a greater contributor than genetics (30%), social circumstances (15%) and healthcare

(10%).³² While there are a large number of causes of death and ill-health, many of the risk factors for these are the same. Just under half of all years of life lost to ill health, disability or premature death in England are attributable to smoking, diet, high blood pressure, being overweight, alcohol and drug use.

- 5.8** Community Pharmacy teams support the delivery of community health programmes promoting interventions by, for example, engaging local public health campaigns and rolling out locally commissioned initiatives such as campaigns to encourage people to stop smoking, sexual health services and dementia friends. In addition, pharmacies are required to signpost people to other health and social care providers and provide brief advice where appropriate.
- 5.9** This section of the chapter explores different health behaviours and lifestyles that pharmacies can offer support, to improve the overall health of the population of Wokingham borough.

Smoking

- 5.10** Smoking is the single biggest cause of premature death and preventable morbidity in England, as well as the primary reason for the gap in healthy life expectancy between rich and poor. It is estimated that smoking is attributable for over 16% of all premature deaths in England and over 9% of years of life lost due to ill health, disability or premature³². A wide range of diseases and conditions are caused by smoking such as cancers, respiratory diseases and cardiovascular diseases.
- 5.11** Smoking prevalence is low in Wokingham. 5.5% of Wokingham's adult population aged 18+ smoke (2020 data), which is substantially lower than the percentage for England (12.1%) and for South East England of 11.1%. Smoking among those employed in routine and manual occupations is higher. 13.8% of routine and manual workers smoke, which is similar to the figure for England of 21.4%%, and also similar to the figure for South East England of 20.1% (OHID, Public Health Outcomes Framework, 2022).
- 5.12** Smoking prevalence rates are also monitored for pregnant women, due to the detrimental effects of smoking on the growth and development of the baby and health of the mother. The proportion of mothers who smoke in early pregnancy has continued to fall in Wokingham and was at 5% in 2018/19, compared to 12.8% for England and 11.3% for South East England.

³² Global Burden of Disease Collaborative Network. Global Burden of Disease Study 2015 (GBD 2015) Reference Life Table. Seattle, United States of America: Institute for Health Metrics and Evaluation (IHME), 2016.

Smoking status is also recorded at the time the baby is delivered. Although the percentage of women recorded as smokers at time of delivery in Wokingham is one of the lowest in England and significantly below the national and regional averages, the proportion has increased steadily and significantly from 3.8% in 206/17 to 6.2% in 2020/21 (OHID, Public Health Outcomes Framework, 2022).

Alcohol

- 5.13** Harmful drinking is a significant public health problem in the UK and is associated with a wide range of health problems, including brain damage, alcohol poisoning, chronic liver disease, breast cancer, skeletal muscle damage and poor mental health. Alcohol can also play a role in accidents, acts of violence, criminal behaviour and other social problems.
- 5.14** In Wokingham in 2020, there were 43 deaths classified as 'Alcohol-related mortality'. This is a rate of 26.4 per 100,000 population which is lower than the England rate of 37.8 and the rate for the South East region of 33.9.
- 5.15** Of people aged 18+ attending treatment for alcohol misuse in Wokingham in 2020, 41.5% of these people left treatment free of alcohol dependence and did not represent again within a 6-month period, this is a greater rate of success than the England average success rate of 35.3% and the South East region success rate of 35.6%. Though these differences are not statistically significant.
- 5.16** In 2020/21, there were 510 admission episodes (306.7 per 100,000 population) for alcohol-specific conditions in Wokingham. This is lower than the rate for England of 586.6 and lower than the rate for the South East region of 539.9 (OHID, Local Authority Health Profiles, 2022).

Drug misuse

- 5.17** In 2018-2020, there were 10 deaths from drug misuse in Wokingham. This is a rate of 2.15 per 100,000 population, which is lower than the rate for England of 5.02 per 100,000 population, and that for South East England of 3.97. The rate of hospital admissions due to substance misuse (15-24 years) was 89 per 100,000 population in 2018/19-2020/21, similar to the England rate of 81.2 per 100,000 population (OHID, Public Health Profiles, 2022).
- 5.18** In Wokingham in 2020, 6.1% of drug users aged 18 years and over successfully completed treatment for opiate drug use in 2020, which compares to a figure for England of 4.7% and for the South East of 5.7%. For successful completion of drug treatment for non-opiate users aged 18 years and over, the figures for Wokingham in 2020 were 34.8%, and comparable

figures for England and the South East region were 33.0% and 33.3% respectively (OHID, Local Authority Health Profiles, 2022).

Obesity

- 5.19** Obesity is recognised as a major determinant of premature mortality and avoidable ill health. It increases the risk of a range of diseases including certain cancers, high blood pressure and type 2 diabetes³³ and increases the risk of death from COVID-19 by 40- 90%. Obesity is indicated when an individual's Body Mass Index (BMI) is over 30.
- 5.20** Data collected in 2019/2020 by Public Health England based on the Active People Survey suggests that 60% of adults living in Wokingham are classified as being obese or overweight. These figures are slightly better than those for England (62.8%) though the difference is not statistically significant.
- 5.21** Childhood obesity is on the rise and can have significant impact on health outcomes. A child who is overweight or obese can have increased blood lipids, glucose intolerance, Type 2 diabetes, hypertension, increases in liver enzymes associated with fatty liver, exacerbation of conditions such as asthma and psychological problems such as social isolation, low self-esteem, teasing and bullying.
- 5.22** The COVID-19 pandemic is likely to have increased the number of children who are overweight or obese. The impact of the pandemic and lockdowns meant that routines of the children and their families were disrupted, thus hindering opportunities to maintain healthy lifestyle behaviours.
- 5.23** The National Child Measurement Programme measures the height and weight of children in their first and last year of primary school (Reception Year and Year 6). 21.2% of children in Reception Class in Wokingham in 2019/20 were overweight and obese, and 29.2% of Children in Year 6 were overweight or obese. These figures compare favourably to those for England (23% for children in reception, 35.2% for children in year 6) (OHID, Public Health Outcomes Framework, 2022).
- 5.24** As part of the Pharmacy Quality Scheme (PQS) 2021/22³⁴ pharmacies are now expected to help identify people who would benefit from weight management advice and provide an

³³ Public Health England (2017). Guidance: Health matters: obesity and the food environment.

³⁴ [Pharmacy Quality Scheme \(2021/22\)](#)

onward referral to local weight management support or the NHS Digital Weight Management Programme.

Physical activity

- 5.25** People who have a physically active lifestyle have a 20-35% lower risk of cardiovascular disease, coronary heart disease and stroke compared to those who lead a sedentary lifestyle. Physical activity is also associated with improved mental health and wellbeing. The Global Burden of disease found that physical inactivity is directly accountable for 5% of deaths in England and is the fourth leading risk factor for global mortality³².
- 5.26** Wokingham adults are slightly more active than the national and regional comparator. 67.6% of Wokingham adults undertook at least 150 minutes of moderate physical activity per week in 2020/21, this is better than the figure for England of 61% and the South East figure of 64%.
- 5.27** Less of the borough are physically inactive than comparators. 21.9% were considered physically inactive in 2021, lower than the England figure of 28% and the South East figure of 24.3% (Sport England, Active Lives survey, 2022).

Sexual health

- 5.28** Sexual health covers the provision of advice and services around contraception, relationships, sexually transmitted infections (STIs) and abortion. Public Health England states that the success of sexual and reproductive health services 'depends on the whole system working together to make these services as responsive, relevant and easy to use as possible and ultimately to improve the public's health'.³⁵
- 5.29** The rate of teenage pregnancies in Wokingham is one of the lowest in South East England. In 2020, there were 5.9 conceptions per 1,000 under 18s in Wokingham, fewer than half the national rate of 13 conceptions per 1,000 under 18s (OHID, Local Authority Health Profiles, 2022).
- 5.30** The rate of new STI diagnoses in Wokingham is lower than the national rate. In 2020, the all new STI diagnosis rate per 100,000 population (excluding chlamydia for those aged under 25) per 100,000 population for Wokingham was 368.2, lower than South East England (460.8) and England (619).

³⁵ PHE (2015). [Making it work - A guide to whole system commissioning for sexual health, reproductive health and HIV](#).

- 5.31** The STI testing rate is (excluding Chlamydia for those aged under 25) in 2020 was low. 2,578.4 per 100,000 population who accessed specialist sexual health services in Wokingham were tested. This figure is lower than that for England (4,549 per 100,000 population) and for the South East (4,007 per 100,000 population). The proportion of the 15 to 24-year old population screened for chlamydia is also lower than the England average: 7.7% in Wokingham compared to 14.3% in England during 2020 (OHID, Local Authority Public Health Profiles, 2022).
- 5.32** As noted previously in this report, the main campus of The University of Reading is within the Wokingham Local Authority area, just on the boundary between Wokingham and Reading. Some 23,000 students attend the University, and many live in the Shinfield and Earley areas to the South West of the borough, near the main University campus. This may influence STI rates experienced within the borough.

HIV

- 5.33** The number of people living with HIV in Wokingham is low. The latest figures show that there were 117 residents aged 15-59 years in Wokingham in 2020 living with diagnosed HIV. This equates to 1.18 per 1,000 population, lower than the national rates at 2.31 per 1,000 population, and lower than the regional figure at 1.85 per 1,000 population. 53.3% of people newly diagnosed with HIV Wokingham are diagnosed at a late stage, this is significantly worse than the England and South East averages of 42.4% and 48% respectively.
- 5.34** 90% of those newly diagnosed in 2018-20 received prompt antiretroviral therapy initiation, higher than the rate for England (83%) and for the South East Region (84%), although this difference is not statistically significant (OHID, Local Authority Public Health Profiles, 2022).

Flu vaccination

- 5.35** Population vaccination coverage for flu aged 65+ for 2020/21 in Wokingham was 77.2%, which is lower than the England percentage of 80.9% and the figure for South East England of 81.8%. However, the Wokingham figure hits the 75% population vaccination coverage target and recent trend for this indicator is increasing. Provisional data for 2021/22 shows an increase in coverage for Wokingham.
- 5.36** The population vaccination coverage for flu for at risk individuals (percentage of at-risk individuals aged 6 months-64 years) is 55.1% which was higher than the England average of 53.0% and but lower than South East average of 56.4%, but just meets the population

vaccination coverage target (OHID, Local Authority Public Health profiles, 2022). Provisional data for 2021/22 shows an increase in coverage for Wokingham.

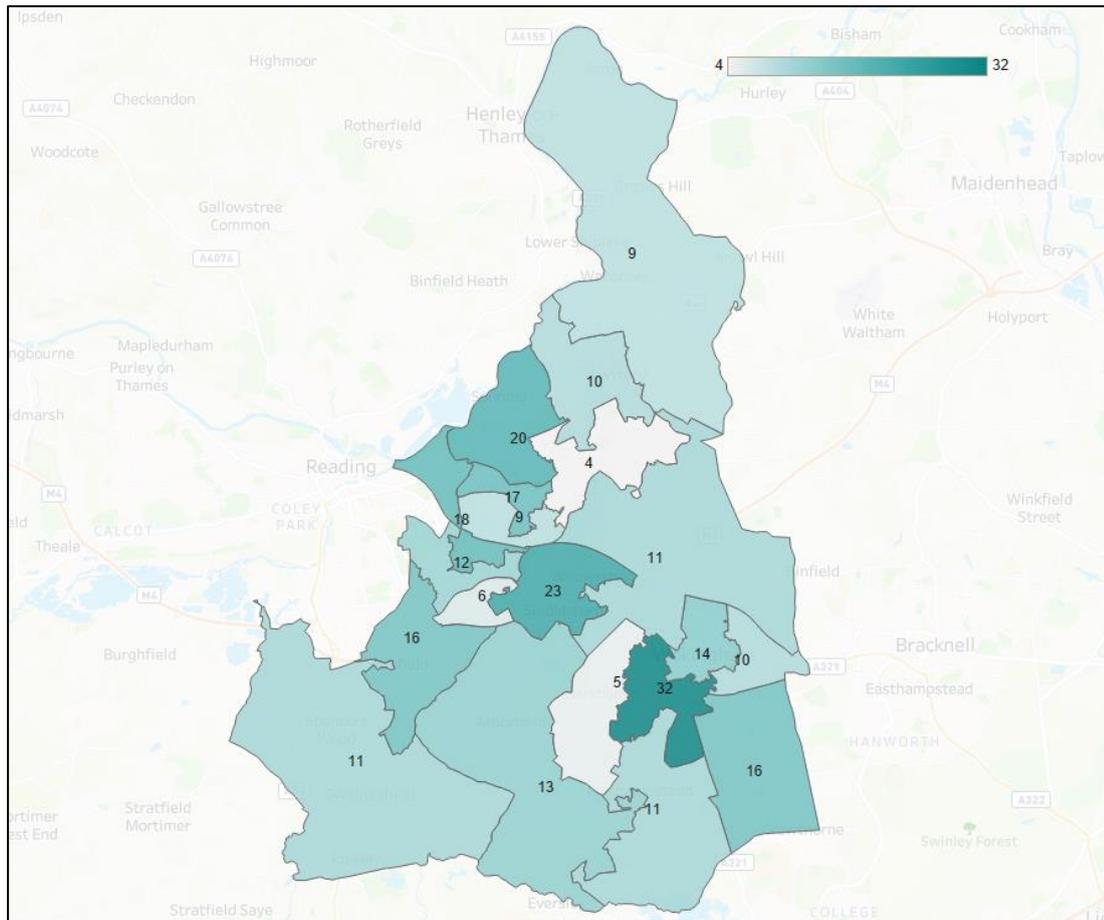
COVID-19

- 5.37** The COVID-19 pandemic has highlighted the impact of deprivation on health risks and health outcomes. COVID-19 morbidity and mortality has been more pronounced in more deprived areas and in those from ethnic minority groups who experience more social inequalities such as income, housing, education, employment, and conditions of work. Nationally, the people who have suffered the worst outcomes from COVID-19 have been older, of Black or Asian heritage and have underlying health conditions such as obesity or diabetes³⁶.
- 5.38** The rate of deaths by COVID-19 in Wokingham from March 2020 to April 2021 was lower than comparators with 135.3 deaths per 100,000 population. The rate for the South East region was 160.8 per 1,000 population, and the rate for England was 181.7 per 1,000 population. Figure 5.3 below presents the total number of deaths due to COVID-19 at MSOA level for Wokingham. The highest number of deaths were in Wexham Lea (ONS, 2022³⁷).

³⁶ PHE (2020). [Beyond the data: Understanding the impact of COVID-19 on BAME groups](#).

³⁷ ONS (2020): [Deaths due to COVID-19 by local area and deprivation](#).

Figure 5.3: Total number of deaths due to Covid by MSOA in Wokingham, March 2020 to April 2021



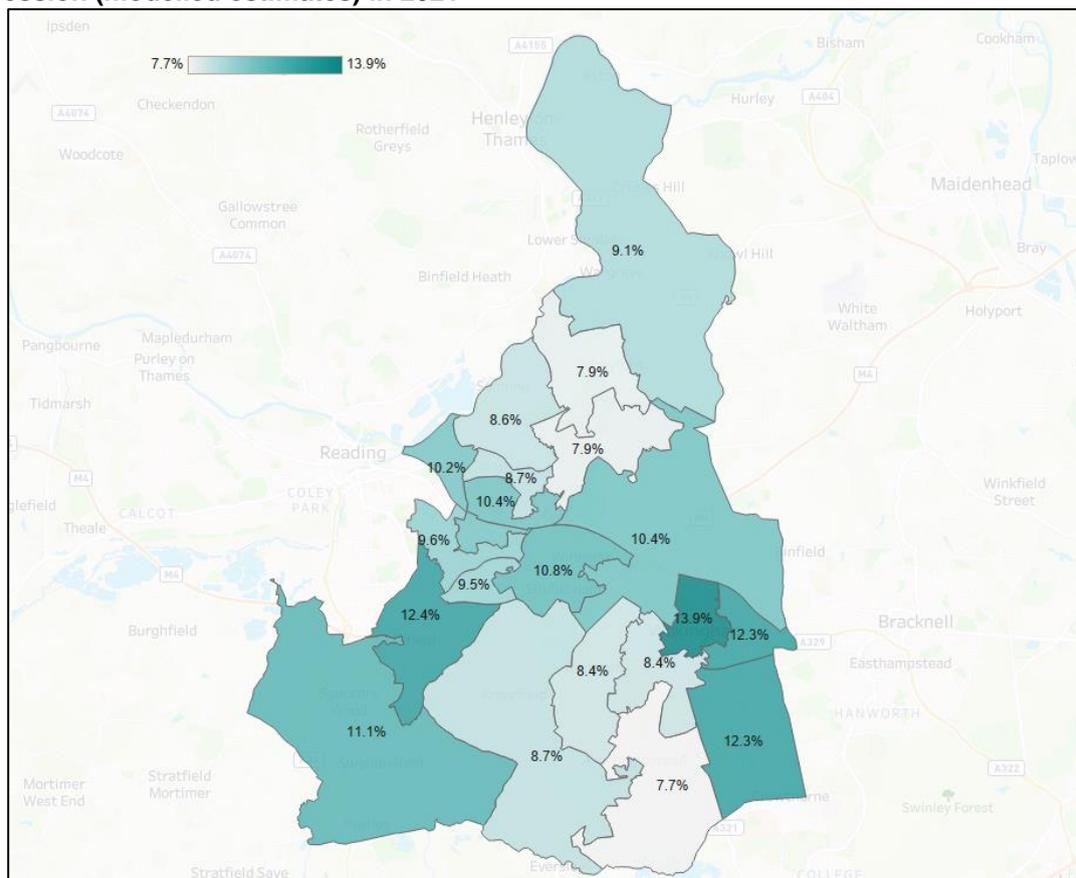
Source: ONS, deaths due to COVID-19 by local area and deprivation, May 2021

Mental health and wellbeing

- 5.39** Mental health and wellbeing is a priority area for the Berkshire West Health and Wellbeing Strategy.³⁸ Mental illness is the single largest cause of disability in the UK. At least one in four people will experience a mental health problem at some point in their life and one in six adults have a mental health problem at any one time.
- 5.40** Modelled estimates indicate that in 2019/20, 11% of GP patients aged over 18 have depression. This compares to a figure of 11.5% for England and 12% for the South East Region. Neighbourhoods in Wokingham with above average rates for GP patients diagnosed with depression include Lower Earley South (13.9%), Theale & Beenham (13.6%), Lower Earley North (12.4%), and Shinfield (12.3%) (Figure 5.4). It is important to note, these estimates are based on GP recorded prevalence and differences between areas may reflect differences in how GPs record and measure information about their patients, rather than genuine differences in the prevalence. Additionally, not all of those living with depression will have sought help and have depression recorded on their records.

³⁸ Berkshire West Health & Wellbeing Strategy (2021-2030). <https://www.bobstp.org.uk/berkshire-west/berkshire-west-integrated-care-system-ics/>

Figure 5.4: Percentage of GP registered patients in constituencies in Wokingham with depression (modelled estimates) in 2021



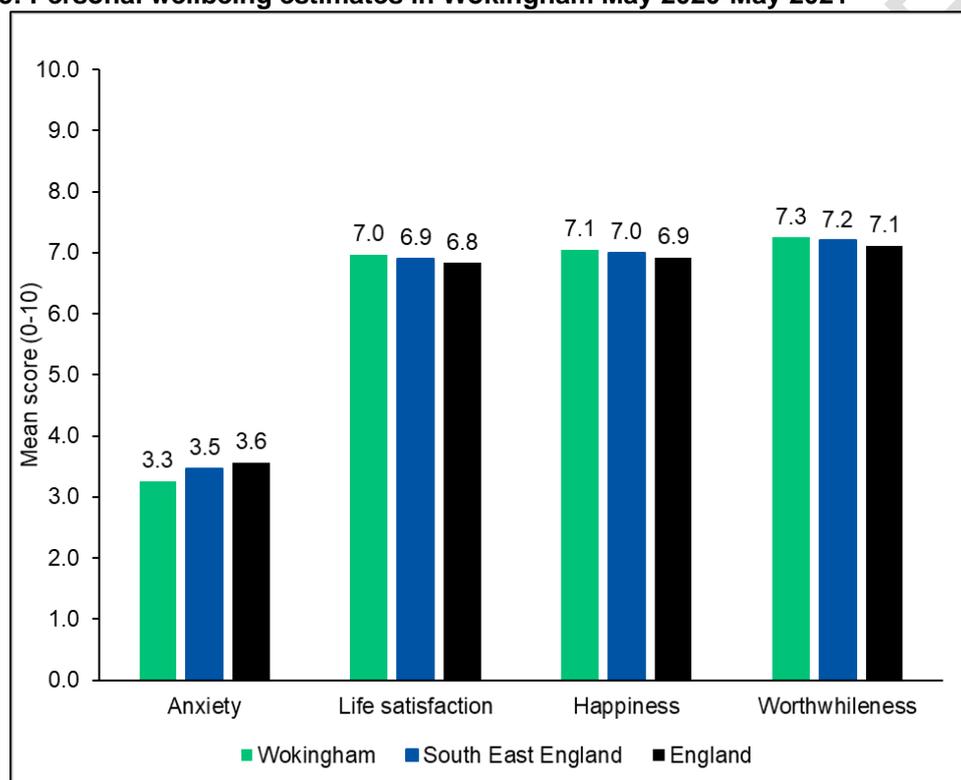
Source: House of Commons Library, Constituency data: health conditions, 2022.

- 5.41** An estimated 0.7% of GP patients in Wokingham Constituency have dementia. This compares to an England percentage of 0.8% and a South East percentage of 0.8%. Again, these estimates are based on GP recorded prevalence and differences between areas may reflect differences in how GPs record and measure information about their patients, rather than genuine differences in the prevalence. Additionally, not all of those living with dementia will have sought help and have a formal diagnosis.
- 5.42** An estimated 0.6% of GP patients in Wokingham have Schizophrenia, bipolar disorder and psychosis, this is lower than England (0.9%) and for the South East of England (0.8%)³⁹. As with the depression and dementia figures above, these estimates are based on GP recorded prevalence and differences between areas may reflect differences in how GPs record and measure information about their patients, rather than genuine differences in the prevalence.

³⁹ House of Commons Library, Constituency Data: [Health conditions, April 2021](#)

- 5.43** The ONS dataset 'Personal well-being estimates by Local Authority'⁴⁰ uses four measures to access personal well-being: life satisfaction, feeling the things done in life are worthwhile, happiness, and anxiety. Figure 5.5 below shows the results from the latest survey wave (2020-21), showing the mean score (0-10) for each of the variables. It highlights that Wokingham residents have slightly lower anxiety but higher England for Life Satisfaction, Happiness and Worthwhileness than the South East England and England overall.

Figure 5.5: Personal wellbeing estimates in Wokingham May 2020-May 2021



Source: ONS, Personal Wellbeing in the UK, 2021

Social Isolation and Loneliness

- 5.44** Social isolation and loneliness can impact people of all ages but is more prominent in older adults. It is linked to increased behavioural risk factors, poor mental health as well as morbidity and mortality from acute myocardial infarction and stroke⁴¹. The latest ONS data from 2011 found that 25.9% of Wokingham over 65s live alone (OHID, Public Health Profiles, 2022). This is the lowest rate in the region and lower the England rate of 31.5%.
- 5.45** The Adult social care survey explores isolation and loneliness in its analysis. Wokingham did not conduct a survey during 2019/20 so the results discussed are from the 2018.19 survey.

⁴⁰ ONS (2021). [Personal Wellbeing in the UK, 2020-2021](#).

⁴¹ Hakulinen C, Pulkki-Råback L, Virtanen M, et al (2018). Social isolation and loneliness as risk factors for myocardial infarction, stroke and mortality: UK Biobank cohort study of 479 054 men and women. *Heart*, 104:1536-1542.

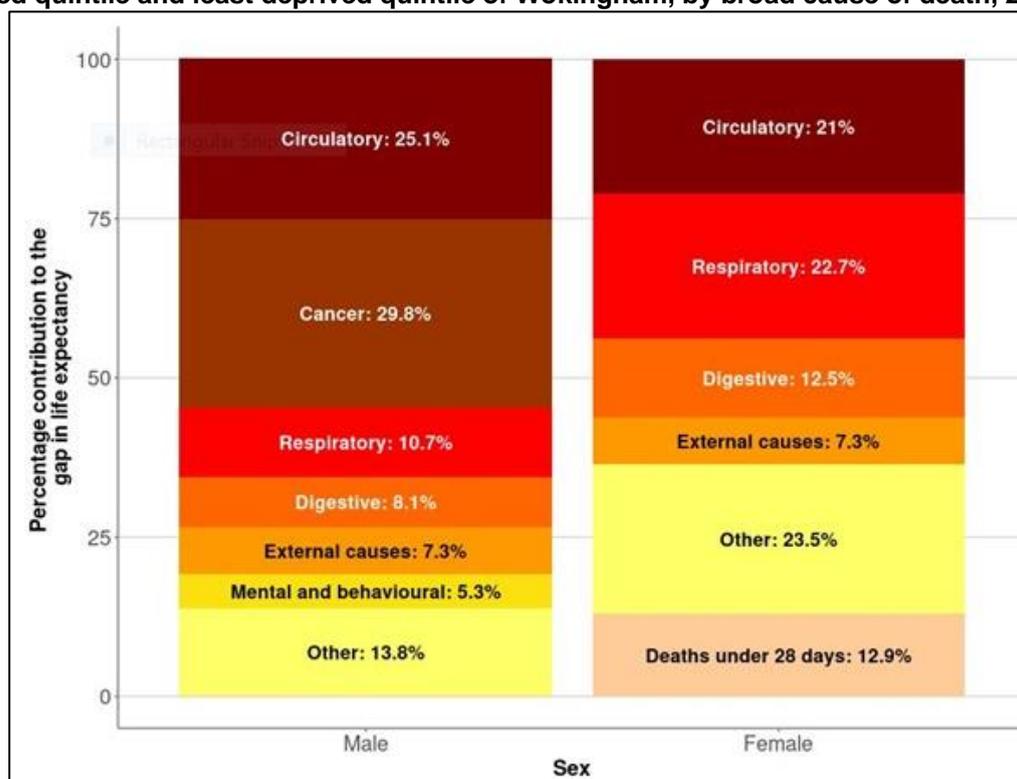
Findings show that in Wokingham, 42.1% users who responded to a survey have as much social contact as they would like. This is similar than national figures of 45.9% (2018/19 data). It highlights that more than half of older adults in receipt of social care do not have as much social contact as they would like and are likely feeling isolated and lonely (OHID, Public Health Profiles, Adult Social Care Survey, 2021).

- 5.46** Pharmacies have a role in supporting population mental health and wellbeing. They can help with early identification of new or worsening symptoms in patients, they can signpost make a referral to existing offers of support, and they can work with patients to ensure their safe and effective use of medications.

Major Health Conditions

- 5.47** The causes of life expectancy gap between the most deprived and least deprived populations within a borough provides a good indicator on what health conditions have a bigger impact on local populations and where a targeted approach is needed.
- 5.48** The stacked bar chart in Figure 5.6 show, for each broad cause of death the percentage contribution that it makes to the overall life expectancy gap in Wokingham. It highlights Circulatory Diseases as the biggest cause of the differences in life expectancy between deprivation quintiles in Wokingham, accounting for 25.1% and 21% of the gap for males and females respectively.

Figure 5.6: Scarf chart showing the breakdown of the life expectancy gap between the most deprived quintile and least deprived quintile of Wokingham, by broad cause of death, 2015-17



Source: OHID, Breakdown of the Life Expectancy Gap Segment tool, 2022

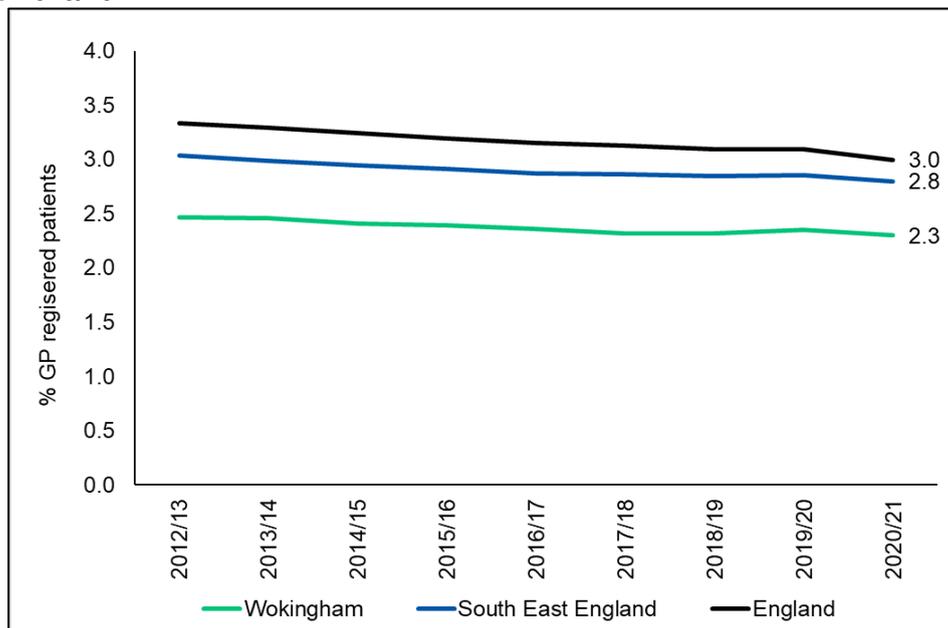
- 5.49** Cancer is the second biggest cause of life expectancy gap in males accounting for 29.8% of the gap in Wokingham.
- 5.50** The third major cause of life expectancy gap for males and the second major cause for females is respiratory diseases. Respiratory disease accounts for 10.7% of the life expectancy gap for males and 27.7% of the gap for females.
- 5.51** The third major cause of the life expectancy gap for females is Digestive diseases. Digestive problems include alcohol-related conditions such as chronic liver disease and cirrhosis. It accounts for 12.5% of the life expectancy gap in females and 8.1% of the gap in males.
- 5.52** We will take a closer look at circulatory diseases, cancer, respiratory diseases and digestive disease their impact in Wokingham.

Circulatory Diseases

- 5.53** Circulatory diseases include heart disease and stroke. Wokingham is in the 2nd lowest quintile in England for coronary heart disease. In 2019/20 2.4% GP registered patients had coronary heart disease. This is better than the England percentage of 3.1% and the percentage for

South East England of 2.9%. Figure 5.7 shows the trend for this indicator has remained fairly steady since 2012/13.

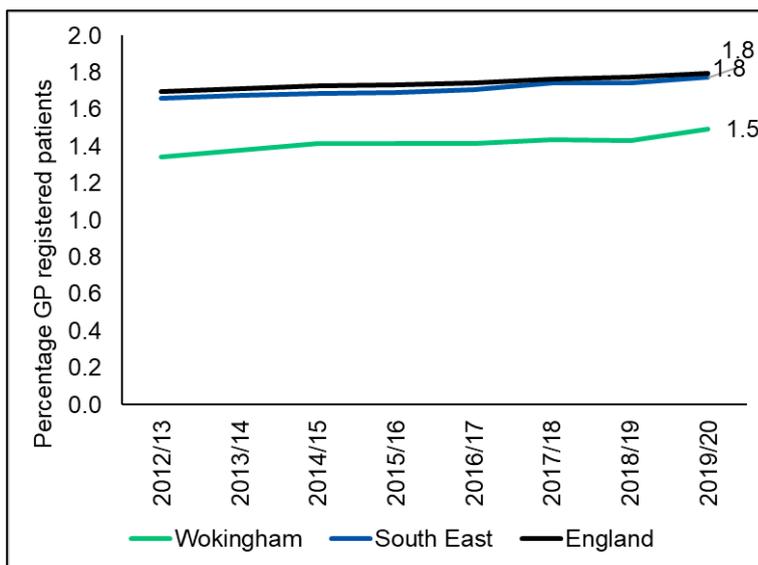
Figure 5.7: Prevalence of coronary heart disease in Wokingham GP registered patients from 2012/13 to 2019/20



Source: OHID, QOF, 2022

5.54 1.5% of Wokingham GP registered patients have had a stroke or transient ischaemic attack (2019/20 data). This is lower than the percentage for England of 1.8% and also lower than the percentage of 1.8% for South East England (OHID, Local Authority Public Health Profiles, 2022). Wokingham is in the second lowest quintile in England for this indicator. Figure 5.8 shows the that whilst the rates for Wokingham are lower than those for England, the proportion has been increasing in recent years.

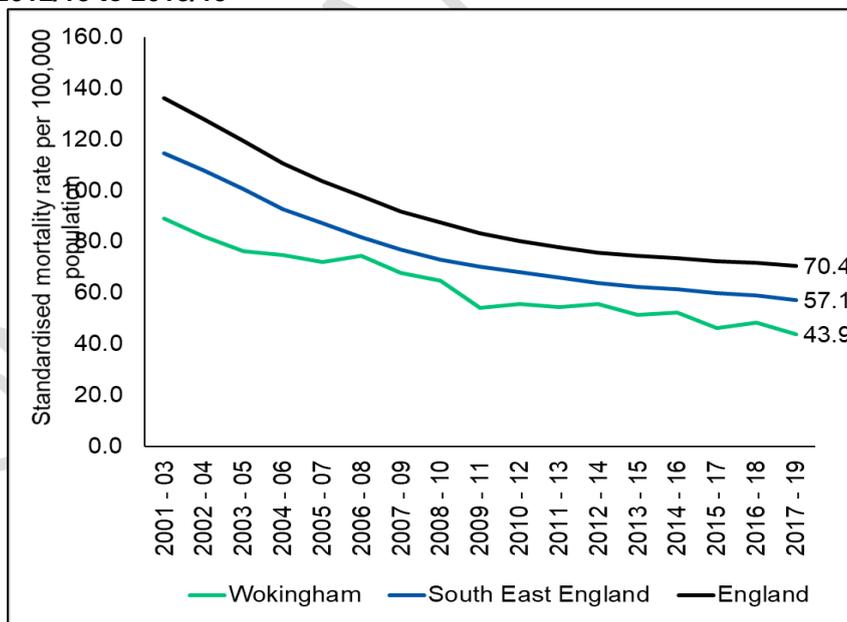
Figure 5.8: Prevalence of stroke or transient ischaemic attack in Wokingham GP registered patients from 2012/13 to 2019/20.



Source: OHID, QOF, 2022

5.55 The under-75 mortality rate for cardiovascular disease is 43.9 per 100,000 population, lower than to England and South England figures (Figure 5.9)

Figure 5.9: Trendline of under-75 mortality rate from all cardiovascular diseases for Wokingham, 2012/13 to 2018/19

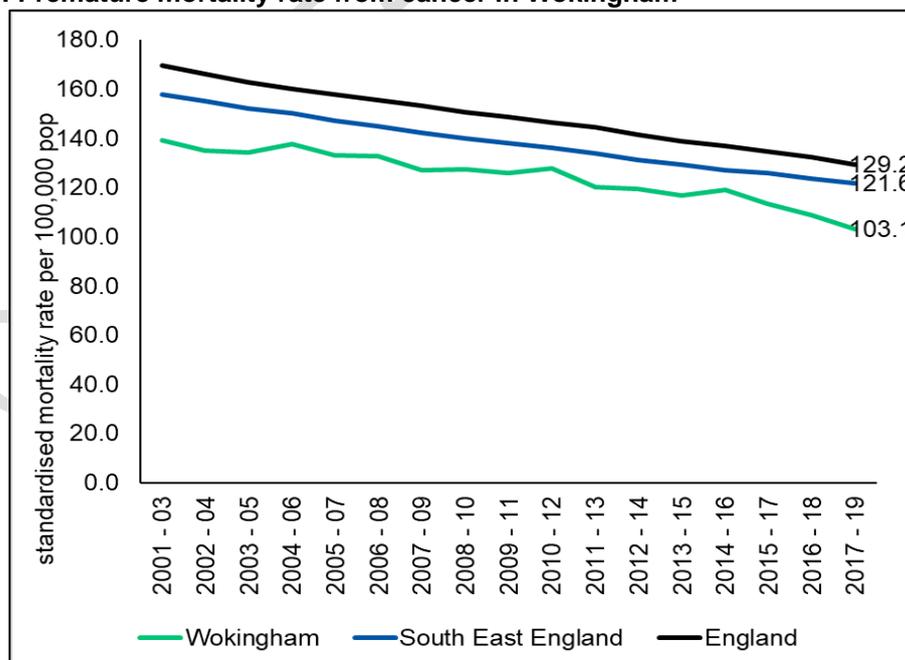


Source: OHID, Local Authority Public Health Profiles, 2022

Cancer

- 5.56** Pharmacists can play an important role in the early detection and diagnosis of cancer. Raising awareness through public health campaigns and talking to patients about signs and symptoms of different cancers can result in earlier diagnosis and therefore better treatment options for patients.
- 5.57** The incidence of all cancers (standardised incidence ratio) for Wokingham during the period 2014-2018 was 92.7. The cancer incidence ratio in Wokingham is significantly below 100 indicating a lower incidence than the comparator area (England). The incidence ratios of Colorectal and Breast cancers for Wokingham are similar to those for England while the incidence ratio of lung cancer is lower. However, the incidence ratio of Prostate cancer for Wokingham is higher compared to England.
- 5.58** The premature mortality rate from cancer (i.e., under 75 years) in Wokingham in 2017-2019 was 103 per 100,000 population, which is significantly lower than the rate for England of 129.2, and the rate of 121.6 for South East England (OHID, Local Authority Public Health Profiles, 2022). Figure 5.10 shows that the rate for the borough is lower than those for South East England and England, and rates have been falling faster than the England and South East England averages over the years.

Figure 5.10: Premature mortality rate from cancer in Wokingham

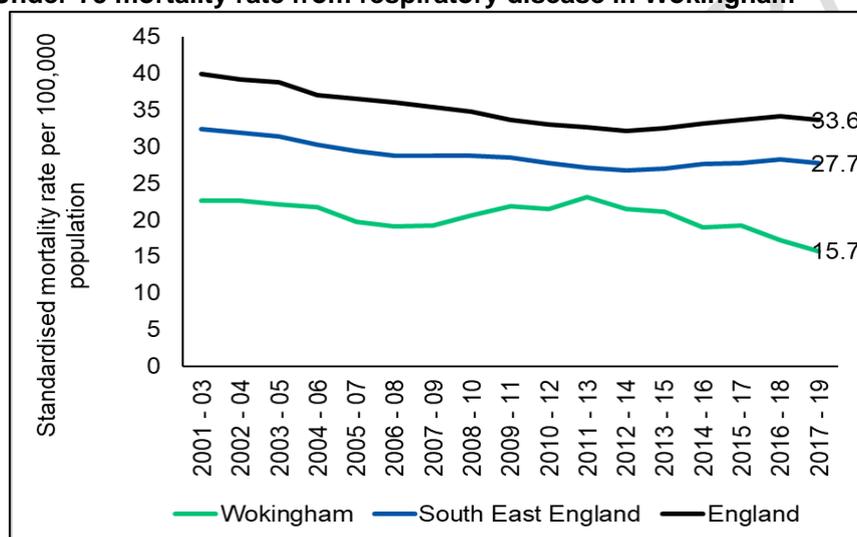


Source: OHID, Local Authority Public Health Profiles, 2022

Respiratory diseases

- 5.59** Respiratory disease is one of the major causes of death in England in under 75s. Respiratory diseases encompass flu, pneumonia and chronic lower respiratory disease such as chronic obstructive pulmonary disease (COPD).
- 5.60** The under-75 mortality rate by respiratory disease for Wokingham was 15.7 per 100,000 population, substantially lower than the rate for England of 33.6 and South East England rate of 27.7 (2017-19 data, OHID, Local Authority Health Profiles, 2022). Figure 5.11 shows the rate for the borough is below that for England and for South East England, and has been falling over the past few years diverging from the England and South East trends.

Figure 5.10: Under-75 mortality rate from respiratory disease in Wokingham



Source: OHID, Local Authority Public Health Profiles, 2022

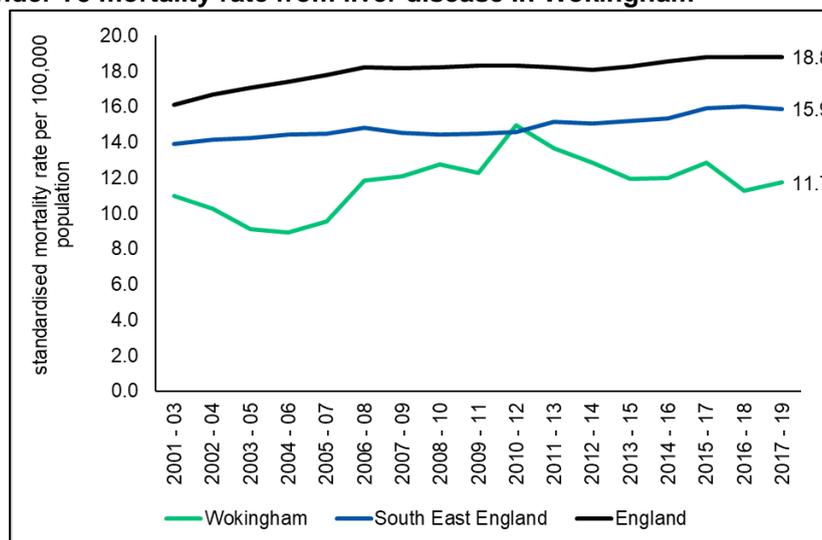
- 5.61** One of the major respiratory diseases is chronic obstructive pulmonary disease (COPD). The rate for emergency hospital admissions for COPD for persons over 35 years for Wokingham in 2019/20 was 162.5 per 100,000 admissions, which is significantly better than the rate for England of 415.1 and the rate for South East England of 295. Similarly, to the national and regional picture, there has been no significant recent change in the trend in admissions for people living in Wokingham. Helping people to stop smoking is key to reducing COPD and other respiratory illness.

Digestive diseases

- 5.62** Digestive disease includes alcohol-related conditions such as chronic liver disease and cirrhosis. Looking at the under 75 mortality rates for Liver disease, the rate in 2017-19 for Wokingham was 11.7 per 100,000 population, which is significantly lower than the England

rate of 18.8, and the rate of 15.9 for South East England (OHID, Local Authority Public Health Profiles, 2022). Figure 5.12 shows the trend for this indicator from 2012/13, the Wokingham rate is below that for South East England, and also for England. The rates for the borough have shown a generally falling trend since 2010-12 which has plateaued slightly in more recent years, but numbers are too small to calculate any statistical significance in trends.

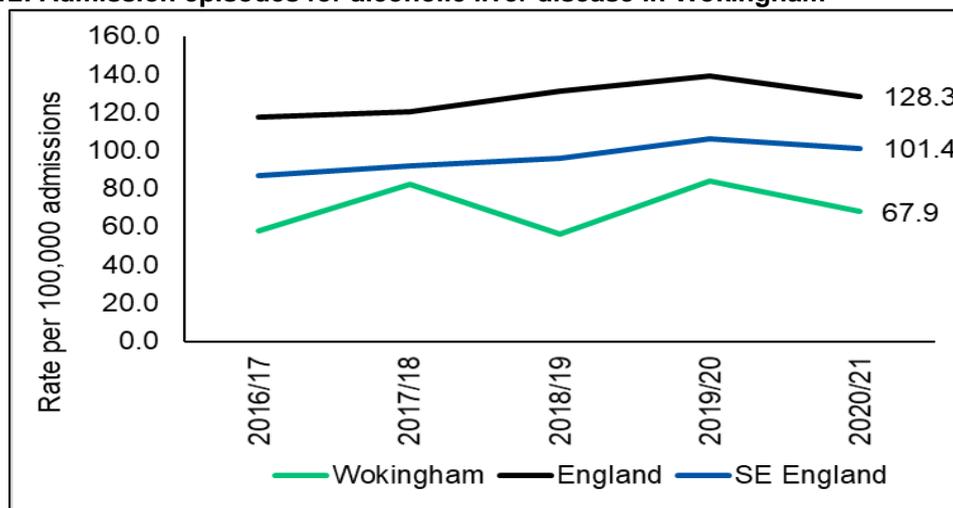
Figure 5.11: Under-75 mortality rate from liver disease in Wokingham



Source: OHID, Local Authority Public Health Profiles, 2022

5.63 Looking at data on admission episodes for alcoholic liver disease using a broad definition which encompasses both primary and secondary diagnoses, rates of admission for people living in Wokingham are low. The rate per 100,000 population for Wokingham in 2020/21 was 67.9, which is better than the England rate of 128.3, and the rate for the South East of 101.4 (OHID, Local Authority Public Health Profiles, 2022). The trend for admission episodes for alcoholic liver disease has remained stable since 2016/17 with fluctuations over time likely due to the small numbers involved (Figure 5.13).

Figure 5.12: Admission episodes for alcoholic liver disease in Wokingham



Source: OHID, Local Authority Public Health Profiles, 2022

Summary of health needs

Overall, the people of Wokingham enjoy a good level of health. Life expectancy and healthy life expectancy are higher than regional and national figures for both males and females. There is an inequality in life expectancy evident between those who live in the most deprived areas compared to those who live in the least deprived areas of the borough.

In general, measures of Wokingham residents' health and lifestyles are shown to be better than South East England and England as a whole, but the proportion of over 65s and 'at risk' population who are vaccinated for the flu are lower than national figures. STI testing rates including chlamydia screening amongst young people is lower than national averages and HIV is more often diagnosed at a later stage.

Circulatory diseases, cancer, respiratory diseases and digestive diseases are the main causes of the gap in life expectancy between the most and least deprived areas. Positively, premature mortality figures for cardiovascular diseases, cancer and respiratory diseases are lower than national figures, as were the prevalence of coronary heart disease, stroke, cancers and admissions for COPD and alcoholic liver disease.

Chapter 6 – Patient and public engagement

- 6.1** This chapter discusses the results of the patient and public engagement survey that was carried out in Berkshire between the period of 13th January 2022 until 4th March 2022. It will also provide an overview of the results specifically from Wokingham. We will examine the health needs specific to protected characteristics and vulnerable groups that we have engaged with during this process, and the implications this may have on the PNA.
- 6.2** A “protected characteristic” means a characteristic listed in section 149(7) of the Equality Act 2010. There are also certain vulnerable groups that experience a higher risk of poverty and social exclusion than the general population. These groups often face difficulties that can lead to further social exclusion, such as low levels of education and unemployment or underemployment.
- 6.3** A community questionnaire was used to engage with residents to understand their use and experience of local pharmacies. This questionnaire was approved for use with the local population by the PNA Steering Group and the communication teams of Berkshire.
- 6.4** The community questionnaire was disseminated via online platforms, social media and in person for Berkshire. We engaged with 1789 residents across Berkshire, including 249 residents across Wokingham.

Wokingham communications engagement strategy

- 6.5** Working with the local authority communications teams, the survey was shared on social media platforms such as Facebook and Twitter, and on local resident e-newsletters. The survey was also published on the Public Health Berkshire webpage.
- 6.6** The Wokingham Borough Council communications team also shared the survey on the council website and Healthwatch Wokingham published the survey on their website.
- 6.7** With the support of a Wokingham Borough Council Community Development Officer, the survey was shared to all relevant contacts via email, through Facebook, and circulated to leads working with communities where English is a second language.

6.8 The survey was shared with Wokingham college, on a Facebook group for SEND voices, and CLASP carers and family members (a self-advocacy group for people with learning disabilities).

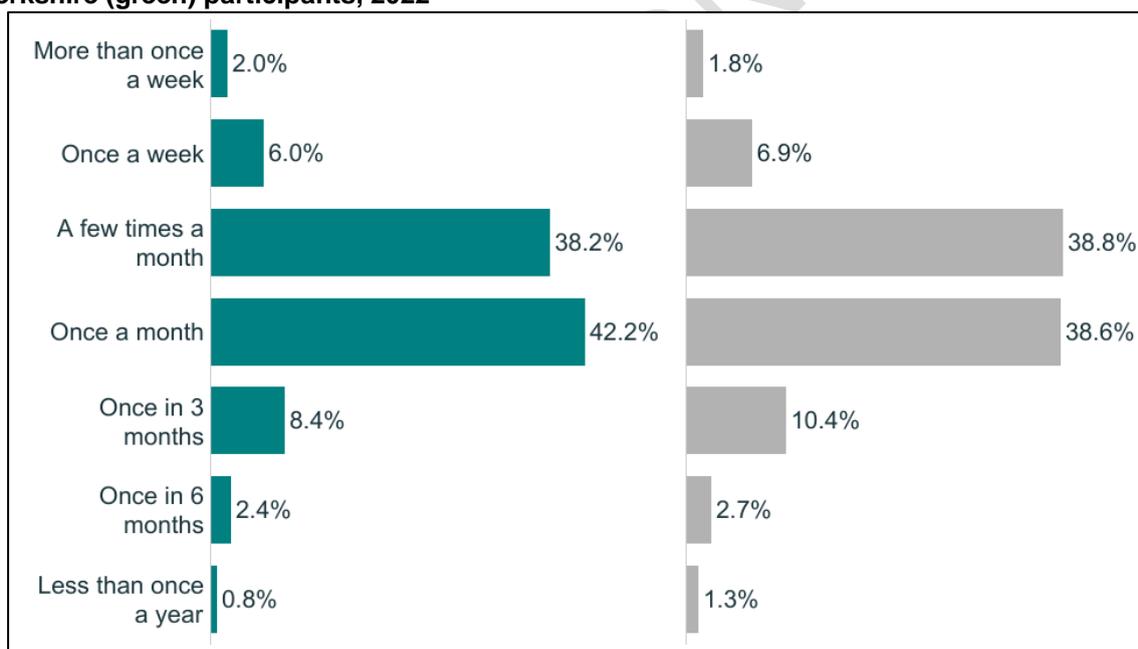
6.9 Additionally, the steering group patient representative shared paper copies with neighbours.

Results of the Patient and Public Engagement Survey

6.10 The survey results are shown below, comparing Wokingham, responses (shown in green) with Berkshire overall responses (shown in grey).

6.11 Across Berkshire, they showed that 38.8 % (691) residents used the pharmacy between a few times a month, and once a month 38.6% (687), Similarly, Wokingham residents used the pharmacy mostly at least once a month (42.2%), followed by few times a month (38.2%). (Figure 6.1).

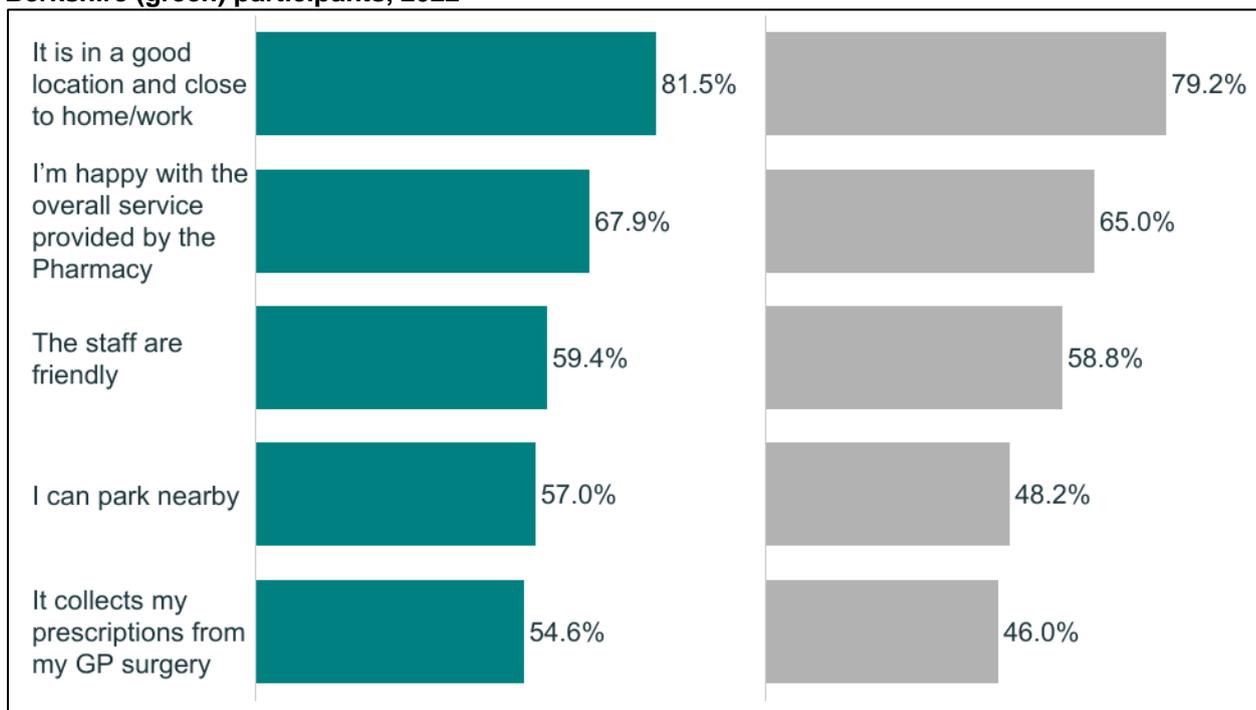
Figure 6.1: Survey responses on frequency of pharmacy use by Wokingham (grey) and Berkshire (green) participants, 2022



6.12 When asked what they used their pharmacy for, across Berkshire 12% of the respondents stated for prescriptions, alike, 10.1% of Wokingham residents answered the same.

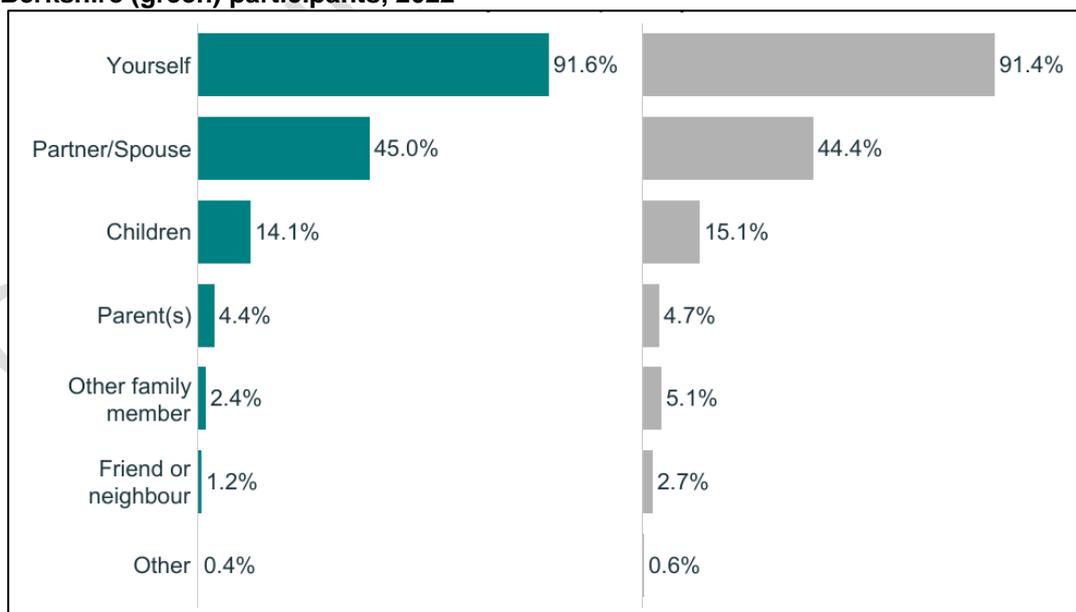
6.13 The majority of residents across Berkshire (79.2%) and Wokingham (81.5%), stated their main reason for their choice of pharmacy was due to good location and proximity to their work and home, followed by the fact they were happy with the overall service provided by their pharmacy, (65% and 67.9% respectively) (Figure 6.2).

Figure 6.2: Survey responses on reasons for pharmacy choice by Wokingham (grey) and Berkshire (green) participants, 2022



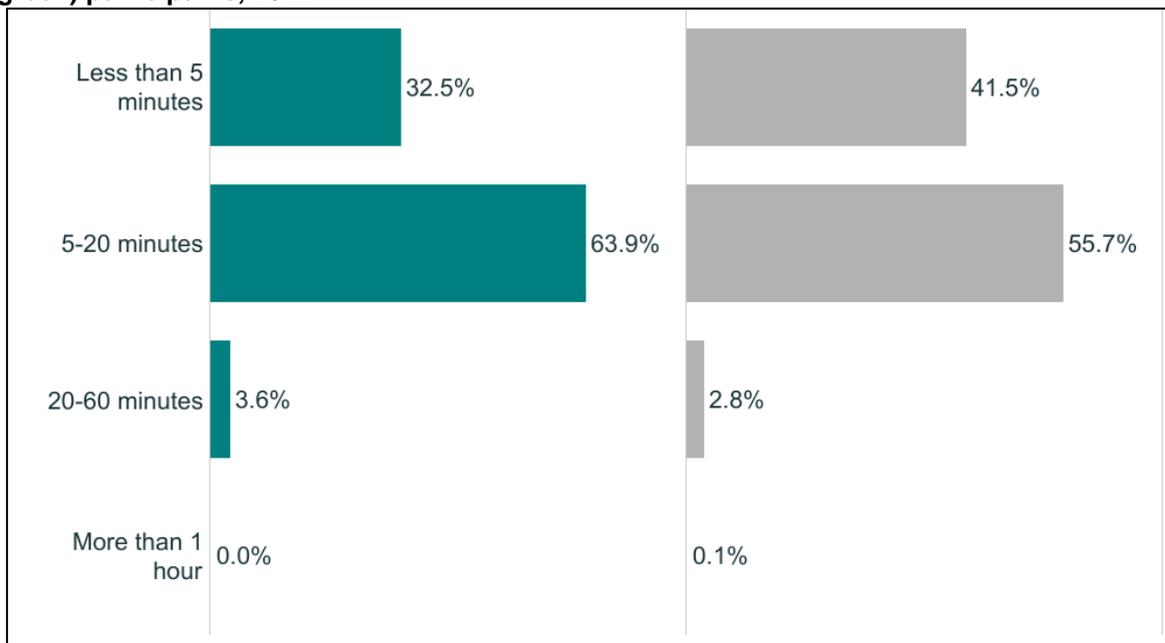
6.14 When asked who are use their pharmacy for, 91.6 % and 91.4% respondents of Wokingham and Berkshire respectively stated they used the pharmacy for themselves. Furthermore, 45% Wokingham and 44.4% Berkshire respondents used their pharmacy mainly for their partner/spouse (Figure 6.3).

Figure 6.3: Survey responses on who they are using their pharmacy for by Wokingham (grey) and Berkshire (green) participants, 2022



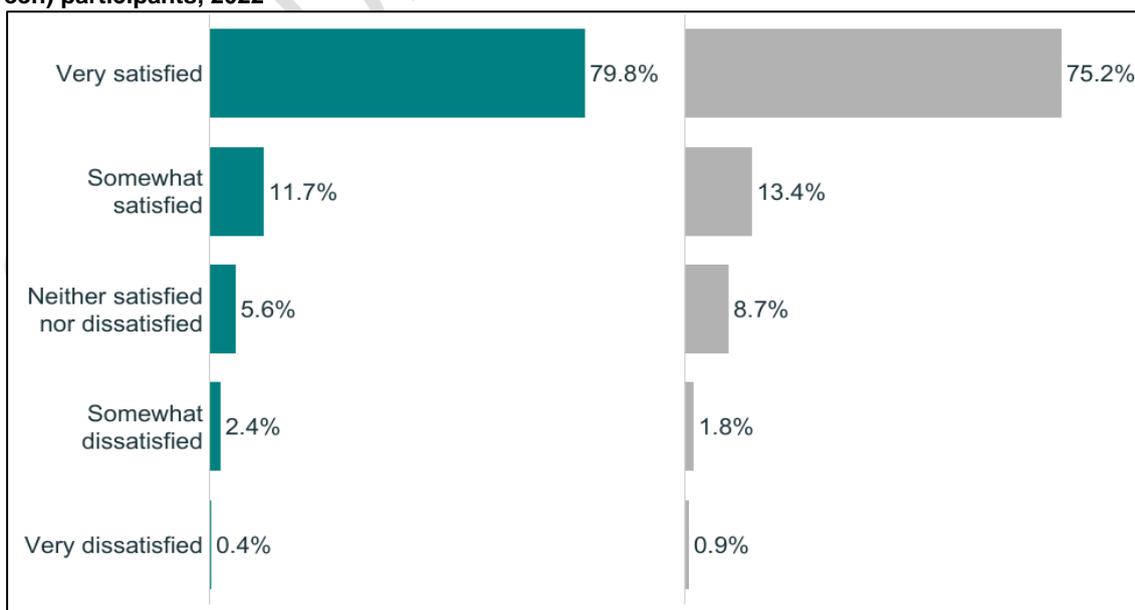
6.15 Across Berkshire, 41.5 % of respondents stated that it takes less than 5 minutes to travel to their pharmacy, and 55.7% stated it takes 5-20 minutes. In Wokingham, 32.5% of respondents answered that it takes less than 5 minutes to travel to their pharmacy whereas 63.9% stated 5-20 minutes (Figure 6.4).

Figure 6.4: Survey responses on travel time to pharmacy by Wokingham (grey) and Berkshire (green) participants, 2022



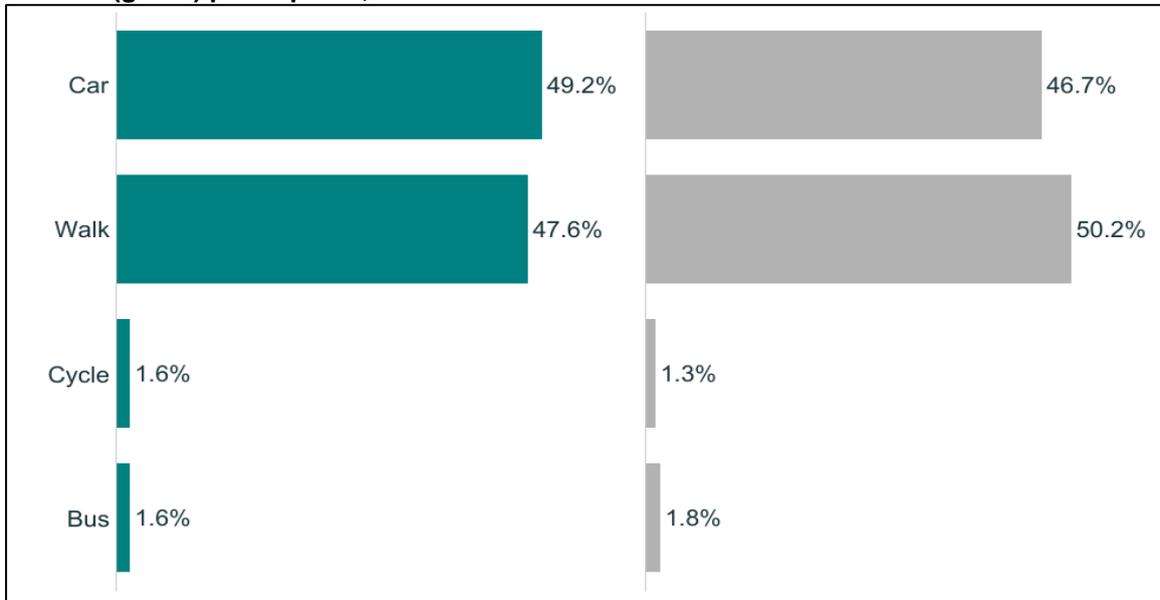
6.16 Majority of residents across Berkshire and Wokingham, were very satisfied with their journey to their pharmacy, 75.2% and 79.8% respectively. (Figure 6.5).

Figure 6.5: Survey responses on satisfaction of journey to pharmacy by Wokingham (grey) and Berkshire (green) participants, 2022



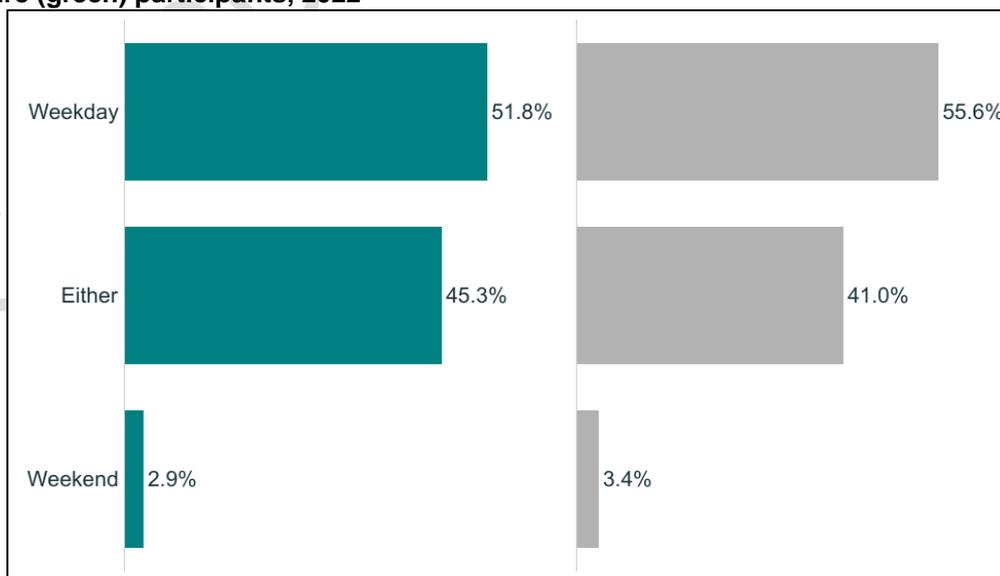
6.17 When asked around how they usually travel to their pharmacy, 50.2% respondents across Berkshire walk to their pharmacy, and 46.7% used their car and to travel to their pharmacy. Similarly, in Wokingham, 47.6% walk to their pharmacy and 49.2% use their car (Figure 6.6).

Figure 6.6: Survey responses on how they travel to their pharmacy by Wokingham (grey) and Berkshire (green) participants, 2022



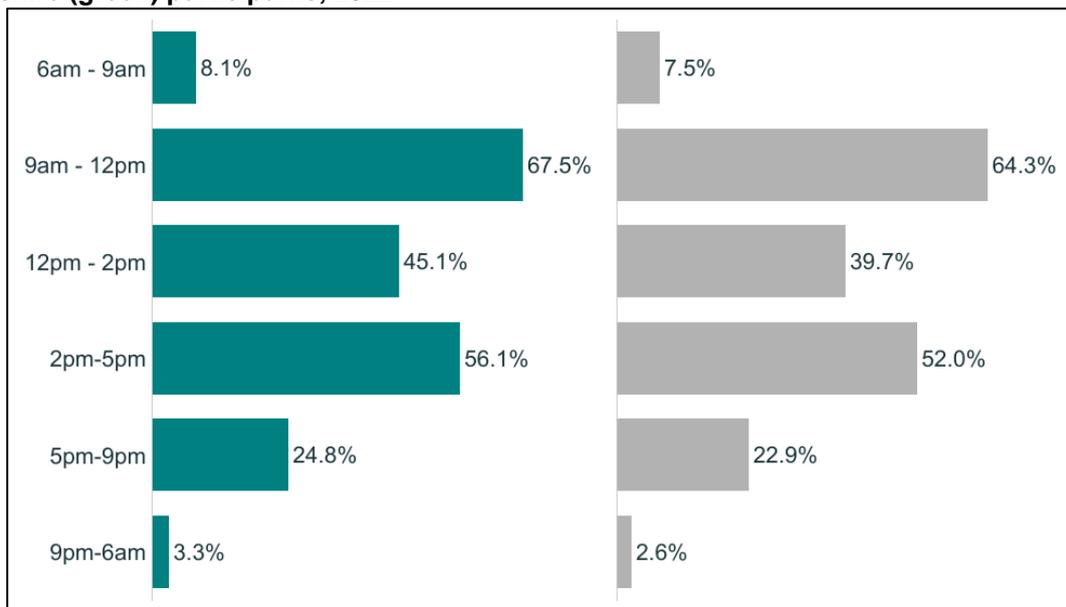
6.18 When asked when they preferred to go to the pharmacy, across Berkshire, 55.6% (975) stated they preferred weekdays. Similarly, 51.8% (127) of respondents in Wokingham preferred weekdays. Given the choice of either weekday or weekend, 45.3% (111) respondents came from Wokingham and 41% (720) across Berkshire (Figure 6.7).

Figure 6.7: Survey responses on preferred day to visit pharmacy by Wokingham (grey) and Berkshire (green) participants, 2022



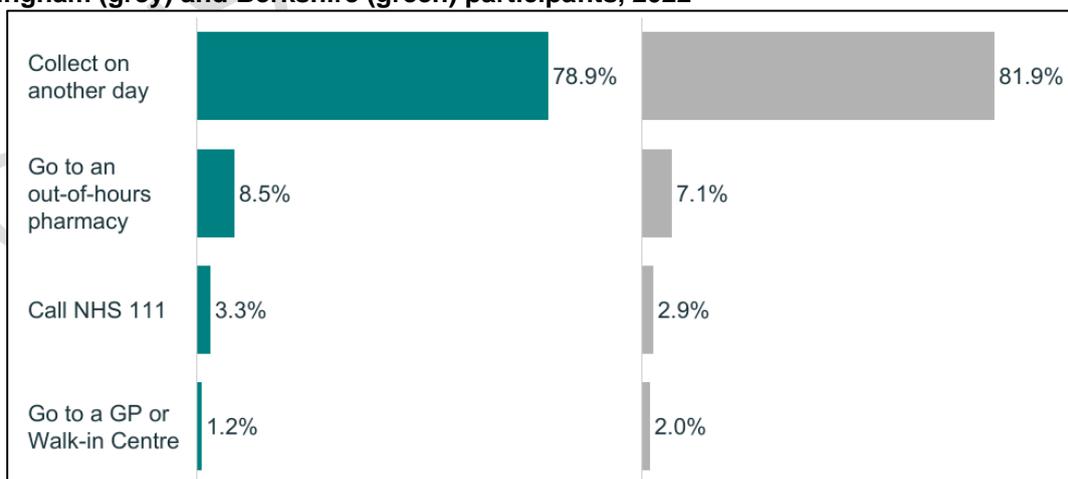
6.19 In terms of visiting times, the most popular times to visit a pharmacy by Berkshire respondents was between 9am- 12pm, followed by 2pm- 5pm (see figure 6.8). Wokingham respondents preferred times between 9am - 12pm and 2-pm - 9pm. Note: residents could select multiple responses for this survey question (Figure 6.8).

Figure 6.8: Survey responses on time to visit their pharmacy by Wokingham (grey) and Berkshire (green) participants, 2022



6.20 When asked what you do if you can't access the pharmacy, 81.9% of residents across Berkshire answered that they would collect on another day, followed by 7.1% stating they would go to an out-of-hours pharmacy. Alike, across Wokingham, 78.9% respondents would collect another day and 8.5% go to an out-of-hours pharmacy (Figure 6.9).

Figure 6.9: Survey responses on what they do if they can't access the pharmacy by Wokingham (grey) and Berkshire (green) participants, 2022



6.21 Of the 249 respondents in Wokingham, 28 left a comment on what additional services they would like to see available in their pharmacy. The top services the public would like to see within their pharmacy were:

- Minor ailments, independent prescribing, diabetes, cholesterol and blood checks, (including blood tests, and pressure checks) (27%)
- Vaccines including travel vaccines (25%)

Equality Impact Assessment

6.22 This next section explores the Wokingham survey responses by different groups representing protected characteristics, looking at where there are similarities and differences between groups.

Age

6.23 Pharmacies provide essential services to all age groups such as dispensing, promotion of healthy lifestyles and signposting patients to other healthcare providers. Pharmacies providing services to vulnerable adults and children are required to be aware of the safeguarding guidance and local safeguarding arrangements.

6.24 To understand any differences between groups, we carried out analysis by grouping together age groups. We compared differences between those aged over 65 (n=134), and individuals aged 65 and under (n=114). One respondent did not state their age.

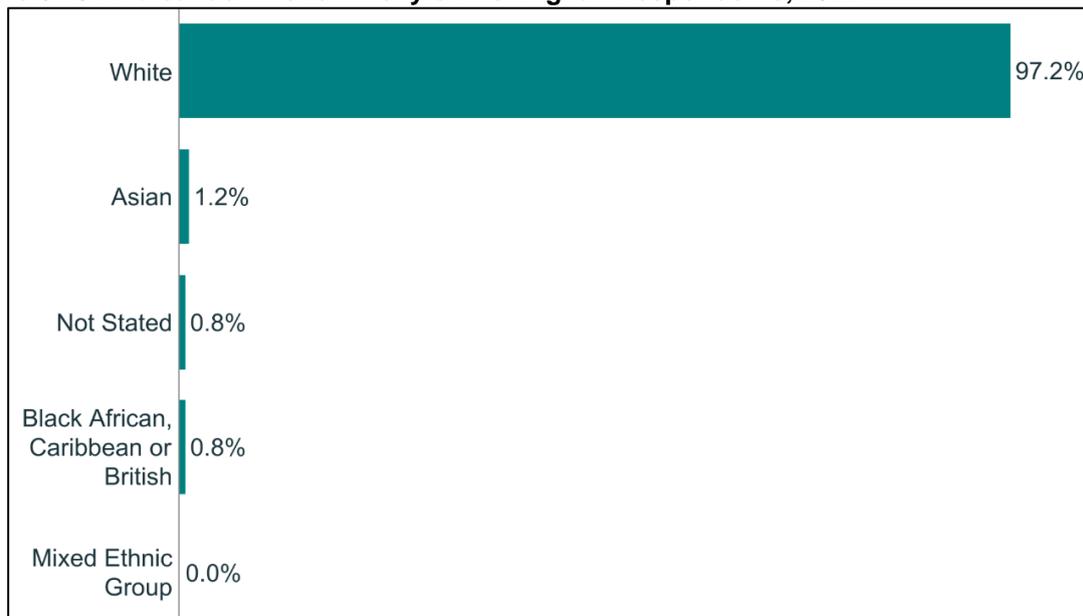
6.25 No differences were found between the two groups in terms of frequency of visiting the pharmacy, preferred times to visit the pharmacy time taken to travel to the pharmacy.

6.26 Those aged 65 and under were more likely to use the pharmacy for their children (29.8%), compared to those over 65 (0.7%).

Ethnicity

6.27 A small number of respondents were from an ethnic minority background (Figure 6.10).

6.28 No significant differences were found between groups in terms of pharmacy usage and preferences.

Figure 6.10: A breakdown of ethnicity of Wokingham respondents, 2022

Gender

- 6.29** 164 (65.9%) respondents were female, 80 (32.1%) were male, 5 (2%) did not state.
- 6.30** No differences were found across genders in terms of frequency of visits and reasons for choosing their pharmacy and time taken to travel to the pharmacy.
- 6.31** Generally, respondents used their pharmacy for themselves, or their spouse or partner, but female respondents were also more likely to use their pharmacy for their children too (18.3%), compared to their male counterparts (5%).

Pregnancy and breastfeeding

- 6.32** No respondents were pregnant at the time this survey was live. Four (1.7%) people were breastfeeding at the time of this survey was live.
- 6.33** No differences were found between groups in terms of frequency of visiting pharmacy with most respondents going a few times a month, to at least once a month. Although, those who were breastfeeding were also more likely to use their pharmacy once a week (25%), compared to those who were not (5.9%).
- 6.34** Those who were breastfeeding were more likely to choose their pharmacy based on the fact that it collected prescriptions from their GP surgery (75%), compared to those who were not breastfeeding who chose their pharmacy based on being in a good location (81.8%).

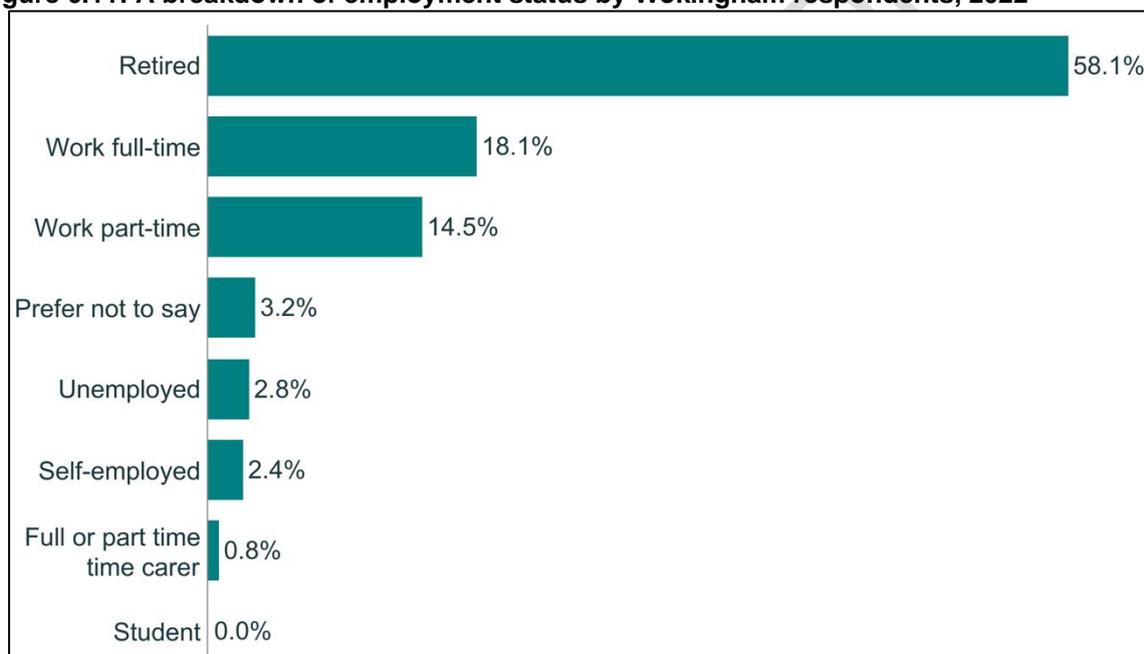
6.35 Most respondents used the pharmacy for themselves or for their partner or spouse, but those who were breastfeeding were also more likely to use the pharmacy for their children (100%), compared to those who were not pregnant (13.1%).

6.36 There were no differences in terms of time taken to travel to the pharmacy and preferred time to visit the pharmacy.

Employment status

6.37 A breakdown of employment status showed that over half (58.1%) of the respondents were retired, 35% were in employment (this included, full-time, part-time, and self-employment), 0.8% respondents were carers, and 2.8% were unemployed. 3.2% preferred not to state (Figure 6.11).

Figure 6.11: A breakdown of employment status by Wokingham respondents, 2022



6.38 No differences were found amongst employment status groups, in terms of frequency of pharmacy use, who they used their pharmacy for, and time taken to travel to the pharmacy.

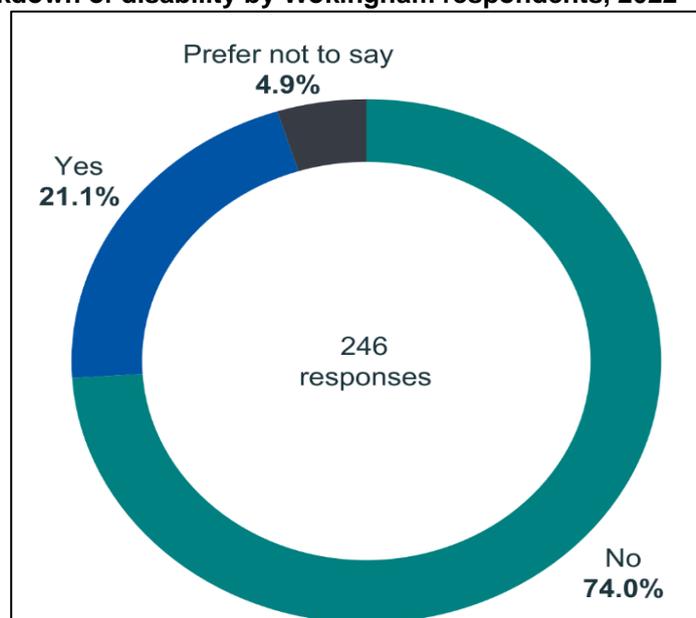
6.39 No differences were found amongst employment status groups and the reasons for chosen pharmacy with most respondents choosing their pharmacy as it was in a good location. Although those who were carers were also more likely than any other group to choose their pharmacy based on staff being friendly (100%).

6.40 Those who were in employment (full-time, part-time, and self-employment), and carers were also more likely to use their pharmacy during the hours of 5pm- 9pm.

Disability or impairment

6.41 246 respondents answered whether they had a disability or not, of which 52 (21.1%) said that they do, 182 stated that they didn't (74%), and 12 (4.9%) preferred not to state (Figure 6.12).

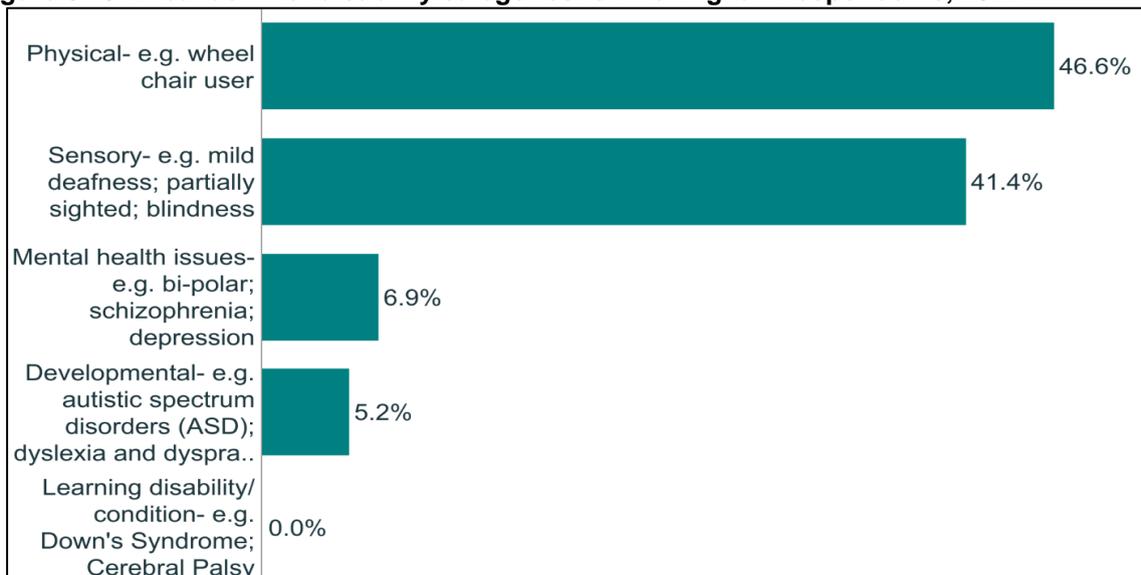
Figure 6.12: A breakdown of disability by Wokingham respondents, 2022



6.42 The survey categorised disabilities into six main groups (Figure 6.13):

- Physical e.g., wheelchair user
- Mental health issues e.g., bipolar disorder, schizophrenia, depression
- Sensory e.g., mild deafness, partially sighted, blindness
- Learning disabilities e.g., Down Syndrome
- Developmental e.g., Autistic spectrum disorder, dyslexia, dyspraxia
- Other

Figure 6.13: Breakdown of disability categories for Wokingham respondents, 2022



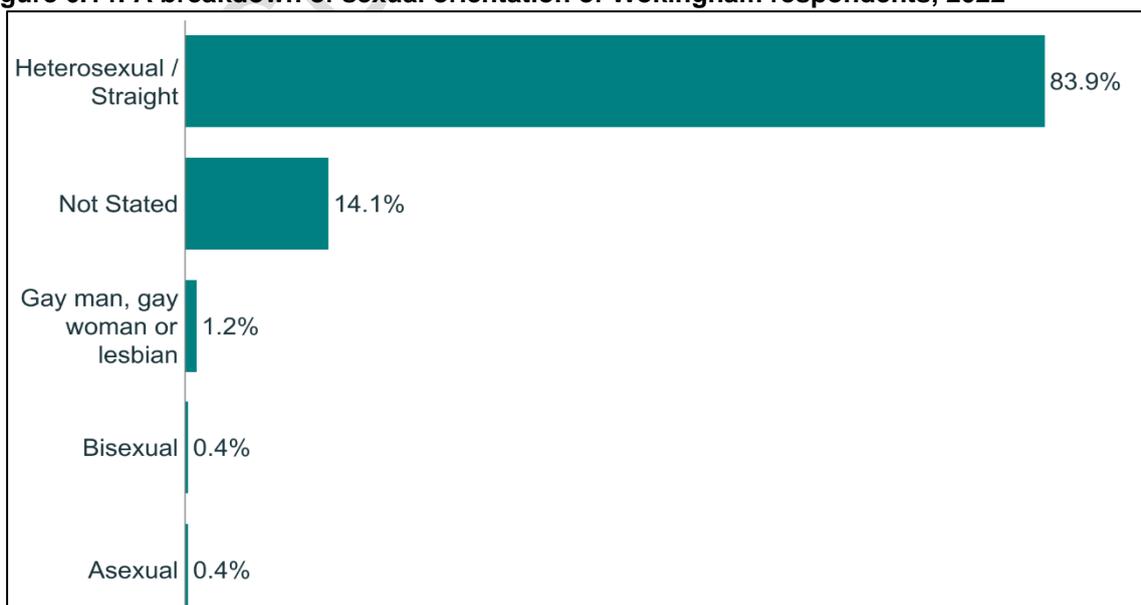
6.43 No significant differences were found between groups of this protected characteristic in terms of frequency of pharmacy use, times taken to travel to the pharmacy and preferred time to visit their pharmacy.

6.44 Those who had a disability were more likely to use their chosen pharmacy because it collected prescriptions for them from their GP (63.5%).

Sexual orientation

6.45 209 (83.9%) of respondents were heterosexual, 35 (14.1%) did not state, three respondents (1.2%) were gay man or gay/ lesbian woman, one (0.4%) person stated they were asexual, and one (0.4%) person stated they were bisexual. (Figure 6.14).

Figure 6.14: A breakdown of sexual orientation of Wokingham respondents, 2022



6.46 No differences between groups were found in terms of frequency of visiting pharmacy, who they used their pharmacy for, and frequency and preferred time to visit their pharmacy.

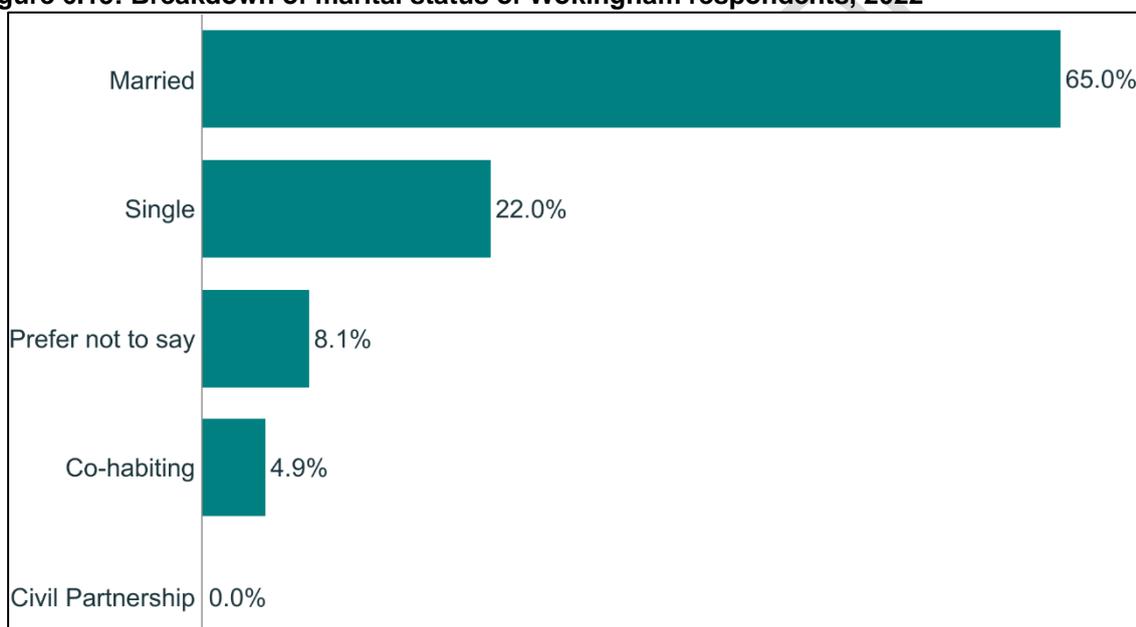
6.47 For most, travel time to a pharmacy was between a 5–20-minute walk or by car. For a small number of heterosexual and asexual respondents (seven), the journey time was between a 20–60-minute walk or drive.

Relationship status

6.48 160 (65%) of respondents were married, 54 (22%) were single, 20 (8.1%) preferred not to state, and 12 (4.9%) were co-habiting. (Figure 6.15).

6.49 No differences were found between this protected characteristic and pharmacy usage.

Figure 6.15: Breakdown of marital status of Wokingham respondents, 2022



Summary of the patient and public engagement and protected characteristics

Patient and public engagement in the form of a survey was undertaken to understand how people use their pharmacies, what they use them for and their views of the pharmacy provision. It included an exploration of the health needs specific to protected characteristics and vulnerable groups.

249 residents and workers of Wokingham responded to this survey, and overall, residents were satisfied with the services their pharmacy provided.

The findings of Wokingham were similar to the overall results of Berkshire. Within Wokingham, respondents visited their pharmacy a few times a month, or at least once a month and reasons for chosen pharmacy was primarily that it was in a good location within a 5–20-minute walk or drive away. Respondents preferred to use their pharmacy on a weekday, during the hours of 9am – 12pm, and 2pm – 5pm, for themselves, spouse/ partner or children.

No specific identified needs for people who share a protected characteristic were found.

A small number of respondents left comments on services they would like to see within their pharmacy. This included minor ailments services, blood checks (including blood pressure and testing), diabetes and cholesterol checks, and travel vaccinations.

Chapter 7 – Provision of pharmaceutical services

This chapter identifies and maps the current provision of pharmaceutical services in order to assess the adequacy of provision of such services. Information was collected up until January 2022.

It assesses of the adequacy of the current provision of necessary services by considering:

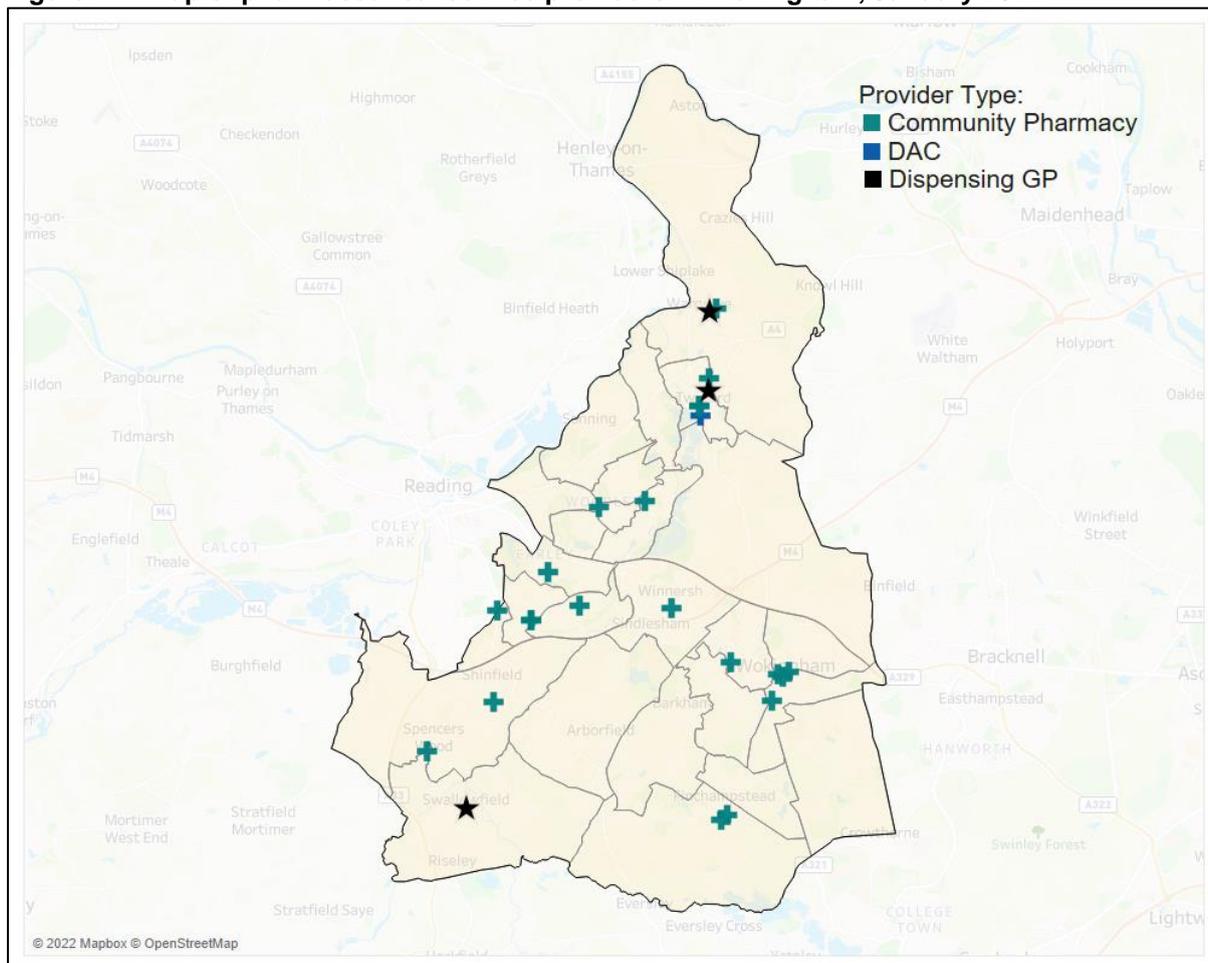
- Different types of pharmaceutical service providers
- Geographical distribution and choice of pharmacies, within and outside the borough
- Opening hours
- Dispensing
- Pharmacies that provide essential, advanced and enhanced and other NHS services

In addition, this chapter also summarises pharmaceutical contractors' capacity to fulfil identified current and future needs in Wokingham.

Pharmaceutical service providers

As of January 2022, there are currently 22 pharmacies in Wokingham that hold NHS contracts, all but one of which are community pharmacies. They are presented in the map in Figure 7.1 below. All the pharmacy providers in the borough as well as those within 1 mile of its border are also listed in Appendix A.

Figure 7.1: Map of pharmaceutical service providers in Wokingham, January 2022



Source: Contractor Survey and NHS England, 2022

Community pharmacies

The 21 community pharmacies in Wokingham equates to 1.2 community pharmacies per 10,000 residents (based on a 2022 population estimate of 173,945). This ratio is well below national average of 2.2 based on 2014 data (LGA, 2022⁴²); however, pharmacy contractors have indicated that they have capacity to take on more services in the contractor survey.

Dispensing appliance contractor

There is one dispensing appliance contractor (DAC) on Wokingham’s pharmaceutical list; Fittleworth Medical Ltd on Twyford Bus Park. It is included in the map in Figure 7.1 above. A

⁴² Local Government Association: [LG Inform. Ratio of pharmacies per 10,000 population](#) (Snapshot: 29 November 2014). (Accessed in December 2021).

Table 7.1: List of GP Dispensing Practices in Wokingham

GP Practice	Postcode	Dispensing List Size
Swallowfield Medical Practice	RG7 1QY	5,608
Wargrave Practice	RG10 8BP	2,124
Twyford Surgery	RG10 9JA	959

Source: NHSE, October 2022

Distance selling pharmacies

A distance Selling Pharmacy works exclusively at a distance from patients. They include mail order and internet pharmacies that remotely manage patients medicine logistics and distribution. DSPs collect prescriptions and provide them to patients at their homes, care homes or nursing homes. They can also provide a 'click and collect' service.

There are no distance selling pharmacies in Wokingham.

Local pharmaceutical services

There are no Local Pharmaceutical Service (LPS) contracts within Wokingham. A local pharmaceutical services contract allows NHS England and NHS Improvement to commission services that are tailored to meet specific local requirements.

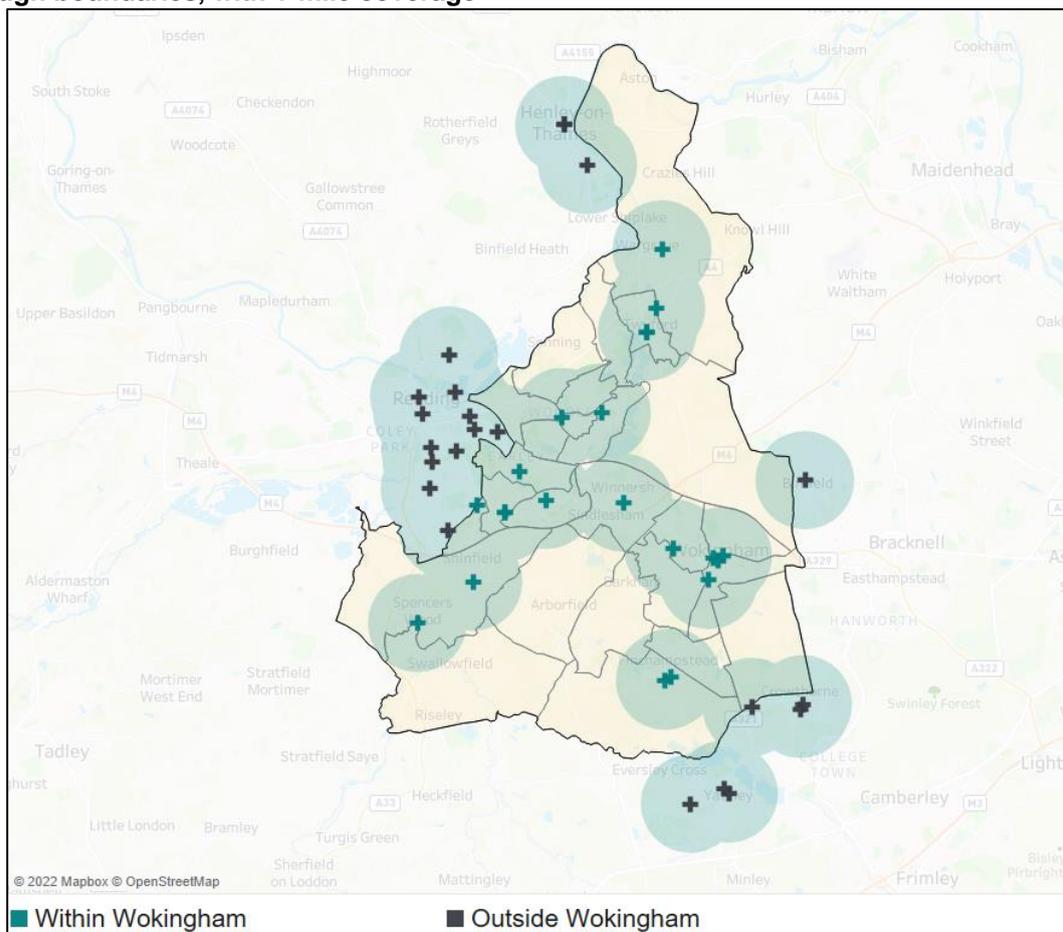
Accessibility

Distribution and choice

The PNA Steering Group agreed that the maximum distance for residents in Wokingham to access pharmaceutical services, should be no more than 1 mile. This distance equates to about a 20-minute walk. If residents live within a rural area, 20 minutes by public transport is considered accessible.

Figure 7.3 shows the 21 community pharmacies located in Wokingham. In addition to the pharmacies within Wokingham, there are another 22 pharmacies located within 1 mile of the borough's border that are considered to serve Wokingham's residents. These have been included in the pharmacies shown in Figure 7.3 as well as in Appendix A.

Figure 7.3: Distribution of community pharmacies in Wokingham and within 1 mile of the borough boundaries, with 1-mile coverage



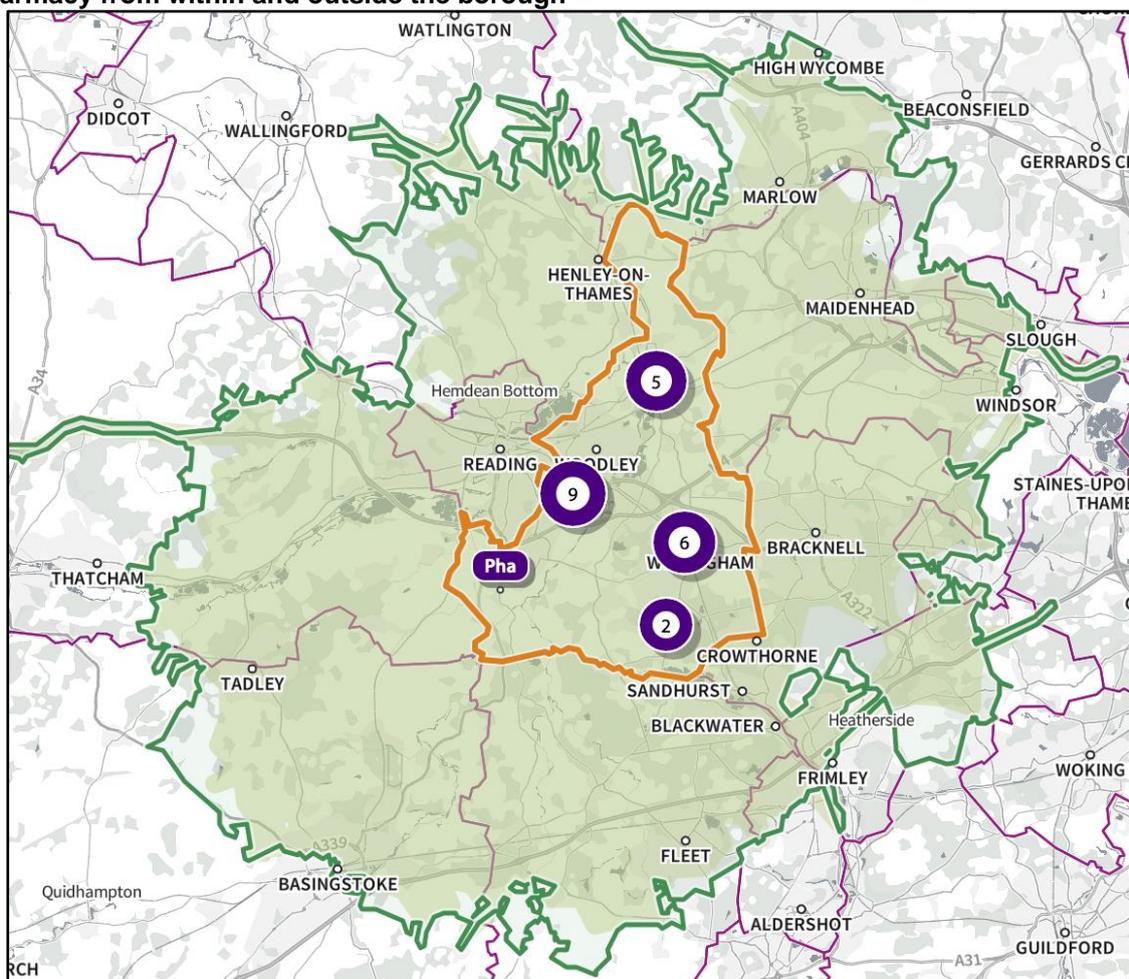
Source: Contractor Survey and NHS England, 2022

This shows that approximately half of the borough is within 1 mile of a pharmacy. This means 22,422 Wokingham residents are not within one mile of a pharmacy (OHID, Strategic Health Asset Planning and Evaluation Atlas Tool, 2022).

Those that are not within 1 mile are within controlled localities and are therefore served by dispensing GP practices or are within areas where it is not viable for a new pharmacy to open due to low population density.

All residents in Wokingham can reach a pharmacy within 20 minutes if using a car, attesting to the accessibility of the pharmacy provision in the borough. Figure 7.4 presents the coverage of the Wokingham pharmacies in consideration of 20-minute car travel. Coverage of the pharmacies is presented in a green border, Wokingham is highlighted by an orange border. A total of 985,787 people in and outside the borough can reach a Wokingham pharmacy within 20 minutes if using a car (OHID, SHAPE Atlas Tool, 2022).

Figure 7.4: Areas covered by 20-minute travel time by public transport to a Wokingham pharmacy from within and outside the borough



Source: OVID, Strategic Health Asset Planning and Evaluation Atlas Tool, 2022

Table 7.2. As seen, there are ten wards in the borough with no community pharmacy within them. Ninety-nine new dwellings in Hurst Ward, 932 in Finchampstead South

Table 7.2: Distribution of community pharmacies by ward

Ward	Number of Community Pharmacies	Population Size	Community Pharmacies per 10,000 residents
Wescott	3	7,186	4.17
Twyford	3	6,210	4.83
Hillside	2	8,541	2.34
Finchampstead South	2	5,817	3.44
Winnersh	1	10,614	0.94
Swallowfield	1	3,330	3.00
Shinfield South	1	10,571	0.95
Shinfield North	1	3,760	2.66
Remenham, Wargrave and Ruscombe	1	5,648	1.77
Norreys	1	10,668	0.94
Maiden Erlegh	1	10,968	0.91

Ward	Number of Community Pharmacies	Population Size	Community Pharmacies per 10,000 residents
Loddon	1	10,231	0.98
Hawkedon	1	9,793	1.02
Emmbrook	1	9,562	1.05
Bulmershe and Whitegates	1	10,007	1.00
Wokingham Without	0	8,178	0.00
South Lake	0	5,928	0.00
Sonning	0	3,309	0.00
Hurst	0	3,002	0.00
Finchampstead North	0	5,589	0.00
Evendons	0	9,434	0.00
Coronation	0	5,529	0.00
Charvil	0	3,123	0.00
Barkham	0	4,037	0.00
Arborfield	0	2,910	0.00
Borough total	21	173,945	1.21

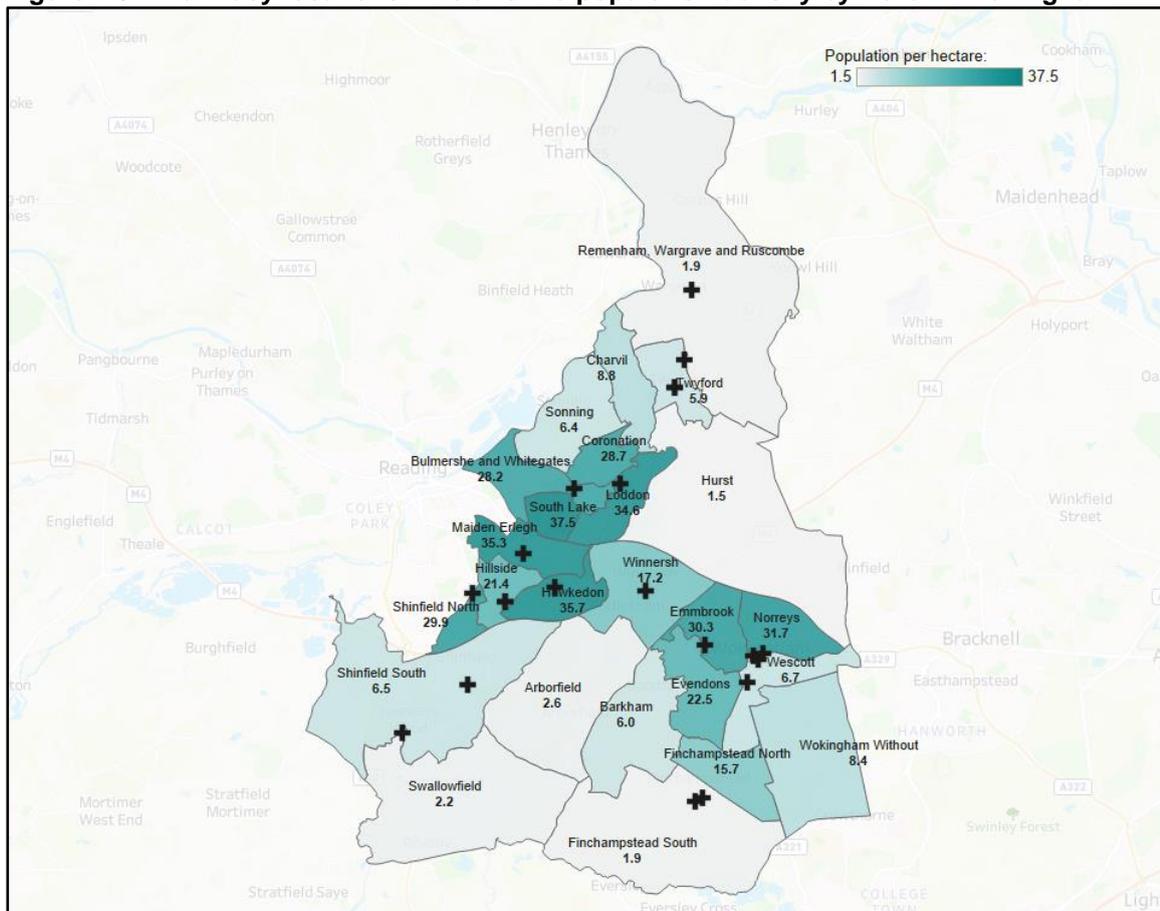
Sources: ONS (2020 mid-year estimates) and NHSE

Residents tend to fill their prescriptions at local pharmacies. NHSE data shows that in 2020-21, 84.5% (1,877,779) of items prescribed by GPs in Wokingham were dispensed by community pharmacies in the borough. The next largest boroughs where prescriptions from Wokingham were dispensed were Reading (5.0%) and Leeds (2.9%).

Pharmacy distribution in relation to population density

The population density map. Figure 7.5 indicates that the community pharmacy premises are predominantly located in areas of highest population density although a small number of pharmacies were identified in areas with the lowest population density.

There are a number of large new dwelling developments planned for within the lifetime of this PNA (see paragraph 4.27 and 4.28). They are Arborfield Garrison in Finchampstead South ward with 886 new dwellings, West of Shinfield in Shinfield North ward with 534 new dwellings and Matthewsgreen Farm in Embrook ward with 360 new dwellings planned. These are all within areas of good access to pharmacy provision.

Figure 7.5: Pharmacy locations in relation to population density by ward in Wokingham

Source: ONS (2020 mid-year estimates) and NHSE

Pharmacy distribution in relation to GP surgeries

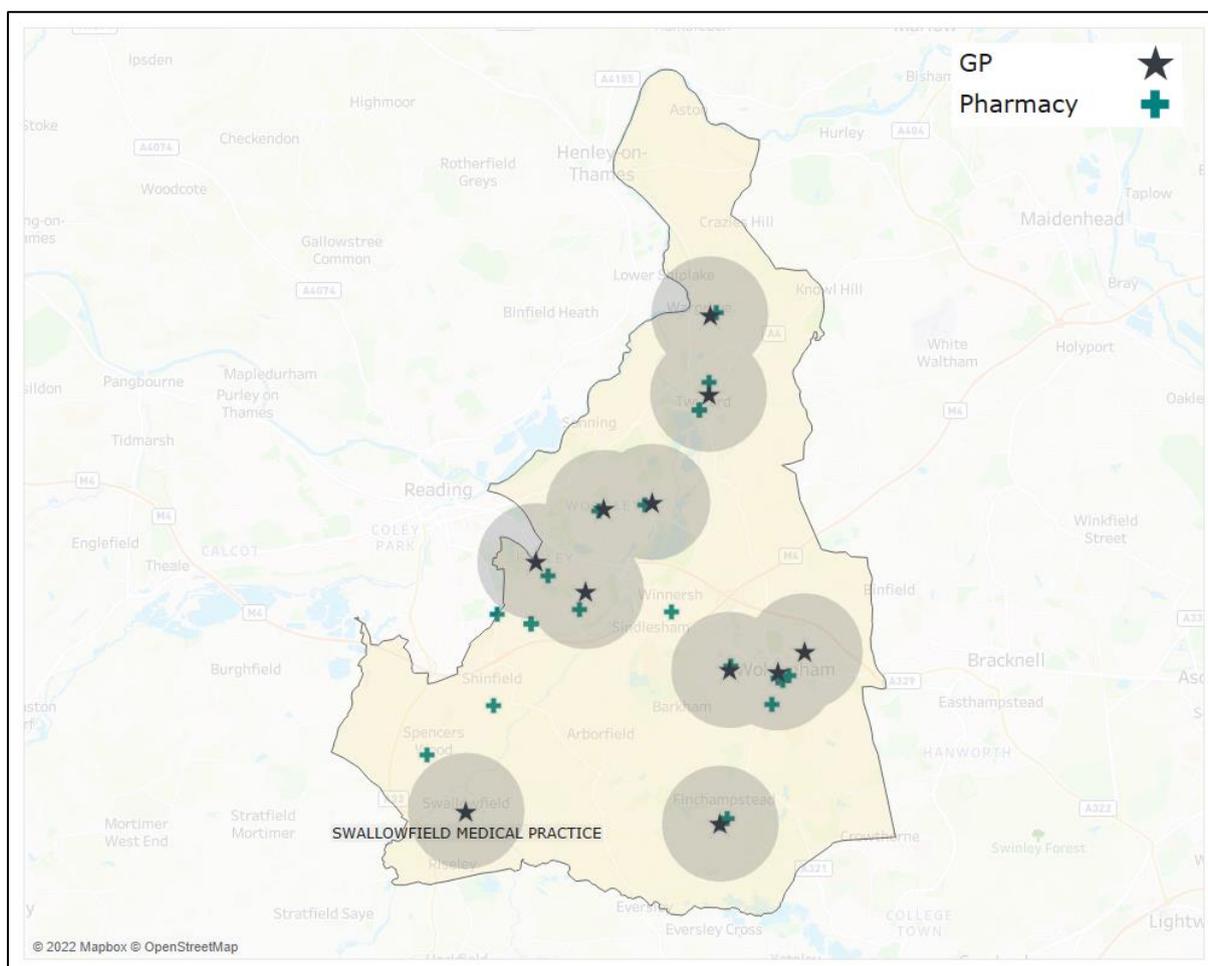
As part of the NHS Long Term Plan⁴³ all general practices were required to be in a primary care network (PCN) by June 2019. Since January 2019 Wokingham GPs organised themselves into five PCNs within Wokingham.

Each of these networks have expanded neighbourhood teams which will comprise of range of healthcare professionals including GPs, district nurses, community geriatricians, Allied Health Professionals, and pharmacists. It is essential that community pharmacies are able to fully engage with the PCNs to maximise service provision for their patients and residents. Altogether there are 13 GP member practices across these five PCNs.

⁴³ NHS England (2019). [The NHS long term plan](#). London, England

There is a pharmacy within accessible distance of most GP practices in Wokingham. Only Swallowfield Medical Practice, a GP dispensing practice is not within 1 mile of any pharmacy (Figure 7.6).

Figure 7.6: GP practices in Wokingham and their 1-mile coverage

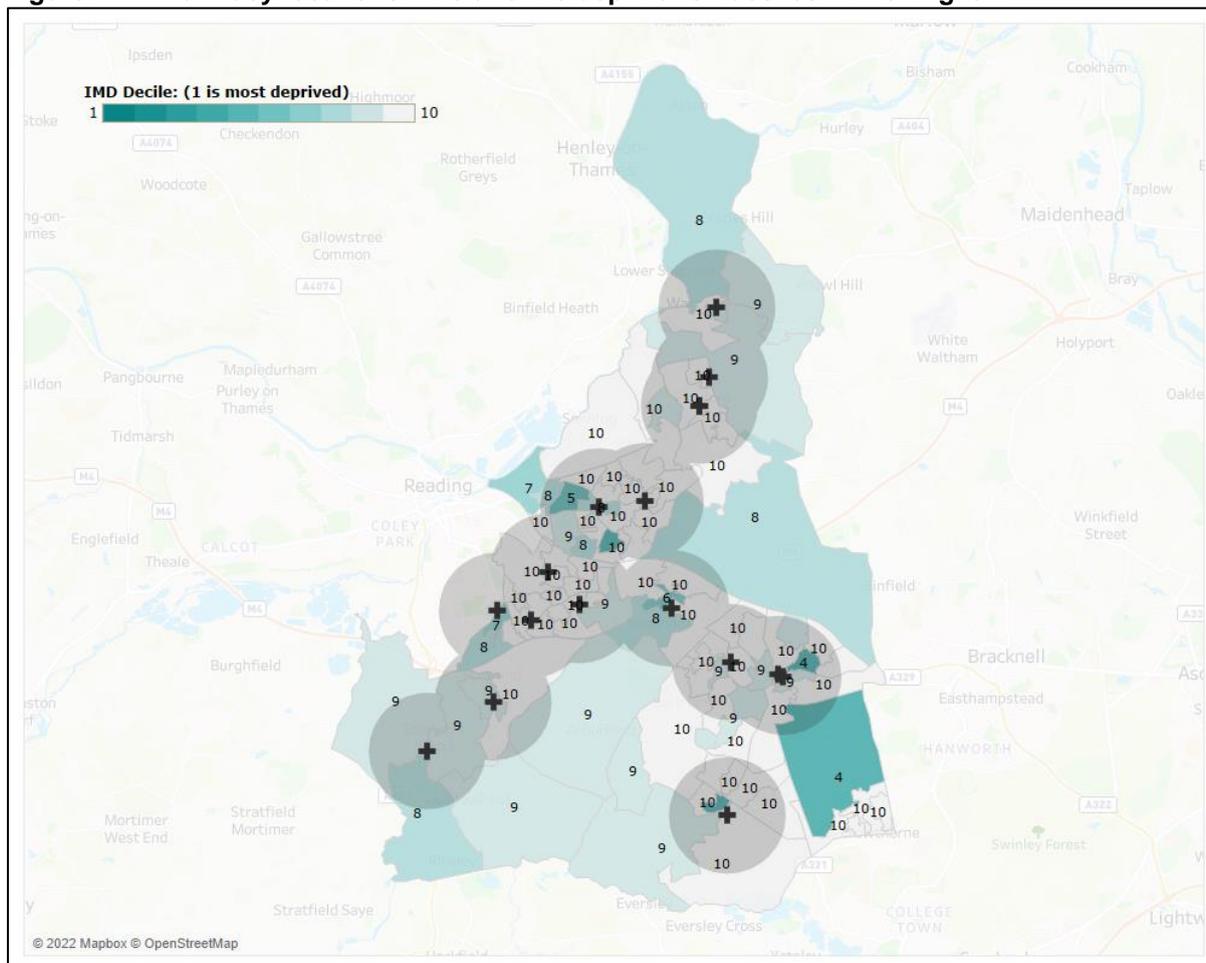


Source: NHS England, 2022

There are no firm plans for changes in the provision of Health and Social Care services within the lifetime of this PNA.

Pharmacy Distribution in relation to Index of Multiple Deprivation

Figure 7.7 presents pharmacy locations in relation to deprivation deciles. While there are no areas in the borough within the top 20% most deprived areas, pharmacies are close to areas that are with 4th and fifth deciles of deprivation.

Figure 7.7: Pharmacy locations in relation to deprivation deciles in Wokingham

Source: MHCLG & NHSE

Opening hours

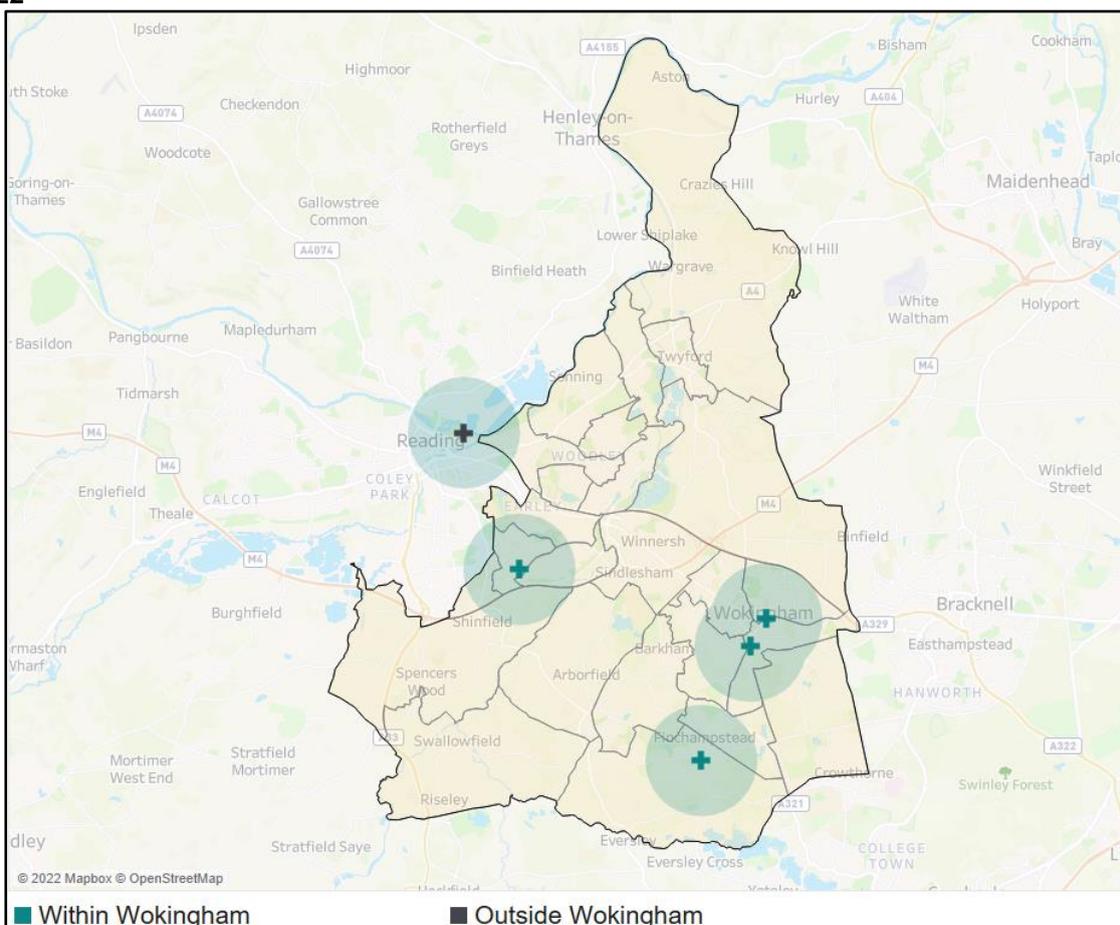
Pharmacy contracts with NHS England stipulate the core hours during which each pharmacy must remain open. Historically these have been 40-hour contracts (and some recent 100-hour contracts). A pharmacy may stay open longer than the stipulated core opening hours; these are called supplementary hours.

Opening times were obtained from NHS England in January 2022. Additionally, marketing entry updates to the NHS England pharmaceutical list were reflected on the original list.

100-hour pharmacies

NHS England has four 100-hour pharmacies (core hours) on their list for Wokingham. These are presented in Figure 7.8 and Table 7.3. There is one other 100-hour pharmacies which is outside the borough but within 1 mile of Wokingham's border (Figure 7.8).

Figure 7.8: 100-hour community pharmacies in Wokingham and their 1-mile coverage January 2022



Source: Contractor Survey and NHS England, 2022

Table 7.3: 100-hour pharmacies in Wokingham, January 2022

Pharmacy	Address	Ward
Asda Pharmacy	Chalfont Way, Lower Earley, Reading, Berkshire	Hillside
Tesco Pharmacy	78 Finchampstead Road, Wokingham, Berkshire	Wescott
Day Lewis Pharmacy	Finchampstead Surgery, 474-478 Finchampstead Rd, Finchampstead, Berkshire	Finchampstead South
Rose Street Pharmacy	Wokingham Medical Centre, 23 Rose Street, Wokingham, Berkshire	Wescott

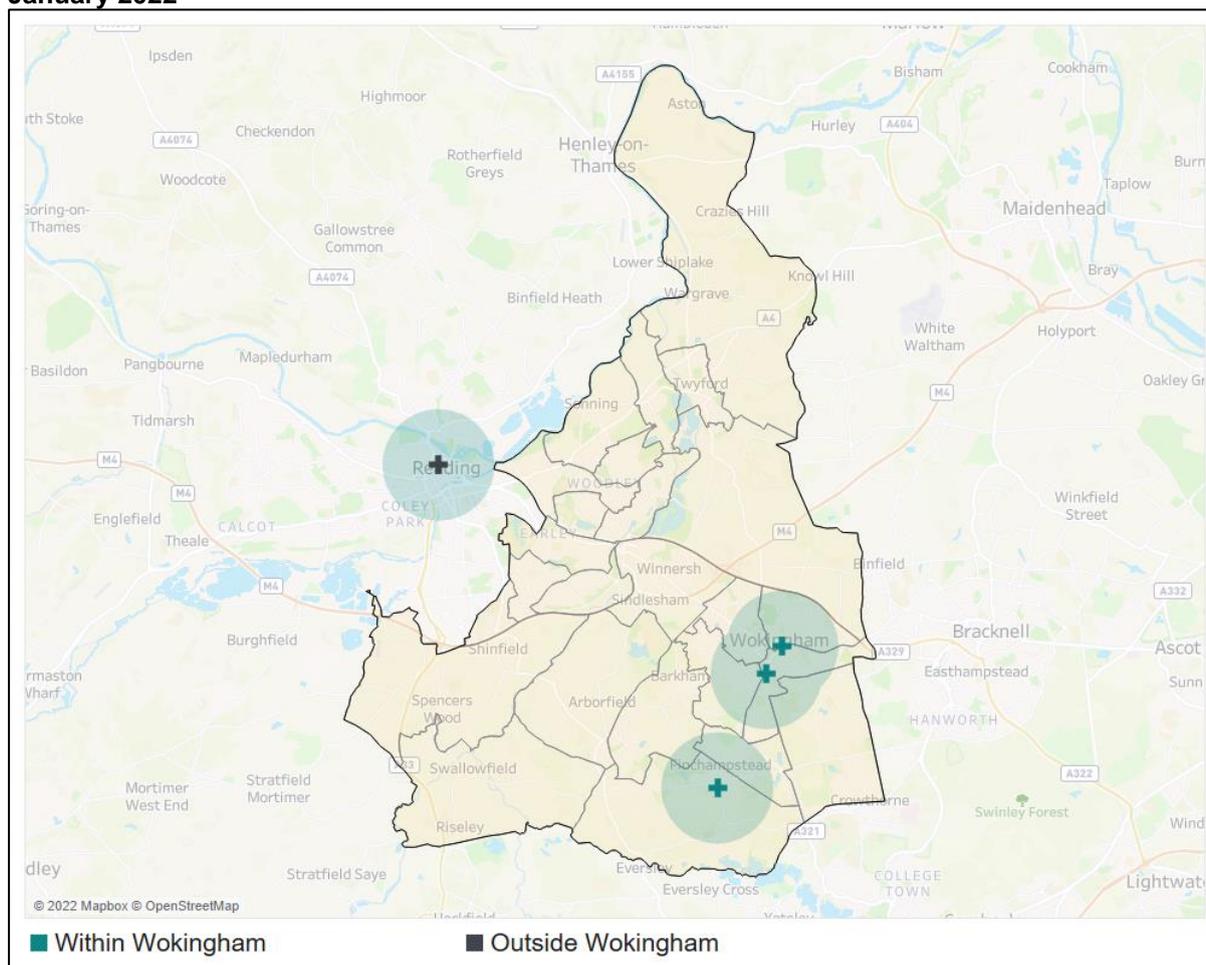
Source: Contractor Survey and NHS England, 2022

Early morning opening

The steering group considered 8am to 6pm as normal working hours hence any pharmacy opening before 8am was deemed to have early morning opening.

Three pharmacies are open before 8am on weekdays within the borough, and one other is within 1 mile of the borough’s border. These are shown in Figure 7.9 and Table 7.4.

Figure 7.9: Pharmacies that are open before 8am on a weekday and their 1-mile coverage, January 2022



Source: Contractor Survey and NHS England, 2022

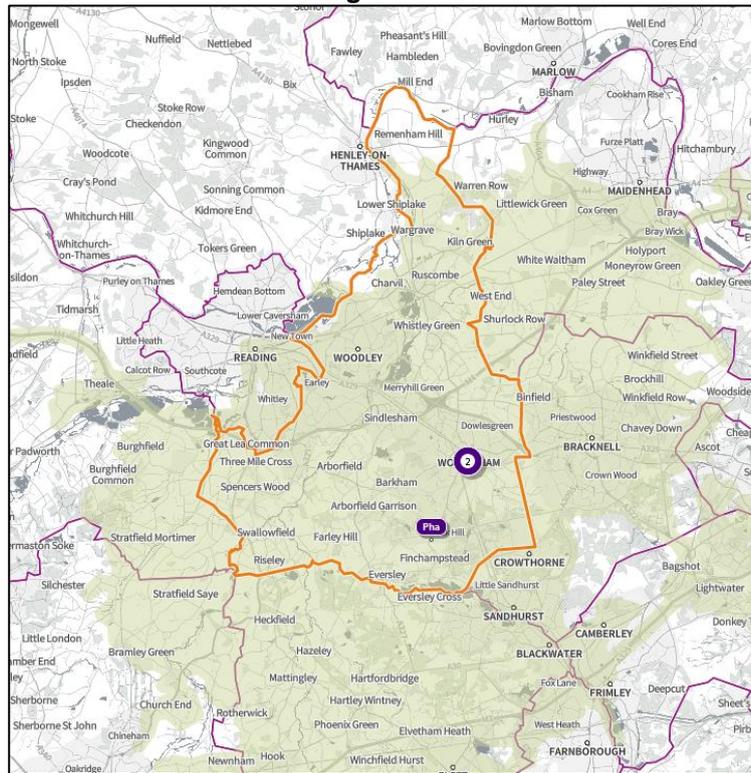
Table 7.4: Community Pharmacies open before 8am on weekdays in Wokingham

Pharmacy	Address	Ward
Tesco Pharmacy	78 Finchampstead Road, Wokingham, Berkshire	Wescott
Day Lewis Pharmacy	Finchampstead Surgery, 474-478 Finchampstead Rd, Finchampstead, Berkshire	Finchampstead South
Rose Street Pharmacy	Wokingham Medical Centre, 23 Rose Street, Wokingham, Berkshire	Wescott

Source: Contractor Survey and NHS England, 2022

Figure 7.10 presents the areas within and outside Wokingham that can reach a Wokingham pharmacy within 20-minutes if travelling by car (shown in green). All but 1,069 residents can reach an early opening pharmacy in 20 minutes if travelling by car.

Figure 7.10: Areas covered by 20-minute travel time by car to an early opening Wokingham pharmacy from within and outside the borough.



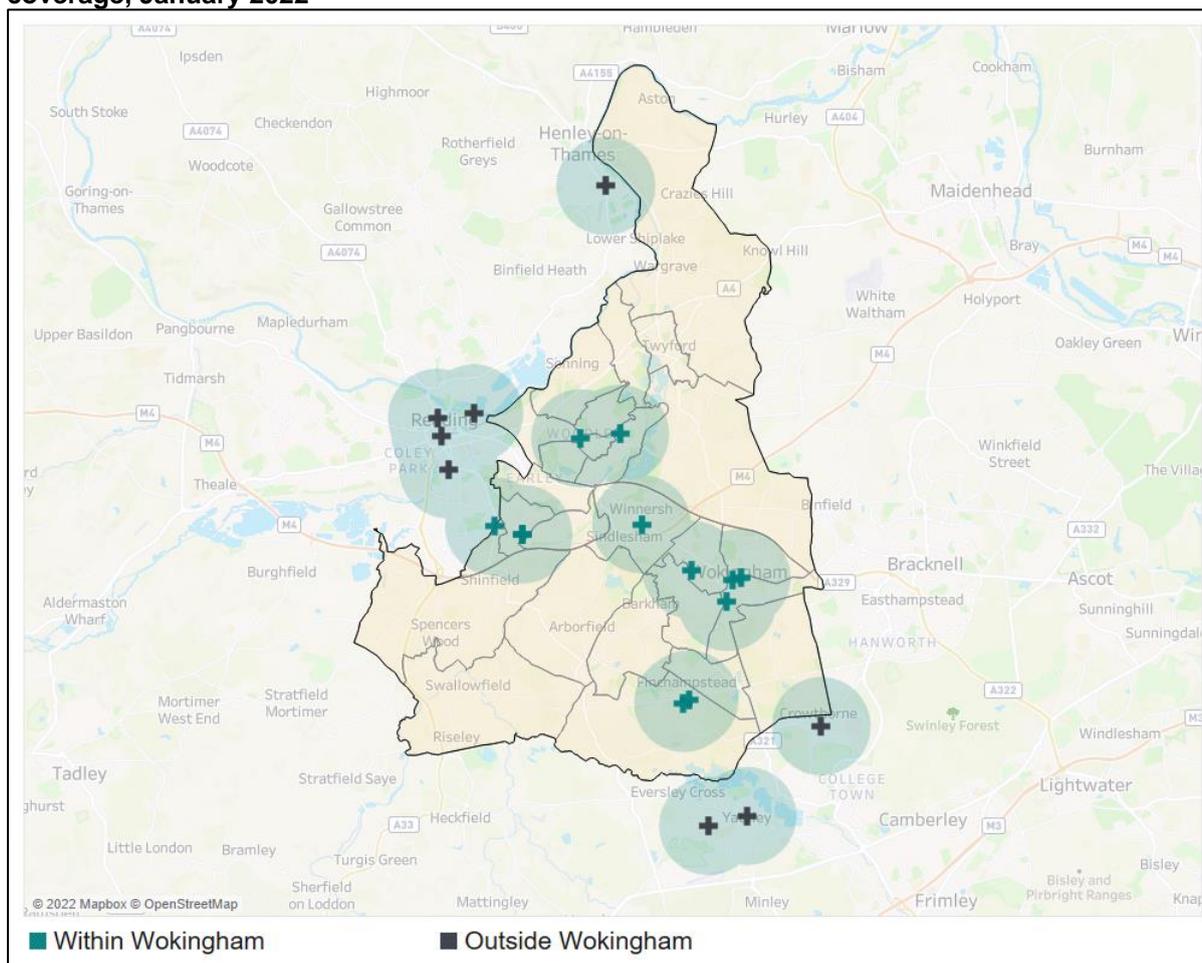
Source: OVID, Strategic Health Asset Planning and Evaluation Atlas Tool, 2022

Late evening closure

The steering group deemed pharmacies open after 6pm to be late-evening closing.

There are 12 pharmacies in the borough that still open after 6pm on weekdays, with eight other pharmacies within 1 mile of Wokingham (see Figure 7.11 and Table 7.5).

Figure 7.11: Community Pharmacies that are open after 6pm on weekdays and their 1-mile coverage, January 2022



Source: Contractor Survey and NHS England, 2022

Table 7.5: Community Pharmacies closing after 6pm on weekdays in Wokingham

Pharmacy	Address	Ward
Asda Pharmacy	Chalfont Way, Lower Earley, Reading, Berkshire	Hillside
Lloydspharmacy (in Sainsbury)	J Sainsbury Store, King Street Lane, Winnersh, Wokingham, Berkshire	Winnersh
Tesco Pharmacy	78 Finchampstead Road, Wokingham, Berkshire	Wescott
Morrisons Pharmacy	Woosehill Court, Workingham, Berkshire	Emmbrook
Day Lewis Pharmacy	Finchampstead Surgery, 474-478 Finchampstead Rd, Finchampstead, Berkshire	Finchampstead South
Boots the Chemists	89-91 Crockhamwell Road, Woodley, Reading, Berkshire	Bulmershe and Whitegates
Rose Street Pharmacy	Wokingham Medical Centre, 23 Rose Street, Wokingham, Berkshire	Wescott
Day Lewis Pharmacy	1-2 Loddon Vale Centre, Hurricane Way, Woodley, Reading, Berkshire	Loddon
Jats Pharmacy	422a Finchampstead Road, Finchampstead, Wokingham, Berkshire	Finchampstead South
Vantage Chemist	231 Shinfield Road, Reading, Berkshire	Shinfield North
Wokingham Pharmacy	33 Broad Street, Wokingham, Berkshire	Norreys
Your Local Boots Pharmacy	Unit 2, Asda Mall, Lower Earley District Ctr, Lower Earley, Reading, Berkshire	Hillside

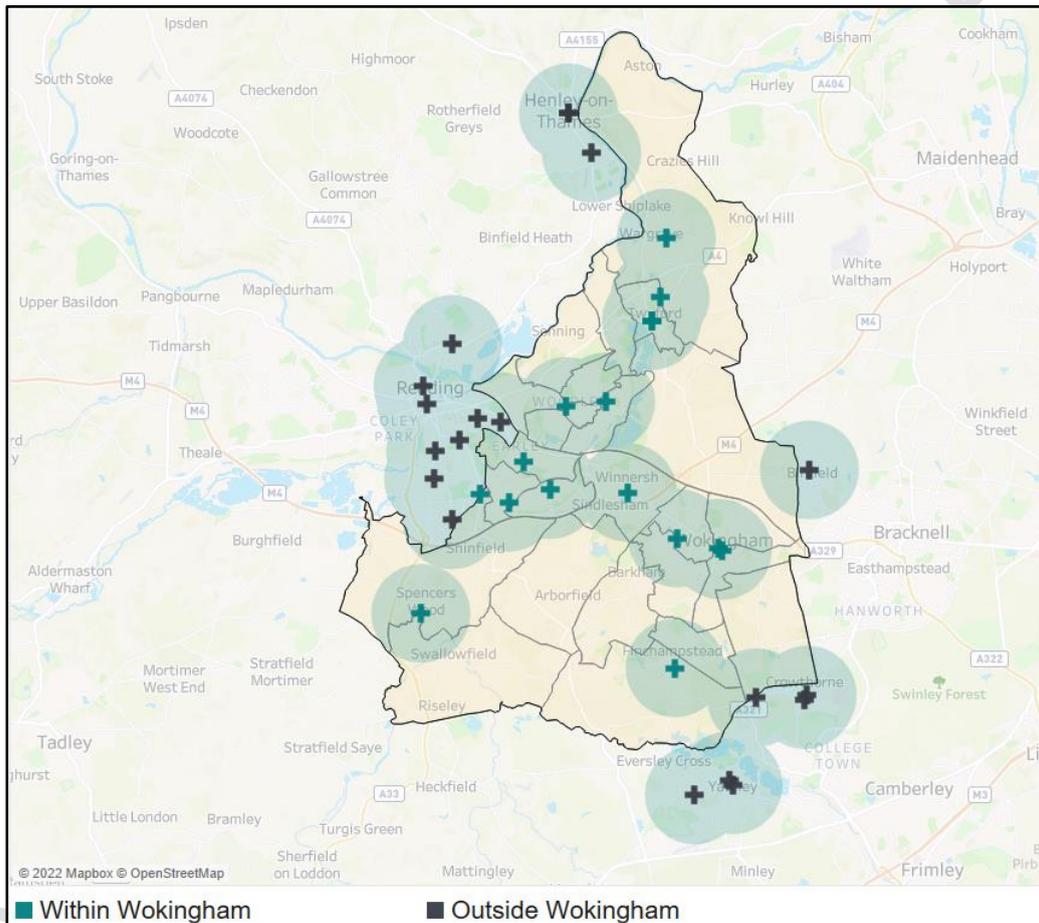
Source: Contractor Survey and NHS England, 2022

In terms of travel distance, 100% of Wokingham residents live within 20-minute reach of late closing pharmacy by car (OHID, SHAPE Atlas Tool, 2022).

Saturday opening

Almost all the community pharmacies in Wokingham (20/21) are open on Saturday. There are additional 20 pharmacies near the borough’s border that are also open on Saturday (Figure 7.12).

Figure 7.12: Community Pharmacies open on Saturday and their 1-mile coverage, January 2022



Source: Contractor Survey and NHS England, 2022

A breakdown of the pharmacies open on Saturdays by ward is shown in Table 7.6.

Table 7.6: Location of Pharmacies in Wokingham that are open on Saturday by ward

Ward	Number of Pharmacies
Wescott	3
Twyford	3
Hillside	2

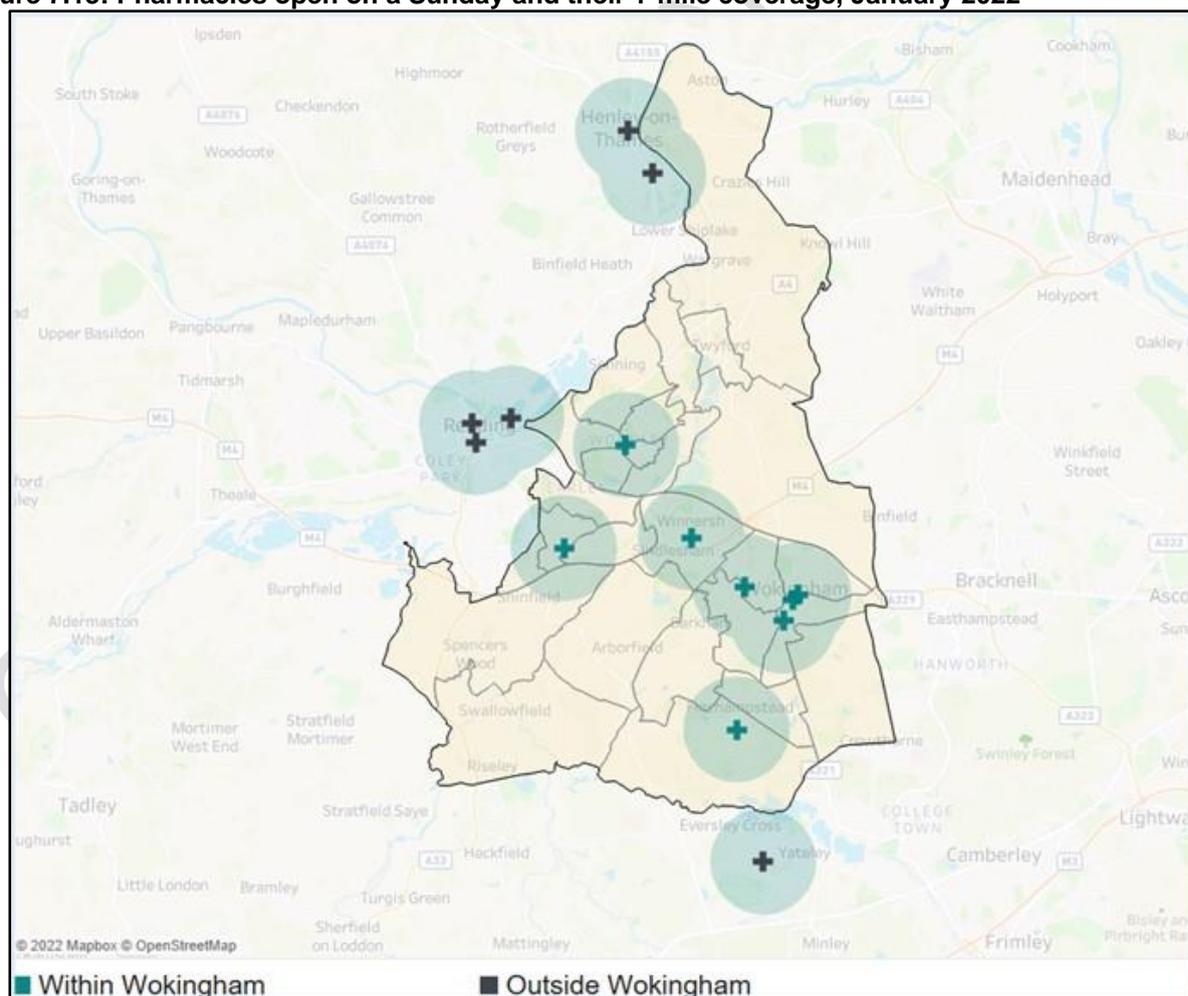
Ward	Number of Pharmacies
Finchampstead South	2
Winnersh	1
Swallowfield	1
Shinfield North	1
Remenham, Wargrave and Ruscombe	1
Norreys	1
Maiden Erlegh	1
Loddon	1
Hawkedon	1
Emmbrook	1
Bulmershe and Whitegates	1

Source: Contractor Survey and NHS England, 2022

Sunday Opening

Eight pharmacies are open on a Sunday within the borough, with six open in boroughs around Wokingham within 1 mile of its borders (Figure 7.13, Table 7.7).

Figure 7.13: Pharmacies open on a Sunday and their 1-mile coverage, January 2022



Source: Contractor Survey and NHS England, 2022

Table 7.7: Community Pharmacies open on Sunday in Wokingham, January 2022

Pharmacy	Address	Ward
Asda Pharmacy	Chalfont Way, Lower Earley, Reading, Berkshire	Hillside
Lloydspharmacy (in Sainsbury)	J Sainsbury Store, King Street Lane, Winnersh, Wokingham, Berkshire	Winnersh
Tesco Pharmacy	78 Finchampstead Road, Wokingham, Berkshire	Wescott
Morrisons Pharmacy	Woosehill Court, Wokingham, Berkshire	Emmbrook
Day Lewis Pharmacy	Finchampstead Surgery, 474-478 Finchampstead Rd, Finchampstead, Berkshire	Finchampstead South
Boots the Chemists	89-91 Crockhamwell Road, Woodley, Reading, Berkshire	Bulmershe and Whitegates
Boots the Chemists	40 Market Place, Wokingham, Berkshire	Wescott
Rose Street Pharmacy	Wokingham Medical Centre, 23 Rose Street, Wokingham, Berkshire	Wescott

Source: Contractor Survey and NHS England, 2022

All residents can reach a Saturday and Sunday opening Wokingham pharmacy in 20 minutes if travelling by car (OVID, Strategic Health Asset Planning and Evaluation Atlas Tool, 2022).

Essential services

Essential services are offered by all pharmacy contractors as part of the NHS Community Pharmacy Contractual Framework. All pharmacy contractors are required to deliver and comply with the specifications for all essential services. These are:

- Dispensing Medicines
- Dispensing Appliances
- Repeat Dispensing
- Clinical governance
- Discharge Medicines Service
- Promotion of Healthy Lifestyles
- Signposting
- Support for self-care
- Disposal of Unwanted Medicines

Dispensing

Wokingham pharmacies dispense an average of 7,605 items per month (based on NHS Business Services Authority, 2020/21 financial year data). This is slightly higher than the national average of 6,675 per month.

Summary of the accessibility pharmacy services and of essential services

Overall, there is good pharmacy coverage to provide essential services across the borough both inside working hours and outside normal working hours.

Advanced pharmacy services

Advanced services are NHS England commissioned services that community pharmacy contractors and dispensing appliance contractors can provide subject to accreditation as necessary.

As at January 2022, the following services may be provided by pharmacies:

- new medicine service
- community pharmacy seasonal influenza vaccination
- community pharmacist consultation service
- hypertension case-finding service
- community pharmacy hepatitis C antibody testing service (currently until 31 March 2022).

In early 2022 a stop-smoking service in pharmacies will be introduced for patients who started their stop-smoking journey in hospital.

There are two appliance advanced services that pharmacies and dispensing appliance contractors may choose to provide:

1. appliance use reviews, and
2. stoma appliance customisation.

New medicines services

The New Medicine Service (NMS) supports patients with long-term conditions, who are taking a newly prescribed medicine, to help improve medicines adherence.

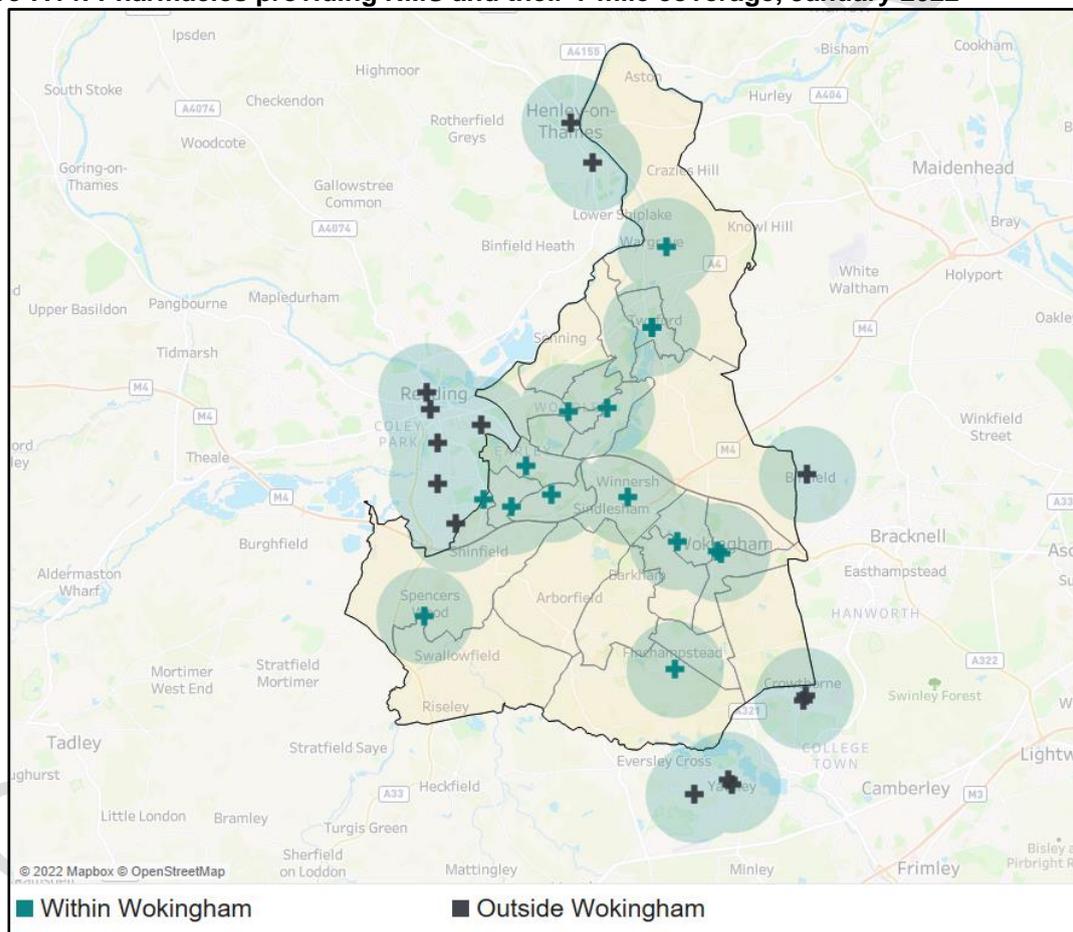
This service is designed to improve patients' understanding of a newly prescribed medicine for their long-term condition, and to help them get the most from the medicine. It aims to improve adherence to new medication, focusing on people with specific conditions, namely:

- Asthma and COPD
- Type 2 diabetes
- Antiplatelet or anticoagulation therapy
- Hypertension

New Medicines Service can only be provided by pharmacies and is conducted in a private consultation area to ensure patient confidentiality.

Nineteen pharmacies in Wokingham provided NMS in 2020/21. There are an additional 15 pharmacies in bordering boroughs that provided NMS. All these pharmacies are shown in Figure 7.14.

Figure 7.14: Pharmacies providing NMS and their 1-mile coverage, January 2022



Source: NHS England, 2022

Table 7.8 shows NMS provision by Wokingham wards.

Table 7.8: Number of NMS provided by Wokingham pharmacies by ward, 2020/21

Ward	Number of Pharmacies	Total Number of NMSs provided	Average Number per Pharmacy
Wescott	3	513	171
Twyford	2	306	153
Hillside	2	4	2
Finchampstead South	2	520	260
Winnersh	1	16	16
Swallowfield	1	187	187
Shinfield North	1	117	117
Remenham, Wargrave and Ruscombe	1	100	100
Norreys	1	55	55
Maiden Erlegh	1	55	55
Loddon	1	457	457
Hawkedon	1	136	136
Emmbrook	1	32	32
Bulmershe and Whitegates	1	80	80
Borough Total	19	2,578	136

Source: NHS England, 2022

NMS are supplied widely across the borough within areas of high density and need, therefore there is sufficient NMS provision to meet the needs of this borough.

Community pharmacy seasonal influenza vaccination

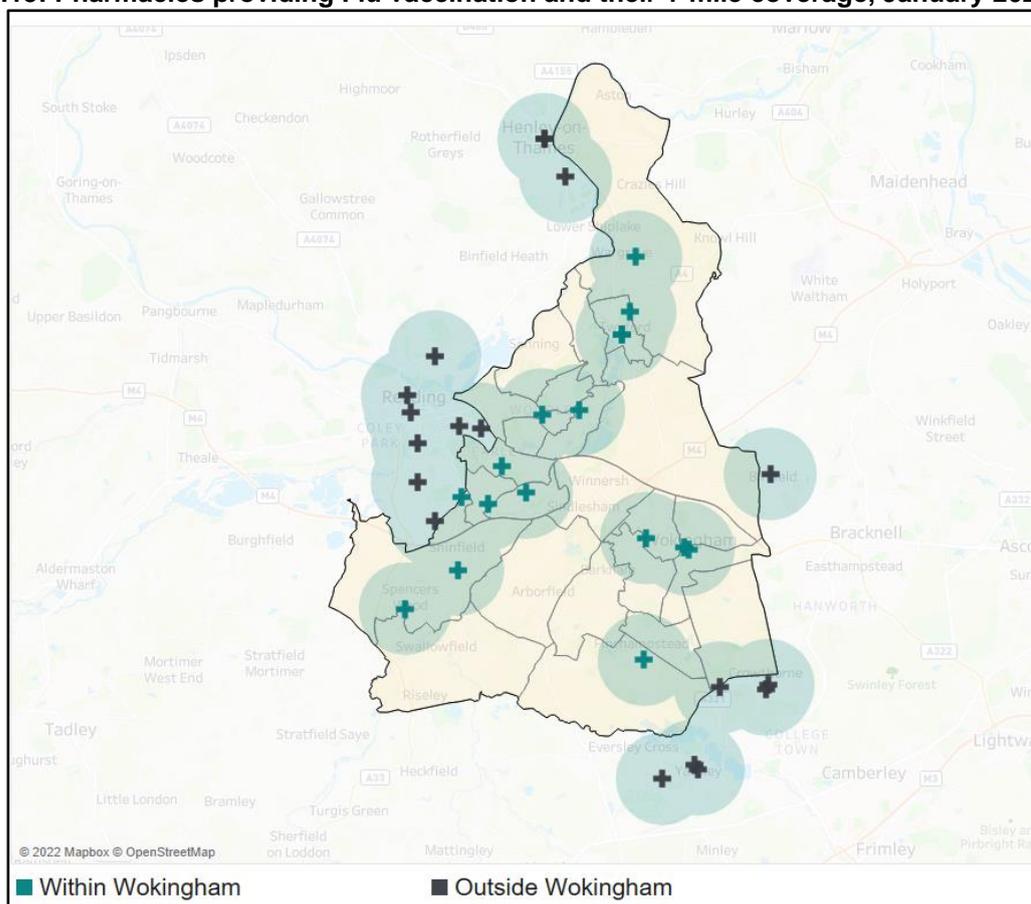
Flu vaccination by injection, commonly known as the "flu jab" is available every year on the NHS to protect certain groups who are at risk of developing potentially serious complications, such as:

- anyone over the age of 65
- pregnant women
- children and adults with an underlying health condition (particularly long-term heart or respiratory disease)
- children and adults with weakened immune systems

GPs currently provide the majority of flu vaccinations and pharmacies can help improve access to this service given their convenient locations, extended opening hours and walk-in service. The National Advanced Flu Service is an advanced service commissioned by NHS England to maximise the uptake of the flu vaccine by those who are 'at-risk' due to ill-health or long terms condition.

A good proportion of community pharmacies (i.e., 20 out of 21) in the borough provided flu vaccines (20/21) in Wokingham in 2020/21. Another 19 outside but bordering the borough provided the service. The distribution of these pharmacies is shown in Figure 7.15 and Table 7.9.

Figure 7.15: Pharmacies providing Flu vaccination and their 1-mile coverage, January 2022



Source: NHS England, 2022

Table 7.9: Pharmacies that provide Flu Vaccinations in Wokingham by ward, January 2022

Ward	Number of Pharmacies
Wescott	3
Twyford	3
Hillside	2
Finchampstead South	2
Swallowfield	1
SShinfield South	1
Shinfield North	1
Remenham, Wargrave and Ruscombe	1
Norreys	1
Maiden Erlegh	1
Loddon	1
Hawkedon	1
Emmbrook	1

Overall, there is strong coverage of this service across Wokingham. Therefore, there is sufficient provision of Advanced Flu Service to meet the needs of this borough.

Community pharmacist consultation service (CPCS)

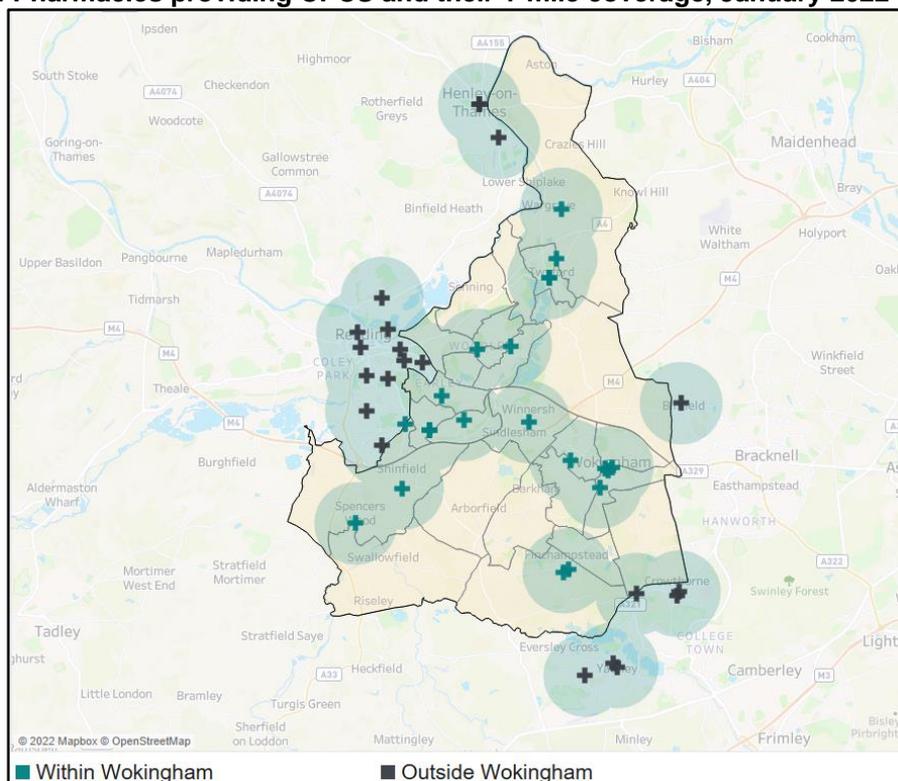
The community pharmacist consultation service (CPCS) is a new service provided by pharmacies, launched in October 2019. The aims of the service are to support the integration of community pharmacy into the urgent care system, and to divert patients with lower acuity conditions or who require urgent prescriptions from the urgent care system and to community pharmacies.

It also offers patients who contact NHS 111 the opportunity to access appropriate urgent care services in a convenient and easily accessible community pharmacy setting, on referral from an NHS 111 call advisor and via the NHS 111 Online service.

There is strong coverage of CPCS in Wokingham. All 21 community pharmacies in the borough provided CPCS in 2020/21. There are an additional 21 pharmacies in neighbouring boroughs that provided the service (Figure 7.16).

The HWB conclude that there is sufficient CPCS provision to meet the needs of this borough.

Figure 7.16: Pharmacies providing CPCs and their 1-mile coverage, January 2022



Source: NHS England, 2022

Hypertension case-finding service

Hypertension case-finding service is a relatively new service and at the time of publication NHSE does not report any pharmacy in Wokingham offering this service.

Five respondents to the contractor survey indicated being willing to provide the service if commissioned.

Community pharmacy hepatitis C antibody testing service

NHSE data does not show any pharmacy offering Community pharmacy hepatitis C antibody testing service as of the time of publication.

Four respondents to the contractor survey indicated being willing to provide the service if commissioned.

Appliance use reviews (AURs)

Appliance Use Review (AUR) is another advanced service that community pharmacy and appliance contractors can choose to provide so long as they fulfil certain criteria.

AURs can be carried out by, a pharmacist, or a specialist nurse either at the contractor's premises (typically within a DAC) or at the patient's home. AURs help patients to better understand and use their prescribed appliances by:

- Establishing the way the patient uses the appliance and the patient's experience of such use
- Identifying, discussing and assisting in the resolution of poor or ineffective use of the appliance by the patient
- Advising the patient on the safe and appropriate storage of the appliance
- Advising the patient on the safe and proper disposal of the appliances that are used or unwanted.

No pharmacies within or bordering the borough provided this service in 2020/21. However, Wokingham pharmacies have indicated they are able to provide this service if there a need is identified. AURs can also be provided by prescribing health and social care providers. Therefore, there is sufficient provision of the AUR service to meet the current needs of this borough.

Stoma appliance customisation service (SAC)

The SAC service involves the customisation of a quantity of more than one stoma appliance, based on the patient's measurements or a template. The aim of the service is to ensure proper use and comfortable fitting of the stoma appliance and to improve the duration of usage, thereby reducing waste.

Three pharmacies provided SACs within Wokingham in 2020/21 (Table 7.10).

Table 7.10: Pharmacies that provide SAC in Wokingham, January 2022

Pharmacy	Address	Ward
Fittleworth Medical Limited	3 Woodside Business Park, Whitley Wood Lane, Reading	Whitley
Fittleworth Medical Ltd	Unit 1&2 Twyford Bus Park, Station Road, Twyford, Reading	Twyford
LloydsPharmacy	Milman Road Health Centre, Ground Floor Milman Road, Reading, Berkshire	Katesgrove

Source: NHS England, 2022

Residents can also access the SAC service either from non-pharmacy providers within the borough (e.g., community health services) or from dispensing appliance contractors outside of the borough. Therefore, there is sufficient provision of the SAC service to meet the needs of this borough.

Summary of the Advanced Pharmacy Services

It is concluded that there is currently sufficient provision for the following advanced services to meet the likely needs of residents in Wokingham:

- New medicine service
- Community pharmacy seasonal influenza vaccination
- Community pharmacist consultation service
- Hypertension case-finding service
- Appliance use reviews
- Stoma Appliance Customisation service

At the time of data collection for this PNA, no data was available on the following newly commissioned service:

- Stop-smoking service in pharmacies for patients who started their stop-smoking journey in hospital

Wokingham pharmacies have indicated their willingness to provide these services, therefore no gap is evident for future access to these advanced services.

Other NHS services

Other NHS services are those services that are provided as part of the health service. They include services that are provided or arranged by a local authority (for example the public health services commissioned from pharmacies), NHS England and NHS Improvement, a clinical commissioning group, an NHS trust or an NHS foundation trust. Locally these types of services are commissioned by the Wokingham Borough Council and Frimley Health and Care to fulfil a local population health and wellbeing need. These are listed below:

- Local authority commissioned services:
 - Needle exchange
 - Supervised consumption
 - Pharmacy emergency hormonal contraception service
- Frimley Health and Care commissioned services:
 - Access to palliative care medicine
 - Provision of antiviral medication

The provision of these services is explored below.

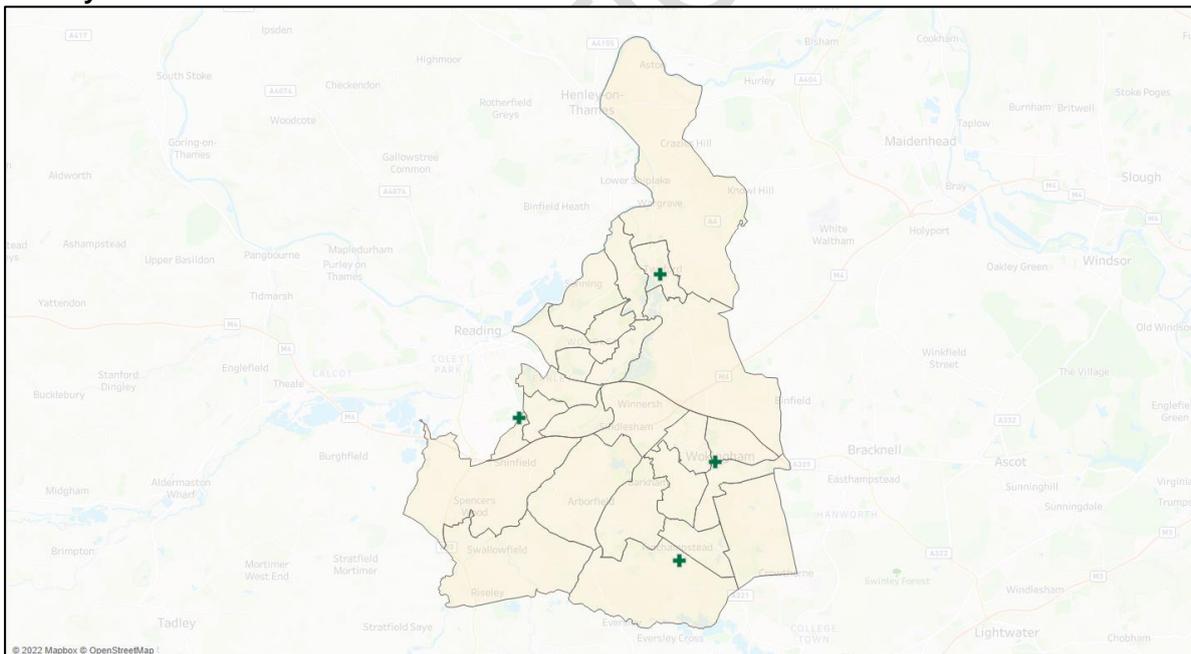
Needle exchange

The needle exchange service in Wokingham supplies needles, syringes and other equipment used to prepare and take illicit drugs. The purpose of this services is to reduce the transmission of blood-borne viruses such as hepatitis B and C, and other infections caused by sharing injecting equipment.

Needle exchange services also aim to reduce the harm caused by injecting drugs through providing information and advice and acting as a gateway to other services, including drug treatment centres.

Four pharmacies in Wokingham offer needle exchange services (see Figure 7.17 and Table 7.11). In consideration of the need substance misuse services as outlined in paragraphs 5.17 and 5.18 there is adequate provision of needle exchange services in Wokingham. However, there is opportunity for commissioners to work with existing providers to widen the provision of this service to offer more choice for patients.

Figure 7.17: Location of pharmacies that provide Needle Exchange Services in Wokingham, January 2022



Source: Wokingham Borough Council, 2022

Table 7.11: Pharmacies that provide Needle Exchange services in Wokingham, January 2022

Pharmacy	Address	Ward
Newdays Pharmacy	1 London Road, Twyford, Reading, Berkshire	Twyford
Jats Pharmacy	422a Finchampstead Road, Finchampstead, Wokingham, Berkshire	Finchampstead South
Vantage Chemist	231 Shinfield Road, Reading, Berkshire	Shinfield North
Wokingham Pharmacy	33 Broad Street, Wokingham, Berkshire	Norreys

Source: Wokingham Borough Council, 2022

Supervised consumption

Cranstoun on behalf of Wokingham Borough Council commissions community pharmacies to provide supervised consumption as part of treatment services for opioid dependency.

Supervised consumption of opioid substitution treatment forms a critical element of safe and effective treatment in the community. It reduces risk of overdose and non-compliance with treatment, minimises diversion and enables people being treated for opioid dependency to utilise the benefits of pharmacy intervention around health choices. It is typically used for people who are new to treatment and/or have complex needs.

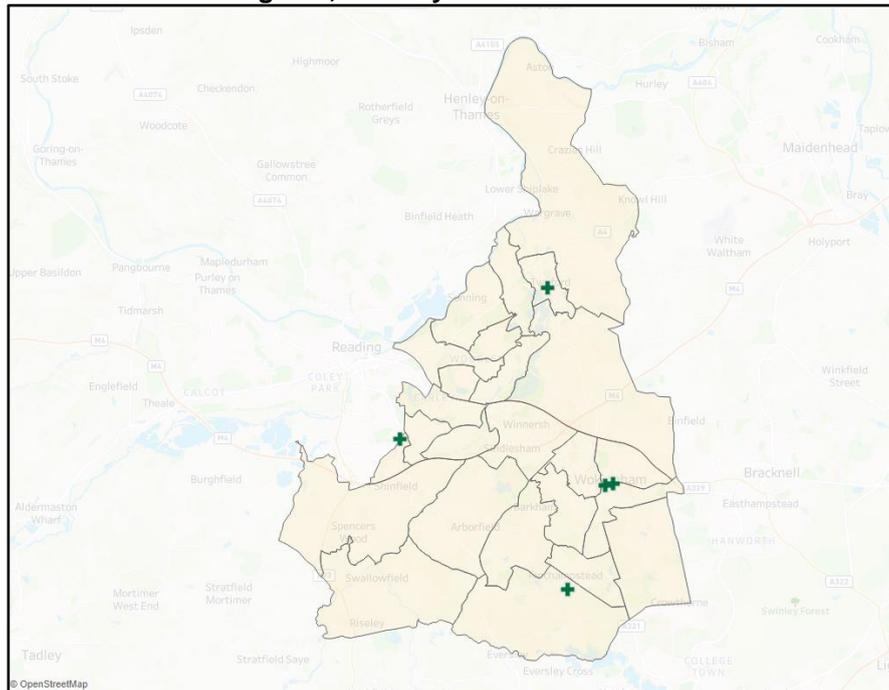
The Service requires pharmacists to supervise the consumption of methadone and buprenorphine to Service Users at the point of dispensing by the pharmacy, ensuring that the correct dose has been administered to the Service User and that it has been consumed in its entirety.

The aims of the service are to:

- Increase Service User compliance with the prescribing regime that they are on as part of an agreed treatment plan, and to increase retention in structured drug treatment
- Reduce the overuse or underuse of prescribed substitute opiate medications
- Reduce the diversion of prescribed medications on to the illicit drugs market, by ensuring that the prescribed medication is consumed by the Service Users for whom it was intended.

Five pharmacies in Wokingham offer supervised consumption services in areas of high population density and high deprivation (see Figure 7.18 and Table 7.12). While there is adequate provision of the supervised consumption service in Wokingham to support identified need (in paragraphs 5.17 and 5.18) there is opportunity for commissioners to work with existing providers to widen the provision of this service to offer more choice for patients.

Figure 7.18: Location of pharmacies that provide Needle Exchange and Supervised Consumption Services in Wokingham, January 2022



Source: Wokingham Borough Council, 2022

Table 7.12: Pharmacies that provide Supervised Consumption services in Wokingham, January 2022

Pharmacy	Address	Ward
Newdays Pharmacy	1 London Road, Twyford, Reading, Berkshire	Twyford
Rose Street Pharmacy	Wokingham Medical Centre, 23 Rose Street, Wokingham, Berkshire	Wescott
Jats Pharmacy	422a Finchampstead Road, Finchampstead, Wokingham, Berkshire	Finchampstead South
Vantage Chemist	231 Shinfield Road, Reading, Berkshire	Shinfield North
Wokingham Pharmacy	33 Broad Street, Wokingham, Berkshire	Norreys

Source: Wokingham Borough Council, 2022

Pharmacy emergency hormonal contraception service

This is a Patient Group Direction that increases access to emergency hormonal contraception for young people. The service applies 'Making Every Contact Count' (MECC) principles to deliver a holistic sexual health intervention to young women seeking emergency hormonal contraception. The service also actively supports young women and men to access online services for sexual health information and advice and for online STI testing where available by signposting to the SafeSexBerkshire⁴⁴ website.

The service aims to:

- prevent unplanned pregnancies in young people through the provision of free emergency hormonal contraception (Levonelle1500® or EllaOne® Emergency Hormonal Contraception)
- young people to access sexual health information and advice through local online and face to face services
- provide condoms to young women and their partners accessing EHC
- support young people to access free online STI testing where available.

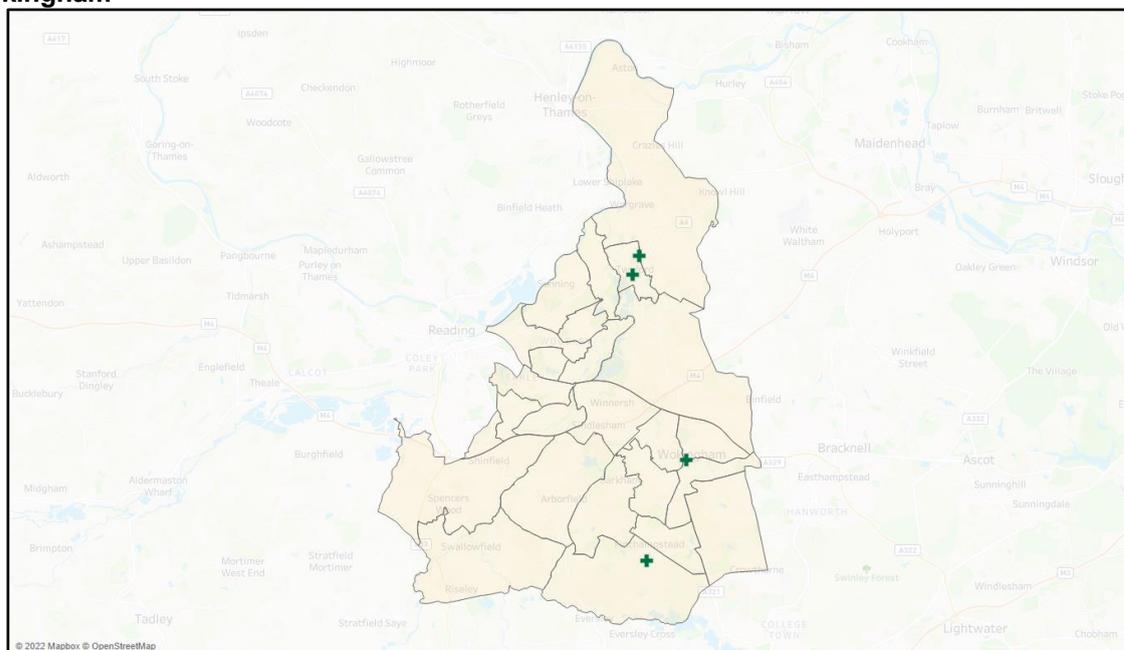
All pharmacists providing this service will have completed the Centre for Pharmacy Postgraduate Education (CPPE) Declaration of Competence for EHC and register this on PharmOutcomes.

Four pharmacies offer this service in Wokingham. Their locations are showing in Figure 7.19 and Table 7.13. In consideration of the low rate of teenage pregnancies in Wokingham

⁴⁴ <https://www.safesexberkshire.nhs.uk/>

(paragraph 5.29) there is not a high need for this service. However more pharmacies can be encouraged to provide this service to widen the choice for patients.

Figure 7.19: Location of pharmacies that provide Emergency Hormonal Contraception Service in Wokingham



Source: Wokingham Borough Council, 2022

Table 7.13: Pharmacies that provide Emergency Hormonal Contraception Services in Wokingham by ward, January 2022

Pharmacy	Address	Ward
Fields Pharmacy	1a Longfield Road, Twyford, Reading, Berkshire	Twyford
Newdays Pharmacy	1 London Road, Twyford, Reading, Berkshire	Twyford
Day Lewis Pharmacy	Finchampstead Surgery, 474-478 Finchampstead Rd, Finchampstead, Berkshire	Finchampstead South
Wokingham Pharmacy	33 Broad Street, Wokingham, Berkshire	Norreys

Source: Wokingham Borough Council, 2022

Access to palliative care

This service is commissioned by Berkshire West CCG to ensure that their community teams have guaranteed provision of routine palliative care drugs. This is to prevent any difficulties they may experience in obtaining emergency drugs for their patients.

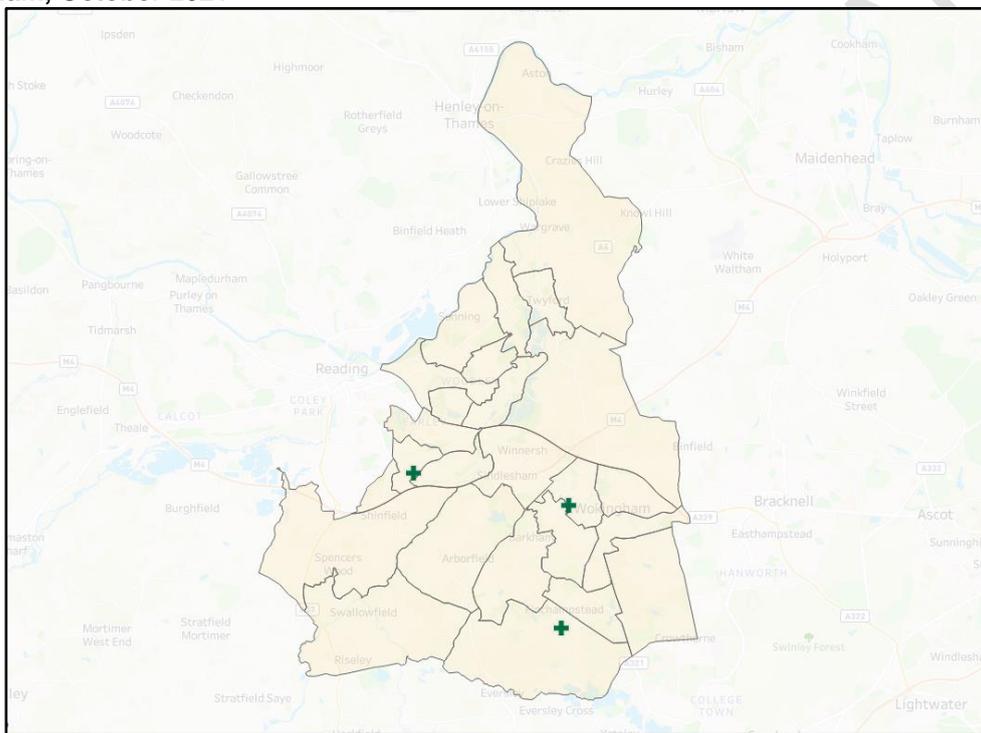
The aim of the service is to improve access for people to these specialist medicines when they are required by ensuring prompt access and continuity of supply.

Community teams will be able to access these drugs during the pharmacies' normal opening hours (NB. This arrangement does not cover access to medicines outside of contracted hours).

Pharmacies have duty to ensure that pharmacists and staff involved in the provision of the service have relevant knowledge and are appropriately trained in the operation of the service.

Three pharmacies provide the Access to Palliative Care service. They are shown in Figure 7.19 and Table 7.14.

Figure 7.20: Location of pharmacies that provide the Access to Palliative Care Services in Wokingham, October 2021



Source: Berkshire West CCG, 2022

Table 7.14: Pharmacies that provide the Access to Palliative Care Service in Wokingham, January 2022

Pharmacy	Address	Ward
Morrisons Pharmacy	Woosehill Court, Wokingham, Berkshire	Emmbrook
Day Lewis Pharmacy	Finchampstead Surgery, 474-478 Finchampstead Rd, Finchampstead, Berkshire	Finchampstead South
Your Local Boots Pharmacy	Unit 2, Asda Mall, Lower Earley District Ctr, Lower Earley, Reading, Berkshire	Hillside

Source: Berkshire West CCG, 2022

Provision of antiviral medication

The aim of the service is to improve access to antiviral treatment when it is required, by ensuring prompt access and continuity of supply, during both in and out of flu season. Pharmacies that provide this service are required to hold stock of the medication ensuring that users of this service have prompt access to these medicines during normal working hours.

Morrisons Pharmacy on Woosehill Court (Emmbrook ward) holds the contract for this in Wokingham.

Summary of other NHS pharmacy services

It is concluded that there is currently sufficient provision for the following other NHS services to meet the likely needs of residents in Wokingham:

- Needle exchange and supervised consumption
- Sexual health services
- Tailored dispensing services

Additional considerations from contractor survey responses

Languages spoken in pharmacies

According to the contractor survey responses, there are a wide range of languages spoken in Wokingham pharmacies. The most common languages besides English spoken by pharmacy staff are Hindi, Urdu, and German. The most common non-English languages spoken in Wokingham are Polish, French and Turkey. No pharmacies in Wokingham reported having staff that speak Polish. Given the low number of non-English speakers in the borough, this is unlikely to adversely impact access of residents to pharmaceutical services.

Table 7.15 lists the most common languages spoken by a member of staff in Wokingham pharmacies.

Table 7.15: Top 10 languages spoken by a member of staff at the pharmacies in Wokingham

Language	Number of Pharmacies
Hindi	4
German	3
Urdu	2
Mandarin	2
Bulgarian	1
Punjabi	1
Tamil	1
Arabic	1
Russian	1
French	1

Source: Wokingham Contractor Survey, 2022

Chapter 8 - Conclusions

- 8.1 This PNA has considered the current provision of pharmaceutical services across Wokingham in alongside the health needs and demographics of its population. It has assessed whether current provision meets the needs of the population and whether there are any gaps in the provision of pharmaceutical services either now or within the lifetime of this document, 1st October 2022 to 30th September 2025.
- 8.2 There are several factors that can affect pharmacy needs, including deprivation and protected characteristics. While Wokingham is a mostly affluent borough, but does have pockets of higher deprivation within Wokingham Without and Norreys Wards.
- 8.3 To identify where there are different needs for people who share a protected characteristic a survey was disseminated across Wokingham and the rest of Berkshire. The purpose was to engage the population as a whole, as well as those representing people who share protected characteristics and those who are seldom heard. 249 patients and public responded to the survey on their use and views on 'necessary' pharmacy services in Wokingham. Overall, participants were happy with the services their pharmacy provided and no different needs for people who share a protected characteristic in Wokingham were found.
- 8.4 This chapter will summarise the provision of these services in Wokingham and its surrounding local authorities.

Current provision

- 8.5 The steering group has identified the following services as necessary to this PNA to meet the need for pharmaceutical services:
- Essential services provided at all premises included in the pharmaceutical lists.
- 8.6 Other Relevant Services are services provided which are not necessary to meet the need for pharmaceutical services in the area, but which nonetheless have secured improvements or better access to medicines. The steering group has identified the following as Other Relevant Services:
- Adequate provision of advanced and other NHS services to meet the need of the local population.

Current access to essential services

8.7 Essential services are those listed in paragraph 7.39. In assessing the provision of essential services against the needs of the population, the steering group considered access as the most important factor in determining the extent to which the current provision of essential services meets the needs of the population. Accessibility of essential services was determined by whether the Wokingham population resided within 1-mile of a pharmacy, or within 20-minutes' drive to a pharmacy.

8.8 Other factors taken into consideration included:

- The ratio of community pharmacies per 10,000 population
- Proximity of pharmacies to areas of high deprivation
- Opening hours of pharmacies
- Proximity of pharmacies to GP practices
- Controlled localities and location of dispensing GPs

8.9 There are 1.2 community pharmacies per 10,000 residents in Wokingham. Though this ratio is lower than the national average of 2.2, as indicated by the contractor survey, the pharmacies have capacity to offer more services.

8.10 As Wokingham is a fairly rural area, approximately half of the borough is within 1 mile of a pharmacy. Areas that are more densely populated in Wokingham are well served in terms of pharmacy accessibility (paragraph 7.14-7.16). There are 22,422 residents who live within rural areas of Wokingham that are not within a mile of a pharmacy. They are in areas served by GP dispensing practices or areas that have low population density. All residents are within a 20-minute commute of a pharmacy if travelling by car. Considering all this, there is adequate provision of pharmacies for Wokingham residents.

Current access to essential services during normal working hours

8.11 All pharmacies are open for at least 40 hours each week. There are 21 community pharmacies in the borough and 22 within a mile of the borough boundaries, providing good access as determined in Chapter 7.

The results of the PNA conclude that there are no current gaps in the provision of essential services during normal working hours in the lifetime of this PNA.

Current access to essential services outside normal working hours

- 8.12** On weekdays, 10 Wokingham pharmacies are open before 9am and seven are open after 7pm. These pharmacies are close to areas of high population density. All residents can reach early opening or late closing pharmacy in 20 minutes if travelling by car.
- 8.13** There is good accessibility of pharmacies to residents on weekend. Twenty of the borough's community pharmacies are open on Saturday. Eight pharmacies in the borough are open on Sunday.
- 8.14** Pharmacies can be reached by all residents in those neighbourhoods within 20 minutes if travelling by car.

The results of the PNA conclude that there are no current gaps in the provision of essential services outside normal working hours in the lifetime of this PNA.

Current access to advanced services

- 8.15** The following advanced services are currently available for provision by community pharmacies: new medicine service, community pharmacy seasonal influenza vaccination, community pharmacist consultation service, hypertension case-finding service, community pharmacy hepatitis C antibody testing service, appliance use reviews and stoma appliance customisation.
- 8.16** NMS is widely available with 19 pharmacies in the borough providing it.
- 8.17** Flu vaccinations are also widely, all 20 pharmacies in the borough provide this service.
- 8.18** All of the boroughs 21 community pharmacies offer the community pharmacy consultation service.
- 8.19** The hypertension case-finding service and the hepatitis C antibody testing service are relatively new services for which no data is available yet, however pharmacies have indicated their willingness to provide this service.
- 8.20** No Wokingham pharmacy reportedly provided AURS in the last recorded year, however pharmacies are able to provide these if there is a need. Advice on the use of appliances may also be offered by the hospital or clinic prescribing appliances.
- 8.21** Stoma appliance customisation service is offered by three pharmacies.

- 8.22** It is therefore concluded that there is sufficient provision of advanced services to meet the needs of the residents of Wokingham.

The results of the PNA conclude that there are no current gaps in the provision of advanced services in the lifetime of this PNA.

Current access to other NHS services

- 8.23** These are services commissioned by Wokingham Borough Council and Berkshire West CCG. These services include:

- Supervised consumption and needle exchange services
- Emergency hormonal contraception
- Access to palliative care
- Provision of antiviral medication

- 8.24** Five pharmacies provide the supervised consumption, and four provide needle exchange services, four provide emergency hormonal contraception, three provide access to palliative care and one pharmacy provides provision of antiviral medication.

- 8.25** Overall, there is sufficient provision of the Other NHS pharmacy services in the borough to meet identified need.

The results of the PNA conclude that there are no current gaps in the provision of Other NHS pharmacy services in the lifetime of this PNA.

Future provision

- 8.26** This PNA has considered the following future developments:

- Forecasted population growth
- Housing Development information
- Regeneration projects
- Changes in the provision of health and social care services
- Other changes to the demand for services

Future access to essential services

Future access to essential services during normal working hours

- 8.27 There are no firm plans for changes in the provision of Health and Social Care services in Wokingham within the lifetime of this PNA.
- 8.28 This PNA has considered the proposed new housing developments within Wokingham (Paragraph 4.27, 4.28 and 7.20). The largest of these are Arborfield Garrison, West of Shinfield and Matthewsgreen Farm in North Wokingham. These are all within areas of good access to pharmacy provision. The analysis has considered these developments, and other causes of population increases, and concluded that pharmacy provision is well placed within Wokingham during the within the lifetime of this PNA.

The results of the PNA conclude that there are no gaps in the future provision of essential services during normal working hours in the lifetime of this PNA. However, given the number of major housing developments underway in Wokingham, there is a potential for demand for some of the services to outstrip supply in the future. This prospect is potentially mitigated by availability of such services being provided by distance prescribing pharmacies.

Future access to essential services outside normal working hours

- 8.29 There are no proposed changes to the supplementary opening hours for pharmacies.

The results of the PNA conclude that there are no gaps in the future provision of essential services outside of normal working hours in the lifetime of this PNA. However, given the number of major housing developments underway in Wokingham, there is a potential for demand for some of the services to outstrip supply in the future. This prospect is potentially mitigated by availability of such services being provided by distance prescribing pharmacies.

Future access to advanced services

- 8.30 Through the contractor survey local pharmacies have indicated that they have capacity for future increases in demand for advanced services.

The results of the PNA conclude that there are no gaps in the future provision of advanced services in the lifetime of this PNA. However, given the number of major housing

developments underway in Wokingham, there is a potential for demand for some of the services to outstrip supply in the future. This prospect is potentially mitigated by availability of such services being provided by other agencies.

Future access to other NHS services

- 8.31 Through the contractor survey local pharmacies have indicated that they have capacity and future increases in demand for other NHS services.

The results of the PNA conclude that there are no gaps in the future provision of other NHS services in the lifetime of this PNA.

Improvements and better access

Current and future access to essential services

- 8.32 The PNA did not identify any services, that if provided either now or in future specified circumstances, would secure improvements or better access to essential services. Further, there is sufficient capacity to meet any increased future demand.

The results of the PNA conclude that there are no gaps in essential services that if provided, either now or in the future, would secure improvements or better access to essential services in the lifetime of this PNA.

Current and future access to advanced services

- 8.33 NMS, CPCS and flu vaccination services are all widely available throughout Wokingham.
- 8.34 Though there is no data available publicly for the relatively new services, namely Hypertension case-finding and hepatitis C antibody testing services, there is sufficient capacity for the pharmacies to provide them.
- 8.35 There is SAC provision within the unitary authority. Additionally, both SAC and AUR advice is offered by hospital and other health providers, and additionally, pharmacies have indicated they are willing, and have capacity to provide these services.

- 8.36** The PNA analysis has concluded that there is sufficient capacity to meet any increased demand of advanced services.

The results of the PNA conclude that there are no gaps in the provision of advanced services at present or in the future, that would secure improvements or better access to advanced services in the lifetime of this PNA.

CONSULTATION DRAFT

Appendix A: Berkshire Pharmaceutical Needs Assessment Steering Group

Terms of reference

Background

The provision of NHS Pharmaceutical Services is a controlled market. Any pharmacist or dispensing appliance contractor who wishes to provide NHS Pharmaceutical services, must apply to be on the Pharmaceutical List.

The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (SI 2013 No. 349) and subsequent amendments set out the system for market entry. Under the Regulations, Health and Wellbeing Boards are responsible for publishing a Pharmaceutical Needs Assessment (PNA); and NHS England is responsible for considering applications.

A PNA is a document which records the assessment of the need for pharmaceutical services within a specific area. As such, it sets out a statement of the pharmaceutical services which are currently provided, together with when and where these are available to a given population. The PNA is used by NHS England to consider applications to open a new pharmacy, move an existing pharmacy or to provide additional services. In addition, it will provide an evidence base for future local commissioning intentions.

The Bracknell Forest, Reading, Slough, Windsor and Maidenhead, West Berkshire and Wokingham Health and Wellbeing Boards have now initiated the process to refresh the PNAs by October 2022.

Role

The primary role of the group is to advise and develop structures and processes to support the preparation of a comprehensive, well researched, well considered and robust PNA, building on expertise from across the local healthcare community; and managed by Healthy Dialogues Ltd. In addition, the group is responsible for:

- Responding to formal PNA consultations from neighbouring HWBs on behalf of the Health and Wellbeing boards.

- Establishing arrangements to ensure the appropriate maintenance of the PNA, following publication, in accordance with the Regulations.

Objectives

- Ensure the new PNA meets the requirements of the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 and its amendments.
- Develop the PNA so that it documents all locally commissioned services, including public health services commissioned; and services commissioned by the CCG/ICS and other NHS organisations as applicable; and provides the evidence base for future local commissioning.
- Agree a project plan and ensure representation of the full range of stakeholders.
- Ensure a stakeholder and communications plan is developed to inform pre-consultation engagement and to ensure that the formal consultation meets the requirements of the Regulations.
- Ensure that the PNA, although it is a separate document, integrates, and aligns with, with both the joint strategic needs assessment and the health and wellbeing strategies of each of the boroughs as well as other key regional and national strategies.
- Ensure that the requirements for the development and content of PNAs are followed, and that the appropriate assessments are undertaken, in accordance with the Regulations. This includes documenting current and future needs for, or improvements and better access to, pharmaceutical services as will be required by the local populations.
- Approve the framework for the PNA document, including determining the maps which will be included
- Ensure that the PNA contains sufficient information to inform commissioning of enhanced services, by NHS England, and commissioning of locally commissioned services by the CCG and other local health and social care organisations.
- Ensure a robust, and timely consultation is undertaken in accordance with the Regulations, including formally considering and acting upon consultation responses and overseeing the development of the consultation report for inclusion in the final PNA.
- Consider and document the processes by which the HWB will discharge its responsibilities for maintaining the PNA.
- Comment, on behalf of the Bracknell Forest, Reading, Slough, Windsor and Maidenhead, West Berkshire and Wokingham Health and Wellbeing boards, on formal PNA consultations undertaken by neighbouring HWBs

- Advise the HWB, if required, when consulted by NHS England in relation to consolidated applications.
- Document and manage potential and actual conflicts of interest.

Accountability and reporting

The Bracknell Forest, Reading, Slough, Windsor and Maidenhead, West Berkshire and Wokingham Health and Wellbeing boards have delegated responsibility for the development and maintenance of the PNA; and for formally responding to consultations from neighbouring HWBs to the PNA Steering Group

The PNA steering group will be accountable to the Bracknell Forest, Reading, Slough, Windsor and Maidenhead, West Berkshire and Wokingham and Wellbeing boards and will report on progress on a two-monthly frequency or as required by the Health and Wellbeing Board.

The pre-consultation draft and the final draft PNAs will be presented to the Health and Wellbeing Board for approval.

Membership

Chair: Rebecca Willans, Public Health Berkshire, Bracknell Forest Council

Name	Organisation
Becky Campbell	Public Health Berkshire
David Dean	Local Pharmaceutical Committee Pharmacy Thames Valley
Sanjay Desai	Buckinghamshire, Oxfordshire, and Berkshire West (BOB), Integrated Care System
Dawn Best	Frimley Health and Care
Marian Basra	NHS England Pharmacy Team
Tessa Lush	Communications, Bracknell Forest (representing all Berkshire local authorities)
Helen Delaitre	Berkshire, Buckinghamshire and Oxfordshire LMCs
Representative	Healthwatch Bracknell Forest
Representative	Healthwatch Slough
Joanna Dixon	Healthwatch Wokingham
Andrew Sharp	Healthwatch West Berkshire
Mandeep Kaur Sira	Healthwatch Reading
Representative	Healthwatch Windsor and Maidenhead
Roger Kemp	Patient Representative

An agreed deputy may be used where the named member of the group is unable to attend.

Other staff members / stakeholders may be invited to attend meetings for the purpose of providing advice and/or clarification to the group.

Quorum

A meeting of the group shall be regarded as quorate where there is one representative from each of the following organisations / professions:

- Chair (or nominated deputy)
- Representative from Public Health for Berkshire
- Representative from Healthwatch
- LPC
- Healthy Dialogues

Declaration of Interests

It is important that potential, and actual, conflicts of interest are managed:

Declaration of interests will be a standing item on each PNA Steering Group agenda.

A register of interests will be maintained and will be kept under review by the HWB.

Where a member has a potential or actual conflict of interest for any given agenda item, they will be entitled to participate in the discussion but will not be permitted to be involved in final decision making.

Frequency of meetings

The group will meet as required for the lifetime of this project. Meetings will be held virtually on MS teams every six weeks.

Following publication of the final PNA, the Steering Group will be convened on an 'as required' basis to:

- Fulfil its role in timely maintenance of the PNA
- Advise the HWB, when consulted by NHS England, in relation to consolidated applications.

Appendix B – Pharmacy provision within Wokingham and 1 mile of its border

HWB	ODS Code	Pharmacy	Contract Type	Address	Post Code	Early Opening	Late Closing	Open on Saturday	Open on Sunday
Wokingham	FA448	Asda Pharmacy	100 Hours	Chalfont Way, Lower Earley, Reading, Berkshire	RG6 5TT	Yes	Yes	Yes	Yes
	FLD94	Boots the Chemists	Community Pharmacy	89-91 Crockhamwell Road, Woodley, Reading, Berkshire	RG5 3JP	Yes	No	Yes	Yes
	FMQ41	Boots the Chemists	Community Pharmacy	40 Market Place, Wokingham, Berkshire	RG40 1AT	Yes	No	Yes	Yes
	FG634	Day Lewis Pharmacy	Community Pharmacy	Welford House, Basingstoke Road, Spencers Wood, Reading, Berkshire	RG7 1AA	No	No	Yes	No
	FL267	Day Lewis Pharmacy	100 Hours	Finchampstead Surgery, 474-478 Finchampstead Rd, Finchampstead, Berkshire	RG40 3RG	Yes	Yes	Yes	Yes
	FPA84	Day Lewis Pharmacy	Community Pharmacy	1-2 Loddon Vale Centre, Hurricane Way, Woodley, Reading, Berkshire	RG5 4UX	Yes	No	Yes	No
	FTX84	Day Lewis Pharmacy	Community Pharmacy	19 London Road, Twyford, Reading, Berkshire	RG10 9EH	No	No	Yes	No
	FHJ96	Day Lewis Rankin Pharmacy	Community Pharmacy	15 Maiden Lane Centre, Lower Earley, Reading, Berkshire	RG6 3HD	No	No	Yes	No
	FEV57	Fields Pharmacy	Community Pharmacy	1a Longfield Road, Twyford, Reading, Berkshire	RG10 9AN	No	No	Yes	No
	FHT00	Fittleworth Medical Ltd	DAC	Unit 1&2 Twyford Bus Park, Station Road, Twyford, Reading	RG10 9TU	No	No	Yes	
FQ649	Jats Pharmacy	Community Pharmacy	422a Finchampstead Road, Finchampstead, Wokingham, Berkshire	RG40 3RB	No	No	Yes	No	

HWB	ODS Code	Pharmacy	Contract Type	Address	Post Code	Early Opening	Late Closing	Open on Saturday	Open on Sunday
	FFR18	LloydsPharmacy	Community Pharmacy	48 Victoria Road, Wargrave, Reading, Berkshire	RG10 8AE	No	No	Yes	No
	FE713	Lloyds pharmacy (in Sainsbury)	Community Pharmacy	J Sainsbury Store, King Street Lane, Winnersh, Wokingham, Berkshire	RG41 5AR	Yes	Yes	Yes	Yes
	FGV18	Morrisons Pharmacy	Community Pharmacy	Woosehill Court, Workingham, Berkshire	RG41 3SW	Yes	Yes	Yes	Yes
	FKE74	Newdays Pharmacy	Community Pharmacy	1 London Road, Twyford, Reading, Berkshire	RG10 9EH	No	No	Yes	No
	FNC80	Rose Street Pharmacy	100 Hours	Wokingham Medical Centre, 23 Rose Street, Wokingham, Berkshire	RG40 1XS	Yes	Yes	Yes	Yes
	FA593	Shinfield Pharmacy	Community Pharmacy	Shinfield Prim. Care Ctr, School Green, Shinfield, Berkshire	RG2 9EH	No	No	No	No
	FF045	Tesco Pharmacy	100 Hours	78 Finchampstead Road, Wokingham, Berkshire	RG40 2NS	Yes	Yes	Yes	Yes
	FRP45	Vantage Chemist	Community Pharmacy	231 Shinfield Road, Reading, Berkshire	RG2 8HD	No	No	Yes	No
	FT446	Wokingham Pharmacy	Community Pharmacy	33 Broad Street, Wokingham, Berkshire	RG40 1AU	No	No	Yes	No
	FNE16	Your Local Boots Pharmacy	Community Pharmacy	5 The Parade, Silverdale Road, Earley, Reading, Berkshire	RG6 7NZ	No	No	Yes	No
	FY485	Your Local Boots Pharmacy	Community Pharmacy	Unit 2, Asda Mall, Lower Earley District Ctr, Lower Earley, Reading, Berkshire	RG6 5GA	Yes	Yes	Yes	No
Hart	FMP54	Lloyds Pharmacy	Community Pharmacy	111 Reading Road, Yateley, Hampshire	GU46 7LR	No	No	Yes	
	FMR86	Your Local Boots Pharmacy	Community Pharmacy	1 Harpton Parade, Yateley, Hampshire	GU46 7SB	No	No	Yes	
	FP147	Your Local Boots Pharmacy	Community Pharmacy	Unit 1 Tresham Crescent, Monteagle Lane, Yateley	GU46 6FR	No	No	Yes	Yes
South Oxfordshire	FHD46	Boots The Chemist	Community Pharmacy	5/7 Bell Street, Henley On Thames, Oxfordshire	RG9 2BA	No	No	Yes	Yes

HWB	ODS Code	Pharmacy	Contract Type	Address	Post Code	Early Opening	Late Closing	Open on Saturday	Open on Sunday
	FTP76	Henley Pharmacy	Community Pharmacy	25 Bell Street, Henley-On-Thames, Oxfordshire	RG9 2BA	Yes	No	Yes	
	FC447	In-Store Pharmacy	Community Pharmacy	Tesco Store, 359 Reading Road, Henley-On-Thames	RG9 4HA	No	Yes	Yes	Yes
Bracknell Forest	FWC78	Dukes Pharmacy	Community Pharmacy	196 Dukes Ride, Crowthorne, Berkshire	RG45 6DS	No	No	Yes	No
	FGC28	Evercaring Pharmacy	DSP	Unit 4, Acorn House, Longshot Lane, Bracknell, Berkshire	RG12 1RL	No	No	No	No
	FKY97	H A Mcparland Ltd	Community Pharmacy	182 High Street, Crowthorne, Berkshire	RG45 7AP	No	No	Yes	No
	FMA31	LloydsPharmacy	Community Pharmacy	Terrace Road North, Binfield, Berkshire	RG42 5JG	No	No	Yes	No
	FV988	LloydsPharmacy	Community Pharmacy	Manhattan House, 140 High Street, Crowthorne, Berkshire	RG45 7AY	No	No	Yes	No
Reading	FGD71	Basingstoke Road Pharmacy	Community Pharmacy	71 Basingstoke Road, Reading, Berkshire	RG2 0ER	No	No	Yes	No
	FE816	Boots the Chemists	Community Pharmacy	Unit 7, Brunel Arcade, Reading Mainline Station, Reading, Berkshire	RG1 1LT	Yes	Yes	Yes	Yes
	FFY65	Boots the Chemists	Community Pharmacy	25 Town Mall Walk, The Oracle, Reading, Berkshire	RG1 2AH	No	Yes	Yes	Yes
	FW067	Christchurch Road Pharmacy	Community Pharmacy	68 Christchurch Road, Reading, Berkshire	RG2 7AZ	No	No	Yes	No
	FA288	Erleigh Road Pharmacy	Community Pharmacy	85-87 Erleigh Road, Reading, Berkshire	RG1 5NN	No	No	Yes	No
	FMV40	Fittleworth Medical Limited	DAC	3 Woodside Business Park, Whitley Wood Lane, Reading	RG2 8LW	No	No	No	
	FDP58	Fourways Pharmacy	Community Pharmacy	195 London Road, Reading, Berkshire	RG1 3NX	No	No	No	No
	FEK05	LloydsPharmacy	Community Pharmacy	Milman Road Health Centre, Ground Floor Milman Road, Reading, Berkshire	RG2 0AR	Yes	No	No	No

HWB	ODS Code	Pharmacy	Contract Type	Address	Post Code	Early Opening	Late Closing	Open on Saturday	Open on Sunday
	FA597	Markand Pharmacy	Community Pharmacy	122 Henley Road, Caversham, Reading, Berkshire	RG4 6DH	No	No	Yes	No
	FEX81	Orange Pharmacy	DSP	271-273 London Road, Reading, Berkshire	RG1 3NY	No	No	No	No
	FPG88	Tesco Pharmacy	100 Hours	Tesco Extra, Napier Road, Reading, Berkshire	RG1 8DF	Yes	Yes	Yes	Yes
	FAE42	The Reading Pharmacy	Community Pharmacy	105 Wokingham Road, Reading, Berkshire	RG6 1LN	No	No	Yes	No
	FE270	Whitley 277 Pharmacy	Community Pharmacy	277 Basingstoke Road, Reading, Berkshire	RG2 0JA	No	No	Yes	No
	FLG15	Whitley Wood Pharmacy	Community Pharmacy	534 Northumberland Avenue, Reading, Berkshire	RG2 8NY	No	No	Yes	No