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| Picture of pharmacy.  [Easy Read Logo](https://www.photosymbols.com/collections/information/products/easy-read-logo?_pos=1&_sid=c1a4019d3&_ss=r) | **Have your say on local pharmacy services (chemists) and dispensing doctors in Cambridgeshire and Peterborough**  **June 2022**  **Consultation survey – Easy Read version** |
| [Market research](https://www.photosymbols.com/collections/research/products/market-research)  Picture of pharmacy. | The Cambridgeshire and Peterborough Health and Wellbeing Board wants to know your views about pharmacy services in Cambridgeshire and Peterborough.  A **Health and Wellbeing Board** is a group where leaders from the health and care system work together to improve the health and wellbeing of their local population.  We want to know how easy it is for you to use pharmacy services and get the medicines and medical equipment (such as incontinence and stoma devices) you need from pharmacies. |
| Large crowd of people. | Also, we are looking at whether we have enough pharmacy services for the population of Cambridgeshire and Peterborough. |
| Picture of pharmacy.  Picture of GP surgery. | **Pharmacy** **services** mean things like prescriptions, selling medicines that don’t need to be prescribed by a doctor, giving advice about medicines, supporting people to quit smoking, providing medical equipment, etc.  A **dispensing doctor** means a GP practice that also gives out medicines (also known as a GP dispensary). |
| Picture of a report.  NHS England logo. | We have written a draft report called a Pharmaceutical Needs Assessment.  A **Pharmaceutical Needs Assessment** is a report which looks at the current needs for pharmacy services in an area.  Our report is based on information about local health needs and existing services and the results of a survey with local pharmacies and GP dispensaries.  This report will be used by NHS England when making decisions on whether to open new pharmacies and commission services from new and existing pharmacies. |
| Picture of a survey. | You can take part in the consultation by completing a survey. |
| 6 June. 5 August. | The consultation runs from 6 June to 5 August 2022. |
| Picture of calendar showing September. | We will use the consultation feedback to write a report for the Health and Wellbeing Board meeting in September 2022. |
| Email Address | You can e-mail your completed survey to:  [pna@cambridgeshire.gov.uk](mailto:pna@cambridgeshire.gov.uk) |
| Picture of two people talking on the telephone. | If you need help to complete the survey and there is no one that can help you, please call:  01223 703259  Monday – Friday between 9am – 5pm  and leave your contact details.  We will then contact you within seven working days and will help you with the survey. |

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| Picture of a survey.  Data Protection Act picture. | **Data Protection Statement**   * This survey is about local pharmacy services (chemists) and GP dispensaries in Cambridgeshire and Peterborough. * You do not have to give us any personal information. * We will keep your information confidential and safe in line with the Data Protection Act 2018. |
| Thank You 1 | Thank you for taking part in this survey. |

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| Picture of a report. | **Information about key findings from the draft Cambridgeshire and Peterborough Pharmaceutical Needs Assessment for 2022**  What does it say? |
| Picture of a pharmacy.  Picture of a map showing the East of England. | **Local pharmacy services**  It says:   * Currently there are enough pharmacy services across Cambridgeshire and Peterborough.   This is because there are 148 pharmacies and 40 GP dispensaries across Cambridgeshire and Peterborough.  This is like the East of England average number of pharmacies and GP dispensaries for the size of population in the area. |
| Picture of pharmacy opening times.  Picture of open sign. | * However, there has been a reduction in the opening hours of many pharmacies.   Despite this, there appears to be enough pharmacies open for most days of the week.  Some pharmacies have long opening hours, and 16 pharmacies are open for 100 hours a week. |

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| People looking at data. | What is recommended:   * The draft report recommends that no new pharmacy services are needed for Cambridgeshire and Peterborough. * The Health and Wellbeing Board will continue to monitor increases in the population and will then decide if more pharmacies are needed. |
| Picture showing that something is important. | **The role of pharmacy services in improving the health of the local population**  It says:   * Pharmacy services have an important role to play in improving the health of local people. |
| Picture of two people agreeing an NHS contract. | What is recommended:   * That local services continue to be commissioned in pharmacies to promote health and wellbeing. |

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| Picture of woman pointing to where people can find information. | **1) How did you find out about this survey?**  Please tick (✓) one box.   |  |  | | --- | --- | | Pharmacy |  | | GP surgery |  | | Cambridgeshire County Council website |  | | Peterborough City Council website |  | | Library |  | | Child and Family Centre |  | | Other (please give details in the box below) |  | |  | | |
| Picture showing images of people and a question mark. | **2) Who are you?**  Please tick (✓) one box.   |  |  | | --- | --- | | A member of the public |  | | A person replying on behalf of somebody who uses pharmacy services |  | | A health or social care staff member |  | | A pharmacist or medical equipment provider |  | | A person replying on behalf of an organisation |  |   **If you are a member of the public or a person replying on behalf of somebody who uses pharmacy services, then please complete all the questions.**  **If you are a health and social care staff member, a pharmacist or medical equipment provider, or replying on behalf of an organisation, then please complete questions 12-18 only.** |
| Picture showing lots of months of the year. | **3) How often do you use a pharmacy or a GP dispensary in Cambridgeshire and Peterborough, or use an online pharmacy?**  Please tick (✓) any boxes that apply to you.   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  | Never | Less than 3 times a year | 3 – 12 times a year | More than 12 times a year | | Pharmacy |  |  |  |  | | GP dispensary |  |  |  |  | | Online pharmacy |  |  |  |  | |

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| Picture of man asking a question.  Picture of a pharmacy.Picture of a pharmacist giving advice to somebody. | **4) How often do you do each of the following?**  Please tick (✓) any boxes that apply to you.   |  |  |  |  |  | | --- | --- | --- | --- | --- | |  | Never | Less than 3 times a year | 3 – 12 times a year | More than 12 times a year | | Collect prescribed medicines or equipment |  |  |  |  | | Buy non-prescription medicines |  |  |  |  | | Give back old or unwanted medicines |  |  |  |  | | Ask a pharmacist for advice |  |  |  |  | | Use a medical equipment provider |  |  |  |  | | If you would like to add any other comments about the service, please write them in the box below. | | | | | |
| Picture of a group of different types of people. | **5) Who would you normally visit the pharmacy for?**  Please tick (✓) any boxes that apply to you.   |  |  | | --- | --- | | Yourself |  | | A family member |  | | Neighbour / friend |  | | Someone you are a carer for |  | | All of the above |  | | Other (please give details in the box below) |  | |  | | |
| Picture of different types of transport. | **6) If you usually travel to a pharmacy, how would you normally travel?**  Please tick (✓) one box.   |  |  | | --- | --- | | Car |  | | Taxi |  | | Public transport |  | | Walk |  | | Bicycle |  | | Other (please give details in the box below) |  | |  | | |
| Picture of a diary page showing different days of the week. | **7) Considering your current use of pharmacies, what is the most convenient day for you to visit?**  Please tick (✓) one box.   |  |  | | --- | --- | | Monday to Friday |  | | Saturday |  | | Sunday |  | | Varies |  | | No preference |  | |
| Picture of a diary page showing different days of the week. | **8) If your pharmacy was open more often, what would be the most convenient day for you to visit?**  Please tick (✓) one box.   |  |  | | --- | --- | | Monday to Friday |  | | Saturday |  | | Sunday |  | | Varies |  | | No preference |  | |
| Picture of a clock with a question mark. | **9) Considering your current use of pharmacies, when do you prefer to visit?**  Please tick (✓) one box.   |  |  | | --- | --- | | Morning (8am – 12pm) |  | | Lunchtime (12 – 2pm) |  | | Afternoon (2 – 6pm) |  | | Early evening (6 – 8pm) |  | | Late evening (after 8pm) |  | | Varies |  | | No preference |  | |
| Picture of a clock with a question mark. | **10) If your pharmacy was open more often, when would you prefer to visit?**  Please tick (✓) one box.   |  |  | | --- | --- | | Morning (8am – 12pm) |  | | Lunchtime (12 – 2pm) |  | | Afternoon (2 – 6pm) |  | | Early evening (6 – 8pm) |  | | Late evening (after 8pm) |  | | Varies |  | | No preference |  | |
| Picture of different languages.  Picture of a man with a guide dog. | **11) Do you have any problems in using your local pharmacy or GP dispensary? For example, language barriers, sight issues, hearing issues.**   |  |  | | --- | --- | | Yes |  | | No |  | | If yes, please let us know what in the box below: | | |
| Picture of a local area. | **12) Do you think that pharmacy services are available at convenient locations?**   |  |  | | --- | --- | | Yes |  | | No |  | |
| Picture of pharmacy opening times. | **13) Do you think that pharmacy services are available at convenient opening hours?**   |  |  | | --- | --- | | Yes |  | | No |  | | If no, please let us know why in the box below. | | |
| Picture of a man explaining something to another man. | **14) Do you feel that the purpose of the Pharmaceutical Needs Assessment has been explained enough in the draft report?**   |  |  | | --- | --- | | Yes |  | | No |  | | If no, please let us know why in the box below: | | |
| Picture of a woman deciding 'yes' or 'no'. | **15) Do you agree with our conclusion that we have enough pharmacies and GP dispensaries across Cambridgeshire and Peterborough, and we do not currently need any more?**   |  |  | | --- | --- | | Yes |  | | No |  | | If no, please let us know why in the box below: | | |
| Picture of a woman deciding 'yes' or 'no'. | **16) Do you agree with the key findings about pharmacy services in Cambridgeshire and Peterborough?**   |  |  | | --- | --- | | Yes |  | | No |  | | If no, please let us know why in the box below: | | |
| Picture of a man thinking about what he wants. | **17) Are there any services you would like pharmacies to provide that are not described in the draft report?**   |  |  | | --- | --- | | Yes |  | | No |  | | If yes, please let us know why in the box below: | | |

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| [https://cdn.shopify.com/s/files/1/0606/1553/products/Speak_compact.png?v=1417847450](https://www.photosymbols.com/collections/choices/products/speak) | **18) Do you have any other comments?**   |  |  | | --- | --- | | Yes |  | | No |  | | If yes, please let us know why in the box below: | | |

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| Me woman3 | **Information about you**  Please can you tell us more about yourself. You do not have to answer these questions, but it will help us to understand how replies may be different across different groups of people or in different areas of Cambridgeshire and Peterborough. |
| Picture of male and female sign.  Gender Transgender | **19) How would you describe your gender?**  Please tick (✓) one box.   |  |  | | --- | --- | | Male |  | | Female |  | | Other |  | | Prefer not to say |  | |
| Age | **20) How old are you?**  Please tick (✓) one box.   |  |  | | --- | --- | | Under 15 years |  | | 15-24 years |  | | 25-34 years |  | | 35-44 years |  | | 45-54 years |  | | 55-64 years |  | | 65-74 years |  | | 75 or over |  | |
| Picture of a woman working on a laptop.  Picture of a retired man sitting in a chair. | **21) What is your employment status?**  Please tick (✓) any boxes that apply to you.   |  |  | | --- | --- | | In education (full or part time) |  | | In employment (full or part time) |  | | Self-employed (full or part time) |  | | Unemployed |  | | Retired |  | | Stay at home parent/carer or similar |  | | Other, please say in the box below |  | |  | | |
| Picture of an envelope showing a postcode. | **22) What is your postcode?**  This will be used to look at common concerns by location, not to identify you personally. |
| Research people. | **23) How would you describe your ethnic background?**  Please tick (✓) one box.   |  |  | | --- | --- | | **White** | | | British |  | | Irish |  | | Gypsy and Traveller |  | | Eastern European |  | | Other |  | |  |  | | **Mixed** | | | White and Black African |  | | White and Black Caribbean |  | | White and Asian |  | | Other |  | |  |  | | **Black or Black British** | | | African |  | | Caribbean |  | | Other |  | |  |  | | **Asian or Asian British** | | | Indian |  | | Pakistani |  | | Bangladeshi |  | | Chinese |  | | Other |  | |  |  | | **Other Ethnic Group** |  | |  |  | | **Prefer not to say** |  | |