

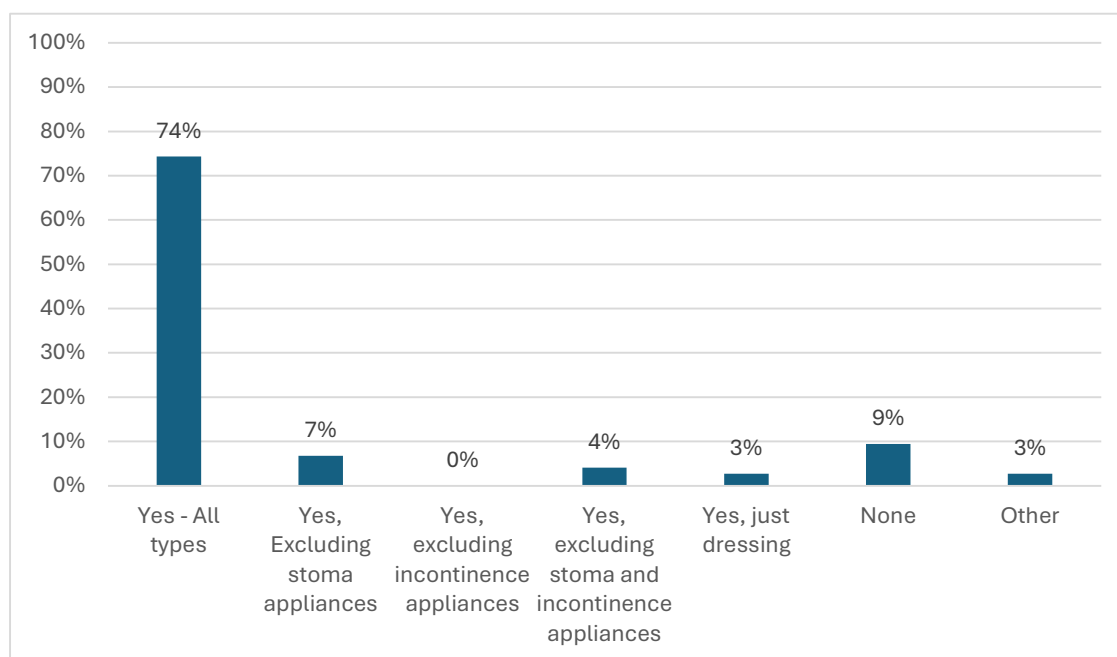
Question 1: Contractor ODS code

74 responses in total, of which, 59 responses from community pharmacies and 15 from dispensing practices (39% response rate).

(Note: 59 of 148 (40%) community pharmacies and 15 of 40 (38%) dispensing GP practices in Cambridgeshire and Peterborough responded to the questionnaire.)

Commissioned services

Question 2: Do you dispense appliances?



Response	Number	Percentage
Yes - All types	54	73%
Yes, Excluding stoma appliances	5	7%
Yes, excluding incontinence appliances	-	-
Yes, excluding stoma and incontinence appliances	3	4%
Yes, just dressing	2	3%
None	7	9%
Other	2	4%
Total	74	100%

73% of contractors said that they are dispensing all types of appliances, whereas 9% responded they don't dispense any of the appliances.

Question 3: If you have not signed up to deliver locally commissioned services (e.g. smoking cessation, EHC, needle/syringe provision, supervised consumption) what are the barriers to signing up?

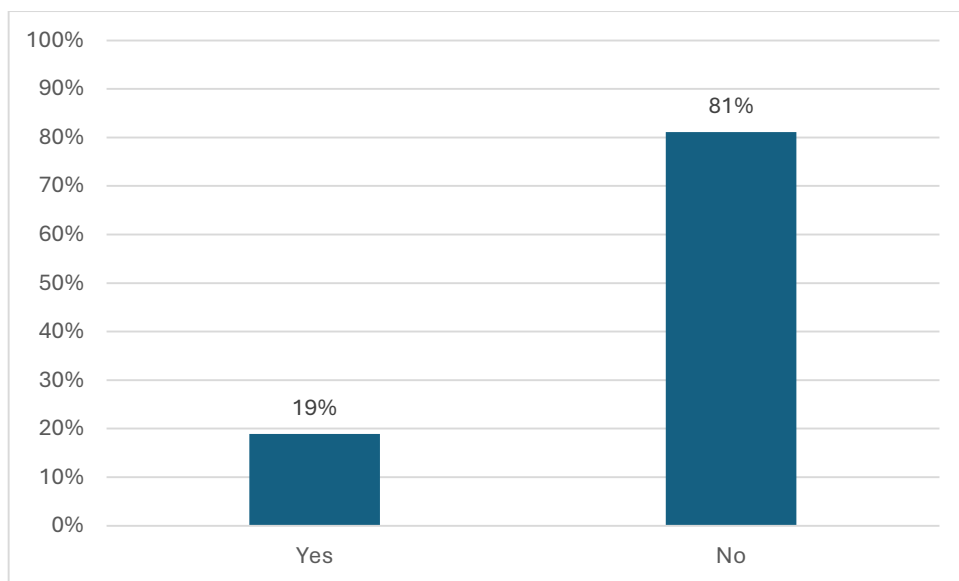
Response	Number
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Already signed/intending to	5
Limited space	5
No barriers	2
Dispensing practice	3
Offering all/some services	3
Remuneration/funding	5
Not offered	1
Time and staff availability/ capacity	11
Resource challenge	1
staff training	3
EHC mechanism for payment not setup	1
Poor uptake previously	1
Too competitive with GP surgeries	2
Not branch decision	1
Total	44

Note: 37 responses for this question and some include multiple answers, so the total count is higher than the number of responses received

- 37 responses included additional (free-text) details on the barriers in signing up to deliver locally commissioned services.
- Lack of time and staff availability/capacity was the key issue identified with 11 responses.
- 5 contractors mentioned that they don't have enough space to provide some of the services like needle/syringe exchange.
- Remuneration/funding (5 responses) and capacity to train staff (3 responses) were also a barrier to deliver commissioned services.

Question 4: Is there any support you would like to be able to deliver locally commissioned services?



Response	Number	Percentage
Yes	14	19%
No	60	81%
Total	74	100%

81% of the contractors said they don't require any support to deliver locally commissioned services, although 19% said they need support.

Question 5: Please specify

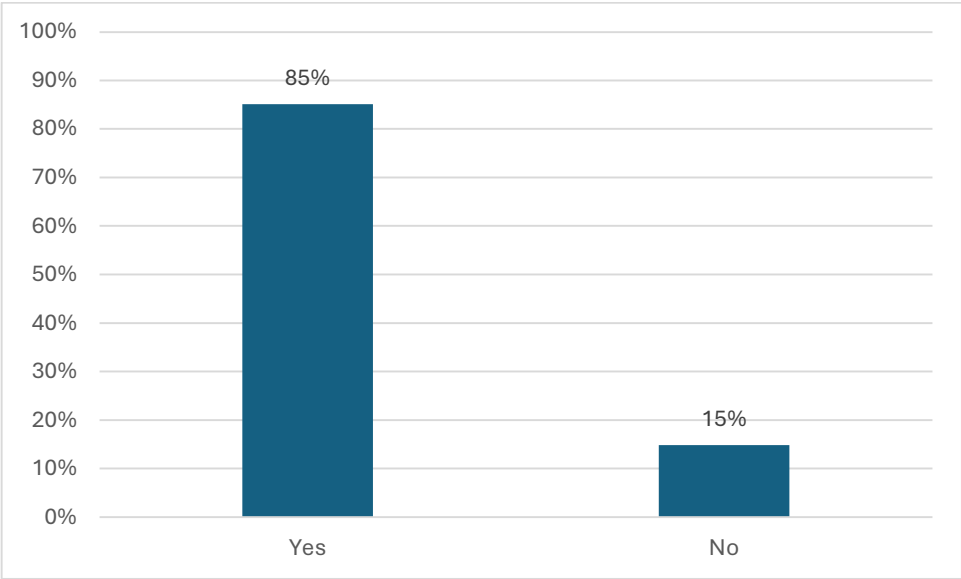
Response	Number
Training session	4
Staff requirement	5
Better communication on change in service specifications	1
Regular initial visits to set up new services	1
EHC mechanism for payment not set up	1
Funding/ reimbursement to enable pharmacies to offer more services	2
No knowledge on available support	1
Total	15

Note: 14 responses for this question and some include multiple answers, so the total count is higher than the number of responses received

- 14 responses included additional (free-text) details on the support they would need to deliver locally commissioned services.
- 5 of the contractors said they would need more staff to offer locally commissioned services and 4 responses mentioned that they need support with training staff.
- There was also mention of funding and reimbursement, "increased funding in general to enable pharmacies to hire more staff and train them in order to cope with everything".

Non-commissioned services:

Question 6: Delivery of dispensed medicines



Response	Number	Percentage
Yes	63	85%
No	11	15%
Total	74	100%

85% of contractors said they deliver dispensed medicine while 15% said they don't deliver dispensed medicines.

Note: Questions 7,8,9 and 10 were only completed by contractors who answered 'Yes' to Question 6

Question 7: Delivery of dispensed medicines – Selected patient groups (list criteria)

Response	Number
All patient groups	13
Care homes	4
Elderly patients	16
Disabled patients	5
Vulnerable patients	7
Housebound patients	10
Anyone who requests	3
Anyone who pays	5
NHS exempt patients	6
Palliative care	2
Dosette patients	2
DD/PCS patients	1
864 patients	1
Total	75

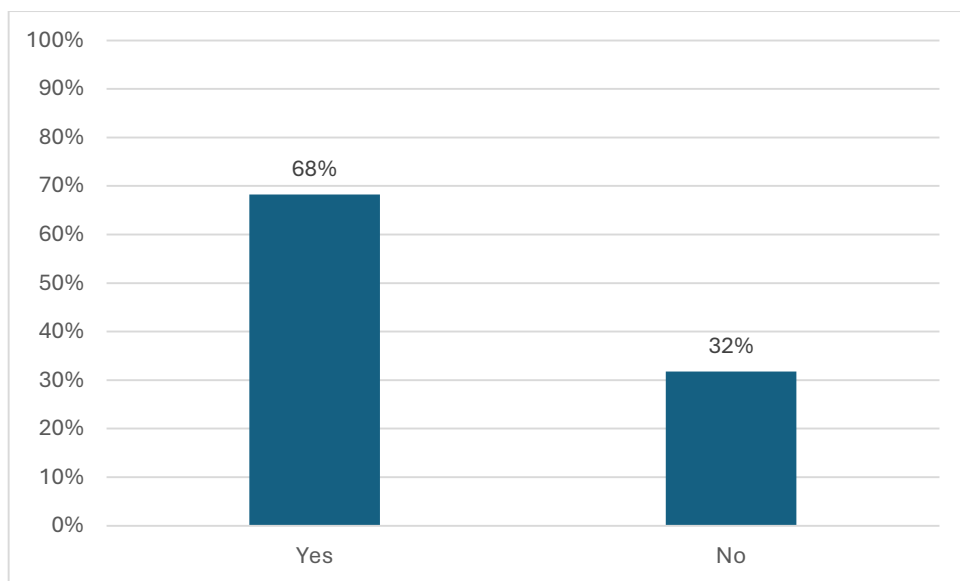
Note: 59 responses for this question and some include multiple groups, so the total count is higher than the number of responses received

- Of the contractors who offer a delivery service (63 contractors); 59 responses included additional (free-text) details on the patient groups to which they deliver dispensed medicines.
- Elderly patients are one of the most mentioned patient groups (16 responses), along with housebound patients (10 responses).
- 13 contractors mentioned that they deliver dispensed medicines for all patient groups.
- Vulnerable patients (7 responses), disabled patients (5 responses), Care home patients (4 responses) and NHS exempt patients (6 responses) have also been mentioned multiple times.

Question 8: Delivery of dispensed medicines – selected areas (list areas)

The responses to this question do not provide any value to the survey and therefore will not be included.

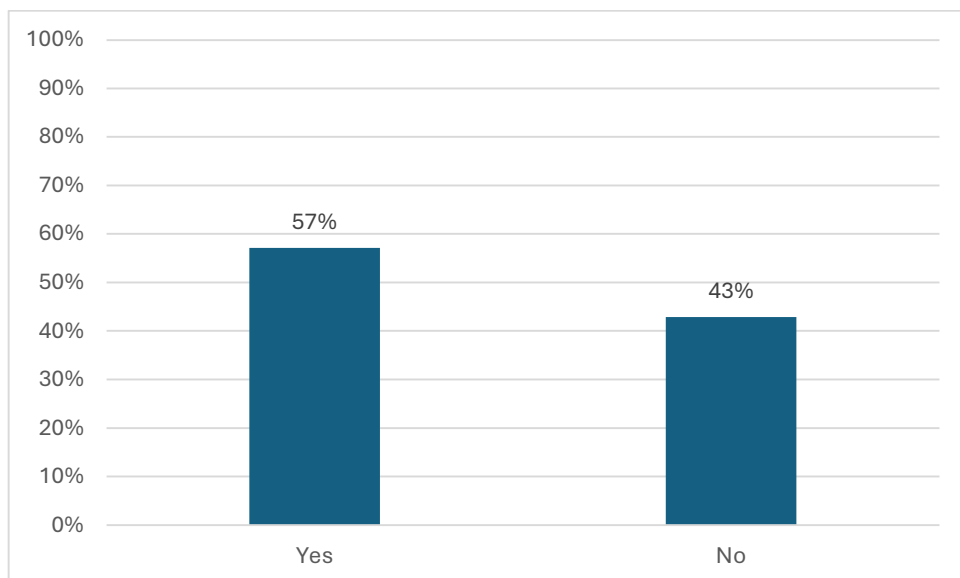
Question 9: Delivery of dispensed medicines – Free of charge on request



Response	Number	Percentage
Yes	43	68%
No	20	32%
Total	63	100%

Of the contractors who offer a delivery service (63 contractors), 68% offer delivery of dispensed medicines for free of charge on request, while 32% of them do not offer a free of charge service.

Question 10: Delivery of dispensed medicines – with charge

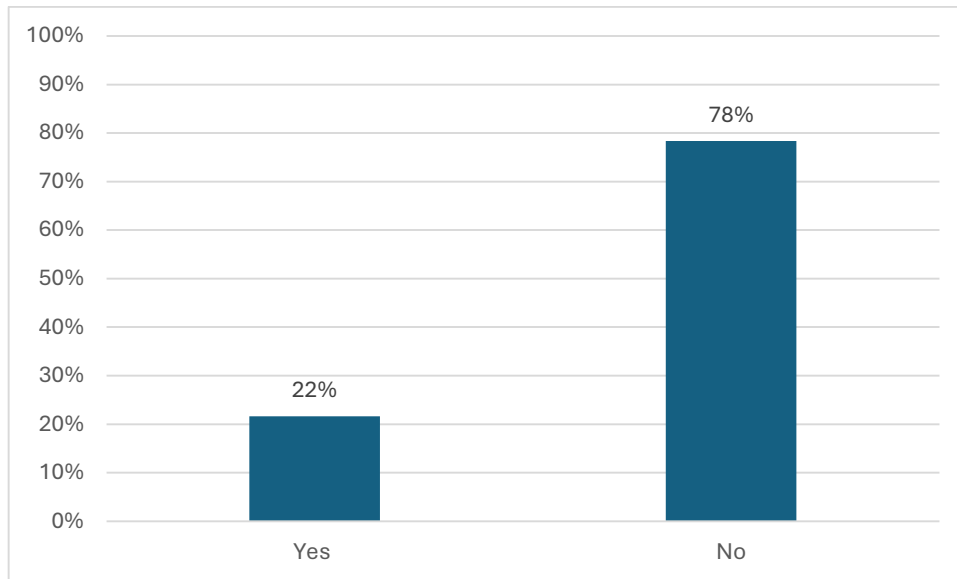


Response	Number	Percentage
Yes	36	57%

No	27	43%
Total	63	100%

Of the contractors who offer a delivery service (63 contractors), 57% said they offer delivery of dispensed medicines - with charge while 43% of them don't deliver for a charge.

Question 11: Are there any services you would like to provide that are not currently commissioned in your area?



Response	Number	Percentage
Yes	16	22%
No	58	78%
Total	74	100%

22% of contractors said that they would like to provide services that are not currently commissioned in their area.

Note: Question 12 was only completed by contractors who answered 'Yes' to Question 11

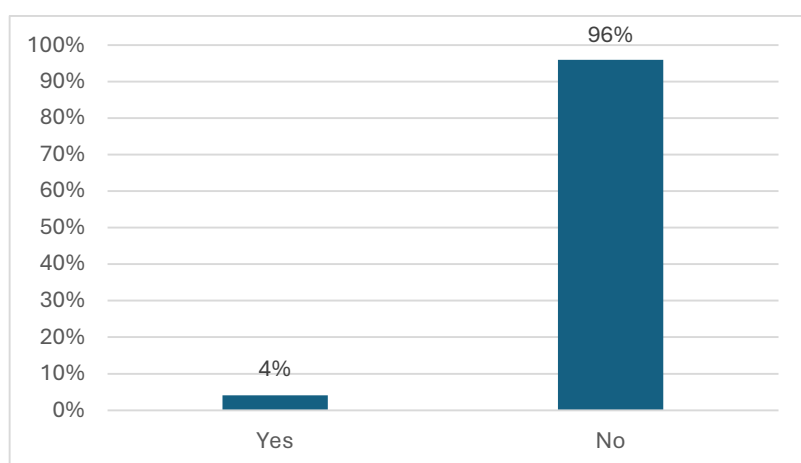
Question 12: Please specify

Response	Number
Any/ All services	3
Health check-up	7
Childhood vaccination	6
NHS travel vaccinations	4
Minor ailments	5
Needle exchange	1
Obesity and weight management	1
Stop Smoking Clinic and Chlamydia Screening	1
UTI antibiotic service.	1
Chloramphenicol & UTI supply via PGD	1
PGD based services and POCT	1
Total	31

Note: 16 responses for this question and some include multiple services, so the total count would be higher than the number of responses received

- 16 responses included additional (free-text) details for the services they would like to provide.
- Health check-up is one of the most mentioned services (7 responses), along with childhood vaccinations (6 responses).
- Minor ailments (5 responses) and NHS travel vaccinations (4 responses) have also been mentioned multiple times.
- 3 responses mentioned they would like to provide any or all services.

Question 13: Is there any other information regarding pharmacy services that you would want to be considered for the PNA?



Response	Number	Percentage
Yes	3	4%
No	71	96%

Total	74	100%
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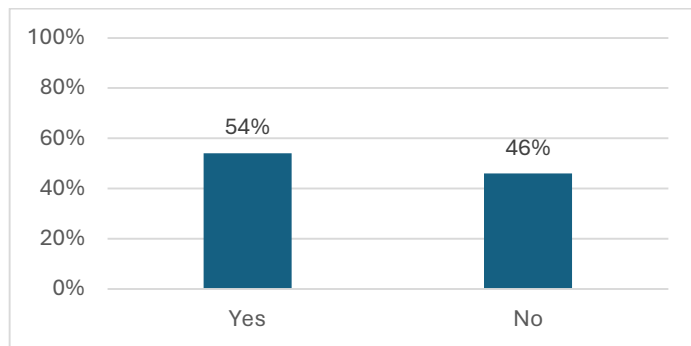
96% of the responded contractors said that they don't have any other pharmacy services to be considered for the PNA

Note: Question 14 was only completed by contractors who answered 'Yes' to Question 13

Question 14: Please specify

One response was to consider targeted delivery services. A second response was that the contractor felt that there is no [dispensing] unmet need for their practice population.

Question 15: Are staffing levels impacting your ability to offer a full range of services?



Response	Number	Percentage
Yes	40	54%
No	34	46%
Total	74	100%

54% of the responded contractors mentioned that staffing levels are impacting their ability to offer full range of services.

Note: Question 16 was only completed by contractors who answered 'Yes' to Question 15

Question 16: Please specify

Response Data	Count
COVID has had a major influence of staff mental health. It has been extremely challenging and efforts not recognised by the Government over the past two years whilst demand has increased. We have lost a lot of experienced staff and pharmacists to the NHS as a result. Support, help and investment is needed to allow pharmacies to continue to support GP practices in the capacity that they are currently.	1
COVID positive and self isolation make us short of staff	1
COVID sickness, staff leaving	1
Pharmacy has been struggling with daily dispensing. Newly recruited staff has no dispensing experience. While training new staff, it is very hard to spare time to do extra services.	1
Due to NHS funding mean companies have made cuts to in-house pharmacy staffing - making it difficult to offer the full solution for every patient that we would like to. With GP practices no longer seeing patients, most are coming directly to their local pharmacy, so we have an increase in patients seeking advice but with a lot less staff to be able to help	1
Pharmacy does not have a store based pharmacist at present who are trained to offer the full range of services	1
High work load means recruitment issues	1
Lack of funding and budget in general is preventing pharmacy from hiring enough staff	1
Lack of staff makes it hard to keep up with normal day to day and then still offer full range of services as time is strained.	1
Pharmacy does not have a store based pharmacist, advertising	1
Pharmacy is unable to offer dosette boxes to new patients due to lack of ability to recruit new staff - essential services must be prioritised.	1
Pharmacy does not have enough staff to deliver a fully comprehensive service	1
In the past few years there have been many occasions when staffing is at the absolute minimum safe level to open the pharmacy - this affects our ability to keep on top of demand, this means it takes longer to serve each patient and more queries which then impacts the time each patient has to wait.	1
RECRUITING TOO MANY COMMUNITY PHARMACY STAFF AND PHARMACISTS	1
RECRUITING TOO MANY PHARMACISTS AND STAFF	1
RECRUITING TOO MANY PHARMACY STAFF AND PHARMACISTS	1
RECRUITING TOO MANY STAFF AND PHARMACISTS	3
Pharmacist availability - not all Locums are trained to provide services	1
Pharmacist hours have been cut, this makes it harder to deliver more services.	1
Pharmacy does not have a pharmacist	1
Pharmacy takes time if you want to carry them out effectively I love doing them but for people if I do a blood pressure check only to finish it and have a queue out the shop door several rxs to check it does make work pressure and safety concerns I'm used I went through the first lock down nothing pressures me now but new pharmacy	1

staffed, hard to find appropriately trained staff	1
ess is a problem	1
times we have locum pharmacist who are not trained to do all services and that is ly barrier. But if we have a regular pharmacist then we can provide all services.	1
re stretched trying to offer all mandatory services.	1
vacancies	1
d staff are leaving and it is impossible to find replacement of the same level and g new recruits takes years	1
e to recruit new staff. We advertise but very little response.	1
ING STAFFING LEVELS CAN IMPACT ON BASIC DISPENSING SERVIES	1
e short of staff due to long term illness	1
e very short of pharmacist in the are so are store has reduced hours which gives me to be able to offer services	1
d vacancies for a long time and have lots of new staff requiring training	1
ve struggled with covid cases within the team	1
s need more staff to train and deliver the services. We got staff doing more than one n top of day to day work.	1
	36

Key points:

ponses included additional (free-text) detail for the issues they have.

vacancies or lack of staffing (18 responses) was a key issue identified, along with the ability to
: staff due to funding issues (2 responses).

acist availability, or lack of store specific fully trained pharmacists, was also highlighted as a
r to service delivery (7 responses)

ng was mentioned in several responses as a barrier to service delivery (9 responses).

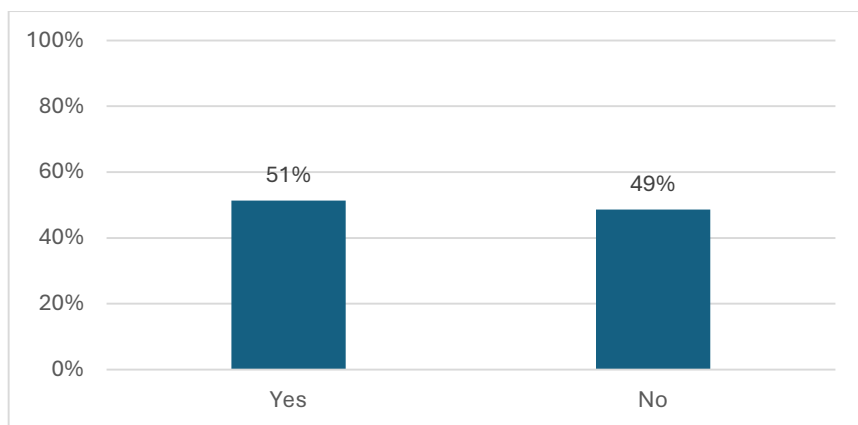
nses discussed the issue of losing trained staff, partly due to additional pressures on services
the covid pandemic, as well as the issue of identifying trained staff for recruitment and
ity to train new staff once in post.

was acknowledgement that covid had presented a challenge for pharmacies, directly and
tly.

ance to PCNs recruiting 'too many' staff for GP dispensing (6 responses).

ance to change in patient use of the pharmacy from one response: 'Cuts to NHS funding mean
anies have made cuts to inn pharmacy staffing - making it more difficult to offer the full solution
ery patient that we would like to. With GP surgeries no longer seeing patients, most are coming
y to their local pharmacy, so have an increase in patients seeking advice but with a lot less
o be able to help them.'

Question 17: Are you experiencing difficulties recruiting and retaining staff?



Response	Number	Percentage
Yes	38	51%
No	36	49%
Total	74	100%

51% of the responded contractors said they are experiencing difficulties in recruiting and retaining staff.

Note: Question 17 was only completed by contractors who answered ‘Yes’ to Question 18

Question 18: Please specify

Response Data	Number
no vacancies no applicants	1
not enough qualified staff to employ	1
As we all know, due to current labour shortages, it is very hard to retain trained staff. We try our best to adjust staff's requirement but it can be difficult when they can offer from another sector with more pay.	1
Complex job under pressure and stress to to demand for what is perceived as low pay in comparison to say other fields where there is not the same level of responsibility and expectation. Lack of government support and recognition is a hindrance to influence or career options.	1
Difficult to recruit area for Pharmacists in general and with the demand for pharmacists in GP surgeries, which is a good thing but makes it even harder to recruit. Support staff are rarely recruited qualified and in house training takes time	1
We are recruiting pharmacist - currently in progress	1
Have advert for dispenser been up 2 months and only 1 dispenser applied who then declined job wasn't for them	1
Lack of local pharmacists and interest in the village setting	1
Not enough qualified dispensers.	1

h applicants	1
applicants when advertising for jobs meaning fewer candidates to select from.	1
e apply, high salary requested	1
od enough pay rates, hard to find qualified people	1
RETAINING BUT RECRUTMENT CAN BE ISSUE	1
hacists to recruit	1
hacy is a challenging business. Patient facing (patients not very nice). Lots of facturing problems causing angry customers.	1
iting and Retaining	1
itment in Cambridge has always been difficult due to cost of living and ing into Cambridge.	1
ing - lack of trained dispensers or are prepared to train to qualify	1
S RECRUITING TOO MANY STAFF AND PHARMACISTS	6
aving to increased work load, and recruitment issues	1
d staff are leaving and it is impossible to find replacement of the same level aining new recruits takes years	1
e to afford retail-like salaries and location of the pharmacy	1
e to recruit suitable staff	1
e facing challenges recruiting and retaining staff due to covid absence	1
e finding it hard to recruit pharmacists	1
e struggling to retain due to patient behaviour	1
e trying to recruit pharmacist	1
	33

Key points:

- 33 responses included additional (free-text) detail for the issues they have.
- Many contractors identified issues with RECRUITMENT (23 responses).
- Contractors highlighted they have current vacancies and/or a lack of applicants apply (7 responses).
- Key recruitment issues include a lack of qualified/trained staff available to employ (7 responses), issues with sector pay offered (4 responses) and location specific issues including the cost of living in Cambridge and rural settings (3 responses).
- 6 responses stated that PCN's recruiting too many staff and pharmacists was an issue for them.
- 7 responses acknowledged issues with RETAINING staff.
- Issues with sector pay (3 responses) was an issue for retaining staff, along with awareness of the challenges pharmacy staff face including increased workload (1 response) and dealing with patient behaviour (1 response).
- The issue of losing trained staff followed by the requirement to input time and resource to train up a new members of staff was also stated as an issue for contractors (2 responses).