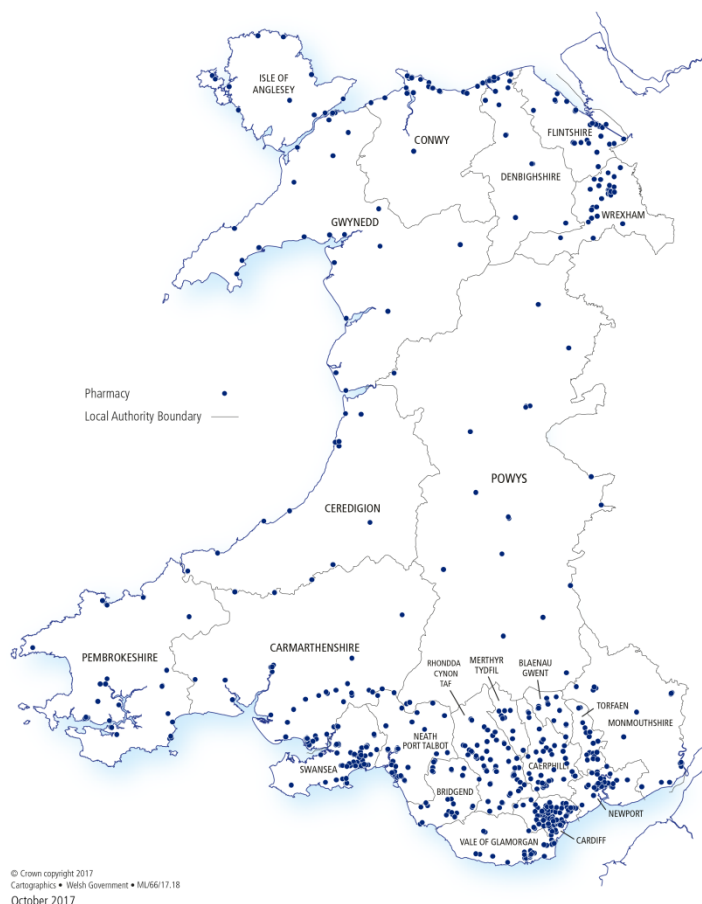




Community pharmacy services in Wales, 2016-17

1 November 2017
SFR 169/2017

Map 1: Community pharmacy locations at 31 March 2017



Source: NHS Wales Shared Services Partnership

- There were 716 community pharmacies in Wales on 31 March 2017, the same as on 31 March 2016.
- During 2016-17, community pharmacies in Wales dispensed 74.7 million prescription items.

Of the 716 community pharmacies:

- **239** (33%) were independent pharmacies (fewer than 6 branches nationwide)
- **678** (95%) provided Medicine Use Reviews (MURs)
- **451** (63%) provided Discharge Medicine Reviews (DMR)
- **427** (60%) provided Seasonal Flu Vaccine (SFV) services, and
- **544** (76%) provided Emergency Contraception (EC) services.

About this release

This annual release presents information about community pharmacies in Wales in contract with Health Boards (LHBs).

The main services which community pharmacies are accredited to provide are described and summarised for 2016-17 and for previous years since the introduction of the current community pharmacy contractual framework in April 2005.

The data is provided by NHS Wales Shared Services Partnership (Pharmacy Services).

Further data can be found on [StatsWales](#), our interactive data dissemination service.

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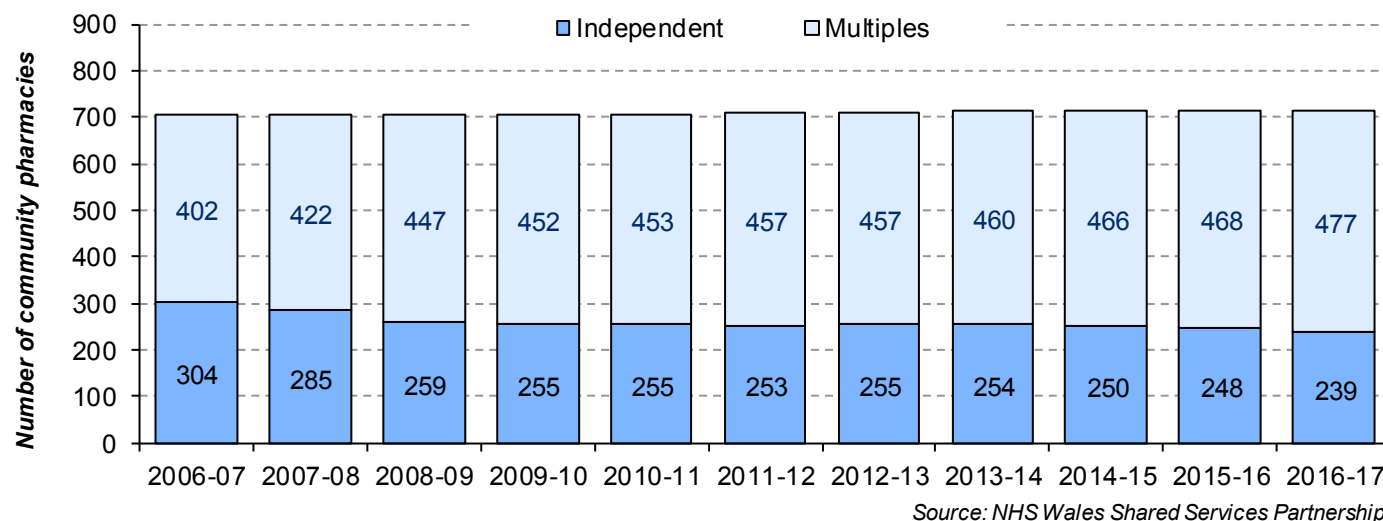
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Overview of community pharmacies

- There has been very little change in the number of community pharmacies in Wales since 2006-07: 716 as at 31 March 2016. There were also 4 appliance contractors.
- However, the proportion of independents and multiples has changed, with 239 independent pharmacies (33%) in 2016-17, down from 304 (43%) in 2006-07.

NOTE: An independent pharmacy is defined as one having fewer than 6 branches nationwide; a multiple pharmacy is defined as having 6 or more branches nationwide.

Chart 1: Number of community pharmacies in Wales



Services

Under the pharmaceutical services contractual framework, services are divided into three categories:

- **Essential** services which must be provided by all community pharmacies.
- **Advanced** services which all community pharmacies can choose to provide dependent on them meeting certain criteria.
- **Enhanced** services which are commissioned locally by Health Boards to reflect the needs of the local population.

Further information is on the [NHS Wales](http://www.nhs.uk) website.

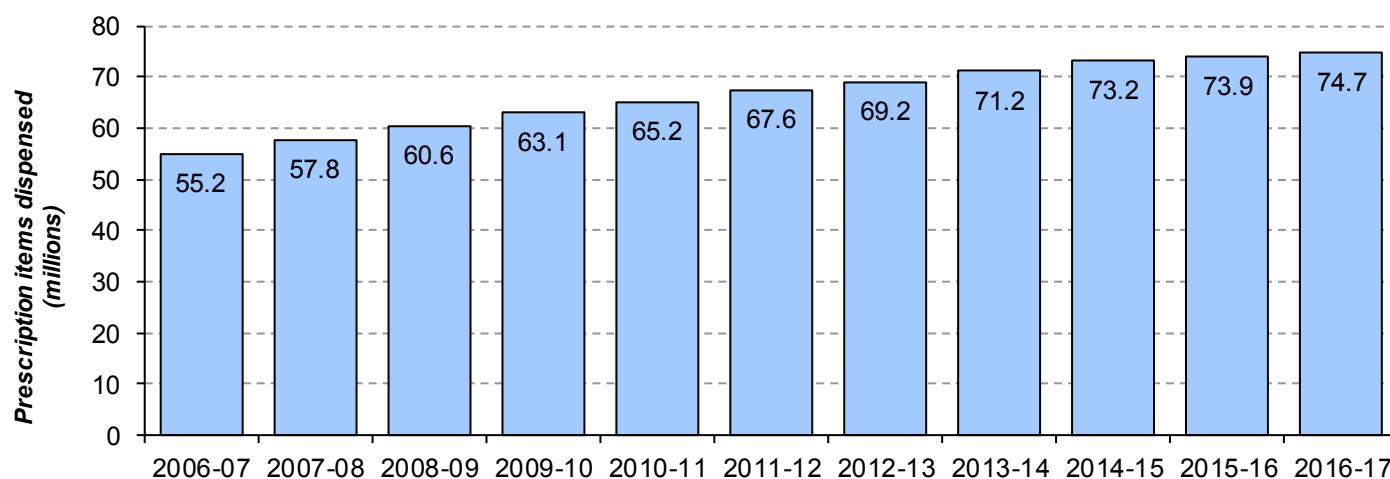
Essential services

Essential services are those that must normally be provided by all community pharmacy contractors. They are nationally agreed services and are not generally open to local arrangement. These services include dispensing, repeat dispensing, disposal of unwanted medicines, promotion of healthy lifestyles and support for self-care.

Dispensing

Dispensing is an essential service under the pharmacy regulations.

Chart 2: Number of items dispensed by community pharmacies



Source: NHS Wales Shared Services Partnership

Note that this total does not include items dispensed by dispensing doctors, appliance contractors or items personally administered. See [notes](#).

- The number of items dispensed has increased every year from 55.2 million in 2006-07 to 74.7 million in 2016-17 (see the definition of '[prescription items](#)' in the notes pages).

Information on items dispensed in Wales is also published in two other publications (see [notes](#) section for links to these publications).

As well as the essential services which community pharmacies are contracted to provide, such as dispensing NHS medicines and appliances, community pharmacies may also provide a number of enhanced or advanced services. A selection of these services is described below. Pharmacies accredited to provide such services may not actually provide them each year.

Advanced services

Advanced services are part of the pharmacy contractual framework and their provision is planned at a national level.

Medicine use reviews

Medicine Use Reviews or MURs (an advanced service) improve the patient's knowledge and use of medicine. MUR services are a national specification service which can be provided by all pharmacists provided they and their premises are accredited to do so. These differ from medicines assessment and compliance support services which are an enhanced service which a Local Health Board may develop and commission in response to local needs.

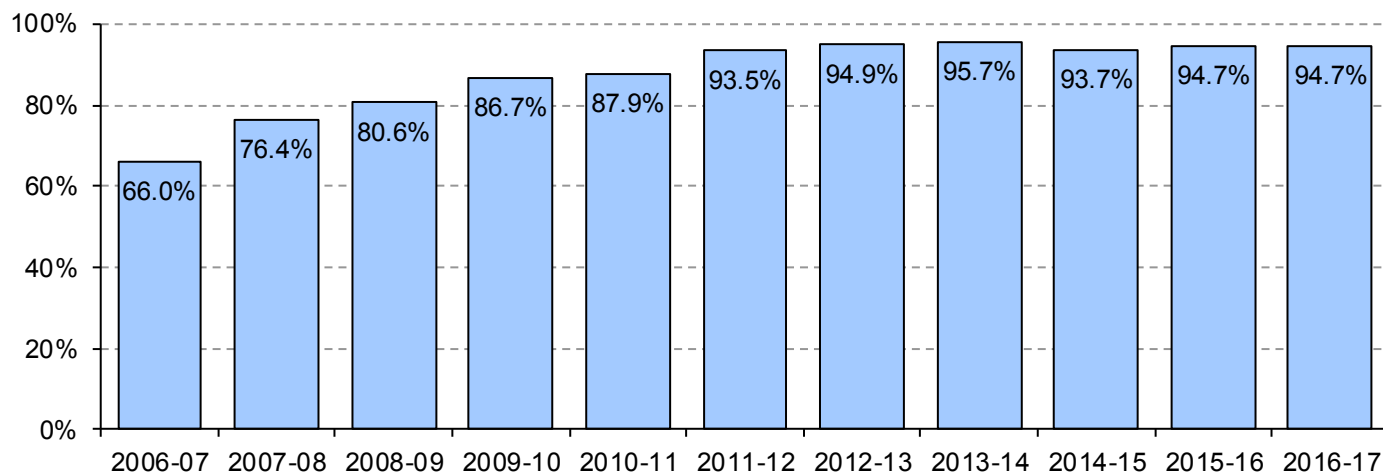
Table 1: Community pharmacies providing Medicine Use Reviews (MUR).

Year	Community pharmacies	Community pharmacies providing MUR Services	% of community pharmacies providing MUR Services	Number of MUR claims paid	Average MUR per community pharmacy providing MUR services
2006-07	706	466	66.0%	30,495	65.4
2007-08	707	540	76.4%	60,803	112.6
2008-09	706	569	80.6%	89,930	158.0
2009-10	707	613	86.7%	107,998	176.2
2010-11	708	622	87.9%	129,337	207.9
2011-12	710	664	93.5%	150,050	226.0
2012-13	712	676	94.9%	173,009	255.9
2013-14	714	683	95.7%	189,891	278.0
2014-15	716	671	93.7%	198,383	295.7
2015-16	716	678	94.7%	205,078	302.5
2016-17	716	678	94.7%	198,198	292.3

Source: NHS Wales Shared Services Partnership

NOTE: only claims entered via National Electronic Claim and Audit Forms (NECAF) are included in the above figures.

Chart 3: Percentage of community pharmacies providing Medicine Use Review (MUR)



Source: NHS Wales Shared Services Partnership

- Of the 716 community pharmacies in Wales, 678 (95%) provided MUR services in 2016-17, the same as in 2015-16 but up from 66.0% in 2006-07.
- The number of MUR claims paid in 2016-17 was 198,198 – down 3.4% from 2015-16.
- For those community pharmacies providing MUR services, the average number of MUR claims paid has increased from 65 in 2006-07 to 292 in 2016-17.

Discharge medicines review

The Discharge Medicines Reviews service (DMR) was introduced in Wales on 1 November 2011. The DMR service aims to provide support to patients recently discharged from hospital by ensuring that changes made to their medicines are enacted as intended in the community.

Table 2: Community pharmacies providing Discharge Medicines Review (DMR)

Year	Community pharmacies	Community pharmacies providing DMR service	% of community pharmacies providing DMR services	Number of DMR claims paid	Average DMR per community pharmacy providing DMR service
2011-12 (1)	710	289	40.7%	1,883	7
2012-13	712	460	64.6%	7,693	17
2013-14	714	389	54.5%	7,251	19
2014-15	716	387	54.1%	7,689	20
2015-16	716	453	63.3%	9,248	20
2016-17	716	451	63.0%	8,777	19

(1) DMR service began 1 November 2011

Source: NHS Wales Shared Services Partnership

- Of the 716 community pharmacies in Wales, 451 (63%) provided DMR services in 2016-17, down 2 on the previous year.
- The number of DMR claims paid in 2016-17 was 8,777 – down 5.1% from the number in 2015-16.
- For those community pharmacies providing DMR services the average number of DMR claims was 19 in 2016-17, one fewer than in the previous year.

Enhanced services

Each Local Health Board is authorised to arrange for the provision of additional pharmaceutical services; these are known as enhanced services.

Table 3: Community pharmacies accredited to provide enhanced services, 2016-17

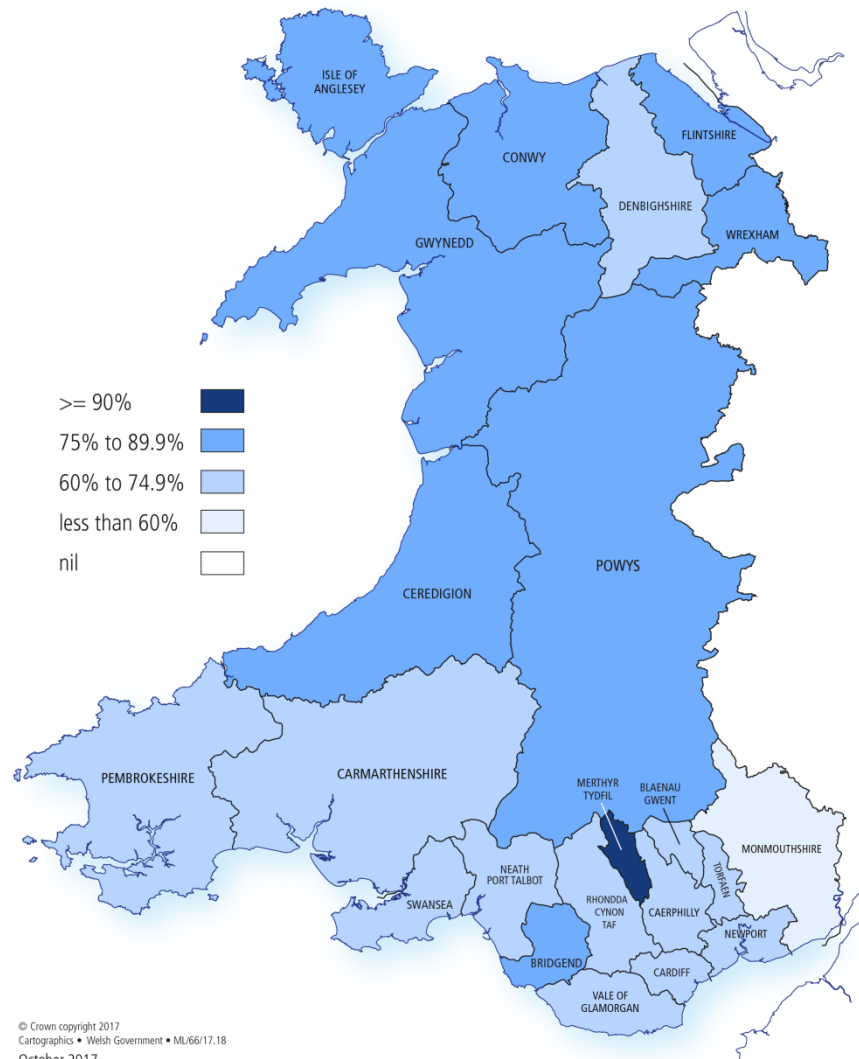
Service type	Number of pharmacies
Provision of emergency contraception	620
Supervised administration of prescribed medicine	534
Seasonal flu vaccine	512
Smoking cessation level 2	434
Smoking cessation level 3	396
Medicines management in domiciliary care	374
Palliative care 'Just in Case' scheme	362
Emergency medicines supply	259
Common ailments service	256
Syringe & needle exchange	235
Additional hours services (includes extended hours and Bank Holiday rota)	233
Advice to care homes	156
Palliative care OOH services	78
Minor ailment/injury schemes	18
Tuberculosis medicine compliance services	8

Source: NHS Wales Shared Services Partnership

Details of the above services are available in the [notes](#). Note that Table 3 and Chart 4 show counts of accredited pharmacies rather than pharmacies actually providing services as in Tables 1, 2, 4 and 6.

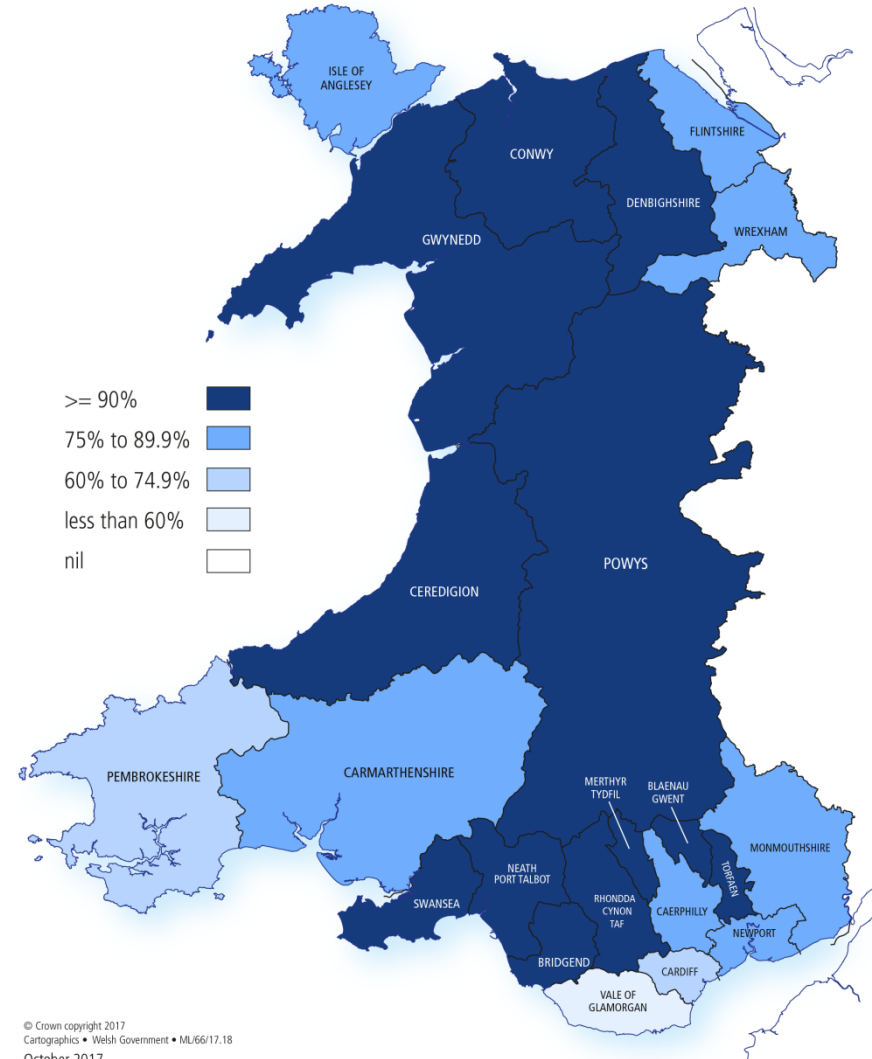
A detailed report on the [seasonal flu vaccination](#) service during the winter of 2012-13 is available.

Map 2: Seasonal flu vaccine
(percentage of pharmacies accredited to provide the service, by LA)



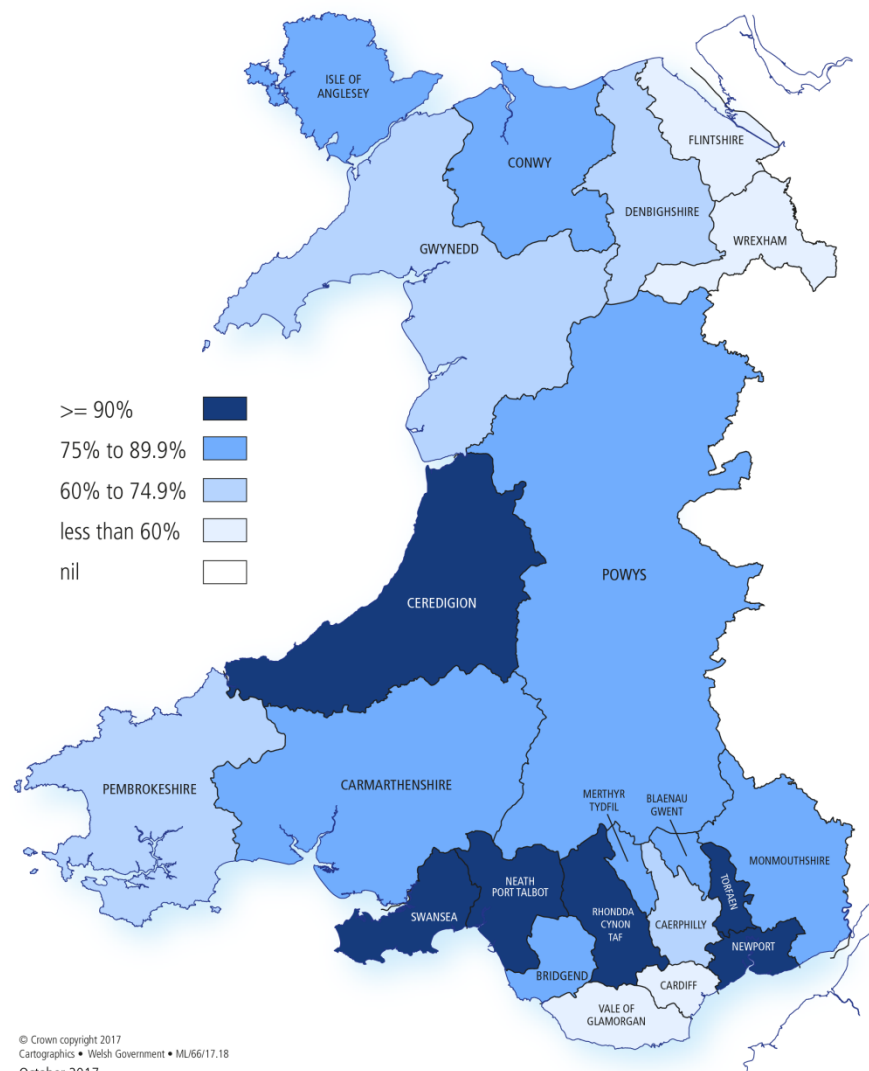
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Map 3: Emergency contraception
(percentage of pharmacies accredited to provide the service, by LA)



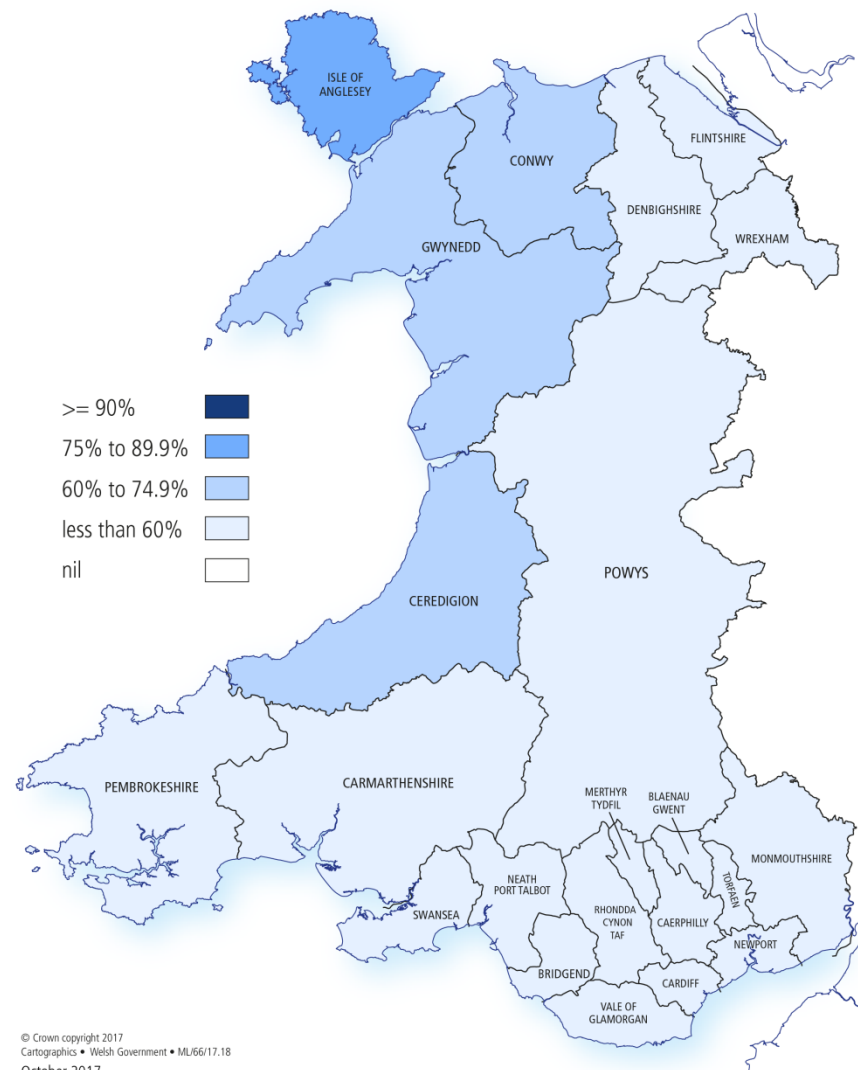
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Map 4: Supervised administration of prescribed medicine¹
(percentage of pharmacies accredited to provide the service, by LA)



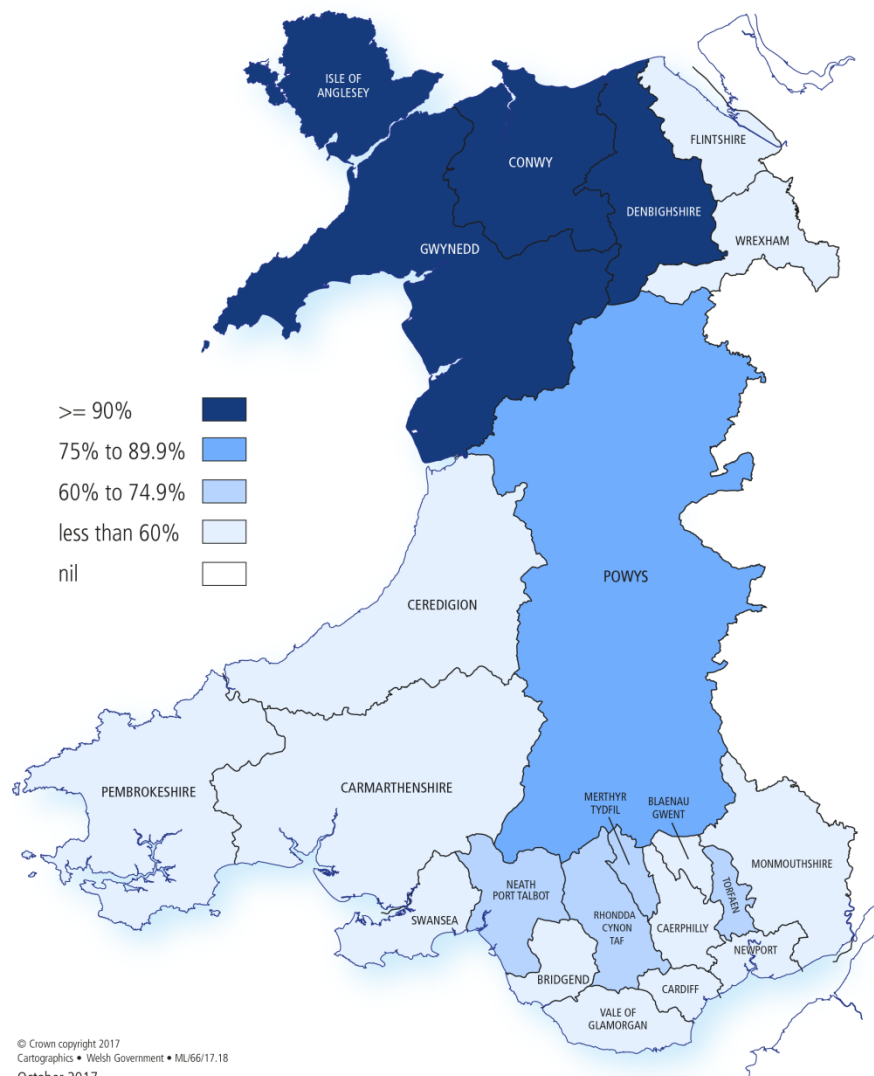
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Map 5: Syringe and needle exchange
(percentage of pharmacies accredited to provide the service, by LA)



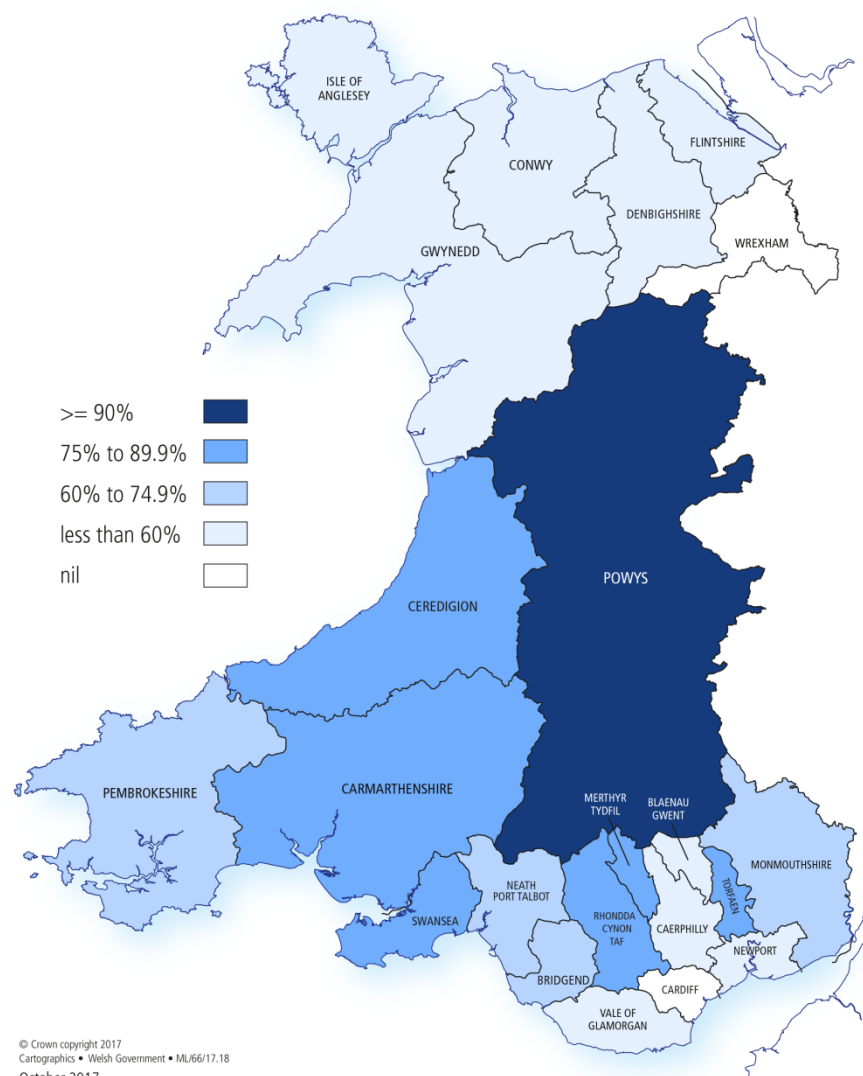
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Map 6: Smoking cessation (level 3)
(percentage of pharmacies accredited to provide the service, by LA)



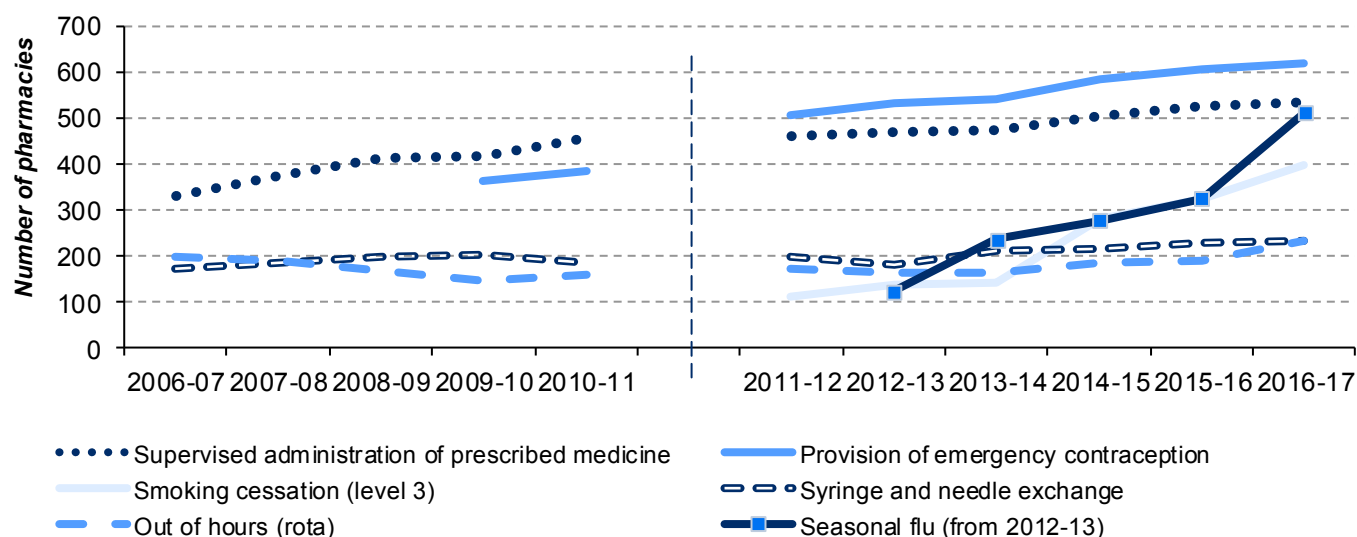
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Map 7: Palliative care 'Just In Case' scheme
(percentage of pharmacies accredited to provide the service, by LA)



OGL

Chart 4: Community pharmacies accredited to provide selected enhanced services



Source: NHS Wales Shared Services Partnership

NOTES:

- Until 2010-11 this data was collected from the PHS1 form submitted by LHBs. From 2011-12 the data is collected from the All Wales Pharmacy Database (AWPD), and is not strictly comparable with the previous data – a break is shown in the chart.
- Although emergency contraception was offered by community pharmacies before 2009-10 the number of community pharmacies providing emergency contraception was collected for the first time in 2009-10; therefore there is no data for previous years;
- Smoking services recorded in the AWPD, smoking cessation levels 2 and 3, are not comparable with the service shown in this chart in previous editions of this release, 'stop smoking'; which is therefore not included for years before 2011-12.
- For further information on services see the notes section.
- From 2011-12, the provision of emergency contraception has been the enhanced service for which most community pharmacies are accredited to provide.
- The number of pharmacies accredited to provide seasonal flu vaccine has increased rapidly from 2012-13 and stands at 512 in 2016-17.

Seasonal flu vaccine (SFV)

Table 4: Community pharmacies providing seasonal flu vaccine (SFV)

Year	Community pharmacies	Community pharmacies who provided SFV ¹	% of community pharmacies providing SFV	Number of SFV claims paid	Average SFVs per community pharmacy providing the service
2012-13	712	127	17.8%	1,568	12
2013-14	714	241	33.8%	7,861	33
2014-15	716	241	33.7%	11,599	48
2015-16	716	328	45.8%	19,786	60
2016-17	716	427	59.6%	26,849	63

Source: NHS Wales Shared Services Partnership

NOTE: ¹ this number may differ from the number of pharmacies accredited to provide the service as it is a count of any pharmacy providing the service during the year.

- 427 community pharmacies provided SFVs during the winter of 2016-17, up from 328 in the previous year.
- For those community pharmacies providing SFV services, the average number of SFVs per community pharmacy was 63 in 2016-17, up from 60 in the previous year.

Table 5: Seasonal flu vaccine (SFV) claims paid – selected characteristics

Year	Sex		SFV in previous year		Previous location		Eligibility		
	Males	Females	Yes	No	GP surgery	Community pharmacy	65+	Chronic conditions (1)	Pregnancy
2013-14	3,321	4,533	5,901	1,960	5,035	485	3,927	2,780	233
2014-15	4,860	6,727	9,609	1,990	6,191	3,185	6,521	3,636	248
2015-16	8,432	11,324	16,419	3,366	10,642	5,346	11,458	5,912	420
2016-17	11,381	15,449	22,722	4,127	12,701	9,478	15,782	8,154	406

Source: NHS Wales Shared Services Partnership

(1) Includes Chronic Heart Disease, Chronic Kidney Disease, Chronic Liver Disease, Chronic Neurological Disease, Chronic Respiratory Disease, Diabetes and Morbidly Obese Adults

NOTE: There are a small number of records with some missing data; not all characteristics are shown and do not necessarily sum to the total; these numbers relate to the seasonal flu vaccines given in the year and not to when the claims for payment are made.

Emergency contraception

Table 6: Community pharmacies providing emergency contraception (EC)

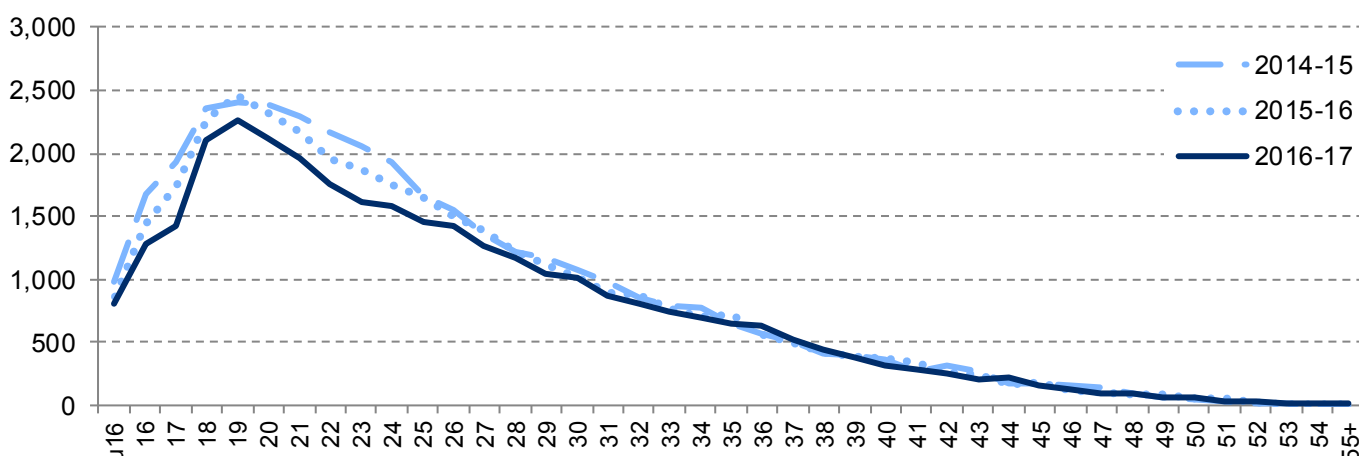
Year	Community pharmacies	Community pharmacies who provided EC ¹	Number of EC claims paid	Average ECs per community pharmacy providing the service	544 community pharmacies provided emergency contraception during 2016-17, up from 520 in the previous year.
2011-12	710	437	34,695	79	
2012-13	712	519	36,675	71	
2013-14	714	551	37,527	68	
2014-15	716	515	36,202	70	
2015-16	716	520	35,096	67	
2016-17	716	544	36,285	67	

Source: NHS Wales Shared Services Partnership

NOTE: ¹ this number may differ from the number of pharmacies accredited to provide the service.

- For those community pharmacies providing emergency contraception services, the average number of claims per community pharmacy was 67 in 2016-17, the same as in the previous year.

Chart 5: Emergency contraception provided by community pharmacies, by age



NOTE: These numbers relate to emergency contraception provided during the year and not to when the claims for payment are made. Age is not recorded for a small number of cases.

- In all three years, more 19 year olds were provided with emergency contraception than any other age.

Table 7: Emergency contraception, by age group

Year	Under 16	16-19	20-24	25-29	30-34	35-39	40-44	45-49	50+
2014-15	977	8,356	10,833	6,946	4,482	2,525	1,386	637	129
2015-16	865	7,898	10,063	6,891	4,246	2,605	1,398	586	163
2016-17	812	7,070	9,028	6,367	4,130	2,621	1,285	532	162

Source: NHS Wales Shared Services Partnership

NOTE: These numbers relate to emergency contraception provided during the year and not to when the claims for payment are made; age is not recorded for a small number of cases. For these reasons totals may not agree with the total claims paid in Table 6.

Table 8: Emergency contraception (EC) claims paid – selected characteristics

- Failure of contraception method was the reason given by almost 40% of women requesting EC in 2016-17, compared to 41% in 2015-16, and 43% in 2014-15.
- In all three years, almost half of the women requesting emergency contraception had not used contraception.
- More than two thirds of emergency contraception was provided within 24 hours of unprotected sexual intercourse.

Year	By reason				By time since unprotected sexual intercourse			
	Failure of contraception method	Missed pill	No contraception used	Total	0-24 hours	25-48 hours	Over 48 hours	Total
2014-15	15,840	2,932	17,672	36,444	24,943	9,014	2,487	36,444
2015-16	14,377	3,709	16,835	34,921	23,098	8,721	3,102	34,921
2016-17	14,142	3,818	17,840	35,800	23,638	8,989	3,658	36,285

Source: NHS Wales Shared Services Partnership

NOTE: These numbers relate to emergency contraception provided during the year and not to when the claims for payment are made.

Applications

Anyone wishing to provide NHS pharmaceutical services or dispensing services must apply to the relevant Local Health Board (LHB) to do so in accordance with the provisions of the National Health Service (Pharmaceutical Services) Regulations Wales 2013 (SI 898 (W.102)). The LHB determines the application and the regulations provide for an appeal to the Welsh Ministers. Permission is also required for minor relocations and changes of ownership. Minor relocations cover pharmacies wishing to relocate over a short distance within the same neighbourhood.

Table 9: Applications to become a provider of pharmaceutical services, Wales 2016-17

	Applications decided			Withdrawn	Outstanding
	Granted	Refused	Total		
Controlled areas (full applications)	0	1	1	0	0
Non controlled areas					
- full applications	1	4	5	0	3
- minor re-locations	8	2	10	1	3
TOTAL	9	7	16	1	6

Source: NHS Wales Shared Services Partnership

- During 2016-17, 9 applications were made to Local Health Boards to provide pharmaceutical services, including applications outstanding at the end of the year.
- Of these, 1 was granted, 5 were refused, none were withdrawn and three remained outstanding at the end of the year.
- In addition, 16 applications for minor relocations were decided on by LHBs, 9 were granted, 7 were refused, and a further 6 applications were outstanding at the end of the year.

¹ Notes and definitions

- A General Practitioner may apply to provide dispensing services, such service provision can only be approved for the applicant's patients who reside within a controlled area and are more than a 1 mile radius from a pharmacy which provides NHS pharmaceutical services (Reg 21);
- A pharmacist may apply to provide NHS pharmaceutical services from within controlled and non-controlled localities;
- A controlled locality is an area that has been determined as being rural in character for the purposes of the regulations; a non-controlled locality is an area that has been determined as being urban in character;
- A pharmacist may apply to provide NHS pharmaceutical services from a specific site (Reg 4(4)). They may also apply for 'Preliminary Consent' which allows for an application to be granted without having to name a specific site or address from which it is intended to provide pharmaceutical services (Reg 14). Such grants are time limited and a further application is required by the Regulations once the exact location of the premises has been identified.

Appeals

Table 10: Appeals relating to applications to become a provider of pharmaceutical services, 2016-17

Application Type	Resolved	Application proceeds	Application does not proceed
Controlled areas (full applications)	1	1	0
Non controlled areas			
- full applications	2	1	1
- minor re-locations	0	0	0
TOTAL	3	2	1

Source: Welsh Government

- 3 appeals were resolved, all of which related to applications to open new pharmacies.

Key quality information

Quality report

We publish a detailed [quality report](#) on 'Community pharmacy services in Wales' statistics. The quality report includes information on definitions and coverage, and details of our users.

Notes

Sources of data

The data is obtained from the [NHS Wales Shared Services Partnership \(Pharmacy services\)](#), Health Boards and the Welsh Government. From 2011-12 information about the services which community pharmacies are accredited to provide has been obtained from the All Wales Pharmacy Database maintained by NHS Wales Shared services Partnership.

Prescribing statistics

Prescription statistics published here are based on information obtained from prescriptions sent to Prescribing Services, NHS Wales Shared Services Partnership for payment. Data captured by Prescribing Services in the prescription pricing and remuneration process are also available on their [website](#).

A large amount of complex data on prescriptions is available from these sources and should be interpreted with the explanatory notes provided. Contact details are provided in case users require further data or advice on interpretation.

Other prescribing and dispensing publications for Wales

In addition to 'Community Pharmacy Services in Wales', information on items dispensed in Wales is also published in two other statistical releases:

[Prescriptions by General Practitioners in Wales](#) contains information on prescriptions written by General Practitioners in Wales. It also covers prescriptions submitted by general practitioners for items personally administered.

[Prescriptions dispensed in the community in Wales](#) contains information on prescriptions dispensed in Wales irrespective of who dispensed them, and includes the Prescription Cost Analysis (PCA) data.

The information on dispensing presented in the three releases varies because the coverage and relevant time periods are different as follows:

- The PCA data cover all prescriptions dispensed by community pharmacists, appliance contractors and dispensing doctors in Wales including items personally administered. Also included are prescriptions written in England, Scotland, Northern Ireland and the Isle of Man but dispensed in Wales. The analyses do not include prescriptions dispensed outside Wales. The data is published for calendar years.
- The prescription statistics in 'Community Pharmacy Services in Wales' are derived from the 'PD1' dataset and relate to items dispensed from community pharmacies in Wales. They do not include items dispensed by appliance contractors, GPs themselves or dispensed outside Wales. This is effectively a sub-set of the PCA data, although the statistics we publish relate to different time periods (PCA to calendar years and prescribing statistics in the Community Pharmacy release to financial years). The

items dispensed by pharmacies accounts for more than 90 per cent of the items included in the PCA dataset.

- The 'Prescriptions by General Medical Practitioners in Wales' release presents prescription items prescribed by GPs in Wales which are subsequently dispensed by community pharmacies, appliances contractors or dispensing doctors. It also covers prescriptions submitted by GPs in Wales for items personally administered. The data is published for financial years.

Definitions

Items dispensed

An item dispensed refers to a single item prescribed by a doctor (or dentist) on a prescription form. If a prescription form includes three items it is counted as three dispensed items. A prescription item may be for a variable quantity eg 14, 28 or 56 tablets.

Services

Under the pharmaceutical services contractual framework services are divided into three categories:

- Essential services which must be provided by all community pharmacies;
- Advanced services which all community pharmacies can choose to provide dependent on them meeting certain criteria;
- Enhanced services which are commissioned locally by Health Boards to reflect the needs of the local population.

Further details are available [here](#).

Essential services:

Essential services are those that must normally be provided by all community pharmacy contractors. They are nationally agreed services and are not generally open to local arrangement. These services include dispensing, repeat dispensing, disposal of unwanted medicines, promotion of healthy lifestyles and support for self-care.

Advanced services

Medicine Use Reviews: Pharmacy premises must be accredited and pharmacists trained and registered to be able to provide Medicines Use Reviews (MURs). The MUR involves the pharmacist reviewing the patients' use of their medicines to improve their understanding of how they should be taken and any potential side effects.

Discharge Medicines Reviews: The Discharge Medicines Review Service (DMR) was introduced in Wales on 1 November 2011. The DMR service aims to provide support to patients recently discharged from hospital by ensuring that changes made to their medicines are enacted as intended in the community.

Appliance user reviews and the **stoma customisation service** are also advanced services.

Enhanced services

Additional hours services (includes extended hours and Bank Holiday rota)

The provision of pharmaceutical services during an extended period of opening to ensure that people have prompt access to medicines during the out of hours period (whether for the whole or part of that period).

Common ailments service

Involves the provision of advice and support to people on the management of common minor ailments, including where appropriate, the supply of medicines for the treatment of that ailment, for those people who would have otherwise gone to their GP for advice or a prescription.

Medicines management in domiciliary care (formerly Medicines assessment and compliance support service (including the provision of Medication Administration Records (MAR Charts))

The provision of a range of services which support patients and carers to ensure medicines are taken safely and effectively, and may include the provision of medicines administration record (MAR) charts and/or compliance devices; and the provision of additional MURs commissioned by health boards as enhanced services.

Minor ailment/injury schemes

The provision of advice and support to people on the management of minor ailments including minor injuries, including where necessary, the supply of medicines or dressings for the treatment of the minor ailment, for those people who would have otherwise used their GP or other NHS service. Includes 'triage and treat' where minor, superficial injuries are treated in the pharmacy rather than having to visit a doctor or an A&E Department. The types of injuries that can be treated under this service might include minor abrasions, superficial cuts and wounds, sprains and strains and minor burns.

Pharmaceutical advice to care homes

The provision of advice and support to the residents and staff within a care home to ensure the proper and effective ordering of medicines and appliances, their safe storage, supply and administration and proper record keeping.

Palliative care 'Just in Case' scheme

The provision of palliative care medicines for patients for whom it is anticipated that their medical condition may deteriorate into the terminal phase of illness.

Palliative care out-of -hours services

Retaining stocks of agreed specialist medicines which can then be dispensed for patients receiving palliative care without undue delay; the demand for such medicines may be urgent and/or unpredictable.

Provision of emergency contraception

The provision of emergency contraception and sexual health advice through a community pharmacy.

Seasonal flu vaccination service (SFV)

The provision of NHS vaccination against seasonal influenza for persons over 65 or in an at risk group by a pharmacist.

Smoking cessation level 2

The provision of nicotine replacement therapy (NRT) to patients wishing to stop smoking and who are participating in behavioural support services.

Smoking cessation level 3

The provision of one to one behavioural support and advice to people who want to give up smoking

Supervised administration of prescribed medicine

The supervision of patients when taking specified prescribed medicines to ensure adherence to an agreed treatment plan, typically for medicines where the problems associated with poor adherence have been shown to be significant (e.g. in substance misuse).

Syringe & needle exchange

The provision of sterile needles and syringes, injecting paraphernalia and sharps containers for return of used equipment.

Tuberculosis medicine compliance services

This service requires the pharmacist to supervise the consumption of antituberculous medicines at the point of administration in the pharmacy, ensuring that the dose has been administered to the patient.

Waste reduction scheme

Involves ensuring that at the point of dispensing the pharmacy supplies only those medicines required by the patient.

Appliance contractor

Each community pharmacy and appliance contractor has an arrangement with a LHB to dispense NHS prescriptions. The arrangement specifies both the premises and the named contractor. Community pharmacies can dispense the full range of drugs and appliances, but appliance contractors are limited to the supply of appliances as listed in Part IXA/B/C of the monthly Drug Tariff published by the Prescription Pricing Division of the NHS Business Services Authority.

Control of entry regulations

Control of entry regulations require that any pharmacy in Wales wishing to obtain an NHS contract to dispense NHS prescriptions must satisfy the Health Board that it is either 'necessary' or 'desirable' to grant the application to secure the adequate provision of pharmaceutical services in a particular neighbourhood. Permission is also required for minor relocations and changes of ownership. Minor relocations cover pharmacies wishing to relocate over a short distance within the same neighbourhood. Changes of ownership are granted only if the same services will be provided as before, there is no interruption in service provision and no relocation involved. Note that new [pharmacy service regulations](#) came into force in Wales on 10 May 2013.

Controlled locality

An area determined by the relevant Health Board to be rural in character for the purpose of determining applications to provide NHS pharmaceutical services in accordance with regulation 9 of the NHS Pharmaceutical Services (Wales) Regulations 1992/662 as amended or regulation 6 of the NHS Pharmaceutical Services (Wales) Regulations 2013/898.

Users and uses

The aim of these statistics is to present data which is available from routine administrative sources in an accessible format providing a summary of pharmacy statistics trends over time and patterns across Wales, highlighting the services available across the country. Statistics in this developing area of policy will be useful both within and outside the Welsh Government.

Some of the key potential users are:

- Ministers and the Members Research Service in the National Assembly for Wales;
- Other areas of the Welsh Government;
- Other government departments;
- National Health Service and Public Health Wales;
- Students, academics and universities;
- Professional organisations;
- Individual citizens and private companies.

The statistics are used in a variety of ways. Some examples of the uses include:

- Advice to Ministers;
- To inform debate in the National Assembly for Wales and beyond;
- To monitor and evaluate performance and activity in the NHS.
- If you are a user and do not feel the above list adequately covers you, or if you would like to be added to our circulation list, please let us know by e-mailing stats.healthinfo@wales.gsi.gov.uk

Revisions

Historical data is not revised unless errors are discovered.

Confidentiality

Our statistics take into account our disclosure control guidance and follow ONS confidentiality guidelines for Health statistics available from [ONS best practice guidelines](#).

National Statistics

The [United Kingdom Statistics Authority](#) has designated these statistics as National Statistics, in accordance with the Statistics and Registration Service Act 2007 and signifying compliance with the [Code of Practice for Official Statistics](#).

Designation can be broadly interpreted to mean that the statistics:

- meet identified user needs;
- are well explained and readily accessible;
- are produced according to sound methods, and
- are managed impartially and objectively in the public interest.

Once statistics have been designated as National Statistics it is a statutory requirement that the Code of Practice shall continue to be observed.

Well-being of Future Generations Act

The Well-being of Future Generations Act 2015 is about improving the social, economic, environmental and cultural well-being of Wales. The Act puts in place seven well-being goals for Wales. These are for a more equal, prosperous, resilient, healthier and globally responsible Wales, with cohesive communities and a vibrant culture and thriving Welsh language. Under section (10)(1) of the Act, the Welsh Ministers must (a) publish indicators (“national indicators”) that must be applied for the purpose of measuring progress towards the achievement of the Well-being goals, and (b) lay a copy of the national indicators before the National Assembly. The 46 national indicators were laid in March 2016.

Information on indicators and associated technical information - [How do you measure a nation's progress? - National Indicators](#)

Further information on the [Well-being of Future Generations \(Wales\) Act 2015](#)

The statistics included in this release could also provide supporting narrative to the national indicators and be used by public services boards in relation to their local well-being assessments and local well-being plans.

Further details

This release is available at:

<http://gov.wales/statistics-and-research/prescriptions-general-medical-practitioners/?lang=en>

Further information on methods and quality can be found in the [Quality Report](#).

Next update

The next release covering 2017-18 will be published in October / November 2018.

We want your feedback

We welcome any feedback on any aspect of these statistics, which can be provided by email to stats.healthinfo@gov.wales

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