



Community pharmacy services in Wales, 2017-18

31 October 2018
SFR108/2018

Community pharmacies are those found in cities, towns and villages across the country, for example on high streets, in supermarkets or within GP surgeries (further information is available in the [quality report](#) associated with this release). While essential services such as dispensing prescriptions remain the primary role of community pharmacies, most offer a range of additional NHS services.

[Medicine Use Reviews \(MURs\)](#) have been available since 2005-06 and are now offered by 96% of community pharmacies in Wales.

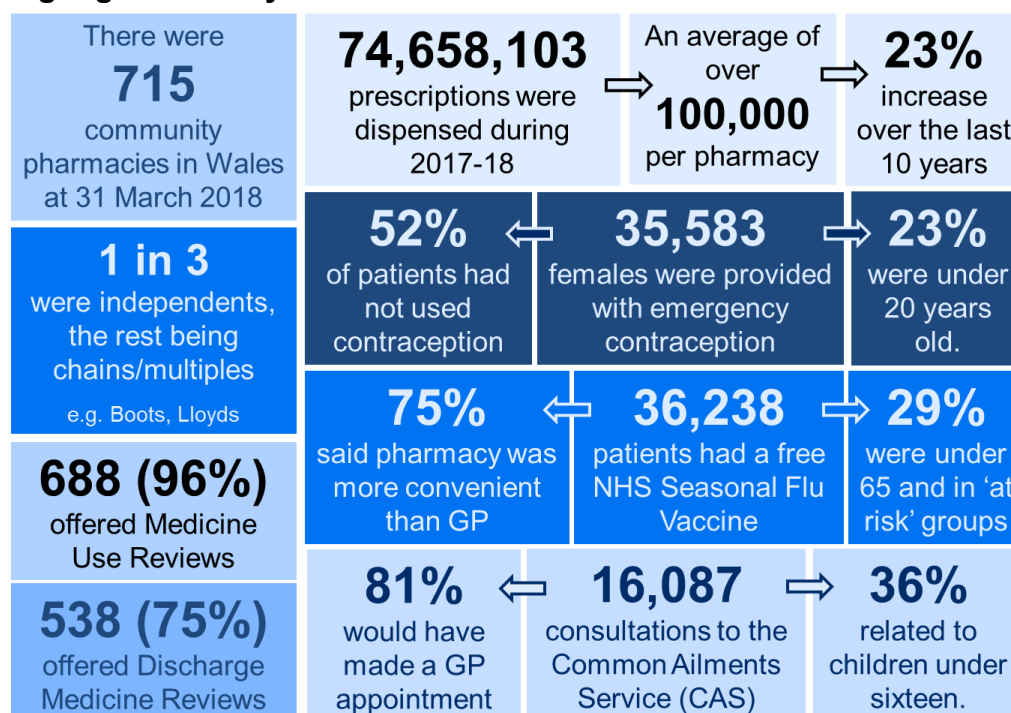
[Discharge Medicine Reviews \(DMRs\)](#) were introduced during 2011-12 and are now available in 75% of community pharmacies.

[Emergency Contraception \(EC\)](#) has been available at community pharmacies for many years, although data has only been collected since 2009-10.

Patients who qualify for the free NHS [Seasonal Flu Vaccine \(SFV\)](#) have been able to have the vaccination at a community pharmacy since 2012-13.

The latest national enhanced service offered is the [Common Ailments Service \(CAS\)](#). Following a 3 year trial the service was opened up to all pharmacies during 2015-16 and is increasing in use.

Highlights in the year:



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

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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 2017-18 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).

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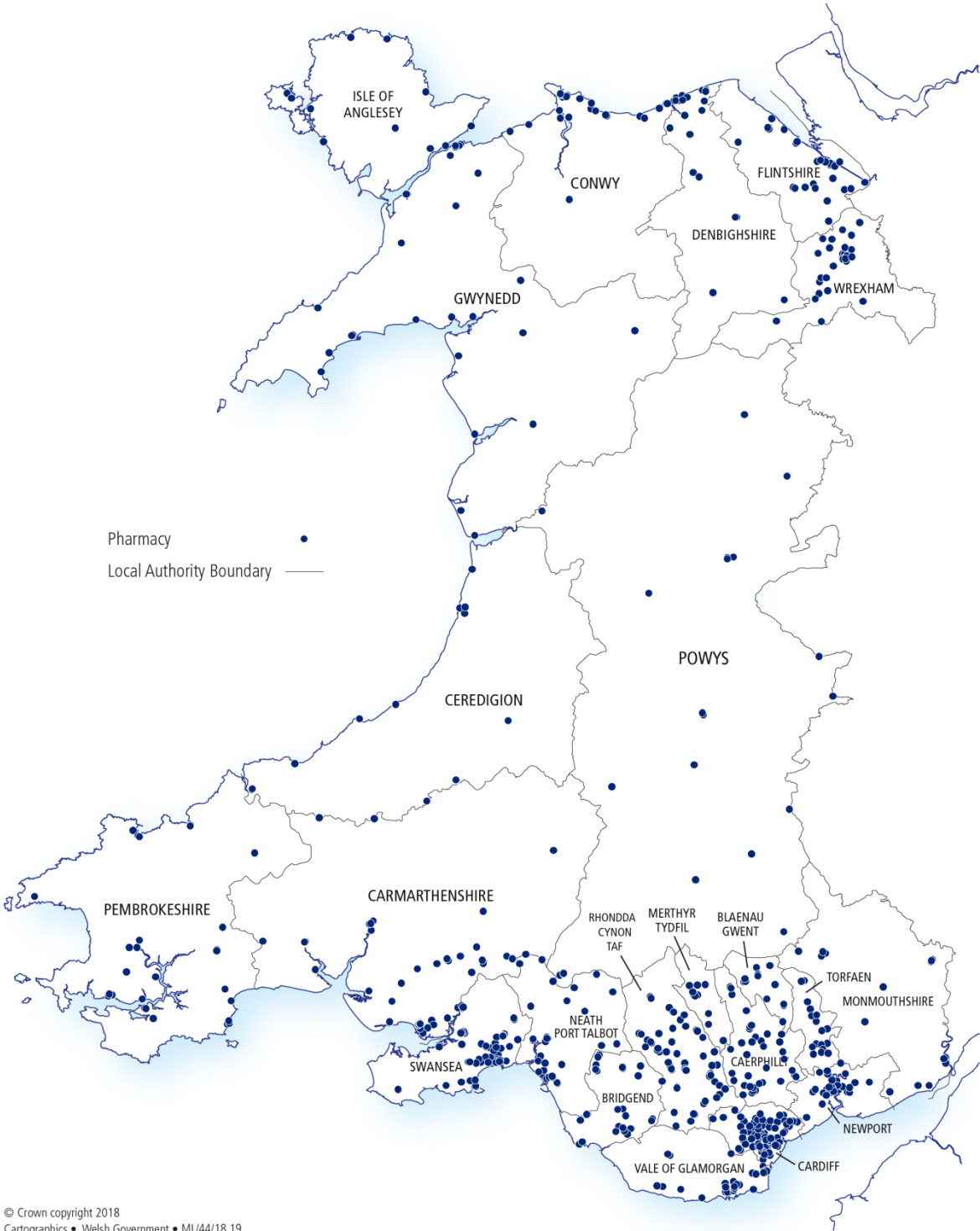
Twitter: [@statisticswales](#)

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

Map 1: Community pharmacy locations at 31 March 2018



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October 2018



Community pharmacies

- There has been little change in the number of community pharmacies in Wales over the last 10 years: at 31 March 2018 there were 715, compared to 706 at 31 March 2009.
- However, the proportion of independent pharmacies has changed somewhat.
 - 233 were independent (32.6% of the total) at 31 March 2018, down from 259 (36.7%) at 31 March 2009.
 - 482 were chain/multiple pharmacies (67.4% of the total) at 31 March 2018, up from 447 (63.3%) at 31 March 2009.
- There were also 4 appliance contractors at 31 March 2018, the same as at 31 March 2009.

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

Services

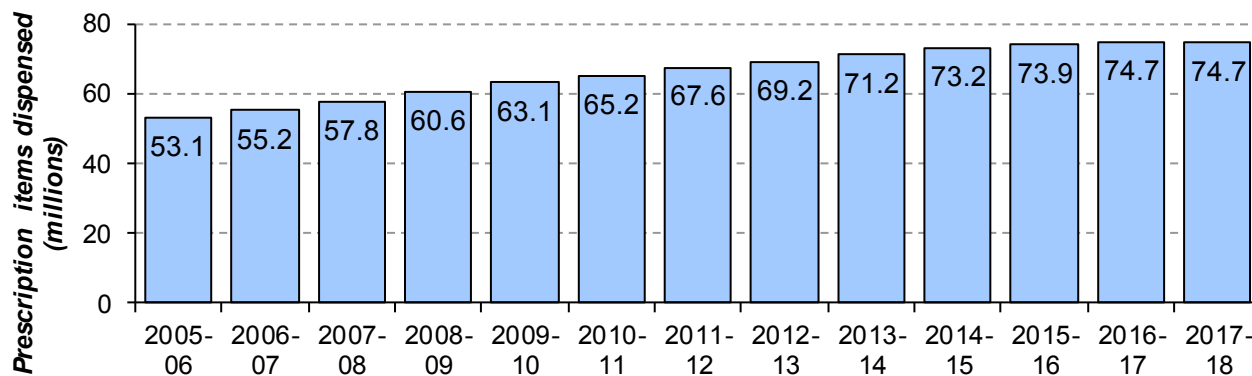
Under the pharmaceutical services contractual framework, services are divided into three categories:

- **Essential services** must be provided by all community pharmacies; these services include dispensing, disposal of unwanted medicines, promotion of healthy lifestyles and support for self-care.
- Community pharmacies can choose to provide **advanced services**, if they meet certain criteria. Medicine Use Reviews, Discharge Medicines Reviews, Appliance User Reviews and the Stoma Customisation Service are advanced services.
- **Enhanced services** are commissioned locally by health boards to reflect the needs of the local population and include services such as Emergency Contraception, Seasonal Flu Vaccine, and Common Ailments Service.

Advanced and Enhanced services are enabled by The Pharmaceutical Services (Advanced and Enhanced Services (Wales) Directions, the latest of these can found in the [Drug Tariff](#).

Community pharmacies are paid for providing these services and submit claims for payment to the NHS Shared Services Partnership who manage the payments on behalf of the health boards. Pharmacies have until 5th May to enter claims for the previous financial year, (so there are actual provision dates and claims dates) and therefore the numbers shown in the following tables and charts vary.

Chart 1: Number of items dispensed by community pharmacies



Source: NHS Wales Shared Services Partnership

Note: this data does not include items dispensed by dispensing doctors, appliance contractors or items personally administered. See 'Key Quality Information' at the end of the release.

- The number of items dispensed has increased every year from 53.1 million in 2005-06 to 74.7 million in 2016-17, before remaining the same in the latest year (to the nearest 100,000). See the definition of [prescription items](#) in the notes pages.

Medicine use reviews

Medicine Use Reviews or MURs (an Advanced service) improve the patient's knowledge and use of medicine. They 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 health board may develop and commission in response to local needs.

Table 1: Community pharmacies providing Medicine Use Reviews

Year	Number of community pharmacies	Community pharmacies providing MUR services		Number of MUR claims paid ^{2 3}	Average MUR per community pharmacy providing an MUR service
		Number ¹	Percent		
2008-09	706	569	80.6%	89,930	158
2009-10	707	613	86.7%	107,998	176
2010-11	708	622	87.9%	129,337	208
2011-12	710	664	93.5%	150,050	226
2012-13	712	676	94.9%	173,009	256
2013-14	714	683	95.7%	189,891	278
2014-15	716	671	93.7%	198,383	296
2015-16	716	678	94.7%	205,078	302
2016-17	716	678	94.7%	198,198	292
2017-18	715	688	96.2%	213,186	310

Source: NHS Wales Shared Services Partnership

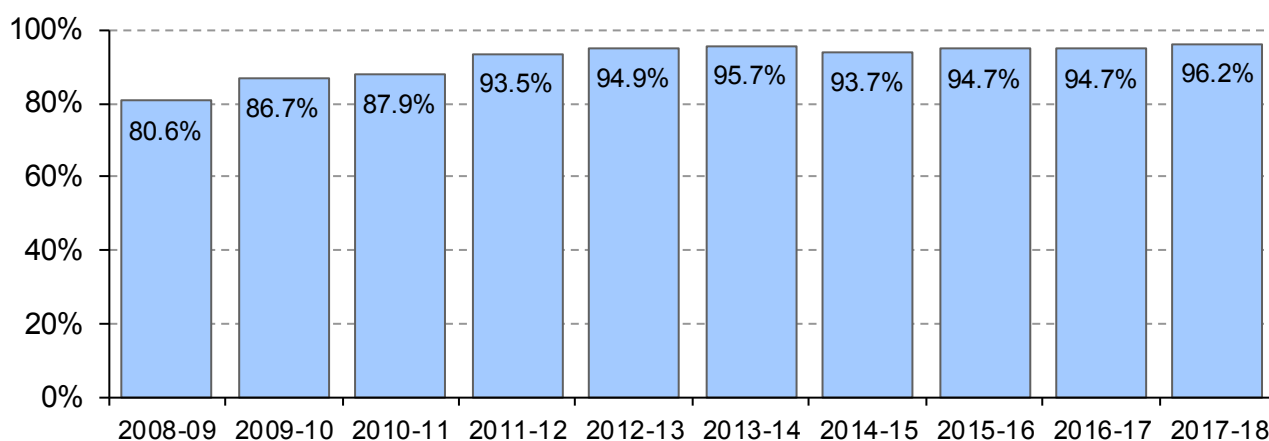
Notes:

¹ This number may differ from the number of pharmacies accredited to provide the service.

² Only claims entered via National Electronic Claim and Audit Forms (NECAF) are included in the above figures.

³ This is the number of claims paid in the year, rather than the number of MURs provided (see page 4).

Chart 2: Percentage of community pharmacies providing Medicine Use Reviews



Source: NHS Wales Shared Services Partnership

- Of the 715 community pharmacies in Wales, 688 (96.2%) provided MUR services in 2017-18, up from 569 (80.6%) in 2008-09.
- The number of MUR claims paid in 2017-18 was 213,186, an increase of 7.6% from 2016-17.
- For those community pharmacies providing MUR services, the average number of MUR claims paid has increased from 113 in 2007-08 to 310 in 2017-18.

Discharge Medicines Review

The Discharge Medicines Review service (DMR), another Advanced service, 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 Reviews

Year	Number of community pharmacies	Community pharmacies providing DMR services		Number of DMR claims paid ³	Average DMR per community pharmacy providing a DMR service
		Number ²	Percent		
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
2017-18	715	538	75.2%	10,386	19

Source: NHS Wales Shared Services Partnership

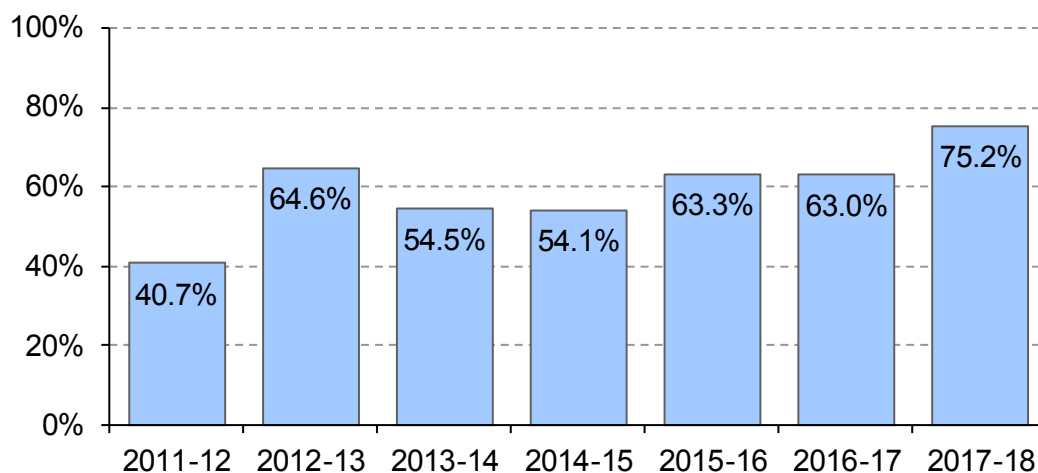
Notes:

¹ DMR service began on 1 November 2011.

² This number may differ from the number of pharmacies accredited to provide the service.

³ This is the number of claims paid in the year, rather than the number of DMRs provided (see page 4).

Chart 3: Percentage of community pharmacies providing Discharge Medicine Reviews



Source: NHS Wales Shared Services Partnership

- Of the 715 community pharmacies in Wales, 538 (75.2%) provided DMR services in 2017-18, an increase of 87 (or 12 percentage points) on the previous year.
- Over 10,000 DMR claims were paid in 2017-18, an increase of 1,600 (or 18%) since 2016-17.
- For those community pharmacies providing DMR services the average number of DMR claims was 19 in 2017-18, the same as in the previous year.

Enhanced services

Each 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, selected services, 2013-14 to 2017-18

Service	2011-12	2012-13	2013-14	2014-15	2015-16	2016-17	2017-18
Palliative care 'Just in Case' scheme	206	245	274	339	358	361	353
Supervised administration of prescribed medicine	487	468	475	502	527	531	522
Provision of emergency contraception	525	533	542	583	607	617	589
Smoking cessation level 3	117	137	144	278	324	394	392
Syringe & needle exchange	205	183	213	215	230	233	226
Seasonal flu vaccine	0	124	236	278	326	512	514
Common Ailments Service	0	0	32	36	36	255	544

Source: NHS Wales Shared Services Partnership

Notes:

Provision of the seasonal flu vaccine was introduced in 2012-13.

The 'Common Ailments Service' started as a trial during 2013-14, and was opened up to all pharmacies during 2016-17.

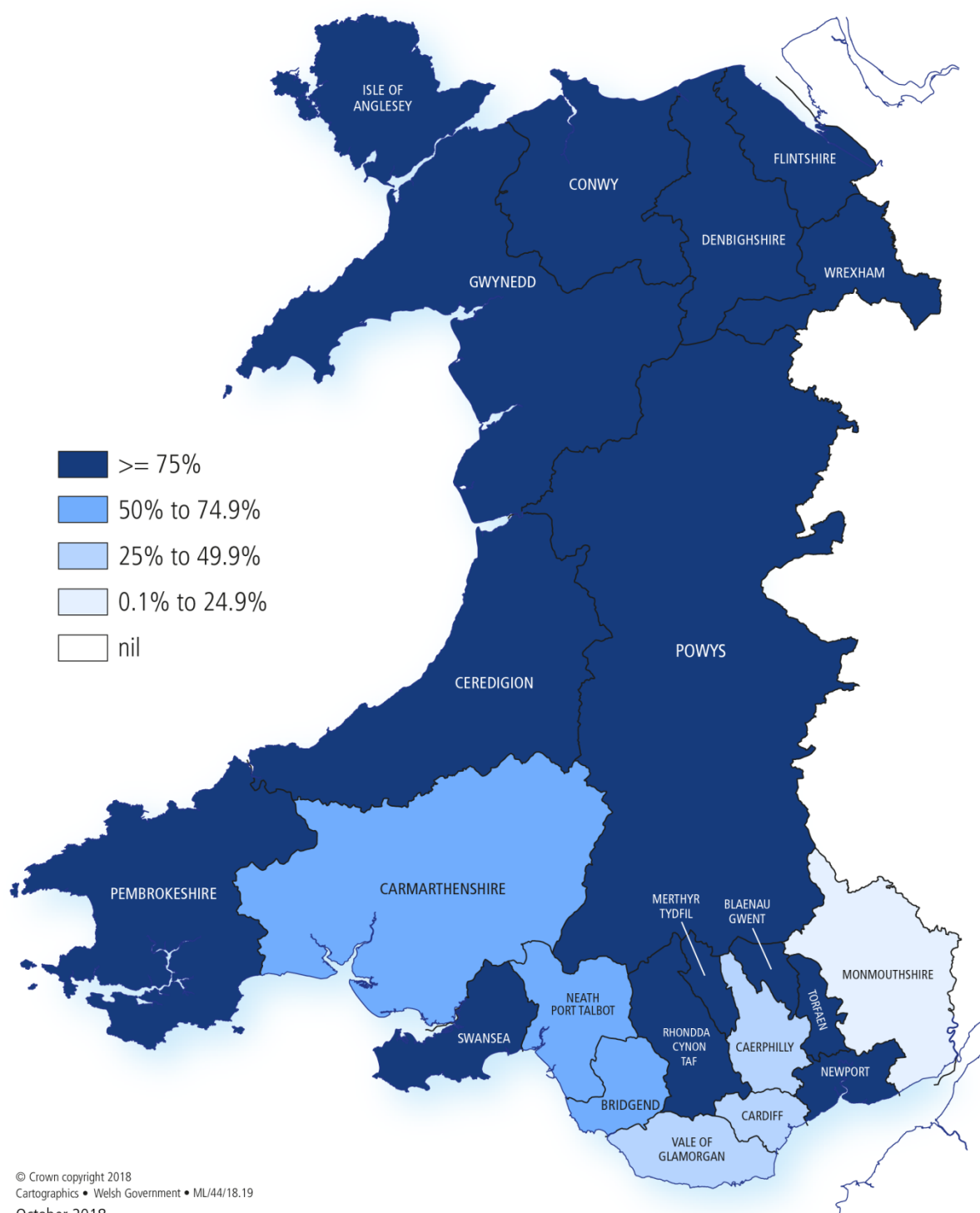
The fall in the number of pharmacies accredited for offering enhanced services is expected as health boards have strengthened their accreditation criteria.

Since the first year each service was offered, more pharmacies have offered each enhanced services nearly every year until 2016-17. In the most recent year, five of the services were offered in fewer pharmacies than the previous year, while two services were offered in more pharmacies.

Provision of emergency contraception has remained the most widely offered enhanced service since 2011-12 despite 28 fewer pharmacies offering it in 2017-18 than 2016-17.

The maps on the following pages show the coverage across Wales of these services.

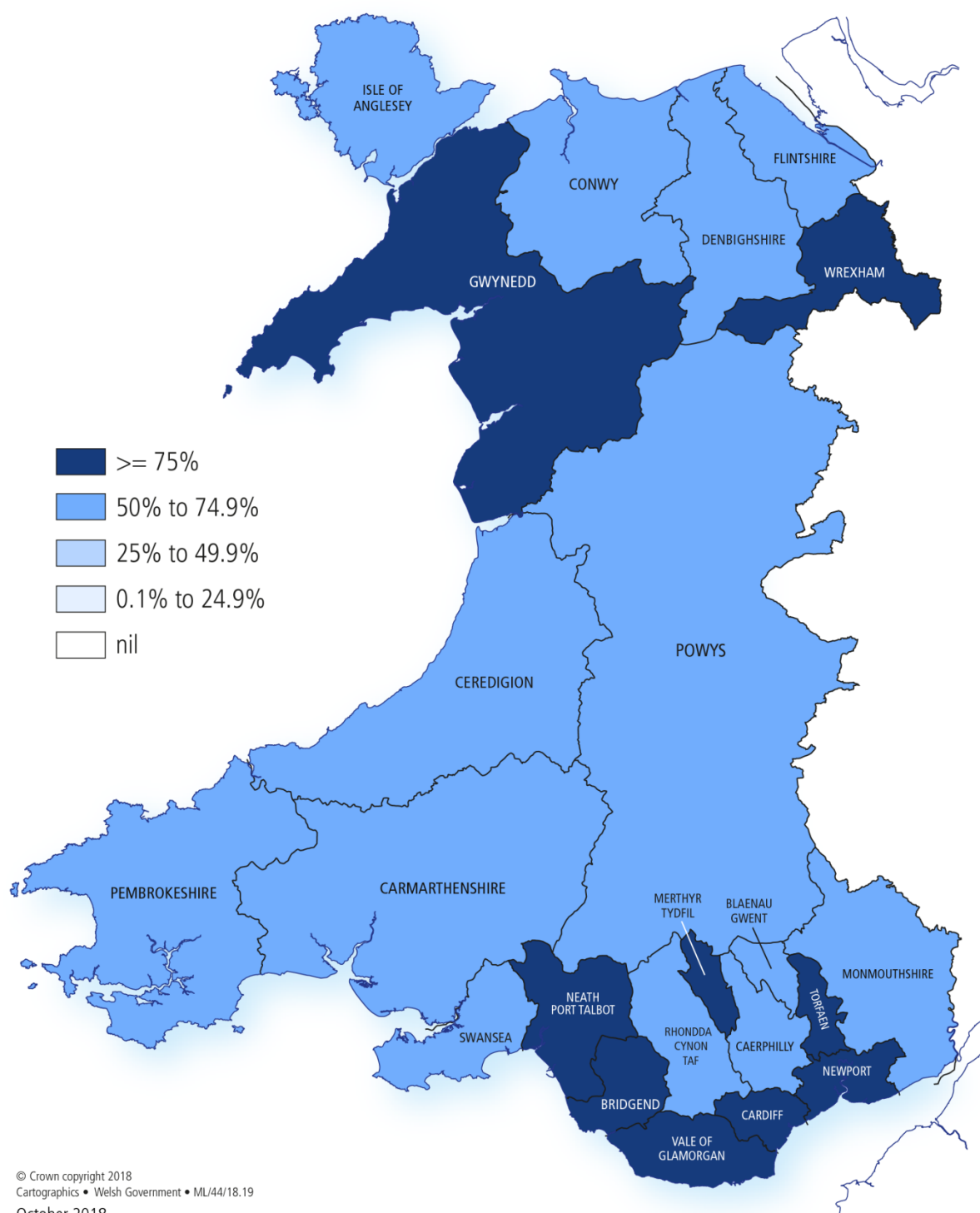
Map 2: Common Ailments Service, 2017-18
(percentage of pharmacies accredited to provide the service, by LA)



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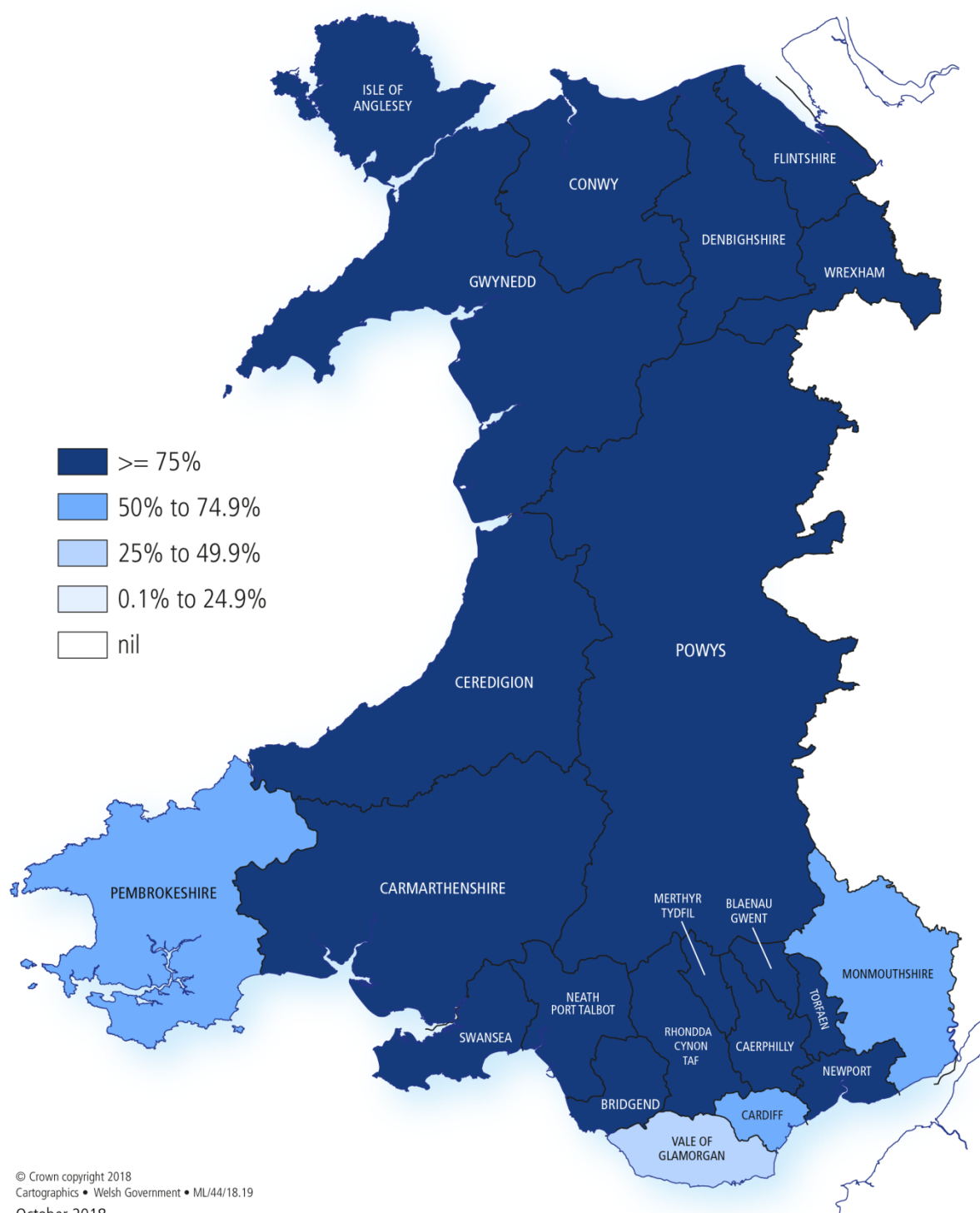
Map 3: Seasonal flu vaccine, 2017-18
 (percentage of pharmacies accredited to provide the service, by LA)



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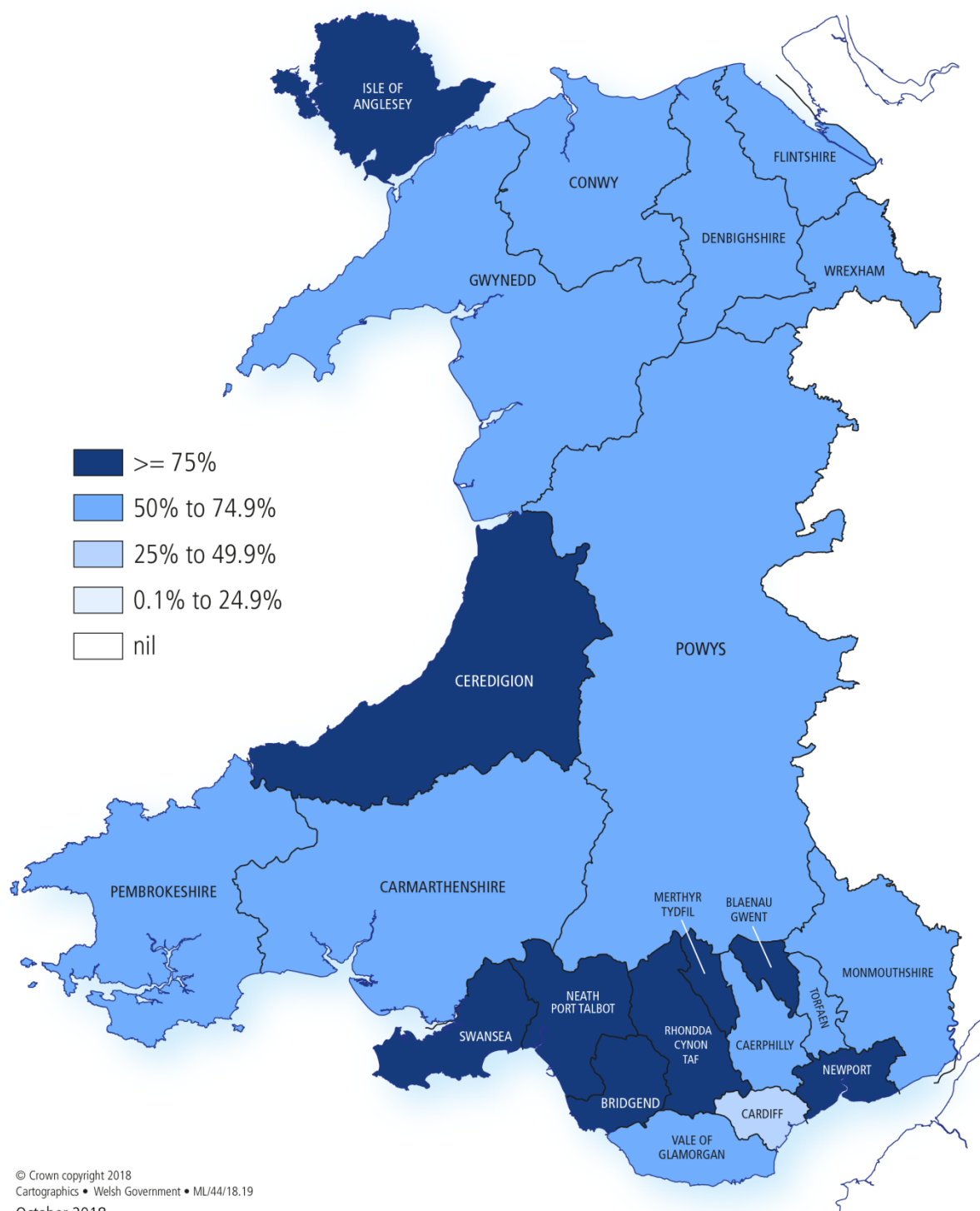
Map 4: Emergency contraception, 2017-18
(percentage of pharmacies accredited to provide the service, by LA)



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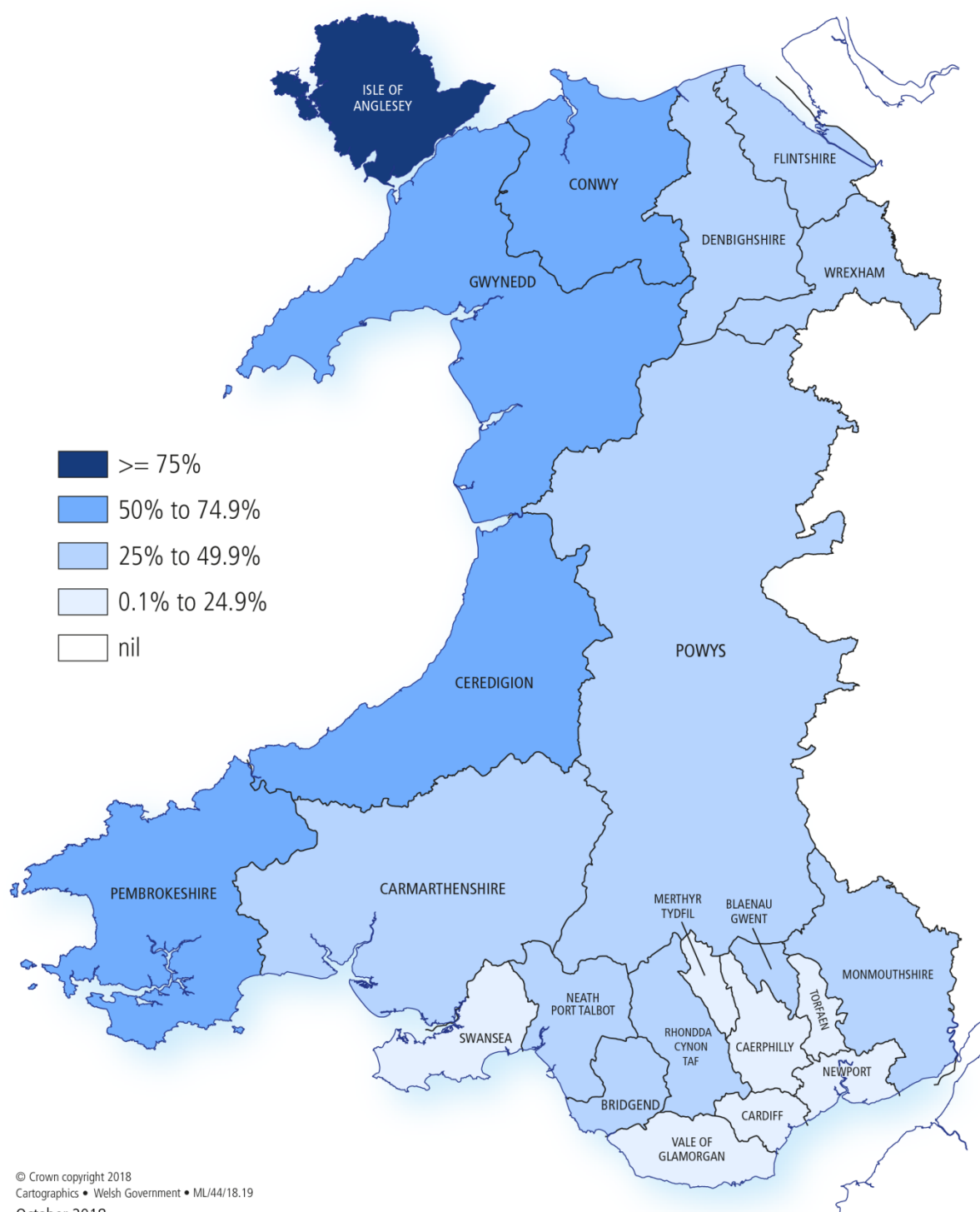
Map 5: Supervised administration of prescribed medicine, 2017-18
(percentage of pharmacies accredited to provide the service, by LA)



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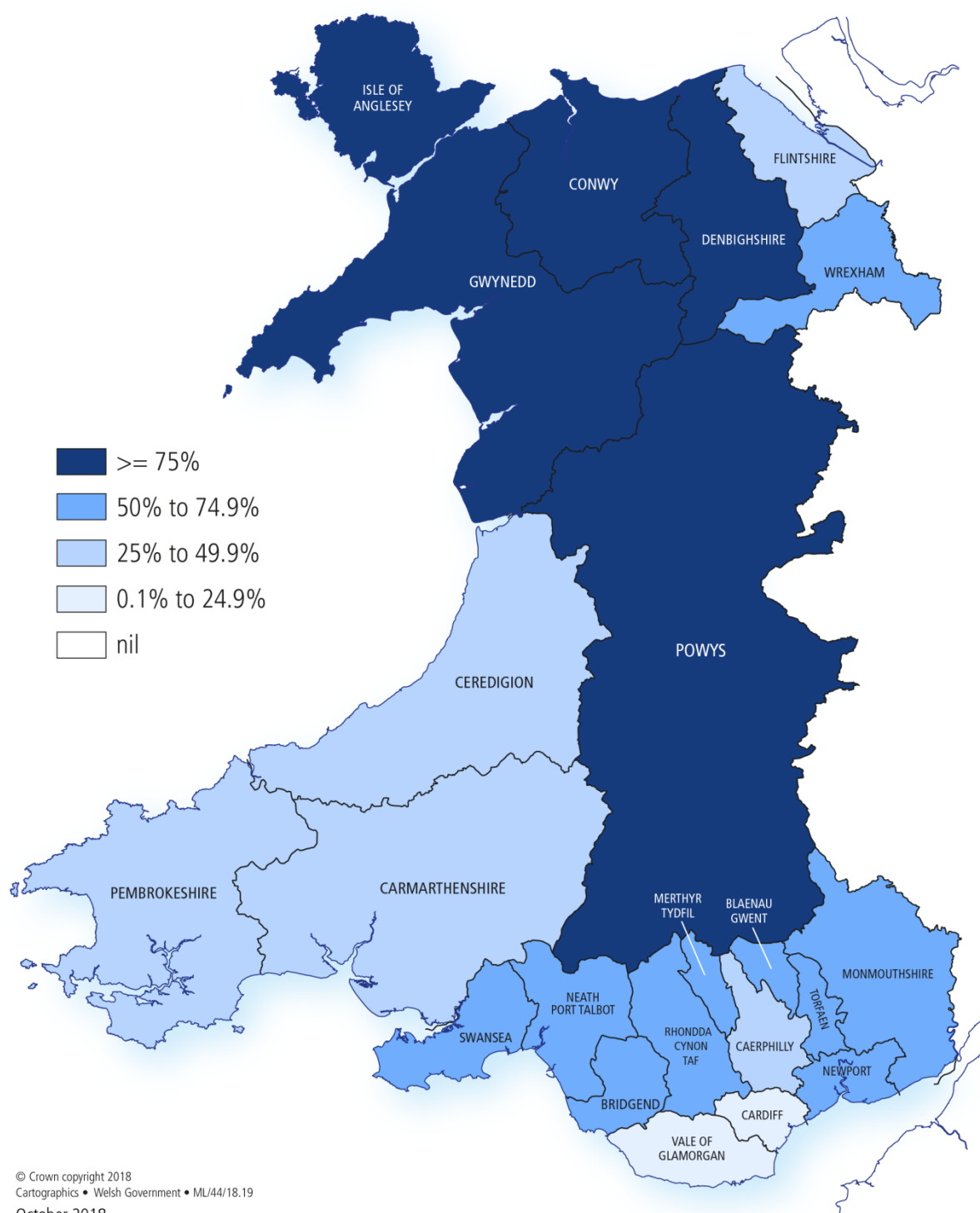
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Map 6: Syringe and needle exchange, 2017-18
(percentage of pharmacies accredited to provide the service, by LA)



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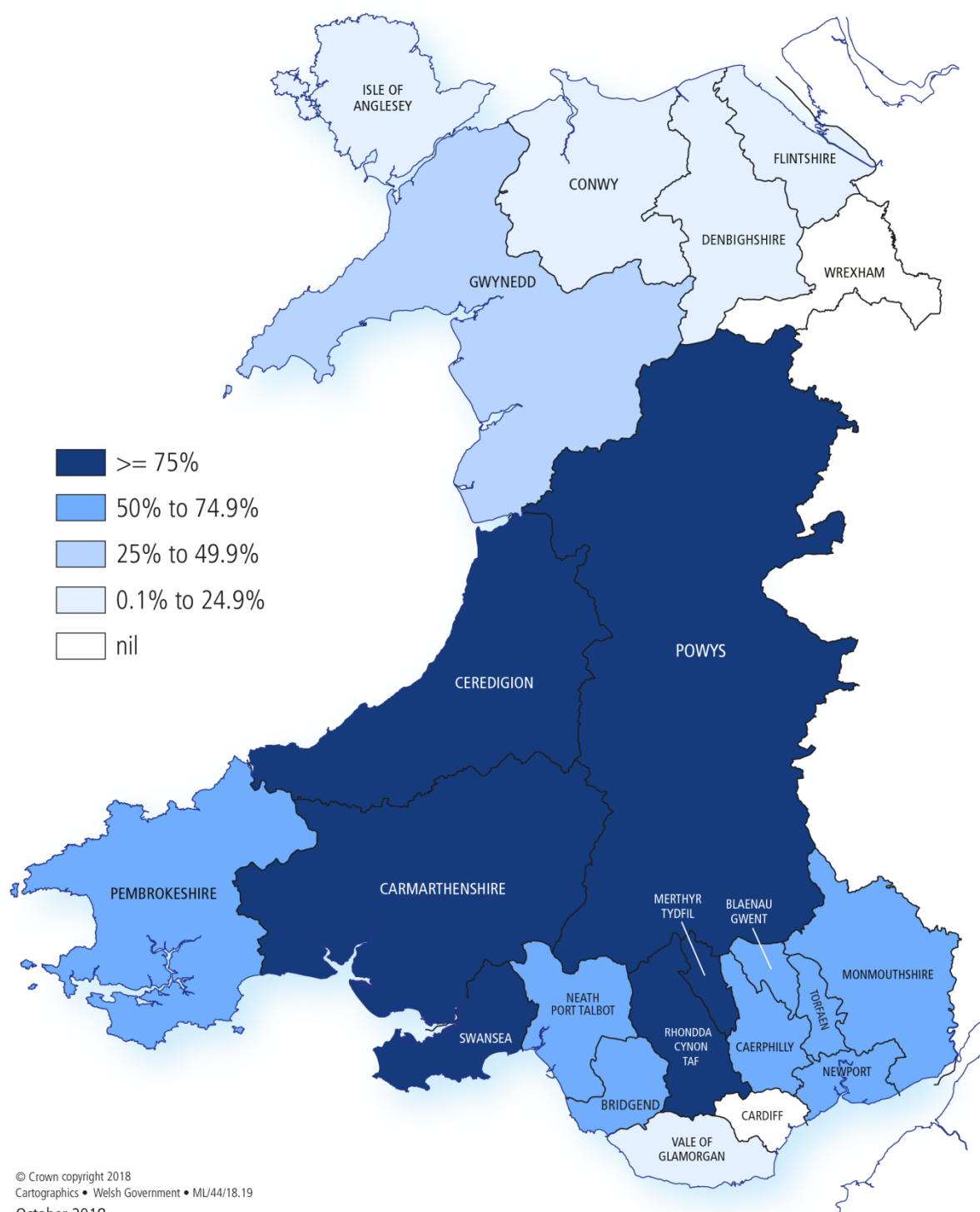
Map 7: Smoking cessation (level 3), 2017-18
(percentage of pharmacies accredited to provide the service, by LA)



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Map 8: Palliative care 'Just In Case' scheme, 2017-18
 (percentage of pharmacies accredited to provide the service, by LA)



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Seasonal flu vaccine (SFV) provided by community pharmacies

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

Year	Number of community pharmacies	Community pharmacies providing an SFV service		SFV claims paid in the year ²	Average SFVs per community pharmacy providing the service
		Number ¹	Percent		
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
2017-18	715	491	68.7%	36,238	74

Source: NHS Wales Shared Services Partnership

Notes:

¹ This number may differ from the number of pharmacies accredited to provide the service.

² This is the number of claims paid in the year, rather than the number of SFVs provided (see page 4).

- 491 community pharmacies provided SFVs during the winter of 2017-18, up from 427 in the previous year.
- For those community pharmacies providing SFV services, the average number of SFVs per community pharmacy was 74 in 2017-18, up from 63 in the previous year.
- While the majority of SFVs are still given at GP surgeries, around 4.5% of the total receiving an SFV in 2017-18 received the vaccination at a community pharmacy, up from less than 2% in 2014-15.
- Public Health Wales publish annual reports on [Seasonal Influenza in Wales](#).

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

Year	Total	Gender		Had SFV in previous year		Previous location	
		Males	Females	Yes	No	GP surgery	Community pharmacy
2013-14	7,861	3,321	4,533	5,901	1,960	5,035	485
2014-15	11,599	4,860	6,727	9,609	1,990	6,191	3,185
2015-16	19,785	8,432	11,324	16,419	3,366	10,642	5,346
2016-17	26,849	11,381	15,449	22,722	4,127	12,701	9,478
2017-18	36,238	15,342	20,869	29,142	7,096	14,884	13,518

Source: NHS Wales Shared Services Partnership

Notes:

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.

Table 6: Seasonal flu vaccine (SFV) – eligibility

Year	65+	Under 65 at risk ¹	Pregnancy	Other ²
2013-14	3,927	2,780	233	921
2014-15	6,521	3,636	248	1,194
2015-16	11,458	5,912	420	1,995
2016-17	15,782	8,154	406	2,505
2017-18	21,702	10,433	636	3,454

Source: NHS Wales Shared Services Partnership

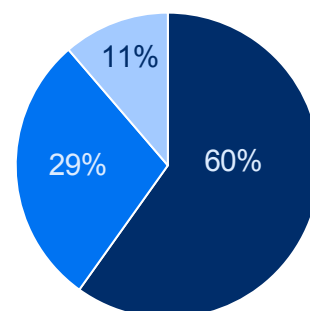
Notes:

¹ Includes chronic heart disease, chronic kidney disease, chronic liver disease, chronic neurological disease, chronic respiratory disease, diabetes and morbidly obese adults.

² Includes carers, immuno-suppressed, designated first aiders, community first responders, people living in long-stay residential care homes or other long-stay care facilities, and specified others.

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.

Chart 4: SFV eligibility, 2017-18

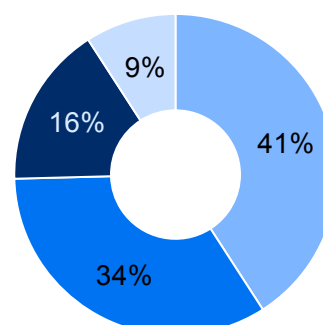
■ Aged 65 or over
■ Under 65 at risk
■ Pregnancy / other

Source: NHS Wales Shared Services Partnership

Table 7: Reasons for having SFV at a community pharmacy, 2017-18

Reason (more than 1 can be selected)	Number
The patient didn't need an appointment	16,373
Convenience of location / opening hours	13,498
Visiting pharmacy for another reason	6,526
Other	3,651

Source: NHS Wales Shared Services Partnership

Chart 5: Reasons for having SFV at a community pharmacy

■ No appointment needed
■ Convenience
■ Visiting pharmacy
■ Other

Source: NHS Wales Shared Services Partnership

Emergency Contraception

Table 8: Community pharmacies providing emergency contraception (EC)

Year	Number of community pharmacies	Community pharmacies who provided EC ¹	EC claims paid in the year ²	Average ECs per community pharmacy providing the service
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
2017-18	715	555	35,882	65

Source: NHS Wales Shared Services Partnership

¹ This number may differ from the number of pharmacies accredited to provide the service.

² This is the number of claims paid in the year, rather than the number of ECs provided (see page 4).

- Even though the number of community pharmacies accredited to provide emergency contraception fell, the number actually providing the service increased from 544 in 2016-17 to 555 in 2017-18.
- For those community pharmacies providing emergency contraception services, the average number of claims per community pharmacy was 65 in 2016-17, down 2 from the previous year.

Table 9: Emergency contraception (EC) – selected characteristics

Year	By reason			By time since unprotected sexual intercourse		
	Failure of contraception method	Missed pill	No contraception used	0-24 hours	25-48 hours	Over 48 hours
2014-15	15,840	2,932	17,672	24,943	9,014	2,487
2015-16	14,377	3,709	16,835	23,098	8,721	3,102
2016-17	14,142	3,818	17,840	23,638	8,989	3,658
2017-18	13,109	3,573	17,845	22,985	8,642	3,956

Source: NHS Wales Shared Services Partnership

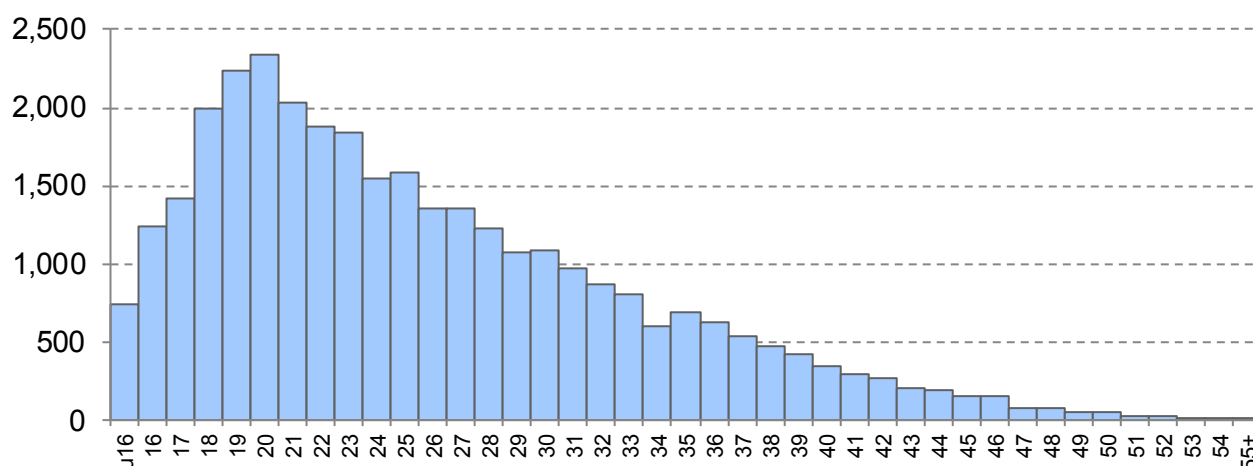
Notes:

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

There are a small number of records with some missing data; not all characteristics are shown and do not necessarily sum to the total.

- More than half (51.7%) of the women requesting emergency contraception during 2017-18 had not used contraception, up from just under 50% in the previous 3 years.
- Failure of contraception method was the reason given by almost 38% of women requesting EC in 2017-18, down by 1.5 percentage points since the previous year.
- In all four years, around two thirds of emergency contraception was provided within 24 hours of unprotected sexual intercourse.

Chart 6: Emergency contraception provided by community pharmacies, by age, 2017-18



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 the first time in 4 years, more 20 year olds were provided with emergency contraception than any other age; the previous 3 years had seen more 19 year olds.
- 70% of the women provided with emergency contraception were aged between 16 and 30.

Table 10: Emergency contraception provided by community pharmacies, by age group

Year	Total	Under								
		16	16-19	20-24	25-29	30-34	35-39	40-44	45-49	50+
2014-15	36,271	977	8,356	10,833	6,946	4,482	2,525	1,386	637	129
2015-16	34,715	865	7,898	10,063	6,891	4,246	2,605	1,398	586	163
2016-17	32,007	812	7,070	9,028	6,367	4,130	2,621	1,285	532	162
2017-18	32,968	745	6,902	9,634	6,594	4,357	2,749	1,311	532	144

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.

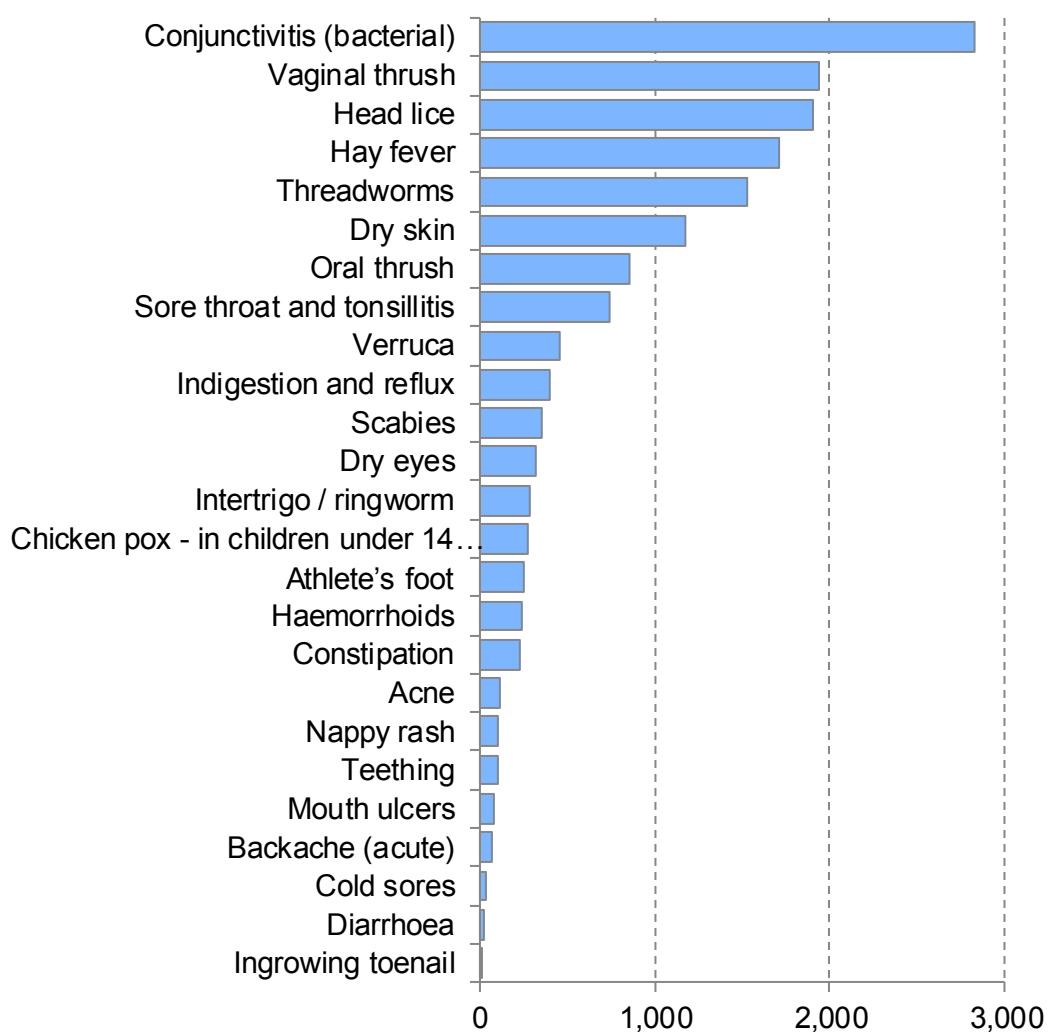
Common Ailments Service (CAS)

The Common Ailments Service was trialled in 32 community pharmacies in Betsi Cadwaladr and Cwm Taf health board areas starting in October 2013. The scheme aims to encourage patients to use their community pharmacy as the first port of call for minor conditions, diverting them away from visiting GP surgeries and A&E departments.

Following the trial, the scheme was opened up to all community pharmacies in Wales during 2016-17, and at 31 March 2018 the service was available at 545 (76%) community pharmacies (up from 255 at 31 March 2017). Eventually, all patients who are registered with a GP in Wales will be able to access pharmacist advice and products for 26 conditions, free-of-charge.

A total of 16,087 consultations were made during 2017-18, up from just under 5,000 the previous year (though more community pharmacies are now part of the scheme).

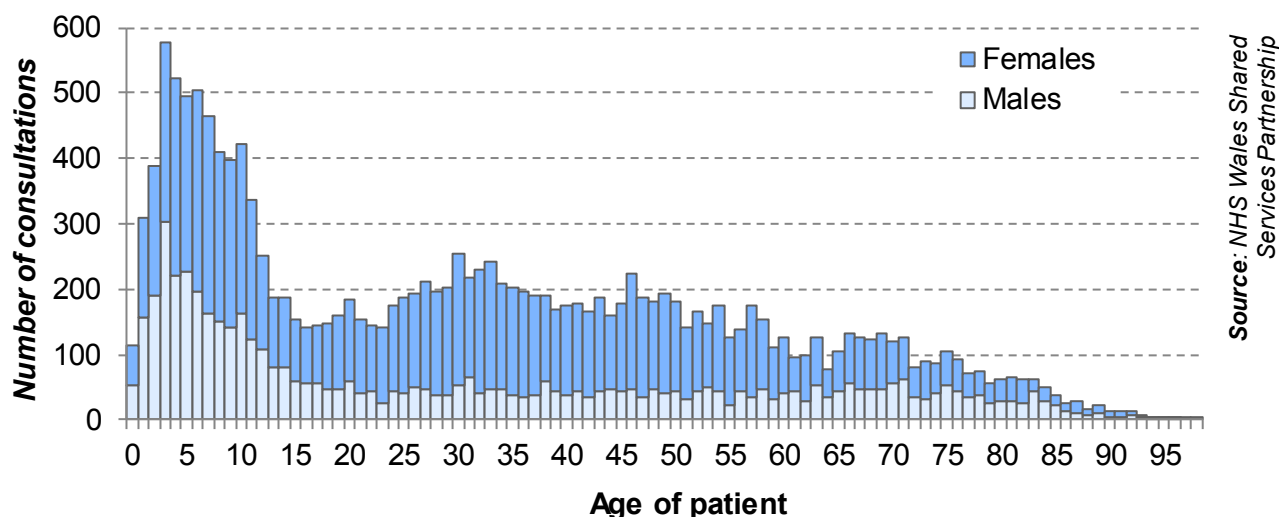
Chart 7: Common Ailments Service - consultations by ailment, 2017-18



No colic consultations in the year

Source: NHS Wales Shared Services Partnership

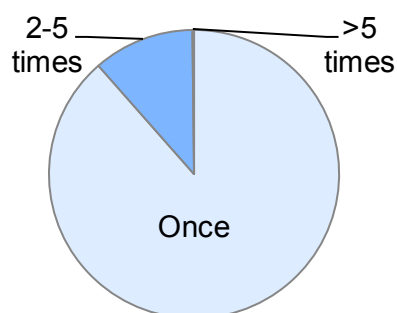
Chart 8: Common Ailments Service – consultations by age and gender, 2017-18



The age of the patients using the service during 2017-18 ranged from babies to the elderly. The highest number of consultations related to patients aged 3 (579, or 3.6%), and more than a third of the total (5,721, or 35.6%) related to children under 16.

In 2017-18, 10,649 (66%) of the consultations related to females, and 5,438 (34%) to males.

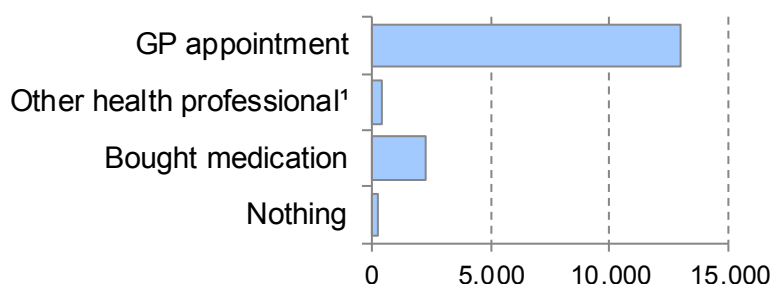
Chart 9: Common Ailments Service – consultations per person, 2017-18



The majority of consultations (12,380 or 88.5%) were made by people using the Common Ailments Service only once in the year, but 1,577 (or 11.3%) of people used the service between 2 and 5 times, and 25 (0.2%) used the service more than 5 times (with the highest number being 11).

Source: NHS Wales Shared Services Partnership

Chart 10: What would you have done if you'd not used the Common Ailments Service, 2017-18



¹ made appointment with nurse, health visitor, dentist etc, attended A&E or rung NHS Direct / 111.

Source: NHS Wales Shared Services Partnership

Had the patient not used the Common Ailments Service, 12,983 (80.7%) people said they would have made a GP appointment, and 483 (3.0%) would have either made an appointment with a nurse, health visitor, dentist or other health professional, visited A&E or out-of-hours, or contacted NHS Direct / 111.

Of the rest, 2,316 (14.4%) would have bought medication and 304 (1.9%) would have done nothing.

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 11: Applications to become a provider of pharmaceutical services, 2017-18

	Applications decided			Withdrawn	Outstanding
	Granted	Refused	Total		
Controlled areas (full applications)	0	0	0	1	0
Non controlled areas					
- full applications	2	2	4	0	1
- minor re-locations	13	0	13	0	0
TOTAL	15	2	17	1	1

Source: NHS Wales Shared Services Partnership

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.

- During 2017-18, six applications were made to local health boards to provide pharmaceutical services, including applications outstanding at the end of the year.
- Of these, 2 were granted, 2 were refused, one was withdrawn and one remained outstanding at the end of the year.
- In addition, 13 applications for minor relocations were decided on by LHBs, all were granted.

Appeals

Table 12: Appeals relating to applications to become a provider of pharmaceutical services, 2017-18

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

Two 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 \(Pharmacy services\)](#), 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 via [NHS Wales](#).

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.

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@gov.wales

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 Statistics](#).

National Statistics status means that official statistics meet the highest standards of trustworthiness, quality and public value.

All official statistics should comply with all aspects of the Code of Practice for Statistics. They are awarded National Statistics status following an assessment by the UK Statistics Authority's regulatory arm. The Authority considers whether the statistics meet the highest standards of Code compliance, including the value they add to public decisions and debate.

It is Welsh Government's responsibility to maintain compliance with the standards expected of National Statistics. If we become concerned about whether these statistics are still meeting the appropriate standards, we will discuss any concerns with the Authority promptly. National Statistics status can be removed at any point when the highest standards are not maintained, and reinstated when standards are restored.

Well-being of Future Generations Act (WFG)

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 the indicators, along with narratives for each of the well-being goals and associated technical information is available in the [Well-being of Wales report](#).

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

The document is available at:

<https://gov.wales/statistics-and-research/community-pharmacy-services/>

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

Next update

The next release covering 2018-19 will be published in October / November 2019.

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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