



**Isle of Wight
Council**

**Isle of Wight Council
Pharmaceutical Needs
Assessment
2025-2028**

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Author: Simon Squibb, Public Health Practitioner (Analyst)
Isle of Wight Public Health Team
simon.squibb@iow.gov.uk

Sponsor: Simon Bryant, Director of Public Health
Hampshire and Isle of Wight Public Health Team
simon.bryant@hants.gov.uk

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1 Executive Summary

A Pharmaceutical Needs Assessment (PNA) evaluates the present and future pharmaceutical requirements of the local community. Health and Wellbeing Boards are legally obligated to create, consult on, and publish a PNA for their respective areas. This PNA reviews the current community pharmacy services on the Isle of Wight. It assesses if they meet the current needs of the population and identifies where services may be required within the three-year timeframe of this report.

This document explains the purpose of the PNA, and the steps involved in its creation. It describes the demographics and health needs of the Isle of Wight's population, including groups that may have specific needs for pharmaceutical services.

The PNA outlines the different types of pharmacies and pharmaceutical services available across the Isle of Wight. It assesses the provision of these services in terms of geographical accessibility and opening hours. This information is then used to conduct an analysis which evaluates current services and anticipates future needs based on expected developments and population changes in the coming years.

The conclusion of this assessment is that the number, distribution and choice of pharmaceutical services meets the current and future needs of the Isle of Wight's population within the lifetime of this PNA. There are no identified needs for additional pharmaceutical services or improvements to current arrangements across the Island. This is based on the following:

- There is a good geographical spread of community pharmacies across the Isle of Wight (section 6)
- Most of the Isle of Wight's resident population live within 5 miles distance of a pharmacy. The population living further than 5 miles from a pharmacy are resident in sparsely populated, rural areas, many of which are served by a dispensing GP practice. (section 6.2)
- Nearly two-thirds of the Island's resident population live within a 15-minute walk of a community pharmacy. Additional provision is available from a dispensing GP practice operating from three sites (section 6.3)
- Examination of provision for areas of expected housing growth suggests that the needs of the associated increases in population can be managed by existing providers (section 6.5)
- There are 19 pharmacies per 100,000 population on the Isle of Wight, lower than the national average of 20.8. However, there is no national expectation on the number of pharmacies per head of population and this needs to be contextualised against the Island's extensive rurality and other forms of pharmacy provision (section 6.4)
- There is good provision of advanced services across the Island (section 4.3)
- There are a variety of locally commissioned and enhanced services delivered across the Isle of Wight (section 4.4 and 4.5)

2 Introduction and background

This section sets out the Isle of Wight context, requirements for PNAs, structure of the PNA and the role of various organisations.

2.1 Isle of Wight Context

The Isle of Wight is the largest island in England. It is located off the south coast of England, in the English Channel, and is separated from the mainland county of Hampshire by the Solent. The population of the Island in 2025 is estimated to be just under 143,500 people and around 73,300 households, according to Hampshire County Council Demography Team's 2023-based population forecasts.

Over the fourteen-year period between the 2011 Census and 2025, the Island's population has increased by 3.5%. In absolute numbers this equates to an increase of just over 5,000 people. The population of the Island is expected to increase by 2.3% from 2025 to 2030, this equates to an increase of just over 3,350. The Isle of Wight population is ageing with the largest percentage increases projected to occur amongst the older population, those aged 80 and over. This ageing population will have an increasing impact on the demand for health and social care services in the area.

Overall, the Island has an older population, with a higher proportion of the population aged 65 years and over than England. Older people typically require more healthcare services, including pharmacies, due to a higher prevalence of chronic diseases. As a result, both the absolute number and the proportion of older people living on the Island have significant implications for the planning and provision of pharmaceutical services.

The Isle of Wight is covered by the NHS Hampshire and Isle of Wight Integrated Care Board (ICB). ICBs are NHS organisations responsible for planning health services for the local population. They manage the NHS budget and work with local providers of NHS services, such as hospitals and GP practices. These organisations now have delegated responsibility for the commissioning and management of pharmacy services for the local area.

2.2 Definition and Purpose of the Pharmaceutical Needs Assessment

A PNA is a statement of the pharmaceutical needs of the local population within the local area. Its goal is to determine whether pharmacy services are currently located appropriately to meet the needs of the local communities they serve and to assess whether these services will continue to meet those needs within the three-year timeframe of this report.

The NHS Act 2006, amended by the Health and Social Act 2012, sets out the requirements for Health and Wellbeing Boards (HWBs) to develop and update PNAs. This assessment should determine whether there are any gaps in provision, or if these are likely to occur in

the future. The HWB should then publish a statement of its findings including recommendations as to how any gaps identified should be filled¹.

Within the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 the minimum information that must be contained within a PNA is set out and it also outlines the processes that must be followed in its development².

The primary purpose of the PNA is to be used to make market entry decisions. From July 2022, the Hampshire and Isle of Wight ICB became responsible for managing the Community Pharmacy Contractual Framework (CPCF) on the Isle of Wight. The ICB will determine applications for pharmacy contracts, monitor these contracts and ensure appropriate availability and access to pharmaceutical services. The ICB now has delegated responsibility for controlling entry to the pharmaceutical list. It will use the PNA when applications are received to enter or amend the pharmaceutical list within the Isle of Wight HWB area. It may also be used by the local authority and ICB when commissioning services from pharmacies and dispensing appliance contractors, ensuring that services are targeted to areas of need.

This PNA supersedes the previous assessment undertaken by Isle of Wight Public Health team in 2022.

2.3 Health and Wellbeing Board duties in respect of the PNA

Since April 2013, HWBs have been responsible for developing and publishing PNAs. With the transfer of delegated responsibility for pharmacy services to ICBs in April 2022, the responsibility for using PNAs as the basis for determining market entry to a pharmaceutical list was also transferred to the ICB³.

The HWB must publish revised statements every three years. It should also publish a new PNA sooner if there are significant changes in the need for pharmaceutical services. These changes could be due to shifts in population size, demographics, or health and wellbeing risks.

It should also produce supplementary statements which explain changes to the availability of pharmaceutical services in certain circumstances.

2.4 Structure of the PNA

The PNA defines the different types of pharmaceutical services and the provision of these across the Island. Access is then considered in terms of both opening hours and

¹ [National Health Service Act 2006 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2006/43/section/176)

² [The National Health Service \(Pharmaceutical and Local Pharmaceutical Services\) Regulations 2013 \(legislation.gov.uk\)](https://www.legislation.gov.uk/uksi/2013/1013/section/2)

³ [Health and Social Care Act 2012 \(legislation.gov.uk\)](https://www.legislation.gov.uk/ukpga/2012/7/section/176)

geographical access. Evaluating service quality aspects, such as staff and medicine availability, staff expertise, and waiting times fall outside of the scope of the PNA.

The need for pharmaceutical services across the Isle of Wight is then assessed, using a range of data from the Joint Strategic Needs Assessment (JSNA) and other sources. This covers demographic, economic, and health data, including known housing developments or regeneration projects that are current or will occur within the PNA's three-year timeframe.

A summary of this information is included in the main document. Further analysis is contained within a separate appendix. This provides an examination of the health needs of the Island including the needs of population groups with protected characteristics and Inclusion Health Groups.

All the information gathered in the PNA contributes to a 'gap analysis'. This covers current provision of pharmaceutical services and how this is likely to change in the future, based on anticipated levels of housing development and associated population growth.

2.5 Maps within the PNA

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3 Development of the PNA

This section provides an overview of the processes undertaken to develop the PNA, the community pharmacy context, information accessed and analysis criteria.

3.1 Local development of the PNA

The PNA has been undertaken in line with the requirements of the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations and the latest guidance published in the information pack for local authority HWBs in October 2021⁴.

It has been in development since August 2024. The document has been written with assistance from partners in neighbouring local authorities, NHS England, and Community Pharmacy Hampshire & Isle of Wight, which is gratefully acknowledged.

3.2 Governance

As recommended in the PNA information pack, a steering group was established to support the PNA process on the Isle of Wight and to oversee the production of the document in accordance with the regulations. The group has representation from key stakeholders including Community Pharmacy South Central, NHS Hampshire and Isle of Wight ICB, and NHS South East Pharmacy Optometry and Dentistry Commissioning Hub (Hosted by NHS Frimley ICB).

3.3 Community pharmacy context

Community pharmacies are part of NHS service provision and play a crucial and extensive role in the health and social care system of the country. Each day about 1.6 million people visit a pharmacy in England. Community pharmacies are situated in high street locations, neighbourhood centres, supermarkets and in the heart of the most deprived communities. Many are open long hours when other healthcare professionals are unavailable.

The traditional role of the community pharmacist as the healthcare professional who dispenses prescriptions written by doctors has changed. In recent years, community pharmacists have been developing clinical services in addition to the traditional dispensing role to allow better integration and team working with the rest of the NHS.

There have been major changes in policy in community pharmacy since 2022 including the change to commissioning responsibilities for pharmaceutical provision from NHS England to ICBs and the launch of Pharmacy First, a consultation service which enables patients to be referred into community pharmacy for a minor illness or an urgent repeat medicine supply.

⁴ [Pharmaceutical needs assessments: Information pack for local authority health and wellbeing boards \(publishing.service.gov.uk\)](https://publishing.service.gov.uk)

3.4 Pharmaceutical service information

The South East Pharmacy, Optometry and Dentistry Commissioning Hub provided data on pharmaceutical provision locally, including opening hours, addresses and the delivery of advanced services. Further national information was sourced from the NHS Business Services Authority website. Data related to local services commissioned by Public Health were sourced from within the council.

Advice and expertise have also been provided by NHS England, Community Pharmacy Hampshire & Isle of Wight, Isle of Wight Council Planning Services, and Isle of Wight Public Health.

3.5 Gathering of health and demographic data including locality definition

The JSNA for the Isle of Wight has been used to produce an overview of the demography and health needs of the Island. Other sources of information including data related to new housing developments and associated population growth have been supplied by other departments within the council.

The PNA guidance states that sub localities of the health and wellbeing board may be considered to give a more detailed assessment of local pharmaceutical needs. However, given the relatively small geography and population of the Isle of Wight, the area will be considered as a whole.

3.6 Analysis and drafting

Health, demographic, pharmaceutical service, and other relevant information was collated to assess how the current provision of pharmaceutical services meets the population's health needs. Other groups with specific needs for pharmaceutical services resident within the Isle of Wight were identified in the PNA process and are discussed further in Appendix 1.

National and local statistics have been used to determine the provision of pharmaceutical services across the Island currently, and to examine any gaps in the future delivery of these services.

Guidance from the Department of Health and Social Care (DHSC) suggests that there are three levels where gaps may exist:⁵

- Geographical gaps in the location of pharmacy premises,
- Geographical gaps in the provision of services,

⁵ [Pharmaceutical needs assessments: Information pack for local authority health and wellbeing boards](#)

- Gaps in the day or times at which services are provided.

The Steering Group agreed that living within a 1-mile (1.6km) travel distance would be a key criterion for the gap analysis. Considering the rural nature of some parts of the Isle of Wight, an additional travel distance of 5 miles and a walking time of 15 minutes were also included. The analysis also considered opening hours, and the range of services provided.

Following the completion of this analysis, a draft consultation document was completed in line with national guidance.

3.7 Contractor engagement

All 27 community pharmacies on the Isle of Wight were invited to complete a brief questionnaire about their services to inform the development of the PNA. A total of eight responses were received, a response rate of 30%.

3.8 Consultation

The HWB consulted with relevant organisations about the contents of the PNA in line with statutory requirements. The consultation will run for a period of 60 days from 20 January 2025.

3.9 Review and sign-off

The document was then reviewed by the Director of Public Health and the Public Health Senior Management Team. The final report was approved for publishing by the HWB in July 2025 (Date to be confirmed).

4 Current pharmaceutical services

This section sets out information on community pharmacy service provision.

4.1 Definition of pharmaceutical services

Pharmaceutical services are a collective term for a range of services commissioned by ICBs. In relation to PNAs it includes:

- Essential services
- Advanced services
- Enhanced services
- Local pharmaceutical services (LPS) contracts that are the equivalent of essential, advanced, and enhanced services
- Locally commissioned services and other non-NHS services

A description of the different types of pharmacies, the pharmaceutical services provided and details of the current provision of these across the Island follows.

4.2 Essential services

All pharmacies, including distance selling premises, with NHS contracts are required to provide essential services, although distance selling premises must not provide these face to face. As at September 2024, there are nine essential services. These include:

- dispensing of prescriptions – paper and electronic
- dispensing of repeat prescriptions
- disposal of unwanted medicines returned to the pharmacy
- promotion of healthy lifestyles and health campaigns
- signposting to other health or social care services
- support for self-care
- provision of a discharge medicines service
- dispensing appliances
- clinical governance

4.2.1 Dispensing medicines and repeat dispensing

In 2023, just over 3.3 million items were prescribed by Isle of Wight GPs. These were dispensed by organisations on the Isle of Wight and the mainland at a total of over 1,440 sites. Of these items, 95% were dispensed by just 30 contractors.

Just over 86% of items prescribed by Isle of Wight GPs were dispensed by community pharmacies based on the Island. The local dispensing practice dispensed 4.6% of the total, and 5.6% of items were dispensed by distance selling premises on the mainland. The

remaining items were dispensed by community pharmacies and dispensing practices on the mainland.

At least two thirds of all prescriptions generated in primary care are for patients needing repeat supplies of regular medicines. Patients using the service obtain repeat supplies of NHS prescriptions without the need for their GP practice to issue a prescription each time a supply is required. The service was designed to save GP practices and patients time, and improve convenience and access to prescriptions, by allowing community pharmacy teams to take a more active role in the process of safe supply of patients' regular prescriptions.

Under the repeat dispensing service pharmacy teams will:

- Dispense repeat dispensing prescriptions issued by a general practice
- Ensure that each repeat supply is required
- Seek to ascertain that there is no reason why the patient should be referred back to their GP⁶.

4.2.2 Disposal of unwanted medicine

Community pharmacy owners are obliged to accept back unwanted medicines from patients. There is no data on this service.

4.2.3 Public Health (Promotion of Healthy Lifestyles)

All pharmacies provide the essential service promoting healthy lifestyles, which includes providing advice to people who appear to have diabetes, be at risk of coronary heart disease (especially those with high blood pressure), smoke, or are overweight, and all will participate in up to six health campaigns when requested by NHS England.

Through the Healthy Living Pharmacy (HLP) Framework, all community pharmacies on the Island proactively deliver a wide range of interventions to support people's health and wellbeing and are 'Healthy Living Pharmacies' in line with the change in the NHS contractual framework.

4.2.4 Signposting customers to appropriate services

All pharmacies should provide a sign-posting service for people who require advice, support, or treatment that the pharmacy cannot provide, and direct to another provider of health or social care, where the pharmacy has that information.

4.2.5 Support for self-care

All pharmacies should provide support for self-care for minor ailments and common conditions, which may include the provision of advice or the sale of medicines where appropriate.

⁶ [Repeat Dispensing and eRD - Community Pharmacy England](#)

4.2.6. Discharge Medicines Service

This service was introduced in 2021, becoming part of the CPCF. Under this service, a pharmacist will review a person's medicines when they are discharged from hospital and ensure that any changes are actioned accordingly. It aims to reduce the risk of medication problems on discharge, ensuring patient safety, improved outcomes, and readmission reduction⁷.

4.2.7. Dispensing appliances

Dispensing appliance contractors have a narrower range of services that they must provide. These include:

- dispensing of prescriptions – paper and electronic
- dispensing of repeat prescriptions
- delivery of certain appliances
- a supply of wipes and bags
- signposting.

They can only dispense prescriptions for appliances and not for drugs. Dispensing appliance contractors are not required to have a pharmacist, and their premises do not have to be registered with the General Pharmaceutical Council. These contractors tend to operate remotely, receiving prescriptions via the electronic prescription service or through the post.

There are no dispensing appliance contractors located on the Isle of Wight as at September 2024.

Island residents may choose to have their appliances dispensed from a dispensing appliance contractor anywhere in the country. A large proportion of patients who are regular users of appliances will have them delivered.

4.2.8. Clinical governance

Pharmacies are required to maintain a record of all medicines dispensed, and also keep records of any interventions made which they judge to be significant.

4.3 Advanced services

Advanced services are those services that pharmacy and dispensing appliance contractors may choose to provide if they meet the required standards. As at September 2024, the following services may be provided by Island pharmacies:

- New medicine service
- Community pharmacy seasonal influenza vaccination

⁷ [B0366-discharge-medicines-toolkit.pdf \(england.nhs.uk\)](#)

- Community pharmacy hypertension case-finding service
- Community pharmacy smoking cessation service

New advanced services added to the regulations since the last PNA:

- Pharmacy First (replaces and expands on the community pharmacist consultation service)
- Community pharmacy contraception service
- COVID-19 lateral flow device tests supply service.

Two further advanced services that pharmacies and dispensing appliance contracts may choose to provide include:

- Stoma appliance customisation
- Appliance use reviews

Advanced services commissioned nationally but available on the Isle of Wight are as follows:

4.3.1 New Medicine Service (NMS)

The new medicine service provides support for people with long-term conditions who have been newly prescribed a medicine. The aim of the service is to help improve medicines adherence and enhance self-management. Non-adherence to appropriately prescribed medicine is a health problem of major relevance to the NHS. It has been suggested that increasing the effectiveness of adherence to interventions may have a far greater impact on the health of the population than any improvement in specific medical treatments. Research has shown that pharmacists can successfully intervene when a medicine is newly prescribed, with repeated follow up in the short term, to increase effective medicine taking for the treatment of a long-term condition.

From 1 September 2021, the following conditions are covered by the service:

- Asthma and COPD
- Diabetes (Type 2)
- Hypertension
- Hypercholesterolaemia
- Osteoporosis
- Gout
- Glaucoma
- Epilepsy
- Parkinson's disease
- Urinary incontinence/retention

- Heart failure
- Acute coronary syndromes
- Atrial fibrillation
- Long term risks of venous thromboembolism/embolism
- Stroke / transient ischaemic attack
- Coronary heart disease

As at September 2024, there were 24 pharmacies on the Isle of Wight providing a NMS, providing good coverage across the whole population and a total activity of almost 12,500 in 2023/24.

4.3.2 Community pharmacy seasonal influenza vaccination

Community pharmacy has been providing flu vaccinations under a nationally commissioned service since September 2015. Each year from autumn through to March, the NHS runs a seasonal flu vaccination campaign. It aims to vaccinate all patients who are at risk of developing more serious complications from the virus.

From September 2023 to March 2024, NHS England data show that 22 of the 27 pharmacies on the Isle of Wight dispensed flu vaccinations. A total of almost 11,900 vaccinations were delivered across the Island over the flu vaccination period.

4.3.3 Community pharmacy hypertension case-finding service

The Hypertension Case-Finding Service was commissioned as an advanced service from 1 October 2021. In public-facing communications, the service is described as the NHS Blood Pressure Check Service. From 1 December 2023, the service can be provided by suitably trained and competent pharmacy staff; previously, only pharmacists and pharmacy technicians could provide the service. The service aims to:

- Identify people aged 40 years or older, or at the discretion of pharmacy staff, people under the age of 40, with high blood pressure (who have previously not had a confirmed diagnosis of hypertension), and to refer them to general practice to confirm diagnosis and for appropriate management.
- At the request of a general practice, undertake ad hoc clinic and ambulatory blood pressure measurements. These requests can be in relation to people either with or without a diagnosis of hypertension.
- Provide another opportunity to promote healthy behaviours to patients.

As at September 2024, 23 of the 27 pharmacies on the Island had signed up to provide a Hypertension Case-Finding Service. These pharmacies delivered this service to over 1,250 patients in 2023/24.

4.3.4 Community pharmacy smoking cessation advanced service

The Smoking Cessation Advanced Service is for patients who started their stop-smoking journey in hospital. This service allows NHS trusts to refer patients to a pharmacy of their choice so that they can continue receiving treatment, advice, and support with their attempt to quit smoking when they are discharged. The service can only be provided by a pharmacist or pharmacy technician. Nine pharmacies on the Island are signed up to provide the Smoking Cessation Advanced Service.

4.3.5 Pharmacy First

The Pharmacy First service, which commenced on 31 January 2024, is a crucial first step in recognising and properly funding the enormous amount of healthcare advice that community pharmacies provide to the public every day, and in establishing and funding community pharmacy as the first port of call for healthcare advice. The service involves pharmacists providing advice and NHS-funded treatment, where clinically appropriate, for the minor illnesses listed below, or an urgent repeat medicine supply, easing pressure on GP services.

The Pharmacy First advanced service includes these seven common conditions:

- Sinusitis (12 years and over)
- Sore throat (5 years and over)
- Acute otitis media (earache) (1 to 17 years)
- Infected insect bite (1 year and over)
- Impetigo (1 year and over)
- Shingles (18 years and over)
- Uncomplicated urinary tract infections (Women 16 to 64 years)

The service also incorporates the elements of the now replaced Community Pharmacist Consultation Service (CPCS), i.e. minor illness consultations with a pharmacist.

As at September 2024, 26 of the 27 pharmacies on the Isle of Wight provided the Pharmacy First service. It is expected that this service will continue to develop over the lifetime of this PNA.

4.3.6 Community pharmacy contraception service (PCS)

From Spring 2023, pharmacies have had the option to register for the NHS Pharmacy Contraception advanced service for the ongoing supply of oral contraception. All community pharmacists offering the service will have demonstrated competence in the specific skills and knowledge required. The service is an integrated pathway between existing services and community pharmacies to enable greater choice and to widen access to service and support for high-risk communities and vulnerable patients. From 1 December 2023, the service expanded to give people the option of being able to have a confidential consultation

with a community pharmacist to request a prescription of the contraceptive pill for the first time directly from their pharmacist, rather than from a GP or sexual health clinic. As at September 2024, 23 pharmacies on the Island are signed up to provide the pharmacy contraception service.

4.3.7 COVID-19 lateral flow device tests supply service

The NHS offers COVID-19 treatment to people with COVID-19 who are at risk of becoming seriously ill. To access treatment, eligible patients first need to be able to test themselves by using a lateral flow device (LFD) test if they develop symptoms suggestive of COVID-19. It is important that these patients have LFD tests at their home in advance of developing symptoms, so they can undertake a test promptly.

The LFD tests supply service for patients potentially eligible for COVID-19 treatments (LFD service) was commissioned as an advanced service from 06 November 2023. In March 2024 it was announced that the service would continue to be commissioned in 2024/25 and that additional patient groups became eligible to access the service. In late May 2024, the service specification was updated to make the eligibility criteria section clearer to understand, as well as emphasising that patients eligible for the service do not need to have symptoms of COVID-19 to obtain a free box of LFD test kits under the service.

As at September 2024, 23 of the 27 pharmacies are signed up to provide this service.

4.3.8 Stoma Appliance Customisation (SAC)

The service involves the customisation of a quantity of more than one stoma appliance, based on the patient's measurements or a template. The aim of the service is to ensure proper use and comfortable fitting of the stoma appliance and to improve the duration of usage, thereby reducing waste. This service is provided predominantly by dispensing appliance contractors and as a result there is no activity recorded for Isle of Wight pharmacies.

4.3.9 Appliance Use Reviews

The aim of appliance use reviews is to improve the patient's knowledge and use of any specified appliance. This service is also provided predominantly by dispensing appliance contractors and as a result there is no activity recorded for Isle of Wight contractors.

4.4 National Enhanced Services (NES)

There is one nationally specified enhanced service – the COVID-19 vaccination service. During the COVID-19 pandemic, over 1,500 community pharmacy sites were involved in vaccinating patients and health and care workers under a Local Enhanced Service against coronavirus, alongside vaccination centres, hospitals and Primary Care Network (PCN) sites.

In December 2020, the vaccination service was first commissioned as a Local Enhanced Service by NHS England regional teams in consultation with Local Pharmaceutical Committees. It was commissioned where there was a local need, for example where there was a gap in service provision or a need for additional capacity, and where pharmacy owners were able to meet the key designation requirements. Then in December 2021, provisions were made within the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 for a new type of Enhanced service, the NES. Under this type of service, NHS England commissions an Enhanced service that is nationally specified. This requires NHS England to consult with Community Pharmacy England on matters relating to the service specification and remuneration for the service. Phase 5 of the vaccination service, the Autumn 2022, Spring 2023, Autumn/Winter 2023/24 and Spring 2024 booster programmes were all commissioned as an NES.

4.5 Local Pharmaceutical Services

A local pharmaceutical services (LPS) contract allows ICBs to commission services that are tailored to meet specific local requirements. It provides flexibility to include within a locally negotiated contract a broader or narrower range of services than is possible under national pharmacy arrangements set out in the 2013 regulations. The contract must include an element of dispensing as a minimum.

As at September 2024, there are currently no LPS on the Isle of Wight.

4.6 Locally commissioned services and other non-NHS services

Locally commissioned community pharmacy services can be contracted via several different routes and by different commissioners, including local authorities, ICBs and local NHS England teams.

Other non-NHS commissioned services are also provided by community pharmacy, and although not defined as pharmaceutical services, they do add context to the overall provision on the Island. These are services that the health and wellbeing board is satisfied have secured improvements, or better access, to pharmaceutical services. Such services commissioned by Isle of Wight Public Health are detailed below.

4.6.1 Emergency hormonal contraception service

Local authorities are mandated to provide or secure the provision of open access sexual health services which includes access to contraception over and above contraceptive services provided as an “additional service” under the GP contract. The emergency hormonal contraceptive service works to improve sexual health by:

- Providing good local access to emergency contraception and sexual health advice for women who have had unprotected sex to reduce unintended pregnancy.

- Increasing knowledge, especially among young people, of the availability and effectiveness of emergency contraception.
- Referring clients, especially those from groups with poorer sexual health outcomes, into mainstream contraceptive services for regular contraception advice and services.
- Increasing the knowledge of risks associated with sexually transmitted infections (STIs) and signposting young people under the age of 25 to local sexual health services, including the availability of STI home-sampling services and free condoms.
- Strengthening the local network of contraceptive and sexual health services to provide improved access to local services.

As at September 2024, 24 pharmacies are signed up to providing emergency hormonal contraception. There may be fluctuations in the number of pharmacies that provide this service due to the availability of trained pharmacists, which can be affected by leave arrangements or changes in staff.

4.6.2 Supervised Administration Programme (SAP)

The SAP programme is currently delivered through community pharmacies. This requires the pharmacist to supervise the consumption of oral methadone, buprenorphine and other drugs that may be used in the management of drug dependency/misuse; ensuring that the dose has been administered to the patient where the prescriber has indicated that supervised consumption is appropriate. Pharmacists will also provide support to service users collecting their dispensed prescriptions for methadone and other drugs used in the management of drug misuse/dependency where supervised consumption is not indicated.

As at September 2024, 23 of 27 pharmacies delivered the SAP programme.

4.6.3 Needle Exchange

Community pharmacies offer a needle exchange service for injecting drug users. A targeted approach to harm minimisation is taken.

As at September 2024, 11 of 27 pharmacies on the Island offered a needle exchange service.

4.6.4 Smoking Cessation Service

The advanced service referred to in section 4.3.4 above relates to NHS patients in hospital who decide they wish to continue their smoking cessation once they leave hospital. However, this local service offered in community pharmacies, and commissioned by Isle of Wight Public Health, is open to anyone who wishes to stop smoking (not just those who start their stop smoking journey in hospital).

As at September 2024, 21 of 27 pharmacies on the Island offer this service.

4.7 Local health services

Other NHS services can affect the need for pharmaceutical services, including hospital and community services.

On the Island the Isle of Wight NHS Trust is an acute and ambulance health care provider.

St Mary's Hospital in Newport is the main base for delivering acute services with 266 beds and handling 27,000 admissions each year. These include the Emergency Department (A&E), the Urgent Treatment Centre (by referral only), emergency medicine and surgery, planned surgery, intensive care, comprehensive maternity, Special Care Baby Unit (SCBU), and paediatric services.

A hospital pharmacy operates from St Mary's Hospital and provides a prescription collection service for patients and an over-the-counter medicine service for the general public. Any other services provided do not form part of this assessment.

The Island's ambulance service encompasses the Clinical Co-ordination Centre, Frontline Operations, Patient Transport Service, Education and Training, and Emergency Preparedness, Resilience and Response.

The Hampshire and Isle of Wight Healthcare NHS Trust provides a wide range of community, mental health, and learning disability services across the Isle of Wight.

NHS Hampshire and Isle of Wight ICB has 12 GP practices located on the Island set across 20 sites. As at September 2024, there were 10 NHS dental practices on the Isle of Wight, and a further 19 private dental practices⁸.

⁸ [Dentists near PO30 - NHS \(www.nhs.uk\)](https://www.nhs.uk)

5 Current pharmaceutical access and opening hours

This section presents an overview of the type of pharmacy service providers and information on opening hours.

5.1 Pharmacy contractors

As at September 2024⁹, there are 27 pharmacy contractors on the Isle of Wight. These are all pharmacy contractors operating on standard 40-hour contracts. There are no distance selling pharmacies located on the Island, but residents can access distance selling pharmacies across the country. As at September 2024, there was one dispensing practice on the Isle of Wight.

The 10,054 community pharmacies operating nationally equate to 20.8 pharmacies per 100,000 population (2023/24). On the Isle of Wight, provision is slightly lower at 19.0 pharmacies per 100,000 population. However, there is no national expectation on the number of pharmacies per head of population and it should be noted that these crude ratios do not consider the size or staffing levels of the pharmacies included within them or the types of other pharmaceutical provision. The number of pharmacies per head of resident population is discussed further in Section 6.4 of this document.

Following the closure of the Island's sole 100-hour pharmacy in June 2023, there have been no pharmacies on the Isle of Wight open after 6.30pm on weekday evenings. However, starting from 2 September 2024, Gibbs & Gurnell Pharmacy in Ryde began opening until 8.30pm on weekdays (except for bank holidays) following a commissioning process by Hampshire and Isle of Wight ICB. This service has been commissioned for 12 months, with reviews at six and nine months.

5.2 Opening hours

Pharmacies and dispensing appliance contractors have two different types of opening hours – core and supplementary. Most pharmacies are required to open for 40 core contractual hours. However, some pharmacies, known as 100-hour pharmacies, operated under the former 100-hour contract that was intended to improve access to NHS pharmacy services outside of normal hours.

Regulatory changes were introduced by the DHSC in April 2023, in response to increased temporary closures of pharmacies in England and related pressures. These included a notification procedure for introducing or changing rest breaks; a requirement to have a business continuity plan dealing with temporary closures; provision for local hours plans to be agreed by the ICB with temporarily reduced opening hours for participating pharmacies; a 'notification' procedure for 100-hour pharmacies to reduce their total weekly hours to no

⁹ NHS England is responsible for preparing, maintaining, and publishing a list of pharmacies on the HWB Pharmaceutical List. There is a separate list for dispensing practices.

less than 72 hours, subject to various requirements; and other regulatory amendments. Pharmacies that opened under the previous exemption to the normal control of entry process based on the provision of 100 hours, will still be shown as '100-hour' pharmacies. These pharmacies are on amended 100-hour contracts but can apply to operate down to 72 contracted hours under the new regulations.

All pharmacies may open for additional supplementary hours. A pharmacy cannot amend its core contractual hours without the consent of NHS England. However, it may amend its supplementary hours, provided it gives five weeks' notice of any decrease in opening hours to the ICB.

The information in the following sections is based on actual opening hours as at September 2024, including any supplementary hours.

5.2.1 100-hour pharmacies

There are no 100-hour pharmacies on the Isle of Wight. The sole 100-hour pharmacy previously located in Newport closed in June 2023.

5.2.2 Early morning opening hours – weekdays

As at September 2024, six pharmacies across the Isle of Wight are open before 9am on weekdays. There is a fair geographical spread across the Island. Most pharmacies opening before 9am on weekdays are located in urban areas, see Map 1. One of these pharmacies is located in the town of Newport, two in Ryde to the North East, one in Shanklin and one in Sandown, both on the South East coast and one in Yarmouth to the West of the Island.

Map 1 - Map showing geographical location of pharmacies opening before 9am on weekdays as at September 2024



5.2.3 Late evening opening hours – weekdays

As at September 2024, one pharmacy on the Isle of Wight is open after 6:30pm during the week. This pharmacy, in Ryde town, is open until 8:30pm on weekdays. This extended-hours service has been commissioned by Hampshire and Isle of Wight ICB for 12 months, with a review at six and nine months. The pharmacy will offer all essential, advanced, and enhanced services during the extended opening period, including Pharmacy First and the Pharmacy Contraception Service.

5.2.4 Saturday opening

As at September 2024, 22 pharmacies across the Isle of Wight are open for at least part of Saturday. At 80%, this represents the majority of the Island's 27 pharmacies. There is good geographical spread across the Island, see Map 2.

Map 2 - Map of pharmacy locations opening for at least part of Saturday as at September 2024



5.2.5 Sunday opening

As at September 2024, three pharmacies (11%) across the Isle of Wight are open for at least part of Sunday. There is fair geographical spread across the Island, with one pharmacy located centrally in Newport, one to the East of the Island in Ryde, and a third to the west in Yarmouth, see Map 3.

Map 3 - Map showing the location of pharmacies opening on Sundays as at September 2024



5.2.6 Bank holiday opening

Community pharmacies are not required to open on bank holidays unless directed to do so. A pharmacy will be treated as having been open for its usual hours on that day for the purpose of counting core contractual hours. Therefore, the pharmacy can be closed on bank holidays without giving notice or applying to change their core hours.

The ICB can commission an out of hours enhanced service to cover public holidays. For most pharmacies, participation in such arrangements is voluntary.

5.3 Delivery services

Many pharmacies provide a delivery service. This may be provided for free or charged for. As these are private services, there is no data available to ascertain the level of provision. The information received via the contractor questionnaire showed that, of the eight community pharmacies who responded:

- Six collected prescriptions from GP practices
- Four deliver dispensed medicines free of charge on request
- Three deliver dispensed medicines with a charge

5.4 Accessibility and languages spoken by staff

Of the eight community pharmacies who responded to the questionnaire, all had wheelchair and step-free access. Half of the community pharmacies who responded had an induction loop available. A number of languages other than English were spoken by members of pharmacy staff including Cantonese, Farsi, Hindi, Nigerian, Pashto, Polish, Spanish and Urdu.

5.5 Distance selling pharmacies

Distance selling pharmacies (DSPs) work exclusively at a distance from patients, including mail order and online pharmacies that manage patients' medicines remotely. Pharmacy staff receive prescriptions by post or electronically. These are then dispensed at the pharmacy for delivery to the patient. DSPs are required to dispense prescriptions for patients anywhere in England. The 2013 regulations do not permit DSPs to provide essential services face-to-face.

As at September 2024, there were no DSPs located on the Isle of Wight. However, Island residents may choose to have their prescriptions dispensed from a DSP located anywhere in the country. DSPs dispensed a total of just under 188,000 items to Isle of Wight residents in 2023, 5.6% of all items dispensed overall. The proportion of items dispensed by DSPs to Island residents has increased over the past five years, from 1.4% in 2019.

5.6 Dispensing practices

Dispensing practices are general practitioners (GPs) who provide primary healthcare to patients living in 'controlled localities', areas which NHS England has determined to be 'rural' in character. The factors considered when designating whether an area is a 'controlled locality' include, population density, the presence or absence of facilities, employment patterns, and the availability of public transport.

If a patient meets the eligibility criteria, they may request for a dispensing practice to dispense the medicine that they have been prescribed. The eligibility criteria are, in summary:

- a patient is on the GP register of a practice that is a dispensing practice.
- a patient is resident in an area which is rural in character, known as a 'controlled locality', and at a distance of more than one mile (1.6 km) from pharmacy premises (excluding any distance selling premises). The pharmacy premises do not have to be in a 'controlled locality'.
- the practice has approval for the premises at which they will dispense to the patient and the practice has appropriate consent for the area the patient lives in.
- a patient can apply to be a dispensing patient if they live nearer to a pharmacy but meet the conditions of the regulations i.e. that they would have difficulty in obtaining any necessary drugs or appliances from an NHS pharmacist by reason of distance or inadequacy of means of communication (often known as the "serious difficulty" test) which can apply anywhere in the country.

As at September 2024, there is one dispensing GP practice on the Isle of Wight, South Wight Medical Practice. The practice operates from three sites in Niton, Brighstone and Godshell.

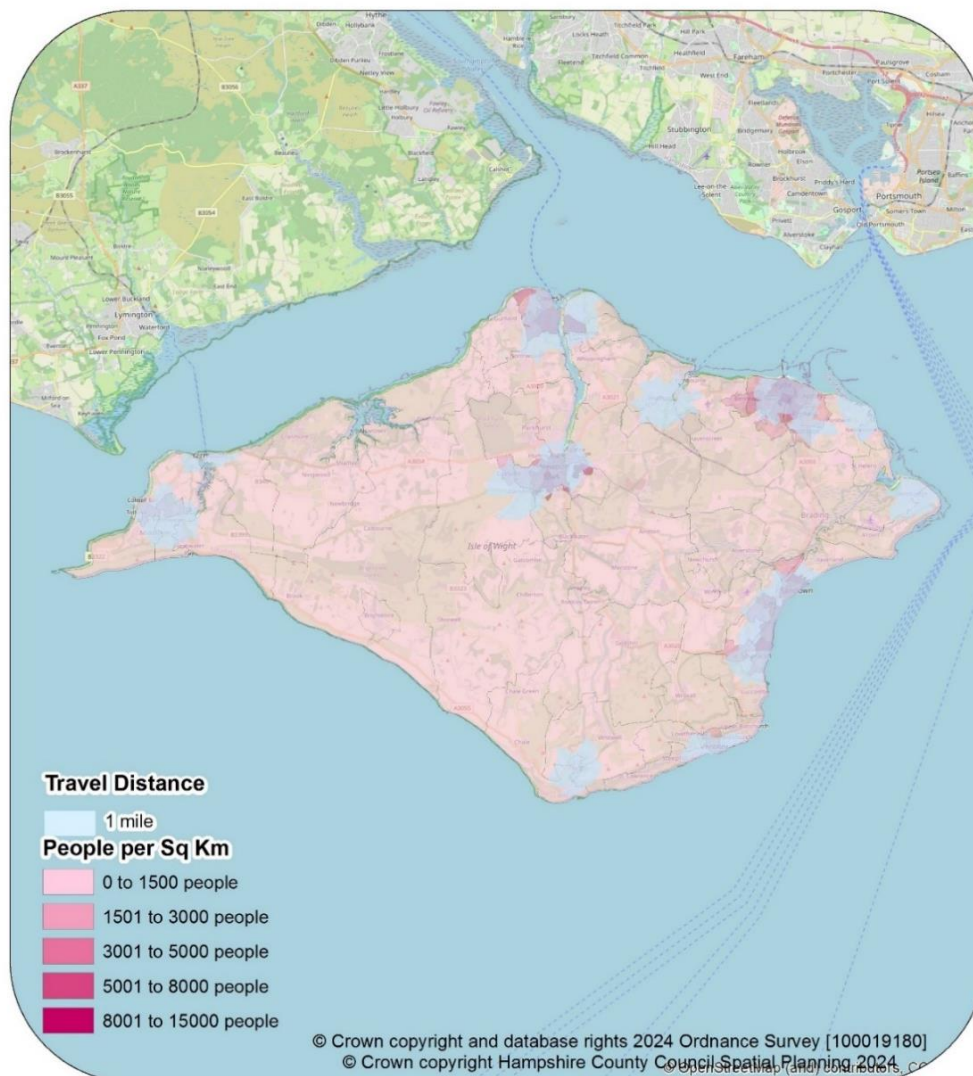
6 Geographical access to pharmaceutical services

This section sets out information on the location of pharmacy premises.

6.1 Pharmacies within a travel distance of 1 mile

Map 4 shows all pharmacy locations on the Isle of Wight within a 1-mile (approximately 1.6km) travel distance. It demonstrates that there are large geographical areas of the Isle of Wight not within 1-mile travel distance of a pharmacy. However, when population density is added to the map, it can be observed that these are sparsely populated, rural parts of the Island. The area outside the 1-mile travel distance to the southwest of the Island is around the village of Brighthelm. This population is served by a local dispensing GP practice. The same practice also has a dispensary in Godshill and Niton, extending provision to the more rural, southern and south-central areas of the Isle of Wight.

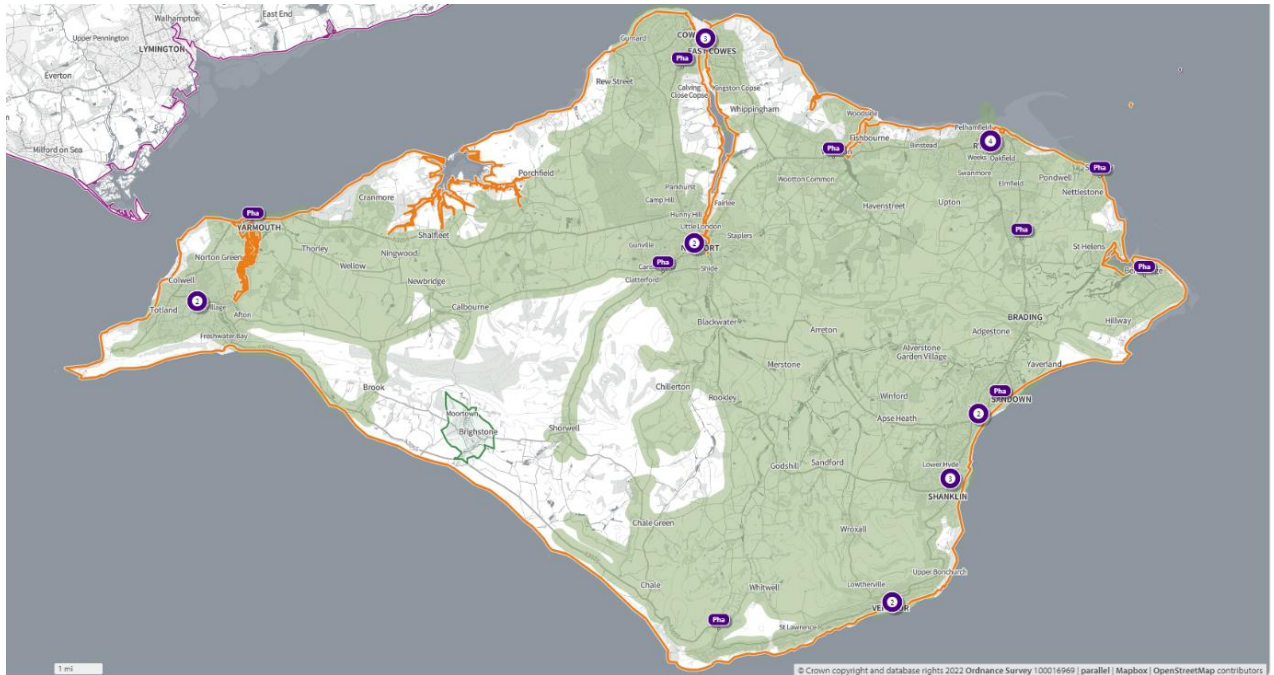
Map 4 - Map showing 1-mile travel distance around community pharmacies with population density



6.2 Driving Distance

Most of the population of the Island live within a 5-mile driving distance of a pharmacy, see Map 5. The area around the village of Brighstone, with an estimated resident population of just over 1,130, does not fall into the mapped driving distance. However, this area is served by a branch of a dispensing GP practice.

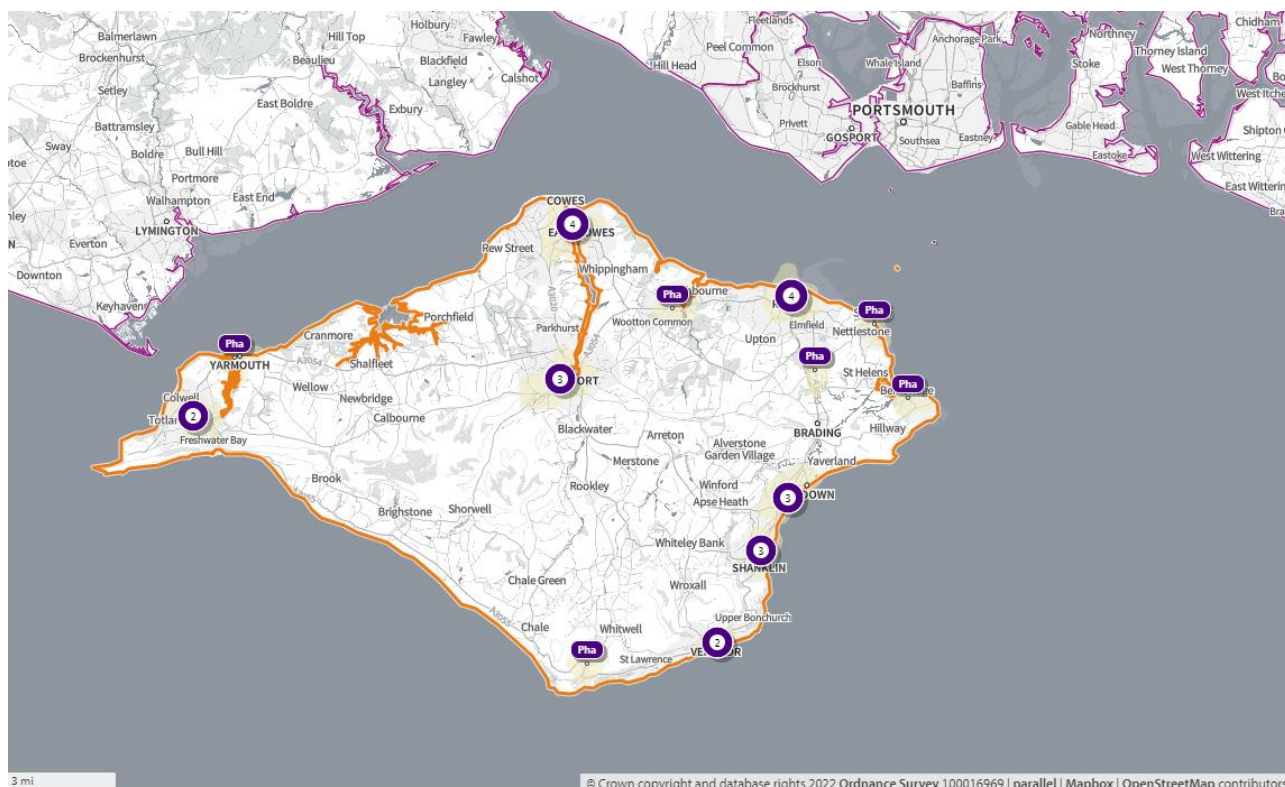
Map 5 - Map showing 5-mile driving distance around community pharmacies



6.3 Walking time

Around 63% of the Island's population live within a 15-minute walk of a pharmacy. The more rural areas of the Island are also served by a dispensing GP practice with dispensaries located in Niton, Brighstone and Godshill (Map 6).

Map 6 - Map showing a 15-minute walking time distance around community pharmacies



6.4 Density of pharmacy service providers

Across England there are 10,054 community pharmacies which equates to 20.8 pharmacies per 100,000 population (2023/24). The Isle of Wight's provision is slightly lower at 19 pharmacies per 100,000 population. However, there is no national expectation on the number of pharmacies per head of population, and it should be noted that these are crude ratios that do not consider the size or staffing levels of the pharmacies included within them, the population density or other services, for example, dispensing practices are not included within these calculations.

6.5 Provision for future developments

The area expecting the highest levels of development over the next fifteen years is Newport, where nearly 1,750 units are expected to be delivered over the next few years. Newport has three pharmacies. On weekdays, two of them close at 5:30pm, while the third stays open slightly longer until 6pm. One of the pharmacies does not open on weekends. Of the remaining two pharmacies, one operates all day on Saturday from 8am to 5:30pm, and the other is open on Saturday from 9am to 1pm. Additionally, one pharmacy is open on Sunday from 10am to 4pm.

Other areas expecting significant developments are Ryde, Cowes, East Cowes, and The Bay.

Ryde has five pharmacies, four are located centrally and one on the outskirts of the town. One pharmacy stays open later on weekdays, closing at 8:30pm from Monday to Friday. On Saturdays, four of the five pharmacies are open, and one pharmacy provides coverage on Sundays.

Cowes and East Cowes each have two pharmacies. The Cowes pharmacies provide coverage from 9am until 6pm on weekdays, with one also open all day on Saturdays. East Cowes covers from 9am until 6:30pm on weekdays with both open all day on Saturdays. There is no pharmacy coverage on Sundays for either area.

In The Bay area, there are six pharmacies operating across the hours of 8:30am until 6:30pm. Five of them are open on Saturdays, but there is currently no coverage on Sundays.

7 Population and health

A brief outline of the health needs of the population of the Island is detailed below. Appendix 1 of this document brings together data from the JSNA, the Office for National Statistics, and other sources to provide a description of the population across the Island.

7.1 Demography and socio-economic factors

7.1.1 Population

In 2025, the population of Isle of Wight is estimated to be just under 143,500.

7.1.2 Forecast changes in number of dwellings and resident population

It is important to assess future changes in the number of dwellings and resident population to ensure that the location, number, and choice of pharmaceutical services meet the current and future needs of the Island over the three-year lifetime of this document. Hampshire County Council's Demography Team's 2023-based population forecasts predict an increase of 2.3% from 143,326 in 2025 to 146,675 by 2030. Most of this growth is projected to occur in the population aged 65 and older. By 2030, it is estimated that 30.5% of the population will be aged 65 or older, 15.8% aged 75 or older, and 4.9% aged 85 or older. The number of people aged 85 years and over is expected to grow from 6,317 to 7,193, an increase of 13.9%.

7.2 Key population groups with specific pharmacy needs

7.2.1 Age

Health needs are typically highest among the very young and the very old. The Island has a lower proportion of younger working-age people (20 to 49 years) at 29.9% compared to 38.9% in England. Young people (0 to 19 years) make up 18.7% of the population, compared to 23.1% nationally. Older residents (75 years and over) account for 15.3% of the population, compared to 9.2% nationally. Additionally, there are around 2,500 people aged 90 years and over living on the Island, representing 1.7% of the population compared to 0.9% nationally.

As people age, their use of medicines tends to increase. According to The Health Survey for England, 19% of young adults aged 16 to 24 had taken one or more medicines in the past week, which rises to more than 90% of those aged 75 and over. This increase is more pronounced for men than for women¹⁰.

7.2.2 Rural and coastal areas

Health outcomes are generally better in rural areas than in urban ones, but this can hide smaller pockets of rural deprivation and associated poor health outcomes. Rural

¹⁰ HSE2016-pres-med.pdf (hscic.gov.uk)

communities are usually older, and financial poverty in rural areas tends to be concentrated in this population. This is compounded by issues around accessibility of health and care services, transport issues, digital access or exclusion, and lack of community support in some areas¹¹.

The Isle of Wight is a predominantly rural county by area and 31.5% of the Island's population live in rural areas.

Coastal areas have lower life expectancy and higher rates of many diseases, compared with non-coastal areas. Almost 93% of the population of the Isle of Wight live in coastal communities.

7.2.3 Deprivation

The Isle of Wight is ranked 80 out of 317 local authority areas for deprivation, with 1 being the most deprived. Deprivation varies across the Island, three of its Lower Layer Super Output Areas (LSOAs) are in the most deprived 10% nationally. These areas are Pan A, Pan B and Ryde North East B. There is a strong association between deprivation and poor outcomes, such as poor health and higher crime levels. Increased demand on pharmacies from those living in more deprived areas is evident with 30% of the Pharmacy First consultation in its first month of service being provided to those living in the 20% most deprived areas in England¹².

7.3 General health needs

Life expectancy on the Isle of Wight is 79.1 years for men and 83.2 for women, which is comparable to the England average of 78.9 and 82.8 respectively (2020-22). Whilst these figures are not significantly different from the national average, there are inequalities across the Island - the difference in life expectancy at birth between the areas in the most and least deprived areas on the Isle of Wight is just under four years for both males and females.

The Global Burden of Disease is a tool developed to quantify health loss. The global study analyses the causes of deaths, diseases, injuries, and risk factors and the data captures over 371 diseases and injuries in 204 countries, by age and sex, from 1990 to the present day. It presents the top causes and risk factors that drive the most death and disability in terms of their overall 'burden' as measured by disability adjusted life years (DALYs). The Global Burden of Disease 2021 data for the Island show that the leading causal factors for DALYs were neoplasms (18.74%), cardiovascular diseases (16.24%), respiratory infections (10.38%), musculoskeletal conditions (9.12%), and neurological disorders (7.53%). People with these diseases are more likely to be prescribed medication by a GP to help manage their conditions. The top risk factors that drive disability on the Island are tobacco (7.75%),

¹¹ [Health and wellbeing in rural areas | Local Government Association](#)

¹² [Almost a third of Pharmacy First consultations have been carried out in most deprived areas of England - The Pharmaceutical Journal](#)

high BMI (6.83%), dietary risks (6.71%), high systolic blood pressure (6.11%) and high fasting plasma glucose (6.09%).

The burden of disease is changing with increasing proportions of people on the Island diagnosed with multiple long-term conditions such as diabetes, COPD, hypertension, musculoskeletal diseases, particularly lower back pain and osteoarthritis, including dementia, and this challenge of multimorbidity will impact on prescribing practice. We know that age and deprivation are also strong predictors of multimorbidity.

Certain lifestyle health behaviours are known risk factors for chronic diseases and premature mortality.

Smoking remains a major cause of preventable ill health and early death on the Island. Whilst smoking rates have declined nationally, rates remain high in certain population sub-groups, including people employed in routine and manual occupations, and people with mental health problems.

Obesity is recognised as one of the major public health challenges of the 21st century. It is estimated that just under two-thirds of the population of the Isle of Wight are overweight or obese.

The Isle of Wight is either similar or worse when compared to national and regional averages on indicators of alcohol-related health and social harm, such as alcohol-related hospital admissions. An estimated 40.7% of Isle of Wight residents drink above the recommended safe levels of alcohol each week.

The most recent data on physical activity shows that a higher percentage of adults on the Isle of Wight are physically inactive than in England as a whole, which equates to almost a quarter of the adult population. Whilst not significantly different from the national average these figures still equate to high numbers of people across the Island with unhealthy behaviours. Additionally, these lifestyle health behaviours may be influenced by wider determinants of health such as deprivation and poor living circumstances.

One in four adults experience mental ill-health at any one time and people with mental ill-health are twice as likely as the general population to have serious physical illnesses. People with serious mental health problems tend to have reduced life expectancy when compared with the general population.

Apart from long term conditions, pharmaceutical services are needed for acute injuries and illnesses as well.

8 Gap Analysis

The information collected and analysed for this needs assessment has been used to conduct a 'gap analysis' to determine whether the pharmaceutical services on the Isle of Wight meet current and future needs. The Steering Group agreed that driving distances by car and travelling distance by foot would be the most appropriate measure given the size of the Island and its urban-rural composition. Three different distances have been used to assess geographical accessibility across the Island. A 1-mile (1.6km) travel distance from a pharmacy has been compared with population density across the Island. Additionally, a travel distance of 5 miles and walking time of 15 minutes were used to assess accessibility.

8.1 Do existing pharmaceutical services meet current needs?

- The Island's overall population health is similar or worse than the national average. It has similar average life expectancy and healthy life expectancy, although improvements have slowed in recent years. The Island has higher levels of most long-term conditions and greater health need.
- Isle of Wight's population is older than the national average. It has a greater proportion of the population aged 65 years and over, and a lower proportion of working age, 20 to 44 years. This is expected to increase in absolute and relative terms over the lifetime of this PNA.
- There are specific groups within the resident population who are more likely to experience worse health outcomes, greater difficulties accessing services and who may have a greater level of health needs and associated requirements for pharmaceutical services.
- Geographical spread of community pharmacies across the Island is good. There are geographical areas of the Isle of Wight that are not within a 1-mile distance of a pharmacy. However, when population density is added to this picture, these are largely sparsely populated, rural parts of the Island. The Island has one dispensing practice operating from three different sites to serve most of these communities.
- Most of the population of the Isle of Wight live within 5 miles of a pharmacy. The majority of the population who live further than 5 miles from a pharmacy are resident in more sparsely populated, rural areas.
- The majority of the population (63%) live within a 15-minute walk of a pharmacy.
- There are 19 community pharmacies per 100,000 residents on the Isle of Wight. This is slightly lower than the national average of 20.8 per 100,000 residents. However, there is no national expectation on the number of pharmacies per head of population and it should be noted that these are crude ratios that do not consider the size or staffing levels of the pharmacies included within them, nor do they adjust for other forms of pharmacy provision.
- All pharmacies provide the full range of essential pharmaceutical services.
- There is good provision of advanced services across the Isle of Wight and distribution of services such as NMS and Pharmacy First are appropriately distributed.

- A range of enhanced and locally commissioned services are delivered across the Island.
- With all 27 pharmacy contractors operating on standard 40-hour contracts and extended-hours provision commissioned by the ICB in Ryde following closure of the Island's sole 100-hour pharmacy in June 2023, as well as supplementary hours in other pharmacies, there are sufficient access times across the Island.
- Whilst there are no distance selling pharmacies located on the Island, residents can access distance selling pharmacies across the country.
- It is acknowledged that some community pharmacies have closed, or reduced their opening hours, since the previous PNA was published. The loss of these services will be noticeable, especially for those residents in the affected areas. However, the purpose of the PNA is to systematically assess provision across the Island as a whole and to ensure that gaps are not identified inappropriately or in areas where the market cannot sustain another provider. At the same time, it needs to be recognised that future trends in community pharmacy provision suggest an increasingly clinically focused role, with less emphasis on dispensing and greater use of technology and automation to make dispensing more efficient.

It is considered that the number, distribution, and service provision across the Island meets the current needs of the population.

8.2 Do existing pharmaceutical services meet future needs?

Areas of significant new development have been identified in section 6.5 of this document. Current provision has been deemed sufficient in terms of geographical accessibility and opening hours given the expected increases in population in these areas. Many anticipated developments are within urban areas where current pharmacy provision is sufficient. Whilst it is anticipated that future demand over the lifecycle of this document will be met by existing providers, it is likely that the prevalence and complexity of multimorbidity will grow, and coupled with an ageing demographic and deprivation, this will pose upcoming challenges in terms of optimising prescribing and will need to be considered in the next revision of the PNA.

9 Conclusion

The conclusion of this PNA is that the number, geographical distribution, opening hours and choice of pharmaceutical services currently meet the needs of the Isle of Wight's population and will meet future needs within the lifetime of this document.

DRAFT