West Berkshire

Pharmaceutical Needs Assessment 2025-2028

Healthy Dialogues LTD

West Berkshire COUNCIL

Executive Summary

Introduction

All Health and Wellbeing Boards (HWB) have a statutory responsibility to publish and keep up to date a statement of needs for pharmaceutical services for their population every three years. This is called the Pharmaceutical Needs Assessment (PNA). The purpose of the PNA is twofold, namely to:

- support NHS England in their decision-making related to applications for new pharmacies, or changes of pharmacy premises and/or opening hours.
- support local commissioners in decisions regarding services that could be delivered by community pharmacies to meet the future identified health needs of the population

This PNA provides an overview of the demographics and health and wellbeing needs of the West Berkshire population. It also captures patients' and the public's views of pharmacy services they access. It assesses whether the current provision of pharmacies and the commissioned services they provide meet the needs of the West Berkshire residents and whether there are any gaps, either now or within the lifetime of the document, from the date of its publication to the 30th September 2028. It assesses current and future provision with respect to:

- Necessary Services – defined here as provision of Essential Services and dispensing services provided by eligible GPs
- Other Relevant Services – defined here as Advanced, Enhanced and Locally Commissioned Services.

Methodology

In November 2024, a Task and Finish group of key stakeholders was established to oversee the development of the PNA with overall responsibility of ensuring it met the statutory regulations. This was in addition to a wider BOB-wide (Buckinghamshire, Oxfordshire and Berkshire West) Steering Group. The process included:

- a review of the current and future demographics and health needs of the West Berkshire population determined on a locality basis

- a survey of West Berkshire patients and the public on their use and expectations of pharmaceutical services and an equality impact assessment
- an assessment of the commissioned Essential, Advanced, Enhanced and Locally Commissioned services and the dispensing service delivered by some GP practices provided in West Berkshire.

A PNA consultation draft was published for formal consultation between 14th May and 13th July 2025. Responses to the consultation were considered by the steering group before final publication of the PNA.

Findings

Key population demographics of West Berkshire

West Berkshire is a unitary authority in Berkshire with an estimated population of with the highest population densities seen in Thatcham and Newbury towns. Its median age of 43 is just above that of the South East.

West Berkshire is among the least deprived local authorities in England with just one of its 97 LSOAs among the most deprived 20% in England. Patient groups with specific pharmaceutical needs identified by the steering group included, people sleeping rough, people who have experienced domestic abuse and Gypsy, Roma, Traveller and Horse Racing communities.

Key population health needs of West Berkshire

Both life expectancy and healthy life expectancy are notably higher in West Berkshire that the regional and national averages. West Berkshire fares better than regional and national comparators across the risk factors conditions and risk factors explored in this PNA.

Patient and public engagement

A patient and public survey was disseminated across West Berkshire to explore how people use their pharmacy and their views on the provision of pharmaceutical services. A total of 851 people responded.

Most respondents based their choice of pharmacy on where their GP sends their prescriptions, proximity to home or work, or availability of parking near the pharmacy. Nearly all respondents (93%) can reach their pharmacy in 20 minutes or less. Cars and walking are most common modes of transport to pharmacies. Though the survey

highlighted praise for pharmacies, particularly around quality of service, some respondents expressed disappointment about long waiting times in some pharmacies. No substantial differences or identified needs were found amongst protected characteristics groups and pharmacy usage.

Health and Wellbeing Board statements on service provision

There are 16 community pharmacies and 7 dispensing GPs located within West Berkshire. There are a further 10 community pharmacies located within a mile of West Berkshire's boundaries.

The PNA steering group, on behalf of the Health and Wellbeing Board has assessed whether the current and future pharmacy provision meets the health and wellbeing needs of the West Berkshire population. It has also determined whether there are any gaps in the provision of pharmaceutical service either now or within the lifetime of this document, from the date of its publication to the 30th September 2028.

A gap was identified in the provision in the Calcot area for essential services. Further, the analysis found that the Calcot area would secure improvements or better access to pharmaceutical services were it to have provision of Pharmacy First services.

Contents

Chapter 1 - Introduction

Purpose of the Pharmaceutical Needs Assessment

1.1 Community pharmacies are vital in delivering quality healthcare in local communities, being among the most frequently visited healthcare settings in England. As well as providing prescriptions, they are often a patient's first point of contact and, for some, their only contact with a healthcare professional.

1.2 The provision of NHS Pharmaceutical Services is a controlled market. As such, any pharmacist or dispensing appliance contractor who would like to provide NHS Pharmaceutical Services, must apply to NHS England to be on the Pharmaceutical List of the relevant Health and Wellbeing Board (HWB).

1.3 The purpose of the Pharmaceutical Needs Assessment (PNA) is to plan for the commissioning of pharmaceutical services and to support the decision-making process in relation to new applications or change of premises of pharmacies. This includes:

- Supporting the 'market entry' decision making process (undertaken by NHS England) in relation to applications for new pharmacies or changes in pharmacy premises.
- Informing commissioning of enhanced services from pharmacies by NHS England, and the local commissioning of services from pharmacies by the local authority and other local commissioners.

1.4 The West Berkshire PNA can also be used to assist the HWB to inform interested parties of the pharmaceutical needs in the area, whilst enabling work on planning, developing and delivering pharmaceutical services for the population.

1.5 Additionally, the HWB can use the PNA to facilitate collaborations with pharmacy contractors in order to provide services within the areas where they are needed most, whilst limiting duplication in areas where service provision is adequate.

Legislation

1.6 From 2006, NHS Primary Care Trusts had a statutory responsibility to assess the pharmaceutical needs for their area and publish a statement of their first assessment and of any revised statements.

1.7 With the abolition of Primary Care Trusts and the creation of the Clinical Commissioning Groups (CCGs) in 2013, Public Health functions were transferred to local authorities. Health and Wellbeing Boards were introduced to bring together Commissioners of Health Services, Public Health, Adult Social Care, Children's Services and Healthwatch.

1.8 The Health and Social Care Act of 2012 gave a responsibility to Health and Wellbeing Boards for developing and updating Joint Strategic Needs Assessments and Pharmaceutical Needs Assessments.

PNA requirements

1.9 The PNA covers the period between 1st October 2025 and 30th September 2028. It must be produced and published by 1st October 2025. The development of and publication of this PNA has been carried out in accordance with regulations and associated guidance, including:

- The NHS Pharmaceutical Services and Local Pharmaceutical Services Regulations 2013.
- The Department of Health Information Pack for Local Authorities and Health and Wellbeing Boards (HWB).

1.10 As outlined in the 2013 regulations, this PNA must include a statement of the following:

- **Necessary Services – current provision**: services currently available that are necessary to meet the need for pharmaceutical services and could be provided within or outside of the health and wellbeing board's area.
- **Necessary Services - gaps in provision:** services that are not currently available but are deemed necessary by the HWB to address an existing need for pharmaceutical services.

- **Other Relevant Services – current provision**: any services delivered or commissioned by the local authority, NHS England, the ICB, an NHS trust, or an NHS foundation trust that impact the need for pharmaceutical services in the area or where future provision could enhance quality or improve access to specific pharmaceutical services.
- **Improvement and better access - gaps in provision**: services that are not currently available but are considered by the HWB to enhance quality or improve access to pharmaceutical services if introduced.

1.11 Additionally, the PNA must include a map showing the premises where pharmaceutical services are provided and an explanation of how the assessment was made. This includes:

- Consideration of the varying needs across different localities.
- Assessment of how the needs of individuals with protected characteristics have been addressed.
- Evaluation of whether expanding pharmaceutical services would enhance access or improve service quality.
- A report of the 60-day consultation on the draft PNA.

Consultation

1.12 A draft PNA must be put out for consultation for a minimum of 60-days prior to its publication.

1.13 The PNA was published for consultation between 14th May and 13th July 2025. The 2013 Regulations list those persons and organisations that the HWB must consult, which include:

- Any relevant local pharmaceutical committee (LPC) for the HWB area.
- Any local medical committee (LMC) for the HWB area.
- Any persons on the pharmaceutical lists and any dispensing GP practices in the HWB area.

- Any local Healthwatch organisation for the HWB area, and any other patient, consumer, and community group, which in the opinion of the HWB has an interest in the provision of pharmaceutical services in its area.
- Any NHS Trust or NHS Foundation Trust in the HWB area.
- NHS England.
- Any neighbouring HWB.

1.14 All comments received were considered in the final PNA report to be presented to the HWB before the 1st October 2025.

Revisions and updates

1.15 The PNA must reflect any changes that affect the need for pharmaceutical services in Reading. As such, it will be updated every three years.

1.16 The HWB is also required to revise the PNA publication if significant changes in pharmaceutical services occur before 30th September 2028. Not all changes in a population or area will impact the need for pharmaceutical services. If the HWB identifies a change that warrants a review, they may issue a supplementary statement explaining the changes since the PNA was published.

Chapter 2 - Strategic Context

2.1 This section provides an overview of key policies, strategies and reports that shape the strategic context of community pharmacy services at both a national and local level.

National Context

2.2 Throughout the last decade, the health and social care system has transformed and evolved to meet a range of challenges. Consequently, it has seen significant changes towards greater integration between health and social care services, increased emphasis on preventative care and growing use of technology for remote monitoring and consultations. This has been undertaken whilst also facing challenges with an ageing population, more people experiencing long-term health conditions, and continued funding pressures.

Health and Care Act (2022)[1]

2.3 The Health and Care Act 2022 builds on NHS proposals from the Long-Term Plans. It emphasises the importance of collaboration, drawing on lessons from the pandemic to enhance system responsiveness. The Act focuses on three key areas: integrating NHS services with local government to tackle health inequalities, reducing bureaucracy to streamline decision-making and improve care delivery, and establishing clear accountability mechanisms.

Health Equity in England: Marmot Review 10 years on[2]

2.4 The objectives outlined in the Marmot review are intended to ensure the health life expectancy gap between the least deprived and most deprived are reduced. More specific to health, community pharmacists are uniquely placed at the heart of communities to support patients to provide the public a range of public health interventions, weight management services, smoking cessation services and vaccination services. At present community pharmacies provide a pivotal role in promoting healthier lifestyle information and disease prevention.

1 Department of Health and Social Care (2022). Health and Care Act 2022. Available at: Health and Care Act 2022 (legislation.gov.uk)
2 Institute of Health Equity (2020). Marmot Review 10 Years On. Available at: Marmot Review 10 Years On - IHE

Plan for Change[3]

2.5 In 2024, HM Government launched their 'Plan for Change' outlining five missions to deliver a decade of national renewal. A focus on bringing care closer to where people live underpins the Health and Wellbeing ambitions, which include transitioning how elective care is delivered, transforming patients' experience of care, and transforming the model of care to make it more sustainable.

2.6 As part of this, on the 28th January 2025, the Department of Health and Socia Care entered into consultation with Community Pharmacy England regarding the 2024-2025, and 2025-2026 funding contractual framework.[4] This is intended to set the future direction for community pharmacy recognising it will play a vital role in supporting the delivery of the reforms that are set out in this plan.

Pharmacy Integration Fund

2.7 The Pharmacy Integration Fund (PhIF) was established to promote the integration of clinical pharmacy services across various primary care settings, aiming to enhance patient care. Key initiatives supported by the PhIF include collaborating with Health Education England (now NHS England) to provide education and training for pharmacists and pre-registered pharmacists. Additionally, urgent medication requests are now directed to community pharmacies through NHS 111, reducing the burden on out-of-hours GP services, while minor health concerns are also redirected to community pharmacies.

2.8 Moreover, the PhIF facilitates the integration of pharmacists into urgent care settings, social care teams, and GP settings to optimise medication management and support the General Practice Forward View (GPFV) initiative. It also supports system leadership development and implements 'Stay Well' pharmacy campaigns to encourage families to visit community pharmacies first for minor health concerns. These efforts aim to improve patient access to clinical pharmacy services and enhance the role of pharmacists in delivering safe and effective care within primary care settings.

3 HM Government (2024). Plan for Change: Milestones for mission-led government. Available here: Plan for Change – Milestones for mission-led government

4 GOV.UK (2025). Government opens discussions with Community Pharmacy England over 2025 to 2026 funding contract. Available at: Government opens discussions with Community Pharmacy England over 2025 to 2026 funding contract - GOV.UK

Local Context

Joint Strategic Needs Assessment (JSNA)[5]

2.9 West Berkshire approaches JSNA as a key programme of work which encompasses a wide range of assessment, planning and commissioning processes taking place on behalf of the local population. The key aims are:

- To ground these processes in a core, single evidence base.
- To bring their outputs together in one place which can provide a document of the assessment of need, and further expand the local evidence base.

2.10 JSNA's have informed the development of 'Joint Health and Wellbeing Strategies' and local implementation plans.

Berkshire West Health and Wellbeing Strategy 2021-2030[6]

2.11 This strategy sets out how professionals across health and social care will work together to improve the health of the population. It covers Reading, Wokingham and West Berkshire local authority areas. The strategy is based around five health and wellbeing priorities:

- Reduce the differences in health between different group of people.
- Support individuals at high risk of bad health outcomes to live healthy lives.
- Help families and children in early years.
- Promote good mental health and wellbeing for all children and young people.
- Promote good mental health and wellbeing for all adults.

2.12 The focus throughout the 9 years prioritises the recovery of population health, rebuilding likelihoods and adapting to a new normal, whilst levelling health inequalities across the three areas. To achieve this, local delivery plans are implemented to support the strategy.

5 West Berkshire Council (n.d.) Joint Needs Assessment (JSNA). Accessible here: Joint Strategic Needs Assessment (JSNA) - West Berkshire Council

6 West Berkshire (2021). Berkshire West Health and Wellbeing Strategy 2021-2030. Accessible here: Berkshire West Health and Wellbeing Strategy 2021-2030 - West Berkshire Council

Health and Wellbeing Board

2.13 In the annual review 2023/24[7], West Berkshire Health and Wellbeing Board's priorities for 2024/25 included:

- Delivery of 'Hot Focus Sessions' to provide opportunities to undertake in-depth investigation of particular issues that are affecting the health and wellbeing of local communities, or the operation of the Board. These sessions will focus on, housing and health, inequalities early years system, health and wellbeing board effectiveness.
- Continue to roll out the 'Community Wellness Outreach'.
- Review the delivery plan that was developed to achieve the objectives of the Joint Health and Wellbeing Strategy. This review will include the identification of actions that have been achieved, or where progress has not been as per expectations.
- Closing health inequalities remain central to the Berkshire West Health and Wellbeing Strategy.
- A greater need to develop a better understanding of the needs of residents with learning difficulties and ensure these are met.

7 West Berkshire Council (2024). Health and Wellbeing Board Annual Report – June 2024. Accessible here: Health and Wellbeing Board Annual Report - June 2024 - West Berkshire Council

Chapter 3 - The development of the PNA

3.1 This PNA has been developed using a range of information sources to describe and identify population needs and current service provision from the network of community pharmacies. This includes:

- Nationally published data, including datasets from Office for National Statistics (ONS) and Office for Health Improvement and Disparities (OHID).
- The West Berkshire Joint Strategic Needs Assessment.
- Local policies and strategies such as the Joint Health and Wellbeing Strategy.
- Local Pharmaceutical Committee data.
- A survey to the patients and public of West Berkshire.
- Local Authority and Buckinghamshire, Oxfordshire and Berkshire West (BOB) ICB commissioners.

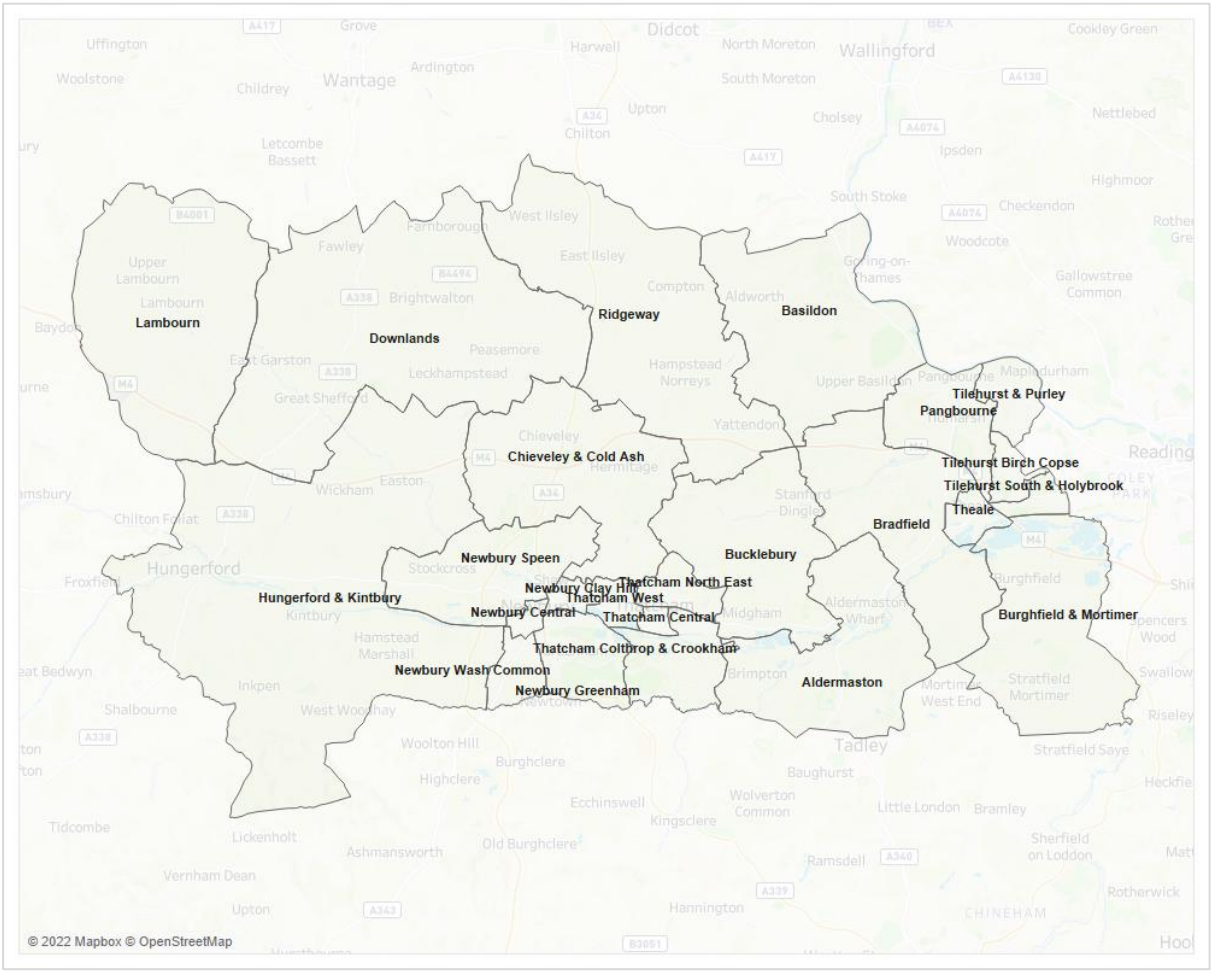
3.2 These data have been combined to describe the West Berkshire population, current and future health needs and how pharmaceutical services can be used to support the HWB to improve the health and wellbeing of our population.

Methodological considerations

Geographical Coverage

3.3 PNA regulations require that the HWB divides its area into localities as a basis for structuring the assessment. A ward-based structure was chosen by the HWB as it is in-line with available population health needs data and enables us to identify differences at ward level with respect to demography, health needs or service provision. There are 24 wards in West Berkshire as illustrated in Figure 3.1.

Figure 3.1: West Berkshire Council electoral wards



3.4 The PNA Task and Finish Group determined provision and choice of pharmacies by travel time. The following criteria were considered reasonable by the steering group in terms of accessibility to pharmacy provision:

- Within rural areas: 20-minute drive from a pharmacy.
- Within urban areas (or areas with high population density): 1 mile.

3.5 Where areas of no coverage are identified, other factors are taken into consideration to establish if there is a need. Factors include population density, whether the areas are populated (e.g., Green Belt areas) and locations of dispensing GPs. These instances have all been stated in the relevant sections of the report.

Patient and Public Survey

3.6 Patient and public engagement in the form of a survey was undertaken to understand how people use their pharmacies, what they use them for and their views of the pharmacy provision. 851 West Berkshire residents and visitors responded to the

survey, their views were explored, including detailed analysis of the Protected Characteristics. The findings from the survey are presented in Chapter 6 of this PNA.

Governance and Steering Group

3.7 The development of the PNA was advised by a steering group who oversaw the process of all Buckinghamshire, Oxfordshire and Berkshire West PNAs. Its membership included representation from:

- BOB ICB Clinical Lead for Medicines Optimisation, Chair.
- Public Health Local Authority leads.
- Community Pharmacy Thames Valley (LPC).
- ICB Pharmacy Contracting.
- Local Authority Communications leads
- HealthWatch representatives.
- Local Medical Committee(s).

3.8 The membership and Terms of Reference of the Steering Group is described in Appendix A.

3.9 In addition, it was supported by a local Task and Finish group of representatives from

- West Berkshire Council and Reading Borough Councils' Public Health team.
- Local Pharmaceutical Committee.
- Healthwatch West Berkshire and Healthwatch Reading.
- West Berkshire Council Communications Team and Reading Council Communications.

Regulatory consultation process and outcomes

3.10 A draft of this PNA was published for statutory consultation between the period of 14th May 2025 and 13th June 2025. Comments received during the consultation period were considered and incorporated into the final report to be published by 1st October 2025.

Chapter 4 - Population demographics

4.1 This chapter provides an overview of West Berkshire's population demographics, highlighting aspects that are likely to influence the demand on pharmaceutical services. It examines the characteristics of the district's residents, population sizes changes and the wider determinants of health.

4.2 Maps presented in this chapter illustrate population characteristics such as density and deprivation, using gradients to denote intensity. The legends accompanying each map explain these gradients.

About the area

4.3 West Berkshire is a unitary authority in Berkshire, on the western fringe of the South East region. The district is centred on the town of Newbury, an urban economic and administrative centre. In contrast, other towns such as Hungerford and Thatcham offer quieter residential areas and open spaces such as Victoria Park and The Common.

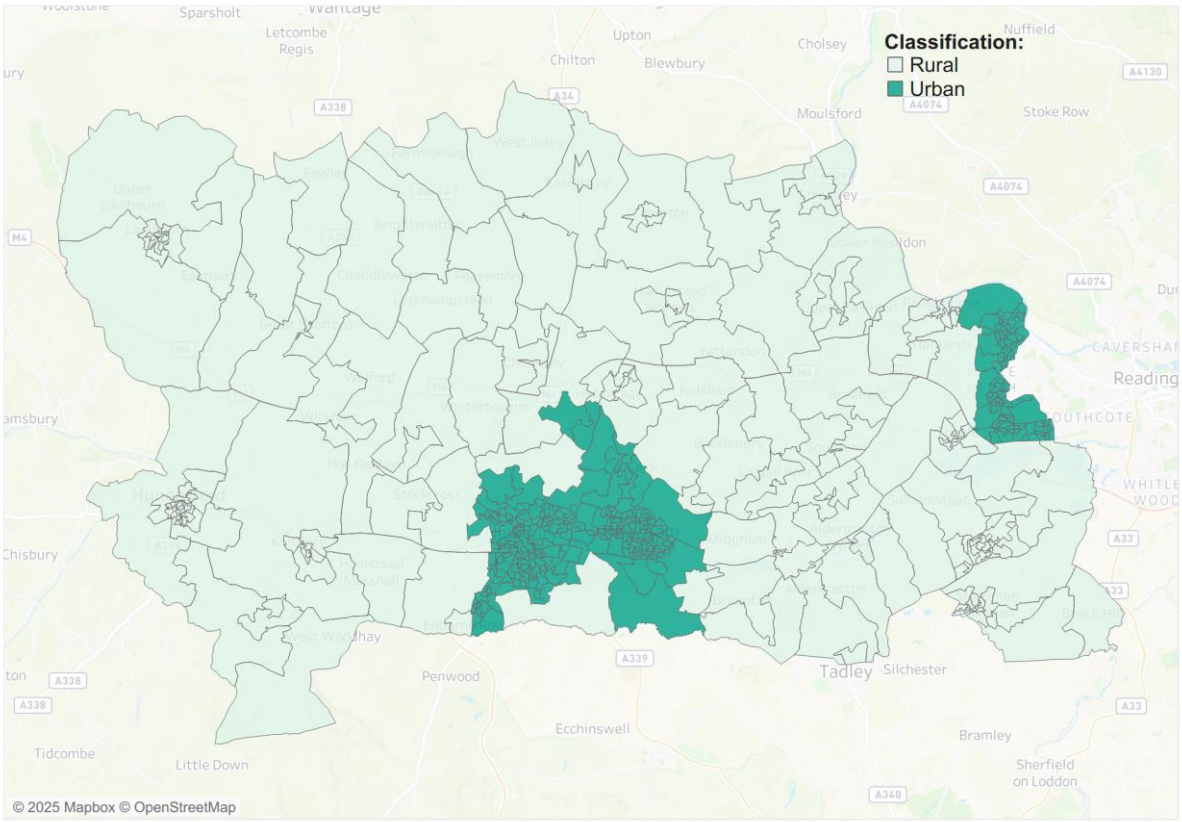
4.4 The area has easy access to the national motorway network via the M4 motorway, and the A34 connects the district to Oxford to the north, and to Hampshire and the south coast to the south. The area also has good rail links, with the Great Western Main Line giving access to Swindon and Bristol to the west, and to Reading and London and other towns in the Thames valley to the east, with the Berks and Hants line runs west from Reading through the district, providing connections to Devizes in Wiltshire with onwards connections to the West Country.

4.5 Parts of the district border neighbouring local authorities and shire counties such as Wiltshire to the west, Oxfordshire to the north, Reading and Wokingham local authorities to the south east, and Hampshire to the south.

Geodemographic classification

4.6 The largest urban areas in the district are Newbury and Thatcham, where around 44% of West Berkshire residents live. 25% of residents live in the suburban area adjoining Reading borough. Around 32% of people live in rural settlements. Figure 4.1 shows the main urban and rural areas within the district giving a sense of the vast amount of the district that is covered by rural land.

Figure 4.1: Urban and rural areas of West Berkshire



Source: ONS, 2021 Census

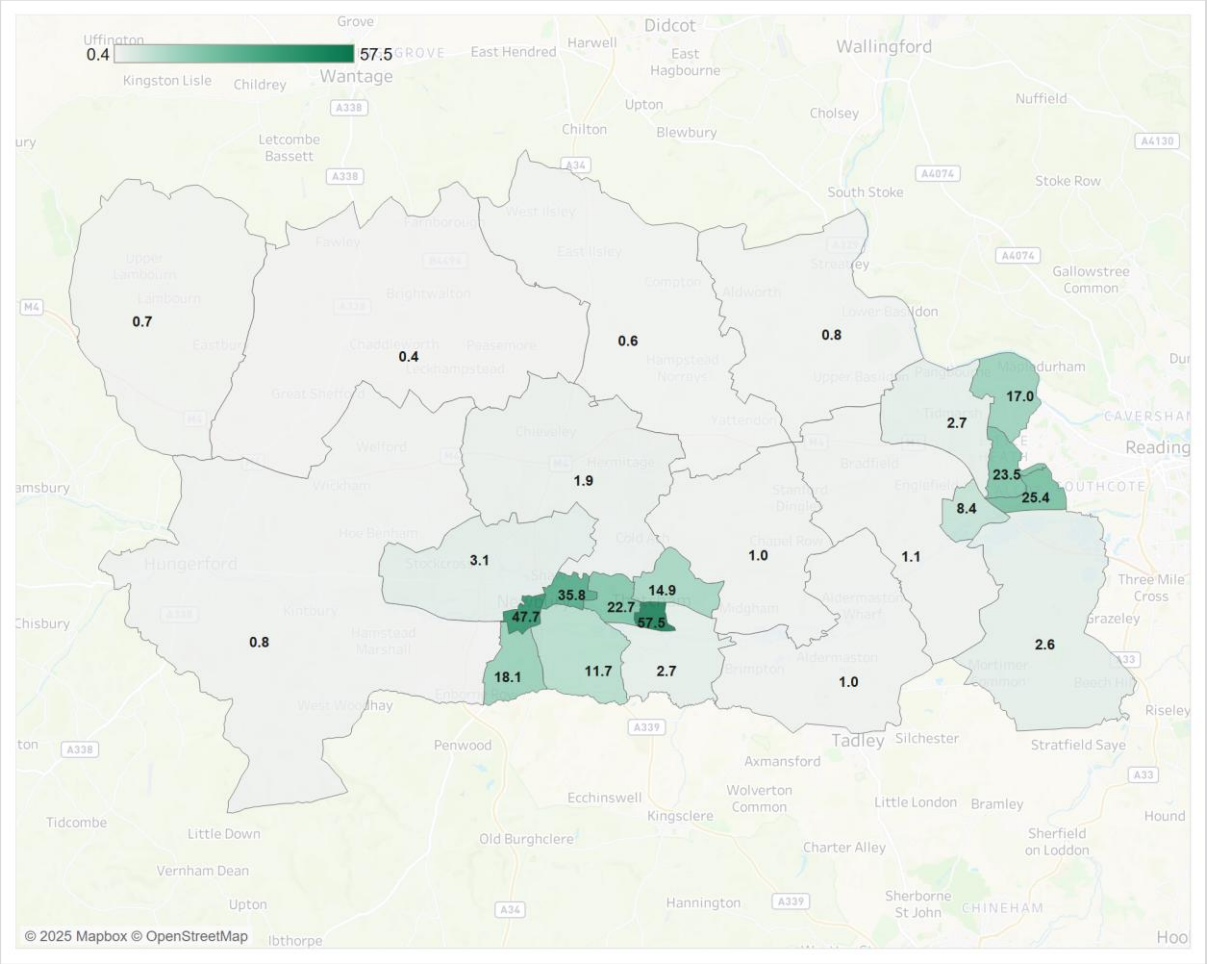
Demography

Population size and density

4.7 West Berkshire has a low population density. With an estimated population size of 161,333 (ONS, Census 2021), its population density of 2.3 people per hectare is one of the lowest in the South East, which has an average population density of 4.9 people per hectare. This attests to rural nature of large parts of the district.

4.8 Population density peaks around Thatcham and Newbury towns, with Thatcham Central ward having the highest population density at 57.5 people per hectare (Figure 4.2). Conversely, Downlands ward has the lowest density.

Figure 4.2: Population density of West Berkshire per hectare by ward



Source: ONS, 2021 Census

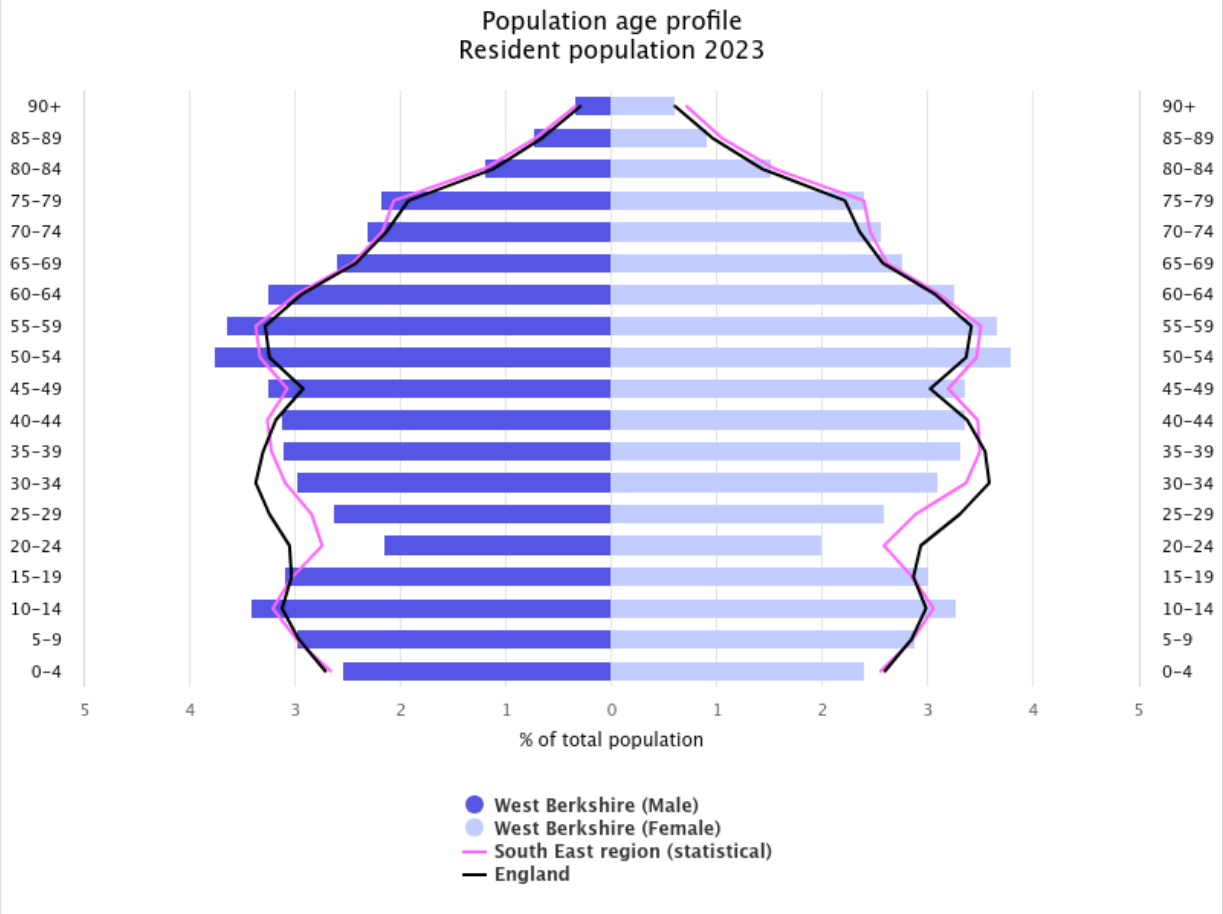
Age and Gender structure

4.9 The median age of West Berkshire residents is 43 years, which marginally higher than that of South East England as a whole (42).

4.10 Older adults (aged 65 and over) make up 20% of West Berkshire's population which is slightly above the South East's overall figure of 19%.

4.11 The figure below presents a breakdown of the age and gender of West Berkshire residents.

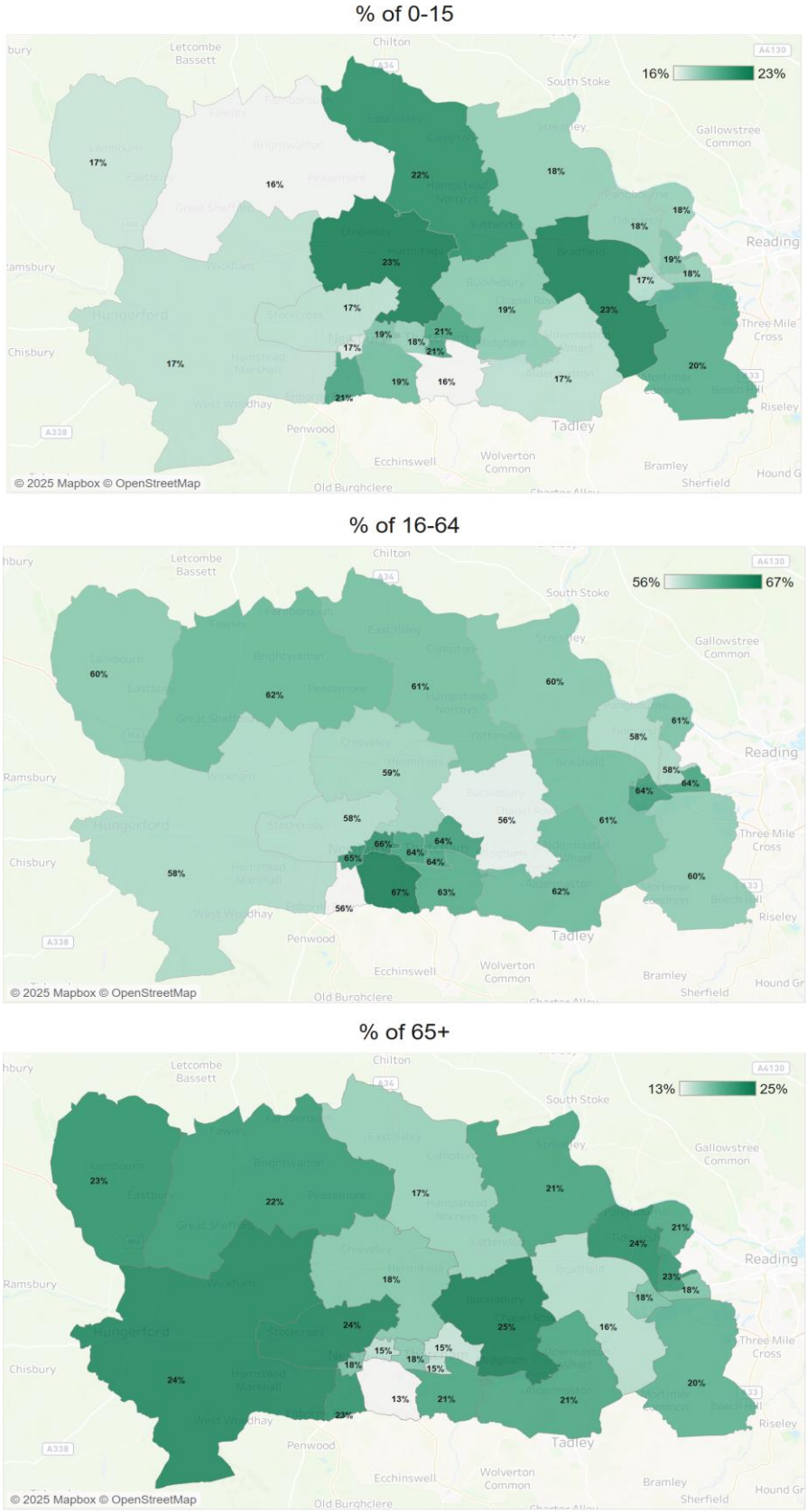
Figure 4.3: Proportion of West Berkshire resident population by age-band and gender, Resident Population 2023



Source: Public Health Outcomes Framework

4.12 At a ward level, Bucklebury has the highest proportional representation of older adults (25%), while Newbury Greenham has the smallest (13%) as shown in Figure 4.4 below.

Figure 4.4: Percentage of age groups by ward



Source: ONS, 2021 Census

Ethnicity and diversity

4.13 Often areas that have high diversity, also have higher levels of deprivation and health inequalities. NICE Guidance[8] highlights that community pharmacies can impact on health inequalities in several ways. For example, pharmacy staff often reflect the social and ethnic backgrounds of the community they serve making them approachable to those who may not choose to access other health care services. It recommends that they take into consideration how a patient's personal factors may impact on the service they receive, for example, their gender, identity, ethnicity, faith, culture, or any disability. It also recommends that community pharmacists make use of any additional languages staff members may have.

4.14 West Berkshire has a relatively small ethnic minority population of only 8%. This is smaller than the South East on average (14%) and England as a whole (19%) (Table 4.1).

Table 4.1: Ethnic population breakdown for West Berkshire, South East England and England

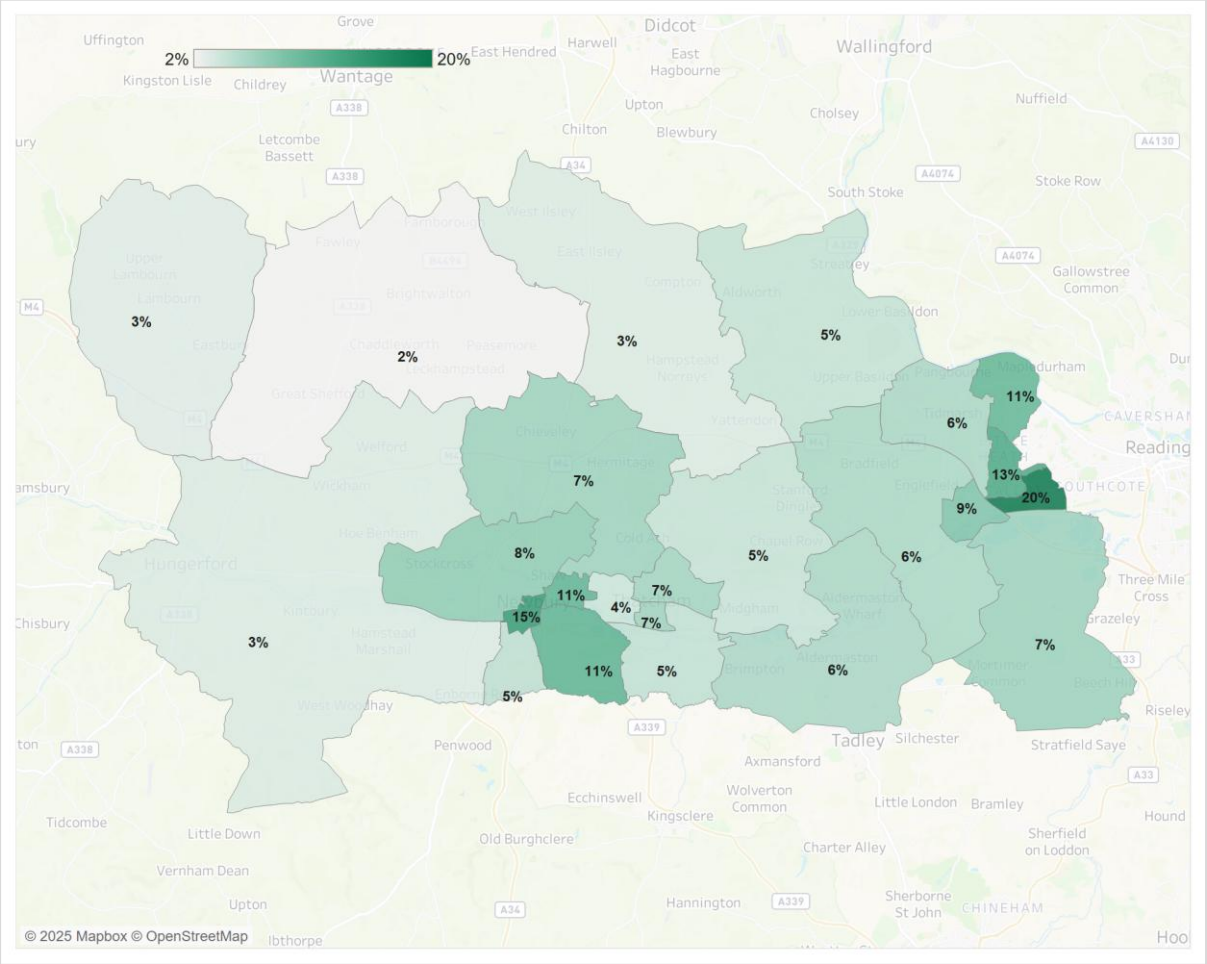
Ethnicity	West Berkshire	South East	England
Asian or Asian British	4%	7%	10%
Black, Black British, Caribbean or African	1%	2%	4%
Mixed or Multiple ethnic groups	2%	3%	3%
White	92%	86%	81%
Other ethnic group	1%	1%	2%

Source: ONS, Census 2021

4.15 There is a great variability in terms of proportion of ethnic minorities at the ward level, with a fifth of Tilehurst South & Holybrook's resident population identifying as being from an ethnic minority, while that figure is only 2% in Downlands (Figure 4.5).

[8] NICE Guidance (2018), Community Pharmacies, Promoting Health and Wellbeing (NG102)

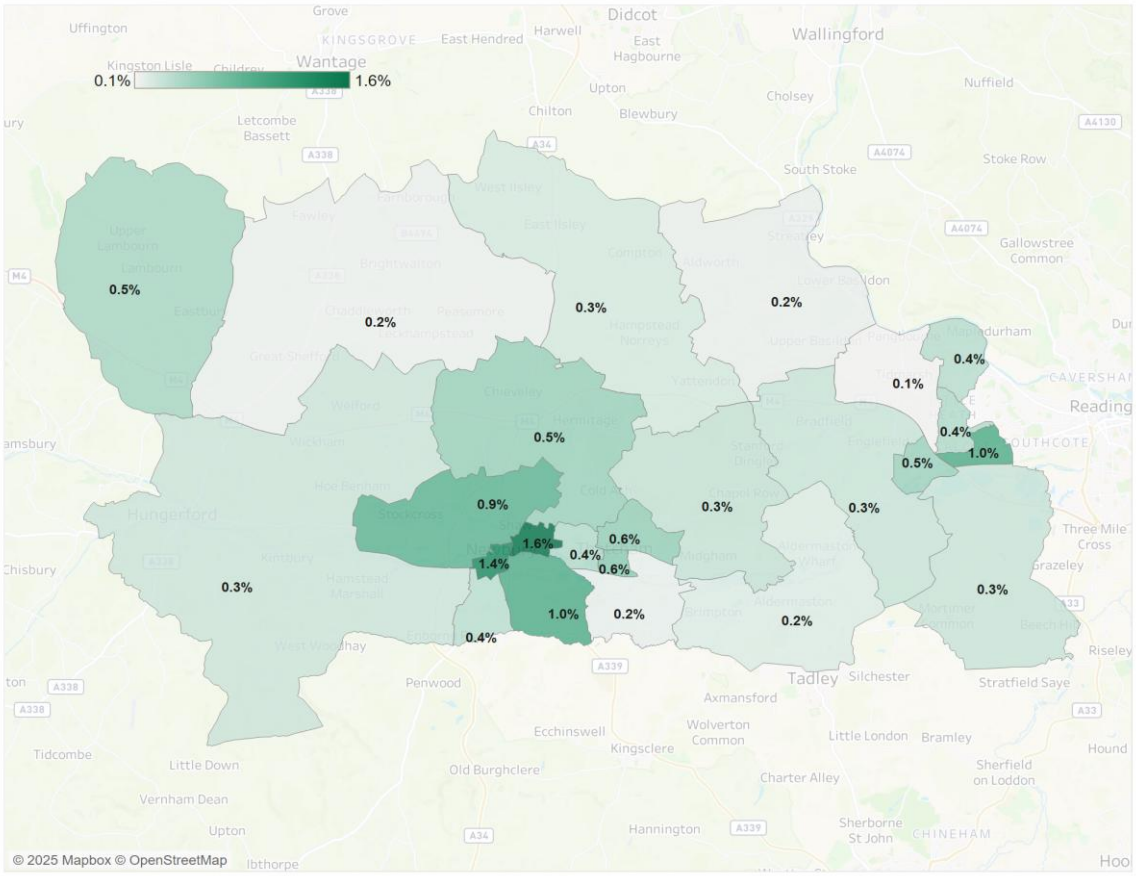
Figure 4.5: Percentage of ethnic minorities in West Berkshire by ward



Source: ONS, Census 2021

4.16 Language proficiency is not considered a significant issue across the district. While Newbury Clay Hill has the highest proportion of residents who report not being able to speak English well or at all, and Pangbourne the lowest, the overall figure remains very low at just 0.6% of the district's population.

Figure 4.6: Proportion of residents that cannot speak English well or at all, by ward



Source: ONS, Census 2021

4.17 Polish, Romanian and Portugues are the main languages spoken in West Berkshire after English.

Table 4.2: Main languages spoken in West Berkshire - Top 10

Main Language	% of population
English	95.2%
Polish	0.8%
Romanian	0.5%
Portuguese	0.4%
Spanish	0.2%
Hungarian	0.2%
Hindi	0.2%
Tamil	0.1%
Italian	0.1%
French	0.1%

Source: ONS, Census 2021

Population changes

4.18 Any sustained population changes can affect demands on pharmaceutical services and are therefore taken into consideration in this PNA.

Population size projections

4.19 The latest ONS population projections predict a 0.3% decrease (408 people) in West Berkshire's overall population (ONS 2018-based subnational population projections, 2020). Factoring in the age of the dataset, the new dwelling forecasts are likely to be more indicative of population changes.

New dwellings

4.20 1,540 new dwellings are expected to be completed from the period 2024/25 to 2027/28. The largest of these sites will be in Theale and Newbury areas. It should be noted that these are proposed developments, and not all the units will be completed within the anticipated time.

Table 4.3: Scheduled housing developments by ward

Ward	2024/25	2025/26	2026/27	2027/28	Ward Total
Newbury Greenham	113	89	112	46	360
Theale	82	112	75	60	329
Newbury Speen	80	86	55	30	251
Burghfield & Mortimer	63	69	20	12	164
Newbury Wash Common			50	100	150
Thatcham West	30	50	11		91
Newbury Clay Hill	25	25	25		75
Newbury Central		36	36		72
Aldermaston		26			26
Tilehurst and Purley	14				14
Lambourn			8		8
Year Total	**407**	**493**	**392**	**248**	**1,540**

Source: West Berkshire Council

4.21 Of all the sites, Sandleford is expected to be the largest, delivering a total of 1,300 homes in the next 10 years. Other large sites expected to deliver homes during the PNA's lifetime are shown in the table below. These new dwellings are designed to be family homes, with an accompanying school being constructed at the Sandleford site.

Table 4.4: Scheduled housing developments by development site

Site Name	Ward	2024/25	2025/26	2026/27	2027/28	Site Total
Lakeside development from Ridgepoint Homes	Theale	30	60	60	60	210
Woodlark Place from Charles Church	Newbury Greenham	50	50	57		157
The Chase at Newbury Racecourse from David Wilson Homes	Newbury Greenham	15	39	55	46	155
Sandleford Park East	Newbury Wash Common			50	100	150
Ochre Meadows from Croudace Homes	Theale	37	52	15		104
The Brooks from Croudace Homes	Burghfield & Mortimer	49	51			100
Lapwing Green from David Wilson Homes	Newbury Speen	10	30	30	30	100
Donington Heights from David Wilson Homes	Newbury Speen	35	35	25		95
Lambourn Meadows from Charles Church	Thatcham West	30	50	11		91
Knights Grove from Cala Homes	Newbury Clay Hill	25	25	25		75
Land to rear of 1-15 The Broadway (Bayer site)	Newbury Central		36	36		72
Shaw Valley from Taylor Wimpey	Newbury Speen	35	21			56
Sterling Gardens from Nelson Group	Newbury Greenham	48				48
Tower House Farm from TA Fisher	Burghfield & Mortimer	14	18			32
Land to the rear of The Hollies, Burghfield Common	Burghfield & Mortimer			20	12	32
Comfort Inn And Land To The South West , Bath Road, Padworth	Aldermaston		26			26
The Botanics from TA Fisher	Theale	15				15
Magna Gardens from Shanly Homes	Tilehurst and Purley	14				14
RSA15 - Land at Newbury Road, Lambourn	Lambourn			8		8
Year Total		**407**	**493**	**392**	**248**	**1540**

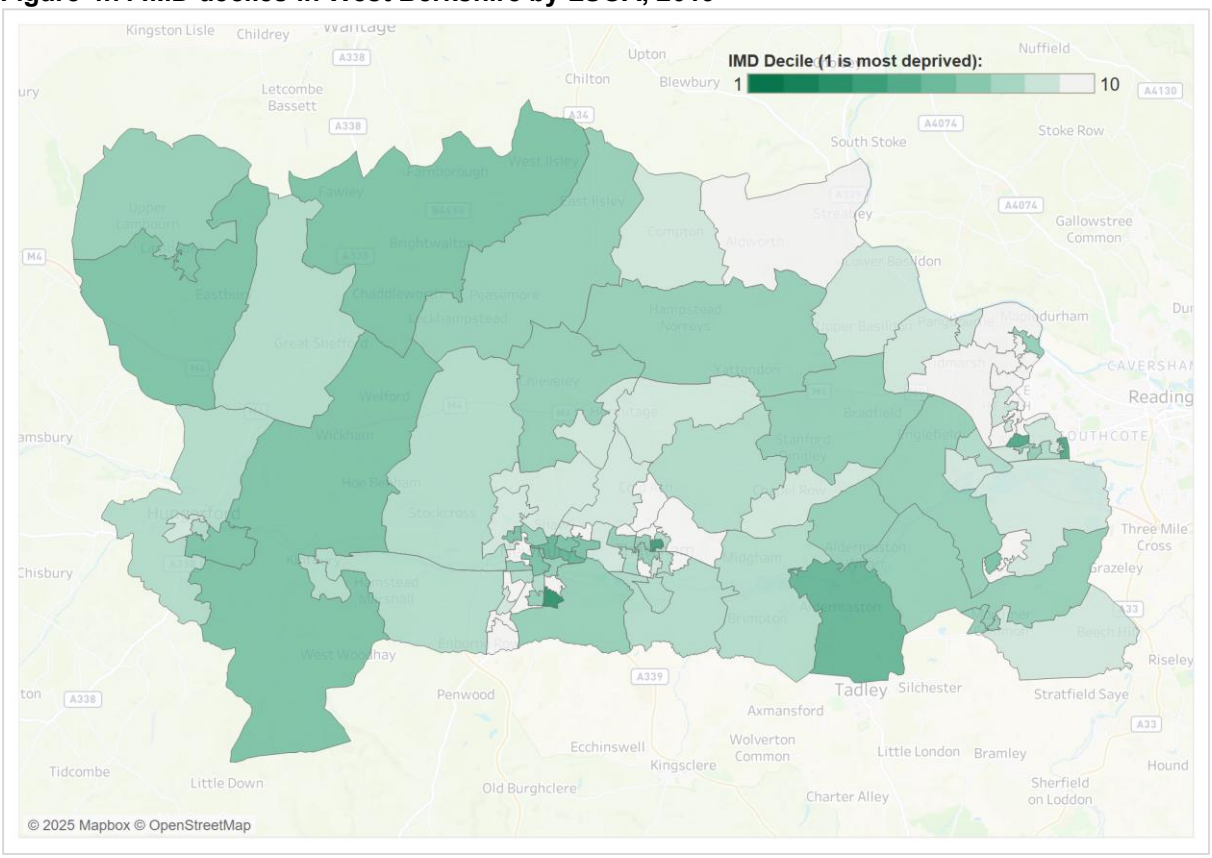
Wider determinants of health

Index of Multiple Deprivation

4.22 The Index of Multiple Deprivation (IMD) is a well-established combined measure of deprivation based on a total of 37 separate indicators that encompass the wider determinants of health and reflect the different aspects of deprivation experienced by individuals living in an area. The 37 indicators fall under the following domains: Income Deprivation, Employment Deprivation, Health Deprivation and Disability, Education, Skills and Training Deprivation, Barriers to Housing and services, Living Environment Deprivation and Crime.

4.23 West Berkshire is ranked 147 out of England's 151 upper tier local authorities, where 1 is the more deprived local authority. Stated another way, there are only 4 other local authorities in the nation that have less deprivation than West Berkshire. Only one neighbourhood (LSOA) out of West Berkshire's 97 is among the nation's 20% most deprived ones (IMD decile of 1 or 2). This means that West Berkshire is one of the least deprived areas in England.

Figure 4.7: IMD deciles in West Berkshire by LSOA, 2019



Source: Ministry of Housing, Communities & Local Government

Other economic markers

4.24 2.5% (2,100) of the working-age population in the district were unemployed in 2023. This is substantially lower than the England rate at 3.7% and the lowest reported rate in South East England (OHID, Public Health Outcomes Framework, 2025).

4.25 3,068 (10%) children residing in the district were from relatively low-income families in 2022/23. This is a lower proportion than England where 19.8% of children were from low-income families, and the third lowest proportion in South East England.

4.26 In 2022, 7.7% of people did not have enough income to afford sufficient fuel. This is lower than the regional rate of 9.7% and the national rate of 13.1% (OHID, Public Health Outcomes Framework, 2025).

4.27 552 (8.3 per 1,000) households with dependent children in West Berkshire are owed a duty under the Homelessness Reduction Act (2023/24 data). This means that they have been identified as homeless by the local authority and the local authority must take reasonable steps to help them to secure accommodation. This is lower than the England rate of 11.3 per 1,000 households, and lower than the South East England rate of 7.5 per 1,000 households (OHID, Public Health Outcomes Framework 2019/20).

4.28 'Underserved' communities, such as those who are homeless or sleeping rough, and people who misuse drugs or alcohol may be more likely to go to a community pharmacy than a GP or another primary care service. Pharmacies play an essential role in addressing their health needs by providing accessible health care through acting as the first point of contact for individuals in these communities who may face barriers to accessing GPs or hospitals. Additionally, many pharmacies offer public health initiatives, such as smoking cessation programs, weight management services, and immunisations, which can directly benefit communities facing health disparities They can also help people who are homeless with support in areas such as medicines management and signposting to other health and wellbeing services.

Rurality

4.29 People living in rural areas generally experience greater financial stability and better overall health than those in urban settings.[9] However, this broad advantage can sometimes mask inequalities within rural communities, where some face significant deprivation and poorer health outcomes. Those in more remote rural locations often encounter greater challenges.

4.30 According to the Rural Deprivation Index for Health, no areas in West Berkshire are ranked within the 10% most disadvantaged in the district. However, one neighbourhood in Hungerford, considered to be a rural town, falls within the 30-40% most disadvantaged areas of England.

4.31 Overall, rural populations are older than those in urban areas, with an average age nearly six years higher. Across the UK, approximately 24.5% of rural residents are aged 65 or over. [10]

4.32 Rural residents face several healthcare challenges, including limited public transport, longer travel distances to medical facilities, an ageing population, issues with housing quality, poor digital connectivity, and difficulties in recruiting healthcare workers. These factors can make it harder for people to access the care they need.

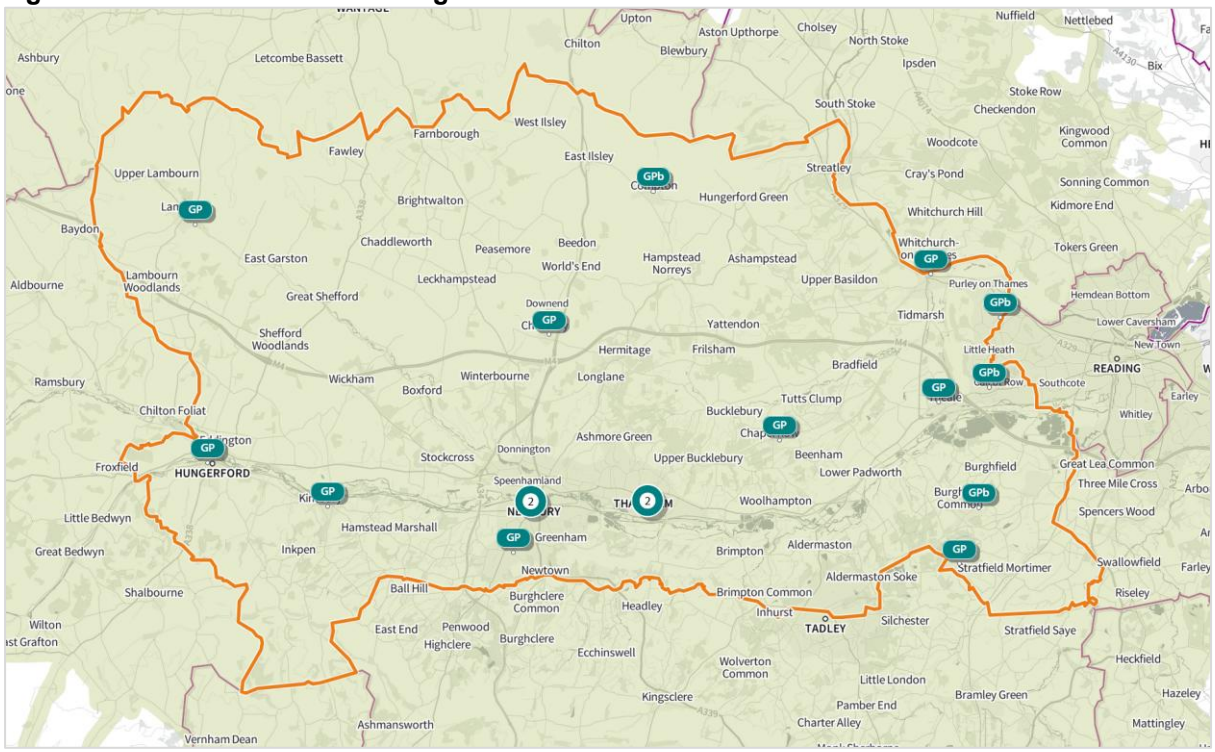
4.33 Access to healthcare and social services is more difficult in rural areas due to longer travel distances to GP surgeries, dentists, hospitals, and other health facilities. This can lead to 'distance decay', where service use declines as distance increases. In West Berkshire, all residents live within a 20-minute drive of a local GP (Figure 4.8).

4.34 Rural communities also tend to be less diverse, with around 95% of residents identifying as White British. Minority ethnic groups are present in much smaller numbers and may lack the social and community support that is more readily available in urban areas, increasing the risk of social isolation and exclusion.

[9] DEFRA (updated April 2025). Official Statistics, Key Findings, Statistical Digest of Rural England. https://www.gov.uk/government/statistics/key-findings-statistical-digest-of-rural-england/key-findings-statistical-digest-of-rural-england#health-and-wellbeing

10 UK Parliament (2023). Health care in rural areas. House of Lords Library.

Figure 4.8. 20-minute drive coverage to a West Berkshire GP



Source: OVID, Strategic Health Asset Planning and Evaluation Atlas Tool, 2025

Patient groups with specific needs

People who sleep rough

4.35 In 2024, an estimated 8 out of every 100,000 people in West Berkshire were sleeping rough (Annual Rough Sleeping Snapshot in England: Autumn 2024). West Berkshire Council is committed to tackling the root causes of homelessness and rough sleeping, ensuring vulnerable individuals receive the support they need to secure and maintain stable housing.

4.36 The Council's Preventing Homelessness and Rough Sleeping Strategy 2020-2025[11] outlines key priorities for addressing homelessness in the district:

1. Prevention and Early Intervention: Identifying individuals at risk and providing support before they reach crisis point.
2. Reducing Rough Sleeping: Implementing targeted strategies to decrease and ultimately eliminate rough sleeping.

11 West Berkshire Council. (2020). Preventing Homelessness and Rough Sleeping Strategy 2020-2025. West Berkshire Council. Available at: https://www.westberks.gov.uk/media/48320/Preventing-Homelessness-and-Rough-Sleeping-Strategy-2020-2025/pdf/Homelessness_Strategy__Final_191231.pdf

3. Increasing Housing Options: Expanding affordable and suitable housing choices.
4. Strengthening Partnerships: Working closely with local authorities, service providers, and community organisations to deliver a coordinated response.
5. Enhancing Communication: Ensuring residents are aware of available services and support.

4.37 Pharmacies play a crucial role in supporting the health and well-being of people experiencing homelessness. As easily accessible services, often located in areas of high deprivation, they provide an important point of contact for marginalised groups, including those without stable accommodation or those struggling with substance misuse. Many individuals in these situations are more likely to seek support from a pharmacy than a GP or other healthcare provider, as pharmacies offer a safe and confidential environment for advice and assistance.

4.38 Pharmacists provide essential support with managing medication, promoting hygiene, offering sexual health services and vaccinations, and signposting individuals to further health and social care services. They also play a key part in harm reduction by offering advice, supplying clean needles to those who inject drugs, and providing supervised consumption services for individuals facing substance misuse challenges.

People who have experienced domestic abuse

4.39 Domestic violence was identified as a significant area of concern by the steering group. In 2023 to 2024, there were 25.1 domestic abuse-related incidents per 1,000 people, a figure close to the South East rate of 23.9 and the national rate of 27.1 per 1,000. Recorded sexual offences stood at 2 per 1,000 people, lower than the South East and national averages of 2.7 and 2.9 per 1,000 respectively. Hospital admissions for violence, including sexual violence, were lower in West Berkshire (12 per 100,000 admissions) compared to the South East figure of 24.1 and the England average of 34.2 during 2021/22–2023/24 (OHID, Public Health Profiles 2025).

4.40 In May 2023, West Berkshire Council conducted a needs assessment on domestic abuse services, leading to the development of the Draft Domestic Abuse Strategy 2023-2027.[12] This strategy outlines four key priorities:

1. Prevention: Acting before harm occurs to prevent domestic abuse.
2. Early Identification and Safety: Recognizing domestic abuse promptly and enhancing the safety of those at risk.
3. Addressing Perpetrators: Identifying and intervening with individuals causing harm.
4. Empowerment and Recovery: Supporting survivors to recover and live free from harm.

4.41 Pharmacies can play a vital role in supporting individuals affected by domestic abuse in several ways. This includes serving as a safe place for individuals to seek help discreetly without fear of being overheard, providing confidential advice and support including offering information on local domestic abuse services/resources and signposting where necessary.

4.42 Pharmacists are trained to recognise the signs of domestic abuse so can recognise these signs early and respond appropriately. Additionally, they can provide emergency contraceptives and medications for injuries resulting from abuse. They can also help with mental health support through making appropriate referrals.

Gypsy, Roma, Traveller and Horse Racing Communities

4.43 Gypsy, Roma and Traveller communities are the most disadvantaged minority groups in Europe, experiencing the poorest health outcomes.[13] A recent Briefing on health inequalities experienced by Gypsy, Roma and Traveller communities discussed severe health inequalities experienced by the communities. It included, lower life expectancy, higher rates of long-term illness, and mental health struggles. Discrimination, mistrust of healthcare services, and barriers like poor access to education and inadequate accommodation exacerbate these issues. Additionally, it

12 West Berkshire Council. (2023). Draft Domestic Abuse Strategy 2023-2027. West Berkshire Council. Available at: https://www.westberks.gov.uk/article/42800/Draft-Domestic-Abuse-Strategy-2023-2027

13 Alison McFadden, Lindsay Siebelt, Anna Gavine, Karl Atkin, Kerry Bell, Nicola Innes, Helen Jones, Cath Jackson, Haggi Haggi, Steve MacGillivray, Gypsy, Roma and Traveller access to and engagement with health services: a systematic review, European Journal of Public Health, Volume 28, Issue 1, February 2018, Pages 74–81

discussed challenges like digital exclusion and difficulties in registering with GP practices further hinder access to proper healthcare.[14] Key areas for improvement include enhancing healthcare access, building trust through culturally competent services, and improving data collection to better address these health disparities.[15]

4.44 There are 192 West Berkshire residents from the Gypsy, Roma and Traveller community (2011 Census).

4.45 West Berkshire Council is proactively addressing needs of Gypsy, Roma, and Traveller communities through the development of the Gypsy and Traveller Accommodation Development Plan[16] and a Ethnic Minority & Traveller Achievement Service.[17]

4.46 West Berkshire, particularly the village of Lambourn, is renowned as a significant centre for racehorse training. The area has a rich history and infrastructure supporting the horse racing industry, with training grounds that were granted royal approval in the 1960s. Lambourn is home to several key facilities for horse racing, such as rehabilitation centres for injured jockeys and equine hospitals.[18]

4.47 The council has engaged in initiatives such as the Rural Business Forum, which brings together rural businesses, including those related to horse racing, to discuss challenges and opportunities within the sector.

4.48 Pharmacies can provide culturally aware services, ensuring that staff are trained to understand the specific needs and health beliefs of GRT communities. They can also improve access by offering services in locations where GRT communities frequently reside, including outreach in temporary encampments or at community events and partnering with local GRT and horse racing organisations to enhance outreach efforts and ensure that services are effectively tailored to the community's needs.

14 Gypsy Traveller Empowerment. (2022). Health inequalities experienced by Gypsies and Travellers in England. Retrieved from https://www.gypsy-traveller.org/wp-content/uploads/2022/11/Briefing_Health-inequalities-experienced-by-Gypsies-and-Travellers-in-England.pdf

15 European Journal of Public Health. (2024). Gypsy, Roma and Traveller access to and engagement with health services: A systematic review. European Journal of Public Health, 28(1), 74-81. https://academic.oup.com/eurpub/article/28/1/74/4811973

16 West Berkshire Council. (2024). West Berkshire Local Plan. Local Development Scheme. West Berkshire Council. Available at West Berkshire Local Plan. Local Development Scheme. March 2024

17 Ethnic Minority & Traveller Achievement Service (EMTAS): West Berkshire Education. (n.d.). Ethnic Minority & Traveller Achievement Service (EMTAS). West Berkshire Education. Available at: https://westberkseducation.co.uk/Page/5337

18 Horse Racing and Equestrian Activities in West Berkshire: North Wessex Downs AONB. (2021). Racing Industry Study. North Wessex Downs. Available at: https://www.northwessexdowns.org.uk/wp-content/uploads/2021/11/RacingIndustryStudy.pdf

Summary of the demographics of West Berkshire

West Berkshire is a generally affluent rural unitary authority in Berkshire, vast areas of which are rural. Its population is estimated to be 161,333 residents. West Berkshire has a comparatively older population with a median age of 43 years.

Ethnic diversity is fairly low in West Berkshire, with only 8% of its population from a ethnic minority. 94% of the population speak English as a main language.

Groups with specific needs were people sleep rough, people who experience domestic abuse and the Gypsy, Roma, Traveller and Horse Racing communities. Pharmacies can support these groups by improving access to health care services, providing a safe space and culturally aware services.

Chapter 5 - Population health needs

5.1 This chapter provides an overview of health and wellbeing in West Berkshire, with a particular focus on areas likely to affect the needs for community pharmacy services. It examines life expectancy and healthy life expectancy in West Berkshire and includes an exploration of risk factors and major health conditions.

5.2 All the data in this chapter is sourced from the Office for Health Improvement and Disparities, Public Health Profiles, 2025.

Life expectancy and healthy life expectancy

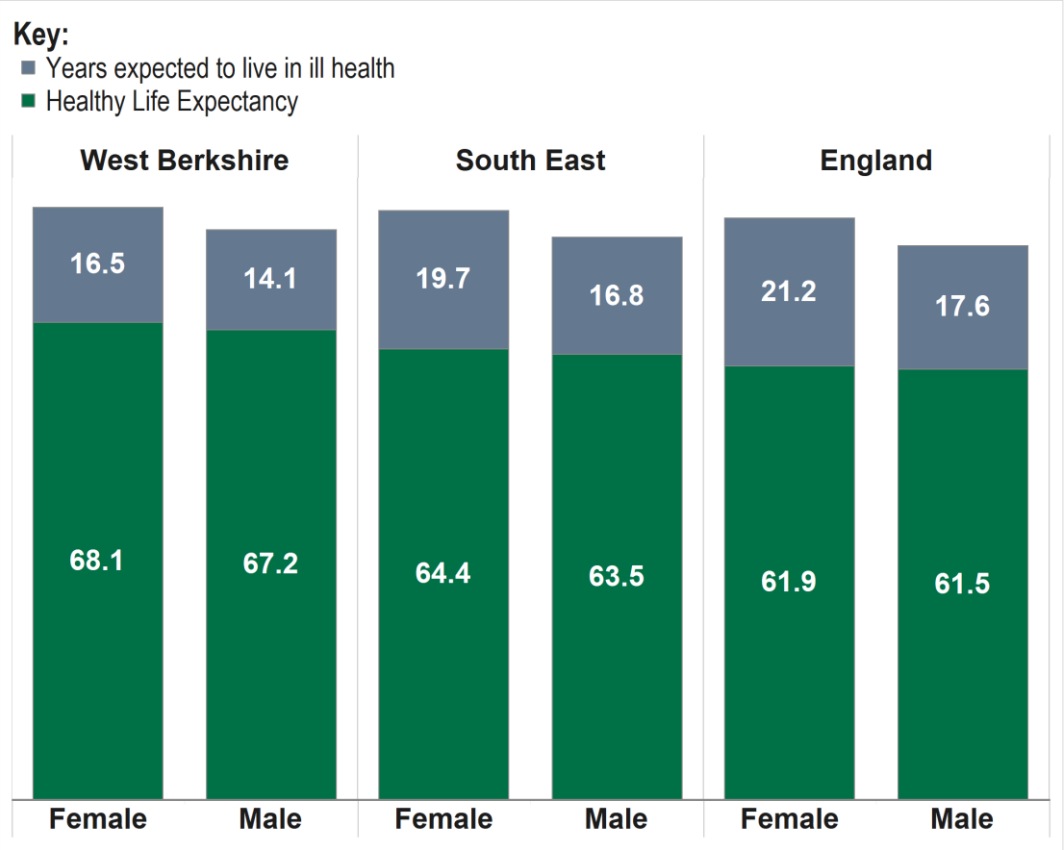
5.3 Life expectancy is a statistical measure that indicates the average number of years a person is expected to live. Healthy life expectancy at birth represents the average number of years an individual can expect to live in good health, based on age-specific mortality rates and the prevalence of good health in their area.

5.4 Residents of West Berkshire continue to have higher life expectancy and healthy life expectancy compared to both the South East region and England as a whole. The latest figures for 2021 to 2023 show that life expectancy in West Berkshire is 81.3 years for males and 84.6 years for females, significantly above national and regional averages.

5.5 Figure 5.1 below presents life expectancy and healthy life expectancy in years for men and women across West Berkshire, South East England and England. Healthy life expectancy, defined as the number of years a person can expect to live in good health, stands at 67.2 years for males and 68.1 years for females, both notably higher than the national and regional averages.

5.6 However, this data also highlights that on average, males in West Berkshire can expect to live 14.1 years in ill health, while females may spend up to 16.5 years in poor health.

Figure 5.1: West Berkshire Life expectancy and healthy life expectancy



Risk factors

5.7 Community pharmacies are often situated at the heart of communities, providing 'walk-in' access to their services. This makes them ideally positioned to offer opportunistic screening and brief interventions to promote better health and wellbeing.

5.8 The NHS Community Pharmacy Contractual Framework requires community pharmacies to have appropriate provisions in place to offer health promotion on risk factors such as smoking cessation and weight management. They also provide advice on wellbeing and self-care. These interventions aim to engage the public by using every interaction as an opportunity for health promotion and signposting to other relevant services.

5.9 This section of the chapter explores health behaviours and lifestyle factors that can impact a person's health and wellbeing. It also examines how pharmacies can support these through the Healthy Living Pharmacy framework and by signposting. Topics

include weight management, physical activity, smoking, alcohol consumption and substance misuse, mental health, and sexual health.

Smoking

5.10 Smoking is the leading cause of premature death and preventable illness in England. It is the main factor contributing to the gap in healthy life expectancy between more affluent and more deprived populations. Smoking is estimated to account for over 16% of all premature deaths in England and more than 9% of years of life lost due to ill health, disability or early death. It is a major cause of numerous diseases and conditions, including cancer, respiratory diseases and cardiovascular diseases.

5.11 Smoking prevalence is relatively low in West Berkshire. In 2023, 9.7% of adults aged 18 and over in West Berkshire smoked, compared to 11.6% in England and 10.6% in the South East. However, smoking rates are higher among those in routine and manual occupations. In 2023, 15.1% of routine and manual workers in West Berkshire smoked, compared to 19.5% in England and 18.4% in the South East.

5.12 Smoking prevalence is also monitored among pregnant women due to its harmful effects on both maternal health and the baby's growth and development. In 2023 to 2024, 5.9% of mothers in West Berkshire smoked at the time of delivery, which is lower than the figures for England (7.4%) and the South East (6.8%).

5.13 Community pharmacies often provide leaflets and booklets that contain useful information on how to quit smoking and health risks associated with smoking. As detailed in chapter 8, they also offer smoking cessation services which encompasses provision of brief advice on stopping smoking, advice on vaping, provision of nicotine replacement therapies as well prescription medicines such as varenicline and bupropion that can help individuals manage their cravings.

Alcohol

5.14 Harmful drinking is a major public health concern in the UK, associated with numerous health issues such as brain damage, alcohol poisoning, chronic liver disease, breast cancer, skeletal muscle damage, and poor mental health. Additionally, alcohol can

contribute to accidents, acts of violence, criminal behaviour, and various social problems.[19]

5.15 In 2023, there were 44 deaths classified as 'alcohol-related mortality' in West Berkshire. This resulted in a rate of 26.2 per 100,000 population, which is significantly lower than the rate for England (40 per 100,000) and the lowest in the South East region.

5.16 In 2023/24, there were 549 admission episodes for alcohol-specific conditions in West Berkshire. This is a rate of 333 per 100,000 population, which is lower than the rate for England of 581 and the 2nd lowest rate in the South East region.

5.17 Community pharmacies play a crucial role in connecting individuals to local addiction services. Some pharmacies are also able to provide medicine used in the treatment of alcohol use disorder (alcoholism) such as Acamprosate.

Drug use

5.18 Substance misuse is linked to a range of mental health issues, including depression, disruptive behaviour and suicide. Between 2021 and 2023, there were 15 deaths in West Berkshire due to drug misuse. This equates to a rate of 3.3 per 100,000 population, which is lower than the rates for England (5.5 per 100,000) and the South East (4.3 per 100,000).

5.19 In 2023, 5.8% of drug users aged 18 and over in West Berkshire successfully completed treatment for opiate use, a figure similar to England (5.1%) and the South East (6.5%). Among non-opiate users aged 18 and over, the successful treatment completion rate in West Berkshire was 34.9%, compared to 29.5% for England and 30.9% for the South East.

5.20 Community pharmacies provide harm reduction services such as offering needle exchange, opioid substitution therapies such as methadone and Buprenorphine as well as supervised consumption services as documented in chapter 7. Some pharmacies are also able to provide medicine such as naloxone for the reversal of opioid overdoses.

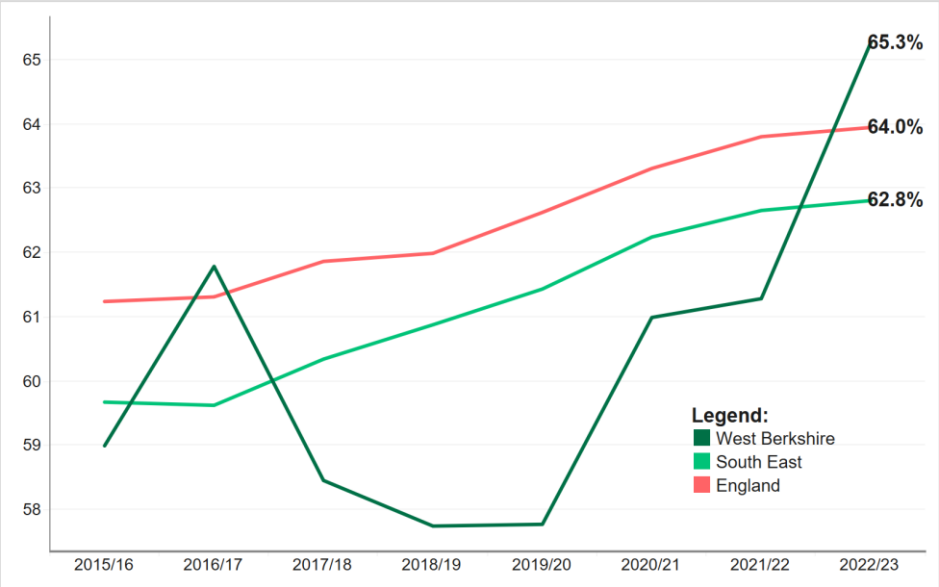
19 GOV.UK - Health matters: harmful drinking and alcohol dependence

Weight management

5.21 Obesity is a major contributor to premature mortality and preventable ill health. It increases the risk of various diseases, including certain cancers, high blood pressure and type 2 diabetes, and raises the likelihood of death from COVID-19 by 40% to 90%. An individual is classified as obese when their Body Mass Index (BMI) exceeds 30.

5.22 In 2022/23, 65.3% of adults in West Berkshire were classified as overweight or obese, a figure similar to the national average. These rates have been rising slightly each year since 2018/19 (Figure 5.2).

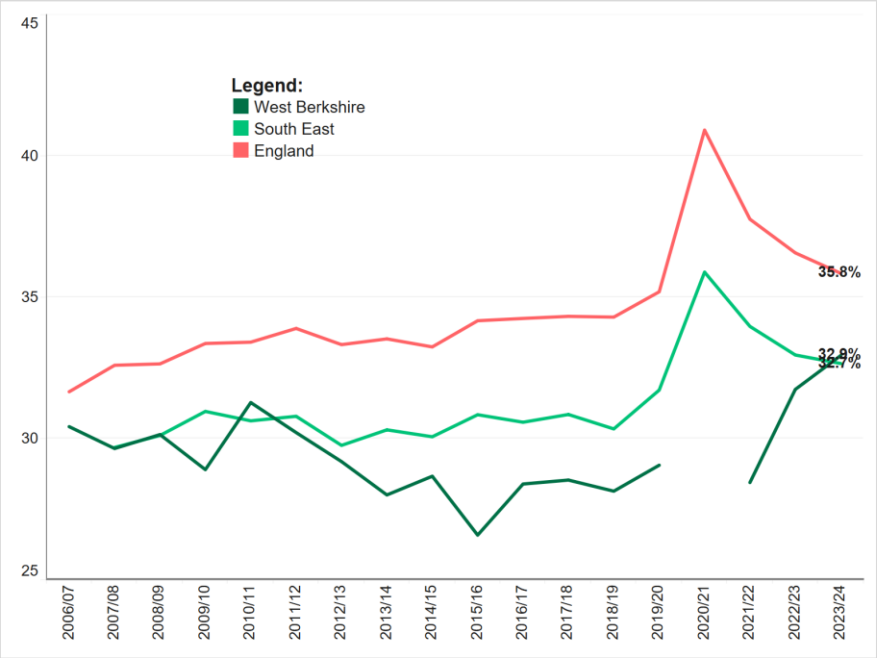
Figure 5.2. Prevalence of overweight and obese in adults in West Berkshire, South East England and England 2015/16-2022/23



5.23 Childhood obesity is increasing and has a significant impact on long-term health outcomes. Children who are overweight or obese may experience elevated blood lipids, glucose intolerance, type 2 diabetes, hypertension, and liver enzyme increases linked to fatty liver disease. Additionally, obesity can worsen conditions such as asthma and lead to psychological issues, including social isolation, low self-esteem, teasing and bullying.

5.24 In 2023/24, 21% of children in Reception Class in West Berkshire were classified as overweight or obese, a figure similar to the national average. Among children in Year 6, 32.9% were overweight or obese, a rate lower than the national average. However, obesity levels among Year 6 children have been rising since 2018/19.

Figure 5.3. Prevalence of overweight and obese in Year 6 children in West Berkshire, South East England and England 2006/07-2022/23



5.25 Community pharmacy teams can now identify people who would benefit from weight management advice and provide an onward referral to local weight management support or the NHS Digital Weight Management Programme which provides opportunity for one-to-one coaching from a weight loss expert.

Physical activity

5.26 Individuals who maintain a physically active lifestyle have a 20-35% lower risk of developing cardiovascular disease, coronary heart disease, and stroke compared to those who are sedentary. Physical activity is also linked to improved mental health and overall wellbeing. According to the Global Burden of Disease study, physical inactivity is directly responsible for 5% of deaths in England and is the fourth leading risk factor for global mortality.[20]

5.27 West Berkshire residents are relatively active. In 2022/23 71% of adults in West Berkshire were considered 'physically active', similar to the England figure of 67.1%. 20.7% of adults within the district were considered 'physically inactive', similar to the England figure of 22.9%.

20 World Health Organization - Global Status Report on Physical Activity 2022

Sexual health

5.28 Sexual health services in West Berkshire are provided by the Royal Berkshire NHS Foundation Trust, the Sexual Health Service, Thames Valley Positive Support, and a number of pharmacies across the area.

5.29 The rate of new sexually transmitted infection (STI) diagnoses in West Berkshire is lower than the national average. In 2023, the overall rate of new STI diagnoses per 100,000 population (excluding chlamydia in those under 25) was 210. This is the lowest rate in South East England (369) and significantly lower than the national rate for England (520).

5.30 Chlamydia is the most commonly diagnosed STI in England, with the highest prevalence among young adults. In 2023, there were 1,497 cases of chlamydia detected in West Berkshire, equating to a rate of 119 per 100,000 young people aged 15–24 (females). This is lower than the rates for England (1,962) and South East England (1,670). Chlamydia screening rates in West Berkshire are also low, with only 15% of 15–24-year-olds attending specialised sexual health clinics being screened in 2023. This is below the screening rates for England (20.4%) and South-East England (18.2%).

5.31 Community pharmacies play an important role in promoting and supporting sexual health in a variety of ways. This includes providing contraceptive counselling to help individuals choose between different methods of contraception, offering of emergency contraceptive services as well as products for on-going contraception. They also provide easy access to condoms both for purchase and sometimes free of charge through public health initiatives aimed at preventing sexually transmitted diseases.

5.32 Community pharmacies can act as trusted sources of information, offering leaflets, brochures, and one-on-one consultations on topics related to sexual health. Pharmacists can help individuals understand the signs and symptoms of common STIs, how to reduce the risk of contracting STIs through safe sex practices and how to seek treatment as well as when to get tested. Some pharmacies also offer screening services for STIs such as chlamydia. This can help people access testing more conveniently and encourage early detection and treatment.

HIV

5.33 The rate of HIV is comparatively low in West Berkshire. The latest figures show that there were 11 residents aged 15-59 years in West Berkshire in 2023 newly diagnosed with HIV. This equates to 6.7 per 100,000 population which is similar to the regional and national rates, both at 10 100,000 population.

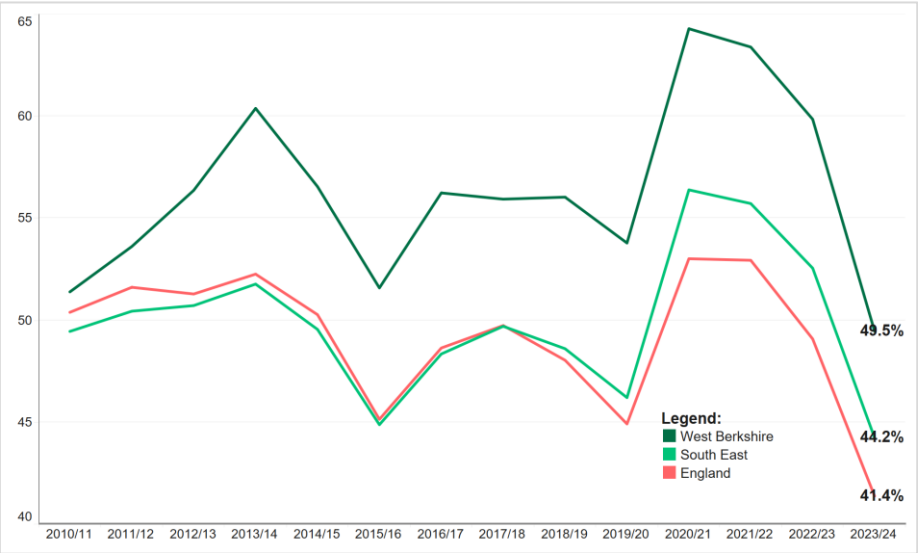
5.34 HIV testing coverage in 2023 is the lowest in the South East region of England. Only 1,698 per 100,000 people who attended specialist sexual health services were tested, which is substantially lower than the rate for England (2,770.7) and South East England (2,272.2).

Flu vaccination

5.35 The flu vaccination is offered to individuals at greater risk of developing serious complications from flu. In 2023/24, 84.5% of over-65s in West Berkshire received the vaccine, the highest coverage in the region. This is above the England average of 79.9% and exceeds the national vaccination coverage target of 75%.

5.36 Flu vaccination coverage for at-risk individuals aged 6 months to 64 years in West Berkshire was 49.5% in 2023/24, the highest in the region and above the England average of 41.4%. However, it remains below the national vaccination coverage target of 55%. The coverage rate for at-risk individuals has been declining in recent years (Figure 5.4).

Figure 5.4. Prevalence of vaccination coverage for flu for at risk individuals in West Berkshire, South East England and England 2010/11-2023/24



5.37 Community pharmacies play a vital role in the delivery of flu vaccinations, helping to improve accessibility and uptake of flu vaccines. Pharmacies provide walk-in services without the need for an appointment. They are widely distributed and often have extended opening hours, including evenings and weekends. These make it easier for individuals to access flu vaccinations without needing to visit a GP, which can be particularly beneficial for those with busy schedules. They also often serve as a key resource in reaching vulnerable populations who may be at higher risk of complications from the flu, such as older adults, people with chronic conditions, or pregnant women and are particularly helpful in reaching groups who might be less likely to visit their GP.

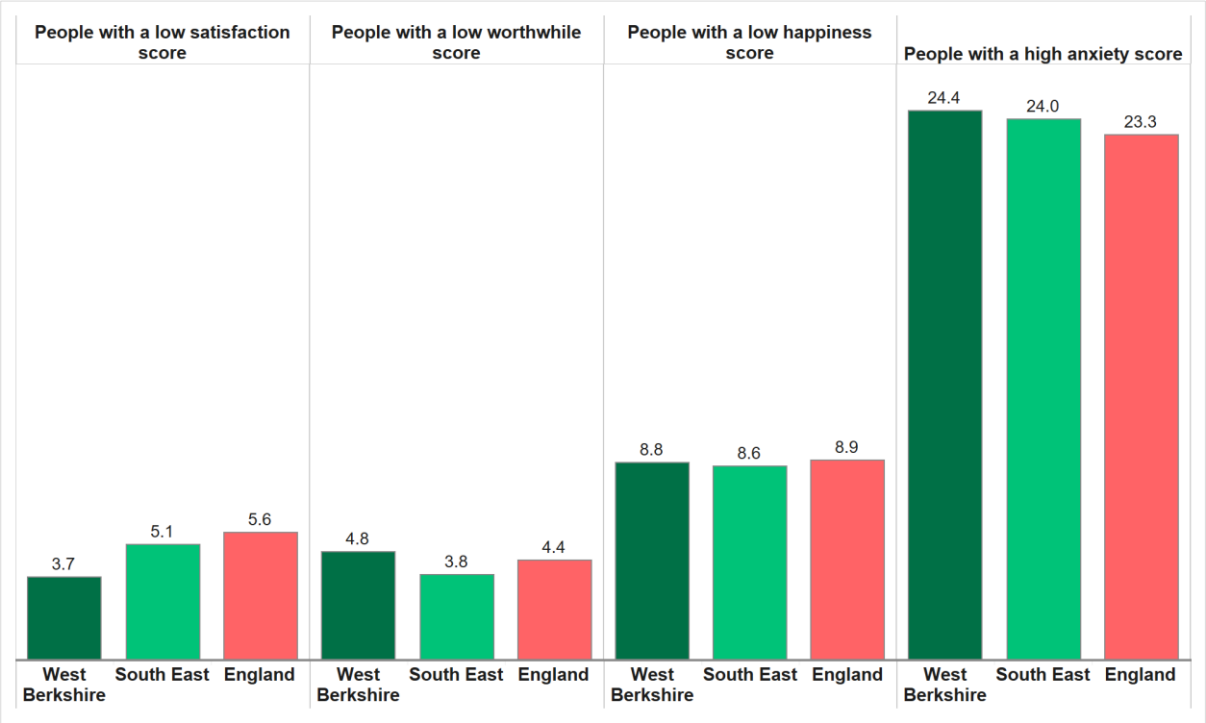
Mental wellbeing

5.38 Mental health and wellbeing is a priority area for the Berkshire West Health and Wellbeing Strategy.[21] The ONS dataset 'Personal well-being estimates by Local Authority'[22] uses four measures to access personal well-being: life satisfaction, feeling the things done in life are worthwhile, happiness, and anxiety. Figure 5.5 below presents the results from the latest survey wave (2022-23), showing the percentage of respondents scoring low for each indicator. It shows that West Berkshire has similar results to South East England and England for Anxiety, Happiness, Life Satisfaction and Worthwhileness.

21 Berkshire West Health & Wellbeing Strategy (2021-2030). https://www.bobstp.org.uk/berkshire-west/berkshire-west-integrated-care-system-ics/

22 ONS, Personal Wellbeing in the UK, 2020-2021, October 2021. https://www.ons.gov.uk/datasets/wellbeing-local-authority/editions/time-series/versions/2

Figure 5.5: Personal wellbeing scores in West Berkshire, South East England and England. May 2022/23



Social isolation and loneliness

5.39 Social isolation and loneliness can affect people of all ages but are more prevalent among older adults. They are linked to increased behavioural risk factors, poor mental health, and higher morbidity and mortality rates from conditions such as acute myocardial infarction and stroke. The 2021/22 to 2022/23 Active Lives Adult Survey asked residents, "How often do you feel lonely?", to assess the proportion who feel lonely always or often. West Berkshire had the second-lowest figure in the region, with 4.5% of respondents reporting frequent loneliness. This was lower than the national figure of 6.8% and the regional figure of 6.1%.

5.40 The 2023/24 Adult Social Care Survey found that 47.7% of adult social care users aged 18 and over, and 40% of those aged over 65, reported having as much social contact as they would like. While these figures are similar to regional and national averages, they highlight that more than half of older adults receiving social care do not have sufficient social contact and are likely experiencing isolation and loneliness.

5.41 Pharmacies play a crucial role in supporting population mental health and wellbeing. They can assist with the early identification of new or worsening symptoms in patients,

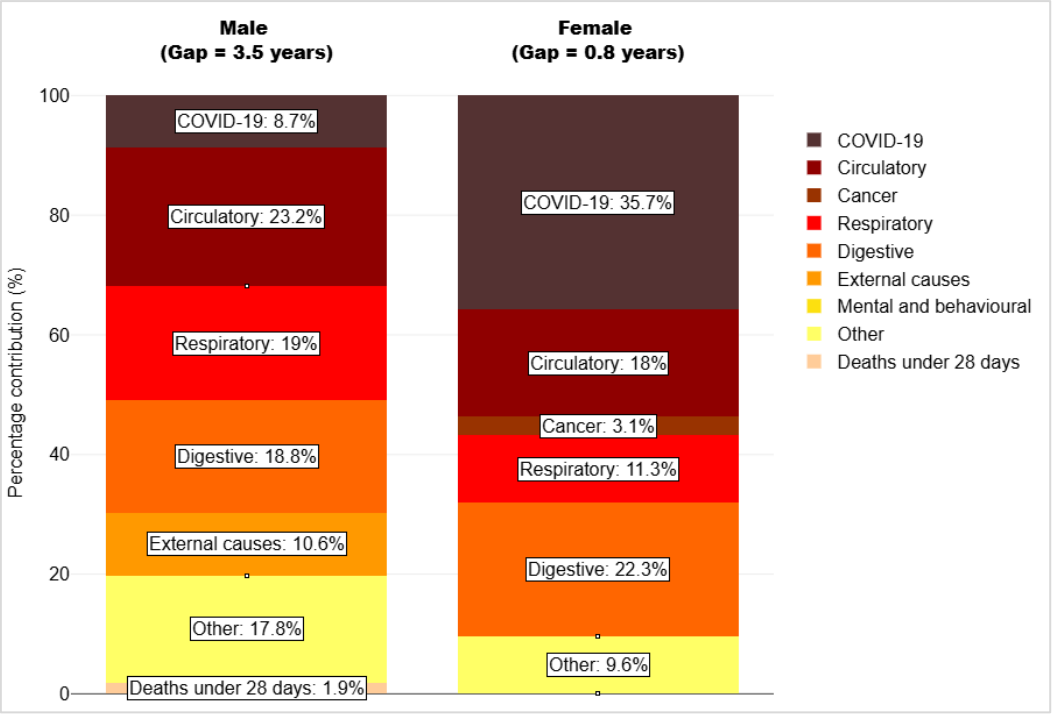
signpost or refer them to existing support services, and work with patients to ensure the safe and effective use of medications. Through services such as the new medicines service, pharmacists able to offer advice to patients on the use of mental health medications and promote adherence. In the event of a mental health crisis, pharmacists can provide immediate access to necessary medications, such as emergency supplies of medicines used for the treatment of mental health conditions, helping individuals manage their condition until they can access further support.

Major health conditions

5.42 The causes of the life expectancy gap between the most deprived and least deprived populations within a district provide valuable insight into which health conditions have the greatest impact on local populations and where a targeted approach is needed.

5.43 Figure 5.6 illustrates the breakdown of the life expectancy gap (by broad cause of death) between the most deprived and least deprived quintiles of West Berkshire for 2020 to 2021. It highlights circulatory diseases as the leading cause of life expectancy differences for males, accounting for 23.2%. For females, COVID-19 is the main contributor, responsible for 35.7% of the gap in life expectancy between deprivation quintiles.

Figure 2.6: Scarf chart showing the breakdown of the life expectancy gap between the most deprived quintile and least deprived quintile of West Berkshire, by broad cause of death, 2020-21



5.44 Respiratory issues are the next biggest contributor to the life expectancy gap for males, accounting for 19% of the disparity in West Berkshire. Digestive issues are the third leading cause of the life expectancy gap for males and the second for females, making up 18.8% and 22.3% of the gap, respectively. Circulatory diseases are the third largest cause of the gap for females, contributing to 18% of the disparity.

5.45 We will take a closer look at circulatory diseases, respiratory diseases, COVID-19 and digestive issues, and their impact in West Berkshire.

Circulatory diseases

5.46 Circulatory diseases, including coronary heart disease (CHD) and stroke, are the biggest cause of the differences in life expectancy in West Berkshire for males. For the period 2021-2023, the under 75 mortality rate from cardiovascular disease was 55.5 per 100,000 population which was lower than the figures for the South East region (62.8 per 100,000 population) and England (77.1 per 100,000 population).

5.47 The most recent prevalence of CHD patients in West Berkshire general practices (2023/24) (2.5%) was lower than the South East region (2.8%) and the overall England rate (3.0%).

5.48 Stroke prevalence is slightly lower in West Berkshire than the South East and England. In 2023/24, 1.7% of patients registered with a GP in West Berkshire had a stroke or transient ischaemic attack (TIA) diagnosis. This is slightly lower than the 1.9 percentage for both England and South East England.

COVID-19

5.49 The COVID-19 pandemic highlighted the significant impact of deprivation on health risks and outcomes. COVID-19 morbidity and mortality were more pronounced in more deprived areas and among people from minority ethnic backgrounds, who typically experience greater social inequality related to income, housing, education, employment, and working conditions. Nationally, the individuals who suffered the worst outcomes from COVID-19 were older, of Black or Asian heritage, and had underlying health conditions such as obesity or diabetes.[23]

23 The King's Fund. (2020). COVID-19 and Health Inequalities. Retrieved from: https://www.kingsfund.org.uk/publications/covid-19-and-health-inequalities

5.50 The impact of COVID-19 in West Berkshire is relatively low in comparison to the impact nationally and in the South East. The West Berkshire mortality rate for deaths due to COVID-19 across all ages for the period 2021-23 was 36.2 per 100,000 population. This was significantly lower than the England rate of 57.5 per 100,000 population and the 3rd lowest in the South East Region.

Respiratory diseases

5.51 Respiratory diseases, including flu, pneumonia, and chronic lower respiratory diseases such as chronic obstructive pulmonary disease, are among the leading causes of death in England for those under 75.

5.52 In West Berkshire, the under-75 mortality rate for respiratory diseases between 2021 and 2023 was 17.9 per 100,000 population. This rate is significantly lower than both the national rate for England, which stands at 30.3 per 100,000, and the rate for South East England at 24.8 per 100,000.

5.53 Furthermore, when considering preventable respiratory diseases, West Berkshire's under-75 mortality rate was 9.1 per 100,000 population. This is notably lower than the national rate of 18.0 per 100,000 and the rate for South East England, which is 15.0 per 100,000.

5.54 One of the major respiratory diseases is chronic obstructive pulmonary disease (COPD). The rate for Emergency hospital admissions for COPD for persons over 35 years for West Berkshire in 2023/24 was 220, which is significantly lower than the rate for England of 357 and the rate for South East England of 260. Helping people to stop smoking is key to reducing COPD and other respiratory diseases.

Digestive diseases

5.55 Digestive diseases are any health problems that occur within the digestive tract. The digestive tract includes the oesophagus, stomach, large and small intestines, liver, pancreas, and the gallbladder.

5.56 The under 75 mortality rate from liver disease for West Berkshire in 2023/24 was 13.8 per 100,000 population, which was significantly lower than the rate for England (21.9 per 100,000 population) and the 2nd lowest in South East England. For the same period, the under 75 mortality rate from alcoholic liver disease was 6.5 per 100,000

population, similar to the national rate of 12 per 100,000 population and the third lowest in the South East region.

Summary of health needs

Overall, the people of West Berkshire enjoy a good level of health. Life expectancy and healthy life expectancy are higher than regional and national figures for both males and females. However, there is an inequality gap in life expectancy between those living in the most deprived areas of West Berkshire compared to those living in the least deprived areas. In general, the health and behaviours of West Berkshire residents are better than South East England and England as a whole.

Circulatory diseases, COVID-19, respiratory diseases, and digestive diseases are the main causes of the gap in life expectancy between the most and least deprived areas. However, the prevalence of circulatory diseases including coronary heart disease and stroke were lower than regional and national comparators, as were premature mortality figures for cardiovascular disease, respiratory diseases and digestive diseases including liver disease.

Chapter 6 - Patient and public engagement survey

6.1 To understand the patient and public views of pharmacy use in West Berkshire, including how people access and use local pharmacies, a patient and public survey was widely disseminated between December 2024 and February 2025.

6.2 The survey also captured protected characteristics so an equality impact assessment could be carried out. A “protected characteristic” is a characteristic listed in section 149 (7) of the Equality Act 2010. There are also particularly vulnerable groups that experience a higher risk of poverty and social exclusion than the general population. These groups often face difficulties that can lead to further social exclusion, such as low levels of education and unemployment or underemployment. These protected characteristics include age, ethnicity, gender, pregnancy and/or breastfeeding, sexual orientation, employment status, relationship status, carer status and disability status.

6.3 Prior to dissemination, the survey was approved for use with the local population of West Berkshire by the PNA Task and Finish Group.

6.4 This chapter presents the findings of the survey and an equality impact assessment.

Communications engagement strategy

6.5 Working with the West Berkshire Council Communications Team and the Performance, Research and Consultation team, the survey was shared on social media platforms, on local resident e-newsletters and the West Berkshire Consultation and Engagement Hub. The survey was also shared with the West Berkshire community hubs.

6.6 The Buckinghamshire, Oxfordshire and Berkshire West (BOB), Integrated Care System also shared the survey with their Voluntary Sector organisations across Buckinghamshire, Reading and West Berkshire and posted it on their social media channels. They also shared it in the GP bulletin and presented it on the Digital Screens within Reading.

6.7 In addition, the survey was cascaded through:

- Gypsy/Roma/Traveller Pupils who completed the survey over the phone

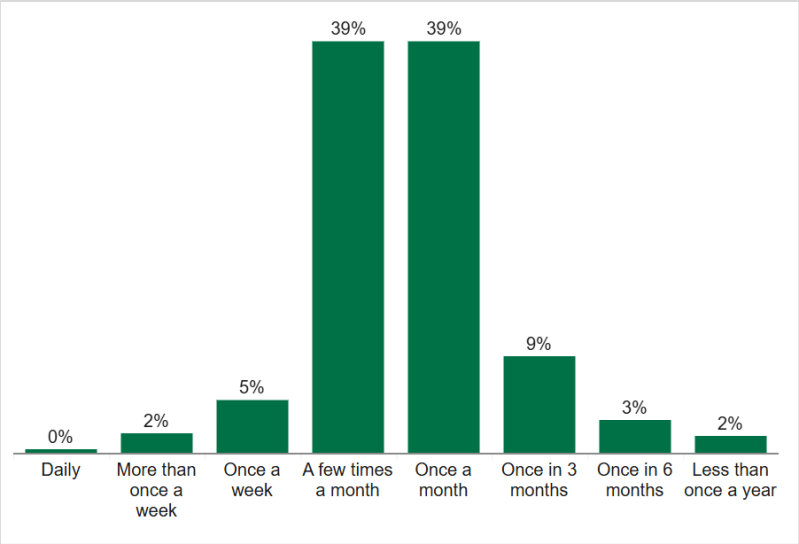
- Newbury College
- Narrowboat community via Healthwatch
- Lambourn Village Views, monthly newsletter – February edition

6.8 The public and patient survey received a total of 851 responses from people who live, work and/or study in West Berkshire.

Results of the public survey

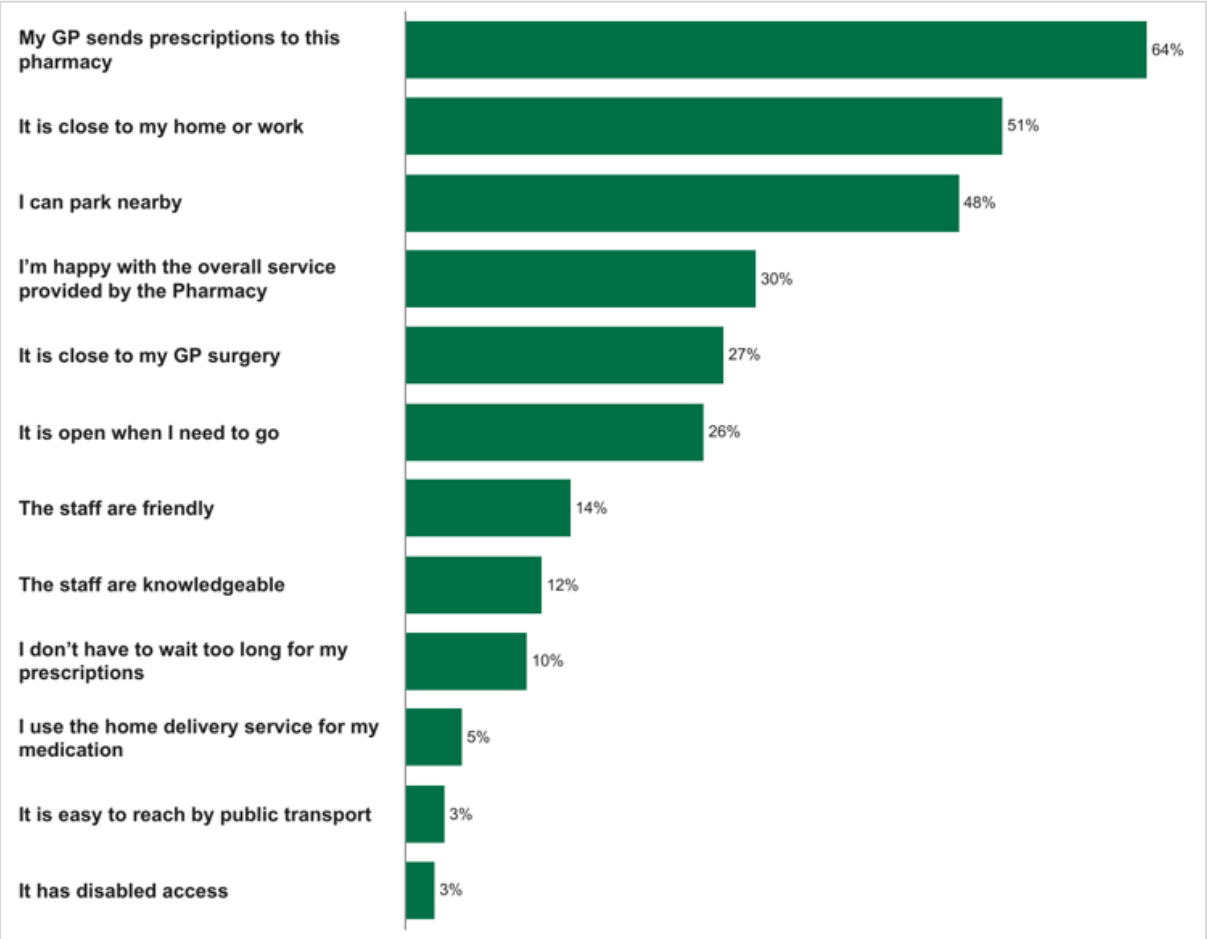
6.9 Local pharmacies are well used by the West Berkshire community. When asked how often they used their pharmacy in the past 6 months, 39% reported using their pharmacy once a month, 39% a few times a month, 9% once in 3 months, 5% once a week, 3% once in 6 months, 2% more than once a week and 2% less than once a year (Figure 6.1).

Figure 6.1: Survey responses on frequency of pharmacy use



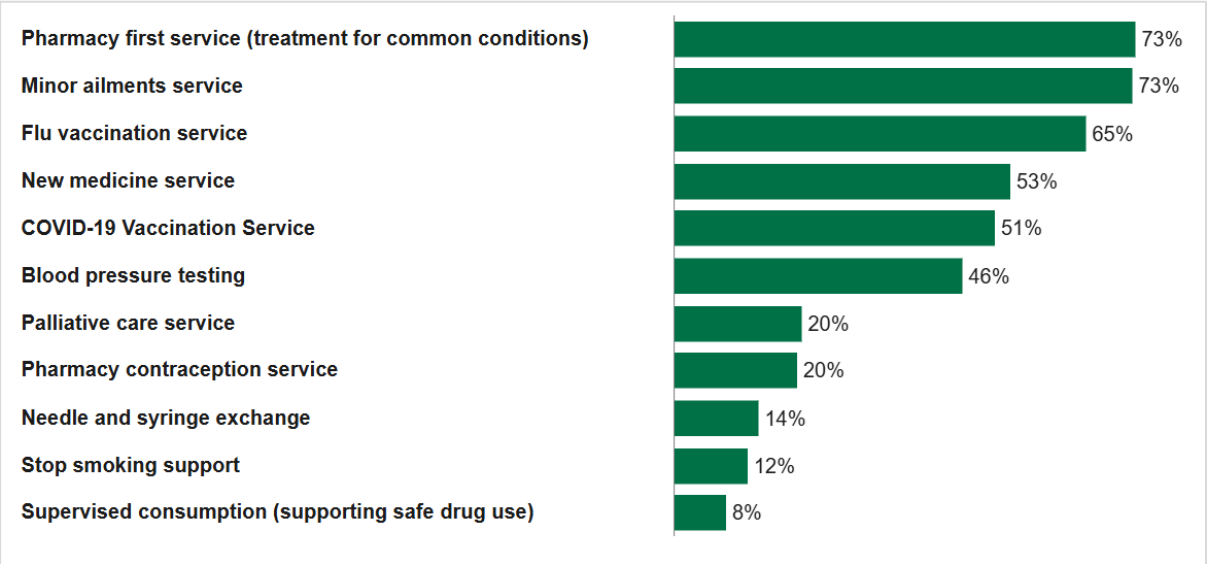
6.10 When asked to provide the top three reasons they chose their particular pharmacy, nearly two thirds (64%) reported that it was because it was where their GP sends their prescriptions, over half (51%) said that it was close to their home or work, nearly half (48%) can park nearby, 30% are happy with the overall service provided, for over a quarter (27%) it is close to their GP surgery and for just over a quarter (26%) it is open when they need to go (Figure 6.2).

Figure 6.2: Survey responses on reasons for pharmacy choice



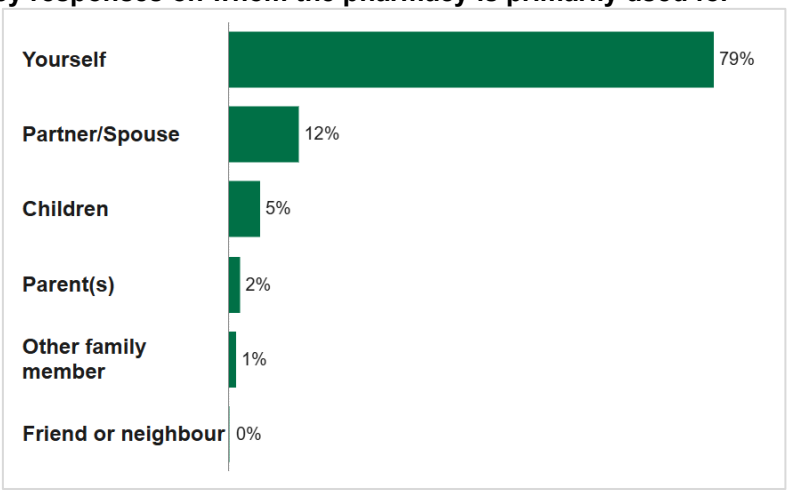
6.11 When asked what services they would like to see provided by their pharmacy, nearly three quarters (73%) of respondents reported that they would like a minor ailments service, just under two thirds (65%) would like to see a flu vaccination service, 53% a new medicine service, just over half (51%) a COVID-19 vaccination service and 46% a blood pressure testing service (Figure 6.3).

Figure 6.3: Survey responses on services respondents would like to see at their pharmacy



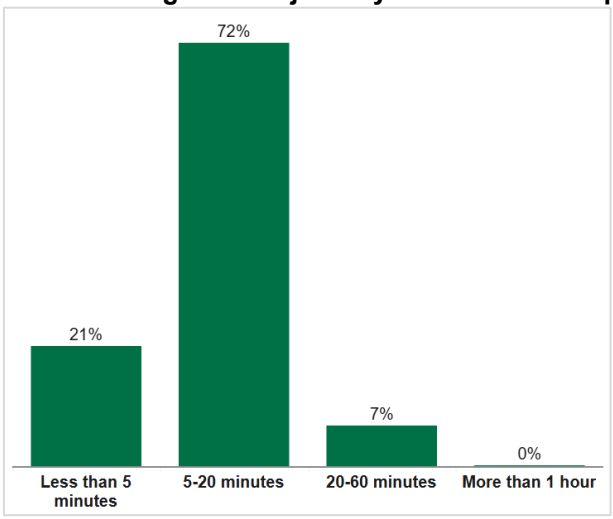
6.12 The vast majority (79%) of respondents reported that they primarily use a pharmacy for themselves, 12% primarily use a pharmacy for their partner/spouse, 5% use a pharmacy primarily for their children, 2% for their parent(s) and 1% for another family member (Figure 6.4).

Figure 6.4: Survey responses on whom the pharmacy is primarily used for



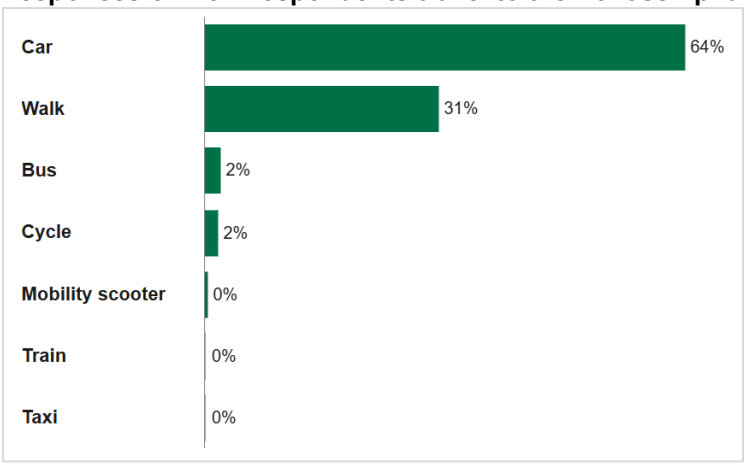
6.13 For a large proportion (72%) of respondents, it takes between 5 and 20 minutes to travel to their pharmacy, with over a fifth (21%) reporting that it takes them less than 5 minutes and only 7% spend between 20 and 60 minutes travelling to their pharmacy (Figure 6.5).

Figure 6.5: Survey responses on length of the journey to travel to their pharmacy



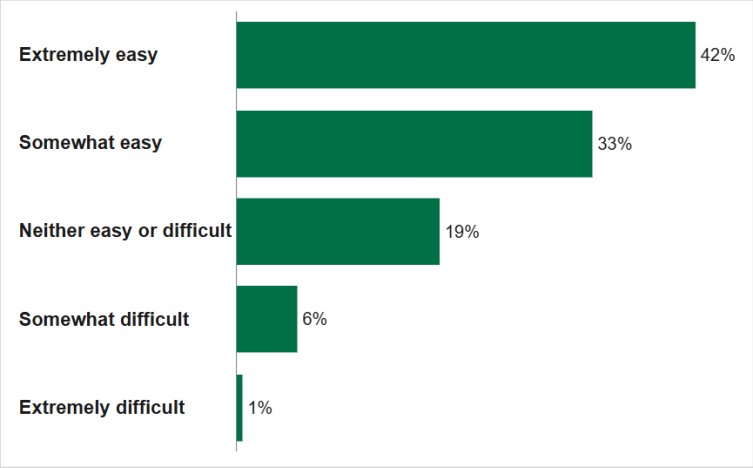
6.14 Nearly two thirds (64%) use a car to get to their pharmacy, 31% walk, only 2% travel by bus and 2% cycle (Figure 6.6).

Figure 6.6: Survey responses on how respondents travel to their chosen pharmacy



6.15 Generally, respondents are satisfied with the journey to their pharmacy, with a large proportion (42%) of respondents finding the journey to reach their pharmacy extremely easy, a third (33%) finding it somewhat easy, nearly a fifth (19%) finding it neither easy nor difficult, 6% finding it somewhat difficult and 1% extremely difficult (Figure 6.7).

Figure 6.7: Survey responses on how respondents find their journey to their pharmacy



6.16 Most respondents (57%) preferred to visit their pharmacy on a weekday, 35% did not have a preference for whether they visit their pharmacy on a weekday or weekend and 10% preferred to go on a weekend (Figure 6.8). A large proportion of respondents (41%) reported that they usually visit their pharmacy between 9am and 12pm, 28% between 12pm and 3pm, 22% between 3pm and 6pm, 8% between 6pm and 9pm and only 2% between 6am and 9am (Figure 6.9).

Figure 6.8: Survey responses on the preferred day for pharmacy use

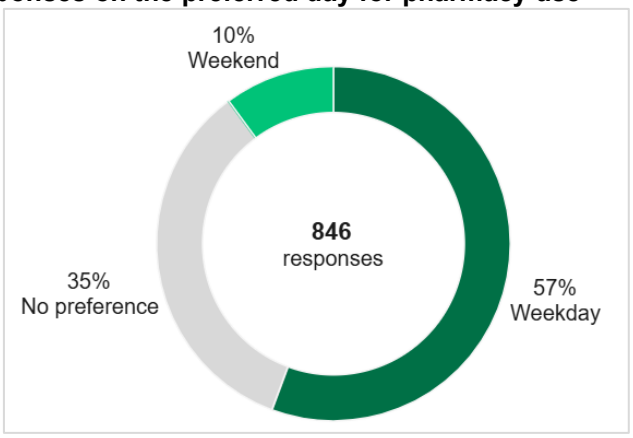
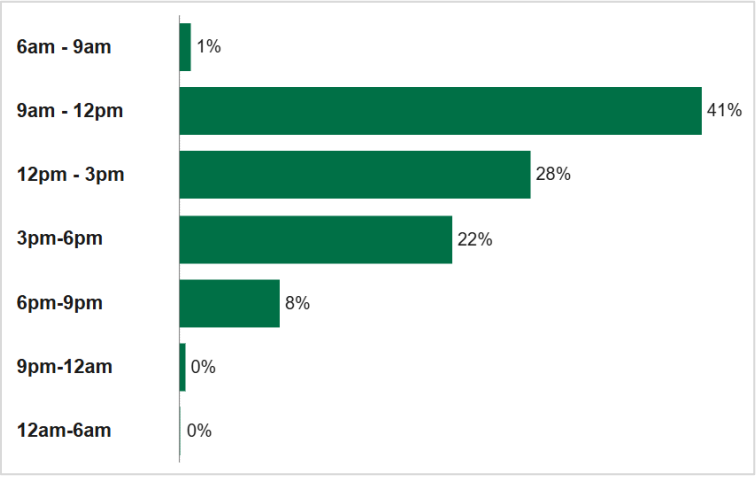


Figure 6.9: Survey responses on the time of day preferred to go to their pharmacy

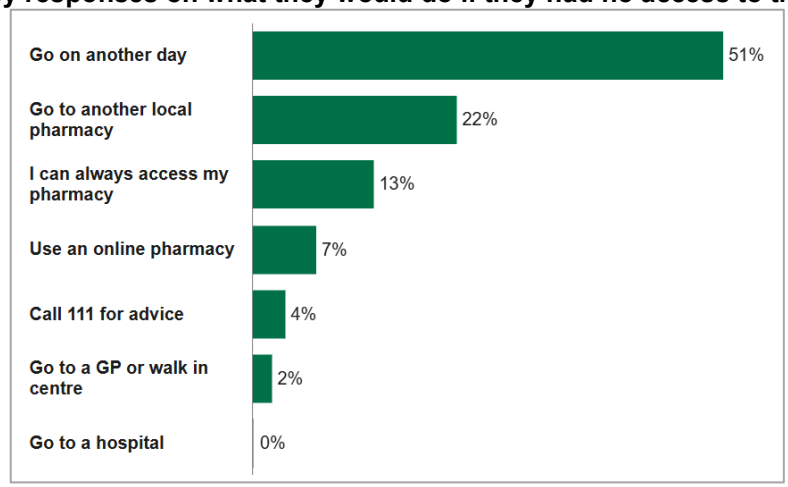


6.17 When asked for further comments on opening hours, most either left no comment or expressed satisfaction with the current opening hours. Some respondents did express frustration with limited pharmacy opening hours, particularly on weekends and evenings, and some found lunchtime closures and early evening closing times inconvenient, particularly for those who work full-time.

6.18 Others suggested a local rota system to ensure extended opening hours, especially for emergencies. A few respondents praised their local pharmacies for their service despite staff shortages.

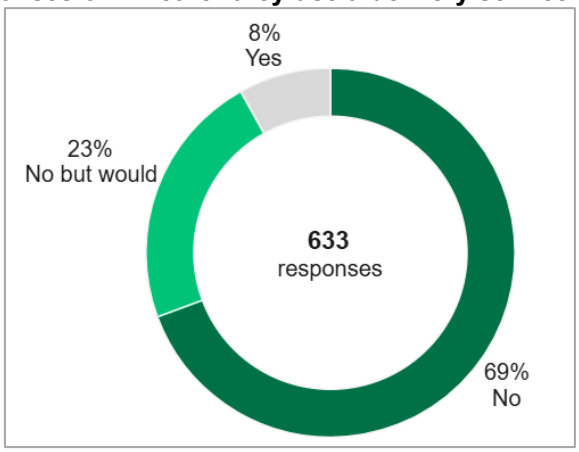
6.19 When asked what they would do if they could not access their preferred pharmacy, over half (51%) would go on another day, 22% reported that they would go to another pharmacy, 13% reported that they can always access their preferred pharmacy, 7% would use an online pharmacy and 2% would go to a GP or walk-in centre (Figure 6.10).

Figure 6.10: Survey responses on what they would do if they had no access to their pharmacy



6.20 Of those who usually use a community pharmacy which offers a delivery service, only 8% reported that they use the service (Figure 6.11).

Figure 6.11: Survey responses on whether they use a delivery service



6.21 When asked if they would like to leave further comments, approximately half of respondents left a comment. These comments included a mix of praise, concerns, and suggestions regarding pharmacy services. Many highlighted the essential role of pharmacies in their communities, particularly in rural areas where access to healthcare is limited. Several respondents emphasised the importance of local pharmacies in providing advice, vaccinations, and medication support, often serving as the first point of contact for health concerns. Some praised individual pharmacies and staff for their professionalism and helpfulness.

6.22 However, common frustrations included long waiting times, stock shortages, and staff shortages. Many felt that pharmacy workloads have increased due to additional services such as Pharmacy First, often without adequate resources or staffing. Several respondents raised dissatisfaction around prescription processing delays, particularly when GP surgeries fail to send prescriptions on time.

6.23 There were also suggestions for service improvements, including:

- Longer opening hours, particularly in the evenings and at weekends.
- A local pharmacy rota system to ensure late-night and emergency coverage.
- Better coordination between pharmacies and GP surgeries, especially for repeat prescriptions and care home patients.
- Improved queuing systems to manage busy periods more efficiently.

- Home delivery services, particularly for disabled and elderly patients.

Equality impact assessment

6.24 This section examines the patient and public survey responses by different groups representing protected characteristics to understand similarities and differences between groups.

Age

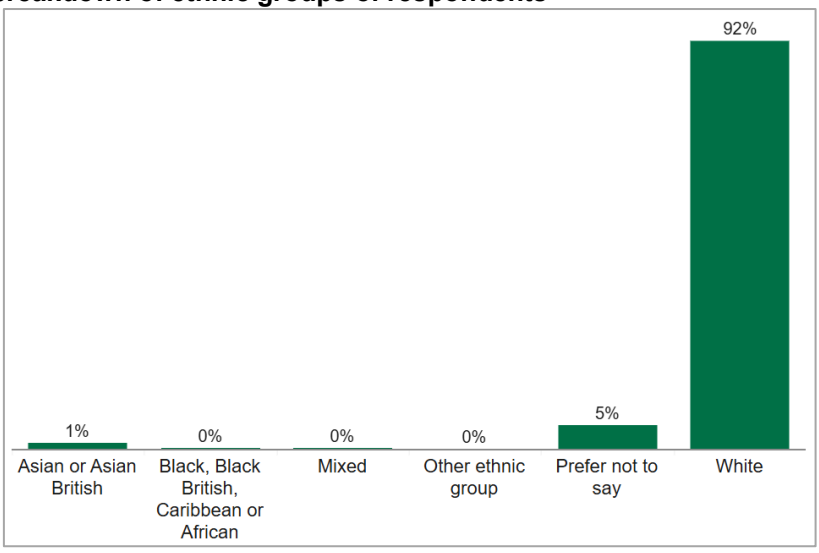
6.25 To understand any differences between age groups, we compared differences between those aged over 65 (n=343), and individuals aged 65 and under (n=482).

6.26 There were no differences between age groups in access to or use of pharmacies.

Ethnicity

6.27 Most (92%; n=787) respondents were from White ethnic groups. Similarly, people from White ethnic groups make up 92% of the West Berkshire population. Asian or Asian British ethnic groups make up 4% of the West Berkshire population with 1% (n=12) of the survey respondents being from Asian or Asian British ethnic groups. Less than 1% (n=3) of the survey respondents were from Mixed ethnic groups, with these groups making up 2% of the West Berkshire population. People from Black ethnic groups make up 1% of the West Berkshire population and less than 1% (n=2) of the survey responses. Additionally, less than 1% (n=1) of the respondents were from other ethnic groups, who make up 1% of the West Berkshire population (Figure 6.12).

Figure 6.12: A breakdown of ethnic groups of respondents



6.28 People from Asian or Asian British ethnic groups were more likely to choose their pharmacy because it is open when they need to go (67%) and were more likely to use a delivery service (33%).

Gender

6.29 Respondents were asked what sex they were registered with at birth. Over two thirds (69%; n=585) were registered as female, over a quarter (27%; n=232) were registered as male and 4% (n=33) preferred not to say. Respondents were also asked how they would describe their gender identity, with over two thirds (69%; n=301) identifying as female, over a quarter (27%; n=230) identifying as male, 4% (n=37) preferring not to say and less than 1% (n=1) identifying as non-binary. Only 2 respondents reported that they were trans or had a trans history.

6.30 There were no substantial differences in gender for access to or use of pharmacies.

Pregnancy and breastfeeding

6.31 When asked if they were currently or recently pregnant and/or currently breastfeeding, only 1% (n=7) reported that they were and 1% (n=5) reported that they were breastfeeding.

6.32 Those who were currently or recently pregnant were less likely to report using a pharmacy once a month (14%), were more likely to choose a pharmacy because it is open when they need to go (57%) and were less likely to find their journey extremely easy (14%). Those who were breastfeeding were less likely to choose their pharmacy because it is close to home or work (20%), were more likely to use their pharmacy primarily for their children (40%), were more likely to find their journey somewhat easy, were more likely to use their pharmacy between 6pm and 9pm (40%) and were more likely to use a delivery service.

Employment status

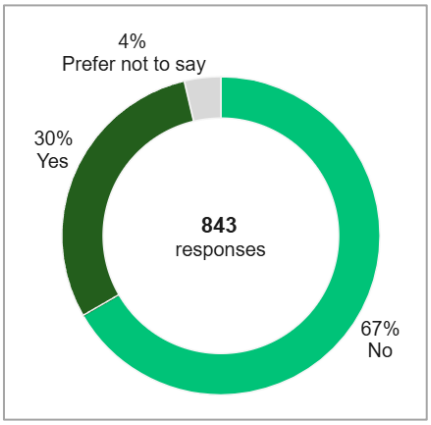
6.33 Employment status was grouped into those in employment, those not in employment and students. Half (50%; n=410) were in not employment, 48% were in employment (n=408), 3% (n=24) preferred not to say and less than 1% (n=2) were students.

6.34 There were no differences in employment status groups in access to or use of pharmacies.

Caring responsibilities

6.35 Two thirds of respondents (67%; n=562) did not have caring responsibilities, whilst 30% (n=250) did and 4% preferred not to say (n=31) (Figure 6.13).

Figure 6.13: A breakdown of caring responsibility groups of respondents



6.36 There were no differences between those with caring responsibilities and those without in access to or use of pharmacies.

Long-Term Conditions

6.37 A large proportion of respondents (55%; n=469) had a long-term physical or mental health condition or illness, whilst 39% (n=326) did not and 6% (n=51) preferred not to say (Figure 6.14). When asked if their condition or illness reduces their ability to carry out day-to-day activities, 40% (n=209) responded with 'yes, a little', 37% (n=194) responded 'not at all', 15% (n=77) said 'yes, a lot' and 8% (n=39) preferred not to say (Figure 6.15).

Figure 6.14: A breakdown of long-term condition status of respondents

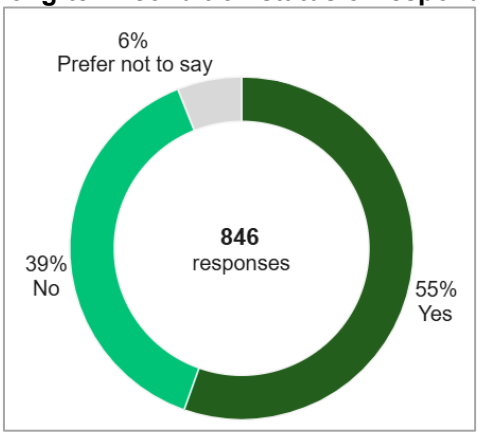
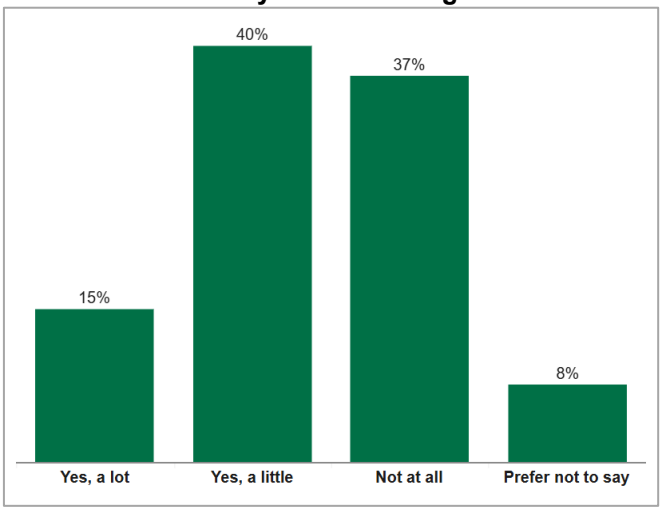


Figure 6.15: A breakdown of reduced ability related to long-term condition status of respondents



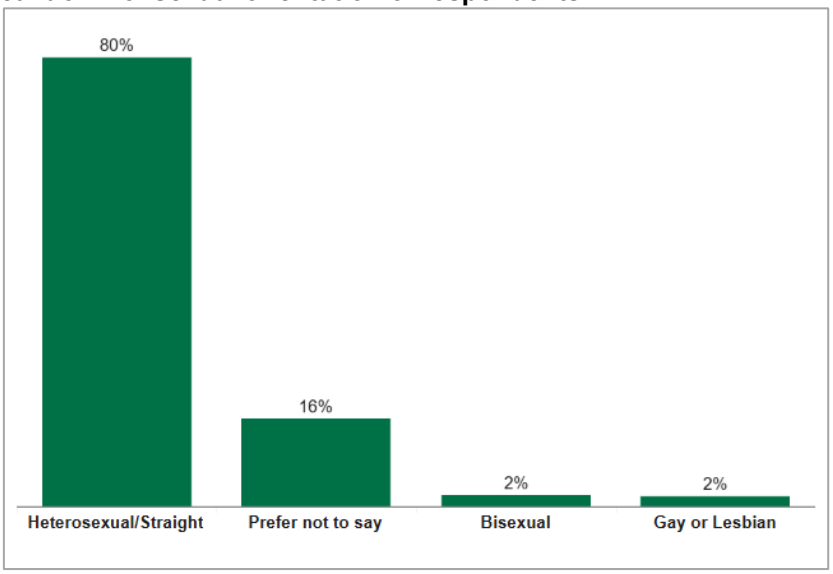
6.38 There were no differences between those with a long-term condition and those without for access to or use of pharmacies.

6.39 There were no differences in reduced ability related to long-term condition status groups for access to or use of pharmacies.

Sexual orientation

6.40 The majority of respondents (80%; n=683) identified as heterosexual/straight, with 16% (n=134) preferring not to say, 2% (n=19) identified as bisexual and 2% (n=16) identified as gay or lesbian (Figure 6.16).

Figure 6.16: Breakdown of sexual orientation of respondents

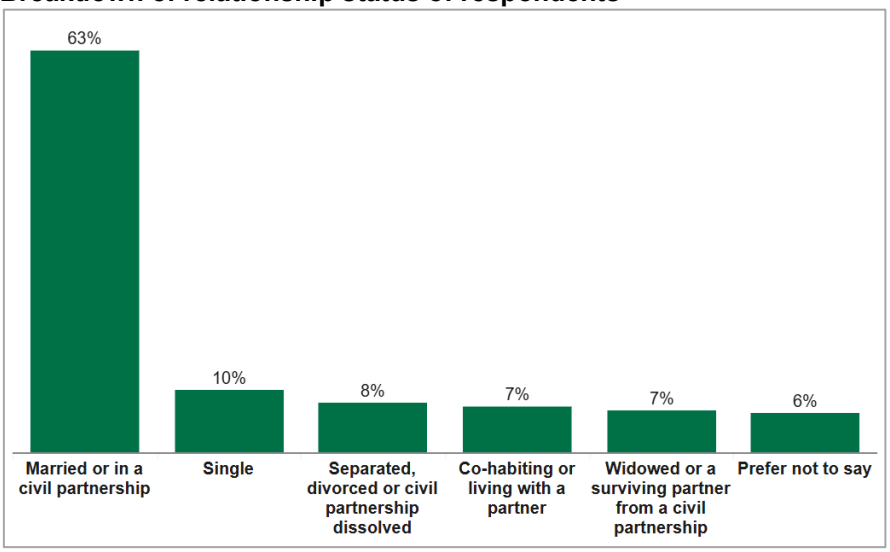


6.41 Those who identified as gay or lesbian was less likely to choose their pharmacy because they can park nearby (13%) and were more likely to choose their pharmacy because they do not have to wait too long for their prescriptions (31%).

Relationship Status

6.42 A large proportion (63%; n=527) of respondents were married or in a civil partnership, while nearly a tenth (10%; n=83) were single, 8% (n=65) were separated, divorced or had their civil partnership dissolved, 7% (n=61) were co-habiting or living with a partner, 7% (n=55) were widowed or a surviving partner from a civil partnership and 6% (n=52) preferred not to say (Figure 6.17).

Figure 6.17: Breakdown of relationship status of respondents



6.43 There were no differences between relationship status groups in access to or use of pharmacies.

Summary of the patient and public engagement and equality impact assessment

A patient and public survey was carried out to understand how local residents in West Berkshire are using their pharmacies. This sought to ascertain how local people access their pharmacies. To understand the health needs of people with protected characteristics and from vulnerable groups, an equality impact assessment was undertaken.

A total of 851 responses were garnered from people who live, work and/ study in West Berkshire. Most respondents had used their pharmacy at least once a month over the last 6 months. The vast majority of respondents can reach their pharmacy in 20 minutes or less, with most opting to travel by car.

Overall, survey respondents felt that this was an easy journey. Most respondents preferred to access their pharmacy on a weekday, with many preferring to go between 9am and 12pm.

No substantial differences or identified needs were found amongst protected characteristics groups in pharmacy usage.

Chapter 7 - Provision of Pharmaceutical Services

7.1 This chapter outlines the pharmaceutical service providers in West Berkshire, the range of services they provide and their accessibility.

7.2 It evaluates the adequacy of current pharmaceutical services by considering several key factors:

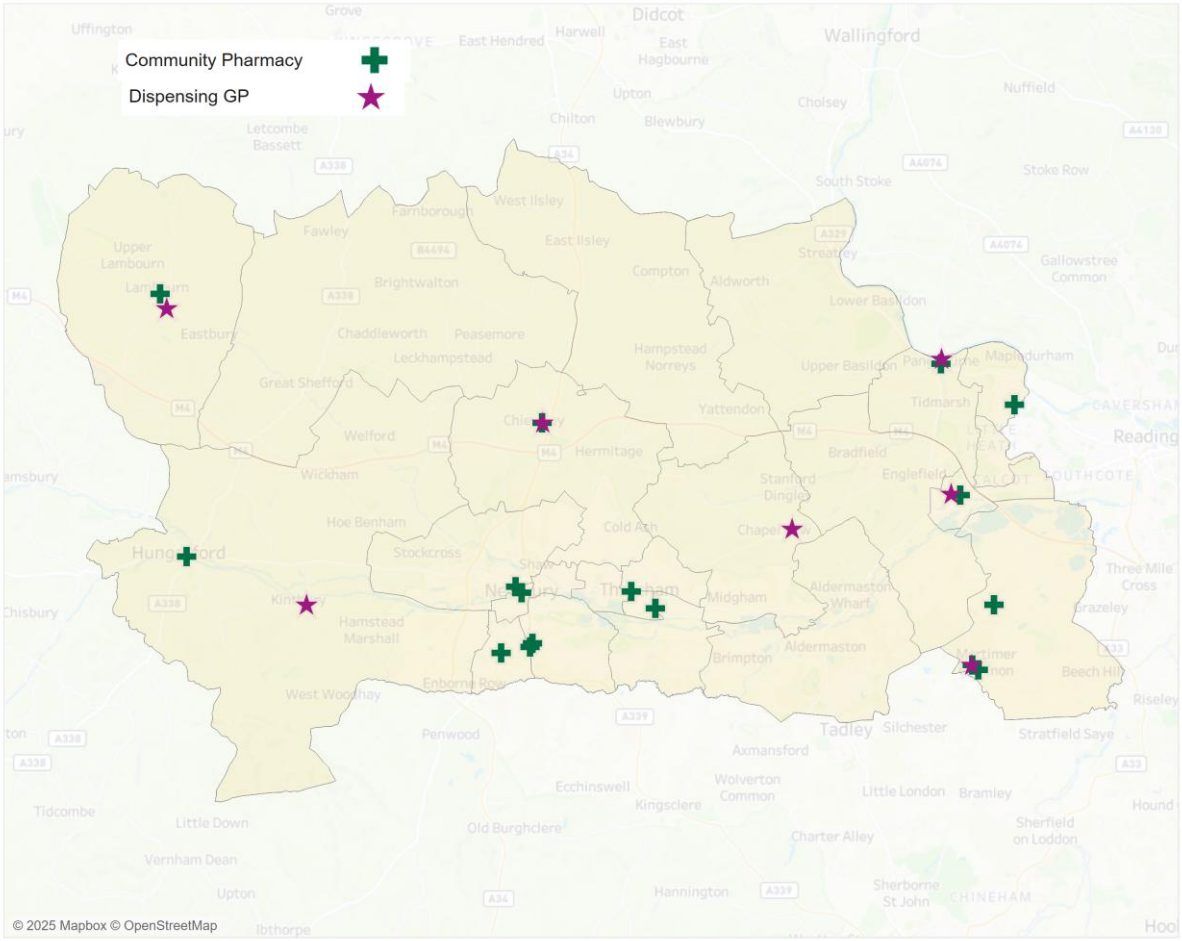
- The types of pharmaceutical service providers available
- The geographical spread and variety of pharmacies both within and near the HWB area
- Opening hours
- Dispensing services provided
- Pharmacies offering essential, advanced and enhanced services

7.3 Where appropriate, a mile radius has been included around service providers to highlight their coverage.

Pharmaceutical Service Provider

7.4 As of July 2025, there are 16 pharmacies included in the pharmaceutical list for the West Berkshire HWB area, all of which are community pharmacies. Service provision is supplemented by the presence of 7 dispensing GPs in the area. All the service providers are presented in the map in Figure 7.1. Pharmacies in the area as well as those within 1 mile of its border are also listed in Appendix A.

Figure 7.1: Pharmaceutical service providers in West Berkshire



Source: NHSE & NHSBSA

Community Pharmacies

7.5 West Berkshire's 16 community pharmacies equate to a ratio of 1.0 pharmacies per 10,000 residents (based on a population estimate of 161,433). This ratio is considerably lower than the national picture of 1.7 pharmacies per 10,000 residents. It is however noted that the number of community pharmacies has been in steady decline with a recent report by Lord Darzi highlighting 1,200 closures since 2017[24].

24 Darzi (2024). Independent Investigation of the National Health Service in England. September 2024.

Dispensing Appliance Contractor

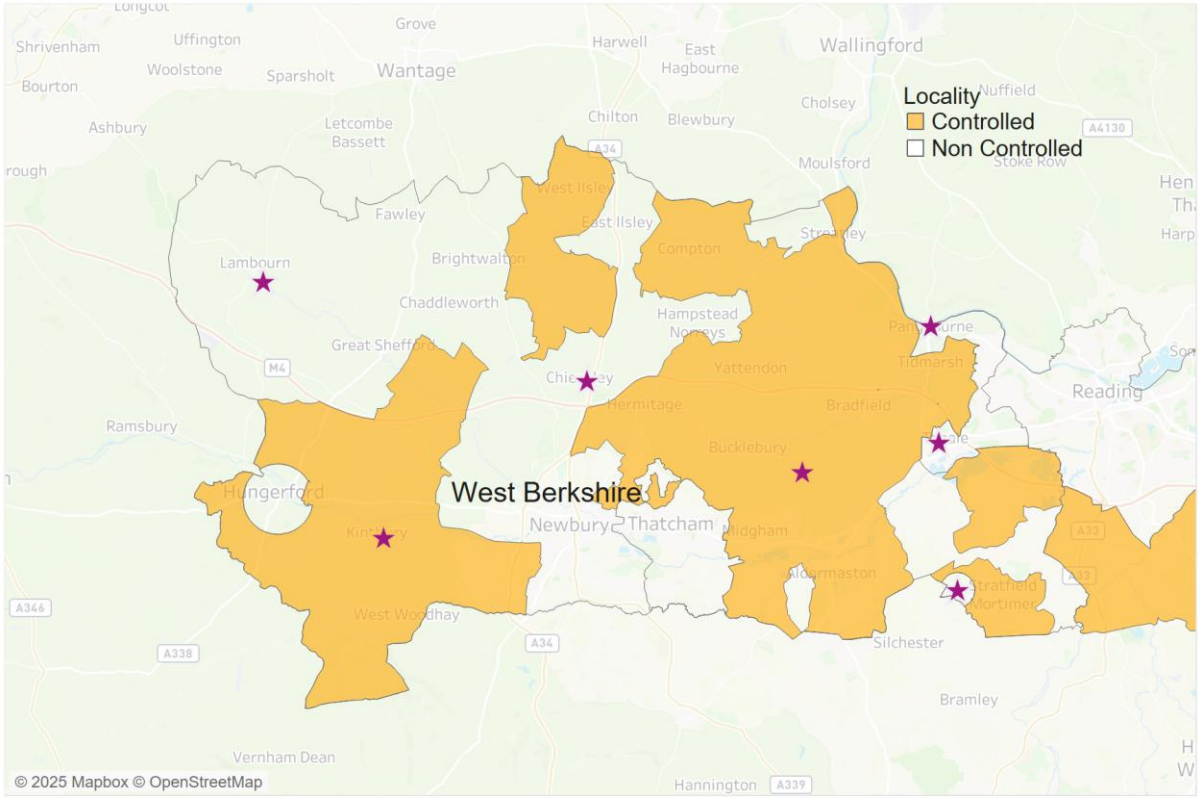
7.6 Dispensing Appliance Contractors (DACs) specialise in the dispensing of appliances such as stoma or continence products, including their customisation. West Berkshire does not have any DACs.

GP Dispensing Practices

7.7 Dispensing doctors provide services to patients where there are no community pharmacies or access is restricted, mainly in rural areas. One of the requirements for the service is that patients live in a controlled locality. Controlled localities are defined by NHSE in line with regulations and after consideration of a wide range of factors, including being more than 1 mile from pharmacy premises.

7.8 There are seven GP dispensing practices in West Berkshire. Their delivery services are outside the scope of this PNA, however dispensing doctors can choose to provide delivery services in areas where community pharmacy provision is low. Figure 7.2 below shows the controlled localities in West Berkshire (shown in orange), against dispensing GPs (shown in purple).

Figure 7.2: Location of Controlled Localities and Dispensing GPs



Source: NHSBSA

Table 7.1: List of dispensing GPs in West Berkshire

Practice Name	Address	Postcode
Kintbury & Woolton Hill Surgery	Kintbury Surgery, Newbury Street, Kintbury	RG17 9UX
The Boat House Surgery	The Boathouse Surgery, Whitchurch Rd, Pangbourne	RG8 7DP
Mortimer Surgery	The Mortimer Surgery, 72 Victoria Road, Mortimer Common	RG7 3SQ
The Downland Practice	The Downland Practice, East Lane, Chieveley, Newbury	RG20 8UY
Lambourn Surgery	The Lambourn Surgery, Bockhampton Road, Lambourn	RG17 8PS
Theale Medical Centre	Theale Medical Centre, Englefield Road, Theale	RG7 5AS
Chapel Row Surgery	Chapel Row Surgery, The Avenue, Bucklebury	RG7 6NS

Source: NHSBSA

Distance Selling Pharmacies

7.9 Distance Selling Pharmacies (DSPs) are pharmacies that operate mainly through remote means, such as online platforms, phone or mail rather than providing face to

face services. West Berkshire currently has no Distance Selling Pharmacies (DSPs) operating within the area.

Local Pharmaceutical Services

7.10 West Berkshire does not currently have any pharmacies operating under the Local Pharmaceutical Services (LPS) contract. This arrangement allows flexibility in delivering tailored pharmaceutical services to meet specific local health needs.

Accessibility

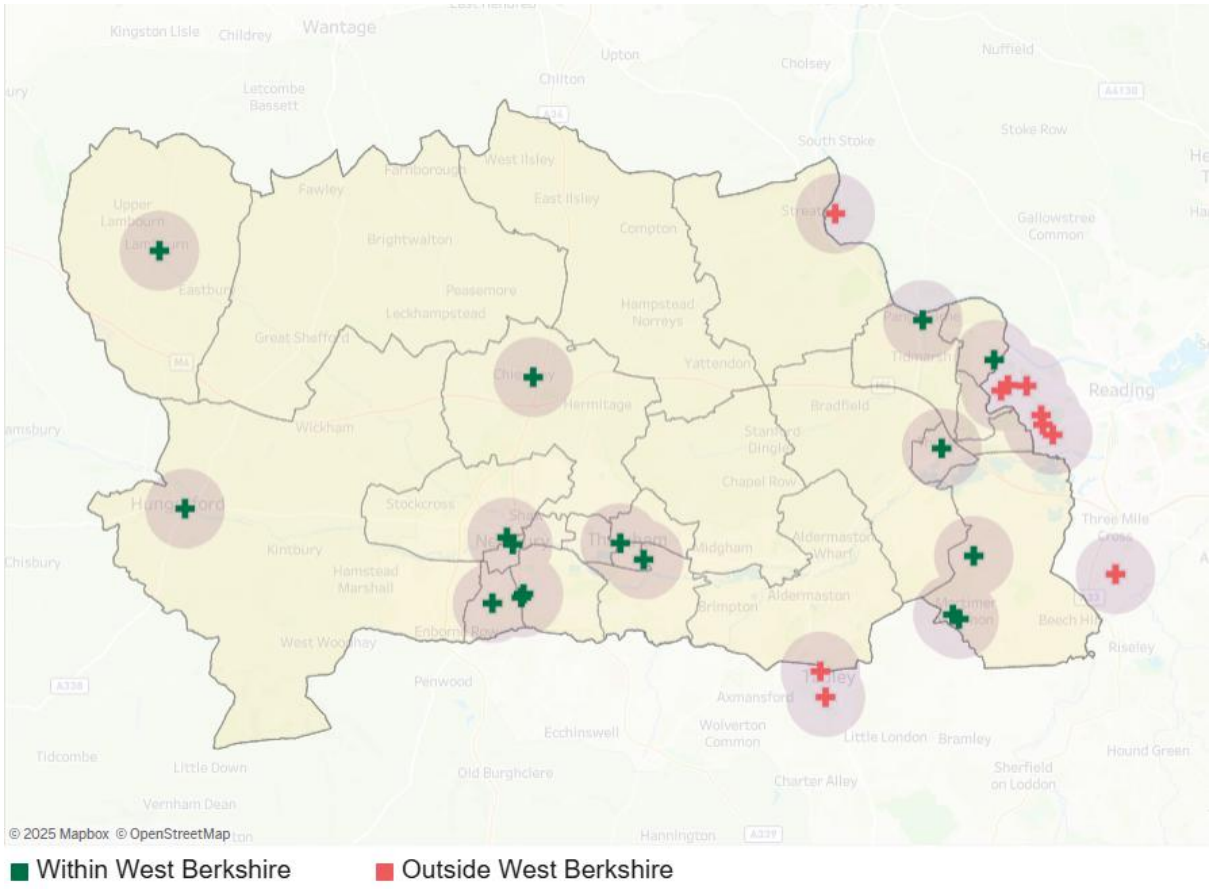
Distribution and choice

7.11 The PNA Task and Finish Group agreed that the maximum distance for residents in West Berkshire to access pharmaceutical services, should be no more than 1 mile. If residents live within a rural area, 20 minutes by car is considered accessible.

7.12 Pharmacies within a mile of West Berkshire's boundaries were considered accessible to its residents and thus providing cross-boundary coverage.

7.13 Figure 7.3 below shows the 16 community pharmacies located in West Berkshire as well as the additional 10 within one mile of its boundaries.

Figure 7.3: Distribution of community pharmacies in West Berkshire and within 1 mile of the district's boundaries



Source: NHSE

7.14 The geographical distribution of the pharmacies by electoral wards is shown in the table below. It shows that 12 of West Berkshire's wards do not have a community pharmacy within them. However, residents of these wards have access to pharmacies via neighbouring wards.

Table 7.2 Distribution of community pharmacies by ward

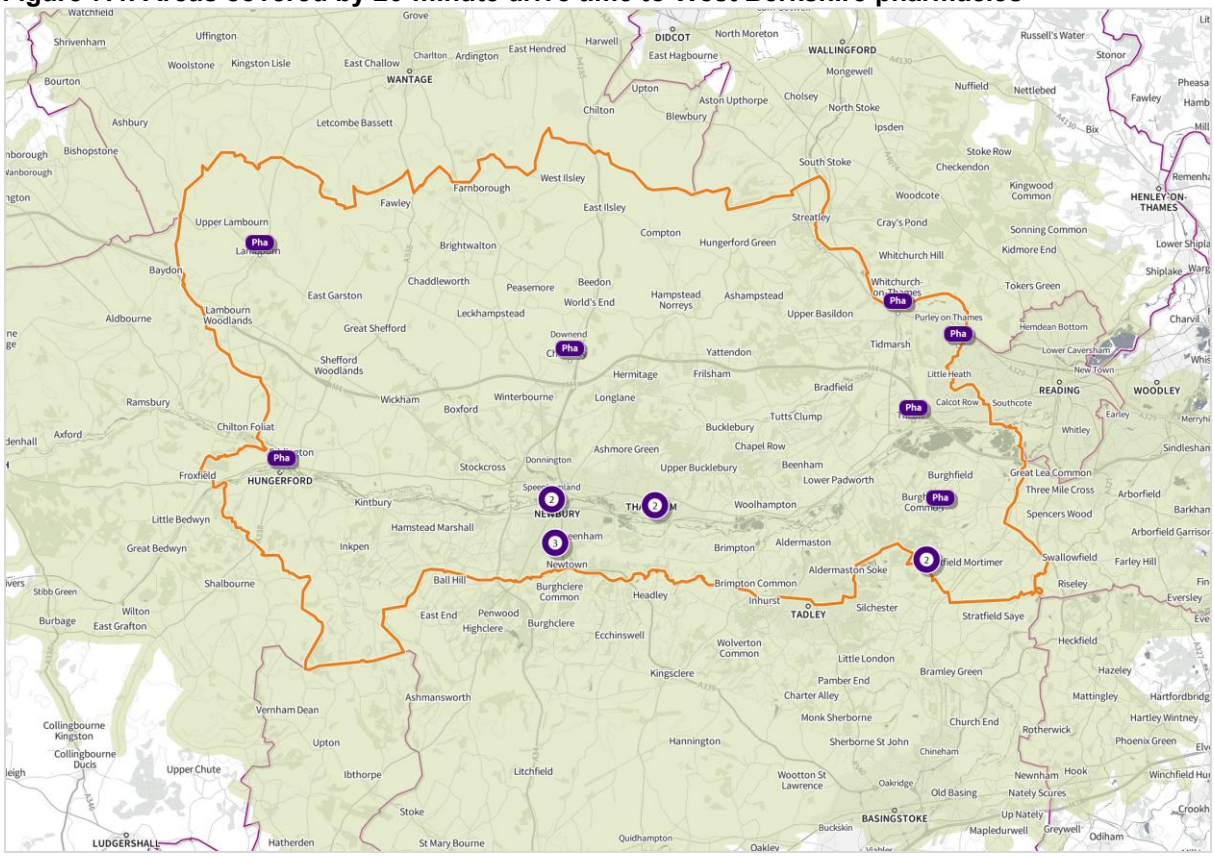
Ward Name	Number of Community Pharmacies	Population Size	Community Pharmacies per 10,000
Theale	1	3,042	3.3
Thatcham Colthrop & Crookham	1	3,329	3.0
Burghfield & Mortimer	3	10,769	2.8
Newbury Central	2	7,437	2.7
Pangbourne	1	3,758	2.7
Lambourn	1	4,212	2.4
Newbury Greenham	2	12,828	1.6
Thatcham Central	1	7,380	1.4
Chieveley & Cold Ash	1	8,221	1.2
Newbury Wash Common	1	9,318	1.1

Tilehurst & Purley	1	10,646	0.9
Hungerford & Kintbury	1	11,445	0.9
Tilehurst South & Holybrook	0	7,396	0.0
Tilehurst Birch Copse	0	7,861	0.0
Thatcham West	0	7,321	0.0
Thatcham North East	0	7,734	0.0
Ridgeway	0	4,269	0.0
Newbury Speen	0	7,626	0.0
Newbury Clay Hill	0	7,555	0.0
Downlands	0	3,698	0.0
Bucklebury	0	3,626	0.0
Bradfield	0	4,475	0.0
Basildon	0	3,491	0.0
Aldermaston	0	3,996	0.0
Total	**16**	**161,433**	**1.0**

Source: NHSE & 2021 Census

7.15 All West Berkshire residents can reach a pharmacy by car within 20 minutes as depicted in Figure 7.4 below. Coverage of the pharmacies is presented in green while the West Berkshire boundary is shown in orange.

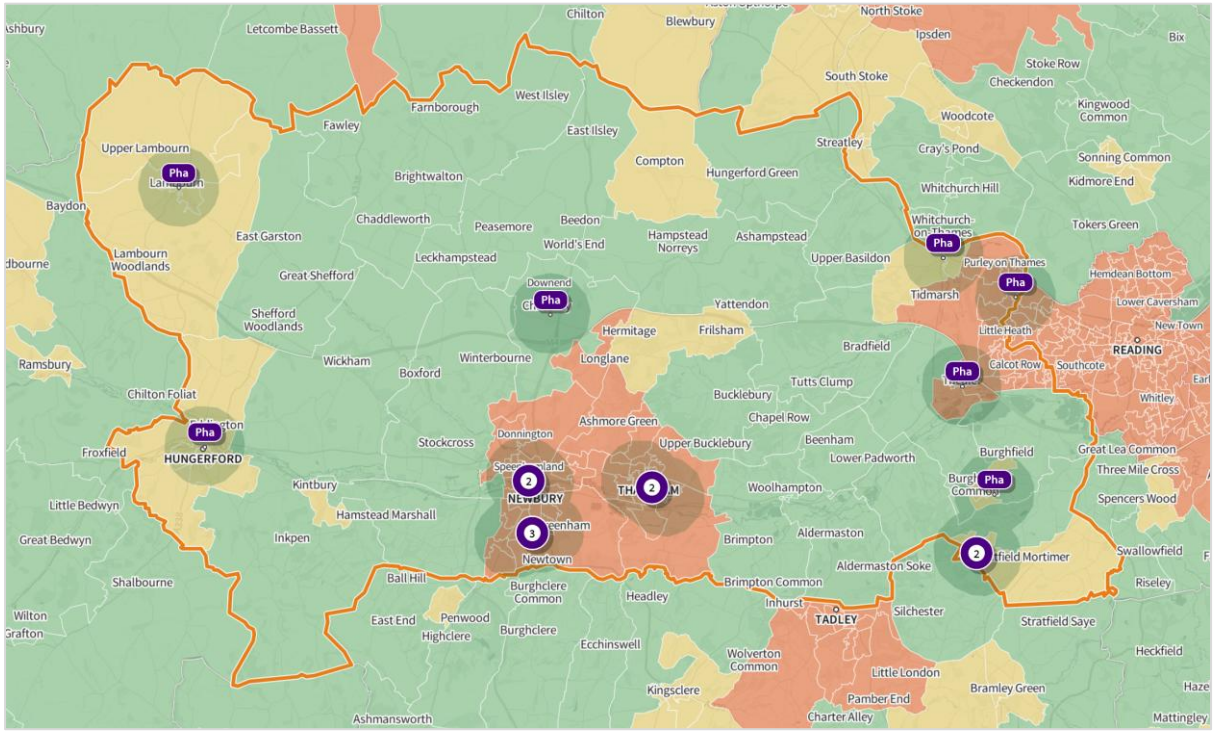
Figure 7.4: Areas covered by 20-minute drive time to West Berkshire pharmacies



Source: OVID, Strategic Health Asset Planning and Evaluation Atlas Tool

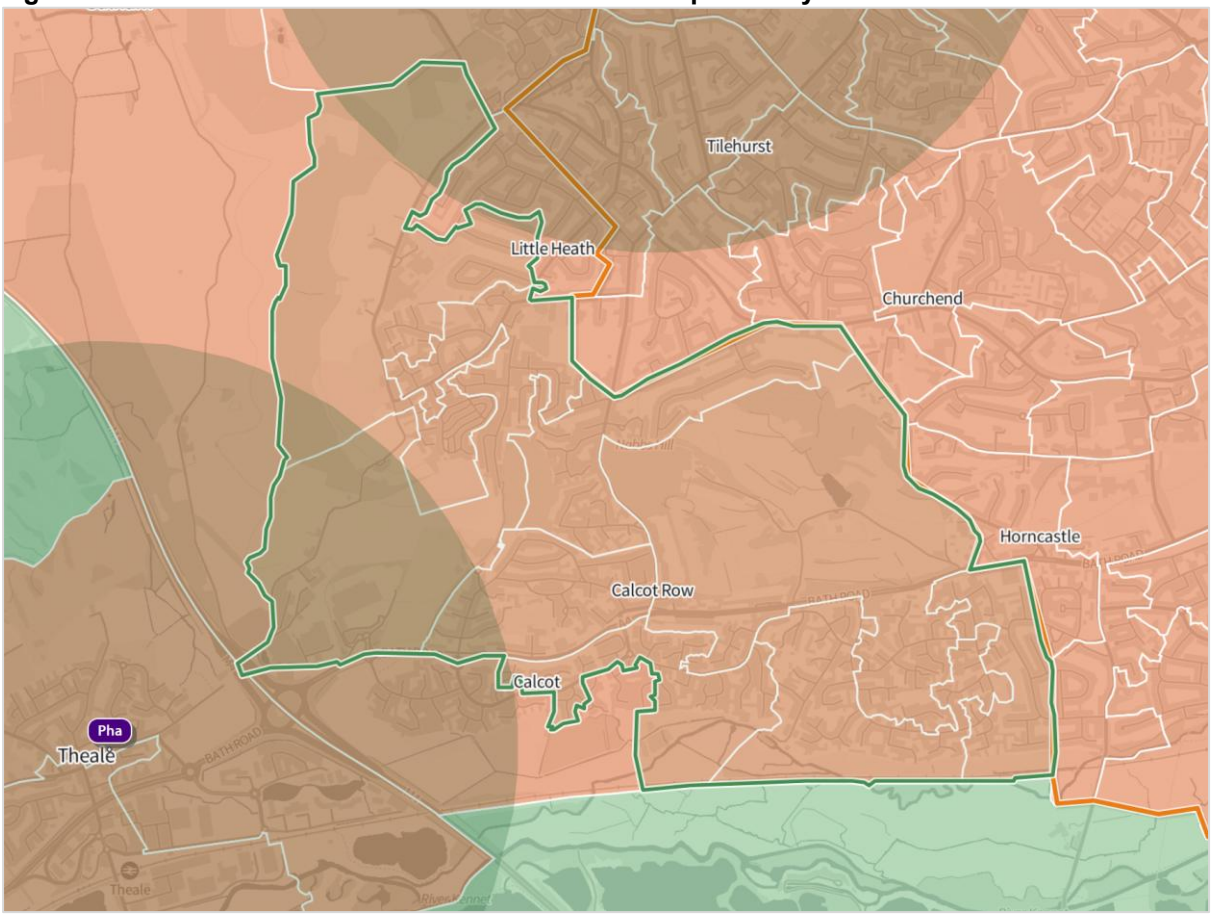
7.16 Looking at the 1-mile accessibility in urban areas, most built up areas are within a mile of a pharmacy (Figure 7.5). However, as seen there is a section in Calcot, that though urban, is not within a mile of a pharmacy.

Figure 7.5: Areas within 1-mile reach of West Berkshire pharmacies overlayed by rural-urban classification



Source: OVID, Strategic Health Asset Planning and Evaluation Atlas Tool

Figure 7.6: Focus on Calcot area not within a mile of a pharmacy



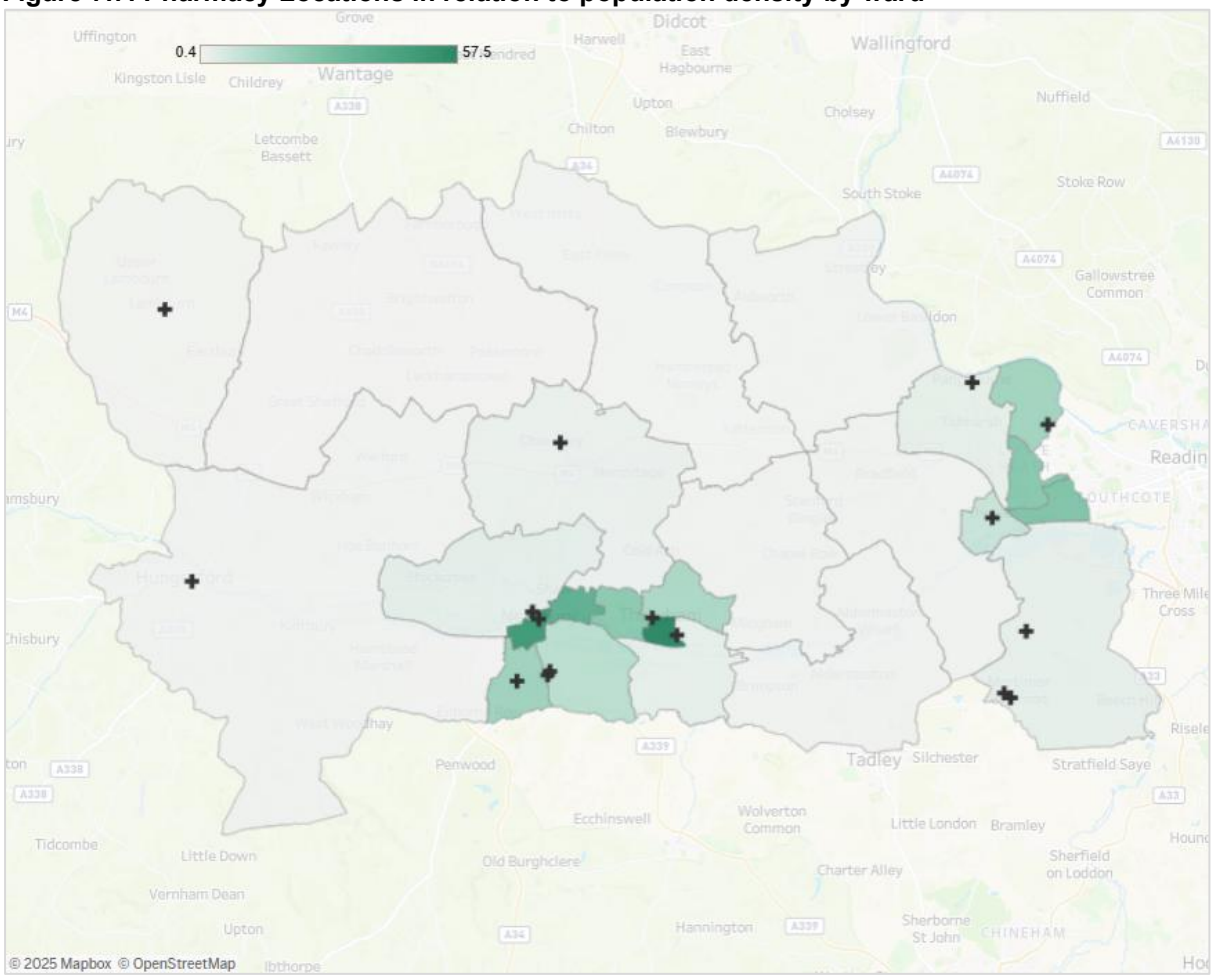
Source: OVID, Strategic Health Asset Planning and Evaluation Atlas Tool

7.17 The nearest pharmacy to these Calcot residents is Kamson's Pharmacy in Theale and Overdown Pharmacy in Tilehurst.

Pharmacy Distribution in Relation to Population Density

7.18 Pharmacies are predominantly located in areas of high population density as seen in Figure 7.7.

Figure 7.7: Pharmacy Locations in relation to population density by ward



Source: ONS (2021 Census) & NHSE

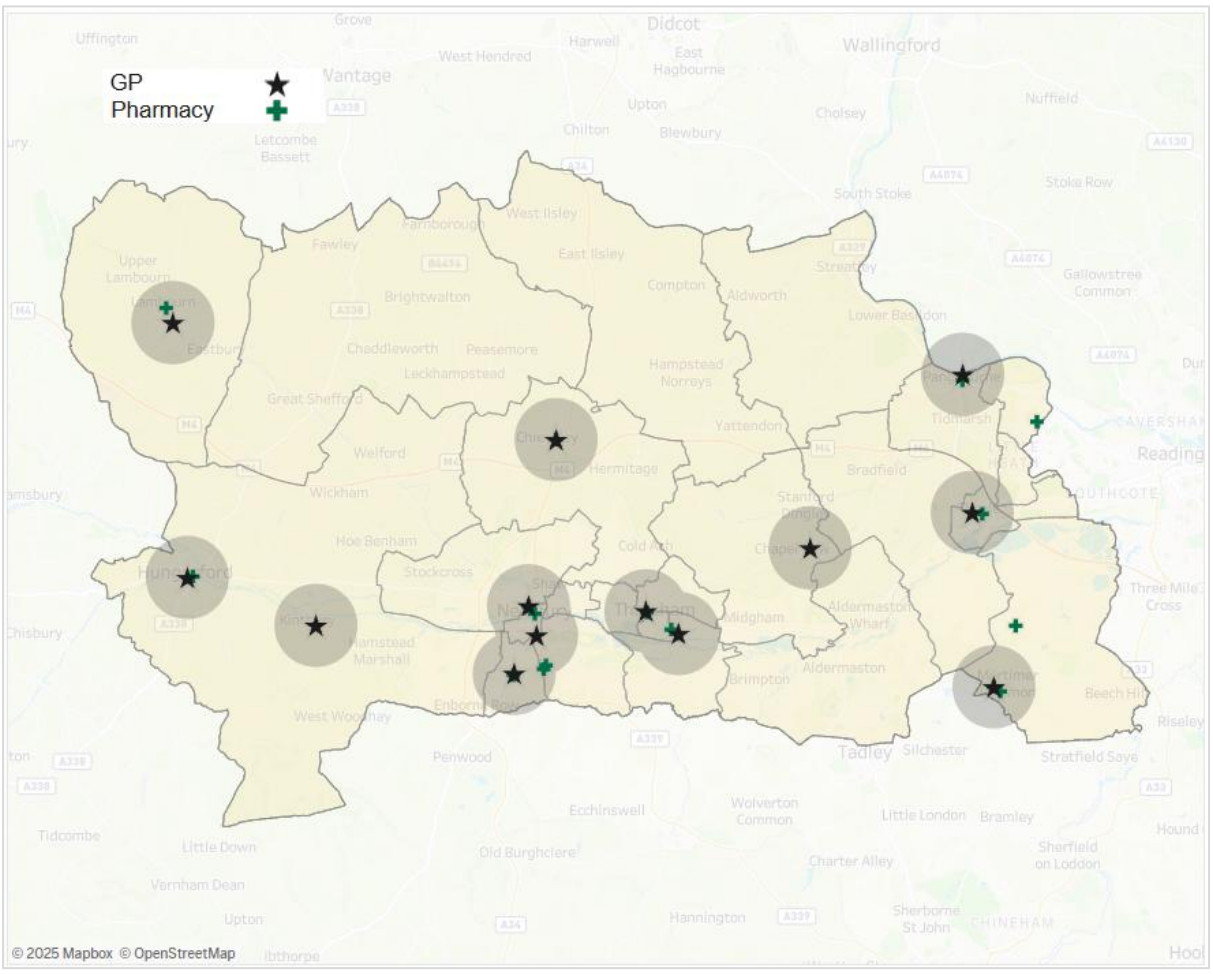
Pharmacy distribution in relation to GP surgeries

7.19 In early 2019, the NHS Long Term Plan was announced that urged general practices to form Primary Care Networks (PCNs). PCNs are collaborative entities linking primary care services with hospital, social care and voluntary sector organisations and covering populations between 30,000 and 50,000 people.

7.20 Each of the primary care networks have expanded neighbourhood teams which is made up of a range of healthcare professionals including GPs, district nurses, allied health care professionals, community geriatricians and pharmacies. It is essential that community pharmacies can engage with the PCNs to maximise services provided to patients and residents.

7.21 GP practices in West Berkshire are within a mile of a community pharmacy (Figure 7.8).

Figure 7.8: General Practices and their 1-mile coverage in relation to community pharmacies



Source: NHSE

7.22 Patients registered with West Berkshire GP practices primarily collect prescriptions from local pharmacies, with **79.6% of items dispensed within the district**. Other common dispensing locations include Leeds (8.4%), Reading (4.5%), and Ealing (3.7%).

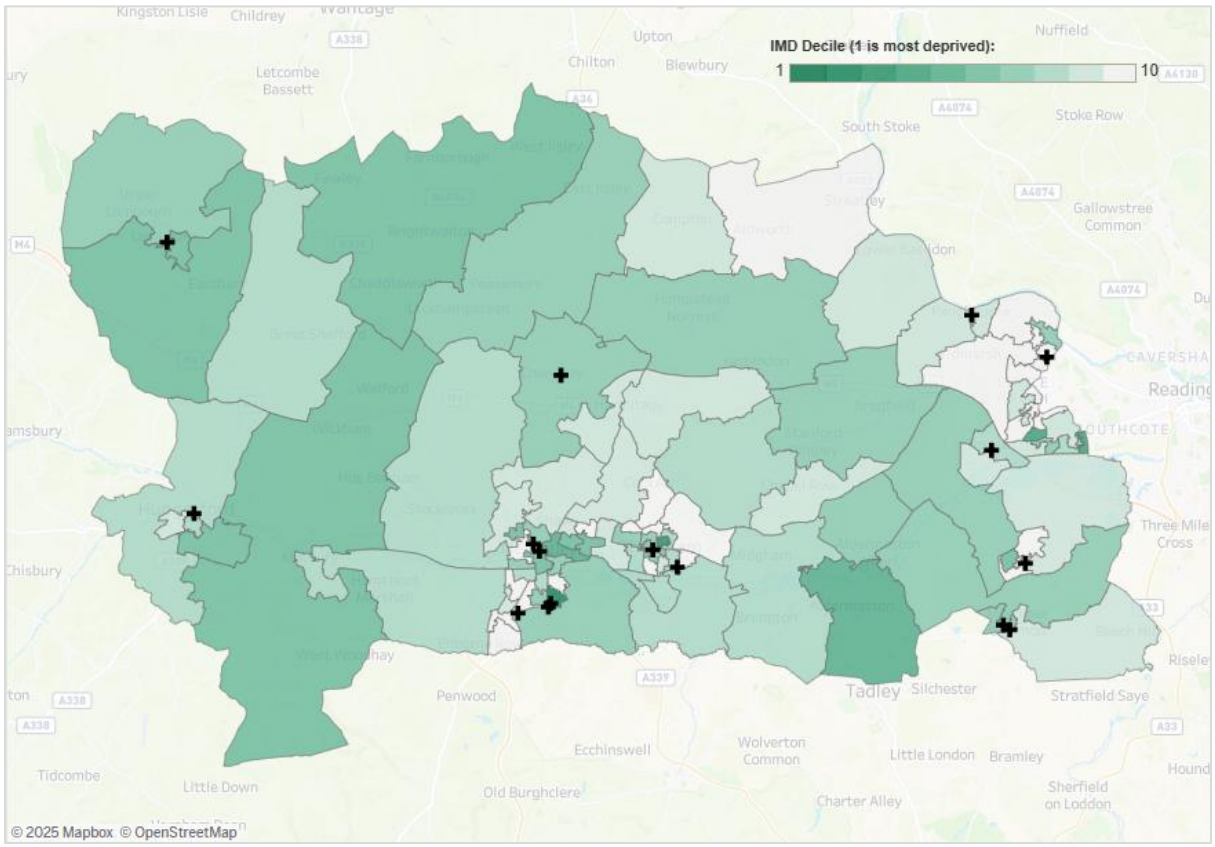
7.23 A planning application was approved in January 2025 for a GP surgery and associated pharmacy in the site designated as 'Land South of Newbury College and North Of Highwood Copse School'.

7.24 The PNA Task & Finish Group is not aware of any other firm plans for changes in the provision of Health and Social Care services within the lifetime of this PNA.

Pharmacy distribution in relation to index of multiple deprivation

7.25 As seen in Figure 7.9, West Berkshire pharmacies are distributed in both areas of high and low relative deprivation.

Figure 7.9: Pharmacy locations in relation to deprivation deciles



Source: MHCLG & NHSE

Opening Times

7.26 Pharmacy contracts with NHS England stipulate the core hours during which each pharmacy must remain open. Historically, pharmacies held 40-hour or 100-hour contracts. However, due to increase in pharmacy closures which was found to particularly affect 100-hour pharmacies, the NHS terms of service was amended to allow 100-hour pharmacies to reduce to no less than 72 hours without needing to demonstrate a change in need. Under the amended regulations, pharmacies that held 100-hour contracts would have to remain open between 17:00 and 21:00 from Monday to Saturday, and between 11:00 and 16:00 on Sundays as well as leave the total core hours on Sunday unchanged to maintain out-of-hours pharmacy provision.

7.27 It is important that pharmacy access considers availability both within and outside regular hours. The PNA Task and Finish Group defined 9am to 5pm as regular opening

hours. The assessment of opening hours was based on total hours, i.e. both core and supplementary hours, and is reflective of the status at the time of drafting.

100-hour pharmacies

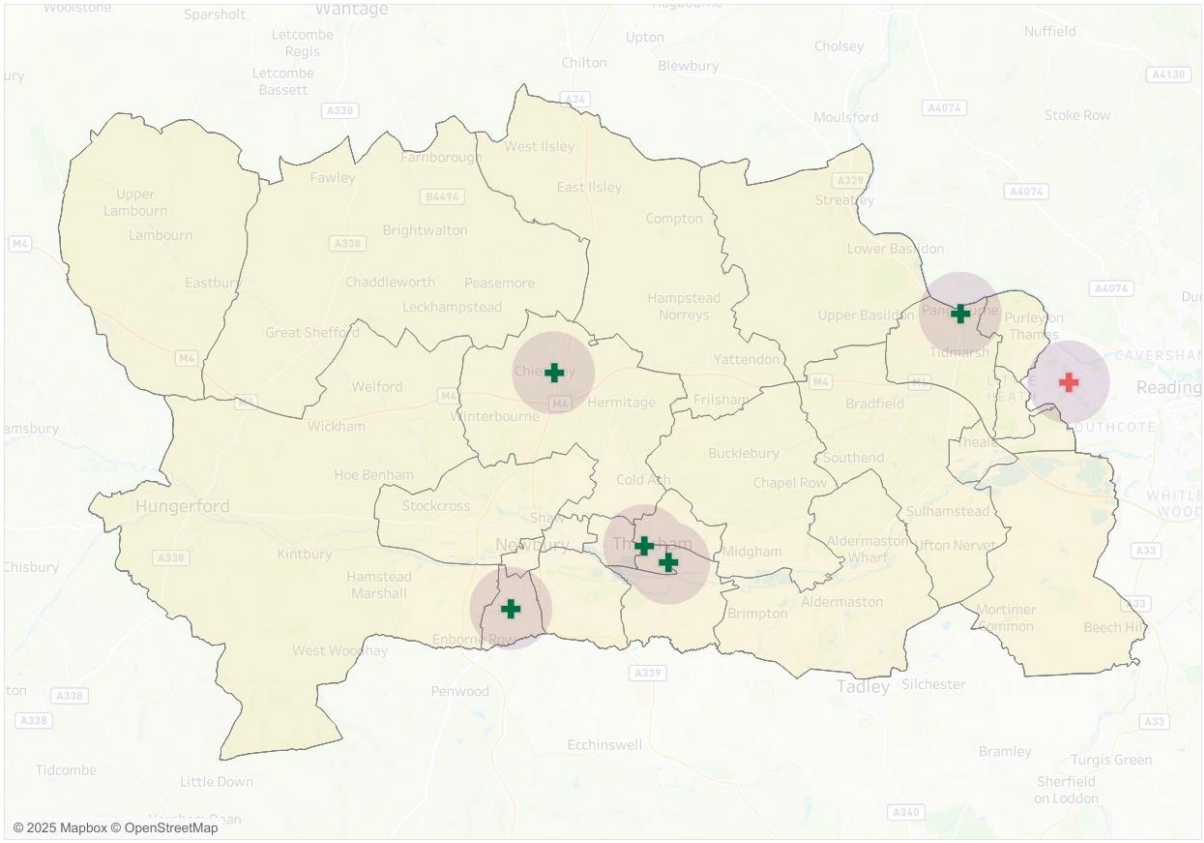
7.28 There are two 100-hour pharmacies in West Berkshire; Tesco Pharmacy on Pinchington Lane, Newbury, and Mortimer Pharmacy on Victoria Road

Early Morning Opening

7.29 As per the definition above, any pharmacy open before 9am was deemed to have early morning opening.

7.30 There are five early morning opening pharmacies located within West Berkshire, with one additional pharmacy located nearby in Reading.

Figure 7.10: Distribution of pharmacies that open before 9am on weekdays



Source: NHSE

Table 7.3: Pharmacies Open in Early Morning in West Berkshire

Pharmacy	Address	Locality
Downland Pharmacy	East Lane, Chieveley, Newbury, Berkshire	Chieveley & Cold Ash
Halo Pharmacy	3-5 Crown Mead, Bath Road, Thatcham, Berkshire	Thatcham Central
Pangbourne Pharmacy	3 The Square, Pangbourne, Berkshire	Pangbourne
Wash Common Pharmacy	Monks Lane, Newbury, Berkshire	Newbury Wash Common
Thatcham Pharmacy	Unit 2 Burdwood Centre, Station Road, Thatcham, Berkshire	Thatcham Colthrop & Crookham

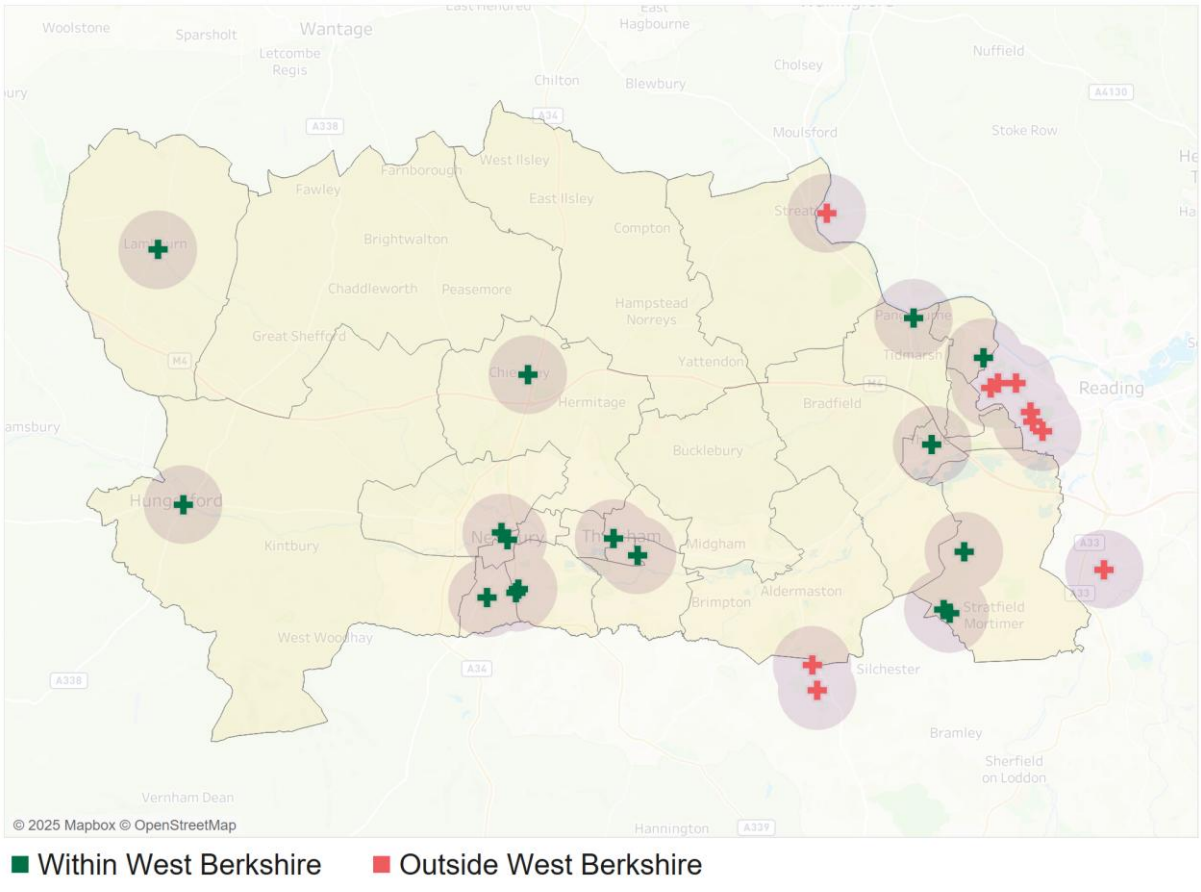
Source: NHSE

Late Evening Closure

7.31 Pharmacies open after 5pm were deemed to have late evening closure.

7.32 All 16 of West Berkshire's pharmacies are open past 5pm. Additionally, there are 10 late-closing pharmacies located in nearby local authorities.

Figure 7.11: Distribution of community pharmacies that are open past 5pm on weekdays

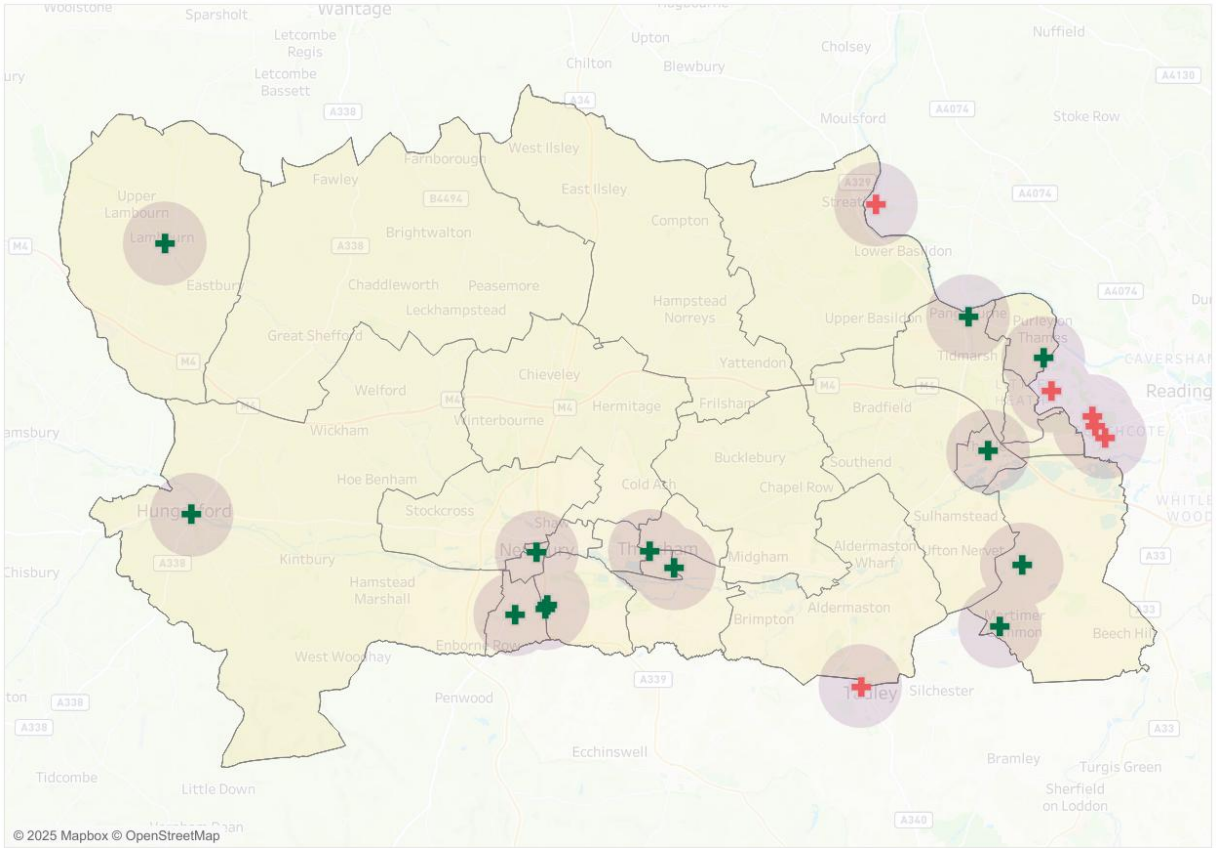


Source: NHSE

Saturday Opening

7.33 West Berkshire has 13 pharmacies open on Saturdays, with an additional 6 in neighbouring authorities accessible to its residents.

Figure 7.12: Distribution of community pharmacies that open on Saturdays



Source: NHSE

Table 7.4: Number of Community Pharmacies in West Berkshire that are open on Saturday, by ward

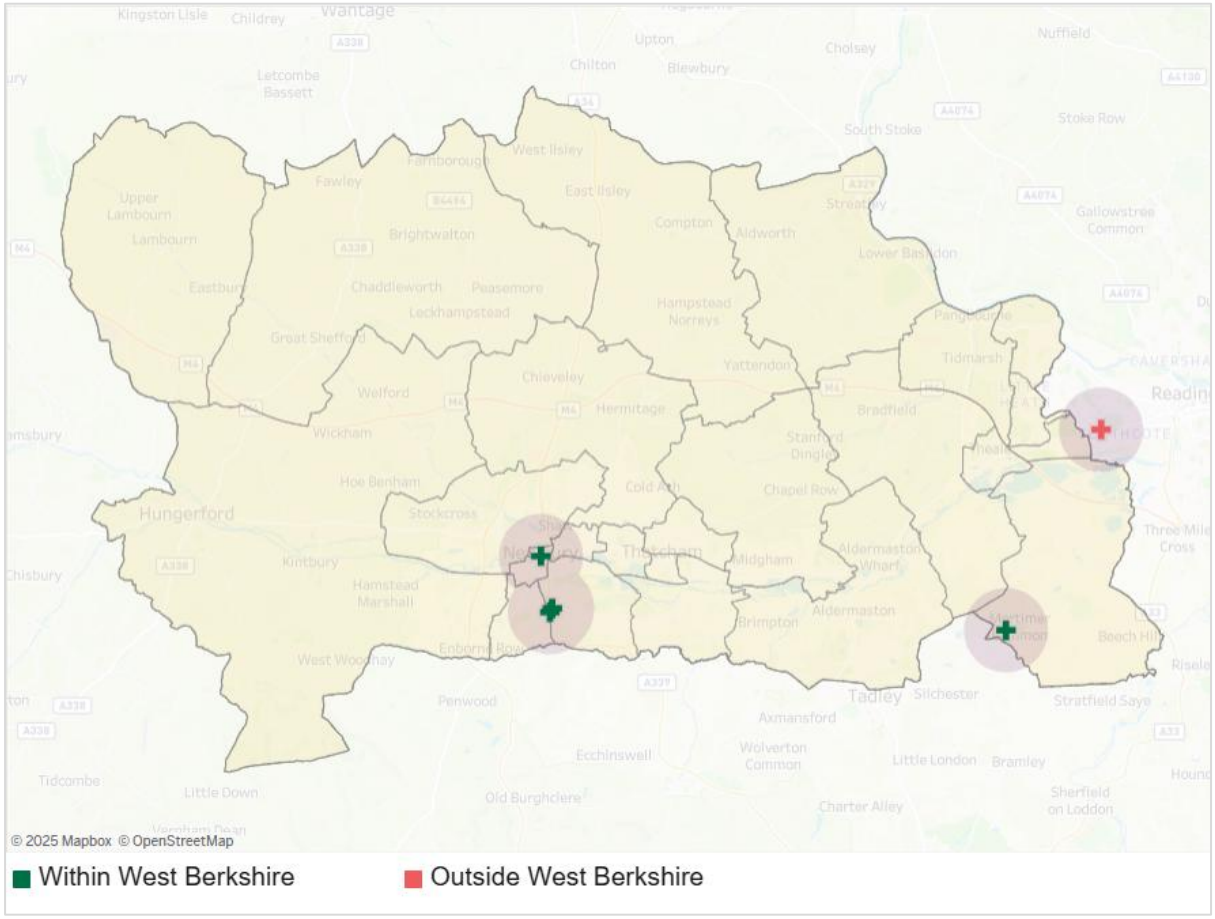
Locality	Number of pharmacies
Newbury Greenham	2
Burghfield & Mortimer	2
Tilehurst & Purley	1
Theale	1
Thatcham Colthrop & Crookham	1
Thatcham Central	1
Pangbourne	1
Newbury Wash Common	1
Newbury Central	1
Lambourn	1
Hungerford & Kintbury	1
Total	**13**

Source: NHSE

Sunday Opening

7.34 West Berkshire has four pharmacies open on Sundays with an additional one in nearby Reading (Figure 7.13).

Figure 7.13: Distribution of community pharmacies open on Sundays



Source: NHSE

Table 7.5: Community pharmacies in West Berkshire that are open on Sunday

Pharmacy	Address	Ward
Boots the Chemists	4-5 Northbrook Street, Newbury, Berkshire	Newbury Central
Tesco Pharmacy	Tesco Extra, Pinchington Lane, Newbury, Berkshire	Newbury Greenham
Mortimer Pharmacy	72 Victoria Road, Mortimer, Reading, Berkshire	Burghfield & Mortimer
Boots the Chemists	Unit 13 Newbury Retail Pk, Pinchington Lane, Newbury, Berkshire	Newbury Greenham

Source: NHSE

Summary of the accessibility of pharmacies in West Berkshire

Though there is good access to pharmacies by drive times, it is noted that there is an area in Calcot that does not have easy access to pharmacies by walking, despite being in an urban area.

There is a good distribution of pharmacies relative to deprivation and GP locations. There is a good number of pharmacies that are open outside weekday regular hours and at weekends.

Essential Services

7.35 Essential Services are a core component of the NHS Community Pharmacy Contractual Framework (CPCF or the 'the Pharmacy Contract') they are as follows:

- Dispensing medicines
- Dispensing appliances.
- Repeat dispensing and electronic Repeat Dispensing (eRD).
- Disposal of unwanted medicines.
- Healthy Living Pharmacies (HLP)
- Promotion of healthy lifestyles (public health).
- Signposting.
- Support for self-care.
- Discharge Medicines Service (DMS).

Dispensing

7.36 This is one of the core essential services provided by the community pharmacies under the CPCF. It ensures that patients receive their prescribed medicines safely, efficiently and in accordance with regulatory and clinical standards. It includes:

- Accurate dispensing of prescribed medicines.

- Clinically checking of prescriptions for the appropriateness of the medicines, potential drug interactions, dosage accuracy and clarifying any queries or concerns with the Prescriber.
- Labelling and Packaging in compliance with legal and clinical requirements.
- Provision of counselling and advice to patients on how and when to take their medicines, possible side effects and actions to take if they occur, storage and disposal instructions for unused medicines.
- Management of repeat prescription requests usually through the Electronic Prescription Service (EPS).
- Accurate record keeping of all dispensed items to ensure compliance to regulatory requirements and support clinical audits and continuity of care.
- Having safeguards in place for minimisation of medicine wastage and ensuring that unused and damaged items are safely disposed of, preventing misuse or harm to the environment.

7.37 West Berkshire pharmacies **dispense an average of 8,962 items per month** (NHSBSA, 2024/25 financial year), which is higher than the South East's average of 8,077 and the national average of 8,698. Wash Common Pharmacy and Mortimer Pharmacy dispense the highest volumes, handling 17,557 and 17,272 items per month respectively.

Discharge Medicines Service (DMS)

7.38 The Discharge Medicines Service became a new essential service under the CPCF from February 2021, at which point NHS Trusts were able to refer patients that would benefit from additional guidance around their prescribed medicines to their community pharmacy for the Discharge Medicines Service. The key objectives of this service are to reduce hospital re-admissions, reduce medicines-related harm during transfers of care, optimise the use of medicines, whilst facilitating shared decision making, improve communication between hospitals, community pharmacies and primary care teams and to support patients through enhancing their understanding and adherence to prescribed medicines following discharge from hospital.

7.39 This service is intended for patients who are discharged with changes to their medication regimen as well as patients who are likely to benefit from support in understanding or managing their medications, for instance those with polypharmacy, frailty or chronic conditions.

7.40 DMS follows a structured three step process which includes the following:

- Referral: Hospitals identify patients at risk of medication-related problems upon discharge and subject to the patient's consenting to a referral, they will send a referral to the pharmacy via secure electronic system such as Refer to Pharmacy, PharmOutcomes or NHSmail.
- Community Pharmacy Review: The community pharmacy reconciles their medicines by comparing the discharge summary with the current medication on records to identify and resolve any discrepancies. Tailored advise is provided to the patient about their medication changes, including potential side effects and usage instructions.
- Ongoing Support: The community pharmacist may follow up with the patient to ensure understanding and adherence and where necessary, could liaise with the GPs.

Dispensing Appliances

7.41 This service is relevant to dispensing contractors like the community pharmacies and appliance contractor, providing appliances such as stoma care items, incontinence supplies and dressings. This service ensures that these contactors supply appliances as prescribed and in a timely and accurate manner as well provide advice on their safe and effective use. This is essential in supporting patients to have access to appliances they require for managing their conditions.

Disposal of Unwanted Medicines

7.42 This service ensures that patients can dispose of their unwanted, unused or expired medicines safety through their local community pharmacy. This helps to prevent environmental contamination, reduce the risk of misuse and promote safe handling of hazardous substances, ultimately promoting public health and environmental sustainability. As part of this service, pharmacies are obliged to accept back unwanted medicines from patients and if necessary, sort them into solids, liquids and aerosols

and in accordance with the Hazardous waste regulations. The local NHS contract management team makes arrangement for a waste contractor to collect the medicines from pharmacies at regular intervals.

Healthy Living Pharmacies (HLP)

7.43 This framework is designed to improve public health by providing accessible health promotion interventions and wellbeing services and helping to reduce inequalities. It aligns with the promotion of healthy lifestyle which is a core requirement for all community pharmacies. Community pharmacy owners were required to become HLPs in 2020/2021 as agreed in the five-year CPCF. This requires pharmacy owners to comply with the HLP framework requirements through ensuring a health promotion environment which meets stipulated standards, embedding health promotion and prevention in their everyday practice and making sure their staff are well equipped to deliver high quality public health interventions. They are also required to ensure that they continue to meet the terms of service requirements by reviewing their compliance against the requirements at least every 3 years.

Public Health (promotion of healthy lifestyles)

7.44 This is a core part of the CPCF which requires all community pharmacies to actively contribute to improving public health by providing targeted health and wellbeing advice to patients and supporting NHS public health campaigns. This aims to improve public health outcomes, promote preventative care and enhance accessibility through the convenience and important role that community pharmacies provide to patients who may not usually engage with other healthcare services.

7.45 The key requirements of this service include the following:

- Provision of a health promotion environment for instance through having clear displays of health advice materials in the pharmacy.
- Provision of tailored health promotion and lifestyle advice to patients who are receiving prescriptions for conditions where lifestyle can make significant difference such as hypertension and diabetes. This includes focusing on areas such as smoking cessation, healthy eating, exercise, reduction of alcohol consumption and mental health support.

- Providing support for NHS campaigns through actively participating in up to six national public health campaigns per financial year (1st April to 31st March) as directed by NHS England through ways such as displaying and distributing the campaign leaflets and engaging patients in discussions related to the campaign themes.
- Signposting patients who require further support or specialised care to appropriate health, social care or voluntary services for instance referral to stop smoking cessation services and weight management programmes.
- Keeping records of the health promotion interventions undertaken and any referrals made and participating in evaluations to show the impact of such interventions.

Repeat Dispensing and eRD

7.46 Repeat dispensing became an essential service within the CPCF since 2005. This service enables patients to obtain repeat supplies of their medicines and appliances prescribed on a repeat basis from their nominated pharmacy, without the need for their GP to issue prescription each time a supply is needed. This service is suitable for patients on stable, long-term medications who understand how the service works and consent to participate. This helps to save GP and patients time, improve convenience and ensure ongoing medication adherence by allowing community pharmacies to be more actively involved in the safe supply of regular prescriptions of patients. This service was initially carried out with paper prescriptions. However, following the development of the Electronic Prescription Service (EPS), the majority of the repeat dispensing is now done through the EPS and referred to as the electronic Repeat Dispensing (eRD).

7.47 This service involves the community pharmacy ensuring that each repeat supply is required, confirming there is no reason why the patient should be referred to their GP and if appropriate dispensing the repeat dispensing prescriptions issued by the GP at the agreed intervals based on the prescription batches.

Sign posting

7.48 This service involves pharmacies helping people who seek assistance by directing them to the most appropriate health, social care or support services for help when their

needs fall outside their scope. Examples include needs related to social care, specialist medical advice or community health programmes. This ensures that patients receive timely and appropriate care. Pharmacies are required to offer clear guidance on where the patient can access the required service. This could include providing contact details, directions or making a direct referral to such services if appropriate.

7.49 The lists of sources of care and support in the area can be obtained from NHS England and pharmacies should maintain an up-to-date directory of local services, including NHS and voluntary organisations to aid accurate signposting.

Support for self-care

7.50 The key components of this service are provision of advice and information to patient, promotion of self-care, supply of over-the-counter medicines by community pharmacy teams to patients as well as signposting them to other services if a condition is beyond the scope of self-care. This service aims at empowering patients to manage minor ailments and common health conditions independently, with guidance from community pharmacy teams through their provision of advice and where necessary, sale of medicines. This also includes handling referrals from NHS 111.

7.51 Examples of minor ailments that can be addressed include cold and flu symptoms, sore throat, management of mild aches and pains, skin conditions such as eczema, insect bites, allergies and digestive issues such as constipation and diarrhoea.

7.52 Provision of this service by community pharmacies help to reduce the burden on GPs and urgent care services, highlight the crucial role that community pharmacies play as the first point of contact for healthcare advice and promote trust between the patients and the community pharmacy teams.

Advanced Services

7.53 Advanced services are NHS Integrated Care Boards commissioned pharmacy services (NHSE delegated function) that community pharmacy contractors and dispensing appliance contractors can provide subject to accreditation as necessary.

7.54 There are currently nine advanced services within the CPCF:

- New Medicine Service (NMS).
- Pharmacy First Service.

- Flu Vaccination Service.
- Pharmacy Contraception Service (PCS).
- Hypertension case-finding service.
- Smoking Cessation Service.
- Appliance Use Review (AUR).
- Stoma Appliance Customisation (SAC).
- Lateral Flow Device (LFD) Service.

New Medicine Service (NMS)

7.55 The NMS supports patients with long-term conditions who have been prescribed new medicines. It aims to improve adherence, ensure patients understand their medicines, and address any issues such as side effects or concerns. Community pharmacists provide structured consultations over three key stages: the initial discussion, an intervention review, and final follow up review within four weeks of starting the medicine.

7.56 The 2025–2026 CPCF focuses on embedding and extending services already being provided by community pharmacies. One of the key developments include the expansion of NMS to include support for patients with depression from October 2025. All pharmacists must complete the Centre for Pharmacy Postgraduate Education (CPPE) Consulting with People with mental health problems online training to be able to support patients with dementia under the NMS.

7.57 The NMS focuses on medicines for the following conditions:

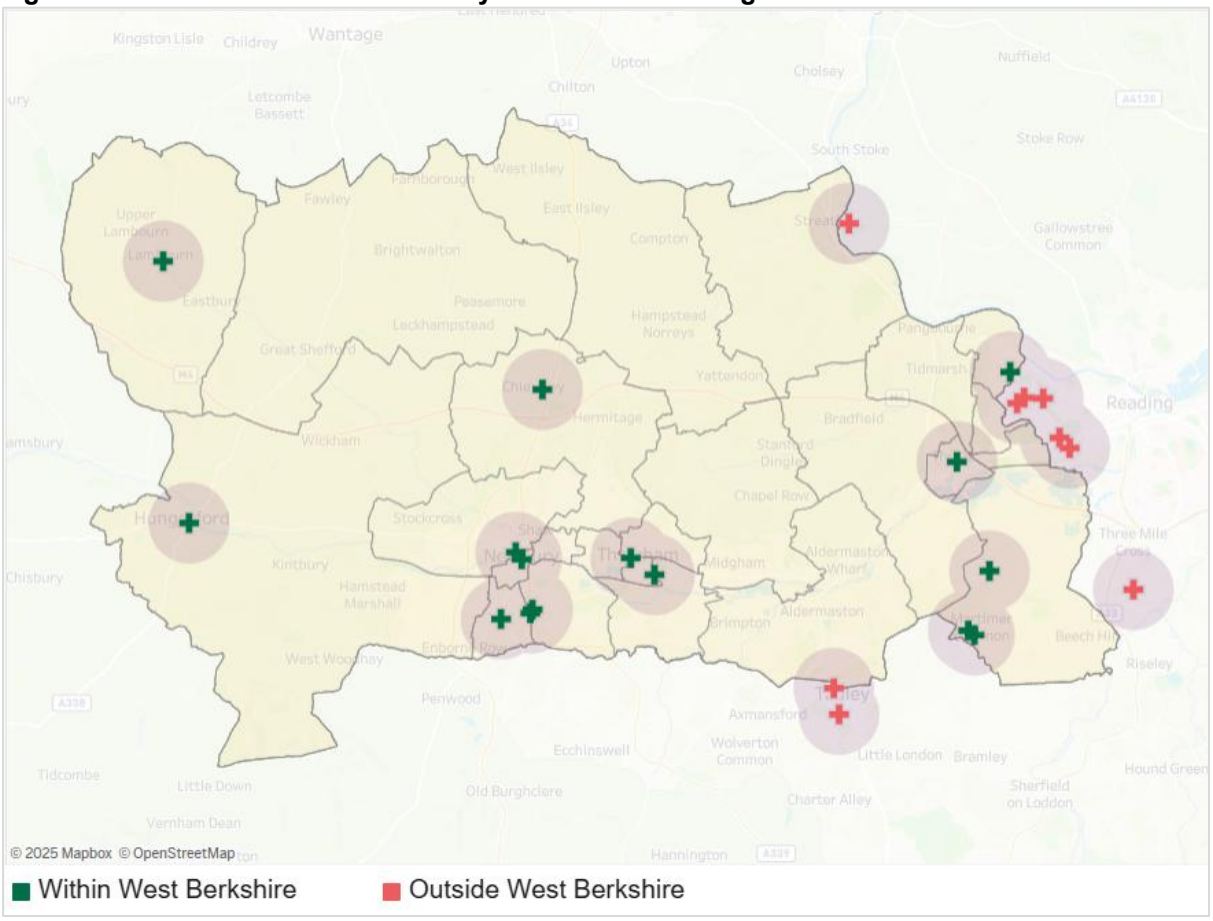
- Hypertension.
- Respiratory conditions such as Asthma and COPD.
- Type 2 Diabetes.
- Blood Thinners (including antiplatelet and anticoagulants).
- Hypercholesterolaemia.
- Osteoporosis.

- Gout.
- Glaucoma.
- Epilepsy.
- Parkinsons disease.
- Urinary incontinence/retention.
- Heart Failure.
- Acute Coronary Syndromes.
- Atrial Fibrillation.
- Stroke/TIA.
- Coronary Heart Disease.

7.58 Through this service, pharmacists play a crucial role in supporting patients to optimise the use of their medicines, improve adherence and resolve potential issues early.

7.59 The New Medicines Service (NMS) is provided in 15 West Berkshire pharmacies, but 9 additional pharmacies in neighbouring authorities are within reach of its residents.

Figure 7.14: Distribution of Community Pharmacies offering NMS



Source: NHSE

Table 7.6: Number of pharmacies in West Berkshire offering NMS by ward

Ward	Number of pharmacies
Burghfield & Mortimer	3
Newbury Greenham	2
Newbury Central	2
Tilehurst & Purley	1
Theale	1
Thatcham Colthrop & Crookham	1
Thatcham Central	1
Newbury Wash Common	1
Lambourn	1
Hungerford & Kintbury	1
Chieveley & Cold Ash	1
Total	**15**

Source: NHSE

Pharmacy First Scheme

7.60 This service builds upon the Community Pharmacist Consultation Service (CPCS) by extending its scope to provide clinical consultations and NHS-funded treatment for a comprehensive list of minor illnesses. The Pharmacy First pathway integrates

seamlessly into community pharmacy services, improving patient access to care and reducing demand on GP surgeries and urgent care. It allows pharmacists to clinically assess and treat eligible patients for the following conditions:

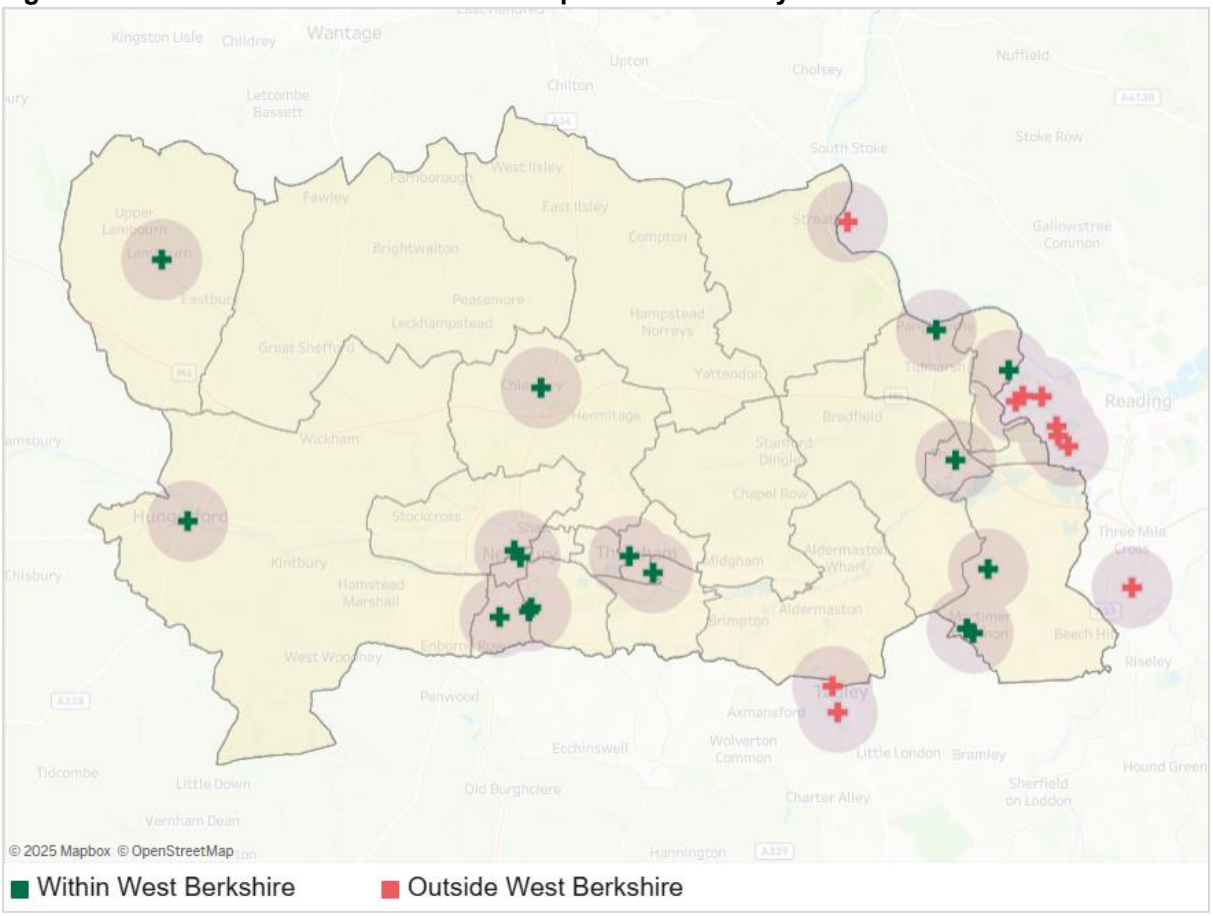
- Acute sore throat (5 years and above).
- Acute otitis media (1 – 17 years).
- Sinusitis (12 years and above).
- Impetigo (1 year and above).
- Shingles (18 years and above).
- Infected insect bites (1 year and above).
- Uncomplicated urinary tract infections (UTIs) in women (aged 16-64).

7.61 Referrals can be done by GP Surgeries, NHS 111, Urgent Treatment Centres or be walk-in consultations. This does not limit the existing minor ailments that pharmacies have historically seen.

7.62 The funding and other arrangements for community pharmacies for 2024/25 and 2025/26 which was published in April 2025 shows that following the success of the pharmacy first service since its launch in January 2024, additional funding has been secured to enable the service to continue to grow. NHS England has undertaken a clinical review of the clinical pathways, and the updated pathways is expected to be published shortly

7.63 The Pharmacy First Service is available from all 16 West Berkshire pharmacies, with 10 in nearby authorities also offering it.

Figure 7.14: Distribution of Pharmacies that provide Pharmacy First Service



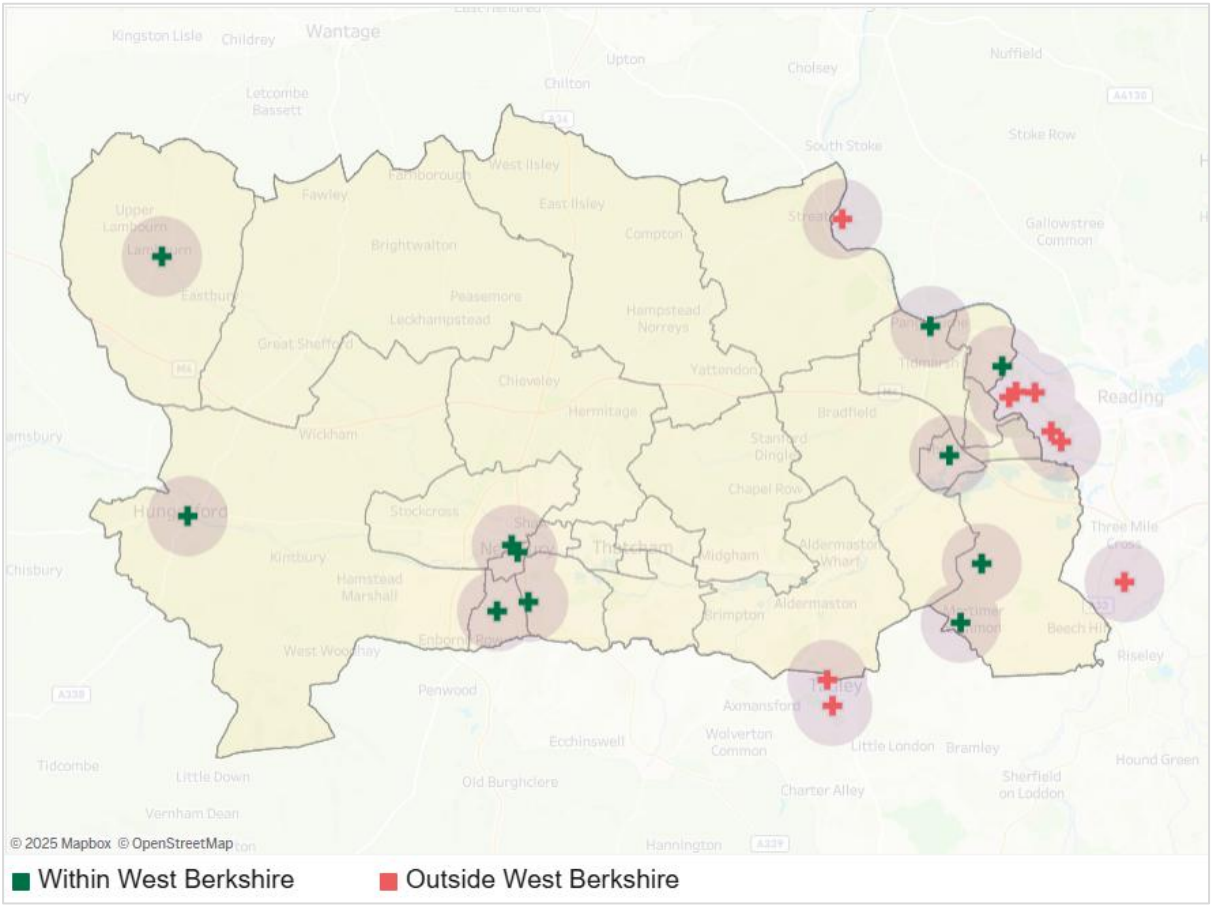
Source: NHSE

Flu Vaccination Service

7.64 Many community pharmacies administer NHS-funded seasonal flu vaccinations to eligible patients, including older adults, individuals with chronic conditions, pregnant women, and frontline healthcare workers. By increasing accessibility, particularly for vulnerable and hard-to-reach populations, the service enhances vaccination uptake. It plays a critical role in reducing flu-related complications, hospitalisations, and pressures on healthcare services during flu season.

7.65 Flu vaccination services are available from 11 pharmacies in West Berkshire. An additional 9 pharmacies in neighbouring areas also provide the service.

Figure 7.15: Distribution of Pharmacies that provide Flu Vaccinations



Source: NHSE

Table 7.7: Number of West Berkshire pharmacies offering Flu vaccinations by ward

Ward	Number of pharmacies
Newbury Central	2
Burghfield & Mortimer	2
Tilehurst & Purley	1
Theale	1
Pangbourne	1
Newbury Wash Common	1
Newbury Greenham	1
Lambourn	1
Hungerford & Kintbury	1
Total	**11**

Source: NHSE

Pharmacy Contraception Service (PCS)

7.66 PCS provides ongoing access to oral contraception through community pharmacies, including initial and repeat supplies of contraceptives. Pharmacists offer consultations to assess patient suitability, provide advice on proper contraceptive use, and support adherence to treatment. This service ensures easier and more convenient access to

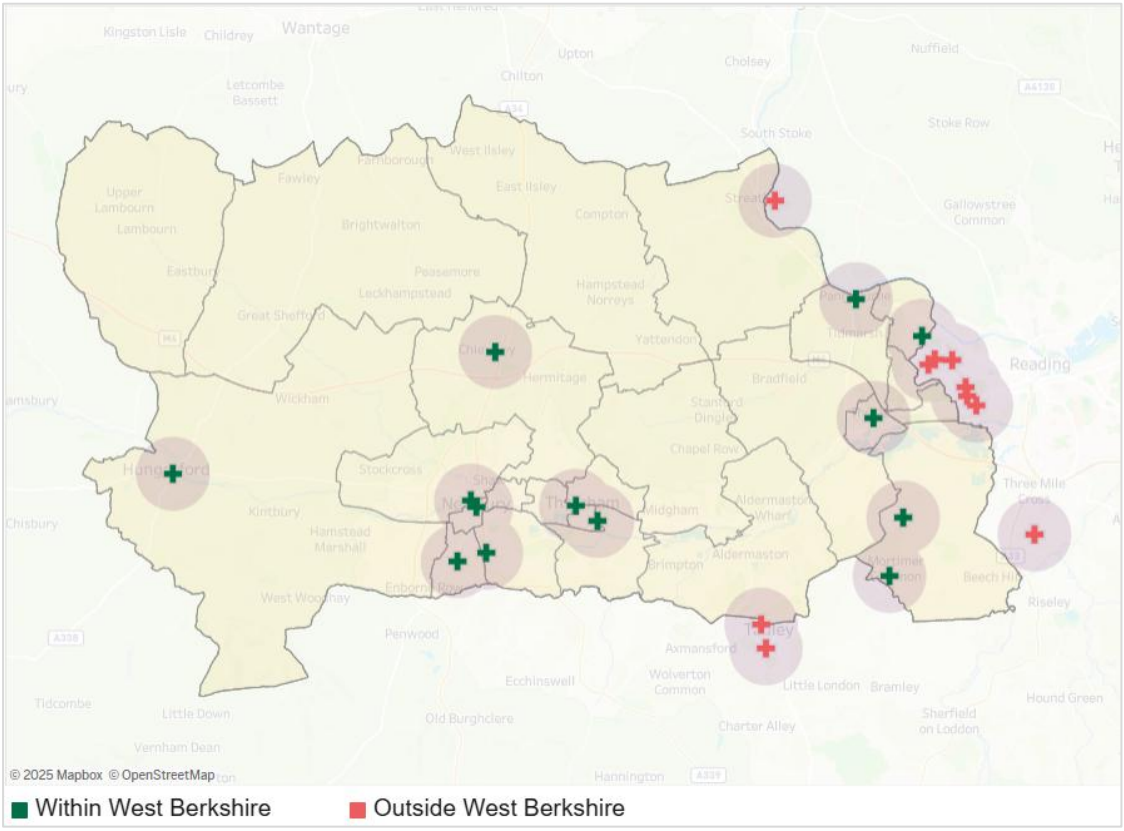
contraceptive services, particularly for patients unable to attend GP clinics, and plays an important role in reducing unplanned pregnancies.

7.67 As part of the agreement within the 2025/2026 CPCF, the PCS will be expanded to include emergency hormonal contraception (EHC) from October 2025. This service expansion will allow all community pharmacies across England the opportunity to provide equitable access to EHC for patients. This expansion will move away from the regional variation seen to date. Contractors will have the opportunity to maximise the service's benefits by initiating a patient on oral contraception as part of an EHC consultation. Additionally, better use of skill mix for the PCS has been agreed through enabling the delivery of parts of these services by registered and non-registered pharmacy staff. This includes enabling the delivery of patient group directions (PGDs) by pharmacy.

7.68 All pharmacists, and other registered pharmacy professionals intending to provide the service, must complete Centre for Pharmacy Postgraduate Education (CPPE) emergency contraception training.

7.69 PCS is available from 13 pharmacies in West Berkshire. An additional 10 pharmacies in neighbouring areas also provide the service.

Figure 7.16: Distribution of Pharmacies that provide PCS



Source: NHSE

Table 7.8: Number of West Berkshire pharmacies offering CPS by ward

Ward	Number of pharmacies
Newbury Central	2
Burghfield & Mortimer	2
Tilehurst & Purley	1
Theale	1
Thatcham Colthrop & Crookham	1
Thatcham Central	1
Pangbourne	1
Newbury Wash Common	1
Newbury Greenham	1
Hungerford & Kintbury	1
Chieveley & Cold Ash	1
Total	**13**

Source: NHSE

Hypertension Case-Finding Service

7.70 This is commonly referred to as the NHS Blood Pressure Check Service in public-facing communications. This was commissioned as an advanced service from 1st October 2021 with only registered pharmacy professionals (pharmacists and

pharmacy technicians) being allowed to provide the service. However, this was extended from the 1st of December 2023 to allow other suitably trained and competent staff to provide the service.

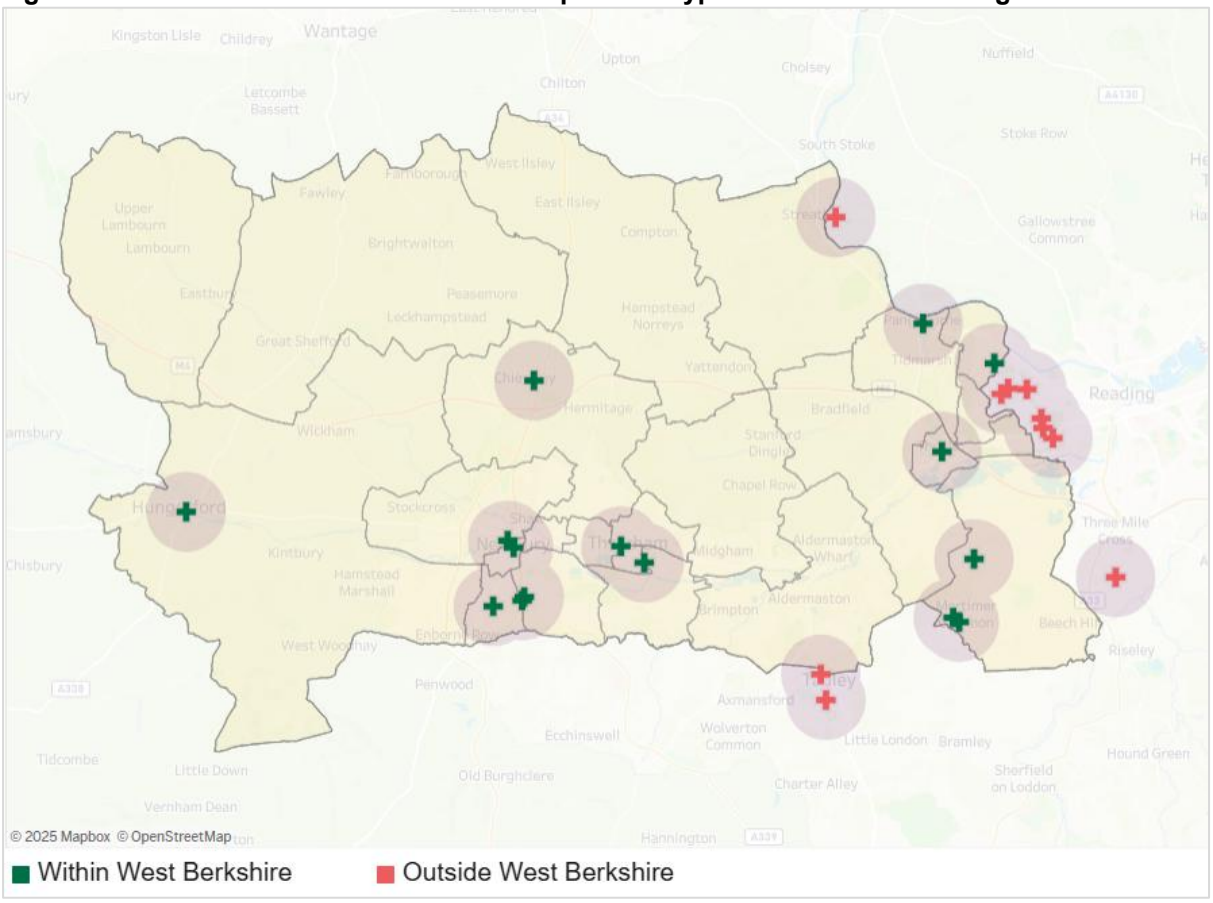
7.71 This service provides an opportunity to promote healthy behaviours to patients and it is aimed at early detection of hypertension and reduction of the risks of associated medical conditions such as stroke and heart diseases through early intervention.

7.72 This service is part of the NHS long term plan that emphasises preventive healthcare strategies and demonstrates the NHS commitment to reducing morbidity and mortality due to cardiovascular diseases.

7.73 As part of the agreements made in the 2025/2026 CPCF which was finalised in March 2025, updates to the Hypertension Case Finding Service specification will be made to further align the service to National Institute for Health and Care Excellence (NICE) guidelines, which will place explicit restrictions on the number of funded clinic check consultations a patient can have within a specified time period. Changes will also be made to clarify when it is appropriate for general practices to refer patients to the service for a clinic check consultation. NHS England has also committed to re-look at home blood pressure monitoring to further support the diagnosis of hypertension.

7.74 The Hypertension Case-Finding Service is available from 15 pharmacies in West Berkshire. An additional 10 pharmacies in neighbouring areas also provide the service.

Figure 7.17: Distribution of Pharmacies that provide Hypertension Case-Finding



Source: NHSE

Table 7.9: Number of West Berkshire pharmacies offering Hypertension Case-Finding by ward

Ward	Number of pharmacies
Burghfield & Mortimer	3
Newbury Greenham	2
Newbury Central	2
Tilehurst & Purley	1
Theale	1
Thatcham Colthrop & Crookham	1
Thatcham Central	1
Pangbourne	1
Newbury Wash Common	1
Hungerford & Kintbury	1
Chieveley & Cold Ash	1
Total	**15**

Source: NHSE

Smoking Cessation Service

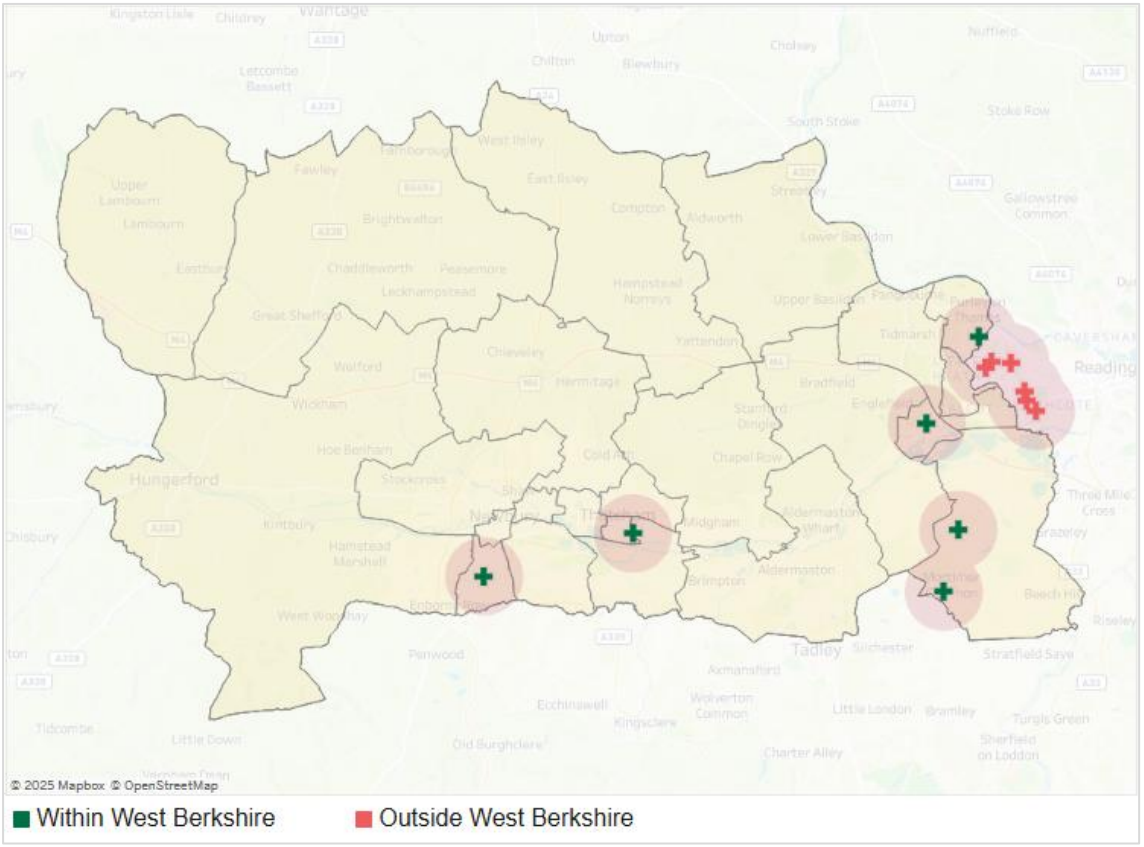
7.75 Community pharmacies currently support patients who are ready to quit smoking by providing structured, one-to-one behavioural support alongside access to nicotine replacement therapy (NRT). This service supports patients who started a “stop

smoking programme" in hospital to continue their journey in community pharmacy upon discharge. Thereby promoting healthy behaviours to service users which is an important part of the NHS Long Term Plan. At present, only NRT and behavioural support are available through the service.

7.76 Planned updates will expand the service to include the supply of Varenicline and Cytisinicline (Cytisine). Patient Group Directions (PGDs) will be introduced to allow suitably trained and competent pharmacists and pharmacy technicians to supply these medications so as to apply better use of skill mix. However, these changes are not yet in place. Before implementation, several key steps are required. This includes updates to the service specification, amendments to the Secretary of State Directions, development of supporting IT infrastructure and finalisation and publication of the relevant PGDs. A formal announcement is expected to be made in due course regarding the date from which the updated service model will apply.

7.77 The Smoking Cessation Service is available from 6 pharmacies in West Berkshire. An additional 6 pharmacies in a neighbouring HWB area also provide the service.

Figure 7.18: Distribution of Pharmacies that provide Smoking Cessation Service



Source: NHSE

Table 7.10: List of West Berkshire pharmacies providing Smoking Cessation Service

Pharmacy	Address	Ward
The Little Village Pharmacy	24 West End Road, Mortimer, Reading, Berkshire	Burghfield & Mortimer
Burghfield Pharmacy	Reading Road, Burghfield Common, Reading, Berkshire	Burghfield & Mortimer
Wash Common Pharmacy	Monks Lane, Newbury, Berkshire	Newbury Wash Common
Overdown Pharmacy	5 The Colonnade, Overdown Road, Tilehurst, Reading, Berkshire	Tilehurst & Purley
Kamsons Pharmacy	27 High Street, Theale, Reading, Berkshire	Theale
Thatcham Pharmacy	Unit 2 Burdwood Centre, Station Road, Thatcham, Berkshire	Thatcham Colthrop & Crookham

Source: NHSE

Appliance Use Review (AUR)

7.78 AURs are for patients using prescribed appliances including stoma appliances (such as colostomy or ileostomy bags), incontinence appliances (such as catheters and urine drainage bags) and wound care products. Community pharmacists review appliance use to ensure proper usage, resolve issues, and offer tailored advice, either in the pharmacy or at the patient's home. This helps address problems such as discomfort or leakage, improving appliance performance and enhancing patient comfort and confidence.

7.79 No pharmacies within or bordering the district are reported to have delivered this service. However, AURs can also be provided by prescribing health and social care providers.

Stoma Appliance Customisation (SAR)

7.80 The SAC service ensures stoma appliances are customised to meet individual patient needs. Community Pharmacists make necessary adjustments to stoma bags to ensure a proper fit, improving comfort and functionality whilst addressing issues like leakage or skin irritation. This service helps prevent complications, enhances quality of life and supports patients in managing their stoma effectively.

7.81 Though no pharmacies within or bordering the district reported delivering this service, West Berkshire residents can access the SAC service from non-pharmacy providers

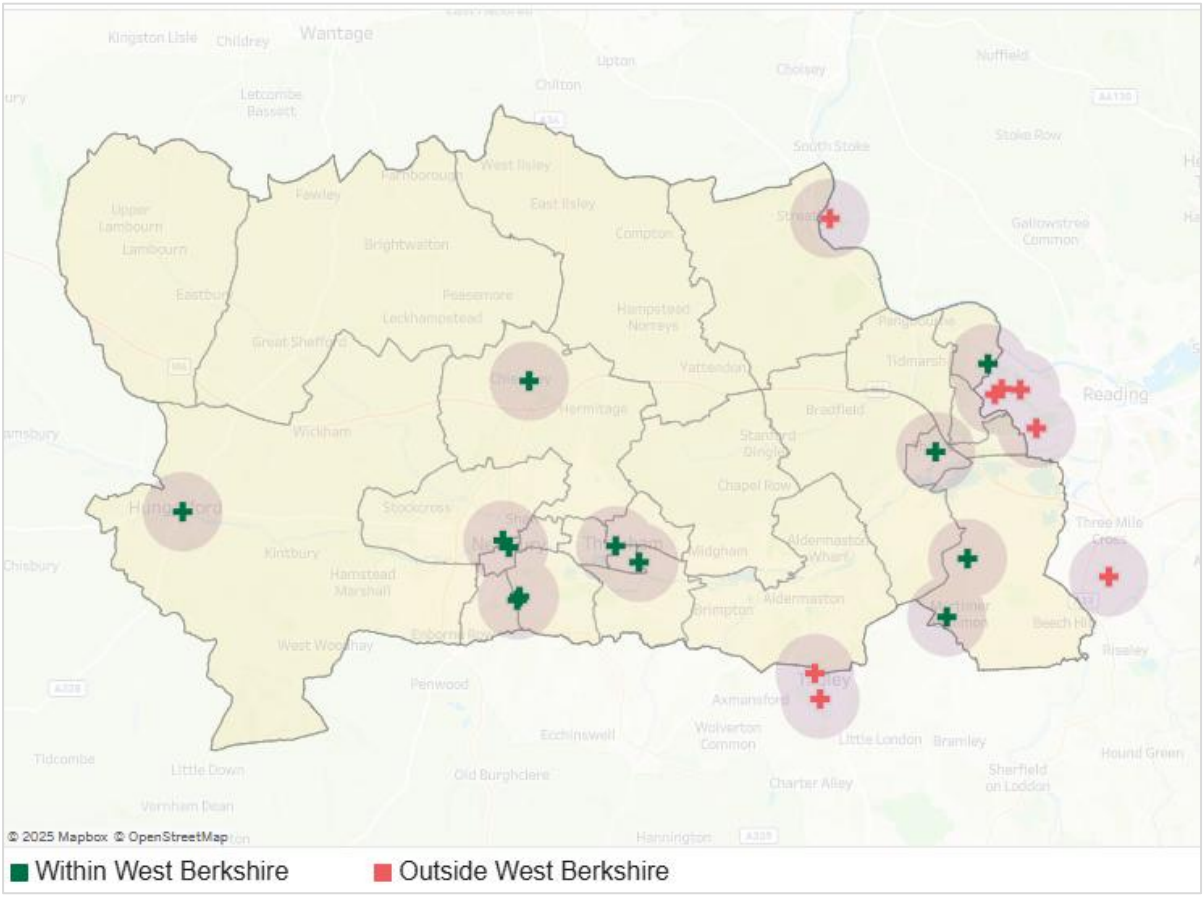
within the district (e.g. community health services) and from dispensing appliance contractors outside the district.

Lateral Flow Device (LFD) Service

7.82 The LFD service provided patient with access to COVID-19 lateral flow tests. Community Pharmacies distribute the kits, support correct usage and aid result interpretation. The service has currently been extended to 2024/25 and eligibility criteria updated for clarity.

7.83 The LFD Service is available from 12 pharmacies in West Berkshire. An additional 8 pharmacies in neighbouring area also provide the service.

Figure 7.19: Distribution of Pharmacies that provide LFD Service



Source: NHSE

Table 7.11: Number of West Berkshire pharmacies offering LFD by ward

Ward	Number of pharmacies
Newbury Greenham	2
Newbury Central	2
Burghfield & Mortimer	2
Tilehurst & Purley	1

Theale	1
Thatcham Colthrop & Crookham	1
Thatcham Central	1
Hungerford & Kintbury	1
Chieveley & Cold Ash	1
Total	**12**

Source: NHSE

Enhanced pharmacy services

7.84 These are a third tier of services commissioned by NHSE. There is currently one nationally enhanced service; COVID-19 Vaccination Service.

COVID-19 Vaccination Service

7.85 COVID-19 vaccination service was initially commissioned as a locally enhanced service by NHSE regional teams in consultation with the local pharmaceutical committees. However, in December 2021, provisions were made within the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 for the commissioning of nationally enhanced services. Hence, the Autumn 2022, Spring 2023, Autumn/winter 2023/24 and Spring booster covid-vaccination programmes were all commissioned as Nationally Enhanced Services.

7.86 This service allows pharmacies to administer COVID-19 vaccinations, contributing to public health efforts and increasing vaccine coverage.

7.87 People who will provide the COVID-19 Vaccination Service must complete practical training that meet the national minimum standards and core curriculum for Immunisation training for registered health professionals

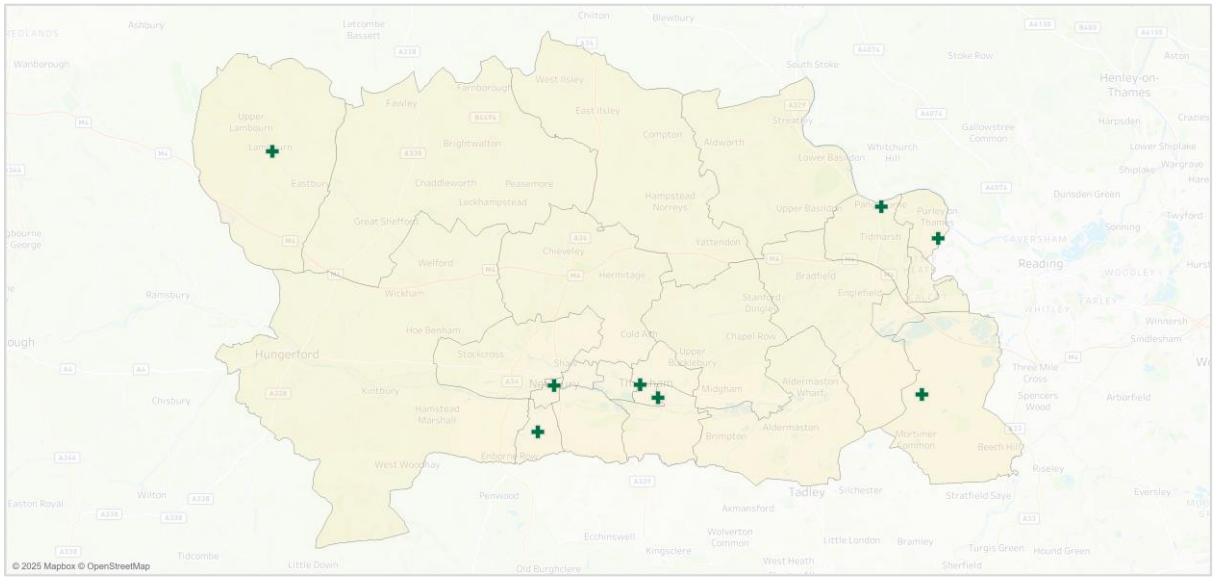
7.88 Pharmacy owners are expected to oversee and keep a record to confirm that all staff have undertaken training prior to participating in the administration of vaccinations. This includes any additional training associated with new vaccines that become available during the period of the service. They must ensure that staff are familiar with all guidance relating to the administration of the different types of vaccine and are capable of the provision of vaccinations using the different types of vaccine.

7.89 All persons involved in the preparation of the vaccine must be appropriately trained in this and have appropriate workspace to do so.

7.90 All persons involved in the administration of the vaccine must have completed all the required online training and face to face administration training where relevant as well as reading and understanding any relevant guidance, patient group direction or national protocol for COVID-19 vaccines

7.91 Eight pharmacies in West Berkshire provide the COVID-vaccination service as shown in Figure 7.20.

Figure 7.20: Distribution of pharmacies that provide COVID-19 Vaccination service in West Berkshire



Source: Community Pharmacy Thames Valley

Table 7.12: List of pharmacies that provide COVID-19 vaccination in West Berkshire

Pharmacy	Address	Ward
Burghfield Pharmacy	Reading Road, Burghfield Common, Reading, Berkshire	Burghfield & Mortimer
Halo Pharmacy	3-5 Crown Mead, Bath Road, Thatcham, Berkshire	Thatcham Central
Boots the Chemists	4-5 Northbrook Street, Newbury, Berkshire	Newbury Central
Pangbourne Pharmacy	3 The Square, Pangbourne, Berkshire	Pangbourne
Wash Common Pharmacy	Monks Lane, Newbury, Berkshire	Newbury Wash Common

Overdown Pharmacy	5 The Colonnade, Overdown Road, Tilehurst, Reading, Berkshire	Tilehurst & Purley
Thatcham Pharmacy	Unit 2 Burdwood Centre, Station Road, Thatcham, Berkshire	Thatcham Colthrop & Crookham
Lambourn Pharmacy	The Broadway, Lambourn, Berkshire	Lambourn

Source: Community Pharmacy Thames Valley

Chapter 8 - Other NHS Services

8.1 This chapter looks at services that are part of the health service, that although not considered pharmaceutical services under the 2013 regulations, are considered to affect the need for pharmaceutical services.

Locally commissioned services

8.2 These are the services commissioned locally in West Berkshire by Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB ICB). These services reduce the need for pharmaceutical services.

8.3 These services are designed to complement usual healthcare provisions with the aim of improving community health and providing accessible care. They include:

- Emergency Hormonal Contraception (EHC).
- Supervised Consumption.
- Needle Exchange.
- Guaranteed Provision of Urgent Medication (including palliative care & antivirals).
- Minor Ailment Scheme (MAS).
- Take Home Naloxone.

Emergency Hormonal Contraception (EHC)

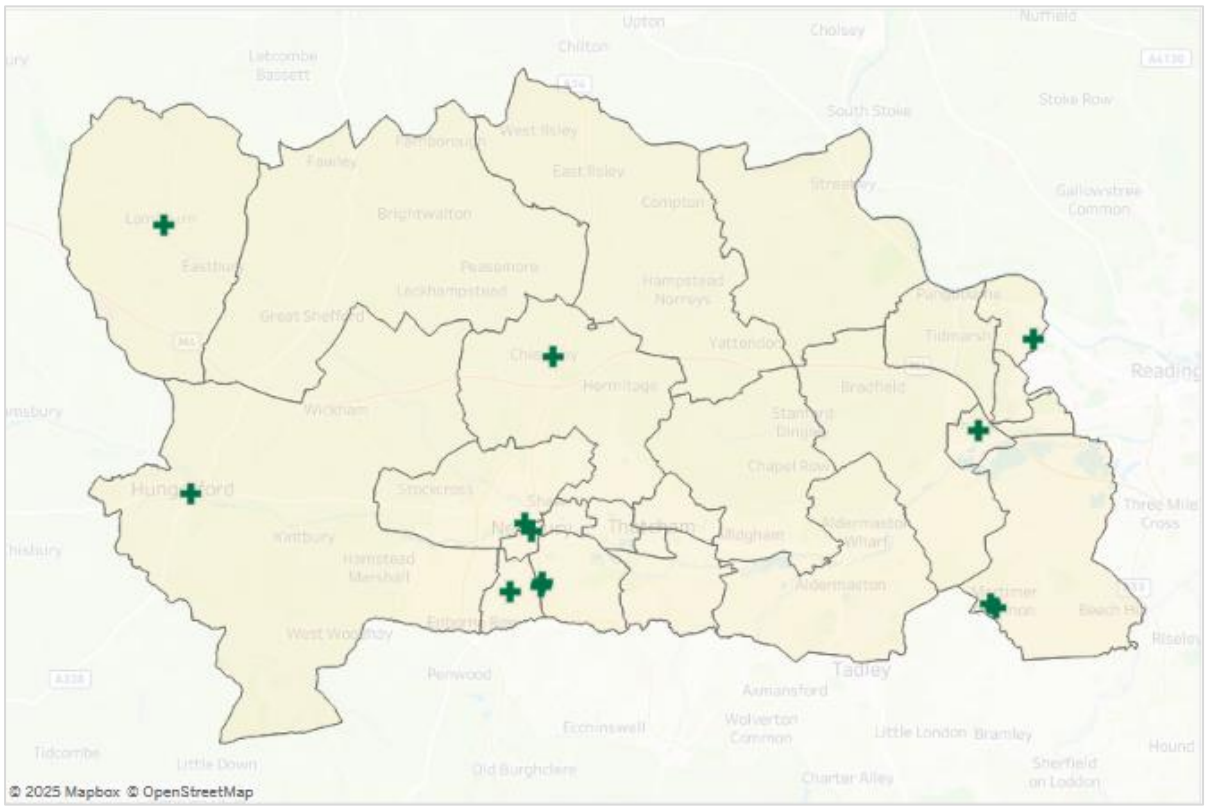
8.4 The Emergency Hormonal Contraception (EHC) Enhanced Service provides free access to Levonorgestrel and Ulipristal acetate (EllaOne®) through community pharmacies under a Patient Group Direction (PGD). Aimed at individuals aged 13-24, pharmacists assess suitability, ensuring safeguarding protocols, including Fraser Guidelines for under-16s. The service also offers free condoms, sexual health advice, and referrals to contraceptive and STI screening services.

8.5 This service aims to reduce unintended pregnancies, promote safer sex practices, and enhance access to emergency contraception in a confidential, community-based setting. Pharmacies play a key role in public health, integrating contraception advice with safeguarding measures and signposting to wider sexual health support.

8.6 The service is available at 12 pharmacies across West Berkshire.

8.7 It should be noted that, as discussed in the earlier, from October 2025, EHC will become a national pharmaceutical offering as part of the PCS service.

Figure 8.1: Distribution of Pharmacies that provide EHC Service



Source: Community Pharmacy Thames Valley

Table 8.1: List of pharmacies providing EHC

Pharmacy	Address	Ward
Boots the Chemists	125 High Street, Hungerford, Berkshire	Hungerford & Kintbury
The Little Village Pharmacy	24 West End Road, Mortimer, Reading, Berkshire	Burghfield & Mortimer
Downland Pharmacy	East Lane, Chieveley, Newbury, Berkshire	Chieveley & Cold Ash
Boots the Chemists	4-5 Northbrook Street, Newbury, Berkshire	Newbury Central
Tesco Pharmacy	Tesco Extra, Pinchington Lane, Newbury, Berkshire	Newbury Greenham
Wash Common Pharmacy	Monks Lane, Newbury, Berkshire	Newbury Wash Common
Mortimer Pharmacy	72 Victoria Road, Mortimer, Reading, Berkshire	Burghfield & Mortimer
Overdown Pharmacy	5 The Colonnade, Overdown Road, Tilehurst, Reading, Berkshire	Tilehurst & Purley
Kamsons Pharmacy	27 High Street, Theale, Reading, Berkshire	Theale

Boots the Chemists	Unit 13 Newbury Retail Pk, Pinchington Lane, Newbury, Berkshire	Newbury Greenham
Lambourn Pharmacy	The Broadway, Lambourn, Berkshire	Lambourn
Day Lewis Pharmacy	G Floor Unit, Access Hse, Strawberry Hill Road, Newbury, Berkshire	Newbury Central

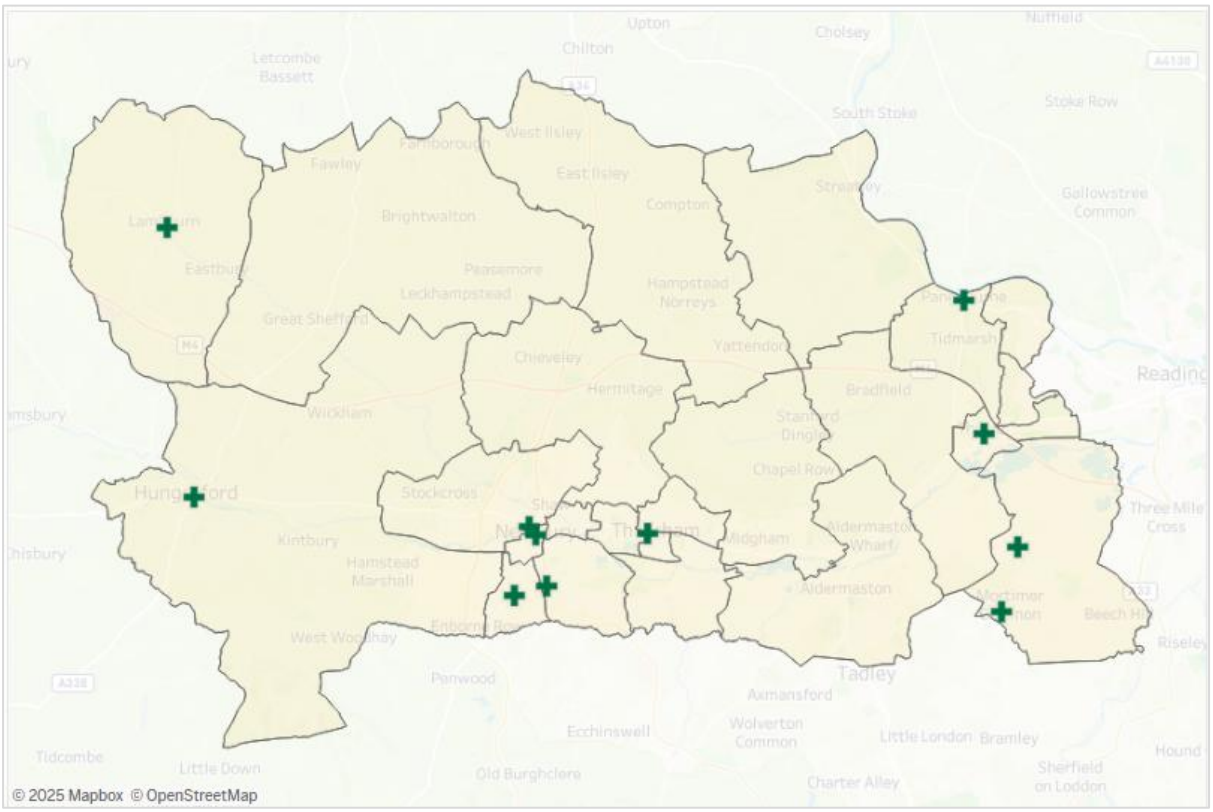
Source: Community Pharmacy Thames Valley

Supervised Consumption

8.8 Community pharmacies play a key role in supporting individuals managing substance misuse. This enhanced service includes supervised consumption of opioid substitution therapies (e.g., methadone or buprenorphine) to ensure proper administration and reduce the risk of diversion or misuse.

8.9 The Supervised Consumption Service is provided at 11 pharmacies across West Berkshire.

Figure 8.2: Distribution of Pharmacies that provide Supervised Consumption



Source: Community Pharmacy Thames Valley

Table 8.2: List of pharmacies providing Supervised Consumption

Pharmacy	Address	Ward
Boots the Chemists	125 High Street, Hungerford, Berkshire	Hungerford & Kintbury

The Little Village Pharmacy	24 West End Road, Mortimer, Reading, Berkshire	Burghfield & Mortimer
Burghfield Pharmacy	Reading Road, Burghfield Common, Reading, Berkshire	Burghfield & Mortimer
Halo Pharmacy	3-5 Crown Mead, Bath Road, Thatcham, Berkshire	Thatcham Central
Boots the Chemists	4-5 Northbrook Street, Newbury, Berkshire	Newbury Central
Pangbourne Pharmacy	3 The Square, Pangbourne, Berkshire	Pangbourne
Wash Common Pharmacy	Monks Lane, Newbury, Berkshire	Newbury Wash Common
Kamsons Pharmacy	27 High Street, Theale, Reading, Berkshire	Theale
Boots the Chemists	Unit 13 Newbury Retail Pk, Pinchington Lane, Newbury, Berkshire	Newbury Greenham
Lambourn Pharmacy	The Broadway, Lambourn, Berkshire	Lambourn
Day Lewis Pharmacy	Ground Floor Unit, Access House, Strawberry Hill Road, Newbury, Berkshire	Newbury Central

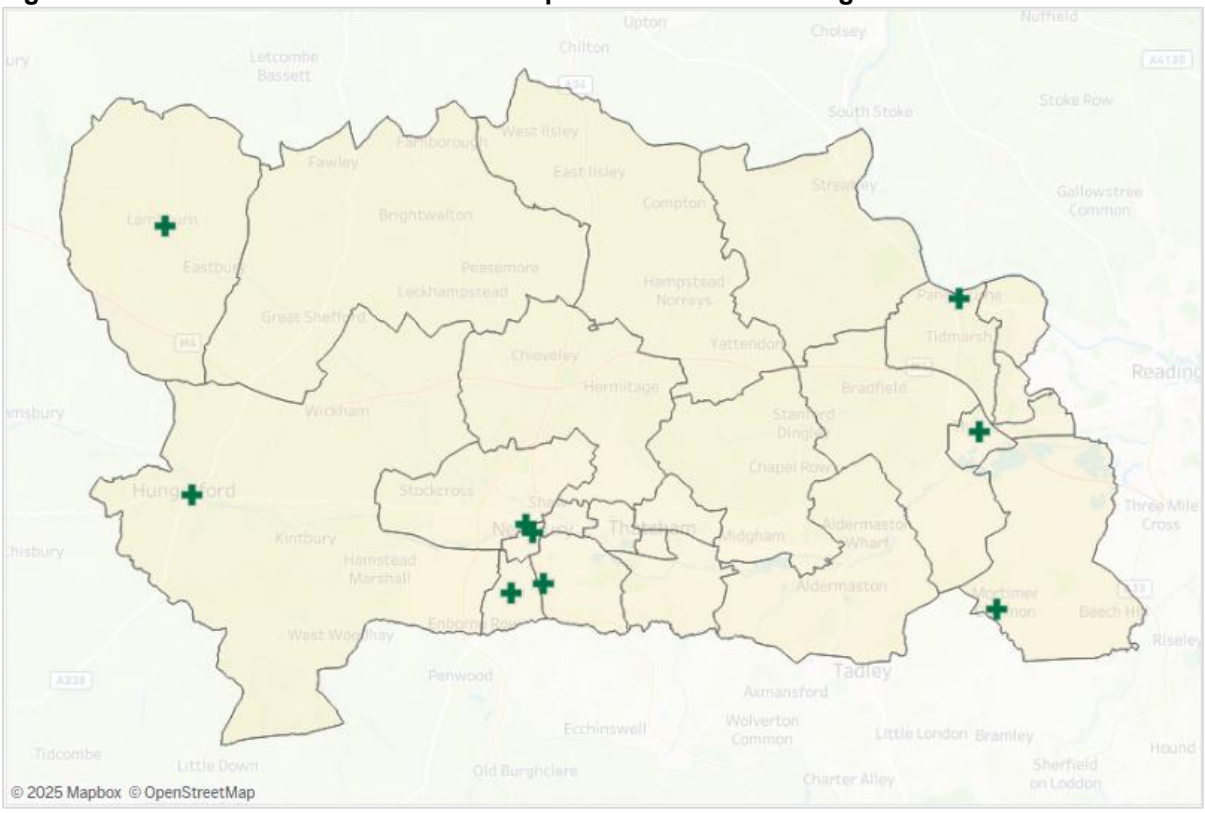
Source: Community Pharmacy Thames Valley

Needle Exchange

8.10 Pharmacists also provide needle and syringe exchange services, offering clean equipment to minimise the spread of bloodborne infections like HIV and hepatitis C.

8.11 Needle Exchange Services are provided by 9 pharmacies in West Berkshire.

Figure 8.3: Distribution of Pharmacies that provide Needle Exchange



Source: Community Pharmacy Thames Valley

Table 8.3: List of pharmacies providing Needle Exchange services

Pharmacy	Address	Ward
Boots the Chemists	125 High Street, Hungerford, Berkshire	Hungerford & Kintbury
The Little Village Pharmacy	24 West End Road, Mortimer, Reading, Berkshire	Burghfield & Mortimer
Boots the Chemists	4-5 Northbrook Street, Newbury, Berkshire	Newbury Central
Pangbourne Pharmacy	3 The Square, Pangbourne, Berkshire	Pangbourne
Wash Common Pharmacy	Monks Lane, Newbury, Berkshire	Newbury Wash Common
Kamsons Pharmacy	27 High Street, Theale, Reading, Berkshire	Theale
Boots the Chemists	Unit 13 Newbury Retail Pk, Pinchington Lane, Newbury, Berkshire	Newbury Greenham
Lambourn Pharmacy	The Broadway, Lambourn, Berkshire	Lambourn
Day Lewis Pharmacy	Ground Floor Unit, Access House, Strawberry Hill Road, Newbury, Berkshire	Newbury Central

Source: Community Pharmacy Thames Valley

Guaranteed Provision of Urgent Medication (including palliative care & antivirals)

8.12 The Guaranteed Provision of Urgent Medication service ensures prompt access to essential medicines, including palliative care drugs and antivirals, for patients with immediate needs. This service helps improve health outcomes and reduces pressure on urgent care by ensuring timely support, especially for vulnerable patients.

8.13 Two pharmacies in West Berkshire offer the service.

Minor Ailment Scheme

8.14 The local Minor Ailment Scheme, open to pharmacies in the Buckinghamshire, Oxfordshire and Berkshire West (BOB) ICB area, has been extended to the end of March 2025. Targeted at patients on low income and their dependents, for a concise list of OTC medicines, the service is paid in addition to the referral fee or can be used for eligible walk-in patients. Claims are made through PharmOutcomes.

8.15 Five West Berkshire pharmacies offer this service.

Table 8.4: List of pharmacies in the Minor Ailment Scheme

Pharmacy	Address	Ward
The Little Village Pharmacy	24 West End Road, Mortimer, Reading, Berkshire	Burghfield & Mortimer
Downland Pharmacy	East Lane, Chieveley, Newbury, Berkshire	Chieveley & Cold Ash
Boots the Chemists	4-5 Northbrook Street, Newbury, Berkshire	Newbury Central
Pangbourne Pharmacy	3 The Square, Pangbourne, Berkshire	Pangbourne
Thatcham Pharmacy	Unit 2 Burdwood Centre, Station Road, Thatcham, Berkshire	Thatcham Colthrop & Crookham

Source: Community Pharmacy Thames Valley

Take Home Naloxone (THN)

8.34 The West Berkshire Take-Home Naloxone (THN) service equips individuals at risk of opioid overdose, along with their carers, with naloxone kits to prevent fatalities. Available as an intramuscular injection (Prenoxad®) or intranasal sprays (Nyxoid® and Naloxone Pebble), naloxone temporarily reverses overdose effects. Pharmacies

provide the kits, educate recipients on overdose response, and record supplies via PharmOutcomes.

8.35 The Take Home Naloxone Service is provided by one pharmacy in West Berkshire (Lambourn Pharmacy on The Broadway, Lambourn).

Other prescribing centres

8.36 These are considered in the PNA as they have the potential to increase demand for pharmaceutical services.

Walk-In Centres

8.37 These centres provide urgent medical care for non-life-threatening conditions. Below are the walk-in centres in West Berkshire.

- Newbury Community Hospital located in London Road, Newbury
- Thatcham Health Centre located in Church Gate, Thatcham

GP extended access hubs

8.38 Primary Care Networks provide additional primary care appointments outside standard general practice hours (including weekday evenings and Saturdays) from multiple general practice locations.

End of life services

8.39 A range of services are available in West Berkshire to support individuals requiring end-of-life care, including inpatient facilities, community-based services, and support organizations. These services aim to provide compassionate care tailored to individual's needs, ensuring comfort and dignity during end-of-life stages. Below is a list of location where end of life services are provided in West Berkshire:

- Wilnash Care Ltd located at Oxford Street, Newbury
- Sue Ryder Palliative Care Hub Berkshire located at West Berkshire Community Hospital at London Road, Thatcham
- Berkshire NHS Foundation Trust – though located in Reading, it is widely used by West Berkshire residents

Mental Health Services

8.40 A variety of mental health services are available in West Berkshire to support individuals across needing support with their mental health. These services include community-based teams, specialised programs, and support organisations, all working collaboratively to provide comprehensive care.

8.41 Below is a list of locations in West Berkshire that offer mental health services.

- Newbury Community Hospital located in London Road, Thatcham
- Thatcham Health Centre located in Church Gate, Thatcham
- Berkshire NHS Foundation Trust – though located in Reading, it is widely used by West Berkshire residents

Chapter 9 - Conclusions and statements

9.1 This PNA has considered the current provision of pharmaceutical services across the West Berkshire HWB area and assessed whether it meets the needs of the population and whether there are any gaps in the provision of pharmaceutical services either now or within the lifetime of this document,

9.2 This chapter will summarise the conclusions of the provision of these services in West Berkshire with consideration of surrounding HWB areas.

Current Provision

9.3 The West Berkshire PNA Task and Finish Group has identified the following services as necessary to meet the need for pharmaceutical services:

- Essential services provided at all premises, including those though outside the West Berkshire HWB area, but which nevertheless contribute towards meeting the need for pharmaceutical services in the area.
- The dispensing service provided by those GP practices included in the dispensing doctor list.

9.4 Other Relevant Services are services provided which are not necessary to meet the need for pharmaceutical services in the area, but which nonetheless have secured improvements or better access to pharmaceutical services. The West Berkshire PNA Task and Finish Group has identified the following as Other Relevant Services:

- Adequate provision of advanced, enhanced, and locally commissioned services to meet the need of the local population, including premises which although outside the West Berkshire HWB area, but which nevertheless have secured improvements, or better access to pharmaceutical services in its area.

9.5 Preceding chapters of this document have set out the provisions of these services with reference to their locality, as well as identifying service by contractors outside the HWB area, as contributing towards meeting the need for pharmaceutical services in West Berkshire.

Current provision of necessary services

9.6 Essential services are deemed as necessary services as described above. In assessing the provision of essential services against the needs of the population, the PNA Task and Finish Group considered access as the most important factor in determining the extent to which the current provision of essential services meets the needs of the population. To determine the level of access within the district to pharmaceutical services, the following criteria were considered:

- Distance and travel time to pharmacies or dispensing practices
- Opening hours of pharmacies
- Proximity of pharmacies to GP practices
- Demographics of the population
- Health needs of the population and patient groups with specific pharmaceutical service needs

9.7 The above criteria were used to measure access across West Berkshire's 24 localities (electoral wards).

9.8 There are 16 community pharmacies and 7 dispensing GP practices in West Berkshire. Taking only community pharmacies into account as providers, there are 1.0 community pharmacies per 10,000 residents in West Berkshire. This ratio is markedly below the national average of 1.7 pharmacies per 10,000 residents. This low ratio is in keeping with the area's rural nature and overall low population density.

9.9 Though all residents can reach a pharmacy within a 20-minute drive, using the criterion of all those in an urban setting should be within a 20-minute walk of a community pharmacy, shows a region within Calcot that though urban does not have a pharmacy within a 20-minute walk

9.10 On weekdays, five pharmacies are open before 9am and sixteen are open past 5pm.

9.11 Weekend service is available from 13 pharmacies on Saturday and 4 on Sunday.

The PNA has identified a gap in the provision of pharmaceutical services to the population of Calcot. There is therefore a current need for a pharmacy in Calcot

providing essential services, Monday to Friday between 09:00 and 17:00, and Saturday 09.00 and 13.00.

Current provision of other relevant services

Current provision of advanced pharmacy services

9.12 The following advanced services are currently available for provision by community pharmacies: New Medicine Service, Pharmacy First service, Flu Vaccination Service, Pharmacy Contraception Service, Hypertension Case-finding Service, Smoking Cessation Service, Appliance Use Reviews, Stoma Appliance Customisation and Lateral Flow Device Tests Supply Service.

9.13 NMS is widely available with 15 of the 16 community pharmacies providing it.

9.14 The Pharmacy First service is provided by all 16 community the pharmacies in the council.

9.15 Flu vaccinations are also widely provided, with 11 pharmacies offering them.

9.16 Fifteen pharmacies provide the hypertension case-finding service.

9.17 Thirteen pharmacies in West Berkshire offer the Pharmacy Contraception Service.

9.18 Six West Berkshire pharmacies provide the Smoking Cessation Service.

9.19 Though no West Berkshire pharmacies delivered the AURs or SACs, these services are also widely available from other health providers such as district nurses and dispensing appliance contractors.

9.20 The Lateral Flow Device test supply service is provided by 12 pharmacies in West Berkshire.

9.21 As noted earlier, the population of Calcot does not have a community pharmacy within a 20-minute walk and the PNA has identified the Pharmacy First and NMS services are important to securing improvements and better access of pharmaceutical services to that population.

Current access to enhanced pharmacy services

9.22 COVID-19 vaccination service is a nationally commissioned enhanced service and is provided by 8 pharmacies in West Berkshire.

Current access to Locally Commissioned Services

9.23 These services are commissioned by Buckinghamshire, Oxfordshire and Berkshire West Integrated Care Board (BOB ICB). Pharmacies are commissioned to deliver these services to fulfil the specific health and wellbeing of the Reading population. These services include Emergency Hormonal Contraception, Supervised Consumption, Needle Exchange, Guaranteed Provision of Urgent Medication (including palliative care and antivirals), Minor ailment scheme and Take Home Naloxone.

9.24 Twelve pharmacies in West Berkshire offer the Emergency Contraceptive Service.

9.25 Eleven pharmacies provide the Supervised Consumption Service.

9.26 Needle Exchange Services are available from 9 pharmacies.

9.27 Two pharmacies in West Berkshire offer the Guaranteed Provision of Urgent Medication service.

9.28 Five West Berkshire pharmacies offer the Minor Ailment Service

9.29 Take Home Naloxone Service is available from one pharmacy.

9.30 Overall, there is very good availability of locally commissioned services in the district.

The PNA has identified Pharmacy First as a service is provided to the population of Calcot, but which the HWB is satisfied if were provided would secure improvements or better access to pharmaceutical services.

Future Provision

9.31 The Health and Wellbeing Board has considered the following future developments:

- Forecasted population growth.
- Housing Development information.
- Regeneration projects.
- Changes in the provision of health and social care services.
- Other changes to the demand for services.

Future provision of necessary services

9.32 The HWB is aware of the following approvals to open pharmacies in its area and new regulatory changes by the Department of Health and Social Care affecting DSPs:

- CA-Health Ltd to open a pharmacy in Newbury Town Centre. This was approved in December 2024 after an appeal. In June 2025 they notified NHSE that the address of the premises would be 61 Bartholomew Street. They have 12 months from then to commence service provision.
- Bolcer Limited to open a pharmacy at Gaywood Drive shops in Newbury Clay Hill Ward. This was approved in February 2025 after an appeal.
- Halo Pharmacy was granted permission to open a DSP at Unit 27B, Kingfisher Court, Newbury, RG14 5SJ. The approval was given in June 2025

9.33 The Department of Health and Social Care (DHSC) laid out new regulations in June 2025 affecting distance selling pharmacies (DSPs). This includes that from 23rd June 2025, no new applications for DSPs can be accepted/are permitted under the Pharmaceutical and Local Pharmaceutical Services (PLPS) regulations. It is also expected that from 1st October 2025 (with exception of COVID-19 and influenza vaccination services), DSPs will no longer be permitted to deliver directed services (Advanced and Enhanced services) in person to a patient. They may continue to deliver the COVID-19 and influenza vaccination services onsite, face-to-face, at their premises, until 31st March 2026.

9.34 The PNA is aware of and has considered the proposed housing developments in West Berkshire, particularly in the Sandleford site in Newbury Wash Common ward. The single pharmacy in this ward (Wash Common Pharmacy), has the highest dispensing rate in the entire HWB area (17,557 items per month). Though the situation is currently manageable as evidenced by the responses from the population survey, as mentioned in Chapter 6, the Sandleford site is expected to deliver over a thousand new houses in the next 10 years. Majority of the site is not due to complete during the lifetime of the current PNA, but future PNAs should continue to monitor these developments closely. A planning application was approved in January 2025 for a GP surgery and associated pharmacy at 'Land South of Newbury College and North Of Highwood Copse School'. This would serve the Sandleford development, but the timescale for construction is not yet known.

9.35 The Health and Wellbeing Board is not aware of any notifications to change the supplementary opening hours for pharmacies at the time of publication.

Based on the information available at the time of developing this PNA, no gaps were identified in the future needs of necessary pharmaceutical services in the lifetime of this PNA. There is anticipated to be large numbers of new dwellings in the next ten years so future PNAs should continue to monitor the population changes closely.

Future provision of other relevant services

9.36 Through the LPC, local pharmacies have indicated that they have capacity to meet future increases in demand for advanced, enhanced and locally commissioned services.

9.37 The PNA did not find any evidence to conclude that the services these pharmacies offer should be expanded.

Based on the information available at the time of developing this PNA, no future needs were identified for improvement and better access in any of the localities.

Appendix A - Buckinghamshire, Oxfordshire and Berkshire West-wide Pharmaceutical Needs Assessment Steering Group Terms of Reference

Background

From 1st April 2013, statutory responsibility for publishing and updating a statement of the need for pharmaceutical services passed to health and wellbeing boards (HWBs). Pharmaceutical Needs Assessments (PNAs) are used when considering applications for new pharmacies in an area and by commissioners to identify local health needs that could be addressed by pharmacy services.

Health and Wellbeing Boards have a duty to ensure revised PNAs are in place by October 2025. The coordination and high-level oversight of the PNAs covering the five local authorities across the Buckinghamshire, Oxfordshire and Berkshire West ICB footprint has been delegated to a steering group of partners. This collaborative approach aims to encourage the widest range of stakeholders and those with an interest in the PNA to participate in its development whilst reducing the burden on some partners to contribute to five separate PNAs. Following local discussions, it has been agreed to establish a BOB-wide Steering Group oversee the progress of the fives PNAs for BOB-area HWBs.

Remit and Functions of the Group

The primary role of the group is to oversee the PNA process across the BOB area, building on expertise from across the local healthcare community. In particular, this BOB Steering Group will:

- Ensure the PNAs comply with relevant legislation and meet the statutory duties of the Health and Wellbeing Boards.
- Ensure representation and engagement of a range of stakeholders.
- To support the five HWBs in the development of their PNAs by working collaboratively across the BOB area to ensure that the evidence base is joined

up to better support the Integrated Care Board and Local Authorities in their commissioning decisions.

- To communicate to a wider audience how the PNA is being developed.
- Ensure that the PNAs link with both national and local priorities.
- Ensure that the PNAs reflect future needs of the populations of the five respective Health and Wellbeing Board areas.
- Ensure that the PNAs become an integral part of the commissioning process.
- Ensure that the PNAs inform the nature, location and duration of additional services that community pharmacies and other providers might be commissioned to deliver.
- Ensure the PNAs guide the need for local pharmaceutical services (LPS) contracts and identify the services to be included in any LPS contract.

Frequency of Meetings

The Group will meet 5 times, as a minimum, during the production of the PNAs (between December 2025 and October 2025).

Governance

This BOB Steering Group will be chaired by the Clinical Lead for Medicines Optimisation from the ICB, or the Chief Pharmacist in the Chair's absence. This BOB Steering Group will be accountable to the HWBs of Buckinghamshire, Oxfordshire, Reading, West Berkshire, and Wokingham.

- Buckinghamshire – A project group chaired by Public Health has responsibility on behalf of the Buckinghamshire HWB to ensure the PNA is conducted according to the legislation. There will be direct reporting between this group and the Buckinghamshire project group.
- Oxfordshire – The Oxfordshire HWB has discharged the sign-off of the draft and final PNA to the Chair of the HWB and the Director of Public Health. An Oxfordshire project group chaired by Public Health has been established to ensure the PNA is conducted according to the legislation. The HWB has agreed to the alignment of the publication of the Oxfordshire PNA with other HWBs in

the region, allowing for a more coordinated approach with NHS colleagues. There will be direct reporting between this BOB PNA Steering Group and the Oxfordshire project group.

- Reading –The Reading HWB delegated responsibility for ensuring the document meets the regulatory requirements and is published in a timely manner to the Director of Public Health, and delegated authority to approve the consultation draft version of the PNA to the Reading and West Berkshire Task and Finish Group and the BOB PNA Steering Group.
- West Berkshire – The West Berkshire HWB delegated responsibility for ensuring the document meets the regulatory requirements and is published in a timely manner to the Director of Public Health, and delegated authority to approve the consultation draft version of the PNA to the Reading and West Berkshire Task and Finish Group and the BOB PNA Steering Group.
- Wokingham - The Wokingham HWB delegated responsibility for the delivery of the PNA to a steering group, including the sign-off of the pre-consultation draft to the BOB Steering Group. To ensure this sign-off, a local Wokingham sub-group has been formed. There will be direct reporting between the BOB Steering Group and the Wokingham sub-group. The sign off the final PNA remains the responsibility of the Wokingham HWB.

This steering group will be chaired by the Clinical Lead for Medicines Optimisation from the ICB.

Membership

Membership of the Group shall be as follows:

- BOB ICB Clinical Lead for Medicines Optimisation (Chair)
- Public Health leads of five Local Authorities
- Local Pharmaceutical Committee representative(s)
- BOB ICB pharmacy, general ophthalmic, and dental (POD) commissioning Representative
- BOB ICB South East Commissioning Hub – Pharmacy Commissioning Manager

- Healthwatch representatives
- Local Medical Committee representative(s)

Members will endeavour to find a deputy to attend where the named member of the group is unable to attend.

Other colleagues may be invited to attend the meeting for the purpose of providing advice and/or clarification to the group.

Quoracy

A meeting of the group shall be regarded as quorate provided that a ICB Pharmacy Contracting representative and at least 3 representatives from the 5 local authorities are present.

Confidentiality

An undertaking of confidentiality will be signed by group members who are not employed by the Local Authorities or the NHS.

During the period of membership of the Steering Group you may have access to information designated by the Local Authorities or NHS as being of a confidential nature, and you must not divulge, publish or disclose such information without the prior written consent of the relevant Organisation. Improper use of or disclosure of confidential information will be regarded as a serious disciplinary matter and will be referred to the employing organisation.

For the avoidance of doubt as to whether an agenda item is confidential, all papers will be marked as confidential before circulation to the group members.

Declarations of Interest

Where there is an item to be discussed for which a member could have a commercial or financial interest, the interest is to be declared to the Chair and formally recorded in the minutes of the meeting.

Date of final draft: 30 April 2025

Appendix B - Pharmacy provision within West Berkshire and 1 mile of boundary

HWB Area	Locality	Contract Type	ODS Code	Pharmacy	Address	Post Code	Early Opening?	Late Closing?	Open on Saturday?	Open on Sunday?
West Berkshire	Burghfield & Mortimer	Community Pharmacy	FD722	The Little Village Pharmacy	24 West End Road, Mortimer, Reading, Berkshire	RG7 3TF	No	Yes	No	No
			FFT63	Burghfield Pharmacy	Reading Road, Burghfield Common, Reading, Berkshire	RG7 3YJ	No	Yes	Yes	No
			FLP66	Mortimer Pharmacy	72 Victoria Road, Mortimer, Reading, Berkshire	RG7 3SQ	No	Yes	Yes	Yes
	Chieveley & Cold Ash	Community Pharmacy	FDN76	Downland Pharmacy	East Lane, Chieveley, Newbury, Berkshire	RG20 8UY	Yes	Yes	No	No
	Hungerford & Kintbury	Community Pharmacy	FC776	Boots the Chemists	125 High Street, Hungerford, Berkshire	RG17 0DL	No	Yes	Yes	No
	Lambourn	Community Pharmacy	FT063	Lambourn Pharmacy	The Broadway, Lambourn, Berkshire	RG17 8XY	No	Yes	Yes	No
	Newbury Central	Community Pharmacy	FJV60	Boots the Chemists	4-5 Northbrook Street, Newbury, Berkshire	RG14 1DJ	No	Yes	Yes	Yes
			FWX13	Day Lewis Pharmacy	G Floor Unit, Access Hse, Strawberry Hill Road, Newbury, Berkshire	RG14 1GE	No	Yes	No	No

HWB Area	Locality	Contract Type	ODS Code	Pharmacy	Address	Post Code	Early Opening?	Late Closing?	Open on Saturday?	Open on Sunday?
	Newbury Greenham	Community Pharmacy	FK567	Tesco Pharmacy	Tesco Extra, Pinchington Lane, Newbury, Berkshire	RG14 7HB	No	Yes	Yes	Yes
			FP041	Boots the Chemists	Unit 13 Newbury Retail Pk, Pinchington Lane, Newbury, Berkshire	RG14 7HU	No	Yes	Yes	Yes
	Newbury Wash Common	Community Pharmacy	FL172	Wash Common Pharmacy	Monks Lane, Newbury, Berkshire	RG14 7RW	Yes	Yes	Yes	No
	Pangbourne	Community Pharmacy	FJW39	Pangbourne Pharmacy	3 The Square, Pangbourne, Berkshire	RG8 7AQ	Yes	Yes	Yes	No
	Thatcham Central	Community Pharmacy	FJ120	Halo Pharmacy	3-5 Crown Mead, Bath Road, Thatcham, Berkshire	RG18 3JW	Yes	Yes	Yes	No
	Thatcham Colthrop & Crookham	Community Pharmacy	FP715	Thatcham Pharmacy	Unit 2 Burdwood Centre, Station Road, Thatcham, Berkshire	RG19 4YA	Yes	Yes	Yes	No
	Theale	Community Pharmacy	FMP97	Kamsons Pharmacy	27 High Street, Theale, Reading, Berkshire	RG7 5AH	No	Yes	Yes	No
	Tilehurst & Purley	Community Pharmacy	FM678	Overdown Pharmacy	5 The Colonnade, Overdown Road, Tilehurst, Reading, Berkshire	RG31 6PR	No	Yes	Yes	No
Basingstoke and Deane		Community Pharmacy	FN444	Morland Pharmacy	40 New Road, Tadley, Hampshire	RG26 3AN	No	Yes	No	No
			FVJ17	Holmwood Pharmacy	Franklin Avenue, Tadley, Hants	RG26 4ER	No	Yes	Yes	No

HWB Area	Locality	Contract Type	ODS Code	Pharmacy	Address	Post Code	Early Opening?	Late Closing?	Open on Saturday?	Open on Sunday?
Reading		Community Pharmacy	FVF36	Pottery Road Pharmacy	2a Tylers Place, Pottery Road, Reading, Berkshire	RG30 6BW	Yes	Yes	No	No
			FFX18	MedWay Pharmacy	32 Meadway Precinct, Tilehurst, Reading, Berkshire	RG30 4AA	No	Yes	Yes	No
			FHF90	Southcote Pharmacy	36 Coronation Square, Reading, Berkshire	RG30 3QN	No	Yes	Yes	No
			FT293	Asda Pharmacy	Honey End Lane, Tilehurst, Reading, Berkshire	RG30 4EL	No	Yes	Yes	Yes
			FDX71	Trianglepharmacy	88-90 School Road, Tilehurst, Reading, Berkshire	RG31 5AW	No	Yes	Yes	No
			FGF17	Tilehurst Pharmacy	7 School Road, Tilehurst, Reading, Berkshire	RG31 5AR	No	Yes	No	No
South Oxfordshire		Community Pharmacy	FAA59	Goring Pharmacy	High Street, Goring-On-Thames, Reading, Berkshire	RG8 9AT	No	Yes	Yes	No
Wokingham		Community Pharmacy	FG634	Day Lewis Pharmacy	Welford House, Basingstoke Road, Spencers Wood, Reading, Berkshire	RG7 1AA	No	Yes	No	No

Appendix C - Consultation report

This report presents the findings of the consultation for the West Berkshire PNA for 2025 to 2028.

For the consultation, the draft PNA was sent to a list of statutory consultees outlined in Chapter 1, paragraph 1.13. In total 21 people responded to the consultation via email or via our consultation survey, they represented:

- 17 members of the public.
- 2 community pharmacies (Downland community pharmacy and Boots UK Limited).
- Oxfordshire County Council (one).
- Planning Policy Team, West Berkshire Council (one).

The PNA steering group constituted the majority of stakeholders that must consulted with for this consultation and they provided feedback on the PNA before it was presented for the consultation period.

The responses to the survey regarding the PNA were positive. They are presented in the table below. Additional comments received via are presented in the table that follows.

Consultation survey question	Yes	No	Unsure or not applicable
Has the purpose of the pharmaceutical needs assessment been explained?	21		
Does the pharmaceutical needs assessment reflect the current provision of pharmaceutical services within your area?	16	3	2
Are there any gaps in service provision i.e. when, where and which services are available that have not been identified in the pharmaceutical needs assessment?	3	12	6
Does the draft pharmaceutical needs assessment reflect the needs of your area's population?	11	4	6
Has the pharmaceutical needs assessment provided information to inform market entry decisions i.e. decisions	7	4	10

on applications for new pharmacies and dispensing appliance contractor premises?			
Has the pharmaceutical needs assessment provided information to inform how pharmaceutical services may be commissioned in the future?	12	3	6
Has the pharmaceutical needs assessment provided enough information to inform future pharmaceutical services provision and plans for pharmacies and dispensing appliance contractors?	9	4	4
Do you agree with the conclusions of the pharmaceutical needs assessment?	16	1	4

The table below presents the comments received during the statutory 60-day consultation period and the response to those comments from the steering group.

Comment received	PNA Steering Group response
Additional comments by community pharmacies: • A gap in pharmacy provision has been highlighted in Calcot. It would be useful to understand exactly where in Calcot and give a bit more specific detail on the actual location a contract is required. • We also open before 9am, and provide Flu vaccination (Downland pharmacy) • Note overdown pharmacy is open Saturday mornings - Overdown Pharmacy 5 The Colonnade, Overdown Road, Tilehurst, Reading.	Calcot: A gap in pharmacy provision has been identified in the Calcot area. Figure 7.6 of the document details the affected area. The gap was created by a closure of a Lloyds Pharmacy (in Sainsburys) which was located on Bath Road, Calcot, RG31 7SA. Update of pharmacy services: The list of pharmacy times for the pre-consultation draft of the document was correct at the time of data capture in December 2024. The pharmacy list and times were updated after the consultation with the changes made to the text where appropriate.
Responses to whether the draft pharmaceutical needs assessment reflect the needs of the area's population: • The adequacy of staffing levels, dispensing processes and IT systems is not addressed - though crucial. • Quite simply the pharmaceutical shops are suffering from a lack of investment in staff and facilities, their ordering and dispensing while compliant often fails to	While these issues were outside the scope of the Pharmaceutical Needs Assessment, the comments regarding staffing levels, dispensing processes, long waits, and limited space within the pharmacy are important and will be shared with the Local Pharmaceutical Committee and NHSE commissioners for discussion.

deliver the medicines patients require without several visits. • Staffing at the pharmacies is an issue. Long waits and not enough space to wait. Also, when companies provide vaccinations then you can't see a pharmacist. The availability should take into account the number of pharmacists not just premises.	
Additional comments regarding what pharmacies can provide: • Pharmacies could offer help in understanding how to make use of the NHS app to make appointments, re order tablets etc • Pharmacists are important members of our community. I would be interested to know if pharmacists are given training in signposting to adjacent services, e.g. do they know how to refer a street homeless person to StreetLine?	The comment on pharmacies offering help to patients on understanding how to use the NHS App have been shared with the LPC. There are also various online resources such as YouTube videos that teach patients how to use the NHS app. The comment on if pharmacists are given training in signposting to adjacent services is addressed in section 7.8. Signposting is one of the essential services that pharmacies are required to provide. This service involves pharmacies helping people who seek assistance by directing them to the most appropriate health, social care or support services for help when their needs fall outside their scope. Pharmacies are required to maintain an up-to-date directory of local services, including NHS and voluntary organisations to aid accurate signposting.
Additional comments regarding accuracy of the text: • Para 4.45 – Please remove the reference to Gypsy and Traveller Accommodation Development Plan, replace it with Gypsy, Traveller and Travelling Showpeople Accommodation Assessment. - See: https://www.westberks.gov.uk/media/51475/GTAA-Update-2021/pdf/West_Berkshire_GTAA_2021_Update.pdf?m=1699537234477	These have been updated.

• I'm just looking at the PNA and spotted an error in the sexual health section. Our Sexual Health service is provided by Royal Berkshire NHS Foundation Trust not Berkshire Healthcare NHS Foundation Trust (page 42).	