

Leicester Pharmaceutical Needs Assessment 2025

Draft for consultation 2025

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Draft

1 Executive Summary

1.1 Introduction and background

'Pharmaceutical' refers to the need for medicines or other health services including prevention and whether this is met by the arrangements with community pharmacies in Leicester.

The purpose of the Pharmaceutical Needs Assessment (PNA) is to:

- Identify the pharmaceutical services currently available and assess the need for pharmaceutical services in the future
- Inform the planning and commissioning of pharmacy services by identifying which services should be commissioned for local people, within available resources, and where these services should be; and
- Inform decision making in response to applications made to NHS England and NHS Improvement by pharmacists and dispensing doctors to provide a new pharmacy. The organisation that will make these decisions is NHS England.

The PNA is a statutory document that is used by NHS England to agree changes to the commissioning of local pharmaceutical services. The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 set out the legislative basis for developing and updating PNAs¹

The report identifies whether there are any unmet pharmaceutical needs or gaps in service provision and produces recommendations to strengthen service provision.

This PNA has reviewed pharmacy coverage in relation to the population health needs of the people of Leicester City. This has involved looking at the existing services, their locations, the range of services they are providing and the views of the people who are using them. The PNA refers to the services that were provided on the 31st March 2024 where available.

The PNA analysis focusses on the services that are currently provided in pharmacies and not those that have been decommissioned since the last PNA.

Within the scope of this document, the PNA concludes that community based pharmacies are meeting the current needs of residents in Leicester City for essential and advanced services where they are offered.

1.2 Community Pharmacy Services

The PNA must relate to all pharmaceutical services provided and assess the following: the demography of its area and needs of different localities whether there is sufficient choice of pharmaceutical services within its area the pharmaceutical services provided by surrounding areas that may affect need within the area future pharmaceutical needs of the population

¹ National Health Service. The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. (2013). at http://www.legislation.gov.uk/uksi/2013/349/pdfs/uksi_20130349_en.pdf

The assessment covers:

Essential services: required in all pharmacies and includes

Dispensing and repeat dispensing

Promotion of healthy lifestyles

Disposal of unwanted medicines

Signposting advice, treatment or support that the pharmacy cannot provide

Support for self-care

Clinical governance

Discharge medicines service (when a person is discharged from hospital)

Healthy Living Pharmacies (from 2021)

Advanced services: optional nationally commissioned services. As at March 2024, these include

Appliance Use Review (AUR)

Community Pharmacist Consultation Service, extended to include Pharmacy First Service

Flu Vaccination Service

Hypertension Case-Finding Service

New Medicine Service (NMS)

Stoma Appliance Customisation (SAC)

Smoking Cessation Service (Commissioned as an advanced service from 10th March 2022)

Pharmacy Contraception Service (PCS)

** Hepatitis C Testing Service was decommissioned 31st March 2022*

For more information visit: [Advanced Services : PSNC Main site](#).

Locally commissioned services: optional locally commissioned services including

Emergency Hormonal Contraception (EHC)

Needle Exchange Service

Supervised Consumption Service

Naloxone Service

H. Pylori C13 Urea Breath Test Service

Palliative Care Service

C Card Service

National Enhanced Services: nationally specified services with agreement of standard conditions nationally while allowing the flexibility for local decisions to commission the service to meet local population needs, including Covid Vaccination Service

Pharmacies may also choose to provide additional services on a voluntary basis that are of direct benefit to the patient. These include services such as prescription collection and delivery, monitored dosage system, minor ailments and many others.

This PNA has reviewed community pharmacy need and provision for the population of Leicester city as of 31st March 2024. Prison or hospital pharmacies are excluded from the

scope of the PNA. The PNA also considers future pharmaceutical provision. It presents an analysis of actual or potential gaps in service and recommendations for improvement.

1.3 Health Needs in Leicester

Leicester is a city characterised by rich diversity, with a younger population than England and over half of its residents from an ethnic group other than White British at the time of the 2021 census. Additionally, it experiences high levels of deprivation with around 35% of its 379,780 residents living in the 20% most deprived areas in the country. Health needs within the city are not evenly distributed, with the worst outcomes often concentrated in the most deprived areas. Life expectancy for men and women in Leicester is significantly lower than the England average.

1.4 Location and access to pharmacies

There are 83 pharmacies in Leicester (March 2024), equivalent to 2.2 pharmacies per 10,000 population (2.1 in England). All Leicester pharmacies are open for at least 40 hours per week, and 5 are open for 100 hours. The majority of 100-hour pharmacies are located in the west and central locality areas of Leicester, with another one in the East. Opening times are generally from 7am to 9pm Monday to Saturday, with some opening for reduced hours on Sunday.

There are more pharmacies concentrated in the Central and North areas of the city, and fewer in the West and North West of the city. Travel time analysis indicates that generally nearest pharmacies can be reached within 15 minutes of walking. There are a few areas of the city where walk times may be longer than 15 minutes but these should be accessible by car or public transport within 15 minutes. Leicester residents can also make use of several pharmacies just into Leicestershire; 10 pharmacies within 0.5km and 14 between 0.5 and 1km of the city boundary.

1.5 Pharmaceutical service provision

All pharmacies are required to dispense medicines as part of their essential services contract with NHS England. In addition, they may be accredited to provide advanced services or locally commissioned services to provide for the needs of the local population.

Service provision is considered across Leicester by six locality areas. These have been defined by, and are consistent with, those used in the Health and Wellbeing Survey 2024. It is acknowledged that not everyone will choose their nearest pharmacy, however, by providing rates for smaller locality areas this helps to show variation in provision of services for local populations across the city.

1.6 Projected future needs

Applying the ONS population projections to the latest mid-year estimates for 2023, suggests that by 2028, the population of Leicester is predicted to grow by around 7,300 to give a total population of around 387,100. Projections indicate that Leicester will have an increase of around 5,000 people aged 65 and over, which represents an increase in the proportion of the population aged 65 and over from 12% in 2023 to 13% in 2028.

With the current provision of 83 pharmacies in Leicester, this would offer a rate of 2.1 pharmacies per 10,000 population in 2043. The current rate in Leicester is 2.2, and nationally 2.1 per 10,000 population. This considers only the numbers of pharmacies, it

does not take into account variation in opening hours and services provided.

1.7 Consultation

There is a statutory requirement for each Health and Wellbeing Board to consult with a number of bodies about the contents of the pharmaceutical needs assessment for a minimum of 60 days. The consultation period is scheduled for June and July 2025. The responses of this will be reported in the final document.

1.8 Analysis of gaps in service

Pharmacies and local populations: As of 31st March 2024, Leicester has 83 pharmacies located across the City, including 6 distance selling pharmacies and one pharmacy eligible for the Pharmacy Access Scheme. Overall Leicester has more pharmacies per head of the population than England (2.2 vs 2.1 pharmacies per 10,000 population).

Pharmacies are not evenly distributed throughout the city. There are more pharmacies in the North and Central locality areas, with several closely located in Belgrave (around Belgrave Road) and another cluster around Spinney Hills towards Stoneygate. In the west of the city the pharmacies are more widely spread, although there are a number along the Narborough Road area in the West End.

Access and travel times:

Analysis of access and travel times suggests most residents will be able to access their nearest pharmacy within 15 minutes by walking, car or public transport. Travel times by car and public transport will be subject to traffic variations during the day. Residents may have to travel further to reach a pharmacy outside of normal opening hours.

Opening hours:

All Leicester pharmacies are open for at least 40 hours per week; around 40% (33) are open up to 50 hours per week and Leicester has 5 pharmacies classified as 100-hour pharmacies. The 100-hour pharmacies are located in the west (2 pharmacies), central (2), and East (1) locality areas of the city. There is lower provision for extended opening hours in the North West of Leicester, however there is one 100-hour county pharmacy within 1km of the City border towards the North West of the city.

Essential Services:

It is concluded that there is adequate provision for the population of Leicester since essential services are provided by all pharmacies. Some residents may have further to travel where pharmacies are more sparsely distributed and opening hours are shorter (particularly in the North West of Leicester).

Advanced Services:

The majority of pharmacies provide the advanced services Community Pharmacist Consultation Service, Flu Vaccination Service and New Medicines Services. Few pharmacies offer Stoma Appliance Customisation and smoking cessation services. No activity was reported for the Appliance Use Review (AUR) in the data from NHS England.

Locally Commissioned Services:

Locally Commissioned Services are services commissioned by Local Authorities and Integrated Care Boards (ICBs) which can be tailored towards the health needs of the local population. Pharmacies can be particularly effective in providing services to under-served populations as they offer a walk-in service and do not require an appointment. They also offer valuable advice and support for people in making lifestyle choices and in managing their own health conditions.

Where data is available, the PNA presents maps showing the location of pharmacies providing each service by the six locality areas across the city. In order to provide an indication of variation across the city, rates are provided per 10,000 population within the locality area. It is recognised however, that residents will not always choose the pharmacy located nearest to them.

1.9 Conclusions and recommendations

This PNA has reviewed the provision of pharmaceutical services as of March 2024 (where available, and concludes that overall provision is adequate for the population of Leicester. There are differences in local provision of services across the city and it may be that residents in some areas have to travel a little further to access a particular service or out of normal working hours.

The majority of pharmacies are accredited to carry out the advanced services of Community Pharmacist Consultation Service, Flu Vaccination Service and New Medicines Services (NMS).

Community based pharmacies offer a range of locally commissioned services to the local population that can be tailored by commissioners to meet specific local healthcare needs. Pharmacies can provide a valuable service to patients, particularly underserved populations who can take advantage of a drop-in service at a time more convenient to themselves without the need for an appointment. It may also be more appealing to use a less formal environment within a pharmacy compared with the GP surgery.

Equity of service:

It is recommended that NHS England (and where relevant Leicester City Council and Leicester, Leicestershire and Rutland Integrated Care Board) should:

- Work with NHS-England/ICB to review areas where there are fewer pharmacies, fewer services provided and lower opening hours to see how pharmacies can be incentivised to open new premises and improve equity of service. This is with particular reference to areas identified with lower provision in the North West and West localities.
- Review cross-city and county-border service provision to ensure uniformity of access and quality of service
- Work closely with Integrated Care Board and Primary Care Networks to tackle inequities in service uptake through digital literacy

- Work with pharmacies and Local Pharmaceutical Committee to examine how equity issues can be addressed further. Eg a review of service quality and uptake, including consideration of cultural and equalities needs
- Work closely with Integrated Care Board and Primary Care Networks to tackle inequities in digital literacy
- Consider the effects of the additional pressure on pharmacies due to the national pharmaceutical workforce shortage and work with pharmacies to mitigate the impact of these on service provision
- Encourage pharmacies to offer discretionary services in relation to local need.
- Monitor current and future plans of housing development within City to ensure future increases in demand are met with adequate provision.

Promotion of health and healthcare management:

It is recommended that NHS England (and where relevant Leicester City Council and Leicester, Leicestershire and Rutland Integrated Care Board) should:

- Ensure that the requirement for promotion of healthy lifestyles campaigns through pharmacies (Public Health) is fulfilled so that individuals can gain advice and support in reducing unhealthy behaviours and adopting healthier ones
- Consider and encourage the opportunity to include and develop the role of pharmacies in commissioning strategies and through the Integrated Care System - particularly in relation to providing services which deflect work out of primary care general practice
- Collate information on all the services (including those directly commissioned by pharmacies) provided in Leicester as this will help to develop a better understanding of the wide range of services offered across the city
- Assess levels of uptake of advanced and locally commissioned services and follow-up low or high performers in order to share best practice.
- Keep under review the appropriateness of monitoring and quality visits to pharmacies, in addition to pharmacy self- assessment, in order to provide assurance of effectiveness and to promote service improvement
- Explore additional services that could be provided in pharmacies to relieve pressure on GP Practice (for example NHS Health Check Service, Hypertension case-finding)
- Improve communication and promotion of current and new services available to the public at their local pharmacy (eg through posters within the pharmacy premises, website)
- It is noted that not all pharmacies providing supervised consumption or needle exchange are offering naloxone. This is an area to be followed up with the provider

- Consider how community pharmacy services can be integrated within neighbourhood models and approaches to improving healthcare for local populations
- Consider the opportunities offered by Independent Prescribing Pharmacies (IPP) to play an increasing role in delivering clinical services in primary care

Annual Review of pharmacy policy and services:

It is recommended that NHS England (and where relevant Leicester City Council and Leicester, Leicestershire and Rutland Integrated Care Board) should:

- Review evidence of impact of policy and funding changes on services annually and report any findings to the Health and Wellbeing Board with appropriate advice
- Provide an annual report to the Health and Wellbeing Board, on the impact of pharmacy services introduced since the review period assessed within the PNA (ie post April 2025)

2. Background and Introduction

The Pharmaceutical Needs Assessment (PNA) is a statutory document that reviews the pharmaceutical services provided within an area in relation to the needs of the local population. The PNA is updated every 3 years, this report presents the fifth PNA for Leicester City and will be published in October 2025 to replace the previous PNA published in 2022.

2.1 Purpose of the PNA

‘Pharmaceutical’ refers to the need for medicines or other health services including prevention and whether this is met by the arrangements with community pharmacies in Leicester.

The PNA is the key local tool for understanding the provision of local pharmaceutical services in an area, identifying any gaps in services and assessing future need. It is primarily used by NHS-England when making decisions on applications to open new pharmacies. If a pharmacist, dispenser of appliances or a GP wants to provide NHS pharmaceutical services, they are required under the NHS (Pharmaceutical Services and Local Pharmaceutical Services) regulations to apply to NHS England to be included on a pharmaceutical list. They must prove they are able to meet a pharmaceutical need as set out in the relevant PNA. This is known as the NHS “market entry” system.

Additionally, Local Authorities and Leicester, Leicestershire and Rutland Integrated Care Board may consider the PNA when commissioning or reviewing a service to meet local health needs and priorities. NHS England is the principal body responsible for managing the main contract with community pharmacies.

2.2 Legislative background

The Health and Social Care Act 2012 established Health and Wellbeing Boards (HWBBs). From 1 April 2013, Health and Wellbeing Boards (HWBBs) became responsible for publishing and updating PNAs.

The regulations² require that a series of statements be contained in the PNA. In summary, the regulations require a series of statements of:

1. the pharmaceutical services that the Health and Wellbeing Board has identified as services that are necessary to meet the need for pharmaceutical services
2. the pharmaceutical services that have been identified as services that are not provided but which the Health and Wellbeing Board is satisfied need to be provided in order to

² Pharmaceutical Needs Assessments – information pack for local authority health and wellbeing boards, October 2021. Department of Health & Social Care. Available at: <https://www.gov.uk/government/publications/pharmaceutical-needs-assessments-information-pack>

meet a current or future need for a range of pharmaceutical services or a specific pharmaceutical service

3. the pharmaceutical services that the Health and Wellbeing Board has identified as not being necessary to meet the need for pharmaceutical services but have secured improvements or better access
4. the pharmaceutical services that have been identified as services that would secure improvements or better access to a range of pharmaceutical services or a specific pharmaceutical service, either now or in the future
5. other NHS services that affect the need for pharmaceutical services or a specific pharmaceutical service

Other information to be included or taken into account:

- how the Health and Wellbeing Board has determined the localities in its area
- how it has taken into account the different needs of the different localities and the different needs of those who share a protected characteristic
- a report on the consultation
- a map that identifies the premises at which pharmaceutical services are provided
- information on the demography of the area
- whether there is sufficient choice with regard to obtaining pharmaceutical services
- any different needs of the different localities
- the provision of pharmaceutical services in neighbouring Health and Wellbeing Board areas

Regulation 8 requires each HWBB *must* also consult the following bodies for its area about the contents of the assessment.

- the local pharmaceutical committee,
- the local medical committee,
- pharmacy and dispensing appliance contractors included in the pharmaceutical list for the area of the Health and Wellbeing Board,
- dispensing doctors included in the dispensing doctor list for the area of the Health and Wellbeing board, if any,
- any pharmacy contractor that holds a local pharmaceutical services contract with premises that are in the Health and Wellbeing Board's area,
- Healthwatch, and any other patient, consumer, or community group in the area which the Health and Wellbeing Board believes has an interest in the provision of

pharmaceutical services,

- any NHS trust or NHS foundation trust in the Health and Wellbeing Board's area,
- NHS England, and
- any neighbouring Health and Wellbeing Board

These bodies must be consulted at least once and for a period of 60 days.

2.3 Process followed in the development of the PNA

The PNA has been developed for the Health and Wellbeing Board in accordance with the NHS regulations²

As many of the relationships required for the PNA are Leicester, Leicestershire and Rutland (LLR) wide, a PNA Reference group was established to oversee and develop the PNA with representation from NHS England, the Leicestershire Pharmaceutical Committee and the Local Professional Network for Pharmacists.

The PNA process consisted of the following three key stages:

- Review of the current provision of pharmaceutical services in Leicester
- Assessment of the need for pharmaceutical services in the local population
- A consultation period to gather feedback from the public and other stakeholders

To gather additional intelligence for the PNA, two surveys have been run; one survey to ask service users for their views on the current pharmaceutical provision and the second to ask pharmaceutical professionals to provide further data including facilities within the pharmacy, accessibility adaptations and languages spoken by pharmacy staff.

The PNA will also be subject to a 60-day statutory consultation period running in June and July 2025.

**Note: The PNA includes assessment of pharmaceutical services during the period April 2023 to 31st March 2024.*

3. Pharmacy Policy

Pharmacies deliver personalised patient care through health professionals with expertise in the use of medicines and promotion of their safe and effective use³. Pharmacists and their teams can improve patient care and reduce health inequalities through:

- personalised pharmaceutical services
- expanding access and choice
- more help with medicines
- reducing inappropriate hospital admissions
- supporting patients as they move between hospital and the community
- supporting healthy living and better care
- improving communications and relationships
- facilitating personalised care for people with long-term conditions
- a trusted, convenient first port of call for episodic healthcare advice and treatment

Clinical pharmacists can work directly in general practice as part of the multi-disciplinary team in patient facing roles, clinically assessing and treating patients using their expert knowledge of medicines for specific disease areas. They can be prescribers and work alongside the general practice team, taking responsibility for patients with long term conditions and undertaking clinical medication reviews especially for older people and those in care homes. They can provide specialist expertise in medicines use while helping to address both the public health and social care needs of a patient at the practice(s).

Pharmacists in general practice will provide leadership to ensure all people get the best use out of their medicines. They will help support the further integration of general practice with the wider healthcare teams (including community and hospital pharmacy) to help improve patient care and safety.

3.1 The NHS Pharmaceutical and Local Pharmaceutical Services Regulations 2013

The NHS Pharmaceutical and Local Pharmaceutical Services Regulations 2013 set the legal framework for the commissioning of pharmaceutical services in England by Integrated Care Boards.⁴ They set out:

- the requirements for the publication of pharmaceutical needs assessments by health and wellbeing board
- the maintenance of lists of contractors who provide pharmaceutical services or local pharmaceutical services (LPS) name pharmacies, dispensing appliance contractors and dispensing doctors

³ Pharmacy White Paper, *Pharmacy in England – Building on strengths and delivering the Future*, April 2008

⁴ [NHS England » Guidance on the NHS \(pharmaceutical and local pharmaceutical services\) \(amendment\) regulations 2023](#)

- How applications for inclusion in pharmaceutical lists, maintained by ICBs and published by NHS England are made and determined
- Specific matters relating to the provision of services in rural areas
- The terms of service for those contractors who provide pharmaceutical services
- Other miscellaneous provisions

The 2013 regulations have been amended several times since they came into force on 1st April 2013. The latest set of amendments are contained within the NHS Pharmaceutical and Local Pharmaceutical Services Amendment Regulations 2023.⁴

The amendments within the 2023 regulations cover the following areas.

- The ability for integrated care boards (ICBs) to remove the “100-hours condition”
- The ability for pharmacy contractors to apply to reduce the core opening hours of their 100-hour pharmacy to between 72 and 100 hours where certain requirements are met.
- Other changes around opening hours of pharmacy premises
- Changes around applications and length of work history required
- Changes around notification processes and notice periods required to change opening hours
- Amendments to the requirements on pharmacy contractors where there is a temporary suspension in the provision of pharmaceutical services at their pharmacy premises because of illness or another reason beyond the control of the contractor.
- The ability for ICBs to put in place a local hours plan where they are satisfied that people in a particular area are experiencing, or are likely to experience, significant difficulty in accessing pharmaceutical services on a temporary basis for an identified period of time.

3.2 The Community Pharmacy Contractual Framework

The Community Pharmacy Contractual Framework is the agreement between NHS England and pharmacy contractors in England that governs the services provided by community pharmacies and how they are funded.

The Community Pharmacy Contractual Framework for 2019/20 to 2023/24 was published in 2019⁵ setting out how community pharmacy will support the delivery of the NHS Long Term Plan through Primary Care Networks (PCN) as groups of general practices typically covering 30,000-50,000 patients. PCNs work to build on existing primary care services and develop more integrated health and social care services in response to the needs of the patients they serve.

The key elements of the Community Pharmacy development plan include the introduction of pharmaceutical services in response to urgent care, prevention and medicines optimisation and safety.

⁵ https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/819601/cpcf-2019-to-2024.pdf

- **Urgent Care:**
 - Introduction of the Community Pharmacist Consultation Service which will take referrals to community pharmacies for services such as NHS 111 to relieve pressures on the wider NHS.
 - Palliative care service pilots
- **Prevention:**
 - All pharmacies are required to be accredited Level 1 Healthy Living Pharmacies (April 2020). This requires all community pharmacies to have trained health champions in place to deliver interventions on key issues such as smoking, weight management, providing wellbeing and self-care advice and signposting to other relevant services
 - Extend the reach of annual health campaigns and align these with PCN campaigns
 - Hepatitis C testing service in pharmacies for any patients using needle and syringe programmes
 - Pilot for case finding undiagnosed cardiovascular disease
 - Pilot for stop smoking referrals from secondary care
 - Pilots for point of care testing in community pharmacy to support efforts to tackle antimicrobial resistance
 - Implementation of recommendations from the vaccination and immunisation review
 - Routine monitoring of patients including oral contraception supplied by electronic repeat dispensing
 - Complementing PCN service specifications eg early cancer diagnosis and tackling health inequalities
- **Medicines Optimisation and Safety**
 - Phasing out of Medicines Use Reviews and replacing with Structured Medication Reviews
 - Introduction of a medicines reconciliation service as part of a transfer of care around medicine service
 - Piloting a service to improve access palliative care medicines.
- **Pharmacy Quality Scheme**
 - NHS mail rollout for the exchange of confidential patient information
 - Access to the NHS Summary Care Record
 - Improved community pharmacy profiles for the NHS 111 Directory of Services to facilitate referral
 - Improved pharmacy profiles on NHS.UK (previously NHS Choices) with opening times, facilities and service information

- Other benefits include Dementia Friends, child oral health support, Healthy Living Pharmacies and referral of high-risk asthma patients to their GP
- Complementary activity to the GP contract's Quality and Outcomes Framework quality improvement around an audit of lithium safety and advice on pregnancy prevention for women taking valproate
- Discussion with patients who have diabetes to check they have had their annual foot and eye checks

3.3 Future pharmacy contractual framework

The Department of Health and Social Care (DHSC) has entered into consultation with Community Pharmacy England (CPE) regarding the 2024 to 2025 and 2025 to 2026 funding contractual framework.

Moving the focus of care from hospitals into the community is one of the 3 core shifts outlined in the 10 Year Health Plan, which will be published later this year. The government has previously outlined its ambition to make better use of pharmacists' skills and training to deliver more services for patients within their local communities.

In March 2025, funding and other arrangements for community pharmacies for 2024/25 and 2025/26 have been finalised, with the Government giving a commitment to work towards a sustainable and operation model for community pharmacies in recognition of the key role they will play in future healthcare. The settlement includes baseline annual funding for 2025/26 and further funding for the continuation of Pharmacy First and other Primary Care Recovery Plan services. Looking ahead, antidepressants will be added to the New Medicine Service and Emergency Hormonal Contraception will be added to the Contraception service from October⁶.

3.4 National Priorities

3.4.1 The NHS Long Term Plan

The NHS Long Term Plan⁷ published in January 2019 set out the priorities for healthcare over the next 10 years to make sure everyone gets the best start in life, receives world-class care for major health problems and is supported in ageing well.

It aims to do this by:

- giving people more control over their own health and the care they receive, encourage more collaboration between GPs and community services and partners as Integrated Care Systems.

⁶ [CPCF arrangements for 2024/25 and 2025/26](#)

⁷ [NHS Long Term Plan 2019](#)

- preventing illness and tackling health inequalities by tackling significant causes of ill health through stop smoking, overcoming drinking problems and avoiding Type 2 diabetes.
- continued training and recruitment of the NHS workforce
- making better use of data and digital technology
- effective investment for more efficient services

It acknowledges the essential role of pharmacists in delivering care in the community, supporting urgent care and promoting patient self-care and self-management. It also identifies community pharmacists in the process of improving effectiveness of services such as NHS Health Checks.

3.4.2 Core20Plus5

Core20Plus5⁸ is a national NHS England approach to inform action to reduce health care inequalities at both nation and system level. Core 20 refers to the most deprived 20% of the national population identified by the Index of Multiple Deprivation.⁹ 'Plus' populations are locally defined populations identified for additional support and include groups such as ethnic minority populations and those with multiple long-term health conditions. The '5' refers to five clinical areas of focus for accelerated improvement and are defined nationally:

1. Maternity
2. Severe Mental Illness
3. Chronic respiratory disease
4. Early cancer diagnosis
5. Hypertension case-finding and optimal lipid management

3.4.3 Medicines Optimisation Partnership Operation Plan 2025/26

Medicines optimisation is a key element of the NHS Long Term Plan and The Medicines Optimisation opportunities guidance for 2025/26¹⁰ sets out the national priorities to improve patient outcomes in 2025/26 to:

- Reduce the time people wait for elective care
- Improve A&E waiting times and ambulance response times
- Improve patients' access to general practice and urgent dental care

⁸ [Core20Plus5](#)

⁹ [English Indices of deprivation 2019](#)

¹⁰ [Medicines Optimisation Partnership Operation Plan 2025/26](#)

- Improve patient flow through mental health crisis and acute pathways and improve access to children and young people's mental health services

Integration of community pharmacies into front-line primary care service is one of the main priorities of the Medicines Optimisation Partnership Operational Plan for 2025/26.

Expanding on the range of services provided by pharmacies aims to reduce the demand on primary and secondary care services, through growth of self-referrals and referrals from GP practices into community pharmacy enhanced services. The key pharmacy integration programmes include:

- Pharmacy First service
- Community Pharmacy Blood Pressure Service
- Community Pharmacy Contraception Service (initiation and continuation of combined oral contraception)
- Independent prescribing pathway (IPP) using prescribing pharmacies based in a community pharmacy to manage acute conditions, unavailable medicines and perform asthma reviews and medicines optimisation
- Discharge Medicines Service
- Piloting of appointment booking system for Pharmacy First referrals from GP Practices

3.5 Local Priorities

3.5.1 Integrated Care Systems

Integrated Care Systems (ICSs) were established on 1st July 2022 and are partnerships of organisations that come together to plan and deliver joined up health and care services to improve the lives of people who live and work in their area¹¹. They bring together systems to support integration and develop a plan to address the systems' health, public health and social care needs through joint place-based working between NHS, local government, community health services and other partners in the voluntary and community sector. ICSs were recommended to have stronger responsibilities for commissioning primary medical, dental, ophthalmology and pharmaceutical services.

The purpose of ICSs is to bring partner organisations together to support the NHS Long Term Plan to:

- **improve outcomes** in population health and healthcare
- **tackle inequalities** in outcomes, experience and access
- enhance **productivity and value for money**
- help the NHS support broader **social and economic development**.

¹¹ <https://www.kingsfund.org.uk/audio-video/integrated-care-systems-health-and-care-act>

Collaboration through ICSs will help health and care organisations tackle complex challenges, including:

- improving the health of children and young people
- supporting people to stay well and independent
- acting sooner to help those with preventable conditions
- supporting those with long-term conditions or mental health issues
- caring for those with multiple needs as populations age
- getting the best from collective resources so people get care as quickly as possible

From 1st July 2022, Leicester, Leicestershire and Rutland was designated as an Integrated Care System (ICS). In 2023 the ICB published its five year plan 2023/24 – 2027/28¹² which sets out how they will improve care and outcomes for patients, reduce the equity gap across LLR and become financially sustainable. The emphasis within this plan is on partnership, integration and continuous improvement.

The document sets out nine areas of work which will be the focus over the lifespan of the plan they are as follows:

- Prevention
- Keeping people well
- Accessing the right care
- Integrated teams
- Elective care
- Learning Disability and Autism
- Mental Health
- Children and Young People
- Women's Health

More information around the ICB 5 year plan can be found at on their website <https://leicesterleicestershireandrutland.icb.nhs.uk/>

3.5.2 Health and Wellbeing Strategy

Leicester's Health and Wellbeing Strategy¹³ sets out 5 key strategic priorities which will be used to inform yearly operational and commissioning plans:

- Healthy places – to make Leicester the healthiest possible environment in which to live and work
- Healthy minds – to promote positive mental health within Leicester across the life course
- Healthy start – to give Leicester's children the best start in life
- Healthy lives – to encourage people to make sustainable and healthy lifestyle choices

¹² [LLR ICB Five Year Plan 2023/24 - 2027/28](#)

¹³ [Leicester Health, Care and Wellbeing Strategy 2022-2027](#)

- Healthy ageing – to enable Leicester’s residents to age comfortably and confidently

The strategy also includes the Core 20 Plus 5 approach to reduce health inequalities for people living in the 20% most deprived areas, which includes specific targets within Maternity, severe mental illness, chronic respiratory disease, early cancer diagnosis and hypertension.

4. Pharmaceutical Services and Pharmacy Contracts

All national NHS pharmaceutical service providers must comply with the contractual framework that was first introduced in April 2005. The national framework is set out below and can be found in greater detail on the Pharmaceutical Services Negotiating Committee (PSNC) website: <http://psnc.org.uk/contract-it/the-pharmacy-contract/>

The contractual framework is made up of three different service types:

- *Essential* services – which must be provided by all contractors - that is, all community pharmacy services nationwide
- *Advanced* services – nationally defined services that can be provided by contractors subject to accreditation requirements
- *Locally commissioned* services – services commissioned locally by Clinical Commissioning Groups, Local Authorities and NHS England (Enhanced Services) in response to the needs of the local population.

Quality assurance:

NHS England (NHSE&I) regional teams monitor the provision of Essential and Advanced Services and the pharmacy contractors’ compliance with the terms of the Community Pharmacy Contractual Framework. Each year, every pharmacy must complete a short questionnaire which will determine whether a pharmacy needs visiting.

The General Pharmaceutical Council carry out inspections in all registered pharmacy premises to ensure that they comply with all legal requirements and regulatory standards. The inspector will examine how the pharmacy operates with the aim of securing and promoting the safe and effective practice of pharmacy services¹⁴.

All pharmacies are required to conduct an annual community pharmacy patient questionnaire (Patient Satisfaction Questionnaire) which allows patients to provide feedback to community pharmacies on the services they provide¹⁵.

¹⁴ <https://www.pharmacyregulation.org/standards>

¹⁵ <http://psnc.org.uk/wp-content/uploads/2013/07/cppq2020annex20a.pdf>

4.1 Types of service

4.1.1 Essential services

The essential services which **must** be provided by all contractors are briefly described in table 1 below.

Table 1: Essential pharmacy services

Essential Service	Description
Dispensing Medicines and Appliances	The supply of medicines and appliances ordered on NHS prescriptions, together with information and advice, to enable their safe and effective use by patients and carers. Records are kept of all medicines dispensed, significant advice provided, referrals and interventions made.
Repeat Dispensing	At least two thirds of all prescriptions generated in primary care are for patients needing repeat supplies of regular medicines. Under the repeat dispensing service, pharmacy teams will: <ul style="list-style-type: none">• Dispense repeat prescriptions issued by a GP• Ensure that each repeat supply is required• Seek to ascertain that there is no reason why the patient should be referred back to their GP. The majority of repeat dispensing is now carried out via the Electronic Prescription Services (EPS) and is termed electronic Repeat Dispensing (eRD).
Disposal of unwanted medicines	Pharmacies accept unwanted medicines from individuals for safe disposal.
Discharge Medicines Service (DMS)	The DMS became a new essential service in February 2021. The service aims to reduce the risk of avoidable medication related harm when a person is discharged from hospital. Patients are digitally referred to their pharmacy after discharge from hospital, at which point the pharmacist reviews the referral information and any prescription changes since before the patient was admitted to hospital. The pharmacist then discusses these changes with the patient and/or their carer, checks their understanding of what medicines they should now be taking/using and provides any other relevant advice to support medicine use.
Promotion of healthy lifestyles (Public Health)	Each financial year pharmacies are required to participate in up to six health campaigns at the request of NHS England. This involves opportunistic one to one advice on healthy lifestyle topics such as stopping smoking, flu vaccination and increasing physical activity.

Signposting	Where pharmacies cannot provide help, they will refer patients to other healthcare professionals, care providers or other sources of help such as local or national patient support groups.
Support for self-care	Pharmacy staff can provide advice and support to patients to enable them to derive maximum benefit from caring for themselves or their families. The main focus is on self-limiting illness, but also support for people with long term conditions.
Clinical governance	<p>Pharmacies must have a system of clinical governance to support the provision of excellent care. Requirements include:</p> <ul style="list-style-type: none"> • Provision of a practice leaflet for patients • Use of standard operating procedures • Patient safety incidence reporting to the National Reporting and Learning Service (NRLS) • Conducting clinical audits and patient satisfaction surveys, having complaints and whistle-blowing policies • Acting upon drug alerts and product recalls to minimize patient harm • Cleanliness and infection control measures
Healthy Living Pharmacies (HLP)	<p>Pharmacies are commissioned to reduce health inequalities within the local community by delivering high quality health and well-being services, promoting health and providing proactive health advice to customers. There are three levels of service delivery within the HLP framework; promotion, prevention and protection. Healthy Living Pharmacies (HLP) have a health and wellbeing ethos, where everyone in the team works together to proactively engage their customers in health promotion activities through advice on smoking cessation and obesity/healthy weight. They need a health promotion zone in the pharmacy and at least one full-time equivalent health champion, who has qualified for a Royal Society for Public Health (RSPH) level 2 award in understanding health improvement. Pharmacy contractors must ensure that they are compliant with the HLP requirements from 1st January 2021, however the Distance Selling Pharmacy (DSP) website requirements do not have to be complied with until 1st April 2021.</p>

Further information is available via: <http://psnc.org.uk/>

4.1.2 Advanced Services

There are nine nationally commissioned advanced services within the NHS Community Pharmacy Contractual Framework as shown in table 2 below. Community pharmacies can choose to provide any of these listed services following appropriate training and or accreditation by NHS England.

Table 2: Advanced pharmacy services

Service	Description
New Medicine Service (NMS)	This service is designed to support patients' understanding of a newly prescribed medicine for a long-term condition with the aim of improving medicine adherence. The pharmacist will provide advice and information on the new medicine and how to use it when it is first dispensed. The second stage is a follow up call/meeting in around 2 weeks to discuss how the patient has been getting on with the new medicine. A final consultation around 21-28 days from starting the new medicine discusses any further issues or concerns that may require referral to the GP. From October 2025, the service will be expanded to include antidepressants.
Appliance Use Review (AUR)	This service can be carried out by a pharmacist or a specialist nurse in the pharmacy or at the patient's home. AURs should improve the patient's knowledge and use of any 'specified appliance' by establishing the way the patient uses the appliance and the patient's experience of such use identifying, discussing and assisting in the resolution of poor or ineffective use of the appliance by the patient. advising the patient on the safe and appropriate storage of the appliance and advising the patient on the safe and proper disposal of the appliances that are used or unwanted.
Pharmacy First Service	<p>The Pharmacy First service, which commenced on 31st January 2024, is a crucial first step in recognising and properly funding the enormous amount of healthcare advice that community pharmacies provide to the public every day and in establishing and funding community pharmacy as the first port of call for healthcare advice.</p> <p>The Advanced service involves pharmacists providing advice and NHS-funded treatment, where clinically appropriate, for seven common conditions (age restrictions apply):</p> <ul style="list-style-type: none">• Sinusitis (aged 12 and over)• Sore throat (aged 5 and over)

	<ul style="list-style-type: none"> • Acute otitis media (aged 1-17 years) • Infected insect bite (aged 1 and over) • Impetigo (aged 1 and over) • Shingles (aged 18 and over) • Uncomplicated UTI (women aged 16-64 years)
Stoma Appliance Customisation (SAC)	The service involves the customisation of a quantity of more than one stoma appliance, based on the patient's measurements or a template. The aim of the service is to ensure the proper use and comfortable fitting of the stoma appliance and to improve the duration of usage, thereby reducing waste. If the pharmacist is unable to provide the prescribed service, they should either refer the patient to another pharmacy or provide the patient with the contact details of at least two pharmacies or providers that are able to supply the service.
Seasonal Influenza (Flu) Vaccination Service	Community pharmacy has been providing flu vaccinations under a nationally commissioned service since September 2015 to support GP services in increasing vaccination rates. Each year from September through to March the NHS runs a seasonal flu vaccination campaign aiming to vaccinate all patients who are at risk of developing more serious complications from the virus. The accessibility of pharmacies has proved popular with patients seeking vaccinations.
Lateral Flow Device Service (LFD)	<p>The Lateral flow device tests supply service for patients potentially eligible for COVID-19 treatments (LFD service) was commissioned as an Advanced service from 6th November 2023.</p> <p>The LFD service was introduced to provide eligible patients with access to LFD tests. In March 2024, additional patient groups became eligible to access the service.</p>
Pharmacy Contraception Service (PCS)	The Pharmacy Contraception Service (PCS), which as commissioned by the NHS as an Advanced service. The PCS started on 24th April 2023, allowing the on-going supply of oral contraception (OC) from community pharmacies. From 1st December 2023, the service included both initiation and on-going supply of OC.
Hypertension Case-Finding Service	Also known as the NHS Blood Pressure Check Service, from 1 st October 2021 pharmacies provide blood pressure testing to those aged over 40 to identify those with high blood pressure. Where clinically indicated, pharmacies offer 24-hour ambulatory blood pressure monitoring (ABPM), the results of which are shared with the patient's GP to inform a potential diagnosis of hypertension.

Smoking Cessation Service	Commissioned as an advanced service from 10 th March 2022, this service enables NHS trusts to refer patients to a community pharmacy of their choice to continue their smoking cessation treatment, including providing medication and support as required, with the aim of creating additional capacity in the smoking cessation pathway.
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For more information visit: [Advanced Services : PSNC Main site](#).

4.1.3 Locally commissioned services

In addition to the services listed above, pharmacies can also offer services commissioned by local health commissioning organisations, Integrated Care Boards and Local Authorities to meet the health needs of their local populations. Pharmacies can choose whether to provide these services.

Table 3 lists the current locally commissioned services across Leicester.

Table 3: Locally commissioned pharmacy services as at 31st March 2024

Service	Description
Emergency Hormonal Contraception (EHC)	Some pharmacies are commissioned to provide a free service to women up to 25 years of age following unprotected sexual intercourse to prevent unintended pregnancies. Pharmacies offering this service are required to undertake specific training and maintain a prescribed number of consultations per year.
C-Card Service	Some pharmacies provide a free and confidential sexual health service available to young people. The scheme was originally offered to people aged under 25 years but since removing the age limit, increasing numbers of over 25s are using the scheme. It is a plastic registration card that enables quick and easy access to free condoms. The service also offers information and advice about sexual health and relationships.
Child influenza vaccination service	The children's influenza service is normally administered in schools, however, where children are unable to have this done at school, they can receive the Fluenz/nasal flu vaccine at a local pharmacy providing this service. The purpose of the service is to ensure that patients and their parents have convenient access to the Fluenz/nasal flu vaccine.

Needle exchange	Pharmacies are commissioned to provide intravenous drug users with sterile injecting equipment in order to reduce the transmission of blood borne infections such as hepatitis and HIV.
Supervised consumption	Pharmacies are commissioned to provide registered drug addicts regular monitored doses of an opiate substitute to support them becoming progressively drug free.
Take home naloxone service	Take home naloxone provision is available to all presenting adults (aged 18 and over) who attend for either needle exchange services or supervised consumption of their opiate substitute medication. Naloxone can help prevent drug-related deaths to individuals at risk of overdosing.
Palliative Care	Pharmacies are commissioned to provide patients in the last phase of their lives (and their representatives) with access to palliative care medicines. Pharmacies accredited for this service are trained in the use of palliative care medicines and can provide advice to carers and other healthcare professionals.

4.1.4 National Enhanced Service (NES)

Table 4: National Enhanced Services

Service	Description
Covid Vaccination Service	In December 2020, the NHS commenced its Covid-19 vaccination programme. Since the start of the Covid-19 pandemic, over 1,500 community pharmacy sites have been vaccinating patients and health and care workers under a Local Enhanced Service against coronavirus alongside vaccination centres, hospitals and Primary Care Network (PCN) sites. From December 2021, provisions were made within the NHS (pharmaceutical and Local Pharmaceutical Services) Regulations 2013 for a new type of Enhanced Service, the NES. Under this type of service, NHS England & NHS Improvement commissions an Enhanced service that is nationally specified. A NES allows the agreement of standard conditions nationally, while still allowing the flexibility for local decisions to commission the service to meet local population needs, as part of a nationally coordinated programme. From autumn 2022, the Covid-19 Vaccination Service will be commissioned as a National Enhanced Service (NES).

From May 2025, RSV and Pertussis vaccination will also be included as enhanced services. Further information on National Enhanced Services can be found at [National Enhanced Services - Community Pharmacy England](#).

4.2 The wider role of community pharmacies: non-contracted services

In addition to the above essential, advanced and locally commissioned services, all of which are commissioned by the NHS or the local authority, pharmacies also provide other significant services directly to their customers on their own account. These services are not commissioned by the ICB or Local Authority and instead are a direct arrangement between the pharmacy and patients. These can be viewed as adding to the convenience, compliance and safety of medicine collection and use.

These additional services provided by pharmacies include services such as delivery service of prescriptions, monitored dosage system (dosette box), contraception, nicotine replacement, childhood vaccinations, travel vaccinations and medication, other vaccinations, weight loss, services for conditions such as chlamydia, cholesterol, diabetes, gonorrhoea, erectile dysfunction, H-Pylori, hair loss, hay-fever)

4.3 Community Pharmacy IT

The Electronic Prescription Service (EPS) enables new and repeat prescriptions to be sent electronically from the GP Practice to the patient's nominated pharmacy.

Pharmacies are now able to access an electronic summary care record (SCR) for patients. The NHS Summary Care Record (SCR) is an electronic summary of key clinical information (including medicines, allergies and adverse reactions) about a patient, sourced from the GP record with the patient's consent. SCR was rolled out to pharmacies from March 2016 and helps support safer patient care and treatment.

There are also a number of apps that patients can use for ordering NHS repeat prescriptions and booking appointments.

A web-based system called PharmOutcomes¹⁶ collates information on pharmacy services. Local and national analysis and reporting of PharmOutcomes helps to improve the evidence base for more effective community pharmacy services.

4.4 Pharmacy Contracts

4.4.1 Types of Pharmacy contracts

There are four types of pharmacy contractors:

Standard contract

Healthcare professionals working in pharmacies that are held on a pharmaceutical list.

Appliance contractor

An appliance contractor provides services to people who need appliances such as stoma and

¹⁶ <http://psnc.org.uk/services-commissioning/pharmoutcomes/>

incontinence care aids, trusses, hosiery, surgical stockings and dressings. Appliance contractors do not supply drugs. There are no appliance contractors in Leicester.

Dispensing Practices

GP Practices are allowed to dispense medicines and appliances to patients who live in an NHS England determined controlled locality (Rural Area) and live more than a mile from a community pharmacy. Patients may choose to receive this service and request to be considered as a dispensing patient by the GP practice. There are no dispensing practices in Leicester.

Distance selling pharmacies

Distance selling pharmacies (eg internet pharmacies) are able to provide the full range of essential, advanced and enhanced services to the population without face-to-face contact. Distance selling pharmacies receive prescriptions electronically or via post, dispense them at the pharmacy and then deliver or arrange to courier to the patient. They must provide essential services to anyone, anywhere in England where requested to do so. They may choose to provide advanced and enhanced services as long as no essential service element of the service is provided to persons present at the premises.

4.4.2 Local Pharmaceutical Service Scheme

This scheme provides pharmacy contractors on the list at 1st September 2016 and are located more than 1 mile from the nearest pharmacy with a guaranteed minimum income where their dispensing volume falls below a defined threshold. The purpose of the scheme is to secure provision in an area where it would not otherwise be viable. Local Pharmaceutical Service contracts are kept under review with regard to pharmacy provision for the local population.

4.4.3 Pharmacy Access Scheme

The revised Pharmacy Access Scheme started from January 2022 and supports patient access to isolated, eligible pharmacies. This scheme does not replace the Local Pharmaceutical Service scheme. There are additional eligibility criteria for this scheme which includes pharmacies in very deprived areas (top 20% of the Index of Multiple Deprivation) that are more than 0.8 of a mile from the next nearest pharmacy.

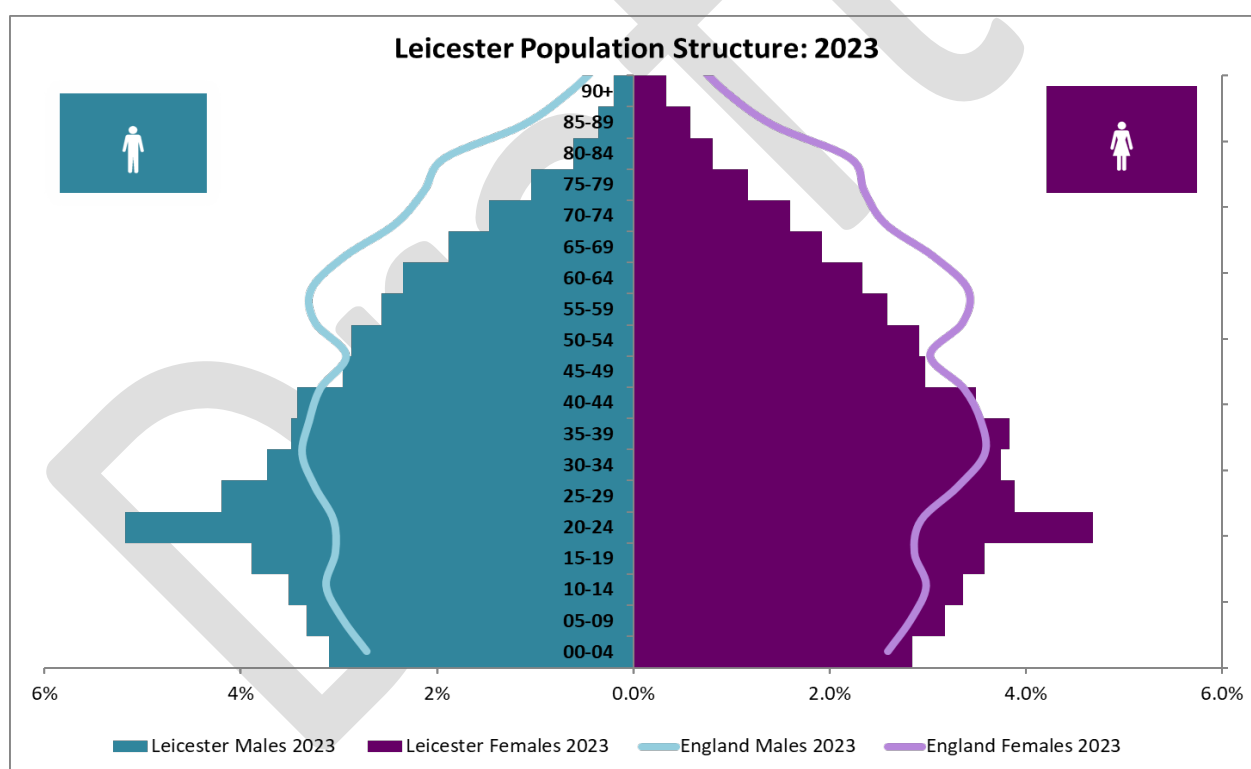
5. Health Needs in Leicester

5.1 Demographic profile

5.1.1 Age profile

Leicester is the largest city in the East Midlands, with a population of around 379,780 (2023)¹⁷. As shown by figure 1, Leicester's population is relatively young compared with England; 17.9% of Leicester's population are aged 20-29 years old (compared with 12.5% in England), and 12% of the population are aged over 65 (compared with 18.7% in England). The larger proportion of younger people in Leicester reflects the student population attending Leicester's two universities and migration into the city from outside of the UK.

Figure 1: 2023 Leicester population pyramid



Data: Mid-2023 population estimates, ONS

5.1.2 Diversity¹⁸

Leicester is home to a diverse range of faiths and communities. The following diversity data for Leicester is based at the time of the 2021 census. Leicester residents come from over 50 countries, and around a third of Leicester residents were born outside of the UK¹⁸. A third of the population (33%) define themselves as White British, and 7.7% from other White ethnic groups. Over half of Leicester's residents classify themselves as belonging to an ethnic group that is not White. Leicester has one of the country's largest Asian communities

¹⁷ ONS Mid-year population estimates, 2023

¹⁸ Office for National Statistics, Census 2021

(43.4% of the population), with 34.3% of all residents defining themselves as of Indian heritage. At 5.8%, Leicester's African community is a notably larger proportion of the population than that for England (2.6%).

Leicester's Black, Minority Ethnic (BME) population is generally younger than the white population and there are fewer elderly people in black and minority ethnic groups.

5.1.3 Language¹⁸

Being a very diverse city, there are a number of languages spoken throughout Leicester. Overall, English is the main language spoken by 70% of residents. A further 21% of residents can speak English well or very well and 9% cannot speak English or cannot speak English well. These include South Asian residents living in the east of Leicester (Belgrave, Spinney Hills, Highfields, Crown Hills), and some Eastern European residents in the West (Newfoundpool, West End, Westcotes).

South Asian languages are spoken by 19% of Leicester's residents. Gujarati is the second most common language spoken in Leicester (12.6%), followed by Panjabi (2.6%), Polish (2.2%) and Romanian (1.2%).

5.1.4 Religion¹⁸

The main religions reported in Leicester residents are Christian (25%), Muslim (24%), no religion (23%) and Hindu (18%).

Areas of the city where Muslim is identified as the main religion include St Matthews, Crown Hills, Highfields and Stoneygate.

5.1.5 Carers¹⁸

Over 90% of Leicester residents provide no unpaid care. Of those providing unpaid care, 5.2% provide up to 19 hours per week, 1.7% provide 20-49 hours and 2.4% over 50 hours of unpaid care per week.

Weekly care hours are similar for men (17.4%) and women (18.5%) in Leicester. More care is provided in the older age groups, with a quarter of 50-64 and over 65-year-olds providing some unpaid care per week.

5.1.6 Sexual orientation¹⁸

The 2021 Census asked a question around sexual orientation. This was not answered by around 12% of respondents. Of those providing a response, 96.2% of adults identified as straight or heterosexual, and 3.8% as Lesbian, Gay, Bisexual or Other.

5.2 Wider determinants

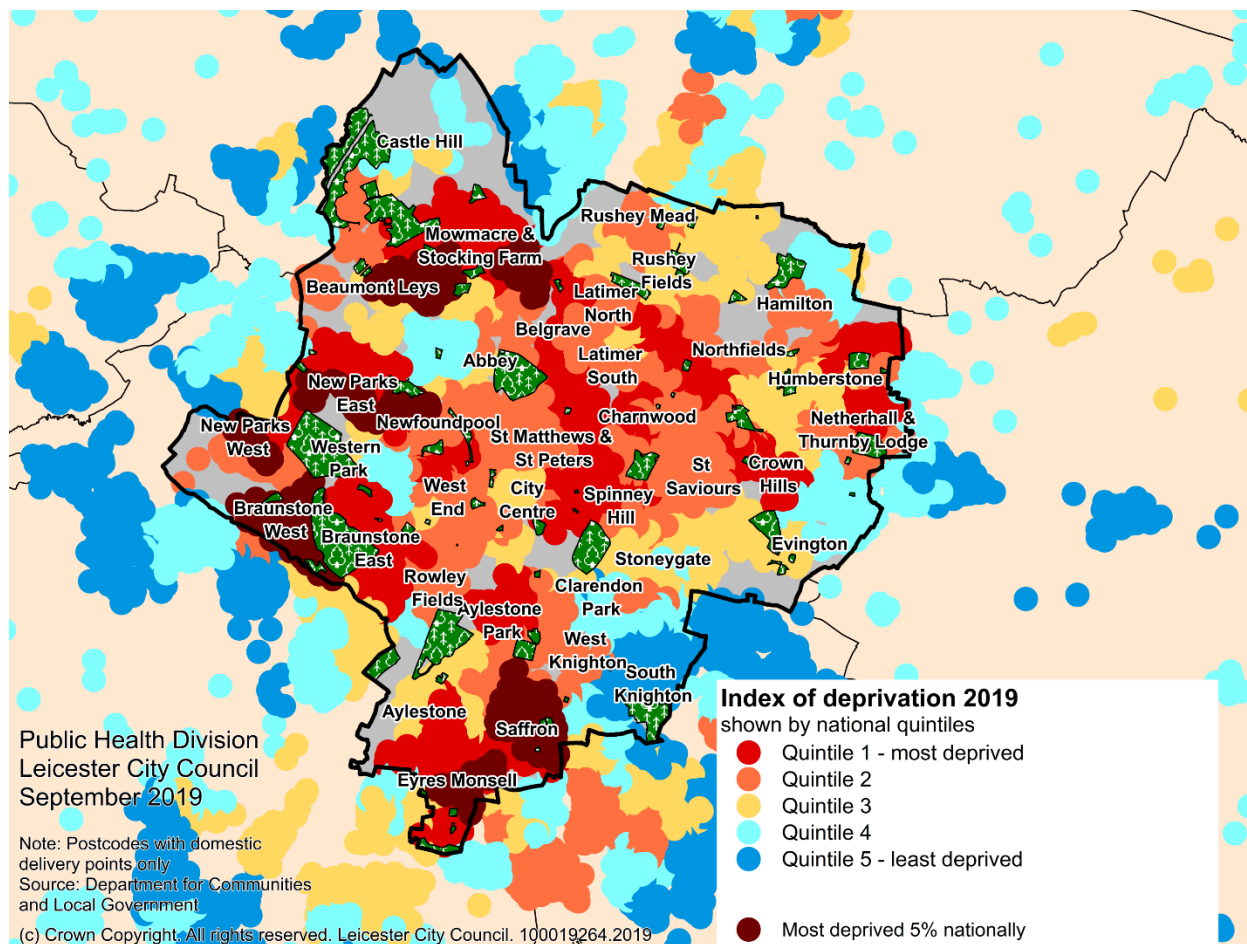
5.2.1 Deprivation

The English indices of deprivation 2019¹⁹ use separate measures, across 7 domains of deprivation, to calculate the Index of Multiple Deprivation 2019 (IMD 2019). This is an overall measure of multiple deprivation experienced by people living in an area. The seven domains of which the measures cover are income deprivation, employment deprivation, health deprivation and disability, education, skills and training deprivation, barriers to housing and services, crime, and living environment deprivation.¹⁹ The data is often presented in 'deciles' or 'quintiles' of deprivation. Areas of Leicester which fall into quintile 1 are the most deprived fifth (20%) of areas in England through to those which fall into quintile 5 which are the least deprived fifth (20%) of areas in England. Similarly, areas in decile 1 are the most deprived 10% of neighborhoods nationally through to those in decile 10 which are the least deprived 10% of neighborhoods nationally.

Leicester has a high level of deprivation compared to the country as a whole and is ranked 32nd most deprived out of 317 lower-tier local authority areas. Thirty-Five percent of Leicester's population live in the 20% most deprived areas in England, and a further 38% live in the 20-40% most deprived areas. Only 2% of the Leicester population live in the 20% least deprived areas. Figure 2 shows deprivation in Leicester by Lower Super Output Area (LSOA).

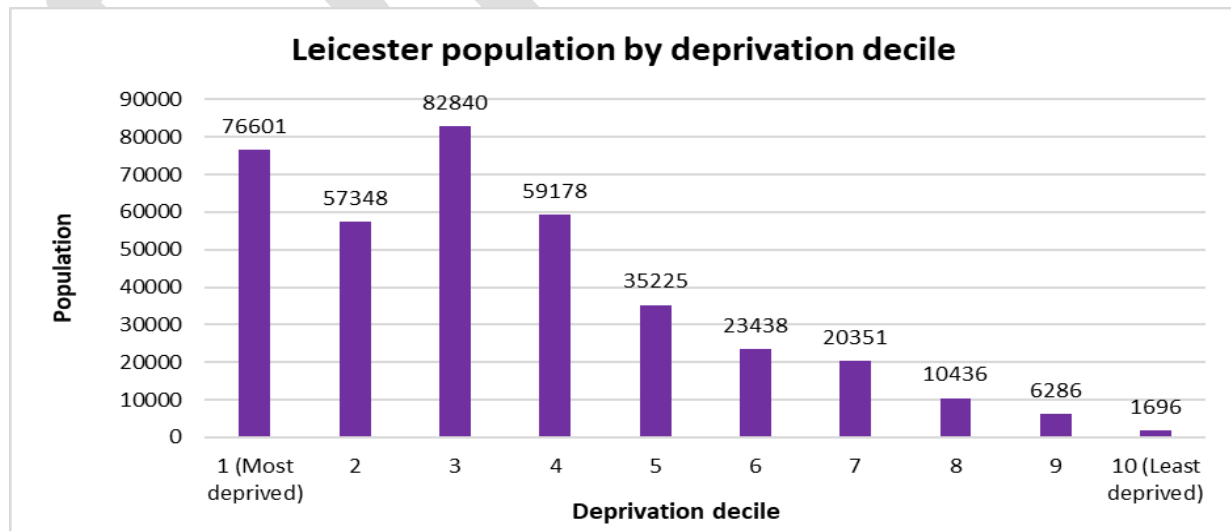
¹⁹ The English indices of deprivation 2019 (Technical report), Ministry of Housing, Communities & Local Government, Gov.UK, [English Indices of Deprivation 2019: technical report \(publishing.service.gov.uk\)](https://www.gov.uk/publishing.service.gov.uk)

Figure 2: Deprivation in Leicester by lower super output area



Data: Index of multiple deprivation 2019

Figure 3: Population by deprivation decile in Leicester City

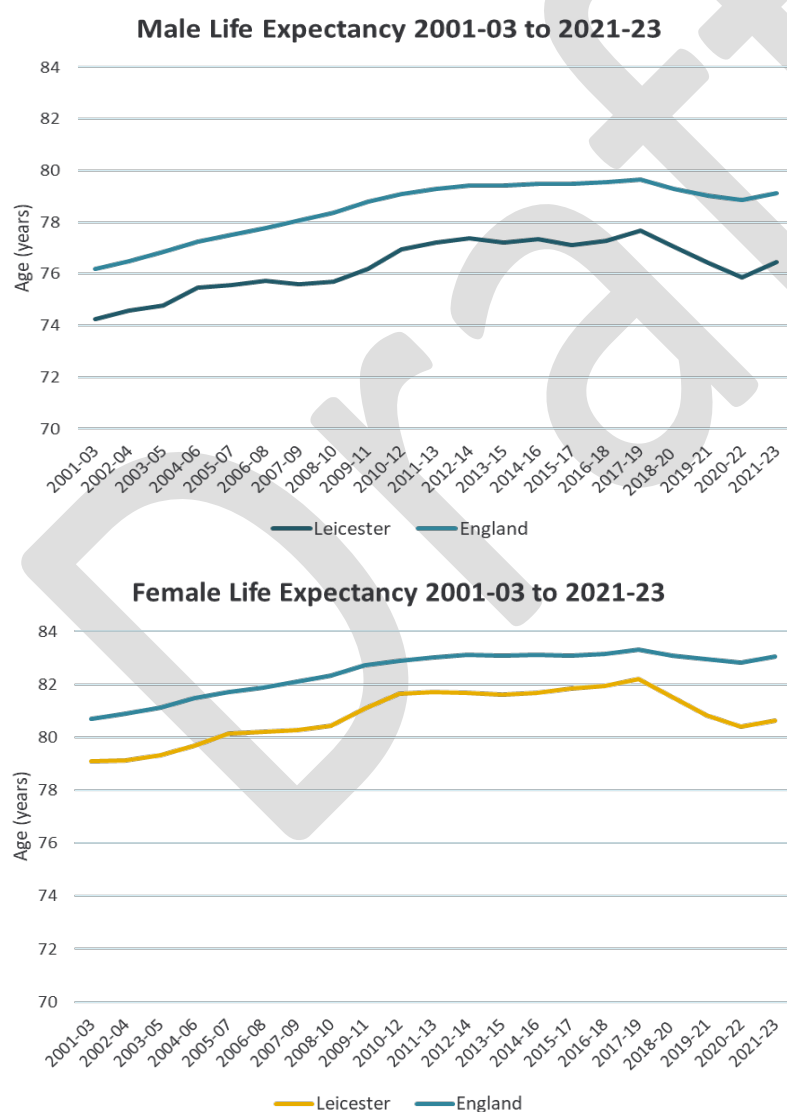


Data: Indices of Deprivation 2019, Mid-2022 population estimates, ONS

5.2.2 Life expectancy

As shown in figure 4, life expectancy²⁰ at birth in Leicester is significantly lower (worse) than the England average for both males and females and has been since 2001. In 2021-23 life expectancy for males in Leicester (76.5 years) is around 2.7 years lower than England (79.2 years), and for females in Leicester (80.6 years) it is around 2.4 years lower than England (83.0 years). Cardiovascular diseases are the largest contributor to the adverse life expectancy gap between Leicester and England, accounting for 20% of the life expectancy gap in males and 28% in females.²¹

Figure 4: Life expectancy at birth (1 year range) for Leicester and England over the period 2001 to 2023



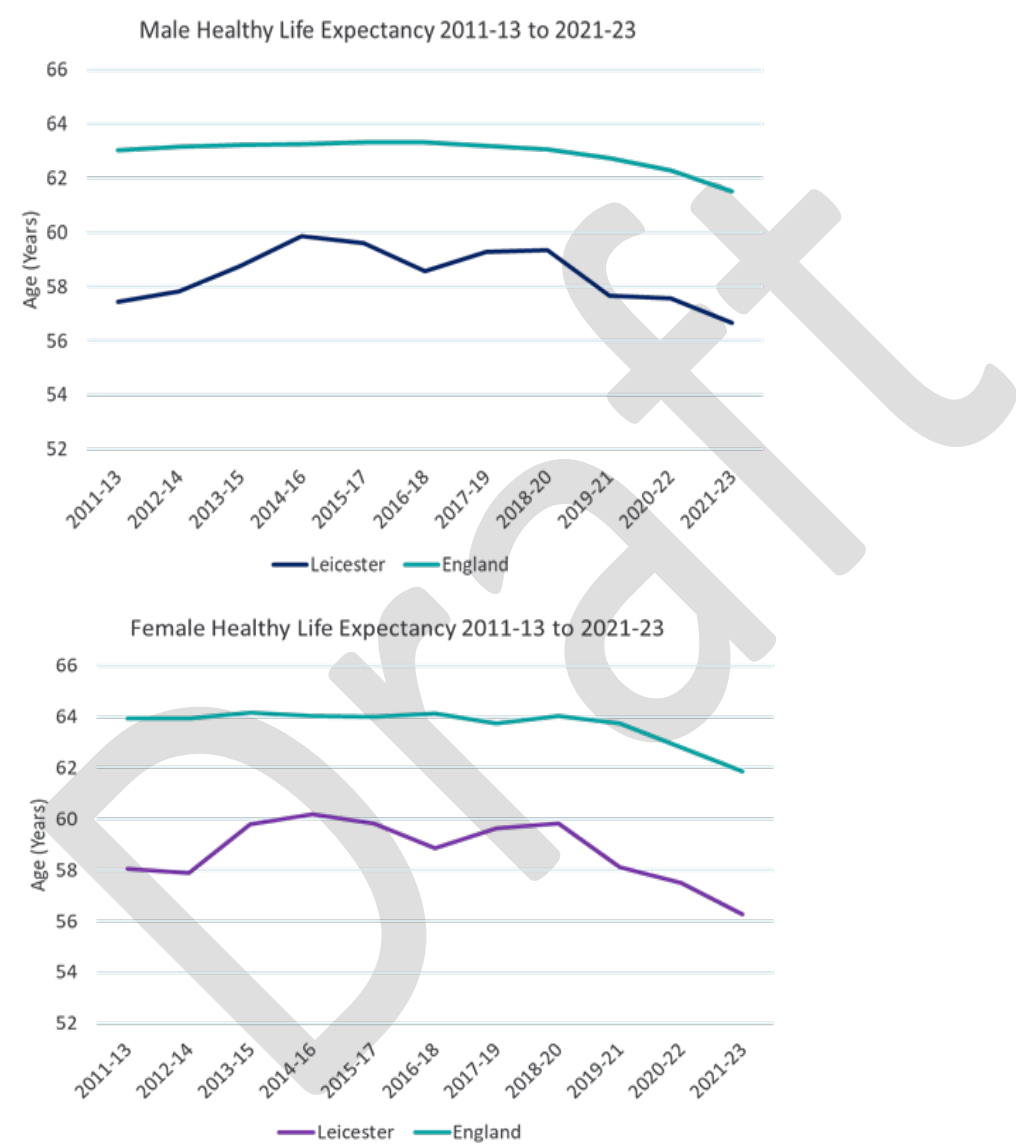
Data: Fingertips, Office for Health Improvement & Disparities, 2025

²⁰ Average life expectancy at birth is widely used as a proxy indicator for the overall health of the population; it estimates how long a newborn child would be expected to live if the current age-specific mortality rates remain constant. However, it does not forecast how long babies born today will actually be expected to survive, as age-specific mortality rates are unlikely to remain constant for an extended length of time.

²¹ Public Health England, Segment Tool, Breakdown of the life expectancy gap between Leicester as a whole and England as a whole by cause of death, 2020/21, <https://analytics.phe.gov.uk/apps/segment-tool/>

As shown by figure 5, Leicester has consistently shown significantly lower healthy life expectancy at birth than England for both males and females. Leicester males can expect to live 56.7 years in good health compared to 61.5 years for males in England. Females in Leicester live around 56.3 years in good health (2021-2023) compared with 61.9 years in good health for females in England.

Figure 5: Healthy life expectancy at birth for Leicester and England over the period 2011 to 2023



Data: Fingertips, Office for Health Improvement & Disparities, 2025

5.3 Long Term Conditions

People in Leicester suffer from a number of long-term conditions, as shown in table 5 below. Based on GP registers in Leicester City, the largest recorded prevalence is for cardiovascular diseases including hypertension, Coronary Heart Diseases (CHD), and heart failure. Leicester also has a significantly higher than average percentage of people diagnosed with diabetes (20.5% in over 40-year-olds), mainly in Leicester’s South Asian population. The prevalence of people experiencing Mental Health conditions in Leicester

(1%) is similar to the England average (0.9%). Overall, Leicester has a lower prevalence of cancer and Chronic Kidney Disease (CKD) which may also be related to the diverse ethnicity found in Leicester's residents.

Since the last PNA Leicester has seen an increase in the prevalence of diabetes (0.5% increase), hypertension (increase of 0.5%), all cancers (0.1% increase), heart failure (increase of 0.5%), asthma (0.03% increase). For these diseases in England, the prevalence has increased by 0.4% for diabetes, 0.7% for hypertension, 0.2% for all cancers, 0.1% for heart failure, 0.01% for asthma and decreased by 0.03% for mental health.

Table 5: Percentage of patients registered at GP practices in Leicester diagnosed with long term conditions

Long term condition		Leicester Register	Leicester Prevalence	England Prevalence
Cardiovascular disease	Hypertension (40+ yrs)	56,560	31.4%	29.7%
	CHD (65+ yrs)	9,885	19.3%	16.7%
	Stroke / TIA (65+ yrs)	5,489	10.7%	10.5%
	Heart failure (65+ yrs)	4,139	8.1%	6.0%
High dependency	Diabetes Mellitus (40+ yrs)	36,939	20.5%	12.5%
	Cancer (all ages)	7,856	1.7%	3.6%
	Chronic Kidney Disease (18+ yrs)	11,405	3.2%	4.4%
Respiratory diseases	Asthma (6+ yrs)	21,700	5.1%	6.5%
	COPD (40+ yrs)	5,581	3.1%	3.7%
Mental Health	Mental Health (all ages)	4,642	1.0%	1.0%
	Dementia (65+ yrs)	2,418	4.7%	4.3%

Data: Quality Outcomes Framework, 2023/24

Significantly higher than England

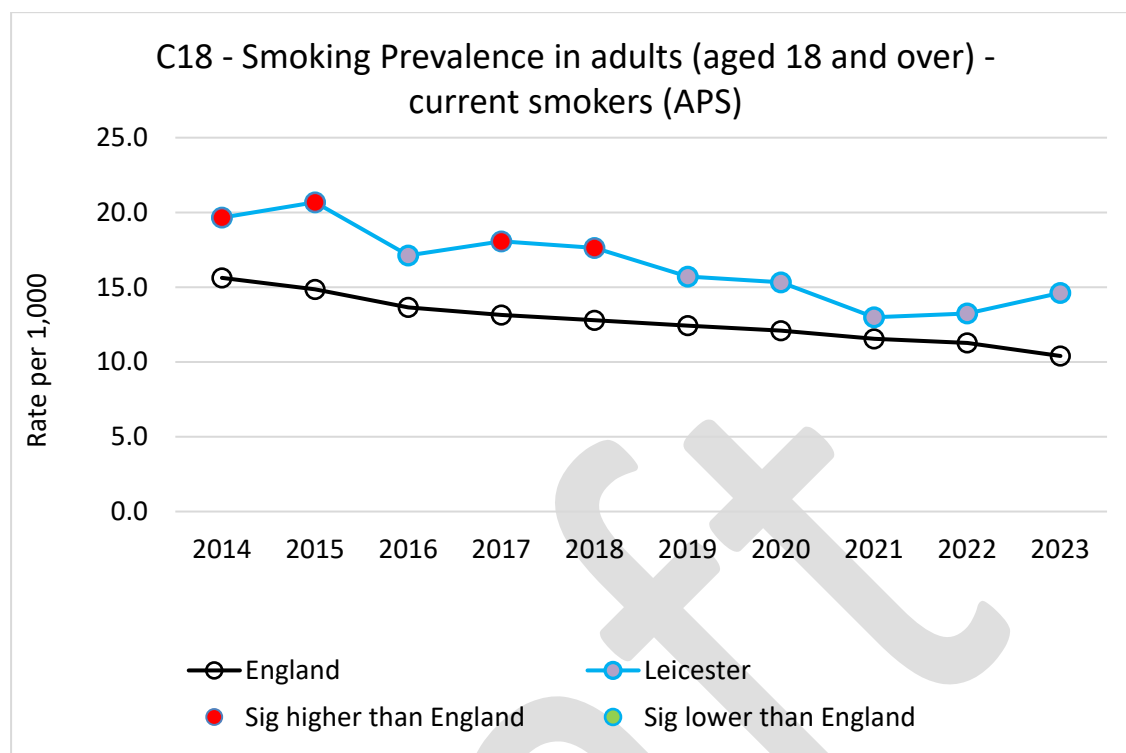
Significantly lower than England

5.4 Lifestyles

5.4.1 Smoking

Smoking is a major risk factor for many diseases including lung cancer, Chronic Obstructive Pulmonary Disease and heart disease. It is a modifiable risk behaviour and effective tobacco control measures can reduce the prevalence of smoking in the population.

Figure 6: Smoking prevalence in adults (18+)



Data: Fingertips, Office for Health Improvement & Disparities, 2025

Smoking prevalence in Leicester has reduced over the past 10 years from around 20% of adults smoking to less than 15%. Those working in routine and manual occupations have a higher smoking prevalence (16.5% in 2023). Smoking in pregnancy in Leicester has reduced over the past 10 years from being significantly higher than England to similar levels (7.4% in 2023).²²

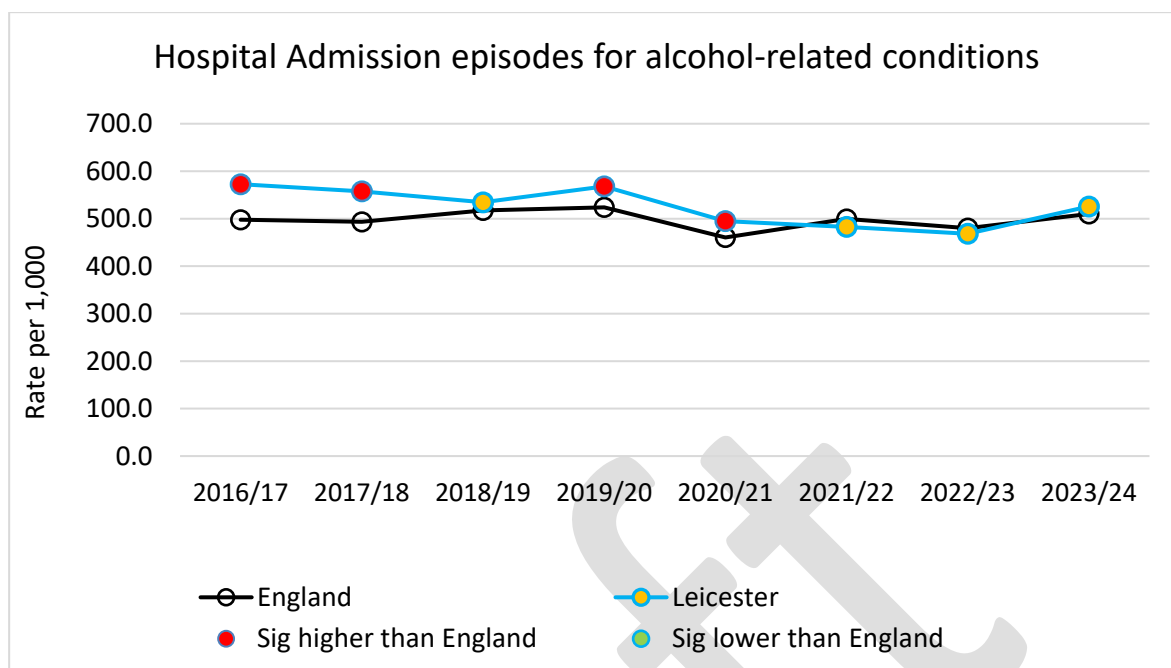
5.4.1 Alcohol consumption

Excessive alcohol consumption can increase the risk of liver disease, heart disease, certain cancers and mental health issues. It also weakens the immune system and can lead to accidents and injuries.

Leicester's health and wellbeing survey in 2024, found over half of Leicester residents abstain from alcohol and 9% of men and 5% of women binge drink. However, hospital admissions for alcohol consumption are significantly higher in Leicester than in England (2,076 per 100,000) than England (612 per 100,00) with around 645 admissions in 2020/21.

²² Leicester Health & Wellbeing Survey, 2024. <https://www.leicester.gov.uk/your-council/policies-plans-and-strategies/public-health/data-reports-and-strategies/leicester-health-and-wellbeing-surveys/>

Figure 7: Hospital admission episodes for alcohol-specific conditions



Data: Fingertips, Office for Health Improvement & Disparities, 2025

Liver disease is one of the top causes of alcohol-related deaths and much of it is preventable. In 2023, significantly more Leicester residents died from liver disease (20 per 100,000) compared to England (15 per 100,000).

5.4.2 Physical activity

As well as the benefit of healthier and happier lives, physical activity can reduce your risk of major illnesses such as coronary heart disease, stroke, type 2 diabetes and cancer.

Around 60% of Leicester adults are physically active (carrying out over 150 minutes of physical activity per week) and 28% of Leicester adults are physically inactive (less than 30 minutes of physical activity per week)²³Error! Bookmark not defined.

5.4.3 Overweight and obesity

In the UK it is estimates that 1 in every 4 adults and 1 in every 5 children aged 10 to 11 are living with obesity. Health risks of obesity include type 2 diabetes, coronary heart disease and stroke and some types of cancer. It can also affect your quality of life and contribute to mental health problems such as depression and self-esteem.

In Leicester, around 63% of adults are overweight or obese, which is similar to England (64%). In children (10-11 years), 40% of children are overweight (including living with obesity), 26% are living with obesity, significantly higher than in England²³.

²³[Dept Health and Social Care: Fingertips Public health profiles](#)

5.4.4 Diabetes

Diabetes can lead to long-term complications such as heart disease and stroke, kidney disease, nerve, eye and foot damage.

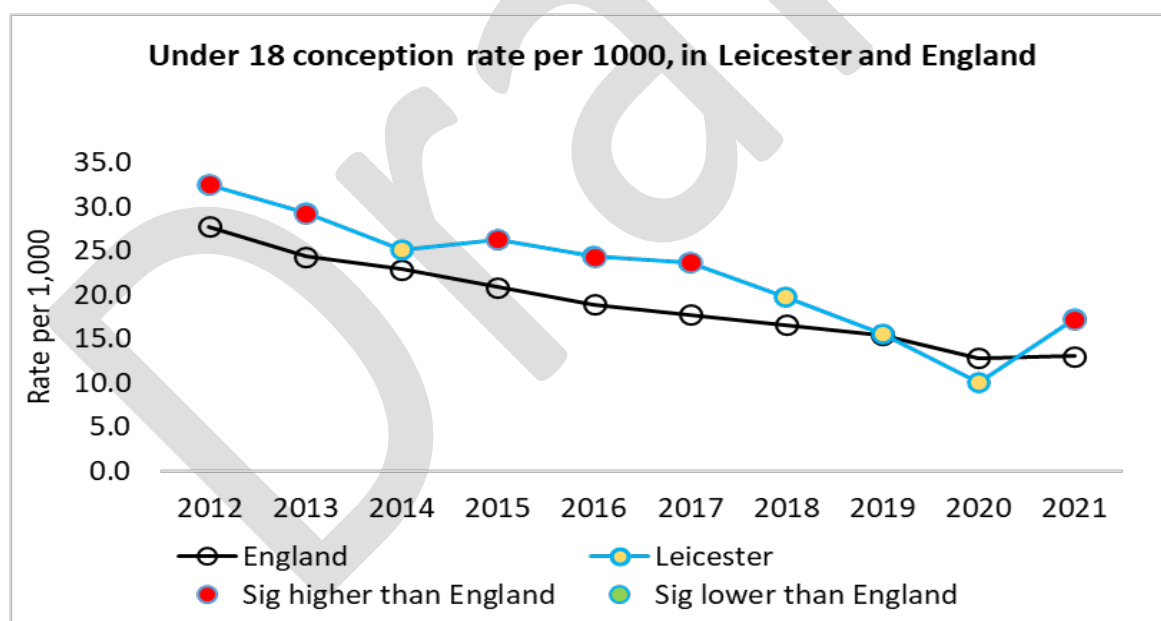
Diabetes prevalence is significantly higher in Leicester adults (10%)²³ and onset of diabetes is more prevalent and at a younger age in South Asian population.

5.4.5 Teenage conceptions

Evidence shows that teenage pregnancies (<18 years) are associated with higher risks of poor health outcomes for both mother and baby. Babies born to teenage mothers have 60% higher rates of infant mortality, are less likely to be breastfed, and have an increased risk of low birthweight, affecting long-term health.

Around 43% of teenage conceptions in Leicester result in abortions²³. Over the past decade, Leicester has seen a significant decline in teenage conception and provision of emergency hormonal contraception and condoms (C-card scheme) at pharmacies may have contributed towards this.

Figure 8: Under 18 conception rate per 1000, in Leicester and England, 2012-2021



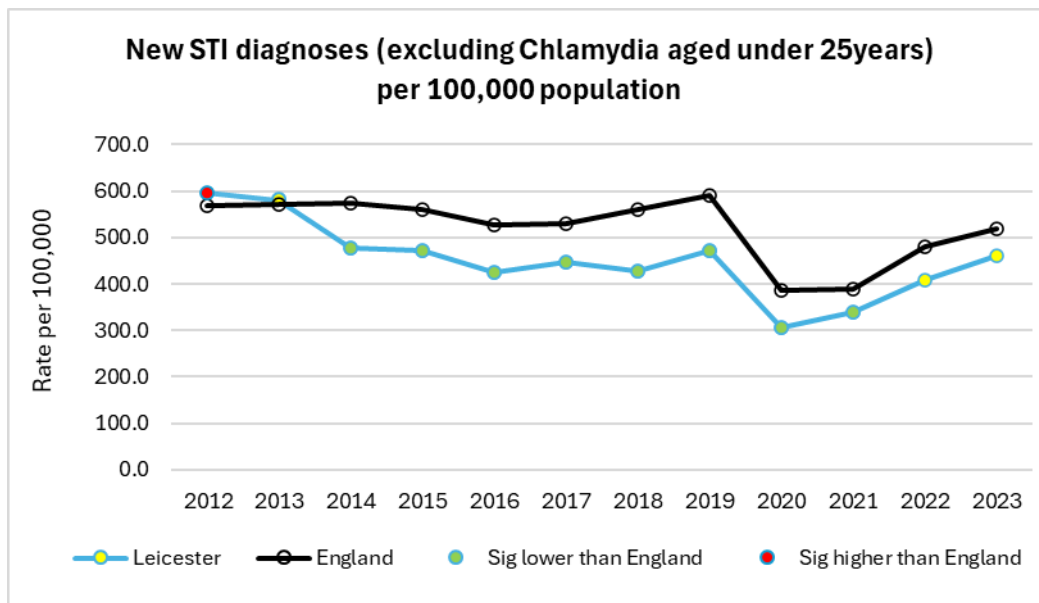
Data: Fingertips, Office for Health Improvement & Disparities, 2025

5.4.6 Sexual health

Sexually transmitted infections (STIs) are infections that are primarily spread through sexual contact. They can be caused by bacteria, viruses, or parasites, and include diseases like chlamydia, gonorrhoea, syphilis, and HIV. The rates of STIs can vary widely depending on factors such as sexual behaviour, access to healthcare, education, and prevention efforts.

Leicester generally shows lower rates of new STI diagnoses (excluding chlamydia for those under 25) per 100,000 people compared to England. There was a fall over the pandemic years and rates have increased to similar levels in Leicester and England.

Figure 9: New STI diagnoses (excluding chlamydia for those under 25) per 100,000 people: Leicester compared to England, 2012-2021



Data: Fingertips, Office for Health Improvement & Disparities, 2025

Pharmacies can provide services including sexually transmitted infection prevention and screening and treatment.

5.4.7 Substance use

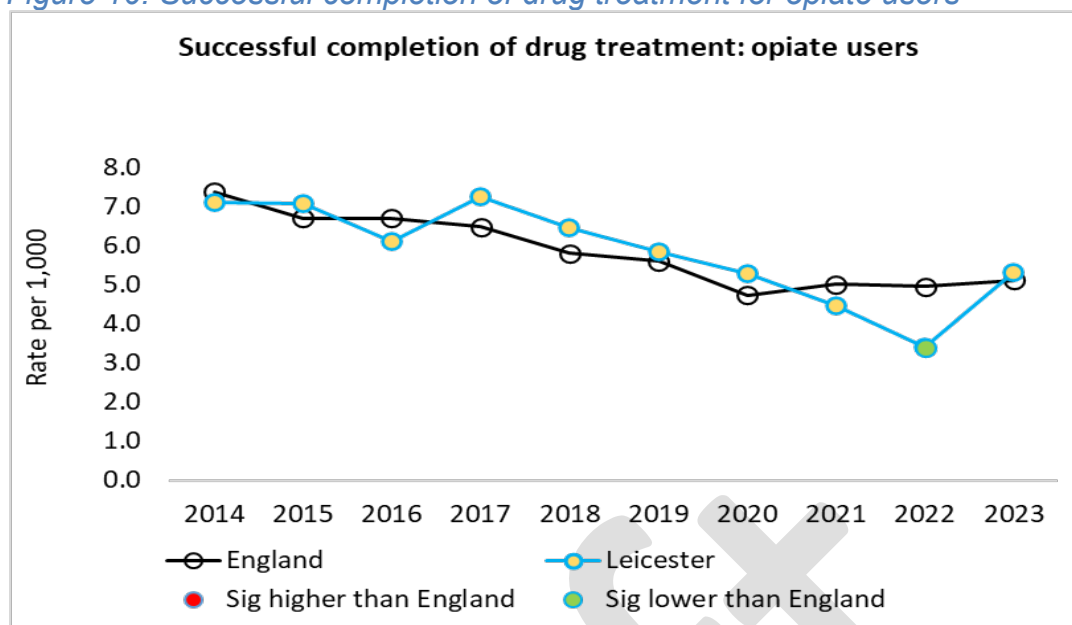
Harmful drug use includes the use of illegal drugs such as Class A drugs, volatile substances such as gas, over the counter (OTC) and prescribed drugs, such as opiate based pain killers and tranquillizers, along with emerging substances and 'New Psychoactive Substances' (NPS) such as synthetic cannabinoids.

In Leicester there were an estimated 2,706 opiate and/or crack cocaine users (OCUs) aged between 15-64 years old in 2019/20 respectively (11.3 per 1,000 population). This is significantly higher than the estimated prevalence in East Midlands and England overall (8.0 and 9.5 per 1,000 population respectively).

Successful completion of treatment

As shown in the figure below, the proportion of adult opiate users in Leicester who successfully completed drug treatment has declined over time, similar to nationally.

Figure 10: Successful completion of drug treatment for opiate users



Data: Fingertips, Office for Health Improvement & Disparities, 2025

Pharmacies can support substance misuse through needle exchange, naloxone and supervised consumption services.

5.4.8 Vaccinations

On average, flu kills around 11,000 people (nationally) and hospitalises thousands more; People are still getting ill with COVID-19, and this is expected to increase in the winter months. People who get flu and COVID-19 at the same time, are more likely to be seriously ill particularly those who are already vulnerable. Getting vaccinated against both flu and COVID-19 will provide protection for you and those around you from both these serious illnesses; this will also help to reduce the strain on our health and social care services in what is likely to be a very busy winter period.

Flu vaccine uptake in Leicester is significantly lower than the national average for England across all age groups. In the 2–3-year age group, Leicester's uptake is 33.4%, which is significantly lower than England's 44.4%. For children aged 4-11 years, Leicester has an uptake rate of 31.4%, significantly lower than the 55.1% seen across England. Among adults aged 6 months to 64 years, Leicester's uptake is 36.6%, well below England's 41.4%. The most concerning gap is observed in the 65+ age group, where Leicester's uptake is 69.2%, significantly lower than England's 77.8%²³.

Table 6: Leicester Flu Vaccine Uptake (%) comparing with England

Age	Time period	England	Leicester
2-3 yrs	2023/24	44.4	33.4
4-11 yrs	2023	55.1	31.4
6 months-64 yrs	2023/24	41.4	36.6
65+ yrs	2023/24	77.8	69.2

Significantly higher than England

Significantly lower than England

Data: Fingertips, Office for Health Improvement & Disparities, 2025

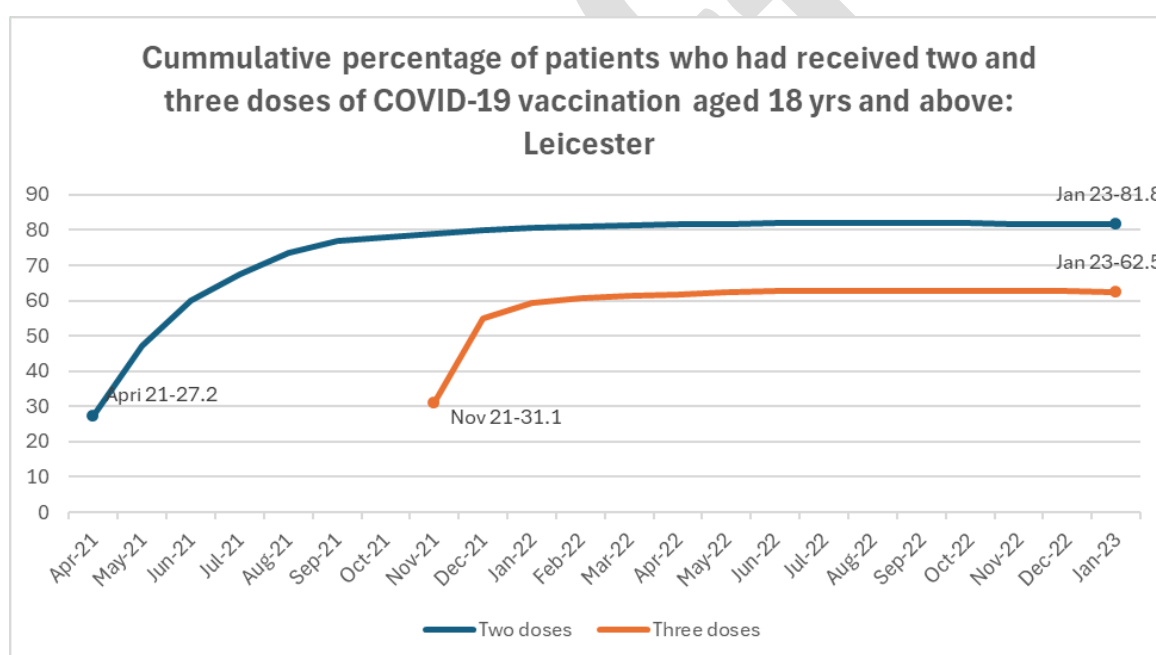
COVID 19 vaccination uptake in Leicester

Covid-19 had a higher impact on the residents of Leicester than many other areas in the UK. The Covid-19 vaccine can help protect against serious illness and is usually offered in the Spring and Autumn to offer extra protection for more vulnerable groups.

COVID-19 vaccination uptake in Leicester demonstrated steady growth for both two and three doses. For the two-dose vaccination, uptake started at 27.2% in April 2021, increased quickly over the summer months and stabilising at around 80%.

In comparison, the third-dose vaccination uptake began later in November 2021 at 31%, rising sharply and stabilising at 62.5% by January 2023.

Figure 11: Two and three doses of COVID 19 vaccination uptake percentage in Leicester aged 18 years and above, April 2021-January 2023



Data: Coronavirus and vaccination rates in people aged 18 years and over by socio-demographic characteristic, region and local authority, England - Office for National Statistics

From 2023, Covid-19 vaccination has been delivered through Spring and Autumn booster campaigns that focus on the population aged 65+ years and priority groups. Data from the Autumn 2023/24 and 2024/25 campaigns show that in Leicester:

- The percentage of 65+ population having their autumn booster was about 49.7% in the 2023/24 campaign, and this has fallen to 35.2% in the 2024/25 campaign.
- Leicester performs worse than the national average and many of our comparators.
- There are significant differences across the city by geography, deprivation and ethnic group.































































Pharmacies can support delivery of Covid-19 vaccinations, which may occur alongside the seasonal flu vaccination programme for those residents who are eligible.

5.5 Health and lifestyle summary for Leicester

Deprivation contributes to poor health outcomes for many residents and overall health in Leicester is generally poorer than nationally. Key health issues for Leicester residents are summarised in table 7 below:

Draft

Table 7: Health and lifestyle profile summary for Leicester City

Health and lifestyle profile	Indicator	Time period	Leicester	England
Overarching Indicators	Life expectancy at birth (Male, 1 year range)	2023	77.1 	79.3 
	Life expectancy at birth (Female, 1 year range)	2023	81.1 	83.2 
	Healthy life expectancy at birth (Male)	2021 - 23	56.7 	61.5 
	Healthy life expectancy at birth (Female)	2021 - 23	56.3 	61.9 
Wider determinants of health	Children in relative low income families (under 16s)	2022/23	40.6 	19.8 
	Violent crime - hospital admissions for violence (including sexual violence) (per 100,000 population)	2021/22-2023/24	28.8 	34.2 
	Homelessness: households owed a duty under the Homelessness Reduction Act (per 1,000 population)	2023/24	21.6 	13.4 
Health improvement	Under 18s conception rate (per 1,000)	2021	17.3 	13.1 
	Obesity in early pregnancy	2023/24	26.3 	26.2 
	Smoking in early pregnancy	2023/24	13.1 	13.6 
	Smoking status at time of delivery	2023/24	7.4 	7.4 
	Reception prevalence of overweight (including obesity)	2023/24	19.3 	22.1 
	Year 6 prevalence of overweight (including obesity)	2023/24	39.1 	35.8 
	Emergency Hospital Admissions for Intentional Self-Harm	2023/24	176.0 	117.0 
	Percentage of physically active adults	2022/23	60.3 	67.1 
	Percentage of physically inactive adults	2022/23	27.8 	22.6 
	Smoking Prevalence in adults (aged 18 and over) - current smokers (APS)	2023	14.6 	11.6 
	Estimated diabetes diagnosis rate	2018	83.0 	78.0 
	Admission episodes for alcohol-related conditions (Narrow): New method (Persons)	2023/24	521.0 	504.0 
	Self reported wellbeing: people with a high anxiety score	2022/23	21.0 	23.3 
Health protection	Population vaccination coverage: Flu (at risk individuals)	2023/24	36.6 	41.4 
	Population vaccination coverage: Flu (aged 65 and over)	2023/24	69.2 	77.8 
Healthcare and premature mortality	Infant mortality rate (per 1000)	2021-23	7.7 	4.1 
	Under 75 mortality rate from causes considered preventable (1 year range) (per 100,000)	2023	182.3 	153 
	Under 75 mortality rate from cardiovascular disease (1 year range) (per 100,000)	2023	105.7 	77.4 
	Under 75 mortality rate from cancer (1 year range) (per 100,000)	2023	128.8 	120.8 
	Under 75 mortality rate from respiratory disease (1 year range) (per 100,000)	2023	38.3 	33.7 
	Premature mortality in adults with severe mental illness (SMI) (per 100,000)	2021-23	174.2 	110.8 
	Suicide rate (per 100,000)	2021-23	11.1 	10.7 
	Hip fractures in people aged 65 and over (per 100,000)	2023-24	549 	547 
	Winter mortality index	Aug 2021 - Jul 2022	3.0 	8.1 

Recent trend key:

—	Could not be calculated
↓	Decreasing & getting better
↑	Increasing & getting worse
→	No significant change
↓	Decreasing & getting worse
↑	Increasing & getting better

Significance rating key (compared to benchmark):

Significantly worse than England
Similar to England
Significantly better than England

Source: Public Health Outcomes Framework, Fingertips, Office for Health Improvement & Disparities, 2025

5.6 Local health needs

For the purposes of this PNA, Leicester City has been divided into smaller areas. These have been defined by, and are consistent with, those used in the Leicester Health and Wellbeing Survey. The Middle Super Output Areas (MSOAs) within the City have been grouped into six locality areas (Central, East, North, North West, South and West Leicester).

5.6.1 Leicester locality area demographics

The demographics of each of the six locality areas in Leicester City have been summarised in the tables below.

Table 8: Demographic summary of the six locality areas of Leicester City

		Central	East	North	North West	South	West	Leicester City
	Number of MSOAs	7	6	7	5	6	7	38
	ONS-Mid-2023 population estimate	79610	56126	71965	51926	50201	63571	373399
Age profile	% Under 19	25.8%	28.5%	25.5%	28.4%	27.1%	27.1%	26.9%
	% 20-29	27.7%	12.3%	14.5%	14.7%	14.4%	19.1%	17.8%
	% 30-49	24.7%	28.0%	28.4%	30.1%	26.8%	27.9%	27.5%
	% 50-64	12.9%	16.7%	17.7%	16.1%	17.6%	15.2%	15.9%
	% 65+	8.9%	14.5%	13.9%	10.7%	14.1%	10.7%	12.0%
Ethnicity	BAME/Not White British	79.7%	72.9%	90.5%	57.5%	38.8%	47.4%	66.8%
	White British	20.3%	27.1%	9.5%	42.5%	61.2%	52.6%	33.2%
	of BAME % Asian	54.7%	55.7%	78.9%	24.3%	15.6%	14.7%	43.7%
IMD 2019 Quintile	% in most deprived 20%	26.8%	26.1%	29.1%	39.5%	48.5%	50.6%	35.9%
	% in 20-40% most deprived areas	41.1%	31.3%	55.0%	34.9%	19.8%	37.8%	38.0%
	% in 40-60% most deprived areas	20.8%	25.9%	15.9%	15.6%	10.1%	4.6%	15.7%
	% in 60-80% most deprived areas	8.9%	16.7%	0.0%	10.0%	9.3%	7.0%	8.2%
	% in least deprived 20%	2.3%	0.0%	0.0%	0.0%	12.2%	0.0%	2.1%

Sources: ONS population estimates, Census 2021, Communities and local Government English Indices of deprivation 2019

Table 9: Protected characteristics of Leicester city population

	Protected Characteristics	Central	East	North	North West	South	West	Leicester city
Language proficiency	Main Language English	67.0%	75.3%	48.2%	74.1%	87.2%	77.3%	70.0%
	Speaks English well or very well	23.0%	18.2%	31.5%	20.6%	10.1%	18.0%	21.0%
	Cannot speak English well/Cannot speak English	10.1%	6.5%	20.4%	5.3%	2.7%	4.7%	9.0%
Disability	Day-to-day activities limited a little and limited a lot	13.6%	15.3%	13.0%	15.6%	18.5%	17.3%	15.5%
One person household Proportion	One person in household: aged 66 and over	7.2%	10.9%	9.9%	8.0%	11.1%	9.4%	9.3%
Marital status	Married or in a registered civil partnership	38.2%	51.5%	57.3%	40.7%	38.0%	33.4%	43.4%
	Never married and never registered a civil partnership	52.1%	33.3%	30.2%	44.2%	45.7%	51.7%	43.1%
	Divorced, Separated, widowed surviving civil partnership partner	9.8%	15.2%	12.6%	15.2%	16.3%	14.8%	13.5%

Significantly higher than Leicester

Significantly lower than Leicester

Sources: ONS population estimates, Census 2021, Communities and local Government English Indices of deprivation 2019

Central:

- MSOAs: St Matthews & Highfields North, Crown Hills, Highfields South, Stoneygate North, Clarendon Park & Stoneygate South, Leicester City South and Leicester City Centre
- Leicester City locality area with the highest proportion of 20–29-year-olds (27.7%), significantly higher proportion than Leicester (17.8%) - reflects the student population attending Leicester's two universities in the centre of the City
- Second highest proportion of BAME residents (79.7%) of the city's locality areas
- Two thirds (67%) of individuals have English as their main language is English which is similar to Leicester overall (70%). 10% cannot speak English or cannot speak English well.
- Lowest proportion of individuals who were divorced, separated, and widowed surviving civil partnership partner (9.8%)

East:

- MSOAs: Humberstone and Hamilton South, Hamilton North, Colchester Road, North Evington & Rowlands Hill, Evington and Thurnby Lodge
- Significantly higher proportion of the population aged 65+ (14.5%) compared to Leicester (12%)
- Lowest proportion of 20–29-year-olds (12.3%) compared to all other locality areas
- Lowest proportion of residents living in the 20% most deprived areas in England (26.1%) compared to the other locality areas in Leicester
- Significantly higher proportion of individuals main language is English (75.3%)

compared to Leicester city (70.0%). Only 6.5% cannot speak English or cannot speak English well

- Significantly highest proportion of individuals who were married or registered in a civil partnership (51.5%) compared to Leicester city (43.4%)

North:

- MSOAs: Rushey Mead North, Rushey Mead South, Belgrave North West, Belgrave North East, Belgrave South, Northfields & Merrydale and Spinney Hill Road
- Significantly higher proportion of the population aged 65+ (13.9%) compared to Leicester (12%)
- Highest proportion of residents classified as BAME (90.5%) and Asian (78.9%) when compared to other locality areas in Leicester and significantly higher proportions than for Leicester overall (66.8% and 43.4% respectively)
- Whole population lives in the 0-60% most deprived areas in England
- Significantly lowest proportion of individuals whose main language is English (48.2%) and high proportion of individuals who cannot speak English well/ cannot speak English (20.4%) compared to Leicester city and other locality areas
- Significantly low proportion of persons with disability (13%) compared with Leicester overall (15.5%)
- Significantly high proportion of one person households aged 66 and over (9.9%) compared to Leicester overall (9.3%)
- Significantly highest proportion of individuals who were married or registered in a civil partnership (57.3%) compared to Leicester city (43.4%) and lowest proportion never married and never registered in a civil partnership (30.2%) compared to Leicester and other locality areas

North West:

- MSOAs: Beaumont Park, Stocking Farm & Mowmacre, Bradgate Heights & Beaumont Leys, Abbey Park and Newfoundpool
- Significantly higher proportion of the population classify themselves as part of a White British (42.5%) than in Leicester's population overall (33.2%)
- Significantly higher proportion of the population living in the 20% most deprived areas (39.5%) when compared to Leicester City as a whole (35.9%)
- Significantly higher proportion of residents speaking English as their main language (74.1% vs 70.0% in Leicester City)
- Higher proportion of people with a disability (16.1%)
- Significantly high proportion of individuals who were never married and never registered in a civil partnership (44.2%), and divorced, separated, and widowed surviving civil partnership partner (15.2%)

South:

- MSOAs: Aylestone North & Saffron Fields, Knighton, Aylestone South, Saffron Lane, Eyres Monsell, West Knighton
- Significantly higher proportion of the population aged 65+ (14.1%) than Leicester City overall (12%)

- Significantly higher proportion of the population classify themselves as White British (61.2%) compared to Leicester (33.2%), this is the highest proportion of all of the Leicester locality areas
- Highest proportion of residents living in the 20% most deprived areas (48.5%) in England compared to other locality areas in Leicester
- Highest proportion of residents living in the 20% least deprived areas (12.2%) in England compared to the other locality areas in Leicester
- Highest proportion of residents whose main language is English (87.2%) compared to Leicester city overall and other locality areas. Only 2.7% cannot speak English or speak English well.
- Significantly high proportion of disability (19%), one person households over 66 years (11.1%), and %divorced, separated, and widowed surviving civil partnership partner (16.3%) compared to Leicester city overall and highest of the other locality areas

West:

- MSOAs: New Parks & Stokeswood, Dane Hills & Western Park, West End & Westcotes, Braunstone Park West, Braunstone Park East, Rowley Fields & Faircharm, Kirby Frith
- Significantly higher proportion of 20-29 (19.1%) and a lower proportion of 65+ year olds (10.7%) than Leicester (17.8% and 12%)
- Significantly higher proportion of residents classified as White British (52.6%) than Leicester (33.2%)
- Significantly highest proportion of population living in the 20% (50.6%) most deprived areas compared to Leicester as a whole (35.9%) and the locality area in Leicester with the highest proportion of its population living in the 0-20% and 20-40% most deprived areas (88%)
- Significantly higher proportion of residents (77.3%) who speak English as their main language compared to Leicester city (70.0%)
- Significantly higher proportion of persons with disability limiting activities a little or a lot (17.6%)
- Lower proportion of married or in a registered civil partnership (33.4%) and higher proportion of never married and never registered a civil partnership (51.7%), divorced, separated, and widowed surviving civil partnership partner (14.8%)

5.6.2 Locality area health and lifestyle characteristics:

The health and lifestyle characteristics of each of the six locality areas in Leicester City has been summarised below.

Table 10: Health and lifestyle summary of the six locality areas of Leicester City

		Central	East	North	North West	South	West	Leicester City
Life expectancy at birth	Males	76.5%	76.4%	77.7%	75.6%	76.8%	74.8%	76.4%
	Females	80.7%	81.0%	82.3%	79.6%	81.3%	78.8%	80.7%
Long term conditions	CHD (65+ yrs)	24.7%	17.4%	19.6%	18.6%	17.8%	17.7%	19.3%
	Hypertension (40+ yrs)	28.8%	31.6%	33.8%	31.8%	30.8%	30.2%	31.4%
	Stroke / TIA (65+ yrs)	11.7%	10.8%	9.4%	11.2%	11.1%	11.0%	10.7%
	Asthma (6+ yrs)	4.1%	5.9%	4.8%	5.5%	6.6%	5.6%	5.1%
	COPD (40+ yrs)	1.7%	3.2%	1.6%	4.1%	4.9%	4.9%	3.1%
	Cancer (all ages)	1.0%	2.3%	1.5%	2.0%	2.5%	2.2%	1.7%
	Diabetes Mellitus (40+ yrs)	22.1%	18.9%	27.0%	18.0%	15.6%	15.5%	20.5%
	Mental Health (all ages)	0.9%	1.1%	1.0%	1.0	1.3%	1.0%	1.0%
Lifestyle	Dementia (65+ yrs)	4.6%	5.7%	4.3%	4.9%	5.0%	3.9%	4.7%
	Smoking Prevalence	12.4%	15.1%	8.5%	22.9%	19.5%	23.9%	16.3%
	Alcohol (increasing or higher risk levels)	10.2%	7.5%	4.7%	29.5%	15.5%	20.6%	13.6%
	Physical activity (less than 150 min/week)	61.8%	59.3%	75.4%	69.3%	66.1%	72.8%	67.6%
	People with one or more physical or mental long term condition	17.8%	25.2%	20.2%	26.2%	26.8%	25.3%	22.3%
	Carer prevalence	8%	15%	9%	17%	9%	11%	11%

Significantly higher than Leicester

Significantly lower than Leicester

Data: ONS deaths 2019-2023, ONS mid-year population estimates 2019-2023, Quality Outcomes Framework 2023/24, Leicester Health and Wellbeing Survey 2024

Central:

- Similar male and female life expectancy compared to Leicester City (Central: 76.5 years and 80.7, Leicester: 76.4 and 80.7 years)
- Significantly higher prevalence of CHD in over 65s
- Significantly lower prevalence of hypertension, asthma, COPD, and cancer than Leicester City
- Significantly lower prevalence of individuals who physically active less than 150 minutes per week (61.8%)
- Significantly lower proportion of individuals with one or more physical or mental long-term condition (17.8%) compared to Leicester overall and other locality areas
- Significantly lower proportion of individuals providing care for anyone with long-term, physical or mental health conditions or illnesses, or problems related to old age (8.3% compared to Leicester 11.1%)

East:

- Similar life expectancy to Leicester overall
- Significantly higher prevalence of dementia, asthma, and cancer than Leicester City
- Significantly lower prevalence of CHD and diabetes than Leicester overall
- Prevalence of providing unpaid care is higher (15%) compared to Leicester overall (11%) and second highest among the locality areas
- Significantly lower proportion with increasing alcohol risk and carrying out less than 150 minutes of physical activity per week

North:

- Highest male life expectancy (77.7years) and female life expectancy (82.3) across the six locality areas of Leicester and significantly higher value than for Leicester City overall (76.4 years and 80.7 respectively)
- Significantly higher prevalence of hypertension (33.8%) and diabetes (27.0%) compared to Leicester city overall and the highest of the other locality areas
- Significantly lower prevalence of increasing or higher alcohol risk levels (4.7%) and smoking (8.5%) compared to Leicester city overall and lower than the other locality areas
- Significantly highest percentage of people reporting less than the recommended 150 minutes of physical activity per week (75.4%) compared with (67.6%) in Leicester overall.

North West:

- Significantly higher prevalence of asthma, COPD, and cancer compared to Leicester
- Significantly higher proportion of smoking prevalence (22.9%) compared to Leicester city overall (16.3%) and second highest among the locality areas
- Significantly highest prevalence of increasing or higher alcohol risk levels (29.5%) compared to Leicester city overall and highest among the other locality areas
- North West shows the highest carer prevalence (17%) compared to Leicester city (11%) and other locality areas

South:

- Significantly higher prevalence of asthma, COPD, cancer and mental health conditions than Leicester
- Significantly lower prevalence of CHD and Diabetes than Leicester over
- Significantly similar proportion of increasing or higher alcohol risk levels (15.5%) compared to Leicester city overall

West:

- Life expectancy at birth for both males (74.8 years) and females (78.8 years) is significantly lower than in Leicester (76.4 and 80.7 years respectively)
- Prevalence of asthma, COPD, and cancer is significantly higher than Leicester and the prevalence of CHD, hypertension, diabetes and dementia, is significantly lower than Leicester
- Significantly higher prevalence of smoking (23.9%) compared to Leicester and highest among the locality areas
- Significantly higher increasing or higher alcohol risk prevalence (20.6%) than Leicester (16.3% and 13.6% respectively)
- Significantly higher proportion carrying out less than 150 minutes of physical activity per week (72.8%) than Leicester overall (67.6%)

More information on health in Leicester and health priorities can be found in:

Leicester Joint Strategic Needs Assessments: [Joint Strategic Needs Assessment \(leicester.gov.uk\)](http://leicester.gov.uk)

Health profiles: [Public health profiles - OHID \(phe.org.uk\)](http://phe.org.uk)

Local health information: <http://www.localhealth.org.uk>

6. LOCATION AND ACCESS TO COMMUNITY PHARMACIES IN LEICESTER

Leicester has 83 community pharmacies (as of 31 March 2024) and 51 GP Surgeries (and 18 branch surgeries). Leicester has an overall rate of 2.2 community pharmacies per 10,000 population, higher than the England rate of 2.1²⁴. The number of pharmacies has decreased by three since 2022, Leicester has witnessed an increase in population of around 11,000 from 368,922²⁵ to 379,780²⁶. All Leicester pharmacies are open for at least 40 hours and 5 are open for 100 hours. Of Leicester's 83 pharmacies, 6 are distance selling pharmacies, there are no Local Pharmaceutical Service pharmacies and one pharmacy is eligible for the Pharmacy Access Scheme. There are no dispensing GP Practices in Leicester and no appliance contractors.

Pharmaceutical Needs Assessments do not cover prison pharmacy services, as found in HM Prison Leicester, Welford Road, nor hospital pharmacy services, as found in University Hospitals of Leicester NHS Trust.

6.1 Pharmacies do not serve a defined population

It is important to keep in mind, as this PNA considers the location of, and access to, community pharmacies, that pharmacies do not have a designated service area and customers, patients or the public are free to choose which pharmacy to use. This report considers provision of pharmaceutical services across Leicester city and within 1.5km of the City boundary. These pharmacies are an essential part of the picture of provision for people living in the wider urban area of Leicester who will routinely travel to pharmacies which, depending on where they live, are outside or within the city boundary, as is convenient to them.

This report considers variation in pharmacy provision across the six locality areas (Central, East, North, North West, South and West Leicester) based on the community pharmacies located within these localities and provides rates based on the populations.

This PNA considers access and use of pharmacies on the basis that people will generally use a pharmacy near to their home, but it should be clear that there is no requirement on them to do so and similarly no power for NHS England, or any other commissioner, to direct the geographical location of existing pharmacies within Leicester (or anywhere else).

²⁴ [General Pharmaceutical Services in England 2015-16 - 2023-24 | NHSBSA](#)

²⁵ Office for National Statistics, mid-year population estimates 2020

²⁶ [Population estimates for England and Wales - Office for National Statistics](#)

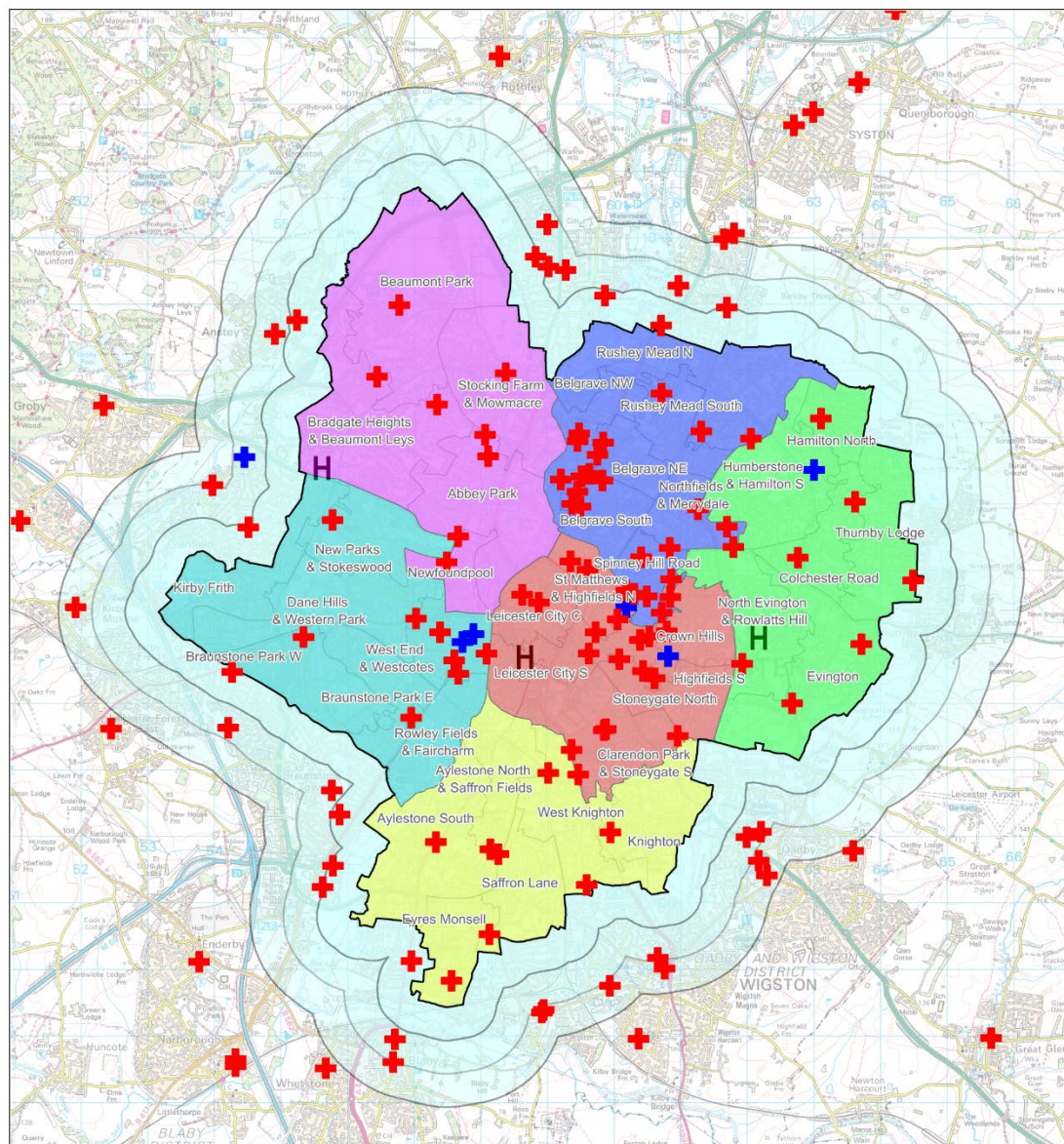
6.2 Location and access to pharmacies

6.2.1 Distribution of community pharmacies

Figure 12, below, shows that, in addition to the pharmacies located within the city boundary, there are 10 pharmacies within 0.5 km, a further 12 between 0.5 and 1km and 12 between 1km and 1.5km of the Leicester boundary. These pharmacies are an essential part of the picture of provision for people living in Leicester, particularly on the outskirts of the city who may travel to pharmacies outside of the city boundary.

Leicestershire County Council has pointed out that as Leicester borders with the four of Leicestershire districts (Blaby, Oadby and Wigston, Harborough and Charnwood), there are significant population flows between Leicestershire and Leicester City (e.g. for work or education) with many county residents accessing services in the city and vice-versa. The draft 2025 PNA for Leicester states that no significant gaps in pharmaceutical services were detected, with higher rates of provision per head of population than England's average. However, some of the city areas have fewer pharmacies (North West and West localities) and projected pharmacy closures could have further impact on accessibility of pharmacy services. Thus, continuous engagement and joint planning (LLR-wide) are needed to ensure equity of pharmaceutical service provision.

Figure 12: Pharmacies in and around Leicester City



Pharmacies in Leicester and surrounding areas by standard and extended (100 hours) opening hours 2024



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Data: NHS Business Services Authority Statistics

Table 11 below shows the location and types of pharmacies by locality area in Leicester.

The highest rates of pharmacies are found in the North and Central localities of the city. There is at least one 100-hour pharmacy located in three of the locality areas, the exceptions are the North and North West and the South of the city. There are internet/distance selling pharmacies in the Central, North, North West and South locality areas of the city. It should also be noted that the rate in North West locality of 1.5 per 10,000 population and South locality 1.7 per 10,000 population are significantly lower than both the Leicester overall rate and the England rate.

Table 11: Pharmacy types, GP Practices and pharmacies per 10,000 population in Leicester by locality area, 2023/24

Locality	Total number of practices	100 hours pharmacies	Distance selling pharmacies	Rate per 10,000 population
Central	21	2	2	2.6
South	13	0	1	2.6
West	11	2	0	1.7
East	11	1	0	2.0
North	19	0	2	2.6
North West	8	0	1	1.5
Leicester City	83	5	6	2.2

Data: NHS Business Services Authority Statistics, ONS 2022 mid-year population estimates

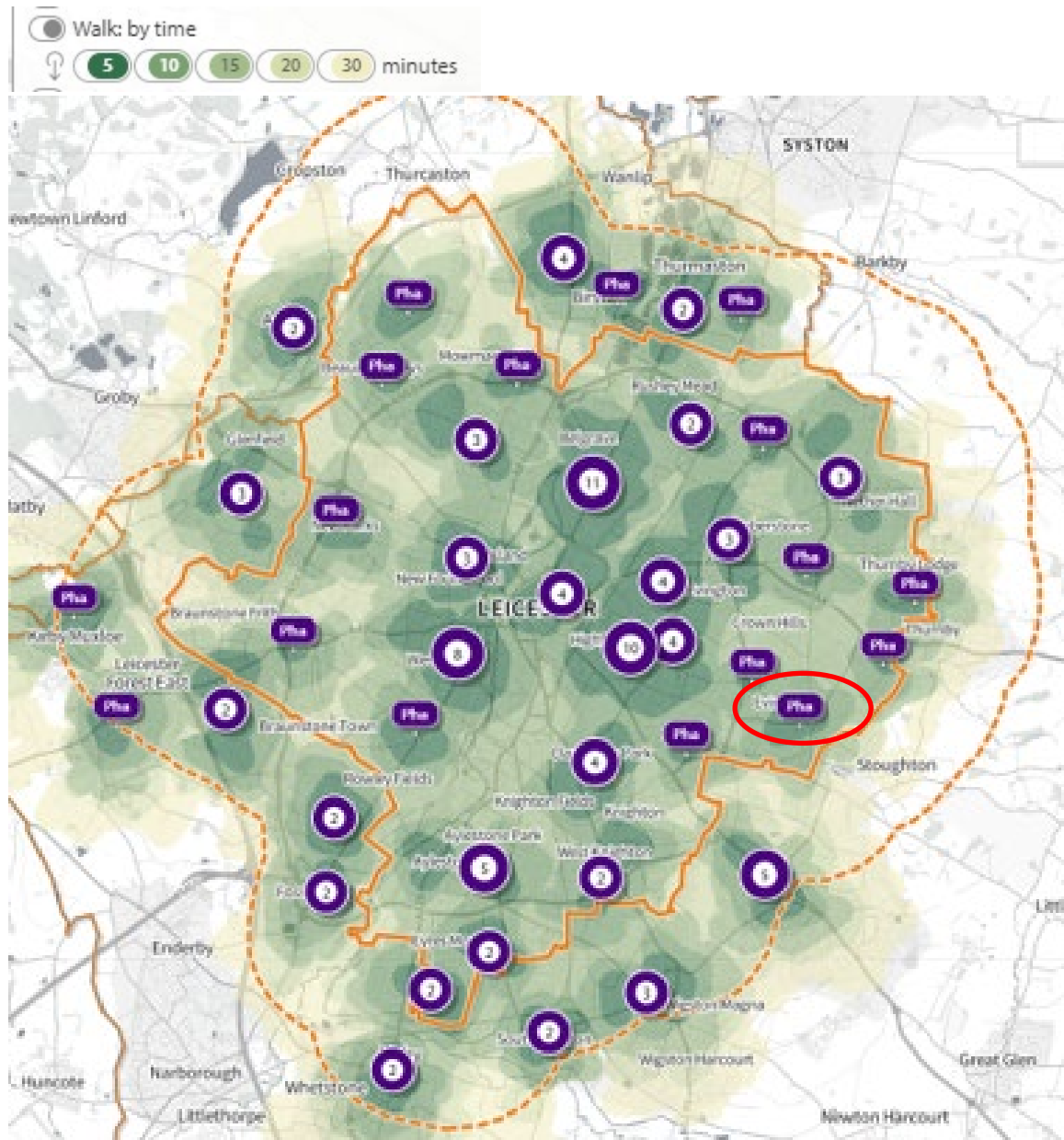
6.2.2 Walk-times to Pharmacies

The map below (figure 13) shows pharmacies accessible within 5 minute walking times.

All Leicester residents can walk to their nearest pharmacy within 20 minutes

- 98% of residents can walk to their nearest pharmacy within 15 minutes
- 87% of residents can walk to their nearest pharmacy within 10 minutes
- 57% of residents can walk to their nearest pharmacy within 5 minutes

Figure 13: Walk times to pharmacies in Leicester in September 2024



Source: Strategic Health Asset Planning and Evaluation tool: <https://shapeatlas.net/>

There are a few areas of Leicester indicated as being above a 15-minute walk-time from a pharmacy. These are in the West of the city in Braunstone, Western Park, to the North of New Parks and a couple of small enclaves around South Knighton.

Note: Since the time of writing a pharmacy in Evington has closed down (Autumn 2024) See red circle on map above for exact location. This closure will increase walking time to their nearest pharmacy for some residents to around 30 minutes.

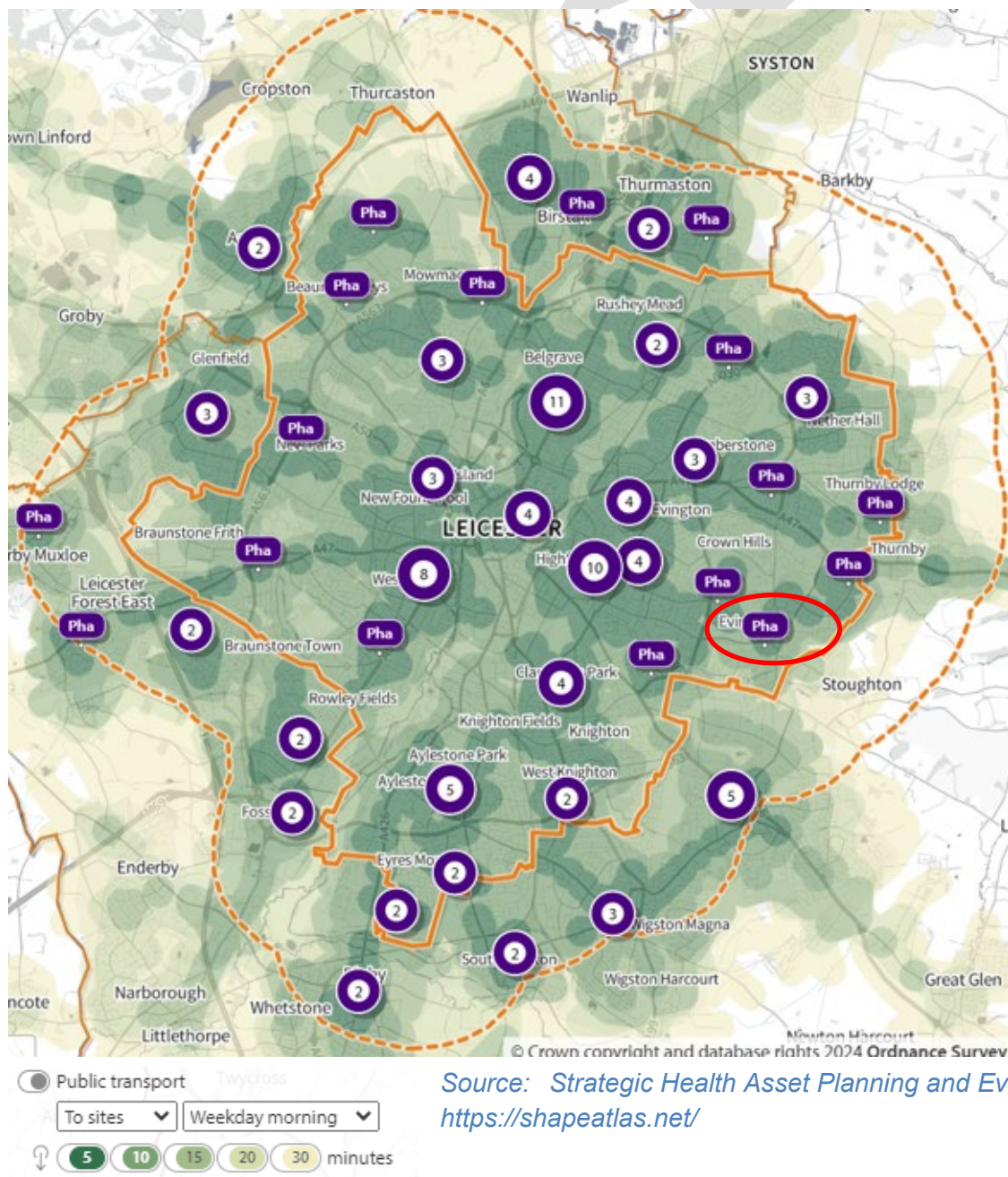
6.2.3 Public transport travel times to pharmacies

The following map (figure 14) shows travel times by public transport to pharmacies, based on travel times on a weekday morning. Based on this map, the proportion of Leicester residents able to reach their nearest pharmacy by public transport:

- all residents can reach a pharmacy within 15 minutes
- 98% of residents can reach a pharmacy within 10 minutes
- 73% can reach a pharmacy within 5 minutes

Note the recent closure of the pharmacy in Evington doesn't significantly increase residents' ability to reach a pharmacy on public transport.

Figure 14: Public transport travel times to pharmacies in Leicester in September 2024



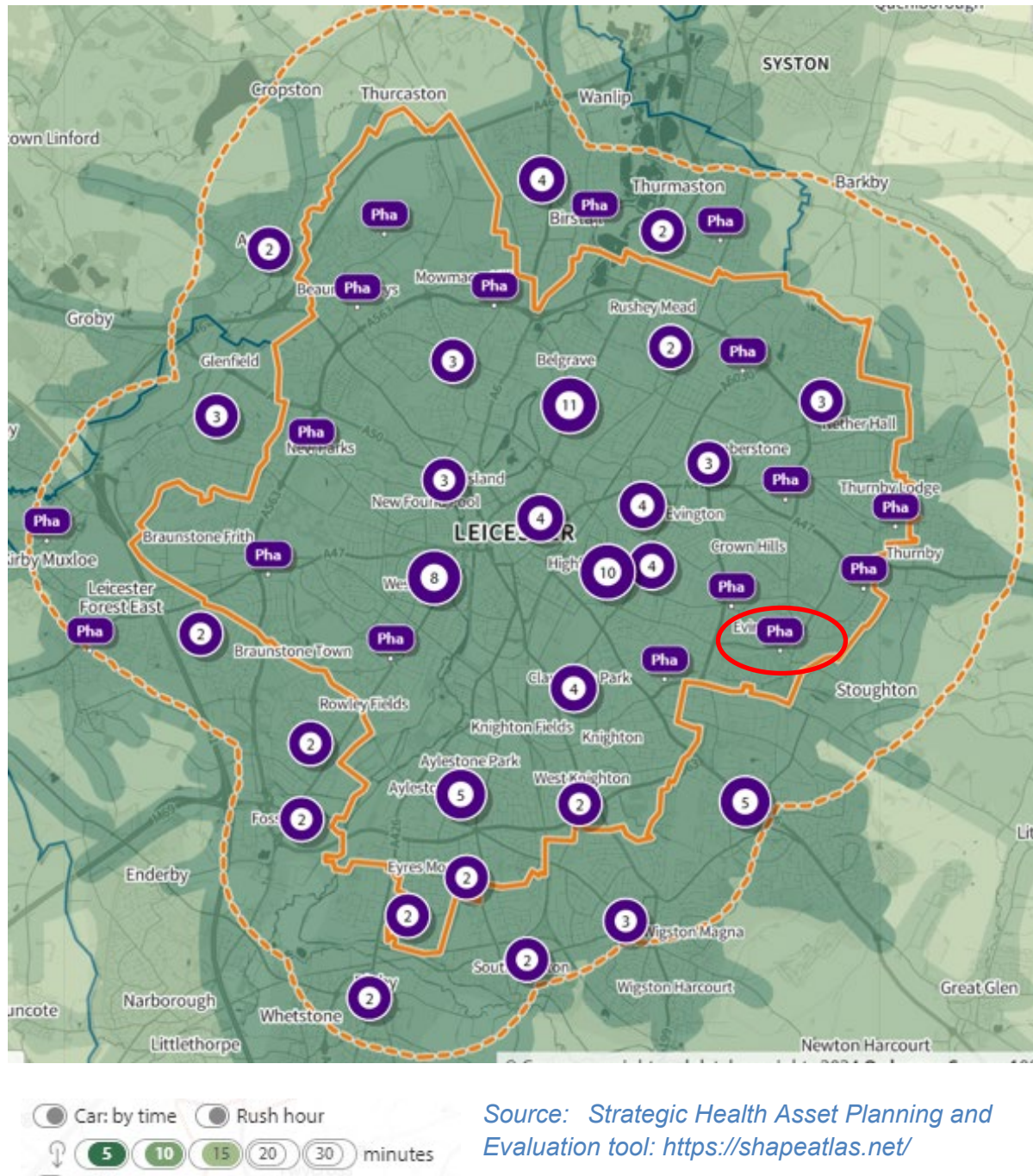
Source: Strategic Health Asset Planning and Evaluation tool:
<https://shapeatlas.net/>

6.2.4 Drive times to Pharmacies

Figure 15 shows that all of Leicester's population can drive to their nearest pharmacy within 5 minutes.

However, it should be noted that the percentage of the Leicester population who do not own a car is significantly higher than the average for England (33% v 24%: Census 2021) and there is considerable variation across the city.

Figure 15: Drive times to pharmacies in Leicester in September 2024



Note: the recent closure of the pharmacy in Evington doesn't significantly increase residents' ability to drive to a pharmacy nearby.

6.3 Pharmacy opening times

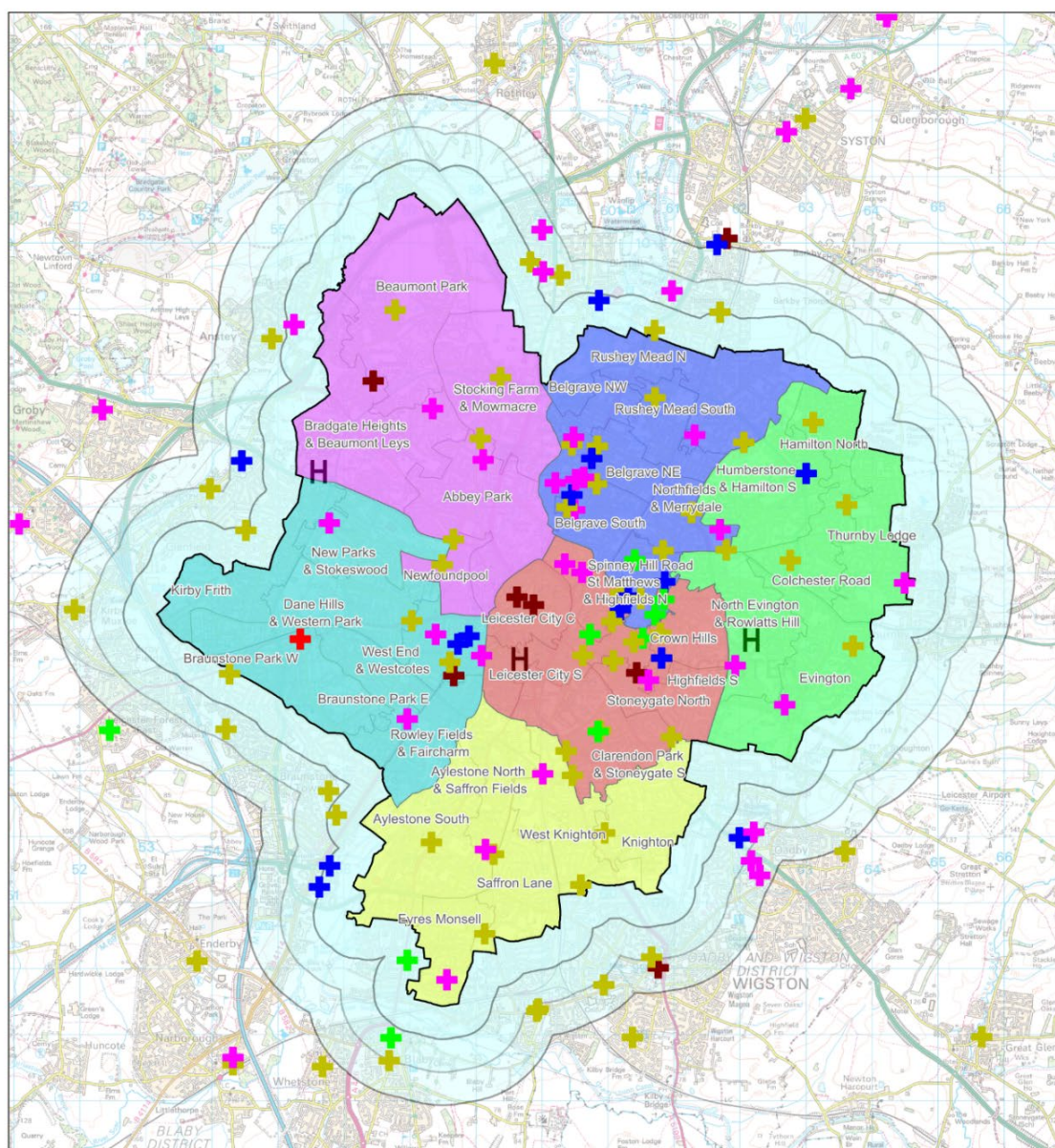
All pharmacies are required to open for 40 hours per week and these are referred to as core opening hours. Pharmacies can choose to open for longer than 40 hours per week and these additional hours are referred to as supplementary opening hours. Since August 2012, some pharmacy contractors have applied to open with a different number of core opening hours in order to meet a need, provide improvements or better access.

Some contractors applied to open as 100-hour pharmacies, which means they open for 100 core hours per week, 52 weeks of the year (with the exception of bank or public holidays).

The map below (figure 16) shows pharmacies in Leicester and surrounding areas, categorised by the number of days pharmacies are open and by standard or extended hours.

Note: Pharmacies are categorized as open 'late' where they open after 18:30 on weekdays

Figure 16: Pharmacies in Leicester and surrounding area by opening hours



Opening days and times for pharmacies in Leicester and surrounding areas 2024

Pharmacy open days

- + Weekdays std hours
- + Weekdays after 18:30
- + Weekdays std hours and Sat
- + Weekdays after 18:30 and Sat
- + Weekdays std hours and Sun
- + Weekdays std hours, Sat, Sun
- + Weekdays after 18:30, Sat, Sun

H University Hospitals of Leicester

HWB Areas

- Central
- East
- North
- North West
- South
- West

Leicester City boundary

- 0.5km boudaries

**Public Health Team
Leicester City Council
Produced March 2025**

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Data: NHS Business Services Authority Statistics, GP Practice data

As shown in table 12 below:

- Across Leicester's locality areas, pharmacy opening times range from 381 hours to over 1,094 hours per week. North West Leicester has the lowest number of open-hours per week.
- The Central and North locality areas have the highest number of total weekly open-hours (over 900 open hours per week each).
- Across the city 18.1% (15) of pharmacies are open 7 days a week (including standard and late opening hours).
- 69.9% (58) of pharmacies are open weekdays and at least some time on Saturday (weekdays and sat and weekdays and sat am).
- All locality areas have at least three pharmacies open Saturday morning.
- Services are more restricted on Sundays.
- 30.1% (25) of pharmacies are open only on weekdays.

Table 12: Pharmacy opening days by locality area, 2023/24

Locality area	Weekdays after 18:30, Sat, Sun	Weekdays std hours, Sat, Sun	Weekdays std hours and Sat	Weekdays after 18:30 and Sat	Weekdays after 18:30	Weekdays std hours	Leicester City total	Leicester distance selling	Weekly hours open	Population	Rate per 10,000 population
Central	3	3	8	4	0	3	21	2	1094	79,610	2.6
East	2	0	5	1	0	3	11	0	563	56,126	2.0
North	2	0	9	1	0	7	19	2	949	71,965	2.6
North West	0	1	5	0	0	2	8	1	381	51,926	1.5
South	1	0	7	0	0	5	13	1	574	50,201	2.6
West	2	1	3	0	1	4	11	0	611	63,571	1.7
Leicester City Total	10	5	37	6	1	24	83	6	4171	373,399	2.2
Distance from Leicester City boundary	Weekdays after 18:30, Sat, Sun	Weekdays std hours, Sat, Sun	Weekdays std hours and Sat	Weekdays after 18:30 and Sat	Weekdays after 18:30	Weekdays std hours	Total within 1.5km of Leicester boundary				
0.0 - 0.5km	2	0	6	1	0	1	10				
0.5 - 1.0km	3	0	6	1	0	4	14				
1.0 - 1.5km	0	2	5	0	0	2	9				
Total within 1.5km of Leicester boundary	5	2	17	2	0	7	33				

Data: NHS Business Services Authority Statistics, ONS 2022 mid-year population estimates

Note: The closure of the pharmacy in Evington reduces the number of weekly hours open to 523 as the pharmacy was a 40 hour pharmacy open weekdays and reduces the rate of pharmacies to 1.8 per 10,000 population.

The opening hours of individual pharmacies by locality areas are given in Appendix 1.

6.4 Accessibility of services

Within the pharmacy questionnaire, pharmacies were asked which facilities they have to help people access services. The results showed that just over a quarter (29%) of pharmacies have wheelchair ramp access, with 59% having large print labels/leaflets, 47% having dementia-friendly space and 18% having automatic door assistance. Other accessibility facilities were also provided across the 17 pharmacies which responded, such as a disabled toilet facility (18%) and bell at the front door (35%).

6.5 Conclusions

This section has described the types and locations of community pharmacies in Leicester. It should be noted that this PNA does not include pharmacy services not open to the general public, that is prison and hospital pharmacy services.

Overall, there is good provision of pharmacies in Leicester City. Leicester has 83 community pharmacies (as of 31st March 2024) - a rate of 2.2 community pharmacies per 10,000 population which is higher than the average for England, 2.1 pharmacies per 10,000 population.^{27, 28} However, we have identified that there are some gaps in service provision within North West and West localities in terms on number of pharmacies per 10,000 population and in terms of opening hours per week. It should also be noted that the closure of a pharmacy located in East locality (Evington) may have an impact on provision going forward. The services that were provided by the pharmacy in Evington will be addressed in the relevant services sections below.

Community pharmacies do not serve defined populations or geographical areas. This PNA considers access and use of pharmacies on the basis that people will generally use a pharmacy near to their home, GP surgery or workplace.

Generally, almost everyone in Leicester is able to access a pharmacy by walking, public transport or private car within what can be considered a reasonable time. A distance within 1km or 20 minutes walk-time, 15-minute public transport journey or 5-minute drive are considered to be reasonable access times and distances to a community pharmacy. Some residents in the West of the city in Braunstone, Western Park, to the north of New Parks and a couple of small enclaves round South Knighton have walk-times over 15 minutes.

It is evident that there is clustering of pharmacy locations not necessarily related to underlying health need but rather to historical and commercial decisions made over a number of years, or decades. More pharmacies are concentrated in the North central and east central areas of the city with fewer in the West and outer areas of the city.

All pharmacies in the city are open for at least 40 hours and 5 are open for 100 hours. A number of pharmacies open for longer than their contracted hours.

There are ten pharmacies within 0.5 km, a further 14 between 0.5 and 1km and nine between 1km and 1.5km of the Leicester boundary. These pharmacies are an

²⁷ NHS Business Service Authority. General Pharmaceutical Services in England: [General Pharmaceutical Services in England 2015-16 - 2023-24 | NHSBSA](#)

²⁸ ONS mid-year 2023 population estimates

essential part of the picture of provision for people living in Leicester, particularly toward the outskirts of the city.

Further details of the services provided by community pharmacies and their delivery are considered in the next chapter.

Draft

7. Current Pharmacy Service Provision

This section provides information regarding the delivery of essential, advanced and locally commissioned services by pharmacies in Leicester. All pharmacies provide essential services, most provide advanced services and pharmacies can choose which, if any, locally commissioned services they wish to offer.

7.1 Essential Services

Essential services are described in section 4.1.1 and constitute the following:

- Dispensing and repeat dispensing of medicines
- Dispensing appliances
- Repeat prescription
- Clinical governance
- Promotion of healthy lifestyles (Public Health)
- Discharge medicines service
- Disposal of unwanted medicines
- Signposting
- Support for self-care
- Healthy Living Pharmacies (2021)

7.1.1. Dispensing and repeat dispensing

During 2023/24 the total prescribing costs for Leicester City ICB were over £61,650,000 (see table 13 below). The top three causes for prescriptions were the endocrine system, central nervous system disorders, and cardiovascular diseases. These accounted for more than half of the total cost of prescriptions. Prescribed items are associated with the GP practice of the patient rather than the patient's residence, so it is not possible to show the data by area of residence.

Table 13: Prescription items and associated costs, Leicester City ICB, 2023/24

Description	Total items	Total costs
Endocrine System	1,044,888	14,441,007
Central Nervous System	1,282,886	8,649,769
Cardiovascular System	2,225,087	8,455,665
Respiratory System	451,284	5,973,103
Nutrition and Blood	419,607	5,948,782
Appliances	353,329	3,997,182
Gastro-Intestinal System	644,609	3,659,462
Stoma Appliances	38,756	2,107,634
Skin	191,069	1,791,580
Infections	198,426	1,075,034
Obstetrics, Gynaecology and Urinary-Tract Disorders	150,971	1,037,057
Eye	100,259	979,742
Musculoskeletal and Joint Diseases	191,161	668,672
Immunological Products and Vaccines	53,888	652,243
Malignant Disease and Immunosuppression	20,390	620,031
Dressings	17,048	608,670
Ear, Nose and Oropharynx	65,198	416,835
Incontinence Appliances	12,302	287,698
Anaesthesia	11,491	248,959
Other Drugs and Preparations	4,332	39,757
Total	7,476,981	61,658,883

Data: [OpenPrescribing.net](https://openprescribing.net)

7.2 Advanced Services

Community pharmacies can choose to provide a range of advanced services as long as they meet the requirements set out in the Secretary of State Directions.

There are 8 advanced services:²⁹

- Appliance Use Review (AUR)
- Community Pharmacist Consultation Service, extended to include Pharmacy First Service
- Flu Vaccination Service
- Hypertension Case-Finding Service
- New Medicine Service (NMS)
- Stoma Appliance Customisation (SAC)
- Smoking Cessation Service (Commissioned as an advanced service from 10th March 2022)
- Pharmacy Contraception Service (PCS)

²⁹ [Advanced Services : PSNC Main site](#)

Where available, data on the provision of these advanced services in Leicester has been provided in the sections below.

Table 14: Advanced Service Provision in Leicester Pharmacies – Number of pharmacies providing each advanced service, as at March 2024

Locality	Number of pharmacies	New medicine Service (NMS) activity	Appliance Use Reviews (AUR) activity	Stoma Customisation (SAC) activity	Community Pharmacy Consultation Service (CPCS) activity	Pharmacy Contraception Service (PCS)	Seasonal Influenza Vaccination activity	Hypertension case finding service	Smoking cessation
Central	21	20	0	1	20	6	17	15	0
East	11	11	0	0	9	4	10	11	0
North	19	18	0	0	16	4	17	13	1
North West	8	7	0	0	6	2	6	7	0
South	13	13	0	1	11	8	12	10	0
West	11	11	0	1	9	5	10	9	1
Leicester City	83	80	0	3	71	29	72	65	2
Distance from Leicester boundary	Number of pharmacies	New medicine Service (NMS) activity	Appliance Use Reviews (AUR) activity	Stoma Customisation (SAC) activity	Community Pharmacy Consultation Service (CPCS) activity	Pharmacy Contraception Service (PCS)	Seasonal Influenza Vaccination activity	Hypertension case finding service	Smoking cessation
0km to 0.5km	10	10	0	0	9	3	6	9	0
0.5km to 1.0km	14	14	0	0	12	5	11	12	2
1.0km to 1.5km	9	8	0	0	7	2	8	9	0
Within 1.5km of Leicester	33	32	0	0	28	10	25	30	2

Source: NHS Business Services Authority 2024

7.2.1 New Medicines Service

The New Medicines Service (NMS) is available for people with the conditions below who have been newly prescribed a listed medicine:

- Asthma and COPD
- Diabetes (Type 2)
- Antiplatelet / anticoagulant therapy
- Hypertension
- High cholesterol
- Osteoporosis
- Gout
- Glaucoma
- Epilepsy
- Parkinson's disease
- Urinary incontinence or retention
- Heart failure, coronary heart disease, atrial fibrillation or heart attack
- Stroke or transient ischaemic attack (TIA)

Pharmacists can intervene and provide support and advice to patients managing a long-term condition, making sure patients understand how the medication should be taken, thus improving their self-management of the condition.

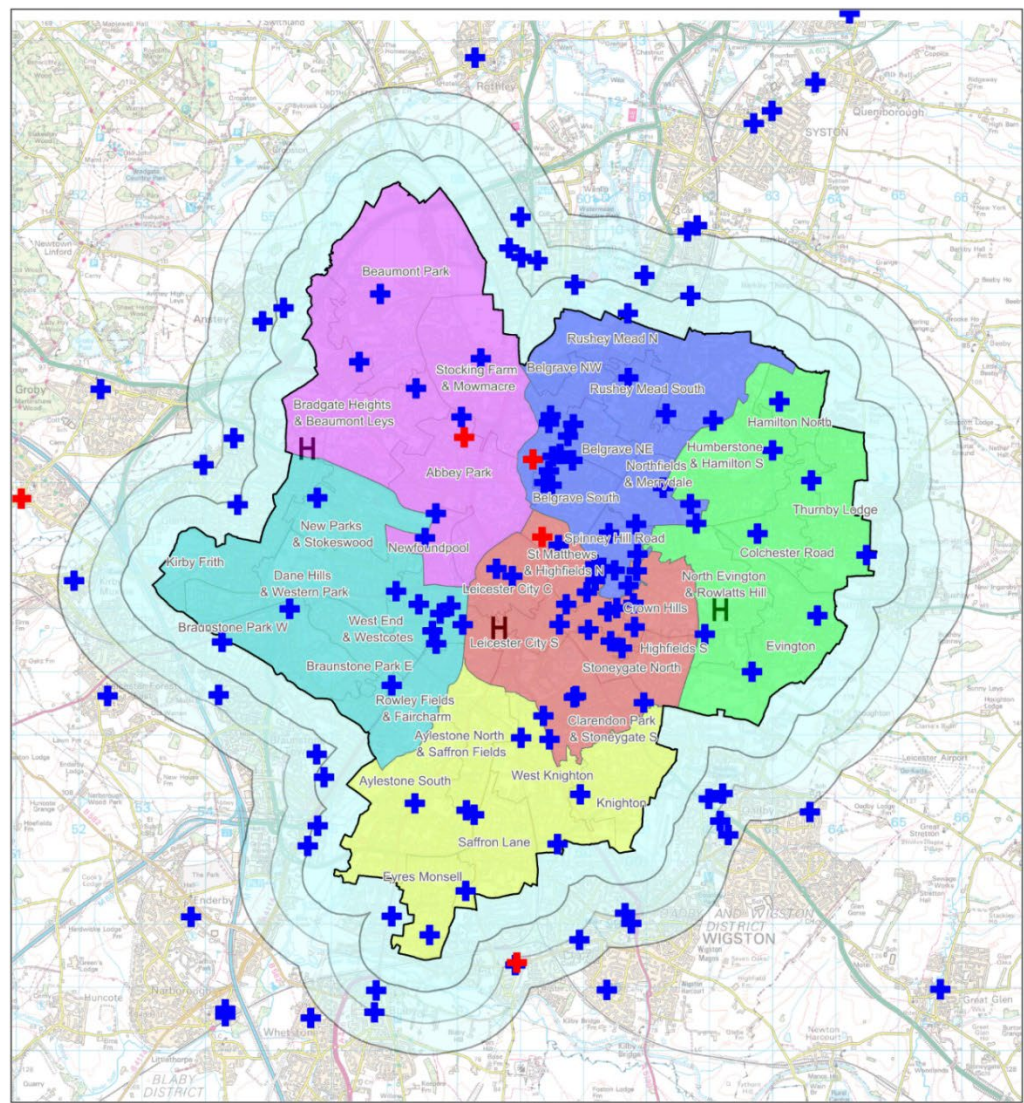
Over 37,000 NMS reviews were carried out by 80 pharmacies during 2023/24. This

represents 99 NMS per 1,000 population, with the lowest rate in the East of the city and the highest rate in the North areas of the city (see figure 17).

The number of NMS reviews carried out by any accredited pharmacy in Leicester ranged from 12 to 2,372 in 2023/24, with most pharmacies carrying out over 100 reviews.

A total of 90 reviews were carried out by the now closed pharmacy in Evington. This service is also offered in neighbouring pharmacies within the locality.

Figure 17: Pharmacies providing New Medicines Services 2023/24



Pharmacies providing a new medicines service in Leicester and surrounding areas 2024



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Data: NHS Business Services Authority Statistics

7.2.2 Stoma Appliance Customisation

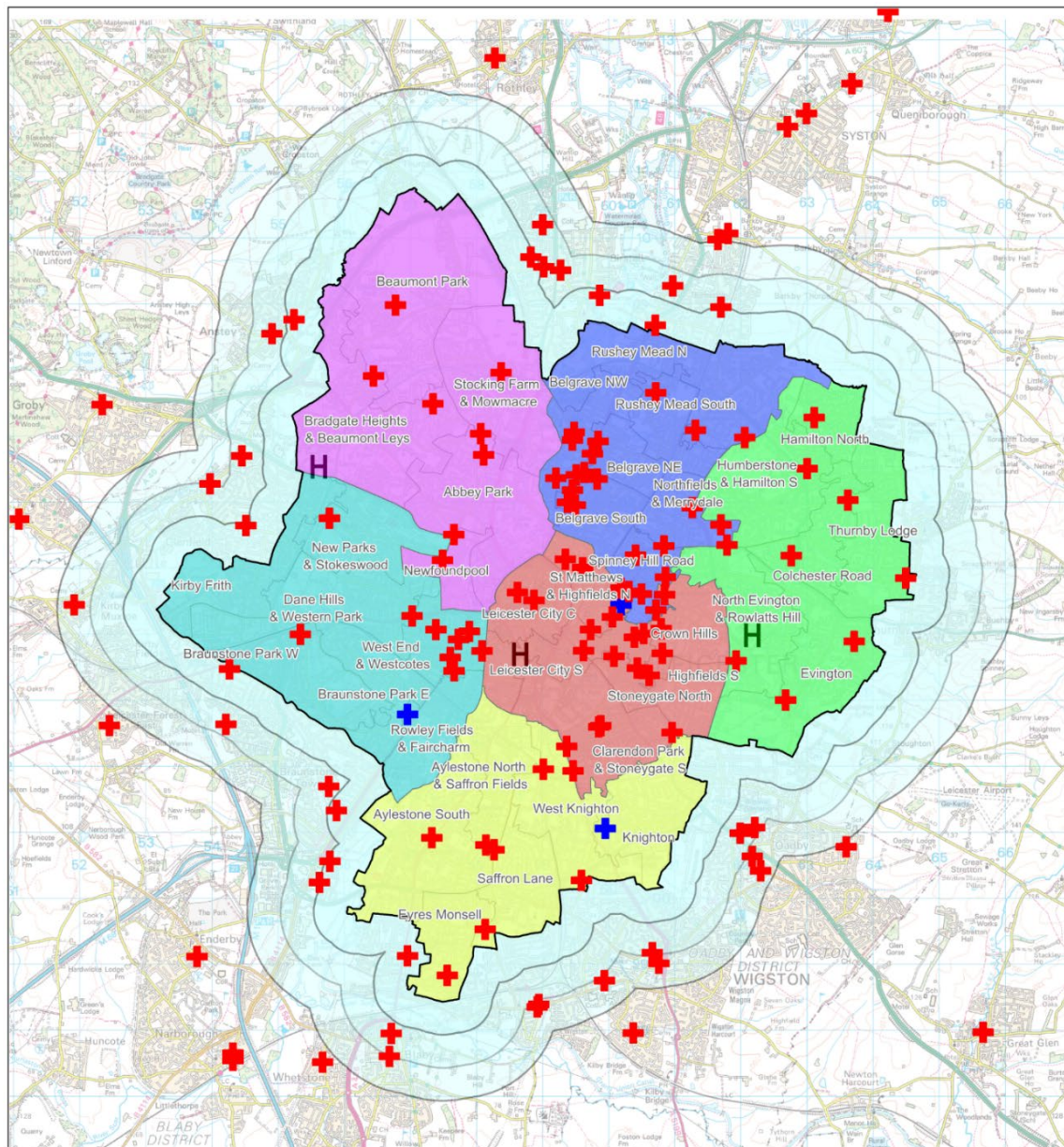
This service ensures comfortable fitting of the stoma appliance (based on the patient's measurements or a template) and proper use of the appliance to improve patient comfort, the duration of usage and level of waste.

As shown in figure 18, Stoma Appliance Customisation (SAC) was provided at 3 out of 83 (3.6%) pharmacies in Leicester in 2023/24. The percentage of pharmacies providing SAC in Leicester in 2023/24 is lower than the national average of 4.1% of community pharmacies and appliance contractors providing SAC services in 2023/24³⁰. The SAC service usually involves delivery to the patient's home and is also available from other providers.

Note: The now closed pharmacy in Evington did not provide any SAC in 2023/24 so the closure won't further impact local residents who require this service.

³⁰ General Pharmaceutical Services Report, England 2015/16 to 2023/24: [General Pharmaceutical Services in England 2015-16 - 2023-24 | NHSBSA](#)

Figure 18: Pharmacies providing Stoma Appliance Customisation 2023/24



Pharmacies providing a stoma appliance service in Leicester and surrounding areas 2024



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Data: NHS Business Services Authority Statistics

7.2.3 Appliance Use Reviews

Appliance Use Reviews (AURs) can be carried out by a pharmacist or a specialist nurse in the pharmacy or at the patient's home. AURs should improve the patient's knowledge and use of any 'specified appliance'.

The service allows 1 AUR per 1,000 prescriptions. There was no AUR activity reported for pharmacies in Leicester in 2023/24, with no recorded activity for this service in Leicester since 2018/19. Nationally, 0.04% of community pharmacies and appliance contractors provided AUR services in 2023/24³¹.

7.2.4 Community Pharmacist Consultation Service

The Community Pharmacist Consultation Service (CPCS) launched on 29th October 2019 as an advanced service. This service replaced the NHS Urgent Medicine Supply Advanced Service (NUMSAS) pilots and connects patients who have a minor illness or need an urgent supply of a medicine with a community pharmacy. Since 1st November 2020 general practices, NHS 111, Integrated Urgent Care Clinical Assessment Services and in some cases the 999 service have been able to refer patients for a minor illness consultation via CPCS.³² The aim is that the CPCS will relieve pressure on the wider NHS by connecting patients with community pharmacy. This service has now been added to with Pharmacy first Service providing care for 7 common minor conditions (see section 7.2.5 below).

As shown in table 15, in 2023/24 over 17,500 community pharmacist consultations were provided through 71 pharmacies in Leicester, a rate of 1.9 pharmacies providing consultations per 10,000 population. 86% of pharmacies in Leicester were providing the community pharmacist consultation service in 2023/24. Leicester witnessed an increase in the number of consultations provided in 2021/22 to 2023/24 (the date of the previous PNA) with 6,780 and over 17,500 consultations provided across the city respectively.

Central Leicester had the highest rate of pharmacies providing the community pharmacist consultation service per 10,000 population in 2023/24 with a rate of 2.5 per 10,000 population, whilst West Leicester had the lowest rate (1.4 per 10,000 population) (see figure 19).

³¹ General Pharmaceutical Services in England, 2015/16 to 2023/24 [General Pharmaceutical Services in England 2015-16 - 2023-24 | NHSBSA](#)

³² Pharmaceutical Services Negotiating Committee, Community Pharmacist Consultation Service (CPCS) [Community Pharmacist Consultation Service \(CPCS\) : PSNC Main site](#)

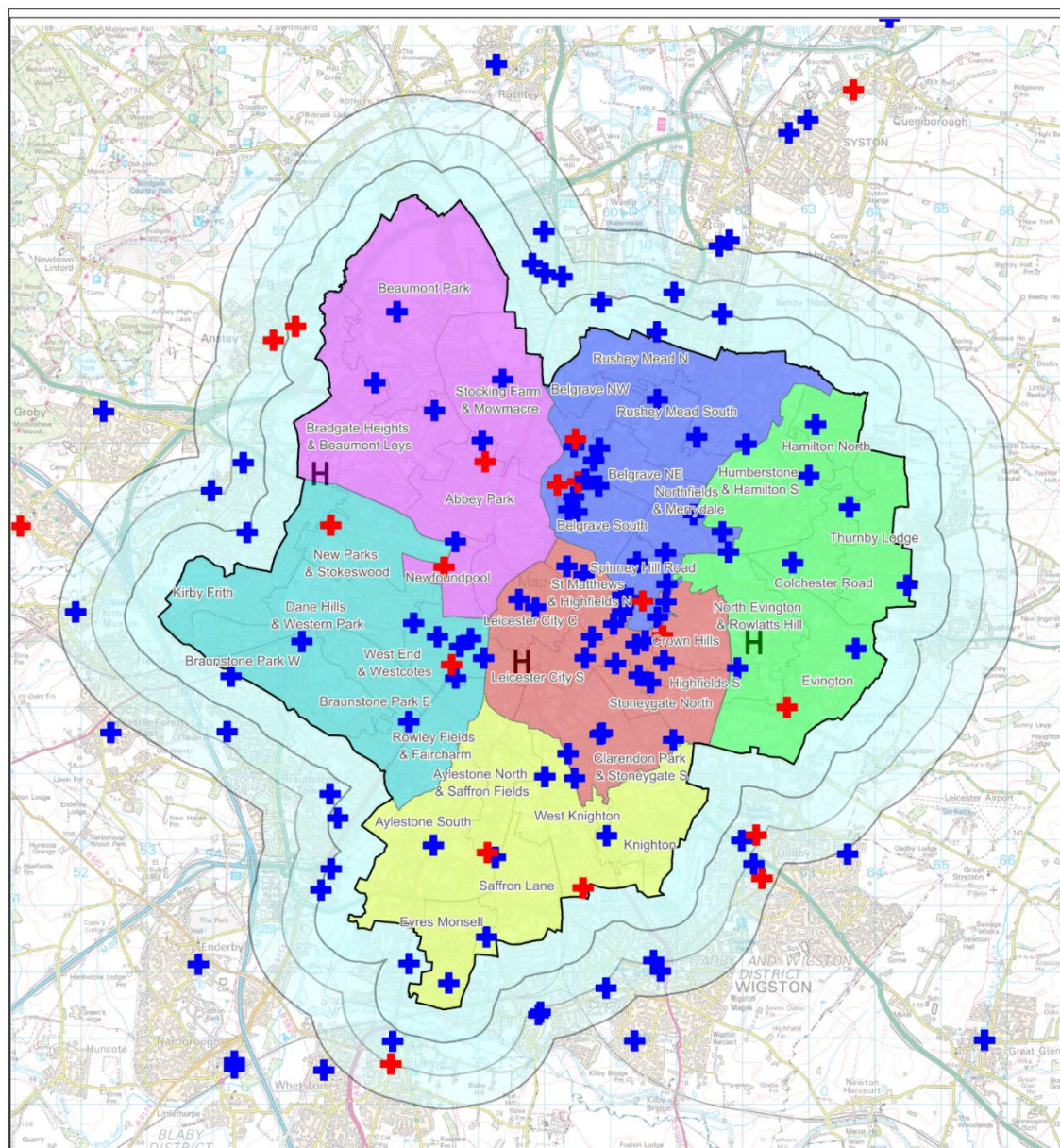
Table 15: Provision of CPCS in Leicester pharmacies, 2023/24

Locality	Number of pharmacies providing CPCS	Number of consultations provided	Population MYE 2022	Pharmacies providing CPCS per 10,000 population
Central	20	3,139	79,610	2.5
East	9	2,197	56,126	1.6
North	16	4,251	71,965	2.2
North West	6	1,094	51,926	1.2
South	11	3,468	50,201	2.2
West	9	3,367	63,571	1.4
Leicester City	71	17,516	373,399	1.9
Distance from Leicester boundary	Number of pharmacies	Number of consultations provided		
0km to 0.5km	9	4,357		
0.5km to 1.0km	12	5,587		
1.0km to 1.5km	7	3,375		
Within 1.5km of Leicester	28	13,319		

Data: NHS Business Services Authority Statistics

Note: The now closed pharmacy in Evington did not provide any CPCS consultations in 2023/24 so the closure won't further impact local residents who require this service.

Figure 19: Pharmacies providing Community Pharmacist Consultation Services 2023/24



Pharmacies providing Community Pharmacy Consultation Services in Leicester and surrounding areas 2024

Pharmacies providing service

- + 71 pharmacies providing service and 28 within 1.5km of Leicester City boundary
- + 12 pharmacies not providing service
- H** University Hospitals of Leicester

HWB Areas

- Central
- East
- North
- North West
- South
- West

Leicester City boundary

- 0.5km boundaries

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Leicester City Council
Produced March 2025**

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Data: NHS Business Services Authority Statistics

7.2.5 Pharmacy First

The Pharmacy First service builds on the NHS Community Pharmacist Consultation Service which has run since October 2019. The consultation service enables patients to be referred into community pharmacy for a minor illness or an urgent repeat medicine supply.

The new Pharmacy First service, which launched on 31 January 2024, adds to the existing consultation service and enables community pharmacies to complete episodes of care for 7 common conditions following defined clinical pathways³³.

In May 2023, NHS England and the Department of Health and Social Care announced a Delivery plan for recovering access to primary care. Part of the plan includes enabling patients to get certain prescription medications directly from a pharmacy, without a GP appointment.

This new service is expected to free up GP appointments for patients who need them most and will give people quicker and more convenient access to safe and high-quality healthcare. It includes the supply of appropriate medicines for 7 common conditions aiming to address health issues before they get worse. The 7 conditions are shown in table 16.

Table 16: Conditions included within Pharmacy first

Clinical pathway	Age range for eligibility
Acute otitis media*	1 to 17 years
Impetigo	1 year and over
Infected insect bites	1 year and over
Shingles	18 years and over
Sinusitis	12 years and over
Sore throat	5 years and over
Uncomplicated urinary tract infections	Women 16-64 years

Currently, NHS patients in England must visit their GP to access prescription only medication, meaning repeated GP visits and delays in treatment. Community pharmacies offer a more convenient way to access healthcare that includes support with healthy eating, exercise, stopping smoking, monitoring your blood pressure, contraception, flu and covid vaccinations.

Table 17 below shows the number of consultations for the 7 conditions in all Leicester City pharmacies for 2024 by month. Numbers of consultations have generally increased since over the year from around 1,500 in the first few months to 2,500 per month in the autumn months.

³³ [NHS England » Pharmacy First](#)

Table 17: Pharmacy first consultations by condition in Leicester in 2024

Condition	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Consultations - AcuteOtitisMedia	0	229	192	178	215	149	187	136	135	296	324	351	2392
Consultations - AcuteSoreThroat	0	655	686	657	781	560	581	451	616	1030	1040	1131	8188
Consultations - Impetigo	0	57	46	40	45	42	34	48	50	80	85	67	594
Consultations - InfectedInsectBites	0	60	51	43	159	208	301	403	213	161	62	36	1697
Consultations - Shingles	0	33	28	29	42	34	25	36	26	28	35	24	340
Consultations - Sinusitis	0	146	132	157	130	107	115	112	116	225	227	293	1760
Consultations - UncomplicatedUTI	0	417	387	422	510	403	497	537	558	657	592	620	5600
Total conditions	0	1597	1522	1526	1882	1503	1740	1723	1714	2477	2365	2522	20571

Data: NHS Business Services Authority Statistics, March 2025

As well as consultations for 7 conditions, pharmacy first also provides consultations for urgent medicine and first minor illness referrals. Table 18 below shows this breakdown by month for 2024.

Table 18: Pharmacy First Consultations, January-December 2024

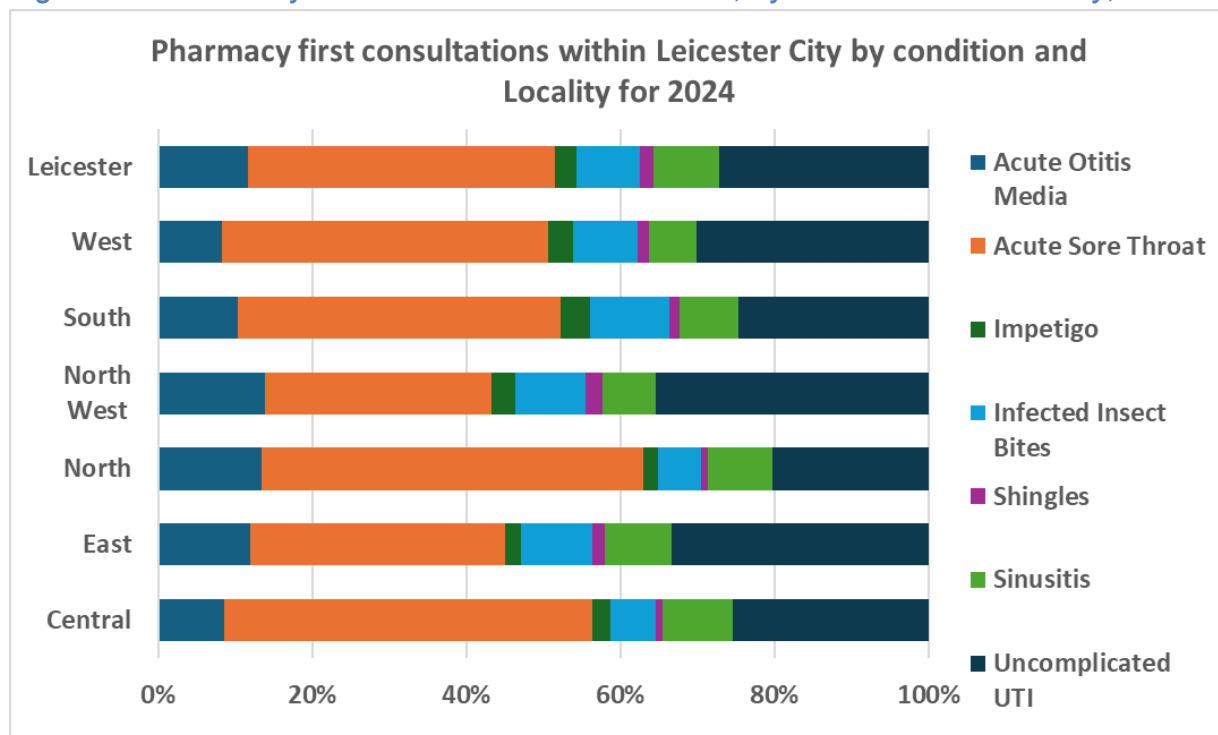
Consultation type	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Consultations - Urgent Medicine Supply	0	778	844	807	988	813	854	1052	956	950	1021	1065	10128
Consultations - First Minor Illness Referral	0	2880	2528	2498	2541	2710	2193	1629	1575	2392	2820	2387	26153
Total medicine and first referral	0	3658	3372	3305	3529	3523	3047	2681	2531	3342	3841	3452	36281

Data: NHS Business Services Authority Statistics, March 2025

Figure 20 below shows the number of consultations for the 7 conditions in Leicester City pharmacies by condition and locality 2024. In most localities the condition accounting for the most consultations is acute sore throat. The exceptions being East locality which has an equal amount for acute sore throat and uncomplicated UTI and North West locality which has a higher proportion of uncomplicated UTI.

Note: The now closed pharmacy in Evington provided only 7 consultations in 2023/24. It is expected that the service will increase in the coming months, so some residents in Evington will have further to travel to benefit from the pharmacy first service.

Figure 20: Pharmacy first consultations in Leicester, by conditions and locality, 2024



Data: NHS Business Services Authority Statistics, March 2025

Table 19 below shows the number of consultations for the 7 conditions in pharmacies within 1.5km of Leicester City boundaries 2024.

Table 19: Number of Pharmacy first consultations at pharmacies within 1.5km of Leicester City boundaries by condition, 2024

Condition	0.0 - 0.5km	0.5 - 1.0km	1.0 - 1.5km	Total within 1.5km
Acute Otitis Media	238	551	232	1021
Acute Sore Throat	747	1391	536	2674
Impetigo	57	139	65	261
Infected Insect Bites	188	321	244	753
Shingles	46	88	48	182
Sinusitis	209	351	212	772
Uncomplicated UTI	522	1264	496	2282
All conditions	2007	4105	1833	7945

Data: NHS Business Services Authority Statistics March 2025

From 31st March 2025, all pharmacy owners providing Pharmacy First, will also have to provide the Pharmacy First Contraception Service and Hypertension Case-finding Service to continue to receive the monthly fixed payments for those pharmacies meeting the minimum activity thresholds for Pharmacy First.

7.2.6 Flu vaccination Service

The flu vaccination service runs each year alongside the GP service, aiming to vaccinate all patients who are at risk of developing more serious complications from the virus. These

include people aged 65 years and over, pregnant women and those with certain health conditions.

In 2023/24, over 21,700 flu vaccinations were provided through 72 pharmacies in Leicester, a rate of 1.9 pharmacies providing flu vaccinations per 10,000 population aged 18+ (see table 20). This has decreased compared to the 2021/22 data included in the previous version of this document where Leicester City had a rate of 2.6 pharmacies providing flu vaccination services per 10,000 population aged 18+. 86.7% of pharmacies in Leicester were providing flu vaccinations in 2023/24 compared to 76.4% of community pharmacies nationally.

Pharmacies in the North locality (2.4 per 10,000 population aged 18+) and South locality (2.4) of Leicester have the highest rates of pharmacies providing flu vaccinations per 10,000 population 18+, with North West locality (1.2) having the lowest rate (see table 20 and figure 21).

Draft

Table 20: Provision of flu vaccinations in Leicester pharmacies, September 2023 – March 2024

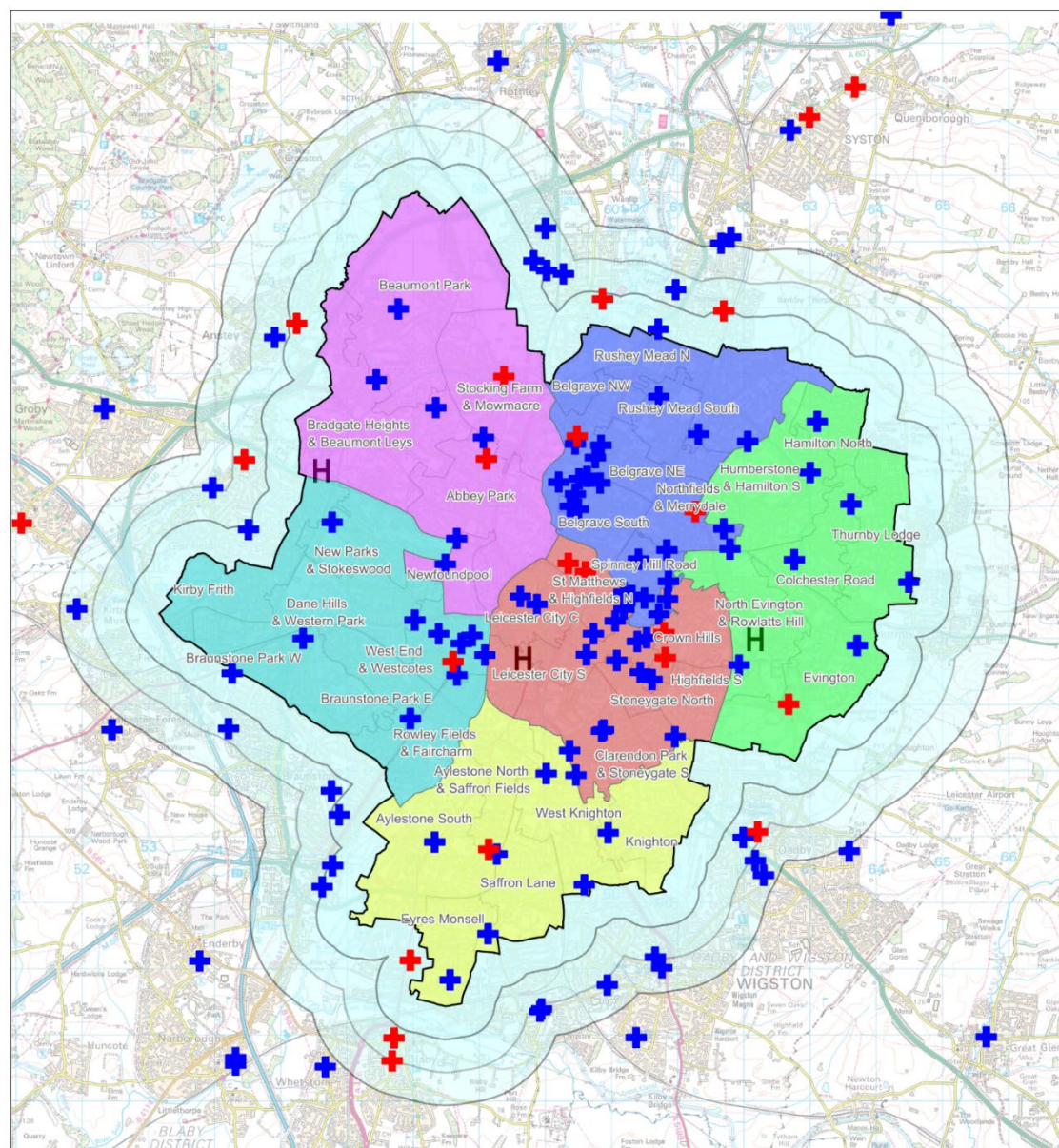
Locality	Number of pharmacies providing flu vaccine	Number of consultations provided	Population MYE 2022	Pharmacies providing flu vaccine per 10,000 population
Central	17	4,015	79,610	2.1
East	10	3,280	56,126	1.8
North	17	6,060	71,965	2.4
North West	6	1,791	51,926	1.2
South	12	5,020	50,201	2.4
West	10	1,593	63,571	1.6
Leicester City	72	21,759	373,399	1.9
Distance from Leicester boundary	Number of pharmacies	Number of consultations provided		
0km to 0.5km	6	1,545		
0.5km to 1.0km	11	4,935		
1.0km to 1.5km	8	3,888		
Within 1.5km of Leicester	25	10,368		

**Note: Submissions are accepted from contractors up to six months after the dispensing month and accredited to the dispensing month. Therefore, historical data on this report may well change.*

Data: NHS Business Services Authority 2024, ONS mid-2022 population estimates

Note: The now closed pharmacy in Evington did not provide any flu vaccinations in 2023/24 so the closure won't further impact local residents who require this service.

Figure 21: Pharmacies accredited for flu vaccinations in Leicester, 2023/24



Pharmacies providing flu immunisation service in Leicester and surrounding areas 2024

Pharmacies providing service

- + 72 pharmacies providing service and 25 within 1.5km of Leicester City boundary
- + 11 pharmacies not providing service

H University Hospitals of Leicester

HWB Areas

- Central
- East
- North
- North West
- South
- West

Leicester City boundary

- 0.5km boundaries

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Data: NHS Business Services Authority 2024, ONS mid-2020 population estimates

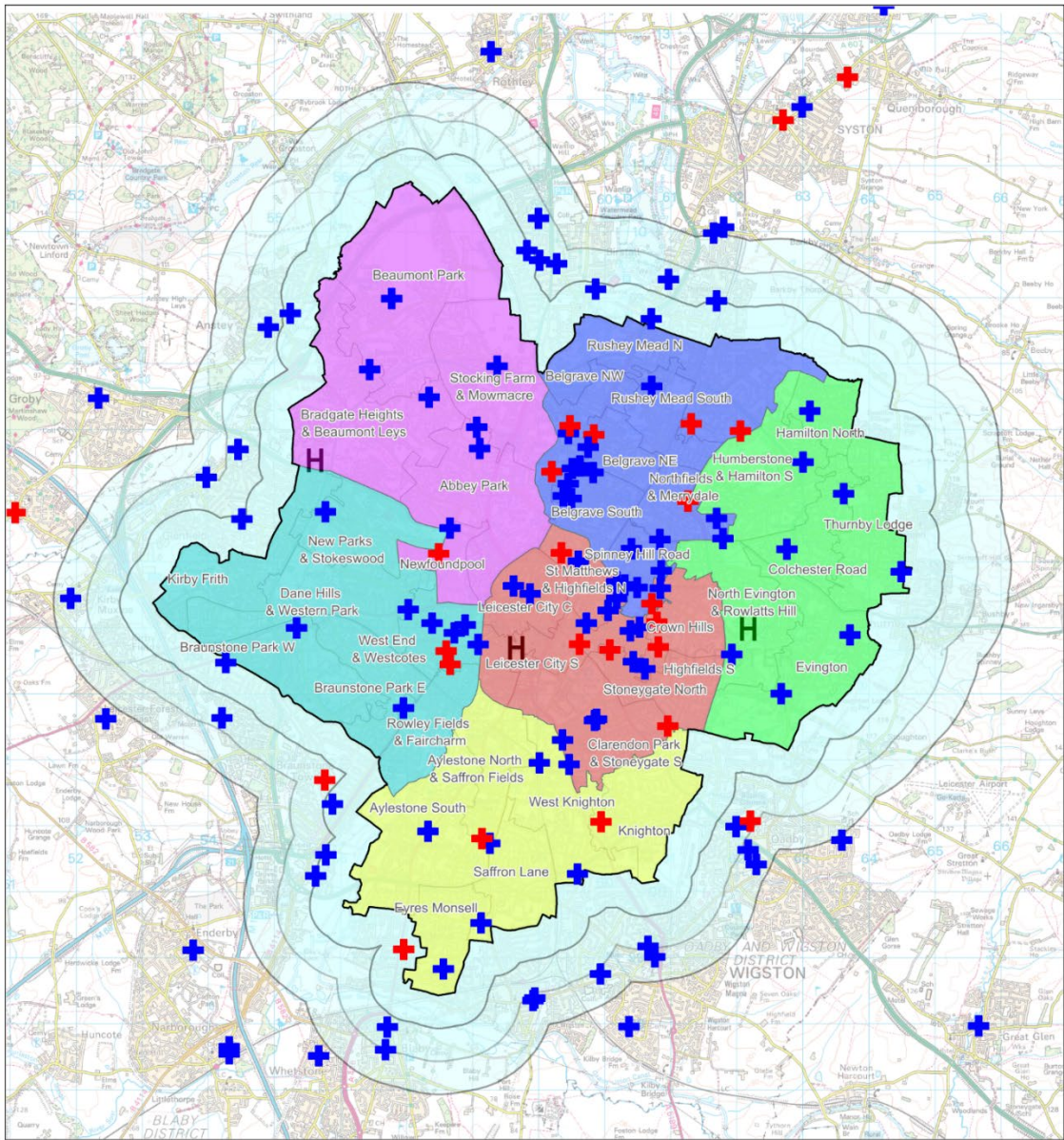
7.2.7 Hypertension Case-Finding Service

The Hypertension Case-Finding Service, also known as the NHS Blood Pressure Check Service, was commissioned as an advanced service from 1st October 2021. The service aims to identify people with high blood pressure aged 40 years or older (who have not previously had a diagnosis of hypertension) and refer them to general practice to confirm the diagnosis and for appropriate management of the condition. At the request of a general practice the service undertakes ad hoc clinic and ambulatory blood pressure measurements.

As shown in figure 22, 65 pharmacies (78%) in Leicester were providing activity for Hypertension Case-Finding Service as of March 2024. There were more pharmacies providing this service in the Central and North locality areas of the city, with 15 and 13 pharmacies providing this service in these areas respectively. The other four locality areas in Leicester each had between 7-11 pharmacies providing this service. There were 30 pharmacies within 1.5km of the Leicester city boundary providing this service.

Note: The now closed pharmacy in Evington only provided 4 hypertension case finding consultations in 2023/24 so the closure won't significantly impact residents who require this service.

Figure 22: Pharmacies accredited for Hypertension Case-Finding Service in Leicester, 2023/24



Pharmacies providing hypertension case finding service in Leicester and surrounding areas 2024



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Data: NHS Business Services Authority Statistics

7.2.8 Smoking Cessation Services

The Smoking Cessation service is one in which pharmacies provide one-to-one

support and advice to people who want to give up smoking. The service aims to:

- Improve access to and choice of stop smoking services, including access to pharmacological and non-pharmacological stop smoking aids.
- Reduce smoking related illnesses and deaths by helping people to give up smoking.
- Improve the health of the population by reducing exposure to passive smoke.
- Help service users access additional treatment by offering referral to specialist services where appropriate.

In 2023/24, the smoking cessation services was only taken up 9 times within 2 pharmacies in Leicester. A further 28 consultations were provided by pharmacies within 1.5km of the Leicester City boundary.

Note: The now closed pharmacy in Evington did not provide any smoking cessation consultations in 2023/24 so the closure won't further impact residents.

7.2.9 Pharmacy Contraception Services (PCS)

The PCS commenced on 24th April 2023, allowing the on-going supply of oral contraception (OC) from community pharmacies. From 1st December 2023, the service expanded to give people the option of being able to have a confidential consultation with a community pharmacist to request a prescription of the contraceptive pill for the first time directly from their pharmacist, rather than from their GP or sexual health clinic.

As shown in table 21, there were over 900 consultations for contraception services in pharmacies in Leicester in 2023/24. The highest uptake of the service is in the West locality of the city, with over 680 consultations during the 12-month period. The lowest uptake is in the North of the city where there were 12 consultations for the same period. Of these consultations, 155 in Leicester City were initial consultations with the most being in the West of the city (n=155).

Table 21: Provision of contraception services in Leicester pharmacies, 2023/24

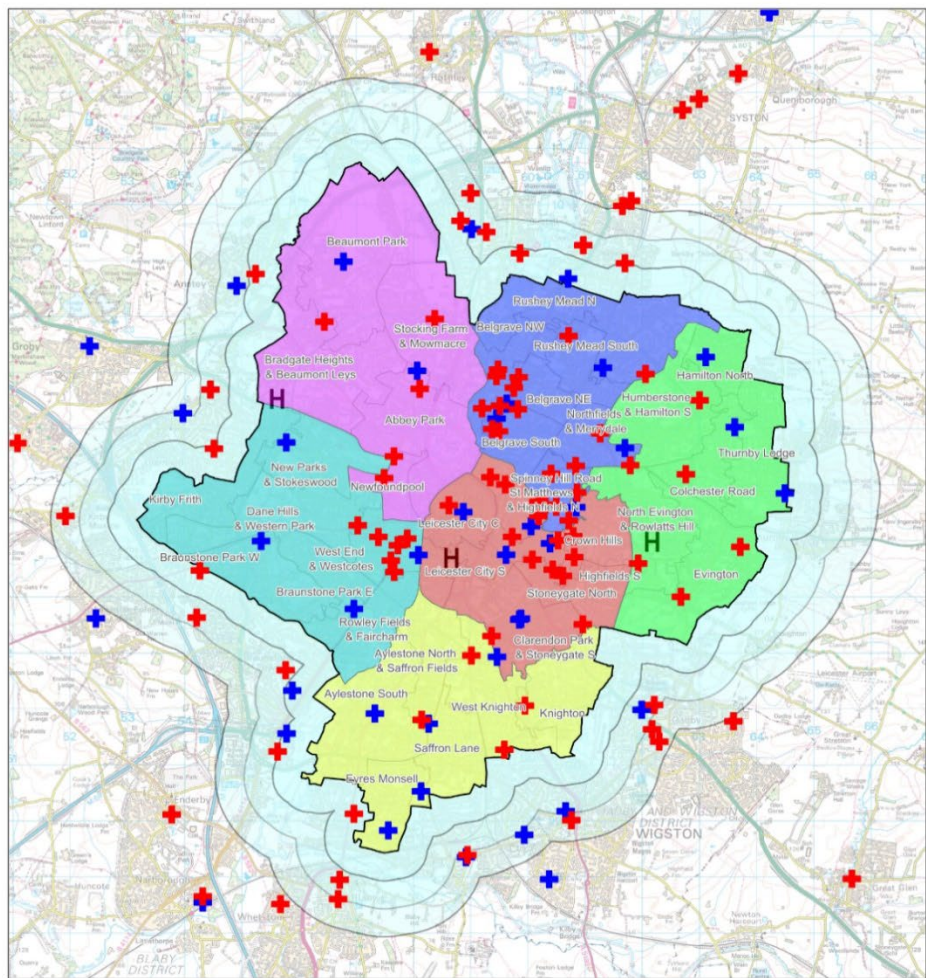
Locality	Number of pharmacies providing PCS	Number of initial consultations	Number of consultations provided	Population MYE 2022	Pharmacies providing PCS per 10,000 population
Central	6	10	76	79,610	0.8
East	4	9	75	56,126	0.7
North	4	2	12	71,965	0.6
North West	2	3	22	51,926	0.4
South	7	6	76	50,201	1.4
West	4	125	686	63,571	0.6
Leicester City	27	155	947	373,399	0.7
Distance from Leicester boundary	Number of pharmacies	Number of initial consultations	Number of consultations provided		
0km to 0.5km	3	3	45		
0.5km to 1.0km	5	4	87		
1.0km to 1.5km	2	7	30		
Within 1.5km of Leicester	10	14	162		

Data: NHS Business Services Authority 2024, ONS mid-2022 population estimates

Note: The now closed pharmacy in Evington did not provide any contraception consultations in 2023/24 so the closure won't further impact residents who require this service.

As shown in figure 23, the locality areas in Leicester with the highest number of pharmacies where contraception services were provided in 2023/24 were the Central and South. Almost three quarters (72%, 686 of 947) of consultations were provided through pharmacies in the West of the city. There were at least 2 pharmacies in each locality providing contraception services in Leicester and there are a further 10 pharmacies within 1.5km of the City boundary.

Figure 23: Pharmacies accredited for Contraception services in and around Leicester 2023/24



Pharmacies providing a contraception service in Leicester and surrounding areas 2024



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Data: NHS Business Services Authority 2024, ONS mid-2020 population estimates

7.3 Locally Commissioned Services

These are services commissioned locally from community pharmacies to meet the needs of the population. Locally commissioned community pharmacy services can be contracted via a range of routes and commissioners including local authorities, Integrated care boards (ICBs) and local NHS England teams. Further details of locally commissioned services are available on: [Services and Commissioning : PSNC Main site.](#)

The following locally commissioned services are available across Leicester:

- Emergency Hormonal Contraception (EHC)
- Needle Exchange Service
- Supervised Consumption Service
- Naloxone Service
- H. Pylori C13 Urea Breath Test Service
- Palliative Care Service

Where available, data on the provision of locally commissioned services in Leicester has been provided below.

7.3.1 Emergency Hormonal Contraception (EHC)

There are two types of emergency contraception:

- i. The insertion of an intrauterine device up to 5 days after unprotected sexual intercourse. This can only be provided by a trained clinician and is available at GPs and the Integrated Sexual Health Service.
- ii. The provision of the oral emergency hormonal contraception pill. You need to take the emergency contraceptive pill within 3 days (Levonelle) or 5 days (ellaOne) of unprotected sex for it to be effective. Both are available from most GPs, the city's Integrated Sexual Health Service (including online), over the counter at most pharmacies (which must be paid for) and as a free scheme for Levonelle for under 25s at community pharmacies commissioned by Leicester City Council.

The aim of the service commissioned from community pharmacists is to reduce unintended pregnancy and improve sexual health through the provision of emergency hormonal contraception (Levonelle) to women under 24 along with advice and information relating to contraception, pregnancy testing sites and local sexual health services.

EHC was provided by 9 pharmacies in 2023/24. As shown in table 22 below, EHC has not been provided by pharmacies in the East or North West localities of Leicester in 2023/24. As shown in table 22, the locality areas in Leicester with the highest number of pharmacies providing EHC in 2023/24 were Central and West, with four pharmacies in both providing EHC. Over half (58%, 1133 of 2065) of consultations were provided

through city centre pharmacies. It is probable that young women prefer to access this service in the city centre where there is potentially a greater level of anonymity available.

Two community pharmacies accounted for around 70% of all EHC consultations in 2023/24:

- Riverside pharmacy in West locality (785 consultations, 38%)
- Boots Chemist in Highcross (638 consultations, 31%)

The service was also provided by 6 pharmacies located within 1.5km of Leicester City boundaries.

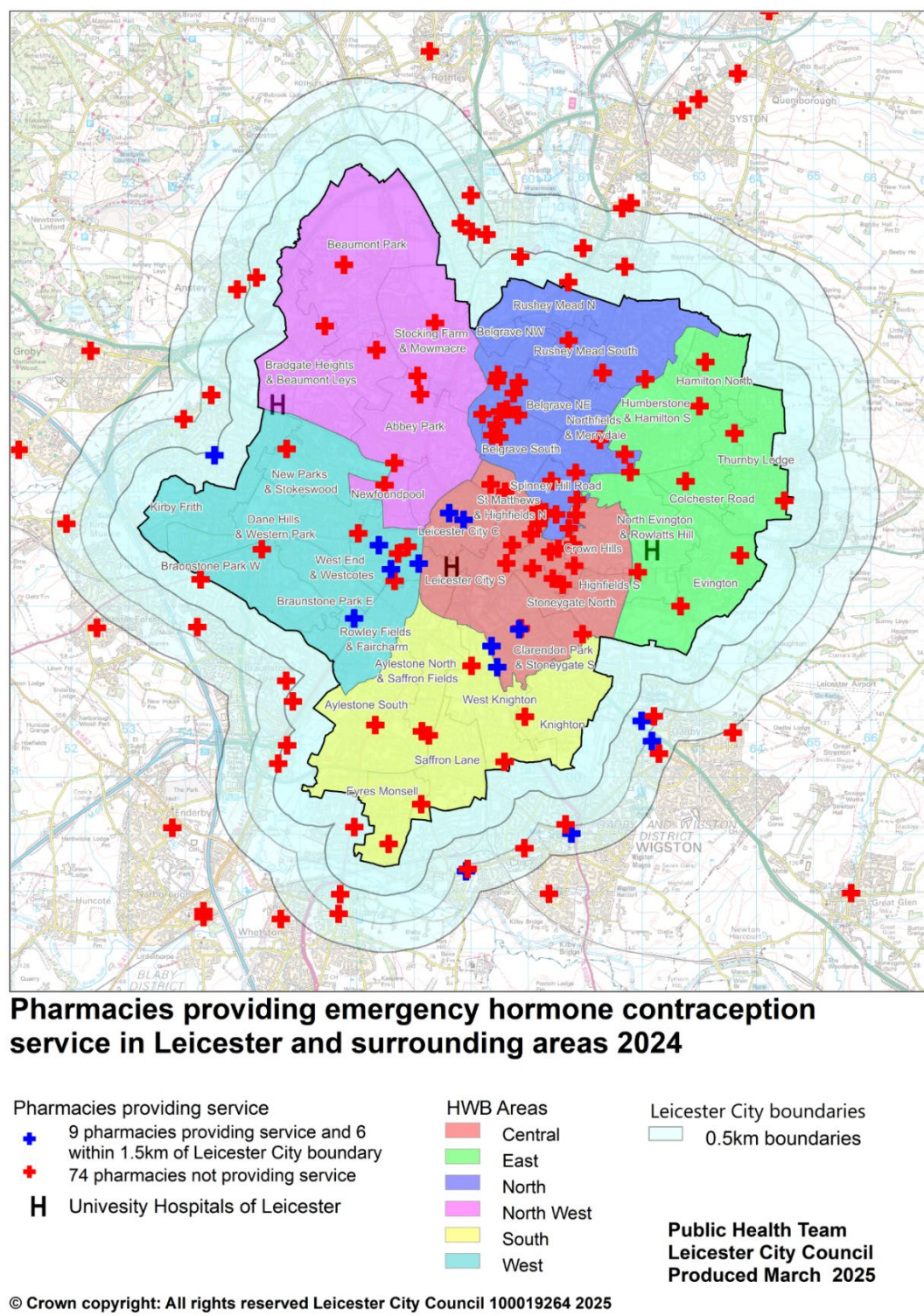
Table 22: Provision of Emergency Hormonal Contraception in Leicester pharmacies, 2023/24

HWB area	Number pharmacies offering service	Total Consultations	EllaOne Supply	Levonorgestrel Supply	Levonorgestrel Supply (2nd dose)	Medicine supply	Medicine Supply (2nd dose)	Total
Central	4	499	36	85	16	363	134	1133
South	1	33				33	8	74
West	4	402	189	107	51	95	14	858
East	0	0	0	0	0	0	0	0
North	0	0	0	0	0	0	0	0
North West	0	0	0	0	0	0	0	0
Leicester City	9	934	225	192	67	491	156	2065
Distance from Leicester boundary	Number pharmacies offering service	Total Consultations	EllaOne Supply	Levonorgestrel Supply	Levonorgestrel Supply (2nd dose)	Medicine supply	Medicine Supply (2nd dose)	Total
0-0.5km	1	185	0	64	0	121	0	370
0.5-1.0km	1	268	0	28	0	235	0	531
1.0-1.5km	4	119	0	25	0	94	0	238
Total within 1.5km	6	572	0	117	0	450	0	1139

Data: Pharm Outcomes and Pinnacle Health

Note: The now closed pharmacy in Evington did not provide any EHC in 2023/24 so the closure won't further impact residents who require this service.

Figure 24: Pharmacies accredited for Emergency Hormonal Contraception in and around Leicester 2023/24



Data: Pharm Outcomes

It should also be noted that emergency hormonal contraception (EHC) will be made available free of charge from community pharmacies in England, under an expansion to the Pharmacy Contraception Service. The EHC initiative will be launched in October of

this year, as part of the new Community Pharmacy Contractual Framework for 2024/25 and 2025/26. Full details are not currently known at the time of writing this document however some further information can be located at Community Pharmacy England.³⁴

7.3.2 C-Card Service

Some pharmacies provide a free and confidential sexual health service available to young people. The scheme was originally offered to people aged under 25 years but since removing the age limit, increasing numbers of over 25s are using the scheme. It is a plastic registration card that enables quick and easy access to free condoms. The service also offers information and advice about sexual health and relationships.

The C-card scheme is available across the city in local access points in schools, colleges, pharmacies and a range of other local services. As shown below in table 23 and figure 25, in Leicester, 20 pharmacies are signed up to deliver the C-Card scheme. Each locality area in Leicester had at least one pharmacy providing this service in 2023/24. The Central (7) and West (5) localities of the city had a higher number of pharmacies providing this service than other locality areas. Training and condom packs are supplied to participating community pharmacies by the Integrated Sexual Health Service.

In addition to pharmacies, there are other providers of the C-Card service. These include school nurses, GP practices, education institutions and CYP services. Throughout Leicester the service is provided by a further 43 locations. Table 23 shows a breakdown of these within the localities.

Table 23: Location of C-Card Service provision by locality area in Leicester, 2023/24

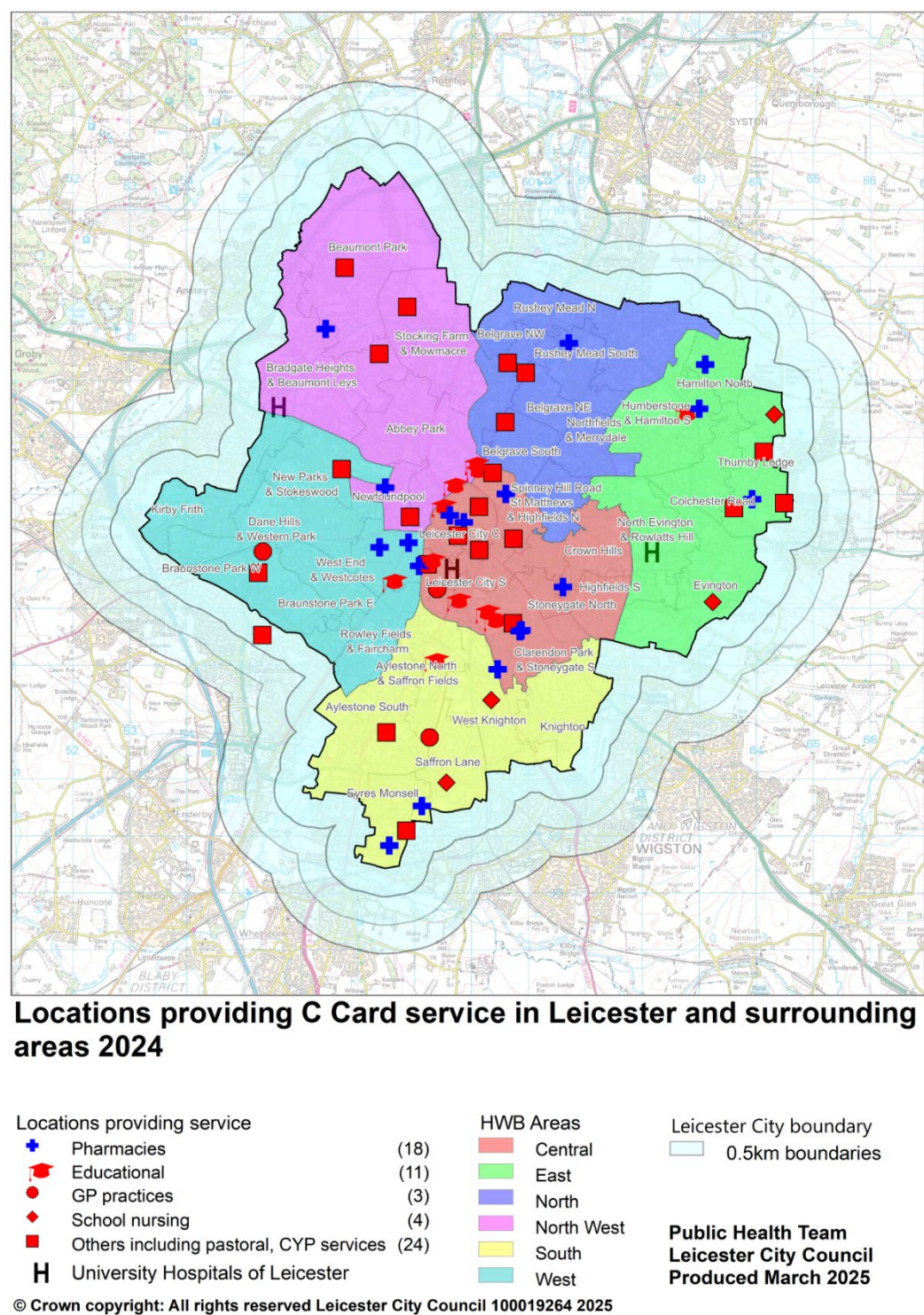
Locality	Pharmacy	Education institution	GP/NHS	School nurses	Other	Total
Central	7	6	3	0	6	22
East	3	1	1	2	3	10
North	1	0	0	0	3	4
North West	2	2	1	0	3	8
South	2	1	1	2	2	8
West	5	1	1	0	4	11
Total	20	11	7	4	21	63

Data: Midlands Partnership NHS Foundation Trust

Note: The now closed pharmacy in Evington did not provide C-Card service in 2023/24 so the closure won't further impact residents who require this service.

³⁴ [We're all community pharmacy](#)

Figure 25: Locations of C-Card service provision by locality area in Leicester, 2023/24



Data: Midlands Partnership NHS Foundation Trust

7.3.3 H. pylori breath test service

Helicobacter pylori (H. Pylori) is a type of bacteria that infects your stomach. It can damage the tissue in your stomach and the first part of your small intestine (the duodenum). This can cause pain and inflammation. In some cases, it can also cause painful sores called peptic

ulcers in your upper digestive tract. H. Pylori is common. Many people have it. Most people who have it won't get ulcers or show any symptoms. But it is a main cause of ulcers and can also lead to stomach cancer.

An H. Pylori breath test is the most common test for H. pylori. It measures the amount of carbon dioxide in your breath after you drink a special solution containing urea. H. pylori bacteria break down urea into carbon dioxide. Excess carbon dioxide in your breath is a sign of an H. pylori infection.

Table 24 shows north locality (5) and central locality have the most pharmacies providing H. Pylori breath test service. North West locality does not have any pharmacy providing the service. This service is only provided by LIPCO group pharmacies within Leicester City.

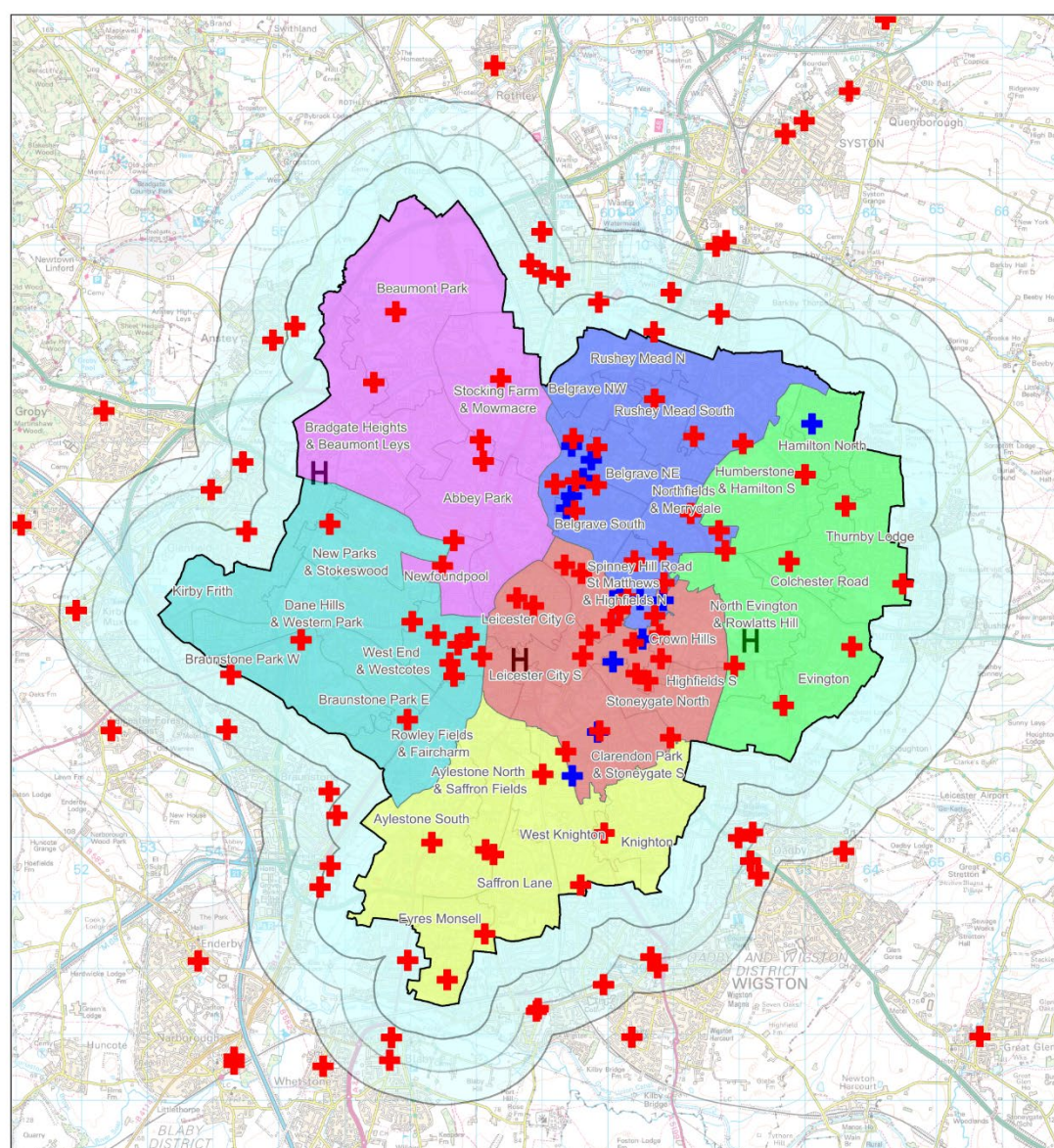
Table 24: H. Pylori breath test Service provision by locality area in Leicester, 2023/24

Locality	Number of pharmacies providing H.Pylori	Number of consultations provided	Population MYE 2022	Pharmacies providing H.Pylori per 10,000 population
Central	4	523	79,610	0.5
East	3	256	56,126	0.5
North	5	219	71,965	0.7
North West	0	0	51,926	0.0
South	1	18	50,201	0.2
West	1	75	63,571	0.2
Leicester City	14	1091	373,399	0.4

Data: LIPCO Healthcare.

Note: The now closed pharmacy in Evington did not provide any H. Pylori tests in 2023/24 so the closure won't further impact residents who require this service.

Figure 26: Pharmacy *H. pylori* breath test provision by locality area in Leicester, 2023/24



Pharmacies providing a H.Pylori breath test service in Leicester and surrounding areas 2024

- Pharmacies providing service
- 14 Pharmacies providing service
 - 69 Pharmacies not providing service
- H University Hospitals of Leicester

- HWB Areas
- Central
 - East
 - North
 - North West
 - South
 - West

- Leicester City boundary
- 0.5km boundaries

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Data: Midlands Partnership NHS Foundation Trust

7.3.4 Substance Misuse: Needle Exchange

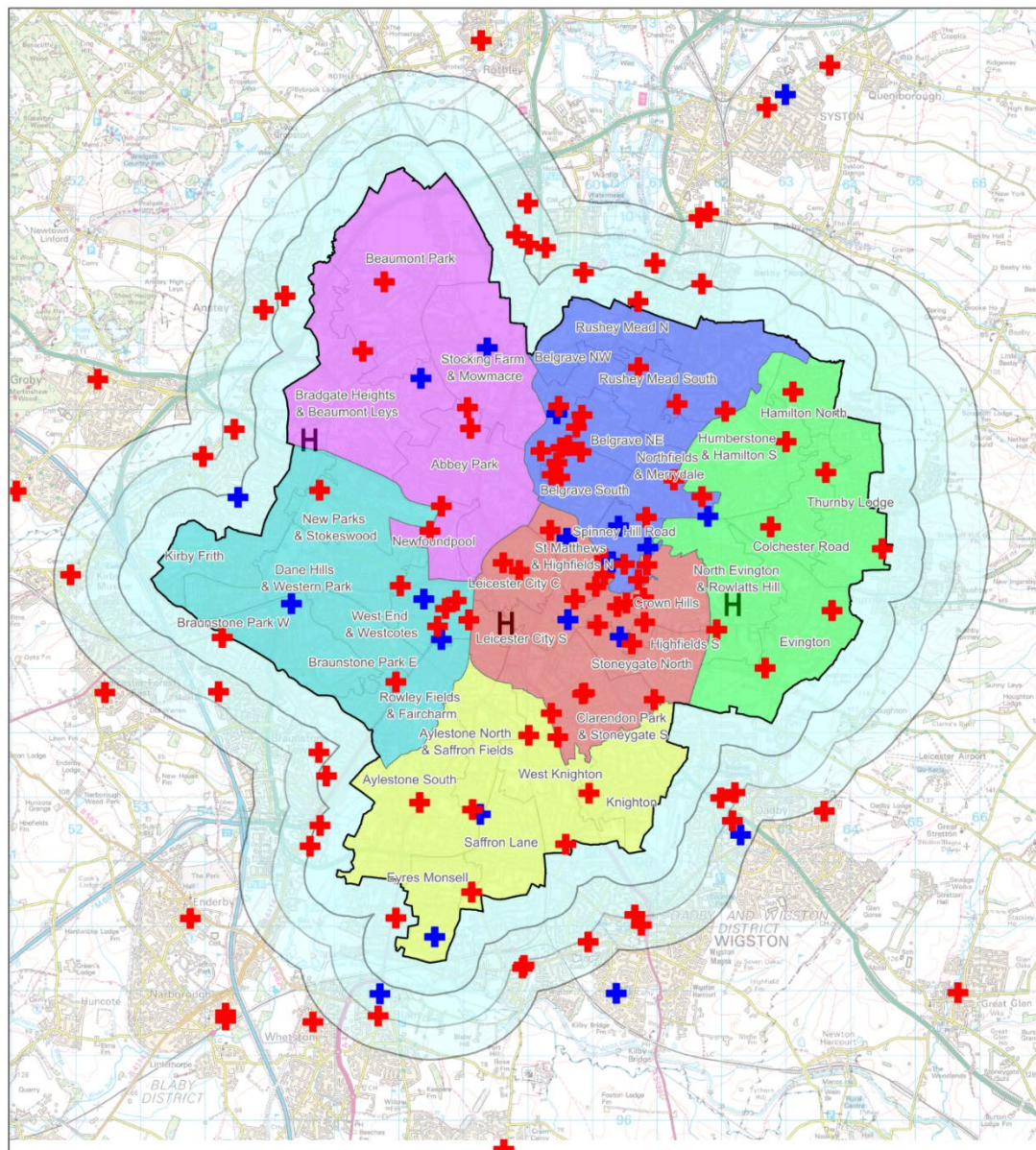
There are three services commissioned for the management of substance misuse; needle exchange, take home naloxone and supervised consumption.

Pharmacy needle exchanges aim to reduce the rate of sharing and other high-risk injecting behaviours by providing sterile injecting equipment and other support, as well as ensuring the safe disposal of used injecting equipment. Pharmacy needle exchange facilities are available to all adult injectors who are using drugs illicitly.

As of 2023/24 needle exchange services are offered at 18 pharmacies across the city and 3 within 1.5km of the boundary, as seen in the map below (figure 25).

Draft

Figure 27: Pharmacies accredited for Needle exchange services in Leicester in 2023/24



Pharmacies providing a needle exchange service in Leicester and surrounding areas 2024

Pharmacies providing service

- + 18 providing service and 3 more within 1.5km of Leicester Boundary
- + 65 not providing service

H University Hospitals of Leicester

HWB Areas

- Central
- East
- North
- North West
- South
- West

Leicester City Boundary

0.5km boundaries

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Data: Turning Point Substance Use service

Needle exchange services are offered at hubs and pharmacies in Leicester, pharmacy needle exchange services account for 87% of transactions in the city. Table 25 below shows the uptake of needle exchange services in pharmacies during April 2023-March 2024.

As shown in table 25, there were over 12,200 transactions for needle exchange services in pharmacies in Leicester in 2023/24. The highest uptake of the service is in the Central locality of the city, with over 7,150 transactions during the 12-month period. The lowest uptake is in the East of the city where there were 33 transactions for the same period.

Table 25: Pharmacy needle exchange service transactions by locality area in Leicester April 2023- March 2024)

Locality area	Number of pharmacies	Number of transactions
Central	4	7,206
East	1	33
North	3	486
North West	2	861
South	4	1099
West	4	2524
Leicester total	18	12,209
Distance from Leicester boundary	Number of pharmacies	Number of transactions
0.0 - 0.5km	1	1,135
0.5 - 1.0km	1	226
1.0 - 1.5km	1	0
Total within 1.5km Leicester	3	1,361

Data: Turning Point Substance Use Service

Note: The now closed pharmacy in Evington did not provide needle exchange service in 2023/24 so the closure won't further impact residents who require this service.

7.3.5 Substance Misuse: Supervised Methadone Consumption

Supervised consumption services are for drug users and aim to ensure compliance with the agreed treatment plan by;

- Dispensing prescribed medication in specified instalments
- Ensuring each supervised dose is correctly administered to the patient for whom it was intended (doses may be dispensed for the patient to take away to cover days when the pharmacy is closed)
- Liaising with the prescriber, named key worker and others directly involved in the care of the patient (where the patient has given written permission)
- Monitoring the patient's response to prescribed treatment; for example if there are signs of overdose, especially at times when doses are changed, during titration of doses, if the patient appears intoxicated or when the patient has missed doses. The pharmacist may, if necessary, withhold treatment if this is in the interest of

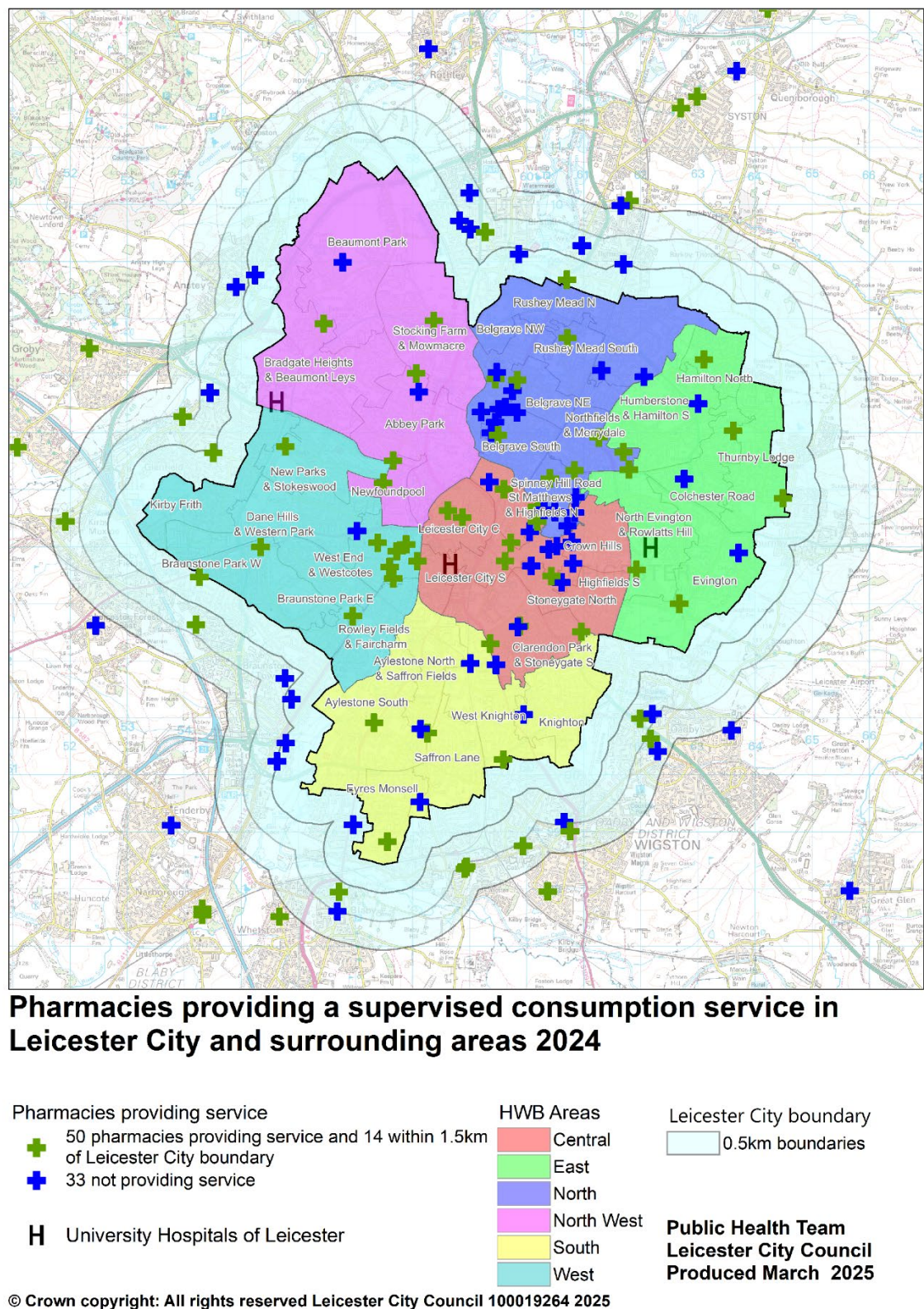
patient safety, liaising with the prescriber or named key worker as appropriate

- Improving retention in drug treatment
- To reduce the risk to local communities of:
 - Overuse or underuse of medicines
 - Diversion of prescribed medicines onto the illicit drugs market
 - Accidental exposure to the dispensed medicines

As of 2023/24 supervised consumption services are offered at 50 pharmacies across the city and 14 within 1.5km of the boundary, as shown in the map below (figure 28)

Draft

Figure 28: Pharmacies accredited for Supervised consumption services in Leicester in 2023/24



Data: Turning Point Substance Use Service

Table 26 below shows the uptake of supervised consumption services during April 2023-March 2024 in Leicester. There were over 82,150 dispenses within the service across pharmacies in the city. The highest uptake of the service is in the Central locality, with over 33,000 dispenses here during the 12-month period. The lowest uptake is in the East

of the city where there were just over 3,650 dispenses within the same time period. All locality areas of the city are represented by at least five pharmacies offering the supervised consumption service.

Note: The now closed pharmacy in Evington provided a total of 75 consultations in 2023/24. There is further provision of supervised consumption within the East locality, however this may mean residents having to travel further.

Table 26: Supervised consumption service dispenses by locality area (April 2023 –March 2024)

Locality area	Number of pharmacies	Number of transactions
Central	11	33,085
East	6	3,673
North	10	9,449
North West	6	11,167
South	8	7,686
West	9	17,109
Leicester total	50	82,169
Distance from Leicester boundary	Number of pharmacies	Number of transactions
0.0 - 0.5km	4	4,262
0.5 - 1.0km	4	2,211
1.0 - 1.5km	6	3,513
Total within 1.5km Leicester	14	9,986

Data: Turning Point Substance Use Service

7.3.6 Substance misuse: Take home Naloxone Service

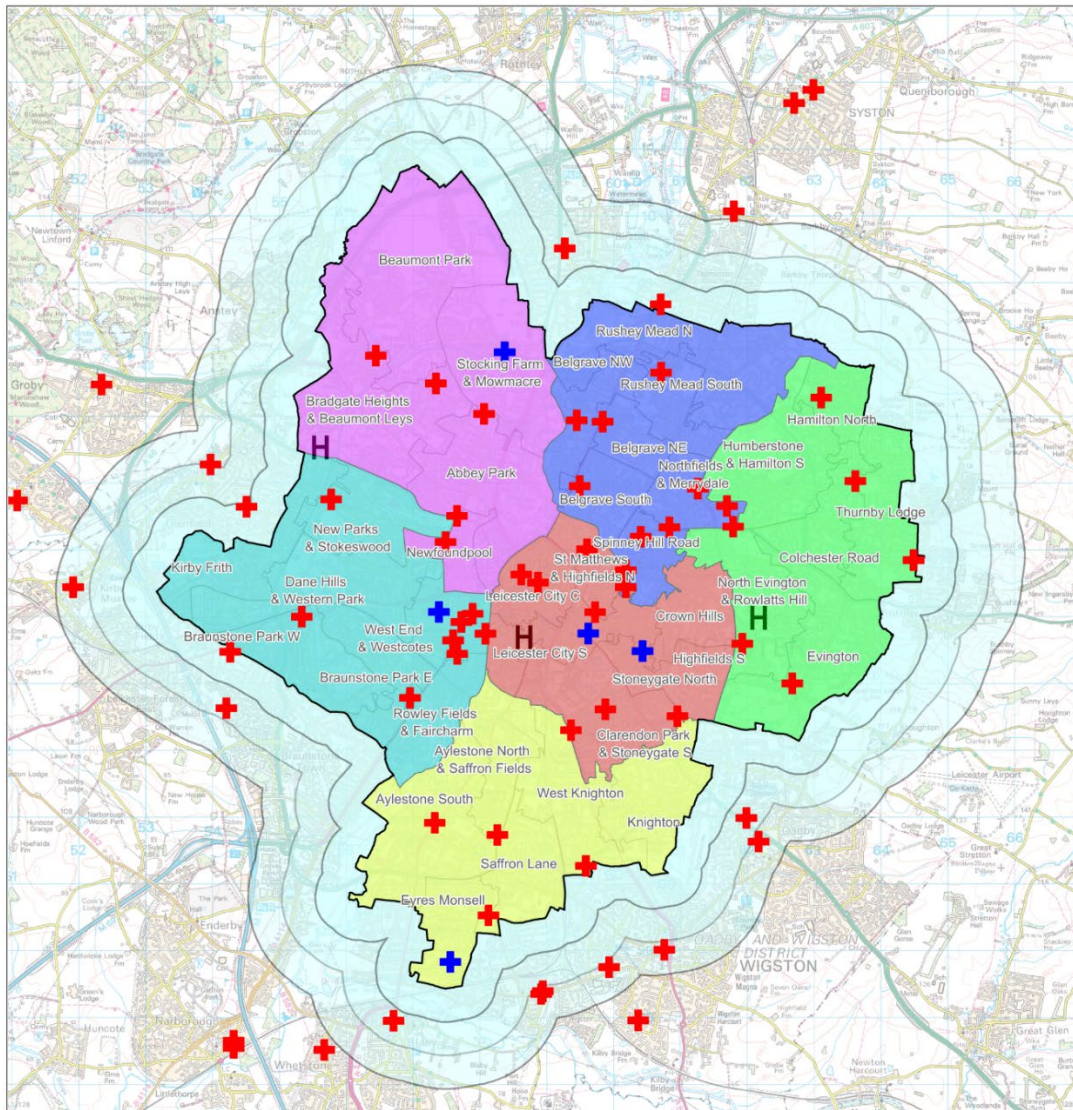
Naloxone is the emergency antidote for overdoses caused by heroin and other opiates or opioids (such as methadone, morphine and fentanyl). The main life-threatening effect of heroin and other opiates is to slow down and stop breathing. Naloxone blocks this effect and reverses the breathing difficulties. Naloxone is a prescription-only medicine, so pharmacies cannot sell it over the counter, but drug services can supply it without a prescription and anyone can use it to save a life in an emergency³⁵.

There were five community pharmacies providing take home naloxone services in 2023/24 in Leicester City, of which two were in the central locality area and one in each of the South, North West and West locality areas (table 28). There were no other community pharmacies providing naloxone services within 1.5km of the Leicester boundary.

It is noted that those pharmacies offering needle exchange or supervised consumption should also be offering naloxone and this is an area for further work.

³⁵ [Widening the availability of naloxone - GOV.UK](https://www.gov.uk/government/news/widening-the-availability-of-naloxone)

Figure 29: Pharmacies accredited for take home naloxone services in Leicester in 2023/24



Pharmacies providing take home naloxone service in Leicester and surrounding areas 2024

- Pharmacies providing service
- ✚ 5 pharmacies providing service
 - ✚ 73 pharmacies not providing service
 - H University Hospital of Leicester

- HWB Areas
- Central
 - East
 - North
 - North West
 - South
 - West

- Leicester City Boundary
- 0.5km boundaries

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Leicester City Council
Produced March 2025

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Data: Turning Point Substance Use Service

Table 27: Take home Naloxone service dispenses by locality area (April 2023 –March 2024)

Locality	Number of pharmacies providing naloxone service	Number of consultations provided	Population MYE 2022	Pharmacies providing naloxone service per 10,000 population
Central	2	245	79,610	0.3
East	0	0	56,126	0.0
North	0	0	71,965	0.0
North West	1	12	51,926	0.2
South	1	11	50,201	0.2
West	1	7	63,571	0.2
Leicester City	5	275	373,399	0.1
Distance from Leicester boundary	Number of pharmacies	Number of consultations provided		
0km to 0.5km	0	0		
0.5km to 1.0km	0	0		
1.0km to 1.5km	0	0		
Within 1.5km of Leicester	0	0		

Data: Turning Point Substance Use Service

Note: The now closed pharmacy in Evington did not provide any naloxone service in 2023/24 so the closure won't further impact local residents who require this service.

7.3.7 Palliative Care

The demand for palliative care drugs can be urgent and/or unpredictable. Although all pharmacies can be expected to meet the needs of their population with regard to routine supply of palliative care drugs, in some cases treatment needs to be accessed quickly and from a wider range of drugs than may be routinely stocked. A number of the drugs used in palliative care are rarely used in other circumstances and are therefore often not widely available in community pharmacies. The palliative care service ensures there is appropriate access to a range of palliative care drugs in accessible locations particularly in the out of hours period, and when treatment is needed urgently.

Selected pharmacies hold a stock of an agreed range of drugs used in palliative care. The pharmacist will provide information and advice to the user, carer and clinician. They may also refer to specialist centres, support groups or other health and social care professionals where appropriate.

There were five community pharmacies commissioned for the urgent supply of palliative care and specialised medicines in 2020/21 in Leicester City, of which two were in the Central locality area and one in each of the North, North West and West locality areas. Since October 2024 this service was provided by only 1 pharmacy for all of LLR, this pharmacy (Omcare

Late Night Pharmacy) is located in Leicester City within North locality.

Between October 2024 and March 17th 2025 a total of 77 end of life care medications had been delivered to patients within Leicester City.

7.4 Local Enhanced Service and National Enhanced Service (NES)

7.4.1 Covid Vaccination Service

In December 2020, the NHS commenced its Covid-19 vaccination programme. Since the start of the Covid-19 pandemic, over 1,500 community pharmacy sites have been vaccinating patients and health and care workers under a Local Enhanced Service against coronavirus alongside vaccination centres, hospitals and Primary Care Network (PCN) sites. Table 28 and figure 30 show that 27 pharmacies provided this service across Leicester in 2023/24. Each locality area within Leicester had at least two pharmacies providing this service. The locality area with the largest number of pharmacies providing this service, with seven pharmacies providing this service, was the South of Leicester. In 2023/24, a further 12 pharmacies provided this service within 1.5km of the Leicester city boundary.

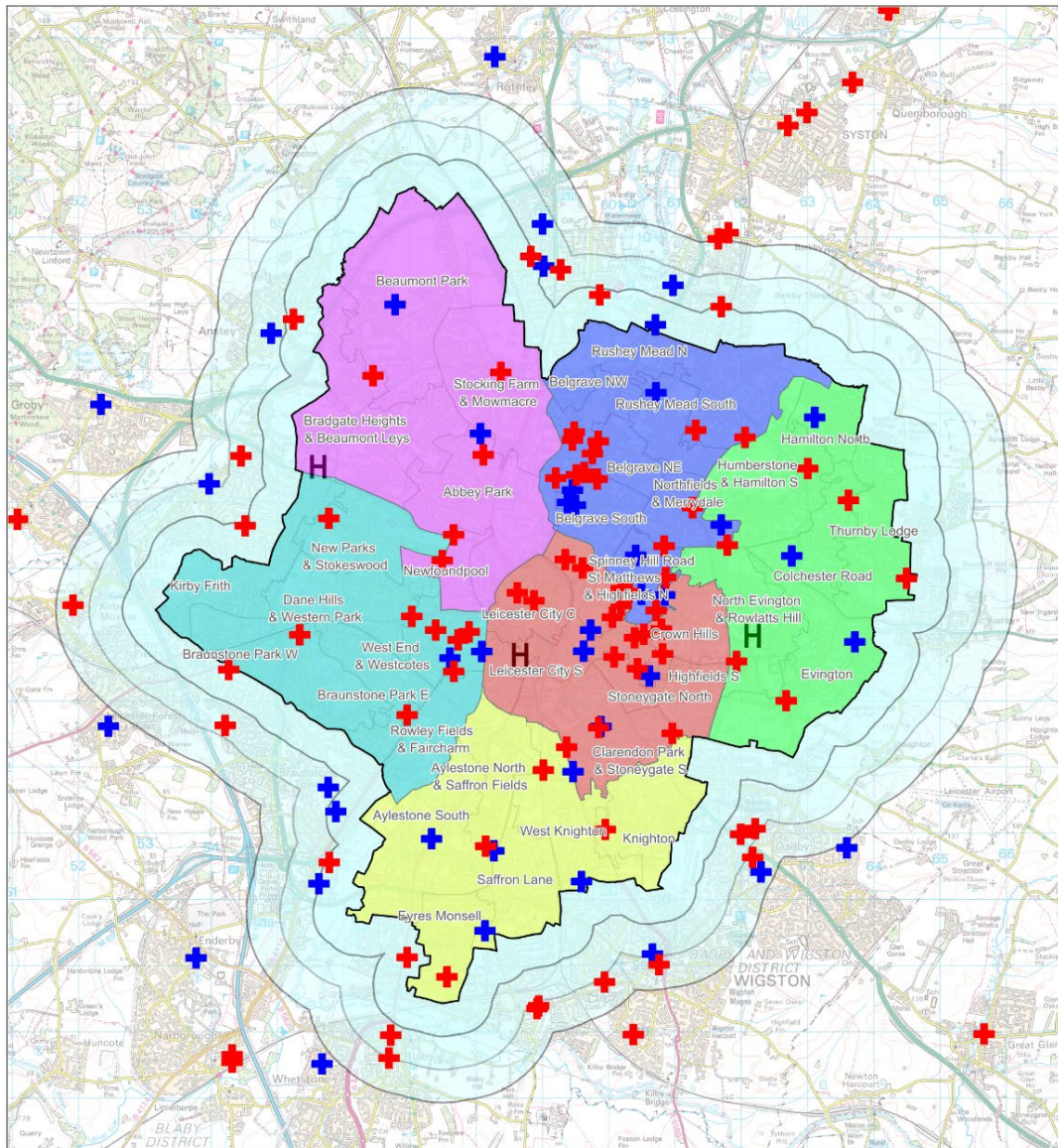
Table 28: Covid-19 Vaccination Service Provision by locality area (2023/24)

Locality	Number of pharmacies providing covid 19 vaccine	Number of consultations provided	Population MYE 2022	Pharmacies providing Covid 19 vaccine per 10,000 population
Central	4	1,513	79,610	0.5
East	5	6,343	56,126	0.9
North	6	11,208	71,965	0.8
North West	3	1,717	51,926	0.6
South	7	8,114	50,201	1.4
West	2	2,152	63,571	0.3
Leicester City	27	31,047	373,399	0.7
Distance from Leicester boundary	Number of pharmacies	Number of consultations provided		
0km to 0.5km	2	745		
0.5km to 1.0km	8	6,893		
1.0km to 1.5km	2	976		
Within 1.5km of Leicester	12	8,614		

Source: NHS England

Note: The now closed pharmacy in Evington did not provide any Covid-19 vaccinations in 2023/24 so the closure won't further impact local residents who require this service.

Figure 30: Pharmacies accredited for Covid-19 Vaccination Service, 2023/24



Pharmacies providing Covid-19 vaccination service in Leicester and surrounding areas 2024

Pharmacies providing service

- ✚ 27 Pharmacies providing service and 12 within 1.5km of Leicester boundary
- ✚ 56 Pharmacies not providing service

H University Hospitals of Leicester

HWB Areas

- Central
- East
- North
- North West
- South
- West

Leicester City boundary

- 0.5 km boundaries

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Leicester City Council
Produced April 2025**

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Source: NHS England

7.5 Conclusion

This section has described the elements of the Community Pharmacy Contractual Framework and provided information on the essential, advanced and locally commissioned services required or offered for delivery by community pharmacies.

Essential services are required as part of the NHS Community Pharmacy Contractual Framework and must be provided by community pharmacies working to this contract. The advanced services are defined in the NHS community pharmacy contractual framework, but pharmacies can choose to provide any of these services following appropriate training and or accreditation. Both types of services are overseen by NHS England.

The advanced services Community Pharmacist Consultation Service, Flu Vaccination service and New Medicines Services are provided by the majority of pharmacies. Only three pharmacies offer Stoma Appliance Customisation in Leicester with no service provided in out of city pharmacies within 1.5km, and there was no activity reported for Appliance Use Reviews or Hepatitis C Testing Service in Leicester or within 1.5km of the city boundaries..

Locally commissioned services have a more variable uptake by pharmacies and therefore the availability of these services varies across Leicester. For example, EHC is provided in four pharmacies in the Central and West locality areas of Leicester compared to no pharmacies in the North, North West and East of the city.

A number of factors influence the extent to which services are taken up for delivery by pharmacies. These include the need and availability of additional training required for staff, the assessment of the likely extent of take up of services by customers, practicalities such as the availability of facilities, referrals from GPs where these are necessary, and whether the payment provided by the commissioner is sufficient to cover costs.

Take up can also be inhibited by consumer behaviour. For example, around 70% of the take up of emergency hormonal contraception (including consultations, levonelle and levonelle 2nd dose) is in busy, more central and West pharmacies reflecting a likely preference by young women for a degree of anonymity less likely to be available in neighbourhood pharmacy locations closer to home.

The locally commissioned services provided are not necessarily the same in Leicester as in adjacent areas of the Leicestershire County. Some services are available from county pharmacies and not from Leicester pharmacies, and vice versa.

Pharmacies also provide from their own resources other significant free services directly to their patients. These are not commissioned by NHS England, LLR ICB or the Local Authority and instead are a direct arrangement between the pharmacy and patients. These services include the collection of prescriptions, and in most pharmacies the delivery of medicines, and the mainly free availability of monitored dosage systems. Such services are viewed as adding to the convenience, compliance and safety of medicine

collection and use. Some pharmacies also provide blood pressure measurement, educational sessions on self-care and making use of health services.

Since the addition of the Pharmacy First service in January 2024 there has been an increase in the overall number of first consultations for the 7 minor illnesses from around 16,00 in January to 2,500 in December 2024. The number of consultations is expected to increase further as more pharmacies implement the service and there is greater awareness within the public.

8. Projected future needs

8.1 Population growth

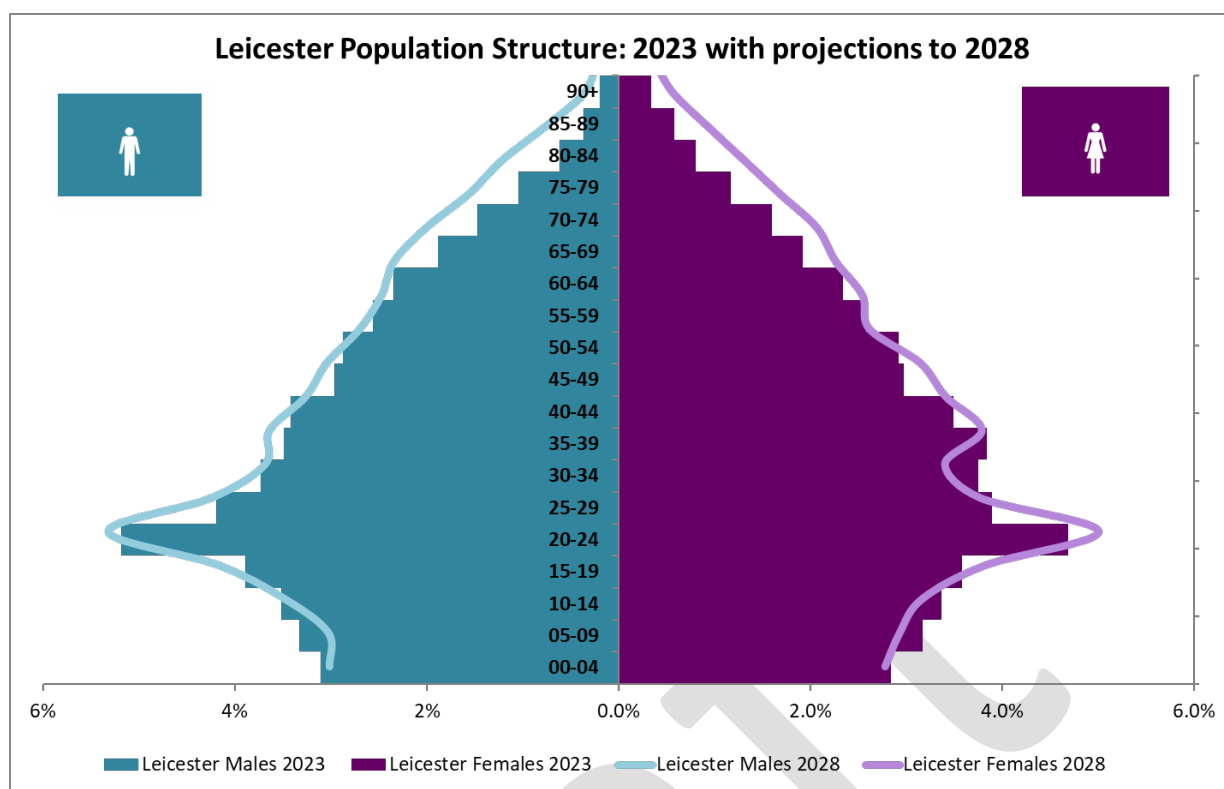
The Office for National Statistics (ONS) provide population projections based on births, deaths and assumptions of migration. The most recent projections for Local Authorities were based on 2018 mid-year population estimates, with annual projections to 2043.

Applying the ONS 2018* population projections to the latest mid-year estimates for 2023, suggests that by 2028, the population of Leicester is predicted to grow by around 7,300 to give a total population of around 387,100. Projections indicate that Leicester will have an increase of around 5,000 people aged 65 and over, which represents an increase in the proportion of the population aged 65 and over from 12% in 2023 to 13% in 2028.

With the current provision of 83 pharmacies in Leicester, this would offer a rate of 2.1 pharmacies per 10,000 population in 2028. The current rate in Leicester is 2.2, and nationally 2.1 per 10,000 population based on the numbers of pharmacies alone; it does not take into account variation in opening hours and services provided.

** Population projections from 2018 are the latest available at time of writing*

Figure 31: Leicester population structure census 2021 with projections for 2043



Data: ONS Population Projections – 2018, ONS mid-2023 population estimates

8.2 Growth in number of people with long term conditions

With these projected increases of around 5,000 in the older population, there will be increases in the numbers with long term health conditions. Table 29 below shows the increases in numbers aged 65 and over, based on the current prevalence of these conditions³⁶.

Whilst the current number of pharmacies will provide a rate of 2.2 per 10,000 based on population projections, the increase in the population size and number likely to have long term conditions will put additional pressure on pharmacies.

³⁶ Projecting Older People Population Information system (POPPI, 2025). <http://www.poppi.org.uk/>

Table 29: Estimates of numbers of over 65-year-olds in Leicester with longstanding health conditions, 2025-2030

Long term health condition	18-64s	2025	2030
Learning disability - baseline	2%	5,826	5,972
Learning disability - moderate or severe	1%	1,333	1,372
Learning disability - severe	0%	369	382
Impaired mobility	4%	10,244	10,226
Personal care disability which is moderate or serious	4%	9,186	9,190
Hearing impairment	8%	19,448	19,254
Mental Health problems: common mental health disorder	19%	44,016	44,946
Mental Health problems: borderline personality disorder	2%	5,592	5,710
Mental Health problems: antisocial personality disorder	3%	7,958	8,162
Mental Health problems: psychotic disorder	1%	1,641	1,678
Mental Health problems: two or more psychiatric disorder	7%	16,856	17,233
Higher risk of alcohol-related health problem	4%	9,547	9,741
Drug dependency	4%	10,253	10,736
Survivors of childhood sexual abuse	11%	26,650	27,183
Diabetes	3%	6,386	6,402
Stroke	0%	553	553
Total population 18-64		234,600	239,700

Data: Projecting Older People Population Information System (POPPI, 2025)

The number of 18-64 year olds is predicted to grow by around 2,500 between 2025 and 2028.

Table 30: Estimates of numbers of over 65 year olds in Leicester with longstanding health conditions, 2025-2030

Long term health condition	18-64s	2025	2030
Learning disability - baseline	2%	6,123	6,119
Learning disability - moderate or severe	1%	1,401	1,406
Learning disability - severe	0%	388	391
Impaired mobility	4%	10,766	10,477
Personal care disability which is moderate or serious	4%	9,654	9,416
Hearing impairment	8%	20,438	19,727
Mental Health problems: common mental health disorder	19%	46,257	46,050
Mental Health problems: borderline personality disorder	2%	5,877	5,850
Mental Health problems: antisocial personality disorder	3%	8,363	8,362
Mental Health problems: psychotic disorder	1%	1,725	1,719
Mental Health problems: two or more psychiatric disorder	7%	17,714	17,656
Higher risk of alcohol-related health problem	4%	10,033	9,980
Drug dependency	4%	10,775	11,000
Survivors of childhood sexual abuse	11%	28,007	27,851
Diabetes	3%	6,711	6,559
Stroke	0%	581	567
Total population 18-64		246,545	249,016

Data: Projecting Adults Needs Services Information System (PANSI, 2025)

8.3 Housing need and housing growth

The 2006 Leicester Local Plan covered the period 1996-2016 and made provision for 19,592 homes, 31% of which had to be allocated on green field land due to development constraints. The vast majority of these allocations have now been implemented or are committed to development.

The Strategic Growth Plan approved in 2018 provided a sub-regional development strategy to 2050. The purpose of this was that the council would seek to deal with around two thirds of its housing needs through the Local Plan and the remaining third would be distributed as unmet need across the county.

The Last Housing Needs Assessment of September 2022³⁷, found almost 18,000 affordable houses are required in the city 2036. The city council declared a Housing Crisis in November 2024

The new city Local Plan covers the period 2020-2036³⁸ and addresses the local housing need for 39,424 homes (2,464 per year over the period). About 21,000 homes will be delivered over the plan period within the city's boundaries. The remainder of around 18,000 homes which cannot be delivered in the boundary due to development capacity, could be accommodated within the city's constrained boundaries will depend on agreement with the Leicestershire district Councils.

For the 2023 Local Plan, 29% of development allocations are on green field sites such as Green Wedge, former allotment sites, public parks and open spaces.

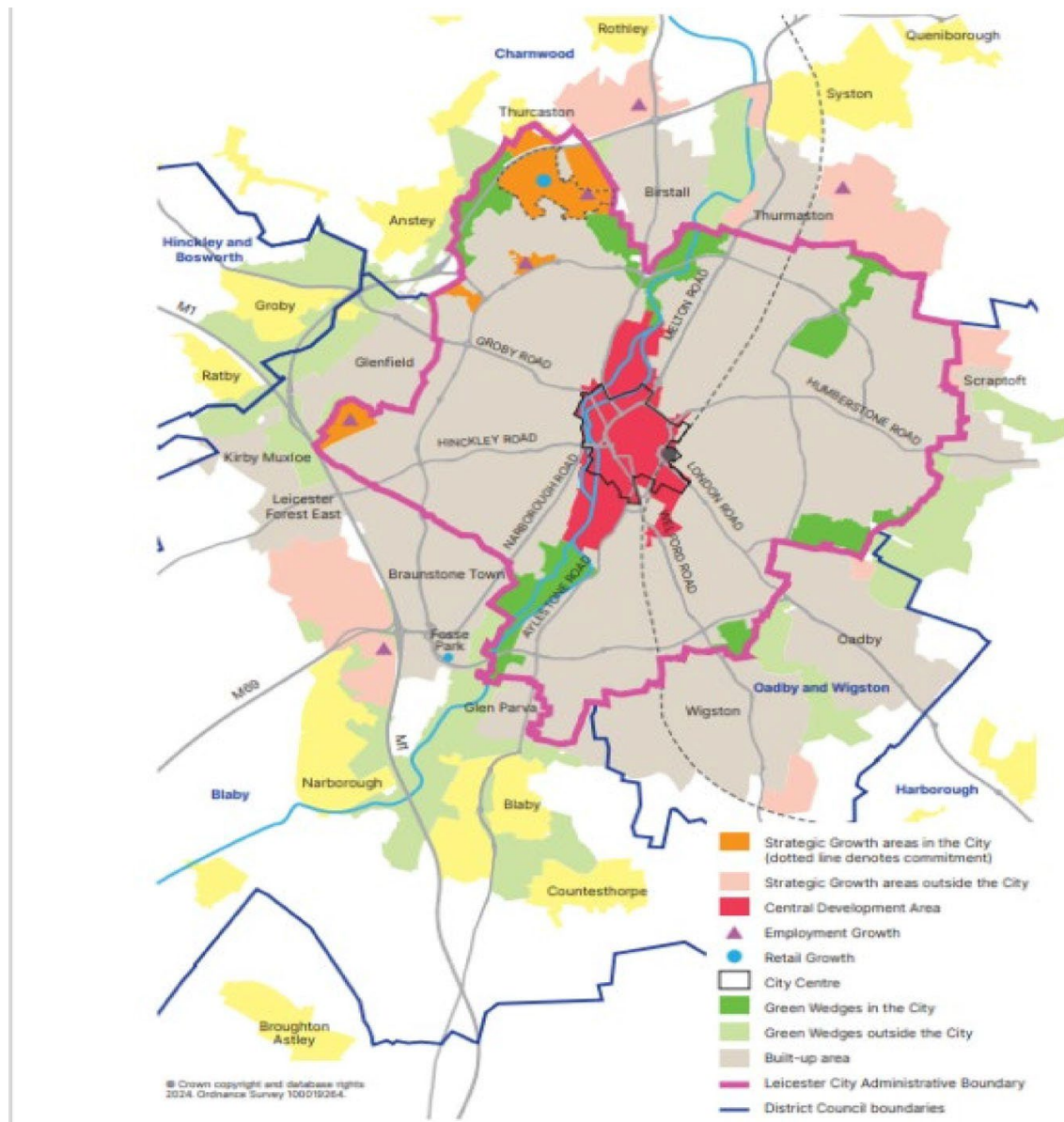
The map below from the Local Plan shows existing development of built-up area in light brown (within the city boundary) and pink where it extends beyond the boundary. Sites that are already approved or committed urban extension sites on the edge of the city are shown in orange. These areas within the city boundary include the north area of the Beaumont Park in the North of the city and Kirby Frith in the west.

In terms of pharmacy provision, there is a pharmacy located in Beaumont Park and one within around 1km of Kirby Frith in the County.

³⁷ [Leicester City Local Housing Needs Assessment Update Addendum 2022](#)

³⁸ [Draft City of Leicester Local Plan](#)

Figure 32: Map of growth areas in Leicester



Data: Local Government Re-organisation proposal March 2025

Proposed options for meeting housing need in the city include

- Prioritisation of new housing development on the brownfield sites in the central development area and attracting more people to live in the city centre
- Delivery of housing sites within the city as part of the Local Plan or that have current planning consents, including completion of the development at Ashton Green
- Development of new strategic locations for housing including former Western Park Golf Course, east of Ashton Green, Land north of the A46 bypass and land west of Anstey Lane.
- Re-modelling and improvement of sites in existing residential areas to increase housing supply and create more balanced communities
- Work with Council Districts to agree the distribution of housing need that cannot be met within the city

Table 31: Previous Housing Supply for Leicester City

Year	24/25	25/26	26/27	27/28	28/29	29/30	30/31	31/32	32/33	33/34	34/35	35/36	Total
Total Supply	2200	2389	1798	1660	1294	1339	1438	1331	1382	1317	1295	1160	18603

Source: Leicester City Council, Planning, Development and Transportation

The table below shows the estimated number of homes both committed and allocated for 2024/25 to 2027/28 by ward. Nearly 3,000 homes are projected in Castle ward, with around 750 in Abbey, nearly 500 in Beaumont leys.

Table 32: Projected homes by ward, 2024/25 to 2027/28

Ward	2024/25	2025/26	2026/27	2027/28	Total
Castle	803	897	809	445	2954
Abbey	148	337	164	109	758
Beaumont Leys	160	82	29	211	482
Saffron	107	103	43	0	253
Rushey Mead	78	50	27	0	155
Westcotes	94	15	0	25	134
Evington	0	53	50	9	112
Braunstone Park & Rowley Fields	67	26	0	0	93
Stoneygate	69	21	2	0	92
Belgrave	16	66	0	0	82
Eyres Monsell	0	35	45	0	80
Knighton	0	17	12	30	59
Fosse	40	11	0	0	51
Troon	30	19	0	0	49
Aylestone	40	1	0	0	41
Western	5	35	0	0	40
North Evington	23	2	0	0	25
Spinney Hills	5	0	0	16	21
Humberstone & Hamilton	0	3	2	0	5
Thurncourt	0	1	0	0	1
Grand Total	1685	1774	1183	845	5487

Data: Leicester City Council new housing trajectory 2024

9. Consultation

9.1 Statutory 60-day consultation:

There is a statutory requirement for each Health and Wellbeing Board to consult a defined number of bodies about the contents of the pharmaceutical needs assessment for a minimum of 60 days. The consultation will take place during June and July 2025 and results will be included in the final report.

9.2 Pharmacy questionnaire for local professionals:

In addition to the statutory consultation, a questionnaire was circulated to all community pharmacies in Leicester, to gain a better understanding of how they serve the local population.

As of 8th April 2025, 17 (21%) out of 83 pharmacies in Leicester City have responded to the pharmacy contractor questionnaire. A summary of responses is given below. A more detailed summary of responses can be found in the Appendix.

- 64% of pharmacies reported receiving between 1,001 and 25,000 over the counter enquiries per year.
- Pharmacies see an average of 32 consultations (range from 0 to 100 consultations) in the consultation room in an average week.
- 88% of respondents have a closed consultation area on the premises
- Just over a quarter (29%) of pharmacies have wheelchair ramp access, with 59% having large print labels/leaflets, 47% having dementia-friendly space and 18% having automatic door assistance. Other accessibility facilities were also provided across the 17 pharmacies, such as a disabled toilet facility (18%) and bell at the front door (35%).
- In addition to English, the most commonly reported languages spoken by pharmacy staff were Gujarati (94%), Urdu (65%) and Punjabi (53%). Other languages reported were 18% of respondents reported Arabic, Bengali (or Sylheti or Chatgaya) (12%), Portuguese, Tamil, French and Chinese and Polish were spoken (6%) as languages spoken by pharmacy staff.
- Relating to workforce, 82% of respondents use locum pharmacists and 33% of respondents use relief pharmacists.
- 18% of respondents agreed/strongly agreed that they had experienced recruitment difficulties for the role of community pharmacist, with 51% of respondents not having experienced recruitment difficulties for pre-registration pharmacist roles and mixed experiences in the extent of difficulties in recruiting other roles.
- Most respondents would be willing to provide NHS England, ICB and local authority commissioned services, especially with training and/or facilities provided.
- For the next year, just over half (35%) of respondents plan to expand their business by offering more services and 29% plan to continue operating to the

same level. More specifically, 35% plan to expand online pharmacy services in the next year, with 59% reporting they don't intend to expand these services.

- 83% of respondents report that the amount and location of pharmacies in a three-mile radius of their own pharmacy are 'excellent' or 'good' and 24% report as 'adequate'.
- Views on the range of services provided by pharmacies in a three-mile radius of their own pharmacy are slightly lower with 77% reporting 'excellent' or 'good', 24% reporting 'adequate' and no one reporting as 'poor'.
- Around half (47%) of respondents said that the increase of internet and distance selling pharmacies will impact their business and some have concerns that DSP's will result in closure of brick and mortar pharmacies.

*It should be noted at this point that a paper published in 2023 by Company Chemist Association said that there was evidence that the majority of Distance Selling Pharmacies (DSPs) are operating in breach of their NHS contracts. By only operating in small geographical areas, they are starving local community pharmacies, who are meeting their contractual obligations, of vital trade³⁹. See footnote at the bottom of this page for further details.

9.3 Pharmacy questionnaire for public:

A questionnaire was also circulated to the general public to review pharmacy provision in their area.

As of 5th May 2025, over 1,200 people had responded to the survey throughout Leicester, Leicestershire and Rutland and generally around half were satisfied with the advice they receive at their pharmacy (although this was around 80% in Leicestershire). There was also high proportion of respondents who reported it easy to locate a pharmacy, most people (around 80%) visited pharmacies in person and most were unlikely to use online services.

In Leicester City there were 160 respondents who had completed the survey. A summary of the responses is given below.

- Most respondents (52%) were very satisfied with the advice they receive about taking their medicines from the pharmacy/chemist, with a further 25% of respondents fairly satisfied.
- Quality of service, location, availability of medication and private areas to speak were the most important pharmacy services to respondents whilst prescription collection from their GP practice and physical accessibility to a pharmacist were also noted as important.
- Eighty percent of respondents agreed that their pharmacy provides a good service (47% strongly agree and 33% tend to agree).
- Almost three quarters of respondents agreed that if they wanted to, they could speak to a pharmacist at their pharmacy without being overheard (46% strongly

³⁹ [The impact of distance selling pharmacies](#)

agreed and 23% tend to agree).

- Of those with access needs relating to a physical disability (13% of respondents), 40% reported that these were always met, 25% reported that they were sometimes met, with 35% reporting that their pharmacy never met these physical access needs.
- Of respondents who help an adult family member or friend to use pharmacy services, 57% reported that their pharmacy always meets their needs as a carer and 30% indicated that their pharmacy sometimes meets their needs as a carer.
- Eighty-six percent of respondents were most likely to get their prescription medicine from a pharmacy/chemist's shop, with 96% of these respondents reporting that their usual one is based in Leicester.
- Most respondents usually travel to the pharmacy by walking (60%) or car (driver) (24%) and for the majority of respondents travelling to their usual pharmacy takes less than 15 minutes (84%).
- Responses highlight varied frequency of use of a pharmacy for a health reason from a few times a month (22%), once a month (49%), every two to three months (17%) to once or twice a year (10%).
- The majority of respondents (82%) most commonly use pharmacy services between 9am-6pm on weekdays, with 62% of respondents agreeing (29% strongly agree and 43% tend to agree) that the opening hours for pharmacy services meet their needs.
- When thinking about their usual pharmacy services, 76% of respondents found it easy to find an open pharmacy during the day, 30% found it easy (fairly or very) to find an open pharmacy in the evening (after 6pm) and 50% of respondents find it easy (fairly or very) to find an open pharmacy at the weekends.
- The majority of respondents (85%) were very likely to visit the pharmacy in person to access pharmacy services within the next three years but were not very likely or not at all likely to receive prescriptions by post (71%) or via online home delivery services (60%).

10. Analysis of gaps in service

As of 31 March 2024, Leicester has 83 pharmacies located across the City, including 6 distance selling pharmacies, there are no local pharmaceutical services. In the last PNA published 2022 there were 9 distance selling pharmacies and one local pharmaceutical service.

Overall Leicester has more pharmacies per head of the population than England (2.2 vs 2.1 pharmacies per 10,000 population).

Pharmacies and local populations:

There are more pharmacies in Central (21) and the North (19) locality areas of the city, with several closely located in Belgrave (around Belgrave Road) and another cluster around Spinney Hills towards Stoneygate. In the west of the city the pharmacies are more widely spread, although there are a number along the Narborough Road area In the West End.

Using locality area populations, the rate of pharmacies per 10,000 population ranges from 1.5 in the North West of the city to 2.6 in the North, South and Central areas of the city. Locality area populations have been used to give a crude indication of the local population, however, it is recognised that some residents may be closer to a pharmacy in a different locality area. But, as explained in the main body of the text above, locality areas provide some way of talking about geographical differences in a situation where pharmacies do not serve defined populations and where locations of pharmacies are, in a large part, historically based. Additionally, the population rates do not consider the number of hours the pharmacies are open, the size of the pharmacy or the number of whole-time equivalent staff. Opening hours per week per 10,000 locality area population range from 73.3 in the North West to 137.4 in Central locality within the city.

Access and travel times:

Access and travel times to pharmacies in Leicester appear to be reasonable based on travel time analysis. Leicester residents should be able to access their nearest pharmacy within a few minutes by car, although this may take longer at peak travel times. All residents will also be able to walk to their nearest pharmacy within 20 minutes, with 98% of residents able to walk to their nearest pharmacy within 15 minutes (this is an increase from 96% in the last PNA in 2022). It is difficult to show travel times by public transport as these will vary during the time of day and day of the week. However, based on a weekday morning, it shouldn't take more than 15 minutes to reach the nearest pharmacy. Travel analysis has only looked at travel times to a resident's nearest pharmacy and has not considered services offered or opening times. Residents may have to travel further for some services or to reach a pharmacy outside normal opening hours.

Opening hours:

All Leicester pharmacies are open for at least 40 hours per week. Around 40% (33) are open up to 50 hours per week and Leicester has 8 pharmacies classified as 100-hour pharmacies. With longer opening hours, pharmacies are able to offer more flexible access later in the evenings and on weekends. The 100-hour pharmacies are located in the West (3 pharmacies), Central (2), East (1), North (1) and South (1) locality areas of the city. There is lower provision for extended opening hours in the North West of Leicester, however, despite there being five 100-hour county pharmacies within 1km of the City border only 2 of these are close to the North (1) and the North West (1) of the city. The closure of a pharmacy within East locality in 2024 will also have an impact on provision for some services.

Essential services:

Essential services are provided by all pharmacies. All Leicester residents have access to a pharmacy within 20 minutes of their home, although some walk-times may be longer. There are fewer pharmacies in the North West of Leicester compared with the North and Central areas and opening times are generally shorter, however this does not imply inadequate provision.

Data regarding pharmacies providing a collection and delivery service shows that the vast majority do so, which to some extent may compensate, at least for patients with regular

medicines, for there being smaller numbers of pharmacists in certain parts of the city.

Advanced services:

There are eight advanced services which pharmacies may be accredited to offer. These include New Medicines Services, Appliance Use Reviews (AURs), Community Pharmacist Consultation Service, Flu Vaccination Service, Pharmacy Contraception Service (PCS), Pharmacy First Service, Hypertension Case-Finding Service, Stoma Appliance Customisation (SAC) and more recently the Smoking Cessation Service.

The advanced services Community Pharmacist Consultation Service, Flu Vaccination service and New Medicines Services are provided by the majority of pharmacies. Few pharmacies offer Stoma Appliance Customisation. No activity was reported for the Appliance Use Review (AUR) and only 2 pharmacies reported providing smoking cessation.

Locally Commissioned Services:

Locally Commissioned services are services commissioned by Local Authorities and Integrated Care Boards (ICBs) which can be tailored towards the health needs of the local population. Pharmacies can be particularly effective in providing services to underserved populations as they offer a walk-in service and do not require an appointment. They also offer valuable advice and support for people in making lifestyle choices and in managing their own health conditions.

The number of pharmacies offering the services below is reported at March 2024 where available.

Emergency Hormonal Contraception:

The number of pharmacies offering this service has remained the same as in the last PNA in 2022. At the end of March 2024, 9 pharmacies were offering this service. The majority of uptake is through the city centre and pharmacies in the west of the city. Whilst this is an area with a high number of young people, it is also likely that many young people choose to use this service at a more anonymous pharmacy in town rather than one that is close to their home.

C-Card

The C-card scheme is available across the city in local access points in schools, colleges, pharmacies and a range of other local services. In Leicester, 20 pharmacies are signed up to deliver the scheme across the city, this is an increase compared to 18 in the last PNA in 2022. Training and condom packs are supplied to participating community pharmacies by the Integrated Sexual Health Service.

Needle exchange:

Needle exchange services were provided by 18 pharmacies in Leicester in 2023/24 an increase from 14 in the last PNA. In the twelve months from April 2023 to March 2024 over 12,200 transactions were reported. This service is part of a wider scheme in helping individuals to manage and recover from substance misuse. The highest uptake of this service was in the centre of the city, with over 7,200 transactions here during the twelve

month period.

Supervised consumption:

Supervised methadone consumption was provided by 43 pharmacies across Leicester in 2021/22 this number has increased to 47 in 2023/24. As with needle exchange, this is part of a wider scheme in substance misuse harm reduction and recovery.

Take Home Naloxone

Take home naloxone was provided by 5 pharmacies within Leicester City in 2023/24. There were no pharmacies providing this service in the East and North of the City. This is a new service and no previous data is available from the last PNA for comparison.

Palliative care:

Five pharmacies provided palliative care services in 2020/21 this is now being provided by one practice within Leicester City for all patients within LLR. This service enables access to palliative care medicines and advice for patients during the last phase of their life.

Palliative care should be targeted towards areas with high-risk population, hospital discharges and those with respiratory problems. A review of the uptake of this service would provide information into how well this service is being used and with an ageing population, the potential for greater demand in the future.

11. Conclusions and Recommendations

This assessment looks at current provision of pharmacy services and concludes that overall provision of essential and advanced pharmacy services is adequate for the population of Leicester. The quality of services is monitored via quality visits to pharmacies and these provide assurance of pharmaceutical services for individual premises.

This PNA has reviewed the location and access to pharmacies for the residents of Leicester as at the end of March 2024. There are differences in local provision of services across the city and it may be that residents in some areas have to travel a little further to access a particular service or out of normal working hours. We have identified that there are gaps in service provision within North West and West localities in terms on number of pharmacies per 10,000 population and in terms of opening hours per week.

The PNA has given information showing which pharmacies provide advanced and locally commissioned services in addition to their essential services as at the end of March 2024. This includes services commissioned by NHS England, the ICB or Leicester City Council. Pharmacies may also choose to provide additional services directly of benefit to patients on a 'voluntary' basis.

Community based services offer a range of locally commissioned services to the local population that can be tailored to meet specific local healthcare needs. The uptake of some of these services has been included to give an idea of numbers, however, data is not available for uptake of services provided directly by pharmacies (ie not commissioned by the NHS, Local Authority or LLR ICB), so the PNA cannot assess whether the services adequately meet the needs of the population.

Pharmacies can provide a valuable service to patients, particularly underserved populations who can take advantage of a drop-in service at a time more convenient to themselves without the need for an appointment. It may also be more appealing to use a less formal environment within a pharmacy compared with the GP surgery.

11.1 Regulatory statements

It is a legislative requirement that PNAs are developed in accordance with the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013.1 Regulation 4 Schedule 1 of the 2013 regulations set out the minimum information to be contained in a PNA. Detailed below are the seven statements included in schedule 1.

Statement 1: current provision of necessary services

A statement of the pharmaceutical services that the health and wellbeing board (HWBB) has identified as services that are provided:

- *in the area of the HWBB and which are necessary to meet the need for pharmaceutical services in its area; and*

- *outside the area of the HWBB but which nevertheless contribute towards meeting the need for pharmaceutical services in its area (if the HWBB has identified such services)*

There is currently sufficient provision of pharmacies in Leicester City delivering essential pharmaceutical services. Currently there are 83 pharmacies in Leicester serving a population of 379,780 residents, of which six are distance selling pharmacies and five are 100-hour pharmacies. This equates to a rate of 2.2 pharmacies per 10,000 residents (or one pharmacy per 4,545 residents) which is greater than the England rate of 2.1 (or one pharmacy per 4761 residents)

This PNA has also considered 33 pharmacies which lie within 1.5 km of the Leicester City boundary as an approximation of pharmacies that are located within an acceptable range of access by foot, public transport or by car. Of these 27 are community pharmacies, 5 are 100-hour pharmacies and 1 is a distance selling pharmacy. Pharmacies located across the city boundary to the North West and West are able to serve residents in these areas where there are fewer pharmacies. Services provided by these pharmacies within 1.5 km of the city boundary are also considered within the PNA.

Statement 2: gaps in provision of necessary services

A statement of the pharmaceutical services that the HWBB has identified (if it has) as services that are not provided in the area of the HWBB but which the HWBB is satisfied:

- *need to be provided (whether or not they are located in the area of the HWBB) in order to meet a current need for pharmaceutical services, or pharmaceutical services of a specified type, in its area;*
- *will in specified future circumstances, need to be provided (whether or not they are located in the area of the HWBB) in order to meet a future need for pharmaceutical services, or pharmaceutical services of a specified type, in its area*

No gaps in the provision of essential pharmaceutical services across Leicester were identified in this PNA.

The PNA has considered population growth based on population projections and provision of pharmacy services. It is not currently possible to assess any future need for pharmaceutical services in terms of additional housing planned by local areas.

Statement 3: current provision of other relevant services

A statement of the pharmaceutical services that the HWBB has identified (if it has) as services that are provided:

- *in the area of the HWBB and which, although they are not necessary to meet the need for pharmaceutical services in its area, nevertheless have secured improvements, or better access, to pharmaceutical services in its area;*
- *outside the area of the HWBB and which, although they do not contribute towards meeting the need for pharmaceutical services in its area, nevertheless*

have secured improvements, or better access, to pharmaceutical services in its area;

- in or outside the area of the HWBB and, whilst not being services of the types described above, they nevertheless affect the assessment by the HWBB of the need for pharmaceutical services in its area*

An array of enhanced services are provided across Leicester and the PNA has considered services provided by pharmacies within 1.5km of the city boundary. Data on additional services provided by community pharmacies was sought via a pharmacy contractor questionnaire. There were 17 responses (out of 83, 21%) to this questionnaire. Knowledge of local services contracted directly by the pharmacies in Leicester is limited. It is recommended that the system collates information on all of the services provided by the pharmacies in Leicester as this will help to develop a better understanding of the wide range of services offered across the city. In turn this will enable the promotion of the services offered to local communities and inform plans to reduce health inequalities across the city.

Statement 4: improvements and better access, gaps in provision

A statement of the pharmaceutical services that the HWBB has identified (if it has) as services that are not provided in the area of the HWBB but which the HWBB is satisfied:

- would, if they were provided (whether or not they were located in the area of the HWBB), secure improvements, or better access, to pharmaceutical services, or pharmaceutical services of a specified type in its area*
- would, if in specified future circumstances they were provided (whether or not they were located in the area of the HWBB), secure future improvements, or better access, to pharmaceutical services, or pharmaceutical services of a specified type, in its area*

The majority of pharmacies provide enhanced services to Leicester residents. The advanced services Community Pharmacist Consultation Service, Flu Vaccination service and New Medicines Services are provided by the majority of pharmacies. Few pharmacies offer Stoma Appliance Customisation and a few pharmacies reported Appliance Use Review in the pharmacy survey. The Pharmacy First service implemented in January 2024, shows consultations carried out over 12 months from January to December 2024 increased over the period and are expected to increase further as the service extends over more pharmacies within Leicester. This will improve access to advice and medicines for minor illness without the need for a GP appointment and direct some healthcare away from GP Practice.

In addition, future commissioning of services planned for Autumn 2025, including contraception services will lead to further health improvements in accessibility of services for residents.

Statement 5: other NHS services

A statement of any NHS services provided or arranged by a local authority, the NHSCB, an ICB, an NHS trust or an NHS foundation trust to which the HWBB has had regard in its assessment, which affect:

- *the need for pharmaceutical services, or pharmaceutical services of a specified type, in its area; or*
- *whether further provision of pharmaceutical services in its area would secure improvements, or better access, to pharmaceutical services, or pharmaceutical services of a specified type, in its area*

As part of the PNA process, local authority commissioners, LLR ICB and local NHS England were consulted to produce an up to date list of additional pharmaceutical services provided across Leicester city.

Statement 6: how the assessment was carried out

An explanation of how the assessment has been carried out, and in particular:

- *how it has determined what are the localities in its area;*
- *how it has taken into account (where applicable)*
 - *the different needs of different localities in its area, and*
 - *the different needs of people in its area who share a protected characteristic; and*
- *a report on the consultation that it has undertaken.*

The scope of this PNA was to assess the pharmaceutical needs and service provision within Leicester city. The localities were selected as the Health and Wellbeing areas as used in the Health and Wellbeing Survey. These are groups of 3-4 middle super output areas and help to show variation across the city. An assessment of population health needs and pharmacy provision within these locality areas has been included in the PNA. Additionally, each pharmacy in Leicester was asked to complete a survey which included questions on facilities and aids that would assist individuals with a physical or mental disability in accessing the pharmacy premises and pharmacy services. A summary and results of 3 consultations (public consultation, pharmacy consultation and statutory 60-day consultation) are included in the PNA.

Statement 7: map of provision

A map that identifies the premises at which pharmaceutical services are provided in the area of the HWBB

A map is provided in chapter 6 (figure 12) which details the location of each pharmacy at a locality level and whether the pharmacy is a community pharmacy, distancing selling or 100-hour pharmacy.

11.2 Recommendations

Equity of service:

Leicester has a higher rate of pharmacies per 100,000 of population than is found in England overall. However, Leicester's pharmacies are not evenly distributed throughout the city. The reasons for this are historic and commercial. The result is that some areas of the city have clusters of pharmacies while in other areas coverage is more thinly spread,

and, working on the basis that people generally prefer to go to a nearby pharmacy, patients have a greater or lesser degree of choice, depending on where they live in the city. Equity in a service context can be viewed through the lens of access - can people physically get to the service? Take up - are there cultural, language or attitudinal barriers that may deter use? Outcome - do customers get the service they need and feel satisfied with that service?

It is recommended that NHS England (and where relevant Leicester City Council and Leicester, Leicestershire and Rutland Integrated Care Board) should:

- Work with NHS-England to review areas where there are fewer pharmacies, fewer services provided and lower opening hours to see how pharmacies can be incentivised to open new premises and improve equity of service. This is with particular reference to areas identified with lower provision in the North West and West localities. With there already being a reduced provision for the current population, future housing developments which are planned in these areas will add further pressure. Furthermore, due to the closure of a pharmacy in 2024 in East locality (Evington) and there being no cross-border provision nearby, this is a further area for considering opening of a new pharmacy.
- Monitor current and future plans of housing development within City to ensure future increases in demand are met with adequate provision.
- Keep regular, annual of review cross-city and county-border service provision to ensure uniformity of access and quality of service. It is acknowledged that many pharmacies provide a home delivery service which could help negate some gaps in delivery of medication in the areas previously mentioned, however, this does not fulfil provision of all services offered within the premises.
- Work with pharmacies and Local Pharmaceutical Committee to examine how equity issues can be addressed further. A review of service quality and uptake, including consideration of cultural and equalities needs could provide insight into the effectiveness of these local services.
- Work closely with Integrated Care Board and Primary Care Networks address digital literacy to improve access to services for all residents
- Consider the additional pressure on pharmacies due to the national pharmaceutical workforce shortage and work with pharmacies to mitigate the impact on service provision
- Encourage pharmacies to offer discretionary services in relation to local need.

Promotion of health and healthcare management:

It is recommended that NHS England (and where relevant Leicester City Council and Leicester, Leicestershire and Rutland Integrated Care Board) should:

- Ensure that the promotion of healthy lifestyles (Public Health) requirement of the

essential services contract is fulfilled (see section 4.1.1). The Community Pharmacy Contract Framework for 2025/26 requires a maximum of 2 national health campaigns and 2 ICB selected campaigns in 2025/26. Whilst NHS England retains responsibility for this area of the pharmacy contract, Local Authority Public Health and Leicester, Leicestershire and Rutland Integrated Care Board should work together to define campaigns relevant to the health needs of local populations to provide advice and support in reducing unhealthy behaviours and adopting healthier ones, and ensure these are carried out.

- Consider and encourage the opportunity to include and develop the role of pharmacies in commissioning strategies and through the Integrated Care System - particularly in relation to providing services which deflect work out of primary care general practice.
- Collate information on all the services (including those directly commissioned by pharmacies) provided in Leicester as this will help to develop a better understanding of the wide range of services offered across the city. In turn this will enable the promotion of the services offered to local communities and inform plans to reduce health inequalities across the city.
- Assess levels of uptake of advanced and locally commissioned services and follow-up low or high performers in order to share best practice.
- Keep under review the appropriateness of monitoring and quality visits to pharmacies, in addition to pharmacy self-assessment, to provide assurance of effectiveness and to promote service improvement.
- Communicate to pharmacies the importance of advertising which services are available at each location to promote and facilitate their use. Services provided by pharmacies can be found on individual pharmacy websites but advertising within the premises may encourage more take-up.
- Explore additional services that could be provided in pharmacies to relieve pressure on GP Practice (for example NHS Health Check Service, Hypertension case-finding)
- It is noted that not all pharmacies providing supervised consumption or needle exchange are offering naloxone. This is an area to be followed up with the provider.
- Consider how community pharmacy services can be integrated within neighbourhood models and approaches to improving healthcare. The ICB 5-year plan is looking to define system-wide workforce transformation and new ways of working through the development of new operating models and removal of potential barriers including definition of the place and neighbourhood offers to ensure the right care is available in the right places¹². Neighbourhood models can be tailored to meet local needs and health inequalities, working to improve outcomes for specific patient groups, providing evening and weekend access to care, including access to pharmacies through the Community Pharmacy Consultation Scheme.

- Consider the opportunities offered by Independent Prescribing Pharmacies (IPP) to play an increasing role in delivering clinical services in primary care. NHS-England and ICBs have developed the community Pharmacy Independent Prescribing Pathfinder Programme to enable a community pharmacist prescriber to support primary care and clinical services⁴⁰. IPP should be focused and commissioned to meet local needs as (neighbourhood approach)

Implications of Community Pharmacies Policy

It is recommended that NHS England (and where relevant Leicester City Council and Leicester, Leicestershire and Rutland Integrated Care Board) should:

- Review evidence of impact of policy and funding changes on services annually and report any findings to the Health and Wellbeing Board with appropriate advice.

Annual review of recommendations

- Provide an annual report to the Health and Wellbeing Board, on the impact of pharmacy services introduced since the review period assessed within the PNA (ie post April 2025). This will include a review of the impact of the new services implemented in the Autumn of 2025 as part of the additional elements of the Community Pharmacy Contractual Framework.

⁴⁰ [Community Pharmacy Independent Prescribing](#)

GLOSSARY OF TERMS

AUR	Appliance Use Review
BME	Black and Minority Ethnic
CBS	Community Based Services
CHD	Coronary Heart Disease
CKD	Chronic Kidney Disease
COPD	Chronic Obstructive Pulmonary Disease
CPCF	Community Pharmacy Contractual Framework
CVD	Cardiovascular Disease
EHC	Emergency Hormonal Contraception
EPACT	Electronic Prescribing Analysis and Costing
EPS	Electronic Prescription Service
GP	General Practitioner
GPhC	General Pharmaceutical Council
H. Pylori	Helicobacter Pylori
HLP	Healthy Living Pharmacy
HWB	Health and Wellbeing
HWBB	Health and Wellbeing Board
ICB	Integrated Care Board
ICS	Integrated Care System
IMD	Index of Multiple Deprivation
JHWS	Joint Health and Wellbeing Strategy
JSNA	Joint Strategic Needs Assessment
LCC	Leicester City Council
LLR	Leicester, Leicestershire and Rutland
LPC	Local Pharmaceutical Committee
LPS	Local Pharmaceutical Services
MDS	Monitored Dosage System
MSOA	Middle Super Output Area
MUR	Medicines Use Review

NHS	National Health Service
NHSE	National Health Service England
NMS	New Medicines Service
NRT	Nicotine Replacement Therapy
ONS	Office for National Statistics
PhAS	Pharmacy Access Scheme
PNA	Pharmaceutical Needs Assessment
PSNC	Pharmaceutical Services Negotiating Committee
POPPI	Projecting Older People Population Information System
RSPH	Royal Society for Public Health
SAC	Stoma Appliance Customisation
SCR	Summary Care Record
STP	Sustainability and Transformation Plans