



Agenda

Meeting: Health and Wellbeing Board

**Venue: The Grand Meeting Room, County Hall, Northallerton, DL7 8AD
(See location plan overleaf)**

Date: Friday 13th February 2015, at 10.30am

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Business

No	Agenda Item	Action	Document/P age Nos	Suggested Timings
1.	Apologies for Absence	To Note	-	
	<u>Standard Items</u>			
2.	Minutes of the meeting held on 26 November 2014	To Approve	1-7	
3.	Public Questions or Statements Members of the public may ask questions or make statements at this meeting if they have given notice to Jane Wilkinson of Democratic Services (<i>contact details below</i>) no later than midday on Tues 10 February 2015, three working days before the day of the meeting. Each speaker should limit themselves to 3 minutes on any item. Members of the public who have given notice will	To Note	-	

	<p>be invited to speak:-</p> <ul style="list-style-type: none"> at this point in the meeting if their questions/statements relate to matters which are not otherwise on the Agenda (subject to an overall time limit of 30 minutes); when the relevant Agenda item is being considered if they wish to speak on a matter which is on the Agenda for this meeting. 			
	<u>Strategy</u>			
4	Winter Pressures – A Collective Response - Covering report of the NYCC Corporate Director Health & Adult Services. A presentation will also be made at the meeting.		8 to 13	10.30-11.15
5.	Care Act 2014 – Report of the NYCC Corporate Director – Health & Adult Services. A presentation will also be made at the meeting.		14 to 17	11.15- 11.35
6	Strategy For Meeting The Needs of Children, Families and Adults With Autism in North Yorkshire 2015/2020 – Joint Report of the NYCC Corporate Director – Health & Adult Services and the Director of the Partnership Commissioning Unit.		18 to 75	11.35-11.50
	<u>Assurance</u>			
7	Pharmaceutical Needs Assessment – Report of the Director of Public Health for North Yorkshire		76 to 277	11.50-12.00
8	Update on North Yorkshire Clinical Commissioning Groups, Health & Adult Services, Children & Young People’s Services, District Councils Strategic Plan Refresh – Joint Report from NYCC, North Yorkshire CCGs and North Yorkshire District Councils.		278 to 303	12.00 -12.20
	<u>Information Sharing</u>			
9	Workshop Event – 25 March 2015 – Oral Report of the NYCC Corporate Director – Health & Adult Services			12.20-12.25

	<u>Other Items</u>			
10	Paediatric Services at the Friarage Hospital, Northallerton – Oral report of the Hambleton Richmondshire & Whitby CCG			12.25-12.40
11	Forward Work Plan/Work Programme		304 to 306	12.40- 12.45
12	Other business which the Chairman agrees should be considered as a matter of urgency because of special circumstances			

Barry Khan
Assistant Chief Executive (Legal and Democratic Services)

County Hall
Northallerton

Date: 5 February 2015

Notes:

- (a) Members are reminded of the need to consider whether they have any interests to declare on any of the items on this agenda and, if so, of the need to explain the reason(s) why they have any interest when making a declaration.

The relevant Democratic Services Officer or the Monitoring Officer will be pleased to advise on interest issues. Ideally their views should be sought as soon as possible and preferably prior to the day of the meeting, so that time is available to explore adequately any issues that might arise.

- (b) **Emergency Procedures for Meetings**

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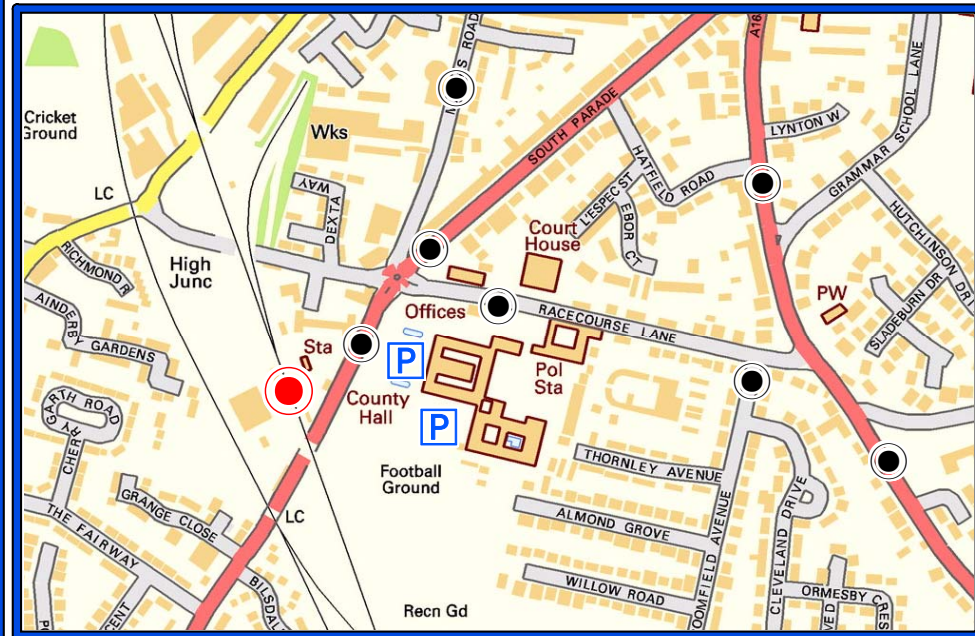
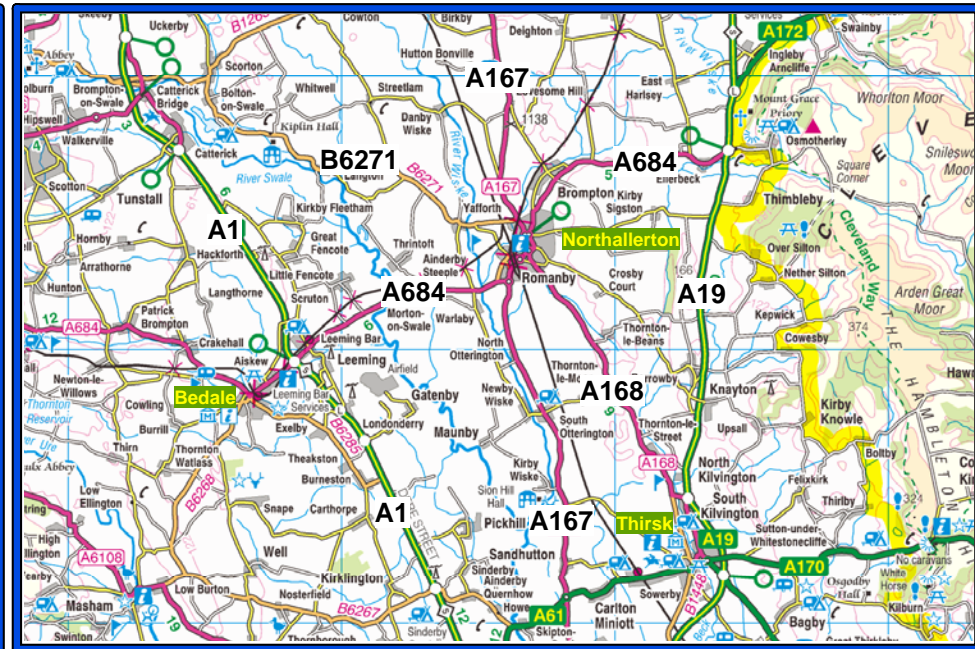
North Yorkshire Health and Wellbeing Board

Membership

County Councillors (3)		
1	HALL, Tony	Executive Member for Children and Young People's Services
2	WOOD, Clare (Chairman)	Executive Member for Adult Social Care and Health Integration
3	MACKENZIE, Don	Executive Member for Public Health and Prevention
Elected Member District Council Representative (1)		
4	BLACKIE, John	Richmondshire District Council Leader
Local Authority Officers (4)		
5	FLINTON, Richard	North Yorkshire County Council Chief Executive
6	WEBB, Richard	North Yorkshire County Council Corporate Director, Health and Adult Services (Statutory)
7	DWYER, Peter	North Yorkshire County Council Corporate Director, Children and Young People's Service (Statutory)
8	WAGGOT, Janet	Chief Officer District Council Representative
9	Dr. SARGEANT, Lincoln	North Yorkshire County Council Director of Public Health
Clinical Commissioning Group (5)		
10	Dr. RENWICK, Colin	Airedale, Wharfedale & Craven CCG
11	Dr. PLEYDELL, Vicky	Hambleton, Richmondshire & Whitby CCG
12	BLOOR, Amanda (Vice-Chairman)	Harrogate & Rural District CCG
13	Dr. HAYES, Mark	Vale of York CCG
14	COX, Simon	Scarborough and Ryedale CCG
Other Members (4)		
15	WARREN, Julie	NHS England NY & Humber Area Team
16	CARLISLE, Michael Sir	Chairman, HealthWatch
17	BIRD Alex	Voluntary Sector Representative
Co-opted Members (2) – Voting		
18	BARKLEY, Martin	Mental Health Trust Representative (Chief Executive, Tees, Esk and Wear Valleys NHS Foundation Trust – Mental Health Services)
19	CROWLEY, Patrick	Acute Hospital Representative (Chief Executive York Teaching Hospital NHS Foundation Trust)
Substitute Members		
	COULTHARD, Adele	Tees, Esk and Wear Valley NHS Foundation Trust
	ITA, David	Healthwatch
	TOLCHER, Dr Ros	Harrogate and District NHS Foundation Trust
	NEWTON, Debbie	Hambleton, Richmondshire & Whitby CCG

Notes:

1. The Health and Wellbeing Board is exempt from the requirements as to political balance set out in Sections 15-16, Schedule 1 Local Government Housing Act 1989
2. The Councillor Membership of the Board is nominated by the Leader of the Council. In the event that the number of portfolio holders responsible for health and well related issues increases, the additional portfolio holders will also be a Member of the Board.
3. All members of the Health and Wellbeing Board or any sub committees of the Health and Wellbeing Board are voting Members unless the Council decides otherwise.



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DL7 8AD

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North
Yorkshire County Council

North Yorkshire Health and Well-being Board

**Minutes of the meeting held on Wednesday 26 November 2014 at 10.30 am at
County Hall, Northallerton**

Present:-

Board Members	Constituent Organisation
<u>Elected Members</u>	
County Councillor Clare Wood (Chairman)	North Yorkshire County Council Portfolio Holder for Health and Adult Services
County Councillor Tony Hall	North Yorkshire County Council Portfolio Holder for Children and Young People's Services
County Councillor Don Mackenzie	North Yorkshire County Council Portfolio Holder for Public Health and Prevention
Councillor John Blackie	Elected Member - District Council Leader – Richmondshire District Council
<u>Local Authority Officers</u>	
Richard Flinton	Chief Executive – North Yorkshire County Council
Richard Webb	North Yorkshire County Council Corporate Director – Health & Adult Services
Peter Dwyer	North Yorkshire County Council Corporate Director - Children and Young People's Service
Dr Lincoln Sargeant	Director of Public Health North Yorkshire
Janet Waggott	Chief Officer District Council Chief Executive – Ryedale District Council
<u>Clinical Commissioning Groups</u>	
Debbie Newton (substitute)	Hambleton, Richmondshire and Whitby CCG
Richard Mellor (unnamed substitute)	Scarborough & Ryedale CCG
Amanda Bloor	Harrogate & Rural District CCG
Dr Colin Renwick	Airedale, Wharfedale & Craven CCG
Dr Mark Hayes	Vale of York CCG
<u>Other Members</u>	
Alex Bird	Voluntary Sector (North Yorkshire and York Forum)
Matt Neligan	NHS England
Sir Michael Carlisle	North Yorkshire Healthwatch Chairman
Adele Coulthard (Substitute)	Mental Health Representative (Chief Executive) Tees Esk & Wear Valleys NHS Foundation Trust

In Attendance:-

North Yorkshire County Council officers: Keith Cheesman, Ann Marie Lubanski, and Wendy Balmain (NYCC Health & Adult Services), Katie Needham (Public Health), Jane Wilkinson (NYCC Legal & Democratic Services), Janet Probert (Director of Partnerships Commissioning Unit).

County Councillor Carl Les and David Ita (Healthwatch)

Copies of all documents considered are in the Minute Book

78. Apologies for absence

Apologies for absence were submitted by Simon Cox (Scarborough & Ryedale CCG), Dr Vicky Pleydell (Hambleton, Richmondshire & Whitby CCG), Patrick Crowley & Dr Ros Tolcher (Acute Hospital Services) and Martin Barkley (Mental Health Services)

79. Minutes

Resolved–

That the Minutes of the meeting held on the 26 September 2014 be approved as an accurate record.

80. Public Questions or Statements

There were no questions or statements from the public.

81. “Growing up in North Yorkshire” Survey 2014

(The Chairman announced this item of business would be considered next)

Considered -

Presentation of the initial results of the Growing up in North Yorkshire 2014 Survey by Katharine Bruce (Lead Adviser, NYCC Children and Young People’s Service).

The 2014 survey results were a compilation of data collected from 255 primary schools, 41 secondary schools and 8 special schools. The findings represented the views of more than 16,000 pupils. The 2014 survey had increased the focus on risk taking behaviour, and had included questions on e-safety, use of e- cigarettes and healthy relationships. Key findings and emerging issues for pupils in Years 2,6,8 and 10 were highlighted. A copy of the slides used during the presentation is in the Minute Book.

The Board noted that participating schools would receive their own local analysis so that the findings could be incorporated into their school development plans.

The Board was advised that the data was available for use by partners and could be cut in any number of ways for example on a district, age or behaviour type basis. When requesting data, partners were advised to be precise as otherwise there was a danger they would be overwhelmed by the volume of the data they received.

Board Members were impressed by the comprehensiveness of the survey and particularly the results of successive surveys which they said provided a strong evidence base upon which to make decisions about future service provision.

Resolved -

That the presentation and information provided at the meeting be noted.

82. Improving Health Outcomes For Children and Young People

Considered -

The report of Pete Dwyer NYCC Corporate Director - Children and Young People's Service on progress of key work-streams for children and young people arising from the Health & Well Being Strategy, Children's Trust and the Safeguarding Children's Board. The report included updates on the following:-

- ◆ the launch of "Young and Yorkshire", the new Children and Young People's Plan;
- ◆ early analysis of the "Growing up in North Yorkshire" survey;
- ◆ progress with a strategy to improve the emotional and mental health of children and young people;
- ◆ progress on joint strategy for children and young people with autism;
- ◆ public health issues relating to children and young people including the commissioning of the Healthy Child Programme 5-19;
- ◆ the health of Looked After Children;
- ◆ implementation of the Children and Families Act;
- ◆ implementation of a Joint External Placement Panel.

It was reported that nationally children's and adolescents mental health services continued to be of concern and the subject of increased media coverage. Earlier that week the County Council had submitted two funding bids concerning children's mental health services.

The Board noted the positive progress made in reducing waiting times for autism diagnosis and assessment and looked forward to receiving further updates.

Councillor John Blackie (Leader, Richmondshire District Council) highlighted the crisis of retaining young people and families within rural areas and the sustainability of rural communities when distribution of funding for public services was based on population numbers.

Resolved -

That the Health & Well-Being Board-

- (a) supports and, where appropriate, will challenge joint progress made against key relevant elements of the children and young people's agenda;
- (b) approves the Children and Young People's Emotional and Mental Health Strategy as a key chapter in the development of an all age mental health strategy.
- (c) supports greater integrated commissioning towards full delivery against that strategy;

- (d) asks partners to actively engage in new national opportunities to pilot more integrated commissioning which will enhance the emotional and mental health of young people;
- (e) endorses the priority given to enhancing speech and language therapy services and asks for further details of the implementation of recommendations arising from jointly commissioned work to be brought to the Board.
- (f) encourages all partners to actively prioritise key workstreams which will enhance transition arrangements for children and young people with additional needs;
- (g) endorses the development of mechanisms eg the External Placements Panel, which seek on a partnership basis to pool resources and support young people through wherever possible high quality local provision;

83. Update on the North Yorkshire Alcohol Strategy and Implementation Plan

Considered -

The report of Dr Lincoln Sargeant, Director of Public Health for North Yorkshire inviting the Board to approve and sponsor the North Yorkshire Alcohol Strategy and Implementation Plan. Dr Sargeant said that the Strategy set out a five year vision to reduce the harm caused by alcohol.

In response to comments made by Members, Dr Sargeant agreed to include in the list of vulnerable groups 'older people' so that social marketing could be targeted at the right audience. He concurred that a framework was needed in order to evaluate outcomes and the overall success of the Strategy. To this end Dr Sargeant said he would task the Steering Group to develop an outcomes framework that would form the basis of an annual report to the Board.

Resolved -

That the North Yorkshire Alcohol Strategy and Implementation Plan is approved by the Health & Well Being Board.

84. Winterbourne Update

Considered -

A joint report from Anne Marie Lubanski, NYCC Assistant Director Adult Social Care and Janet Probert, Director of Partnership Commissioning on progress implementing the requirements of the Winterbourne Concordat.

The Board was advised that in North Yorkshire good progress had been made against the requirements of the Concordat and that a further update would be provided at the February 2015 meeting.

Resolved -

- (a) That the content of the report is noted.

- (b) That Members of the Health and Wellbeing Board will continue to promote integrated multi-agency working on the Winterbourne Agenda and supports the Joint Commissioning Plan.
- (c) That a further update report on the Winterbourne Agenda be referred to February 2015 meeting of the Health and Wellbeing Board.

85. Governance Update

Considered -

The joint report of Amanda Bloor, Vice Chairman and Richard Webb, NYCC Corporate Director Health & Adult Services updating the Board on progress made reviewing governance arrangements.

Richard Webb, NYCC Corporate Director – Health & Adult Services thanked Board Members for their contributions and for participating in the review. The feedback received indicated that there was strong support for the Integrated Commissioning Board to be re-launched as the North Yorkshire Delivery Board (NYDB) and to hold two informal development workshops in addition to the four formal meetings of the Board. He referred Members to the diagram at appendix 1 of the report which defined the proposed relationships between the Board and other key groups.

The Chairman referred to the proposal to develop a provider forum and asked if this would require additional resources. The Board was advised that the intention was not to hold extra meetings but to instead make better use of the time already spent meeting with health and social care providers.

Assurances were given that membership of the Board would not be affected by the proposals arising from the review and that representation on the Delivery Board would be determined following discussions with relevant partners.

Members endorsed the approach outlined in the report and agreed to hold the first of the two informal workshops on the morning of 25 March 2015 at a venue to be agreed.

Resolved -

That the North Yorkshire Health and Well-Being Board will hold four public meetings in 2015 and two informal development workshops.

That the North Yorkshire Health & Well-Being Board will hold the ring on progress developing the refreshed Joint Health & Wellbeing Strategy and that it delegates responsibility for delivery plans to the North Yorkshire Delivery Board.

That the North Yorkshire Health & Well-being Board will give a view on or coordinate activity around work it is required to do such as system resilience, Winterbourne, but that these should only be adopted where other mechanisms for assurance are not in place or where the North Yorkshire Health Well-Being Board is required as system leader to have oversight.

That the North Yorkshire Health & Well-Being Board will give consideration to rotating meetings at different locations, including County Hall, to increase the Boards visibility across the county.

That a North Yorkshire Delivery Board (NYDB) is established to manage delivery of North Yorkshire Health & Well-Being Board priorities as set out in the refreshed Joint Health & Wellbeing Strategy.

That the North Yorkshire Delivery Board will meet quarterly and include representation from existing Integrated Commissioning Board members and additionally the Independent Care Group, District Council, VCS and Police.

That the North Yorkshire Delivery Board may delegate work to task groups as needed but that there should be a lead sponsor in place for each priority area identified in the Joint Health & Wellbeing Strategy and that this should be shared across organisations to build ownership of joint business and balance capacity. The sponsor will have responsibility for ensuring progress reports are available to the North Yorkshire Health & Well-being Board in line with a forward plan.

That a bi-monthly commissioner forum is established to enable the development of system wide strategic commissioning and alignment of local and county commissioning plans.

That membership of the commissioner forum will include five Clinical Commissioning Group Chief Officers, NYCC Corporate Director – Children & Young People’s Services and NYCC Corporate Director - Health and Adult Services. Other senior officers to attend as required.

A provider forum to be established that is able to share intelligence and reality check key ideas to inform system redesign

86. Better Care Fund

Considered -

The report of Keith Cheesman, NYCC Interim Health and Well Being Manager on the outcome of the National Consistent Assurance Review of the North Yorkshire Better Care Fund Plan.

The report also outlined the next steps in the Assurance Process and provided details of the Implementation Plan and arrangements for the Better Care Fund, together with clarification of how these details related to existing work such as the Governance Review.

Resolved -

- (a) That the final version of the revised North Yorkshire Better Care Fund Plan be agreed and re-submitted on 28 November 2014.
- (b) That a Risk Sharing Agreement be prepared, together with a plan for its completion.
- (c) That an Implementation Plan is prepared and agreed.

87. Mental Health Concordat

Considered -

The Board received an oral progress report from Janet Probert, Director of Partnership Commissioning.

The Board noted that North Yorkshire was the fourth area in the Country to have signed up to the Mental Health Crisis Care Concordat (copy available on the County Council's website). Partners were fully committed to improving local provision and met regularly to ensure there was a consistent approach across the county.

Noted

88. Forward Work Plan/Work Programme

Considered -

Members were invited to comment upon and approve the content of the Board's future work programme.

Councillor John Blackie referred to recent national media coverage criticising a reduction in the number of in-patient mental health beds. He referred to concerns he had expressed at previous meetings about local provision and said he looked forward to a report on the Mental Health Strategy at the Board's next meeting. In response Richard Webb, NYC Corporate Director – Health & Adult Services said that work on the Mental Health Strategy was continuing but it was more likely to be May before the report was ready rather than February.

Resolved -

That the content of the Forward Plan be noted and approved and decisions made during the meeting and recorded in the Minutes incorporated.

The meeting concluded at 4.00pm

JW

NORTH YORKSHIRE HEALTH AND WELLBEING BOARD

Winter Pressures – A Collective Response

13th February 2015

1. Purpose

- 1.1 This paper outlines some of the recent issues affecting the North Yorkshire health and care system in preparation for a presentation to be made to the Board about the system response to safely manage increased demand and capacity through winter.
- 1.2 The presentation will be jointly delivered by North Yorkshire County Council Health and Adult Services, Clinical Commissioning Groups and NHS Trusts operating across North Yorkshire.

2. Background

- 2.1 In common with many other areas in the country, there have been increasing issues with volumes of people using A&E and Ambulance services within the County. Compounding pressures experienced locally and nationally by the NHS, social care is also experiencing increased demand for services that help people return from hospital quickly and safely. This was exacerbated locally with two domiciliary care providers, operating in North Yorkshire, withdrawing services at short notice.
- 2.2 Across all services, there have been high levels of sickness among staff affecting delivery of services, although it is of note that staff across all agencies have 'gone the extra mile' to make sure that people continue to receive a good service.
- 2.3 Acute and residential care bed capacity has been further constrained by instances of Norovirus and D&V. Recent NHS observation is of increased attendance with multiple and complex needs from the 0-4, 17-29 and 70+ age groups, with pneumonia and respiratory tract infections featuring.
- 2.4 A brief chronology of key events is set out below.

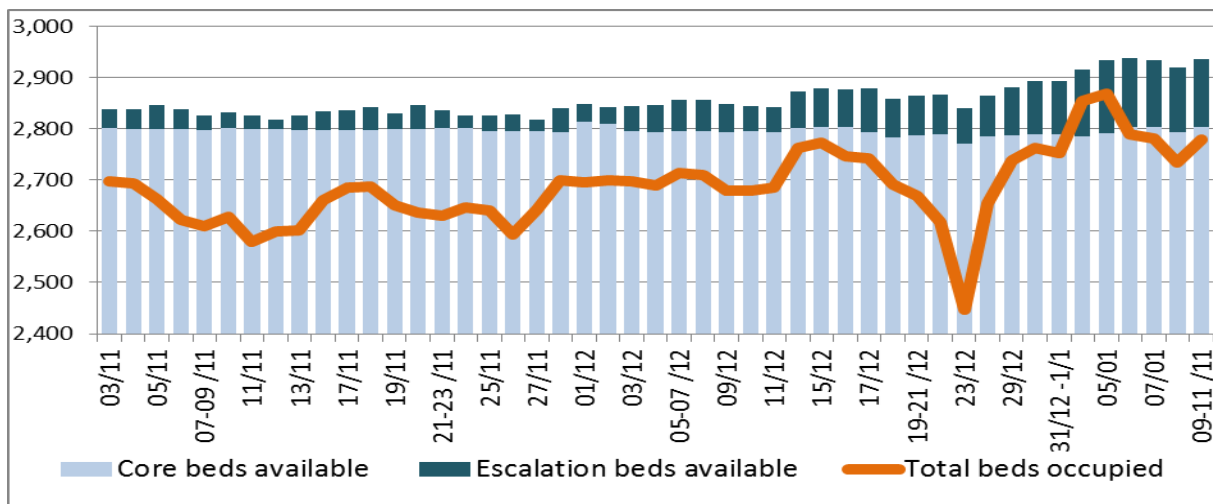
24 th November	Care provider operating in Selby reduced domiciliary care capacity.
12 th – 14 th December	Acute bed occupancy begins to rise
16 th December	A second care provider which provided 32 packages of care in NY (including 18 private funders) went into administration
18 th December	The emergency Silver Command, coordinated by NHS England and Bronze Command processes put into place
5 th January	Major incident declared at Scarborough

	General Hospital
7 th January	Scarborough Hospital major incident status removed
8th January	Urgent & Emergency Care Summit held to review key learning
16 th January	Bronze / Silver Command processes stood down

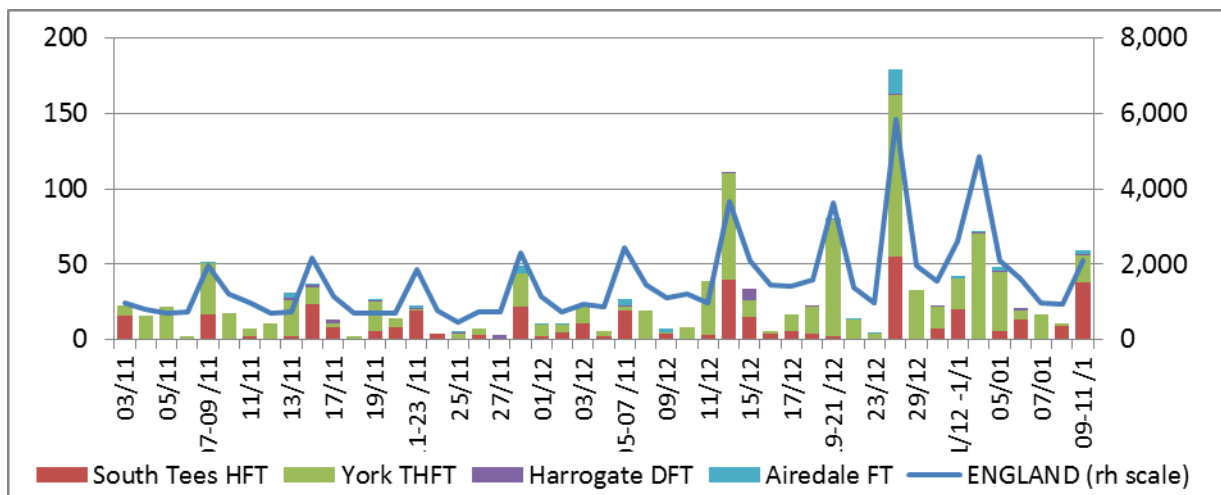
3. Context Data

3.1 The following graphs provide key timelines and data from November 2014 to January 2015.

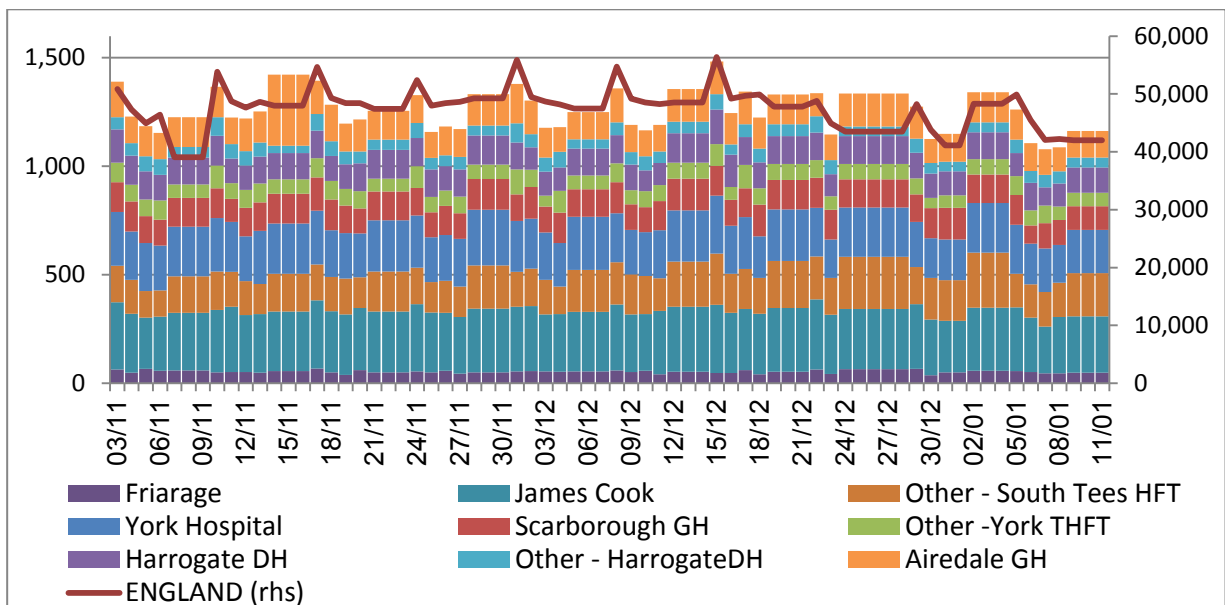
3.2 Core and Escalation Beds Occupancy, South Tees, York, H'gate and Airedale Trusts



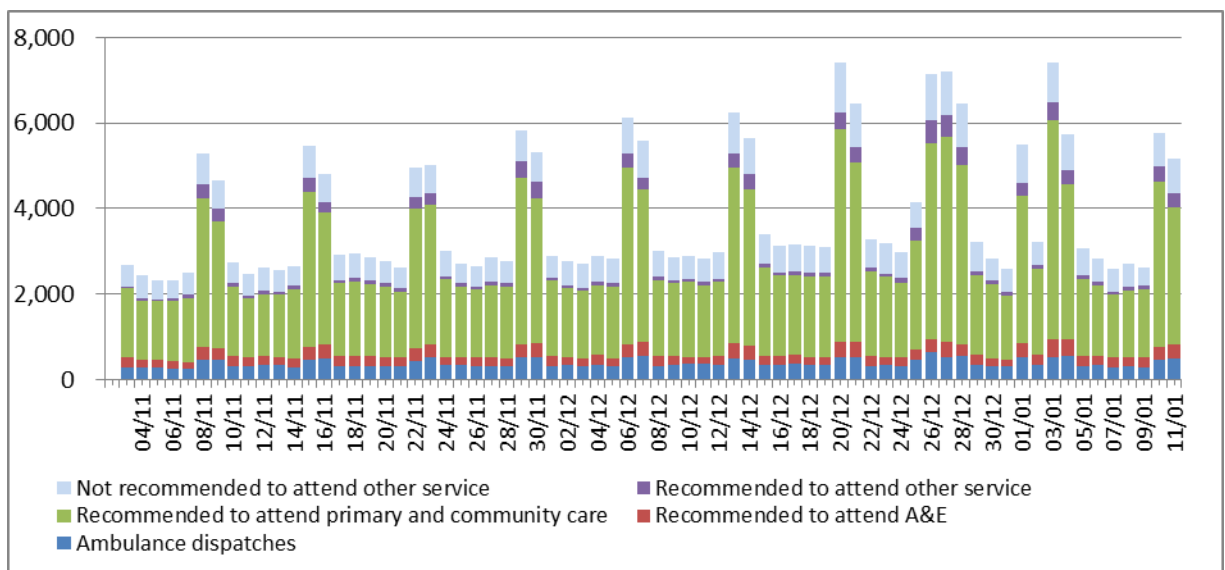
3.3 Ambulance Handover - delayed over 30 minutes



3.4 Accident and Emergency Attendances



3.5 NHS 111 Service – Dispositions Yorkshire and Humber Total



4. Better Care Fund

- 4.1 On the 2nd January 2015 a letter was received from NHS England formally approving the North Yorkshire Better Care Fund Plan, (attached as annexe 1). The North Yorkshire plan is described as being ‘ambitious and in a strong position for delivering change’.
- 4.2 While our ambition remains consistent both the letter and guidance to CCGs (dated 23/12/14) set out an expectation that baseline figures are reviewed in light of current

performance. The North Yorkshire Delivery Board has agreed it would be prudent to review the impact of the recent surge in non-elective activity and other system pressures, on all metrics contained within the BCF plan and will report any key issues back to the members of the Health and Wellbeing Board.

5. Recommendations

- 5.1 Members of the Board are asked to note the content of this paper and that there is further work underway to review the impact of winter on the non-elective admissions and other Better Care Fund metrics and associated targets.
- 5.2 Members are asked to delegate authority to the Chairman of the Health & Well Being Board County Councillor Clare Wood in consultation with Richard Webb, NYCC Corporate Director – Health & Adult Services and the Chief Officers of the five Clinical Commissioning Groups covering North Yorkshire to approve and submit such revised targets if deemed necessary.
- 5.3 Members are asked to note the presentation and the collective effort made by partner organisations and their staff to ensure people received safe and high quality care through a very busy winter period.

Wendy Balmain - Report Author
Assistant Director Integration
North Yorkshire County Council

Annex 1



Publications Gateway Ref. No. 02396

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LS2 7UE

E-mail: england.coo@nhs.net

To:
North Yorkshire Health and Wellbeing Board
NHS Airedale, Wharfedale and Craven CCG
NHS Hambleton, Richmondshire and Whitby
CCG
NHS Harrogate and Rural District CCG
NHS Scarborough and Ryedale CCG

2nd January 2015

Copy to:
Local Authority – Richard Flinton

Dear colleague,

Thank you for submitting further evidence to move your Better Care Fund plan to a fully approved status. We know that the BCF is an ambitious programme and preparing the plans at pace has proved an immensely challenging task. However, your plan is now part of an ongoing process to transform local services and improve the lives of people in your community.

It is clear that your team and partners have worked very hard over the last year, making valuable changes to your plan in order to improve people's care.

NHS England is now able to formally approve plans following the publication of the 2015/16 Mandate. I am delighted to let you know that, following the subsequent Nationally Consistent Assurance Review (NCAR) process, your plan has been classified as '**Approved**'. Essentially, your plan is clear and ambitious and we support your ambitions. This puts you in a strong position for delivering the change outlined above.

Your BCF funding will be made available to you subject to the following standard conditions which apply to all BCF plans:

- The Fund being used in accordance with your final approved plan and through a section 75 pooled fund agreement;
- The full value of the element of the Fund linked to non-elective admissions reduction target will be paid over to CCGs at the start of the financial year. However, CCGs may only release the full value of this funding into the pool if the admissions reduction target is met as detailed in the BCF Technical Guidanceⁱ. If the target is not met, the CCG(s) may only release into the pool a part of that

funding proportionate to the partial achievement of the target. Any part of this funding that is not released into the pool due to the target not being met must be dealt with in accordance with NHS England requirements. Full details are set out in the BCF Technical Guidance

The conditions are being imposed through NHS England's powers under sections 223G and 223GA of the NHS Act 2006 (as amended by the Care Act 2014). These allow NHS England to make payment of the BCF allocation subject to conditions. If the conditions are not complied with, NHS England is able to withhold or recover funding, or direct the CCG that it be spent in a particular way.

We are confident that there are no areas of high risk in your plan and as such you should progress with your plans for implementation.

Any ongoing support and oversight with your BCF plan will be led by your NHS England Regional/Area Team along with your Local Government Regional peer rather than the BCF Taskforce from this point onwards.

Non-elective (general and acute) admissions reductions ambition

We recognise that some areas may want to revisit their ambitions for the level of reduction of non-elective admissions, in light of their experience of actual performance over the winter, and as they become more confident of the 2014/15 outturn, and firm-up their plans to inform the 2015/16 contracting round. Any such review should include appropriate involvement from local authorities and be approved by HWBs. NHS England will assess the extent to which any proposed change has been locally agreed in line with BCF requirements, as well as the risk to delivery of the ambition, as part of its assurance of CCGs' operational plans.

Once again, thank you for your work and we look forward to the next stage.

Yours sincerely,

Dame Barbara Hakin
National Director: Commissioning Operations
NHS England

ⁱ <http://www.england.nhs.uk/wp-content/uploads/2014/08/bcf-technical-guidance-v2.pdf>

1.0	Purpose of the Report
1.1	To report to the Health and Wellbeing Board (HWB) on the implementation of the Care Act within North Yorkshire, particularly in areas that have an impact or require input from statutory partners, or around financial or operational issues. A presentation at the meeting will supplement this report.
2.0	Recommendation
2.1	That the Health & Wellbeing Board notes the progress being made to implement the requirements of the Care Act, the implementation of which is supported partly through the Better Care Fund programme, in line with Department of Health expectations.
3.0	Background
3.1	The Care Act creates a single modern piece of law for adult care and support in England. It updates complex and outdated legislation that has remained unchanged since 1948. The reforms are far reaching across all of the sectors working with adults and carers and we have a joint responsibility to deliver its requirements. Elements of it are closely aligned to the North Yorkshire Health and Wellbeing Strategy, and the Act's Statutory Guidance makes several references to the content and use of the Joint Strategic Needs Assessment, which will need to have a more comprehensive profile of self-funders, as this will provide important intelligence for planning for the funding reforms in 2016/17.
3.2	The Act is split into three parts:
3.2.1	Reform of Care and support It sets out new rights for carers, emphasises the importance of preventing and reducing care and support needs and introduces a national eligibility threshold for care and support. From April 2016 it introduces a cap on the costs that people will have to pay for care.
3.2.2	Response to the Francis Inquiry on failings at Mid-Staffordshire Hospital The Act sets out Ofsted-style ratings for hospitals and care homes so that patients and the public can compare organisations or services in a fair and balanced way and make informed choices about where to go. It will enable the new Chief Inspector of Hospitals to trigger a process to deal more effectively with unresolved problems with the quality of care, and will make it a criminal offence for health and care providers to supply or publish false or misleading information.
3.2.3	Health Education England and the Health Research Authority The Act establishes Health Education England (HEE) and the Health Research

	Authority (HRA) as statutory non-departmental public bodies to carry out their roles in improving education and training for healthcare professionals and protecting the interests of people in health and social care research.
4.0	Implications
4.1	<p>Whilst the Local Authority leads the implementation of the Act, partners have a role in assisting meeting the new duties. From April 2015, the Care Act introduces entirely new legal obligations to:</p> <ul style="list-style-type: none"> • Promote wellbeing and offer preventative support to maintain wellbeing; • Provide information and advice to the local population; and • Assess the needs of, and give services to, carers <p>These provisions of the Care Act will have significant policy and commissioning implications which will require alignment of approach and effective partnership working to successfully deliver.</p>
4.2	<p>The general wellbeing duty places the individual at the heart of any judgements and decisions about them and emphasises the importance of:</p> <ul style="list-style-type: none"> • preventing or delaying the development of needs for care and support; and • reducing needs that already exist. <p>This is not just about what the Council does itself, but also how it works with other local organisations to provide preventative information, build community capacity and make the most of the skills and resources already available in the area. One way that the County Council is doing this is through the establishment of a new Stronger Communities Team to help communities to support themselves, and Prevention Officers to help identify those people who are on the cusp of needing social care support, but where this could be delayed by offering some advice or information, or lower level support. Whilst these provisions set out the Council's duties, it is clear that 'promoting wellbeing' and 'preventing needs' are dependent on all parts of the system acting with these objectives in mind.</p>
4.3	<p>Under the Care Act Councils are required to establish and maintain an information and advice service on all matters relating to adult social care, including wellbeing, preventative support, safeguarding, and financial information. The information and advice is seen as a key part of the requirement to prevent, reduce and delay needs, as the duty relates to the "whole population", not just those with eligible care and support needs. Partners will have a key role in delivering this service, and in ensuring that appropriate information can be accessed by residents in a range of ways, including, but not only, improved web-based information.</p>
4.4	<p>From April 2015, the Act gives carers the same rights to assessment and services as the people for whom they care. There are a large number of "hidden" carers in North Yorkshire, and we will need to work with partners, including health and carers organisations, to identify them and consider what</p>

	support will be needed. We have reviewed the way that we carry out carers assessments to make it more efficient, and offer carers additional ways of getting the information and support they need. This includes an on-line self-assessment as one of the options.
4.5	There are implications for a range of practice and processes, and these changes are being implemented using a Programme approach. This includes the development of a training programme in two phases for affected staff, including those from partner organisations; developing the knowledge and understanding of the Care Act, and bespoke training to targeted staff on new approaches.
4.6	Duties that relate directly to the NHS include: <ul style="list-style-type: none"> • Integration to strengthen local strategic planning of health and social care provision. The duty to promote integration deals explicitly with well-being and prevention. • New standards of co-operation to safeguard vulnerable adults, including participation on local Safeguarding Adults Boards. • Changes to S117 of the Mental Health Act which relate to mental health after care • New regulations for Delayed Transfers of Care to strengthen hospital discharge arrangements
4.7	Other duties require the NHS to support local authorities in the delivery of adult social care functions. This includes: <ul style="list-style-type: none"> • Working to streamline and integrate assessments and care and support plans, combining processes where possible to benefit the service user (e.g. NHS Continuing Health Care; joint packages of care; identification and appointment of advocates) • Supporting effective transitions of young people into adult services
4.8	It is therefore essential that partners are engaged with the Care Act and fully aware of its implications so that each organisation is compliant with the duties and requirements in the Act and its Statutory Guidance. The programme has started to engage with each of the Health and Wellbeing Board member organisations on what the Care Act means for them. Because there will be major changes to policies and practice, it is important that the programme engages at a strategic and operational level during transition to the new arrangements after April 2015. To assist with this, we are producing a document setting out the requirements of the Care Act for partner organisations, which should be completed and circulated shortly. We are considering options for e-learning, with a view to this being available to partners.
5.0	Financial Implications
5.1.	The Care Act brings significant financial implications, in particular in 2015/16 relating to carers services, early assessment of people ahead of the care cost cap and new requirements around a range of issues including deferred payments and information and advice. Monies for implementation of the Care Act have been included within the Better Care Fund and as part of new

	burdens funding to North Yorkshire County Council.
5.2	These combined sources total £5m for 2015/16. Our early forecasts, using the nationally approved model, suggest that this will be insufficient to meet the additional costs, in particular because of the large number of 'self-funders' within the county. However, the full extent of the financial impact will not be known until after April 2015 as they are highly dependent on people's behaviours and choices under the new national system. We have been working with the County Council Network to provide the Department of Health with information on the specific challenges facing rural authorities and those with large numbers of self-funders, such as North Yorkshire.
5.3	The most significant changes to be introduced by the Act from a financial perspective are the introduction of a cap on the total lifetime cost of care for any individual, anticipated to be at £72,000 for those of state pension age, and lower for working age adults (although the amount is yet to be announced), and increases in capital thresholds used in calculating client contributions. The effect of these changes is to transfer a significant portion of the total cost of care from individual care recipients to local authorities. These changes will take effect from 1 April 2016.
6.0	Communications
6.1	The Department of Health is working with Public Health England on national public awareness campaign about care and support reforms. The campaign will be delivered in two phases.
6.2	Phase one will communicate messages to those with existing care needs and their carers on national minimum eligibility threshold, deferred payment agreements, and carers' entitlements, and will run from February 2015 through to April 2015 and beyond. This will be followed up by another tranche of communications in the lead up to April 2016; these will focus on the funding reforms raising awareness about the Dilnot cap and new financial thresholds.
6.3	Phase two of the national communications campaign will attempt to change societal behaviours and encourage people in middle age to plan for their future care needs as part of wider financial planning for later life. This will align with the emergence of new financial instruments that will be available to support the use of care accounts.
6.4	The Council is planning a local communications campaign to align with the national approach using a mix of materials, including the toolkit from Public Health England, to engage with existing service users on changes to their services and with residents who may have care needs about how they can access care and support locally. The use of statutory partners' communications channels will be vital for extending the reach of such messages. Briefings on the approach to communications and the plan will be shared with partners in advance of the campaign launching in late February.

Richard Webb
Corporate Director, Health & Adult Services

North Yorkshire County Council

Health and Wellbeing Board

13 February 2015

Strategy for meeting the needs of children, families and adults with autism in North Yorkshire 2015-2020

Report of the Corporate Director – Health and Adult Services and Director of the Partnership Commissioning Unit

1.0 Purpose of report

- 1.1 This report seeks to gain Health and Wellbeing Board's approval for the draft strategy for meeting the needs of children, families and adults with autism in North Yorkshire 2015-2020 to go out to formal consultation in Summer 2015.

2.0 Issues

- 2.1 This strategy has been written by the lead officers for autism in Children and Young People's Services (CYPS) and Health and Adult Services (HAS) within North Yorkshire County Council and colleagues from the Partnership Commissioning Unit (PCU) on behalf of the four Clinical Commissioning Groups. The draft strategy is available at Appendix 1. The strategy was approved for consultation by Health and Adult Services Leadership Team (HASLT) on 3 December and the PCU Management Board in mid-December 2014. CYPS agreed the draft strategy in December 2014.
- 2.2 Scrutiny of Health Committee reviewed the draft strategy on 23 January 2015. People with autism, their families and other organisations involved in working with people with autism were also given the opportunity to review the strategy during December 2014. Members of the Scrutiny of Health Committee and members of the reference group made suggestions for amendments to the strategy. Some amendments have been made to the strategy accordingly and are included within the draft strategy (see Appendix 1). More significant suggestions for amendment will be considered as part of the consultation exercise to take place over summer 2015. The strategy will be a much improved and more inclusive document as a result of people's comments and suggestions and the Autism Project Board would like to gratefully acknowledge the feedback received to date.
- 2.3 The strategy needs approval to go out to consultation by the Health and Wellbeing Board in order to ensure the project remains on target and the

strategy is published to its deadline of October 2015. The project timeline is provided at Appendix 2.

- 2.4 Partner organisations in North Yorkshire are currently implementing two autism strategies; one for adults (published April 2014) and one for children (published 2012). Following recent legislation; “The Children and Families Act” (2014); national guidance “Think Autism” (2014), NICE guidance, “Autism: recognition, referral, diagnosis and management of adults on the autism spectrum” (2012) and NICE guidelines, “Management and support of children and young people on the autism spectrum” (2013), this all-age strategy for North Yorkshire has been drafted for publication in October 2015.
- 2.5 Following formal approval for the draft strategy to go out to consultation, more work will be carried out to refine the strategy. NYCC’s corporate communications team are involved in this project and will edit, proof read and format the document in advance of formal consultation. On approval of the final content, the communications team will design the strategy to be published as an interactive, searchable online document.
- 2.6 The consultation process will run from mid-May to late July 2015. The consultation is currently in the planning stages but will involve face to face events, incorporating workshops/focus groups; an online questionnaire and the facility to comment via social media including Facebook and Twitter. The consultation will be publicised via the corporate Communication Unit’s press and media channels and by using existing HAS, CYPS and PCU networks to ensure the widest possible coverage and attendance.
- 2.7 Following the consultation period the Autism Project Board will review the feedback and changes will be made to the draft strategy as required. The Health and Wellbeing Board will consider the final content of the strategy at its September 2015 meeting and will be asked to grant approval for the strategy to be published. Work will then take place to edit and design the document for publication during October 2015.

3.0 Policy Implications

- 3.1 This strategy will drive the work on autism in North Yorkshire for the forthcoming five-year period between 2015-2020.
- 3.2 The strategy will encompass people with autism of any age and their families. It recognises that there is a range and severity of need. The strategy will be informed by legislation, a number of national priorities and best-practice models.

4.0 Financial Implications

- 4.1 The cost of consultation is estimated to be approximately £3,000. Approval will be sought for costs to be jointly shared between the partner organisations/directorates. Although this is intended to be an online publication only, there will be a design cost to make the document look professional. This

would be in the region of £200. Approval will be sought for all partners to contribute to the design and the cost of this exercise.

4.2 The Department of Health has awarded each local authority in England a one-off capital grant of £18,500 (to be awarded in February 2015). In North Yorkshire this will be spent on a suite of tablets loaded with autism-specific software for the day service and respite providers currently working towards autism accreditation. However, there is no further Government funding at this time for autism and all services/support identified within the strategy will have to be resourced from existing budgets within the PCU and NYCC.

5.0 Legal Implications

5.1 The national strategy for adults with autism in England, 'Fulfilling and Rewarding Lives' (2010) and its subsequent review 'Think Autism' (2014), gave the NHS, local authorities and other partners statutory duties with regard to improving the lives of those living with autism. The national autism strategy sets out a clear directive for change to ensure that those with autism are included in society and supported to lead full and rewarding lives.

5.2 The strategy will help to meet statutory duties around autism for North Yorkshire's Health and Wellbeing Board. There would be strong challenges from national and local bodies and individuals should this project not be delivered.

6.0 Consultation Undertaken and Responses

6.1 There is a requirement for public consultation via online methods and face to face events between mid-May and mid-July 2015. A draft consultation plan can be found at Appendix 6.

6.2 A 'virtual reference group' of people with autism, their families and carers will help to develop the strategy by reviewing and providing feedback on draft documents, including the draft strategy itself. They will comment on plans for the design of the document and give their thoughts on the best ways to conduct meaningful consultation, and to successfully launch the strategy. This group will operate primarily by email, but some or all members may meet at key points during the development of the strategy.

7.0 Impact on Other Services/Organisations

7.1 HAS, CYPS and the PCU are joint partners in this strategy and, therefore, will be required to put actions into place to fulfil the requirements of the strategy. For example, the PCU are currently going to procurement for a local diagnostic service for autism and ADHD for adults in North Yorkshire.

8.0 Risk Management Implications

- 8.1 Key partners need to jointly contribute to the strategy to the agreed timescale. To mitigate this risk regular editorial meetings take place between NYCC and PCU staff and Project Board meetings are held every three months to monitor progress.
- 8.2 Key stakeholders such as people with autism, their families and organisations providing support for people with autism need to feel ownership of the process and the final strategy. The virtual reference group are contacted regularly by email and receive updates about current work as well as contributing to key project tasks.
- 8.3 The strategy will help to meet statutory duties around autism for North Yorkshire's Health and Wellbeing Board. There would be strong challenges from national and local bodies and individuals should this project not be delivered.
- 8.4 This project will not result in cashable savings, but ensuring appropriate and effective support is provided for children, young people and adults with autism is likely to reduce the incidence of crises, reduce the breakdown of school placement, necessity for mental health involvement and the need for residential care or supported living.

9.0 Equalities Implications

- 9.1 The draft Equalities Impact Assessment (EIA) is attached at Appendix 4 for approval. The EIA will be made available online alongside the published strategy in October 2015. A draft Easy Read version of the strategy has been produced and will be consulted on alongside the main strategy.

<h3>10.0 Recommendation(s)</h3>
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- | |
|---|
| <ul style="list-style-type: none">10.1 That the draft strategy for meeting the needs of children, families and adults with autism in North Yorkshire 2015-2020, including the executive summary, easy read version and the equality impact assessment be approved by the Health and Wellbeing Board to move to formal consultation. |
|---|

Richard Webb
Corporate Director – Health and Adult Services

Janet Probert
Director, Partnership Commissioning Unit

3 February 2015

Author of report – Sally Ritchie, Development Officer (Autism Strategy)

Presenter of report – Anne Marie Lubanski, Assistant Director Operations

List of appendices

- Appendix 1 – draft all-age strategy
- Appendix 2 – project timeline
- Appendix 3 – Easy Read version of the strategy
- Appendix 4 – draft EIA
- Appendix 5 – executive summary
- Appendix 6 – proposed consultation plan

APPENDIX 1

Strategy for meeting the needs of children, families and adults with autism in North Yorkshire 2015-2020

VERSION 15 – as at 3 February 2015

Chapter 1 – Introduction

About this strategy

This is a strategy for meeting the needs of people with autism in North Yorkshire. It runs for a five-year period from October 2015 – October 2020.

People with autism have the right to the same life opportunities as all local residents. They should have fair and equitable access to services and support as required to meet their life aspirations. Following the implementation of the strategy for meeting the needs of children and young people with autism and the interim strategy for meeting the needs of adults with autism, it is imperative that work continues to raise awareness of autism and to improve services for people with autism.

This strategy has been developed as a joint strategy between North Yorkshire County Council's Children & Young People's Service (CYPS), Health & Adult Services (HAS) and the Partnerships Commissioning Unit (PCU) on behalf of the four Clinical Commissioning Groups (CCGs) that operate within North Yorkshire.

North Yorkshire's boundaries also extend into parts of the county administered by Airedale, Wharfedale and Craven CCG and South Lakes CCG (representing the town of Bentham). Senior colleagues from these two organisations have been involved in the development of this strategy.

Vision statement

The partner organisations in North Yorkshire that have collaborated to produce this strategy share a vision that people with autism will receive an assessment in line with NICE guidance and diagnosis as early as possible, that they will be able to access additional support if they need it and to know that they can depend on mainstream public services to accept and understand them and to treat them fairly as individuals.

Why this strategy has been produced

People with autism and their families have expressed the need for local services that meet their needs, central government have also identified this need and have produced guidance for local authorities to adopt.

The National Autism Plan for children was published in 2003. This was followed by the Autism Act which was passed in 2009. The Autism Act placed a number of obligations on a range of public bodies to improve opportunities for people with autism. The strategy for adults with autism in England 'Fulfilling and Rewarding Lives' followed in 2010 and provided clear direction in terms of how public services must transform to better address the needs of adults with autism. More recently 'Think Autism', published in April 2014 shared detailed consultation and research into the views of people with autism and their families on how progress has been taken forward in implementing the 2009 Autism Act. The findings include a set of "1 statements" which emphasis what is important to people with autism and their families.

The total estimated UK cost of autism is around £28 billion. This averages out at £500 each year for everyone with autism. The economic costs include lost job opportunities, impact on the criminal justice system, and the cost of supporting vulnerable adults via, for example, social housing and state benefits.¹

The overall objective of a strategy for autism is to ensure that services are identified, commissioned and improved to meet current and future needs and improve services for people with autism.

Scope of this strategy

This strategy is for people with autism and their families and carers. It recognises that there is a range and severity of need.

The strategy has been informed by national priorities and best-practice models. It reflects the work that has been carried out in the previous children's and adults' autism strategies and extends this work to set new longer-term targets.

The strategy does not cover details of interventions for autism. Autism means many different things to each individual person, family and setting, and can present very different challenges. Each person is an individual and, as such, pathways and interventions need to be individualised.

¹ Knapp, M. et al (2009). Economic cost of autism in the UK. *Autism*, 13(3), pp317-336

A message from North Yorkshire's autism leads

A five year joint strategy for meeting the needs of people with autism in North Yorkshire will ensure that there is more effective support for people with autism and reinforces the enormous potential benefits that can result from collaboration.

The benefits of developing one strategy that meets the needs of all children, young people and adults across North Yorkshire are that one strategy will enable a more integrated coordinated approach across CYPS, HAS and Health. It means we can plan more efficiently and support people more effectively from a very early stage of their lives.

A joint strategy offers us a much better chance of succeeding in our ambitions by working together as agencies, with families and carers, and with the voluntary and community sector. Together, we are determined to improve services for people with autism.

We are proud that we have worked alongside people with autism and their families and carers to develop this strategy. Further details on engagement and consultation can be found in Chapter 4. Their views have enabled us to set targets which will have benefits for all people living with autism in North Yorkshire.

Signatures of:

Councillor Tony Hall, executive member for children's services, special needs, youth justice, youth service and adult learning

Councillor Clare Wood, executive member for adult social care and health integration

Richard Webb, Corporate Director of Health and Adult Services

Pete Dwyer, Corporate Director of Children and Young People's Services

Janet Probert, Director, Partnership Commissioning Unit, on behalf of the following CCGs:

- Hambleton, Richmondshire and Whitby
- Harrogate
- Scarborough and Ryedale
- Vale of York

CYPS Health representative

This strategy is endorsed by a number of organisations that work with people with autism in the North Yorkshire area.

Chapter 2 - Aims and principles

In April 2014 the Department of Health published 'Think Autism', its review of the Government strategy for adults with autism 'Fulfilling and Rewarding Lives'. 'Think Autism' states three aims for improving the lives of people with autism. These are:

1. An equal part of my local community
2. The right support at the right time during my lifetime
3. Developing my skills and independence and working to the best of my ability

In North Yorkshire, health, social care and education share these three aims. Our ambition in this strategy is to use the targets set out in Think Autism to improve the lives of everyone with autism. We will do this by:

1. Increasing awareness and understanding of autism among all services and professionals;
2. Developing a clear, consistent pathway for diagnosis and post-diagnostic support in every area, including early intervention;
3. Improving access to services and support, ensuring good quality, clear and accurate information on the range of services available;
4. Enabling local partners to plan and develop appropriate services for people with autism and ensuring that agencies work together;
5. Increasing the involvement of families and people with autism in service planning and delivery and involve people and their families in making decisions that affect them;
6. Reducing any barriers to participation and inclusion for families and people with autism particularly at stages of transition;
7. Providing sustainable services which are managed within available resources;
8. Helping adults with autism into work.

Chapter 3 - What do we know about autism?

In line with the national autism strategy, North Yorkshire has chosen to use the word 'autism' as an umbrella term to include all conditions on the autistic spectrum. These include Autism, Autistic Spectrum Disorder, Autistic Spectrum Condition, Kanner's Syndrome, Asperger Syndrome, High Functioning Autism, Rett Syndrome, Childhood Disintegrative Disorder, Pervasive Development Disorder Not Otherwise Specified (PDD-NOS), and Neuro-Diversity.

'Fulfilling and Rewarding Lives'²: defines autism as:

'A lifelong condition that affects how a person communicates with, and relates to, other people. It also affects how a person makes sense of the world around them'

This definition is used by North Yorkshire throughout this strategy. The extent to which an individual is affected varies enormously from person to person. There is a wide range of cognitive, social and communicative abilities which can include people with profound learning difficulties, with little or no verbal communication through to those with average or high levels of functioning (we use the term autistic spectrum to describe this). It is important to note that people on the spectrum with average or high levels of functioning can still be disabled and vulnerable with regard to some skills and abilities and may therefore be at risk of missing out on the support they need due to a lack of understanding from professionals.

There is strong evidence to suggest that there are more males with autism than females. Brugha surveyed adults living in households throughout England, and found that 1.8% of males surveyed had autism, compared to 0.2% of females³.

However, females are less likely to be identified with autism even when their symptoms are equally severe. This is because their traits can be more subtle and females may be more able to mask their difficulties by modelling their behaviour on others. In addition autism diagnostic criteria has historically been developed using the behaviours that males display. . Many females are never referred for diagnosis and are missed from the statistics.

Autism is considered a disability which is recognised by the Equality Act of 2010. Autism is not a mental health condition or a learning disability although it is estimated that between 44% - 52% of people with autism may have a learning disability⁴. One

² Fulfilling and rewarding lives: the strategy for adults with autism in England (2010), Department of Health

³ Brugha, Autism Spectrum Disorders in Adults Living in Households Throughout England (2007), Report from the Adult Psychiatric Morbidity Survey

⁴ <http://www.autism.org.uk/about-autism/myths-facts-and-statistics/statistics-how-many-people-have-autism-spectrum-disorders.aspx>. Accessed 26/11/14.

study suggested 71% of young people with autism were going to have one existing mental health condition and 40% have two or more⁵.

As the population changes and life expectancy increases, there are likely to be more people over 65 with autism, although older people are less likely to have received a diagnosis.

There is limited research around ethnicity and autism which has given an inconsistent picture as to whether autism is more prevalent or frequently diagnosed in particular ethnic groups. However the NAS Black and Minority Ethnic Communities Project⁶ and other information collated for a recent NAS report has highlighted that some minority ethnic communities have a limited understanding of autism and that the condition is perceived differently by some communities. This is important as it is likely to have implications for how families, carers and professionals respond to autism and how likely and easy an individual may find it to access appropriate support. Of the adult population of North Yorkshire, 97% are white. However it is important to note that this information does not reveal if they are British, or speak English as a first language. The distribution of BME adults does not differ dramatically across the districts of North Yorkshire; however there is the greatest proportion of white adults in Ryedale and Selby, and the smallest proportion of white adults in Harrogate and Richmondshire.

It is recognised that Looked After Children, children from military families and those from travelling communities may be less likely to be referred for a diagnosis of autism. There may be a reluctance to engage with services either because of a lack of trust or a lack of knowledge of services available. The transient nature of these people's lives may mean that they are not settled in one place long enough to complete necessary assessments to receive a diagnosis. Data to evidence these statements is lacking, both nationally and locally. In recognition of this lack of data we have put an action in this strategy to improve the data collated in relation to these vulnerable groups.

National context and prevalence

In 2009 Brugha carried out a study looking at autism spectrum disorders (ASDs) in adults living in households throughout England. Brugha found that the prevalence of ASDs found in the adults surveyed was 1 in 100. The National Autistic Society and National Institute for Clinical Excellence (NICE) both use this 1% prevalence rate in

⁵ Sims, Mental Health and autism: a guide for child and adolescent mental health practitioners (2011), National Autistic Society

⁶ Corbett & Perepa, Missing Out? (2007), National Autistic Society

the UK ⁷. If the 1% prevalence figure is applied to estimated population figures this means that over 695,000 people in the UK may have autism.

What remains unclear is whether the actual prevalence of autism is on the rise, or whether the increasing number of people with autism is the result of broadening or improved diagnosis.

Local context and prevalence

Applying the same prevalence rate to predicted local population estimates there are likely to be approximately 5643 people with autism under 65 living in North Yorkshire and 1,272 people over 65⁸. Locally, our understanding of how these people are supported is evolving and we know that a multi-disciplinary approach is necessary to improve the way that people are supported. Data on people with autism is held by a number of providers and we need to improve the way we analyse data.

People's needs will be met on an individual basis. There is a continuum of provision to support positive outcomes for people with autism ranging from universal services to highly specialist support.

Some local facts about autism

A small number of children and young people with autism (154) have a statement of SEN. This reflects 23% of all statements (as at 2013). The local authority will work with families to review statements and convert them to Education, Health and Care Plans over the forthcoming years.

There has been a 25% increase in the number of children and young people with autism who require additional support from the Specialist Support Service since 2010. Projection figures for 2015 suggest a further increase in requests for assessment and diagnosis services and the involvement of the Specialist Support autism outreach service of approximately 30%. This puts a huge pressure on all diagnostic, educational, specialist support services and social care.

In 2014, 49 young people with autism transitioned from school to post 16 provision. Consideration needs to be given to how to support young people leaving school. We estimate that a further 50 young people with autism known to the children and young people's service became adults (18 years old) in 2014. Consideration also needs to be given to how services will support the increased prevalence of young people moving into adult services.

⁷ <http://www.autism.org.uk/working-with/autism-strategy/local-planning/data-collection/prevalence-rates-of-autism-in-adults.aspx>. Accessed 27/11/14

⁸ [http://www.streamlis.org.uk/\(S\(p3x4wdiksn2xb2jvod5kbi55\)\)/code/MasterFrame/MasterFrame.aspx?type=Profiler](http://www.streamlis.org.uk/(S(p3x4wdiksn2xb2jvod5kbi55))/code/MasterFrame/MasterFrame.aspx?type=Profiler). Accessed 27/11/14. (1% prevalence rate applied to North Yorkshire population).

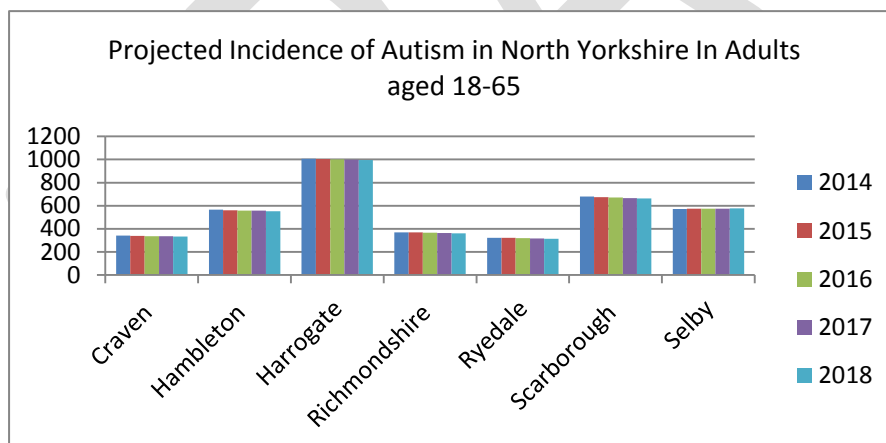
From April 2014 Health commissioners have been collating data relating to the autism diagnostic service locally across North Yorkshire and York. In 2014, 17 adults per month were referred for diagnosis by their GP across the four CCG areas (which includes City of York). Current rates of referral (205 for a practice population of 752,346) are well below the expected prevalence rates for ADHD and ASD. The average age of patients referred in 2014 was 28 years old.

People with autism are more likely to have mental health issues. The PCU is undertaking a review of the provision currently commissioned and aims to radically improve service provision for children, young people and adults with autism who require specialist mental health support and services in 2015.

There are 345 adults with autism supported by Health and Adult Services (as at November 2014). There are many more people with autism who may never come to the attention of services. This is because they have learned strategies to overcome any difficulties with communication and social interaction and found fulfilling employment that suits their particular talents.

According to the projected figures for adults between 18-65 with autism in North Yorkshire, there will be a decrease of around 1% of the adult population, which equates to 54 fewer adults with autism in this age group by 2018⁹.

Figure 1 – projected incidence of autism in North Yorkshire in adults aged 18-65



Overall population figures for the North Yorkshire districts (from the 2011 census)¹⁰ are as follows:

Craven: 55,409

Hambleton: 89,140

⁹ Projecting Adult Needs and Service Information. Available at www.pansi.org.uk. Accessed 27/11/14

¹⁰ [http://www.streamlis.org.uk/\(S\(p3x4wdiksn2xb2jvod5kbi55\)\)/code/MasterFrame/MasterFrame.aspx?type=Profiler](http://www.streamlis.org.uk/(S(p3x4wdiksn2xb2jvod5kbi55))/code/MasterFrame/MasterFrame.aspx?type=Profiler). Accessed 27/11/14

Harrogate: 157,869

Richmondshire: 51,965

Ryedale: 51,751

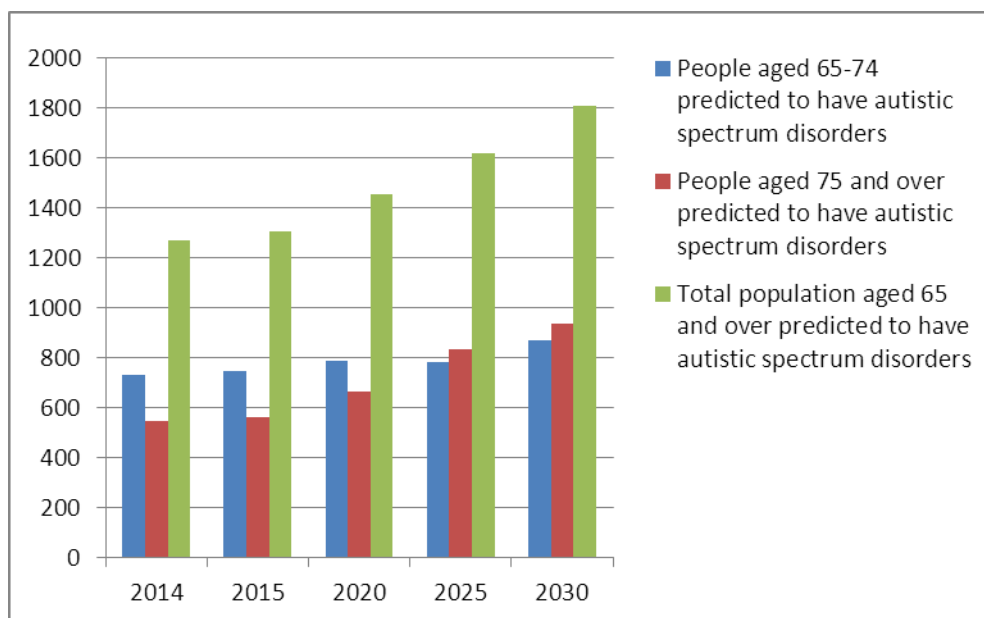
Scarborough: 108,793

Selby: 83,449

DRAFT

Using the 1% prevalence rate it is expected that there are around 1,272 adults over the age of 65 with autism in North Yorkshire. As the older adult population grows it is estimated that this figure will increase by over 500 people by 2030¹¹.

Figure 2 - Number of over 65's in North Yorkshire estimated to be on the autistic spectrum (POPPI)



Implications for education, health and care

There is an increasing demand for diagnostic services for people of all ages in health services and an increase in the overall volume of referrals to the teams that support those with a diagnosis. Many people will require support from a range of services at various points, including education, social care, and primary and secondary health services, including mental health.

A prevalence level of 1% will mean that most teachers, social care workers, general practitioners and other health professionals will support a person with autism at some point during their career. One in three children in special schools now have an educational need related to autism which highlights the need for an effective educational approach to meet the needs of this complex population of students. It is essential that all staff have an awareness and understanding of autism and how to implement strategies to enable these children and young people to access all aspects of school life and to reach their full potential.

¹¹ <http://www.poppi.org.uk/index.php?pageNo=428&loc=&mapOff=1>. Accessed 27/11/14

Chapter 4 – How are we going to find out what people think about the strategy?

In order to formulate this strategy our first priority is to engage with children, young people, adults with autism and their families living in North Yorkshire. We want to gather their views, opinions and experiences, understand what is working well for them, and what areas they would like to see improve. The aim of engaging with people with autism and their families is to identify priority areas for development.

We propose to consult on this draft strategy between May 2015 and July 2015 through existing autism networks across the partnership agencies. We will hold a number of consultation events across North Yorkshire. We will invite people with autism, their families and other interested parties to attend. We will hold additional focus groups for children and adults with autism via the Enhanced Mainstream Schools and the Flying High group. We will also ask our existing adult Partnership Boards for their feedback.

We will also give people the opportunity to comment via an online survey or by emailing their feedback to a dedicated email address. In addition we will promote the consultation via social media such as Facebook and Twitter. Existing Facebook groups will be approached to help disseminate the information to a wider audience. If required we will post out questionnaires to individuals and receive feedback via post

Once the consultation period has concluded, we will reflect the feedback received in the final version of the strategy. There will be a public launch event following the strategy's publication in October 2015.

Chapter 5 - What is on offer in North Yorkshire?

This strategy reflects the local ambition to improve the range of services available locally. The information below highlights the different types of provision for adults and children with autism. In future we aim to reduce the impact of transitions from children's to adults' services. The policy framework governing our work on autism is extensive, an overview of this can be accessed at ([add link to framework document](#)). Further information on all North Yorkshire services can be found on our local offer <http://www.northyorks.gov.uk/article/23542/SEND---local-offer>.

The first route to access help, support and advice should you think a child, young person or adult has autism would be to contact your GP. GPs can provide advice and guidance and refer onwards to the most appropriate service. This may include a referral to an assessment and diagnostic team.

Assessment for autism

There are five autism diagnostic assessment teams for children (0-19) across North Yorkshire. These are commissioned from the following NHS providers:

- Harrogate District NHS Foundation Trust (2 autism diagnostic assessment teams for children)
- York Teaching Hospital NHS Foundation Trust
- Airedale NHS Foundation Trust
- Leeds & York Partnership NHS Foundation Trust

The autism diagnostic assessment teams are multidisciplinary in line with NICE guidance for assessment and diagnosis of children with autism. The teams consist of a paediatrician or a child and adolescent psychiatrist, a speech and language therapist, and a clinical and/or educational psychologist. These teams have specialist skills in autism diagnostic assessments and inform and advise parents and colleagues of their findings.

The diagnostic process can be complex and challenging for some families and individuals. Professionals working in this area are sensitive to the emotional impact of this process. It is also important that the correct diagnosis is given; therefore this process can sometimes take up to 30 hours of clinical assessment. If there is uncertainty regarding the diagnosis, in some instances, professional clinical judgement may indicate the need for 'watchful waiting' to take into account any new information. Children and young people in this category will be monitored for up to 12 months. NHS England commission some specialised services for very complex assessments.

The assessment and diagnostic services across North Yorkshire are currently using the International Classification of Diseases (ICD) 10 (World Health Organisation

WHO 2010) or ICD-10 and DSM-V as a diagnostic assessment tool. This is due to be revised in 2015. They also assess through interaction with and observation of the child or young person's social and communication skills and behaviours, focusing on features consistent with ICD-10 or DSM-V criteria.

During the post-diagnostic follow-up meeting provided by the assessment diagnostic team, the key worker will provide a North Yorkshire autism information pack ([add link](#)) for parents and discuss the possibility of attending a parent training programme. These are jointly commissioned by the NHS and the Local Authority Specialist Support Service. A range of training programmes are available to suit individual circumstances.

The Partnership Commissioning Unit are undertaking an exercise to procure a local diagnostic service for adults in North Yorkshire. Currently this is provided outside of the county, so people may have to travel for their appointment.

When a person does not meet the criteria for a diagnosis of autism the diagnostic assessment team will signpost them and their family to relevant and appropriate services.

Education provision for children with autism

The majority of young people with autism attend their local nursery, pre-school, maintained mainstream school or academy and have their needs met within the mainstream from delegated funding. Resources are delegated to Early Years settings and schools to enable them to meet the needs of pupils with SEN including autism. For children with higher levels of need, the local authority may provide resources through an Education, Health and Care Plan.

The local authority encourages all education settings to develop their knowledge, skills and competencies to meet a wide range of needs including autism. The Autism Education Trust Quality Standards and Competency Framework are recommended to enable settings to evaluate their practice in addressing the needs of pupils on the autism spectrum and the Specialist Support Service encourages all settings to continually develop their provision for children and young people with autism.

All children and young people, including those with autism, benefit from quality first teaching. Some will require additional specialist support from the Autism Outreach service ([link to local offer](#)), others will need a personalised approach to teaching and learning.

In line with the 2014 SEN Code of Practice, local authorities have a duty to ensure that they provide adequate and efficient educational provision for any child or young person with additional support needs including children and young people with autism. The code emphasises that having a special educational need is not a reason

for poor educational attainment. North Yorkshire promotes the personalisation of learning for children and young people with autism. The local authority pattern of provision aims to develop the capacity of local education provision, by sharing expertise in autism.

North Yorkshire recognises the need to have the right specialist support in place and the right pattern of provision to meet the needs of children with autism and their families. We promote a mixed economy of provision, some provided directly through centrally based local authority staff and other services procured on its behalf.

Some children and young people will require specialist educational provision. Specialist educational provision available within North Yorkshire includes:

Enhanced Mainstream Schools (EMS)

The EMS form part of the Specialist Support Service. The provision is commissioned by the local authority and is led and coordinated by the Children and Young People's Service, through the Access and Inclusion directorate. There are five primary EMS for communication and Interaction and five secondary schools that are enhanced for students with a diagnosis of autism. ([Link to local offer](#))

Special School provision

North Yorkshire's special schools are highly regarded by the local authority and Ofsted. Two of the special schools have National Autism Society Accredited Status. Appropriate provision is based on individual needs ([link to local offer](#))

Autism outreach team

The autism outreach team (previously known as ASCOSS) operates across North Yorkshire to provide support for children, Early Years settings, schools and families. The service is able to offer specialist support, advice and training to enhance learning, development, achievement and the social inclusion of children and young people with autism.

All educational establishments can request involvement from the autism outreach team. Further information on the team can be found at:

<http://cyps.northyorks.gov.uk/index.aspx?articleid=15825>

<http://cyps.northyorks.gov.uk/index.aspx?articleid=13162>

Social care services for children with autism

Parents or professionals of children and young people with autism may consider a referral to access services provided by Children's Social Care (higher functioning conditions) or Disabled Children's Services (for children with a Learning Disability).

They can request that a Child in Need Assessment is carried out to see if their child is eligible to receive support or short breaks, either from social care or from Inclusion Services under the Common Assessment Framework (CAF).

Short Breaks are available to some children, young people and their families where their caring responsibilities are significant and where they need a break. Information on Short Breaks provision can be found on the local authority website www.northyorks.gov.uk/SEND.

There is also advice available around parenting, behaviour management and sleep. Agencies work together to coordinate support in order to provide a consistent response.

Training and education for short break services (TESS) delivers individual training to leisure short break providers to enable disabled children to access inclusive activities. Children and young people with a diagnosis of autism, and who are in receipt of short break services are eligible for this service.

Preparing for adulthood

Making the transition from childhood, through adolescence and into adulthood is challenging for any young person. Young people with special educational needs or disabilities generally and those with autism can face additional barriers. This period of time, often referred to by professionals as 'transition' can be both daunting and frustrating for young people and their parents.

Transition is most successful where there is good communication and planning between the young person, their parents, school and professionals.

Significant work has been undertaken to improve the process of transition for young people. In 2008 the National Transitions Support Programme was introduced by the government to develop systems which would improve the experience of young people including those with autism. Further work has been undertaken by the Preparing for Adulthood Team.

Ambitious about Autism (www.ambitiousaboutautism.org.uk) are leading on a government funded project in which North Yorkshire schools and Askham Bryan College in York are involved. This project focuses on supporting young people with autism making the transition from school into further education. North Yorkshire is committed to:

- improving local provision for post-16 learning opportunities, including the development of flexible and personalised packages of support to continue in education or training;
- integrated and person-centred planning and assessment approaches through the transition period, using the Preparing for Adulthood section of the Education, Health and Care Plan;

- closer working with colleagues in Health and Adult Services and with NHS health providers and commissioners to improve the pathway from children's services to adulthood;
- further improvements to information, advice and support to families;
- implementation of the Local Offer.

Adults with autism

Following diagnosis health professionals, such as a person's GP will be informed. Adults who have been diagnosed with autism are entitled to have a social care assessment that will consider individual communication preferences. Those with social care needs may be eligible to receive support from the local authority. This support is means-tested, and may be free of charge subject to eligibility. North Yorkshire County Council's brokerage service has access to a wide range of social care providers who can support a range of needs. Social care assessors will liaise with the brokerage service on behalf of the person with autism.

Alternatively North Yorkshire County Council has an online community directory where providers list the services they offer. The community directory can be accessed via this link ([add link](#)).

Often adults with autism also need support with mental health issues or a learning disability. Further assessment may be required to ensure people access appropriate services.

Carers of people with autism are also entitled to request a carers assessment should they feel this is appropriate.

Helping adults with autism into work

Job Centre Plus is part of the Department for Work and Pensions. It provides services that support people of working age from welfare into work, and helps employers to fill their vacancies. Disability Employment Advisors (DEAs) are available to support people who have disabilities, including people with autism. DEAs will act as advocates for those who experience difficulty in communicating with employers. DEA training covers a wide range of conditions including autism, and advisors undertake autism specific training.

In addition, North Yorkshire County Council's Health and Adult Services offer a Supported Employment Service which includes support for people with autism. Staff are based in adult social care teams and integrated mental health teams countywide. They are able to support people with autism to gain and retain employment. Supported Employment staff also work with employers to advise on reasonable adjustments in the workplace. The Supported Employment Service is undertaking

the NAS Autism Accreditation process alongside 16 other North Yorkshire Health and Adult Services providers.

Provision in the local community

There are a number of organisations and independent groups that support people with autism, such as the National Autistic Society (NAS). The NAS website, www.nas.org.uk, contains a list of useful local contacts and support groups.

There are a range of local community groups and support available in the community for people with autism and their families. These include leisure and sport activities, youth provision, after school clubs and peer support groups. As part of developing this strategy we have liaised with, and will continue to work with, a number of voluntary organisations to map activities available and signpost families to opportunities.

This information will be included in the local authority's Local Offer which advertises the range of things on offer for children and young people with special educational needs and disabilities. The local offer can be found here:

<http://www.northyorks.gov.uk/article/23542/SEND---local-offer>

Chapter 6 – what have we achieved so far?

The actions stated within the previous North Yorkshire autism strategies have ensured progress towards developing services for autism. This strategy builds on the progress and achievements made to date and sets out the plans for the next five years to continually improve services for children, young people and adults with autism in North Yorkshire. [Link to highlight reports and implementation plans.](#)

Some targets already achieved – the highlights:

- The establishment of joint strategic groups comprising officers from HAS, CYPS, Health, parents and the voluntary sector working collaboratively to improve services for people with autism in North Yorkshire;
- A business case for an autism assessment and diagnosis service for adults with autism has been developed;
- As the prevalence of autism is on the rise, and our understanding of autism and available training for professionals is increasing, NYCC are ensuring that staff are appropriately trained in autism. The NHS are raising awareness of available autism training through signposting to online resources;
- 1431 of North Yorkshire County Council's workforce have undertaken online autism awareness training; 123 non-local authority staff have also undertaken this training (as at Jan 2015);
- The above online autism awareness tool is available from NYCC and the aim is for this to be made available for all NHS staff through the e-learning portal;
- North Yorkshire has been awarded the position of Yorkshire and Humber Autism Education Trust Early Years training hub;
- North Yorkshire Police Community Support Officer training based on NAS resources is provided;
- 61 Health and Adult Services operational staff are registered Autism Champions and have received enhanced level training on autism;
- 18 North Yorkshire County Council services are undertaking a National Autistic Society programme to achieve accreditation for autism-friendly services;

- The number of autism-specific training programmes for families has increased extensively;
- York St John University have established a community of practice for staff working with people with autism across the Vale of York;
- A 'virtual reference group' has been created in order to involve people with autism, their families and interested groups in the development of autism provision across the county;
- A young people's DVD has been produced – describing their views on how to best support young people with autism. This will be used as an educational resource for teachers;
- A mental health and emotional wellbeing in autism prevalence study of children and young people with autism in North Yorkshire has been undertaken;
- A "Review of Evidence Based Educational Interventions for Autism in North Yorkshire" has been written to highlight the national recommendations and best practice guidelines; leading to an NYCC statement regarding autism and evidence based intervention.

Chapter 7 - Actions for 2015-2020

The actions below are grouped within our 8 key aims and principles stated in Chapter 2. An implementation plan will be developed following the publication of the strategy. During the consultation period we will be asking people for their views on the actions we need to take to achieve the following targets.

1. Increase awareness and understanding of autism among all services and professionals. To do this we will:
 - Provide guidance on implementing autism standards and competency frameworks within schools and education settings (Early Years and post-16);
 - Map current training and produce a training needs analysis;
 - Develop a detailed training pathway monitored by the learning and development multi-agency group and publish this to raise awareness of available training to other organisations locally;
 - Continue to support front line services that are working towards achieving NAS accredited status;
 - Continue to roll out an autism champions programme across the wider workforce following the successful implementation in HAS;
 - Develop peer mentoring within staff teams to increase levels of knowledge and awareness of autism.

2. Develop a clear, consistent pathway for diagnosis and post-diagnostic support in every area, including early intervention. To do this we will:
 - Procure local autism assessment and diagnostic services within North Yorkshire as identified through on-going reviews of service availability and quality;
 - Collaborate with agencies that support adults to facilitate pathways of support (for example, Department for Work and Pensions, North Yorkshire Police and the criminal justice system);
 - Continue to offer autism-specific training programmes to families that have received a diagnosis of autism (0-18 years);
 - Review opportunities to develop autism specific training programmes for family carers (post 18);
 - Establish, develop and evaluate a mechanism for data collection and monitoring of the autism diagnostic process;
 - Implement the new international criteria for diagnosis once published.

3. Improve access for all people with autism to the services and support they need by ensuring good quality, clear and accurate information on the range of services available. To do this we will:
 - Support the development of autism friendly communities through the NYCC community delivery managers;
 - Ensure the local offer is, and continues to be a source of quality information for children, young people and adults with autism and their families;
 - Use a range of methods to provide information in an accessible format (e.g. email, text, Skype, letter, face to face);
 - Listening to the voice of those with autism and their families to ensure their views are heard within the relevant statutory assessment framework. Review the autism information pack for parents;
 - Develop an autism information pack for adults post diagnosis and make this available to all adults with autism whether they have had a recent or past diagnosis, or remain undiagnosed.

4. Enable local partners to plan and develop appropriate services for people with autism and ensure that agencies work together. To do this we will:
 - Create a multi-agency Steering Group for this strategy to ensure that agencies are working collaboratively;
 - Continue to include autism within the North Yorkshire Joint Strategic Needs Assessment;
 - Implement Education, Health and Care Plans for all children with autism who currently have a statement;
 - Develop personalised pathways of support for people with autism through maximising personal health budgets and direct payments;
 - Develop a multi-agency training pathway;
 - Scope joint commissioning opportunities for post diagnostic support.

5. Increase the involvement of families and people with autism in service planning and delivery and involve people and their families in making decisions that affect them. To do this we will:
 - Continue to use the expertise of people with autism and their families via the virtual reference group;
 - Support parents or adults with autism to be involved in planning using person-centred approaches;
 - Give people with autism the opportunity to use personal budgets;
 - Include people with autism and their families in the development and delivery of training;
 - Improve pathways and better managed expectations for young people moving from being a child to an adult;

- Increase parent support and sibling groups.

6. Reduce any barriers to the participation and inclusion of families and people with autism particularly at stages of transition. To do this we will:

- Seek the guidance of the virtual reference group to establish the most appropriate way to ensure participation of children, young people and adults with autism, including expanded use of social media, email and online methods of communication;
- Promote the NAS accreditation and access award to all organisations to reduce barriers and increase awareness ([link to access award](#));
- Develop appropriate methods of gaining children, young people and adults' views to establish how we can improve provision for them;
- Explore opportunities for developing a joint commissioning pathway to support a smooth transition into adulthood;
- Work with universal services to raise awareness of how people with autism may present differently (GP's, hospitals, schools, youth centres etc.);
- Ensure that all mental health staff can identify the mental health needs of people with autism effectively particularly during a point of crisis.

7. Provide sustainable services which are managed within available resources. To do this we will:

- Consider the need to develop traded services and/or social enterprise initiatives to develop non-statutory services for autism;
- Ensure that existing services are accountable and providing good value for money;
- Explore opportunities for joint commissioning to ensure resources are pooled effectively;
- Collaborate to review new funding opportunities as these arise;
- Maximise the use of personal budgets to ensure that support is tailored to the individual needs of the person with autism;
- Explore community development opportunities to support people with autism (e.g. sports and leisure).

8. Help adults with autism into work. To do this we will:

- Continue to improve local personalised pathways for post-16 and post-19 learning opportunities;
- The NYCC Supported Employment Service will continue to support people with autism;
- Ensure the Transitions steering group consider the needs of young people with higher functioning autism/Asperger syndrome;

- Include support for employers within the post diagnostic pathway for adults with autism e.g. advice on reasonable adjustments within the workplace;
- Promote the rights of people with autism in the workplace;
- Encourage large employers within North Yorkshire to provide apprenticeships or supported internships for people with autism;
- Ensure that young people with autism are supported through the proposed Integrated Transitions pathway;
- Link with the Department for Work and Pensions to develop approaches to support people into work.

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Chapter 8 - How will we measure what we have achieved in this strategy?

Chapter 7 summarised the actions we will take to improve local services and provision for children, families and adults with autism. A comprehensive implementation plan will be developed and published after the strategy is launched.

The implementation and monitoring of the action plan relating to this strategy will be overseen by the North Yorkshire and York Steering Group (Autism). This group will be jointly chaired by senior managers from North Yorkshire County Council and the Partnership Commissioning Unit. Members will include representation from NYCC Health and Adult Services, Children and Young People's Service, NHS Clinical Partnership Commissioning Unit and NHS Foundation Trust service providers. The virtual reference group members will also have the opportunity to contribute to the steering group.

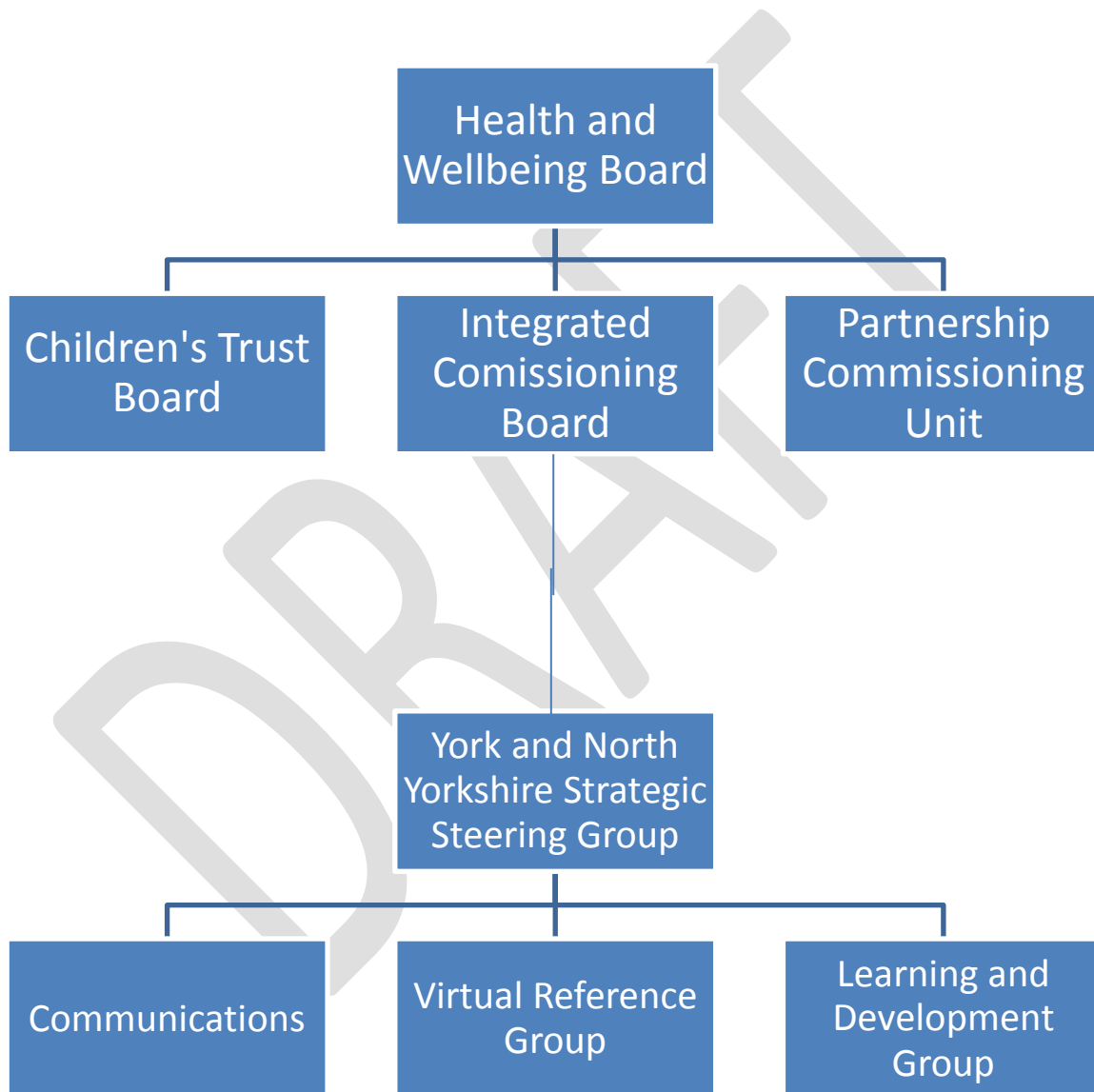
They will receive regular reports on progress against the actions within Chapter 7 and will hold those responsible for action to account for delivering these commitments. We will publish an annual summary of progress against the commitments made within this strategy.

The North Yorkshire and York Steering Group will report progress made within this strategy to the following groups (see visual 1 overleaf):

Children's Trust Board
Integrated Commissioning Board
The Health and Wellbeing Board
Care and Independence Overview and Scrutiny Committee
Scrutiny of Health Committee
Partnership Commissioning Unit Management Board
CYP Leadership Team
HAS Leadership Team

The success of the strategy will be measured against the priority actions summarised in chapter 7. We will also track the outcomes of a cohort of children families and adults with autism throughout the life-span of the strategy to ascertain whether the actions have had a direct impact on individuals with autism and their families.

Visual 1 – Governance arrangements



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APPENDIX 2

Strategy for meeting the needs of people with autism in North Yorkshire 2015-2020

Project overview

Oct 2014				Nov 2014				Dec 2014				Jan 2015				Feb 2015				Mar 2015				Apr 2015				May 2015				Jun 2015				Jul 2015				Aug 2015				Sep 2015			
1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4				

	Revised project brief and timeline agreed by Autism Strategy Project Board
	Draft strategy document
	Prepare for Consultation
	Revision of Draft
	Consultation period
	Preparation for launch of strategy

Meeting Schedule

Oct 2014				Nov 2014				Dec 2014				Jan 2015				Feb 2015				Mar 2015				Apr 2015				May 2015				Jun 2015				Jul 2015				Aug 2015				Sep 2015																							
1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4	1	2	3	4																				

Project Board Meetings
Health and Wellbeing Board
Children's Trust Board
PCU Management Board
HAS Leadership Team
HAS Executive
CYPS Executive
CYPS Leadership Team
CYPS Autism Strategy Steering Group
HAS Steering Group
Learning and Development Task & Finish Group
Communications, Media and Consultation Task & Finish Group
Integrated Commissioning Board (ICB)
Young People Overview & Scrutiny
Care & Independence Overview & Scrutiny

Final plans made for strategy launch in October 2015



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APPENDIX 3

North Yorkshire's Plan for Autism

How we will meet the needs of
children, families and adults with autism

2015 - 2020



There are lots of children and adults with autism living in North Yorkshire. This is the plan to say how we will make sure we support everyone with autism living in North Yorkshire.



We want people with autism to get good support and have the same opportunities as everyone else.



This plan has been written for people with autism, their families and carers. It is a 5 year plan from **October 2015** to **October 2020**.



It has been written by North Yorkshire County Council's Children and Young People's service, Health and Adult services and North Yorkshire Clinical Commissioning groups.



Everyone has worked together to support this plan because we all want to make life better for people with autism and their families.

Why we have written this plan



In 2009 the Government passed a law saying that people with autism should be treated better. This is called the Autism Act.



In 2010 the Department of Health wrote a plan called Fulfilling and Rewarding Lives.



It said what changes needed to be made and how everyone should work together to make lives better for people with autism.



In April 2014 a report was written, called Think Autism. This was written after listening to what people with autism and their families said needs to change.



To make sure we buy the services and support that people with autism and their families need, we need to spend our money carefully.



Autism is different for every person so some people with autism may only need some support and other people might need a lot of support.



Having just one plan for autism for children, adults and young people across North Yorkshire will help everyone to work better together.

What we need to do

The Think Autism report said there are 3 main things that will make lives better for people with autism.



- 1) Being a part of the community
- 2) Getting the right support at the right time for the rest of my life
- 3) Developing my skills and independence and working to the best of my ability

What we know about autism



There are lots of different types of autism, for example Asperger syndrome and high functioning autism. We will use the word autism when we talk about autism in this plan.

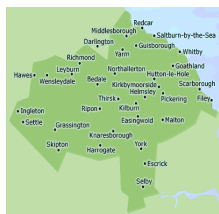


Autism affects people all their lives and you can't always tell that a person has autism. Autism is not a mental health condition or a learning disability but some people with autism also have a learning disability or a mental health condition.



To help us work out what services we need to buy we need good information about people with autism in North Yorkshire. We do this by collecting lots of different information.

We have found out:



There are almost 7000 people with autism living in North Yorkshire

We expect there will soon be a lot more people over the age of 65 with autism



There are a lot of children and young people in schools who have autism and need extra support



We need to find better ways to support young people with autism when they leave school and start to use adult services



Many people with autism will need support from different services during their life. For example, school, social care, health services and mental health services.



This means that most social care workers, health professionals and teachers will support a person with autism.

What is available for people with autism in North Yorkshire?



There are lots of ways to get help, support and advice if you think a child, young person or adult has autism. You can speak to your doctor or a speech and language therapist.



They will be able to give good advice and people may be referred to a group of health professionals called the diagnostic team. To find out if someone has autism they will need to have an assessment.



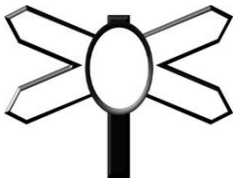
When someone has an assessment for autism it can be a very difficult time for the person involved and their family.



Even though it may be a difficult time, the team will do their best to make sure they are given the support they need.



If a child or young person is told they have autism, parents will be given information and advice. They will have the chance to take part in a parents training course.



If we find out that someone does not have autism they will be told where they can go for support and advice.

Education for children and young people with autism



We want children and young people to have the best chance to learn when they are at school. This includes children and young people with autism.



Some children and young people with autism may need extra support to help them to learn.



They can get this support in a mainstream school, a special school, a specialist support service for autism or social care services for children with autism.



Any young person can find the change from being a child to becoming an adult difficult. Young people with disabilities and young people with autism may find this time much more difficult.



This time is sometimes called transition. This works well if the young person, their parents, schools and professionals all work together.



We want to make sure that young people with autism in North Yorkshire have good opportunities for further education when they reach the age of 16.

Support for adults with autism



Adults who have autism will be able to have a social care assessment. They will be told what services, support and help they can get.



Other adults with autism may need extra support, for example with a mental health issue or a learning disability. They may need another assessment to make sure they find a service that is right for them.



Carers of people with autism can ask for a carer's assessment if they want one.



There are lots of local groups for people with autism and their families across North Yorkshire. We want to make sure everyone knows what is available.

Support to find a job



Job Centre Plus supports adults to find a job. Disability Employment Advisors, who work for Job Centre Plus, can give extra support to people with disabilities, including autism.



North Yorkshire County Council Health and Adult Services have a Supported Employment service. They support adults across North Yorkshire, who may need extra support to find and keep a job.

What we have done so far



Over the last few years, we have worked hard to make services better for people with autism and their families.

These are just a few of the things we have done so far:



North Yorkshire County Council, health services and other organisations have all taken part in autism training.



We have also have given autism training to families of children with autism.



There are now over 60 professionals around North Yorkshire who are Autism Champions. This means they know a lot about autism and can support others to learn about the people with autism need.



18 North Yorkshire County Council services are working with the National Autistic Society. They are working hard to make sure they have an excellent service that is right for people with autism.



We have been working with a group of people with autism and their families who help to plan services for people with autism across North Yorkshire.



We made a DVD made about the support young people with autism need. This will be shown to teachers to help them to support young people with autism better.

Our plan for the next 5 years (2015 – 2020)



Over the next 5 years we plan to do much more to support people with autism and their families. We will ask people what they think of our plans from May to July 2015.



These are the 8 things we will do to make life better for people with autism:

- 1) Make sure more services and the staff who work there have a better understanding of autism
- 2) Have a clear way for people to find out if they have autism and how they can get the support they need afterwards
- 3) Make sure people with autism are able to use services and get the support they need. Information about all the different services they can use needs to be easy to read and understand

- 4) Make sure organisations across North Yorkshire plan services to support people with autism
- 5) Have more people with autism and their families involved in planning services
- 6) Find better ways to make it easier for people with autism and their families to be involved and included. This is really important especially when young people are getting ready to leave school
- 7) Make sure that we think carefully about how to spend our money on the services people with autism need
- 8) Help more adults with autism to find a job

How will we find out what people think about our plan?



To help us to work out what we need in our plan, we need to hear from people with autism and their families who live in North Yorkshire.



We want to hear what is working well and what things need to change between May 2015 and July 2015.



There will be smaller groups for children and adults to have their say. For example, in schools and through the Flying High group which is a social group for young people with autism between the ages of 18-25. The Learning Disabilities Partnership Board is a group for adults, and this group will be involved in commenting on the strategy.



People will also be able to have their say by answering questions on the internet, or through a special email address.



After July 2015, we will look at all the information that people have told us or written about and we will make our final plan for autism. We will publish this on the internet in October 2015.



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APPENDIX 4

Equality Impact Assessment (EIA): evidencing paying due regard to protected characteristics July 2013

If you would like this information in another language or format such as Braille, large print or audio, please contact the Communications Unit on 01609 53 2013 or email communications@northyorks.gov.uk.

যদি আপনি এই ডকুমেন্ট অন্য ভাষায় বা ফরমেটে চান, তাহলে দয়া করে আমাদেরকে বলুন।

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اگر آپ کو معلومات کسی دیگر زبان یا دیگر شکل میں درکار ہوں تو برائے مہربانی ہم سے پوچھئے۔



Equality Impact Assessments (EIAs) are public documents. EIAs accompanying reports going to County Councillors for decisions are published with the committee papers on our website and are available in hard copy at the relevant meeting. To help people to find completed EIAs we also publish them in the Equality and Diversity section of our website. This will help people to see for themselves how we have paid due regard in order to meet statutory requirements.

Name of Directorate and Service Area	HAS
Lead Officer and contact details	Sally Ritchie x5843
Names and roles of other people involved in carrying out the EIA	Sally Ritchie, development officer (autism strategy), HAS Cerys Townend, lead for autism, CYPS Becky Allright, specialist commissioning assistant, PCU Amanda Thompson, specialist commissioning assistant, PCU
How will you pay due regard? e.g. working group, individual officer	Autism Project Board (meets quarterly)
When did the due regard process start?	During development of strategy from April 2014.
Sign off by Assistant Director (or equivalent) and date	Anne Marie Lubanski, Assistant Director Operations

Section 1. Please describe briefly what this EIA is about.

The development, publication and implementation of a new strategy for meeting the needs of all people with autism in North Yorkshire 2015-2020. This strategy will be published as an online document in October 2015.

The strategy is being developed by the lead officers for autism within Health and Adult Services, Children and Young People's Services and the Partnership Commissioning Unit on behalf of the four North Yorkshire Clinical Commissioning Groups. An Autism Project Board consisting of senior managers from the above organisations oversees the development of the strategy and monitors progress. Alongside the Autism Project Board is a 'virtual' reference group of people with autism, their families and organisations who work with people with autism who comment on the content and design of the strategy.

There will be a public consultation during Summer 2015 which will provide the opportunity for people to comment and feed back about the strategy. Following the consultation period the strategy will be amended and strengthened as necessary to reflect the input of respondents.

This is a draft EIA that will be updated post consultation to reflect the views provided during consultation.

Section 2. Why is this being proposed? Producing a local autism strategy is a requirement of the 2010 national strategy “Fulfilling and Rewarding Lives” which stemmed from the 2009 Autism Act, the first single-disability act of legislation in the UK. The requirement was reiterated in the refresh of the national strategy ‘Think Autism’ which was published in April 2014.

Section 3. What will change? What will be different for customers and/or staff?

This strategy sets out plans to improve support, advice and guidance available for all people with autism in North Yorkshire.

People with autism will receive an assessment in line with NICE guidance and diagnosis as early as possible, that they will be able to access additional support if they need it and to know that they can depend on mainstream public services to accept and understand them and to treat them fairly as individuals.

Section 4. What impact will this proposal have on council resources (budgets)?

Cost neutral? Yes. There are no plans to derive savings from this project and any incidental savings may be re-invested.

Increased cost? No

Reduced cost? No

Please explain briefly why this will be the result.

There is no new funding for work on autism and any expenditure has to be resourced from existing budgets.

Section 5. Will this proposal affect people with protected characteristics?	No impact	Make things better	Make things worse	Why will it have this effect? State any evidence you have for your thinking.
Age		X		Currently the majority of local provision is focused on children and young people, the strategy seeks to

				improve access for adults (including over 65s). However the strategy will also improve access and provision for children with autism.
Disability		X		Autism is a recognised disability and the strategy aims to improve the experience of accessing services for people with autism, and reduce barriers to access
Sex (Gender)		X		The strategy recognises that autism is often under-diagnosed in women and girls and will include a target to monitor the number of girls/women being diagnosed to identify whether numbers of girls and women are increasing.
Race	X			Limited evidence about the prevalence within BME groups, however it is anticipated that the strategy could have a positive effect in reducing stigma and improving awareness for everyone.
Gender identity	X			We are not aware of any issues covered by this strategy that will impact in any way on an individual's gender identity.
Sexual orientation	X			We are not aware of any issues covered by this strategy that will impact in any way on an individual's sexual orientation.
Religion or belief	X			Religious belief is not a factor in terms of prevalence but the strategy recognises that an individual's religious beliefs should be taken into account in ensuring culturally appropriate support is provided.
Pregnancy or maternity	X			We are not aware of any issues covered by this strategy that will impact in any way on an individual's pregnancy or maternity.
Marriage or civil partnership	X			We are not aware of any issues covered by this strategy that will impact in any way on an individual's

				marriage or civil partnership.
Looked After Children, children from military families and those from travelling communities				It is recognised that Looked After Children, children from military families and those from travelling communities may be less likely to be referred for a diagnosis of autism. There may be a reluctance to engage with services either because of a lack of trust or a lack of knowledge of services available. The transient nature of these people's lives may mean that they are not settled in one place long enough to complete necessary assessments to receive a diagnosis. Data to evidence these statements is lacking, both nationally and locally. In recognition of this lack of data we have put an action in this strategy to improve the data collated in relation to these vulnerable groups.
Section 6. Would this proposal affect people for the following reasons?	No impact	Make things better	Make things worse	Why will it have this effect? Give any evidence you have.
Live in a rural area		X		One of the aims of the strategy is to provide improved services and support/advice to all parts of North Yorkshire, regardless of rurality.
Have a low income		X		One of the strategy's priority targets is to get more people with autism into employment. Adults with autism are significantly under-represented in the labour market; only 15% of people with autism are in employment. This means that many adults with autism are dependent on benefits, and the under representation also indicates

				that employers are not benefitting from the skills and talents adults with autism can offer in the workplace. The targets contained in the all-age strategy should make things better for people with autism who are currently reliant on benefits.
Carers		X		Support for carers and signposting to advice and guidance are part of the target to improve the diagnostic process. Carers are included in the virtual reference group to co-produce the new all-age strategy to be published in 2015.

Section 7. Will the proposal affect anyone more because of a combination of protected characteristics? (e.g. older women or young gay men?) State where this is likely to happen and explain what you think the effect will be and why giving any evidence you have.

Autism is classified as a disability and therefore it is more likely that individuals with autism may have a combination of protected characteristics, e.g. that they are a female with autism.

However, it is envisaged that the strategy will only affect people with autism in a positive way so that there will be no detrimental impact on anyone regardless of protected characteristic, or combination of protected characteristics.

Section 8. Only complete this section if the proposal will make things worse for some people. Remember that we have an anticipatory duty to make reasonable adjustments so that disabled people can access services and work for us.

Can we change our proposal to reduce or remove these adverse impacts?

Can we achieve our aim in another way which will not make things worse for people?

If we need to achieve our aim and can't remove or reduce the adverse impacts get advice from legal services. Summarise the advice here. Make sure the advice is passed on to decision makers if the proposal proceeds.

Section 9. If the proposal is implemented how will you find out how it is really affecting people? The virtual reference group comprising carers/parents and people with autism will monitor the implementation of the actions in the strategy to ensure that no individual or group of people with protected characteristics is adversely affected. This group will operate alongside the Autism Project Board, comprising senior officers within HAS, CYPS and Health who will also carry out a monitoring role.

One of the targets of the strategy is to carry out a longitudinal study of people, following their progress from the publication of the strategy in October 2015 to the end of the strategy in 2020. The aim of this study is to track people's outcomes at the start and end of the process and determine whether the actions put in place by the strategy have positively changed people's lives. We will therefore be able to compare outcomes for different groups, for example women and men.

Section 10. List any actions you need to take which have been identified in this EIA

Action	Lead	By when	Progress
The strategy recognises that autism is often under-diagnosed in women and girls and will include a target to monitor the number of girls/women being diagnosed to identify whether numbers of girls and women are increasing.	Sally Ritchie	October 2015	

Appendix 5

Strategy for meeting the needs of children, families and adults with autism in North Yorkshire 2015-2020

Executive Summary

What is this strategy for?

This is a strategy for meeting the needs of people with autism in North Yorkshire. It runs for a five-year period from October 2015 to October 2020.

The partner organisations in North Yorkshire that have collaborated to produce this strategy share a vision that people with autism will receive an assessment in line with NICE guidance and diagnosis as early as possible, that they will be able to access additional support if they need it and to know that they can depend on mainstream public services to accept and understand them and to treat them fairly as individuals.

The overall objective of a strategy for autism is to ensure that services are identified, commissioned and improved to meet current and future needs and improve services for people with autism.

In April 2014 the Department of Health published 'Think Autism', its review of the national strategy for adults with autism, 'Fulfilling and Rewarding Lives'. 'Think Autism' states three aims for improving the lives of people with autism. These are:

1. An equal part of my local community
2. The right support at the right time during my lifetime
3. Developing my skills and independence and working to the best of my ability

What will this strategy do?

In North Yorkshire, health, social care and education share the above three aims. Our ambition in this strategy is to use the targets set out in Think Autism to improve the lives of everyone with autism. We will do this by:

1. Increasing awareness and understanding of autism among all services and professionals;
2. Developing a clear, consistent pathway for diagnosis and post-diagnostic support in every area, including early intervention;
3. Improving access to services and support, ensuring good quality, clear and accurate information on the range of services available;

4. Enabling local partners to plan and develop appropriate services for people with autism and ensuring that agencies work together;
5. Increasing the involvement of families and people with autism in service planning and delivery and involve people and their families in making decisions that affect them;
6. Reducing any barriers to participation and inclusion for families and people with autism particularly at stages of transition;
7. Providing sustainable services which are managed within available resources;
8. Helping adults with autism into work.

Why do we need a strategy for people with autism in North Yorkshire?

There is an estimated 7,000 people with autism across North Yorkshire. This is assuming a 1% prevalence.

People's needs should be met on an individual basis. There should be a continuum of provision to support positive outcomes for people with autism ranging from universal services to highly specialist support.

There is a projected growth in demand for diagnostic assessment and support services.

How are we developing this strategy?

In order to develop this strategy our first priority is to engage with children, young people and adults with autism and their families living in North Yorkshire.

A virtual reference group of people with autism, their families and organisations that work with people with autism has been established to jointly develop this strategy.

We will be holding a public consultation about the strategy in summer 2015 and will be asking for people's feedback so that the strategy can be improved and strengthened prior to its publication in October 2015.

What work has already been done for people with autism in North Yorkshire?

As a result of the previous autism strategies there have been a number of achievements including the establishment of joint strategic groups consisting of senior managers from the NHS and North Yorkshire County Council. The joint

strategic groups are driving the work around the development of the autism strategy and the associated actions within it.

This strategy will supersede the previous strategies and build upon the foundations established.

What will this strategy achieve?

There are key themes within the actions for this strategy which include:

- Increasing awareness and understanding of autism
- Reducing any barriers to participation and inclusion
- Increasing the involvement of families in service planning
- Improving access to services for people with autism

These targets will be monitored and overseen by the joint strategic groups and the virtual reference group.

How will we know whether the strategy is working?

The actions within the strategy will be monitored regularly by the joint strategic groups and the virtual reference group. Reports on progress will be taken to the North Yorkshire Health and Wellbeing Board on a regular basis.

This strategy is endorsed by a number of organisations that work with people with autism in the North Yorkshire area. These organisations will be provided with regular updates on progress of the strategy actions.

We will monitor a small group of people with autism during the course of the strategy to determine whether their lives have improved as a result of the actions undertaken. We will report the results so that everyone can see the progress that has been made.

APPENDIX 6

Proposals for all-age autism strategy consultation events

- The virtual reference group will be asked for their thoughts on these proposals for consultation during March 2015.
- Consultation to take place for a 10-week period, between mid-May and late July 2015. This coincides with the end of the general election in early May and leads into the six-week school summer holiday, beginning late July.
- Consultation to take the form of an online questionnaire (to go live on designated date in mid-May) and three face-to-face events (to be held middle two weeks of June).
- Online questionnaire to be designed by editorial group and consultation specialist in the corporate Communications Unit. To be tested by the virtual reference group during April 2015.
- Five events to cover five CCG areas (including Airedale, Wharfedale and Craven CCG) to be held in Skipton, Harrogate, Northallerton, Selby and Scarborough.
- One evening event (6pm-8pm) and four afternoon events (12-2pm). Events may need to be longer than 2 hours.
- To encourage greater attendance the events will consist of workshops which will be led by subject specialists and designed to be participative and accessible for people with autism and their families. The workshops will be reflective of age phases:
 1. Early Years
 2. School
 3. Leaving school
 4. Adults
- There will be a short introduction by a senior manager, then participants will attend their preferred workshop. Part of the workshop will involve a discussion about the relevant section of the strategy. The remainder of the workshop will consist of practical discussion tailored to the theme of each workshop.
- The autism outreach team will be asking the pupils they work with to submit artwork, personal observations about autism, and these will be displayed

prominently throughout the consultation venues. Artwork, personal stories and anecdotes will also be sought from the virtual reference group. This will be displayed in the consultation venues and will also contribute to the design of the final strategy to encourage participation and to give people a sense of ownership.

- The consultation events will be designed with advice from the virtual reference group as to making the events as autism-friendly as possible, with quiet areas, a crèche and a TV area all possibilities.
- Personal invitations to the consultation events (and to participate in the consultation questionnaire) will be sent out to our existing autism networks. This will be supplemented by extensive publicity via existing NYCC social media channels. A communications plan has been developed by the corporate Communications team and the autism leads for CYPs and HAS. The PCU has agreed to distribute any publicity via its own networks.
- The invitations sent out by email will be accompanied by the draft strategy and executive summary so that people are familiar with the contents before they arrive at the consultation events.



NORTH YORKSHIRE HEALTH AND WELLBEING BOARD

Date: 13th February 2015

North Yorkshire Pharmaceutical Needs Assessment (PNA)

1. Purpose

The briefing is to summarise:

- The background to why a Pharmaceutical Needs Assessment (PNA) has been carried out
- How the North Yorkshire PNA was developed
- The key findings and conclusions contained in the PNA report.

2. Background

The Health and Social Care Act 2012 transferred responsibility to develop and update a Pharmaceutical Needs Assessment (PNA) from PCTs to Health and Wellbeing Boards. A Health and Wellbeing Board's first PNA must be published no later than the 1st April 2015.

A PNA is a statement of the need for pharmaceutical services in an area. It is an assessment that attempts to illustrate population need for pharmaceutical services, and also where services are currently provided in relation to that need. It has a specific remit to inform the market entry process controlled by NHS England, so the focus on the document is on current provision of necessary services, gaps in necessary services, and any gaps that would secure better access to pharmaceutical services in North Yorkshire.

There is also a requirement that development of PNAs includes a minimum 60 day wide ranging formal consultation on a draft PNA which should include a prescribed list of organisations that must be consulted.

3. Development of North Yorkshire's PNA

The health and wellbeing board agreed during its November 2013 meeting the formation of a PNA development group to develop and implement plans for the production and publication of PNA report by April 2015.

The group has been working since March 2014 led on behalf of the Health and Wellbeing Board by NYCC Public Health team. The group has representatives from the Commissioning Support Unit, the Local Medical Committee (LMC), NHS England Area Team, the Local Pharmaceutical Committee (LPC), Healthwatch and City of York Public Health (although separate PNA reports for York and for North Yorkshire have been produced, reports were developed jointly by the PNA group).

The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 set out the legislative basis for developing and updating PNAs. The PNA group prepared the draft PNA in accordance with the regulations and guidance published by the Department of Health. It followed a process that built on the learning from development of the 2011 PNA that included:

- A review of the regulations and guidance,
- A five week questionnaire engagement exercise to gather public, practitioner, pharmaceutical provider, and organisational views on local pharmaceutical provision,
- A review of need, building on the Joint Strategic Needs Assessment,
- Analysis of the current provision of pharmaceutical services in comparison with need in each district in North Yorkshire, highlighting gaps as appropriate.

As required by the regulations a draft PNA was produced for public consultation which ran from the 3rd November 2014 to 12th January 2015, giving in excess of the statutory 60 day consultation required.

A small number of comments on the draft report were received which were used to make minor amendments to the draft report to produce the final version. A summary of the comments received during the consultation and the PNA development group's responses are included in the PNA report.

4. Summary of PNA key findings and conclusions

Key findings of the PNA include:

- There are 106 community pharmacies and 73 dispensing practices in NY. This equates to an average of 3,343 people per dispensing outlet or 29.9 outlets per 100,000 people, similar to other rural areas of England.
- Craven appears to be less reliant on GP dispensing with 3.3 community pharmacies for every GP dispensing outlet, whereas Ryedale is more reliant on GP dispensing having more GP dispensing premises than community pharmacies.
- 97% of the North Yorkshire population live within a 10 minute drive of a dispensing service. 99% can access a community pharmacy within a 20 minute drive, which is the same as the national average.
- Most pharmacies in North Yorkshire now offer a home delivery service.
- "Out of hours" access to pharmacies is poorer in Selby and Ryedale than other areas of the County, however both districts have close travel links to other, well served, areas. Overall 56% of people who responded to the PNA questionnaire rated availability of pharmacy services in their area to be good or very good and 26% adequate. However 10% rated availability as very poor.

The PNA concludes that:

- There are no gaps in the provision of necessary services in North Yorkshire, but the assessment also concludes that there are some gaps in provision that would secure better access to pharmaceutical services in North Yorkshire.
- Community pharmaceutical service providers are ideally placed to provide accessible, high quality services to the whole North Yorkshire population. This level of access, coupled with that of general practice, could be beneficial in meeting the strategic aims of the Health and Wellbeing Board particularly with regards to providing care closer to home and reducing emergency admissions to hospital and care services.
- Commissioners (of public health, health and social care) are asked to consider the evidence-base around providing services in community settings and the role that pharmaceutical service providers can play.

The full PNA report contains an analysis by district of the assessments findings.

5. Post Publication of PNA Report

Following publication of its first PNA, a Health and Wellbeing Board is required to publish a revised PNA within three years of publication of the first assessment or as soon as practically possible if significant changes are identified sooner in the availability or need for pharmaceutical services. Any changes to the availability of pharmaceutical services since the publication of a PNA, that are not so substantial as to justify production of a complete revision of the PNA, must be issued periodically in the form of supplementary statements.

There is also a requirement for NHS England to consult Health and Wellbeing Boards when applications are made to changes pharmacy services e.g. a new pharmacy, or closure, relocation or change in ownership of an existing pharmacy.

It is proposed that the Health and Wellbeing Board designate a manager to act as the conduit for notifications of changes to pharmaceutical services and to coordinate on behalf of the Board responses and production of supplementary statements.

6. Action requested

6.1 The Board is asked to accept the PNA report and approve its publication.

6.2 The Board is asked designate a manager to act as the conduit for notifications of changes to pharmaceutical services and to coordinate on behalf of the Board responses and production of supplementary statements.

Sponsor: Lincoln Sargeant, Director of Public Health

Author: Nick Kemp, Commissioning Support Manager, North Yorkshire Public Health

Pharmaceutical Needs Assessment 2015-2018

North Yorkshire

March 2015

North Yorkshire Health and Wellbeing Board

Tom Hall – Consultant in Public Health

Shane Mullen – Senior Public Health Intelligence Specialist

Nick Kemp – Commissioning Support Manager

If you would like this information in another language or format such as Braille, large print or audio, please ask us.

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1.0 Foreword

To be completed following submission to North Yorkshire Health and Wellbeing Board

2.0 Executive Summary

A pharmaceutical needs assessment (PNA) is a statement of the need for pharmaceutical services in an area. It is an assessment that attempts to illustrate population need for pharmaceutical services, and also where services are currently provided in relation to that need. The assessment also identifies any gaps in access to pharmaceutical services, with the ultimate aim of meeting the North Yorkshire Health and Wellbeing Strategy vision to ensure that *“people in all communities in North Yorkshire have equal opportunities to live long healthy lives”*.

Pharmaceutical services are provided by pharmacies (including distance selling/internet pharmacies), dispensing appliance contractors, dispensing doctors, and local pharmaceutical services.

To provide NHS pharmaceutical services a provider (a pharmacist, a General Practice, a dispenser of appliances) must be on an appropriate list. Pharmaceutical lists are compiled and held by NHS England. This is known as the NHS “market entry” system. The PNA serves as an essential tool to help NHS England manage the “market entry” system and therefore it meets the specific requirements laid down in legislation.

The Health and Social Care Act 2012 transferred the responsibility for developing and updating PNAs to health and wellbeing boards (HWBs). Under the Act, the Department of Health has powers to make Regulations. The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 set out the legislative basis for developing and updating PNAs. North Yorkshire Health and Wellbeing Board has prepared this PNA in accordance with Department of Health Regulations and guidance.

This draft North Yorkshire PNA was developed by a partnership group comprising of representatives from organisations on the Health and Wellbeing Board in addition to the Local Pharmaceutical Committee and the Local Medical Committee.

The group followed a process that built on the learning from developing the 2011 PNA. The group:

- reviewed the Regulations and guidance,
- conducted a five week questionnaire engagement exercise to gather public, practitioner, pharmaceutical provider, and organisational views on local pharmaceutical provision,
- reviewed need, building on the [Joint Strategic Needs Assessment](#),
- analysed the current provision of pharmaceutical services in comparison with need in each district in North Yorkshire, highlighting gaps as appropriate.

In summary, this needs assessment concludes that there are no gaps in the provision of necessary services in North Yorkshire.

The assessment also concludes that there are some gaps in provision that would secure better access to pharmaceutical services in North Yorkshire.

Community pharmaceutical service providers are key members of thriving communities in North Yorkshire, and ideally placed to provide accessible, high quality services to the whole population. This level of access, coupled with that of general practice, could be beneficial in meeting the strategic aims of the Health and Wellbeing Board particularly with regards to supporting strong communities, providing care closer to home and reducing emergency admissions to hospital and care services.

Commissioners (of public health, health and social care services) should consider the evidence-base around providing services in community settings and the role that pharmaceutical service providers can play.

As required by regulations, the North Yorkshire Health and Wellbeing Board ran a public consultation on this document from 3 November 2014 to 12 January 2015, giving in excess of the statutory 60 day consultation required.

In the consultation, the Health and Wellbeing Board asked:

- If the information contained in the draft PNA was clear, comprehensive, and accurate?
- If the PNA captured the scope of pharmaceutical services and the opportunities presented by pharmaceutical service providers to meet the health needs of the North Yorkshire population?

During the consultation period comments on the draft PNA report were received from members of the public and people employed by pharmacies, NHS England and a GP practice. They included some minor corrections to errors and to some details which have been now been included in the final report

The final draft of the PNA was presented to the Health and Wellbeing Board on 13th February 2015 for final approval.

3.0 Summary of findings

Population need

- North Yorkshire covers 3,000 square miles ranging from isolated rural settlements and farms to market towns and larger urban conurbations such as Harrogate and Scarborough.
- Whilst North Yorkshire is in overall terms more affluent than a typical local authority in England, there are nevertheless areas of profound deprivation, including some parts of the County that are ranked within the 10% most deprived areas in England.
- On average the current population is older than that of England. The current North Yorkshire population structure indicates that proportionally there are more people at each of the five year age groups from 45 years and older when compared with England. Conversely North Yorkshire has a smaller population at each of the five year age bands less than 45 years when compared with England except in 10-19 year old males.
- The North Yorkshire population is projected to grow in the 50+ age groups with a slight decrease in the 40-49 by 2021. The 0–14 age groups are expected to grow by the year 2021, along with the 25-39 age groups. The 15-24 age groups are expected to decrease by 2021.
- Overall, the population of North Yorkshire is becoming older with a predicted increase in people aged over 65 from 133,000 in 2013 to 211,000 by 2037, and a predicted increase in people aged over 85 from 17,500 to 47,000. The rate of increase in these populations is quicker than that of other similar Shire County areas.
- The demographic profiles of the population vary from district to district. For example:
 - Richmondshire has a significantly larger number of young men due to Catterick Garrison. These demographics profiles are important as lifestyle issues tend to be more prevalent in young people, for example sexually transmitted infections (STIs) and smoking prevalence.
 - Scarborough and Harrogate have a significant older population. This is important as age is associated with increased levels of ill health and complex and multiple needs.
 - The ethnic diversity varies within North Yorkshire districts with Harrogate having the biggest ethnic group that are 'white other'.
- North Yorkshire has issues with smoking, obesity and alcohol use particularly linked to deprivation. These pockets also relate to illness in the population.
 - Circulatory disease (including heart disease and stroke) and cancers account for the greatest proportion of deaths within North Yorkshire at 72%.
 - Cancers are the most common cause of death under the age of 75 years (early deaths).
 - The potential years of life lost vary significantly from district to district. Scarborough, for example, is a statistical outlier for premature mortality from heart disease and stroke. However the years lost also vary in line with deprivation - the top 10% most deprived areas account for 25% of all potential years of life lost due to pneumonia.
 - Mental health problems are significantly associated with long-term conditions and multiple morbidities and they are a cause and consequence of episodes of ill health.

- A key policy focus for North Yorkshire is the current unplanned use of NHS and social care services. Service use again varies across the County, pointing towards areas where planned care and access to planned care may need to improve.
- Emergency admissions in North Yorkshire continue to rise over time. Emergency admissions for acute conditions that should not usually require a hospital admission in particular are on the rise. The main drivers of these admissions are urinary tract infections (25%), gastroenteritis (19%) and influenza/pneumonia (18%).
- Causes of these early deaths and increased NHS and social care service use are complicated but a number of factors are potential causal factors:
 - Smoking is still the leading cause of early death.
 - Obesity is a major cause of chronic ill health, in particular cardiovascular disease.

Views on pharmaceutical provision (from 118 questionnaires)

Generally, respondents to the public questionnaire tend to access pharmaceutical services close to home (37%), close to their GP (18%) or at their GP (15%). When asked where they would prefer to attend, respondents said close to their home (31%), at their GP (28%) or close to their GP (15%).

Most people (58%) said they normally visited a pharmacy on weekdays between 9am and 6pm or at no particular time (28%). Most people would also prefer to visit on weekdays between 9am and 6pm (40%) or at no particular time (32%). Positively, respondents said they could generally find a pharmacy open when needed (83% always or usually). However only 37% people said they could find a pharmacy open after 6pm on weekdays and only 31% open on Sundays.

Overall 56% of people rated availability of pharmacy services in their area to be good or very good and 26% adequate. However 10% rated availability as very poor.

Fifty questionnaires contained between them 60 identifiable comments about problems when using their usual pharmacy. The most frequently mentioned problem (26 times) was medicines not being in stock, followed by delays waiting for medicines to be dispensed either in the pharmacy or waiting for repeat prescription requests to be processed

The purpose of the public and stakeholder questionnaires was for people to express their views to commissioners and providers of pharmaceutical services and not to provide a representative snapshot of the population. The public questionnaire response rate was limited so the results should be interpreted with caution and not viewed as fully representative of North Yorkshire.

Current provision and gaps in necessary services

- According to NHS Englandⁱ, 84% of adults visit a pharmacy each year, 78% for health-related reasons.
- In England, over 90% of prescription items are dispensed free. This includes exemptions from charging for those on low incomes, such as:
 - those on specific benefits or through the NHS Low Income Scheme
 - those who are age exempt
 - those with certain medical conditions
- The level of activity in community pharmacy in North Yorkshire is significant, with over 15 million items dispensed in 2013/14,
- In North Yorkshire there are a total of 106 pharmacies and 73 dispensing practices giving a total of 179 dispensing outlets. When analysed against population size, this equates to an

average of 3,343 people per dispensing outlet or 29.9 outlets per 100,000 population. There is one dispenser of appliances and one distance selling pharmacy.

- Analysis showed that 95% of the North Yorkshire population live within a 10 minute drive of a community pharmacy.
- Further, 97% of the North Yorkshire population can access pharmaceutical services (community pharmacy and dispensing practices) within a 10 minute drive time.
- In making this assessment the Health and Wellbeing Board does not consider there to be any gaps in the current provision of necessary services in North Yorkshire.

Gaps in provision that would secure improvements and better access

In making this assessment the Health and Wellbeing Board has identified the following gaps that would otherwise secure improved access to services.

Table 1 Service improvements and better access

District/ Borough	Improvements and better access
Craven	This assessment deems there to be no areas for improvement or better access.
Hambleton	Although there is large-scale housing development proposed in the Hambleton area, the sites of development are already within close proximity to existing services. Therefore, this assessment deems there to be adequate provision and access to existing pharmaceutical services.
Harrogate	This assessment deems there to be no areas for improvement or better access.
Richmondshire	As Richmondshire is reliant on GP dispensing services, it means that although access to dispensing services is adequate, access to the full range of “essential services” and any enhanced services may not be as good as other parts of North Yorkshire.
Ryedale	Access to pharmaceutical services on week day evenings, Saturday evenings and Sundays could be improved for Ryedale residents. This would also provide improved access to respond to planned housing developments, outlined above.
Scarborough	This assessment deems there to be no areas for improvement or better access.
Selby	Access to pharmaceutical services on Saturday evenings and Sundays could be improved for Selby residents.

4.0 Background

Community pharmaceutical services have long been at the centre of local health care delivery; at the heart of communities providing much needed access to medicines, appliances and expert advice. Nearly 80% of adults visit a pharmacy for a health-related reason at least once a year. Pharmaceutical services work hand-in-glove with primary care and community care services to ensure that care is preventative, accessible and of a high quality.

According to the National Institute for Health and Care Excellence (NICE, 2005) *“a health needs assessment is a systematic method for reviewing the health issues faced by a population, leading to agreed priorities and resource allocation that will improve health and reduce health inequalities”*.

A pharmaceutical needs assessment (PNA) is an assessment that attempts to illustrate population need for pharmaceutical services, and also where services are currently provided in relation to that need. The assessment should also identify any gaps in access to pharmaceutical services, with the ultimate aim of meeting the North Yorkshire Health and Wellbeing Strategy vision to ensure that *“people in all communities in North Yorkshire have equal opportunities to live long healthy lives”*.

To provide NHS pharmaceutical services a provider (a pharmacist, a General Practice, a dispenser of appliances) must be on an appropriate list. Pharmaceutical lists are compiled and held by NHS England. This is known as the NHS “market entry” system.

What are “pharmaceutical services”?

Core pharmaceutical services relate to the provision of drugs, medicines and appliances (including incontinence aids, dressings and bandages etc.).

What are “pharmaceutical services” in relation to the PNA?

- *“essential services”* which every community pharmacy providing NHS pharmaceutical services must provide and is set out in their terms of service¹ – the dispensing of medicines, promotion of healthy lifestyles and support for self-care;
- *“advanced services”* - services community pharmacy contractors and dispensing appliance contractors can provide subject to accreditation as necessary – these are Medicines Use Reviews, the New Medicines Service for community pharmacists, Appliance Use Reviews and the Stoma Customisation Service for dispensing appliance contractors; and
- locally commissioned services (known as *“enhanced services”*) commissioned by NHS England.

The regulations do not cover “pharmaceutical services” previously commissioned by Primary Care Trusts that are now the responsibility of local authorities (under Public Health Regulations) and Clinical Commissioning Groups. Although not a *mandatory* element of a PNA, where the need for a service is clear it has been stated in this assessment to help guide local commissioning.

¹ The precise contractual requirements for providing NHS pharmaceutical services are set out in Schedules 4-6 of the Regulations

This system is governed by law. A person who wishes to provide NHS pharmaceutical services must apply to NHS England demonstrating that they are able to meet a pharmaceutical need as set out in the relevant pharmaceutical needs assessment.

There are exemptions to this, such as for applications to meet a need that was not foreseen in the PNA or to provide pharmaceutical services on a distance-selling basis (such as on the internet or by mail-order).

Types of providers:

- “*pharmacy contractors*” – independent contractors working individually or as multiple groups of pharmacies who provide NHS pharmacy services in community pharmacy settings. By definition the practice of pharmacy is the safe and effective use of medicines;
- “*dispensing appliance contractors*” – appliance suppliers are an independent group with their own terms of service who supply, on prescription, appliances such as incontinence aids, dressings, bandages etc. They cannot supply medicines;
- “*dispensing doctors*” – medical practitioners who are authorised to provide drugs and appliances in designated rural areas known as “controlled areas” – see section 6.1 for more information;
- “*local pharmaceutical services (LPS) contractors*” – provide services specifically negotiated to meet local need; however this must include an element of dispensing;
- “*distance selling pharmacies*” – although not covered by the same market entry system that relies on the PNA, distance-selling pharmacies are able to supply medicines to the population. These services are often mail-order or internet based.

PNAs were first published by Primary Care Trusts (PCTs) back in 2011. The first PNA for North Yorkshire and York can be accessed at www.nypartnerships.org.uk/pna.

The Health and Social Care Act 2012 transferred the responsibility for developing and updating PNAs to health and wellbeing boards (HWBs). Under the Act, the Department of Health has powers to make Regulations. The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 set out the legislative basis for developing and updating PNAs.ⁱⁱ

In addition to the requirements to produce and update PNAs the Health and Social Care Act 2012 placed a duty on commissioners of healthcare services to reduce health inequalities in access to services and outcomes. PNAs are therefore in a position to illustrate the needs of key vulnerable groups (for example travellers or homeless people).ⁱⁱⁱ

This PNA attempts to analyse the need for pharmaceutical services in North Yorkshire in relation to the provision of services to identify any gaps in necessary service provision. The assessment also looks to the future to identify where additional pressures may fall on pharmaceutical services, or where additional developments may be beneficial to meeting the needs of the North Yorkshire population.

5.0 Development of a PNA for NHS North Yorkshire and York

In 2013 a paper summarising the legislative requirements of the PNA was presented at the North Yorkshire Health and Wellbeing Board.^{iv} The paper included the recommendation to establish a PNA Steering Group to oversee the development of the PNA for North Yorkshire. Given the proximity of York to North Yorkshire and the complex organisational boundaries of Vale of York Clinical Commissioning Group, it was decided that the Steering Group would support the development of both York's and North Yorkshire's PNAs. However, both HWBs would publish distinct assessments.

The Steering Group terms of reference for the steering group are included as Appendix 1. The group is attended by representatives from:

- City of York Council
- North Yorkshire County Council
- Medicines Management Team, North Yorkshire and Humber Commissioning Support Unit – representing all the CCGs in North Yorkshire and York
- Local Pharmaceutical Committee (LPC) – representing the LPC and providing pharmaceutical advice
- Local Medical Committee (LMC) – representing the LMC and providing medical advice
- Healthwatch
- NHS England (NHSE) – representing primary care commissioning and providing a link to the Local Pharmacy Network

The Steering Group took the following steps:

- a. Reviewed the 2011 NYY PNA.
- b. Reviewed the 2013 Regulation and Department of Health Guidance – matters for consideration.
- c. Developed an action plan, including engagement with pharmaceutical service providers, the public, service commissioners, and other local health and social care providers.
- d. Identified needs through the Joint Strategic Needs Assessment and the addition of further key data.
- e. Mapped current service provision.
- f. Identified unmet need and priorities.
- g. Consulted on the findings.
- h. Published the final version of the document.

This process was in line with DH guidance and Regulations.

5.1 The minimum requirements of a PNA

Schedule 1 of the 2013 regulations sets out the minimum information to be contained in a PNA.

This can be summarised as:

- **Current provision of necessary services** – what services are currently provided to *meet the need for pharmaceutical services* in the Health and Wellbeing Board area? It is important to note that this also includes services delivered outside of North Yorkshire but that contribute to meeting its population's needs. This is particularly relevant in a rural county where the population may travel, for example, to the bigger urban centres for work.

- This requirement also includes the need to map current provision of services by:
 - Pharmacies
 - Distance selling pharmacies
 - Dispensing appliance contractors
 - Dispensing doctors.
- **Gaps in provision of necessary services** – this is a statement on the pharmaceutical services that are required to meet current identified pharmaceutical need or future need:
 - this could involve identifying a current gap in provision in a particular locality in terms of access; or
 - this could be a particular population need where there is pharmaceutical provision, but not the right type of provision to meet that need, e.g. if there is not stop smoking provision in a high prevalence area;
 - it could involve the identification of a future large-scale housing development for example.
- **Current provision of other relevant services** – this is a statement of pharmaceutical services that are:
 - provided in the HWB area which – although they don't meet identified need – secure improvements or better access to pharmaceutical services;
 - provided outside the HWB area which – although they don't meet identified need – secure improvements or better access to pharmaceutical services;
 - provided an impact on the assessment of the need for pharmaceutical services.
- **Gaps in provision that would secure improvements and better access** – this is a statement of the pharmaceutical services that are not provided but would:
 - if provided, secure improvements or better access to pharmaceutical services;
 - if provided, if a future circumstance were to occur (e.g. a housing development), secure better access to pharmaceutical services in its area.
- **Other services** – a statement of any NHS services provided or arranged by the HWB, NHSE, a CCG or NHS (Foundation) Trust which affect the need for pharmaceutical services – this could be other clinics providing stop smoking services or immunisation services for example.
- **How the assessment was carried out** – in particular:
 - How the localities were defined.
 - How the PNA has taken into account:
 - The different needs of different localities.
 - The different needs of people in its area who share a protected characteristic.
 - A report on the consultation that it has undertaken.

5.2 Reviewing the 2011 North Yorkshire and York PNA (NYYPNA)

The PNA Steering Group has members who were involved in the development of the 2011 NYYPNA therefore the knowledge and experience of the PNA process has been translated into the development of this 2014 assessment.

The PNA Steering Group used the initial meeting to review the process undertaken in 2011 and identify the strengths and areas for improvement in the approach.

Strengths of the 2011 approach

The group identified that the organisation and planning of the 2011 report was very strong with a significant amount of expertise being used in the development – particularly by involving key stakeholders throughout the process, such as the Local Pharmaceutical Committee and the Local Medical Committee. The group also identified that significant time and resource was given to the production of the PNA, which resulted in a comprehensive assessment.

Areas for improvement

The group discussed the engagement approach used in 2011 and decided that engagement events were not the most effective way of getting public and stakeholder views. The events were considered to be costly with poor uptake of invitations, and this was echoed in the learning from other areas. The representation of views also tended to be narrow.

It was therefore decided to use a questionnaire approach to engage with, and gain the expressed views of, the public, practitioners and stakeholders. The group concluded that this would be a more effective approach to engagement, enabling the group to involve the public, stakeholders, providers of pharmaceutical services and health and social care practitioners. The group agreed that the purpose of the questionnaire was to allow people to express their views on pharmaceutical provision and not to conduct a representative survey of population need.

The group also discussed that the engagement process does not remove or reduce the requirement for a potential provider or NHS England to conduct a more comprehensive engagement/consultation exercise in a locality if a change to service provision is being made.

5.3 The 2013 Regulations and Department of Health Guidance – matters for consideration

Regulation 9 sets out the matters Health and Wellbeing Boards must have regard to when developing their PNAs, as far as is practicable to do so.

The following are the matters for consideration by Health and Wellbeing Boards:

- The demography of its area.
- Whether there is sufficient choice with regard to obtaining pharmaceutical services.
- Whether need varies in different localities.
- Likely future needs.

Determining how the population obtain pharmaceutical services:

- Access
- Choice
- Changing needs
- Meeting the needs of specific populations or vulnerable groups.

The group also considered local strategies and plans, particularly:

- [The Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy](#),
- The Children and Young People's Plan, ["Young and Yorkshire"](#)

-
- [The Better Care Fund plan](#),
 - [The Director of Public Health's Annual Report 2014](#),
 - The 5-year Commissioning Plans of local Clinical Commissioning Groups,
 - Local housing plans,

What is out of scope?

The group considered the geographical footprint of the pharmaceutical needs assessment and agreed that the district and borough council boundaries gave sufficient detail as to provide population health data, along with service provision information, while still being able to complete the assessment within the required timescales and produce a meaningful document.

The group considered taking the analysis to a smaller geography level, but felt that there would be insufficient benefit compared with the feasibility of conducting the analysis at a smaller level of geography. Therefore, the assessment of need and service provision makes generalisations at a district council population level and therefore *may* miss variations in need and access within those generalisations. The group felt that any local detail or tacit information would be known by steering group members or raised through engagement work with the public and stakeholders.

For the purposes of this assessment the PNA steering group considered that any comments and challenges from the public or North Yorkshire stakeholders on the law and regulations surrounding market entry criteria and the implementation of controlled area designation and reserved localities (see Section 6.0) was outside of the scope of this report.

5.4 Action Planning and Questionnaire Development

Using the learning from the development of the 2011 PNA and the DH guidance the steering group identified specific aspects of the report that needed developing.

Details on:

- The population and population need, including the views of the population.
- Current pharmaceutical provision and the views of contractors with regards to service development areas.
- The views of professionals who rely on pharmacy services.
- The priorities of local strategic stakeholders and partners in North Yorkshire, and their views on local pharmaceutical service provision.

The population and population need

The group discussed the requirement to be clear on the population and population need. North Yorkshire has a complex health and social care economy, including six Clinical Commissioning Groups (CCGs) three of which also operate in Bradford, City of York, East Riding of Yorkshire and Cumbria, six acute hospital trusts and three Mental Health Trusts. The area is also served by NHS England and a Commissioning Support Service. The County Council relates to seven District Councils and has close economic and transport links with the conurbations of West and South Yorkshire and Teesside. The General Hospital provision for the majority of residents of North Yorkshire requires them to travel outside the County boundary.

The Health and Wellbeing Board for North Yorkshire incorporates membership from the County Council, District Councils, five CCGs, (Harrogate and Rural District, Hambleton, Richmondshire and Whitby, Scarborough and Ryedale, Vale of York and Airedale Wharfedale and Craven). The

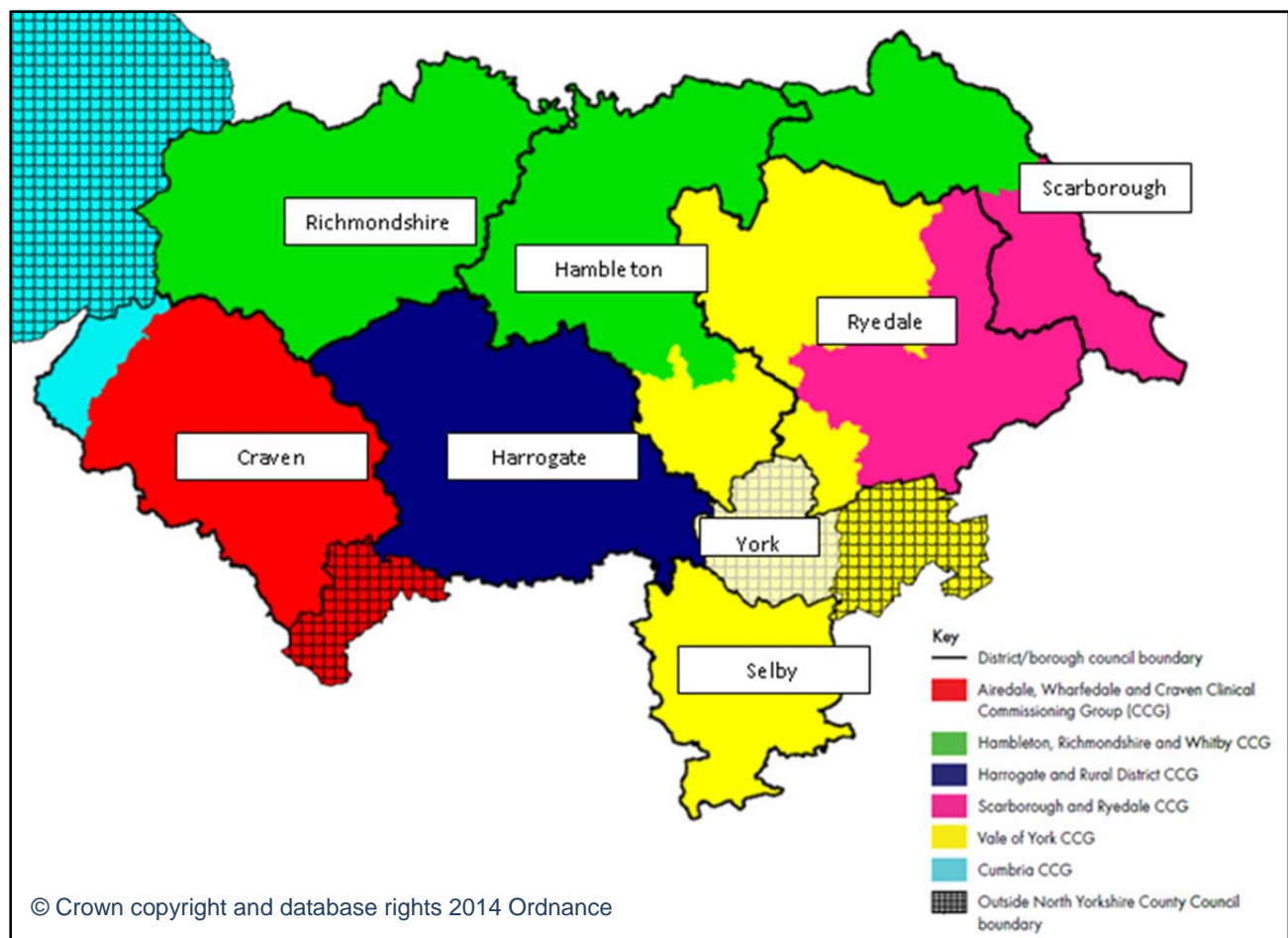
footprint of Airedale, Wharfedale and Craven crosses into the Health and Wellbeing Board coverage of Bradford Metropolitan District Council and the Vale of York Districts covers the City of York and the East Riding of Yorkshire.

Finally, to the extreme west of North Yorkshire, the general practices of Ingleton, Little and High Bentham fall into Cumbria CCG.

The North Yorkshire Health and Wellbeing Board (NYHWB) have arrangements for joint working with Bradford City and City of York Councils and Health and Wellbeing Boards.

The steering group discussed the requirement for the PNA to cover the Health and Wellbeing Board boundary for North Yorkshire which relates to that of the NYCC boundary (see Figure 1).

Figure 1 Map of North Yorkshire identifying the NYCC boundary and the district and CCG boundaries



This North Yorkshire geographical area was deemed too large to conduct a single analysis of need and therefore the analysis has been split in two ways:

- By district council boundary (seven geographies).
- By Clinical Commissioning Group boundary, excluding the populations of other Health and Wellbeing Boards that are within those CCG boundaries (this applies to Cumbria CCG, Airedale, Wharfedale and Craven CCG, and Vale of York CCG).

The analysis of need was initially done as a desktop exercise looking at key indicators of need, taken where possible from the Joint Strategic Needs Assessment (JSNA) (see Section 7.0). However, this analysis of quantitative data only gives a relatively narrow perspective on need. The National Institute of Health and Care Excellence have guidance on conducting needs

assessments^v that recommends that assessments should also include the expressed opinions of the public and stakeholders.

Public Questionnaire

In order to gather these expressed opinions the group opted for a public questionnaire that could be completed online or in hard copy. The questionnaire was designed to capture:

- Individual or voluntary/community organisation (including patient group) views.
- The location referred to in the response.
- Information on how pharmaceutical services are accessed – frequency, times of day, how they are accessed.
- Information on how people would prefer to access services.
- Types of services used.
- Views on the availability of pharmaceutical services.
- The priorities for users in terms of access to and availability of services.
- Basic details on the responder – age, gender, place of residence etc.

Pharmaceutical Service Providers - Current Pharmaceutical Service Provision

A separate questionnaire was developed for current pharmaceutical service providers. Within the questionnaire was a requirement to report the hours that a contractor is operating and the services currently provided other than essential.

The questionnaire also sought opinions on future improvements to pharmaceutical service provision.

Engaging with Professionals and Strategic Partners

In order to effectively engage with local strategic partners (including commissioners and planners), and care professionals in a timely manner, the group decided on using a questionnaire method to collect information.

The steering group segmented the questionnaires by:

- Strategic Partners – for people and organisations that commission services or plan other aspects of communities (e.g. housing, transport, etc.) that could impact on the need for pharmaceutical services in particular areas.
- Health or social care service providers and practitioners.

The questionnaires aimed to identify current or future initiatives (commissioning intentions, housing developments etc.) that may impact on the need for and access to pharmaceutical services. As well as capturing the views of frontline professionals and commissioners on the quality and access to pharmaceutical services. Respondents were also encouraged to provide their views on future developments for pharmaceutical services.

Copies of the Questionnaires are included in Appendix 8.

Communications and Questionnaire Distribution Process

The group generated a distribution list for each of the questionnaires while recognising that it was inevitable that some individuals may not receive a direct notification that the questionnaires were live. To counter this, the questionnaires, and communications that accompanied the questionnaires, encouraged people to send on the web-link to others they felt would be interested in expressing their views.

The questionnaires were live on the North Yorkshire Partnerships website for five weeks, from 11 June to 18 July 2014.

The group also advertised the launch of the questionnaire with a press release issued by North Yorkshire County Council and North Yorkshire and Humber Commissioning Support Unit.

The full distribution list for the questionnaires can be found in Appendix 9.

5.5 Identifying Local Needs

Section 2.0 defined NHS pharmaceutical services. Attempting to translate the service requirements into key indicators of quantifiable need is somewhat more difficult. The majority of health needs information was identified through the [North Yorkshire Joint Strategic Needs Assessment \(2012\)](#) and additional needs assessments completed by North Yorkshire County Council's Public Health Team. Additional indicators of need were generated when required.

Essentially the indicators of need relate to individuals and populations who need:

- Drugs, medicines and appliances.
- Advice and support on healthy lifestyles.
- Support for self-care.
- Medicines or appliance reviews.

The need for the above is likely to be extremely variable in an otherwise healthy population (healthy people will have sporadic bouts of illness, perhaps related to cold weather but otherwise they are occasional), so identifying need will be driven by a number of more specific indicators related to the services outlined above:

Population

- The number of people in an area – the sheer number of people living in an area will drive need for pharmaceutical services.
- Deprivation can be used as a proxy indicator for need.
- The number of children and older people in an area – children and older people utilise NHS services more on average than the working adult population.
- Key data (where available) on populations of need e.g. looked after children, Gypsy and Travellers.

Illness and disability

- Life expectancy and healthy life expectancy and the inequalities between populations.
- Activities of daily living and/or the Disability Living Allowance as a proxy indicator of health and social care need.
- Service use and health outcomes driven by long-term conditions and illness.

Risks to health

- Number and rates of smokers and smokers from routine and manual backgrounds.
- Number and rates of hazardous and harmful drinkers.
- Number and rates of overweight and obese adults.
- Number and rates of teenage conceptions.
- Number and rates of injecting drug users.

Wider determinants

- Data on long-term unemployment.
- Geographical barriers index.
- Car ownership or other access indicator from the census.

These needs assessment data have been displayed for each district footprint, and occasionally (where the data has been limited) by Clinical Commissioning Group. The assessment also accounts for historical rates and projections where possible. The 2012 North Yorkshire Joint Strategic Needs Assessment^{vi} already provides a significant assessment of population need for health and care services. The PNA therefore does not attempt to replicate the JSNA but it does draw out key points. These are summarised in Section 7.0.

5.6 Mapping Current Provision

The 2013 Regulations specify that the PNA must include a map identifying the premises at which pharmaceutical services are provided in North Yorkshire. The Regulations require that the map (or maps) is kept up to date as far as practicable.

To meet this requirement the pharmaceutical services in North Yorkshire have been mapped in this report.² Current service provision was mapped by each district overlaid on population density, indicating travel time radiuses by road.³

The maps illustrate the location of:

- Pharmacies.
- Distance selling pharmacies.
- Dispensing appliance contractors.
- Dispensing doctors.

Interactive maps showing pharmacies and a range of other health and social services can be accessed here <http://maps.northyorks.gov.uk/connect/?mapcfg=health>.

Interactive maps showing a more detailed picture of pharmaceutical services offered across North Yorkshire – including the services provided and opening hours – can be accessed here http://maps.northyorks.gov.uk/connect/?mapcfg=ph_pharmacies.

The static versions of pharmaceutical services maps are available in Appendix 5 and also available online. They can be accessed at www.nypartnerships.org.uk/pna. The static maps also identify the location of GP Practices – delineating between dispensing and non-dispensing practices.

5.7 Identifying unmet needs and priorities

During the whole needs assessment process the steering group were identifying potential unmet needs or areas for improvements.

The steering group held a specific meeting to finalise the decisions for each locality and agree the final content of the PNA.

The assessment of current and future need for each locality is outlined in Section 11.0.

² Using MapInfo.

³ The drive time maps are produced using RouteFinder software that calculates travel time based on the road network and the average speeds associated with the different sections of the road.

5.8 Consulting on findings

The 2013 Regulations stipulate the minimum consultation requirements, including a need to consult with local contractors. The regulations specify that:

- Health and Wellbeing Boards must consult with the Local Pharmaceutical Committee (LPC), the Local Medical Committee (LMC), local providers, Healthwatch, the public and patient groups, NHS Trusts or NHS Foundation Trusts, NHS England and neighbouring Health and Wellbeing Boards at least once during the process of developing a PNA.
- Any neighbouring Health and Wellbeing Boards who are consulted should ensure that any LMC and LPC in the area are consulted.
- A minimum period of 60 days for consultation responses.
- Those being consulted can access the draft PNA on a website or, if requested, be sent an electronic or hard copy version.

The consultation on the NYPNA commenced on 3 November 2014 and closed on 12 January 2015 giving in excess of the prescribed 60 day consultation period. During the consultation period comments on the draft PNA report were received from members of the public and people employed by pharmacies, NHS England and a GP practice. They included some minor corrections to errors and to some details which have been now been included in the final report

A summary of the comments received during the consultation period and the response of the PNA development group, including a list of groups and organisations who were contacted directly as part of the consultation can be found in Appendix 10

6.0 Control of Entry Application Process

Market Entry by means of Pharmaceutical Needs Assessment

The Health Act 2009 requires that NHS England Area Teams (previously Primary Care Trusts) use PNAs as the basis for determining market entry to NHS pharmaceutical services provision (known as the “Market Entry test”). The detail of the basis for applications is covered by the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. This gives the regulatory framework under which applications should be made to Area Teams (ATs) and how they should determine those applications. This supersedes the “Control of Entry” test which had previously been the method for determining pharmacy applications.

There are two types of application that can be made by pharmacy or dispensing appliance contractors within the 2013 Regulations:

- Routine applications.
- Excepted applications.

The routine applications will:

- Meet an identified current or future need or needs.
- Meet identified current or future improvements or better access to pharmaceutical services; or
- Provide unforeseen benefits, i.e. applications that offer to meet a need that is not identified in a PNA but which the AT is satisfied would lead to significant benefits to people living in the AT footprint.

Some of the excepted applications will cover:

- Relocations that do not result in significant change to pharmaceutical services provision.
- Change of ownership applications.
- The above combined.
- Distance selling pharmacies. This is where the pharmacy provides all the essential services within the pharmacy terms of service but without making face-to-face contact with the patient e.g. internet pharmacies.

6.1 Controlled localities (rural)

Patients who live in a controlled locality more than 1.6 km (1 mile) from any pharmacy have the choice of receiving dispensing from a pharmacy or from their GP (if they provide this service).

In accordance with the NHS Regulations, the whole of NHS North Yorkshire and York area has been designated as controlled (rural) with the following exceptions:

Table 2 Non-Controlled Areas in North Yorkshire and York

District	Non controlled locality (urban)	Date of last review	Earliest date of review
Craven	Skipton	21/10/11	21/10/16
Hambleton	Northallerton	29/3/11	29/3/16
Richmondshire	Richmond	6/10/11	6/10/16
Ryedale	Malton and Norton	6/10/11	6/10/16
Ripon	Ripon	19/3/11	19/3/16
Scarborough	Scarborough – Newby and Scalby	13/2/09	13/2/14
	Scarborough Town – excluding Newby and Scalby	2/12/09	2/12/14
	Whitby	18/10/10	18/10/15
Selby	Selby	6/10/11	6/10/16
York	Haxby	18/10/10	18/10/15
	York	6/3/08	6/3/13
Harrogate	Harrogate and Knaresborough	6/10/11	6/10/16
	Ripon	19/3/11	19/3/16

These locality boundaries are illustrated on maps in Appendix 6. They can also be accessed at <http://www.nypartnerships.org.uk/pna>.

Controlled and non-controlled areas are designated by NHS England Area Team under The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. Only the AT has the right to review an area if it considers this is necessary. The Local Pharmaceutical Committee (LPC) and Local Medical Committee (LMC) can apply to the NHS England Area Team for it to review an area but it is the decision of the AT whether it considers this is necessary.

There is no set date in the Regulations when an area has to be reviewed, but the earliest date is five years after the designation date. An area can only be reviewed sooner than five years if there has been a significant change in circumstances such as a major housing development.

6.2 Reserved locations

A reserved location is designated, in a controlled locality, where the total patient population within 1.6km (1 mile) of the proposed location of a new pharmacy is less than 2,750 at the time an application is received. The concept of reserved locations was first introduced in the National Health Service (Pharmaceutical Services) Regulations 2005, SI 2005/641 and is primarily intended to protect the dispensing rights of an existing GP dispensing service with premises in an area to be designated as a reserved location.

In normal circumstances, if a pharmacy opens in a controlled locality patients living within 1.6km (1 mile) of the pharmacy would cease receiving dispensing services from their dispensing doctor and

instead use the services of the pharmacy. In a reserved location this would not apply; patients would continue to be able to exercise a choice as to whether to continue receiving dispensing from their dispensing doctor or from the pharmacy. The reason for this is that below 2,750 patients the viability of introducing a new pharmacy is questionable. It therefore allows existing GP dispensing practices to continue to provide dispensing services to those patients that wish to continue receiving services.

Reserved location status will continue to be considered and determined by the NHS England as required by the Regulations in response to applications for new pharmacies in controlled localities. Maps of the current reserved locations are available in Appendix 7 and can be accessed at www.nypartnerships.org.uk/pna.

7.0 Current Provision of Pharmaceutical Services

In North Yorkshire the following pharmaceutical services are commissioned by:

NHS England

- Essential services
- Advanced services
- Local enhanced services
- Local pharmaceutical service contract
- Essential Small Pharmacies Local Pharmaceutical Services contracts
- Appliance contracts
- Distance selling and Internet pharmacy

The details of all these service are outlined below.

7.1 Services provided in Community Pharmacy under the contractual framework

The Community Pharmacy contractual framework is made up of three sections – Essential Services, Advanced Services and Enhanced Services.

7.1.1 Essential services

Dispensing of medicines or appliances

The supply of medicines and appliances ordered on NHS prescriptions, together with information and advice, to enable safe and effective use by patients and carers, and maintenance of appropriate records.

Repeat Dispensing

The management and dispensing of repeatable NHS prescriptions for medicines and appliances, in partnership with the patient and the prescriber. Additional to requirements to those for dispensing, are that the pharmacist ascertains the patient's need for a repeat supply and communicates any clinically significant issues to the prescriber.

Aims and intended service outcomes

- To increase patient choice and convenience, by allowing them to obtain their regular prescribed medicines and appliances directly from a community pharmacy for a period agreed by the prescriber.
- To minimise wastage by reducing the number of medicines and appliances dispensed which are not required by the patient.
- To reduce the workload of General Medical Practices, by lowering the burden of managing repeat prescriptions.

Clinical Governance

This service covers the following areas:

- Patient and public involvement – including Practice leaflet, Publicising NHS services, Patient satisfaction survey, Approved complaints system, Monitoring arrangements for compliance with the Disability Discrimination Act 1995.

-
- Clinical audit programme.
 - Risk management programme.
 - Clinical effectiveness programme.
 - Staffing and staff management programme.
 - Use of information.
 - Premises standards

Public Health – promotion of healthy lifestyles

The provision of opportunistic healthy lifestyle advice and public health advice to patients receiving prescriptions who appear to:

- Have diabetes.
- Be at risk of coronary heart disease, especially those with high blood pressure.
- Smoke.
- Be overweight.

Pro-active participation in national/local campaigns, to promote public health messages to general pharmacy visitors during specific targeted campaign periods. To support the delivery of public health priorities, the Public Health team, at NYCC, produces ‘Improving Health Together’ factsheets.

The factsheets are provided to community pharmacies to support their public health role - delivering lifestyle advice and information. The factsheets cover a wide variety of topics and give up-to-date, evidenced based information, policy context and practical suggestions for delivering effective key messages in relation to each campaign topic. The factsheets also provide details of **free** resources and reliable websites where further information is available. They can be downloaded from <http://www.northyorks.gov.uk/article/28297/Public-health-factsheets> .

Disposal of unwanted medicines

Acceptance of unwanted medicines from households and individuals which require safe disposal.

Signposting

The provision of information to people visiting the pharmacy, who require further support, advice or treatment which cannot be provided by the pharmacy, on other health and social care providers or support organisations who may be able to assist the person. Where appropriate, this may take the form of a referral.

Support for Self Care

The provision of advice and support by pharmacy staff to enable people to derive maximum benefit from caring for themselves or their families.

7.1.2 Advanced Services

These services are: Medicines Use Reviews (MUR), New Medicines Service (NMS), Appliance Use Review (AUR) and stoma customisation.

Medicines Use Reviews

The MUR consists of accredited pharmacists undertaking structured adherence-centred reviews with patients on multiple medicines, in particular for those with long-term conditions. The pharmacy is only allowed to complete up to 400 of these reviews within a financial year and 70% of these must be for patients within certain target groups. For 2014/15 they are:

-
- Patients taking high risk medicine as included in certain British National Formulary (BNF) subsections which are:
 - Non-steroidal anti-inflammatory drugs (NSAIDs).
 - Anticoagulants.
 - Antiplatelets.
 - Diuretics.
 - Patients who have had a stay in hospital within the last eight weeks **and** have had their medication changed.
 - Patients who are on certain respiratory drugs which have been detailed from the BNF.

In addition to these, from the implementation date a new group will be added to cover patients at risk of or diagnosed with cardiovascular disease and regularly being prescribed at least four medicines. Patients at risk of or diagnosed with cardiovascular disease will be identified by virtue of them being prescribed one or more medicines for one or more of the following cardiovascular/ cardiovascular risk conditions:

- Coronary heart disease.
- Diabetes.
- Atrial fibrillation.
- Peripheral arterial disease.
- Renal/ chronic kidney disease (CKD).
- Hypertension.
- Thyroid disorders.
- Heart failure.
- Stroke/ TIA (transient ischaemic attack).
- Lipid disorders.

This means that they must be prescribed at least one medicine from Chapters 2 (cardiovascular), 6.1 (diabetes) or 6.2 (thyroid) of the BNF.

New Medicines Service

This was introduced in October 2011 for a fixed period but has been extended to cover 2014/15 while evaluation of the benefits is taking place. The service is for patients with long-term conditions newly prescribed a medicine and is to help improve medicines adherence. It is focussed on certain patient groups and conditions.

Again the groups are those patients taking medicines that are contained within certain subsections of the BNF but covers the main conditions given below:

- Asthma and Chronic Obstructive Pulmonary Disease.
- Type 2 Diabetes.
- Antiplatelet/Anticoagulant therapy.
- Hypertension.

Appliance Use Review and Stoma Customisation

These two advanced services relate to appliances and can be provided by both community pharmacies and dispensing appliance contractors.

7.1.3 Enhanced services

These services are commissioned by NHS England only and are detailed in The Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2013. If another provider wishes to commission these services they cannot be called Enhanced Services.

The services available are:

- Anticoagulant Monitoring service.
- Care Home service.
- Disease specific medicines management service.
- Gluten Free Food Supply service.
- Independent Prescribing service.
- Home Delivery service.
- Language Access service.
- Medication Review service.
- Medicines Assessment and Compliance Support service.
- Minor Ailment scheme.
- On demand availability of Specialist Drugs.
- Out of Hours.
- Patient Group Direction service – this includes vaccinations and immunisations,
- Prescriber Support service.
- Supplementary Prescribing service.

More details on each of these services can be obtained from the Pharmaceutical Services Advanced and Enhanced Service Directions (2013), available at

<https://www.gov.uk/government/publications/pharmaceutical-services-advanced-and-enhanced-services-england-directions-2013>

The only current NHS England commissioned LES pharmacy services in North Yorkshire are the scheduled additional hours (i.e. out-of-hours bank holiday provision) and there is a time-limited enhanced service for delivering flu vaccinations to eligible populations from 1 October 2014 to 31 March 2015.

This is the first year of commissioning the flu service in North Yorkshire to offer an increased choice to patients who need to access the flu vaccination. NHS England may consider commissioning this service in future years depending on the success of the 2014/15 service.

7.1.4 Essential Small Pharmacies Local Pharmaceutical Services contracts

Essential Small Pharmacies Local Pharmaceutical Services contracts ("ESPLPS Contracts") are a type of local pharmaceutical services (LPS) contract and were granted to certain pharmacy contractors in 2005/6 in accordance with Directions from the Secretary of State. They replaced the former essential small pharmacy scheme (ESPS) which was set up in order that pharmacies located in areas that could not otherwise support a pharmacy operating under the national terms

of service, would be provided with a minimum guaranteed income for the provision of essential services to ensure that they were financially viable.

The ESPLPS Contracts commenced on 1 April 2006, initially for five years, but were subsequently extended and these arrangements will terminate on 31 March 2015. In order to be eligible for an ESPLPS contract, pharmacies had to meet certain criteria such as dispensing more than 6,400 and fewer than 26,400 items per annum upon establishment and – to remain in this group – they had to continue to meet this low prescription volume criteria. The scheme closed on 1 April 2006 and no new ESPLPS contracts have been issued since that time.

7.1.5 Appliance Contract

Dispensing Appliance Contractors (DACs) specialise in providing a range of colostomy and incontinence products for patients. They can also apply to NHS England to undertake the Advanced Services - Stoma Appliance Customisation and also Appliance Use Reviews to improve the patient's knowledge of specified appliances.

7.1.6 Distance Selling and Internet Pharmacies

The NHS Choices website currently lists 199 internet pharmacies in the UK.^{vii} According to statistics from the Health and Social Care Information Centre, the number of “distance selling” pharmacies (i.e. internet or mail order based) has increased from 56 in 2008/09, representing 0.5% of the total number of pharmacies, to 200 in 2012/13, representing 1.7%.^{viii}

Internet pharmacies are licenced in the same way as bricks and mortar pharmacies and require registration with the General Pharmaceutical Council.

They are also subject to additional requirements:

1. A distance selling pharmacy must not provide “*essential services*” to a person who is present at the pharmacy, or in the vicinity of it. In addition, the pharmacy's Standard Operating Procedures (SOPs) must provide for the “*essential services*” to be provided safely and effectively without face to face contact with any member of staff on the premises. NHS England could ask for sight of the SOPs when considering an application to satisfy itself that the conditions will be met. For example, a distance selling pharmacy receives a prescription via post and dispenses it the next day, sending it via courier. The pharmacist telephones the patient to counsel the patient on the medicine's correct use. This arrangement satisfies the conditions as no face to face contact has taken place on the pharmacy's premises.
2. A distance selling pharmacy may provide “*advanced services*” as well as “*enhanced services*” on the premises, as long as any essential service is *not* provided to persons present at the premises. For example, a distance selling pharmacy receives a prescription and dispenses it the next day, sending it via post with a consent form and explanatory leaflet about the New Medicine Service, inviting the patient to contact the pharmacy. The patient lives locally and so makes arrangements to visit the pharmacy, to complete the NMS. The pharmacy would need to be very careful not to provide or offer to provide any of the essential services whilst the patient is at the pharmacy.
3. The pharmacy's procedures and SOPs must allow for the uninterrupted provision of “*essential services*” during the opening hours of the pharmacy to anyone in England who requests the service. NHS England could ask for sight of the SOPs, during the application process, to ensure that adequate arrangements have been made to satisfy this condition.

4. Nothing in any written or oral communication such as a practice leaflet or any publicity can suggest, either expressly or impliedly, that services will only be available to persons in particular areas of England, or only particular categories of patients will (or will not) be provided for. For example, a distance selling pharmacy publishes a leaflet which states 'Our delivery vans are available within a 25 mile radius. We can arrange for delivery by post outside this area, but cold chain products, such as insulin cannot be sent this way'. The pharmacy is likely to be found in breach of the conditions, as patients with diabetes requiring insulin who live outside the area would be unable to obtain their prescriptions from the pharmacy.

7.1.7 North Yorkshire County Council

The Public Health Team at NYCC commissions a number of pharmaceutical services across the County. These are:

Emergency hormonal contraception

Supply of Emergency Oral Hormonal Contraception (EHC) by community pharmacies helps contribute to a reduction in the number of unplanned pregnancies or terminations. This Service is delivered via a Patient Group Direction (PGD) free of charge to service users aged 14 years to 24 years inclusive. The aim of the service is to increase the knowledge of the availability of emergency contraception and contraception from pharmacies; to improve access to/use of emergency contraception; provide informed advice and support to complement existing sexual health services, providing a signposting service into the relevant mainstream contraceptive and sexual health services.

Needle and syringe exchange programme

The Service provided includes the distribution and collection of sterile injecting equipment and its safe disposal and the provision of a range of other harm reduction support and interventions. Pharmacy needle and syringe programmes and harm reduction initiatives are part of the overall wider approach to prevent the spread of blood borne disease and other drug related harm, including drug related death. The service aims to discourage people from misusing drugs and enable those who wish to stop to do so; reduce the harm drug misuse causes to individuals and to communities; reduce the accessibility and availability of drugs to young people; protect communities from the health risks, and other damage associated with drug misuse, including the spread of communicable disease such as HIV, or Hepatitis and ensure that communities have access to accurate information about the risks of drug misuse; increase the safety of communities from drug related crime.

Supervised consumption service

Supervised Consumption Service provided to drug users who are prescribed methadone, Subutex® or Suboxone® in the North Yorkshire area. The Service will encompass supervised support and advice to Service Users in a safe environment. The aims of the service are to ensure compliance with the Service User's agreed care plan, by dispensing prescribed medication in specified instalment and ensuring each supervised dose is correctly administered; liaising with those directly involved with the service users care; improve drug treatment delivery and retention; reduce the risk to communities through drug misuse.

Stop smoking services

The provision of a service user in-house evidence based structured four week quit programme within pharmacies, as primary care services play a key role in helping people to stop smoking. It is intended to support pharmacies in maximising the numbers of service users who go through a structured quit programme to reduce overall smoking prevalence. Weekly support

for at least the first four weeks of a Service User's quit attempt (the support may be offered by telephone where appropriate) and attempt to confirm the smoking status of all service users reporting as having quit smoking at four weeks.

7.1.8 Clinical Commissioning Groups

At present only one CCG commissions services from community pharmacy providers.

Airedale Wharfedale and Craven CCG is commissioning a minor ailment scheme called Pharmacy First. This service is to provide the local population with rapid access to a pharmacist who can give advice on, and where necessary supply medication from an agreed formulary, for a range of minor ailments, releasing capacity in general practice and providing an appropriate alternative to the use of general practice or other health care environment (i.e. A&E, Out of Hours (OOHs) Urgent Care). The pharmacy will provide advice and support, including printed information where appropriate, to people on the management of minor ailments, including where necessary, the supply of medicines (free of charge to those exempt from prescription charges) for the treatment of the minor ailment.

Aims of the Pharmacy First service

- Release capacity in general practice.
- To provide the local population with rapid access to a pharmacist who can give advice on, and treat where necessary, a range of minor ailments.
- Be an appropriate alternative to the use of general practice or other health care environment (i.e. A&E, Out of Hours Urgent Care).
- Allow for improved promotion of self-care through NHS111.

Objectives of the Pharmacy First service

- To provide a service to users who might have otherwise attended their GP or A&E for the treatment of minor ailments.
- To provide a service outside of normal GP opening hours to reduce the use of GP OOHs services.
- To be a cost effective provider to allow for the redeployment of resources more appropriately in other parts of the wider health economy.

Out of Hours Provision

Many areas now have "late night" pharmacies, accessible until late evening. In addition, the GP Out of Hours (OOHs) service is commissioned to dispense emergency medicines. They hold limited stocks of a limited list of medicines for emergency use. These are carried in all OOHs vehicles and in OOHs centres. These apply to patients seen in the service and there is no provision for dispensing against prescriptions provided elsewhere.

Medicines are now supplied under national guidance in "patient packs", meaning a full course is dispensed and patients should not have to seek further supplies elsewhere; historically supplies were only provided until the next pharmacy opened.

OOHs services also carry a small amount of palliative care drugs in case of immediate need overnight. These are only provided in small amounts due to the rapidly changing requirements in these patients.

The purpose of the OOHs dispensing service is to ensure 24/7 supply of essential medication, it is not intended as a routine dispensing service.

If other essential medication is required when pharmacies closed (e.g. Insulin destroyed by heat/faulty insulin pen) OOHs GPs may communicate and liaise with either community pharmacists or hospital on call pharmacists to attempt to identify and access medication not

routinely held in stock. Whilst provision cannot be guaranteed overnight, safe care will be provided to all in need.

7.2 Community Pharmacy Contractors

This section provides an overarching summary of population-level pharmaceutical provision in North Yorkshire. The statistics in this section are to allow for crude comparisons of pharmaceutical provision between areas, not provide an individual-level indication of access or availability. The full details of all North Yorkshire pharmacies, with opening hours, can be found in Appendices 2 and 3, with online maps available at http://maps.northyorks.gov.uk/connect/?mapcfg=ph_pharmacies.

In North Yorkshire there are a total of 106 pharmacies and 73 dispensing practices giving a total of 179 dispensing outlets. When analysed against population size, this equates to an average of 3,343 people per dispensing outlet or 29.9 outlets per 100,000 population.

The district with the largest number of dispensing outlets per 100,000 population is Scarborough with 37.7; each outlet on average serving 2,653 people. The district with the smallest number of dispensing outlets per 100,000 is Selby with 24 per 100,000 population; therefore on average each outlet serves 4,172.

Table 3 Total number of dispensing outlets, providing essential dispensing services

District	Pharmacies	GP dispensing practice premises	Total dispensing outlets	Population	Population served per outlet	Outlets per 100,000 population
Craven	13	4	17	55,409	3,259	30.7
Hambleton	13	9	22	89,140	4,052	24.7
Harrogate	26	20	46	157,869	3,432	29.1
Richmondshire	8	8	16	51,965	3,248	30.8
Ryedale	8	9	17	51,751	3,044	32.8
Scarborough	26	15	41	108,793	2,653	37.7
Selby	12	8	21	83,449	4,172	24.0
North Yorkshire	106	73	179	598,376	3,343	29.9

When examining the rate of community pharmacies only (table 4) then the rates range from 23.9 community pharmacies per 100,000 in Scarborough, through to 14.4 in Selby. The average rate of pharmacy provision in England ranges from 17.7 to 27.9 pharmacies per 100,000 (see fig.2).

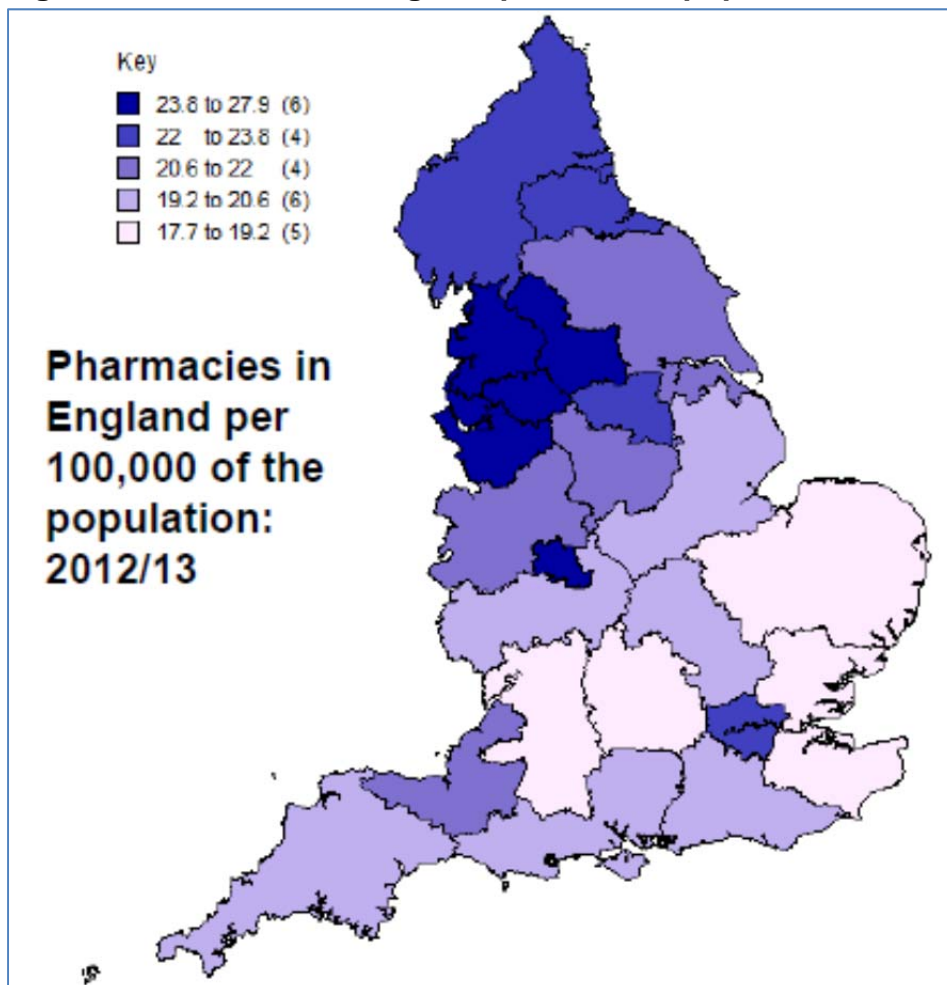
Therefore, the average for North Yorkshire is at the lowest end of the England range; however this must be taken into context given North Yorkshire's proximity to large cities such as York, Leeds, and Bradford. The North Yorkshire community pharmacy provision appears to be similar to that of rural areas in the east of England and the south west.

In absolute terms both Harrogate and Scarborough have the highest number of community pharmacies at 26, with Richmondshire and Ryedale having the smallest number at eight.

Table 4 Total number of pharmacies only

District	Pharmacies	Population	Population served per pharmacy	Pharmacies per 100,000 population
Craven	13	55,409	4262	23.5
Hambleton	13	89,140	6857	14.6
Harrogate	26	157,869	6072	16.5
Richmondshire	8	51,965	6496	15.4
Ryedale	8	51,751	6469	15.5
Scarborough	26	108,793	4184	23.9
Selby	12	83,449	6954	14.4
North Yorkshire	106	598,376	5645	17.7

Figure 2 Pharmacies in England per 100,000 population 2012/13



On average in North Yorkshire there are one and a half community pharmacies for every GP dispensing outlet, however this varies across the districts. Craven appears to be less reliant on GP dispensing with 3.3 community pharmacies for every GP dispensing outlet, whereas Ryedale is more reliant on GP dispensing having more GP dispensing premises than community pharmacies.

Table 5 Ratio of pharmacies to GP dispensing services

District	Pharmacies	GP dispensing practice premises	Ratio of Pharmacies to GP dispensaries
Craven	13	4	3.3
Hambleton	13	9	1.4
Harrogate	26	20	1.3
Richmondshire	8	8	1.0
Ryedale	8	9	0.9
Scarborough	26	15	1.7
Selby	12	8	1.5
North Yorkshire	106	73	1.5

Table 6 Pharmacies – range of opening hours

District	Weekday open	Weekday close	Saturday open	Saturday close	Sunday open	Sunday close
Craven	08:00	23:00	08:00	23:00	10:00	20:00
Hambleton	06:30	22:30	06:30	22:00	10:00	16:00
Harrogate	06:30	24:00	08:00	23:00	09:30	18:00
Richmondshire	06:30	22:30	06:30	22:00	10:00	16:00
Ryedale	08:30	18:30	8:30	17:30	11:00	12:00
Scarborough	07:00	23:00	07:00	23:00	10:00	23:00
Selby	08:30	20:00	08:30	17:30	01:00	02:00

Ryedale and Selby Sunday opening via scheduled additional hours – these hours are provide across a number of local pharmacies on a rolling rota.

Table 6 shows the opening hour range in each district. It must be noted that Selby and Ryedale appear to have more narrow range of hours available; however they also have close travel links to other well served areas. Ryedale residents can access services in York and Scarborough. Selby residents can access Leeds, Pontefract, Wakefield and Goole.

Table 7 GP dispensing practices

District	GP practices	GP dispensing practices	GP dispensing practice premises
Craven	6	2	4
Hambleton	11	8	9
Harrogate	19	10	20
Richmondshire	9	7	8
Ryedale	7	7	9
Scarborough	19	9	15
Selby	7	5	8
North Yorkshire	78	48	73

Table 8 Number of pharmacies opening on Saturdays and Sundays

District	Pharmacies	Open on Saturdays	Open after 1pm on Saturdays	Open on Sundays
Craven	13	12	6	2
Hambleton	13	11	8	3
Harrogate	26	23	14	6
Richmondshire	8	8	4	2
Ryedale	8	6	5	1
Scarborough	26	20	13	4
Selby	12	7	3	1
North Yorkshire	106	87	53	19

Ryedale and Selby Sunday opening via scheduled additional hours

All districts have some provision on Saturdays and Sundays, however in Selby and Ryedale it is more limited, with services provided on a rota. As noted above, residents in both areas can access other services; however it would be reliant on access to a car or public transport.

7.3 Dispensing Activity

The NHSE *Call to Action* provided an evidence pack on community pharmacy provision.^{ix} In the evidence pack it stated:

- The number of items prescribed reached 1 billion annually in 2012. The year-on-year growth in items has been around 4-5% since 2001.
- 95%⁴ of prescriptions are dispensed free of charge, mostly to people over 60.
- Almost 60% of all prescriptions are for those over 60.

You can get free NHS prescriptions if, at the time the prescription is dispensed, you:

- are 60 or over
- are under 16
- are 16-18 and in full-time education
- are pregnant or have had a baby in the previous 12 months and have a valid maternity exemption certificate (MatEx)

⁴ This figure includes pre-payment certificates, which up to 2007 were included in paid for prescription items.

- have a specified medical condition and have a valid medical exemption certificate (MedEx)
- have a continuing physical disability that prevents you from going out without help from another person and have a valid MedEx
- hold a valid war pension exemption certificate and the prescription is for your accepted disability
- are an NHS inpatient.

You are also entitled to free prescriptions if you or your partner (including civil partners) are named on, or are entitled to, an NHS tax credit exemption certificate or a valid HC2 certificate (full help with health costs), or you receive either:

- Income Support
- Income-based Jobseeker's Allowance
- Income-related Employment and Support Allowance, or
- Pension Credit Guarantee Credit
- Universal Credit.

In 2013/14, there were a total over 15.5 million items dispensed to the population served by North Yorkshire GPs. Of those, 77% of items were dispensed in the community (by community pharmacies or distance pharmacies).

Table 9 Number of items dispensed per district in 2013/14 and the proportion of those dispensed by GP Practices

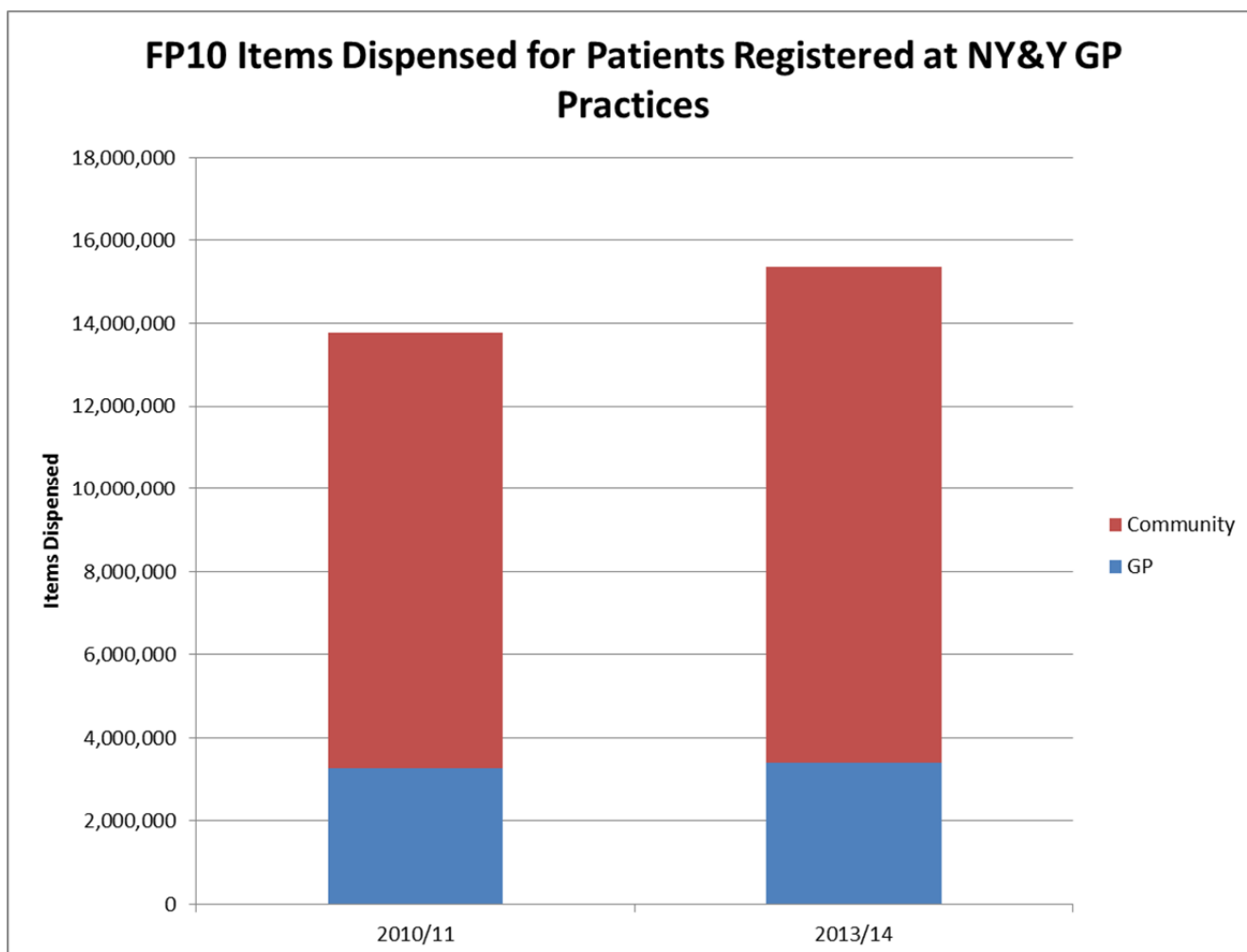
	Total Items Dispensed 2013/14	% Items Dispensed by GP Practices
Craven	1,004,814	11.7
Harrogate and Rural District	2,945,883	23.2
Hambleton, Richmond, Whitby	3,197,299	35.6
Vale of York (North Yorkshire Practices only)	5,483,601	16.7
Scarborough and Ryedale	2,734,217	20.2
North Yorkshire Total	15,365,814	22.2

The number of items dispensed in the community has grown by 14% since 2010/11, compared with only 4% growth in GP dispensed items.

Table 10 Absolute number of dispensed items per year from 2010/11 to 2013/14

Practice Items	2010/11	2011/12	2012/13	2013/14
Craven	106,792	109,907	121,095	117,335
Harrogate and Rural District	668,864	678,327	666,161	684,837
Hambleton, Richmond, Whitby	1,056,385	1,101,188	1,119,008	1,138,861
Vale of York (North Yorkshire Practices only)	926,341	933,558	940,424	915,674
Scarborough and Ryedale	513,834	526,459	540,140	553,106
North Yorkshire Total	3,272,216	3,349,439	3,386,828	3,409,813
Community Pharmacy Items	2010/11	2011/12	2012/13	2013/14
Craven	804,645	839,548	867,112	887,479
Harrogate and Rural District	2,043,474	2,096,909	2,191,403	2,261,046
Hambleton, Richmond, Whitby	1,834,387	1,914,749	1,972,458	2,058,438
Vale of York	3,908,456	4,072,413	4,283,506	4,567,927
Scarborough and Ryedale	1,918,325	2,004,641	2,086,250	2,181,111
North Yorkshire Total	10,509,287	10,928,260	11,400,729	11,956,001

Figure 3 (FP10) Prescription Items dispensed for patients registered at North Yorkshire and York GP Practices



Source: North Yorkshire and Humber Commissioning Support Unit, Medicines Management Team 2 October 2014

Further analysis of community dispensing in Craven has illustrated that the use of internet and appliance dispensing still only makes up a very small percentage of all dispensing at 0.65%. In absolute terms however, this was 6,550 items in Craven during 2013/14.

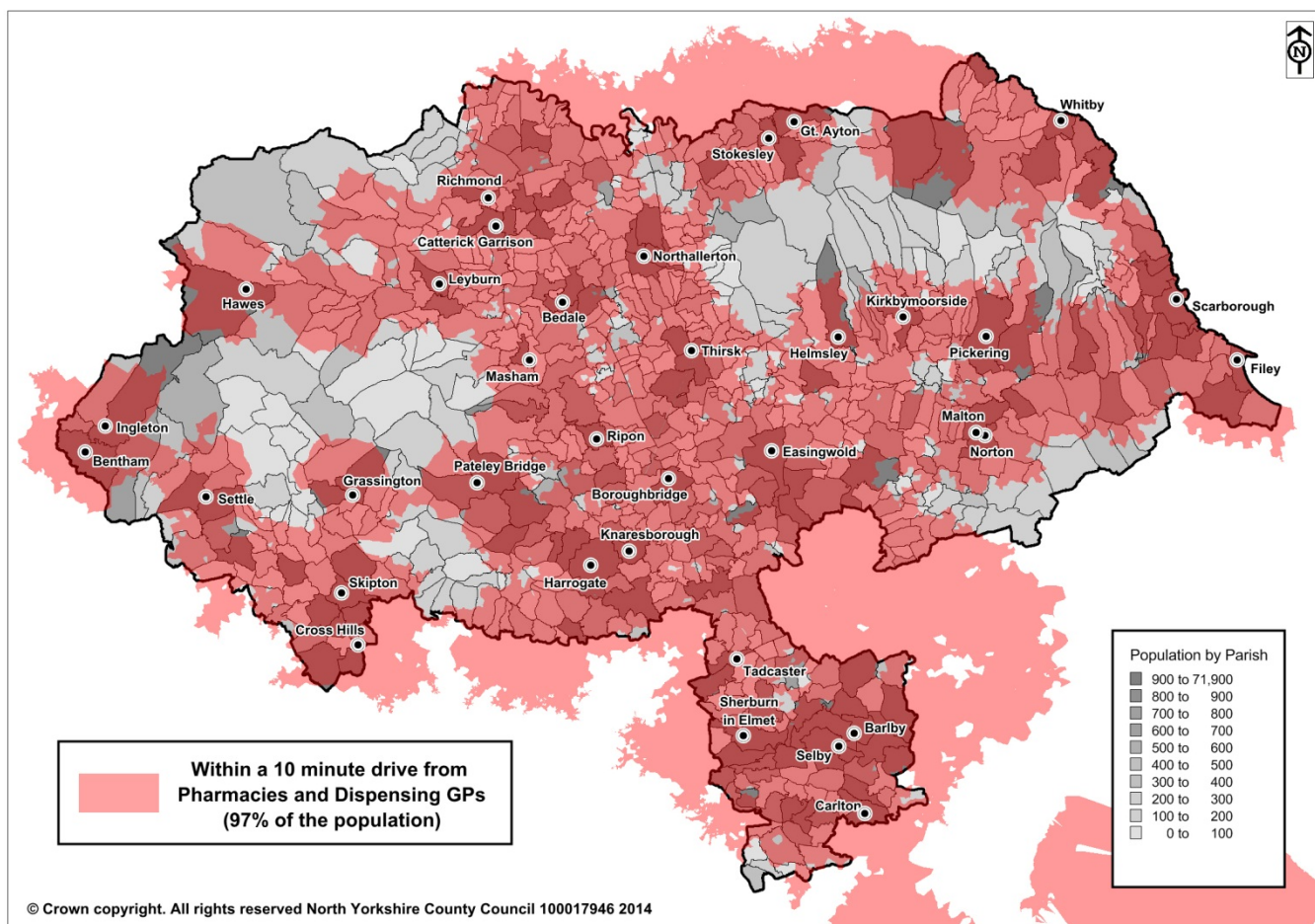
7.4 Access to pharmaceutical services

There are 106 community pharmacies and 73 dispensing practices in North Yorkshire, operated by a mixture of independent and multiple pharmacy owners (e.g. Boots). Of those that responded to the pharmacy questionnaire, the majority (87%) said they offered prescription collection and delivery as free or chargeable services.

In order to provide a population level analysis of access, drive times have been used to illustrate the proximity of pharmaceutical services to population density. The map below illustrates the areas of North Yorkshire that are within a 10 minute drive time of a dispensing practice or community pharmacy in North Yorkshire. Further analysis of population density shows that 97% of the North Yorkshire population live within a 10 minute drive of accessing a dispensing service.

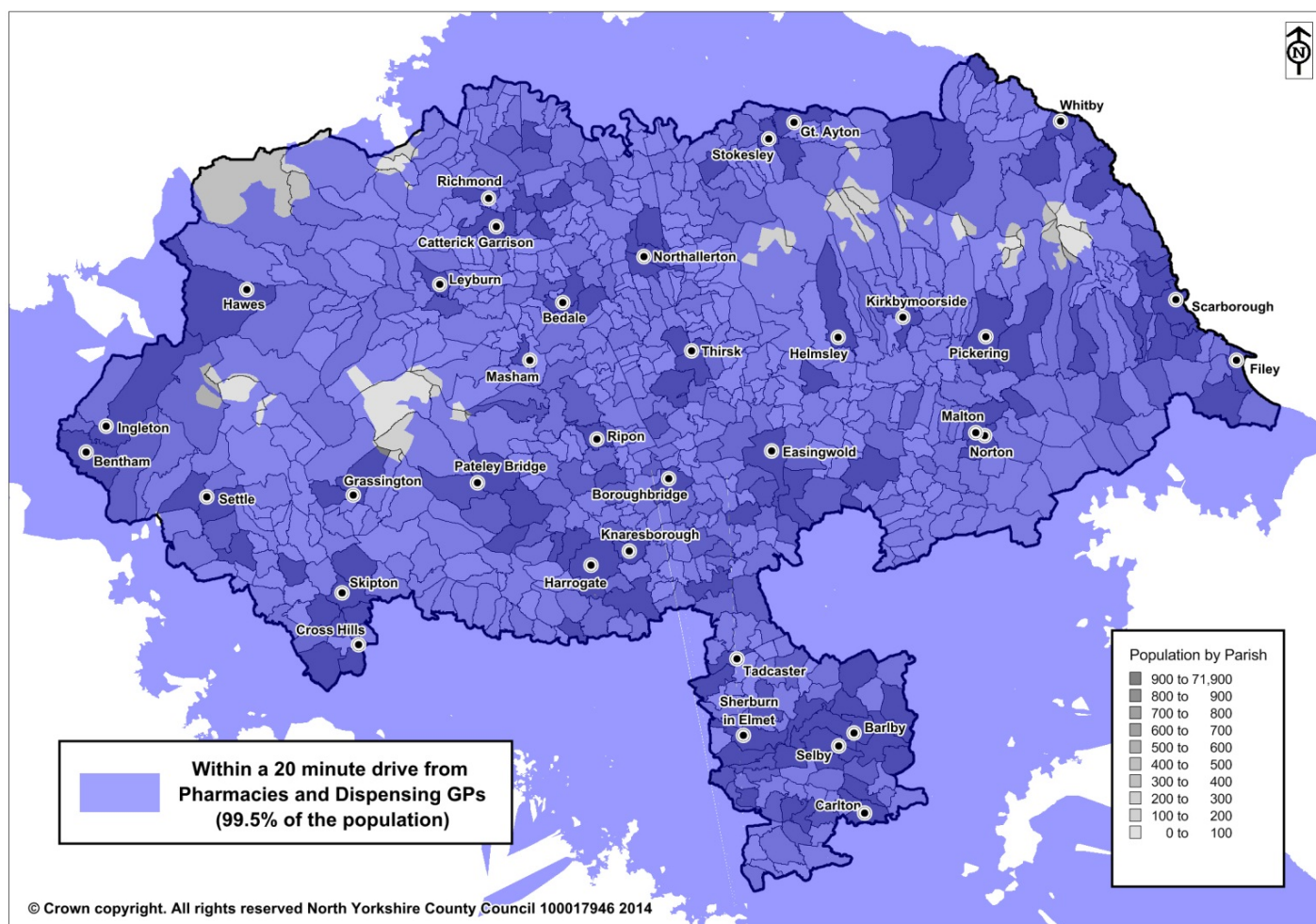
The analysis was repeated looking at community pharmacies only. The analysis showed that 95% of the North Yorkshire population live within a 10 minute drive of a community pharmacy.

Figure 4 Map of 10 Minute Road Travel from a Dispensing Premises Time Overlaid on Population Density



When the travel time is increased to 20 minutes then the population coverage increases to over 99% of the North Yorkshire population who can access a community pharmacy, this is the same coverage as the national average.^x

Figure 5 Map of 20 Minute Road Travel from a Dispensing Premises Time Overlaid on Population Density



Maps illustrating pharmaceutical provision by each district can be found in Appendix 5. An online interactive map illustrating pharmacy locations and the services they deliver can be accessed at http://maps.northyorks.gov.uk/connect/?mapcfg=ph_pharmacies.

According to the 2011 Census 82.2% (see fig. 34) of households in North Yorkshire have one or more cars which is significantly higher than the 74.3% England average. All districts of North Yorkshire, excluding Scarborough, have a higher proportion of households with one or more cars. Rates are typically higher in the more rural districts.

Scarborough however has a significantly lower percentage of households with one or more cars at 71.2%. In addition, Scarborough has the greatest levels of deprivation in North Yorkshire and the highest level of health and care need, including more vulnerable populations, for example, carers and Disability Living Allowance claimants.

A study published in 2014^{xi} concluded that the majority of the English population can access a community pharmacy within a 20 minute walk and that access is greater in areas of high deprivation. This study has limited applicability to North Yorkshire as a whole, given the rural nature of the County, but is potentially relevant to more urban areas of North Yorkshire, particularly given that North Yorkshire's pockets of deprivation tend to be close to urban centres, especially in Scarborough.

The results of the study estimate that the following proportions of the population have access to a community pharmacy within a 20 minute walk:

- 98.3% in urban areas,

-
- 79.9% in town and fringe areas,
 - 18.9% in rural areas,
 - 90.2% in the top 10% most affluent areas,
 - 99.8% in the top 10% most deprived areas.

8.0 Identified Health Needs

The North Yorkshire Joint Strategic Needs Assessment (2012) provides a high-level analysis of the current and future health and wellbeing needs of the individuals and communities within North Yorkshire. The Joint Strategic Needs Assessment (JSNA) is a comprehensive assessment therefore this provides a substantial information source on need for the PNA. Rather than repeating large sections of the JSNA this section of the PNA attempts to summarise some of the pertinent issues identified in the JSNA.

The needs of the population in relation to pharmaceutical services have been summarised in this section. This has been structured in line with the domains that were identified in Section 4.0:

- Population.
- Illness and disability.
- Risks to health.
- Wider determinants.

The indicators are illustrated below by each domain and by two different geographical splits: by district geography and by Clinical Commissioning Group. The indicators are clustered under each domain so that each geography can be compared.

This section also brings in the findings from each of the questionnaires:

- Public.
- Health and care professions.
- Strategic stakeholders.

Again, these findings have been presented by district and CCG where appropriate.

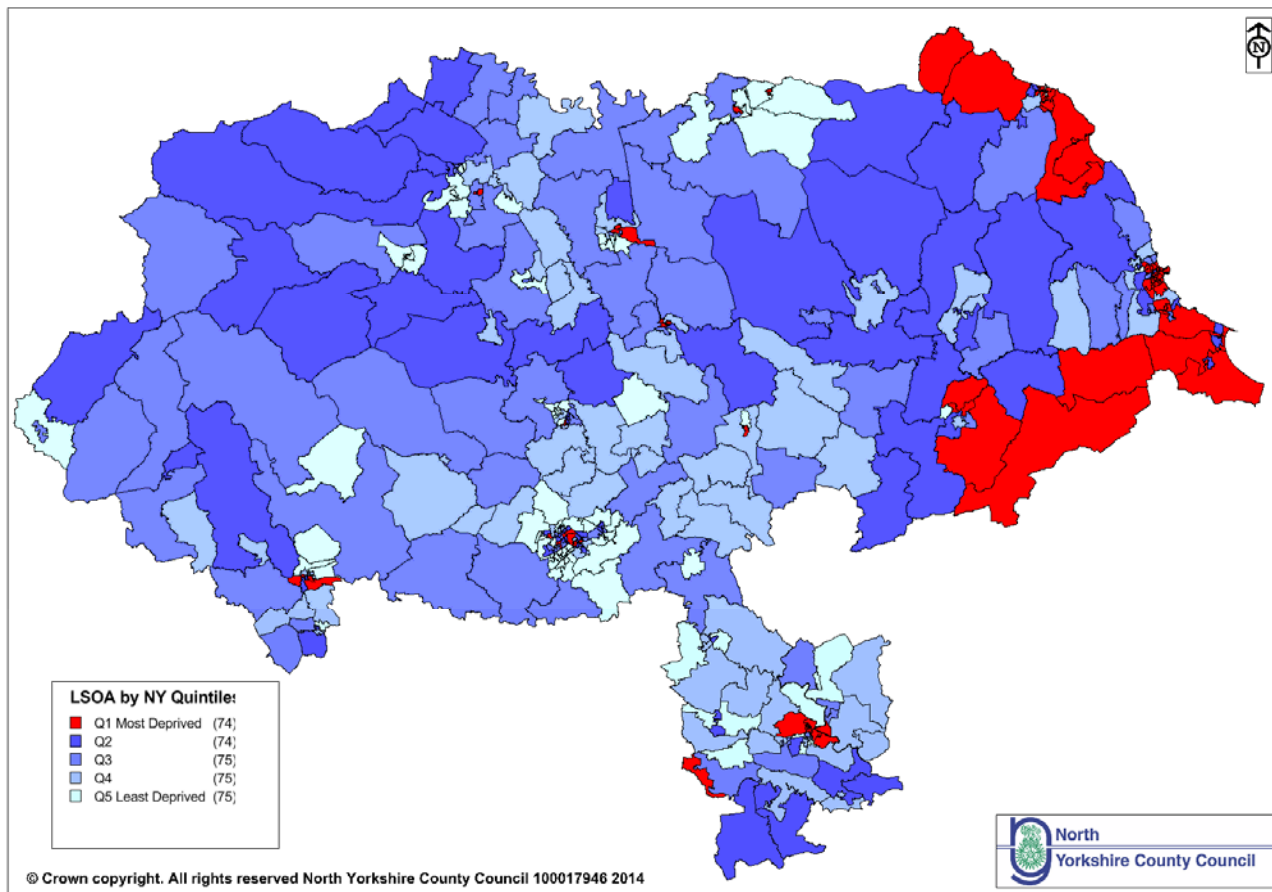
The North Yorkshire JSNA is under a constant process of review and update, therefore visit www.nypartnerships.org.uk/jsna for the most up-to-date information on local needs.

8.1 Population

Covering over 3,000 square miles, North Yorkshire ranges from isolated rural settlements and farms to market towns and larger urban conurbations such as Harrogate and Scarborough. The geography in terms of organisations is very complex across North Yorkshire. North Yorkshire is comprised of seven district councils each having the own statutory responsibilities and service commissioning for their populations. There are six CCGs across North Yorkshire, the Vale of York CCG which spanning three local authority areas being the most complex (North Yorkshire, City of York and East Riding). Airedale Wharfedale and Craven CCG and the Cumbria CCG also cross two local authorities, meaning a coherent picture for North Yorkshire in terms of commissioning particularly difficult

Whilst North Yorkshire is in overall terms more affluent than a typical local authority in England, there are nevertheless areas of profound deprivation, including some parts of the County that are ranked within the 10% most deprived areas in England.

Figure 6 A map of the LSOA's in North Yorkshire by local IMD 2010 quintiles



The map shows all of the 2011 Lower Super Output Areas (LSOA) across North Yorkshire. These are units of administrative geography with similar sized populations. Each LSOA has an Indices of Multiple Deprivation (IMD) 2010 score. The colours represent the quintile of grouped IMD score, where red are the most deprived 20% of the North Yorkshire LSOAs. The majority of North Yorkshire deprived LSOA are concentrated in the Scarborough and Ryedale districts, with smaller parts of Skipton, Harrogate, Northallerton, Whitby and Selby having part of those communities in the most deprived quintile.

Table 11 North Yorkshire District population of those living in the most deprived North Yorkshire quintile

District	% of District Population in 20% most deprived LSOAs in North Yorkshire	Number district population in 20% most deprived LSOAs in North Yorkshire
Craven	4.1%	4,802
Hambleton	11.0%	12,924
Harrogate	9.1%	10,674
Richmondshire	1.6%	1,870
Ryedale	9.4%	11,024
Scarborough	52.7%	62,081
Selby	12.3%	14,512

For North Yorkshire the bulk of its deprived population resides in Scarborough with around 62,000 residents being in the most deprived North Yorkshire Quintile, Selby follows having the next largest population of deprived residents relative to the whole of North Yorkshire.

Table 12 North Yorkshire CCG population of those living in the most deprived North Yorkshire quintile

CCG	% of CCG Population in 20% most deprived LSOAs in North Yorkshire	Number of CCG population in 20% most deprived LSOAs in North Yorkshire
NHS Airedale, Wharfedale and Craven	4.1%	4,802
NHS Hambleton, Richmondshire and Whitby	23.1%	27,238
NHS Harrogate and Rural District	9.1%	10,674
NHS Scarborough and Ryedale	50.2%	59,140
NHS Vale of York	13.6%	16,033

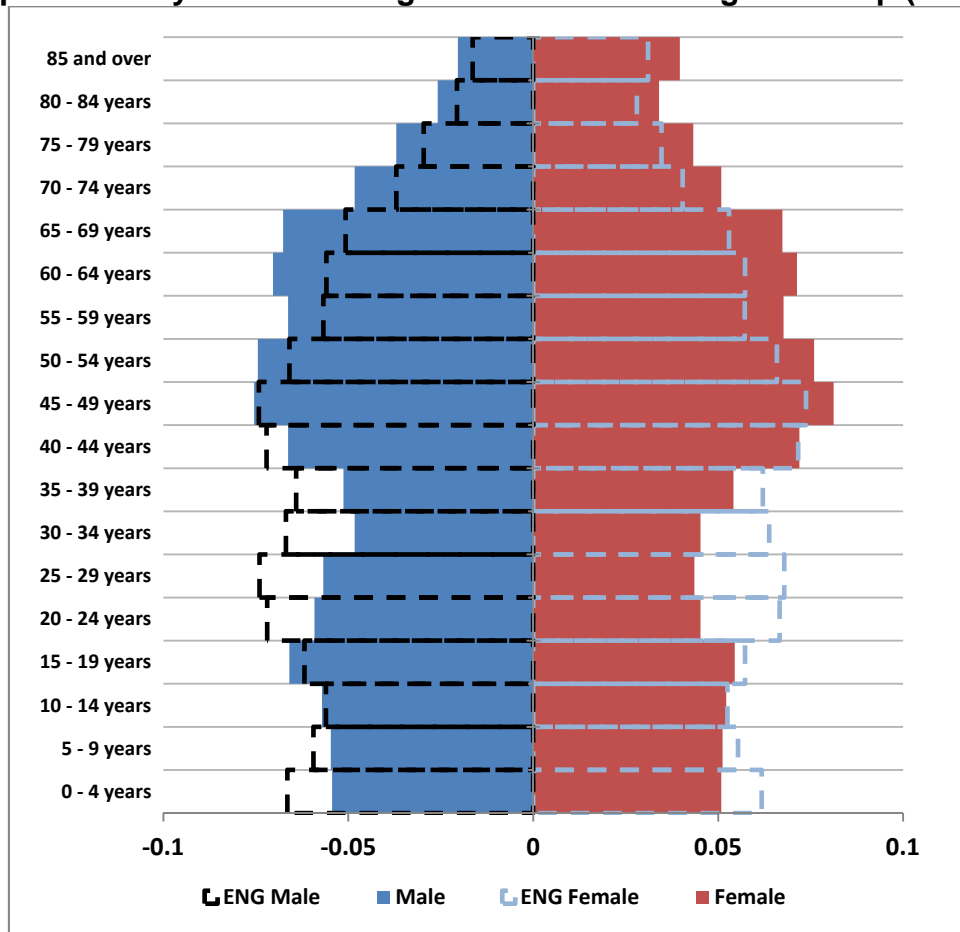
** NHS Vale of York is comprised of the North Yorkshire County residents

For North Yorkshire CCGs the bulk of its deprived population resides in Scarborough and Ryedale CCG with around 60,000 residents being in the most deprived North Yorkshire Quintile within the CCG Boundary, NHS Hambleton, Richmondshire and Whitby follows having the next largest population of deprived residents

The County is home to a significant military presence, including the UK Army's largest garrison at Catterick in the north of the County. It is estimated that at any one time, 17,000 MOD personnel may be based in North Yorkshire.

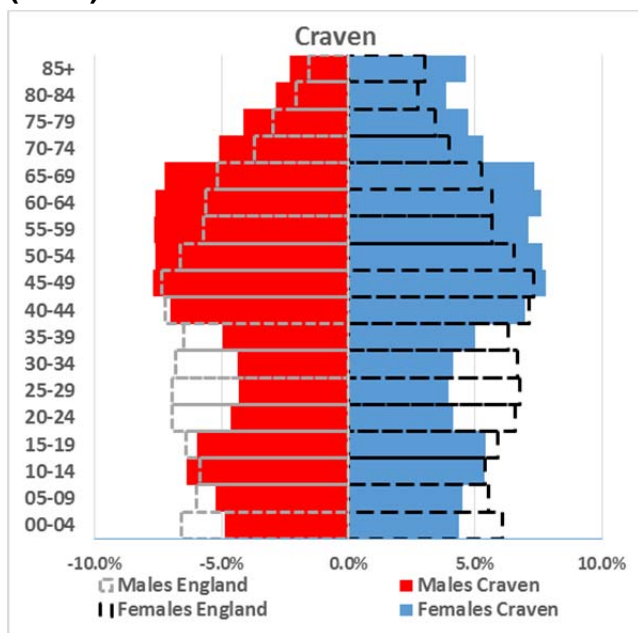
As highlighted in Figure 7 below, North Yorkshire when compared to the national age structure has an older population, with those aged 45 and up over represented across the County for both genders. For ages 20-44 years these are lower when comparing North Yorkshire to the national age structure. It is important however, to note the variation in profiles across North Yorkshire's seven districts. For example in Richmondshire there are a high number of males aged 20-29 years due to the presence of the military base in Catterick. The long term military planning for the regiment's movement has recently changed meaning that regiments are to be fixed to bases. For North Yorkshire this possibly means a more stable military population in the future.

Figure 7 A populations Pyramid showing North Yorkshire's age make up (2012)



Source ONS 2013

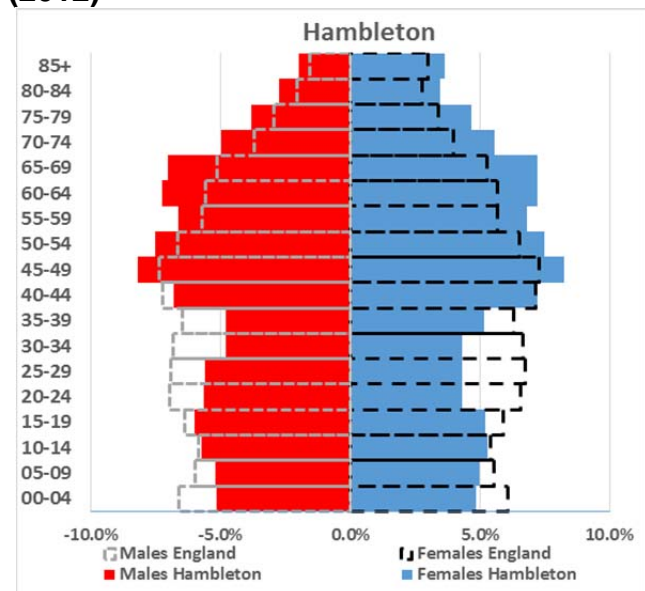
Figure 8 A populations Pyramid showing Craven age make up against England (2012)



Source ONS 2013

Craven similarly follows the NY pattern having an over representation of the 45 + and underrepresentation of the 15-39 age groups with an under representation of 0-9

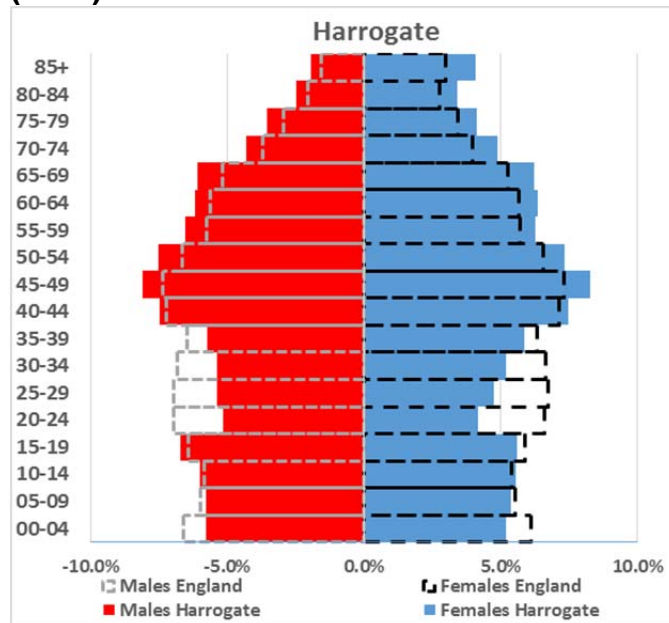
Figure 9 A populations Pyramid showing Hambleton age make up against England (2012)



Source ONS 2013

Hambleton similarly follows the NY pattern having an over representation of the 45 + and underrepresentation of the 0-44 age groups.

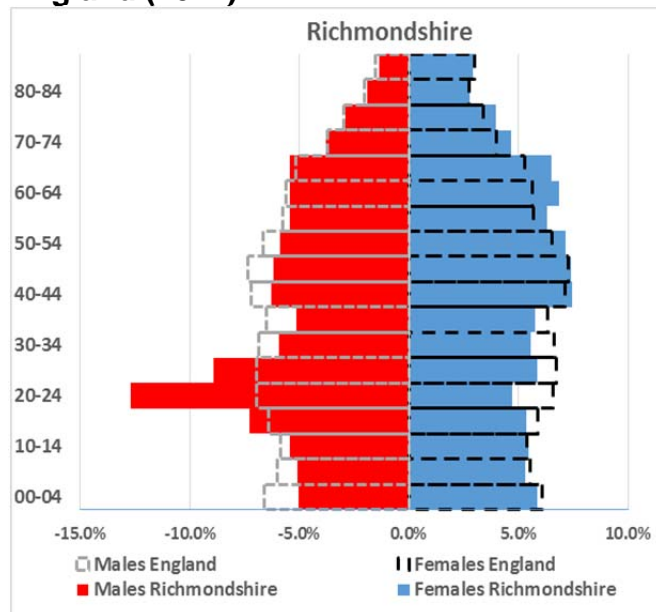
Figure 10 A populations Pyramid showing Harrogate age make up against England (2012)



Source ONS 2013

Harrogate similarly follows the NY pattern having an over representation of the 45 + and underrepresentation of the 20-39 age groups with a under representation of 0-9

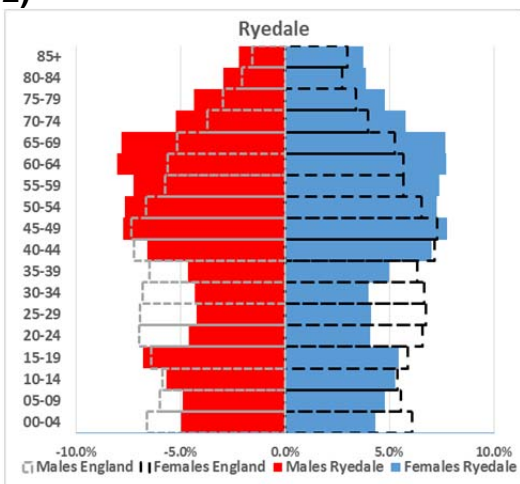
Figure 11 A populations Pyramid showing Richmondshire age make up against England (2012)



Source ONS 2013

Richmondshire similarly follows the NY pattern having an over representation of the 45-54 for the older age groups. The area follows the national trend closely. There is an over representation of the 15-30 age groups for men, this is the military population, with an over representation of 0-9.

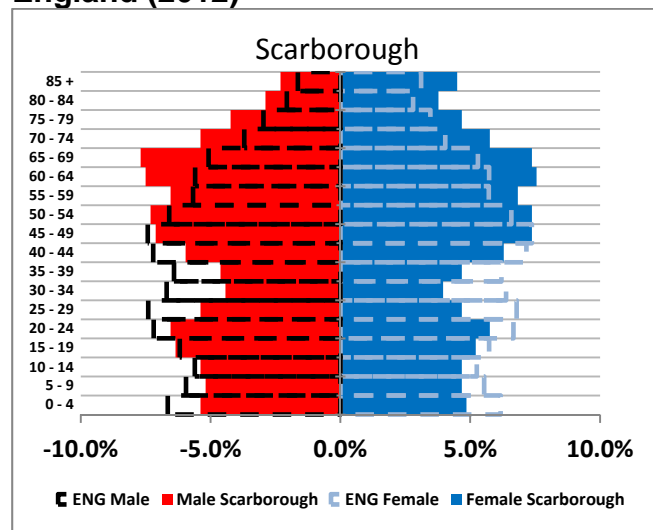
Figure 12 A populations Pyramid showing Ryedale age make up against England (2012)



Source ONS 2013

Ryedale similarly follows the NY pattern having an over representation of the 45 + and underrepresentation of the 20-39 age groups with an under representation of 0-9.

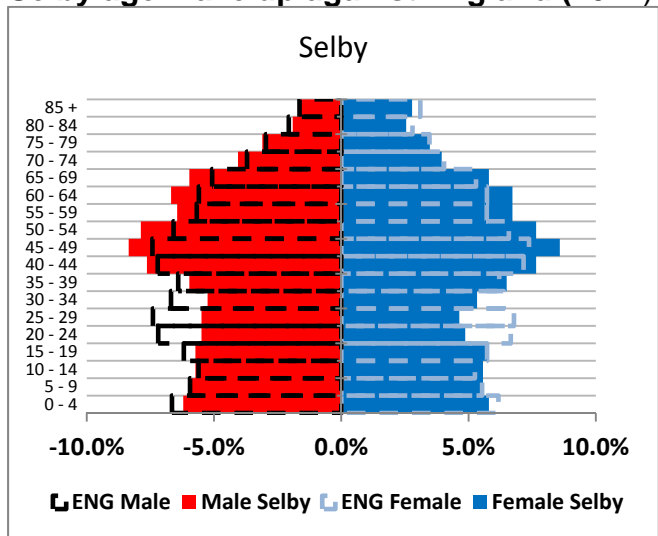
Figure 14 A populations Pyramid showing Scarborough age make up against England (2012)



Source ONS 2013

Scarborough similarly follows the NY pattern having an over representation of the 45 + and underrepresentation of the 0-44 age groups.

Figure 13 A populations Pyramid showing Selby age make up against England (2012)



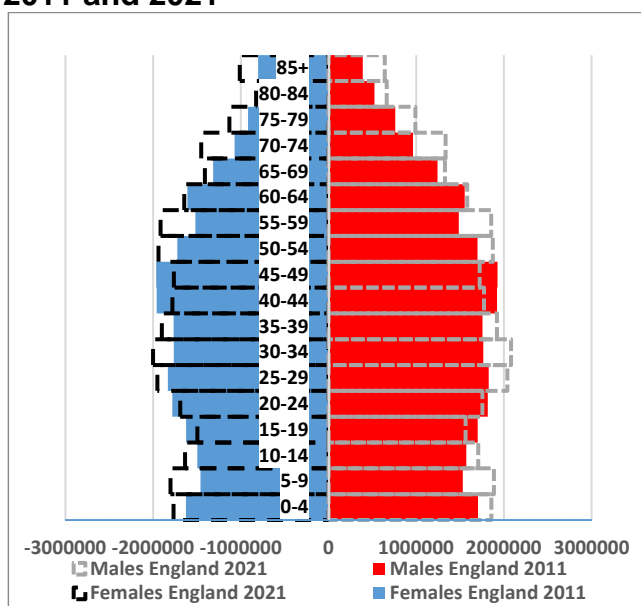
Source ONS 2013

Selby similarly follows the NY pattern having an over representation of the 45 + and underrepresentation of the 20-39 age groups with an under representation of 0-9.

Population projection number changes between 2011 and 2021. For England we can see that there is growth forecast in those aged 0-14 years as well as growth in 25-39 age groups for both genders. Nationally we will see growth in those aged 50+ for both genders by 2021 adding an increased burden to services. Ages 15-24 years and 40-49 years will see a reduction by 2021 compared to the current 2011 population.

North Yorkshire mirrors this pattern. However, the respective increases and decreases are greater in North Yorkshire compared to the 2011 position. North Yorkshire shows the national pattern again having greatly pronounced increase in the 50+ when compared to the 2011 position and decreasing in the 15-24 and 40-49 age groups.

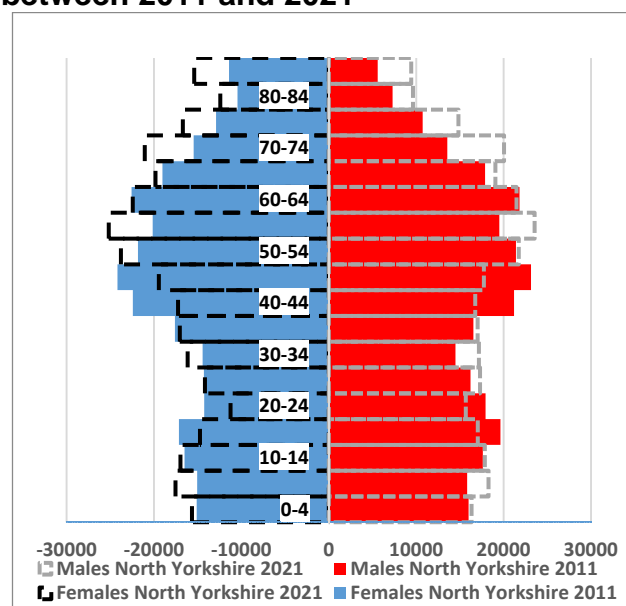
Figure 15 A populations Pyramid showing England’s population change between 2011 and 2021



Source ONS 2013

The England population is projected to grow in the 50+ with a slight decrease in the 40-49 by 2021. The 0–14 age groups are expected to grow by 2021 along with the 25-39 age groups. The 15-24 age groups are expected to decrease by 2021.

Figure 16 A populations Pyramid showing North Yorkshire population change between 2011 and 2021



Source ONS 2013

The North Yorkshire population is projected to grow in the 50+ with a slight decrease in the 35-49 by 2021. The 0-14 age groups are expected to grow by 2021 along with the 25-39 age groups. The 15-24 age groups are expected to decrease by 2021.

The 85+ population is projected to grow by a large amount as well as the 70-74.

Table 13 Number of those aged 85 and over by District and Upper tier IMD 2010 Quintile

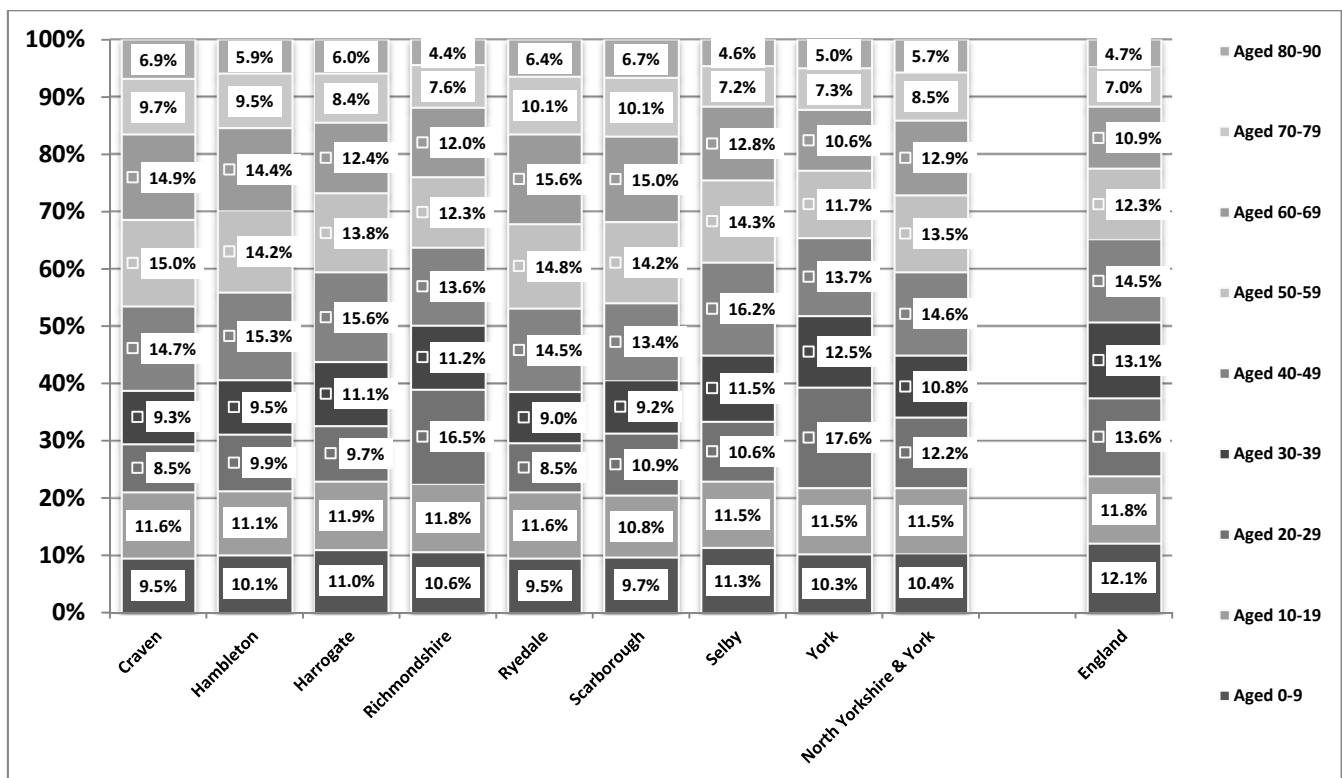
IMD 2010 Quintile	Craven	Hambleton	Harrogate	Richmond-shire	Ryedale	Scarborough	Selby	North Yorkshire
Q1 Most deprived	310	450	1004	97	261	449	361	2932
Q2	324	416	729	215	163	553	387	2787
Q3	327	394	931	254	254	859	491	3510
Q4	443	723	1164	274	387	840	303	4134
Q5 Least deprived	546	551	964	276	497	847	293	3974
Total	1950	2534	4792	1116	1562	3548	1835	17337

Source ONS 2013

The biggest number, 1,004, of deprived 85 and overs is in Harrogate representing about a third of the total number of people 85 and over in North Yorkshire.

In total Harrogate has the most over 85s, 4,792, followed by Scarborough’s 3,500. Interestingly Scarborough’s demographic make-up of the over 85s is more affluent than Harrogate’s.

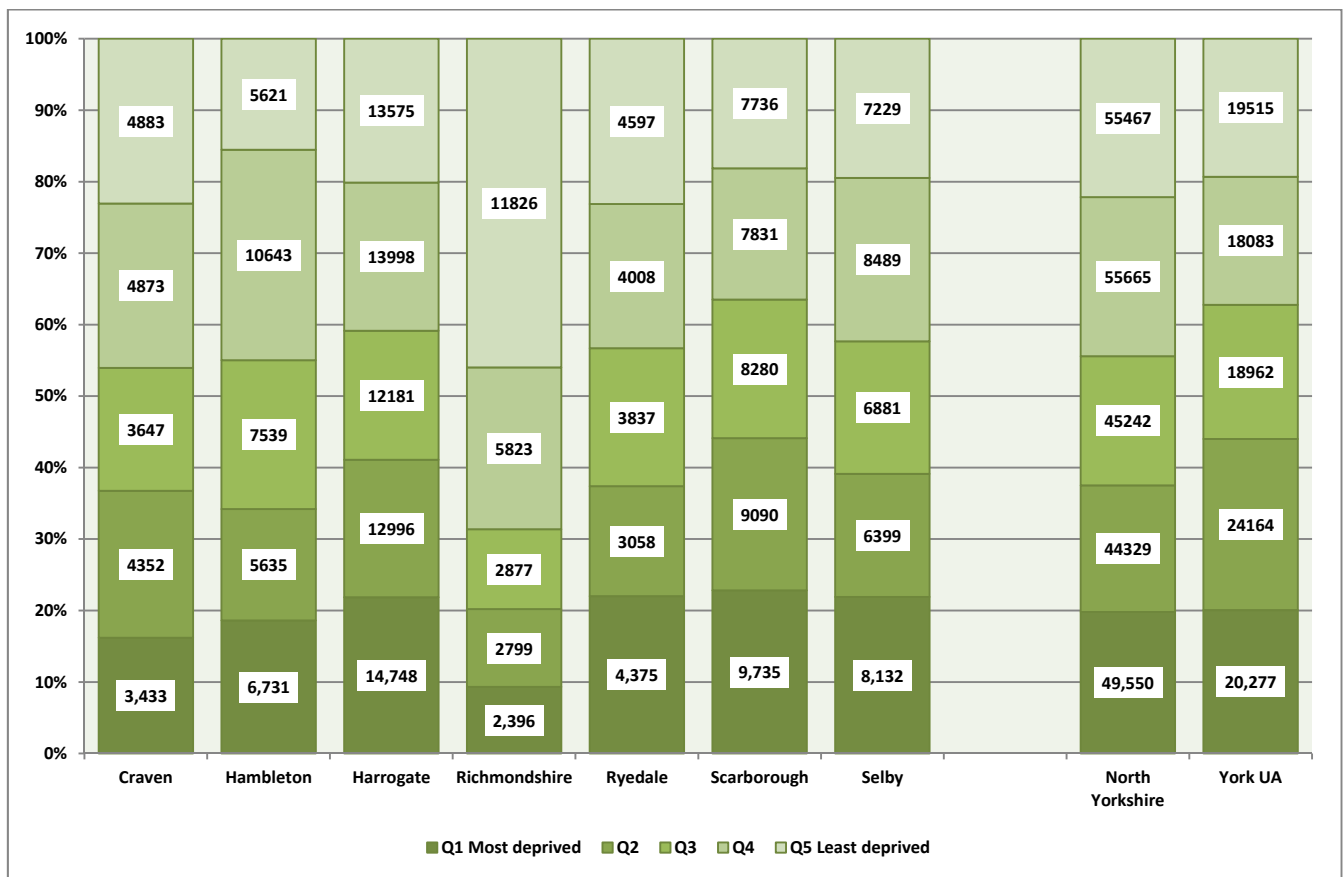
Figure 17 District population distribution 10 year age bands (2012)



Source ONS 2013

Each area shows significant variation in age distribution. The younger age groups make up smaller proportions across the districts when compared with the older age groups. All of the districts apart from Richmondshire and Selby have a greater than national percentage of 80-90 year olds demonstrating the older than average population of North Yorkshire.

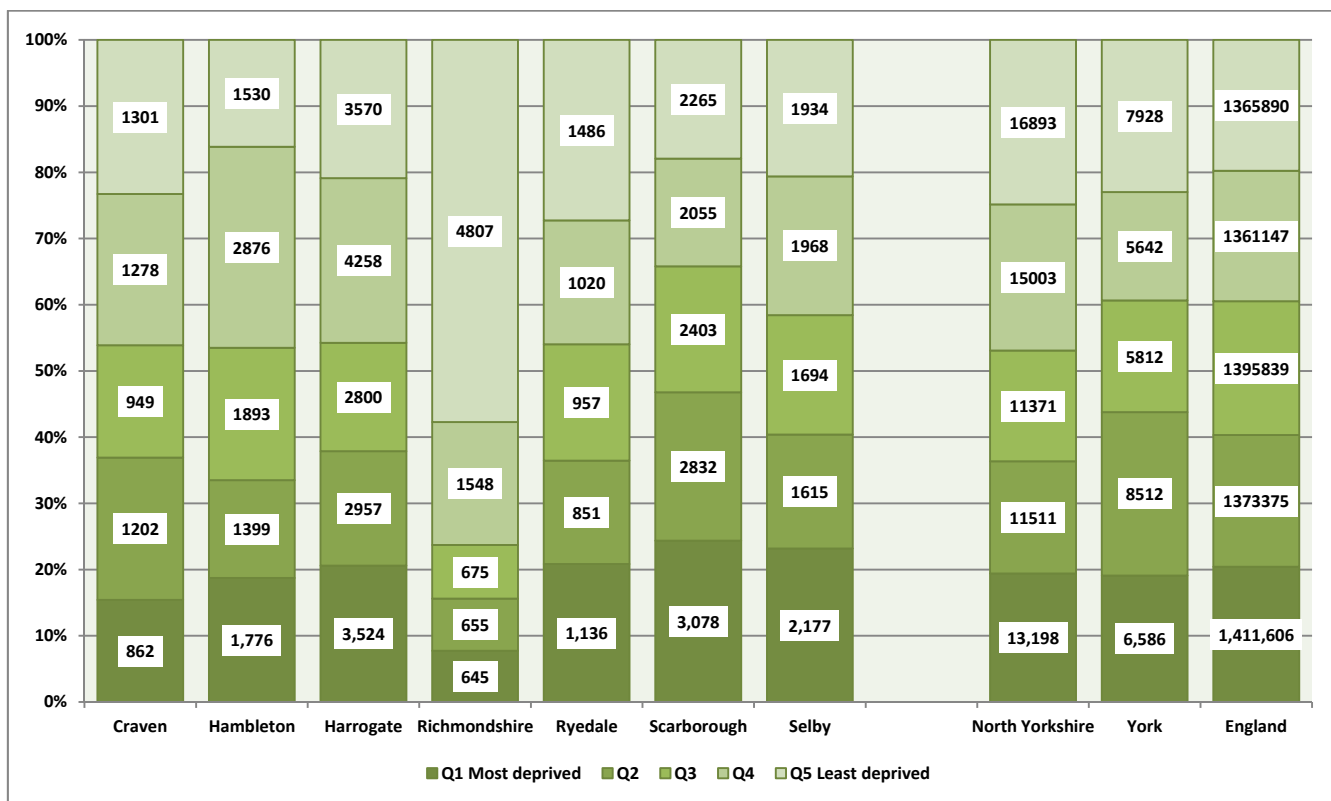
Figure 18 Persons aged 15-49 by deprivation quintile for each district



Source ONS 2013

The graph clearly shows that Harrogate has the bulk of the County’s population aged 15-49 in total, when the quintiles are added together. Scarborough has the biggest proportion of its 15-49 residents in the most deprived quintiles. However, the biggest numbers of deprived resident are in Harrogate district.

Figure 19 Persons aged 15-24 by deprivation quintile for each district

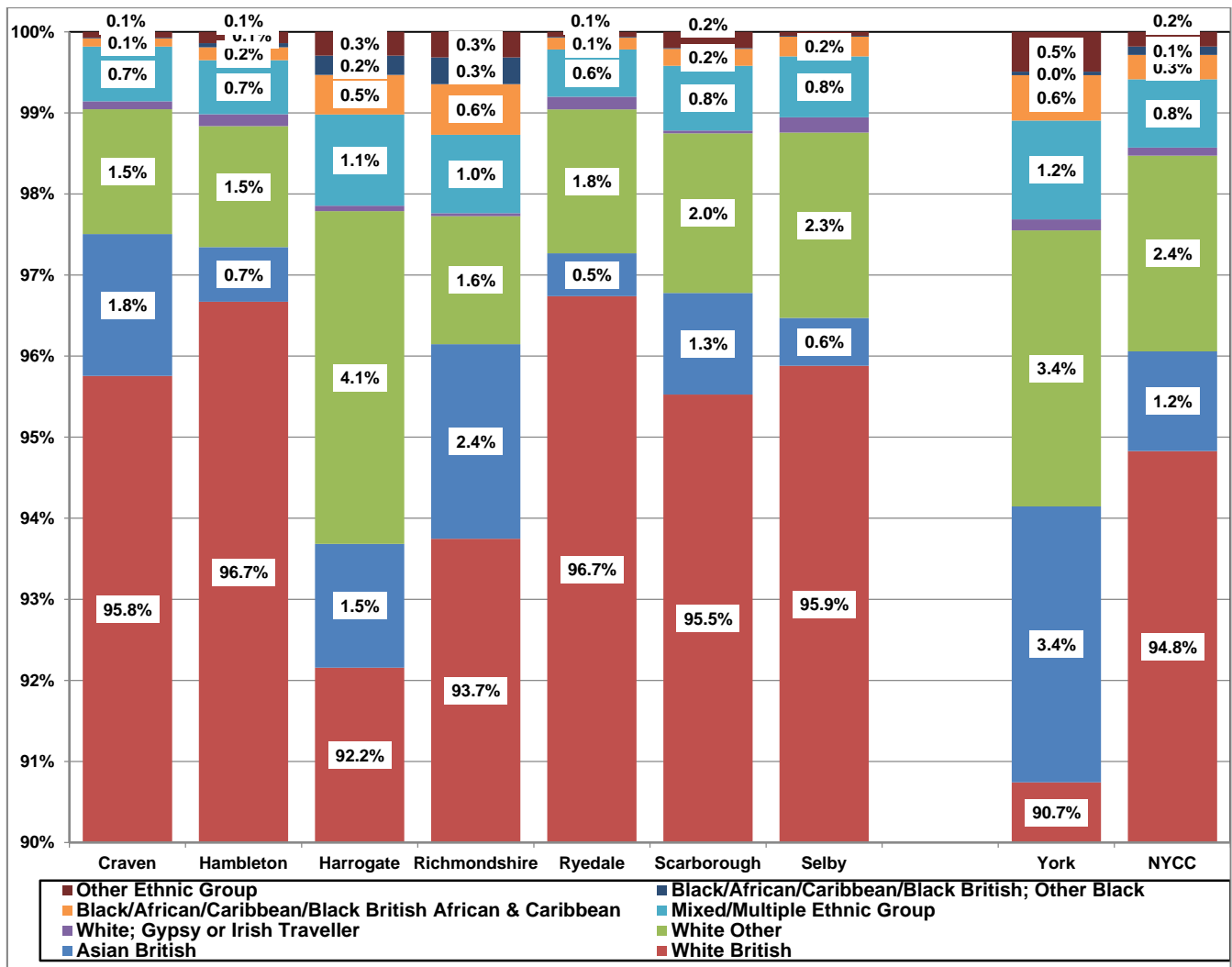


Source ONS 2013

The spread of 15-24 year olds across the districts shows that Harrogate and Scarborough have the largest number of deprived 15-24 year olds. In North Yorkshire as a whole the most number, 16,893, of 15-24 are in the least deprived quintile.

Key populations

Figure 20 Census 2011 Ethnicity breakdown by district (All ages)



Source ONS 2013

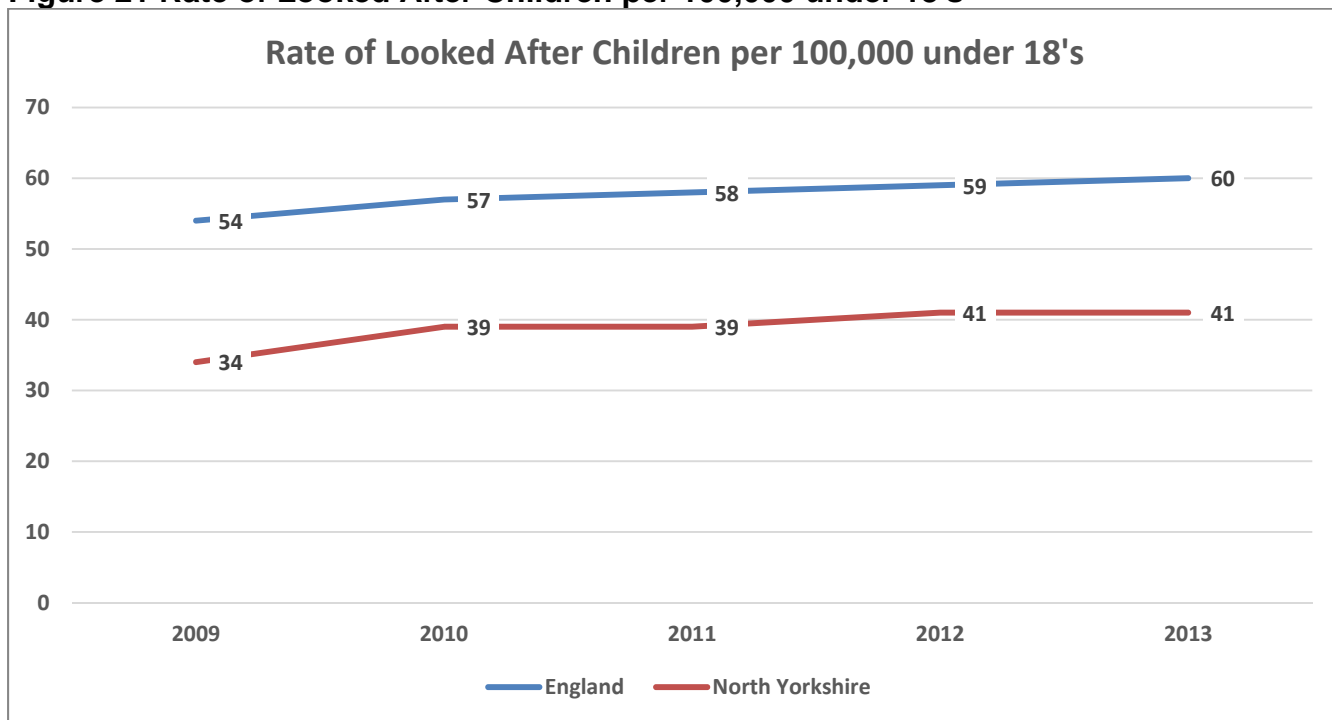
Table 14 Number of people by ethnic group at the 2011 census for districts

District	Craven	Hambleton	Harrogate	Rich'shire	Ryedale	Scarb	Selby	NYCC
Asian British	970	600	2,409	1247	273	1,364	493	7,356
Black/African/Caribbean/Black British African & Caribbean	56	142	772	325	75	227	203	1,800
Black/African/Caribbean/Black British; Other Black	5	46	375	171	5	13	9	624
Mixed/Multiple Ethnic Group	375	593	1,776	502	302	869	626	5,043
Other Ethnic Group	39	124	462	164	32	216	41	1,078
White British	53,057	86,173	145,488	48,716	50,064	103,926	80,012	567,436
White Other	853	1,330	6,480	821	919	2,141	1,907	14,451
White; Gypsy or Irish Traveller	54	132	107	19	81	37	158	588
Total	55,409	89,140	157,869	51,965	51,751	108,793	83,449	598,376

Source: ONS Population by ethnicity (Census 2011)

The ethnic diversity varies between districts with Harrogate the biggest number of non-white people; Asian British and mixed/multiple ethnic group make up the major part of this diversity in Harrogate. Asian British the largest number of non-white in Craven and Richmondshire. These data also show that there is a relatively small Gypsy or Irish Traveller population which is spread across the County but with the highest numbers in Selby. These figures may not reflect the total population, however as they're taken from the Census and may not capture transient members of this population.

Figure 21 Rate of Looked After Children per 100,000 under 18's



Source: DFE 2014

The rate of looked after children for North Yorkshire has consistently been lower than the national rate of looked after children. Both nationally and locally and the trend has been an increasing one.

Table 15 Number of North Yorkshire Disability Allowance claimants 2013 Q1 split by District of residence

District	Number of Disability Allowance claimants	Disability Allowance claimants as % of population
Craven	2,005	3.6%
Hambleton	2,970	3.3%
Harrogate	5,180	3.3%
Richmondshire	1,485	2.8%
Ryedale	1,880	3.6%
Scarborough	7,020	6.5%
Selby	3,145	3.7%
North Yorkshire	23,685	3.9%

Source: ONS, November 2013 snapshot,

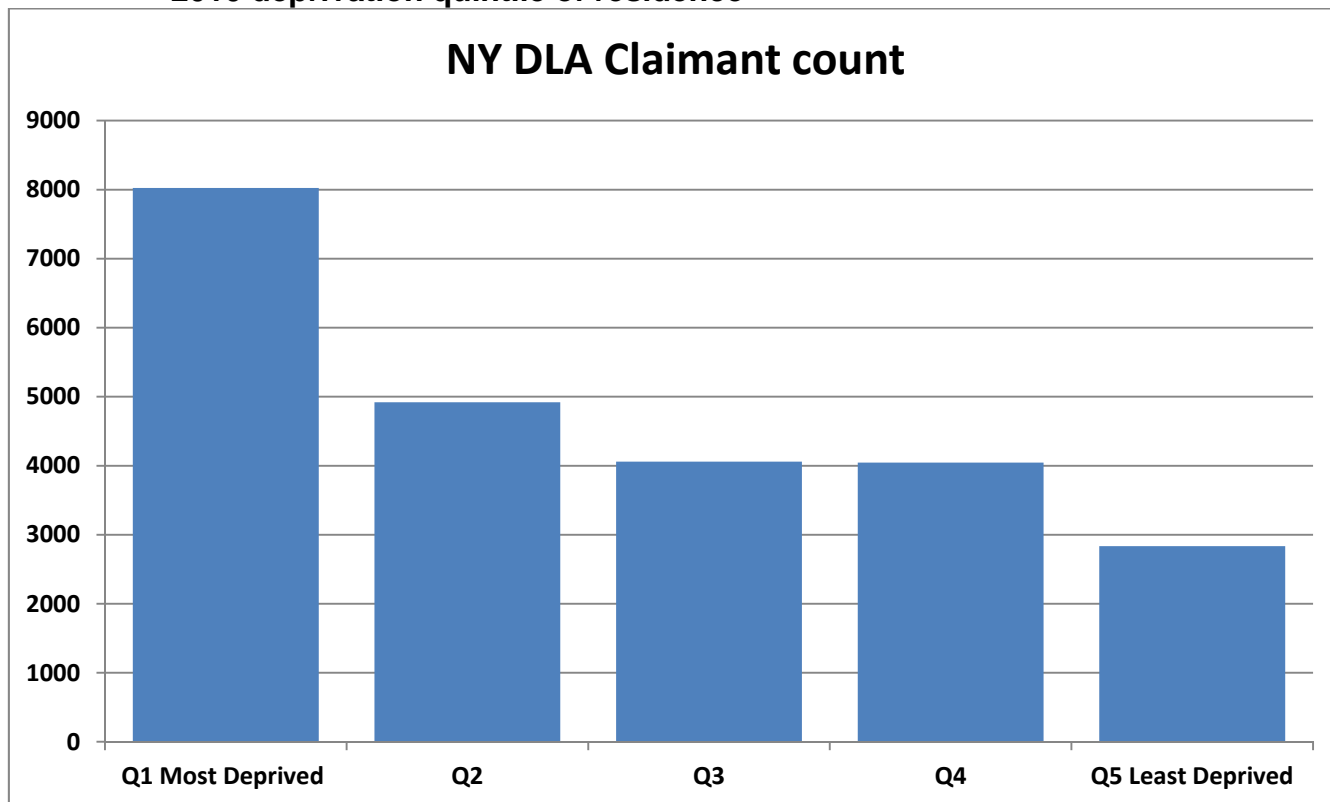
As of quarter 1 2013 there are over 23,000 people in North Yorkshire claiming Disability Living Allowance (DLA) with the greatest number (over 7,000) of claimants being resident in Scarborough district. The second highest number of claimants is in Harrogate at over 5,000. Together Scarborough and Harrogate districts have over half of the North Yorkshire total of DLA claimants.

To claim DLA, a person must have a mental or physical disability that is severe enough to mean that they qualify for the care component of DLA, or the mobility component of DLA or both components. When applying for DLA you have to describe the care you need. To do this you need to know what the word 'care' officially describes. The care component of DLA is paid to people who need attention or supervision from another person.

The indicator demonstrates where a population of likely high Health and Social care need is located, along with the relative number of people that make up this indicator. This population is likely to be a greater user of pharmaceutical services.

Unsurprisingly, DLA follows an inequalities gradient with most claimants living in the most deprived areas of North Yorkshire.

Figure 22 Number of North Yorkshire Disability Allowance claimants 2013 Q1 split by IMD 2010 deprivation quintile of residence



November 2013 snapshot, Source: ONS

Table 16 shows the number of carers registered with North Yorkshire County Council. Again, this shows the significance of Scarborough relative to the rest of North Yorkshire. Scarborough has the majority of carers at 2,665. This equates to over 40%. However, these figures are likely to underrepresent the caring population in North Yorkshire, as many carers do not classify themselves as such.

Table 16 The number of Open Carers in North Yorkshire County by District

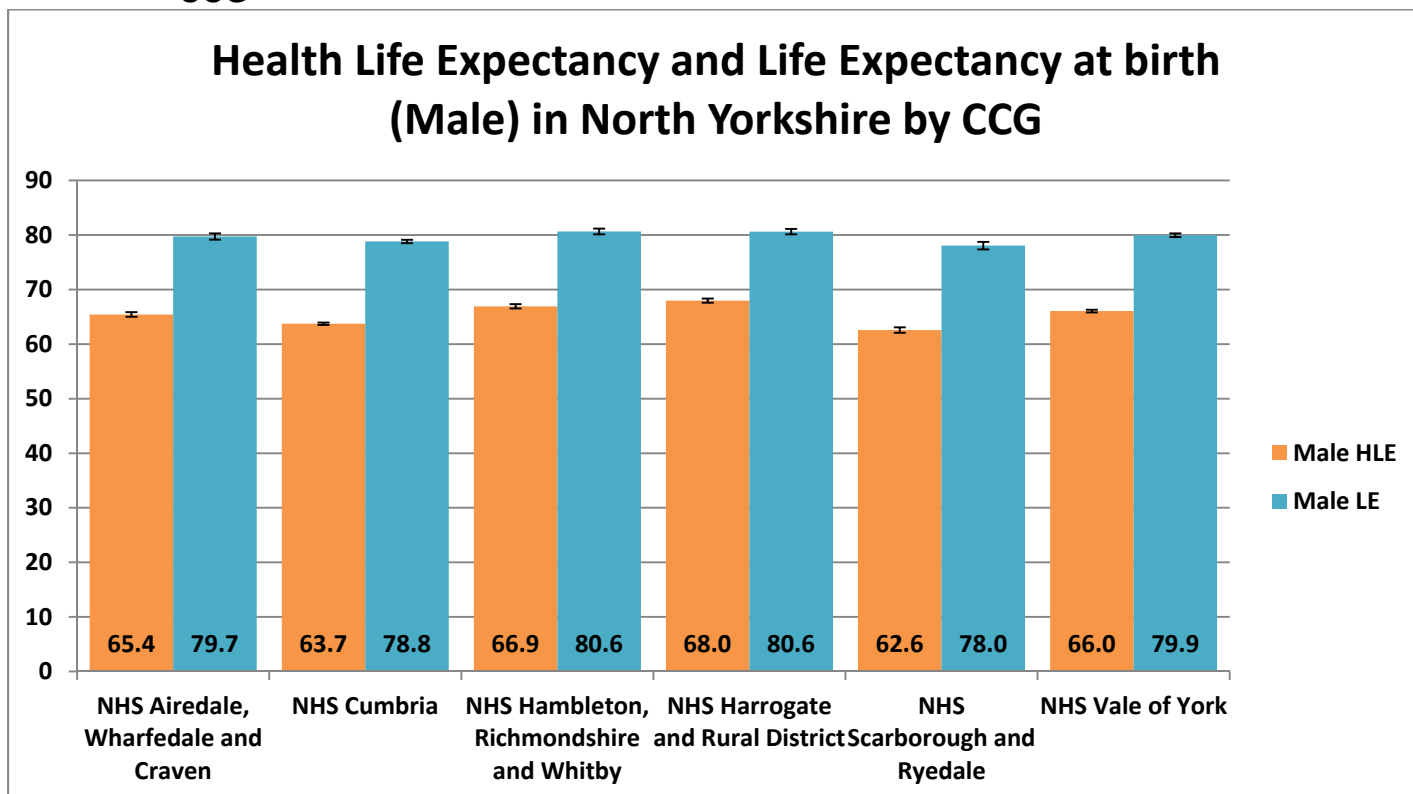
District	Carers	Carers as % of population
Craven	374	0.7%
Hambleton	728	0.8%
Harrogate	815	0.5%
Richmondshire	345	0.6%
Ryedale	374	0.7%
Scarborough	2,665	2.5%
Selby	658	0.8%
Out of County	212	
Grand Total	6,171	1.0%

Source NYCC 2014

8.2 Illness and disability

The life expectancy and healthy life expectancy indicators reflect a focus not only on how long people live but on how well they live at all stages of life. Healthy life expectancy, in particular, gives the number of years that you are expected to report yourself as being *healthy*.

Figure 23 Health Life Expectancy and Life Expectancy at birth (Male) in North Yorkshire by CCG

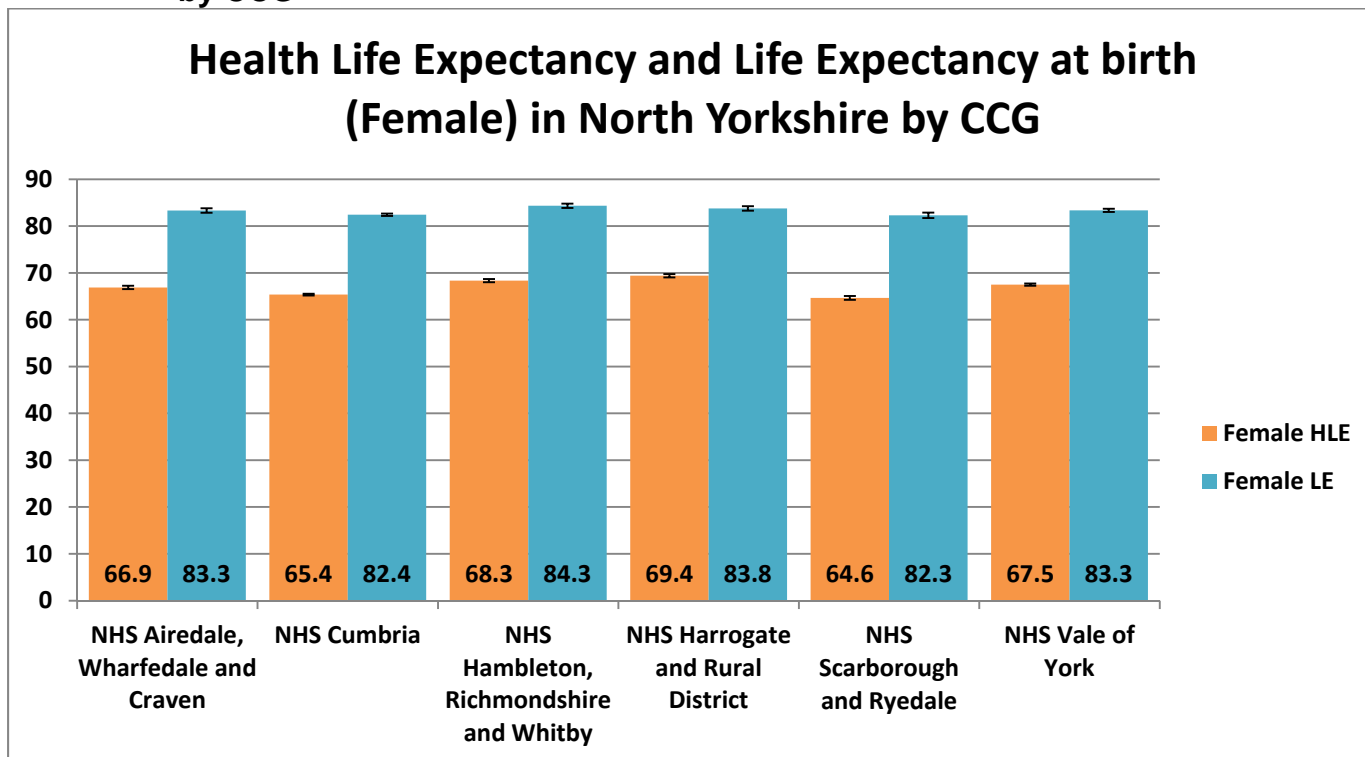


Source: PHE 2014

Healthy Life expectancy is variable for men across North Yorkshire CCG with Scarborough and Ryedale CCG having the lowest Healthy Life expectancy and Life expectancy versus Harrogate and Rural District CCG having the highest. The picture is mirrored for females.

Scarborough district, in particular, has both male and female life expectancies that are statistically significantly lower than the North Yorkshire average.

Figure 24 Health Life Expectancy and Life Expectancy at birth (Female) in North Yorkshire by CCG



Source: PHE 2014

The link between health risk factors and illness are clear. These risk factors, among others, lead to lives lived with disability and illness that place a strain on the health and care economy. Nationally, the major causes of years lived with disability in 2010:

- Mental and behavioural disorders (including substance abuse; 21.5%; 17.2-26.3%),
- Musculoskeletal disorders (30.5%; 25.5-35.7%).

These are two of the major long-term conditions (LTCs). A LTC is defined as a condition that cannot, at present be cured; but can be controlled by medication and other therapies. Other examples of LTCs are diabetes, heart disease and chronic obstructive pulmonary disease.

People with long-term conditions account for (General Lifestyle Survey, 2009):

- 30% of the population
- 50% of all GP appointments
- 64% of outpatient appointments
- 70% of all inpatient bed days.

In total around 70% of the total health and care spend in England (£7 in every £10) is attributed to caring for people with LTCs, this means 30% of the population accounts for 70% of the spend. North Yorkshire has a significantly higher proportion of people in the county (32.3%) who have one long-term condition than the national average (30.7) – this places North Yorkshire in the bottom quartile nationally (GP Patient Survey, 2011).

The care of individual LTCs is often the focus of healthcare delivery, research and training. However, increasingly, as the population in the UK ages, there are people with multiple morbidity – that those with two or more LTCs. This poses a big challenge to health, and indeed social care, delivery; particularly in an area such as North Yorkshire where the population is ageing rapidly.

Barnett et al. (2012) conducted a cross sectional study on 1.75 million people registered at 314 medical practices in Scotland as of March 2007. The purpose was to examine the distribution of multiple morbidity, and of comorbidity of physical and mental health disorders in relation to age and socioeconomic status.

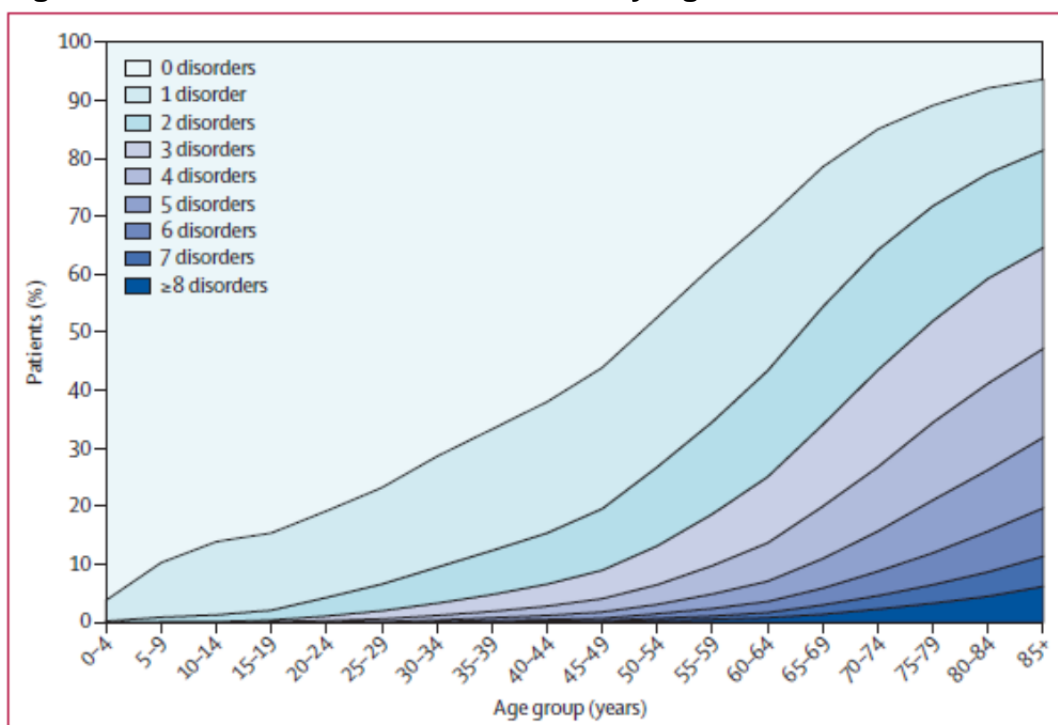
The key findings were:

- 42.2% of all patients had one or more morbidities,
- 23.2% of all patients were multi-morbid,
- Relative proportions of the population with multiple morbidities increase with age as might be expected,
- However, the largest absolute numbers of people with multiple morbidities were found in those aged under 65 years – this is due to the relative size of the populations under and over 65,
- Onset of multiple morbidity occurred 10-15 years earlier in those living in the most deprived areas compared with those in the most affluent areas,
- Socioeconomic deprivation was particularly associated with multiple morbidity that included mental health disorders,
 - Prevalence of both physical and mental health disorder:
 - 11.0% (95%CI: 9-11.2%) in most deprived areas,
 - 5.9% (95%CI: 5.8-6%) in least deprived areas,
- The presence of a mental health disorder increased with the number of physical morbidities:
 - 6.74% (95%CI: 6.59-6.90) for five or more disorders,
 - 1.95% (95%CI: 1.93-1.98) for one disorder,

Multiple morbidity becomes progressively more common with age. Fig. 25 below illustrates how morbidities accumulate with age which places a particular challenge on the North Yorkshire system. The current system in North Yorkshire is not designed to cope with this level of complexity, in particular the complexity of managing mental health disorders.

The most problematic expression of population ageing is the clinical condition of frailty. Frailty develops as a consequence of age-related decline in many physiological systems, which collectively results in vulnerability to sudden health status changes triggered by minor stressor events. Between a quarter and half of people older than 85 years are estimated to be frail, and these people have a substantially increased risk of falls, disability, long-term care, and death.

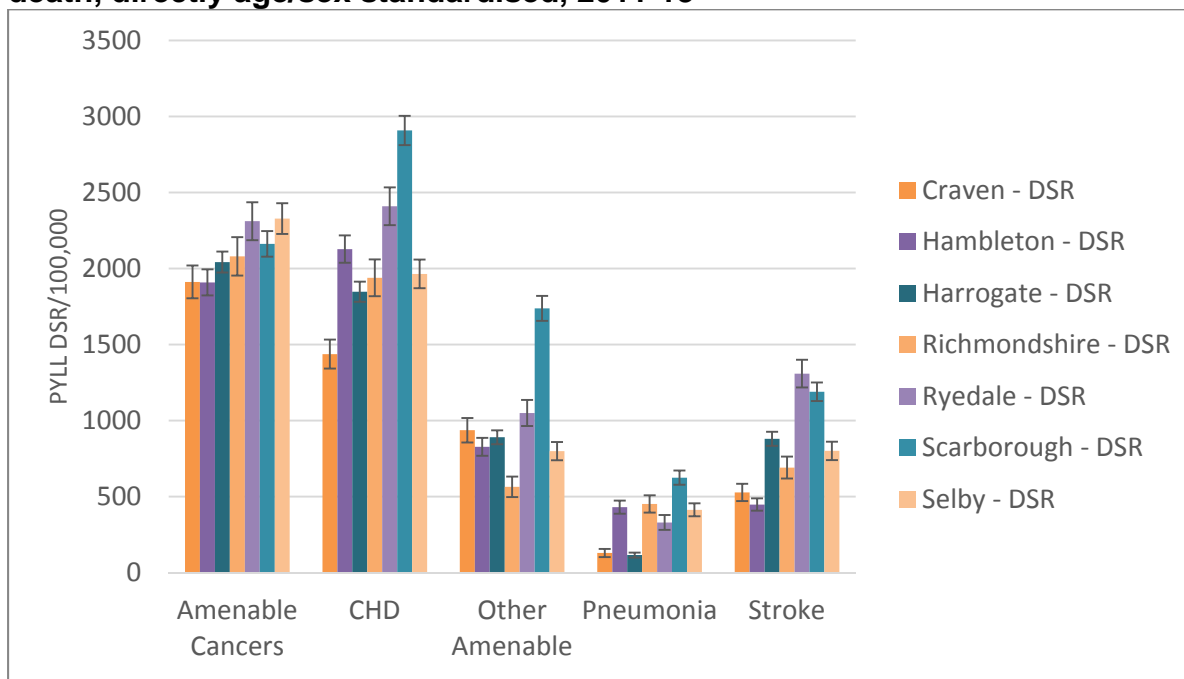
Figure 25 Number of Chronic Disorders by Age



Like many parts of the UK, circulatory disease (including heart disease and stroke) and cancers account for the greatest proportion of deaths in North Yorkshire. Cancers are the most common

cause of death under the age of 75 years, however the number of years of life lost vary significantly from district to district, often in line with deprivation. Figure 26 shows the inter district variation in potential years of life lost from causes considered amenable to healthcare. Scarborough, an area with higher deprivation, is a statistical outlier for coronary heart disease and stroke.

Figure 26 Total potential years of life lost per 100,000 population by district and cause of death, directly age/sex standardised, 2011-13



Service delivery is a challenge across the County especially as the funding settlements across public health, social care and health are significantly lower than other areas in the region. According to the Public Health England Spend and Outcomes Tool (2014)^{xii} North Yorkshire spends £32 per head on Public Health in comparison to £57 nationally, £54 regionally and £38 by ONS cluster group. Similarly, North Yorkshire spends £245 per head on Adult Social Care compared with £281 nationally, £259 regionally and £264 by ONS cluster group.

The number and rate of Non-Elective Admissions (Acute and General) to hospital are a focus for the North Yorkshire system. In line with the national picture, North Yorkshire has a rising standardised trend of NEAs (Fig. 27). This rising trend, when coupled with an ageing population makes the challenge even greater to achieve an absolute reduction in the number of NEAs.

It is important to define the key features of these admissions to truly understand where change needs to happen. Not all NEAs are realistically avoidable. Approximately 25% of NEAs can be considered as “avoidable emergency admissions”.

As with NEAs, North Yorkshire has an increasing rate of avoidable emergency admissions. The North Yorkshire rate appears to be increasing more rapidly than the national rate.

Figure 27 Non-elective Admissions

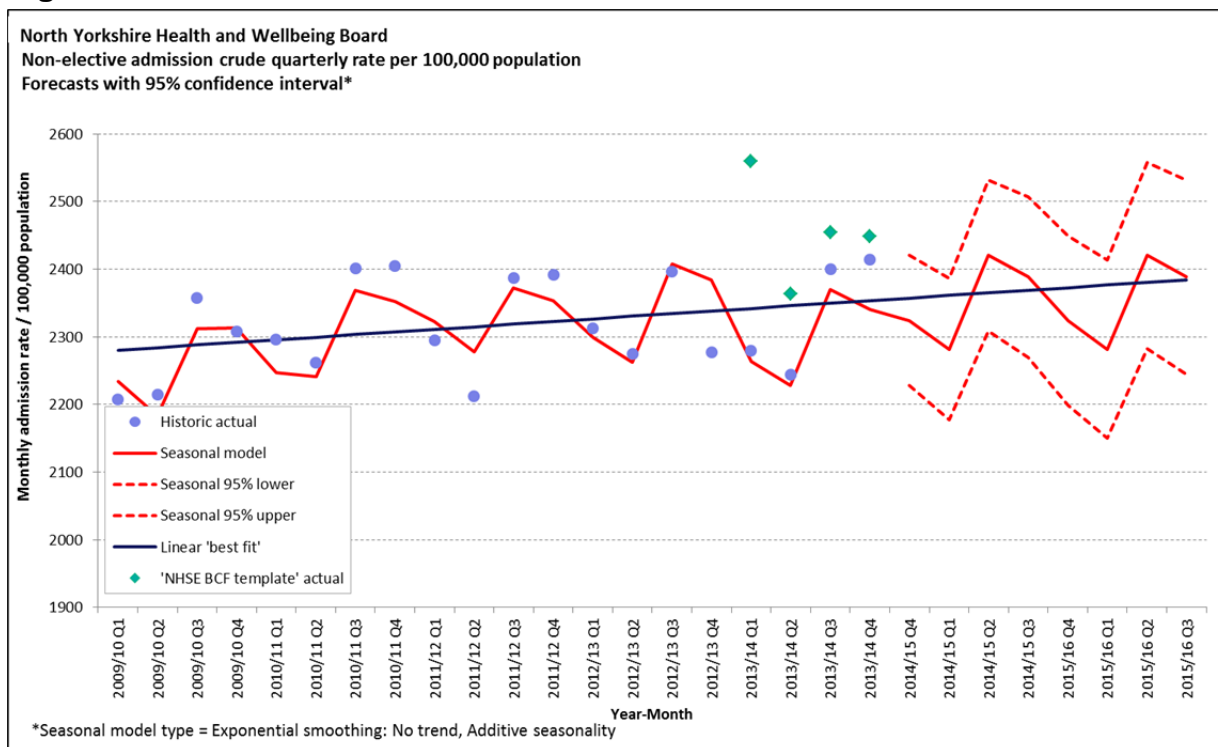
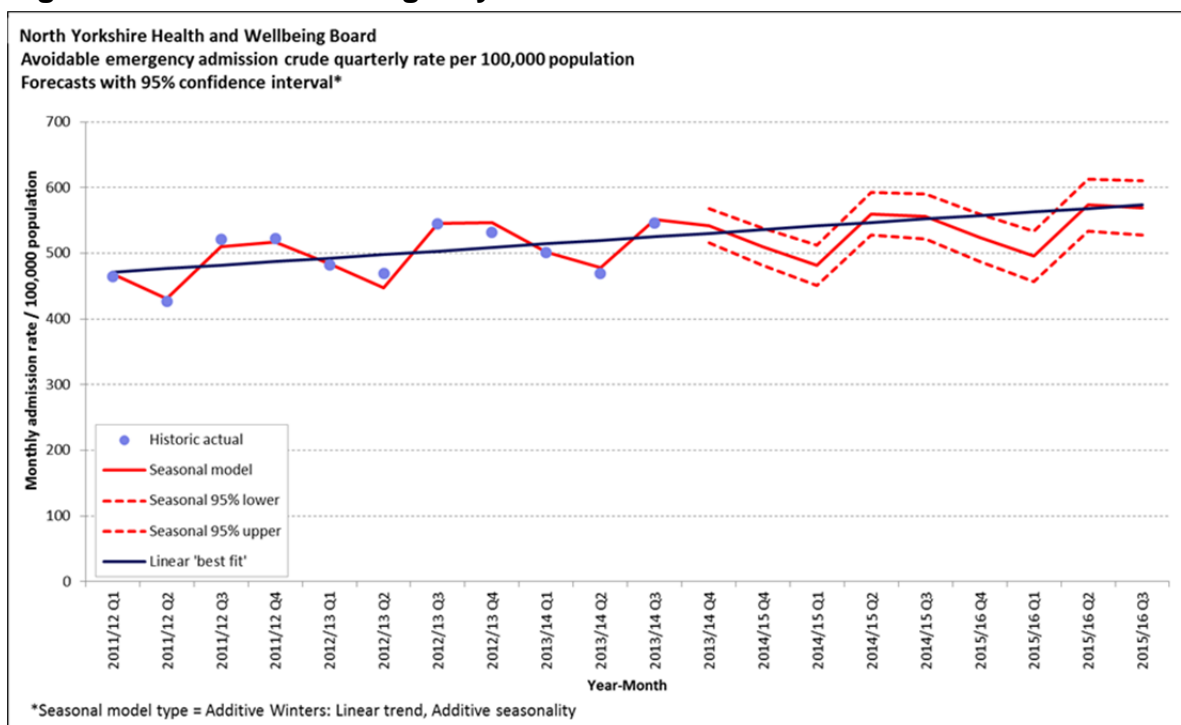


Figure 28 Avoidable Emergency Admissions



Breaking down the 'avoidable emergency admissions' indicator into its constituent parts highlights where the greatest opportunity for change in North Yorkshire lies.

Ambulatory care sensitive conditions (ACSCs) are conditions where effective community care and case management can help prevent the need for hospital admission. Even if the ACSC episode itself is managed well, an emergency admission for an ACSC is often a sign of the poor overall quality of primary and community care.

North Yorkshire already starts from a good position on this indicator with a generally declining rate in chronic ACSC admissions. The current local rate sits in the second best quintile nationally at around the 22nd percentile.

Around half of all ACS condition admissions in North Yorkshire relate to five conditions – this mirrors the national picture:

- Atrial fibrillation,
- Angina,
- Asthma,
- Heart Failure,
- COPD.

The long-term trend in improvement on this indicator appears to be slowing locally, when compared to the national trend. Therefore there are still opportunities to improve long-term condition management and this is a key tenet of our integration approach.

Emergency admissions for acute conditions that should not usually require hospital admission are for acute conditions such as:

- Ear, nose and throat infections,
- Kidney and urinary tract infections,
- Heart failure etc.

These are acute conditions that usually could have been avoided through better management in primary care.

This indicator is showing an increasing trend both locally and nationally. North Yorkshire currently sits in the top 40% of performers nationally, but this still illustrates that there is potential scope for local improvement, particularly against a rising upward trend. The main local drivers of this indicator are urinary tract infections (25%), gastroenteritis (19%) and influenza/pneumonia (18%). Greater support in primary care, improving the general health of the population, and providing specific self-care support to more vulnerable individuals such as people with long-term conditions needs to be the focus of local integration efforts.

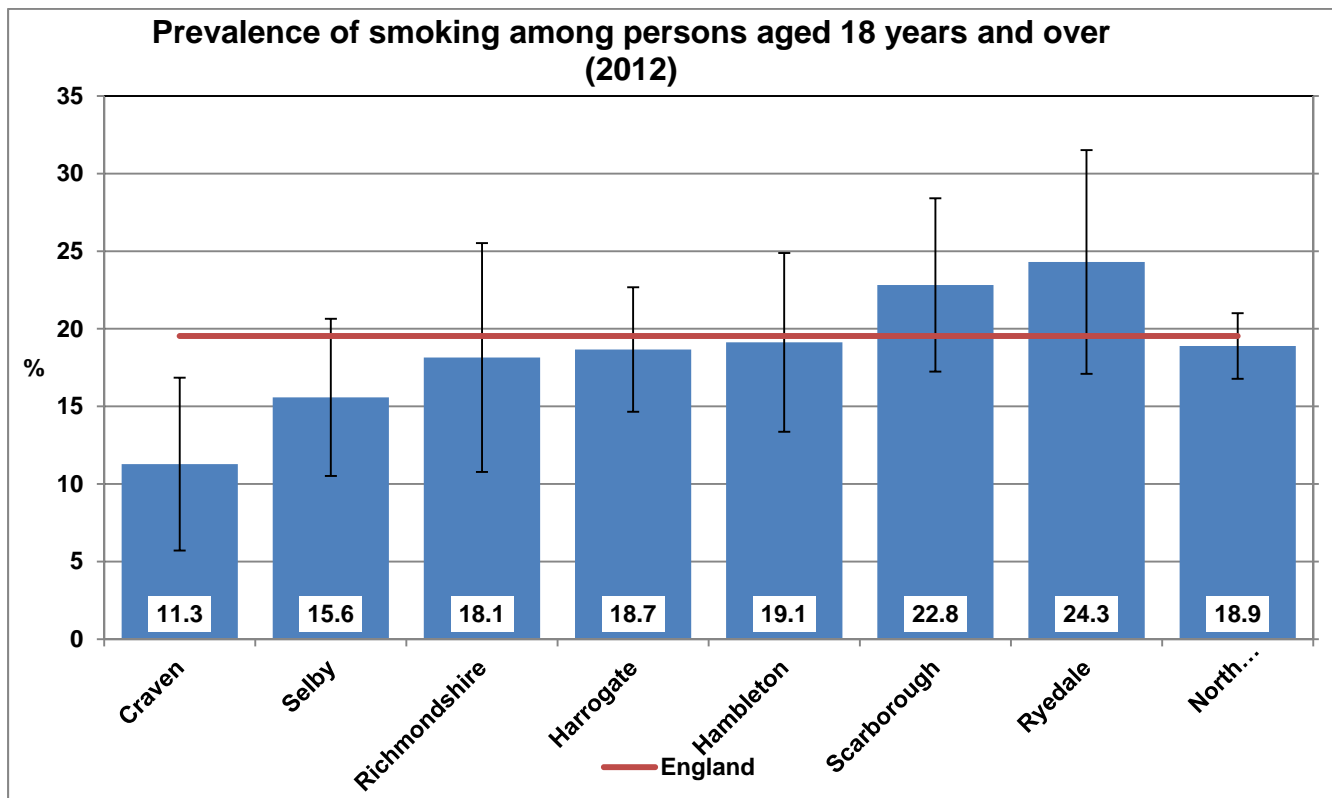
This is supported by evidence cited by NHS England that between 5% and 8% of unplanned emergency admissions in adults are due to avoidable issues related to medicines and between 30% and 50% of patients do not take their medicines as the prescriber intended.

8.3 Risks to health

The risks to health also vary significantly from area to area, with the major risk factors clearly associated with the greatest burdens of disease in North Yorkshire. Again, on average North Yorkshire performs at around the national average for these indicators, but in absolute terms they offer a huge challenge to the County.

Smoking remains the single greatest preventable cause of death and disability in England. The inequalities in smoking prevalence is more of a concern with North Yorkshire sitting above the national average for smoking prevalence in routine and manual group. Harrogate has the highest prevalence amongst routine and manual labourers over aged 18 (41.8%, significantly higher than the England average) with Ryedale, Scarborough, Selby and Hambleton all sitting above the national average. In the Public Health Outcomes Framework North Yorkshire ranks 24 out of 27 shire counties.

Figure 29 Prevalence of smoking among persons aged 18 years and over (2012)



Source Tobacco Profile 2013

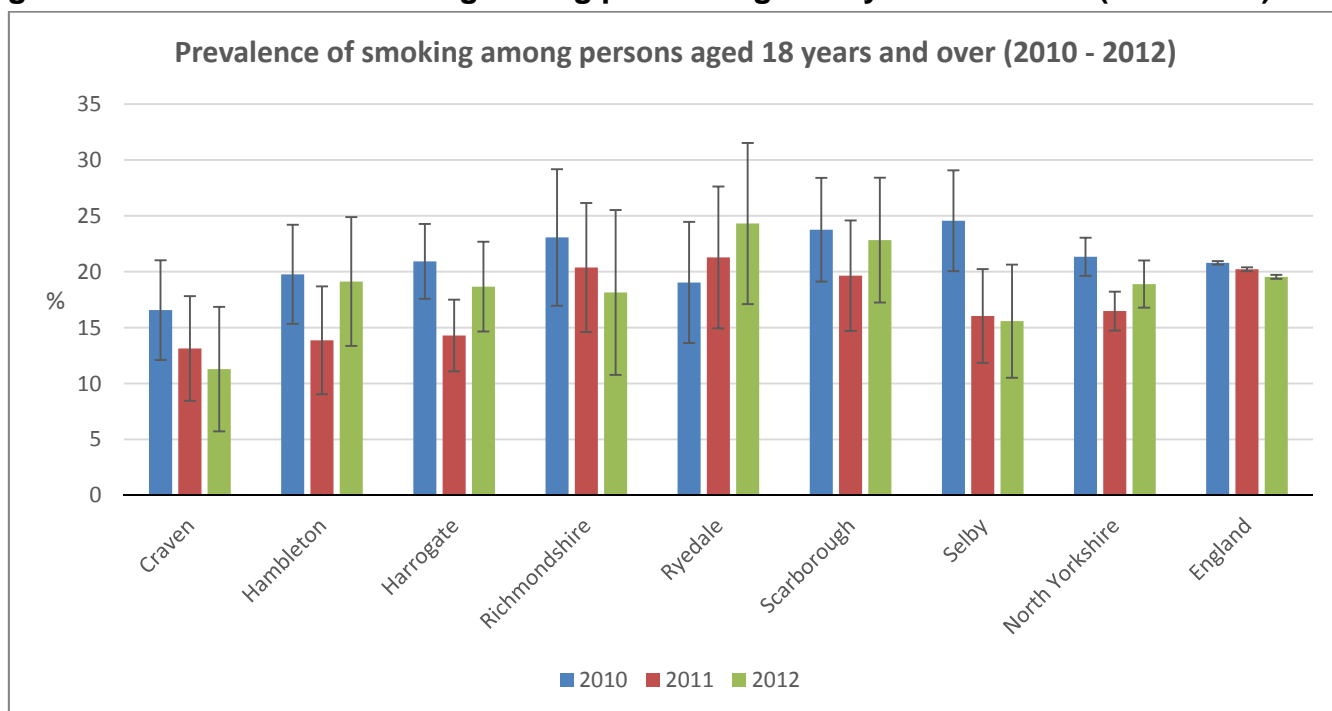
Table 17 Estimated number of smokers, 2012

District	Estimated number of smokers	Estimated number of smokers in the routine & manual group
Craven	3,168-9,345	3,862 – 20,600
Hambleton	11,991-22,332	14,868 – 39,202
Harrogate	23,237-35,969	48,639 – 83,811
Richmondshire	5,810-13,762	750 – 14,089
Ryedale	8,908-16,420	11,811 – 27,677
Scarborough	18,724-30,856	24,881 – 49,572
Selby	8,846-17,368	15,377 – 38,889
North Yorkshire	101,101-126,551	167,436 – 229,499

Source: www.tobaccoprofiles.info

Smoking prevalence is shown above with Craven district being the only area to significantly deviate from the national average, having a significantly lower average than the national. Ryedale has the highest rate however this is not significantly different from the national average.

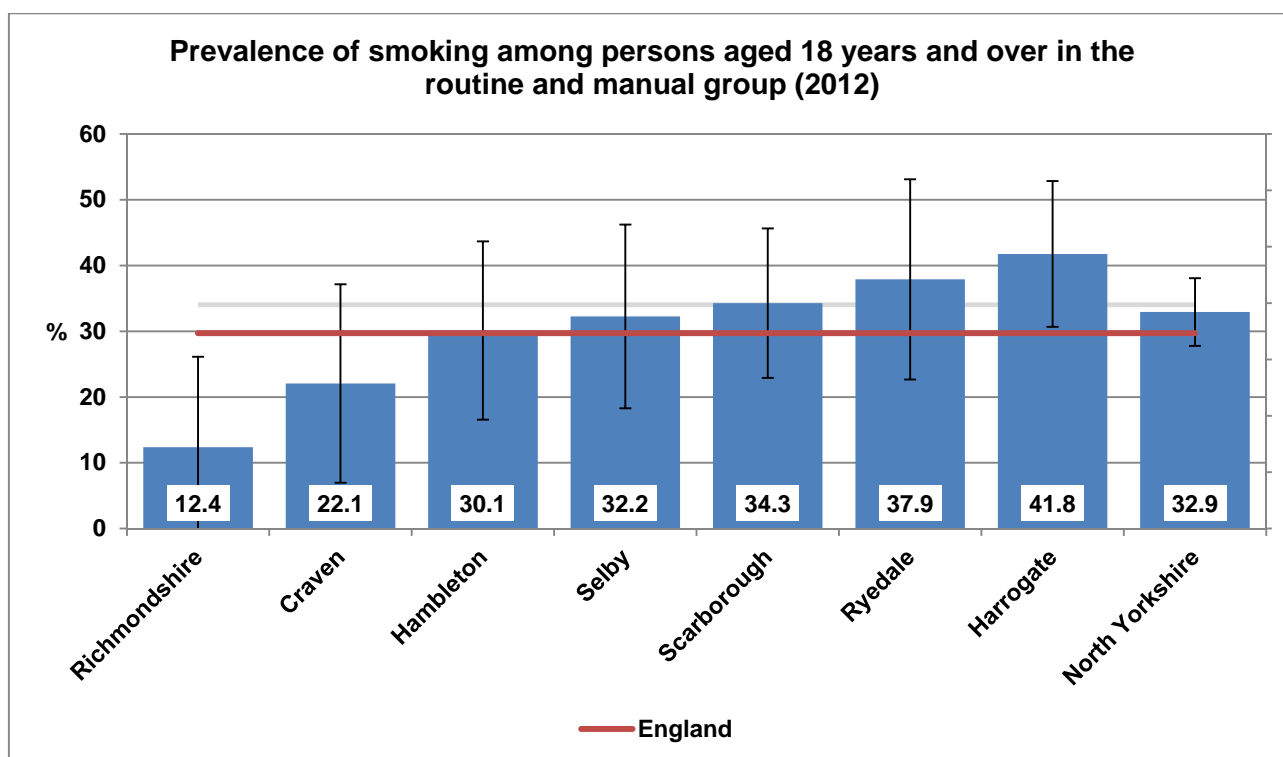
Figure 30 Prevalence of smoking among persons aged 18 years and over (2010-2012)



Source is Tobacco Profile 2013

The last three years trend data shows that there is significant variation in the direction seen in each district, most of it is not statistically significant the variation is worth discussing. Richmondshire has seen a stepped decrease in the value relative to Ryedale which has seen a stepped increase in the same period. Selby has very nearly seen a significant decrease in its rate since 2010. Craven has only recently become significantly lower in than the national average in 2012.

Figure 31 Prevalence of smoking among persons aged 18 years and over in the routine and manual group (2012)



Routine and manual groups have much higher smoking prevalence when compared to the wider population; Harrogate has a significantly higher rate of smoking prevalence in this group suggesting a real area of need.

Alcohol is another issue of concern in North Yorkshire with an estimated 125,000 people in North Yorkshire who regularly drink over recommended limits of no more than 3-4 units a day for men and no more than 2-3 units a day for women on a regular basis. This presents a significant challenge to the long term health of the population as well as the acute health and social consequences of alcohol.

Table 18 Mid 2009 synthetic estimate of the percentage within the drinking population (not including abstainers) aged 16 years and over who report engaging in higher risk drinking. Higher risk drinking is classified as the regular consumption of more than 8 units a day for a man (more than 50 units a week) or more than 6 units per day for a woman (more than 35 units a week).

	Mid 2009 synthetic estimate of the percentage within the drinking population (not including abstainers) aged 16 years and over who report engaging in higher risk drinking	Estimated number of people reported engaging in higher risk drinking (95% CI)
Craven	6.96	946 – 9,094
Hambleton	7.32	1,516 – 14,716
Harrogate	7.24	2,798 – 25,586
Richmondshire	7.82	972 – 9,163
Ryedale	7.56	980 – 9,640
Scarborough	6.84	1,945 – 17,019
Selby	6.70	1,371 – 12,407

Higher risk drinking (as a percentage of drinkers): Mid 2009 synthetic estimate of the percentage of drinkers in the population aged 16 years and over who report engaging in higher risk drinking (consuming more than 50 units of alcohol per week for males, and more than 35 units of alcohol per week for females). Estimates were derived from a statistical model developed to estimate the percentage of abstainers, lower risk (as a percentage of drinkers), increasing risk (as a percentage of drinkers) and higher risk drinkers (as a percentage of drinkers) in local authority populations. The Local Alcohol Profiles for England 2012 refresh for this indicator (and subsequent refreshes of data) was generated using an enhanced methodology (see metadata for details) and care should be taken when comparing these with previous estimates.

Obesity is another health risk factor of concern; in North Yorkshire it is estimated that there are between 398,000 and 419,000 adults who are either overweight or obese – some 67% of the adult population. North Yorkshire also ranks 24 out of 27 shire counties for this indicator.

Table 19 Mid Adjusted prevalence of overweight, obese and excess weight adults aged 16 years and over in England, 2012

	% Overweight (not including obese)	Estimated number of overweight (not including obese) adults	% Obese	Estimated number of obese adults	% Excess weight (overweight and obese)	Estimated number of excess weight (overweight and obese) adults
Craven	46.9%	23,380 – 28,587	18.9%	8,414 – 12,496	65.7%	33,962 – 38,916
Hambleton	41.8%	33,174 – 41,796	25.5%	19,081 – 26,701	67.3%	56,275 – 64,478
Harrogate	43.3%	61,239 – 76,237	21.4%	27,677 – 40,081	64.7%	95,386 – 109,850
Richmondshire	41.0%	19,571 – 24,675	22.2%	9,818 – 14,131	63.2%	31,595 – 36,600
Ryedale	50.8%	23,913 – 29,057	22.8%	9,735 – 14,054	73.7%	36,114 – 40,646
Scarborough	47.0%	45,864 – 56,185	24.1%	21,799 – 30,649	71.1%	72,562 – 81,936
Selby	44.5%	33,356 – 41,481	26.5%	18,702 – 25,919	71.0%	56,019 – 63,439
North Yorkshire	44.7%	258,602 – 280,409	23.2%	130,418 – 148,925	67.9%	398,939 – 419,416

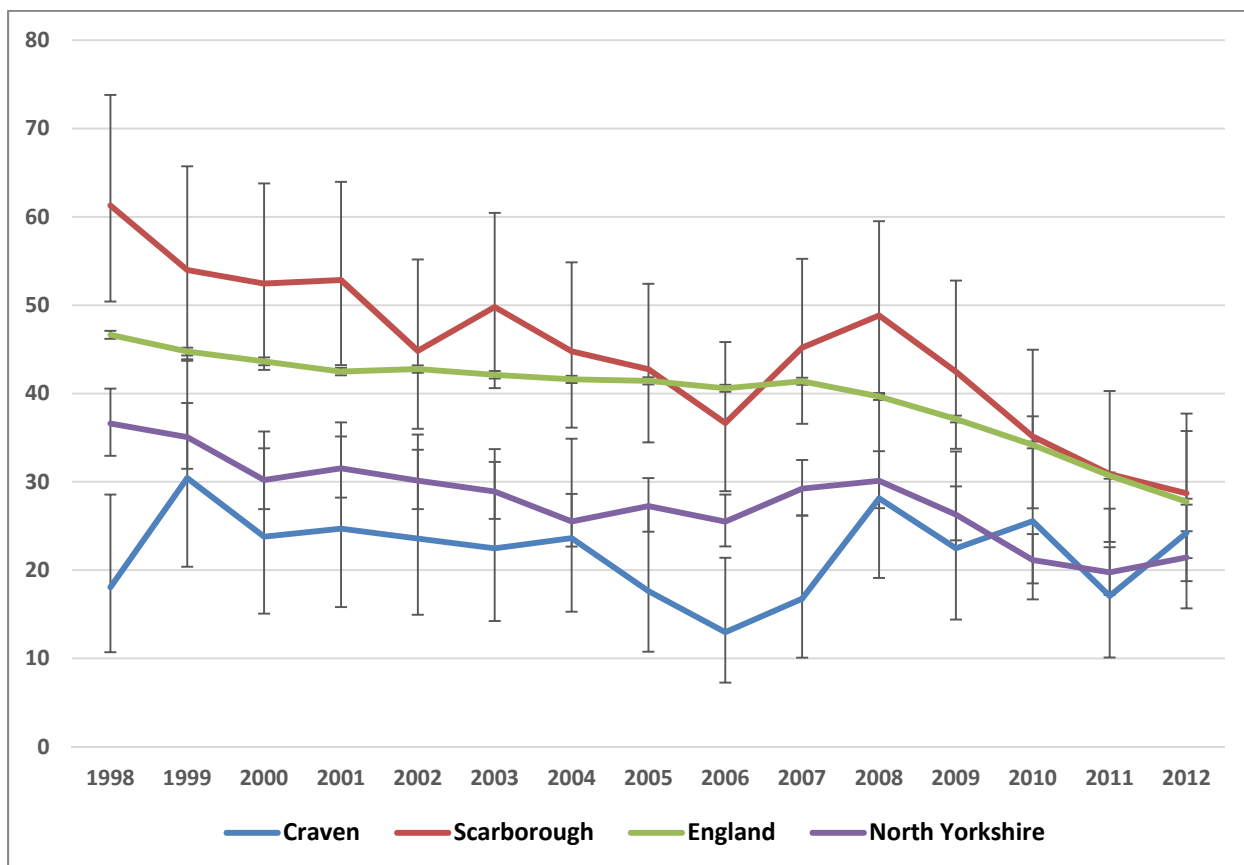
Source: Active People Survey

Table 20 NDTMS Adult Partnership Performance Report

	2010/11 Q4	2011/12 Q4	2012/13 Q4	2013/14 Q4
Number of individuals in treatment previously or currently injecting (North Yorkshire)	961	923	898	860
District estimates calculated by population ratios:				
Craven	87	83	80	77
Hambleton	141	136	132	127
Harrogate	252	243	235	224
Richmondshire	90	87	86	82
Ryedale	80	77	75	72
Scarborough	171	163	159	151
Selby	139	134	131	126

Source: National Drug Treatment Monitoring System

Figure 32 Teen Conception rate for North Yorkshire's highest and lowest district



Source: ONS 2014

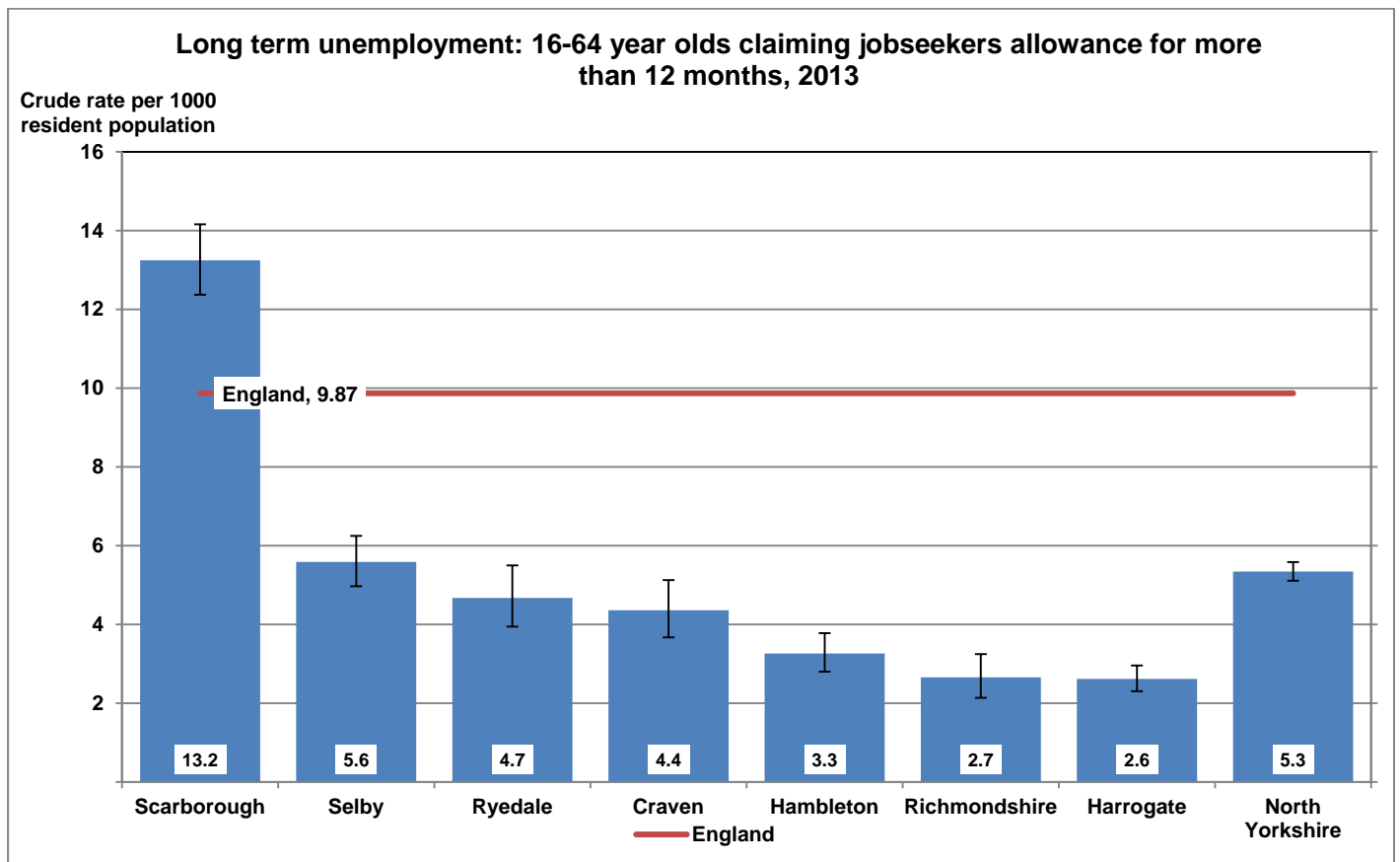
Teen conception has been on a downward trend locally and nationally, with a steeper decline since 2008. For the most part Scarborough District has been significantly higher than the North Yorkshire average, however recently it has decreased in line with the national rate.

8.4 Wider determinants

There are a number of social and environmental factors that affect the need for and access to pharmaceutical services.

The proportion of people classified as being long term unemployed is a potential marker of both need, given the relationship between income and health, and also an indicator of access.

Figure 33 Long term unemployment: 16-64 year olds claiming jobseekers allowance for more than 12 months, 2013

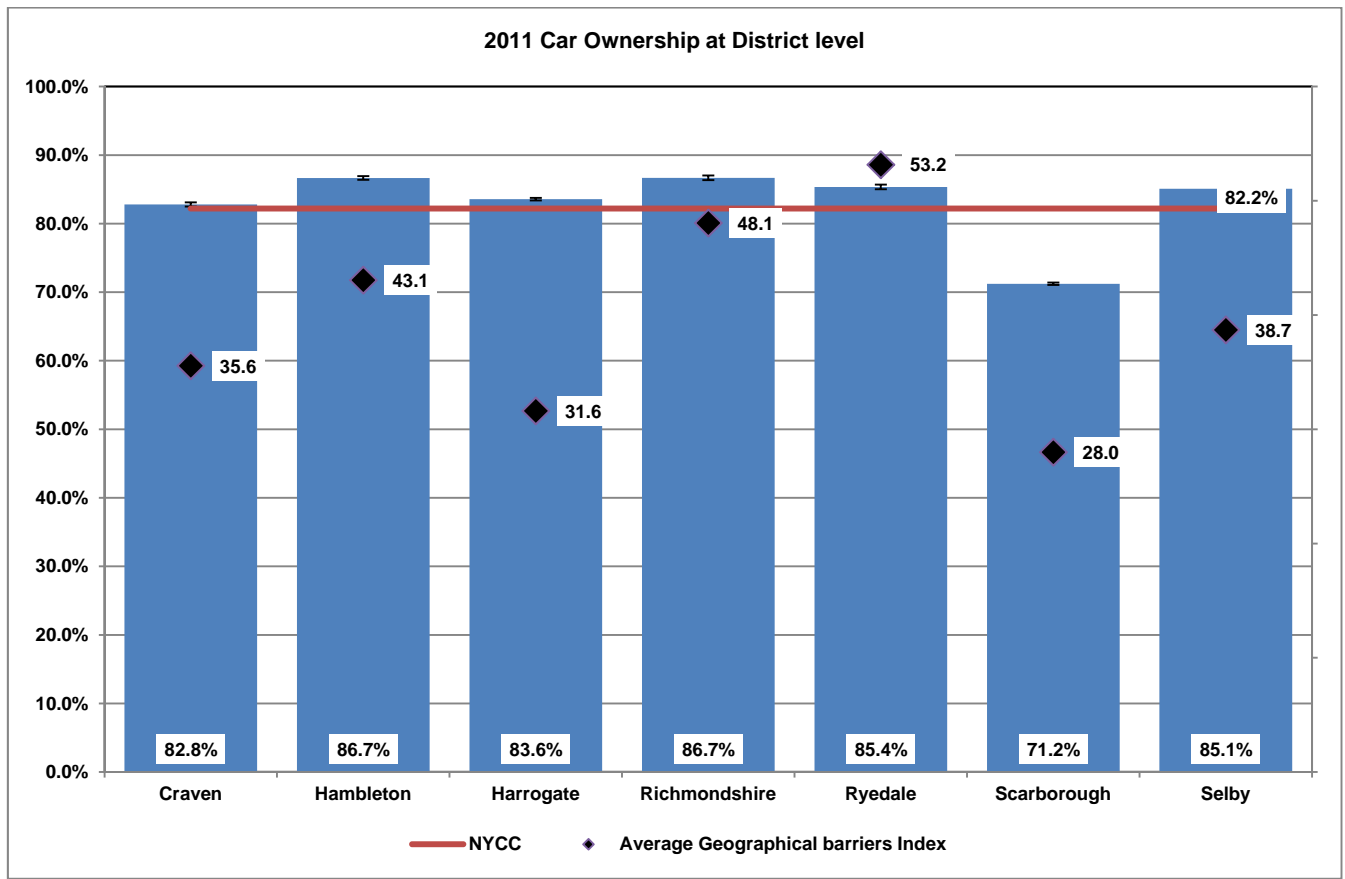


Source: Health Profiles 2014

The figures show that six out of the seven districts across North Yorkshire are significantly lower than the national rate of long term unemployment; Scarborough is significantly higher than the national average.

Census data on car ownership shows an interesting pattern that reflects the rurality of North Yorkshire with the Selby, Ryedale and Hambleton all having car ownership levels that are significantly higher than the 82.2% North Yorkshire and 74.3% England average.

Figure 34 Census Car ownership 2011 and the geographical barriers index value by District (one or more cars in the Household)



Source: ONS Census 2011

8.5 Public Questionnaires

In total 118 questionnaires were received, including 14 from community organisations. Although questionnaires were received from all areas, only small numbers (less than ten) were received from people living in Craven, Richmondshire or Selby. 70% of questionnaires were returned by women.

Although the number of questionnaires received would make it inappropriate for decisions to be made solely on the comments made, they do provide a useful indication of how people use and their views about pharmacy services in North Yorkshire.

Location of Pharmacy

Most people said they normally used a pharmacy close to their home, or close to or at their GP practice. Although people still expressed a preference for using a pharmacy near their home, a large number expressed a preference for being able to use a pharmacy at their GP practice.

Table 21 Pharmacy location preferences

Pharmacy location	Generally visit	Prefer to visit
At my GP practice	15%	28%
At the supermarket	5%	2%
Close to my GP	18%	15%
Close to my home	37%	31%
Close to my work	4%	5%
Close to shops	16%	13%
No preference	0%	3%
Not answered	3%	2%
Other	2%	2%

Opening hours

Most people (58%) said they normally visited a pharmacy on weekdays between 9am and 6pm or at no particular time (28%). Most people would also prefer to visit on weekdays between 9am and 6pm (40%) or at no particular time (32%). However 8% of people expressed a preference for being able to visit pharmacies after 6pm on weekdays and 9% on Saturdays.

Overall people said they could generally find a pharmacy open when needed (83% always or usually). However only 37% people said they could find a pharmacy open after 6pm on weekdays and only 31% open on Sundays.

Overall 56% of people rated availability of pharmacy services in their area to be good or very good and 26% adequate. However 10% rated availability as very poor.

Reasons for visiting a pharmacy for services other than prescription medicines

Although the question only asked people who normally get their prescription medicines from a GP dispensary, the question was also answered by people who had stated that they got their prescription medicines from pharmacies or the internet.

Table 22 Reasons for visiting a pharmacy for services other than prescription medicines

Visit pharmacy for ...	Prescription medicines obtained from:		
	GP dispensary	Pharmacy	Internet
To buy over the counter medicine from the pharmacy	10	24	1
To get advice from the pharmacy	5	15	1
To access other pharmacy services e.g. stop smoking services, emergency contraception	0	0	0
To get my flu jab	1	1	0
To shop for nonmedical goods e.g. beauty products, toiletries, baby products etc.	6	15	1
Other	1	5	0

Comments were made on eleven questionnaires about other reasons for visiting a pharmacy. The most common reason was to buy other goods, including presents and veterinary products. Some people said they never visited the pharmacy because prescriptions were collected for them and their medicines were home delivered.

Experienced recurrent problems when using usual pharmacy

Fifty questionnaires contained between them 60 identifiable comments about problems when using their usual pharmacy. The most frequently mentioned problem (26 times) was medicines not being in stock, followed by delays waiting for medicines to be dispensed either in the pharmacy or waiting for repeat prescription requests to be processed through the “system” (11 times). Dispensing errors and a need for longer opening hours were both mentioned five times. Three comments were made about wanting to be able to use a GP dispensary.⁵

Service use

Table 23 Service use

	Prescription collection service from your GP surgery	Prescription medicines delivery service from pharmacy to home	Repeat prescription service at pharmacy	Stop Smoking Support Service	Chlamydia screening service	Healthy eating and living advice service	Medicines usage review service	New medicines service	Emergency contraception	Minor conditions advice e.g. sore throat, hay fever, thrush	Health checks, for example, blood pressure checks	Weight management / dietary advice	Information on health and social services	Vaccinations	Dispensing into monitored dose containers
Available: I have not used	23	39	23	36	19	20	20	12	24	26	28	22	18	19	13
Available: I have used	70	23	58	3	1	4	24	7	3	50	12	7	2	11	10
Don't know	6	27	18	58	76	75	61	83	71	22	54	71	77	62	75
Not available: I would not use this	2	8	3	11	11	5	3	5	9	5	6	6	8	11	5
Not available: I would use this	13	13	9	1	2	5	5	3	2	6	8	4	4	6	6
not answered	4	8	7	9	9	9	5	8	9	9	9	8	9	9	9

⁵ NHS England complaints contact centre details – <http://www.england.nhs.uk/contact-us>

Thirteen questionnaires contained comments about other services. Five people said they thought services should be offered either by their GP or at their GP practices i.e. not by pharmacies. Two people wanted to be able to use a GP dispensary.

What do you like about your pharmacy?

There were 102 questionnaires containing 124 identifiable comments about what people liked about their pharmacy. Most frequently mentioned (51 times) was good customer service (helpful, cheerful staff and efficient service), followed by the location of their pharmacy (37 times). Availability of advice and information was mentioned 13 times and good opening hours eight times. Ten people said there was either nothing or very little to like.

What do you think could be improved?

Ninety-seven questionnaires contained 117 identifiable comments about what people thought could be improved. Most frequently mentioned (18 times) was opening hours, closely followed by required medicines being in stocks (17 times). Better customer service and reduction in the times waiting for medicines to be dispensed were both mentioned 13 times. Improved privacy (8 times) and need for larger premises (seven times) were also mentioned. Five people felt that continuity of staff (i.e. high rate of staff turnover) should be improved. Nine people said they could think of nothing that needed improvement or no changes were required.

Other comments about pharmacy services.

Sixty-two questionnaires contained 68 identifiable other comments about pharmacy services. Twelve people commented that service was good compared with four saying service was bad or poor. Nine people would like longer opening hours, three people wanted more pharmacies/more competition and three thought there were too many pharmacies. Five people felt that continuity of staff (i.e. high rate of staff turnover) was a problem. Overall 29% of comments about services were positive, 58% negative and 13% neutral.

West Ayton and Snainton Patient Participation Group, and the East Ayton Parish council both expressed views that rules around GP dispensing limited the choice of patients who are classified as “non-dispensing patients”. Non-dispensing patients can’t access GP dispensing at Ayton and Snainton Practice and they must use a community pharmacy of their choice.

The rules around who is able to use a GP dispensary are determined by regulations created by national government and therefore not directly influenced through the PNA. NHS England has no local powers to change who is able to use GP dispensing services.

8.6 Health and care professional's questionnaire

Twenty five people responded to the questionnaire and answered or made comments about one more questions. The following table gives a breakdown of the type of organisation the people worked for:

Organisation type	Number of responses
GP practice, including dispensing practices	3
NHS trust	6
Local authority	5
Dental services	3
Registered charity	3
Domiciliary care provider	1
Pharmacy	1

Availability of services

Twenty people made comments which covered a range of issues. Four comments suggested longer opening hours were needed, while four said opening hours were alright. Four people thought access was good, one person felt there was room for improvement. Two people felt that availability of services including late opening was not being communicated very well to patients, although one person felt that out of hours arrangements were well publicised.

Quality of services

Sixteen people commented on the quality of pharmacy services, eleven thought services were good, three that they varied and one that they were not good. (One person said they were unable to comment).

Service improvements

Nineteen people made comments about service improvements covering a range of topics including:

- A need for better communications across service

- Clarity around a patient's hospital and GP prescriptions

- Longer opening hours

- More community services

- More standardisation of the range of services offered by pharmacies

- Better privacy within pharmacy

- Better communications within the pharmacy service

- Improvements to sexual health services

- Better staffing levels

Problems Accessing Services

Seventeen people commented about problems accessing pharmacy services. Four people felt opening hours caused problems for some people. Two people commented on dispensing errors and one on long waiting list for services (i.e. smoking cessation).

Eight people said they were not aware of any problems.

Services

Table 24 Desired Services - Health and care professional

	Prescription collection	Delivery service	Repeat prescriptions	Stop smoking	Chlamydia screening	healthy eating	medicine. review	emergency Contraception	minor conditions advice	health checks	weight manage	information	Vaccinations	Substance misuse
Very desirable	16	13	11	8	7	9	13	14	12	13	13	11	10	8
Desirable	5	7	7	11	9	9	6	5	9	6	8	8	8	9
Not necessary	2	3	5	4	6	5	4	3	2	4	2	3	5	5
not answered					1			1				1		1
% Desirable + very desirable	91%	87%	78%	83%	73%	78%	83%	86%	91%	83%	91%	86%	78%	77%

Other services that could be provided by pharmacies?

Sixteen people commented including five who felt they were unable to suggest any additional services. Suggestions covered a range of topics including:

- Having a core/standard set of services available at all pharmacies
- Immunisation & BBV testing services
- Closer working of Pharmacies and GPs
- Commissioned (paid) community Medicines Dosing System supply for PivoTell MDS
- Medication information to be available to clients
- Medication prompting services
- More public awareness of services available from pharmacies
- Oral health advice
- Partnership working - medication for stable long term mental health conditions combined with delivery of physical health check
- Improved sexual health appointment arrangements.

Additional comments

Three additional comments were made:

- Current and anticipated future needs are/will be met.
- Should push ahead with Healthy Living Pharmacies. GPs should be made to interact and collaborate with pharmacies for shared reward rather than shut us out and keep funds and commissioning to themselves. This is not in the interest of patients.
- There needs to be greater involvement of pharmacy in the primary care team.

Comments received separate to the questionnaire

A separate email response was received from the Manager for GaTEWAY NY and st@y Selby (organisations who support and provide services for the Gypsy and Traveller community in North Yorkshire). GaTEWAY NY and st@y Selby have been working with AWC CCG about improving awareness, understanding and access to pharmacy services through their Pharmacy First scheme.

Through conducting this work it has become apparent that there is a lack of awareness and understanding of the services available through pharmacies. Because of this lack of awareness, there was a tendency for GRT to think that they needed to access GPs for such things as coughs, colds etc., which they can generally be reluctant to do due to the difficulty in some GP appointment systems, and anxieties over picking up the phone, followed by further difficulty and anxieties in the describing of symptoms etc. to clinical practitioners. This is something the GaTEWAY service now regularly provides support for. A similar approach to AWC CCG across the County would be beneficial in raising awareness of pharmacy services.

There also frequently appears to be a lack of understanding of prescribed medication. A number of clients accessing our service have been on large amounts of prescribed medication which they do not fully understand, for a number of ailments, often for very long periods without review. The service often has to explain the purposes of medication, and quite often support/accompany the client to return to their GP for a medication review.

We do, however, also find that due to the rurality of some GRT Sites, as well as Unauthorised Encampments, there can be some distance to the nearest pharmacy. Therefore accessibility in this way is also an issue, particularly for the most vulnerable members of the community, such as the elderly, or those without transport.

8.7 Strategic stakeholder's questionnaire

Questionnaires were received from the following organisations

Table 25 Strategic stakeholder's questionnaire - Responding organisations

Organisation	Department/lead area
City of York Council	Health and Wellbeing
East Ayton Parish Council	
Hambleton Richmondshire and Whitby CCG	
Harrogate and Rural District CCG	Prescribing and Medicines Management
North York Moors National Park	Planning
Scarborough Borough Council	Forward Planning
Vale of York CCG	Chief Clinical Officer
Vale of York CCG	Prescribing
York CVS, VCSE Member of the York Health and Wellbeing Board	
Not stated	

Overall service quality

Of the seven organisations that answered the question about service quality, five said it was good and two adequate.

Availability of services

Comments were received from five organisations. Positive comments were made about opening hours and/or the range of pharmacies, but concern was raised by one CCG about:

- Typically limited opening hours particularly with the future intentions to extend GP practice hours.
- Underuse of pharmacies, particularly in rural areas, to reduce the need for GP (including out of hours) and A&E attendance.
- Concern that if a CCG looks to commission a service the CCG may not find the process very easy.
- East Ayton Parish commented about patients wanting to be able to use their GP dispensary.

Quality of services

Three organisations commented. Generally comments were positive although there were some concerns about variability.

- There have been no issues raised with the CCG over quality.
- Less negative feedback on the additional services commissioned nationally. Still not seen evidence that this investment of NHS resources is producing the potential benefits. While the principle is good, the standard of service is variable with anecdotal evidence that some pharmacies take easy pickings for their income while others give high quality interventional service in medication reviews and new drugs.
- Variable but in general good or better.

Aspects that could be improved

Four responses were received to this question, providing the following comments:

- Closer integration with Primary/Community care to deliver specific health projects.
- At present pharmacies provide little in the way of expanded primary care role particularly around minor ailments.
- Removal of the 1.6km rule would enable the patients to have their prescriptions dispensed in the GP practice.
- Access hours.
- Effective working amongst local NHS dispensing contractors to greatest benefit of patients, e.g. opening hours, check if another pharmacy has an item in stock if they don't.
 - Telephone advice used more often.
 - Reducing need to attend A&E or Out-of-Hours (OOHs) for some conditions – collectively working to promote the services rather than passive.
 - Improved communication channels between pharmacies and primary care.

Problems accessing services

Six people commented including three saying they were unaware of any problems.

- 78% of patients now choose to take their prescriptions to other pharmacies as a boycott of the local pharmacy because patient choice was removed.
- We have looked recently at availability of End-of-Life medications; this project has identified areas that will stock more of these medications in the future and link with existing systems to signpost patients and GPs to the correct pharmacy.
- Hours of opening and specific days:
 - More especially for less common items, including palliative care treatments at weekends.
 - All the above at longer public holidays like Christmas and especially Easter.

Services

Table 26 Desired services - Strategic stakeholder

	Prescription collection service from your GP surgery	Prescription medicines delivery service from pharmacy to home	Repeat prescription service at pharmacy	Stop Smoking Support Service	Chlamydia screening service	Healthy eating and living advice service	Medicines use review service	Emergency contraception	Minor conditions advice, for example, sore throat, hay fever, thrush	Health checks, for example, blood pressure checks	Weight management / dietary	Information on health and social services	Vaccinations	Substance misuse services
Very desirable	3	2	1	2	2	5	5	5	4	4	3	4	2	3
Desirable	3	4	4	4	4	1	1	1	2	2	2	2	2	3
Not necessary			1								1		2	
Not answered	2	2	2	2	2	2	2	2	2	2	2	2	2	2

There was one additional comment stating that patient had expressed preference for a 'one-stop-shop' at their GP practice.

Other services that could be provided by pharmacies

Six comments were made about services that could be provided by pharmacies.

- Nursing home reviews.
- It is essential that local pharmacies are involved in community developments that support people to manage their conditions effectively and help with early intervention and prevention.
- Referral to VCSE (voluntary, community and social enterprise) services.
- There is a need to increase access to primary care minor ailment assessment and treatment. GP services focus will need to focus on the increasing population with complex long-term conditions and the frail elderly. To help cope with this realignment there needs to be a service to respond to those with perceived urgent need (*who have*) more minor self-limiting illnesses.
- We are currently scoping a review of community pharmacy services. Areas for future consideration will include:
 - Medicines optimisation.
 - Pain management.
 - Inhaler use.
 - Weight management and dietary advice.
 - Alcohol awareness and counselling.
 - Vaccination and Immunisation.
 - Direct referral to hospital and secondary care.
 - 'Making every contact count' projects.
 - Engagement with schools and workplaces.
- Support to most vulnerable 'independent' patients or their sole carers following discharge to help ensure the patient/carer's use of their medication is fully informed, old medication removed and advice, support and checks applied to ensure they know how to take their medication.

Additional Comments

Three additional comments were made:

- The investment in the primary care side of pharmacy services has lagged behind other areas.
- Our concern is our GP practice has a dispensary and it continues to be a viable service open to all residents and that it can continue to provide good access and a range of services to local people as was the case before 2005.
- Believe that pharmacy continues to offer great potential but continues to fall short of that due to lack of national promotion. Any promotion of services should be national or regional and generic to highlight what more pharmacy could do, but all too often it looks to be left to individual corporate bodies and political statements.

9.0 Matters considered in making this assessment

9.1 District Housing Development Plans

The following information has been provided by North Yorkshire district councils based on their latest local plans or, for Ryedale, current approved plans.

9.1.1 Craven

The Craven local plan strategy, which went out for consultation in summer 2014, concentrates housing growth in the three market towns of Bentham, Settle and Skipton. Over the next 15 years it is proposed that 200 houses will be built in Bentham, 211 in Settle and circa 800 in Skipton. Proposed housing growth is much lower at the other largest settlements of Glusburn/Cross Hills and Sutton-in-Craven close to the West Yorkshire boundary.

9.1.2 Hambleton

It is envisaged in Hambleton's Local Development Framework that around 2,700 dwellings will be completed by 2019, although these figures could be revised upward with significant developments at Sowerby Gateway, Thirsk and North Northallerton. Easingwold and Bedale will also have a few hundred extra houses.

9.1.3 Harrogate Borough

Harrogate Borough is unable to provide detailed information on anticipated population growth and location of major new housing developments at this point in time. Harrogate's Core Strategy includes planning for 390 new homes per year up to 2024. However, it is now likely that the growth figure will be higher than this; current evidence in the form of the Strategic Housing Market Assessment indicates a figure of 800-1,000 new homes per year. Work has been started to update this latest assessment and consultation on options for growth will take place during 2015.

9.1.4 Richmondshire

The Richmondshire Local Plan Core Strategy anticipates approximately 1,168 homes will be completed by 2019 in the following areas:

Table 27 Richmondshire housing plans till 2019

Central Richmondshire Sub-Area	
Catterick Garrison	630
Richmond	91
Brompton on Swale, Scorton, Catterick Village	141
Lower Wensleydale Sub-Area	
Leyburn	160
Middleham	35
North Richmondshire Sub-Area	
Barton, Melsonby, Middleton Tyas	83
Aldbrough, Caldwell, Eppleby, Dalton, Newsham, Ravensworth, Gilling West, North Cowton	28

9.1.5 Ryedale

Within the Ryedale District plans have been approved (as of June 2014) for the following major housing developments:

Malton:	263 (plus a final approval awaited for a further 83 and an application for 500 being considered)
Norton:	286
Kirkbymoorside:	239
Pickering:	141

9.1.6 Scarborough

Scarborough Borough Council is in the midst of bringing forward its replacement Local Plan up to the period 2030. This will see the Borough planning for growth in housing with a requirement (if adopted) of between 415 and 485 dwellings per annum.

The current draft proposes the majority of housing will be in the Scarborough Urban Area with the following split:

Table 28 Scarborough Borough Housing plans to 2030

North Scarborough (Scalby and Newby)	
Approximately 1,000 dwellings plus 500 already approved at High Mill Farm, Scalby	
South Scarborough	
In addition to Middle Deepdale (Eastfield) development which has consent for 1350 dwellings there are potential sites for a further 1200 north of this site and 2500 to the south of Cayton	
Whitby	
Sites for a further approximately 700 in addition to those that already have consent, giving a total of circa 1,000 dwellings	
Filey and Hunmanby	
A smaller allocation of around 150 for each settlement, not including the Muston Road development currently under construction in Filey	
There also draft plans for additional houses as follows:	
Burniston	150
East and West Ayton	120
Sleights	15
Seamer	40

In addition to housing there are two proposals for doctor's surgeries. One in Newby/Scalby and land is to be retained for a possible expansion of the Filey surgery.

9.1.7 Selby

Selby district has proposals for 6,250 new dwellings (March 2014 – 2027). The largest numbers are 3,360 in Selby town, 710 in Sherburn in Elmet and 500 in Tadcaster

10.0 Commissioning Intentions

The following is based on information provided by Clinical Commissioning Groups on any plans that might impact on the level of need for pharmaceutical services in their area.

10.1 Airedale Wharfedale and Craven

The Airedale Wharfedale and Craven CCG is commissioning a minor ailment scheme called Pharmacy First from pharmacies in the Craven area. This scheme allows patients to be treated for a specific list of minor ailments at NHS expense through the pharmacy rather than the GP.

10.2 Hambleton Richmondshire and Whitby

No information supplied.

10.3 Harrogate and Rural

No specific plans identified that could lead to any change in services provided by pharmacies.

10.4 Scarborough and Ryedale

Changes to legislation (Dec 2013) enables emergency supplies of repeat medications to be provided as an Enhanced Service and avoids the need to do PGD.

Currently visitors to the area who have forgotten or lost their medications are only able to obtain NHS prescriptions from:

- a) Primary care surgeries
- b) GP walk-in facility,
- c) A&E.

Community pharmacists can dispense most repeat items in the above circumstances if repeat prescription details are available or pharmacist has professionally assessed level of information, however the patient has to pay for the drugs (private prescription) so the majority of patients are signposted to GPs, walk-in, or A&E.

The proposal is to develop an Enhanced Service through co-commissioning with NHS Area Team for Emergency supplies of repeat medications Enhanced Service.

A new urgent care service, based at Scarborough Hospital, is planned to commence in April 2015 and the minor injuries service at Malton Hospital will also be replaced by an urgent care service.

10.5 Vale of York

The following planned Anticoagulation service proposals may have impact on pharmaceutical services:

- To commission near patient testing to be based in the Community/Pharmacists/GP Practices.
- Provide more care and treatment in primary care and the community.
- Early diagnosis, management and treatment initiation.

It is uncertain at present whether the following will also impact on pharmaceutical services:

Gluten-free foods

Historically, coeliac disease patients were entitled to receive a set amount of gluten free foods on prescription to help manage their condition, but changes in budgetary cuts have led to significant changes in prescription provision. This is currently being reviewed.

Medicines Management Facilitator

The medicines management facilitator role within a GP practice is administrative with designated responsibility for repeat prescribing and ordering, supported by the Medicines Management team. This is currently being reviewed.

Respiratory formulary

Review of formulary, pathways and protocols, education, associated disease conditions and home oxygen. This work is currently on-going.

Sip Feeds

Review of current provision and spend, against quality of services and products. This is currently being reviewed.

Stoma Care

Nationally the level of prescribing and spending for incontinence and stoma appliances is increasing. Some of the issues that can result from a lack of clinical review are inappropriate product choice, over-prescribing, poor patient experience and potentially compromised patient safety. This is currently being reviewed.

Thickeners

There is an on-going review of the use of adequate thickener or ready-to-use pre-thickened food and drink products versus the provision of good nutrition and hydration.

10.6 North Yorkshire County Council Public Health

The Director of Public Health, on behalf of NYCC and with the support of the specialist public health team, is responsible for providing leadership across all partners in the County for topics which have a focus on the two overarching indicators for Public Health in North Yorkshire:

- Increase healthy life expectancy.
- Reducing differences in life expectancy and healthy life expectancy between communities.

Since April 2013 NYCC has been responsible for commissioning, through the public health ring fenced grant, public health services in North Yorkshire. This includes over 25 mandatory or locally selected services.

NYCC have recently finished engagement on a Tobacco Control Strategy which is now under public consultation. Within the Tobacco Control Strategy are details on the future commissioning intentions for stop smoking services.

Alcohol-related hospital admissions are increasing year on year, and nearly 200 people die in North Yorkshire every year as a result of alcohol. It is associated with crime, including domestic violence and sexual crime, and features in antisocial behaviour in particular with over a quarter of incidents associated with alcohol in some areas. It costs society through public services responding to the impacts, as well as on businesses affected by absenteeism and lost productivity. It impacts unfairly on children and families of people who are dependent on alcohol.

NYCC have consulted on an Alcohol Strategy (2014-18) for the County. A recommendation within the strategy is to commission Identification and Brief Advice in primary care settings. The service will provide screening for adults (using the AUDIT-C or FAST tools) followed by information or further screening (using the full AUDIT) and advice or referral to specialist services; depending on their drinking level.

11.0 County and district summary of need

Community pharmacy provides the following opportunities for the local health and care economy:

- Availability
 - Community pharmacies are located at the centre of communities; they are on the high street or in the local shopping centre and pharmacies are well used – on average around 14 times a year per person (11 times for health reasons),
 - The services are open access for advice. NHS England found 12% of respondents to their survey use pharmacies for health advice with only 1% using a pharmacy for urgent advice. Groups most likely to use a pharmacy for health advice are women and those aged 25-44,
 - Services are usually provided at hours convenient to the local population with good coverage on evenings and weekends.
- Quality
 - Pharmacies and pharmacy technicians are registered with the General Pharmaceutical Council,
 - Pharmacists are a highly trained and regulated workforce,
 - Pharmacies are networked with GPs and other primary care services,
 - Pharmacies work within an evidence-base that continues to grow in quantity and quality.
- Prevention
 - Pharmacies interact on a regular basis with large proportions of the population
 - They provide an expert conduit for information and advice particularly with regards to healthy lifestyles, self-care, and access to other services.
- Managing long-term conditions
 - Pharmacies provide services to promote self-care, manage medicines, support discharge from hospital,
 - Between 5% and 8% of unplanned emergency admissions in adults are due to avoidable issues related to medicines and between 30% and 50% of patients do not take their medicines as the prescriber intended.
- Supporting independence
 - Pharmacies could provide a conduit for information on care services e.g. telecare, paying for care,
 - Pharmacies can signpost to other services, such as Prevention Officers and other community activities,
 - Most pharmacies provide home delivery services for those who find access and transport difficult,
 - Pharmacies can provide support into settings such as Care Homes and Extracare Housing schemes.

Although Dispensing practices also offer:

- High quality dispensing for eligible patients,
- Allowing eligible patients to access all the benefits of a standard general practice with the added convenience of being able to access dispensing of prescriptions,
- Providing access to drugs and devices in areas where a standard community pharmacy would not be viable.

Overall in North Yorkshire

In summary, data from the JSNA, Director of Public Health Annual Report and NHS, Social Care and Public Health Profiles point towards the following as issues for North Yorkshire:

- The geography is large with only small centres of population which can cause issues with travel and access.
- The population is already, on average, older than the English population.
- The population is ageing at a quicker pace to that of England.
- Although, on average, the NY population is relatively affluent there are significant populations of deprivation, largely clustered in Scarborough and Whitby with smaller pockets in Selby, Harrogate and Skipton. In sheer number terms, the size of the deprived population (relative to England) in Scarborough is similar to that of Harrogate due to Harrogate having a greater population density.
- North Yorkshire has issues with smoking, obesity and alcohol use particularly linked to deprivation. These pockets also related to illness in the population.
- With an ageing population comes increasing numbers of people with one or more long-term conditions, and increasing numbers of people who are frail. Both of these issues lead to increased service usage, reduced quality of life and early mortality.
- Mental health problems are significantly associated with long-term conditions and multiple morbidities and they are a cause and consequence of episodes of ill health.
- Cancers and cardiovascular diseases are the main drivers of early death.
- The top 10% most deprived areas account for 25% of all potential years of life lost due to pneumonia.
- Emergency admissions in North Yorkshire continue to rise over time. Emergency admissions for acute conditions that should not usually require a hospital admission in particular are on the rise. The main drivers of these admissions are urinary tract infections (25%), gastroenteritis (19%) and influenza/pneumonia (18%).

The system of care locally must adjust to meet the challenges presented by an increasingly ageing, and therefore frailer, population. The system must also recognise the importance of deprivation and related common needs presented by mental health problems.

Public views

Generally, respondents to the public questionnaire tend to access pharmaceutical services close to home (37%), close to their GP (18%) or at their GP (15%). When asked where they would prefer to attend, respondents said close to their home (31%), at their GP (28%) or close to their GP (15%).

Most people (58%) said they normally visited a pharmacy on weekdays between 9am and 6pm or at no particular time (28%). Most people would also prefer to visit on weekdays between 9am and 6pm (40%) or at no particular time (32%). Positively, respondents said they could generally find a pharmacy open when needed (83% always or usually). However only 37% people said they could find a pharmacy open after 6pm on weekdays and only 31% open on Sundays.

Overall 56% of people rated availability of pharmacy services in their area to be good or very good and 26% adequate. However 10% rated availability as very poor.

Fifty questionnaires contained between them 60 identifiable comments about problems when using their usual pharmacy. The most frequently mentioned problem (26 times) was medicines not being in stock, followed by delays waiting for medicines to be dispensed either in the pharmacy or waiting for repeat prescription requests to be processed.

Future need

In general demographic change in the County will continue to place a burden on public sector service provision as the population continues to age. Compared to other upper tier local authorities, North Yorkshire had a 2% higher proportion of people aged over 65 in 2013; a gap that will widen to 4% by 2037. The corresponding 2% increase is the equivalent of an additional 13,000 people aged over 65.

However, this change will be gradual and unlikely to put an immediate (before 2018) pressure on the delivery of pharmaceutical services. Likewise, responses from district and borough councils with regards to future housing developments do not highlight any significant changes which current necessary services couldn't meet.

The challenge for North Yorkshire appears to be less about the pressure on the availability of access to pharmaceutical services, but more about how primary care can be utilised to reduce pressure on hospital and social care services, improve access to care and keep people safe and independent at home.

Local aspirations for health and social care transformation, articulated in the North Yorkshire BCF plan, mean that over the next five years health and social care services will be reorienting service models to be structured around communities with the aim of providing care and support closer to home. This provides community pharmacy and primary care with an opportunity to enhance their role as community delivery agents. Community pharmacy provides some real potential to support North Yorkshire Health and Wellbeing Board's vision for North Yorkshire and the aspirations laid down in the Better Care Fund submission.

The collective vision for the health and social care economy is for:

Care centred on the needs of the individual and their carers, empowering people to take control of their health and independence

The Better Care Fund plan describes how shared investment between health, social care and district and borough councils will:

- Improve self-help and independence for North Yorkshire people;
- Invest in Primary Care and Community Services;
- Create a sustainable system by protecting Adult Social Care and by working with Secondary Care to secure the hospital, mental health and community services needed in North Yorkshire.

This means that in five years' time, as a result of the Better Care Fund and broader investment and service transformation, North Yorkshire people will benefit from:

- An integrated, locality driven Prevention Service which supports them and their carers to improve their lifestyle, improve health, reduce social isolation and use digital and personal-contact channels to obtain advice and information on how they can manage their situation
- A 24/7 fast response to assess their needs and wherever possible avoid a hospital admission should they become ill, and an integrated team approach to helping them get home again if they do go to hospital
- A joined up service to prevent and manage falls
- Support for people and families living with dementia
- Improved access to psychological therapies, fast response services and in-reach community services for people with mental health needs

-
- Specialist support from community staff, good liaison between care staff and health staff, care at home for people living in a care home if they become ill
 - Support by a multi-disciplinary team for people with complex needs who know them well. They will have a named care coordinator and will be supported to avoid the need to go to or stay in hospital, to manage their conditions and to maintain social activity and contacts

In addition to this, there is a growing emphasis on providing comprehensive seven day, extended hours primary care and community services. Locally the details of how this vision will be enacted have not been developed, however it is a development that may come in the next five years and pharmaceutical services will need to respond to maintain or improve access to services.

Current provision

Most people visit a pharmacy close to where they live and the most common reasons for a pharmacy visit are to get medication prescribed by a doctor followed by over the counter medication. Current provision of dispensing in North Yorkshire is comprehensive with 97% of the population living within a 10 minute drive of either a community pharmacy or dispensing practice. This increased to 99% of the population when a 20 minute drive time is considered. This compares well with information from NHSE which estimates that 99% of the England population are within 20 minutes travel time of a community pharmacy with 96% walking or by public transport. As described in section 7.4 of this report, the majority of the English population can access a community pharmacy within a 20 minute walk and access is greater in areas of high deprivation.

This level of access is enhanced further with most pharmacies offering a home delivery service for patients, particularly those who are more vulnerable.

Another element of improve access and choice is the growth in distance (including internet) pharmacy provision. Distance selling pharmacies may provide advanced and enhanced services and they're required to do so to anyone in England who requests the service, regardless of the physical location of the service.

Distance selling pharmacies do have the limitation of the speed of response and the ability to dispatch items urgently. They are also limited by accessibility by individuals who are not IT literate or who do not have access to the internet.

11.1 By district

11.1.1 Craven

Current Need	Future Need
<p>Population</p> <p>Craven largely has a population structure in line with the North Yorkshire average. Craven has a smaller proportion of people aged 20-39 when compared to England, and is over represented in the 45+ age groups. Craven has a particularly high proportion of women aged 85+ (7% of women) when compared with England (3% of women).</p> <p>Illness and disability</p> <p>Craven has a significantly higher prevalence of chronic kidney disease (5.7%) than in the rest of England (4.3%). Craven district also has a high prevalence of coronary heart disease (4.3%) and stroke (2.4%) compared to the national average (3.3% and 1.7% respectively). It also has the highest prevalence of hypertension in the County.</p> <p>Risks to health</p> <p>Craven has an adult smoking prevalence of 11.3% which is significantly lower than the England average. Although this is a relatively low percentage it still equates to 5,000 people.</p> <p>Wider determinants</p> <p>Craven is a relatively prosperous district ranking 241 out of England's 326 local authorities for deprivation. However there are two Lower Super Output Areas within the Skipton South ward that are ranked within the 20% most deprived in England.</p> <p>Services</p> <p>Pharmacies: 13 Dispensing GP surgeries: 4 Out of hours service: GP Surgeries: 6 Hospitals: Main hospitals are the Airedale General at Steeton near Keighley and Harrogate Hospital (both outside of the district).</p>	<p>Population</p> <p>The North Yorkshire population is continuing to age. By 2020 in Craven the number of over 65 year olds will have increased from 14,300 to 16100, and the number of over 85 year olds will have increased from 2,100 to 2,500.</p> <p>Plans</p> <p>AWC CCG is commissioning a minor ailment scheme called Pharmacy First from pharmacies in the Craven area. This scheme allows patients to be treated for a specific list of minor ailments at NHS expense through the pharmacy rather than the GP.</p> <p>NYCC intends to commission Identification and Brief Advice services for alcohol in primary care settings, starting in 2015.</p>

Community services are provided from sites including Skipton and Castleberg (Settle) hospitals.	
Provision	
Craven is served by 13 pharmacies and 4 dispensing practices giving a rate of 30.7 dispensing outlets per 100,000 population. This equates to, on average, 3,259 people per dispensing outlet. The rate of dispensing premises per head of population is slightly higher than the North Yorkshire average of 29.9.	
The provision of community pharmacy services per 100,000 population is 23.5, which is higher than the North Yorkshire average of 17.7 and the second highest in the County.	
Craven has the highest ratio of pharmacies to GP dispensaries at 3.3 meaning that the population is less reliant on dispensing practices than other parts on North Yorkshire.	
The range of opening hours in Craven is 8am to 11pm Monday to Saturday. On Sunday the range is 10am to 8pm provided between two pharmacies.	
Unmet Need – Current Gaps	Unmet Need – Future Gaps
This assessment deems there to be no gaps in necessary provision.	At the time of writing, this assessment deems there to be no gaps in necessary provision to meet future need (up to April 2018).
Areas for Improvement or Better Access	
This assessment deems there to be no areas for improvement or better access.	

11.1.2 Hambleton

Current Need	Future Need
<p>Population Hambleton largely has a population structure in line with the North Yorkshire average. Hambleton has a lower than average proportion of the population within all five year age bands up to the age of 45 years compared to the whole of England.</p> <p>Illness and disability Hambleton has the highest prevalence of cancer in the County (2.8%) which exceeds the national average (1.9%) by a significant margin.</p> <p>Risks to health Hambleton has a higher rate of fuel poverty (21.8%) compared to the rest of England</p>	<p>Population The North Yorkshire population is continuing to age. By 2020 in Hambleton the number of over 65 year olds will have increased from 21,500 to 24600, and the number of over 85 year olds will have increased from 2,700 to 3,600.</p> <p>Plans NYCC intends to commission Identification and Brief Advice services for alcohol in primary care settings, starting in 2015.</p>

(18.4%). Modelled estimates of adults who are at increasing risk and higher risk drinking were higher in Hambleton (30.0%) than the North Yorkshire average (25.7%).

Wider determinants

Hambleton is a relatively prosperous district ranking 265 out of England’s 326 local authorities for deprivation. It has no Lower Super Output Areas ranked within the 20% most deprived in England. Northallerton North ward has a significantly higher rate of teenage pregnancy than the national average.

Services

Pharmacies: 13
 Dispensing GP surgeries: 9
 Out of hours service:
 GP Surgeries: 11
 Hospitals: The James Cook Hospital in Middlesbrough and the Friarage Hospital in Northallerton, providing district general hospital services for the local population

Provision

Hambleton is served by 13 pharmacies and 9 dispensing practices giving a rate of 24.7 dispensing outlets per 100,000 population. This equates to, on average, 4,052 people per dispensing outlet. The rate of dispensing premises per head of population is lower than the North Yorkshire average of 29.9 and second lowest in the County.

The provision of community pharmacy services per 100,000 population is 14.6, which is lower than the North Yorkshire average of 17.7 and the second lowest in the County.

Hambleton has a ratio of pharmacies to GP dispensaries of 1.4 meaning that the population has access to dispensing services through dispensing practices broadly similar to that of the North Yorkshire average.

The range of opening hours in Hambleton is 6.30am to 10.30pm Monday to Friday, and 6.30am to 10pm on Saturday. On Sunday the range is 10am to 4pm provided across three pharmacies.

Unmet Need – Current Gaps

This assessment deems there to be no gaps in necessary provision.

Unmet Need – Future Gaps

This assessment deems there to be no gaps in necessary provision to meet future need (up to April 2018).

Areas for Improvement or Better Access

Although there is large-scale housing development proposed in the Hambleton area, the sites of development are already within close proximity to existing services. Therefore, this assessment deems there to be adequate provision and access to existing pharmaceutical services.

11.1.3 Harrogate

Current Need	Future Need
<p>Population</p> <p>In absolute terms, Harrogate district has the largest population in North Yorkshire at 157,500. Harrogate has a higher than average proportion of 40+ adults when compared with England.</p> <p>Harrogate is North Yorkshire's most ethnically diverse district with 7.8% reporting an ethnic group other than White British.</p> <p>Illness and disability</p> <p>Harrogate has significantly higher recorded learning disability prevalence when compared with the national and North Yorkshire averages. It also has the highest prevalence of both depression and dementia in the County, which is also greater than the English average.</p> <p>Risks to health</p> <p>Children's participation in sport and physical activity in Harrogate is significantly lower than the national average.</p> <p>Wider determinants</p> <p>Harrogate is the least deprived district in North Yorkshire and ranks 283 out of England's 326 local authorities. More than 50% of the CCG's registered population are in the two least deprived quintiles in the County. However, there are pockets of deprivation and 7.1% of residents live in the most deprived quintile in North Yorkshire. There is one Lower Super Output Area within the ward of Woodfield which is ranked as within the 20% most deprived in England.</p> <p>Services</p> <p>Pharmacies: 26 Dispensing GP surgeries:20 Out of hours service: GP Surgeries: 19 Hospitals: Harrogate District Hospital (396 beds)</p>	<p>Population</p> <p>The North Yorkshire population is continuing to age. By 2020 in Harrogate the number of over 65 year olds will have increased from 34,500 to 39,000, and the number of over 85 year olds will have increased from 5,200 to 6,400.</p> <p>Plans</p> <p>NYCC intends to commission Identification and Brief Advice services for alcohol in primary care settings, starting in 2015.</p>

Provision

Harrogate has the largest number of dispensing outlets in North Yorkshire at 46. Harrogate is served by 26 pharmacies and 20 dispensing practices giving a rate of 29.1 dispensing outlets per 100,000 population. This equates to, on average, 3,432 people per dispensing outlet. The rate of dispensing premises per head of population is broadly similar to the North Yorkshire average of 29.9.

The provision of community pharmacy services per 100,000 population 16.5, which is slightly lower than the North Yorkshire average of 17.7 meaning that there are 6,072 people per pharmacy in Harrogate.

Harrogate has a ratio of pharmacies to GP dispensaries of 1.3 meaning that the population has access to dispensing services through dispensing practices broadly similar to that of the North Yorkshire average. Harrogate has the largest number of dispensing practices in North Yorkshire at 20; five more than Scarborough and double the number in each of the other districts.

The range of opening hours in Harrogate is 6.30am to midnight Monday to Friday, and 8am to 11pm on Saturday. On Sunday the range is 9.30am to 6pm provided across six pharmacies.

Unmet Need – Current Gaps

This assessment deems there to be no gaps in necessary provision.

Unmet Need – Future Gaps

This assessment deems there to be no gaps in necessary provision to meet future need (up to April 2018).

Areas for Improvement or Better Access

This assessment deems there to be no areas for improvement or better access.

11.1.4 Richmondshire

Current Need

Population

The Richmondshire population follows the national profile for over 55s. However it is under represented, particularly for males, from 30-54. There is a large over representation of males age 15-30 as this relates to the large military presence at Catterick Garrison.

Illness and disability

Richmondshire has a significantly higher rate of hip fracture in the population aged 65 due to falls (593.6 per 100,000 population) compared to the rest of the nation.

Risks to health

The district has the largest forecast increase in the prevalence of dementia within North Yorkshire. Richmondshire also has the highest number of homelessness acceptances (4.25 per

Future Need

Population

The North Yorkshire population is continuing to age. By 2021 in Richmondshire the number of over 65 year olds will have increased from 10,400 to 11,700, and the number of over 85 year olds will have increased from 1,200 to 1,500.

Plans

NYCC intends to commission Identification and Brief Advice services for alcohol in primary care settings, starting in 2015.

1,000 households) in the County.

Wider determinants

Compared to the other districts in North Yorkshire, Richmondshire is the third least deprived district and is a prosperous district relative to the national average. It ranks as the 261 least deprived out of England's 326 local authorities.

Services

Pharmacies: 8

Dispensing GP surgeries: 8

Out of hours service:

GP Surgeries: 9

Hospitals: The James Cook Hospital in Middlesbrough and the Friarage Hospital in Northallerton, providing district general hospital services for the local population

Provision

Richmondshire has the second smallest population in North Yorkshire and is served by the smallest number of dispensing outlets. Richmondshire is served by eight pharmacies and eight dispensing practices giving a rate of 30.8 dispensing outlets per 100,000 population. This equates to, on average, 3,248 people per dispensing outlet. The rate of dispensing premises per head of population is broadly similar to the North Yorkshire average of 29.9.

The provision of community pharmacy services per 100,000 population is 15.4, which is slightly lower than the North Yorkshire average of 17.7 meaning that there are 6,496 people per pharmacy in Richmondshire.

Richmondshire has a ratio of pharmacies to GP dispensaries of one meaning that the population accesses dispensing services through an equal number of community pharmacies and dispensing practices. This fact is supported by evidence that more prescription items are dispensed by GPs in the Hambleton, Richmond and Whitby CCG area than any other CCG (35.6% compared to 22.2% for North Yorkshire). This illustrates that Richmondshire is more reliant on GP dispensing services than other areas of North Yorkshire.

The range of opening hours in Richmondshire is 6.30am to 10.30pm Monday to Friday, and 6.30am to 10pm on Saturday. On Sunday the range is 10am to 4pm provided across two pharmacies.

Unmet Need – Current Gaps

This assessment deems there to be no gaps in necessary provision.

Unmet Need – Future Gaps

This assessment deems there to be no gaps in necessary provision to meet future need (up to April 2018).

Areas for Improvement or Better Access

As Richmondshire is reliant on GP dispensing services it means that although access to dispensing services is adequate it does mean that access to the full range of “essential services” and any enhanced services may not be as good as other parts of North Yorkshire.

11.1.5 Ryedale

Current Need	Future Need
<p>Population Ryedale has a large over representation in the 45+ population, mirroring the North Yorkshire pattern. It is a rural district with the lowest population density in the County (36 people per km²), and has no major towns or settlements with populations over 15,000.</p> <p>Illness and disability Ryedale has a significantly higher prevalence of chronic kidney disease. Ryedale is the only district to have significantly lower recorded prevalence of dementia when compared with England.</p> <p>Risks to health For Year 6 children, Ryedale had the second highest prevalence of obesity in the County (17.7%). It also has a much higher rate of households in fuel poverty (28.2%) compared to the rest of England (18.4%).</p> <p>Wider determinants Ryedale is the second most deprived district in North Yorkshire and the majority of the population live in the top two most deprived quintiles within North Yorkshire.</p> <p>Services Pharmacies: 8 Dispensing GP surgeries: 9 Out of hours service: GP Surgeries: 7 Hospitals: Main sites are Scarborough, Malton Whitby, York and Bridlington</p>	<p>Population The North Yorkshire population is continuing to age. By 2020 in Ryedale the number of over 65 year olds will have increased from 13,400 to 14,700, and the number of over 85 year olds will have increased from 600 to 700.</p> <p>Plan NYCC intends to commission Identification and Brief Advice services for alcohol in primary care settings, starting in 2015.</p>
<p>Provision</p>	
<p>Ryedale is served by eight pharmacies and nine dispensing practices giving a rate of 32.8 dispensing outlets per 100,000 population. The rate of dispensing premises per head of population is higher than the North Yorkshire average of 29.9.</p>	

The provision of community pharmacy services per 100,000 population is 15.5, which is slightly lower than the North Yorkshire average of 17.7 meaning that there are 6,469 people per pharmacy in Ryedale.

Ryedale has the lowest ratio of pharmacies to GP dispensaries in North Yorkshire at 0.9. This means that the population accesses dispensing services through a broadly equal number of community pharmacies and dispensing practices. Twenty per cent of prescription items are dispensed by GPs in the Scarborough and Ryedale CCG, however this percentage is likely to mask significant variation between residents of Ryedale and residents of Scarborough. It is likely that Ryedale residents are more reliant on GP dispensing services than other areas of North Yorkshire.

The range of community pharmacy opening hours in Ryedale are 8.30am to 6:30pm Monday to Friday, and 8.30am to 5.30pm on Saturday. On Sunday there is one pharmacy that is open 11am to 12pm via scheduled additional hours. The nearest longer opening pharmacies to Malton and Norton (the largest population densities in Ryedale) are Scarborough.

Unmet Need – Current Gaps	Unmet Need – Future Gaps
This assessment deems there to be no gaps in necessary provision.	This assessment deems there to be no gaps in necessary provision to meet future need (up to April 2018).

Areas for Improvement or Better Access
 Access to pharmaceutical services on week day evenings, Saturday evenings and Sundays could be improved for Ryedale residents. This would also provide improved access to respond to planned housing developments, outlined above.

11.1.6 Scarborough

Current Need	Future Need
<p>Population Scarborough has a particular over representation of 50-69 year old males, and a general over representation of older men.</p> <p>Illness and disability Scarborough has significantly higher recorded learning disability prevalence when compared with the national and North Yorkshire averages. Scarborough has the highest prevalence in the County of depression, heart failure, coronary heart disease and asthma, with rates all exceeding the national average.</p> <p>Risks to health Scarborough has a higher smoking prevalence than England and the North Yorkshire Average. In 2012 around 22.8% of the over 18 population were smokers. However this figure is not</p>	<p>Population The North Yorkshire population is continuing to age. By 2020 in Scarborough the number of over 65 year olds will have increased from 27,600 to 30,200, and the number of over 85 year olds will have increased from 3,700 to 4,400.</p> <p>Plans NYCC intends to commission Identification and Brief Advice services for alcohol in primary care settings, starting in 2015.</p>

significantly worse than the England average. Scarborough has a high prevalence of obesity in Reception aged children (8.0%). The district also has the highest incidence of overcrowded housing in the County (4.95%), substantially higher than any other North Yorkshire district.

Wider determinants

Scarborough is the most deprived district in North Yorkshire and is the 83rd most deprived local authority when compared to England's 326. There are 14 Lower Super Output Areas that are ranked within the 20% most deprived in England. The CCG has over half its population living within the most deprived areas of North Yorkshire (most deprived quintile).

Scarborough District has the highest and Ryedale District the lowest crime levels in North Yorkshire.

Scarborough has almost double the percentage of children in poverty than the rest of North Yorkshire (21%).

Services

Pharmacies: 26

Dispensing GP surgeries: 15

Out of hours service:

GP Surgeries: 19

Hospitals: Main sites are Scarborough, Malton, Whitby, York and Bridlington.

A new urgent care service, based at Scarborough hospital, is scheduled to start during April 2015.

Provision

Scarborough has the second largest number of dispensing outlets in North Yorkshire with 26 pharmacies and 15 dispensing practices giving a rate of 37.7 dispensing outlets per 100,000 population. The rate of dispensing premises per head of population is the highest in North Yorkshire.

The provision of community pharmacy services per 100,000 population is 23.9, which again is the highest in North Yorkshire, meaning that there are 4,184 people per pharmacy in Scarborough.

Scarborough relies less on GP dispensing practices than the North Yorkshire average with a ratio

of pharmacies to GP dispensaries in North Yorkshire of 1.7. This means that the population accesses dispensing services through a broadly equal number of community pharmacies and dispensing practices. Twenty per cent of prescription items are dispensed by GPs in the Scarborough and Ryedale CCG, however this percentage is likely to mask significant variation between residents of Ryedale and residents of Scarborough. It is likely that Scarborough residents are less reliant on GP dispensing services than other areas of North Yorkshire.

The range of community pharmacy opening hours in Scarborough are 7am to 11pm Monday to Saturday. On Sunday are four pharmacies available providing opening hours that range 10am to 11pm.

Unmet Need – Current Gaps	Unmet Need – Future Gaps
This assessment deems there to be no gaps in necessary provision.	This assessment deems there to be no gaps in necessary provision to meet future need (up to April 2018).

Areas for Improvement or Better Access

The significant housing developments proposed in Scalby could lead to the need for improved or better access to essential services within Scalby in the future.

Current provision is deemed sufficient to meet the developments planned in Eastfield and Cayton. People using the new urgent care service will be expected to use existing pharmacy services they normally use. However out of hours, the urgent care unit will be able to supply urgently needed prescription medicines to its patients.

11.1.7 Selby

Current Need	Future Need
<p>Population Selby is overrepresented in the 50+ population when compared to England. This is particularly the case with females.</p> <p>Selby has the highest number of people classifying themselves as a white Gypsy or Irish Traveller. However as a proportion of the total population the ethnic group is very small at less than 0.2% of the population.</p> <p>Illness and disability Selby has the highest prevalence of diabetes in North Yorkshire. The rate of obesity is also significantly higher than the national average (27.8% to 24.2%).</p> <p>Risks to health Selby has a lower than England and North Yorkshire average prevalence of smoking (15.6%). However this is not statistically</p>	<p>Population The North Yorkshire population is continuing to age. By 2020 in Selby the number of over 65 year olds will have increased from 16,000 to 19,100, and the number of over 85 year olds will have increased from 1,900 to 2,500.</p> <p>Plans NYCC intends to commission Identification and Brief Advice services for alcohol in primary care settings, starting in 2015.</p>

significant. When examining the profile of smokers, Selby has 32.2% of people smoking from routine and manual backgrounds.

Wider determinants

Selby is the third most deprived district in the County, although is relatively prosperous compared to the national average, ranking 241 least deprived out of 326 English local authorities.

Services

Pharmacies: 12
 Dispensing GP surgeries: 9
 Out of hours service:
 GP Surgeries: 7
 Hospitals: Main sites Selby and York.

Provision

Selby has dispensing services provided by 12 pharmacies and eight dispensing practices giving a rate of 24 dispensing outlets per 100,000 population. The rate of dispensing premises per head of population is the lowest in North Yorkshire, meaning on average that each outlet serves 4,172 people.

The provision of community pharmacy services per 100,000 population is 14.4, which again is the lowest in North Yorkshire, meaning that there are 6,954 people per pharmacy in Selby. Selby does however have good road and rail access to major cities and towns, including York, Leeds, Wakefield, Pontefract and Goole; all of which have pharmacy provision.

Selby has the same ratio of pharmacies to GP dispensaries as the North Yorkshire average.

The range of community pharmacy opening hours in Selby are 8.30am to 8pm Monday to Friday, and 8.30am to 5.30pm on Saturday. On Sunday is one pharmacy available providing services 1pm to 2pm via scheduled additional hours.

Unmet Need – Current Gaps	Unmet Need – Future Gaps
This assessment deems there to be no gaps in necessary provision.	This assessment deems there to be no gaps in necessary provision to meet future need (up to April 2018).

Areas for Improvement or Better Access
 Access to pharmaceutical services on Saturday evenings and Sundays could be improved for Selby residents.

12.0 Maintenance and Review of this PNA

12.1 Supplementary statements

The North Yorkshire Health and Wellbeing Board has responsibility for ensuring that this assessment is up to date. This includes the requirement to issue supplementary statements.

What are “supplementary statements”?

Any changes to the availability of pharmaceutical services since the publication of the PNA, that are not so substantial as to justify production of a complete revision of the PNA, will be issued periodically in the form of supplementary statements.

12.2 Maps

There is a requirement that the Health and Wellbeing Board provide a map of premises at which pharmaceutical services are provided, and keep this map up to date without republishing the whole assessment or publish a supplementary statement.

Therefore the maps in this report will be checked and updated every six months, and published on the NY Partnerships website (www.nypartnerships.org.uk/pna).

12.3 PNA Revision

The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 state that Health and Wellbeing Boards will be required to publish a revised assessment:

- Within three years of publication of their first assessment; and
- As soon as reasonably practical after identifying significant changes to the availability of pharmaceutical services since the publication of the PNA unless it is satisfied that making a revised assessment would be a disproportionate response to those changes.

Therefore North Yorkshire Health and Wellbeing Board will need to publish a revised assessment by **1 April 2018** unless the Health and Wellbeing Board becomes aware of significant changes to the availability of pharmaceutical services. Any changes to the availability of pharmaceutical services since the publication of this PNA, that are not so substantial as to cause a revision of the PNA, will be issued periodically in the form of supplementary statements

13.0 Acknowledgements

Many thanks to everyone involved in the development of this needs assessment, in particular:

- The PNA Steering Group.
- The providers and contractors who provided information and data in support of the assessment.
- Members of the public who took time to complete questionnaires and provide us with invaluable information.
- The Public Health Intelligence Team for collating and analysing all the data and intelligence contained within this report.
- NYCC Corporate Information Systems Team, in particular Tim Townsend (Geographical Information Officer) for providing the mapping in this assessment.

Special thanks go to Nick Kemp (from North Yorkshire County Council) who worked tirelessly to co-ordinate and ultimately produce this assessment.

14.0 Appendices

Appendix 1 - Terms of Reference

Terms of Reference

City of York and North Yorkshire Pharmaceutical Needs Assessments Group

The group has been established on behalf of the City of York and the North Yorkshire Health and Wellbeing Boards (HWBs). The overall objective of this group is to inform and support the development of Pharmaceutical Needs Assessments (PNAs) for each of the Health and Wellbeing Board areas, monitor progress of the documents, identify gaps in services and form recommendations for commissioning in the future.

To oversee the production of PNAs on behalf of the two HWB for publication no later than 1 April 2015

To receive reports from the designated leads for the different elements of the PNA

To monitor progress against timescales and provide exception reports to the Health and Wellbeing Boards where problems are encountered

To contribute knowledge and experience to the PNA process regarding current working practices and services

To ensure that national policy is interpreted correctly and acted upon in the preparation of the PNAs

To incorporate views and opinions of other bodies, agencies or the public where appropriate

Membership

NY County Council

City of York Council

NHS England/LPN

Clinical Commissioning Groups (and the Commissioning Support Unit)

Local Medical Committee

Local Pharmaceutical Committee

Healthwatch

The group may co-opt members for specific pieces of work.

Reporting arrangements

The group will report progress and notes of its meetings will be circulated to the City of York HWB and, via its JSNA Editorial Group, to the North Yorkshire HWB.

Arrangements for meetings

The group will meet monthly initially but this will be reviewed as the production of the PNA progresses

Appendix 2 - Community Pharmacies – by District

Pharmacy details, including opening times, were correct according to information held by NHS England in February 2015.

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Craven	Your Local Boots Pharmacy	9 Station Road GRASSINGTON BD23 5LS	Mon: 09:00-13:00; 13:20-18:00 Tue: 09:00-13:00; 13:20-18:00 Wed: 09:00-13:00; 13:20-18:00 Thu: 09:00-13:00; 13:20-18:00 Fri: 09:00-13:00; 13:20-18:00 Sat: 09:00-12:30 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
Craven	The Co-operative Pharmacy	Stafford House Main Street HIGH BENTHAM LA2 7HL	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-12:30; 13:30-18:00 Tue: 09:00-12:30; 13:30-18:00 Wed: 09:00-12:30; 13:30-18:00 Thu: 09:00-12:30; 15:30-18:00 Fri: 09:00-12:30; 13:30-18:00 Sat: 09:30-11:30 Sun:
Craven	Ingleton Pharmacy	Bank View 37 Main Street INGLETON LA6 3EH	Mon: 09:00-12:30; 13:30-17:30 Tue: 09:00-12:30; 13:30-17:30 Wed: 09:00-12:30; 13:30-17:30 Thu: 09:00-12:30 Fri: 09:00-12:30; 13:30-17:30 Sat: 09:00-12:30; 13:30-16:30 Sun:	Mon: 09:00-12:30; 13:30-17:30 Tue: 09:00-12:30; 13:30-17:30 Wed: 09:00-12:30; 13:30-17:30 Thu: 09:00-12:30 Fri: 09:00-12:30; 13:30-17:30 Sat: 09:00-12:30; 13:30-16:30 Sun:
Craven	Sutton in Craven Pharmacy	47 Main Street Sutton-in-Craven KEIGHLEY BD20 7HX	Mon: 09:00-12:45; 14:15-18:30 Tue: 09:00-12:45; 14:15-18:30 Wed: 09:00-12:45; 14:15-18:30 Thu: 09:00-12:45; 14:15-18:30 Fri: 09:00-12:45; 14:15-18:30 Sat: 09:00-12:30 Sun:	Mon: 09:00-12:45; 14:15-18:30 Tue: 09:00-12:45; 14:15-18:30 Wed: 09:00-12:45; 14:15-18:30 Thu: 09:00-12:45; 14:15-18:30 Fri: 09:00-12:45; 14:45-18:30 Sat: 09:00-09:30 Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Craven	Cross Hills Pharmacy	Holme Lane Crosshills NR KEIGHLEY BD20 7LG	Mon: 08:00-23:00 Tue: 08:00-23:00 Wed: 08:00-23:00 Thu: 08:00-23:00 Fri: 08:00-23:00 Sat: 08:00-23:00 Sun: 10:00-20:00	Mon: 08:00-23:00 Tue: 08:00-23:00 Wed: 08:00-23:00 Thu: 08:00-23:00 Fri: 08:00-23:00 Sat: 08:00-23:00 Sun: 10:00-20:00
Craven	Your Local Boots Pharmacy	12 Main Street Crosshills NR KEIGHLEY BD20 8TB	Mon: 08:45-13:30; 14:30-18:30 Tue: 08:45-13:30; 14:30-18:30 Wed: 08:45-13:30; 14:30-18:30 Thu: 08:45-13:30; 14:30-18:30 Fri: 08:45-13:30; 14:30-18:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:30; 14:30-18:00 Tue: 09:00-13:30; 14:30-18:00 Wed: 09:00-13:30; 14:30-18:00 Thu: 09:00-13:30; 14:30-18:00 Fri: 09:00-13:30; 14:30-18:00 Sat: Sun:
Craven	Your Local Boots Pharmacy	36 Market Place SETTLE BD24 9ED	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-17:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00 Sun:
Craven	Boots Pharmacy The Medical Centre	The Medical Centre Coach Street SKIPTON BD23 1LQ	Mon: 08:15-12:45; 13:45-18:30 Tue: 08:15-12:45; 13:45-18:30 Wed: 08:15-12:45; 13:45-18:30 Thu: 08:15-12:45; 13:45-18:30 Fri: 08:15-12:45; 13:45-18:30 Sat: Sun:	Mon: 09:00-12:45; 13:45-18:00 Tue: 09:00-12:45; 13:45-18:00 Wed: 09:00-12:45; 13:45-18:00 Thu: 09:00-12:45; 13:45-18:00 Fri: 09:00-12:45; 13:45-18:00 Sat: Sun:
Craven	Carleton In Craven Pharmacy	Old Cobblers Cottage West Road, Carleton In Craven SKIPTON BD23 3DT	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-12:30 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Craven	Lloyds Pharmacy	93 Caroline Square SKIPTON BD23 1DA	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun:	Mon: 09:00-12:30; 14:00-17:30 Tue: 09:00-12:30; 14:00-17:30 Wed: 09:00-12:30; 14:00-17:30 Thu: 09:00-12:30; 14:00-17:30 Fri: 09:00-12:30; 14:00-17:30 Sat: 09:00-12:30; 14:00-15:30 Sun:
Craven	Lloyds Pharmacy	36 Newmarket Street SKIPTON BD23 2JB	Mon: 08:30-18:00 Tue: 08:30-18:00 Wed: 08:30-20:00 Thu: 08:30-18:00 Fri: 08:30-18:00 Sat: 09:00-11:30 Sun:	Mon: 08:30-12:00; 14:00-18:00 Tue: 09:00-12:30; 14:00-18:00 Wed: 09:00-12:30; 14:00-18:00 Thu: 09:00-12:30; 14:00-18:00 Fri: 09:00-12:30; 14:00-18:00 Sat: 09:00-11:30 Sun:
Craven	Naylors Ltd	36 High Street Gargrave SKIPTON BD23 3RB	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-12:30; 14:00-17:30 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
Craven	Tesco Superstore	Craven Street SKIPTON BD23 2AG	Mon: 09:00-20:00 Tue: 09:00-20:00 Wed: 09:00-20:00 Thu: 09:00-20:00 Fri: 09:00-20:00 Sat: 09:00-20:00 Sun: 10:00-16:00	Mon: 09:00-13:00; 14:00-16:30 Tue: 09:00-13:00; 14:00-16:30 Wed: 09:00-13:00; 14:00-16:30 Thu: 09:00-13:00; 14:00-16:30 Fri: 09:00-13:00; 14:00-17:00 Sat: 09:00-13:00; 14:00-17:00 Sun:
Hambleton	Bedale Pharmacy	31 North End Market Place BEDALE DL8 1AF	Mon: 09:00-13:00; 13:20-17:30 Tue: 09:00-13:00; 13:20-17:30 Wed: 09:00-13:00; 13:20-17:30 Thu: 09:00-13:00; 13:20-17:30 Fri: 09:00-13:00; 13:20-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Hambleton	Mills Chemists	20 North End BEDALE DL8 1AB	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-12:30; 13:00-17:30 Tue: 09:00-12:30; 13:00-17:30 Wed: 09:00-12:30; 13:00-17:30 Thu: 09:00-12:30; 13:00-17:30 Fri: 09:00-12:30; 13:00-17:30 Sat: Sun:
Hambleton	Your Local Boots Pharmacy	Market Place EASINGWOLD YO61 3AD	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00; 14:00-17:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
Hambleton	Coopers Chemist Gt Ayton Ltd	131 High Street GREAT AYTON TS9 6BW	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:00 Sun:	Mon: 09:00-16:00 Tue: 09:00-16:00 Wed: 09:00-16:00 Thu: 09:00-16:00 Fri: 09:00-16:00 Sat: 09:00-14:00 Sun:
Hambleton	Boots UK Ltd	203-204 High Street NORTHALLERTON DL7 8LW	Mon: 09:00-13:30; 14:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-13:30; 14:00-17:30 Fri: 09:00-13:30; 14:00-17:30 Sat: 09:00-17:30 Sun: 10:30-13:00; 13:30-16:00	Mon: 09:00-13:30; 14:30-17:30 Tue: 09:00-13:30; 14:30-17:30 Wed: 09:00-13:30; 14:30-17:30 Thu: 09:00-13:30; 14:30-17:30 Fri: 09:00-13:30; 14:30-17:30 Sat: 09:00-11:30 Sun:
Hambleton	Mowbray House Surgery	Malpas Road NORTHALLERTON DL7 8FW	Mon: 08:30-17:30 Tue: 08:30-17:30 Wed: 08:30-17:30 Thu: 08:30-17:30 Fri: 08:30-17:30 Sat: 09:00-14:00 Sun:	Mon: 08:45-13:00; 14:00-17:30 Tue: 08:45-13:00; 14:00-17:30 Wed: 08:45-13:00; 14:00-17:30 Thu: 08:45-13:00; 14:00-17:30 Fri: 08:45-13:00; 14:00-17:30 Sat: 09:00-10:15 Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Hambleton	Tesco Superstore	East Road NORTHALLERTON DL6 1NP	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00
Hambleton	The Co-operative Pharmacy	Boroughbridge Road NORTHALLERTON DL7 8BN	Mon: 08:45-18:30 Tue: 08:45-18:30 Wed: 08:45-18:30 Thu: 08:45-18:30 Fri: 08:45-18:30 Sat: 09:00-12:30 Sun:	Mon: 08:45-12:45; 14:30-18:30 Tue: 08:45-12:45; 14:30-18:30 Wed: 08:45-12:45; 14:30-18:30 Thu: 08:45-12:45; 14:30-18:30 Fri: 08:45-12:45; 14:30-18:30 Sat: Sun:
Hambleton	Your Local Boots Pharmacy	10 High Street STOKESLEY TS9 5DQ	Mon: 08:00-13:00; 14:00-18:00 Tue: 08:30-13:00; 14:00-18:00 Wed: 08:30-13:00; 14:00-18:00 Thu: 08:30-13:00; 14:00-18:00 Fri: 08:30-13:00; 14:00-18:00 Sat: 09:00-13:00; 14:00-17:00 Sun:	Mon: 09:00-13:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00 Sun:
Hambleton	Boots UK Ltd	1 Chapel Street THIRSK YO7 1LU	Mon: 08:30-12:00; 13:00-18:30 Tue: 08:30-12:00; 13:00-18:30 Wed: 08:30-12:00; 13:00-18:30 Thu: 08:30-12:00; 13:00-18:30 Fri: 08:30-12:00; 13:00-18:30 Sat: Sun:	Mon: 08:30-12:00; 13:00-17:30 Tue: 08:30-12:00; 13:00-17:30 Wed: 08:30-12:00; 13:00-17:30 Thu: 08:30-12:00; 13:00-17:30 Fri: 08:30-12:00; 13:00-17:30 Sat: Sun:
Hambleton	Boots UK Ltd	28 Market Place THIRSK YO7 1LB	Mon: 09:00-14:00; 14:30-17:30 Tue: 09:00-14:00; 14:30-17:30 Wed: 09:00-14:00; 14:30-17:30 Thu: 09:00-14:00; 14:30-17:30 Fri: 09:00-14:00; 14:30-17:30 Sat: 09:30-14:00; 14:30-17:30 Sun:	Mon: 09:30-14:00; 15:00-17:30 Tue: 09:30-14:00; 15:00-17:30 Wed: 09:30-14:00; 15:00-17:30 Thu: 09:30-14:00; 15:00-17:30 Fri: 09:30-14:00; 15:00-17:30 Sat: 09:30-14:00; 15:00-15:30 Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Hambleton	Tesco Superstore	Station Road THIRSK YO7 1PZ	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00
Harrogate	DH & G Treharne Ltd	26 High Street BOROUGHBRIDGE YO51 9AW	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-17:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:00 Wed: 09:00-13:00; 14:00-17:00 Thu: 09:00-13:00; 14:00-17:00 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-13:00 Sun:
Harrogate	Asda Superstore	Bower Road HARROGATE HG1 5DE	Mon: 08:30-22:00 Tue: 08:30-22:00 Wed: 08:30-22:00 Thu: 08:30-22:00 Fri: 08:30-22:00 Sat: 08:30-22:00 Sun: 10:00-14:00	Mon: 08:30-22:00 Tue: 08:30-22:00 Wed: 08:30-22:00 Thu: 08:30-22:00 Fri: 08:30-22:00 Sat: 08:30-22:00 Sun: 10:00-14:00
Harrogate	Boots UK Ltd	26-28 Cambridge Street HARROGATE HG1 1RX	Mon: 08:30-17:45 Tue: 08:30-17:45 Wed: 08:30-17:45 Thu: 08:30-17:45 Fri: 08:30-17:45 Sat: 08:30-17:45 Sun: 10:30-16:30	Mon: 09:30-14:00; 15:00-17:00 Tue: 09:30-14:00; 15:00-17:00 Wed: 09:30-14:00; 15:00-17:00 Thu: 09:30-14:00; 15:00-17:30 Fri: 09:30-14:00; 15:00-17:30 Sat: 09:30-14:00; 15:00-17:00 Sun:
Harrogate	Cohens Chemist	Mowbray Square Medical Centre Myrtle Square HARROGATE HG1 5AR	Mon: 08:00-18:30 Tue: 08:00-18:30 Wed: 08:00-18:30 Thu: 08:00-18:30 Fri: 08:00-18:30 Sat: Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Harrogate	Cohens Chemist	52-54 King Edwards Drive HARROGATE HG1 4HL	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
Harrogate	Kings Road Pharmacy	28-30 Kings Road HARROGATE HG1 5JP	Mon: 08:00-18:30 Tue: 08:00-18:30 Wed: 08:00-18:30 Thu: 08:00-18:30 Fri: 08:00-18:30 Sat: 08:00-12:00 Sun:	Mon: 08:30-11:00; 13:30-18:30 Tue: 08:30-11:00; 13:30-18:30 Wed: 08:30-11:00; 13:30-18:30 Thu: 08:30-11:00; 13:30-18:30 Fri: 08:30-11:00; 13:30-18:30 Sat: 09:00-11:30 Sun:
Harrogate	Lloyds Pharmacy	156 Kings Road HARROGATE HG1 5HY	Mon: 08:30-18:30 Tue: 08:30-18:30 Wed: 08:30-18:30 Thu: 08:30-18:30 Fri: 08:30-18:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:30-18:00 Tue: 09:00-13:00; 14:30-18:00 Wed: 09:00-13:00; 14:30-18:00 Thu: 09:00-13:00; 14:30-18:00 Fri: 09:00-13:00; 14:30-18:00 Sat: 10:00-12:30 Sun:
Harrogate	Lloyds Pharmacy	54a High Street, Starbeck Starbeck HARROGATE HG2 7JE	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
Harrogate	Lloyds Pharmacy	123 Knaresborough Road HARROGATE HG2 7LY	Mon: 08:30-18:00 Tue: 08:30-18:00 Wed: 08:30-18:00 Thu: 08:30-18:00 Fri: 08:30-18:00 Sat: 09:00-12:30 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Harrogate	RS Marsden Chemist Ltd	85 Leeds Road HARROGATE HG2 8BE	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
Harrogate	Sainsbury's Pharmacy	Wetherby Road HARROGATE HG2 8QZ	Mon: 08:00-22:00 Tue: 08:00-22:00 Wed: 08:00-22:00 Thu: 08:00-22:00 Fri: 08:00-22:00 Sat: 08:00-22:00 Sun: 10:00-16:00	Mon: 09:00-12:00; 13:00-16:00 Tue: 09:00-12:00; 13:00-16:00 Wed: 09:00-12:00; 13:00-16:00 Thu: 09:00-12:00; 13:00-16:00 Fri: 09:00-12:00; 13:00-16:00 Sat: 09:00-13:00 Sun: 10:00-16:00
Harrogate	Superdrug Pharmacy	Unit One Nidderdale Lane 4-6 Cambridge Road HARROGATE HG1 1NS	Mon: 08:30-17:30 Tue: 08:30-17:30 Wed: 08:30-17:30 Thu: 08:30-17:30 Fri: 08:30-17:30 Sat: 09:00-13:30; 14:30-17:30 Sun:	Mon: 09:00-13:00; 15:00-17:30 Tue: 09:00-13:00; 15:00-17:30 Wed: 09:00-13:00; 15:00-17:30 Thu: 09:00-13:00; 15:00-17:30 Fri: 09:00-13:00; 15:00-17:30 Sat: 09:00-13:30; 14:30-17:30 Sun:
Harrogate	The Co-operative Pharmacy	111 Cold Bath Road HARROGATE HG2 0NU	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-12:00 Sun:
Harrogate	The Co-operative Pharmacy	Kingswood Medical Centre 14 Wetherby Road HARROGATE HG2 7SA	Mon: 06:30-22:00 Tue: 06:30-22:00 Wed: 06:30-22:00 Thu: 06:30-22:00 Fri: 06:30-22:00 Sat: 08:00-22:00 Sun: 09:30-18:00	Mon: 06:30-22:00 Tue: 06:30-22:00 Wed: 06:30-22:00 Thu: 06:30-22:00 Fri: 06:30-22:00 Sat: 08:00-22:00 Sun: 09:30-18:00

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Harrogate	Your Local Boots	NYCS Store Jennyfield Drive HARROGATE HG3 2XQ	Mon: 09:00-13:00; 14:00-18:30 Tue: 09:00-13:00; 14:00-18:30 Wed: 09:00-13:00; 14:00-18:30 Thu: 09:00-13:00; 14:00-18:30 Fri: 09:00-13:00; 14:00-18:30 Sat: 09:00-13:00; 14:00-17:00 Sun:	Mon: 09:00-13:00; 14:00-16:00 Tue: 09:00-13:00; 14:00-16:00 Wed: 09:00-13:00; 14:00-17:00 Thu: 09:00-13:00; 14:00-17:00 Fri: 09:00-13:00; 14:00-17:00 Sat: 09:00-13:00; 14:00-17:00 Sun:
Harrogate	Boots Pharmacy	Unit 4a St James Retail Park Grimbald Crag Road KNARESBOROUGH HG5 8PZ	Mon: 08:00-24:00 Tue: 08:00-24:00 Wed: 08:00-24:00 Thu: 08:00-24:00 Fri: 08:00-24:00 Sat: 09:00-23:00 Sun: 10:00-16:00	Mon: 08:00-24:00 Tue: 08:00-24:00 Wed: 08:00-24:00 Thu: 08:00-24:00 Fri: 08:00-24:00 Sat: 09:00-23:00 Sun: 10:00-16:00
Harrogate	Boots UK Ltd	22-28 Market Place KNARESBOROUGH HG5 8AG	Mon: 08:30-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 08:30-13:00; 14:00-17:30 Thu: 08:30-13:00; 14:00-17:30 Fri: 08:30-13:00; 14:00-17:30 Sat: 08:30-13:00; 14:00-17:30 Sun:	Mon: 09:00-13:00; 14:00-17:00 Tue: 09:00-13:00; 14:00-17:00 Wed: 09:00-13:00; 14:00-17:00 Thu: 09:00-13:00; 14:00-17:00 Fri: 09:00-13:00; 14:00-17:00 Sat: 09:00-13:00; 14:00-15:00 Sun:
Harrogate	Lloyds Pharmacy	34 High Street KNARESBOROUGH HG5 0EQ	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun:	Mon: 09:00-11:30; 13:30-17:30 Tue: 09:00-11:30; 13:30-17:30 Wed: 09:00-11:30; 13:30-17:30 Thu: 09:00-11:30; 13:30-17:30 Fri: 09:00-11:30; 13:30-17:30 Sat: 09:00-11:30; 12:30-17:30 Sun:
Harrogate	PR Naylor Chemist Ltd	40-42 Market Place KNARESBOROUGH HG5 8AG	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: Sun:	Mon: 09:30-17:30 Tue: 09:30-17:30 Wed: 09:30-17:30 Thu: 09:30-17:30 Fri: 09:30-17:30 Sat: Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Harrogate	Your Local Boots Pharmacy	NYCS Stores Ltd Chain Lane KNARESBOROUGH HG5 0DH	Mon: 09:00-13:30; 14:00-18:30 Tue: 09:00-13:00; 14:00-18:30 Wed: 09:00-13:00; 14:00-18:30 Thu: 09:00-13:00; 14:00-18:30 Fri: 09:00-13:00; 14:00-18:30 Sat: 09:00-13:00; 14:00-17:00 Sun:	Mon: 14:00-15:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00; 14:00-17:00 Sun:
Harrogate	Pateley Bridge Pharmacy	25 High Street PATELEY BRIDGE HG3 5AL	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-17:00 Sun:	Mon: 09:00-12:30; 13:30-17:00 Tue: 09:00-12:30; 13:30-17:00 Wed: 09:00-12:30; 13:30-17:00 Thu: 09:00-13:00 Fri: 09:00-12:30; 13:30-17:00 Sat: 09:00-17:00 Sun:
Harrogate	Boots UK Ltd	27 Market Place West RIPON HG4 1BN	Mon: 09:00-11:30; 12:30-17:30 Tue: 09:00-11:30; 12:30-17:30 Wed: 09:00-11:30; 12:30-17:30 Thu: 09:00-11:30; 12:30-17:30 Fri: 09:00-11:30; 12:30-17:30 Sat: 09:00-14:00; 15:00-17:30 Sun:	Mon: 09:30-11:30; 12:30-17:00 Tue: 09:00-11:30; 12:30-17:00 Wed: 09:00-11:30; 12:30-17:00 Thu: 09:00-11:30; 12:30-17:00 Fri: 09:00-11:30; 12:30-17:00 Sat: 09:30-14:00; 15:00-16:00 Sun:
Harrogate	Marsden Pharmacy	81 North Street RIPON HG4 1DP	Mon: 08:30-13:00; 14:00-17:30 Tue: 08:30-13:00; 14:00-17:30 Wed: 08:30-13:00; 14:00-17:30 Thu: 08:30-13:00; 14:00-17:30 Fri: 08:30-13:00; 14:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:00 Tue: 09:00-13:00; 14:00-17:00 Wed: 09:00-13:00; 14:00-17:00 Thu: 08:30-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:00 Sat: 09:00-13:00 Sun:
Harrogate	Morrisons Pharmacy	Harrogate Road Quarry Moor RIPON HG4 2SB	Mon: 09:00-20:00 Tue: 09:00-20:00 Wed: 09:00-20:00 Thu: 09:00-21:00 Fri: 09:00-21:00 Sat: 09:00-20:00 Sun: 11:00-14:00	Mon: 09:00-13:00; 14:00-17:00 Tue: 09:00-13:00; 14:00-17:00 Wed: 09:00-13:00; 14:00-17:00 Thu: 09:00-13:00; 14:00-17:00 Fri: 09:00-13:00; 14:00-17:00 Sat: 09:00-13:00; 14:00-15:00 Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Harrogate	R S Marsden (Chemist) Ltd	11 Market Place Masham RIPON HG4 4DZ	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00 Fri: 09:00-13:00; 13:30-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00 Fri: 09:00-13:00; 13:30-17:30 Sat: 09:00-13:00 Sun:
Harrogate	Spa Pharmacy	4 Westgate RIPON HG4 2AT	Mon: 08:45-12:30; 12:30-17:30 Tue: 08:45-12:30; 12:30-17:30 Wed: 08:45-12:30; 12:30-17:30 Thu: 08:45-12:30; 12:30-17:30 Fri: 08:45-12:30; 12:30-17:30 Sat: 08:45-13:00 Sun:	Mon: 09:00-12:30; 13:00-17:30 Tue: 09:00-12:30; 13:00-17:30 Wed: 09:00-12:30; 13:00-17:30 Thu: 09:00-12:30; 13:00-17:30 Fri: 09:00-12:30; 13:00-17:30 Sat: Sun:
Richmondshire	Boots UK Ltd	Unit2, Richmondshire Walk CATTERICK GARRISON DL9 3EN	Mon: 08:30-13:00; 14:00-17:30 Tue: 08:30-13:00; 14:00-17:30 Wed: 08:30-13:00; 14:00-17:30 Thu: 08:30-13:00; 14:00-17:30 Fri: 08:30-13:00; 14:00-17:30 Sat: 08:30-13:00; 14:00-17:30 Sun:	Mon: 09:00-13:00; 14:00-17:00 Tue: 09:00-13:00; 14:00-17:00 Wed: 09:00-13:00; 14:00-17:00 Thu: 09:00-13:00; 14:00-17:00 Fri: 09:00-13:00; 14:00-17:00 Sat: 09:00-13:00; 14:00-15:00 Sun:
Richmondshire	Tesco Superstore	Gough Road CATTERICK GARRISON DL9 3EN	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00
Richmondshire	Your Local Boots Pharmacy	19-20 The Broadway CATTERICK GARRISON DL9 4RF	Mon: 09:00-17:30 Tue: 09:00-18:00 Wed: 09:00-17:30 Thu: 09:00-18:00 Fri: 09:00-17:30 Sat: 10:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 10:00-12:30 Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Richmondshire	The Village Pharmacy	33 High Street CATTERICK VILLAGE DL10 7LL	Mon: 09:00-18:00 Tue: 09:00-17:30 Wed: 08:30-18:00 Thu: 09:00-17:30 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:30-12:00 Sun:
Richmondshire	J & E Hogg Ltd	Market Place HAWES DL8 3QX	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
Richmondshire	J S Langhorne	7 Market Place LEYBURN DL8 5BG	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-14:00 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-13:00; 14:00-16:00 Sun:
Richmondshire	Boots UK Ltd	15-16 Market Place RICHMOND DL10 4PX	Mon: 09:00-12:00; 13:00-17:30 Tue: 09:00-12:00; 13:00-17:30 Wed: 09:00-12:00; 13:00-17:30 Thu: 09:00-12:00; 13:00-17:30 Fri: 09:00-12:00; 13:00-17:30 Sat: 09:00-12:00; 13:00-17:30 Sun:	Mon: 09:00-12:00; 13:00-17:00 Tue: 09:00-12:00; 13:00-17:00 Wed: 09:00-12:00; 13:00-17:00 Thu: 09:00-12:00; 13:00-17:00 Fri: 09:00-12:00; 13:00-17:00 Sat: 09:00-12:00; 13:00-15:00 Sun:
Richmondshire	Richmond Pharmacy	20 King Street RICHMOND DL10 4HP	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun: 11:00-12:00	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 10:00-12:30 Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Ryedale	Helmsley Pharmacy	Helmsley medical Centre Carlton Road HELMSLEY YO62 5HD	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
Ryedale	Towler's Chemist Limited	10 Market Place KIRKBYMOORSIDE YO62 6DB	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-12:30 Fri: 09:00-18:00 Sat: 09:00-17:00 Sun:	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-12:30 Fri: 09:00-17:30 Sat: 09:00-11:30 Sun:
Ryedale	Beecham Pharmacy	33 Commercial Street Norton MALTON YO17 9HX	Mon: 09:00-13:00; 14:15-17:30 Tue: 09:00-13:00; 14:15-17:30 Wed: 09:00-13:00; 14:15-17:30 Thu: 09:00-13:00; 14:15-17:30 Fri: 09:00-13:00; 14:15-17:30 Sat: 09:00-13:00; 14:15-17:30 Sun:	Mon: 09:00-13:00; 14:15-17:30 Tue: 09:00-13:00; 14:15-17:30 Wed: 09:00-13:00; 14:15-17:30 Thu: 09:00-13:00; 14:15-17:30 Fri: 09:00-13:00; 14:15-17:30 Sat: 09:00-12:45 Sun:
Ryedale	Beecham Pharmacy	Derwent Surgery Norton Road MALTON YO17 9RF	Mon: 08:30-13:00; 14:15-17:30 Tue: 08:30-13:00; 14:15-17:30 Wed: 08:30-13:00; 14:15-17:30 Thu: 08:30-13:00; 14:15-17:30 Fri: 08:30-13:00; 14:15-17:30 Sat: 08:30-13:00 Sun:	Mon: 09:00-13:00; 14:15-17:30 Tue: 09:00-13:00; 14:15-17:30 Wed: 09:00-13:00; 14:15-17:30 Thu: 09:00-13:00; 14:15-17:30 Fri: 09:00-13:00; 14:15-17:30 Sat: 09:00-12:45 Sun:
Ryedale	Boots UK Ltd	31-33 Wheelgate MALTON YO17 7HT	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun:	Mon: 09:30-12:30; 13:30-17:30 Tue: 09:30-12:30; 13:30-17:30 Wed: 09:30-12:30; 13:30-17:30 Thu: 09:30-12:30; 13:30-17:30 Fri: 09:30-12:30; 13:30-17:30 Sat: 09:30-12:30; 13:30-15:30 Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Ryedale	Lloyds Pharmacy	24 Market Place MALTON YO17 7LX	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-16:00 Sun:	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-16:00 Sun:
Ryedale	Beckside Pharmacy	Maltongate Thornton Le Dale PICKERING YO18 7RJ	Mon: 09:00-18:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: Fri: 09:00-17:00 Sat: Sun:	Mon: 09:00-18:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: Fri: 09:00-17:00 Sat: Sun:
Ryedale	Pickering Pharmacy	22 Market Place PICKERING YO18 7AE	Mon: 09:00-18:30 Tue: 09:00-18:30 Wed: 09:00-18:30 Thu: 09:00-18:30 Fri: 09:00-18:30 Sat: 09:00-17:00 Sun: 11:00-12:00	Mon: 09:00-12:45; 14:00-17:30 Tue: 09:00-12:45; 14:00-17:30 Wed: 09:00-12:45; 14:00-17:30 Thu: 09:00-12:45; 14:00-17:30 Fri: 09:00-12:45; 14:00-17:30 Sat: 09:00-12:45 Sun:
Scarborough	Filey Bay Pharmacy	Sunrise Drive, The Bay FILEY YO14 9GE	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
Scarborough	Your Local Boots Pharmacy	32 Belle Vue Street FILEY YO14 9HY	Mon: 09:00-12:30; 13:30-17:30 Tue: 09:00-12:30; 13:30-17:30 Wed: 09:00-12:30; 13:30-17:30 Thu: 09:00-12:30; 13:30-17:30 Fri: 09:00-12:30; 13:30-17:30 Sat: 09:00-12:30; 13:30-17:30 Sun:	Mon: 09:00-12:30; 13:30-17:30 Tue: 09:00-12:30; 13:30-17:30 Wed: 09:00-12:30; 13:30-17:30 Thu: 09:00-12:30; 13:30-17:30 Fri: 09:00-12:30; 13:30-17:30 Sat: 09:00-11:30 Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Scarborough	Your Local Boots Pharmacy	2 Murray Street FILEY YO14 9DG	Mon: 08:30-12:00; 13:00-18:00 Tue: 08:30-12:00; 13:00-18:00 Wed: 08:30-12:00; 13:00-18:00 Thu: 08:30-12:00; 13:00-18:00 Fri: 08:30-12:00; 13:00-18:00 Sat: 09:00-12:00; 13:00-17:30 Sun:	Mon: 09:00-12:00; 13:00-17:30 Tue: 09:00-12:00; 13:00-17:30 Wed: 09:00-12:00; 13:00-14:00 Thu: 09:00-12:00; 13:00-17:30 Fri: 09:00-12:00; 13:00-17:30 Sat: 09:00-12:00; 13:00-16:00 Sun:
Scarborough	Your Local Boots Pharmacy	32-34 Murray Street FILEY YO14 9DG	Mon: 09:00-12:00; 13:00-17:30 Tue: 09:00-12:00; 13:00-17:30 Wed: 09:00-12:00; 13:00-17:30 Thu: 09:00-12:00; 13:00-17:30 Fri: 09:00-12:00; 13:00-17:30 Sat: 09:00-12:00; 13:00-17:30 Sun: 13:00-16:00* *from Easter through to the first weekend in September.	Mon: 09:00-12:00; 13:00-17:30 Tue: 09:00-12:00; 13:00-17:30 Wed: 09:00-12:00; 13:00-17:30 Thu: 09:00-12:00; 13:00-17:30 Fri: 09:00-12:00; 13:00-17:30 Sat: 09:00-11:30 Sun:
Scarborough	Your Local Boots Pharmacy	24A Bridlington Street HUNMANBY YO14 0JR	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-17:00 Sun:	Mon: 09:00-12:30; 13:30-17:30 Tue: 09:00-12:30; 13:30-17:30 Wed: 09:00-12:30; 13:30-17:30 Thu: 09:00-12:30; 13:30-17:30 Fri: 09:00-12:30; 13:30-17:30 Sat: 09:00-11:30 Sun:
Scarborough	Aston Chemists Ltd	9-11 Gladstone Road SCARBOROUGH YO12 7BQ	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:30-12:30 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 10:00-12:30 Sun:
Scarborough	Aston Pharmacy	15 Ramshill Road SCARBOROUGH YO11 2LN	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00; 14:00-17:30 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Scarborough	Aston Pharmacy	91 Falsgrave Road SCARBOROUGH YO12 5EG	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
Scarborough	Barrowcliff Pharmacy	24 Wreyfield Drive Newby SCARBOROUGH YO12 6NN	Mon: 09:00-17:45 Tue: 09:00-17:45 Wed: 09:00-17:45 Thu: 09:00-17:45 Fri: 09:00-17:45 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:45-17:45 Tue: 09:00-13:00; 13:45-17:45 Wed: 09:00-13:00; 13:45-17:45 Thu: 09:00-13:00; 13:45-17:45 Fri: 09:00-13:00; 13:45-17:45 Sat: Sun:
Scarborough	Boots UK Ltd	100-101 Westborough SCARBOROUGH YO11 1LN	Mon: 08:30-12:30; 13:30-17:30 Tue: 08:30-12:30; 13:30-17:30 Wed: 08:30-12:30; 13:30-17:30 Thu: 08:30-12:30; 13:30-17:30 Fri: 08:30-12:30; 13:30-17:30 Sat: 08:30-12:30; 13:30-17:30 Sun: 10:30-16:30	Mon: 09:30-12:30; 13:30-17:30 Tue: 09:30-12:30; 13:30-17:30 Wed: 09:30-12:30; 13:30-17:30 Thu: 09:30-12:30; 13:30-17:30 Fri: 09:30-12:30; 13:30-17:30 Sat: 09:30-12:30; 13:30-15:30 Sun:
Scarborough	Cohens Chemist	1a Belgrave Crescent SCARBOROUGH YO11 1UB	Mon: 09:00-23:00 Tue: 08:00-23:00 Wed: 08:00-23:00 Thu: 08:00-23:00 Fri: 08:00-23:00 Sat: 09:00-23:00 Sun: 11:00-23:00	Mon: 09:00-23:00 Tue: 08:00-23:00 Wed: 08:00-23:00 Thu: 08:00-23:00 Fri: 08:00-23:00 Sat: 09:00-23:00 Sun: 11:00-23:00
Scarborough	Delivery Chemist Ltd	35 Main Street East Ayton SCARBOROUGH YO13 9HL	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Scarborough	J Sainsbury Store	Falsgrave Road SCARBOROUGH YO12 5EA	Mon: 07:00-23:00 Tue: 07:00-23:00 Wed: 07:00-23:00 Thu: 07:00-23:00 Fri: 07:00-23:00 Sat: 07:00-22:00 Sun: 10:00-16:00	Mon: 08:00-23:00 Tue: 07:00-23:00 Wed: 07:00-23:00 Thu: 07:00-23:00 Fri: 07:00-23:00 Sat: 07:00-22:00 Sun: 10:00-16:00
Scarborough	JG Squire Ltd	54 Falsgrave Road SCARBOROUGH YO12 5AX	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
Scarborough	Lincoln Co-Op Chemists Ltd	448 Scalby Road SCARBOROUGH YO12 6EE	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:45 Sat: 09:00-12:30 Sun:	Mon: 09:00-13:00; 14:15-17:30 Tue: 09:00-13:00; 14:15-17:30 Wed: 09:00-13:00; 14:15-17:30 Thu: 09:00-13:00; 14:15-17:30 Fri: 09:00-13:00; 14:15-17:45 Sat: 09:00-12:30 Sun:
Scarborough	Lincoln Co-Op Chemists Ltd	10-12 Aberdeen Walk SCARBOROUGH YO11 1XP	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 10:00-17:30 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 10:00-12:30 Sun:
Scarborough	Lincoln Co-Op Chemists Ltd	7 High Street Eastfield SCARBOROUGH YO11 3LL	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Scarborough	Lloyds Pharmacy	8 North Marine Road SCARBOROUGH YO12 7PD	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
Scarborough	Morrisons Pharmacy	Dunslow Road Crossgates SCARBOROUGH YO11 3YN	Mon: 08:30-20:00 Tue: 08:30-20:00 Wed: 08:30-20:00 Thu: 08:30-20:00 Fri: 08:30-20:00 Sat: 08:00-18:00 Sun: 10:00-16:00	Mon: 09:00-13:00; 14:00-17:00 Tue: 09:00-13:00; 14:00-17:00 Wed: 09:00-13:00; 14:00-17:00 Thu: 09:00-13:00; 14:00-17:00 Fri: 09:00-13:00; 14:00-17:00 Sat: 09:00-13:00; 14:00-15:00 Sun:
Scarborough	Northstead Pharmacy	1 Northleas Shops SCARBOROUGH YO12 6JG	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
Scarborough	Scarborough Delivery Chemist	13 Ramshill Road SCARBOROUGH YO11 2LN	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
Scarborough	Your Local Boots Pharmacy	3-4 York Place SCARBOROUGH YO11 2NP	Mon: 08:00-13:00; 14:00-19:15 Tue: 08:00-13:00; 14:00-18:30 Wed: 08:00-13:00; 14:00-19:15 Thu: 08:00-13:00; 14:00-18:30 Fri: 08:00-13:00; 14:00-19:15 Sat: 08:00-17:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Scarborough	Boots UK Ltd	64 Baxtergate WHITBY YO21 1BL	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun:	Mon: 09:30-14:00; 15:00-17:30 Tue: 09:30-14:00; 15:00-17:30 Wed: 09:30-14:00; 15:00-17:30 Thu: 09:30-14:00; 15:00-17:30 Fri: 09:30-14:00; 15:00-17:30 Sat: 09:30-14:00; 15:00-15:30 Sun:
Scarborough	Day Lewis PLC	61 Baxtergate WHITBY YO21 1BL	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
Scarborough	Rowlands Pharmacy	Rievaulx Road WHITBY YO21 1SD	Mon: 08:30-18:00 Tue: 08:30-20:00 Wed: 08:30-18:00 Thu: 08:30-20:00 Fri: 08:30-18:00 Sat: Sun: 10:00-16:00	Mon: 08:30-12:30; 16:00-18:00 Tue: 08:30-12:30; 16:00-20:00 Wed: 08:30-12:30; 16:00-18:00 Thu: 08:30-12:30; 16:00-20:00 Fri: 08:30-12:30; 16:00-18:00 Sat: Sun: 10:00-16:00
Scarborough	Your Local Boots Pharmacy	14 Skinner Street WHITBY YO21 3AJ	Mon: 09:00-13:30; 14:30-17:30 Tue: 09:00-13:30; 14:30-17:30 Wed: 09:00-13:30; 14:30-17:30 Thu: 09:00-13:30; 14:30-17:30 Fri: 09:00-13:30; 14:30-17:30 Sat: 09:00-12:00; 13:00-17:00 Sun:	Mon: 09:00-13:30; 14:30-17:30 Tue: 09:00-13:30; 14:30-17:30 Wed: 09:00-13:30; 14:30-17:30 Thu: 09:00-13:30; 14:30-17:30 Fri: 09:00-13:30; 14:30-17:30 Sat: 09:00-11:30 Sun:
Selby	Eggborough Pharmacy Ltd	87 Selby Road Eggborough KNOTTINGLEY DN14 0LJ	Mon: 09:00-12:30; 13:00-17:30 Tue: 09:00-12:30; 13:00-17:30 Wed: 09:00-12:30; 13:00-17:30 Thu: 09:00-12:30; 13:00-17:30 Fri: 09:00-12:30; 13:00-17:30 Sat: Sun:	Mon: 09:00-12:30; 13:00-17:30 Tue: 09:00-12:30; 13:00-17:30 Wed: 09:00-12:30; 13:00-17:30 Thu: 09:00-12:30; 13:00-17:30 Fri: 09:00-12:30; 13:00-17:30 Sat: Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Selby	Milford Pharmacy	14 High Street South Milford LEEDS LS25 5AA	Mon: 09:00-19:30 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
Selby	ARC Pharmacy	Portholme Road SELBY YO8 4QH	Mon: 08:45-20:00 Tue: 08:45-18:30 Wed: 08:45-18:30 Thu: 08:45-18:30 Fri: 08:45-18:30 Sat: Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
Selby	Barlby Pharmacy	65-67 Sycamore Rd Barlby SELBY YO8 5XD	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
Selby	Boots Uk Ltd	10 Market Place SELBY YO8 4PB	Mon: 08:30-12:00; 13:00-17:30 Tue: 08:30-12:00; 13:00-17:30 Wed: 08:30-12:00; 13:00-17:30 Thu: 08:30-12:00; 13:00-17:30 Fri: 08:30-12:00; 13:00-17:30 Sat: 08:30-12:00; 13:00-17:30 Sun:	Mon: 09:00-12:00; 13:00-17:00 Tue: 09:00-12:00; 13:00-17:00 Wed: 09:00-12:00; 13:00-17:00 Thu: 09:00-12:00; 13:00-17:00 Fri: 09:00-12:00; 13:00-17:00 Sat: 09:00-12:00; 13:00-15:00 Sun:
Selby	Rowlands Pharmacy	66 Doncaster Road SELBY YO8 9AJ	Mon: 08:45-18:00 Tue: 08:45-12:00; 13:00-18:00 Wed: 08:45-12:00; 13:00-18:00 Thu: 08:45-12:00; 13:00-18:00 Fri: 08:45-12:00; 13:00-18:00 Sat: Sun:	Mon: 09:00-12:00; 13:00-18:00 Tue: 09:00-12:00; 13:00-18:00 Wed: 09:00-12:00; 13:00-18:00 Thu: 13:00-12:00; 13:00-18:00 Fri: 09:00-12:00; 13:00-18:00 Sat: Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Selby	Scott Road Pharmacy	Scott Road SELBY YO8 4BL	Mon: 08:30-18:00 Tue: 08:30-18:00 Wed: 08:30-18:00 Thu: 08:30-18:00 Fri: 08:30-18:00 Sat: Sun:	Mon: 08:30-13:00; 14:00-17:30 Tue: 08:30-13:00; 14:00-17:30 Wed: 08:30-13:00; 14:00-17:30 Thu: 08:30-13:00; 14:00-17:30 Fri: 08:30-13:00; 14:00-17:30 Sat: Sun:
Selby	Thorpe Willoughby Pharmacy	26 Field Lane Thorpe Willoughby SELBY YO8 9FL	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
Selby	Your Local Boots Pharmacy	Unit 14 Market Cross Shopping Centre SELBY YO8 4JS	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-16:00 Sun:	Mon: 09:00-13:30; 14:00-17:30 Tue: 09:00-13:30; 14:00-17:30 Wed: 09:00-13:30; 14:00-17:30 Thu: 09:00-13:30; 14:00-17:30 Fri: 09:00-13:30; 14:00-17:30 Sat: Sun:
Selby	Your Local Boots Pharmacy	18 Finkle Hill SHERBURN IN ELMET LS25 6EA	Mon: 08:30-13:00; 14:00-18:00 Tue: 08:30-13:00; 14:00-18:00 Wed: 08:30-13:00; 14:00-18:00 Thu: 08:30-13:00; 14:00-18:00 Fri: 08:30-13:00; 14:00-18:00 Sat: 09:00-13:00; 14:00-17:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
Selby	Calcaria Pharmacy	7-9 High Street TADCASTER LS24 9AP	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-13:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-12:30 Sun:	Mon: 09:00-12:00; 12:30-17:30 Tue: 09:00-12:00; 12:30-17:30 Wed: 09:00-13:30 Thu: 09:00-12:00; 12:30-17:30 Fri: 09:00-12:00; 12:30-17:30 Sat: 09:00-12:30 Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
Selby	Kirkgate Pharmacy	7 Kirkgate TADCASTER LS24 9AQ	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-18:00 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-12:30; 13:00-17:30 Tue: 09:00-12:30; 13:00-17:30 Wed: 09:00-12:30; 13:00-17:30 Thu: 09:00-12:30; 13:00-17:30 Fri: 09:00-12:30; 13:00-17:30 Sat: Sun:
York	Alliance Pharmacy	6 Wyre Court Haxby YORK YO32 2ZB	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
York	Asda Superstore	Monks Cross Shopping Park Jockey Lane YORK YO32 9LF	Mon: 09:00-12:30; 14:30-21:00 Tue: 09:00-12:30; 14:30-21:00 Wed: 09:00-12:30; 14:30-21:00 Thu: 09:00-12:30; 14:30-21:00 Fri: 09:00-12:30; 14:30-21:00 Sat: 09:00-12:30; 14:30-21:00 Sun: 10:00-12:30; 14:30-16:00	Mon: 09:00-12:30; 14:30-18:00 Tue: 09:00-12:30; 14:30-18:00 Wed: 09:00-12:30; 14:30-18:00 Thu: 09:00-12:30; 14:30-18:00 Fri: 09:00-12:30; 14:30-18:00 Sat: 09:00-12:30; 14:30-16:00 Sun:
York	Badger Hill Pharmacy	35 Yarburgh Way Badger Hill YORK YO10 5HD	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-12:30 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
York	Bishopthorpe Pharmacy	22-24 Acaster Lane Bishopthorpe YORK YO23 2SJ	Mon: 09:00-13:00; 13:30-18:00 Tue: 09:00-13:00; 13:30-17:00 Wed: 09:00-13:00; 13:30-18:00 Thu: 09:00-13:00; 13:30-18:00 Fri: 09:00-13:00; 13:30-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: 09:00-13:00 Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
York	Bishopthorpe Road Pharmacy	18 Bishopthorpe Road YORK YO23 1JJ	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
York	Boots the Chemist Ltd	5 Heworth Village YORK YO31 1AE	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-13:00; 14:00-17:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
York	Boots the Chemists	10 East Parade YORK YO31 7YJ	Mon: 09:00-12:30; 13:30-17:30 Tue: 09:00-12:30; 13:30-17:30 Wed: 09:00-12:30; 13:30-17:30 Thu: 09:00-12:30; 13:30-17:30 Fri: 09:00-12:30; 13:30-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-12:30; 13:30-17:30 Tue: 09:00-12:30; 13:30-17:30 Wed: 09:00-12:30; 13:30-17:30 Thu: 09:00-12:30; 13:30-17:30 Fri: 09:00-12:30; 13:30-17:30 Sat: 09:00-11:30 Sun:
York	Boots Uk Ltd	5, St Mary's Square The Coppergate Centre YORK YO1 9NY	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun: 10:30-16:30	Mon: 09:30-16:30 Tue: 09:30-16:30 Wed: 09:30-16:30 Thu: 09:30-16:30 Fri: 09:30-16:30 Sat: 09:30-14:30 Sun:
York	Boots Uk Ltd	2 Spurriergate (also known as 43 Coney Street) YORK YO1 9QR	Mon: 08:30-18:00 Tue: 08:30-18:00 Wed: 08:30-18:00 Thu: 08:30-18:00 Fri: 08:30-18:00 Sat: 08:30-18:00 Sun: 11:00-17:00	Mon: 09:30-16:00 Tue: 09:30-16:00 Wed: 09:30-16:00 Thu: 09:30-16:30 Fri: 09:30-16:30 Sat: 09:30-16:00 Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
York	Boots Uk Ltd	Unit 7, Monks Cross Shopping Park YORK YO32 9GX	Mon: 09:00-20:00 Tue: 09:00-20:00 Wed: 09:00-20:00 Thu: 09:00-20:00 Fri: 09:00-20:00 Sat: 09:00-19:00 Sun: 11:00-17:00	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
York	Boots Uk Ltd	1 Kings Square YORK YO1 8BH	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun: 11:00-16:00	Mon: 09:00-14:00; 15:00-16:30 Tue: 09:00-14:00; 15:00-16:30 Wed: 09:00-14:00; 15:00-16:30 Thu: 09:00-14:00; 15:00-16:30 Fri: 09:00-14:00; 15:00-17:30 Sat: 09:00-14:00; 15:00-16:30 Sun:
York	Boots Uk Ltd	2 The Old School Front Street, Acomb YORK YO24 3BN	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-14:00; 15:00-17:30 Sat: 09:00-14:00; 15:00-17:30 Sun:	Mon: 09:00-14:00; 15:00-16:30 Tue: 09:00-14:00; 15:00-16:30 Wed: 09:00-14:00; 15:00-16:30 Thu: 09:00-14:00; 15:00-16:30 Fri: 09:00-14:00; 15:00-17:30 Sat: 09:00-14:00; 15:00-16:30 Sun:
York	Cohens Chemist	22 Gillygate YORK YO31 7EQ	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-12:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
York	Copmanthorpe Pharmacy	8 Copmanthorpe Shopping Centre YORK YO23 3GG	Mon: 09:00-12:45; 13:45-18:00 Tue: 09:00-12:45; 13:45-18:00 Wed: 09:00-12:45; 13:45-18:00 Thu: 09:00-12:45; 13:45-18:00 Fri: 09:00-12:45; 13:45-18:00 Sat: Sun:	Mon: 09:00-12:45; 13:45-18:00 Tue: 09:00-12:45; 13:45-18:00 Wed: 09:00-12:45; 13:45-18:00 Thu: 09:00-12:45; 13:45-18:00 Fri: 09:00-12:45; 13:45-18:00 Sat: Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
York	Dunnington Pharmacy	35 York Street Dunnington YORK YO19 5QT	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-13:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-12:30 Sun:	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-13:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: Sun:
York	Gale Farm Pharmacy	109-119 Front Street Acomb YORK YO24 4LZ	Mon: 08:30-18:00 Tue: 08:30-18:00 Wed: 08:30-18:00 Thu: 08:30-18:00 Fri: 08:30-18:00 Sat: 08:30-12:00 Sun:	Mon: 09:00-11:00; 12:00-18:00 Tue: 09:00-11:00; 12:00-18:00 Wed: 09:00-11:00; 12:00-18:00 Thu: 09:00-11:00; 12:00-18:00 Fri: 09:00-11:00; 12:00-18:00 Sat: Sun:
York	Haxby Group Pharmacy	Haxby & Wigginton Health Centre YORK YO32 2LL	Mon: 07:30-22:30 Tue: 07:30-22:30 Wed: 07:30-22:30 Thu: 07:30-22:30 Fri: 07:30-22:30 Sat: 07:30-22:30 Sun: 09:00-19:00	Mon: 07:30-22:30 Tue: 07:30-22:30 Wed: 07:30-22:30 Thu: 07:30-22:30 Fri: 07:30-22:30 Sat: 07:30-22:30 Sun: 09:00-19:00
York	Huntington Pharmacy	Huntington Surgery 1-3 North Lane Huntington YORK YO32 9RU	Mon: 07:00-23:00 Tue: 07:00-23:00 Wed: 07:00-23:00 Thu: 07:00-23:00 Fri: 07:00-23:00 Sat: 07:00-19:00 Sun: 09:00-17:00	Mon: 07:00-23:00 Tue: 07:00-23:00 Wed: 07:00-23:00 Thu: 07:00-23:00 Fri: 07:00-23:00 Sat: 07:00-19:00 Sun: 09:00-17:00
York	Lloyds Pharmacy	3 Intake Avenue YORK YO30 6HB	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
York	Lloyds Pharmacy	412 Huntington Road YORK YO31 9HU	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-14:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
York	Lloyds Pharmacy	101 - 103 Green Lane Acomb YORK YO24 4PS	Mon: 08:45-17:30 Tue: 08:45-17:30 Wed: 08:45-17:30 Thu: 08:45-17:30 Fri: 08:45-17:30 Sat: Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
York	Lloyds Pharmacy	3 Wains Grove Dringhouses YORK YO24 2TU	Mon: 08:30-17:30 Tue: 08:30-17:30 Wed: 08:30-17:30 Thu: 08:30-17:30 Fri: 08:30-17:30 Sat: Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
York	Lloyds Pharmacy	210 Fulford Road Fishergate YORK YO10 4DX	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
York	M Hepworth (Chemists) Ltd	101 Main Street Fulford YORK YO10 4PN	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
York	M J Roberts Chemists Ltd	8 Boroughbridge Road YORK YO26 5RU	Mon: 08:30-12:30; 13:30-18:00 Tue: 08:30-12:30; 13:30-18:00 Wed: 08:30-12:30; 13:30-17:30 Thu: 08:30-12:30; 13:30-17:30 Fri: 08:30-12:30; 13:30-17:30 Sat: Sun:	Mon: 08:30-12:30; 13:30-17:30 Tue: 08:30-12:30; 13:30-17:30 Wed: 08:30-12:30; 13:30-17:30 Thu: 08:30-12:30; 13:30-17:30 Fri: 08:30-12:30; 13:30-17:30 Sat: Sun:
York	Marsden Pharmacy	67 Front Street Acomb YORK YO24 3BR	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
York	Monkbar Pharmacy	3 Goodramgate YORK YO1 7LJ	Mon: 07:30-22:30 Tue: 07:30-22:30 Wed: 07:30-22:30 Thu: 07:30-22:30 Fri: 07:30-22:30 Sat: 07:30-22:30 Sun: 08:30-18:30	Mon: 07:30-22:30 Tue: 07:30-22:30 Wed: 07:30-22:30 Thu: 07:30-22:30 Fri: 07:30-22:30 Sat: 07:30-22:30 Sun: 08:30-18:30
York	Monkton Road Pharmacy	71 Monkton Road YORK YO31 9AL	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
York	Parkers Pharmacy	61 North Moor Road Huntington YORK YO32 9QN	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
York	PT & HJ Richardson	57 Blossom Street YORK YO24 1AZ	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
York	S K F Lo (Chemist) Ltd	151 Beckfield Lane YORK YO26 5PJ	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
York	Sainsbury's Supermarkets Ltd	Monks Cross Shopping Park Jockey Lane YORK YO32 9LG	Mon: 08:00-21:00 Tue: 08:00-21:00 Wed: 08:00-21:00 Thu: 08:00-21:00 Fri: 08:00-21:00 Sat: 08:00-21:00 Sun: 10:00-16:00	Mon: 09:00-12:00; 13:00-16:00 Tue: 09:00-12:00; 13:00-17:00 Wed: 09:00-12:00; 13:00-17:00 Thu: 09:00-12:00; 13:00-17:00 Fri: 09:00-12:00; 13:00-17:00 Sat: 09:00-12:00; 13:00-16:00 Sun:
York	Tesco Instore Pharmacy	Askham Bar Tadcaster Road YORK YO24 1LW	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00
York	Tesco Superstore	9 Stirling Road Clifton Moor YORK YO30 4XZ	Mon: 08:00-21:00 Tue: 08:00-21:00 Wed: 08:00-21:00 Thu: 08:00-21:00 Fri: 08:00-21:00 Sat: 08:00-21:00 Sun: 10:00-16:00	Mon: 09:00-13:00; 14:00-17:00 Tue: 09:00-13:00; 14:00-17:00 Wed: 09:00-13:00; 14:00-16:30 Thu: 09:00-13:00; 14:00-16:30 Fri: 09:00-13:00; 14:00-16:30 Sat: 09:00-13:00; 14:00-16:30 Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
York	The Priory Pharmacy	Priory Medical Centre YORK YO24 3WX	Mon: 08:00-23:00 Tue: 08:00-23:00 Wed: 08:00-23:00 Thu: 08:00-23:00 Fri: 08:00-23:00 Sat: 08:00-23:00 Sun: 10:00-20:00	Mon: 08:00-23:00 Tue: 08:00-23:00 Wed: 08:00-23:00 Thu: 08:00-23:00 Fri: 08:00-23:00 Sat: 08:00-23:00 Sun: 10:00-20:00
York	Tower Court Pharmacy Ltd	Unit 1, Tower Court Oakdale Road, Clifton Moor YORK YO30 4WL	Mon: 09:00-13:00; 13:30-18:00 Tue: 09:00-13:00; 13:30-18:00 Wed: 09:00-13:00; 13:30-18:00 Thu: 09:00-13:00; 13:30-18:00 Fri: 09:00-13:00; 13:30-18:00 Sat: Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
York	Upper Poppleton Pharmacy	The Green Upper Poppleton YORK YO26 6DF	Mon: 09:00-12:45; 14:00-18:00 Tue: 09:00-12:45; 14:00-18:00 Wed: 09:00-12:45; 14:00-18:00 Thu: 09:00-12:45 Fri: 09:00-12:45; 14:00-18:00 Sat: Sun:	Mon: 09:00-12:45; 14:00-18:00 Tue: 09:00-12:45; 14:00-18:00 Wed: 09:00-12:45; 14:00-18:00 Thu: 09:00-12:45 Fri: 09:00-12:45; 14:00-18:00 Sat: Sun:
York	Whitworth Chemists Ltd	275 Melrosegate YORK YO10 3SN	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-16:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
York	York Medical Pharmacy	199 Acomb Road Acomb YORK YO24 4HD	Mon: 08:30-17:45 Tue: 08:30-17:45 Wed: 08:30-17:45 Thu: 08:30-17:45 Fri: 08:30-17:45 Sat: Sun:	Mon: 08:30-17:45 Tue: 08:30-17:45 Wed: 08:30-17:45 Thu: 08:30-17:45 Fri: 08:30-17:45 Sat: Sun:

District	Trading Name	Address	Total Opening Hours	Core Opening Hours
York	Your Local Boots Pharmacy	153a Tang Hall Lane YORK YO10 3SD	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
York	Your Local Boots Pharmacy	25b The Village Strensall YORK YO32 5XR	Mon: 08:45-13:30; 14:00-18:00 Tue: 08:45-13:30; 14:00-18:00 Wed: 08:45-13:30; 14:00-18:00 Thu: 08:45-13:30; 14:00-18:00 Fri: 08:45-13:30; 14:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
York	Your Local Boots Pharmacy	68 The Village Haxby YORK YO32 2HX	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: 09:00-13:00; 13:30-17:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
York	Your Local Boots Pharmacy	66 Clarence Street YORK YO31 7EW	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:00 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
York	Your Local Boots Pharmacy	86 Clifton YORK YO30 6BA	Mon: 09:00-14:00; 14:30-17:30 Tue: 09:00-14:00; 14:30-17:30 Wed: 09:00-14:00; 14:30-17:30 Thu: 09:00-14:00; 14:30-17:30 Fri: 09:00-14:00; 14:30-17:30 Sat: 09:00-14:00; 14:30-17:00 Sun:	Mon: 09:00-13:30; 14:30-17:30 Tue: 09:00-13:30; 14:30-17:30 Wed: 09:00-13:30; 14:30-17:30 Thu: 09:00-13:30; 14:30-17:30 Fri: 09:00-13:30; 14:30-17:30 Sat: 09:00-11:30 Sun:

Appendix 3 - Community Pharmacies – by Clinical Commissioning Group (CCG)

Pharmacy details, including opening times, were correct according to information held by NHS England in February 2015.

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Airedale, Wharfedale and Craven	Your Local Boots Pharmacy	9 Station Road GRASSINGTON BD23 5LS	Mon: 09:00-13:00; 13:20-18:00 Tue: 09:00-13:00; 13:20-18:00 Wed: 09:00-13:00; 13:20-18:00 Thu: 09:00-13:00; 13:20-18:00 Fri: 09:00-13:00; 13:20-18:00 Sat: 09:00-12:30 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
NHS Airedale, Wharfedale and Craven	Sutton in Craven Pharmacy	47 Main Street Sutton-in-Craven KEIGHLEY BD20 7HX	Mon: 09:00-12:45; 14:15-18:30 Tue: 09:00-12:45; 14:15-18:30 Wed: 09:00-12:45; 14:15-18:30 Thu: 09:00-12:45; 14:15-18:30 Fri: 09:00-12:45; 14:15-18:30 Sat: 09:00-12:30 Sun:	Mon: 09:00-12:45; 14:15-18:30 Tue: 09:00-12:45; 14:15-18:30 Wed: 09:00-12:45; 14:15-18:30 Thu: 09:00-12:45; 14:15-18:30 Fri: 09:00-12:45; 14:45-18:30 Sat: 09:00-09:30 Sun:
NHS Airedale, Wharfedale and Craven	Cross Hills Pharmacy	Holme Lane Crosshills NR KEIGHLEY BD20 7LG	Mon: 08:00-23:00 Tue: 08:00-23:00 Wed: 08:00-23:00 Thu: 08:00-23:00 Fri: 08:00-23:00 Sat: 08:00-23:00 Sun: 10:00-20:00	Mon: 08:00-23:00 Tue: 08:00-23:00 Wed: 08:00-23:00 Thu: 08:00-23:00 Fri: 08:00-23:00 Sat: 08:00-23:00 Sun: 10:00-20:00
NHS Airedale, Wharfedale and Craven	Your Local Boots Pharmacy	12 Main Street Crosshills NR KEIGHLEY BD20 8TB	Mon: 08:45-13:30; 14:30-18:30 Tue: 08:45-13:30; 14:30-18:30 Wed: 08:45-13:30; 14:30-18:30 Thu: 08:45-13:30; 14:30-18:30 Fri: 08:45-13:30; 14:30-18:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:30; 14:30-18:00 Tue: 09:00-13:30; 14:30-18:00 Wed: 09:00-13:30; 14:30-18:00 Thu: 09:00-13:30; 14:30-18:00 Fri: 09:00-13:30; 14:30-18:00 Sat: Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Airedale, Wharfedale and Craven	Your Local Boots Pharmacy	36 Market Place SETTLE BD24 9ED	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-17:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00 Sun:
NHS Airedale, Wharfedale and Craven	Boots Pharmacy The Medical Centre	The Medical Centre Coach Street SKIPTON BD23 1LQ	Mon: 08:15-12:45; 13:45-18:30 Tue: 08:15-12:45; 13:45-18:30 Wed: 08:15-12:45; 13:45-18:30 Thu: 08:15-12:45; 13:45-18:30 Fri: 08:15-12:45; 13:45-18:30 Sat: Sun:	Mon: 09:00-12:45; 13:45-18:00 Tue: 09:00-12:45; 13:45-18:00 Wed: 09:00-12:45; 13:45-18:00 Thu: 09:00-12:45; 13:45-18:00 Fri: 09:00-12:45; 13:45-18:00 Sat: Sun:
NHS Airedale, Wharfedale and Craven	Carleton In Craven Pharmacy	Old Cobblers Cottage West Road, Carleton In Craven SKIPTON BD23 3DT	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-12:30 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
NHS Airedale, Wharfedale and Craven	Lloyds Pharmacy	93 Caroline Square SKIPTON BD23 1DA	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun:	Mon: 09:00-12:30; 14:00-17:30 Tue: 09:00-12:30; 14:00-17:30 Wed: 09:00-12:30; 14:00-17:30 Thu: 09:00-12:30; 14:00-17:30 Fri: 09:00-12:30; 14:00-17:30 Sat: 09:00-12:30; 14:00-15:30 Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Airedale, Wharfedale and Craven	Lloyds Pharmacy	36 Newmarket Street SKIPTON BD23 2JB	Mon: 08:30-18:00 Tue: 08:30-18:00 Wed: 08:30-20:00 Thu: 08:30-18:00 Fri: 08:30-18:00 Sat: 09:00-11:30 Sun:	Mon: 08:30-12:00; 14:00-18:00 Tue: 09:00-12:30; 14:00-18:00 Wed: 09:00-12:30; 14:00-18:00 Thu: 09:00-12:30; 14:00-18:00 Fri: 09:00-12:30; 14:00-18:00 Sat: 09:00-11:30 Sun:
NHS Airedale, Wharfedale and Craven	Naylors Ltd	36 High Street Gargrave SKIPTON BD23 3RB	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-12:30; 14:00-17:30 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
NHS Airedale, Wharfedale and Craven	Tesco Superstore	Craven Street SKIPTON BD23 2AG	Mon: 09:00-20:00 Tue: 09:00-20:00 Wed: 09:00-20:00 Thu: 09:00-20:00 Fri: 09:00-20:00 Sat: 09:00-20:00 Sun: 10:00-16:00	Mon: 09:00-13:00; 14:00-16:30 Tue: 09:00-13:00; 14:00-16:30 Wed: 09:00-13:00; 14:00-16:30 Thu: 09:00-13:00; 14:00-16:30 Fri: 09:00-13:00; 14:00-17:00 Sat: 09:00-13:00; 14:00-17:00 Sun:
NHS Cumbria	The Co-operative Pharmacy	Stafford House Main Street HIGH BENTHAM LA2 7HL	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-12:30; 13:30-18:00 Tue: 09:00-12:30; 13:30-18:00 Wed: 09:00-12:30; 13:30-18:00 Thu: 09:00-12:30; 15:30-18:00 Fri: 09:00-12:30; 13:30-18:00 Sat: 09:30-11:30 Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Cumbria	Ingleton Pharmacy	Bank View 37 Main Street INGLETON LA6 3EH	Mon: 09:00-12:30; 13:30-17:30 Tue: 09:00-12:30; 13:30-17:30 Wed: 09:00-12:30; 13:30-17:30 Thu: 09:00-12:30 Fri: 09:00-12:30; 13:30-17:30 Sat: 09:00-12:30; 13:30-16:30 Sun:	Mon: 09:00-12:30; 13:30-17:30 Tue: 09:00-12:30; 13:30-17:30 Wed: 09:00-12:30; 13:30-17:30 Thu: 09:00-12:30 Fri: 09:00-12:30; 13:30-17:30 Sat: 09:00-12:30; 13:30-16:30 Sun:
NHS Hambleton, Richmondshire and Whitby	Bedale Pharmacy	31 North End Market Place BEDALE DL8 1AF	Mon: 09:00-13:00; 13:20-17:30 Tue: 09:00-13:00; 13:20-17:30 Wed: 09:00-13:00; 13:20-17:30 Thu: 09:00-13:00; 13:20-17:30 Fri: 09:00-13:00; 13:20-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
NHS Hambleton, Richmondshire and Whitby	Mills Chemists	20 North End BEDALE DL8 1AB	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-12:30; 13:00-17:30 Tue: 09:00-12:30; 13:00-17:30 Wed: 09:00-12:30; 13:00-17:30 Thu: 09:00-12:30; 13:00-17:30 Fri: 09:00-12:30; 13:00-17:30 Sat: Sun:
NHS Hambleton, Richmondshire and Whitby	Boots UK Ltd	Unit2, Richmondshire Walk CATTERICK GARRISON DL9 3EN	Mon: 08:30-13:00; 14:00-17:30 Tue: 08:30-13:00; 14:00-17:30 Wed: 08:30-13:00; 14:00-17:30 Thu: 08:30-13:00; 14:00-17:30 Fri: 08:30-13:00; 14:00-17:30 Sat: 08:30-13:00; 14:00-17:30 Sun:	Mon: 09:00-13:00; 14:00-17:00 Tue: 09:00-13:00; 14:00-17:00 Wed: 09:00-13:00; 14:00-17:00 Thu: 09:00-13:00; 14:00-17:00 Fri: 09:00-13:00; 14:00-17:00 Sat: 09:00-13:00; 14:00-15:00 Sun:
NHS Hambleton, Richmondshire and Whitby	Tesco Superstore	Gough Road CATTERICK GARRISON DL9 3EN	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Hambleton, Richmondshire and Whitby	Your Local Boots Pharmacy	19-20 The Broadway CATTERICK GARRISON DL9 4RF	Mon: 09:00-17:30 Tue: 09:00-18:00 Wed: 09:00-17:30 Thu: 09:00-18:00 Fri: 09:00-17:30 Sat: 10:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 10:00-12:30 Sun:
NHS Hambleton, Richmondshire and Whitby	The Village Pharmacy	33 High Street CATTERICK VILLAGE DL10 7LL	Mon: 09:00-18:00 Tue: 09:00-17:30 Wed: 08:30-18:00 Thu: 09:00-17:30 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:30-12:00 Sun:
NHS Hambleton, Richmondshire and Whitby	Coopers Chemist Gt Ayton Ltd	131 High Street GREAT AYTON TS9 6BW	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:00 Sun:	Mon: 09:00-16:00 Tue: 09:00-16:00 Wed: 09:00-16:00 Thu: 09:00-16:00 Fri: 09:00-16:00 Sat: 09:00-14:00 Sun:
NHS Hambleton, Richmondshire and Whitby	J & E Hogg Ltd	Market Place HAWES DL8 3QX	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
NHS Hambleton, Richmondshire and Whitby	J S Langhorne	7 Market Place LEYBURN DL8 5BG	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-14:00 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-13:00; 14:00-16:00 Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Hambleton, Richmondshire and Whitby	Boots UK Ltd	203-204 High Street NORTHALLERTON DL7 8LW	Mon: 09:00-13:30; 14:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-13:30; 14:00-17:30 Fri: 09:00-13:30; 14:00-17:30 Sat: 09:00-17:30 Sun: 10:30-13:00; 13:30-16:00	Mon: 09:00-13:30; 14:30-17:30 Tue: 09:00-13:30; 14:30-17:30 Wed: 09:00-13:30; 14:30-17:30 Thu: 09:00-13:30; 14:30-17:30 Fri: 09:00-13:30; 14:30-17:30 Sat: 09:00-11:30 Sun:
NHS Hambleton, Richmondshire and Whitby	Mowbray House Surgery	Malpas Road NORTHALLERTON DL7 8FW	Mon: 08:30-17:30 Tue: 08:30-17:30 Wed: 08:30-17:30 Thu: 08:30-17:30 Fri: 08:30-17:30 Sat: 09:00-14:00 Sun:	Mon: 08:45-13:00; 14:00-17:30 Tue: 08:45-13:00; 14:00-17:30 Wed: 08:45-13:00; 14:00-17:30 Thu: 08:45-13:00; 14:00-17:30 Fri: 08:45-13:00; 14:00-17:30 Sat: 09:00-10:15 Sun:
NHS Hambleton, Richmondshire and Whitby	Tesco Superstore	East Road NORTHALLERTON DL6 1NP	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00
NHS Hambleton, Richmondshire and Whitby	The Co-operative Pharmacy	Boroughbridge Road NORTHALLERTON DL7 8BN	Mon: 08:45-18:30 Tue: 08:45-18:30 Wed: 08:45-18:30 Thu: 08:45-18:30 Fri: 08:45-18:30 Sat: 09:00-12:30 Sun:	Mon: 08:45-12:45; 14:30-18:30 Tue: 08:45-12:45; 14:30-18:30 Wed: 08:45-12:45; 14:30-18:30 Thu: 08:45-12:45; 14:30-18:30 Fri: 08:45-12:45; 14:30-18:30 Sat: Sun:
NHS Hambleton, Richmondshire and Whitby	Boots UK Ltd	15-16 Market Place RICHMOND DL10 4PX	Mon: 09:00-12:00; 13:00-17:30 Tue: 09:00-12:00; 13:00-17:30 Wed: 09:00-12:00; 13:00-17:30 Thu: 09:00-12:00; 13:00-17:30 Fri: 09:00-12:00; 13:00-17:30 Sat: 09:00-12:00; 13:00-17:30 Sun:	Mon: 09:00-12:00; 13:00-17:00 Tue: 09:00-12:00; 13:00-17:00 Wed: 09:00-12:00; 13:00-17:00 Thu: 09:00-12:00; 13:00-17:00 Fri: 09:00-12:00; 13:00-17:00 Sat: 09:00-12:00; 13:00-15:00 Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Hambleton, Richmondshire and Whitby	Richmond Pharmacy	20 King Street RICHMOND DL10 4HP	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun: 11:00-12:00	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 10:00-12:30 Sun:
NHS Hambleton, Richmondshire and Whitby	Your Local Boots Pharmacy	10 High Street STOKESLEY TS9 5DQ	Mon: 08:00-13:00; 14:00-18:00 Tue: 08:30-13:00; 14:00-18:00 Wed: 08:30-13:00; 14:00-18:00 Thu: 08:30-13:00; 14:00-18:00 Fri: 08:30-13:00; 14:00-18:00 Sat: 09:00-13:00; 14:00-17:00 Sun:	Mon: 09:00-13:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00 Sun:
NHS Hambleton, Richmondshire and Whitby	Boots UK Ltd	1 Chapel Street THIRSK YO7 1LU	Mon: 08:30-12:00; 13:00-18:30 Tue: 08:30-12:00; 13:00-18:30 Wed: 08:30-12:00; 13:00-18:30 Thu: 08:30-12:00; 13:00-18:30 Fri: 08:30-12:00; 13:00-18:30 Sat: Sun:	Mon: 08:30-12:00; 13:00-17:30 Tue: 08:30-12:00; 13:00-17:30 Wed: 08:30-12:00; 13:00-17:30 Thu: 08:30-12:00; 13:00-17:30 Fri: 08:30-12:00; 13:00-17:30 Sat: Sun:
NHS Hambleton, Richmondshire and Whitby	Boots UK Ltd	28 Market Place THIRSK YO7 1LB	Mon: 09:00-14:00; 14:30-17:30 Tue: 09:00-14:00; 14:30-17:30 Wed: 09:00-14:00; 14:30-17:30 Thu: 09:00-14:00; 14:30-17:30 Fri: 09:00-14:00; 14:30-17:30 Sat: 09:30-14:00; 14:30-17:30 Sun:	Mon: 09:30-14:00; 15:00-17:30 Tue: 09:30-14:00; 15:00-17:30 Wed: 09:30-14:00; 15:00-17:30 Thu: 09:30-14:00; 15:00-17:30 Fri: 09:30-14:00; 15:00-17:30 Sat: 09:30-14:00; 15:00-15:30 Sun:
NHS Hambleton, Richmondshire and Whitby	Tesco Superstore	Station Road THIRSK YO7 1PZ	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Hambleton, Richmondshire and Whitby	Boots UK Ltd	64 Baxtergate WHITBY YO21 1BL	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun:	Mon: 09:30-14:00; 15:00-17:30 Tue: 09:30-14:00; 15:00-17:30 Wed: 09:30-14:00; 15:00-17:30 Thu: 09:30-14:00; 15:00-17:30 Fri: 09:30-14:00; 15:00-17:30 Sat: 09:30-14:00; 15:00-15:30 Sun:
NHS Hambleton, Richmondshire and Whitby	Day Lewis PLC	61 Baxtergate WHITBY YO21 1BL	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
NHS Hambleton, Richmondshire and Whitby	Rowlands Pharmacy	Rievaulx Road WHITBY YO21 1SD	Mon: 08:30-18:00 Tue: 08:30-20:00 Wed: 08:30-18:00 Thu: 08:30-20:00 Fri: 08:30-18:00 Sat: Sun: 10:00-16:00	Mon: 08:30-12:30; 16:00-18:00 Tue: 08:30-12:30; 16:00-20:00 Wed: 08:30-12:30; 16:00-18:00 Thu: 08:30-12:30; 16:00-20:00 Fri: 08:30-12:30; 16:00-18:00 Sat: Sun: 10:00-16:00
NHS Hambleton, Richmondshire and Whitby	Your Local Boots Pharmacy	14 Skinner Street WHITBY YO21 3AJ	Mon: 09:00-13:30; 14:30-17:30 Tue: 09:00-13:30; 14:30-17:30 Wed: 09:00-13:30; 14:30-17:30 Thu: 09:00-13:30; 14:30-17:30 Fri: 09:00-13:30; 14:30-17:30 Sat: 09:00-12:00; 13:00-17:00 Sun:	Mon: 09:00-13:30; 14:30-17:30 Tue: 09:00-13:30; 14:30-17:30 Wed: 09:00-13:30; 14:30-17:30 Thu: 09:00-13:30; 14:30-17:30 Fri: 09:00-13:30; 14:30-17:30 Sat: 09:00-11:30 Sun:
NHS Harrogate and Rural District	DH & G Treharne Ltd	26 High Street BOROUGHBRIDGE YO51 9AW	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-17:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:00 Wed: 09:00-13:00; 14:00-17:00 Thu: 09:00-13:00; 14:00-17:00 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-13:00 Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Harrogate and Rural District	Asda Superstore	Bower Road HARROGATE HG1 5DE	Mon: 08:30-22:00 Tue: 08:30-22:00 Wed: 08:30-22:00 Thu: 08:30-22:00 Fri: 08:30-22:00 Sat: 08:30-22:00 Sun: 10:00-14:00	Mon: 08:30-22:00 Tue: 08:30-22:00 Wed: 08:30-22:00 Thu: 08:30-22:00 Fri: 08:30-22:00 Sat: 08:30-22:00 Sun: 10:00-14:00
NHS Harrogate and Rural District	Boots UK Ltd	26-28 Cambridge Street HARROGATE HG1 1RX	Mon: 08:30-17:45 Tue: 08:30-17:45 Wed: 08:30-17:45 Thu: 08:30-17:45 Fri: 08:30-17:45 Sat: 08:30-17:45 Sun: 10:30-16:30	Mon: 09:30-14:00; 15:00-17:00 Tue: 09:30-14:00; 15:00-17:00 Wed: 09:30-14:00; 15:00-17:00 Thu: 09:30-14:00; 15:00-17:30 Fri: 09:30-14:00; 15:00-17:30 Sat: 09:30-14:00; 15:00-17:00 Sun:
NHS Harrogate and Rural District	Cohens Chemist	Mowbray Square Medical Centre Myrtle Square HARROGATE HG1 5AR	Mon: 08:00-18:30 Tue: 08:00-18:30 Wed: 08:00-18:30 Thu: 08:00-18:30 Fri: 08:00-18:30 Sat: Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
NHS Harrogate and Rural District	Cohens Chemist	52-54 King Edwards Drive HARROGATE HG1 4HL	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
NHS Harrogate and Rural District	Kings Road Pharmacy	28-30 Kings Road HARROGATE HG1 5JP	Mon: 08:00-18:30 Tue: 08:00-18:30 Wed: 08:00-18:30 Thu: 08:00-18:30 Fri: 08:00-18:30 Sat: 08:00-12:00 Sun:	Mon: 08:30-11:00; 13:30-18:30 Tue: 08:30-11:00; 13:30-18:30 Wed: 08:30-11:00; 13:30-18:30 Thu: 08:30-11:00; 13:30-18:30 Fri: 08:30-11:00; 13:30-18:30 Sat: 09:00-11:30 Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Harrogate and Rural District	Lloyds Pharmacy	156 Kings Road HARROGATE HG1 5HY	Mon: 08:30-18:30 Tue: 08:30-18:30 Wed: 08:30-18:30 Thu: 08:30-18:30 Fri: 08:30-18:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:30-18:00 Tue: 09:00-13:00; 14:30-18:00 Wed: 09:00-13:00; 14:30-18:00 Thu: 09:00-13:00; 14:30-18:00 Fri: 09:00-13:00; 14:30-18:00 Sat: 10:00-12:30 Sun:
NHS Harrogate and Rural District	Lloyds Pharmacy	54a High Street, Starbeck Starbeck HARROGATE HG2 7JE	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
NHS Harrogate and Rural District	Lloyds Pharmacy	123 Knaresborough Road HARROGATE HG2 7LY	Mon: 08:30-18:00 Tue: 08:30-18:00 Wed: 08:30-18:00 Thu: 08:30-18:00 Fri: 08:30-18:00 Sat: 09:00-12:30 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
NHS Harrogate and Rural District	RS Marsden Chemist Ltd	85 Leeds Road HARROGATE HG2 8BE	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
NHS Harrogate and Rural District	Sainsbury's Pharmacy	Wetherby Road HARROGATE HG2 8QZ	Mon: 08:00-22:00 Tue: 08:00-22:00 Wed: 08:00-22:00 Thu: 08:00-22:00 Fri: 08:00-22:00 Sat: 08:00-22:00 Sun: 10:00-16:00	Mon: 09:00-12:00; 13:00-16:00 Tue: 09:00-12:00; 13:00-16:00 Wed: 09:00-12:00; 13:00-16:00 Thu: 09:00-12:00; 13:00-16:00 Fri: 09:00-12:00; 13:00-16:00 Sat: 09:00-13:00 Sun: 10:00-16:00

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Harrogate and Rural District	Superdrug Pharmacy	Unit One Nidderdale Lane 4-6 Cambridge Road HARROGATE HG1 1NS	Mon: 08:30-17:30 Tue: 08:30-17:30 Wed: 08:30-17:30 Thu: 08:30-17:30 Fri: 08:30-17:30 Sat: 09:00-13:30; 14:30-17:30 Sun:	Mon: 09:00-13:00; 15:00-17:30 Tue: 09:00-13:00; 15:00-17:30 Wed: 09:00-13:00; 15:00-17:30 Thu: 09:00-13:00; 15:00-17:30 Fri: 09:00-13:00; 15:00-17:30 Sat: 09:00-13:30; 14:30-17:30 Sun:
NHS Harrogate and Rural District	The Co-operative Pharmacy	111 Cold Bath Road HARROGATE HG2 0NU	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-12:00 Sun:
NHS Harrogate and Rural District	The Co-operative Pharmacy	Kingswood Medical Centre 14 Wetherby Road HARROGATE HG2 7SA	Mon: 06:30-22:00 Tue: 06:30-22:00 Wed: 06:30-22:00 Thu: 06:30-22:00 Fri: 06:30-22:00 Sat: 08:00-22:00 Sun: 09:30-18:00	Mon: 06:30-22:00 Tue: 06:30-22:00 Wed: 06:30-22:00 Thu: 06:30-22:00 Fri: 06:30-22:00 Sat: 08:00-22:00 Sun: 09:30-18:00
NHS Harrogate and Rural District	Your Local Boots	NYCS Store Jennyfield Drive HARROGATE HG3 2XQ	Mon: 09:00-13:00; 14:00-18:30 Tue: 09:00-13:00; 14:00-18:30 Wed: 09:00-13:00; 14:00-18:30 Thu: 09:00-13:00; 14:00-18:30 Fri: 09:00-13:00; 14:00-18:30 Sat: 09:00-13:00; 14:00-17:00 Sun:	Mon: 09:00-13:00; 14:00-16:00 Tue: 09:00-13:00; 14:00-16:00 Wed: 09:00-13:00; 14:00-17:00 Thu: 09:00-13:00; 14:00-17:00 Fri: 09:00-13:00; 14:00-17:00 Sat: 09:00-13:00; 14:00-17:00 Sun:
NHS Harrogate and Rural District	Boots Pharmacy	Unit 4a St James Retail Park Grimbald Crag Road KNARESBOROUGH HG5 8PZ	Mon: 08:00-24:00 Tue: 08:00-24:00 Wed: 08:00-24:00 Thu: 08:00-24:00 Fri: 08:00-24:00 Sat: 09:00-23:00 Sun: 10:00-16:00	Mon: 08:00-24:00 Tue: 08:00-24:00 Wed: 08:00-24:00 Thu: 08:00-24:00 Fri: 08:00-24:00 Sat: 09:00-23:00 Sun: 10:00-16:00

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Harrogate and Rural District	Boots UK Ltd	22-28 Market Place KNARESBOROUGH HG5 8AG	Mon: 08:30-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 08:30-13:00; 14:00-17:30 Thu: 08:30-13:00; 14:00-17:30 Fri: 08:30-13:00; 14:00-17:30 Sat: 08:30-13:00; 14:00-17:30 Sun:	Mon: 09:00-13:00; 14:00-17:00 Tue: 09:00-13:00; 14:00-17:00 Wed: 09:00-13:00; 14:00-17:00 Thu: 09:00-13:00; 14:00-17:00 Fri: 09:00-13:00; 14:00-17:00 Sat: 09:00-13:00; 14:00-15:00 Sun:
NHS Harrogate and Rural District	Lloyds Pharmacy	34 High Street KNARESBOROUGH HG5 0EQ	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun:	Mon: 09:00-11:30; 13:30-17:30 Tue: 09:00-11:30; 13:30-17:30 Wed: 09:00-11:30; 13:30-17:30 Thu: 09:00-11:30; 13:30-17:30 Fri: 09:00-11:30; 13:30-17:30 Sat: 09:00-11:30; 12:30-17:30 Sun:
NHS Harrogate and Rural District	PR Naylor Chemist Ltd	40-42 Market Place KNARESBOROUGH HG5 8AG	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: Sun:	Mon: 09:30-17:30 Tue: 09:30-17:30 Wed: 09:30-17:30 Thu: 09:30-17:30 Fri: 09:30-17:30 Sat: Sun:
NHS Harrogate and Rural District	Your Local Boots Pharmacy	NYCS Stores Ltd Chain Lane KNARESBOROUGH HG5 0DH	Mon: 09:00-13:30; 14:00-18:30 Tue: 09:00-13:00; 14:00-18:30 Wed: 09:00-13:00; 14:00-18:30 Thu: 09:00-13:00; 14:00-18:30 Fri: 09:00-13:00; 14:00-18:30 Sat: 09:00-13:00; 14:00-17:00 Sun:	Mon: 14:00-15:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00; 14:00-17:00 Sun:
NHS Harrogate and Rural District	Pateley Bridge Pharmacy	25 High Street PATELEY BRIDGE HG3 5AL	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-17:00 Sun:	Mon: 09:00-12:30; 13:30-17:00 Tue: 09:00-12:30; 13:30-17:00 Wed: 09:00-12:30; 13:30-17:00 Thu: 09:00-13:00 Fri: 09:00-12:30; 13:30-17:00 Sat: 09:00-17:00 Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Harrogate and Rural District	Boots UK Ltd	27 Market Place West RIPON HG4 1BN	Mon: 09:00-11:30; 12:30-17:30 Tue: 09:00-11:30; 12:30-17:30 Wed: 09:00-11:30; 12:30-17:30 Thu: 09:00-11:30; 12:30-17:30 Fri: 09:00-11:30; 12:30-17:30 Sat: 09:00-14:00; 15:00-17:30 Sun:	Mon: 09:30-11:30; 12:30-17:00 Tue: 09:00-11:30; 12:30-17:00 Wed: 09:00-11:30; 12:30-17:00 Thu: 09:00-11:30; 12:30-17:00 Fri: 09:00-11:30; 12:30-17:00 Sat: 09:30-14:00; 15:00-16:00 Sun:
NHS Harrogate and Rural District	Marsden Pharmacy	81 North Street RIPON HG4 1DP	Mon: 08:30-13:00; 14:00-17:30 Tue: 08:30-13:00; 14:00-17:30 Wed: 08:30-13:00; 14:00-17:30 Thu: 08:30-13:00; 14:00-17:30 Fri: 08:30-13:00; 14:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:00 Tue: 09:00-13:00; 14:00-17:00 Wed: 09:00-13:00; 14:00-17:00 Thu: 08:30-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:00 Sat: 09:00-13:00 Sun:
NHS Harrogate and Rural District	Morrisons Pharmacy	Harrogate Road Quarry Moor RIPON HG4 2SB	Mon: 09:00-20:00 Tue: 09:00-20:00 Wed: 09:00-20:00 Thu: 09:00-21:00 Fri: 09:00-21:00 Sat: 09:00-20:00 Sun: 11:00-14:00	Mon: 09:00-13:00; 14:00-17:00 Tue: 09:00-13:00; 14:00-17:00 Wed: 09:00-13:00; 14:00-17:00 Thu: 09:00-13:00; 14:00-17:00 Fri: 09:00-13:00; 14:00-17:00 Sat: 09:00-13:00; 14:00-15:00 Sun:
NHS Harrogate and Rural District	R S Marsden (Chemist) Ltd	11 Market Place Masham RIPON HG4 4DZ	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00 Fri: 09:00-13:00; 13:30-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00 Fri: 09:00-13:00; 13:30-17:30 Sat: 09:00-13:00 Sun:
NHS Harrogate and Rural District	Spa Pharmacy	4 Westgate RIPON HG4 2AT	Mon: 08:45-12:30; 12:30-17:30 Tue: 08:45-12:30; 12:30-17:30 Wed: 08:45-12:30; 12:30-17:30 Thu: 08:45-12:30; 12:30-17:30 Fri: 08:45-12:30; 12:30-17:30 Sat: 08:45-13:00 Sun:	Mon: 09:00-12:30; 13:00-17:30 Tue: 09:00-12:30; 13:00-17:30 Wed: 09:00-12:30; 13:00-17:30 Thu: 09:00-12:30; 13:00-17:30 Fri: 09:00-12:30; 13:00-17:30 Sat: Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Scarborough and Ryedale	Filey Bay Pharmacy	Sunrise Drive, The Bay FILEY YO14 9GE	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
NHS Scarborough and Ryedale	Your Local Boots Pharmacy	32 Belle Vue Street FILEY YO14 9HY	Mon: 09:00-12:30; 13:30-17:30 Tue: 09:00-12:30; 13:30-17:30 Wed: 09:00-12:30; 13:30-17:30 Thu: 09:00-12:30; 13:30-17:30 Fri: 09:00-12:30; 13:30-17:30 Sat: 09:00-12:30; 13:30-17:30 Sun:	Mon: 09:00-12:30; 13:30-17:30 Tue: 09:00-12:30; 13:30-17:30 Wed: 09:00-12:30; 13:30-17:30 Thu: 09:00-12:30; 13:30-17:30 Fri: 09:00-12:30; 13:30-17:30 Sat: 09:00-11:30 Sun:
NHS Scarborough and Ryedale	Your Local Boots Pharmacy	2 Murray Street FILEY YO14 9DG	Mon: 08:30-12:00; 13:00-18:00 Tue: 08:30-12:00; 13:00-18:00 Wed: 08:30-12:00; 13:00-18:00 Thu: 08:30-12:00; 13:00-18:00 Fri: 08:30-12:00; 13:00-18:00 Sat: 09:00-12:00; 13:00-17:30 Sun:	Mon: 09:00-12:00; 13:00-17:30 Tue: 09:00-12:00; 13:00-17:30 Wed: 09:00-12:00; 13:00-14:00 Thu: 09:00-12:00; 13:00-17:30 Fri: 09:00-12:00; 13:00-17:30 Sat: 09:00-12:00; 13:00-16:00 Sun:
NHS Scarborough and Ryedale	Your Local Boots Pharmacy	32-34 Murray Street FILEY YO14 9DG	Mon: 09:00-12:00; 13:00-17:30 Tue: 09:00-12:00; 13:00-17:30 Wed: 09:00-12:00; 13:00-17:30 Thu: 09:00-12:00; 13:00-17:30 Fri: 09:00-12:00; 13:00-17:30 Sat: 09:00-12:00; 13:00-17:30 Sun: 13:00-16:00* *from Easter through to the first weekend in September.	Mon: 09:00-12:00; 13:00-17:30 Tue: 09:00-12:00; 13:00-17:30 Wed: 09:00-12:00; 13:00-17:30 Thu: 09:00-12:00; 13:00-17:30 Fri: 09:00-12:00; 13:00-17:30 Sat: 09:00-11:30 Sun:
NHS Scarborough and Ryedale	Your Local Boots Pharmacy	24A Bridlington Street HUNMANBY YO14 0JR	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-17:00 Sun:	Mon: 09:00-12:30; 13:30-17:30 Tue: 09:00-12:30; 13:30-17:30 Wed: 09:00-12:30; 13:30-17:30 Thu: 09:00-12:30; 13:30-17:30 Fri: 09:00-12:30; 13:30-17:30 Sat: 09:00-11:30 Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Scarborough and Ryedale	Beecham Pharmacy	33 Commercial Street Norton MALTON YO17 9HX	Mon: 09:00-13:00; 14:15-17:30 Tue: 09:00-13:00; 14:15-17:30 Wed: 09:00-13:00; 14:15-17:30 Thu: 09:00-13:00; 14:15-17:30 Fri: 09:00-13:00; 14:15-17:30 Sat: 09:00-13:00; 14:15-17:30 Sun:	Mon: 09:00-13:00; 14:15-17:30 Tue: 09:00-13:00; 14:15-17:30 Wed: 09:00-13:00; 14:15-17:30 Thu: 09:00-13:00; 14:15-17:30 Fri: 09:00-13:00; 14:15-17:30 Sat: 09:00-12:45 Sun:
NHS Scarborough and Ryedale	Beecham Pharmacy	Derwent Surgery Norton Road MALTON YO17 9RF	Mon: 08:30-13:00; 14:15-17:30 Tue: 08:30-13:00; 14:15-17:30 Wed: 08:30-13:00; 14:15-17:30 Thu: 08:30-13:00; 14:15-17:30 Fri: 08:30-13:00; 14:15-17:30 Sat: 08:30-13:00 Sun:	Mon: 09:00-13:00; 14:15-17:30 Tue: 09:00-13:00; 14:15-17:30 Wed: 09:00-13:00; 14:15-17:30 Thu: 09:00-13:00; 14:15-17:30 Fri: 09:00-13:00; 14:15-17:30 Sat: 09:00-12:45 Sun:
NHS Scarborough and Ryedale	Boots UK Ltd	31-33 Wheelgate MALTON YO17 7HT	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun:	Mon: 09:30-12:30; 13:30-17:30 Tue: 09:30-12:30; 13:30-17:30 Wed: 09:30-12:30; 13:30-17:30 Thu: 09:30-12:30; 13:30-17:30 Fri: 09:30-12:30; 13:30-17:30 Sat: 09:30-12:30; 13:30-15:30 Sun:
NHS Scarborough and Ryedale	Lloyds Pharmacy	24 Market Place MALTON YO17 7LX	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-16:00 Sun:	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-16:00 Sun:
NHS Scarborough and Ryedale	Aston Chemists Ltd	9-11 Gladstone Road SCARBOROUGH YO12 7BQ	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:30-12:30 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 10:00-12:30 Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Scarborough and Ryedale	Aston Pharmacy	15 Ramshill Road SCARBOROUGH YO11 2LN	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00; 14:00-17:30 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
NHS Scarborough and Ryedale	Aston Pharmacy	91 Falsgrave Road SCARBOROUGH YO12 5EG	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
NHS Scarborough and Ryedale	Barrowcliff Pharmacy	24 Wreyfield Drive Newby SCARBOROUGH YO12 6NN	Mon: 09:00-17:45 Tue: 09:00-17:45 Wed: 09:00-17:45 Thu: 09:00-17:45 Fri: 09:00-17:45 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:45-17:45 Tue: 09:00-13:00; 13:45-17:45 Wed: 09:00-13:00; 13:45-17:45 Thu: 09:00-13:00; 13:45-17:45 Fri: 09:00-13:00; 13:45-17:45 Sat: Sun:
NHS Scarborough and Ryedale	Boots UK Ltd	100-101 Westborough SCARBOROUGH YO11 1LN	Mon: 08:30-12:30; 13:30-17:30 Tue: 08:30-12:30; 13:30-17:30 Wed: 08:30-12:30; 13:30-17:30 Thu: 08:30-12:30; 13:30-17:30 Fri: 08:30-12:30; 13:30-17:30 Sat: 08:30-12:30; 13:30-17:30 Sun: 10:30-16:30	Mon: 09:30-12:30; 13:30-17:30 Tue: 09:30-12:30; 13:30-17:30 Wed: 09:30-12:30; 13:30-17:30 Thu: 09:30-12:30; 13:30-17:30 Fri: 09:30-12:30; 13:30-17:30 Sat: 09:30-12:30; 13:30-15:30 Sun:
NHS Scarborough and Ryedale	Cohens Chemist	1a Belgrave Crescent SCARBOROUGH YO11 1UB	Mon: 09:00-23:00 Tue: 08:00-23:00 Wed: 08:00-23:00 Thu: 08:00-23:00 Fri: 08:00-23:00 Sat: 09:00-23:00 Sun: 11:00-23:00	Mon: 09:00-23:00 Tue: 08:00-23:00 Wed: 08:00-23:00 Thu: 08:00-23:00 Fri: 08:00-23:00 Sat: 09:00-23:00 Sun: 11:00-23:00

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Scarborough and Ryedale	Delivery Chemist Ltd	35 Main Street East Ayton SCARBOROUGH YO13 9HL	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
NHS Scarborough and Ryedale	J Sainsbury Store	Falsgrave Road SCARBOROUGH YO12 5EA	Mon: 07:00-23:00 Tue: 07:00-23:00 Wed: 07:00-23:00 Thu: 07:00-23:00 Fri: 07:00-23:00 Sat: 07:00-22:00 Sun: 10:00-16:00	Mon: 08:00-23:00 Tue: 07:00-23:00 Wed: 07:00-23:00 Thu: 07:00-23:00 Fri: 07:00-23:00 Sat: 07:00-22:00 Sun: 10:00-16:00
NHS Scarborough and Ryedale	JG Squire Ltd	54 Falsgrave Road SCARBOROUGH YO12 5AX	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun
NHS Scarborough and Ryedale	Lincoln Co-Op Chemists Ltd	448 Scalby Road SCARBOROUGH YO12 6EE	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:45 Sat: 09:00-12:30 Sun:	Mon: 09:00-13:00; 14:15-17:30 Tue: 09:00-13:00; 14:15-17:30 Wed: 09:00-13:00; 14:15-17:30 Thu: 09:00-13:00; 14:15-17:30 Fri: 09:00-13:00; 14:15-17:45 Sat: 09:00-12:30 Sun:
NHS Scarborough and Ryedale	Lincoln Co-Op Chemists Ltd	10-12 Aberdeen Walk SCARBOROUGH YO11 1XP	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 10:00-17:30 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 10:00-12:30 Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Scarborough and Ryedale	Lincoln Co-Op Chemists Ltd	7 High Street Eastfield SCARBOROUGH YO11 3LL	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
NHS Scarborough and Ryedale	Lloyds Pharmacy	8 North Marine Road SCARBOROUGH YO12 7PD	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
NHS Scarborough and Ryedale	Morrisons Pharmacy	Dunslow Road Crossgates SCARBOROUGH YO11 3YN	Mon: 08:30-20:00 Tue: 08:30-20:00 Wed: 08:30-20:00 Thu: 08:30-20:00 Fri: 08:30-20:00 Sat: 08:00-18:00 Sun: 10:00-16:00	Mon: 09:00-13:00; 14:00-17:00 Tue: 09:00-13:00; 14:00-17:00 Wed: 09:00-13:00; 14:00-17:00 Thu: 09:00-13:00; 14:00-17:00 Fri: 09:00-13:00; 14:00-17:00 Sat: 09:00-13:00; 14:00-15:00 Sun:
NHS Scarborough and Ryedale	Northstead Pharmacy	1 Northleas Shops SCARBOROUGH YO12 6JG	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
NHS Scarborough and Ryedale	Scarborough Delivery Chemist	13 Ramshill Road SCARBOROUGH YO11 2LN	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Scarborough and Ryedale	Your Local Boots Pharmacy	3-4 York Place SCARBOROUGH YO11 2NP	Mon: 08:00-13:00; 14:00-20:00 Tue: 08:00-13:00; 14:00-20:00 Wed: 08:00-13:00; 14:00-20:00 Thu: 08:00-13:00; 14:00-20:00 Fri: 08:00-13:00; 14:00-20:00 Sat: 08:00-20:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
NHS Vale of York	Your Local Boots Pharmacy	Market Place EASINGWOLD YO61 3AD	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00; 14:00-17:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
NHS Vale of York	Helmsley Pharmacy	Helmsley medical Centre Carlton Road HELMSLEY YO62 5HD	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
NHS Vale of York	Towler's Chemist Limited	10 Market Place KIRKBYMOORSIDE YO62 6DB	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-12:30 Fri: 09:00-18:00 Sat: 09:00-17:00 Sun:	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-12:30 Fri: 09:00-17:30 Sat: 09:00-11:30 Sun:
NHS Vale of York	Eggborough Pharmacy Ltd	87 Selby Road Eggborough KNOTTINGLEY DN14 0LJ	Mon: 09:00-12:30; 13:00-17:30 Tue: 09:00-12:30; 13:00-17:30 Wed: 09:00-12:30; 13:00-17:30 Thu: 09:00-12:30; 13:00-17:30 Fri: 09:00-12:30; 13:00-17:30 Sat: Sun:	Mon: 09:00-12:30; 13:00-17:30 Tue: 09:00-12:30; 13:00-17:30 Wed: 09:00-12:30; 13:00-17:30 Thu: 09:00-12:30; 13:00-17:30 Fri: 09:00-12:30; 13:00-17:30 Sat: Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Vale of York	Milford Pharmacy	14 High Street South Milford LEEDS LS25 5AA	Mon: 09:00-19:30 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
NHS Vale of York	Beckside Pharmacy	Maltongate Thornton Le Dale PICKERING YO18 7RJ	Mon: 09:00-18:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: Fri: 09:00-17:00 Sat: Sun:	Mon: 09:00-18:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: Fri: 09:00-17:00 Sat: Sun:
NHS Vale of York	Pickering Pharmacy	22 Market Place PICKERING YO18 7AE	Mon: 09:00-18:30 Tue: 09:00-18:30 Wed: 09:00-18:30 Thu: 09:00-18:30 Fri: 09:00-18:30 Sat: 09:00-17:00 Sun: 11:00-12:00	Mon: 09:00-12:45; 14:00-17:30 Tue: 09:00-12:45; 14:00-17:30 Wed: 09:00-12:45; 14:00-17:30 Thu: 09:00-12:45; 14:00-17:30 Fri: 09:00-12:45; 14:00-17:30 Sat: 09:00-12:45 Sun:
NHS Vale of York	ARC Pharmacy	Portholme Road SELBY YO8 4QH	Mon: 08:45-20:00 Tue: 08:45-18:30 Wed: 08:45-18:30 Thu: 08:45-18:30 Fri: 08:45-18:30 Sat: Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
NHS Vale of York	Barlby Pharmacy	65-67 Sycamore Rd Barlby SELBY YO8 5XD	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Vale of York	Boots Uk Ltd	10 Market Place SELBY YO8 4PB	Mon: 08:30-12:00; 13:00-17:30 Tue: 08:30-12:00; 13:00-17:30 Wed: 08:30-12:00; 13:00-17:30 Thu: 08:30-12:00; 13:00-17:30 Fri: 08:30-12:00; 13:00-17:30 Sat: 08:30-12:00; 13:00-17:30 Sun:	Mon: 09:00-12:00; 13:00-17:00 Tue: 09:00-12:00; 13:00-17:00 Wed: 09:00-12:00; 13:00-17:00 Thu: 09:00-12:00; 13:00-17:00 Fri: 09:00-12:00; 13:00-17:00 Sat: 09:00-12:00; 13:00-15:00 Sun:
NHS Vale of York	Rowlands Pharmacy	66 Doncaster Road SELBY YO8 9AJ	Mon: 08:45-18:00 Tue: 08:45-12:00; 13:00-18:00 Wed: 08:45-12:00; 13:00-18:00 Thu: 08:45-12:00; 13:00-18:00 Fri: 08:45-12:00; 13:00-18:00 Sat: Sun:	Mon: 09:00-12:00; 13:00-18:00 Tue: 09:00-12:00; 13:00-18:00 Wed: 09:00-12:00; 13:00-18:00 Thu: 13:00-12:00; 13:00-18:00 Fri: 09:00-12:00; 13:00-18:00 Sat: Sun:
NHS Vale of York	Scott Road Pharmacy	Scott Road SELBY YO8 4BL	Mon: 08:30-18:00 Tue: 08:30-18:00 Wed: 08:30-18:00 Thu: 08:30-18:00 Fri: 08:30-18:00 Sat: Sun:	Mon: 08:30-13:00; 14:00-17:30 Tue: 08:30-13:00; 14:00-17:30 Wed: 08:30-13:00; 14:00-17:30 Thu: 08:30-13:00; 14:00-17:30 Fri: 08:30-13:00; 14:00-17:30 Sat: Sun:
NHS Vale of York	Thorpe Willoughby Pharmacy	26 Field Lane Thorpe Willoughby SELBY YO8 9FL	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
NHS Vale of York	Your Local Boots Pharmacy	Unit 14 Market Cross Shopping Centre SELBY YO8 4JS	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-16:00 Sun:	Mon: 09:00-13:30; 14:00-17:30 Tue: 09:00-13:30; 14:00-17:30 Wed: 09:00-13:30; 14:00-17:30 Thu: 09:00-13:30; 14:00-17:30 Fri: 09:00-13:30; 14:00-17:30 Sat: Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Vale of York	Your Local Boots Pharmacy	18 Finkle Hill SHERBURN IN ELMET LS25 6EA	Mon: 08:30-13:00; 14:00-18:00 Tue: 08:30-13:00; 14:00-18:00 Wed: 08:30-13:00; 14:00-18:00 Thu: 08:30-13:00; 14:00-18:00 Fri: 08:30-13:00; 14:00-18:00 Sat: 09:00-13:00; 14:00-17:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
NHS Vale of York	Calcaria Pharmacy	7-9 High Street TADCASTER LS24 9AP	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-13:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-12:30 Sun:	Mon: 09:00-12:00; 12:30-17:30 Tue: 09:00-12:00; 12:30-17:30 Wed: 09:00-13:30 Thu: 09:00-12:00; 12:30-17:30 Fri: 09:00-12:00; 12:30-17:30 Sat: 09:00-12:30 Sun:
NHS Vale of York	Kirkgate Pharmacy	7 Kirkgate TADCASTER LS24 9AQ	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-18:00 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-12:30; 13:00-17:30 Tue: 09:00-12:30; 13:00-17:30 Wed: 09:00-12:30; 13:00-17:30 Thu: 09:00-12:30; 13:00-17:30 Fri: 09:00-12:30; 13:00-17:30 Sat: Sun:
NHS Vale of York	Alliance Pharmacy	6 Wyre Court Haxby YORK YO32 2ZB	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
NHS Vale of York	Asda Superstore	Monks Cross Shopping Park Jockey Lane YORK YO32 9LF	Mon: 09:00-12:30; 14:30-21:00 Tue: 09:00-12:30; 14:30-21:00 Wed: 09:00-12:30; 14:30-21:00 Thu: 09:00-12:30; 14:30-21:00 Fri: 09:00-12:30; 14:30-21:00 Sat: 09:00-12:30; 14:30-21:00 Sun: 10:00-12:30; 14:30-16:00	Mon: 09:00-12:30; 14:30-18:00 Tue: 09:00-12:30; 14:30-18:00 Wed: 09:00-12:30; 14:30-18:00 Thu: 09:00-12:30; 14:30-18:00 Fri: 09:00-12:30; 14:30-18:00 Sat: 09:00-12:30; 14:30-16:00 Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Vale of York	Badger Hill Pharmacy	35 Yarburgh Way Badger Hill YORK YO10 5HD	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-12:30 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
NHS Vale of York	Bishopthorpe Pharmacy	22-24 Acaster Lane Bishopthorpe YORK YO23 2SJ	Mon: 09:00-13:00; 13:30-18:00 Tue: 09:00-13:00; 13:30-17:00 Wed: 09:00-13:00; 13:30-18:00 Thu: 09:00-13:00; 13:30-18:00 Fri: 09:00-13:00; 13:30-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: 09:00-13:00 Sun:
NHS Vale of York	Bishopthorpe Road Pharmacy	18 Bishopthorpe Road YORK YO23 1JJ	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
NHS Vale of York	Boots the Chemist Ltd	5 Heworth Village YORK YO31 1AE	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-13:00; 14:00-17:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
NHS Vale of York	Boots the Chemists	10 East Parade YORK YO31 7YJ	Mon: 09:00-12:30; 13:30-17:30 Tue: 09:00-12:30; 13:30-17:30 Wed: 09:00-12:30; 13:30-17:30 Thu: 09:00-12:30; 13:30-17:30 Fri: 09:00-12:30; 13:30-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-12:30; 13:30-17:30 Tue: 09:00-12:30; 13:30-17:30 Wed: 09:00-12:30; 13:30-17:30 Thu: 09:00-12:30; 13:30-17:30 Fri: 09:00-12:30; 13:30-17:30 Sat: 09:00-11:30 Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Vale of York	Boots Uk Ltd	5, St Mary's Square The Coppergate Centre YORK YO1 9NY	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun: 10:30-16:30	Mon: 09:30-16:30 Tue: 09:30-16:30 Wed: 09:30-16:30 Thu: 09:30-16:30 Fri: 09:30-16:30 Sat: 09:30-14:30 Sun:
NHS Vale of York	Boots Uk Ltd	2 Spurriergate (also known as 43 Coney Street) YORK YO1 9QR	Mon: 08:30-18:00 Tue: 08:30-18:00 Wed: 08:30-18:00 Thu: 08:30-18:00 Fri: 08:30-18:00 Sat: 08:30-18:00 Sun: 11:00-17:00	Mon: 09:30-16:00 Tue: 09:30-16:00 Wed: 09:30-16:00 Thu: 09:30-16:30 Fri: 09:30-16:30 Sat: 09:30-16:00 Sun:
NHS Vale of York	Boots Uk Ltd	Unit 7, Monks Cross Shopping Park YORK YO32 9GX	Mon: 09:00-20:00 Tue: 09:00-20:00 Wed: 09:00-20:00 Thu: 09:00-20:00 Fri: 09:00-20:00 Sat: 09:00-19:00 Sun: 11:00-17:00	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
NHS Vale of York	Boots Uk Ltd	1 Kings Square YORK YO1 8BH	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:30 Sun: 11:00-16:00	Mon: 09:00-14:00; 15:00-16:30 Tue: 09:00-14:00; 15:00-16:30 Wed: 09:00-14:00; 15:00-16:30 Thu: 09:00-14:00; 15:00-16:30 Fri: 09:00-14:00; 15:00-17:30 Sat: 09:00-14:00; 15:00-16:30 Sun:
NHS Vale of York	Boots Uk Ltd	2 The Old School Front Street, Acomb YORK YO24 3BN	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-14:00; 15:00-17:30 Sat: 09:00-14:00; 15:00-17:30 Sun:	Mon: 09:00-14:00; 15:00-16:30 Tue: 09:00-14:00; 15:00-16:30 Wed: 09:00-14:00; 15:00-16:30 Thu: 09:00-14:00; 15:00-16:30 Fri: 09:00-14:00; 15:00-17:30 Sat: 09:00-14:00; 15:00-16:30 Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Vale of York	Cohens Chemist	22 Gillygate YORK YO31 7EQ	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-12:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
NHS Vale of York	Copmanthorpe Pharmacy	8 Copmanthorpe Shopping Centre YORK YO23 3GG	Mon: 09:00-12:45; 13:45-18:00 Tue: 09:00-12:45; 13:45-18:00 Wed: 09:00-12:45; 13:45-18:00 Thu: 09:00-12:45; 13:45-18:00 Fri: 09:00-12:45; 13:45-18:00 Sat: Sun:	Mon: 09:00-12:45; 13:45-18:00 Tue: 09:00-12:45; 13:45-18:00 Wed: 09:00-12:45; 13:45-18:00 Thu: 09:00-12:45; 13:45-18:00 Fri: 09:00-12:45; 13:45-18:00 Sat: Sun:
NHS Vale of York	Dunnington Pharmacy	35 York Street Dunnington YORK YO19 5QT	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-13:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-12:30 Sun:	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-13:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: Sun:
NHS Vale of York	Gale Farm Pharmacy	109-119 Front Street Acomb YORK YO24 4LZ	Mon: 08:30-18:00 Tue: 08:30-18:00 Wed: 08:30-18:00 Thu: 08:30-18:00 Fri: 08:30-18:00 Sat: 08:30-12:00 Sun:	Mon: 09:00-11:00; 12:00-18:00 Tue: 09:00-11:00; 12:00-18:00 Wed: 09:00-11:00; 12:00-18:00 Thu: 09:00-11:00; 12:00-18:00 Fri: 09:00-11:00; 12:00-18:00 Sat: Sun:
NHS Vale of York	Haxby Group Pharmacy	Haxby & Wigginton Health Centre YORK YO32 2LL	Mon: 07:30-22:30 Tue: 07:30-22:30 Wed: 07:30-22:30 Thu: 07:30-22:30 Fri: 07:30-22:30 Sat: 07:30-22:30 Sun: 09:00-19:00	Mon: 07:30-22:30 Tue: 07:30-22:30 Wed: 07:30-22:30 Thu: 07:30-22:30 Fri: 07:30-22:30 Sat: 07:30-22:30 Sun: 09:00-19:00

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Vale of York	Huntington Pharmacy	Huntington Surgery 1-3 North Lane Huntington YORK YO32 9RU	Mon: 07:00-23:00 Tue: 07:00-23:00 Wed: 07:00-23:00 Thu: 07:00-23:00 Fri: 07:00-23:00 Sat: 07:00-19:00 Sun: 09:00-17:00	Mon: 07:00-23:00 Tue: 07:00-23:00 Wed: 07:00-23:00 Thu: 07:00-23:00 Fri: 07:00-23:00 Sat: 07:00-19:00 Sun: 09:00-17:00
NHS Vale of York	Lloyds Pharmacy	3 Intake Avenue YORK YO30 6HB	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
NHS Vale of York	Lloyds Pharmacy	412 Huntington Road YORK YO31 9HU	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-14:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
NHS Vale of York	Lloyds Pharmacy	101 - 103 Green Lane Acomb YORK YO24 4PS	Mon: 08:45-17:30 Tue: 08:45-17:30 Wed: 08:45-17:30 Thu: 08:45-17:30 Fri: 08:45-17:30 Sat: Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
NHS Vale of York	Lloyds Pharmacy	3 Wains Grove Dringhouses YORK YO24 2TU	Mon: 08:30-17:30 Tue: 08:30-17:30 Wed: 08:30-17:30 Thu: 08:30-17:30 Fri: 08:30-17:30 Sat: Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Vale of York	Lloyds Pharmacy	210 Fulford Road Fishergate YORK YO10 4DX	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
NHS Vale of York	M Hepworth (Chemists) Ltd	101 Main Street Fulford YORK YO10 4PN	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
NHS Vale of York	M J Roberts Chemists Ltd	8 Boroughbridge Road YORK YO26 5RU	Mon: 08:30-12:30; 13:30-18:00 Tue: 08:30-12:30; 13:30-18:00 Wed: 08:30-12:30; 13:30-17:30 Thu: 08:30-12:30; 13:30-17:30 Fri: 08:30-12:30; 13:30-17:30 Sat: Sun:	Mon: 08:30-12:30; 13:30-17:30 Tue: 08:30-12:30; 13:30-17:30 Wed: 08:30-12:30; 13:30-17:30 Thu: 08:30-12:30; 13:30-17:30 Fri: 08:30-12:30; 13:30-17:30 Sat: Sun:
NHS Vale of York	Marsden Pharmacy	67 Front Street Acomb YORK YO24 3BR	Mon: 09:00-18:00 Tue: 09:00-18:00 Wed: 09:00-18:00 Thu: 09:00-18:00 Fri: 09:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
NHS Vale of York	Monkbar Pharmacy	3 Goodramgate YORK YO1 7LJ	Mon: 07:30-22:30 Tue: 07:30-22:30 Wed: 07:30-22:30 Thu: 07:30-22:30 Fri: 07:30-22:30 Sat: 07:30-22:30 Sun: 08:30-18:30	Mon: 07:30-22:30 Tue: 07:30-22:30 Wed: 07:30-22:30 Thu: 07:30-22:30 Fri: 07:30-22:30 Sat: 07:30-22:30 Sun: 08:30-18:30

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Vale of York	Monkton Road Pharmacy	71 Monkton Road YORK YO31 9AL	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
NHS Vale of York	Parkers Pharmacy	61 North Moor Road Huntington YORK YO32 9QN	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
NHS Vale of York	PT & HJ Richardson	57 Blossom Street YORK YO24 1AZ	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-17:30 Tue: 09:00-13:00; 14:00-17:30 Wed: 09:00-13:00; 14:00-17:30 Thu: 09:00-13:00; 14:00-17:30 Fri: 09:00-13:00; 14:00-17:30 Sat: 09:00-11:30 Sun:
NHS Vale of York	S K F Lo (Chemist) Ltd	151 Beckfield Lane YORK YO26 5PJ	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00 Sun	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
NHS Vale of York	Sainsbury's Supermarkets Ltd	Monks Cross Shopping Park Jockey Lane YORK YO32 9LG	Mon: 08:00-21:00 Tue: 08:00-21:00 Wed: 08:00-21:00 Thu: 08:00-21:00 Fri: 08:00-21:00 Sat: 08:00-21:00 Sun: 10:00-16:00	Mon: 09:00-12:00; 13:00-16:00 Tue: 09:00-12:00; 13:00-17:00 Wed: 09:00-12:00; 13:00-17:00 Thu: 09:00-12:00; 13:00-17:00 Fri: 09:00-12:00; 13:00-17:00 Sat: 09:00-12:00; 13:00-16:00 Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Vale of York	Tesco Instore Pharmacy	Askham Bar Tadcaster Road YORK YO24 1LW	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00	Mon: 08:00-22:30 Tue: 06:30-22:30 Wed: 06:30-22:30 Thu: 06:30-22:30 Fri: 06:30-22:30 Sat: 06:30-22:00 Sun: 10:00-16:00
NHS Vale of York	Tesco Superstore	9 Stirling Road Clifton Moor YORK YO30 4XZ	Mon: 08:00-21:00 Tue: 08:00-21:00 Wed: 08:00-21:00 Thu: 08:00-21:00 Fri: 08:00-21:00 Sat: 08:00-21:00 Sun: 10:00-16:00	Mon: 09:00-13:00; 14:00-17:00 Tue: 09:00-13:00; 14:00-17:00 Wed: 09:00-13:00; 14:00-16:30 Thu: 09:00-13:00; 14:00-16:30 Fri: 09:00-13:00; 14:00-16:30 Sat: 09:00-13:00; 14:00-16:30 Sun:
NHS Vale of York	The Priory Pharmacy	Priory Medical Centre YORK YO24 3WX	Mon: 08:00-23:00 Tue: 08:00-23:00 Wed: 08:00-23:00 Thu: 08:00-23:00 Fri: 08:00-23:00 Sat: 08:00-23:00 Sun: 10:00-20:00	Mon: 08:00-23:00 Tue: 08:00-23:00 Wed: 08:00-23:00 Thu: 08:00-23:00 Fri: 08:00-23:00 Sat: 08:00-23:00 Sun: 10:00-20:00
NHS Vale of York	Tower Court Pharmacy Ltd	Unit 1, Tower Court Oakdale Road, Clifton Moor YORK YO30 4WL	Mon: 09:00-13:00; 13:30-18:00 Tue: 09:00-13:00; 13:30-18:00 Wed: 09:00-13:00; 13:30-18:00 Thu: 09:00-13:00; 13:30-18:00 Fri: 09:00-13:00; 13:30-18:00 Sat: Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:
NHS Vale of York	Upper Poppleton Pharmacy	The Green Upper Poppleton YORK YO26 6DF	Mon: 09:00-12:45; 14:00-18:00 Tue: 09:00-12:45; 14:00-18:00 Wed: 09:00-12:45; 14:00-18:00 Thu: 09:00-12:45 Fri: 09:00-12:45; 14:00-18:00 Sat: Sun:	Mon: 09:00-12:45; 14:00-18:00 Tue: 09:00-12:45; 14:00-18:00 Wed: 09:00-12:45; 14:00-18:00 Thu: 09:00-12:45 Fri: 09:00-12:45; 14:00-18:00 Sat: Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Vale of York	Whitworth Chemists Ltd	275 Melrosegate YORK YO10 3SN	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-16:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
NHS Vale of York	York Medical Pharmacy	199 Acomb Road Acomb YORK YO24 4HD	Mon: 08:30-17:45 Tue: 08:30-17:45 Wed: 08:30-17:45 Thu: 08:30-17:45 Fri: 08:30-17:45 Sat: Sun:	Mon: 08:30-17:45 Tue: 08:30-17:45 Wed: 08:30-17:45 Thu: 08:30-17:45 Fri: 08:30-17:45 Sat: Sun:
NHS Vale of York	Your Local Boots Pharmacy	153a Tang Hall Lane YORK YO10 3SD	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
NHS Vale of York	Your Local Boots Pharmacy	25b The Village Strensall YORK YO32 5XR	Mon: 08:45-13:30; 14:00-18:00 Tue: 08:45-13:30; 14:00-18:00 Wed: 08:45-13:30; 14:00-18:00 Thu: 08:45-13:30; 14:00-18:00 Fri: 08:45-13:30; 14:00-18:00 Sat: 09:00-13:00 Sun:	Mon: 09:00-13:00; 14:00-18:00 Tue: 09:00-13:00; 14:00-18:00 Wed: 09:00-13:00; 14:00-18:00 Thu: 09:00-13:00; 14:00-18:00 Fri: 09:00-13:00; 14:00-18:00 Sat: Sun:
NHS Vale of York	Your Local Boots Pharmacy	68 The Village Haxby YORK YO32 2HX	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: 09:00-13:00; 13:30-17:00 Sun:	Mon: 09:00-13:00; 13:30-17:30 Tue: 09:00-13:00; 13:30-17:30 Wed: 09:00-13:00; 13:30-17:30 Thu: 09:00-13:00; 13:30-17:30 Fri: 09:00-13:00; 13:30-17:30 Sat: Sun:

CCG	Trading Name	Address	Total Opening Hours	Core Opening Hours
NHS Vale of York	Your Local Boots Pharmacy	66 Clarence Street YORK YO31 7EW	Mon: 09:00-17:30 Tue: 09:00-17:30 Wed: 09:00-17:30 Thu: 09:00-17:30 Fri: 09:00-17:30 Sat: 09:00-17:00 Sun:	Mon: 09:00-17:00 Tue: 09:00-17:00 Wed: 09:00-17:00 Thu: 09:00-17:00 Fri: 09:00-17:00 Sat: Sun:
NHS Vale of York	Your Local Boots Pharmacy	86 Clifton YORK YO30 6BA	Mon: 09:00-14:00; 14:30-17:30 Tue: 09:00-14:00; 14:30-17:30 Wed: 09:00-14:00; 14:30-17:30 Thu: 09:00-14:00; 14:30-17:30 Fri: 09:00-14:00; 14:30-17:30 Sat: 09:00-14:00; 14:30-17:00 Sun:	Mon: 09:00-13:30; 14:30-17:30 Tue: 09:00-13:30; 14:30-17:30 Wed: 09:00-13:30; 14:30-17:30 Thu: 09:00-13:30; 14:30-17:30 Fri: 09:00-13:30; 14:30-17:30 Sat: 09:00-11:30 Sun:

Appendix 4 - Dispensing Appliance Contractors

Charles Bullen Stomacare Ltd, Unit 5 London Ebor Bus Park, Milfield Lane, York YO26 6RY

Fittleworth Medical Ltd, 5-7 Cheltenham Mount, Harrogate HG1 1DW

Fittleworth Medical Ltd, Ground Floor Unit 4, Concept Court, Kettlestring Lane, Clifton Moor, York YO30 4XF

Appendix 5 - Distance Selling and Internet Pharmacies

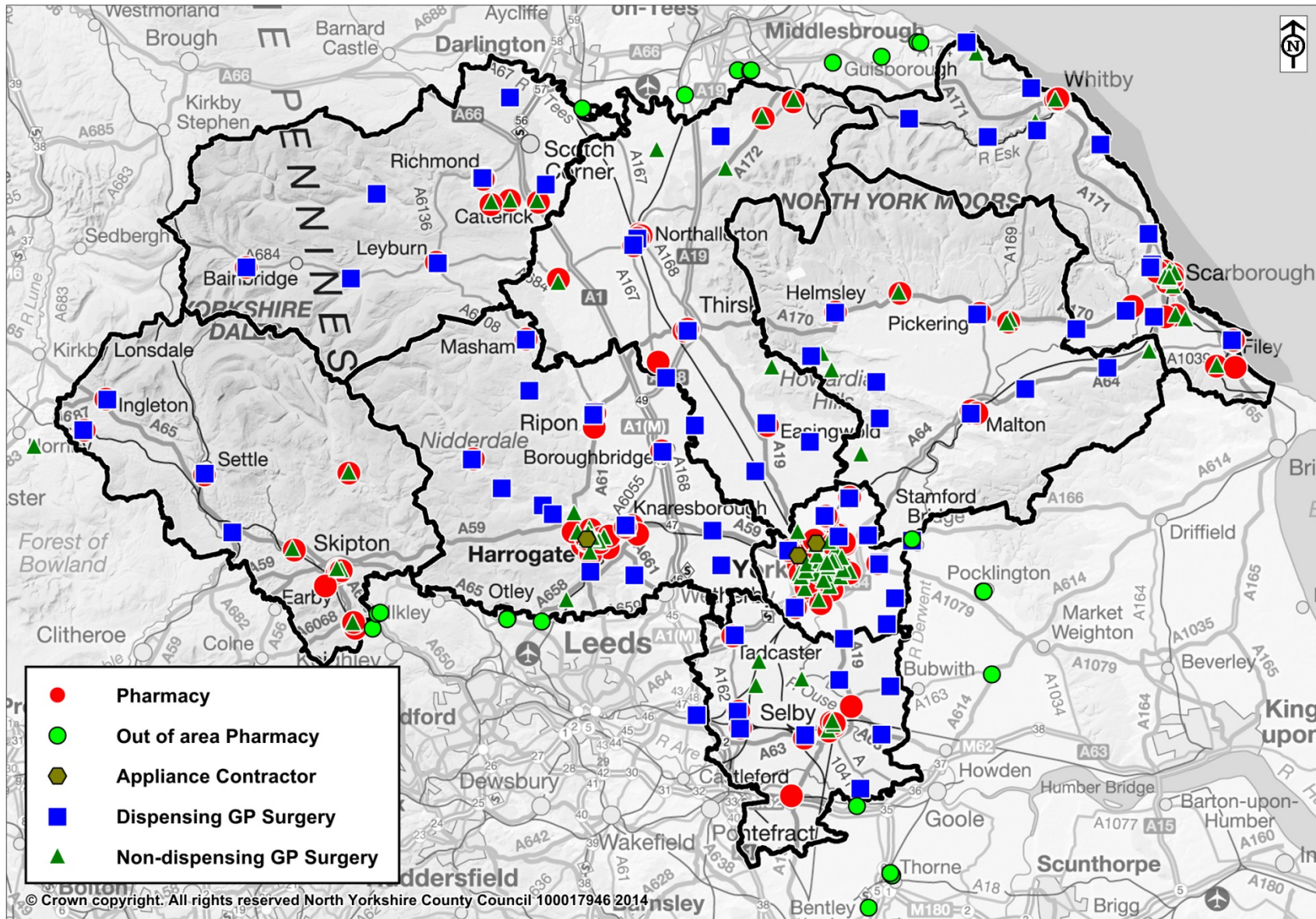
Homecare (Yorkshire) Ltd, Unit AA, Alanbrook Industrial Park, Station Road, Topcliffe YO7 3SE

Telephone: 01845 578879 Internet: www.hcyl.co.uk

Appendix 6 - Services provided in each locality

District	NYCC Public Health Services				Advanced Services			
	Stop Smoking Service	Emergency Hormonal Contraception	Supervised Consumption	Needle and Syringe Exchange Service	Medicine Use Review Service	New Medicine Service	Appliance Use Review Service	Stoma Appliance Customisation
Craven	7	6	9	2	13	10	2	2
Hambleton	5	9	12	5	11	10	0	1
Harrogate	19	19	26	7	21	22	6	5
Richmondshire	4	3	8	4	6	6	0	0
Ryedale	4	5	7	3	8	8	1	1
Scarborough	17	18	23	5	25	25	1	1
Selby	9	7	11	4	11	10	0	1

Appendix 7– Pharmacy, dispensing GP practice and non-dispensing GP practice locations



Appendix 8 – Controlled locality boundaries

Maps can be down loaded from www.nypartnerships.org.uk/pna

Appendix 9 - Reserved locations

Maps can be down loaded from www.nypartnerships.org.uk/pna

Pharmacy Users Questionnaire



York and North Yorkshire Pharmaceutical Needs Assessments Pharmacy Users Questionnaire

Every Health and Wellbeing Board in England has a statutory responsibility to publish and keep up-to-date a statement of the needs for pharmaceutical services for the population in its area, referred to as a Pharmaceutical Needs Assessment (PNA). The PNA is used to inform decisions about where to site pharmacies (some people call them chemists), opening hours and what services are provided.

Pharmacy - some people call them chemists but in this survey we use the word pharmacy. By a pharmacy, we mean a place you would use to get a prescription dispensed or buy medicines some of which you cannot buy anywhere else.

GP Practice (Dispensing Doctor) - some GP practices dispense medicines at the practice building to patients who live in a rural area. This is different to GP practice buildings in which there is also a full pharmacy within the building.

During the next few months we will be collecting information with the aim of publishing draft PNAs for North Yorkshire and for York in October 2014 and final versions in March 2015. To help produce the PNAs we want to hear about your experiences and opinions about the pharmacy services in your area, and whether there is anything you feel could be changed or improved

This questionnaire is for completion by people who use are users of pharmaceutical services, for example to get their prescriptions dispensed. Other questionnaires are available for completion by:

- Health or social care service providers and practitioners
- Strategic Partners - Organisations that commission services or plan other aspects of communities (e.g. housing, transport, etc.) that could impact on the need for pharmaceutical services.

Further details can be found at www.nypartnerships.org.uk/pna or email jsna@northyorks.gov.uk

An additional questionnaire for organisations providing pharmaceutical services has been sent directly to pharmacies and dispensing GP practices.

1. In what capacity are you responding? (Please choose which of the following is most appropriate)

As a member of the public

In what town, village or post code area do you live?

In which town or village is the pharmacy that you normally use?

As a member of a voluntary or community organisation

Name of organisation

What area is covered by your group? Please state town, district or whole county:

Does your organisation represent any particular group of people? If so please give details:

Thinking about when you collect prescription medicines, buy other medicines, get advice about prescribed and other medicines or for other pharmacy services:

2. Where do you generally visit a pharmacy?

Close to my home

Close to my work

Close to school/nursery

Close to the shops I use

Close to my GP practice

At my GP practice

At the supermarket I use

3. Where would you prefer to visit a pharmacy?

Close my home

Close to my work

Close to the school or nursery my children use

Close to the shops I use

Close to my GP practice

At my GP practice

At the supermarket I use

Other

No preference

4. When do you usually visit a pharmacy?

Weekdays before 9am

weekdays between 9am - 6pm

weekdays after 6pm

Saturdays

Sundays

no particular time

5. When would you prefer to visit a pharmacy?

Weekdays before 9am

weekdays between 9am - 6pm

weekdays after 6pm

Saturdays

Sundays

no particular time

6. On average, how often do you use a pharmacy?

Weekly monthly every 3 months every 6 months other

7. How do you usually travel to your pharmacy?

By public transport by car on foot by cycle other

8. Do you normally get your prescriptions medicines?

- Pharmacy
- GP practice dispensary
- Internet

9. If you normally get your prescriptions from a GP practice dispensary, please indicate if you also visit a pharmacy for other services (tick all that apply):

- To buy over-the-counter medicine from the pharmacy
- To get advice from the pharmacy
- To access other pharmacy services e.g. stop smoking services, emergency contraception To get my flu jab
- To shop for non-medical goods (e.g. beauty products, toiletries, baby products, etc.)

Other (please give details):

10. Overall, I consider that:

	Always	Usually	Don't know	Sometimes	Never
I can find a pharmacy open when needed					
I can find a pharmacy open after 6pm, Monday to Friday					
I can find a pharmacy open on Saturday mornings					
I can find a pharmacy open on Sundays					
I can find a pharmacy open on Saturday afternoons					
The pharmacy offers advice to help me have a healthier lifestyle					
When I visit a pharmacy I can get the medication I need					
There is some privacy when I want to speak to a member of the staff					

11. Overall, how would you rate the availability of pharmacy services in your area:

Very good Good Adequate Poor Very Poor

12. In the last 12 months, have you experienced any recurrent problems when using your usual pharmacy or one close by?

Yes

No

If you answered 'Yes', please tell us why:

13. Please tell us which of the services listed below is available at your local pharmacy and which ones you have used or would find useful.

Please note that some of the services listed below may not be funded by the NHS or may not be available from your pharmacy at present

Service	AVAILABLE		NOT AVAILABLE		Don't know
	I have used	I have not used	I would use this	I would not use this	
Prescription collection service from your GP surgery					
Prescription medicines delivery service from pharmacy to home					
Repeat prescription service at pharmacy					
Stop Smoking Support Service					
Chlamydia screening service					
Healthy eating and living advice service					
Medicines usage review service					
New medicines service					
Emergency contraception					
Minor conditions advice e.g. sore throat, hay fever, thrush					
Health checks, for example, blood pressure checks					
Weight management / dietary advice					
Information on health and social services					
Vaccinations					
Dispensing into monitored dose containers					
Other (please give details):					

14. What do you like about your pharmacy?

15. What do you think could be improved about your pharmacy?

16. Is there anything else you would like to tell us about Pharmacy services in your area?

17. About You

Your Age

- 18 or under
- 19-29
- 30-59
- 60-74
- 75 or over

Over the last 12 months, how would you say your health has been?

- Very good
- Good
- Fair
- Bad
- Very Bad

Do you consider yourself to be a carer, contributing to the care needs of a friend or relative?

- Yes
- No

Are you:

- Male
- Female

Do you have any long-term illness, health problem or disability which limits your daily activities or the work you can do?

- Yes
- No

Thank you for completing this questionnaire. Your views will help us to produce the Pharmaceutical Needs Assessments for York and for North Yorkshire, scheduled to be published in draft form in October 2014. This will then be consulted on until December 2014. The final versions of the reports are scheduled for publication in March 2015. The draft and final reports will be available on-line at www.nypartnerships.org.uk/pna (North Yorkshire) and www.york.gov.uk (York)

Please feel free to forward this questionnaire to anyone you think can contribute to the Pharmaceutical Needs Assessments for York and North Yorkshire

Please return completed questionnaires by 18 July 2014

email to: jsna@northyorks.gov.uk

or by post to: Pharmaceutical Needs Assessment, North Yorkshire County Council, North Yorkshire House, 442-444 Scalby Road, Scarborough YO12 6EE



York and North Yorkshire Pharmaceutical Needs Assessments **Questionnaire for health or social care service providers and practitioners**

Every Health and Wellbeing Board (HWB) in England has a statutory responsibility to publish and keep up-to-date a statement of the needs for pharmaceutical services for the population in its area, referred to as a Pharmaceutical Needs Assessment (PNA). The PNA is used to inform decisions about where to site pharmacies (some people call them chemists), opening hours and what services are provided.

During the next few months we will be collecting information with the aim of publishing draft PNAs for North Yorkshire and for York in October 2014 and final versions in March 2015. To help produce the PNAs we want to find out your opinions about local pharmacy services, and whether there is anything you feel should be changed or could be improved.

This questionnaire is for health or social care service providers and practitioners. Other questionnaires are available for completion by:

- Strategic Partners - Organisations that commission services or plan other aspects of communities (e.g. housing, transport, etc.) that could impact on the need for pharmaceutical services.
- Users of pharmaceutical services

Further details can be found at www.nypartnerships.org.uk/pna or email jsna@northyorks.gov.uk

A special questionnaire for organisations providing pharmaceutical services has been sent directly to pharmacies and dispensing GP practices.

Organisation:

Job description:

Service area (e.g., primary health, social care, public health, etc.):

In which area(s) do you operate?

- All of North Yorkshire
- City of York**
- Craven District
- Hambleton District
- Harrogate Borough
- Richmondshire District
- Ryedale District
- Scarborough Borough
- Selby District

Other (please give details):

1. How good do you consider pharmacy services are in North Yorkshire or York as a whole and/or in your area of North Yorkshire or York?

Your overall rating

very good good adequate Poor very poor

Availability of services

– open hours/days and location, range of additional services available, variation/equitable of services in different areas, etc.

Quality of services

2. Are there any aspects that you feel should be improved?

3. Are you aware of any particular problems people have had accessing pharmacy services or may have in the futures?

4. How desirable is availability of the following services at local pharmacies?

	Very desirable	Desirable	Not necessary
Prescription collection service from your GP surgery			
Prescription medicines delivery service from pharmacy to home			
Repeat prescription service at pharmacy			
Stop Smoking Support Service			
Chlamydia screening service			
Healthy eating and living advice service			
Medicines use review service			
Emergency contraception			
Minor conditions advice, for example, sore throat, hay fever, thrush			
Health checks, for example, blood pressure checks			
Weight management / dietary			
Information on health and social services			
Vaccinations			
Substance misuse services			

Other (please give details):

5. Are there any other services you think could be provided by pharmacies?

We are particularly interested in innovative suggestions for services for local communities that would not normally be provided, but could be provided, by pharmacies.

6. Have you any other comments about pharmaceutical services in York and North Yorkshire including development to meet current and future needs??

Thank you for completing this questionnaire. Your views will help produced the PNA for the York and for North Yorkshire scheduled to be published in draft form in October 2014 for consultation until December. The final versions of the reports are scheduled for publication in March 2015. The draft and final reports will be available on-line at www.nypartnerships.org.uk/pna (North Yorkshire) and www.york.gov.uk (York)

Please feel free to forward this questionnaire to anyone you think can contribute to the PNA for York and North Yorkshire.

Please return completed questionnaires by 18 July 2014

email to: jsna@northyorks.gov.uk

or by post to: Pharmaceutical Needs Assessment, North Yorkshire County Council, North Yorkshire House, 442-444 Scalby Road, Scarborough YO12 6EE

Strategic Partners Questionnaire

Health and Wellbeing Board
North Yorkshire



York and North Yorkshire Pharmaceutical Needs Assessments

Strategic Partners Questionnaire

Every Health and Wellbeing Board (HWB) in England has a statutory responsibility to publish and keep up-to-date a statement of the needs for pharmaceutical services for the population in its area, referred to as a Pharmaceutical Needs Assessment (PNA). The PNA is used to inform decisions about where to site pharmacies (some people call them chemists), opening hours and what services are provided.

During the next few months we will be collecting information with the aim of publishing draft PNAs for North Yorkshire and for York in October 2014 and final versions in March 2015. To help produce the PNAs we want to find out your opinions about local pharmacy services, and whether there is anything you feel should be changed or could be improved.

This questionnaire is for people and organisations that commission services or plan other aspects of communities (e.g. housing, transport, etc.) that could impact on the need for pharmaceutical services in particular areas. Other questionnaires are available for completion by:

- Health or social care service providers and practitioners
- Users of pharmaceutical services

Further details can be found at www.nypartnerships.org.uk/pna or email jsna@northyorks.gov.uk

A special questionnaire for organisations providing pharmaceutical services has been sent directly to pharmacies and dispensing GP practices.

Department or lead area:

Organisation:

In which area(s) do you operate?

- All of North Yorkshire
- City of York

-
- Craven District
 - Hambleton District
 - Harrogate Borough
 - Richmondshire District
 - Ryedale District
 - Scarborough Borough
 - Selby District
- Other (please give details):

1. How good do you consider pharmacy services are in North Yorkshire or York as a whole and / or in your area of North Yorkshire or York?

Your overall rating

- very good good adequate Poor very poor

Availability of services

– open hours/days and location, range of additional services available, variation/equitable of services in different areas, gaps in service, etc.

Quality of services

2. Are there any aspects that you feel should be improved?

3. Are you aware of any particular problems people have had accessing pharmacy services?

4. How desirable is availability of the following services at local pharmacies?

	Very desirable	Desirable	Not necessary
Prescription collection service from your GP surgery			
Prescription medicines delivery service from pharmacy to home			
Repeat prescription service at pharmacy			
Stop Smoking Support Service			

Chlamydia screening service			
Healthy eating and living advice service			
Medicines use review service			
Emergency contraception			
Minor conditions advice, for example, sore throat, hay fever, thrush			
Health checks, for example, blood pressure checks			
Weight management / dietary			
Information on health and social services			
Vaccinations			
Substance misuse services			

Other (please give details):

5. Are there any other services you think could be provided by pharmacies? Are there any you are considering commissioning?

We are particularly interested in innovative suggestions for services for local communities that would not normally be provided, but could be provided, by pharmacies.

6. Does your organisation have any plans or are you aware of any other plans that are likely to have an impact on the need for pharmaceutical services during the next five years? If so please give details

7. Have you any other comments about pharmaceutical services in York and North Yorkshire?

Thank you for completing this questionnaire. Your views will help produced the Pharmaceutical Needs Assessments for the York and for North Yorkshire scheduled to be published in draft form in October 2014 for consultation until December. The final versions of the reports are scheduled for publication in March 2015. The draft and final reports will be available on-line at www.nypartnerships.org.uk/pna (North Yorkshire) and www.york.gov.uk (York)

Please feel free to forward this questionnaire to anyone you think can contribute to the Pharmaceutical Needs Assessments for York and North Yorkshire.

Please return completed questionnaires by 18 July 2014

email to: jsna@northyorks.gov.uk

or by post to: Pharmaceutical Needs Assessment, North Yorkshire County Council, North Yorkshire House, 442-444 Scalby Road,
Scarborough YO12 6EE

Pharmacies Questionnaire

Health and Wellbeing Board
North Yorkshire



Pharmaceutical Needs Assessment – Community Pharmacy Questionnaire

Date of completion

Name of contractor

Address of contractor

Trading name

Is this a distance selling pharmacy?

No

Yes

Pharmacy email address

Pharmacy phone number

Pharmacy fax

Pharmacy website address

Can we store the above information to contact you and to share with other commissioners?

Yes

No

Opening hours

Please complete the box below with your current opening hours

Core hours

Day	Open	Close	Open	Close
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

Total hours – Core + Supplementary hours

Day	Open	Close	Open	Close
Monday				
Tuesday				

Wednesday				
Thursday				
Friday				
Saturday				
Sunday				

Consultation facilities

Is there a consultation area? Yes No

If yes:

On the premises? Yes No

Away from the premises? Yes No

Information facilities

Is the pharmacy EPS R2 enabled Yes No

Can you access websites from a computer within your pharmacy?

Yes

No

Limited

Information is often distributed to pharmacies as email attachments or via websites. Please indicate whether you are able to use the following common files formats in your pharmacy.

Adobe PDF files (.pdf)

Not able to view

Able to view only

Microsoft Word files (.doc or .docx)

Not able to view or open

Able to view only

Able to open fully, edit and save

Microsoft Excel files (.xls or .xlsx)

Not able to view or open

Able to view only

Able to open fully, edit and save

Advanced services

Please give details of the advanced services provided by your pharmacy.

Please tick the box which applies for each service

Medicines Use Review Service

New Medicine Service

Appliance Use Review Service

Stoma Appliance customisation service

Commissioned Services

Please give details of the commissioned services provided by your pharmacy. These can be enhanced services commissioned by NHS England Area Team, Public Health services commissioned by a Local Authority or a CCG service.

AT – currently commissioned by Area Team and providing

LA – currently commissioned by Local Authority and providing

CCG – currently commissioned by a CCG and providing

If you are not providing the service then leave blank

Service	AT	LA	CCG
Emergency Hormonal Contraception Service			
NRT Voucher Service			
Smoking Cessation Service			
Supervised consumption of methadone or Buprenorphine			
Needle exchange			
Out of hours service			
Other services:			

Privately provided services

We would like to know what other services you provide i.e. not commissioned by NHS England or Local Authority – please tick the appropriate box in the table below. Where the service is not funded by either the pharmacy or the patient please state who does fund it.

Ph = Pharmacy funded Pt = Patient funded

Service	Ph	Pt	Other commissioners please specify
Anticoagulant monitoring service			
Anti-viral distribution service			
Care Home service			
Contraception service (not an EHC service)			
Gluten Free Food Supply Service			
Independent Prescribing Service			
Language Access Service			
Medication Review Service (this is not the NMS or MUR services)			
Minor Ailments Scheme			

Weight Management Services			
Directly Observed therapy of TB medicines			
Palliative care scheme			
Phlebotomy			
Prescriber Support Service			
Schools Service			
Seasonal influenza Vaccination Service			
Childhood vaccinations			
Travel vaccines			
Sharps Disposal service other than needle exchange service			
Vascular Risk Assessment Service (NHS HealthCheck)			
Stop Smoking Service other than that commissioned by the local authority:			
Supervised Administration Service: other than that commissioned by the local authority:			
Monitored Dosage system			
Others please specify:			
Services that treat or test for			
Allergies			
Alzheimer's/Dementia			
Asthma			
CHD			
Chlamydia			
Depression			
Diabetes			
Epilepsy			
Heart Failure			
Hypertension			
Parkinson's Disease			
Alcohol dependency			
Cholesterol			
Gonorrhoea			

H.pylori			
HbA1C			
Hepatitis			
HIV			
HPV			
Others please specify:			

Healthy Living Pharmacy

Are you currently working towards being a HLP? Yes No

How many Healthy Living Champions do you have? Full time equivalent

Collection and Delivery Services

Does your pharmacy provide any of the following:

Collection of prescriptions from surgeries? Yes

Delivery of dispensed medicines free of charge on request? Yes

Delivery of dispensed medicines – selected patient groups (list criteria)

Delivery of dispensed medicines – selected areas (list areas)

Dispensed medicines – chargeable

Yes

Additional information

Please list additional services/facilities you provide to enhance patient accessibility

If you have anything else you would like to tell us that you think would be useful in the formulation of the PNA please include here:

Do you know of any potential changes in your area that may affect pharmaceutical need and/or provision

Details of person completing this questionnaire in case we need to contact them for further information.

Contact name

Contact number

Thank you for completing this PNA questionnaire

Appendix 11 - Questionnaire distribution

Health and social care service providers and practitioners

GPs

NHS trusts: Airedale NHSFT, Bradford District Care Trust, South Tees, HDFT, YHNHSFT, South Tees, TEWV, Leeds & York Partnership

Residential/Domiciliary Care providers

Adult social services

Children's Services

Dentists

GP out of hours services

Sexual Health, substance misuse, tobacco control services

Strategic Partners

CCGs

HWB members (including CCGs)

Planning/Transport

District Councils planning depts., etc.

NHS Area Team

Out of Area organisations

Health related area "steering" groups

Pharmacy users

Voluntary Sector

Partnership Boards

Healthwatch

CSU/CCG communications managers

Pharmacies Questionnaire

North Yorkshire and York Pharmacies

North Yorkshire and York GP dispensing practices

Appendix 12 – Consultation

The draft PNA was made publically available for consultation on the North Yorkshire Partnerships website's PNA page between 3 November 2014 and the 12 January 2015. The following organisations were contacted by email to inform them of the availability of the draft report and the details of the consultation period

- The Local Pharmaceutical Committee for the North Yorkshire area
- The Local Medical Committee for its North Yorkshire area
- People on the pharmaceutical lists and any dispensing doctors list for North Yorkshire
- LPS chemist in its area with whom the NHS England has made arrangements for the provision of any local pharmaceutical services
- The North Yorkshire Healthwatch organisation
- NHS trust or NHS foundation trust North Yorkshire
- NHS England area team
- Neighbouring Health and Wellbeing Boards

During the consultation period comments on the draft PNA report were received from members of the public and people employed by pharmacies, NHS England and a GP practice. They included some minor corrections to errors and details which have been now been included in the final report.

The following is a summary of comments received about the draft report and the response of the PNA development group.

- *Rurality of North Yorkshire and using travel times based on car usage*
Due regard is made in the PNA to the rural nature of the county while also acknowledging that the overall need for pharmacy services principally follows population densities. The existence of GP dispensing practices in rural areas where there is not a nearby pharmacy is an important aspect of how rural and urban services differ.
Although travel times by other modes of transport could be of interest, they are not currently available due to the complexity of calculations involved. Walking and cycling would introduce the possibility for any individual journey of also using footpaths, cycle paths, bridle ways, etc. with varying levels of accessibility.
- *The demographic validity of the engagement exercise carried out prior to production of the draft PNA, whether the contents of only 118 Pharmaceutical Service Users responses for the whole of North Yorkshire should be treated as being statistically significant and other comments about the questionnaire.*

The questionnaires were distributed to a wide range of organisations, (see Appendix 9) across North Yorkshire including Healthwatch and the North Yorkshire & York Forum for Voluntary Organisations. All organisation contacted were asked to cascade the questionnaire details to as many people/organisations as possible. The available of the questionnaire was also advertised via a press release.

So although not every organisation in North Yorkshire was contacted directly we expected coverage to be increased by questionnaire details being passed on. In future consideration will be given to also contacting directly Parish Councils, GP practice Patient Participation Groups and making use of pharmacies annual patient satisfaction survey results and the North Yorkshire County Council Citizen's Panel.

Although only a relatively small number of questionnaire were received from pharmacy users, they are still considered to be a useful indication of people's views and their use of pharmacy services but will be treated with some caution.

The questionnaires could, despite including opportunities for including comment, have constrained some people's answers, non-questionnaire written responses were also accepted.

- *Overuse of technical jargon*

The PNA is a technical document aimed primarily at a technical audience and some use of technical terms and terminology is unfortunately inevitable. However some changes have been made in the document to reduce some technical "jargon" to improve the reports wider accessibility.

- *Only reporting to district level and not to smaller (e.g. ward) level*

The PNA is required to consider the pharmaceutical needs of North Yorkshire. Data is often only available to district level, this coupled with the limited perceived benefits only breaking the county into smaller geographical areas led to the decision to organise the report to district level.

- *The decision to exclude any comments or challenges from the public or stakeholders on the laws and regulations around provision and access to pharmaceutical services*

Although the PNA does include comments about various aspects of pharmacy services received prior to production of the draft PNA, in its conclusions (summary of findings) it sets out only areas for improvement that are within the control of local commissioners. There are certain aspects of pharmacy services that are stipulated by national regulations which limit the freedom to determine how pharmacy services are provided locally. The regulations were set by Parliament and amendments can only be made by an act of Parliament. The PNA was constructed under the current regulations and is not an appropriate vehicle for influencing national legislation.

- *A breakdown of the type of organisation people who completed a health and social care provider's questionnaire worked for.*

Details of the type of organisation responses where received from are now included in the final report

- *Whether some views expressed in the Stakeholders and Social and health care provider's questionnaire were valid*

Comments contained in questionnaires are included as the comments expressing the view or opinion of the person who returned the questionnaire. The PNA is not supporting or validating comments, but is just recording that a comment has been made.

- *Urgent care unit in Scarborough should have been included as a future commissioning intension.*

The planned Urgent Care services in Scarborough and Malton have been included

- *Ignoring the existence of a nearby pharmacy when considering future need for pharmacy services in Scalby.*

The reference to there not being a pharmacy in Scalby has been removed to reflect the fact that a pharmacy is located just outside the village boundary.

- *Boots made offers to provide additional services if they are commissioned.*

NHS England has been made aware.

Appendix 13 – Glossary

AT	Area Team
AUR	Appliance Use Review
AWC CCG	Airedale, Wharfedale and Craven Clinical Commissioning Group
BNF	British National Formulary
CCG	Clinical Commissioning Group
DH	Department of Health
DLA	Disability Living Allowance
FP10	Forms used for NHS prescriptions
GRT	Gypsy, Roma and Traveller
HaRD CCG	Harrogate and Rural District Clinical Commissioning Group
HRW CCG	Hambleton, Richmondshire and Whitby Clinical Commissioning Group
HWB	Health and Wellbeing Board
JSNA	Joint Strategic Needs Assessment
LMC	Local Medical Committee
LPC	Local Pharmaceutical Committee
LPN	Local Professional Networks: separate clinical networks hosted and supported locally by NHS England for for dentistry, eye health and pharmacy.
MDS	Monitored Dosage Systems: is a medication storage device designed to simplify the administration of solid oral dose medication.
MUR	Medicines Use Reviews
NHSE	NHS England
NMS	New Medicines Services
NYCC	North Yorkshire County Council
NYYPNA	North Yorkshire and York PNA
OOHs	Out-of-Hours
PNA	Pharmaceutical Needs Assessment
SR CCG	Scarborough and Ryedale Clinical Commissioning Group
VOY CCG	Vale of York Clinical Commissioning Group

15.0 References

- i NHS England (2013) Improving health and patient care through community pharmacy– evidence resource pack
- ii The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 set out the legislative basis for developing and updating PNAs and can be found at: <http://www.dh.gov.uk/health/2013/02/pharmaceutical-services-regulations/> .
- iii Gill, P., MacLeod, U., Lester, H., Hegenbarth, A. (2013) *Improving access to health care for Gypsies and Travellers, homeless people and sex workers*, Royal College of General Practitioners Clinical Innovation and Research Centre
- iv North Yorkshire Health and Wellbeing Board papers can be accessed from <http://democracy.northyorks.gov.uk/committees.aspx?commid=27>
- v Cavanagh, S., Chadwick, K. (2005) *Health needs assessment – a practical guide*, National Institute for Health and Clinical Excellence
- vi North Yorkshire Joint Strategic Needs Assessment 2012 Report, accessed from www.nypartnerships.org.uk/jsna on 26/8/14
- vii NHS Choices pages on internet pharmacies, accessed from <http://www.nhs.uk/Service-Search/pharmacies/internetpharmacies> on 10/9/2014
- viii Health and Social Care Information Centre (2013) *General Pharmaceutical Services in England: 2003-04 to 2012-13*, accessed from <http://www.hscic.gov.uk/catalogue/PUB12683/gen-pharm-eng-200304-201213-rep.pdf> on 10/9/2014
- ix NHS England (2013) Improving health and patient care through community pharmacy– evidence resource pack
- x Pharmaceutical Services Negotiating Committee. <http://psnc.org.uk/psncs-work/about-community-pharmacy>
- xi Todd, A., Copeland, A., Husband, A., Kasim, A., Bamba, C. (2014) The positive pharmacy care law: an area-level analysis of the relationship between community pharmacy distribution, urbanity and social deprivation in England, *BMJ Open*: 4: e005764
- xii Public Health England (2014) Spend and Outcomes Tool, www.yhpho.org.uk/spot



North Yorkshire Health and Wellbeing Board
13 February 2015

**Update on North Yorkshire Clinical Commissioning Groups (NYCCGs),
Health and Adult Services, Children and Young People, District Councils Strategic
Plan Refresh**

1. Purpose

- 1.1.** This paper sets the context for and gives an update of the refresh for 2015/16 to the five North Yorkshire CCGs, North Yorkshire County Council Children and Young People services and the seven District Councils strategic plans.
- 1.2.** This paper is accompanied by a slide pack which gives a pictorial overview of the updated plans. North Yorkshire Health and Wellbeing Board (HWB) has five member CCGs and seven District Councils and the challenge for the Board is to find a way to understand the local strategy and implementation whilst having time to consider a wide ranging agenda that it is leading across North Yorkshire (NY). Members will note that a similar approach was taken in 2014/15 to ensure Health and Well Being Board had engagement and oversight of these organisations high level strategies and this approach worked well.
- 1.3.** The NY CCGs have a strong relationship with the HWB. The plan development has been an iterative process over the previous 12/15 months. The CCGs have been closely involved in the current refresh of both the Joint Strategic Needs Assessment (JSNA) and in the Health and Well Being Strategy and have aligned their plans to those strategies.

2. Background

- 2.1.** Each public sector organisation is accountable for developing a strategic plan. To enable wider and more strategic health economy planning, all CCGs will work in

close collaboration with relevant Area Teams, providers and Local Authorities. Plans need to reflect local priorities, as determined by each Health and Wellbeing Strategy.

- 2.2. The latest planning guidance for the NHS was published on 19 December 2014, entitled 'The Forward View into Action; planning for 2015/16'.
- 2.3. CCGs are not required to rewrite plans, however have the opportunity to refresh and update them in line with published guidance.
- 2.4. Given the complexity of the NY HWB geography, much of the local work is focussed in the locality areas with strong engagement between health, social care and provider partners. This is most evident in the local planning for integration in relation to the Better Care Fund Plans.
- 2.5. The North Yorkshire Better Care Fund plan has now been signed off and the focus moves to implementation through the oversight of the North Yorkshire Delivery Board and through local transformation boards.

3. Strategic Drivers

3.1. Better Care Fund

- 3.1.1. The North Yorkshire Health and social care partners have worked closely together on developing the North Yorkshire Better Care Fund – A new era for health and social care in North Yorkshire. The HWBB have been closely involved during the development and final refreshes of this plan. Our plan was signed off in December and we are now able to focus on delivery. As previously discussed the BCF amalgamates elements of local plans to give a coherent overview of the transformation of services to support care closer to home and individuals reduce the reliance on hospital based stays, where admissions can be avoided and patients cared for in more appropriate settings.

3.2. Primary Care co- commissioning

- 3.2.1. 'Next steps toward Primary Care Co-commissioning' was published on 10 November 2014. It gives clinical commissioning groups (CCGs) the opportunity to choose afresh the co-commissioning model they wish to assume. It clarifies the opportunities and parameters of each co-commissioning model and the steps towards implementing those arrangements. The document has been developed by the joint

CCG and NHS England Primary Care Commissioning Programme Oversight Group in partnership with NHS Clinical Commissioners.

3.2.2. Primary care co-commissioning is one of a series of changes set out in the NHS Five Year Forward View. Co-commissioning is a key enabler in developing seamless, integrated out-of-hospital services based around the diverse needs of local populations. It will also drive the development of new models of care such as multispecialty community providers and primary and acute care systems.

3.2.3. There are three primary care co-commissioning models CCGs could take forward:

Level 1	Greater involvement in primary care decision making
Level 2	Joint decision making
Level 3	Delegated commissioning arrangements

The scope of primary care co-commissioning in 2015/16 is general practice services only. For delegated arrangements this will include contractual GP performance management, budget management and complaints management. However, co-commissioning excludes all functions relating to individual GP performance management (medical performers' lists for GPs, appraisal and revalidation). The terms of General Medical Services (GMS) contracts and any nationally determined elements of Personal Medical Services (PMS) and Alternative Provider Medical Services (APMS) contracts will continue to be set out in the respective regulations and directions.

3.2.4. Under joint and delegated arrangements, CCGs will have the opportunity to design a local incentive scheme as an alternative to the Quality and Outcomes Framework (QOF) or Directed Enhanced Services (DES).

3.2.5. With regards to governance arrangements, NHS England developed draft governance frameworks and terms of reference for joint and delegated arrangements on behalf of CCGs. CCGs are encouraged to utilise these resources when establishing their governance arrangements. These governance arrangements will be assessed as part of the application process.

3.2.6. A significant challenge of primary care co-commissioning is finding a way to ensure that CCGs can access the necessary resources as they take on new responsibilities. Pragmatic and flexible local arrangements for 2015/16 will need to be agreed by

CCGs and area teams.

- 3.2.7. There is already conflicts of interest guidance in place for CCGs. This will be strengthened in recognition that co-commissioning is likely to increase the range and frequency of real and perceived conflicts of interest, especially for delegated arrangements. A national framework for conflicts of interest in primary care co-commissioning was published as statutory guidance in December 2014.
- 3.2.8. The approvals process for co-commissioning arrangements will be straightforward. Unless a CCG has serious governance issues or is in a state akin to “special measures”, NHS England will support CCGs to move towards implementing co-commissioning arrangements. NHS England also intends to make it as simple as possible for CCGs to change their co-commissioning model, if required.
- 3.2.9. On-going assurance of co-commissioning arrangements will form part of the wider CCG assurance process.
- 3.2.10. North Yorkshire CCG Approach

Each CCG submitted an application to NHS England in January 2015. The table below shows the level of model applied for:

Clinical Commissioning Group (CCG)	January Submission
Harrogate & Rural District CCG	Level 3 - Delegated commissioning arrangements
Scarborough & Ryedale CCG	Level 3 - Delegated commissioning arrangements
Vale of York CCG	Level 3 - Delegated commissioning arrangements
Hambleton, Richmondshire & Whitby CCG	Level 2 - Joint decision making
Airedale Wharfedale & Craven CCG	Level 1 - Greater involvement

- 3.2.11 The applications will now be taken forward to the next stage of the process by the

regional moderation panel members, who will review the proposals and attachments. The panel met on Thursday 15 January and CCG will be contacted directly by the regional team regarding any follow up questions.

3.2.12 The regional moderation panel will then recommend proposals for approval for the review of the national moderation panel, which will confirm final recommendations to the National Directors.

3.4 Primary Care Infrastructure Fund

3.4.1 NHS England has launched a £1bn four year investment programme that will sit alongside the annual incremental premises programme. This means that in 2015/16 investment will be accelerated into infrastructure in general practice. This extra money will be specifically targeted at increasing capacity in primary care. This will enable better access to general practice and its associated community services, improving services for the frail and elderly and hence reducing unnecessary demands on urgent care services, as well as building the foundations for more integrated care to be delivered in community settings.

3.4.2 This extra funding will enable practices to progress previously submitted applications for premises improvement and development, but only where they extend practice capacity and offer new clinical services in line with ambition set out in the Five Year Forward View. All capital proposals will need to demonstrate how they will offer more patient contact time as a result, and help reduce emergency admissions by the frail and elderly.

The closing date for applications against the initial £250m is 16 February 2015.

4. North Yorkshire Delivery Board (NYDB), Commissioner Forum and Provider

4.1.1 The HWB undertook a governance review in autumn 2014. One of the recommendations approved was to establish a North Yorkshire Delivery Board, Commissioner Forum and Provider.

4.1.2 The NYDB will meet quarterly and membership of this Board more accurately reflects the range public services across North Yorkshire.

4.1.3 The first meeting of NYDB took place in January 2015 and in agreement with HWB members will lead the refresh of the North Yorkshire Joint Health and Wellbeing Strategy. In addition the Board agreed to formulate a work programme that enables key pieces of work to be developed across the footprint of North Yorkshire to underpin both delivery of JHWS and the wider plans described in the BCF and individual strategic plans. The Board is therefore working on defining its work plan.

Key areas identified are:

- Workforce
- Estates
- North Yorkshire Mental Health strategy
- Market management
- Carers Strategy

5. Individual organisation updates

5.1. Health and Adult services NYCC

5.1.1 NYCC Health and Adult Services has reviewed its plans and budget profiles for the year ahead and is about to launch its 2020 HAS vision, which sets out priorities for service re-design and £21.5m budget savings by 2019/20.

5.1.2 The directorate's focus is 'people living longer, healthier, independent lives', delivered through four programmes:

- a distinctive public health agenda for North Yorkshire
- independence with care and support when I need it
- care and support where I live
- better value for money

5.1.3 Priorities for 2015/16 will include implementation of the first phase of the Care Act; a major procurement of new extra care schemes; development of new sexual health, healthy child and targeted prevention services; the re-design of assessment and re-ablement pathways; the introduction of new integrated services with CCGs and NHS Trusts across the County, some of which will be funded by the Better Care Fund; and the development of social care mental health services.

5.2 Children and Young Peoples Services NYCC

5.2.1 NYCC Children and Young People's Service has reviewed its strategic priorities and budget profiles for the year ahead and has made a robust start to delivering its 2020 North Yorkshire savings programme. 2015-16 will see the implementation of some major transformation programmes including the transformation of Preventative Services, the launch of the "No Wrong Door" innovation project (which has secured £2.15 million through the Department for Education innovation fund), a new way of delivering school improvement and the delivery of the 5-19 Healthy Child Programme alongside the transfer of commissioning responsibilities to Local Authorities for the 0-5 HCP from October 2015.

5.2.2 The directorate's strategic priorities are embedded in "Young and Yorkshire" the new Children and Young People's Plan for 2014-17 namely:

- Ensuring that education is our greatest liberator (with more pupils attending a good or outstanding school or setting)
- Helping all children enjoy a happy family life (with a safe reduction in the numbers of looked after children)
- Ensuring a healthy start to life (with more children & young people leading healthy lifestyles)

5.2.3 Priorities for 2015/16 will include:

- work towards an integrated 0-19 Healthy Child Programme with staff ideally co-located or at least aligned with the new Area Prevention Teams
- closing the attainment gap for vulnerable young people through effective use of the Pupil Premium and our Closing the Gap Strategy
- implementing new statutory requirements and transforming the way in which we assess and support children and young people with special educational needs and disabilities including significantly enhancing transitions to adulthood on a partnership basis
- improving mental health support for young people through effective delivery of the Emotional and Mental Health Strategy and improved joint commissioning

- improving health outcomes for looked after children and care leavers through increased take up of health and dental checks/new health passports etc.
- reducing further the number of children and young people coming into care through both the No Wrong Door innovation project and the transformation of Prevention Services to provide a better targeted and more joined up approach to families
- ensuring fewer young people engage in risk-taking behaviours through effective re-commissioning of sexual health services and delivery against the new alcohol strategy

6. District Councils

6.2.1 One of the main priorities for District Councils over the next two years continues to be housing. Poor housing is one of the major causes of health inequalities. The use of Disability Facilities Grant, the link and integration to the Better Care Fund and the implementation of the Care Act to support people to live in their own homes is of paramount importance. Delivering housing need and providing a stock of affordable homes which are designed for life forms a key part of the housing strategy.

6.2.2 Access to affordable fuel, the ability to supply a warm home to support vulnerable and elderly people is very high on the agenda. District Councils have a natural role in their local community infrastructure to support people in rural communities. District Councils remain the key point of contact for people who are vulnerable or at risk of being vulnerable, e.g. those affected by the impact of welfare reforms such as universal credit.

7. Airedale Wharfedale and Craven CCG

7.3.1 NHS Airedale Wharfedale and Craven CCG have continued to work on their Right Care vision which is a shared ambition across providers and commissioners to create a sustainable health and care economy that enables people to be healthy, well and independent. As a result we have updated our strategic objectives to more accurately reflect our ambition:

7.3.2 We will commission models of care that will address physical, psychological and social needs to:

- Reduce reliance on reactive emergency and urgent care through more planned and proactive model of services

- Change the mind-set of professionals to promote active participation in health and wellbeing of the individual
- Change the mind-set of the public so they become an active participant in their health and care
- Deliver the pledges as set out in the NHS constitution

7.3.3 To deliver this, we are currently designing a new model of care with health and care partners where care will be person-centred with a timely response, hospital will be avoided where possible and people can retain their health, wellbeing and independence for longer by developing and being supported in achieving their goals. This will not just focus on the frail elderly population but on those with long term conditions and in general supporting the whole population with both their physical and mental health needs. In our view this should help reduce the widening gaps in health and wellbeing; care and quality; and funding and efficiency; and deliver on what our patients are telling us - they want care to be accessible and joined up with clear communication.

7.3.4 We have worked with partners to look at international and national best practice to support the design of these models and we have been successful in our application to the Integrated Pioneers programme which will provide additional support to accelerate our delivery of new models of care

8. Hambleton Richmondshire and Whitby CCG

8.1 Operational Plan 2015/16

8.2 HRW CCG has a five year Strategic Commissioning Plan which is built around 7 key strategic initiatives. The plan for 2015/16 will be to refresh and progress these same strategic initiatives, supported by key local projects and the implementation of the Better Care Fund. Key priorities for the organisation for 2015/16 include the following:

8.3 Transforming the Community System

- Successful completion of the procurement of Community and Out of Hours Services and the delivery of these services in the Whitby locality, strengthening local partnerships and improving the integration of care
- Implementation of the “Fit for the Future” project which will keep the Friarage Hospital at the centre of healthcare for the people of Hambleton and Richmondshire and radically re-think the delivery of health and care in rural

areas, including the use of technology

- Create a step change in the integration of health and social care, working together across the system to shift the focus from illness to wellness, particularly focusing on bringing together fast response, intermediate care and START services

8.4 Primary Care Productivity and Development

- Develop our co-commissioning responsibilities with NHS England and support primary care to strengthen its involvement in the developing community service models of care

8.5 Mental health and dementia

- Build on the successful launch of liaison psychiatry and IAPT (improving access to psychological therapies) through the Better Care Fund to continue to better support patients experiencing mental health problems and ensure that we provide care in the most appropriate setting in a timely fashion
- Deliver the Better Care project to establish improved dementia pathways and outcomes to ensure more people are diagnosed early and receive appropriate care

8.6 Children's health

- Working with the North Yorkshire Partnership Commissioning Unit to continue the successful implementation of the new paediatric short-stay assessment unit, improve local autism services, and a range of other initiatives to address children's physical and mental health needs

8.7 Clinically appropriate planned care

- Continuing to work with our acute Trust partners, particularly South Tees Hospitals NHS Foundation Trust, to maintain and improve waiting times targets and implement a range of projects to improve patient services and clinical outcomes, for example in relation to community and low back pain and musculo-skeletal services

8.8 Long Term Conditions

- Continue to build a system-wide approach to the proactive management of long term conditions, involving patients, community matrons, case managers and GP practices that enables patient goals to be at the heart of a care planning process

that empowers people to self-care and helps prevent admission to hospital

8.9 **Ill-health prevention**

- In partnership with Public Health and our District Councils, continuing the successful roll-out of lifestyle referral services in all three of our localities, as part of a range of projects to give individuals and communities the skills and motivation they need to manage their own lifestyle risk-factors

9. **Harrogate and Rural District CCG**

9.1 NHS Harrogate and Rural District has made good progress against all key milestones within the 5 year Strategic plan. As we move into year 2 of operational delivery, the key focus will be upon the work we have been leading across the health and social care community on integration of services and the transformation of the community service locally. A system wide event was held in December – ‘Mapping the Future’. This is the culmination of a review of community services and detailed local work with clinicians, the public and partners to describe the model of future services.

9.2 The following gives update on the six Strategic priority areas and key focus for 2015/16

9.3 **Urgent Care:**

- Make progress towards a single point of access for urgent care.
- Evaluate the system wide resilience schemes , and ensure redesign and investment in 2015/16 is focussed upon the ensuring the most appropriate and quality pathway of care for our patients

9.4 **Long term conditions**

- Work in partnership to ensure swift and robust redesign and delivery of the agreed new model of Integrated out of Hospital Care.
- Continue and expand Risk Stratification and – this means that those people with long term conditions at greater risk of admission have a comprehensive individual care plan.
- Implement and evaluate the wide range of Better Care Fund Schemes, working in partnership with the acute provider, local authority and voluntary sector.

9.5 **Vulnerable people**

- Following on the investment in IAPT and crisis services there will be a focus to continue to improve Mental Health Services access in these areas.

- Act on the findings of the local review of mental health services and commission improved access to services locally

9.6 **Elective Care**

- Implement the work with Harrogate District Foundation Trust (HDFT) consultants to redesign follow-up pathways, ensuring only appropriate patients and conditions are followed up within the acute setting.
- Continue to work with practices and the Trust to ensure all outpatient referrals are clinically appropriate and contain all required information and communication.
- Implement recommendations of 2014/15 Clinical Speciality Reviews, including cardiology and radiology. We will undertake further reviews against a number of specialities, include a community wide review of Ophthalmology services. These will ensure appropriate access and improved patient experience.

9.7 **Health and Well Being**

- We will work to embed preventative lifestyle pathways and link closely with colleagues in public health and Leisure at Harrogate Borough Council to encourage activity within the district.
- HaRD CCG is an active partner in the local Public Sector Leadership Board and we will continue to work with all our partners to focus on improving local outcomes.

9.8 **Primary Care**

- Move towards taking delegated responsibility for primary care budgets from NHS England.
- Deliver our Primary Care Strategy including future workforce development; primary care access; managing long term conditions, further developing care planning and focussing on mental health elements linked to primary care.
- In addition, if successful we will work with the Yorkshire & Humber Alliance in support of the Prime Ministers Challenge fund bid.

10. **Scarborough Ryedale CCG**

- 10.1 In 2015-16 NHS Scarborough and Ryedale Clinical Commissioning Group (SRCCG) will continue with the implementation of its 5 year strategy. This will consolidate the progress seen in its first two years of operation. Highlights for 2015-16 include:

- Establishment of the Integrated Urgent Care service, operational from April 1, after the successful procurement conducted in 2014-15.
- Full implementation of the Ryedale 'Care Hub', operational from January 2015, but with 2015-16 as its first full year.
- Further improvements in primary care access, supported by the SRCCG development of General Practice co-commissioning.
- Speciality service reviews improving access, patient experience and efficiency in: Cardiology; Gynaecology; Diabetic Medicine; Rheumatology.
- Establishment of a new 'Enablement Service' replacing the previous chronic pain management service with a multi-disciplinary service compliant with best practice guidance.
- Further investments in Mental Health with particular reference to acute based Mental Health liaison and realising the benefits of investment in the Improving Access to Psychological Therapy (IAPT).

10.2 The CCG will continue with its programme of efficiency improvement to support achieving financial targets and allowing the establishment of the Better Care Fund. SRCCG is an active partner working with a number of major stakeholders and this will be developed further in 2015-16. The engagement through partnerships such as the Scarborough Public Service Executive will see further joint working in areas such as alcohol and substance abuse and providing appropriate care and support for a range of patients with mental health needs.

10.3 Organisationally SRCCG is working with NHS England to establish effective co-commissioning of service, such as General Practice. The re-organization of NHS England and the Yorkshire and Humber Commissioning Support will align with the CCG's organizational development plan, in collaboration with both CCGs and Local Authorities in North Yorkshire and York.

11. **Vale of York CCG**

11.1 NHS Vale of York has achieved national recognition for the work being done on integration across health and social care. We were one of only 6 CCGs chosen to be part of the "New Models of Care Programme" in October 2014, working alongside NHS England and the NHS Leadership Academy. We were also chosen to be one of 11 CCGs given "Pioneer 2" status on 27 January for the same strategic work programmes. Our primary focus is on remodelling the local health and social care system in order to make it fit for the future and we have just submitted an expression of interest in

becoming a Vanguard Site for New Models of Care. These three national programmes all map perfectly against our 5 Year Integrated Plan that was published last year. We are also well advanced with plans to procure a new mental health service and redevelop Bootham Park Hospital.

12. Recommendations

The Health and Wellbeing Board is asked to:

1. Note and support the content of this paper detailing the refresh of each individual organisations strategic plan.
2. Note the very positive work aligning local plans with the overarching ambition of the North Yorkshire Better Care Fund plan.

Update on Strategic Plans for NY Districts 2015...

- **To provide sufficient housing which young families can afford. Recognise the link with housing and the health and wellbeing of the older resident and most vulnerable. Key player in the housing market, focus on building/providing houses in partnership e.g Mercury Housing Co Ltd**

- **Disabled Facilities Grant beyond 2016**

- **A strong local economy - To drive economic prosperity recognising the link between healthy outcomes and good quality and enduring employment prospects**

- **Environment – Using our regulatory and statutory services to promote a safe, healthy, feel-good sense of place in each of our Districts**

- **Sport and Recreation - To provide a range of leisure services that extend the opportunity for all to enjoy healthy lifestyles**

- **Peace of Mind - To be a compelling advocate for the continued provision of local access to quality local healthcare services for the benefit of the local communities that rely upon them**

- **To stop the exodus of young people and young families in rural areas by providing the jobs and homes required, creating vibrant communities**

Strategic Priorities 2015/16 (Year 2)

Priorities	2015/16 Work Plan
Urgent Care	<ul style="list-style-type: none"> Continue to move toward Urgent Care Model Implement recommendations of CAPA acute and community bed audit
Long Term Conditions	<ul style="list-style-type: none"> Move toward model of Integrated Out of Hospital Care Continue with Risk Stratification within GP Practices Fully implement Better Care Fund Schemes
Vulnerable People	<ul style="list-style-type: none"> Implement Findings of Mental Health review Commission improved access times for MH patients Implement LD strategy
Elective Care	<ul style="list-style-type: none"> Redesign Acute Follow Up Pathways Full implementation of RSS Implement recommendations of 2014/15 Clinical Speciality Reviews
Health & Well Being	<ul style="list-style-type: none"> Embed preventative lifestyle pathways Work with partners on “commissioning for prevention
Primary Care	<ul style="list-style-type: none"> Full delegation of Primary Care Co-Commissioning Develop plans for Integrated Personalised Commissioning and Personalised Health Budgets



Plan on a Page 2014-16 (Revised January 2015)

Vision

Improving the health and well-being of our communities

Values

To commission high quality services: To engage patients, carers and other organisations in our planning and decision process: To ensure value for money: To be open and honest in our transactions, and accountable to our communities

Commitment

Ensuring NHS Constitution standards are met: Delivering the NHS Mandate: Engaging and Empowering Citizens: Delivering the NHS Outcomes Framework: Facilitating Change in health and Social Care

Strategic Priorities

Improving Health and Reducing Inequality

Sustainable, high quality services

Building Strong Community Systems

2014/15

Re-design OOH/urgent care service and proceed to tender - New service procured, to commence 1st April 2015
 Review diabetes, rheumatology, ophthalmology, chronic pain, cardiology services - Changes being made to each service. New pain service to commence 1st April 2015
 Introduce liaison psychiatry, increase access to IAPT, review CAMHS, ADHD and Autism pathways - Liaison psychiatry commenced, new provider for IAPT service, review CAMHS underway, developing NICE compliant pathways for children's ADHD and Autism. Autism waiting list reduced to 6months by end of March 2015
 Develop Community Hub in Malton and roll out to Scarborough Malton Hub commenced; engagement exercise underway for Scarborough service
 Continue implementation of Neighbourhood Care Teams - Integrated Nurse pilot to commence March 2015 with Peasholm, Southcliff and Prospect Road Surgeries
 Primary care reconfiguration and federation discussions -Co-commissioning delegated responsibility agreed, Federation established
 Undertake capacity planning to ensure system resilience -Ongoing with YFT. Planned Care Group established, Chaired by CCG GP lead, programme of work being agreed. Urgent Care Group Established, Chaired by VoY GP, overseeing winter schemes. Both groups working across health economy and including all partners
 Service improvement event "The Perfect Week"- Perfect week took place May 2014. Operation Fresh-start commenced January 2015 to improve patient flow through hospital
 Lay foundation for whole scale health and social care changes - Partner in Better Care Fund, Malton hub and Operation Fresh-start - bringing health and social care together

2015/16

Implement delegated responsibility for co-commissioning primary care
 Fully integrated community hubs linking with neighbourhood care teams to provide wrap around support for patients with long term conditions and the frail elderly- Malton Hub established. Planning and engagement for Scarborough commenced.
 Care home support- Malton Hub care home support commenced
 Integrated OOH/Urgent care service - To commence April 2015
 Review sleep apnoea service
 Implement service review changes/procurement identified in 2014/15 - Diabetes, Rheumatology, Neurology, Pain, Orthopaedic triage, End of Life Care, Ophthalmology specifications and project plans agreed. Referral Support Service established.
 Continue to transfer activity/resources from secondary care to community and primary care
 Continue to develop mental health services
 Maximise utilisation of voluntary sector- Review of contracts/providers undertaken. Planning for 15/16 services commenced.
 Review provision of diagnostics

Operational Plan 2015/16 (Year 2)



Strategic Initiative	Improvement programmes
Integrated Care & Out of Hospital Care	<ul style="list-style-type: none"> • New Models of Care Programme & Pioneer Wave 2 • 3 Integration pilots • Vanguard application for leading cohort of New Models of Care • Self care, prevention and well being – alcohol, weight, smoking
Primary Care	<ul style="list-style-type: none"> • Co-commissioning of primary care (level 3 full delegation application) • Increasing access & 7 day working • Risk stratification • Addressing unwarranted variation • Practice improvement programme
Urgent and emergency care	<ul style="list-style-type: none"> • Roll out of urgent care networks at (sub) regional level • Embedding system resilience schemes throughout the year – support delivery of A&E 4 hr target • Workforce transformation across system
Planned (Elective) Care	<ul style="list-style-type: none"> • Further extension of Referral Support Service (RSS) • Pathway review/ transformation & extend capacity & choice where RTT challenges (elective & diagnostics)
Mental health & Learning Disabilities	<ul style="list-style-type: none"> • MH & LD procurement now live (includes CAMHS) • Bootham Hospital estates improvement • Increasing access IAPT; dementia diagnosis ; early intervention in psychosis; liaison psychiatry in acute hosp • Transforming care and self assessments for LD
Cancer & EOL	<ul style="list-style-type: none"> • Hospice at home; care homes quality assurance; EOL pathway review; breast cancer pathway review • National cancer strategy 2015
Women's & Children's	<ul style="list-style-type: none"> • National maternity strategy and recommendations for future models and access/ choice - Summer 2015 • Asthma; autism and paediatric zero length of stay review; children's self harm
Other Priorities	<ul style="list-style-type: none"> • Carers & volunteers; NHS Citizen and engagement; young offenders; electronic records & referrals • Addressing health inequalities and embedding parity of esteem in all improvements and investment

VISION

Proactive, co-ordinated, person
centred care

STRATEGIC OBJECTIVES

We will commission models of care that will address physical, psychological and social needs to:

- Reduce reliance on reactive emergency and urgent care through more planned and proactive model of services
- Change the mind-set of professionals to promote active participation in health and wellbeing of the individual
- Change the mind-set of the public so they become an active participant in their health and care
- Deliver the pledges as set out in the NHS constitution



MODELS OF CARE

“Extensivist” & “Enhanced
primary care” with key
focus on self-care & illness
prevention &
24/7 integrated care

PRINCIPLES

- No one in hospital unless their care cannot be delivered safely in the community 24/7
- No one discharged to long term care without the opportunity for a period of enablement
- 24/7 access to and delivery of co-ordinated care, which is needs driven and not about age, condition or location

HRW Strategic Plan – Year 2

- Continued delivery of existing plan – no change in direction
- 7 existing strategic initiatives
- Continuing to transform the community system through “Fit 4 the Future”
- Good partnerships in place through System Resilience Group
- Significant investment through BCF and CCG resources, particularly into community and mental health services





North

Yorkshire County Council



2020 HAS Programme – People Living Longer, Healthier, Independent Lives

Richard Webb - Corporate Director

2020 Health and Adult Services: Programmes



Priorities for 2015-16

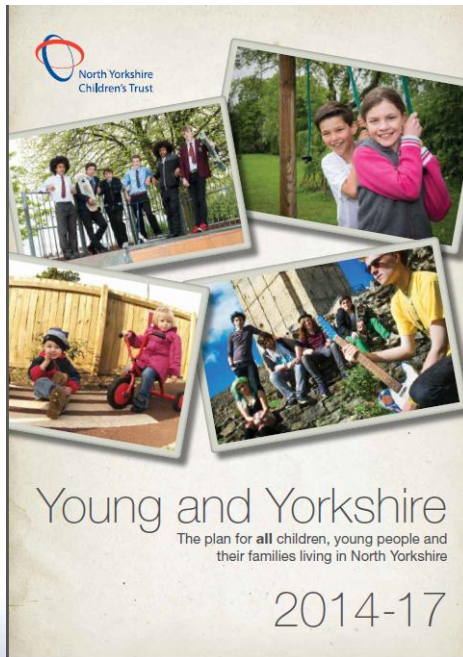
- Implementation of the first phase of the Care Act
- Major procurement of new Extra Care schemes
- Development of new sexual health, healthy child and targeted prevention services
- Re-design of assessment and reablement pathways
- New integrated services with CCGs and NHS Trusts, some funded by BCF
- Development of social care mental health services



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“Young and Yorkshire” Children and Young People’s Plan 2014-17



- Ensuring that education is our greatest liberator (with more pupils attending a good or outstanding school or setting)
- Helping all children enjoy a happy family life (with a safe reduction in the numbers of looked after children)
- Ensuring a healthy start to life (with more children & young people leading healthy lifestyles)



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“Young and Yorkshire” Priority 3: More children & young people lead healthy lifestyles

- Children feel safe and are safe
- Children & young people enjoy good emotional & mental health
- Children enjoy good health & development, particularly in their early years
- Looked after children & children with disabilities or learning needs have improved health and well-being outcomes
- Fewer young people engage in risk-taking behaviours



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Priorities for 2015-16

- Re-modelling of all of children's preventative services into a single county-wide 0-19 service to provide a better targeted and more integrated approach to families.
- Work towards an integrated 0-19 Healthy Child Programme with staff co-located or aligned with the new Area Prevention Teams
- Closing the attainment gap for vulnerable young people
- Meeting new statutory requirements and transforming assessment and support for children and young people with SEND including enhancing transition to adulthood on a partnership basis
- Improving mental health support for young people through Emotional and Mental Health Strategy and improved joint commissioning
- Improving health outcomes for looked after children and care leavers
- Reducing further the number of children and young people coming into care through "No Wrong Door" innovation and early help through the new Prevention Service
- Ensuring fewer young people engage in risk-taking behaviours



WORK PROGRAMME/CALENDAR OF MEETINGS 2015/2016

February 2015

			ADDITIONAL NOTES
March 2015			Mid cycle briefing Workshop 25 March 2015 Ryedale District Council Offices, Malton
April 2015			
May 2015			
June 2015	Wednesday 3 June 2015 at 2.00pm Venue TBA	<u>Strategy Assurance</u> <ul style="list-style-type: none"> • Delivery Board/Better Care Fund Performance Update (Contact Richard Webb) • NY Tobacco Strategy (Contact Emma Davis) • Adult Mental Health Services – Progress /Update See mins July 2014) 	Report Deadline Tues 26 May 2015

			<ul style="list-style-type: none"> • Mental Health Strategy (Contact Janet Probert) • Hubs Vanguard Pioneers Accelerators Investment Community Services Transformational Change <u>Information Sharing</u>		
July 2015	Friday 10 July 2015 at 10.30 am		<u>Strategy</u> <u>Assurance</u> <u>Information Sharing</u>		Report Deadline Mon 29 June 2015
Aug 2015					Agenda Planning Meeting
Sept 2015	Wednesday 30 September 2015 at 2.00pm		<u>Strategy</u> <u>Assurance</u> <u>Information Sharing</u>		Report Deadline Fri 18 Sept 2015
Oct 2015					Agenda Planning Briefing
Nov 2015	Friday 27 November 2015 at 10.30 am		<u>Strategy</u> <u>Assurance</u> <u>Information Sharing</u>		Report Deadline Mon 16 November 2015
Dec 2015					
Jan 2016					Agenda Planning Briefing
February	Wednesday 24 February 2016 at		<u>Strategy</u>		Report Deadline Friday 12 February

2016	2.00pm	<u>Assurance</u> Information Sharing	2016
March 2016			Agenda Planning Briefing
Apr 2016			
May 2016	Friday 6 May 2016 at 10.30 am	<u>Strategy</u> <u>Assurance</u> Information Sharing	Report Deadline Mon 25 April 2016