





General Pharmaceutical Services in England:

2002-03 to 2011-12

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Contents

Executive Summary	4
Introduction and Background Information	5
Findings	5
Community pharmacy dispensing activity	5
Community pharmacy ownership	7
Community pharmacy applications	7
Appeals	9
Control of entry: exempt category pharmacies	9
Community pharmacy openings and closures	10
Appliance contractors	10
Services provided by community pharmacy and appliance contractors	11
Essential Small Pharmacies Local Pharmaceutical Services (ESPLPS) schoother Local Pharmaceutical Services (LPS) schemes	eme and 11
Medicines Use Reviews	11
Appliance Use Reviews	12
Stoma Appliance Customisation	12
Local Enhanced Services	12
Notes and Definitions	13
Further information	18
Index of Tables	19

Executive Summary

General Pharmaceutical Services in England: 2002-03 to 2011-12 shows information about services provided by community pharmacies in England in contract with Primary Care Trusts (PCTs) to dispense NHS prescriptions between 2002-03 and 2011-12 under the NHS (Pharmaceutical Services) 2005 regulations, including reforms to the Control of Entry regulations, which were introduced in England in April 2005. The publication also includes appliance contractor NHS activity. The data in this publication covers various time periods between 2002-03 up to and including 2011-12. Certain tables show a limited number of years within the time period due to changes in contractual arrangements for the services provided.

The data provided in this publication comes from the following sources: NHS Prescription Services of NHS Business Services Authority, PCTs and NHS Litigation Authority Family Health Services Appeal Unit.

- NHS Business Services Authority reports show that there were 11,236 community pharmacies in England at 31 March 2012, compared to 10,951 at 31 March 2011, an increase of 285 (2.6 per cent). There has been an increase of 15.3 per cent (1,488) since 2002-03.
- The number of prescription items dispensed by community pharmacies in England in 2011-12 was 885.0 million compared to the 81.9 million items dispensed in general practices and 6.4 million by appliance contractors. This was an increase of 34.3 million (4.0 per cent) from 2010-11 when the figure for community pharmacies was 850.7 million. There were 566.3 million prescription items dispensed by community pharmacies in 2002-03.
- There were 135 appliance contractors in contract as at 31 March 2012, of which 120 were actively dispensing between 1 April 2011 and 31 March 2012, dispensing 6.4 million items. Since 2002-03 this is a decrease of 42 appliance contractors actively dispensing but an increase of 4.4 million items dispensed.
- A total of 2.4 million Medicines Use Reviews (MUR) were conducted by community pharmacy contractors in England in 2011-12, compared to 2.1 million in 2010-11, an increase of 325,524 (15.4 per cent).
- The number of local enhanced services provided by community pharmacies in 2011-12 decreased by 1,679 (5.4 per cent) to 29,283 since 2010-11 and an increase of 12,363 (73.1 per cent) since 2005-06. Of the twenty services commissioned by PCTs the most commonly commissioned services in 2011-12 were Stop Smoking (19.2 per cent), Supervised Administration (19.1 per cent), Minor Ailment Scheme (12.1 per cent) and Patient Group Direction (11.9 per cent).

Note NHS (Pharmaceutical Services) Regulations 2012 were laid before Parliament and came into force on 1st September (see http://www.legislation.gov.uk/uksi/2012/1909/made). The 2012 regulation data will be reported as part of the 2012-13 publication

Data for Wales is available from the Welsh Assembly Government, Scotland data is available from Information Services Division Scotland and Northern Ireland data is available from the Business Services Organisation.

Introduction and Background Information

This annual publication shows information about services provided by community pharmacies in England in contract with Primary Care Trusts (PCT) to dispense NHS prescriptions. The publication also includes appliance contractor NHS activity. In 2005 a new community pharmacy contract was introduced in England which included reforms to the Control of Entry regulations. This comprised of a revised control of entry test and four complete exemptions to the test (provided certain criteria are met), as well as a streamlining of the application and decision-making process. The 2005 regulations were replaced by NHS (Pharmaceutical Services) Regulations 2012 on 1st September 2012 and will be included in next year's report together with data for the 2005 regulations which were in force for the first 5 months of 2012/13.

The data in this publication covers the period 2002-03 to 2011-12. Certain tables show a limited number of years within the time period due to changes in contractual arrangements for the services provided.

This publication is the only national level dataset that shows community pharmacy numbers at the various area aggregations, including Strategic Health Authority (SHA) and Primary Care Trust (PCT), and also pulls together data from various sources on specific parts of the community pharmacy and appliance contractor contracts, dispensing and appeals. Data provided in this publication comes from the following sources: NHS Prescription Services of NHS Business Services Authority, PCTs and NHS Litigation Authority Family Health Services Appeal Unit.

Data is collected and published to assist the Department of Health monitor the community pharmacy market to assess the impact of the current regulatory framework, particularly in relation to patient access and choice. There are also a number of professional bodies who use the data to inform negotiation and commissioning of services including the Dispensing Doctors Association, National Pharmacy Association, Pharmaceutical Services Negotiation Committee and Office of Fair Trading. The publication is also quoted in various profession journals and in the media. Comments on this publication can be made via the "Have your say - give us your comments on this publication" document available on the web page containing this publication.

Data for the devolved administrations is available directly from the relevant administration. Wales data is available from the Welsh Assembly Government. Scotland data is available from Information Services Division Scotland. Northern Ireland data is available from the Business Services Organisation. See the Notes and Definitions section below for further information on the differences between the coverage, definitions and measures in the England data and the data of the devolved administrations.

Findings

Community pharmacy dispensing activity

This publication only reports activity relating to prescriptions dispensed by community pharmacies. It does not report on prescriptions dispensed by general practices which are registered as dispensing practices. Further information regarding total community dispensing in England is available in another Health and Social Care Information Centre (HSCIC) publication, Prescriptions Dispensed in the Community, which covers all prescriptions dispensed by community pharmacies, appliance contractors and dispensing doctors, as well as prescriptions for items personally administered in general practices.

In England, a new contractor cannot be entered onto a NHS pharmaceutical list unless their inclusion is "necessary or expedient" to secure the adequate provision of pharmaceutical services locally. This is known as the "control of entry" test. Therefore, if a new service provider is judged neither necessary nor expedient the NHS must refuse the application. However there are rights of appeal. See the Community Pharmacy Applications section and tables 5a, 5b, 7 and 7a for appeals data.

Table 1 (page 21) shows the number of community pharmacies in contract at 31 March of each year. In 2011-12 there were 11,236, an increase of 285 (2.6 per cent) over 2010-11. During the ten years covered by this publication there has been a 15.3 per cent increase (1,488) in the number of community pharmacies with a continued increase since 2004-05.

Table 1 and **Figure 1** (pages 21 & 22) show the total dispensing activity for the year ending 31 March of each year. The number of prescription items dispensed by community pharmacies in England in 2011-12 was 885.0

General Pharmaceutical Services in England: 2002-03 to 2011-12

million compared to the 81.9 million items dispensed by GPs and 6.4 million by appliance contractors. This was an increase of 34.3 million (4.0 per cent) from 2010-11 when the figure was 850.7 million. In 2011-12, the number of prescription items dispensed, number of dispensing fees received and average number of fees per pharmacy showed an increase over the previous year and followed the year-on-year trend of the past 10 years.

The number of prescription items dispensed has increased by 56.3 per cent, the number of dispensing fees increased by 56.9 per cent and the average number of fees per pharmacy increase by 36.1 per cent over the last 10 years. The average net ingredient cost (NIC) per fee has decreased for the seventh consecutive year to £8.59 in 2011-12, decreasing by 21.0 per cent (£2.28) since 2002-03.

This fall in the average NIC per fee was due to a combination of factors including:

- The Medicines Margin Survey resulting in adjustments to category M generic drug reimbursement prices as agreed under the Community Pharmacy Contractual Framework
- An increase in generic dispensing rates (due to patent expiry and loss of exclusivity for a number of leading branded drugs) and the continued efforts to promote generic prescribing where clinically appropriate
- The Pharmaceutical Price Regulation Scheme (PPRS), which has resulted in a reduction in branded drug prices (with price cuts of 7.0 per cent in 2005, 3.9 per cent in 2009 and 1.9 per cent in 2010). There was an automatic permitted price increase of 0.1% from 1 January 2011; there will be a further 0.2% increase from 1 January 2012 and a final increase of 0.2% from 1 January 2013)

Table 2 (page 23) shows the number of community pharmacies by Strategic Health Authority (SHA) in England at 31 March 2012, the size of the population each SHA serves, the average number of prescription items dispensed per month, and the number of pharmacies per 100,000 population. The population data used was the most recent available: Mid 2011 Primary Care population estimates based on the 2011 census Source: ONS Population Estimates Unit.

PCT level data is provided in the on-line Appendix.

At 31 March 2011 there were 21 pharmacies per 100,000 population in England. Westminster PCT (London SHA) had the most pharmacies per 100,000 population with 42 and Herefordshire PCT (West Midlands) the least pharmacies with 14.

Table 2a (page 24) shows the average number of prescription items dispensed per pharmacy per month by Strategic Health Authority in England.

PCT level data is provided in the on-line Appendix.

In 2011-12, the average number of prescription items dispensed per pharmacy was 6,548 per month, an increase of 1.1 per cent over 2010-11. Since 2006-07 the average has increased across the majority of SHAs with the England monthly average increasing by 15.7per cent (890 items). The averages for North West, Yorkshire and the Humber and West Midlands dropped slightly between 2010-11 and 2011-12. London SHA saw the largest annual and 6 year increase of 3.3 per cent and 28.3 per cent respectively. North West saw the highest of the annual decreases in 2011-12 of 0.7 per cent and lowest increase of 8.2 per cent since 2006-07. Westminster PCT (London SHA) had the lowest average number of items per pharmacy per month (2,885). Redcar and Cleveland PCT (North East SHA) had the highest average number of items per pharmacy per month (10,557).

Table 3 (page 25), shows numbers of community pharmacies in England, from 2006-07 to 2012-12, by dispensing volume per month. The proportions of community pharmacies dispensing higher volumes of prescriptions items per month has increased over this period. In 2011-12 1,733 (15.4 per cent) pharmacies dispensed 10,000 items or more per month compared with 2006-07 when 9.5 per cent of pharmacies (960) dispensed 10,000 items or more. Since 2006-07, pharmacies dispensing within the 6,001-8,000 band increased by 1.9 per cent (356) and the 8,001-10,000 band increased by 4.0 per cent (410).

Table 3 also shows the actual number of prescription items dispensed per year by community pharmacies in England, from 2006-07 to 2011-12, in relation to dispensing volume. In 2011-12, 31.6 per cent of prescription items were dispensed by the 1,733 pharmacies dispensing 10,000 or more prescription per month compared with 21.4 per cent of items dispensed by 960 pharmacies in 2006-07.

Note: 2006-07 is the earliest period for which data is available for table 3.

General Pharmaceutical Services in England: 2002-03 to 2011-12

Note also that due to a change in the processing method there have been slight revisions made to the previously published figures for bands 2,001-4,000, 4,001–6,000 and 6,001-8,000 for 2010-11. See the table below. Due to the small size of the changes made to the number of pharmacists the percentage figures remain unchanged.

Monthly	2010-11 data	Corrected 2010-	2010-11 data	Corrected
dispensing	previously	11 data	previously	2010-11 data
volume band	published	Number of	published	Prescription items
	number of	pharmacists	Prescription	dispensed
	pharmacists		items	
			dispensed	
2,000-4,000	2,209	2,208	82,754	82,706
4,001-6,000	no change	no change	167,772	167,698
6,001-8,001	2,213	2,214	184,162	184,234

Community pharmacy ownership

Under the Medicines Act 1968, a registered pharmacist must be in charge of each community pharmacy. Community pharmacies can be owned by a pharmacist sole trader, a limited liability partnership (where all partners are pharmacists) and bodies corporate (where a superintendent pharmacist must be appointed – bodies corporate include limited liability partnerships under the Companies Act 2006). These are known as pharmacy contractors.

In this publication, pharmacy contractors who own six or more pharmacies are known as 'multiple contractors' (also known as pharmacy chains and include large companies such as Boots, Lloyds pharmacy and supermarkets). Those who own five or less pharmacies are known as 'independents'.

A patient survey undertaken by the Department of Health in 2007 indicated that the public value a variety of types of pharmacy. Further information on this survey is available from Pharmacy in England: building on strengths - delivering the future.

Table 4 (page 26) shows the number and percentage of community pharmacies owned by independent and multiple contractors at 31 March each year. At 31 March 2012, 38.7 per cent (4,346) of the pharmacies were classified as independent.

Since 2006-07 (the earliest year available), the number (proportion) of pharmacies in England owned by multiple contractors has increased from 5,964 (58.9 per cent) to 6,890 (61.3 per cent).

Table 4a and **Figure 2** (page 26 & 27) show the number and percentage of community pharmacies owned by independent and multiple contractors in England by Strategic Health Authority (SHA) in 2011-12. South West SHA has the highest proportion of multiple contractors with 74.9 per cent and London SHA has the lowest with 37.7 per cent. Plymouth Teaching PCT recorded the highest figure for multiple contractors at 86.5 per cent and Islington PCT the lowest at 18.8 per cent.

PCT level data is provided in the on-line Appendix.

Community pharmacy applications

In order to be able to provide pharmaceutical services under the NHS, the NHS (Pharmaceutical Services) Regulations 2005 require that persons (other than doctors or dentists) must be included in a pharmaceutical list. PCTs are required to prepare and maintain lists of those persons who have been granted applications to be included on their list. Further information can be found under Community Pharmacy Applications in the Notes and Definition section below.

The application areas identified in tables 5, 7 and 7a refer to the following chapters of the 2005 Pharmaceutical Services Regulations:-

Controlled Area

Rurality - 31

Doctors - 61, 65 (1) and 65 (4) (b)

Pharmacy - 5 (1) (a), 12, 13, 18, 35 and 36

Pharmacy - Reserved Location 35

Non-controlled Area

Full application - 5 (1) (a), 12, 13

All other areas (incl. minor relocations)

500m or under (Number within PCT) - 5(1) (b) (ii) and (c), 6(3) and 7(3), 39(8) 500m or under (No. across PCT boundary) - 5(1) (b)(ii) and (c), 6(3) and 7(3), 39(8) Total within PCT All minors - 5 (1) (b)(ii) and (c), 6, 7 and 39(8)

Total across PCT boundary - 5 (1) (b)(ii) and (c), 6, 7 and 39(8) Appliances only - 4(1)(b) / 12(1) Additional services - 5(1)(b) (i) and (ii) /12(1) Other - 5(1)(b)(i), 8, 9, 10, 40 and 54

Tables 5 (page 28), **5a** (page 29) and **5b** (page 29) show applications relating to pharmaceutical services regulations in controlled and non-controlled areas in England, under the revised 2005 Pharmaceutical Services Regulations and, in particular, changes that have been brought about through the reforms to the "Control of Entry" system for NHS pharmaceutical contractors. Minor relocations within and across PCT boundaries are also shown. Since April 2005, PCTs can administratively approve premises relocating within 500m including where these cross PCT boundaries.

During the first year of the reforms in 2005-06, PCTs made decisions on 2,043 applications of which 1,508 were granted. The number of application decisions made remained consistent at around 1,700 over the next 3 years with around 1,200 approved. In 2009-10 this dropped slightly to 1,608 applications and 1,136 approvals only to rise significantly in 2010-11 and again in 2011-12 when a total of 2,157 applications were decided of which 1,690 were approved. This could be evidence of the "unfreezing" of the market. There was an increase of 80 more applications decided between 2007-08 and 2008-09, most of which were for controlled localities. This increase is not reflected in the number of applications granted in that timeframe. This increase may have been due to a consultation in 2008 on options to modify the rules for doctor dispensing. This increase is also reflected in the higher number of requests for determining controlled areas and the number of reserved locations delineated.

In 2011-12, PCTs processed 744 applications for all other areas including minor relocations and 626 were approved. Of these, 260 were for relocations within "500m within the PCT boundary" of which 238 (91.5 per cent) were approved. The data also shows that most applications decided for minor relocations were granted which may indicate that the reformed minor relocation rules have had an impact on the number of applications for pharmacy contractors to move premises.

In controlled areas in 2011-12, PCTs in England received 153 applications to open a new pharmacy, under application area ((5(1) (a), 12, 13, 18, 35 & 36)), of which 107 (69.9 per cent) were granted compared with 124 received and 93 (75.0 per cent) granted in 2010-11.

In non-controlled areas in 2011-12, PCTs in England processed 1,190 applications to open a new pharmacy, of which 901 (75.7 per cent) were granted compared with 901 applications processed and 657 (72.9 per cent) granted in 2010-11.

Tables 6 (page 30), **6a** (page 31) and **6b** (page 32) show pharmaceutical applications relating to the four exempt categories under the reformed control of entry regulations which form part of the 2005 Pharmaceutical Services Regulations in controlled and non-controlled areas. The PCT has the authority within these regulations to refuse an application or to withdraw approval if any exempt pharmacies fail to provide the services specified by the PCT.

In 2011-12 PCTs made decisions on 867 applications for pharmaceutical services exempt from the control of entry regulations, and approved 790 (91.1 per cent) of these. There were 318 more decisions made for all four exempt categories compared with 2010-11 with 292 more being approved, 6 more being refused and 20 more being withdrawn. As at 31 March 2012 there were still 422 applications outstanding compared with 490 at 31 March 2011. The greatest number (716) of applications were from pharmacies intending to open for 100 or more hours per week, of which 662 (92.5 per cent) were granted, 19 (2.7 per cent) refused and 35 were withdrawn before a decision was reached. This is a significant increase on 2010-11 when there were 411 applications for 100 hour pharmacies granted.

The increase in the number of applications is possibly due to applicants making applications prior to the change in the regulations (draft proposals were released in October 2011) which removed the exemption for all the categories except mail order or internet based pharmacies. The 2012-13 publication will contain information on the 2012 regulations.

In 2011-12 there were:

- 716 decisions made on applications for pharmacies intending to open 100 or more hours per week (662 applications approved)
- 41 decisions made on applications for pharmacies in out-of-town large shopping developments (40 applications were approved)
- 107 decisions made on applications for mail order or internet based pharmacy services (87 applications approved)
- 3 decisions made on applications for pharmacies in new one-stop primary care centres (1 application was approved)

In controlled areas in 2011-12 PCTs made decisions on 22 applications for pharmaceutical services exempt from the control of entry regulations, and 18 were approved while the other 4 were withdrawn. The greatest number of these applications were from pharmacies intending to open for 100 or more hours per week where 19 applications were made and 15 were approved.

In non-controlled areas in 2011-12 PCTs made decisions on 845 applications for pharmaceutical services exempt from the control of entry regulations, and approved 772 (91.4 per cent) of these. The greatest number (697) of these applications were from pharmacies intending to open for 100 or more hours per week, of which 647 (92.8 per cent) were granted, 19 (2.7 per cent) refused and 31 (4.5 per cent) withdrawn.

There has been a significant increase in applications relating to both the 2005 Pharmaceutical Services Regulations and the exempt category of pharmacy applications.

Note: Approval does not necessarily result in the opening of a pharmacy.

Appeals

Tables 7 (page 33) and **7a** (page 34) summarise the outcomes of appeals against decisions made by PCTs in England by the type of application submitted under the revised 2005 Pharmaceutical Services Regulations. **Table 7** shows the appeals decisions made and **Table 7a** shows the appeals dismissed.

Where the applicant is 'the appellant', this shows the outcome of cases where the applicant appeals against a PCT decision to refuse an application. For example, 227 appeals against a PCT decision to refuse the application to open a new community pharmacy service in a non-controlled area resulted in 180 cases (79.3 per cent) where the appeal was dismissed and the PCT decision was upheld.

Where the applicant is 'not the appellant', this shows the outcome of cases where a third party, not the original applicant, appeals against a PCT decision to grant an application. For example, using appeals against a PCT decision in a non-controlled area, in 25 out of 47 cases (53.2 per cent) the appeal was dismissed and the application proceeded.

Control of entry: exempt category pharmacies

Four categories of pharmacy applications are exempt from the reformed "necessary or expedient" definition introduced as part of the 2005 Pharmaceutical Services Regulations reforms in 2005. These are:

- pharmacies based in approved retail areas (large retail shopping areas of 15,000 square metres or more leasehold gross floor space away from town centres);
- pharmacies that intend to open for at least 100 hours per week;
- · consortia establishing new one stop primary centres; and
- wholly mail order or internet-based (distance-selling) pharmacy services.

Table 8 (page 35) shows the number and percentage of the four exempt category pharmacies by SHA in England. In 2011-12 there were 1,166 exempt category pharmacies in England accounting for 10.4 per cent of all community pharmacies. Most of these were within the 100 hour pharmacies category where there were 888 community pharmacies with the remainder consisting of 176 mail order or internet based pharmacies, 93 Out-of-Town Shopping Developments and 9 One-Stop Primary Care Centres.

North West SHA had the most 100 hours pharmacies (175) while North East and South East Coast had the least (51) a proportion of 9.9 per cent, 8.6 and 6.1 per cent respectively. Yorkshire and the Humber had the highest proportion of 100 hour pharmacies in 2011-12 (10.6 per cent) and London had the lowest proportion

General Pharmaceutical Services in England: 2002-03 to 2011-12

(4.2 per cent). Since the HSCIC started collecting this particular dataset in 2008-09, the total number of pharmacies in the four exemptions has increased by 611 of which 100 hours pharmacies accounted for 438. **PCT level data is provided in the on-line Appendix**.

Community pharmacy openings and closures

One of the objectives of the current regulatory framework is to improve access by patients to community pharmacies and to ensure access in deprived areas.

Figures on openings refer to the opening of new pharmacy premises, and do not include existing pharmacies that change ownership or those that relocate. Similarly, closures are pharmacy businesses that have ceased trading. For more information on open and closed pharmacies see the Notes and Definitions section below including the differences between the data provided by PCTs (used here) and NHS Prescription Services.

Table 9 (page 36), shows the number and percentage of community pharmacy opening each year reported by PCTs. There were 316 openings in the year 1 April 2011 to 31 March 2012. The lowest proportion of openings (11.4 per cent, 36 pharmacies) was for those over 1km away from the nearest pharmacy. There were 23.7 per cent (75) opening between 500m and 1 km, and 64.9 per cent (205) within 500m. Since 2006-07 the lowest proportion of openings has been for those over 1km, varying between 24.7 per cent and 11.4 per cent. For the majority of the years reported the highest proportion of openings has been within 500m, with the exception of 2006-07 when the highest proportion was between 500m and 1km and 2009-10, when both within 500m and between 500m and 1km were equally the highest.

Table 9a (page 36) shows the number and percentage of community pharmacy closing each year reported by PCTs. The closures for the year ending 31 March 2012 were 41. The majority of these closures (63.4 per cent) were within 500m of the nearest pharmacy. There were 34.1 per cent closings between 500m and 1 km, and 2.4 per cent were more than 1km away. In all years since 2006-07 the lowest proportion of closures has been over 1 km. For the majority of years since 2006-07 there have been a higher proportion of closures within 500m.

Appliance contractors

Appliance contractors provide services to people who need appliances such as stoma and incontinence care aids, trusses, hosiery, surgical stockings and dressings. They range from small sole-trader businesses to larger companies. They do not supply drugs. However, pharmacies and dispensing doctors can also supply appliances.

Table 10 (page 36) shows the number of appliance contractors, in contract to provide NHS services at 31 March, in England from 2002-03 to 2011-12 and the number and percentage of those contractors actively dispensing during each year.

There were 135 appliance contractors in contract as at 31 March 2012, but only 120 (88.9 per cent) of them actively dispensed in the year. The number of items dispensed in England by appliance contractors increased from 5.8 million in 2010-11, to 6.4 million in 2011-12, an increase of 11.6 per cent. Since 2002-03 there has been a decrease of 42 appliance contractors actively dispensing but an increase of 4.4 million items dispensed.

The fall in number of appliance contractors actively dispensing may reflect merging of companies as well as closures. The increase in items dispensed by appliance contractors is likely to be due to both an increased demand for prescriptions for appliances and patient choice.

Services provided by community pharmacy and appliance contractors

The Community Pharmacy Contractual Framework was introduced in 2005. Under the framework, there are three types of service which can be provided by community pharmacy and/or appliance contractors:

Service	Details	Comments
Essential services	Services include dispensing, promoting healthy lifestyles and signposting which all community pharmacies must provide	Information on both essential and advance services are nationally agreed and their funding is
Advanced services	Currently comprises of 4 advanced services. The first to be introduced was Medicines Use Reviews which community pharmacies can provide if they are providing all the essential services and have suitable training and accredited premises. In April 2010 a further 2 advanced services were introduced for both community pharmacy and appliance contractors - Appliance Use Reviews and Stoma Appliance Customisation. In October 2011 the 4 th advanced service was introduced for community pharmacies – New Medicines Service (NMS). For the first six months to 31 March 2012 233,756 NMSs were completed in England. Note: Annual information on this service will be reported in the 2012-13 publication. See Notes and Definitions for further information	centrally determined and more information is provided below and further detail provided in tables 11, 11a, 12, 13 and 14.
Locally enhanced services	Services which include minor ailment schemes, needle and syringe exchange and stop smoking services which are provided by community pharmacies.	These services are commissioned and funded by PCTs and are reported in table 15.

Essential Small Pharmacies Local Pharmaceutical Services (ESPLPS) scheme and other Local Pharmaceutical Services (LPS) schemes

LPS contracts allow PCTs to commission community pharmaceutical services tailored to specific local requirements. LPS complements the national pharmacy contractual framework. LPS was run as a pilot from 2002 to 2006 and gained permanence from 1 April 2006. More information on LPS and ESPLP is available in the Notes and Definitions section below.

Tables 11 (page 37) **and 11a** (page 38) shows the number and percentage of community pharmacies eligible for payment under the Local Pharmaceutical Services (LPS) Scheme, and specifically the Essential Small Pharmacies Local Pharmaceutical Services (ESPLPS) scheme, from 2006-07 to 2011-12 by SHA and Metropolitan Boroughs, Unitary and Shire Authorities and the London area. Since 2006-07 there has been a steady decrease in the number of ESPLPS scheme contractors from 181 in 2006-07 to 118 in 2011-12. This is due to dispensing numbers being higher or lower than the limits set by the contract or by other breaches of the contractual agreement. Other LPS scheme contracts have remained relatively stable with 45 in 2006-07, 43 in 2007-08, 2008-09 and 2009-10, increasing to 48 in 2010-11 and 54 in 2011-12. London SHA has the largest number of total ESPLPS and LPS contracts for all 6 years reported.

PCT level data is provided in the on-line Appendix

Medicines Use Reviews

Medicines Use Review (MUR) is an advanced service provided under the Community Pharmacy Contractual Framework. PCTs are directed by the Secretary of State to make arrangements with community pharmacy contractors in their area who wish to provide the service. The service is nationally available to a national service specification, but is established locally between PCTs and their community pharmacy contractors and paid for by PCTs. In October 2011 three national target groups for MURs were introduced. At least 50% of all MURs undertaken by each pharmacy in each year should be on patients within the national target groups. Currently information on MUR activity is unable to differentiate between the types of MUR provided. More information on MUR and targeted MUR is available in the Notes and Definitions section below.

Table 12 (page 39) lists by SHA in England, the number of community pharmacies which have provided and been paid for Medicines Use Reviews (MUR). In 2011-12, the percentage of community pharmacies providing MURs in England increased to 90.5 per cent compared to 62.3 per cent in 2006-07 (the first year this data was available). A total of 2.4 million reviews were provided in 2011-12 compared to 2.1 million in 2010-11, 1.7 million in 2009-10, 1.4 million in 2008-09, 1.0 million in 2007-08 and 0.6 million in 2006-07. In 2011-12 the average number of MURs provided by each community pharmacy providing the service increased from 219 in 2010-11 to 239 in 2011-12, and by 150 since 2006-07.

PCT level data is provided in the on-line Appendix

Appliance Use Reviews

Appliance Use Review (AUR) is the second advanced service to be introduced into the NHS community pharmacy contract and was introduced on 1 April 2010. More information on AUR can be found within the Notes and Definitions section below.

Table 13 (page 40) shows by SHA in England, the number of community pharmacy and appliance contractors who have provided and been paid for AURs for the first two years of this service being available. In 2011-12 a total of 18,265 AURs were carried out (13,951 at home and 4,314 on the contractor's premises) by 117 pharmacy and appliance contractors who provided the service. In 2010-11 15,213 AURs were provided by 100 contractors. The most AURs were carried out by South Central SHA (8,848). The average number of AURs per community pharmacy and appliance contractor in England was 156.

Note the data for 2010-11 has been revised as the data published was only for community pharmacy contractors providing AURs and therefore under reported the total number of AURs provided. This error was not identified until the 2011-12 data was received which included appliance contractors. The omission was not detected previously as 2010-11 was the first year in which the service was provided.

Stoma Appliance Customisation

Stoma Appliance Customisation (SAC) is the third advanced service in the NHS community pharmacy contract and was also introduced on 1 April 2010. The service involves the customisation of a quantity of more than one stoma appliance, based on the patient's measurements or a template. The aim of the service is to ensure proper use and comfortable fitting of the stoma appliance and to improve the duration of usage, thereby reducing waste. More information on SAC can be found within the Notes and Definitions section below.

Table 14 (page 41) shows by SHA in England, the number of community pharmacy and appliance contractors who have provided and been paid for SACs for the first two years of this service being available. There were a total of 1,082,501 SACs carried out by 1,786 community pharmacy and appliance contractors providing this service compared with 1,027,684 by 1,722 contractors in 2010-11. East of England SHA provided the higher number of SACs (327,157) and South West the lowest (38,777). There was an England average of 606 SACs per community pharmacy and appliance contractor providing the service in 2011-12 compared with 597 in 2010-11.

Note the data for 2010-11 has been revised as the data published was only for community pharmacy contractors providing SACs and so resulted in under reporting of SACs. This omission was not identified until comparisons were made with the 2011-12 data which included appliance contractors and also not identified due to 2010-11 being the first year of the service being provided.

An error in the data provided for the previous report resulted in reporting an incorrect number of pharmacy contractors providing this service. Although the data did not include appliance contractors we reported that 1,724 contractors provided the services. The correct figure including appliance contractors should have been 1,722.

Local Enhanced Services

Each PCT is authorised to arrange for the provision of specific pharmaceutical services to persons within or outside its area with pharmacists included in its pharmaceutical list or in the list of a neighbouring PCT. There are currently twenty specific services. For more information on local enhanced services see notes and definitions below.

Table 15 (page 42) shows the number of community pharmacies commissioned by their local PCT to deliver local enhanced services in 2005-06 to 2011-12. The number of local enhanced services provided by community

pharmacies in 2011-12 decreased by 1,679 (5.4 per cent) to 29,283 since 2010-11 and an increase of 12,363 (73.1 per cent) since 2005-06. Note that because a pharmacy may provide more than one service the total number of services provided exceeds the number of community pharmacies.

The trend since 2005-6 shows that the number of locally commissioned and funded enhanced services has increased significantly until 2011-12 where there has been an overall decrease of commissioned services. This may be due to the uncertainty around the new structure of the NHS following the introduction of the Health and Social Care 2012 Act which comes into force from 01/04/2013. PCTs, which are due to be abolished, may have been cautious commissioning services with new contractors in light of these changes. The most frequently provided services in 2011-12 have remained unchanged since 2005-06; those services are stop smoking, supervised administration of medicines (for example methadone), patient group direction (which probably reflects the supply of medicines for emergency hormonal contraception) and minor ailment schemes. The following services are less frequently commissioned: pharmacy services to schools, independent and supplementary prescribing, prescriber support and anticoagulant monitoring. This may be because there is lower demand for such a service, alternative providers exist or additional requirements need to be met, for example training and qualification in respect of independent and supplementary prescribing. **PCT level data is provided in the on-line Appendix.**

Notes and Definitions

- 1. PCT level data tables 2, 2a, 4a, 8, 11, 12, 13, 14 and 15 are available via the on-line appendix which is located at: www.ic.nhs.uk/pubs/pharmserv1112
- 2. Community Pharmacies and Appliance Contractors Each community pharmacy and appliance contractor has an arrangement (contract) with a PCT (Health Authority prior to October 2002) to dispense NHS prescriptions. The arrangement specifies both the premises and the named contractor. Community pharmacies can dispense the full range of drugs and appliances, but appliance contractors are limited to the supply of appliances as listed in Part IXA/B/C of the Drug Tariff. The Drug Tariff is published by the NHS Prescription Services division of NHS Business Services Authority.
- 3. **Prescriptions Dispensed -** The vast majority of the prescriptions dispensed by pharmacies and appliance contractors are written by general practitioners, although nurses, dentists, pharmacists, other non-medical prescribers, and hospital doctors also write prescriptions. This publication excludes prescriptions dispensed by General Practitioners in rural areas to those patients who have difficulty accessing a community pharmacy service. NB: They are included in other Statistical Bulletins published by the HSCIC.
- **4. Prescriptions Items** A prescription item refers to each medicine prescribed on a prescription form. Each prescription form may be for one or more prescription items; each item may attract one or more dispending fee.
- **5. Dispensing Fees** Community pharmacies are paid a fee for dispensing each prescription item. The number of fees paid and the amount paid per prescription item is dependent on the medicine prescribed.
- **6. Net Ingredient Cost (NIC)** refers to the cost of drugs before discount and does not include any dispensing costs or fees.
- 7. **Monthly item per pharmacy** is calculated for each pharmacy by the dividing the total items dispensed by the number of months for which the pharmacy operated during the year. The average of these figures is calculated to give the average items per pharmacy.
- 8. Community Pharmacy Applications In order to be able to provide pharmaceutical services under the NHS, the NHS (Pharmaceutical Services) Regulations 2005 provide that persons (other than doctors or dentists) must be included in a pharmaceutical list. PCTs are required to prepare and maintain lists of those persons who have been granted applications to be included on their list. These persons are pharmacy contractors who may also provide appliances, as well as medicines, and appliance contractors who can only provide appliances. There are three main categories of application:
 - from those who wish to be included in a PCT's pharmaceutical list (full applications which includes exempt applications)
 - those already included in a PCT's pharmaceutical list but who wish to change premises, open additional premises or provide additional services within the PCT's area
 - from GPs for approval of premises and outline consent to dispense NHS prescriptions to their patients (see below)

The "control of entry" test applies equally to urban and rural areas. However, where a PCT has determined that an area is "controlled" (i.e. rural in character), provided certain conditions are met, doctors as well as pharmacies can dispense NHS medicines. GPs, may, in general, dispense NHS prescriptions only with NHS approval and only to their own patients who live in such controlled localities and live more than 1.6 km (as the crow flies) from a pharmacy. This is to ensure that patients in rural areas who might have difficulty reaching their nearest pharmacy can access the dispensed medicines they need.

Generally, when a pharmacy application is granted in a controlled area, any GPs within 1.6 km of the pharmacy have to cease dispensing. The exception to this is where the patient population is under 2,750 ("reserved location"). Where this is approved, both dispensing by doctors and pharmaceutical services can be provided.

All applications are, in the main, appealable to the NHS Litigation Authority's (NHSLA) Family Health Services Appeal Unit (FHSAU).

- 9. Controlled Area A controlled area is one which a PCT or, on appeal, the Secretary of State has determined as rural in character. The relevant decision makers make a judgement based on the evidence available. PCTs that receive applications to open a pharmacy in a controlled locality must generally consider whether granting such an application would prejudice the proper provision of existing general medical or pharmaceutical services in the locality.
- 10. Appeals In April 2005, the role of the NHS Litigation Authority (NHSLA) expanded to include the functions of the former Family Health Services Appeal Authority (FHSAA). The work of the FHSAA is now undertaken by the NHSLA's Family Health Services Appeal Unit, which handles appeals against decisions by Primary Care Trusts under the NHS (Pharmaceutical Services) Regulations 2005.

For further details on the regulations stipulated in the 2005 pharmacy contract, please follow this link:

http://www.opsi.gov.uk/si/si2005/20050641.htm#31

- 11. Exempt Category Pharmacies In response to the 2003 Office of Fair Trading Report (OFT) on the control of entry regulations and retail pharmacy services in the UK, the Government introduced a package of measures to reform and modernise the "control of entry" regulations for NHS community pharmacies in April 2005. It exempted certain types of pharmacy services from some requirements. The new regulations were introduced in England in tandem with the new contractual framework for community pharmacy services under the NHS (Pharmaceutical Services) Regulations 2005 (SI 641) as amended principally by SIs 2005/1051 and 1501, 2006/552 and 3373 and 2007/674.
- **12. Independent and Multiple Contractors** this is extracted from NHS Prescription Services contractor data. A multiple contractor is defined as a pharmacy contractor who owns six or more pharmacies across England. Assumptions have been made as to which are multiples and independents based on owner names.
- 13. Openings and Closures The NHS Information Centre collects data from each PCT in England on openings and closures of community pharmacies and is the data shown in this report. Figures on openings refer to the opening of new pharmacy premises, and do not include existing pharmacies that change ownership or those that relocate, as this does not produce a change in the number of service providers. Closures are pharmacy businesses that have ceased trading.

Data on openings and closures is also provided by of the NHS Prescription Services, a division of NHS Business Services Authority based on payments to community pharmacies. These figures include change of ownership, as these are new contractors. Outstanding payments to contractors may continue beyond the end of the financial year. This can lead to small discrepancies between PCT and NHS Prescription Services data about the number of community pharmacies in England active at 31 March each year.

14. Essential Small Pharmacies Local Pharmaceutical Services – The Essential Small Pharmacies Local Pharmaceutical Services (ESPLPS) was developed to replace the Essential Small Pharmacies Scheme (ESP), following the agreement of a new national contractual framework for community pharmacy. It came into force in April 2006. The scheme was set up to run for five years, and in the summer of 2010 it was extended for a further two years. The scheme allowed PCTs to nominate pharmacies as being necessary for the proper provision of pharmaceutical services in its area, but where viability was questionable without additional financial support, because of the small number of items dispensed.

General Pharmaceutical Services in England: 2002-03 to 2011-12

- 15. Local Pharmaceutical Services The Local Pharmaceutical Services (LPS) contracts allow PCTs to commission community pharmaceutical services tailored to specific local requirements. LPS complements the national pharmacy contractual framework. LPS was run as a pilot from 2002 to 2006 and gained permanence from 1 April 2006. This has given PCTs the power to establish LPS schemes locally within Regulations, without requiring approval from the Secretary of State for each scheme. All services currently provided through national arrangements may be provided through LPS in addition to services not traditionally associated with pharmacy.
- 16. Medicine Use Reviews The Medicines Use Review and Prescription Intervention Service (MUR) forms part of the Advanced Services within the community pharmacy contractual framework and was the first Advanced Service to be introduced. A fee per MUR is payable to all pharmacy contractors meeting the requirements for this service. Pharmacy premises must be accredited and pharmacists trained and registered to be able to provide MURs, see Part VIC Advanced Services (Pharmacy and Appliance Contractors)(England) of the drug tariff. The purpose of the MUR service is, with the patient's agreement, to improve their knowledge and use of medicines, through a specific consultation between the pharmacist and the patient. In particular, by:
 - establishing the patient's actual use, understanding and experience of taking medicines
 - identifying, discussing and resolving poor or ineffective use of medicines
 - identifying side effects and drug interactions that may affect the patient's compliance with the medicines prescribed for them
 - improving clinical and cost effectiveness of medicines prescribed also helping to reduce medicines wastage

Three national target groups for MURs were introduced in October 2011. The national target groups are:

- patients taking the taking the following high risk medicines:
 - o NSAIDs
 - Anticoagulants (including low molecular weight heparin)
 - Antiplatelets
 - Diuretics
- patients recently discharged from hospital who had changes made to their medicines while they
 were in hospital. Ideally patients discharged from hospital with receive an MUR within four weeks of
 discharge but in certain circumstances the MUR can take place within eight weeks of discharge
- patients with respiratory disease taking the following medicines for asthma or COPD:
 - Adrenoreceptor agonists
 - o Antimuscarinic bronchodilators
 - o Theophylline
 - Compound bronchodilator preparations
 - Corticosteroids
 - Cromoglicate and related therapy, leukotriene receptor antagonists and phosphodiesterase type-4 inhibitors

At least 50% of all MURs undertaken by each pharmacy in each year should be on patients within the national target groups.

PCTs are directed by the Secretary of State to make arrangements with pharmacy contractors in their area who wish to provide the service. The service has a national service specification, but it is established locally between PCTs and their pharmacy contractors, and paid for by PCTs.

- **17. Appliance Use Review** Appliance Use Review (AUR) is an advanced service that community pharmacy and appliance contractors can choose to provide so long as they fulfil certain criteria. AURs can be carried out by a pharmacist or a specialist nurse in the pharmacy or at the patient's home. AURs should improve the patient's knowledge and use of any 'specified appliance' by:
 - Establishing the way the patient uses the appliance and the patient's experience of such use
 - Identifying, discussing and assisting in the resolution of poor or ineffective use of the appliance by the patient
 - Advising the patient on the safe and appropriate storage of the appliance
 - Advising the patient on the safe and proper disposal of the appliances that are used or unwanted

PCTs are directed by the Secretary of State to make arrangements with pharmacy and appliance contractors in their area who wish to provide the service. The service has a national service specification, but it is established locally between PCTs and their pharmacy contractors, and paid for by PCTs. A fee is payable to all community pharmacy and appliance contractors for each AUR they have carried out. There is a different fee depending on

whether the AUR was carried out in the patient's home or on the contractor's premises, see Part VIC - Advanced Services (Pharmacy and Appliance Contractors)(England) of the Drug Tariff.

- **18. Number of AUR (Home) Refers to AURs carried out in the appliance user's home.**
- 19. Number of AUR (Premises) Refers to AURs carried out on the supplier premises.
- 20. Stoma Appliance Customisation Stoma Appliance Customisation (SAC) is an advanced service that a community pharmacy or appliance contractor can choose to provide so long as they fulfil certain criteria. The service involves the customisation of a quantity of more than one stoma appliance, based on the patient's measurements or a template. The aim of the service is to ensure proper use and comfortable fitting of the stoma appliance and to improve the duration of usage, thereby reducing waste. PCTs are directed by the Secretary of State to make arrangements with pharmacy and appliance contractors in their area who wish to provide the service. The service has a national service specification, but it is established locally between PCTs and their pharmacy contractors, and paid for by PCTs and is detailed in Part VIC Advanced Services (Pharmacy and Appliance Contractors)(England) of the Drug Tariff. The stoma appliances that can be customised are listed in Part IXC Stoma Appliances of the Drug Tariff. A fee is payable for every Part IXC prescription item that can be customised and is payable to community pharmacy and appliance contractors. Where a contractor has notified NHS Prescription Services that it is going to provide the service, they are paid the fee on dispensing the qualifying items, whether they customise them or not. The level of the fee reflects that not all of these prescription items will need to be customised.
- **21. New Medicines Service** -The New Medicines Service (NMS) is a time-limited service commissioned until March 2013; it will continue beyond this time if all parties agree that the service has provided demonstrable value to the NHS. The NMS will initially be focused on the following patient groups and conditions:
 - asthma and chronic obstructive pulmonary disease (COPD)
 - type 2 diabetes
 - antiplatelet/anticoagulant therapy
 - · hypertension.

For each condition/therapy area, a list of medicines has been agreed. If a patient is newly prescribed one of these medicines then they will be eligible to receive the service, subject to the pharmacist being able to determine that the medicine is being used to treat one of the above conditions (in circumstances where a medicine can be used to treat more than one condition). The legal framework for the service is provided by the Pharmaceutical Services (Advanced and Enhanced Services) (England) directions 2011

- 22. Local Enhanced Services Each PCT is authorised to arrange for the provision of specific pharmaceutical services to persons within or outside its area with pharmacists included in its pharmaceutical list or in the list of a neighbouring PCT. There are currently twenty specific services. For more information see Part VIC Advanced Services (Pharmacy and Appliance Contractors)(England) of the Drug Tariff. The formal directions are included in Part 4 Enhanced Services; pharmacy contractors only.
- 23. Totals Individual numbers and percentages may not always add up to the total due to rounding.
- **24. Missing Data** A '-' is used to indicate that data is either unavailable or was not originally collected at source due to changes in regulations or practices at national, regional or PCT level.
- 25. Zero's '0.0' denotes a value of less than 0.05.
- 26. Population data Population data comes from the Office of National Statistics and 2011 mid-year estimates, based on the results of the 2011 Census are used. Some Primary Care Organisations (PCO) do not map directly to SHA geographies. Therefore, population data for some SHAs will not equal the sum of the PCTs within the SHA area. For six SHAs the sum of their PCOs populations will be slightly different to the population of the SHA individually. The responsibility for a PCO lies with only one SHA, but since organisational changes in 2006 certain PCOs geographically straddle more than one SHA. The six SHAs that are affected by this are: North West SHA, Yorkshire & Humber SHA, East Midlands SHA, South East Coast SHA, South Central SHA and South West SHA. Please note that the total of all PCOs equal the total of all SHAs.
- 27. Pharmaceutical Price Regulation Scheme (PPRS) -The Pharmaceutical Price Regulation Scheme is a voluntary agreement made between the Department of Health and the Association of the British Pharmaceutical Industry. The scheme places some control on the costs of medicines to the NHS and applies to all branded, licensed NHS medicines. An overall price cut of 3.9 per cent was agreed for 2009 and 1.9 per cent for 2010. These will have had an impact across all therapeutic areas. There was an

automatic permitted price increases of 0.1% from 1 January 2011 and a further 0.2% increase from 1 January 2012 and there will be a final increase of 0.2% from 1 January 2013.

28. Data Quality - See the data quality document published with this bulletin.

29. Devolved Administrations -

Wales – Welsh Assembly Government produce an annual Community Pharmacy Services in Wales Statistics which differs in some ways to the data produced in this publication. More details are given below by specific area:-

- Community pharmacy and appliance contractors counts this data is comparable
- Community pharmacy dispensing activity this data is comparable and also comes from NHS Prescriptions Services.
- Community pharmacy ownership this data is comparable including the definitions of an independent and a multiple contractor
- Community pharmacy applications these are different and not comparable as the England data is based on NHS (Pharmaceutical Services) Regulations 2005 legislation and the Wales data is based on the previous NHS (Pharmaceutical Services) Regulations 1992.
- Appeals these are not comparable as appeals are based on the applicable pharmacy applications regulations.
- Control of Entry: Exempt Category Pharmacies –this is not comparable as new regulations were introduced in England in 2005 and Wales have yet to make the changes to the regulations following the recommendations of the OFT report.
- Community openings and closures these are not comparable as they are based on different application legislation.
- ESPLPS- this data is not comparable as Wales still have EPS schemes. These became ESPLPS in England in 2006.
- Medicine Use Reviews –this data is comparable and also comes from NHS Prescription Services
- Appliance Use Reviews not available in Wales
- Stoma Appliance Customisation not available in Wales
- Local Enhanced Services of the 20 specific services reported for England 14 areas match and are comparable. Wales collect and produce information for a total of 25 areas which may be sub sections of the specific areas recorded by England but it is not clear whether that is the case and whether it would be a comparable measure. The areas that do match are Anticoagulant Monitoring, Care Home, Disease Specific Medicines Management, Gluten Free Food Supply, Home Delivery, Language Access, Medication Review, Meds Assessment & Compliance Support, Minor Ailment Scheme, Needle and Syringe Exchange, On Demand Availability of Specialist Drugs, Out of Hours, Stop Smoking and Supervised Administration

Scotland - The Information Services Division (ISD) is a division of National Services Scotland, part of NHS Scotland. ISD provides health information, health intelligence, statistical services and advice. Data is produced on remuneration and reimbursements details for all dispensing in Scotland annually but this is not comparable with the data in this publication.

Northern Ireland - The Business Services Organisation support functions and specialist professional services to the health and social care sector in Northern Ireland and produce information on the number of pharmacies, pharmacists and appliance suppliers. The data is produced annually, as at October and it is therefore not comparable to the England data which is at 31 March of each year.

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Index of Tables

ABLE	INDEX OF TABLES	PAGE
1	Number of community pharmacies in contract with PCTs at 31 March, items dispensed, dispensing fees received, average fees per pharmacy and average net ingredient cost (NIC) per fee, England, 2002-2003 to 2011-12	21
2	Community pharmacies in contract with PCTs at 31 March, prescription items dispensed per month and population by SHA, England 2011-12	23
2a	Community pharmacies in contract with PCTs at 31 March, average prescription items dispensed per month per pharmacy by SHA, England, 2006-07 to 2011-12	24
3	Number of community pharmacies in contract with PCT, number & percentage of prescription items dispensed by monthly dispensing volume in England 2006-07 to 2011-12	25
4	Number and percentage of community pharmacies owned by independent and multiple contractors in contract with PCTs at 31 March, England, 2006-07 to 2011-12	26
4a	Number and percentage of community pharmacies owned by independent and multiple contractors in contract with PCTs at 31 March by SHA, England, 2011-12	26
5	Decisions on applications relating to 2005 Pharmaceutical Services Regulations, numbers and percentage granted by application type, England 2005-06 to 2011-12	28
5a	Decisions on applications relating to specific 2005 Pharmaceutical Services Regulations, numbers and percentages of applications decided in controlled areas, England 2005-06 to 2011-12	29
5b	Decisions on applications relating to 2005 Pharmaceutical Services Regulations, numbers and percentages of applications decided in non-controlled areas, England 2005-06 to 2011-12	29
6	Decisions on applications relating to pharmaceutical services regulations, number and percentage of exempt category applications decided by application type, England 2005-06 to 2011-12	30
6a	Decisions on applications relating to pharmaceutical services regulations, number and percentage of exempt category applications decided by application type in controlled areas, England 2006-07 to 2011-12	31
6b	Decisions on applications relating to pharmaceutical services regulations, number and percentage of exempt category applications decided by application type in non-controlled areas, England 2006-07 to 2011-12	32
7	Decisions on applications on appeal relating to 2005 Pharmaceutical Services Regulations, number and percentage of appeals decided by application type and the status of appellant, England 2005-06 to 2011-12	33
7a	Decisions on applications on appeal relating to 2005 Pharmaceutical Services Regulations, numbers and percentage of appeals dismissed by application type and the status of appellant, England 2005-06 to 2011-12	34
8	Number and Percentage of the four "exempt categories" pharmacies by SHA in England 2008-09 to 2011-12	35
9	Community pharmacies opening by distance to the nearest pharmacy, England 2006-07 to 2011-12	36
9a	Community pharmacies closing by distance to the nearest pharmacy, England 2006-07 to 2011-12	36
10	Appliance contractors in contract with PCTs actively dispensing at 31 March, England 2002-03 to 2011-	36

TABLE	INDEX OF TABLES	PAGE
11	Community pharmacies receiving payment under the Essential Small Pharmacies Local Pharmaceutical Services (ESPLPS) scheme and Local Pharmaceutical Service (LPS) schemes at 31 March, number and percentage by SHA, England, 2006-07 to 2011-12	37
11a	Community pharmacies receiving payment under the Essential Small Pharmacy Local Pharmaceutical Services (ESPLPS) scheme and Local Pharmaceutical Services (LPS) scheme at 31 March, number and percentage England broken down by Metropolitan Boroughs, Unitary and Shire Authorities and London 2006-07 to 2011-12	38
12	Community pharmacies in contract with PCTs at 31 March, number and percentage providing Medicine Use Reviews (MUR) by SHA, England, 2006-07 to 2011-12	39
13	Community Pharmacy and appliance contractors in contact with PCTs as at 31 March, number and percentage providing Appliance Use Reviews by SHA, England 2010-11 to 2011-12	40
14	Community Pharmacy and appliance contractors in contact with PCTs as at 31 March, number and percentage providing Stoma Appliance Customisation by SHA, England 2010-11 to 2011-12	41
15	Community pharmacies in contract with PCTs at 31 March, number and percentage of local enhanced services provision, England, 2005-06 to 2011-12	42

FIGURE	INDEX OF FIGURES	PAGE
1	Items dispensed and dispensing fees received by community pharmacies, England 2002-2003 to 2011-12	22
2	Percentage of independent and multiple contractors by SHA at 31 March, England 2011-	27

Table 1: Number of community pharmacies in contract with PCTs at 31 March, items dispensed, dispensing fees received, average fees per pharmacy and average net ingredient cost (NIC) per fee, England, 2002-03 to 2011-12

average rees	•	•			` ''					
Year	2002-03	2003-04	2004-05	2005-06	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12
Number of co	ommunity ph	armacies								
England	9,748	9,759	9,736	9,872	10,133	10,291	10,475	10,691	10,951	11,236
Ü										
Prescription	items dispen	sed (millio	ns)							
		,	,							
England	566.3	596.5	623.2	659.0	688.4	725.8	771.5	813.3	850.7	885.0
Lingiand	300.5	330.3	023.2	033.0	000.4	723.0	771.5	013.5	050.7	000.0
Diananaina f	ann ronnivad	(millions)								
Dispensing f	ees received	(IIIIIIIOIIS)								
England	580.3	611.8	641.5	679.3	710.51	749.4	795.1	838.8	877.2	910.5
Average num	nber of fees p	er pharmad	cy							
England	59,530	62,691	65,854	68,808	70,121	72,818	75,903	78,458	80,100	81,030
Average net	ingredient co	st (NIC) pe	r fee							
•	_									
England	£10.87	£11.23	£11.29	£10.50	£10.36	£9.89	£9.39	£9.16	£9.04	£8.59
	~.0.07	~0	~0	~.5.00	~.5.00	~3.00	~5.00	23.10	23.0 1	~0.00

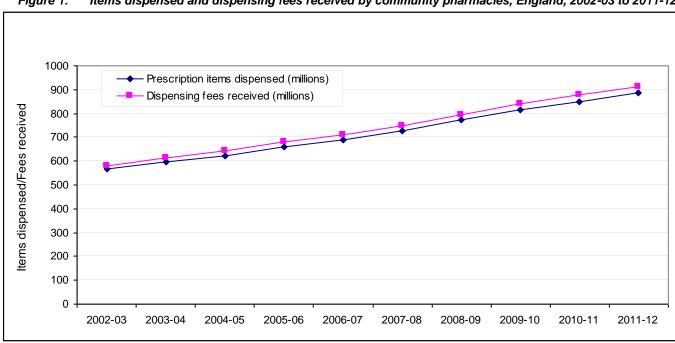


Figure 1: Items dispensed and dispensing fees received by community pharmacies, England, 2002-03 to 2011-12

Table 2: Community pharmacies in contract with PCTs at 31 March, prescription items dispensed per month & population by SHA⁽¹⁾ in England 2011-12

	Number of community pharmacies 2011-12	Prescription items dispensed per month (000)s 2011-12	Population (000)s Mid 2011	Pharmacies per 100,000 population 2011-12
England	11,236	73,568	53,107	21
North East	594	4,895	2,596	23
North West	1,764	11,978	7,056	25
Yorkshire and the Humber	1,178	8,241	5,288	22
East Midlands	897	6,242	4,537	20
West Midlands	1,255	7,975	5,609	22
East Of England	1,119	7,290	5,862	19
London	1,825	9,360	8,204	22
South East Coast	842	5,585	4,476	19
South Central	736	4,796	4,177	18
South West	1,026	7,208	5,301	19

Sources: NHS Prescription Services of the NHS Business Services Authority, Population data - Office for National Statistics

⁽¹⁾ See online appendix for PCT level data

General Pharmaceutical Services in England: 2002-03 to 2011-12

Table 2a: Community pharmacies in contract with PCTs at 31 March, average prescription items dispensed per month per pharmacy by SHA⁽¹⁾, England 2006-07 to 2011-12

		Numbe	er of comr	nunity pha	armacies		Average monthly items per pharmacy					
	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12
England	10,133	10,291	10,475	10,691	10,951	11,236	5,658	5,856	6,129	6,340	6,473	6,548
North East	527	534	545	561	581	594	6,925	7,157	7,650	7,916	8,036	8,241
North West	1,551	1,574	1,606	1,650	1,701	1,764	6,276	6,438	6,674	6,785	6,840	6,790
Yorkshire and the Humber	1,036	1,059	1,081	1,114	1,139	1,178	6,298	6,451	6,691	6,880	7,002	6,996
East Midlands	785	808	826	846	873	897	6,046	6,220	6,560	6,780	6,884	6,958
West Midlands	1,110	1,135	1,147	1,168	1,203	1,255	5,688	5,803	6,093	6,314	6,394	6,354
East Of England	986	1002	1,035	1,061	1,083	1,119	5,623	5,856	6,054	6,255	6,461	6,515
London	1,762	1,761	1,777	1,792	1,810	1,825	3,999	4,253	4,510	4,754	4,964	5,129
South East Coast	787	792	804	815	835	842	5,665	5,900	6,144	6,352	6,472	6,633
South Central	660	678	690	703	722	736	5,625	5,804	6,068	6,295	6,412	6,516
South West	929	948	964	981	1,004	1,026	6,037	6,221	6,505	6,738	6,866	7,025

⁽¹⁾ See online appendix for PCT level data

Table 3: Number of community pharmacies in contract with PCT, number & percentage of prescription items dispensed by monthly dispensing volume in England 2006-07 to 2011-12

Number and (percentage) of prescription items dispensed per month

Year	Tota	al	0-2,0	000	2,001-	4,000	4,001-6,	000	6,001-8,	000	8,001-10	0,000	+10,0	100
Number of	pharmacies													
2006-07	10,133	(100)	868	(9)	2,611	(26)	2,806	(28)	1,865	(18)	1,023	(10)	960	(9)
2007-08	10,291	(100)	778	(8)	2,548	(25)	2,839	(28)	1,922	(19)	1,100	(11)	1,104	(11)
2008-09	10,475	(100)	704	(7)	2,409	(23)	2,825	(27)	2,058	(20)	1,177	(11)	1,302	(12)
2009-10	10,691	(100)	721	(7)	2,242	(21)	2,831	(26)	2,147	(20)	1,275	(12)	1,475	(14)
2010-11	10,951	(100)	732	(7)	2,208 ⁽¹⁾	(20)	2,802	(26)	2,214 ⁽¹⁾	(20)	1,349	(12)	1,646	(15)
2011-12	11,236	(100)	759	(7)	2,208	(20)	2,882	(26)	2,221	(20)	1,433	(13)	1,733	(15)
Number and	d (percentage	e) of preso	ription item	s dispei	nsed per year	(000s)								
2006-07	688,427	(100)	12,677	(2)	97,091	(14)	166,662	(24)	155,311	(23)	109,333	(16)	147,353	(21)
2007-08	725,791	(100)	11,544	(2)	94,733	(13)	169,842	(23)	160,376	(22)	117,423	(16)	171,873	(24)
2008-09	771,514	(100)	10,247	(1)	90,113	(12)	169,038	(22)	171,346	(22)	126,042	(16)	204,729	(27)
2009-10	813,344	(100)	10,494	(1)	84,300	(10)	169,593	(21)	178,551	(22)	136,452	(17)	233,954	(29)
2010-11	850,671	(100)	9,850	(1)	82,706 ⁽¹⁾	(10)	167,698 ⁽¹⁾	(20)	184,234 ⁽¹⁾	(22)	143,985	(17)	262,198	(31)
2011-12	885,010	(100)	10,258	(1)	83,028	(9)	173,131	(20)	185,199	(21)	153,607	(17)	279,786	(32)

⁽¹⁾ Differs from previously published

Number and percentage of community pharmacies owned by independent and multiple contractors $^{(1)}$ in contract with PCTs at 31 March, England 2006-07 to 2011-12 Table 4:

number and (percentage)

	Community Pharmacies	Independent Contractors	Multiple Contractors
2006-07	10,133	4,169 (41)	5,964 (59)
2007-08	10,291	4,025 (39)	6,266 (61)
2008-09	10,475	4,019 (38)	6,456 <i>(62)</i>
2009-10	10,691	4,131 (39)	6,560 (61)
2010-11	10,951	4,221 (39)	6,730 (61)
2011-12	11,236	4,346 (39)	6,890 <i>(61)</i>

Source: NHS Prescription Services of the Business Services Authority

Table 4a: Number and percentage of community pharmacies independent and multiple contractors⁽¹⁾ in contract with PCTs, by SHA, at 31 March England 2011-12 ⁽²⁾

number and (percentage)

	Community Pharmacies	Indeper Contrac			ltiple ractors
England	11,236	4,346	(39)	6,890	(61)
North East	594	214	(36)	380	(64)
North West	1,764	591	(34)	1,173	(66)
Yorkshire and the Humber	1,178	381	(32)	797	(68)
East Midlands	897	318	(35)	579	(65)
West Midlands	1,255	492	(39)	763	(61)
East Of England	1,119	484	(43)	635	(57)
London	1,825	1,137	(62)	688	(38)
South East Coast	842	270	(32)	572	(68)
South Central	736	201	(27)	535	(73)
South West	1,026	258	(25)	768	(75)

⁽¹⁾ A multiple contractor is defined as consisting of 6 pharmacies or more. Contractors with 5 pharmacies or less are regarded as independent

⁽¹⁾ A multiple contractor is defined as consisting of 6 pharmacies or more. Contractors with 5 pharmacies or less are regarded as independent
(2) See on-line Appendix for PCT level data

Figure 2: Percentage of independent and multiple contractors by SHA at 31 March, England, 2011-12

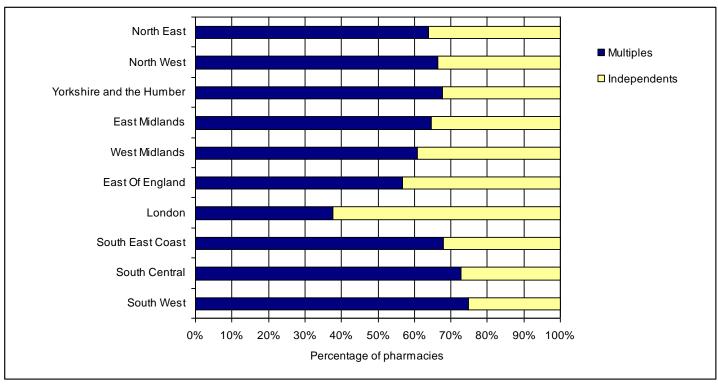


Table 5: Decisions on applications relating to 2005 Pharmaceutical Services Regulations, numbers and percentage granted by application type, 2005-06 to

numbers and (percentage) 2007-08 2008-09 2009-10 Number of applications 2005-06 2006-07 2010-11 2011-12 - DECIDED: 2.043 1.690 1.705 1.785 1.608 1.900 2.157 Controlled Area 121 (100)177 (100)223 (100) 285 (100) 178 (100) 400 (100)223 (100) Rurality (31) 22 12 (10) 34 (19)(10)(17)39 (22)263 (66)(22)Doctors (61, 65 (1) & 65 (4) (b)) 31 (26)13 8 8 (4) 5 (3)(7) (4)8 (3)(1) Pharmacy (5 (1) (a), 12, 13, 18, 35 & 170 66 (55)116 (66)177 (79)(60)103 (58)124 (31)153 (69)Pharmacy - Reserved Location (35) 12 (10)14 (8) 16 (7) 58 (20)28 (16)8 (2) 15 (7) Non-controlled Area Full application (5 (1) (a), 12, 13) 589 (100)697 (100)679 (100)788 (100)635 (100)901 (100)1,190 (100)All Other Areas (incl. minor relocations) 1,333 (100)816 (100)803 (100)712 (100)795 (100) 599 (100)744 (100)500m or under (Number within PCT) (18)231 5(1) (b) (ii) and (c), 6(3) & 7(3), 39(8) 236 277 (34)264 (33)(32)231 (29)218 (36)260 (35)500m or under (No. across PCT boundary) 5(1) (b) (ii) and (c), 6(3) & (15)7 (1) 2 (0) (0) (0) 7(3), 39(8) 206 6 (1)0 1 3 (0) Total within PCT All minors 5 (1) (b) (ii) and (c), 6, 7 & 39(8) 240 (18)307 (38) 298 (37)262 (37)288 (36)246 (41)290 (39)Total across PCT boundary 5 (1) (b) (ii) and (c), 6, 7 & 39(8) 212 (16)9 (0) 6 152 (19)2 (0) (1)(0) (1)Appliances only 4(1)(b) / 12(1) 3 (0) 2 (0) 3 (O) 6 6 (1) 11 (1) (1)(1)Additional services 5(1)(b) (i) and (ii) 15 Other 5(1)(b)(i), 8, 9, 10, 40 & 54 (15)417 (31)212 (26)232 (29)204 (29) 118 126 (21)177 (24)- GRANTED: 1,508 (100) 1.283 1.271 1.235 1.136 1,559 (100)1.690 Controlled Area 66 (100)112 (100)131 (100)157 (100)107 (100)366 (100)163 (100)Rurality (31) (14)(22)263 (25)Doctors (61, 65 (1) & 65 (4) (b)) 24 (36)8 (5) 8 (5) (4) 3 (2) Pharmacy (5 (1) (a), 12, 13, 18 & 36) 26 (39)67 (60)95 (73)77 (49)63 (59)93 (25)107 (66)Pharmacy - Reserved Location (35) 8 (12)12 (11)11 (8) 29 (18)16 (15)(2) 12 (7)Non-controlled Area Full application (5 (1) (a), 12, 13) 313 (100)422 (100)394 (100)449 (100)441 (100)657 (100)901 (100)All Other Areas (incl. minor relocations) 1.129 (100)749 (100)746 (100)629 (100)588 (100)536 (100)626 (100)500m or under (Number within PCT) 5(1) (b) (ii) and (c), 6(3) & 7(3), 39(8) 201 (18)256 (34)244 (33)206 (33)218 (37)205 (38)238 (38)500m or under (No. across PCT boundary) 5(1) (b) (ii) and (c), 6(3) & 7(3), 39(8) 165 (15)6 (1) 2 (0)6 (1) 0 (0) (0)3 (0) 1 Total within PCT All minors 5 (1) (b) (42) (ii) and (c), 6, 7 & 39(8) 204 (18)276 (37) (36)(37)262 (45)255 (41)272 233 224 Total across PCT boundary 5 (1) (b) 170 (15)(0) 2 (0) 3 (ii)and (c), 6, 7 & 39(8) (1)6 (1)0 (0) (1) Appliances only 4(1)(b) / 12(1) 2 2 3 (0) 4 9 3 (0)(0)(0)4 (1) (1)(1) Additional services 5(1)(b) (i) and (ii) 13 (1) 0 (0) (0)0 (0)0 (0)0 (0)0 (0) Other 5(1)(b)(i), 8, 9, 10, 40 & 54 373 201 221 (30) (27)100

(19)(19)(18)Source: The Health and Social Care Information Centre

Table 5a: Decisions on applications relating to specific 2005 Pharmaceutical Services Regulations $^{(1)}$, numbers and percentages of applications decided in controlled areas $^{(2)}$, 2005-06 to 2011-12

											n	umbers ar	nd <i>(perce</i>	entages)
Number of applications	200	05-06	20	06-07	20	07-08	200	08-09	20	09-10	20	010-11	20	11-12
- Decided:	66	(100)	116	(100)	177	(100)	170	(100)	103	(100)	124	(100)	153	(100)
- Granted	26	(39)	67	(58)	95	(54)	77	(45)	63	(61)	93	(75)	107	(70)
- Refused	37	(56)	35	(30)	57	(32)	75	(44)	37	(36)	24	(19)	40	(26)
- Withdrawn	3	(5)	14	(12)	25	(14)	18	(11)	3	(3)	7	(6)	6	(4)
- Outstanding:	39		39		59		47		34		75		150	
- With A Closure (Major Relocation):	1		0		1		0		0		0		3	
- Where Grant Lapsed Before Opening:	3		12		3		7		11		6		13	
- Decided On Appeal:	16	(100)	36	(100)	37	(100)	95	(100)	68	(100)	66	(100)	103	(100)
- Dismissed	16	(100)	13	(36)	24	(65)	60	(63)	45	(66)	38	(58)	26	(25)
- Upheld	0	(0)	18	(50)	13	(35)	31	(33)	20	(29)	27	(41)	27	(26)
- Withdrawn	0	(O)	5	(14)	0	(0)	4	(4)	3	(4)	1	(2)	50	(49)

Source: The Health and Social Care Information Centre & NHS Litigation Authority Family Health Services Appeal Unit

Table 5b: Decisions on applications relating to 2005 Pharmaceutical Services Regulations, numbers and percentages of applications decided in non-controlled areas, 2005-06 to 2011-12

A1 1 6 11 11				00.07		07.00				20.40			and (perce	
Number of applications	200)5-06	200	06-07	20	07-08	200	08-09	20	09-10	20)10-11	201	1-12
- Decided:	589	(100)	697	(100)	679	(100)	788	(100)	635	(100)	901	(100)	1,190	(100)
- Granted	313	(53)	422	(61)	394	(58)	449	(57)	441	(69)	657	(73)	901	(76)
- Refused	237	(4Ó)	224	(32)	223	(33)	280	(36)	162	(26)	206	(23)	230	(19)
- Withdrawn	39	(7)	51	(7)	62	(9)	59	(7)	32	(5)	38	(4)	59	(5)
- Outstanding:	182		135		313		188		187		607		544	
- With A Closure (Major Relocation):	0		10		5		7		6		8		8	
- Where Grant Lapsed Before Opening:	0		41		29		51		61		70		185	
- Decided On Appeal:	60	(100)	184	(100)	229	(100)	339	(100)	175	(100)	192	(100)	274	(100)
- Dismissed	49	(82)	110	(60)	160	(70)	252	(74)	122	(70)	130	(68)	205	(75)
- Upheld	11	(18)	63	(34)	59	(26)	75	(22)	47	(27)	53	(28)	61	(22)
- Withdrawn	0	(0)	11	(6)	10	(4)	12	(4)	6	(3)	9	(5)	8	(3)

Source: The Health and Social Care Information Centre & NHS Litigation Authority Family Health Services Appeal Unit

^{(1) 2005} Pharmaceutical regulation Pharmacy (5 (1) (a), 12, 13, 18, 35 & 36))

⁽²⁾ A controlled area is an area in which the PCT, or on appeal, the Secretary of State has determined as rural in character

Table 6: Decisions on applications relating to pharmaceutical services regulations, number and percentage of exempt category applications decided by application type, England only, 2005-06 to 2011-12

Number of												numbers a	anu (per	<i>ternage)</i>
applications	200	05-06	200	06-07	20	07-08	20	08-09	20	09-10	20	10-11	201	1-12
All Four Exemptions	294	(100)	392	(100)	319	(100)	349	(100)	339	(100)	549	(100)	867	(100)
- Granted	226	(77)	316	(81)	260	(82)	301	(86)	303	(89)	498	(91)	790	(91)
- Refused	51	(17)	48	(12)	31	(10)	17	(5)	22	(6)	28	(5)	34	(4)
- Withdrawn	17	(6)	28	(7)	28	(9)	31	(9)	14	(4)	23	(4)	43	(5)
Outstanding	96		62		115		134		124		490		422	
100 Hour Pharmacies	199	(100)	319	(100)	266	(100)	288	(100)	258	(100)	438	(100)	716	(100)
- Granted	156	(78)	259	(81)	223	(84)	253	(88)	232	(90)	411	(94)	662	(92)
- Refused	156 28	(14)	39	(12)	19	(7)	255	(3)	14	<i>(50)</i>	8	(2)	19	(32)
- Withdrawn	15	(8)	21	(7)	24	(9)	27	(9)	12	<i>(5)</i>	19	(4)	35	<i>(5)</i>
Outstanding	72		48		95		106		94		397		366	
Out Of Town Shopping Developments	62	(100)	34	(100)	10	(100)	12	(100)	30	(100)	27	(100)	41	(100)
- Granted	51	(82)	33	(97)	8	(80)	12	(100)	26	(87)	27	(100)	40	(98)
- Refused	10	(16)	1	(3)	2	(20)	0	(0)	2	(7)	0	(0)	1	(2)
- Withdrawn	1	(2)	0	(0)	0	(0)	0	(0)	2	(7)	0	(0)	0	(0)
Outstanding	7		2		2		2		8		31		19	
Mail Order Or Internet Based	25	(100)	27	(100)	37	(100)	46	(100)	48	(100)	78	(100)	107	(100)
				. ,				. ,						
- Granted - Refused	18	(72)	19	(70)	27	(73)	35	(76)	44	(92)	60	(77) (18)	87	(81)
- Withdrawn	6 1	(24) (4)	3 5	(11) (19)	6 4	(16) (11)	8 3	(17) (7)	4 0	(8) (0)	14 4	(18) (5)	12 8	(11) (7)
Outstanding	15		8		17		25		22		61		36	
One-Stop Primary Care Centre	8	(100)	12	(100)	6	(100)	3	(100)	3	(100)	6	(100)	3	(100)
- Granted	1	(13)	5	(42)	2	(33)	1	(33)	1	(33)	0	(0)	1	(33)
- Refused	7	(88)	5	(42)	4	(67)	1	(33)	2	(67)	6	(100)	2	(67)
- Withdrawn	0	(0)	2	(17)	0	(0)	1	(33)	0	(0)	0	(0)	0	(0)
Outstanding	2		4		1		1		0		1		1	

Table 6a: Decisions on applications relating to pharmaceutical services regulations, number and percentage of exempt category applications decided by application type in controlled areas⁽¹⁾, 2006-07⁽²⁾ to 2011-12

									nι	ımbers an	d (per	centage)
Number of applications	20	006-07	20	07-08	20	008-09	20	009-10	20	10-11	20	11-12
All Four Exemptions	26	(100)	28	(100)	22	(100)	11	(100)	19	(100)	22	(100)
GrantedRefusedWithdrawn	20 3 3	(77) (12) (12)	25 3 0	(89) (11) (0)	17 4 1	(77) (18) (5)	10 1 0	(91) (9) (0)	19 0 0	(100) (0) (0)	18 0 4	(82) (0) (18)
Outstanding	9		15		7		5		22		18	
100 Hour Pharmacies	18	(100)	20	(100)	18	(100)	4	(100)	13	(100)	19	(100)
GrantedRefusedWithdrawn	14 2 2	(78) (11) (11)	19 1 0	(95) (5) (0)	16 1 1	(89) (6) (6)	3 1 0	(75) (25) (0)	13 0 0	(100) (0) (0)	15 0 4	(79) (0) (21)
Outstanding	7		9		5		4		19		16	
Out Of Town Shopping Developments	5	(100)	1	(100)	0		4	(100)	3	(100)	0	
GrantedRefusedWithdrawn	5 0 0	(100) (0) (0)	1 0 0	(100) (0) (0)	0 0 0		4 0 0	(100) (0) (0)	3 0 0	(100) (0) (0)	0 0 0	
Outstanding	0		0		0		0		1		0	
Mail Order Or Internet Based	2	(100)	6	(100)	4	(100)	3	(100)	3	(100)	3	(100)
GrantedRefusedWithdrawn	1 1 0	(50) (50) (0)	5 1 0	(83) (17) (0)	1 3 0	(25) (75) (0)	3 0 0	(100) (0) (0)	3 0 0	(100) (0) (0)	3 0 0	(100) (0) (0)
Outstanding	2		6		2		1		2		2	
One-Stop Primary Care Centre	1	(100)	1	(100)	0		0		0		0	
- Granted - Refused - Withdrawn	0 0 1	(0) (0) (100)	0 1 0	(0) (100) (0)	0 0 0		0 0 0		0 0 0		0 0 0	
Outstanding	0		0		0		0		0		0	

⁽¹⁾ A controlled area is an area in which the PCT, or on appeal, the Secretary of State has determined as rural in character

⁽²⁾ Data for exempt contractor applications was not collected by controlled and non-controlled area categories during 2005-06. This level of data is only available from 2006-07 onwards

Table 6b: Decisions on applications relating to pharmaceutical services regulations, number and percentage of exempt category applications decided by application type in non-controlled areas, 2006-07⁽¹⁾ to 2011-12

or exempt catego	лу арр	lications	decid	ей бу ар	piicati	on type		inti onea a		mbers ar		
Number of applications	200	06-07	20	07-08	20	08-09	200	9-10	201	0-11	20	11-12
All Four Exemptions	366	(100)	291	(100)	327	(100)	328	(100)	530	(100)	845	(100)
- Granted	296	(81)	235	(81)	284	(87)	293	(89)	479	(90)	772	(91)
- Refused	45	(12)	28	(10)	13	(4)	21	(6)	28	(5)	34	(4)
- Withdrawn	25	(7)	28	(10)	30	(9)	14	(4)	23	(4)	39	(5)
Outstanding	53		100		127		119		468		404	
100 Hour Pharmacies	301	(100)	246	(100)	270	(100)	254	(100)	425	(100)	697	(100)
- Granted	245	(81)	204	(83)	237	(88)	229	(90)	398	(94)	647	(93)
RefusedWithdrawn	37 19	(12) (6)	18 24	(7) (10)	7 26	(3) (10)	13 12	(5) (5)	8 19	(2) (4)	19 31	(3)
- Williamii	19	(0)	24	(10)	20	(10)	12	(3)	19	(4)	31	(4)
Outstanding	41		86		101		90		378		350	
Out Of Town Shopping												
Developments	29	(100)	9	(100)	12	(100)	26	(100)	24	(100)	41	(100)
- Granted	28	(97)	7	(78)	12	(100)	22	(85)	24	(100)	40	(98)
- Refused	1	(3)	2	(22)	0	(0)	2	(8)	0	(0)	1	(2)
- Withdrawn	0	(0)	0	(0)	0	(0)	2	(8)	0	(0)	0	(0)
Outstanding	2		2		2		8		30		19	
Mail Order Or												
Internet Based	25	(100)	31	(100)	42	(100)	45	(100)	75	(100)	104	(100)
- Granted	18	(72)	22	(71)	34	(81)	41	(91)	57	(76)	84	(81)
- Refused	2	(8)	5	(16)	5	(12)	4	(9)	14	(19)	12	(12)
- Withdrawn	5	(20)	4	(13)	3	(7)	0	(0)	4	(5)	8	(8)
Outstanding	6		11		23		21		59		34	
One-Stop Primary Care Centre	11	(100)	5	(100)	3	(100)	3	(100)	6	(100)	3	(100)
									_		_	-
GrantedRefused	5 5	(45)	2 3	(40)	1	(33)	1 2	(33) (67)	0 6	(0) (100)	1 2	(33) (67)
- Refused - Withdrawn	5 1	(45) (9)	0	(60) (0)	1 1	(33) (33)	0	(67) (0)	0	(0)	0	(67) (0)
Outstanding	4		1		1		0		1		1	

⁽¹⁾ A controlled area is an area in which the PCT, or on appeal, the Secretary of State has determined as rural in character

⁽²⁾ Data for exempt contractor applications was not collected by controlled and non-controlled area categories during 2005-06. This level of data is only available from 2006-07 onwards

Table 7: Decisions on applications on appeal relating to 2005 Pharmaceutical Services Regulations, number and percentage of appeals decided by application type and the status of appellant, England 2005-06 to 2011-12

	7							-			nu	mbers an	d (perce	entages)
Number of applications:	20	05-06	200	06-07	200	07-08	200	08-09	200	09-10	201	10-11	20	11-12
- DECIDED														
Controlled Area	16	(100)	36	(100)	37	(100)	95	(100)	68	(100)	66	(100)	103	(100)
Rurality (31) Doctors (61, 65 (1) & 65 (4) (b)) Pharmacy (5 (1) (a), 12, 13, 18 &	0 16	(0) (100)	10 1	(28) (3)	12 1	(32) (3)	20 1	(21) (1)	13 0	(19) (0)	12 0	(18) (0)	70 1	(68) (1)
36)) Pharmacy - Reserved Location	0	(0)	18	(50)	19	(51)	64	(67)	49	(72)	47	(71)	29	(28)
(35))	0	(0)	7	(19)	5	(14)	10	(11)	6	(9)	7	(11)	3	(3)
Total of which: the applicant was the appellant the applicant was not the	2	(13)	13	(36)	11	(30)	50	(53)	39	(58)	34	(52)	18	(17)
appellant	14	(88)	23	(64)	26	(70)	45	(47)	28	(42)	32	(48)	85	(83)
Non-controlled Area Full application (5 (1) (a), 12, 13))	60	(100)	184	(100)	229	(100)	339	(100)	175	(100)	192	(100)	274	(100)
Total of which: the applicant was the appellant the applicant was not the	44	(73)	106	(58)	149	(65)	225	(66)	118	(68)	150	(78)	227	(83)
appellant	16	(27)	78	(42)	80	(35)	114	(34)	56	(32)	42	(22)	47	(17)
All Other Areas (incl. minor relocations)	13	(100)	63	(100)	65	(100)	105	(100)	136	(100)	44	(100)	75	(100)
500m or under (No. within PCT) 5(1) (b) (ii), (c), 6(3) & 7(3), 39(8) 500m or under (No. across PCT boundary) 5(1) (b) (ii), (c), 6(3) &	2	(15)	19	(30)	23	(35)	31	(30)	29	(21)	16	(36)	21	(28)
7(3), 39(8) Total within PCT All minors 5 (1)	0	(0)	0	(0)	0	(0)	0	(0)	38	(28)	0	(0)	0	(0)
(b) (ii) and (c), 6, 7 & 39(8) Total across PCT boundary 5 (1)	11	(85)	44	(70)	42	(65)	66	(63)	67	(49)	27	(61)	54	(72)
(b) (ii) and (c), 6, 7 & 39(8) Appliances only 4(1)(b) / 12(1)	0	(0) (0)	0 0	(0) (0)	0	(0) (0)	0	(0) (0)	0 0	(0) (0)	0 0	(0) (0)	0	(0) (0)
Additional services 5(1)(b) (i)		, ,		, ,	•	, ,		, ,		, ,		, ,		• •
and (ii) /12(1) Other 5(1)(b)(i), 8, 9, 10, 40 &	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)
54	0	(0)	0	(0)	0	(0)	8	(8)	2	(1)	1	(2)	0	(0)
Total of which: the applicant was the appellant the applicant was not the	3	(23)	26	(41)	21	(32)	26	(25)	37	(30)	12	(27)	29	(39)
appellant	10	(77)	37	(59)	44	(68)	79	(75)	87	(70)	32	(73)	46	(61)

Source: NHS Litigation Authority Family Health Services Appeal Unit

Table 7a: Decisions on applications on appeal relating to 2005 Pharmaceutical Services Regulations, numbers and percentage of appeals dismissed by application type and the status of appellant, England 2005-06 to 2011-12

Number of applications:	20	05-06	200	06-07	2007-0	08	2008	R-09	200	09-10		<u>mbers an</u> 10-11		entages) 11-12
- DECIDED														
Controlled Area	16	(100)	13	(100)	24	(100)	60	(100)	45	(100)	38	(100)	26	(100)
Rurality (31) Doctors (61, 65 (1) & 65 (4)	0	(0)	2	(15)	5	(21)	11	(18)	11	(24)	2	(5)	8	(31)
(b)) Pharmacy (5 (1) (a), 12, 13, 18	16	(100)	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)
& 36)) Pharmacy - Reserved Location	0	(0)	6	(46)	16	(67)	42	(70)	30	(67)	31	(82)	15	(58)
(35))	0	(0)	5	(38)	3	(13)	7	(12)	4	(9)	5	(13)	3	(12)
Total of which: the applicant was the appellant the applicant was not the	2	(13)	9	(69)	6	(25)	27	(45)	25	(56)	22	(58)	10	(38)
appellant	14	(88)	4	(31)	18	(75)	33	(55)	20	(44)	16	(42)	16	(62)
Non-controlled Area Full application (5 (1) (a), 12, 13))	49	(100)	110	(100)	160	(100)	252	(100)	122	(100)	130	(100)	205	(100)
Total of which: the applicant was the appellant the applicant was not the	40	(82)	81	(74)	107	(67)	177	(70)	85	(70)	104	(80)	180	(88)
appellant	9	(18)	29	(26)	53	(33)	75	(30)	37	(30)	26	(20)	25	(12)
All Other Areas (incl. minor relocations)	10	(100)	28	(100)	46	(100)	64	(100)	78	(100)	37	(100)	48	(100)
500m or under (No. within PCT) 5(1) (b) (ii), (c), 6(3) & 7(3), 39(8) 500m or under (No. across PCT boundary) 5(1) (b) (ii), (c),	2	(20)	7	(25)	17	(37)	24	(38)	19	(24)	13	(35)	12	(25)
6(3) & 7(3), 39(8) Total within PCT All minors 5	0	(0)	0	(0)	0	(0)	0	(0)	19	(24)	0	(0)	0	(0)
(1) (b) (ii) and (c), 6, 7 & 39(8) Total across PCT boundary 5	8	(80)	21	(75)	29	(63)	36	(56)	38	(49)	23	(62)	36	(75)
(1) (b) (ii) and (c), 6, 7 & 39(8) Appliances only 4(1)(b) / 12(1)	0 0	(0) (0)	0 0	(O) (O)										
Additional services 5(1)(b) (i) and (ii) /12(1) Other 5(1)(b)(i), 8, 9, 10, 40 &	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)
54	0	(0)	0	(0)	0	(0)	4	(6)	2	(3)	1	(3)	0	(0)
Total of which: the applicant was the appellant the applicant was not the	2	(20)	19	(68)	14	(30)	11	(17)	23	(29)	10	(27)	18	(38)
appellant	8	(80)	9	(32)	32	(70)	53	(83)	55	(71)	27	(73)	30	(63)

Source: NHS Litigation Authority Family Health Services Appeal Unit

Table 8: Number and percentage of the four "exempt categories" pharmacies by SHA⁽¹⁾ in England 2008-09⁽²⁾ to 2011-12

			Numbei	r of comm	· nunitv P	harmacies	s	•			To	otal of fo	ur exen		ers and (pe	rcentage)
	20	08-09		09-10		10-11		11-12	2008	3-09		9-10		10-11	201	1-12
England	20	10,475	20	10,691		10,951	20	11,236	555	(5.3)	671	(6.3)	882	(8.1)	1,166	(10.4)
North East		545		561		581		594	28	(5.1)	41	(7.3)	51	(8.8)	64	(10.8)
North West Yorkshire and		1,606		1,650		1,701		1,764	103	(6.4)	127	(7.7)	184	(10.8)	249	(14.1)
the Humber		1,081		1,114		1,139		1,178	78	(7.2)	93	(8.3)	117	(10.3)	157	(13.3)
East Midlands		826		846		873		897	54	(6.5)	62	(7.3)	87	(10.0)	117	(13.0)
West Midlands		1,147		1,168		1,203		1,255	78	(6.8)	88	(7.5)	98	(8.1)	139	(11.1)
East Of England		1,035		1,061		1,083		1,119	61	(5.9)	67	(6.3)	86	(7.9)	118	(10.5)
London		1,777		1,792		1,810		1,825	51	(2.9)	60	(3.3)	74	(4.1)	88	(4.8)
South East								842								
Coast		804		815		835		-	23	(2.9)	20	(2.5)	59	(7.1)	62	(7.4)
South Central		690		703		722		736	35	(5.1)	48	(6.8)	56	(7.8)	73	(9.9)
South West		964		981		1,004		1,026	44	(4.6)	65	(6.6)	70	(7.0)	99	(9.6)
,			1	00 Hour I	harma	cies				C	Out of To	own Sho	pping [Developm	ents	
	20	08-09	20	09-10	20	10-11	20	11-12	2008	3-09	200	9-10	20	10-11	201	1-12
England	450	(4.3)	535	(5.0)	689	(6.3)	888	(7.9)	46	(0.4)	57	(0.5)	60	(0.5)	93	(0.8)
North East	25	(4.6)	32	(5.7)	42	(7.2)	51	(8.6)	1	(0.2)	4	(0.7)	3	(0.5)	7	(1.2)
North West Yorkshire and	79	(4.9)	100	(6.1)	128	(7.5)	175	(9.9)	9	(0.6)	10	(0.6)	12	(0.7)	20	(1.1)
the Humber	63	(5.8)	77	(6.9)	99	(8.7)	125	(10.6)	10	(0.9)	9	(0.8)	9	(0.8)	12	(1.0)
East Midlands	42	(5.1)	48	(5.7)	69	(7.9)	87	(9.7)	4	(0.5)	6	(0.7)	8	(0.9)	17	(1.9)
West Midlands	63	(5.5)	64	(5.5)	72	(6.0)	96	(7.6)	8	(0.7)	11	(0.9)	7	(0.6)	16	(1.3)
East Of England	46	(4.4)	50	(4.7)	68	(6.3)	92	(8.2)	5	(0.5)	6	(0.6)	4	(0.4)	8	(0.7)
London	47	(2.6)	56	(3.1)	65	(3.6)	76	(4.2)	0	(0.0)	0	(0.0)	2	(0.1)	1	(0.1)
South East	• •	(=:0)		(0)		(0.0)		(/	ŭ	(0.0)	· ·	(0.0)	_	(01.7)	•	(01.1)
Coast	19	(2.4)	17	(2.1)	49	(5.9)	51	(6.1)	1	(0.1)	1	(0.1)	4	(0.5)	3	(0.4)
South Central	29	(4.2)	38	(5.4)	43	(6.0)	56	(7.6)	2	(0.3)	2	(0.3)	3	(0.4)	3	(0.4)
South West	37	(3.8)	53	(5.4)	54	(5.4)	79	(7.7)	6	(0.6)	8	(0.8)	8	(0.8)	6	(0.6)
			Mail	Order or	Interne	t Based		. ,			One-	Stop Pri	marv Ca	are Centre	е	. /
	20	08-09	20	09-10	20	10-11	20	11-12	2008	3-09		9-10		10-11		1-12
England	56	(0.5)	76	(0.7)	122	(1.1)	176	(1.6)	3	(0.0)	3	(0.0)	11	(0.1)	9	(0.1)
North East	2	(0.4)	5	(0.9)	6	(1.0)	6	(1.0)	0	(0.0)	0	(0.0)	0	(0.0)	0	(0.0)
North West	13	(0.8)	17	(1.0)	36	(2.1)	51	(2.9)	2	(0.1)	0	(0.0)	8	(0.5)	3	(0.2)
Yorkshire and		()		(-/		,	_	(-/		(- /	-	(/	_	(/		(-)
the Humber	5	(0.5)	6	(0.5)	8	(0.7)	16	(1.4)	0	(0.0)	1	(0.1)	1	(0.1)	4	(0.3)
East Midlands	7	(0.8)	7	(0.8)	8	(0.9)	12	(1.3)	1	(0.1)	1	(0.1)	2	(0.2)	1	(0.1)
West Midlands	7	(0.6)	12	(1.0)	19	(1.6)	27	(2.2)	0	(0.0)	1	(0.1)	0	(0.0)	0	(0.0)
East Of England	10	(1.0)	11	(1.0)	14	(1.3)	18	(1.6)	0	(0.0)	0	(0.0)	0	(0.0)	0	(0.0)
London	4	(0.2)	4	(0.2)	7	(0.4)	11	(0.6)	0	(0.0)	0	(0.0)	0	(0.0)	0	(0.0)
South East	7	(0.2)	7	(0.2)	,	(<i>0t)</i>		(0.0)	0	(0.0)	J	(0.0)	U	(0.0)	U	(0.0)
Coast	3	(0.4)	2	(0.2)	6	(0.7)	8	(1.0)	0	(0.0)	0	(0.0)	0	(0.0)	0	(0.0)
South Central	4	(0.6)	8	(1.1)	10	(1.4)	14	(1.9)	0	(0.0)	Ö	(0.0)	0	(0.0)	0	(0.0)
South West	1	(0.1)	4	(0.4)	8	(0.8)	13	(1.3)	0	(0.0)	0	(0.0)	0	(0.0)	1	(0.1)
(1) 0 1' 1		(o)		1/		1/		1 -/				1 /			Information	

⁽¹⁾ See on-line Appendix for PCT level data(2) Data for exempt contractor pharmacies was not collected prior to 2008-09

Table 9: Community pharmacies opening by distance to the nearest pharmacy, England 2006-07 to 2011-12

number and (percentage)

 Year	With	in 500m	500m	ı - 1km	Ove	r 1km	T	otal
2006-07	92	(34)	129	(48)	48	(18)	269	(100)
2007-08	88	(45)	68	(35)	41	(21)	197	(100)
2008-09	79	(44)	55	(31)	45	(25)	179	(100)
2009-10	81	(38)	81	(38)	53	(25)	215	(100)
2010-11	109	(47)	91	(39)	33	(14)	233	(100)
 2011-12	205	(65)	75	(24)	36	(11)	316	(100)

Source: The Health and Social Care Information Centre

Table 9a: Community pharmacies closing by distance to the nearest pharmacy, England 2006-07 to 2011-12

number and (percentage)

Year	Within 500m	500m - 1km	Over 1km	Total
2006-07	17 <i>(</i> 33)	31 <i>(60)</i>	4 (8)	52 (100)
2007-08	10 (38)	11 <i>(42)</i>	5 (19)	26 (100)
2008-09	20 (51)	15 (38)	4 (10)	39 (100)
2009-10	27 (66)	9 (22)	5 (12)	41 (100)
2010-11	16 (73)	4 (18)	2 (9)	22 (100)
2011-12	26 (63)	14 <i>(34)</i>	1 (2)	41 (100)

Source: The Health and Social Care Information Centre

Table 10: Appliance contractors in contract with PCTs actively dispensing at 31 March, England 2002-03 to 2011-12

Year	Number of appliance contractors	Number and () appliance of actively dispense.	contractors	Number of Items dispensed (000s)
2002-03	182	162	(89)	2,058.0
2003-04	172	146	(85)	2,353.0
2004-05	167	134	(80)	2,647.2
2005-06	176	139	(79)	3,174.0
2006-07	164	128	(78)	3,621.4
2007-08	155	123	(79)	4,003.5
2008-09	149	123	(83)	4,589.9
2009-10	137	95	(69)	5,249.5
2010-11	125	100	(80)	5,754.5
2011-12	135	120	(89)	6,424.8

Table 11: Community pharmacies receiving payment under the Essential Small Pharmacy Local Pharmaceutical Services (ESPLPS) scheme and Local Pharmaceutical Services (LPS) scheme at 31 March, number and percentage, England 2006-07 to 2011-12⁽¹⁾

number and (percentage)

	All LPS Scheme Contractors													
	200	06-07	200	07-08	20	08-09	20	09-10	20	10-11	201	11-12		
England	226	(100)	222	(100)	200	(100)	179	(100)	180	(100)	172	(100)		
North East	11	(5)	17	(8)	17	(9)	12	(7)	13	(7)	13	(8)		
North West	34	(15)	25	(11)	26	(13)	22	(12)	23	(13)	21	(12)		
Yorkshire and the		, ,								, ,		, ,		
Humber	14	(6)	10	(5)	10	(5)	9	(5)	8	(4)	8	(5)		
East Midlands	11	(5)	15	(7)	11	(6)	11	(6)	12	(7)	9	(5)		
West Midlands	18	(8)	14	(6)	13	(7)	11	(6)	12	(7)	11	(6)		
East Of England	17	(8)	34	(15)	32	(16)	32	(18)	24	(13)	21	(12)		
London	47	(21)	59	(27)	58	(29)	47	(26)	57	(32)	57	(33)		
South East Coast	17	(8)	15	(7)	12	(6)	9	(5)	12	(7)	14	(8)		
South Central	32	(14)	22	(10)	17	(9)	20	(11)	12	(7)	11	(6)		
South West	25	(11)	11	(5)	4	(2)	6	(3)	7	(4)	7	(4)		

of which ESPLPS Scheme Contractors

	2006-07		2007-08		2008-09		2009-10		2010-11		2011-12	
England	181	(100)	179	(100)	155	(100)	136	(100)	132	(100)	118	(100)
North East	11	(6)	17	(9)	17	(11)	12	(9)	13	(10)	13	(11)
North West	24	(13)	16	(9)	17	(11)	14	(10)	13	(10)	14	(12)
Yorkshire and the		, ,		. ,		, ,		, ,		, ,		, ,
Humber	13	(7)	10	(6)	9	(6)	9	(7)	8	(6)	7	(6)
East Midlands	11	(6)	14	(8)	10	(6)	9	(7)	12	(9)	9	(8)
West Midlands	17	(9)	14	(8)	12	(8)	11	(8)	11	(8)	10	(8)
East Of England	16	(9)	34	(19)	32	(21)	32	(24)	24	(18)	20	(17)
London	28	(15)	30	(17)	29	(19)	18	(13)	24	(18)	17	(14)
South East Coast	13	(7)	11	(6)	8	(5)	5	(4)	8	(6)	10	(8)
South Central	25	(14)	22	(12)	17	(11)	20	(15)	12	(9)	11	(9)
South West	23	(13)	11	(6)	4	(3)	6	(4)	7	(5)	7	(6)

of which Other LPS Scheme Contractors

	2006-07		2007-08		2008-09		2009-10		2010-11		2011-12	
England	45	(100)	43	(100)	43	(100)	43	(100)	48	(100)	54	(100)
North East	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)
North West	10	(22)	9	(21)	9	(21)	8	(19)	10	(21)	7	(13)
Yorkshire and the		, ,		, ,		, ,		, ,				. ,
Humber	1	(2)	0	(0)	0	(0)	0	(0)	0	(0)	1	(2)
East Midlands	0	(0)	1	(2)	1	(2)	2	(5)	0	(0)	0	(0)
West Midlands	1	(2)	0	(0)	0	(0)	0	(0)	1	(2)	1	(2)
East Of England	1	(2)	0	(0)	0	(0)	0	(0)	0	(0)	1	(2)
London	19	(42)	29	(67)	29	(67)	29	(67)	33	(69)	40	(74)
South East Coast	4	(9)	4	(9)	4	(9)	4	(9)	4	(8)	4	(7)
South Central	7	(16)	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)
South West	2	(4)	0	(0)	0	(0)	0	(0)	0	(0)	0	(0)

⁽¹⁾ See on-line Appendix for PCT level data

Table 11a: Community pharmacies receiving payment under the Essential Small Pharmacy Local Pharmaceutical Services (ESPLPS) scheme and Local Pharmaceutical Services (LPS) scheme at 31 March, number and percentage England broken down by Metropolitan Boroughs, Unitary and Shire Authorities, and London 2006-07 to 2011-12

numbers	and	(percentage)

			Metropolitan		Unitary & Shire			
Year	England	Boro	Boroughs		Authorities		London	
Total number	r and percenta	ge of ESPLPS c	s					
2006-07	181 (100) 33	(18)	120	(66)	28	(15)	
2007-08	179 (100) 24	(13)	125	(70)	30	(17)	
2008-09	155 (100) 25	(18)	101	(74)	29	(21)	
2009-10	136 (100) 21	(15)	97	(71)	18	(13)	
2010-11	132 (100) 18	(14)	90	(68)	24	(18)	
2011-12	118 (100) 18	(15)	83	(70)	17	(14)	
Number and	percentage of	other LPS contr	actors					
2006-07	45 (100) 8	(18)	18	(40)	19	(42)	
2007-08	43 (100) 5	(12)	9	(21)	29	(67)	
2008-09	45 (100) 6	(14)	10	(23)	29	(67)	
2009-10	43 (100) 5	(12)	9	(21)	29	(67)	
2010-11	48 (100) 6	(13)	9	(19)	33	(69)	
2011-12	54 (100) 6	(11)	8	(15)	40	(74)	
Total number	r and percenta	ge of all LPS co	ntractors					
2006-07	226 (100) 41	(18)	138	(61)	47	(21)	
2007-08	222 (100) 29	(13)	134	(60)	59	(27)	
2008-09	200 (100) 31	(15)	111	(62)	58	(32)	
2009-10	179 (100) 26	(15)	106	(59)	47	(26)	
2010-11	180 (100) 24	(13)	99	(55)	57	(32)	
2011-12	172 (100) 24	(14)	91	(53)	57	(33)	

Table 12: Community pharmacies in contract with PCTs at 31 March, number and percentage providing Medicine Use Reviews (MUR) by SHA⁽¹⁾, England 2006-07 to 2011-12 numbers and (percentage)

	Number of community pharmacies							Pharmacies providing MUR services ⁽²⁾					
	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	
England	10,133	10,291	10,475	10,691	10,951	11,236	6,314	7,529	8,679	9,165	9,621	10,173	
North East	527	534	545	561	581	594	264	334	433	452	481	529	
North West	1,551	1,574	1,606	1,650	1,701	1,764	869	1,080	1,273	1,398	1,473	1,555	
Yorkshire and the Humber	1,036	1,059	1,081	1,114	1,139	1,178	648	764	900	951	993	1,063	
East Midlands	785	808	826	846	873	897	506	627	736	765	784	832	
West Midlands	1,110	1,135	1,147	1,168	1,203	1,255	718	839	983	1,010	1,048	1,114	
East Of England	986	1,002	1,035	1,061	1,083	1,119	668	780	869	916	976	1,028	
London	1,762	1,761	1,777	1,792	1,810	1,825	1,054	1,248	1,397	1,472	1,550	1,632	
South East Coast	787	792	804	815	835	842	515	595	683	725	770	789	
South Central	660	678	690	703	722	736	457	531	599	619	643	676	
South West	929	948	964	981	1,004	1,026	615	731	806	857	903	955	
	Perd	entage of	Pharmacie	s providing	MUR serv	/ices		Total MURs					
	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	
England	(62.3)	(73.2)	(82.9)	(85.7)	(87.9)	(90.5)	559,315	951,358	1,397,319	1,707,139	2,108,604	2,434,128	
North East	(50.1)	(62.5)	(79.4)	(80.6)	(82.8)	(89.1)	19,763	41,081	67,061	84,069	106,667	121,155	
North West	(56.0)	(68.6)	(79.3)	(84.7)	(86.6)	(88.2)	70,273	126,975	185,418	247,737	309,497	352,991	
Yorkshire and the Humber	(62.5)	(72.1)	(83.3)	(85.4)	(87.2)	(90.2)	56,292	96,269	133,785	171,425	216,574	245,304	
East Midlands	(64.5)	(77.6)	(89.1)	(90.4)	(89.8)	(92.8)	39,651	69,165	113,400	141,069	166,726	198,517	
West Midlands	(64.7)	(73.9)	(85.7)	(86.5)	(87.1)	(88.8)	77,472	110,307	160,036	192,281	223,862	254,885	
East Of England	(67.7)	(77.8)	(84.0)	(86.3)	(90.1)	(91.9)	64,911	109,598	148,529	178,713	213,269	251,643	
London	(59.8)	(70.9)	(78.6)	(82.1)	(85.6)	(89.4)	89,429	172,669	254,338	291,285	342,874	392,781	
South East Coast	(65.4)	(75.1)	(85.0)	(89.0)	(92.2)	(93.7)	43,409	75,888	111,597	139,464	180,180	208,427	
South Central	(69.2)	(78.3)	(86.8)	(88.1)	(89.1)	(91.8)	40,459	65,075	96,589	116,273	148,404	171,682	
South West	(66.2)	(77.1)	(83.6)	(87.4)	(89.9)	(93.1)	57,656	84,331	126,566	144,823	200,551	236,743	

Average MURs per pharmacy

	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12
England	89	126	161	186	219	239
North East	75	123	155	186	222	229
North West	81	118	146	177	210	227
Yorkshire and the Humber	87	126	149	180	218	231
East Midlands	78	110	154	184	213	239
West Midlands	108	131	163	190	214	229
East Of England	97	141	171	195	219	245
London	85	138	182	198	221	241
South East Coast	84	128	163	192	234	264
South Central	89	123	161	188	231	254
South West	94	115	157	169	222	248

⁽¹⁾ See on-line Appendix for PCT level data

⁽²⁾ Includes pharmacies who provided MUR services who were not in contract as at 31 March

Table 13: Community pharmacy and appliance contractors in contract with PCTs at 31 March, number and percentage providing Appliance Use Reviews by SHA⁽¹⁾, England 2010-11⁽²⁾ to 2011-12

numbers and (percentage) Percentage of community pharmacy and appliance contractors Number of community Community pharmacy and appliance contractors providing AUR pharmacy and appliance services providing AUR services contractors Home Total Home Premises Total **Premises** 2010-11 2011-12 2010-11 2011-12 2010-11 2011-12 2010-11 2011-12 2010-11 2011-12 2010-11 2011-12 2010-11 2011-12 **England** 11,356 58 59 11,051 54 46 100 117 (0.5)(0.5)(0.4)(0.5)(0.9)(1.0)North East 590 600 6 2 4 6 10 (0.7)(1.0)(0.3)(0.7)(1.0)(1.7)North West 1,717 1,781 8 11 9 10 17 21 (0.5)(0.6)(0.5)(0.6)(1.0)(1.2)Yorkshire and the Humber 2 1.146 1.189 6 5 8 8 13 (0.5)(0.4)(0.2)(0.7)(0.7)(1.1)East Midlands 888 914 5 6 2 7 11 (0.6)(0.7)(0.2)(0.5)(0.8)(1.2)5 West Midlands 3 5 2 7 1,210 1,265 8 (0.2)(0.4)(0.4)(0.2)(0.7)(0.6)East Of England 1.095 1.135 6 6 2 10 8 (0.5)(0.5)(0.4)(0.2)(0.9)(0.7)12 (0.3)(0.7)(0.7)London 1.818 1.837 6 5 (0.3)(0.4)(0.4)13 South East Coast 844 854 3 3 5 4 8 (0.4)(0.4)(0.1)(0.6)(0.5)(0.9)South Central 728 742 5 7 10 11 (0.7)(0.5)(0.7)(0.9)(1.4)(1.5)4 5 South West 1.039 1.015 11 17 16 (0.8)(0.5)(0.9)(1.1)(1.7)(1.5)

			Average Al	Average AURs per community pharmacy and appliance contract								
	Home		Premises		To	tal	Hom	e Pre		nises	То	tal
England	2010-11 11,930	2011-12 13,951	2010-11 3,283	2011-12 4,314	2010-11 15,213	2011-12 18,265	2010-11 221	2011-12 241	2010-11 71	2011-12 73	2010-11 152	2011-12 156
North East	348	751	13	20	361	771	87	125	7	5	60	77
North West	246	367	80	131	326	498	31	33	9	13	19	24
Yorkshire and the Humber	279	122	46	115	325	237	47	24	23	14	41	18
East Midlands	526	236	45	66	571	302	105	39	23	13	82	27
West Midlands	511	417	55	4	566	421	170	83	11	2	71	60
East Of England	2,182	1,453	182	19	2,364	1,472	364	242	46	10	236	184
London	436	1,199	317	108	753	1,307	73	171	45	22	58	109
South East Coast	2,830	3,676	71	234	2,901	3,910	943	1,225	71	47	725	489
South Central	4,459	5,472	2,259	3,376	6,718	8,848	892	1,368	452	482	672	804
South West	113	258	215	241	328	499	14	52	24	22	19	31

⁽¹⁾ See on-line Appendix for PCT level data

Source: NHS Prescription Services of NHS Business Services Authority

40

^{(2) 2010-11} figures have been revised from previously published

Table 14: Community pharmacy and appliance contractors in contract with PCTs at 31 March, number and percentage providing Stoma Appliance Customisation by SHA⁽¹⁾, England 2010-11⁽²⁾ to 2011-12

numbers and (percentage)

	Number of community pharmacy and appliance contractors		Community pharmacy and appliance contractors providing SAC		Percentage of community pharmacy and appliance contractors providing SAC		Total \$	SAC	Average SAC per community pharmacy and appliance contract	
	2010-11	2011-12	2010-11	2011-12	2010-11	2011-12	2010-11	2011-12	2010-11	2011-12
England	11,051	11,356	1,722	1,786	(15.6)	(15.7)	1,027,684	1,082,501	597	606
North East	590	600	81	86	(13.7)	(14.3)	45,849	48,650	566	566
North West	1,717	1,781	317	313	(18.5)	(17.6)	133,002	143,981	420	460
Yorkshire and the Humber	1,146	1,189	256	305	(22.3)	(25.7)	33,663	41,202	131	135
East Midlands	888	914	124	126	(14.0)	(13.8)	143,374	143,996	1,156	1,143
West Midlands	1,210	1,265	218	222	(18.0)	(17.5)	75,021	74,243	344	334
East Of England	1,095	1,135	136	135	(12.4)	(11.9)	294,457	327,157	2,165	2,423
London	1,818	1,837	77	81	(4.2)	(4.4)	56,692	59,824	736	739
South East Coast	844	854	130	124	(15.4)	(14.5)	101,197	98,317	778	793
South Central	728	742	169	171	(23.2)	(23.0)	104,477	106,354	618	622
South West	1,015	1,039	214	223	(21.1)	(21.5)	39,952	38,777	187	174

⁽¹⁾ See on-line Appendix for PCT level data

^{(2) 2010-11} figures have been revised from previously published

Table 15: Community pharmacies in contract with PCTs at 31 March, number and percentage commissioned to provide local enhanced services (1,2) in England 2005-06 to 2011-12

number and (percentage) 2006-07 2007-08 2008-09 2005-06 2009-10 2010-11 2011-12 Total services provided 29,526 16,920 (100.0)20,996 (100.0)23,551 (100.0)26,970 (100.0)(100.0)30,962 (100.0)29,283 (100.0)**Anticoagulant Monitoring** 21 (0.1)67 (0.3)54 (0.2)69 (0.3)88 (0.3)103 (0.3)120 (0.4)Care Home 1.248 (7.4)1.115 (5.3)1.057 (4.5)851 (3.2)802 (2.7)647 (2.1)596 (2.0)Disease Specific Medicines Management 118 (0.7)286 (1.4)211 (0.9)294 (1.1)338 252 (0.8)260 (0.9)(1.1)Gluten Free Food Supply 281 (1.7)391 (1.9)387 (1.6)349 (1.3)481 (1.6)474 (1.5)337 (1.2)Home Delivery 1,088 (6.4)1,175 (5.6)619 (2.6)802 (3.0)(2.7)960 (3.1)(2.1)810 614 Language Access 220 (1.3)176 (0.8)263 (1.1)495 (1.8)564 (1.9)492 (1.6)145 (0.5)Medication Review 1,997 2,332 2,357 (8.0)(8.9)747 (4.4)(9.5)2.147 (9.1)(8.6)2,383 (7.7)2,612 Meds Assessment & Compliance Support 755 (4.5)329 341 515 (1.9)691 (2.2)482 (1.6)(1.6)(1.4)552 (1.9)Minor Ailment Scheme (12.2)(12.0)3,686 2.067 2.416 (11.5)2.705 (11.5)3,238 3,841 (13.0)(11.9)3,537 (12.1)Needle and Syringe Exchange 1,061 (6.3)1,537 2,283 2,289 (7.3)1,692 (7.2)1,969 (7.3)2,048 (6.9)(7.4)(7.8)On Demand Availability of Specialist Drugs 418 (2.5)722 (3.4)979 (4.2)958 (3.6)924 (3.1)1,102 (3.6)925 (3.2)Out of Hours 1,432 (8.5)1,238 (5.9)1,130 (4.8)1,089 (4.0)893 (3.0)1,032 (3.3)1,182 (4.0)2,623 3,483 Patient Group Direction 2,147 (12.7)2,308 (11.0)(11.1)3,179 (11.8)3,085 (10.4)3,552 (11.5)(11.9)Prescriber Support (0.3)(0.3)(0.6)(0.5)(0.3)(0.0)55 70 138 144 84 13 56 (0.2)Schools 3 (0.0)7 (0.0)24 (0.1)0 (0.0)0 (0.0)0 (0.0)(0.0)Screening 154 (0.9)114 (0.5)388 (1.6)1,011 (3.7)1,808 (6.1)1,737 (5.6)1,417 (4.8)Stop Smoking 2.522 (14.9)3.641 (17.3)4.593 (19.5)4.833 (17.9)5.612 (19.0)6.104 (19.7)5.620 (19.2)Supervised Administration 2,563 (15.1)(15.7)4.146 4.706 5,215 5.385 (17.4)5.601 (19.1)3.306 (17.6)(17.4)(17.7)Supplementary Prescribing 20 (0.1)101 (0.5)54 (0.2)124 (0.5)1 (0.0)58 (0.2)1 (0.0)Independent Prescribing (3) 12 (0.0)(0.1)8 (0.0)6 (0.0)23

⁽¹⁾ An individual pharmacy contractor may offer more than one locally enhanced service. The figures provided list the total services commissioned by PCTs with pharmacies within their PCT area.

⁽²⁾See on-line Appendix for PCT level data

⁽³⁾ Independent Prescribing was not separately identified until the 2008-09 dataset.

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