



Impact report:

Think Pharmacy First: Improving community pharmacy services in Birmingham and Solihull

February 2025



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I have used the prescribing chemist on two separate occasions and have been very impressed with the service they provide. On both occasions I was referred by my GP. The system worked very well and I was contacted by the pharmacy to book appointments, which were made quickly. The pharmacist was very thorough in their examination and explained that if their course of treatment did not work they would refer me back to my GP. (Birmingham resident)

I was very frustrated when my GP referred me to the pharmacy [name redacted], but the service I received from the pharmacist there was very good. I was able to book an appointment. They were very thorough and were able to provide me with treatment. (Solihull resident)

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Executive summary

Birmingham and Solihull Integrated Care Board (NHS BSOL) has improved access to community pharmacies for clinical or health related advice/treatment. This has increased the speed at which people are seen for minor illnesses (e.g. colds) and reduced demand on GPs, enabling them to see more people with complex conditions.

Following Healthwatch Birmingham and Healthwatch Solihull's 2024 report [Access and barriers to NHS Community Pharmacies in Birmingham](#) NHS BSOL has made changes so that people:

- Have increased awareness of the range of services pharmacies offer.
- Have better access to pharmacy services and are seen quickly for minor illnesses.
- Have a positive experience by ensuring that pharmacy services comply with statutory requirements around availability and quality of consultation room.
- Can access pharmacy services in a way that meets their needs by introducing interpreting services.





Improvements made since our original report

- By targeting the 6% of pharmacies not yet signed up to Pharmacy First at the time of our original report, there are now 293 (96%) BSOL pharmacies registered for Pharmacy First, up from 94% in January 2024.
- Increased engagement and communication around Pharmacy First as well as improvements to the conditions and incentives for GP referrals has led to an increase in Pharmacy First consultations. Between 1st April and end of November 2024 107,157 Pharmacy First consultations were completed across the Birmingham and Solihull Integrated Care System (BSOL ICS). This is inclusive of all pathways. 32%* were through referrals from general practice (*unverified and therefore subject to change during NHSBSA verification and payment process).
- Ensuring that staff are in place with roles dedicated to leading community pharmacy integration is increasing pharmacy uptake and sign-up. Four Community Pharmacy Primary Care Network (PCN) Engagement Leads started in early November 2024 and another three will start in January 2025. These roles support the implementation and integration of community pharmacy clinical pathways as part of NHS BSOL's Primary Care Access Recovery Plan, in particular Pharmacy First. They work closely with targeted practices and PCNs providing training and tailored support to drive uptake of Pharmacy First, alongside helping pharmacies develop and implement a collaborative approach to working with their PCN to utilise community pharmacy clinical pathways. NHS BSOL has received positive practice feedback on the impact of their interventions.
 - The PCN Engagement Leads have been provided with resource packs to support staff training along with different sized posters for onward sharing with the practices and pharmacies they visit to raise awareness of the service with patients. Pharmacy First resource packs and posters have also been distributed to practice leads through our BSOL locality meetings.

- Two local lead pharmacists featured in the NHS BSOL videos [birminghamsolihull.icb.nhs.uk/application/files/8517/3442/9535/Pharmacy_video_001_3.mp4](https://www.birminghamsolihull.icb.nhs.uk/application/files/8517/3442/9535/Pharmacy_video_001_3.mp4) and one was part of the Unity FM interview panel.
- By sending out reminders to all pharmacies across Birmingham and Solihull about access to translation to services is ensuring accessibility for members of the public with language barriers. All BSOL pharmacies have access to translation services and a reminder went out through the Office of the West Midlands (OWM) last year to all pharmacies.
- Creation of community pharmacy page on the NHS BSOL website, mirrored by all partner websites to ensure consistency of message. The pages went live December 2024 [Community pharmacy :: NHS Birmingham and Solihull](#).
- Increased engagement and communication.
 - Leaflets about Pharmacy First produced by NHS BSOL have been distributed by Healthwatch Birmingham and Healthwatch Solihull's engagement team.
 - Unity FM radio ads, in English and Urdu which ran for one month in December.
 - Unity FM pre-recorded show featuring a pharmacist which was part of a winter pressures and signposting discussion.
 - Leaflets in Emergency Departments directing people towards Pharmacies and Urgent Treatment Centres (UTCs) if more appropriate in future.
 - Design of Pharmacy First assets, one for all and the other specifically for parents.
 - Sharing the above assets with parents via schools and local education authorities.
 - Pharmacy First posters in NHS Trusts and local pharmacies.
 - Organic and paid-for social media posts promoting Pharmacy First via NHS BSOL and University Hospitals Birmingham NHS Foundation Trust (UHB) channels.
 - Two Pharmacy First videos, fronted by two pharmacists, that have been shared on our own (NHS BSOL) channels and system partner channels.
 - Bauer media ads reminding people to visit pharmacies for minor illnesses – ran from 27 Dec for two weeks.



Brief background to our original report

The 2024 Healthwatch Birmingham and Healthwatch Solihull reports [Access and barriers to NHS Community Pharmacies in Birmingham](#) and [Access and barriers to NHS Community Pharmacies in Solihull](#) found that usage of community pharmacies in Birmingham is high, with 84% of respondents having used a pharmacy in the last three months. People also expressed high levels of satisfaction with the pharmacy services they access, with 79% rating them as good or very good, and 83% saying services met their needs.

Sixty-seven percent had used a local pharmacy for clinical or health related advice or treatment. The most common reasons given by the people who use a community pharmacy for clinical or health related advice or treatment were:

- Quicker than making a GP appointment (58%).
- Previously received good advice from a pharmacist (57%).
- Pharmacists have relevant knowledge (56%).
- Ease of access (52%).

The most common reasons given for not using a community pharmacy for clinical or health related advice or treatment were:

- Preference for a GP appointment (42%).
- Lack of private spaces or consultation rooms to discuss issues with a pharmacist (35%).
- View that pharmacists do not have the right medical expertise (30%).
- Not being able to access free prescriptions (27%).

However, respondents had low awareness of the range of services NHS community pharmacies provide, for example healthy eating (25%) and referral (16%) to other health services. Only 17% were aware that a pharmacist can prescribe some medications independent of a doctor. Awareness was high for pharmacies' dispensing function (72%), flu vaccinations (74%) and advice for minor health problems (76%).

Some respondents preferred to see the GP over pharmacists or other healthcare professionals, especially those with a long-term condition (84%). Community pharmacists' are seen to have expertise in dispensing medication rather than clinical issues, highlighting the need for better awareness of pharmacists' skills. In addition, people prefer a referral to pharmacies for minor issues to be made by a GP rather than a receptionist at the practice, highlighting the important role GPs play in building confidence in community pharmacy.

Ease of access, convenience, pharmacists' expertise and professionalism, facilities and privacy are the key facilitators enabling people to access community pharmacists. Low awareness of pharmacy services, limited facilities (lack of consultation rooms and access to medical records), privacy and confidentiality, pharmacists' knowledge and expertise are the main barriers to using community pharmacies.

Healthwatch Birmingham and Healthwatch Solihull identified three key areas for improvement

- **Awareness:** The lack of information and awareness of clinical/healthcare services delivered by NHS community pharmacies shows more could be done to promote their role in delivering healthcare, particularly in raising awareness of pharmacy services (e.g. Pharmacy First) and public understanding of pharmacists' knowledge and skills.
- **Facilities:** Support for pharmacies to ensure consultation rooms are available will reassure service users of privacy, anonymity and confidentiality. Pharmacies should have access to IT systems to view and add to medical records, ensuring continuity of care alongside patient confidence in the treatment and advice provided.
- **Reputation of pharmacists compared to GPs:** To achieve better integration of NHS community pharmacies into primary care, it is crucial to improve confidence in pharmacists through the referral process and by improving people's experiences of services.

Progress and outcomes

NHS BSOL provided Healthwatch Birmingham and Healthwatch Solihull with an action plan to tackle the issues identified. Planned improvements included:

- Working with GPs, pharmacists, and NHS England colleagues to plan a broader public awareness campaign ahead of winter to support our wider strategic work proactively planning ahead to prevent and tackle the pressures that winter brings.
- Targeting the 6% of pharmacies not yet signed up to Pharmacy First, and working more broadly to ensure pharmacies comply with relevant statutory requirements around availability and quality of consultation rooms to ensure positive patient experience.
- In May 2023, we also introduced access to interpreting services in community pharmacies to ensure accessibility for members of the public with language barriers. Do a follow up on this with pharmacies.
- Ensure that we have staff with roles dedicated to leading community pharmacy integration who are playing a pivotal part in driving Pharmacy First as it evolves; ensuring the right conditions and incentives are in place for its uptake to continue through GP referrals and pharmacy sign-up.

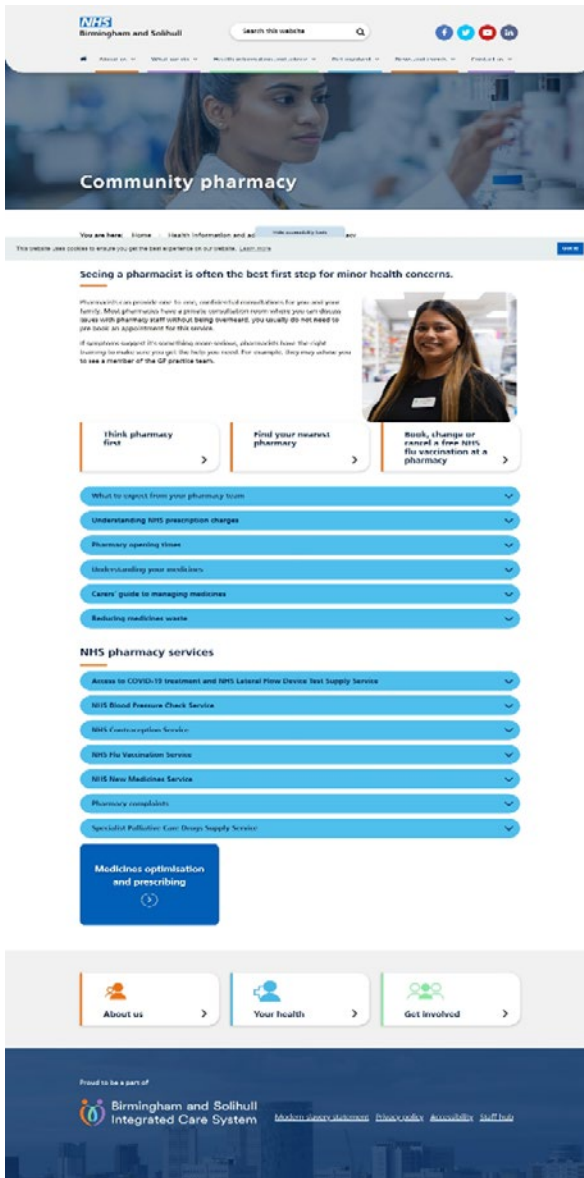
As part of wider system working on winter comms plan 2024/2025, Healthwatch Birmingham and Healthwatch Solihull worked alongside system partners to implement actions that were committed in response to our reports findings. The 'Birmingham and Solihull ICS Winter Comms plan 2024/2025' highlighted the importance of our findings in informing this activity.

In early 2024, data for a Birmingham and Solihull Healthwatch report into the use of Pharmacies locally was collected. Over 9,000 responses were received with a number of findings. One of the overarching messages from that is that there is a general confusion about what pharmacies provide and how community pharmacies work. The findings conclude that the public in Birmingham and Solihull had most confidence to attend community pharmacy if the referral came from their GP. The report recommends that in order to improve confidence in community pharmacists, GPs should increase the number of referrals they make with more explanations of the Pharmacist's role.



Changes made by the ICB are outlined below

- By targeting the 6% of pharmacies not yet signed up to Pharmacy First at the time of our original report, there are now 293 (96%) BSOL pharmacies registered for Pharmacy First, up from 94% in January 2024.
- Increased engagement and communication around Pharmacy First as well as improvements to the conditions and incentives for GP referrals has led to an increase in Pharmacy First consultations. Between 1st April and end of November 2024 107,157 Pharmacy First consultations were completed across the Birmingham and Solihull Integrated Care System (BSOL ICS). This is inclusive of all pathways. 32%* were through referrals from general practice (*unverified and therefore subject to change during NHSBSA verification and payment process).
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 - The PCN Engagement Leads have been provided with resource packs to support staff training along with different sized posters for onward sharing with the practices and pharmacies they visit to raise awareness of the service with patients. Pharmacy First resource packs and posters have also been distributed to practice leads through our BSOL locality meetings.



- Two local lead pharmacists featured in the NHS BSOL videos [birminghamsolihull.icb.nhs.uk/application/files/8517/3442/9535/Pharmacy_video_001_3.mp4](https://www.birminghamsolihull.icb.nhs.uk/application/files/8517/3442/9535/Pharmacy_video_001_3.mp4) and one was part of the Unity FM interview panel.
- Sending out reminders to all pharmacies across Birmingham and Sandwell about access to translation to services is ensuring accessibility for members of the public with language barriers. All BSOL pharmacies have access to translation services and a reminder went out through the Office of the West Midlands (OWM) last year to all pharmacies.
- Creation of a Community Pharmacy webpage on the NHS BSOL website, ensuring all partner websites mirror that of the ICB (for consistency of message). The website went live December 2024 [Community pharmacy :: NHS Birmingham and Solihull](https://www.birminghamsolihull.icb.nhs.uk/application/files/8517/3442/9535/Pharmacy_video_001_3.mp4). Healthwatch Birmingham and Healthwatch Solihull's communication team has been involved in developing engagement and communication plans ensuring that the findings of our original report inform these.

- Increased engagement and communication.
 - Leaflets produced by the ICB on pharmacy first which have been distributed and utilised for information and signposting by Healthwatch Birmingham and Healthwatch Solihull's engagement team at engagement events across the two areas.
 - Unity FM radio ads, in English and Punjabi which ran for one month in December.
 - Unity FM pre-recorded show featuring a Pharmacist which was part of a winter pressures and signposting discussion.

- Paper handouts in Emergency Departments directing people to Pharmacies (and UTCs) – for any future visits.
- Design of Pharmacy First assets, one for all and the other specifically for parents.
- Sharing of the above assets with schools (for parents) via the local education authorities.
- Physical distribution of Pharmacy First posters to NHS Trusts and local Pharmacies.
- Organic and paid-for social media posts promoting Pharmacy First via ICB and UHB channels.
- Creation of two Pharmacy First videos, fronted by two Pharmacists, that have been shared on our own channels (NHS BSOL) and system partner channels (birminghamsolihull.icb.nhs.uk/application/files/8517/3442/9535/Pharmacy_video_001_3.mp4; [Think pharmacy first :: NHS Birmingham and Solihull](#)).
- Bauer media ads focused on signposting with a reminder to visit Pharmacies for minor illnesses – ran from 27 Dec for two weeks.



Next steps

Healthwatch Birmingham and Healthwatch Solihull welcome the details of the change made and the continued work being done to ensure that Pharmacy First resources from NHS England are translated as needed. We have had some positive feedback from those that have accessed pharmacies and people seem to be more confident in their local pharmacies for minor illnesses.

6 *GP sent a referral to the pharmacy, I went in and was seen in a private room by the manager straightaway. Was diagnosed and given antibiotics and no having to wait for a call back from the GP. The service was excellent* (Birmingham resident).

I have used them for repeat prescriptions as well as urgent medical advice and treatment. Both of these services have been very good (Solihull resident).

To ensure positive progress Healthwatch Birmingham and Healthwatch Solihull will continue to liaise with the ICB. This will include continued discussion on the development of a whole system Primary Care Strategy which includes the important role of community pharmacy in meeting the needs of local people. We will continue listening to the experiences of people seeking or using pharmacies across the two areas. All experiences shared with us will be shared with the ICB to inform continued improvement to pharmacies and pharmacy first.

Healthwatch Birmingham and Healthwatch Solihull would like to thank all staff, members of the public who shared their experiences and their carers/families for their participation and involvement in this investigation. You can share your experiences by:

Birmingham residents can share their experiences by:

- Visiting the Healthwatch Birmingham [Online Feedback Centre](#)
- Calling Healthwatch Birmingham on 0800 652 5278
- Emailing: info@healthwatchbirmingham.co.uk

Solihull residents can share experiences by:

- Visiting the Healthwatch Solihull online [Feedback Centre](#)
- Calling Healthwatch Solihull on 0808 196 3912
- Emailing: enquiries@healthwatchsolihull.org.uk

About us

Local Healthwatch were established in every local authority area across England following the Health and Social Care Act 2012. Our key role is to ensure those who commission, design and deliver health and social care services hear, and take into account, the public voice. Healthwatch Birmingham and Healthwatch Solihull listen to and gathers public and patient experiences of using local health and social care services such as general practices, pharmacists, hospitals, dentists, opticians, care homes and community-based care. We hear these experiences via our Information and Signposting Line, our online Feedback Centre, and through our community engagement activity led by staff and volunteers.

Read more about the work of [Healthwatch Birmingham](#) and [Healthwatch Solihull](#).

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healthwatch

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