



West Sussex Pharmaceutical Needs Assessment 2022

Appendix I

Consultation Report

APPENDIX I Consultation Report

1.1 Consultation Background

The consultation of the draft PNA was carried out in accordance with NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. These regulations stipulate who the Health and Well Being Board are required to consult with:

- Healthwatch and health groups across the West Sussex Health and Wellbeing Board (HWB) area.
- NHS Trusts and Foundation Trusts.
- Local Pharmaceutical Committee.
- Local Medical Committee.
- All pharmaceutical providers in the HWB area.
- NHS England.
- Neighbouring Health and Wellbeing Boards (that is Brighton and Hove, East Sussex, Hampshire, and Surrey).

As in previous years, it is acknowledged, given the nature and purpose of the PNA as a document, that primary respondents to the consultation are likely to be professionals; however, members of the public were encouraged, and welcomed, to participate and provide their views.

1.2 How the Consultation Was Undertaken

The consultation ran for 70 days, from Monday 20 June until Sunday 28 August 2022.

The draft PNA documents, a full report, and a summary, were published on the West Sussex County Council website and the local West Sussex Wellbeing website. A paper copy of the full document was available on request.

To promote the consultation, the PNA project team worked with the West Sussex County Council (WSCC) Communications team. Promotion included a press release, promotion via social media, posters placed in public spaces, such as libraries, promotion internally to staff employed by the council and via communications teams in other organisations (such as Districts and Borough councils and the NHS).

Professionals, organisations, and groups were notified directly by email, a list of those contacted is provided at the end of this report.

Note: The consultation took place at a time of change within the NHS.

From 1 July 2022, Clinical Commissioning Groups (CCGs) closed, and the functions of the CCGs transferred to the new Integrated Care Boards (locally NHS Sussex). This has now been reflected in the final PNA.

NHS Improvement and NHS England merged to form the new NHS England in July 2022, so references to NHSE&I have been changed to NHSE in the final report.

1.2.1 Consultation Questionnaire

The consultation asked the following six questions:

- 1 *Has the purpose and background of the PNA been clearly explained?*
- 2 *Have the localities and boundaries used been clearly defined throughout the draft PNA?*
- 3 *Does the PNA reflect the current NHS pharmaceutical service provision within West Sussex?*
- 4 *Are there any unidentified gaps in service provision, i.e., when, where and which services are available?*
- 5 *Does the draft PNA reflect the pharmaceutical needs of the West Sussex population?*
- 6 *Do you have any further comments about the content of the draft PNA?*

1.3 Who Responded?

There were 130 responses to the consultation. Of these 116 were from service users /members of the public, 8 from professionals and 6 on behalf of organisations.

Where people were not responding on behalf of others/organisations, respondents were asked to state their age, sex, ethnic background and whether they had a disability:

- 4% of respondents were aged under 25 years, 34% aged between 25 to 64 years and 58% aged 65 years or over.
- 60% of respondents were women.
- 87% were from a White British ethnic background.
- 41% of respondents stated that their day-to-day activities were limited because of a health problem or disability.

There were multiple responses in relation to specific places. As in the 2018 draft PNA consultation there were many respondents from Arundel. Multiple comments were also received about Henfield and the east of Chichester, including Tangmere and new developments around Shopwhyke. Some respondents (as individuals) noted they reflected a wider campaign in their area.

Some of the comments made have been included in this report to set out the range of views, and depth of feelings, expressed. The PNA Steering Group have reviewed and considered all feedback to the consultation. This report details the steering group response.

1.4 Key Findings

1.4.1 Question 1 - Has the Purpose and Background of the PNA been clearly defined?

The majority of respondents said that that the purpose and background were clearly defined.

Table 1 Has the Purpose and Background Been Clearly Defined

Response	Number	Percentage
Yes	102	78.5%
No	5	3.8%
Not sure	19	14.6%
Not answered	4	3.1%
Total	130	100%

Those who responded “no” to this question were asked to give details. The responses mostly related to people finding it difficult to understand the PNA: *Not fully understood; Can't find the document on this or any other site; too many pages to read.*

1.4.1.1 PNA Steering Group Response

The PNA is a technical document used by NHSE for market entry decisions. Its contents are set out in the NHS Pharmaceutical and Local Pharmaceutical Services Regulations 2013. Whilst effort has been made to use plain language and simplify the PNA, some members of the public might not fully understand it and/or find it too long. An executive summary was also published to provide an overview of the full report.

Throughout the consultation period, the draft PNA was available on the county council website and on the Your Voice Consultation hub. Other sites where it was linked are the Joint Strategic Needs Assessment (JSNA) and West Sussex wellbeing hubs and Healthwatch websites. Contact details were provided if someone wanted a paper copy of the report posted to them.

1.4.2 Question 2 - Have the localities and boundaries use been clearly defined throughout the draft PNA?

The majority of respondents said that localities were clearly defined.

Table 2 Have the localities and boundaries use been clearly defined

Response	Number	Percentage
Yes	95	73.1%
No	4	3.1%
Not sure	28	21.5%
Not answered	3	2.3%
Total	130	100%

In terms of comments on this question, one person said that this aspect was difficult to understand, another said it was incomprehensible.

1.4.2.1 PNA Steering Group Response

The PNA is a technical document used by NHSE for market entry decisions. Its contents are set out in the NHS Pharmaceutical and Local Pharmaceutical Services Regulations 2013. Whilst effort has been made to use plain language and simplify the PNA, some members of the public might not fully understand it or find it too long. An executive summary was also published to provide an overview of the full report.

1.4.3 Question 3 - Does the PNA reflect the current NHS pharmaceutical service provision within West Sussex?

Note: As a number of comments made by respondents are repeated against different questions, the Steering Group response to questions 3 to 6 is provided at the end of the report.

The responses to this question were fairly evenly split between yes and not sure/not answered. 15% of respondents said that the PNA did not reflect the provision in West Sussex

Table 3 Does the PNA reflect the current NHS pharmaceutical service provision

Response	Number	Percentage
Yes	57	43.8%
No	20	15.4%
Not sure	51	39.2%
Not answered	2	1.5%
Total	130	100

If respondents answered no to this question, they were asked to provide further comment. Some example comments have been provided below.

1.4.3.1 Question 3 - Relating to Arundel

The PNA states they can't see any gaps, but if you ask any resident in Arundel the pharmacy is not providing a viable service at all due to staff issues and supply issues and this is not just as a refill of the pandemic.

It has got to the point where opening hours have been significantly reduced, patients are queuing for at least an hour to be attended to and the queues extend outside the premises into the car park where there is no seating or shade.

1.4.3.2 Question 3 - Relating to the Chichester area (including Tangmere)

The current NHS Pharmaceutical Services currently provided in the Chichester area are not meeting the needs of our communities. The population has grown dramatically and will continue to grow with all the developments around especially in the Chichester - Tangmere area.

I am a resident in Chichester Shopwhyke Lake which is a newly built and it is growing fast a lot of houses are being built. The population is increasingly as I understand Tangmere will join with Shopwhyke and they are many construction companies building.

1.4.3.3 Question 3 - Relating to Henfield

Henfield in particular.... population growing, too many new houses. Staff do the best they can, but we need an alternative chemist. medical centre not allowed for some ridiculous reason not allowed to dispense unless you live outside the village.

1.4.3.4 Question 3 - Other comments

The current local pharmacies are overwhelmed and closed regularly with limited medicines available.

There is no reference to on-line access and as this is restricted by our doctor prescribing system it causes stress, car journeys and sometimes delays.

There are still some gaps in out-of-hours community pharmacy service provision.

...Long waiting times and chaotic management are typical.....Pharmacy provision is not adequate if the customer experience is poor.

1.4.4 Question 4 - Are there any unidentified gaps in service provision, i.e., when, where and which services are available?

39% of consultation responses said that there were gaps not identified in the PNA.

Table 4 Gaps Not Identified in the draft PNA

Response	Number	Percentage
Yes	51	39.2%
No	36	27.7%
Not sure	41	31.5%
Not answered	2	1.5%
Total	130	100.0%

If respondents answered yes to this question, they were asked to provide further comment. The responses provided mostly related to staff shortages; long waiting times; access issues by public transport for rural areas; new homes resulting in population increase; quality of services; pharmacy opening times; issues with medicine stock, and comments about Arundel, Henfield and Chichester.

1.4.4.1 Question 4 – Relating to Arundel

Arundel needs 2 pharmacies as the number of visitors can't be expected to walk from town to the nearest pharmacy to receive help.

We need a chemist in Arundel town centre, not three quarters of a mile away up a steep hill.

...I know the guideline set out is that in rural areas, a pharmacy within 6 miles and 20 minutes travel time is considered acceptable, but frankly that guideline is impractical in this day and age and doesn't work, especially in Arundel. Hence because of this you found no gaps when it came to access to a pharmacy.

1.4.4.2 Question 4 - Relating to Chichester, including Tangmere

Our amazing GPs are overwhelmingly busy, and Pharmacists offer amazing advice and support when you can't get hold of your doctor. But one needs an actual pharmacy for this, hence why we need another pharmacy in the Chichester to cater for the people in the Tangmere, Oving and Shopwyke Lakes area in Chichester.

Not enough pharmacies in Chichester area comparing to the growing population.

1.4.4.3 Question 4 - Relating to Henfield

Henfield access is shocking, having a pharmacy does not mean you have access.

The pharmacy facility in Henfield is understaffed and has too many patients to deal with in an efficient way.

1.4.4.4 Question 4 – Relating to other (named) areas

Selsey ...We have a new housing estate being built - even without concerns over the one medical centre being able to cope, the two pharmacies are unable to cope now, let alone with additional households using their services.

Storrington.... There are huge queues in each and prescriptions are rarely ready when you get to the front. I have given up and use [REDACTED NAME OF ONLINE PHARMACY].

1.4.4.5 Question 4 - Other comments, including on staff shortages, customer service and the role of pharmacies

Our pharmacy is too small and cannot cope with local demand. We cannot use medical centre dispensary as live too near!

The PNA does not address the increasing supply difficulties experienced by pharmacies for numerous medications.

I have trouble getting medication for Rheumatoid Arthritis regularly have been given prescription back on several occasions....so can go from chemist to chemist to find availability of drug.

...The advanced services need to be increased to enable patients to be helped...Pharmacies could take some pressure off A&E by increasing advance services.

Understaffed pharmacy, have to use online services as I not prepared to stand outside the pharmacy for 30 mins plus

Not much emphasis seems to have been given to the difficulty of those working full time accessing pharmacy services outside of 8am-6pm working times

No privacy when want to raise important issues and a reluctance to use the consulting room which can be used as a general storeroom.

Out-of hours provision is seemingly suboptimal.

1.4.5 Question 5 - Does the draft PNA reflect the pharmaceutical needs of the West Sussex population?

A third of consultation respondents said that they did not think the PNA reflected pharmaceutical needs of residents.

Table 5 Does the PNA reflect the pharmaceutical needs of residents?

Response	Number	Percentage
Yes	38	29.2%
No	43	33.1%
Not sure	47	36.2%
Not answered	2	1.5%
Total	130	100.0%

If respondents answered no to this question, they were asked to provide further comment. Most comments received related to the PNA survey methods; housing development and population increase, staff shortages; long queues at pharmacies/quality of services, transport issues; electronic systems and comments relating to Arundel, Henfield and Chichester specifically.

1.4.5.1 Question 5 - Relating to Arundel

The PNA should make provision for a larger, more efficient, and permanently staffed pharmacy in the historic town centre. Visitors cannot believe it when they are told that there is no pharmacy in the town centre and that they have to find their way to the existing poor facility, which involves pedestrians having to negotiate the busy A27 trunk road, Arundel having no proper by-pass. As a result, they go elsewhere. A town centre pharmacy would considerably strengthen the range of facilities the town has to offer and would encourage visitors from the surroundings villages to come shopping in Arundel, as the town centre pharmacies (there used to be two) did in the past, thereby contributing to the local economy.

1.4.5.2 Question 5 – Relating to other (named) areas

There are big gaps in pharmacy units in greater Littlehampton, especially with over 3,000 new houses in the area.

The draft PNA does not reflect our needs here as residents of Chichester as it does not take into account all the housing projections in the Chichester area.

1.4.5.3 Question 5 - Comments relating to PNA methods

Poor survey in terms of numbers and distributions, Telephone surveys with predefined untested questions are significantly limited in assessing quality of service.

...What would have been a good idea would be to send a questionnaire out to all West Sussex population to get a true reflection.

1.4.5.4 Question 5 - Other comments

We have seen our population grow in recent years with the same limited public sector resources especially with healthcare.

Increased housing development and lack of pharmaceutical and medical staff is a great concern.

Please do some customer visits to a selection of pharmacies to ask for advice and pick up a prescription and use a chart to mark the service you receive.

Transport issues from rural areas.

1.4.6 Question 6 - Any further comments about the content of the draft PNA.

1.4.6.1 Further comments relating to Arundel

Pharmacy provision in Arundel is very poor! Staff are stretched to the limit. A pharmacy in a more central location is essential.

Please include provision for a town centre pharmacy in Arundel in the PNA. Like most town centres, the economy of the town has been affected by out of town and internet shopping and by the Covid pandemic. Your decision to approve a new, efficient town centre pharmacy would be a great encouragement to those working to salvage the economic fortunes of our ancient town.

1.4.6.2 Further comments relating to Henfield

Another chemist in Henfield ASAP

Please provide Henfield with an accessible pharmacy

1.4.6.3 Further comments relating to other (named areas)

We don't need a pharmacy at Shopwyke Lakes. There is one in the Sainsbury's supermarket a short distance away and another at Tangmere Medical Centre.

1.4.6.4 Further comments relating to drafting the PNA

I do not think that by telephoning a relatively small sample of people in the very large area that West Sussex covers, you are not getting a true and accurate picture of how things actually are in specific areas. If for example you telephoned every resident in Arundel, and other areas too, you would get a very different result from that being illustrated in the PNA via phone calls.

Telephone surveys are a good way of getting a steer as to what is going on. This should be backed by a customer experience test over a wide variety of outlets as a mystery shopper. That is when you get close to reality.

There is not much evidence of joined up strategic thinking across Sussex.

Whilst the draft PNA does identify the difficulty of people living in rural areas, it doesn't suggest any way of helping people who find it difficult to access a pharmacy for repeat prescriptions. The scarcity of public transport really wasn't stressed as a barrier to people accessing the medication they have been prescribed.

While the report indicates an increase in pressure on community pharmacies, it does not acknowledge or propose any potential solutions.

1.4.6.5 Further comments relating to staffing shortages, problems with medicine supply and quality of service

The staffing issues at pharmacies must surely be a concern . . . Surely that should be more of a concern. I also wonder about the people who don't have good enough transport to get to a pharmacy easily. Online services are great for people who usually use a computer - but what about people who are far away and don't use computers?

Be very careful putting more and more work on pharmacy workers. We are at breaking point at the moment and the be kind message has gone out of the window. The abuse we face on a daily basis is horrendous and pharmacist, technicians and assistants are leaving in their droves.

If you are going to look at pharmaceutical services, you need to look at quality as well as quantity. Pharmacists are being passed a lot more workload which has been historically undertaken by GPs. This decreases their availability to provide personal dispensing services.

Action needs to be taken to review the impact of ePrescribing on the time taken to fulfil medications.

The level of activity in the Discharge Medicines Service in West Sussex hospitals could be closely monitored as this is an area of substantial clinical risk.

It would be easier if all pharmacy used blister packs.

1.4.6.6 Further comments on the role, and change role of community pharmacies

The report correctly reflects pharmacies as we have been accustomed to using them, but we are now in a different world and the report does not appear to see that.

I think it's fair to say some people are beginning to use a pharmacy the way they used to use a GP in the past and there needs to be an understanding of the implications of this for patients' records, workforce, confidentiality, and public access.

1.4.6.7 Other comments

We need independent local community pharmacies that are reliable unlike the big chain pharmacies that are constantly closed.

My concern is the overall rate of house building within the county generating new communities and whether the pharmaceutical needs are going to be able to keep pace with this exponential growth.

Our local Pharmacy...is essential for my and my wife's needs with filling prescriptions and we frequently ask their advice rather than take up GP time... If we lose them, we will be stumped.

I think there is a gap.....the elderly (myself included) have not the ability to use on- line assessments...some may not even own a computer or I-pad ...I- phone

1.5 PNA Steering Group Responses

1.5.1 Response to comments relating to the need for more community pharmacies.

Many residents stated that, in their opinion, there was a need for more community pharmacies, notably in relation to Arundel town centre, Henfield and the east of Chichester, (Tangmere and relating to new developments on the edge of the city).

Part of the task of a PNA is to assess whether there is, currently, reasonable access to pharmaceutical provision. To do this we have used existing guidelines and benchmarks used to inform market entry decisions.

To assess reasonable access, as in 2018, this PNA used the Department of Health (Pharmacy in England: Building on Strengths – Delivering the Future (2008)) and rulings from the NHS Litigation Authority (now called NHS Resolution) when defining a reasonable travel criterion of 20 minutes (travel time) and 6 miles (travel distance) by car or public transport.

The PNA steering group also considered population data, new housing developments within the lifetime of the PNA, the travel distance, travel radius of other pharmacies within a 6-mile radius or 20-minute travel distance, the availability of dispensing doctors, and proportion of pharmacies and, where appropriate dispensing doctors, per 100,000 population, and compared these with national and regional figures.

Having taken this data into account, the steering group is satisfied that, with the existing guidelines and benchmarks, there is no gap in pharmaceutical service provision and the current pharmaceutical contractors provide sufficient choice and access for residents.

In addition, all pharmacies are now required to facilitate, to a reasonable extent, remote access to the pharmaceutical services they provide, where people wish to access them remotely.

Some pharmacies also provide delivery services. Whilst the steering group noted that a delivery service is a private service by the pharmacies and not part of the NHS pharmaceutical services as per regulations, where they are provided, they improve access to services for residents.

Also, all residents have the choice of using any of the distance selling pharmacies in England, all of which are required to provide essential services remotely to anyone anywhere in England who may request them.

In relation to dispensing GPs, specifically raised in relation to services in Henfield and Tangmere, regulations state that patients living more than 1 mile from a pharmacy can access the dispensing doctor. This is a statutory regulation, and it is outside of the PNA scope to change.

Action: The PNA was drafted in line with statutory guidance, using benchmark and guidelines currently used to inform market entry decisions. No change is proposed to the overall PNA conclusions. All consultation feedback has been shared with steering group members including NHS England (NHSE), Local Pharmaceutical Committee (LPC), Local Medical Committee (LMC), NHS Sussex and Healthwatch representatives.

1.5.2 Response to comments relating to service quality

Community pharmacies are contracted under the Community Pharmacy Contractual Framework (CPCF), which sets out the services to be provided and also quality assurance of the services. NHSE has the responsibility for monitoring the provision of Essential and Advanced services and quality assurance. Quality assurance is outside the scope of the PNA.

Action: All consultation feedback relation to the quality of services has been shared with NHSE and LPC representatives in the steering group.

In relation to comments on opening hours, the PNA has included a recommendation that information published relating to opening hours, locally (individual pharmacy websites) and shown on the NHS website, should be reviewed, and ensured that it is line with contracted hours. Outside of the NHS website or websites managed by pharmacies themselves, it is recognised that it is not always easy to control, or amend, information elsewhere on the internet.

In relation to out of hours provision, the PNA includes details of out of hours provision. At weekends 91% of pharmacies are open on Saturdays, 21% for some hours on a Sunday. While all localities have at least one pharmacy open on a Sunday these tend to be in larger towns. Given that GP surgeries currently close over the weekend, it is not expected that prescriptions are written on Sundays, other than by out of hours GPs who hold a supply of emergency medicines. Having taken this, as well as travel distances into consideration, the PNA did not find any gaps in service provision. It is noted that any extension of GP opening hours means it will be important to review out of hours provision. NHSE monitor the availability of services to ensure an adequate service provision and put in place a safety net service where gaps are identified.

1.5.3 Comment made on the Discharge Medicines Service

The PNA highlights that the Discharge Medicines Service is an essential service and therefore considered as part of the PNA considerations. NHSE has the responsibility to monitor provision of essential services as the service commissioners. Pharmacies do not have influence, or control, of the volume of referrals from hospitals.

Action: This feedback has been shared with the NHSE and NHS Sussex representatives on the steering group.

1.5.4 Response to comments made relating to staff shortages and medicine supply problems

The Steering Group acknowledge the considerable concerns relating to staff shortages and medicine supply issues. These issues are not confined to West Sussex. The group note that these

issues are widespread across the country, as highlighted by PSNC national survey with contractors and pharmacy staff.

The survey found that:

- 98% of respondents said that workforce shortages are resulting in increased pressure on pharmacy teams.
- Two-thirds of pharmacies have had to cut back on services or the advice they offer to patients, and 29% have had to reduce their opening hours
- 83% of pharmacies reported a significant increase in medicine supply issues in the past year, leading to extra work and additional stress for staff. Two-thirds of respondents said that medicines supply chain issues are a daily occurrence, with 97% reporting that this led to frustration from patients.

Supply issues are outside of the scope of the PNA and are typically outside of the control of the community pharmacy. There are calls for collaborative working across the sector, NHS, and government to resolve this. Further details about the survey can be found on the Pharmaceutical Services Negotiating Committee (PSNC) website (<https://psnc.org.uk/our-news/pharmacy-pressures-survey-confirms-impact-on-teams-businesses-and-patients/>).

Action: Under current regulation and guidance PNAs consider the number and location of pharmacies not staffing capacity. Problems relating to staffing capacity, and, to a lesser extent, medicine supply have been raised in the telephone survey and during consultation. Information from the PSNC 2022 Pressures Survey has been added to the PNA and an additional recommendation noting concerns has been included.

1.5.5 Response re Comments made on PNA methodology, notably use of a telephone survey and data on population change and housing development

To gain views from the wider public a telephone survey was undertaken in March and April 2022. A total of 2,108 telephone interviews were held based on a sampling frame agreed by the West Sussex PNA Steering Group. The sampling frame was agreed based on location, age, sex and working status. In addition, surveys were conducted with care homes and contractors, and findings were included in the PNA. Using a sampling frame is a reasonable, pragmatic and widely used approach given the limited resources, as opposed to surveying every resident.

The cost of surveying all households in West Sussex is prohibitive.

The questions used were carefully selected to ensure relevant information was captured and related to the guidance for and scope of the PNA.

Data relating to population change and housing development was the most up to date information available at the time of drafting the PNA. Data on planning schemes, scale, and timescale, were obtained from WSCC Planning.

Action: The steering group has recommended retaining a sampling frame approach for the next PNA, which, should guidelines be similar, would enable comparison over time. Additional

engagement methods, including focus groups and/or the use of resident panels, should also be considered.

Organisations Notified of the PNA Consultation

The following organisations we emailed directly and notified of the PNA consultation. *Note: The consultation took place at a time of change within the NHS. From 1 July 2022, Clinical Commissioning Groups (CCGs) closed, and the functions of the CCGs transferred to Integrated Care Boards (locally NHS Sussex - a new NHS organisation)*

Contractors on the Pharmaceutical list and dispensing doctors list in West Sussex

Local Pharmaceutical Committee

Local Medical Committee

CCGs (at the time the consultation started, CCG were still in place)

- West Sussex CCG
- NHS Hampshire, Southampton, and Isle of Wight Clinical Commissioning Group
- NHS Surrey Heartlands Clinical Commissioning Group

Sussex Health and Care ICS leads

NHS England and NHS Improvement

NHS Trusts

- University Hospitals Sussex NHS Foundation Trust
- Surrey & Sussex Healthcare NHS Trust
- Sussex Community NHS Trust
- Queen Victoria Hospital NHS Foundation Trust
- Sussex Partnership NHS Foundation Trust

Healthwatch West Sussex

Neighbouring HWBs

- Surrey
- East Sussex
- Brighton & Hove
- Hampshire

Patient/consumer/community group which in the opinion of the HWB has an interest in pharmaceutical services

- West Sussex CCG patient engagement groups (via CCG communications)
- Carers Support
- Age UK West Sussex
- Mid Sussex Older People's Council
- Horsham District Older People's Forum
- Marie Curie
- Alzheimer's Society
- MIND West Sussex
- Sage House Dementia Support
- Citizens Advice
- 4Sight
- Switchboard (LGBTQ+)

- Rivers SPACE (Crawley)
- Action in Rural Sussex
- Crawley Ethnic Minority Partnership (CEMP)
- Impact initiatives
- Alliance for Better Care GP Federation
- Friends, Families & Travellers
- STAG (Sussex Travellers Action Group)
- Youth Emotional Service (YES)
- Young Carers in West Sussex
- Allsorts youth organisation

Hospices

- St Wilfrid's Hospice
- Chestnut treehouse
- St Catherine's
- St Barnabas

Care homes in West Sussex

West Sussex GP practices

West Sussex Wellbeing Hubs

- Adur and Worthing wellbeing hub
- Arun wellbeing hub
- Chichester wellbeing hub
- Crawley wellbeing hub
- Horsham wellbeing hub
- Mid Sussex wellbeing hub

West Sussex residents and public

West Sussex County Council engagement epanel newsletter

Posters in libraries, community pharmacies and dispensing doctor practices

Healthwatch website

West Sussex Wellbeing Hub website

In addition, emails were sent to leads in various organisations to share the consultation details with any other relevant groups