## **Kent Pharmaceutical Needs Assessment 2018 General Public Consultation responses**

Responses via online consultation		58
Responses via email		2
Responses via Post		3
Total number of responses		63
Q1 Please tell us which borough/district you live in	4	00/
Ashford Canterbury	4 5	6% 8%
Dartford	1	2%
Dover	10	16%
Gravesham	3	5%
Maidstone	7	11%
Sevenoaks	6	10%
Shepway	4	6%
Swale Thanet	7 4	11% 6%
Tonbridge and Malling	4	6%
Tunbridge Wells	8	13%
	63	100%
Q2. Postcodes		
Received but not published		
Q3. Do you have your medicines dispensed at a pharmacy?		
Yes	60	95%
No	3	5%
Not answered	0	0%
	63	100%
Q4. Do you have your medicines dispensed at a dispensing doctor's practice?		
Yes	4	6%
No	58	92%
Not answered	1	2%
	63	100%
Two responders said Yes to Question 3 and 4		
One responder said No to Questions 3 and 4		
Q5. If you use a pharmacy, how often do you use one?		
Once a week	3	5%
Once every couple of weeks	17	27%
Once a month	29 9	46% 14%
Once every couple of months Less often	9 4	14% 6%
Don't Know	0	0%
Not answered	1	2%
	63	

Q6. Do you have a regular pharmacy that you use?		
Yes No	61 2	97% 3%
Don't Know	0	0%
	63	100%
Q7. In terms of location, what is the main reason you use this pharmacy regularly	/?	
Near to home	32	51%
Near to my doctors	15 9	24% 14%
In town/Shopping area In the supermarket	1	2%
Near to my work	1	2%
Other Not answered	3 2	5% 3%
THO CANSWORLD	63	100%
Q8. If your regular pharmacy was not open, would you		
Wait for them to open	36	57%
Find another pharmacy Don't Know	23	37%
Not answered	2 2	3% 3%
	63	100%
Q9 . If your regular pharmacy didn't have the things you need, would you		
Wait for them to order the items	48	76%
Find another pharmacy	12	19%
Don't Know Not answered	1 2	2% 3%
	63	100%
Q10. How do you usually travel to your regular pharmacy?		
Walk	27	43%
Car (driver)	23	37%
Car (passenger) Bus	5 3	8% 5%
Bicycle	0	0%
Taxi	0	0%
Other* Not answered	3 2	5% 3%
	63	100%
Q11. Which of the following PNA consultations have you read?		
Countywide document		18
The document that covers the area in which you live All 7 area documents		48 4
None		6
Don't know		3

#### Q 12. Please tell us if you have any comments on the PNA documents

#### See comments sheet

### Q13. If you have any other comments specifically about any of the following, please provide them in the box below:

- accessing either a pharmacy or dispensing doctor's surgery to obtain your prescribed medicines
- the advice given by the pharmacy or dispensing doctor's surgery around the safe and effective use of these medicines
- any general health advice offered to help you keep yourself well

# Q14. We have completed an Equality Impact Assessment (EqIA) to see whether the Pharmaceutical Needs Assessment could affect anyone unfairly. We welcome your views on the assumptions we have made and the conclusions we have drawn. See comments sheet

Q15. Are you?  Male Semale I prefer not to say Not answered Semantial Se	49% 0% 1.59%
Q16. Is your Gender the same as your birth?  Yes  No I prefer not to say  Not answered  1  63	0% 2% 2%
Q17. Which of these age groups applies to you?         under 18       0         18-24       0         25-34       0         35-49       6         50-59       10         60 - 64       6         65-74       31         75-84       7         85+       2         Not answered       1         I prefer not to say       6	0% 0% 10% 16% 10% 49% 11% 3% 2% 0%
Q18. Do you regard yourself as belonging to a particular religion or holding a belief?  Yes  No  I prefer not to say  Not answered  10  10  10  10  10  10  10  10  10  1	38% 6% 2%

Q18a. Which of the following applies to you? Christian Buddhist Hindu Jewish Muslim Sikh Other* Not answered  * Pagan, Spiritualist, Atheist	29 0 1 0 0 0 3 30 63	46% 0% 2% 0% 0% 0% 5% 48%
Q19. Do you consider yourself to be disabled as set out in the Equality Act 2010? Yes No I prefer not to say Not answered	18 42 1 2 63	29% 67% 2% 3% 100%
Q19a. Please tell us which type of impairment applies to you. Physical Impairment Sensory Impairment (hearing, sight or both)  Long standing illness or health condition, such as cancer, HIV/AIDS, heart disease, diabetes  Mental Health condition Learning disability	11 6 13 1 0	17% 10% 21% 2% 0%
I prefer not to say Other* Not answered * neuroleptic condition	1 1 30 63	2% 2% 48% 100%
O20 Are year a Carar2		
Q20. Are you a Carer? Yes No I prefer not to say Not answered	14 48 1 0 63	22% 76% 2% 0% 100%

Q21. To which of these ethnic groups do you feel you belong?		
White: English	57	90%
White: Irish	0	0%
White Scottish	0	0%
White Welsh	1	2%
White Northern Irish	0	0%
White: Gypsy / Roma	0	0%
White: Irish Traveller	0	0%
White: Other*	3	5%
Mixed: White and Black Caribbean	0	0%
Mixed: White and Black African	0	0%
Mixed: White and Black Asian	0	0%
Mixed: Other**	0	0%
Mixed: Arab	0	0%
Asian or Asian British: Indian	1	2%
Asian or Asian British: Pakistani	0	0%
Asian or Asian British: Bangladeshi	0	0%
Asian or Asian British: Other*	0	0%
Asian or Asian British: Chinese	0	0%
Black or Black British: Caribbean	0	0%
Black or Black British: African	0	0%
Black or Black British: Other**	0	0%
I prefer not to say	0	0%
Other: not specified above	1	2%
Not answered	0	0%
	63	
* White British		
Q22. Are you?		
Heterosexual/Straight	57	90%
Bi/Bisexual	1	2%
Gay man	1	2%
Gay woman/lesbian	0	0%
Other*	3	5%
I prefer not to say	0	0%
Not answered	1	2%
	63	