



Pharmacy First

People's awareness of the
Pharmacy First service

January 2026

healthwatch
Northumberland

Background

Healthwatch Northumberland is your health and social care champion. We make sure NHS leaders and other decision makers hear your voice and use your feedback to improve care.

In the autumn of 2025, we asked for people's views of the Pharmacy First service in Northumberland, launched by the NHS on 31 January 2024, to gauge public awareness of the service and to see what the service's uptake has been like whilst it's been running.

This project took place from mid-September to mid-November 2025.

Response

126 people from all parts of the county responded to our survey. We heard from all adult age groups, but with more women than men replying (53% female/14% male/33% prefer not to say) and the 65–79-year-old age band being the most represented (29% of respondents). The vast majority of respondents were White British (94%) with only three respondents identifying as non-white. None of the respondents were pregnant or new mothers (defined as 'given birth within the last six months').

Findings

Overall, roughly two out of every three people who responded had heard of the Pharmacy First service. The three most common ways people had heard about the service were via information in a pharmacy, through their GP or by word of mouth. See Figures 1 and 2.

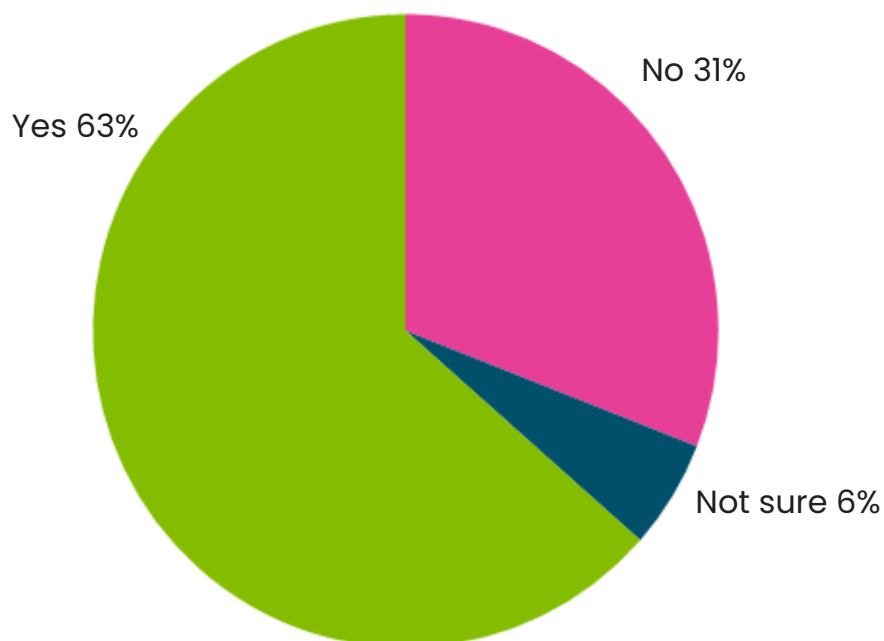


Figure 1: Overall, about two out of three respondents had heard of Pharmacy First. n=126

This was true in all age bands except for those who fell in the 80+ years old age band. Just over half of this age group had not heard of Pharmacy First (53% of respondents) whereas the 25–49 years age band were particularly well informed as 90% of respondents in this age group had heard of Pharmacy First.

In terms of awareness by sex, from the respondents that gave us this information just over half of all men (55%) had not heard of Pharmacy First whereas over two thirds of all women had heard of Pharmacy First (68%).

In terms of awareness across the county, all areas had more respondents who had heard of the Pharmacy First scheme except for North Northumberland where there was a majority who had not heard of the scheme (61% of respondents). See Figure 1a.

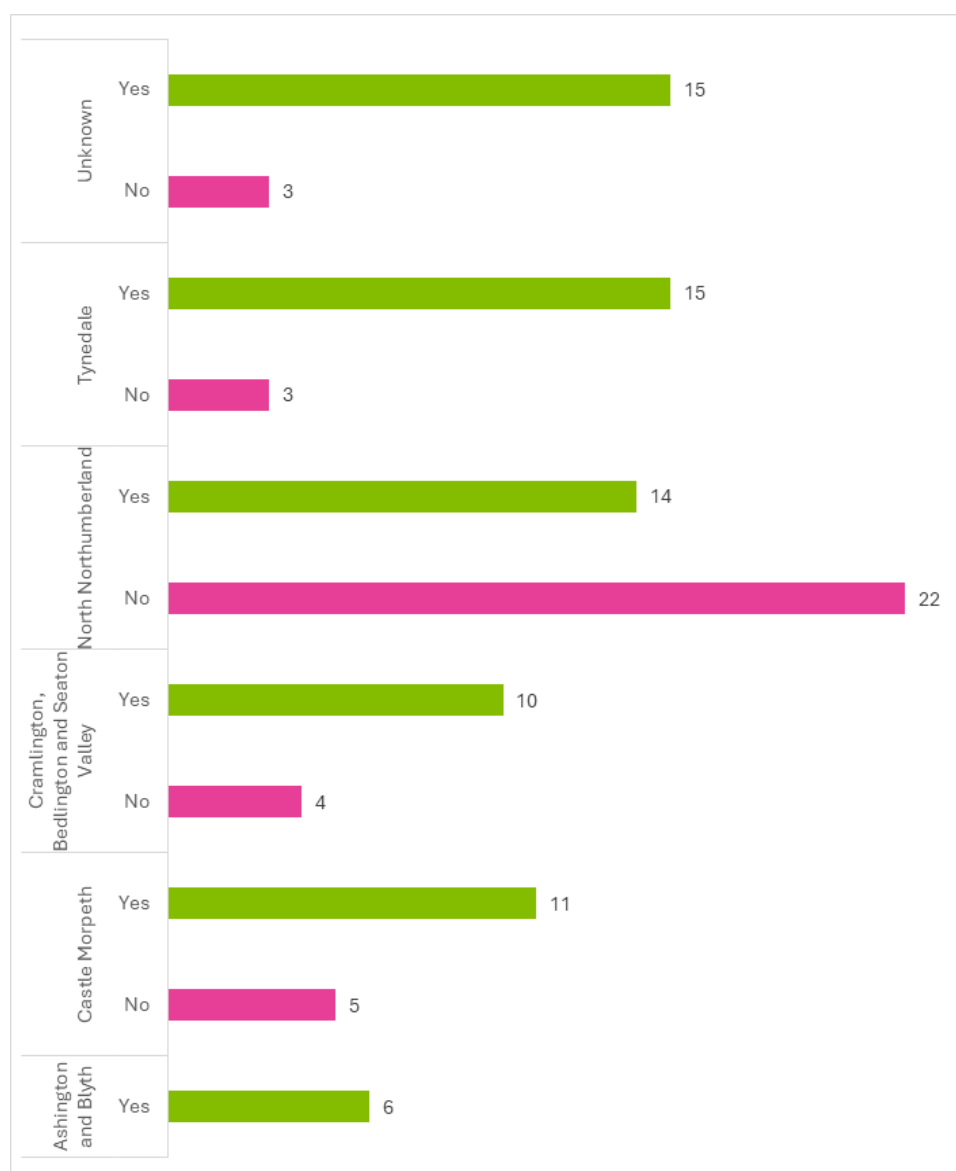


Figure 1a: About three out of five respondents from North Northumberland hadn't heard of the Pharmacy First scheme, unlike the rest of the county. n=115 (There were no 'No's' for the Ashington and Blyth area.)

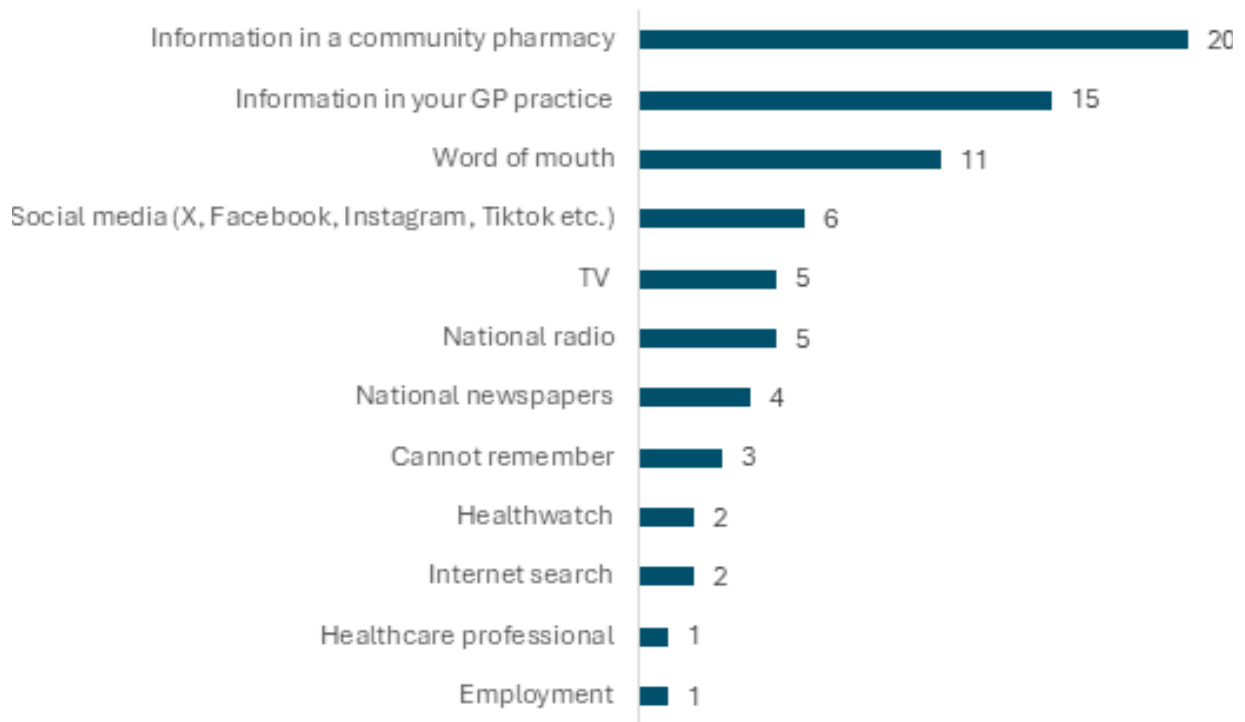


Figure 2: Information in a pharmacy, via GPs and word of mouth were the three most common ways respondents had heard about the scheme overall. n=75

We also asked whether those who had heard of Pharmacy First before had also used the service. Overall, more respondents had used the service than had not. See Figure 3.

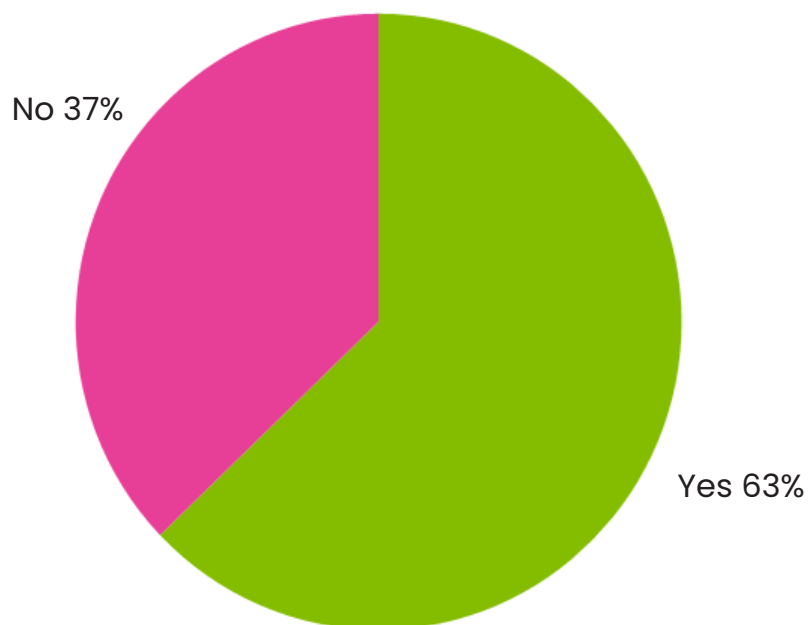
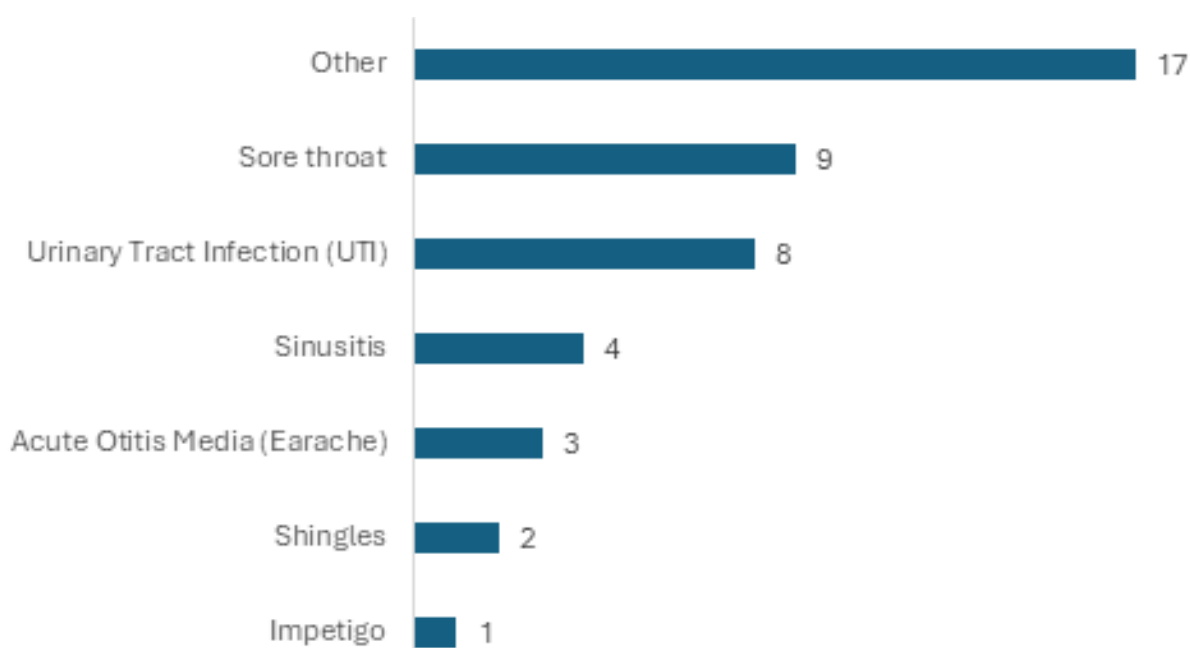


Figure 3: Have you used Pharmacy First? n=78

This was the same when it came to age, where roughly two out of three respondents had used Pharmacy First across all age groups. Also when we broke it down by sex, where again roughly two out of three respondents had used Pharmacy First across both sexes.

More people used the Pharmacy First service to get treatment for conditions other than one of the seven conditions that the service covers (see Appendix for a list of the seven conditions the Pharmacy First service covers.) Otherwise, sore throats and urinary tract infections were the most common reasons for seeking treatment. See Figure 4.



**Figure 4: For which condition/s did you use the Pharmacy First scheme?
n = 44**

Treatment for infected insect bites was the only one of the seven Pharmacy First conditions that wasn't given as a reason for using the service. This could be due to the time of year that we carried out the survey.

The message to use your pharmacy first appears to be working as, overall, over two thirds of those who answered this question said they did not try to make an appointment with their GP first (Fig. 5).

This was roughly the same across all age bands, except 25–49 year-olds where over 80% of respondents did not try to make an appointment with their GP first.

Male respondents were more likely to go straight to their pharmacy (80%) rather than make an appointment with their GP as opposed to female respondents, of whom only 69% were likely to go straight to their pharmacy first.

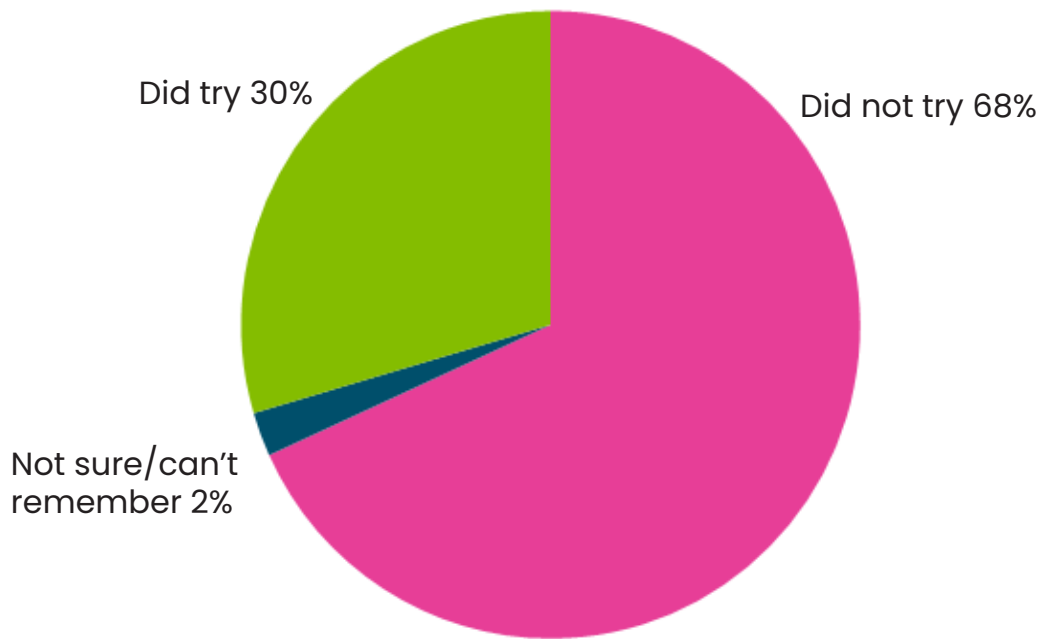


Figure 5: Overall, the majority of respondents did not try to make an appointment with their GP first. n=44

The reasons why they didn't try to make an appointment with their GP first were varied but the most common reasons were that people already had a relationship with their pharmacist, or they had seen information about the Pharmacy First service. See Figure 6.

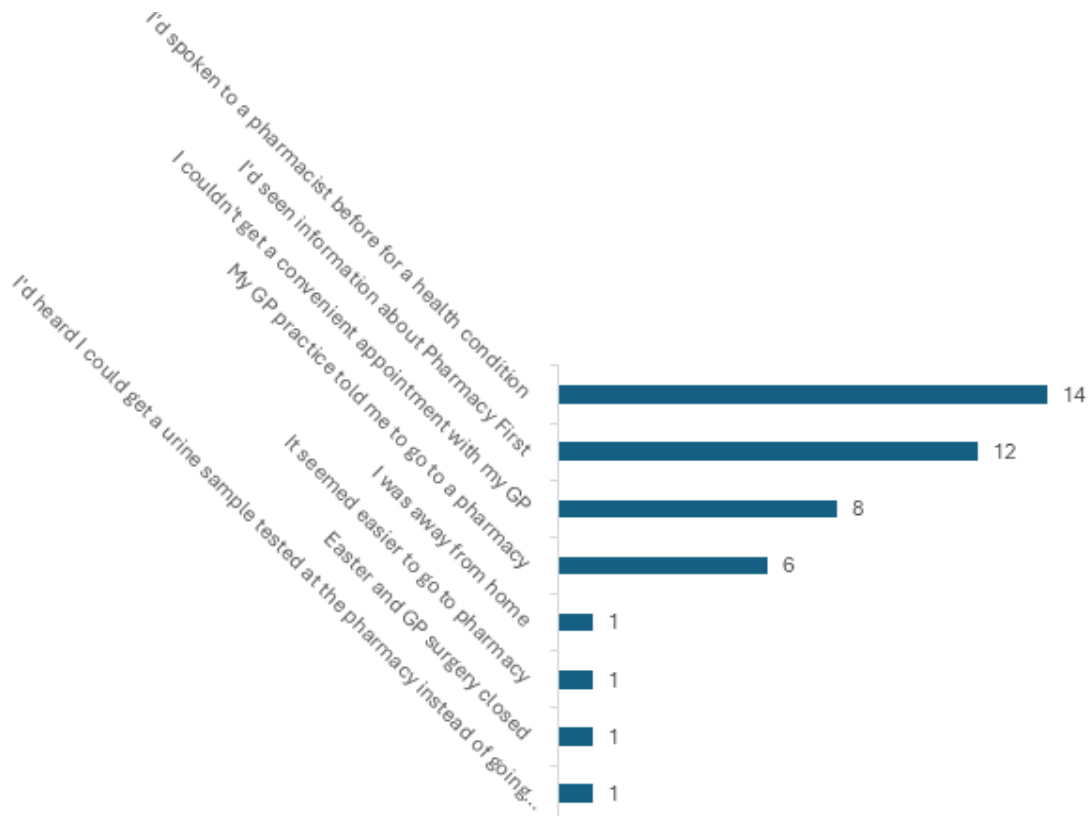


Figure 6. Reasons why people chose Pharmacy First. n=44

None of the respondents mentioned speed of service as a reason for choosing the Pharmacy First service, despite over half of respondents reporting that they did not have to wait longer than five minutes and almost all were seen inside a quarter of an hour. See Figure 7.

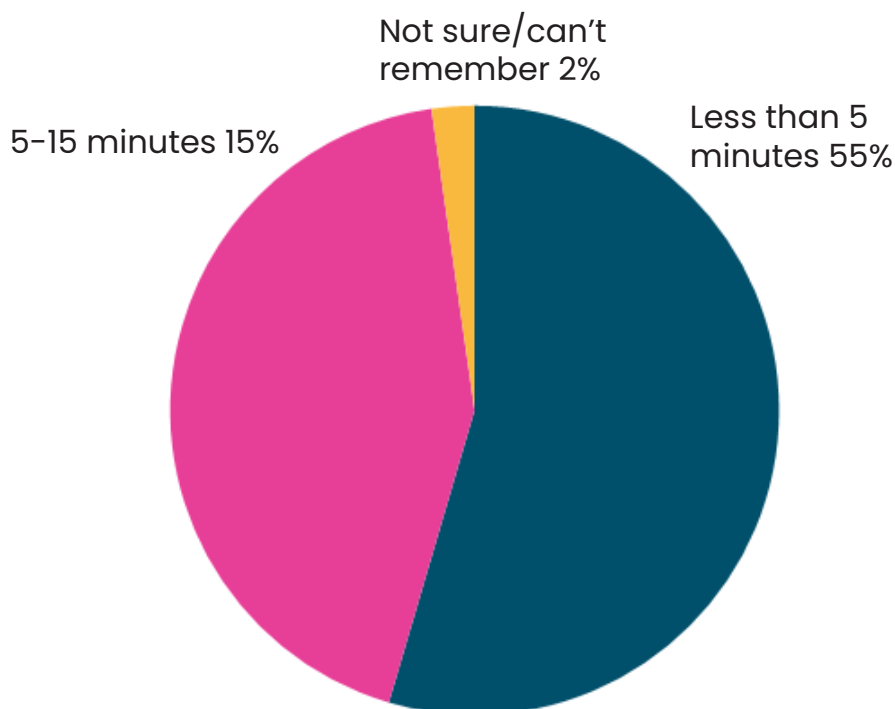


Figure 7. Almost all respondents were seen within a quarter of an hour. n=44

Most of the respondents said they were seen in a confidential area, but almost a fifth said they were not. See Figure 8.

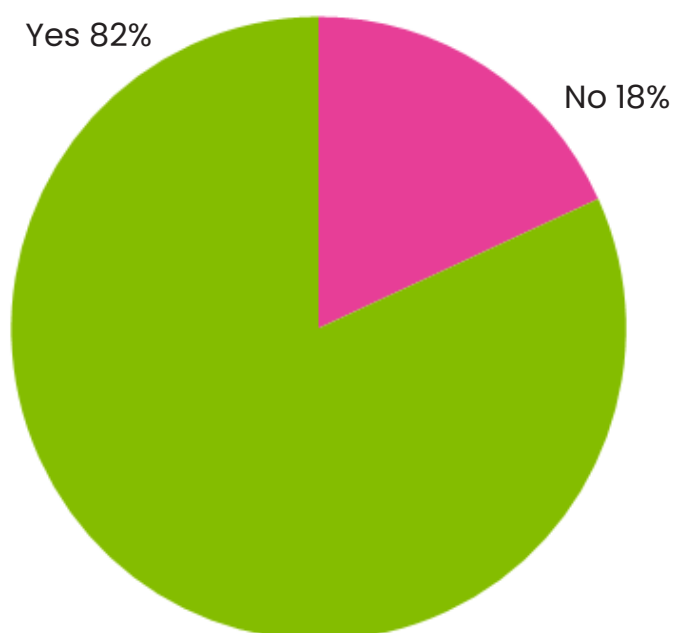


Figure 8: The majority of respondents were seen in a confidential area. n=44

Most people who responded felt happy about the level of support they got from the pharmacy, in terms of diagnosis and treatment (Fig. 9) and that their needs were met (Fig. 10).

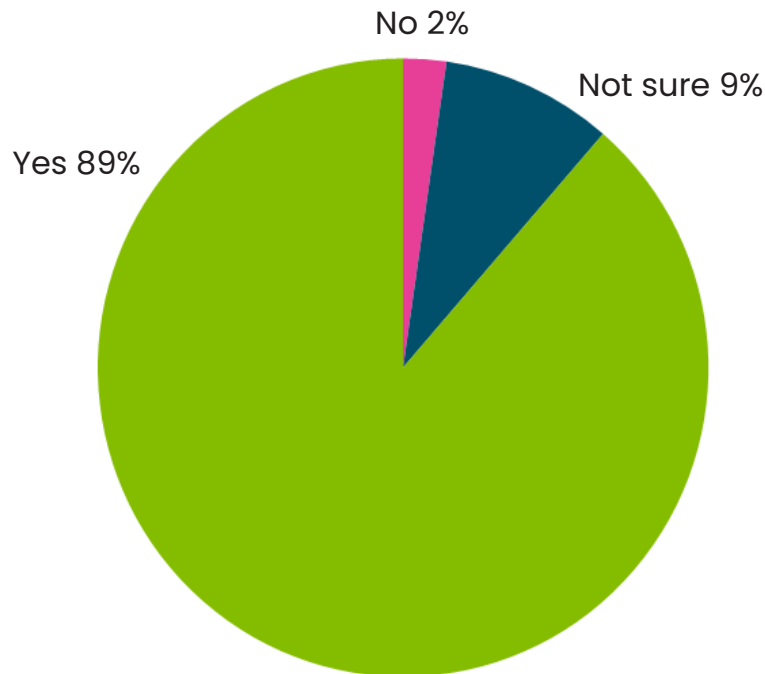


Figure 9: The majority of respondents felt confident about the diagnosis and treatment suggested by the pharmacist. n=44

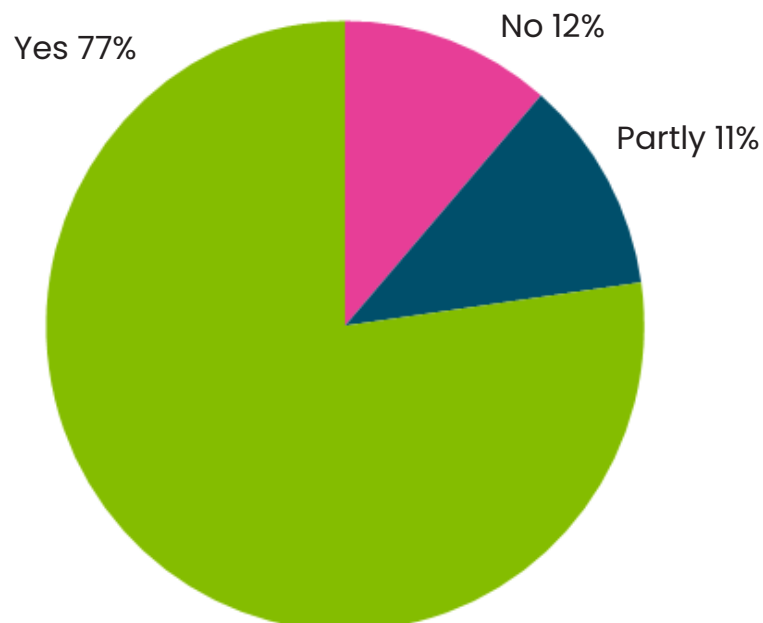


Figure 10: The majority of respondents felt the consultation met their needs. n=44

This is reflected in the answers to the question “Did the pharmacist ask you to go to your GP or other NHS service because they couldn’t help you?”. Only a quarter of respondents said they were asked to attend a GP or other NHS service, with the GP being the most common service that respondents said they were asked to attend. See Figure 11.

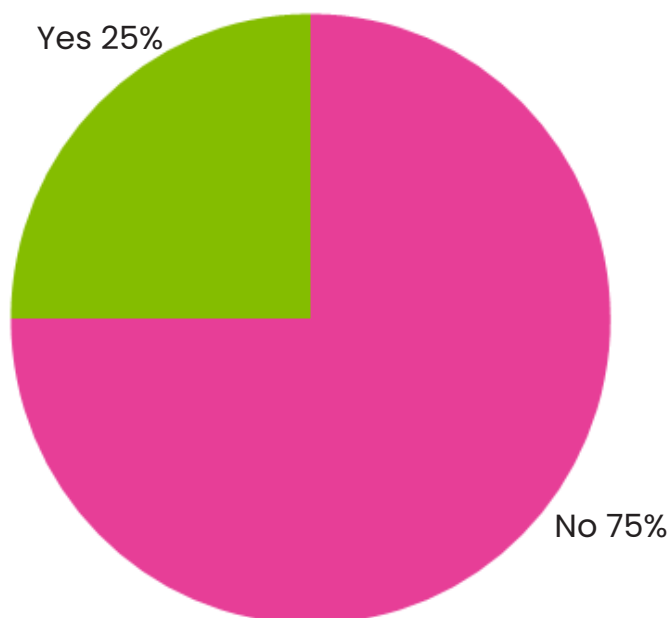


Figure 11: One in four respondents were asked to attend their GP or another NHS service because their pharmacist wasn't able to help them. n=44

Consequently, it is no surprise that most respondents were very likely to recommend the Pharmacy First service to a friend. See Figure 12.

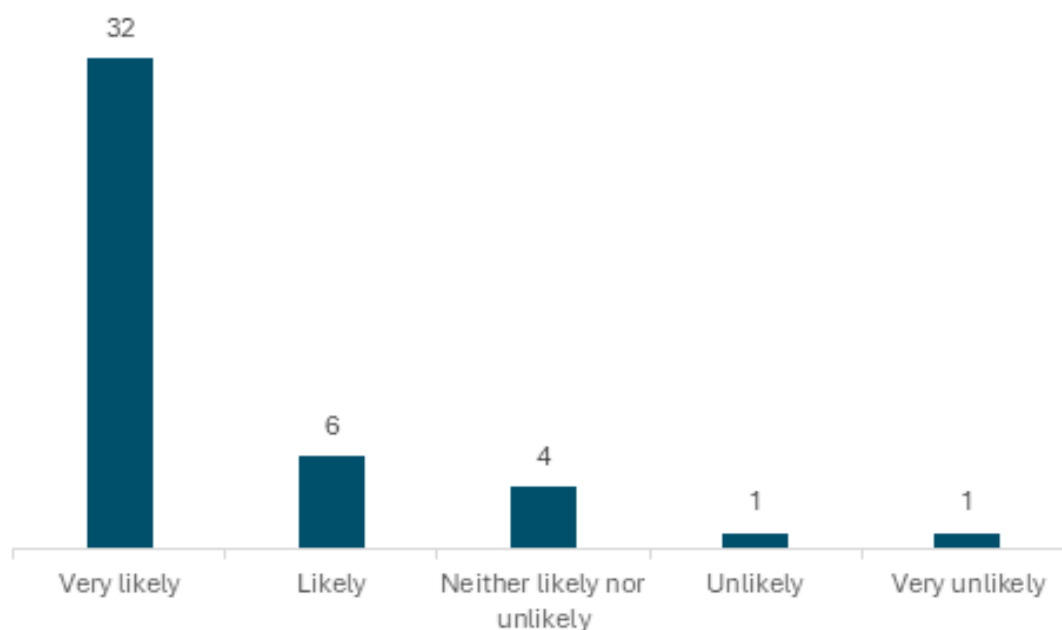


Figure 12: The majority of respondents were 'Very likely' to recommend Pharmacy First to a friend. n=44

Future use of Pharmacy First

We asked whether the people would be happy to see a pharmacist for the seven common conditions covered by the service. There was a very positive response to this question, as shown in Figure 13, although opinions did vary depending on the condition. Shingles and uncomplicated urinary tract infections were the least popular conditions to seek advice on, whereas infected insect bites and a sore throat were the most common conditions for seeking advice.

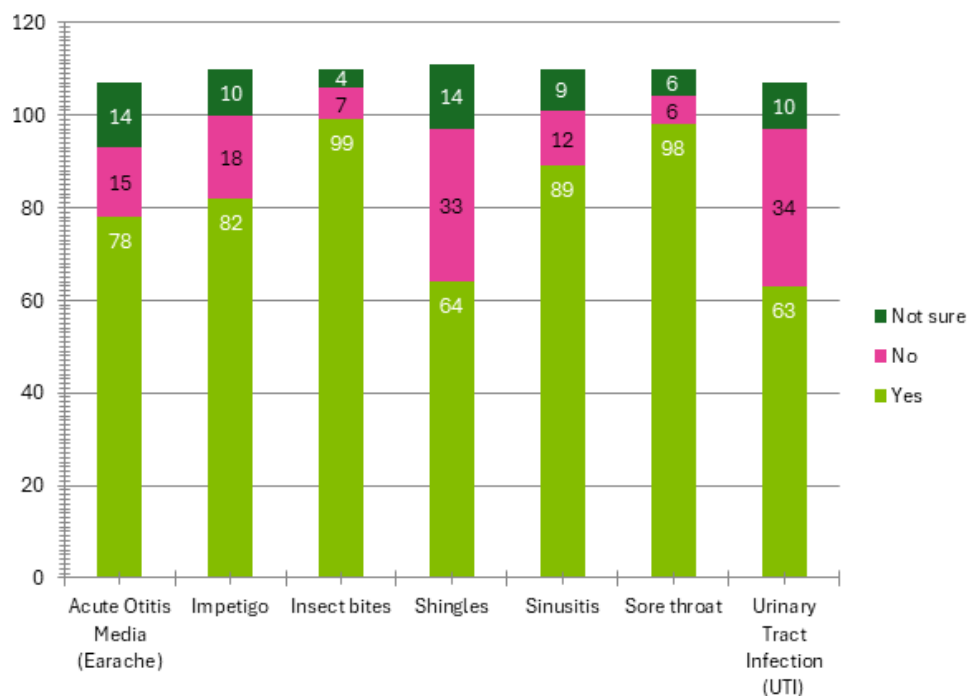


Figure 13: In the future, most respondents would be happy to see a pharmacist for any of the seven Pharmacy First conditions. n=112

We asked people if anything would worry them about seeing a community pharmacist. The two most common concerns were the pharmacist missing something more serious or still needing to go back to the GP, with about half of respondents choosing one or both of these worries. See Figure 14.

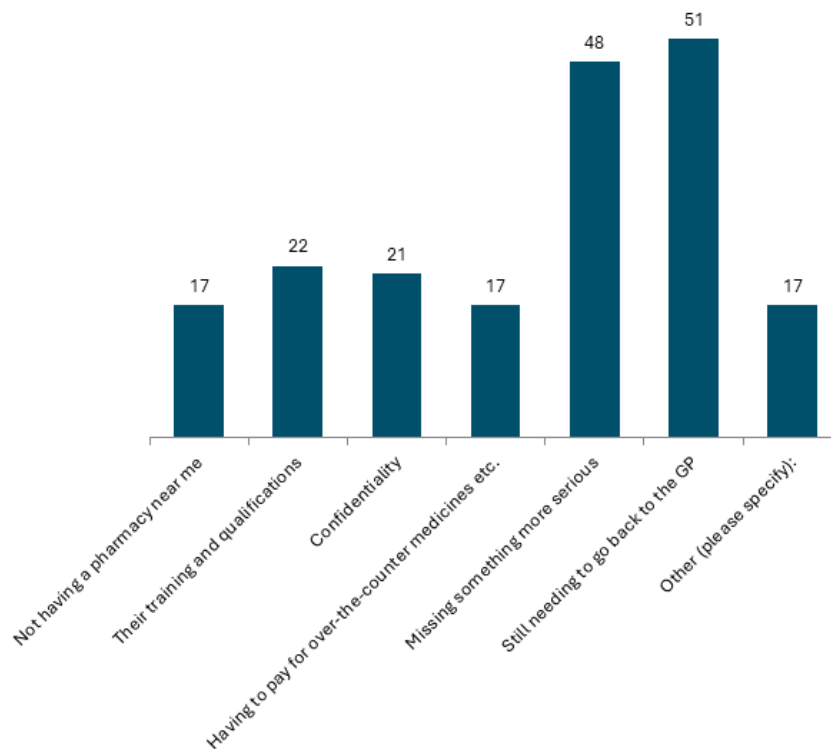


Figure 14: Would anything worry you about seeing a community pharmacist? (please tick all that apply). n=96

We also asked for additional comments about the Pharmacy First service and had numerous responses. The main themes were:

- Great service
- Can be seen quickly
- Relieves pressure on GPs
- Confidentiality, really relating to privacy in the 'shop'
- Pharmacists won't generally see people over a certain age

Conclusions

Judging from the results of this project, it appears that, overall, about two thirds of Northumberland respondents have heard of the Pharmacy First service (63%) and of those that had heard of the service, about two thirds of respondents had used Pharmacy First (63%).

However, on looking more closely at the data, we have found that:

- In North Northumberland a majority of respondents had not heard of the service (61%)
- Across the whole of the county men weren't as aware of the scheme as women, with a slight majority of men who hadn't heard of the scheme (55%)
- Awareness of the Pharmacy First scheme was good across all age bands, except in the 80+ year olds where just over half of the elderly respondents had not heard of the scheme (53%)

In terms of usage of the scheme, more people used the Pharmacy First service to get treatment for conditions other than one of the seven conditions that the service covers. Otherwise, sore throats and urinary tract infections were the most common reasons for seeking treatment.

The message to use pharmacy first appears to be working as, overall, over two thirds of respondents said they did not try to make an appointment with their GP first. For those under 50 years old and all ages of men, this rose to four out of five respondents saying that they did not try to make an appointment with their GP first. So, although less men are aware of the service, they are more likely to use the scheme than women.

Most respondents felt happy about the level of support they got from the pharmacy, in terms of diagnosis and treatment and that their needs were met. Only a quarter of respondents said they were asked to see a GP or other NHS service, with the GP being the most common service that respondents said they were asked to attend. As a consequence, over 85% of respondents were very likely or likely to recommend the Pharmacy First service to a friend.

In the future, most respondents would be happy to see a pharmacist for any of the seven Pharmacy First conditions. However, the two most common concerns about seeing a community pharmacist were the pharmacist missing something more serious or still needing to go to the GP, with about half of the respondents choosing one or both of these worries.

Overall, Pharmacy First is seen as a great service, where you can be seen quickly, so relieving pressure on GPs. However, there are some concerns around confidentiality as about one in five respondents said they hadn't been seen in a private area. While we recognise the physical constraints in some premises, lack of confidential space is an area to address if the take up of services is to be maximised.

Recommendations

To increase awareness of the Pharmacy First scheme

Promote Pharmacy First in North Northumberland more as this area has a much lower awareness than the rest of the county.

Promote Pharmacy First more in places men are more likely to go (e.g. football grounds, pubs and clubs, men's toilets in trunk road services etc).

To increase uptake of the Pharmacy First scheme

Promote the training and qualifications of pharmacists to women to reassure them that seeing a pharmacist won't mean something is missed, or they will only have to go to their GP in the end anyway.

Emphasise the importance for confidential space to maximise take up of the service.

Appendix

The following table shows the seven conditions pharmacists can manage across various age ranges with the Pharmacy First service.

Clinical pathway	Age range
Acute otitis media (earache)	*1 to 17 years
Impetigo	1 year and over
Infected insect bites	1 year and over
Shingles	18 years and over
Sinusitis	12 years and over
Sore throat	5 years and over
Uncomplicated urinary tract infections	16-64 years (women only)

*Distance selling pharmacies will not complete consultations for acute otitis media.

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