

Family Practitioner Services

# General Pharmaceutical Services

Annual Statistics 2020/21



**Published June 2021**

**Purpose**

The data contained in this publication are presented on a financial year basis for the year ending 31st March 2021. They represent a look at prescription dispensing and are based on claims submitted by primary pharmaceutical contractors to Family Practitioner Services. They do not cover secondary and private pharmaceutical provision.

Information is provided on dispensing contractors as well as volumes and costs of items dispensed by various patient demographics and therapeutic groups. Comparator information on dispensing contractors and dispensed items from across the UK is also presented. Data detailed in this publication are also available in spreadsheet format (Microsoft Excel) to aid secondary analysis on the [General Pharmaceutical Services and Prescribing Statistics website](#).

**Published by**

BSO Family Practitioner Services Information Unit,  
2 Franklin St, Belfast BT2 8DQ

**Responsible Statistician**

Debbie McLaughlin  
[Debbie.McLaughlin@hscni.net](mailto:Debbie.McLaughlin@hscni.net)

**We want your feedback**

We welcome any feedback on any aspect of these statistics, which can be provided by email to: [Info.BSO@hscni.net](mailto:Info.BSO@hscni.net)

Additional information about these statistics is located at the back of this publication.

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Find out more about the Code of Practice at: [Statistics Authority Code of Practice](#)

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## Introduction

This publication provides a statistical overview of pharmaceutical activity in Northern Ireland between April 2020 and March 2021. It is based on payment claims submitted by community pharmacists, dispensing doctors and appliance suppliers to Family Practitioner Services (FPS). The information does not include prescribing in a secondary care (e.g. hospital) or private setting.

It has been produced by independent statisticians within the FPS Information Unit. They are on secondment from the Northern Ireland Statistics and Research Agency (NISRA).

This publication has been compiled in accordance with the Code of Practice for Statistics. Further information about the work of FPS and the manner in which these statistics were produced can be found at the back of this publication. All figures included in the report have been derived from detailed Excel tables and complement a range of other statistical outputs, including open data, all of which are available from the BSO website [here](#).

It is also worth noting that prescribing patterns toward the end of 2019/20 and into 2020/21 will have been impacted by the Covid-19 pandemic. Whilst GP and Prescribing services continued to operate throughout the period, there were some changes to service delivery (for example, GPs carrying out initial telephone consultations) which, in combination with behavioural change in patients arising from the pandemic, will have had an effect on typical prescribing patterns.

### User Engagement

Statisticians in the Information Unit are regularly in contact with key users of the statistics. While previously readership surveys were used to provide an overall assessment of whether user needs were being met, the current approach employed is to undertake focused consultations with key users on a rolling basis.

This approach helps to gain greater insight into how the statistics are used and to identify additional specific requirements. In addition, any ad hoc requests for information are recorded centrally in a database and these records are used to provide intelligence from a wider set of users in relation to changing requirements. An outline of future developments

as a result of user engagement is provided in the [General Pharmaceutical Services Statistics User Engagement Action Plan](#).

## **New Developments**

Following engagement with users, key tables and analyses at individual patient level related to the dispensing of three specific drug groups - Anti-depressants, diabetes medication & products and opioid analgesics are provided for the first time in this publication. This will be extended in future publications informed by further user feedback.

## Key Facts



- **There were 41.7 million items dispensed**  
This was a decrease of 3.1% on 2019/20 and the first decrease experienced since the beginning of the series, most likely as a result of the COVID-19 pandemic.
- **The total ingredient cost was £454.3 million**  
This was an increase of 2.3% on the previous year's total
- **Anti-depressants were dispensed to nearly 1 in 5 people during the year**  
Anti-depressants were dispensed to over 357,000 people, almost 19% of the Northern Ireland population.



- **Northern Ireland had 528 community pharmacies**  
This was a reduction of three pharmacies from 2019/20.
- **There were 27.8 pharmacies per 100,000 people**  
Fermanagh & Omagh had the highest concentration of pharmacies (39.0 per 100,000 people).  
  
Lisburn & Castlereagh had the lowest concentration with 18.3 pharmacies per 100,000 people.

# 1. Overview

*This section provides statistics on dispensing activity across all contractors in Northern Ireland in 2020/21.*

## 1.1 Dispensing by contractor type

There were 538 contractors dispensing prescription items in Northern Ireland on 31st March 2021. This was a decrease of three contractors compared with the previous year. Contractor numbers have remained relatively stable in recent years, only decreasing by 1.5% since 2014/15 when there were 546 active contractors.

Table 1.1: Total Number of Contractors by Type, 2020/21

Contractor Type	Number of contractors	%
Community Pharmacy	528	98.1
Appliance contractors	2	0.4
Dispensing doctors	8	1.5
<b>Overall Total</b>	<b>538</b>	<b>100</b>

## 1.2 Total dispensing

There were 41.7 million items dispensed in the community in Northern Ireland in 2020/21 across all contractors. This was a decrease of 3.1% on the previous year resulting, at least in part, from the pandemic. Dispensing activity in Northern Ireland was dominated by community pharmacies, who accounted for 99.3% of all items dispensed.

Table 1.2: Millions of items dispensed by contractor type, 2020/21

Contractor Type	No of items	%
Community Pharmacy	41.4	99.3
Appliance contractors	0.2	0.5
Dispensing doctors	0.1	0.2
<b>Overall Total</b>	<b>41.7</b>	<b>100</b>



### 1.3 Most dispensed medications

The ten most commonly dispensed medications accounted for nearly one quarter (23.3%) of total dispensing in Northern Ireland in 2020/21. The two most commonly dispensed medications, with nearly 1.4 million items dispensed each, were Omeprazole, which is often used to treat excess stomach acid and atorvastatin, typically used to treat high blood cholesterol.

The ten most commonly dispensed medications and some of their typical uses are listed below. All medications are listed under their generic non-branded name and the figures incorporate all strengths available on prescription.

Table 1.3: Ten most commonly dispensed medications in Northern Ireland, 2020/21

Medication	Items Dispersed	Typical use
Omeprazole	1,377,154	Treatment of excess stomach acid
Atorvastatin	1,372,300	Treatment of high blood cholesterol
Co-codamol	1,241,992	Pain relief
Levothyroxine	1,059,470	Treatment for thyroid hormone deficiency
Sertraline	813,243	Treatment for depression and anxiety
Aspirin	809,412	Pain relief / heart attack prevention
Bisoprolol	805,544	Treatment for hypertension
Salbutamol	784,066	Treatment for respiratory conditions
Lansoprazole	765,406	Treatment of excess stomach acid
Amlodipine	693,729	Treatment for hypertension / angina

### 1.4 Total ingredient cost

The total ingredient cost<sup>1</sup> for prescription items dispensed in Northern Ireland in 2020/21 was £454.3 million. This was an increase of 2.3% on the previous year. This rise came despite a reduction in the number of items dispensed.

As shown on the following page, dispensing from community pharmacies accounted for 96.7% of ingredient costs which could be attributed to a specific contractor<sup>2</sup>.

<sup>1</sup> Ingredient cost is based on the gross cost of items before discounts. It will not necessarily reflect the actual amount paid by FPS. It also excludes payments made to community pharmacists for providing dispensing services.

<sup>2</sup> The ingredient cost figures for 2020/21 include £1.0 million of retrospective cost adjustments which cannot be matched to a specific contractor based on available data from the FPS payment system.

Table 1.4: Attributable ingredient cost by contractor type, 2020/21

Contractor Type	Ingredient cost (£ millions)	%
Community Pharmacy	438.3	96.7
Appliance contractors	14.5	3.2
Dispensing doctors	0.5	0.1
<b>Overall Total</b>	<b>453.3</b>	<b>100</b>

## 1.5 Total ingredient costs by medication

The ten medications with the highest ingredient costs accounted for 14% of total ingredient costs in 2020/21. Apixaban, a medication used for the treatment and prevention of blood clots, had the highest ingredient cost at £17.0 million. Table 1.5 lists the ten medications with the highest ingredient costs in 2020/21 and their typical uses. All medications are listed under their generic non-branded name and the figures incorporate all strengths available on prescription.

Table 1.5: Ten medications with highest total ingredient costs in Northern Ireland, 2020/21

Medication	Ingredient Cost (£ millions)	Typical use
Apixaban	17.0	Treatment and prevention of blood clots
Sertraline	8.0	Treatment for depression and anxiety
Budesonide + Formoterol	6.3	Treatment for asthma
Fluticasone + Salmeterol	5.6	Treatment for asthma
Co-codamol	5.2	Pain relief
Lamotrigine	4.8	Treatment for epilepsy
Melatonin	4.6	Treatment for insomnia
Buprenorphine	4.4	Pain relief
Mesalazine	4.1	Treatment for inflammatory bowel disease
Tramadol	4.0	Pain Relief

It is interesting to observe that there is little crossover between the ten most dispensed medications (see table 1.3) and the ten with the highest ingredient costs. Co-codamol and Sertraline are the only medications to appear on both lists. This divergence relates to the relatively low ingredient costs of many commonly dispensed medications. It is also worth

noting that price increases for medications rather than increased prescribing can be the main driver of increased total ingredient cost.

**Part One**

**Community Pharmacy  
in Northern Ireland 2020/21**

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## 2. Pharmacy Statistics

*This section contains basic statistics on community pharmacies including the number, size and distribution of pharmacies throughout Northern Ireland<sup>3</sup>.*

### 2.1 Number of Pharmacies

There were 528 community pharmacies in Northern Ireland on 31<sup>st</sup> March 2021. This was a reduction of three pharmacies compared to 2019/20. This is the lowest number of pharmacies here in the last ten years.

This does not mean that there has been a consistent pattern of declining numbers. There remains considerable variation across the region due to local variations in terms of openings and closures.

At Local Government District (LGD) level, some districts have seen an increase in pharmacy numbers in the last ten years. The greatest increase has been in Fermanagh & Omagh where there are now 46 pharmacies, an increase of 7.0% since 2010/11.

The greatest percentage drop in pharmacy numbers has been in Lisburn & Castlereagh, which had 27 pharmacies at the end of 2020/21. This was a reduction of 6.9% on its total in 2010/11.

A full breakdown of changes in pharmacy numbers across all LGDs over the past decade can be seen in Table 2.1 on the following page.

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<sup>3</sup> All geographic breakdowns in this chapter are based on pharmacy location.

Table 2.1: Change in pharmacy numbers at LGD level between 2010/11 and 2020/21

Local Government District	2010/11	2020/21	% Change
Antrim & Newtownabbey	33	33	0.0
Ards & North Down	40	39	-2.5
Armagh City, Banbridge & Craigavon	48	48	0.0
Belfast	132	129	-2.3
Causeway Coast & Glens	40	40	0.0
Derry City & Strabane	43	44	2.3
Fermanagh & Omagh	43	46	7.0
Lisburn & Castlereagh	29	27	-6.9
Mid & East Antrim	31	31	0.0
Mid Ulster	39	38	-2.6
Newry, Mourne & Down	51	53	3.9
<b>Northern Ireland</b>	<b>529</b>	<b>528</b>	<b>-0.2</b>

## 2.2 Pharmacies per 100,000 population

The number of pharmacies per 100,000 people in Northern Ireland was 27.8 in 2020/21, a reduction of 0.2 on 2019/20.

This continues the slow decline in the ratio of pharmacies to population which began in 2011/12. At that time there were 29.4 pharmacies per 100,000 population. This trend has been caused by population growth combined with the slight reduction in pharmacy numbers.

There is considerable variation in the figures for individual LGDs across Northern Ireland, which can be seen in Table 2.2 on the following page.

In 2020/21, Fermanagh & Omagh had the most pharmacies per 100,000 people. Its figure, 39 pharmacies, was more than twice that of Lisburn & Castlereagh, which had the lowest ratio of pharmacies to population.

Table 2.2: Pharmacies per 100,000 population for Northern Ireland LGDs, 2020/21

Local Government District	Pharmacies per 100,000 population <sup>4</sup>
Fermanagh & Omagh	39.0
Belfast	37.6
Derry City & Strabane	29.1
Newry, Mourne & Down	29.0
Causeway Coast & Glens	27.6
Mid Ulster	25.3
Ards & North Down	24.0
Antrim & Newtownabbey	22.9
Mid & East Antrim	22.2
Armagh City, Banbridge & Craigavon	22.0
Lisburn & Castlereagh	18.3
<b>Northern Ireland</b>	<b>27.8</b>

At a UK level, Northern Ireland continues to have the most pharmacies per 100,000 population. The most recent available statistics, which relate to 2019/20, indicate that the UK average was 21.5 pharmacies per 100,000 people. Northern Ireland's figure was 28.0, which was over 30% higher than the UK average.

Table 2.3: Pharmacies per 100,000 population across the United Kingdom, 2019/20

Region	Pharmacies per 100,000 population
Northern Ireland	28.0
England	21.0
Scotland	23.1
Wales	22.7
<b>United Kingdom</b>	<b>21.5</b>

The higher figure for Northern Ireland may be linked to the low number of dispensing GP practices here. These practices can dispense prescriptions directly to patients who meet

<sup>4</sup> The LGD figures have been calculated using a 2018-based population projection for 2020 due to the unavailability of 2020 mid-year estimates at the time of production.

certain criteria<sup>5</sup>. In Northern Ireland, there are four such practices (with eight dispensing doctors), accounting for 0.2% of all dispensing. In the rest of the UK, there are 1,223 dispensing practices, representing around 7% of all medicines dispensed annually<sup>6</sup>.

## 2.3 Distance to Nearest Pharmacy<sup>7</sup>

It is estimated that over 99% of the Northern Ireland population lived within five miles of their nearest pharmacy in 2020/21. In many cases, the distance between home and pharmacy was far shorter – 72.5% of all people lived within one mile of their nearest pharmacy. This meant that the average distance from home to pharmacy was 0.9 miles. A full overview is provided in Table 2.4 below.

Table 2.4: Population proximity to pharmacies at LGD level, 2020/21

Local Government District	Population within 1 mile (%)	Population within 3 miles (%)	Population within 5 miles (%)
Antrim & Newtownabbey	76.4	96.8	100.0
Ards & North Down	84.4	99.1	100.0
Armagh City, Banbridge & Craigavon	60.5	90.0	98.8
Belfast	98.8	100.0	100.0
Causeway Coast & Glens	56.1	86.5	98.9
Derry City & Strabane	81.3	94.3	99.1
Fermanagh & Omagh	48.2	82.0	97.9
Lisburn & Castlereagh	80.5	96.3	100.0
Mid & East Antrim	70.9	89.8	98.7
Mid Ulster	48.9	83.5	98.8
Newry, Mourne & Down	59.2	91.5	99.9
<b>Northern Ireland</b>	<b>72.5</b>	<b>92.8</b>	<b>99.4</b>

<sup>5</sup> Full details of these criteria are available in the technical notes at the back of this publication.

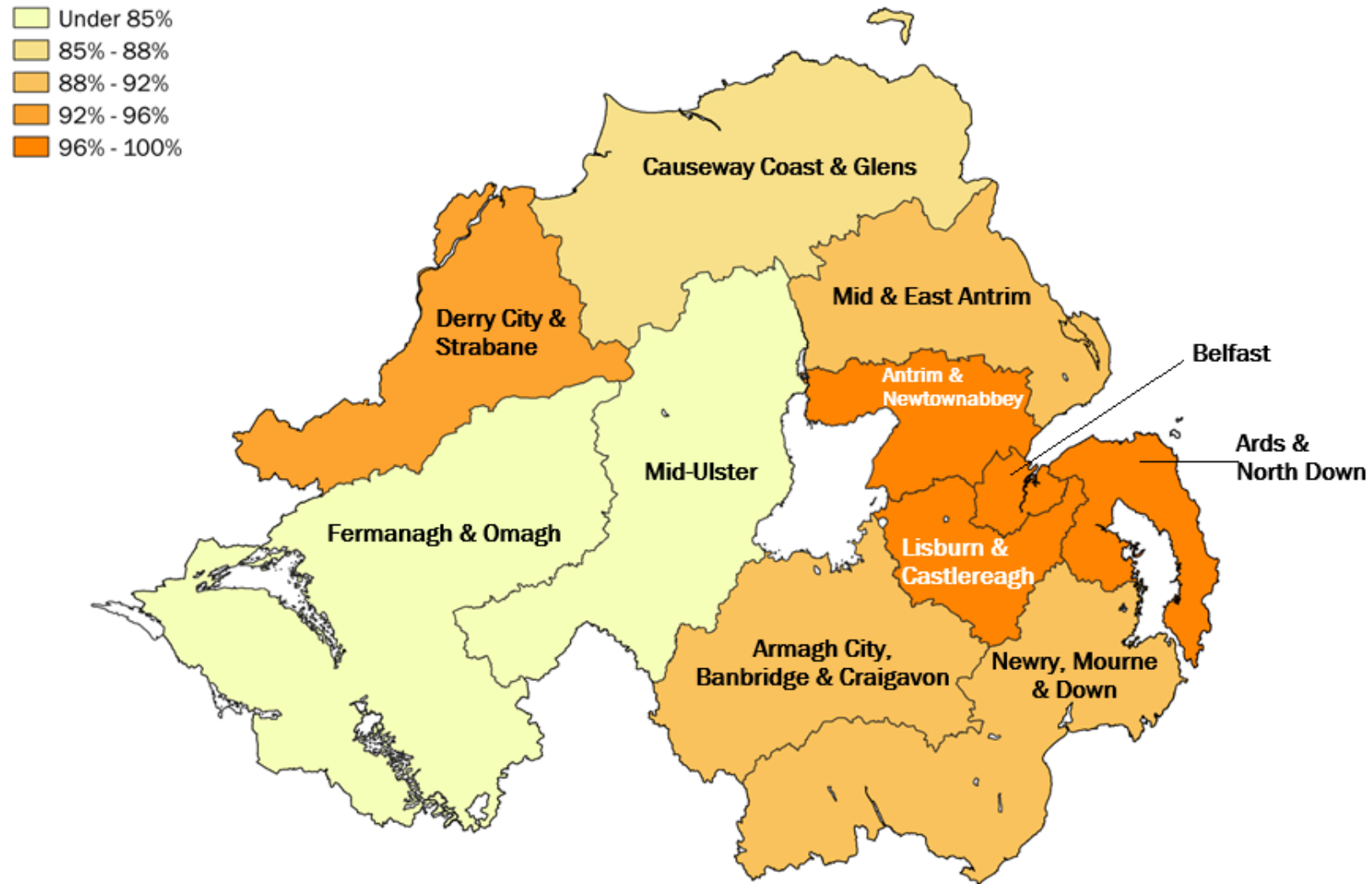
<sup>6</sup> Figures taken from [Dispensing Doctors' Association](#).

<sup>7</sup> Population is defined as active GP registration person counts at postcode level at October 2020. Distance is calculated on a straight line basis. See technical notes for further information.



While pharmacy coverage is almost universal at five mile level, there is some local variation across Northern Ireland at shorter distances. This is illustrated in Map 2.1 on the following page which shows the percentage of the population living within a three mile radius of a community pharmacy by LGD in 2020/21.

Map 2.1: Percentage of population living within three miles of a pharmacy by LGD, 2020/21



## 3. Pharmacy Dispensing Volumes

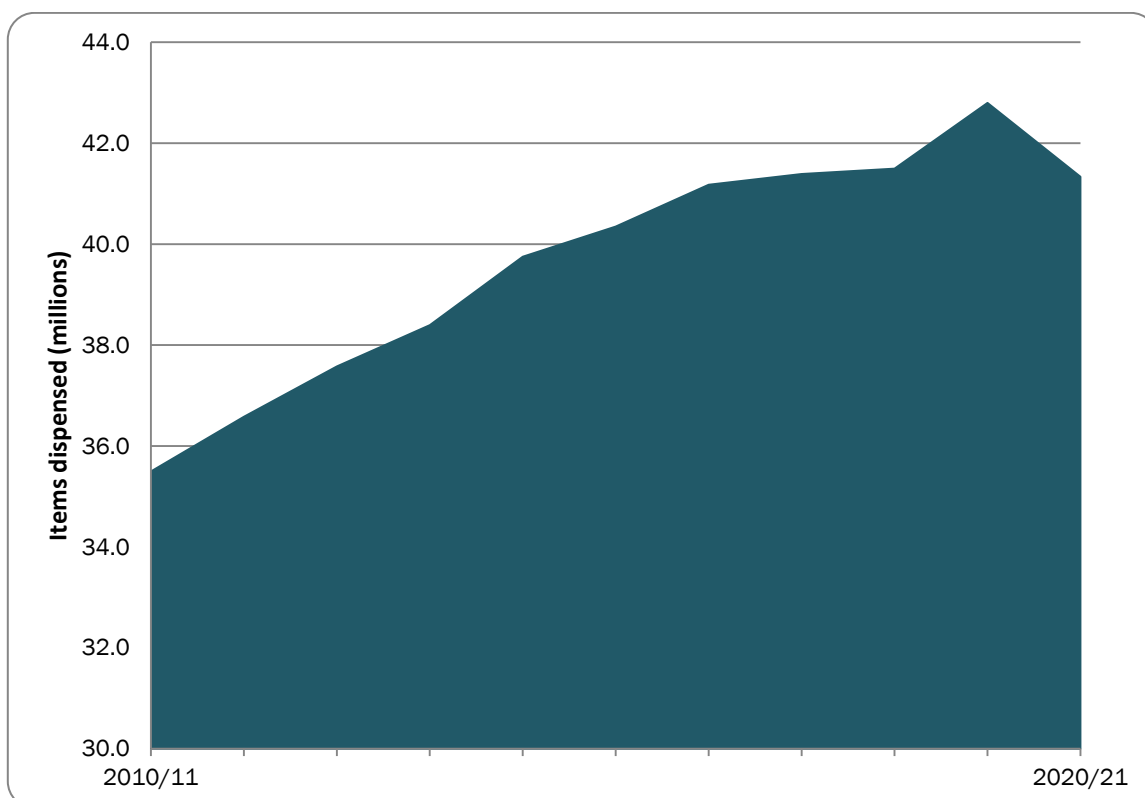
*This section contains information on items dispensed within community pharmacies throughout Northern Ireland in 2020/21<sup>8</sup>.*

### 3.1 Total Dispensing

The total number of prescription items dispensed by community pharmacies was 41.4 million in 2020/21. This was a decrease of 3.3% on the previous year.

The 2020/21 total represents a break in a long term trend towards higher dispensing levels most likely as a result of the Covid-19 pandemic. The total number of items dispensed has risen by 16.4% since 2010/11, when the figure stood at 35.5 million items.

Chart 3.1: Trend in number of items dispensed, 2010/11 to 2020/21



<sup>8</sup> All geographic breakdowns in this chapter are based on pharmacy location.

In terms of Local Government Districts, Derry City & Strabane had the greatest number of items dispensed per head of the population at 27.2. The lowest figure was recorded in Lisburn & Castlereagh where 16.8 items were dispensed per person in 2020/21.

Table 3.1: Total number of items dispensed by LGD, 2020/21

Local Government District	Items dispensed (millions)	Items per person <sup>9</sup>
Derry City & Strabane	4.1	27.2
Belfast	8.7	25.5
Fermanagh & Omagh	2.7	22.9
Newry, Mourne & Down	4.0	21.9
Causeway Coast & Glens	3.1	21.4
Ards & North Down	3.5	21.3
Mid & East Antrim	2.9	20.9
Mid Ulster	3.0	20.0
Armagh City, Banbridge & Craigavon	4.2	19.0
Antrim & Newtownabbey	2.7	19.0
Lisburn & Castlereagh	2.5	16.8
<b>Northern Ireland</b>	<b>41.4</b>	<b>21.8</b>

### 3.2 Dispensing by pharmacy

The average number of items dispensed per pharmacy was 78,286 in 2020/21. This was a decrease of 2.9% on the previous year. Despite this reduction, the average number of items dispensed per year was 16.7% higher than in 2010/11.

There were substantial differences across LGDs in the average number of items dispensed per pharmacy in 2020/21. The pharmacies with the highest average dispensing were those in Mid & East Antrim which dispensed an average of 93,561 items in 2020/21. Fermanagh & Omagh had the lowest average figure at 58,755 items per pharmacy.

While lower dispensing volumes are often associated with rural areas, the figure for Belfast suggests that this is not always the case. It had the second-lowest average in Northern

<sup>9</sup> The LGD figures have been calculated using a 2018-based population projection for 2020 due to the unavailability of 2020 mid-year estimates at the time of production.

Ireland at 67,667 items per pharmacy. This will be driven by the high concentration of pharmacies in this council area.

Table 3.2: Average annual dispensing per pharmacy by LGD, 2020/21

Local Government District	Average Items Dispensed
Mid & East Antrim	93,561
Derry City & Strabane	93,324
Lisburn & Castlereagh	91,856
Ards & North Down	88,325
Armagh City, Banbridge & Craigavon	86,520
Antrim & Newtownabbey	82,654
Mid Ulster	78,961
Causeway Coast & Glens	77,488
Newry, Mourne & Down	75,301
Belfast	67,667
Fermanagh & Omagh	58,755
<b>Northern Ireland</b>	<b>78,286</b>

There were 22 pharmacies in Northern Ireland with an average dispensing level of 2,000 or fewer items per month in 2020/21. This represented a 10% increase on 2019/20. More than half of these pharmacies were located in Belfast, representing 10.1% of all pharmacies in that Local Government District.

At a UK level, Northern Ireland had the lowest average dispensing volumes per pharmacy in 2019/20, the most recent year for which comparable statistics are available. At the time, the UK average was 7,322 items per pharmacy per month. Northern Ireland's figure was 6,716 items, which was 8.3% lower than the UK average. These figures can be seen in Table 3.3 on the following page.

Table 3.3: Average monthly dispensing at UK level, 2019/20

Region	Average items dispensed
Northern Ireland	6,716
England	7,299
Scotland	6,874
Wales	8,955
<b>United Kingdom</b>	<b>7,322</b>

It should be noted that average dispensing numbers may not be directly comparable across the UK due to differences in prescribing practices.

For example, in Northern Ireland and Scotland, GPs and other prescribers can instruct pharmacists to split single items and dispense them at set intervals in the interest of patient safety. In England and Wales, the practice can be to prescribe a reduced quantity of items at a greater frequency. See the further information section for additional details.

Further information about monthly average dispensing volumes, including historical trend data, is available in [Annex tables](#) 1.4 and 1.5.

## 4. Pharmacy Dispensing Costs

*This section contains information on ingredient cost<sup>10</sup> of items dispensed within community pharmacies throughout Northern Ireland in 2020/21<sup>11</sup>.*

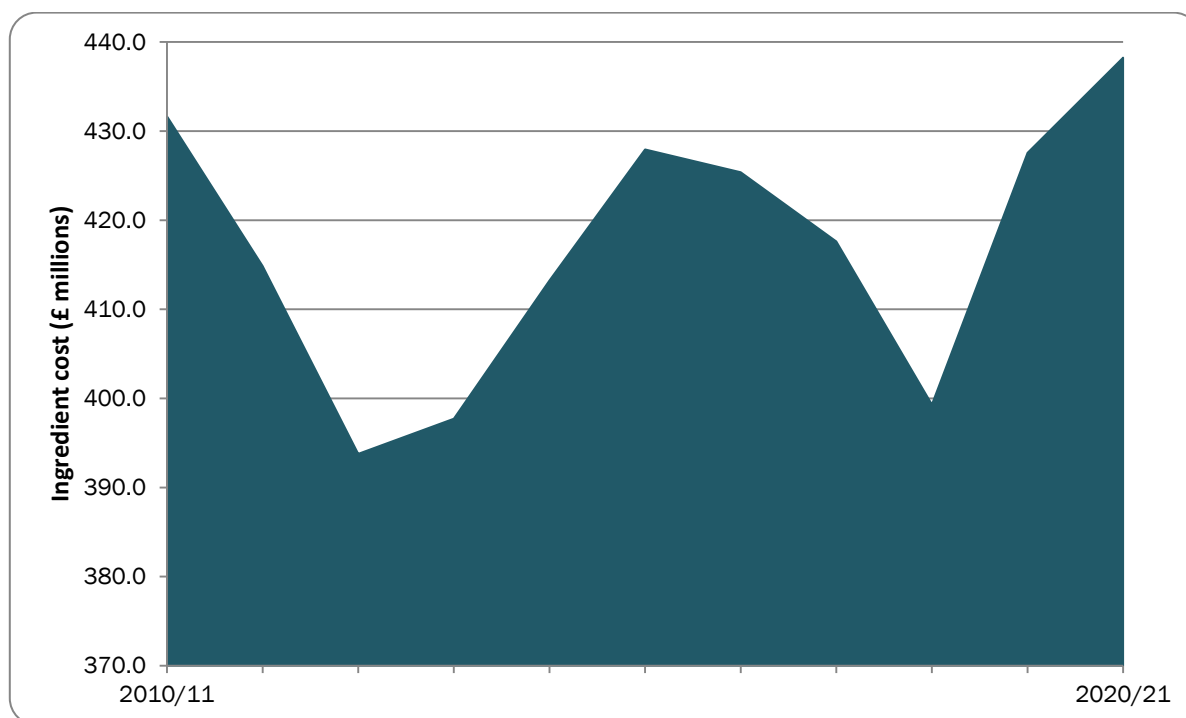
### 4.1 Total ingredient cost

The total ingredient cost for prescription items dispensed by community pharmacies in 2019/20 was £438.3 million. This was an increase of 2.6% on the previous year.

Annual ingredient cost totals have fluctuated over the past 10 years. This situation has arisen due to changes in drug costs and prescribing patterns over time.

As a result, the total ingredient cost has risen by just 1.5% since 2010/11, which is less than a tenth of the growth rate in items over the same period.

Chart 4.1: Trend in total ingredient cost, 2010/11 to 2020/21



<sup>10</sup> Ingredient cost is based on the gross cost of items before discounts. It will not necessarily reflect the actual amount paid by FPS. It also excludes payments made to community pharmacists for providing dispensing services.

<sup>11</sup> All geographic breakdowns in this chapter are based on pharmacy location.

The average cost per item dispensed by community pharmacies across Northern Ireland was £10.60 in 2020/21. There was, however, some variation at LGD level. The average figure ranged from £9.64 per item in Derry City & Strabane to £11.89 per item in Ards & North Down.

Table 4.1: Total ingredient cost and cost per item by LGD, 2020/21

Local Government District	Ingredient Cost (£millions)	Cost per item
Ards & North Down	41.0	£11.89
Lisburn & Castlereagh	28.6	£11.54
Causeway Coast & Glens	34.0	£10.98
Antrim & Newtownabbey	29.9	£10.97
Mid & East Antrim	31.4	£10.83
Belfast	92.5	£10.60
Armagh City, Banbridge & Craigavon	43.0	£10.36
Fermanagh & Omagh	27.9	£10.30
Newry, Mourne & Down	40.2	£10.07
Mid Ulster	30.2	£10.05
Derry City & Strabane	39.6	£9.64
<b>Northern Ireland</b>	<b>438.3</b>	<b>£10.60</b>

Belfast had the highest total ingredient cost at £92.5 million. This accounted for 21.1% of the total ingredient cost for Northern Ireland. Fermanagh & Omagh had the lowest cost at £27.9 million.

## 4.2 Ingredient cost per pharmacy

The average ingredient cost of items dispensed per pharmacy was £830,016 in 2020/21. This was an increase of 3.1% on the previous year. Fluctuating ingredient costs over time meant, however, that this was an increase of just 1.7% on 2010/11.

As with dispensing volumes, there were noticeable local variations at LGD level. There were three LGDs where the average ingredient cost was over £1 million per pharmacy. By contrast, pharmacies in Fermanagh & Omagh had an average ingredient cost of £605,440



in 2020/21. A full breakdown of average ingredient costs per pharmacy at LGD is provided below.

Table 4.2: Average annual ingredient cost per pharmacy by LGD, 2020/21

Local Government District	Average Total Ingredient Cost (£)
Lisburn & Castlereagh	1,059,628
Ards & North Down	1,050,022
Mid & East Antrim	1,013,028
Antrim & Newtownabbey	906,826
Derry City & Strabane	899,522
Armagh City, Banbridge & Craigavon	896,134
Causeway Coast & Glens	850,559
Mid Ulster	793,741
Newry, Mourne & Down	758,300
Belfast	717,368
Fermanagh & Omagh	605,440
<b>Northern Ireland</b>	<b>830,016</b>

**Part Two**

**Dispensing in  
Northern Ireland 2020/21**

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## 5. Dispensing Analysis

*This section provides a detailed analysis of total dispensing activity in Northern Ireland in 2020/21. Unlike previous sections, it includes dispensing information from all dispensing contractors i.e. community pharmacies, dispensing doctors and appliance contractors<sup>12</sup>.*

### 5.1 Background information

The majority of the figures within this section are based on the matching of patient attributes, such as age, gender and geographical location, to prescription records.

This process relies on data captured during the scanning of paper prescriptions submitted for payment by contractors to FPS. In some cases, the data capture is unable to successfully read the patient attributes printed on the prescription.

In 2020/21, patient attribute information was retrieved for 89.7% of all prescription items dispensed. This sample has been investigated for any significant bias and is considered to be representative of patient prescribing patterns across Northern Ireland.

However the incomplete nature of this data should be taken into account when examining absolute numbers or trends across time. In particular, it should be noted that scan rates vary on an annual basis. For instance, patient attributes were only retrieved from around 75% of prescriptions scanned in 2018/19.

This limitation only applies to demographic or geographical breakdowns based on patient attributes within this part of the publication. Overall figures for Northern Ireland or geographic information based on the location of community pharmacies are not affected by the scanning issue.

### 5.2 Dispensing by age and gender

Females accounted for 56.7% of all prescription items which could be attributed to a gender. This proportion varied little at LGD level – the highest figure was 57.9% in Antrim & Newtownabbey, the lowest was 54.9% in Fermanagh & Omagh.

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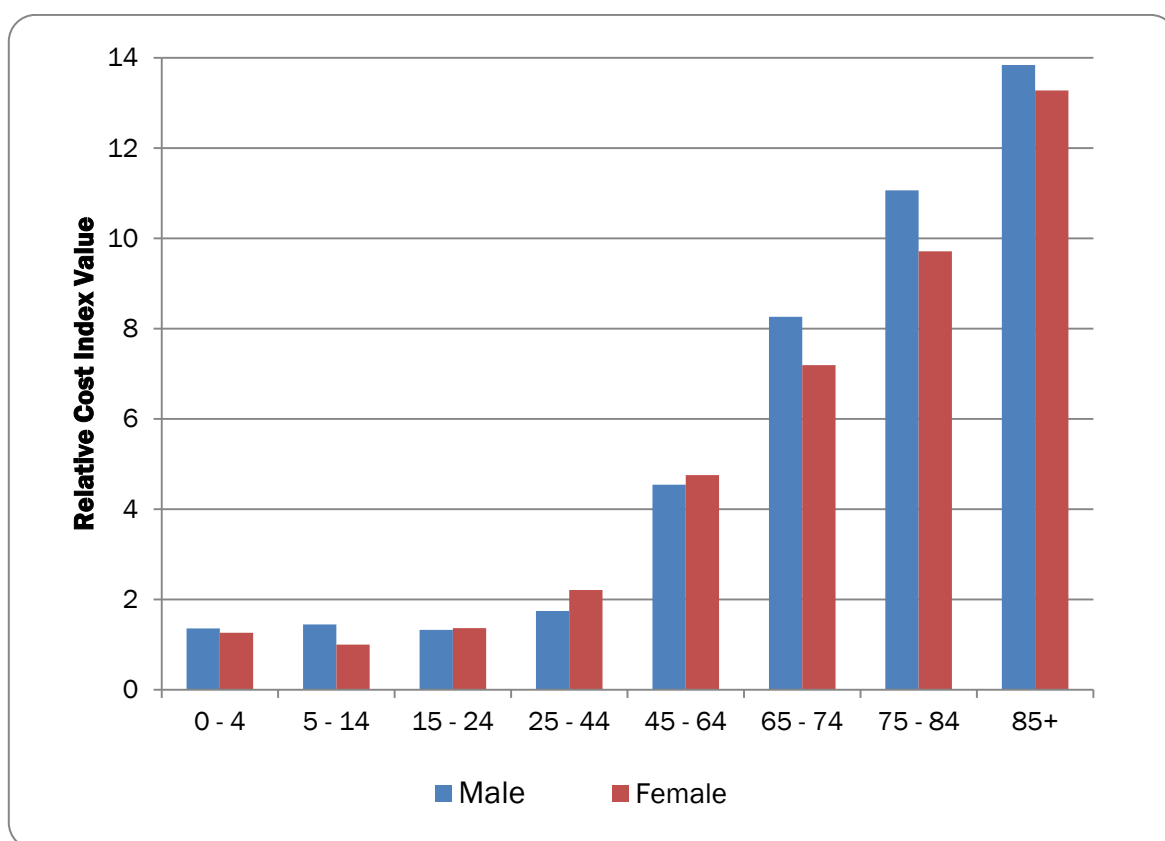
<sup>12</sup> All geographic breakdowns in this chapter are based on patient location.

Around 45% of prescription items were dispensed to patients aged 65 or over, with a further 35% to patients in the 45-64 age group. These groups also had the highest total ingredient costs of £173.4 and £132.8 million respectively. A full breakdown of dispensing by age and gender is provided in the statistical tables accompanying this publication.

### 5.3 Relative Cost Index

The relationship between age/gender and prescribing cost can be examined through the use of a relative cost index. The index values are calculated by dividing the total ingredient cost of items dispensed to each age and gender group by the equivalent mid-year population estimates.

Chart 5.1: Relative Cost Index values by age and gender, 2020/21



The chart above shows that broadly speaking, as might be expected, prescribing costs for both genders progressively increase with age. For example, a male in the 85+ group will typically have a cost index value which is 13.84 times higher than that for a female in the 5-14 group. In older age brackets, men tend to have higher costs than their female counterparts, reflecting the generally poorer health status found in older males.

## 5.4 Dispensing by BNF Chapter

The British National Formulary (BNF) is a reference source published jointly by the British Medical Association and the Royal Pharmaceutical Society providing professional guidelines on medicine use. It is divided into chapters relating to therapeutic groups, which provide an indication of the condition for which they have generally been prescribed.

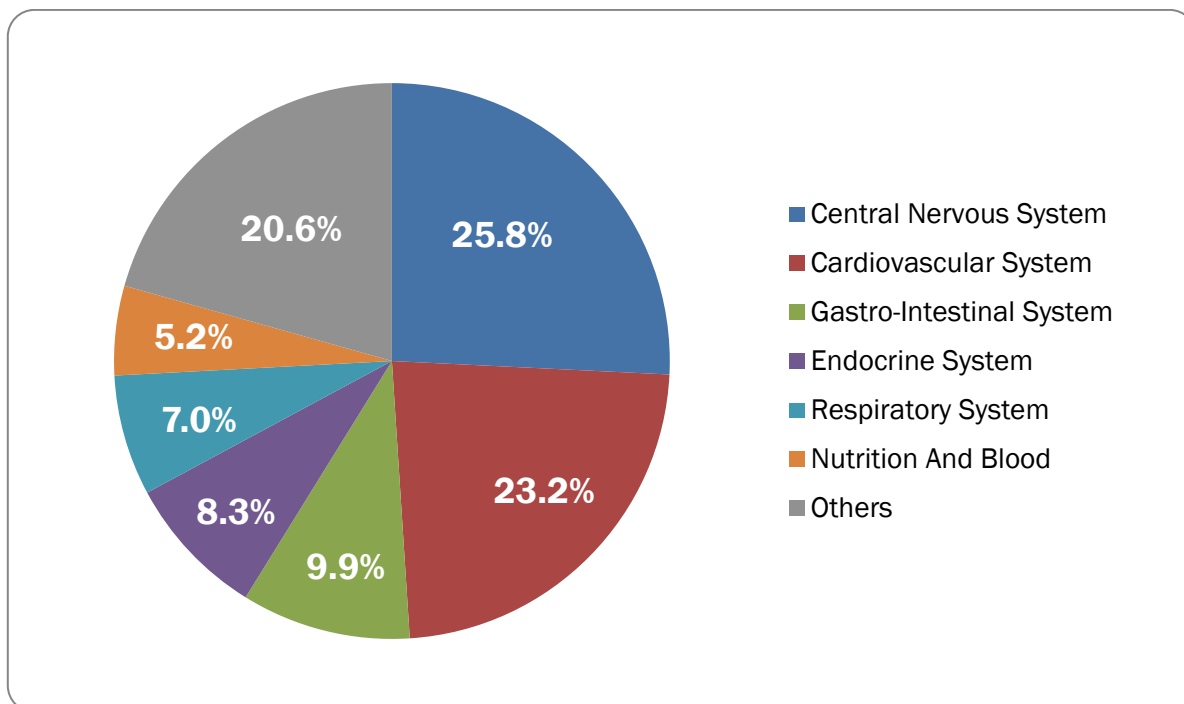
The table below contains an overview of dispensing and associated ingredient cost by BNF chapter in Northern Ireland in 2020/21.

Table 5.1: Items dispensed and total ingredient cost by BNF chapter, 2020/21

BNF Chapter	No of items (millions)	Ingredient Cost (£millions)
1. Gastro-Intestinal System	4.1	26.5
2. Cardiovascular System	9.7	64.6
3. Respiratory System	2.9	42.9
4. Central Nervous System	10.7	104.2
5. Infections	1.6	10.1
6. Endocrine System	3.5	56.0
7. Obstetrics, Gynaecology And Urinary Tract Disorders	1.0	11.4
8. Malignant Disease And For Immunosuppression	0.2	12.6
9. Nutrition And Blood	2.2	34.6
10. Musculoskeletal And Joint Diseases	1.4	9.9
11. Eye	0.4	4.4
12. Ear, Nose And Oropharynx	0.5	4.1
13. Skin	1.5	13.6
14. Immunological Products And Vaccines	0.0	0.7
15. Anaesthesia	0.1	2.9
19. Other Drugs And Preparations	0.1	1.9
20. Dressings	0.3	11.1
21. Appliances	1.1	20.4
22. Incontinence Appliances	0.1	1.8
23. Stoma Appliances	0.2	11.7
99. Unclassified	0.1	9.0
<b>Overall Total</b>	<b>41.7</b>	<b>454.3</b>

It is clearly evident from the overview that a small number of BNF chapters represent the bulk of items dispensed. These are the chapters for the central nervous system, the cardiovascular system, the gastro-intestinal system, the endocrine system, the respiratory system and nutrition & blood. As chart 5.2 shows, these six chapters accounted for over three quarters of all items dispensed in Northern Ireland in 2020/21.

Chart 5.2: Items dispensed by BNF chapter, 2020/21



In terms of costs, there isn't necessarily a correlation between dispensing volumes and ingredient costs at BNF chapter level, particularly in terms of the average cost per item.

The highest average cost per item in 2020/21 was for items relating to BNF chapter 14 Immunological products and vaccines at £106.97. This stemmed from changes in prescribing patterns during the COVID-19 pandemic. This caused an 82.2% reduction in dispensed items, mostly related to reduced prescribing of travel vaccinations.

This meant that stock orders for vaccines emerged as a major source of items dispensed within this category. Stock orders relate to drugs ordered by GPs for administration within their practices. Each stock order is recorded as a single item for payment purposes but generally consist of multiple items, generating a higher ingredient cost per item.

## 5.5 Dispensing by Age Group and BNF chapter

The overall pattern of dispensing by BNF chapter hides some variation in the type of conditions treated across different age groups. Most notably, medications for skin appear in the top three for patients aged below 25 but are not amongst the top six BNF chapters discussed above.

Table 5.2: The three most commonly dispensed chapters by age group, 2020/21

Age Group	Most dispensed chapters	% of Items
0-4	13. Skin	21.3
	9. Nutrition And Blood	20.1
	1. Gastro-Intestinal System	16.0
5-14	3. Respiratory System	26.2
	4. Central Nervous System	16.6
	13. Skin	14.1
15-24	4. Central Nervous System	27.2
	3. Respiratory System	14.0
	13. Skin	11.2
25-44	4. Central Nervous System	39.2
	1. Gastro-Intestinal System	10.0
	3. Respiratory System	8.4
45-64	4. Central Nervous System	30.7
	2. Cardiovascular System	21.1
	1. Gastro-Intestinal System	10.5
65-74	2. Cardiovascular System	32.4
	4. Central Nervous System	20.3
	1. Gastro-Intestinal System	9.6
75-84	2. Cardiovascular System	34.4
	4. Central Nervous System	17.9
	6. Endocrine System	9.5
85+	2. Cardiovascular System	30.3
	4. Central Nervous System	18.7
	1. Gastro-Intestinal System	10.5

It is also evident that medications for the Cardiovascular System are less commonly dispensed to patients who are aged below 45. Even within the 25-44 age group, they accounted for just 7.5% of all items dispensed.

## 5.6 Dispensing by Deprivation

Patient postcode information was available for 89.7% of all items dispensed in 2020/21. Data is unavailable for the remaining prescriptions due to the limitations of the prescription scanning process used by FPS.

The availability of postcode information allows dispensing activity to be mapped to the Multiple Deprivation Measure (MDM), which is the official measure of geographical deprivation for Northern Ireland.

For the purposes of this publication, the areas covered within the MDM were divided into five quintiles, each of which contained approximately 20% of Northern Ireland's population.

The data indicates that the number of items dispensed and the total ingredient cost is higher for areas with higher levels of deprivation. There were 8.8 million items dispensed to patients living in the most deprived quintile in 2020/21 whereas 5.8 million were dispensed to those residing in the least deprived quintile.

Table 5.3: Items dispensed and ingredient cost by deprivation quintile, 2020/21

Deprivation Quintile	Total items (million)	% Items	Total Ingredient cost (£millions)	% Cost
1 (highest)	8.8	21.1	87.9	19.4
2	8.2	19.7	86.5	19.0
3	7.7	18.4	83.3	18.3
4	6.9	16.5	77.5	17.1
5 (lowest)	5.8	13.9	69.8	15.4
Unassignable	4.3	10.3	49.2	10.8

The relationship between deprivation and ingredient cost is more complex. While more deprived quintiles have higher ingredient costs, this arises due to the volume of



prescriptions dispensed. For most BNF chapters, the ingredient cost per item is higher for patients residing in less deprived areas. This can be illustrated using the figures related to the six most dispensed BNF chapters in 2020/21.

Table 5.4: Cost per item by deprivation quintile for most dispensed BNF chapters, 2020/21

BNF Chapter	Quintile 1 (highest)	Quintile 2	Quintile 3	Quintile 4	Quintile 5 (lowest)
1. Gastro-Intestinal System	£5.64	£6.17	£6.45	£7.01	£7.63
2. Cardiovascular System	£5.66	£6.30	£6.68	£7.23	£7.88
3. Respiratory System	£14.01	£14.52	£14.55	£15.06	£16.11
4. Central Nervous System	£9.09	£9.49	£9.78	£9.72	£10.27
6. Endocrine System	£15.72	£15.53	£16.02	£16.61	£17.68
9. Nutrition And Blood	£14.44	£15.46	£15.91	£17.08	£18.46

It is evident that the ingredient cost per item is substantially greater across all six chapters for patients residing in the least deprived quintile (number five) compared with those in the most deprived one.

The differences between the most and least deprived quintiles are particularly large in terms of the Gastro-Intestinal System and the Cardiovascular System. In both cases, the ingredient cost per item for the least deprived quintile is more than 30% greater than that for the most deprived quintile.

## 5.7 UK comparisons

There are some differences in how dispensing statistics are published across the UK, which can make comparisons difficult. As a result, the figures in this sub-section have been calculated on a calendar year basis to facilitate comparisons with England and Wales.

In 2020, Northern Ireland had the second-highest level of dispensing in the UK at 22.2 items per person. By comparison, Wales had the highest figure at 26.1 items. Both had a notably higher level of dispensing than either Scotland or England. These figures may,

however, not be directly comparable due to differing prescribing practices across each region as described in section 3.2.

Northern Ireland had the highest ingredient cost per person in the UK in 2020. Its figure increased by 4.1% compared with the previous year to £239.32 per person. By comparison, the equivalent figure for England was £169.45. A summary of the comparative figures for 2020 is provided in the table below.

Table 5.5: Prescription items and ingredient cost per person across the UK, 2020

Region	Prescription items per person	Ingredient cost per person
Northern Ireland	22.2	£239.32
England	19.8	£169.45
Scotland <sup>†</sup>	19.5	£215.18
Wales	26.1	£194.92

<sup>†</sup> Figures for 2019/20 financial year

## 6. Detailed analysis

*This section provides more detailed dispensing statistics for classes of medication which have been identified as being of particular interest to publication users.*

### 6.1 Background Information

This section contains detailed patient statistics relating to the dispensing of anti-depressants, opioid analgesics and diabetes medication & products in Northern Ireland during 2020/21.

The figures in this section are based on matching patient attributes to prescription records. This process and its limitations were previously outlined in section 5.1. Due to these limitations, statistics can only be provided for 2019/20 and 2020/21. However most patients will have multiple prescriptions over the year analysed and will be included in the figures if patient information could be obtained for at least one prescription.

It should be noted that it is impossible to infer the medical conditions for which patients are being treated on the basis of the medications dispensed to them. Many medications are used to treat multiple conditions. For example, anti-depressants are often used in the treatment of anxiety disorders.

### 6.2 Anti-depressants

Anti-depressants were dispensed to 357,122 people in Northern Ireland during 2020/21, equating to almost 19% of its total population. This figure was virtually unchanged compared with 2019/20.

There was significant variation in relation to the proportion of individuals receiving anti-depressants across different groups within the population. As illustrated by Table 6.1 on the following page, 63.7% of individuals who received anti-depressants were female.

Table 6.1: Individuals receiving anti-depressants by sex, 2020/21

Sex	Number of individuals	%
Male	129,694	36.3
Female	227,428	63.7
<b>Northern Ireland</b>	<b>357,122</b>	<b>100.0</b>

These figures indicate that anti-depressants were dispensed to 23.6% of Northern Ireland's female population during 2020/21. The equivalent figure for males was 13.8%.

The overall numbers conceal significant variation in the proportion of individuals receiving anti-depressants across different age/gender segments of the population. The lowest proportion (0.4%) was observed among males aged under 18. The highest (36.8%) was seen among females aged between 45 and 64. The proportions for each segment are provided in Table 6.2 below.

Table 6.2: Percentage of population receiving anti-depressants by age and sex, 2020/21

Age Group	% Male	% Female	% Overall
Under 18	0.4	0.7	0.5
18 – 24	8.4	16.3	12.2
25 – 34	13.2	21.7	17.4
35 – 44	17.1	28.0	22.7
45 – 64	22.4	36.8	29.7
65 – 74	21.6	34.3	28.1
75 – 84	20.7	33.7	27.9
85+	23.4	35.5	31.2
<b>All Ages</b>	<b>13.8</b>	<b>23.6</b>	<b>18.8</b>

The level of dispensing also varied across different parts of Northern Ireland. Looking at Local Government Districts (LGDs), the proportion of the population receiving anti-depressants in 2020/21 was highest in Derry City & Strabane at 21.4%. It was closely followed by Belfast at 21.0%.

By contrast, anti-depressants were dispensed to 15.5% of the population of Mid Ulster and 16.6% of the population in Fermanagh & Omagh. A full breakdown of anti-depressant dispensing at LGD level is provided in table 6.3 below.

Table 6.3: Number of individuals receiving anti-depressants by LGD, 2020/21

Local Government District	Number of Individuals	% of total Population
Antrim & Newtownabbey	27,357	19.0
Ards & North Down	30,905	19.1
Armagh City, Banbridge & Craigavon	38,627	17.7
Belfast	72,164	21.0
Causeway Coast & Glens	26,647	18.4
Derry City & Strabane	32,392	21.4
Fermanagh & Omagh	19,551	16.6
Lisburn & Castlereagh	25,176	17.1
Mid & East Antrim	26,907	19.3
Mid Ulster	23,243	15.5
Newry, Mourne & Down	32,006	17.5
Unknown <sup>13</sup>	2,147	N/A
<b>Northern Ireland</b>	<b>357,122</b>	<b>18.8</b>

### 6.3 Diabetes medication and products

Diabetes medication and products were dispensed to 97,352 people in 2020/21, which was an increase of 2.3% on the previous year. Overall, 5.1% of Northern Ireland's population received diabetes medication and products during the year.

As shown in Table 6.4, males represented 55.5% of individuals who received diabetes medication and products. This meant that these medications were dispensed to 5.8% of the male population in 2020/21. The equivalent figure for females was 4.5%.

<sup>13</sup> Geographic information is not available for a small number of individuals due to errors and omissions in the address information on their prescriptions. They are included in the overall Northern Ireland figures and age/sex breakdowns.

Table 6.4: Individuals receiving diabetes medication & products by sex, 2020/21

Sex	Number of individuals	%
Male	54,070	55.5%
Female	43,282	44.5%
<b>Northern Ireland</b>	<b>97,352</b>	<b>100.0%</b>

A more detailed examination of dispensing activity reveals definite variations among different groups within the population. At one extreme, the proportion of individuals receiving diabetes medication and products is 0.4% among those aged under 18. At the other, these medicines are dispensed to 21.5% of males aged between 75 and 84.

Table 6.5 also shows that, after the age of 44, there is a significant rise in the number of males receiving diabetes medication and products compared with their female peers.

Table 6.5: Percentage of population receiving diabetes medication & products by age and sex, 2020/21

Age Group	% Male	% Female	% Overall
Under 18	0.4	0.4	0.4
18 – 24	0.9	1.3	1.1
25 – 34	1.2	2.8	2.0
35 – 44	2.5	2.9	2.7
45 – 64	8.5	5.4	6.9
65 – 74	17.3	10.6	13.9
75 – 84	21.5	13.7	17.2
85+	19.5	12.3	14.9
<b>All Ages</b>	<b>5.8</b>	<b>4.5</b>	<b>5.1</b>

There was also some local variation in terms of the proportion of the population receiving diabetes medication and products at LGD level. In 2020/21, Mid & East Antrim had the highest rate of dispensing at 5.7% of the population. At the other end of the scale, the equivalent figure for Mid Ulster was 4.6%. A breakdown of dispensing by LGD is provided in Table 6.6 on the following page.

Table 6.6: Number of individuals receiving diabetes medication & products by LGD, 2020/21

Local Government District	Number of Individuals	% of total Population
Antrim & Newtownabbey	7,605	5.3
Ards & North Down	8,911	5.5
Armagh City, Banbridge & Craigavon	10,817	5.0
Belfast	17,584	5.1
Causeway Coast & Glens	7,518	5.2
Derry City & Strabane	7,909	5.2
Fermanagh & Omagh	5,894	5.0
Lisburn & Castlereagh	7,064	4.8
Mid & East Antrim	7,913	5.7
Mid Ulster	6,870	4.6
Newry, Mourne & Down	8,707	4.8
Unknown	560	N/A
<b>Northern Ireland</b>	<b>97,352</b>	<b>5.1</b>

## 6.4 Opioid Analgesics

Opioid analgesics were dispensed to 100,155 people in 2020/21, which was a reduction of 4.1% compared with 2019/20. This equated to 5.3% of Northern Ireland's population.

As shown in Table 6.7 below, females accounted for 60.7% of individuals who received opioid analgesics. This meant that those medications were dispensed to 6.3% of the female population during 2020/21. The equivalent figure for males was 4.2%.

Table 6.7: Individuals receiving opioid analgesics by sex, 2020/21

Sex	Number of individuals	%
Male	39,354	39.3
Female	60,801	60.7
<b>Northern Ireland</b>	<b>100,155</b>	<b>100.0</b>

There was a clear link between the proportion of the population receiving opioid analgesics and age. These medications were dispensed to fewer than 10% of individuals in any group

under the age of 65. After this point, the level of dispensing rises to a maximum of 26.5% observed among females aged 85 and over. A detailed breakdown is provided in Table 6.8 below.

Table 6.8: Percentage of population receiving opioid analgesics by age and sex, 2020/21

Age Group	% Male	% Female	% Overall
Under 18	0.1	0.1	0.1
18 – 24	0.4	0.6	0.5
25 – 34	1.4	2.2	1.8
35 – 44	3.2	4.5	3.9
45 – 64	7.0	9.5	8.3
65 – 74	10.0	12.7	11.4
75 – 84	11.6	16.8	14.5
85+	17.2	26.5	23.2
<b>All Ages</b>	<b>4.2</b>	<b>6.3</b>	<b>5.3</b>

There was also some local variation in the proportion of the population receiving opioid analgesics at LGD level. In 2020/21, Ards & North Down had the highest proportion observed with 6.4% of its population receiving an opioid analgesic. By contrast, the equivalent figure for Mid Ulster was 4.0%.

Figures for opioid analgesics dispensing at LGD level are provided in Table 6.9 on the following page. Due to the apparent connection between this dispensing and age, it is likely that the differentials seen between individual LGD are influenced by local variations in population age structure.



Table 6.9: Number of individuals receiving opioid analgesics by LGD, 2020/21

Local Government District	Number of Individuals	% of total Population
Antrim & Newtownabbey	7,619	5.3
Ards & North Down	10,401	6.4
Armagh City, Banbridge & Craigavon	11,192	5.1
Belfast	20,142	5.9
Causeway Coast & Glens	6,959	4.8
Derry City & Strabane	8,336	5.5
Fermanagh & Omagh	5,549	4.7
Lisburn & Castlereagh	7,245	4.9
Mid & East Antrim	7,531	5.4
Mid Ulster	5,974	4.0
Newry, Mourne & Down	8,661	4.7
Unknown	546	N/A
<b>Northern Ireland</b>	<b>100,155</b>	<b>5.3</b>

# Additional Notes

## 1. Dispensing Contractors

There are three types of dispensing contractors featured in this report. These are:

### *Community Pharmacy –*

Community Pharmacies provide various healthcare services to local communities in Northern Ireland. Although the dispensing of prescriptions is often seen as the primary part of their role, they do provide a range of other services such as Health Promotion, Medicines Usage Reviews, Manage Your Medicines and a Minor Ailments service.

### *Dispensing Doctors –*

Dispensing doctors are general practitioners (GPs) who provide primary healthcare to patients who have difficulty getting access to a community pharmacy. Under current arrangements such patients can be put onto a dispensing patients list if they meet the following criteria:

- A patient lives more than five kilometres away from a community pharmacy; and
- The GP practice where a patient normally attends is more than one kilometre from a community pharmacy.

### *Appliance Supplier –*

Appliance suppliers are authorised to dispense pharmaceutical appliance devices such as Stoma appliances.

## 2. Prescriptions

Prescription forms or prescriptions are submitted on a monthly basis to the Business Services Organisation (BSO) for payment by community pharmacies, appliance contractors and dispensing doctors. They are prescribed by GPs and other non-medical prescribers such as Community Nurses, Supplementary Prescribers, Dentists and a

small proportion from Consultants working in the community.

In addition, prescriptions written in other parts of the UK but dispensed in Northern Ireland are also included. The data will include prescriptions that have been ordered on Stock Orders, Hospice Invoices and Pharmacy Vouchers.

Only prescriptions that are subsequently dispensed are included in the data – for example, if a patient does not take a prescription to the pharmacy for dispensing, then no information about that prescription is included in the dataset.

## 3. Prescription Items

A prescription item is a single supply of a medicine, dressing or appliance written on a prescription form.

If a prescription form includes three medicines it is counted as three prescription items. Item figures do not provide any indication of the length of treatment or quantity of medicine prescribed.

Patients with a long term condition usually get regular prescriptions.

It should also be noted that the Northern Ireland drug tariff includes the facility of instalment or Multiple Dispensing where the pharmacy supplies part of the total quantity of a prescribed medicine at set intervals (e.g. weekly or daily) as requested by the GP or other authorised prescriber. Regardless of this method of dispensing the prescription item still only counts as one item.

A similar dispensing practice is available in Scotland whilst the instalment dispensing of controlled drugs in England and Wales is facilitated through prescription items of lesser quantities being prescribed more frequently.

Further information on Multiple Dispensing in Northern Ireland can be found on page 9 of the latest version of the [NI Drug Tariff](#).

#### 4. Ingredient Cost

This is the basic cost of a drug as used in primary care. This is the cost at list price excluding VAT, i.e. the price listed in the national Drug Tariff or in standard price lists and is not necessarily the price that has been paid.

It does not take into account any contract prices or discounts, dispensing costs or fees, so the actual cost to the health service will be different.

In other parts of the UK the equivalent is called the Net Ingredient Cost (NIC) and is used in Prescription Services reports and other analyses, as it standardises prescribing costs nationally, and allows comparisons of data from different sources.

#### 5. British National Formulary (BNF)

From BNF Edition 70 onwards, the British National Formulary moved to a disease-based classification of drugs rather than a drug-based classification.

The Family Practitioner Services Payment System requires the drug-based classification to ensure the accurate reimbursement of drugs to community pharmacists. All statistics on BNF chapters are therefore based on pseudo BNF chapters as of Edition 69. This is consistent with the NHS Business Services Authority method of reporting.

#### 6. Patient Information

Patient information is linked to dispensing data when a prescription form has been successfully scanned. The captured patient Health and Care Number (HCN) is then used to link to patient registration records on the National Health Application and Infrastructure Services (NHAIS) system. Further

information on NHAIS data can be found [here](#).

In the past, BSO had experienced a reduction in scan rates resulting in around 25% of prescription items not having attributed patient information in 2017/18 and 2018/19.

However, this has recently improved and in 2020/21 almost 90% of prescription items had attributed patient information. This has meant that at most, this proportion of prescriptions will have a geographical area or patient profile assigned.

The historic reduction in scanning quality was widespread across Northern Ireland and not just isolated to any particular areas. Further information on scan rates by geographical location can be found in the [Background Quality Report](#).

#### 7. Population

NISRA population figures are used in this release.

The 2020 estimate was not available at the time of preparation. As a result, a 2018-based population projection for 2020 was used. All estimates used are published on NISRA website.

# Technical Notes

## Target Audience

The target audience for this publication has been defined as: the Department of Health, Chief Executives of HSC Board and Trusts in Northern Ireland, health professionals, academics, HSC Stakeholders, the media and the general public.

## Main usages

This publication contains official statistics on community pharmacy and general pharmaceutical dispensing for the most recent financial year (and earlier years where available on a comparable basis).

They can be used to monitor trends in general pharmaceutical service over time and across Northern Ireland.

The information can be used to support decision making, inform policy, provide advice to ministers, answer a wide range of Assembly Questions and Freedom of Information requests, for national and local press articles and, where appropriate, for international comparison.

## Data Source Information

The data has been primary sourced from the Family Practitioner Service (FPS) Pharmacy Payment System. Resident population data has been sourced from official NISRA demographic statistics.

The Pharmacy Payment System enables BSO to make payments to pharmaceutical contractors for dispensing prescription items that have been prescribed in primary care (e.g. by General Practitioner, Nurse Practitioner, Dentist, Podiatrist) as well as through the minor ailments scheme available in a number of pharmacies.

Further information on this process can be found [here](#) on the FPS website.

## Coverage

Data in this report are published by the financial year (1<sup>st</sup> April – 31<sup>st</sup> March) in which the dispensed prescriptions were reimbursed. Although the majority of prescriptions will have been reimbursed in the same month they were dispensed, there will be some that will lie outside this timeframe.

Such cases will include prescriptions submitted for payment at the end of the previous financial year and exclude some prescriptions submitted towards the end of this reporting year which was not submitted for payment by March 2021.

The data is based on prescriptions provided to the Family Practitioner Service (FPS) for reimbursement by community pharmacists, dispensing doctors and appliance suppliers. The information does not include prescribing in a secondary care or private setting for example medications received while in hospital.

Community Pharmacy counts are taken at 31st March for each financial year.

## Data Quality Summary

The Pharmacy Payment System is a business critical payment system which is subject to period audit. The data quality is assessed as very good based on the low percentage of claims which have to be adjusted following payment.

As an administrative data system, there will inevitably be some manual entry errors and, even for automated processes, there may be errors within the claims submitted by primary care contractors.

The extensive validation that occurs prior to payments being made, coupled with the consistency and variance checks carried out during the compilation of this publication means that the data provides a good representation of FPS activity for the years covered by the report.

Further information can be found in the [background data quality report](#) and the [FPS Quality Assurance of Administrative Data Report](#).

### **National/International comparisons**

This publication contains comparisons between Northern Ireland and other regions of the United Kingdom. The comparative data is available from the following sources:

#### **England**

Statistics on General Pharmaceutical Services:  
[General Pharmaceutical Services in England 2015/16 - 2019/20 | NHSBSA](#)

Prescription Cost Analysis:  
[Prescription Cost Analysis \(PCA\) data | NHSBSA](#)

#### **Wales**

Statistics on General Pharmaceutical Services:  
[Community pharmacy services: April 2019 to March 2020 | GOV.WALES](#)

Prescription Cost Analysis:  
[Prescription Cost Analysis - NHS Wales Shared Services Partnership](#)

#### **Scotland**

Statistics on General Pharmaceutical Services:  
[Community Pharmacy - Contractor Activity - Datasets - Scottish Health and Social Care Open Data \(nhs.scot\)](#)

Prescription Cost Analysis:  
[Public Health Scotland – Prescription Cost Analysis 2020 \(xlsx – 1MB\)](#)

# Publication Information

## Family Practitioner Services

Family Practitioner Services (FPS) is part of the BSO's Operations Directorate. It provides a range of essential services to Health and Social Care organisations, primary care contractors and patients.

FPS calculates payments to health professionals in the dental, pharmacy, general practice and ophthalmic sectors through Northern Ireland. It also maintains the central register of patients registered with GP practices in Northern Ireland, issuing medical cards and processing changes such as name, address and doctor.

It provides professional advice, support and information to customers and members of the public and maintains the pharmaceutical, dental and the Northern Ireland Primary Medical Performers lists. FPS also provides the call and recall services for breast, cervical and bowel cancer screening in Northern Ireland.

## About this publication

This report has been produced by independent statisticians within the FPS Information Unit. They are on secondment from the Northern Ireland Statistics and Research Agency (NISRA). This publication has been compiled in accordance with the Code of Practice for Statistics.

## Next edition

This publication is issued annually. It is expected that the next edition shall be published in June 2022. In the interim, quarterly tables are published separately [here](#). The quarterly figures are provisional until the annual publication for that year issues, at which point they are finalised. The release calendar for future statistical publications is available on the BSO website [here](#).

This statistical bulletin and others published by Information Unit within BSO are available to download from the [BSO Internet site](#)