

## **HEALTH AND WELLBEING BOARD**

**1 SEPTEMBER 2022**

### **PHARMACEUTICAL NEEDS ASSESSMENT 2022–2025**

Report from: James Williams, Director of Public Health

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#### **Summary**

The provision of NHS pharmacy services is a controlled market. If someone wants to provide NHS pharmaceutical services, they are required to apply to the NHS to be included on a pharmaceutical list and must prove they are able to meet a pharmaceutical need.

The National Health Service England (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 (SI 2013 No. 349) set out the system for market entry. Under these Regulations, Health and Wellbeing Boards are responsible for publishing a Pharmaceutical Needs Assessment (PNA). The PNA tells us what pharmaceutical services are currently available and where we are likely to need changes in the future because of demographic or other changes.

NHS England (the national body responsible for commissioning pharmaceutical services) relies on PNAs to inform decision making, specifically regarding whether existing pharmaceutical services meet local need. NHS England also uses the PNA to assess applications from applicants who want to modify existing services or deliver new pharmaceutical services within Medway.

This paper presents the refreshed PNA for Medway for 2022–2025. This report was considered by the Health and Adult Social Care Overview and Scrutiny Committee on 16 August 2022. The comments of this Committee are set out in section 3 of the report.

#### **1. Budget and policy framework**

- 1.1. The Health Act 2009 introduced a legal requirement for all Primary Care Trusts (PCTs) to publish a pharmaceutical needs assessment (PNA) by 1 February 2011. The Health and Social Care Act 2012 subsequently transferred the responsibility to Health and Wellbeing Boards. The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 set out the legislative basis for developing and updating PNAs and can

be found at: <http://www.dh.gov.uk/health/2013/02/pharmaceutical-services-regulations/>.

## 2. Background

- 2.1. Each Health and Wellbeing Board was required to produce and publish its first pharmaceutical needs assessment in April 2015, with a requirement that a revised assessment must then be published within three years, or sooner in response to significant changes to the availability of pharmaceutical services. Medway published its PNAs in 2015 and 2018.
- 2.2. In May 2021, the Department of Health and Social Care (DHSC) initially determined that the requirement to publish renewed PNAs would be suspended for a year (to April 2022) in order to reduce unnecessary extra pressure on local authorities, Local Pharmaceutical Committees, pharmacy contractors and other stakeholders during the response to the COVID-19 pandemic.
- 2.3. Further to this, due to ongoing pressures across all sectors in managing the pandemic response, the requirement to publish renewed PNAs was suspended further until October 2022.
- 2.4. Therefore, in light of the announcement and following on from the publication of the PNA for Medway March 2018, an updated PNA has been prepared for publication on 1 October 2022.
- 2.5. A steering group guided the production of the PNA. The steering group included representatives from the Local Pharmaceutical Committee, Local Medical Committee, Kent and Medway CCG, Medway Council, and the Chairman of the Health and Wellbeing Board.
- 2.6. The PNA is a comprehensive assessment of the current and future pharmaceutical needs of the local population. It describes:
  - The health needs of the population
  - Current pharmaceutical services provision and any gaps in that provision
  - Potential new services to meet health needs and help achieve the objectives of the *Joint Health and Wellbeing Strategy*
- 2.7. It takes account of the joint strategic needs assessment (JSNA) and is a strategic commissioning document which will be used primarily by NHS England in its determination as to whether to approve applications to join the pharmaceutical list under the *NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013*.
- 2.8. There is a statutory requirement to consult certain organisations and members of the public for 60 days to ensure that the PNA accurately represents the need and provision of pharmaceutical services in Medway. The consultation took place from 20 April 2022 to 20 June 2022.

2.9. The PNA will also be used to:

- Ensure that decisions about applications for market entry for pharmaceutical services are based on robust and relevant information;
- Inform commissioning plans about pharmaceutical services that could be provided by community pharmacists and other providers to meet local need—these services can be commissioned by local authorities, NHS England and Integrated Care Boards;
- Support commissioning of high-quality pharmaceutical services including locally-enhanced services;
- Ensure that pharmaceutical and medicines optimisation services are commissioned to reflect the health needs and ambitions outlined within the Joint Health and Wellbeing Strategy; and
- Facilitate opportunities for pharmacists to make a significant contribution to the health of the population of Medway.

### 3. Health and Adult Social Care Overview and Scrutiny Committee - 16 August 2022

3.1. Members considered a report on the refreshed Pharmaceutical Needs Assessment for Medway for 2022–2025.

3.2. The following issues were discussed:

3.2.1. **Smaller pharmacies** – concern was expressed that Medway did not have many large pharmacies and too much responsibility was being placed on smaller pharmacies, particularly where there was only one pharmacist employed. Officers acknowledged that this was an important point but advised it was not covered by the Pharmaceutical Needs Assessment (PNA) and was a quality issue for NHS England. The PNA described the needs of the population and set out the challenges to the system and the risks, which NHS England, as the Commissioner, then had to take into account and decide if there were any gaps.

3.2.2. **Travel times** - Members were advised that most people in urban areas of Medway lived within a 20-minute walk of a pharmacy, with people in rural areas being within a 20-minute drive. The point was made that not everyone had access to a car and being able to get to a pharmacy in rural areas by bus during opening hours was an issue. Members were advised the PNA included information about access to pharmacies by public transport (both morning weekdays and evening weekdays)

3.2.3. **Urgent prescriptions** – how long it would take someone to receive their prescription by post or delivery driver if they were unable to travel to collect it was questioned. Officers responded that a section on this would be added to the PNA. MedOCC provided out of hours prescription services. Pharmacies were required to make arrangements for the provision of urgent prescriptions, which would be done in consultation with the prescribing physician. The Council could not stipulate that pharmacies needed to put in place arrangements for urgent medical deliveries but the PNA allowed areas of

concern to be highlighted. NHS England also needed to consider how to provide the same level of access to prescriptions where people were unable to travel to a pharmacy.

3.2.4. **E-prescriptions** – a point was made that the ability to use e-prescription services was now used regularly by many people and this was not reflected in the PNA, which focused on the opening hours of physical pharmacies.

3.2.5. **Vaccination capacity** – in response to a query about the extent to which the PNA assessed vaccination capacity and whether it would future proof the ability to vaccinate at short notice, the Director of Public Health commented that the management of the vaccination programme would be on a contractual basis which pharmacists could decide to engage with. The capacity and capability of a pharmacy’s workforce to take on vaccination work was also an issue. The Integrated Care Strategy was likely to place a greater emphasis on pharmacies providing a wider range of services.

3.2.6. **Sustainability of pharmacies** – whether pharmacies needed to take on more clinical work to be sustainable and what the appropriate balance was between the latter and dispensing prescriptions was questioned. The Director of Public Health commented it was not possible to specify what this balance should be given the variety of pharmacies. There was a school of pharmacy in Medway which presented an opportunity to recruit more pharmacists in Medway. Whether the Integrated Care Board had a role in creating more sustainable pharmacies and in training pharmacists was queried. The Director of Public Health advised that, in liaison with NHS commissioners, in relation to the expanding role of pharmacies and training were the responsibility of the National Pharmaceutical Association and Local Pharmaceutical Committees. He suggested the Committee may want to discuss the issue of the sustainability of pharmacies and the challenges they were facing with the Local Pharmaceutical Committee.

3.3. The Committee agreed to note the report and that a discussion with the Local Pharmaceutical Committee to discuss local provision, challenges and sustainability take place at a future meeting.

3.4. Following the discussion at the Health and Adult Social Care Overview and Scrutiny Committee, the PNA has been updated to reflect the concerns around urgent prescriptions.

#### 4. Risk management

Risk	Description	Action to avoid or mitigate risk	Risk rating
Future legal challenge	If NHS England receives a legal challenge to the services they commission based on the	The process met the requirements of the legislation and ensured that the PNA is a robust document.	D3

Risk	Description	Action to avoid or mitigate risk	Risk rating
	PNA, the local authority could also be part of that legal challenge.		
Late delivery of the PNA	The PNA is due to be refreshed by October 2022. This implies a reasonably tight timeline, and the deadline could be missed if there are difficulties during production.	An experienced team, including a specialist pharmacist, has been contracted to support the update of the PNA. Careful project management is being used to monitor progress.	D3

## 5. Consultation

- 5.1. Insight from members of the public and from pharmacists was sought in the preparation of the draft PNA. A formal 60-day consultation on the completed draft PNA took place from 20 April 2022 to 20 June 2022 and a summary of feedback and changes resulting from the consultation have been included in the final version of the PNA set out at Appendix A to the report.

## 6. Financial implications

- 6.1. There are no financial implications to Medway Council arising directly from the recommendations of this report.

## 7. Legal implications

- 7.1. Local authorities through their Health and Wellbeing Boards (HWBs) are under a statutory duty to develop and update their PNA every 3 years. NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 and the NHS Act 2006 as amended by the Health and Social Care Act 2012, set out the requirements to develop and update PNAs.
- 7.2. Medway Council's last published PNA covered the period 2015 to 2018 and was due to be updated in April 2018. Due to the COVID-19 pandemic, in order to relieve pressure on local authorities, NHS bodies and pharmaceutical services, the DHSC suspended the requirement for PNAs to be updated, initially to April 2022 and subsequently to October 2022. Therefore, Medway Council is required to publish its updated PNA by October 2022 to avoid breaching its statutory duty.

## 8. Recommendations

- 8.1. The Health and Wellbeing Board is asked to note the comments of the Health and Adult Social Care Overview and Scrutiny Committee set out at section 3 of the report and approve the Pharmaceutical Needs Assessment set out at Appendix A to the report for publication.

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### Appendices

Appendix A - Pharmaceutical Needs Assessment

### Background papers

None