

Medway Health and Wellbeing Board

4 September 2025

Pharmaceutical Needs Assessment 2025-2028

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Summary

Health and Wellbeing Boards are under a statutory duty to develop and update their Pharmaceutical Needs Assessment (PNA) every three 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. The previous PNA for Medway was published in October 2022 and an updated PNA must be published by 1 October 2025 – it is scheduled for consideration and approval at this meeting of the Health and Wellbeing Board.

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. 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. 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 report presents the refreshed PNA for Medway for 2025–2028. This report was considered by the Health and Adult Social Care Overview and Scrutiny Committee on 20 August 2025. The comments of this Committee are set out in section 4 of the report.

1. Recommendation

1.1. The Health and Wellbeing Board is asked to approve the Pharmaceutical Needs Assessment 2025-2028.

2. Budget and policy framework

2.1. 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 Act (the “2006” Act), amended by the Health and Social Care Act 2012, sets out the requirements for Health & Wellbeing Boards to develop and update PNAs and gives the Department of Health (DH) powers to make Regulations.

2.2. 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>.

2.3. The budget for the PNA will be funded from the Public Health ring fenced grant.

3. Background

3.1. Every Health and Wellbeing Board (HWB) in England has a statutory responsibility to publish every three years, and keep up to date, a statement of the need for pharmaceutical services in its area, otherwise referred to as a pharmaceutical needs assessment (PNA). Initial assessments were published in April 2015, and subsequent assessments in 2018 and 2022. The 2022 assessment was delayed by 1.5 years due to the Covid-19 pandemic. The next PNA is due to be published by 1 October 2025.

3.2. If a pharmacy wants to provide pharmaceutical services, they are required to apply to NHS England to be included in the pharmaceutical list for the Health and Wellbeing Board’s area in which they wish to have premises and NHS England refers to the PNA to inform its decision. Their application must offer to meet a need that is set out in the Health and Wellbeing Board’s PNA, or to secure improvements, or better access similarly identified in the PNA.

3.3. It was agreed by Public Health DMT that this Needs Assessment be undertaken independently and should therefore be commissioned out. A specialist pharmacist provider has been identified through a competitive tender process. The new provider will update and refresh the current Medway Council PNA within stipulated timescales required by the Board. The final PNA will comply with the latest relevant statutory regulations enabling the Board to fulfil its legal obligations as set out in the Health and Social Care Act 2012.

3.4. A PNA steering group was formed and guided the production of the PNA. The steering group included representatives from the Local Pharmaceutical Committee, Local Medical Committee, Kent and Medway Integrated Care Board, Medway Council (DPH/Consultant), and the Chair of the Health and Wellbeing Board.

3.5. 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.
- 3.6. 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.
- 3.7. 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 7 May 2025 to 6 July 2025.
- 3.8. The PNA will also be used to:
- 3.8.1. Ensure that decisions about applications for market entry for pharmaceutical services are based on robust and relevant information.
 - 3.8.2. 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.
 - 3.8.3. Support commissioning of high-quality pharmaceutical services including locally enhanced services.
 - 3.8.4. Ensure that pharmaceutical and medicines optimisation services are commissioned to reflect the health needs and ambitions outlined within the Joint Health and Wellbeing Strategy.
 - 3.8.5. Facilitate opportunities for pharmacists to make a significant contribution to the health of the population of Medway.

4. Health and Adult Social Care Overview and Scrutiny Committee – 20 August 2025

- 4.1. The Committee considered a report on the refreshed PNA for Medway for 2025-2028 at its meeting on 20 August 2025 and the draft minutes from the discussion is set out below.
- 4.2. The Director of Public Health introduced the report which presented the refreshed Pharmaceutical Needs Assessment (PNA) for Medway for 2025-2028. He added that a representative from the Local Pharmaceutical Council (LPC) was also in attendance to answer questions.
- 4.3. Members then raised a number of questions and comments, which included:
- 4.3.1. **Outsourcing PNA development** – in response to a question the DPH

confirmed that outsourcing development of the PNA was normal practice across local authorities, particularly due to the strict guidelines and specialist advice and knowledge that was needed to undertake a PNA.

- 4.3.2 **Balancing financial viability and community need** – in response to a question about how the balance was struck between meeting local population needs and ensuring financial viability of a pharmacy, officers recognised this was a real challenge and added that having high numbers of pharmacies in close proximity as much more difficult due to resultant market instability. The costs in operating pharmaceutical provision was much higher in many cases than the profits made to keep a pharmacy financially viable and although some clinical services were being moved into pharmaceutical settings, there had not been an increase in funding for dispensing items.
- 4.3.3. **Provision of services** – the LPC representative explained that the PNA referred to core pharmaceutical services only. Advanced services, such as blood pressure checks or smoking cessation support was something pharmacies could sign up to. There had been good uptake of such services in Medway but it was not mandated for pharmacies to provide these additional, valuable services.
- 4.3.4. **Managing stock issues** – the LPC representative explained that work was ongoing with the ICB to require GPs to prescribe generically to make sourcing medication for patients easier for pharmacies.
- 4.3.5. **Addressing poor performance** – comment was made that the PNA did not highlight where there was poor performance within a pharmacy, which in turn was creating a gap on provision. Nor did it address provision levels outside of core hours. The Director of Public Health advised the Committee that the PNA's remit did not cover the quality of pharmaceutical services. The LPC rep explained that the PNA was based on core hours provision. He added that where poor performance was an issue, regular meetings took place with the Integrated Care Board (ICB), as the commissioner, with power to remove a pharmacy from the list where necessary. Equally, providing out of hours service was often unviable for pharmacies due to low demand balanced against staffing costs.
- 4.3.6. **Inconsistency in provision** – reference was made to the inconsistency in pharmaceutical services, highlighting the difficulties in provision levels on the peninsula and the lack of needle exchange services in Medway, despite it being an area with high numbers of drug related deaths. Equally reference was made to the inconsistency in the provision of services across pharmacies of services such as sexual health contraception and smoking cessation support. In response, officers reiterated the issues around financial stability and the lack of interest currently in setting up a pharmacy on the peninsula but as the

population in that area increases, as will the viability for additional pharmaceutical services.

4.3.7. **Fragility of the market** – concern was raised that the PNA recognised no gaps in service provision, yet many were struggling to remain open. The Committee were advised that pharmacy service provision across Medway was monitored on a monthly basis and if any changes impacted to expose a gap in provision, then the Health and Wellbeing Board would be asked to publish a supplementary statement to identify the gap in provision. In addition, the Public Health Team were developing an interactive map to keep updated on provision across Medway.

4.3.8. **Inaccurate reflection** – The Committee were concerned that, due to the limitations of the PNA and how it is developed, it did not reflect the true picture of pharmaceutical provision in Medway and gave the impression that service levels and coverage was far stronger than the reality, and that it did not draw attention to the real risks of some pharmacies being close to closure.

4.3.9. **Dashboard of key findings** – it was suggested that in future, to help the general public understand the document and the key headlines, a one page dashboard should be produced so the highlights could be seen at a quick glance.

4.4. The Committee noted the report and recommended it to the Health and Wellbeing Board for approval.

5. Advice and analysis

5.1. All necessary steps have been followed in the development of the PNA including governance, analysis of health and demographic data, public and contractor engagement, pharmaceutical services information, analysis of provision, review and sign off. Consultation, and final review and sign off (of which this is part of).

5.2. The provision of access to pharmaceutical services differs across Medway, however, within the context of scope of the PNA, there are no defined gaps in this provision.

5.3. The provision of pharmaceutical services across Medway will be reviewed periodically between now and the next PNA to ensure provision of pharmaceutical services across Medway as the population changes.

6. Risk management

6.1. Risk management is an integral part of good governance. The Council has a responsibility to identify and manage threats and risks to achieve its strategic objectives and enhance the value of services it provides to the community.

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 PNA, the local authority could also be part of that legal challenge.	The process met the requirements of the legislation and ensured that the PNA is a robust document.	DIII
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	DIII

For risk rating, please refer to the following table (please **retain** table in final report):

Likelihood	Impact:
A Very likely B Likely C Unlikely D Rare	I Catastrophic II Major III Moderate IV Minor

7. Consultation

- 7.1. 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 7 May 2025 to 6 July 2025 and a summary of feedback and changes resulting from the consultation have been included in the drafted final version of the PNA in Appendix 1. Members of both the Medway Health and Wellbeing Board and the Health and Adult Social Care Overview and Scrutiny Committee were invited to comment during the 60-day consultation period.
- 7.2. Please note that the consultation comments and responses were reviewed at the most recent steering group meeting.

8. Climate change implications

- 8.1. Medway Council is committed to achieving net zero carbon by 2050. To achieve this, the Council has published its own Climate Change Action Plan. However, reducing emissions is not limited to the Council and as part of Scope 3 (third party) emissions, the Council encourages all suppliers to take a similar approach. The commissioned provider for the new PNA has a Climate Change Action Plan.

9. Financial implications

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

10. Legal implications

- 10.1. 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.
- 10.2. Medway Council's last published PNA covered the period 2022 to 2025. Medway Council is required to publish its updated PNA by October 2025 to avoid breaching its statutory duty.

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Appendices

Appendix 1 – Pharmaceutical Needs Assessment

Background papers

None