

SUNDERLAND HEALTH AND WELLBEING BOARD

23 January 2015

SUNDERLAND PHARMACEUTICAL NEEDS ASSESSMENT (PNA)

Report of the Acting Director of Public Health

1 Purpose

- 1.1 The purpose of this report is to provide information to the Health and Wellbeing Board about:
- its statutory role in relation to pharmaceutical needs assessment;
 - the work that has been undertaken to produce an updated Pharmaceutical Needs Assessment (PNA) for Sunderland in line with this statutory role; and
 - the local statutorily required consultation running from 9th January 2015 until 10th March 2015.
- 1.2 The Health and Wellbeing Board has the opportunity to comment on the consultation draft of the Pharmaceutical Needs Assessment (PNA) for Sunderland. The Board is asked to consider and provide broad agreement for the conclusions and recommendations set out in the consultation draft PNA.
- 1.3 The document will be revised in the light of comments received from the Board and the findings of the consultation. A final version of the Pharmaceutical Needs Assessment (PNA) for Sunderland document will be brought back to the Board on 20th March 2015 for final approval and sign off.

2. Statutory role

- 2.1 The first PNAs were produced by Primary Care Trusts in 2011. The duty to carry out pharmaceutical needs assessment transferred to Health and Wellbeing Boards under the Health and Social Care Act 2012; this duty came into effect on 1st April 2013.
- 2.2 The process for pharmaceutical needs assessment is currently guided by *The NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013*. These state that an updated pharmaceutical needs assessment (PNA) must be agreed and published by 1 April 2015.
- 2.3 A revised assessment must be published within three years of publication of this assessment, or sooner in response to significant changes to the availability of pharmaceutical services, provided that this would not be a disproportionate response to those changes.
- 2.4 The Health and Wellbeing Board is required to produce the PNA as part of its broader responsibility for developing a shared understanding of the current

and potential future health needs of the City's population. The PNA is an integral part of the joint strategic needs assessment (JSNA) and is aligned to the Joint Health and Wellbeing Strategy.

3. What is a PNA used for?

- 3.1 The Health and Wellbeing Board is not responsible for deciding how many pharmacies there should be or where they should be sited. NHS England, through its Area Team, will use the PNA document to decide whether additional pharmacies are needed to fill any gaps in essential services identified. In doing this, NHS England will need to balance current provision with considerations of the free market. They need to ensure that local community pharmacies are in locations which best meet the needs of and are accessible to residents of Sunderland, but are also commercially viable.
- 3.2 The primary purpose of the PNA is to ensure that decisions made by NHS England about applications for new pharmacies are based on robust and relevant information. However, it will also be used to:
- help commissioners to commission services from community pharmacists to meet local need;
 - support commissioning of high quality pharmaceutical services;
 - ensure that community pharmacy services are commissioned to reflect the health needs identified in the JSNA and the ambitions set out in the Joint Health and Wellbeing Strategy; and
 - facilitate opportunities for pharmacists to make a significant contribution to the health of the population of Sunderland.
- 3.3 Decisions on applications to open new premises may be appealed by certain persons to the NHS Litigation Authority's Family Health Services Appeal Unit (FHSAU), and may also be challenged via the courts. The use of PNAs for the purpose of determining applications for new premises is still relatively new. It is therefore expected that many decisions made by the NHS England will be appealed and that eventually there will be judicial reviews of decisions made by the FHSAU. It is therefore vitally important that PNAs comply with the requirements of the regulations, due process is followed in their development and that they are kept up-to-date.
- 3.4 A Pharmaceutical Needs assessment (PNA) describes the health needs of the population and the services delivered by community pharmacies, either which are already in place, or which could be commissioned to meet identified health needs.
- 3.5 Currently services are commissioned from community pharmacies by NHS England, the public health team of Sunderland City Council and Sunderland Clinical Commissioning Group. These may be:
- **Essential Services:** services all community pharmacies are required to provide;

- **Advanced Services:** services to support patients with safe and effective use of medicines or appliances that all community pharmacies may choose to provide as long as they meet the requirements set out in the directions; or
- **Enhanced Services/Locally Commissioned Services:** services that can be commissioned locally in response to identified needs.

3.6 The PNA maps health needs and current services to make sure there are no gaps in essential services in order that the Health and Wellbeing Board can be assured that the City's residents have good access to community pharmacy services.

4. PNA process

- 4.1 The work was supported by a collaborative steering group with representation, advice and support from the public health team at Sunderland City Council, Sunderland CCG, Sunderland Local Pharmaceutical Committee and a representative from the Medicines Optimisation Team at the North of England Commissioning Support (NECS) Unit.
- 4.2 The steering group made an assessment of needs based on the JSNA and additional information collected as part of the PNA process. In making this assessment, there was a need to "have regard to the different needs of different localities within the area". In accordance with the regulation, the collaborative steering group considered how to assess these different needs, and concluded that the most appropriate means of dividing the Sunderland area was to adopt the five locality areas used by both Sunderland City Council and Sunderland Clinical Commissioning Group.
- 4.3 The steering group also made an assessment of the current services available from community pharmacies in Sunderland. Information about opening hours was collected, and data was collected about the services which are currently commissioned.
- 4.4 During November and December 2014 a questionnaire survey was used to gather views about local pharmacy services from the public and a range of agencies and groups. The questionnaire was made available through the consultation calendar on the Sunderland Partnership website and also through paper versions of the same questionnaire distributed at a range of engagement events over the same period.
- 4.5 A questionnaire for community pharmacies was made available on-line during December 2014. This questionnaire gathered information on facilities which are available in community pharmacies, the number of clients accessing commissioned services, and any non-commissioned services which pharmacies currently provide, or would be willing to provide if they were commissioned. The questionnaire was available for a relatively short period of time and at a time when community pharmacies are particularly busy. At present, 31 out of a possible 67 (46.2%) responses have been received and so collection of this data will continue into the consultation period with a view

to improving the response rate. Figures will be adjusted accordingly in the final PNA document.

- 4.6 Information was also gathered about services provided in neighbouring areas which can be accessed by residents of Sunderland, and therefore provide a more complete picture of any potential gaps in service provision.

5. Consultation

- 5.1 The regulations require the Health and Wellbeing Board to consult for a minimum of 60 days with the following statutory consultees about the contents of the pharmaceutical needs assessment it is making:

- the Local Pharmaceutical Committee;
- the Local Medical Committee
- all those currently on the pharmaceutical list in the City;
- HealthWatch Sunderland, and through them with any other patient, consumer or community groups with an interest in the issue;
- all NHS foundation trusts providing services in Sunderland;
- NHS England; and
- Health and Wellbeing Boards in South Tyneside, Gateshead and County Durham.

- 5.2 A draft document for consultation has been prepared and is included with this paper. This was published on 9th January 2015 and is available at: http://sunderland-consult.objective.co.uk/portal/chief_executives_1/pna_stat_consultation.

The statutory consultees have been made aware of the consultation directly and provided with the link to the document and an on-line consultation questionnaire. Responses from a wide range of agencies and individuals are encouraged and are welcome.

- 5.3 The statutory consultation period of 60 days will run from 9th January 2015 until 10th March 2015. Following the consultation period, the draft document will be updated to reflect any new information relevant to the pharmaceutical needs assessment.

- 5.4 A final version of the Pharmaceutical Needs Assessment (PNA) for Sunderland document will be brought back to the Board on 20th March 2015 for final approval and sign off. Under the regulation this must be published by 1st April 2015.

6. Key findings

- 6.1 There are 67 pharmacies in Sunderland, located primarily in areas of higher population density and in or near to areas with the highest levels of deprivation. Sunderland is well serviced by community pharmacies, having a greater number of pharmacies per 100,000 population than the England average. There are five 100 hour pharmacies out of a total of 67 pharmacies in Sunderland which provide extended and out of hours cover for

pharmaceutical services across the city; all five open on both Saturdays and Sundays. In total, 38 pharmacies open on Saturdays and nine pharmacies open on Sundays, responding to the needs of the local population.

- 6.2 There is good provision of advanced services that seek to improve the safe and effective use of medicines. Additionally, a range of locally commissioned services are currently being commissioned either totally or in part from community pharmacies. When pharmacies provision is considered alongside that of other service providers, it is considered that provision of existing locally commissioned services across Sunderland is adequate and meets identified health needs. For some services, access and equity of provision could be improved and other community pharmacies would be willing to provide these services if commissioned.
- 6.3 Community pharmacies make a valuable contribution to the objectives of the Joint Health & Wellbeing Strategy and engagement work shows that people value the services provided by their local community pharmacy.
- 6.4 Possible future roles for community pharmacy to contribute to the objectives of the Joint Health and Wellbeing Strategy have been outlined.

7. Recommendations

- 7.1 The Board is asked to note its statutory role in relation to pharmaceutical needs assessment, and to note the work that has been undertaken to produce an updated Pharmaceutical Needs Assessment (PNA) for Sunderland and commence the statutory consultation in line with this statutory role.
- 7.2 The Board is asked to consider and provide broad agreement for the following conclusions:
 - Sunderland has an adequate number of pharmacies to meet the needs of patients who require prescriptions dispensed.
 - There is adequate provision of essential NHS pharmaceutical services across most of Sunderland, but [the Board] recognises gaps in service in the Coalfields area on Sundays and Bank Holidays.
 - The existing 100 hour pharmacies are essential to meet the needs of patients by extending access to pharmaceutical services outside core hours when other pharmacies are closed.
 - The level of planned development is unlikely to require new pharmacy contracts to be issued for the areas of development, due to satisfactory cover from already existing pharmacies.
 - There is adequate provision of existing locally commissioned services across Sunderland, although access and equity of provision could be improved for some services. Other community pharmacies would be willing to provide these services if commissioned.
 - Community pharmacy already makes a significant contribution to the delivery of the Joint Health and Wellbeing Strategy.

7.3 The Board is asked to consider and provide broad agreement for the following recommendations:

- Commissioners take cross border issues into account and consult with relevant stakeholders when they are reviewing, commissioning or decommissioning services, to avoid or mitigate against creating inequity of provision for the local population.
- Commissioners should consider the opportunities afforded by community pharmacy enhanced services that focus on the safe and effective use of medicines and support for self-care, within the context of the current financial constraints for the health economy.
- Patterns of provision may need to be reviewed as the NHS moves towards “7 days a week” working.
- With regard to locally commissioned services, the public health team will work with the CCG to ensure that services are commissioned to meet local health needs and that any changes would serve to improve equity, access and choice.

8. References

1. Statutory Instrument 2013 No 349. The NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. The Stationery Office.
2. The Pharmaceutical Services (Advanced and Enhanced Services) (England) Directions 2013. The Stationery Office.

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