

**SUNDERLAND HEALTH AND WELLBEING BOARD**

**19 March 2021**

**FUTURE ARRANGEMENTS FOR SUNDERLAND JOINT STRATEGIC NEEDS ASSESSMENT (JSNA) AND PHARMACEUTICAL NEEDS ASSESSMENT (PNA)**

**Report of the Executive Director Public Health & Integrated Commissioning**

**1.0 Purpose of the Report**

1.1 The purpose of this report is to:

- Establish the Joint Strategic Needs Assessment (JSNA) as central to planning, decision making and resource allocation;
- Set out a process for JSNA and PNA development and management;
- Recommend a rolling programme of JSNA refresh with a maximum review date of 3 years;
- Support the necessary programme of work to fulfil this duty; and
- Remind the Health and Wellbeing Board (HWB) of its statutory duty to undertake a PNA and the requirement to produce an updated and approved PNA for Sunderland for publication by 1<sup>st</sup> April 2022.

1.2 Local authorities and Clinical Commissioning Groups have equal and joint duties to produce JSNAs and Joint Health and Wellbeing Strategies (JHWSs) through the HWB.

1.3 The HWB has previously delegated leadership for activities relating to the PNA to the Director of Public Health.

**2.0 Background**

2.1 This paper sets out a reviewed approach to the JSNA. This will maximise co-production, use innovative and creative ways to understand local need and tackle health inequalities, taking a life course approach, in line with *The Marmot Review*. The JSNA will be user friendly and communicated effectively to act as the overarching primary evidence base for the Board's priorities and all partners' / partnership priorities.

2.2 The development of a JSNA work programme will support the HWB in discharging its duty to produce a JSNA and PNA. It will increase the Board's visibility of the JSNA sections to be developed during the time period of each work programme and it will enable relevant commissioners and providers to plan to release the capacity required to develop JSNA content and scheduled PNA refreshes.

2.3 JSNA is the process by which Sunderland City Council and Sunderland CCG, working in collaboration with partners and the wider community, identify the

health and wellbeing needs of the local population. It provides an insight into current and future health, wellbeing and daily living needs of local people and informs the commissioning of services and interventions, underpinning overall spending and activity decisions. It supports a Health in All Policies approach, and will be at the heart of strategic priority development, aiming to improve health and wellbeing outcomes and reduce inequalities. The assessment includes consideration of deprivation, behavioural risk factors, disease and disability, major causes of mortality and the impact on life expectancy. Data and intelligence from the JSNA inform the PNA.

- 2.4 The PNA process was introduced to define the pharmaceutical needs in a specific area, for use by NHS England in determining entry onto the pharmaceutical list to ensure the adequate and appropriate provision of NHS pharmaceutical services in England. It can 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.
- 2.5 A person who wishes to provide NHS pharmaceutical services must apply to NHS England proving they are able to meet a pharmaceutical need or improve access as set out in the relevant PNA. There are exceptions to this, such as applications to provide NHS pharmaceutical services on a distance-selling basis.
- 2.6 The HWB is not responsible for deciding how many pharmacies there should be or where they should be sited. NHS England will use the PNA document to make such decisions. In doing this, NHS England will need to balance population needs and available financial resources with current provision and considerations of the free market.

### **3.0 The statutory role of HWB regarding JSNA**

- 3.1 The development of a JSNA is a statutory requirement. Local authorities and Clinical Commissioning Groups have equal and joint duties to produce JSNAs and JHWSs through the HWB. JSNA is not an end in itself, but is a continuous process of strategic assessment to support the development of local evidence-based priorities for commissioning which will improve the public's health and reduce inequalities.

## **4.0 Arrangements for delivering the JSNA**

### **4.1 The JSNA process will involve the following steps:**

- Establish a JSNA Steering Group to oversee the process;
- Agree the content of the JSNA and the associated chapters;
- Develop a workplan to include identifying lead authors, reporting arrangements and timescales;
- Work collaboratively with partners, undertaking engagement to understand views and needs;
- Work with partners to share intelligence, including the data repository workstream at the Council. Identify supporting data sharing arrangements and agreements which may be required;
- Ensure the JSNA is easily accessible and user-friendly for a wide audience; and
- Seek endorsement of the draft JSNA from the JSNA Steering Group.

### **4.2 The JSNA review process will be as follows:**

- The overarching JSNA summary will be taken to HWB on an annual basis;
- The requirement to update a particular JSNA chapter will depend on specific triggers such as population changes, or contract changes, but there is an expectation that the maximum period for review will be 3 years;
- The lead author and contributors will keep abreast of emerging guidance and the evidence base, which may require a refresh or full update of a JSNA. The lead author will update or nominate a lead for updating relevant parts; and
- The lead author will review how the previous JSNA has made an impact.

## **5.0 The statutory role of the HWB regarding the PNA**

- 5.1 The duty to carry out the PNA transferred to HWBs under the Health and Social Care Act 2012; this duty came into effect on 1<sup>st</sup> April 2013. The process is guided by *The NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013* and any subsequent updates or amendments. These state that HWBs were to agree and publish their first PNA by 1 April 2015 and then publish a revised assessment within three years of publication of this assessment, or sooner in response to significant changes to the availability of pharmaceutical services.
- 5.2 The HWB 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 JSNA and is aligned to the JHWS.
- 5.3 *The National Health Service (Pharmaceutical Services, Charges and Prescribing) (Amendment) Regulations 2016* includes provisions to allow mergers or consolidations of closely located, community pharmacies. This

allows two pharmacies to make an application to merge and provide services from one of the two current premises. HWBs have two statutory duties in relation to this:

(i) When NHS England notifies a HWB about an application to consolidate two pharmacies, the HWB must make a statement or representation back to NHS England within 45 days stating whether the consolidation would or would not create a gap in pharmaceutical services provision. NHS England will then convene a panel to consider the application to consolidate the two pharmacies, taking into account the representation made by the HWB.

(ii) Once NHS England has made a determination on the application to consolidate two pharmacies, it will inform the HWB. Where a Pharmacy's premises are removed from the pharmaceutical list as a consequence of granting a consolidation application and if, in the opinion of the HWB, the removal does not create a gap in pharmaceutical services provision that could be met by a routine application then the HWB must:

- Publish a supplementary statement saying that removal of the pharmacy which is to close from the pharmaceutical list will not create a gap in pharmaceutical services; and
- Update the map of premises where pharmaceutical services are provided.

A supplementary statement forms part of the PNA and is a statement of relevant changes since the PNA was published, which may affect an application for a new pharmacy.

- 5.4 In May 2020, the Department of Health and Social Care announced that the requirement to publish renewed PNAs would be suspended by a year. This was in recognition of the fact that most resources had been diverted to the COVID-19 pandemic response, and therefore suspension for one year would reduce pressure on local authorities and Local Pharmaceutical Committees. HWBs would still retain the ability to issue supplementary statements to respond to local changes and pharmaceutical needs during this time. The DHSC has stated that the NHS Pharmaceutical and Local Pharmaceutical Services Regulations 2013 will be updated to reflect this derogation in due course.

## **6.0 Arrangements for producing Sunderland PNA 2022-2025**

- 6.1 The PNA process will involve the following steps:

- Assess current and future health needs;
- Undertake public engagement to assess views about community pharmacy services;
- Collate information about existing services including a survey of community pharmacies;

- Develop the narrative for the consultation draft PNA, draw initial conclusions, make initial recommendations and gain approval from HWB;
- Undertake the required statutory consultation for a minimum of 60 days;
- Develop the final post-consultation version of the PNA, with final conclusions and recommendations; and
- Gain approval from HWB for the final version of the PNA for Sunderland for publication by 1<sup>st</sup> April 2022.

## 6.2 Governance arrangements will be as follows:

A Steering Group will be established (March 2021) to support the PNA process. This will include representation from:

- The Council's public health team, including analytical support;
  - The Council's communication and engagement teams e.g. community resilience team;
  - The CCG's medicines optimisation team;
  - Sunderland Local Pharmaceutical Committee; and
  - Healthwatch Sunderland.
- NHS England and Sunderland Local Medical Committee will be invited to have a representative on the Steering Group. Both are statutory consultees and will be consulted in line with the regulations and as set out in the timeline.
  - The Steering Group will be chaired by a Public Health Pharmacy Adviser who reports to the Executive Director Public Health & Integrated Commissioning. Progress will be reported to the Board in September 2021, December 2021 and March 2022.
  - The Steering Group will meet as appropriate until the consultation draft PNA is produced. It will then meet once more following the statutory consultation to finalise the PNA.

## 7.0 Recommendations

### 7.1 The Health and Wellbeing Board is recommended to:

- Approve the process for JSNA development and review;
- Support the JSNA Steering Group to undertake the necessary programme of work to fulfil this duty;
- Note the information about its statutory role in relation to the PNA, and the requirement to produce an updated and approved PNA for Sunderland for publication by 1<sup>st</sup> April 2022;
- Confirm that leadership for activities relating to the PNA should continue to be delegated to the Executive Director Public Health & Integrated Commissioning.

