

## **Pharmaceutical Needs Assessment**

### **Recommendations:**

**Health and Wellbeing Board members are asked to:**

- 1. Note the statutory duty to produce a pharmaceutical needs assessment by 1<sup>st</sup> April 2015;**
- 2. Endorse the approach to produce the Pharmaceutical Needs Assessment (PNA) for Plymouth, to receive progress reports and be consulted on the final draft on the 20<sup>th</sup> of November with final sign off by the Health and Wellbeing Board at the meeting on the 5<sup>th</sup> of February.**

### **1. Executive summary**

- 1.0 This paper has been written to ensure Health and Wellbeing Board members are aware of the new legal duty to publish a pharmaceutical needs assessment. This paper explains the basis for this duty, outlines the content of the needs assessment, and the proposed process for completion in Plymouth.

### **2. Background**

- 2.0 If a person (a pharmacist, a dispenser of appliances or in some circumstances and normally in rural areas, GPs) wants to provide NHS pharmaceutical services, they are required to apply to the NHS to be included on a pharmaceutical list. Pharmaceutical lists are compiled and held by NHS England.
- 2.1 Under the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations (the 2013 Regulations), a person who wishes to provide NHS pharmaceutical services must apply to NHS England to be included on a relevant list by proving they are able to meet a pharmaceutical need as set out in the relevant Pharmaceutical Needs Assessment (PNA).
- 2.2 The Health and Social Care Act (2012) established Health and Wellbeing Boards (HWBs). The Act also transferred the statutory responsibility to develop and update PNAs from Primary Care Trusts (PCTs) to HWBs. Responsibility for using PNAs as the basis for determining market entry to a pharmaceutical list transferred from PCTs to NHS England from 1 April 2013. This means that each HWB must in accordance with regulations:
- (a) assess needs for pharmaceutical services in its area, and
  - (b) publish a statement of its first assessment and of any revised assessment by 1 April 2015.

### **3. PNA Content**

Regulation 4 and Schedule 1 of the 2013 Regulations outline the minimum requirements for PNAs. In summary, these are:

Current provision

- 3.1 A statement of the pharmaceutical services provided inside and outside the area of the HWB and which are necessary to meet the need for pharmaceutical services in its area.

Gaps in provision

- 3.2 A statement of the pharmaceutical services that the HWB has identified that are not provided in the area of the HWB but which need to be provided in order to meet a future need for pharmaceutical services.

How the assessment was carried out

- 3.3 An explanation of how the assessment has been carried out, and in particular:
- (a) how it has determined what are the localities in its area;
  - (b) how it has taken into account:
    - the different needs of different localities in its area,
    - the different needs of people in its area who share a protected characteristic;
    - a report on the consultation that it has undertaken.

Map of provision

- 3.4 A map that identifies the premises at which pharmaceutical services are provided in the area of the HWB.

### **4. Consultation**

Prior to publishing a PNA, each HWB must consult the following about the contents of the assessment:

- any Local Pharmaceutical Committee for its area;
- any Local Medical Committee for its area;
- any persons on the pharmaceutical lists and any dispensing doctors for its area;
- any chemist in its area with whom the NHSE has made arrangements for the provision of local pharmaceutical services;
- any Healthwatch organisation for its area, and any other patient, consumer or community group in its area;
- any NHS trust or NHS foundation trust in its area;
- NHS England;
- any neighbouring HWB.

- 4.1 There is a minimum period of 60 days for consultation responses and those being consulted should be directed to a website address containing the draft PNA or, if they request, be sent an electronic or hard copy version.

## **5. Taking PNA forward in Plymouth**

- 5.1 Work has been initiated by Public Health teams in Plymouth, Devon, Cornwall and Torbay working closely with NHS England to agree a consistent but locally relevant format which complies with the regulations.
- 5.2 The proposed structure of the needs assessment is:
1. Introduction and context for the Pharmaceutical Needs Assessment
  2. Process followed for the production of the Pharmaceutical Needs Assessment
  3. Assessing need: Plymouth's localities
  4. Assessing need: Plymouth's demography
  5. Assessing need: an overview of Plymouth
  6. Assessing need: locality-based health profile (cradle to grave)
  7. Mapping current provision of pharmaceutical services (including access, acceptable travel times) / gap analysis
  8. Outcomes of the consultation process
  9. Known future needs for pharmaceutical services
  10. Conclusions
  11. References
  12. Glossary
  13. Appendices

Appendix One sets out more detail of what will be included in each section.

- 5.3 A draft document would be consulted from Monday 10 November 2014 to Friday 9 January 2015 with the revised Pharmaceutical Needs Assessment being presented to the Board for final sign-off in February 2015.

## **6. Summary**

- 6.1 The approach proposed complies with national regulations and timescales for sign off by March 31<sup>st</sup> 2015

## **7. Equality Considerations**

The needs of people and communities, particularly those most vulnerable or disadvantaged, will be made explicit in the Devon Joint Strategic Needs Assessment and Joint Health and Wellbeing Strategy. Integrated Impact Assessment will be undertaken on specific thematic, condition or population based health and wellbeing related strategies. It will be important for the Health and Wellbeing Board to consider all individuals in shaping policy and have due regard to the need to eliminate discrimination, advance equality of opportunity, and foster good relations between different people when carrying out its activities.

## **8. Legal Considerations**

There are no specific legal considerations identified at this stage.

## **9. Risk Management Considerations**

The Plymouth Health and Wellbeing Board is subject to all necessary safeguards and action being taken safeguard the Council's position. The corporate risk register will be updated as appropriate.

## **10. Options/Alternatives**

The Health and Social Care Bill required all upper tier authorities to establish a statutory Board by April 2013.

## **11. Public Health Impact**

The Plymouth Health and Wellbeing Board is central to overseeing the commissioning of services which address public health and other relevant health and wellbeing outcomes.

## PHARMACEUTICAL NEEDS ASSESSMENT (PNA) DRAFT REPORT OUTLINE

Document information  
Amendment history / version control  
Acknowledgements  
Contents  
Tables and Figures  
Executive summary

- **Introduction and context**
  - What is a PNA and why is it important?
  - Legislative background
  - Wider context
  - Minimum information that must be included in the PNA
  - Plymouth's PNA 2015-2018
  
- **Process followed**
  - Introduction
  - Establishment of Peninsula wide PNA steering group
  - Agreeing geographies
  - Assessing local need
  - Mapping current provision
  - PharmOutcomes – learning points
  - Determining adequacy of current service provision
  - Identification of gaps in current provision
  - Identifying future needs
  - Consultation and PNA approval
  
- **Assessing need: Plymouth's localities**
  - Introduction
  - Rationale for using the localities
  
- **Assessing need: Plymouth's demography**
  - The population
  - Ethnicity
  - Material deprivation
  - Car ownership
  - MOSAIC breakdown
  
- **Assessing need: an overview of Plymouth**

- Introduction
- Public Health England's Health Profile for Plymouth 2014
- Child Health Profile for Plymouth 2014
  
- **Assessing need: locality-based health profile (cradle to grave)**
  - Introduction
  - Needs section
  
- **Assessing need: public health indicators related to community pharmacy**
  - Introduction
  - Needs section
  
- **Mapping current provision of pharmaceutical services / gap analysis**
  - Introduction
  - Opening times
  - Accessibility
  - Pharmacy consultation facilities
  - Information technology
  - Appliance contractors
  - Advanced services
  - Commissioned services
  - Healthy Living Pharmacies
  - Collection and delivery services
  - Pharmacy identified priorities for improving pharmaceutical services
  - Languages
  
- **Outcomes of the consultation process**
  
- **Future needs of pharmaceutical services**
  - Including dispensing doctors and appliance contractors
  - Future improvements or better access
  - Unforeseen benefits
  - Future demands on pharmaceutical services e.g. planning, housing developments
  - The changing direction of pharmaceutical provision locally
  
- **Conclusions**
  
- **References**
  
- **Glossary**
  
- **Appendices (suggested items below)**
  - Terms of reference for PNA Steering Group
  - List of stakeholders
  - PharmOutcomes Tool data capture questionnaire
  - Formal consultation report

- Map showing locations of pharmacies
- Map showing locations of GP practices
- Map showing drive times to pharmacies