

	Health and Wellbeing Board 26 July 2018
Title	Pharmaceutical Needs Assessment (PNA)
Report of	Director of Public Health
Wards	All
Status	Public
Urgent	No
Key	No
Enclosures	None
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Summary
<p>This report presents a thorough review of pharmaceutical service provision within Barnet. Information contained in the report comply with the provisions contained within the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 and in particular, Regulations 3-9 and Schedule 1.</p> <p>Following public consultation and sign off by the Director of Public Health (DPH) and Chair of Health and Wellbeing Board (HWBB), the Pharmaceutical Needs Assessment (PNA) 2018-2021 was published in May 2018. The report determines that, at present, there are no gaps in essential, advanced or enhanced pharmaceutical services in Barnet. The report details the process and methods taken to reach this conclusion.</p> <p>The full published report can be found at: https://barnet.moderngov.co.uk/documents/s44555/Barnet%20PNA%202018_Clearance_Draft.pdf</p>

Recommendations
<p>1. That the Health and Wellbeing Board notes that the final PNA document was published in May 2018.</p>

2. The Health and Wellbeing Board notes that future amendments and supplementary statements to the PNA will need to be signed off by the Board.

1. WHY THIS REPORT IS NEEDED

- 1.1 The provision of NHS Pharmaceutical Services is a controlled market. Any pharmacist, dispensing appliance contractor or dispensing doctor (rural areas only), who wishes to provide NHS Pharmaceutical Services, must apply to be on the Pharmaceutical List.
- 1.2 The NHS Pharmaceutical Services and Local Pharmaceutical Services Regulations 2013 (and amended in 2014, 2015 and 2016) set out the system for market entry for pharmacies. Under these regulations, market entry decisions are informed by the PNA for a given Health and Wellbeing Board area. The PNA is a document that sets out a statement of the pharmaceutical services that are currently provided, together with when and where these are available to a given population.
- 1.3 A PNA is a document that includes a count of local pharmacies and the services they already provide, including dispensing, medicines reviews and local public health services, such as stop smoking, sexual health and support for drug users. A PNA often includes other services, such as dispensing by GP surgeries, and services available in neighbouring HWB areas that might affect the need for services in its own area. A PNA also describes the demographics of its local population, across the area and in different localities, and their needs. It should look at whether there are gaps that could be met by providing more pharmacy services, or through opening more pharmacies. It should also take account of likely future needs. The PNA should contain relevant maps relating to the area and its pharmacies.
- 1.4 Each area required to publish their first PNA by April 2015 and to update its PNA every 3 years to take into account changing demographics, as well as a changing strategic landscape and changing expectations on primary healthcare services (e.g. evening and weekend access). In Barnet, the previous PNA was published in May 2015. In line with this timeline, the revised PNA was published in May 2018.
- 1.5 The PNA has been produced through the PNA Steering Group reporting to the Board with authoring support from Soar beyond Ltd. Soar beyond Ltd was chosen from a selection of candidates due to their significant experience of providing services to assist pharmaceutical commissioning, including the production, publication and monitoring of PNAs.
- 1.6 Steering Group membership included delegates from LBB, Middlesex Group of Local Pharmaceutical Committee (LPC), Barnet CCG, Healthwatch Barnet and the Local Medical Committee. These bodies are all stated as consultees under Regulation 8 of the Pharmaceutical Regulations 2013.

2. REASONS FOR RECOMMENDATIONS

- 2.1 The purpose of the PNA is to inform Barnet HWBB of its statutory responsibilities under the Health and Social Care act to produce and publicise a revised PNA. The PNA 2018-2021 did not identify any gaps in essential, advanced or enhanced pharmaceutical services in Barnet. and details the process taken to reach this conclusion.
- 2.2 Although this document did not identify any gaps in provision, it remains the statutory responsibility of the HWBB to monitor any changes in pharmaceutical services which might have an impact on provision over the lifetime of this PNA document.

3. ALTERNATIVE OPTIONS CONSIDERED AND NOT RECOMMENDED

- 3.1 The alternative option is to do nothing. This was not considered as the PNA is a statutory requirement of the Health and Wellbeing Board, undertaken in partnership with the CCG, the LPC and other partners.

4. POST-DECISION IMPLEMENTATION

- 4.1 As the HWBB delegated publication responsibilities to the DPH & HWBB Chair, no further implementation decisions will be made.

5. IMPLICATIONS OF DECISION

5.1 Corporate Priorities and Performance

- 5.1.1 The purpose of joint strategic needs assessments (JSNAs) and related Joint Health and Wellbeing Strategy 2015-2020 is to improve the health and wellbeing of the local community and reduce inequalities for all ages. The core aim is to inform the development of local evidence-based priorities for commissioning which will improve the public's health and reduce inequalities. Both of these documents were used to inform the draft PNA. Gaps in service provision were identified in accordance with the key themes of the Joint Health and Wellbeing Strategy and insight provided by the JSNA.

- 5.1.2 Although it is the responsibility of NHS England to use the PNA to determine gaps in pharmaceutical service provision, LBB and Barnet CCG will use the PNA to inform local commissioning decisions. The document is intended to be read alongside the JSNA and Health and Wellbeing Strategy. Additionally, new regulations require that all applications for the "consolidation of pharmacies" be sent to all Interested Parties (including HWBB), for representation and comment.

5.2 Resources (Finance & Value for Money, Procurement, Staffing, IT, Property, Sustainability)

- 5.2.1 Resources to develop the 2018-2021 PSNA and supplementary updates (until 2021) have been identified and implemented. A sum of £50,000 was allocated to this work.

5.3 Social Value

5.3.1 The Public Services (Social Value) Act 2013 requires those who commission public services to think about how they can also secure wider social, economic and environmental benefits. The review of enhanced pharmaceutical services and Healthy Living Pharmacies identify the ways in which local authorities can optimise the social value of pharmacies as health hubs and play a significant role in meeting local health needs.

5.4 Legal and Constitutional References

5.4.1 The Health and Social Care Act 2012 transferred responsibility to develop and update PNAs from PCTs to HWBBs. Under NHS Regulations, a person who wishes to provide NHS pharmaceutical services must generally 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 PNA

5.4.2 Each Health and Well-being Board must in accordance with 2013 Regulations for PSNAs-

- Assess needs for pharmaceutical services in its area, and
- Public a statement of its assessment and of any revised assessment

5.4.3 The development of PNAs is a separate duty of HWBs to that of developing JSNAs as PNAs will inform commissioning decisions by local authorities. However, the preparation and consultation on the PNA should take account of the JSNA, a duty for HWBs.

5.4.4 Article 7 Committees, Forums, Working Groups and Partnerships of the Council's Constitution sets out the terms of reference of the Health and Wellbeing Board which includes:

- To jointly assess the health and social care needs of the population with NHS commissioners, and apply the findings of a Barnet joint strategic needs assessment to all relevant strategies and policies.
- To promote partnership and, as appropriate, integration, across all necessary areas, including the use of joined-up commissioning plans across the NHS, social care and public health. To explore partnership work across North Central London where appropriate
- Specific responsibilities for overseeing public health and developing further health and social care integration

5.5 Risk Management

5.5.1 None identified.

5.6 Equalities and Diversity

As part of the PNA process, an Equality Impact Assessment was completed, to identify if there has been any impact on any group with protected characteristics. No specific needs of impact on any particular group were identified.

5.7 Consultation and Engagement

5.7.1 A PNA Steering Group was established to oversee the project. Membership includes Barnet Public Health, Barnet Consultation and Communications, Middlesex LPC, LMC and Barnet Healthwatch. A public questionnaire about pharmaceutical services was available to residents for 30 days. Following the decision from HWBB in January 2018, the draft document went out for public consultation for the statutory minimum of 60 days.

5.8 Insight

5.8.1 Public health intelligence data, NHS England issued PNA data pack (specific to Barnet HWBB) and primary data collected via the public, pharmacy contractor and commissioner questionnaires are the primary source of data in the PNA. Additionally, London Borough of Barnet publications such as the Joint Strategic Needs Assessment, the Local Plan and the Annual Growth and Regeneration Report provided supplementary insight. Intelligence data presented in the report is the most up to date available at the time of writing.

6. BACKGROUND PAPERS

- 6.1 Department of Health (Oct. 2016). Community Pharmacy 2016/17 and beyond: final package. Retrieved from, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/561495/Community_pharmacy_package_A.pdf
- 6.2 Department of Health. (2013). Pharmaceutical Needs Assessment Information Pack. Retrieved from, <https://www.gov.uk/government/publications/pharmaceutical-needs-assessments-information-pack>
- 6.3 Department of Health. (2008). Pharmacy in England: Building on Strengths, Delivering the future. Retrieved from, https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/228858/7341.pdf
- 6.4 NHS England. (2016-18) Community Pharmacy Contractual Framework for 2016-18. Retrieved from, <https://www.england.nhs.uk/commissioning/primary-care/pharmacy/framework-1618/>
- 6.2 NHS. (2013). The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. Retrieved from, http://www.legislation.gov.uk/uksi/2013/349/pdfs/uksi_20130349_en.pdf