



TO:	Health and Wellbeing Board
FROM:	Dr Jim Gardner, NHS England, Lancashire Area Team Linda Bracewell, Chair, Lancashire Pharmacy Network
DATE:	20 th January 2014

SUBJECT:

Community Pharmacy and the responsibilities for Health & Wellbeing Boards.

1. PURPOSE

This paper provides a briefing of community pharmacy and pharmaceutical needs assessments (PNAs).

2. RECOMMENDATIONS

- Note the content of the paper.
- Consider how relationships between community pharmacies and Local Pharmaceutical Committee can be strengthened through the Health and Wellbeing Board.
- Request an update in 6 months' time in relation to the development of local services, healthy living pharmacy and, the process for ensuring a comprehensive PNA.

3. BACKGROUND

Overview of Community Pharmacies

Community pharmacy:

- Is a major provider of health and wellbeing services within England and 96% of the population, even those living in the most deprived areas, can access a pharmacy within 20 minutes on foot or on public transport.
- Dispense medicines with advice and support for patients with long term conditions, support self-care and appropriate use of purchased medicines and, provide health promotion and brief interventions to their customers and patients.
- Make a significant contribution to their local communities, e.g. collection and delivery for the housebound. Many community pharmacies already provide a range of public health information and advice, e.g. NHS stop smoking services.
- Play a major role in developing a sustainable local community, by delivering services that support people to live independently as well as providing a focus for community health and wellbeing, i.e. signposting to local carers support group, NHS services.

Healthy Living Pharmacy

Healthy Living Pharmacy establishes a quality framework delivered by trained Healthy Living Champions, improving health outcomes, i.e. stop smoking rates, emergency contraception and pro-active engagement with the public through brief interventions, e.g. support for weight management, alcohol brief interventions for minimal financial investment. Locally, we have been proactive, gaining national recognition for the excellent healthy living pharmacy work that we have

done, being held up as good practice by Professor Richard Parish; Earl Howe; Duncan Selbie. We will continue to promote this initiative and work collaboratively with the Local Authority and the Lancashire Pharmacy Network to share and extend this initiative. A healthy Living Pharmacy Manager has been appointed to work across the three local authorities in Lancashire to take forward this programme.

Pharmaceutical Needs Assessment

Pharmaceutical Needs Assessment is a comprehensive assessment of the pharmaceutical health needs of the local population, current provision of pharmaceutical services, inequalities in current provision and to consider the future provision of pharmaceutical services.

From 1st April 2013, statutory responsibility for publishing and updating a statement of the need for pharmaceutical services was passed to Health and Wellbeing Boards. This statement of need is referred to as a Pharmaceutical Needs Assessment. Health and Wellbeing Boards must ensure that they have considered the wider role of community pharmacy in supporting people's health and wellbeing.

The NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013, effective from 1 April 2013, require each Health and Wellbeing Board to:

- Make a revised assessment as soon as is reasonably practicable after identifying changes to the need for pharmaceutical services which are of a significant extent.
- Publish its first Pharmaceutical Needs Assessment by 1 April 2015.

Although this deadline is not imminent, there is an immediate responsibility to review the Pharmaceutical Needs Assessment inherited from the Care Trust Plus (October 2010) and satisfy that it is fit for purpose. There is a long planning cycle for this process, which takes 12 months and a statutory 60 day stakeholder consultation, which includes a list of persons and organisations that must be consulted, i.e. NHS England; Local Pharmaceutical Committee; Healthwatch; Patient and Public Groups.

The PNA will help inform Local Authority commissioning decisions and be used by NHS England when determining whether to open new pharmacies and dispensing appliance contractor premises. Such decisions are appealable and decisions made on appeal can be challenged through the courts. The risk of challenge is significant.

Systems need to be developed to allow the Health and Wellbeing Board to:

- Identify changes to the profile of need for pharmaceutical services within their area.
- Assess whether the changes are significant.
- Decide whether producing a new PNA is a disproportionate response, or decide upon a
 proportionate response to the need to update and publish the PNA.

The process for developing a Pharmaceutical Needs Assessment involves the Health and Wellbeing Board supported by Local Authorities, Clinical Commissioning Groups, NHS England Lancashire, Public Health England Cumbria and Lancashire Centre.

4. RATIONALE

- There is a need to consider how best to receive updates in relation to the community pharmacy agenda in particular Healthy Living Pharmacy.
- There is a need to consider the report for future arrangements for BwD's Pharmaceutical Needs Assessment and responsibilities for the Health and Wellbeing Board.
- There is a need to consider how best to engage further with local communities and community pharmacies to optimise the use of this community based asset.

5. KEY ISSUES

The Board must understand its responsibilities for the PNA, and be assured that there will be a robust engagement process and may want to consider how it will oversee the process and development of the PNA.

NHS England Lancashire has written to the Chair of each Health and Wellbeing Board in Lancashire highlighting the Board's responsibility for the production of the PNA. The letter highlights a pan Lancashire approach to developing the PNA, via a small working group, and seeks support from the Health and Wellbeing Board in addition to an identified sponsor for this work stream.

The Board may want to understand further the development and implementation of Healthy Living Pharmacies and their potential to address some local health inequalities.

6. POLICY IMPLICATIONS

There are no known policy implications.

7. FINANCIAL IMPLICATIONS

There are no known financial implications at this current time.

8. LEGAL IMPLICATIONS

The Health and Social Care Act 2012 transferred responsibility for the developing and updating of PNAs to Health and Wellbeing Boards. There is a requirement for the Health and Wellbeing Board to have a comprehensive Pharmaceutical Needs Assessment which has full public and stakeholder consultation.

Regulations 3-9 and Schedule 1 of the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 set out the requirements for PNAs. The risks of legal challenge to the legality of decisions are described within it, along with an analysis of action to be taken to avoid this.

In addition to this, public authorities must have due regard to relevant provisions of the Equalities Act 2010. This includes the need to eliminate discrimination and harassment, victimisation and any other conduct that is prohibited by or under the Act and need to advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it.

9. RESOURCE IMPLICATIONS

There are no known resource implications.

10. EQUALITY AND HEALTH IMPLICATIONS

Through the development of the Pharmaceutical Needs Assessment, there will be an equality and health impact assessment undertaken.

11. CONSULTATIONS

Public and Stakeholder consultation is critical to the development of the Pharmaceutical Needs Assessment and a full consultation will be undertaken as the Pharmaceutical Needs Assessment is developed.

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DATE:	January 2014
BACKGROUND PAPER:	http://www.local.gov.uk/documents/10180/11463/Community+Pharmacy+- +local+government%27s+new+public+health+role/01ca29bf-520d-483e-a703- 45ac4fe0f521

