

# HEALTH AND WELLBEING BOARD



<b>TO:</b>	Health and Wellbeing Board
<b>FROM:</b>	Dominic Harrison, Director of Public Health and Wellbeing
<b>DATE:</b>	2 June 2021

**SUBJECT: Pan-Lancashire Pharmacy Needs Assessment 2021-24 (requirement suspended until October 2022)**

## 1. PURPOSE

The purpose of this paper is to update the Health and Wellbeing Board on pan-Lancashire work to review and update the current Pharmacy Needs Assessment (PNA) and the required period of public consultation.

## 2. RECOMMENDATIONS FOR THE HEALTH & WELLBEING BOARD

The Health and Wellbeing Board is asked to

- Note this report
- Receive a further update later in 2021 once the revised guidance has been published and the relevant legislation has been further amended.

## 3. BACKGROUND

Local Government took on a new role when Public Health transferred from the NHS in April 2013, including the production of a Pharmacy Needs Assessment (PNA).

The PNA aims to identify whether current pharmacy service provision meets the needs of the local population and considers whether there are any gaps in service delivery.

The PNA is used by NHS England in its determination as to whether to approve applications to join the pharmaceutical list under The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013.

The PNA also informs commissioners such as the clinical commissioning group (CCG) and local authority, of the current provision of pharmacy services and where there are any gaps in relation to the local health priorities.

## 4. RATIONALE

From 1<sup>st</sup> April 2013 every Health and Wellbeing Board in England has had a statutory responsibility to publish and keep up to date a statement of the needs for pharmacy services for its local population, known as the Pharmacy Needs Assessment (PNA).

A published PNA has a normal lifetime of three years.

The current pan-Lancashire PNA, undertaken on behalf of, and endorsed by, all three Health and Wellbeing Boards in Lancashire, runs from April 2018 to the end of March 2021.

There have been no Local Authority organisation or boundary changes in the last 3 years and it was intended that a refresh of the current pan-Lancashire PNA be undertaken and an appropriate steering group was set up to that effect.

The PNAs were due to be renewed and published by Health and Wellbeing Boards in April 2021. However, due to pressures across all sectors in response to the COVID-19 pandemic, legislation was passed in 2020 to suspend the requirement to publish renewed PNAs until April 2022. The Department of Health and Social Care has now formally announced that the relevant legislation will be amended again to extend the suspension period for publication of renewed PNAs to October 2022. The Department also announced that updated PNA guidance will be published this summer.

Health and Wellbeing Boards retain the ability to issue supplementary statements to respond to local changes and pharmaceutical needs during this time.

## 5. KEY ISSUES

**Under the current guidance, key issues for the PNA are:**

- It is a statutory responsibility of the Health and Wellbeing Board.
- Pharmacies provide a wide range of services beyond core contracts
- The PNA is the basis for future pharmacy commissioning intentions
- Pharmacies may challenge commissioning decisions and therefore the PNA must be robust to ensure decisions are made on relevant and appropriate evidence.

**Matters which the Health and Wellbeing Board must have regard to when developing the PNA, as well as the process for its production may change, when the updated guidance is published later in the year.**

## 6. POLICY IMPLICATIONS

There are no direct policy implications

## 7. FINANCIAL IMPLICATIONS

The findings of the PNA have no financial implications

## 8. LEGAL IMPLICATIONS

The statutory responsibility for PNAs transferred from PCTs to the Health and Well-being Boards on the 1 April 2013, as a result of the changes introduced by the Health and Social Care Act 2012. At the same time, the responsibility for market entry decisions transferred from PCTs to NHS England.

Under Section 128A of NHS Act 2006 (as amended by the Health and Social Care Act 2012), the Health and Well-being Board had a duty to deliver a PNA before April 2015, and to publish a revised PNA every 3 years thereafter. The regulations which provide the details of these responsibilities are the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 ('the Regulations').

The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 were amended in August 2020 by the National Health Service (Coronavirus) (Charges and further amendments relating to the provision of primary care services during a pandemic etc.) Regulations 2020 (“the Coronavirus Regulations”). The Coronavirus regulations amended the timescales set out in the Regulations, and provided that Health and Wellbeing Board were now required to publish a renewed PNA no later than 1<sup>st</sup> April 2022. The previous requirement to publish a revised assessment before that date was suspended.

The Department of Health and Social Care has now formally announced that the Regulations will be amended again, to move the date by which HWBBs are required to publish their renewed PNAs from 1 April 2022 to October 2022. The Health and Wellbeing Board should receive a further update regarding renewed PNAs once the legislation is amended and the revised guidance has been published, in order to satisfy itself as to the amended legal duty in respect of its renewed PNA and the requirements for that document.

The PNA assists in the commissioning of pharmaceutical services for local priorities and will be used by NHS England when making decisions on applications to open new pharmacies. These decisions may be appealed by pharmacies and challenged via the courts. Therefore it is vital to comply with regulations and that systems are put in place to keep the PNA up to date. The Regulations prescribe the matters which the Health and Well-being Board must have regard to when undertaking the PNA (including consultation).

## **9. RESOURCE IMPLICATIONS**

The resources for producing the PNA have been incorporated into Public Health plans and therefore there are no additional resource implications.

## **10. EQUALITY AND HEALTH IMPLICATIONS**

The PNA aims to

- Identify gaps in provision or accessibility, including by area or population group
- Help support a healthier population

## **11. CONSULTATIONS**

The current guidance requires a 60 day public consultation on the draft PNA, which includes :

- any relevant local pharmaceutical committee (LPC) for the Health and Wellbeing Board area
- any local medical committee (LMC) for the Health and Wellbeing Board area
- any persons on the pharmaceutical lists and any dispensing GP practices in the Health and Wellbeing Board area
- any local Healthwatch organisation for the Health and Wellbeing Board area, and any other patient, consumer and community group that, in the opinion of the Health and Wellbeing Board, has an interest in the provision of pharmaceutical services in its area
- any NHS trust or NHS foundation trust in the Health and Wellbeing Board area
- NHS England
- any neighbouring Health and Wellbeing Board

**VERSION: 0.2**

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<b>DATE:</b>	29 March 2021
<b>BACKGROUND PAPER:</b>	

