

HEALTH AND WELLBEING BOARD



TO:	Health and Wellbeing Board
FROM:	Dominic Harrison, Director of Public Health and Wellbeing
DATE:	March 2020

SUBJECT: Pan-Lancashire Pharmacy Needs Assessment 2021-24

1. PURPOSE

The purpose of this paper is to update the Health and Wellbeing Board on the pan-Lancashire work that has started 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 in autumn 2020

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 1st 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 maximum 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 is intended that a refresh of the current pan-Lancashire PNA is undertaken and an appropriate steering group has been set up to that effect.

5. KEY ISSUES

The 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 include :

- the demography of its area;
- whether there is sufficient choice with regard to obtaining pharmaceutical services;
- any different needs of different localities in its area;
- the pharmaceutical services provided in the area of any neighbouring HWB which affect the need for pharmaceutical services in its own area.

Process and Deadlines

As part of developing their PNA, Health and Wellbeing Boards must undertake a public consultation for a minimum of 60 days, which is planned for the autumn.

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. In particular, the Health and Well-being Board had a duty to deliver a Pharmaceutical Needs Assessment before April 2015 under Section 128A of NHS Act 2006 (as amended by the Health and Social Care Act 2012). Thereafter this assessment needs to be delivered every 3 years. The regulations setting out the responsibilities are contained in Part 2 National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 ('the Regulations').

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.

Regulation 8 sets out consultation requirements.

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

A 60 day public consultation on the draft PNA will be undertaken.

Those being consulted will include :

- 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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CONTACT OFFICER:	Dr Gifford Kerr, Consultant in Public Health
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DATE:	17 February 2020
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BACKGROUND PAPER:	
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