

Date:	20 th March 2018
Classification:	General Release
Title:	Pharmaceutical Needs Assessment 2018-21
Report of:	The Director of Public Health
Wards Involved:	All
Policy Context:	Health and Wellbeing Boards are required to publish and maintain a Pharmaceutical Needs Assessment by virtue of Section 128a of the National Health Service Act 2006 (Pharmaceutical Needs Assessments) and the Health and Social Care Act 2012
Financial Summary:	Not applicable
Report Author and Contact Details:	Colin Brodie, Public Health cbrodie@westminster.gov.uk

1. Executive Summary

- 1.1 This report presents the final version of the Pharmaceutical Needs Assessment (PNA) for the Westminster for approval, to ensure that the Health and Wellbeing Board meets its statutory requirement to publish a PNA by 1 April 2018. In addition, it reports on the proposed changes to the PNA following the mandatory 60-day consultation undertaken between December 2017 to February 2018

2. Key Matters for the Board

- 2.1 The Health and Wellbeing Board is requested to approve the final Pharmaceutical Needs Assessment (PNA) report for Westminster in order to meet their statutory requirement to publish a PNA by 1 April 2018.

3. Background

- 3.1 Health and Wellbeing Boards are required to publish and maintain a PNA for their local area by virtue of Section 128a of the National Health Service Act 2006 (Pharmaceutical Needs Assessments) and the Health and Social Care Act 2012.
- 3.2 PNAs are a statement of the need for pharmaceutical services of the population in a defined geographical area.
- 3.3 PNAs are an important tool, used by NHS England, in market entry decisions (in response to applications from business, including independent owners and large pharmacy company). The assessments are also used by commissioners to make decisions on which funded services need to be provided by local community pharmacies.
- 3.4 Locally, the PNA has been incorporated as part of the JSNA work programme. The PNA has been compiled by Healthy Dialogues Ltd, under the steer of a PNA Task and Finish Group.

4. Consultations

- 4.1 When producing a PNA, Health and Wellbeing Boards are required by law to consult a specified list of bodies at least once during the process of developing the Pharmaceutical Needs Assessment.
- 4.2 There is a minimum duration of 60 days for the consultation. The consultation for the Westminster PNA ran from 1st December 2017 to 2nd February 2018
- 4.3 Prior to the consultation the draft PNA was presented to the Health and Wellbeing Board in November 2017.
- 4.4 In total 9 responses were submitted as part of the consultation on the Westminster PNA. These comments have been collated by theme and summarised in Appendix 1, which also describes how the consultation responses have informed the final PNA.

5. Legal Implications

- 5.1 Health and Wellbeing Boards are legally required to publish and maintain a PNA for their local area by virtue of Section 128a of the National Health Service Act 2006 (Pharmaceutical Needs Assessments) and the Health and Social Care Act 2012.
- 5.2 All Health and Wellbeing Boards were required to publish a PNA by 1 April 2015. After it has published its first PNA, each HWB must publish a statement of its revised assessment within 3 years of its previous publication of a PNA.

5.3 PNAs must be developed in line with the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013

5.4 Verified by Kevin Beale, Senior Corporate Lawyer, Shared Legal Services

6. Financial Implications

6.1 Funds required to produce the Westminster PNA were identified from the 2017/18 Public Health budget and have been costed at £23,600.

6.2 Verified by Richard Simpson, Public Health Finance Manager

**If you have any queries about this Report or wish to inspect any of the Background Papers please contact:
Colin Brodie, Knowledge Manager
Email: cbrodie@westminster.gov.uk
Telephone: 02076414632**

APPENDICES:

Appendix A: PNS 2018 Task and finish Groups ToR

Appendix B: Community Pharmacy Questionnaire

Appendix C: Engagement Plan

Appendix D: Index to Opening Times and Services

BACKGROUND PAPERS:

Appendix 1: Westminster PNA Public Consultation Responses for Discussion

Westminster PNA Public Consultation Responses for discussion

Respondent	Response	Steering group decision
CLCCG	<p>Minor Ailments Scheme</p> <p>Section 7.35 "...the Minor Ailments Scheme is widely spread in Westminster....."</p> <p>The NHS England commissioned Minor Ailments enhanced service only covers the northern part of the Central London CCG area. The North West London CCGs Prescribing Wisely initiative encourages the public to use community pharmacies for advice and help with common self-limiting ailments and to purchase any over the counter medicines they need. NHS England has also launched a public consultation on reducing prescribing of over-the-counter (OTC) medicines for minor, short-term health concerns which could save the NHS £136 million a year and encourage more people to self-care.</p>	<p>Text to be updated with correct data. Add reference to Prescribing Wisely</p>
CLCCG	<p>Out of Hours Palliative Care</p> <p>Section 7.39 "The Health and Wellbeing Board therefore identifies the provision of End of Life Care Service to be not sufficient for supplying a necessary service."</p> <p>This refers to the access to palliative care drugs out of hours. There are no pharmacies commissioned to provide this service, although 3 pharmacies have stated they have some provisions in place for all patients prescribed such medications.</p>	<p>Add recommendation to further investigate with relevant stakeholders whether there is a need.</p>

Respondent	Response	Steering group decision
	<p>No evidence is provided in the PNA as to whether there is an unmet need that is impacting on quality of care or not being able to meet the wishes of patients to die in their home environment resulting from lack of access to palliative care medicines out of hours.</p>	
CLCCG	<p>Weight Management Service</p> <p>“Health and Wellbeing Board is satisfied that the Weight Management Service provided in local pharmacies is sufficient for supplying a service with no gaps.”</p> <p>In the Executive Summary it states that a child and family weight management service would, if provided through pharmacies, secure improvements or better access to such services.</p> <p>The PNA identifies that nearly one-quarter of Reception age children (23.7%) and two out of every five (39.7%) Year 6 children are overweight or obese, this is higher than regional and national figures.</p> <p>A key priority for the Health and Wellbeing Board is to improve outcomes for children and young people. Community pharmacies already have an important role in health promotion and the potential for pharmacies to provide support to people to manage their weight should be explored more fully.</p>	<p>Child and family weight management is an area for improvements or better access.</p>
CLCCG	<p>Health Promotion Campaigns</p> <p>Section 7.87</p> <p>Under the NHS Community Pharmacy Contractual Framework, promotion of healthy lifestyles is an essential service. NHS England can require community pharmacies to participate in up to 6 specified health promotion campaigns each year. However, the PNA notes that pharmacies have only been asked to participate in one campaign a year. Better co-ordination is required between NHS England, Public Health England and CCGs to ensure pharmacies are fully utilised to deliver key health promotion messages to the public.</p>	<p>Add recommendation: Better coordination of public health campaigns so that they are aligned with local need.</p>

Respondent	Response	Steering group decision
LPC	<p>Health Promotion Campaigns</p> <p>14) <u>Statement in Section 7.87</u> re only one health campaign being delivered each year for a few – It is worth adding clarity that this only reflects to the annually coordinated London wide or national campaigns required by NHSE. Majority of pharmacies run many other health promotion campaigns and in particular the Influenza campaigns each year is run right across London in a coordinated manner with an excellent result. These other campaigns are not mandatory and hence not reported upon.</p>	As above
LPC	<p>Palliative Care Medicine Supply</p> <p>10) <u>Section 7.42</u> For clarity-- it has been an NHSE decision not to commission any pharmacies for the OOHs Palliative Care Medicine Supply service and instead their decision was that the service provided in the two pharmacies in K&C would suffice for the need in Westminster. However it is well documented that many existing pharmacies have expressed keen interest and are willing to provide this service if commissioned to do so. Therefore this gap is there because of the lack of commissioning and hence clarity re this needs to be stated in the document for total clarity.</p>	Add recommendation to further investigate with relevant stakeholders whether there is a need.
Sumer Pharmacy	<p>Car Parking for Disabled</p> <p>I am taking this opportunity to write to you regarding the crucial needs of this pharmacy, the most pressing of which is the necessity of a car park catering to the disabled, who require the use of the pharmacy services, and we need this car park to make our services accessible to them. Please could you take serious consideration to this matter. I would be extremely grateful.</p>	Public Health Team will forward this request to relevant council services.

Additional Changes discussed during Consultation:

- reorder pharmacies by order of wards
- add opening times
- add opening times within text
- MUR Figures
- NMS Figures
- Update maps to match commissioned services lists
- Change language of gaps