

**ROTHERHAM BOROUGH COUNCIL**

•	<b>Meeting:</b>	<b>Cabinet Member for Adult Social Care and Health.</b>
•	<b>Date:</b>	<b>22<sup>nd</sup> September 2014</b>
•	<b>Title:</b>	<b>Pharmaceutical Needs Assessment (PNA) and Consultation Plan.</b>
•	<b>Directorate:</b>	<b>Public Health</b>

**Summary:**

Pharmaceutical Needs Assessments (PNAs) are a legal document used to make decisions about a range of services which need to be provided by local community pharmacies (chemists), internet pharmacies and dispensing appliance contractors (DACs). These are part of local health care and public health services and affect budgets.

PNAs are used when deciding if new pharmacy services and shops are needed; applications are made by independent pharmacy owners and large pharmacy companies. Applications are to NHS England.

Applications can be open to legal challenge by pharmacist and their companies if not handled properly or the PNA regulations are not met.

The HWB must publish its PNA by 1<sup>ST</sup> April 2015. There must be 60 days of public consultation and have board-level sign-off.

**Recommendations:**

**Cabinet Member receives the draft PNA.**

**Cabinet Member approves the PNA for the 60 day consultation period.**

## **Proposals and Details:**

The information in the PNA is used by pharmacies and commissioners to decide if new community pharmacy shops or services are viable. The PNA is valid for three years unless, any major changes occur locally then we must review the content and rewrite it. Small changes, like a new pharmacy opening can be accounted for by a simple Supplementary Statement, which Public Health can issue with delegated powers.

The PNA has been written to cover all the legal regulations and involved a range of key stakeholders in the process. Using the data collected for the PNA, the JSNA and the Director of Public Health's Annual Report some key findings have emerged. The findings identify areas which need further inquiry or, the need to consider extending provision to improve access and greater public choice. Any gaps found can result in pharmacies putting in an application.

The key findings are set out in the Key Findings table in the Summary.

The PNA must contain:

- A statement of the pharmaceutical services provided that are necessary to meet needs in the area.
- A statement of the pharmaceutical services that have been identified by the HWB that are needed in the area, and are not provided, the gaps in provision.
- A statement of the other services which are provided, which are not needed, but which have secured improvements or better access to pharmaceutical services in the area.
- A statement of the services that the HWB has identified as not being provided, but which would, if they were to be provided, secure improvements or better access to pharmaceutical services in the area.
- A statement of other NHS services provided by a local authority, the NHS Commissioning Board (NHS England), a Clinical Commissioning Group (CCG) or an NHS Trust, which affect the needs for pharmaceutical service.
- An explanation of how the assessment has been carried out, including how the consultation was carried out.
- Maps of providers of pharmaceutical services.

Some examples of the key findings from the PNA:

A number of localities would benefit from improved access to:

- Weekend opening
- Emergency Hormonal Contraception
- Needle Exchange
- Stop Smoking Services
- Seasonal Flu Vaccinations

Commissioners must ensure all Essential Service contract elements are delivered, such as Public Health Campaigns.

Medicine Management in Care Homes remains an identified gap in service provision.

## **Risks and Uncertainties:**

Decisions on applications to open new pharmacies can be appealed to the NHS Litigation Authority's Family Health Services Appeal Unit (FHSAU), and may also be challenged via the courts. It is important that PNAs comply the regulations, due process is followed in their development and that they are kept up-to-date.

Some local agencies have not been able to provide information and/or not engaged in the PNA development process.

A possible risk is information distribution from NHS England. The HWB and Public Health do not hold or process the required information for the majority of services or communications with other commissioning organisations.

Not following the timetable for consultation and publication will mean we do not have a PNA published on time and could be challenged at some point.

**Background Papers and Consultation:**

<http://www.dh.gov.uk/health/2013/02/pharmaceutical-services-regulations/>.

**Glossary:**

**Dispensing Appliance Contractor (DAC):** Dispensing appliance contractors are not able to supply medicines, but do supply various appliances such as incontinence and stoma products.

**Internet Pharmacy:** Internet, online or mail order pharmacies operate over the internet and send orders to customers through the mail.

**NHS Litigation Authority's Family Health Services Appeal Unit (FHSAU):** A body which deals with disputes between primary care contractors and NHS England. Such appeals generally relate to the proposed opening of a new pharmacy, relocation of an existing pharmacy or the provision of dispensing services by GPs. A key document they use is the PNA.

**Pharmacist:** a person trained and licensed to dispense, formulate, and educate about medications.

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