

REPORT TO:	HEALTH AND WELLBEING BOARD (CROYDON) 18 October 2017
SUBJECT:	Pharmaceutical Needs Assessment: Delegated Responsibility
BOARD SPONSOR:	Rachel Flowers, Director of Public Health, Croydon Council

BOARD PRIORITY/POLICY CONTEXT:

From 1st April 2013, every Health and Wellbeing Board (HWB) in England has had a statutory responsibility to publish and keep up to date a statement of the needs for pharmaceutical services of the population in its area, referred to as a pharmaceutical needs assessment (PNA).

The NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (the 2013 Regulations) 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.

Croydon, in line with national regulations, published its first PNA by 1 April 2015. Every area is required to publish a refreshed PNA document within 3 years, i.e. by 1 April 2018. Section 8 of the Regulations requires consultation with specific organisations and groups allowing them a minimum of 60 days for making their response to the consultation. The Consultation of the PNA in Croydon runs from 20 November 2017 to 21 January 2018. Following the Consultation, responses will be assessed and a final document prepared. It is expected that the final PNA will be available by the end of March 2018, this is after the HWB's February meeting. Therefore to publish the PNA document by 1 April 2018, as required by the 2013 Regulation, there is a priority for the board to delegate authority to the Director of Public Health and to the Chair of the Health and Wellbeing Board to sign off the final PNA document on its behalf.

FINANCIAL IMPACT:

No financial impact for Health and Wellbeing Board partners.

1. RECOMMENDATIONS

- 1.1** Note progress in developing the 2018 PNA for Croydon.
- 1.2** This report recommends that the Health and Wellbeing Board delegates authority to the Director of Public Health and to the Chair of the Health and Wellbeing Board to sign off the final PNA document to guarantee its publication by 1 April 2018, as required by the 2013 Regulations.

2. EXECUTIVE SUMMARY

- 2.1** This paper provides an update to Croydon's Health and Wellbeing Board (HWB) on the progress of the development of the Pharmaceutical Needs Assessment (PNA), including the process for publishing a refreshed PNA.
- 2.2** This paper also sets out a case to delegate authority to the Director of Public Health and to the Chair of the Health and Wellbeing Board to sign off the final PNA document to ensure it is published by 1 April 2018, as required by the 2013 Regulations.

3. DETAIL

Background

- 3.1** 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 pharmaceutical services of the population in its area, referred to as a pharmaceutical needs assessment (PNA). Croydon's current PNA was published in accordance with national regulations, by 1 April 2015. Every area is required to publish a refreshed PNA document within 3 years, i.e. by 1 April 2018.
- 3.2** The information to be contained in the Pharmaceutical Needs Assessment is set out in Schedule 1 of The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013. The PNA should include:
 - A list of pharmacies in Croydon and the services they currently provide, including dispensing, health advice and promotion, flu vaccination, medicines reviews and local public health services, such as sexual health services.
 - Relevant maps of providers of pharmaceutical services in the area.
 - Services in neighbouring areas that might affect the need for pharmaceutical services in Croydon.
 - Potential gaps in provision that could be met by providing more pharmacy services, or through opening more pharmacies, and likely future needs.
- 3.3** The Pharmaceutical Needs Assessment should also be aligned with the Joint Strategic Needs Assessment and Health and Wellbeing Board Strategy for Croydon.
- 3.4** PNAs enable health and care partners to identify unmet pharmaceutical needs. PNAs are used by NHS England to make decisions on applications to open new pharmacies and dispensing appliance contractor premises; or applications from current pharmaceutical providers to change their existing regulatory requirements. Applications to open new pharmacies can be keenly contested by applicants and existing NHS contractors and can be open to legal challenge if not handled properly. PNAs also support local authority and NHS commissioners to make decisions on the locally funded services need to be provided by local community pharmacies, and ensure that service provision

is targeted in areas where there is population need for them.

- 3.5** Health and Wellbeing Boards need to ensure that the NHS England and its Area Teams have access to the local PNA, to support their decision-making and strategic planning processes. Croydon Council's Public Health team have ensured that NHS England know how to access and interpret the information provided in Croydon's current PNA. The current PNA is publicly accessible via the Croydon Observatory website: <http://www.croydonobservatory.org/pna>
- 3.6** A PNA should include information on local pharmacies and the services they already provide. These will include dispensing, providing advice on health, medicines reviews and local public health services, such as stop smoking, sexual health and support for drug users. It should look at other services, such as dispensing by GP surgeries, and services available in neighbouring areas that might affect the need for services in the local area. The PNA will take account of any changes to the commissioning of public health and CCG services in Croydon, and will also account for changes in NHS England commissioning arrangements.
- 3.7** The PNA should examine the demographics of the local population, across the area and in different localities, and their needs. It should look at whether there are gaps that could be met by providing more pharmacy services, or through opening more pharmacies. It should also take account of likely future needs. The PNA should also contain relevant maps relating to the area and its pharmacies. The PNA must be aligned with other plans for local health and social care, including the Joint Strategic Needs Assessment (JSNA) and the Joint Health and Wellbeing Strategy.

PNA Development and Progress

- 3.8** Following a tender process, Soar Beyond LTD was appointed as a provider to develop the 2018 PNA for Croydon on behalf of the Health and Wellbeing Board.
- 3.9** A Steering Group was created with members representing: Soar Beyond LTD, Croydon Council (including Public Health and Communications Teams), Croydon Clinical Commissioning Group, Local Pharmaceutical Committee and Local Medical Council.
- 3.10** The Steering Group was established to oversee the production of the 2018 PNA for the London Borough of Croydon, reporting progress and with the aim of presenting the final report the HWB on or before the March 2018 meeting (see Terms of References on Background Documents section).
- 3.11** Section 8 of the 2013 Regulations requires consultation with specific organisations and groups allowing them a minimum of 60 days for making their response to the consultation. The current Consultation is now live and runs from 20 November 2017 to 21 January 2018. Responses gathered from the consultation will be subsequently analysed and a final document produced. This final PNA document is expected to be available by the end of March 2018. It is therefore not feasible to present the final PNA document to the board before the due publication date.
- 3.12** To meet the publication deadline (i.e. 1 April 2018), delegation of authority to the Director of Public Health and to the Chair of the Health and Wellbeing Board is

being requested to sign off the final PNA document on behalf of the HWB.

3.13 The HWB however has now access to a full copy of the draft PNA (see link provided below under the Background Section). This draft may differ from the final document all depending on the outcome from the current Consultation. However, it is envisioned that any amendments to the final version will be minor and therefore the draft available will give a close picture to the HWB.

3.14 Following to its publication, the final 2018 PNA is proposed and planned to be formally presented to the HWB at the meeting on the 16th April 2018.

4. CONSULTATION

4.1 The revised PNA will require Health and Wellbeing Board-level sign-off and a 60 day period of public consultation before it can be finalised.

4.2 The 2013 Regulations list those persons and organisations that the Health and Wellbeing Board must consult. This list 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 which 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.

4.3 A first Consultation on the views of pharmacy services users were gained from a questionnaire circulated for comments from the general public in the summer of 2017. In the same period, commissioners and contractors were also consulted using similar questionnaires. Results were used to inform the PNA process and the development of the final draft.

4.4 This Consultation on the final draft PNA is now currently available (i.e. Monday 20th November to 21st January 2018).

4.5 The Consultation is available on [Croydon Get involved](#) platform, and has been circulated via email to a distribution list based on the requirements set by the 2013 Regulations.

- 4.6** The Consultation is also being advertised on social networks such as Facebook or Twitter.

5. SERVICE INTEGRATION

- 5.1** PNAs provide a common structured framework within which commissioners and strategic planners can make decisions about pharmaceutical needs in a local area. They facilitate discussions between NHS England, local commissioners from the local authority and CCG, and local pharmacists around addressing local pharmaceutical needs, and provide a common framework for assessing activity and provision that should be in place to address these needs.

6. FINANCIAL AND RISK ASSESSMENT CONSIDERATIONS

- 6.1** There are no financial implications or risks that the board needs to consider. The PNA supports NHS England to make decisions about market entry. It has no direct cost implications to the Council or CCG.
- 6.2** The funding to undertake and develop the refreshed 2018 PNA was identified as part of the public health ring-fenced grant.

7. LEGAL CONSIDERATIONS

- 7.1** There is a statutory responsibility to produce a PNA. The Health and Wellbeing Board's review of the refreshed PNA will need to be supported by full legal clearance.
- 7.2** The Health and Social Care Act 2012 established Health and Wellbeing Boards and transferred to them (from the NHS Act 2006) the responsibility to publish and keep up to date a statement of the needs for pharmaceutical services of the population in its area, with effect from 1 April 2013. The requirements on how to develop and update PNAs are set out in Regulations 3-9 Schedule 1 of the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013.
- 7.3** The 2012 Act also amended the Local Government and Public Involvement in Health Act 2007 to introduce duties and powers for Health and Wellbeing Boards in relation to Joint Strategic Needs Assessments (JSNAs). The preparation and consultation on the Pharmaceutical Needs Assessment should take account of the Joint Strategic Needs Assessment (and other relevant local strategies in order to prevent duplication of work and multiple consultations with health groups, patients and the public). The development of Pharmaceutical Needs Assessments is a separate duty to that of developing Joint Strategic Needs Assessments. As a separate statutory requirement, Pharmaceutical Needs Assessments cannot be subsumed as part of these other documents but can be annexed to them.
- 7.4** The Health and Social Care Act 2012 also transferred responsibility for using PNAs as the basis for determining market entry to a pharmaceutical list from PCTs to NHS England.

8. EQUALITIES IMPACT

- 8.1** The purpose of any needs assessment, including the PNA, is to look at current and predicted future population needs for service provision or support. The PNA will identify the need for access to pharmaceutical services so that NHS England can approve or reject applications for additions to the pharmaceutical list. The PNA will also identify the need for locally commissioned services that local authority and CCG commissioners can respond to using relevant commissioning budgets.
- 8.2** As part of the PNA process, an “Equality Impact Assessment” (EIA) was completed (see Appendix K of draft PNA link provided in the Background Document Section) to identify if there had been any impact on any group with protected characteristics. No specific needs or impact on any particular group were identified. This EIA was approved and signed off by the DPH and Equality Analysis Officer from Croydon Council.

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BACKGROUND DOCUMENTS:

Link to current Pharmaceutical Needs Assessment, published following the March 2015 Health and Wellbeing Board Meeting: <http://www.croydonobservatory.org/pna>

Link to full copy of the draft PNA under Consultation: <https://goo.gl/3UB9Ty>

APPENDICES: Appendix A. PNA Development Project Plan
Appendix B. Croydon 2018 PNA Steering Group - Terms of Reference