

Council – 14 November 2016

Notice of motion – Pharmacies in Walsall

A notice of motion has been received from Councillor Robertson, Jeavons, J Fitzpatrick, D Coughlan and Burley as detailed below:

“This Council notes that:

- Pharmacies in Walsall offer a range of services such as dispensing prescriptions, disposal of unwanted medicines and supporting self-care
- Pharmacies play an important role in promoting wellbeing such as healthy eating, smoking cessation, exercise, flu vaccination, sexual health and more
- Pharmacies provide advice and support services which are also available to care homes
- several local pharmacies are wanting to achieve Healthy Living Pharmacy status recognising and evidencing their role in wishing to improve the health of their local population.

Walsall Council is greatly concerned about the threat to local pharmacy services as a result of Government cuts in the budget of £170m nationally, which take effect from October 2016. This is a 6% cut in cash terms but could effectively mean a cut of 12% during the financial year and which could lead to the potential closure of up to a quarter of pharmacies with an increased focus on warehousing dispensary and online services. This Council believes that these service cuts in pharmacies will put more residents at risk of poor health, as well as putting pressure on GPs and on hospital services and therefore increasing NHS costs. A fully funded community pharmacy service is cost effective and is in the interest of patients and carers.

Walsall Council agrees to write to the Secretary of State for Health, NHS England and Walsall Clinical Commissioning Group detailing our concerns and demanding an immediate reversal of these proposals.”

Background

Background to Consultation: Community Pharmacy in 2016/17 and beyond

- 1.1 The Five Year Forward View sets out a direction and looks to build on the strengths of the NHS and rising to the challenges of the future¹. This includes the response of pharmacists to changes in patients' health needs and also the transformational change through new models of care to improve patient outcomes.
- 1.2 In December 2015 the Department of Health proposed to better integrate community pharmacy into primary care. In December the Consultation, Community Pharmacy in 2016/17 and Beyond opened.
- 1.3 On the 24th March 2016 the consultation on the pharmacy integration fund closed². The response published outlined that there would be a reduction in NHS funding for community pharmacies in England from October 2016.

Consultation

- 2.1 On 19th October 2016 the Department of Health published an EqIA³ relating to the consultation. The recommendation is that they reduce the funding of community pharmacies and simplify the payment system.
- 2.2 The primary objective is to increase the health gains realised from the NHS budget, by ensuring that expected efficiency savings in delivering community pharmacy services result in cost savings to the NHS - while ensuring that patient health is not jeopardised, and minimising impacts on travel times to access community pharmacy services.

Responsibility for Pharmacy Contracts

- 3.1 The Health and Social Care Act 2012 introduced a number of key changes to the organisations who have responsibility for commissioning and delivering National Health Services (NHS) in England⁴.

¹ NHS Five Year Forward View <https://www.england.nhs.uk/wp-content/uploads/2014/10/5yfv-web.pdf>

² Community pharmacy in 2016/17 and beyond <https://www.gov.uk/government/publications/putting-community-pharmacy-at-the-heart-of-the-nhs>

³ Equality Impact Assessment https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/561496/Community_pharmacy_impact_assessment_A.pdf

⁴ Health and Social Care Act 2012 <http://www.legislation.gov.uk/ukpga/2012/7/contents/enacted>

- 3.2 NHS England (NHSE) has designated authority for the commissioning of pharmacists, GP and dental contracts. This includes the setting of priorities and the direction of the NHS⁵.
- 3.3 Specifically to pharmacists this includes commissioning essential services as part of the NHS community pharmacy contractual framework. This includes; dispensing medicines and appliances, disposal of unwanted medicines and support for self care
- 3.4 Pharmacists are accountable to NHSE as they are responsible for holding the contracts and contract monitoring.
- 3.5 Under the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 ("the Regulations"), NHS England is responsible for preparing, maintaining and publishing (for each Health & Wellbeing Board area) the lists of persons (whether sole traders, partnerships or bodies corporate) who undertake to provide pharmaceutical services from premises located in England.
- 3.6 NHSE will visit and inspect pharmacists within their contracted period to ascertain if the pharmacist is complying with the requirements of their contracted terms of service.

Role of local organisations

- 4.1 NHS Walsall Clinical Commissioning Group (CCG) has dedicated responsibilities for the commissioning of hospital, community and mental health services⁶.
- 4.3 Once a contract has been issued by NHSE there is the opportunity for Walsall CCG and Walsall Public Health to engage with pharmacists to commission locally commissioned services.
- 4.4 Walsall Council, Public Health commission services through pharmacists. This includes NHS Health Checks⁷ and emergency hormonal contraception.

Pharmaceutical Needs Assessment

- 5.1 In April 2015 Walsall Pharmaceutical Needs Assessment (PNA)⁸ was published. Its purpose is to be used as a key commissioning tool for NHS England, local authority and Clinical Commissioning Group's (CCG).

⁵ NHS England Commissioning responsibilities <https://www.england.nhs.uk>

⁶ NHS Walsall Clinical Commissioning Group. *Commissioning Responsibilities* <http://walsallccg.nhs.uk>

⁷ NHS Health Checks <http://www.healthcheck.nhs.uk>

⁸ Walsall Health and Wellbeing Board. *Pharmaceutical Needs Assessment*
http://cms.walsall.gov.uk/pna_2015_-_v1.6_-_final_version_for_hwb_17032015.pdf

- 5.2 The PNA includes pharmaceutical services and other services that may be delivered through community pharmacy. It also maps current provision, assesses local need and identifies any gaps in provision.
- 5.3 The document was prepared to meet the requirements of the National Health Service (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013⁹.

Walsall Context

- 6.1 Walsall has 78 pharmacies in total. Of these, sixty are community pharmacies, seven are distance selling / internet pharmacies and eleven are 100 hour pharmacies¹⁰. The 100 hour pharmacies allows for flexibility in opening hours and out of hours provision at evenings and weekend.
- 6.2 Data from NHSE reveals that there is a higher number of community pharmacies with 28 pharmacies per 100,000 population in Walsall compared to Birmingham, Solihull and the Black Country area. Based on this information the pharmaceutical needs assessment deemed the pharmacy service provision to be sufficient within the Walsall boundary.
- 6.3 A total of 7.61% of all prescriptions issued by Walsall's prescribers are dispensed out of the area¹¹.
- 6.4 Walsall pharmacists are pro-active in their participation in both national and local campaigns to promote public health messages to general pharmacy visitors during specific targeted campaign periods. These include winter campaigns
- 6.5 It is not apparent at this current time if the proposals will have any direct impact in Walsall.

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⁹ Local Pharmaceutical Services Regulations 2013 <http://www.legislation.gov.uk/uksi/2013/349/contents/made>

¹⁰ Pharmaceutical Needs Assessment (2015) http://cms.walsall.gov.uk/pna_2015_-_v1.6_-_final_version_for_hwb_17032015.pdf

¹¹ Pharmaceutical Needs Assessment (2015) *Cross Border Provision* (page 46) http://cms.walsall.gov.uk/pna_2015_-_v1.6_-_final_version_for_hwb_17032015.pdf