

## **Pharmaceutical Needs Assessment (PNA) Supplementary Statement**

### **1. Purpose**

- 1.1 The Health and Social Care Act 2012 established health and wellbeing boards. It also transferred responsibility to develop and update Pharmaceutical Needs Assessments (PNAs) from primary care trusts to health and wellbeing boards with effect from 1 April 2013. At the same time, responsibility for using PNAs as the basis for determining market entry to a pharmaceutical list transferred from primary care trusts to NHS England and NHS Improvement.
- 1.2 The current regulations (The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013) make provisions for the conduct of PNAs. Regulation 5 states that each HWBB must publish a PNA every three years.
- 1.3 As the pharmaceutical needs assessment is a key document for those wishing to open new pharmacy or dispensing appliance contractor premises, and is used by NHS England and NHS Improvement (and, on appeal, NHS Resolution) to determine such applications, there are serious implications for health and wellbeing boards who fail to meet their statutory duties. There is no right of appeal against the findings or conclusions within a pharmaceutical needs assessment. Health and wellbeing boards (although in reality this will be the local authority) therefore face the risk of a judicial review should they fail to develop a pharmaceutical needs assessment that complies with the minimum requirements for such documents as set out in the 2013 regulations, or should they fail to follow due process in developing their pharmaceutical needs assessment, e.g. by failing to consult properly or take into consideration the results of the consultation exercise undertaken, or fail to publish by the required deadlines
- 1.4 The current PNA, was published on 1st October 2022. Following Publication of the PNA, the HWBB is required to review, update as required, and produce a timely supplementary statement for the existing PNA and maintain an up to date (in so far as is practical) a map of pharmaceutical services for Walsall.
- 1.5 The purpose of this report is to inform the Health and Wellbeing Board of the publication of a supplementary statement, detailing the changes and any impacts to pharmaceutical service provision in Walsall since the publication of the statutory PNA.

### **2. Recommendations**

- 2.1 The HWBB note the key requirements for PNAs described within this report.
- 2.2 The HWBB note the enclosed supplementary statement, which will be published on the [Walsall Public Health Website](#).

### 3. Report detail

3.1 Walsall Health and Wellbeing Board's current Pharmaceutical Needs Assessment (PNA) was originally published 1<sup>st</sup> October 2022.

3.2 Since then, the following items have been identified as needing updates to the Regulations, Community Pharmacy Contractual framework or premises details update. This updated information should be read in conjunction with the last PNA and reflects the position as of 10<sup>th</sup> April 2024.

i. On 27th April 2023, the Department of Health and Social Care (DHSC) introduced regulatory changes in response to increased temporary closures (temporary suspensions in the provision of pharmaceutical services) of pharmacies in England and related pressures. The changes are contained within The National Health Service (Pharmaceutical and Local Pharmaceutical Services) (Amendment) Regulations 2023 and add to and amend the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (PLPS regulations).

The regulatory changes took effect on 25th May 2023 of which one of the changes provides an opportunity for 100-hour community pharmacy owners to apply to reduce their total weekly hours to 72, subject to various requirements.

ii. Three new Advanced Services have been commissioned by NHS England/Improvement – Lateral Flow Device Service, Pharmacy Contraception Service and Pharmacy First (not to be confused with the Minor Ailments Service commissioned by Black Country Integrated Care Board (ICB)).

iii. Four of the clinical pathways within the Pharmacy First Service were part of the Local Enhanced Service, Extended Care Services Tier1 and Tier 2 detailed in the 2022 PNA; these four pathways have been decommissioned and the two remaining pathways, Infected Eczema and Acute Bacterial Conjunctivitis are part of a review process and so have been paused.

3.3 These changes to pharmacy provision have been mapped and evaluated to determine the impact, if any, on service accessibility to residents. This assessment can be viewed [here](#).

3.4 **However, overall it is concluded these changes do not impact pharmaceutical services access for our population.**

### 4. Implications for Joint Working arrangements

4.1 The updates to the PNA are for information only and do not have any implications for joint working arrangements between the partners of the HWBB.

## 5. Health and Wellbeing Priorities

Reducing Inequalities remains a core action within and underlying each of the priorities of the Health and Wellbeing Board. The Pharmaceutical Needs Assessment, and inclusion of supplementary statements ensures that provision of, and access to pharmaceutical services meets the diverse needs of our residents.

### Background papers

- [The National Health Service \(Pharmaceutical and Local Pharmaceutical Services\) Regulations 2013](#)
- [Walsall Pharmaceutical Needs Assessment 2022 - 2025](#)

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