

5 October 2010

Title of the Report Pharmaceutical Needs Assessment (PNA)

Ward(s) All

Portfolios:

Executive Summary:

NHS Walsall is required by statute to complete and publish a Pharmaceutical Needs Assessment (PNA) by 1st February 2011 that meets the requirements of the Health Act 2009 which came into force on 24th May 2010.

The PNA will shape the strategic direction of pharmacy services, what services pharmacies provide and will be used to make decisions on applications to open new pharmacies.

The main conclusions of the draft PNA are that the people of Walsall have good access to pharmaceutical services and there is no need to grant applications to open new pharmacies. The PNA has found that existing 100 hour pharmacies meet the pharmaceutical needs for patients accessing GP extended opening hours and the GP walk-in-centre, therefore they will not be granted to reduce their opening hours. The PNA has found that there are a few gaps in pharmaceutical provision of enhanced services, but for some enhanced services the service is provided by other providers in the area so there is no service gap, but for other enhanced services there is a need to develop existing pharmacies to provide services where there is a need in particular areas.

The full Pharmaceutical Needs Assessment document can be accessed via NHS Walsall's website from 1st October 2010 if you wish to view the full document–http://www.walsall.nhs.uk/Have_your_say/PNA.asp . If you wish to receive a hard copy of the document please contact Jackie Bryan on 01922 618399.

NHS Walsall has developed a consultation plan in order to consult with a wide range of public and patient groups and all stakeholders listed in the regulations. NHS Walsall has developed a set of consultation questions although stakeholders can respond to any aspect of the PNA.

The outcomes of this report are to:-

- **Inform the Overview and Scrutiny Committee of the main conclusions of the draft PNA**
- **Inform the Overview and Scrutiny Committee of the public consultation process being held during 1st October to 30th November 2010.**

Reason for scrutiny:

The PNA needs to be scrutinised by the panel to ensure that:-

- NHS Walsall's PNA has taken into account the views of the public and stakeholders during the consultation and reflects the views and aspirations of local communities
- NHS Walsall's PNA has prioritised service delivery according to need and strategic priorities
- NHS Walsall's PNA has addressed equal access to services and successful outcomes from services based on needs

Recommendations:

That:

1. **The panel receive the draft PNA for consideration**
2. **The panel respond to the consultation**
3. **The panel PNA lead (Valerie Woodruff) attends the PNA Steering Group meeting in December 2010 whereby the steering group will be considering the findings and responses to the PNA consultation.**

Background papers:

NHS Walsall's draft PNA

Resource and legal considerations:

The PCT could face judicial review if the PNA does not meet the minimum standards required set out in the Health Act 2009.

Citizen impact:

The PNA provides the strategic direction of pharmacy services and will be used to make decisions on applications to open new pharmacies. The PNA will decide on services to be decommissioned, where they do not meet strategic priorities and new services to be commissioned to pharmacies. The PNA looks at public health needs for services and public need, through a public survey for services as part of this assessment. The PNA could therefore affect services provided in certain areas and what needs and services are prioritised above others.

Environmental impact:

N/A

Performance management:

N/A

Equality Implications:

Has an Equality Impact Assessment been carried out? **No**

If yes, summarise the key findings here.

Consultation:

Out to public consultation during 1st October and 30th November 2010.

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The Health Act 2009, which came into force on 24th May 2010 introduces a statutory duty for PCTs to undertake and publish a PNA and then use the PNA as the basis for determining market entry to NHS pharmaceutical services provision. A PNA is defined as the statement of needs for pharmaceutical services (in a PCTs area) which each Primary Care Trust is required by law to publish and plays an essential role in equipping the PCT to deal with applications to provide pharmaceutical services under the Control of Entry processes and to reduce the associated risk to the PCT. The amended regulations set out the minimum requirements of the content of the PNA and also the public consultation that PCTs must adhere to. The final PNA must be approved and published by the PCT by the 1st February 2011. The content of the PNA is not subject to judicial review but the PCT could face judicial review if the process followed in engaging stakeholders and public consultation is not undertaken correctly and views are not taken into account.

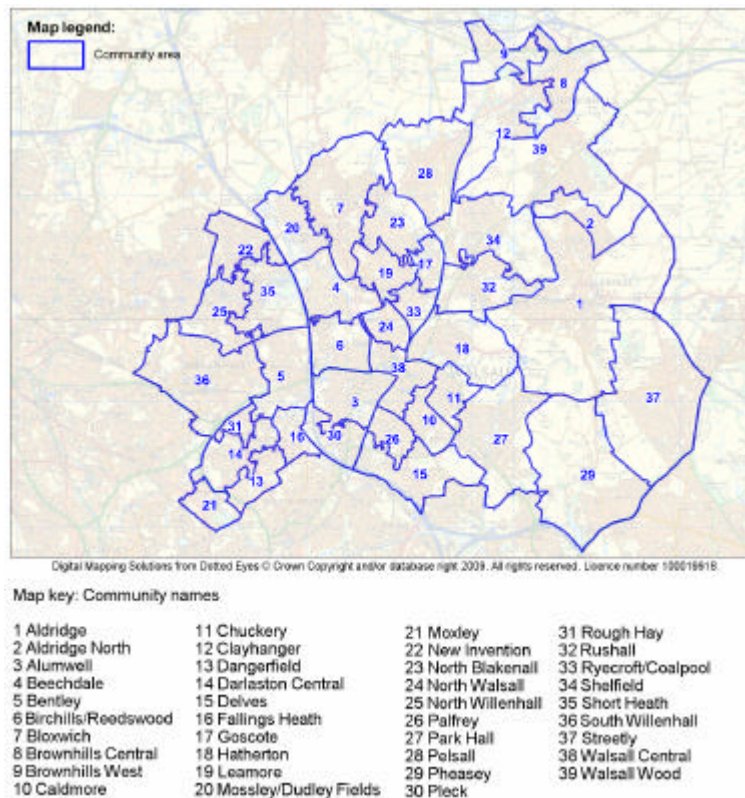
1.2 Aims of the PNA

The aims of the PNA include enabling the PCT, Practice Based Commissioning clusters, Local Pharmaceutical Committees, pharmacy contractors and other key stakeholders to:

- Understand the pharmaceutical needs of the PCTs population and where this need is currently met or not met and prioritise need
- Gain a clear picture of community pharmacy services currently provided
- Make appropriate decisions regarding applications for NHS pharmacy contracts
- Commission appropriate and accessible services from community pharmacy as the PNA can identify areas for future investment or development or areas where decommissioning is required.
- Clearly identify and address any local gaps in pharmaceutical services
- The PNA can control market entry of new service providers and services (PNA will be the basis for determining contract applications in the future)
- Stipulate the range of services required from “Control of Entry exempt” pharmacy applications (e.g. 100-hour pharmacies)
- Consider the potential of community pharmacy in contributing to the redesign of health services

1.3 PNA localities

Walsall PCT has been divided into 39 localities called “communities” with boundaries which were the result of a large Local Authority consultation with residents in 2000-2001 in Walsall and therefore more likely to be a real world view of Walsall geography.



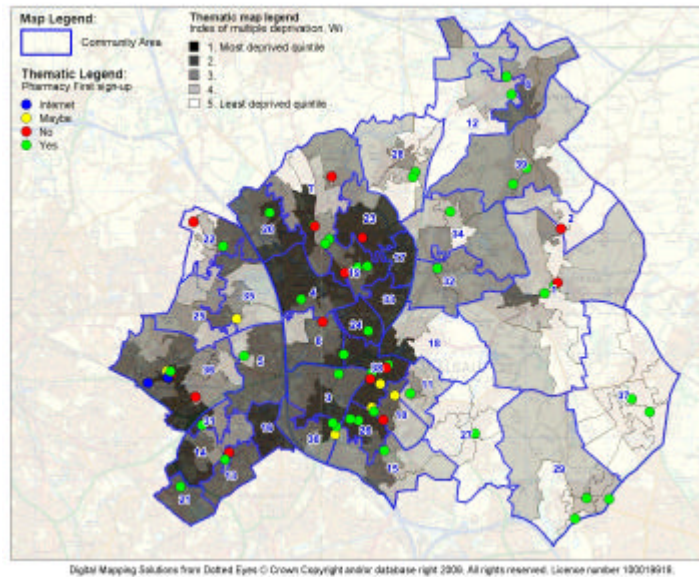
1.4 PNA Conclusions

The PNA has found that the population of Walsall has good access to dispensing services of pharmacies. The distribution of pharmacies in Walsall is as good or better when compared to PCTs in Walsall's ONS Cluster or PCTs in the West Midlands. There is good coverage of dispensing services to populations in Walsall's localities and there is a good alignment to GP services. Access in Walsall has improved recently as three new 100 hour pharmacies have opened since 2007. The PNA conclusion is that there are no gaps in service provision for dispensing services across Walsall and we do not see a need to grant applications to open any new pharmacies. The PNA has concluded that there is a need for the essential and directed services provided by the existing 100 hour pharmacies to be provided outside of usual pharmacy opening times to cover GPs extended opening hours and the GP walk-in-centre, therefore these 100 hour pharmacies will not be authorised to reduce their hours.

PCTs have scope to commission community pharmacy services locally depending on local need via the Enhanced Service route. Currently NHS Walsall commission a minor ailments scheme (Pharmacy First), emergency hormonal contraception, supervised consumption of methadone, needle exchange, smoking cessation, weight management, palliative care, medicines management support to care homes as local enhanced services. For each of these services the PNA has looked at the need for the enhanced service in each area and the service provision by pharmacy providers and other providers (e.g. GPs, community service providers) to identify any gaps.

Minor Ailments Scheme (Pharmacy First)

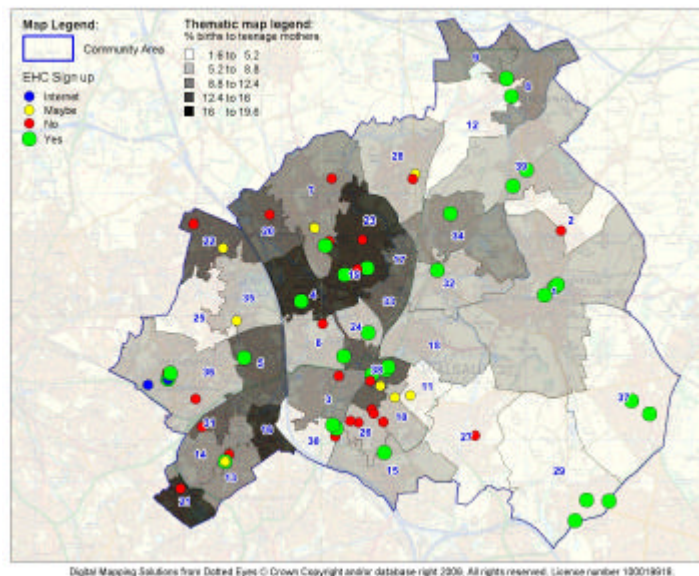
Pharmacy First is a minor ailments scheme whereby those patients that are exempt from paying prescription charges are able to obtain a consultation with a pharmacist and medicines over the counter free of charge for a list of minor ailments, avoiding the need for the patient to attend a GP appointment to receive a prescription. There are three localities where the sign up and activity for the enhanced service do not match need and these are Bloxwich (7), North Blakenall (23) and New Invention (22).



NHS Walsall will meet this gap through current community pharmacy providers in these areas. NHS Walsall has changed the sign up process for this service therefore anticipates that the sign up for this service will change remarkably and the gaps will be filled with the existing pharmacies in the area.

Emergency Hormonal Contraception (EHC)

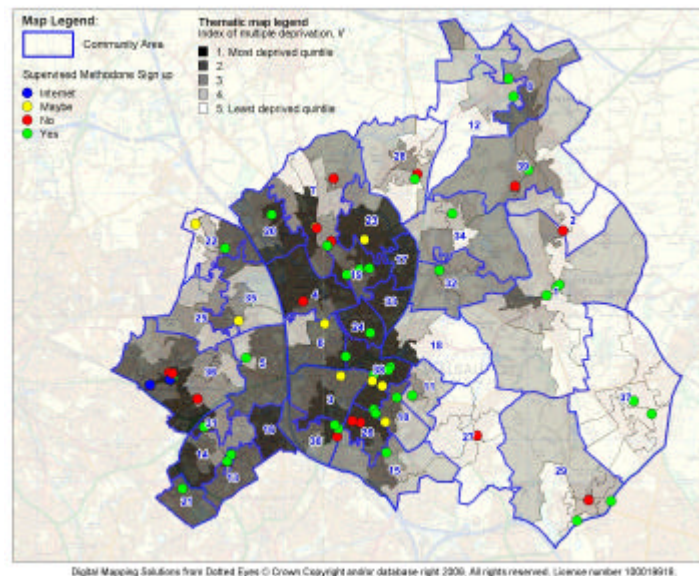
The aim of this service is to improve access to emergency contraception and sexual health advice to help contribute to a reduction in the number of unplanned pregnancies in the client group and to improve clients' access to Chlamydia testing in primary care settings.



There are no gaps for EHC Services within Walsall as all GPs provide this service across the borough but NHS Walsall will encourage and support pharmacies in Moxley (21), New Invention (22) Mossley/Dudley Fields (20) and Bloxwich (7) to become accredited for EHC to improve access to EHC.

Supervised Consumption of Methadone

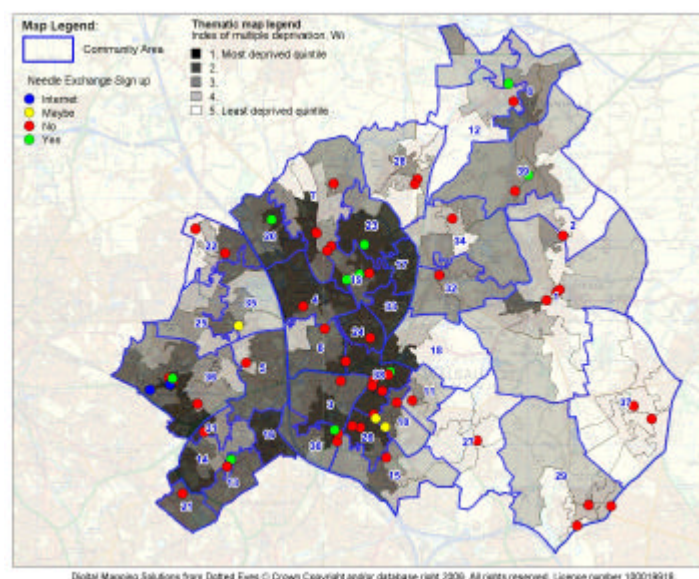
The supervised methadone service requires the pharmacist to supervise the consumption of prescribed medicines at the point of dispensing in the pharmacy, to ensure that the dose has been administered to the patient, a drug user in treatment.



There are no gaps for Supervised Methadone provision within Walsall as the current providers give adequate cover for this service. The numbers of pharmacies participating has increased when the numbers in treatment has remained static. To improve access to this service NHS Walsall will encourage and support those pharmacists that are nearly accredited to secure improvements in access. There are pharmacies across the border that Walsall have accredited to provide supervised methadone which are Park Lane Pharmacy in Wednesbury and A Brickley Ltd, Ashmore Park and there are another four of the commonly accessed pharmacies in Wolverhampton that offer this service if patients wish to access them.

Needle Exchange

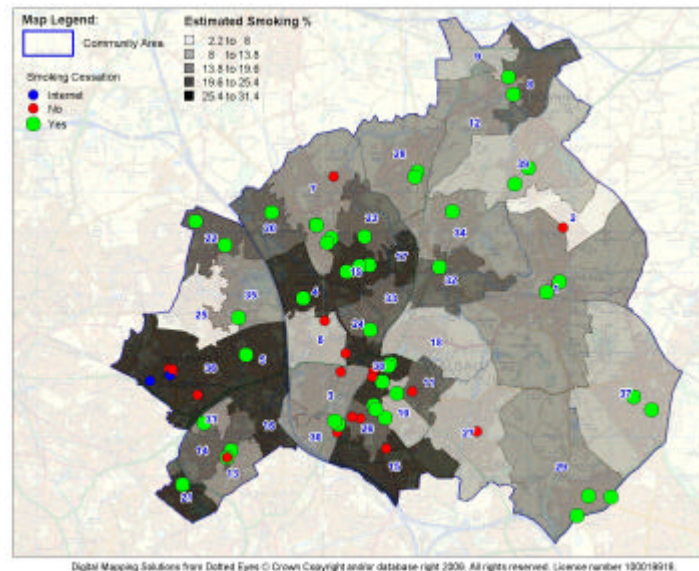
The needle exchange service allows pharmacies to provide access to sterile needles and syringes and a sharps container for return of used equipment.



During 2009-10 Addaction, a drug addiction charity (locality 38) distributed 157,743 needles. There are no gaps for needle exchange provision within Walsall as the current providers give adequate cover for this service. The numbers of pharmacies participating has increased when the numbers in treatment has remained static. To improve access to this service NHS Walsall will encourage and support those pharmacists that are nearly accredited to secure improvements in access.

Smoking cessation

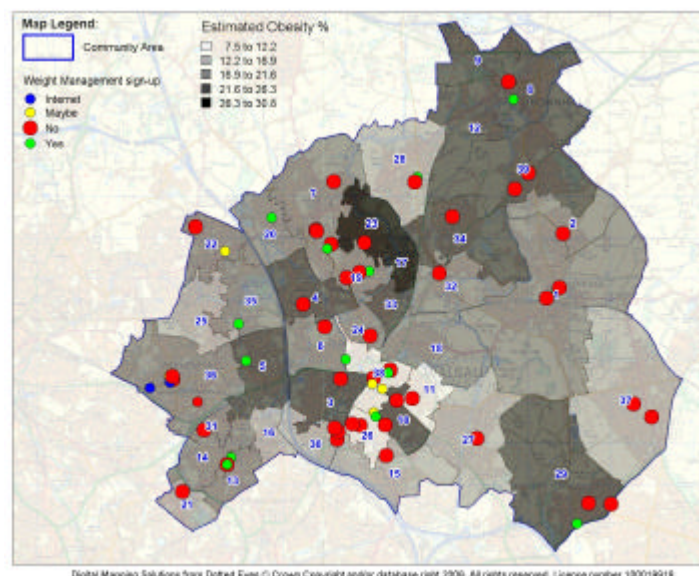
The service aims are to provide one-one smoking cessation support and advice over three months for those who wish to quit smoking and provide an appropriate form of NRT.



There are no gaps for smoking cessation services within Walsall as there are many providers of this service. There are gaps in the pharmaceutical provision but NHS Walsall will encourage and support more pharmacies to go through the procurement process to secure better access for Walsall residents, especially in South Willenhall (36) and the Delves (15).

Weight Management

To service aims are to hold one to one consultations with patients who are overweight to reduce the number of overweight patients.



There are gaps for weight management services within Walsall but NHS Walsall will support existing pharmacies and GPs to provide this service to secure better access for Walsall residents.

Palliative Care Service

The palliative care service is an out of hours on-call service whereby the pharmacist on call would be available to dispense a prescription for palliative care drugs to improve access and ensure continuity of supply. The providers of this service sign up to the on-call rota so that weekends and bank holidays are covered.

There are no gaps for the Palliative Care Services within NHS Walsall.

Medicines Management to Care Homes

The aim of the Care Homes service is to provide advice and support to residents and staff in a Care Home relating to medicines management.

There are no gaps for the Care Homes Services within NHS Walsall.

Future Enhanced Services

NHS Employers (2009) guidance on developing PNAs includes a list of Enhanced Services which PCTs may commission under local arrangements from community pharmacists, some of which Walsall currently commission. The recent White Paper, Liberating the NHS (2010) suggests that future commissioning of these services would naturally sit with new GP consortia but this PNA sets out those services that have the greatest strategic fit and scope to be provided by community pharmacists.

There is a need for introducing Alcohol Services within NHS Walsall as the service addresses many health issues that have been highlighted as priorities. NHS Walsall will fill this gap through a health promotion campaign in the first instance and look to the GP consortia to agree to include Community Pharmacy providers in the roll-out of the North PBC alcohol screening and brief intervention pilot.

NHS Walsall proposes to extend the Health Check service to community pharmacy providers in areas where there is high need and low provision by the GPs.

1.5 Consultation

NHS Walsall will be formally consulting on the draft PNA during 1st October to 30th November 2010. In the PNA regulations the PCT have to consult with the following as a minimum :-

- Local Pharmaceutical Committee(LPC) (including Walsall LPC and LPCs of neighbouring PCTs)
- Local Medical Committee (LMC) (including Walsall LMC and LMCs of neighbouring PCTs)
- Community Pharmacists
- Dispensing GPs
- any local authority with which the PCT is or has been a partner PCT
- any neighbouring PCT (Sandwell PCT, Wolverhampton PCT, BEN PCT, South Staffs PCT)
- any NHS trust or NHS foundation trust in its area

- any relevant local involvement network, and any other patient, consumer or community group in its area which in the opinion of the PCT has an interest in the provision of pharmaceutical services in its area;

In addition to these groups stipulated in the regulations NHS Walsall will be consulting with the following groups:-

- PBC Clusters
- Practices
- Drug and Alcohol Addiction (DAAT) partnership
- Head offices of pharmacy multiples
- Community Health
- PCT staff
- MyNHSWalsall

NHS Walsall has identified the following patient, consumer or community groups in its area to consult with:-

- Overview and Scrutiny Committee
- Practice Participation groups
- MyNHSWalsall
- Neighbourhood Management Areas
- Walsall Voluntary Action
- Over 50s forum
- Disability forum
- youth parliament
- Support Supervision tutors for Expert Patient Programme
- Drug and Alcohol Addiction (DAAT)/Addaction
- Asian Women's Network
- Black sisters

NHS Walsall will be adopting various methods for consultation including:-

- Focus groups to test assumptions and conclusions in PNA
- Formal presentations to committees identified in regulations
- Mail out of draft PNA and consultation questions in electronic or hard copy format.