Item No. 11.	Classification: Open	Date: 2 May 2017	Meeting Name: Health and Wellbeing Board	
Report title:		Pharmaceutical Needs Assessment – 2018 Refresh		
Ward(s) or groups affected:		All Southwark wards and all population groups		
From:		Professor Kevin Fenton, Director of Health and Wellbeing		

RECOMMENDATIONS

- 1. Southwark Public Health invites the Health and Wellbeing Board to:
 - Comment and agree the scope, process and timeline set out in this document for the refresh of the Pharmaceutical Needs Assessment.
 - Instruct the public health team to lead, deliver and report back to the Health and Wellbeing Board in due course on progress.

BACKGROUND INFORMATION

- 2. Since 1 April 2013, every Health and Wellbeing Board (HWB) in England has held 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).
- 3. This PNA refresh for Southwark and due for publication in March 2018 seeks to:
 - Identify the current and future pharmacy needs for Southwark's population based on demographics of the borough and services within neighbouring areas
 - Engage with professionals and the public to identify whether unmet need or duplication is experienced; with an impetus to allocate resources more efficiently
 - Present and compare the current state of pharmacy provision in Southwark and the services they currently provide - including dispensing, providing advice on health, medicines reviews and local public health services, such as stop smoking, sexual health and support for drug users

KEY ISSUES FOR CONSIDERATION

Local context

4. The PNA will be undertaken in the context of the needs of the local population. Health and wellbeing needs for the local population are described in Southwark's Joint Strategic Needs Assessment. The PNA will not duplicate these detailed descriptions of health needs and should be read in conjunction with the JSNA.

- 5. The Southwark profile will include the following information:
 - Demography including age/gender, population projections (in the next three to five years), ethnicity and deprivation
 - The health needs of the local population (including healthy lifestyles) compared to England average / inequalities within the borough.
 - National and local strategic plans, including the local commissioning strategy, CCG Primary Care Plan and the local joint Health and Wellbeing strategy.

Assessment of pharmaceutical services

- 6. In this section we will include all the pharmaceutical services provided in the borough and more specifically:
 - Essential services (distribution of pharmacies / opening hours and access / dispensing)
 - Premises (consultation areas / access for those with a disability)
 - Advanced services (Medicines Use Reviews / New Medicines Service / appliance use reviews / stoma appliance customisation service)
 - Enhanced services (London Community Pharmacy Vaccination Service / seasonal influenza vaccination)
 - Locally commissioned services (stop smoking / sexual health / NHS Health Checks / supervised consumption / needle and syringe exchange service/ free (vitamin) D distribution)

The role of pharmacy in improving the health and wellbeing of the local population

- 7. Providers of pharmaceutical services have an important role to play in improving the health of local people. They are easily accessible and are often the first point of contact, including for those who might otherwise not access health services. Community pharmacies can contribute to the health and wellbeing of the local population in a number of ways, including safe supplying of medication, support for self-care or self-limiting illnesses, providing information and brief advice, providing on-going support for behaviour change and signposting to other services.
- 8. Commissioners are recommended to commission services which are evidencebased, high quality, consistent, equitable, and accessible and evaluated through a framework and implementation process which ensures governance.

Lessons from the current PNA

- 9. Community pharmacies are the main provider of smoking cessation services in Southwark. They provide pharmacy based one-to-one smoking services improving choice and access for would-be quitters.
- 10. All pharmacies in Southwark have been offered the opportunity to deliver Emergency Hormonal Contraception (EHC), making pharmacies one of our main providers. The service includes an advisory service to signpost the relevant population (under 25s) for chlamydia screening when Emergency Hormonal Contraception is provided, since those requiring such contraception may also be at risk of infection. A small number of pharmacies have been commissioned to provide needle exchange across the borough.

- 11. These pharmacies were commissioned based on specific criteria including flexible opening hours, geography and prevalence of injecting users.
- 12. The Local Government Association (LGA) report recommends that local commissioners consider the Healthy Living Pharmacy model and how it could be used to help improve health and reduce inequalities.
- 13. The findings from the most recent PNA identified that while there was no need for additional pharmacies, the PNA should be the basis for all future pharmacy commissioning intentions and that pharmacies should provide a wide range of services above core contracts.

Policy implications

- 14. The refreshed PNA will focus on the following key areas:
 - Provision of local pharmaceutical services in Southwark
 - Review of the locations, opening hours and access
 - The extended opening hours of some community pharmacies.
- 15. For Commissioners:
 - Ensure pharmacy provision is equitable across the borough, with services being relevant to key issues in each ward.
 - Work more closely with pharmacies to increase population awareness of pharmacy services. This would help services to be used more effectively and contribute to the improvement of the health of the local population.
 - Plan pharmaceutical services for projected demographic changes, for example the expected growing of elderly population
 - Review the service provision in the event of new housing developments and new estates.
 - Ensure pharmacy services are in-line with wider service reviews and strategies across the borough.
- 16. For the Health and Wellbeing Board:
 - Ensure there are systems in place to monitor potential changes that will affect the delivery of pharmaceutical services and have a process in place to decide whether the changes are significant and any actions needed to be taken.
- 17. For Pharmacists:
 - Ensure patients are aware of services that may improve access to services, such as language services.

Community impact statement

18. Providers of pharmaceutical services have an important role to play in improving the health of local people. They are easily accessible and are often the first point of contact, including for those who might otherwise not access health services. Community pharmacies contribute to the health and wellbeing of the local population in a number of ways, including safe supplying of medication, support for self-care or self-limiting illnesses, providing information and brief advice, providing on-going support for behaviour change and signposting to other services.

Resource implications

19. The PNA refresh will be undertaken in house and led by Public Health. Some resources may be required to conduct a public engagement survey and a pharmacy workshop as part of the requirement to engage with the public and community pharmacies in the borough. Discussions are underway with NHS England as to the scope of this engagement, but it is not anticipated that any additional costs would be significant at this stage.

Legal implications

20. The refreshed PNA will be undertaken in accordance with the requirements set out in regulations 3-9 Schedule 1 of the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013.

Financial implications

21. There will be no financial implications. The PNA document will be produced in house with contribution from various stakeholders identified as part of the PNA engagement process.

Consultation

- 22. The PNA refresh requires a steering group that will include leading members from the council (PH Team), Southwark CCG and Medicines Optimisation Team, Local Pharmaceutical Committee (LPC), Local Medical Committee (LMC), NHS England and Healthwatch Southwark.
 - In the process of undertaking the PNA the steering group will consult the views of a range of key stakeholders (such as neighbouring boroughs Lambeth/Lewisham, local pharmacies, etc.) to identify issues that affect the commissioning of pharmaceutical services and to meet local health needs and priorities.
 - A pharmaceutical service mapping workshop and a stakeholder event will be organised in spring / summer 2017 respectively.
 - If required, ¹ a 60-day public consultation will be undertaken from October 2017 to early December 2017 to seek the views of members of the public and other stakeholders, on whether they agree with the contents of the PNA and whether it addressed issues that they considered relevant to the provision of pharmaceutical services. The feedback gathered from the consultation will be reported and reflected in the final PNA. See Appendix 1 for the PNA timeline.

¹ We understand that there is a pan-London approach and that more clarity is required from the PNA lead at NHSE in understanding what the minimum requirements for refreshing the current PNA as well as their support to HWBs would be at this stage.

BACKGROUND DOCUMENTS

Background Papers	Held At	Contact				
Southwark Pharmaceutical Needs Assessment 2015	http://www.2.southwark.g ov.uk/downloads/downlo ad/3757/southwark_phar maceutical_needs_asses sment	Dr Leidon Shapo Tel: 020 7525 7705				
Link: http://www.2.southwark.gov.uk/downloads/download/3757/southwark_pharmaceutical_needs_assessment						

APPENDICES

No.	Title	
Appendix 1	Gantt Chart for Southwark's Pharmaceutical Needs Assessment, 2018 refresh	

AUDIT TRAIL

Lead Officer	Richard Pinder, Consultant in Public Health Medicine					
Report Author	Leidon Shapo, Head of Programme (Health & Social Care)					
Version	Final					
Dated	19 April 2017					
Key Decision?	No					
CONSULTATION WITH OTHER OFFICERS / DIRECTORATES /						
CABINET MEMBER						
Office	r Title	Comments Sought	Comments Included			
Director of Law and Democracy		No				
Strategic Director of Finance and Governance		No				
Cabinet Member		Advised				
Date final report sent to Constitutional Team			19 April 2017			