

Item: 6	Classification: Open	Date: 25 July 2024	Meeting: Health & Social Care Scrutiny Commission
Report title:		Health & Social Care Scrutiny Commission: Community Pharmacy	
Ward(s) or groups affected:		All	
From:		ICB Medicines Optimisation Integrated Commissioning	

BACKGROUND INFORMATION

1. Purpose

- 1.1. This briefing provides an update on community pharmacy provision following a member enquiry regarding pharmacy commissioning and funding arrangements, medication supply management, locally commissioned substance misuse services, and the Pharmacy First scheme.
- 1.2. Subsequently the Health & Social Care Scrutiny Commission have requested a report on local pharmacy commissioning addressing the concerns in paragraph 1.1, and clarification as to the extent to problems can be addressed at a local, South East London and/ or national level.

2. Background – Community Pharmacy

- 2.1. Pharmacists play a key role in providing quality healthcare to patients in South East London.
- 2.2. Working in the community, pharmacists use their clinical expertise together with their practical knowledge to ensure the safe supply and use of medicines by patients and members of the public.
- 2.3. Pharmacists also offer testing and screening for common medical conditions and can advise on minor illnesses and ailments.

3. Pharmacy service commissioning

- 3.1. Community pharmacies in England provide services under the NHS Community Pharmacy Contractual framework (CPCF) – which is agreed at a national level by the Department of Health and Social care (DHSC), NHS England (NHSE), and Community Pharmacy England.

3.2. Within the CPCF there are three types of service:

- Essential services (for example dispensing and disposal of medications) – these are mandatory and provided by all pharmacy contractors.
- Advanced services (for example flu vaccinations) – these are voluntary and provided by pharmacy contractors that choose to.
- Locally commissioned services (for example methadone supervision) – these are voluntary provided by pharmacy contractors that choose to.

3.3. Funding and commissioning arrangements for Essential and Advanced Services are set at a national level.

3.4. Funding for locally commissioned services are set by the Integrated Care Board (ICB) or the local authority, as relevant, depending on the service. Local services are commissioned on the basis of population need, informed by the local [Pharmaceutical Needs Assessment](#).

4. Community Pharmacy provision – local and national trends

4.1. Analysis by the National Pharmacy Association (NPA) published in May 2024 suggests that there has been an increase in the rate and number of community pharmacies closing due to financial instability.

4.2. There are 58 community pharmacies located within Southwark – this includes a mixture of small businesses and national pharmacy organisations.

4.3. Southwark has a community pharmacy market of a broadly similar size (58) to statistical neighbour boroughs – Lambeth (63), Lewisham (52), Tower Hamlets (51), and Hackney (48).

4.4. The pharmacy market in Southwark has been relatively stable in recent years. Since September 2022:

- One new virtual pharmacy, providing online and postal pharmacy services, opened in-borough.
- One community pharmacy closed. The effects of this are thought to be offset by provision of services at another pharmacy located less than 150m away.

4.5. Additional information on pharmacy opening, closures, and changes of ownership can be found in the Pharmaceutical Needs Assessment.

5. Medication supply and prescribing

- 5.1. Ensuring that residents can access the right medications at the right time is a key priority for all across the health and care system.
- 5.2. Community pharmacies play an important role in enabling patients to access urgent medication during the out of hours period in emergency situations. This reduces pressures, demand, and cost on other parts of the unscheduled care system, such as emergency departments (ED), out of hours GP services, and NHS111.
- 5.3. The DHSC is responsible for the continuity of supply of medicines, and they work closely with system partners to risk assess medication shortages and outline management options at national level, issuing medication supply notifications and serious shortage protocols if needed.
- 5.4. The Secretary of State remains responsible for determining the NHS reimbursement prices for the products dispensed, and prices of medicines can be viewed in the drug tariff which is published monthly.
- 5.5. At a local level, the ICB Medicines Optimisations teams work with local general practices and community pharmacy partners to make best use of medicines; promoting safe, evidence-based and cost-effective medicines use.

6. Southwark locally commissioned services – substance misuse

- 6.1. Community pharmacies have regular contact with people using drugs and alcohol and play a vital role in their care.
- 6.2. In Southwark, the Council commission Change, Grow, Live (CGL) to deliver its All-Age Integrated Drug and Alcohol Treatment System – this includes delegated commissioning responsibilities for supervised consumption/needle exchange (NEX) in community pharmacy services since 1 April 2023.
- 6.3. Currently, 36 pharmacies provide supervised consumption and 11 pharmacies provide needle exchange in Southwark. The number of participating pharmacies has increased in recent years. There are also a number of pharmacies outside of the borough's boundaries that provide supervised consumption in line with service user preference.
- 6.4. Levels of supervised consumption activity are underpinned by a CGL risk assessment of the individual with the prescribing need.

- 6.5. Needle exchange is open access and available to any individual presenting to a participating pharmacy in the borough.
- 6.6. For participating pharmacies, Southwark's supervised consumption fee per dose is £2. There is no nationally set guidance or tariff for services of this nature. Benchmarking undertaken at the time of commissioning found Southwark's fee to be comparable to or higher than fees paid by neighbouring boroughs.
- 6.7. Officers are in the process of planning for the future provision of substance misuse treatment services in the borough. As part of this officers will undertake engagement with providers and residents who draw on services to shape the future model, ensuring that it is fit for the future and recognises the important role that community pharmacies play in the treatment system.

7. Pharmacy First scheme

- 7.1. In addition to community pharmacy services commissioned via the CPCF, since January 2024 NHS England have commissioned the Pharmacy First scheme.
- 7.2. Through the scheme community pharmacies are enabled to complete episodes of care for seven common conditions including sinusitis, sore throat, earaches, infected insect bites, Impetigo, shingles, and uncomplicated urinary tract infections in women.
- 7.3. Patients can access the Pharmacy First scheme by walking into pharmacies directly or, where appropriate, via video consultation. In addition, patients may be referred by NHS111, urgent treatment centres, emergency department, 999, or general practices.

8. Recommendations

- 8.1. It is recommended that the Health and Social Care Scrutiny Commission note the contents of this report.

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