DECISION-MAKER:		HEALTH AND WELLBEING BOARD					
SUBJECT:		PHARMACEUTICAL NEEDS ASSESSMENT (PNA)					
DATE OF DECISION:		28th JANUARY 2015					
REPORT OF:		DIRECTOR OF PUBLIC HEALTH					
CONTACT DETAILS							
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STATEMENT OF	CONFID	ENTIALITY					
None							

BRIEF SUMMARY

The Southampton Health & Wellbeing Board has an obligation to produce a Pharmaceutical Needs Assessment (PNA) for the city by 1st April 2015. A draft PNA was presented to the board at its previous meeting on 1st October 2014, where it was approved for public consultation. The statutory 60 day consultation on the draft PNA commenced on 16th October and closed on 18th December. A consultation report has been written and responses taken into account in drafting the post consultation PNA, which are now presented to the Health and Wellbeing Board for final approval prior to publication.

RECOMMENDATIONS:

- (i) That the consultation report be approved and the responses recommended by the PNA Steering Group to points raised in the consultation be endorsed by the Board.
- (ii) That the post consultation Pharmaceutical Needs Assessment be approved and adopted by the Board ready for publication on 1st April 2015.
- (iii) That authority be delegated to the Director of Public Health following consultation with the Chair and Vice-Chair of the Board, to make any drafting or other changes necessary, including any amendments recommended by the Health and Wellbeing Board.
- (iv) That authority be delegated to the Director of Public Health to publish any supplementary statements to the PNA, required by the NHS Pharmaceutical Services and Local Pharmaceutical Services Regulations (2013), to reflect any minor changes to the availability of pharmaceutical services in the city following the publication of the PNA.

REASONS FOR REPORT RECOMMENDATIONS

 To enable the publication of a Pharmaceutical Needs Assessment for Southampton by 1st April 2015 as stipulated in the NHS Pharmaceutical Services and Local Pharmaceutical Services Regulations 2013.

ALTERNATIVE OPTIONS CONSIDERED AND REJECTED

None. It is a statutory requirement to publish a PNA for the city by 1st April 2015 that secures the pharmaceutical needs of the citizens of Southampton.

DETAIL (Including consultation carried out)

- At its meeting on 30th July the Health and Wellbeing Board approved a process to ensure that a Pharmaceutical Needs Assessment would be in place by 1st April 2015, as required by the National Health Service (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013. As previous reports stated, the PNA is a tool for control of market entry and should only include those pharmaceutical services commissioned by NHS England. As the purpose of a PNA is to support market entry decisions, the document will not deal directly with the provision of public health activity within pharmacies but will link to relevant strategies and needs assessments.
- 4. The draft PNA has been developed by the consultants, Primary Care Commissioning (PCC), who secured the contract to undertake the work to produce the PNA, and concluded that there was adequate provision of pharmaceutical services in the city. The draft was reviewed by the PNA steering group and approved by the Health and Wellbeing Board at its meeting on 1st October ready for a statutory extensive 60 day engagement and consultation process to establish if the pharmaceutical providers and services supporting the population of Southampton are accurately reflected in the PNA.
- 5. The consultation ran from 16th October until 18th December and consulted those parties identified under Regulation 8 of the NHS (Pharmaceutical Services and Local Pharmaceutical Services) 2013, which included the Local Pharmaceutical Committee (LPC), Healthwatch, NHS Trusts, neighbouring Health & Wellbeing Board areas and pharmaceutical contractors. In addition, other local stakeholders were invited to consult on the draft. These included patient groups and commissioners such as local CCGs. Each consultee was contacted via a letter inviting them to respond to the consultation. In addition, e-mail reminders were sent a month into the consultation period to those consultees for which the steering group had a valid e-mail address.
- 6. Seven responses were received to the formal consultation. Overall, the majority of responses received were supportive of the draft PNA and the limited comments offered provided no reason to alter the conclusions for the final published PNA, although a number of minor changes were made as outlined below. A full consultation report has been prepared by PCC (see appendix 1) which outlines the consultation process, responses received and actions taken. PCC will be in attendance at the meeting and will summarise the process and contents to the Board.

- 7. Although the number of responses to the formal consultation was lower than expected, additional engagement with patients and contractors was undertaken through online questionnaires. The interim results from this engagement process were included in the draft PNA. However, as stated in the previous report to the Health and Wellbeing Board, the steering group felt it important to give the maximum amount of time for patients and contractors to respond and so the questionnaires remained open for four weeks into the formal consultation period. Overall 16 responses were received to the contractor questionnaire, whilst 327 responses to the patient questionnaire were received from the public which is considered to be a very good response rate.
- 8. Following the completion of the patient and contractor engagement and conclusion of the formal consultation, the steering group have considered the results and a final version of the PNA has been prepared by PCC (presented in appendix 2). A summary of the changes made are provided below:
 - DRAFT watermark removed and report header changed.
 - Minor typographical errors and clarification points raised by the LPC corrected.
 - Executive summary changed to reflect the completion of the consultation.
 - Sections 3.3.7 and 3.3.10 from the draft PNA combined into one section on tobacco, alcohol and other substance misuse, to avoid duplication (3.3.7 in the final PNA).
 - Countess Mountbatten Hospice (CMH) removed from section 6.1 following clarification.
 - Updated final patient survey results in sections 1.6.3 (summary) and 5.6 (patient access themes).
 - Updated final contractor questionnaire results in sections 1.6.4 (summary) and 5.7 (results).
 - Changes made to section 6.6 to reflect the fact that the Clinical Commissioning Group (CCG) now commissions a Minor Ailments Service.
 - Contents page updated as a result of the above changes.
 - Appendix M updated to reflect the relocation of one pharmacy.
 - No changes were made to the conclusions.
- 9. The PNA steering group present the consultation report (appendix 1) and the updated PNA (appendix 2) to the Health and Wellbeing board for approval. The Health and Wellbeing Board are asked to delegate authority to the Director of Public Health, in consultation with the Chair and Vice-Chair, to make any final changes necessary to publish the PNA by 1st April 2015.
- 10. The Health and Wellbeing Board is required to publish a refreshed PNA within three years of its previous publication. However, it must also make a revised assessment as soon as reasonably practicable after identifying

changes since the previous assessment, which are of significant extent, to the need for pharmaceutical services in the city. If this is deemed to be a disproportionate response to these changes, the Health and Wellbeing Board may publish a supplementary statement explaining changes to the availability of pharmaceutical services since the publication of its PNA. The PNA Steering Group have agreed a process for the notification of any changes to pharmaceutical services in the city and for the publication of any necessary supplementary statements that may be necessary as a result. The Health and Wellbeing Board are asked to delegate authority to the Director of Public Health to publish any necessary supplementary statements reflecting minor changes to services. Any changes which are deemed to require a full revised assessment will be notified to the Board.

RESOURCE IMPLICATIONS

Capital/Revenue

11. The costs for procuring the services of a private provider to conduct the PNA are being met from the 2014/15 Public Health budget. There are also resource implications in terms of staff time to manage the contract and collate some data. The stakeholder consultation has resource implications for the Public Health team, other SCC departments and for partner organisations.

Property/Other

12. None

LEGAL IMPLICATIONS

Statutory power to undertake proposals in the report:

13. The requirements for a PNA are set out in the National Health Service (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013.

Other Legal Implications:

14. None

POLICY FRAMEWORK IMPLICATIONS

15. None

KEY DECISION? N/A

WARDS/COMMUNITIES AFFECTED:

The PNA covers the whole city but areas of disadvantage and their access to pharmaceutical services will be a major consideration.

SUPPORTING DOCUMENTATION

Appendices

1.	Appendix K – Southampton PNA Consultation Report
2.	Southampton Post Consultation PNA

Documents In Members' Rooms

1. None

Equality Impact Assessment

Do the implications/subject of the report require an	Equality Impact	Yes
Assessment (EIA) to be carried out.		

Other Background Documents

Equality Impact Assessment and Other Background documents available for inspection at:

Title of Background Paper(s)

Relevant Paragraph of the Access to

Information Procedure Rules / Schedule 12A allowing document to be Exempt/Confidential (if

applicable)

1. None.