Pharmaceutical needs assessments: a guide for local authorities

From 1st April 2013, every Health and Wellbeing Board (HWB) in England will have a statutory responsibility[1] 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). This briefing note explains the relevance of this for local authorities and the steps they can take to produce relevant, helpful and legally robust PNAs.

Why is this relevant?

- PNAs are used by the NHS to make decisions on which NHS funded services need to be provided by local community pharmacies. These services are part of local health care and public health and affect NHS budgets.
- PNAs are also relevant when deciding if new pharmacies are needed, in response to applications by businesses, including independent owners and large pharmacy companies. Applications are keenly contested by applicants and existing NHS contractors and can be open to legal challenge if not handled properly.
- "*Healthy lives, healthy people*", the public health strategy for England (2010) says: "Community pharmacies are a valuable and trusted public health resource. With millions of contacts with the public each day, there is real potential to use community pharmacy teams more effectively to improve health and wellbeing and to reduce health inequalities." This will be relevant to local authorities as they take on responsibility for public health in their communities.
- Community pharmacy is an important investor in local communities through employment, supporting neighbourhood and high street economies, as a health asset and long term partner.

Why is this important to HWBs?

- HWBs will have a legal duty[2] to check the suitability of existing PNAs, compiled by primary care trusts (PCTs), and publish supplementary statements explaining any changes. For example, changes might be needed if the boundaries of the PCT and HWB are not the same.
- HWBs will need to ensure that the NHS Commissioning Board and its Area Teams have access to their PNAs.
- Each HWB will need to publish its own revised PNA for its area by 1st April 2015. This will require board-level sign-off and a period of public consultation beforehand[2].
- Failure to produce a robust PNA could lead to legal challenges because of the PNA's relevance to decisions about commissioning services and new pharmacy openings.

What should a good PNA cover?

- PNAs should include pharmacies and the services they already provide. These will include dispensing, providing advice on health, medicines reviews and local public health services, such as stop smoking, sexual health and support for drug users.
- It should look at other services, such as dispensing by GP surgeries, and services available in neighbouring HWB areas that might affect the need for services in its own area.
- It should examine the demographics of its local population, across the area and in different localities, and their needs.
- It should look at whether there are gaps that could be met by providing more pharmacy services, or through opening more pharmacies. It should also take account of likely future needs.
- The PNA should also contain relevant maps relating to the area and its pharmacies.
- PNAs must be aligned with other plans for local health and social care, including the Joint Strategic Needs Assessment (JSNA).

[1] Section 128A of NHS Act 2006, as amended by Health Act 2009 and Health and Social Care Act 2012
[2] Part 2 of NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 [Being drafted by Department of Health]

Tips for producing high-quality PNAs

- **Plan ahead** Ensure that you allow plenty of time to undertake the assessments, to consult with the public and local pharmacists, to make any necessary changes and to get formal approval by the HWB. There should be a board-level sponsor with responsibility for the PNA.
- **Consult widely** HWBs should bring themselves up to date with local health issues affecting pharmacies before starting on the PNA. This should include meeting Local Pharmaceutical Committees (LPCs) and the Pharmacy Local Professional Network (LPN). There should be at least one period of public consultation during the production of the PNA, with changes made where needed.
- **Think broadly** Pharmacies aren't just about dispensing medicines. They have large numbers of regular customers, most of whom do not consider themselves to be ill. Pharmacies can play an important part in providing public health services and healthy living advice. Given a choice, people frequently choose pharmacies as a convenient place to get these services. Pharmacies are also on the front line for responding to health emergencies, including pandemics.
- **Ensure accuracy** Consultation with LPCs, LPNs and the NHS Commissioning Board and its Area Teams can help with this.
- **Link up** The PNA should be seen as part of the overall planning for health and social care in the HWB area. Look at other documents on local health needs, such as the JSNA and plans by other local commissioners, including clinical commissioning groups (CCGs), to ensure that they fit together well.
- **Keep it alive** PNAs should be updated regularly through supplementary statements when required. The PNA will need to be fully revised every three years.

What you can do now

- **Get up to date** Have meetings with LPCs, LPNs and other pharmacists. Look for examples of what pharmacies can do in existing PNAs produced by the local PCT and its neighbours and those from other areas
- **Raise awareness** Make sure that HWB members, officers and executives are aware of their responsibilities. Update the HWB risk register to include the PNA
- **Set a timetable** Draw up a realistic timetable for producing updated and fully revised PNAs and appoint a suitable board-level sponsor
- **Get some help** Various organisations produced guidance to help PCTs produce their PNAs. This is likely to be updated for HWBs. Useful sources include the Local Government Association, the NHS Confederation, Local Pharmaceutical Committees and the Department of Health. New bodies, including the NHS Commissioning Board, Area Teams and Local Professional Networks should also be useful sources of information.

Useful links

www.psnc.org.uk, www.rpharms.com, www.pharmacyvoice.com

PSNC ROYAL PHARMACEUTICAL SOCIETY England PharmacyVoice *Speaking up for community pharmacy*

January 2013