

LEICESTER CITY HEALTH AND WELLBEING BOARD

DATE: 6th March 2025

Subject:	Pharmaceutical Needs Assessment
Presented to the Health and Wellbeing Board by:	Email circulation
Author:	Helen Reeve

EXECUTIVE SUMMARY:

The purpose of this report is to provide an update to the Health and Wellbeing Board in relation to the progress of the Pharmaceutical Needs Assessment (PNA), which includes an update on the timescales, an update on the statutory consultation timelines, and the work around communications.

RECOMMENDATIONS:

The Health and Wellbeing Board is requested to:

- to note this report and that updated timescales are achievable and on track (will include a brief update on current data analysis)
- to note the timelines around statutory consultations and its affect on document approval in relation to future HWB meetings
- to note the work being done around communications to ensure we achieve maximum coverage and feedback from professionals and the general public
- to receive and review a draft report in spring 2025 prior to the statutory consultation period
- to receive and review a final report in September 2025 for publication in October 2025

Pharmaceutical Needs Assessment: Context

1. The Health and Wellbeing Board has a statutory responsibility to prepare a Pharmaceutical Needs Assessment (PNA) for Leicestershire and publish it by 1st October 2025.

2. The purpose of the PNA is to:
 - Identify the pharmaceutical services currently available and assess the need for pharmaceutical services in the future;
 - inform the planning and commissioning of pharmacy services by identifying which services should be commissioned for local people, within available resources, and where these services should be;
 - inform decision making in response to applications made to NHS England by pharmacists and dispensing doctors to provide a new pharmacy. The organisation that will make these decisions is NHS England.

3. The last PNA for Leicester was produced in 2022 and can be accessed at: <https://www.leicester.gov.uk/your-council/policies-plans-and-strategies/public-health/data-reports-and-strategies/pharmaceutical-needs-assessment-pna/>

4. The responsibility for producing the PNA rests with Health and Wellbeing Boards in the general reforms embodied in the Health and Social Care Act (2012). The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 (amended) sets out the minimum information that must be contained within a PNA and outlines the process that must be followed in its development and can be found at: <https://www.legislation.gov.uk/uksi/2013/349/contents>

5. In October 2021, the Department of Health and Social Care published a pharmaceutical needs assessment information pack for local authority health and wellbeing boards to support in the developing and updating of PNAs. The guidelines for this year's PNA haven't been updated so we are using the previous version from 2021. The PNA guidance can be accessed via the following link: <https://www.gov.uk/government/publications/pharmaceutical-needs-assessments-information-pack>

6. The PNA is a statutory document that is used by NHS England to agree changes to the commissioning of local pharmaceutical services. As such, if NHS England receives a legal challenge to the services they commission based on the PNA, the local authority could also be part of that legal challenge. It is essential that the process that is followed meets the legislation that is set out and that the PNA is a robust document.

Content and Timescales

7. The regulations and guidance documents provide information on the PNA content. This has been reflected in the overview of proposed content of the PNA provided in Appendix 2.

8. Since the last PNA the Government's policy document of "Community pharmacy: delivering substance misuse services" has been implemented. The impact of these changes and an assessment of the new and emergent system should be examined to understand the implications for the PNA 2025.
9. The project plan is tight with respect to delivering a signed off PNA by the 1st of October 2025. The PNA Reference Group will monitor this and report any issues of concern to the Health and Wellbeing Board.

Scrutiny / stakeholder engagement

10. As many of the relationships required for the PNA are Leicester, Leicestershire and Rutland (LLR) wide – involving representation from NHS England, the Leicestershire Pharmaceutical Committee, Local Professional Network for Pharmacists and the Leicester, Leicestershire and Rutland Local Medical Committee - a PNA Reference Group has been established. This Reference Group will support PNA work across the three Health and Wellbeing Boards, identify any economies of scale that can be delivered through joint work and ensure that there is an effective process for consultation on the PNAs. However, there will be separate PNAs for Leicester, Leicestershire and Rutland and each will be signed off by the respective Health and Wellbeing Board.
11. Terms of reference and membership for the PNA Reference Group are attached as Appendix 1.
12. It is proposed that the Health and Wellbeing Board will approve the pre-consultation draft version and the final version of the Leicester PNA. The PNA reference group will submit the pre-consultation draft PNA for approval in the spring of 2025. The final draft of the PNA will be submitted for approval in September 2025, allowing publication towards the beginning of October 2025. The PNA Reference Group will also provide assurance to the Health and Wellbeing Board that the final PNA is an accurate reflection of the pharmaceutical needs of the population and has been developed using robust processes. Due to timings of future HWB Board dates, the draft version may have to be signed off prior to the June meeting. The Reference Group will provide assurance over the content of the draft PNA and it can be circulated to HWBB members by email for agreement to go to consultation.
13. The principal resourcing for the development of the Leicester City PNA is provided by the Leicester Public Health Intelligence Team, with information and advice provided through the PNA Reference Group by NHS England, the LPC, ICBs and others.

Consultation

14. To gather additional intelligence for the PNA, two surveys are being undertaken. One survey asks service users for their views on the current pharmaceutical provision and the second collects data on services provided, opening times etc from pharmaceutical professionals. The findings from these two survey exercises will be incorporated into the main PNA document.

The 2 surveys are open and will run from 03/02/2025 until 04/04/2025

2025 Local PNA Surveys

Public survey:

The hosting site for the survey is available here:

<https://www.leicestershire.gov.uk/have-your-say/current-engagement/pharmaceutical-needs-assessment>.

This is the direct link to the survey:

<https://surveys.leics.gov.uk/snapwebhost/s.asp?k=173833722029>.

The public facing survey will be advertised via social media (both Public health and corporate), Leicester City Council newsletters, ICB networks and community networks including a poster to be displayed within the pharmacies.

Professional survey:

This has been circulated to all Leicester pharmacy contractors for completion.

15. The PNA is subject to a 60-day statutory consultation period which will start in June 2025. Regulation 8 of the Pharmaceutical Services Regulations specifies that the Health and Wellbeing Board must consult with the following: -
- the Local Pharmaceutical Committee
 - the Local Medical Committee
 - any persons on the pharmaceutical lists and any dispensing doctors list for its area
 - any LPS chemist in its area with whom NHS England has made arrangements for the provision of any local pharmaceutical services
 - Healthwatch, and any other patient, consumer or community group in its area which in the view of the Health and Wellbeing Board has an interest in the provision of pharmaceutical services in its area;
 - any NHS trust or NHS foundation trust in its area
 - NHS England
 - any neighbouring HWB.

16. Health and Wellbeing Boards must consult the above at least once during the process of developing the PNA. Those being consulted can be directed to a website address containing the draft PNA but can, if they request, be sent an electronic or hard copy version.
17. The draft PNA will be published on the Leicestershire County Council website, and they will also host the consultation for all three PNA's.

Appendix 1:

LEICESTERSHIRE COUNTY COUNCIL, RUTLAND COUNTY COUNCIL AND LEICESTER CITY COUNCIL

PHARMACEUTICAL NEEDS ASSESSMENT REFERENCE GROUP

DRAFT TERMS OF REFERENCE

Purpose:

The Pharmaceutical Needs Assessment (PNA) is a legal duty of the Health and Wellbeing Board (HWB) and each HWB will need to publish its own revised PNA for its area by 1st October 2025.

The purpose of this reference group is to oversee the development of the PNA for Leicestershire, the PNA for Rutland and the PNA for Leicester City.

The team will set the timetable for the development of the PNA, agree the format and content of the PNA and ensure that each PNA fulfils statutory duties around consultation for the PNA.

The team will be a task and finish group, meeting between December 2024 and September 2025.

Key responsibilities:

- To oversee the PNA process
- To assure itself that the development of the PNA meets the statutory duties of the HWBs and are in line with national guidance
- To ensure active engagement from all stakeholders
- To communicate to a wider audience how the PNA is being developed
- To ensure that the PNA addresses issues of provision and identifies population need for services
- To map current provision of pharmaceutical services
- To identify any gaps in pharmaceutical provision
- To map any future provision

Governance:

- Leicestershire County Council – the Health and Wellbeing Board will ensure the PNA is conducted according to the legislation.
- Rutland County Council – the Health and Wellbeing Board will ensure the PNA is conducted according to the legislation.

- Leicester City Council - the Health and Wellbeing Board will ensure the PNA is conducted according to the legislation
- The reference group will be chaired by the Public Health Director, Mike Sandys.

PNA Reference Group membership:

Local Authority PNA Leads

- Mike Sandys, Leicestershire County Council, Chair
- Representative for Rutland County Council (or Mike to cover)
- Liz Rodrigo. Consultant in Public Health, Leicester City Council

Community Pharmacy Leicestershire and Rutland

- Rajshri Owen, Chief Executive Officer

LLR NHS (Integrated Commissioning Board)

- Paul Gilbert, Clinical Pharmacy Commissioning Lead
- Amit Sammi, Head of Strategy and Planning
- Gillian Stead, Medicines Management Lead

HealthWatch

- Harsha Kotecha, Leicester and Leicestershire
- Janet Underwood, Rutland

NHS England

- Dianne Wells, Senior Commissioning Manager, Pharmacy, Optometry and Dental

UHL

- Claire Ellwood, Chief Pharmacist, ICB

Public Health Intelligence Leads

- Victoria Rice/Hanna Blackledge, Leicestershire County Council
- Amy Chamberlain, Rutland County Council
- Helen Reeve, Leicester City Council

LLR Local Medical Committee

- Charlotte Woods, Operations Manager

Voluntary Action LeicesterShire

- Kevin Allen-Khimani

Leicestershire Equalities Challenge Group

- Mathew Hulbert, True Colours

District Council Representative

- Edd de Coverly, Chief Executive, Melton Borough Council

NB: Membership will be reviewed regularly and may be extended by agreement of the Reference Group members.

Frequency of meetings: the Group will have five meetings – December 2024, February 2025, March 2025, May 2025, August 2025.

Additional meetings may possibly be required between January 2025 and May 2025 as this will be the main development phase of the PNA.

Support arrangements:

The minutes of the meetings will be taken by admin support at by Leicestershire County Council.

Confidentiality

An undertaking of confidentiality will be signed by all members of the Reference Group.

During the period of membership of the Reference Group, members may have access to information designated by the Local Authorities or other members as being of a confidential nature and which must not be divulged, published or disclosed without prior written consent. Improper use of or disclosure of confidential information will be regarded as a serious disciplinary matter and will be referred back to the employing organisation. For the avoidance of doubt as to whether an agenda item is confidential all papers will be marked as confidential before circulation to the group members.

Declarations of Interest

Where there is an item to be discussed, where a member could have a commercial or financial interest, the interest is to be declared and formally recorded in the minutes of the meeting.

APPENDIX 2

PHARMACEUTICAL NEEDS ASSESSMENT – WORKING OUTLINE

Purpose

1. To support local commissioners in deciding on the provision of NHS funded services through community pharmacies in Leicestershire. These services are part of the local healthcare provision and affect NHS and Local Authority budgets.
2. To support NHS England in the determination of market entry decisions.
3. To provide a robust governance framework should a market entry decision are contested or challenged legally by an applicant or by existing NHS contractors.

4. To provide a source of relevant reference to Leicester, Leicestershire and Rutland local authorities, clinical commissioning groups and NHS England for the commissioning of any future of local pharmaceutical services.

Publication Outline

The PNA will review and include:

- Existing pharmacy provision and services including dispensing, health care and lifestyle advice, medicines reviews and information and implementation of public health messages and services.
- Dispensing by GP surgeries.
- Services available in neighbouring Health and Wellbeing Board areas that could affect the need for services.
- Demographics of the relevant population shown as a whole and more specifically by locality with clear indication of needs specific to each area.
- Gaps in the provision of services, taking into account future requirements that could be met by providing more pharmacies or pharmacy services.
- Local area maps locating pharmacies and pharmaceutical services.
- Impact of “The Community Pharmacy Contractual Framework for 2019/20 to 2023/24: supporting delivery for the NHS Long Term Plan” document.

The PNA will not include:

- Prison pharmaceutical services;
- Hospital pharmacies.

The published document will cover the following key areas of review (this list is a guide and will evolve alongside the development of the report and subject to advice from the wider Reference Group):

1. Context for the Pharmaceutical Needs Assessment
2. Description of current services
 - 2.1. Essential Services
 - Dispensing
 - Repeat Dispensing
 - Disposal of Unwanted Medication

- Promotion of Healthy Lifestyles
- Sign Posting
- Support for Self-Care
- Clinical Governance

2.2. Advanced Services – these are optional services that are commissioned nationally by NHS England through the core contract

- Medicine Use Review and Prescription Intervention Service (MUR) Activity
- New Medicines Services (NMS)
- Appliance use reviews (AUR)
- Stoma Appliance Customisation Service
- Community Pharmacist Consultation Service (CPCS) Activity
- Hepatitis C Antibody Testing Service Activity
- FLU Vaccinations
- Seasonal Influenza Vaccination Advances Service (FLU) Income
- Discharge Medicine Service Income
- Covid Vaccination Service Activity

2.3. Enhanced Services which are locally commissioned (list is an example)

- Out of Hours Services
- Supply of Palliative Care Drugs
- Minor Ailment Scheme
- Advice and Support to Care Homes
- Emergency Hormonal Contraception (EHC)
- Chlamydia Screening
- Stop Smoking Services
- Alcohol Brief Interventions
- NHS Health Checks
- Supervised Consumption
- Needle Exchange
- Healthy living pharmacies

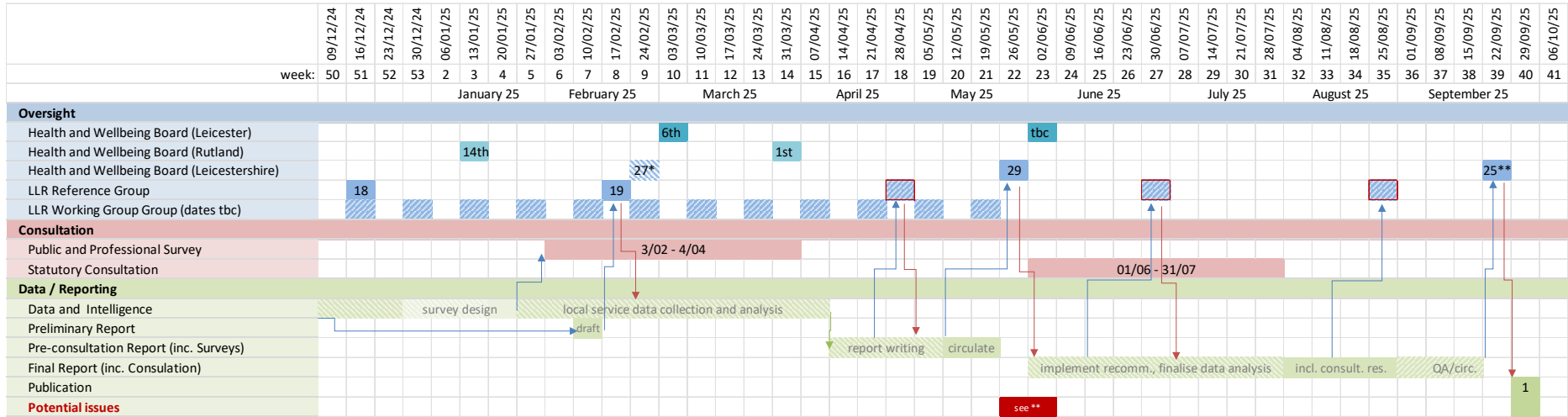
2.4. Pharmacies facilities

- Wheelchair access
- Access to disabled car parking within 100m
- Private consultation rooms
- Customer toilets
- IT facilities
- Foreign languages spoken
- Electronic prescription service

2.5. Different types of pharmacy contract

- Internet/distance selling
 - 100-hour dispensing
 - Dispensing practices
 - Dispensing appliance contractors
 - One-Stop primary care centres
 - Cross-border pharmacies affecting local population
 - Hospital pharmacy discharge medication arrangements
 - Prison pharmacy arrangements
 - Rurality
3. Each local authority will produce an overarching health needs document as part of their JSNA process which will inform the PNA.
- 3.1. Local Health Needs
- This will be the section that identifies the health needs that need to inform the commissioning of the pharmaceutical needs assessment – so the interpretation of the health needs document into the services that can be commissioned through community pharmacy
 - For example, mapping of teenage pregnancy hotspot wards to EHC provision.
 - Include a review of patients that are not within a 10-minute drive time or a 20-minute walk time of a pharmacy
 - Leicestershire and Rutland need to include a section on rurality and the changes to the areas designated as rural linked to the existing PNA
4. Changes to demography, services, etc. that will affect pharmaceutical needs
- Demographic changes
 - Planning intentions and housing developments
 - Care homes and retirement villages
 - Issues such as the impact of the co-operative pharmacy plans
5. Key Strategic Priorities
- Local Authority JHWS
 - NHS England Primary Care Strategy
 - NHS Long Term Plan
 - Community Pharmacy Contractual Framework 2019-2024
6. Neighbouring and Regional Services
7. Engagement
8. Conclusions
9. Recommendations
10. Equality Impact Assessment
11. Table of Abbreviations/Glossary
12. Appendices

PNA timeline



NOTES

- * optional HWB - a short update as a public health item
- ** leaves only 3/4 working days for any amendments following the Leicestershire HWB - likely to need an earlier sign-off by the Board

Proposed LLR Reference Group date:

Focus:

- | | | |
|------------------|---|---|
| 18/12/2024 | 1 | First meeting - initial process, scope, ToR etc |
| 19/02/2025 | 2 | Update on the analysis (preliminary reports or a presentaion), data gaps and consultation |
| week of 28/04/25 | 3 | Update including local and professional survey results |
| week of 30/06/25 | 4 | Report progress, any additional analyses of data (national and local) |
| week of 25/08/25 | 5 | Update on statutory consultation, sign off the final report draft for the HWB |

Recommended by the guidance:

- Wk 6** initial meeting - ToR, timeline, localities, content of questionnaires, structure of the document
- Wk 28** review final draft (?), consider gaps in provision, current or within lifetime of the document review and sign off final pre-consultation draft to be submitted to the HWB (**can be by email**)
- Wk 49** after the consultation - review responses and any changes needed; agree on the response to consultation to sign-off the final document (**can be by email**)
note - guidance assumes a full year development cycle