



## Health and Wellbeing Board

18 November 2014

### Report from the Director of Public Health

For decision

Wards Affected:  
ALL

## Pharmaceutical Needs Assessment Consultation

### 1.0. Summary

- 1.1. The Health and Social Care Act 2012 conferred the duty for publishing and keeping up to date a statement of the population needs for pharmaceutical services in their area, referred to as a Pharmaceutical Needs Assessment (PNA) onto Health and Wellbeing Boards.
- 1.2. A paper proposing how this responsibility should be discharged was presented to the Health and Wellbeing Board on 24 July 2014. The establishment of a task and finish PNA Steering Group was agreed, with responsibility for the task of overseeing the conduct, consultation and publication of the revised Brent PNA.
- 1.3. The Regulations covering PNAs require consultation on the PNA. The Brent Health and Wellbeing Board has delegated this responsibility to the PNA Steering Group.
- 1.4. The required consultees for PNAs include neighbouring HWBs. In order for Brent to consider PNAs from neighbouring HWBs, this paper proposes an amendment to the PNA Steering Group terms of reference.

### 2.0. Recommendations

The Board is asked to

- Delegate to the PNA Steering Group the task of reviewing PNAs from neighbouring boroughs on behalf of the Health and Wellbeing Board and responding to consultation as required.
- Agree revisions to the terms of reference for the PNA Steering Group which form appendix 1 to this report.

### 3.0. Detail

- 3.1. From April 2013, Health and Wellbeing Board have been responsible for producing, consulting on and publishing the PNA for their area. A fully refreshed PNA must be produced before 1 April 2015.

- 3.2. PNAs are used by the NHS to make decisions on which NHS funded services need to be provided by local community pharmacies. PNAs are also used in decisions as to whether new pharmacies are needed in response to applications by businesses.
- 3.4. The PNA Steering Group will oversee the production of a revision of the Brent PNA in accordance with the 2013 Regulations.
- 3.5. All Health and Wellbeing Boards are required to undertake a 60 day consultation with named partners, including neighbouring boroughs, on a draft of their PNA.
- 3.6. To support engagement in the review of partners PNAs, it is proposed that the Health and Wellbeing Board delegates the responsibility for reviewing PNAs and responding to consultation to the PNA Steering Group.

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## **Brent Pharmaceutical Needs Assessment Steering Group**

### **Terms of reference**

#### Purpose

To direct and oversee the production of and consultation on a revision of the Brent Pharmaceutical Needs Assessment (PNA) in order to enable the Health and Wellbeing Board to approve this for publication by 1<sup>st</sup> April 2015.

#### Context

If a person wants to provide NHS pharmaceutical services, they are required to apply to the NHS to be included on a pharmaceutical list. Pharmaceutical lists are compiled and held by the NHS Commissioning Board, now known as NHS England. This is commonly known as the NHS “market entry” system.

Under the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations (“the 2013 Regulations”), a person who wishes to provide NHS pharmaceutical services must generally apply to NHS England to be included on a relevant list by proving they are able to meet a pharmaceutical need as set out in the relevant PNA.

The Health and Social Care Act 2012 established HWBs. The Act also transferred responsibility to develop and update PNAs from PCTs to HWBs. Responsibility for using PNAs as the basis for determining market entry to a pharmaceutical list transferred from PCTs to NHS England from 1 April 2013.

The NHS Act 2006 (the “2006” Act), amended by the Health and Social Care Act 2012, sets out the requirements for HWBs to develop and update PNAs and gives the Department of Health (DH) powers to make Regulations.

#### **128A Pharmaceutical needs assessments**

- (1) Each Health and Well-being Board must in accordance with regulations:
  - (a) assess needs for pharmaceutical services in its area, and
  - (b) publish a statement of its first assessment and of any revised assessment.
- (2) The regulations must make provision:
  - (a) as to information which must be contained in a statement;
  - (b) as to the extent to which an assessment must take account of likely future needs;
  - (c) specifying the date by which a Health and Well-being Board must publish the statement of its first assessment;
  - (d) as to the circumstances in which a Health and Well-being Board must make a new assessment.

- (3) The regulations may in particular make provision:
- (a) as to the pharmaceutical services to which an assessment must relate;
  - (b) requiring a Health and Well-being Board to consult specified persons about specified matters when making an assessment;
  - (c) as to the manner in which an assessment is to be made;
  - (d) as to matters to which a Health and Well-being Board must have regard when making an assessment.

*"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.

### Responsibilities

- The Steering Group will oversee the production of a revision of the Brent PNA in accordance with the 2013 Regulations.
- The Group will ensure that the PNA is of high quality, specifically it will ensure that the PNA:
  - includes 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.
  - looks at other services, and services available in neighbouring HWB areas that might affect the need for services in its own area.
  - examines the demographics of Brent's population, across the area and in different localities, and their needs.
  - looks 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.
  - contains relevant maps relating to the area and its pharmacies.
  - is aligned with other plans for local health and social care, including the Joint Strategic Needs Assessment (JSNA).
- The Group will ensure consultation in accordance with the Regulations.
- The Group will ensure the findings of the PNA are presented to the Health and Wellbeing Board once published.
- The Group will consider other PNAs from neighbouring boroughs on behalf of the Health and Wellbeing Board and respond to consultation as required.

### Membership

Consultant in Public Health: Adults and Health Intelligence. Chair  
Brent Council PH analyst: Ricky Geer  
LPC nominee(s): Shabbir Panya

CCG nominee(s):	Suraj Varia medicines management, Theodora Michael primary care, Dr Sarah Basham
Healthwatch representative:	tbc
NHS E representative:	Albert Desouza
LMC:	tbc

To attend as required and provide advice:  
 Brent Council Senior Category Manager (Public Health Procurement): Zivio Mascerenas  
 Brent Council Consultation Officer: Bola Olatunde  
 Brent Council Communications link: David Green  
 Brent Council Head of Equalities: Sarah Kaiser  
 Brent Council Principal Planning Officer: Claire Jones

**Director**  
**Melanie Smith**  
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