



## HEALTH AND WELLBEING BOARD PAPER STRATEGY MEETING

---

**Report of:** Greg Fell

---

**Date:** 29<sup>th</sup> March 2018

---

**Subject:** Pharmaceutical Needs Assessment 2018-2021

---

**Author of Report:** Louise Brewins – 2057455

---

**Summary:**

This paper provides a background summary of the Pharmaceutical Needs Assessment (PNA) for 2018-2021, which the Board is asked to approve.

---

**Questions for the Health and Wellbeing Board:**

None.

**Recommendations for the Health and Wellbeing Board:**

The Board is asked to approve publication of the PNA 2018-2021 on the Council's website by 1<sup>st</sup> April 2018.

## **Sheffield Pharmaceutical Needs Assessment 2018-2021**

### **1. Background**

The Health and Social Care Act (2012) transferred responsibility for the development and updating of pharmaceutical needs assessments (PNAs) from Primary Care Trusts to Health and Wellbeing Boards with effect from 1<sup>st</sup> April 2013.

The legislative basis for developing, updating and using a PNA is set out in the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013. The Sheffield Health and Wellbeing Board published its first PNA on 1<sup>st</sup> April 2015 to cover the period 2015 to 2018. This second PNA must therefore be published by 1<sup>st</sup> April 2018 to cover the period 2018 to 2021.

The regulations set out how the PNA should be produced, what it should cover, who should be consulted, and how it should be used. Responsibility for production of the PNA, on behalf of the Health and Wellbeing Board, rests with the Director of Public Health of the relevant local authority.

### **2. Purpose and content of a PNA**

The PNA is an assessment of the need for pharmaceutical services for a specific population and is the tool by which the Health and Wellbeing Board ensures its population has access to the right NHS pharmaceutical services, at the right time and in the right place.

The PNA is also used by NHS England to determine applications to open a new pharmacy, or make changes to local NHS pharmaceutical services in the area. It does this by deciding whether the application meets a pharmaceutical need as identified in the corresponding PNA.

The PNA must include information on current provision (including any gaps) in essential, advanced and locally commissioned pharmaceutical services plus details of any other relevant services and improvements required. In addition it should set out the demography of the area, the health and wellbeing needs of the population (derived from the JSNA), level of access to and choice of pharmaceutical services and any local geographical or community variations in need, access and choice.

The PNA should also set out how it was produced, including the results of a 60 day stakeholder consultation.

### **3. Key results and next steps**

The main findings of the PNA for 2018-2021 are as follows:

- ❖ Sheffield is well-served by its pharmacies and dispensing doctors with good coverage and choice across the different areas of the City and good availability and access arrangements, including out of hours, high levels of patient satisfaction and no gaps in provision.

- ❖ Pharmacy has good links with other NHS services within the City both in relation to primary care (especially GP practices) and acute hospital services. Nevertheless, it is recognised that there is potential to develop this much further, particularly in the context of developing integrated primary care services.
- ❖ Local pharmacies are already contributing extensively to raising awareness and understanding of health risks, promoting healthy lifestyles, providing advice and signposting/ referral to treatment and providing services, often in more accessible and acceptable settings.
- ❖ Demographic and cost pressures from patients with long-term conditions is only likely to increase in the coming years and pharmacy's continued role in helping to meet this need is acknowledged. Further development of the public health role of pharmacy and commissioning of relevant services could therefore secure additional improvements in health.
- ❖ Known future other developments are unlikely to generate significant need for additional pharmaceutical provision over the lifetime of the PNA.

Relevant stakeholders were consulted on a draft of the PNA for 60 days from 20<sup>th</sup> October to 19<sup>th</sup> December 2017. The results of the consultation were included as Appendix A to the final draft of the PNA.

Board members were sent the final draft of the PNA for comment during February 2018 prior to approval at the meeting on 29<sup>th</sup> March 2018. Only one substantive comment was received. This led to the inclusion of a section on pharmaceutical needs of people with learning disabilities (section 4.28) to which Sheffield's pharmacies are well placed to respond.

#### **4. Recommendation**

The Health and Wellbeing Board is asked to approve the PNA 2018-2021.

Subject to approval, the PNA will be published on the Council's website by 1<sup>st</sup> April 2018 together with a map of pharmacies in Sheffield:

<https://www.sheffield.gov.uk/content/sheffield/home/public-health/health-wellbeing-needs-assessment.html>

Prepared by:

Louise Brewins  
Head of Public Health Intelligence, Sheffield City Council  
29<sup>th</sup> March 2018

This page is intentionally left blank