

Report to:	HEALTH AND WELLBEING BOARD
Date:	8 March 2018
Executive Member / Reporting Officer:	Director of Population Health Jacqui Dorman, Public Health Intelligence Manager
Subject:	PHARMACY NEEDS ASSESSMENT- SIGN OFF
Report Summary:	This report contains a copy of the 2018/21 Pharmacy Needs Assessment Executive summary. The full Pharmacy Needs Assessment is available separately.
Recommendations:	The Health and Wellbeing Board is asked to sign off the report so that it can be released in the public domain by the deadline date of 1 April 2018.
Links to Health and Wellbeing Strategy:	The Pharmacy Needs Assessment is key to supporting the decision making process for new pharmacy applications in Tameside, however this Pharmacy Needs Assessment also reflects upon the wider public health potential of pharmacy across Tameside.
Policy Implications:	From the 1 April 2013 every Health and Wellbeing Board in England has a statutory responsibility 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.
Financial Implications: (Authorised by the Borough Treasurer)	There are no direct financial implications arising from the report.
Legal Implications: (Authorised by the Borough Solicitor)	<p>The Health and Social Act (2012) and the NHS Pharmaceutical and Local Pharmaceutical Services Regulations 2013; states that there is a requirement for all Health and Wellbeing Board's working through Local Authorities and Clinical Commissioning Group's to produce a Pharmacy Needs Assessment every 3 years.</p> <p>Members of the Health and Wellbeing Board need to ensure they have read and fully understood the implications of the Pharmacy Needs Assessment before they agree to it being publicised. The conclusions and recommendations are set out on page 83 to 85.</p>
Risk Management :	The Health and Wellbeing Board need to ensure the delivery of the Pharmacy Needs Assessment, which is robust enough to inform local commissioning plans. The Board must be able to demonstrate need within Tameside to enable NHS England to make decisions about pharmacy applications and services delivered through pharmacies across Tameside. Without a robust Pharmacy Needs Assessment applicants who want to open a new pharmacy may appeal decisions made by NHS England on the grounds that the Pharmacy Needs Assessment was not delivered or robust enough to identify need in Tameside.

Access to Information :

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1. EXECUTIVE SUMMARY

1.1 The conclusion of this Pharmacy Needs Assessment is that the population of Tameside has sufficient service provision (including pharmacy contractors) to meet their essential pharmaceutical needs. This is clearly demonstrated by the following points:

- The higher number of pharmacies per 100,000 population (24) compared with the England average (22).
- Since 2011 the number of community pharmacies has increased considerably across Tameside and Glossop from 47 to 60 (53 in Tameside, 7 in Glossop).
- This figure includes 5 distance selling or internet pharmacies who do not exclusively serve the Tameside population as they are a service with a national footprint.
- This is still an increase of 8 face to face pharmacies across Tameside since the 2011 Pharmacy Needs Assessment. There have been no increases in pharmacy provision since the last Pharmacy Needs Assessment in 2016.
- Public consultation results indicates high levels of satisfaction with current pharmacy services in Tameside.
- There is good access to a range of pharmacies with almost all the population (90%) able to access pharmacies within one mile of their home.
- There is good location of pharmacies in relation to GP Practices across all four Tameside neighbourhoods.
- Choice of pharmacy is good for the majority of local residents as most people tend to prefer to use a familiar or 'usual' pharmacy that they tend to stay with for a relatively long period of time and this is to be encouraged as it promotes continuity of care.
- Analysis of opening hours and trading days shows there is adequate provision for out of hour's services across Tameside and Glossop.
- The maps and data contained in this document clearly show that services meet identified health and care needs in Tameside.

1.2 The potential future role of pharmacy to help meet the demands of a changing Tameside have been highlighted and future population changes and building developments that may alter population densities have been anticipated. Any future development of housing and industry that may have further impact will be re-assessed at the point that it becomes relevant and a supplementary statement will be issued if it affects the findings of this Pharmacy Needs Assessment.

1.3 Review of the current policy drivers raised some interesting strategic issues about the potential future contribution of pharmacy to the broader health challenges facing Tameside. Whilst not strictly a core part of the Pharmacy Needs Assessment they have been included for further consideration by local partners.

1.4 A consultation on this Pharmacy Needs Assessment was undertaken for 60 days between the 3 November 2017 and 5 January 2018, in line with the statutory requirements. Analysis and any feedback has been incorporated into this document where possible, with the full consultation responses being included in the appendices.

2. CONCLUSIONS

2.1 This Pharmacy Needs Assessment builds on and supersedes the 2015/18 Pharmacy Needs Assessment, and read alongside the Joint Strategic Needs Assessment and other needs assessments, gives a more complete picture of health and wellbeing need and assets across Tameside.

2.2 The impact of the further growth of pharmacy should be further considered across all relevant strategic drivers, in particular the potential negative impact of over provision and competition and government funding reductions.

- 2.3 The position of pharmacy in providing Wellness and health improvement services should continue to be considered, both in relation to specific models such as the Healthy Living Pharmacy, and, with respect to further building of social capital.
- 2.4 The extent and type of pharmacy facilities currently available from individual premises (size and number of consultation rooms etc.) and the services being delivered in each location should be mapped to provide the benchmark and foundation for any further local developments.
- 2.5 As people are not fully aware of the services available to them through pharmacies, a public promotion of pharmacies should be designed and rolled out. Pharmacy First initiatives can provide the local population with rapid access to a pharmacist who can give self-care advice on a range of minor ailments and is a cost-effective way to manage patients presenting with minor ailments and medication issues. A mapping exercise should be considered to ascertain the range of services that community pharmacies currently offer outside those that are currently commissioned by the Clinical Commissioning Group and Tameside MBC.
- 2.6 Pharmacies are eager to extend their role in prevention and early intervention and are well placed to support 'Care Closer to Home'. Given the increasing levels of people managing long term conditions, the footprint of pharmacies within and across local communities in Tameside plays an important role in terms of social capital and supporting the Care Together agenda and therefore needs to be explored in more depth.
- 2.7 To support the decision making process of the NHS local area team who make the final decisions around pharmacy applications in Tameside; it is recommended that a pharmacy consultation group meet when relevant to discuss and report on incoming pharmacy applications to ensure responses have taken into consideration the 2015/18 Pharmacy Needs Assessment findings. This group should be made up of key members of the Pharmacy Needs Assessment Steering Group.

3. RECOMMENDATIONS

- 3.1 As detailed on the front of the report.