Health Overview and Scrutiny Committee Briefing on the Pharmaceutical needs Assessment

Summary

The PCT has a statutory duty to publish its first pharmaceutical needs assessment (PNA) by 1 February 2011. Failure to meet this duty could lead to a judicial review. This paper provides information on PNAs and the action the PCT will need to take.

Background

In July 2007, the then Minister of State for Public Health, the Rt Hon Dawn Primarolo, MP announced that the Department of Health would publish a pharmacy White Paper.

Pharmacy in England: Building on strengths - delivering the future was accordingly published on 3 April 2008. It builds on A Vision for Pharmacy in the new NHS launched in July 2003 and Our health, our care, our say: a new direction for community services published in January 2006 and aligns closely with High Quality Care for All published in June 2008 and Our vision for primary and community care published in July 2008.

The White Paper set out the Government's programme for a 21[°] century pharmaceutical service and identified practical, achievable ways in which pharmacists and their teams can contribute to improving patient care through delivering personalised pharmaceutical services in the coming years.

Following consultation in autumn 2008, two clauses were included in the Health Bill 2009 (now Health Act 2009):

- to require Primary Care Trusts to develop and publish pharmaceutical needs assessments (PNAs); and
- then to use PNAs as the basis for determining market entry to NHS pharmaceutical services provision.

The Health Act 2009 contains the powers needed to require Primary Care Trusts to develop and publish PNAs and then to use PNAs as the basis for determining market entry to NHS pharmaceutical services provision. This second provision will be subject to further draft regulations and consultation later in 2010.

In July 2009, a regulatory Advisory Group drawn from interested parties was set up, to translate these proposals into reality. The Group's terms of reference are to: 'subject to Parliamentary approval of proposals in the Health Bill 2009, to consider and advise on, and to help the Department devise, regulations to implement a duty on NHS primary care trusts to develop and to publish pharmaceutical needs assessments and on subsequent regulations required to use such assessments as the basis for determining the provision of NHS pharmaceutical services'

The new regulations - The National Health Service (Pharmaceutical Services) (Amendment) Regulations 2010 and guidance are a result of their work

The duty on the PCT

The regulations place a statutory duty on each PCT to develop and publish their first PNA by 1 February 2011. The regulations set out the minimum requirements for the first PNA produced under this duty, and these include such things as data on the health needs of the PCT's population, current provision of pharmaceutical services, gaps in current provision and how the PCT proposes to close these gaps. The PNA will also consider the future needs for services

PCTs will be required to undertake a consultation on their first PNA for a minimum of sixty days, and the regulations list those persons and organisations that must be consulted e.g. the Local Pharmaceutical Committee, Local Medical Committee, LINKs and other patient and public groups.

Market Entry

In addition to being a tool to commission pharmaceutical services, PNAs will in future be used to determine applications form pharmacy and appliance contractors to open new premises in the PCT's area, or to move to new premises. This will replace the current system whereby the PCT decides if it is necessary or expedient to approve an application in order to secure access to pharmaceutical services in a particular area (also known as the control of entry system) and will help the PCT to commission pharmaceutical services to meet the health needs of its population. It is therefore important that the PNA is a robust document that it links to the PCT's Joint Strategic Needs Assessment.

Definition of Pharmaceutical Services

For the purposes of the Pharmaceutical Needs Assessment pharmaceutical services are:

- Essential Services
 - Dispensing of medicines
 - Repeat dispensing
 - Waste management (pharmaceutical)
 - Public Health
 - Signposting
 - Support for self-care
 - Clinical Governance
- Advanced Services
 - Medicines Use review and prescription intervention services

- Appliance Use reviews
- Stoma Appliance customisation
- Enhanced services
 - Locally (PCT) commissioned additional services for example smoking quit adviser, provision of emergency hormonal contraception (EHC)

They are provided by pharmacy and appliance contractors. The PNA also includes dispensing services provided by GPs but not enhanced services provided by GPs.

NHS White Paper; Equity and Excellence: Liberating the NHS

On 12th July the Secretary of State for Health launched the new NHS White Paper; Equity and Excellence: Liberating the NHS. It structurally changes the NHS with the creation of an independent and accountable NHS Commissioning Board. Amongst the roles this board will have will include the commissioning of certain services that cannot solely be commissioned by GP consortia. This includes GP (as provider) dentistry, community pharmacy and primary ophthalmic services.

The impact of this change from the direction of travel where pharmaceutical services were to be commissioned by PCTs based on need is currently not known. The relevant section of the Department of Health has been contacted to provide clarification. A meeting is also scheduled locally with the Department of Health team in early August where more clarity may be available.

Actions to date

- A County wide steering group has been set up to oversee the development of the PNA and agreement reached that all Kent PCTs will check for border consistency as part of the consultation process.
- The nomination of a Director responsible for the development of the PNA.
- Identification of the resources needed to develop and consult on the PNA
- The involvement of the key stakeholders.
- The development of a communication and patient engagement plan.
- The setting up of a local operating group.
- The development of the data collection process and criteria.
- Mapping of the current provision of pharmaceutical services.

Timetable

Action	Date	Status
Governance of production agreed	April to May 2010	Completed
Data collection and mapping of services, controlled localities and need	April to August 2010	Ongoing: controlled locality work to transfer from paper base into geographical information system taking some time
Writing of first draft	April to August 2010	Ongoing
Sharing through internal PCT Commissioning groups	August 2010	
Finalise first draft	August 2010	
Consult for 60 days widely	September to October 2010	
Amend PNA in the light of comments	November 2010	
Finalise PNA for agreement through PCT Commissioning Groups and Commissioning Subcommittee	November to December 2010	
PNA Board sign off	January 2011	
PNA Published	February 2011	

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