



## **West Sussex Pharmaceutical Needs Assessment 2022 DRAFT Project Initiation Document (PID)**

This document sets out how the West Sussex Pharmaceutical Needs Assessment (PNA) will be produced.

It sets out the local action: governance arrangements; project timeline; steering group; and resources and staff available to undertake the work.

It also outlines the background context of the PNA, information the PNA needs to provide, and statements required within it.

### **Background and Context**

#### **What is a Pharmaceutical Needs Assessment?**

The PNA is a statement of needs for pharmaceutical service provision within a local area.

It is used by NHS England in its determination as to whether to approve applications to join the pharmaceutical list under The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 as well as applications to change existing services.

It is also used by NHS England, Local Authorities (LA) and Clinical Commissioning Groups (CCG) to inform their commissioning of pharmaceutical services.

#### **Role of Health and Wellbeing Boards**

Following the restructuring of the NHS in April 2013, the responsibility of producing a Pharmaceutical Needs Assessment (PNA) was transferred from (the then) Primary Care Trusts (PCT) to the newly established Health and Wellbeing Boards (HWB).

The HWB is required to publish a revised PNA at least every three years, or when necessary. Failure to produce a robust PNA could lead to legal challenges because of the relevance of the PNA to decisions about commissioning services and new pharmaceutical services openings.

**The deadline for the publishing the PNA is October 1<sup>st</sup>, 2022.**

**The PNA will be for the time-period 2022 – 2025.**

This document sets out how the West Sussex Pharmaceutical Needs Assessment (PNA) will be produced.

It sets out the local action: governance arrangements; project timeline; steering group; and resources and staff available to undertake the work.

It also outlines the background context of the PNA, information the PNA needs to provide, and statements required within it.

## **Scope of the PNA**

Each PNA must contain information set out in the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013, Schedule 1. In order to meet the statutory obligations, the PNA needs to:

### **Identify necessary services: current provision**

- Services in West Sussex which are necessary to meet the need for pharmaceutical services of the population and those in neighbouring areas that contribute towards meeting the pharmaceutical needs for West Sussex

### **Identify necessary services: gaps in provision**

i.e., Pharmaceutical services

- that are not provided in West Sussex but need to be provided in order to meet a current need for pharmaceutical services or pharmaceutical services of a specified type, in West Sussex.
- which are currently not available but may, in specified future circumstances, be needed to meet future pharmaceutical services needs in West Sussex

### **Identify other relevant services: current provision**

Pharmaceutical services that are provided

- in West Sussex which, although they are not necessary to meet the need for pharmaceutical services in its area, nevertheless have secured improvements, or better access, to pharmaceutical services in West Sussex.
- outside West Sussex which, although they do not contribute towards meeting the need for pharmaceutical services, nevertheless have secured improvements, or better access, to pharmaceutical services in West Sussex

### **Identify gaps in provision of services that offer improvements and better access**

- Pharmaceutical services that are not provided in West Sussex, but which would (now or in the future) secure improvements, or better access, to pharmaceutical services, or pharmaceutical services of a specified type if they were provided (whether or not they are located in West Sussex)

## **Identify other NHS services**

- NHS services provided or arranged by the local authority, NHS England, West Sussex CCGs, NHS trusts or NHS foundation trusts which affect the need for pharmaceutical services.

We are also required to clearly state **how the assessment was carried out**

- An explanation of how the assessment has been carried out, in particular, how localities were determined
- how the different needs of localities in West Sussex and the different needs of the population of West Sussex who share a protected characteristic were considered
- a report on the consultation that was undertaken

And we are required **to provide a map of current pharmaceutical service provision** in West Sussex

- A map that identifies the premises at which pharmaceutical services are provided in West Sussex.

## **Pharmaceutical Services Within Scope**

The PNA statutory requirements and directions governing NHS pharmaceutical services dictate the scope of this assessment. Whether a service falls within the scope of the PNA depends on the type of pharmaceutical service provider as well as the service provided.

For the purposes of this PNA the following scope has been adopted:

- **Dispensing doctor practices:** the scope of the service to be assessed in the PNA is the dispensing service provided. All other services provided by the GP practice, including Dispensing Review of the Use of Medicines (DRUM), fall within their general medical terms of service.
- **Dispensing appliance contractors:** the scope of the service to be assessed in the PNA is the dispensing of appliances and the provision of advanced services e.g. Appliance Use Review (AUR) service and Stoma Appliance Customisation service (SAC).
- **Community pharmacy contractors:** the scope of the services to be assessed in the PNA is broad and comprehensive. All pharmacy contractors must provide essential services and the PNA will also include advanced, enhanced and locally commissioned services provided under the Community Pharmacy Contractual Framework (CPCF).

Other pharmaceutical services are outside the scope of this assessment, such as those provided in hospitals. However, where such a service has a potential to influence current service provision or future needs or service developments, they

will be highlighted. Although locally commissioned services (i.e. services commissioned from pharmacies by the local authority and the CCGs according to identified local needs) are not part of the NHS Pharmaceutical services, an overview of these services will be included in the PNA.

## **Methodology**

The 2017 West Sussex PNA is being used as a template for the 2022 PNA. There have been changes to regulations since 2017 the following documents/sites are being used to inform the development of the 2022 document:

- [Pharmaceutical needs assessments - Information pack for local authority health and wellbeing boards \(October 2021\). DHSC](#)
- [Pharmaceutical needs assessments: a guide for local authorities \(January 2013\)](#) Pharmaceutical Services Negotiating Committee
- [Pharmaceutical Needs Assessment](#) (online information and exemplar contractor questionnaires) Pharmaceutical Services Negotiating Committee

## **Governance**

**Responsible Officer:** Jacqueline Clay Public Health and Social Research Unit Manager **Accountable:** Alison Challenger, West Sussex Director of Public Health

**A steering group** will oversee (advise, review and agree) the process and publication of the PNA. The steering group will be comprised of the representatives from

- Healthwatch.
- Local Medical Committee (LMC)
- Local Pharmaceutical Committee (LPC),
- NHS England,
- West Sussex County Council Public Health
- West Sussex Clinical Commissioning Group

## Steering Group decisions/milestones

The Steering Group will be informed (monthly) of progress on the PNA. Steering Group meetings are to be held to undertake key decisions; these are outlined below.

Week commencing	Tasks/decisions
10 January 2022	Review overall process being proposed and understand operation of steering group, and individual member roles. Agree localities. Review engagement proposals.
14 February 2022	Agree surveys for contractors and public
25 April 2022	First draft review
30 May 2022	Agree consultation draft
15/22 August 2022	Review responses to consultation
12 September 2022	Agree final PNA

**Production of the PNA** - The West Sussex Public Health and Social Research Unit will lead the production of the PNA.

Name	Title	Role
Jacqueline Clay	Principal Manager, West Sussex Public Health and Social Research Unit	Overall lead
Sally Brown	Data Analyst / JSNA Information Officer	Data / GIS Analyst
Tim Martin	Principal Social Researcher	Engagement Lead - Lead on contractor surveys
Aloisia Katsande	Evidence Review Specialist	Critical reviewer

WSSCC Communications will support consultation engagement, a named lead remains (as of Dec 2021) to be confirmed.

## Surveys

- **Community Survey** - Given the on-going impact of COVID-19 (as of December 2021) a telephone survey is proposed for the community survey (with additional engagement via existing patient groups). Using a stratified sample, this will ensure a minimum number of replies for each locality and reduce pressure on the physical distribution of hard copies of surveys.

Additional engagement will be sought via Healthwatch and Patient Groups.

- **Contractor Survey** – an online survey is proposed, this will be undertaken by WSCC. There will be separate surveys for community pharmacists, dispensing GP practices and dispensing appliance contractors.

It is proposed that all surveys are conducted in March / April 2022.

### **Collection of Data**

To draft the PNA an extensive range of information will be used, broadly broken down into three groupings.

- **Data to Identify Population Need**  
To assess local needs routine data and information from the West Sussex Joint Strategic Needs Assessment will be used such as population estimates, health outcomes, information relating to poverty and deprivation, and information relating to protected characteristics and groups within the population at greater risk of poorer health outcomes. This will be reviewed at a West Sussex and locality level.
- **Data to identify current pharmaceutical services and activity (and locations of that provision)**  
In addition to information on health needs and the wider determinants of health specific data are required relating to pharmaceutical service activity. Data have been supplied by NHS Business Services Activity relating to routine pharmacy contracting, and activity data benchmarked against national and local data. Given the possible impact of COVID-19 on activity data – information for the 3 previous years of activity is being obtained. Mapping of provision and specific services will be undertaken within WSCC.
- **Data to identify “known” housing and infrastructure developments within the PNA time period**  
Detailed information at locality level identifying planned housing growth in the area has been obtained, further information on major infrastructure changes will also be sought. (Source: WSCC Planning Policy and Infrastructure Team, and District and Borough Local Plans)

### **Consultation**

A formal 60-day online consultation will be undertaken from mid-June 2022.

Under Regulation 8 we are required to consult the following:

- Local Pharmaceutical Committee for its area (including any Local Pharmaceutical Committee for part of its area or for its area and that of all or part of the area of one or more other HWBs);

- Local Medical Committee for its area (including any Local Medical Committee for part of its area or for its area and that of all or part of the area of one or more other HWBs);
  - Any persons on the pharmaceutical lists and any dispensing doctors list for its area;
  - Any LPS chemist in its area with whom the NHSCB has made arrangements for the provision of any local pharmaceutical services;
  - any Local Healthwatch organisation for its area, and any other patient, consumer or community group in its area which in the opinion of HWB has an interest in the provision of pharmaceutical services in its area; and
  - any NHS trust or NHS foundation trust in its area;
  - the NHSCB; and
  - any neighbouring HWB.
- We must provide a 60-day period (date set from the date people are notified and “served” with a draft (notified of the website on which the draft is available)
  - People may request a hard copy – and should be provided with one within a reasonable time (14 days and free of charge)
  - There must be a report on the consultation in the final version.

### **Lessons Learnt from Previous PNAs**

This is the third PNA that the West Sussex Public Health Team have worked on and we will work to ensure lessons learnt are included in the 2022 PNA:

- clear on the time-period that the PNA covers, to ensure focus on three-year period.
- work to ensure good (community) engagement from across all areas of the county
- any gaps (or indeed no gaps) need to be plainly and clearly articulated (whether relating to needs improvement or better access).

### **Risks**

<b>Risk</b>	<b>Reduction strategy</b>
Inadequate resources to support the production of the PNA	Clearly identify resources required at an early stage, externally contract activity where possible/appropriate Clear roles
Failure to produce a robust PNA could lead to legal challenges and/or judicial review because of the PNA’s relevance to decisions about	Lessons learned, involving people with experience of conducting PNA  Establishing a steering group to monitor the process

commissioning services and control of entry for new pharmacies, new pharmacy opening hours or dispensing appliance contractors	Experienced staff to lead the production of the PNA Using a regulations guidance and checklist to ensure the PNA meet statutory requirements Consult on the draft PNA Get feedback from NHSE whether the current PNA is fit for purpose
<b>Risk</b>	<b>Reduction strategy</b>
Not completing the PNA on time, missing the deadline of Oct 1 <sup>st</sup> , 2022.	Produce and agree on a project plan with timelines and milestones clarified. Seek specific advice on HWB delegation of sign off
<b>Engaging with various stakeholders</b>	
<b>Risk</b>	<b>Reduction strategy</b>
Difficulties getting key steering group members to support the production of the PNA	Invite potential members at an early stage Provide papers within timescales Communicate updates outside of meetings
Low participation by members of the public and service providers in engagement activities	Externally contract community survey Early contact with providers to inform them of planned engagement Minimise data required from contractors, move to short survey for contractors Reminders for completion of surveys/consultation.
Local elections taking place and may impact on the timescales and engagement with local population	Surveys to be completed before purdah, advice on purdah within local areas
<b>Risk</b>	<b>Reduction strategy</b>
COVID-19 impacts the ability to engage with wider public, undertake surveys	Move to telephone survey – to reduce pressure on pharmacies Use existing routes (Healthwatch, patient groups) for some groups