



Although a formal committee of Brighton & Hove City Council, the Health & Wellbeing Board has a remit which includes matters relating to the Clinical Commissioning Group (CCG), the Local Safeguarding Board for Children and Adults and Healthwatch.

Title:	Draft Pharmaceutical Needs Assessment 2022 Update	
Date of Meeting:	12 July 2022	
Report of:	Brighton and Hove Pharmaceutical Needs Assessment Steering Group	
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Wards Affected:	All	
FOR GENERAL RELEASE		

Executive Summary

The Health and Wellbeing Board (HWB) has a statutory responsibility to publish a revised Pharmaceutical Needs Assessment (PNA) every three years. However, as a result of Covid19 the regulations were amended to allow for the PNA to be published within four years, by October 2022. The PNA maps current pharmaceutical services, identifying gaps and exploring possible future needs. It's used by NHS England / Improvement and in the future NHS Sussex Commissioners to decide upon applications to open new pharmacies and informs the commissioning of pharmaceutical services.

This paper provides an update to the Health and Wellbeing Board on the draft 2022 Pharmaceutical Needs Assessment (PNA) report. The report describes the changes that have taken place in the provision of pharmaceutical services to the city since the last report was published in 2018. As part of the process, the PNA Steering Group carried out: a telephone community survey of a sample of 1,000 residents, representative of the population and two surveys with pharmacies and GPs in Brighton and Hove on the provision of local pharmacy services. The draft report includes recommendations from findings of the report for: NHS Sussex, NHS England/Improvement, Brighton & Hove City Council and community pharmacies



themselves.

A full and final PNA report will come to the Health and Wellbeing Board for approval September 2022.

1. Decisions, recommendations and any options

- 1.1 That the Board note the draft Pharmaceutical Needs Assessment report and identify any additional information required to inform it's decision on the final version of the PNA when to comes the Board for approval in September 2022.

2. Relevant information

- 2.1 There are 53 community pharmacies in Brighton & Hove including 1 distance selling pharmacy. There has been a decrease in the number of community pharmacies since the last PNA in 2018, when there were 56. This translates to 17.8 pharmacies per 100,000 residents. This is similar to that in West Sussex (18) and East Sussex (17.6). There is no national guidance on how many pharmacies should be provided per resident population. Community pharmacies are reasonably well spread across the city, with more present in more densely populated areas. However, not all services are available in all pharmacies. Nationally and locally pharmacy numbers have seen a net decrease over the last couple of years. The assessment from the PNA Steering Group is that there is no gap in community pharmacy provision that results in the need for additional pharmacies. However, there are recommendations for developing, and in some cases extending, provision of services in current pharmacies.
- 2.2 Nearly all city residential areas are within a 20 minute walk of a community pharmacy and all city areas, except for Stanmer Village are within 20 minutes of a pharmacy by public transport. All residential areas are within a 10 minute drive of a pharmacy. There are fewer pharmacies open later in the evenings in the city, compared to the 2018 PNA. No pharmacies open later than 8pm on Monday, Tuesday, Wednesday and Saturday, and no pharmacies open later than 9.00pm on Thursday and Friday. None open after 6.00pm on Sundays. However, 84% of community survey respondents strongly agreed (29%) or agreed (55%) that they can find, and use, an open pharmacy in Brighton & Hove when they need one.
- 2.3 Public satisfaction with pharmacies remains high with 92% survey respondents reporting they are very or fairly satisfied with pharmacy services. This is an increase in satisfaction since the 2018 PNA, despite a reduction in the number of pharmacies in the city over this period.

- 2.4 Although there has been an increase in the number of prescriptions, there are reported to be enough pharmacies to fulfil the flow of prescriptions. Nearly three quarters of pharmacies responding to the survey (73%; 16/22 respondents) said they would have sufficient capacity within their existing premises and staffing levels to manage an increase in demand in their area. 18% (4/22 respondents) said they would need to make adjustments to manage an increase in demand, while 9% (2/22 respondents) said they would have difficulty doing so.
- 2.5 The recommendations in the draft PNA report cover the following topic areas: vaccination delivery, general practice awareness and knowledge, evening and weekend pharmacy provision, community pharmacy capacity, becoming carbon neutral, improving health and wellbeing and cross system working.
- 2.6 In conclusion, although nationally and locally pharmacy numbers have seen a net decrease over the last couple of years, the assessment from the PNA Steering Group is that there is no gap in community pharmacy provision that results in the need for additional pharmacies. However, there are recommendations for developing, and in some cases extending, provision of services in current pharmacies.

3. Important considerations and implications

Legal:

- 3.1 The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 (“the Regulations”) set out the legislative basis and requirements of the Health and Wellbeing Board for developing and updating the PNA. The proposals set out in this paper are consistent with ensuring that the HWB is in a position to discharge its duties.

Lawyer consulted: Sandra O’Brien

Date: 130622

Finance:

- 3.2 There are no financial implications as a direct result of the recommendations of this report.

Finance Officer consulted: Sophie Warburton

Date: 130622

Equalities:

- 3.2 We have incorporated Equality Act 2010 requirements throughout the PNA document. During the PNA process we have taken into consideration protected characteristics and vulnerable groups at each stage of the process and details relating to how services affect different groups are detailed in the main report.

Supporting documents and information

Appendix 1: Pharmaceutical Needs Assessment 2022 summary findings and recommendations: draft for consultation (below)

Appendix 2: Pharmaceutical Needs Assessment 2022: Draft for consultation (attached)

Summary and recommendations

Main findings

Brighton & Hove population and its needs around pharmacy services

The Brighton & Hove population was 291,700 in 2020 and it is expected to increase to 297,800 by 2025, an increase of 2%. Older people aged 65 to 84 and 85 plus are predicted to increase most, which will correlate with an increasing number of adults with multiple long-term conditions.

The overall proportion of older people and children in the city is lower than the national average, however there is a relatively high proportion of younger adults in the city – a fifth of the city's total population is aged 19 to 28.

The health profile of Brighton & Hove residents is poorer than the national average in some areas these include smoking, sexually transmitted infections (STIs) and vaccination uptake. Community pharmacies play an important role in the provision of smoking cessation, preventing STIs and unplanned pregnancies through the C-Card scheme, free condom distribution, provision of emergency hormonal contraception and flu and Covid19 vaccination. It remains important that pharmacies are able to support needs in these areas.

Compared with England, Brighton & Hove has more single person households, including single pensioner households. It may be more difficult for these households to access community pharmacies. The city also has significantly lower car or van ownership than the South East or England.

Public access to pharmacy services

A telephone community survey of a sample of 1,000 residents, representative of the population was conducted during February and March 2022.

Community survey respondents reported that they mainly choose which pharmacy to use based on proximity to their home, their GP surgery, or their place of work.

Walking (54%) is the main mode of transport used by residents to reach their most often used pharmacy, ahead of travelling by car (29%), and public transport (9%).

Nearly all city residential areas are within a 20-minute walk of a community pharmacy and all city areas, except for Stanmer Village are within 20 minutes of a

pharmacy by public transport. All residential areas are within a 10 minute drive of a pharmacy.

There are fewer pharmacies open later in the evenings in the city, compared to the 2018 Pharmaceutical Needs Assessment (PNA). No pharmacies open later than 8pm on Monday, Tuesday, Wednesday and Saturday, and no pharmacies open later than 9.00pm on Thursday and Friday. None open after 6.00pm on Sundays. There is one pharmacy that provides a late-night emergency hormonal contraception service. It is open until 8pm Monday to Wednesday and on Saturdays, and until 9pm on Thursday and Friday. As younger people responding as part of the community survey reported that they would like to use community pharmacy services on weekday evenings after 8 pm and on Sundays there is a recommendation to expand access for this and in particular for emergency hormonal contraception services. 29% of community survey respondents strongly agreed, and another 55% agreed (a total of 84%) they can find, and use, an open pharmacy in Brighton & Hove when they need one.

Between 2022/23 and 2024/25 the Hove Station and Brighton Station/London Road areas will see the largest amount of new housing supply, potentially affecting demand for two pharmacies in the area.

Pharmacy provision and public satisfaction with services

Community pharmacies are reasonably well spread across the city, with more present in more densely populated areas. However, not all services are available in all pharmacies, and one example of this is the lack of smoking cessation services in pharmacies in Portslade.

Pharmacy provision is changing with increasing numbers of distance selling pharmacies providing medications for residents.

Since the last PNA a number of new services such as Covid-19 vaccinations and lateral flow tests (LFTs) have been commissioned and delivered by community pharmacies. Some of these including, LFT provision, have now ceased. Covid-19 vaccination provision continues in four pharmacies.

Public satisfaction with pharmacies remains high with 92% survey respondents reporting they are very or fairly satisfied with pharmacy services. This is an increase in satisfaction since the 2018 PNA, despite a reduction in the number of pharmacies in the city from 58 in 2018 to 53 (including one distance selling pharmacy) in 2022. Although there is no national guidance around how many pharmacies should be provided per 100,000 residents, there are currently 17.8 community pharmacies per 100,000 residents living in the city, compared with 17.6 in East Sussex and 18.0 in West Sussex.

Although there has been an increase in the number of prescriptions, there are reported to be enough pharmacies to fulfil the flow of prescriptions. Nearly three quarters of pharmacies responding to the survey (73%; 16/22 respondents) said they would have sufficient capacity within their existing premises and staffing levels to manage an increase in demand in their area. 18% (4/22 respondents) said they

would need to make adjustments to manage an increase in demand, while 9% (2/22 respondents) said they would have difficulty doing so.

The relationship between GP practices and community pharmacies

Eight out of 11 GPs responding to the GP survey were very or fairly satisfied with the pharmacy they use most. However, two GPs were very dissatisfied.

The PNA has found from the GP survey that there is a lack of knowledge in GP practices of all of the services delivered by pharmacies including essential, advanced and public health services.

Overall there is good communication between GP practices and community pharmacies, but improvements can be made in terms of information sharing regarding services available.

Key conclusions

Although nationally and locally pharmacy numbers have seen a net decrease over the last couple of years, the assessment from the PNA Steering Group is that there is no gap in community pharmacy provision that results in the need for additional pharmacies. However, there are recommendations for developing, and in some cases extending, provision of services in current pharmacies.

The Community Pharmacy Contractual Framework in place for 2019-2024 sets out the remuneration for community pharmacy contractors. Pharmacy contractors have had cuts to their funding over the last few years, which together with an increase in costs still has the potential to close some pharmacies in the future.

The recommendations below take into account the need for community pharmacies to operate as functioning businesses.

Recommendations

Vaccinations

- a) The Brighton & Hove Flu and Covid-19 Programme Board to consider how community pharmacies can work more closely with GP practices and others in offering and increasing the uptake of the NHS flu vaccination for staff and residents in care settings.
- b) NHS England/Improvement (NHSE/I) and future NHS Sussex Integrated Care Board (ICB) to consider commissioning Pneumococcal Polysaccharide Vaccine (PPV) and shingles vaccinations via community pharmacy to maximise delivery alongside the flu vaccination in pharmacies to supporting increasing uptake.
- c) NHSE/I and Integrated Care Board to increase the number and geographical spread of community pharmacies delivering Covid-19 vaccinations. This is to increase access across the city and uptake of Covid-19 vaccinations as well as in response to high satisfaction of pharmacy services.

General practice awareness and knowledge

- d) The Brighton & Hove Community Pharmacy and Public Health Forum to agree how to improve GP practice knowledge of services in community pharmacy in order to increase signposting and referrals by GP practice staff to community

pharmacy. This includes referrals for all essential, advanced and locally commissioned services.

Evenings and weekend pharmacy provision

- e) NHSE/I, and in the future Sussex Integrated Care Board (ICB) / Integrated Care System (ICS), to review the commissioning of a rota service, providing evening and weekend pharmacy provision across the city, and particularly Portslade. This review will need to include provision of pharmacy provision beyond 8pm.
- f) Public Health Commissioners to review opportunities for pharmacies that are open after 6pm on weekdays and at weekends to consider providing the emergency hormonal contraception service to improve accessibility for young people in Brighton & Hove.

Community pharmacy capacity

- g) NHSE/I, and in the future Sussex Integrated Care Board, to review pharmacy commissioning and capacity in areas with significant increases in future housing developments. Although currently, despite increases in housing developments there is considered to be no gap in community pharmacy provision, with population increases this is considered to be necessary.

Becoming carbon neutral

- h) NHS and Brighton & Hove City Council commissioners and community pharmacies to consider how to encourage, incentivise or commission community pharmacies to undertake further action on becoming carbon neutral. Plans to be monitored by the Community Pharmacy and Public Health Forum.
- i) The Community Pharmacy and Public Health Forum to work with the council's Sustainability Team to support community pharmacies and those using them to contribute further to carbon reduction.

Improving health and wellbeing

- j) Public health commissioners to review the provision of the stop smoking, Young Persons and Domiciliary Stop Smoking services; support community pharmacies to re-establish these services and encourage the uptake of stop smoking services.
- k) NHSE/I and in future Sussex Integrated Care Board and public health commissioners to ensure that stop smoking service pathways are joined up and communicated to people wishing to stop smoking. Other health/social care providers should be made aware of referral pathways into stop smoking services.
- l) NHSE/I, and in the future Sussex Integrated Care Board, to review the need for the community pharmacy Hepatitis C Antibody Testing Service in Brighton & Hove based on population health needs and commissioning of substance misuse services.
- m) Community Pharmacy and Public Health Forum to increase participation of Brighton & Hove-commissioned Healthy Living Pharmacies in local health promotion campaigns and encourage increased signposting/referrals into related services such as weight management and drug and alcohol support.
- n) For Sussex Integrated Care Board to deliver a communications and engagement campaign to increase utilisation of the newly commissioned hypertension case-

finding service in community pharmacies, to increase the detection of hypertension and to strengthen cardiovascular disease prevention in the city.

Cross system working

- o) To review how the Community Pharmacy and Public Health Forum fits with the new Sussex ICB structure and the integration of the commissioning of local pharmaceutical services.
- p) NHSE/I, Integrated Care Board and the Community Pharmacy and Public Health Forum to ensure commissioned and delivered services are operating in line with NHSE/I [‘Core20plus5’](#) approach to address health inequalities.