

**KENT COUNTY COUNCIL  
EQUALITY ANALYSIS / IMPACT ASSESSMENT (EqIA)**

**This document is available in other formats**

**Directorate:**

Public health – Social Care, Health and Wellbeing

**Name of policy, procedure, project or service**

Kent Pharmaceutical Needs Assessment

**What is being assessed?**

This is a review of where residents can currently access the dispensing of medicines in a timely manner and whether there are any gaps or unmet needs. This is NOT a fit for purpose review.

**Responsible Owner/ Senior Officer**

Andrew Scott-Clark

**Date of Initial Screening**

04/09/14

**Date of Full EqIA :**

<b>Version</b>	<b>Author</b>	<b>Date</b>	<b>Comment</b>
V1	C Clennett	4/9/2014	
V2	J Hill	4/9/2014	E & D Comments
V3	C Clennett	28/10/2014	
V4	J Hill	28/10/2014	E & D Comments



## Screening Grid

Characteristic	Could this policy, procedure, project or service, or any proposed changes to it, affect this group less favourably than others in Kent? YES/NO If yes how?	Assessment of potential impact <b>HIGH/MEDIUM</b> <b>LOW/NONE</b> UNKNOWN		Provide details: a) Is internal action required? If yes what? b) Is further assessment required? If yes, why?	Could this policy, procedure, project or service promote equal opportunities for this group? YES/NO - Explain how good practice can promote equal opportunities
		Positive	Negative	Internal action must be included in Action Plan	If yes you must provide detail
Age	No	Low	None	No	No
Disability	No	Low	None	No	No
Gender	No	Low	None	No	No
Gender identity	No	Low	None	No	No
Race	No	Low	None	No	No
Religion or belief	No	Low	None	No	No
Sexual orientation	No	Low	None	No	No
Pregnancy and maternity	No	Low	None	No	No
Marriage and Civil Partnerships	No	Low	None	No	No
Carer's responsibilities	No	Low	None	No	No

## **Part 1: INITIAL SCREENING**

### **Proportionality -**

This Assessment is considered to have a positive impact on all Kent residents including those in the protected groups, by protecting current services and identifying areas of need.

### **Context**

The original Pharmaceutical Needs Assessments were carried out in 2011 by West Kent Primary Care Trust for West Kent and Eastern and Coastal Kent Primary Care Trust for East Kent. The documentation for these PNAs can be found on the Kent and Medway Public Health Observatory website. The Equality Impact assessments associated with the original PNAs can be found as part of the documentation in the original PNAs.

The Health and Social Care Act 2012 transferred responsibility for the Pharmaceutical Needs Assessment from the Primary Care Trusts to the Health and Wellbeing Boards on the 1<sup>st</sup> April 2013.

At the direction of the Kent HWB, a steering group was set up to review current pharmaceutical services and assess any unmet needs. A draft set of documents were produced and can be found at

<http://www.kmpho.nhs.uk/reports-and-strategies/pharmaceutical-needs-assessments/kent-draft-pharmaceutical-needs-assessments/>

### **Aims and Objectives.**

The main aim of the Kent Pharmaceutical Needs Assessment is to identify the current providers of pharmaceutical services in Kent, where they are and the population that they serve, systematically identifying any gaps or unmet needs and in consultation with stakeholders make recommendations on future development.

Providers of pharmaceutical services in Kent mainly comprise of community pharmacies and dispensing doctor surgeries.

The Pharmaceutical Needs Assessment is a key document used by the NHS England local area Pharmaceutical Services Regulations Committee (PSRC) to make decisions on new applications for pharmacies and change of services or relocations by current pharmacies. It is not used to close down pharmacies. It is also used by commissioners, (such as Clinical Commissioning Groups

(CCGs) Kent Public Health and NHS England) when they are reviewing the needs for health services within their particular area, to identify if any of their services can be commissioned through pharmacies.

Basic pharmaceutical need within the context of this document can be described as the requirement for the dispensing of medicines when the decision has been made by a clinician that the most appropriate treatment is indeed a drug or medicine or appliance.

Pharmaceutical services being assessed as part of the PNA are

**Essential Services** including the following:

Dispensing of medicines

Collection of medicines waste

Health promotion

Signposting

Support for self-care

**Advanced Services** including the following:

Medicines Use Review (MUR) and Prescription Intervention Service

New Medicines Service (NMS)

There are other services provided by pharmacies (as well as other healthcare providers) which are not classed as pharmaceutical services. These include Public Health services such as EHC and Stop Smoking. These are not included within this assessment.

## **Beneficiaries**

Most Kent residents, including those in the protected groups, use pharmaceutical services at some point in their lives.

Therefore protection of current services and identification of any areas of unmet needs will have a positive impact on all residents

## **Information and Data**

The PNA is an assessment of how many providers of pharmaceutical services are currently available and whether they are easily accessible by the population including the protected groups.

Information on the number of providers of pharmaceutical services, their geographical location and the population who live within a 20 minute walk (1 mile) or a 20 minute drive (5 miles) of these locations has been produced.

Information has been provided by NHS England, Kent County Council's Public Health Directorate and Kent and Medway Public Health Observatory

(KMPHO). Information has also been gathered from the JSNA and the Health and Social Care Maps.

KMPHO have collated this information and produced a supplementary data set for the area which informs the development of the assessment.

## **Involvement and Engagement**

A joint Kent and Medway PNA Steering Group was set up consisting of representatives from the local organisations that have an interest in the provision of pharmaceutical services. They included

representatives from Kent County Council, Medway Council, Kent and Medway Public Health observatory (KMPHO), Kent Local Pharmaceutical Committee (LPC) (representing community pharmacy), Kent Local Medical Committee (LMC) (representing dispensing doctors), Healthwatch (representing the general public), NHS England Kent and Medway Area Team and representatives from the Clinical Commissioning Groups (CCGs) in Kent and Medway.

The HWB have a statutory obligation (The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013) to consult on the PNA with specific groups. They include

- a) any 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);***
- (b) any 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);***
- (c) any persons on the pharmaceutical lists and any dispensing doctors list for its area;***
- (d) any LPS chemist in its area with whom the NHSCB has made arrangements for the provision of any local pharmaceutical services;***
- (e) any Local Healthwatch organisation for its area, and any other patient, consumer or community group in its area which in the opinion of HWB1 has an interest in the provision of pharmaceutical services in its area; and***
- (f) any NHS trust or NHS foundation trust in its area;***
- (g) the NHSCB (now known as NHS England); and***
- (h) any neighbouring HWB.***

Preparations are taking place to consult with the above and other groups recommended by the KCC including any specific groups identified from the EqIA. KCC and the local CCGs will use their current communication systems

with the public and specifically the protected groups, to identify if there are any ongoing issues around accessing medicines in their areas

### **Potential Impact**

It is anticipated that there will be a positive impact on accessing services as a result of this review. Results from the consultation including any comments from the protected groups will be taken into account in the final draft of the document.

The PNA Steering Group have identified several areas across Kent where there is planned development of new housing on a large scale. This could mean that the affected population including the protected groups, will have a need for pharmaceutical services identified within these developments. These areas have been noted in the PNA and will be reviewed on a regular basis as the areas develop. Supplementary statements to the PNA will be published on a regular basis identifying any changes to services.

### **Adverse Impact:**

There are no negative impacts identified.

### **Positive Impact:**

The review has identified a low positive impact on all the Kent population including the protected groups as it will protect current services and identify any gaps.

## **JUDGEMENT**

The nature of the assessment means that this is a review of services and will not result in actual changes as a result of the review. Any gaps or unmet needs identified by the review will be considered by NHS England when they are looking at new applications for the provision of pharmaceutical services. Legislation states who we have to consult with and we intend to make sure that groups with protected characteristics are included in this consultation. (see Action plan)

### **Action Plan**

KCC and the local CCGs will use their current communication systems with the public and specifically the protected groups, to identify if there are any ongoing issues around accessing medicines in their areas. This will include working with Healthwatch, using the Community Engagement Officers and working with the local Health Network and Patient Participation Groups in the CCGs.

## **Monitoring and Review**

The PNA must legally be reviewed every 3 years to assess that any new pharmacy provision has addressed local pharmaceutical needs. In addition if there is a significant change to service provision, such as a large housing development being built, in the area before the 3 year deadline, then the PNA will be redone for that area at the earliest opportunity. Supplementary statements will be published on a regular basis identifying any minor changes to the PNA such as new pharmacies opening, minor relocations or changes of opening hours

## **Sign Off**

I have noted the content of the equality impact assessment and agree the actions to mitigate the adverse impact(s) that have been identified.

### ***Senior Officer***

Signed: \_\_\_\_\_ Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Date: \_\_\_\_\_

### **DMT Member**

Signed: \_\_\_\_\_ Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Date: \_\_\_\_\_

### **Attachments.**

Original PNAs published by West Kent PCT and Eastern and Coastal Kent PCT in 2011 with relevant EqIAs.

These documents can be found at

<http://www.kmpho.nhs.uk/reports-and-strategies/pharmaceutical-needs-assessments/kent-draft-pharmaceutical-needs-assessments/>



## Equality Impact Assessment Action Plan

Protected Characteristic	Issues identified	Action to be taken	Expected outcomes	Owner	Timescale	Cost implications
Age	Protected groups may have more in depth views of current provision of services	Ensure that these groups are aware of the consultation	Views of protected groups are received and acted upon	PNA steering group	Before final document published in March 2015	None
Disability						
Gender						
Gender identity						
Race						
Religion or belief						
Sexual orientation						
Pregnancy and maternity						
Marriage and Civil Partnerships						
Carer's responsibilities						