



Kent Joint Strategic Needs Assessment (Kent JSNA)

## Kent 'Community Pharmacy' JSNA Chapter Summary Update '2014-15'

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# Kent Community Pharmacies JSNA Chapter Update 2015

## Introduction

Community pharmacies provide pharmaceutical services to the residents of Kent, along with appliance contractors and dispensing doctor practices.

Pharmaceutical services include:

**Essential services** – which every community pharmacy providing NHS pharmaceutical services must offer. These are set out in their terms of service.

**Advanced services** - community pharmacy contractors and dispensing appliance contractors can provide, subject to accreditation, as necessary. (Medicine Use Reviews (MUS), New Medicine Service (NMS), Appliance Use Reviews (AUR) and Stoma Appliance Customisation (SAC)). Recently an NHS Flu vaccination service through pharmacies has been announced due to be implemented by autumn 2015.

**Locally commissioned services** – those which are commissioned by NHS England.

Definition of the services provided can be found in the Kent Pharmaceutical Needs Assessment - [Kent Pharmaceutical Needs assessment 2015](#)

There are currently 277 pharmacy contractors who are registered on the Kent NHS pharmaceutical list as providing the full range of NHS pharmaceutical services across the Kent area.

There are currently 54 GP dispensing practices that are registered to provide pharmaceutical services to their patients from 60 sites. Dispensing practices do not have to provide all the 'essential' services. They mainly provide dispensing services and Dispensing Review of the Use of Medicines (DRUMs).

Appliance contractors provide appliances only, which are defined in Part IX of the Drug Tariff (eg ostomy, colostomy appliances) and these often require tailoring to meet the need of individual patients. There are two appliance contractors in Kent.

## Pharmaceutical Need

Basic pharmaceutical need 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, medicine or appliance.

The need for pharmaceutical services is assessed and published in the Pharmaceutical Needs Assessment.

As a consequence of the Health and Social Care Act 2012, responsibility for the Kent Pharmaceutical Needs Assessment (PNA) passed from the Kent Primary Care Trusts (PCTs) to the Kent Health and Wellbeing Board (HWB), a committee of Kent

County Council (KCC) in April 2013. The PCTs published their last PNAs in February 2011.

The PNA is an information document used by the local area Pharmaceutical Services Regulations Committee (PSRC) to make decisions on new applications for pharmacies and change of services or relocations by current pharmacies. The PSRC is a committee of NHS England. It can also be used by commissioners reviewing the health needs for services within their particular area, to identify if any of their services can be commissioned through pharmacies.

A PNA steering group was formed to develop the current PNA. It comprised of representatives from Kent Public Health, KCC, Kent and Medway Public Health observatory (KMPHO), Local Pharmaceutical Committee (LPC) (representing community pharmacy), Local Medical Committee (LMC) (representing dispensing doctors), Healthwatch (representing the general public), NHS England Local Area Team (LAT) and representatives from the Clinical Commissioning Groups (CCGs) in Kent and Medway.

The geographical area of Kent has been divided into the seven Clinical Commissioning Group (CCG) areas for the purpose of the PNA, in order to review service provisions. The PNA only covers those NHS Pharmaceutical Services provided by community pharmacy contractors, appliance contractors and dispensing practices.

The final PNA was published in March 2015 taking into account any comments received during the consultation. Documents relating to the PNA can be found at (<http://www.kpho.org.uk/health-intelligence/service-provision/pharmacy/pharmaceutical-needs-assessments/>)

## **Key Issues and Gaps**

The main aim of the Kent Pharmaceutical Needs Assessment is to describe the current pharmaceutical services in Kent, systematically identify any gaps/unmet needs and in consultation with stakeholders, make recommendations on future development. The issues identified were of:

- access – can a resident access a pharmacy within 20 minutes' drive (if in a deprived area within a 20 minutes' walk)?
- location – were there enough pharmacies to meet the needs of the surrounding population?
- hours of opening – were there enough pharmacies open outside 'core hours' to meet the needs of the population?

## **Who's at Risk and Why?**

Pharmaceutical services are nationally agreed services and should be easily available to everyone.

The population of Kent is ageing and there are significant health inequalities both between and within localities in Kent. There is a mix of urban and rural communities

and the proportion of ethnic minority population varies widely between localities. Certain protected groups may have difficulties accessing pharmaceutical services and have been included in the PNA consultation.

Research has shown that in general, and during a lifetime, children and older people consume more medicines. Women, over their lifetime, generally consume more medicines than men. Therefore it is suggested that areas where there are a higher number than average of children aged 0-9 and elderly people over 65 living alone, especially female, will have need to access pharmaceutical services more often. However this need does not necessarily equate to needing more pharmacy premises as pharmacies are not restricted by list size and can readjust both staffing levels and premises size to manage the increased volume.

It is widely thought that people being cared for in care homes (residential or nursing) access NHS services more frequently but that is not always the case in the access of pharmaceutical services. The nature of the attention given to people in care homes means that medicines are ordered and supplied by the care home management. Individually, patients rarely need to access a pharmacy. Most care homes now have external contracts with medicines suppliers which are not necessarily local and therefore there is no relationship between the number of care homes and the need for local pharmaceutical services.

Data shows out of a practice population of 1,523,370 that there are 180,064 children aged 0-9 living in Kent (11.8%), 293,148 people who are over 65 in Kent (19.2%), 30.2% of whom are living alone and 3.3% of whom are living in care homes.

### **The level of Need in the Population**

The PNA is structured into an analysis of pharmaceutical need based on CCG boundaries and local Health and Wellbeing Boards (HWB).

The CCGs are:

NHS Ashford CCG  
NHS Canterbury and Coastal CCG (C4G)  
NHS Dartford, Gravesham and Swanley (DGS) CCG  
NHS South Kent Coast (SKC) CCG  
NHS Swale CCG  
NHS Thanet CCG  
NHS West Kent CCG

Maps showing where pharmacies are, the walking distances (20 minutes - 1.6km from each pharmacy) and the services they provide are available as appendices to the PNA. Each CCG locality also has its individual PNA along with the relevant maps.

**Table 1:**

<b>Ratio of number of service providers per 100,000 population (excluding appliance contractors)</b>			
Locality	Number of service providers	Practice population	Ratio/100,000 population
NHS Ashford CCG	27	126,697	21
NHS Canterbury and Coastal CCG	48	215,736	22
NHS Dartford, Gravesham and Swanley CCG	59	254,973	23
NHS South Kent Coast CCG	47	202,039	23
NHS Swale CCG	28	108,169	26
NHS Thanet CCG	32	142,987	22
NHS West Kent CCG	95	472,769	20
Kent	337	1,523,370	22
England	-	-	23

Physical access to pharmacies in Kent is good, with over 99% of households within 20 minutes' drive of a pharmacy and the pharmacies found within the most deprived areas being located within 20 minutes walking distance.

There are 33 '100' hour pharmacies across Kent. These provide access to pharmacy services from early in the morning until late at night Monday to Saturday and are often open on a Sunday.

Access to medicines via 100 hour pharmacies is considered to be especially important in areas which are deprived, especially if there is a high number of children aged 0-9 and/or elderly people over 65 who are living alone with no family/carer support.

Our expectation is that those pharmacies granted 100 hour contracts will continue to provide the 100 hour provision in the future thus securing access to pharmaceutical services for longer periods than the 40 hour normal requirement. Any reduction of the number of 100 hour contracts will create a gap in service provision.

Access to medicines outside these times is commissioned from the local out-of-hours medical services provider, who has available essential and urgently needed medicines, as agreed in the *National Out-of-Hours Formulary* and are supplied where the need for them cannot wait until the 100 hour pharmacy opens.

Opening times of all pharmacies along with the additional services that they offer can be found on NHS Choices.

## **User Views**

User Views as a result of the consultation can be found in Appendix C of the Kent PNA.

## Unmet Needs and Service Gaps

- a Overall there is good pharmaceutical service provision in the majority of Kent.
- b Where the area is rural, there are enough dispensing practices to provide essential pharmaceutical services to the rural population.
- c There are proposed major housing developments across Kent, the main ones being Chilmington Green near Ashford and Ebbsfleet Garden City, which will mean that these areas will need to be reviewed on a regular basis to identify any increases in pharmaceutical need.
- d The proposed Paramount leisure site plans in North Kent should be reviewed regularly to identify whether visitors and staff will have increased health needs including pharmaceutical needs.
- e The current provision of 'standard 40 hour' pharmacies should be maintained especially in rural villages and areas such as Romney Marsh.
- f The current provision of '100 hour' pharmacies should be maintained.

## Recommendations for Commissioning

### Kent Healthy Living Pharmacy Scheme

The Healthy Living Pharmacy is a voluntary national programme aimed at improving the quality of commissioned pharmacy services. The concept derived from the 2008 White Paper, Pharmacy in England: *Building on strengths – delivering the future*, setting the scene for pharmacies to become health promoting centres 'promoting health literacy and NHS LifeCheck services, offering opportunistic and prescription-linked healthy lifestyle approach'. The first Healthy Living Pharmacy programme was piloted in Portsmouth in 2009 and its success launched the national pathfinder programme in 2011.

The Healthy Living Pharmacy service model aims are:

- to recognise the significant role pharmacies have in the community and encourage proactive pharmacy leadership and multi-disciplinary working
- to deliver consistent and high quality health and wellbeing services, linked to outcomes
- to reduce health inequalities
- to provide proactive health advice and interventions – 'make every contact count'
- to create healthy living 'hubs' and engage with the local community
- to meet commissioners' needs.

Kent participated in the national pathfinder work and saw 46 pharmacies accredited as part of the HLP programme. Evaluation has shown the results are cost-effective and have high levels of public approval. The Kent programme was revised in early 2014 with new conditions and support measures to help pharmacies develop sustainable business models and has been adapted for pharmacies to gain a Kent bespoke 'quality kitemark'. Of the 277 pharmacies in Kent, 156 are now participating in the HLP programme.

The HLP programme will ensure a consistent 'quality platform' across pharmacies and will form the basis to expand the types of services which may be commissioned in the future. It will also increase and improve the access of the public to Health and Wellbeing services across Kent.

HLP is a well-recognised, successful national programme which continues to evolve. The work being done in Kent has a high profile and is being integrated into existing and proposed commissioned services. It has the potential to substantially increase the capacity and access to Health and Wellbeing services, not only in pharmacies but also to include dentistry and optical outlets.

## **Recommendations for Needs Assessment Work**

### **Local services commissioned by NHS England**

Various enhanced services which were commissioned by the original PCTs are currently being managed and reviewed by NHS England. These services include rota services and various bespoke services such as warfarin monitoring and access to palliative care drugs. These are not currently being assessed as part of the PNA until the review has been completed.

### **Public Health services provided through pharmacies**

Many community pharmacies are also commissioned by local authorities to provide public health services on a 'needs' basis. These are not classed as pharmaceutical services as they are also provided by other healthcare providers.

Examples of these are smoking cessation, NHS Health Checks and sexual health.

For completeness there are maps included showing where these services are available and are published alongside the PNA.

### **CCG services provided through community pharmacies**

These are also not necessarily pharmaceutical services and therefore not considered as part of the PNA. However we are including maps of such services where the information is available.

### **Non NHS and private services**

The needs assessment is related to the provision of NHS pharmaceutical services. Pharmacies also provide many other services to the public which are not part of NHS pharmaceutical services and therefore not paid for by the NHS or local authority. These can include delivery services, provision of medicines in multi-compartment aids, blood pressure checks and travel medicines. All of these services may attract an additional charge. Community Pharmacy also provides over the counter medicines including those on the 'general sales list' and 'pharmacy only medicines'. The provision of retail sales in community pharmacy is not contracted for by the NHS.

### **Key Contacts**

Andrew Scott-Clark – Director of Public Health

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## References

Department of Health (2008). 'Pharmacy in England: Building on strengths – delivering the future.' <http://www.official-documents.gov.uk/document/cm73/7341/7341.pdf>

NHS Choices

<http://www.nhs.uk/Service-Search/Pharmacy/LocationSearch/10>

The National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013 <http://www.legislation.gov.uk/uksi/2013/349/contents/made>

The Pharmaceutical Needs Assessment documents for Kent are available at:  
<http://www.kpho.org.uk/health-intelligence/service-provision/pharmacy/pharmaceutical-needs-assessments/>