# Kent Pharmaceutical Needs Assessment

# NHS Thanet Clinical Commissioning Group

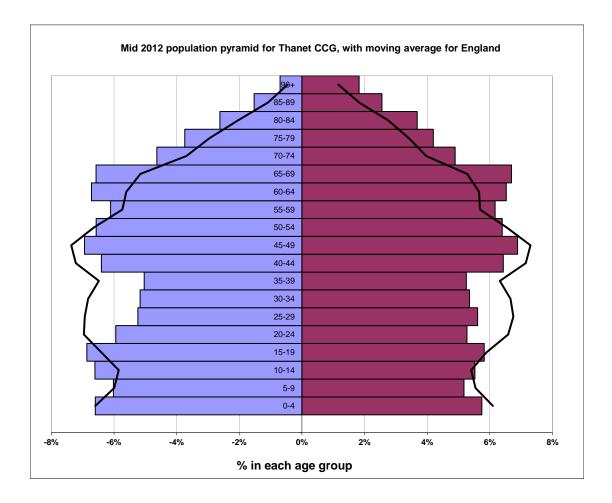
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# Introduction

This document has been written as part of the main Kent Pharmaceutical Needs Assessment (PNA) to allow judgements to be made using local data. This document should be read in conjunction with the main Kent PNA. The CCG area was divided into three separate localities, Broadstairs & Ramsgate, Margate & Cliftonville and Birchington & Westgate for the purposes of this assessment.

Thanet Clinical Commissioning Group (Thanet CCG) covers patients from 20 practices, with a registered practice population of just under 143,000. The CCG area is co-terminus with that of the district council.



Using resident populations for the district of Thanet the population aged 65+ is predicted to increase by 68.1% from 2011 to 2031(from 22,600 to 38,000) This increase is greater in the 85+ group, being predicted to increase 142.3% during the same period (from 2,600 to 6,300).

It is important to recognise that patients resident in the CCG area cannot be presumed to be registered exclusively with Thanet primary care teams. Some residents of Cliffsend are registered with practices in Sandwich. Generally though, the vast majority of Thanet residents are registered with practices in Thanet.

Detailed maps showing the population density, projected population growth and the ethnicity of Thanet CCG residents can be found in the supplementary information for Thanet CCG in Appendix A.

The population of children and young people is similar to the England average for children aged below 10, but has a higher than average for 10 to 19 year olds. Thanet's population exhibits a considerable smaller proportion of under 50s compared to the England profile, but has a higher percentage of over 55s. The largest section of the local population are aged 60 to 64. This will have an impact on health services because people over 60 will generally have greater health needs and service usage.

Practice data<sup>1</sup> shows that out of a practice population of 142,987 there are 16,624 children aged 0-9 living in Thanet (11.6%), 31,324 people who are over 65 in Thanet (21.8%), 34% of whom are living alone and 4.1% of whom are living in Care homes<sup>2</sup>. These age groups are considered to be the main users of pharmaceutical services.

The life expectancy between the best ward (Kingsgate 84.7) and the worst (Margate Central 72.7) is 12 years. The Thanet average is 79.2 years. Generally, there is an association between lower life expectancy estimates and higher levels of relative deprivation. The most deprived areas are around central Margate, central Ramsgate, Cliftonville West, Millmead and Newington.

More information is available in the Thanet CCG Health Profile which can be found at <u>http://www.kmpho.nhs.uk/jsna/</u>

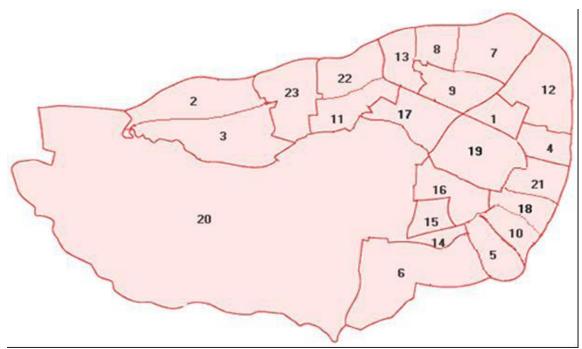
#### **Care Homes**

There are a considerable number of care homes in the Thanet area. Patients who are looked after in a care home setting are often high users of medicines. However because of the nature of their care, they rarely access pharmaceutical services individually, leaving this to be carried out by the care home staff. More recently care home organisations do not use local pharmacies for this service, favouring the large "hub" or "internet" pharmacies which specialise in this type of one-stop service. Therefore there is not

<sup>&</sup>lt;sup>1</sup> PCIS practice data June 2014

<sup>&</sup>lt;sup>2</sup> ONS Crown Copyright Reserved [from Nomis on 21 August 2014]

considered to be any relationship between the number of care homes and the need for local pharmaceutical services.



Prime electoral wards within Thanet CCG area.

1.Beacon Road | 2.Birchington North | 3.Birchington South | 4.Bradstowe | 5.Central Harbour | 6.Cliffsend & Pegwell | 7.Cliftonville East | 8.Cliftonville West | 9.Dane Valley | 10.Eastcliff | 11.Garlinge | 12.Kingsgate | 13.Margate Central | 14.Nethercourt | 15.Newington | 16.Northwood | 17.Salmestone | 18.Sir Moses Montefiore | 19.St Peters | 20.Thanet Villages | 21.Viking | 22.Westbrook | 23.Westgate-on-Sea |

## Pharmaceutical Services in NHS Thanet CCG

There are two ways that patients can access pharmaceutical services within the Thanet CCG area. They are through community pharmacies or through a dispensary within a GP practice (dispensing practices). Appliances can be obtained through both of these methods or through a specific appliance contractor. Appliance contractors usually provide a service nationally and there are two based in the Kent area Patients can also request to have their prescriptions (especially repeat prescriptions) sent electronically (EPS) to a pharmacy of their choice, such as one close to their work place or near their home. This means that positioning a pharmacy next to a GP practice is no longer as important.

Ratio of number of pharmaceutical service providers(community pharmacies & GP dispensing practices) per 100,000 population (excluding appliance contractors)					
Locality	Number of	Practice	Ratio/100,000		
	providers	Population	population		
NHS Thanet	32	142,987	22		
CCG					
Kent			22		
England	-	-	23		

#### **Community Pharmacy**

There are 31 community pharmacies who are registered on the Kent NHS pharmaceutical list as providing the full range of NHS pharmaceutical services and located within the Thanet CCG area.

NHS Thanet CCG - Community Pharmacies			
Total number of Community Pharmacies providing NHS	31		
pharmaceutical services			
Number of standard 40 hour pharmacies	24		
Number of 100 hour pharmacies	7		
Number of mail order/internet pharmacies	0		
Number of appliance contractors	1		
Number of pharmacies offering electronic prescription service	30		
(EPS)			

A list of all the pharmacies located within Thanet CCG can be found in Appendix B.

#### Standard 40 hour community pharmacies.

These are pharmacies which are registered as providing at least 40 'core' pharmacy hours per week. These hours are usually 8 hours daily, Mon – Fri but are agreed at the time of application to join the register.

Pharmacies cannot change their 'core' hours without prior agreement with NHS England.

Many of these pharmacies also provide supplementary opening hours, often opening slightly later in the evening and on Saturdays and Sundays. Pharmacies can change their supplementary hours if they so desire, as long as NHS England receives the statutory 3 months' notice.

#### 100 hour pharmacies

These are pharmacies which have to be open for a minimum of 100 hours per week with the hours being agreed with NHS England.

#### Mail order/internet pharmacies

These are pharmacies which provide pharmaceutical services via mail order or the internet. They are not accessible to the general public.

#### **Appliance contractors**

Appliance contractors provide appliances only, which are defined in Part IX of the Drug Tariff (e.g. ostomy, colostomy appliances) and these often require tailoring to meet the need of individual patients. There is one appliance contractor located in the Thanet area.

A review of all opening times was carried in May 2014 using data provided by NHS England which is available on NHS Choices. It was considered that there is adequate provision of pharmaceutical services through pharmacies and dispensing surgeries for the majority of the day between 8am and 6.30pm. Services between 6am and 8 am and between 6.30pm and 11pm are provided at strategic points across the area. Out of Hours providers of medical services provide access to urgent medical care including urgent medicines between 11pm and 7am.

Subsequent changes to opening times since May have been taken into account and the opening times of all pharmacies along with the additional services that they offer can be found on NHS Choices. NHS England has the responsibility for maintaining NHS Choices.

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

#### Dispensing practices.

NHS Thanet CCG – Dispensing practices	
Total number of GP surgeries providing pharmaceutical services to their patients	1
Total number of sites(including branches) providing pharmaceutical services to their patients	1

A list of the dispensing doctors located within Thanet CCG can be found in Appendix C

Dispensing doctors have rights to provide limited pharmaceutical services to their patients with the patient's permission. This is mainly for patients in rural (controlled) areas where the most rural of patients would have problem accessing medicines. The surgery has to be registered to provide pharmaceutical services and can only dispense to their own patients who must be resident in an area which is rural in character, known as a controlled locality, at a distance of more than one mile (1.6km) from a pharmacy's premises. Surgeries must always give these patients the choice of obtaining their medicines through the GP dispensary or being allowed to take their prescription to a community pharmacy of choice.

Patients who live within the 1.6km radius who are unable to access the pharmacy and wish their GP surgery to dispense their medication can, in exceptional circumstances, apply for consideration as a serious difficulty case. All applications for 'serious difficulty' must be made to NHS England.

#### **Controlled localities**

A 'controlled' locality is an area which is deemed to be rural in character. Until 1 April 2013, PCTs determined whether areas were rural in character, and published maps with any such rural areas (controlled localities) delineated on those maps.

Any areas determined to be controlled localities (or not controlled localities) cannot be considered again for a period of five years. On 1 April 2013, NHS England took over the maps produced by PCTs and became responsible for determinations of controlled localities. An explanation of controlled and not-controlled localities, rurality reviews and definitions of rural and urban can be found in the main Kent PNA document

Maps showing the controlled areas and the 1.6km boundaries around pharmacies in the Thanet CCG location, can be found in Appendix A.

The pharmaceutical services which are provided by community pharmacies and by dispensing doctors are laid down in statute in the NHS Pharmaceutical Services Regulations 2013. Pharmaceutical services from community pharmacies comprise of essential, advanced and enhanced services. Explanations of these services can be found in the main Kent Pharmaceutical Needs Assessment. Pharmaceutical services from Dispensing practices do not have to provide all the 'essential' services. They mainly provide dispensing services and the advanced service of Dispensing review of the Use of Medicines (Drums).

All Thanet pharmacies must provide the Essential services and a map showing which ones provide the advanced services of Medicine Use reviews (MURs) and New Medicines Service (NMS) can be found in Appendix A.

#### Pharmaceutical services out of hours

The Thanet CCG area currently has seven 100 hour pharmacies which are located across the area. These provide services from early in the morning until late at night Monday to Saturday and are 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.

Access to medicines outside these times, is commissioned from the local outof-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.

#### Walk in centres

The Queen Elizabeth the Queen Mother hospital is located in the middle of the CCG area which provides accident and emergency services to the population.

#### **Rota services**

NHS England manages a voluntary rota service for days when there are no pharmacies open at all. This is usually Christmas Day and Easter Sunday but may include other Public and Bank holidays if required.

#### 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 provided by other healthcare providers as well.

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

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

#### Enhanced services managed by NHS England

Various enhanced services which were commissioned by the former PCTs are currently being reviewed by NHS England. These services include various bespoke services such as warfarin monitoring and access to palliative care drugs. These services are not necessarily pharmacy specific and are therefore may not considered to be pharmaceutical services. These are not being assessed as part of the PNA until the results of the review are complete.

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

#### CCG services provided through community pharmacies.

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

Currently we have not been informed of any services that Thanet CCG commissions through community pharmacies

#### Non NHS and private 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, travel medicines and the sale of over the counter (OTC) medicines. All of these services may attract an additional charge. These services will not be included as part of the PNA.

# Healthy Living Pharmacies

Please see the main Kent PNA for an explanation of the concept of Healthy Living Pharmacies. Becoming accredited as a Healthy Living Pharmacy is not mandatory and is not a pharmaceutical service and therefore not considered as part of the PNA.

Currently Thanet has 6 community pharmacies who have met the accreditation as a Healthy Living Pharmacy. Please see map in Appendix A for details.

# Housing

Like most of Kent, considerable new housing is expected to be built in the Thanet area over the next 20 years. The Thanet Borough Council local plan suggests this increase could be up to 11,700 in the years 2011-2031, roughly 600 a year. Although the plan currently does not highlight any major building projects in the next 3 years, there is a lot of infilling which could increase health needs. This will be reviewed regularly especially if the house building changes the landscape from rural to urban.

# Eastern and Coastal Kent PNA 2011.

As part of this assessment, reference was made to the previous one carried out in 2011 by Eastern and Coastal Kent Primary Care Trust. It was noted that this assessment stated the following.

#### Across the whole PCT area.

**Rurality.** There are a number of areas in Eastern and Coastal Kent which have not yet been determined as Controlled Localities but where some practices have historic dispensing rights. These determinations are a priority and the Pharmacy Regulations Committee has undertaken to complete these as soon as possible.

#### 100 Hour Pharmacy Contracts.

Through the consultation many people indicated the value of being able to access pharmaceutical services beyond the normal pharmacy contractual hours of 40 hours per week.

Given the above feedback it is NHS Eastern and Coastal Kent's intention not to allow those pharmacies with 100 hour contracts to reduce them to a 40 hour contract. Additionally, evidence through consultation shows the need for 100hr contract provision on the Isle of Sheppey and in the town of Dover.

#### And for the Thanet area in particular

The number of pharmacies and dispensing doctors and the positions they are in are adequate for the area and we feel they meet the need of local people; however there are plans to develop the way in which enhanced service provision and quality of service is monitored.

Therefore there are no plans to increase the provision of essential and enhanced services, but there needs to be some work to increase the uptake of Emergency Hormonal Contraception and work with partners to ensure community pharmacy is used to its full potential.

We have looked at these recommendations again and note.

#### Rurality

The area around the coast is now identified as non-controlled. This area is where most of the population lives and most of these are within 1.6km of a pharmacy. The pharmacies serving outlying and rural areas such as Minster are considered to be essential to these areas and must be preserved especially where the population of these areas are under 10 or over 65 and likely to need more pharmaceutical services.

The responsibility for reviewing controlled areas now lies with NHS England

#### **100 Hour Pharmacy Contracts**

The number of '100 hour' contracts has risen from three to seven since 2011. However many of the new ones are located in the most deprived areas of Thanet where 100 hour pharmacies have the most benefit. We therefore would not recommend that any of these 100 pharmacies are allowed to reduce their hours from 100 to 40.

#### Under 18 conception rates.

The Sexual Health service, which is now commissioned through Kent Public Health, is currently under review and it is expected that the new service will meet the current needs of the local people.

# Conclusions and recommendation

We therefore recommend that for the NHS Thanet CCG area:

The current provision of pharmaceutical services is good and provides the pharmaceutical needs of the population on the whole.

The number of '100 hour' pharmacies needs to be maintained especially on deprived areas such as central Margate, Cliftonville and central Ramsgate

The provision of rural pharmacies such as Minster needs to be maintained

The provision of new housing in the Thanet area need to be reviewed regularly.

Version	Date	Author(s)	Comments
Draft 1	25/08/14	Cheryl Clennett	1 <sup>st</sup> draft
Draft 2	27/08/14	PNA Steering	Minor amendments made after
		group	meeting of PNA SG
Draft 3	17/09/14	KCC HWB	Changes after HWB meeting
Draft 4	27/09/14	K&M LAT	Minor changes by K&M LAT
Draft 5	18/02/15	PNA Steering	Changes after consultation
		Group	
Final	20/03/15	PNA steering	Final checks prior to publication
Version		Group	after approval from HWB

## Document Version Control