

Scrutiny Committee

Date of Meeting:	16 March 2023
Report Title:	Pharmaceutical Needs Assessment findings relating to rural communities across Cheshire East
Report of:	Dr Matt Tyrer, Director of Public Health
Report Reference No:	SC/11/22-23
Ward(s) Affected:	All

1. Purpose of Report

- 1.1.** The purpose of this report is to update members of findings from the finalised Pharmaceutical Needs Assessment (PNA) in relation to community pharmacy provision in rural communities within Cheshire East.
- 1.2.** The production of the PNA supports three outcomes from the Health and Wellbeing Strategy 2018-21: Create a place that supports health and wellbeing for everyone living in Cheshire East; improving the mental health and wellbeing of people living and working in Cheshire East; and enable more people to live well for longer.
- 1.3.** This report also outlines the initial approach to considering the implications for Cheshire East of Lloyds Pharmacy closures, which are planned nationwide, and also of newly published Census 2021 data.

2. Executive Summary

- 2.1** Cheshire East Health and Wellbeing Board has a statutory responsibility to publish an up-to-date statement of pharmaceutical needs every 3 years.
- 2.2** PNAs are used by the NHS to make decisions on which NHS funded services need to be provided by local community pharmacies. These

services are part of local health care and public health and affect NHS budgets.

- 2.3** The current final PNA was published in September 2022. This incorporated intelligence from the public consultation.
- 2.4** The overall conclusion of the PNA 2022 was that pharmaceutical provision in Cheshire East is adequate. This means that there are enough pharmacies across Cheshire East and that their opening hours and the services they provide are suitable. People can also seek support from pharmacies in other local authorities nearby. This is important—particularly in Bollington, Disley and Poynton, where there are fewer pharmacies.
- 2.5** We asked people to comment on the draft of the PNA through public consultation between 1 April 2022 and 10 June 2022. Scrutiny Committee members were invited to consult as part of this process at the start of the consultation period. After looking at the feedback, we added some more detail in the finalised document, to explain the purpose of the PNA and how we reached our conclusions. Appendix G of the published PNA describes the feedback received and any changes made in response. Many comments were about the performance in a single location in Cheshire East. Performance issues are not managed as part of the PNA, this responsibility sits with NHS England and any relevant comments were passed on to them to look into further. Details of how people can complain, if they are concerned about a pharmacy’s performance were provided in the final full version of the PNA, in the plain English summary document, and as a separate document, on the Health and Wellbeing Board webpage of the Cheshire East Council website at:
https://www.cheshireeast.gov.uk/council_and_democracy/your_council/health_and_wellbeing_board/health_and_wellbeing_board.aspx
- 2.6** Why does rurality need to be considered? The Rural Urban Classification defines rural as areas “outside of settlements with more than 10,000 resident population”¹. It is estimated that nearly two fifths of Cheshire East’s total population (386,700), live in rural areas². This means that a large portion of our population may struggle to access conventional services easily without additional support.

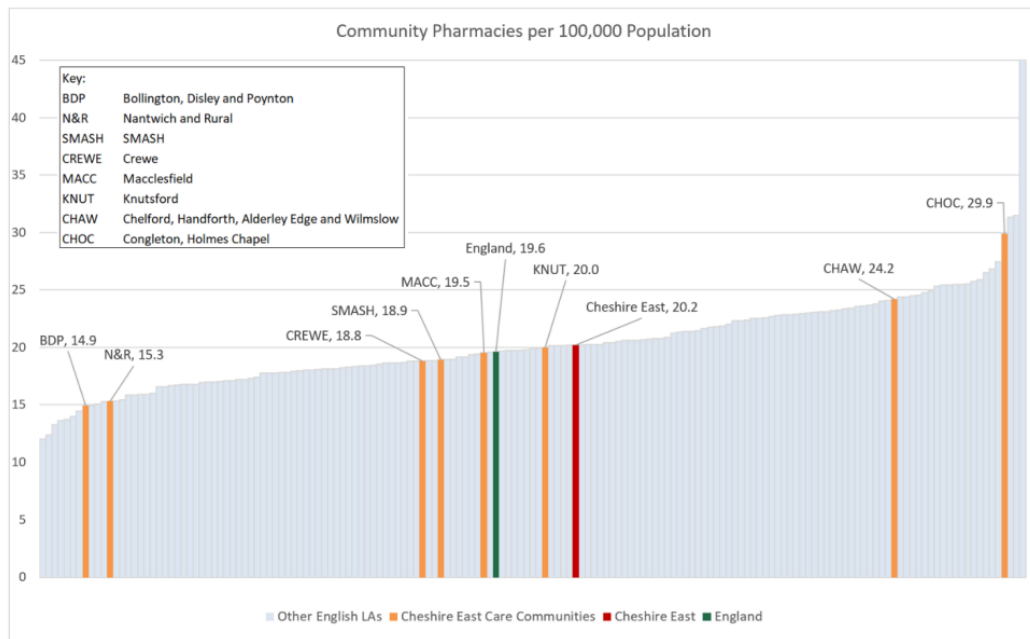
¹ Gov.UK (2021) Rural Urban Classification. Available from: <https://www.gov.uk/government/collections/rural-urban-classification#contents> (Accessed 19 January 2023).

² Cheshire East (2022) Cheshire East Rural Action Plan. Available from: <http://moderngov.cheshireeast.gov.uk/ecminutes/documents/s97674/Rural%20Action%20Plan%2022.pdf> (Accessed 19 January 2023).

2.7 In terms of rural communities there were some specific findings, including:

- **There is a very strong correlation between population size and the number of local community pharmacies:**
 - The areas of highest population density within the towns of Crewe, Macclesfield, Congleton have between eight and fifteen pharmacies.
 - Most of the main towns in Cheshire East are served by at least two pharmacies.
 - Several towns and villages have a single community pharmacy, including Audlem, Bollington, Disley, Goostrey, Haslington, Holmes Chapel, Mobberley, Prestbury and Shavington.

- **Cheshire East’s rate of pharmacies per 100,000 population is above the England average (20.2 compared with 19.6 respectively).** The care communities of Congleton and Holmes Chapel and Chelford, Handforth, Alderley Edge and Wilmslow (CHAW), both have a higher rate, i.e. have more pharmacies per 100,000 than the Cheshire East average. Macclesfield, Nantwich & Rural, Crewe, Sandbach, Middlewich, Alsager, Scholar Green and Haslington (SMASH), Knutsford and Bollington, Disley and Poynton care communities have fewer pharmacies per 100,000 (see graph below). The area with the lowest number of community pharmacies per 100,000 is Bollington, Disley and Poynton (14.9 per 100,000). This is less than half of the highest rate of 29.9 per 100,000 for Congleton and Holmes Chapel but the area is also served by several pharmacies outside the borough in Cheadle Hulme and Hazel Grove (see map Appendix A).



Data Source: National Pharmacy tables as at Nov 2021, ONS Population estimates: Persons by single

- **The number of pharmacies required within an area cannot be based purely on the size of the local population.** The population served by a particular pharmacy can be hard to determine as people choose to use a specific pharmacy for various reasons. The results from the public survey showed 63% used a pharmacy near to their home, 40% used the one near to their GP Practice, 40% used a pharmacy because it is easy to park nearby, and 29% used a pharmacy because it was near shops. Within the public survey free text comments, participants ranked knowledgeable staff, prescription availability and friendly staff as the most important aspect of pharmacy service.
- **Pharmacies may not always be viable in more rural areas.** This is where the services of dispensing doctors can play an important role in ensuring that patients receive their medicines promptly, efficiently, conveniently and to high standards. In order to qualify a patient must meet certain requirements in the regulations, which are:
 - They must live in a controlled locality (which is an area that has been determined by NHS England or a predecessor organisation to be “rural in character”)
 - They must live more than 1.6km (measured in a straight line) from a pharmacy
 - The practice must have approval for the premises at which they will dispense to them
 - The practice must have the appropriate consent for the area the patient lives in.
- As at the 28 January 2022, **there were six practice premises which offered dispensing doctor services to eligible patients in the Cheshire East Health and Wellbeing Board area.** These are:
 - Bunbury Medical Practice, Bunbury (Whilst this dispensing doctor is associated with the Cheshire West and Chester local authority, it lies within Cheshire East boundary and serves some Cheshire East residents, therefore it has been included within the Cheshire East PNA)
 - Chelford Surgery, Chelford
 - Greenmoss Medical Centre, Scholar Green
 - Holmes Chapel Health Centre, Holmes Chapel
 - Knutsford Medical Partnership, Knutsford
 - Wrenbury Medical Practice, Wrenbury.
- Having analysed the data from the dispensing doctors survey, it is concluded that **there is no significant gap in provision of Essential**

pharmaceutical services for the population served by dispensing doctors.

- **Dispensing Doctors are good at accommodating for protected characteristics**, with nearly all practices with wheelchair ramp access, large print labels and leaflets, automatic door assistance, toilet facilities accessible to wheelchair users, hearing loops, disabled parking, and an ability to support patients whose first language is not English.
- The six dispensing practices in Cheshire East dispensed 401,488 items during 2020/21, accounting for 6% of all items prescribed and dispensed within the Borough. This is the equivalent of an average of 5576 items per month per dispensary.
- **Most pharmacies (94%) offer a prescription collection service from patients' GP surgeries.** All pharmacies answered the questions regarding delivery of dispensed medicines on the community pharmacy survey, 79.5% stated that they offer this service free of charge.
- In terms of coverage, **free delivery services are available in all care community localities.** Ten pharmacies (13%) do not offer delivery services. In the public survey, of the 48% of participants who answered the question, 5% stated that they value the prescription delivery service from pharmacies.
- **The Electronic Prescription Service (EPS), allows a patient to choose or "nominate" a pharmacy to get their medicines or appliances from.** The patient's GP sends the prescription electronically to the nominated pharmacy, giving more choice and saving time. Whilst all pharmacies should be signed up to the EPS, dispensing doctors do not send prescriptions electronically.
- **In Cheshire East, there are currently two distance selling / internet pharmacies**, both of which are located within the SMASH (Sandbach, Middlewich, Alsager, Scholar Green and Haslington) care community. The two distance selling pharmacies are currently responsible for dispensing 0.55% of prescriptions issued to patients registered with Cheshire East practices.

2.8 The findings of the current PNA have led to the following recommendations: -

- The dispensing doctor services will supply eligible patients with medicines, but they may not be able to benefit from the wider range of

that community pharmacies are able to provide via Essential and Advanced service contracts with the NHS Cheshire and Merseyside Integrated Care Board and local public health commissioned services. Existing pharmacies may have to increase their capacity and review their working practices to meet this need.

- Most of the increase in prescribing need will occur among older people. This PNA has highlighted several issues relevant to older people, including poor physical access to some community pharmacies, and insufficient accessibility aids in some pharmacies.
- It is recommended that NHS England, Cheshire East Council and NHS Cheshire and Merseyside Integrated Care Board review accessibility of pharmacy sites, service quality and uptake, including consideration of cultural and equalities needs.
- When using the Office of National Statistics population projections, pharmaceutical need is predicted to increase by a greater extent in the Knutsford and Bollington, Disley and Poynton care communities. The current dispensing workload is higher in the Bollington, Disley and Poynton care community (7,432) than the England average (6,565) which is consistent with having fewer pharmacies per 100,000 population. This might involve a change in the skill mix and capacity within each pharmacy to cope with the predicted additional demand.
- A potential future gap of pharmaceutical provision in Basford, Crewe was identified due to a large, planned housing development. It is recommended that this is monitored for as the housing development progresses over the lifecycle of this PNA.
- Pharmacies have a continued important case-finding role in relation to high blood pressure.
- Pharmacies continue to have a role in supporting patients to recover quickly from minor ailments.
- Over the lifetime of this PNA, the Health and Wellbeing Board will actively consider pharmacy issues and need over the next three years and regularly consider the need for additional (supplementary) statements to update on any substantial changes that emerge.

- 2.9** Lloyds Pharmacy has announced that it plans to close 237 branches of its pharmacies within Sainsbury's supermarkets across the country. There are 2 planned closures in Cheshire East, one in Nantwich and one in Macclesfield. Members of the Public Health Intelligence team will be working with the Local Pharmaceutical Committee to understand implications for the recommendations within the recently published PNA and to determine next steps including whether a supplementary statement is required. This group will also consider the implications of newly published Census 2021 on population estimates.

3. Recommendations

- 3.1.** The Scrutiny Committee note the findings of the PNA and its recommendations.
- 3.2.** The Scrutiny Committee is asked to note the next steps in relation to considering the implications of planned pharmacy closures and newly published Census data.

4. Reasons for Recommendations

- 4.1.** Every Health and Wellbeing Board (HWB) in England has had a statutory responsibility to publish and keep up to date a statement of the needs for pharmaceutical services of the population in its area and the production of the PNA is in line with this duty. The purpose of the Scrutiny Committee is to undertake reviews and make recommendations on services or activities carried out by other organisations and which affect residents, businesses as well as the Council and its Committees. The Committee's responsibilities include: The discharge of the Council's responsibilities set out in section 19 of the Police and Justice Act 2006, section 244 of the National Health Service Act 2006, and section 9JA and 9JB of the Local Government Act 2000 in relation to flood risk management.
- 4.2.** The PNA process links to ensuring that Cheshire East Council: works together with residents and partners to support people and communities to be strong and resilient; and reduces health inequalities across the borough.
- 4.3.** The production of the PNA supports three outcomes from the Health and Wellbeing Strategy 2018-21:
- Create a place that supports health and wellbeing for everyone living in Cheshire East
 - Improving the mental health and wellbeing of people living and working in Cheshire East
 - Enable more people to live well for longer

5. Background and options

- 5.1.** Cheshire East Health and Wellbeing Board has a statutory responsibility to publish an up-to-date statement of pharmaceutical needs. A revised PNA was published in September 2022. There was no other option as a revised PNA had to be published by 1 October 2022. This represented an extended deadline due to the COVID-19 pandemic.
- 5.2.** The Health and Wellbeing Board approved delegation of the day-to-day authority for the development of the revised PNA to the Director of Public Health on 23 November 2021 at minute number 31.
- 5.3.** The PNA covers community pharmacy opening times, services delivered from community pharmacies, and accessibility.
- 5.4.** The production of the PNA was overseen by the Cheshire East PNA Steering Group, which included representation from:
- Cheshire East Council Public Health
 - Cheshire Clinical Commissioning Group
 - Healthwatch
 - The Chair of the Local Pharmaceutical Committee and of the Local Pharmaceutical Network
 - Local Medical Committee representatives
 - East Cheshire NHS Trust
 - Mid Cheshire Hospitals NHS Foundation Trust.
- 5.5.** The production of the PNA involved:
- Analysis of data relating to pharmaceutical need and demand from wide and varied sources
 - Regular consultation with members of the Cheshire East PNA Steering Group
 - A public survey, and incorporation of 2 questions regarding pharmacies as part of broader Healthwatch conversations
 - A dispensing doctors survey
 - A community pharmacy contractors survey.
 - Public Consultation from 1 April 2022 to June 2022

6. Consultation and Engagement

- 6.1.** The draft PNA underwent public consultation from 1 April 2022 to 10 June 2022. This involved invitations for all key stakeholders to feedback. Key

stakeholders were identified by the Cheshire East PNA Steering Group through examination of the national guidance³ and of the local Equality Impact Assessment. The consultation was also widely publicised via: media release through local and regional media channels; and on the Council's website, Facebook and Twitter channels.

- 6.2.** A total of 105 completed responses were received. There were also 354 partial responses: a partial response is where a person has started to complete the survey but never hit the submit button on the final page.
- 6.3.** Findings from a comprehensive analysis of the consultation is summarised at Appendix G of the full document. This analysis resulted in a variety of clarifications and provision of additional details in the final version of the PNA. However, after careful consideration of the analysis of the consultation responses this did not change the overall conclusions of the PNA. In addition to updating the full document to include the consultation findings, the short Plain English Summary of the PNA was also updated to provide further clarity following consultation.
- 6.4.** The draft PNA concluded that pharmaceutical provision within Cheshire East is currently adequate, only 28 out of 105 respondents (27%) agreed with this statement, 13 of whom strongly agreed. Considerably more respondents disagreed with this statement than during the last PNA consultation conducted in 2018, with 55 out of 103 respondents disagreeing (53%). Further analysis of the full responses showed that a large proportion (59%, 61 responses) were from residents of one area, we refer to this as Area A. This disproportionate representation from one area was skewing the analysis of both the closed questions and the concerns raised in the open questions.
- 6.5.** A total of 76 respondents gave additional detail in response to the open questions included in the consultation questionnaire: 52 were residents of Area A, a further 8 responses related to the provision in that area, and only 16 related to the rest of Cheshire East (21%). Of the themes raised within the open questions, 73% related to performance issues. Concerns raised regarding specific pharmacies via this consultation process have been raised with NHSE who manage the pharmacy contracts. The performance and quality of community pharmaceutical providers are outside of the scope of the PNA. However, it is important for residents to raise these concerns,

³ Department of Health and Social Care (2021) Guidance. Pharmaceutical needs assessments: information pack Available from: <https://www.gov.uk/government/publications/pharmaceutical-needs-assessments-information-pack> (Accessed 25 July 2022).

particularly if they affect patient safety. An appendix showing the steps residents can take to complain has been developed and included within the full PNA document 'How to complain' at Appendix H. A link will also be provided on the webpage where the PNA will be held once published, and the same information has been provided within the short Plain English Summary).

6.6. Other concerns raised through the consultation have been summarised in Table C of the consultation report at Appendix G. This table also summarises actions taken to address this feedback. All concerns raised have been duly considered and where necessary, appropriate actions taken and documented in a formal action log. These have involved additional wording within the PNA. The purpose of this additional wording is to clarify any conclusions drawn and as outlined in Table C of the consultation report.

6.7. Following an analysis of the consultation responses, the overall conclusions of the PNA remain the same: pharmaceutical provision is adequate, and the PNA has not identified current or anticipated future need for new NHS pharmaceutical service providers in Cheshire East over the time frame of this latest PNA.

6.8. Nevertheless, over the lifetime of the PNA 2022, the public health intelligence team will actively consider pharmacy issues and need on behalf of the Health and Wellbeing Board. They will regularly consider the need for additional (supplementary) statements to update on any substantial changes that emerge.

7. Implications

7.1. Legal

7.1.1. Every Health and Wellbeing Board (HWB) in England has a statutory duty (Section 128A of NHS Act 2006, as amended by Health Act 2009 and Health and Social Care Act 2012) to publish and keep up to date a statement of the needs for pharmaceutical services of the population in its area, referred to as a pharmaceutical needs assessment (PNA).

7.1.2. The Scrutiny Committee carries out the Council's statutory scrutiny responsibilities in relation to local health services (as set out in Section 244 of the Health and Social Care Act 2006).

7.2. Finance

This report is undertaken by the Public Health team within Cheshire East Council on behalf of the Health and Wellbeing Board. There are no financial implications to the Council aside from the time and resources it has taken to produce the report and conduct the consultation. These resources form part of the existing Public Health ring-fenced budget and therefore no changes are required to the Council's existing Medium Term Financial Strategy (MTFS).

7.3. Policy

None identified. This is a statutory report to be published to inform NHS England of the local picture. NHS England is the decision-making body about the commissioning of new pharmacy premises.

7.4. Equality

An Equality Impact Assessment was completed. It highlighted the need to proactively promote the PNA with certain population groups more, due to the low number of responses to the public survey. This has been addressed as part of the formal consultation process. Its recommendations/decisions here.

7.5. Human Resources

None identified

7.6. Risk Management

None identified. This is a statutory report to be published to inform NHS England of the local picture. NHS England is the decision-making body about the commissioning of new pharmacy premises.

7.7. Rural Communities

Both rural and town areas of the Council's footprint are considered as part in this report.

7.8. Children and Young People/Cared for Children

There are no direct implications for children and young people.

7.9. Public Health

This work and its recommendations aim to guide improvement of public health in relation to pharmaceutical services through intelligence-informed approaches.

7.10. Climate Change

The PNA includes consideration of ways in which local pharmacies promote wellbeing and healthy lifestyles and illness prevention.

Access to Information	
Contact Officer:	Dr Susan Roberts, Consultant in Public Health Susan.Roberts@cheshireeast.gov.uk
Appendices:	Appendix A - Map: Location of Care Communities, Community Pharmacies and GPs in Cheshire East
Background Papers:	Cheshire East Pharmaceutical Needs Assessment documents available at: Health and Wellbeing Board (cheshireeast.gov.uk)

Appendix A

Map: Location of Care Communities, Community Pharmacies and GPs in Cheshire East

