

Director of Public Health

Meeting of:	Date	Agenda item	Ward(s)
Health Scrutiny	11 April 2016		All

Delete as appropriate	Exempt	Non-exempt
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SUBJECT: Department of Health Consultation – Community Pharmacy in 2016/17 and Beyond**1. Synopsis**

- 1.1 The paper provides a summary of the Department of Health (DH) “Community Pharmacy in 2016/17 and beyond” consultation¹. The paper outlines the consultation proposals and some preliminary reflections on how they may affect Islington residents including both health and wider social considerations. The paper will also outline how the CCG and Public Health will work with the Lead Member for Health and Social Care to develop a response to the consultation along with key stakeholders including the Local Pharmaceutical Committee (LPC) ahead of the consultation period ending on 24 May 2016.

2. Recommendations

- 2.1 The Committee is asked to note the paper for information.

3. Background

- 3.1 The Department of Health has recently published a consultation which proposes an extensive review of community pharmacy services. The DH focus of these changes is to ‘place community pharmacy at the heart of the NHS’ in line with proposed far-reaching changes to the primary care landscape.
- 3.2 The aims of the proposals are to:
1. Integrate community pharmacy and pharmacists more closely within the NHS, optimising medicines use and delivering better services to patients and the public.
 2. Modernise the system for patients and the public – making the process of ordering prescriptions and collecting dispensed medicines more convenient for members of the public by ensuring they are offered a choice in how they receive their prescription.
 3. Ensure the system is efficient and delivers value for money for the taxpayer.
 4. Maintain good public access to pharmacies and pharmacists in England.

¹ Department of Health’s “Community Pharmacy in 2016/17 and beyond” consultation. Available at: <https://www.gov.uk/government/publications/putting-community-pharmacy-at-the-heart-of-the-nhs>

The more detailed questions are listed at Appendix 1.

What do the proposals mean for the health of Islington residents?

- 3.3 Islington has a diverse resident population, with larger proportions of both younger people and minority ethnic groups than the overall London population. Islington also has one of the most deprived populations in the country, with the North locality being particularly deprived. Over 38,000 residents have a diagnosed long term condition, many have more than one condition, and it is estimated that the prevalence is actually much higher, with around 45,730 more long term conditions undiagnosed in the population. It is well recognised that encouraging prevention, early diagnosis, proactive long-term management and supporting self-management is key to helping improve the health and wellbeing of Islington residents with long-term conditions and community pharmacy have a central role in that.
- 3.4 Public Health completed a Pharmacy Needs Assessment for Islington² in 2015. With 45 pharmacies overall, Islington has a similar rate of community pharmacies per 100,000 residents to the London average (21 pharmacies). One of the pharmacies in Islington is on a '100 hour' contract, providing coverage early in the morning and late at night. There is at least one pharmacy in most of the borough's wards, and three of the localities have a late opening pharmacy.
- 3.5 In 2012/13, Islington pharmacies dispensed on average 4,299 prescriptions per month, meeting the current threshold for the NHS's Establishment payment of £25,000 per year (received by all pharmacies dispensing 2,500 or more prescriptions a month). The average number of items dispensed per pharmacy in Islington is lower than most other boroughs. The low average per pharmacy suggests that current demand for essential services is being met and there would be capacity, on average, to meet any increased demand for prescriptions that might arise over the next few years as a result of inward migration and an increase in the prevalence of long term conditions. However, this lower average prescription rate also makes Islington pharmacies at higher risk of being negatively impacted by the Consultation proposals.
- 3.6 In addition to dispensing medicines, Islington pharmacies play a key role in the delivery of various locally commissioned services (LCSs) for both Public Health and the CCG eg stop smoking, substance misuse, NHS Health Checks and contraceptive services. An increasing number of Islington pharmacies are part of a growing nationally-approved network of Healthy Living Pharmacies (HLPs) whose aim is to provide a one-stop shop of key preventive behavioural change and health and wellbeing advice services, easily accessible to the public.

Impact on Islington pharmacies and wider socio-economic considerations

- 3.7 The general thrust of the proposals - improving the care of patients by making much better use of the expertise, accessibility and acceptability of community pharmacists - appears to be widely accepted and welcomed by all quarters, including and perhaps, especially by pharmacists themselves. The LPC strongly endorse their key role to play in the transformation of the healthcare delivery model by identifying health problems, managing existing conditions, and promoting healthy lifestyles, all at the heart of the community.
- 3.8 However the proposals also present risks to Islington pharmacies, particularly for the sustainability of many of them as small and medium sized enterprises (MSE) and therefore, the associated effects to the immediate communities they serve as local employers and the general economic vibrance of local high streets. Camden and Islington LPC estimate that approximately one third to half of pharmacies might close in Islington.³

Next steps

- 3.9 Public Health and the CCG are planning to establish a task and finish group to consider the implications of the consultation, develop a response in conjunction with the Lead Member for Health and Social Care and consider how we develop local mitigation to funding reductions. The group will include key

² Islington Pharmaceutical Needs Assessment 2015. Available at:
[http://www.islington.gov.uk/publicrecords/library/Public-health/Quality-and-performance/Reporting/2014-2015/\(2015-03-25\)-IslingtonPNA_FinalDraft.pdf](http://www.islington.gov.uk/publicrecords/library/Public-health/Quality-and-performance/Reporting/2014-2015/(2015-03-25)-IslingtonPNA_FinalDraft.pdf)

³ Email correspondence from Y Parmar, CEO, Camden & Islington LPC. 29 Feb 2016.

stakeholders affected by the Consultation, especially the LPC. Local mitigations to the funding reductions might include potential collaborative working on bids for the proposed NHS Pharmacy Integration Fund and considering additional commissioning opportunities. The work will also help inform development of the CCG's local integrated Medicines Optimisation strategy incorporating developments to place community pharmacy at the heart of the NHS.

4. Implications

4.1 Financial implications: to be added when received

4.2 Legal Implications: to be added when received

4.3 Environmental Implications: to be added when received

4.4 Equality Impact Assessment:

A Resident Impact Assessment will be completed as part of the consideration of any consultation submission.

5. Conclusion and reasons for recommendations

5.1 The Department of Health's consultation proposes an extensive review of community pharmacy services to place community pharmacy at the heart of the NHS. Proposals include changing and developing new models of care, utilising the many skills of the nationally growing pharmacy workforce and providing even greater integrated support and medicines optimisation for the local population. While these aims are widely welcomed given the high levels of health need amongst Islington residents, there is concern at the possible negative socio-economic impacts of closures to local high street pharmacies. Public Health and the CCG will work with the Lead Member for Health and Social Care to develop a response to the consultation along with key stakeholders including the Local Pharmaceutical Committee (LPC) ahead of the consultation period ending on 24 May 2016 and to consider how we develop local mitigation to subsequent funding reductions.

5.2 The Committee is asked to note the work planned to develop a response to the consultation and subsequent follow-up for Islington.

Appendices

Background papers:

Final report clearance:

Signed by:



Director of Public Health

Date: 31 March 2016

Received by:

Head of Democratic Services

Date

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Appendix 1

Department of Health Consultation – Community Pharmacy in 2016/17 and Beyond

List of consultation questions

The aims of the proposed changes are to:

1. Integrate community pharmacy and pharmacists more closely within the NHS, optimising medicines use and delivering better services to patients and the public.
2. Modernise the system for patients and the public – making the process of ordering prescriptions and collecting dispensed medicines more convenient for members of the public by ensuring they are offered a choice in how they receive their prescription.
3. Ensure the system is efficient and delivers value for money for the taxpayer.
4. Maintain good public access to pharmacies and pharmacists in England.

As such, the questions for the consultation are outlined below:

Bringing pharmacy into the heart of the NHS

- What are your views on the introduction of a Pharmacy Integration Fund?
- What areas should the Pharmacy Integration Fund be focussed on?
- How else could we facilitate further integration of pharmacists and community pharmacy with other parts of the NHS?

Modernising the system to maximise choice and convenience for patients and the public

- To what extent do you believe the current system facilitates online, delivery to door and click and collect pharmacy and prescription services?
- What do you think are the barriers to greater take-up?
- How can we ensure patients are offered the choice of home delivery or collection of their prescription?

Making efficiencies

- What are your views of the extent to which the current system promotes efficiency and innovation?
- Do you have any ideas or suggestions for efficiency and innovation in community pharmacy?
- What are your views of encouraging longer prescription durations and what thoughts do you have of the means by which this could be done safely and well?

Maintaining public and patient access to pharmacies

- What are your views on the principle of having a Pharmacy Access Scheme?
- What particular factors do you think we should take into account when designing the Pharmacy Access Scheme?