

Consultation Report for West Berkshire Pharmaceutical Needs Assessment (2018 to 2021)

Introduction

This report outlines the formal consultation that took place, as part of the development of West Berkshire's Pharmaceutical Needs Assessment (PNA) for 2018-2021. This process meets the statutory requirements set out in [NHS \(Pharmaceutical and Local Pharmaceutical Services\) Regulations 2013](#), which state that Health and Wellbeing Boards must formally consult specific organisations and local stakeholders about any draft PNAs for a minimum of 60 days.

This report:

- details how the consultation of West Berkshire's draft PNA was undertaken
- summarises the responses received
- Identifies actions taken to amend the final PNA, as a result of the consultation responses.

Consultation Process

West Berkshire's draft PNA report and supporting appendices were made publically available on West Berkshire Council's website from 1st November 2017 to 31st December 2017. Details about how to request paper copies of the report were also included on the website page. People were encouraged to take part in the consultation by responding to a short online survey, which was hosted by Bracknell Forest Council's Objective software. In addition, respondents could also contact Public Health Services for Berkshire (Berkshire Shared Public Health Team) directly by email or phone to make any comments.

The online survey included 11 questions with the opportunity to provide further comments and suggestions. The full survey can be seen in Appendix F

In line with the [NHS \(Pharmaceutical and Local Pharmaceutical Services\) Regulations 2013](#), the following local organisations and key stakeholders were also specifically invited to respond to the consultation for West Berkshire:

- Neighbouring local authorities – Hampshire County Council, Oxfordshire County Council, Reading Borough Council, Wokingham Borough Council
- Four Berkshire West Clinical Commissioning Groups (CCG) – Newbury & District CCG, North & West Reading CCG, South Reading CCG and Wokingham CCG
- The Local Pharmaceutical Committee (LPC) – Pharmacy Thames Valley
- The Local Medical Committee (LMC) – Berkshire, Buckinghamshire & Oxfordshire LMC
- Local pharmacy contractors and dispensing doctors
- Healthwatch West Berkshire
- Local NHS Trusts – Royal Berkshire NHS Foundation Trust, Berkshire Healthcare NHS Foundation Trust, Frimley Health NHS Foundation Trust

Appendix E: PNA Consultation Process and Feedback Report

Responses to the consultation were collated and analysed by Public Health Services for Berkshire, on behalf of the Health and Wellbeing Board. All responses were considered, reviewed and the PNA was amended as appropriate. A summary of the consultation responses, specific comments and actions taken are included below.

Results

A total of 8 responses were received as part of the formal consultation for West Berkshire's PNA. 7 of these were via the online survey and an additional one was by email. There were 2 responses from Health and Wellbeing Board members and 3 from General Practice team members. Organisation responses were also received from NHS England, the Local Pharmaceutical Committee and Berkshire West Clinical Commissioning Group. It is important to note that the consultation for West Berkshire's PNA was undertaken at the same time as the other 5 PNAs across Berkshire, so some of the responses received from organisations referred to the provision of pharmaceutical services across more than one HWB area.

Online response summary

This section provides a summary of the responses received through the online survey. Participants in the survey were not required to complete every question, so these do not always equal the total number of respondents. The survey also provided the opportunity to write specific comments. These have been considered later on in the report, as the comments often referred to several questions or provided general feedback about the PNA report or pharmaceutical service provision within West Berkshire, (see Table of Specific Comments on page 4).

Question	Responses		
	Yes	No	Not sure
Did you take part in the August 2017 survey?	0	7	0

None of the respondents to the formal consultation had taken part in the earlier public survey, which was used to gain patient feedback to inform the development of the PNA.

Question	Responses		
	Yes	No	Not sure
1 Is the purpose of the PNA explained sufficiently within the draft PNA document (Section A)?	7	0	0
2 Does the document clearly set out the scope of the PNA (Section B)?	7	0	0
3 Does the document clearly set out the local context and the implications for the PNA (Section C)?	7	0	0
4 Does the information provide a reasonable description of the services which are provided by pharmacies and dispensaries in the local authority (Section D)?	5	1	0

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5	Are you aware of any pharmaceutical services currently provided which have not been included within the PNA?	1	3	3
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All respondents stated that they thought the purpose of the PNA was explained sufficiently in the draft report and that the scope, local context and implications for the PNA were clearly set out.

One respondent noted that the information provided was not a reasonable description of the pharmaceutical services provided in the local authority area, as Compton Surgery had not been added as a dispensing practice. This service was subsequently added to the final West Berkshire PNA report and to Map 1 and Appendix C.

Question		Responses		
		Yes	No	Not sure
6	Do you think the pharmaceutical needs of the population have been accurately reflected throughout the PNA?	5	0	2
7	Please indicate below if you agree with the conclusions for the services described (Section G):			
	Current necessary provision of pharmaceutical services	5	0	1
	Current gaps in pharmaceutical services	5	0	1
	Future gaps in pharmaceutical services	4	1	1
	Current additional provision of pharmaceutical services	5	0	1
	Opportunities for improvements and/ or better access to pharmaceutical services	5	1	1
	Impact of other services which affect the need for pharmaceutical service	4	1	1
8	Is there any additional information which you think should be included in the PNA?	1	4	0

The majority of respondents (5 of 8) thought that the pharmaceutical needs of the population had been accurately reflected throughout the PNA. The majority (4-5) also stated that they agreed with the conclusions for the different services described in Section G of the PNA Report. The remaining respondents did not agree with all the conclusions, or stated that they were not sure. Comments were provided for these reasons, such as the potential impact of changes to other NHS services on local pharmacy provision, pressure of future housing developments and queries around specific pharmacy services. These have all been addressed in the overall comments at the end of this report.

The LPC stated that they thought additional information should be included in the PNA around the types of services that the Health & Wellbeing Board would like to see commissioned from local pharmacies. These comments have also been addressed in the overall comments at the end of the report and incorporated into the final PNA.

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Question		Responses		
		Yes	No	Not sure
9	Has the PNA provided adequate information to inform:			
	Market Entry Decisions <i>(NHS England only)</i>	(3)	1	(2)
	How you may commission services from pharmacies in the future <i>(All commissioners)</i>	3	1	2
10	Does the PNA give enough information to help your own future service provision and plans? <i>(Pharmacies and dispensing appliance contractors only)</i>	1	0	1

Questions 9 and 10 in the online survey focussed on whether the PNA had provided adequate information to inform the commissioning of services from pharmacies, as well as if it gives pharmacies enough information to help them plan their future service provision. These questions were only relevant to certain organisations; however numbers in brackets in the table above show where questions were answered by other respondents.

NHS England stated that the draft PNAs across the 6 Berkshire HWB areas did not all provide adequate information to inform market entry decisions or how pharmacies may be commissioned in the future, however no specific concerns were received for West Berkshire in response to Question 9.

Some amendments were suggested and those relevant to West Berkshire's PNA have been addressed in the overall comments at the end of the report and incorporated into the final PNA, where appropriate.

Specific comments received

A total of 11 free text comments were completed from the 7 online respondents for West Berkshire's PNA. These have been summarised and grouped below, with the response and actions taken. For clarity, some comments have been separated where there were multiple topics addressed within each comment.

Summary of Comments	Relevant survey questions	Response and actions taken
Dispensing general practice not included in the draft PNA as a pharmaceutical service	Q5, Q6	Agree that this should have been included. Section A10 of the final report has been amended to explain that dispensing doctors are providers of pharmaceutical services.
PNA and maps do not show the dispensary at Compton Surgery	Q4	Agree that this should have been included. Dispensary at Compton Surgery has been included in the final PNA report and the analysis has been adjusted accordingly. Appendix C and Map 1 have also been updated.

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Summary of Comments	Relevant survey questions	Response and actions taken
Concern that impact of other services on need for pharmaceutical services was not explicitly discussed in the draft PNA report.	Q7	Following additional information from Berkshire West CCGs, the final PNA was amended to better describe the potential changes to services that may affect pharmaceutical need.
Inappropriate for PNA to comment on delivery services, as these are not part of NHS England's contractual services and are therefore out of the remit of the PNA.	Q7	Agree that this should not have been included in the PNA. Section G5 of the final report has been revised to remove conclusions about potential changes to delivery services.
A key standard for rural community access to pharmacy services (within 20 minute drive or 5 miles distance) is not reflected in the draft PNA. Suggested opportunities for improvement to access should be revised.	Q7, Q8	Final PNA report was amended to clarify that all West Berkshire residents could access a pharmaceutical service within a 20 minute drive. The conclusions in Section G were also amended to take out reference to access times through walking.
Suggested revision to describe the Flu service commissioning more clearly	Q8	Final PNA was revised to clarify that the Flu service is commissioned annually.
The PNA should acknowledge that Hampshire residents may use pharmaceutical services in areas bordering the county to better assess provision.	Q6, Q8	The scope of the PNA focuses on residents living within West Berkshire and the pharmaceutical services that they have access to. However, an additional comment has been added into the PNA to clarify that people living outside of the area may also use these services.
The LPC commented that they would benefit from an indication of what services the Health & Wellbeing Board would like to commission from pharmacies to guide future developments.	Q8, Q10	Need to clarify response to this query with West Berkshire
Data in Section D suggests reduction of pharmacy provision from 22 to 18 per 100,000 people without explanation.	Q11	Data reviewed for clarity and accuracy. Draft report correctly describes current provision of 19 pharmacies per 100,000 population, which will reduce to 18 per 100,000 as a result of population growth. Other numbers included in the report describe national/regional figures.
Unclear use of both percentages and numbers when describing results of public survey	Q11	Agree that this was inconsistent. The final PNA report was amended to improve clarity and consistency in Section E.

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Summary of Comments	Relevant survey questions	Response and actions taken
The LPC noted that West Berkshire had a lower number of pharmacies per population than the national average, but that these served the population well and were likely to be able to cope with demands from population growth.	Q11	Support for the PNA's conclusions was welcomed.

Responses received by other methods

A joint response from the Berkshire West Clinical Commissioning Groups was also received by email.

Summary of Comments	Response and actions taken
Concerns raised about the effect of future housing developments in some specific areas of Berkshire. These did not include localities within West Berkshire.	Agree that identified population growth in West Berkshire should be within the capacity of the current pharmaceutical services and would not disproportionately affect one area. No changes to the PNA were required.
Provided information about the potential changes in local health services, which could impact on pharmacy service provision. These include the national consultation on prescription of low value medicines.	The information provided has been included in section C2 and conclusion G6 of the final PNA Report. The PNA has been amended to recognise that some of these changes, and the possible impacts, are unknown and can therefore not be quantified in the PNA. It is also recognised that the timeframe for some changes is not yet clear. Generally, planned changes to NHS services in the lifetime of the PNA are not expected to create demand for additional pharmaceutical services in West Berkshire.
Highlighted the Berkshire West CCGs Palliative Care dispensing scheme for emergency drugs	This provision was added to section D1 of the final PNA to better reflect locally commissioned services.

Following the Equality Impact Assessment Screening, the PNA Steering Group also decided to add some additional information into Section C of the final PNA, which highlighted the different health outcomes observed by certain groups of people. While this had been included in the draft report, it was felt that the different prevalence and mortality rates for people of different protected characteristics needed to be more explicit in the final report. The full Equality Impact Assessment Screening report is attached at Appendix D.

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Conclusion

The consultation process was effective in receiving scrutiny for the PNA from the healthcare workforce. We were disappointed to not receive feedback from members of the public, but are confident that the stakeholders who replied represented concerns of local residents. All comments were gratefully received and were used to improve the accuracy and quality of the PNA.