

# Appendix J

## Consultation Responses

## Bromley Pharmaceutical Needs Assessment Consultation Feedback

### 1. Accuracy

One point of accuracy was raised:

Organisation	Suggested Inaccuracy	PNA Steering Group Discussion and Decision	PNA Amended
Crofton Pharmacy, BR6 8DG	<ul style="list-style-type: none"> <li>▪ Pharmacy opening hours are:               <ul style="list-style-type: none"> <li>○ M-F: 09:00 – 18:00</li> <li>○ Sat: 09:00 – 13:00</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>▪ The draft PNA states opening hours as:               <ul style="list-style-type: none"> <li>○ M-F: 09:00 – 18:30</li> <li>○ Sat: 09:00 – 14:00</li> </ul> </li> <li>▪ This was based on the contractor questionnaire</li> <li>▪ The NHSE list shows that the pharmacy closes at 18:00 on weekdays and 13:00 on Saturday</li> <li>▪ The PNA Steering Group agreed to update the PNA to reflect the correct opening hours for this pharmacy</li> </ul>	Yes

### 2. Post Consultation Changes in NHS Pharmaceutical Services

The Steering Group noted the changes in relation to the provision of NHSE pharmaceutical services:

Organisation	Change in Provision	PNA Steering Group Discussion and Decision	PNA Amended
Kamson's Pharmacy, SE20 8AJ	<ul style="list-style-type: none"> <li>▪ This pharmacy relocated to a new address on 4 December 2017:               <ul style="list-style-type: none"> <li>○ Oaks Park Medical Centre, 17 Oakfield Rd, Penge, SE20 8QA</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>▪ The pharmacy has relocated by a distance of 0.3 miles and is now co-located with the GP surgery</li> <li>▪ The pharmacy was previously located in Crystal Palace ward but is now located in Penge and Cator ward, noting the pharmacy sits on the boundary of the wards (and will continue to sit on the boundary of the wards)</li> <li>▪ The PNA Steering Group agreed that a supplementary would be issued at the time the final PNA is published</li> </ul>	No
Lloydspharmacy, SE25 4PT	<ul style="list-style-type: none"> <li>▪ This pharmacy has been flagged as one of the Lloydspharmacy branches which may close</li> <li>▪ <i>This potential change is based on reports of pharmacy closures in Chemist and Druggist</i></li> </ul>	<ul style="list-style-type: none"> <li>▪ 100 hour pharmacy, located in Croydon, is within 1 mile of Clockhouse &amp; Kelsey Park wards (no. 73 on the maps)</li> <li>▪ NHSE have confirmed that the pharmacy will be closing on the 26 February 2018</li> <li>▪ The PNA Steering Group agreed that a supplementary statement will be issued following closure of the pharmacy</li> </ul>	No

### 3. Feedback and Comments

This section sets out the details of the feedback and comments which were received during the formal consultation and summarises the response of the PNA Steering Group. The section has been organised in accordance with the specific questions asked within the response template which can be found in Appendix I of the PNA.

For each question, we summarise the percentage of respondents who either agreed, disagreed or were not sure with respect to the information contained within the PNA. Where relevant we list the specific comments received and set out the PNA Steering Group decision noting whether or not the PNA has been amended.

Has the purpose of the PNA been explained sufficiently within section 1.1 of the draft PNA document?			
Yes = 100% (n=8)	No = 0%	Not sure = 0%	
No detailed comments received			

Does Section 1.3 clearly set out the scope of the PNA?			
Yes = 100% (n=8)	No = 0%	Not sure = 0%	
Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
BBG LPC	Changes since 2015 (Page 6) <ul style="list-style-type: none"> <li>NHSE refers to STPs as Sustainability and Transformation Partnerships instead of sustainability and transformation plans</li> </ul>	<ul style="list-style-type: none"> <li>The PNA Steering Group agreed that the document would be updated (pages 6,19, 101 and 102) to reflect this terminology</li> </ul>	Yes

Does Section 2 clearly set out the local context and the implications for the PNA?			
Yes = 100% (n=8)	No = 0%	Not sure = 0%	
Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
BBG LPC	Languages (Page 10) <ul style="list-style-type: none"> <li>Increasingly pharmacists make use of Google translate or Smart Apps to interact with users who are unable to speak English</li> </ul>	<ul style="list-style-type: none"> <li>The PNA Steering Group noted the comment and agreed that this information should be included in the "overview" box on page 10</li> </ul>	Yes

Do you think the needs of the population, and the impact upon the need for pharmaceutical services, have been accurately reflected throughout the PNA?			
Yes = 50% (n=4)	No = 0%	Not sure = 50% (n = 4)	
Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
Lotus Pharmacy, BR3 3RA	Substance Misuse (page 14) <ul style="list-style-type: none"> <li>Hospital admissions due to substance misuse for those aged 15-24 appears to be almost double the England rate?</li> </ul> Perhaps an area to focus attention?	<ul style="list-style-type: none"> <li>The PNA Steering Group was advised that the table (page 25) notes that community pharmacy helps to address the consequences of substance misuse</li> <li>It was agreed to make specific reference to hospital-related admissions on this page</li> </ul>	Yes

Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
Lotus Pharmacy, BR3 3RA	<p>Older People (page 15)</p> <ul style="list-style-type: none"> <li>▪ Higher prevalence of dementia in Bromley compared to London and the UK</li> </ul> <p>Perhaps an area to focus attention?</p>	<ul style="list-style-type: none"> <li>▪ The Steering Group noted that the PNA makes the following references to dementia: <ul style="list-style-type: none"> <li>○ Within the specific section on supporting people with disabilities, including those with dementia (section 3.2.1.3; page 42 and 43)</li> <li>○ The document systematically considers the needs of those with a protected characteristic for all services (essential, advanced, enhanced and locally commissioned services)</li> </ul> </li> <li>▪ The group discussed the wider need to improve support to people with dementia, cognitive impairment and mental health</li> <li>▪ It was agreed to include a commitment to “work in partnership with community pharmacists to explore how people with dementia, cognitive impairment, mental health and those with other additional needs can be supported to take their medicines; including signposting to other services as required” within the “future section” (added as a potential service development on page 102 of the final PNA)</li> </ul>	Yes
BBG LPC	<p>There is a different dynamic within the NHS at the moment which perhaps does not come through. In that NHSE along with CCGs are moving the focus of responsibility to the users of health service e.g. patients are being encouraged to buy certain OTC medicines and order their own repeat prescriptions.</p> <p>In addition, the cuts imposed on the Community Pharmacy sector are having major implications on how services are delivered</p> <p>The trend to work in collaboration seems to be the key word at the moment and therefore the mention of services beyond normal business hours must be viable therefore these additional hours need to have sustainable funding by the commissioners</p>	<ul style="list-style-type: none"> <li>▪ The Steering Group noted that the PNA makes the following references which are relevant to this comment: <ul style="list-style-type: none"> <li>○ STP (page 19) notes the potential role for community pharmacy in supporting the self-care agenda</li> <li>○ Page 24 makes reference to the role of pharmacy as a first port of call to support people with self-care</li> <li>○ Page 25 makes reference to support for unscheduled care and self-care; and an opportunity to commission a wider range of services from pharmacy as part of the ICN model (which is based on co-ordination of care through multidisciplinary working)</li> <li>○ The future section (page 100) notes the opportunity for community pharmacy to play a wider role) and proposes an urgent minor illness service a service which may be commissioned in the future (page 101)</li> </ul> </li> <li>▪ The Steering Group discussed the comment and agreed to: <ul style="list-style-type: none"> <li>○ Flag the challenges and pressures faced by the community pharmacy sector to NHSE and other local commissioners. This is with a view to ensuring sustainable funding to support the evolving role community pharmacy; as well as ensuring that pharmaceutical services continue to meet the complex health needs of the ageing population</li> <li>○ Reflect the changing dynamic and the need for local pharmacy leaders to be involved at a strategic level locally, regionally and nationally in the document on page 25</li> </ul> </li> </ul>	Yes

Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
Crofton Pharmacy, BR6 8DG	The dynamics within the NHS is ever changing, and it is not clear that the CCG and NHSE are moving focus of responsibility to the users of health service e.g. patients are being encouraged to buy certain OTC medicines and order their own repeat prescriptions. In addition, the cuts imposed on the Community Pharmacy sector are having major implications on how services are delivered. The trend to work in collaboration seems to be the key word at the moment and therefore the mention of services beyond normal business hours must be viable therefore these additional hours need to have sustainable funding by the commissioners.	<ul style="list-style-type: none"> <li>PNA Steering Group noted the comment which is similar to that which was submitted by BBG LPC (page 4 of this appendix)</li> </ul>	As above
Peters Chemist, BR3 5NT	The cuts imposed on the Community Pharmacy sector are having major implications on how services are delivered, therefore the mention of services beyond normal business hours must be have sustainable funding by the commissioners.	<ul style="list-style-type: none"> <li>PNA Steering Group noted the comment which is similar to that which was submitted by BBG LPC (page 4 of this appendix)</li> </ul>	As above

**Please indicate if you think the PNA has provided a reasonable description of the service AND if you agree with the conclusions?**

**Section 3.2.1 Essential Services**

Yes = 50% (n=4)      No = 0%      Not sure = 50% (n = 4)

Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
BBG LPC	Page 53, evidence to back up "Many pharmacy users may be considered as disabled." Seems a generalisation with no supporting evidence. With regards to language most pharmacies access Google Translate and some use Smart Phone Apps.	<ul style="list-style-type: none"> <li>The comment refers to how pharmacies may need the needs of those with a protected characteristic. It was agreed to: <ul style="list-style-type: none"> <li><b>Disability:</b> amend to read "a proportion of pharmacy users may be considered disabled" &amp; cross reference to page 15</li> <li><b>Race:</b> add "pharmacists may access Google Translate and some use Smart phone apps"</li> </ul> </li> </ul>	Yes
BBG LPC	Page 54. There is no mention of EPS R2 to address the need for urgent scripts, which can be sent to the pharmacy and 97% of pharmacies offer a delivery service so that a patient can receive their medication in time. In addition, EPS R2 can allow the patient to have the prescription sent to their place of work.	<ul style="list-style-type: none"> <li>The PNA Steering Group noted: <ul style="list-style-type: none"> <li>Pharmacy collection &amp; delivery services are mentioned on page 42 of the PNA; and in Appendix D</li> <li>EPS is mentioned on page 45 of the PNA; and on page 32 where it is noted that respondents to the public survey identified that EPS may create difficulties in collecting a repeat prescription when their own pharmacy is closed</li> </ul> </li> <li>It was agreed to update pages 45 &amp; 55 to reflect that electronic repeat dispensing can improve access to repeat prescriptions without the need to see the GP surgery; and that EPS facilitates transmission of urgent prescriptions to the nearest open pharmacy at the request of the patient</li> </ul>	Yes

Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
Lotus Pharmacy, BR3 3RA	Insights from the public survey suggest dissatisfaction with pharmacy access and opening hours - perhaps better signposting from surgeries and advertising needs to be invested in as there are enough 100 hour pharmacies across the borough.	<ul style="list-style-type: none"> <li>▪ PNA Steering Group agreed to add a bullet point to the conclusions on page 55: “The HWB has identified that better signposting and improved advertising may improve awareness of pharmacies which open for extended hours”</li> </ul>	Yes
BBG LPC	<p>The pattern of GP surgeries opening may vary and therefore it would be difficult for pharmacy opening times to reflect the variance.</p> <p>Furthermore, the community pharmacy funding model is dependent on dispensing and in order to be viable under the current funding cuts commissioners would need to commission imaginatively to ensure good alignment between the services.</p> <p>The PNA has to explain that pharmacy contracts were historically offered as 40 hours per week and for a short period 100 hours per week and these have been in place ever since.</p> <p>Therefore pharmacies tend to be located near GP surgeries and the vast majority of GP surgeries do not open on the weekend.</p> <p>Specialist Out of Hours (OOH) GP services have been commissioned from FYFV and it is up to commissioners to ensure that adequate provision is in place.</p> <p>The PNA has to mention that pharmacies can only open when it is economically viable to do so; the NHS has limited number of A&amp;E departments open whereas years ago every hospital used to have an A&amp;E department.</p> <p>The PNA must articulate the economic realism that exists within the NHS and the wider economy</p>	<ul style="list-style-type: none"> <li>▪ The PNA Steering Group were advised that the comment refers to access and opening hours (pages 32 – 41; and the conclusions (pages 54 &amp; 55) <ul style="list-style-type: none"> <li>○ Page 32 – overview box notes that the current regulations require pharmacies to open for a minimum of 40 hours as core hours (or for 100 hours for pharmacies which opened under an exemption to the 2005 Regulations); pharmacies may offer supplementary hours over and above this</li> <li>○ Page 32 - the results of the public survey showed more dissatisfaction with opening hours on weekday evenings and Sundays; and specific comments from members of the public which reflected that the closure of pharmacies before GP surgeries impacted upon patient care</li> <li>○ Page 39 - shows limited alignment with GP opening hours in the mornings before 8am &amp; after 8pm; and reduced choice in the mornings at 8am &amp; the evenings up until 7pm</li> </ul> </li> <li>▪ Dispensing does account for a significant proportion of pharmacy remuneration; this is one of a number of requirements for essential services. Pharmacies may choose to become accredited to provide advanced services; and may be commissioned to provide enhanced &amp; locally commissioned services</li> <li>▪ Pharmacies provide non-NHS services (Appendix D) and most pharmacies have a retail component</li> <li>▪ The PNA Steering Group agreed that the PNA conclusions need to make it clear that additional hours need to be <i>commissioned</i> from the current network of pharmacies</li> </ul>	Yes
Peters Chemist, BR3 5NT	The opening hours must be reflected with appropriate funding and it would require collaboration between the commissioners and providers to plan hours which reflect the need of the population. There is no mention of ESP R2 to address the need for urgent scripts which can be sent to the pharmacy, and most pharmacies offer a free delivery service so that patients can receive their medication on time.	<ul style="list-style-type: none"> <li>▪ PNA Steering Group noted the comment which is similar to that which was submitted by BBG LPC (as above)</li> </ul>	As above

Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
Lotus Pharmacy, BR3 3RA	Pg 55 Better access - GP's could open weekends to align with pharmacy opening hours and satisfy the demand for a working population (high in Bromley) Pharmacies operate on a business model where takings, profits and items are balanced carefully with staff salaries so if there is a need for overnight access or extended opening hours this would not be viable and would need to be funded as an additional service	<ul style="list-style-type: none"> <li>The PNA Steering Group noted the comment which refers to the identification of current and future improvements (conclusions) and agreed to bring the comment regarding additional funding to the attention of the commissioner (NHSE)</li> <li>GP opening hours are outside the scope of the PNA; this was not discussed any further</li> </ul>	No
BBG LPC & Crofton Pharmacy, BR6 8DG	Page 55. Current and Future or Better Access. Needs better wording because choice and access can always be improved regardless of the circumstances. The PNA must reflect that opening hours reflect funding and it would require collaboration between the commissioners and providers to plan hours which reflect the need of the population. In addition, the working pattern of individuals has changed beyond recognition with many individuals working from home, self-employed and on zero hour contracts which allows many individuals to access pharmacy service during normal business hours as reflected in the tables/figures.	<ul style="list-style-type: none"> <li>The PNA Steering Group was advised that this comment builds upon the earlier LPC comment (page 6 of this appendix) and specifically refers to the conclusion which identifies current and future improvements</li> <li>It was agreed that the current wording of the conclusion (PNA page 55) was misleading and that this would be amended to read: "We have identified that access and choice could be enhanced if <i>more pharmacies within the existing network were commissioned to extend opening hours on weekday mornings and evenings and also at weekends</i>. This would strengthen alignment with GP opening hours. The HWB has not identified a need for an additional pharmacy in any locality"</li> <li>It was noted that this amendment was relevant to delivering improvements for all pharmacy-based services</li> </ul>	Yes

**Please indicate if you think the PNA has provided a reasonable description of the service AND if you agree with the conclusions?**

**Section 3.2.3 Advanced Services**

<b>3.2.3.1: Medicines Use Reviews</b>	Yes = 37.5% (n=3)	No = 12.5% (n=1)	Not sure = 50% (n=4)
<b>3.2.3.2: New Medicine Service</b>	Yes = 50% (n=4)	No = 12.5% (n=1)	Not sure = 37.5% (n=3)
<b>3.2.3.3: Stoma Appliance Customisation</b>	Yes = 100% (n=8)	No = 0%	Not sure = 0%
<b>3.2.3.4: Appliance Use Reviews</b>	Yes = 100% (n=8)	No = 0%	Not sure = 0%
<b>3.2.3.5: Flu Vaccination</b>	Yes = 50% (n=4)	No = 12.5% (n=1)	Not sure = 37.5% (n=3)

Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
Medimpo Ltd (Elmers Pharmacy, BR3 3DY)	MURs This Service is due a review. The delivery of this should therefore vary in the future. Hopefully with an increase delivery	<ul style="list-style-type: none"> <li>The PNA Steering Group noted the comment</li> </ul>	No



Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
Lotus Pharmacy, BR3 3RA	MURs The average number of MUR's performed per pharmacy is lower than the England average. Pg 60 Further Provision - Consider domiciliary MUR's or authorisation for Telephone MUR's. This would benefit those most in need of a review such as house bound patients and enable us to target weekends when there is less footfall in the pharmacy.	<ul style="list-style-type: none"> <li>The PNA Steering Group noted that the PNA refers to domiciliary MURs on page 60</li> <li>It was agreed to add telephone MURs to the same bullet point</li> </ul>	Yes
BBG LPC & Crofton Pharmacy, BR6 8DG	MURs Similar comments to Essential Services, in addition Advanced Services are recruitment services which dependent on the judgement of the pharmacists and unlike dispensing which is a demand led service. Therefore, a certain percentage of patients decline the service and advanced services do not have 100% uptake. Page 60. "MURs may help women who planning pregnancy or breast feeding women to avoid harmful medicines." Statement is true if the women in question are taking prescribed medicines, how many pregnant women are on regular LTC medications?	<ul style="list-style-type: none"> <li>The PNA Steering Group noted the comment with respect to the demand nature of advanced services but this did not change the conclusions for this section</li> <li>It was also agreed that a proportion of pregnant women or women planning pregnancy would be taking medicines for a long term condition or conditions and that the statement the PNA did not need to be amended</li> </ul>	No
Peters Chemist, BR3 5NT	MURs Advanced Services are a recruitment services which unlike dispensing is a demand led service. Therefore, a certain percentage of patients decline the service and advanced services do not have 100% uptake.	<ul style="list-style-type: none"> <li>PNA steering group to note comment which is similar to that which was submitted by BBG LPC &amp; Crofton Pharmacy (on this page, above)</li> </ul>	As above
Medimpo Ltd (Elmers Pharmacy, BR3 3DY)	NMS: The delivery of this service nationally varies. The Service needs a review to be able to gain increased delivery	<ul style="list-style-type: none"> <li>The PNA Steering Group noted the comment</li> </ul>	No
BBG LPC & Crofton Pharmacy, BR6 8DG	NMS Similar comments to Essential Services, in addition Advanced Services are recruitment services which dependent on the judgement of the pharmacists and unlike dispensing which is a demand led service and is closely linked with the dispensing service as shown on table on page 62. Therefore, a certain percentage of patients decline the service and advanced services do not have 100% uptake.	<ul style="list-style-type: none"> <li>The PNA Steering Group noted the comment with respect to the demand nature of advanced services but this did not change the conclusions for this section</li> </ul>	No
Peters Chemist, BR3 5NT	NMS As indicated previously with regards to MUR services, NMS recruitment is also difficult and there will always be a percentage of patients that decline the service and advanced services do not have 100% uptake.	<ul style="list-style-type: none"> <li>PNA steering group to note comment which is similar to that which was submitted by BBG LPC &amp; Crofton Pharmacy (on this page, above)</li> </ul>	As above



Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
Lotus Pharmacy, BR3 3RA	<p>Flu Vaccination Advanced Service</p> <p>Pg 74 further provision of flu vaccination during extended hours</p> <p>Paydens Beckenham offer the service 100 hrs per week, however their local surgeries advertised on their TV screens to get their jabs at the surgery not the local pharmacy as they were offering the quad vaccine! Mixed messages to the public, suggestions of inferior vaccinations being used elsewhere may have had an impact on uptake.</p>	<ul style="list-style-type: none"> <li>▪ The PNA Steering Group noted the comment and confirmed that the issue had been addressed by the LMC at the time</li> </ul>	No
BBG LPC	<p>Flu Vaccination Advanced Service</p> <p>Similar comments to Essential Services, in addition Advanced Services are recruitment services which dependent on the judgement of the pharmacists and unlike dispensing which is a demand led service. Therefore, a certain percentage of patients decline the service and advanced services do not have 100% uptake.</p> <p>Consideration has to be given that the flu vaccination is not exclusive to community pharmacy and is a national service whereby patients can access the service anywhere in England. Working individuals can use NHS Choices or the IT platform to locate the nearest pharmacy to them whether at home or at work, in addition to the appointments offered by the patient's GP surgery.</p>	<ul style="list-style-type: none"> <li>▪ The PNA Steering Group noted: <ul style="list-style-type: none"> <li>○ Page 71 states that non-pharmacy providers include GPs and community nurses</li> <li>○ Page 74 notes that pharmacy potentially offers benefits in terms of access over non-pharmacy providers</li> <li>○ Under further improvements (Page 74) the document notes the HWB would like to see more pharmacies offering the service during extended hours, <i>where there is a demand for this (noting some of the pharmacies which open for extended hours don't offer this service)</i></li> <li>○ 38% of respondents in the public survey indicated that they would prefer to use their regular pharmacy for vaccination against flu or pneumonia compared with 16.9% who were prepared to use an alternative pharmacy</li> </ul> </li> <li>▪ The following amendments were agreed: <ul style="list-style-type: none"> <li>○ To note that residents may choose to access the service outside of the area (added to the "current picture; page 71)</li> <li>○ To amend the wording under "further provision / improvements" (page 74) to make it clear that the HWB would like more pharmacies which open for extended hours to offer to the service</li> </ul> </li> </ul>	Yes
Crofton Pharmacy, BR6 8DG	<p>Flu Vaccination is an Advanced Service and uptake is unlikely to be 100% as there are other providers for the service</p> <p>Consideration has to be given that the flu vaccination is not exclusive to community pharmacy and is a national service whereby patients can access the service anywhere in England. Working individuals can use NHS Choices or the IT platform to locate the nearest pharmacy to them whether at home or at work, in addition to the appointments offered by the patient's GP surgery.</p>	<ul style="list-style-type: none"> <li>▪ The PNA Steering Group noted the comment which is similar to that which was submitted by BBG LPC (above)</li> </ul>	As above

Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
Peters Chemist, BR3 5NT	This service is not exclusive to community pharmacy and is a national service whereby patients can access the service anywhere in England, including GP surgeries.	<ul style="list-style-type: none"> <li>The PNA Steering Group noted the comment which is similar to that which was submitted by BBG LPC (above)</li> </ul>	As above

Please indicate if you think the PNA has provided a reasonable description of the service AND if you agree with the conclusions?

### Section 3.2.4 Enhanced Services

**3.2.4.1: London Pharmacy Vaccination Service** Yes = 62.5% (n=5) No = 12.5% (n=1) Not sure = 25% (n=2)

Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
BBG LPC & Crofton Pharmacy, BR6 8DG	<p>London Pharmacy Vaccination Service</p> <p>Similar comments to Essential Services, in addition Advanced Services are recruitment services which dependent on the judgement of the pharmacists and unlike dispensing which is a demand led service. Therefore, a certain percentage of patients decline the service and advanced services do not have 100% uptake.</p> <p>Consideration has to be given that the London vaccination cohort is not exclusive to community pharmacy and it is a London wide service whereby patients can access the service anywhere in London. Working individuals can use the IT platform to locate the nearest pharmacy to them whether at home or at work, in addition to the appointments offered by the patient's GP surgery working under the same SLA.</p>	<ul style="list-style-type: none"> <li>The PNA Steering Group noted: <ul style="list-style-type: none"> <li>This is an enhanced service</li> <li>The PNA (page 75) notes that non-pharmacy providers include GPs and community nurses</li> <li>Pharmacy potentially offers benefits in terms of access over non-pharmacy providers (page 78)</li> <li>Further improvements (page 78) states the HWB would like to see more pharmacies commissioned to provide the service during extended hours, <i>where there is a demand</i></li> <li>38% of respondents in the public survey indicated that they would prefer to use their regular pharmacy for vaccination against flu or pneumonia compared with 16.9% who were prepared to use an alternative pharmacy</li> </ul> </li> <li>It was agreed to note that residents may choose to access the service from other London pharmacies (added to the "current picture; page 71)</li> </ul>	Yes
Peters Chemist, BR3 5NT	<p>London Pharmacy Vaccination Service</p> <p>Again, as mentioned with the flu vaccination service, the London pharmacy vaccination service is also not exclusive to pharmacies and can be accessed throughout London.</p>	<ul style="list-style-type: none"> <li>The PNA Steering Group noted the comment which is similar to that which was submitted by BBG LPC (above)</li> </ul>	As above

Please indicate if you think the PNA has provided a reasonable description of the service AND if you agree with the conclusions?

### Section 3.3 Locally Commissioned Services

<b>3.3.2: Tailored Dispensing Service</b>	Yes = 50% (n=4)	No = 0%	Not sure = 50% (n=4)
<b>3.3.3: Needle &amp; Syringe Exchange</b>	Yes = 37.5% (n=3)	No = 12.5% (n=1)	Not sure = 50% (n=4)
<b>3.3.4: Supervised Administration of Opiates</b>	Yes = 37.5% (n=3)	No = 12.5% (n=1)	Not sure = 50% (n=4)
<b>3.3.5: Integrated Sexual Health</b>	Yes = 50% (n=4)	No = 0%	Not sure = 50% (n=4)

Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
BBG LPC, Crofton Pharmacy, BR6 8DG & Peters Chemist BR3 5NT	<p>The TDS is under review and is currently being re-commissioned by NHS Bromley CCG with a likely increase in the number of community pharmacy providers, if attendance at the CCG's Tendering meeting by pharmacists is any indication.</p> <p>TDS is not a stand-alone service and is dependent on NHS Bromley CCG's Medicines Optimisation Service (MOS) provided by Oxleas to signpost patients into TDS, therefore the workload is driven by MOS consultations into the pharmacy.</p> <p>The MOS service does not operate extended hours or on weekends and list of auxiliary aids and support is under review by the commissioner.</p>	<ul style="list-style-type: none"> <li>▪ The PNA Steering Group was advised that the PNA makes the following references in relation to this comment: <ul style="list-style-type: none"> <li>○ Page 23: Provides a detailed overview of the CCG's current medicines optimisation arrangements</li> <li>○ Page 80: notes that patients are referred into the TDS by the MOS</li> <li>○ Page 83: Notes that the service is under review and that this may change the number and distribution of pharmacies which have been commissioned</li> <li>○ Page 80 &amp; 83: provide an overview of the pharmacies which offer the service during extended hours and at weekends</li> </ul> </li> <li>▪ The PNA Steering Group noted the comment and agreed to amend the "future box" (page 83) to reflect that that range of aids provided is under review</li> </ul>	Yes
Lotus Pharmacy, BR3 3RA	<p>Tailored Dispensing Service</p> <p>Valuable service, many benefits for patients and NHS however the TDS service spec is unnecessarily demanding, increasing costs for the pharmacy such as free deliveries, additional training for drivers - safeguarding level 2 and DBS checks together with an increasing number of adjustments provided under DDA will impact on service provision.</p>	<ul style="list-style-type: none"> <li>▪ The PNA Steering Group noted the comments which relates to how the service is commissioned</li> </ul>	No
Lotus Pharmacy, BR3 3RA	<p>Needle and Syringe Exchange</p> <p>Needle and syringe exchange would ideally be at the 100 hour pharmacies</p>	<ul style="list-style-type: none"> <li>▪ The PNA Steering Group agreed to add "including 100-hour pharmacies to the statement in the further provision / improvements box (page 87)</li> </ul>	Yes
BBG LPC	<p>Needle and Syringe Exchange</p> <p>The re-commissioning of the service under the Prime Contractor model will affect the way the service is commissioned (sub-contracted) from Community Pharmacy</p> <p>It will be the Prime Contractor's responsibility to ensure that the service is funded appropriately so that it is sustainable within the Community Pharmacy sector. In addition, this service is not exclusive to Community Pharmacy.</p> <p>In the past a similar Prime Contractor approach has led to a collapse in the service provision because the model was not economically viable for Community Pharmacy.</p>	<ul style="list-style-type: none"> <li>▪ The PNA Steering Group noted the comments which relate to how the service is commissioned</li> </ul>	No

Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
Crofton Pharmacy, BR6 8DG	<p>Needle and Syringe Exchange</p> <p>The re-commissioning of the service under the Prime Contractor model will affect the way the service is commissioned (sub-contracted) from Community Pharmacy.</p> <p>It will be the Prime Contractor's responsibility to ensure that the service is funded appropriately so that it is sustainable within the Community Pharmacy sector.</p> <p>In addition, this service is not exclusive to Community Pharmacy.</p>	<ul style="list-style-type: none"> <li>▪ The PNA Steering Group noted the comments which relate to how the service is commissioned</li> </ul>	No
Peters Chemist BR3 5NT	<p>Needle and Syringe Exchange</p> <p>Again another service not exclusive to community pharmacies.</p> <p>The re-commissioning of the service under the Prime Contractor model will affect the way the service is commissioned from Community Pharmacy. It will be the Prime Contractor's responsibility to ensure that the service is funded appropriately so that it is sustainable within the Community Pharmacy sector.</p>	<ul style="list-style-type: none"> <li>▪ The PNA Steering Group was advised that the PNA states that pharmacy is one of a range of providers on pages 84 and 87</li> <li>▪ The PNA Steering Group noted the comments which relate to how the service is commissioned and agreed that no changes to the PNA document were required</li> </ul>	No
Lotus Pharmacy, BR3 3RA	<p>Supervised Administration of Opiates</p> <p>Pg14 Hospital admissions due to substance misuse for those aged 15-24 appears to be almost double the England rate? (draft copy)</p>	<ul style="list-style-type: none"> <li>▪ The PNA Steering Group agreed to add "reduction in substance misuse related hospital admissions" as an outcome under "conclusions" (page 91)</li> </ul>	Yes
BBG LPC & Crofton Pharmacy BR6 8DG	<p>Supervised Administration of Opiates</p> <p>The re-commissioning of the service under the Prime Contractor model will affect the way the service is commissioned (sub-contracted) from Community Pharmacy. It will be the Prime Contractor's responsibility to ensure that the service is funded appropriately so that it is sustainable within the Community Pharmacy sector. In the past a similar Prime Contractor approach has led to a collapse in the service provision because the model was not economically viable for Community Pharmacy.</p>	<ul style="list-style-type: none"> <li>▪ The PNA Steering Group noted the comments which relate to how the service is commissioned</li> </ul>	No
Peters Chemist BR3 5NT	<p>Supervised Administration of Opiates</p> <p>As with the needle and syringe exchange service, the re-commissioning of this service under the Prime Contractor model will affect the way the service is commissioned from Community Pharmacy. It will be the Prime Contractor's responsibility to ensure that the service is funded appropriately so that it is sustainable within the Community Pharmacy sector.</p>	<ul style="list-style-type: none"> <li>▪ The PNA Steering Group noted the comments which relate to how the service is commissioned</li> </ul>	No

Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
BBG LPC, Crofton Pharmacy, BR6 8DG & Peters Chemist BR3 5NT	Integrated Sexual Health Services Sexual Health services have moved to a Prime Contractor model of commissioning and at present the transition has been successful due to the investment of time and resource by the commissioner. Development of the service will depend on the Prime Contractor's budget for the service is viable within Community Pharmacy.	<ul style="list-style-type: none"> <li>The PNA Steering Group noted the comments which relate to how the service is commissioned</li> </ul>	No

### Do you agree with the "Looking to the Future" section as set out in section 3.4?

Yes = 37.5% (n=3)

No = 25% (n=2)

Not sure = 37.5% (n=3)

Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
Medimpo Ltd (Elmers Pharmacy, BR3 3DY)	Pharmacy well placed to help deliver Services and support Healthcare of patients in Community	<ul style="list-style-type: none"> <li>The PNA Steering Group noted the comment</li> </ul>	No
Lotus Pharmacy, BR3 3RA	I disagree with the summary of priorities on p100 opening hours - especially Saturday opening hours 9-5, ideally 7pm. There are no GP practices open on weekends. Saturday's are not currently viable on reduced hours let alone opening longer. The expectation for pharmacies to open longer hours, staff to work harder for less money is not a viable business model and would need funding. The location of the 100 hour pharmacies has not been taken into account, if within a mile on the same road there is no need to extend opening hours or days.	<ul style="list-style-type: none"> <li>The PNA Steering Group was advised that the comments refer to the "aspirations for pharmacy services table" (page 100)</li> <li>It was noted that the PNA shows: <ul style="list-style-type: none"> <li>Page 39: 9 GP practices and 2 GP access hubs open on Saturday; and 2 GP access hubs open on Sundays</li> <li>Page 41: indicates that the A&amp;E department and urgent care centres open on 365 days a year; these services may issue FP10 prescriptions for dispensing in the community</li> </ul> </li> <li>Community pharmacy provides a range of advanced, enhanced and locally commissioned services. The PNA states there are opportunities to improve access and choice if more of these services were provided during extended hours, where a demand exists. Each section takes into account current extended opening</li> <li>The HWB aspirations are based on the assessment as summarised above</li> <li>PNA Steering Group noted comment and agreed no amendments were required</li> </ul>	No

Organisation	Detailed Comment	PNA Steering Group Discussion and Decision	PNA Amended
BBG LPC & Crofton Pharmacy, BR6 8DG	<p>The aspirations within the potential future services is admiral but requires strategic integration of Community Pharmacy at the highest levels of the STP, HWB and CCG to transform Community Pharmacy onto "High Street Neighbourhood Clinics," which offer a suite of clinical services linked to the dispensing of patient's medicines. Improvements or Better Access/ Future Improvements or Better Access: requires better working because DH is investing in general practice services to allow for patient access in the FYFV, whilst at the same time cutting the services from community pharmacy.</p> <p>As advised, it requires strategic integration of Community Pharmacy at the highest levels of the STP, HWB and CCG with sustainable funding to achieve alignment with general practice.</p> <p>The PNA must reflect the reality of the position of the sector which is under considerable economical pressure at the moment with no prospect of relief in the foreseeable future. The PNA should not build unsustainable expectations which in turn result in significant detriment either to the proper planning of pharmaceutical services provision, or to the arrangements in place for the provision of pharmaceutical services</p>	<ul style="list-style-type: none"> <li>The PNA Steering Group was advised that the comments refer to the text and "aspirations for pharmacy services table" on page 100</li> <li>It was noted that the discussion points documented under Lotus Pharmacy were relevant it was agreed to incorporate the LPC's comments into the text on page 100, noting that future pharmacy-based services may include a combination of NHS, social care or privately funded services</li> </ul>	Yes
Peters Chemist, BR3 5NT	<p>This requires strategic integration of Community Pharmacy at the highest levels of the STP, HWB and CCG with sustainable funding to achieve alignment with general practice.</p> <p>The PNA must reflect on the position of the community pharmacy sector which is under considerable economical pressure at the moment with no prospect of relief in the foreseeable future. The PNA should not build unsustainable expectations which in turn could result in poor provision of the pharmaceutical services.</p>	<ul style="list-style-type: none"> <li>The PNA Steering Group noted the comment which is similar to that submitted by the LPC (above)</li> </ul>	As above

### Community Pharmacies & Dispensing Appliance Contractors Only

Has the PNA provided you with enough information to help your own future service provision and plans

Yes = 83.3% (n=5)

No = 0%

Not sure = 16.6% (n=1)

Organisation	Detailed Comment	PNA Steering Group Decision	PNA Amended
Medimpo Ltd (Elmers Pharmacy, BR3 3DY)	<p>The TDS Service review not complete yet, so unable to Comment.</p> <p>Future service 'roll out' unsure with the health care crisis, dire pharmacy cut backs make future planning difficult for pharmacies wanting to support patients and deliver services</p>	<ul style="list-style-type: none"> <li>The PNA Steering Group noted the comment</li> </ul>	No

**NHS England Only:  
Has the PNA provided adequate information to inform market entry decisions?**

No – in general the required statements are provided. Specific concerns are set out below

Organisation	Detailed Comment	PNA Steering Group Decision	PNA Amended
NHSE, London Region	We have some concerns regarding the statement on page 39 that states "In the future, if GP opening hours vary, then there may be a need to review opening hours from the existing network of pharmacies to ensure good alignment between the services". This statement is not clear and may cause issues when GP opening hours do change.	<ul style="list-style-type: none"> <li>▪ The PNA Steering Group reviewed the statement in the "future" box</li> <li>▪ It was agreed that the statement was ambiguous and that this should be removed from the document</li> </ul>	Yes
NHSE, London Region	The HWB has also made the following statement: "Better Access [Regulation 4(1); 4 (a and b)]. We have identified that access and choice would be enhanced if the existing network of pharmacies were to extend opening hours on weekday mornings and evenings and also at weekends. This would strengthen alignment with GP opening hours; and may be beneficial for those residents who work full time and who prefer to use a pharmacy outside of working hours. The HWB has not identified a need for an additional pharmacy in any locality." Whilst the HWB has not identified a need for an additional pharmacy in any locality, the above text does describe some improvements that could be made and there is a possibility that an application may be made against this. Any outcome will depend on NHS England and the Appeals Authority interpretation of this statement and a new pharmacy could not be ruled out.	<ul style="list-style-type: none"> <li>▪ The PNA Steering Group was advised that the comment refers to the Regulatory statements set out on page 102 of the draft PNA</li> <li>▪ The wording reflects the conclusion as set out on page 55 of the draft PNA</li> <li>▪ The PNA Steering Group noted that the statement would need to be amended to reflect the changes agreed in response to the comment from the LPC (refer to page 7 of this appendix)</li> <li>▪ The Steering Group acknowledged that applications may be made against the improvements described. However, it was agreed that the statement that "no additional pharmacies are required" provided a clear indication that the HWB was of the view that the improvements could be met from within the existing network of pharmacies</li> </ul>	Yes

**Services Commissioners & Potential Services Commissioners only:  
Has the PNA provided you with enough information to inform how you may commission services from pharmacy in the future?**

- This question was not applicable to any of the respondents



Do you any further comments?			
Organisation	Detailed Comment	PNA Steering Group Decision	PNA Amended
NHS England, London Region	Please note that the NUMSAS pilot has now been extended until September 2018. Page 39 of the PNA states March 2018, however this extension has only recently been announced. The service provided by NHS 111 matches a caller to the nearest pharmacy providing the service; therefore, patients may be referred out of the HWB area. There is also a typo in the box on page 39.	<ul style="list-style-type: none"> <li>The Steering Group agreed for appropriate amendments to be included</li> </ul>	Yes
NHS England, London Region	The PNA looks at the potential for commissioning of other public health services, however, there is no clear strategy for these and it is not clear if any of these will be commissioned by any party.	<ul style="list-style-type: none"> <li>PNA Steering Group noted that this comment probably relates to the "Looking to the Future section (page 100 and 101) although this isn't 100% clear as page 101 also sets out services which are not related to public health</li> <li>It was felt that the text on page 100 makes it clear that the proposed services on page 101 <b>may</b> be considered for commissioning alongside other priorities</li> <li>Decisions on commissioning additional public health services are dependent upon the Public Health grant and the wider Local Authority priorities and funding position</li> </ul>	No
Medimpo Ltd (Elmers Pharmacy, BR3 3DY)	We are happy to provide Services identified as gaps.....with suitable training funding identified and supported. In addition, where a gap for access has been identified as critical.....it is vital to approach all existing contractors to help cover the gap.	<ul style="list-style-type: none"> <li>PNA Steering Group noted the comments</li> </ul>	No