

**Manchester Health and Wellbeing Board
Report for Resolution**

Report to: Manchester Health and Wellbeing Board – 25 January 2023

Subject: Manchester Pharmaceutical Needs Assessment (2023-2026)
Final Draft

Report of: Director of Public Health

Summary

The provision of pharmaceutical services falls under the National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. The regulations cover the production of this Pharmaceutical Needs Assessment (PNA). The responsibility for producing the PNA is that of the local Health and Wellbeing Board (HWB).

The PNA steering group has been leading the development of the next PNA for 2023-2026 on behalf of the HWB Board. The regulations state that the HWB must undertake a consultation on the content of the PNA and it must run for minimum of 60 days. The HWB agreed to the commencement of the consultation in July 2022. This report includes the Executive Summary (Appendix 1) of the final draft of the PNA. The full final draft of the Manchester PNA can be accessed via the web link below.

<https://www.manchester.gov.uk/pna>

Recommendations

The Board is asked to:

1. Approve the final report for publication.
-

Board Priority(s) Addressed:

Health and Wellbeing Strategy priority	Summary of contribution to the strategy
Getting the youngest people in our communities off to the best start	The PNA ensures that the provision of pharmaceutical services meet the needs of Manchester residents across the life course. It ensures that there is appropriate access to pharmaceutical services for Manchester residents and allows residents to receive appropriate advice and treatment for self-care.
Improving people’s mental health and wellbeing	
Bringing people into employment and ensuring good work for all	
Enabling people to keep well and live independently as they grow older	
Turning round the lives of troubled	

families as part of the Confident and Achieving Manchester programme	
One health and care system – right care, right place, right time	
Self-care	

Contact Officers:

Name: Barry Gillespie
Position: Assistant Director of Public Health
E-mail: barry.gillespie@manchester.gov.uk

Name: Jamie Higgins
Position: Senior Medicines Optimisation Adviser
E-mail: jamie.higgins@nhs.net

Background documents (available for public inspection):

The following documents disclose important facts on which the report is based and have been relied upon in preparing the report. Copies of the background documents are available up to 4 years after the date of the meeting. If you would like a copy, please contact one of the contact officers above.

Manchester Pharmaceutical Needs Assessment 2020

Report on the PNA consultation process to the Manchester Health & Wellbeing Board on 6 July 2022

1. Introduction

- 1.1 The Health and Social Care Act 2012 transferred responsibility to develop and update the Pharmaceutical Needs Assessment (PNA) from Manchester Primary Care Trust to Manchester Health and Wellbeing Board (HWB). NHS England has responsibility for the application process and the management of pharmacies compliance with their terms of service. The PNA informs the application and decision-making process, however, NHS England have the responsibility for approving or rejecting new applications.
- 1.2 The provision of pharmaceutical services falls under the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. The regulations cover the production of the PNA, the application and decision-making process for opening pharmacies, and details the term of services for pharmacies, dispensing appliance contractors and dispensing doctors.
- 1.3 The PNA looks specifically at the current provision of pharmaceutical services in Manchester. It determines whether these pharmaceutical services meet the needs of the population and will:
 - be used by NHS England when making decisions on applications to open new pharmacies and dispensing appliance contractors, or applications from existing pharmaceutical providers to change their regulatory requirements.
 - help work with providers to target services to the areas where they are needed.
 - inform interested parties of the PNA and enable collaborative work to plan, develop, and deliver pharmaceutical service for the residents of Manchester.
 - help inform commissioning decisions by local commissioning bodies

2. Background

- 2.1 The PNA has been produced using a standard methodology in accordance with the requirements set out in regulations 3-9 Schedule 1 of the NHS (Pharmaceutical and Local Pharmaceutical Service) Regulations 2013.
- 2.2 The views of a wide range of stakeholders were sought to identify local health needs and priorities, and to inform the future commissioning of pharmaceutical services in Manchester.

3. Other Developments

- 3.1 Since the publication of the last Manchester PNA (2020) the city has experienced, and continues to experience, the impacts of the COVID-19 pandemic alongside a significant health and social care services change programme, whilst continuing to implement the Manchester Locality Plan. In

addition, the national cost of living crisis is expected to exacerbate the effects of deprivation experienced by many communities across Manchester.

- 3.2 The impact of the COVID-19 pandemic on Manchester has included damaging longer-term economic, social and health effects which are expected to further impact on health and widen inequalities and to be compounded for people from Black, Asian and Minority Ethnic (BAME) groups, disabled people, older people, women and those on low incomes. In turn, these effects are likely to be further compounded for those living in low-income areas.

Following the publication of Professor Sir Michael Marmot's "Build Back Fairer in Greater Manchester: Health Equity and Dignified Lives" in June 2021, Manchester gave a commitment to consider the recommendations and develop a local response.

Making Manchester Fairer- Tackling Health Inequalities in Manchester 2022-27 describes the actions Manchester will take to reduce health inequalities through greater collaboration between multi-agency and cross sectoral partnerships over the next 5 years in response to the Marmot Review for Greater Manchester, and the specific needs of Manchester's residents in light of the COVID-19 pandemic.

The plan identifies eight areas of action:

1. Giving children and young people the best start in life
2. Lifting low-income households out of poverty and debt
3. Cutting unemployment and creating good jobs
4. Preventing illness and early death from big killers- heart disease, lung disease, diabetes, and cancer
5. Improving housing and creating safe, warm and affordable homes
6. Improving our environment and surroundings in the areas where we live, transport, and tackling climate change
7. Fighting systemic and structural discrimination and racism
8. Strengthening community power and social connections

- 3.3 Integrated Care Systems (ICS) were established in sub regions of England from 01 July 2022. This now means that the ten Clinical Commissioning Groups in Greater Manchester (GM) no longer exist and have integrated to become the Greater Manchester Integrated Care (GMIC) Partnership.

The ICS has four aims:

- Improve outcomes in population health and healthcare
- Tackle inequalities in outcomes, experience and access
- Enhance productivity and value for money
- Help the NHS support broader social and economic development.

There is a designated Place Based Lead (PBL) for each local authority area and in Manchester this is the Chief Executive of the City Council. There will

also be a Locality Board and Provider Collaborative in each area, and these are now both established in Manchester.

- 3.4 The development of the Manchester Local Care Organisation (MLCO)- a partnership organisation comprised of Manchester University NHS Foundation Trust (MFT), Greater Manchester Mental Health NHS Trust (GMMH), Manchester City Council (MCC), and the Manchester Primary Care Partnership- established in 2018 has continued. The MLCO is based on 12 neighbourhoods across the city, bringing local teams together as Integrated Neighbourhood Teams (INT), so care is planned and delivered in a seamless way. The delivery of this is based upon utilising and working in partnership with the assets in neighbourhoods, such as pharmacies, that are the most accessible and frequently visited source of healthcare.