

Equality Impact Assessment

Full assessment form v5 / 2013

www.portsmouth.gov.uk

Directorate:	Director of Public health				
Function e.g. HR, IS, carers:	Public Health				
	ice, function, project or	strategy (new or old):)		
Portsmouth Pharmaceutical Needs Assessment 2018 (revised from 2015 version)					
Type of policy, serv	ice, function, project or	strategy:			
New / proposed					
Changed					
★ Existing					
Lead officer		Claire Currie, Consultant in Public Heal	th		
Decade investor desid		(Laurentina Caracidia Debia Halland	1-1-4-112		
reopie involved wit	h completing the EIA:	James Hawkins, Specialist Public Healt Analyst	in intelligence		

Introductory information (Optional)				

Step 1 - Make sure you have clear aims and objectives

What is the aim of your policy, service, function, project or strategy?

A Pharmaceutical Needs Assessment (PNA) is a statement of current pharmaceutical services provided in the local area. It also assesses whether or not the pharmaceutical services provision is satisfactory for the local population and identifies any perceived gaps in the provision.

The NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013 set out the legislative basis for developing and updating PNAs. It is a statutory requirement for the Health and Wellbeing Board to publish a revised assessment within three years of its previous PNA. The refreshed Portsmouth PNA must be published by 1st April 2018.

Who is the policy, service, function, project or strategy going to benefit or have a detrimental effect on and how?

The PNA reflects the current and future needs for pharmaceutical services. This affects the residents of Portsmouth, people who work and study in the city and partner NHS organisations including NHS Portsmouth Clinical Commissioning Group, Portsmouth Hospital Trust, GP practices and the existing community pharmacy network.

Access to high quality pharmaceutical services is particularly relevant for those taking medicines, typically people suffering from long term conditions and disproportionately affects those in ill-health and older adults.

What outcomes do you want to achieve?

Effective provision of pharmaceutical services, that meet the needs of people living and working in Portsmouth. The services need to be available across the city by all people who need them.

What barriers are there to achieving these outcomes?

Community pharmacies are businesses and provision of desired pharmaceutical services have to be commercially viable. The public may express a desire for more pharmacies and extended hours but this has to be balanced against financial viability for local commissioning organisations.

Step 2 - Collecting your information

What existing information / data do you have? (Local or national data) If you don't have any data contact the Equalities and diversity team for some ideas

Extensive data has been collated from a number of sources, including:

- Joint Strategic Needs Assessment
- Data from Portsmouth City Council Planning regarding anticipated developments
- Data held by NHS England of current pharmaceutical provision
- Questionnaire of community pharmacy contractors describing current provision
- Public survey to inform understanding of how current pharmaceutical services are used
- Public and professional stakeholder consultation on the draft PNA report

Using your existing data, what does it tell you?

In Portsmouth there are 41 community pharmacies, one distance selling pharmacy and one dispensing appliance contractor.

The Health and Wellbeing Board consider the location, number, distribution and choice of pharmaceutical services serving the Portsmouth residents to meet the needs of the population. The Health and Wellbeing Board also consider that there is currently no identified need for improvements and better access to pharmaceutical services in Portsmouth.

In particular, this is based on:

- The total Portsmouth population is within a 1.6km straight line distance of a community pharmacy.
- A good geographical spread of community pharmacies across all three localities in the city and within communities experiencing greatest deprivation.
- There being 19 community pharmacies per 100,000 Portsmouth population, which is the same as the average for Wessex and is broadly in line with national averages.
- Over 99% of the Portsmouth population are within a 20 minute walk of a community pharmacy.
- Nearly nine in every 10 (87.5%) respondents to a public survey said it took 15 minutes or less to get to a community pharmacy.
- Good access demonstrated by opening hours from early morning, through lunchtimes and late into the evening as well as weekend opening.
- A distance selling pharmacy, five 100 hour pharmacies, supplementary hours in other Portsmouth community pharmacies as well as provision in a neighbouring Health and Wellbeing Board area provide improvements and better access which meets the needs of Portsmouth residents.
- All pharmacies provide the full range of essential pharmaceutical services
- Good provision of advanced services across the city.
- A range of enhanced and locally commissioned services delivered in the city. Pharmacies accredited
 to deliver these services have good geographical spread across the localities within Portsmouth.
- A large proportion of community pharmacies providing a delivery service to residents, including housebound patients.
- There will not be substantial changes in population areas, nor major development, which can be anticipated during the three-year lifespan of this PNA, which would warrant the need for additional pharmaceutical services. Smaller changes would be managed by existing providers.

Step 3 - Now you need to consult!

Who have you consulted with?

If you haven't consulted yet please list who you are going to consult with

There is a regulatory duty (NHS (Pharmaceutical & Local Pharmaceutical Services) Regulations 2013 No 349: Part 2: Reg 8) to have a 60 day consultation about the contents of the assessment it is making. The consultation ran from 23rd October 2017 to 27th December 2017. The public consultation was supported by the Portsmouth City Council, Healthwatch Portsmouth and NHS Portsmouth Clinical Commissioning Group.

According to the Regulations, the following were consulted:

- Local Pharmaceutical Committee
- Local Medical Committee
- Any persons on the pharmaceutical lists and any dispensing doctors list for its area;
- Any local pharmaceutical service pharmacy in its area with whom the NHS England has made arrangements for the provision of any local pharmaceutical services;
- Healthwatch and any other patient, consumer or community group in its area which has an interest in the provision of pharmaceutical services in its area
- Any NHS Trust or NHS Foundation Trust in the area
- NHS England and the local CCG
- Neighbouring Health & Wellbeing Boards

There were eight responses from professional stakeholders and 62 from members of the public.

Please give examples of how you have or are going to consult with specific groups or communities e.g. meetings, surveys

The draft PNA report and the consultation questionnaire were hosted on the 'consultations' page on the Portsmouth City Council website. Hard copies were available upon request. The short set of questions used for the consultation of the Portsmouth PNA 2015 was used (with minor amendments). For each question there was an opportunity for respondents to add free text comments to expand on their views.

All professional stakeholders as specified in the Regulations were contacted by email by Monday 23rd October 2017.

All contractor pharmacies within the city were contacted by a message on PharmOutcomes (software system used by pharmacies) and by email on 23rd October 2017 giving details of the consultation process. A letter was also posted to each community pharmacy on the same date.

The PCC communications team used social media Twitter and Facebook to promote the consultation. The PNA consultation for Portsmouth was included in the November issue of Flagship magazine which is distributed to 93,000 Portsmouth residents. The consultation was publicised to the citizen panel (where around 1000 people had the opportunity to respond) and in the volunteer newsletter.

The CCG publicised the consultation, in October, on its Intranet news page for local staff and GPs and their practice staff. The consultation was publicised at the CCG Patients Participation forums held on 6th September 2017 and 6th November 2017. The consultation was also discussed as part of the Practice Managers forum on 18th October 2017.

Healthwatch Portsmouth publicised the consultation via e-mail to a variety of community and voluntary sector groups.

Step 4 - What's the impact?

Is there an impact on some groups in the community? (think about race, gender, disability, age, transgender, religion or belief, sexual orientation, pregnancy and maternity and other socially excluded communities or groups)

Generic information that covers all equality strands (Optional)

There is no specific impact on any one group. Everyone may need access to pharmaceutical services in the city. The PNA has made specific reference to a range of groups.

Ethnicity or race

Higher prevalence of some health conditions is associated with particular ethnic groups. No specific impact on a particular group has been identified from this PNA. Questions were asked about languages spoken by pharmacy staff which has been summarised in the PNA.

Gender including transgender

Life expectancy of men is lower than that for women both in Portsmouth and nationally. No specific impact for either men or women has been identified from the recommendations of this report.

Age

Medicines use increases with age. The majority of older adults will be taking at least one regular prescription medicine. All pharmacy contractors were asked about their services that would support this age group. These services include prescription collection and home delivery of medicines. The distance selling pharmacy in Portsmouth, as well as others outside of Portsmouth, also provide additional choice and increases accessibility to older adults who may have limited mobility. Adjustments to the dispensing process includes easy open containers and large print labels.

Disability

All pharmaceutical contractors were asked to describe adjustments they make in their service for disabled service users. This included wheelchair access into premises and consulting rooms and access by housebound patients. During the data collection process it was confirmed that the majority of pharmacies in the city offer a free prescription collection and home delivery service for those patients finding difficulty in getting to a pharmacy. The distance selling pharmacy in Portsmouth, as well as others outside of Portsmouth, also provide additional choice and increases accessibility to individuals with disabilities who may have limited mobility.

Religion or belief

No specific impact has been identified as part of this assessment. The General Pharmaceutical Council has published guidance to clarify that while a pharmacist may be unwilling to provide a particular service due to religious reasons or personal values and beliefs, they should take steps to make sure the person asking for care is at the centre of their decision-making, so that they are able to access the service they need in a timely manner.

_					-
€ Δ'	viia	l ori	Δn	tat	เกท
JE.	Nua		CII	ıaı	IUII

NI_	anaaifia	inanaat	h-a-a	h	idoptified
INO	specific	impaci	nas	been	identified.

Pregnancy and maternity

Community pharmacy can provide an important source of advice for minor ailments for conditions such as constipation which can commonly occur in pregnancy. For women planning pregnancy, access to a community pharmacy for advice can also be important. As this PNA indicates there is satisfactory pharmaceutical provision across Portsmouth, no specific impact on this group has been identified.

Other socially excluded groups or communities e.g. carers, areas of deprivation, low literacy skills

Reference to services beneficial to carers have been made within the document. Areas of deprivation have been identified alongside pharmaceutical provision have been described within the assessment. As this PNA indicates there is satisfactory pharmaceutical provision across Portsmouth, no specific impact on these groups have been identified.

Health Impact

What are the health impacts, positive and / or negative? For example, is there a positive impact on enabling healthier lifestyles or promoting positive mental health? Could it prevent spread of infection or disease? Will it reduce any inequalities in health and well-being experienced by some localities, groups, ages etc? On the other hand, could it restrict opportunities for health and well-being?
The PNA describes provision of locally commissioned services and their role in promoting health and wellbeing of the people of Portsmouth.
The PNA has been developed to ensure a range of good quality pharmaceutical services may be accessed by the local population of Portsmouth. Many services have been identified and their beneficial impact on health and wellbeing described.
Health inequalities are strongly associated with deprivation and income inequalities in the city. Have you referred to Portsmouth's Tackling Poverty Needs Assessment and strategy (available on the JSNA website above), which identifies those groups or geographical areas that are vulnerable to poverty? Does this have a disproportionately negative impact, on any of these groups and if so how? Are there any positive impacts?, if so what are they?
The PNA profiles and references deprivation and the associated poor health and wellbeing in the city. The PNA describes pharmaceutical provision and highlights the areas of greatest need where services can have the most impact.
Step 5 - What are the differences?
Are any groups affected in a different way to others as a result of your policy, service, function, project or strategy?
There is no intention to affect any specific group in a different way due to this assessment.

Have you referred to the Joint Needs Assessment (www.jsna.portsmouth.gov.uk) to identify any

associated health and well-being needs?

No

★ Yes

Does your p	oolicy, service, fund	ction, project or strateg	y either dire	ectly or indirectly discriminate?
165	X			
-	ither directly or ind e negative impact?	irectly discriminating,	how are you	a going to change this or
N/A				
Step 6 -	Make a reco	mmendation ba	sed on	steps 2 - 5
•	•	e a recommendation to w how it was decided o	-	introduce the policy, service,
		PNA be approved by the ed by 1st April 2018.	Portsmouth	Health and Wellbeing Board on
What chang	ges or benefits hav	e been highlighted as a	result of yo	our consultation?
applications applications	for new NHS pharm	aceutical service provide	ers and in res	to determine market entry of sponding to consolidation sioning organisations to inform
-	ot in a position to g plete the fields below	o ahead what actions a	ire you goin	ig to take?
Action		Timescale		Responsible officer
		imescale		Weahousinie ouirei
		J (

How are you going to responsible?	review the policy, service, project or strategy, how often and who will be
	on, it is a statutory requirement for the Health and Wellbeing Board to publish a ithin three years of its previous PNA. This PNA will be published by 1st April
Step 7 - Now jı	ust publish your results
This EIA has been ap	proved by: Dr Jason Horsley
Contact number:	023 9284 1779
Date:	26/01/2018
Please email a copy of any comments or queri	your completed EIA to the Equality and diversity team. We will contact you with es about your full EIA.
Telephone: 023 9283 4	789
Email: equalities@port	smouthcc.gov.uk