

PNA statutory consultation key responses

As part of the PNA process there is a statutory provision that requires consultation of at least 60 days to take place to establish if the pharmaceutical providers and services supporting the population in the Health and Wellbeing Board area are accurately reflected in the final PNA document. Bolton's consultation ran from 1st July 2022 until 31st August 2022. The responses received were used to inform the final conclusions which were collated and are now published as part of this PNA.

The draft PNA was distributed to the following organisations:

- Pan Lancashire Health and Wellbeing Board
- Salford Health and Wellbeing Board
- Bury Health and Wellbeing Board
- Wigan Health and Wellbeing Board
- NHS Bolton Foundation Trust
- Bolton CCG/ Greater Manchester Integrated Care (in initial establishment at the time of consultation)
- NHS England
- Bolton Local Pharmaceutical Committee
- Bolton Local Medical Committee
- Bolton GP Federation
- Healthwatch Bolton
- NHS Greater Manchester Mental Health Trust

The following key narrative responses were received. The feedback received from the consultation has been incorporated into the PNA document.

Following consultation the following main amendments were made to the PNA document:

- Key statements in overall document summary
- Inclusion of minor ailment service as a service to secure improvements or better access

Are there any gaps in service provision i.e. when, where and which services are available that have not been identified in the pharmaceutical needs assessment?

There is a clear indication of respondents wanting to access the pharmacy for minor ailments service, vaccinations, routine check-ups, and health advice. Although these services have been identified, there isn't a formal plan detailing the extent of these services and when and which of these services will formally reach pharmacy users.

Has the pharmaceutical needs assessment provided information to inform how pharmaceutical services may be commissioned in the future?

To some extent, because a formal plan on service preferences such as the minor ailments service is missing.

Are there any pharmaceutical services that could be provided in the community pharmacy setting in the future that have not been highlighted?

Yes, services which are more one-to-one such as early diagnosis of disabilities which have a day-to-day impact on people and additional support settings or signposting of support settings for those with learning difficulties or unequal access to employment and well-being services, i.e., reducing barriers.

Routine Blood phlebotomy

The PNA notes that from the public and contractor surveys, the Minor Ailment Scheme would be a popular pharmacy service for both residents and stakeholders. It is not entirely clear if this has been identified as a need, or whether residents access support to manage minor ailments by other means or may access alternative services which could potentially impact on schemes provided by neighbouring Health and Wellbeing Boards. Wigan would be concerned if Bolton residents accessed the Wigan MAS due to there being only limited access to this type of service from Bolton pharmacies.

Do you agree with the conclusions of the pharmaceutical needs assessment?

Unsure of the specific conclusions reached in terms of the level of pharmaceutical service provision (no conclusions section in draft document) but nothing in the content that we have specific concerns about.

We suggest that the inclusion of a conclusion / clear statement is needed as part of the exec summary and Conclusion section that outlines that no gaps in provision have been identified.

Do you have any other comments?

There is need to look at out of hours palliative care services

From the perspective of a neighbouring Health & Wellbeing Board, it is important to note that reliance on pharmacy provision in neighbouring HWB areas such as Salford has an impact on capacity in that area which should be taken into account and may require consultation with neighbours.