

Report of: Chief Officer, Consultant/Public Health

Report to: Leeds Health and Wellbeing Board

Date: 14 November 2024

Subject: Pharmacy Provision in Leeds: 6-month update

Are specific geographical areas affected?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
If relevant, name(s) of area(s):	See appendix 1.	
Are there implications for equality and diversity and cohesion and integration?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Is the decision eligible for call-In?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Does the report contain confidential or exempt information?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
If relevant, access to information procedure rule number: Appendix number:		

Summary of main issues

The Health and Social Care Act 2012 transferred responsibility for the development and updating of Pharmaceutical Needs Assessment (PNAs) to Health and Wellbeing Boards (HWBs), becoming effective from 1st April 2013.

In March 2024, the Board received a paper outlining the plans for conducting the latest Leeds Pharmaceutical Needs Assessment (PNA). The current assessment ends in September 2025 and we are currently working on the new PNA, which has to be completed by 1 October 2025.

As part of this process, NHS England receives pharmacy related notifications such as applications, changes to hours of service and closures, and they ask for comments from the relevant Health and Wellbeing Board. These notifications also help to inform the PNA.

The role of the Health & Wellbeing Board is required to have an agreed process for considering pharmacy related notifications of changes in provision across Leeds to ensure these notifications are shared and acted on. At the March 2024 meeting a process was agreed and this report is an update, based on these notifications.

In Leeds, we currently have 160 pharmacy contractors broken down into:

- 131 Community Pharmacies
- 10 Distance Selling Pharmacies
- 17 100hr pharmacies of which 16 (94%) have reduced their hours to 72 or above
- 2 located in a 15,000sq metre retail development

So far this year (April 2024-March 2025), five pharmacy contractors have notified West Yorkshire Integrated Care Board of their intention to close their premises. Of the five closures, 4 are 40hr pharmacies (with two being part of consolidation applications, that is two merge in terms of its ownership and one closes) and 1 is a 100hr pharmacy.

In Leeds, as reflected in other parts of West Yorkshire, the number of pharmacy closures has increased year on year. This could be attributed to a number of issues, including a depleted workforce, staff sickness, increased costs leading to premises being no longer commercially viable.

Recommendations

- To note the responsibilities of the HWB in relation to pharmaceutical service provision in Leeds.
- To consider the information within the notification log, which will be shared with the HWB six monthly as described above, ahead of each public meeting.

1 Purpose of this report

1.1 This report provides an update about the current position of pharmacy in Leeds. The HWB is asked to consider the information within the notification log, which is shared with the Board on a six monthly basis ahead of each public meeting.

2 Background information

2.1 Section 128A of the NHS Act 2006, as amended by the Health and Social Care Act 2012, sets out the requirements for Health and Wellbeing Boards to develop and update pharmaceutical needs assessments. The Health and Social Care Act 2012 transferred responsibility for the developing and updating of Pharmaceutical Needs Assessment (PNAs) to Health and Wellbeing Boards (HWBs), becoming effective from 1st April 2013.

2.2 The PNA is created to assess pharmaceutical services and outline how the provision of those services can meet the health needs of the Leeds population for a period of up to three years.

2.3 This is an extensive piece of work that includes:

- collating and analysing all prescription and dispensing data for the city
- mapping all pharmacy services, locations and opening hours
- considering changes in demographics, housing developments, regeneration projects)
- formal consultation with the public and stakeholders
- reviewing responses
- publishing a publicly available report.

2.4 The current PNA for Leeds covers the period of 2022-2025. This PNA looked at the provision of pharmaceutical services across Leeds and assessed whether the needs of the population were being met and identified any potential gaps in service delivery. The full report can be found here: [Leeds PNA 2022 -2025](#).

2.5 It is particularly important to ensure an effective PNA as pharmacies are a cornerstone of the 'left-shift' move to early intervention and care closer to home with interventions for common conditions (cold and flu, BP measurement, advice on conditions that can be managed via self-care) increasingly delivered in pharmacies.

Duties of the Health and Wellbeing Board

2.6 After a PNA has been published, the HWB has specific duties. In summary, the HWB must:

- Publish PNAs on a three-yearly basis
- Publish a subsequent PNA sooner when it identifies changes to the need for pharmaceutical services which are of a significant extent, unless to do so would be a disproportionate response to those changes and;
- Produce supplementary statements which explain changes to the availability of pharmaceutical services in certain circumstances.

3 Main issues

Update to the HWB

3.1 In Leeds, pharmacy related notifications such as applications, changes to hours of services, provision and closures are sent by West Yorkshire ICB and received by the Public Health Intelligence team. A previous HWB agreed that a summary of these notifications would be considered at the Board, every six months, to consider any impact on pharmaceutical services provision.

3.2 So far this year (April 2024-March 2025), five pharmacy contractors have notified West Yorkshire Integrated Care Board of their intention to close their premises. Of the five closures, 4 are 40hr pharmacies (with two being part of consolidation applications, that is two merge in terms of its ownership and one closes) and 1 is a 100hr pharmacy.

3.3 In Leeds, as reflected in other parts of West Yorkshire, the number of pharmacy closures has increased year on year. This could be attributed to a number of issues, including a depleted workforce, staff sickness, increased costs leading to premises being no longer commercially viable.

Resources

3.4 The PNA process is overseen by a Public Health Consultant, with Public Health Intelligence delivering much of the work in supporting the PNA report, including compiling the data. A small Steering Group comprising Public Health Intelligence, NHS Medicines Optimisation, Community Pharmacy West Yorkshire and Public Health are steering the process. Specialist support is also being provided to develop and support with drafting the refreshed PNA.

4 Health and Wellbeing Board governance

Consultation, engagement and hearing citizen voice

4.1 Consultation process regarding PNAs are well established and is being followed including in relation to engaging with relevant stakeholders. The initial public consultation is now live and can be found at <https://online1.snapsurveys.com/h80g44> and the draft refreshed PNA made available for comments before final assessment as consistent with Regulations.

Equality and diversity / cohesion and integration

- 4.2 The impact on diverse communities highlighted in the PNA will be considered. This will enable us to respond fully to meeting the needs of a changing and increasingly diverse population.

Resources and value for money

- 4.3 Public Health Intelligence will deliver much of the work in supporting the PNA report, including compiling the data. A small Steering Group comprising Public Health Intelligence, NHS Medicines Optimisation, Community Pharmacy West Yorkshire and a public health consultant will oversee the report.
- 4.4 Consistent with the approach of the PNA 2022-25 and recognising the level of detail required to support an effective PNA, specialist support is essential to develop and support with drafting the refreshed PNA.

Legal Implications, access to information and call In

- 4.5 There are no legal implications, and the report is not subject for call in.

Risk management

- 4.6 Section 128A of the NHS Act 2006, as amended by the Health and Social Care Act 2012, sets out the requirements for Health and Wellbeing Boards to develop and update pharmaceutical needs assessments.
- 4.7 The Health and Social Care Act 2012 transferred responsibility for the developing and updating of Pharmaceutical Needs Assessment (PNAs) to Health and Wellbeing Boards (HWBs), becoming effective from 1st April 2013.
- 4.8 The relevant steering group highlighted in this report will work to ensure the Pharmaceutical Needs Assessment is completed on time, to the required standard and compliance as in the above Acts.

5. Conclusions

This report provides an update about the current position of the Health and Wellbeing Board in relation to its role in pharmacy provision.

The duties of the Health and Wellbeing Board in relation the PNA is further noted and the agreement of the process of regularly assessing pharmacy provision in Leeds.

The HWB is further asked to consider the information within the notification log, which is shared with the Board on a six monthly basis ahead of each public meeting.

6. Recommendations

- To note the responsibilities of the HWB in relation to pharmaceutical service provision in Leeds.
- To consider the information within the notification log, which will be shared with the HWB six monthly as described above, ahead of each public meeting.

7. Background documents

- Appendix 1 – Pharmacy notifications log.

THIS PAGE IS LEFT INTENTIONALLY BLANK