

APPENDIX H - ANALYSIS OF PNA CONSULTATION RESPONSE where additional comments are recorded

Number	Response Date	Organisation/ Member of Public	Section of PNA	Actual Response	Comment from PNA Steering group	Decisional to amend the PNA? (Y/N)	Date amendment made
1	19/02/2018	Member of the Public	Section 4.2	I would like to collect my hearing aid batteries from a pharmacy on production of my NHS hearing aid record book	Comment noted by the PNA Steering Group but is not within the direct remit of the PNA but comments will be forwarded to CCG commissioners	No	24/04/2018
2	19/02/2018	Member of the Public	Section 3.2	Bromyard has only 1 pharmacy now and a dispensing GP Practice. The Pharmacy is small and could do with moving to New premises or have another Chemist in the town. The population of Bromyard is growing.	Comment noted by the PNA Steering Group. Provision and conclusions on Bromyard drawn on Page 58.	Yes. Insertion of " There should if necessary be Supplementary Statements" generated to ensure that this is monitored closely within the timeframe of this PNA. Comment added to this effect on Page 58 and Page 61.	24/04/2018
3	08/03/2018	A patient/patient representative	Section 4.1	My dispensing practice does not have access to a pharmacist or pharmacy products. They will not send a prescription electronically to a pharmacy	Comment noted by the PNA Steering Group. See Point of Information below.	Yes: Amendment made to pages 45 and 48: "There is a need to ensure that all patients know that they have choice of where their prescriptions are	24/04/2018

						dispensed and that IT functionality, paperless prescriptions are currently enabled."	
<p>*Point of Information: All patients have the ultimate choice of where their prescriptions are dispensed.</p> <p>Rural dispensing practices are not registered pharmacies; do not have pharmacists providing a pharmaceutical service.</p> <p>To date, it has only been possible to issue an EPS prescription where the patient has nominated a pharmacy or other dispenser. EPS has therefore been most advantageous for patients who receive regular medication and who tend to get their prescriptions dispensed at the same pharmacy most of the time.</p> <p>Under Phase 4 of EPS, prescriptions would be sent via EPS by default, whether a patient has an EPS nomination in place or not. However, where certain criteria are met, a paper prescription would still be used, for example:</p> <ul style="list-style-type: none"> •when a patient explicitly asks their GP for a paper prescription; or •when the medicine being prescribed is not listed in the NHS list of medicines (dm+d). <p>Dispensing practices are able to send prescriptions electronically to a pharmacy of the patient's choice. Choice of where prescriptions are dispensed should be open and transparent so all patients are clear on their options</p>							
4	09/03/2018	A dispensing doctor provider		No additional comments made			
5	12/03/2018	A community pharmacy contractor	Section 4.1	I feel it needs to be reviewed about dispensing doctors in rural areas are not open on weekends resulting in other community pharmacies potentially having to pick up the 'brunt' of this and referring to NHS 111 for emergency supplies.	Comment noted by the PNA Steering Group. Comment added to Page 48 that currently no dispensing practices are open on Saturdays/ Sundays.	Yes- amendment to Page 48 to this effect.	24/04/2018
6	12/03/2018	A community pharmacy contractor continued	Section 4.1	Not in relation to a specific section however as a central based community pharmacy it has been made aware to us that other community pharmacies may not be fulfilling their full NHS pharmacy contract therefore resulting in more work being placed on top of other pharmacies. The matter i am	Comment noted by the PNA Steering Group. The community pharmacy NHS contract is held and managed by NHS England who will quality assure pharmacy services. Patient are required to be assessed before provision of medicines within MDS trays and are required to respond	No	24/04/2018

				raising is about MDS trays and Lymphoedema products.	promptly to presentation of prescriptions for dispensing.		
7	17/04/2018	A patient/patient representative		No additional comments made			
8		Dispensing Doctor Representative	Section 4.1	<p>We currently don't provide a delivery service but are certainly investigating and currently carrying out a business development plan to see if we can provide one in the future.</p> <p>We aren't currently using EPS but that is not by choice - the current model available is not suitable for dispensing practices and we could not uphold our business if we were to switch to the current model. It would not save any time as nothing would happen and we would still have to print out the scripts for patients to take away. We take receive advice from the Dispensing Doctors Association who are trying to get a viable model for dispensing doctors. Patients have the choice of where to take (inc us posting to a pharmacy) their prescription to.</p>	<p>Comment noted by the PNA Steering Group.</p> <p>The intention of the PNA is to identify access to pharmaceutical services and if there are any gaps.</p> <p>Home delivery is a non- NHS service.</p> <p>An aim of the PNA is to review access to pharmaceutical services (incl. dispensing, not financial viability).</p>	No	24/04/2018
9		Dispensing Doctor Representative continued		Need for more pharmacies in the South but Ledbury is included in this- it is in the East.	Page 61. Brackets around Hereford City (South of the River Wye) will reduce the potential to mis-read this statement	Yes	24/04/2018

10		Dispensing Doctor Representative continued		Ledbury is not South of the Wye, it is East (included in conclusions as South). This concerns those of us (especially dispensing doctors) who are South. I do not feel that there is adequate provision for any more pharmacy services to be available in the South region as the current model stands. We understand that Ross on Wye is South and there are building developments, but Bromyard and Ledbury aren't part of the South region.	Page 61. Brackets around Hereford City (South of the River Wye) statement will reduce the potential to mis-read this statement	Yes	24/04/2018
11	23/04/2018	Herefordshire PNA --- Herefordshire & Worcestershire LPC Feedback		Generally, well received and very detailed.	Comment noted by the PNA Steering Group.		24/04/2018
12		ditto		<i>P28 – number of pharmacies per 100,000 population– due to large number of dispensing practices that ‘supplement’ these numbers - might be useful background to have a map with the pharmacies and surgeries on and mark which are dispensing practices – we note that this has been recognised that the maps and dispensing numbers need updating and any revisions made accordingly.</i>	Comment noted by the PNA Steering Group. Map inclusion on where both pharmacies and dispensing practices is included on Page 33 Second point refers to "maps and dispensing numbers" and the need to update the Determination of Rurality by NHS England which is noted in the document as observed by the respondent	No	24/04/2018

13		ditto		Page 57 - We envisage that with this proposed population increase there would not indicate the need for additional pharmacy sites for Herefordshire City. There is capacity to both manage the increase in housing proposed and a centralisation of a number of City practices in this development timescale of which indicates completion by early 2020	Comment noted by the PNA Steering Group.	Yes Page 57 - re- worded and re-position conclusions for City locality to read better (but no different conclusion reached).	24/04/2018
14		ditto		It should be highlighted that this shows no gaps in Pharmacy provision with current population being served and relocation of surgeries within Hereford City will not impact on this.	Comment noted by the PNA Steering Group.	Yes Page 57 - re- worded and re-position conclusions for City locality to read better (but no different conclusion reached).	24/04/2018
15		ditto		<i>P98 Conclusions... Additional Pharmacy provision needed –</i> Please clarify how the additional provision was determined re ROTA – is this on top of what NHSE commission or referring to the late notification and previous issues?	We believe this relates to comment on Page 61 and page 98 which are amended for better alignment. There is a need for NHS England to be mindful of the potential additional pharmacy rota on the minor Bank Holidays which are not currently commissioned in the 2 market towns i.e. May and Spring Bank, August Bank Holidays.	Yes: Clarification made to pages 61 and 98	24/04/2018

16		ditto		Ledbury situation could be a clearer – reference to supplementary statements if needed between PNAs. The number of houses planned is small and should not impact on service provision.	Comments and conclusions are made on pages 58 and 98 respectively.	Yes: Additional statement included on page 58 and 98 " There will be a need to monitor Ledbury Housing growth and produce Supplementary statement to this PNA" to further define whether the existing 2 pharmacies continue to meet the needs of the population noting the expected housing growth for this market town which proportionally than the other market towns and Hereford City."	24/04/2018
17		ditto		Opening Hours and other information is available on DoS and NHS Choices – where else would be useful? CCG or LPC websites potentially as long as kept up to date – NHSE accountability.	Page 98: Commissioners and Providers of Services need to co-ordinate with each other to ensure that patient facing information whether through e.g. CCG website/ Council WISH website provide up to date summaries of information on services.	Yes p.98 sentence re- written to this effect	24/04/2018
18		ditto		<i>7 day opening</i> - Currently we are not made aware through this exercise of any patient complaints in accessing medicines in a timely manner. What is the expectation and any increase would need to be funded?	Comment noted by the PNA Steering Group. Any developments in this respect would be discussed between Commissioners and LPC.	No	24/04/2018

19		ditto		P99 --- stop smoking Needs to be updated based on change to Contract to supply only	Page 99. Since production of DRAFT status Herefordshire Council have published commissioning intentions to support patients to stop smoking through a targeted population approach. Behavioural support service has been de-commissioned from community pharmacies. The PNA steering group would observe that the new outcome measures need to be monitored closely and community pharmacy as a provider need to be re-examined within the timeframe of this PNA when further outcomes are known.	Yes . Amendment made to Page 78 ,79 and 99 to this effect but remain regarded as "Essential"	24/04/2018
20	19/04/2018	A health or social care professional		a) Housing developments needs should be more closely addressed b) More free EHC needed 24/7 no restricted services depending on pharmacist	a) Comment noted by the PNA Steering Group. b) Whilst EHC formulations are legally classified as "POM" or "P" pharmacy only then the legal requirement is that they are sold or provided free of charge under the professional supervision of the pharmacist. Closure of the Walk in Centre, provision through current sexual health provider and community pharmacy activity is currently being collated to ensure access is not reducing and closely matches population need.	No	24/04/2018
21	23/04/2018	A community pharmacy contractor		Agreed on all points			24/04/2018

22	24/04/2018	NHS England		The PNA is fantastic – this is the most thorough I have seen! I think the key messages are appropriately balanced and have no further comments to add bar you may wish to include an “overall conclusions” box near the start summarising findings upfront for quick and easy reference, particularly that access to NHS pharmaceutical services provision is currently adequate to meet the needs of the population and that this is unlikely to change within the next 3 years.	Reference is made to the accompanying Executive Summary which will be published alongside the PNA document.	Yes Specific reference is made to the Executive Summary is now made on Page 3 of the PNA to be read in conjunction with the PNA document.	24/04/2018
23	24/04/2018	A dispensing doctor provider		Agreed on all points		No	13/05/2018