Contents

2	PROCESS		. 12
		Key messages	. 12
	2.1	Summary of the process followed in developing the PNA	
	2.2	Stakeholders involved in the development of the PNA	. 13
	2.3	How stakeholders were involved	. 13
	2.4	Localities used for considering pharmaceutical services	. 14
	2.5	Methods for identifying providers of pharmaceutical services.	. 14
	2.6	Assessment of need for pharmaceutical services	. 14
	2.7	Local impact of the new national pharmacy contract	. 14
	2.8	Future PNAs and supplementary statements	. 16
	Refe	rences	

2 Process

Key messages

This pharmaceutical needs assessment (PNA) was undertaken in accordance with the requirements set out in regulations 3-9 Schedule 1 of the NHS (Pharmaceutical Services and Local Pharmaceutical Services) Regulations 2013.ⁱ

In the process of undertaking the PNA the pan-Lancashire (Blackburn with Darwen, Blackpool and Lancashire County Council) steering group sought the views of a wide range of key stakeholders to identify issues that affect the commissioning of pharmaceutical services and to meet local health needs and priorities.

A 60-day consultation was undertaken from 1 July to 31 August 2025 to seek the views of members of the public and other stakeholders, on whether they agreed with the contents of this PNA and whether it addressed issues that they considered relevant to the provision of pharmaceutical services. The feedback gathered in the consultation was reported and reflected on in the final PNA report.

2.1 Summary of the process followed in developing the PNA

In 2022, Blackburn with Darwen, Blackpool and Lancashire County Council updated the 2018 PNAs, in line with the 2013 regulations. An extract of these regulations can be found in **Appendix 1.**

The legal regulations state that each PNA should have a maximum lifetime of three years. Due to the COVID pandemic, the PNA process was delayed, moving the PNA publication from April 2021 to October 2022. Following this, the full PNA process was reinitiated with a view to final publication by 1 October 2025. It includes updated information from the previous PNAs and engaged key stakeholders in identifying any new relevant issues.

Following a series of discussions, the current PNA is produced as a pan-Lancashire document, containing the amalgamated three PNAs for Blackburn with Darwen, Blackpool and the12 lower-tier local authorities within the Lancashire County Council Health and Wellbeing Board areas.

The development of the PNA was overseen by a multi-agency steering group representing a range of stakeholders. The overall makeup of the steering group included, as far as possible, members of the original steering groups. A working group was formed to operationalise the production of the PNA.

The specific legislative requirements for the development of PNAs were duly considered and adhered to.

In developing the pan-Lancashire PNA, information from the Blackburn with Darwen, Blackpool and Lancashire joint strategic needs assessments (JSNAs) and public health sources were used to explore the characteristics of the areas within pan-Lancashire and the local health needs that may be addressed through pharmaceutical services. The current provision of such services is described.

The process of developing the PNA took into account the requirement to involve and consult people about changes to health services.

2.2 Stakeholders involved in the development of the PNA

A list of stakeholders with an interest in the PNA was identified and was consulted through the PNA process. It included the following

- Blackburn with Darwen, Blackpool and Lancashire County Council health and wellbeing boards
- Lancashire and South Cumbria Local Professional Network (LPN) Pharmacy
- Community Pharmacy Lancashire and South Cumbria (CPLSC)
- persons on the pharmaceutical list
- Healthwatch Blackburn with Darwen, Healthwatch Blackpool and Healthwatch Lancashire
- NHS trusts and NHS foundation trusts in the area Blackburn with Darwen, Blackpool and Lancashire Place Based Partnerships
- NHS Lancashire and South Cumbria Integrated Care Board (LSCICB)
- commissioners of pharmaceutical services

2.3 How stakeholders were involved

The process of developing the PNA took into account the requirement to involve and consult stakeholders about changes to health services. A pan-Lancashire steering group was convened and met monthly during the development of the PNA.

The three local authorities, the LPN, LPC, LSCICB and Healthwatch were key members of the steering group and were involved in the development of this PNA.

Questionnaires about service provision were sent out to all pharmacies across the pan-Lancashire area, via PharmOutcomes.

Views on the PNA draft findings were sought from the public across pan-Lancashire and other interested parties through a formal 60-day consultation running from **1 July to 31 August 2025**. The draft 2025 PNA was published on Lancashire County Council's 'Have your say' website for stakeholders to review the full PNA.

All neighbouring HWBs were also informed that the PNA was being consulted on. The neighbouring HWBs are Westmorland and Furness, North Yorkshire, Bradford, Calderdale, Rochdale, Bury, Bolton, Wigan, St. Helens, Knowsley, and Sefton.

After the consultation period was completed, feedback gathered from members of the public and stakeholders was incorporated into the final document. A consultation report is presented in **appendix 7** of this report. All comments and feedback were formulated and put into a response log, which is available to review.

2.4 Localities used for considering pharmaceutical services

The PNA regulations require the PNA to define 'localities' to use during this process. For considering pharmaceutical coverage within the pan-Lancashire PNA, the area was the 14 localities, made up of the two unitary local authorities of Blackburn with Darwen and Blackpool and the 12 lower-tier local authorities within the Lancashire County Council area. These 14 localities were selected to support local decision-making that takes into account the needs for the population in these areas; also see section 3.6. Characteristics of localities are further described in **appendix 2**.

2.5 Methods for identifying providers of pharmaceutical services

The methods used for identifying providers of pharmaceutical services and creation of maps are described in **appendix 3**.

2.6 Assessment of need for pharmaceutical services

Assessing need for pharmaceutical services is a complex process. In addition to taking account of all views submitted from the stakeholders outlined above, this PNA considered several factors. ⁱ

- The size and demography of the population across pan-Lancashire
- Whether there is sufficient access to pharmaceutical services across pan-Lancashire
- Different needs of different localities across pan-Lancashire
- Pharmaceutical services provided in the area of neighbouring HWBs that affect the need for pharmaceutical services in the pan-Lancashire area
- Other NHS services provided in or outside its area which affect the need for pharmaceutical services across pan-Lancashire
- Whether further provision of pharmaceutical services across pan-Lancashire would secure improvements, or better access, to pharmaceutical services, or pharmaceutical services of a specified type, in the area
- Likely changes to needs in the future occurring due to changes to the size of the population, the demography of the population, and risks to the health or wellbeing of people in its area that could influence an analysis to identify gaps in the provision of pharmaceutical services

2.7 Local impact of the new national pharmacy contract

March 2025 saw the announcement of the new funding settlement agreement for community pharmacy covering periods 2024/2025 and 2025/2026.

The funding, agreed between the Department of Health and Social Care, NHS England and Community Pharmacy England (CPE) contained uplifts in payments to community pharmacies and extensions to existing services.

The NHS Long Term Plan published in January 2019 was written in response to concerns about funding, staffing, increasing inequalities and pressures from a growing and ageing population, whilst expressing optimism about the possibilities for continuing medical

advances and better outcomes of care.ⁱⁱ The NHS Long Term Plan takes all three of these realities as its starting point, keeping all that's good about the health service and its place in national life, whilst tackling head-on the pressures NHS staff face, while making extra funding go as far as possible whilst accelerating the redesign of patient care to future-proof the NHS for the decade ahead. This NHS Long Term Plan sets out how this will be achieved.

From a local NHS LSCICB perspective, NHS LSCICB has seen a significant reduction in the numbers of pharmacies across its area due to consolidation of pharmacies and closures due to financial pressures. These financial pressures have also meant a reduction in opening hours which, to date, have not had a significant impact on services provided.

The funding announcement makes better use of the skill mix within community pharmacies with changes being made to legislation to allow pharmacy technicians to provide many of the advanced services that only pharmacists could provide previously.

Below are examples of changes to the NHS community pharmacy contract in 2025/26.

Oral contraception service (advanced service)

From October 2025 pharmacies will be able to provide emergency hormonal contraception to eligible patients.

Smoking cessation service (advanced service)

Patient Group Directions (PGDs) will also be introduced to enable provision of varenicline and cytisinicline (cytisine) under the service by both suitably trained and competent pharmacists and pharmacy technicians

New medicine service (NMS) (advanced service)

From 1 October 2025, the service will also be expanded to include depression within the conditions and associated medicines covered by the service. This is an addition to the therapeutic areas covered by the service.

Pharmacy quality scheme (PQS)

The PQS supports delivery of the NHS Long Term Plan and rewards community pharmacy contractors that achieve quality criteria in the three domains of healthcare quality: clinical effectiveness, patient safety and patient experience.

A smaller than usual PQS will run in 2025/26. The main requirements which community pharmacy teams will be aiming to meet are

- palliative and end-of-life care: pharmacies must develop or update a palliative and end-of-life care action plan and if they stock the 16 palliative and end-of-life care medicines, update their directory of services profile to confirm this
- introduction of depression into the NMS: all pharmacists must complete the CPPE (Centre for Pharmacy Postgraduate Education) Consulting with people with mental health problems online training

• emergency contraception: all pharmacists must complete the *CPPE Emergency contraception training* and pass the online assessment, and any pharmacy technicians intending to provide the service

2.8 Future PNAs and supplementary statements

The HWBs have a responsibility to keep the PNA up to date through publishing supplementary statements when appropriate as guided by the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013, as amended.

After the PNA is published, HWBs will publish notifications of changes to pharmaceutical provision, such as changes of hours, closures or pharmacy consolidations on the PNA websites. In addition to such notifications, statements of any significant changes in the provision of pharmaceutical services in their localities by way of a supplementary statement, will be published, where appropriate. Supplementary statements are a statement of fact, where there has been a significant change to pharmacy provision or community need ⁱⁱⁱ. The governance process for producing any supplementary statements is specific to each HWB area. As the PNA will be updated every three years, the PNA steering group meets every six months to review changes in pharmacy provision and community need, and to consider the requirement to publish any amendments to the PNA when necessary.

References

ⁱThe National Health Service (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. Available at: <u>http://www.legislation.gov.uk/uksi/2013/349/made</u> ⁱⁱ <u>https://www.longtermplan.nhs.uk/</u>

ⁱⁱⁱ Department of Health and Social Care: Pharmaceutical needs assessments: information pack <u>https://www.gov.uk/government/publications/pharmaceutical-needs-assessments-information-pack</u>