

<b>Classification</b>	<b>Item No.</b>
<b>Open / Closed</b>	

<b>Meeting:</b>	Bury Health and Wellbeing Board
<b>Meeting date:</b>	4 <sup>th</sup> Sep 2025
<b>Title of report:</b>	Bury Pharmaceutical Needs Assessment (PNA) report
<b>Report by:</b>	Shenna Paynter, Public Health Specialist Presented by Steve Senior, Public Health Consultant, & NHS GM Community Pharmacy Integration and Commissioning Team Board Member- Jon Hobday, Director of Public Health
<b>Decision Type:</b>	Decision- Acceptance of the Bury PNA before statutory 60 day stakeholder consultation period.
<b>Ward(s) to which report relates</b>	Bury Wide

## Executive Summary:

**1.1** The purpose of this report is to share the final draft of the Bury Pharmaceutical Needs Assessment report with the HWB Board members for approval, before it goes to a statutory 60-day stakeholder consultation.

**1.2** The Pharmaceutical Needs Assessment (PNA) is a legal document which each Health and Wellbeing Board must publish every 3 years. It details the location and accessibility of pharmacies in the area (Bury) and which services they provide. The nationally produced [Pharmaceutical needs assessment information pack](#) (updated July 2025) provides further details. The PNA for Bury presents a picture of community pharmacy need and provision in Bury and links to Bury's [Joint Strategic Needs Assessment](#) (JSNA).

**1.3** The PNA is also used by commissioners and pharmacy contractors to determine whether a pharmacy can help improve the health of the local population through commissioned or provided services.

**1.4** The PNA 2025-2028 has been developed by NHS Greater Manchester Integrated Care on behalf of Bury's Health and Wellbeing Board using a standard methodology

in accordance with the requirements set out in regulations 3-9 Schedule 1 of the [NHS \(Pharmaceutical Services and Local Pharmaceutical Service\) Regulations 2013](#), as amended. It replaces the Bury [Pharmaceutical Needs Assessment \(PNA\)](#) previously published in 2023.

**1.5** A steering group was established to lead a comprehensive engagement process to inform the development of the PNA. The group undertook a public survey and sought information from pharmacies, Bury Council, NHS GM, Community Pharmacy Greater Manchester (CPGM) and NHS commissioning boards (NHSCB), to identify issues in service provision and to meet local health needs and priorities.

**1.6** The PNA includes information on:

- Pharmacies in Bury and the services they currently provide including dispensing, providing advice on health, medicines reviews and local public health services.
- Other local pharmaceutical type services, including dispensing appliance contractors (DAC).
- Relevant maps relating to Bury and providers of pharmaceutical services in the HWB area. In the PNA Bury is divided into five integrated [neighbourhood profiles](#) as described in the Bury JSNA
  - Bury East
  - Bury North
  - Bury West
  - Prestwich
  - Whitefield
- Potential gaps in provision that could be met by providing alternative pharmacy services, or through opening more pharmacies, and likely future needs.

## **2. Recommendation(s)**

Based on all available information, the PNA has found no current or future gaps in the provision of essential, advanced, or enhanced pharmaceutical services across Bury. The existing pharmacy coverage meets the population's needs during and outside normal working hours, and no improvements or additional services have been identified as necessary. It is recommended that the HWB accept this final Bury 2025-2028 PNA before it goes to a statutory 60 day stakeholder consultation and following which the PNA will be published under the direction of this Board.

## **3. Key considerations:**

### **3.1 Introduction/ Background:**

Bury's Health and Wellbeing Board (HWB) has a statutory responsibility to publish and keep up to date the PNA for Bury.

It will be used by NHS commissioning bodies to

- inform which NHS funded services need to be provided by community pharmacies and dispensing appliance contractors
- decide whether new pharmacies or services are needed
- aid decision making about the relocation of existing pharmaceutical premises in response to applications by providers of pharmaceutical services
- inform the commissioning of locally enhanced services delivered from pharmacies to address any gaps in health care provision

Providers of pharmaceutical services will also use the PNA to inform their applications to provide pharmaceutical services by demonstrating that they are able to meet a pharmaceutical need as set out in the PNA.

### **3.2 Key Issues for the Board to consider:**

The PNA concluded no gaps in current pharmaceutical services had been established. This is clearly demonstrated by the following points:

- Bury has 21 pharmacies per 100,000 population, which is more than the England (18) and equal to the Greater Manchester (21) averages.
- Most residents live within 1.0 miles of a pharmacy.
- Most residents can access a pharmacy within 20 minutes either by walking, public transport or driving.
- The location of pharmacies within each of the five neighbourhoods and across the whole HWB area.
- The number and distribution of pharmacies within each of the five neighbourhoods and across the whole HWB area.
- The choice of pharmacies covering each of the five neighbourhoods and the whole HWB area.
- 92% of respondents to the public survey had not had any difficulty in accessing a pharmacy of their choice.
- 93% of respondents to the public survey had not had any difficulty in accessing a pharmacy due to location.
- 82% of responders said the opening hours of pharmacies in Bury do not cause a problem

- Bury has a choice of pharmacies open across range of times including early mornings, evenings and the weekend.
- Bury pharmacies offer a range of pharmaceutical services to meet the requirements of the population.

Therefore

- No current gaps in the need for provision of essential services during normal working hours have been identified.
- No current gaps in the provision of essential services outside normal working hours have been identified.
- No current gaps in the provision of advanced and enhanced services have been identified.
- No gaps in the need for pharmaceutical services in specified future circumstances have been identified.
- No gaps have been identified in essential services that if provided either now or in the future would secure improvements, or better access, to essential services.
- No gaps have been identified in the need for advanced services that if provided either now or in the future would secure improvements, or better access, to advanced services.
- No gaps in respect of securing improvements, or better access, to other NHS services either now or in specified future circumstances have been identified.

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### **Community impact/links with Community Strategy**

To identify how pharmaceutical service provision can help tackle the need of Bury's local population, we have used HWB minutes from [16/01/2025 meeting](#). The HWB have also identified priorities in the locality plan update for 2025 to address issues which will help drive the changes recommended in [Bury's Let's do it! strategy](#). The priorities identified by the HWB that are related to pharmaceutical services provision are:

1. Increase annual physical activity
2. Management of obesity and healthy weight
3. Reduce smoking prevalence
4. Harm reduction from drugs and alcohol

5. Health protection – immunisations and vaccinations
6. Increase in pharmacy first uptake

The major conditions board have also identified the following major conditions as priorities:

7. Cardiovascular disease
8. Respiratory disease (COPD and Asthma)
9. Cancers
10. Musculoskeletal conditions

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### **Equality Impact and considerations:**

*Under section 149 of the Equality Act 2010, the 'general duty' on public authorities is set out as follows:*

*A public authority must, in the exercise of its functions, have due regard to the need to -*

- (a) eliminate discrimination, harassment, victimisation and any other conduct that is prohibited by or under this Act;*
- (b) advance equality of opportunity between persons who share a relevant protected characteristic and persons who do not share it;*
- (c) foster good relations between persons who share a relevant protected characteristic and persons who do not share it.*

*The public sector equality duty (specific duty) requires us to consider how we can positively contribute to the advancement of equality and good relations, and demonstrate that we are paying 'due regard' in our decision making in the design of policies and in the delivery of services.*

<b>Equality Analysis</b>	<i>Please provide a written explanation of the outcome(s) of either conducting an initial or full EA.</i>
<p>Population characteristics and health needs are assessed in section 4.5 of the PNA. The following patient groups with one or more of the following protected characteristics have been identified as living within the HWB's area:</p> <ul style="list-style-type: none"> <li>➤ Age</li> <li>➤ Sex</li> <li>➤ Being pregnant or on maternity leave</li> </ul>	

- Disability
- Gender reassignment
- Being married or in a civil partnership
- Race which includes colour, nationality, ethnic or national origins
- Religion or belief
- Sexual orientation

The section also focusses on the health issues, setting out how pharmacies can support the specific needs of the population as defined by the protected characteristics in equality legislation.

*\*Please note: Approval of a cabinet report is paused when the 'Equality/Diversity implications' section is left blank and approval will only be considered when this section is completed.*

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### **Legal Implications:**

*To be completed by the Council's Monitoring Officer*

The Health and Social Care Act 2012 transferred responsibility for the developing and updating of PNA's to the Health and Wellbeing Boards, making it their statutory duty to publish and keep updated the PNA.

Failure to comply with the statutory duty of publishing and updating the PNA will result in increased scrutiny, negative impact on reputation, impact on commissioning services and identification of current gaps in pharmaceutical services.

The PNA is of particular importance to NHS England & Improvement who since 1st April 2013 (and as identified in the Health and Social Care Act 2012) is responsible for maintaining pharmaceutical lists.

The PNA is a key document in making decisions with regard to applications made under the NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013.

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### **Financial Implications:**

*To be completed by the Council's Section 151 Officer*

There are no costs associated with the PNA report at this stage. (the production of the PNA has a cost which is covered by the public health budget).

There are no financial implications for the authority. From a wider viewpoint if no gaps are identified in the PNA then there will be no financial implications to the wider health economy.

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## Report Author and Contact Details:

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## Background papers:

- Bury Pharmaceutical Needs Assessment 2025-2028
- Appendix One – Glossary
- Appendix Two – BOR PNA steering group TOR FINAL v01 291124
- Appendix Three – Public survey results -Bury
- Appendix Four – Pharmacy survey results
- Appendix Five – Locally Commissioned services
- Appendix Six – Bury Pharmacies
- Appendix Seven – Advanced services
- Appendix Eight – Community Pharmacy Opening Hours
- Appendix Ten - Maps
- Appendix Eleven – GP Practices
- Appendix Twelve – One mile boundary pharmacies

**Please include a glossary of terms, abbreviations and acronyms used in this report.**

Term	Meaning
BOR	Bury, Oldham and Rochdale's Health and Wellbeing Boards/local authority
COPD	Chronic Obstructive Pulmonary Disease
CPGM	Community Pharmacy Greater Manchester
DAC	Dispensing Appliance Contractor
HWB	Health and Wellbeing Board
NHS	National Health Service
NHSCB	NHS Commissioning Board
NHSGM	NHS Greater Manchester

PNA	Pharmaceutical Needs Assessment
TOR	Terms of Reference.