

Community Pharmacy England's submission to the Darzi Review

August 2024



Executive summary

Summary of our submission

Our submission describes:

- The role community pharmacy plays in the NHS and the value it adds
- The funding challenges faced and the impact of these
- The opportunities ahead that could be realised by a sustainably funded sector

Evidence provided

We include a range of evidence spanning:

- Community Pharmacy England analysis
- Independent surveys, e.g. lpsos polling for NHS England
- Independent economic analysis

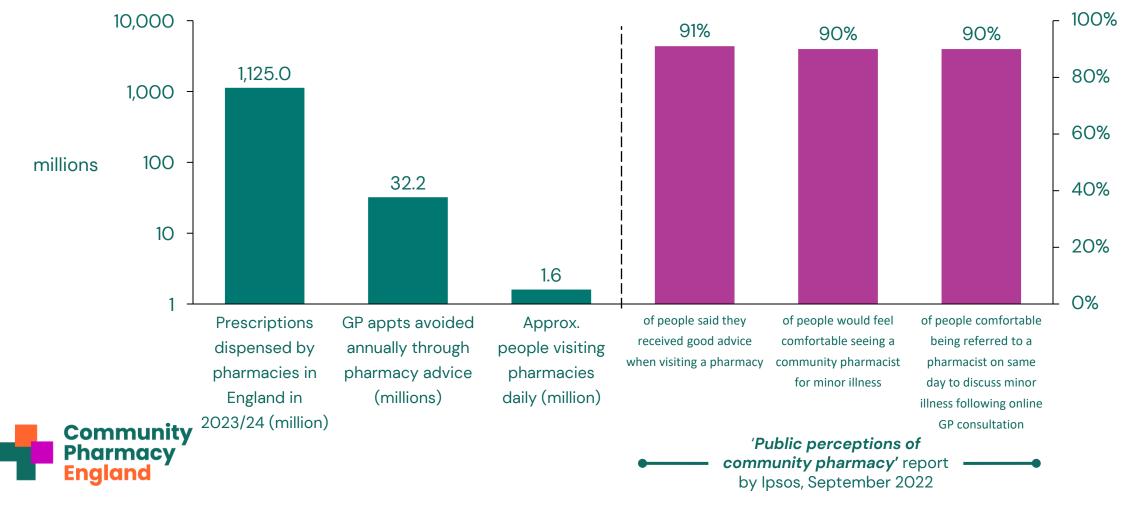
Conclusions from this evidence

- Community pharmacy is a critical component of the NHS
- The sector provides value to the public, the economy and other health providers
- The sector is facing a severe funding crisis
- This is exacerbating inequalities, reducing access to care for those most in need
- Without urgent stabilisation, the potential to deliver more clinical services and value will be lost



Community pharmacy is a highly valued and trusted component of the NHS

The core service of supply of medicines operates at incredible scale, interacting with over 1 million people every day, and taking significant strain away from other parts of the NHS.



Community pharmacy provides services that are a proven source of significant economic and social value

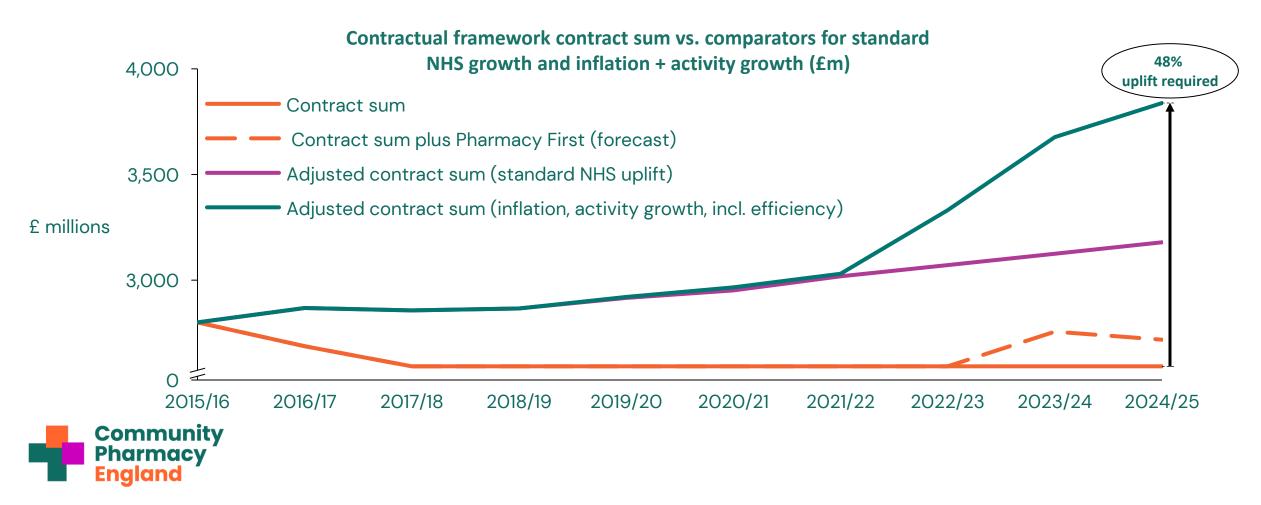
These include services which are not directly funded under the NHS Community Pharmacy Contractual Framework (CPCF).

3,500 3,250 162 3,000 186 407 2,500 835 2,000 1,628 £ millions 1,500 1,000 500 0 Managing drug Managing Making Sustaining Delivering Clarifying Total medicines shortages prescribing supply prescriptions prescriptions Community adjustments errors harmacv

Net social and economic value arising from pharmacy activity related to the dispensing of prescriptions (£m, 2022/23)

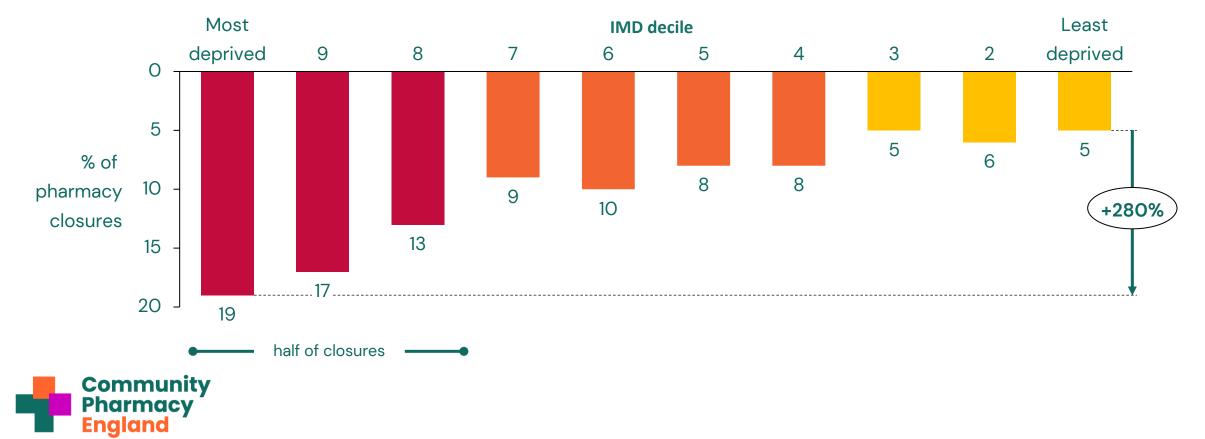
In under a decade, the proportion of total NHS funding spent on community pharmacy has reduced from 2.4% to 1.6%

Significant contraction in sector funding, combined with service expansion, has resulted in unsustainable delivery. A sample of large pharmacy groups indicates c. 75% have negative net assets, with the Health and Social Care Select Committee recently recommending closing the NHS funding gap.



Funding contraction is adversely impacting patient access, worsening inequalities with half of closures in the most deprived areas

Funding contraction is adversely impacting patient access, with wider impacts on pharmacy owners, pharmacists and the wider healthcare system (such as a reduction in the sector's contribution to social and economic value). Closures in recent years (1,400+ pharmacies) have had a disproportionately large effect on the most vulnerable where need is highest.



% of community pharmacies closed by IMD decile (Oct 2016 – May 2024)

Without stabilisation, ambitions for community pharmacy will fail – despite the scope for further clinical service development

The sector supports the ambitions of the Government's reform agenda including providing more care in the community (see below). This could enable the realisation of untapped clinical potential that exists within the sector and that would relieve pressure on other frontline services

Expanded Pharmacy First		Prevention / Public Health		Women's health		Independent Prescribing and LTCs	
Open access to the current service	Supply of OTC meds for low- income individuals	Expanded vaccination services	Smoking / nicotine cessation service (open access)	Addition of LARC to Pharmacy Contraception Service	Emergency Contraception service	Amendment of prescriptions and deprescribing	Management of LTCs (hyp, lipids, asthma, dermatology)
Additional Pharmacy First conditions: • Lower respiratory tract infections • Acne		Case- finding & referral service, e.g. COPD	Add AF detection to Hyp Case Finding service	Menopause advice service (incl. supply of HRT)		Structured medication review	
 Minor skin infections Eczema Psoriasis 		Health checks for				Кеу:	
Acute otitis externaBacterial conjunctivitis		specific target	Weight management			High p	priority
 Oral thrush in infants 		groups				Medium	n priority



Note: We are in the process of developing economic cases for these services aligned to HMG's Green Book. We expect these will present highly compelling cases as studies in Canada of full-scale roll-out of community pharmacy provided hypertension care estimated cost savings to be approximately \$16bn (or approx. £9bn).