

Appendix 2 Consultation Report

Consultation Background

The consultation of the draft PNA was carried out in accordance with NHS (Pharmaceutical and Local Pharmaceutical Services) Regulations 2013. These regulations stipulate who the Health and Well Being Board are required to consult with:

- Healthwatch and health groups across the West Sussex Health and Wellbeing Board (HWB) area.
- NHS Trusts and Foundation Trusts.
- Local Pharmaceutical Committee.
- Local Medical Committee.
- All pharmaceutical providers in the HWB area.
- NHS England.
- Neighbouring Health and Wellbeing Boards (that is Brighton and Hove, East Sussex, Hampshire, and Surrey).

As in previous years, it is acknowledged, given the nature and purpose of the PNA as a document, that primary respondents to the consultation are likely to be professionals; however, members of the public were encouraged, and welcomed, to participate and provide their views.

How the Consultation Was Undertaken

The consultation ran from Wednesday 28 May until Monday 28 July 2025.

The draft PNA documents, a full report, and a summary, were published on the West Sussex County Council website and the local West Sussex Wellbeing website. A paper copy of the full document was available on request.

To promote the consultation, the PNA project team worked with the West Sussex County Council (WSCC) Communications team. Promotion included press releases, promotion via social media, posters placed in public spaces, such as libraries, promotion internally to staff employed by the council and via communications teams in other organisations (such as Districts and Borough councils and the NHS).

Professionals, organisations, and groups were notified directly by email, a list of those contacted is provided at the end of this report.

Consultation Questionnaire

The consultation asked the following six questions:

- 1 *Has the purpose and background to the PNA been clearly explained?*
- 2 *Have the localities and boundaries used been clearly defined throughout the draft PNA?*
- 3 *Does the draft PNA clearly reflect the current NHS pharmaceutical services available in West Sussex?*
- 4 *Are there any gaps in service provision that haven't been identified in the draft PNA, such as when, where, and which services are available?*
- 5 *Does the draft PNA reflect the pharmaceutical needs of the West Sussex population?*
- 6 *If you have any further comments about the content of the draft PNA, including the recommendations, please give details.*

Who Responded?

There were 301 responses to the consultation. Of these 292 were from service users/members of the public, 8 from professionals and 6 on behalf of organisations.

Where people were not responding on behalf of others/organisations, respondents were asked to state their age, sex, ethnic background and whether they had a disability:

- 29% aged between 25 to 64 years and 70% aged 65 years or over.
- 57% of respondents were women.
- 91% were from a White British ethnic background.
- 45% of respondents stated that their day-to-day activities were limited because of a health problem or disability.

Some of the comments made have been included in this report to set out the range of views, and depth of feelings, expressed. The PNA Steering Group have reviewed and considered all feedback to the consultation. This report details the steering group response.

Key Findings

Question 1 - Has the Purpose and Background to the PNA been clearly defined?

The majority of respondents said that that the purpose and background were clearly defined.

Table 1 Has the Purpose and Background Been Clearly Defined

Response	Number	Percentage
Yes	236	78%
No	12	4%
Not sure	49	16%
Not answered	4	1%
Total	301	100%

Those who responded “no” to this question were asked to give details.

The responses mostly related to people finding it difficult to access or understand the PNA or a lack of publicity:

Probably have not found the right documents yet!

This long, complex and unnecessarily detailed

There has not been enough publicity

Zero communication.

Question 1 PNA Steering Group Response

Where people reported difficulties in reading/downloading the draft and an email was provided, staff were able to support them accessing the draft. Technical issues were reported back to the WSCC communications team.

Publicity was undertaken for both the initial public survey, and the consultation as follows:

Phase 1 publicity - engagement survey (February and March 2025)

- Press release (issued 3 Feb)
- Social media posts (3, 12, 19, 26 February)
- Article in Residents’ newsletter (23 January/20 February (survey)
- Other newsletter articles: family hubs, Public Health Bulletin, Adults & Health News, Internal/The Point, Members’ Bulletin, West Sussex Care and Support Providers
- Libraries informed - offered support to help residents complete survey
- A4 digital poster designed for partners.
- Healthwatch supported

Phase 2 - Consultation (May to July 2025)

- Press release (issued 28 May)
- Your Voice article (w/c 28 May)
- Email to survey respondents from engagement phase one.
- Five social media posts throughout the 60-day consultation period (28 May, 12 June, 27 June, 14 July, 25 July)
- Article in Residents’ newsletter 12 June
- Articles in Public Health News, Adults & Health News, West Sussex Care and Support Providers

- Internal newsletter article
- Members' Bulletin article
- Email to partners – newsletter article and social media post (Districts & Boroughs, NHS Sussex Comms)
- Healthwatch supported

The Steering Group noted that the consultation received over 300 responses, more than double the number received in 2022 during the previous PNA.

Question 2 - Have the localities and boundaries use been clearly defined throughout the draft PNA?

Most respondents said that localities were clearly defined.

Table 2 Have the localities and boundaries use been clearly defined

Response	Number	Percentage
Yes	213	71%
No	8	3%
Not sure	74	25%
Not answered	6	2%
Total	301	100%

In terms of comments on this question:

Please can we align our language/terminology. Rather than 'localities' can we refer to them as Integrated Community Team footprints and explain the relevance in terms of Pharmacy as a core local asset

The map does not clearly show which locality is within any particular area.

In addition, one comment suggested the need for an interactive online map showing the network of pharmacies.

Question 2 PNA Steering Group Response

Integrated Community Teams (ICTs) share the same boundaries as lower-tier local authorities. However, as it is unclear how recognisable the term 'ICTs' would be to the wider public, the term 'localities', as used in the PNA guidance, has been adopted

Action taken:

- For clarity, a further appendix will be added containing a profile for each locality.
- Public Health will also explore the use of an interactive map.

Question 3 - Does the draft PNA clearly reflect the current NHS pharmaceutical services available within West Sussex?

The majority of the respondents agreed that the draft PNA reflects current pharmaceutical provision.

Table 3 Does the PNA reflect the current NHS pharmaceutical service provision

Response	Number	Percentage
Yes	169	56%
No	15	5%
Not sure	113	38%
Not answered	4	1%
Total	301	100

If respondents answered no to this question, they were asked to provide further comment

Responses related to the quality and quantity of local services:

It does not look at the effectiveness of each chemist;

The report states that essential (a very basic) service is being and will be adequately met, but we require an enhanced service;

Not enough pharmacies in Horsham area.

Services local to us are very poor...

Question 3 PNA steering group response

Many of the issues raised by respondents, including those relating to the effectiveness, are outside the scope of the PNA. All comments have been shared anonymously with NHS staff.

With regard to pharmacy numbers, the PNA outlines the reduction in the number of pharmacies and has assessed accessibility, in terms of distance and travel time, in line with existing guidance.

Action taken:

In relation to services provided, a recommendation has been included which notes the need for monitoring by commissioners of coverage, at a locality level, of existing and any new locally commissioned services and to support existing contractors with service provision.

Question 4 - Are there any unidentified gaps in service provision, i.e., when, where and which services are available?

13% of consultation responses agreed that there were gaps not identified in the PNA.

Table 4 Gaps Not Identified in the draft PNA

Response	Number	Percentage
Yes	39	13%
No	113	38%
Not sure	145	48%
Not answered	4	1%
Total	301	100.0%

Many comments related to the quality of local service and the need for better communication of out of hours provision:

Better communication is needed for the out of hours services. Each pharmacy needs to advertise where to go if their premises is closed

No consistency of service in any area described

Local pharmacies are always busy. One usually has to queue Greater provision needed

Opening hours, particularly of rural pharmacies, can cause difficulties for those dependent on public transport.

In addition, several respondents questioned the Steering Group's decision to adopt 6 miles and 20 minutes to define accessibility, and the consideration of new housing developments:

6 miles is too far to travel if you are elderly or have a young family; The so called "reasonable" ruling of being within a 6 mile radius and 20 minutes travelling time is far from acceptable in this day and age

Very concerned about the eyewatering numbers of new homes that will be built near to me

Wherever possible, all residents should enjoy the benefit of a first-class, independent pharmacy with five minutes walk of their front doors.

Question 4 PNA Steering Group response

Comments are being shared anonymously with NHS commissioners, including those highlighting the need for clearer communication of opening hours and available services.

'Reasonable access' has been defined as a distance of 6 miles or 20 minutes by road, in line with NHS guidelines and NHS Litigation Authority resolution SHE/17182 (2012), which remains unchanged.

The PNA takes into account population growth, new housing developments during its lifetime, travel distance and coverage by nearby pharmacies within the defined 6-mile or 20-minute radius, as well as the availability of dispensing doctors.

Question 5 - Does the draft PNA reflect the pharmaceutical needs of the West Sussex population?

Most of consultation respondents either agreed that the PNA reflected pharmaceutical needs of residents, or state that they weren't sure.

Table 5 Does the PNA reflect the pharmaceutical needs of residents?

Response	Number	Percentage
Yes	133	44%
No	33	11%
Not sure	131	44%
Not answered	4	1%
Total	301	100.0%

If respondents answered no to this question, they were asked to provide further comment.

Most comments received were out of scope and related to the quality and funding of local services.

Dispensing takes too long

too many local pharmacies have closed

Financial support of pharmacies is inadequate

Local pharmacies provide an essential service as part of primary care as well as dispensing medication. The workload for local pharmacies and apparent underfunding mean that these services may fall short of optimum care for patients.

One comment also related to problems with the supply of medication:

Insufficient stock of essentials at pharmacies

Medication shortages were raised during the engagement and are clearly a concern. It is acknowledged that these shortages represent a national issue and are, consequently, outside the control of the NHS commissioners.

Several comments were also made regarding rurality and medication delivery services:

Many rural villages have no pharmacy, every community should have a pharmacy so that everyone is within 20 minutes walk of a pharmacy

Rural areas like Henfield etc need local pharmacies to be more readily available.

With so many elderly people unable to drive or even walk far, home delivery of prescriptions by the pharmacy should be standard

Question 5 PNA Steering Group response

In terms of reasonable access, answer as per Question 4.

The PNA Steering Group considered factors including the population, new housing developments during the lifetime of the PNA, travel distance, proximity to other pharmacies within a 6-mile radius or 20-minute journey, and the availability of dispensing doctors. Having taken all of these into

account, the Steering Group is satisfied that there is no gap in pharmaceutical service provision and that current contractors provide sufficient choice and access for residents.

All pharmacies are now required to facilitate, to a reasonable extent, remote access to the pharmaceutical services they provide, where people wish to access them remotely.

Delivery services are privately provided by pharmacies and are not part of NHS pharmaceutical services, nor are they funded by the NHS. However, where available, such services are recognised as improving access for residents. Additionally, residents may choose to use any distance-selling pharmacy in England, all of which are required to provide essential services remotely to anyone in the country who requests them.

Question 6 – If you have any further comments about the draft PNA, including the recommendations, please give details

In total, 64 additional comments were made, which covered various aspects of the draft PNA. Many comments were considered out of scope as they related to the **quality of the services** on offer. In the main, these tended to focus on local need and provision:

I think there is a need for a rostered duty pharmacist within Crawley as it's not possible for many elderly sick people to get to Gatwick which is the only out of hours pharmacy.

I get all my needs delivered free on line. Pharmacies are too long winded and inconvenient to visit.

As i live in Upper Beeding & the local surgery is due to close i will find it increasingly hard to get medical help & subsequent medicine

Better information to find out about where to find out-of-hours pharmacies needed by residents

A few respondents reported technical issues with the online platform used to host the draft report and several comments were made regarding the content and format of the PNA report:

The document seems rather repetitive, perhaps for legal reasons; I admit I rushed through many of the 108 pages.

most impressed with depth of info given and clarity of explanations where required

Much much too much detail and no easy to read summary

One comment was made regarding the methods employed within the consultation:

Thanks for engaging with stakeholders prior to publication and for the opportunity to take part. From section 10 Public Engagement Survey, there are significant differences in the demographic of the survey response sample vs overall W Sussex population. Muslims appear to be under-represented in the survey by a factor of 10 (0.2% said they were Muslim vs 2.2% in W Sussex Population). Married people and people in a civil partnership were over represented (65% sample vs 48% W Sx), reflected also in the under representation of singletons (9% in survey vs 32% in W Sx population). Over 50% of survey respondents were 65 yrs + while 23% of W Sx population are 65 yrs +. What was the actual survey figure?

Perhaps some biases were intentional (use of service increases with age so polling older people may be reasonable) and I am not sure if any of the differences would have impacted your conclusions but on a subsequent survey, and if you wanted the survey to better represent the makeup of the W Sussex population as a whole, consideration could be given to making the sample more representative.

Comments were made relating to geographic concerns and the delivery of prescribed medications:

We live in Henfield and the pharmacy is definitely needed, providing a vital service to the community. The need will only increase further as more and more housing development takes place

It seems reasonable, although I am surprised that 6 miles to nearest pharmacy is considered reasonable

We still feel that small parishes do not have access to pharmacies without travelling and predominantly an ageing population, increases the difficulties encountered by this age group.

As a retired person who does not drive, I now have to pay £50 pa to have my prescriptions delivered. Whilst I can manage to pay this fee to the pharmacy at present, I am sure that there are other customers with age / disability / mobility issues that could not afford this service;

I support Amazon-style collection points. I support after 18:00 opening, as I still work. I support delivery options, as I live in a village. I am a fan of consulting pharmacists, rather than Doctors for minor stuff and when my GP surgery is closed

Comments on the recommendations of the PNA

having read the document I haven't seen any recommendations. The report states facts and the current position along with the expected growth of the population. There is no recommendation for increasing the number of pharmacies nor their powers/ responsibilities yet our pharmacies are a vital part of the healthcare system.

Thank you for the opportunity to review the West Sussex Pharmaceutical Needs Assessment (PNA). I welcome its comprehensive approach and agree that pharmaceutical services across the county are generally well-distributed and accessible. However, I believe the recommendations could go further in addressing current and future challenges—particularly in ensuring equity of access and service quality for all communities, including those along the coast. Coastal areas can face unique health inequalities, and pharmacy provision must be responsive to these needs.

In particular:

- Recommendation 1 should be strengthened to ensure not just monitoring, but active planning and early intervention in areas of significant population growth or development pressure.*
- Recommendation 2 should place greater emphasis on ensuring consistency in*

the availability of advanced and enhanced services across the county, including those supporting prevention and long-term condition management. These services are particularly important in areas where access to other healthcare providers is limited.

- Recommendation 3 is crucial, but I believe there needs to be a more proactive approach to public engagement and communication around services such as the Community Pharmacist Consultation Service (CPCS), especially where digital exclusion or health literacy is a barrier.*
- Recommendation 4 should give stronger focus to the needs of rural and coastal communities, which often face both geographic and social barriers to accessing timely healthcare.*

I would also like to see the PNA recognise the growing role of technology-enabled care (TEC) and artificial intelligence (AI) in transforming pharmacy and community health services. From automated dispensing and digital medication reminders to AI-supported health triage and risk stratification, there is real potential for these tools to improve access, personalise care, and support preventative approaches. Pharmacies should be supported to adopt and integrate TEC solutions in ways that benefit patients—particularly those who are vulnerable, isolated, or managing complex conditions.

Pharmacies are a vital part of the wider health and care system, offering not only access to medicines but also advice, screening, and preventative services. I would like to see the PNA used as a springboard for more ambitious commissioning and support for pharmacies to develop their role further in community health.

I appreciate the work that has gone into producing this assessment and look forward to seeing its recommendations lead to meaningful improvements across West Sussex.

There were also two comments made regarding specific areas and pharmacies:

The closure of Boots in Littlehampton is a disappointment, as it is noticeable and surprising from the figures given, that Arun has the highest influx of people due to new housing being built. There fore a need for further community services to be in the area should maybe be noted.

Given that the largest reduction in community pharmacies has occurred in Mid Sussex, where coverage of some locally commissioned services is comparatively limited, a detailed response was provided relating to issues specific to that locality.

I note that provision of pharmacy services in Mid Sussex is lower per 100,000 than everywhere except Horsham.

I also note that, despite a push to offer more services in pharmacies to relieve the burden on the primary care and improve public health, Mid Sussex has the lowest provision across West Sussex for the four West Sussex County Council commissioned public health services: NHS Health Checks, Smoking Cessation, Alcohol Identification and Brief Advice Service and Emergency Hormonal Contraception Services.

Only one pharmacy in Mid Sussex offers NHS Health Checks and this is in East Grinstead so there is no provision within my constituency other than through GPs, and as not all GPs offer this service, thousands of my constituents are unable to access a service that they are entitled to.

Mid Sussex also has the lowest percentage provision for the other three commissioned services.

I am unhappy that Mid Sussex is so poorly provided for on these services compared to the rest of West Sussex and ask that urgent steps are taken to increase the provision of these services.

I also note that it is very hard to find which pharmacies provide these services without calling each pharmacy individually. Even the Mid Sussex Wellbeing site lists only one pharmacy offering smoking cessation advice whereas the PNA says that there are five. I would ask that serious consideration is given to improving the provision of this information to residents.

PHARMACY PROVISION IN HAYWARDS HEATH

I am particularly concerned about a developing situation in the west of Haywards Heath where the loss of pharmacy provision in Bolnore and at Sainsbury's has now been compounded by the move of Dolphins Pharmacy to Cuckfield.

Whilst I am pleased that Cuckfield residents now have an easily-accessible pharmacy, I am concerned that this has created an imbalance in the provision of pharmacy services within Haywards Heath as there is now no provision in the west of the town.

This is compounded by the fact that Dolphins Pharmacy was located in a "health hub" for the town on a site containing The Kleinwort Centre, the child development centre, Dolphins Practice, Nightingale Centre and close to Linwood. In addition, there are care homes and sheltered housing located just a short walk from this site. I have been told by doctors that they are concerned about patient compliance with their medication if they are not able to obtain it immediately on leaving their appointments. I have also been told by care home providers how much harder this is making accessing the medicines they need for their residents, as they have lost a strong working relationship with the pharmacist and now need to travel some distance to obtain medicines that their staff could previously quickly obtain. Furthermore, some of their residents who could access the pharmacy on this site due to its proximity and easy accessibility are now no longer able to obtain their own medicines due to the travel distances and parking issues involved, so this has caused a loss of independence for some of the elderly residents in this part of the town.

I would ask that pharmacy provision in Haywards Heath receives particular attention and that the reinstatement of a pharmacy on this site is considered without delay.

PHARMACY PROVISION IN BURGESS HILL

I am also concerned about the lack of pharmacy provision east of the railway line in Burgess Hill despite the significant growth in housing in this area of town. Furthermore, the Northern Arc development of 3,500 houses (Brookleigh) will lead to a substantial increase in the requirement for pharmacy provision in the town. There is a need to strengthen pharmacy provision in Burgess Hill now to ensure that provision is robust to meet the needs of the new residents when the houses are fully occupied.

It should be noted that there were many positive comments received, highlighting the valuable support provided by individual pharmacies and the high regard in which pharmaceutical services are held by residents.

Question 6 PNA Steering Group response

Issues relating to access to the consultation were passed to the council's Communications Team. Support was available during the consultation period to help residents access both the draft PNA and the survey.

The definition of "reasonable access" (6 miles or 20 minutes by road) is in line with current national guidelines. The Steering Group has included a recommendation that we would welcome updated DHSC guidance, which should include whether technical elements of a PNA, such as defining and assessing reasonable access, could be handled centrally, with local areas focusing on community engagement.

The Steering Group acknowledges that open sampling is inherently self-selective. An Equalities Assessment (Appendix 4) was completed as part of the PNA. In 2022, a stratified sample was commissioned from an external research company, but this was not repeated in 2025 due to resource constraints. A communications plan was implemented to reach a wide and diverse population.

In assessing geographical access, the Steering Group considered population size, new housing developments, and the location of other pharmacies within a 6-mile or 20-minute travel radius. For all localities access remains within national guidelines.

In response to comments about Cuckfield pharmacy, additional clarification will be added to the report: Cuckfield Chemist (FJG62, previously Dolphins) relocated from Haywards Heath back to Cuckfield after a 12-month temporary move. Pharmaceutical services resumed in Cuckfield in May 2025 following a short delay. As the PNA data reflects the position in January 2025, it should be noted that this change does not affect the overall conclusion of the PNA.

The recommendations in the report are included in the executive summary and have been updated to reflect health inequalities and disadvantaged communities and to reflect concerns expressed about the lower coverage of some locally commissioned services in Mid Sussex.

Comments on pharmacy technology are outside the scope of the PNA but will be shared with NHS commissioners.

Organisations Notified of the PNA Consultation

The following organisations we emailed directly and notified of the PNA consultation.

Contractors on the Pharmaceutical list and dispensing doctors list in West Sussex

Local Pharmaceutical Committee

Local Medical Committee

Sussex Health and Care ITS leads

NHS Trusts

- University Hospitals Sussex NHS Foundation Trust
- Surrey & Sussex Healthcare NHS Trust
- Sussex Community NHS Trust
- Queen Victoria Hospital NHS Foundation Trust
- Sussex Partnership NHS Foundation Trust

Healthwatch West Sussex

Neighbouring HWBs

- Surrey
- East Sussex
- Brighton & Hove
- Hampshire

West Sussex residents and public

West Sussex County Council engagement e-panel members

West Sussex Libraries