

[Follow-up inquiry on the contribution of community pharmacy to health services](#)

Evidence from Ash Wales – CP 5



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Dear Mr Rees

Re: Health and Social Care Committee inquiry following up the May 2012 report on the contribution of community pharmacy to health services

1. ASH Wales is the only public health charity in Wales whose work is exclusively dedicated to tackling the harm that tobacco causes to Welsh communities. Further information about our work can be found at <http://www.ashwales.org.uk/>.
2. We note the following from the 2012 report: 1) that the Committee did not feel that the contribution of community pharmacies to Welsh health services had been fully realised; 2) that the development of additional community pharmacy services was, at its best, patchy and inconsistent where it had been left to Local Health Board commissioning; and 3) that it was argued that services commissioned on a national level were more successfully embedded and better understood by the public.
3. The contribution of community pharmacies to Welsh health services has not been fully realised with regard to smoking cessation services. Smoking is the leading avoidable cause of death in Wales, with 5,450 deaths annually being attributable to smoking. The role of community pharmacies in reducing this number through the provision of smoking cessation services is potentially considerable.
4. In response to the original 2012 inquiry, ASH Wales recommended that a national enhanced community pharmacy smoking cessation service should be developed in line with the standard framework providing a clear service specification for service provided in each community pharmacy. However, there is still no nationally agreed definition for NHS smoking cessation services in Wales or a set of service standards that apply across providers.

5. Guidance from the NICE Public Health Guidance on Smoking Cessation, PH10¹, noted that “community pharmacies serve local communities and have the potential to reach and treat large numbers of people who use tobacco.” It has been suggested that community pharmacies are the most frequently visited healthcare outlets, and may provide opportunities to engage with groups who do not currently engage with Stop Smoking Wales services, for example under-35s or minority ethnic and disadvantaged groups.
6. In order to meet the ambitious target of reducing smoking prevalence to 16% from its current 23% by 2020 (Tobacco Control Action Plan for Wales), it is imperative that we use as many different channels as possible to increase the number of quitters. Whilst the success of quit rates from community pharmacy services may be lower than those using more intensive support services, they reach far larger numbers of the public.
7. In Scotland, community pharmacies provide access to smoking cessation support as part of the Public Health Service element of the community pharmacy contract. The Minimum Dataset² contains information that must be gathered for clients who access and set a quit date with the Scottish Smoking Cessation Service and pharmacies offering the national community pharmacy smoking cessation scheme. According to 2012 figures, the most recent complete set available, an estimated 11% of the smoking population made a quit attempt through smoking cessation services. Of these 75.2% of quit attempts were made using pharmacy services. 44,261 quits were self-reported at the four-week stage, with 28,992 of these through pharmacy services. Data from Scotland therefore suggests that using community pharmacies in Wales to offer a Level 3 smoking cessation service could have a marked impact upon the number of quit attempts being made.
8. Currently all pharmacies in Wales are expected to offer a basic Level 1 service, that is to offer opportunistic advice to customers that smoke with respect to the requirement that they promote a healthy lifestyle or to take part in national or local campaigns. Under Level 2, pharmacists largely undertake a support role through the supply of NRT for clients receiving intensive behavioural support from Stop Smoking Wales. Level 3, however, allows them to enter into an arrangement with the Local Health Board to provide an advanced smoking cessation service, which allows them to offer drop-in one-on-one support to customers who want to give up smoking. At the moment, not all Local Health Boards enter into such arrangements meaning that some local authority areas have no Level 3 provision at all (listed under point 9 below).
9. In Wales, the lack of a nationally funded and administered programme similar to Scotland means that only some Health Boards have chosen to negotiate arrangements for the provision of Level 3 services with community pharmacies. Betsi Cadwaladr UHB has the best coverage, following a successful pilot programme that was evaluated in 2009. According to the most recent community pharmacy annual report, a number of local authority areas, however, have no pharmacies offering Level 3 smoking cessation services at all. These are: Ceredigion, Pembrokeshire, Carmarthenshire, Swansea, Neath Port Talbot, the Vale of Glamorgan, Cardiff, Caerphilly and Monmouthshire.

¹NICE Public Health Guidance 10: Smoking Cessation Services (updated November 2013), available at <http://www.nice.org.uk/nicemedia/live/11925/39596/39596.pdf> (visited 30 April 2014)

² Information Services Division: NHS Smoking Cessation Service Statistics (Scotland) 1st January to 31st December 2012 (Published 28th May 2013): p4, p13. Available at: <http://www.isdscotland.org/Health-Topics/Public-Health/Publications/2013-05-28/2013-05-28-smoking-cessation-report.pdf> (accessed 29 April 2014)

10. Whilst final figures are not yet published, current indicators suggest it is likely that those LHBs, such as Betsi Cadwaladr and Cwm Taf, that have Level 3 pharmacy provision will be closer to achieving their Tier 1 targets than those LHBs where there is no, or only limited, Level 3 provision.
11. The lack of consistency of service provision also reduces the flexibility of service delivery for smoking cessation. In addition it could mean that it is difficult for people to know whether they can expect their local community pharmacy to offer smoking cessation services and at what level. In Scotland, on the other hand, there is a single national specification for smoking cessation and a clear national direction offered.
12. ASH Wales therefore recommends that there is a single national specification for smoking cessation through community pharmacies across Wales to offer Level 3 smoking cessation services to the public. Offering Level 3 services enhances flexibility of delivery for potential quitters who, for whatever reason, are unwilling or unable to access the more intensive support service offered by Stop Smoking Wales. The Betsi Cadwaladr pilot scheme found that offering Level 3 through community pharmacies in North Wales had no adverse impact on uptake of Stop Smoking Wales services.
13. We recognise that the standard of smoking cessation offered through community pharmacies needs to be consistent with the level of support provided by Stop Smoking Wales.
14. It must be recognised that smoking cessation is an “invest-to-save” activity that is cost-effective in terms of its overall impact on the delivery of healthcare services. Provision of smoking cessation through community pharmacies in Wales is currently patchy and inconsistent, which, if the Welsh Government’s 16% smoking prevalence target is to be met, is a channel that needs to be used more effectively to encourage and support quit attempts, as in Scotland.
15. With respect to smoking cessation, therefore, we would have to conclude that although there are now more pharmacies offering Level 3 smoking cessation support, the conclusions of the 2012 report highlighted in point 2 remain accurate and that the contribution of community pharmacies to Welsh health services in terms of smoking cessation have not been fully realised.

Yours faithfully



Elen de Lacy
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