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National Assembly for Wales / Cynulliad Cenedlaethol Cymru  
[Health and Social Care Committee](#) / [Y Pwyllgor Iechyd a Gofal Cymdeithasol](#)

[Public Health \(Wales\) Bill](#) / [Bil Iechyd y Cyhoedd \(Cymru\)](#)

Evidence from Royal Pharmaceutical Society – PHB 84 / Tystiolaeth gan Y  
Gymdeithas Fferyllol Frenhinol – PHB 84

Health and Social Care Committee  
Bae Caerdydd / Cardiff Bay  
Caerdydd / Cardiff  
CF99 1NA

20<sup>th</sup> August 2015

Dear Sir / Madam

Public Health (Wales) Bill consultation

The Royal Pharmaceutical Society (RPS) welcomes the opportunity to respond to the National Assembly for Wales' Health and Social Care Committee's calling for evidence on the general principles of the Public Health (Wales) Bill.

## **Part 2 – Tobacco and Nicotine Products**

In order not to undermine recent advances in public health policy regarding the use of tobacco products, the RPS advocates that e-cigarettes should be treated in exactly the same way as any other form of smoking, including the same age restrictions as applied to tobacco products and restrictions on their use in public spaces, advertising and displays.

The RPS agrees that the use of e-cigarettes should be banned in enclosed public and work places in Wales in order to avoid the normalisation of any form of smoking and to help prevent recruitment of non-smokers, particularly young people.

We agree that it should be an offence to sell or supply nicotine inhaling products to a person under the age of 18, unless supplied legitimately through a registered healthcare professional, in line with specific service requirements for smoking cessation. In the same respect we are supportive of the intent to make the proxy purchase of nicotine products for children under the age of 18 an offence. We believe that clear guidance will be necessary to support this act and bring it in line with equivalent current offences regarding alcohol and tobacco.

While it is currently difficult to ascertain with any certainty whether e-cigarettes are used as a gateway in or out of smoking, we would like to highlight that individuals under the age of 18 can currently be supported to give up smoking through the use of currently licensed nicotine replacement products including inhalation devices. Community pharmacy services are well placed to support young people in this respect.

The RPS recognises that licenced nicotine inhaling products have a benefit to adults and young people under the age of 18 who are seeking medical advice on giving up smoking, and could benefit from being supplied with these items under the guidance of an appropriate healthcare professional, including a pharamcist.

The RPS welcomes stronger regulation of e-cigarettes to ensure quality control and standardisation of products including carrying health warnings. However, we are concerned about the limited evidence and long-term studies into the health impact of e-cigarette use and would urge for further research to be taken to explore the impact on health from e-cigarettes and exposure to secondhand emissions.

The RPS believes that while e-cigarettes could have a potential role in harm reduction and in supporting smoking cessation in the short term, more high-quality peer-reviewed studies on safety and efficacy should be completed in order provide policy makers and health professionals with evidence-based assurance, particularly if they are to be included in the publicly funded smoking cessation programmes, once licensed by the MHRA

We welcome the proposal to establish a national register of retailers of tobacco and nicotine products and believe that a strengthened restricted premises order, with a national register, will aid in enforcing tobacco and nicotine offences as well as helping to protect vulnerable or impressionable young people from accessing and starting smoking. We would recommend that all registered pharmacies supplying nicotine products be automatically included in the register.

### **Part 3 – Special Procedures**

The RPS is supportive of the creation of a compulsory, national licencing system for practitioners of specified special procedures, we believe that this system will help to give people in Wales assurance of standards of care and mimimise any potential health risks. We are supportive of the suggestion that the premises in which the practitioner operates as well as the practitioner themselves should be approved in order to give assurance of cleanliness and appropriateness of the premises.

We believe that the procedures covered by this bill are appropriate as they all involve 'invasive' treatments where the skin is penetrated, this could in turn expose the patient to risk of infection if the procedures were not carried out appropriately. We also condone the provision which gives Welsh Ministers the power to amend the list of special procedures, but would advocate that this is done through a consultation process to allow input form interested parties.

## **Part 4 – Intimate Piercing**

The RPS is supportive of the need for age restrictions on intimate body piercing. We believe that it would be irresponsible to allow anyone under the age of 16 to undergo a procedure for an intimate piercing. All procedures for intimate piercing and special procedures should be regulated and auditable.

## **Part 5 – Pharmaceutical Services**

The RPS is supportive of the proposal for assessment of a population's pharmaceutical need. This assessment should lead to better planning and delivery of pharmacy services to address identified local health inequalities and needs.

Pharmaceutical needs assessment (PNA) should reflect a wider definition than pharmaceutical services which relates to supply of prescribed drugs and appliances. A wider definition of pharmaceutical needs should encompass the essential and advanced services of the pharmacy care contract and potential developments for public health services.

We strongly believe the PNA should take a patient centred approach to access of medicines and pharmaceutical care provided and also link in with the wider health needs of a community such as social care and care at home. The development of primary care clusters is a real opportunity to assess the needs of the population at a local level. The RPS believes that the appropriate use of the PNA should result in better managed and planned pharmaceutical services for patients and the public at a cluster level. PNA have the potential to enable primary care clusters and LHBs to reduce health inequalities, through planning for services that will address locally identified needs.

## **Part 6 – Provision of toilets**

The RPS is supportive of the proposal that each local authority in Wales will have a duty to create a strategy for improved provision of public toilets. Many patients have medical conditions that will increase the likelihood of them requiring timely access to public toilets. Medicines can also increase the need for accessing toilets. For example anecdotal evidence for patients who take diuretic tablets has highlighted that many feel housebound in the morning as access to public toilet is limited and if they are required to attend appointments or visit a town centre in the morning they will not take their "water tablet" that night. We therefore believe this is a patient safety issue that could be easily rectified through better access to public toilets.

The RPS would encourage the development of Welsh guidance to support this strategy in order to ensure a consistent approach across local authorities as well as

engaging with the local population in each LHB. The provision of disabled toilets and baby changing facilities should be explicit in each LHB's strategy.



I trust this information is helpful. Please do not hesitate to get in touch if you require any further information.

Yours sincerely

**Mrs Mair Davies**

**Chair, Welsh Pharmacy Board**

The Royal Pharmaceutical Society (RPS) is the professional body for pharmacists in Great Britain. We represent all sectors of pharmacy in Great Britain and we lead and support the development of the pharmacy profession including the advancement of science, practice, education and knowledge in pharmacy. In addition, we promote the profession's policies and views to a range of external stakeholders in a number of different forums.