

*These notes refer to the Health Act 2009 (c.21)
which received Royal Assent on 12 November 2009*

HEALTH ACT 2009

EXPLANATORY NOTES

BACKGROUND AND SUMMARY

Miscellaneous

Pharmaceutical services

48. The Department of Health published a pharmacy White Paper, *Pharmacy in England: Building on strengths – delivering the future*¹ on 3 April 2008. The White Paper set out the Government's programme for a reformed pharmaceutical service. A series of consultation events were held in May 2008 to consider the proposals in more detail². The White Paper also provided the Government's response to the *Review of NHS pharmaceutical contractual arrangements*³ commissioned in 2007 and conducted by Anne Galbraith. In addition, the White Paper took account of recommendations of the All Party Pharmacy Group's report, *The Future of Pharmacy*⁴ published in June 2007.
49. The White Paper was developed to align closely with the NHS Next Stage Review and the development of a new primary and community care strategy, *Our Vision for primary and community care*,⁵ which was published on 3 July 2008.
50. The White Paper promised consultation on a number of proposals for structural change, including any necessary revisions to primary legislation. That consultation, *Pharmacy in England: Building on strengths – delivering the future – proposals for legislative change*,⁶ began on 27 August 2008 and ended on 20 November 2008. A series of national listening events were held in October 2008 in support and a report of these events, together with the Department's report of the consultation concerning the primary legislation proposals in the Bill for this Act, was published on 16 January 2009.
51. The purpose of the pharmacy provisions contained in the Act is threefold. First, the provisions concerning market entry replace the previous "control of entry" test which was applicable to all pharmaceutical contractors seeking to enter onto a pharmaceutical list. The new test requires PCTs first to develop and to publish statements of pharmaceutical needs and then to use these to determine applications. The previous test referred to the adequacy of the pharmaceutical services in the neighbourhood in which the premises were to be located.

1 Department of Health (2008). *Pharmacy in England: Building on strengths - delivering the future*, Cm 734. Department of Health, London.

Available at: http://www.dh.gov.uk/en/publicationsandstatistics/publications/publicationspolicyandguidance/dh_083815

2 A summary report of those is now available at <http://www.dh.gov.uk/en/Publicationsandstatistics/index.htm>

3 Anne Galbraith (2007). *Review of NHS pharmaceutical contractual arrangements – Report by Anne Galbraith*

4 All-Party Pharmacy Group (2007). *The Future of Pharmacy- Report of the APPG Inquiry*.

Available at: <http://www.appg.org.uk/home.htm>

5 Department of Health (2008). *Our Vision for primary and community care*, Department of Health, London.

Available at: http://www.dh.gov.uk/en/Publicationsandstatistics/Publications/PublicationsPolicyAndGuidance/DH_085937

6 Department of Health (2008). *Pharmacy in England: Building on strengths – delivering the future – proposals for legislative change*. Department of Health, London.

Available at: http://www.dh.gov.uk/en/consultations/Liveconsultations/DH_087324

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52. Second, the market exit provisions enable PCTs to be given new powers to take action where there are concerns about the quality or performance of services provided by pharmacy contractors.
53. Third, the pharmacy provisions enable PCTs themselves to provide local pharmaceutical services (LPS) in certain circumstances.