Welsh Government – Responding to the consultation

Listening to you: Your health matters

Public Health White Paper – Consultation Responses

We want your views on our proposals in the Public Health White Paper.

Your views are important. We believe the new legislation will make a difference to people’s lives. This White Paper is open for public consultation and we welcome your comments. The consultation will close on 24 June 2014.

This form provides all the consultation questions included in the White Paper. To help us record and analyse the responses, please structure your comments around these questions. You do not need to comment on all questions nor do you need to use this form to respond to the consultation. You are welcome to submit your response in a format that suits you.

The proposals are presented under a number of themes; you do not need to answer every question on every theme, only those that you wish to comment upon. The list below may be helpful for ease of navigation:

Chapter 2: Tobacco and electronic cigarettes
- Tobacco Retailers’ Register Q1 – Q5
- Electronic Cigarettes Q6 – Q11
- Smoke-free Open Spaces Q12
- Internet sales of tobacco Q13 - Q14

Chapter 3: Alcohol
- Minimum Unit Pricing Q15 – Q20

Chapter 4: Obesity
- Nutritional Standards Q21 – Q23

Chapter 5: Building Community Assets for Health
- Better planning and delivery of public health services through community pharmacy Q24 – Q32
- Toilets for public use Q33 – Q35

Chapter 6: Regulation for Health
- National Special Procedures Register Q36 – Q45

Chapter 7: Next Steps Q46 - Q47

The Welsh Government will run a series of engagement events across Wales on the White Paper during the consultation period. Details of these events and how to attend will be made available on the consultation webpage when available.

Please submit your comments to PHBill@wales.gsi.gov.uk by 24 June 2014. If you have any queries on this consultation, please email the address above.
Data Protection

Any response you send us will be seen in full by Welsh Government staff dealing with the issues which this consultation is about. It may also be seen by other Welsh Government staff to help them plan future consultations.

The Welsh Government intends to publish a summary of the responses to this document. We may also publish responses in full. Normally, the name and address (or part of the address) of the person or organisation who sent the response are published with the response. This helps to show that the consultation was carried out properly. If you do not want your name or address published, please tick the box below. We will then blank them out.

Names or addresses we blank out might still get published later, though we do not think this would happen very often. The Freedom of Information Act 2000 allows the public to ask to see information held by many public bodies, including the Welsh Government. This includes information which has not been published. However, the law also allows us to withhold information in some circumstances. If anyone asks to see information we have withheld, we will have to decide whether to release it or not. If someone has asked for their name and address not to be published, that is an important fact we would take into account. However, there might sometimes be important reasons why we would have to reveal someone’s name and address, even though they have asked for them not to be published. We would get in touch with the person and ask their views before we finally decided to reveal the information.

If you would prefer that your details are not published, please tick here □

<table>
<thead>
<tr>
<th>Name</th>
<th>Jocelyn Parkes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Organisation</td>
<td>Royal pharmaceutical Society</td>
</tr>
<tr>
<td>Address</td>
<td>2 Ash Tree Court, Woodys Close, Cardiff Gate Business Park, Cardiff CF238RW</td>
</tr>
<tr>
<td>E-mail address</td>
<td><a href="mailto:Jocelyn.parkes@rpharms.com">Jocelyn.parkes@rpharms.com</a></td>
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</tbody>
</table>

Please select one of the following:

- Academic/Research bodies □
- NHS Organisations □
- Health related organisations □
- Local Government □
- Advisory Bodies □
- Third Sector Organisations □
- Representative Groups □
- Private sector organisations □
- Private individuals □
- Other (groups not listed above) □
Chapter 2: Tobacco and electronic cigarettes

Tobacco Retailers’ Register

**Question 1**
Do you agree with the proposal to create a tobacco retailers’ register for Wales under the terms outlined above?

Yes ☒  No ☐

*Please provide comment:*
The Royal Pharmaceutical Society (RPS) are supportive of this measure to help restrict access to tobacco.

**Question 2**
Do you consider that the creation of such a register will (i) assist in attempts to reduce under age sales of tobacco products, and (ii) assist in the enforcement of the display ban?

*i) assist in the attempts to reduce under age sales*

Yes ☒  No ☐

*ii) assist in the enforcement of the display ban*

Yes ☒  No ☐

*Please provide comment:*
The RPS believe the introduction of a tobacco retailers register will underpin the previous measures to reduce sales of tobacco products to under age people.

**Question 3**
Do you consider the proposed fee structure to be reasonable? Please suggest an alternative if not.

Yes ☐  No ☐
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**Question 4**
Do you consider the proposed enforcement and penalty arrangements for the tobacco retailers’ register to be appropriate? If not, could you please provide us with your suggestions?

| Yes ☐ | No ☐ |

Please provide comment:

No comment

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**Question 5**
Are there any other features of a tobacco retailers’ register that we should consider?

| Yes ☐ | No ☐ |

Please provide comment:

No comment
Electronic Cigarettes

**Question 6**
Do you consider that the use of e-cigarettes in enclosed and substantially enclosed public places (including work places) undermines and makes more difficult the enforcement of the current ban on smoking in such places?

- Yes [x]  
- No [ ]

*Please provide comment:*
The RPS is supportive of a ban on the use of e-cigarettes in enclosed and substantially enclosed public places, as we believe their use normalises smoking and undermines the Welsh Government's policy for a smoke free Wales.

We have attached our policy and briefing statements to support our position in this area and provide responses to the questions in this section.

However we would ask that consideration be given to future proofing this legislation in respect to technological developments and licensing developments for e cigarettes. The e cigarette market is a rapidly developing field, with many novel nicotine devices in development and likely to come to market in the relatively near future. These devices may not be called e cigarettes but look and fulfil the same function. We believe that legislation therefore should be cognisant of these developments in the e cigarette market.

Additionally it is apparent that companies intending to apply to the MHRA for a licence to market their products as a smoking cessation aid. It is thus likely that by this time next year, health professionals will be able to prescribe, and patients will be asking them for on prescriptions. This may place health professionals in a difficult position with a clash of Welsh Government help policies.

**Question 7**
Do you consider that the widespread use of e-cigarettes in enclosed and substantially enclosed public places (including work places) normalises the act of smoking and acts as a gateway to the use of conventional tobacco products?

- Yes [x]  
- No [ ]

*Please provide comment:*
As above
Question 8
Do you have any evidence or practical experiences to support your views in relation to questions 6 and 7? If so we would be grateful to receive such evidence or receive details of such experiences.

Yes □ 
No □

Please provide comment:
As above

Question 9
Do you consider legislation would assist in the enforcement of the existing Smoke-Free requirements and reinforce the message that smoking is no longer the norm? Please provide evidence to support your answer, if available.

Yes □
No □

Please provide comment:
As above

Question 10
In considering such a proposal, should the ban on the use of e-cigarettes in enclosed and substantially enclosed public and work places be subject to the same exemptions and penalties as conventional tobacco products?

Yes □ X
No □
Please provide comment:
The RPS believes that E cigarettes should be treated as conventional tobacco products as they can normalise smoking in public areas and lead to recruitment of non smokers, particularly young people.

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**Question 11**

What other measures, if any, should the Welsh Government be considering in relation to e-cigarettes?

Please provide comment:
The RPS welcomes stronger regulation of e-cigarettes to ensure quality control and standardisation of products, including carrying health warnings. E-cigarettes are currently marketed in the UK under general product safety regulations which do not impose any standards of quality, or efficacy, and which controls advertising only through voluntary codes of practice (currently under review). Breaches are presently dealt with reactively, in response to complaints, rather than proactively, through pre-screening.

Additionally, we are concerned about the lack of longer-term studies into the health impact of e-cigarette use and would urge further research also into impact of exposure to secondhand emissions.

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**Smoke-free Open Spaces**

**Question 12**

Do you consider that voluntary smoking bans in hospital grounds, school grounds and children’s playgrounds are sufficient, or are these areas where Welsh Ministers should consider legislating? Can you provide any evidence for your view?

<table>
<thead>
<tr>
<th>Yes, voluntary bans are sufficient</th>
<th>No, Welsh ministers should consider legislating</th>
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<tbody>
<tr>
<td>□</td>
<td>x □</td>
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</table>
Please provide comment:

The RPS would support legislative changes to enforce smoking bans in hospital grounds and areas where children can demonstrably see smoking as a normal activity among adults.

Welsh Hospitals should be considered as a show case for Welsh Government public health policies and walking past smokers at an entrance to a hospital undermines this initiative.

Internet sales of tobacco

Question 13
Do you consider there is a problem with persons under 18 receiving delivery of tobacco products which have been ordered online by an adult? Please provide evidence to support your response, if available.

Yes □ No □

Please provide comment:

The RPS is unaware of the level of this activity and therefore cannot comment.

Question 14
Is this an area where the National Assembly for Wales should consider strengthening the existing legislative framework to make it an offence to deliver tobacco products to a person that is under the legal age of tobacco products (which is currently 18)?

Yes □ No □

Please provide comment:

The RPS is unaware of the level of this activity and therefore cannot comment.
Chapter 3: Alcohol

Minimum Unit Pricing

**Question 15**
Given the evidence base and public health considerations, do you agree that the Welsh Government should introduce a Minimum Unit Price for alcohol?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</table>

_Please provide comment:_
The RPS is supportive of a packet of measures that will aid the public health policy of reducing alcohol consumption and therefore alcohol related illness. These measures must include supporting evidence for the introduction of a Minimum Unit Price for alcohol (MUP), and educational measures that will change behaviours and attitudes to alcohol.

**Question 16**
Do you agree that a level of 50 pence per unit is appropriate? If not, what level do you think would be appropriate?

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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_Please provide comment:_
The RPS believes it is the responsibility of Government to review the evidence that will enable a figure to be set for the MUP for alcohol. However it is important that any revenue raised through establishing a MPU is reinvested into health, health promotion, education and alcohol awareness.

**Question 17**
Do you agree that enforcing Minimum Unit Pricing for alcohol would support the reduction in alcohol related harms? Please provide evidence to support your answer, if available.

<table>
<thead>
<tr>
<th>Yes</th>
<th>No</th>
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</table>
Question 18
Do you think any level of Minimum Unit Pricing set by the Welsh Government should be reviewed and adjusted over time? Please provide evidence to support your answer, if available.

Yes ☐  No ☐

Please provide comment:

The RPS believes the Welsh Government should commit to a date to review and adjust this policy to ensure it has delivered its intended aim of reduction in alcohol consumption.

Question 19
As the Welsh Government cannot legislate on the licensing of the sale and supply of alcohol, what enforcement and/or penalty arrangements do you think should be in place to introduce Minimum Unit Pricing for alcohol in Wales?

Please provide comment:

No comment

Question 20
Do you think there are other measures that should be pursued in order to reduce the harms associated with excessive alcohol consumption?

Yes x ☐  No ☐
Please provide comment:

The RPS is supportive of a packet of measures that will aid the public health policy of reducing alcohol consumption and therefore alcohol related illness. These measures must include supporting evidence for the introduction of a Minimum Unit Price for alcohol (MUP), and educational measures that will change behaviours and attitudes to alcohol.
Chapter 4: Obesity

Nutritional Standards

Question 21
Do you agree that nutritional standards should be introduced in the settings we are proposing, that is, pre school settings and care homes?

Yes [ ]
No [ ]

Please provide comment:
The RPS is supportive of the introduction of food and drink nutritional standards as part of a package of measures to introduce healthy living at a young age, and for the most vulnerable in society.

These standards must be based on quality and standards and not on affordability of the setting proving the food.

Question 22
Do you think there are any other public sector settings that should be considered in relation to mandatory nutritional standards?

Yes [ ]
No [ ]

Please provide comment:
No comment

Question 23
Do you think there are other practical steps we could take to contribute to this issue?

Yes [ ]
No [ ]
Please provide comment:
The RPS would suggest that the Welsh Government undertake an educational campaign of the eating of real, in-season food.
Chapter 5: Building community assets for health

Better planning and delivery of public health services through community pharmacy

Question 24
Do you agree community pharmacies can play a stronger role in promoting and protecting the health of individuals, families and local communities as part of a network of local health care services?

Yes ☐
No ☐

Please provide comment:
See attached paper Public Health: Improving outcomes through pharmacies

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Question 25
Do you agree with the proposal to require Local Health Boards to complete periodically an assessment of the pharmaceutical needs of its population?

Yes ☐
No ☐

Please provide comment:
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 reflect and respond to 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 contract and potential developments for public health services.

This assessment must 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.
Question 26

In respect of question 25 what are your views on such assessments being completed as a discrete part of their assessment of local health and wellbeing needs?

Please provide comment:

The RPS believes that pharmaceutical needs are one element of local health and well being needs, the assessments may be separate but they should be used to gain a picture of a local area and then plan the services that support the health needs of that locality. As these assessments are interlinked we believe it would be advisable that the PNA is completed at the same time as the local health and well-being (HWB) needs assessment.

Additionally it is important that PNA are of such a robust high quality that are conducted in a consistent manner across HB to allow for planning pharmaceutical services across Health Boards and County boundaries.

The RPS believes that PNA of the population is an important step towards integrating pharmaceutical care/services into the planning cycle/processes of Health Boards

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Question 27

Please comment on what information you think Local Health Boards should incorporate in its pharmaceutical needs assessment and the frequency with which such assessments should be updated.

Please provide comment:

The PNA should describe and include current pharmacy/pharmaceutical service provision and evaluate whether current services meet the pharmaceutical needs of the population. We would suggest that the following elements are included:

- Location of community pharmacies and dispensing doctors; controlled localities
- Other providers e.g. appliance contractors, mail order pharmacies, out-of-hours, hospital pharmacy
- Location of outlets selling GSL medicines
- Information about pharmacy services in different Health Board (HB) localities, particularly enhanced services
- Availability of a private consultation area at the pharmacy
- Factors/patient groups known to have a significantly increased need for pharmaceutical care
- Pharmacy opening hours, contracted/actual, including lunchtimes, evenings, Saturday and Sunday.
Identification of pharmaceutical issues raised by health professionals/managers/patients

As a minimum, the PNA should be updated at the same time as the HWB needs assessment, which is currently every three years.

Also HBs should be provided with clear guidance about the pharmaceutical content required in the integrated PNA/HWB needs assessment.

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**Question 28**

In respect of question 27, do you think that using the Local Health Board's assessment of pharmaceutical needs will be sufficient for this or are there other factors that need to be considered?

Yes □ No □X

**Please provide comment:**

The RPS would suggest that this legislation be used to incorporate the pharmaceutical needs/requirements of cared-for individuals by social services, including ‘at risk’ children/adults, and older people. This vulnerable group should be included as part of the HB’s HWB assessment. Additionally it should include the pharmaceutical needs of any prison population a health board serves.

The RPS would like assurances that PNA will be conducted in a manner to facilitate an assessment that is robust and of high quality but offer a consistent approach across HB. We would suggest the use templates with supporting guidance produced by Welsh Government will help achieve this.

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**Question 29**

Do you consider that it is appropriate for applications to provide pharmaceutical services to be determined on the basis of the contribution that all the services they propose might make to address local health needs?

Yes x□ No □

**Please provide comment:**

The RPS believes that PNA should be used as a market entry and where necessary exit tool. However before PNAs can be used for this purpose, they need to have been tried and tested for robustness.

The RPS has a number of concerns around the implementation of PNAs in practice which would need to be addressed before we could support this proposal (see response to q 31)
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Additionally as the NHS changes, opportunities for the wider contribution community pharmacy can make beyond supply of medicines will become increasingly important.

Care will need to be taken in considering applications based on PNA alone, as HB may not subsequently commission those services and applicants may not subsequently be able to provide the service.

**Question 30**

Do you agree with the proposal to allow Local Health Boards to invite community pharmacies in their area to provide specified services to meet identified pharmaceutical needs and, where those pharmacies are unable to do so adequately, invite additional pharmacies to become established in order to provide pharmaceutical services? If you disagree please explain your reasons.

<table>
<thead>
<tr>
<th>Yes ❑</th>
<th>No □</th>
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**Please provide comment:**

The RPS believes that the appropriate use of a PNA should result in better managed and planned pharmaceutical services for patients and the public. PNA will enable LHB to reduce health inequalities, through planning for services that will address their local need.

**Question 31**

Do you agree that where pharmacies are not adequately providing services, a range of measures, which could include sanctions against pharmacies for breaches of terms and conditions of service, should be available to Local Health Boards to support improving quality and consistency? What other measures should be available to Local Health Boards?

<table>
<thead>
<tr>
<th>Yes ❑</th>
<th>No x □</th>
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**Please provide comment:**

The RPS believes that PNA could be used for this function; however the term adequately providing services would need greater clarification before we could fully support this approach. There is also a need to clarify whether the performance breach is a professional performance issue or a contractual performance issue and this would involve close working with the General Pharmaceutical Council and their inspection processes.

The RPS believes that before PNAs can be used as a means of penalising pharmacies for breach of service, they need to have been tried and tested for robustness.
The RPS has a number of concerns around the implementation of PNAs in practice which would need to be addressed before we could support this proposal namely:

- There is no expertise at present around the development of PNAs at a local level, and there would need to be shared learning in developing the skills and expertise required to do this in a robust, consistent manner across the Welsh health Boards.
- The experience from colleagues in England has been that currently, the content and value of PNAs is variable as is the process that is undertaken to produce the PNA which results in variability of pharmaceutical services and access to these in different localities leading to an increase in appeals. There seems to be little evidence of a change in service provision to reflect local need or a greater integration of pharmacy services into wider care pathways.
- All forms of pharmacy should be considered in the PNA application including the introduction of vending machines and introduction of collection supporting pharmacies not in the immediate locality.
- In many areas there are changes to pharmaceutical service provision throughout the lifetime of a PNA with new pharmacies opening, relocations or new services being provided as, for example, new homes are built which impact on the local neighbourhood. Supplementary statements to the PNAs should be produced when such changes occur and this requirement will become even more significant when PNAs are used to assess current need applications.
- To ensure consistency and hence reduce the number of appeals we would recommend that PNA are taken forward on an all Wales basis, with the use of an all Wales template, amended for local interpretation. Additionally where expertise exists in interpreting and using needs assessment this should be accessible across Wales.

**Question 32**

Are there any other specific areas where this approach could be adopted in order to improve public health at a community level?

| Yes □ | No □ |

*Please provide comment:*

The RPS would suggest that consideration be given to inclusion of public awareness campaign and screening services.

**Toilets for public use**

**Question 33**

Should a duty be placed on local authorities to develop a strategy for the provision of and access to toilets for public use in their area?
The RPS is supportive of this proposal; community pharmacies serve patients who often take medication that will require timely access to public toilets. Anecdotal evidence for patients who take diuretic tablets has highlighted that many feel house bound 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.

Question 34
If a duty were to be put in place, should this duty be addressed through the single integrated planning process?

Yes □ No □

Please provide comment

No comment

Question 35
Are there any other impacts in relation to this proposal on which you would like to comment?

Yes □ No □

Please provide comment:
Chapter 6: Regulation for health

A National Special Procedures Register

Question 36
Do you feel that the current information, regulation, and enforcement in relation to cosmetic piercing, tattooing, semi-permanent skin colouring, acupuncture and electrolysis protects the public effectively?

Yes □ No □

Please provide comment

No comment

Question 37
Do you have any evidence of harm caused by cosmetic piercing procedures (and in particular intimate cosmetic piercing of young people) under the Current system? If so, what?

Yes □ No □

Please provide comment

No comment

Question 38
Do you think there should be a National Special Procedures Register? If no, why not?

Yes x □ No □
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*Please provide comment*

The RPS would support this measure as a public safety initiative.

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**Question 39**

Do you think any other procedures should be included on the Register? If yes, what other procedures?

Yes [ ]

No [ ]

*Please provide comment*

No comment

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**Question 40**

Do you think the Welsh Government should be able to amend the Register in the future to include or remove procedures? If not, why not?

Yes [ ]

No [ ]

*Please provide comment*

No comment

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**Question 41**

Should the registration fee be set locally or nationally?

Locally [ ]

Nationally [ ]
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*Please provide comment*
No comment

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**Question 42**
How frequently should practitioners and businesses need to re-register?

*Frequency* □

*Please provide comment*
No comment

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**Question 43**
Do you agree that registration should include a ‘fit and proper persons’ test? If yes, what criteria do you feel should be part of this test?

*Yes* □  *No* □

*Please provide comment:*
No comment

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**Question 44**
Do you agree with the minimum requirements set out for pre and post consultation? If not, please provide details of the suggested content

*Yes* □  *No* □
Please provide comment:
No comment

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**Question 45**
Do you agree that local authorities should be responsible for administering and enforcing these proposals? If not, who should?

| Yes ☐ | No ☐ |

*Please provide comment:*
No comment
Chapter 7: Next steps

Question 46
We want to ensure that a Public Health Bill is reflective of the needs of citizens in Wales. We would appreciate any views in relation to any of the proposals in this White Paper that may have an impact on a) human rights; b) Welsh language; or c) the protected characteristics as prescribed within the Equality Act 2010. These characteristics include gender; age; religion; race; sexual orientation; transgender; marriage or Civil Partnership; Pregnancy and Maternity; and disability.

Please provide comment:

Question 47
Do you have any other comments or useful information in relation to any of the proposals in this White Paper?

Yes □ No □

Please provide comment: