

NHS Greater Glasgow & Clyde	Paper No. 26/09
Meeting:	NHSGGC Board Meeting
Purpose of Paper:	For Noting
Classification:	Board Official
Name of Reporting Committee:	Pharmacy Practice Committee
Date of Reporting Committee:	Wednesday 3rd December 2025
Committee Chairperson:	Margaret Kerr

Paper Title:

Application for Inclusion in the Board's Pharmaceutical List – CASE No: PPC/INCL01/2025
– Kate Stewart Limited, 5 Dalgety Drive, Bishopton, PA7 5LN

Recommendation:

That the board note the decision taken at the recent meeting of the Pharmacy Practice Committee as set out below.

11.	Summary of Consultation Analysis Report (CAR)
11.1	Introduction
11.2	NHS Greater Glasgow & Clyde undertook a joint consultation exercise with Kate Stewart Ltd regarding the application for a new pharmacy at 5 Dalgety Drive, Bishopton PA7 5LN
11.3	The purpose of the consultation was to seek views of local people who may be affected by this or use the pharmacy at its proposed new location. The consultation also aimed to gauge local opinion on whether people felt access to pharmacy services in the area was adequate.
11.4	Method of Engagement to Undertake Consultation
11.5	The consultation was conducted by placing an advertisement in the Paisley Daily Express Newspaper as well as being posted on NHS Greater Glasgow & Clyde's Social Media Programme. Stakeholders were also notified by NHS Greater Glasgow & Clyde and the questionnaire was available on the Board website. Respondents could respond electronically or request a hard copy.

11.6	The Consultation Period lasted for 90 working days through to 3 rd July 2025.			
11.7	Summary of Questions and Analysis of Responses			
11.8	Questions covered: the neighbourhood; location of the proposed pharmacy; opening times; services to be provided; perceived gaps/deficiencies in existing services; wider impact; impact on other NHS services and optional questions on respondents' addresses and circumstances.			
11.9	The Committee in considering the evidence submitted during the period of consultation, presented during the hearing and recalling observations from site visits, first had to decide the question of the neighbourhood in which the premises, to which the application related, were located.			
11.10	Questions covered: the neighbourhood; location of the proposed pharmacy; opening times; services to be provided; perceived gaps/deficiencies in existing services; wider impact; impact on other NHS services and optional questions on respondents' addresses and circumstances.			
	Questions	Positive- Yes / %	Negative – No / %	Don't Know / %
	Do you think the area in the above map describes the 'neighbourhood' to which this application relates?	631 / 98%	12 / 2%	
	Do you live within the above neighbourhood?	605 / 94%	36 / 6%	
	Do you believe existing pharmaceutical services provided in/to the defined neighbourhood are adequate?	131 / 21%	504 / 79%	
	What do you think about the Intended Applicant's proposed opening hours?	Just Right	Too Short	Too Long
	Monday – Friday 09:00 – 17:30	446	191	0
	Saturday 09:00 – 13:00	500	136	0
	Sunday - Closed	491	121	3
	What are your views on the provision of the pharmaceutical services proposed by the Intended Applicant? – These responses were written.			

	Do you think the Intended Applicant's proposed Pharmacy will impact (either negatively or positively) other NHS funded services like GPs, Community Nursing, other Pharmacies, Dentists, Optometrists and Social Services?	385 / 62%	240 / 38%
	Do you support the application for a new pharmacy at 5 Dalgety Drive, Bishopton, PA7 5LN	608 / 96%	27 / 4%
	How did you become aware of this consultation?	Advert – Paisley Daily Express 22 / 3%	NHSGG&C Website 76 / 12%
11.11	In total 645 responses were received. All submissions were made and received within the required timescale, thus all were included in the Consultation Analysis Report. Of these, 629 were submitted electronically through Webropol and 16 were submitted via post or email. In addition, the Applicant requested 120 questionnaires in paper format.		
11.12	Of the 645 responses, 630 were submitted by individuals and 4 were submitted from a group or organisation. 11 did not respond to this question.		
12.	Decision		
12.1	The Committee in considering the evidence submitted during the period of consultation, presented during the hearing and recalling observations from site visits, first had to decide the question of the neighbourhood in which the premises, to which the application related, were located.		
12.2	Neighbourhood		
12.3	Discussion		
12.4	The Committee considered that the application had clearly defined the neighbourhood as being the PA7 postcode area. It has many natural and physical boundaries, including major roads, a railway, and distinctive new housing.		
12.5	The Committee noted that none of the Interested Parties had included a neighbourhood in their written representation and that Ms Kilbride had struggled to provide a firm definition during the hearing.		

12.6	As such the Committee considered the Applicant's definition in their deliberations.
12.7	They broadly agreed with three of the Applicant's boundaries, these being the South, the North and the West.
12.8	The River Clyde to the North was a significant natural boundary, however the Committee felt that the Applicant's East boundary (A898, M898 and M8) following the River to encroached into the distinct area known as Erskine. They didn't feel that there would be any debate where residents of Erskine considered they came from.
12.9	The Committee felt that the construction of the new junction on the M8 into Bishopton gave a clear indication that Bishopton was a neighbourhood in its own right. They considered that it was unusual for the Roads department to take such a significant step of constructing a totally new junction off an already established motorway.
12.10	The Committee defined the neighbourhood with boundaries as follows:
12.11	<p>North –the River Clyde</p> <p>East – the M8, following its length south to junction 29A Bishopton</p> <p>South – B790 to Houston Road to intersection with Turningshaw Road</p> <p>West – Barochan Road/Barochan Burn to B789 to Old Greenock Road to A8 to M8.</p>
12.12	The Committee noted that the neighbourhood covered the area commonly known as Bishopton. This included the community of the growing Dargavel development.
12.13	The community recognised that there had been much debate over whether the Dargavel development and the established area of Bishopton were two separate neighbourhoods. The Committee had noted in their individual site visits that the tenure and type of housing differed between the two communities and there appeared to be a difference in demographics however it was clear that residents within Dargavel currently needed to travel outwith their development to access services such as licensed premises, the scout hall, church buildings, the train station and fast food outlets.
12.14	The Committee were conscious that at some point in the future, the Dargavel development might expand to such an extent that it would become separate from Bishopton however as the Community Council and the Applicant had stated and the Committee noted from their site visits, the community currently identified as the single entity of Bishopton.

12.15	The Committee noted that 96% of the respondents in the CAR agreed with the Applicant's defined neighbourhood.
12.16	Adequacy of existing provision of pharmaceutical services and necessity or desirability
12.17	Having reached a conclusion as to neighbourhood, the Committee was then required to consider the adequacy of pharmaceutical services to that neighbourhood and, if the Committee deemed them inadequate, whether the granting of the application was necessary or desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood.
12.18	Given the high response rate to the Joint Consultation (645 replies), the Committee gave significant weight to the CAR as a representative view of residents in the proposed neighbourhood concerning the proposed new pharmacy as 94.4% of respondents to the CAR (Q3) lived within the neighbourhood.
12.19	The Committee noted that 79.4% of the respondents to the CAR agreed that the current services were inadequate and 94% supported the proposal to open a new pharmacy at the proposed premises.
12.20	It was clear to the Committee that there was significant tension both from the community and the Applicant in describing current services as inadequate. The Applicant provided all core and many additional services from the current premises in Bishopton. She had undertaken major developments to the fabric of the pharmacy to provide additional space, purchasing the hairdressers next door to the premises and expanding. Despite all of her efforts the demand for services from the expanded population had outpaced the current pharmacy's capacity.
12.21	The Committee heard how the Applicant had been an Interested Party in the previous application in 2021 where she had described the services in Bishopton at that time as adequate. They had heard the Applicant explain that at that point during COVID she had been confident of her ability to meet the new demands which might be placed on the pharmacy from the increasing population in Dargavel. She had contended that she had risen to this challenge by introducing double pharmacist cover, introducing a checking technician to her staff, making changes to the pharmacy itself and introducing new services. She averred however that the effect of COVID could not have been foreseen at that time, nor could it have been foreseen that the demand for community pharmacy services would not return to pre-COVID levels. This along with the continued increase in population meant that the current pharmacy could not cope either in space within the pharmacy or in demand for services.

12.22	The Committee noted the Applicant's example of her provision of the Pharmacy First Plus Service which was designed to direct patients to the pharmacy first and alleviate pressure on GP practices. Bishopton Pharmacy offered this service, but was curtailed in the range of conditions it could cover as introducing additional conditions would increase the demand which the pharmacy could not meet in its current site.
12.23	The Committee noted that Rowlands letter of objection had challenged that core and additional pharmacy services were already being provided to the neighbourhood and that the new pharmacy would not offer any different services. The Committee were aware from the Applicant's presentation, supported by the responses from the CAR and the Community Council, that although the services themselves were available they were reliant on goodwill and additional hours, which is not sustainable for the future population
12.24	The Committee were mindful that immediately post-COVID there had been a slowing of housebuilding in the area and the future of the development had been unclear. This had now picked up and it was clear from their site visits that construction had restarted and was progressing, with new areas of development visible at several sites in Dargavel.
12.25	This could result in a further increase in the list size of the GP practice which had already grown significantly in the last five years. This would place added pressure on existing pharmacy services.
12.26	The current provision of pharmaceutical services in the neighbourhood is under significant pressure due to increased population, ongoing development, and capacity constraints at the existing pharmacy. The evidence demonstrates that the existing pharmacy is operating at maximum capacity and cannot safely expand further to meet the growing demand.
12.27	The Committee was mindful that determination of adequacy would be a question applied to the facts and evidence revealed and established, and its conclusion reached would be after exercising appropriate judgement. It gave careful consideration to the evidence it had received from the Applicant, the CAR responses, the Interested Parties, the community bodies, its PPC member visits to the site; and it heard expert advice from contractor and non-contractor pharmacist members of the panel about the issues identified in the hearing and their knowledge of equivalent service delivery matters elsewhere in Scotland.
12.28	The PPC also referred to the NHSGGC PCSP. It clarifies that where there may be any inadequacies identified, the Board should look to existing pharmacies in the area to address that inadequacy in the first

	instance. The PCSP does not identify any areas of inadequacy in the GGC area.
13.	Conclusion
13.1	Following the withdrawal of the Contractor and Non-Contractor Pharmacists in accordance with the procedure on applications contained within Paragraph 6, Schedule 4 of the National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009, as amended, The Committee concludes that existing provision of pharmaceutical services to the defined neighbourhood is inadequate.
13.2	The inadequacy existed in terms of the existing pharmacy's ability to fully engage with and provide additional services and move away from a dispensing supply function to a more service based function. The limitations of the existing premises and the pressure put on the existing pharmacy by the increasing population led the Committee to conclude that the legal test had been met. This was further evidenced by the lack of objection from some of the Interested Parties.
13.3	Having ascertained that pharmacy services to the defined neighbourhood were inadequate due to the reasons provided above, consideration was then given to whether the proposed application was necessary or desirable to secure adequate provision of pharmaceutical services for the defined neighbourhood.
13.4	The Committee did not consider that granting of the application was necessary. The Applicant and others currently provided services in and to the neighbourhood. The Committee noted the Well Pharmacy representative's confirmation that their pharmacy in Erskine provided services to less than 100 patients from the Bishopton area and the Applicant's assertion that Bishopton Pharmacy currently dispensed over 90% of the prescriptions generated from the GP practice in Bishopton. As such granting of the application was not necessary.
13.5	The Committee noted that the continuing change in population would place additional pressure on existing services. While the population of the Dargavel development could be seen as being young, healthy and mobile, this would not always be the case. In any case, this type of population accessed additional pharmaceutical services like Pharmacy First in greater numbers than others. This was evidenced by the Applicant seeing more than 4 times as many children than the GGC average. In addition, the population of the established part of Bishopton would age into a population who would place a higher demand on pharmaceuticals services.
13.6	Taking account of all the representations made, and the information revealed by the CAR and submitted orally and in writing the Committee

	determined that it was desirable to approve the application by Kate Stewart Ltd for admission to the Pharmaceutical List.
13.7	The Hearing closed at 13:50 hrs