

NOT YET ENDORSED AS A CORRECT RECORD

Pharmacy Practices Committee (05)

Minutes of a Meeting held on

Thursday 29th March 2007

Seminar Room, Glasgow Homoeopathic Hospital, Great Western Road
Glasgow, G12

PRESENT:	Andrew Robertson	Chairman
	William J Reid	Deputy Lay Member
	Prof J McKie	Deputy Lay Member
	Mrs Kay Roberts	Deputy Non Contractor Pharmacist Member
	Gordon Dykes	Contractor Pharmacist Member
	Alasdair MacIntyre	Contractor Pharmacist Member
IN ATTENDANCE	Trish Cawley	Contractor Services Supervisor
	Janine Glen	Contracts Manager – Community Pharmacy Development
	Mrs Agnes Stewart	Vice-chair
	David Thomson	Joint Lead – Community Pharmacy Development

Prior to the consideration of business, the Chairperson asked members if they had an interest in any of the applications to be discussed or if they were associated with a person who had a personal interest in the applications to be considered by the Committee.

No declarations of interest were made.

1. APOLOGIES

There were no apologies.

2. MINUTES

The Minutes of the meeting held on Friday 2nd March 2007 **PPC[M]2007/03** and Tuesday 6th March 2007 **PPC[M]2007/04** were approved as a correct record.

3. ANY OTHER BUSINESS NOT INCLUDED IN AGENDA

There were no matters to discuss not already included in Agenda.

Section 1 – Applications Under Regulation 5 (10)

ACTION

4. APPLICATION FOR INCLUSION IN THE BOARD'S PHARMACEUTICAL LIST

Case No: PPC/5/2007

Mr Mohammed Ameen – 668 Eglinton Street, Glasgow G5 .9

The Committee was asked to consider an application submitted by Mr Mohammed Ameen, to provide general pharmaceutical services from premises situated at 668 Eglinton Street, Glasgow G5.9 under Regulation 5(2) of the National Health Service (General Pharmaceutical Services) (Scotland) Regulations 1995 as amended.

The Committee had to determine whether the granting of the application was necessary or desirable to secure the adequate provision of pharmaceutical services in the neighbourhood in which the Applicant's proposed premises were located.

The Committee, having previously been circulated with all the papers regarding the application from Mr Ameen, agreed that the application should be considered by oral hearing.

The hearing was convened under paragraph 2(2) of Schedule 3 to the National Health Service (General Pharmaceutical Services) (Scotland) Regulations 1995 as amended ("the Regulations"). In terms of this paragraph, the PPC "shall determine an application in such a manner as it thinks fit". In terms of Regulation 5(10) of the Regulations, the question for the PPC is whether "the provision of pharmaceutical services at the premises named in the application is necessary or desirable to secure adequate provision of pharmaceutical service in the neighbourhood in which the premises are located by persons whose names are included in the Pharmaceutical List."

The Applicant was represented in person by Mr Mohammed Ameen ("the Applicant"). The interested parties who had submitted written representations during the consultation period, and who had chosen to attend the oral hearing were Mr Adhil Sheikh (Pollokshields Pharmacy), Ms Alison Irving (Alliance Pharmacy), and Mr Charles Tait (Boots the Chemist) ("the Interested Parties"). The Committee noted that additional written representations had been submitted by Ms Dianne McGroary (Munro Pharmacy) and Mr Mathew Cox (Lloydspharmacy) who were unable to attend the oral hearing.

Prior to the hearing, the Panel had collectively visited the vicinity surrounding 668 Eglinton Street, Glasgow G5.9, the pharmacies, GP surgeries and facilities in the immediate neighbourhood, and the wider area of Gorbals, Pollokshields, Tradeston, Queens Park and Govanhill.

The procedure adopted by the PPC at the hearing was that the Chairman asked the Applicant to make his submission. There followed the opportunity for the Interested Parties and the PPC to ask questions. The Interested Parties and the Applicant were then given the opportunity

to sum up.

The Applicant's Case

Mr Ameen commenced his presentation by thanking the Committee for giving him the opportunity to present his case.

The Applicant defined the neighbourhood to be served by his proposed pharmacy as bounded by the M8 motorway on the North, bounded by the River Clyde to the East, to the South travelling down Gorbals Street, then down to Cathcart Road, taking a right onto Butterbiggins Road and into Albert Drive, to the West along St Andrews Road, taking a right into Shields Road.

Mr Ameen explained that within this neighbourhood there was a good range of shops including grocers, fast food outlets, petrol stations and other retailers. The number of retailers in the area had increased for varying reasons, including the increase in new build housing and the opening of a 24 hour petrol station. This, the Applicant suggested had caused a new neighbourhood to be created.

The Applicant placed the population within his neighbourhood as being approximately 7,540. 173 new homes had already been built in the area and 335 were currently under construction. The "First Bus" depot was 100 yards from the current premises and the new bus depot was being created alongside the original facility. It was expected that 638 homes would be constructed on the empty site, with building expected to commence within 12 months.

The Applicant claimed that 972 new homes had been built in his defined neighbourhood since 2000, with a further 3,254 new homes being proposed.

Mr Ameen explained that to the south of his neighbourhood there lay the most heavily populated area in Glasgow. He explained that while the average population of Glasgow had been declining, the trend in the South of the city was an increase. There was the highest concentration of black and minority ethnic groups in Scotland in Glasgow, and most of these were resident on the "South Side" particularly in Pollokshields East and Govanhill. Mr Ameen explained that the 2001 census statistics showed that black and minority ethnic groups in Pollokshields East only resided in 30.5% of the housing, yet they represented 49% of the population. This, he claimed, showed evidence of overcrowding and constituted a hidden population, not included in statistics.

Mr Ameen then went on to talk about the viability of the proposed pharmacy, explaining that there were approximately 7,000 patients registered with the two GP practices in the neighbourhood. This, added to the patients attending the dental practice next door to the Applicant's proposed premises and the passing trade attracted to amenities along Pollokshaws Road, would in his opinion render the pharmacy viable. It

was also his intention to open the pharmacy until 10.00pm seven days per week.

Mr Ameen did not believe that his proposed pharmacy would have an adverse effect on any of the existing pharmacies in the area as he believed that they all served their own distinctive neighbourhoods, with their own sources of prescriptions. The effect of a further pharmacy would therefore be minimal.

Mr Ameen explained that Gajree Pharmacy (617 Pollokshaws Road) provided services to approximately 60 methadone patients. The Applicant advised that while he would provide a supervised methadone service, he did not intend to provide the service to this level.

Mr Ameen illustrated what he considered to be poor access to some of the existing pharmacies in the area: He advised that parking was not good outside Pollokshields Pharmacy, with yellow lines, and the highest number of parking fines in the South Side. The road outside the pharmacy was very congested and the Council had introduced traffic calming measures along the full length of the road. This had rendered parking virtually impossible. He explained that Gajree Pharmacy was also situated on a very busy road, which affected the accessibility. The pharmacies in Gorbals (Alliance Pharmacy and Munro Pharmacy, Crown Street) were difficult to get to on foot, by car or by bus, and were hidden from the main road. The Kinning Park pharmacies (Mehta Pharmacy and Hughes Pharmacy, Admiral Street) were too far away being more than one mile from the proposed premises and were located in a different neighbourhood created by the boundary of the M8 motorway.

The Applicant then went on to set out the services that would be provided from the proposed pharmacy.

Diabetes Testing and other diagnostic testing – he advised that the occurrence of diabetics in the area covered by his neighbourhood was 58% above the national Scottish average. He intended to deliver a diabetes testing service. He also intended to provide cholesterol testing and blood pressure monitoring since diseases like coronary heart disease and cardiovascular disease were the biggest killers in the country.

Methadone and drug abuse – Mr Ameen informed the Committee that Pollokshields Pharmacy had recently been asked to increase the number of methadone patients it could provide services to. At present the pharmacy had capped its numbers at 10. The Applicant further explained that Rowlands Pharmacy (Nithsdale Road) did not provide this service at all, while Gajree Pharmacy provided services to approximately 60 methadone patients. Despite this high number, Pollokshields Pharmacy was still asked to increase its capacity, therefore showing an unmet demand in the area. The Applicant intended to make a contribution to alleviate this situation, by taking part in the service, and also to participate in the needle exchange service.

Communication – the Applicant advised the Committee that he felt it unusual that the two pharmacies in Scotland which serve the biggest ethnic population in Scotland did not have pharmacists that were equipped with the necessary cultural and linguistic knowledge to provide basis services. Mr Ameen advised that he intended to provide information and advice on culturally sensitive issues and would be able to communicate in several languages.

Nicotine Replacement Therapy – the Applicant advised that it would be his intention to provide this service.

The Elderly – Mr Ameen advised that he intended to provide medication reviews for the elderly as he believed the pharmacist to be the best placed to assist in this area. He would focus on specific groups of drugs such as heart failure and blood pressure medications. He advised that from the datazone population estimates there was a sizeable population of elderly people (over 60) in the proposed area who would benefit greatly from such reviews.

The Applicant further advised the Committee that while he was aware that most of the existing pharmacies provided a collection and delivery service, he did not feel that this represented a solution to the lack of other important pharmaceutical services that a pharmacy could provide. He explained that in addition to the services already mentioned, he would also provide: supply and advice to nursing homes, collection and delivery service, repeat collection service, oxygen supply, compliance aids assessment, dosette boxes, head lice, sale of prepayment certificates, pregnancy testing, emergency hormonal contraception.

In summary the Applicant advised that he felt the pharmacy was needed in the neighbourhood because of the increase in population, the further increase that would result from the proposed additional homes being built, and the unmet demand for supervised methadone services in the area.

The Interested Parties' Question and Applicant

In response to questioning from Mr Sheikh, the Applicant advised that he was aware that a previous application for premises in the same area had been rejected by the National Appeals Panel in November 2006 on the basis that no significant changes had occurred in the area, since a previous application was considered by the PPC in August 2005. The Applicant suggested however, that this should not have any bearing on the outcome of his application. 300 houses had been built in the area since this application had been rejected, and while he could not quantify how many of these had actually been sold, he advised that they were available for purchase and on the market.

On further questioning from Mr Sheikh, the Applicant confirmed that his neighbourhood was encased by the M8 motorway and the River Clyde.

The M8 motorway on the North, bounded by the River Clyde to the East, to the South travelling down Gorbals Street, then down to Cathcart Road, taking a right onto Butterbiggins Road and into Albert Drive, to the West along St Andrews Road, taking a right into Shields Road. The Applicant advised that his neighbourhood was unusual in nature and there was approximately 7 pharmacies currently operating more than one mile away from his proposed premises.

In response to further questioning from Mr Sheikh, the Applicant confirmed that his proposed premises were situated in the G41 post-code area.

On further questioning from Mr Sheikh, the Applicant advised that there was ample car parking around his proposed premises. There was on-street parking across the road, and in the cul de sac to the side of the premises.

In response to questioning from Mr Sheikh around the provision of methadone services, the Applicant advised that he could not quantify the number of patients that he would provide this service to, as he had not yet assessed the specific need in the area. He could not confirm whether he would provide services to more patients than Pollokshields Pharmacy.

In response to further questioning from Mr Sheikh, the Applicant advised that he did not feel he had to have supplementary prescriber status to provide basic diagnostic testing to patients. He also advised that he would liaise with the local GPs and assist perhaps through the use of PGDs (Patient Group Directions) or through the provision of surgeries. He had checked with Dr Chaudhry and he was more than happy with the Applicant's proposals. The Applicant confirmed that he did not have any written evidence to support this assertion, but that this could be produced if required.

In response to questioning from Mr Tait, the Applicant could not elaborate on how he would use PGDs in the provision of services. He explained that this was only one vehicle through which services could be provided; he was not suggesting that it was the only one.

In response to further questioning from Mr Tait, the Applicant confirmed that he chosen Butterbiggins Road and St Andrews Road as boundaries to his neighbourhood through his local knowledge of the area. He was aware of where the neighbourhoods served by the existing pharmacies begun and ended and he had used this knowledge to define his own neighbourhood. He further explained that he had included Laurieston in his neighbourhood and that his population figures did include the proposed new builds that formed the Laurieston Plan.

In response to further questioning from Mr Tait around his boundary of Gorbals Street, and why felt it was easy to travel east from this boundary, and not west, the Applicant advised that the pharmacies in

Gorbals served what was essentially a housing scheme, which was impossible to access with ease. The pharmacies served only that area. He illustrated the ease of access by showing that a resident living in Norfolk Street would need to travel 0.8 miles to Gorbals pharmacies by either car or by foot, while they would only need to travel 0.6 miles to the Applicant's proposed premises.

In response to final questioning from Mr Tait, the Applicant confirmed that he did not have any plans for his proposed pharmacy.

In response to questioning from Ms Irving, the Applicant confirmed that he did not consider Govanhill to be part of his neighbourhood, as he felt there were enough pharmacies providing services to this area already.

In response to further questioning from Ms Irving, the Applicant explained that he had not yet made any enquiries around funding for the provision of needle exchange services.

In response to further questioning from Ms Irving, the Applicant advised that the existing pharmacies in his neighbourhood were situated in Gorbals and Pollokshields. He further advised that he did not feel there were inadequacies with the services provided by the existing contractors rather that the population within the neighbourhood was not currently being served by these contractors. He confirmed that he would provide services not currently provided by existing pharmacies specifically to the black and minority ethnic groups within the area.

In response to further questioning from Ms Irving, the Applicant confirmed that he would not levy charges for the provision of any additional services. He advised that he would still be viable if no charges were made, as payment would be made through the new pharmacy contract framework. In terms of payment for services to those suffering from diabetes, the Applicant advised that he would attempt to access the new pharmacy contract framework for this funding, or source through the Health Board.

The PPC Question the Applicant

In response to a question from Mrs Roberts as to why he had described the two Gorbals pharmacies as being in his neighbourhood, when they were actually outwith the defined area, the Applicant confirmed that this was an error and that they were in fact the nearest existing pharmacies to his proposed premises, but outwith the neighbourhood as defined.

In response to further questioning from Mrs Roberts, the Applicant confirmed that there would be two pharmacists operating in the pharmacy. In response to Mrs Roberts' request for confirmation that the pharmacies would have the necessary competencies to provide the range of services described by the Applicant, Mr Ameen advised that he had undertaken a four year degree course, along with a pre-reg year, he felt that he could achieve the necessary competencies in a short space

of time.

In response to questioning from Mr Thomson, the Applicant confirmed that he had not yet made contact with any of the Community groups within the area. He intended to provide services to drug users including methadone services. He would need to convince the community that these services were necessary to help people and that the pharmacy was a health centre from where this help could be provided.

In response to further questioning from Mr Thomson, the Applicant confirmed that he had spoken to one of the GPs in the area about his application.

In response to further questioning from Mr Thomson, the Applicant explained that he had amended his proposed hours of service as he had given this some thought and after considering the hours of service provided by other retailers in the area, and the level of passing trade at different times of the day, he had concluded that there was a need for extended opening hours. He felt this was good for access to services.

In response to final questioning from Mr Thomson, the Applicant confirmed that he was aware that access to some of the services he intended to provide was not automatic and was subject to a separate authorisation process through the Health Board.

In response to questioning from Mr Reid, the Applicant confirmed that he had changed his mind around the hours of opening of the pharmacy one he had researched the area and noticed that several shops and amenities opened late. He further confirmed that he had come to this conclusion after his initial application.

In response to further questioning from Mr Reid, the Applicant advised that had done his best to study all the services provided by the existing contractors in the area, and he did not think that any of them provided diabetes testing at present.

In response to questioning from Mr Dykes, the Applicant advised that he did feel that there should be a pharmacy for every significant minority ethnic group in Glasgow.

In response to further questioning from Mr Dykes, the Applicant confirmed that the services provided from the pharmacy would be continuous and that the second pharmacist would be able to provide all services to the same standard as Mr Ameen.

In response to final questioning from Mr Dykes, the Applicant confirmed that his premises were situated in the G5 post code.

In response to questioning from Professor McKie, the Applicant confirmed that his population figure of 7,540 represented actual people living in the area and that this number was increasing. He further

confirmed that all of the 972 houses that have been built since 2000 are situated in his defined neighbourhood.

In response to further questioning from Professor McKie, the Applicant advised that most patients visiting the two GP practices in the area currently used Pollokshields Pharmacy, Rowlands or Gajree Pharmacy. The Applicant further confirmed that in his view his proposed premises were more convenient for those within this neighbourhood. There was a seachange, with hundreds of houses being built.

In response to final questioning from Professor McKie, the Applicant confirmed that there was a resident population between the River Clyde and Cook Street. He felt that his proposed premises were more accessible for this population than the Paisley Road West pharmacies. This was due to the one-way traffic system in operation in this area.

In response to questioning from Mr MacIntyre, the Applicant advised that the residents within his defined neighbourhood would conduct their shopping in the Eglinton Toll area. He did not agree that they would require to travel to Victoria Road.

In response to final questioning from Mr MacIntyre, the Applicant confirmed that all the services he had described were additional service, but that he would provide all core services.

There were no questions to the Applicant from the Chair.

The Interested Parties agreed that Ms Irving would provide a consolidated case on behalf of all the interested parties, with Mr Sheikh addressing specific points raised about Pollokshields Pharmacy.

The Interested Parties' Case – Ms Alison Irving (Alliance Pharmacy)

Ms Irving thanked the Committee for giving Alliance Pharmacy the opportunity to place their case. She advised that the National Appeals Panel had convened an oral hearing on 21st November 2006 to consider an appeal against the PPC's decision to refuse an application to establish a pharmacy at 672 Eglinton Street. The appeal was not approved. The Applicant had submitted his application for premises situated at 668 Eglinton Street on 30th November 2006. Ms Irving advised that Alliance Pharmacy failed to see what had changed in this period.

She advised the Committee that Alliance Pharmacy agreed with the definition of neighbourhood put forward by the National Appeals Panel. This being:

North: Shields Road, Scotland Street, West Street, Cook Street, Bradford Street and Gorbals Street;
East: Gorbals Street, Cathcart Road and Aikenhead Road to Myrtleview Road;

South: Mount Florida Avenue, Cathcart Road, Queens Drive, regent Park Square to Nithsdale Road;
West: Nithsdale Road,

Currently there were 8 pharmacies within this neighbourhood, with 15 pharmacies within a one-mile radius. The two Alliance Pharmacy branches within the defined area provided a full complement of services. Both had dedicated consultation rooms and both provided services such as nicotine replacement therapy, head lice, falls project, heart failure project, needle exchange, methadone supervision, MMyM, Not Dispensed, e-MAS and Antabuse. They employed a pharmacist that was fluent in Punjabi.

Ms Irving advised the Committee that the new housing development on Shields Road comprised high specification flats with an average purchase price of £123k. She suggested that these flats were aimed at the young, style conscious professionals, who by definition would not be immobile and would be able to undertake the ten minute walk that was needed to the nearest pharmacy, or to the underground to access amenities further away. Despite the new build within the area, Ms Irving suggested that this would have little effect on the demographic composition of the area.

In conclusion, Ms Irving advised the Committee that the National Appeals Panel had considered in 2006 that there were no inadequacies in the area and therefore asked the Committee to refuse the Applicant's application.

The Applicant Questions Ms Irving

In response to questioning from the Applicant, Ms Irving confirmed that her defined neighbourhood encompassed that defined by the Applicant. The only difference being that the Applicant had used the River Clyde as a boundary where Ms Irving had taken this boundary to be Cook Street as the area between this and the River Clyde was mostly commercial in nature and therefore a different neighbourhood in her opinion.

In response to further questioning from the Applicant, Ms Irving advised that she could not detail the neighbourhoods served by the two Alliance Pharmacies in the area.

The PPC Question Ms Irving

In response to questioning from Mr Dykes, Ms Irving advised that car parking was available at both Alliance Pharmacies in the form of on street parking spaces and in metered bays to the side of the pharmacies.

In response to questioning from Professor McKie, Ms Irving advised that there was very little public transport operating from east to west in

the area. Most buses in the area travelled along Victoria Road and Cathcart Road. The two pharmacies outwith the Applicant's defined neighbourhood could be accessed by a number 66 bus. Further more there were crossing points along the trunk roads which would allow access to the pharmacies.

There were no questions to Ms Irving from Mrs Roberts, Mr Reid, Mr Thomson, Mr MacIntyre or the Chair.

The Interested Parties' Case – Mr Adhil Sheikh (Pollokshields Pharmacy)

Mr Sheikh advised the Committee that there had been no real change in the area since the National Appeals Panel had considered the previous application in November 2006. Within one mile of the Applicant's proposed premise there were 15 pharmacies. There was 0.3 miles between Pollokshields Pharmacy and the Applicant's proposed premises. It would take the average person seven minutes to walk, eight minutes for an elderly person.

The Applicant had not provided plans for the pharmacy, which would cause Mr Sheikh to doubt whether the pharmacy would be ready in the timescale required by the Regulations.

Mr Sheikh advised that Pollokshields Pharmacy had previously only provided methadone services to four patients. This number had increased to 14 and would increase further.

Pollokshields Pharmacy was working closely with one of the Prescribing Support Pharmacists from the Health Board to provide a medication review clinic where patients' medicines could be changed.

Mr Sheikh confirmed that parking spaces were limited within the Albert Drive area, however he suggested that this was the same situation at most pharmacies. Pollokshields Pharmacy employed the services of a full time driver who provided a delivery service to a wide area.

There were no questions to Mr Sheikh from the Applicant.

The Committee Question Mr Sheikh

In response to questioning from Mr Dykes, Mr Sheikh advised that there were around six instances per day where a patient required the services of a multi-lingual pharmacist. He further confirmed that most would not travel to another pharmacy specifically to access this service. Most would muddle through.

There were no questions to Mr Sheikh from Mrs Roberts, Mr Reid, Mr Thomson, Professor McKie, Mr MacIntyre or the Chair.

The Interested Parties Sum Up

Ms Irving advised the Committee that there was no evidence of change from the National Appeals Panel decision in November 2006. She asked that the application be rejected.

Mr Sheikh advised the Committee that Pollokshields Pharmacy offered a full range of services to the area. There was no need for a further pharmacy.

Mr Tait advised the Committee that there was no reason to grant the Applicant's request for a further contract.

The Applicant Sums Up

Mr Ameen advised the Committee:

- the surrounding pharmacies all served their own area;
- the defined neighbourhood was not served by any of the existing pharmacies, despite the services provided by these pharmacies being adequate;
- Collection and delivery services were not the answer to or a substitute for the provision of pharmaceutical services;
- There was too much scope for a practices pharmacist to contend with. A permanent pharmacist with defined competencies and skills could serve the population better;
- Housing had increased in the area. In 12 months an additional 750 homes would be built;
- Public transport was good, as the area was a hub for people to travel north and south.
- public transport was not so good east and west;
- He intended to provide services unique for the resident population i.e. black and minority ethnic groups including communication.

Before the Applicant and the Interested Parties left the hearing, the Chair asked them to confirm that they had had a full and fair hearing. All confirmed that they had.

DECISION

The PPC was required and did take into account all relevant factors concerning the issue of:-

- a) Neighbourhood;

- b) Adequacy of existing pharmaceutical services in the neighbourhood and, in particular, whether the provision of pharmaceutical services at the premises named in the application was necessary or desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises were located.

The PPC took into all account all written representations and supporting documents submitted by the Applicant, the Interested Parties and those who were entitled to make representations to the PPC, namely:

- a) Chemist contractors within the vicinity of the Applicant's premises;
- b) The Greater Glasgow Area Pharmaceutical Committee (General Practitioner Sub-Committee);
- c) The Greater Glasgow Area Medical Committee (GP Sub-Committee).

The Committee also considered;-

- d) The location of the nearest existing pharmaceutical services;
- e) Demographic information regarding post code sectors G5.9, G41.2 and G41.7;
- f) Patterns of public transport; and
- g) NHS Greater Glasgow and Clyde plans for future development of services; and

Having considered the evidence presented to it, and the PPC's observation from the site visits, the PPC had to decide first the question of the neighbourhood in which the premises to which the application related, were located.

The Committee considered the various neighbourhoods put forward by the Applicant, the Interested Parties, and the National Appeals Panel in similar applications. Taking all information into consideration, the Committee considered that the neighbourhood should be defined as follows:

North: Scotland Street from it's junction with Shields Road, West Street, Cook Street and Bedford Street to its junction with Gorbals Street;

West: Nithsdale Road and Shields Road;

East: Gorbals Street, Cathcart Road and Aikenhead Road to its junction with Myrtleview Road;

South: Myrtleview Road, Mount Florida Avenue, Cathcart Road, queen's Drive and to Caledonia Road to it's junction with Nithsdale Road.

The Committee agreed that Cathcart Road and Aikenhead Road were major trunk roads separating a principally residential area from a more commercial/industrial tract of land, and therefore formed a natural barrier. This view was also applicable to the land to the north of the northern boundary. Queens Park formed a natural boundary to the south and Shields Road to the west marked a clear change in neighbourhood with different communities and housing.

Adequacy of Existing Provision of Pharmaceutical Services and Necessity or Desirability

Having reached that decision, the PPC was then required to consider the adequacy of pharmaceutical services in that neighbourhood, and whether the granting of the application was necessary or desirable in order to secure adequate provision of pharmaceutical services in that neighbourhood.

Within the neighbourhood as defined by the PPC there were eight existing pharmacies. These pharmacies provided the full range of pharmaceutical services including supervised methadone and domiciliary oxygen. The Committee considered that the level of existing services ensured that satisfactory access to pharmaceutical services existed within the defined neighbourhood. The Committee therefore considered that the existing pharmaceutical services in the neighbourhood were adequate.

The Committee noted that the Applicant himself had agreed that the existing services in the area were adequate; albeit that he had suggested that the existing contractors did not serve the population around his proposed premises. Given the Committee's agreement with the neighbourhood defined by the National Appeals Panel, it was their assertion that those residents (whether elderly, black minority ethnic, the disabled or mothers with young children) around the Applicant's proposed premises currently had access to adequate pharmaceutical services.

The Committee agreed that development both current and future in the area may have an effect on the demand for pharmaceutical services. They considered however that the Applicant had not provided sufficiently detailed or precise evidence to allow the Committee to determine the impact of these developments within the area or to conclude that the adequacy of services would be adversely affected by any of these developments.

Having regard to the overall services provided by the existing contractors within the vicinity of the proposed pharmacy, and the number of prescriptions dispensed by those contractors in the preceding 12 months, the Committee agreed that the neighbourhood was already adequately served.

In accordance with the statutory procedure the Chemist Contractor Members of the Committee Gordon Dykes and Alasdair MacIntyre and Board Officers were excluded from the decision process:

DECIDED/-

The PPC was satisfied that the provision of pharmaceutical services at the premises of the Applicant was not necessary or desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises were located by persons whose names are included in the Pharmaceutical List and in the circumstances, it was the unanimous decision of the PPC that the application be refused.

Te Chemist Contractor Members of the Committee Gordon Dykes and Alasdair MacIntyre and Board Officers rejoined the meeting at this stage.

**Contractor
Services
Supervisor**

5. NATIONAL APPEALS PANEL DETERMINATION

The Committee having previously been circulated with paper 2007/12 noted the contents which gave details of the National Appeals Panel's determination of appeals lodged against the Committee's decision in the following cases:

Mr Asgher Mohammed – Unit 4, 170 High Street, Glasgow G1.1

The Committee noted that the National Appeals Panel had dismissed the Appeal submitted against the PPC's decision to grant Mr Mohammed's application to establish a pharmacy at the above address. The Chair of the Appeals Panel found that the Appellant had given no basis for appeal and so the appeal was dismissed. As such Mr Mohammed's name was included in the Board's Provisional Pharmaceutical List, and services were due to commence from the pharmacy later this year.

6. DATE OF NEXT MEETING

Scheduled for Tuesday 10th April 2007 at 12.30pm at Glasgow Homoeopathic Hospital.

The Meeting ended at 4.20p.m.