

NOT YET ENDORSED AS A CORRECT RECORD

Pharmacy Practices Committee (10)

Minutes of a Meeting held on Wednesday 4th July 2007
Meeting Room, Queens Park House, Langside Road Glasgow, G42

PRESENT: Agnes Stewart Chair

Mr W Reid Lay Member

Prof J McKie Deputy Lay Member

Mrs Kay Roberts Deputy Non Contractor Pharmacist Member

Gordon Dykes Contractor Pharmacist Member

IN ATTENDANCE Dale Cochran GPS Contract Assistant

Richard Duke Contracts Manager – Community Pharmacy Development
Janine Glen Contracts Manager – Community Pharmacy Development

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

Apologies were received on behalf of Robert Gillespie and Alasdair MacIntyre.

2. 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)

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

Case No: PPC/INCL10/2007

Woodneuk Healthcare Ltd - 196 Cross Arthurlie Street, Barrhead,

G78 1EY

ACTION

The Committee was asked to consider an application submitted by Woodneuk Healthcare Ltd, to provide general pharmaceutical services from premises situated at 196 Cross Arthurlie Street, Barrhead G78.1 under Regulation 5(10) of the National Health Service (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 Woodneuk Healthcare Ltd, 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 (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 Tom McInally ("the Applicant"), assisted by Mr Andrew Gilbride. The interested parties who had submitted written representations during the consultation period, and who had chosen to attend the oral hearing were Mr Nisith Nathwani, (Lloydspharmacy), Mr Andrew Mooney (Alliance Pharmacy), Dr D R Fraser (Fraser's Pharmacy) and Mr Gerry Hughes (Greater Glasgow & Clyde Area Pharmaceutical General Practitioner Subcommittee) ("the Interested Parties").

Prior to the hearing, the Panel had collectively visited the vicinity surrounding 196 Cross Arthurlie Street, Barrhead G78.1, the pharmacies, GP surgeries and facilities in the immediate neighbourhood, and the wider area of Barrhead.

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 then made their presentations with the Applicant and the PPC having the opportunity to ask questions. The Interested Parties and the Applicant were then given the opportunity to sum up.

Prior to the Applicant commencing his presentation, the Chair asked him to define the neighbourhood which he considered would be served by his proposed pharmacy, as this had been absent from the paperwork initially

submitted with the application. Mr McInally went on to provide the Committee with what he described as the "catchment area" of the proposed pharmacy. He advised that with his experience as a town planner he thought more in terms of catchment areas which related to travelling times to retail or leisure facilities rather than a neighbourhood. The Chair explained the importance of a definition of neighbourhood and how it related to the legal test required by the Regulations to be applied to applications for new pharmacies. Mr McInally advised that he considered the neighbourhood to be an area approximately 400 metres around the location of the proposed premises. The Chair asked Mr McInally to specify the boundaries of this area, and Mr McInally defined the area as:

- North Grahamston Road:
- South Commercial Road Centenary Park, Cogan Street and Barnes Street;
- East Blackbyres Road;
- West Boylestone Road Golf Club.

The Applicant's Case

Mr McInally thanked the Committee for giving him the opportunity to present his case. He advised that he had been a local resident of Barrhead for some 35 years. He was also a town planner. He considered the location of his proposed premises to meet the needs of the local population. He pointed to the major redevelopment within the area which would is likely to be undertaken over the ten years, and which would include the realignment of the river and would result in major roadworks along Glen Street. With a new supermarket and new housing proposed within the area pedestrians would need to walk to access existing pharmacies. This raised issues of adequacy for the 4,000 residents who lived in the area of north Barrhead.

Mr McInally drew the Committee's attention to the letter of support from Dr Naven (the Oaks Medical Centre) and advised that the proposed pharmacy would support the Medical Centre while it was in its current location, but would continue to operate as a stand alone function offering the local community much needed services if the Medical Centre relocated to the new Health Centre.

Mr McInally advised that the basis of his application was contained in the initial submission, and invited the Committee to deliberate on this information which underpinned his case.

The Interested Parties' Questions and Applicants Response

In response to questioning from Mr Nathwani, the Applicant advised that the GPs within the current Barrhead Health Centre were expected to relocate to the new development on Main Street. Dr Naven and the Oaks Medical Centre may decide to relocate to the new Health Centre; however this would not be for another 4 or 5 years. He further confirmed

that if the Oaks Medical Centre did relocate to the new Health Centre his proposed pharmacy would provide much needed services to the local population.

On questioning from Mr Mooney, the Applicant advised that, according to 2001 Census Statistics, the population north of the railway was approximately 4,000. There had been additional housing constructed by Barrhead Housing Association. Mr McInally advised that he had looked at the demographics of the area, and that there appeared to be more families within the area. In response to further questioning from Mr Mooney, the Applicant accepted that the area south of the railway line had more needs in terms of healthcare than that north of the railway line. Mr McInally advised that his proposed premises were located in an area which was considered to be one of high deprivation according to the Scottish Index of Multiple Deprivation.

In response to further questioning from Mr Mooney, the Applicant advised that he considered the current services to be inadequate as they were distant from the proposed premises and concentrated in one location. He considered that the community required additional support. Mr McInally considered that the patients registered at the Oaks Medical Centre were drawn from the extended arm of Grahamston Road, Gateside Road and Neilston. In response to Mr Mooney's question why patients accessing medical services at the Oaks practice would find it difficult to access pharmaceutical services, the Applicant advised that the walk from the Cross Arthurlie area was difficult. It undulated severely and a high level of the population required general pharmaceutical services.

In response to questioning from Mr Mooney, the Applicant advised that the only objective of the new road development in the area was to accommodate longer waiting lines for cars parked in Carlibar Road. He did not consider that this would improve access to the area.

In response to questioning from Dr Fraser, the Applicant disagreed that his proposed pharmacy would concentrate in providing services to those with a drug dependency as this was seen to be the most lucrative part of pharmaceutical provision. He clarified that his objective was to provide services to needy people whether they be drug dependents or people with diabetes.

In response to Dr Fraser's assertion that the walkway in the area was now well lit, safe and prevented the walk to the Cross Arthurlie area as being considered undulating, Mr McInally advised that the amount of people using the walkway remained extremely low. He contended that the area remained exposed and few areas overlooked existing housing. He did not feel that this route into the area surrounding his proposed premises offered safe access.

In response to further questioning from Dr Fraser, Mr McInally advised that he had used travelling distance to identify the catchment of the

pharmacy as in his planning experience customers would normally travel approximately 400-500 metres to access facilities. He had reflected that the access to the area north of the railway line was beside the proposed premises. He did not consider the catchment area to be a circle, but an area accessible within a five to ten minute walk.

In response to questioning from Mr Hughes, the Applicant advised that according to the 2001 Census Statistics the population of Barrhead was 19,500. Taking into consideration the significant number of new housing in the area he considered 20,000 to be a fair estimate. He confirmed that this did not include the population of Nitshill. He confirmed that the approximate number of residents north of the railway line was 4,000 and accepted that this left a population of 16,000 south of the railway line.

In response to questioning from Mr Hughes, the Applicant reiterated that he considered the catchment area of the proposed premises as a radius of approximately 400 metres. He had chosen Cogan Street as a boundary as he had been asked to provide a boundary, although he was of the opinion that boundaries could be "fudged".

The PPC Question the Applicant

Originally, the proposed premises were two shops that over time were converted into one but the two original floors levels remain. In response to questioning from Mrs Roberts, the Applicant advised that the proposed premises would be modified to accommodate the pharmacy on one level. The entrance door would be placed in its existing position. The Applicant did not agree that the premises were inaccessible for the disabled. In response to Mrs Robert's assertion that the barriers on the street corner prevented parking outside the premises, Mr McInally advised that there were more parking spaces than ever around the pharmacy both in the station car par and at the adult training centre.

In response to questioning from Mr Dykes, the Applicant advised that the previous pharmacy in Cross Arthurlie Street supported a GP practice which had been located approximately 50 yards from the pharmacy. This medical practice had relocated into the Health Centre. Around this time there were several vacant retail sites and little residential development in the area. Since then there had been new housing developed in the area, most of which was social rented accommodation. In addition services had extended into the community and the Applicant was confident that this would contribute to the proposed pharmacy's viability.

In response to further questioning from Mr Dykes, the Applicant advised that he considered general pharmaceutical services to be core pharmacy services, along with additional services such as methadone supervision, buprenorphine, smoking cessation etc.

In response to questioning from Professor McKie, the Applicant advised that the realignment plans for the river would result in the river moving

slightly south. This would allow Glen Street to be rebuilt. Glen Street would then be redeveloped approximately 100m south to allow longer tailbacks to develop and reduce congestion in the area.

In response to further questioning from Professor McKie, the Applicant advised that he would expect residents in the north of Barrhead to travel to the proposed premises either on foot, by car or by bus. The bus service operated approximately every 20 minutes.

In response to questioning from Mr Reid, Mr McInally confirmed that his population statistic of 6,700 were all included in the area he had defined as his catchment area.

In response to further questioning from Mr Reid, Mr McInally confirmed that the proposed pharmacy would be built on one level. He also confirmed that the pharmacy would include a consultation room.

In response to questioning from Mr Thomson, Mr McInally advised that the assertion of unmet pharmaceutical care needs in the area had been based on information provided by Mr McCandlish (the pharmacist who would be in charge of the pharmaceutical aspects of the company). He confirmed that he was aware that several of the services planned were discretionary and only approved if the Board considered a need for these within a locality

There were no questions to the Applicant from the Chair.

At this point the Chair asked those present if the process to be followed could be amended. All agreed that the Interested Parties would make their presentation in turn, with the Applicant and the PPC being given the opportunity to raise questions once all Interested Parties had concluded their presentations.

<u>The Interested Parties' Case – Mr Nisith Nathwani</u> (Lloydspharmacy)

Mr Nathwani thanked the Committee for allowing Lloydspharmacy to be represented. He explained that in the view of Lloydspharmacy the Barrhead neighbourhood had adequate pharmaceutical services and the application made by Woodneuk Pharmacy Ltd should fail as it was neither necessary nor desirable.

Mr Nathwani advised that he would begin his presentation by describing the neighbourhood which Lloydspharmacy felt would be served by the Applicant's proposed premises. He described this as being Barrhead as a whole. He advised that the Applicant was quite vague in his definition of neighbourhood in his application. In Mr Nathwani's opinion there was no ambiguity, as the decision made by the PPC in 2001 against a previous application for premises near the proposed site on Cross Arthurlie Street stated that "It was reasonable to regard the neighbourhood as being the whole of Barrhead". Mr Nathwani

suggested that nothing had changed significantly since this decision was made, and there should therefore be no reason for the neighbourhood to change.

Mr Nathwani suggested that if the Applicant's neighbourhood of North Barrhead was accepted, the boundary would be the railway line as this was a significant geographical feature. The Applicant's proposed pharmacy would then be outwith the neighbourhood the Applicant intended to serve. Mr Nathwani went on to say that the proposed pharmacy would be located in the same neighbourhood as the three existing pharmacies in Barrhead. If the Applicant suggested he would serve the population north of the railway line, Mr Nathwani suggested that the proposed pharmacy should be sited within the neighbourhood where the inadequacy supposedly existed.

The neighbourhood of Barrhead currently had three pharmacies, Lloydspharmacy, Alliance Pharmacy and Fraser's Pharmacy. Most of Barrhead's shops and facilities are located in a central area, convenient, and readily accessible to all residents of Barrhead. The Applicant's proposed site was on a street corner with no immediate outside parking with a newsagent, financial adviser and a vacuum cleaner repair shop adjacent. This was not what Mr Nathwani would consider as being the heart of the community.

Mr Nathwani clarified that the proposed pharmacy would replace a previous pharmacy which had been situated at 94 Cross Arthurlie Street. This pharmacy had relocated to 176 Main Street in 1994. These were Lloydspharmacy's current premises. This was granted as a minor relocation which meant that the decision makers at the time had seen no barriers between the previous site at Cross Arthurlie Street and Main Street, therefore the perception was that there was no difficulty in commuting or accessing between the two sites.

The Applicant also mentioned "social facilities" which depended on their close proximity to pharmacy services i.e. the Oaks Medical Centre sheltered housing complexes, a nursing home, and a drug treatment centre. These facilities seemed to have managed with the existing services up to now and Lloydspharmacy had received no complaints from the Medical Centre, the nursing home (which Lloydspharmacy had close relations with) or the drug treatment centre with which Lloydspharmacy also had fostered good relations.

In terms of adequacy Mr Nathwani advised that there were three pharmacies in the focal point of Barrhead. Lloydspharmacy was open from 8.30am to 6.15pm Monday to Friday and 8.30am to 5.30pm on Saturday. There was ample free parking behind the pharmacy, unlike the Applicant's proposed site which Mr Nathwani had visited and had struggled to find space in the station car park. Lloydspharmacy had short waiting times, many CDS patients, with capacity for more, and serviced a nursing home. Lloydspharmacy provided supervision of methadone again with capacity for more clients, and no waiting lists for

either compliance trays or methadone. They offered free blood pressure and diabetes testing in their consultation area, and a smoking cessation service. Lloydspharmacy participated in many local initiatives, and were fully involved in all aspects of the new pharmacy contract.

Lloydspharmacy had received no complaints regarding either their pharmacy service or opening hours. Their location was adequate and was readily accessible by bus, car and on foot by the vast majority of patients in Barrhead. Lloydspharmacy were also fully DDA compliant.

The two other pharmacies in the town, were a large Alliance offering a wide range of products and services including a range of disability aids and a consultation room, and Fraser's Pharmacy who offered a thorough and professional service to the population of Barrhead. On this basis, Mr Nathwani contented that there were no issues with current pharmacy services and hence the application should fail.

Mr Nathwani drew the Committee's attention to the letter from Dr Naven (Oaks Medical Centre) which was included in the Applicant's supporting information. The letter stated that it would be convenient for Dr Naven's patients to have a pharmacy located near the surgery. Mr Nathwani suggested that Dr Naven would lend his support to any development offered within the area as this would aid convenience. New pharmacy contracts however should be granted on the basis or necessity and desirability, not convenience. Dr Naven's letter also mentioned the boost to the area for people to be able to buy non-prescription medicines. Mr Nathwani suggested that this should have no bearing on the awarding of a new contract.

Lloydspharmacy operated a collection and delivery service from the Oaks Medical Centre, and although they recognised that this was not a full pharmaceutical service, it did help to address access issues that the Applicant might allude to. Mr Nathwani reiterated that there had been no complaints from either the GP practice or patients about inadequate service provision.

Mr Nathwani drew the Committee's attention to a further letter from Councillor Danny Devlin which mentioned no evidence of inadequacy of service provision by the existing contractors in Barrhead, or how people had difficulty in accessing a pharmacy. Mr Nathwani advised that there had been no letters of concern from residents, and questioned why this would be the case if the situation was as bad as the Applicant implied.

Mr Nathwani advised that the Applicant mentioned the long, difficult, exposed route from the Oaks Medical Practice to Main Street and patients having to endure this unpleasant walk to the existing pharmacies. Mr Nathwani pointed out that the PPC had not agreed with this assertion when they granted the minor relocation from Cross Arthurlie Street to main Street in 1994.

As the Applicant stated, the proposed site was adjacent to Barrhead

railway station and bus stops on the main route into Paisley and Main Street. Mr Nathwani suggested that as the local transport situation was so good, patients registered at the Oaks Medical Centre could access one of the existing pharmacies quickly and conveniently. The Applicant also mentioned future roadworks in Barrhead, and how they would cause inconvenience in accessing existing pharmacy services. Mr Nathwani wondered if the Applicant would continue to operate his proposed pharmacy after the roadworks were complete and access was restored. Mr Nathwani went on to explain that the Applicant's proposed opening hours would not help the local community access pharmaceutical services, given the proposed opening hours of 8.30am - 1.00pm on Saturdays. With GP provision difficult at the weekend, Mr Nathwani questioned how a young mother with a buggy would access pharmaceutical services or undergo an e-MAS consultation on a wet Saturday afternoon. A visit to the Applicant's proposed premises would be pointless, as it would be closed. The patient would then have to visit one of the existing pharmacies on Main Street to access services. This was hardly offering the local community enhanced service provision.

Mr Nathwani explained that in the booklet submitted by the Applicant at the previous hearing he mentioned additional housing growth. Mr Nathwani advised that it was his understanding that only present circumstances should be considered when hearing new contract applications, not proposed future developments. The Applicant had also mentioned the level of deprivation in the area, and Mr Nathwani suggested that the current re-generation was already reducing the level of deprivation in the area. In the document, the Applicant also quoted that the NPA (National Pharmaceutical Association) recognized that community pharmacies were at the very heart of local health care and that they were at the front door of local primary care services. Mr Nathwani contended that the three existing pharmacies in Barrhead already fulfilled that criterion.

Mr Nathwani suggested that the Applicant had made an issue that the patients at the Oaks Medical Centre had difficulty in accessing current pharmacies in Barrhead. In the booklet submitted at the previous hearing, the Applicant had commented on the possible relocation of the Oaks Medical Centre into a new Health Centre in Barrhead which would be situated on Main Street. Mr Nathwani suggested that this was in contradiction to comments made by Dr Naven in his letter of support which stated that the practice had no intention of moving, and that if they did; they would be moving only a few yards away from their current site. The Applicant had gone on to state that if the Oaks Medical Centre were to relocate in the new Health Centre this would strengthen the need for a community pharmacy at the proposed site. Mr Nathwani suggested that this was a contradiction.

In summary, Mr Nathwani advised that Lloydspharmacy could see no reason why this contract should be granted. There were no access issues in Barrhead. All the existing pharmacies were conveniently located, and proposed site was more difficult to access.

<u>The Interested Parties' Case – Mr Andrew Mooney (Alliance Pharmacy)</u>

Mr Mooney thanked the Committee for the opportunity for Alliance Pharmacy to have representation at the hearing.

He noted that the Applicant had not offered a definition of neighbourhood within his initial submission and contended that Alliance Pharmacy would support the definition of the neighbourhood as the town of Barrhead. Alliance would maintain that the existing level of pharmaceutical service provision in Barrhead was adequate with three highly professional community pharmacy contracts offering a full and comprehensive range of services to the local community.

In the case of Alliance Pharmacy this full and comprehensive service included the provision of the following local services in addition to the core service requirements: a daily collection and delivery service, addiction services including needle exchange and methadone supervision, a smoking cessation service, provision of CDS to aid compliance, domiciliary oxygen.

Mr Mooney advised that he disagreed with the Applicant's population statistics. He contended that in 2001, the population of Barrhead was given as 17,300. He advised that in assessing areas of deprivation, health was only one issue, and that to assess the needs of the population you would need to drill down into the statistics to obtain any meaningful measurement of need.

He advised that as decision makers today, the fundamental criterion against which the Committee should judge the application was the adequacy of pharmaceutical services in the relevant neighbourhood. He contended that the test of adequacy was a simple one in that there was no room for a spectrum of adequacy. The existing services were either adequate or not. Therefore, the critical question for the Committee was therefore the adequacy of the existing provision, not the adequacy or desirability of some other possible configuration of services in the neighbourhood. This was the view supported by Judicial Review offered in the case of Lloyds Pharmacy Ltd v NAP and EA Baird. Mr Mooney advised that most people given the opportunity would choose to have a pharmacy on their doorstep. From Alliance Pharmacy's perspective the Applicant had shown no evidence of inadequacy in the current service provision.

Mr Mooney suggested that examining the socio-demographic and area profile of the neighbourhood using the Scottish Neighbourhood statistics provided an interesting insight into the areas of need in Barrhead. These were Auchenback (population 3,411), Dunterlie, East Arthurlie and Dovecothall (population 5,742). The area north of the railway line (Cross Stobbs) had a well-being profile which would not highlight a need for increased pharmaceutical services.

The Interested Parties' Case – Dr D R Fraser (Fraser's Pharmacy)

Dr Fraser commenced his presentation by providing the Committee with historical information around the various GP practices in the area. He advised that when Dr Naven had split with his initial practice he had formed a new partnership and had taken his patient list with him. Of this patient list, Dr Fraser advised that 50% of patients came from Neilston.

Dr Fraser advised that there was little movement of residents within Barrhead and that those who did move to reside north of the railway line invariably continued their registration with their original general practitioners. He contended that it was perverse to say that those residents to the north of Barrhead did not shop in Main Street.

Dr Fraser advised that Fraser's Pharmacy serviced the areas of Barrhead, Neilston and Uplawmoore. They provided 24 hour Palliative Care cover. Dr Fraser contented that the only area of multiple deprivation with the Barrhead area was Dunterlie.

Dr Fraser suggested that the plans provided by the Applicant showing the proposed redevelopment were inaccurate. He further contended that if the application were granted there would be no restriction on the Applicant applying for a minor relocation of services.

<u>The Interested Parties' Case – Mr Gerry Hughes (Greater Glasgow & Clyde Area Pharmaceutical General Practitioner Sub-Committee)</u>

Mr Hughes advised that the GP Sub-committee had been unable to reach agreement on the definition of neighbourhood. They had therefore been unable to provide a recommendation on the application.

The Applicant Questions the Interested Parties

In response to questioning from the Applicant, Dr Fraser accepted that his statement around the veracity of the redevelopment plans provided by Mr McInally had been incorrect. He accepted that the plans provided were subject to consultation and did not constitute final approval.

In response to questioning from the Applicant, Mr Nathwani advised that the previous pharmacy in Cross Arthurlie Street relocated in 1994, and that the Oaks Medical Centre opened in 2000.

In response to questioning from the Applicant, Mr Mooney advised that in terms of the Judicial Review an application for a new pharmacy could only succeed where the Applicant had shown that the current provision was inadequate. This was a legal definition. In Mr Mooney's opinion the Applicant had not provided any evidence in support of his contention of inadequacy. Mr Mooney would have expected the

Applicant to show public support around inadequacy. The Applicant had provided a letter of support from the Community Council however the Council had apparently not followed this up by raising the issue with the Health Board. The Applicant had not shown any gaps in the current service provision, nor detailed what services were missing from the current provision.

The PPC Question the Interested Parties

In response to questioning from Mrs Roberts, Mr Mooney advised that Alliance Pharmacy had acquired the business on Main Street from Munro Pharmacy. They took part in the needle exchange scheme and this was going well.

In response to further questioning from Mrs Roberts, Dr Fraser advised that currently Fraser's Pharmacy did not take part in the supervised methadone scheme. This was due to space constraints which would be resolved in the next six months when the pharmacy would undergo a refit. Mr Mooney advised that Alliance Pharmacy took part in the supervised methadone scheme, and that the branch had developed a good relationship with Addiction Services staff. Alliance Pharmacy had spare capacity to take more clients on the scheme. Mr Nathwani advised that Lloydspharmacy had no capacity issues around the scheme and were not aware of any problems.

In response to questioning from Mrs Roberts, Mr Mooney advised that Alliance Pharmacy would not turn any client away who was looking to access compliance aid services.

In response to questioning from Professor McKie, Mr Nathwani advised that he did not consider there to be underprovision within the area. He contended that evidence of underprovision would be if the pharmacy were turning patients away, or if there were capacity or workforce issues.

In response to further questioning from Professor McKie, Mr Nathwani advised that he could not answer why the existing pharmacies appeared to dispense fewer than average number of prescriptions. Dr Fraser suggested that the answer may lie in the statistic which showed that there was 40% leakage from the retail outlets in Barrhead. This showed that many residents shopped outwith Barrhead in areas such as Silverburn and Braehead. In travelling outwith the area for some elements of their shopping it may be that they chose to access pharmaceutical services outwith Barrhead. This may account for the smaller than average number of prescriptions being dispensed by the existing pharmacies.

In response to further questioning from Professor McKie, Mr Mooney advised that he felt it was for the PPC to decide where the issue of adequacy should take into account the distribution of services. He contended that in terms of Judicial Review the crucial question was

one of adequacy of the existing provision and not the adequacy or desirability of some other configuration of services.

In response to questioning from Mr Reid, Dr Fraser agreed that the three existing pharmacies viability would be affected if an additional contract were granted.

In response to questioning from Mr Thomson, Mr Nathwani advised that he did not know how long Lloydspharmacy had owned the branch in Main Street.

In response to questioning from Mr Thomson, Mr Mooney agreed that currently at first sight, the Alliance Pharmacy branch in Main Street appeared to focus on non pharmacy items. He contended that a refit had been planned for September 2006, however due to the transition period the company currently found itself in this had been delayed due to the merger of the company with another large chain. It was hoped that that refit would be rescheduled. Mr Mooney advised that the refit would obviously be contingent upon the continuation of business, and that this could be affected if a further contract were granted.

In response to questioning from Mr Thomson on the apparent lack of a defined consultation area within his pharmacy, Dr Fraser advised that currently he conducted MAS consultation in an area through a door to the side of the dispensary. Dr Fraser had been trying to relocate his pharmacy for some three years, however had not succeeded in securing alternative premises. He was now about to undertake a refit in the pharmacy which would see the focus shift away from non pharmacy items. Dr Fraser advised that he also conducted compliance aids assessments in patients' homes.

In response to questioning from Mr Thomson, Mr Mooney advised that Alliance Pharmacy used a distribution company to deliver prescriptions to patients. Mr Nathwani advised that Lloydspharmacy utilised a driver, and Dr Fraser advised that either he or his son, who was also a pharmacist delivered prescriptions dispensed from Fraser's Pharmacy. In response to Mr Thomson's request for clarification that only one of the existing pharmacies provided pharmaceutical care within their collection and delivery service, Mr Mooney advised that Alliance Pharmacy had recognised this as a gap in their service, and were presently developing a set of standard operating procedures to strengthen this service.

There were no questions to the Interested Parties from the Chair.

The Interested Parties Sum Up

Mr Hughes advised the Committee that the GP Sub-committee had a difference of opinion regarding the definition of boundaries. Some had suggested a staggered diamond area surrounded by Greenfield; however this had been challenged by some members of the

Committee. The application was not in his opinion necessary.

Dr Fraser advised the Committee that Barrhead was one neighbourhood. There were no distinct movements of population. He contended that the application was a speculative business proposal designed to increase the value of property and not related to the provision of services.

Mr Mooney advised the Committee that there was no need or desirability for an additional contract. The Applicant had failed to show evidence of inadequacy.

Mr Nathwani advised the Committee that Lloydspharmacy's definition of the neighbourhood differed from the Applicants. He did not consider that the Applicant had demonstrated inadequacy and therefore the application was not necessary or desirable.

The Applicant Sums Up

Mr McInally thanked the Committee for allowing him to sum up at the end. He advised that he felt there may in fact be a need or desirability for an additional pharmacy at the proposed premises. This contention had been supported by the Community Council.

Mr McInally contended that he took exception to Dr Fraser's suggestion that the application was part of a property valuation exercise. He advised the Committee that he was a respected member of the community who was committed to providing services to the community. He advised that Mr Mooney had raised issues of adequacy and contended that Barrhead was made up of several communities including Dunterlie, Cross Arthurlie and North Barrhead. While he accepted that North Barrhead may not be one of high deprivation he did not consider this as a reason not to provide services to that community.

He contended that if health was only one issue taken into account when measuring deprivation, it was a wide ranging one.

He advised that the reason the current pharmacies were dispensing less prescriptions than the national average, may be that the services weren't good enough as the shopping services did not appear to be good enough forcing residents of Barrhead to travel outwith the area to access retail facilities.

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.

The PPC was required to 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 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 & Clyde Area Pharmaceutical General Practitioner Sub-Committee;
- c) The Greater Glasgow & Clyde Area Medical Committee (GP Sub-Committee).

The Committee also considered:-

- d) The location of the nearest existing pharmaceutical services;
- e) Demographic information regarding the areas of Barrhead and Neilston;
- f) NHS Greater Glasgow and Clyde plans for future development of services; and
- g) Information relating to shopping and commercial patterns within the area.

DECISION

Having considered the evidence presented to it, and the PPC's observations from the site visit, 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, and the Interested Parties. They were also mindful of the neighbourhood suggested by the Judicial Review that had taken place in 1994 around an application for the minor relocation of services from premises close to the Applicant's proposed premises. Taking all information into consideration, the Committee considered that the neighbourhood should be defined as the area commonly known as Barrhead.

The Committee felt that this was distinct neighbourhood. The Committee were mindful that the 1994 Judicial Review had come to the

same conclusion and agreed that the Applicant had offered no evidence which would cause them to come to a different conclusion. They recognised that there had been some redevelopment within the area since the time of the Judicial Review; however they did not consider this to have had such a significant effect on the area that the community boundaries could be considered to have changed.

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 three 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 considered the Applicant's comments around the difficulty in accessing the existing services from the north of Barrhead. The Committee did not agree that the walk would be onerous and considered that there was an adequate public transport network operating within the area.

The Committee considered the Applicant's assertion that the proposal to establish a pharmacy was supported by the local Community Council. The Committee noted, however, that no formal letter of support from the Council had been included in the Applicant's submission, or had been received by the Board directly from the Council. There was therefore no firm evidence to support this assertion.

The Committee also considered the situation where the existing pharmacies appeared to dispense fewer prescriptions than would be expected according to national averages. The Committee accepted that there could be several reasons for this situation; and considered it reasonable that the proportion of residents in Barrhead who travelled outwith the area to access shopping facilities, also chose to access pharmaceutical services at the same time. The Committee agreed that this would suggest that the current provision within the area was adequate to meet the needs of the population.

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 Member of the Committee Gordon Dykes 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.

Contractor Services Supervisor

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

4. APPLICATIONS STILL TO BE CONSIDERED

The Committee having previously been circulated with Paper 2007/30 noted the contents which gave details of applications received by the Board and which had still to be considered. The Committee agreed the following applications should be considered by means of an oral hearing:

Premichem Ltd – Paterson Street/Morrison Street, Glasgow G5.8; Ms E Blair & Ms Angela Mackie – 3 Budhill Avenue, Glasgow G32.0:

Apple Healthcare Ltd, 2 Old Gartloch Road, Glasgow G69.8; Premichem Ltd – 1 Rutherglen Road, Glasgow G73.1;

Lloydspharmacy Ltd - New Medical Practice, Loanend, Paisley PA1.1;

Mr Neeraj Salwan – 128 Main Road, Paisley PA1.2;

Mr Neeraj Salwan – 135 Robroyston Road, Glasgow G33.1;

Apple Pharmacy Group – 3-5 Dunvegan Quadrant, Kirklandnuek, Renfrew PA4.9;

Houlihan Partners – 11-17 Princess Street, Port Glasgow PA14.6; Mr C M Razwan Shafi – 17 Busby Road, Glasgow G76.9;

New Age Healthcare Ltd – 37 Glenkirk Drive, Glasgow G15.6; and Arvinder Bilon & James Innes – 14 Barscrube Terrace, Paisley PA2.6.

The Committee agreed the following application/s should be considered by means of the written representations:

Amina Al-Adhami - 5/7 Kennedy Path, Glasgow G4.0

AGREED/-

5. MATTERS CONSIDERED BY THE CHAIR SINCE THE DATE OF THE LAST MEETING

The Committee having previously been circulated with Paper 2007/31 noted the contents which gave details of matters considered by the Chair since the date of the last meeting:

Minor Relocation of Existing Pharmaceutical Services

i) Case No: PPC/MRELOC06/2007 - Tesco Pharmacy, Tesco Store, Greenock PA15.1

The Committee considered the action taken by the Chairman on an application for a minor relocation of a NHS Dispensing contract currently held by Tesco Pharmacy, at the above address.

The Committee noted that the application fulfilled the criteria for a minor relocation under Regulation 5 (4) of the National Health Service (General Pharmaceutical Services) (Scotland) Regulations 1995 as amended.

The Committee noted that the Chairman had granted the application, having been satisfied that the application fulfilled the requirements laid down in the Pharmaceutical Regulations.

ii) Case No: PPC/MRELOC07/2007 - TLC Inverkip, Kip Park Main Street, Inverkip PA16.0

The Committee considered the action taken by the Chairman on an application for a minor relocation of a NHS Dispensing contract currently held by TLC Inverkip, at the above address.

The Committee noted that the application fulfilled the criteria for a minor relocation under Regulation 5 (4) of the National Health Service (General Pharmaceutical Services) (Scotland) Regulations 1995 as amended.

The Committee noted that the Chairman had granted the application, having been satisfied that the application fulfilled the requirements laid down in the Pharmaceutical Regulations.

Change of Ownership

i) Case No: PPC/COO14/2007 - Clyde Pharmacies Ltd, 145 Spey Road, Glasgow G61.1

The Board had received an application from Clyde Pharmacies Ltd for inclusion in the Board's Pharmaceutical List at a pharmacy previously listed as Mr W B Sinclair T/A Sinclair

Pharmacy at the address given above. The change of ownership was effective from 14th May 2007.

The Committee was advised that the level of service was not reduced by the new contractor and that the new contractor was suitably registered with the Royal Pharmaceutical Society of Great Britain.

Given the above, the Committee agreed that the application could be granted in terms of Regulation 4 of the current Pharmaceutical Regulations.

ii) Case No: PPC/COO15/2007 - Sinclair Shops Ltd, 145 Spey Road, Glasgow G61.1

The Board had received an application from Sinclair Shops Ltd for inclusion in the Board's Pharmaceutical List at a pharmacy previously listed as Clyde Pharmacies Ltd T/A Sinclair Pharmacy at the address given above. The change of ownership was effective from 6th June 2007.

The Committee was advised that the level of service was not reduced by the new contractor and that the new contractor was suitably registered with the Royal Pharmaceutical Society of Great Britain.

Given the above, the Committee agreed that the application could be granted in terms of Regulation 4 of the current Pharmaceutical Regulations.

NOTED/-

6. NATIONAL APPEALS PANEL DETERMINATION

The Committee having previously been circulated with paper 2007/32 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 Mohammed Ameen – 668 Eglinton Street, Glasgow G5.9 (Case No: PPC/INCL05/2007)

The Committee noted that the National Appeals Panel had dismissed the Appeal submitted against the PPC's decision to refuse Mr Mohammed Ameen's application to establish a pharmacy at the above address. As such Mr Ameen's name was not included in the Board's Provisional Pharmaceutical List, and the file on the application had been closed.

NOTED/-

7. ANY OTHER COMPETENT BUSINESS

The Committee approved an application from Boots the Chemist Ltd to close their pharmacy situated at 494 Sauchiehall Street for one day on 11th August 2007. This was due to a refit taking place over the weekend. The pharmacy would recommence services on Monday 13th August.

AGREED/-

8. DATE OF NEXT MEETING

Scheduled for Wednesday 1st August 2007 at 12.30pm. Venue to be confirmed.

The Meeting ended at 5.05p.m.