

NOT YET ENDORSED AS A CORRECT RECORD

Pharmacy Practices Committee (12)
Minutes of a Meeting held on
Wednesday 22ND August 2007
The Den, The Bridge, 1000 Westerhouse Road
Easterhouse, Glasgow, G34 9JW

PRESENT:	Mrs Agnes Stewart	Chair
	Mrs Maura Lynch	Lay Member
	Mr W Reid	Lay Member
	Prof J McKie	Deputy Lay Member
	Dr James Johnson	Non Contractor Pharmacist Member
	Gordon Dykes	Contractor Pharmacist Member
	Alasdair MacIntyre	Contractor Pharmacist Member

IN ATTENDANCE

Trish Cawley	Contractor Services Supervisor
Richard Duke	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

No apologies received.

2. MATTERS ARISING NOT INCLUDED IN AGENDA

No matters discussed.

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

Case No: PPC/INCL12/2007

Ms Elizabeth Blair & Ms Angela Mackie, 3 Budhill Avenue, Springboig, Glasgow G32 0PW

The Committee was asked to consider an application submitted by Ms Elizabeth Blair & Ms Angela Mackie, to provide general pharmaceutical services from premises situated at 3 Budhill Avenue, Springboig, Glasgow G32 0PW under Regulation 5(10) of the National Health Service (Pharmaceutical Services) (Scotland) Regulations 1995 as amended.

ACTION

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 Ms Elizabeth Blair & Ms Angela Mackie, 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 Ms Angela Mackie ("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 Paul Nightingale (National Co-op), Mr David Henry (Lloyds Pharmacy), Ms Alison Irving (Alliance Pharmacy), Ms Lynn Duthie (Lightburn Pharmacy), Mr Douglas Miller (Observer – Lightburn Pharmacy) and Mr David Robertson (Robertsons Chemist & Shettleston Health Centre Pharmacy) ("the Interested Parties").

Prior to the hearing, the Panel had collectively visited the vicinity surrounding Budhill Avenue, Glasgow G32 0PW, the pharmacies, GP surgeries and facilities in the immediate neighbourhood, and the wider areas of Barlanark, Springboig, Shettleston and Carntyne .

The procedure adopted by the PPC at the hearing was that the Chairman asked the Applicant to make her 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. The Chair requested the Interested Parties make their presentations and questioning succinct and not to labour points previously made unless deemed appropriate.

The Applicant's Case

Ms Mackie thanked the Committee for giving her the opportunity to present her case orally and apologised for the non attendance of her business partner, Ms Blair who was currently overseas. She advised that she was a pre-registration pharmacist who would be sitting her pre-registration exam on 28 September, with the results being known on 21 October. Her partner

had been working as a community pharmacist for the last 10 years, and it was through her pre-registration training that she met Ms Blair. Both partners believed in the *'importance of pharmacy being at the heart of the community'*, which was the basis of their application.

The Applicant advised the need for a pharmacy was brought to her attention by a friend's grandmother, who had required a taxi when visiting a pharmacy. In discussion with her relative she learned that Springboig was considered as *'a village within the East End of Glasgow'*. She investigated further, talking to many residents of the area on different occasions. She finally came to the conclusion there was an inadequate provision of pharmaceutical services within the area and therefore explored premises availability. The Applicant subsequently signed a lease for the premises at 3 Budhill Avenue.

The Applicant defined the neighbourhood as:

North – Carntyne Road;

East – Springboig Road

South – Railway line

West – Carntynehall Road to Cardowan Road

She stated that there was one pharmacy in the neighbourhood but this was one mile away from the site of the proposed pharmacy thus requiring patients within the Budhill area to undertake a 15 minute uphill walk to visit the pharmacy. She pointed out that 46% of residents within the neighbourhood relied on foot or public transport.

The Applicant stated the neighbourhood population as 7,180 with 66% claiming incapacity allowance. The neighbourhood included a bowling green, two primary schools and a day care centre. She indicated that the demographic statistics were generally higher than the Scottish average e.g. numbers of over 65's, 5%; deaths, 17% & hospital admissions, 30 to 40%.

She advised that it was her intention for the new pharmacy to undertake a 'pamphlet drop' to the households in the neighbourhood, detailing the services offered. The Applicant's main priority was to provide pharmaceutical services to these residents but was hopeful that she could extend these services in the future. The Applicant planned for disabled access to the premises. After further considering the proposed pharmacies opening hours since making the application, the Applicant asked the Committee to note that she now intended to extend opening hours until 7pm, Monday to Friday.

'Starting Fresh' was one of the additional services the new pharmacy wished to offer. The Applicant advised that discussions had already been held with a telephone company whose system could send texts to the service's registered patient's mobile phones alerting them of then a need for advice on medication.

Drug related deaths were high in the area and the Applicant had met with members of the East Community Addiction Team who advised there was a demand for more methadone supervision places in the area. She had been

advised that Lightburn Pharmacy (pharmacy in the neighbourhood) was currently working to full capacity. The new pharmacy wished to offer this service along with needle exchange although the Applicant did recognise that the Board was unable to extend the needle exchange services due to funding limitations at the moment. The East Community Addiction Team were hopeful to receive new funding in the near future.

The Applicant finished her presentation saying that she believed that she had demonstrated there was an inadequacy of services in the neighbourhood and therefore her application was both necessary and desirable.

The Interested Parties' Question and Applicant

In response to questioning from Ms Duthie, the Applicant advised that the East Community Addiction Team had advised her of the number of methadone places Lightburn Pharmacy offered. Additionally, she confirmed that Ms Blair had been a registered pharmacist for 7 years and they were in partnership.

On further questioning from Ms Duthie, the Applicant advised that the lease had been signed by her brother on behalf of the partnership with SPAR, the owner of the premises. Ms Duthie subsequently disputed that SPAR owned the premises stating this was in fact a sub lease, which had only 4 years to run.

In response to further questioning from Ms Duthie, the Applicant advised that: 'needle exchange'; free 'blood pressure' testing and a 'home visit' service would be new services provided in the area. Ms Duthie disagreed saying these services were already provided.

On further questioning from Ms Duthie, the Applicant stated that she considered the railway a natural barrier to residents of the neighbourhood accessing pharmaceutical services. The walking time to Shettleston Road from this area was estimated to be 15 minutes, a journey time that the high numbers of incapacitated patients could not make. Ms Duthie suggested that in reality, pharmaceutical services from the proposed pharmacy would be to '*only a few streets*' around Budhill This was rejected by the Applicant as she said the pharmacy would provide services to the whole neighbourhood.

Following final questioning from Ms Duthie, the Applicant confirmed that she did not have any written evidence to support patient interest in a pharmacy in Budhill Avenue but could obtain it. Lastly, she confirmed the population stated was for post code area G32.0 and did reflect the population of the application's identified neighbourhood.

In response to questioning from Ms Irving, the Applicant confirmed: she had spoken to approximately 100 residents after 10 to 15 visits to the neighbourhood; East Community Addiction Team had not provided the Applicant with a timescale when the Board might receive new funding for

additional needle exchange contracts however, they had expressed a desire to establish further contracts within the East End of Glasgow; statistical information provided in the application had been obtained from ISD Scotland. In respect of households in the area she agreed: 72.1% were owner occupied; 100% were within a 5 minute drive of a GP; 158% deaths above the Scottish average related to 86 over a 5 year period and the over 65's statistics originated from G32.0, Post Code Sector Information.

Following further questioning from Ms Irving, the Applicant: was not sure which GP Practice residents of the neighbourhood might use. She did however believe that someone living on Eskbank Street would access the GP Practice on Budhill Avenue.

In response to final questioning from Ms Irving, the Applicant advised that she had plans for the conversion of 3 Budhill Avenue from a video shop to a pharmacy that did not require planning permission or a building warrant.

Mr Henry noted that only one of the partners was a registered pharmacist. He sought assurance from the Committee that this was acceptable and suggested that both partners needed registration. Mr Thomson responded saying that in accordance with Medicines Act 1968, a partnership may operate a pharmacy as long as one member of the partnership included a registered pharmacist.

In response to questioning from Mr Henry, the Applicant advised that the size of the proposed pharmacy unit was 70 sq meters. The Applicant had been assured by a shop fitter specialising in pharmacies that this would provide adequate space after taking into consideration normal layout and the introduction of a consultation room.

In response to questioning from Mr Nightingale, the Applicant advised that she had failed her recent exam and was re-sitting the exam on 28 September.

Mr Nightingale questioned the applicant's ability to amend the proposed opening hours stated within her application. Mr Thomson confirmed that the hours could not be changed whilst the application was being considered. Opening hours could be increased if the application was successful.

In response to further questioning from Mr Nightingale, the Applicant stated that she was not sure how long the housing had existed within the neighbourhood but assumed a long time. She accepted residents had been able to access services but added that this did not mean that adequate service existed. She acknowledged that under the New Pharmacy Contract, that community pharmacies will be required to provide all the core services.

There were no questions to the Applicant from Mr Robertson.

The PPC Question the Applicant

In response to questioning from Mrs Lynch, the Applicant said she did not know if it was at a weekend when her friends grandmother needed a taxi to obtain a prescription or if the patient could have used a 'collection & delivery service'.

In response to questioning from Mr Johnson, the Applicant confirmed that the proposed pharmacy would offer a compliance aids service to individual patients but they would need to assess what the potential demand might be from nursing homes.

In response to questioning from Mr Reid, the Applicant clarified: the 'home visit service' would be for housebound patients; the proposal to extend opening hours was based on her belief that services were needed later and she also advised that the pharmacy would not close for lunch.

After further questioning from Mr Reid, the applicant advised that it was during her conversations with residents that she identified there was a patient need for local pharmaceutical services. She added that she had arranged to meet with the Community Councillor and the local GP Practice Manager and visit the Day Care Centre the following week. It was during these meetings that she was hopeful to seek letters of support.

In response to questioning from Professor McKie about the westerly extent of the neighbourhood and residents accessing services at the proposed pharmacy, the Applicant confirmed her belief that residents in the defined neighbourhood would use the pharmacy.

In response to further questioning from Professor McKie, the Applicant, having previously spoken with local residents, disagreed that it would be quicker for some residents in the neighbourhood to use the services at Shettleston Road. She also stated that she believed it was unreasonable for patients to have to walk more than 5 minutes to access pharmaceutical services

In response to final questioning from Professor McKie about other services within the neighbourhood, the Applicant advised that: she did not know how many residents lived in the flats above the shops in Budhill Avenue; there was a Post Office but it was never open; there was a Community Centre attached to the Day Car Centre on Budhill Avenue and there was no other shops in the neighbourhood other than those in the immediate vicinity of the proposed premises.

In response to questioning from Mr MacIntyre, the Applicant confirmed that the application for inclusion within the Board's Pharmaceutical List was made following her discussions with local residents.

There were no questions to the Applicant from Mr Thomson and Mr Dykes.

The Interested Parties' Case – Mr Paul Nightingale (National Co-op)

Mr Nightingale disagreed with the Applicant that the railway provided a significant barrier to residents stating that there were currently 10 to 12 pharmacies within a 1 mile radius of the proposed site.

Mr Nightingale advised that National Co-op had two pharmacies within the general area; Shettleston Road and Baillieston Road. Both pharmacies opened between 9am to 6pm – Monday to Friday and 9am to 5pm on Saturday. Baillieston Road had been opened on a Sunday until 3 years ago when it was considered to be no longer economically viable to continue the service. Both pharmacies provided the full range of pharmaceutical services, which include: a dedicated collection & delivery (trained drivers); free telephone advice; care & addiction (methadone, with spare capacity) and home visits, on request. The pharmacies had previously applied to offer 'needle exchange' services but had not been successful due to the Board's funding position.

Mr Nightingale summarised saying the National Co-op pharmacies were already providing the full range of services to residents identified within the stated neighbourhood and therefore did not consider the Applicant to be offering any services that were not already provided. Furthermore, additional methadone capacity was available in both pharmacies. He therefore believed that he did not consider the application to be necessary or desirable.

There were no questions to Mr Nightingale from the Applicant or the other Interested Parties.

The PPC Questions Mr Nightingale

In response to a question from Mr Dykes, Mr Nightingale explained that delivery driver training covered: a 13 week induction period incorporating; medicines assistant to NVQ level 2.

In response to questioning from Mr Thomson, Mr Nightingale advised that low prescription dispensing and over-the-counter sales had resulted in the withdrawal of the Sunday services in the Baillieston Road. He also said the Shettleston Road pharmacy only opened as a supermarket on Sunday.

In response to questioning from Professor McKie, Mr Nightingale defined his Shettleston Road pharmacy neighbourhood as extending westerly and easterly:

West – Westmuir Street

East – Killin Street

In respect of the Baillieston Road Pharmacy he defined this pharmacy's neighbourhood as the same as the Applicants with the exception of the north and eastern boundaries as:

North – Edinburgh Road

East – Baillieston Health Centre

In response to further questioning from Professor McKie, Mr Nightingale advised that National Co-op's Shettleston Road pharmacy had relocated, about 18 months ago, from stand alone premises further along the road into the food store. He accepted there was now a cluster of pharmacies within the Shettleston Road but had not considered relocating the pharmacy anywhere else.

Following final questioning from Professor McKie, Mr Nightingale advised that the Shettleston Road pharmacy was not busy and if this application was approved it might put this contract's continued viability at risk.

In response to Mr Reid's question on confirmation whether the Baillieston Road pharmacy was in Baillieston or Barrachnie, Mr Nightingale confirmed that it was in Baillieston.

In response to questioning from Dr Johnson, Mr Nightingale said he did not believe that patients were experiencing problems accessing services in Shettleston Road. There were two or three routes they could use. Furthermore, for patients who were unable to travel, the pharmacy provided a 'collection & delivery' service. He added that he did not believe patients experienced any problems accessing the Tesco Store or the other shops within this area.

In response to questioning from Mrs Lynch, Mr Nightingale advised that the Tesco Store had been opened before the pharmacy had relocated along the Shettleston Road. He believed that Tesco may have had an affect on food store sales but he did not think the pharmacy had been affected.

There were no questions to Mr Nightingale from Mr MacIntyre.

The Interested Parties' Case – David Henry (Lloyds Pharmacy)

Mr Henry thanked the Committee on behalf of Lloyds Pharmacy for the opportunity to attend the hearing.

Mr Henry stated that the Lloyds pharmacy offered the full range of pharmaceutical services, which also included: Keeping Well project; delivery & collection services (trained staff) and oxygen to the residents of Budhill and surrounding areas. He said that this pharmacy had been unsuccessful in its application to offer 'needle exchange' services but these services were available from the Lloyds pharmacy at Easterhouse. He therefore did not believe that was an inadequacy of this service in the area.

He defined the neighbourhood as going up to Weehouse Road and the general Springboig area.

He disagreed with the Applicant there was a shortfall in the adequacy of services and therefore did not consider the application to be either necessary or desirable. He therefore requested the Committee to reject the application.

The Applicant Questions Mr Henry

In response to the Applicant's question, Mr Hendry stated that Lloyds had not attempted to take over the lease on 3 Budhill Avenue. He confirmed that Lloyds had simply made enquires over ownership of the lease.

There were no questions to Mr Henry from the Interested Parties.

The PPC Questions Mr Henry

In response to a request from Professor McKie, Mr Hendry elaborated further on the pharmacy's neighbourhood.

There were no questions to Mr Henry from Mrs Lynch, Mr Reid, Dr Johnson, Mr Dykes and Mr MacIntyre.

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

Ms Irving advised the Committee that Alliance owned two pharmacies within the area. She defined the neighbourhood as:

North – Edinburgh Road to

West – Carntynehall Road down to Shettleston Road

South – along Shettleston Road to Hallhill Road

East – Hallhill Road until it meets the cemetery.

Ms Irving advised that patients were provided with the full range of pharmaceutical services for 'all addresses' including a collection & delivery service. Domiciliary services were also available, on request. Subutex supervision services were offered and she was not aware that the Board was about to extend current needle exchange services. An application for the provision of Levonelle had been made but was unsuccessful. The pharmacies offered services from 9am to 6pm- Monday to Friday and 9am to 5pm on a Saturday. Ms Irving believed that patients could currently gain access to pharmaceutical services within a 15 minute walk. In her opinion she considered the Tesco store to be accessible to all residents north of the railway line.

Finally, Ms Irving totally disagreed with the statistic provided by the Applicant saying that G32.0 covered a much wider area than the neighbourhood she had defined. She also found it difficult to accept the apparent verbal views relayed by the Applicant from 100 residents that services were not adequate, when no evidence had been provided. She believed that current services were adequate and therefore requested the Committee to reject the application.

There were no questions to Ms Irving from the Applicant or the other Interested Parties.

The PPC Questions Ms Irving

In response to questioning from Mr Dykes, Ms Irving accepted that the take-up for the 'Home Visit' service was low and did not believe this to be a deprived area. She had not researched the numbers of people who walked over the railway bridge and restated that was acceptable to patients to walk 15 minutes to access pharmaceutical services. She added that although it might be ideal for patients to walk 5 minutes for services, she believed this to be unrealistic.

In response to questioning from Mr MacIntyre, Ms Irving confirmed that the Addiction Service is provided with weekly available methadone supervision spaces however, the pharmacy were never asked for information on Subutex capacity.

Following questioning from Mr Thomson, Ms Irving confirmed that the pharmacist in the Shettleston Road pharmacy was a permanent member of staff. Other staff included: a pre-registration student and qualified dispensers.

In response to questioning from Professor McKie, Ms Irving stated that she believed that from the centre of the neighbourhood, the nearest pharmacy was less than 15 minutes away. She added the clustering of pharmacies on Shettleston Road was historic, although there were no degrees of adequacy recognised by the Regulations she believed that services were '*more than adequate*'. After further questioning she agreed that there was probably an over provision of services on Shettleston Road.

Following questioning from Mr Reid, Ms Irving stated that she believed it to be a 15 minute walk from the site of the proposed pharmacy to Shettleston Road, which was reasonable.

In response to Dr Johnson question asking if more pharmacies were required on Shettleston Road, Ms Irving did not believe more pharmacies were required as no pharmacies had closed.

In response to questioning from Mrs Lynch, Ms Irving agreed this neighbourhood was one of the most deprived communities in the area but the demand for services were being met and there was still under capacity for the addiction services.

The Interested Parties' Case – Ms Lynn Duthie (Lightburn Pharmacy)

Ms Duthie referred to the Chair's guidance on keeping case presentations succinct but she apologised in advance to the Committee if here own presentation did in fact restate points previously made. This was because she would be reading from a presentation that had been prepared previously.

She was presenting the Lightburn Pharmacy case in accordance with The

Legal Test to define adequacy of current services and the necessity & desirability of the application under consideration.

She defined her neighbourhood as:

North – Edinburgh Road

West – Carntynehall Road

South – Shettleston Road

East – Gartocher Road and along Springboig Road

Ms Duthie said there were seven pharmacies currently within this neighbourhood. It was a 5 to 7 minute walk to Shettleston Road from the proposed premises and a 10 minute walk to the Lightburn Pharmacy, which was also serviced by very good bus routes. The journey time by car was only minutes with adequate parking available.

Ms Duthie said the Lightburn Pharmacy offered the full range of pharmaceutical services along with: medication reviews; Heart Failure; Keep Well; Falls; Pre registration training; collection & delivery; NRT; Oxygen; Methadone; Subutex; blood pressure measurement; Stoma, Starting Fresh, Head Lice and home visits. Levonelle provision had been applied for but the application had not been successful. The Pharmacy covered an area of 160 square meters, was DDA compliant, had a consultation room and was manned by two pharmacists, one pharmacist being a supplementary prescriber. The pharmacy opening hours were from 8.30am to 6.30pm on Monday to Friday and 9.00am to 12.30pm on a Saturday. There had been a substantial investment in these new premises.

She stated that she believed the Applicant's proposed pharmacy would probably only serve the immediate area in the vicinity of the premises, which was therefore only a few streets. The remaining part of the neighbourhood was either served by existing pharmacies or covered the Greenfield recreation areas.

She also pointed out that the only Medical Practice in the neighbourhood was a branch practice with the main practice on the Edinburgh Road.

Ms Duthie finished by stating that she believed that there had been no changes in the provision of pharmaceutical services within the neighbourhood since the consideration of previous applications, all of which had been rejected. Ms Duthie therefore urged the Committee to dismiss this application.

The Applicant Questions Ms Duthie

Ms Duthie confirmed the pharmacy had not received any complaints from patients in respect of prescription waiting times and the pharmacy closed daily for lunch between 1pm to 2pm.

There were no questions to Ms Duthie from the other Interested Parties.

The PPC Questions Ms Duthie

Following questioning from Mrs Lynch, Ms Duthie estimated it was a 15 minute foot journey from Budhill Medical Surgery to her pharmacy. She acknowledged that this was an uphill journey (unless the patient used Hermiston Road) but added there was a frequent bus services available and the pharmacy also offered a collection & delivery service.

In response to questioning from Dr Johnson, Ms Duthie stated that the proposed premises were closer to the Shettleston Road pharmacies than the Lightburn Pharmacy.

In response to questioning from Professor McKie, Ms Duthie said there were five bus services that patients could use to get to the Lightburn Pharmacy. One or two offered a 12 minute service. Patients generally went to the pharmacy closest to them so patients living on Inveresk Street and above would use this pharmacy.

In response to questioning from Mr Thomson, Ms Duthie explained that closing the pharmacy during lunchtime provided the opportunity to undertake prescription processing. She also added that GPs did not consult at that time and therefore there were no patients and it was generally believed to be good for staff to have this break at this time.

In response to further questioning from Mr Thomson, Ms Duthie confirmed the pharmacy did not have any supplementary prescribing clinics currently established.

Following questioning from Mr MacIntyre, Ms Duthie indicated that the continuation of two pharmacists within the pharmacy may be threatened if this application was approved.

There were no questions to Ms Duthie from Mr Reid and Mr Dykes.

The Interested Parties' Case – Mr Robertson (Robertsons Chemist & Shettleston Health Centre Pharmacy)

Mr Robertson stated that the area was well provided with pharmaceutical services and the Shettleston Health Centre Pharmacy was involved in providing new pilot projects & services. He pointed out the dispensing of acute & repeat prescription was very different. For repeat prescriptions, patients usually used pharmacies close to where they were shopping. He accepted there were a number of streets in the close proximity to the proposed pharmacy but he added that patients living in this area did not currently have any problems securing services. He said that there were perfectly adequate services within the area and therefore the application should not be approved.

There were no questions to Mr Robertson from the Applicant or the other Interested Parties.

The PPC Questions Mr Robertson

Following questioning from Mr Thomson, Mr Robertson stated the Shettleston Health Centre Pharmacy did not offer methadone services at the request of the GP's within the Health Centre.

There were no questions to Mr Robertson from Mrs Lynch, Dr Johnson, Mr Reid, Prof McKie, Mr MacIntyre and Mr Dykes.

The Interested Parties Sum Up

Mr Robertson stated to the Committee that he had nothing more to add.

Ms Duthie reiterated to the Committee that the neighbourhood area was relatively small and currently adequately serviced by seven pharmacies.

Ms Irving stated that the Applicant had provided no evidence to the Committee that current pharmaceutical services within the neighbourhood were not adequate.

Mr Henry said that the Applicant had failed to show an inadequacy in current services and therefore asked the Committee to reject the application.

Mr Nightingale advised the Committee there was an abundance of pharmacies within the area providing adequate services under the terms of the Regulations.

The Applicant Sums Up

The Applicant advised the Committee that there was one pharmacy currently within the defined neighbourhood. She emphasised that Springboig was a unique community with its own problems. It saw itself as a separate community and quite distinct from the other communities using the services on the Shettleston Road. She restated that a community pharmacy should be based in the 'heart of the community' and therefore it was essential for the people of Budhill to have their own pharmacy. She proposed that the pharmacy would fully engage in the provision of pharmaceutical services including those that would support the public health agenda.

She asked the Committee to support this application for this under privileged community.

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. The Applicant and all Interested Parties confirmed they had.

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 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 proposed 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 post-code areas G32.0 and G32.7;
- f) Patterns of public transport; and
- g) NHS Greater Glasgow and Clyde plans for future development of services.

DECISION

Having considered the evidence presented to it, and the PPC's observation 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. The Committee defined the neighbourhood as being:

South: along the Shettleston Road to;

East: Gartocher Road along Hallhill Road up Croftspar Gate across the field to Tanfield Street ;

North: the Edinburgh Road:

West: down Cardowan Road, across playing fields opposite Addiewll Street to Torphin Crescent. Down Torphin Crescent across Inveresk Street, down Duror Street, across Old Shettleston Road to Kenmore Street.

The Committee felt that this was a distinct neighbourhood. The area was bound by the physical barriers created by Edinburgh Road and Shettleston Road. The area within these boundaries was primarily residential. The Committee believed there was limited to no future residential development opportunities. The Committee did however, consider there to be a sense of community within this area.

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.

There were currently six pharmacies within the neighbourhood, as defined by the Committee.

The Committee noted that within this neighbourhood, five pharmacies were clustered in and around the Shettleston Road area. The Committee therefore questioned the adequacy of service provision within the neighbourhood as a whole and in particular the area of the proposed pharmacy, which offered its own local shopping. The Committee were concerned that patients currently had to undertake a 15 to 20 minute walk to reach a pharmacy. In the Committee's view, it was believed that this was particularly difficult for the elderly and immobile of the population. For patients accessing the services of Lightburn Pharmacy this resulted in a steep uphill walk, which in its self was a natural barrier and a challenge for residents. The Committee therefore considered that the granting of the application was necessary as current pharmaceutical services within the defined neighbourhood were deemed inadequate.

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

DECIDED/-

The PPC was satisfied that the provision of pharmaceutical services at the proposed premises of the Applicant was necessary in order to secure adequate provision of pharmaceutical services within the neighbourhood; it was the unanimous decision of the PPC that the application be approved.

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

4. ANY OTHER BUSINESS

No matters discussed.

**Contractor
Services
Supervisor**

5. DATE OF NEXT MEETING

Scheduled for Tuesday 18 September 2007 at 12.30pm. Venue to be confirmed.

The Meeting ended at 4.50p.m.