

NOT YET ENDORSED AS A CORRECT RECORD

Pharmacy Practices Committee (13)

Minutes of a Meeting held on
Tuesday 18th September 2007

The Activity Room, The Bridge, 1000 Westerhouse Road, Easterhouse
Glasgow, G34

PRESENT:	Andrew Robertson	Chair
	Prof J McKie	Lay Member
	Mrs Charlotte McDonald	Deputy Lay Member
	Dr James Johnson	Non Contractor Pharmacist Member
	Colin Fergusson	Deputy Contractor Pharmacist Member
	Scott McCammon	Deputy Contractor Pharmacist Member

IN ATTENDANCE	Trish Cawley	Contractor Services Supervisor
	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.

The Chair welcomed Mrs McDonald and Mr McCammon to their first Pharmacy Practice Committee and thanked them for accepting membership of the Committee.

1. APOLOGIES

Apologies were received on behalf of Robert Gillespie and Mr W Reid.

2. MINUTES

The Minutes of the meetings held on Wednesday 8th August 2007 **PPC[M]2007/11** and Wednesday 22nd August 2007 **PPC[M]2007/12** were approved as correct records.

3. ANY OTHER BUSINESS NOT INCLUDED IN AGENDA

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

ACTION

Section 1 – Applications Under Regulation 5 (10)

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

Case No: PPC/INCL14/2007

Mr Neeraj Salwan, Apple Pharmacy – 2 Old Gartloch Road, Gartcosh, Glasgow G69 8EU

The Committee was asked to consider an application submitted by Mr Salwan, to provide general pharmaceutical services from premises situated at 2 Old Gartloch Road, Gartcosh, Glasgow G69.8 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 Mr Salwan, 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 Neeraj Salwan ("the Applicant"), assisted by Mr Harminder Shergill. The interested parties who had submitted written representations during the consultation period, and who had chosen to attend the oral hearing were Mr David Sinclair, (Sinclair Shops Ltd), Ms Rafedah Salani (Glenboig Pharmacy), and Mr Douglas Miller (Greater Glasgow & Clyde Area Pharmaceutical General Practitioner Subcommittee) ("the Interested Parties").

Prior to the hearing, the Panel had collectively visited the vicinity surrounding 2 Old Gartloch Road, Gartcosh, Glasgow G69.8, the immediate neighbourhood and the pharmacies, GP surgeries and facilities in the wider areas of Glenboig, Mount Ellen and Muirhead.

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.

Thereafter each of the interested parties would make their submission with the opportunity for the Applicant and the PPC to ask questions after each submission. The Interested Parties and the Applicant were then given the opportunity to sum up.

The Applicant's Case

The Applicant commenced his presentation by thanking the Committee for giving him the opportunity to present his case. He apologised for not submitting a statement in support with his initial application.

The Applicant advised the Committee that he considered the neighbourhood to be served by the proposed pharmacy to be the area known as Gartcosh. This consisted of the locality of Gartcosh and the settlement of Mount Ellen. The Applicant's neighbourhood was defined as:

North: the boundary of Mount Ellen golf course bordered by the Bothlin Burn;

East: the M73 Motorway;

South: the Bothlin Burn and Bishop Loch; and

West: the Garnkirk Moss and Heathfield Moss.

Neighbourhood facilities included local schools, a community hall, a church, a Boys Brigade hall, a public house, a social club, children's park, a toddler's group, a community bowling green, football ground, cemetery, golf course, a tea house with function room and a train station.

The Applicant advised that he had included Mount Ellen as part of the neighbourhood due to its proximity to Gartcosh. He advised that both areas shared the aforementioned facilities and Mount Ellen residents considered themselves neighbours of residents in Gartcosh and vice versa, with facilities within easy walking distance along well lit pedestrian pavements.

The Applicant advised that the area to be served by his proposed pharmacy was different to the Glenboig area which had its own facilities for its residents. He advised that for at least half a mile along the main access road between Gartcosh and Glenboig, known as Johnston Road, there was no street lighting or proposed pedestrian pavements making it inaccessible by foot especially for the elderly and infirm. There was one local bus service which operated on an hourly basis to Muirhead and Glenboig. Glenboig was not part of Gartcosh and this view was reiterated by the Pharmacy Practice Committee of Lanarkshire Health Board during its oral hearing in September 2006 where it considered an application for an application to establish a pharmacy in Glenboig. The Committee defined the neighbourhoods of Glenboig and Gartcosh as being more than one neighbourhood and that Gartcosh was a distinct neighbourhood in its own right.

The Applicant advised the Committee that there was significant new

development being attracted to the area.

- **Heathfield Park; an area of residential development comprising 300 family houses. This build was complete and the Applicant considered with an average occupancy of 4 persons per house, the development had increased the population by 1,200 residents.**
- **Gartloch Village; a residential development on the site of the former Gartloch Hospital comprising 500 family houses. This build was in progress and with an average occupancy of 4 persons per house, the development, once complete, could result in an increase in population of 1,500 residents.**
- **Newgate development; this area of residential development was situated directly opposite the Applicant's proposed premises. The development comprised 30 apartments, which with an average occupancy of 3 persons per house had resulted in an increase in population of 186 residents.**
- **Highfields development (Mount Ellen) – no specific details.**

The Applicant advised that the former Gartcosh steelworks site was earmarked for development with a possible 500 residences as part of the Gartcosh Masterplan. This development was to address the 3000 new jobs being created at the Gartcosh Business Interchange. Furthermore a new police intelligence centre, Serious Organised Crime Agency for Scotland (SOCAS) was being planned at the site at a cost of £40 million which would house the Scottish Drug Enforcement Agency and Strathclyde Police Forensic Science Department. In addition a new nursery was planned with 50 spaces on the banks of the Johnstone Loch.

The Applicant advised the Committee that consideration should be given to changes due to future new developments such as those shown above as these would have a bearing on adequacy of services provided to an increasing population. The Applicant suggested that this was particularly apt in this situation as the population was to rise sharply in Gartcosh. Some of the new developments were in more advanced stages than others but the Applicant felt that a pharmacy was required now to be able to offer new contract services to the current population.

The Applicant then went on to address adequacy of existing services. He advised that there were currently no pharmaceutical services in the defined neighbourhood. In fact there were no healthcare facilities in the neighbourhood. According to statistics for Gartcosh and Mount Ellen from 2004 SCROL locality data, 25.78% of the population was economically inactive, were permanently sick or disabled as compared to a Scottish average of 21.25%. 12.71% were said to be "not in good health" as opposed to a Scottish average of 10.15%. The Applicant asserted that it was not easy for these elements of the population to travel outwith the Gartcosh neighbourhood to obtain health care. It had been proven with previous contracts that had been granted that there was no substitute for a local community pharmacy providing dedicated pharmaceutical provision through healthcare advice to neighbourhood

residents. The new pharmacy contract concentrated more on pharmacists providing pharmaceutical care rather than depending solely on the supply function. This advocated that patients should have ready access to their pharmacist in the pharmacy for advice on a one to one basis. The focus on local care was reinforced in the Scottish Executive's "Delivering for Health" 10 year plan, which stated clearly the desire of the Scottish Executive for Pharmacies to provide preventative health care advice in the heart of the local community that it serves and that this advice should be provided in modern, well equipped, easily accessible premises. The Applicant advised that currently to access pharmaceutical services, the population of Gartcosh needed to travel outwith the area relying on either private or public transport. A local bus operated on an hourly basis, which meant that those without access to a car would have a long wait or walk if they missed the hourly bus. This went against the principles contained in the Delivering for Health document.

The Applicant advised that he had conducted cash flow projections and profit and loss projections, and with the backing of the Applicant's 15 strong pharmacy chain, considered there would be no viability issues. The only salaries that would be initially drawn out of the new pharmacy would be for one member of staff and a pharmacist. The Applicant would offer a collection and delivery service by using their existing driver who serviced the Craigend branch. With the company's buying power and group discounts, the "bottom line" would be profitable, as the Applicant's company would have preferential deals on insurance, phone costs, maintenance issues, drug purchasing for dispensary and over the counter medicines through central buying. The Applicant suggested that the new pharmacy would require dispensing in the region of 1,200 items per month to be profitable and on this business model the Applicant was confident that this could be achieved. The Applicant was confident that he could secure adequate provision of pharmaceutical services to the neighbourhood. With the new payment structure around the pharmacy contract there was less reliance on volume dispensing and more reliance on providing services. The Applicant believed the neighbourhood had a large enough population for the pharmacy to make a profit by advocating services such as Minor Ailment Service (MAS), Public Health Service (PHS), Nicotine Replacement Therapy (NRT), public awareness, Chronic Medication Service (CMS), Acute Medication Service (AMS), assessing compliance aid needs, diagnostic services such as blood pressure monitoring and diabetes testing, methadone supervision, supply of ostomy products, supplementary prescribing clinics, oxygen provision, head lice service, model schemes and a palliative care service.

The Applicant went on to confirm that no planning consents or building warrants were required for the 1,000 square foot pharmacy. The company had negotiated a 10 year lease with rent review in year three and break option in year five. The pharmacy would be fitted out by a specialist pharmacy shop fitting company who would adhere to all Royal Pharmaceutical Society of Great Britain (RPSGB) guidelines and current Disability Discrimination Act requirements. The shop had an electricity and gas supply with clean running water. Ample parking was available

outside the unit and the owner was concentrating his efforts on attracting a dentist and optician to the range of shops in the parade. The Applicant advised that the company had the full backing of Gartcosh Community Council, and the local councillors who represented the views of the residents of Gartcosh. The Applicant advised the Committee that he believed that the current pharmaceutical services provided in the neighbourhood were inadequate as there was no pharmacy in the neighbourhood. The Applicant urged the Committee to take into consideration the growth in population that would occur over the next few years and to consider the granting of the application as desirable even if they considered the pharmaceutical provision to be borderline.

The Interested Parties' Question the Applicant

In response to questioning from Mr Miller, the Applicant confirmed that he believed there to be sufficient business within the Gartcosh area to ensure the proposed pharmacy was viable. He pointed to the increase in population as a result of the numerous new developments in the area. He agreed that building the business would take considerable work, but that he was confident he could make a success of the venture.

In response to questioning from Mr Sinclair, the Applicant confirmed that the figures included in his presentation for potential increase in population resulting from new developments were based on estimations and not on any official or documented figures. He further confirmed that he did not agree that many of the new houses would be occupied by young couples rather than families which would reduce his estimated increase.

In response to questioning from Ms Salani, the Applicant confirmed that the boundaries of his neighbourhood were as follows:

North: the boundary of Mount Ellen golf course bordered by the Bothlin Burn;

East: the M73 Motorway;

South: the Bothlin Burn and Bishop Loch; and

West: the Garnkirk Moss and Heathfield Moss.

In response to further questioning from Ms Salani, the Applicant identified the location of the public house on the map.

In response to further questioning from Ms Salani, the Applicant confirmed that he had included the area of Mount Ellen in his neighbourhood as he felt there to be cross cover of services between the two locations. By means of illustration he pointed to the fact that the school in Gartcosh attracted pupils from Mount Ellen and the existence of a business in Mount Ellen called Gartcosh Motors. It was the Applicant's opinion that the two areas were neighbours.

In response to further questioning from Ms Salani, the Applicant confirmed that he believed that the distance between Mount Ellen and

Gartcosh was walkable. He explained that he had visited the area yesterday and had witnessed people walking along the length of Lochend Road. He confirmed that he felt the distance between the two areas could be covered by a five – ten minute walk.

The PPC Question the Applicant

In response to questioning from Professor McKie, the Applicant identified the location of the Gartcosh Steelworks on the map included in the PPC's papers. He confirmed that he felt this to be equidistant between Glenboig and Gartcosh and that there was an access road to the site beside the railway station.

In response to further questioning from Professor McKie, the Applicant confirmed that he was not aware how the demographic statistics for the Gartcosh area around the % of population deemed disabled compared with the average figures for Glasgow as a whole.

In response to a question from Professor McKie around Essential Small Pharmacy status, the Applicant advised that he did not believe that such an application would be necessary, if his proposal was granted.

In response to questioning from Mrs McDonald, the Applicant confirmed that he was aware that the GP practice situated in Muirhead was soon to relocate. In response to Mrs McDonald's question around why patients registered with this practice should take their prescription to a pharmacy in Gartcosh, when there were already existing pharmacy services in Muirhead, the Applicant advised that the provision of pharmaceutical service was not reliant on prescription business. He was confident that the requirements of the new pharmacy contract would allow the new pharmacy to provide services to the local community which were more beneficial if provided in the community.

In response to questioning from Mr McCammon, the Applicant advised that his demographic figures had been obtained from SCROL 2004. He was unaware of how many residents in Gartcosh actually worked in Gartcosh.

In response to questioning from Dr Johnson, the Applicant confirmed that there was a significant elderly population within Gartcosh who would benefit from collection and delivery services, as well as the minor ailment service. The minor ailment service would also benefit mothers with young children, who would avail themselves of other services proposed by the pharmacy including head lice treatment.

In response to further questioning from Dr Johnson, the Applicant confirmed that at this point it was difficult to ascertain what level of staffing would be required for the potential new pharmacy. He advised that additional cover could be drafted in from the company's Craigend branch if this was required.

In response to final questioning from Dr Johnson around the 2001 Census figures, the Applicant agreed that these showed that the average head of population per pharmacy in Gartcosh was around half the Glasgow average. In response, however, the Applicant advised that his application was made in preparation for the increase in population expected from the new developments in the area. The resultant community would require healthcare facilities within the neighbourhood.

In response to questioning from Mr Thomson, the Applicant confirmed that he was aware that he was committed only to provide the four core services included in the new pharmacy contract, and that participation in any of the additional services would be at the discretion of the Health Board. The Applicant confirmed that he did not believe the viability of the pharmacy would be affected if he could not participate in any of the additional services.

In response to further questioning from Mr Thomson, the Applicant confirmed that he believed that the residents of the Heathfield development would, once the development was complete, utilise the services provided from the new pharmacy.

There were no questions to the Applicant from Mr Fergusson or the Chair.

The Interested Parties' Case – Mr David Sinclair (Sinclair Shops Ltd)

Mr Sinclair thanked the Committee for allowing him to make his representation. He advised the Committee that for the most part he agreed with the Applicant's assertions. The one area where he disagreed was with the north boundary put forward by the Applicant. Mr Sinclair did not agree that the area of Mount Ellen should be included in the defined neighbourhood. There was a steep gradient between the two areas, and Mr Sinclair felt it more likely that the residents in Mount Ellen would make use of facilities provided in Muirhead rather than Gartcosh.

Mr Sinclair agreed that the proposed new developments would result in an increase to the overall population, however he did not agree that there would be average of four persons per new residence and felt that an average of 2/2.5 would be a more realistic figure. If this figure was accepted, Mr Sinclair called into question the viability of a new pharmacy. He advised the Committee that he had some experience of similar contracts in other Health Board areas and suggested that an average of 2,000 items was necessary to ensure viability unless the pharmacy could attract business from other areas outwith their defined neighbourhood. He asked that the Committee look not at the potential viability of the proposed pharmacy in Gartcosh, but rather the effect that the granting of a new contract would have on existing contracts in the area. He did not believe it appropriate that a further contract should be

granted at the expense of another.

The Applicant Questions Mr Sinclair

In response to questioning from the Applicant, Mr Sinclair agreed that Gartcosh was a separate area from Glenboig. He however reiterated that the viability of other contractors in the area needed to be taken into consideration.

In response to further questioning by the Applicant, Mr Sinclair agreed that a new pharmacy in Gartcosh may be of benefit to the area, but he felt that a new contract could only succeed by taking business away from the current contract in Glenboig.

There were no questions to Mr Sinclair from the other Interested Parties or any of the Committee.

The Interested Parties' Case – Mr Douglas Miller (Greater Glasgow & Clyde Area Pharmaceutical General Practitioner Subcommittee)

Mr Miller advised the Committee that he reiterated the views of the Subcommittee. The area of Gartcosh had a population estimated at around 1,000. It was not deprived and the Subcommittee did not feel the granting of the application to be necessary or desirable.

The Applicant Questions Mr Miller

In response to questioning from the Applicant, Mr Miller confirmed that he considered the neighbourhood to be the whole town of Gartcosh.

There were no questions to Mr Miller from the other Interested Parties.

The Committee Question Mr Miller

In response to questioning from Professor McKie, Mr Miller confirmed that the population figures put forward by the Subcommittee were estimated figures.

In response to questioning from Dr Johnson, Mr Miller agreed with Dr Johnson's assertion that some applicant's submitted full supporting documentation with their application and some did not. He advised that the GP Subcommittee found it useful to have a full submission to ensure their decision was sound and based on firm evidence. He had no opinion on why applicants chose not to submit supporting documentation.

There were no questions to Mr Miller from Mrs McDonald, Mr Ferguson, Mr McCammon, Mr Thomson, or the Chair.

The Interested Parties' Case – Ms Rafedah Salani (Glenboig Pharmacy)

Ms Salani advised the Committee that she did not agree with the Applicant's definition of neighbourhood. She believed that Gartcosh was a settlement which did not include the area of Mount Ellen. Gartcosh had been in the past a mining village. According to recent statistics Gartcosh had 410 households with an overall population of 952. Ms Salani conceded that the population would have increased since those recorded in the 2001 Census and asserted that as the number of residences within the area increased so did a number of other factors. Within the area of Gartcosh there were 7% more detached homes than the Scottish average. The number of owner occupied houses was 72%, 10% above the Scottish average. The area of Gartcosh was relatively wealthy with car ownership above the Scottish average. 77% of the population had at least one car, 29% of the population had 2 cars, with 6% of the population having 3 or more cars. This resulted in a population which was mobile and had the ability and affordability to travel outwith the area to access services.

Ms Salani explained that 14% of the population travelled to work by car, with 14% using public transport. The population travelled outwith the area to obtain their day to day services including the purchase of household products, and the paying of bills; using areas such as Easterhouse, Coatbridge, and Muirhead. They did this because they were mobile and there was a lack of modern neighbourhood services within the Gartcosh area. There was no post office, no GP and no dentist. Ms Salani asserted that the lack of modern services prevented the area from being considered a neighbourhood for all purposes

Ms Salani explained that those buying houses in Gartcosh needed to be wealthy as the average house price was around £197k. She suggested that the majority of residents needed to work to sustain this lifestyle and this was borne out by the statistic that Gartcosh had 9% higher than average element of full time economically active population. It was also 4% above the Scottish average of residents who could be considered "healthy". These statistics suggested that there would be little demand for a pharmacy in a population where 80% of the population won't need to use pharmaceutical services regularly.

Ms Salani proposed the view that a pharmacy would be unsustainable with a defined population of 952 (according to 2001 Census statistics) when taking in to account the proposed increase in population from the new developments within the area. She pointed out that a Department of Health report concluded that there were three essential businesses, the absence of which could jeopardise a community. These were: a GP practice, a pharmacy and a source to obtain cash – normally a post office. Currently there was none of these facilities within the Gartcosh area. Including a pharmacy in the area could jeopardise other existing businesses.

In finishing, Ms Salani advised that the application was not necessary. The neighbourhood population was happy to travel outwith the area,

and she urged the Committee to reject the proposal.

The Applicant Questions Ms Salani

In response to questioning from the Applicant, Ms Salani advised that when she had initially made her application for a pharmacy in Glenboig, she had included Gartcosh in her proposal. She confirmed that this had been removed from the argument put forward at the subsequent National Appeals Panel hearing. She advised that excluding Gartcosh had been beneficial to her case, as the health statistics for Gartcosh actually improved the health profile of the initial defined neighbourhood. Eliminating Gartcosh had actually benefited her case.

In response to further questioning from the Applicant, Ms Salani advised that she believed the average occupancy per residence to be 2.3. This figure had been obtained from a formal source while conducting research for her application in Glenboig. She was not able to recall the source.

In response to further questioning from the Applicant, Ms Salani asserted that the population statistics may have changed since those shown by the 2001 Census. She surmised that the elderly population had continued to decrease as she was unsure that the new developments within the area would be attractive to the elderly. She asserted however that the 2001 Census statistics were the most up to date available and she had had to rely on these to underpin her argument.

The Applicant asked Ms Salani how she could differentiate between Mount Ellen and Gartcosh when she had defined Gartcosh as the same area as Glenboig in support of her argument for a new pharmacy in Glenboig. Ms Salani advised that she had not included the Gartcosh area in her presentation to the National Appeals Panel around her Glenboig application. In terms of differentiating between Mount Ellen and Gartcosh she advised that there was a large loch between the two areas. She considered Mount Ellen to be a settlement in its own right. It had its own shops and she did not consider it part of Gartcosh. She asserted that the people living in Mount Ellen would be more likely to travel to Station Road in Muirhead for their services than to go to Easterhouse. In response to further questioning from the Applicant, Ms Salani confirmed that those living in Mount Ellen may travel along Lochend Road rather than cross the loch. She did not however consider this to be a 5-10 minute walk.

Ms Salani responded to the Applicant's question around inadequacy, by asserting that the population of Gartcosh was mobile. They needed to travel outwith the area for their day to day requirements, and therefore the provision of pharmaceutical services to this population was not inadequate. She asserted that she did not believe a pharmacy in Gartcosh would provide some of the population's day to day

requirements as those living in Gartcosh were relatively healthy. The demand for services would be minimal and services were provided nearby for those who did require to access them. She agreed that even those who were considered mobile could at times be ill, however asserted that services were already provided for these people from the existing pharmacies nearby. She advised that she had conducted a leaflet drop to the area of Gartcosh publicising the collection and delivery services operated from Glenboig Pharmacy. There had been no demand for this service from the population of Gartcosh. From this she had concluded that either there was no demand for the collection and delivery service itself, or that there was no demand for pharmaceutical services at all.

The Interested Parties' Question Ms Salani

In response to questioning from Mr Sinclair, Ms Salani advised that she had advertised her collection and delivery services to all residents within the Gartcosh area. This had been done by means of a leaflet drop.

In response to questioning from Mr Miller, Ms Salani advised that she would be affected if the Applicant's proposal was granted. Her pharmacy in Glenboig had been operating for only seven weeks. At the moment she relied solely on the custom generated from the population within Glenboig, but in the long-term she felt that an additional contract in the area would affect the viability of Glenboig Pharmacy and others within the area.

The Committee Question Ms Salani

In response to questioning from Mr Thomson, Ms Salani advised that she had conducted a leaflet drop in Gartcosh as she believed that there would be some within the settlement who could benefit from such a service. She confirmed that she had not undertaken a leaflet drop in any other area.

In response to questioning from Dr Johnson, Ms Salani confirmed that her pharmacy was open over lunch time.

In response to questioning from Mr McCammon, Ms Salani confirmed that she did not consider Gartcosh to be a neighbourhood. In her opinion it was a settlement as the term neighbourhood was used to describe an area for all purposes which included its own amenities. She didn't consider that Gartcosh could be described as such.

Professor McKie asked Ms Salani if she agreed that the granting of a contract in Gartcosh would have little effect on her pharmacy, as by her own assertion the population of Gartcosh was mobile and was likely to access services some distance away. They were of a higher social grouping and her leaflet drop had elicited minimal response from the population. Ms Salani responded that at the moment there was little

demand generated by the existing population. She advised that if the population changed, this could generate more demand. In the long term there would be an affect to her pharmacy in Glenboig. In order to develop her business she would need to draw in custom from outwith the Glenboig area including around Lochend Road, Glenboig Road, Coatbridge and Gartcosh. This would be difficult if an additional contract was granted.

There were no questions to Ms Salani from Mr Fergusson, Mrs McDonald, or the Chair.

The Interested Parties Sum Up

Mr Miller advised the Committee that he had nothing to add to his initial representation.

Mr Sinclair advised the Committee that if granted, the new pharmacy would be viable however this did not mean that the granting of the contract was necessary. It was not desirable as it would result in the sacrifice of one of the existing contracts in the area.

Ms Salani advised the Committee that she had nothing to add to her initial representation.

The Applicant Sums Up

The Applicant advised the Committee that the neighbourhood as defined was increasing rapidly with mainly young families as shown by the types of housing being built. The Applicant advised that infrastructure was being put in place to support the new development. This would have an effect on the demand for pharmaceutical services which would require to be met to secure adequacy of provision within the neighbourhood. This would be best provided by means of a dedicated community pharmacy in the neighbourhood providing all of the new contract services as planned by the Health Board.

The Applicant urged the Committee to consider the facts of his case: the area defined was a neighbourhood. Within this neighbourhood there were currently no healthcare services of any description. The granting of the application would not have any detrimental effect on any other contract in the area. For these reasons the Applicant asked the Committee to grant a new pharmacy contract in the neighbourhood of Gartcosh.

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 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).
- d) Representations received from Chemist Contractors and other consultees via Lanarkshire Health Board whose boundary was within 2km of the Applicant's proposed premises.

The Committee also considered;-

- e) The location of the nearest existing pharmaceutical services;
- f) Demographic information regarding post code sectors G69.8;
- g) Patterns of public transport; and
- h) 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, the Interested Parties, and the GP Sub-Committee. Taking all information into consideration, the Committee considered that the neighbourhood should be defined as follows:

North: The line immediately south of Drumcavel Road to Lochend Road and east to the M73;

West: From Bishop Loch, following north across Gartloch Road to the

northern boundary;

East: the M73, following its crossing with the A752 trunk road, turning west to the Bishop Loch; and

South: from the M73 west to the Bishop Loch.

The Committee felt that this was distinct neighbourhood. Mount Ellen to the north formed a boundary both in terms of social status and housing type. The M73 was a significant physical boundary as was the area of green field to the south which led to the Bishop Loch. The area within these boundaries was, in the Committee's opinion a neighbourhood for all purposes. It contained schools, businesses, churches, a public house and residential areas.

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 no existing pharmacies. The Committee considered this to be a distinct community which was relatively isolated from other areas. While the Committee did not have any formal evidence to support their assertion, they had a sense that the area contained a significant section of population who would remain within the area during the day. Whether this was because they were young, old or due to illness they were nevertheless the elements who most utilised pharmaceutical services. It was known that the area had been one of industry with steelworks and brickworks having previously been in operation in the neighbourhood. This would suggest that some of the population would suffer from long term illness, the management of which relied on the engagement with primary care services. The Committee considered that while the granting of a further contract in the area may not be necessary, the extended role of the pharmacist and the opportunity to provide the population with access to the wider services provided by the new pharmacy contract increased the desirability factor.

The Committee considered that Ms Salani's comments around the potential effect that a further pharmacy would have on her business in Glenboig was speculation and could not be quantified. The Committee was confident that Gartcosh and Glenboig were two separate and discreet areas each with their own amenities and resident population. There was no evidence available to the Committee which would suggest that any of the existing contractors within the wider area would be adversely affected if a contract were granted in Gartcosh.

The Committee accepted that sections of the population within Gartcosh may be considered mobile, however they felt it inappropriate

that residents were required to travel by bus, taxi or car to access modern pharmacy services, including the minor ailments service and the other extended services provided under the new contract. The Committee noted that this argument had been used by Ms Salani in her own application for a pharmacy in the neighbouring area of Glenboig, and had been accepted by the National Appeals Panel in their deliberations.

Taking all information into consideration, the Committee agreed that the population of Gartcosh did not currently have access to adequate provision of pharmaceutical services within their neighbourhood. The granting of a further contract was therefore desirable.

In accordance with the statutory procedure the Chemist Contractor Members of the Committee Colin Fergusson and Scott McCammon 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 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 granted.

The Chemist Contractor Members of the Committee Colin Fergusson and Scott McCammon and Board Officers rejoined the meeting at this stage.

5. APPLICATIONS STILL TO BE CONSIDERED

The Committee having previously been circulated with Paper 2007/41 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:

**Sinclair Shops Ltd – 1927 Maryhill Road, Glasgow G20.0; and
Premichem Pharmacy Ltd, 2 Brucehill Road, Dumbarton G82.4.**

AGREED/-

6. MINOR RELOCATION

Case No: PPC/MRELOC08/2007 – Boots the Chemist, 240 Main Street, Glasgow G73.2

The Committee having previously been circulated with Paper 2007/42 noted that Boots the Chemist had applied to relocate pharmaceutical

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services currently provided from 240 Main Street, Glasgow G73.2. Boots wished to move to alternative premises situated at Unit 13, Mitchell Arcade, Glasgow G73.2. The Committee were advised of the urgent nature of this request as Boots had been granted a temporary extension to the existing lease which would not be renewed. Alternative premises had been identified within the locality which would allow the contractor to continue to provide pharmacy services to the same population

The Joint Lead – Community Pharmacy Development and the Greater Glasgow and Clyde Area Pharmaceutical General Practitioner Subcommittee recommended that the application fulfilled the criteria for minor relocation.

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

DECIDED/-

The PPC was satisfied that the application from Boots the Chemist fulfilled the criteria required under Regulation 5(4) of the current Regulations. It was the unanimous decision of the PPC that the application be approved.

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7. AMENDMENT TO MODEL HOURS OF SERVICE

Case No: PPC/ALT03/2007 – Boots the Chemist, Unit M3/M4 Silverburn Centre, Glasgow G53.6

The Committee were asked to consider an application submitted by Boots the Chemist seeking an alteration to the hours of service recorded in the Pharmaceutical List for the pharmacy to be situated at Unit M3/M4 Silverburn Centre, Glasgow G53.6.

In considering the application in accordance with Regulation 8(3) of the National Health Service (Pharmaceutical Services) (Scotland) Regulations 1995 as amended, the Committee had to determine whether the alteration of hours would affect the adequacy of services in the neighbourhood in which the premises were located.

The Committee noted that the company had recently applied to relocate their pharmacy into the newly established Silverburn Shopping Centre. The company had advised the Board that the Centre Management were proposing opening times of 10.00am to 10.00pm daily. This decision would prevent Boots from adhering to the current Model Hours of Service Scheme as they would not be able to access the site prior to 10.00am. They had therefore asked that authorisation be granted for the opening hours to be: Monday – Friday – 10.00am – 10.00pm; Saturday – 10.00am – 8.00pm; Sunday – 10.00am – 6.00pm.

The Committee noted that the request had been borne out of necessity and that the restrictions were outwith the contractor's control. After comprehensive discussion the Committee agreed that the contractor's request be approved with the caveat that they comply with Model Hours if the Centre Management reconsidered their policy and opened the centre earlier than 10.00am.

DECIDED/-

That the application is approved with the caveat agreed by the Committee.

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

The Committee having previously been circulated with Paper 2007/44 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/MRELOC09/2007 – Dickson Chemist, 6-8 Tullis Street, Glasgow G40 1HN

The Committee considered the action taken by the Chairman on an application for a minor relocation of a NHS Dispensing contract currently held by Dickson Chemist, 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 (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/MRELOC10/2007 – Lloydspharmacy, 10 Moss Street, Paisley PA1 1BL

The Committee considered the action taken by the Chairman on an application for a minor relocation of a NHS Dispensing contract currently held by Lloydspharmacy, 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 (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.

HOMOLOGATED/-

9. ANY OTHER COMPETENT BUSINESS

There was no other competent business.

10. DATE OF NEXT MEETING

Scheduled for Thursday 27th September 2007 at 12.30pm in the Meeting Room, Queens Park House, Langside Road, Glasgow

The Meeting ended at 4.50p.m.