

## NOT YET ENDORSED AS A CORRECT RECORD

Pharmacy Practices Committee (11)  
Minutes of a Meeting held on  
Thursday 16<sup>th</sup> June 2011 at 11.30am in  
COPE, 20 Drumchapel Road  
Glasgow G15 6QE

|                |                          |   |
|----------------|--------------------------|---|
| PRESENT:       | Mr Peter Daniels         | Chairman  |
|                | Mrs Maura Lynch          | Lay Member  |
|                | Mrs Catherine Anderton   | Deputy Lay Member                                     |
|                | Mr Alex Imrie            | Deputy Lay Member                                     |
|                | Professor Howard McNulty | Non Contractor Pharmacist Member                      |
|                | Mr Gordon Dykes          | Contractor Pharmacist Member                          |
|                | Mr Alasdair MacIntyre    | Contractor Pharmacist Member                          |
| IN ATTENDANCE: | Trish Cawley             | Contracts Supervisor – Community Pharmacy Development |
|                | Robert Gillespie         | Lead – Community Care                                 |
|                | Janine Glen              | Contracts Manager – Community Pharmacy Development    |

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

ACTION

No member declared an interest in the application to be considered.

### 1. APOLOGIES

There were no apologies.

Section 1 – Applications Under Regulation 5 (10)

### 2. MINUTES

The minutes of the meeting held on Thursday 21<sup>st</sup> April 2011 PPC[M]2011/08 and Thursday 5<sup>th</sup> May 2011 PPC[M]2011/09 were approved as an accurate record.

### 3. MATTERS ARISING NOT INCLUDED ON AGENDA

Professor McNulty highlighted a typographical error at Page 17 of the minute PPC[M]2011/08. At the point where the Chair had asked all present to confirm that they had had a full and fair hearing, the Minute didn't accurately reflect the names of those present. This was noted.

Professor McNulty asked the Chair if clarification could be sought from Central Legal Office regarding the appropriateness of an Interested Party in attendance at an oral hearing, reading out a prepared statement on behalf of another Interested Party who could not attend the oral hearing due to unforeseen circumstances. This had been allowed at a previous hearing and Professor McNulty was concerned that the PPC, the Applicant and the other Interested Parties had not been given the opportunity of questioning the absent Interested Party.

***AGREED/-***

The Committee agreed that Legal opinion be sought and clarification provided to the Committee at the next opportunity.

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

**Case No: PPC/INCL15/2010**

**Sinclair Shops Ltd, 300 Rotherwood Avenue, Blairdardie, Glasgow G13 2AY**

The Committee was asked to consider an application submitted by Sinclair Shops Ltd to provide general pharmaceutical services from premises situated at 300 Rotherwood Avenue, Blairdardie, Glasgow G13 2AY under Regulation 5(10) of the National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009 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 Sinclair Shops Ltd considered that the application should be considered by oral hearing.

The hearing was convened under paragraph 3 (2) of Schedule 3 to the National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009 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 was whether "the provision of pharmaceutical services at the premises named in the application was 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 David Sinclair, assisted by Mr W Bruce Sinclair. The Interested Parties who had submitted written representations during the consultation period and who had chosen to attend the oral hearing were Ms Lesley Elrick (Boots UK Ltd), assisted by Mr Dave Greer, and Mr Mark Sim (Lloydspharmacy) assisted by Mrs Eleanor Paton.

Prior to the hearing, the Panel had collectively visited the vicinity surrounding the Applicant's proposed premises, existing pharmacies, GP surgeries and facilities in the immediate area and surrounding areas including: Drumchapel Road, Garscadden Road, Gowanlea Avenue,

Golf Avenue, Great Western Road, Sunnyside Drive, Moraine Drive, Kirkhope Drive, Moraine Avenue, Almond Bank, Almond Road, Orchy Crescent, Blairdardie Avenue, Blairdardie Road, Rotherwood Avenue, Baldwin Avenue, Cowdenhill Road, Knightscliffe Avenue, Fulton Street, Bearsden Road, Westerton Avenue, Maxwell Avenue, Canniesburn Road, Pendicle Road, Spey Road and Drumchapel Road.

The Committee noted that the proposed premises were currently being used as a café. The current owner of the premises had confirmed that the unit would be split at the kitchen area. The kitchen area would be retained by the current owner as part of his existing adjacent fish and chip shop business. The remaining space would constitute the pharmacy area, which was not yet fitted out. The Committee had gained access to the premises and had viewed these in their entirety.

The procedure adopted by the Pharmacy Practices Committee (“the PPC”) at the hearing was that the Chair asked the Applicant to make his submission. There followed the opportunity for the Interested Parties and the PPC to ask questions. The Interested Parties were then asked to make their submissions. After each submission, there followed the opportunity for the Applicant and the PPC to ask questions. The Interested Parties and the Applicant were then given the opportunity to sum up.

### **The Applicant’s Case**

**The Applicant** first of all thanked the Committee for allowing him to present the company’s proposal to open a new pharmacy.

He advised that Sinclair Shops Ltd had long considered there to be a gap in pharmaceutical provision in the Blairdardie area. The company had traded for 13 years from premises in Spey Road where approximately 15% of the patients came from the neighbourhood in which the proposed premises were situated. The company had therefore approached the current landlord shortly after the proposed premises were built to discuss the possibility of opening a pharmacy; however the premises had only now become available.

The premises were situated at 300 Rotherwood Avenue, Blairdardie and were currently trading as a café adjoining the chip shop which was also owned by the current landlord. The Applicant intended to open the pharmacy from 9.00am – 6.00pm Monday – Friday; 9.00am – 1.00pm – Saturday and closed on Sunday.

The Applicant proposed the following neighbourhood:

**North: The Forth and Clyde Canal and Great Western Road to Manor Road in the west;**

**East: Knightscliffe Avenue and Wilverton Road but also extending to include Shafton Road;**

**South: Great Western Road from Knightscliffe, continuing west on Archerhill Road and**

**West: Kelso Street, crossing the canal and continuing north to meet Great Western Road.**

The Applicant explained that the northern and eastern boundaries had been defined where access across these was difficult. The southern and western boundaries were defined in consultation with locals who frequented the company's pharmacy in Spey Road.

From the Scottish National Statistics (SNS), the whole "intermediate geography" of Blairdardie East was contained within this defined neighbourhood. The SNS gave a population of 5,688. This was not the population of the whole of the neighbourhood but one which was wholly included in the neighbourhood. The Applicant thought it interesting to note that there were no pharmacies within this area. Including other areas which were part of the neighbourhood as defined, a conservative estimate of population for the neighbourhood would be in excess of 7,500.

The Applicant advised that Blairdardie East had an elderly population of 20.06%, which was above the Glasgow average of 16.18%. 22% of those of working age were employment deprived, compared to a Glasgow average of 17%. Income Support claimants accounted for 7.1% of the population, compared with a Glasgow average of 6.3%.

Adult males who smoked made up 36% of the population, against a Glasgow average of 30.9%. 38.5% of women attending their first maternity appointment were smokers as opposed to a Glasgow average of 16% and emergency admissions to hospital for the elderly were measured at 35,168 per 100,000, compared with a Glasgow average of 29,937

The Applicant did not want to suggest that this neighbourhood experienced the same deprivation levels even of areas surrounding it; but he did contend that the SNS statistics proved that existing healthcare providers were not impacting on the wellbeing of the residents in an adequate way.

The Applicant moved on to discuss existing services. He explained that within the neighbourhood as defined there was one pharmacy, Lloyds at 195-197 Knightswood Road. This pharmacy provided a wide range of services, but the Applicant contended that pharmaceutical provision remained inadequate. He had already demonstrated that this was an aging and unhealthy population, but the biggest barrier to Lloyds pharmacy being able to provide an adequate service was geographical.

He commented that having had the opportunity to visit the neighbourhood the Committee would have seen it was very hilly. Furthermore many of the pavements were not always easy to walk along due to the parking of those around. It was notable that as he had already stated some 15% of patients using the company's pharmacy in Spey Road were from this neighbourhood, and in particular the streets around Gorget Avenue, Rotherwood Avenue and Banner Drive/Road, all of which were close to the proposed premises, suggesting they would choose not to use the Lloyds pharmacy.

The Applicant advised that he had taken time the day before the hearing to determine the time it would take for patients to access services at Lloyds. Walking time from the proposed premises to the Lloyds store was around 20 minutes. Although not within his neighbourhood as defined he also measured time to Boots at Garscadden, which was 15 minutes and to the Sinclair Pharmacy in Spey Road, which was 20 minutes.

The Applicant intended to open a modern attractive pharmacy which would offer both

consultation and treatment rooms, as well as a dedicated area to provide services to methadone patients. The pharmacy would offer all core services and the Applicant would apply to offer as many other programmes as they could including compliance aids, head lice, heart failure, falls and stoma. The Applicant believed an additional pharmacy would greatly improve the health provision in the neighborhood. While no formal plans had been drawn up for the pharmacy as yet, approximately ½ to 2/3 of the area would be given over to a dispensary and health care provision with the remainder of the area given over to the sale of other items and waiting space.

In conclusion, the Applicant concurred that a new pharmacy at 300 Rotherwood Avenue was both necessary and desirable to provide an adequate pharmaceutical service in the neighbourhood.

### **The Interested Parties Question the Applicant**

In response to questioning from **Ms Elrick**, Mr Sinclair advised that those living around the area of Rotherwood Avenue would probably consider themselves residents of the area called Knightswood, but may not necessarily consider themselves neighbours of a person living in Alderman Road. He further confirmed that residents in roads south of Archerhill Road, e.g. Rampart Avenue, currently travelled up the hill to access services. This was what customers of the company's current premises in Spey Road had advised and the situation that was borne out as Spey Road currently saw 15% of its patients coming from the defined neighbourhood.

In response to further questioning from Ms Elrick regarding the services currently provided by Boots and Lloydspharmacy, Mr Sinclair accepted that both companies provided a collection and delivery service from their branches and that such a service was helpful, however he felt the ideal situation would be for residents within a neighbourhood to have face to face consultation with a pharmacist.

In response to further questioning from Ms Elrick regarding how he would define the current service as inadequate, Mr Sinclair advised that the company's current premises in Spey Road received daily requests from local GP surgeries to take on new patients and provide services. He pointed to the SNS which showed that smoking percentages were higher than the Glasgow average as was the level of unemployment. The pharmacy in Spey Road received approximately 7 – 10 requests per day to deliver to patients in the defined neighbourhood.

Mr Sinclair, in response to a question from Ms Elrick regarding travelling times, advised that he had taken 20 minutes to walk from the proposed premises to his current premises in Spey Road. He advised that the route between the two could be dangerous as evidenced by the recent muggings which had taken place. It had taken him 15 minutes to walk from the proposed premises to the Boots branch on Garscadden Road, but he reminded those present that this pharmacy was outwith his defined neighbourhood.

In response to questioning from Ms Elrick regarding public transport, Mr Sinclair advised that he had looked at public transport links, but reiterated that having to rely on a bus to access pharmaceutical services was a less than ideal situation. Pharmacy services should be provided within the neighborhood.

In response to final questioning from Ms Elrick, Mr Sinclair advised that residents within the neighbourhood currently had to travel outwith the neighbourhood for some services, and that they would use public/private transport to access these services.

In response to questioning from **Mr Sim**, Mr Sinclair confirmed that his company had agreed terms with the current owner of the proposed premises conditional on the award of the contract. He further confirmed that the premises were large enough to accommodate a pharmacy and that it would retain its number on Rotherwood Avenue. He felt the premises were more than adequate to allow the establishment of a pharmacy.

In response to further questioning from Mr Sim regarding his definition of neighbourhood, Mr Sinclair confirmed that his instinct was to draw the southern boundary of the neighbourhood along Great Western Road, however in consultation with some of the patients who accessed his pharmacy on Spey Road, he had been convinced that patients would in fact cross this road to access services rather than cross Knightswood Park to go to Alderman Road.

Mr Sim asked Mr Sinclair if he agreed that he had defined the boundaries of his neighbourhood to maximize the neighbourhood population. Mr Sinclair disagreed and reminded those present that even taking the population to the south of Great Western Road out of the equation, there remained a population of approximately 6,000 who currently didn't have access to adequate services.

In response to further questioning from Mr Sim, Mr Sinclair stated that he thought that most of the population would travel outwith the neighbourhood for their day to day needs.

In response to further questioning from Mr Sim regarding the route he took when travelling between the proposed premises and the premises in Spey Road, Mr Sinclair advised that he had travelled along the side of the canal and through the tunnel which accessed Spey Road.

In response to further questioning from Mr Sim, Mr Sinclair confirmed that his pharmacy would serve many of the nearby GP practices including those in Drumchapel and Anniesland. Mr Sinclair estimated that approximately 50% of the population used Drumchapel Health Centre

In response to a follow up question regarding this issue and whether he felt that pharmacy services adjacent to the GP practices was inadequate, Mr Sinclair replied that this was irrelevant. The legal test required consideration of adequacy in terms of the neighbourhood in which the proposed premises were situated. He further reminded those present that community pharmacy was moving away from volume dispensing and so was less reliant on being near GP practices.

In response to final questioning from Mr Sim, Mr Sinclair confirmed that his pharmacy in Spey Road would not be affected detrimentally if the application for Rotherwood Avenue was granted.

### **The PPC Question the Applicant**

In response to questioning from **Mr MacIntyre** regarding why the Applicant did not consider Great Western Road to be a physical barrier, Mr Sinclair reiterated his point that patients accessing services at the Spey Road pharmacy had advised him that residents from south of Great Western Road, would be more likely to cross the road and access services in Blairdardie rather than travel south to Alderman Road. He further advised that if the PPC determined Great Western Road as a boundary, there remained a significant population.

In response to further questioning from Mr MacIntyre regarding his northern boundary, Mr Sinclair confirmed that he had chosen the canal as the boundary even though immediately adjacent to the proposed premises there was a footbridge over the canal... Mr MacIntyre asked the Applicant if he could justify defining this boundary when he did not consider Great Western Road, which is a multi-lane road, as a barrier. Mr Sinclair responded that having used the bridge, it was not comparable with Great Western Road. He advised that crossing the bridge could be problematic in bad weather and these difficulties were exacerbated by the seclusion of the access. In any case he felt that the area on the other side of the bridge would be classed as Drumchapel rather than Knightswood.

In response to further questioning from Mr MacIntyre regarding the definition of the term "Blairdardie East", Mr Sinclair advised that this area had the same northern boundary as his defined neighbourhood but didn't go down as far as Great Western Road at any point. He further confirmed that he was unsure where the old settlement of Blairdardie would lie.

In response to questioning from **Mrs Anderton**, Mr Sinclair advised that of the requests his pharmacy at Spey Road received to deliver to patients, approximately 50% of these requests related to new patients.

In response to further questioning from Mrs Anderton, Mr Sinclair confirmed that approximately 15% of the patients accessing services from Spey Road came from the defined neighbourhood. He advised that approximately 50% of the requests for new deliveries related to patients in this area, the other 50% related to patients from other areas including the area to the south of Great Western Road.

In response to further questioning from Mrs Anderton, Mr Sinclair confirmed that Sinclair Pharmacy operated a collection and delivery service from Spey Road.

In response to further questioning from Mrs Anderton, Mr Sinclair advised that he intended to provide all the core services from the proposed premises along with additional services including compliance aids, supervision of methadone and smoking cessation.

In response to further questioning from Mrs Anderton, Mr Sinclair confirmed that Sinclair Pharmacy would provide domiciliary visits if necessary.

In response to final questioning from Mrs Anderton, Mr Sinclair clarified that the total population in his defined neighbourhood was in the region of 7,500. Approximately 6,000 of this number were resident to the north of Great Western Road, with the remainder living to the south of Great Western Road.

In response to questioning from **Mr Imrie**, Mr Sinclair confirmed that he would provide supervised methadone from the proposed premises and that the numbers of patients currently provided from his Spey Road pharmacy was consistent with the Glasgow average. He further confirmed that some of the patients accessing this service at Spey Road resided within the defined neighbourhood. He further confirmed that he provided services for insulin dependent diabetics and other patients whose condition required them to use needles.

In response to questioning from **Mrs Lynch** regarding those patients who resided to the south of Great Western Road and who accessed services in Spey Road, Mr Sinclair confirmed that he had not documented or logged the numbers of these patients. He further confirmed that the pharmacy in Spey Road received between 7 and 10 requests per day for delivery to patients. Of these requests approximately 50% of these were for new patients.

In response to further questioning from Mrs Lynch regarding the business model of the current inhabitant of the proposed premises, Mr Sinclair didn't agreed that because this business had not been successful there was a suggestion that a community pharmacy wouldn't be successful either. In Mr Sinclair's opinion a community pharmacy was different to a café. A café was a "nice to have" facility within a neighbourhood. A community pharmacy was necessary to secure adequate provision of services in a neighbourhood.

In response to further questioning from Mrs Lynch as to what would be the motivation for someone to visit the proposed premises when they would need to travel outwith the neighbourhood to access other services relevant to the fabric of their daily life, Mr Sinclair advised that access was only one factor. Another factor was the general state of health in the population. A pharmacy within the neighbourhood would be a welcome addition.

In response to final questioning from Mrs Lynch, Mr Sinclair advised that in his opinion, current services were not adequate because of the health of the population. According to the SNS the neighbourhood had a higher than average element for many detrimental health indicators. Another pharmacy in the area could help improve this situation.

In response to questioning from **Professor McNulty**, Mr Sinclair advised that there was no main GP practice focal point within the neighbourhood. Approximately 50% of the residents would access medical services in Drumchapel with the remainder travelling to either Anniesland or Knightswood for services.

In response to further questioning from Professor McNulty, Mr Sinclair advised that the neighbourhood had a fairly large elderly population, with a fairly large population of residents on low income. He felt that this would result in a large uptake of the Minor Ailment Service (MAS).

In response to further questioning from Professor McNulty regarding where residents currently purchased health care items or accessed health advice, Mr Sinclair confirmed that this would be through Lloydspharmacy on Knightswood Road, from his own pharmacy on Spey Road, or from Anniesland, Clydebank and Drumchapel.

In response to further questioning from Professor McNulty, Mr Sinclair confirmed that he did not have any statistical information for the neighbourhood broken down into datazones. He further confirmed that the biggest proportion of the neighbourhood was made up of elderly residents rather than families with young children.

In response to final questioning from Professor McNulty regarding whether he considered Almond Road to be part of his defined neighbourhood, Mr Sinclair advised that it was not part of his neighbourhood, although he felt that it would come into the proposed pharmacy's catchment area.

In response to questioning from **Mr Dykes** regarding the relationship between the location of pharmacies and the health of the population, Mr Sinclair advised that he did have evidence to show this link.

In response to final questioning from Mr Dykes regarding the consultation room in the pharmacy at Spey Road, Mr Sinclair confirmed that if the room did not portray a professional image then this would be rectified after the hearing. This was not a situation that would be replicated in the proposed pharmacy.

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

#### **The Interested Parties' Case – (Ms Lesley Elrick – Boots UK Ltd)**

**Ms Elrick** advised that Boots UK Ltd would describe the neighbourhood as High Knightswood, which was bounded to the North and West by the Forth and Clyde Canal to where it met Great Western Road. The Southern boundary was Great Western Road to Knightscliffe Avenue in the East, where it met the neighbourhood of Anniesland with a significant change in housing type.

The neighbourhood had a population of around 5,500 as of the midyear estimates of 2009 which was a decrease from the census of 2001 and was characterised with high to mid deprivation levels on the Scottish Index of Multiple Deprivation, the areas of higher deprivation being those furthest from Great Western Road. It was however ranked moderately in the mid to high range on Geographical Access to Services ranging from 2,000 to 5,200 in ranking.

The neighbourhood was principally a residential area and lacked shopping services beyond that of daily convenience shopping. The residents accessed more complex services and shopping in neighbouring Anniesland or Drumchapel.

The defined neighbourhood contained one pharmacy located to the East of the neighbourhood, while the proposed pharmacy was in the extreme West of the neighbourhood. Boots UK Ltd believed residents also accessed pharmaceutical services in adjacent neighbourhoods of Anniesland and Drumchapel in the same way as they accessed other services including weekly shopping.

Most of the pharmacies in the area also operated a delivery service for those who required it. A full range of pharmacy services was provided by the pharmacy in the neighbourhood and those surrounding it.

Patients could access pharmacy on foot, by car or by public transport. From the site of the proposed application it was approximately 15 minutes walk to both the Lloydspharmacy branch within the neighbourhood and the Boots Pharmacy at Garscadden Road in Drumchapel.

Alternatively access could be gained using either the bus service that ran through the neighbourhood along Rotherwood Road or the bus services along Great Western Road. The bus service through the neighbourhood was comparatively frequent with one very 20 minutes or buses along Great Western Road which ran every 10 minutes.

It was a four minute walk from the proposed site to Great Western Road.

Boots UK Ltd believed it unlikely that residents to the extreme north of the neighbourhood, which was the most deprived area, would walk to and from the current pharmacy or the proposed site due to the incline and would probably use a car or public transport in which case they would tend to move towards the area of greatest amenity, shops, post office which would take them towards the current pharmacy or those in adjacent neighbourhoods.

Boots UK Ltd believed there was currently no inadequacy of pharmaceutical provision in this neighbourhood and that the provision both from within and without would continue to meet the needs of the residential population for the foreseeable future.

### **The Applicant Questions Ms Elrick**

In response to questioning from **Mr Sinclair**, Ms Elrick confirmed that within her presentation she had quoted that the area ranked in the high to mid range for deprivation.

In response to further questioning from Mr Sinclair regarding whether it was acceptable for residents to travel between 15 and 20 minutes to access pharmacy services, Ms Elrick advised that residents within the neighbourhood necessarily had to travel to access many other services including medical services.

**There were no questions to Ms Elrick from Mr Sim.**

### **The PPC Question Ms Elrick**

In response to questioning from **Mr Dykes**, Ms Elrick advised that another pharmacy so close to an existing contract would not be beneficial to the neighbourhood. She further advised that if she believed that residents in the neighbourhood shopped locally then potentially an additional pharmacy in the neighbourhood might be considered more convenient, however she didn't believe that this was the situation.

In response to questioning from **Professor McNulty** regarding the link between deprivation and car ownership, Ms Elrick advised that she had seen a great number of cars while travelling within the neighbourhood. In addition, the taxi rank at Drumchapel shopping centre had been busy and she had passed between five and six buses. As such those residents who didn't have access to a car would have alternative means of transport

readily available. She accepted that it might be more convenient if residents didn't have to pay bus fares in order to access services.

In response to further questioning from Professor McNulty, Ms Elrick advised that the Boots branch in Garscadden Road served the area of Old Drumchapel rather than Knightswood. She also advised that the Boots branch situated in Fulton Street saw people coming from the Blairdardie area. She further confirmed that residents of Blairdardie would be able to travel easily to the Boots branch in Garscadden Road. The pharmacy was situated in a residential area with clearly defined routes through it.

In response to questioning from **Mrs Lynch**, Ms Elrick advised that most of the patients accessing services from the Boots branch in Garscadden Road tended to come from the area of Old Drumchapel. Most wouldn't come from Archerhill Road or its surrounding streets.

In response to further questioning from Mrs Lynch, Ms Elrick advised that Boots operated a delivery service which would deliver approximately four miles out from their branch.

In response to questioning from **Mr Imrie**, Ms Elrick advised that the Boots branch had capacity to take on additional methadone patients, but did not participate in the needle exchange scheme.

In response to questioning from **Mr MacIntyre**, Ms Elrick confirmed her eastern boundary as Great Western Road, Knightscliffe Avenue to Shafton Road.

In response to questioning from **Professor McNulty**, Ms Elrick confirmed that she was not aware of how an additional contract might affect the viability of other pharmacies in the area.

**There were no questions to Ms Elrick from Mrs Anderton, Mr Gillespie or the Chair.**

#### **The Interested Parties' Case – (Mr Mark Sim - Lloydspharmacy)**

**Mr Sim** thanked the Chair for providing Lloydspharmacy the opportunity to speak at the hearing for the application for inclusion in the Board's Pharmaceutical List at 300 Rotherwood Avenue.

In terms of the neighbourhood Lloydspharmacy would consider the neighbourhood to be bordered by the Forth and Clyde Canal to the North and West until it met the A82 Great Western Road. From the South following along Great Western Road until its meeting with the A379 Bearsden Road, returning North to meet the canal again to form the Eastern boundary.

Lloydspharmacy believed the defined neighbourhood boundary reflected prominent geographical boundaries and was a logical boundary to apply in this instance. There were natural and physical boundaries of the canal, the busy dual carriageways Bearsden Road and Great Western Road which ran through the middle creating a South Blairdardie and North Blairdardie which residents spoke about. Blairdardie had two primary schools and had a local sports pavilion and recreation centre.

Within the neighbourhood there were two pharmacies. Boots and Lloydspharmacy. Lloydspharmacy had recently invested in the Knightswood Road premises to upgrade the facilities. The pharmacy had a private consultation area and spacious dispensary by which to deliver a comprehensive range of services as required by the local Health Board. The company was not aware of any complaints to the Health Board about the provision of service at the branch. The company had also met with the local Community Council who appeared happy with the services provided by the company. The pharmacy provided a free prescription collection and delivery service to residents of the neighbourhood and surrounding areas. The branch had a below average waiting time at under 8 minutes.

Lloydspharmacy was situated in a parade of shops consisting of a funeral parlour, Post Office, newsagent, delicatessen, hairdresser and Credit Union. There was good parking at the parade which made them a popular and frequently visited focal point of the community. The Boots on Fulton Street was on each of the bus routes looping the area of North East Blairdardie.

Mr Sim advised that there was very little in the way of other retail units or services in the vicinity of the proposed site and he therefore questioned for what other propose a person would actually visit the proposed premises. The premises appeared to be what was the "Cuppa Coffee" unit and was adjacent to a chip shop. These were the only retail facilities around there and in his opinion did not constitute a neighbourhood centre.

Mr Sim accepted that there were areas of deprivation in the neighbourhood but there were pharmacies in the neighbourhood which already met the needs of this population. Prior to the hearing there had been no evidence to support this application as either necessary or desirable.

Mr Sim hoped the PPC would note the location of the proposed pharmacy situated at the very northern edge of the neighbourhood. There was limited access caused by the canal and the railway line to areas north of the proposed site, therefore, in reality the majority of residents would live between the proposed site and the existing pharmacies. The PPC may also have observed that there were few roads leading off Rotherwood Avenue connecting into the main residential area. For example those living on Towerhill Road and Glaive Road would find it easier to go to Lloydspharmacy than to travel round onto Rotherwood Avenue. The proposed site therefore would serve only a very small population, in fact only those in the very immediate vicinity would find it of benefit.

The existing pharmacies were also situated close to the surgeries of Dr Costello and Partners on Great Western Road and Dr Land and Partners on Fulton Street.

In summary the neighbourhood already had an adequate provision of pharmaceutical services and there was no evidence to suggest that there was an inadequate provision of pharmaceutical services and as such he would respectfully ask the PPC to refuse this application.

### **The Applicant Questions Mr Sim**

In response to questioning from **The Applicant** regarding whether a resident living in

Spencer Street would consider themselves a neighbour of someone living in Banner Drive, Mr Sim advised that physical barriers did not outweigh psychological barriers.

In response to further questioning from the Applicant, Mr Sim advised that the hilly and sloping ground at Knightscliffe Avenue was not, in his opinion, significant enough to finish the boundary at this point.

**There were no questions to Mr Sim from Ms Elrick.**

### **The PPC Question Mr Sim**

In response to questioning from **Mr MacIntyre** asking how a resident living in Glendinning Road would travel to Fulton Street, Mr Sim explained that there were several buses travelling along this route. They would take this means of transport, but if walking it would probably be more convenient for them to access services at the Lloydspharmacy branch in Knightswood Road.

In response to questioning from **Mrs Anderton**, Mr Sim advised that the estimated population in his defined neighbourhood was around 8,000, covering 12 datazones.

In response to questioning from **Professor McNulty**, Mr Sim agreed that it was very difficult to provide a Minor Ailment Service via a collection and delivery route. Ideally for this service a consultation should take place between the patient and the pharmacist.

In response to further questioning from Professor McNulty, Mr Sim accepted that his defined neighbourhood was relatively large, however he advised that he had used physical boundaries to make his determination and felt this was a logical neighbourhood.

In response to further questioning from Professor McNulty regarding how patients would currently access pharmaceutical services from Rotherwood Avenue, Mr Sim thought that patients would not cross Great Western Road but would cross the canal and go to the pharmacy at Spey Road.

In response to final questioning from Professor McNulty regarding what Lloydspharmacy as a company did for the population of Blairdardie, Mr Sim advised that the company provided the Minor Ailment Service and all other services within the scope of the contract. They were also active in the community holding Healthy Heart meetings and other public health initiatives.

In response to questioning from **Mr Dykes**, Mr Sim disagreed that the predominantly elderly population within the Blairdardie area would find an additional community pharmacy at the proposed premises convenient. He did not accept that the proposed premises were situated in a convenient place for the majority of the residents in the area. Due to the lay out of the streets in the area, most residents required to travel a convoluted route to access Rotherwood Avenue and would in fact find it more convenient to travel to Knightswood Avenue.

In response to questioning from **the Chair**, Mr Sim confirmed that the granting of an additional contract would not affect the overall viability of any of the five Lloydspharmacy

branches in the vicinity of the proposed premises.

**There were no questions to Mr Sim from Mr Gillespie, Mr Imrie or Mrs Lynch.**

### **Summing Up**

**Mr Sim** asked the Committee to take into consideration points made in his presentation and contended that an additional pharmacy was not necessary or desirable to secure adequate provision of pharmaceutical services in the neighbourhood.

**Ms Elrick** reiterated that Boots UK Ltd believed there was currently no inadequacy of pharmaceutical provision in the neighbourhood and that the provision both from within and without would continue to meet the needs of the residential population for the foreseeable future.

**The Applicant** advised that he had demonstrated that the neighbourhood was an area of poor health, significant deprivation and with a relatively elderly demographic. The area was poorly served both from within and outwith. He respectfully requested that the PPC grant the application so that the population of the neighbourhood could gain access to the pharmaceutical service it deserved.

Before the Applicant and Interested Parties left the hearing, the Chair asked the Applicant, Ms Elrick and Mr Sim to confirm that they had had a full and fair hearing. All three parties confirmed individually that they had.

The PPC were 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 were necessary or desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises were located.

In addition to the oral submissions put before them, the PPC also 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, namely:
  - Boots UK Ltd – various addresses; and
  - Lloydspharmacy – various addresses.
- b) The Greater Glasgow & Clyde Area Medical Committee (GP Sub-Committee);
- c) The Greater Glasgow & Clyde Area Pharmaceutical Community Pharmacy Sub-Committee;

The Committee noted that in accordance with the requirement to consult the public,

notification of the application had been sent to:

- d) - The Glaswegian run on 5<sup>th</sup> January 2011 – no responses were received;
- e) - Glasgow City CHP – North West Sector no response was received during the consultation period;
- f) The following community councils:
  - Blairdardie & Old Drumchapel – one response received.
  - Knightswood – no response received.
  - Knightswood/North Temple – no response received.

The Committee also considered;-

- g) The location of the nearest existing pharmaceutical services;
- h) The location of the nearest existing medical services;
- i) Demographic information regarding post code sectors G13.2, G15.6 and G61.1;
- j) Information from Glasgow City Council's Departments of Land & Environmental Services and Development & Regeneration Services regarding future plans for development within the area;
- k) NHS Greater Glasgow and Clyde plans for future development of services;
- l) Patterns of public transport in the area surrounding the Applicant's proposed premises;
- m) Information regarding the number of prescription items and Minor Ailment Service activity undertaken by pharmacies within the consultation zone; and
- n) Applications considered previously by the PPC for premises within the vicinity.

## DECISION

Having considered the evidence presented to it, and the PPC's observation from the site visit, the PPC had to decide firstly 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 CP Subcommittee and the Interested Parties, in relation to the application. The Committee considered that the neighbourhood should be defined as follows:

**West: From Great Western Road following the line of the Forth & Clyde canal**  
**North: the Forth & Clyde canal Following the line of the canal along Rotherwood Avenue to Glendinning Road;**  
**East: From Shafton Road crossing the open ground behind the library to meet**

**Knightscliffe Avenue; and  
South: Great Western Road.**

In the Committee's opinion, the Canal represented a physical boundary. Although there was a crossing bridge behind the Applicant's proposed premises, residents would be unlikely to travel across this to the area beyond as there was little in the way of amenities in the area. Beyond Knightscliffe Avenue was a significant area of open ground and there was limited access to Temple which was further east and part of the area commonly known as Anniesland. Great Western Road was a major trunk road, comprising six lanes for most of its length. While there were crossing points at various locations along the road, the breadth of the road, the volume of traffic travelling along it, and the road's status as the main arterial road out of Glasgow city necessarily made this a physical boundary. For these reasons the Committee considered the above was a logical neighbourhood.

**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 within 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.

The Committee noted that within the neighbourhood as defined by the PPC there was currently one pharmacy.

The Committee noted the unusual layout of roads within the neighbourhood which prevented residents from taking direct routes to the amenities in the area. In terms of the proposed premises, the committee considered that many of the residents would require traveling a further distance to access services in this area than they would if they travelled down towards Knightswood Road. Public transport in the area was good, taking residents to those areas which were the main site of amenity for the neighbourhood that is Drumchapel and Anniesland.

The Committee determined that the direction of travel for residents wishing to access anything other than existing limited local amenities was outwith the neighbourhood, where the main shopping, banking and medical provision was situated.

The Committee noted the Applicant's comments regarding the apparent poor health of the neighbourhood, but did not necessarily agree that this supported the view that pharmaceutical services were inadequate. The Committee was aware that several other issues could contribute to these statistics.

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

**In accordance with the statutory procedure the Chemist Contractor Members of the**

**Committee, Alasdair Macintyre and Gordon Dykes, left the room during the decision process:**

**DECIDED/-**

The PPC was satisfied that the provision of pharmaceutical services at the premises of the Applicant were 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, Alasdair Macintyre and Gordon Dykes, rejoined the meeting at this stage.**

**5. ANY OTHER COMPETENT BUSINESS**

**New Regulations** – The Chair asked Board Officers to organize a training day for PPC members to discuss the changes brought in by the Amendment Regulations 2011. After comprehensive discussion, the Committee agreed that the event should be extended to include other issues that members would wish to see discussed or were looking for clarification on.

**Contracts  
Manager**

**AGREED/-**

**That the Contracts Manager writes to all members of the Committee asking for items to be put forward for the event. The event would be organised for mid September.**

**6. DATE OF NEXT MEETING**

The next meeting of the Committee will take place on 4<sup>th</sup> August 2011.

The meeting ended at 1.40pm