

NOT YET ENDORSED AS A CORRECT RECORD

Pharmacy Practices Committee (08)

Minutes of a Meeting held on
Thursday 7th December 2006

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

PRESENT:	Andrew Robertson	Chairman
	Alan Fraser	Lay Member
	Prof W J McKie	Deputy Lay Member
	Mrs Kay Roberts	Non Contractor Pharmacist Member
	Gordon Dykes	Contractor Pharmacist Member
	Alasdair Macintyre	Contractor Services Manager
IN ATTENDANCE	Trish Cawley	Contractor Services Supervisor
	Robert Gillespie	Joint Lead – Community Pharmacy Development
	Janine Glen	Contractor Services Manager
	David Thomson	Joint Lead – Community Pharmacy Development

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

No declarations of interest were made.

1. APOLOGIES

There were no apologies.

2. ANY OTHER BUSINESS NOT INCLUDED IN AGENDA

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

Section 1 – Applications Under Regulation 5 (10)

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

ACTION

i) **Case No: PPC/INCL19/2006**
Mr Asgher Mohammed – Unit 4, 170 High Street, Glasgow
G1.1

The Committee was asked to consider an application submitted by Mr Asgher Mohammed, to provide general pharmaceutical services from premises situated at Unit 4, 170 High Street, Glasgow G1.1 under Regulation 5(2) of the National Health Service (General Pharmaceutical Services) (Scotland) Regulations 1995 as amended.

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

The Chairman, Lay Members and Joint Leads – Community Pharmacy Development had previously received notice of the application, along with associated information including:

- i) The application form and supporting statement;
- ii) The map and information contained at **Appendix 4** of the papers;
- iii) Notification of decisions taken on previous applications received in respect of premises in the same post-code area; and
- iv) Other information the Board felt was relevant to allow them to consider whether the application should be considered by oral hearing.

Having considered the information, the Chairman, Lay Members and Joint Leads – Community Pharmacy Development agreed that it was necessary to consider the application by oral hearing.

The Committee, having previously been circulated with all the papers regarding the application from Mr Asgher Mohammed, agreed with the initial decision and reiterated that the application should be considered by oral hearing.

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

The Applicant was represented in person by Mr Asgher Mohammed (“the Applicant”). The interested party who had submitted written representations during the consultation period, and who had chosen to

attend the oral hearing was Ms Alyson Irving (Alliance Pharmacy) (“the Interested Party”).

Prior to the hearing, the Panel had collectively visited the site at Unit 4, 170 High Street, Glasgow G1.1 and the pharmacies and GP surgeries surrounding the applicant’s proposed premises.

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 Party and the PPC to ask questions. The Interested Party then made their submission. After their submission there followed the opportunity for the PPC and the Applicant to ask questions. The Interested Party and the Applicant were then given the opportunity to sum up. Before the parties left the hearing, the Chair of the PPC asked if they had had a full and fair hearing. Each confirmed that they had, and that they had nothing further to add to their submissions.

The PPC was required to take into account all relevant factors concerning the issues 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 also considered all written representations and supporting documents submitted by the Applicant, the Interested Parties and those who were entitled to make representations to the PPC, namely:

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

The Committee also considered:-

- d) The location of the nearest existing sites where pharmaceutical services are provided;
- e) Demographic information regarding post code sectors G1.1, G1.2, G1.5 and G5.9;
- f) Patterns of public transport;

- g) Greater Glasgow NHS Board plans for future development of services; and
- h) Tabled documents provided by the Applicant during the hearing, comprising: a map showing the Applicant's defined neighbourhood, copy of letter provided by the Merchant City Townscape Heritage Initiative and a promotional booklet regarding development in the area surrounding the Applicant's proposed premises.

The Applicant's Case

Mr Mohammed for the Applicant commenced his presentation by thanking the Committee for offering him the opportunity to explain why he felt his application was both necessary and desirable.

In providing background information around the application, the Applicant explained that Page 13 of the Right Medicine (Pharmacy Strategy document) suggested that the provision of pharmaceutical services should address the following:

- areas of high deprivation where there was current underprovision;
- the provision of local services to meet local needs.

Mr Mohammed explained that he had been working in the area since 1991. He felt it was important to improve patient care in the community. He tabled a map showing the boundaries of his defined neighbourhood highlighted with a yellow marker. He had been unsure whether to include Glasgow Royal Infirmary (which included a pharmacy contractor) in the defined neighbourhood, but decided against this as Glasgow Royal Infirmary could be argued to constitute a community in its own right, because of its size. Mr Mohammed also tabled a document which provided a population profile for the area. The demographic composition of the area included: over 500 frail elderly in the Drygate area, Strathclyde University campus with 18,000 students and over 2,500 staff. Furthermore the Applicant highlighted the existence of over 7,490 residents and 7,854 workers in the area, along with approximately 150,000 tourists who visited each of the various sites within the area per year.

The Applicant advised the Committee that he had been unable to obtain figures surrounding the number of rail passengers using High Street station, and explained that this was because many travellers used rail cards which prohibited the collection of robust data.

Mr Mohammed explained that there was significant development currently being undertaken in the area, with more planned. It was his opinion that pharmacy services should evolve to meet the needs of the local population, and his application was aimed to address the changing requirements emanating from these various new developments. He also

pointed to the significant level of deprivation currently prevalent within the area. There were three facilities for the homeless within his defined neighbourhood which collectively provided services to over 300 clients.

The Applicant advised the Committee that there was no pharmaceutical provision currently in the neighbourhood, with the nearest provision being his own pharmacy at 144 Trongate. He suggested to the Committee that while his pharmacy was able to provide services to meet current demand, it would be unable to cope the increased demand that would inevitably be generated from the various proposed developments. The Applicant advised that his proposed pharmacy would open from 8.30am – 6.00pm, and would open Sunday. He further advised the Committee that the proposed unit was 2,200 square feet which he felt would be more than sufficient to meet the needs of the expanding population. The Applicant informed the Committee that the unit was bigger than that described in his initial letter of support. This had been due to a change in availability within the development. The landlord had subsequently offered the Applicant a larger unit than that offered initially.

The Interested Party Questions the Applicant

On questioning from Ms Irving, the Applicant advised that there were inadequacies in the provision of pharmaceutical services in the area in terms of access. The pharmacy within the Health Centre at Glasgow Royal Infirmary was not well known other than by patients who were registered with the GPs within the Health Centre. It was not visible from the street. In addition, his own pharmacy in Trongate was only open to 5.30pm. He further advised that not all pharmacies in the area provided the full range of pharmaceutical services. If the application were granted, he would provide all services.

In response to Ms Irving's question on what services were not provided by the current pharmaceutical network, the Applicant advised that there appeared to be an issue around the provision of needle exchange and supervised methadone services. On further questioning, the Applicant advised that in his opinion his pharmacy at Trongate served the needs of elements of the current population within the area, but he felt there would be a gap in provision which the Trongate pharmacy would not meet as each of the developments was completed.

In response to further questioning from Ms Irving, the Applicant confirmed that he considered his pharmacy in Trongate to be situated within his defined neighbourhood. He further advised that he considered the population to be made up of two main elements: residents and transient population. The transient population was difficult to quantify for various reasons.

In response to Ms Irving's question about timescales for completion of the developments, the Applicant confirmed that the Glasgow Science Park development was due for completion within 3 years.

The PPC Question the Applicant

In response to questioning from Mrs Kay Roberts, the Applicant confirmed that students from Strathclyde and Glasgow Caledonian Universities were currently accessing services from pharmacies in Glasgow City Centre, or from pharmacies further afield. He further confirmed that his current pharmacy in Trongate was currently improving services; however he felt that the Trongate pharmacy served a different population. He considered the focus of the population around the Trongate pharmacy to be different from that around the proposed premises.

On questioning from Prof J McKie, the Applicant confirmed that an error had been made in the initial application, where the neighbourhood had been described as 1 km in radius. The Applicant clarified that this should read 1 km in diameter.

In response to further questioning from Prof McKie, the Applicant suggested that some residents would travel to the pharmacy in Trongate for their pharmaceutical services, but others would not. The Applicant further advised he felt that a new pharmacy at the proposed premises would provide a choice for the population.

The Applicant advised the Committee that the homeless population while perhaps generating small demand for pharmaceutical services was nevertheless still important in terms of planning new services.

In response to further questioning from Prof McKie, the Applicant explained that he felt the demand from the transient population was not restricted to the dispensing of prescriptions. He felt it was important to provide access to the full range of pharmaceutical services. The transient population was one element of the population within the area and were part of a diverse community, which would increase significantly over the next few years. He further confirmed that in his opinion approximately 70% of the customers, who would use the proposed new pharmacy, would travel to the facility on foot.

In response to questioning from David Thomson, the Applicant confirmed that his statistics on services for the homeless population did not include initiatives currently in place for rough sleepers. The Applicant further confirmed that the new pharmacy would provide services to this element of the population.

On David Thomson's further questioning, the Applicant confirmed that he had initially included the pharmacy at 1432 Gallowgate in his definition of neighbourhood because he thought it was closer than it actually was. He accepted that this pharmacy should not be included in his defined neighbourhood.

In response to further questioning from David Thomson, the Applicant explained that his pharmacy at Trongate did not provide Sunday opening

as the demand for this service around the area was already being met by other pharmacies in the city centre. He advised that Sunday opening would be provided from the proposed new facility as he felt the demand for services would be more significant in this area, particularly with the level of student accommodation in the area. It was noted that flats within the student halls of residence were also let out particularly during the summer period

The Applicant confirmed that he was aware that some of the services described in his application could only be provided at the Health Board's discretion. He advised the Committee that he had included these services to show willingness to engage with the Health Board around any services that were required.

In response to questioning from Alan Fraser, the Applicant advised that it would be more appropriate to provide a new pharmacy provision rather than increase the range of services provided from Trongate, because the focus of the population around the proposed premises would differ from that in the area around Trongate. A new pharmacy facility would also offer the whole population choice of access.

In response to further questioning from Mr Fraser, the Applicant confirmed that known firm plans for development would result in an increase of approximately 1,050 people within 250 metres of the proposed premises, and 1,950 people within 500 metres of the proposed premises. The Applicant tabled a letter from the Merchant City Townscape Heritage Initiative, which confirmed these figures.

In response to questioning from Alasdair MacIntyre, the Applicant confirmed that the current population within the defined neighbourhood would access pharmaceutical services either in the city centre, where they lived, or around their workplace. The Applicant further explained that, although the additional numbers who would come into the area through the new developments could access services from the same places, he hoped that an additional pharmacy would provide them with choice and opportunity and was a means of planning ahead to address the demands of a changing population.

In response to questioning from Gordon Dykes, the Applicant accepted that the post-code of the proposed premises was not one of particularly high deprivation. The Applicant explained that there was higher deprivation in the areas immediately surrounding High Street, which the proposed pharmacy would also serve. The location of the premises was dictated by availability. He further confirmed that he had not yet arranged for plans of the new pharmacy to be drawn up.

In response to Mr Dyke's final question, the Applicant did not agree that the indigenous population of the neighbourhood would vacate the area as other residents moved in as a result of the various new developments. He did not believe that the demographic of the population would change significantly.

The Chair questioned the Applicant around the amendment in his application around the size of the premises. The Applicant confirmed that he had initially been offered a unit of 1,100 square foot because of interest in the unit from other businesses and his initial letter of support had reflected this offer. Subsequently, and due to the Landlord's willingness to have a pharmacy within the development, he had been offered a unit of 2,200 square foot. He confirmed that if the application was granted and the pharmacy established he would work with other professionals to ensure that the space was appropriately utilised.

In response to further questioning from the Chair, the Applicant believed that if granted, the new pharmacy could be operational in 3 months at the least, and within a maximum of 6 months. He confirmed that the fabric of the building was sound and that he would work with the Council's Building Control Department to progress the necessary permissions.

The Interested Party's Case – Ms Alyson Irving (Alliance Pharmacy)

Ms Irving thanked the Committee for providing Alliance Pharmacy with the opportunity of addressing the application. She stated that Alliance Pharmacy could suggest either of two neighbourhoods:

- George Street, along the A803 to Glasgow Cross, Ross Street, Greendyke Street, onto the Saltmarket, west onto Bridgegate and up to join Queen Street.

Ms Irving explained that this was a neighbourhood due to the physical barriers including the St Enoch Centre, and the Barras market. According to 2001 census statistics, the population within this area was 2,645. Of these 318 were considered not to be in good health with the remainder being in good to fairly good health. Within the area there was one pharmacy – Abbey Chemists, 144 Trongate.

- The same neighbourhood as above plus the commercial area immediately south of the M8 motorway. According to the 2001 census statistics the population within this area was 5,042. Of these 608 were considered not be in good health.

Ms Irving explained that the distance from the proposed site to the existing pharmacy in Trongate was 0.4 miles, from Townhead Health Centre Pharmacy was 0.7 miles, and from Queen Street Station was 0.5 miles. Within a one mile radius there were also two Alliance Pharmacies situated on Duke Street, both of which offered a range of services including: heart failure, supervised methadone, urgent supply and e-mas. Ms Irving explained that one of the Alliance Pharmacies in Duke Street was about to undergo a refurbishment in January 2007. Plans were available for the Committee's consideration. The refurbishment would provide a dedicated consultation room with electricity, water and sound proofing.

Ms Irving explained that the population within the Applicant's defined neighbourhood was made up of young people who were mobile, and thus had little difficulty in accessing pharmaceutical services. The Applicant's proposed premises was situated close to flats within the area of Merchant City, whose residents, Ms Irving suggested were mainly students and young professionals, who moved freely about the city and who would have no difficulty in accessing services currently provided in the city centre. Those working in the area would access services close to their place of residence. Those people travelling around High Street train station were not likely to work in the immediate vicinity of the station, and would disperse widely. The residents in the Drygate area would access services in either Townhead Health Centre, or from the two Alliance Pharmacies in Duke Street. The transient population within the area could currently access services from a variety of sources.

Ms Irving drew the Committee's attention to an application considered by the Committee in 2005 for a new pharmacy in Bain Street. The Applicant had been an objector to the application, and one of the comments made by the Applicant's representative in his objection concerned the closure of the homeless facilities in the area, and the existence of adequate services to the population by the existing network.

The Applicant Questions Ms Irving

In response to questioning from the Applicant, Ms Irving explained that her population statistics were derived from the 2001 census statistics. The populations were different because of the differences in the neighbourhoods.

The PPC question Ms Irving

In response to questioning from Prof J McKie, Ms Irving advised that the two Alliance Pharmacies in Duke Street would serve the Drygate area, but not the Merchant City. She also believed that the two Duke Street pharmacies would provide services to the homeless facilities, which she did not feel posed a significant demand on services.

In response to a question from David Thomson as to the impact a new pharmacy would have on Alliance's eight pharmacies within the one-mile radius used for consultation purposes, the Applicant advised the Committee that while Alliance Pharmacy had merged with Boots the Chemist her sole purpose was to represent Alliance Pharmacy. Boots retained separate representation in these issues.

In response to further questioning from Mr Thomson, Ms Irving advised that the Alliance Pharmacies offered a collection and delivery service provided by a driver. Pharmacist input was available if patients required this.

In response to questioning from Alan Fraser, Ms Irving confirmed that

users of the two Alliance Pharmacies on Duke Street would travel there by bus or car. 350b Duke Street was 1.6 km from the Applicant's proposed premises, which was 4 minutes away by car. Customers could walk to the pharmacies; however this would take approximately 15 minutes.

In response to questioning from Alasdair MacIntyre, Mr Irving advised that the Alliance Pharmacies served patients resident in the Drygate area. A new pharmacy in the area would definitely have an impact on the Duke Street pharmacies.

There were no questions to Ms Irving from the Mrs Kay Roberts, Mr Gordon Dykes or the Chair.

The Interest Party Sums Up

Ms Irving advised that she considered that the neighbourhood already had access to adequate services. The building work described by the Applicant had in many cases not started yet, and premises were not inhabited. The application was not necessary or desirable for either of the two neighbourhoods suggested by Alliance Pharmacy.

The Applicant Sums Up

The Applicant drew the Committee's attention to the letter provided by the Merchant City Townscape Heritage Initiative which clearly demonstrated the extent to which the population within the area would increase. He explained that this increase in population would radically change the focus of the neighbourhood and that his application was a vehicle to provide choice and address the changing needs of all elements of what was a diverse population.

DECISION

Neighbourhood

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

The Committee considered the competing views of the Applicant and the Interested Party and noted that initially the neighbourhood proposed by the Applicant had differed to that presented to the Committee at the oral hearing. The Committee gave consideration to the boundaries within the area and the facilities and services provided within the area.

The Committee considered that the neighbourhood should be defined as follows:

North: Cathedral Street and the A803 trunk road. This was a definite

boundary as an extremely busy trunk road which gave access from the City Centre's main shopping area to the M8 motorway and Glasgow Royal Infirmary;

West: Glassford Street and John Street to meet Cathedral Street. Beyond Glassford Street lay the main shopping area of Argyll Street which formed a significant boundary.

South: Trongate heading East to Glasgow Cross and into Gallowgate.

East: Gallowgate at its meeting with Barrack Street, to Hunter Street and Duke Street, North through John Knox Street to its meeting with Castle Street.

The Committee considered this to be a neighbourhood due to the physical boundaries of main trunk roads, and the difference in housing types further to the East of the defined area. The neighbourhood contained all services the Committee would expect for residents within the area to utilise as part of their every day life.

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, the committee considered that there was not an adequate provision of pharmaceutical services provided by the existing contractor located within the neighbourhood.

The Committee noted the Applicant's evidence of significant development in the area which would lead to an increase in population. The Committee agreed that the Right Medicine was underpinned by an assumption that pharmaceutical services would be provided to meet the needs of the local population. The Applicant had demonstrated that a new pharmacy in the neighbourhood would address the changing demands for services that the new developments would bring.

The Committee discussed the uptake of services in the area and learned that the two Alliance Pharmacies in Duke Street provided supervised methadone as did the pharmacy at Trongate. They considered that the pharmacies in Duke Street would serve a different population to that served by the Applicant's proposed premises. It was known that the pharmacy in Trongate provided services to a significant number of drug misusers and a further contract would alleviate this pressure and also provide patients with an element of choice.

The Committee addressed the issue of transient population and agreed that while the population may be mobile, the numbers of transient population would remain fairly consistent given the range of attractions

and demand for accommodation in the area. Given this situation there would be a consistent need from this element of the population for services.

The Committee agreed that the new developments would be created on a phased basis, so the demand for services would follow the same pattern. It was known that the population would increase and the demands of the population would change. Currently the needs of the student population were being underprovided and this could be demonstrated by the significant numbers of EHC (Emergency Hormonal Contraception) encounters being undertaken by the pharmacies within the city centre.

The Committee agreed that the granting of the application was desirable to address the following:

- Methadone and needle exchange services – it would be advantageous to provide a further facility offering these services;
- Improved access – a further contract would offer the population choice and would address changing demand brought about by new developments;
- Public Health agenda – in terms of providing public health services e.g. EHC it would be useful to have increased provision in the area to ensure ease of access to the current and projected population.
- The Applicant was familiar with the area and would be in a good position to provide a high quality facility that would enhance current pharmaceutical network.

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

DECIDED/-

The PPC was satisfied that the provision of additional pharmaceutical services at the premises of the Applicant was desirable in order to secure adequate provision of pharmaceutical service 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 and Board officers rejoined the meeting at this stage.

5. DATE OF NEXT MEETING

To Be Confirmed

**Contractor
Services
Supervisor**

PPC[M]2006/08

The Meeting ended at 3.35p.m.

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