

## NOT YET ENDORSED AS A CORRECT RECORD

Pharmacy Practices Committee (23) Minutes of a Meeting held on Thursday 10<sup>th</sup> January 2008 Meeting Room, LMC Offices, 40 New City Road Glasgow, G4 9JTX

PRESENT:	Mr Peter Daniels Professor J McKie Mrs Charlotte McDonald Mrs Kay Roberts Alasdair MacIntyre Scott McCammon	Vice Chair Lay Member Deputy Lay Member Deputy Non Contractor Pharmacist Member Contractor Pharmacist Member Deputy Contractor Pharmacist Member

IN ATTENDANCE:	Trish Cawley	Contractor Services Supervisor
	Robert Gillespie	Lead – Community Pharmacy Development
	Janine Glen	Contracts Manager – Community Pharmacy
		Development
	Elaine Ward	Community Pharmacy Development Pharmacist

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

No declarations of interest were made.

## 1. APOLOGIES

Apologies were received on behalf of Mr Alan Fraser.

## 2. MINUTES

The Minutes of the meetings held on Tuesday 27<sup>th</sup> November 2007 **PPC[M]2007/20**, Thursday 13<sup>th</sup> December **PPC[M]2007/21** and Friday 14<sup>th</sup> December 2007 **PPC[M]2007/22** were approved as a correct record.

# 3. ANY OTHER BUSINESS NOT INCLUDED IN AGENDA

The Chair informed the Committee that subsequent to Mr Andrew Robertson's resignation as Chair of the Committee, NHS Greater

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# ACTION



Greater Glasgow and Clyde

Glasgow & Clyde Health Board had confirmed the appointment of Mrs Agnes Stewart as his successor and Mr Daniels as Vice Chair.

### Section 1 – Applications Under Regulation 5 (10)

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

### Case No: PPC/INCL24/2007 Mr Mohammed Rashid, 668 Eglinton Street, Glasgow G5 9RP

The Committee was asked to consider an application submitted by Mr Mohammed Rashid, to provide general pharmaceutical services from premises situated at 668 Eglinton Street, Glasgow G5.9 under Regulation 5(10) 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 Committee, having previously been circulated with all the papers regarding the application from Mr Rashid, agreed that the application could be considered based on the written representations received, and that an oral hearing was not required.

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).



The Committee also considered;-

- d) The location of the nearest existing pharmaceutical services;
- Demographic information regarding post code sectors G5.9 and G41.2 and G42.7;
- f) Patterns of public transport; and
- g) NHS Greater Glasgow and Clyde plans for future development of services.

# DECISION

The Committee noted that they had previously considered a previous application submitted by the Applicant for the same premises in August 2005. On that occasion, the Committee had considered that the existing network ensured satisfactory access to pharmaceutical services for the neighbourhood. In addition, the Committee had considered previous applications for premises in the immediate vicinity on at 14 previous occasions over the last ten years, all of which had been refused on the above basis. While the Applicant had not chosen to appeal the Committee's decision in 2005, the National Appeals Panel had considered an appeal earlier this year lodged by another Applicant. The Appeals Panel had concurred with the Committee's decision, and the Appeal had been dismissed.

The Committee noted that the Applicant had not provided any further information other than that submitted at the time of the initial application.

Having considered the evidence available 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 noted the neighbourhood previously defined, and agreed that this remained relevant. Taking all information into consideration, the Committee considered that the neighbourhood should be defined as follows:

North: Scotland Street from its junction with Shields Road, West Street, Cook Street and Bedford Street to its junction with Gorbals Street. West: Nithsdale Road and Shields Road.

East: Gorbals Street, Cathcart Road and Aikenhead Road to its junction with Myrtleview Road.

South: Myrtleview Road, Mount Florida Avenue, Cathcart Road, Queen's Drive and to Caledonia Road to its junction with Nithsdale



Road.

The Committee agreed that Cathcart Road and Aikenhead Road were major trunk roads separating a principally residential area from a more commercial/industrial tract o land, and therefore formed a natural barrier. This view was also applicable to the land to the north of the northern boundary. Queens Park formed a natural boundary to the south and Shields Road to the west marked a clear change in neighbourhood with different communities and housing.

## 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 five pharmacies. These pharmacies provided the full range of pharmaceutical services including: supervised methadone and domiciliary oxygen. The Committee considered that the level of existing services ensured that satisfactory access to pharmaceutical services existed to the identified neighbourhood. The Committee therefore considered that the existing pharmaceutical services in the neighbourhood were adequate.

The Committee noted that the Applicant had not provided any evidence to allow the Committee to determine the impact of any changes within the area since the last time an application was considered for the area, nor had any information been provided to demonstrate that the existing services were inadequate.

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

In accordance with the statutory procedure the Chemist Contractor Members of the Committee Alasdair MacIntyre 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 not necessary or desirable in order Contractor Services



Greater Glasgow and Clyde the Supervisor

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.

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

#### <u>Case No: PPC/INCL25/2007</u> <u>New Age Healthcare Ltd, 24 Quarrywood Avenue, Barmulloch,</u> <u>Glasgow G21 3ES</u>

The Committee was asked to consider an application submitted by New Age Healthcare Ltd, to provide general pharmaceutical services from premises situated at 24 Quarrywood Road, Avenue, Barmulloch, Glasgow G21.3 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 New Age Healthcare Ltd, agreed that the application should be considered by oral hearing.

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

The Applicant was represented in person by Dr Ashwani Bhopal ("the Applicant"), assisted by Mr Tejinder Bhopal. The interested parties who had submitted written representations during the consultation period, and who had chosen to attend the oral hearing were Mr Colin Fergusson (Colin Fergusson Pharmacy), Mrs Gillian Tarbet (D G Tarbet Chemists) and Mr Gerry Hughes (NHS Greater Glasgow & Clyde Area Pharmaceutical General Practitioner Subcommittee) ("the Interested Parties").



Prior to the hearing, the Panel had collectively visited the vicinity surrounding the Applicant's premises, pharmacies, GP surgeries and facilities in the immediate neighbourhood, and the wider area around Royston, Balornock and Auchinairn.

The procedure adopted by 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 would then give their presentations, with the opportunity for the Applicant and PPC to ask questions. The Interested Parties and the Applicant were then given the opportunity to sum up.

## The Applicant's Case

**Dr Bhopal** commenced his presentation by thanking the Committee for giving him the opportunity to present his case. He advised the Committee that New Age Healthcare Ltd had applied for a pharmacy contract within the Barmulloch neighbourhood which was a neighbourhood in its own right. It had its own Community Centre (Barmulloch Community Centre), Library and Primary School (Barmulloch Primary School). It also had a Roman Catholic co-educational Primary and Secondary schools (St Catherine's Primary School and All Saints Secondary School). The row of shops where the proposed premises were situated was, in Dr Bhopal's opinion at the heart of the Barmulloch neighbourhood. They currently had a Spar, Post Office, ATM machine, Chinese and Indian takeaways.

New Age Healthcare Ltd had defined the boundaries of the neighbourhood after discussion with the staff in the Barmulloch neighbourhood centre as follows:

North: Wallacewell Road. All premises along the north side of Wallacewell road were within the Balornock area and all premises along the south side of Wallacewell road were within the Barmulloch neighbourhood. This was further illustrated by the fact that Colin Fergusson's pharmacy had a Balornock address on the Royal Pharmaceutical Society website.

South: the motorway and the railway line. The area south of this boundary was known as Blackhill.

West: largely formed by the Broomfield park. The section of Broomfield Road between Wallacewell Road and the mini roundabout was regarded as being in the Balornock neighbourhood. This was further illustrated by the fact that Balornock Primary School was on the west side of Broomfield Road. The section of Broomfield Road between the mini roundabout and the main roundabout was within the Barmulloch neighbourhood however the area immediately west of this was known as Petershill. By this definition Red Road Pharmacy was located in



Petershill.

East: Robroyston Park measuring 50 hectares.

According to this definition, there were no pharmacies in the neighbourhood.

Using datazones from the 2005 census Dr Bhopal had estimated that there were approximately 4,300 residents within the defined neighbourhood.

In terms of existing services the relevant pharmacies were Colin Fergusson's pharmacy in Wallacewell Road which was 0.7 miles from the proposed premises and across a busy dual carriageway, Red Road Pharmacy which was 0.8 miles from the proposed premises and D G Tarbet Pharmacy on Royston Road which was 1 mile from the proposed premises and 0.8 miles if the patient took the footpath across the motorway. Dr Bhopal argued that these were significant distances.

Dr Bhopal asserted that 18.7% of the population were over 65 years old and 19.3% were children under 15 years old. The population without a car, and therefore reliant on foot or public transport was 62%. Dr Bhopal estimated that it could take more than 35 minutes for an elderly person or a young mother with a toddler and pram to walk from Quarrywood Avenue to Colin Fergusson's Pharmacy, D G Tarbet Pharmacy or Red Road Pharmacy which would mean that on foot it would take around 1 hour and 30 minutes for a round trip to collect a prescription.

Dr Bhopal suggested that most of the patients in Barmulloch would feel uncomfortable visiting Red Road pharmacy because the area was very run down and there were quite often youths congregating outside the shops. It was also, in Dr Bhopal's opinion poorly stocked. In addition it did not have a consultation room, and therefore offered no privacy for patients.

Colin Fergusson's Pharmacy appeared to be in a fortunate position in that it covered a very large area. The nearest pharmacy to the west was 1.5 miles away in Springburn Health Centre. The nearest pharmacy to the east was 1.3 miles away in Asda Supermarket. The nearest pharmacy to the north was 0.8 miles away in Auchinairn Road. To the south there was Red Road pharmacy which was 1.1 miles away. As Dr Bhopal did not believe that many residents in Barmulloch would visit Red Road pharmacy for their health care needs, the nearest pharmacies to the south after Red Road Pharmacy were D G Tarbet Pharmacy and Colin Fergusson's Pharmacy in Petershill Road which were approximately 1.5 miles from the Wallacewell Road Pharmacy. The area was therefore quite sparsely populated with pharmacies.

Using datazones again, Dr Bhopal had estimated that there was 3,200



residents immediately north of Wallacewell Road in Balornock. This was not including patients west of Broomfield Road and those east of Hillhead road and Standburn Road who would probably continue to visit Colin Fergusson's pharmacy as it was the nearest pharmacy to them. Dr Bhopal advised that he found it interesting that D G Tarbet Pharmacy closed for an hour for lunch and all the existing pharmacies were closed on Saturday afternoons. Dr Bhopal suggested that this situation would not be found in a competitive environment. D G Tarbet Pharmacy was also a very small pharmacy with no space for a consultation room. Dr Bhopal considered that a consultation room was essential for the new contract and suggested it would therefore be difficult for Ms Tarbet to fulfil this requirement in the current situation.

As part of New Age Healthcare Ltd's research they had contacted the current pharmacies on Monday and Tuesday enquiring about the services available. They had learned from the staff of D G Tarbet Pharmacy and Red Road Pharmacy that they had no capacity to take further compliance aid patients. They had been advised by Colin Fergusson Pharmacy that they continued to have capacity. In respect of methadone provision, Colin Fergusson's pharmacy and D G Tarbet advised that they had no capacity. The only pharmacy accepting patients was Red Road Pharmacy. They also enquired about collection and delivery services, with both Colin Fergusson Pharmacy and D G Tarbet Pharmacy saying they only provided this service to housebound patients. Red Road Pharmacy could not be contacted.

Dr Bhopal advised that he was aware that the funding for emergency hormonal contraception was limited however he believed that pharmacies who opted to provide this service when it was first introduced could continue to provide this service. He was therefore surprised that none of the current network was providing this service. Dr Bhopal argued that this was an important initiative to avoid teenage pregnancies. Again he believed this was typical of a non-competitive environment. He believed that many pharmacies opted not to get involved in prescribing EHC as it was more profitable to sell the contraception. He also believed this to be the case in relation to the slow uptake of the minor ailment service in some areas, which he believed was due to pharmacies believing hey could lose profit in their over the counter sales.

As part of the research enquiries were also made around diabetes and blood pressure monitoring. None of the current network provided these services. While Dr Bhopal that these are not a requirement of the new contract, nevertheless New Age Healthcare Itd aimed to provide these services at no charge to the patient.

Dr Bhopal asserted that a pharmacy in Quarrywood Avenue was crucial to fulfil the requirements of the new contract such as the minor ailment service, health promotion and chronic medication service. These



services were probably more important in this area than any other area as there was no GP practice. The area was one of high deprivation and a high proportion of the residents would be eligible for registration under the minor ailment service.

Dr Bhopal reiterated that few patients from the Barmulloch area would visit Red Road pharmacy for their healthcare needs and Ms Tarbet had asserted in a previous application that only patient's resident south of Quarrywood Road would visit her pharmacy. From this information Dr Bhopal invited the Committee to conclude that the majority of the Barmulloch residents and those immediately north of Wallacewell Road in Balornock would visit Colin Fergusson Pharmacy. Accordingly Colin Fergusson Pharmacy was most likely serving between 6.000 and 7,500 residents and the granting of an additional contract would not affect the viability any of the existing network. Dr Bhopal stated that he believed the physical presence of pharmacies in the area to be sparse and there was an inadequate provision of some pharmaceutical services as a result.

# The Interested Parties Question the Applicant

In response to questioning from Mr Fergusson, the Applicant advised that he was not aware of the exact effect of the demolition work being carried out in the area. He did not agree that this would definitely result in a decline in population. The exact effect was hard to predict at this point. He further confirmed that he was not aware what would happen to the Post Office in Quarrywood Avenue.

In response to further questioning from Mr Fergusson, the Applicant reiterated the information provided to him during his research. The Chair asked Mr Fergusson to include his rebuttal comments for his own presentation.

In response to questioning from Ms Tarbet, the Applicant advised that the petition conducted had been placed in the other shops in Quarrywood Avenue. Dr Bhopal was aware that there were several duplicated signatures on the petition. He confirmed that none of the signatories had complained of inadequate services.

In response to questioning from Mr Hughes, the Applicant asserted that a photograph of the proposed premises had been provided as part of the initial application pack. He further confirmed that he had not had plans drawn up yet and that the pharmacy would have enough space for a consultation room and would be fully DDA compliant.

#### The PPC Question the Applicant

In response to questioning from Professor McKie, the Applicant agreed that in the past those resident to the south of his identified area may



have been regarded as part of Robroyston. He asserted that this was not the case at present, despite the presence of the footpath linking the area to the other side of the motorway. He asserted that those living in Zena Street and Winifred Street would be considered to live in Barmulloch and not Robroyston.

In response to further questioning from Professor McKie, the applicant advised that the number 8 and number 12 buses operated in the area. They operated every 15 minutes. The route included Ryehill Road, Rye Road, Quarrywood Avenue, Croy Road onto Wallacewell Road. He further confirmed that residents in the area would be most likely to travel to Asda at Robroyston for their weekly shop or Tesco at Springburn.

Mrs Roberts asked the Applicant if residents around Winifred Street and Earnock Street would not find it easier to travel to the pharmacy on Royston Road, given the low car ownership within the area. The Applicant advised that the proposed premises were equidistant but that patients may find travel to Royston Road more direct.

In response to questioning from Mrs McDonald, the Applicant confirmed that he thought it a safe area to put a pharmacy. The premises had been empty for over a year.

In response to questioning from Mr MacIntyre the Applicant confirmed that the only services he would provide that was not already being provided by the existing network would be blood pressure and diabetes monitoring.

In response to questioning from Mr McCammon, the Applicant explained that his definition of neighbourhood differed from that defined by Colin Fergusson as the area to the south-east around Zena Street and Winifred Street had been omitted from this definition. He asserted that in the past this area may have been seen as being part of Robroyston, this was not the case now and the residents in the streets would consider themselves part of Barmulloch. He believed his boundaries defined a discreet area which contained all amenities.

In response to further questioning from Mr McCammon, the Applicant confirmed that there was no GP practice in the area.

In response to further questioning from Mr McCammon, the Applicant explained his estimated that it could take more than one hour for a patient to obtain a prescription in the area. He accepted that not all patients would require to travel to their GP practice to pick up a prescription but asserted that if they had to travel by public transport or by foot they would need to travel a significant distance to the nearest pharmacy.

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



# <u>The Interested Parties' Case – Mr Colin Fergusson (Colin Fergusson Pharmacy)</u>

**Mr Fergusson** thanked the Committee for allowing him to put forward his case. He advised that he had defined the neighbourhood which his pharmacy at Wallacewell Road served. This was:

North: Auchinairn Road; East: Standburn Road to Robroyston Road; South: Railway; and West: Broomfield Road.

Within this area there were churches, schools, a community hall and shops. He asserted that his definition of neighbourhood took in some housing that would likely access Auchinairn Pharmacy. He advised that 60% of patients served by his pharmacy came from the Barmulloch area and 40% came from north of the pharmacy. Within this neighbourhood Glasgow Housing Association advised that there were 1,200 homes. This equated to 55% of the housing population. Currently there were major works being undertaken to upgrade housing stock and some of the four storey tenement style flatted accommodation were being demolished to be replaced with single unit and two storey houses. In all likelihood this would result in a decline in the population. He advised that thee was good pedestrian crossing in Wallacewell Road. People crossed the road daily and left the neighbourhood daily to access main supermarkets and health centres. Asda at Robroyston was a nearby facility with a pharmacy. Costco and Tesco at Petershill Road were in the near vicinity and there was a pharmacy close by. The main shopping area for the neighbourhood was Springburn where there were three pharmacies and a health centre. There was a strong public transport service in the area.

Mr Fergusson argued that he offered a free collection and delivery service to anyone who required it and he had employed two pharmacists so that house visits could be undertaken for medication reviews and to participate in the Keep Well Project. The granting of another contract nearby would affect the services he was able to offer and so affect the pharmacy's ability to fully engage with the new pharmacy contract.

Many of the houses being demolished in the area would be replaced by private housing which would result in a reduction in population and also a change in the demographics with a more affluent resident base and so an increase in car ownership.

He asserted that eMAS numbers were increased all the time, and while he did not actively advise patients that an item presented for purchase was available through eMAS at no charge, he did believe that the service was profitable and more patients were enrolling in the service all the

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time. He advised the Committee that he had been interested in participating in the EHC scheme since its establishment, but had not been able to secure the necessary authorisation due to a restriction in the number of providers.

Mr Fergusson therefore felt that services to the neighbourhood were adequate. The Applicant was not proposing to provide any service which was not already provided by the existing network. He did not believe the application to be necessary or desirable and urged the Committee not to grant the application.

### The Applicant Questions Mr Fergusson

In response to questioning from the Applicant, Mr Fergusson advised that he did not agree with the Applicant's assertion that Colin Fergusson Pharmacy provided services to nearly 7,000 patients. He felt this to be an overestimation. He did not know what proportion of residents in Barmulloch visited D G Tarbet Pharmacy. He advised that it was surprising how many patients would travel to access services.

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

# The PPC Question Mr Fergusson

In response to questioning from Professor McKie, Mr Fergusson advised that he delivered a large number of compliance aids to patients south of Wallacewell Road as well as serving a proportion that travelled to the pharmacy. He concluded that the patients travelled to the pharmacy on foot, by bus and by car as there was ample parking outside his pharmacy.

In response to questioning from Mrs Roberts, Mr Fergusson confirmed that a proportion of patients who were resident with the north area marked green on his map visited his pharmacy on Wallacewell Road because of the location of the surgery which was currently located in Ferness Road, but was due to relocate to a new build surgery on Wallacewell Road.

In response to questioning from Mr MacIntyre, Mr Fergusson clarified his comments around eMAS in that when approached by patients the intervention was dictated by the pharmacist's clinical judgement.

There were no questions to Mr Fergusson from Mrs McDonald, Mr McCammon, Mr Gillespie or the Chair.

<u>The Interested Parties' Case – Ms Gillian Tarbet (D G Tarbet Pharmacy)</u>



**Ms Tarbet** advised the Committee that the neighbourhood served by her pharmacy stretched to Quarrywood Avenue, Standburn Road, Darnoch Road, the M80 and back up. She advised that her pharmacy provided services to the south area of Barmulloch, but not the north. She provided collection and delivery and compliance aids to many patients around Winifred, Earnock and Zena Streets. Her pharmacy had capacity to accept more compliance aid patients if there was a need.

She advised that many of the older residents around the above streets had family in the Provanmill area who visited her pharmacy to collect prescriptions. People from the area just to the north of the motorway also accessed the pharmacy via the footpath in the area. The footpath was well lit.

She advised that although there was no consultation room in her pharmacy, she did not believe this hindered the provision of services. She took part in the Keep Well Project and had 50 patients whom she saw in the dispensary with no problem.

She asserted that she would never turn down a methadone patient if referred via a GP or GAS (Glasgow Addiction Service). Currently she provided services to over 50 methadone patients with no problems. She actively promoted eMAS.

She advised that 90% of prescriptions dispensed at her pharmacy came from patients registered with Glenmill Surgery, although many of these patients resided outwith the area, but continued to travel to access services. Ms Tarbet considered she provided a good service and did not believe an additional contract was necessary or desirable.

## The Applicant Questions Ms Tarbet

In response to question from the Applicant, Ms Tarbet advised that around 50% of her patients resided north of the M80.

In response to further questioning from the Applicant, Ms Tarbet advised that she employed a further pharmacist for two reasons; to provide flexibility and to allow her to engage fully with the requirements of the new contract and the pharmacy's participation in the Keep Well Project. She did not know whether a further contract would affect the viability of her pharmacy, but she didn't feel that there was a need for a further contract. She also considered that patients could travel to access services if there was good transport links.

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

#### The PPC Question Ms Tarbet



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In response to questioning from Mrs McDonald, Ms Tarbet confirmed that more patients from Barmulloch had registered with Glenmill Surgery.

In response to questioning from Professor McKie, Ms Tarbet confirmed that the number 8 bus and the number 11 bus operates in the area and would be convenient for Quarrywood Avenue and down Royston Road. They operated every 20-30 minutes.

There were no questions to Ms Tarbet from Mrs Roberts, Mr MacIntyre, Mr McCammon, Mr Gillespie or the Chair.

## The Interested Parties' Case – Mr Gerry Hughes (NHS Greater Glasgow & Clyde Area Pharmaceutical General Practitioner Subcommittee)

**Mr Hughes** advised that the General Practitioner Subcommittee had defined the neighbourhood as:

East: M80 motorway; South: railway line; West: Balornock Road; North: Auchinairn Road.

Within this neighbourhood there were five pharmacies. Three were equidistant from the Applicant's proposed premises less than  $\frac{3}{4}$  mile away. The subcommittee considered the area adequately covered by pharmacies.

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

## The PPC Question Mr Hughes

In response to questioning from Mrs Roberts, Mr Hughes clarified that there was only one pharmacy within the neighbourhood defined by the subcommittee and five within a one mile radius of the Applicant's proposed premises.

The Chair asked Mr Hughes what it was about the neighbourhood that the GP subcommittee found so defining. Mr Hughes responded that there had been previous applications for premises in the area and that the barriers were well defined.

There were no questions to Mr Hughes from Professor McKie, Mrs McDonald, Mr MacIntyre, Mr McCammon, or Mr Gillespie.

#### The Interested Parties Sum Up



**Mr Fergusson** advised the Committee that the area was well serviced. There was an adequate bus service in the area and the granting of a further contract may affect the provision of services. He reminded the Committee that there was a demolition programme being undertaken in the area which may result in a reduction in the population, or at best a stabilisation. His pharmacy had capacity to take more methadone patients and more compliance aid patients. The pharmacy operated with two pharmacists and he was putting profit back into the pharmacy. A further contract was not necessary or desirable.

**Ms Tarbet** advised the Committee that there had been no complaints over the level of service in the area. She provided collection and delivery for those who needed it. While the pharmacy did not have a consultation room this did not hinder the provision of services. There was no need for a further pharmacy.

**Mr Hughes** advised the Committee that the subcommittee had looked at the distances from the Applicant's proposed premises to the three nearest pharmacies and did not consider there was a need for a further pharmacy.

## The Applicant Sums Up

**Dr Bhopal** advised that there was approximately 7,500 people resident within his identified neighbourhood. Most of these were currently served by Colin Fergusson Pharmacy. On contacting the existing network it had become clear that they did not provide some services nor had they offered information on where the services could be accessed. Two of the pharmacies did not have consultation rooms. Pharmacies were sparse in the area. The application was both necessary and desirable.

Before the Applicant and the Interested Parties left the hearing, the Chair asked them to confirm that they had had a full and fair hearing. All confirmed that they had.

The PPC was required 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) Pharmacy contractors within the vicinity of the applicant's premises;
- b) The NHS Greater Glasgow & Clyde Area Pharmaceutical (General Practitioner Sub-Committee);
- c) The Greater Glasgow & Clyde Area Medical Committee (GP Sub-Committee).

The Committee also considered;-

- d) The location of the nearest existing pharmaceutical services;
- e) Demographic information regarding post code sectors G21.3, G21.4 and G33.1;
- f) NHS Greater Glasgow and Clyde plans for future development of services and
- g) A petition submitted by the Applicant.

# DECISION

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 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: Wallacewell Road travelling to Standburn Road;

East: Standburn Road, moving across the roundabout at Saughs Road to Robroyston Road;

South: Robroyston Road across Royston Road to Greenside Street back to Royston Road; and

West: Royston Road to Broomfield Road, along its length to its meeting with Wallacewell Road.

The Committee felt that this was a distinct neighbourhood. The area to the north of Wallacewell Road, while predominantly of a similar housing stock was identified with the Auchinairn area and not the area of Barmulloch to the south. The housing and topography to the east of Standburn Road was entirely different as it comprised a high percentage of private housing and also a large supermarket facility.



The Committee did not consider the M80 to be a significant barrier as there was a footbridge within the immediate vicinity of the Applicant's proposed premises that allowed access across the road to the area of Royston to the south. Prior to the construction of the motorway this had been a single community, which continued to function as such with the benefit of the connecting facility of the walkway. Broomfield Road was, in the Committee's opinion a boundary in that the housing to the west of this was somewhat different as was the demographic composition.

#### 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 two existing pharmacies. These pharmacies provided the full range of pharmaceutical services including supervised methadone and domiciliary oxygen. The Committee considered that the level of existing services ensured that satisfactory access to pharmaceutical services existed within the defined neighbourhood. The Committee therefore considered that the existing pharmaceutical services in the neighbourhood were adequate.

The Committee did not feel that the Applicant had demonstrated inadequacy. Although the Applicant had put forward his case, the Committee challenged his assertion that the existing network would not be able to cope with any changes resulting from the various developments which were due for completion in the near future.

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

In accordance with the statutory procedure the Chemist Contractor Members of the Committee Alasdair MacIntyre 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 not necessary or desirable in order **Commented [N2]:** Can we change the wording? Evidence was presented and challenged

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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.

### The Chemist Contractor Members of the Committee Alasdair MacIntyre and Scott McCammon and Board Officers rejoined the meeting at this stage.

# 6. APPLICATIONS STILL TO BE CONSIDERED

The Committee having previously been circulated with Paper 2008/03 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:

Mr D Dryden and Mr M Balmer, 16 Kyle Square, Spittal, Glasgow G73 4QG

The Committee agreed that further information was required before a decision could be taken on the following applications:

Ms A McLean and Ms C Conetta, Unit C, 151 Western Road, Glasgow G72 8PE

# 7. ANY OTHER COMPETENT BUSINESS

There was no other competent business.

# 8. DATE OF NEXT MEETING

Scheduled for Thursday  $31^{\rm st}$  January 2008 at 12.30pm. Venue to be confirmed.

The Meeting ended at 4.30p.m.