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 David Thomson.

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

Case No: PPC/INCL17/2007
Mr Neeraj Salwan – 128 Main Street, Paisley PA1 2DP

The Committee was asked to consider an application submitted by Mr
Neeraj Salwan, to provide general pharmaceutical services from premises situated at 128 Main Street, Paisley PA1 2DP under Regulation 5(10) of the National Health Service (Pharmaceutical Services) (Scotland) Regulations 1995 as amended.

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

The Committee, having previously been circulated with all the papers regarding the application from Mr Salwan, agreed that the application should be considered by oral hearing.

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

The Applicant was represented in person by Mr Neeraj Salwan (“the Applicant”). The interested parties who had submitted written representations during the consultation period, and who had chosen to attend the oral hearing were Mr Nisith Nathwani, (Lloydspharmacy) and Mr Jasvinder Shergill (Foxbar Pharmacy) (“the Interested Parties”).

Prior to the hearing, the Panel had collectively visited the vicinity surrounding 128 Main Street, Paisley PA1.2, the pharmacies, GP surgeries and facilities in the immediate neighbourhood, and the wider areas of Foxbar, Elderslie, Millarston and Ferguslie.

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 and the Applicant were then given the opportunity to sum up.

**The Applicant’s Case**

Mr Salwan commenced his presentation by identifying the neighbourhood. He advised that the premises in question were situated in the upper North West end of Millarston. Although situated in the Ward of Millarston and Lounsdale the adjoining areas of Meikleriggs and Brediland would be the most immediate areas that the pharmacy would serve.
The boundaries of the neighbourhood were in Mr Salwan’s opinion:

North: Main Road, Ferguslie;
East: Maxwellton Street going up Corsebar Road;
South: Stanely Road to Brediland Road; and
West: Dee Drive to Fulbar Road.

He advised that the neighbourhood consisted of various neighbourhood facilities such as schools, shops, a post office, community centre, allotments, nursery, kids play area, public houses, a bowling green, sports fields, tennis courts and a petrol station.

Mr Salwan then went on to give details around the population and new developments within the area. He advised that the population within his defined neighbourhood had risen sharply in the last 20 years. A major development known as The Moorings was completed in the 1990s and currently Barratts had finished a large development on the former St Mirins High School which was 95% full. The homes had been developed for families. Between 1981 and 2001 the population of Lounsdale and Millarston alone increased by 19.3%.

Mr Salwan’s neighbourhood incorporated the ward of Lounsdale and Millarston of which the population was 4,537. It also comprised most of the ward of Brediland which had a population of 3,952. These statistics helped demonstrate the size of this large residential and built up area. Mr Salwan then went on to provide statistics of the area as compared with the Scottish average.

<table>
<thead>
<tr>
<th></th>
<th>Scotland</th>
<th>Lounsdale &amp; Millarston</th>
<th>Brediland</th>
</tr>
</thead>
<tbody>
<tr>
<td>Economically inactive</td>
<td>7.44%</td>
<td>9.8%</td>
<td>5.4%</td>
</tr>
<tr>
<td>Long term illness homes</td>
<td>20.31%</td>
<td>15%</td>
<td>20.10%</td>
</tr>
<tr>
<td>Homes rented from council</td>
<td>21.57%</td>
<td>14.4%</td>
<td>44.5%</td>
</tr>
<tr>
<td>No car</td>
<td>34.23%</td>
<td>26.6%</td>
<td>43.9%</td>
</tr>
<tr>
<td>One car</td>
<td>43.35%</td>
<td>47.6%</td>
<td>40.9%</td>
</tr>
<tr>
<td>Two cars</td>
<td>18.62%</td>
<td>18.2%</td>
<td>13.2%</td>
</tr>
</tbody>
</table>

The Carstairs score which is a national index measuring the level of deprivation in an area using data from Census statistics were:

Lounsdale and Millarston -2.32% and Brediland 3%. A positive figure suggests a high amount of deprivation in an area.

Mr Salwan explained that currently in his neighbourhood there were no pharmaceutical services. Residents had to travel outwith their area to access pharmaceutical services. There was a problem in the area regarding ease of access to pharmaceutical services and his pharmacy in Elderslie had had numerous requests from residents in this
neighbourhood to offer collection and delivery services. Mr Salwan did have letters of support for this, but had chosen not to submit these to the Committee. Mr Salwan advised that supervised methadone was another issue in the area. There appeared to be a lack of available spaces, especially for drug users in the Brediland area. Mr Salwan advised that this had been confirmed by the Renfrew Drug Problem Service and that his pharmacy at Elderslie served methadone clients from Brediland and Millarston.

Mr Salwan advised that it had been proven in previous contracts awarded that nothing could rival a neighbourhood having its own local community pharmacy to provide dedicated pharmaceutical provision through healthcare advice to the neighbourhood residents. The new pharmacy contract focussed on pharmacists providing pharmaceutical care rather than depending solely on the supply function. The new contract advocated that patients should be readily able to access their pharmacist in the pharmacy for advice. The focus on local care was reinforced in the Scottish Government’s “Delivering for Health” 10 year plan, which stated clearly the desire of the Scottish Government for pharmacies to provide preventative health care advice in the heart of the local community it serves and that this advice should be provided in modern, well equipped, easily accessible premises.

Mr Salwan believed that the neighbourhood had more than enough population for the pharmacy to improve on current and future new pharmacy contract services e.g. EMAS, public awareness campaigns, chronic medication service, acute medication service, assessing compliance aid needs, diagnostic services such as blood pressure monitoring and diabetes testing, increasing places for methadone supervision, supply of ostomy products, supplementary prescribing clinics, oxygen provision, nicotine replacement therapy, head lice services, model schemes and palliative care services.

Mr Salwan advised that no planning consents or building warrants were required for the 800 sq feet pharmacy. He had negotiated a 10 year lease with rent review in year three and a break option in year five. The shop would be fitted out by a specialist pharmacy shop fitting company and would adhere to all Society guidelines and current Disability Discrimination Act requirements. The shop had an electricity and gas supply with clean running water. Ample well lit parking was available outside the unit.

Mr Salwan believed that the current pharmaceutical services provided in the neighbourhood were inadequate as there was no pharmacy in the neighbourhood. Mr Salwan suggested that even if the Committee thought that the pharmaceutical provision was borderline then as he had explained before the area had a large population and there was therefore a desirability to grant this contract.

There were no questions to the Applicant from the Interested Parties.
The PPC Question the Applicant

In response to questioning from Mr Fergusson, the Applicant advised that his population statistics were from May 2004. He further confirmed that he was not aware of the detailed plans for the flats in the area, but was aware that they were to be demolished for housing.

In response to questioning from Mrs Roberts, the Applicant confirmed that he was unsure of the time span between demolition and rebuild. He confirmed that this was not imminent.

In response to further questioning from Mrs Roberts, the Applicant advised that his pharmacy in Elderslie provided services to many methadone patients from the neighbourhood in which the proposed premises were situated as well as from the wider area of Paisley. Currently the Elderslie pharmacy dealt with 60 methadone patients.

In response to questioning from Mr Gillespie, the Applicant confirmed that the south boundary of high neighbourhood was Brediland Road and Stanely Avenue.

In response to questioning from Mr Daniels, the Applicant confirmed that he had not had the chance to submit the letter of support mentioned in his initial application form. He advised that it was difficult to obtain up to date information and he had other priorities which had occupied his time. He apologised to the Committee for this omission.

In response to questioning from Mrs Lynch, the Applicant confirmed that he had appointed a pharmacist for the proposed pharmacy. The pharmacist was currently working at his Elderslie Pharmacy.

In response to further questioning from Mrs Lynch, the Applicant advised that his patients would come from the GP practices in Paisley. There were around eight or nine practices from which his patients would be derived. He confirmed that they would travel to the pharmacy on foot or by public transport or bike. He confirmed that there was a bus stop outside the proposed premises but that this was for travelling in to Paisley. The nearest bus stop for those travelling in the other direction was situated at George Street/Canal Street. He advised that in his opinion this was a 5-10 minute walk from his proposed premises.

There were no questions to the Applicant from the Chair.

The Interested Parties’ Case – Mr Jasvinder Shergill (Foxbar Pharmacy)

Mr Shergill advised the Committee that his pharmacy was within the boundary of what he would consider was the neighbourhood to be served by the Applicant’s proposed premises. He further advised that the GP practices in Paisley were served by several pharmacies close to the centre. There was no GP surgery within a considerable walking distance
from the proposed premises, while the pharmacy at Asda was within walking distance. He did not believe the application to be necessary or desirable.

The Applicant Questions Mr Shergill

In response to a question from the Applicant around whether it was reasonable to expect patients from Millarston to walk to Foxbar Pharmacy to access services, Mr Shergill countered that neither was it reasonable to ask patients to travel from Brediland to Millarston.

In response to further questioning from the Applicant, Mr Shergill confirmed that he provided a collection and delivery service to patients within the boundaries identified by the Applicant. He further confirmed that Foxbar did not provide a supervised methadone service.

In response to further questioning from the Applicant, Mr Shergill confirmed that he was not aware of the population of Millarston/Brediland/Foxbar. In response to the Applicant’s assertion that the population was 9,000, Mr Shergill advised that he could neither agree nor disagree with the Applicant’s assertion that he could provide this population with a full pharmaceutical service as he was not familiar with the figures. He reiterated that there was already a pharmacy serving this population and that a further pharmacy could affect its viability. A further pharmacy was not needed.

The Interested Parties Question Mr Shergill

In response to questioning from Mr Nathwani, Mr Shergill confirmed that Foxbar Pharmacy was not at capacity. There was scope to provide services to additional patients.

The PPC Question Mr Shergill

In response to questioning from Mr Fergusson, Mr Shergill confirmed that Foxbar Pharmacy provided a collection and delivery service which was administered by a company who collected prescriptions from GP practices.

In response to a suggestion from Mrs Roberts that not being at full capacity and not taking part in the methadone scheme could be interpreted as inadequacy, Mr Shergill advised that a nearby pharmacy (Glenburn Pharmacy) participated in the supervised methadone programme and he did not feel as though a further one was needed.

In response to further questioning from Mrs Roberts, Mr Shergill advised that the patients registered at the nearest GP practices were currently attending Asda, Lloyds or Parkinsons.

In response to questioning from Mrs Lynch, Mr Shergill advised that his patients were currently drawn from Foxbar, Lounsdale, George Street
There were no questions to Mr Shergill from Mr Daniels, Mr Gillespie or the Chair.

**The Interested Parties’ Case – Mr Nisith Nathwani (Lloydspharmacy)**

Mr Nathwani thanked the Committee for allowing Lloydspharmacy to present their case. He advised that he found the Applicant’s case very difficult to argue as he had not defined a neighbourhood. He had also presented little evidence to support his contention that the current network was inadequate. He pointed to the Applicant’s assertion that supporting evidence would follow and advised that in the absence of this, there was little argument he could put forward to the Applicant’s case.

Mr Nathwani described Lloydspharmacy’s neighbourhood as:

North: the A737;
West: Linwood Road;
South: A761 – Canal Street;
East: B7050

He advised that Lloydspharmacy’s neighbourhood was similar to that defined by the NHS Greater Glasgow and Clyde Area Pharmaceutical General Practitioner Subcommittee.

Mr Nathwani advised that within this neighbourhood there were currently two pharmacies: Asda and Lloydspharmacy. These pharmacies offered good access to premises that were DDA compliant, had ample parking and longer opening hours. Lloydspharmacy provided no less services than the Applicant intended to provide including MDUS trays. They also had methadone spaces. Mr Nathwani advised that there was no inadequacy in the area and the application should fail.

**The Applicant Questions Mr Nathwani**

In response to questioning from the Applicant, Mr Nathwani, confirmed that Lloydspharmacy’s north boundary was the A737. This was a natural boundary. He could not say whether the residents living in Murray Street would consider themselves neighbours of Stanely Road and that there was no distinct difference in housing in the immediate vicinity.

In response to further questioning from the Applicant, Mr Nathwani advised that Lloydspharmacy had spaces for methadone patients in all their pharmacies in Paisley. He could not say why the Applicant received requests for spaces at his Elderslie pharmacy. He proffered that this might be because many methadone patients did not like to use
pharmacies within their own neighbourhood, preferring to travel to other pharmacies.

In response to final questioning from the Applicant, Mr Nathwani advised that the population in the Ferguslie area was approximately 6,500 and that an additional contract would have a material effect on the current network. Lloydspharmacy was close to the main surgery in the area and there were no waiting times in the pharmacy. There was no inadequacy.

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

There were no questions to Mr Nathwani from the Committee.

The Interested Parties Sum Up

Mr Shergill advised the Committee that the proposed site was near to other pharmacies. There was no need for a further contract. Plenty of people passed Foxbar Pharmacy and the area was well covered by general pharmaceutical services.

Mr Nathwani advised the Committee that he found this a difficult case to argue, but felt that it was neither necessary nor desirable for a further contract to be granted for the Applicant’s proposed premises.

The Applicant Sums Up

Mr Salwan advised the Committee that the collective population for his neighbourhood seemed to be about 7,500. Currently there was no pharmacy in this neighbourhood. There was an inadequacy in provision as shown by the problem with the lack of methadone spaces. He had elicited support from the Renfrew Drug Problem Service. A further pharmacy would alleviate problems current and future. The Applicant believed another pharmacy in the area was going to add to the quality of current services provided by other pharmacies by increasing levels of service, competition and choice. His pharmacy would solely concentrate on the identified neighbourhood, thereby providing a dedicated personal service for these residents only available from a community pharmacy. Mr Salwan believed that the new pharmacy would not affect the viability of other pharmacies, because the population as shown in the statistics was large. He felt that he had proven the legal test that there was inadequacy in the area.

The PPC was required and did 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 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;
e) Demographic information regarding Ferguslie, Foxbar and Elderslie; and
f) NHS Greater Glasgow and Clyde plans for future development of services.

**DECISION**

Having considered the evidence presented to it, and the PPC’s observation from the site 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: the railway;
West: the A761 – Linwood Road, Fulbar Road, Dee Drive;
East: Lounsdale Road, Maxwellton Street, George Street to the B7050; and
South: Brediland Road to its meeting with Lounsdale Road.

The Committee felt that this was distinct neighbourhood. The A761 was a trunk road which formed the main arterial route into Paisley centre. The area to the north of this road was different in nature both in social and residential terms. To the west of Fulbar Road lay a golf course, which formed a natural boundary. The area within these boundaries was, in the Committee’s opinion a neighbourhood for all purposes. It contained schools, business, churches and residential
Adequacy of Existing Provision of Pharmaceutical Services and Necessity or Desirability

Having reached that decision, the PPC was then required to consider the adequacy of pharmaceutical services in that neighbourhood, and whether the granting of the application was necessary or desirable in order to secure adequate provision of pharmaceutical services in that neighbourhood.

Within the neighbourhood as defined by the PPC there were no existing pharmacies. The nearest pharmacies were situated to the north and the south. The Committee noted that both pharmacies were central to areas of population and offered satisfactory access to pharmaceutical services within their neighbourhoods. The Committee noted that the Applicant's proposed premises were situated on the main arterial route into Paisley. They did not consider that a pharmacy at this site would improve pharmaceutical services for the neighbourhood. Adequate services were provided by the existing network at places that were convenient to the neighbourhood and which they visited as part of their normal day to day activities.

The Committee did not feel that the Applicant had demonstrated inadequacy.

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 Member of the Committee Colin Fergusson 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 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 Member of the Committee Colin Fergusson and Board Officers rejoined the meeting at this stage.

5. ANY OTHER COMPETENT BUSINESS
The Chair advised the Committee that several members had attended the training organised by the National Appeals Panel on 11th October 2007. In response to questioning from the Chair, the Chair of the National Appeals Panel had undertaken to look into providing NHS Boards with explanation on the occasions where the Chair of the Panel determined that an appeal should be considered by oral hearing.

The Chair advised that this was an important concession by the National Appeals Panel and asked the Committee to support Mrs Glen in ensuring that all future notifications were accompanied by sound and clear reasoning.

**AGREED/-**

6. DATE OF NEXT MEETING

Scheduled for Tuesday 30th October 2007 at 12.30pm. Venue to be confirmed.

The Meeting ended at 4.40p.m.