NHS Greater Glasgow and Clyde

NOT YET ENDORSED AS A CORRECT RECORD

Pharmacy Practices Committee (11)
Minutes of a Meeting held on
Monday 4th August 2008
The Sherbrooke Castle Hotel, 11 Sherbrooke Avenue,
Glasgow G41 4PG

PRESENT:	Mrs Agnes Stewart	Chair
	Professor J McKie	Lay Member
	Mr William Reid	Deputy Lay Member
	Mrs Kay Roberts	Deputy Non Contractor Pharmacist Member
	Mr Colin Fergusson	Deputy Contractor Pharmacist Member

IN ATTENDANCE:	Dale Cochran	Contact Supervisor – Community Pharmacy Development
	Robert Gillespie	Lead – Community Pharmacy Development
	Janine Glen	Contracts Manager – Community Pharmacy Development
	Elaine Ward	Community Development Pharmacist

ACTION

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. MINUTES

The Minutes of the meetings held on Friday 4th April 2008 **PPC[M]2008/05**, Monday 10th March 2008 **PPC[M]2008/09** and Wednesday 30th April 2008 **PPC[M]2008/10** were approved as a correct record.

3. ANY OTHER BUSINESS NOT INCLUDED IN AGENDA

None.

NHS Greater Glasgow and Clyde

Section 1 – Applications Under Regulation 5 (10)

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

Case No: PPC/INCL04/2008
Mr Razwan Shafi – 25 Main Street, Howwood PA9 1AR

The Committee was asked to consider an application submitted by Mr Razwan Shafi, to provide general pharmaceutical services from premises situated at 25 Main Street, Howwood PA9 1AR 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 Shafi, agreed that the application should be considered by means of the written representations as it was less than 12 months since the Committee considered a previous application by the same Applicant for the same premises.

Prior to consideration of the previous application in February 2008, three members of the current Committee had visited the vicinity surrounding 25 Main Street, Howwood PA9, the pharmacies, GP surgeries and facilities in the immediate neighbourhood, and the wider area of Johnstone, Spateston and Kilbarchan. The other two members of the current Committee (who had not been present at the initial hearing of the application) confirmed that they had visited the area prior to the PPC meeting.

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 NHS Greater Glasgow & Clyde Area Pharmaceutical Community Pharmacy Subcommittee;

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 the village of Howwood;

f) NHS Greater Glasgow and Clyde plans for future development of services;

g) Unsolicited (by the Board) letters of support submitted by the Applicant from Dr Bill Wilson (MSP), Howwood Community Council, members of the general public, local councillors, Trish Godman (MSP) and Annabel Goldie (MSP); and

h) A public 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 Community Pharmacy Subcommittee in relation to the previous and current applications and taking all information into consideration, the Committee considered that the neighbourhood should be defined as follows:

North: A737;
East: Beith Road meeting at Torbracken Street;
South: Most Southern point of Hill Road
West: Where B787 and the A737 meet.

The Committee felt that this was distinct neighbourhood. The A737 trunk road was a physical boundary. Within this area was the village commonly known as Howwood. Within this area residents could go about their daily lives utilising amenities.

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.

The Committee noted that the previous application head by the PPC on 22nd February 2008 had been granted on the basis that the current provision of services was deemed to be inadequate. This decision had been appealed by Boots UK Ltd and had been considered by the National Appeals Panel at a hearing on 16th June 2008.

The Committee noted that the National Appeal Panel (NAP) had determined that the provision of pharmaceutical services at the premises was neither necessary nor desirable to secure adequate pharmaceutical services in the neighbourhood. The NAP had considered that the existing pharmaceutical services in the neighbourhood were adequate given that there were nine pharmacies providing services to the population from the surrounding towns and villages of Johnstone, Linwood, Kilbarchan, Lochwinnoch and Spateston. The Appeals Panel concluded that these pharmacies provided all the necessary pharmaceutical services.

The Committee noted that the Applicant had not provided any additional or further evidence to show that the circumstances prevailing in the area at the time of the National Appeals Panel's determination had changed in any significant way that would cause the PPC to come to a different conclusion. Indeed the case put forward by the Applicant appeared to be identical to his submission to the NAP with the exception of some additional letters of support and a refreshed petition which the Committee assumed had been organised to support his presentation to the National Appeals Panel. There was no additional demographic information or plans for development within the area.

While the Committee took account of the NAPs determination, they were mindful that they were obliged to hear the current application on its own merits. Having taken all factors into consideration, the Committee were satisfied that no evidence had been produced by the Applicant, or had been made available to the Committee via another source which showed that the circumstances in the area had changed or would potentially change to a significant extent. The provision of services by the existing network remained the same and therefore adequate.

The Committee noted comments made by Dr Dorrell at Page 87 of the Committee's papers and wished to clarify for the record that Spateston Pharmacy had not closed and was in fact operational.

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

In accordance with the statutory procedure the Chemist Contractor 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.

Contractor Services Supervisor

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

4 (ii) **Case No: PPC/INCL05/2008**
Mr Denis Houlihan, 11-17 Princes Street, Port Glasgow PA14 5JA

The Committee was asked to consider an application submitted by Mr Denis Houlihan, to provide general pharmaceutical services from premises situated at 11-17 Princes Street, Port Glasgow PA14 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 Houlihan, agreed that the application should be considered by means of the written representations as it was less than 12 months since the Committee considered a previous application by the same Applicant for the same premises.

Prior to consideration of the previous application in November 2007, two members of the current Committee had visited the vicinity surrounding 11-17 Princes Street, Port Glasgow PA14 5JA, the pharmacies, GP surgeries and facilities in the immediate neighbourhood, and the wider area of Port Glasgow. The other two members of the current Committee

(who had not been present at the initial hearing of the application) confirmed that they had visited the area prior to the PPC meeting.

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 NHS Greater Glasgow & Clyde Area Pharmaceutical Community Pharmacy Subcommittee;

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 the area of Port Glasgow; and

f) NHS Greater Glasgow and Clyde plans for future development of services.

DECISION

The Committee noted that additional information had been provided by one of the Partners' of the company on Friday 1st August 2008. This was outwith the timescale required by the Committee's procedures and had not been shared with the other Interested Parties. After careful consideration of the supplementary information, the Committee agreed that it should not be included in the papers for consideration.

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 Community Pharmacy Subcommittee in relation to the previous and current applications and taking all information into consideration, the Committee considered that the neighbourhood should be defined as follows:

North: the River Clyde;
East: Park Hill, Park Farm to Kilmacolm Road;
South: Behind residential area at High Auchinleck, through Mid Auchinleck crossing Port Glasgow golf course to its meeting with the cycle track;
West: Gibshill Road to its meeting with the A8 and the River Clyde.

The Committee felt that this was distinct neighbourhood. The River Clyde was a physical boundary. Within these boundaries was the village commonly known as Port Glasgow. Within this area residents could go about their daily lives utilising amenities.

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.

The Committee noted that the previous application head by the PPC on 21st November 2007 had been rejected on the basis that the current provision of services was deemed to be adequate. Although this decision had been appealed by the Applicant, the Chair of the National Appeals Panel had not considered the merits of the appeal as she felt the appellant had failed to intimate a relevant notice of appeal in terms of paragraph 4(3) of Schedule 4 of the 1995 regulations, within the specified timescale.

The Committee noted that within the neighbourhood as defined by the PPC there were two 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 further noted that they had taken into consideration the Applicant's assertion around a potential increase in population from the new housing developments, and they continued to be satisfied that the existing network of community pharmacies could address this demand.

The Committee further recalled their comments around the on-going issue of the potential improvement of the two pharmacies in the town, and were encouraged to learn that progress was now being made with one of the pharmacies having undergone work, and the other currently undergoing development.

The Committee noted that the Applicant had not provided any additional or further evidence to show that the circumstances prevailing in the area at the time of the PPC's previous decision had changed in any significant way that would cause the PPC to come to a different conclusion. While supplementary evidence had been produced, this was received outwith the timescale required by the PPC's processes and could not be shared with the Interested Parties.

The Committee was satisfied that no evidence had been produced by the Applicant, or had been made available to the Committee via another source which showed that the circumstances in the area had changed or would potentially change to such a significant extent that the PPC's previous decision should be overturned.

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

In accordance with the statutory procedure the Chemist Contractor 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.

Contractor Services Supervisor

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

4 (iii). Case No: PPC/INCL06/2008
Mr Mohammed Khalil Jamil & Mrs Farhat Jamil, 219/221 St Andrew's Road, Glasgow G41 1PD

The Committee was asked to consider an application submitted by Mr &

Mrs Jamil, to provide general pharmaceutical services from premises situated at 219/221 St Andrew's Drive, Glasgow G41 1PD 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 & Mrs Jamil, 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 Mrs Farhat Jamil ("the Applicant"), assisted by Mr Khalil Jamil. Dr Rafik Gardee was in attendance as an observer, to which no-one raised any objections. The interested parties who had submitted written representations during the consultation period, and who had chosen to attend the oral hearing were Mr Andrew Mooney (Boots UK Ltd) and Mr David Young (Rowlands Pharmacy) ("the Interested Parties").

Prior to the hearing, the Panel had collectively visited the vicinity surrounding the Applicants' premises, pharmacies, GP surgeries and facilities in the immediate area and the surrounding areas of Kinning Park, Pollokshaws, Govanhill and Gorbals.

The procedure adopted by the PPC at the hearing was that the Chair asked the Applicant to make their submission. There followed the opportunity for the Interested Parties and the PPC to ask questions. Each of the Interested Parties then gave their presentation, with the opportunity for the Applicant and the PPC to ask questions. The Interested Parties and the Applicant were then given the opportunity to sum up.

The Applicants' Case

The Applicant thanked the Committee for providing her the opportunity to

present their case. She advised that throughout her presentation the Applicants would provide the Committee with all the justifications why the award of the contract was necessary and desirable at the proposed premises with respect to pharmaceutical provision, current and anticipated, as well as the locality needs coupled with the Health Board's strategy to improve the health needs of the locality by fully implementing the new pharmaceutical contract and future enhance service delivery.

The Applicant advised that the proposed premises were situated at 219/221 St Andrews Road which was within the Pollokshields East area of Glasgow. The premises provided a space of 1032 square feet and the Applicants intended to provide a consultation room and two treatment rooms with a seated health information area. The premises would also allow for disabled access and toilet facilitates compliant with the Disability Discrimination Act. Parking was available in the surrounding area. A full range of services would be provided as required under the new contract and the Applicants were fully committed to taking part in any pilot schemes.

The defined neighbourhood was the same as that of the city ward under the old ward system for Pollokshields East. This being ward 65. The boundary lines were stated on the map previously submitted to the Committee and made available to the Interested Parties during the initial consultation process. The boundary was described as: from the proposed premises travelling north to the Shields Road railway line, travelling East along railway line to Eglinton Street, southwest along Eglinton Street to its' meeting with Pollokshaws Road, north-westward along Pollokshaws Road to Shields Road, northeast along Shields Road to Albert Drive, north-westward along Albert Drive to St Andrews Drive, south-westward along St Andrews Drive to Nithsdale Road, north-westward along Nithsdale Road to the M77, north along the M77 to the Shields Road railway line, north-westward along railway line to Shields Road.

The Applicants considered the Pollokshields East area to be a distinct area containing its own day-to-day services. The proposed premises were situated on a busy road used by persons travelling to access the motorway. Shields underground station was also situated 0.1 mile north of the proposed premises. The only post office in Pollokshields was located on Shields Road approximately 100 yards from the proposed premises. Also located on Shields Road was a new dental surgery, which would be taking patients in September, a private crèche and a number of retail shops.

According to the 2001 census statistics the defined neighbourhood had a population of 8,097. It had an ethnic minority population of 48.2%, which was the highest in Scotland. Since the census, the Applicant averred there had been a number of asylum seekers, migrant workers and refugees taking up residence with the neighbourhood and she would

estimate this to be a minimum of 200 persons.

Figures taken from the CHCP Community Profiles showed:

33% of children in the neighbourhood resided in workless households;
24.1% of the population was income deprived;
20.9% of the working agree population were unemployed;
29% of households were classed as being overcrowded.

All these statistics were well above the Scottish and South-East Glasgow average.

50.8% of households did not have access to a car or van, which was above the Scottish average.

The Applicant suggested that a very important conclusion could be drawn from this, that an inevitable customer base that would benefit from the granting of this application would be children, unemployed and low income families.

Health Statistics showed:

Coronary heart disease deaths in under 75s – 43% above Scottish average.
Heart disease patients – 28% above Scottish average.
Cerebrovascular disease inn under 75s – 69% above the Scottish average.
Alcohol related deaths – 23% above Scottish average.
Drug related hospital patients – 69% above the Scottish average.
Drug related deaths – 80% above the Scottish average.
12.1% of the population were on Incapacity and Disability Allowance – 26% above the Scottish average.
Self assessed health, classified as “Not Good” – 27% above the Scottish average.

The Applicant suggested that these statistics clearly showed an area of deprivation and need. Hence the primary focus of the application was to improve these figures by engaging with the community and tackling the lifestyle and health factors that created poor health and reduced life expectancy.

Mrs Jamil advised the Committee that there were over 100 business premises located in the neighbourhood. This included the United Cash and Carry, located on Maxwell Road at its junction with St Andrews Road, which had 2500 regular customers per week. Mr Moughal, the Deputy Manager had stated that 90% of these customers resided outwith the defined area. The premises were open from 5.00am – 9.00pm; Mon-Sat and 10.00am – 7.00pm; Sunday.

There were also many halal butchers' shops, Asian clothes shops and many other businesses that catered fro the needs of the Asian population. As a result of this many Asians from other neighbourhoods and cities travelled to the neighbourhood to access these services on a daily basis. This was an additional cohort of population on top of the already resident population. Many of the shops opened until 7.00 or 8.00 pm seven days per week. This was a neighbourhood for all purposes. The population did not need to travel outwith this area.

The Applicant advised that there were three schools and a nursery located within the neighbourhood as well as a number of mosques and other Islamic study establishments which provided Islamic Studies classes to children on a daily basis after school hours. Many parents resident outwith the defined neighbourhood who had difficulty accessing Arabic classes for their children in their own neighbourhoods, travelled into the defined neighbourhood to access these services, the Applicant included. Many of these facilitates were open until 10.00pm.

There were two churches within the neighbourhood who as well as providing Sunday services also provided various community services during the week until 7.30pm. There were a number of community centres located in the area that provided services until 8.00pm and youth classes and activities were also held within some schools within the area until 8.00pm.

Dr Chaudhry's surgery was located in the neighbourhood on Maxwell Road and this closed at 8.00pm on a Tuesday. Pollokshields Medical Practice was also located on Maxwell Road and closed at 6.00pm, however according to the Practice Manager the last patient normally left at 6.30pm.

Because of this activity the Applicants intended to open the premises from 9.00am – 8.00pm; Mon-Sat and 10.00am – 5.00pm Sunday as this was also a busy day for the Asian population, within and outwith the proposed neighbourhood looking to access the retail businesses. It was also a busy day for persons attending church services and other community activities, within the community centres.

The Applicant also pointed to the 200 employees who worked at business premises within the proposed neighbourhood who did not reside there. And the five GP surgeries who had a combined patient population of 16,000.

The Applicant then went on to make reference to a National Appeals Panel decision of 20th August 2003, which related to an application made by Boots in which the Panel had decided that, in assessing the question of adequacy, it should carefully consider the needs and interests of all those individuals who could be expected to be in the

neighbourhood on a day to day basis, including residents, employees and visitors.

The Applicant advised that the Nan McKay Memorial Community Hall was situated at the end of St Johns Road and provided a number of services to the community including an elderly resource centre. This centre sat within the heart of the elderly community and was initially established to provide services that were lacking to the elderly. Mr Bill Lawns, the Manager of the Hall had verbally advised the Applicant that he supported the Applicant's case. Mr Lawns had worked in the centre for nearly 20 years and confirmed that a pharmacy more easily accessible for the elderly community within the St Andrews Drive area had been needed for a long time. He also stated that Pollokshields and Rowlands Pharmacy were too far for the elderly to walk to and from especially being an uphill walk. Mr Lawns had also stated that for the residents of the St Andrews Drive area, a chemist within the housing estate would be a great improvement in the overall well being of their life. Mr Lawns' organization had conducted many campaigns over the unreliable bus route, the 121. It was, for many, the only method of getting to chemist/doctors without taking a taxi. A chemist in the estate would allow access without this additional cost or inconvenience.

Mrs Jamil advised the Committee that there were around 800 flats situated to the west of the proposed premises. These were located in the St Andrews Crescent, St Johns Quadrant, Maxwell Grove areas of the proposed neighbourhood. The majority of these flats were occupied by the elderly.

According to Glasgow City Council estimates 2004, there were 1,100 persons aged 60 and over resident in the proposed neighbourhood. Mr Lawns had advised the Applicants that most of the elderly would reside in the deck access, mini multis and the maisonettes located to the west of the proposed premises.

The Applicant advised that the new pharmaceutical contract emphasised better access for patients to pharmacy services. Mr Lawns had verbally stated to the Applicant that this was not the case for the elderly residents living to the west of the proposed premises.

The Applicant then went on to give an overview of new development since the 2001 Census.

Keir Homes – 120 – 1,2 and 3 bedroom flats on St Andrews Road opposite the proposed premises;
The spare land next to the Keir Homes site was owned by South Side Housing Association who had proposed to build 40 flats there;
Glasgow City Council had approved an application by Stewart Milne to build 260 flats at the site behind Virgin Media situated on Maxwell

Road near to Maxwell Place;
Glasgow City Council had approved an application by Carvill Construction to build 200 flats on Maxwell Road. The site previously owned by Network Rail. Construction was due to start by the end of 2008 and would be complete a year and a half later;
Westpoint Homes were presently building 335 1,2 and 3 bedroom flats on Barrland Street. 157 of these had been sold and were occupied; the remainder would be completed in 2009;
Glasgow City Council had approved an application to construct 33 flats on Darnley Street at its junction with Maxwell Road;
Calmont Construction had completed 50 flats on Muirhouse Street situated off Barrland Street near to Albert Drive;
33 flats and retail units were presently being constructed on Albert Drive at Barrland Street.

The Applicant advised that this would equate to a total of 1071 flats.

The Applicant averred that the proposed neighbourhood was an area with a high rental market due to the easy access to services and the close proximity to the city centre. Currently there were a number of flats in these new developments for rental. There had also been a number of "To Let" posters in the windows of the flats. It was known there was keen interest from migrant workers. From local knowledge the Applicant had seen many migrant workers taking up residence within the proposed neighbourhood and also in the new developments. The Applicant was aware that migrant workers from the Govanhill area were moving to rent properties in the proposed neighbourhood due to the poor quality of housing in Govanhill. Taking this into account the Applicant would estimate that the new dwellings would be occupied by three persons per flat, which would give a population increase in the defined neighbourhood of 3213 persons.

The Applicant advised that taking into account the regeneration resulting in the increase in population, and the number of people coming into the area there would need to be a corresponding increase in service provision.

The Applicant advised that there were also significant language barriers that caused difficulties with prescription compliance, taking into account the ethnic minority resident population being 48% and the ethnic population travelling into the neighbourhood on a daily basis, there was only one pharmacy in the defined neighbourhood that had bi-lingual staff working within, on a full time basis.

The Applicant advised the Committee that they would provide all four core elements of the new contract, along with an extensive list of supplementary services, including palliative care, ostomy supplies, circumcision clinic, family planning and incontinence supplies.

The Applicant advised that it was well documented that chronic diseases amongst the Asian population were high; hence they would be participating in diabetes screening and also providing free blood pressure checks and cholesterol testing due to the fact that these were all coupled with diabetes management.

The Applicant advised that they were aware that a pharmacist prescriber clinic was being carried out at Pollokshields Pharmacy on a weekly basis designed to tackle communication and prescription compliance issue. She understood that there was a long waiting list for this clinic. The proposed pharmacy would have bi-lingual staff working within on a full time basis, allowing them to tackle communication and prescription compliance issues, and reduce the length of time patients had to wait as a result.

Mr Jamil would be facilitating this and other programmes alongside other health professionals and community organisations who participated in these services. Mr Jamil was also a member of the National Group of Diabetes UK for Ethnic Minorities and was involved in eye screening and was about to undertaken his prescribing qualification. This, the Applicant advised demonstrated the Applicants' commitment to the community.

While the Applicant advised that this was the end to her presentation she wished to make some comment on the objections made by the various Interested Parties.

Boots, Alliance and Lloyds on Victoria Road, DLL Robertson and Alliance on Cathcart Road, Govanhill Pharmacy on Calder Street, Gilbride Pharmacy on Paisley Road West and Hughes Chemist on Admiral Street were, in the Applicants' opinion located within their own distinct neighbourhoods of Govanhill and Kinning Park. It would be unfair to ask a population in the proposed neighbourhood to travel outwith their neighbourhood to access services from these pharmacies, especially when 50.8% did not have access to a car and 24.1% were income deprived.

JP Mackie Pharmacy's objection was comprehensive and the Applicant suggested the pharmacy was located in a built up residential and retail neighbourhood, with its own diverse population to serve. The premises were located near a very busy and congested junction, where parking was difficult. The Applicant believed that this would inhibit many residents from the proposed neighbourhood and also for residents within Mr Mackie's own neighbourhood who had to travel by car, from accessing services from this pharmacy.

Mr Mackie had also stated that the vast majority of the new development within the proposed neighbourhood was targeted at the upwardly mobile market, which had little demand for or trouble

accessing pharmaceutical services. For those who did require these services, Mr Mackie had suggested they use his Monday to Friday delivery service. The Applicant would respond by saying that according to Mr Mackie's pharmacy leaflet the delivery service was restricted to housebound patients who did not have a carer to collect their medication. In addition, there was no evidence that these new development would be occupied by a certain market.

Rowlands Pharmacy had been located within a neighbourhood with a very high ethnic minority population for a considerable time. They were aware that residents within had communication issues, yet they only employed one bi-lingual health care assistant on a part time basis. The Applicant suggested that this was not providing an adequate service to the resident population, who as a result of communication issues had medication compliance issues.

Pollokshields Pharmacy was located at a very busy, heavily congested junction. As well as there being parking problems, much of the transient population double parked causing additional congestion which again inhibited the travelling population from accessing services from this pharmacy. The Applicants were also concerned that Mr Sheikh from Pollokshields Pharmacy had submitted a number of applications for Eglinton Street, the neighbourhood of which overlapped slightly with the Applicants' neighbourhood. The Applicants found it difficult to understand why Mr Sheikh objected to their application on the grounds that the current services were adequate, but for his own applications the services were deemed to be inadequate.

The Applicant advised that she had spoken to many residents within the proposed neighbourhood by means of a Rapid Appraisal technique, a special technique used to obtain qualitative and quantitative date for needs assessment and health surveys. The overall views of persons spoken to who use community pharmacy services within the proposed neighbourhood is that they are not aware of the services these pharmacies provide. They cannot remember when they were last approached by staff within a pharmacy and informed of any health promotions or offered any health advice. Many of the people spoken to said that to them a chemist was a place from where you only pick up your medication from. They asserted that it would be desirable to receive interaction from staff in the pharmacy and be provided with information about their services and also provided with advice on the correct usage of their medication as many of the residents had communication issues.

The Applicant advised that the local community council had provided a letter in support of the application; however this appeared to have gone astray within the system and had not been received by the Health Board. The Applicants had obtained an electronic copy of the letter and asked if this could be taken into consideration by the Committee. After

discussion it was agreed that the letter should not be considered as it contained issues which the Interested Parties had not been given the opportunity of addressing. The Committee felt the Interested Parties would not be able to fully respond to the issues raised in the letter without being given the opportunity to undertake further investigation. The Committee therefore agreed that the letter should not be entered into consideration.

The Interested Parties Question the Applicant

In response to questioning from Mr Young, the Applicant advised that neither she or her co-Applicant had read the article in the Chemist and Druggist journal around Rowlands Pharmacy's commitment to providing a translation service covering 30 different languages, which was provided free of charge to the local community and which is due to be rolled out across all of the Rowlands chain. They were, however, aware of the initiative operating from Nithsdale Road branch and, from anecdotal evidence, were aware that access to the service was not uniform. She also questioned the usefulness of the service for female patients wishing to access advice of a more personal nature and the time factors involved in the process.

In response to further questioning from Mr Young around the services the Applicants would provide that were different from those provided by the current network, Mrs Jamil advised that her role in the pharmacy would be to interact with the patients, fostering a relationship with the community that was not evident between the existing contractors. She intended to visit community facilities in the area and take pharmacy services to the areas the patients needed them. This model had already had some success in Grampian through Lloydspharmacy.

In response to further questioning from Mr Young, Mrs Jamil advised that the Applicants would improve the health care status of the community by providing information on services available to them.

In response to further questioning from Mr Young, Mrs Jamil confirmed that Nithsdale Road was within her defined neighbourhood and as such Rowlands Pharmacy was situated within that area.

In response to questioning from Mr Mooney, Mrs Jamil confirmed that within her defined neighbourhood there were two pharmacies currently providing services. Pollokshields Pharmacy and Rowlands Pharmacy.

In response to further questioning from Mr Mooney, Mrs Jamil advised that she did not think the local community were aware of the services that were available from the local pharmacies. This, in her opinion, showed that the current network was not providing those services adequately. She further confirmed her assertion that the proposed premises were situated in a retail centre of Pollokshields East. To

illustrate her point she pointed to the existence of the Post Office, the new Cost Cutter, the dentist and the shops round the corner from the Applicants premises. She further asserted that the local community would travel to the area to undertake a weekly shop, parking outside the Centre and surrounding streets.

In response to a question around reasonable travelling distance to community pharmacy services, Mrs Jamil advised that it would depend on a person's health how far they should be expected to travel to access services. 10-15 minutes may be reasonable for an able bodied person, but this would become unreasonable for an elderly or infirm person. Mrs Jamil confirmed to Mr Mooney that she was aware of Pollokshields Pharmacy's proximity to the proposed premises; however she asserted that the Pollokshields Pharmacy was situated on a hill, which was not easily accessed by the elderly.

In response to Mr Mooney's question around public transport in the area, Mrs Jamil confirmed that it was not good. There was a bus service – 121 which the elderly within the community considered to be unreliable. She was aware of another service in the area however did not know whether this passed existing contractors in the area.

In response to further questioning from Mr Mooney, Mrs Jamil advised that from her survey she had ascertained that inadequacies existed in the current service provision around communication issues, lack of interaction from staff and lack of awareness amongst the community as to what services were on offer from community pharmacies. She further confirmed that the methodology used for the survey had been provided to her by Dr Rafik Gardee, a Public Health Consultant.

The PPC Question the Applicant

In response to questioning from Mr Fergusson, Mrs Jamil advised that around 80 survey forms had been distributed. Of these 20 had gone to the Applicants family and friends, 30 forms were distributed through community facilities and the remainder had been distributed on the street. She accepted that the survey may have been deemed to be more valid if conducted by an independent party, and she would have addressed this had she been aware that it would be an issue.

In response to further questioning from Mr Fergusson, Mrs Jamil advised that the area of was one of high rental and that the new developments would bring some increased population into the area. She did not consider that the proposed premises would be totally reliant on the new population as there was already a significant community in the area which would be served by the new pharmacy.

In response to further questioning from Mr Fergusson, Mrs Jamil confirmed that information would be obtained from the local community

around which languages were required and the community's needs would be catered for. The pharmacy would provide multi-lingual staff on a full time basis. The pharmacist was fluent in Persian and Arabic.

In response to questioning from Mr Reid, Mrs Jamil confirmed that her defined neighbourhood was that defined by the previous council ward area. She further confirmed that the difference in population statistics related to the different sources used to obtain figures.

In response to further questioning from Mr Reid, Mrs Jamil confirmed that the pharmacist who would be in charge of the premises was fluent in Persian and Arabic, having spoken these languages since birth. She further confirmed that she was aware of the bus routes 89 and 90, however, she considered the bus stops served by these routes to be too far away from the proposed premises to be useful.

In response to questioning from Mrs Roberts, Mrs Jamil advised that many people travelled to the area to make use of the retail businesses in the area that catered for the Asian community. She pointed to the various halal butchers, Asian clothes and beauty shops and specialist food shops. She asserted that while integration was important, there should be recognition that not all residents would either wish to or have the time to learn the English language. There were a number of English language classes within the area and attendance at these was a matter of individual choice. She asserted however that services should be made available to those who did not have English as a first language.

In response to further questioning from Mrs Roberts, Mrs Jamil confirmed that she was aware of the national campaign to publicise and promote public health services within the pharmacy context. She thought that perhaps people did not pay attention to the messages, and also that they were provided only in the English language.

In response to final questioning from Mrs Roberts around the survey and the apparent lack of independence. Mrs Jamil accepted that this may have caused the survey to lack value and weight and she confirmed that the survey would have been organised differently if she had been aware of the significance.

In response to questioning from Professor McKie, Mrs Jamil asserted that residents in Maxwell Drive would not consider themselves neighbours of those living in Darnley Street. She advised that Pollokshaws East and Pollokshaws West were different areas, not homogenous, and with differing social aspects. She was convinced that the community could tell the difference between the two areas and wouldn't associate themselves with an area other than their own.

In response to final questioning from Professor McKie, Mrs Jamil

confirmed that there was no bus service travelling west of the proposed premises.

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

The Interested Parties' Case – Boots UK Ltd (Mr Andrew Mooney)

Mr Mooney thanked the Committee for the opportunity to have representation at the hearing.

He advised that in terms of neighbourhood definition Boots UK Ltd would support the neighbourhood definition provided by the Greater Glasgow & Clyde Area Pharmaceutical CP Subcommittee as detailed in their letter of 14th May 2008.

West – St Andrew's Drive – a move west of this would result in social demographic change.
East – Railway line.
South – Nithsdale Road.
North – Railway line.

Mr Mooney advised that Boots would maintain that adequate pharmaceutical service provision was already available within the neighbourhood from the existing contractors. Pollokshields and Rowlands were easily accessible serving a population which he would estimate to be significantly less than the 7281 estimated from South-East Glasgow Community Health and Wellbeing statistics. Furthermore as the number of interested parties indicated a number of contractors outwith this defined neighbourhood also supplied full and comprehensive services to the neighbourhood. This equated to more than ten contractors in a one mile radius. It was noteworthy that a public transport system was available in the locality and that locals regularly travelled to local retail centres to access other services.

Mr Mooney advised at the Boots Pharmacies on Victoria Road and Cathcart Road already provided a full and comprehensive range of pharmaceutical services to the local population which included the core services, along with a comprehensive range of locally negotiated services including: free collection and delivery service, The pharmacies operated from Mon – Fri – 9.00am – 5.30pm and Saturday 9.00am – 5.30pm, in line with the current model hours and local surgery hours.

Boots UK Ltd were also committed to securing future adequacy by continually reviewing and developing their service provision and infrastructure to meet the challenges of the new contract and improve care for patients when and if given feedback.

Mr Mooney concluded by drawing the Committee's attention to the

construction of the regulation which was interpreted in June 2004 by Judicial Review in the Court of Session.

In the opinion of the judges the decision maker having identified the neighbourhood must approach the decision in two stages.

- Consider if the existing services in the area are adequate. If it decides that such provision is adequate, that is the end of the matter and the application must fail.

The test of adequacy was a simple one, in that there was no room for a spectrum of adequacy – the existing services were either adequate or note. A deficiency in the two contractors in the neighbourhood services must exist before an application could be granted.

Consequently, the existence of such a deficiently must be identified before it is necessary to consider what may be done to provide a remedy.

- The second question of "necessity and desirability" relates to the manner in which an identified deficiency is remedied.

As decision makers the critical question therefore was the adequacy of the existing provision, not the adequacy or desirability of some other possible configuration of services in the neighbourhood. The new pharmacy may be more convenient for some residents however, does this make the current service provision inadequate and if so what is the deficiency.

The adequacy or otherwise of existing provision in the defined neighbourhood was the crux of the matter here and for the Committee to decide.

There were no questions to Mr Mooney from the Applicant or Mr Young.

The PPC Question Mr Mooney

In response to questioning from Mrs Roberts, Mr Mooney advised that Boots UK Ltd were fully committed to the Scottish Government's Public Health Service initiative. In addition the newly merged company had developed a management structure which had staff on the ground specifically to engage with local communities. This was at an early stage. They had also introduced a leaflet in all stores. Mr Mooney confirmed the leaflet was available solely in English.

In response to questioning from Professor McKie, Mr Mooney confirmed that St Andrews Drive was included in his defined neighbourhood.

There were no questions to Mr Mooney from Mr Fergusson, Mr Reid, the Chair, Mr Gillespie or Miss Ward.

The Interested Parties' Case – Rowlands Pharmacy (Mr David Young)

Mr Young thanked the Committee for providing the opportunity to present Rowlands Pharmacy's case. He advised that there had been no demonstration of inadequacy of pharmaceutical services. There was no deficiency. There were currently two pharmacies serving the neighbourhood in which the proposed premises were situated. There were ten pharmacies in a one mile radius and 19 pharmacies in the extended area. He felt these figures spoke for themselves. The application was not necessary or desirable.

He advised that he was not aware of any complaints received by the Health Board around the level of service in the area. He advised that if any had been apparent Rowlands, along with the other contractors in the area would undoubtedly have addressed any perceived issue.

He reiterated that Rowlands Pharmacy provided a translation service within their pharmacy free of charge to patients. Such services could be put in jeopardy if a new contract were granted in the area.

There were no questions to Mr Young from the Applicant, Mr Mooney or the Committee.

Summing Up

The Applicant and Interested Parties were then given the opportunity to sum up.

Mr Young advised that there were currently two pharmacies in the neighbourhood. There were ten in a one mile radius. There was no perceived inadequacy. If a further contract were granted this could put existing services in jeopardy.

Mr Mooney advised that as the Applicant had not provided any evidence of inadequacy in the current pharmaceutical service provision, a new contract was therefore not necessary or desirable to secure adequate provision of pharmaceutical services in the area and therefore the Committee should reject the application. Mr Mooney further advised that according to the health profile of the area, breast feeding and other statistics had improved. These were positive trends in which pharmacy played a significant part along with other stakeholders. The key to public health improvement was the involvement of a number of agencies, pharmacy being only one.

The Applicant advised that as could be seen from the evidence that had been produce the application was necessary and desirable in providing an enhanced pharmaceutical service coupled with greater access due to extended hours and location within the neighbourhood.

She advised that the Applicants wanted to develop a community orientated pharmacy health programme which involved a community orientated primary care approach. It was about collaboration and empowerment of the community in which one lived, met and worked, help to promote better health and well being, help to take responsibility through talking and trying to learn from one another.

The necessity of the contract could be summarised by studying the way the Applicants had proposed to supply all the needs of the locality and looking at the current deficiencies in the neighbourhood access to services including linguistic limitations.

The Applicant asked the Committee to wholeheartedly consider the application with care as their ultimate aim was to provide an enhanced service to the locality and help forge greater community well being by working with all other contracts currently in the neighbourhood and other health care providers.

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.

In addition to the oral submissions put forward before them, the PPC also 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 NHS Greater Glasgow & Clyde Area Pharmaceutical Community Pharmacy Subcommittee;

c) The Greater Glasgow & Clyde Area Medical Committee (CP Sub-

Committee).

The Committee also considered;-

d) The location of the nearest existing pharmaceutical services;

e) Demographic information regarding the area of G41.1 and G41.2; 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 Community Pharmacy Subcommittee in relation to the application and taking all information into consideration, the Committee considered that the neighbourhood should be defined as follows:

North: the railway line at Shields Road;
East: the railway line at Eglinton Street, along Pollokshaws Road to its meeting with Nithsdale Road;
South: Nithsdale Road, travelling along to its meeting with St Andrews Drive;
West: St Andrews Drive, north to meet the railway line at Shields Road.

The Committee felt that this was distinct neighbourhood. The railway lines were physical boundaries, with Eglinton Street being a major arterial road from the city centre. South of Nithsdale Road demonstrated a different social make-up and comprised different housing stock. The Committee considered people living in this area would consider themselves neighbours and from the same community.

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.

The Committee noted that within the neighbourhood as defined by the

PPC there were two pharmacies. These pharmacies provided the full range of pharmaceutical services including supervised methadone. The Committee further noted that there were at least ten additional pharmacies within the extended area that provided services. 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 further noted that they had taken into consideration the Applicants' assertion around communication issues amongst the non-English speaking population within the neighbourhood. The Committee were aware that a translation service was operated by the Health Board, which was accessible for community pharmacies to utilise. In addition, Rowlands Pharmacy provided an innovative service within their pharmacy in Nithsdale Road. The Committee felt that much of the Applicants' case had been developed around the lack of language within the area, and not a perceived inadequacy in the services already being provided to the neighbourhood.

The Committee was satisfied that no evidence had been produced by the Applicant, or had been made available to the Committee via another source which demonstrated that the services currently provided to the neighbourhood were inadequate.

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

In accordance with the statutory procedure the Chemist Contractor 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.

Contractor Services Supervisor

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

NHS Greater Glasgow and Clyde

6. APPLICATIONS STILL TO BE CONSIDERED

The Committee having previously been circulated with Paper 2008/32 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:

Boots UK Ltd – 10 Canal Street, Renfrew PA4 8QD
Assura Pharmacy ltd – 32 Brucehill Road, Dumbarton G82 4EN
Apple Pharmacy – 130 Westburn Road, Cambuslang G72 7SY
Apple Pharmacy, Castle Terrace, Bridge of Weir PA11 3EF
Lloydspharmacy Ltd, Unit 5 485/507 Glasgow Road, Clydebank G81 1JP
Advance Pharmacies Ltd – 26-28 Willowford Road, Darnley G53 7LP
Farzana Rasool & Aziz Rasool – 111 Cambridge Street, Glasgow G3 6RU
Apple Pharmacy – The Post Office, Greenock Road, Inchinnan PA4
Assura Pharmacy Ltd, Proposed Retail Development, Gleddoch Road, Glasgow G52 4BW
Apple Pharmacy, Level 1, The Hub Complex, University of Glasgow, Hillhead Street, Glasgow G12 8QE
Assura Pharmacy Ltd – Somerfield Supermarkets, 63 Cumbernauld Road, Glasgow G33 6NB

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

The Committee having previously been circulated with Paper 2008/33 noted the contents which gave details of matters considered by the Chair since the date of the last meeting:

Change of Ownership

Case No: PPC/COO05/2008 – Boots UK Ltd

Alliance Pharmacy, 26 Norby Road, Glasgow, G11 7BN

Alliance Pharmacy, 693 Great Western Road, Glasgow, G12 8RA

Alliance Pharmacy, 90 Fulton Street, Glasgow, G13 1DS

Alliance Pharmacy, 1630 Great Western Road, Glasgow, G13 1HH

Alliance Pharmacy, 47 Garscadden Road, Glasgow, G15 6UH

Alliance Pharmacy, 8 Rozelle Avenue, Drumchapel, Glasgow, G15 7QR

Alliance Pharmacy, 80 Queen Margaret Drive, Glasgow, G20 8NZ

Alliance Pharmacy, 1278 Argyle Street, Glasgow, G3 8AA

Alliance Pharmacy, 350b Duke Street, Glasgow, G31 1RB

Alliance Pharmacy, 90 Westmuir Street, Parkhead, Glasgow, G31 5BJ

Alliance Pharmacy, 137 Abbeyhill Street, Glasgow, G32 6LJ

Alliance Pharmacy, 1035-1041 Shettleston Road, Glasgow, G32 7PB

Alliance Pharmacy, 639 Cathcart Road, Glasgow, G42 8AE

Alliance Pharmacy, 426 Victoria Road, Glasgow, G42 8YU

Alliance Pharmacy, 61b Main Street, Thornliebank, Glasgow, G46 7RX

Alliance Pharmacy, 155 Crown Street, Glasgow, G5 9XT

Alliance Pharmacy, 50 Hillington Road South, Glasgow, G52 2AA

Alliance Pharmacy, 220 Dalmellington Road, Crookston, Glasgow, G53 5YF

Alliance Pharmacy, Unit 7, Baljaffray Shopping Centre, Glasgow, G61 4RN

Alliance Pharmacy, 92 Kirkintilloch Road, Lenzie, Glasgow, G66 4LQ

Alliance Pharmacy, 25 Main Street, Cambuslang, Glasgow, G72 7EX

Alliance Pharmacy, 233 Hamilton Road, Cambuslang, Glasgow, G72 7PH

Alliance Pharmacy, 12 The Toll, Clarkston, Glasgow, G76 7BG

Alliance Pharmacy, 182/4 Main Street, Barrhead, G78 1SL

Alliance Pharmacy, 48 North Elgin Street, Clydebank Glasgow, G81 4BZ

Alliance Pharmacy, 11/13 Mitchell Way, Alexandria, G83 0LW

Alliance Pharmacy, 28 Central Way, Paisley, PA1 1EH

Alliance Pharmacy, 5 Penilee Road, Ralston, Paisley, PA1 3ES

Alliance Pharmacy, 15 Livery Walk, Bridge of Weir, PA11 3NN

Alliance Pharmacy, 1-2 Stewart Place, Bridge of Weir Road, Kilmacolm, PA13 4AF

Alliance Pharmacy, 6 Neilston Road, Paisley, PA2 6LN

Alliance Pharmacy, Clippens Road, Linwood, PA3 3DG

Alliance Pharmacy, 66 Netherhill Road, Paisley, PA3 4RL

Alliance Pharmacy, 118/120 Paisley Road, Renfrew, PA4 8HE

Alliance Pharmacy, 7 Houston Court, Houston Square, Johnstone, PA5 8DT

Alliance Pharmacy, Houston Medical Centre, Kirk Road, Houston, PA6 7AR

The Board had received an application from Boots UK Ltd for inclusion in the Board's Pharmaceutical List at various pharmacies previously listed as E Moss Ltd, T/A Alliance Pharmacy at the addresses given above. The change of ownership was effective from 1st April 2008.

The Committee was advised that the level of service was not reduced by the new contractor and that the new contractor was suitably registered with the Royal Pharmaceutical Society of Great Britain.

Given the above, the Committee agreed that the application could be granted in terms of Regulation 4 of the current Pharmaceutical Regulations.

Case No: PPC/COO06/2008 – Lloydspharmacy Ltd

Munro Pharmacy, 764 Anniesland Road, Knightswood, Glasgow G14 0YU

Munro Pharmacy, Unit 2 Kwiksave Unit, Crown Street, Glasgow G5 9ZR

Munro Pharmacy, 549 Maryhill Road, Glasgow G20 7UJ

Munro Pharmacy, Unit 9, 1604 Paisley Road West, Glasgow G52 9ZR

Munro Pharmacy, 186/188 Abercromby Street, Glasgow G40 2RZ

Munro Pharmacy, 263 Alderman Road, Glasgow G13 3AY

Munro Pharmacy, 147 Great Western Road, Glasgow G4 9AW

Munro Pharmacy, 298 Dyke Road, Glasgow G13 4QU

Munro Pharmacy, 77 Lochend Road, Easterhouse, Glasgow G34 0JZ

The Board had received an application from Lloydspharmacy Ltd for inclusion in the Board's Pharmaceutical List at various pharmacies previously listed as Donald Munro Ltd, T/A Munro Pharmacy at the addresses given above. The change of ownership was effective from 1st May 2008.

The Committee was advised that the level of service was not reduced by the new contractor and that the new contractor was suitably registered with the Royal Pharmaceutical Society of Great Britain.

Given the above, the Committee agreed that the application could be granted in terms of Regulation 4 of the current Pharmaceutical Regulations.

NHS Greater Glasgow and Clyde

Case No: PPC/COO07/2008 – Buchanan & Campbell Ltd, 364a Dumbarton Road, Glasgow G11 6RZ

The Board had received an application from Mr Habib Khan for inclusion in the Board's Pharmaceutical List at a pharmacy previously listed as Buchanan & Campbell Ltd at the address given above. The change of ownership was effective from 1st May 2008.

The Committee was advised that the level of service was not reduced by the new contractor and that the new contractor was suitably registered with the Royal Pharmaceutical Society of Great Britain.

Given the above, the Committee agreed that the application could be granted in terms of Regulation 4 of the current Pharmaceutical Regulations.

Case No: PPC/COO08/2008 – MacLean Chemist, 310 Dumbarton Road, Old Kilpatrick, Glasgow G60 5LW

The Board had received an application from Sinclair Shops Ltd for inclusion in the Board's Pharmaceutical List at a pharmacy previously listed as MacLean Chemists at the address given above. The change of ownership was effective from 30th June 2008.

The Committee was advised that the level of service was not reduced by the new contractor and that the new contractor was suitably registered with the Royal Pharmaceutical Society of Great Britain.

Given the above, the Committee agreed that the application could be granted in terms of Regulation 4 of the current Pharmaceutical Regulations.

Case No: PPC/COO09/2008 – MacLean Chemist, 1943 Dumbarton Road, Glasgow G14 0YT

The Board had received an application from Sinclair Shops Ltd for inclusion in the Board's Pharmaceutical List at a pharmacy previously listed as MacLean Chemists at the address given above. The change of ownership was effective from 30th June 2008.

The Committee was advised that the level of service was not reduced by the new contractor and that the new contractor was suitably registered with the Royal Pharmaceutical Society of Great Britain.

Given the above, the Committee agreed that the application could be granted in terms of Regulation 4 of the current Pharmaceutical Regulations.

HOMOLOGATED/-

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

The Committee having previously been circulated with Paper 2008/34 noted the contents which gave details of matters considered by the Chair since the date of the last meeting:

Case No: PPC/MRELOC03/2008 – Kennyhill Pharmacy, 408/410 Cumbernauld Road, Glasgow G31 3NN

The Committee considered the action taken by the Chairman on an application for a minor relocation of a NHS Dispensing contract currently held by M&D Green Dispensing Chemist Ltd, at the above address.

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

The Committee noted that the Chairman had granted the application, having been satisfied that the application fulfilled the requirements laid down in the Pharmaceutical Regulations.

Case No: PPC/MRELOC04/2008 – David Wyse, 7 King Street, Port Glasgow

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

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

The Committee noted that the Chairman had granted the application, having been satisfied that the application fulfilled the requirements laid down in the Pharmaceutical Regulations.

Case No: PPC/MRELOC05/2008 – David Wyse, 12 John Wood Street, Port Glasgow

The Committee considered the action taken by the Chairman on an application for a minor relocation of a NHS Dispensing contract currently held by David Wyse, at the above address.

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

The Committee noted that the Chairman had granted the application, having been satisfied that the application fulfilled the requirements laid down in the Pharmaceutical Regulations.

Case No: PPC/MRELOC06/2008 – Alliance Pharmacy, 10 Canal Street, Renfrew PA4 8QD

The Committee considered the action taken by the Chairman on an application for a minor relocation of a NHS Dispensing contract currently held by Alliance Pharmacy, at the above address.

The Committee noted that the application did not fulfil the criteria for a minor relocation under Regulation 5 (4) of the National Health Service (Pharmaceutical Services) (Scotland) Regulations 1995 as amended.

The Committee noted that the Chairman had refused the application, having been satisfied that the application did not fulfil the requirements laid down in the Pharmaceutical Regulations.

HOMOLOGATED/-

8. RETROSPECTIVE NOTIFICATION OF RELOCATION

The Committee having been previously circulated with paper 2008/35 noted the relocation of Buchanan Orthotics Ltd to 603 Helen Street, Glasgow G51 3AR.

NOTED/-

9. NATIONAL APPEALS PANEL DETERMINATION

The Committee having previously been circulated with paper 2008/36 noted the contents which gave details of the National Appeals Panel's determination of appeals lodged against the Committee's decision in the following case:

Mr Razwan Shafi – 25 Main Street, Howwood, Renfrewshire PA9 1AR (PPC/INCL27/2007)

The Committee noted that the National Appeals Panel had refused the Appeal submitted against the PPC's decision to grant Mr Shafi's application to establish a pharmacy at the above address. As such Mr Shafi's name was not included in the Board's Provisional Pharmaceutical List, and the file on the application had been closed.

NOTED/-

9. ADVICE FROM CENTRAL LEGAL OFFICE

The Committee discussed the advice provided by the Central Legal Office around who can speak before a PPC. After comprehensive discussion, the Committee agreed that the Board's processes should be amended to reflect the advice provided by the Central Legal Office.

AGREED/-

10. ANY OTHER COMPETENT BUSINESS

None.

11. DATE OF NEXT MEETING

The next scheduled meeting would take place on Wednesday 6th August 2008.

The Meeting ended at 4.30p.m.