

**NOT YET ENDORSED AS A CORRECT RECORD**

**Pharmacy Practices Committee (21)**

Minutes of a Meeting held on  
Thursday, 13<sup>th</sup> December 2007

C.O.P.E, 20 Drumchapel Road, Glasgow G15 6QE

<b>PRESENT:</b>	Mrs Agnes Stewart	Vice Chair
	Professor J McKie	Lay Member
	Mr W Reid	Deputy Lay Member
	Dr James Johnson	Non Contractor Pharmacist Member
	Alasdair MacIntyre	Contractor Pharmacist Member
	Colin Fergusson	Deputy Contractor Pharmacist Member
<b>IN ATTENDANCE:</b>	Trish Cawley	Contractor Services Supervisor
	David Thomson	Deputy Lead – Community Pharmacy Development
	Janine Glen	Contracts Manager – Community Pharmacy Development

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

No declarations of interest were made.

**1. APOLOGIES**

Apologies were received on behalf of Mrs Charlotte McDonald.

**2. MINUTES**

The Minutes of the meetings held on Wednesday 7<sup>th</sup> November 2007 **PPC[M]2007/18** and Wednesday 21<sup>st</sup> November 2007 **PPC[M]2007/19** were approved as a correct record.

**3. MATTERS ARISING NOT INCLUDED IN AGENDA**

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

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

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

**ACTION**

**Case No: PPC/INCL22/2007**  
**New Age Healthcare Ltd, 37 Glenkirk Drive, Drumchapel, Glasgow**  
**G15 6BS**

The Committee was asked to consider an application submitted by New Age Healthcare Ltd to provide general pharmaceutical services from premises situated at 37 Glenkirk Drive, Glasgow G15 6BS under Regulation 5(10) of the National Health Service (Pharmaceutical Services) (Scotland) Regulations 1995 as amended.

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

The Committee, having previously been circulated with all the papers regarding the application from New Age Healthcare Ltd, agreed that the application should be considered by oral hearing.

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

The Applicant was represented in person by Mr Tejinder Bhopal ("the Applicant"), assisted by Dr Ashwani Bhopal. The interested parties who had submitted written representations during the consultation period, and who had chosen to attend the oral hearing were Mr David Sinclair, (Sinclair Pharmacy) assisted by Mr Bruce Sinclair, Mr Nisith Nathwani (Lloydspharmacy) and Ms Dianne McGroary (Munro Chemists) ("the Interested Parties").

Prior to the hearing, the Panel had collectively visited the vicinity surrounding the Applicant's premises, pharmacies, GP surgeries and facilities in the immediate neighbourhood, and the wider area around Drumchapel, Old Drumchapel and Spey Road.

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 then gave their presentations, with the opportunity for the Applicant and PPC to ask questions. The Interested Parties and the

Applicant were then given the opportunity to sum up.

### **The Applicant's Case**

**Mr Bhopal** commenced his presentation by thanking the Committee for giving him the opportunity to present his case. He advised that given the projected wider role for pharmacies in general health care advice and education, he firmly believed that an additional pharmaceutical service at his proposed premises was not only desirable but would be crucial for the Stonedyke neighbourhood which was recognised as having severe and chronic health issues.

The Applicant asserted that Stonedyke was a neighbourhood in its own right. It had its own Primary School; Stonedyke Primary School and its own community centre, Stonedyke Neighbourhood Centre, located at 9 Belsyde Avenue. The Stonedyke neighbourhood was situated on a small hill and the boundaries of the neighbourhood were defined as:

North: Garscadden Burn Park, which was a broad, shallow valley. The park had very steep slopes which were unsuitable for the elderly, young children and mothers with prams.

South: The railway line and the boundary between two council wards – Ward 2 (Summerhill) and Ward 1 (Drumry).

East: The boundary between Glasgow City Council and East Dunbartonshire Council which was also the boundary between Drumchapel and Bearsden. This was also the east boundary of ward 2 and the postcode boundary between G15 and G61.

West: The existence of no interconnecting roads between the west side of the neighbourhood and Drumchapel Road.

The Applicant advised that the Stonedyke Neighbourhood Centre used similar boundaries for their mailing list.

The Applicant advised that the north boundary to the neighbourhood and the west boundary were physical barriers which formed an enclosure which was very restrictive for residents who lived in the north west of the neighbourhood, particularly those in Belsyde Avenue. As such the only pharmacy which was less than one mile from the residents at 18 Belsyde Avenue was Sinclair Pharmacy, 145 Spey Road, which was a distance of 0.7 miles from the residents. The Applicant asserted however that this pharmacy was in a different neighbourhood. It was in Bearsden and not Drumchapel. It was in East Dunbartonshire Council and not Glasgow City Council; It was in Ward 7 (Chapelton) and not Ward 2 (Summerhill). It was in postcode area G61 and not G15.

The Applicant advised that this pharmacy was 0.4 miles from the proposed premises at 37 Glenkirk Drive, but was outwith the boundaries of Stonedyke neighbourhood and was 0.7 miles from some residents in Belsyde Avenue, which in his opinion was too far, particularly for the

elderly and mothers with young children. He had been advised by the Stonedyke Residents Association that the residents in his neighbourhood were in total 2740.

The Applicant advised that 23.5% of the population of Drumchapel South-East (G5.6) were elderly (over 65 years old) and 19.3% were children under 15 years old. The population without a car, and therefore reliant on public transport was 54.7%. The Applicant estimated that it could potentially take more than 30 minutes for the elderly and mothers with a toddler and pram to walk from Belsyde Avenue to 145 Spey Road which meant that on foot it could take around 1 hour 20 minutes round trip to collect a prescription. The Applicant believed this to be unnecessarily long and inconvenient for the elderly and mothers with children to access local pharmaceutical services.

The Applicant then went on to provide reasons why he considered that a new pharmacy was not only desirable, but was necessary to fulfil the requirements of the new community pharmacy contract.

He advised that pharmacies were ideally placed for raising people's awareness of health issues. The introduction of the public health service as a core service meant that pharmacies were now formally recognised as public health information centres in the community. Pharmacies had the option to take part in up to four national public health campaigns each year, each lasting six weeks. In addition to the core public health service of displaying appropriate health information leaflets, pharmacy staff and the pharmacist could also offer advice to reinforce the campaign's message. The row of shops at Glenkirk Drive were at the heart of the Stonedyke area and the majority of the Stonedyke residents would visit these shops and only these shops on a regular basis for their everyday needs. It therefore followed that a pharmacy positioned in these row of shops was crucial to meet this requirement of the new contract.

The Applicant advised that if granted, his pharmacy would focus on issues which were relevant to the local population e.g. teenage pregnancy, alcohol and smoking cessation. By simply comparing the health and well being profile of Drumchapel South-East and Westerton (the area in which Sinclair Pharmacy was situated), it was clear that the health issues were markedly different. It was therefore important to have a pharmacy in this area which would focus on health promotion issues which were relevant to the residents of the Stonedyke area.

It was estimated that over 44.9% of the population of Drumchapel South-East smoked and smoking attributable deaths were 62% above the Scottish average. 40% of pregnant women were also smoking in Drumchapel South-East. Teenage pregnancy was 33% above the Scottish average.

The Applicant advised that given the new wider remit for pharmacies under the new pharmacy contract in addition to the provision of the four core services he intended to offer additional services focused on the needs of the area such as: blood pressure and diabetes testing, needle exchange, oxygen supply, supervised methadone, assessment of the supply of compliance aids, medication review and head lice treatment.

The Applicant concluded that he believed a new contract at this location was necessary and desirable and would provide the population with the pharmaceutical services required.

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

In response to questioning from Mr Sinclair, the Applicant advised that he was unaware of the location of the Stonedyke Post Office. The Applicant asserted that Sinclair Pharmacy served a different neighbourhood to Stonedyke. The area surrounding Sinclair Pharmacy comprised different a type of housing, was more affluent and had a different well-being profile to Stonedyke.

In response to further questioning from Mr Sinclair, the Applicant asserted that he didn't feel that Sinclair Pharmacy served the neighbourhood of Stonedyke; it more likely served Bearsden. The Applicant confirmed his agreement that it was unusual for a pharmacy to be situated adjacent to two neighbourhoods which were radically different.

In response to further questioning from Mr Sinclair, the Applicant agreed that the residents of Stonedyke who currently wished to access emergency hormonal contraception would access this service at Sinclair Pharmacy. He commented that he had used this service merely as an illustration, but would of course focus on others. He explained that in his opinion, there was unmet need for the residents in Stonedyke around the provisions of the new contract which was about ease of access and took the focus away from the supply function.

In response to questioning from Mr Nathwani, the Applicant advised that he would probably not use a council boundary split as a barrier if there were two pharmacies only 100 yards apart. He further advised that he was aware the additional contracts such as Emergency Hormonal Contraception (EHC) were allocated by the Health Board and it wasn't certain that additional participants would be added to the service. He would of course like to provide this service to address the needs in the area.

In response to questioning from Ms McGroary, the Applicant advised that he felt the population size required to secure the viability of a pharmacy was dependent on the area in which the premises were situated. He had had previous experience of opening a pharmacy in the Pollok area and

had learned that the point of viability was dependent on the neighbourhood and the health and well being profile. He further confirmed that he did not feel that an additional contract in the area would have a significant impact on the current contractors.

In response to further questioning from Ms McGroary, the Applicant confirmed that 55% of the population did not have access to a car, and therefore would rely on public transport or walking to move around the neighbourhood. He further confirmed that his information around the chronic illness within the area had been provided by the local Councillor.

In response to final questioning from Ms McGroary, the Applicant advised that he had used the statistics for G15.6 (South-East Drumchapel) as this was the most densely populated area within Drumchapel and statistics weren't available solely for the Stonedyke area.

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

In response to questioning from Mr Fergusson, the Applicant considered the bus service in the Stonedyke area to be poor. Buses ran only every 30 minutes. In addition, the nearest bus stop was 0.35 miles away from Glenkirk Avenue and Clone Avenue. There was no direct service from the area to the centre of Drumchapel.

In response to questioning from Mr MacIntyre, the Applicant confirmed that residents in Stonedyke would access the parade of shops in the area for their every day needs. In terms of accessing a larger supermarket the nearest would be at Kinfauns Drive.

In response to questioning from Mr Reid, the Applicant advised that he was not aware of whether the other contractors in the area provided any of the additional services he intended to provide.

In response to further questioning from Mr Reid, the Applicant confirmed that a petition had been undertaken outside the shops in the parade. Signatures had been collected by the Applicant's brother. He estimated that there were approximately 2,700 people living within the confines of his defined neighbourhood.

In response to questioning from Dr Johnson, the Applicant advised that he had provided graphical data in support of his application, despite the data appearing to show an improvement in the health and social profile of Drumchapel, to compare with the nearest pharmacy (Sinclair Pharmacy).

In response to questioning from Professor McKie, the Applicant confirmed his awareness that the G15 post-code area extended well beyond Stonedyke. He was aware that it covered the population within

his defined neighbourhood and other parts of Drumchapel but was not aware how much further it extended. He was not aware that his neighbourhood constituted only 1/7 or 1/8 of the population within the G15 area, but was aware that there were different social circumstances within the area. He advised that this was why he had narrowed down his statistics to those covering G15.6 (South-East Drumchapel). He further confirmed that he felt his defined neighbourhood to be amongst the most deprived in Drumchapel.

In response to further questioning from Professor McKie, the Applicant confirmed he had not included information on bus services convenient only for his neighbourhood. He had obtained the information from the residents in the area, and was not aware that the No9 bus operated every 11 minutes.

In response to further questioning from Professor McKie, the Applicant confirmed that he was not familiar with the outcomes of previous applications made for premises in the same area. He was not aware that the PPC had on previous occasions considered the area of Westerton (where Sinclair Pharmacy was situated) to be socially equivalent to Drumchapel.

In response to final questioning from Professor McKie, the Applicant confirmed that he had estimated the population of Belsyde Avenue. He considered there to be around 180 houses with an average occupancy rate of 2.4.

In response to questioning from Mr Thomson, the Applicant confirmed that the petition had attracted around 180 signatures this being 70% of those asked to sign. The question that was posed was "Would you wish a pharmacy in the Stonedyke area?". The survey had been conducted from outside the proposed location. There was nothing else added.

There were no questions to the Applicant from the Chair.

#### **The Interested Parties' Case – Ms Dianne McGroary (Munro Chemists)**

**Ms McGroary** advised the Committee that she considered the Applicant's boundaries to define not a neighbourhood, but a pocket of a neighbourhood. She suggested that the boundaries defined by the General Practitioner Sub-committee were more appropriate, but would show the Munro Chemists' branches outwith this neighbourhood. Ms McGroary advised that Munro did provide a service to the neighbourhood from both their branches in Dyke Road and Alderman Road. There were also three pharmacies within a one mile radius closer to the Applicant's proposed premises. Although the Applicant had undertaken extensive research into his defined area, the area was not vast and accordingly the statistics were insular. The Applicant was not

intending to provide services which were not already being provided by the existing pharmacy network. Munro Chemists provided a collection and delivery service from their branches in Alderman Road and Dyke Road. Alderman Road was open 365 days per year and over extended opening hours. She considered that the economic viability of the current contractors would be diluted if the Applicant was granted a contract.

### **The Applicant Questions Ms McGroary**

In response to questioning from the Applicant, Ms McGroary advised that Munro Chemists provided services to different neighbourhoods in the area. She confirmed that Munro's provided a collection and delivery service to the Applicant's neighbourhood, but did not agree that this service required to be provided by a pharmacist. She advised that Munro's did a lot of out-of-hours prescriptions generated by the facility in Drumchapel.

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

### **The PPC Question Ms McGroary**

In response to questioning from Mr Thomson, Ms McGroary advised that both the Munro branches at Alderman Road and Dyke Road dispensed prescriptions for residents in the area surrounding the Applicant's proposed premises. She quantified this as around 340 per week from Dyke Road and 400 per week from Alderman Road. Of this number, approximately 100 were generated from the out of hours facility at Drumchapel. She considered that these would be lost if a contract was granted for Glenkirk Drive.

In response to questioning from Dr Johnson, Ms McGroary did not agree that Dyke Road was a significant distance from Drumchapel. She advised that people were not restricted to staying only in one area. The majority of residents travelled outwith their own neighbourhood to access various services. She further confirmed that there was car parking outside both Munro branches.

In response to questioning from Mr Reid, Ms McGroary confirmed the number of prescriptions dispensed at Munro chemists from Drumchapel out of hour's service. She did not agree that the Munro branches would not be affected if the contract were granted.

In response to questioning from Mr MacIntyre, Ms McGroary confirmed that the Munro Chemists provided all additional services listed by the Applicant in his initial submission, with the exception of needle exchange.

There were no questions to Ms McGroary from Professor McKie, Mr



Fergusson or the Chair.

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

**Mr Nathwani** thanked the Committee for giving him the opportunity to present Lloydspharmacy's case. He advised that Lloydspharmacy would define the neighbourhood to be served by the Applicant's proposed premises as:

North: Kinfauns Drive/Station Road;  
East: Railway line;  
South – Railway line;  
West – Great Western Road.

He advised that within this neighbourhood there were five pharmacies.

Mr Nathwani suggested that the Applicant's neighbourhood had no natural boundaries to the East or West, merely definitions provided by Stonedyke Residents Association and a Councillor who were unaware of the definition attributed to a neighbourhood by the current pharmacy regulations. The boundaries did not correlate with local/parish boundaries. They were defined by social and geographic factors.

He advised that the Applicant repeatedly named Stonedyke as a neighbourhood. Two staff members of Lloydspharmacy lived within the boundaries of the Applicant's neighbourhood, and neither said they would consider that they lived in Stonedyke, but in Drumchapel. In the area the Applicant described as Stonedyke, there was no Post Office, or banking facilities. The small corner shop was adequate for essential items, but not large enough to carry out a weekly family shop. Along with the corner shop, there was a hairdresser, two charity shops and an undertakers; hardly what could be called a bustling community. Most, if not all, residents from Stonedyke carried out most of their shopping at Drumchapel shopping centre, or in Clydebank. Mr Nathwani advised that he had canvassed the opinion of local residents as to where they considered their nearest pharmacy to be and had been told that it was a few minutes down the road. When asked if it was accessible on foot, he was told yes.

Mr Nathwani advised that the Applicant repeatedly mentioned Belsyde Avenue in his application. There was a footpath from Belsyde Avenue which led through the park, behind the large GP surgery, which was opposite Lloydspharmacy's branch on Kinfauns Drive; a ten minute walk away.

Mr Nathwani asserted that the Applicant had not included any evidence of inadequacy of current service provision. The Applicant mentioned health promotion, eMAS and CMS, all of which were currently provided

by the existing pharmacies. He mentioned providing EHC, a service which was allocated out by the health board and as Sinclair pharmacy already provided this service locally, another pharmacy was unlikely to be awarded that service. Blood pressure testing was already carried out by Lloydspharmacy at their Dunkenny Square and Kinfauns Drive premises. Supervised methadone was also carried out by these branches. Needle exchange would be provided by Lloydspharmacy at Dunkenny Square in the New Year and currently at Sinclair Pharmacy, so a further participant was highly unlikely to be recruited. Domiciliary oxygen was provided by Sinclair Pharmacy and Lloydspharmacy at Dunkenny Square, so again there was no need for extra provision. Head lice services were provided by all, along with provision of compliance aids. Both Sinclair Pharmacy and Lloydspharmacy's branch at Kinfauns Drive offered supervision of disulfiram. Sinclair Pharmacy also operated an extended hours service from 9.00am – 9.00pm; Monday – Friday, which the Applicant proposed not to offer.

In addition to the five pharmacies currently within the neighbourhood there were a further ten within a mile radius; all offering adequate service provision. Mr Nathwani suggested there was no inadequacy.

Lloydspharmacy premises at Dunkenny Square had recently relocated on 3<sup>rd</sup> December into a new purpose built pharmacy, which had a separate CDS area; care room and methadone hand over area. The branch had capacity for more methadone and CDS patients, and waiting times were very low. Lloydspharmacy had also just constructed a CDS room in their Kinfauns Drive branch, with space for over 100 CDS patients. The pharmacy also had two treatment rooms, and two permanent pharmacists.

Going through the Applicant's notes Mr Nathwani noticed the petition submitted and questioned why this had not been included in the Applicant's original submission. He asserted that this did not provide evidence of inadequacy. He suggested that with the question posed in the manner it was, it would receive everyone's support. He had questioned whether the petition was independent and during the Applicant's presentation had learned that it wasn't and submitted that the petition carry no weight to the application. Mr Nathwani also invited the Committee to disregard the statements made by the local Councillor suggesting that politicians would always support such applications.

Mr Nathwani advised that the Applicant stated that it was worth noting that none of the objectors had defined a specific Stonedyke neighbourhood. In Mr Nathwani's opinion this was because there was no such neighbourhood. In conclusion, he advised that the Applicant had shown no evidence of inadequacy of existing service provision. The Applicant's definition of neighbourhood was vague at best, at worst it had been defined to suite his argument. The Applicant's

pharmacy would offer nothing new, nothing that was not already being provided within the neighbourhood and Drumchapel. Overall the granting of the application was neither necessary nor desirable.

### **The Applicant Questions Mr Nathwani**

In response to a question from the Applicant, Mr Nathwani advised that the neighbourhood as defined was not commonly known as Stonedyke.

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

### **The PPC Question Mr Nathwani**

In response to a question from Mr MacIntyre, Mr Nathwani advised that at least one of Lloydspharmacy's branches in Drumchapel offered all the additional services described by the Applicant in his submission.

In response to questioning from Dr Johnson, Mr Nathwani confirmed that the Lloydspharmacy branch in Dunkenny Square currently had vacant spaces for supervised methadone.

In response to questioning from Professor McKie, Mr Nathwani reiterated his criticism of the Applicant's usage of geographic elements to define the boundaries of his neighbourhood. He further confirmed that a journey from Belsyde Avenue to Kinfauns Drive involved a 10-15 minute walk.

In response to questioning from Mr Thomson, Mr Nathwani confirmed that a collection and delivery service was available to the whole of the Drumchapel area

There were no questions to Mr Nathwani from Mr Fergusson or the Chair.

### **The Interested Parties' Case – Mr David Sinclair (Sinclair Pharmacy)**

**Mr Sinclair** advised the Committee that he agreed with the definition of neighbourhood submitted by the General Practitioner Sub-committee. Within this neighbourhood there were approximately 2,000 occupied households who had access to adequate services. Within one mile of the proposed premises there were at least three pharmacies. Public transport in the area was good with direct public transport access to the pharmacy in Rozelle Avenue.

He would not argue with the Applicant's assertion that Sinclair Pharmacy was separated from the proposed premises by a political boundary but would assert that there was no geographical reason.

Residents from the area surrounding the proposed premises could access Sinclair Pharmacy on foot. The road was level and there were ample passing places along the 0.7 mile distance. He conceded that there was one area of steep hill, but asserted that this could be avoided. He asserted that the Applicant had made great play on defining Stonedyke as a separate neighbourhood; however he would ask the Committee to consider whether it was a neighbourhood for all purposes. The Stonedyke Post Office was located beside Sinclair Pharmacy in Spey Road.

Mr Sinclair advised that he provided a visiting, collection and delivery service from his Spey Road pharmacy. Mr Sinclair invited the Committee to discount the petition submitted by the Applicant and the comments made by the local councillor. He advised that the application did not reach the stage of considering whether it was necessary or desirable as the services in the area were already adequate. The application should be rejected.

There were no questions to Mr Sinclair from the Applicant.

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

### **The PPC Question Mr Sinclair**

In response to questioning from Mr MacIntyre, Mr Sinclair confirmed that Sinclair Pharmacy provided most of the additional services illustrated by the Applicant, except blood pressure checking and diabetes screening.

In response to questioning from Mr Reid, Mr Sinclair confirmed that he gave little weight to the comments made by the local councillor as politicians always tended to support such applications. He was concerned over the comments made by Stonedyke Neighbourhood Centre as he did not consider they truly reflected the situation within the area.

In response to questioning from Dr Johnson, Mr Sinclair advised that there was a significant uptake of services around nicotine replacement. Sinclair Pharmacy provided this service to people coming from Drumchapel and from Bearsden. He did not disagree that smoking was a problem in the Drumchapel area, however he disagreed that there was unmet need in the area for services addressing this problem.

In response to questioning from Professor McKie, Mr Sinclair estimated that over 50% of his patients came from the Drumchapel area. He was unable to quantify how many came specifically from the Applicant's defined neighbourhood, but considered it to be a significant proportion.

In response to questioning from Mr Thomson, Mr Sinclair advised that there were 10 pharmacies in the Sinclair Pharmacy group. A collection and delivery driver was employed to service the pharmacies in Glasgow and Lanarkshire and there was a dedicated driver for the Spey Road branch.

There were no questions to Mr Sinclair from Mr Fergusson or the Chair.

### **The Interested Parties Sum Up**

**Mr Sinclair** reminded the Committee of the training given by the NAP which stated that just because there was no pharmacy in an area did not mean the services to that area were inadequate. He advised that the application should be rejected.

**Mr Nathwani** advised that the Applicant hadn't provided any evidence of inadequacy. The application was not necessary or desirable.

**Ms McGroary** advised that there was no need or desirability for a new pharmacy contract in the area. There had been no complaints. The application should be rejected.

### **The Applicant Sums Up**

**Mr Bhopal** advised that there was no pharmacy in the area defined. This meant that not all residents in Drumchapel had access to adequate services. The application should be granted.

Before the Applicant and the Interested Parties left the hearing, the Chair sought confirmation that they had had a full and fair hearing. All confirmed that they had.

The PPC was required and did take into account all relevant factors concerning the issue of:-

- a) Neighbourhood;
- b) Adequacy of existing pharmaceutical services in the neighbourhood and, in particular, whether the provision of pharmaceutical services at the premises named in the application was necessary or desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises were located.

The PPC took into 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 (General Practitioner Sub-Committee);
- c) The Greater Glasgow & Clyde Area Medical Committee (GP Sub-Committee).

The Committee also considered;-

- d) The location of the nearest existing pharmaceutical services;
- e) Demographic information regarding post-code sectors G15.6, G15.7 and G61.1; 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 firstly on 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: Garscadden Burn Park to Kinfauns Drive;  
East: Kinfauns Drive, crossing Drumchapel Road to railway line;  
South: the Railway line to city boundary;  
West: north of Drumchapel Road round boundary of hospital grounds.

The Committee felt that this was distinct neighbourhood. The north boundary was a physical boundary, beyond the east boundary lay an area with a different demographic.

### **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

pharmacies. There were however five pharmacies within the wider area of Drumchapel. The Committee agreed that residents within the neighbourhood would require to travel outwith the area to access other services including shopping, banking, schools, GPs etc. The existing pharmacies provided the full range of pharmaceutical services including supervised methadone, extended hours and domiciliary oxygen. The Committee considered that the level of existing services ensured that satisfactory access to pharmaceutical services was available to the neighbourhood albeit outwith their immediate area. The Committee therefore considered that the existing pharmaceutical services in the neighbourhood were adequate.

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 currently adequately served.

**In accordance with the statutory procedure the Chemist Contractor Members of the Committee Alasdair MacIntyre and 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 Members of the Committee Alasdair MacIntyre and Colin Fergusson and Board Officers rejoined the meeting at this stage.**

**5. APPLICATIONS STILL TO BE CONSIDERED**

The Committee having previously been circulated with Paper 2007/60 noted the contents which gave details of applications received by the Board and which had still to be considered. The Committee agreed the following application/s should be considered by means of the written representations:

**Woodneuk Healthcare Ltd – 196 Cross Arthurlie Street, Barrhead, Glasgow G78 1EP**

**6. CHANGE OF OWNERSHIP**

**Contractor  
Services  
Supervisor**

The Committee having previously been circulated with Paper 2007/61 noted the contents which gave details of Changes of Ownership which had taken place in the following cases:

**Case No: PPC/CO18/2007 – National Co-operative Pharmacy, 9 Crofffoot Road, Glasgow G44 5JR**

The Board had received an application from National Co-operative Pharmacy for inclusion in the Board's Pharmaceutical List at a pharmacy previously listed as Nigel Kelly Pharmacy at the address given above. The change of ownership was effective from 3<sup>rd</sup> December 2007.

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.

**DECIDED/-**

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

**7. NATIONAL APPEALS PANEL DETERMINATION**

The Committee having previously been circulated with paper 2007/62 noted the contents which gave details of the National Appeals Panel's determination of appeals lodged against the Committee's decision in the following cases:

**Apple Pharmacy – 2 Old Gartloch Road, Gartcosh, Glasgow G69.8(Case No: PPC/INCL11/2007)**

The Committee noted that the National Appeals Panel had dismissed the Appeal submitted against the PPC's decision to grant Apple Pharmacy's application to establish a pharmacy at the above address. As such Apple Pharmacy name was included in the Board's Provisional Pharmaceutical List.

**Ms Elizabeth Blair & Ms Angela Mackie – 3 Bud hill Avenue, Glasgow G32.0 (Case No: PPC/INCL/2007)**

The Committee noted that the National Appeals Panel had upheld the Appeals submitted against the PPC's decision to grant Ms Blair and Ms Mackie's application to establish a pharmacy at the above address. As such their names were not included in the Board's Provisional Pharmaceutical List, and the file is now closed.



**NOTED/-**

**8. ANY OTHER COMPETENT BUSINESS**

**Application to Suspend Contract**

**Eaglesham Pharmacy – 14 Glasgow Road, Eaglesham, Glasgow  
G76 0JQ**

The Committee considered an application from Harvest Healthcare to close the pharmacy at 14 Glasgow Road on 12<sup>th</sup> January 2008 to undertake a refit which would bring the premises in line with the new pharmacy contract.

**DECIDED/-**

After comprehensive discussion, the Committee agreed to grant the contractor's application.

**9. DATE OF NEXT MEETING**

Scheduled for Friday 14<sup>th</sup> December 2007 at 12.30pm. Venue to be confirmed.

The Meeting ended at 4.30p.m.

**NOT YET ENDORSED AS A CORRECT RECORD**

**Pharmacy Practices Committee (22)**  
Minutes of a Meeting held on  
Friday 14th December 2007  
Glynhill Hotel, Junction 27 M8, Paisley Road,  
Renfrew PA4 8XB

<b>PRESENT:</b>	Andrew Robertson	Chair
	Professor J McKie	Lay Member
	Peter Daniels	Deputy Lay Member
	Mrs Kay Roberts	Deputy Non Contractor Pharmacist Member
	Gordon Dykes	Contractor Pharmacist Member
	Kenny Irvine	Deputy Contractor Pharmacist Member
<b>IN ATTENDANCE:</b>	Trish Cawley	Contractor Services Supervisor
	Richard Duke	Contracts Manager – Community Pharmacy Development
	David Thomson	Deputy Lead – Community Pharmacy Development
	Janine Glen	Contracts Manager – Community Pharmacy Development
	Elaine Ward	Community Pharmacy Development Pharmacist

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

No declarations of interest were made.

**1. APOLOGIES**

There were no apologies.

**2. MATTERS ARISING NOT INCLUDED IN AGENDA**

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

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

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

**ACTION**

**Case No: PPC/INCL23/2007****Arvinder Bilon & James Innes – 14 Barscube Terrace, Paisley PA2 6XA**

The Committee was asked to consider an application submitted by Mr Bilon & Mr Innes to provide general pharmaceutical services from premises situated at 14 Barscube Terrace, Paisley PA2 6XA 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 Messrs Bilon & Innes, 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 Arvinder Bilon ("the Applicant"), assisted by Mr James Innes. The interested parties who had submitted written representations during the consultation period, and who had chosen to attend the oral hearing were Mr Asgher Mohammed, (Abbey Chemist) assisted by Ms Claire Bennie and Mr Brian Deveney (Barshaw Pharmacy) ("the Interested Parties").

Prior to the hearing, the Panel had collectively visited the vicinity surrounding the Applicant's premises, pharmacies, GP surgeries and facilities in the immediate neighbourhood, and the wider area around Lonend, Neilston Road and Glenburn.

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 then gave their presentations, with the opportunity for the Applicant and PPC to ask questions. The Interested Parties and the Applicant were then given the opportunity to sum up.

### **The Applicant's Case**

**Mr Bilon** commenced his presentation by thanking the Committee for giving him the opportunity to present his case.

He stated that since no pharmacy was located within their defined neighbourhood, the Committee should view that pharmaceutical services to the neighbourhood were inadequate and therefore the granting of the application was both necessary and desirable. He defined the neighbourhood as:

North: The River Cart. This boundary was chosen because the river presented a clear natural boundary.

East: Lochfield Road. Beyond the boundary at Lochfield Road (to the South) there was a markedly different style of housing compared to the housing contained in the Applicants' neighbourhood.

South: Huntly Terrace. Beyond Huntly Terrace there was a change of Council ward, along with a change in housing type/style, which changed from terraced housing to three storey blocks of flats.

West: Ardgowan Street and railway line. Beyond the railway line towards Lonend marked a significant change from an almost exclusively residential neighbourhood area to an almost exclusively commercial area, including a car dealership and petrol station.

From the premises on Barscube Terrace the Applicant's planned to open a modern well-equipped pharmacy that was ready to fully embrace the new contract with the enthusiasm it deserved. A pharmacy based in the heart of the community was in keeping with the Scottish Government's "Delivering for Health" 10 year plan, which clearly stated the Government's desire for pharmacies to provide preventative health care in the heart of the community it served and that this advice should be provided in easily accessible pharmacies. No pharmacy located outwith the Applicant's neighbourhood could meet this vision because they were not easily accessible and were not in the heart of the Applicant's community.

The Applicants had had provisional talks with shop-fitters regarding the 50 m<sup>2</sup> unit and, based on their experience had been assured that the unit had ample space for a large dispensary area and consulting room. The Applicants had no plans to sell non-pharmacy products.

They wanted to provide a fully comprehensive range of pharmaceutical services including: smoking cessation, compliance aid dispensing, head lice treatment, advice to nursing homes, supervised methadone consumption, diagnostic testing and needle exchange should the Health Board confirm that there is a need. They would also want to be involved in all available Patient Group Directions.

The row of shops at Barscube Terrace contained a council run day

nursery, a hairdresser and a general store with newsagent. The street truly was the heart of the community and visiting it was a daily occurrence for many of the residents. A pharmacy at this location would be ideally placed to answer the local population's health/pharmaceutical care needs.

Beyond the defined neighbourhood the nearest pharmacy to the proposed site was Abbey Chemist, which was located within Abbey Medical Centre and was at least an eight minute walk from the proposed premises. The Applicant did not believe that residents considered Abbey Chemist to be a community pharmacy in the traditional sense. To the average member of the public it would appear that the pharmacy was directly affiliated with the health centre due to its location and lack of clear signage. In addition, it was unlikely that a patient would have their prescription dispensed in Abbey Chemist if their GP was not based in Abbey Medical Centre. It would be very easy to pass the health centre without realising there was a pharmacy there and on Mr Bilon's first visit to the area, he had driven past without noticing the pharmacy.

The pharmaceutical service offered by Abbey Chemist to the Applicant's defined neighbourhood was inadequate and did not meet the needs of the local population. The pharmacy did not open on Saturdays which was outwith the model hours scheme, and perhaps more importantly was not in keeping with the strategy set out in "The Right Medicine" which called for flexible opening hours. With the vast majority of GP surgeries closed on a Saturday, access to a pharmacist and the clinical skills they can provide was vital to meet the local health needs. For this reason, the granting of this application was necessary to fill this service gap.

Saturday closing also had significant ramifications for those that have been deemed necessary by their GP to require supervised daily methadone consumption. Closing on a Saturday serves as a barrier to methadone clients obtaining optimal benefit from their treatment and increases the likelihood of illicit diversion of methadone.

Anyone wishing to access pharmaceutical services on a Saturday has to travel far outwith the boundary of the defined neighbourhood. Using the most direct route, the closest pharmacy was at least 0.7miles distant from the Applicant's proposed site. The distance and gradient involved to travel to obtain pharmaceutical services is significant and challenging, particularly for those such as mothers with pushchairs, the disabled, elderly and for those without transport. Significantly, 49.8% of the households in the neighbourhood do not have access to a car. For those with their own car it was widely known that Neilston Road and Causeyside Road had parking restrictions and limited parking spaces which inhibited access to pharmacies.

The Applicant had conducted an investigation into the provision of public

transport in the neighbourhood and it was discovered that there was no direct bus route from the neighbourhood to Neilston Road where the pharmacies were open on a Saturday. Traveline Scotland advised that walking was the only real option to get from the area near the proposed site to Neilston Road and this would take 23 minutes. This is highly inadequate and serves as a barrier to the patient groups mentioned earlier. For this reason the Applicants urged the Committee that the granting of the application was both necessary and desirable.

Mr Bilon concluded that the fact that there was no pharmacy open on a Sunday nearby further highlighted both the necessity and desirability of the Applicants' case. The nearest pharmacy open on a Sunday was located within Glasgow International Airport, which was only realistically accessible to those travelling by air that day.

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

In response to questioning from Mr Mohammed, Mr Bilon confirmed his assertion that the proposed premises were easily accessible for the neighbourhood being served. Most of the residents would travel to the parade of shops as part of their everyday life. He did not agree that the gradient would put people off accessing the shops which were located in a central point and had easily access to a pedestrian crossing.

In response to further questioning from Mohammed, Mr Bilon confirmed that he had noticed the updated signage at Abbey Chemists. He conceded that the signage was an improvement from that which was in place previously.

In response to further questioning from Mr Mohammed, Mr Bilon advised that he did not consider Abbey Chemists' intention to open Saturdays on a trial basis from January to have any bearing on the application, as he considered that the present situation to be relevant and at this point in time Abbey Chemists did not open on a Saturday. He further confirmed that Paisley had a significant population which would have a requirement for services on a Sunday. He was not aware that Alliance Pharmacy provided services on a Sunday.

In response to further questioning from Mr Mohammed, Mr Bilon advised that he did not consider Abbey Chemists to provide adequate services to the Applicant's defined neighbourhood as their premises were not situated in the neighbourhood.

There were no questions to the Applicant from Mr Deveney.

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

In response to questioning from Mr Irvine, Mr Bilon confirmed that he

had used a mixture of natural, social and geographical boundaries to identify the neighbourhood. The River to the north was a natural boundary, but the boundary of Huntly Terrace was more demographic and social. He further confirmed that in the two council wards which covered his neighbourhood, the total population was around 4,500. The area had a higher than average percentage of people with detrimental health.

In response to further questioning from Mr Irvine, Mr Bilon confirmed that he had plans drawn up for the pharmacy, but did not have them available at the hearing.

In response to questioning from Mr Dykes, Mr Bilon advised that in his opinion the residents south of Lochfield Road would access services in Paisley town centre. They probably would not travel to facilities at Braehead due to cost and time factors.

In response to further questioning from Mr Dykes, Mr Bilon confirmed the population as being around 4,000. When challenged, Mr Bilon advised that the area had a higher than average level of overcrowding.

In response to questioning from Mr Thomson, Mr Bilon advised that the existence of a pharmacy in the parade of shops would attract other retailers to the location. Three of the units in the parade were already occupied and it was hoped that the establishment of a pharmacy would increase interest in the location

In response to questioning from Professor McKie, Mr Bilon confirmed that the railway line to the south of the Applicants' neighbourhood was active. It runs into Canal Street via a bridge. He further confirmed that there were no direct bus services from the neighbourhood to Neilston Road. There was a bus yo Lochfield Road and Rowan Street. He was not aware where the bus route went after this, but information from Traveline Scotland had confirmed the absence of a direct route from the neighbourhood to Neilston Road.

In response to questioning from Mrs Roberts, Mr Bilon confirmed that the nearest pharmacy was 0.7 miles away from the proposed premises. He asserted that while people might not take cognisance of the difference in buildings between one neighbourhood and another, they recognised the demographic difference between areas.

In response to questioning from Mr Daniels, Mr Bilon confirmed that from the proposed premises to the furthest point in the defined neighbourhood (around Afric Drive) would be a 10-15 minute walk.

In response to further questioning from Mr Daniels, Mr Bilon reiterated his point that Abbey Chemists did not provide adequate services to the defined neighbourhood as it was not located in the neighbourhood. He

conceded that Abbey had improved their signage but maintained that the residents within the defined neighbourhood would still need to travel outwith their area to access services at Abbey Chemists.

In response to questioning from the Chair around what he would consider to be the characteristics of the defined neighbourhood, Mr Bilon advised that Huntershill could be described as an “urban village”. Mr Bilon advised that in the past, the Council had put forward a proposal to change the ward boundaries and those residents within the area objected. They related themselves to the area. There were community amenities in the area including a private nursery, a library and Community Centre and the parade of shops formed the focus of the area.

### **The Interested Parties’ Case – Mr Asgher Mohammed (Abbey Chemists)**

**Mr Mohammed** thanked the Committee for providing him with the opportunity to respond to the application. He advised that his presentation would be based on his initial letter of objection dated 25<sup>th</sup> July 2007.

He advised that some of the Applicants’ boundaries appeared to have been chosen purposefully to exclude certain pharmacies in the locality. The natural boundaries, in his opinion, would be: Lonend/Barrhead Road, Neilston Road, Gordon Street and Lochfield Road to the south.

Abbey Chemists’ branch at Lonend was only 0.3miles from the proposed site and offered a full range of pharmaceutical services. The branch had been well established for over 20 years in this neighbourhood and provided a comprehensive range of services for patients.

They had embraced the new pharmacy contract and were in the process of expanding the size of the premises. In addition they were extending their opening hours to include Saturdays 9.00am – 1.00pm, on a trial basis but considered that Sunday opening in their locality was not necessary because the demand for this service would be very low. Signage at the pharmacy had also been improved.

Mr Mohammed did not consider that the Applicants intended to provide any additional services not already provided by the existing pharmacy network in the area.

### **The Applicant Questions Mr Mohammed**

In response to questioning from the Applicant, Mr Mohammed confirmed that Abbey Chemists intended to provide services on a Saturday morning on a trial basis for three months. The pharmacy had opened on a Saturday in the past, but had dispensed few prescriptions



causing the service to be withdrawn. The opening of a new medical centre adjacent to the pharmacy and the increasing importance of the Minor Ailment Service had caused him to reconsider.

In response to further questioning from the Applicant, Mr Mohammed advised that the GPs in Abbey Medical Centre were comfortable issuing five day dispensing prescriptions for their methadone patients. Abbey Chemists branch in Gauze Street was open on a Saturday for any methadone patient that required supervision over six days. He asserted that while six day supervision was known to be the optimal for patients, the GPs were content to prescribe over five days. This would not change even when Abbey Chemists commenced the provision of services on Saturday mornings.

There were no questions to Mr Mohammed from Mr Devanney.

### **The PPC Question Mr Mohammed**

In response to questioning from Mr Dykes, Mr Mohammed advised that Abbey Chemists dispensed many prescriptions from GP practices other than the Abbey Medical Practice. Patients from other practices accessed the pharmacy either on foot, or by car. The parking in the area had improved with the establishment of a car park behind the new medical centre, and the removal of the notice at Abbey Medical Practice, which had in the past deterred people from parking there.

In response to further questioning from Mr Dykes, Mr Mohammed confirmed that the Saturday opening trial would last approximately three months from January to round about Easter.

In response to final questioning from Mr Dykes, Mr Mohammed confirmed that Abbey Chemists had capacity to take on additional methadone clients.

In response to questioning from Mr Thomson, Mr Mohammed confirmed that the decision to trial Saturday opening had been made in response to the opening of the new medical practice adjacent to the pharmacy and the increasing importance of the minor ailment service. He conceded that the minor ailment service had been implemented for over a year, but advised that any decision to extend opening hours had to be balanced between cost and service provision.

In response to questioning from Professor McKie, Mr Mohammed advised that he was not aware what bus services operated within the residential areas surrounding the neighbourhood. He also confirmed that many in the area owned cars.

In response to questioning from Mrs Roberts, Mr Mohammed confirmed that he did not feel Sunday opening was necessary in this

area. A survey had been undertaken several years ago which had identified where prescriptions dispensed on a Sunday were generated. A pharmacy in a neighbouring area now provided this service.

In response to questioning from Mr Daniels, Mr Mohammed confirmed that Abbey Chemists did attract customers from the Hurllet area who travelled by car and by public transport.

There were no questions to Mr Mohammed from Mr Irvine or the Chair.

### **The Interested Parties' Case – Mr Brian Deveney Barshaw Pharmacy)**

**Mr Devanney** thanked the Committee for giving him the opportunity to present his case. He advised that a further pharmacy in the area was not necessary or desirable. South East Paisley was not a large distinct community lacking pharmaceutical provision.

Within the area of South-east Paisley there were five existing pharmacies which provided a wide and full range of pharmaceutical services and had embraced the provisions of the new pharmacy contract. There had been no complaints that he was aware of, around the lack of services in the area.

Access to services was good, as was access to public transport links.

There had been no increase in population or GP services that would cause an increase to the number of prescriptions generated.

In his opinion the Applicants had drawn their neighbourhood specifically to omit existing contractors and the application was not necessary or desirable.

### **The Applicant Questions Mr Devanney**

In response to a question from the Applicant, Mr Devanney confirmed that his pharmacy provided a collection and delivery service. Patients requiring access to the minor ailment service could make contact with the pharmacy by telephone.

In response to further questioning from the Applicant, Mr Devanney confirmed that he had discounted the increase in population that had occurred with the recent development of flats as this was outwith the Applicants' neighbourhood.

There were no questions to Mr Devanney from Mr Mohammed.

### **The PPC Question Mr Devanney**

In response to a question from Mr Irvine, Mr Devanney confirmed that he agreed with the definition of neighbourhood put forward by the General Practitioner Sub-committee.

In response to questioning from Mr Dykes, Mr Devanney confirmed that his pharmacy could increase the number of methadone patients they treated. He advised that numbers of methadone patients had fallen in his area and spaces were readily available. He also confirmed that he employed a driver to undertake his deliveries, but would also undertake deliveries himself if this was required.

In response to questions from Professor McKie, Mr Devanney confirmed that the flats on the right hand side at Lonend were on the same side of the River Cart as Barshaw Pharmacy.

There were no questions to Mr Devanney from Mr Thomson, Mrs Roberts, Mr Daniels or the Chair.

#### **The Interested Parties Sum Up**

**Mr Devanney** advised that he did not believe there to be a lack of services in the area. The services were adequate. There were five pharmacies currently in the area all providing adequate services. A further pharmacy was not required.

**Mr Mohammed** advised that the Applicant hadn't provided any evidence of inadequacy. His boundaries had been drawn to exclude pharmacies in the area. Abbey Chemists had given a commitment to provide Saturday morning opening. The application was not necessary.

#### **The Applicant Sums Up**

**Mr Bilon** advised that there was no pharmacy in the area defined. There were no direct bus routes to the areas where currently the residents could access services, and distances to these areas were excessive. Abbey Chemists had not demonstrated a full commitment to the provisions of the new contract and the application was necessary and desirable.

Before the Applicant and the Interested Parties left the hearing, the Chair sought confirmation that they had had a full and fair hearing. All confirmed that they had.

The PPC was required and did take into account all relevant factors concerning the issue of:-

- a) Neighbourhood;

- b) Adequacy of existing pharmaceutical services in the neighbourhood and, in particular, whether the provision of pharmaceutical services at the premises named in the application was necessary or desirable in order to secure adequate provision of pharmaceutical services in the neighbourhood in which the premises were located.

The PPC took into 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 (General Practitioner Sub-Committee);
- c) The Greater Glasgow & Clyde Area Medical Committee (GP Sub-Committee).

The Committee also considered:-

- d) The location of the nearest existing pharmaceutical services;
- e) Demographic information regarding the Lonend and Paisley areas; 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 firstly on 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: Gordon Street;  
East: The White Cart Water;  
South: South Avenue, along behind the houses at Larchfield Road to the A726;  
West: Hawkhead Road.

The Committee felt that this was a distinct neighbourhood. The White Cart Water to the east formed a physical boundary. The area within these boundaries was, in the Committee's opinion, a neighbourhood

for all purposes. It contained schools, businesses, churches and residential areas and had many of the characteristics expected from a neighbourhood.

**Adequacy of Existing Provision of Pharmaceutical Services and Necessity or Desirability**

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

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

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 currently adequately served.

**In accordance with the statutory procedure the Chemist Contractor Members of the Committee Kenny Irvine and Gordon Dykes 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. In the circumstances, it was the unanimous decision of the PPC that the application be refused.

**The Chemist Contractor Members of the Committee Kenny Irvine and Gordon Dykes and Board Officers rejoined the meeting at this stage.**

**4. INTERPRETATION OF ADVICE – JUDICIAL REVIEW**

The Committee having previously been distributed with Paper 2007/64

**Contractor  
Services  
Supervisor**

noted the contents and agreed to take the issues raised in the paper into consideration when determining future applications.

**AGREED/-**

**5. ANY OTHER COMPETENT BUSINESS**

**Chair**

The Chair advised the Committee that he was standing down as Chair of the PPC with immediate effect after his recent appointment to the post of Chairman of the Health Board.

He thanked the Committee for their efforts and commitment over the term of his Chairmanship and wished them well for the future.

Mr Thomson thanked the Chair on behalf of the Committee for his leadership over the years and wished him well in his new role.

**6. DATE OF NEXT MEETING**

Scheduled for Thursday 10<sup>th</sup> January 2008 at 12.30pm. Venue to be confirmed.

The Meeting ended at 3.45p.m.