NHS Greater Glasgow and Clyde

NOT YET ENDORSED AS A CORRECT RECORD

Pharmacy Practices Committee (19)
Minutes of a Meeting held on
Tuesday 9th September 2008
Meeting Room, Queens Park House, Langside Road
Glasgow G42 9TT

PRESENT:	Mr Peter Daniels	Vice Chair
	Professor J McKie	Lay Member
	Mr W Reid	Deputy Lay Member
	Prof H McNulty	Deputy Non Contractor Pharmacist Member
	Mr Colin Fergusson	Deputy Contractor Pharmacist Member

IN ATTENDANCE:	Dale Cochran	Contracts Supervisor – Community Pharmacy Development
	Richard Duke	Contracts Manager – Community Pharmacy Development
	Janine Glen	Contracts Manager – Community Pharmacy Development
	Robert Gillespie	Lead - 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 Pharmacy Practices Committee held on Tuesday 12th August 2008 **(PPC[M]2008/13)** and Wednesday 13th August 2008 **(PPC[M]2008/14)** were agreed as an accurate record.

3. MATTERS ARISING NOT INCLUDED IN AGENDA

None.

Section 1 – Applications Under Regulation 5 (10)

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

Case No: PPC/INCL14/2008
Advance Pharmacies Ltd, 26-28 Willowford Road, Darnley, Glasgow G53 7LP

The Committee was asked to consider an application submitted by Advance Pharmacies Ltd to provide general pharmaceutical services from premises situated at 26-28 Willowford Road, Darnley, Glasgow G53 7LP 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 Applicants' proposed premises were located.

The Committee, having previously been circulated with all the papers regarding the application from Advance Pharmacies 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 Nadeem Iqbal ("the Applicant"). The interested parties who had submitted written representations during the consultation period, and who had chosen to attend the oral hearing were Mr Paul Nightingale (National Co-operative Chemists Ltd), assisted by Mr Alan Harrison ("the Interested Party").

The Chair asked Mr Harrison (assisting Mr Nightingale) to confirm that he was not appearing before the Committee in the capacity of solicitor, counsel or paid advocate. Mr Harrison confirmed he was not.

Prior to the hearing, the Panel had collectively visited the vicinity surrounding the Applicant's premises, pharmacies, GP surgeries and

facilities in the immediate area and the surrounding areas of Pollok, Crookston, Priesthill and Darnley.

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

The Applicant's Case

Mr Iqbal advised that the proposed premises were situated in a parade of shops in an area which was currently undergoing a regeneration programme, incorporating new housing estates, open spaces and a play area. This would make the neighbourhood self contained, including a school, a church and an industrial estate. The neighbourhood was defined as:

North: the railway line;
West: Salterland Road;
South: edge of the new housing development;
East: Nitshill Road

He advised that Advance Pharmacies would provide a range of services from the premises including but not limited to:

- Dispensing of both private and NHS prescriptions;
- Repeat dispensing;
- Electronic Transfer of Prescriptions;
- Supervised Administration – the company's intention was to establish a comprehensive drugs solution centre;
- A newsletter facility which would be used to keep the local population informed of health issues. The intention would be to choose a health topic and to develop the newsletter around this. The leaflet would be free of charge.
- Services to schools. The company would run regular talks to teachers, schoolchildren and parents regarding child healthcare e.g. head lice. This service would be provided free of charge.
- Disposal of unwanted medicines, via such initiatives as "brown bag days".
- Home delivery services;
- Care home services;
- Needle/Syringe exchange services, smoking cessation services and supplementary prescribing;
- Anti-coagulant monitoring. This service was known to be at an early stage at present, but would be developed in time.
- Flu vaccines, supplies and administration;
- Screening services including glucose, blood pressure, acid reflux and

cholesterol monitoring. These services would be free of charge.
- Disease specific medicines management e.g. diabetes and asthma.
- Possibility of providing in-house GP service;
- Sign-posting and promotion of self care.

Mr Iqbal advised that the pharmacy would work with the population to improve health and to further the Future of Pharmacy initiative. There was a growing population in the area with only three quarters of the development complete. Further development would see a total increase of around 3,000 patients. The application was necessary and desirable as there were no medical services within the neighbourhood at present.

The Interested Party Questions the Applicant

In response to questioning from **Mr Nightingale,** Mr Iqbal advised that he had included the area to the south of Parkhouse Road in his neighbourhood as he had to find a point to designate the boundary. He considered the housing style to be different to that to the north of Parkhouse Road. A substantial proportion of the houses to the south were privately owned when the majority of houses to the north were council.

In response to further questioning from Mr Nightingale around population increase in the area, Mr Iqbal advised that north of Parkhouse Road 330 new houses had been completed. This was the first phase of a programme, with the second phase to comprise a further 300 3 – 4 bedroom semi/detached houses. He agreed that these houses would ostensibly replace three and four storey tenemental properties that had been demolished, however he maintained that there would still be an influx of population to the area.

Continuing his questioning around population, Mr Nightingale asked Mr Iqbal to agree that according to his own statistics which showed that at 2001 the population was 6,128 and at 2004 6,255, there was very little change in the population. Mr Iqbal advised that there was continued major development in the area which would result in an influx of population.

In response to further questioning from Mr Nightingale, Mr Iqbal advised that those living in the area currently needed to travel outwith the neighbourhood to access day to day services. He asserted that this would not always be the case after development in the area was complete. The area would be self contained. In response to Mr Nightingale's suggestion that the schools would relocate out of the area, Mr Iqbal advised that a final decision had not been made on this yet.

In response to further questioning by Mr Nightingale around the proposed premises, Mr Iqbal advised that the other shops in the retail

parade were currently empty however the plan was to either rebuild the retail sector by demolishing the row of shops and rebuilding or to find an alternative site. Whatever proposal was progressed there would be a retain site in the neighbourhood. He confirmed that as the application was for premises in the old parade, there would be a need to apply for a relocation of services if the new pharmacy were granted and the retail units were built elsewhere. Mr Iqbal confirmed there was contingency in place to provide services from a temporary modular unit if needed.

In response to further questioning from Mr Nightingale, Mr Iqbal agreed that there had been an additional contract approved in the area within the last year or so. He advised that this was situated more than one mile from the proposed premises, and would involve a 25 minute walk. He agreed that patients would have the option to drive to the pharmacy and agreed that the National Co-operative Chemist at Nitshill Road was closer to the neighbourhood. He was not aware of the pedestrian access under the railway line.

In response to final questioning from Mr Nightingale, Mr Iqbal conceded that some of the services mentioned in his presentation were not covered by the current pharmacy regulations and that they would also be provided by the current pharmaceutical network. He was aware that the provision of needle exchange services could only take place at the behest of the Health Board but asserted that localised health services would be welcomed by the Board. He was not aware that National Co-operative Chemists and Houlihan Pharmacy had applied to provide the service, but had not been given Board approval.

The PPC Question the Applicant

In response to questioning from **Mr Reid**, Mr Iqbal advised that the intention was to hold clinics in premises where users could access methadone and subutex. These clinics would be provided by specialists.

In response to further questioning from Mr Reid, Mr Iqbal advised that the newsletter would be developed with contributions from pharmacy staff. The newsletter would be informative, based around specific health topics e.g. hay fever. He also advised that the services to schools would be provided free of charge and would take the form of regular seminars covering child health topics e.g. head lice. The topics would be chosen by the schools.

In response to further questioning from Mr Reid, Mr Iqbal confirmed that he did not know the population of his defined neighbourhood.

In response to questioning from **Professor McKie**, Mr Iqbal elaborated on the plans for in-house GP services. He advised that GP services

could be provided on a part-time basis if demand was shown for the service.

In response to further questioning from Professor McKie, Mr Iqbal advised that he was not sure what percentage of the population would be made up of those who had decanted from the demolished properties. He was not aware how this related to the population at present but asserted that the population would increase by a third which was approximately 2,000 – 3,000.

In response to a question from Professor McKie around services, Mr Iqbal confirmed that services were provided by the current pharmaceutical network, but not within the defined neighbourhood. Distance to access was a factor, with patients required to walk to the nearest existing pharmacy. He agreed that many patients could travel by car to access services, but asserted that there would be no need to travel if GP services were developed alongside the new pharmacy.

In response to questioning from **Professor McNulty**, Mr Iqbal advised that services were currently inadequate because of the access problems. The patients needed to walk to access current services. There was provision in the area, but not in the defined neighbourhood.

In response to further questioning from Professor McNulty, Mr Iqbal agreed that a proportion of the population would not be considered to be deprived. The new housing in the area was of mixed type and services would be tailored to meet the needs of the users of the pharmacy.

In response to final questioning from Professor McNulty, Mr Iqbal confirmed that the Pharmacy for the Future initiative mentioned in his presentation was an English development. He advised that a local pharmacist would be employed for the new premises.

In response to questioning from **Mr Fergusson**, Mr Iqbal confirmed that the specialist element of the methadone and subutex service would be around the prescribing, assessment and monitoring. He was aware that the current pharmacy network would be providing supervision services.

In response to further questioning from Mr Fergusson, Mr Iqbal confirmed that he did not know where the nearest anticoagulation clinic was provided from.

In response to final questioning from Mr Fergusson, Mr Iqbal advised that the new pharmacy would provide h-pylori testing as part of their services. The company already employed specialist pharmacists who were experienced in this service.

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

The Interested Party's Case – National Co-operative Chemists (Mr Paul Nightingale)

Mr Nightingale advised that he disagreed with the Applicant's defined neighbourhood. National Co-operative Chemists would define the neighbourhood as:

North: Levern Road – A736 Glasgow Road;
South: Parkhouse Road;
East: Nitshill Road;
West: Salterland Road.

Mr Nightingale advised that this South Nitshill and was different to the separate area of Nitshill which lay to the north of Nitshill Road. Access to the north was gained via an underpass from the end of Woodhead Road through to Dove Street. The underpass came out directly opposite National Co-operative Chemists on Nitshill Road. Mr Nightingale had walked the route from the Applicant's proposed premises which was approximately 1/3 mile. It had taken around seven minutes and Mr Nightingale had been walking at a slow pace. He had monitored the number of people exiting from the underpass and had counted 38 people in a twenty minute period. There had been a mix of elderly and young. This was a regular route for the population of South Nitshill who travelled this route to access the food store, chip shop and post office.

In real terms there were four existing pharmacies within a one mile radius of the proposed premises. The nearest existing pharmacy was National Co-operative Chemists at Nitshill Road, then Houlihan Pharmacy in the Darnley Retail Park. There was a further pharmacy in the Pollok Health Centre which was also the main location of GP services and finally Boots at Silverburn. There was adequate parking at all pharmacies and they were readily accessible by foot from the defined neighbourhood. Houlihan Pharmacy provided extended hours and was open 365 days per year.

Mr Nightingale advised that the schools in the area were to relocate, to two sites. One on Dove Street was nearly complete and one on Cleves Road would combine two schools into one.

He advised that the population of Nitshill and Darnley was 6,255 according to 2004 statistics which was an increase from 2001. The number of children had however decreased and the number of elderly had increased by only 2%. Mr Nightingale advised that even if the population of area increased by 3,000 this would bring the total population to around 9,000. The average population served by a pharmacy in Scotland was around 4,500. Mr Nightingale advised that

the current network provided more than adequate services even allowing for the speculated increase in population.

There were two bus services in the area. The number 56 and 57 ran every 15 minutes and ran to the north of the neighbourhood.

He advised that the National Co-operative Chemist premises on Nitshill Road were currently being upgraded with the installation of automatic doors making it fully DDA compliant. The pharmacy offered a full range of services, which comprised in addition to the four core services; Minor Ailment Service, NRT, Compliance Aids, Medicines Management, Frail Elderly, Heart Failure, Keep Well, and Enhanced Smoking Services. The pharmacy also provided a collection and delivery service throughout Nitshill and Darnley. It was open 9.00am – 5.30pm Monday – Friday; 9.00am – 12.30pm – Saturday.

Mr Nightingale advised that the pharmacy had spare capacity to take on more services. Within the pharmacy there were two keen and enthusiastic pharmacists who had been willing to take on needle exchange services, although this offer had not been taken up by the Health Board as yet.

Mr Nightingale concluded by agreeing that the area of Nitshill was undergoing a period of change, however disagreed that the area could continue to be described as deprived while the housing and social topography was improving. Mr Nightingale asserted that even if the population increase the current pharmaceutical network had spare capacity to deal with this and the application should be turned down.

The Applicant Questions Mr Nightingale

In response to questioning from **the Applicant**, Mr Nightingale advised that he had used Parkhouse Road as a boundary as the development beyond this had been in existence for some time. It was well established and he had looked at the area in terms of where residents would consider themselves neighbourhoods. He felt the area described as Southpark to be part of Darnley and not Nitshill and didn't feel that anyone living there would consider themselves to be neighbours of those living in Nitshill.

The PPC Question Mr Nightingale

In response to questioning from **Mr Reid,** Mr Nightingale advised that there was a possibility of extending the National Co-op premises on Nitshill Road. The parade of shops was currently being considered for redevelopment and the company had been approached by the developer with a view to extending the premises. It was hoped that this would result in an increase of 1-2 times the floor space providing more shop front, a larger dispensary and staff facilities. At the moment

the plans were speculative and would be contingent on funding.

In response to further questioning from Mr Reid, Mr Nightingale confirmed that there were two part time pharmacists operating from the National Co-op premises.

In response to questioning from **Professor McKie**, Mr Nightingale confirmed that the bus services 56 and 57 both looped off the A726 along Woodburn Road and Parkhouse Road to Nitshill Road. He didn't think there was any service which linked the north area to the south.

In response to questioning from **Professor McNulty**, Mr Nightingale confirmed that looking at the map and taking a one mile radius of the Applicant's proposed premises there was one existing pharmacy. Mr Nightingale was of the opinion however that many of the residents would chose not to walk to access services. The housing in parts of the neighbourhood was more affluent and patients would choose to travel either by car or public transport ensuring easier access to the other pharmacies outwith the direct neighbourhood. The journey to National Co-op and Houlihan Pharmacy was easier for these patients, with most having to travel outwith the area to access other amenities including their food shopping at Sainsbury's or Tesco at Silverburn.

There were no questions to Mr Nightingale from the Chair, Mr Fergusson, or Mr Gillespie.

Summing Up

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

Mr Nightingale advised that there was already adequate provision of pharmaceutical service to the population in the neighbourhood.

Mr Iqbal advised that there was development to the north and south of Parkhouse Road which would result in the neighbourhood becoming a self contained area. The provision of services was necessary and desirable.

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

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

a) Neighbourhood;

b) Adequacy of existing pharmaceutical services in the neighbourhood

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

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 post-code sectors G53.6 and G53.7;

f) Information from Glasgow City Council's Department of Development and Regeneration regarding future plans for development within the area; and

g) 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 apex where Nitshill Road met Hurlet Road;
East: ; travelling along Nitshill Road to its meeting with Parkhouse Road;
South: Parkhouse Road travelling west along Darnley Road to its

meting with A736 trunk road (Glasgow Road);
West: the A736 trunk road, travelling north to it's meeting with Nitshill Road and Hurlet Road.

The A736 trunk road was a natural boundary and also designated the separation of Glasgow City and the area of Barrhead, which was situated in Paisley. Nitshill Road, while a major trunk road was also a boundary in terms of social demography. The housing to the north of Nitshill Road being of a different type to that to the south. The Committee dismissed the railway line as a boundary due to the presence of the well lit, well used underpass which linked the area to the south of Nitshill Road to the north. In the Committee's opinion the above boundaries formed a natural neighbourhood within which residents would consider themselves to be neighbours. The Committee accepted however that it would be necessary for residents within the defined area to travel outwith to access GP services, major shopping facilities and other conveniences necessary for their day to day living.

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 was one pharmacy. This pharmacy provided the full range of pharmaceutical services including supervised methadone. The Committee further noted that there were other 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, despite the Applicants' assertion that the provision of a further pharmacy would improve the adequacy of such services. The Committee therefore considered that the existing pharmaceutical services in the neighbourhood were adequate.

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.

The Committee considered the Applicant's comments around development in the area and concluded that even taking into consideration any potential increase in population that would occur from these developments, the services to the neighbourhood would

remain adequate with the current pharmaceutical network well placed to accommodate such changes.

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. ANY OTHER COMPETENT BUSINESS

None.

5. DATE OF NEXT MEETING

To Be Arranged.