

NOT YET ENDORSED AS A CORRECT RECORD

Pharmacy Practices Committee (09)
Minutes of a Meeting held on
Wednesday 16th December 2009
The Premier Inn Glasgow South, 80 Ballater Street
Glasgow G5 0TW

PRESENT:	Dr Catherine Benton	Chair
	Professor J McKie	Lay Member
	Mr William Reid	Deputy Lay Member
	Professor H McNulty	Deputy Non Contractor Pharmacist Member
	Mr Gordon Dykes	Contractor Pharmacist Member
IN ATTENDANCE:	Trish Cawley	Contracts Supervisor – Community Pharmacy Development
	Janine Glen	Contracts Manager – Community Pharmacy Development
	Elaine Ward	Development Pharmacist – 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 Peter Daniels

2. MINUTES

The Minutes of the meetings held on Monday 26th October 2009 **PPC[M]2009/07** and Wednesday 4th November 2009 **PPC[M]2009/08** were approved as a correct record.

3. ANY OTHER BUSINESS NOT INCLUDED IN AGENDA

None.

ACTION

The Committee noted that Mr Joseph Walsh was in attendance as representative of Royston Pharmacy. Mr Walsh had confirmed that he was not the Applicant, nor a Pharmacist, nor a partner or permanent employee of the contractor T Boyle Partnership (Royston Pharmacy). Mr Walsh confirmed that he was the Accountant for the company. After comprehensive discussion the Committee agreed that Mr Walsh could not participate in the oral hearing as his role could be interpreted as a paid advocate due to the nature of his standing with the company.

The Chair sought the agreement of all present for Mr Walsh to remain present in the hearing in the capacity of observer. All indicated their agreement to this course of action and Mr Walsh accepted that he would be able to remain within the hearing room, but would not be able to contribute verbally to the proceedings. Mr Walsh was advised that this would not affect T Boyle Partnership's right to appeal against the Committee's decision should they consider this to be adverse to them, once made.

Section 1 – Applications Under Regulation 5 (10)

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

Case No: PPC/INCL05/2009

Mr Ian Robert Mouat, 11 Kennedy Path, Townhead, Glasgow G4 0PP

The Committee was asked to consider an application submitted by Mr Ian Robert Mouat, to provide general pharmaceutical services from premises situated at 11 Kennedy Path, Townhead, Glasgow G4 0PP under Regulation 5(10) of the National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009.

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

The Committee, having previously been circulated with all the papers regarding the application from Mr Mouat, 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 2009 ("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 Ian Robert Mouat (“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 Colin Fergusson (Colin Fergusson Pharmacy), assisted by Mrs Ann Fergusson, Mr Asgher Mohammed (Abbey Chemists and High Street Pharmacy), assisted by Mr Abdal Alvi and Mr Neeraj Salwan (Townhead Health Centre Pharmacy Ltd) (“the Interested Parties”).

Prior to the hearing, the Panel had collectively visited the vicinity surrounding the Applicant’s premises, pharmacies, GP surgeries taking the following route: Ballater Street, Saltmarket, High Street, Duke Street, Wishart Street, Alexandra Parade, Castle Street, Royston Road, the Blind Tunnel, Petershill Road, Springburn Road, Baird Street, North Hanover Street, St Mungo Avenue , Kennedy Path, St James Road, Stirling Road, Cathedral Street, Rottenrow, John Street, Ingram Street, Glassford Street and Argyle Street.

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. Each of the Interested Parties then gave their presentation, 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

The Applicant thanked the Committee for providing him the opportunity of presenting his case.

Mr Mouat described the neighbourhood as from the north at Baird Street and the M8, west at North Hanover Street from its junction with Kyle Street, east at Stirling Road through McAslin Street to the M8 slip road and south at Cathedral Street. The defined neighbourhood had distinctive boundaries on all sides which were physical in nature. The boundaries were the M8 in the north, the huge Buchanan Galleries Shopping centre on the west, the Royal Infirmary on the east and the Strathclyde University campus on the south embanked steeply. This was the defined neighbourhood of Townhead and as such had been confirmed by Alan McGregor of Development & Regeneration Services, Glasgow City Council. The population calculation had been undertaken using data zones and housing stock figures per ratio for each datazone. This gave an exact population figure for the neighbourhood of Townhead of 4,653 (based on 2007) figures. The

neighbourhood contained all the features expected in a neighbourhood i.e. schools, churches and food shops.

The Applicant advised the Committee that there were no pharmaceutical services currently within the defined neighbourhood. The adjoining area, and by this Mr Mouat meant immediately adjacent to the neighbourhood he had defined, there were three pharmacies. These were the Boots pharmacies in Queen Street Station and Buchanan Galleries and Townhead Health Centre Pharmacy which operated from Glasgow Royal Infirmary. The other pharmacies objecting to this application were, in Mr Mouat's opinion within the designated notification distance of the application but were not considered by Mr Mouat to be adjacent or adjoining. The Applicant asked why residents of Townhead travel to access services offered by Royston Pharmacy, Lloyds Pharmacies operating in Sighthill and Bridgeton, Abbey Pharmacy or Colin Fergusson in Springburn. The question that arose, in Mr Mouat's opinion was why were these pharmacies objecting in the first place? Quite simply the population of Townhead had to travel outwith their own neighbourhood to access pharmaceutical services due to an inadequacy within the Townhead area. This meant that, by default, patients had to travel to Springburn to visit the Barony Medical Practice because their GP relocated from Townhead Health Centre and they then might choose to use the nearest pharmacy. Was this adequate? Royston Pharmacy and Lloyds operated within their own neighbourhoods. Mr Mouat rejected the protest by Royston Pharmacy and assumed that the "intimate knowledge of the local community" referred to the Royston community.

The Applicant advised that on 7th December 2006, the Pharmacy Practice Committee had agreed the neighbourhood for the pharmacy in High Street to be: north Cathedral Street and the A803 trunk road (definite boundary), west: Glassford Street and John Street to meet Cathedral Street (Argyle Street shopping area agreed as boundary), south: Trongate heading east to Glasgow Cross and into Gallowagate. East: Gallowgate at its meeting with Barrack street to Hunter Street and Duke Street, and north: through John Knox Street to its meeting with Castle Street. It was then agreed that due to physical boundaries of main trunk roads and difference in housing types then the application was made in a distinct neighbourhood.

These were the same arguments the Applicant was using to define the neighbourhood of Townhead. The physical boundaries and difference in housing types define this distinct neighbourhood. He had chosen Cathedral Street in the south as his boundary line as specifically the pavement side parallel to the University of Strathclyde and thereby excluding the Campus but including the Grafton Place flats as this was Townhead.

The main impetus for the granting of the High Street pharmacy contract

was to address the demand brought about by new developments. Existing pharmaceutical services also existed at Townhead Health Centre Pharmacy and Boots branches in Queen Street Station and Buchanan Galleries.

In 1999 Boots in Queens Street Station applied and were granted a relocation to the premises in Buchanan Galleries. No neighbourhood was defined for the application however the Committee's reasons were:

".....given the nature of the shops available it would be reasonable to suggest that users of the development would expect to access pharmaceutical services as part of their normal shopping pattern and to that extent the application was desirable."

In 2003, Boots at Queens Street Station applied and were granted a contract without an oral hearing. Both of these Boots pharmacies serve a global transient population not a defined community. The pharmacy within the Health Centre of Glasgow Royal Infirmary was not visible from the street and would only be known by those residents registered with a GP in the Health Centre.

The Applicant advised that Page 3 of the Right Medicine Pharmacy Strategy Document had suggested that the provision of pharmaceutical services should address the provision of local services to meet local needs. The Applicant didn't doubt the fact that the three nearest pharmacies provided a comprehensive range of services meeting the core requirements. The problems were with the fact that they were not local enough. Accessibility was a major problem. There was unreasonable access for patients on foot to the surrounding pharmacies. Walking times of between 18 and 23 minutes maximum was surely unreasonable. Busy main roads, sharp inclines and dual carriage flyovers were wholly unacceptable

The Applicant advised that it was necessary and desirable for the 4,653 residents of Townhead to have a pharmacy at 11 Kennedy Path. The neighbourhood, as defined by the Applicant, did not have any pharmaceutical service. The pharmacies in surrounding neighbourhoods all served different populations. There were transient, global or separate distinct neighbourhoods.

The Applicant believed the proposed premises would be ideally suited to provide all the core services within easy access of all residents. A further contract would offer the population access to a local regular pharmacy and would address the imbalance brought about by other pharmacies experiencing new developments and therefore, increased population demands. The very nature of the objections alluded to the fact that the residents of Townhead were scrambling about accessing service where they could.

The Applicant believed that a local pharmacy would be best suited to improve the health of the community. Many more people would access core services and the many public health roles that were imminent. The health gap was getting wider and the inequalities agenda was a major theme for all political parties. A community pharmacy was easily accessed, with its ethnic diversity and non-threatening environment was well placed to address this.

Pharmacy had a proven track record now in smoking cessation and sexual health and surely these initiatives would expand in the future to weight management and responsible drinking. Mr Mouat believed many more people would utilize these initiatives if made local. Pharmacy was a key anchor to the local economy. Like a social glue, the public felt comfortable and trusted their local pharmacist and used them well. Pharmacies provided easy access to health advice and recruited and trained local people. A local pharmacy providing local services, avoiding the faceless pharmacist was what was needed in Townhead to improve health and wellbeing.

Mr Mouat advised that Schedule 3 of the Regulations required the Board to take reasonable steps to consult public opinion regarding any application. He advised that he had included letters of support from the public and indeed the local MSP for the area. These had already been documented and passed on. Further substantial support had also been made by telephone to the Health Board.

The Interested Parties' Question the Applicant

In response to questioning from **Mr Fergusson**, the Applicant agreed that the neighbourhood was accessible for students but acknowledged that they would need to leave the neighbourhood to access other services such as banks, retail shops etc.

In response to further questioning from Mr Fergusson, the Applicant acknowledged that of the 4653 population of Townhead, approx. 40% could be student population based on the age categories of the population.

In response to questioning from **Mr Mohammed**, the Applicant confirmed that he had excluded the residents from Cathedral Street as it was a minor population but also on the edge of the natural boundaries.

In response to further questioning from Mr Mohammed regarding the statement in the Applicant's presentation that "patients are scrambling around for a pharmacy" and a local pharmacy is needed to avoid the "faceless pharmacist", Mr Mouat advised that Mr Mohammed wouldn't have patients scrambling as he served his own neighbourhood

In response to questioning from **Mr Salwan** regarding the student advisory service, the Applicant acknowledged that he was not aware that this also provided a medical service including provision of medicines.

In response to questioning from Mr Salwan, the Applicant stated that the approximate figure of 40% student population was not an accurate figure; he was judging it by the age breakdown.

In response to further questioning from Mr Salwan around the walking times to the nearest pharmacy, the Applicant advised it took him approximately 15 minutes to walk to Boots the Chemist in the Buchanan Galleries which is situated on level 1.

In response to questioning from Mr Salwan regarding changes in the neighbourhood since the Committee previously looked at an application for these premises, the Applicant advised that previously the population figures quoted had not been accurate. The population figures contained in his application contained no inaccuracies.

The PPC Question the Applicant

In response to questioning from **Professor McNulty**, the Applicant advised that there was no inadequacy in the services provided by existing pharmacies, but the distance the population of Townhead were required to travel to access pharmaceutical services was inadequate. The existing pharmaceutical network did not, in Mr Mouat's opinion, provide adequate services to the population of Townhead.

In response to further questioning from Professor McNulty, the Applicant accepted that the population of Townhead would travel outwith the defined area for many other services and asserted that this was where his argument lay. At present the population of Townhead could only access pharmaceutical services outwith the area and probably close to their GP due to the non-availability of services within their neighbourhood.

In response to final questioning from Professor McNulty, the Applicant advised that in his opinion a reasonable travelling time from a neighbourhood to access pharmaceutical services would be between 10 and 12 minutes along a flat surface. He did not agree that the public transport network within the area was good and pointed to the population's need to travel to Cathedral Street to exit Townhead by public transport.

In response to questioning from **Mr Dykes**, Mr Mouat clarified his comments around his intention to provide pharmacy services in a "non-threatening" environment. Mr Mouat advised that he had not meant

that the existing pharmaceutical network was threatening but rather he meant he would create an environment which would be conducive to attendance.

In response to further questioning from Mr Dykes around the nearness of John Lewis to the Townhead area, Mr Mouat advised that the sign for the store was actually on the end of the car park building and not on the store itself. He reasserted his opinion that the nearest pharmaceutical services were approximately 15-20 minutes from the Townhead area by foot. He disputed Mr Dykes suggestion that the average travelling time by foot to pharmacy services in Glasgow might be in the region of 10 – 12 minutes.

In response to final questioning from Mr Dykes, Mr Mouat agreed that the provision of extended hours increased access to services. He advised that the Boots branch in Queen Street Station had arranged their opening hours in relation to the times of the train services.

In response to questioning from **Professor McKie**, the Applicant advised that the public transport network operating through the Townhead area was not good. In his opinion there was only one bus which travelled through the neighbourhood. This bus operated approximately every 45 minutes.

In response to further questioning from Professor McKie, the Applicant advised that approximately 40 – 45% of the population was of student age. Approximately 20 – 25% were elderly.

In response to further questioning from Professor McKie, the Applicant advised that there was student accommodation in Grafton Street housing approximately 660 students. He was not sure where the remainder of the student population were resident. He disputed the point that many of these students would travel to the area daily and would not necessarily be resident within the area. He pointed to the fact that to be included in the population statistics, students required being resident within the area.

In response to further questioning from Professor McKie, the Applicant advised that his application was different to previous applications as the population figures were exact. He had looked at previous contracts that had been approved for areas with similar populations and he had tried to show that the population of Townhead had to travel unacceptable distances to access pharmacy services. The only difference in the area was the opening of High Street Pharmacy, which he asserted served a different population and which would come under more pressure as the development within the area surrounding this pharmacy was completed. Meanwhile the population of Townhead would still need to travel outwith their neighbourhood to access services.

In response to further questioning from Professor McKie, Mr Mouat advised that the community had supported his case for a pharmacy in the Townhead area. The local MSP felt this would be beneficial for the well-being of the area and supporters did not feel they were well served by the existing pharmacies.

In response to questioning from **Mr Reid**, the Applicant advised that the Townhead area was situated within the G4 post-code. He clarified that the G4 post-code extended beyond the Townhead area. He further advised that he had been provided with the population statistics from Glasgow City Council. They had calculated this based on the exact boundaries and multiplying this with the housing stock ratio and coming up with a figure.

In response to further questioning from Mr Reid, the Applicant advised that he was unsure of the exact number of students within his defined neighbourhood. He knew that an element of them resided in the Grafton Street area, but he was unsure where the remainder lived.

In response to questioning from **the Chair**, the Applicant advised that most of the population of Townhead would access services when visiting their GP, but asserted that this was because they were unable to access services within their own neighbourhood. Having their prescription dispensed at the pharmacy nearest their GP surgery was fine as they had to do this by default, however if there were a pharmacy within their own neighbourhood they would access this for other services such as Minor Ailment Service (MAS) and Public Health Service.

There were no questions to the Applicant from Miss Ward.

The Interested Parties' Case – Mr Colin Fergusson (Colin Fergusson Pharmacy)

Mr Fergusson advised the Committee that he would define his neighbourhood as follows:

North: M8;
East: Castle Street/High Street;
South: Cathedral Street; and
West: North Hanover Street

Whilst there were no pharmacies at the epicentre of this neighbourhood there were many on the periphery that all provided very adequate services. There was, in Mr Fergusson's opinion, no evidence of any change in population in the neighbourhood with no development planned.

Mr Fergusson advised that he was not aware of any complaints regarding current pharmaceutical services. The population of Townhead had to travel outwith the neighbourhood for many other services including: GP services, their weekly shopping and banking services.

Additionally, Mr Fergusson advised that the majority of the population were of student age; a population who were known to be predominantly fit and healthy. The population of pension age was relatively small at 12%.

In terms of public transport there was a bus service passing the proposed premises every 10 minutes from Townhead. The dial a bus service was also available.

Mr Fergusson advised that his pharmacy had operated for over 2 ½ years and was adjacent to a 5 GP practice, which relocated from Townhead and Springburn Health Centres. As a result of this relocation, many patients from Townhead accessed the pharmacy whilst visiting the GP practice or while shopping at the nearby Tesco/Costco/Lidl. The GPs in this practice had patients registered in the G1 and G4 post-codes and nearly half of these patients were students. The students were mobile and would utilise city centre pharmacies near the university.

Mr Fergusson advised that his pharmacy delivered to housebound patients in the Townhead area. He suggested that while the Applicant's supporters may point to the lack of face-to-face contact, his pharmacy provided home visits to patients who required monitored dosage systems (MDS). Where a patient was receiving this for the first time, the pharmacist undertook this visit to ensure the patient was familiar with the service and knew what to do.

Mr Fergusson advised that the application was neither necessary nor desirable as there was already ease of access to pharmacy services for the population in this neighbourhood.

There were no questions to Mr Fergusson from the Applicant, Mr Mohammed or Mr Salwan.

The PPC Question Mr Fergusson

In response to questioning from **Mr Reid**, Mr Fergusson advised that the GP surgery adjacent to his pharmacy in Petershill Road had undertaken a search of their practice system and ascertained that 1,000 patients registered on the practice list were resident within his defined neighbourhood. Of those, 500 were students. He further advised that approximately 20 – 25% patients attending the pharmacy at Petershill Road came from the defined neighbourhood and he had

not received any complaints regarding the long distance from the area to the pharmacy.

In response to questioning from **Professor McKie**, Mr Fergusson advised that around 45% of the population of the defined neighbourhood was of student age.

In response to further questioning from Professor McKie, Mr Fergusson advised that there was an adequate bus service operating within the defined neighbourhood. There was a bus service operating along Petershill Road and along Baird Street, North Hanover Street and along the outskirts of Townhead. This service operated frequently.

In response to final questioning from Professor McKie, Mr Fergusson confirmed that he undertook the first visit to any patient who required an MDS. This visit would provide the patient with an explanation of the system.

In response to questioning from **Professor McNulty**, Mr Fergusson advised that his pharmacy at Petershill Road provided services specifically for students, including: Emergency Hormonal Contraception, Sexual Health, MAS and Public Health Service.

In response to further questioning from Professor McNulty, Mr Fergusson advised that the introduction of the Chronic Medical Service (CMS) would augment the current service. He believed that patients would continue to visit their GP practice.

In response to questioning from **the Chair**, Mr Fergusson advised that there was a base level of uptake of MAS; however he believed this to be an issue in all pharmacies. The uptake of EHC was steady.

There were no questions to Mr Fergusson from Mr Dykes or Miss Ward.

The Interested Parties' Case – Mr Mohammed (High Street Pharmacy and Abbey Chemist)

Mr Mohammed thanked the Committee for providing him with the opportunity of presenting his case.

He advised that his neighbourhood boundaries were: Baird Street, Kyle Street, North Hanover Street, St Mungo Avenue, Grafton Place, St James Road, Stirling Road and Springburn Road.

He directed the Committee's attention to Page 77 of the papers which showed a map of the neighbourhood. The Trongate Heritage Initiative had disputed the figures put forward by the Applicant, asserting that the maximum population of the area was in the region of 3,630. The

area was covered by two datazones, which comprised a larger area than the area commonly known as Townhead and so the population of the Townhead area was more in the region of 3,000.

He advised that both his pharmacies provided a comprehensive range of serviced including: Minor Ailment Service, MDS trays, EHC supply, Blood Pressure Checks, Smoking Cessation advice, Prescription collection/delivery service, Methadone/Suboxone supervision, Head Lice Treatment, Stoma Service, MMyM Medicines Service, Heart Failure Service, Falls/Osteoporosis Service, Keep Well Service, Diabetes Screening Service (High Street Pharmacy), Disulfarim Supervision (High Street Pharmacy), Needle Exchange (Abbey Chemists), Palliative Care Service (Abbey Chemist), C-Card (Abbey Chemist from January 2010). The only service which was not provided by either of the two pharmacies was the provision of domiciliary oxygen and Mr Mohammed advised that he would be willing to provide this service from High Street Pharmacy if the Health Board deemed this to be necessary.

Mr Mohammed advised that the Number 19 bus operated in the area. Additionally the proposed premises were in close proximity to Buchanan Bus Station where a number of bus services operated from.

High Street Pharmacy had opened in the time since previous applications and this had brought additional services to the area. Prescription volumes were increasing each month and the pharmacy had capacity to deal with more. In conclusion, Mr Mohammed advised that there was no inadequacy of pharmaceutical services in the neighbourhood and therefore that the application should be refused.

There were no questions to Mr Mohammed from the Applicant, Mr Fergusson or Mr Salwan.

The PPC Question Mr Mohammed

In response to questioning from **Professor McNulty**, Mr Mohammed advised that both his pharmacies provided all services expected by the student population, including EHC and travel information. The Student Health Service situated at Strathclyde University often referred patients to High Street Pharmacy. Mr Mohammed was keen to initiate a similar arrangement with Glasgow Caledonian University.

In response to questioning from **Mr Dykes**, Mr Mohammed confirmed that he had developed a business plan for High Street Pharmacy and that the business plan was going well. He advised that every business needed time to establish itself and at the moment High Street Pharmacy remained in this phase and signs were positive.

In response to final questioning from Mr Dykes, Mr Mohammed

advised that his leaflet drop within the Townhead area was not an admission of the neighbourhood's need for services, but rather a business necessity. He had undertaken a leaflet drop in other neighbouring areas and saw it as something he would undertake periodically.

In response to questioning from **Mr Reid**, Mr Mohammed advised that there was a significant distance between the Townhead area and Abbey Chemists in Trongate. He reiterated however that Abbey Chemists was situated on a main shopping thoroughfare that the population of Townhead would travel to as part of their usual shopping patterns. The pharmacy had been in this location for a long time and had worked hard to establish good face to face communication with patients, which Mr Mohammed felt had made the pharmacy successful.

In response to final questioning from Mr Reid, Mr Mohammed confirmed that he provided a delivery service to the Townhead area on Mondays, Wednesdays and Fridays. This could be increased if needed.

In response to questioning from **the Chair**, Mr Mohammed confirmed that he provided a similar service to Mr Fergusson for those patients requiring MDS trays for the first time.

There were no questions to Mr Mohammed from Professor McKie or Miss Ward.

The Interested Parties' Case – Mr Neeraj Salwan (Townhead Health Centre Pharmacy)

Mr Salwan advised the Committee that lots had been made of neighbourhood and population. The Board could take a view that previous contracts had been granted for populations ranging from 1,200 to 5,000; Mr Salwan suggested that these contracts would more likely have been granted in areas of rurality and not in suburban areas.

He advised that the Applicant's proposed premises were surrounded by existing pharmacies all providing adequate services to the population. With this level of service Mr Salwan's argument was that the population of Townhead had good access to pharmaceutical services.

He disagreed with the Applicant's assertion that the nearest pharmacy was an 18-20 minute walk away and calculated the walking time to be in region of 10 minutes from Townhead to Buchanan Galleries. Some areas of the Applicant's neighbourhood i.e. St James Road, St Mungo Avenue were closer to Townhead Health Centre Pharmacy.

He invited the Committee to consider what the Applicant had said

about the population of the neighbourhood. It comprised mostly younger people who were mobile and could access services in the absence of a good public transport service. The rest of the population would travel to other areas as part of the every day fabric of their life where there were numerous pharmacies.

Mr Salwan advised that the Applicant had not shown inadequacy. There were plenty of services. There had been no complaints to the Health Board and nothing had changed since the previous applications had been considered and refused. He advised that Townhead Health Centre Pharmacy employed an additional part-time pharmacist on three days per week. This arrangement allowed the full time pharmacist to undertake additional services e.g. domiciliary visits.

He considered that the Applicant's neighbourhood should be extended as the population accessed services outwith Townhead on a daily basis for banks, GPs and other services. Pharmaceutical services could easily be accessed at the same time.

He advised that Townhead Health Centre Pharmacy providing all contract services. It employed two checking technicians and three dispensers. It had lost business over the last few years with GP practices moving outwith the Health Centre and the opening of High Street Pharmacy. An additional pharmacy contract would have an effect on the services provided by the pharmacy; not to an extent where it would close, but enough to impose a staffing review.

There were no questions to Mr Salwan from the Applicant, Mr Mohammed or Mr Fergusson.

The PPC Question Mr Salwan

In response to questioning from **Professor McNulty**, Mr Salwan confirmed that Townhead Health Centre Pharmacy was not open on Saturdays. He advised that there were numerous neighbouring pharmacies open at that time.

In response to questioning from **Mr Dykes**, Mr Salwan disagreed that the business lost to other pharmacies in the neighbourhood had been caused by the long waiting times at Townhead Health Centre Pharmacy; rather he felt that patients might consider the location of the other pharmacies to be more convenient.

In response to questioning from Mr Dykes around the current environment within Townhead Health Centre Pharmacy, Mr Salwan advised that it wasn't always so cluttered or unwelcoming. Due to the time of year the pharmacy was busier than usual with patients requesting more than usual supply of drugs and medication.

In response to final questioning from Mr Dykes as to any reasons why the population of Townhead didn't need a pharmacy, Mr Salwan advised that the granting of a new contract would be based on convenience only. There had been no complaints to the Health Board about the level of service to the area, despite the Applicant's letters of support and a pharmacy at the proposed premise would be convenient for the population rather than necessary.

There were no questions to Mr Salwan from Professor McKie, Mr Reid, Miss Ward or the Chair.

The Interested Parties Sum Up

Mr Fergusson advised that the population of the neighbourhood included many students who were very mobile. There were adequate pharmaceutical services available to the residents of the neighbourhood in close proximity to the proposed premises. Transport services in the area were good and there was a new pharmacy which had opened in the surrounding area in the last couple of years. The application was not necessary or desirable.

Mr Mohammed advised that if the population plan provided by the Trongate Heritage Trust was accepted as accurate then the population of the neighbourhood was less than that put forward by the Applicant. All existing pharmacies in the area provided a full range of services and these services had improved with the addition of High Street Pharmacy. Access to services was good with a good public transport service in the area. Most pharmacies provided a collection and delivery service and in Mr Mohammed's opinion there was no reason to award this contract.

Mr Salwan advised that in applying the legal test, the Committee should consider the existing service to be adequate. The Applicant had not shown inadequacy for the population of the neighbourhood. There had been no complaints, the population was young and mobile, and there had been no evidence of access problems. The population travelled outwith the area every day to access other services beyond the boundaries of the Applicant's defined neighbourhood. These boundaries were not difficult to cross (excluding the M8). Two National Appeals Panels had looked at the same application and had rejected it. Mr Salwan invited the PPC to do the same.

The Applicant Sums Up

Mr Mouat asserted that he applauded his fellow pharmacists in employing a second pharmacist to deal with dosette boxes. He advised that the level of objection showed need for a pharmacy service in the neighbourhood as he doubted that the existing contractors would have objected if there had not been business to be gained.

He advised that regardless of whose population statistics the Committee accepted, there were no pharmacies within the neighbourhood as defined. There was a steep incline from Cathedral Street which hindered access to existing services, along with the fly-over and traffic lights. This made access to services inadequate for the population who were required to travel outwith the area, over natural boundaries to access services. The fact that the GP practices were outwith the area meant that by default, the population had to access pharmacy services outwith their neighbourhood. A pharmacy in the neighbourhood would provide a more local service. He also intended to forge links with Glasgow Caledonian University and provide a similar service to that described by Mr. Mohammed. He felt sure that access to MAS would increase as patients would utilise the service more frequently than they did in pharmacies outwith the neighbourhood.

He advised that a local pharmacy would be best served to provide services to the local population and as such the application should be granted.

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

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

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

The PPC took into all account all written representations and supporting documents submitted by the Applicant, the Interested Parties and those who were entitled to make representations to the PPC, namely:

- a) Chemist contractors within the vicinity of the applicant's premises;
- b) The NHS Greater Glasgow & Clyde Area Pharmaceutical Community Pharmacy Subcommittee;
- c) The Greater Glasgow & Clyde Area Medical Committee (GP Subcommittee).

The Committee also considered;-

- d) The location of the nearest existing pharmaceutical services;
- e) Demographic information regarding the G4.0, G1.1 and G1.2 post-code areas;
- f) NHS Greater Glasgow and Clyde plans for future development of services; and
- g) A tabled letter from the Applicant from the local MSP.

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. Taking all information into consideration, the Committee considered that the neighbourhood should be defined as follows:

North: Baird Street and Kyle Street;

South: by St Mungo's Avenue (to include the housing on Grafton Place) to its junction with St James Road to Castle Street.

West: North Hanover Street from its junction with Kyle Street to its junction with Killermont Street;

East: the housing in Stirling Road, McAslin Street, Kennedy Street falling to the west of the A803 Springburn Road and the M8 slip road.

The Committee felt that this was distinct neighbourhood. On the north Baird Street and Kyle Street both marked a change from residential housing to commercial buildings and shortly thereafter, the M8 motorway. On the west, North Hanover Street marked a change from residential housing to commercial and educational facilities, including Glasgow Caledonian University, Buchanan Bus Station and Buchanan Galleries shopping centre. On the south, St Mungo's Avenue, Grafton Place and St James Road marked a change from residential housing to commercial and educational facilities, including the College of Food and Technology and the University of Strathclyde. The boundary to the east was marked by the end of residential housing and the commencement of an area of rough ground and a series of main arterial roads and slip roads forming junction 15 of the M8 motorway

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.

Having considered the information provided by the Applicant and the presentation before them at the hearing they were not satisfied that the Applicant had demonstrated that an inadequacy of services existed in the area.

The Committee noted that the Applicant had based his case on the perceived lack of services outwith the interpretation of "adequate access".

Within the neighbourhood as defined by the PPC there were no pharmacies, however the Committee noted that there were three pharmacies in close proximity within easy reach of the population of Townhead. These pharmacies provided a full range of pharmaceutical services including supervised methadone and domiciliary oxygen. The Committee considered that the level of existing services ensured that satisfactory access to pharmaceutical services existed to the 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 Member of the Committee 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 and in the circumstances, it was the unanimous decision of the PPC that the application be refused.

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

5. APPLICATIONS STILL TO BE CONSIDERED

Contracts
Supervisor –
Community
Pharmacy
Development

The Committee having previously been circulated with Paper 2009/38 noted the contents which gave details of applications received by the Board and which had still to be considered. The Committee agreed the following applications should be considered by means of an oral hearing:

Mr Neeraj Salwan, Level 1 Fraser Building, 65 Hillhead Street, University of Glasgow, Glasgow G12 8QF

The Committee noted that they had previously looked at a similar application in August 2008. After comprehensive discussion the Committee asked Mrs Glen to develop a discussion paper for presentation at the next meeting which would look at extending the time frame for considering applications by oral hearing.

AGREED/-

That the Contracts Manager would develop a paper for discussion at the next meeting of the Committee which would explore extending the current arrangements for oral hearings.

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

The Committee having previously been circulated with Paper 2009/39 noted the contents which gave details of matters considered by the Chair since the date of the last meeting:

Change of Ownership

Case No: PPC/CO07/2009 – Web Pharmacy Ltd, 119 Cleveden Road, Glasgow G12 0JU

The Board had received an application from Web Pharmacy Ltd for inclusion in the Board's Pharmaceutical List at a pharmacy previously listed as Lloydspharmacy at the address given above. The change of ownership was effective from 1st October 2009.

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

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

HOMOLOGATED/-

7. NATIONAL APPEALS PANEL DETERMINATION

The Committee having previously been circulated with paper 2009/40 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:

Boots UK Ltd – 10 Canal Street, Renfrew PA4 8QD (Case No: PPC/INCL02/2009)

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

NOTED/-

8. ANY OTHER COMPETENT BUSINESS

None.

9. DATE OF NEXT MEETING

To Be Confirmed.

The Meeting ended at 4.00p.m.