

NOT YET ENDORSED AS A CORRECT RECORD

Pharmacy Practices Committee (04)

Minutes of a Meeting held on
Thursday 17th February 2011 in
The Silver Room, Smith's Hotel, 3 David Donnelly Place
Kirkintilloch G66 1DD

PRESENT:	Peter Daniels	Chair
	Mr Alex Imrie	Deputy Lay Member
	Councillor Luciano Rebecchi	Deputy Lay Member
	Mr Stewart Daniels	Deputy Lay Member
	Dr James Johnson	Non Contractor Pharmacist Member
	Mr Alasdair MacIntyre	Contractor Pharmacist Member
IN ATTENDANCE:	Janine Glen	Contracts Manager – Community Pharmacy Development
	David Thomson	Deputy Lead - Community Pharmacy Development

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

ACTION

No member declared an interest in the application to be considered.

1. APOLOGIES

There were no apologies.

Section 1 – Applications Under Regulation 5 (10)

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

Prior to the consideration of the application, the Chair advised those present that the written submission made by the NHS GG&C Area Pharmaceutical Community Pharmacy Sub-committee would not be considered as part of the supporting documentation for the application. Due process had not been observed in the submission and as such it could not be used by the Committee and had been removed completely from the supporting papers.

Case No: PPC/INCL10/2010

Mr Ross Ferguson – 9 Alexandra Avenue, Lenzie, G66 5BG

The Committee was asked to consider an application submitted by Mr Ross Ferguson to provide general pharmaceutical services from premises situated at 9 Alexandra Avenue, Lenzie G66 5BG under Regulation 5(10) of the National Health Service (Pharmaceutical

Services) (Scotland) Regulations 2009 as amended.

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

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

The hearing was convened under paragraph 3 (2) of Schedule 3 to the National Health Service (Pharmaceutical Services) (Scotland) Regulations 2009 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 Ross Ferguson ("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 Charles Tait (Boots UK Ltd) and Mr Naveed Ahmad (Pulse Pharmacy) ("the Interested Parties").

Prior to the hearing, the Panel had collectively visited the vicinity surrounding the Applicant's proposed premises, existing pharmacies, GP surgeries and facilities in the immediate area and surrounding areas following: High Street, Redbrae Road, New Dyke Road, Langmuir Road, Merkland Drive, Waterside Road, Loch Road, Woodilee Village, Greenhead Avenue, Victoria Road, Alexandra Avenue, Beechmount Road, Kirkintilloch Road, Garngaber Avenue, Moncrieff Avenue, Douglas Avenue, Laurel Avenue, Kirkintilloch Road, Townhead and Catherine Street.

The Committee noted that the premises were constructed and were currently empty. The pharmacy area was not yet fitted out. The Committee had not gained access to the premises.

The procedure adopted by the Pharmacy Practices Committee ("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 were then asked to make their submissions one by one. After each submission, there followed the opportunity for the Applicant and the PPC to ask questions. The Interested Parties and the Applicant were then given the opportunity to sum up.

The Applicant's Case

The Applicant thanked the Committee for giving him the opportunity to present his application. He advised that he currently owned a pharmacy in Milton of Campsie around two miles from the proposed premises, which he opened over six years ago. As such he was familiar with all the surgeries in Kirkintilloch as he operated a prescription pick up and

delivery service in the area.

The said that this was an unusual application in that he was not going to define a neighbourhood so that it had no pharmacy in it, and then argue that services must be inadequate. The validity of the application was not dependent on the subjective opinion on the boundaries of the neighbourhood, but on the more important question of the adequacy of the existing service.

Mr Ferguson suggested that the premises were located in the town of Lenzie; however he believed that Lenzie was, in fact, made up of two distinct neighbourhoods. The belief was based on a number of factors.

1. The most obvious was that the town of Lenzie was split in two by the railway line with only two access routes between the two halves; one of which was so narrow that only one car could pass through at a time. He understood that it was possible that this route would be closed as it was earmarked for closure after completion of the new link road. This would leave only one access.

2. There was an obvious difference in housing type. The majority of homes in the southern half of Lenzie were built much later than the traditional sandstone villas of North Lenzie. Mr Ferguson defined his neighbourhood as:

North: the railway line;

West: the B812 trunk road;

South: by a line drawn from the B812 past the southern edge of the Gadloch through Lenzie Golf course and south of the old Lenzie hospital;

East: Joining the B819 in the east.

Until recently this was very similar to the boundary for council wards which were named South Lenzie and North Lenzie. The data zones which made up South Lenzie were: SO1001453, SO1001457, SO1001464 and SO1001467.

Mr Ferguson advised that some of the Interested Parties had questioned the very existence of the area referred to in his application as South Lenzie; however he felt that the definition of the neighbourhood was not the fundamental issue on which the application depended, even though he believed there was a neighbourhood called South Lenzie.

The Applicant advised that the existing pharmacy services provided to South Lenzie were the same as those provided to North Lenzie: the Boots Pharmacy in Lenzie, as this was the only pharmacy in Lenzie. He felt though that appearances could be deceptive. A Freedom of Information request for prescription numbers dispensed at pharmacies in the wider area showed that Boots Pharmacy in Lenzie only dispensed an annual average of 4,200 per month.

Since the population of Lenzie was around 11,000 and since the national average number of prescriptions generated per person per month is 1.1 per person, you would expect the population of Lenzie to be generating in the region of 12,000 items per month. Even allowing for demographic variation, this is more than the number being dispensed at the Boots Pharmacy, and quite clearly demonstrated that almost twice as many residents did

not have their prescriptions dispensed at Boots as do.

The Applicant questioned where these residents accessed pharmaceutical services. It was of course not possible to say for certain, but he assumed that the majority of the 2/3 of the population of Lenzie must obtain pharmaceutical services at NHS pharmacies in the neighbouring town of Kirkintilloch.

Mr Ferguson stated that according to Scottish Neighbourhood Statistics (SNS), the population of the town of Lenzie was 10,366. A reasonable estimate of the population of his proposed neighbourhood was 3,448 based on the 2009 population estimate of the four relevant data zones.

The completion of the new Woodilee housing development would increase the number of houses by 900 homes. Housebuilders Persimmon, Miller, Redrow and Cala were currently advertising four and five bedroom houses for sale on the site. Using the average occupancy rate of 2.3 people per household, the population would increase by 2,070 bringing the total Lenzie population to around 12, 436. The occupancy rate in Lenzie was higher than average at 2.7 so this was a conservative estimate.

In the proposed neighbourhood there were a variety of shops and restaurants, a part time GP surgery, a dental surgery, a library and Millersneuk Primary School, but no pharmacy.

The neighbourhood was not a deprived area. According to a World Health Organisation report, a child born in Lenzie had a life expectancy of 82 years, which was 28 years more than in the deprived, inner-city east end Glasgow area of Calton which was only eight miles away.

The Applicant reminded the Committee that lack of significant deprivation did not preclude the need for a pharmacy.

There were, in the Applicant's opinion, two significant demographic factors which must be considered when assessing the need for a local pharmaceutical service; the first was deprivation, and the second was age.

As previously mentioned, life expectancy in Lenzie was higher, so the impact of the ageing population and primary care services would increase. There were already many parts of both North and South Lenzie where the population of those above pensionable age was higher than average. This issue was going to worsen and could cause pressures on demand for healthcare services as mentioned in a study published in the BMJ (British Medical Journal). The impact could be felt more in areas like Lenzie.

Demand for future care for the elderly had been identified in Lenzie and there were plans for a Care Home, a Resource Centre and associated facilities all for older people, which might include a development of sheltered housing at the former Lenzie Hospital in south Lenzie; according to the Local Plan.

Mr Ferguson did not believe that pharmaceutical services were adequate in South Lenzie or North Lenzie. Lenzie was a relatively affluent commuter town, with low density housing, spread across a wide geographic area. The primary mode of transport for residents of

Lenzie was the car. In 2001 only 11% of households in Lenzie didn't have a car, against a Scottish average of 34%.

If you considered the "patient journey" for those residents of Lenzie who relied on their car to go about their daily business, how would they get to a pharmacy? The only community pharmacy available to the residents of South and North Lenzie in Lenzie was the small Boots, which was unfortunately located in a part of town near which it was almost impossible to park.

While there was a large car park on each side of the railway line, due to the numbers of commuters (3,000 per day), these spaces were almost always occupied. There were an additional three spaces directly outside the row of shops which included the Boots Pharmacy, but these were rarely available. The simple fact was, for a car user the Boots in Lenzie was almost impossible to park near, and this was why it was clearly not the pharmacy of choice for the vast majority of the population.

Mr Ferguson asked the Committee to consider how they used their car and asked would they ever park half a mile away from a small shop they wanted to visit? The answer most simply was no. There were no adjacent shops to make it worthwhile either as the local supermarket was a considerable distance away on the other side of the railway line.

This meant that a resident of South Lenzie or indeed any part of Lenzie would have a four mile round trip to Kirkintilloch if they wanted to access a pharmacy. This was known from the prescriptions load figures which showed that twice as many people used a pharmacy outwith Lenzie as used the pharmacy in Lenzie.

Mr Ferguson advised that "adequacy of pharmaceutical services" must be examined with due consideration to the specific needs of the population in question. In a rural area with no local facilities, residents would be likely to have a car or be a regular bus user and would be accustomed to travelling some distance to access services such as a pharmacy. This was part and parcel of rural life. In a densely populated urban area, car ownership may be low and patients would need services "on their doorstep" especially in more deprived urban areas. In less densely populated suburbs however, like Lenzie, residents used their car and they had a right to an easily accessible pharmacy within their suburb, or suburban town. This is what marked Lenzie as being unusual.

Mr Ferguson advised that if the Boots pharmacy was larger and had anything approaching adequate parking facilities, he wouldn't have made the application. As it stood, the Boots was not being used to anything like the extent that one would expect in a town the size of Lenzie. He made no criticism of the quality of staff, or level of service that Boots provided to those who could easily get to it, but the unfortunate fact remained that the existing Boots pharmacy in Lenzie did not adequately meet the needs of a town the size of Lenzie, and this inadequacy was clearly evident in the low numbers of prescriptions being dispensed at the pharmacy.

The evidence that the existing service was inadequate was compelling. The pharmaceutical service which the PPC must assess for adequacy was not the Boots in Lenzie; it was the pharmacies in Kirkintilloch which clearly constitute the existing service.

Mr Ferguson then went on to make a few comments about the location of the proposed premises, and their apparent proximity to the other pharmacy in Lenzie.

The Boots Pharmacy and the proposed premises were on the very periphery of their respective neighbourhoods. On a map, they appeared very close; however the walk from the proposed premises to the Boots was quite irrelevant to the question of the adequacy of services in the neighbourhood. Where this walk might be considered of any importance was where a patient had visited the surgery and required the dispensing of a prescription.

The “patient’s journey” showed that they would likely drive from their home to the surgery. They parked outside, or nearby. Fortunately parking on the south side of the railway line was set to improve as dedicated parking for shoppers would soon be introduced when new street parking restrictions are implemented to prevent all day commuter parking. Patients then needed to walk down a narrow lane. This would not be pleasant in dark, wet, slippery conditions in the depth of winter; with the footbridge being inaccessible to many patients such as parents with prams and the elderly. The Applicant imaged that for these vulnerable groups this journey would be one they would want to avoid. They would of course need to walk back to their car, this time up the narrow path.

In fact even if a patient hadn’t visited their GP - since the parking on the opposite side of the railway was almost non-existent – this was the journey most vehicle users would take to access the Boots Pharmacy.

This was, in the Applicant’s opinion, inadequate and he reiterated this was why residents did not use the pharmacy in any great volume.

With a pharmacy located next to the GP surgery, with adequate parking, residents of Lenzie would no longer feel the need to make a longer car journey to Kirkintilloch to access a community pharmacy. They would, at last, benefit from an adequate pharmaceutical service.

Mr Fergusson averred that the pharmacy contract was based on services which would require more time to be spent with patients via the Chronic Medical Service (CMS) and Minor Ailment Service (MAS). These services would place increased demands on the pharmacist’s time and so, to ensure that patients were able to access these services to full advantage, the addition of a pharmacy in South Lenzie would complement the work of the existing pharmacy in North Lenzie.

The Applicant advised that by dividing the population of Scotland by the number of pharmacies, you arrived at a figure of 4,500 persons to every pharmacy. This was a much abused figure at both PPC and NAP (National Appeals Panel) hearings; however the Applicant advised that the “average” figure was simply that – an average. There would be a range of circumstances which would make up this average – in some areas there would be less people per pharmacy, in some there would be more people per pharmacy. A “higher than average” number of people being served by an existing pharmacy didn’t automatically mean that services were inadequate.

In Lenzie the figure was one pharmacy per 11,000 persons and would soon be one pharmacy for 13,000. This was, according to the Applicant, an outlier and a variation from

the average. However it did not necessarily mean that services were inadequate.

If the existing pharmacy was spacious, and had car parking facilities and enough room for all the staff required to adequately meet the needs of a population of 13,000 then it could possibly be justified as providing adequate services. However this was not the case in Lenzie.

The existing pharmacy was small and had no parking nearby and this was why it had such low dispensing figures.

Pharmaceutical services in South Lenzie were inadequate. Pharmaceutical services in North Lenzie were also inadequate. The granting of the application would, in the Applicant's opinion, secure an adequate pharmaceutical service in the neighbourhood in which the proposed premises were located, and, whilst not part of the legal Test – the granting of the application would also secure an adequate pharmaceutical service in the neighbourhood adjacent to the neighbourhood in which it was located.

The Interested Parties Questions the Applicant

In response to questioning from **Mr Tait**, the Applicant advised that some elements of the population might have difficulty using the footbridge over the railway. In further expansion he advised that he considered those above pensionable age to be elderly.

In response to questioning from **Mr Ahmad**, the Applicant advised that consideration of the type of services he would provide was not part of the legal test; however he intended to provide all core services required under the pharmacy contract and also some new services similar to those provided from his other pharmacy in Milton of Campsie.

The PPC Question the Applicant

In response to questioning from **Dr Johnson**, the Applicant confirmed that he would provide a collection and delivery service from the proposed premises. He advised that he had already established a good relationship with the GP practices in Kirkintilloch.

In response to further questioning from Dr Johnson, the Applicant accepted that this would mean him working outwith his defined neighbourhood. He advised that the GP surgery next to the proposed premises was a branch surgery of a main practice located in Kirkintilloch. The branch surgery was used mainly to accommodate urgent appointments; however the prescriptions would be generated from the Kirkintilloch practice.

In response to final questioning regarding the implication made in his presentation that Boots Pharmacy did not provide many additional services, the Applicant advised that his pharmacy in Milton of Campsie offered most of the additional services. It would be his intention to replicate this model in the proposed premises.

In response to questioning from **Mr MacIntyre** regarding the south boundary to his neighbourhood, the Applicant advised that this was his defined boundary and not the Council's. The Council's boundary had been slightly different. He had drawn a line just beyond the Gadloch taking in Lenzie Golf Course, but not including Gadloch Avenue. He

had not done this to alienate the residents in this area, but merely because of the golf course.

In response to further questioning from Mr MacIntyre, the Applicant reiterated his assertion that the railway line was a boundary and not only to those living alongside it. He pointed to the fact that there were only two access routes across the railway, and one of these was due for closure. He further advised that he did not know the date for this. Some residents had expressed objections to the plans and the intended date of closure was not known as yet. When advised that the Member was seeking to establish if there was a possibility this change would happen, the Applicant advised that there was a good possibility.

In response to final questioning from Mr MacIntyre, the Applicant advised that works to increase the number of car parking spaces on the south side of the railway would be undertaken as part of the overall schedule of works being undertaken in relation to the new road.

In response to questioning from **Mr Thomson**, the Applicant advised that he didn't agree that the works to increase the number of car parking spaces weakened his case that access to the Boots Pharmacy was currently inadequate. He advised that this would only be the case if the spaces were available for general use, but they would mostly be used by commuters. In addition, in relation to the proposed increase in population, the number of additional spaces was relatively low. He further confirmed that he had not looked at the parking situation at the weekend when there was no commuter traffic.

In response to further questioning from Mr Thomson, the Applicant confirmed that the Woodilee housing development was outwith his defined neighbourhood but reiterated that the total population of Lenzie as a whole would increase which would result in an increase in the demand for services across the whole area.

In response to further questioning from Mr Thomson, the Applicant advised that he was not aware of the body of opinion expressed by the residents of Gadloch if they were excluded from South Lenzie.

In response to final questioning from Mr Thomson, the Applicant was not aware whether all pharmacies in Kirkintilloch operated a collection and delivery service to Lenzie.

In response to questioning from **Mr Stewart Daniels**, the Applicant estimated the population of his neighbourhood to be in the region of 3,448.

In response to further questioning by Mr Stewart Daniels, the Applicant advised that the size of the proposed premises was approximately 700 sq ft. He felt this to be a sufficient space to easily convert into a community pharmacy.

In response to questioning from **Councillor Rebecchi** regarding the pharmacies in Kirkintilloch and whether they delivered prescriptions, the Applicant advised that the majority of them would operate such a system.

In response to further questioning from Councillor Rebecchi regarding the proposal to close one of the access roads over the railway, the Applicant advised that he did not know

when this was going to happen.

In response to further questioning from Councillor Rebecchi, regarding the proposed development of houses in the area and whether the current economic downturn would affect this, the Applicant advised that the housebuilders already had planning permission for the total build. Work was underway and houses had been sold.

In response to final questioning from Councillor Rebecchi regarding the surgery adjacent to the proposed premise, the applicant advised that he had heard that the practice was planning to extend their service provision from the branch surgery. It was likely that they would increase the hours of opening and would make this a more permanent surgery.

In response to questioning from **the Chair** regarding whether he felt there would be a cutoff point in terms of time, where a person would rather put up with inadequate parking in order to save themselves a longer trip into a nearby town to access services, the Applicant advised that at the moment residents in Lenzie had little choice but to travel into Kirkintilloch to access services due to the lack of parking facilities adjacent to the pharmacy in Lenzie. He did not feel there was a threshold, but felt that if there was a necessity to travel further to access services because of some impediment then residents would be inclined to do this as they had no choice.

The Interested Parties' Case (Mr Charles Tait – Boots UK Ltd)

Mr Tait advised that he was not sure there were such areas as North Lenzie and South Lenzie. He agreed the development of Woodilee Hospital would result in an increase in the population; however this would only replace the population which had left the area since the last census. He reminded the Committee that Lenzie was a commuter town with little service provision within it. He agreed with the Applicant's assertion that an element of the population did not use Boots Pharmacy in Lenzie and averred that this was due to the location of the GP surgeries being in the neighbouring town of Kirkintilloch. Most prescriptions continued to be dispensed from pharmacies close to the surgeries.

He advised that the population in Lenzie had been decreasing since 2001. It was now approximately 10,000. The area lay in the top ten least deprived areas according to the Scottish Index of Multiple Deprivation statistics. In addition, the area lay in the top ten areas for income and health. Around 80% of the population owned more than one car and a significant proportion owned three or four.

He advised the Committee that the settlement of Kirkintilloch and Lenzie had a population of 30,000 according to the 2001 census. The population of the settlement currently lay in the region of 26,500. The vast majority of residents within the settlement accessed service provision in Kirkintilloch. Mr Tait had never been keen on defining a neighbourhood with 20,000 residents, however in this instance it was clear that residents within Lenzie need to travel to Kirkintilloch to access most of the service provision they required as part of their daily lives. The boundaries between the two areas were easily crossed and in this instance it seemed reasonable to define the neighbourhood as the settlement of Kirkintilloch and Lenzie. The settlement was self sufficient and residents did

not need to travel outwith the settlement to access any services.

He advised that parking in the area of Lenzie was not good. As such the population would chose to access services elsewhere or park in side streets to allow them to avail themselves of the limited services available in the area. Most of the interaction with other areas was undertaken by car and access to other services outwith Lenzie was also by car.

The Boots Pharmacy in Lenzie operated a collection and delivery service, monitored dosage trays, MAS, methadone and CMS. The pharmacy was convenient for some people and others would chose to go elsewhere as it was more important for them to access service provision where they accessed other services.

He advised that adequacy was not a matter of raw numbers or statistics. The population of Lenzie was fairly affluent. There was a significant population around the age of 60, which was not, in his opinion, elderly. The area was not deprived in any way. The population had easy access to cars and was not income deprived, so those who did not have access to a car could easily pay for a taxi. There was no real evidence of inadequacy.

He advised that the surgery adjacent to the proposed premises operated on a part-time basis and provided limited services. In his opinion, the current pharmacies in the settlement area of Kirkintilloch and Lenzie had capacity to take on more services and patients. There was therefore no current inadequacy and the existing pharmacies were well placed to accommodate any additional demand generated by the new housing developments.

The Applicant Questions Mr Tait

In response to questioning by **the Applicant**, Mr Tait confirmed that the surgery adjacent to the proposed premises operated three days per week.

In response to further questioning from the Applicant, Mr Tait advised that it was awkward to define the neighbourhood in which the Boots Pharmacy was situated. The town of Lenzie had a more affluent demographic than nearby Kirkintilloch even though there were relatively few areas of deprivation in Kirkintilloch and these were towards the north end of the town. He did not feel there was any significant difference between the areas of Lenzie and Kirkintilloch. He did not feel the railway line could be described as an impediment to services access.

In response to further questioning from the Applicant regarding whether the residents of Kirkintilloch and Lenzie would consider themselves neighbours, Mr Tait advised that they accessed their day to day services from the same place. People might travel into this area from different neighbourhoods, but the demographics were relatively the same.

In response to further questioning from the Applicant regarding the proposed changes to parking, Mr Tait advised that these plans were some time away and in his opinion, the restrictions wouldn't prevent people from parking in the side streets.

In response to further questioning from the Applicant, Mr Tait advised that he did not agree

that the population of Lenzie was such that it needed more than one pharmacy. He advised that if a pharmacy dispensed a high volume of prescriptions and was properly resourced with staff and facilities to accommodate this, then no inadequacy existed.

In response to final questioning from the Applicant regarding comments made by him at a previous NAP hearing where Mr Tait stated that a population of between 6,000 and 7,000 needed more than one pharmacy, Mr Tait advised that a completely different set of circumstances prevailed in this case.

There were no questions to Mr Tait from **Mr Ahmad**.

The PPC Question Mr Tait

In response to questioning from **Mr Stewart Daniels**, Mr Tait advised that he was not aware how many prescriptions were generated from the surgery adjacent to the proposed premises. He thought most would be generated from the main surgery in Kirkintilloch and not from the branch surgery itself.

In response to questioning from **Mr Thomson** regarding the layout of the pharmacy in Lenzie and whether it could accommodate any increase in demand from the increased population, Mr Tait advised that Boots UK Ltd were continually reviewing their properties. The Lenzie branch was currently under review.

In response to further questioning from Mr Thomson, Mr Tait advised that the pharmacy consultation room was not often used.

In response to questioning from **Mr MacIntyre**, Mr Tait reiterated his view that the railway line was not a boundary because most residents in Lenzie had access to a car and moved about the area freely. Those with no access to a car were sufficiently able to access services by taxi. Moving about the area was not an issue.

In response to further questioning from Mr MacIntyre regarding access to the Boots pharmacy on foot, Mr Tait advised that there were three access points across the railway. While the route using East Garngaber Road was not used as much, due to the construction of the new trunk road, the other two access points were used. The footbridge was only used by a small proportion of the population.

In response to questioning from **Dr Johnson**, Mr Tait advised that Boots undertook some delivery into South Lenzie, however much of the population left the area during the day to go to work and were able to access services outwith the area.

In response to questioning from **Mr Imrie**, Mr Tait advised that the buses run through the area approximately every 20 minutes.

In response to questioning from **the Chair**, Mr Tait advised that parking in the side streets was, in his opinion, relatively easy if parking for a short period of time.

In response to further questioning from the Chair regarding the potential parking restrictions, Mr Tait advised that he was not aware of the timescale for implementing these

restrictions.

In response to further questioning from the Chair regarding his definition of neighbourhood, Mr Tait advised that he felt the neighbourhood to be the settlement of Kirkintilloch and Lenzie. He was of the opinion that there was little difference between the two areas and they were not easily distinguishable except for the local authority signs placed between the two areas.

In response to final questioning from the Chair, Mr Tait advised that a resident of the area described as South Lenzie would never say they were from South Lenzie. They would describe themselves as a resident of Lenzie.

There were no questions to Mr Tait from **Councillor Rebecchi**.

The Interested Parties' Case (Mr Naveed Ahmad – Pulse Pharmacy)

Mr Ahmad advised that he agreed that the town of Lenzie was split by the railway line but that this did not necessarily mean it split the people of Lenzie into belonging to two different neighbourhoods. Mr Ahmad knew people from Lenzie and they didn't consider themselves as being from either North or South Lenzie but from Lenzie.

He advised that the amenities in Lenzie were used by everybody. The neighbourhoods contained the same class of people, and houses were of a similar build.

Mr Ahmad did not feel there was inadequate pharmaceutical provision in the area of the proposed premises. Boots Pharmacy served the community as well as the six current pharmacies in Kirkintilloch. The Applicant didn't appear to be bringing anything new to the area and Boots Pharmacy already provided all services required by the residents in the area. In addition other services were already covered by the other pharmacies including Palliative Care.

He did not agree that the increased population expected from the new housing developments would generate such a demand for services that the existing network would be unable to cope. He accepted that not all of this population would access services from the Boots Pharmacy; however the expected residents would be unlikely to be those elements of the population who traditionally accessed pharmacy services regularly.

Mr Ahmad advised that the population was required to travel outwith the neighbourhood to access other services. If they were able to make this journey for food, banking and other services they would also have access to pharmaceutical services.

He advised the Committee that there was rarely an occasion where his staff couldn't meet the needs of a patient. They strived to offer the best service they could and he felt the people of Lenzie, as a whole, were well taken care of.

The Applicant Questions Mr Ahmad

In response to questioning from **the Applicant**, Mr Ahmad agreed that his pharmacy was approximately three miles from the proposed premises. He further confirmed that in

serving the population of Lenzie he was operating outwith his own neighbourhood.

There were no questions to Mr Ahmad from **Mr Tait**.

The PPC Question Mr Ahmad

In response to questioning from **Mr Imrie**, Mr Ahmad advised that on the rare occasion where he experienced problems in obtaining medication for a patient, he relied on the co-operation of other pharmacies in the area. Mr Ahmad advised that he had built a solid relationship with the other pharmacies.

In response to questioning from **Dr Johnson**, Mr Ahmad advised that his pharmacy delivered to a wide geographical area which stretched further than Lenzie. He delivered to the west end for patients who had moved out of the area, but had retained their GP in Kirkintilloch. He advised there was no real barrier to where he would deliver.

In response to questioning from **Mr MacIntyre**, Mr Ahmad advised that he delivered oxygen to Lenzie and also some monitored dosage systems.

There were no questions to Mr Ahmad from **Mr Thomson, Mr Stewart Daniels, Councillor Rebecchi or the Chair**

Summing Up

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

Mr Tait advised that the issue of neighbourhood was complex. He advised that a neighbourhood did not need to contain a pharmacy for the provision of services to be adequate. Even taking into consideration the increased population from the new housing developments, this would only redress the population which had left the area since the last census. Pharmaceutical services were adequate.

Mr Ahmad advised that Mr Ferguson had created a neighbourhood or divide in a community which was wholly seen as Lenzie. He advised that socially there was little deprivation in the area. Lenzie as a whole in the past and at present had been served efficiently and thoroughly by the current pharmacy contractors and Mr Ahmad personally had no doubts that this service would continue in the future. He believed that the granting of the application was neither necessary nor desirable.

The Applicant advised that South Lenzie was a distinct neighbourhood, however as he had explained his application was based on the inadequacies of the current service which forced people to travel to Kirkintilloch to access pharmacy services. This was borne out by the prescription numbers. As a result this inadequacy existed in both South Lenzie and Lenzie.

The population of Lenzie was so large as to be well outwith the norm to be served by just one pharmacy and with the population due to grow by about 25%, the inequity of access would only get worse. His proposed premises were located in an area where parking improvements were to be made and next door to a GP surgery. Granting this application

would ensure adequate pharmacy services in the neighbourhood of South Lenzie and ensure the town was ready to meet the challenges of the ageing population and deliver the new elements of the pharmacy contract.

He advised that the application had the support of the Community Council, the CHP and the local MP.

Before the applicant and interested parties left the hearing, the Chair asked Mr Ferguson, Mr Tait and Mr Ahmad to confirm that they had had a full and fair hearing. All confirmed individually 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 before them, the PPC also 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, namely:
 - Boots UK Ltd – various addresses;
 - Lloydspharmacy Ltd – various addresses;
 - Pulse Pharmacy – 10 Newdyke Road; and
 - Bannerman's Pharmacy – 75 Merkland Drive.
- b) The Greater Glasgow & Clyde Area Medical Committee (GP Sub-Committee);

The Committee noted that in accordance with the requirement to consult the public, notification of the application had been sent to:

- c) - The Kirkintilloch Herald (advert run on Wednesday 21st July 2010) – no responses were received;
- d) - East Dunbartonshire CH(C)P – response received outwith consultation period;
- e) The following community councils:
 - Kirkintilloch Community Council – no response received;
 - Lenzie Community Council – one response received; and
 - Waterside Community Council – no response received.

The Committee also considered;-

- f) The location of the nearest existing pharmaceutical services;
- g) The location of the nearest existing medical services. The Committee noted that the branch surgery adjacent to the Applicant's proposed premises had not plotted on the map provided within the Committee's papers (Page 30). This was due to a technical error with the mapping software. Mrs Glen confirmed the location of the surgery, along with the days and hours during which it was open;
- h) Demographic information regarding post code sectors G66.1, G66.4 and G66.5. The Committee noted the typographical error on Page 28 and that the figure of working persons within the post-code should be 95.6%;
- j) Information from East Dunbartonshire Council's Roads and Neighbourhood Services Department and Department of Development & Regeneration Services regarding future plans for development within the area;
- k) NHS Greater Glasgow and Clyde plans for future development of services; and
- l) Patterns of public transport in the area surrounding the Applicant's proposed premises.

DECISION

Having considered the evidence presented to it, and the PPC's observation from the site visit, the PPC had to decide firstly 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, and the Interested Parties, in relation to the application. The Committee considered that the neighbourhood should be defined as follows:

North: Boghead/Gallowhill Road, crossing Kirkintilloch Road and continuing along open land at Sports Centre to meet Kirkintilloch Link Road;

East: Kirkintilloch Link Road, following the road south to its meeting with Burnbrae Road;

South: Burnbrae Road following west on to Stepps Road, crossing Stepps Road to include Gadloch View and Gadloch Avenue. Moving north across Lenzie Golf Course continuing west along Crosshill Road from junction with Victoria Road; and

West: Crosshill Road to its meeting with Boghead Road.

In the Committee's opinion Boghead/Gallowhill Road marked the delineation between Lenzie and Kirkintilloch. Residents beyond this would not consider themselves resident of Lenzie. The Kirkintilloch Link Road was a major new boundary running the length of the neighbourhood. The South boundary took into consideration local opinion and desirability of residents to be associated with Lenzie. Crosshill Road marked the delineation between open ground and farmland.

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 within 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 with an additional six pharmacies operating within the adjacent settlement of Kirkintilloch. These pharmacies provided the full range of pharmaceutical care services including supervised methadone, needle exchange and domiciliary oxygen. The Committee considered that the level of existing services did ensure satisfactory access to pharmaceutical services for the significant population within the defined neighbourhood. The Committee therefore considered that the existing pharmaceutical services in the neighbourhood were adequate.

The Committee noted the Applicant's comments regarding the proposed parking restrictions being brought in to the area and considered that these might well have the same detrimental effect to the area adjacent to his proposed premises, as it would to the area beside Boots Pharmacy.

The Committee agreed that the new housing development might result in an increase in population within the area. They were confident however that the existing network was well placed to accommodate any demand that might be generated. The likely residents would be mobile, relatively young and of good health. They would move towards Kirkintilloch or Robroyston for their everyday services.

The Committee noted that the pharmacy provided all core services required under the Pharmacy Contract, along with some of the supplementary services such as methadone supervision.

The Committee considered the Applicant's various reasons for granting the application and while they agreed they were commendable, did not feel they led to a conclusion that the current service in the area was inadequate.

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

In accordance with the statutory procedure the Chemist Contractor Member of the Committee Alasdair MacIntyre left the room during 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 Alasdair MacIntyre rejoined the meeting at this stage.

3. ANY OTHER COMPETENT BUSINESS

There was no other competent business.

4. DATE OF NEXT MEETING

The next meeting of the Committee will take place on 3rd March 2011.